

**DRAFT**



**State of Juvenile Justice  
in Colorado: 2005**

*Submitted to  
Governor Bill Owens*

*Prepared by  
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Despite this considerable assistance and support, we alone take responsibility for any errors or omissions that remain.

*September 31, 2005*  
*Office of Adult and Juvenile Justice Assistance*  
*Colorado Division of Criminal Justice*

# Preface

This report was prepared on behalf of the Colorado Juvenile Justice and Delinquency Prevention Council (the Juvenile Council). The Juvenile Council is appointed by the Governor and acts as the State Advisory Group (SAG) as defined by the federal Juvenile Justice and Delinquency Prevention Act of 1974 (reauthorized most recently in 2002). By federal law, SAG members have training, experience, or other special knowledge regarding the prevention and treatment of juvenile delinquency and the administration of juvenile justice. The SAG, or Juvenile Council, is charged under the Act to advise and make recommendations to the Governor and the General Assembly on issues of concern regarding the administration of juvenile justice in the state of Colorado. Further, the group assists the Division of Criminal Justice to develop and implement the 3-Year Juvenile Justice Strategic Plan mandated by the federal Office of Juvenile Justice and Delinquency Prevention. The current list of members appointed by Governor Bill Owens is included in the Appendix A.

Per Executive Order B-009-04 issued by Colorado Governor Bill Owens, the Juvenile Justice Council is expected to perform the following duties:

- a. Advise the Governor and the Division of Criminal Justice on juvenile justice issues;
- b. Review and approve the State Juvenile Justice and Delinquency Prevention Plan as required by the Juvenile Justice and Delinquency Prevention Act;
- c. Review and approve applications from state, local, and private agencies for grant funding; and
- d. Make recommendations for coordinating and maximum utilization of existing juvenile delinquency programs and other related programs, such as education, health, and welfare within the State.

This report has been developed as an integral component of Colorado's 3-Year Juvenile Justice Strategic Plan.

## Executive Summary and Recommendations

This report to Governor Owens was undertaken on behalf of the Colorado Juvenile Justice and Delinquency Prevention Council (called the Juvenile Council). The report serves many functions. It summarizes trends in juvenile justice between 2003 and 2005, and summarizes “what works” information on programmatic areas of interest to the federal Office of Juvenile Justice and Delinquency Prevention in the U.S. Department of Justice. It also provides an overview of some of the many activities of multiple agencies that intervene in the lives of Colorado’s families and youth. Where possible, it uses data to inform readers about delinquency prevention and intervention strategies that are underway in Colorado. Finally, this document serves as the foundation of the Council’s 3-Year Strategic Plan. The recommendations, below, are derived from the information presented in this report.

### Recommendations:

1. **Investigate the reasons behind the significant increase in arrests of girls.** Nationwide, between 1994 and 2003, the proportion of juvenile crimes committed by girls significantly increased: simple assaults increased by 36 percent; drug abuse violations increased by 26 percent, liquor law violations increased by 26 percent; DUI violations increased by 83 percent, and arrests for disorderly conduct increased by 46 percent.
  - a. **Support research that investigates the reasons for the increase in crime by girls in Colorado.**
  - b. **Based on the reasons uncovered in the research, develop a method to address this at-risk population.**
2. **Improve education outcomes.**
  - a. **Reduce the number of students for whom truancy petitions are filed.** Currently, more than 2,000 youth receive truancy petitions each year in Colorado. Truancy has been found to be a significant risk factor for juvenile delinquency and adult criminality.
  - b. **Reduce high school dropout rates** of all youth in Colorado, especially Native Americans, Hispanics and Blacks. In 2003, only 34 percent of Native Americans dropped out of high school in Colorado. That same year, 30 percent of Hispanics and 23 percent of Blacks, 15 percent of Whites and 13 percent of Asians dropped out.
  - c. **Evaluate the extent to which drug prevention programs also prevent dropping out of school.** Nearly \$4,000,000 are targeted to drug prevention programs, compared to \$2,000,000 for family literacy programming. Work with officials from CDE to review program outcomes and identify gaps in services that, if addressed, might improve graduation completion rates.
3. **Host a formal round-table discussion** with stakeholders from the state department of education and local school districts across the state, local school program managers, with an expanded representation from the other agencies represented on the Juvenile Justice Council.
  - a. Identify methods to collaborate where appropriate.
  - b. Identify gaps in current programming.
  - c. Develop strategies that support the at-risk prevention activities, intervention programs, and evaluation studies of the CDE.

4. **Host a formal round-table discussion with stakeholders from the state department of public health and environment, with an expanded representation from the agencies represented on the Juvenile Justice Council.**
  - a. Identify methods to collaborate where appropriate.
  - b. Identify gaps in current programming.
  - c. Develop strategies that support the at-risk prevention activities, intervention programs, and evaluation studies of the CDPHE.
5. **Work closely with ADAD officials to identify gaps in substance abuse treatment.**
  - a. **Coordinate efforts to enhance substance abuse interventions.**
6. **Follow the “best practices” specified in the Mentally Healthy Teens chapter of the CDPHE report *Adolescent Health: 2003*.<sup>1</sup>**
  - a. **Support Mental Health Services in Primary Care and School Settings** – Colorado has 40 comprehensive school-based health centers, 30 of which are in secondary schools.
  - b. **Promote Integrated Community Initiatives** – Programs are more likely to be successful if they are comprehensive and intensive, and designed to address suicide and suicidal behavior as part of a broader focus on mental health, coping skills in response to stress, depression, substance abuse and aggressive behaviors.
  - c. **Establish Programs That Promote Healthy Social Skills and Relationships** – Relationships of high quality have a beneficial impact on psychological health.
  - d. **Support Effective Treatment Approaches** – Effective approaches that work to change a person’s thoughts in order to change a behavior or emotional state, drug therapy and environmental strategies appear to reduce mental health disorders, including depression and anxiety.
7. **Efforts to coordinate services, identify gaps and prioritize targets for intervention should include a plan to monitor juvenile weapons offenses and drug crimes.**
  - a. Colorado youth crime data indicates that rates of juvenile weapons and drug offenses are significantly higher than the national average.
8. **Undertake a comprehensive study of one jurisdiction that includes a JAC to document the impact of budget reductions on community service programs and quantify the extent to which troubled youth are further penetrating the juvenile justice system because of lack of resources in the community.**
  - a. Identify all cases referred by law enforcement to the JAC for a three to 6 month period.
  - b. Track these cases for 12 months following referral.
  - c. Interview decision makers (prosecutors, judges, JAC staff, law enforcement officers, service providers, state agency administrators) regarding the criteria used to place youth in specific service programs.
  - d. Interview youth and family members.
  - e. Document research findings.
  - f. Estimate the long-term costs of reductions in program services.
  - g. Work with local stakeholders to use research findings to identify gaps in services and develop a strategy to develop resources to provide necessary services to troubled youth and their families.

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<sup>1</sup> <http://www.cdphe.state.co.us/ps/adolschool/adolhealthch2.pdf>

9. **Support the expansion of the Division of Probation Services to reduce juvenile probation officer caseloads by half.**
  - a. Colorado's juvenile probation officer caseload size is twice the national average.
  - b. Judicial's budget should include, at a minimum, an additional 94 probation officer positions.
  - c. The reduction in local services and the capitation on detention beds results in more at-risk juveniles will be sentenced to probation.
  - d. Probation costs \$4.65 per day, ISP costs \$8.06 per day compared to daily detention and commitment costs of \$138.84 and \$183.47, respectively.
  - e. Intensive probation services are estimated to net the public a tax savings of \$5,000 to \$6,000 per participant when crime victimizations are factored into the cost.<sup>2</sup>
10. **Undertake a study that profiles the offender characteristics of those placed in detention and commitment, before and after the imposition of the restriction to 479 detention beds.**
  - f. Analyze data on offenders' current crime, past history of problem behavior, past police contacts, social service programming.
  - g. Analyze assessment data to determine the need level of youth sentenced to NYC before and after the imposition of the detention capitation.
  - h. Profile cases at decision points in the juvenile justice system once a decision has been made not to dismiss a case.
11. **Support efforts to analyze the impact on NYC youth of the loss of more than \$20 million in the Division of Youth Services annual budget.**
  - a. Work with NYC to identify and prioritize services that are critical to the health of its clients.
  - b. Support NYC in the development of performance measures for programs that deliver needed services to youth sentenced in its care.
  - c. Support the implementation of the NYC's new needs/risk assessment tool.
  - d. Support efforts to rebuild NYC's capacity to provide services to youth in its care.
12. **Begin a sustained effort to regularly bring stakeholders together to discuss the state of juvenile justice in Colorado and plan for the future.**
  - o Support research and incorporate objective information in the process of understanding complicated trends in the juvenile justice system.
  - o Work with data and stakeholders to identify critical gaps in services.
  - o Systematically plan to identify methods to address service gaps.
  - o **Work with stakeholders to plan for the future.**

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<sup>2</sup> Analysis by the Washington State Institute of Public Policy, The Comparative Costs and Benefits of of Programs to Reduce Crime, V. 4.0, May 2001.

# State of Juvenile Justice in Colorado: 2005

## Section One

### Introduction

#### Background.

**Background of this report.** The Juvenile Justice and Delinquency Prevention Act requires that each state advisory group (SAG) regularly undertake an analysis of the “state of the state” of delinquency prevention and intervention programs and policies. This analysis then serves as the basis of the development of the Colorado Juvenile Justice and Delinquency Prevention Council’s comprehensive strategy to coordinate, develop, implement, monitor, and evaluate state and local efforts to improve outcomes for troubled youth. This report serves as the “state of the state” analysis and, as such, it is the foundation for Council’s strategic plan to address pressing issues, gaps in services, and funding reductions that threaten the progress that has been made in the area of delinquency prevention and intervention.

The publication of this report is especially timely in light of First Lady Laura Bush’s interest in this topic. On October 27, 2005, Mrs. Bush will host the “White House Conference on Helping America’s Youth.” At the event, policymakers, researchers, foundations, faith-based and volunteer organizations, educators, coaches, and parents will showcase programs that are working and brainstorm new ideas for America’s youth.

This White House event signals the Administration’s interest in addressing the problems facing young people. It also offers an opportunity for state and local organizations to bring added attention to the needs of young people and the policies that affect them. The First Lady’s Helping America’s Youth initiative was sparked by Mrs. Bush’s concerns about youth violence and juvenile offenders, which makes the White House Conference an excellent opportunity to focus specifically on important policy issues regarding juvenile justice reform, including:

- the state of the juvenile justice system and the growing number of children who leave the system more troubled than when they entered;
- the role that zero-tolerance school policies play in pushing too many young people into the juvenile justice system;
- the racial disparities that continue to plague the juvenile justice system;
- the need for increased federal funding that focuses on community-based prevention and intervention alternatives offering the services needed to keep kids on track or help them get back on track;
- the need for additional resources to facilitate re-entry so young people leaving juvenile justice can get back in school or become employed;
- the need for specialized services and alternative options for youth whose primary problems include serious emotional disturbances, developmental disabilities, and/or substance abuse.

**Complicated systems.** Numerous agencies both directly and indirectly impact the juvenile justice system. Figure 1.1 presents a conceptual framework illustrating a continuum of stakeholders, consumers, and program components that begins with delinquency prevention and flows through juvenile justice programmatic aftercare. This illustration is an attempt to summarize (1) components integral to the continuum, (2) programs and (3) funding available to address the myriad of interventions and responsible parties. Figure 1.2 presents a flowchart of the Colorado Juvenile Justice System that reflects how a youth might be processed through the state juvenile justice system. These tables are



presented here, in the introduction of the report, in an attempt to provide an overview of the multiple systems involved in the juvenile justice system and how the system operates.

This complex, multidisciplinary system requires ongoing collaboration to effectively serve the state's at-risk youthful population. Encouraging and enhancing collaboration is considered an important role of the Juvenile Council. Parts of this report may seem redundant while, in fact, often the same agencies surface at multiple intervention points while working with this population. Likewise, a youth can be simultaneously in multiple systems/agencies as he or she receives services. If a youth receives a variety of services over many months, multiple agencies within the same state department may have (or share) jurisdiction over the youth and sometimes the family.

Delinquency services are organized at both the state and local level in Colorado. Local district attorneys' offices are responsible for juvenile delinquency intake screening. Juvenile probation officers from local probation departments in Colorado's 22 judicial districts are responsible for predisposition investigation and probation supervision. Chief probation officers in each district answer to that district's Chief Judge. The Department of Human Services, Division of Youth Corrections is responsible for juvenile detention, state delinquency institutions, and juvenile parole.

**The good news.** In 2003, law enforcement agencies in the United States made an estimated 2.2 million arrests of persons under age 18, according to Howard Snyder's analysis for the U.S. Bureau of Justice Statistics. According to the Federal Bureau of Investigation (FBI), juveniles accounted for 16 percent of all arrests and 15 percent of all violent crime arrests in 2003. The substantial growth in juvenile violent crime arrests that began in the late 1980s peaked in 1994. In 2003, for the ninth consecutive year, the rate of juvenile arrests for Violent Crime Index offenses—murder, forcible rape, robbery, and aggravated assault—declined. Specifically, between 1994 and 2003, the juvenile arrest rate for Violent Crime Index offenses fell 48 percent. As a result, the juvenile Violent Crime Index arrest rate in 2003 was at its lowest level since at least 1980. From its peak in 1993 to 2003, the juvenile arrest rate for murder fell 77 percent (from H. Snyder, *Juvenile Arrests 2003*, August, 2005).

Further, according to Snyder, the clearance data in the *Crime in the United States* series show that the proportion of violent crimes attributed to juveniles by law enforcement has declined in recent years. The juvenile proportion violent crimes cleared by arrest or exceptional means grew from about 9 percent in the late 1980s to 14 percent in 1994, then fell somewhat, remaining near 12 percent between 1997 and 2003.

According to the analysis of FBI data conducted by Snyder (2005), over the period from 1980 through 2003, the black-to-white disparity in juvenile arrest rates for violent crimes declined. In 1980, the black juvenile Violent Crime Index arrest rate was 6.3 times the white rate; in 2003, the rate disparity had declined to 4.0. This reduction in arrest rate disparities between 1980 and 2003 was primarily the result of the decline in black-to-white arrest rate disparities for robbery (from 11.5 in 1980 to 8.4 in 2003), because the disparity in the arrest rates for aggravated assault changed little (3.2 vs. 3.1).

**The bad news.** In 2003, 29 percent of juvenile arrests involved females. Law enforcement agencies made 643,000 arrests of females under age 18 in 2003. Between 1994 and 2003, arrests of juvenile females generally increased more (or decreased less) than male arrests in most offense categories. However, the increases are noteworthy. According to the FBI report, *Crime in the United States, 2003* (Table 33), the proportion of the following crimes committed by girls increased significantly between 1994 and 2003. These increases are presented below:

- |                         |                     |
|-------------------------|---------------------|
| ❑ Simple assault        | 36 percent increase |
| ❑ Drug abuse violations | 26 percent increase |
| ❑ Liquor law violations | 26 percent increase |

- ❑ DUI 83 percent increase
- ❑ Disorderly conduct 46 percent increase

Further, in 2003, nearly 60 percent of runaways involved girls, according to the FBI report, *Crime in the United States, 2003* (Table 63).

In Colorado, arrest data by crime type and gender have not been reported by the Colorado Bureau of Investigation since 1994, although the raw data is likely available for analysis. Once cases are filed in court, in FY03 in Colorado, girls represented 20 percent of juveniles arrested, 22 percent of juveniles prosecuted and 20 percent of adjudications.<sup>3</sup>

Although comparison data is not currently available, given the increase in the proportion of girls entering the juvenile justice system nationwide, and given the significant increase in the adult women population in prison in the last ten years, the Council may be interested in better understanding this phenomenon. The increase in girls in the juvenile justice system is particularly interesting since other indicators of community health and at-risk behavior, such as teenage pregnancy, have been on the decline during the past decade.

This issue leads to the following recommendation:

- ❑ **Investigate the reasons behind the significant increase in arrests of girls.**  
Nationwide, between 1994 and 2003, the proportion of juvenile crimes committed by girls significantly increased: simple assaults increased by 36 percent; drug abuse violations increased by 26 percent, liquor law violations increased by 26 percent; DUI violations increased by 83 percent, and arrests for disorderly conduct increased by 46 percent.
  - **Support research that investigates the reasons for the increase in crime by girls in Colorado.**
  - **Based on the reasons uncovered in the research, develop a method to address this at-risk population.**

**What works?** Obviously, the complexity described above represents a challenge in terms of case management, record keeping, and data collection and analysis. Ultimately makes it difficult to know with certainty which services contributed to individual outcomes, especially as children continue to age and enter progressive developmental stages of maturity. The National Institutes of Mental Health and the Office of Juvenile Justice Delinquency Prevention have funded many studies in the past several decades. Consequently, much is known about how to improve the outcomes of at risk children. In fact, nearly two decades ago, Harvard University community educator Lisbeth Schorr (1989:xviii) wrote in her groundbreaking book, *Within Our Reach: Breaking the Cycle of Disadvantage*:

As I read academic journals and government reports, learned the results of new studies which had followed children's development from earliest infancy to adult, and talked with researchers and the people who work on the front lines...**I was astonished to find how much we knew.** And I was dismayed at how little of this knowledge was being utilized to change the prospects for the children growing up in the shadows, the children most at risk.... The more I looked the more clearer it became that in the last two decades **we have accumulated a critical mass of information that totally transforms the nation's capacity to improve outcomes for vulnerable children....** But many administrators, academics, practitioners,

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<sup>3</sup> Analysis of data obtained from Judicial via the Colorado Integrated Criminal Justice Information System's (CICJIS) Criminal Justice Analytic Support System (CJASS) and analyzed by DCJ's Office of Research and Statistics.

and public policy analysts are not aware of these insights, especially from outside their own fields. (Emphasis added.)

We have also learned what does not work to improve the outcomes of at risk youth. Because this report will discuss current issues and summarizes what works, it seems important to document here what has been found *not* to produce positive outcomes. These include the following programs, summarized from Sherman et al., (1997<sup>4</sup>) and recently presented to the Annual Conference on Criminal Justice Evaluation by Delbert Elliott from the Center for the Prevention of Violence at the University of Colorado, Boulder.

Programs that promote negative outcomes for youthful offenders (Lipsey, 1992):

- ❑ Bootcamps
- ❑ Waivers to adult (criminal) court
- ❑ DARE
- ❑ Gun buyback programs
- ❑ Guided Group Interaction (GGI) and Positive Peer Culture
- ❑ Peer counseling
- ❑ Summer job programs for at-risk youth
- ❑ Scared straight
- ❑ Neighborhood Watch
- ❑ Shock probation/parole
- ❑ Home detention with electronic monitoring
- ❑ Casework/counseling

Research has found that some rehabilitation programs are effective in reducing the criminal behavior of at least some offenders. Doris McKenney (1997: Chapter 9) summarized her review of the literature as follows:

To effectively reduce recidivism, treatment programs appear to need to:

- ❑ Be carefully designed to **target the specific characteristics and problems of offenders** that can be changed in treatment (dynamic characteristics) and those that are predictive of the individual's future criminal activities (criminogenic) such as antisocial attitudes and behavior, drug use, anger responses;
- ❑ Be implemented in a way that is appropriate for the participating offenders and uses therapeutic techniques that are known to work (e.g., designed by knowledgeable individuals, based on sound programmatic theory, services delivered by appropriately educated and experienced staff, use of adequately evaluated programs) and require offenders to spend a **reasonable length of time** in the program considering the changes desired (deliver sufficient dosage);
- ❑ Give the most intensive programs to offenders who are at the highest risk of recidivism (meaning that the use of systematic **assessment tools** is essential);
- ❑ Use cognitive and behavioral treatment methods based on theoretical models such as behaviorism, social learning or cognitive behavioral theories of change that **emphasize positive reinforcement contingencies for prosocial behavioral and is individualized** as much as possible.

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<sup>4</sup> Much of what we understand about the efficacy of juvenile treatment programs is derived from the work of Mark Lipsey. In 1992, Lipsey conducted a meta-analysis of over 440 juvenile justice programs and summarized his findings in a chapter in T. Cook's, et al., *Meta-analysis for explanation: A casebook*, published by the Russell Sage Foundation.

McKensey also cautions that more information is needed regarding: (1) how to ensure that treatment programs have adequate integrity; (2) what should be targeted in the treatment (antisocial attitudes, values, employment behavior, education, etc.); and, (3) what method should be used to deliver the treatment (and that staff obtain the necessary level of training and have appropriate experience and expertise).

In sum, a significant amount of information is available to direct comprehensive approaches to reducing conduct disorder, child abuse and neglect, and delinquent and violent behavior. This information is only one part of the picture, however. There must be resources directed to vulnerable children and youth and their families

**State funding crises.** Over the past three years, Colorado, like many states, has experienced severe revenue reductions and subsequent state budget cuts, and (sometimes) corresponding policy and program changes. These events have begun to negatively impact the infrastructure of the juvenile justice system in the areas of delinquency prevention, youth diversion, juvenile probation, and Senate Bill 94 activities that focus on alternatives to incarceration, as well as detention, parole and treatment. In addition to state funding cuts, there have been significant federal budget cuts across all agencies involved in managing the problems associated with juvenile delinquency. One objective of this report is to summarize the role of various agencies involved in the lives of youth with problem behaviors and their families. This report also documents the impacts and potential outcomes, positive and negative, of the budget cuts and related changes in policy and practice.

**An analysis of program funding cuts in education, child welfare, prevention services, DCJ and DYCS reflects a reduction in more than \$27.7 million in resources targeting juveniles with problem behaviors in Colorado since FY01** (please see Table 2.1). This significant figure under-represents the loss of resources to the state because it does not include important agencies that deliver services to youth. In particular, information regarding budget cuts sustained by the Alcohol and Drug Abuse Division, Division of Mental Health, and state and county Probation Departments are unavailable for analysis here since these agency budgets are not categorized by adult and juvenile funding.

**Federal Funding Reductions.** The state reductions in funding for juvenile justice prevention and intervention efforts naturally correspond with significant reductions at the federal level. This is because many state and local programs are funded by Congress. Federal funding for juvenile justice has dropped significantly in the last four years, from \$547 million in 2002 to roughly \$300 million in the coming year's budget, depending on final actions by Congress.

**Organization of this report.** Section One—especially the following figures and budget analyses—provides an overview of information intended to be helpful for conceptualizing and developing a comprehensive strategy designed to prevent and address problematic and delinquent behavior. Section Two reviews prevention and intervention efforts in the state. Section Three addresses treatment and other interventions from a variety of agencies. Section Four is an overview of programs in the state's juvenile justice system. Recommendations can be found throughout the report. Section Five is a short summary and provides a final recommendation. All recommendations are presented in the executive summary.

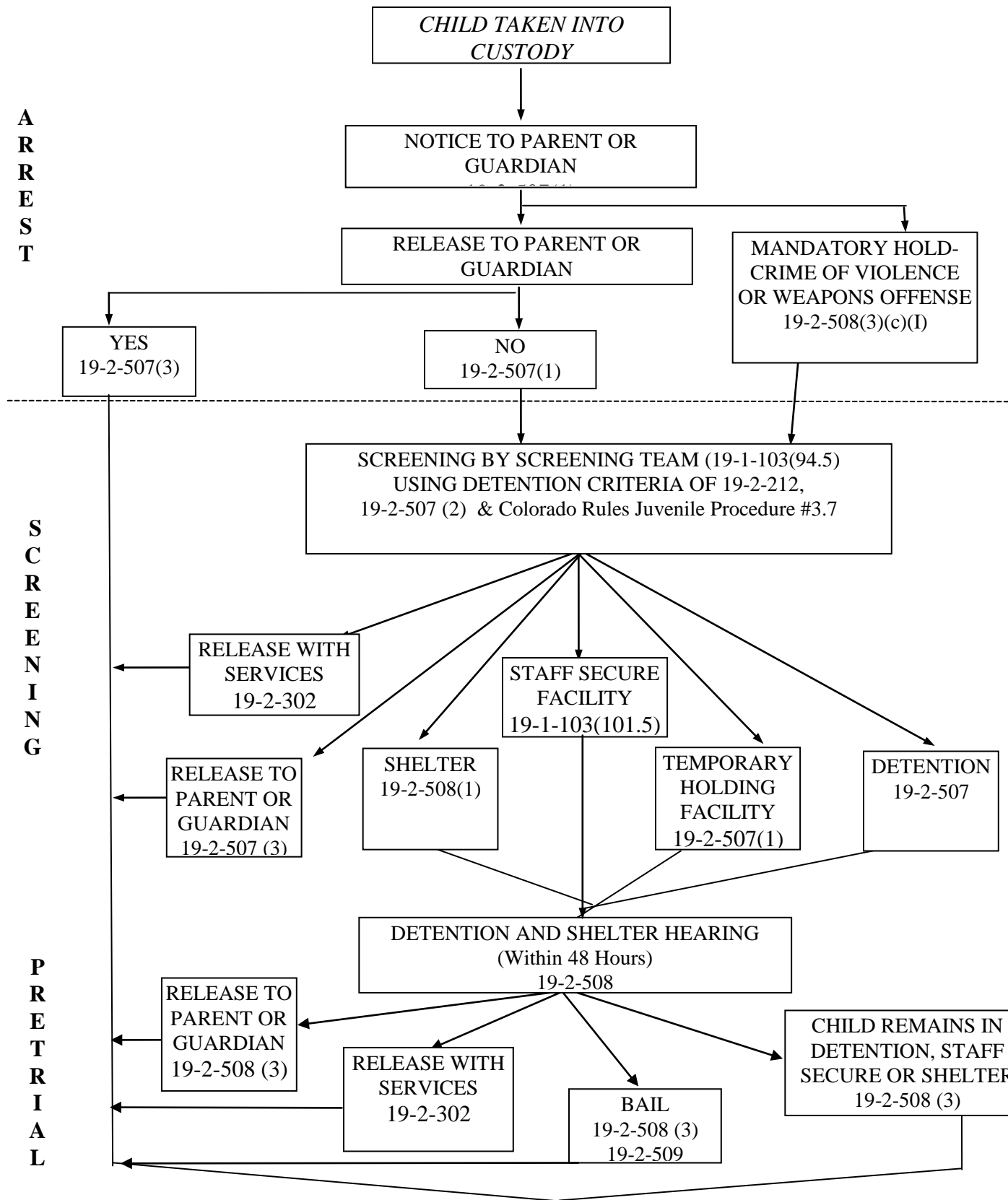
The report is organized to correspond with the frameworks summarized in Figures 1.1 and 1.2; it discusses current programs and best practices; and it makes recommendations for priorities and strategies to be undertaken by the JJDP Council in Colorado.

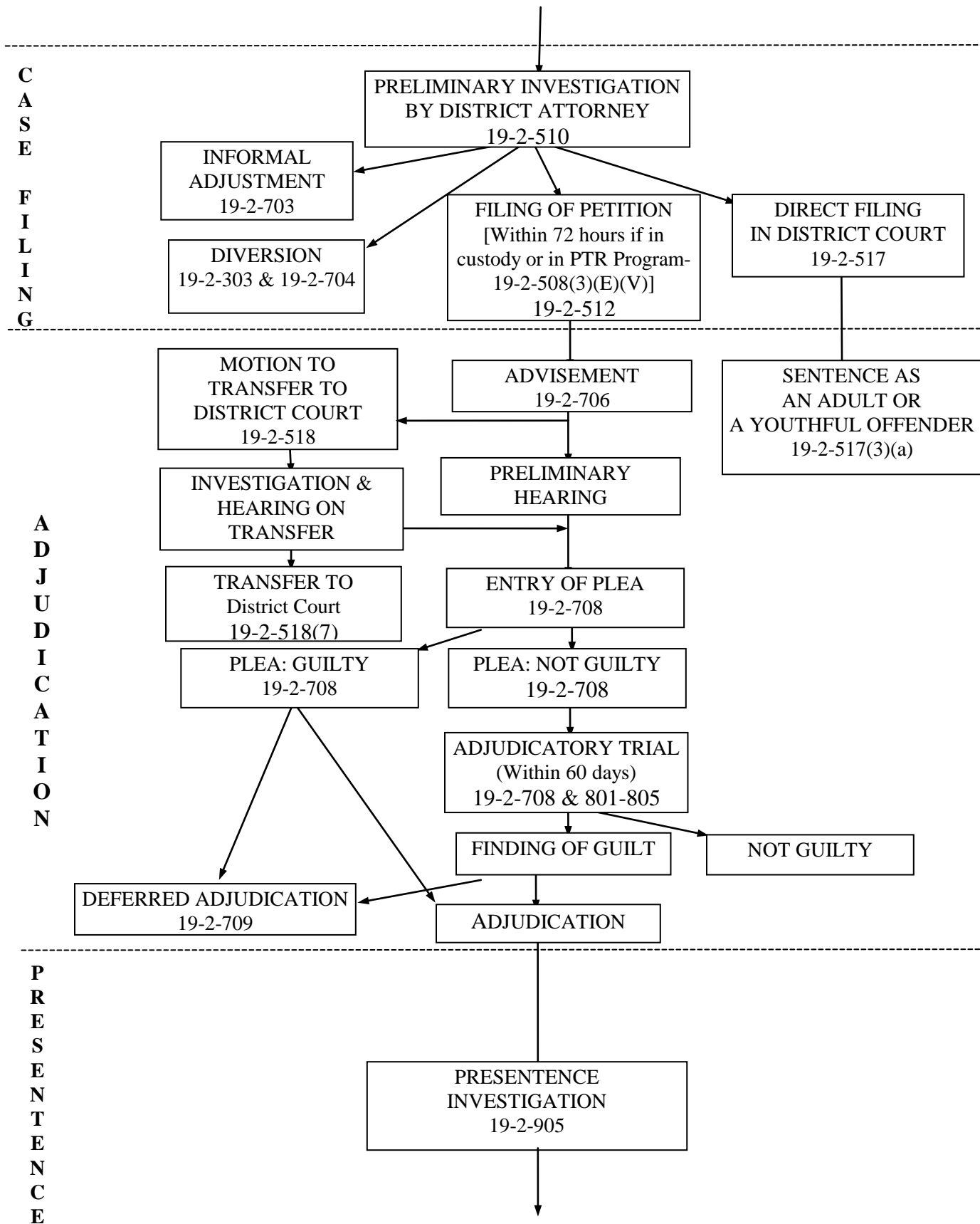
**Figure 1.1: COMPREHENSIVE JUVENILE JUSTICE FRAMEWORK**

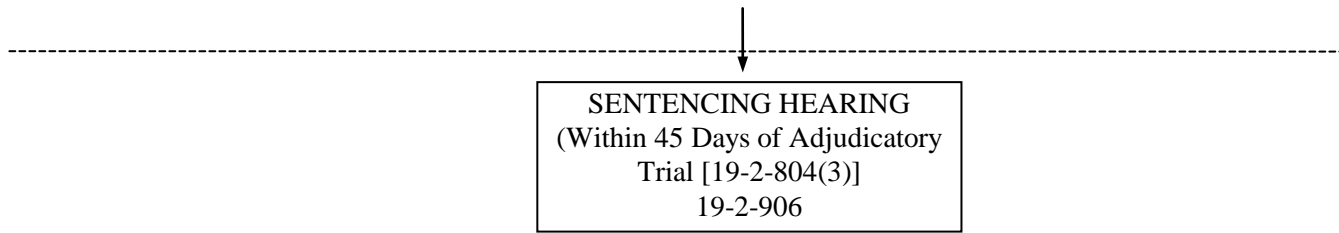
Problem Behavior    Noncriminal Misbehavior    Delinquency    Serious, Violent and Chronic Offending

Components:  <i>(Items are examples, not all inclusive)</i>	PREVENTING YOUTH FROM BECOMING DELINQUENT			IMPROVING THE JUVENILE JUSTICE SYSTEM RESPONSE Accountability <input type="checkbox"/> Competency Development <input type="checkbox"/> Community Protection			
	Prevention for all youth	Early Intervention for youth at risk	Immediate Intervention	Intermediate Sanctions	Community Confinement/Supervision	Institutional Confinement	Aftercare
			COLORADO ' sS JUVENILE JUSTICE SYSTEM:				
			Arrest ≡ Screening ≡ Pre-trial ≡ Diversion ≡ Case Filing ≡	Adjudication ≡ Pre-sentence investigation ≡ Sente	ncing ≡ ≡	≡	≡ Transition
Responsibility and/or Jurisdiction	Parents/Family Neighbors Churches Recreation Child Care Child Welfare Agencies Schools Health Agencies Local Gov. Businesses	Parents/Family Child Welfare Social Services Mental Health Substance Abuse Schools Special Ed Community Youth-serving agencies Recreation Civic and Faith-based Organizations	Parents/Family Schools & Community Child Welfare Social Services Mental Health Substance Abuse Tx Law Enforcement DA Pre-file Diversion Intake Screening Community Evaluation/ Assessment Teams DYC Detention	Parents/Family Schools Law Enforcement Municipal Courts Das ' s Diversion District or Juvenile Courts/Probation Community Accountability Boards Defense Bar DYC – SB94/Community Detention/Secure Detention	Probation (Judicial) Diversion DYC – SB94 Alternatives to Detention	Colorado Division of Youth Corrections (DYC)	DYC Parole Community Youth-Serving Agencies Schools Businesses Communities
State & Federal Funding by State Department (funds cover program needs across various areas)	<b>Public Health and Environment:</b> Public Nurse Program, Home Nurse Visitation, Community and Family Health Services; Injury Prevention and Control; Abstinence Education, Suicide Prevention, Colorado Children ' ss Trust Fund <b>Human Services: Child Welfare</b> – Family Preservation/Family Support, Out-of-Home Placement Care; Family Issues Cash Fund; Independent Living , Youth Development <b>Human Services: Alcohol and Drug Abuse</b> – Managed care funds (prevention and intervention); detox centers; and Drug Offender Surcharge Fund. <b>Education:</b> Suspended & Expelled services; In-home/In-school suspension; Special Education; Even Start Family Literacy Program; Education for homeless children; Title IV Safe and Drug Free Schools and Communities; Preschool; Comp. Health Ed <b>Public Safety;</b> DCJ: Federal Juvenile Justice funds <b>Revenue:</b> Enforcing Underage Drinking Laws			<b>Human Services: Youth Corrections</b> – Alternatives to Incarceration (SB94) Programs (supervision, case management, treatment, education, mental health, etc.) Secure Detention and Commitment Facilities and programs (mental health, education, medical, job training), Parole program services, state-operated secure and contracted non-secure beds; Intensive Aftercare Program <b>Human Services: Mental Health</b> – Mental Health Screening and Referral for Detained Youth <b>Human Services: Alcohol and Drug Abuse</b> – Managed care treatment funds <b>Public Safety;</b> Division of Criminal Justice: Federal Juvenile Justice Funds <b>Education:</b> Suspended & Expelled student services; In-home and In-school suspension programs; Title I High-Risk Youth <b>Judicial:</b> Probation Officers and program services (electronic monitoring, drug testing); Public defenders, Guardians Ad Litem, and alternate defense counsel (no specific amount for juveniles) <b>Corrections:</b> Youthful Offender Program and Community Transition Programs (for certain direct-file juveniles)			

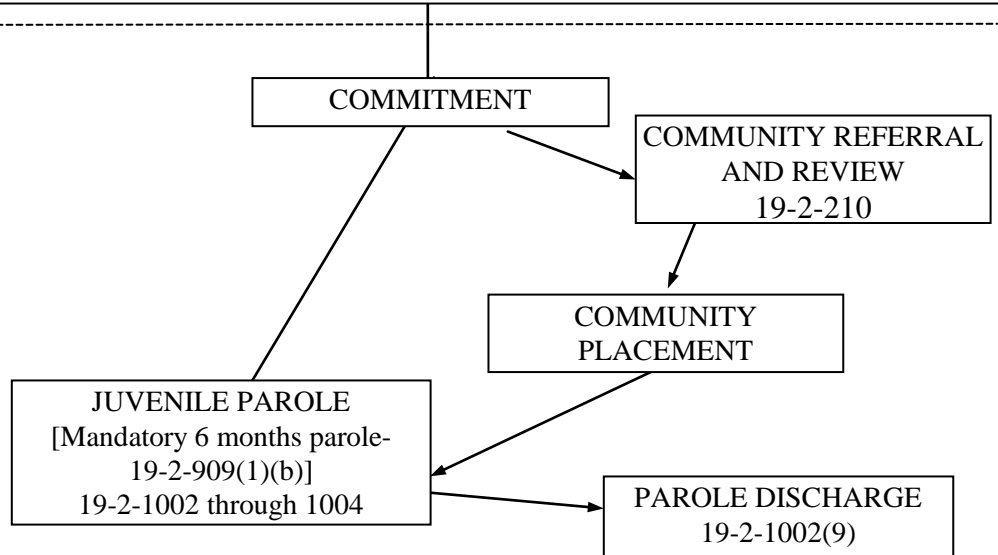
Figure 1.2: COLORADO JUVENILE JUSTICE SYSTEM  
FLOWCHART\*







- SENTENCING OPTIONS**  
19-2-907
- (1) Court may enter decree imposing any or a combination, as appropriate:
    - (a) Commitment to DHS (19-2-909)
    - (b) County Jail (19-2-910)
    - (c) Detention (19-2-911)
    - (d) Placement of custody with a relative or suitable person (19-2-912)
    - (e) Probation (19-2-913) (19-2-925 through 19-2-926)
    - (f) Community Accountability Program (19-2-914)—unfunded option
    - (g) Placement with social services (19-2-915)
    - (h) Placement in hospital (19-2-916)
    - (i) Fine (19-2-917)
    - (j) Restitution (19-2-918)
    - (k) Anger management treatment or any other appropriate treatment program (19-2-918.5)
  - (2) Judge may sentence as special offender (19-2-908)
    - (a) Mandatory sentence offender
    - (b) Repeat juvenile offender
    - (c) Violent offender
    - (d) Aggravated juvenile offender
  - (3) Sentence may include parent conditions (19-2-919)
  - (4) If sentence includes school attendance-notice to school is required







## SECTION TWO:

### Prevention and Early Intervention Services

**Introduction.** Early intervention and prevention services represent essential components of Colorado's Comprehensive Juvenile Justice Framework. This emphasizes that prevention services target youth *prior* to entering the juvenile justice system. Prevention services refer to proactive, interdisciplinary efforts that empower individuals to choose and maintain healthy life behaviors and lifestyles, thus fostering an environment that encourages law-abiding, pro-social behavior. Early intervention services refer to active efforts to intervene at early signs of problems. Often, efforts to reduce risks and change problem behaviors begin with family-centered interventions.

The agencies most involved with the juvenile justice system at the prevention and early intervention level are the Department of Education's Division of Child Welfare and the Colorado Department of Public Health and Environment's Prevention Services Division. These agencies have suffered significant budget cuts in recent years. The role of these agencies in the prevention and early intervention of problem behaviors is described below.

According to OJJDP-sponsored studies, risk factors for delinquency include academic failure beginning in late elementary school, inadequate school climate, truancy, and economic deprivation. Truancy is an issue of growing concern especially in relation to delinquency. According to the state Department of Education, in FY03, 2,090 truancy petitions were filed in Colorado courts and 2,062 were filed in FY04 (data not presented). The majority of these children need assistance to stay in school.

Adults with a high school education are more likely to participate in the labor force, according to the National Center for Education Statistics. Specifically, in 2002, only 44 percent of those 25 and older that were not high school completers, were in the labor force. The labor force participation rates for Blacks and Hispanics age 25 and older with high school diplomas were higher than the rates for Whites with similar levels of education. The labor force participation rate for Blacks and Hispanics age 25 and over with a bachelor's or higher degree was also higher than the rates for Whites, according to the National Center for Education Statistics.

While graduation rates in Colorado have increased in recent years, the rates differ significantly across race/ethnic groups (see Table 2.1). In 2003, only 66 percent of Native Americans graduated from high school in Colorado. That same year, 70 percent of Hispanics and 77 percent of Blacks graduate from high school, compared to 85 percent of Whites and 87 percent of Asians. This information leads to the following recommendations:

- ❑ **Improve education outcomes.**
  - **Reduce the number of students for whom truancy petitions are filed.** Currently, more than 2,000 youth receive truancy petitions each year in Colorado. Truancy has been found to be a significant risk factor for juvenile delinquency and adult criminality.

- **Reduce high school dropout rates** of all youth in Colorado, especially Native Americans, Hispanics and Blacks. In 2003, only 34 percent of Native Americans dropped out of high school in Colorado. That same year, 30 percent of Hispanics and 23 percent of Blacks, 15 percent of Whites and 13 percent of Asians dropped out.
- **Evaluate the extent to which drug prevention programs also prevent dropping out of school.** Work with the CDE to assess program outcomes and identify gaps in services that, if addressed, might improve graduation completion rates.

**Table 2.1**

<b>Colorado Education Facts by Race/Ethnic Groups, 1998, 2002, 2003</b>						
	<b>Year</b>	<b>White</b>	<b>Hispanic</b>	<b>Black</b>	<b>Asian</b>	<b>American Indian</b>
<b>Public School Student Enrollment - Percent of Total</b>	1998	70.6	19.9	5.6	2.7	1.2
	2002	65.7	24.3	5.7	3.0	1.2
	2003	64.5	25.3	5.8	3.1	1.2
<b>Graduation Rate</b>	1998	84.7	63.4	69.1	84.1	56.4
	2002	86.4	65.5	73.7	86.2	58.3
	2003	87.5	69.6	76.8	87.0	65.8
<b>Dropout Rate per 100,000 in this age group (2002 rates include alternative schools)</b>	1998	2.7	6.3	4.6	3.0	6.6
	2002	2.2	4.6	3.0	1.5	5.0
	2003	1.7	4.2	3.0	1.5	3.8

SOURCE: Data and Research Unit, Colorado Department of Education, 1/14/05 at [www.cde.state.co.us/cdereval](http://www.cde.state.co.us/cdereval)

### **Colorado Department of Education Programs**

The Colorado Department of Education (CDE) is the administrative arm of the Colorado State Board of Education. CDE serves 178 local school districts, providing them with administrative services and technical assistance on a regional and statewide basis. The CDE supports many school programs that target at-risk behavior of Colorado's youth.

In the excellent document *Adolescent Health in Colorado, 2003 Report*, published by the Colorado Department of Public Health and Environment, the following summary is

provided regarding violence prevention in schools:<sup>5</sup>

**What works?**

- Problem-solving
- Family behavior management
- Family problem-solving
- Decreasing gun access
- Decreasing access to media violence
- Student motivation

**What doesn't work?**

- Scare tactics
- Didactic programs
- Programs focusing only on self-esteem
- Segregating aggressive/ antisocial students
- Programs focusing only on anger-management
- Individual counseling/ intensive casework

**What's promising but untested**

- Peer mediation
- Schools within schools
- Mentoring
- Social skills training
- Improved classroom management techniques

The CDE is involved in a myriad of school-related programming that targets at-risk youth. The following is a list from the CDE website of school programs or initiatives with goals consistent with juvenile delinquency prevention and intervention projects supported by OJJDP:

- Child Abuse Prevention
- Colorado Preschool Program
- Consolidated Child Care Pilot Program
- Colorado Connections for Healthy Schools
- Expelled & At-Risk Student Services Grant
- HIV/AIDS Prevention
- Homeless Children and Youth
- Law-Related Education
- Out-of-School-Time Care Grants
- Parent/School Partnerships
- Prevention Initiatives Staff

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<sup>5</sup> Source: A Smith, J Kahn and I. Borowsky, *Best Practices in Reducing School Violence*, Center for Adolescent Health and Development, University of Minnesota (1999).

- Safe & Drug-Free Schools
  - Service Learning in Colorado
  - Social Skills Building
  - Student Assistance Programs
  - Center for At-Risk Education
  - Closing the Achievement Gap
  - Diversity Toolkit
  - English Language for Refugees
  - English Acquisition & Literacy
  - Even Start
  - Indian Education
- 
- Interactive Nutrition Literacy Toolkit
  - Migrant Education Even Start

The CDE supports evaluation studies of most of its grant-funded activities. Most of the projects in the list cited above have evaluation reports that reflect the extent of program implementation and the outcome/performance measures for the program's fundamental objectives. This report highlights four CDE programs, a family literacy program, a program for expelled and at-risk students, the Safe and Drug-Free Schools initiative, and community education regarding--and services for--homeless children and youth.

#### ❑ **Even Start Family Literacy (Federal Funds)**

The purpose of Even Start Family Literacy services, through the No Child Left Behind Act, is to help break the intergenerational cycle of poverty and illiteracy by improving educational opportunities for low-income families with limited education. To accomplish this goal, the legislation requires Even Start programs to provide an integrated five-component model of family literacy. These components are supplemented and enhanced by personal family visitations. The Colorado Department of Education funds 13 Even Start programs in Aurora, Avondale, Boulder, Colorado Springs, Cortez, Denver, Dolores, Durango, Glenwood Springs, Greeley, Lafayette, Lamar, Leadville, Monte Vista, Rifle, Trinidad, Waverly, and Windsor.

**Table 2.2**

<b>Even Start Family Literacy</b>	<b>FY02</b>	<b>FY03</b>	<b>FY04</b>	<b>FY05</b>
Appropriated:	\$1,905,967	\$2,042,159	\$1,912,630	\$2,002,638

The purposes of the program are consistent with activities that OJJDP encourages states to undertake to prevent delinquency. In fact, the following bullets were obtained from the CDE website on this describe how program activities specifically link to at-risk behaviors:

- **Adult Education:** Parent literacy training that leads to economic self-sufficiency.
- **Early Childhood Education:** An age-appropriate education to prepare children for success in school and life experiences.
- **Parenting Support:** Training and support for parents regarding how to be the primary teacher for their children and how to be full partners in the education of their home.
- **Parent and Child Together:** Interactive literacy activities between parents and their children.

According to the CDE website, **Even Start** family literacy services are provided to participants on a voluntary basis that are of sufficient intensity in terms of hours, and of sufficient duration, to make sustainable changes in a family, and that integrate the following four components:

1. Help break the cycle of poverty and illiteracy by improving the educational opportunities of the state's low-income families, through the integration of adult literacy (e.g., Adult Basic Education or English Language Learning), early childhood education, and parenting support into a unified family literacy program.
2. Assist parents in gaining the literacy and parenting skills they need to become full partners in the educational development of their young

children, from birth through age seven, through family-centered education programming.

3. Help children in reaching their full potential as learners.

4. Support the implementation of the Colorado Basic Literacy Act.

The program's outcome measures show important progress. For the past seven years, the Colorado Department of Education has supported a statewide evaluation of Colorado **Even Start** programs. The following evaluation findings are highlights from 2003–2004:

- ❑ Colorado **Even Start** programs met 71 percent of the targeted goals contained in the state performance measures.
- ❑ Colorado **Even Start** programs served 428 families with 647 children.
- ❑ Teen parents in the state's **Even Start** programs had an average high-school graduation rate of 81 percent over the past five years (but this rate varies considerably over the life of the program).
- ❑ The percentage of **Even Start** parents who have advanced from English Language Instruction to Adult Basic Education (learning in English) has more than doubled over the past four years from 8 percent to 19 percent.
- ❑ The percentage of **Even Start** parents who have enrolled in higher education or training has increased for the past three years from 63 percent to 92 percent.
- ❑ Eighty percent of primary-grade children involved in **Even Start** performed at grade-level or showed one year's growth in literacy skills within one year.
- ❑ Eighty-eight percent of **Even Start** parents of preschoolers regularly read with their children this year.<sup>6</sup>

In 2003-2004, 92 percent of **Even Start** children in the primary grades (K–3) were promoted to the next grade level. This statistic has remained high for seven years, always 89 percent or above. In comparison, national statistics show that 87–90 percent of children in low-income families are promoted (Wertheimer, 2003) and 87 percent of Hispanic children are promoted (U. S. Department of Education, *Status and Trends in the Education of Hispanics*, 2003).<sup>7</sup>

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6 From the 2004 Report on Even Start in Colorado, prepared by Beckie Anderson for the Colorado Department of Education, available at:  
[http://www.cde.state.co.us/cdecare/care\\_downloads/pdf/COESProgressRpt04\\_03-04.pdf](http://www.cde.state.co.us/cdecare/care_downloads/pdf/COESProgressRpt04_03-04.pdf)

7 Source: [http://www.cde.state.co.us/cdecare/care\\_downloads/pdf/COESProgressRpt04\\_03-04.pdf](http://www.cde.state.co.us/cdecare/care_downloads/pdf/COESProgressRpt04_03-04.pdf)

This 2003-2004 average cost of serving an **Even Start** family in Colorado, based only on the state allocation of federal funds to local programs, was \$4,249. In comparison, Head Start's national average cost for serving one child is \$7,092 (Head Start Bureau, 2004). As can be seen in Table 2.2, funding for the family literacy program has remained fairly stable at nearly \$2 million between FY02 and FY05. The extent to which this funding is adequate to meet the needs of children and their families is unknown.

#### ❑ **Safe and Drug-Free Schools (Federal Funds)**

**The Safe and Drug-Free Schools and Communities** program (SDFSC) support activities that prevent violence in and around schools and the illegal use of alcohol, tobacco, and drugs. These programs involve parents, and program officials coordinate these program efforts and resources with other federal, state, and community entities. Allocations are based on poverty rate and the size of the student population. Funds are made available to local school districts to provide only research-based prevention and intervention activities to students within the district. Strategies, often implemented in collaboration with other community agencies and groups, include but are not limited to alcohol, tobacco and drug education; violence prevention and conflict resolution programs; youth leadership and peer counseling programs; student assistance counselors and teams; character education; and alternatives to suspension. **The Safe and Drug-Free School and Communities** program also supports technical assistance school districts through individual consultations, workshops, and trainings. Program officials also collaborate with other agencies and groups to provide training in statewide conference settings.

As part of the No Child Left Behind Act of 2002, the CDE annually reports outcome data provided by school districts. For example, Adams County School District 1 reported that, in the 2003-2004 school year, thirty-five students participated in the project and had a 92 percent literacy plan completion rate. The following outcomes were reported:

- ❑ Total disciplinary incidents dropped from 785 in 2003 to 421 in 2004
- ❑ Drug possession/use incidents dropped from 55 in 2003 to 34 in 2004
- ❑ Dangerous weapons incidents dropped from 13 in 2003 to 6 in 2004
- ❑ Disobedience/defiance incidents dropped from 344 in 2003 to 125 in 2004



As can be seen in Table 2.3, funding for **Safe and Drug Free Schools**, funding has been somewhat unstable over the past several years. The funding cuts to what the CDE receives for Administration and Technical Assistance occurred with the onset of the No Child Left Behind Act in 1992, which changed the formula for distribution of the funds to the states. The states were permitted to retain 9 percent of the state's allocation for training and technical assistance. But since FY03 the state can only keep 7 percent of the allocation. This provided more funding to be allocated to the districts, but subsequent cuts have offset this benefit. This means that services offered by the state, along with district-level services to at-risk youth, have been reduced.

Department of Education cuts resulted in a significant loss of staff "time on task" associated with the program. Specifically, it required the program director position to be reduced from 1 FTE (full time employee) to .75; the administrative assistant went from half time to 10 hours per week. Other positions were similarly reduced. Additionally, budget cuts resulted in the elimination of annual training efforts and significant reductions in technical assistance delivered to local school districts by the state.

#### □ **Expelled and At-Risk Student Services (Federal Funds)**

Expulsion should be the last step taken after several unsuccessful attempts to deal with a student who has discipline problems that disrupt learning of other students or cause risk of harm to others. The Colorado Department of Education has funded school districts across the state to

Alcohol incidents <u>dropped</u> from 5 in 2003 to 3 in 2004 <b>Table 2.3</b> <b>Safe and Drug Free</b> <b>Schools</b>	<b>FY02</b>			
		<b>FY03</b>	<b>FY04</b>	<b>FY05</b>
Budget for Colorado Department of Education's administration and support to districts (i.e. training and technical assistance)	\$348,016	\$287,560	\$284,435	\$270,679
Distribution to School Districts	\$3,518,820	\$3,820,450	\$3,778,919	\$3,596,157
Total for Education	\$3,866,836	\$4,108,011	\$4,063,354	\$3,866,836
Change from <i>previous year</i> for state	-161,073	241,175	-44,657	-196,518

provide services to expelled students and students that are at risk of expulsion, under the Expelled and At-Risk Student Services Grant of Amendment 23.

Colorado Department of Education's **Expelled and At-Risk Student Services Program** funds local school districts, Boards of Cooperative Educational Services, non-public and non-parochial schools, alternative

schools within a district; charter schools and pilot schools, to develop and implement programs that prevent expulsion and provide educational services to expelled students.

The goals of the program are twofold:

Goal One: Support students who are unable to avoid mandatory suspension or expulsion.

Goal Two: Develop strategies to help students who are at risk of suspension or expulsion.

According to the CDE evaluation of this program for school year 2003-2004, 53 projects served over 8,500 middle school students across the state. Of the students receiving services through these programs, 26 percent were Caucasian, 55 percent were Hispanic/Latino, 14 percent were African American. The remaining 5 percent of students, 2 percent were Asian/Pacific Islander, 2 percent were American Indian and 1 percent were another ethnicity.

Of the students served by these funds, 620 students were expelled and 8159 were at risk of expulsion. For the 620 students who were expelled, reasons included the following:

- ❑ disruptive behavior (33 percent),
- ❑ drugs (24 percent),
- ❑ weapons (17 percent),
- ❑ truancy (4 percent),
- ❑ bullying or harassment (14 percent), and
- ❑ other reasons (8 percent).

The reasons for being at risk of expulsion included the following:

- ❑ disruptive behavior (53 percent),
- ❑ truancy (18 percent),
- ❑ drugs (8 percent),
- ❑ other reasons (8 percent),
- ❑ weapons (7 percent), and
- ❑ bullying or harassment (6 percent).

Fourteen percent of the students served had an active Individual Education Plan (IEP) and were receiving special education services. Of this 14 percent,

- ❑ 41 percent had a perceptual /communicative disorder,
- ❑ 36 percent had a significant identifiable emotional disability,
- ❑ 7 percent had a physical disability, 6 percent had multiple disabilities,
- ❑ 4 percent had significant limited intellectual capacity,
- ❑ 4 percent had a speech language disability and
- ❑ 1 percent had a hearing disability.

**The evaluation listed the following accomplishments:**

- ❑ 27 percent improved at least one failing grade.
- ❑ 27 percent of students improved their attendance and
- ❑ 29 percent of youth with a history of discipline problems reduced their number of office referrals.

**Table 2.4**

<b>Expelled and At-Risk Student Services</b>	<b>FY02</b>	<b>FY03</b>	<b>FY04</b>	<b>FY05</b>
Appropriated	\$5,290,850	\$6,089,682	\$6,216,786	\$6,222,319

Fortunately, funding for this important group of at-risk youth has increased slightly in recent years. However, according to education officials contacted during the development of this report, *funding for this important at-risk youth group is less than 60 percent of the need for resources at the local level.* Local requests for programming funds for FY06 totaled more than \$10 million; requests for these service dollars totaled more than \$12 million. Many applicants reported to CDE officials that losses of local juvenile diversion dollars and corresponding crime prevention/intervention programs at the local level resulted in local districts attempting to tap other sources of funding to deliver services to this at-risk population.

**❑ Education for Homeless Children and Youth (Federal Funds)**

The Colorado Department of Education administers the Education of Homeless Children and Youth Program. This federally funded program is intended to implement the requirements of the McKinney-Vento Homeless Assistance Act. The primary intent of this federal law is to remove state and local barriers to the enrollment and academic success of homeless children and youth.

At the state level, the CDE provides assistance to local school agencies and homeless service providers in areas related to compliance with the law, and issues of homelessness as it relates to the education of children and youth who experience homelessness. The Department also provides technical assistance to school districts in the areas of program design, grant writing and networking of resources.

At the local level, funded school districts provide direct educational and support services to enroll and educate homeless students. Strategies implemented include the following:

- ❑ tutoring,
- ❑ direct provision of school supplies and basic need items,
- ❑ translation/interpretation services,
- ❑ collaboration with other school programs (Title I, Migrant Education, Special Education),
- ❑ support of AmeriCorps programs,
- ❑ direct outreach to help families adjust to new school and community environments,
- ❑ referral to additional services,
- ❑ provision of out-of-school time programs, and
- ❑ staff development and training.

The Colorado Department of Education's goal for this program is to remove state and local barriers to the enrollment and academic success of homeless children and youth. The CDE has developed a website at [www.cde.state.co.us/cdeprevention/pihomeless.htm](http://www.cde.state.co.us/cdeprevention/pihomeless.htm) that provides excellent information about ways of intervening with this at-risk population. This web resource includes a link to a literature review by Jan Moore of the National Center for Homeless Education entitled *Unaccompanied and Homeless Youth Review of Literature (1995-2005)*. Moore provides the following introduction to the problem:

There is no official definition of a throwaway (or throwaway) youth, but it is generally understood to be a young person who either is asked to leave home by a parent or other adult in the household and is away overnight or is away from home overnight and prevented from returning home (Hammer, et al., 2002). A more limited definition includes only those who have been kicked out for inappropriate behavior, and a broader definition includes those who have been abandoned and deserted (Ringwalt, Greene, & Robertson, 1998).

The type of assistance varies by school district, and recent evaluation data is not readily available from the CDE web site. However, in a short report for the 1999-2000 school year, the following provides some examples of services provided under this initiative:

#### **COLORADO SPRINGS SCHOOL DISTRICT #11**

- Served 179 students in three elementary school programs and a summer enrichment program
- Nine homeless youth were served in the GED program through the District
- Provided outreach to local motels for enrollment
- Provided bus tokens for students to continue at their home schools

#### **ADAMS COUNTY SCHOOL DISTRICT #50**

- Served approximately 70 students with academic assistance, food programs, clothing and medical referrals

**DENVER PUBLIC SCHOOLS**

- Served 40 students in an after-school homework program
- Provided bus transportation to allow students to stay after school
- Increased reading and writing skills and scores

**DURANGO SCHOOL DISTRICT 9R**

- Served 40 students with after school programs, school supplies and bus passes
- Provided family resource and educational materials at two shelters
- Contracted for counseling services from the Southwest Mental Health agency
- Provided student fees for middle and high school students

**JEFFERSON COUNTY PUBLIC SCHOOLS**

- Directly served 61 students in 27 schools and trained 55 staff in 39 schools. Awareness of the number of students who are homeless increased from 20 three years ago to 355 in May 2000.
- Improved the annual count process
- Provided referrals for tutoring and summer school programs

**POUDRE SCHOOL DISTRICT**

- Served 375 homeless students in grades preK-12
- Improved academic test scores by 1.5 to 2 grade levels in reading and math
- Coordinated teaching with Title I staff
- Provided transportation and wrap-around child care

**SHERIDAN SCHOOL DISTRICT**

- Served approximately 250 students in after-school tutoring, homework assistance, enrichment activities, bilingual services, summer school and mentoring programs
- Increased awareness in the district and the community on the issues facing homeless families
- Provided a single point of entry for referrals for homeless students

**SOUTH PLATTE VALLEY BOCES**

- Served 250 students in tutoring, home visits and translation services
- Increased parental involvement with homework and in staffings through translation services
- Provided outreach for enrollment at parents' work sites

**ST. VRAIN VALLEY SCHOOLS**

- Served 413 students in three after school programs, summer school, and with school supplies
- Provided bus passes to high school students
- Collaborated with local shelters and community agencies

**SUMMIT SCHOOL DISTRICT**

- Served 350 students district wide with academics, outreach and support services
- Provided conflict resolution and violence prevention activities to students
- Increased literacy skills for kindergarten students

- Increased parental attendance at Child Find screenings
- Provided scholarships for preschool

#### **WELD COUNTY SCHOOL DISTRICT #6**

- Served 82 students through tutoring, outreach, home visits
- Provided four computers to local shelters
- Collaborated with the University of Northern Colorado for tutors
- Created a staff training manual

**Table 2.5**

<b>Education for Homeless Children and Youth</b>	<b>FY02</b>	<b>FY03</b>	<b>FY04</b>	<b>FY05</b>
Appropriated	\$273,757	\$281,804	\$456,964	\$405,878
Number of Students Served	2,733	2,826	7,145	6,224

#### **Summary: Department of Education, Early Prevention and Intervention.**

The CDE is involved, directly and indirectly, in many delinquency prevention and intervention activities. The accomplishments of these programs are too numerous to summarize here. However, the significant efforts undertaken regularly by the CDE in every school district in the state are making considerable contribution to building healthier families and communities in Colorado. This understanding leads to the following recommendation:

- **Host a formal round-table discussion with stakeholders from the state department of education and local school districts across the state, local school program managers, with an expanded representation from the other agencies represented on the Juvenile Justice Council.**
  - a. **Identify methods to collaborate where appropriate.**
  - b. **Identify gaps in current programming.**
  - c. **Develop strategies that support the at-risk prevention activities, intervention programs, and evaluation studies of the CDE.**

## **Colorado Department of Human Services, Office of Children, Youth and Family Services**

### **Division of Child Welfare**

Child welfare services in Colorado are delivered locally through 64 county agencies. The

state Department of Human Services, via its Division of Child Welfare, oversees local activities and offers technical assistance and funding opportunities. Child welfare constitutes a specialized set of services that are intended to provide safety, permanency and well-being to youth by strengthening the ability of families to protect and care for their own children, minimize harm to children and youth, and ensure timely permanency planning. Services are aimed at stabilizing the family situation and strengthening the family's capacity to care for their children. When safety is not possible within the family, services are focused on the child's need for a stable, permanent home as quickly as possible.

Studies have shown that children who are victims of or witnesses to domestic violence, child abuse, or other child maltreatment are at significantly higher risk of experiencing behavior problems and penetrating the juvenile justice system. Child Welfare has experienced general fund increases in overall budgets for FY02-05. However, the costs of services continue to increase and county officials report experiencing difficulties meeting the needs of local families, especially in areas with high population growth. Below is a brief description of the Core Services Program that the Division of Child Welfare administers related to delinquency prevention/intervention, the funding levels for FY02-05 and the impact of the increased funding levels.

#### **❑ Core Services Program (State Funds)**

Colorado Revised Statutes (C.R.S) 26-5.3-103, defines "family preservation services" as providing assistance that focuses on family strengths. The legislation specifies the use of services that empower a family by providing alternative problem-solving techniques, child-rearing practices, and responses to living situations creating stress for the family. This includes resources that are available as support systems for the family. The Core Services Program operates to meet these legislative mandates.

Additionally, C.R.S. 26-5.3-103(2) states such services are to be provided to children "at imminent risk of being placed out-of-home." A child at imminent risk is provided immediately with services to address the issues putting that child at-risk of out-of-home placement. Core services include the following interventions for youth and families:

- ❑ Home based interventions,
- ❑ Intensive family therapy,
- ❑ Life skills
- ❑ Day treatment,
- ❑ Sexual abuse treatment,
- ❑ Special economic assistance,
- ❑ Mental health services,
- ❑ Substance Abuse Treatment Services,
- ❑ Aftercare services and
- ❑ County-designed services.

In FY04, counties were awarded additional funding to support a 2.8 percent caseload increase, thereby increasing services to children and preventing or

reducing the need for out-of-home placement.

Additionally, \$1.5 million dollars was appropriated to Core Services to mitigate county over- expenditures and to fund additional evidenced-based services. In particular, these funds are intended to assist counties in providing services to adolescents, either in-home or with community-based programs, thus avoiding or reducing the length of out-of-home placement when appropriate. In light of funding constraints, these moneys can build local capacity by supporting county departments of human services in implementing and expanding family and community based services for adolescents. These services are required to be evidence-based, that is, specifically programs found to be effective in reducing the need for higher costs of residential services. Programs funded include Multi-Systemic Therapy, Functional Family Therapy and Intensive Mentoring (Family Preservation Program, Commission Report, FY04).

**Table 2.6**

<b>Core Services Program</b>	<b>FY02</b>	<b>FY03</b>	<b>FY04</b>	<b>FY05</b>
Appropriated	\$42,565,888	\$42,124,032	\$44,742,812	\$46,242,811

The FY04 statewide monthly average cost for providing Core Services was \$123.00. The statewide monthly average cost in out-of-home placement was \$1521.00. The cost efficiency on a per case basis shows the potential cost avoidance of \$1398.00 per month per client.

The numbers of children served through Core Services has increased from 28,620 served in FY 2003 to 32,712 in FY 2004 due to the 2.8 percent caseload increase to target services that prevent or reduce the need for more costly out-of-home placement services and the \$1.5 million to serve adolescents in evidenced base programs has allowed most counties to serve additional children. (Family Preservation Program Commission Report FY03-04)

## **Colorado Department of Public Health and Environment**

### **Prevention Services Division**

The Prevention Services Division in the Colorado Department of Public Health and Environment (CDPHE) oversees state and local health promotion initiatives and disease and injury prevention programs for children, youth, and adults. Since the Centers for Disease Control declared violence a public health problem nearly 20 years ago, public health initiatives have focused on violence prevention along with other health concerns that link with delinquency, including substance abuse prevention and intervention.



**Violence.** There are many programs for violence prevention.<sup>8</sup> What works depends on a host of interactive variables such as the target population, the provider delivering the intervention, the intensity of the service, the behavior that is to be prevented or changed, the sustainability of the program, and youth involvement in planning. Most successful violence prevention programs targeted at adolescents have the following characteristics in common:

### **Successful violence prevention programs**

- Define aggression broadly
- Design interventions that are developmentally appropriate and that recognize and understand different types of aggression and adapt them to suit the needs of both boys and girls
- Promote a positive school climate
- Promote social competence and involve interaction, role-playing and rehearsal
- Conduct programs in naturalistic settings - aggression in a classroom may look very different from aggression on the playground
- Insist on a climate that will not tolerate bullying, violence or aggression

Youth themselves have important wisdom to share on changes that would help stop the violence that young people experience today. According to information presented in CDPHE's *Adolescent Health in Colorado, 2003*, a study sample of 1,012 Colorado young people revealed the following three major findings:

- (1.) While public dialogue focuses on extreme violence, young people report teasing that includes cruel put- downs and rejections as being very real violence to them. They say this emotional violence triggers more extreme violence.
- (2.) While blame and remedies for youth violence have been focused on parents and the schools, young people cite a seemingly inescapable culture that celebrates sameness, and the one right way to be "in."
- (3.) Positive support and good relationships are important, and young people with parents, teachers and friends who support them are less likely to experience violence, either as victims or as aggressors.<sup>9</sup>

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<sup>8</sup> Much of this section is excerpted from The DCPHE's report entitled *Adolescent Health in Colorado, 2003*. This report is an excellent resource for understanding the scope of efforts undertaken in Colorado by DCPHE. See also KA Moore and JF Zaff, *Building a Better Teenager: A Summary of "What Works" in Adolescent Development*, Child Trends (2002) and PL Ellickson and KA McGuigan, "Early predictors of adolescent violence," *American Journal of Public Health* 90(4): 566-572 (2000).

<sup>9</sup> Source: <http://www.cdphe.state.co.us/ps/adolschool/adolhealthch4.pdf>

Violence resulting in homicide is a significant concern to public health advocates. The *Adolescent Health in Colorado, 2003* report offers the following summary of risk factors for adolescent homicide:<sup>10</sup>

**Family Factors**

- Firearm in the home
- Low income
- History of domestic violence
- Teenage parent
- Divorce

**Social Factors**

- Ethnic/linguistic heterogeneity
- Crowded housing
- Racial intolerance
- Lack of adult supervision
- Social acceptance of violence

**Psychological Factors**

- Depression
- Antisocial behavior
- Conduct disorder
- Aggression

**Personal Factors**

- Male gender
- Alcohol/drug use
- Poor impulse control
- Previous gunshot injury
- Minority race

**Substance Abuse Prevention.**<sup>11</sup> When adolescents use alcohol, other drugs<sup>1</sup> or substances such as inhalants, tranquilizers or hallucinogens,<sup>2</sup> at best they compromise their ability to make safe choices and good decisions in their daily routines – whether it is relations with the opposite sex, dealings with peers, driving to the store, riding a bicycle or skiing down a hill. At worst, they can die or kill someone else. Substance use cuts across race and ethnicity, geographic and socioeconomic lines, and the cost to society is enormous.

Nationally, substance abuse and addiction added at least \$41 billion to the cost of elementary and secondary education in 2000, due to class disruption and violence, special education and tutoring, teacher turnover, truancy, academic failure, student

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<sup>10</sup> From: G McIntosh and M Moreno, "Fatal injuries in adolescents," *Wisconsin Medical Journal* 99 (9): 34-38 (2000).

<sup>11</sup> Excerpted from *Adolescent Health in Colorado, 2003*, page 58, from the CDPHE.

assistance programs, property damage, injury and counseling. Costs associated with use of alcohol by youth are over \$52 billion for medical expenses, the criminal justice system, loss of future earnings, property damage and lost quality of life.

Use of alcohol or other drugs impairs judgment, a skill that adolescents are still developing. Substance abuse is associated with mood changes, memory loss and brain damage, thus increasing the chances of a variety of education-related issues, including poor school performance, truancy, academic failure, dropping out of school and limited expectations for higher education.

According to the *Adolescent Health in Colorado, 2003 Report*, the following efforts are considered best practices for reducing substance abuse among adolescents:

- **Parents** – Parents can model responsible behavior, educate themselves about teen drug abuse, give and enforce clear messages about alcohol and other substances, and get involved and stay involved with local and school prevention efforts.
- **Schools** – Schools can systematically address risk behaviors through health education, communication and peer-resistance skills, family and community involvement, health services, and counseling. Colorado's school-based health centers are an important venue for substance abuse services.
- **Communities** – Health care providers who serves teens should routinely take a history and provide counseling on common risk factors. Policy-level approaches include strengthening enforcement of DUI laws for youth; lowering the blood alcohol content threshold for youth and imposing a zero tolerance policy for drinking and driving; and enacting keg registration laws.

Other approaches include substance abuse training for all those who work with teens to recognize signs of substance abuse; improving, expanding and funding existing prevention programs; and encouraging the hospitality sector to engage in responsible alcohol service, making food available to patrons and not serving those under the age of 21.

**Close to home: HB00-1342.** In May 2000, the Colorado legislature passed HB00-1342, the Prevention, Intervention, and Treatment Services for Children and Youth Act, now CRS 25-20.5. The overall purpose of the legislation was to create a more unified, effective and efficient approach to the delivery of state and federally-funded prevention, intervention and treatment services for children and youth in Colorado.

To meet statutory obligations outlined in the legislation, the Interagency Prevention Systems Project at CDPHE works with prevention and treatment intervention program staff from the Departments of Education, Human Services, Public Health and Environment, Public Safety, and Transportation. Representatives of these state agencies make up the membership of the Prevention Leadership Council. The Colorado Prevention Leadership Council has identified the following goals:

- Coordinate and streamline state-level processes for distributing resources and administering programs.
- Enhance the capacity of local communities' prevention, intervention and treatment providers through a coordinated system of training and technical assistance.
- Enhance prevention, early intervention and treatment services through the application of standards for providers and service delivery, promoting "best practices/best processes," and fostering rigorous program evaluation.
- Assure that user-friendly data are available to local communities to assist in local planning and decision-making processes.
- Develop and maintain mechanisms to ensure collaborative planning and decision-making among local service providers, community groups and state agencies.
- Promote prevention, intervention and treatment services for children and youth by reporting program outcomes and accomplishments to key decision-making groups.

In addition to the Interagency Prevention Project, the Prevention Services Division also administers grant programs that target youth who are at-risk for delinquency. Below find a brief description of the programs managed by the Prevention Services Division, the funding levels of these programs for FY03-05 and a discussion of the impact of either decreased or increased funding levels.

#### ❑ **Build a Generation (State Funds)**

Until FY02, Build a Generation (BAG) was a prevention initiative for Colorado's communities, designed to strengthen support systems for children. Started in the early 1990s, BAG focused on providing grass-roots, community support for efforts that supported children to developing healthy, safe, pro-social, and productive lives. BAG provided a framework for training community leaders, identifying and prioritizing empirically-based risk factors, assessing current resources in a community, identifying community resource gaps and developing a comprehensive strategic prevention plan.

The BAG program was based on the strategy for youth violence prevention studied and promoted by the federal Office of Juvenile Justice and Delinquency Prevention. The program focused on empowering community members to understand the specific needs of the youth in their communities. BAG was administered by the Division of Criminal Justice from 1992-2001. An executive order transferred BAG to the Department of Public Health and Environment in

December 2001. The program was eliminated in the FY03 state budget cuts.

**Table 2.7**

<b>Build a Generation Program</b>	<b>FY01</b>	<b>FY02</b>	<b>FY03</b>
Appropriated	\$429,000	\$429,000	0

Approximately 75 percent of the BAG communities have been able to sustain efforts through a combination of local, state, private and federal dollars. However, many of these communities have a decreased capacity to serve youth. Statewide, because of lack of funding, there has been no expansion into additional communities.

❑ **Tony Grampsas Youth Services (TGYS) Program (State Funds)**

The Tony Grampsas Youth Services (TGYS) program is a statutory program within the Colorado Department of Public Health and Environment, Prevention Services Division. The TGYS program is intended to provide funding and to oversee the provision of prevention, intervention, and treatment services through federally and state-funded prevention, intervention and treatment programs to ensure collaboration among programs and the availability of a continuum of services for children and youth.

Debates over the FY03 state budgets resulted in the elimination of an anticipated \$7.6 million for TGYS from the state appropriations bill. These funds were reverted to the state General Fund to help address the state budget shortfall. The \$1.2 million from the Youth Mentoring Cash Fund continued for six months into the fiscal year and then was reverted to the General Fund.

In FY04, the one-time federal Job and Growth Tax Relief Reconciliation Act of 2003 funds were made available to support 105 of the programs that had previously applied for and were approved by the TGYS Board to receive funding in 2002.

**Table 2.8**

<b>Tony Grampsas Youth Services Program</b>	<b>FY02</b>	<b>FY03</b>	<b>FY04</b>	<b>FY05</b>
Appropriated	\$8,862,029	\$1,200,000	\$4,000,000	\$3,491,558

As shown in Table 2.8, funding for TGYS has been considerably reduced in recent years.

In FY02, TGYS was able to fund 188 grantees statewide and serve 83,484 persons. The number of new subgrantees shrunk to 22 in FY03. In FY04, TGYS funded 106 programs and served 39,190 persons. Currently, in the FY05 budget year, TGYS is funding 105 subgrantees. Over the years of budget reductions, several of the local agencies closed their doors or reduced programming; others cut back on the number of youth they were able to serve.

In FY05 approximately \$3.4 million in TGYS funding was reinstated, using Tobacco Settlement Funds instead of state General Fund. Programs that received one-time federal funding in 2003 were eligible to continue funding for an additional year (and 104 out of 105 programs chose to reapply).

#### **□ Child and Adolescent Violence Prevention Grant (Federal Funds)**

The Colorado Department of Public Health and Environment received an \$85,384 grant to improve the health of Colorado's children and adolescents by preventing violence. Colorado is one of eight states to receive funding from the Centers for Disease Control and Prevention for a two-year program that will work to support change in societal norms and environmental conditions contributing to violence.

The prevention program is being designed to provide information on risk and protective factors for various forms of violence including the following:

- youth suicide
- child maltreatment
- teen dating violence
- sexual violence
- school violence
- community violence and bullying.

The focus of the program is to prevent youth from becoming victims or perpetrators of violence. Research findings from this pilot project will be used to guide the development of state-specific prevention strategies that can address these forms of youth violence. Officials from the Department of Public Health and Environment report that this program will build an understanding of the situations that contribute to violence while assisting young people in learning ways to prevent violence.

The program, which will be housed in the Department of Public Health and Environment's Injury and Suicide Prevention Program, is a collaborative effort between the department's Injury Section and the Child Adolescent and School Health Section.

This project will not deliver direct services. Rather, it will provide valuable information to the State of Colorado and violence prevention programming across the state.

**Summary: Department of Public Health and Environment, Early Prevention and Intervention.** Significant efforts are underway at CDPHE to address the issues of concern to the Juvenile Council. In fact, Chapter 11 of *Adolescent Health in Colorado, 2003* specifies the vision and ten action steps identified by the Advisory Council on Adolescent Health. Its vision is to forge and strengthen state and local partnerships that promote the health and well-being of Colorado's adolescents, emphasizing positive youth development, prevention, risk reduction and early intervention. Following are the ten action steps the Advisory Council on Adolescent Health has identified move forward its agenda for adolescent health.

### **Ten Action Steps Identified by CDPHE's Advisory Council on Adolescent Health**

1. *Build Public Support for Investment in Youth.* A great deal is known about how to address the opportunities for positive youth development and to reduce the potential for adverse consequences of adolescent risk-taking. Adequate long-term investment will always be required, and the voting public must see the purpose and value of investing its scarce resources.
2. *Involve Youth in Policy Formation and Program Implementation:* Use teens' firsthand knowledge of school, peer and community environments in forming policies that impact youth. Employ this maxim for youth involvement in policy formation, planning, implementation and evaluation: "Nothing about us without us."
3. *Build on Opportunities for Crafting Positive Youth Policy:* Create criteria for assessing and developing policies that lead to a comprehensive set of youth policies.
4. *Strengthen Coordination of Youth Programs and Services:* Reduce the dissipation of resources that may result from categorical federal funding, lack of state coordination and local fragmentation and service gaps.
5. *Support Parents in Effective Parenting of Adolescent Children:* Help families to reach their potential as irreplaceable positive influences in the lives of teens.
6. *Foster Schools That Promote Health and Development:* Prepare students to reach their full academic potential by influencing their behavioral choices and by teaching social skills.
7. *Ensure Access to Health and Mental Health Services:* Assure availability of services for early identification of, and intervention with, at-risk adolescents.
8. *Offer Positive Options to Youth:* Reduce the potential for risky behavior by teens through a menu of activities that meets a variety of interests.
9. *Adopt Evidence-Based Approaches:* Aggressively promote evidence-based prevention strategies and programs.

- 10. Use Data to Determine Resource Allocation:** Drive decision-making with sound evidence of need and outcome measures of health and well-being.

Given the excellent work and institutionalized commitment of CDPHE to developing and implementing programs that foster adolescent health, and given the overlap between the Juvenile Justice Council's interests and the initiatives by CDPHE, the following is recommended:

- **Host a formal round-table discussion with stakeholders from the state department of public health and environment, with an expanded representation from the agencies represented on the Juvenile Justice Council.**
  - a. Identify methods to collaborate where appropriate.
  - b. Identify gaps in current programming.
  - c. Develop strategies that support the at-risk prevention activities, intervention programs, and evaluation studies of the CDPHE.



## **Section Three: Treatment and Other Interventions**

### **Colorado Department of Human Services**

#### **Alcohol and Drug Abuse Division (ADAD)**

The Alcohol and Drug Division is a vital agency in Colorado's efforts to improve the health and safety of local communities. The mission of ADAD is to develop, support and advocate for comprehensive services to reduce substance use disorders and to promote healthy individuals, families and communities. Reducing the social and economic consequences of untreated substance use disorders requires a planned investment in evidence-based prevention, intervention, and treatment.

According to CDPHE's *Adolescent Health in Colorado, 2003*, the younger and more often a teen drinks, the higher the risk of developing alcohol-related problems:

- 26.9 percent of adults who began drinking before they reached the legal drinking age report having alcohol-related problems, compared to only 11 percent of those who begin drinking only after they reach the legal drinking age.

This statistic is particularly noteworthy given the 83 percent increase between 1994 and 2003 in the proportion of girls begin charged with DUI offenses nationwide.

Colorado has had a "minimum drinking age" law on the books since 1987 prohibiting anyone under age 21 from purchasing alcohol, and a law setting a lower BAC threshold (between .02 and .05) for drivers under 21 since 1997.<sup>18</sup> (Colorado's BAC threshold for drunken driving is .10 percent for persons over 21.) Yet, one out of seven traffic fatalities investigated by the Colorado State Patrol in 1999 involved a driver younger than 20. A teen driving under the influence of alcohol or drugs was involved in 19 percent of those fatalities.<sup>12</sup>

According to ADAD's 2004 report to the Joint Health and Human Services Committees of the state legislature, there are an estimated 30,000 adolescent substance abusers (ages 12-17) in Colorado. In FY2004, ADAD reported that 4,068 youth (18 and under), were admitted to publicly funded programs. This indicates that approximately 15 percent of those in need of treatment actually received it through publicly funded programs. Between 60 percent and 80 percent of the youth in the juvenile justice system have substance abuse issues, according to most estimates.

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<sup>12</sup> Colorado State Patrol statistics on teens involved in traffic fatalities in 1999 at [www.state.co.us/gov\\_dir/cdps/Stats/Teens/Teens.htm](http://www.state.co.us/gov_dir/cdps/Stats/Teens/Teens.htm); National Safety Council, *Alive @ 25: A Survival Course in Traffic Safety* Developed by the National Safety Council (no date).

The 2003 *Youth Risk Behavior Survey* by the Monitoring the Future project obtained information from 757 students in 23 public high schools in Colorado. Among its findings:

- Almost half of the students surveyed in 9<sup>th</sup> through the 12<sup>th</sup> grades had used marijuana
- One-fourth of 9<sup>th</sup>-12<sup>th</sup> graders used marijuana before the age of 13.
- 29 percent of 9<sup>th</sup>-12<sup>th</sup> were already binge drinkers (having 5 or more drinks of alcohol in a row)
- 17 percent of students in the 11<sup>th</sup> and 12<sup>th</sup> grades drove vehicles while under the influence of alcohol
- One out of every four Colorado high school students rode one or more times in a vehicle driven by someone who had been drinking alcohol

As further indication of the scope of the problem in Colorado, ADAD reports that, among persons 18 or older in its treatment data system (Colorado's Drug/Alcohol Coordinated Data System),

- 28 percent of those who first used marijuana before age 12 compared to 21 percent of those who first used marijuana at age 18 or older, were assessed at treatment admission as having a mental health problem in addition to substance abuse.
- In calendar years 2003 and 2004, among Colorado treatment clients aged 18 and older, 79 percent reported first use before age 18 and 9 percent reported first use before age 12.

If services are provided to youth when they begin experimenting or using on a regular basis, chances are increased that this pattern could be interrupted, preventing serious addictions from occurring.

ADAD's largest revenue source for funding prevention, intervention, treatment, and detoxification services come from the federal government in the form of a Substance Abuse Prevention and Treatment (SAPT) Block Grant. **ADAD has included adolescents as a priority population for treatment despite the fact that the federal SAPT Block Grant does not.** Since youth are not an identified federal treatment priority population in the Block Grant, and therefore have more limited access to treatment resources, ADAD formally requires its Managed Service Organizations (MSO) to partner with SB 94 Advisory Committees, Child Welfare, the Division of Youth Corrections (DYC) and probation departments across the state to serve this population.

Since many of these systems have sustained funding reductions, the overall impact to adolescent treatment has been compounded. **Many youth and families have little to no assistance in covering the costs of treatment.** Additionally, the majority of families does not have any, or has inadequate, private insurance coverage for treatment. Currently Medicaid does not cover substance abuse treatment although legislation passed in 2005 gives the Department of Health Care Policy and Financing authority to seek approval from the federal government to create a Medicaid-funded outpatient substance abuse treatment benefit.

Courts, probation, schools, DYC, and county departments of human services/social services refer youth and families for the following ADAD-supported drug and alcohol services:

- detoxification
- outpatient, intensive outpatient
- school-based counseling
- residential services

Substance abuse treatment can significantly reduce further penetration into the juvenile justice system. However, decreases in services following funding cuts will likely increase the need for more costly programs in future years.

- ❑ Incarceration of one youth offender in Colorado's Department of Corrections Youth Offender Services cost \$62,262 per year. In 2003 there were 250 youth offenders, costing taxpayers approximately \$15 million dollars per year.
- ❑ Commitment of one youth in Colorado's Division of Youth Corrections costs an estimated \$58,400 per year. In FY03-04 there were 1,377.4 youth offenders, costing Colorado \$80,440,160 per year.

Many of these youth have documented substance abuse disorders that had they been properly treated within reasonable time frames, may have prevented involvement with the Department of Corrections and the Division of Youth Corrections. Research clearly shows that treatment works. **Studies show drug treatment reduces drug use by 40 to 60 percent and significantly decreases criminal activity during and after treatment.**

**Service reductions.** Funding reductions in the Colorado Department of Human Services in the past several years has significantly decreased the Department's capacity to assist local service providers. Following are a few anecdotal examples of the negative impact reductions in social services have on local communities.

- In 2002, a local department of human services experienced more than \$300,000 in cuts to its service budget. Drug and alcohol services suffered extensively.
  - In this agency, three out of seven staff working in an existing intensive outpatient program was let go and the treatment services were no longer available for referrals from the schools or the local probation department.
- One of Colorado's largest substance abuse providers in the Denver metro area, serving Denver, Arapahoe, Adams, and Jefferson counties, scaled back services for aftercare and prevention at one of their residential programs. This program offers critical support to youth transitioning back into their communities.
  - The aftercare program went **from serving 117 youth in FY 02-03, to 30 in FY 05.**
  - Eventually, this aftercare program closed

- In one program, outpatient services served 450 youth in FY02 were served compared to 192 youth served in FY05.
- Some schools services have been completely eliminated.
- One large agency cut five full-time positions in residential services and 3 additional full time employee's in outpatient services over the past 3 years.
- A newly built day treatment program closed its doors within the first year.
- El Paso County reports a significant reduction in providing treatment services that relates directly to keeping youth out of detention.
  - Lack of available interventions prior to placement and a lack of transition/support services once a youth returns to their community.
  - Several treatment providers reported "there are many barriers to providing substance abuse services for youth in the juvenile justice system as a result of a lack of funding. It is an ongoing problem" (composite statement).
- In Cortez, services to 30 juveniles were terminated.
- In Mesa County, a successful, outcome-based program specializing in working with youth who have mental health and substance abuse challenges was eliminated.
  - This was the only program of its kind on the western slope.
  - It served approximately 200 youth and families a year consisting of both Medicaid and non-Medicaid eligible individuals.
  - Mesa County officials report an increase in delinquency cases.

ADAD receives funding from multiple sources, including the state General Fund and federal agencies. As shown in Table 3.1, the funding for ADAD has remained fairly stable, belying the fact that services to youth are reducing significantly across the state.

**Table 3.1**

<b>ADAD Substance Abuse Treatment Funding History</b>	<b>FY02</b>	<b>FY03</b>	<b>FY04</b>	<b>FY05</b>
Allocated for ALL treatment populations	\$25,513,856	\$25,095,083	\$27,489,148	\$26,889,162

**Summary: Colorado Department of Human Services, Alcohol and Drug Abuse Division (ADAD).** ADAD funding remains insufficient to meet the needs of youth. This fact, combined with significant budget reductions to most of the juvenile justice serving

agencies, it is not surprising that service providers are reporting closures of youth serving programs, fewer services and resources available for youth. **These gaps in services include a lack of available interventions prior to a youth being placed in care, and a lack of available interventions when a youth is returned to a community.**

The prevention and intervention leadership and initiatives provided by ADAD are a vital and necessary part of juvenile justice and delinquency prevention. When programs are closed and staff are terminated from employment, not only is the capacity to serve clients eliminated, but the capacity to rebuild when funding is reinstated is severely damaged because the infrastructure supporting the institutionalization of services is lost.

This information presented here leads to the following recommendation:

- **Work closely with ADAD officials to identify gaps in substance abuse treatment.**
  - **Coordinate efforts to enhance substance abuse interventions.**

## **Colorado Department of Human Services**

### **Division of Mental Health**

The Division of Mental Health contributes to community health by providing for community-based treatment for adolescents with mental health needs and their families. According to a report by the U.S. Surgeon General (2001) **Twenty-one percent of adolescent boys and 13 percent of adolescent girls report that they have “no one” to talk to when they feel stressed, overwhelmed or depressed.**

In the United States, emotional and behavioral problems and associated impairments among children ages 1-19 are most likely to lower their quality of life and reduce their life chances. No other set of conditions is close in the magnitude of its deleterious effects on children and youth in this age group. An average episode of depression usually lasts from seven to nine months, but 20 to 40 percent of children with depression experience another episode of depression within two years, and most (70 percent) will do so by adulthood.<sup>13</sup>

Nearly every domain in an adolescent's life has an impact on that child's mental health.<sup>14</sup> Furthermore, mental health affects almost every decision an adolescent makes about behavior. Many factors have an effect on good mental health during adolescence, including the following:

- Self-esteem and resilience in handling failure
- Stability of moods, depression and suicidal ideation

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<sup>13</sup> Children's Mental Health: A National Call to Action, US Surgeon General (2001), as cited by CDPHE's *Adolescent Health, 2003* on page 15.

<sup>14</sup> Excerpted from CDPHE's *Adolescent Health, 2003*, Chapter 2.

- Perceived physical appearance and weight
- Peer support and influence
- Sexual development, behavior and identity
- Parental expectations and communication
- Pregnancy and HIV/AIDS
- Sexual abuse and rape
- Family issues
  - support
  - independence
  - parental expectations
  - limit setting
  - conflict
  - family history of mental health and substance abuse
- Transition through grade levels
- Academic success
- Harassment and bullying
- Extra-curricular activities
- Transition from high school to college
- High-risk behaviors
  - substance use
  - violence
  - firearm use
  - exposure to violence
  -

When teens experience multiple risk factors, such as poverty, criminal behavior, violence or substance abuse, the probability of mental health problems increases. Children in juvenile justice facilities have a very high proportion of diagnosable mental health problems such as depression, post traumatic stress disorder, anxiety and mood disorders.

Adolescents with learning disabilities are at greater risk of emotional distress than their peers. Gay, lesbian, bisexual, transgender or questioning (GLBTQ) youth also are at higher risk for mental health problems and poor access to care, especially among youth of color. Homeless teens also suffer disproportionately from issues concerning mental health. Adolescents that are GLBTQ *and* homeless are even more vulnerable.<sup>15</sup>

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<sup>15</sup> See National Center for Education in Maternal and Child Health, "Adolescence checklist," in M Jellinek, BP Patel and MC Froehle, eds., *Bright Futures in Practice: Mental Health – Volume II. Tool Kit*, p. 52 (2002); JM Patterson, "Risk and protective factors associated with children's mental health," *Healthy Generations* 2(3), School of Public Health, University of Minnesota (2002). National GAINS Center, *Focus on Youth* (2001); National Mental Health Association, *Prevalence of Mental Disorders among Children in the Juvenile Justice System* (no date); Coccozza and Skowrya, "Youth." MV Svetaz, M Ireland and R Blum, "Adolescents with learning disabilities: Risk and protective factors associated with emotional well-being: Findings from the National Longitudinal Study of Adolescent Health," *Journal of Adolescent Health* 27(5):340-348 (2000); Advocates for Youth, Lesbian, Gay, Bisexual, and Transgender Youth: At Risk and Underserved (1998); Sexuality Information and Education Council of the US (SIECUS), "Health risk behaviors among homeless teens," *SHOP Talk* 6(11) (2001); JW Noell and JM Ochs, "Relationship of sexual orientation to substance use, suicidal ideation, suicide attempts, and other factors in a population of homeless adolescents," *Journal of Adolescent Health* 29(1): 31-36 (2001).

The Colorado Division of Mental Health supports an array of community-based mental health services for children and adults who are not eligible for Medicaid.<sup>16</sup>

### **Funding cutbacks**

**Medicaid mental health spending has been cut by 10 percent in the last five years** as appropriations per eligible child decreased by \$31.1 million, according to material published by the Colorado Behavioral Healthcare Council. The impact of this has been significant for children participating in outpatient community mental health programs and for children with serious emotional disturbances who were/are hospitalized.

Many providers have scaled back their outreach to schools. Since 1995, 144 child and adolescent acute treatment beds have been eliminated at the mental health institutes in Pueblo and Fort Logan, the two state mental health hospitals. Today there are 50 inpatient beds for children and adolescents remaining at the state mental health institutes. The majority of children are being served in community settings, according to *Colorado Children's Budget 2005*, a report produced by the Colorado Children's Campaign.

Colorado has reduced General Fund support for mental health services for the medically indigent by 23 percent since FY2002. Children represent 22 percent of the targeted population so these cuts have eliminated services for a large number of children with severe emotional disturbances. A 2002 Population in Need Survey shows there are more than 30,000 children in Colorado with serious emotional disturbances who are not receiving needed services, according to *Colorado Children's Budget 2005*, a report produced by the Colorado Children's Campaign.

The **Medicaid Mental Health Child Placement Agency** program in which counties and mental health agencies collaborate to provide services to children referred by child placement agencies has remained level at \$7,440,901 for the past two years despite a growing state population.

The **Alternatives to Inpatient Hospitalization for Youth** program was created in FY03 as a result of the reduction of eight adolescent beds at the Colorado Mental Health Institutes at Pueblo and Fort Logan. Funding has remained level at \$246,282 since the programs inception in 2003.

The **Child Mental Health Treatment Act** (HB 99-1116) provides residential treatment to children with serious emotional disturbances without requiring court action. Medicaid covers a portion of the treatment costs for children placed outside their homes. Funding

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<sup>16</sup> The Medicaid Mental Health Program is now under the Colorado Department of Health Care Policy and Financing.

has increased by 12 percent from FY03-FY05, according to the *Colorado Children's Budget 2005* prepared by the Colorado Children's Campaign. The Legislature authorized an additional \$200,000 to support community transition services for youth receiving residential treatment through the Act.

A community-based- pilot program authorized by **HB 00-1034** funds two urban and rural projects provide community-based intensive treatment, supervision and management services to hi-risk juveniles with serious emotional disturbances that are involved in juvenile justice system. Funding for this program has remained level at \$350,400. The jurisdictions contribute half of this cost as matching funds.

- ***A Note About Cost Effectiveness:*** *An evaluation of the 65 youth who had completed the program for at least 12 months as of June 30, 2004, showed the following results:*
  - *Youth who completed the program it cost taxpayers approximately \$5,850 (on average), in the 12 months following the program compared to \$24,317 for non-completers.*
  - *This savings of approximately \$18,000 is significant.*<sup>17</sup>

### **Summary: Colorado Department of Human Services, Division of Mental Health.**

It is clear that mental health is a necessary condition for successful youth outcomes. Based on the material presented in this section leads to the following recommendation:

- **Follow the “best practices” specified in the Mentally Healthy Teens chapter of the CDPHE report *Adolescent Health: 2003*.**<sup>18</sup>
  - ***Support Mental Health Services in Primary Care and School Settings*** – Colorado has 40 comprehensive school-based health centers, 30 of which are in secondary schools.
  - ***Promote Integrated Community Initiatives*** – Programs are more likely to be successful if they are comprehensive and intensive, and designed to address suicide and suicidal behavior as part of a broader focus on mental health, coping skills in response to stress, depression, substance abuse and aggressive behaviors.
  - ***Establish Programs That Promote Healthy Social Skills and Relationships*** – Relationships of high quality have a beneficial impact on psychological health.
  - ***Support Effective Treatment Approaches*** – Effective approaches that work to change a person's thoughts in order to change a behavior or emotional state, drug therapy and

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<sup>17</sup> Evaluation completed by Paul Retzlaff for the Colorado Division of Criminal Justice, October 1, 2005. A copy of the report is available from DCJ.

<sup>18</sup> <http://www.cdphe.state.co.us/ps/adolschool/adolhealthch2.pdf>



environmental strategies appear to reduce mental health disorders, including depression and anxiety.

## Section Four

### COLORADO'S JUVENILE JUSTICE SYSTEM

The operation of many government functions in Colorado is decentralized with both state and local agencies engaged in program administration and service delivery. Delinquency services, then, are organized at both the state and local level.

Twenty two independent judicial districts operate in Colorado, with local district courts administering probation services, with secure (regional) detention facilities, commitment programs, and aftercare for juveniles administered and operated at the state level. Local district attorneys' offices are responsible for filing decisions based on juvenile delinquency intake screening. Many also have formal pre-file juvenile diversion programs. Probation offices, under the state district court system in each Judicial District, are responsible for pre-disposition investigation and probation supervision. The Division of Criminal Justice, under the Colorado Department of Public Safety is responsible for analyzing policy, conducting criminal justice research, managing programs, and administering grants. The Department of Human Services, Division of Youth Corrections (DYC) is responsible for administering the state-funded SB94 Alternatives to Incarceration Initiative, juvenile detention, state delinquency institutions and juvenile parole. DCJ, the Division of Probation Services, the Division of Mental Health, and DYC collaborate with the Department of Education and local school systems, the Alcohol and Drug Division, and other public and private entities. This is a complicated assortment of stakeholder-agencies.

#### Law Enforcement

Juveniles may be taken into temporary custody by law enforcement when a lawful warrant has been executed or without a court order if reasonable grounds exist to believe that a juvenile has committed a delinquent act. Temporary custody does not constitute an arrest or initiate a police record. Once a juvenile is taken into temporary custody, a parent, guardian or legal custodian must be notified in a timely manner by the law enforcement officer. Juveniles cannot be held at a law enforcement agency for more than six hours, and then only for purposes of process and release. If a formal screening for possible detention is not warranted, the juvenile may be released to the parent or guardian, accompanied by a "lecture and release" or summons to appear in court at a later date.

**Budget cuts affect law enforcement.** Law enforcement agencies have been affected by local and federal budget cuts in the areas of training and recruitment assistance. The consequences of these cutbacks has been, according to anecdotal information provided by officers, a significant reduction in their perceived capacity to serve youth with whom they come into contact. Specifically, at the law enforcement level, the officer's options for responding to problem behavior by youth have decreased.

Law enforcement agencies report the need for capacity in the following areas:

- o rural non-secure, temporary holding and placement options;

- access to rural and suburban juvenile alcohol and drug detoxification and substance abuse treatment services;
- funds for transportation of juveniles for rural law enforcement; and
- information sharing capacity among law enforcement agencies to track and better identify the activities and needs of juvenile offenders.

**Law enforcement and the mentally ill.** In recent years, Colorado law enforcement agencies have committed to training a portion of officers to respond to citizen calls regarding individuals suffering from mental illness. This training effort, sponsored by the Division of Criminal Justice and supported by grants from the U.S. Bureau of Justice Assistance, involves 40-hours of classroom lecture and role playing methods to de-escalate frightened and sometimes suicidal people. Officers learn to use other options besides arrest to manage this difficult population. Training dollars for this initiative are limited, and the need to increase the number of trained officers is vital given the closures of residential mental health facilities.

This response to the mentally ill in the criminal justice system, called Crisis Intervention Training for law enforcement officers, should be expanded. The curriculum should be enlarged to include a substantial focus on crisis intervention with juveniles displaying behaviors related to mental illness and/or substance abuse. The Crisis Intervention Teams (CIT) Program is an evidence-based program that requires collaborative agreements between law enforcement, hospitals and treatment providers to better meet the needs of public safety and the person who may need medical rather than criminal justice intervention.

Between 2001 and 2004 in Colorado, 673 officers, including 17 non-sworn officers, have completed the 40-hour course provided by the Colorado Regional Community Policing Institute. Responses to crisis calls in the jurisdictions trained indicate that children and youth age 17 and younger represent 22.3 percent of the police calls. The CIT program is currently developing a specialized juvenile CIT curriculum. Officers who have completed the full 40-hour course will be eligible to attend this 16-hour class. Resources to implement the training will continue to be a concern.

**Juvenile Arrest Rate in Colorado.** In Colorado in 2002, the juvenile violent crime arrest rate was 213 per 100,000 residents ages 11-17, lower than the national rate of 295. However, the arrest rate for weapons offenses was 144, significantly higher than the national average of 105. The arrest rate for drug crimes was especially high, at 729 compared to 571 for the nation.

In general, however, the juvenile crime rate in Colorado continues to decline. Non-violent arrest rates for juveniles have declined steadily since the mid-1990s with the exception of auto theft, which tended to remain relatively stable. In 2003, the rate was lower than the rate in 1980. Nevertheless, juvenile weapons offenses and drug crime rates remain high.

### **Recommendation.**

- **Efforts to identify gaps in services should remain mindful of Colorado's higher than average rates for juvenile weapons and drug offenses.**

**Table 4.1**

Number of juvenile arrests by index crimes, 1980-2003							
Colorado juvenile violent arrests 1980-2003				Colorado juvenile non-violent arrests 1980-2003			
	Population	# Arrests	Rate*		Population	# Arrests	Rate*
1980	810,648	1,007	124.2	1980	810,648	16,503	2035.8
1981	818,588	972	118.7	1981	818,588	15,922	1945.1
1982	831,319	947	113.9	1982	831,319	15,101	1816.5
1983	841,963	1,071	127.2	1983	841,963	16,017	1908.8
1984	842,963	1,106	131.2	1984	842,963	16,168	1918.0
1985	846,353	1,139	134.6	1985	846,353	16,782	1982.9
1986	848,878	1,205	142.0	1986	848,878	15,882	1870.9
1987	853,016	1,003	117.6	1987	853,016	15,362	1800.9
1988	854,250	1,002	117.3	1988	854,250	14,879	1741.8
1989	858,774	1,389	161.7	1989	858,774	15,579	1814.1
1990	866,683	1,556	179.5	1990	866,683	16,169	1865.6
1991	883,908	1,834	207.5	1991	883,908	16,822	1903.1
1992	909,930	1,833	201.4	1992	909,930	16,037	1762.4
1993	937,195	1,815	193.7	1993	937,195	14,879	1587.6
1994	962,896	1,694	175.9	1994	962,896	15,773	1638.1
1995	986,495	1,446	146.6	1995	986,495	16,226	1644.8
1996	1,007,597	1,200	119.1	1996	1,007,597	15,446	1533.0
1997	1,029,383	1,566	152.1	1997	1,029,383	16,252	1578.8
1998	1,054,498	1,477	140.1	1998	1,054,498	14,964	1419.1
1999	1,081,003	1,445	133.7	1999	1,081,003	13,285	1229.0
2000	1,108,822	1,136	102.5	2000	1,108,822	12,112	1200.6
2001	1,137,224	1,234	108.5	2001	1,137,224	11,283	992.2
2002	1,149,694	1,158	100.7	2002	1,149,694	11,386	990.4
2003	1,161,963**	1,027	88.4	2003	1,161,963**	9,339	803.7
* Rate per 100,000 juveniles. ** The 2003 population is a projected population total.				* Rate per 100,000 juveniles. ** The 2003 population is a projected population total.			
<b>Violent Crime:</b> Murder and non-negligent manslaughter, forcible rape, robbery, and aggravated assault.				<b>Non-Violent Crime:</b> Burglary, larceny-theft, and motor vehicle theft.			
<b>Sources:</b> Arrest Data – Colorado Bureau of Investigation Annual Reports, 1980-2003.				<b>Sources:</b> Arrest Data – Colorado Bureau of Investigation Annual Reports, 1980-2003.			
Population Data – Colorado State Demographer's Office, Department of Local Affairs.				Population Data – Colorado State Demographer's Office, Department of Local Affairs.			

Source: DCJ's Office of Research and Statistics, *Crime and Justice in Colorado, 2004*.

**State-Wide Juvenile Assessment Centers (JACs).** An important resource to law enforcement officers is the local Juvenile Assessment Center. Several communities have established assessment centers for youth and families by using federal Juvenile Accountability Incentive Block Grant (JAIBG) Funds.

Where these centers are in place, law enforcement officers have the option of taking troubled youth directly to the JAC for a thorough risk/needs assessment. The JACs use

the assessment information to identify appropriate interventions and social supports for the youth and his or her family to prevent or decrease future problem behavior.

These multidisciplinary centers are staffed by professionals from schools, social services, mental health, substance abuse, diversion, prosecution and probation. JACs often serve as the single point of entry for families seeking assistance with troubling behavior of their children.

Colorado currently has four fully operational Juvenile Assessment Centers around the state that operate on a combination of state funds for alternatives to detention, federal Juvenile Accountability Block Grant (JABG) funds and local support, including city and county funds.

**With a 33 percent decrease in the state alternatives to detention funds (SB94 Program), a 25 percent decrease in FY03-04 JABG funds, and a 66 percent decrease in JABG funds for the coming year, JACs are facing a significantly reduced capacity to serve clients.**

**TRAGIC CASE EXAMPLE:** *A youth was arrested for 3<sup>rd</sup> Degree Assault in Douglas County. The youth was referred to and placed into the Diversion Program. After being on Diversion, it became clear that the youth had a significant methamphetamine addiction. Diversion staff then referred the youth back to delinquency court due to out-of-control behavior. The court ordered the youth to be on Pre-Trial Release. The youth shows up to the Pre-Trial Office at what became the end of a two-week methamphetamine "bender." The youth was immediately referred to the emergency room to address the need for detoxification and management of his associated erratic manic behavior. The youth was released two hours later because detoxification services did not exist. The youth was then placed in a RTC facility. He ran away a few days later. When he was apprehended, the youth was finally hospitalized. He then fell into a drug induced coma due to brain swelling because of another "bender" he undertook after running away from the RTC. The coma lasted one month. The youth is not expected to make a complete cognitive recovery. The time of first police contact to completion of drug induced coma: Six months.*

Local support for the centers continues to increase, and while services will continue to decrease due to funding cuts, none of the centers have indicated they are at imminent risk of closing. Nevertheless, anecdotal information reflects the problems programs are experiencing currently because of reduced funding for community services.

- ❑ An important issue facing the Juvenile Assessment Centers is **the inability to provide the services needed for families** after they have been assessed.
- ❑ Youth referred to JAGs seem to be **increasingly more troubled**, with severe needs and at high risk for continued problem behavior.
- ❑ Community services for families with youth involved in the juvenile justice system no longer exist. These **youth then return back to the JAC with delinquency charges** because the earlier identified risk and protective factors were not addressed.
- ❑ Reductions in resources funding **SB94 initiatives** have resulted in an inability to use community intervention treatment programs because JAGs no longer have

- budget capacity to pay for services.
- ❑ Parents who bring troubled youth to JACs cannot afford the services to which they are referred. Either **insurance** does not cover a number of services or the service is not longer available in the community because the **program no longer exists**.
  - ❑ SB94 youth are being referred to **RTC placement** because community service capacity is limited or nonexistent.

## Recommendation

- **Undertake a comprehensive study of one jurisdiction that includes a JAC to document the impact of budget reductions on community service programs and quantify the extent to which troubled youth are further penetrating the juvenile justice system because of lack of resources in the community.**
  - Identify all cases referred by law enforcement to the JAC for a three to 6 month period.
  - Track these cases for 12 months following referral.
  - Interview decision makers (prosecutors, judges, JAC staff, law enforcement officers, service providers, state agency administrators) regarding the criteria used to place youth in specific service programs.
  - Interview youth and family members.
  - Document research findings.
  - Estimate the long-term costs of reductions in program services.
  - Work with local stakeholders to use research findings to identify gaps in services and develop a strategy to develop resources to provide necessary services to troubled youth and their families.

## Prosecution

The District Attorney (DA) is elected to a four-year term in each of the 22 judicial districts in Colorado. Judicial districts vary in the number of counties they cover, from one to seven. All delinquent offenses can be handled by the DA although in some jurisdictions certain minor offense cases are handled by municipal attorneys in the municipal court.

Initial case filing decisions are made by the Intake Section of the district attorney's office. Intake attorneys review law enforcement or probation officer referrals and decide whether to divert the case from formal filing, file charges, request an informal adjustment or deferred adjudication, and/or direct file to the criminal court. When the court orders detention, the DA files a petition within 72 hours alleging the delinquency behavior and the facts that bring the juvenile under court jurisdiction.

DA offices in Colorado have been affected by the funding cuts at the state and federal levels. Most of the DA offices have had to scale back or eliminate their juvenile diversion programs. While some local dollars are used for juvenile diversion programs, the broad

reduction in state funding reduced service capacity in the community. In turn, the DA's ability to access appropriate services and resources for youth has been significantly diminished.

**Table 4.2**

Juvenile filings (misdemeanor, felony, and direct file), FY00-04

<b>Misdemeanor Juvenile Filings<sup>1</sup></b>	<b>8,125</b>	<b>7,127</b>	<b>7,200</b>	<b>6,938</b>	<b>6,709</b>
Misd Filing - Deferred	610	567	544	592	739
Misd Filing - Dismissed	2,851	2,678	2,697	2,618	2,658
Misd Filing -Adjudicated	4,664	3,882	3,959	3,728	3,312
<b>Felony Juvenile Filings</b>	<b>10,667</b>	<b>10,812</b>	<b>11,459</b>	<b>11,212</b>	<b>10,467</b>
Felony Filing - Deferred	813	967	1,054	1,180	1,036
Felony Filing - Dismissed	4,502	4,432	4,636	4,479	4,461
Felony Filing - Adjudicated	5,352	5,413	5,769	5,553	4,970
Direct File to Adult Court <sup>2</sup>	280	198	217	231	202
Direct File Dismissed	68	47	58	75	83
Direct File Convicted <sup>3</sup>	204	146	156	152	118
Direct File Convicted - Y.O.S.	37	63	66	69	54
Direct File Convicted - D.O.C.	73	41	37	31	22
Direct File Convicted - Probation	52	34	51	47	27

**Notes:** 1: Only Filings in District courts are included.

2 Filings in criminal court of individuals under 18 at time of filing or identified as a direct filing based on case review.

3 Balance of cases resulted in a deferral.

**Source:** Data was extracted from the Judicial Department's Integrated Colorado Online Network (ICON) information management system and analyzed by DCJ's Office of Research and Statistics.

From DCJ's Office of Research and Statistics, *Crime and Justice in Colorado, 2004* .

**Trends in juvenile case filings.** In general, reflecting the decreasing crime rates, the number of cases processed in juvenile court also appears to be on the decline. The information presented in Table 4.2 is summarized in bullets below.

- ❑ Juvenile filings for misdemeanor crimes in Colorado have decreased 18 percent since 2000.
  - Misdemeanor cases deferred by the court increased by 18 percent.
  - Misdemeanor cases dismissed after filing increased from 35 percent (of cases filed) in 2000 to 40 percent in 2004.
- ❑ Misdemeanor cases adjudicated declined by 29 percent between 2000 and 2004.
- ❑ Juvenile felony filings have remained relatively stable after increasing by approximately 7 percent in 2003.
  - The number of felony cases deferred by the court increased by 22 percent between 2000 and 2004.
  - The number of felony cases dismissed following filing stayed relatively stable at approximately 42 percent of cases filed.

- ❑ The number of felony cases adjudicated decreased in 2004 after consistent increases between 2000 and 2003.
- ❑ Juvenile cases filed in adult court decreased by 28 percent, from 280 in 2000 to 202 in 2004.

**Overall, between 2000 and 2004, Colorado courts reported fewer juvenile case filings of both misdemeanors and felonies, and fewer adjudications of both types of crimes.** Approximately 30 percent of the total number of juvenile cases disposed in 2003 were violent crimes.<sup>19</sup>

**Table 4.3**

Race: Cases closed 2003

White	70%
Black	12%
Hispanic	15%
American Indian	1%
Asian	1%
Other	1%

**Source:** Data were extracted from the Colorado Criminal History Information System via the Colorado Integrated Criminal Justice Information System (CICJIS) Criminal Justice Analytic Support System (CJASS) and analyzed by DCJ's Office of Research and Statistics.

From DCJ's Office of Research and Statistics, *Crime and Justice in Colorado: 2004*.

A review of cases closed by race/ethnicity in 2003, as shown in Table 4.3, reflects the race/ethnicity of juveniles at case filing reflects 12 percent of defendants were Black/African American compared to a statewide Black/African American population of approximately 4.2 percent. Whites and Hispanics are slightly underrepresented in the proportion of cases prosecuted statewide.

## Placements

Most juveniles are sentenced to community placements. In fact, over half of youth receiving court sentences are placed on probation or intense supervision probation. Intensive supervision probation remains an important placement for violent offenders sentenced to the community, especially since 30 percent of offenders sentenced to probation have a current disposition for a violent crime. Approximately 10-20 percent of juveniles whose case were closed in 2003 were court ordered into detention (please see Table 4.3). The average length of stay in detention facilities in Colorado was about 13 days in FY04 (a reduction from 15 days in FY03). Not surprisingly, violent crimes are most likely to receive sentences to the Division of Youth Corrections or the Department of Corrections.

Below is a summary of sentencing placements/agencies in Colorado.

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<sup>19</sup> Source: DCJ's Office of Research and Statistics' *Evaluation of the Youthful Offender System, 2004*, Table 4.



## Probation

Municipal probation is managed by city or county court systems. District court probation is the responsibility of the Colorado Judicial Branch. Probation officers are managed by the chief probation officer in each judicial district. Probation officers provide assessments and pre-sentence information to the courts, supervise the offenders sentenced to community programs and provide special program services to aid those under their jurisdiction. Probation officers have the authority of a peace officer and although many officers carry juvenile specific caseloads, some officers in rural districts also supervise adult offenders. The number of juveniles annually on probation supervision has remained relatively stable, however probation projections for FY2006 indicate that caseloads are expected to increase. This expected increase is based on the lack of *less restrictive* options available to the court, such as diversion, and the lack of *more restrictive* options, such as detention, due to the capacity limit placed on detention beds.

**Juvenile probation caseloads in Colorado average 86 youth. This is nearly twice the national average** of 45 juvenile cases per officer. Although some restoration of probation officers has occurred during the last fiscal year, budget cuts in prior years resulted in the loss of a substantial number of officers statewide. Colorado would need an additional 94 juvenile probation officers to reach the national ratio of 1:45. The need for additional officers will increase if the probation caseload projections are realized.

**Table 4.4**

Type of Supervision	Cost FY05
Regular Probation	\$4.65
Intensive Supervision Probation	\$8.06

Not surprisingly, juveniles who successfully terminated from probation decreased slightly last year and, in turn, revocations and other unsuccessful terminations have increased somewhat. Table 4.5 illustrates the caseload size, projections and terminations for juveniles on probation.

**Table 4.5**

	FY 2001- 2002	FY 2002- 2003	FY 2003- 2004	FY 2004- 2005	Projected FY 2005-2006
New probation cases	7,600	7,764	6,823	NA*	7,550
Successful Probation Terminations	73 %	72 %	69 %	NA*	NA
Revoked – Unsuccessful Probation Terminations	20 %	21 %	23 %	NA*	NA

\* Data not currently available due to modifications to the probation management reports.

### Recommendation

- ❑ **Support the expansion of the Division of Probation Services to reduce juvenile probation officer caseloads by half.**

- Colorado's juvenile probation officer caseload size is twice the national average.
- Judicial's budget should include, at a minimum, an additional 94 probation officer positions.
- The reduction in local services and the capitation on detention beds results in more at-risk juveniles will be sentenced to probation.
- Probation costs \$4.65 per day, ISP costs \$8.06 per day compared to daily detention and commitment costs of \$138.84 and \$183.47, respectively.
- Intensive probation services are estimated to net the public a tax savings of \$5,000 to \$6,000 per participant when crime victimizations are factored into the cost.<sup>20</sup>

## **Colorado Department of Human Services Office of Children, Youth and Family Services**

### **Division of Youth Corrections**

The Division of Youth Corrections (DYC) is responsible for management and oversight of State-operated and privately contracted residential facilities that serve and treat youth aged 10-21 years who have demonstrated delinquent behavior. These responsibilities also include parole and after care services. The Division is also responsible for providing oversight and allocating funds to each judicial district in accordance with Senate Bill 91-94 to develop local alternatives to incarceration as a means of reducing reliance on costly residential placement. Some of the programs and initiatives under the authority of DYC are described below.

#### **Senate Bill 91 94 (SB 94) Alternatives to Detention**

In 1991, the population forecasts regarding Division of Youth Corrections (DYC) populations indicated the need for approximately 500 additional secure placement beds. Stakeholders at DYC, legislators, Joint Budget Committee Staff and others discussed the possibility of developing locally-based options and early intervention as an alternative to building expensive state facilities. These discussions culminated in the development of Senate Bill 91- 94. The bill contained provisions that:

- Outlined a process for the development of criteria for placement of juveniles in secure state facilities;
- Specified that a formula should be developed for the allocation of resources to each county in the state for the development of local services to be utilized as alternatives to the placement of youths in secure state facilities;
- Authorized the establishment of pilot programs in local jurisdictions that would provide services for juveniles that would help relieve overcrowding in state operated facilities;

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<sup>20</sup> Analysis by the Washington State Institute of Public Policy, The Comparative Costs and Benefits of of Programs to Reduce Crime, V. 4.0, May 2001.

- Specified that guidelines should be established for the emergency release of juveniles from state facilities during periods of crisis overcrowding;

SB 94 provides community based detention services for pre-adjudicated and sentenced youth. Such services include detention screening and assessment, case management, tracking, electronic monitoring, supervision, work programs, mentoring, counseling, educational/vocational assistance, mental health and/or alcohol treatment.

According to the FY04 SB94 Annual Report prepared by the Division of Youth Corrections, the program sustained a 25 percent reduction in the program budget. The state funding reduction was part of ongoing budget reductions that resulted in the broader array of state-funded youth-serving programs losing funds or being eliminated outright.

**The budget cuts to SB 94 have lead to an average decrease of 43 percent in treatment services, restorative services and direct support to youth and families.**

## Detention

**Detention Capitation.** In FY03 the detention bed capacity was capitated at 479 beds statewide. The capitation statute (19-2-Part 12 CRS) outlines a plan for allocations of detention beds by judicial district. The plan specifies sharing of bed capacities within defined catchment areas. The bed management plan was implemented on October 1, 2003.

Capitation was the result of a number of factors. Between FY90 and FY99, the detention average daily population grew by 61 percent. This trend began to subside when, between FY00 and FY04, the ADP began to decline about 4.5 percent each year. However, the significant increase, combined with state budget shortfalls, resulted in the capitation of detention beds.

Consequently, in FY04, ADP dropped 23 percent. In FY04, DYC served 7,290 youth in detention programs.<sup>21</sup>

**Detention: Pre-Adjudicated Youth.** Youth who are taken into custody by law enforcement officers may be referred for detention holds. These holds occur in Division of Youth Corrections-operated juvenile detention facilities. All detained youths must appear before a judge or magistrate within 48 hours of admission to detention. SB94 programs use a standardized screening instrument, called the Colorado Juvenile Detention Screening and Assessment, to provide recommendations for further secure detention, staff secure detention, release to shelter or pretrial detention, or release following the initial hearing. Referred juveniles are screened into detention prior to adjudication based on their circumstances and the severity of their crime. SB94-designated staff provide case management of youth under pretrial supervision as well as for those who continue to be placed in secure or staff-secure detention. Pre-adjudication detention may continue until a youth is released home, placed into residential care as a condition of probation, or committed to the Division of Youth Corrections. As previously mentioned, the average length of detention stay is 12 days

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21 Sources: Colorado Division of Criminal Justice, Adult Prison and Parole Population Projections, And Juvenile Commitment and Parole Population Projections, December 2004; Division of Youth Corrections Research and Evaluation Unit web site at [http://www.cdhs.state.co.us/dyc/dyc\\_research/htm](http://www.cdhs.state.co.us/dyc/dyc_research/htm).

**Post-Adjudicated Youth in Detention.** Youth may be sentenced to detention by the court as the result of a new adjudication and/or as a condition of probation. Such sentences cannot exceed 45 days. Community-based sanctions ordered by the court can shorten the length of stay in detention for these youth or can be accepted by the court as an alternative sentence.

The DYC does not have legal custody of these youth who have received short-term sentences to detention as a condition of probation or those who are ordered to DYC due to contempt of juvenile and municipal court orders. DYC is responsible for providing temporary physical custody. SB-94 staff provide screenings and initial assessments. Educational programming is provided for detained youths by the school district in which the detention facility is located. Crisis intervention, mental health screening and referral, and medical services are provided.

According to the SB 94 FY04 Annual Report, the clearest single impact of the detention bed caps was a markedly reduced rate of use of secure detention. DYC researchers calculated that the detention ADP rate for FY04 was 7.6 per 10,000 youth in the general population, down from 9.5 in FY03. This is the largest single year reduction in ADP in the history of the program.

The capitation law requires management of the detention cap by the judicial district, and SB94 staff have largely assumed this role around the state. To manage the cap, some districts report that youth are often being released into the community who in years past would receive a detention placement as a result of insufficient resources. This means that more high risk youth are being managed in the community, even as community resources are diminished. Due to the greater need and higher risk to the community, the services provided to these youth are more intensive and the demand for services is greater. Nevertheless, reduced resources for programming translates into a reduction of the number of youth that can be served.

**Positive outcomes resulting from the cap.** The SB 94 Annual Report also identified the following positive outcomes from the detention bed caps:

- ❑ increased focus on managing detention populations,
- ❑ increased effort to reduce lengths of stay,
- ❑ increased communication,
- ❑ increased pressure to resolve long-standing communication barriers and
- ❑ reduced use of detention as a sanction.

**Table 4.5**

Youth held in Detention, including staff-secure				
	FY01	FY02	FY03	FY04
New Admissions	14,921	16,310	14,059	11,148

Average Length of Stay (days)	14.5	15.7	15.3	12.5
Average Daily Population (ADP)	583.0	545.0	497.1	395.7
Number of Youth Served (unduplicated)	8,899	8,916	8,242	7,290

## Commitment

Following an order of commitment the juvenile is transported by a sheriff's officer to one of five designated receiving centers. The decision of where to place juveniles who are committed to NYC by the court lies with NYC. Placement considerations are based on a comprehensive assessment that is completed on each youth within 30 days of commitment.<sup>22</sup> In addition to these evaluations, evidence, reports, examinations, and studies from the sentencing hearing may be used to develop the final assessment report. A client manager or parole officer is assigned to each youth and is responsible for the overall case management and supervision of the case from assessment to discharge from parole. During the assessment process the client manager conducts a home visit and completes a family assessment. Following the assessment staffing, the client manager develops a Discrete Case Plan covering the overall goals and treatment plan for the commitment and parole period.

The Division of Youth Corrections provides commitment treatment in seven state-operated facilities, and also contracts with public and private providers for placement options. Placements for committed youth include the following options:

- ❑ multipurpose state-operated facilities,
- ❑ Lookout Mountain Youth Services Center,
- ❑ Everest and Marler Center programs on the Mount View campus,
- ❑ Ridge View Youth Services Center,
- ❑ residential treatment facilities (RTC's),
- ❑ RCCFs, and
- ❑ Child Placement Agencies.

Some youth may begin the commitment period in secure placement and later transition to community-based placement. All committed youth referred for community placement must be approved by a county juvenile community review board.

The SB 94 FY04 Annual Report states that many districts surveyed for the report expressed concern that many youth are being committed to NYC as a result of the detention capitation. Officials reported that youth who normally may have been sentenced to a short-term detention stay are now being committed by the courts rather than detained. They also report that local human/social services departments are recommending NYC commitment or court ordered out-of-home placement more frequently. Statewide commitment rates increased over 2 percent in FY04, *a rate more*

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<sup>22</sup> The assessment instruments include a validated risk assessment; the Woodcock-Johnson educational assessment; the Massachusetts Youth Screening Instrument, a mental health screening; the SUS-1A (Substance Use Survey), and other instruments. NYC also completes medical, hearing, sight, and educational assessments and psychological screening.

*than double that of recent years.*

Officials report that, in some cases, youth have been committed to NYC because of a lack of alternative placements. Commitments to NYC that are based on a lack of alternative placements may result in lower risk offenders being placed with higher risk offenders, a situation that has been demonstrated empirically to increase the likelihood that the lower risk offender will recidivate.

### **Recommendation**

- ❑ **Undertake a study that profiles the offender characteristics of those placed in detention and commitment, before and after the imposition of the restriction to 479 detention beds.**
  - **Analyze data on offenders' current crime, past history of problem behavior, past police contacts, social service programming**
  - **Analyze assessment data to determine the need level of youth sentenced to NYC before and after the imposition of the detention capitation**
  - **Profile cases at decision points in the juvenile justice system once a decision has been made not to dismiss a case.**

**Reductions in the NYC budget resulted in a lack of services available for committed youth.** In an analysis of the entire 1,342 committed youth population in January 2004, 58 percent had substance abuse treatment level needs. In FY 2003-04, 697 males were assessed for mental health treatment needs; 39 percent. (219) were assessed high-moderate to severe and 60.5 percent (336) were assessed low moderate/none to slight. Of the 131 females assessed, 40.2 percent (41) were assessed as high-moderate to severe and 59.8 percent (61) were assessed low moderate/none to slight. Lack of funds for mental health and substance abuse treatment have led to many youth not receiving needed services.

**Table 4.6**

<b>Committed Youth</b>				
	FY00-01	FY01-02	FY02-03	FY 03-04
New Admissions	766	843	824	924

### **Parole**

**The Parole Decision.** There are two primary types of commitment: mandatory and non-mandatory. The decision to release a youth from commitment status to parole is made by the juvenile parole board. The release date can be determined by court order through mandatory sentencing. For mandatory cases, the juvenile cannot be considered for parole until the mandatory sentence period is completed. Discretionary release is possible in non-mandatory or "determinate" sentences. During the determinate sentence period a client manager may refer the case to the parole board for consideration. Parole board members interview the youth and review his or her record when deciding whether to grant parole. The juvenile parole board has the authority to grant, defer, suspend, or revoke the parole of a youth.

Currently, risk/need assessments are not used in making release decisions. However, the Division of Youth Corrections is in the process of developing an assessment tool which will be used at the time of commitment as an initial assessment and as a re-assessment of risk/treatment progress to guide in release decisions and corresponding level of parole supervision. Once a parole decision is made by the board, the juvenile must serve a minimum of six months under parole supervision, though the parole period may be extended for certain types of offenders. Juvenile offenders with an aggravated crime status must have their release plans reviewed by the committing court prior to referral to a community review board or the parole board.

Client managers/parole officers from the NYC supervise juveniles on parole. By law, all juveniles released from commitment must receive a mandatory period of supervision to aid in their transition back into the community. In 2001, the mandatory parole period was decreased from twelve to nine months for juveniles committed for less serious offenses. However, the Juvenile Parole Board was allowed to extend the period of parole to 15 months for juveniles committed for a felony crime against a person. Senate Bill 03-284 shortened the mandatory parole length from nine to six months as of May 1, 2003. The term of parole may still be extended to a maximum time of 21 months for juveniles who have committed a crime against a person.

**Parole services.** Parole supervision generally includes a range of non-residential, in-home supervision services. NYC officials anticipate the need for future provision of residential services for parolees who unsuccessfully reintegrate into community and home-based environments. Many young offenders are homeless after detention and commitment placements.

**Table 4.7**

Committed Youth Parole Trends			
FY02		FY04	
ADP	Length of Stay	ADP	Length of Stay
720.7	11.8 Months	535.6	8.0 Months

**Juvenile parole services have sustained significant budget cuts with an overall 74 percent reduction in parole and aftercare services.** Caseload sizes for client managers/juvenile parole officers have expanded as funding decreases. The target caseload average is 25. With reduced funding for parole services, the focus of parole supervision is primarily surveillance, providing electronic monitoring and tracking. Following budget cuts, sex offender treatment, mental health treatment, drug and alcohol services, and education and vocational services have been nearly eliminated for parolees. Research suggests that a balance of surveillance of parolees coupled with appropriate outpatient treatment can reduce parole revocations and recidivism.

**Table 4.8**

DYC – Historical Budget Reductions	FY01/02	FY02/03	FY03/04	FY04/05
SB91-94 Alternatives to Detention	\$12,134,538	\$11,285,121	\$8,844,979	\$7,844,979

Parole Program Services	\$4,050,622	\$2,704,021	\$1,034,254	\$1,034,254
Purchase of Contract Placements	\$50,658,425	\$45,129,278	\$42,467,548	\$41,976,577
Community Accountability Program	\$2,129,020	0	0	0
Denver Case Management	\$240,332	0	0	0
Managed Care Pilot	\$1,482,986	\$1,383,739	\$1,260,538	0
Enhanced Mental Health Pilot for Detention	\$260,457	\$175,290	0	0
Educational Programs	\$4,931,369	\$4,763,462	\$4,763,462	\$4,763,462
Prevention/Intervention Programs	\$123,921	\$43,067	\$43,067	\$43,067
<b>Totals</b>	<b>\$76,011,670</b>	<b>\$65,483,978</b>	<b>\$58,413,848</b>	<b>\$55,662,339</b>

## Recommendation

- ❑ **Support efforts to analyze the impact on NYC youth of the loss of more than \$20 million in the Division of Youth Services annual budget.**
  - **Work with NYC to identify and prioritize services that are critical to the health of its clients.**
  - **Support NYC in the development of performance measures for programs that deliver needed services to youth sentenced in its care.**
  - **Support the implementation of the NYC's new needs/risk assessment tool.**
  - **Support efforts to rebuild NYC's capacity to provide services to youth in its care.**



## **Colorado Department of Public Safety Division of Criminal Justice,**

### **Office of Adult and Juvenile Justice Assistance**

The Colorado legislature created the Division of Criminal Justice (DCJ) to "...improve all areas of the administration of criminal justice in Colorado, both immediately and in the long term, regardless of whether the direct responsibility for action lies at the state level or with the many units of local government" (24-33.5-501 C.R.S., 1973 as amended).

Acting as the state planning agency for the receipt and administration of federal and state funds related to criminal justice, DCJ provides a wide range of services, including technical assistance, research, financial resources and grant management for the improvement of criminal justice in Colorado. Technical services encompass public policy development, development of standards for certain kinds of offender treatment and training for criminal justice practitioners and citizens. DCJ services and assistance address the needs of victims of crime, community crime prevention programs, community corrections, juvenile and adult offenders, and law enforcement efforts, among many other activities.

One of the functions of the Office of Adult and Juvenile Justice Assistance (OAJJA), formerly two separate units (Office of Juvenile Justice and Office of Drug Control and System Improvement) is to improve all areas of the administration of juvenile justice in Colorado. OAJJA relies on collaborative activities with other state agencies, units of local government, and community-based organizations to identify and implement innovative improvements and solutions to delinquency and youth problems.

Below is a brief description of the programs that OAJJA administers related to delinquency prevention/intervention, the funding levels for FY02-05 and the programmatic impact of the decreases in funding. The majority of the delinquency prevention/intervention funding comes through Office of Juvenile Justice and Delinquency Prevention at the federal level.

#### **❑ Juvenile Justice and Delinquency Prevention Formula Grant Program (Federal Funds)**

This program provides dollars to communities to assist in local efforts designed to enhance or respond to a variety of juvenile justice and delinquency issues. The fund is managed by the Governor appointed Juvenile Justice and Delinquency Prevention Council, which establishes funding priorities each fall for funding announcements throughout the following year. Funds are targeted at juveniles who are at risk or are involved in the justice system and are used to develop and support programs that work with these youth. Dollars have been used to reduce the number of minority youth represented in secure facilities, develop effective programs for female juvenile offenders, address mental health treatment needs, conduct research and much more. The monies are used for program development, policy design, research and other activities.

**Table 4.9**

<b>Formula Grant Program</b>	<b>FY02</b>	<b>FY03</b>	<b>FY04</b>	<b>FY05</b>
Appropriated	\$1,003,000	\$993,000	\$944,000	\$921,000

□ **Title V (Federal Funds)**

The goal of this project is to provide communities with the information and technical assistance required to identify the factors in their communities which most often lead to unhealthy lifestyles for youths. With the information in hand, officials and citizens can then develop policies and programs which will ameliorate those risk factors and increase the chance that the youth will succeed in life. The grant funds available to the state through Title V of the federal Juvenile Justice and Delinquency Prevention Act are then available to fund the program gaps that are identified through this strategic prevention planning process. The strategy is based on the premise that prevention of delinquent behavior in children is dependent on identifying factors which place them at a higher risk of problem behaviors, then developing strategies to address these factors, including enhancement of protective factors.

**Table 4.10**

<b>Title V Grant Program</b>	<b>FY02</b>	<b>FY03</b>	<b>FY04</b>	<b>FY05</b>
Appropriated	\$405,000	0 *	\$211,000	\$213,000

\* Federal level appropriated was too low to distribute to State level

Colorado has been administering Title V funding since 1992. Operationally, Colorado had been granting funds to communities from the previous fiscal year allowing Colorado to have a buffer in the funding process. In FY03 when the Title V Program received no funding in the congressional budget, Colorado was able to avoid a lapse in funds granted to communities by funding from the current fiscal year. Although there was not a lapse in funds, the amount available to communities was halved. The state was previously able to fund two to three prevention programs from a community's comprehensive three-year plan and in the last two years has only been able to fund one program in each community.

□ **Challenge (Federal Funds)**

The purpose of the Challenge Grants is to provide incentives for states to develop, adopt, and improve policies and programs in one or more of ten specified Challenge Activities. These funds are used to address pressing issues in juvenile justice and aid in long-term system improvement. The projects included establishing a coordinated effort to address the issue of gender specific services for the increasing number of girls entering the juvenile justice system, for special projects related to the lack of "Access to Counsel" by many juveniles and also to coordinate the juvenile committee of the State's Legislative Task Force on Mentally Ill in the Criminal Justice System. Challenge funds were eliminated from the federal appropriation in FY04.

**Table 4.11**

<b>Challenge Grant Program</b>	<b>FY02</b>	<b>FY03</b>	<b>FY04</b>
Appropriated	\$115,000	\$181,000	0

FY 2003 was the last year of this funding program. These funds have allowed Colorado to be a leader in many areas where State's are struggling with specialized issues. It was these funds that allowed Colorado to explore innovative approaches to juvenile justice's most challenging problems. With this loss added to the other reductions from OJJDP we will not be able to fund projects such as those mentioned above past September 30, 2005.

❑ **Juvenile Accountability Block Grant (JABG) (Federal Funds)**

This program helps states and local communities develop programs that promote greater accountability among offenders and in the juvenile justice system. For the juvenile offender, accountability means an assurance of facing individualized consequences through which he or she will be made aware of and held responsible for offenses committed. For the juvenile justice system, accountability means the system must increase its capacity to develop youth competence, to efficiently track juveniles through the system, and to provide enhanced options such as restitution, community service, and victim-offender mediation.

This program funds projects under various purpose areas and has been used to support a variety of projects including Juvenile Assessment Centers, community service/restitution programs, restorative justice based programs and interagency information-sharing programs. Funds are targeted at juveniles who are currently involved, or at imminent risk of becoming involved, in the justice system.

**Table 4.12**

<b>JABG Grant Program</b>	<b>FY02</b>	<b>FY03</b>	<b>FY04</b>	<b>FY05</b>
Appropriated	\$3,760,100	\$2,370,200	\$783,700	\$711,700

In FY03 JABG funded 34 grants statewide that provided a variety of intervention services. For the FY04 appropriation, only ten of those 34 grants will be funded. Many of the programs funded from JABG have either been eliminated or scaled back. These programs include diversion type programs, restorative justice programs, restitution/work crew programs, drug and alcohol treatment programs and alternatives to detention.

❑ **Juvenile Diversion (State Funds)**

Juvenile diversion funds supported community-based programs that intervened at arrest or various other decision making points in the criminal justice system with programs and services that provided alternatives to further or deeper processing of the youth in the juvenile justice system. Programs had to consider public safety needs, effective services for youth that reduce criminal/delinquent behavior, compensate victims for loss or injury

and be more cost effective than further penetration into the system. Services included diagnostic needs assessment, general counseling for youth, crisis counseling for youth and families, mentoring, specialized tutoring, job training and placement, restitution collection, community service, cognitive behavioral treatment, life skills, victim empathy, substance abuse education and treatment, victim/offender mediation sessions.

In FY02-03 the anticipated \$2.4 million for Diversion was vetoed from the state appropriations bill and reverted to the state General Fund to help address the state budget shortfall. In FY03-04 \$500,000 in Diversion funding was reinstated, on a one-time basis, using Tobacco Settlement Funds instead of state General Fund, there has been no further support of the Diversion program since.

**Table 4.13**

<b>Juvenile Diversion Grant Program</b>	<b>FY02</b>	<b>FY03</b>	<b>FY04</b>	<b>FY05</b>
Appropriated	\$2,483,702	0	\$500,000	0

In FY01/02, the last year of state funding, 5,645 juveniles were accepted in diversion programs, of these youth 3,403 were pre-adjudicated; 2,242 post-adjudicated. Most were referred on property offenses, 71 percent were male, and the majority were 15-17 years old. 80,215 hours of community service were completed, and \$699,795 in restitution were paid.

With the reinstatement of \$500,000 in FY03-04 using tobacco settlement funds, 18 district attorney or community-based diversion programs were funded. In that year, 3,772 youth were accepted in the diversion programs, with a majority referred on property and theft charges. 35, 441 hours of community service were completed, and \$201,705 in restitution was collected.

As a result of the loss of state funding, diversion programs have reduced staff, resulting in fewer juveniles referred, and a few programs have closed. Currently, 14 out of 22 judicial districts operate some type of diversion-based program.

❑ **WRAP (State Funds)**

The Wrap Around Program (WRAP) was based on the concept of wrap around programming which targeted youth at risk of or in out-of-home placement through multi-agency collaboration to develop a single service plan and provision of a full range of programming and services. To qualify for funding, a team of local agencies interested in child welfare made a formal commitment to participate in coordinated case management and funding decisions. The team included representatives from social services, the court system, probation, juvenile diversion, mental health, public defenders, community leaders, prosecuting attorneys, law enforcement, education, substance abuse, health, and others interested in child welfare issues. The intent was to provide access for at-risk youth and their families to services that could not otherwise be accessed, not to develop or create new programs. In FY02-03 the anticipated \$500,000 was vetoed from the state appropriations bill but then reinstated at \$356,474. In FY03-04 WRAP funding was eliminated.

**Table 4.14**

<b>WRAP Grant Program</b>	<b>FY00-01</b>	<b>FY01-02</b>	<b>FY02-03</b>	<b>FY03-04</b>
Appropriated	\$500,000	\$500,000	\$356,474	0

The State of Colorado derived an enormous benefit from the WRAP program. By providing WRAP services to Colorado youth and their families, a cost savings benefit of **\$3,284,951** was reported for Fiscal Year 2001-02. The cost savings was determined by comparing the cost of WRAP-funded services and the cost of out-of-home placement avoided. These placements include, but are not limited to residential child care facilities (RCCFs), residential treatment centers (RTCs), foster care, Division of Youth Corrections, and mental health or substance abuse facilities.

**Table 4.15**

### Total State and Federal Funding Cuts by Agency

<b>Agency*</b>	<b>FY02</b>	<b>FY03</b>	<b>FY04</b>	<b>FY05</b>	<b>Percent Change</b>
Department of Education	\$11,337,410	\$12,521,656	\$12,649,734	\$12,497,671	<b>+ 10 percent</b>
Child Welfare Division**	\$42,565,888	\$42,124,032	\$44,742,812	\$46,242,811	<b>+9 percent</b>
Prevention Services Division	\$9,291,029	\$1,200,000	\$4,000,000	\$3,491,558	<b>-62 percent</b>
Division of Criminal Justice	\$8,266,802	\$4,044,200	\$2,795,174	\$1,845,700	<b>-78 percent</b>
Division of Youth Corrections	\$76,011,670	\$65,483,978	\$58,413,848	\$55,662,339	<b>-28.5 percent</b>
<b>Total</b>	<b>\$147,472,799</b>	<b>\$125,373,866</b>	<b>\$122,601,568</b>	<b>\$119,740,079</b>	<b>-19 percent</b>

\*The Alcohol and Drug Abuse Division, Division of Mental Health and the Probation Department are not included in these totals as the agencies budgets are not broken down by adult and juvenile funding. \*\*Represents entire Child Welfare core services budget.

## Additional Innovative Efforts to Improve Juvenile Justice

The following describes innovative efforts taking place at the state level to improve the juvenile justice system.

### Minority Over Representation

The Juvenile Justice and Delinquency Prevention Act, as amended, requires that states participating in the Formula Grants program "address juvenile delinquency prevention efforts and system improvement efforts designed to reduce, the disproportionate number of juvenile members of minority groups, who come into contact with the juvenile justice

system,"[PL 107-273, Title II, Subtitle B Sec.12209 (p) (23)]. The purpose of addressing disproportionate minority contact is to ensure equal and fair treatment for every youth in the juvenile justice system, regardless of race and ethnicity.

Based on the activities that showed impact in the original Colorado pilot projects and prevailing national research, Colorado has focused its funding efforts in two areas. Funding the development and implementation of Minority Family Advocacy Programs and funding for development and support of coalitions to address the issue as a community.

### **Minority Family Advocacy Program**

**Goal:** Reduce the disproportionate contact of minority youth at all decision points within the juvenile justice system, from arrest through commitment to the Division of Youth Corrections.

### **Community Coalition to Address Minority Over Representation in the Juvenile Justice System**

**Goal:** Address local issues related to the disproportionate contact of minority youth with the juvenile justice system by bringing together all decision-makers and other interested parties to form and implement a comprehensive plan based on local data, policy and procedures.

#### **❑ Gender-Specific Services**

Colorado has devoted the last seven years to building awareness of the specific need of girls in the juvenile justice system. Trainings and technical assistance continue to be provided across the state to develop and enhance gender-specific services for these girls. The training curricula and policies used by the Division of Youth Corrections has been revised to reflect the gender-specific needs of girls. The Girls, ETC (Equitable Treatment Coalition), a committee of the JJDP Council with ad hoc membership, has developed a plan to increase awareness and build capacity in this area. An announcement of available funds has been distributed for the last four years to fund programs that can implement the guidelines developed for effective programs for girls.

#### **❑ Mental Health**

The focus on the mentally ill in the criminal justice and juvenile justice systems continues. Legislation is being considered during the current session to address the identified needs and gaps in service. Because of budget shortfalls, the hope of increased appropriations is slim. The statute requiring the use of a common mental health screening instrument for juveniles, if a screening program was implemented, passed in 2002. The screening instrument to be used for youth is the MAYSI-2. It has been tested through a pilot project, funded by the JJDP Council, and will be implemented through statewide training supported by Challenge grant funds.

The JJDP Council is addressing the need to coordinate the various efforts that have been initiated to address the needs of mentally ill youth. Its Mental Health Committee has merged with the Juvenile Justice subcommittee of the legislative Task Force. This committee met twice a month through 2003 to educate itself on the many facets of this problem and to work toward a comprehensive framework for system improvement. There are now two working groups. One is focusing on the possible statutory and policy changes needed to address determination of a juvenile's competency to proceed in court, and the other is looking at what is needed to establish a comprehensive system of care

for children and youth with mental health problems.

#### ❑ **Restorative Justice**

The JJDP Council sees restorative justice as a way of practicing justice in a manner that repairs harm, re-establishes balance, promotes healing, prevents future crime and strengthens community. The Council has supported funding of these programs for the past four years. Restorative justice models focus on the concept that crime is an offense against persons and relationships, not an impersonal entity such as the “state.”

The goal of these programs is to increase the use of juvenile accountability programs based on the restorative justice philosophy as alternatives to strictly punitive sanctions. Restorative justice models help juvenile offenders understand the impact of their behavior, accept responsibility, express remorse, take action to repair the harm and develop their own capacities to reduce the chance of future delinquent behavior. In this way offenders can become fully integrated, respected members of the community. The victim's perspective is central to deciding how to repair the harm caused by the crime. Victims can also benefit since they receive community support, are given the opportunity to define the harm and participate in decision making about steps for repair, which can result in increased victim recovery from the trauma of crime. Programs have been funded for alternatives to further penetration in the juvenile justice system such as: alternatives to court filings or truancy petitions, sentences to detention, technical probation violations, etc.

#### ❑ **Multi-Systemic Therapy (MST)**

Multi-Systemic Therapy (MST) is being implemented by both state and not-for-profit agencies. This initiative is an intensive family and community based treatment program that addresses the multiple issues associated with serious anti-social behavior in juvenile offenders and other youth whose behavior puts them at risk of out-of-home placement. JAIBG State level program funds established the Colorado MST Support Office that provides the infrastructure for training, supervision and evaluation.

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## Section 5

### Summary

This report provides an modest overview of important efforts to address delinquency prevention and intervention in Colorado. It is impossible accurately and completely portray all of the critical work that is underway to improve the health of juveniles in Colorado. This report represents a humble beginning to document many valued programs and initiatives across a broad range of agencies.

This report also documents remarkable setbacks. It is difficult to quantify the loss of tens of millions of dollars to Colorado's youth and families who are most at risk of experiencing negative life outcomes. Even a cursory review of the material presented here reflects that research has pointed the way to "what works" and "what doesn't." Much of "what works" has been implemented in Colorado.

It is indeed possible to improve the quality of life in our communities, and prevent the damage that results from crime. It takes political will and leadership to find the resources and properly direct their use to implement and monitor empirically-based, effective programs for those most vulnerable to negative life outcomes.

Severe budget cuts have occurred in programs across the state's juvenile justice system. As can be seen from Table 4.15, the Division of Prevention Services' funding has been reduced by 62 percent; the DYJ by 28.5 percent. In the Division of Criminal Justice, only 22% of the Juvenile Justice and Delinquency Prevention budget remains.

This report, prepared by DCJ on behalf of the Juvenile Justice Delinquency Prevention Council, is ultimately inadequate in its ability to reflect the true impact of these reductions on youth and justice. In light of the budget reductions that have affected the Juvenile Justice Council's current ability to contribute to program development and implementation, this final recommendation suggests that the Council assume a specific role in Colorado. This role involves proactively bringing together stakeholders to identify critical gaps in services. It involves studying the impact of services, and the loss of services, and using data and research to understand what now stand as bare numbers (such as, why are more and more girls exhibiting delinquent behavior in the midst of other indicators of positive change – reductions in child abuse and rates of teenage pregnancy, for example?). This leadership role of the Council can expand as resources are recovered and programming for youth and families is restored.

### Final Recommendation

- Begin a sustained effort to regularly bring stakeholders together to discuss the state of juvenile justice in Colorado and plan for the future.
  - Support research and incorporate objective information in the process of understanding complicated trends in the juvenile justice system.
  - Work with data and stakeholders to identify critical gaps in services.
  - Systematically plan to identify methods to address service gaps.
  - Work with stakeholders to plan for the future.





## Appendix A

### JJDP Council Members

October 2005

Lindi Sinton, Council Chair  
Residential, Youth &  
Emergency Services Director  
Volunteers of America, Colo.  
Branch

Katy Avila  
Youth Member

Bill Bane  
Mental Health Services, CDHS

Steve Bates  
Director, Children, Youth and  
Families, CDHS

Steve Brittain  
Chief Probation Officer  
6th and 22nd Judicial Districts

Susan Colling  
State Court Administrator's  
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Jim Covino, Esq.

Wendy DeBell  
President, Board of Education  
Cherry Creek Schools

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Crystal Talamante  
Youth Member

The Honorable Richard Toth

Ted Trujillo  
Child Welfare Services  
CDHS

Dianne Pacheco VanVoorhees

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Pam Wakefield 8/96  
Chief Deputy District Attorney  
18th Judicial District

Katie Wells  
Adolescent Services  
Alcohol & Drug Abuse  
Division

Debbie Wilde  
Executive Director,  
YouthZone



## **Appendix B**

### **Juvenile Justice Terms and Definitions**

**Adjudication/Adjudicatory:** The judicial hearing wherein guilt or innocence is determined either by the child's admission or by trial to a court or jury.

**Adult:** A person eighteen (18) years of age or over, except when the Court's jurisdiction continues past the eighteenth birthday, in which case the term child shall still apply.

**Advisement:** A court procedure formally advising the accused of certain statutory and constitutional rights. The advisement is delivered during the first appearance in court.

**Advisement of Rights:** 1.) A court procedure formally advising a person of certain statutory and constitutional rights. Such advisement must be given at the first appearance in court. 2.) A set of warning which must be given to a person upon arrest (see Miranda Warning).

**Allege:** To assert to be true without proving.

**Appearance:** The formal proceeding by which an offender presents him/herself to the jurisdiction of the court.

**Apprehend:** To arrest, take into custody, or seize a person on a criminal charge.

**Arraignment:** A court hearing where the accused is brought before the court to plead to the criminal charge in the indictment or information. The accused is advised of the charges pending against him, as well as his constitutional rights to have a lawyer and a trial.

**Bail:** (see Bond) Security, in the form of money or property, deposited with the court to insure the appearance of the accused at a specific future time and place.

**Bail Bond:** An obligation signed by the accused, with sureties to secure his/her presence in court.

**Bench Warrant:** Process issued by the court itself, or from the bench, for the apprehension or arrest of a person.

**Bond:** A type of security required by the court before an offender is released from custody. An accused may be released on his own promise (personal recognizance), by having a licensed bondsman post an agreement to pay a certain amount (bond) by personally depositing money in cash (bail), or by encumbering property (property bond). The court may allow the amount of bail posted in cash to be a percentage of the total amount of bail set; however, in the event of default, the entire amount of bail set is forfeited and becomes due to the state.

**Bond, personal recognizance (PR Bond):** An obligation of record entered into before a court requiring the performance of an act such as appearing in court as instructed or penalty of a money forfeiture. (Webster's 7<sup>th</sup> new collegiate dictionary.)

CCIC: Colorado Crime Information Center

Change of venue: The removal of a suite begun in one country or district, to another, for trial, or from one court to another in the same county or district.

Child: Any person under eighteen (18) years of age. (Statutory Definition)

Colorado Children's Code: Title 19, Colorado revised statute. This code sets forth the definitions, jurisdiction, procedures, and powers in juvenile cases.

Complaint and summons: The formal charge, which initiates a criminal proceedings in a court. It must contain the name of the defendant, the offense, and statute number, and direct the defendant to appear before a specified court at a given date, time and location.

Contempt of Court: The punishable act of showing disrespect for the authority of dignity of a court.

Deferred Disposition/Prosecution, Deferred Sentence: Some defendants are granted a deferred prosecution, which means that the judge and district attorney permit the accused person to delay going to trial for a period of time, usually one year. During this period, the accused is supervised by a probation officer, if the person complies with all the requirements of the deferred prosecution, the charges may be dismissed. A defendant who pleads guilty to a crime may be given a deferred sentence, which means that the judge does not impose a sentence immediately but continues the case up to two years, placing the defendant under the Probation Department's supervision. If the defendant complies with all of the requirements, the charges against him will be dismissed.

Delinquency Petition: A petition charging a child with a violation of the penal statute or municipal ordinances.

Delinquent: A child, ten (10) years of age or older, who violates any Federal or State Law, except State Traffic and Game and Fish Law, or any lawful order of the court made under the Colorado Children's Code.

Detention: Placing the child in a facility designed for minors. This is a secure facility designed to be a nonpunitive facility and located as close to the minor's home as possible.

Detention Hearing: A judicial hearing held within forty-eight (48) hours (excluding weekends and court holidays) after a child is taken into Temporary Custody to determine whether continued detention is necessary.

Dispositional Hearing: A judicial hearing at which time information is presented and reviewed along with recommendations for disposition. The conclusion is the court's official disposition order, (i.e. probation, commitment, etc.)

District Attorney: A lawyer elected or appointed in a specified district to serve as the chief or administrative prosecutor for  
The State in criminal cases.

Diversion: A decision made by a person with authority or a delegate of that person that results in specific official action of the legal system no being taken in regard to a specific juvenile or child and

in lieu thereof providing individually designed services by a specific program. The goal of diversion is to prevent further involvement of the juvenile or child in the formal legal system. Diversion of a juvenile or child may take place either at the prefiling level as an alternative to the probation services following an adjudicatory hearing pursuant to section 19-3-505 or a disposition as a part of sentencing pursuant to section 19-2-907. Services, as used in this subsection (44), includes but is not limited to diagnostic needs assessment, restitution programs, community services, job training and placement, specialized tutoring, constructive recreational activities, general counseling and counseling during a crisis situation, and follow-up activities.@ 19-1-103 (44) C.R.S.

District Attorney Juvenile Diversion programs manage juveniles who have be granted a prefile diversion, informal adjustment or deferred adjudication. By successfully completing diversion, the juvenile is able to avoid an adjudication being entered on his/her record for the presenting offense.

Expungment: The legal process whereby a child's juvenile court record can be sealed upon request three (3) years after unconditional release from probation, Ten (10) years upon release from Department of Human Services or parole.

Guardian Ad Litem (ad li'stem): A person appointed by a court to look after the interests of a child in litigation.

Guardianship: The duty and authority vested in a person or agency by court action to make major decisions affecting a child, which may include: consent of marriage, military enlistment, medical or surgical treatment, adoption when parental rights have been terminated, or representation of a child in legal actions.

Hebeas Corpus: An order of the court to bring a person before the court to show cause why that person is being deprived of his/her liberty.

Incarceration: Imprisoned in a lockup/holding facility, jail, juvenile detention center, juvenile correctional facility, or prison.

Indictment: An accusation in writing found and presented by a grand jury, charging that a person therein named has done some act, or been guilty of some omission that by law is a crime.

Informal Adjustment: A type of disposition used primarily for first time offenders, which does not involve a court hearing. If the child admits the facts of the allegation (with parental consent), the child may be supervised for a period without being adjudicated.

Jurisdiction: The legal power to hear and decide cases; the territorial limits of such power.

Juvenile Court: The Division of the district court or, in Denver, the separate court, which exercises original jurisdiction over children and subject matter set forth in the Colorado Children's Code.

Miranda Warning: Four(4) statements which must be made to a suspect under interrogation before any evidence or confession elicited from that person can be admitted as evidence in court: 1. The person's right to remain silent, 2. Anything the person says may and will be used against him in a court. 3. The person's right to have the assistance of an attorney, and 4. The person's right to have an attorney appointed if he/she could not afford one.

Mittimus: An order of court directing the sheriff to transport a defendant to a specific place to serve

a sentence of imprisonment.

**Municipal Court:** Courts whose territorial authority is confined to the city or community.

**National Crime Information Center: (NCIC)** A national computer system with information relative to any active warrants on individuals.

**Nolo Contendere:** A pleading usually used by defendants in criminal cases, which literally means, I will not contest it, and is treated as a guilty plea when it comes for sentencing.

**Ordinance:** A law passed by a city or town lawmaking body.

**Personal Recognizance:** Security for the appearance of a criminal defendant, in the form of a personal promise without posting any bail or filing a formal bond.

**Petition:** A formal application in writing made to the Court, requesting judicial action concerning some matter therein set forth.

**Plea:** The defendant's formal response to criminal charges. If a defendant stands mute, the judge will enter a plea of not guilty for the defendant. Examples are: guilty, not guilty, nolo contendere, not guilty by reason of insanity.

**Plea Bargaining:** A compromise reached by the prosecution and defense after negotiation resulting in a plea of guilty or nolo contendere to a charge or one of the charges, or to a lesser charge, dismissal of remaining charges, elimination of the trial, and the possibility of a lesser sentence. Plea-bargaining is conducted between counsel, and not before the judge. The compromise reached is presented to the judge by the prosecution and must be agreed to by the judge before it can become effective. Plea-bargaining results from a number of factors: 1. The prosecution has sole discretion to file charges, 2. Open negotiation may disclose the strength or weakness of either side's case, 3. Heavy trial dockets necessitate reducing the trial load in large volume in prosecution offenses.

**Preliminary Hearing:** A discretionary hearing to determine if there is probable cause to believe that the facts alleged in the petition bring the child/defendant within the court's jurisdiction.

**Pre-Sentence Investigation:** Social diagnostic study, which is a report to the judge to help him determine an appropriate sentence.

**Probable Cause:** A legal term meaning that there is sufficient reason or belief to detain or cause a petition to be filed. This is based on a legal examination of the facts.

**Probation:** A sentence alternative to incarceration, whereby an adjudicated juvenile may be released under certain conditions and under the supervision of a probation officer for a specified time. In some cases, a short detention sentence or A work release program is combined with the probation.

**Probationer:** Convicted law violator allowed to remain in free society while under a probation officer's supervision, in lieu of serving a detention sentence or being committed to the Division of Youth Corrections.

**Prosecution:** The procedure by which a person is charged and tried for a criminal offense. Also, the charging, as opposed to the defending, side of a criminal case.

**Public Defender:** An attorney, or system of attorneys, funded by the state, to represent indigent persons in criminal or juvenile cases.

**Recidivism:** The return to criminal activity after completion of a sentence following an earlier conviction. A statistical measure of failure of offenders previously convicted of a crime.

**Revocation:** A court order rescinding or withdrawing a previous court order. When a person on probation has violated one or more of the terms or conditions of probation, a petition to revoke probation or modify the term and conditions may be filed with the court. If the allegations are proven, the judge may modify the terms of probation or revoke probation and exercise any of the dispositional alternatives, including commitment to the Division of Youth Corrections.

**Risk Assessment Scale:** A tool to assist in predicting continued criminal activity. The primary factors considered are; criminal history, stability, substance abuse and employment.

**Summons:** A notice requiring a person to appear in court on a specific day at a specific time. The summons is returned to the court to reflect that the person was served with it.

**Venue:** The particular county, city or geographical area in which a court with jurisdiction may hear and determine a case.

**Verdict:** The decision the jury or judge makes at the conclusion of trial as to the accused guilt or innocence.

**Warrant:** An order of the court authorizing either the arrest of a specific person or the search of a specific place for the seizure of specific items named in the order.