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Long Creek Youth Development Center
Board of Visitors 2017/2018 report

The Children's Law and Policy Center provided an independent evaluation of the Long Creek Youth Development Center last year, and found Long Creek to be understaffed, and ill equipped to deal with the serious mental illnesses of many of its residents. Additional reporting from the Muskie School and Maine School of Law suggest smaller regionally based facilities. A number of groups have called for Long Creek to close its doors.

Whether Long Creek ought to be closed or fixed can only be considered by careful review of alternative treatment options for Long Creek's current residents, for those who may need such a center in the future, and for preventing the need for such high level of care. Simple closure does not find a solution, and frankly it stops a much greater conversation. How do we approach this differently?

In my judgment, we have a public health crisis that has received inadequate attention. We cannot deal with this policy issue until we understand the root causes that bring youth to Long Creek, alternative treatment options, and preventive programs for these youth.

Let's take a look at whom these youth are? Some have committed very serious crimes including murder, manslaughter, and assault. Some youth have mental health issues ranging from post traumatic stress disorder, anxiety, depression, attention-deficit-hyperactivity disorder, attachment issues, mood disorders, often coupled with substance use issues.

Many of these youth have experienced the depravity of chronic poverty or homelessness. Many have experienced trauma and abuse often at the hands of those they are to trust. Some of these youth have been sex trafficked right in their own communities and many of these youth seek relief through substance use.

And, in Maine we currently have no avenue of keeping some at-risk youth safe, who are in need of services, unless we utilize the juvenile justice system or meet criteria for hospitalization. How then do we help youth in need of services?

I believe the help youth are looking for is NOT to close any doors before we've opened others. This is not simply a juvenile justice issue. The juvenile justice issues are symptomatic of other underlying issues, which are why we have to look at this first and foremost as a public health issue. In fact, I believe it's a public health and safety crisis.

These youth suffer from adverse childhood experiences and trauma. They suffer from being victims themselves, before they victimized others. These youth suffer from a childhood of brain and body development often wired by trauma. We need to dig deeper to the root causes. We need to build better, more effective and efficient health care wellness and treatment programs in both interventions and prevention. Such transformations can also bring different regulatory oversight rather than correctional standards.

We did not arrive here overnight. Long Creek was once a national standard bearer. In the last few years, Long Creek has gone from being an exemplar among juvenile justice developmental facilities, to a program that's had serious safety and quality concerns, despite the best efforts of committed, hardworking and well-intended staff.

We have been down this unfortunate road before. We have had lawsuits and consent decrees. I think we can all recognize the parallels in how we have treated our most vulnerable. We have Riverview, AMHI, and lessons learned from Pineland. Long Creek too, was the result of much needed reform of the Maine Youth Center.

In our current governing environment we must shift away from what appears to be a restricted, non-transparent and siloed approach, and shift toward a collaborative, collective voice to solve the public health and safety issues we are facing today.

Maine has fallen behind in responding to the public health needs of our youth. The approach we need now requires expertise, innovation, courageous leadership and a collective voice. We need to assess state-of-the-art adolescent forensic youth care and treatment models in the US, and abroad, for those who have committed significant crimes with or without significant mental health issues. And we need to identify exemplary community-based prevention and intervention continuums of care. As the Chair of the Board I recommend:

1. Appoint an oversight committee to audit/review the current medical contract with Correct Care Solutions to:
 - Review efficacy, efficiency, policy and practices of mental health and medical programs, and intended outcomes for youth.
 - Review current practice of youth referred and placed out of state.
2. Commission a committee, with an accelerated time frame:
 - Recommend a full continuum of comprehensive, evidence-based services statewide in both interventions and prevention care.

- Recommend a quality assurance/oversight board with public health regulatory standards, and evidence-based measurements in an effort to uphold and maintain the highest quality of care in all areas of treatment and intervention.
 - Committee members should possess expertise in areas of psychiatry, mental and behavioral health, disability rights, substance use, education, diversity and cultural competency, juvenile justice reform, child welfare, public health, legislators, and interested funders.
3. Consideration and discussion of appropriate placement for the juvenile justice system outside of adult corrections, such as, child welfare or public health departments.

Tonya C. DiMillo, Chair, BOV, LCYDC