Juvenile Justice Public Safety Improvement Act
South Dakota Juvenile Justice Oversight Council

Annual Report
2025

Contents

INTRODUCTION

The data included in this report reflects performance and outcome measures as of the end of the current fiscal year, as well as historical data for prior years, where available. The purpose of reporting these measures is two-fold:

1. Monitor the impact of the policy changes and assess whether the goals of the juvenile justice system are being met.
2. Continue making sound data-driven policy decisions.

Additionally, the juvenile justice system was designed to increase public safety by improving outcomes for youth in the juvenile justice system; effectively hold juveniles more accountable; and reduce costs by investing in proven community-based practices while saving residential facilities for juveniles who are a public safety risk.

The following report is designed to assess alignment of these goals with what is happening in the South Dakota juvenile justice system.

PETITIONS FILED BY TYPE

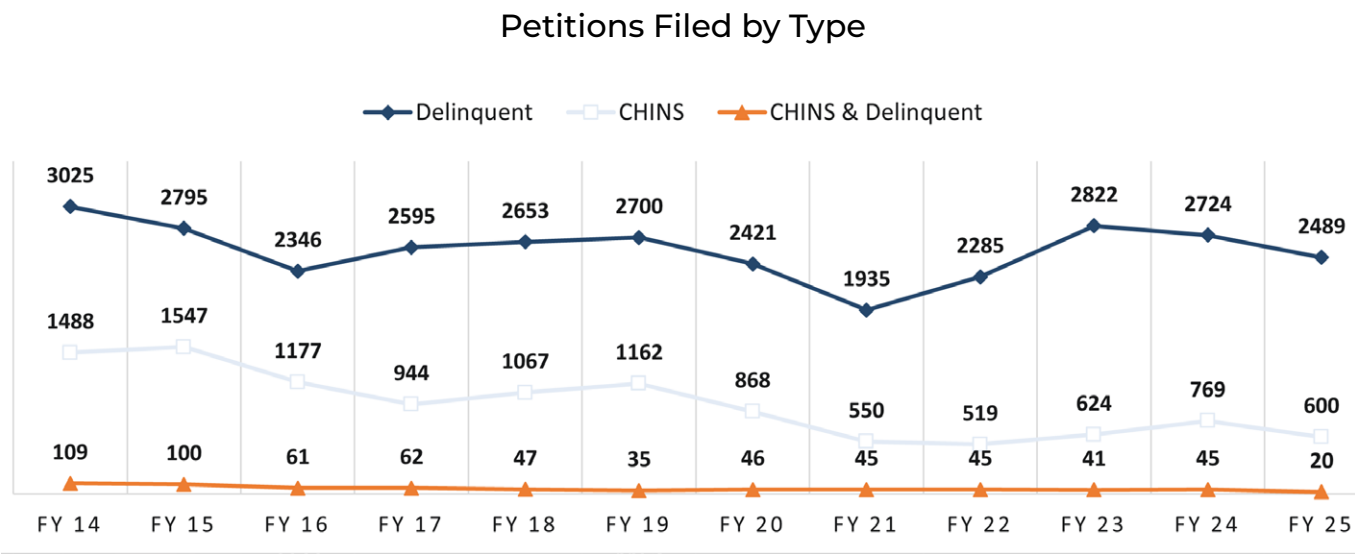
Increasing public safety is of the utmost importance to the South Dakota Juvenile Justice Oversight Council. Monitoring juvenile arrest data and juvenile petition filings helps to determine if public safety goals are being achieved.

Prior to the Juvenile Justice Public Safety Improvement Act (JJPSIA), a new delinquent offense committed by a youth on probation or in Department of Corrections (DOC) custody may have been addressed through the revocation process and would not have resulted in the filing of a new petition.

Following JJPSIA, with more targeted use of DOC commitments and shorter probation terms, the decision to file petitions may have changed to allow increased options to address a new offense.

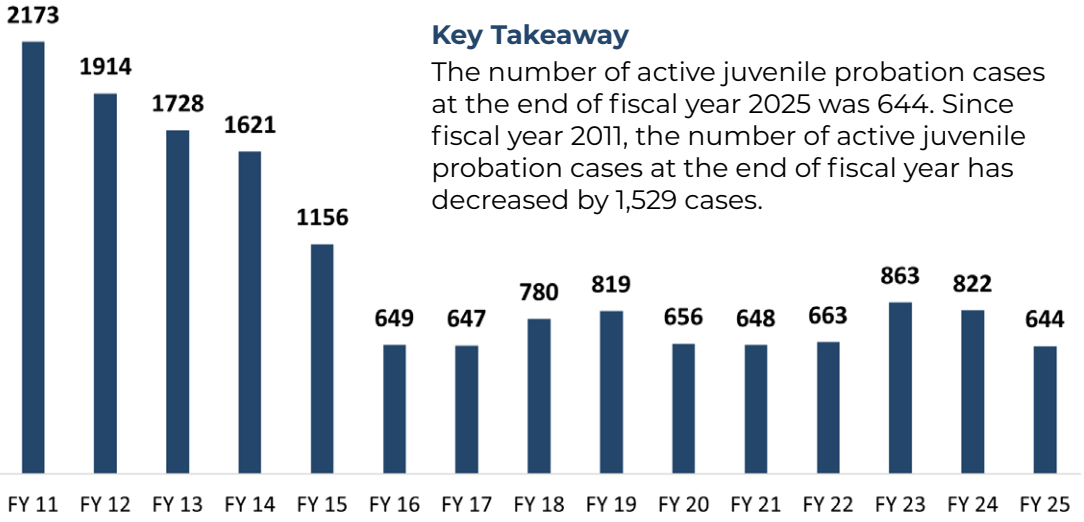
In fiscal year 2025, petitions filed by type were:

- **Delinquent:** 2,489
- **CHINS:** 600
- **CHINS and Delinquent:** 20



PROBATION

Active Juvenile Probation Cases at the End of Fiscal Year



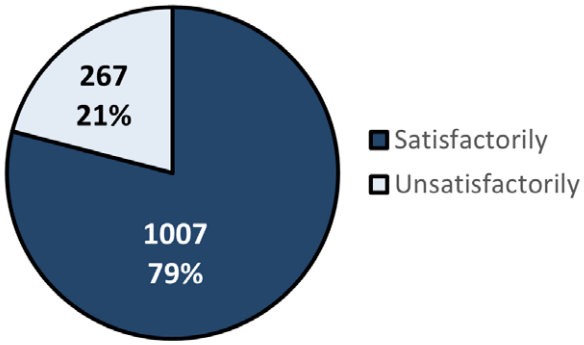
Key Takeaway

The number of active juvenile probation cases at the end of fiscal year 2025 was 644. Since fiscal year 2011, the number of active juvenile probation cases at the end of fiscal year has decreased by 1,529 cases.

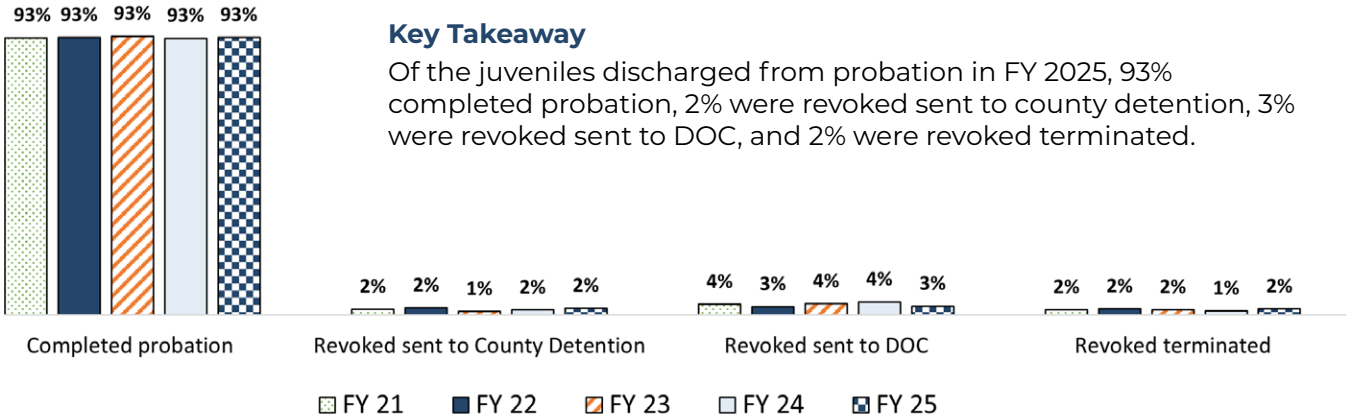
Completed Probation FY 2025: **1,274**

Key Takeaway

In FY 2025, 1,274 juveniles completed probation. Of that number, 1,007 juveniles (79%) satisfactorily completed probation, and 267 juveniles (21%) unsatisfactorily completed probation.



Reason Discharged from Probation

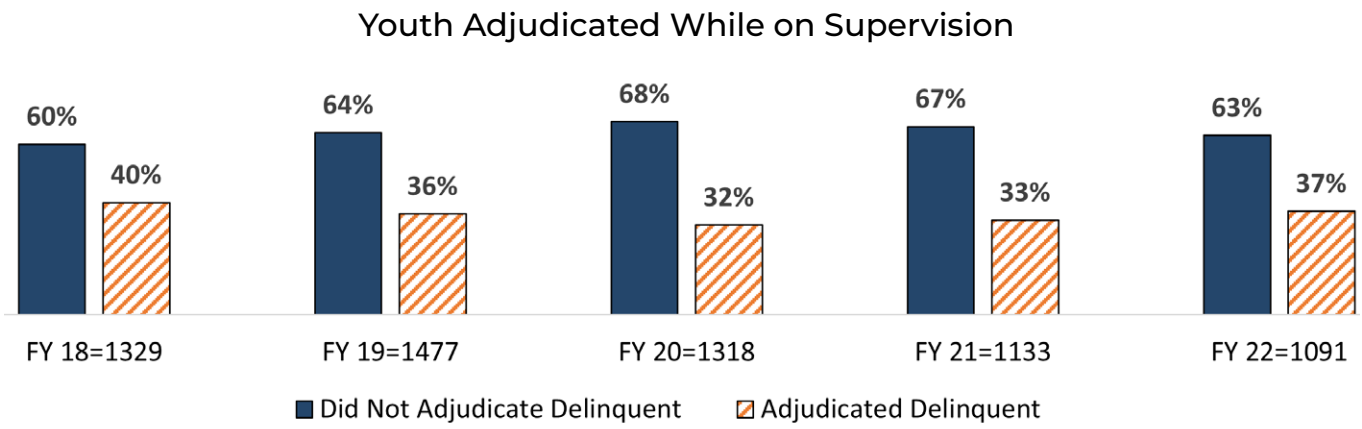


Key Takeaway

Of the juveniles discharged from probation in FY 2025, 93% completed probation, 2% were revoked sent to county detention, 3% were revoked sent to DOC, and 2% were revoked terminated.

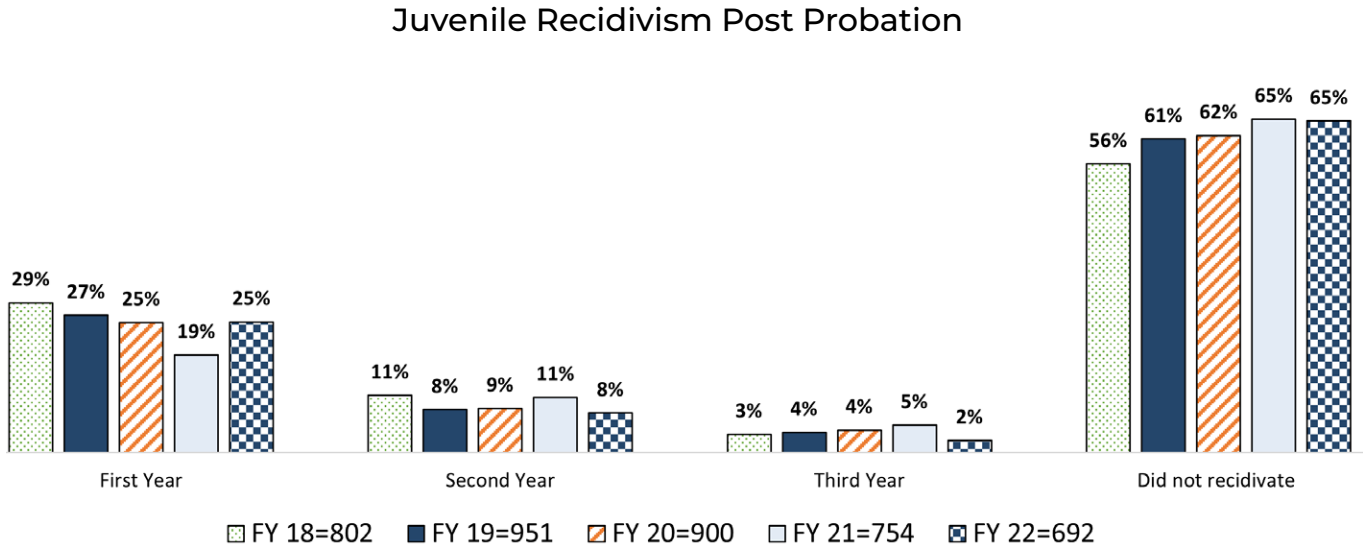
UJS RECIDIVISM

For the Unified Judicial System, recidivism is defined as "being adjudicated delinquent while on probation or adjudicated delinquent or convicted of a felony in adult court within one year, two years, or three years after discharge from juvenile probation." SDCL 26-8D-1(5) Based on the definition of recidivism, the earliest year that will show final results is FY 2022.



Key Takeaway

In FY 2022, a total of 1,091 youth were adjudicated while on supervision. Of that number, 63% did not adjudicate delinquent, and 37% adjudicated delinquent.

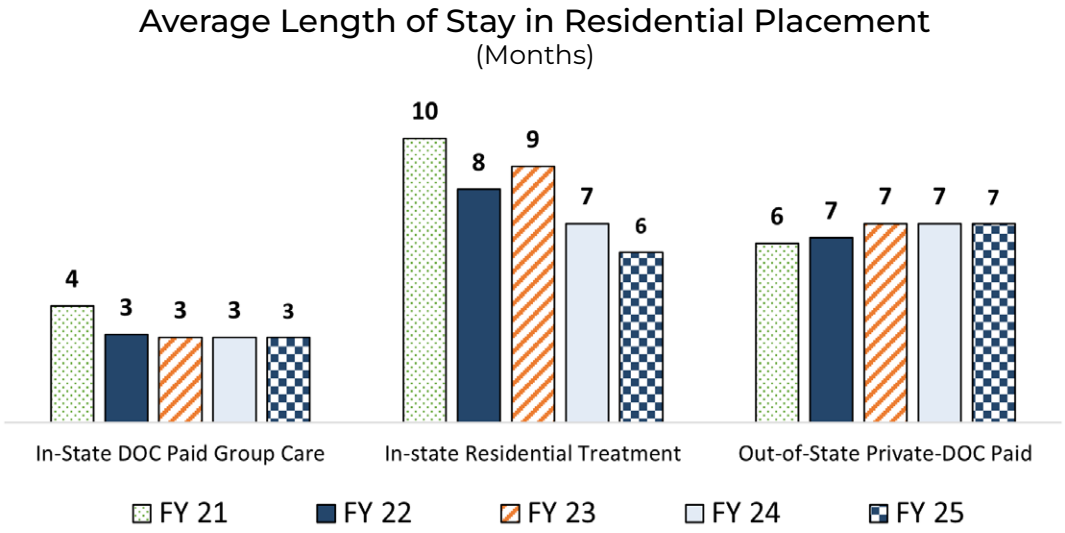


Key Takeaway

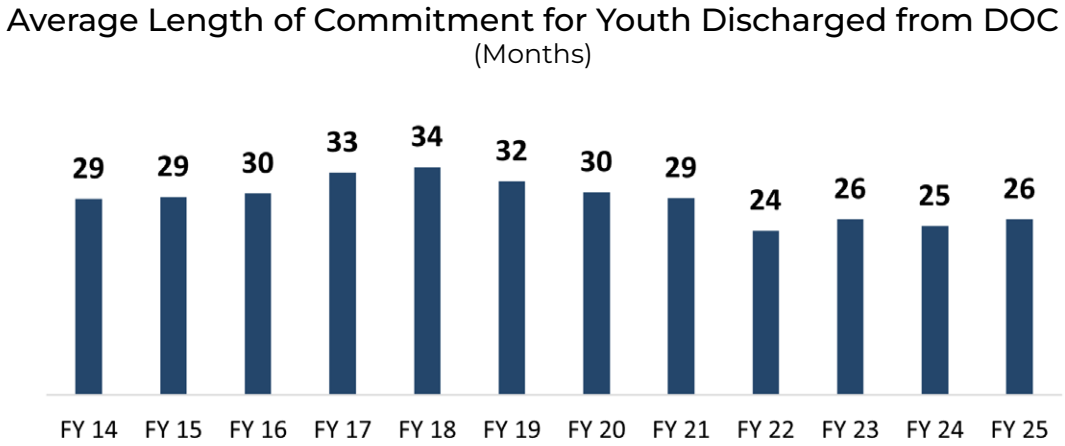
In FY 2022, 65% of juveniles post probation did not recidivate, 25% recidivated in the first year, 8% recidivated in the second year, and 2% recidivated in the third year.

DOC Length of Stay

Commitments to DOC were declining even prior to the implementation of the JJPSIA. However, youth were staying in facilities longer, an increase of 27% for South Dakota's youth population. Through DOC's successful performance-based contracting efforts with private providers, DOC has reduced our length of stay without compromising public safety outcomes. A robust body of research has shown that longer stays have no benefit for reduced recidivism across all program types.



**In-state residential includes intensive residential treatment (IRT) and psychiatric residential treatment facilities (PRTF).*



Key Takeaways

The average length of stay for in-state DOC paid group care has remained steady over the past nine fiscal years. While few youth in the custody of DOC are served by in-state residential treatment providers, the length of stay has decreased from a high of 17 months to six months in FY 2025. Out-of-state private-DOC placements which include both group care and psychiatric residential treatment beds continue to average seven months.

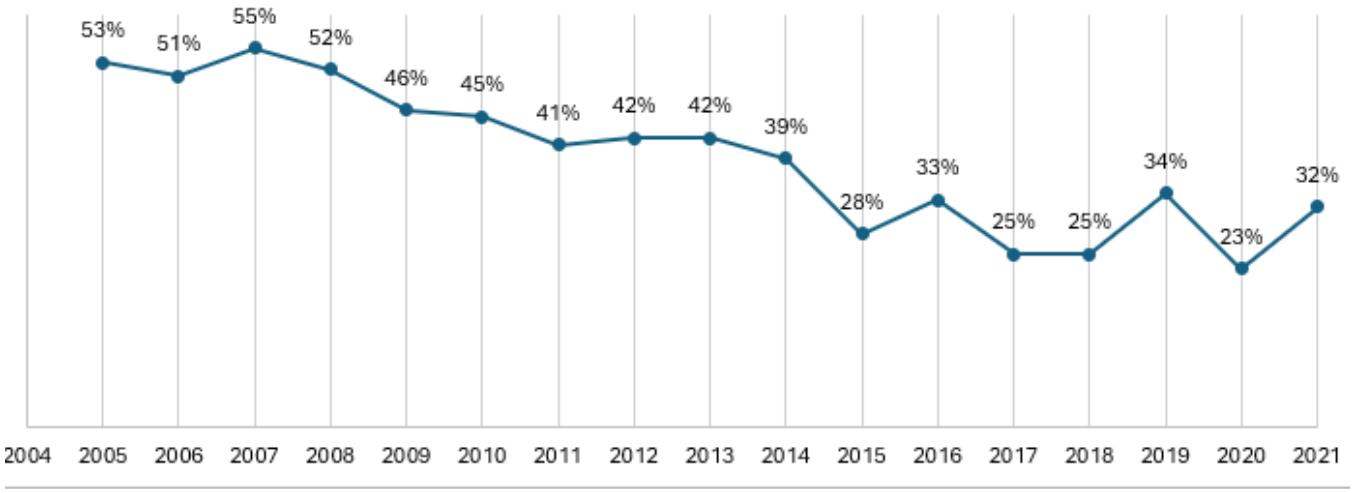
The average length of commitment for youth discharged from DOC has fluctuated over time; however, there was an increase by one month between FY 2024 and FY 2025.

DOC RECIDIVISM

The Department of Corrections (DOC) calculates recidivism based on an offender's status three years following their release from placement to aftercare supervision.

A return includes any admission back to South Dakota DOC following placement or discharge for a felony conviction or for a technical violation of aftercare supervision.

Juvenile Recidivism Rate



Key Takeaway

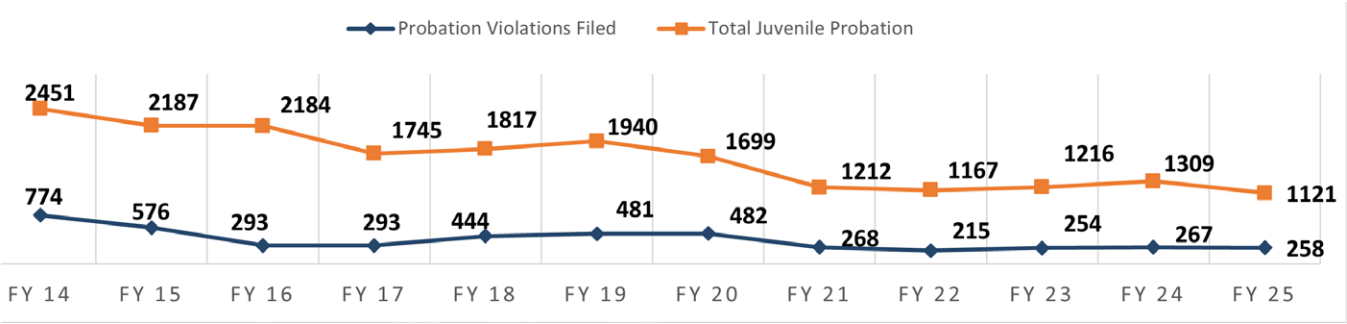
In FY 2021, the DOC juvenile recidivism rate was at 32%, as compared to a high of 55% in FY 2007.

YOUTH ON PROBATION

Effectively Hold Juvenile Offenders Accountable

When youth on probation are failing to show positive behavior changes and are not consistently following the rules of probation, court services officers (CSOs) use available tools to appropriately respond to their behavior. A probation violation is the last resort after CSOs work with youth to problem-solve and address their needs and behavior to get the youth on a better path.

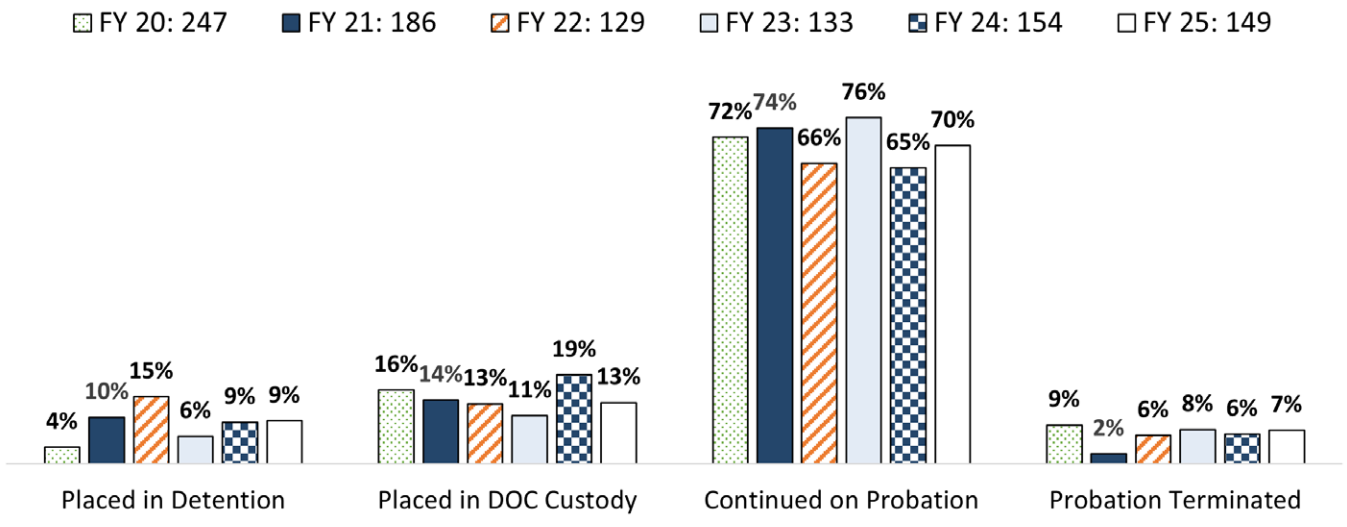
Youth on Probation and Violations Filed



Key Takeaway

In FY 2025, a total of 1,121 juveniles were on probation, and 258 probation violations were filed.

Sustained Probation Violation Outcomes

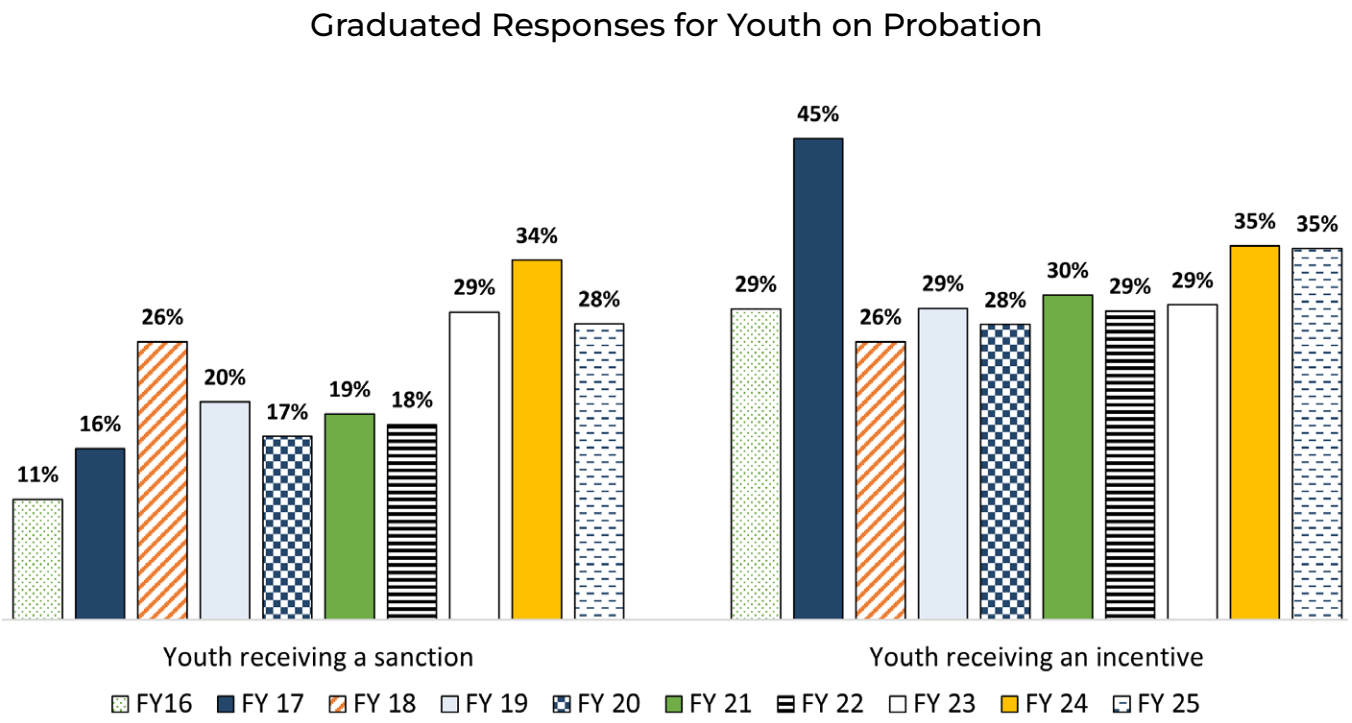


Key Takeaway

The majority of youth who received a probation violation continued with probation. Of the 149 sustained probation violations in FY 2025, 70% continued on probation, 13% were placed in DOC custody, 9% were placed in detention, and 7% had probation terminated.

GRADUATED RESPONSES

Graduated responses are the use of incentives and sanctions to encourage youth to alter their attitudes and behavior toward pro-social alternatives. The emphasis of graduated responses in supervision is skill-building and positive communication between the youth and CSO. It is important to consistently address positive and negative behaviors, but addressing the positive behaviors must outweigh the negative consequences to positively impact behavior change. Research repeatedly suggests that efforts to change juvenile behavior are most effective when they incorporate positive reinforcements that are utilized at a much higher rate than negative sanctions.[1]



Key Takeaway

During FY2025, 35% of juveniles on probation received an incentive, and 28% of juveniles received a sanction.

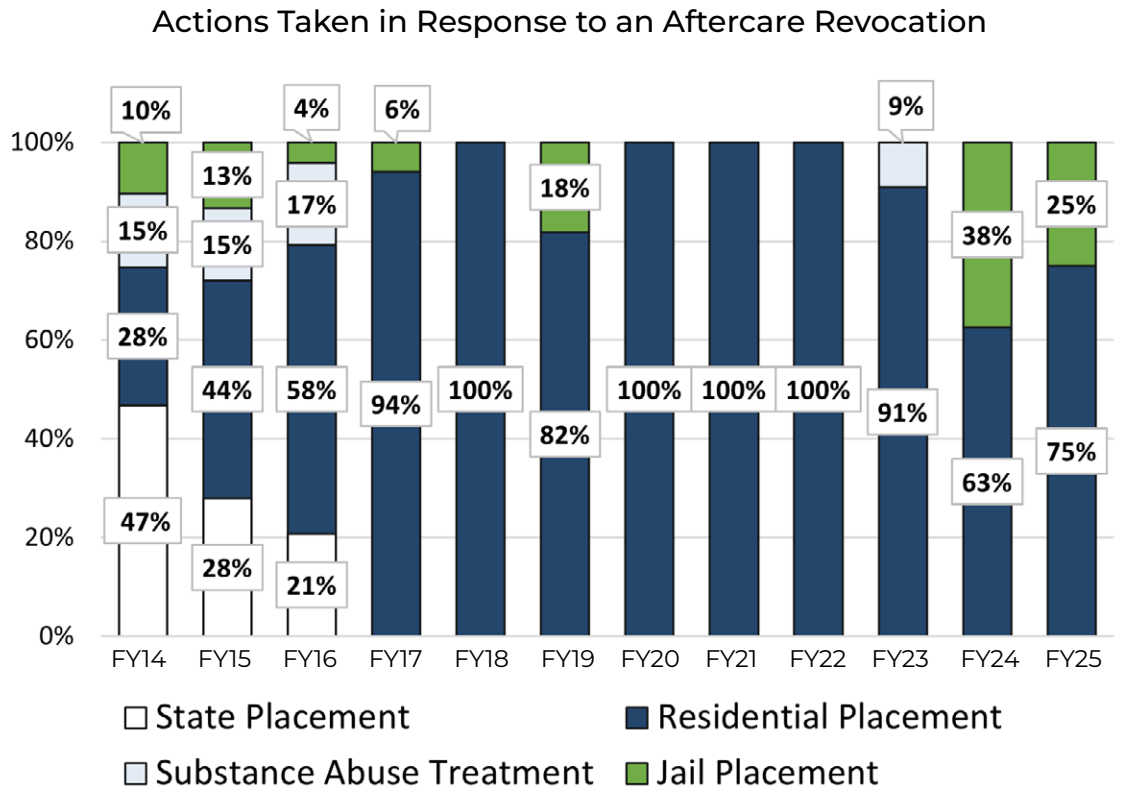
[1]*Guevara, M. and Solomon, E. (2009). Implementing Evidence-Based Policy and Practice in Community Corrections, National Institute of Corrections, US DOJ, Second Edition.*

AFTERCARE

Aftercare is a conditional release to the community during which time the youth remains under DOC guardianship. Youth on aftercare are typically released home with a case plan, which is an individualized service plan that targets a youth's areas of risk and need and prepares a youth for progressively increased responsibility in the community.

In addition to the supervision and monitoring systems provided by juvenile corrections agents (JCAs), which stress accountability, aftercare supervision includes a combination of interventions or treatment services matched to the youth needs. JCAs use Effective Practices in Community Supervision model (EPICS), cognitive behavioral interventions and Carey Guides as intervention tools to support positive behavioral changes.

In some cases, youth on aftercare are placed in Brighter Transition Youth Treatment Center (males) or other programs to assist with transition to the community. In some instances, despite efforts by JCAs to intervene, youth may continue to engage in illegal conduct and aftercare may be revoked.

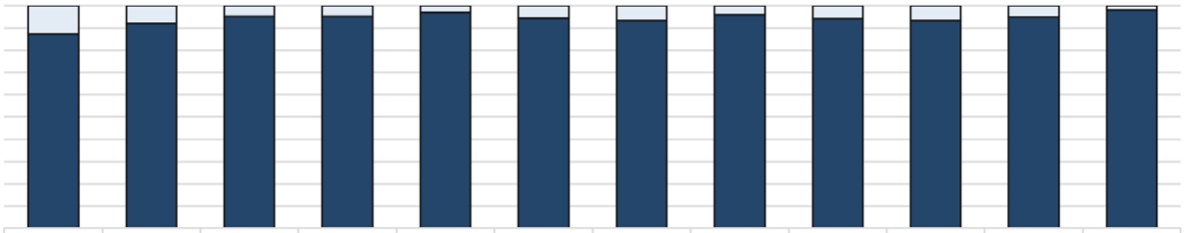


Key Takeaway

In FY 2025, 75% of actions taken in response to a juvenile aftercare revocation was residential placement and 25% was jail placement.

AFTERCARE

Aftercare Revocations



	FY 14 (843)	FY 15 (860)	FY 16 (535)	FY 17 (348)	FY 18 (232)	FY 19 (193)	FY 20 (199)	FY 21 (201)	FY 22 (171)	FY 23 (163)	FY 24 (162)	FY 25 (173)
Revoked	13%	8%	5%	5%	3%	6%	7%	4%	6%	7%	5%	2%
Not Revoked	87%	92%	95%	95%	97%	94%	93%	96%	94%	93%	95%	98%

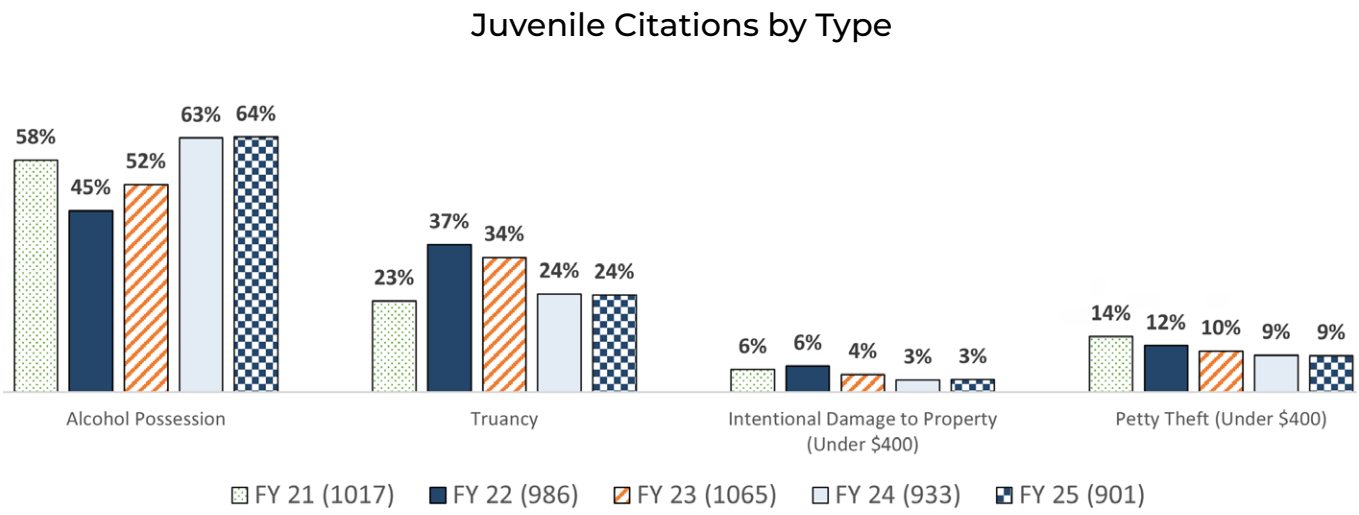
Key Takeaways

Just 2% of youth on aftercare had their aftercare revoked in FY 2025. Most youth, 98%, complete aftercare supervision without a revocation event. Most youth on aftercare were placed in a residential placement.

Photo by Melissa Askew on Unsplash.

JUVENILE CITATIONS

Juvenile citations were introduced in January 2016. Citations are being issued to address certain delinquency violations swiftly and certainly in the community. Youth receiving a citation may have a judgment imposed by the court requiring them to participate in a diversion program, pay a fine, or complete community service.[1]



Key Takeaways

There were 901 juvenile citations in FY 2025. Of that number, 64% of citations were for alcohol possession, 24% for truancy, 3% for intentional damage to property under $400, and 9% for petty theft under $400.

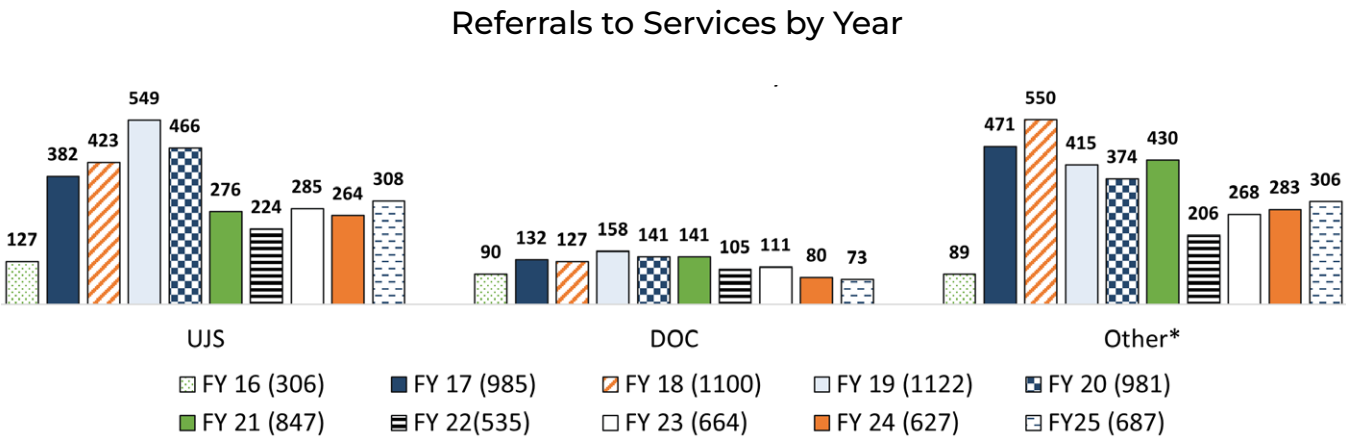
[1]*Four-year high school cohort graduation rate by race/ethnicity: Kids Count Data Center. KIDS COUNT data center: A project of the Annie E. Casey Foundation. (n.d.). Retrieved December 2021, from https://datacenter.kidscount.org/data/tables/8959-four-year-high-school-cohort-graduation-rate-by-race-ethnicity?loc=43&loct=2#detailed/2/any/false/2029,1965,1750,1686,1654,1601,1526,1445,1250/144,12,350,172,9,107/17902*

REFERRALS TO TREATMENT

Reduce juvenile justice costs by investing in proven community-based services and preserving residential facilities for serious offenders.

Research consistently shows youth placed in out-of-home placements recidivate at much higher rates than those who are treated in the community. Studies have shown that youth receiving community-based supervision/services are more likely to go to school, have employment, and avoid future delinquency. These findings emphasize the importance of keeping youth in their community and using alternative strategies to address their behavioral health needs and supervise them effectively.

Since the passage of JJPSIA, the Department of Social Services (DSS) has expanded community-based treatment services statewide to include a wide variety of evidence-based programs, including the core JJRI treatment services of functional family therapy (FFT), aggression replacement training (ART), moral reconation therapy (MRT), and evidence-based substance use disorder (SUD) treatment services.



**Other includes any referral received outside of UJS or DOC, such as schools, parents and diversion programs for youth at risk of justice system involvement.*

***Referral numbers do not include referrals to systems of care services.*

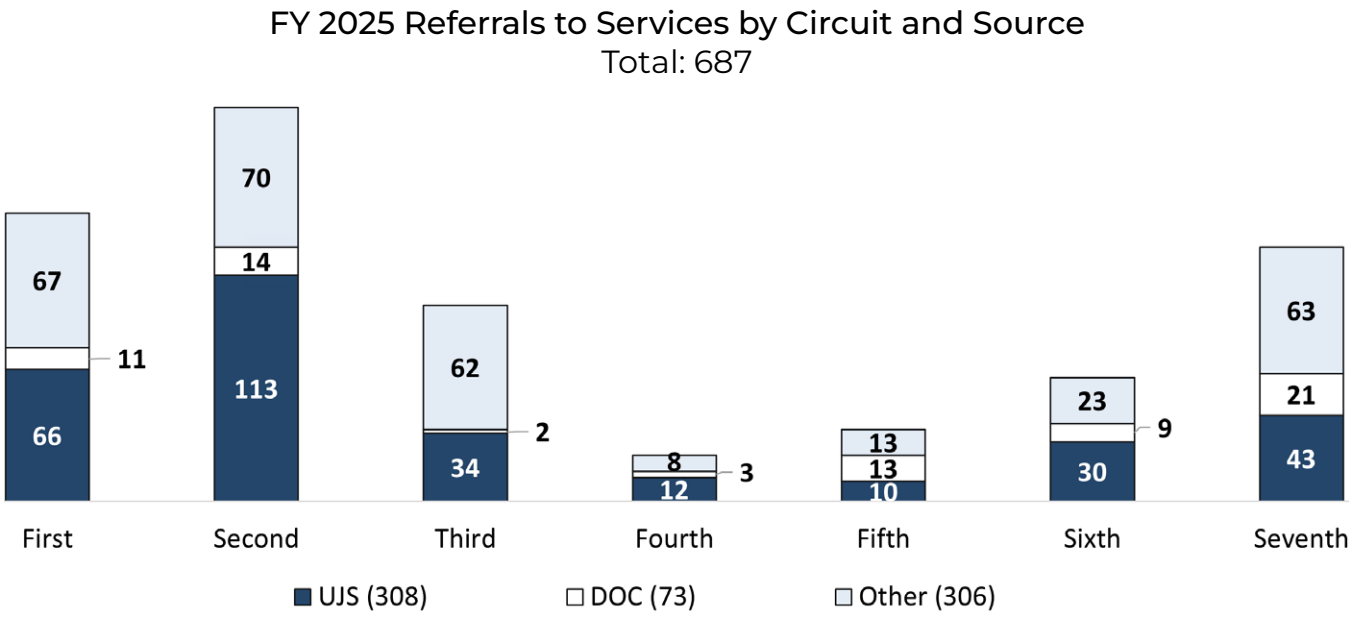
Key Takeaways

In FY 2025, referrals from UJS increased by 17%, as compared to FY 2024, referrals from DOC decreased by nearly 9%, and referrals from other sources increased by 8%.

Overall, referrals increased by 10% in FY 2025, as compared to FY 2024.

REFERRALS BY CIRCUIT AND SOURCE

Referrals to community-based treatment services come from UJS court services officers, DOC juvenile corrections agents, diversion coordinators and Child Protection Services. Other referrals can also come from parents seeking assistance, school districts, attorneys, public defenders, and internal referrals made by agencies for youth at risk of justice involvement. The graph below shows the number of referrals made by each referral source in each circuit in FY 2025.



**Referral numbers do not include referrals to systems of care services.*

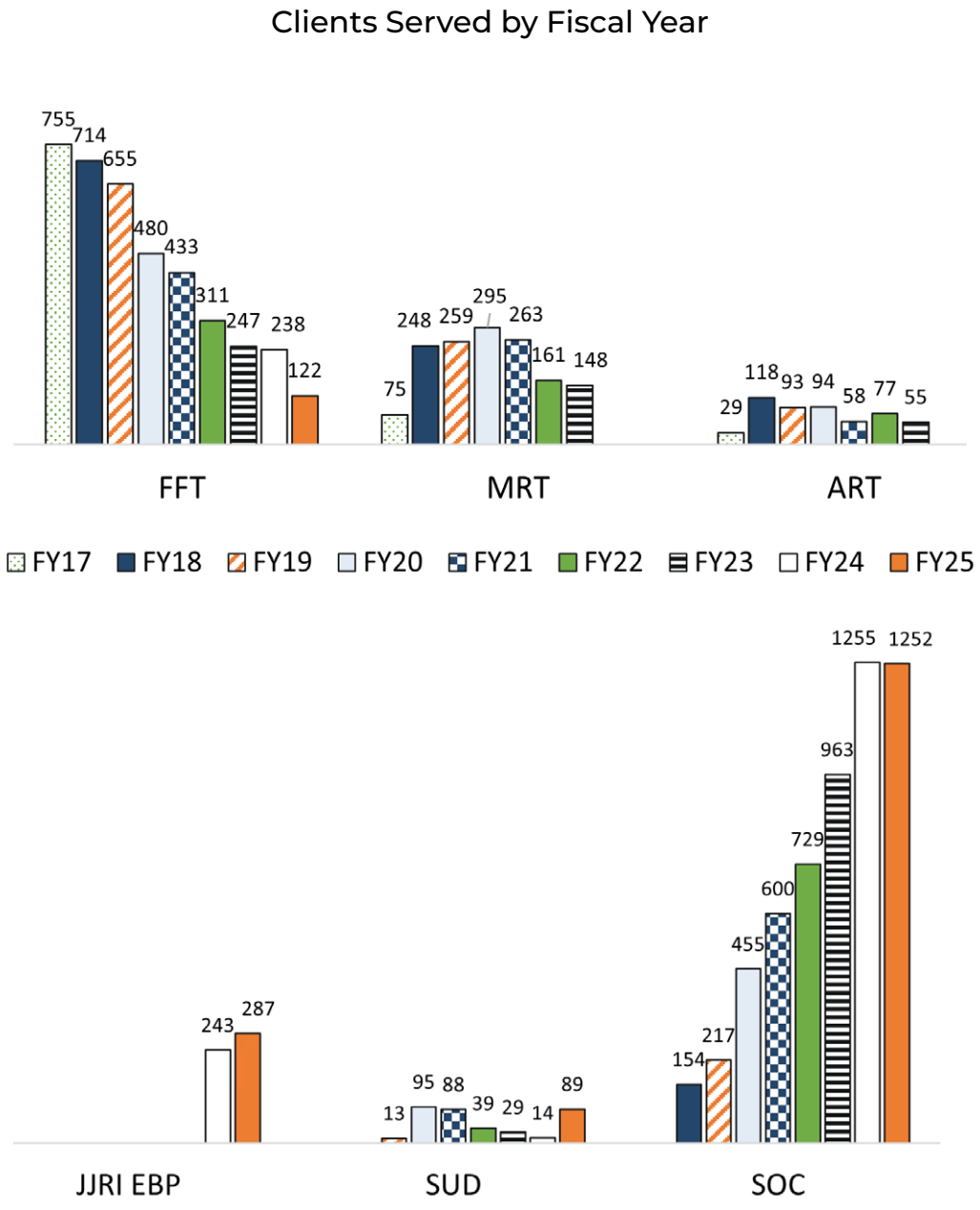
Key Takeaways

Referrals to treatment services decreased in the Second, Fourth and Fifth circuits in FY 2025. Referrals to treatment services increased in the First, Third, Sixth and Seventh circuits in FY 2025. The largest increase was in the Third Circuit at 98, which more than doubled from 44 in FY 2024.

CLIENTS SERVED

In FY 2024, the Division of Behavioral Health worked collaboratively with JJRI stakeholders and providers to increase flexibility of JJRI services to include additional evidence-based programming. As a result of the implementation of additional evidence-based programming, there have been changes to the reporting process for clients served by fiscal year. Evidence-based programs are inclusive of MRT and ART, along with a wide variety of other evidence-based programming. Division of Behavioral Health staff made efforts to identify SUD service delivery gaps.

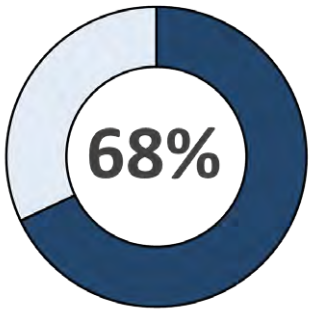
Through these efforts, five new contracts for JJRI SUD services were established within FY 2025. Clients served in JJRI SUD treatment in FY 2025 increased by 75, compared to FY 2024, more than a 500% increase.

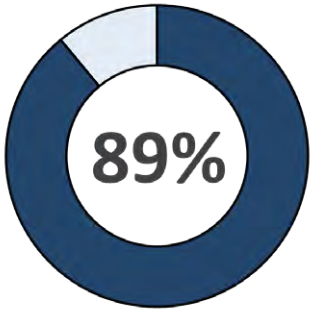


FUNCTIONAL FAMILY THERAPY

THERAPY

Out of 65 families served, 68% successfully completed functional family therapy (FFT).



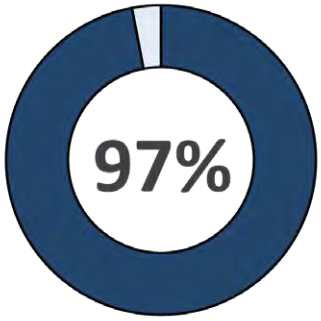


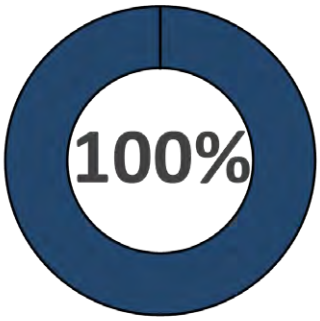
CHANGE

89% of youth and 82% of parents and guardians reported a positive general change in their family after FFT.

SCHOOL OR WORK

97% of youth were attending school or working upon completion of FFT.



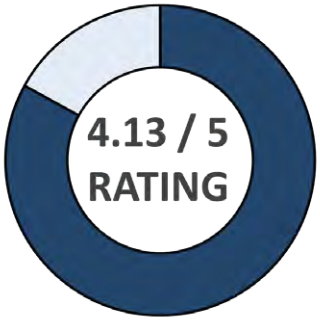


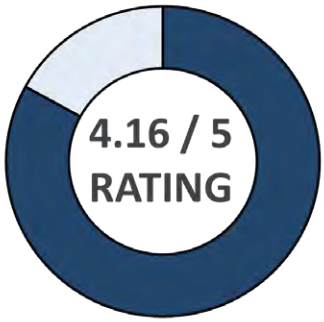
LIVING AT HOME

100% of youth were living at home upon completion of FFT.

ACCESS

When accessing treatment services, youth rated their ease and convenience at 4.13 out of 5; parents' rating was 4.74 / 5.





OUTCOMES

Regarding mental health and social wellbeing, youth rated their outcomes at 4.16 out of 5; parents' rating was 3.97 / 5.

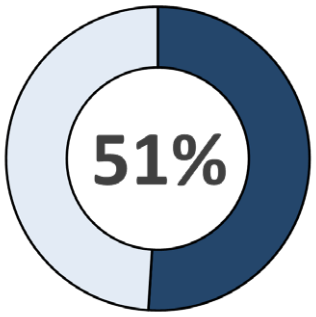
Key Takeaway

The percentage of families successfully completing functional family therapy in FY 2025 remained consistent, compared to FY 2024.

JJRI EVIDENCE-BASED PRACTICES

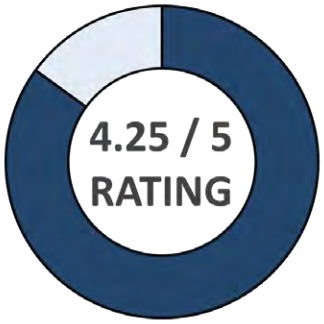
PRACTICES

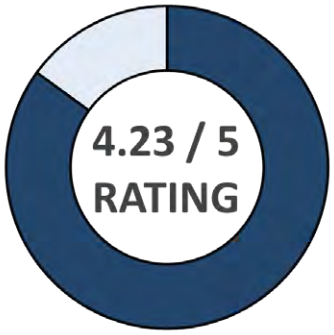
Of 131 youth, 51% of youth successfully completed JJRI evidence-based practices (EBPs).



ACCESS

When accessing treatment services, youth rated their ease and convenience at 4.25 out of 5; parents' rating was 4.29 / 5.





OUTCOMES

Regarding mental health and social wellbeing, youth rated their outcomes at 4.23 out of 5; parents' rating was 4.10 / 5.

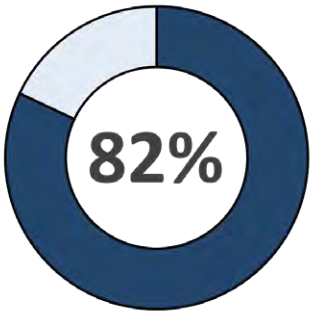
SYSTEMS OF CARE SERVICES

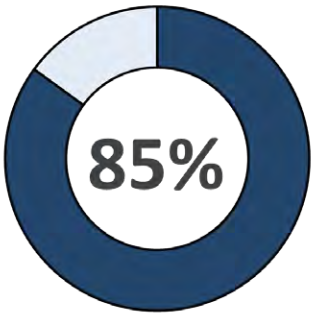
Systems of care (SOC) is an early-intervention service that includes a wraparound approach to care coordination and service delivery for youth and families with complex needs. This approach is built on the values of being family driven, team-based, collaborative, individualized, and outcomes-based. The services provided through SOC are intended to address the unique challenges of children, youth and their families who are currently involved or at risk of involvement with the juvenile justice system. SOC helps families to navigate and access services, while also giving them the skills they need to become self-reliant.

In FY 2025, SOC supported youth and families across 51 counties who experienced barriers in one or more of the eight life domains including basic needs, social supports, emotional needs, educational needs, community supports, housing supports, health, and safety by creating a family service plan that addresses these needs.

BASIC NEEDS

82% of families reported basic needs had been met.



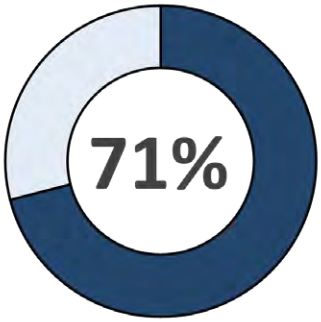


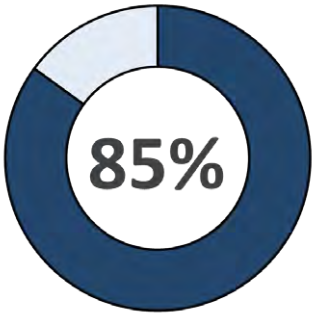
HOUSING NEEDS

85% of families reported housing needs had been met.

EMOTIONAL NEEDS

71% of families reported emotional needs had been met.



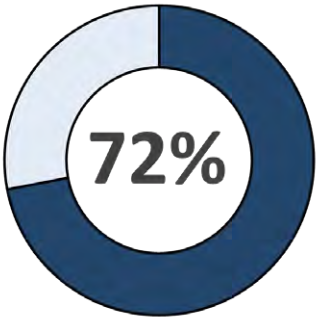


EDUCATION NEEDS

85% of families reported educational needs had been met.

FAMILY LIFE

72% of families reported satisfaction with their family life.



Key Takeaway

In FY 2025, 1,252 families received SOC services, impacting more than 3,200 children.

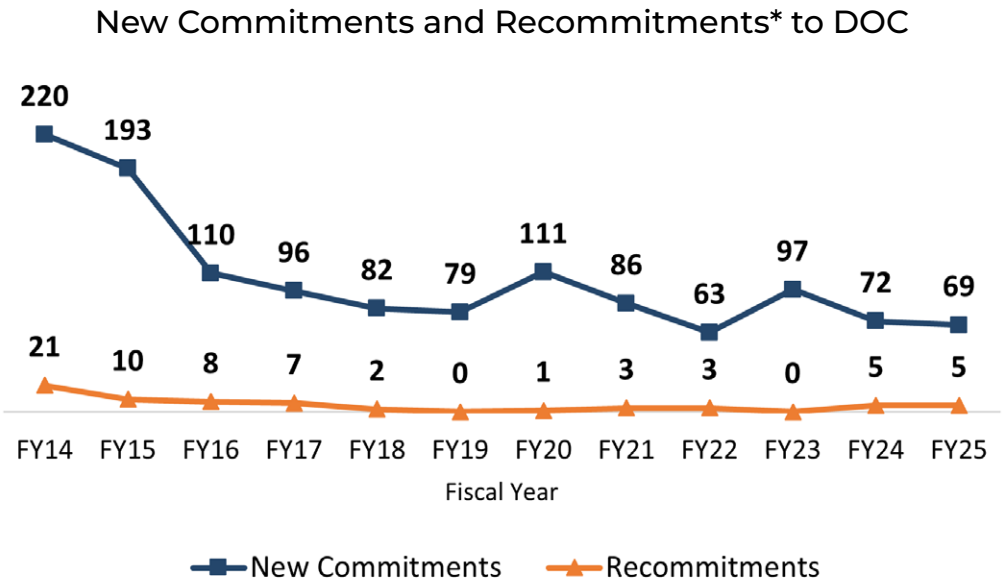
COMMUNITY RESPONSE TEAMS

JJPSIA gives circuits the option to establish community response teams (CRTs) as resources to help judges identify community-based alternatives to DOC commitment. The purpose of CRTs is to utilize proven community-based options to improve outcomes for youth and families while improving public safety and preserve residential facilities for the most serious offenders.

First Circuit FY 2025

Community Response Teams Recommendations	Community-Based Alternative	Court Disposition	Agreement
1. Continue/Restart Probation	Yes	Intensive Probation	No
2. Intensive Probation	Yes	Intensive Probation	Yes
3. DOC Placement	No	DOC Placement	Yes
4. Intensive Probation	Yes	Intensive Probation	Yes
5. Extend Intensive Probation	Yes	Intensive Probation	Yes
6. Extend Intensive Probation	Yes	Intensive Probation	Yes
7. Standard Probation	Yes	Intensive Probation	No

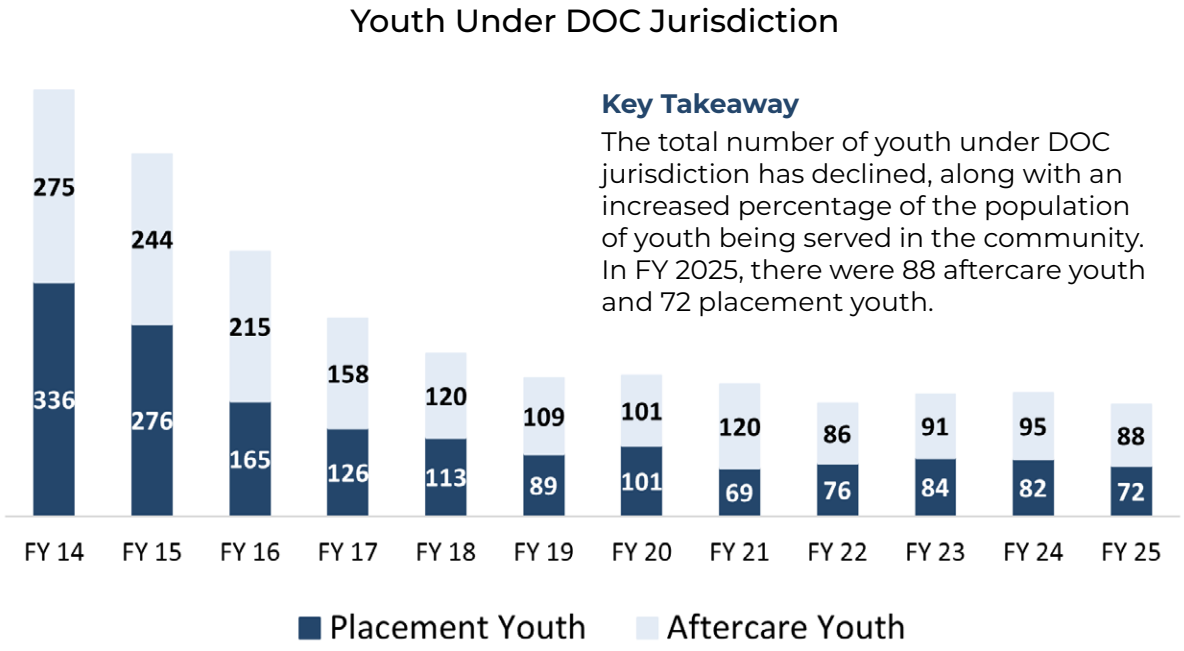
DOC COMMITMENTS



**A recommitment involves a youth who was previously under the jurisdiction of the Department of Corrections (DOC) and discharged and then has been adjudicated as a delinquent or child in need of supervision (CHINS) for a new offense and is being recommitted to the DOC.*

Key Takeaways

New commitments to DOC decreased by 4% from 72 in FY 2024 to 69 in FY 2025. Recommitments remained the same at 5 in both FY 2025 and FY 2024.



Key Takeaway

The total number of youth under DOC jurisdiction has declined, along with an increased percentage of the population of youth being served in the community. In FY 2025, there were 88 aftercare youth and 72 placement youth.

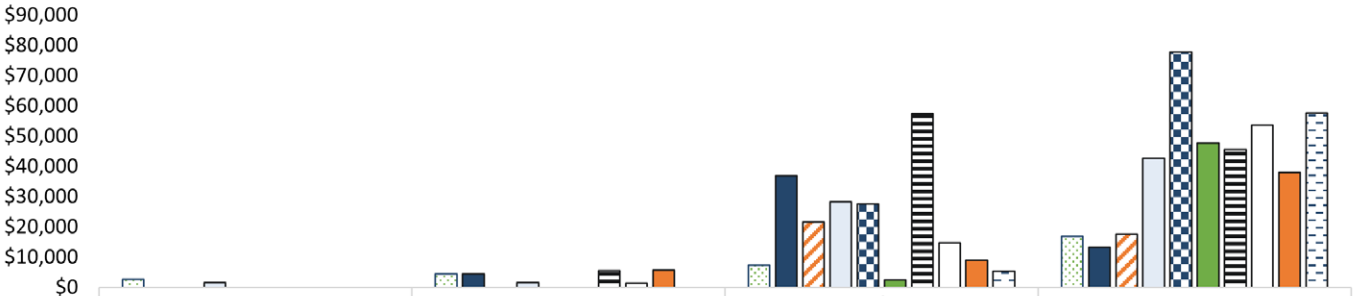
PROVIDER PAY

In FY 2016, DOC entered into performance-based contracts with providers to ensure treatment goals are met within established time frames, consistent with the research around length of stay.

Key Takeaway

In FY 2025, $63,070 was paid to DOC contracted providers consistent with the performance-based contract model. DOC has demonstrated consistent success with reducing the length of stay for youth without compromising public safety outcomes.

Amount Paid to Providers for DOC Performance-Based Contracts



	In-State IRT	In-State PRTF	Out-of-State	In-State Group Care
FY 16	$2,700	$4,575	$7,350	$17,000
FY 17	$0	$4,525	$36,875	$13,350
FY 18	$0	$0	$21,690	$17,650
FY 19	$1,620	$1,540	$28,260	$42,700
FY 20	$0	$0	$27,500	$77,850
FY 21	$0	$0	$2,600	$47,710
FY 22	$0	$5,520	$57,480	$45,650
FY 23	$0	$1,500	$14,790	$53,700
FY 24	$0	$5,750.00	$8,975.00	$38,100
FY 25	$0	$0	$5,470	$57,600

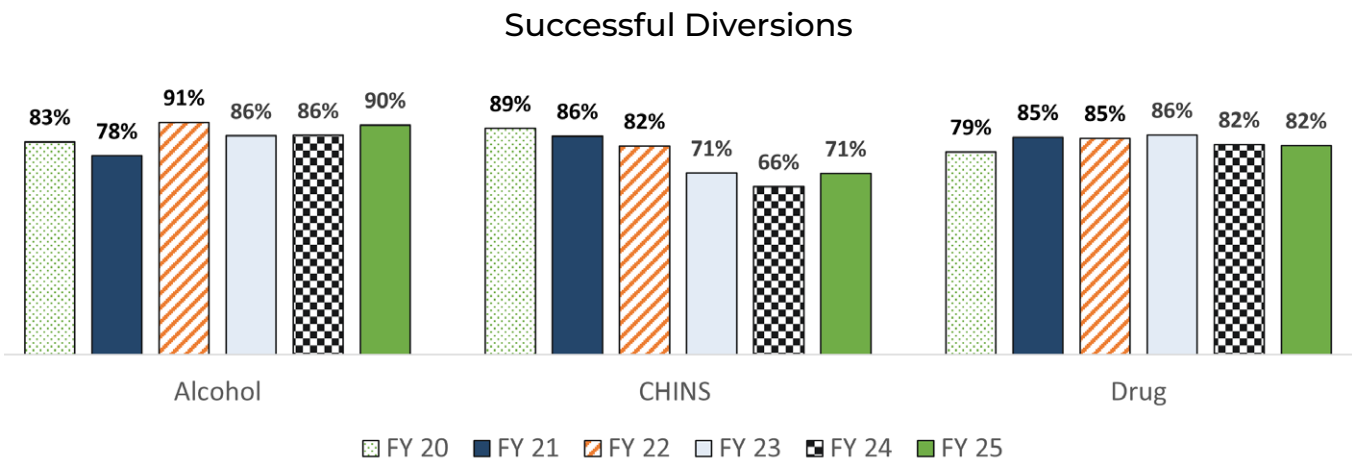
FY 16 FY 17 FY 18 FY 19 FY 20 FY 21 FY 22 FY 23 FY 24 FY 25

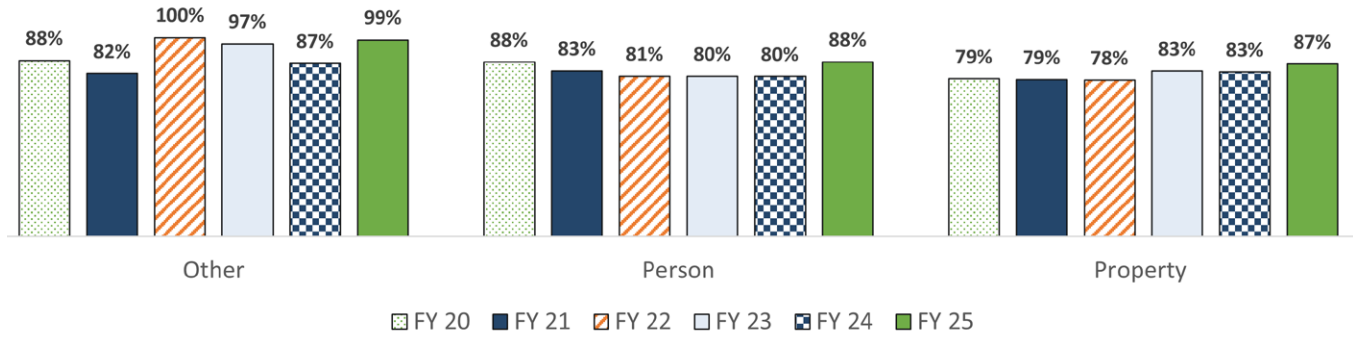
DIVERSION

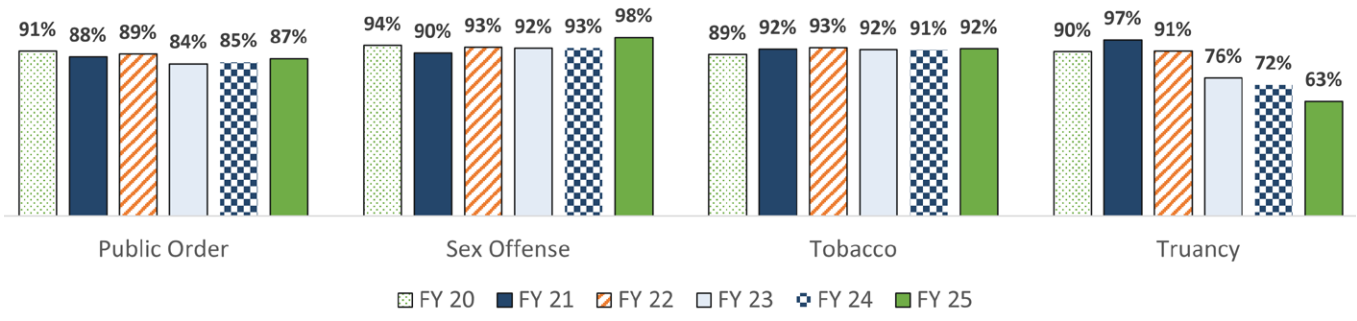
JJPSIA expands the use of diversion by providing fiscal incentives to counties and encouraging broader use of diversion for non-violent misdemeanants and CHINS with no prior adjudications. All counties are eligible to submit data to the Department of Corrections for reimbursement of up to $750 per successful diversion. Consistent with the goals of the JJPSIA, there has been an increase in both the number of diversion participants and the percentage of successful diversion completions.

Key Takeaway

$5,658,027.95 has been paid to counties since the inception of the fiscal incentive program for 16,684 successful diversion completers.







DIVERSION

Diversion Category	FY 2016 Successful	FY 2016 Unsuccessful	FY 2017 Successful	FY 2017 Unsuccessful	FY 2018 Successful	FY 2018 Unsuccessful
Alcohol	122	58	111	26	134	25
CHINS	30	57	44	62	55	69
Drug	162	110	241	109	294	117
Other	14	1	23	0	21	3
Person	38	9	65	18	75	29
Property	209	109	187	68	210	85
Public Order	67	31	101	44	174	46
Sex Offense	5	2	42	5	59	5
Tobacco	13	4	12	1	19	3
Truancy	310	64	275	41	452	64
Totals	**970**	**445**	**1,101**	**374**	**1,493**	**446**

Diversion Category	FY 2019 Successful	FY 2019 Unsuccessful	FY 2020 Successful	FY 2020 Unsuccessful	FY 2021 Successful	FY 2021 Unsuccessful
Alcohol	192	28	180	36	158	45
CHINS	90	26	85	11	83	14
Drug	299	92	281	73	259	45
Other	14	0	23	3	9	2
Person	117	25	113	16	129	26
Property	159	55	167	44	167	45
Public Order	158	26	226	23	194	27
Sex Offense	22	3	61	4	53	6
Tobacco	114	11	72	9	147	13
Truancy	449	50	663	70	673	21
Totals	**1,614**	**316**	**1,871**	**289**	**1,872**	**244**

DIVERSION

Diversion Category	FY 2022 Successful	FY 2022 Unsuccessful	FY 2023 Successful	FY 2023 Unsuccessful	FY 2024 Successful	FY 2024 Unsuccessful
Alcohol	190	19	149	25	212	35
CHINS	125	28	86	35	146	76
Drug	273	49	326	53	358	77
Other	17	0	30	1	40	6
Person	153	37	194	47	250	61
Property	146	40	182	37	229	48
Public Order	298	36	282	54	221	40
Sex Offense	52	4	84	7	74	6
Tobacco	216	17	252	23	265	25
Truancy	513	52	238	75	195	75
Totals	**1,983**	**282**	**1,823**	**357**	**1,990**	**449**

Diversion Category	FY 2025 Successful	FY 2025 Unsuccessful
Alcohol	286	30
CHINS	151	62
Drug	303	67
Other	166	2
Person	208	29
Property	278	43
Public Order	235	36
Sex Offense	61	1
Tobacco	184	16
Truancy	108	63
Totals	**1,962**	**349**

OVERSIGHT COUNCIL MEMBERSHIP

Unified Judicial System Appointees

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First Judicial Circuit

Judge Heidi Linngren
Seventh Judicial Circuit

Judge Margo Northrup
Sixth Judicial Circuit

Annie Brokenleg
Juvenile Diversion Coordinator

Joanna Lawler
Criminal Defense Attorney

Amie Weglin
Court Services Officer

President Pro-Tempore Appointees

Senator Greg Blanc
State Senator

Senator Red Dawn Foster
State Senator

Speaker of the House Appointees

Representative Mike Stevens
State Representative

Representative Kadyn Wittman
State Representative

Attorney General Appointee

Karly Winter
Assistant Attorney General

Superintendent's Association Appointees

Dr. Kelly Glodt
School Superintendent

Dr. Tammy Meyer
School Superintendent

Governor's Appointees

Ryan Brunner
At Large

Secretary Algin Young
Tribal Relations

Bryan Harberts
Youth Care Provider

Becca Koedam
Department of Social Services

Kristi Bunkers
Department of Corrections

Vacant
Law Enforcement

SOUTH DAKOTA
JUVENILE JUSTICE OVERSIGHT COUNCIL

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