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Impact of MAYSI-2 Mental Health Screening in Juvenile Detention

Valerie F. Williams
University of Massachusetts Medical School

*Et al.*

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We began a study in 2003 focused on the role and consequences of the MAYSI-2. This project addressed the following research questions:

1. What factors influenced the rapid adoption of the MAYSI-2?
2. What were the barriers to and facilitators of implementation?
3. How is the MAYSI-2 actually being used in juvenile justice settings? What are the variations in its use?

Data were collected using semi-structured interviews, focus groups and on-site observation. Responses included administrators, managers and line staff at juvenile detention centers in three states (n=19). In addition to the focus on the MAYSI-2, interviews probed questions about youth screening and treatment, and front-line staff in juvenile detention centers in three states (n=20) had been interviewed to better inform juvenile justice facilities regarding the conditions under which the MAYSI-2 was adopted and the variations in mental health services to youth entering the system and help guide future efforts to provide technology to juvenile justice programs in the interest of youths.

INTRODUCTION

Recent evidence suggests that the prevalence of mental disorders among youth in the juvenile justice system is two to three times higher than youths in the general population. Within the past five years, mental health screening upon entry to a juvenile justice facility has become standard practice across the nation. We know more about the validity and reliability of mental health screening tools than we do about the factors that facilitate their implementation. If these factors are not implemented properly, their adequate validity is virtually lost. Effective screening procedures require attention to how they are put in place and how they actually function within juvenile justice facilities.

METHOD

We observed fairly wide variations across facilities with regard to several administrative variables. We posit that these differences in the adoption and implementation of the MAYSI-2 can occur when youth are transferred from one facility to another and are re-administered the MAYSI-2. Youths’ answers can change when they expose new information in the subsequent interview.

RESULTS

A few key quotes are provided below to represent the nature of responses that characterize each theme.

**“We wanted to catch kids who might otherwise slip through the cracks.”** “To help staff be more effective at what they do.”

**“We knew the kids had mental health needs and...needed services.”** “We knew there weren’t enough resources.”

**“We were hoping that it would validate what staff were doing...detected...and it did.”**

**“We needed to have the continuity that the MAYSI would bring.”** “Our mental health service provider is under contract.”

Themes related to barriers and resistance to adoption and implementation of the MAYSI-2 or mental health screening in general:

- We had a rough time in the beginning convincing staff that it was going to work and just convincing them to do it."
- “It’s important that they're getting full buy-in from the get-go...""
- "Limited staff: aide staff or mental health staff in general:
- "A center needs to have enough staff so that things can get done efficiently...""

Themes related to factors facilitating implementation of mental health screening:

- "a lot of support from the administration...""
- "It’s a win-win.""
- "Anything new makes staff skeptical. They are already under a lot of pressure...""

Themes related to the consequences of the MAYSI-2:

- "We noticed changes in staff attitudes...""
- "Kids really do open up to the computer;...""
- "The results have a personal impact on staff in that they think about youth differently...""
- "We talk more about mental health issues day-to-day since the MAYSI.""

**CONCLUSIONS AND RECOMMENDATIONS**

Findings regarding the first three research questions suggest the following recommendations:

- Develop a policy that requires administrative implementation of the MAYSI-2.
- Use a standard set of instructions for completing the MAYSI-2 when introducing youths to the instrument.
- Use a standard set of instructions when introducing youths to the MAYSI-2 or any other screening instrument.
- Develop a policy and practice to ensure legal and clinically appropriate uses of mental health screening data.

REFERENCES
