EVIDENCE-BASED & STRENGTH-CENTERED APPROACHES for
WORKING WITH YOUTH

Prevention & Treatment For Adolescent Delinquency
Substance Abuse & Criminal Conduct

October 24-25, 2013
San Francisco, California, USA

Joyfields Institute Certificate Education
www.joyfields.org
PROGRAM AGENDA-AT-A-GLANCE

Plan now to join us in gorgeous San Francisco, California, this October 24-25, 2013 for comprehensive and exciting workshop led by world renowned author and psychologist, Harvey Milkman, PhD, Professor.

Promoting alternative recreational activities, improving self-efficacy, building social competence and providing broadening cultural experiences are the most effective strategies for delinquency and drug abuse prevention. What has been most difficult to achieve is the translation of these factors into viable strategies that communities can actually implement.

Cognitive restructuring and coping skills training can be effectively taught to adolescents in various settings including correctional or community-based settings providing that the material is presented in an interactive and multi-sensory format, drawing on themes that have both immediate and long-term importance to the target population. Counseling strategies are specifically designed to engage youth as architects of their own plans for pro-social change.

This seminar envisions a juvenile justice system that focuses on positive youth development. Significant reductions in juvenile crime, substance abuse and emotional distress can be achieved through an integrated system-wide focus on prevention, treatment, rehabilitation and restoration.

Moving beyond simple risk-avoidance, guidelines are presented for empowering a network of evidence-based, cost effective, and strategically situated community programs across a continuum of prevention, intervention and treatment services. Special attention is devoted to the facility-to-community transition process for youth in out of home placements.

Taught by eminent psychologist and author Dr. Harvey Milkman, this program teaches evidence-based strategies for teenagers and essential components of an effective treatment program for working with youth.

WHAT WE WILL COVER

Participants will also learn;

- Adolescent development and pathways to juvenile crime and drug abuse
- Fundamental principles of cognitive-behavioral treatment for juvenile justice clients
- Comprehensive guidelines for treating female juvenile justice clients
- Relationships between adolescent brain development, substance abuse and criminal conduct
- How to address trauma and mental health issues in the context of juvenile justice treatment
- Methodology for engaging clients in developing their individualized plan for change
- Strategies for addressing gang affiliations
- Techniques for developing a support network upon community re-entry

PARTICIPANTS WILL EACH RECEIVE COPIES OF

3. Modeling Cognitive-Behavioral Skills for At-Risk Adolescents (2hr. DVD, retail value $89.00)

** Agenda Subject to change**
Section I. Theoretical and Research Perspectives

This section describes the theoretical foundations and research evidence for development and implementation of adolescent-focused treatment programming. Included are discussions of risk and resiliency factors that mediate problem behaviors; mental health factors associated with deviant activity; bio/psycho/social underpinnings of substance abuse and crime; the action of AOD on the developing adolescent brain; factors that predict adolescent-limited and life-course-persistent patterns of criminal involvement; gender differences and treatment implications for juvenile justice clients; treatment enhancement through cultural mindfulness; perspectives on assessing risk and resiliency for screening; in-depth treatment planning; and outcome assessment.

1. Adolescent Development and Pathways to Problem Behavior

Deviant identity formation (i.e., antisocial actions based on acceptance of values, norms, and patterns of behavior alien to the framework of mainstream culture) is considered in light of current research on how adolescent brain development interacts with the teenager’s relationships with parents and peers and environmental circumstances. Eight theoretical models are used to examine causes of adolescent substance abuse and criminal conduct. Research evidence is presented for an array of risk and protective factors in the individual, family, and community infrastructure. Various subtypes of adolescent problem behaviors are analyzed according to specific risk factors. This section concludes with a discussion of the need for a strengths-based treatment model addressing delinquency, substance abuse, and co-occurring mental disorder.

2. Causes, Correlates, and Consequences of Teenage Substance Abuse

Information is presented on prevalence and severity of adolescent substance use and abuse, followed by discussion of imminent drug threats. Key factors in the etiology of adolescent-onset substance abuse are examined. These include social competence, life skills, deviant peer affiliations, and positive expectancies for substance use. Adolescent problem drinking is examined, including variables associated with teenage drinking and driving. The drug-crime relationship during adolescence is explored, as is the relationship between substance abuse and violence. The possible contribution from prescription drugs to teenage violence is also addressed. Ethnic identity is explored as a potential risk or protective factor for substance abuse during adolescence.

3. Mental Disorder within the Juvenile Justice Population

Most people experience adolescence without major emotional or behavioral disturbance. However, a large subpopulation of adolescents manifests symptoms of different mental disorders and become involved in delinquency, crime, and substance abuse. Diagnostic criteria and causal factors are examined for categories of mental disorder with the highest probability of intersecting with delinquency, crime, and substance abuse. Correlates and moderating factors are examined in profiles of attention deficit/hyperactivity disorder, oppositional defiant disorder, conduct disorder, some personality disorders, and post-traumatic stress disorder. Information on diagnosis and psychosocial treatments is provided, as well as a summary of the arsenal of psychotherapeutic medications used in contemporary clinical practice. Issues of sequencing medication and cognitive-behavioral treatment are addressed.

4. Substance Abuse and the Adolescent Brain

Some very complex changes in brain “wiring” take place during adolescence, the most profound of which seem to occur in the frontal lobes. As a consequence of such changes, alcohol and other drugs affect adolescents and adults differently. An explanation of the neurochemical basis for brain functioning is followed by discussion of factors involved in adolescent brain development. Mechanisms of action are delineated for major categories of alcohol and other drug abuse, including use of alcohol, methamphetamine, cocaine, marijuana, opiates, Ecstasy, inhalants, hallucinogens, and tobacco. Each section concludes with a description of the possible long- and short-term effects of each type of substance abuse.
Section I. Theoretical and Research Perspectives (contd)

5. Juvenile Crime and Violence

General patterns of juvenile offending are investigated as well as the major correlates of juvenile crime. Two crime trajectories are identified—life-course-persistent and adolescence-limited. The etiology of each is explained, and implications for treatment and policy are explored. A developmental perspective on youth violence is presented, including studies about the trajectory of violent crime over the course of childhood and adolescence. A profile of serious criminality by juvenile offenders includes neurological, psychiatric, and sociocultural components. The phenomenon of juvenile homicide is explored, as well as recidivism among adolescent violent offenders. Finally, the situation of juveniles in the criminal justice system is investigated, concluding with a discussion of implications for treatment and policy.

6. Addressing Gang Culture in a Treatment Context

Given that more than 20,000 gangs consisting of approximately 1 million members exist in the United States, it is impossible to conceive that any serious effort to provide treatment programs for juvenile offenders does not include consideration of gang influence on the majority of adjudicated youth and in what ways it can be addressed in the context of treatment. Discussion of assessment of risk and protective factors around gang affiliation is provided, with the goal of targeting whole communities and enhancing the lives of their members. Relative to treatment, our primary focus is on attempts to change the attitudes, beliefs, and behaviors of gang-affected youth, targeting their strengths and abilities and helping them to perceive their environment (the accumulation of risk factors and developmental disruptions) in new and more optimistic ways. Several focused gang intervention strategies delivered within juvenile correctional facilities are discussed. We examine the potential benefits of interagency teams, typically comprised of outreach youth workers, police, probation officers, parole officers, and social service providers.

7. Female-Focused Treatment in the Juvenile Justice System

Issues of gender as they pertain to juvenile problem behavior are discussed. The major psychosocial factors associated with the development of problem behavior in adolescent girls are presented. This sets the stage for analysis of girls and status offenses; sexual abuse factors as they contribute to female substance abuse and crime; and the interrelationships among gender, gangs, and juvenile offending. The need for gender-specific programming is elaborated on. Gender norms are explored in terms of how they influence patterns of juvenile substance abuse, crime, and violence. Gender norms are also discussed in relationship to teen dating and the widespread phenomenon of date rape. Characteristics of sexually abusive adolescents are examined, followed by a discussion of implications for treatment and social policy.

8. Youth Culture and Diversity

Adolescent subgroups are viewed in terms of common beliefs, values, behaviors, and communication patterns. Effective treatment builds upon the developmental process of forming attitudes and behavioral patterns that foster a sense of belonging and purpose during adolescence. Beginning with an analysis of the adolescent quest for self-identity and social role definition, cultural similarities and differences are explored within four adolescent subgroups: violence based, music based, anti-authority, and thrill seeking. Due to the relative salience of peer influence compared to adult influence (in the short term), a treatment focus on commonalities of experience and purpose among group members can promote an “in-group” identity. Through a strength-based perspective, group members become aligned with positive attitudes about treatment and the common goal of achieving positive treatment outcomes. A continuum of cultural competence among counseling personnel is delineated with guidelines presented for how treatment providers can improve their counseling proficiencies by becoming mindful of their own cultural proclivities as well as the cultural orientations of each member of the treatment group. The three elements germane to cultural proficiency are understanding, respect, and support.

* Agenda and speakers subject to change without notice
Section II. Foundational Treatment Models: Evidence-Based Approaches

This section explains the basic principles of cognitive-behavioral treatment, including the primary focal points of cognitive restructuring and social skills training. The integration of therapeutic and didactic approaches, as well as the synthesis of correctional and therapeutic strategies, results in improved relapse and recidivism prevention outcomes. Visual schemas, used throughout the program, are introduced to clarify how thinking and behavior are related to learning and change. A visual blueprint of the sequential model for relapse and recidivism prevention is provided. Section II shows how generic CBT principles are applied for juvenile justice clients and how these basic approaches are adapted for individual, family, and residential treatment applications.

1. Treatment Systems, Modalities, and Models of Care

An array of adolescent treatment approaches are discussed, each utilizing CBT as the primary intervention tool. We begin with a discussion of motivational enhancement, a set of principles that promote client engagement (i.e., treatment alliance), including willingness to discuss relevant treatment issues and developing a plan for continued therapeutic progress. Motivational enhancement strategies are generic across individual, family, and group modalities. Family treatment models are examined, with a common premise that improvement in the dynamics of the family will result in increased resiliency for all involved. In the domain of residential treatment, the therapeutic community (TC), a highly structured long-term treatment approach where the community itself acts as therapist and teacher, is discussed.

2. The Cognitive-Behavioral Model and Core Treatment Strategies for Adolescents

Behavioral and cognitive approaches have merged to form the primary psychotherapeutic model for treating criminal conduct, substance abuse, and mental disorder. The essential purpose of this training element is to elucidate cognitive-behavioral therapy specifically designed for adolescents. Attraction to a deviant subculture and initiation into substance abuse, promiscuous sexuality, gangs, and criminal conduct can be seen as attempts (albeit maladaptive ones) to survive, given cognitive appraisals derived from harsh and punishing life events. As alienation and social problem behaviors become repetitive, emerging juvenile justice clients increasingly fail to perceive positive cognitive and behavioral alternatives. Deviant identities become supported by fleeting feelings of empowerment. Nonjudgmental support and concern and accurate information, rather than blame and confrontation, can move an adolescent toward increased personal responsibility and self-efficacy. Counselors and treatment providers serve as role models who demonstrate positive coping skills for dealing with adversity and challenge throughout the life trajectory.

3. Community Reintegration: Reinforcing Change through Continuing Care

Approximately 100,000 youth are released annually from correctional placements. Considering developmental delays among young adult offenders and considering inmate releases through the age of 24, the number increases to 200,000 annually. Many of these youth consider reentry to be the most serious challenge in their lives. While several aftercare projects have been developed during the past few decades, reintegration of juvenile offenders remains problematic, and recidivism rates remain high. Juvenile facilities rarely have alumni programs, nor is it general practice to assign case managers upon release. Furthermore, community support agencies are not well coordinated. Many incarcerated youth face reentry with a lack of education, job training, job experience, family ties, pro-social friends, and housing, plus they bear the additional stigma of incarceration. They return to the same communities where they came from. This training component summarizes the recent literature on society’s attempt to meet the dire need for improving aftercare services for juveniles.

Section III. The Treatment Curriculum

Implementation and operational procedures for delivery of an adolescent focused, cognitive-behavioral, group treatment curriculum are provided. This section presents detailed guidelines for how to introduce cognitive-behavioral treatment in an atmosphere of safety, trust, and rapport within adolescent settings. The theoretical and research basis for sequential treatment phases are presented as clients move through Challenge to Change; Commitment to Change; and Ownership of Change. Hands-on counseling skills building exercises are the primary focus of this core training segment.

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Harvey Milkman, PhD, Professor, Department of Psychology, Metropolitan State University of Denver

Harvey B. Milkman, Ph.D. received his baccalaureate degree from City College of New York and his doctorate from Michigan State University. He is currently professor of psychology at Metropolitan State University of Denver.

His doctoral research was conducted with William Frosch, M.D., at Bellevue Psychiatric Hospital in New York City, on the "User's Drug of Choice." In 1980-81, he completed a sabbatical exploration of addictive behavior in Africa, India and Southeast Asia. In 1985-86 he was recipient of a Fulbright-Hays Lectureship award at the National University of Malaysia. He has represented the United States Information Agency as a consultant and featured speaker in Australia, Brazil, Iceland, The Netherlands, Peru, Turkey and Yugoslavia.

Dr. Milkman is a consultant and advisor to The Division on Addiction Cambridge Health Alliance, an affiliate of Harvard Medical School. From September 1992 – June 2002, he was author, principal investigator and director of Project Self-Discovery: Artistic Alternatives for At-Risk Youth, a national demonstration model funded by The Center for Substance Abuse Prevention and the Edward Byrne Foundation.

In addition to serving as featured author and blogger for Psychology Today, he has authored numerous published articles on the personality characteristics of drug abusers and behavioral addiction.

Dr. Milkman is principal author of the following books:

- Pathways to Self-Discovery and Change: Criminal Conduct and Substance Abuse Treatment for Adolescents – Provider’s Guide and Participant's Workbook (Milkman, H. & Wanberg, K. 2012);
- Craving for Ecstasy and Natural Highs: A Positive Approach to Mood Alteration (Milkman, H. & Sunderwirth, S., 2010);
- Criminal Conduct and Substance Abuse Treatment for Women in Correctional Settings: Adjunct Provider’s Guide (Milkman, H., Wanberg, K. & Gagliardi, B, 2008);
- Project Self-Discovery: Artistic Alternatives for High-Risk Youth (Milkman, H., Wanberg, K., & Robinson, C., 1996);

Co-editor of:

- Treatment Choices for Alcoholism and Substance Abuse (Milkman, H & Sederer, L, 1990);
- Addictions: Multidisciplinary Perspectives and Treatments (winner of the Choice Award for Outstanding Academic Books (Milkman, H., & Shaffer, H., 1983).
- Criminal Conduct and Substance Abuse Treatment: Strategies for Self-Improvement and Change: The Provider’s Guide (Wanberg, K., & Milkman, H., 2008);
- Criminal Conduct and Substance Abuse Treatment: Strategies for Self-Improvement and Change: The Participant's Workbook (Wanberg, K., & Milkman, H., 2006);
- Driving with CARE: Education and Treatment of the Alcohol or Other Drug Driving Offender (Wanberg, K, Milkman, H. & Timken, 2006).

* Agenda and speakers subject to change without notice
What others have said about Joyfields Institute Evidence Based programs

“Joyfields staff were very attentive, professional, and well-organized. The presenter was clearly very knowledgeable and professional. A positive experience.”

“Personally I felt for the first time that this program was developed for the work that I do.”

“I really enjoyed the Vegas Conference. You guys are a class act. ... it was a wonderful group and there are some people I will stay in touch with. Good luck with all of your future activities. I hope to attend another of your conferences and will recommend them to all my friends and colleagues.”

“I look forward to joining JOYFIELDS in other future trainings as well.

“Thank you so much for this quality workshop. I really enjoyed the experience, and the people from around the world who were present. Please know this was one of the best learning experiences I have had...

“Fantastic workshop!”

“I LOVED the fact it was a smaller size group of people with different backgrounds and from different places/countries!!! I also loved how the Joyfields team worked so nicely together and helped make us all (me) feel good and comfortable I look forward to joining JOYFIELDS in other future trainings as well.”

“It was informative and helped in many ways. I really enjoyed the hands on approach and the way it was made personal for each participant in their field.”

“I was very impressed with the depth of knowledge the facilitators possessed about evidenced based best-practices in the industry. However, it wasn't an over-your-head kind of dissemination ... very practical.”

“The program centered on data driven, which is in sync with evidence based practice. The presenter researched his topics very well.”

“The facilitator was superb, focused, obviously knowledgeable, and thorough. The training was well worth the financial investment!”

“I especially commend the ability to ask questions and get responses that were incorporated into the sessions”

“Your company provided an incredible opportunity for professional development and was laser focused around what other facilities are doing regarding reentry and reintegration based on statistical evidence based practices. I personally utilized this workshop from a vendor perspective to ensure the opportunities our company is pursuing in reentry and reform is in line with Best Practices and working towards Evidence Based Practices in the Correctional Industry. I was truly amazed by the detail and level of information your course provided. As a matter of fact, I would say that this was one of the best ‘hands on’ educational programs I have ever attended, including many of the Masters level courses I attended in graduate school. I will be, and have already, STRONGLY recommended this course for our County, DOC, and international correctional customers and would even recommend this to other vendors of the corrections industry interested in providing reentry or rehabilitation services. This was truly worthwhile and should be a mandatory course for Correctional Leaders everywhere.

I can't think of any deficiencies in the program. It was very well organized, and extremely professional. I like the research that is provided to support the re-entry processes outlined in the training. It is good to have educational research to support the training being offered.”

On behalf of the Prison Department at the Ministry of Justice of the Republic of Lithuania I would like to thank you for the great opportunity to get acquainted with the prison and rehabilitation system of Georgia and Florida states. The material that was delivered during the Course will be of great use in everyday activities of penitentiary institutions of Lithuania. Good luck, Joyfields Institute!”

“Loved the small group participation and the group field trips”

“Material is relevant with encouragement and guidance to apply to your own work setting.”

.... More testimonials can be viewed online at www.joyfields.org/testimonials.html
KEY REASONS WHY YOU AND YOUR COLLEAGUES SHOULD ATTEND:

- You will network with colleagues to share invaluable ideas and experiences from different parts
- You will meet the finest corrections leaders serious about the business and learn how they do what they do
- You will leave at the end of the program with action steps to take to begin address the challenges you face
- You will learn from an expert faculty what works and know what mistakes to avoid
- We don't stop at just the class room studies. You will learn in discussion groups and trouble shooting sessions how to address the re-entry opportunities ahead
- Learn key skills for great corrections systems leadership
- Learn first hand the best and latest resources for addressing corrections needs and how to apply them

CERTIFICATE COURSE & CONTINUING EDUCATION HOURS

Upon completion of the course, participants will earn continuing education Hours, receive a certificate as evidence of accomplishment and status as a practitioner who has acquired specific new skills. The certificate will be delivered upon completion of the course.

WHO SHOULD ATTEND

Managers, supervisors and program managers and professionals in mental health management, juvenile and adolescent corrections and rehabilitation including:

- Behavioral Healthcare and Substance Abuse Professionals
- Social Workers & Substance Abuse Counselors
- Mental Health and Prevention Center Professionals
- Community Services Organizations, Services Providers
- Program Directors and Executives
- Pre-Release Specialis
- Adult and Juvenile Case Managers, Supervisors and Managers
- Probation Officers, Supervisors and Managers
- Psychologists, Psychiatrists and Therapists
- Housing Administrators and Resident population managers
- Veteran's Administration Professionals
- Pastoral counselors
- Court Administrators
ACCOMMODATION, REGISTRATION FEE, INTERNATIONAL PARTICIPANTS

HOTEL & ACCOMMODATION

The host hotel for the workshop is;

Embassy Suites San Francisco Airport - Waterfront
150 Anza Blvd, Burlingame, CA 94010
Phone: 650.342-4600

This is a beautiful all-suites property located on the waterfront and less than 30 minutes from downtown San Francisco and its attractions. It features private bedrooms and living room with a sofa sleeper. Galley kitchen with wet bar, refrigerator, coffeemaker, and microwave. Enjoy a Complimentary hot cooked to order breakfast each morning. Complimentary Evening Manager's Reception featuring your favorite beverages and light snacks, nightly.

Our special negotiated rate is $169 per night of the program, plus applicable taxes and local fees. You must mention the Group Code, JOYFIELDS INSTITUTE to receive this rate by September 30th. Make your reservation by calling 1800-362-2779.

If you need further assistance, please contact our office at +1(770)409-8780 or send email to yvette@joyfields.org. Thank you

REGISTRATION FEES:

The registration fee covers;

- All training sessions
- Comprehensive Program Manual
- Earn CE training hours allocated for this particular program
- 1 Book
- Breakfast & refreshment breaks provided
- 6-month Membership in Joyfields Institute, with
  - Joyfields Institute updates, articles, news and trends publication
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  - 10% member discount to Joyfields Institute sponsored programs

- Individual Attendee: 695 ea.
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PAYMENTS AND SUBSTITUTIONS:

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- FAX Completed Registration form to Joyfields at +1(678)605-0271
- BILL ME - Will pay by company check. Checks must be payable in US $ against a US bank and made out to “Joyfields, Inc.” and Mail to Joyfields, 5805 State Bridge Road, Suite G255, Duluth, GA 30097
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- WIRE transfer. To pay by wire transfer, send email to wires@joyfields.org to request wiring instructions. Include your phone and fax # and we will send you details for wiring funds Questions? Send email to Yvette Hughes at Yvette@joyfields.org or call +1(770)409-8780.

All payments must be received to participate. If there is a chance payment may not reach us before the program date, a Purchase Order will be required. Participants may substitute attendees, at any time prior to the program start, with no
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