

# JUVENILE CRIME PREVENTION IN THAILAND

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## I. INTRODUCTION

Many social problems arouse public concern. One of them is juvenile delinquency, which has been a concern for a long time. This paper presents a brief scope and the duties for juvenile crime prevention of the Department of Juvenile Observation and Protection (DJOP), which is an organization in the Thai juvenile justice system. The paper shows statistical data of juvenile delinquency and important processes leading to crime prevention, particularly assessments before adjudication hearing and interventions in juvenile training centres, which are secure confinements for youth. Challenges and solutions are combined in each topic as well.

The DJOP was established to serve juvenile and family courts before adjudication hearings and after dispositional hearings for juvenile delinquents. It has duties as established by the Juvenile Court and the Juvenile Procedure Act (B.E. 2553) and the Administration of Juvenile Delinquent Rehabilitation Act (B.E. 2561). The goal of the DJOP is to reduce recidivism of juveniles who are adjudicated as delinquent. Minors who are charged and enter the juvenile and family court system are under the age of 18 years and not less than the age of 10 years. The DJOP supervises Juvenile Observation and Protection Centres (JOP) located in all 77 provinces of Thailand and 19 Juvenile Training Centres (JTCs) in main provinces such as Bangkok, Chiang-mai, Rayong, and Song-kha. The JOP centres serve juveniles before adjudication, while the JTCs serve the juvenile after the family court has entered an official disposition order to commit the juvenile. The DJOP's responsibilities, thus, are related to the processes before the adjudicational and after the dispositional phases.

A JOP centre works as an intake unit. At the initial phase of a juvenile court process, all juvenile offenders are referred immediately to the JOP centre. Some of them can be taken into custody by court order. They will be placed in juvenile detention at the JOP centre. The detention provides services for the welfare, health and safety of the detained juveniles. Furthermore, probation officers of the JOP centre conduct pre-disposition reports of all referred juveniles to a juvenile and family court to determine an appropriate disposition.

The pre-disposition report provides essential information for a judge to decide the best disposition and sanctions based on each case and suitable to the youth's needs. It outlines the juvenile's background (i.e. the current offence, the juvenile's past offences, a summary of information concerning family relationships, home environment, the juvenile's educational and employment progress, and results of psychological assessment), a level of a likelihood of future reoffending, a summary of the availability of

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alternative dispositions, and a treatment plan including recommendations for services which are expected to reduce the likelihood of recidivism for a juvenile offender.

After the disposition phase, juvenile delinquents whom a judge decides to place in a confinement facility will be incarcerated in a JTC for periods generally ranging from a few months to a few years. The JTC is commonly known as a juvenile correctional institution. It not only serves incarcerated youths for basic needs, but it also provides rehabilitative treatment programmes, academic and vocational education. If youths have a duration of incarceration for four months, they will be transferred to a reintegration phase and participate in a reintegration programme to prepare to return home, such as planning for their futures. The programme is offered by a social worker and other professional staff. After completing this phase, youths will be released from the JTC and will receive assistance for resettling for one year after release. In addition, the DJOP tracks the recidivism of these youth for three years by checking their re-arrest history from the Criminal Records Division, Royal Thai Police Headquarters.

## II. JUVENILE CRIME STATISTICS

According to the DJOP's statistics of juvenile crime from the fiscal years 2016 to 2019,<sup>1</sup> the numbers of juvenile offenders have continually decreased each year. The number of juveniles arrested and referred to JOP centres were 30,361 in 2016 and 20,934 in 2019. The percentage decrease is 31. Male offenders consistently accounted for more than 90 per cent of arrests of those under age 18. The number of offenders who are 17 years of age is the highest every year. The most common juvenile crimes in Thailand are drug law violations (51% of arrests in 2019), property crimes (14% of arrests in 2019), and offences affecting life and body (10% of arrests in 2019), respectively. These top three crimes are the same each year. However, the percentage of property crimes and offences affecting life and body has gradually decreased since 2015, whereas the percentage of drug law violations has increased. Of every 1,000 youths in 2018, three juveniles were arrested and referred to the JOP centres. The highest arrest rate is seven, which is in the Northeast of Thailand.

For the level of youths' future reoffending, approximately 77 per cent of youth who are assessed have moderate risk of future reoffending, 16 per cent have low risk and 7 per cent have high risk. Three-fifths of all youths held in JTCs had a moderate risk of recidivism. As a result, the JTCs have to provide treatments and rehabilitation programmes affecting the reduction of the likelihood of recidivism of incarcerated youths.

Drawing on DJOP data on 4,167 juveniles who were released from JTCs in 2015, the report found almost half (45 per cent) had been arrested again within three years after release. Also, 41 per cent of the 4,263 juveniles released in 2016 were rearrested. The report showed that the highest rate of rearrest was in the first year after release. Most released juveniles committed drug and property offences. Nevertheless, the number of juveniles who reoffended and who have been diverted from the juvenile justice system is obviously small, which is less than 10 per cent. Most juveniles recommit drug offences.

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<sup>1</sup> Department of Juvenile Observation and Protection (2019). Juvenile crime statistics.

Therefore, emphasis is placed on important processes leading to the reduction of the recidivism rate of incarcerated juveniles in JTCs.

### **III. JUVENILE CRIME PREVENTION**

#### **A. Classification in Juvenile Observation and Protection Centres**

For JOP centres, most tasks relating to crime prevention are completed before dispositional hearing. These tasks are investigation, assessment and making a pre-disposition report. There is an important intake interview by a probation officer. Youths arrested for an offence eligible for juvenile court will be referred to JOP centres by the police. The probation officers use the Risk and Needs Assessment Instrument (RNI) as a guideline for interviewing these youths. The RNI has an objective to assist the probation officers to collect relevant information which can identify a likelihood (or risk) of future reoffending and also youths' needs for treatments and interventions. This instrument contains many items reflecting personal characteristics and life circumstances. The probation officers use this information to make recommendations about dispositions and services matching the youth's needs (i.e. a plan for rehabilitation). The intake process takes about 1.30 hours. Also, the RNI needs the probation officers to gather further relevant information by interviewing the youth's parents and visiting the youth's home, community and school.

The RNI was developed by DJOP's multidisciplinary team including psychologists, probation officers, nurses and social workers, as well as professionals from universities. The theory behind the RNI is the Risk-Need-Responsivity Model (RNR). It is used for guiding offender assessments and treatments. The RNI includes eight domains of criminogenic risks and needs which are family, education and vocation, history of offending, delinquent peers, environment, conduct behaviours, drug use and physical and mental health problems. Each domain has items. Most items are scored, and a total score identifies a likelihood of recidivism, which includes low, moderate and high risk. As the RNI has to be scored for calculating the level of risk which is more complicated, it has changed from paper and pencil to a computer-based programme, which automatically calculates individuals' level of risk of recidivism after entering the data into the RNI programme.

The RNI is functional because its result is more objective and accurate than only professional judgment; however, there are challenges. First of all, probation officers need additional interviewing skills training and related knowledge (e.g. forensic psychology and criminology) to help them establish a good relationship and also gain more relevant and reliable information from youths and their parents. Second, errors of information and missing values in the RNI database need to be improved as statistics provided by data which are full of errors have limitations for analysis and interpretation. Finally, the RNI needs to be reconsidered and amended. There is new empirical evidence and knowledge of criminogenic risks and needs, methods of assessment and other significant models associated with crime prevention (i.e. the Good Lives Model). That information can be developed and applied to the RNI. Additionally, some items in each domain of the RNI should be re-examined for receiving more statistical significance. The DJOP is aware of an opportunity for development, so the RNI is being revised and improved.

#### **B. Reassessment and Interventions in Juvenile Training Centres**

JTCs offer secure confinement. Practitioners in the JTCs are composed of two psychologists, two social workers, two nurses, academic instructors and vocational

instructors. They work as a multidisciplinary team to provide interventions for incarcerated juveniles. First of all, the multidisciplinary team reassesses and further interviews youths for assigning youth to housing, identifying a level of supervision and making an individual rehabilitation plan. The objectives of the plan are to make sure that the JTCs provide specific services meeting each youth's basic needs, to define each youth's criminogenic needs and match them to interventions and treatment programmes, and to keep youths occupied with productive activities. As there are a limited number of professionals for running the interventions and treatment programmes for juveniles, the DJOP trains the instructors to get more knowledge and essential skills for being juveniles' counsellors. Each counsellor is assigned a group of youths to supervise until they are released. The counsellors have two main duties, which include advising youths and ensuring that the youths receive interventions and attend activities as planned.

For implementation of an individual rehabilitation plan, after the multidisciplinary team gathers complete information, a conference is set for discussing and making a decision on the youth's rehabilitation plan. Even though all incarcerated youths have rehabilitation plans tailored to their needs, there is an important challenge existing. These plans are sometimes difficult to completely implement. As juveniles can be categorized in many groups depending on their needs, the JTC needs good management to schedule enough practitioners to run several interventions and activities at the same time. In fact, some JTCs do not have enough practitioners to conduct treatment programmes for youths having serious problems, as well as some basic activities such as programmes assisting youths to adapt themselves for living in the JTC. Psychologists and social workers are available for youths with serious needs, especially mental health problems and mental disorders, and also they have to look after all youths in the JTC to assure that the youths do not have a high level of negative emotions (e.g. anxiety and depression), and staff provide mental health services when they are necessary.

For interventions, most programmes are designed to solve criminogenic needs and strengthen life skills for living in harmony with the community even though there are no specific treatment programmes made only for serious types of offenders. Psychologists use Forensic Cognitive Behavioural Therapy (FCBT), which focuses on cognition, to adjust antisocial attitudes and inappropriate values and beliefs. Anger management and communication programmes are examples of utilizing FCBT. FCBT programmes will be assigned to youths who have a high risk of recidivism with having criminal thoughts, which are identified by psychologists' assessments. Although JTCs do not have specific treatment programmes for serious types of offenders, the JTCs design a system and interventions for responding to these groups of offenders. For serious and high-risk offenders, the JTCs have the system of Individual Routing Counselor (IRC). It is an intensive intervention that provides monitoring, supervising and support for youths. Each youth of this group is assigned an IRC. The IRC provides assistance and supervision since youths arrive at a facility until one year after they are released. One IRC receives 10 - 12 youths to supervise. At first, the DJOP's research on the IRC system showed that it significantly reduced the rate of juvenile recidivism. After implementation of the IRC system in all JTCs, a few challenges for recidivism prevention were found to exist. One of them is an insufficiency of experience and skills of some IRCs to handle serious juvenile cases. The DJOP offers mentors to coach the IRCs who need a consultant for work and also provides intensive trainings to enhance their competencies and knowledge. In addition, there is a professional team from the DJOP headquarters visiting IRCs at their

workplaces to give any suggestions and support. This assistance is likely to make IRCs have more confidence in their jobs.

The DJOP launched a campaign to stop all forms of violence in JTCs a few years ago. Staff and practitioners are trained how to positively communicate and manage negative behaviours instead of harsh control. “Do and Don’t” regulations were implemented to reduce interpersonal violence for staff and youths. In addition, the physical and mental health situation of each youth has become a concern. The DJOP set the standard rules of providing physical and mental health services to guarantee that all youths will be given appropriate services relating to good physical and mental health while they are incarcerated in the JTCs.

According to the Act for the Procedure for Juvenile and Family Court of B.E. 2553 and the Administration of Rehabilitation for Juvenile Delinquents Act of B.E. 2561, all JTCs have to provide education for all incarcerated youths. When youths enter the JTCs, they have to continue their study in non-formal and informal education if they have not finished grade 9. However, youths can study vocational education as an extra course while they are studying primary or secondary education. A big challenge of providing education is an insufficiency of instructors who can teach basic education. The DJOP handles this by taking on educational partners to become involved with the educational activities within the JTCs. These partnerships seem promising; nevertheless, some educational partners can only participate temporally. Good organization to maintain effective collaboration needs to be a top concern.

### **C. Reintegration**

When incarcerated youths enter the reintegration phase, which is about four months before release, social workers provide activities to prepare youths for going back home and living in their communities. In this phase, youths have an opportunity to work as trainees in workplaces. Social workers contact entrepreneurial partners to recruit youths who are interested in working. Youths who want to continue their studies will also get support such as educational funds and information to apply to schools. Family guidance is also available for youths’ families and parents to help them understand youths’ changes while they are incarcerated in JTCs and to be able to support them as they adjust to new environments after release.

Furthermore, youths in the reintegration phase will have their criminogenic risks and needs reassessed. Their families are also interviewed to identify current situations of their relationships, economics, home environments, and families’ concern about youths. The information gained from the assessment and interview will be used to make an individual reintegration plan. This plan determines the frequency of visiting youths, specific assistance and services that are necessary for reducing the likelihood of recidivism after youths are released. The plan covers only one year after release. Partners in communities have a role to supervise and support some youths. They work as assistants to social workers. Only youths who are identified as having a low level of risk and needs will be assigned to the partners.

There are five elements that the DJOP uses as indicators of successful reintegration. The elements include study or work, having productive leisure or recreation, associating with conventional peers, having good relationships with family and having an appropriate place to live. These elements are a part of the Good Lives Model (GLM) of offender

rehabilitation for lives in transition.<sup>2,3</sup> The GLM assumes that enhancing personal fulfilment will lead to a reduction of criminogenic needs. It promotes an alternative and enhancement to RNR by focusing on positive factors and strengths of offenders. The five elements are used to make a reintegration plan for youth in the reintegration phase. Most assistance and services are offered to youths during this phase to help them accomplish those five elements.

A challenge in the reintegration phase is that a social worker of a JTC has to refer youths and their reintegration plans to social workers of JOP centres located in provinces where they will live after leaving the JTCs. The social workers of the JOP centres have responsibilities to supervise and assist them at least one year after release. As a result, the social workers of the JOP centres have to develop good relationships with youths and their parents for a certain time period. A poor relationship between a social worker and his/her clients can lead to failure of following the plans and loss of cases.

#### **D. Community Cooperation**

Having good partnership is important for the DJOP's operations to reach its ultimate goal, which is a reduction of juvenile recidivism. Roles of partners in communities can be classified into four types. They are roles of support or enhancing any activities related to treatment programmes, basic and vocational education, employment and study, and supervision of youths after release. Partners can be any person in communities, organizations, companies, schools and so on. However, their qualifications have to meet the DJOP's criteria.

Building cooperation with partners for working with JOP centres and JTCs are designed by using the concept of public participation. Participation can start at a moderate level to an intensive level. The DJOP expects an intensive level of participation for working with partners. The intensive level is engagement. At this level, partners have opportunities to give feedback and receive information, plan, make decisions and work together with the centres.

There are a few processes of seeking and preparing partners for working with JOP centres and JTCs. First, each youth's needs, according to the five elements of the GLM, are surveyed, and then the survey data are used to seek partners whose roles match the youths' needs. The partners who are interested in working with the centres and supporting youths will get essential information to clarify their roles and explain how to work with youths, such as information about the centres' mission and duties, juvenile delinquency, factors relating to delinquency and tertiary crime prevention. Then, a conference between the centres and partners will be held for sharing, discussing and making an annual operation plan. A few challenges include an inconsistency of encouraging partnerships and insufficiency of maintaining strong relationships between partners and the centres. However, the DJOP usually reviews and evaluates outputs and processes as well as obstacles found in operations, and it will propose new solutions and methods to solve the problems at the end of the year.

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<sup>2</sup> Ward, T. (2002). Good lives and the rehabilitation of offenders: Promises and problems. *Aggression and Violent Behavior*, 7(5), 513-528.

<sup>3</sup> Fortune, C. A., Ward, T., & LL Polaschek, D. (2014). The Good Lives Model and therapeutic environments in forensic settings. *Therapeutic Communities: The International Journal of Therapeutic Communities*, 35(3), 95-104.

#### **IV. CONCLUSION**

The trend of juvenile crime in Thailand has continually decreased for a few years; however, the rate of juvenile recidivism is likely to stabilize. The DJOP is responsible for crime prevention, particularly reducing juvenile recidivism. Important operations of the DJOP leading to tertiary crime prevention comprise our significant processes which are assessing juveniles' criminogenic risks and needs, appropriately matching interventions and juveniles' criminogenic needs, reintegrating incarcerated juveniles before release from JTCs and supporting community cooperation for crime prevention. There are some challenges that the DJOP has been working on, such as a revision of an assessment tool and sustainability of operations.