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IN THE
COURT OF APPEALS OF INDIANA

R.J.C.	)	
	)	
Appellant-Respondent,	)	
	)	
vs.	)	No. 28A01-1102-JV-69
	)	
STATE OF INDIANA,	)	
	)	
Appellee-Petitioner.	)	

APPEAL FROM THE GREENE CIRCUIT COURT
The Honorable Erik C. Allen, Judge
Cause Nos. 28C01-1101-JD-3

August 10, 2011

MEMORANDUM DECISION – NOT FOR PUBLICATION

BAKER, Judge

Appellant-respondent R.J.C. appeals the juvenile court's dispositional order placing him with the Indiana Department of Correction (DOC), arguing that there was a less restrictive alternative available. Concluding that in light of R.J.C.'s background and repetitive delinquent conduct, the juvenile court's only realistic option was to place him with the DOC, we affirm the decision of the juvenile court.

FACTS

On September 21, 2009, R.J.C., who was nearly sixteen years old, was placed on probation for six months for illegal consumption of alcohol. A few months later, on December 29, 2009, that disposition was modified after R.J.C. was suspended from school for truancy, fighting, and insubordination. More particularly, R.J.C. was placed on informal house arrest and ordered to cooperate with Ireland Homebound Services.

On March 16, 2010, the disposition was again modified after R.J.C. was found consuming alcohol in a motel in Monroe County. Additionally, R.J.C. had left his mother's supervision at a high school athletic event to smoke marijuana, and while trying to transport R.J.C., his mother had to pull over and call the police after he punched the windshield of her vehicle. As a result, R.J.C.'s probation was extended, and he was ordered to continue with Ireland Homebound Services.

On June 15, 2010, R.J.C. was admitted to the adolescent unit of the Meadows Hospital because of "persistent problems with anger, destructive outbursts, and family conflict." Appellant's App. p. 39. During R.J.C.'s time at the hospital,

> [h]e participated in adolescent group therapy, activity therapy, chemical dependency education, and family therapy. The patient was highly

> disrespectful of his family. He clearly is the dominant member of the family system and phone calls or conversations with his family often had to be stopped because he would try to dominate them. . . . The patient is enormously dishonest and manipulative. He would display a minimal amount of superficial compliance but then in the background he would very much enjoy manipulating younger peers, watching them get in trouble for his own entertainment, or try and establish relationships with females. The patient was also quite drug seeking. He often would try to focus upon the need for amphetamines for ADHD or benzodiazepines. Instead, he was given Strattera for treatment of ADHD. Very quickly it became apparent that he did not have any particularly (sic) difficulty with concentration, attention span, or distractibility.

Id. R.J.C. ran away from the hospital three times and was found to be in possession of contraband. R.J.C. was discharged from the Meadows Hospital on October 12, 2010, because his treatment team determined that he "continues to exhibit anti-social conduct with limited insight and is not making progress in the system. It is determined by the treatment team that this patient's behavior is not clinically based and is more conduct disorder issues or issues related to alcohol and drug abuse." Id. at 44. It was further stated that R.J.C. "may require more intensive options such as legal intervention." Id.

Because R.J.C. had run away from the Meadows Hospital multiple times and had possessed contraband, on November 5, 2010, the juvenile court ordered that probation be extended, and "until Juvenile successfully completes 90 days of electronic monitored home detention, in-home services are to continue." Id. at 25.

On January 5, 2011, R.J.C. was at his mother's house in Bloomfield smoking marijuana. After R.J.C. had smoked all that he had, he removed his electronic monitoring bracelet so that he could take his mother's vehicle to Bloomington to get more marijuana. Tr.

p. 31.

On January 10, 2011, the State filed a petition alleging that R.J.C. was a delinquent child for committing an act that would have been a class D felony escape if committed by an adult. The juvenile court conducted an initial hearing the same day, wherein it ordered that R.J.C. be detained in secure custody at Southwest Regional Youth Village.

On January 31, 2011, the State submitted a plea agreement under which R.J.C. would admit to the facts alleged in the State's petition. In exchange, the State would dismiss the related delinquency petition, alleging that R.J.C committed an act that would constitute class D felony auto theft if committed by an adult and a pending petition for modification of disposition arising from the 2009 illegal consumption of alcohol for which R.J.C. was still on probation. Disposition would be left to the juvenile court's discretion.

On February 8, 2011, the juvenile court conducted a dispositional hearing and accepted the plea agreement. After hearing evidence from both parties, the juvenile court ordered that R.J.C. be committed to the DOC for an indeterminate term and recommended that he participate in the Thinking for Change program, GED classes and testing, psychiatric care, and substance abuse treatment. In the dispositional order, the juvenile court observed that:

> Interventions to help [R.J.C.] have been the following: curfew, informal house arrest, drug and alcohol treatment twice, alternative school, in-home therapy for [R.J.C] and parents for approximately one year, acute care, long term psychiatric residential care, and formal electronic monitoring. Despite all of the interventions, [R.J.C.]'s behavior has been consistent and has not improved. He continues to be impulsive, use poor judgment, is unpredictable and at times aggressive and/or dangerous. He has continued to use drugs, even while on electronically monitored home detention. He continues to have

values and beliefs that are consistent with criminality.

Appellant's App. p. 8-9. R.J.C. now appeals.

DISCUSSION AND DECISION

R.J.C. argues that the juvenile court abused its discretion by placing him with the DOC when there was a less restrictive disposition available. More particularly, R.J.C. claims that in light of his long history of psychological disorders and his parents' poor judgment, he should be sent to a less restrictive facility.

The disposition of a juvenile adjudicated a delinquent is a matter committed to the sound discretion of the juvenile court, subject to the statutory considerations of the welfare of the child, the safety of the community, and the policy favoring the least harsh disposition. E.H. v. State, 764 N.E.2d 681, 684 (Ind. Ct. App. 2002). On review, we may overturn the juvenile court's disposition order if we find that it abused its discretion, which occurs if its actions are clearly against the logic and effect of the facts and circumstances before it or the reasonable inferences that may be drawn therefrom. Id.

Indiana Code section 31-37-18-6 provides:

> If consistent with the safety of the community and the best interest of the child, the juvenile court shall enter a dispositional decree that:
>
> (1) is:
>
> (A) in the least restrictive (most family like) and most appropriate setting available; and
>
> (B) close to the parents' home, consistent with the best interest and special needs of the child;
>
> (2) least interferes with family autonomy;

> (3) is least disruptive of family life;
>
> (4) imposes the least restraint on the freedom of the child and the child's parent, guardian, or custodian; and
>
> (5) provides a reasonable opportunity for participation by the child's parent, guardian, or custodian.

We emphasize that the statute requires placement in the least restrictive setting "[i]f consistent with the safety of the community and the best interest of the child." I.C. § 31-37-18-6. To that end, this Court has recognized that "in certain situations the best interest of the child is better served by a more restrictive placement." K.A. v. State, 775 N.E.2d 382, 387 (Ind. Ct. App. 2002).

In this case, R.J.C. was placed on probation for six months in September 2009 for illegal consumption of alcohol. Appellant's App. p. 25. Three months later, he was placed on informal house arrest after being suspended from school for truancy, fighting, and insubordination. Id. Less than three months after that, R.J.C. had his probation extended after he was found consuming alcohol in a motel and smoking marijuana at a high school athletic event. Id. In addition, R.J.C.'s mother was forced to stop her vehicle and call the police after he had punched the windshield of her vehicle. Id.

Then, on June 15, 2010, R.J.C. was admitted to the Meadows Hospital because of "persistent problems with anger, destructive outbursts, and family conflict." Id. at 39. During R.J.C.'s stay, he ran away three times and was found in possession of contraband. Additionally, "phone calls or conversations with his family often had to be stopped because

he would try to dominate them." Id. And although R.J.C. participated in many different types of therapy and was treated with medication, he was discharged on October 12, 2010, because his treatment team determined that he "continues to exhibit anti-social conduct with limited insight and is not making progress in the system. It is determined by the treatment team that this patient's behavior is not clinically based and is more conduct disorder issues or issues related to alcohol and drug abuse." Id. at 44.

On November 5, 2010, the juvenile court extended R.J.C.'s probation because he had run away from the Meadows Hospital multiple times and had been in possession of contraband. The juvenile court ordered that R.J.C.'s probation be extended "until Juvenile successfully completes 90 days of electronic monitored home detention." Id. at 25.

Two months later, on January 5, 2011, R.J.C. removed his electronic monitoring bracelet so that he could drive his mother's vehicle to Bloomington to obtain more marijuana after he had finished smoking all that he had at his mother's house. Tr. p. 31. Under these facts and circumstances, we cannot say that the juvenile court erred by placing R.J.C. with the DOC. Indeed, given R.J.C.'s background and repetitive delinquent conduct, the juvenile court had no other realistic choice, inasmuch as all interventions to help him had proven unsuccessful. Consequently, the juvenile court did not abuse its discretion when determined that it was in R.J.C.'s best interests to place him in the DOC, and we affirm the decision of the juvenile court.

The decision of the juvenile court is affirmed.

KIRSCH, J., and BROWN, J., concur.