



Community Transition Services Stakeholder Group
RECOMMENDATION REPORT



Washington State Department of
CHILDREN, YOUTH & FAMILIES

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Washington State Department of
CHILDREN, YOUTH & FAMILIES

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Background

During the 2021 Legislative Session, the Washington State Legislature passed [House Bill 1186](#), creating a community transition services (CTS) program to assist individuals exiting Juvenile Rehabilitation (JR) programs. House Bill 1186 tasked the CTS stakeholder group to develop recommendations regarding improving outcomes for individuals exiting juvenile rehabilitation, with a focus on:

- Increasing community involvement before and after the individual's exit from a juvenile rehabilitation facility;
- A landscape analysis of community-based, reentry-related services available to individuals exiting a juvenile rehabilitation facility by geographic region and service type;
- Community-based, reentry-related service gaps that should be addressed to ensure a successful community transition services program across the state.

In accordance with the representation requirements outlined in HB 1186, DCYF conducted a month-long recruitment effort to finalize membership for the CTS Stakeholder Group in August 2021.

- *Individuals who were or are currently confined in a juvenile rehabilitation facility*
- *Family member(s) of an individual who was or is currently confined in a juvenile rehabilitation facility*
- *Representative of the Washington Partnership Council on Juvenile Justice*
- *Representative of the Washington Association of Prosecuting Attorneys*
- *Representative of the Washington Association of Sheriffs and Police Chiefs*
- *Representative of a statewide organization representing criminal defense attorneys*
- *Representative of a statewide organization representing public defenders*
- *Representative of a statewide organization providing legal services to youth*
- *Representative from the Office of the Superintendent of Public Instruction*
- *Representative from the State Board for Community and Technical Colleges*
- *Representative from the Health Care Authority*
- *Representative from the Washington Student Achievement Council*
- *Representative from the Washington Association of Juvenile Court Administrators*
- *Representatives from service providers that assist individuals when exiting from a juvenile rehabilitation facility by providing mentoring or other community involvement opportunities to that individual*

House Bill 1186 did not include Tribal representation as a requirement for this work. In the interest of developing representative recommendations to reflect the needs of Tribal communities, DCYF hosted additional working sessions to include Tribal voice in this report.

Stakeholder group representatives who provide mentoring services for individuals exiting juvenile rehabilitation facilities engaged with youth in their care to gather feedback on the recommendations. The input shared is reflected in the recommendations below.

“We can get to solutions if we listen to those closest to the problem.”

Case Study

Members were given a case study to apply to their work throughout the workgroup. They chose regions around the state, and related the 12 Youth Risk and Protective Factor Domain conversations back to her situation and what might be a challenge/barrier for her and what might be helpful. This activity helped tease out the recommendations regarding improving outcomes for individuals exiting JR. The CTS Stakeholder Group used the Esperanza Case Study detailed below to guide their work, while the Tribal representatives used a similar approach through the lens of their own Tribal communities.



“Esperanza” is a 17.5-year-old Latina female who was sentenced to DCYF Juvenile Rehabilitation from Benton Franklin County Juvenile Court. She has spent the majority of her adolescent years bouncing around in foster care, relative placements and detention. Esperanza has experienced significant trauma, including emotional and physical abuse, unstable housing, and a history of family substance use.

Esperanza’s mother wants to return her home, and has expressed an inability to parent her as she is “difficult”, and she has three other young siblings in the home. The mother also struggles with own addiction. Esperanza has run away in the past and been sex trafficked. She is worried about being broke and not having the nice things she was accustomed to

having. She has attempted suicide twice, experimented with substances, and been diagnosed with PTSD and Depression. Her goals are to obtain her high school diploma and is unsure of career aspirations. She has expressed concerns about not having friends outside the life and fears social isolation.

“Staying out of jail is a huge accomplishment for a lot of people. We don’t always articulate that.”

12 Youth Risk and Protective Factor Domains

Domains of risk and protective factors are used to help understand conditions or variables that will increase or decrease the probability of a young person’s future justice system contact and their successful transition to the community ([Washington State Juvenile Court Assessment Manual V2.1](#)). We employed this model to help organize the discussion on the areas where service strengths and gaps may exist across the state and how community involvement can support a young person’s transition when exiting JR.

Members were initially introduced to the 12 Youth Risk and Protective Factor Domains to ground the scope of this workgroup and their case study activity. Each meeting members learned about the function of the domains from outside experts and those with lived experience. They were then asked to examine an area within the state to see what the services in that domain would be and whether they are available or a recommendation to fill a gap would be necessary.

Aggression	Employment	Relationships
Alcohol and Drugs	Family	School
Attitudes/Behavior	Living Arrangements	Skills
Criminal History	Mental Health	Use for Free Time

Domain Activity Questions:

1. *How could your community help Esperanza be successful?*
2. *What is missing? What would be helpful in order to ensure she is successful?*
3. *What are the service gaps in your community that could ideally help Esperanza?*
4. *Looking at Esperanza through a girl-centered, trauma-informed, culturally competent lens, what additional services/programs would you recommend?*
5. *If Esperanza were a male, would there be fewer services gaps and what would those be?*

“We need a graduated system when leaving incarceration.”

Case Study Evaluation

In order to ensure Esperanza is equipped with the necessary skills, competencies and supports she needs to successfully transition from confinement to her home and community, she met with her transition support team to identify needs & barriers, set goals and review resources. Esperanza will need to work with her transition team on an ongoing basis to come up with a comprehensive transition plan to assist in a successful re-entry.

Domain Recommendations

Members chose to represent their report in narrative fashion with ***key recommendations italicized in red font.***

Family

Goal: Ensuring that Esperanza/Tribal Youth have strong, positive familial relationships to serve as a support system upon re-entry.

It is important to consider the family and youth needs about returning home prior to the re-entry process. During the youth’s stay in JR, ***a comprehensive needs assessment of the youth and family, nuclear family or fictive kin, should be completed, followed by the family and youth being connected with a community navigator or peer model who can address any challenges the youth and family may face upon re-entry.*** For a successful return home, there needs to be an open, transparent conversation with the youth and their family about what they feel they need during this process and what challenges they may face, including coping strategies to handle the challenges. ***DCYF should develop a roadmap of available resources to increase access to state/local services so navigators/peer models are able to recommend more culturally competent wrap around services.*** It is important that the family or a trusted adult is involved in the youth’s skill building and growth, to help support the youth in achieving long-term recovery. In home family services should be available for the youth and family to help with the transition home, ***to include support with transportation and mental health issues and understanding how this impacts behavior,*** that incorporates culturally responsive supports.

Use of Free Time

Goal: Identifying areas of interest, activities, and opportunities for positive connection to help Esperanza/Tribal Youth have healthy, fulfilling ways to spend their free time.

JR youth expressed wanting a place to escape to when feeling overwhelmed, or wanting to connect with their peers. It is important that the youth have nurturing connections, without being forced to engage in activities. Having a tool, such as ***resource mapping, of local agencies that offer free services and are inclusive and value cultural activities as well as provide learning opportunities*** are a need. There needs to be a place for youth to go where they will not be judged and can just BE, where expectations and enforcement of activity roles are removed.

Relationships

Goal: Ensuring Esperanza/Tribal Youth has the support, mentorship and safety of healthy relationships, and the skills to identify and foster healthy relationships upon re-entry.

To build healthy relationships, we must first break the negative past social relationships and replace them with positive interactive relationships in the community, whether that be with family members, friends, romantic relationships, community partners, etc. *It would be beneficial to connect the youth with a mentorship in their home community to focus on skill development, and learn how to foster positive relationships while setting healthy boundaries with individuals who are already in their lives (youth echoed this recommendation).* Youth would benefit from transitional housing and/or a training facility that employs individuals with lived experience to help build positive connections.

Mental Health

Goal: Ensuring Esperanza/Tribal Youth has safe and responsive ways to connect with long-term mental health support and services both before and after their release.

Mental health models need to be regularly updated and reflective of youth's needs. Services should be culturally aware and competent, and based on a peer-model or community model that is not re-traumatizing for the individual seeking services. JR youth would benefit from having additional peer connection and support where they can be uplifted, receiving services that are based on integrity and fidelity. *It is crucial that mental health services begin upon the youth's entry to JR, and can easily transfer to community-based services to support ongoing continuity of care.* Providers and families need to be investing in services that are community based and culturally aware and competent. *Providers and families should be educated on alternative approaches to mental health services that are inviting and encouraging for youth to attend.* This could include utilizing traditional or cultural teachings, art, sports activities, meeting in locations other than an office, and understanding that traditional therapy models can be more harmful for the youth. *Investing in services that support co-regulation*, such as yoga, qigong, philosophy from Body Keeps the Score, and somatic release, will teach lifelong skills about managing stress and emotion in a healthy way.

Living Arrangements

Goal: Ensuring Esperanza/Tribal Youth has safe and stable housing and living arrangements upon release.

Due to the housing scarcity within Washington State, a *conversation regarding living arrangements should be occurring immediately.* This meeting would bring together family (including fictive kin) to *write out a plan of care for the youth and individuals included, on needs, strengths and where supports might be needed.* Conversations need to include autonomy over one's own goals, safe and supportive housing that could potentially be funded for the youth if returning home is not an option, and education around budget responsibilities. It is important that during the youth's stay in JR, they are *engaged in independent living skills training to better support the transition to safe and stable housing upon release. If the youth is involved in Extended Foster care, support navigating extended foster care resources, such as housing vouchers, need to be occurring early on.* It would be beneficial for *Washington State to invest in community housing programs that are culturally responsive and do not limit the youth with boundaries to entry or maintaining of housing.*

Employment

Goal: Esperanza/Tribal Youth has the support and encouragement to set and reach employment goals.

Employment support and opportunities for JR youth should begin during their stay in JR, allowing them to obtain financial freedom and support that could transfer to a career of their choice upon re-entry. It can be challenging for youth to find employment upon re-entry based on lack of experience, previous history in their communities, or there not being enough jobs in rural areas. It *would be beneficial for youth to be connected with a mentor or navigator to explore learning and career opportunities that are of interest to the youth.* Prior to re-entry, youth could be connected to community organizations who value humanity and the individual, where they can be paid for all of their life experiences.

Prior to a tribal youth being released, it would be beneficial for them to meet with a career specialist to identify and set goals, network with local employers, or belong to a cohort where they are educated in vocational or higher education in the field of employment they are interested in. Connecting offenders with recruiters is crucial due to employment being slim based on their criminal history. *Washington state needs to continue changing and improving laws that address confidentiality and ensuring that record holders are held accountable, so youth can focus on getting their certifications and credentials in their field of interest, without their history being a hindrance.*

School

Goal: Ensuring Esperanza/Tribal Youth has a safe learning environment that addresses her academic, social and emotional needs.

Due to transition back to education being a challenge, it is important that *the youth is connected to a mentor or higher education professional to help guide and explore educational needs and desires.* We need to *listen to youth about what they need* and emphasize the importance of a warm handoff to school districts, and the importance and responsibility of a specific individual they can go to. If the youth is in high school and wants to return to their same school, there should be ongoing conversations with school staff about what that process will look like, and who will be the point of contact for the JR youth. Connecting the youth with their field of interest will help encourage education, moving towards their desired career afterward. This staff member would be responsible for *connecting the youth to career readiness programs, college/degree program partnerships, vocational pathways, apprenticeship programs, GED programs, dual-enrollment options, and any other alternative pathways that may be of interest, that encourage all varieties of learning styles.* The dedicated staff should have open and transparent conversations with the youth about what they want to do with their education future (i.e. graduation, post school transition, etc.) so they are best setup for success. There should also be *collaboration with JR staff and connection to the institutional education work group that is being led by Representative Senn to ensure consistency is occurring,* as well as having conversations around credit transfer, so there are less barriers with transferring credits.

Skills

Goal: Esperanza/Tribal Youth has the living skills, knowledge and support needed to live independently and safely.

Encouraging and supporting youth's skills is imperative when *connecting them with a life skills coach or mentor.* It is important that youth are taught *life skills like communication, budgeting, resume building, and especially technology to ensure safety and responsibility are easily incorporated into their daily life. There should also be intersection with more leisure skills, such as cooking, writing/publishing, music, etc. and allowing folks with lived experience to model skills and education for others.* There should be more *opportunities for youth to give back and be of service to their communities,* while earning certificates that allow them better access to resources. Connecting youth with local organizations that can continue to foster skill building will further support the youth's re-entry process.

Attitude/Behavior, Aggression, Alcohol and Drugs, and Criminal History

Goal: Ensuring Esperanza/Tribal Youth are provided the same opportunities without bias or judgement, while enhancing and applying their lived experiences towards future goals.

From the start of entering JR, youth should have *wrap around supports that include a positive mentor and advocates engrained in their social circles and accept the youth as they are, without judgement or bias, such as school, community and law enforcement areas (to also include a response team to support families that is not law enforcement).* It is important to *invest in co-regulation opportunities, as well as investing in community support to help with the application of new behavior skills that can be applied upon re-entry.* Implementing community-based approaches are key, with a focus on tradition, cultural and ceremonial activities. Continued mentoring, and celebrating successes, is crucial in the youth's development.

Tribal youth in particular would benefit from being exposed to other activities outside of their previously lived experiences such as traveling, other community activities and resources, tribal experiences from other regions, etc. *Promoting wellbriety, recovery, sobriety and their red road walk while addressing intergenerational trauma for the family unit will help support the tribal youth in their re-entry process.* It is also *important to work closely with public schools to address policy and practice that feed children into the school to prison pipeline, while allowing the tribes to intervene and provide alternatives to sentencing youth, as a preventative measure of the youth entering the state system.*

Overarching Identified Recommendations

Wrap around continuity of care should be the primary goal for youth. Being able to *provide a warm hand off to an identified individual that remains connected with the youth throughout and can help support the youth during their transition from JR to their community, and to help navigate any challenges or barriers that arise during that transition, is imperative.* It is crucial that the services the youth engage in are quality based, and not focused on the big box organizations that may not provide the most culturally appropriate services. Youth should be connected to community organizations that are non-stigmatizing and can help support youth in managing any challenges or barriers after reentering into the community. It is important that *youth are connected to services that focus on a self-determined model that takes into account lived experiences, cultural norms and traditions, instead of using the latest clinical model approach, that can be rooted in systems of white supremacy and end up being more traumatizing than helpful.*

Uplifting and funding lived experience support models is necessary to shift away from our complicity rooted in systems of oppression. There is a significant lack in JRA and facility staff who represent youth's community, ethnicity and culture, specifically tribal. There are questions about what wrap around continuity of care would look like, particularly in regions with a lack of resources. *Developing a resource map is a priority for youth to be fully supported in their local communities. Resource mapping should be informed by family and individual experiences rather than just informed by "professionals."*

"These kids don't need to be fixed, they need to be loved and supported."

Landscape Analysis

The language of House Bill [1186](#) Section 10.1.b-c requires DCYF to conduct a "landscape analysis of community-based, reentry-related services available to individuals exiting a juvenile rehabilitation facility by geographic region and service" and to identify "community-based, reentry-related service gaps that should be addressed to ensure a successful community transition services program across the state." The former requires identification of what community-based, reentry-related services exist and the latter requires identification of the need for services so it can be determined if the need and service supply align. The areas where need outpaces services are the reentry service gaps and are where resources should be targeted. Areas where services outpace need are also areas for investigation as they indicate a misalignment between resources and need. The goal of this work, is to align as closely as possible the available, and yet to be developed services, with the need for service. This ensures that service needs are being met, while actively avoiding resourcing services that are not needed.

Youth Exiting Juvenile Rehabilitation

Before considering the reentry-related service needs of youth exiting JR, and the availability of these services, it's helpful to have an understanding of the general characteristics of youth exiting Juvenile Rehabilitation. Later in the report we'll

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provide detail on needs related to reentry services, but basic demographic characteristics of young people exiting from JR – such as age – have real impacts on their needs and on services available to them.

Scope - How Many Youth are We Talking About?

As the number of admissions to Juvenile Rehabilitation has declined, the population of JR has declined, as has the number of youth releasing. On January 19, 2022 there were 312 youth in residential custody with JR. Of these, 142 youth are anticipated to release in the remainder of calendar year 2022.

Demographic Characteristics of Youth Releasing

In the most recent fiscal year, FY2021, 339 youth released from JR (Table 1). The majority of these young people were male (93%) and the average age was nearly 18 years old. With the passage of [House Bill 1646](#), which allows young people sentenced in adult court for crimes committed under age 18 to go to JR until age 25, more youth committed to JR are serving adult sentences. Adult sentences made up 9% of the release cohort and make up 31% of youth currently in JR. This means that overtime the average sentence for a youth will be longer and they will be older upon release. That trend is starting to become apparent in the release data from the last four years (Table 1) as well as a nearly 20% increase in the average length of stay for youth releasing from JR since FY2018 (Table 2). We anticipate the proportion of youth releasing from an adult sentence, and the average length of stay, will increase as youth with longer sentences complete their stays and are included in the release metrics.

Table 1: Juvenile Rehabilitation Residential Releases by Fiscal Year

		SFY 2018	SFY 2019	SFY 2020	SFY 2021
Residential Releases		534	441	433	339
Average Age		17.47	17.6	17.66	17.93
Sentence Type					
	Regular	94%	94%	92%	91%
	Adult	6%	6%	8%	9%
Sex					
	Male	91%	88%	92%	93%
	Female	9%	12%	8%	7%
Race and ethnicity					
	American Indian/Alaska Native	9%	8%	7%	7%
	Asian/Pacific Islander	2%	3%	3%	2%
	Black/African American	25%	24%	22%	26%
	Hispanic	23%	24%	24%	27%
	Multiracial, Other	1%	1%	0%	1%
	White	37%	37%	40%	35%
	Unknown	2%	4%	3%	2%

Data Source: Juvenile Rehabilitation. (October 2021). Automated Client Tracking (ACT) [2018-2021].

WSRDAC/M Reporting Standard: Yes; AI/AN, Multiracial included in AI/AN counts and Black/African American, Multiracial included in Black/African American counts. Multiracial groups were also defined differently for releases during SFY18, which resulted in significant changes to the Multiracial, Other group.

Table 2: Length of Stay (in Days) for Residential Releases by Fiscal Year

	SFY 2018	SFY 2019	SFY 2020	SFY 2021
Average length of stay in JR facility	310	345	336	370

Data Source: DCYF Juvenile Rehabilitation. (August 2021). Automated Client Tracking (ACT) [2018-2021].

As has been well established in the national literature and reporting on the Washington State Juvenile Justice system (Hockenberry, 2020; WSPCJJ, 2020), youth of color are overrepresented in the population of youth in, and by extension releasing from, JR (Table 1).

Destination of Youth at Release

When considering historic releases (FY2020 & 2021), we see that young people are returning to nearly every county in Washington State (Figure 1) as well as counties in Oregon on the Washington / Oregon border (Figure 2). There are even a few youth who move to states other than Washington and Oregon after they exit from JR.

Figure 1: Washington Counties Youth Return from JR to (FY2020 & 2021)

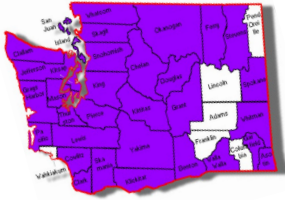
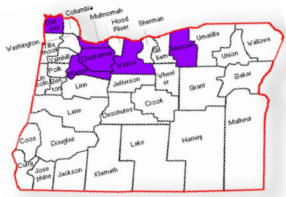


Figure 2: Oregon Counties Youth Return from JR to (FY2020 & 2021)



Within Washington State, the five most populated counties - King, Pierce, Snohomish, Spokane, and Clark - (Washington OFM, 2022) are also the counties where youth exiting from JR most frequently return (Table 2). Among the cities that the largest numbers of youth exiting from JR return to, only Yakima is not within the five most populated counties (Table 3).

Table 2: Counties with the Largest Number of Releases (FY2020&2021)

County	
King	59
Pierce	30
Snohomish	27
Clark	27
Spokane	22

Table 3: Cities with the Largest Number of Releases (FY2020&2021)

City	
Vancouver	23
Seattle	18
Spokane	17
Yakima	13
Kent	10

Community-Based Reentry-Related Services

The first step in conducting a landscape analysis and identifying service gaps was to determine what categories of community-based reentry-related services were needed. This was done through a limited review of existing literature on the topic, consultation with experts within Juvenile Rehabilitation - including the executive leadership, service providers and treatment experts, consultation with members of the Office of Innovation, Alignment, and Accountability Research and Evaluation team, and, most impactful, multiple consultations with members of the Community Transition Services Stakeholder Group. After multiple iterations, the Community Transition Services Stakeholder Group identified thirteen categories of services that they deemed essential to ensure a successful community transition for individuals exiting from JR. These categories are:

- Childcare
- Education
- Employment
- Financial Literacy
- Housing
- Independent Living Skills
- Legal Advocacy
- Mental health
- Parenting
- Physical Health
- Positive Relationships
- Prosocial Recreation
- Substance Use Disorder Treatment

Each category was discussed with the Community Transition Services Stakeholder Group and additional comment was requested outside of meeting times. While some of the reentry services needed by youth are specific to their incarceration – such as legal advocacy, many of the needs identified - such as prosocial recreation- were those of any young person transitioning through adolescence in to adulthood. While youth exiting the criminal justice system have unique needs, it is essential to also support the developmental needs that they share with all young people during this crucial transitional stage in life.

Childcare

Childcare is an essential service for any working or student parent. Connecting parents with child care allows them to safely leave their children while they pursue their career and educational goals. Quality early learning opportunities are beneficial to all children, and the children of incarcerated parents have been shown to have greater developmental needs than their peers (Burnson & Weymonth, 2019). In addition, some early learning programs, such as Mobility Mentoring, are designed to engage parents and have been shown to effectively teach parenting skills (Mobility Mentoring Outcomes, 2019).

Education

There is a well-established connection between educational attainment and future economic success (Tamborini, et. al., 2015) and reduced recidivism rates (Nutall, et. al., 2003). The importance of educational attainment is clear in the [DCYF strategic priority](#) to create “successful transitions into adulthood” which explicitly identifies high school graduation is a key outcome goal.

Employment

Evidence clearly indicates that employment reduces the risk of criminal offending among adults (Uggen and Staff, 2001) and employment is a crucial element of self-sufficiency. Employment continues to be a barrier for youth exiting from JR, driven in part by a lack of workplace experience and the presence of a criminal record.

Financial Literacy

Financial literacy skills are necessary for all young people as they transition in to adulthood. The [National Financial Educators Council](#) defines financial literacy “as possessing the skills and knowledge on financial matters to confidently take effective action that best fulfills an individual’s personal, family and global community goals.” Evidence suggest that rigorous high school financial education programs are correlated with fewer defaults and higher credit scores among young adults (Urban, Schmeiser, Collins, and Brown, 2018).

Housing

Housing is a basic need and the lack of stable housing can derail the effectiveness of services designed to address other primary needs. Youth exiting systems of care, such as JR, are at an increased risk of experiencing homelessness and addressing this has been a recent focus of the Washington State Legislature ([HB 6560](#)).

Independent Living Skills

Similar to financial literacy, independent living skills, including but expanding beyond the core curriculum of family and consumer sciences, are skills that all young people need as they transition in to adulthood. Incarceration limits youth’s exposure to develop many of these skills in a natural environment and, without a concerted effort, these skills can go undeveloped. These skills include making appointments, managing a home, navigating transit, and operating home appliances.

Legal Advocacy

Young adults with a criminal history have many, and diverse, legal advocacy needs. The Community Transition Services Stakeholder Group identified restitution, pending cases, court fines, school enrollment, child support/visitation, and record sealing as areas that young people commonly require legal advocacy support in.

Mental Health

While connected to physical health needs, mental health care is noted separately because the demand is high and requires a specialized resource beyond what can be addressed through a solution focused on physical health. The [United Nations Human Rights Council](#) identifies mental health as a human right and notes that society has moral and legal obligations to advance mental health care (UN OHCHR, 2008). In addition, there is a well-established body of literature noting the relationship between unmet mental health treatment need and recidivism (McReynolds, 2010).

Young people exiting from Juvenile Rehabilitation experience both structural barriers (e.g., waiting lists, transportation problems) and attitudinal barriers (e.g., perceptions that treatment will not help, belief that problem isn’t serious) that make accessing mental health services in the community challenging. They require support to identify and access resources in their community that allow them to maintain the treatment they received while in JR.

Parenting

For youth who are currently parents, building their parenting skills so they can be involved in their child’s life is an urgent need. Even for youth who are not currently parents, there is need to provide education on parenting and child development to prepare them for future parenthood (O’Donell Weber, 2019).

Physical Health

Health is a fundamental human right (WHO, 2017) and a component of health is access to health care. Adults with a primary care provider (PCP) report significantly better health care access and experience (Levine, et. al., 2019) and

identifying and maintaining a PCP is recommended practice. Having an established PCP allows young people exiting from JR to access preventive health services and maintain the services they received while in JR. Primary care providers also serve as resources to connect young people to specialists that can address their needs.

Access to many health care providers requires health insurance. Young people need support in identifying health insurance options available to them and completing the requirements to access these benefits.

Positive Relationships

Members of the Community Transition Services Stakeholder Group advocated strongly for supports for positive relationships. This included mentoring, as well as therapeutic supports to improve family functioning between the youth and their family and relationship counseling between the youth and their significant other. While research regarding the impact of formal mentoring programs for system-involved youth is mixed, there is clear evidence that young people who have positive relationships- characterized by a bond or emotional closeness- have better outcomes (DuBois, et. al., 2011) . For all people, regardless of involvement in the justice system, positive meaningful relationships have lifelong positive impacts (Vaillant & Mukamal, 2001; Landes, et. al., 2014).

Prosocial Recreation

Members of the Community Transition Services Stakeholder Group repeatedly noted that young people need a safe, prosocial, place for recreation. This recreation is an opportunity to build positive relationships and to focus their time and energy toward positive endeavors. While formal structures such as sports leagues, The Boys and Girls Club, and the YMCA were mentioned, the literature indicates that recreation does not need to be prescriptive and that supporting young people to connect with a group or hobby that is of interest to them is the key to supporting their engagement (see [OJJDP Pathways to Success Program](#)).

Substance Use Disorder Treatment

While connected to physical and mental health needs, substance use disorder treatment is noted separately because the demand is high and requires a specialized resource. When youth receive the appropriate level of substance use treatment, substance use and future criminal behavior can be effectively reduced (Mitchell, et. al., 2012). Similar to physical and mental health needs, young people exiting from JR need support to identify and access resources in their community that allow them to maintain the continuation of services they received while in JR.

Need

The next step to determine service gaps is to identify the level of need youth have within the thirteen categories of services. While there is a significant focus on the clinical needs of youth (identified here through assessments, screening tools, and healthcare data), it is important to also recall that youth exiting from JR are in their adolescence and young adulthood. While the clinical needs of this population are higher than their peers, it's essential to remember that they, like their peers, are at a developmental stage where they are learning and beginning to apply independent skills of 'adulthood'. These skills require supports as well.

Interpreting Target Populations

The intent of these estimates is to provide a rough idea of the number of young people in need of the thirteen categories of service. The analysis reported here relies on some original and some historic analyses so there is variation in the population parameters. For example, characteristics may be of entry cohorts. The most up to date information is presented whenever possible. We are inferring that the proportion of youth with a given need will remain relatively constant overtime, but we were unable to confirm this for all metrics.

The target population counts are based on the size of the most recent JR release cohort, 339 young people releasing in FY 2021. Using this population count may be a slight overestimate as the population continues to decline but it is challenging to project the size of an annual release cohort. For example, while at the time of this writing in January 2022 we're aware of 142 youth currently in JR who will be released in CY2022, there are youth who have yet to come to JR

during CY2022 and who will also release in CY2022. Applying the reported percentages to a known population group may be a useful planning exercise in the future.

Childcare

Approximately 11% of youth currently in Juvenile Rehabilitation are parents. It is well established that child care access and affordability are significant challenges for working parents. While the Department of Children, Youth and Families is committed to [expanding access to affordable, high-quality child care](#), the [2020 Washington State Child Care Industry Assessment](#) indicates that there is still a great deal that needs to be done to increase access.

Target Population: Youth exiting JR who are parents, 11% of releases
(≈37 youth)

Education

Currently there are not timely or accurate statistics on the educational status of youth as they enter Juvenile Rehabilitation or their outcomes as they exit. It is known that many justice involved youth are working from an educational deficit and that they have poorer educational outcomes (Gertseva & McCurley, 2019). The most recent published study on JR youth, a 2012 report by DSHS RDA, found that only 14% of 9th graders in JR had graduated from high school in the following six years, compared to a 79% extended graduation rate for the general population at that same time (Coker, et. al., 2012). Given the established link between educational attainment and economic success, combined with the low rate of high school completion, it appears that all youth exiting JR could benefit from educational supports. Even for youth who exit JR with a high school degree or GED, support for youth interested in accessing post-secondary education is important.

Characteristics of youth in JR have changed substantially over the last decade, as has treatment, and the impact on educational outcomes is currently unknown. Improvements to our understanding of the educational status and outcomes of youth exiting Juvenile Rehabilitation are anticipated to be better understood upon completion of the OSPI required reporting under [HB 1295](#) which, in turn, will allow us to refine the target population for reentry educational services.

Target Population: All youth exiting JR, 100% of releases
(≈339 youth)

Employment

Over half (60%) of youth who were over the age of 18 when they released from JR had some form of employment in the year after their release. A consistent pattern among youth that have obtained employment in the year after their release is that they work one or two quarters, rather than the entirety, of the year (DCYF, 2020). This indicates that even for youth who do find employment, there are barriers to maintaining it. There is some evidence that workforce certification programs currently offered to youth in JR have a positive impact on employment rates and earnings for youth upon their release (Fox, et. al., 2019)

Target Population: Youth age 18+ exiting JR, ≈65% of releases
(≈220 youth)

Financial Literacy

Financial literacy is a skill that all young people need to develop, making this a community-based, reentry-related service need of all youth exiting Juvenile Rehabilitation. With the increasing average age of youth releasing from JR (see Table 1), financial literacy for independent living becomes even more essential.

Target Population: All youth exiting JR, 100% of releases
(≈339 youth)

Housing

Stable housing is a barrier among youth exiting systems of care in Washington State. Among youth and young adults age 12-24 leaving JR and state corrections facilities, 10% experienced homelessness within 3 months of exiting and 26% experienced homelessness within 12 months of exiting (Mayfield, et. al., 2020). While this population includes young adults at DOC, not just JR, it is our best estimate of the unmet need for housing supports upon release. While three quarters (74%) of individuals were not known to have experienced homelessness, it does not mean that they didn't need, and receive, housing support services. We estimate that approximately 50% of youth could benefit from modest support in identifying housing resources and problem-solving barriers.

In FY21, 6% of youth exiting JR received direct housing rental assistance and another 6% received concrete housing goods such as supplies and housing items. In 2021 the average monthly cost of a studio apartment ranged from \$484 in Garfield and Lincoln Counties to \$1,523 in King and Snohomish Counties ([RentData](#)). The minimum wage in Washington State is \$14.49 hour ([WA L&I](#)). This means that in the most costly counties, youth would need to work over 100 hours a month (pre-tax), or approximately 60% of a full time job, simply to cover rent. This is well beyond the Federal Housing and Urban Development definition of rent burdened, meaning that more 30% of salary goes toward housing ([National Low Income Housing Coalition](#)). Given the lack of available housing (Inslee, 2022), let alone the lack of affordable housing, and the aging release population we anticipate this percent will be higher in future years.

Target Population: Youth exiting JR w/ rental assistance needs, ≈6% of releases
(≈20 youth)

Target Population: Youth exiting JR w/ concrete goods needs, ≈6% of releases
(≈20 youth)

Target Population: Youth exiting JR w/ modest housing supports, ≈50% of releases
(≈170 youth)

Independent Living Skills

Independent Living Skills are skills that all young people need to develop, making this a community-based, reentry-related service need of all youth exiting Juvenile Rehabilitation. With the increasing average age of youth releasing from JR (see Table 1), independent living skills become even more essential.

Target Population: All youth exiting JR, 100% of releases
(≈339 youth)

Legal Advocacy

Based on the wide range of legal advocacy needs identified by the Community Transition Services Stakeholder Group this appears to be a community-based, reentry-related service need of all youth exiting Juvenile Rehabilitation.

Target Population: All youth exiting JR, 100% of releases
(≈339 youth)

Mental Health

A recent analysis of Medicaid data indicates that 73% of young people exiting JR who received Medicaid services prior to their commitment had an identified mental health treatment need (Danielson, 2021). Thirteen percent of youth did not receive Medicaid benefits prior to entering JR, so the level of need may be even greater.

Target Population: Youth exiting JR w/ MH tx needs, ≈73% of releases
(≈247 youth)

Parenting

Approximately 11% of youth currently in Juvenile Rehabilitation are parents and nearly all youth have the potential to parent in their lifetime. The level and administration of resources needed for a current parent compared to a youth who may parent are significantly different, but both are valuable. Intensive services include [Early Childhood Intervention and Prevention Services \(ECLIPSE\)](#) which offers developmentally appropriate therapeutic programming for families and children who have endured complex trauma in early childhood and [Home Visiting](#) which offer voluntary, family-focused services for families with babies and young children to support the child's physical, social, and emotional health.

Even for youth who are not currently parents, there is need to provide resources to prepare them for future parenthood. Less intensive services, such as an introduction to parenting and child development, are universally beneficial. Over a quarter of youth in JR had one of more child welfare out of home placements prior to their admission to JR (DCYF, 2020), indicating a level of family dysfunction during their development. Supporting young people to understand child development and their role as a parent can help break the cycle of intergenerational incarceration and intergenerational child welfare involvement.

Target Population – Intensive Resources: Youth exiting JR who are parents, 11% of releases
(≈37 youth)

Target Population – Modest Resources: All youth exiting JR, 100% of releases
(≈339 youth)

Physical Health

Access to health care is something all young people need when exiting Juvenile Rehabilitation. Of youth released from JR in CY2019, 86% had Medicaid coverage within 3 months of exiting (Danielson, 2021).

Target Population: All youth exiting JR, 100% of releases
(≈339 youth)

Positive Relationships

The Community Transition Services Stakeholder Group identified prosocial recreation as a community-based, reentry-related service need of all youth exiting Juvenile Rehabilitation. In FY2021, upon entering JR, over a third (38%) of youth could not identify an existing positive relationship with an adult who was not a member of their family nor connected to them through school or employment.

Target Population: All youth exiting JR, 100% of releases
(≈339 youth)

Target Population – Intensive Resources: Youth exiting w/o adult community supports: 38% of releases
(≈129 youth)

Prosocial Recreation

Among youth entering JR in fiscal year 2021, a quarter (20%) of youth reported not being interested in being involved in structured activities and 40% reported being interested, but not involved. The remaining 40% of youth reported being involved in one or more structured activities. The Community Transition Services Stakeholder Group identified prosocial recreation as a community-based, reentry-related service need of all youth exiting Juvenile Rehabilitation.

Target Population: All youth exiting JR, 100% of releases
(≈339 youth)

Target Population: Youth exiting JR w/o established prosocial recreation, 60% of releases
(≈203 youth releasing in CY2022 as of 1/19/2022)

Substance Use Disorder Treatment

As noted in the recent report, A Snapshot of Current Juvenile Rehabilitation Youth: Substance Use Disorder & Treatment Needs (Cross, 2022) the two substance use disorder (SUD) assessments used in JR, the GAIN-SS and ASUA, are not reliably identifying SUD treatment needs of youth in JR. Historic estimates indicate that two thirds (67%) of young people were identified as benefiting from outpatient treatment (Miksicek, et. al., 2019). This estimate seems validated by a recent analysis of Medicaid data indicating that 59% of young people exiting JR who received Medicaid services prior to their commitment had an identified SUD treatment need (Danielson, 2021). A smaller, but undefined portion of youth require most intensive inpatient SUD services.

While some youth in need of SUD treatment receive treatment while in JR, not all do, and it is clinically advisable that even if youth complete treatment while in confinement they maintain some form of treatment support as they transition back to the community.

Target Population: Youth exiting JR w/ SUD tx needs, ≈53% of releases
(≈180 youth)

Services

An inventory of community-based, reentry-related services available to individuals exiting a Juvenile Rehabilitation facility does not currently exist. To respond to 10.1.b of House Bill 1186, the Department of Children, Youth & Families identified five typologies of existing resources that could be leveraged to develop an inventory of community-based, reentry-related services by geographic region (See Figure 3). These resources are:

- Existing DCYF contracts
- Staff developed inventories
- Community-based inventories
- Statewide inventories
- Direct to consumer inventories

While some of these inventories are explicitly designed to only include resources that youth reentering their community from Juvenile Rehabilitation can access, many existing inventories do not indicate if the provider is able, or willing, to serve young people with a criminal history. This is a crucial, but frequently missing, piece of information in service inventories. There are legal, eligibility, and discretionary reasons that some providers don't serve young people with criminal histories. Without this information, inventories that include services that are necessary to support youth reentry may overstate availability. This is a challenge for identifying available services and, by extension, determining the level of unmet need, but also has applied consequences as youth and their support systems attempt to identify available resources in their community.

Figure 3: Typology of Existing Service Inventories

	Existing DCYF Contracts	Staff developed inventories	Community-based inventories	Statewide inventories	Direct to consumer inventory
Example	Inventory of all existing DCYF contracts for re-entry services	Microsoft file on staffs computer or on a shared drive.	Pierce County Kids Mental Health Initiative	WA Department of Health Sex Offender Treatment Provider Directory	2-1-1 Information Network
Strength	Provider/contract or demonstrated ability to serve youth exiting the justice system	Providers demonstrate ability to serve youth exiting the justice system; JR staff have existing relationship	Localized resource list	Single Source for information; implicit guidance on qualifications	Providers self-identify to be included; geographic data is available
Limitation	Excludes providers DCYF is not currently working with / familiar with	Excludes providers DCYF is not currently working with / familiar with	Maintenance and process to identify services is not consistent; generally unclear if JR youth are eligible	Generally designed to only include licensed providers	Not specific to juvenile reentry; coverage is unclear and does not appear to be exhaustive of all services

Existing DCYF Contracts

One resource of community-based, reentry-related services available to individuals exiting a Juvenile Rehabilitation facility are the existing contracts DCYF has with community-based providers of reentry services. The contract specifies the service provided, and the presence of a contract indicates that the community-based provider is able to serve young people exiting a Juvenile Rehabilitation facility.

The limitation of using an inventory of existing contracts to determine the availability of community-based, reentry-related services is that it excludes all community-based providers offering reentry-related services who are not currently contracting with DCYF. This severely limits the number of providers in the inventory and has real implications to equity. As the 2022 [Executive Order 22-01](#) acknowledges, “minority-, women-, and veteran-owned businesses account for a disproportionately lower percentage of the billions of dollars that the state spends annually within the private sector for goods and services contracts.” Relying solely on existing contracts to identify available services excludes many providers from an inventory.

In addition to the insufficient scope, focusing on this population also presupposes that all re-entry work would be contracted through DCYF. DCYF’s goal is to ensure that services are available for youth as they reenter the community and that DCYF staff are aware of and able to assist youth to access these services. It is not the intent of DCYF that all services that assist with reentry be contracted through DCYF, so while an inventory of contracted services is a helpful resource, it is only a small portion of all the resources available, and needed, by youth.

Staff Developed Inventories

As a way to improve their service to individuals exiting a JR facility, some Juvenile Rehabilitation staff have developed lists of community-based reentry-related service providers. These documents can increase the efficiency of identifying local reentry-related services and are often based on established relationships rather than an exhaustive list of

resources. They are not formally shared, making them difficult to identify, and do not have a review or maintenance structure to ensure they are up to date.

Community-Based Inventories

Community inventories are resource lists created by communities to support an identified need. The definition of community is broad and can be a geographic region, such as the [Kids Mental Health Initiative](#) of Pierce County or the King County [Commercially Sexual Exploited Child \(CSEC\) advocate contact list](#), or can be topical such as the [Reentry Essentials directory](#) of resources for adults reentering society post-incarceration. In addition to the publicly available resources, there are likely informally maintained resources that are shared within communities. These resources exist in varying forms and there is variation in the level of maintenance. Given the turnover of providers, it is likely challenging to maintain these inventories.

An example of a topical inventory is the document "[Have a Juvenile Record? Plan for Your Future?](#)" (Pereira, 2017). This document, produced in 2017 by the National Juvenile Defender Center, with the assistance of TeamChild, The Annie E. Casey Foundation – Youth Advisory Council, and Immigrant Legal Resource Center, includes contact information for agencies in Washington State who support the legal, immigration, housing, and basic necessities of youth reentering their community after incarceration. Many critical services for individuals exiting a JR facility are identified in this robust document but, by design, the inventory is not exhaustive nor does it appear to have been updated since 2017.

Statewide Inventories

Statewide inventories are maintained by the State and are generally lists of state licensed providers. For re-entry programs that require licensure, these lists can be helpful in determining local resources, but they do not inform the presence of reentry services that do not require licensing. They also do not identify if providers are currently accepting clients and, if they are, if youth with a criminal history are eligible for services. While these inventories highlight global service gaps, they are not particularly informative in identifying available resources for individuals exiting JR.

Direct to Consumer Inventory

[Washington 2-1-1](#) is a phone and online connection to localized services including "utility assistance, food, housing, health, child care, after school programs, elder care, and crisis intervention." If a young person's reentry need is general, 2-1-1 is a potential source of connection to resources. 2-1-1 does include a category of "Ex-offender Reentry Programs", though as of March 2020 there were only nine resources listed statewide, most of which explicitly note they are for adults. Community providers are able to add their resource to the 2-1-1 inventory, but there is no clear way to export the entire inventory of provider information in 2-1-1.

The limitations of the typologies means none of these sources is a comprehensive inventory of community-based, reentry-related services. As a result, extensive work was conducted by DCYF to scope the feasibility of a community-based, reentry-related inventory of services available to individuals exiting a juvenile rehabilitation facility by geographic region and service. Because youth exit Juvenile Rehabilitation to nearly every county in the State, the development of an inventory of community-based reentry-related services, covering the 13 primary service types identified by the Community Transition Services Stakeholder Group and the entire geography of Washington, was beyond the capacity of DCYF. While attempts to accomplish this were made, the Community Transition Services Stakeholder Group noted that without ongoing review and maintenance the inventory would quickly become "stale" and would lose its utility. This concern seems justified. Many reentry services are offered by nonprofits and nonprofits frequently close or shift their service model. A 2020 report by the University of Washington indicated that 14% of nonprofits that were open in the three prior years were either no longer active, administratively dissolved, or voluntarily dissolved (Finchum-Mason, etl. al, 2020). Concerns over the feasibility of producing this inventory on a one-time basis and the warning from stakeholders that if investments were not made to maintain it that the inventory would have limited utility, dissuaded DCYF from committing significant resources to the development of this inventory. The need for this inventory remains, but DCYF was unable to create the capacity for that to occur.

The lack of accurate and accessible inventories of service providers, by geography and service type, have practical and strategic implications for the implementation of HB 1186, as well as for other initiatives that seek to connect individuals with community-level resources.

Geographic Region

While the desire was to provide a landscape of “community-based, reentry-related services... by geographic region” the barriers to creating an inventory of reentry-related services made it impossible to develop geographic indicators of services. Figures 1 and 2 and Tables 2 and 3 do provide information on where the largest number of youth are reentering the community to.

Some historic work does exist that can help inform planning though. For example, a 2015 study in response to [HB 2536](#) found insufficient capacity in most regions of the state to meet the local mental health treatment needs of youth (Walker, et. al., 2015). This report provides regional indicators of youth mental health deserts, by mental health treatment needs, from FY2013.

When discussing services by geographic region, it is worth highlighting that many services that historically were offered in person have found success in a virtual space in the last few years. While geography will remain a key element in determining where to focus resources, supporting the remote provision of services should also be explored.

Recommendations

The Department of Children, Youth & Families recommends supporting providers in the thirteen identified categories of services that were deemed essential to ensure a successful community transition for individuals exiting from JR. This includes adequate funding to compensate for services as well as supporting educational and training pathways to build the service provider workforce.

The Department of Children, Youth & Families recommends targeting two, Housing and Mental Health, of the thirteen categories of services for a focused expansion in FY2023. Lessons from this work will be used to expand the remaining 11 services areas in the subsequent biennium.

The Department of Children, Youth & Families recommends providing incentives to community-based reentry-related services to encourage serving young people with criminal histories.

The Department of Children, Youth & Families recommends funding evaluation of community-based, reentry-related services to determine the efficacy of programs and prioritize offering effective services.

The Department of Children, Youth & Families recommends that the legislature designate a statewide entity to lead the development, maintenance, publication and dissemination of community-level inventories of reentry-related services available to individuals exiting a Juvenile Rehabilitation facility. To ensure efficiency and product standardization, coordination would occur at the state level but products will be produced at the community level. The need for an inventory of interventions is a frequently identified barrier. The 2019 report, [Families and Youth in Crisis](#), notes that a common barrier for expanding primary prevention interventions for conflict reduction is ensuring community members and stakeholders are aware of available services. The authors note that “Ensuring the existence of up-to-date resource listings that are accessible in real-time through contemporary modalities will provide youth and families with a clear inventory of available resources and will allow service providers ease in referral without having to maintain internal lists of resources. Additionally, development and maintenance of local inventories will help to identify service gaps.”

DCYF gratefully acknowledges funding appropriated by the Legislature for the CTS program in support of community-based, reentry-related services.

Landscape Analysis Recommendations

Recommendation 1: Prioritize funding and building a provider base of reentry services in the 13 priority areas identified by the Community Transition Services Stakeholder Group

Recommendation 2: Target expansion of two categories of services in CY2023 with expansion of the remaining eleven in the subsequent biennium.

Recommendation 3: Provide incentives to community-based, reentry-related services that accept youth with a criminal history.

Recommendation 4: Fund evaluations of community-based, reentry-related services.

Recommendation 5: Designate a statewide entity to lead the development, maintenance, publication and dissemination of community-level inventories of reentry-related services available to individuals exiting a juvenile rehabilitation facility. To ensure efficiency and product standardization, coordination would occur at the state level but products will be produced at the community level.

“We are most successful when we look at the youth’s strengths first, even if they are having struggles in life, and build from there.”

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