

	The Board of Audit and Inspection of Korea	
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Audit Summary Report on Support and Education Status for Protected Juveniles

- Objectives: To verify and improve the effectiveness of the juvenile protection system and support programs for at-risk youths
- Period: May 9, 2018 ~ June 15, 2018 (20 days)

- **Inappropriate management methods in reforming protected juveniles at juvenile reformatories**
 - Under the Protected Juvenile Act, protected juveniles at juvenile reformatories are entitled to holistic education for growth, development and counseling without any exclusion or discrimination.
 - Maladjusted and high-risk groups, including juveniles who have been readmitted (40% of the admitted juveniles), are highly likely to negatively impact other protected juveniles (ex. with their dishonest behaviors) and instructors recognize that there is an insufficiency in the tools (ex. rewards or punishments) to manage such maladjusted and high-risk groups.
 - Meanwhile, the Jeju Juvenile Reformatory conducts an intensive treatment course for a small group of admitted juveniles (annually about 30) as part of its intensive care, apart from the general education courses. The course is mainly about character education, which proved to be highly effective (ex. improved education scores and decreased disciplinary action).
 - Therefore, in order to effectively achieve the purpose of juvenile reformatories, it is necessary for the Ministry of Justice to separate the maladjusted and high-risk groups (including readmitted juveniles) that are difficult to reform from other protected juveniles and to provide them with intensive care.

- For now, the Ministry of Justice does not have a system to provide exclusive programs for maladjusted and high-risk groups, which causes concerns over the reduced educational function of juvenile reformatories as a whole (62.9% of those whose release on parole was cancelled re-take the courses).

➡ The Minister of Justice was advised to devise a plan to implement an intensive care system for the "maladjusted and high-risk groups" at the juvenile reformatories with reference to the intensive care course at the Jeju Juvenile Reformatory to improve the education's effectiveness.

□ **Inappropriate admittance and management of protected juveniles at juvenile reformatories (ex. punishment or separate admittance)**

- Under the Protected Juvenile Act, etc., the purpose of a protective disposition is to ensure sound fostering of juveniles by reforming rather than punishing the juvenile concerned. Probation or separate admittance for protected juveniles are punitive and limit their freedom of movement.
 - * When a protected juvenile suspected of requiring disciplinary action raises concerns of destroying evidence, the juvenile reformatories may admit him/her separately in solitary confinement during the investigation period for punishment (no more than 7 days).
- Therefore, it is desirable for probation or separate admittance to be imposed minimally according to due process in consideration of the purpose of juvenile reformatories and of the disadvantages to protected juveniles.
- Meanwhile, the Ministry of Justice does not provide a basis for establishing a disciplinary decision-making body (or treatment review committee) in the Protected Juvenile Act, and does not obligate the participation of outside members.
 - ※ Establishing a disciplinary committee at a correctional institution is based on the Administration and Treatment of Correctional Institution Inmates Act, and the outside members shall be at least three.
- In addition, juvenile reformatories may also impose probation for violations of punishment standards or admit protected juveniles separately for minor acts (ex. inappropriate dress or ill manners) which do not constitute separate admission.
 - * According to the Guidelines for the Treatment of Protected Juveniles by the Ministry of Justice, injuries and assaults may be punishable by more than seven days of probation if the diagnosis requires two weeks or more to heal. 256 out of 266 cases (96%) from three juvenile reformatories voted for more than seven days of probation without verification of the diagnosis of two weeks or more during the period from 2016 to 2017.

** In 2017, 304 out of 1,245 separate admission cases from three juvenile reformatories were made due to minor acts.

- Further, unlike the separate admission records that are managed electronically, the juvenile reformatories have been drafting and storing records in individual document form, and have been neglectful in their management.

➡ The Minister of Justice is advised to establish and operate a decision-making body for deliberating and deciding disciplinary action for protected juveniles based on the law. The decision-making body shall include a certain number of outside members, and meetings for deliberating and deciding disciplinary actions shall allow their participation. The Minister is also advised to devise measures to systematically manage separate admission records of protected juveniles.

- It is requested that the Ministry thoroughly manage and supervise juvenile reformatories to ensure that protected juveniles be punished appropriately and are admitted separately in accordance with the standards.

□ **Inadequate treatment (educational or medical) of protected juveniles at juvenile reformatories**

○ Under the Protected Juvenile Act, juvenile reformatories shall provide protected juveniles with educational training for their sound rehabilitation into society.

- If protected juveniles suffer from disease, the juvenile reformatory shall ensure that they receive proper treatment, and, if deemed necessary, receive medical treatment from external institutions. The juvenile reformatory shall conduct medical examinations and take sanitary measures to ensure the healthy living of protected juveniles.

○ While juvenile reformatories for boys provide secondary education programs, the institutions for girls provide only middle school courses, which deters the girls from pursuing high school courses.

- Shortage of certified teachers; with 39 teachers being needed, only three are deployed for now. Training of teaching staff has not been conducted, which causes concerns over lowered quality of education.

○ Juvenile reformatories did not properly use medical check-up records of protected juveniles. Hot water was limited to the winter season (from November to February) and conditions for hygiene and disease control were poor.

* 410 protected juveniles admitted from January 2013 to February 2018 experienced 5% or more in weight loss within a year of admission, but such health records were not considered when detecting symptoms of a certain medical condition.

- There are cases where Seoul, Chuncheon, and Jeonju juvenile reformatories provided in-house medical treatment even though some protected juveniles complained about prolonged symptoms or asked for medical care outside of the juvenile reformatories.
- * Seoul Juvenile Reformatory prescribed pain relief patches, pain killers and sleeping pills for prolonged back pain of a protected juvenile. Later, the protected juvenile concerned was diagnosed with ankylosing spondylitis and received proper treatment in an external medical center under instructions of the incoming chief medical officer.
- A chief medical officer from the Seoul Juvenile Reformatory wrote a medical record in his/her name by stealing the medical opinions of an external doctor to prescribe and administer medication, which is a violation of the Medical Service Act.

➡ The Minister of Justice is advised to establish high school courses at the juvenile reformatories for girls so that they can pursue higher education, to hire enough certified teachers, and to train the teaching staff regularly. The Minister is also advised to devise measures to identify medical symptoms (ex. unexpected weight loss) by referring to the accumulated medical records and to expand the supply of hot water.

- Protected juveniles with diseases are recommended to be sent to external medical centers when their conditions do not improve with in-house care. Medical personnels shall not write medical records in his/her name by wrongly using medical opinions from other experts to prescribe and administer medication.

□ **Inadequate support for out-of-school youths and runaway teenagers with emotional and behavioral disorders**

① Inadequate management of the integrated information system for out-of-school youths*

- * The term “out-of-school youth” refers to an adolescent who is absent or has not attended any school for three months or more after their admission to an elementary or a middle school; an adolescent who is suspended or is a dropout; an adolescent who is within the age of compulsory school attendance, but has not attended high school.
- Under the Out-of-School Youth Law, the Ministry of Gender Equality and Family receives lists of youths who are out of school from metropolitan and provincial offices of education and provides the lists to the Out-of-School Youth Support Center (hereinafter referred to as "Center"). There are many cases of the Center helping youths to safely acclimate to society.
- However, the Ministry did not provide adequate information about the Center's roles and programs. The Ministry of Education did not set standards on when and how often the list of out-of-school youths should be notified.

- Many out-of-school youths did not understand the need for the Center resulting in their rejecting or missing the Center's call (8,495 out of 19,798 out-of-school youths who were notified to the Center in 2017 were neglected from protection and support).

② Inadequate medical support for runaway teenagers with emotional and behavioral disorders

- The Ministry of Gender Equality and Family operates shelters for adolescents to protect and help runaway teenagers to stand on their own feet, and the Didim Center for the treatment and rehabilitation of adolescents with emotional and behavioral disorders in accordance with the Youth Welfare Act.

- It is necessary to ensure runaway teenagers with emotional and behavioral disorders at the shelters to seek treatment and rehabilitation services at the Didim center.

- However, the Didim Center accommodates adolescents based on its admission standards including exclusion clauses*, which makes it difficult for adolescents at the shelters to enter the Didim Center.

* Adolescents at the Didim Center are obliged to return home every weekend and admission for those who are at high-risk for suicide, homicide and violence could be denied.

- As a result of the audit, it was found that shelters for adolescents had protected 146 teenagers diagnosed with or regarded to have emotional and behavioral disorders in the past year, and the shelters acknowledge the necessity for professional treatment and rehabilitation from the Didim Center for such adolescents.

- However, these teenagers are not allowed to enter the Didim Center due to the exclusion clauses written in the admission standards and are only receiving basic protection and support, such as food, clothing and lodging from the shelters.

* The shelters for adolescents do not provide medical treatment for teens with emotional and behavioral disorders.

➡ The Minister of Gender Equality and Family is advised to provide detailed information on the roles and support programs of the Out-of-School Youth Support Center in order to properly inform out-of-school youths. Meanwhile, the Minister is advised to devise plans to improve the admission process, including abolishing the exclusion clauses from the admission standards so that the runaway teenagers at the shelters can receive proper medical treatment and rehabilitation support.

➡ The Minister of Education is advised to set standards on when and how often the list of out-of-school youths should be notified in order to introduce such teenagers to the Out-of-School Youth Support Center as soon as possible.

* This summary is for reference purposes only. Please refer to the official publication for details.