ASSESSMENT OF JUVENILE OFFENDERS AT JUVENILE CLASSIFICATION HOMES IN JAPAN

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I. INTRODUCTION

This paper summarizes the current situation of assessment and classification systems for juvenile delinquents in juvenile classification homes in Japan and presents some ideas to improve and enhance the quality of assessment. The paper consists of four parts, (1) an outline of juvenile correctional institutions in Japan; (2) the basic framework of classification at juvenile classification homes; (3) problems of current assessment systems and development of risk assessment tools; (4) challenges in designing and introducing risk assessment tools.

II. OUTLINE OF JUVENILE CORRECTIONAL INSTITUTIONS IN JAPAN

In Japan, juvenile correctional institutions are composed of juvenile training schools and juvenile classification homes. There are 104 juvenile correctional institutions (52 juvenile classification schools and 52 juvenile training homes) in Japan as of April 2008.

A. Juvenile Classification Homes

A juvenile classification home is mainly designed to admit juveniles who have been the subject of a protective remand decision by the Family Court and to conduct assessments on their physical and mental problems, and criminal predispositions, based on the expertise of personnel in medicine, psychiatry, psychology, sociology, and other academic fields, for a Family Court hearing. Juvenile offenders who committed serious and violent offences or who need immediate protective interventions because of their deteriorated family or social environments usually enter juvenile classification homes.

Each home has a general affairs section and a classification section. A classification section consists of officers in charge of classification and protective detention. Juvenile classification homes are relatively small and 33 out of 52 have less than 20 staff officials.

The number of juveniles newly admitted to juvenile classification homes has been on the decrease in recent years, as shown in Figure 1 of the Appendix.

B. Juvenile Training Schools

A juvenile training school accommodates juveniles subject to a Family Court adjudication to be committed there as a protective measure in order to give them correctional education programmes. There are four types of juvenile training schools (primary, middle, special, medical) categorized by ages, levels of criminal tendency, and physical and mental conditions of juveniles. Males and females are detained separately, except in medical juvenile training schools. The types of schools are decided by Family Court hearings.

Juveniles committed to juvenile training schools may be detained legally, in principle, until they reach the age of twenty. Within this legal detention term, there are three types of treatment programmes which are designed to be conducted in different administrative terms: general short-term programmes (maximum term of detention is six months); special short-term programmes (maximum term of detention is four months); and long-term programmes (maximum term of detention is two years).

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In the following chapters, I would like to introduce how classification homes tackle the assessment of serious and violent juvenile delinquents and how they plan to find a solution to the problems they encounter in their work.

III. BASIC FRAMEWORK OF CLASSIFICATION AT JUVENILE CLASSIFICATION HOMES

Under the Amended Juvenile Law, a Family Court can remand a juvenile into protective detention for two weeks. The term can be extended by a period of two weeks, and this is generally sufficient for the classification of the juvenile to be completed. However, the Amended Juvenile Law also allows for two further extensions, to a total maximum term of eight weeks. This generally only occurs in cases of serious and violent crimes. Classification and assessment have to be completed within this timeframe.

Figure 2 illustrates the regular flow of assessment at juvenile classification homes.

A. Interview for Classification

Individual interview sessions are usually conducted in a bright and peaceful atmosphere to allay the fear and anxiety of the subject juveniles. The interview aims to find out what the juveniles feel and how they respond to their environment, such as their families, friends, schools, and workplaces.

B. Psychological Tests

Group psychological tests are conducted on juveniles within a few days of their entry to a juvenile classification home, aiming to comprehensively understand their intelligence, personality, and attitudes. If more detailed investigation is needed for juveniles’ attributes, individual psychological tests are conducted separately. The following are psychological tests usually conducted in juvenile classification homes:

1. Psychological Tests Conducted in a Group
   - New Tanaka Intelligence Test B
   - Ministry of Justice Personality Inventory (MJPI)
   - Ministry of Justice Sentence Completion Test (MJSCT)
   - Ministry of Justice Attitude Test (MJAT)
   - Ministry of Justice Driver Attitude Test (MJDAT)

2. Psychological Tests Conducted Individually According to Need
   - Wechsler Adult Intelligence Scale (WAIS - III)
   - Wechsler Intelligence Scale for Children (WISC - III)
   - Rorschach Test
   - Thematic Apperception Test (TAT)
   - Baum Test
   - House-Tree-Person Test (HTP)
   - Tokyo University Egogram
   - Szondi Test
   - CRT Driver Aptitude Test

C. Behavioural Observation

In juvenile classification homes, juveniles’ behaviour and attitudes towards tasks such as essay assignments, drawings, paper crafts, group discussion, writing remarks on books or film programmes, etc., are closely observed in order to understand their characteristics and behavioural problems, and to clarify their distinctive lifestyles and interpersonal relationships concretely and objectively.

D. Medical Diagnosis

Health checkups are conducted when juveniles enter juvenile classification homes. If a juvenile is found to be suffering from an injury or illness, he or she will be treated by a medical doctor. Juveniles suspected of having a mental disorder will undergo examination and diagnosis by a psychiatrist.

E. Classification and Assessment Report

Finally, the classification and assessment report is developed and submitted to the Family Court. This includes the treatment recommendation which is based on the analysis of the personal information collected
through the methods mentioned above and determines the types of protective measures necessary. The report is recorded and sent to a Family Court as a supporting document for the hearing. Usually one psychologist is assigned to develop the report; however, in difficult cases, such as serious and violent juvenile offences, several psychologists will jointly work on collecting and analysing information and developing reports.

The judge determines the protective measures to be taken for the juvenile based on the results of the social inquiry report prepared by Family Court probation officers, the classification and assessment report, and hearing procedures. These measures include placing juveniles under probationary supervision, commitment to a juvenile training school, and commitment to a support facility for the development of the self-sustaining capacity of children. When the judge considers it unnecessary to take protective measures, the case is dismissed after giving an admonition to the juvenile. If protective measures are ruled necessary, the results of hearing are sent to the organizations in charge of treatment, such as juvenile training schools or probation offices.

IV. PROBLEMS OF CURRENT ASSESSMENT SYSTEMS AND DEVELOPMENT OF ACTUARIAL RISK ASSESSMENT TOOLS

A. Present Situation and Issues of Classification

The main purpose of classification systems is to analyse the offending behaviours and to support the Family Court in understanding the risks of reoffending and the protection needs of juveniles in order to make proper protective treatment orders. The classification report is also used to make an appropriate intervention plan at treatment institutions (such as juvenile training schools) and community-based treatment agencies.

The current classification system for juvenile offenders in Japan functions well on the whole, but there are some problems to be solved to improve and enhance the quality of assessment.

1. Reliability and Validity of the Classification Report

In the current classification system, officers in charge (psychologists) have considerable autonomy in how they assess juvenile offenders and what to recommend in the classification report. Although the supervisors check the results of assessment and classification, the quality of the assessments depend upon the skills and knowledge of each psychologist. We have training programmes and manuals specifically tailored for psychologists in charge of juvenile cases which focus on the methods of clinical interview, psychological testing, and behavioural observation. However, there are many discrepancies among psychologists in terms of professional skills and knowledge. Moreover, there is no comprehensive and standardized assessment inventory for measuring the risk of reoffending based on empirical research. As described above, the aim of the classification report is to assist the court in determining the most appropriate treatment method. So, we need more consistent and validated approaches to measure the risks and needs of juveniles.

2. Planning and Evaluation of Treatment Programmes

There is limited empirical research on the recidivism of juvenile offenders in Japan, and also limited research on the evaluation of the effectiveness of treatment programmes practiced in juvenile training schools and in probation offices. It is difficult for practitioners to measure objectively changes of risk factors which are composed of attitudes, cognitions, and behaviours related to reoffending, because as mentioned above, there is no standardized assessment inventory for measuring the risk of reoffending based on empirical research.

The introduction of a standard assessment instrument which evaluates offending-related risk and need would enhance the planning of intervention, the evaluation of the effectiveness of institutional and non-institutional correctional treatment, and the collaboration of multiple agencies.

B. Overview of Risk Assessment Tools

During the past 20 years, there have been significant developments in the area of offender assessment. The introduction of actuarial risk assessment tools helps practitioners to evaluate the risk of recidivism and to plan appropriate intervention programmes. Much evidence-based research has shown that actuarial assessments of risk are significantly superior to clinical assessments.
Representative actuarial risk assessment tools which are used in practice in Western countries are as follows:

1. **Violent Offenders**
   - VRAG (Violence Risk Appraisal Guide)
   - HCR-20 (Historical Clinical Risk Management-20)

2. **Sex Offenders**
   - ERASOR (Estimate of Risk of Adolescent Sexual Offense Recidivism)
   - Static-99
   - MnSOST-R (Minnesota Sex Offender Screening Tool-Revised)
   - VASOR (Vermont Assessment of Sexual Offender Risk)
   - SORAG (Sex Offender Risk Appraisal Guide)

3. **Juvenile Offenders**
   - YLS-CMI (Youth Level of Service / Case Management Inventory)
   - ASSET

Andrews, Bonta and Wormith (2006) described the development process of risk assessment tools. The first generation consisted mainly of unstructured professional judgments of the probability of offending behaviour. A variation of this approach is now called “structured clinical judgments”. Second-generation assessments were empirically based risk instruments but were atheoretical and consisted mostly of static items. Third-generation assessments were also empirically based but included a wider sampling of dynamic risk items, or criminogenic needs, and tended to be theoretically informed. The fourth-generation assessments guide and follow service and supervision from intake through case closure. With post-closure follow-up, outcome may be linked with intake assessments of risk, strengths, need, and responsivity; with reassessments; and with service plans, service delivery, and intermediate outcomes. The point is not only the development of management information systems but also the development of human service assessment and treatment systems. A major goal of the fourth generation instruments is to strengthen adherence to the principles of effective treatment and to facilitate clinical supervision devoted to enhancing public protection from recidivism. Examples of the fourth generation instruments include the Offender Intake Assessment (OIA) of the Correctional Service of Canada and the Level of Service/Case Management Inventory (LS/CMI).

**C. Present Situation of Design and Development of Risk Assessment Tools in the Japanese Criminal Justice System**

In our country, an actuarial risk assessment tool called ‘RAT’ (based on Static-99) was introduced to assess adult sex offenders in 2007, but unfortunately, there is not yet any such tool for juvenile delinquents. The Juvenile Correction Division of the Correction Bureau of the Ministry of Justice, which is in charge of the administration of juvenile classification homes and juvenile training schools, is now planning to develop a risk assessment tool for use with juvenile offenders aged 14-19.

It is intended to provide a common framework for assessment. Also it is designed to be different from tools used with adults in order to reflect the particular risks and needs of juvenile offenders. The introduction of such a tool is expected to improve the quality of practice in assessment and planning.

The draft form was designed and influenced by two primary sources: the review of literature relating to risk factors for juveniles and the professional opinions of correctional officers. This trial version of the risk assessment tool has 11 main sections as follows:

- Family relationship (22 items)
- Employment (9 items) or Education (9 items)
- Leisure/Lifestyle (3 items)
- Companions (5 items)
- Criminal history and characteristics of current offence (19 items)
- Substance misuse (10 items)
- Mental problems (3 items)
- Cognition of self and others (6 items)
- Antisocial personality patterns (11 items)
- Antisocial attitudes and beliefs (10 items)
- Motivation to change (4 items)

Assessors are required to rate each item above on a scale of 0-3. Each item has an objective rating, sources of information, terms of rating, criteria of rating, and examples of rating.

This tool includes some static factors (e.g. criminal history) but focuses on dynamic factors as to measure changes over time. Of course, some of the most significant actuarial information is static, including age, gender and criminal history, and they are very important in terms of risk classification, as they can provide the most accurate predictions of likelihood of reconviction. However they gives less help in planning interventions because static risk factors cannot be changed.

This trial tool is not intended to predict specific recidivism such as serious and violent offences, but if juvenile offenders who are most likely to continue to offend could be identified at the earlier stages of their development, we could take steps to prevent further offending. It is not yet decided when and how to introduce this tool into practice at a national level; a pilot study began in March of 2008.

V. POSSIBLE PRACTICAL PROBLEMS IN THE DESIGN AND INTRODUCTION OF RISK ASSESSMENT TOOLS

Several practical problems are expected in implementing the risk assessment tool.

A. How to Merge the Results Obtained from Tools with the Classification Reports

Risk assessment tools are sometimes viewed by practitioners as an isolated piece of work and are not closely linked into practice such as classification report writing. Therefore, before introducing the instrument, it is necessary to establish systems which integrate the results of the instrument into comprehensive assessment procedures, especially the development of the classification report. In sum, it is necessary to introduce a tool to help practitioners to complete the accurate and practical classification report. If the results of the instrument cannot be integrated into inclusive assessments, they will only burden practitioners with extra work. Although actuarial risk assessment tools have their disadvantages, if properly used, they would serve as integrating theory, practice, and research in the area of juvenile offender assessment and treatment. In this regard, it is essential to explain the merits and values of instruments for improving practice to officers who work in the juvenile criminal justice system.

B. Professional Discretion and Risk Assessment Tools

Baker (2002) pointed out that the introduction of Asset as a common assessment tool for England and Wales had sometimes been viewed as part of a “managerialist” agenda which replaced professional discretion with an uncritical routinized approach to practice. Andrews and Bonta (2003) stated that “we must be careful that professional overrides are not used in a haphazard and irrational manner and that they do not become the preferred choice for making predictions.”

As mentioned previously, classification officers in our system have considerable autonomy in how they assess juvenile offenders, and in what they decide to recommend in classification reports. Like the introduction of any novel approach, staff resistance may lead to the undermining of the efficacy of the risk assessment tools. Of course, there is room and need for professional judgment, but we should consider and define what “professional discretion” is and how and when professional judgment is allowed in a whole assessment process.

C. Lack of a Comprehensive Computerized Case Management Database

In Japan, all matters regarding corrections, including the management of correctional institutions, is under administrative control of the Correction Bureau of the Ministry of Justice. Unlike some other countries where a correctional agency manages both the custodial institutions and community treatments, the Rehabilitation Bureau of the Ministry of Justice has control over community-based treatment of offenders in Japan. Each Bureau maintains a separate database; they are not linked to each other. One of the advantages of using risk assessment tools is that data could be collected in a standard way in large numbers across the country. So, it is essential to build a comprehensive computerized case file management system that gathers, stores, and retrieves information through institutional and community-based treatment.
Figure 1: Trends in the number of inmates in juvenile classification homes (1998-2007)

<table>
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<th>Year</th>
<th>1998</th>
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<tr>
<td>Total</td>
<td>19,421</td>
<td>20,382</td>
<td>22,525</td>
<td>22,978</td>
<td>22,767</td>
<td>23,063</td>
<td>21,031</td>
<td>19,628</td>
<td>18,166</td>
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</tbody>
</table>

Source: Annual Report of Statistics on Correction
Figure 2: Flow of classification in juvenile classification homes

- **Admission**
- **Orientation Interview**
- **Physical checkup**
- **Medical examination and diagnosis**
- **Psychiatric examination and diagnosis**
- **Gathering of information from schools, family, etc.**
- **Behaviour Observation**
- **Group psychological test**
- **Framing of classification plan**
- **Further interview for classification**
- **Individual psychological test**
- **Classification meeting**
- **Formulating classification report before hearing**
- **Hearing**
- **Discharge**