

**Support for Safe and Successful Schools: Tier 2 & 3
Identification and Intervention**

May 17, 2018



Comprehensive Services for At-Risk and Students in Juvenile Justice Programs

- Who are the at-risk students served in juvenile justice programs?
- Education, ESE and related services, substance abuse and mental health treatment.
- Transition planning for students in juvenile justice programs.

What should be the expectation of education and related services provided in juvenile justice programs?

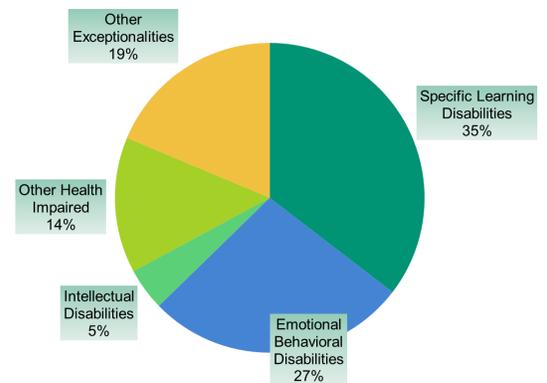
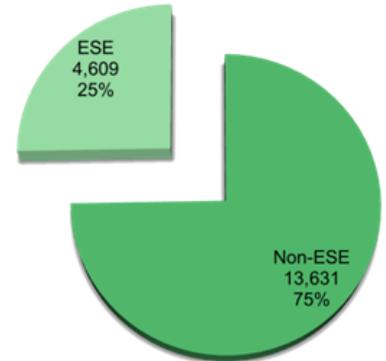
- Quality education should mirror that of every other school in the district (e.g. in-field teachers, variety of instructional methods, rigorous curriculum, commensurate resources).
- Provision of ESE services based on the needs of the students and not the model of service delivery available in the facility.
- Administration of the DJJ (Department of Juvenile Justice) common assessment for mathematics and English language arts, state and district assessments.
- Adequate transition planning beginning upon entry and intensifying near the student's release from a program. See school district transition contacts (handout).

What are barriers to performance outcomes for students in juvenile justice programs?

- Collaboration and coordination between sending school district and program school district. See Educational Records Coversheet (handout).
- Comprehensive district support (e.g., school counselors, accountability, professional development, CTE).
- Parental and community support.
- Provision of educational related services.

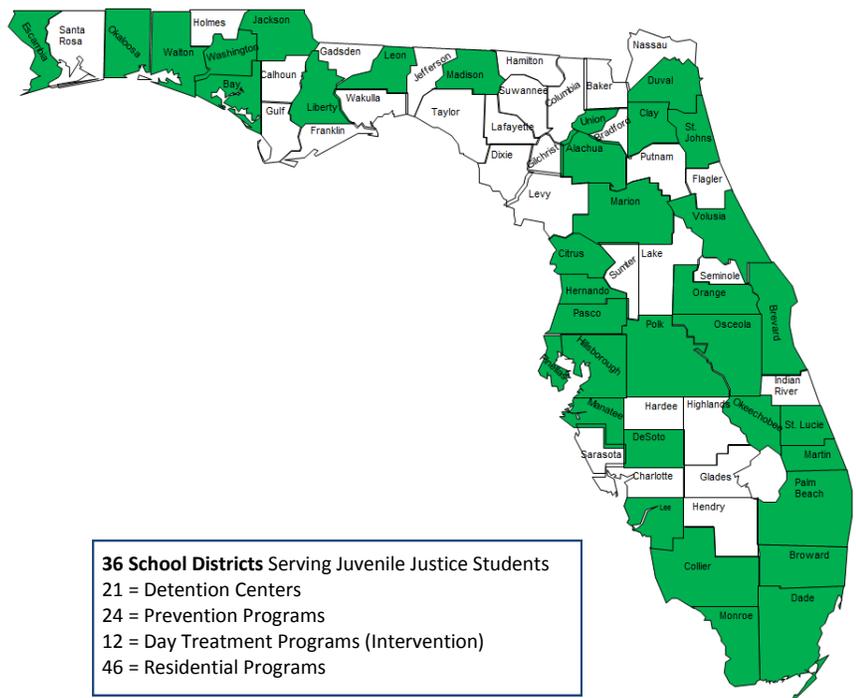
How does adequate transition planning in juvenile justice education benefit your districts and communities?

- Increase graduation rate, employment rates and post-secondary institution enrollment.
- Reduce dropout rate and recidivism.
- Rehabilitate mental health and substance abuse students to be productive citizens.



Number of Students Served in DJJ Programs in SY 2016-2017 = 18,240 (diagram 1)

Exceptionalities of Students with Disabilities in DJJ Programs for SY 2016-2017 (diagram 2)



RATES OF TRAUMA IN JUVENILE JUSTICE YOUTH



93% of juvenile offenders reported at least one or more traumatic experiences.



The average number of different traumas reported was six.



Youth in the JJ population have rates of Post-Traumatic Stress Disorder comparable to those of service members returning from Iraq.

Source: National Center for Mental Health and Juvenile Justice , 2016

Florida Statutes (F.S.) and Florida Administrative Code (F.A.C.) rule referenced below are specific to DJJ Education:

s. 1001.31, F.S.

s. 1003.51, F.S.

s.1003.52, F.S.

s. 985.622, F.S.

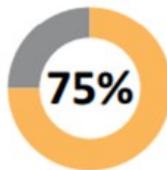
Rule 6A-6.05281, F.A.C.

Where does mental health fit in the continuum of services in Florida juvenile justice programs?

- Residential, day treatment and detention programs provide mental health services and interventions based on the individual student's need.
- Prevention and probation programs do not necessarily focus on mental health, but may be included based on the individual student's need.
- Probation has referral systems in place for youth in need of mental health and/or substance abuse services in the community.
- Agency linkages established prior to student's release from residential (e.g. Project Connect, Project Bridge, Check & Connect, SEDNET, APD, VR).
- MTSS- behavior support training, Trauma-informed care, PBIS training provided at some programs .



Approximately 2 out of 3 children will be exposed to violence, crime, or trauma in their homes, schools, and communities



More than 75% of youth in juvenile justice settings have experienced traumatic victimization



Children exposed to violence are more likely to experience difficulties in school and work settings, to engage in delinquent behaviors, and have difficulties following rules and conditions of their diversion or disposition

Source: National Center for Mental Health and Juvenile Justice , 2016

65% – 70% of children in the juvenile justice system have a diagnosable mental health condition.



Source: National Center for Mental Health and Juvenile Justice, Models for Change & U.S.A., 2013

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