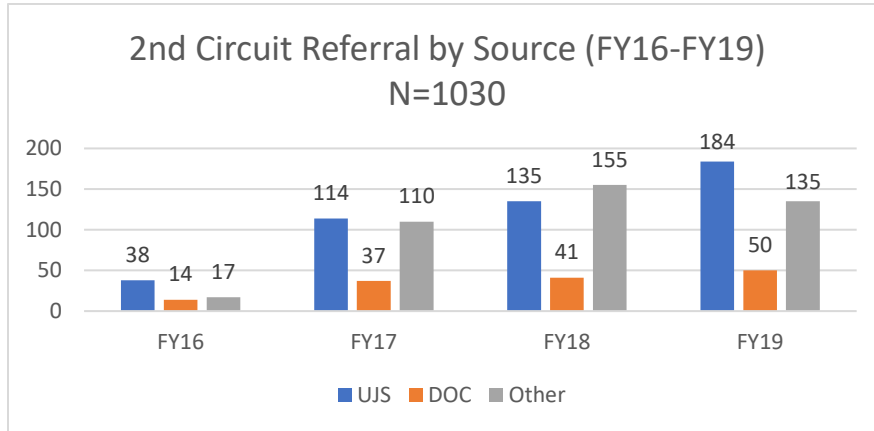


2nd Circuit Evidence-Based Service Report

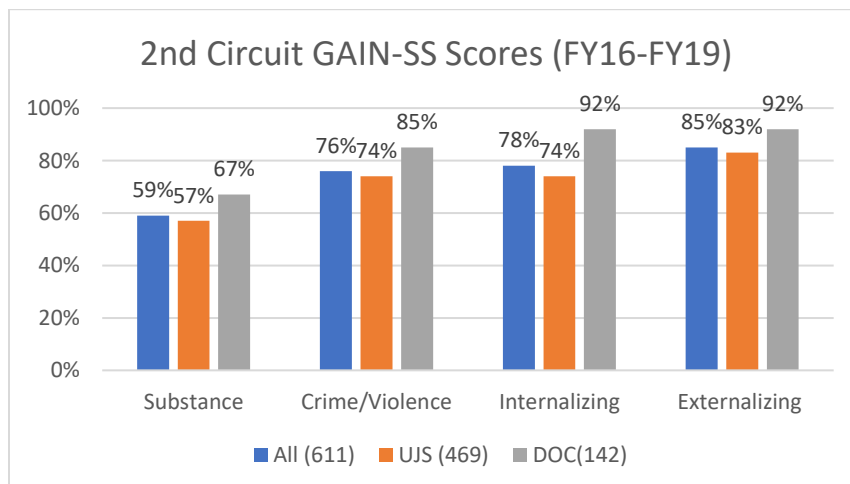
In 2nd Circuit, services for youth with mental health and/or substance use disorders are available through the Community Mental Health Center, Southeastern Behavioral Health (SEBH), as well as accredited addiction treatment agencies. In addition, SEBH and Lutheran Social Services (LSS) provide targeted evidence-based services for justice involved and at-risk youth. These evidence-based services include Functional Family Therapy (FFT), Aggression Replacement Training (ART), Moral Reconciliation Therapy (MRT), Cannabis Youth Treatment (CYT), and Cognitive-Behavioral Interventions for Substance Abuse (CBISA).

Since the launch of the above evidence-based services in FY16, there have been 1030 referrals made in 2nd Circuit (FY16-FY19). Referrals come from the Unified Judicial System (UJS), Department of Corrections (DOC), Child Protection Services (CPS), and other sources such as schools, community providers, diversion programs, etc.



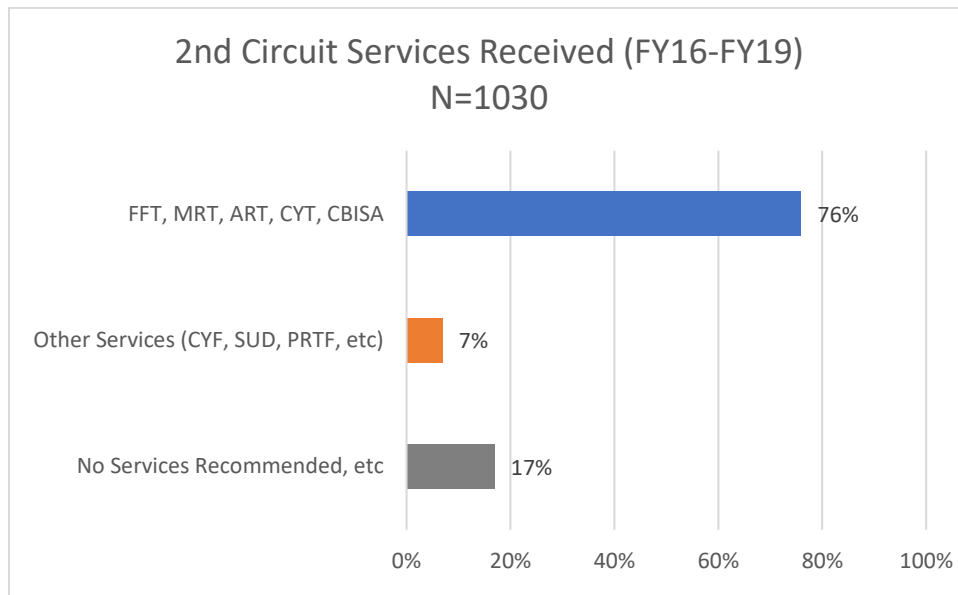
The Global Appraisal of Individual Needs Short Screener (GAIN-SS) measures four main categories of emotional and behavioral health problems, to include internalizing and externalizing disorders, substance use, and crime/violence. According to GAIN-SS scores submitted by UJS and DOC, 59% of youth in 2nd Circuit scored moderate/high in substance use, 76% of youth scored moderate/high in crime and violence, 78% of youth scored moderate/high in internalizing disorders, and 85% of justice-involved youth in 2nd Circuit scored moderate/high in externalizing disorders.

FFT is shown to be effective in addressing externalizing behaviors (acting out, hostility, aggression, etc.) and can also help to address internalizing behaviors (anxiety, depression, etc.). ART is shown to address externalizing behaviors related to aggression and violence. MRT is effective in addressing behaviors related to crime/criminal thinking, and CYT and CBISA address substance use. Community-based Children, Youth and Family (CYF) and Substance Use Disorder (SUD) services are also available to address these needs.

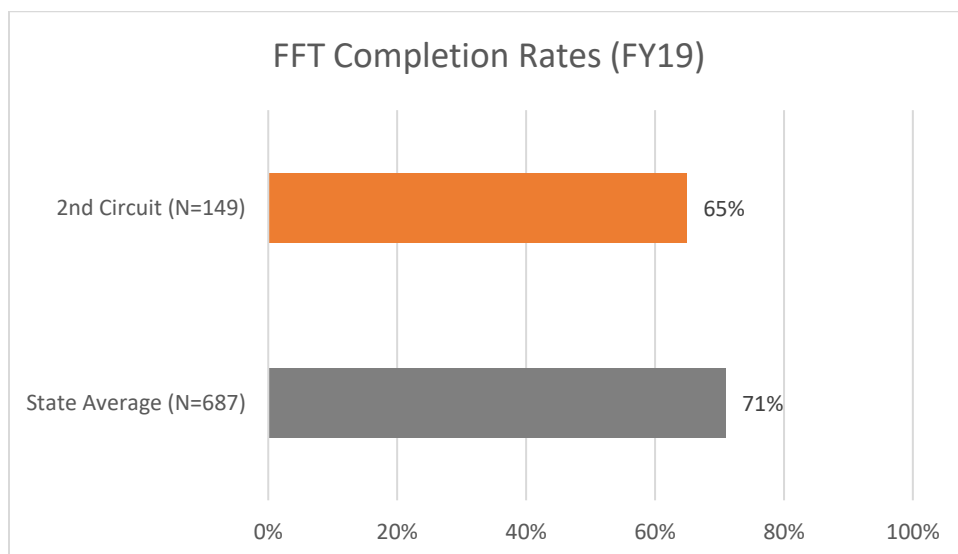


Youth may score moderate/high in multiple areas and may be represented more than once in the data above

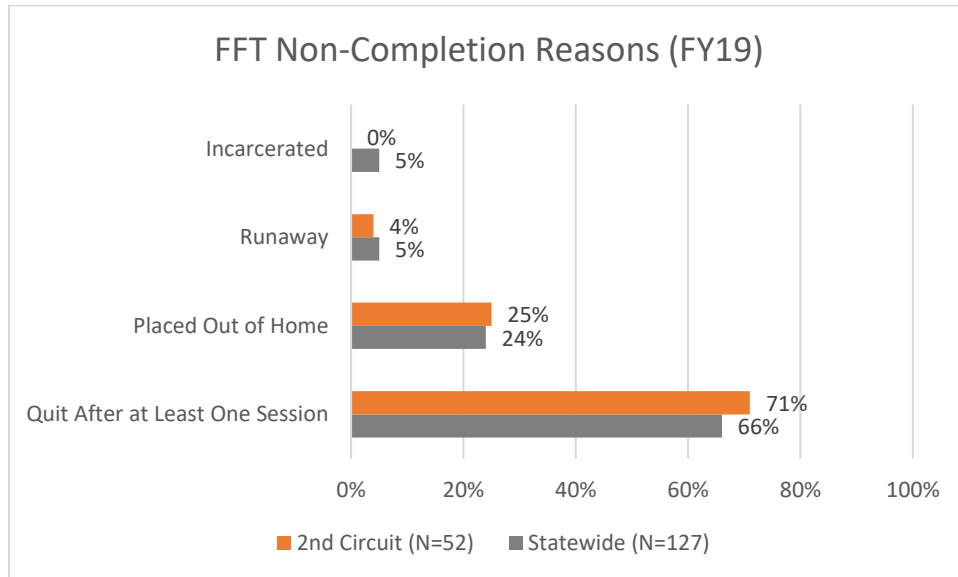
Of those referred in 2nd Circuit, 76% of youth received one of the targeted evidence-based services. Seven percent were assessed and determined to already be receiving an appropriate service or were clinically appropriate for another service, such as CYF or SUD services. For 17% of referrals, no services were recommended, services were declined, or the youth was unavailable for services.



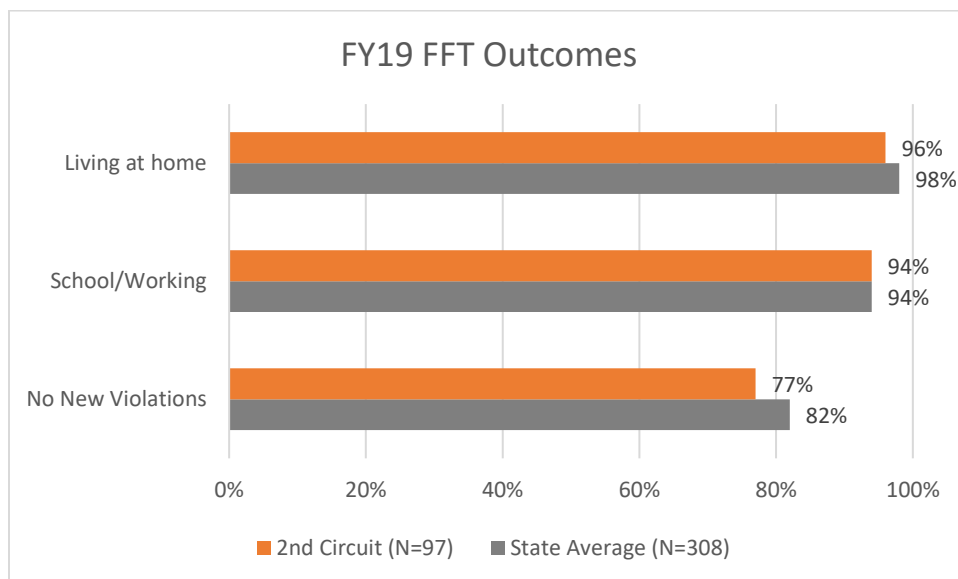
To date, the statewide average successful completion rate for FFT services is 71%, while SEBH and LSS maintain an average successful completion rate of 65%. Completion rates do not include families who did not complete FFT due to circumstances outside the therapist’s control (i.e., family moved, referred to other services, etc.).



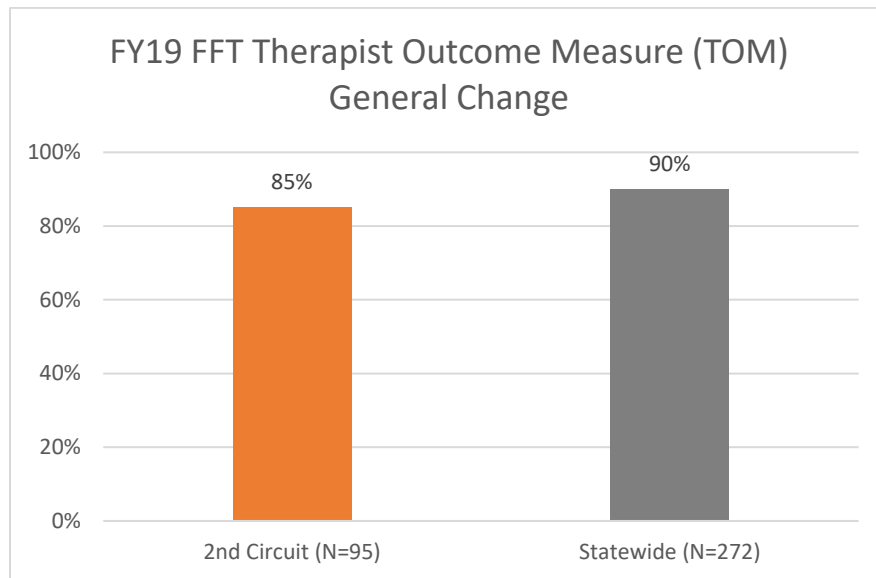
Of those youth and families who initiated FFT services in the 2nd Circuit in FY19, 35% did not complete FFT services. Of that 35%, 0% were incarcerated while participating in FFT services, 4% ran away, 25% were placed out of home, and 71% quit after one session. Reasons for youth/family quitting after one session include lack of cooperation/participation such as declining services, repeatedly missing appointments, not responding to attempts to contact, and youth being employed or in extra-curricular activities.



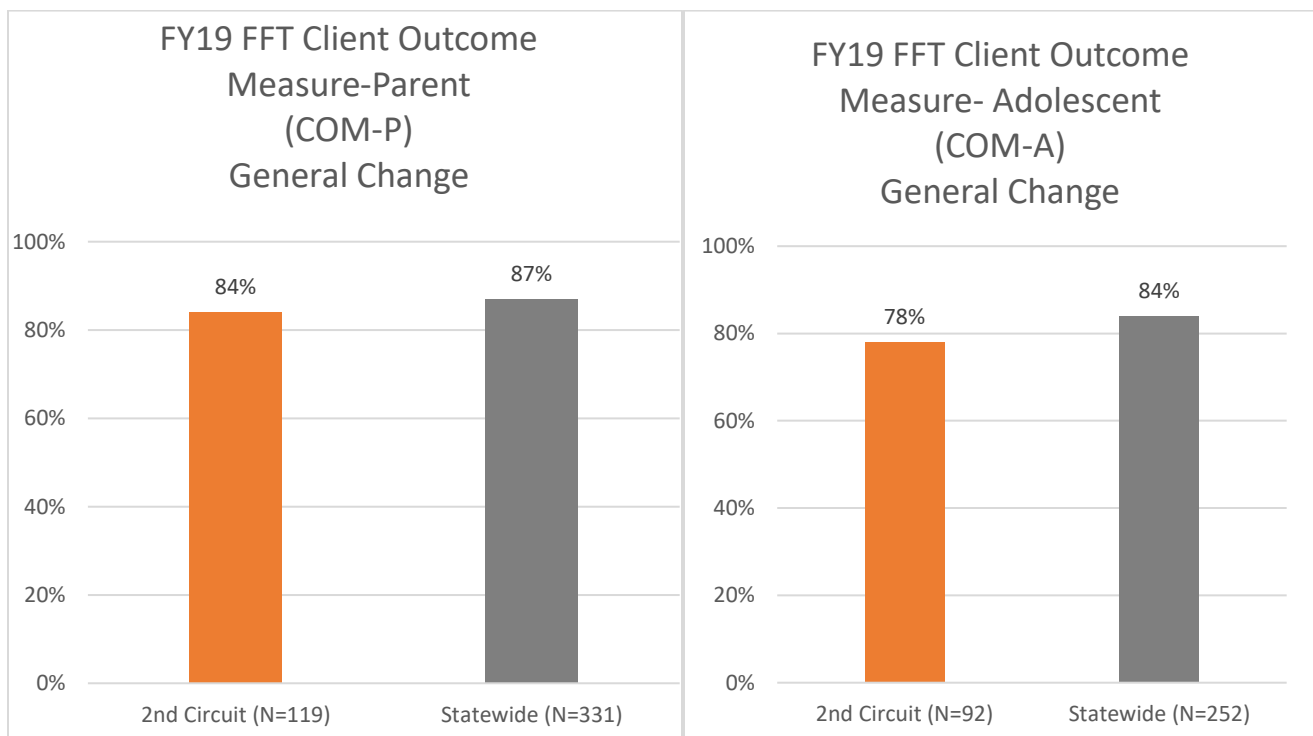
In FY19, 77% of 2nd Circuit youth who completed FFT services had no new violations, 94% of youth remained in school or working, and 96% of youth remained living at home. These averages compare closely to statewide averages, as shared below. It should be noted this data reflects information as reported to the FFT therapist and should not be construed as recidivism data, which is provided by UJS and DOC.



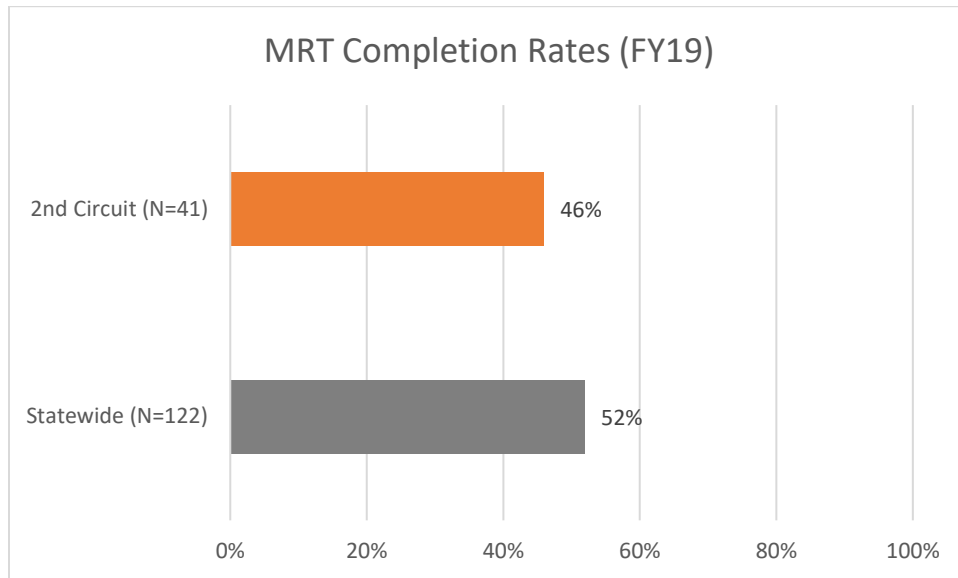
The Therapist Outcome Measure (TOM) is a standardized assessment tool completed by the FFT therapist following successful completion of services. Ideally, all families successfully completing FFT services will demonstrate a positive general change at completion of services. In FY19, SEBH and LSS therapists reported seeing a positive general change in 85% of their completed cases. The statewide average was 90%.



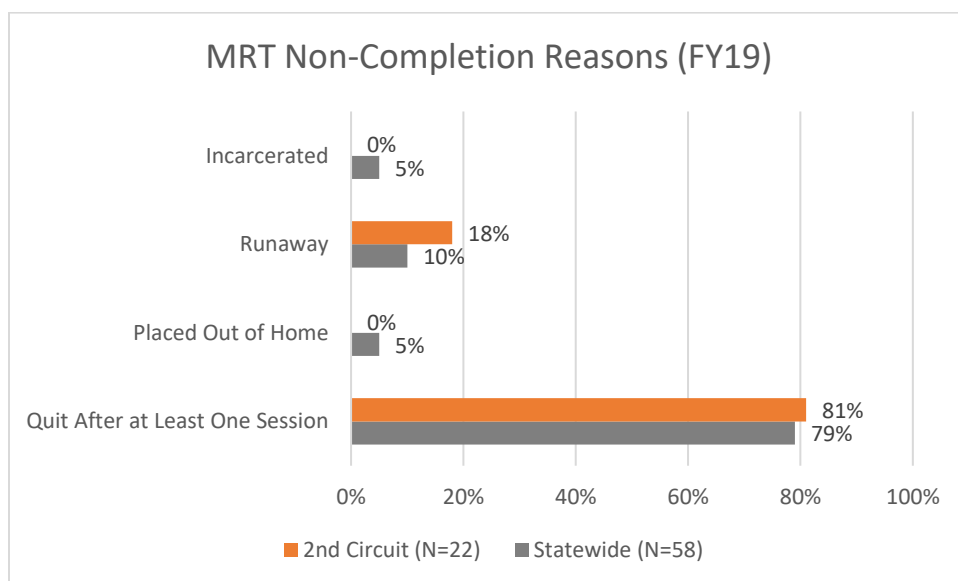
The Client Outcome Measure (COM) is a standardized assessment tool completed by the adolescent as well as the parents/guardians. Like the TOM, the COM measures levels of change within the family at successful completion of services. In FY19, 84% of parents (COM-P) and 78% of adolescents (COM-A) who received FFT in the 2nd Circuit reported a positive general change in their family at the completion of FFT services. The statewide averages for the COM-P and COM-A were 87% and 84% respectively.



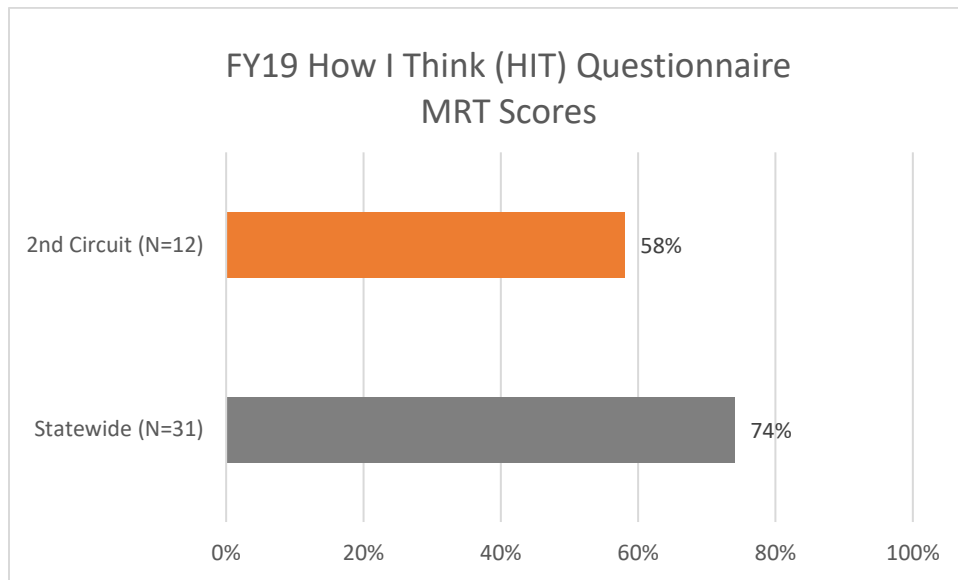
The statewide average successful completion rate for MRT services is 52%, while youth in 2nd Circuit maintained a combined average successful completion rate of 46%. Completion rates do not include families who did not complete MRT due to circumstances outside the therapist’s control (i.e., family moved, referred to other services, etc.).



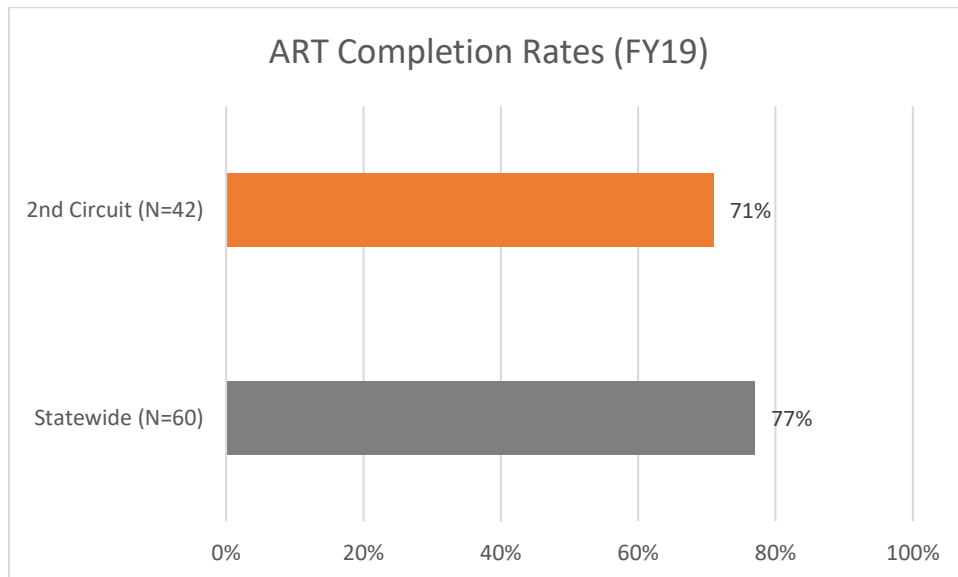
Of those youth who initiated MRT services in the 2nd Circuit, 54% did not complete MRT services. Of that 54%, 0% were incarcerated while participating in MRT services, 18% ran away, 0% were placed out of home, and 81% quit after one session.



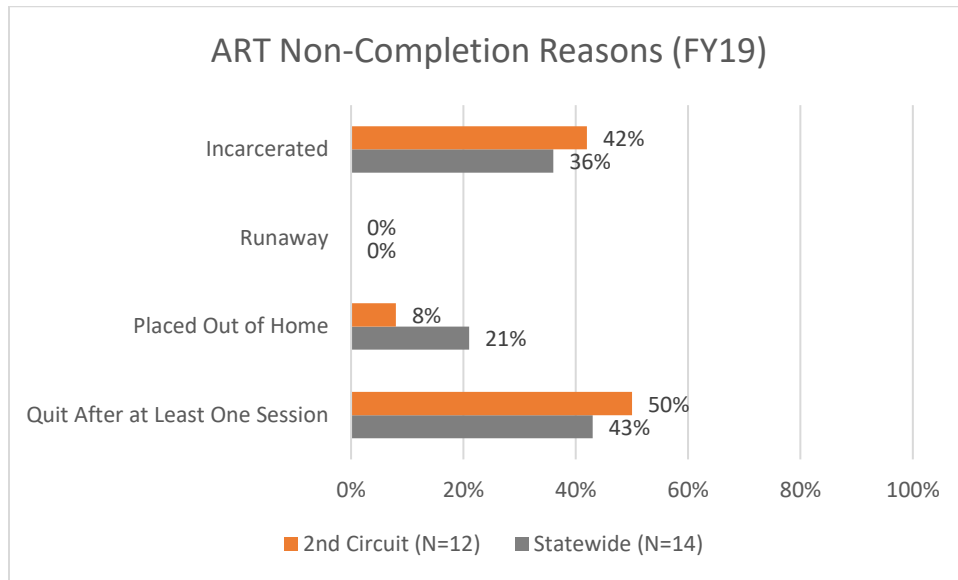
The How I Think (HIT) questionnaire is designed to measure changes in levels of criminal thinking. The HIT is administered at intake and successful discharge from MRT services. In FY19, 58% of youth who completed MRT services in 2nd Circuit saw an overall improvement in levels of criminal thinking. The statewide average percent of youth who showed improvement is 74%.



The statewide average successful completion rate for ART services is 77%, while youth in 2nd Circuit maintained a combined average successful completion rate of 71%. Completion rates do not include families who did not complete ART due to circumstances outside the therapist’s control (i.e., family moved, referred to other services, etc.).



Of those youth who initiated ART services in the 2nd Circuit, 29% did not complete ART services. Of that 29%, 42% were incarcerated while participating in ART services, 0% ran away, 8% were placed out of home, and 50% quit after one session.



The Aggression Questionnaire (AQ) is designed to measure changes in levels of aggression. The AQ is administered at intake and successful discharge from ART services. In FY19, 57% of youth who completed ART services in 2nd Circuit saw an overall improvement in levels of aggression. The statewide average percent of youth who showed improvement is 67%.

