July 1, 2018 to June 30, 2021 Nebraska's Panhandle Comprehensive Youth Services, Juvenile Justice and Violence Prevention Plan

For the counties of:

Banner, Box Butte, Cheyenne, Dawes, Deuel, Garden, Kimball, Morrill, Scotts Bluff, Sheridan, and Sioux Counties

Chairpersons and contact information found on the following page.

Facilitated and completed through collaboration of the Panhandle Partnership, Inc.

County Board Chairpersons

County	Chairman	County Address	County Phone
Banner	Robert Gifford	3720 Road 34 Gering NE 60341	308.225.1953
Box Butte	Mike McGinnis	1512 W 3rd Street P.O. Box 578 Alliance, NE 69301	308.760.8176
Cheyenne	Darrell J. Johnson	1104 Linden St. Sidney, NE 69162	308.254.3526
Dawes	Jake Stewart	451 Main Street Chadron NE 69337	308.432.6692
Deuel	William Klingman	16124 Rd 14 Chappell, NE 69129	308.874.3290
Garden	Casper Corfield	4685 Rd 199 Lewellen NE 69147	308.772.3924
Kimball	Larry Engstrom	5310 Rd 52 N Kimball NE 69145	308.682.5629
Morrill	Jeff Metz	11830 Rd 95 Bayard, NE 69334	308.262.1351
Scotts Bluff	Mark Masterton	2410 4 th Avenue Scottsbluff NE 69361	308.436.6600
Sheridan	Jack Andersen	1334 Gifford Ave Lakeside, NE 69351	308.762.1784
Sioux	Joshua Skavdahl	961 River Road Harrison NE 69346	308.665.2558

II COMMUNITY TEAM

Description

The Panhandle Partnership, Inc. (PPI) is the overarching collaboration for this community team. PPI was formed as a 501 (c) 3 in 1998. Membership is open to any individual or agency located in or serving the Panhandle of Nebraska. PPI does not provide services but rather exists to provide infrastructure for enhancement of effective regional collaboration. Membership is not required to participate in activities.

Purpose

The purpose of PPI is:

- promote communication of area data, services and opportunities
- conduct regional assessments and planning
- share resources and training
- collaborate in creative planning
- evaluate for regional impact and outcomes
- prioritize and create regional goodwill
- advocate for policy changes to meet the needs of our rural area

In recent years, this work includes the ongoing collaboration for assessment, planning, and evaluation of regional efforts for children and youth including:

- Community Health Improvement Plan through the Panhandle Public Health District (2017)
- Connected Youth Initiative for Older Youth 16-24 (2015-2018)
- Panhandle Early Learning Connections Partnership Training Plan (2015-2018)
- Circle of Security Parenting Education- Regional Plan and Implementation (2015-2018)
- Community Response Implementation (2015-2018)
- Panhandle Prevention Coalition (2015-2018)
- Social Enterprise Implementation (2015-2018)

This continual development and refinement of prevention and early intervention systems is essential to rural sustainability. PPI currently manages the following grants as part of regional efforts:

- School-Community Partnerships (TEAMS, FAST)
- Community Response
- Youth Entrepreneurship
- Child Well Being -Circle of Security Parenting
- Lifespan Respite Services
- Social Enterprise
- Youth Enterprise
- Connected Youth Initiative
- Panhandle Prevention Coalition (2015-2017)
- Suicide Prevention (2015-2016)

Board of Directors

Panhandle Partnership currently has 17 board members representing its broad membership. Board representatives currently include representatives of: Panhandle Public Health District, Region I Mental Health, Region I Behavioral Health, Region I Area Office on Aging, Region I Office of Human Development, Area Health Education Center, Western Nebraska Community College, University of Nebraska Extension, Educational Service Unit #13, Western Community Health Resources, Nebraska Department of Health and Human Services, Disability Rights Nebraska, SPEAK Out, and Community Action Agency of Western NE (CAPWN).

Membership Meetings

PPI general membership initially met monthly. However, as the complexity and span of partnership activities has increased and participant time has decreased, taskforces and special project workgroups have become more active and general membership meetings where all work is brought together occur at least three times a year.

PPI is structured to promote a "system" approach to regional development. These work groups are as follows:

- Prevention System of Care for Children 0-8 and Families
- System of Care for Children and Youth 12-18 and Families
- System of Care for Older Youth 16-24
- Lifespan Respite Committee
- Panhandle Prevention Coalition
- Social Entrepreneurship

Structure for Juvenile Justice Assessment and Planning

The Panhandle Partnership workgroup for Youth and Families 12-18 provides the structure for the ongoing assessment and planning of Juvenile Justice in the Nebraska Panhandle. Meeting times are coordinated with other stakeholder workgroups (Panhandle Prevention Coalition, Connected Youth Initiative for Older Youth) to reduce travel and meeting duplication. It is noted that continued action for regional implementation will occur through the above work groups. The Panhandle Partnership provided the facilitation and documentation for the planning process.

Comprehensive Assessment and Plan Process

The following schedule of events occurred in conjunction with the assessment and planning processes.

DATE	EVENT	ACTION
November 4th, 2016	Preparation for Assessment and Planning Kickoff	 Review and compile documents Contact JJI for data Contact Panhandle evaluator for additional regional data Meeting schedule and announcements Develop planning tools and formats
January 20th, 2017	1st Assessment Session Prairie Winds Community Center Bridgeport NE	 2 hour meeting with overview and review of past plan Review and affirm previous plan foundations, principles, and framework School resource officer/social worker Panel Discussion
February 17th, 2017	2 nd Assessment session Prairie Winds Community Center Bridgeport NE	 Review of Data Law Enforcement Panel Discussion Break Out groups for Primary Prevention, Secondary Prevention, and Community Interventions to assess available data and determine data gaps
March 17th, 2017	3 rd Planning Session Prairie Winds Community Center Bridgeport NE	 Vote on 2017-2018 Community-based Aid Grant Applications County Attorney and Judge Panel Discussion Break Out groups for Primary Prevention, Secondary Prevention, and Community Interventions to develop revisions to respective sections.
April 21st, 2017	3rd Planning Session Prairie Winds Community Center Bridgeport NE	 Break Out groups for Primary Prevention, Secondary Prevention, and Community Interventions proposed revisions to respective sections. Community team voted to approve revisions

June 9th, 2017	4 th Planning Session Conference Call	Break out groups for Detention and Backbone Organization met via conference call to develop revisions to respective sections
June 16th, 2017	5 th Planning Session Prairie Winds Community Center Bridgeport NE	 Community team voted to approve Detention and Backbone Organization revisions Determined next steps: schedule dates to get plan signed off by individual counties
June - August 2017	Final Plan Writing	 Determined that services and community capacity assessment needs to be ongoing. Determined capacity is needed to track all agencies and service addresses.
September 15th, 2017	6 th Community Planning Team meeting	Review and approve draft of final 2018-2021 Plan
October - December, 2017	Community members present plan to county boards.	County Board review and sign Letters of Agreement adopting the plan.

Regional Team Members

Participation in this process was open to any person in the Panhandle. Meetings were advertised through numerous list serves.

Charles Browne	Morrill County Diversion
Mary Wernke	Box Butte Family Focus Coalition
Elizabeth Borgmann	Cheyenne/Deuel County Diversion
Lanette Richards	Monument Prevention Coalition
Mindy Baird	Disability Rights Nebraska
Zach Preble	Central Plains for Services
Elizabeth MacDonald	Scottbluff County Juvenile Assessment Center
Stacey Murphy	Scottsbluff County Diversion
Jim Lawson	Scottsbluff County Diversion
Deb Shuck	Community Action Partnership of Western NE
Betsy Vidlak	Community Action Partnership of Western NE
Stan Bills	Snow Redfern Foundation
Sandy Roes	Western Community Health Resources
Kortni Zeiler	DOVES
Sherry Retzlaff	Sheridan County Coalition
Tabi Prochazka	Panhandle Public Health District
Crystal Espino	Community Action Partnership of Western NE
Brenda McDonald	Region 1 BHA
Faith Mills	Region 1 BHA
Valerie Wade	Region 1 BHA
Tyler Irvine	Panhandle Partnership
Cheri Farris	Panhandle Public Health District
Judy Soper	Deuel County Coalition
Dustin Amack	Community Action Partnership of Western NE
Roger Wess	Citizen of Chadron, NE
Erin Carter	Community Action Partnership of Western NE
Rose Brassfield	Volunteers of America - Garden County Coalition

III COMMUNITY INDICATORS

Geographic Area

The Panhandle of Nebraska consists of the 11 rural and frontier counties in the far west one-third of the state. They include Banner, Box Butte, Cheyenne, Dawes, Deuel, Garden, Kimball, Morrill, Scotts Bluff, Sheridan and Sioux counties and the communities of Harrisburg, Alliance, Hemingford, Sidney, Dalton, Potter, Lodgepole, Chappell, Crawford, Chadron, Marsland, Big Springs, Oshkosh, Lisco, Lewellen, Kimball, Bushnell, Dix, Bridgeport, Bayard, Redington, Henry, Morrill, Mitchell, Scottsbluff, Gering, Minatare, Hay Springs, Rushville, Gordon, Whiteclay and Harrison.

The 14,810 square mile area is bordered by equally remote areas of South Dakota (north), Wyoming (west) and Colorado (south).

Regional Data

Three main data sets were used in the development of the plan.

County Juvenile Justice Data provided by the Juvenile Justice Institute is found in Appendix A: County Juvenile Justice Data. This data is not comparative county to county due to incomplete reporting by counties. This gap in data is of concern since neither unmet need nor quality can be measured. Regional progress requires comparable regional data. It is noted that since the last Comprehensive Juvenile Services Planning processes some of the counties have determined not to report Juvenile Arrest rates.

The data elements contained in the County Juvenile Justice Statistics include:

- Youth by Ages
- Calendar Year 2015 Juvenile Arrests
- Calendar Year 2012-2015 Referrals to Diversion
- CY 2012-2015 Youth Enrolled in Diversion
- CY 2012-2015 Reason for Non Enrollment
- CY 2012-2015 Outcomes for Juvenile Diversion
- CY 2012-2015 Youth in Detention Arrested in the County
- CY 2012-2015 Youth in Kearney and Geneva

The Scotts Bluff County report also contains detailed information about youth in the detention center from all referral sources, in and out of region. This information is needed on a county basis within the Panhandle.

Schmeekle Research Inc. provided a foundational demographic document which included the Child Well Being Indicator, Youth Risk and Protective Factor data, and additional Educational data which may all be used to measure the well-being of youth in the Panhandle. As the Child Well Being Indicators were determined by a statewide interagency group the data elements, including trend data, are comparative between

counties. The following are included in this report. This data is found in <u>Appendix B Child Well Being Data</u>.

Demographic Data

Total Population Under 18 Populations

Population by Age Category and Percent of Total (2012)

Poverty Rates for the Under 18 Population

Nebraska Children and Families Foundation Child Well-Being Indicators

Number and rate of infant deaths per 1,000 live births

Number and percent of births to teen mothers

Number and rate of juvenile arrests per 1,000 population

Number and rate of substantiated cases of child abuse/neglect per 1,000 population

Number and rate in Foster Care per 1,000 population

High school graduation rate

Percent households with children ages 5 and over speaking a language other than English at home

Percent of population below Poverty

Percent of children living in single parent households

Percent of third grade children proficient in reading at grade level

Risk and Protective Factor Data

Past 30-Day Alcohol Use: Panhandle and Nebraska Youth

Past 30-Day Binge Drinking: Panhandle and Nebraska Youth

Past 30-Day Cigarette Use: Panhandle and Nebraska Youth

Past 30-Day Marijuana Use: Panhandle and Nebraska Youth

Past 30-Day Prescription Drug Use: Panhandle and Nebraska Youth

Lifetime Prescription Drug Use: Panhandle and Nebraska Youth

Lifetime Hallucinogenic Drug Use: Panhandle and Nebraska Youth

Lifetime Cocaine Use: Panhandle and Nebraska Youth

Lifetime Meth Use: Panhandle and Nebraska Youth

Past Year Alcohol Impaired Driving: Panhandle and Nebraska Youth

Rode in a Vehicle Driven by Someone Who Had been Drinking Alcohol in the

Past 30 Days: Panhandle and Nebraska Youth

Youth Reporting Instances of Bullying During the Past 12 Months: Panhandle and Nebraska Youth (2012)

Public Schools Statistics

Student Population Totals
Percent Minority
Percent Receiving Free/Reduced Price Meals
School Mobility Rate
English Language Learners
Students Receiving Special Education Services
Attendance Rate
Dropout Rate
Four-Year Graduation Rate

Age of Foster Care Youth

The full Region I Nebraska Risk and Protective Factor Survey Report for 2016 is contained in <u>Appendix C: Region I 2016 NRPFS</u>.

Community Service Assessment

An assessment of an array of youth services began during the 2015-2018 planning process. It quickly became clear that compiling and maintaining an accurate assessment requires extensive resources and effort. However, the process of identifying the areas of youth services and the components of those areas was invaluable to educating the team members as to the scope and type of resources needed in each area of the youth system spectrum. This exercise also helped partners see the inter-related components of the system. The assessment is hosted on the Panhandle Partnership's website at: https://panhandlepartnership.com/directory/

Community Collaborative Capacity

The Panhandle enjoys extensive community collaboration as a result of its frontier culture and years of regional development through the Panhandle Partnership. Long before Stanford published its seminal article "Collective Impact", the Panhandle had adhered to a very similar framework for collaboration. The tenants of Collective Impact have been formally integrated into the Panhandle Partnership as follows:

Common Agenda

In 2013, PPI adopted a new overarching vision statement.

Collective impact for thriving and equitable communities

Each project of the Panhandle Partnership is defined with a mission statement, guiding principles and definitions. The definition and guiding principles of the Comprehensive Youth Services, Juvenile Justice and Violence Prevention Plan is found at the beginning of the plan.

Shared Measurement Systems

The Panhandle has been collecting and using common data sets for years. National, State, and regional data is collected and used in assessments and plans such as:

- Child Well Being Indicators (trend data)
- Youth Risk and Protective Factors (trend data)
- Public Health: Community Health Needs Assessment, Community Health Improvement Plan, County Health Rankings
- Juvenile Services Plans

In addition, Panhandle Partnership undertakes robust evaluations including those for:

- Circle of Security Parenting
- School Community Partnerships
- Community Response
- Panhandle Prevention Coalition
- Systems of Care for Older Youth (Connected Youth Initiative)
- Collaborative Capacity (Collective Impact Factors)

Continuous Communication

PPI has a robust communication system including a 300-person listsery, a Training Academy listsery, and the Panhandle Partnership website.

Mutually Reinforcing Activities

A significant factor in the on-going strength of the Panhandle Partnership is the member commitment to aligning resources toward common goals. For example:

- In 2016-17 the Training Academy had 88 different trainings which were provided to 1,428 enrollees resulting in a total of 11,854 contact hours in training.
- During the same timeframe, Panhandle Partnership obtained \$578,500 in leveraged resources to be used collaboratively by partners toward common outcomes.
- An additional \$1,232,500 in aligned resources was designated by partners toward these common objectives.
- A firm practice of the region is to not develop any initiative or project that cannot be sustained. As a result, the region has developed shared practices for cross training, a focus on system change and policy change for more effective outcomes at a lower cost, and continuous quality improvement imbedded in each project.
- Two central navigators are established in the Panhandle with one serving families with children 0-14 and the other serving unconnected youth ages 16-24. Central

- navigators are an essential function to collaborative service systems by providing ease of access and coordination of community resources.
- Resource directory: Panhandle Partnership hosts and updates a Resource Guide available to all interested parties. This is hosted on the Panhandle Partnership website (www.panhandlepartnership.com)

Backbone Organization

Within the Collective Impact framework, the Panhandle Partnership serves as a regional backbone organization. Panhandle Partnership does not provide services but serves as a hub for cross-sector collaboration. Panhandle Partnership leads collaborative assessment and planning for initiatives that enhance the region.

- The 45 member organizations and agencies schools, nonprofits, health care, public health, community action, colleges, community groups whose staff and directors (over 150 people) provide more than 2000 hours of volunteer time each year to effective regional collaboration.
- Panhandle Partnership Training Academy is operated in conjunction with Western Nebraska Community College. The mission of the academy is "To build an upwardly mobile workforce with local talent, by providing credible, meaningful, consistent and affordable education/training which results in an extraordinary service system." In 2016-17, 11,954 contact hours of training were provided on topics such as Early Learning Guidelines, Responsible Beverage Servers, Family-Centered Practice, Trauma Informed Care, Fair Housing, and Motivational Interviewing.
- Prevention Coalition Prevention Coalition, a committee of the Panhandle
 Partnership, consists of regional partners and county based coalitions (Banner, Box
 Butte, Cheyenne, Dawes, Deuel, Garden, Morrill, Scotts Bluff, Sheridan, and
 Sioux) working to create tobacco-free places and to reduce adolescent use of alcohol
 and drugs, binge drinking, and drinking and driving through enforcement in laws
 and change in local policies.
- During 2016-2017, Panhandle Partnership provided support to Community-based funds applications. Eight (Banner, Box Butte, Cheyenne, Dawes, Deuel, Morrill, Sheridan, Scotts Bluff) of the eleven counties completed applications for 2016. The remaining counties have been provided additional information in preparation for the upcoming applications.

2018- 2021 Comprehensive Youth Services, Juvenile Justice and Violence Prevention Plan

Foundations

The 2018-2021 Panhandle Comprehensive Youth Service, Juvenile Justice and Violence Prevention Plan (Youth Services Plan) represents a systems approach to youth services. It was developed to cut across agencies and domains and address the system needs of youth in rural Nebraska communities. The plan ranges from prevention services, which are the front line in strengthening resilience for all youth, through to youth transition services for youth 16-24, who have been in systems and are on their own trying to reach successful adulthood.

During the 2015-2018 planning process, some participants strongly felt that prevention must begin at a younger age than 12. In this region, there is a robust prevention system (the System of Care for Children 0-8 and their Families) which plans and provides for early childhood approaches, including:

- Home Visiting Programs for children 0-3 through 0-5 (depending on the program) and their parents.
- Circle of Security Parent Education, which is an international parenting course recognized as a promising practice. This regional approach to parenting is led by a team of trained parent educators and Dr. Mark Hald.
- Community Response for parents at risk of neglect or higher system involvement. Community Response is a voluntary service that supports families to meet basic needs and strengthen protective factors.
- Community School Partnerships including Families and Schools Together (FAST) in Dawes County which transitions pre-school children and their families to kindergarten, and TEAMS for first generation Hispanic youth and their families to assure high school completion and access to higher education.
- Panhandle Early Learning Connections, which plans and implements training for childcare providers to improve the quality and response of the child care system and which offers three early childhood conferences each year.

The System of Care 0-8 continues to assess and develop resources to meet the needs of the region. Certainly, the long-term successes of these resources will impact the Youth Services System.

The System of Care for Older Youth 16-24 does similar detailed work at the back end of the Youth Services continuum. This group focuses on Transition Services for youth. An outline of the currently funded system is attached in <u>Appendix E: Transitional Services for Youth 16-24 Framework</u>. Many of the youth in this service sector are young parents.

For the front end part of the Youth Services 12- 18 System, it is the desired intent that these services can be accessed without a youth having to enter the Juvenile Justice system or DHHS. Mental Health services for youth are especially important.

There are service sections in the plan that are very intensive and costly and would not necessarily be developed in an individual county or perhaps even the region due to volume and cost. However, the capacity to serve these youth in a timely effective manner impacts the entire system.

The Panhandle desires to be involved in statewide development of these higher-end services and in policy which impacts, and hopefully improves, access to youth service including the change of policies for access to youth specialist mental health services.

It is important to note this plan requires funding by multiple systems. The spectrum of the plan, from Prevention to Transitional Services is interrelated, requires braided and aligned funding, and is essential in providing youth with opportunities that deter youth from higher end system involvement.

In completing the assessment and planning process, the team utilized and drew from <u>Improving the Effectiveness of Juvenile Justice Programs</u> (Lipsey et al 2010) for a structure both to the assessment and the plan.

Guiding Principles

During the assessment and planning process the team developed and affirmed the following:

Panhandle youth services adhere to the Child and Adolescent Service System of Program (CASSP) principles that youth services are:

- child-centered,
- family focused,
- strengths-based,
- culturally competent
- provided in the least restrictive appropriate setting

The Panhandle Youth Services system works between service sectors to provide a continuum of youth services for young people 12-24. The Panhandle Youth Services system envisions a system which:

- Provides strengths and assets based services.
- Where youth flow seamlessly between systems without falling through the cracks.
- Provides the right services at the right time.

- Is a continuum of services which is accessible geographically
- Assures that services are evidence based and evidence informed.
- Promotes policy that decreases barriers so that youth may be served without having to enter high-end systems.
- Values community ownership
- Demonstrates accountability through shared data, assessments, planning and evaluation.
- Uses Continuous Quality Improvement (CQI) to improve outcomes and processes
- Believes that the best outcomes for youth will occur through a system of flexible funding that follows the youth.
- Promotes safety and inclusion for the most vulnerable of youth by race, ethnicity, gender, socio- economic status, and gender identity.
- Promotes the professionalism of youth services workers through shared training.
- Has a central referral and navigation component regardless of referral source.
- Is vibrant, adaptable and current.

Youth Indicators

The assessment and planning team also reviewed outcomes for successful youth transitions to adulthood and adapted concepts from the following:

The Center for the Study of Social Policy Youth Thrive Protective and Promotive Factors for Well Being has been developed as a framework for addressing trauma and adverse childhood experiences. The one page diagram and additional explanations clearly outline avenues for working with youth who have been victims of trauma and adverse childhood experiences. This model serves well as a foundation for cross-system goals and evaluation for outcomes for individual youth services.

The Jim Casey and Nebraska Children and Families Foundation framework for the Transitional Services for Youth is a focus for what every youth requires an opportunity to become successful as adults. The domains for development are an important focus for youth services, especially for youth without family supports. The eight domains are:

Housing:

- Result indicator: Youth resides in housing that is safe and stable.
- Result indicator: Housing is able to be retained by youth.

Education:

 Result indicator: Youth has minimally received a GED or High School Diploma at exit from program. We encourage and support youth to aim higher.

Employment:

• Result indicator: Youth has held a job for 90 days. The aim is that the job has a living wage and support for healthcare.

Daily Living Skills/Resources:

 Result indicator: Youth has obtained and demonstrated the skills to thrive independently.

Health Care and Mental Health Care:

- Result indicator: Youth has the capacity to access needed health and mental health resources.
- Result indicator: Youth understands and places priority on wellness, basic health and needed mental health services.

Permanence and Belonging:

- Result indicator: Youth has at least three trusted, informal supports that can be relied on in times of crises and positive celebration.
- Result Indicator: Youth has informal supports capable of providing guidance and legitimate supports to meet physical, emotional, and spiritual needs.

Economic Stability:

• Result indicator: Youth has skills and resources available to meet daily living requirements for ongoing education or work.

These two efforts provide additional evidence-based framework for the system development in the Panhandle and will be used in the ongoing design of data collection and evaluation.

The programmatic and youth specialist foundations of thriving youth and the policies and practices which lead to such success must be integrated into the system from the onset. Practices and skills such as a commitment to youth thriving, positive youth development, trauma informed care, and developmental assets must be the foundations for prevention and be sustained through transition services.

Definitions

One of the challenges encountered in the development of a cross-system plan is establishing common definitions. Throughout the assessment and planning process, team members educated each other on the language within their system.

A goal of the next two years is to develop a full glossary of terms and putting more common definitions in writing.

Some of this work has been undertaken in establishing the framework for this plan. Definitions that are provided have been agreed upon by the diverse team.

2018-2021 System and Services Priorities and Strategies

PRIORITY AREA: PREVENTION

<u>Definition:</u> Community-based primary prevention efforts (programs, policies and practices) aimed at reducing risks and promoting strengths for all youth. These resources are evidence-based or evidence-influenced services which facilitate resilience and promote healthy lifestyles, informal support systems, educational, and employment skills.

Array of Programs, Policies and Practices

The array of programs, policies and practices which pertain to this area address the following:

- access to community recreation
- adolescent pregnancy prevention
- basic personal finance
- conflict resolution and bullying prevention
- community recreation opportunities
- dating and relationships

- employment readiness
- faith-based youth groups
- financial fitness
- healthy living: nutrition
- healthy living: physical activity
- individual development accounts (18+)
- parenting programs
- motivational reinforcements

- out of (after) school time programs
- positive youth development/youth leadership
- rental education
- resume building
- substance use prevention
- suicide prevention

Priority 1: An array of accessible strength-centered, evidence-based or evidence-informed programs, polices or practices which promote resiliency and youth-thriving indicators

Strategy 1: Resources and scholarships are available to assist youth in participating in an array of community activities and recreational resources

Strategy 2: Regional educational campaign to increase awareness of the importance of inclusion of lesbian, gay, bisexual and transgender youth in communities

Strategy 3: Encourage and support parenting education Actions:

3.1 Address local need for age appropriate parenting programs and for a method to implement including best times, days and locations to meet needs of parents

3.2 Expand Circle of Security Parent Education for families of teens through agreement with the creators and including a research component for further evidence documentation

Strategy 4: Promote community assessment, dialogue, and awareness of weapons safety pertaining to school, community, and self-harm situations

Strategy 5: Encourage mental health and wellness promotion through school and community partnerships initiatives, development of conflict resolution, self-awareness and personal responsibility skills

Strategy 6: Partner with schools in assuring resources for mental health and behavioral education and training for educators

Strategy 7: Implement prevention programs, policies and practices based on local community plans and data.

Actions:

7.1 Local communities/counties develop a priority action plan from the Priorities and Strategies in the Comprehensive Youth Services Plan 7.2 Communities/Counties share the local action plan with the Regional Youth Services Team to support regional tracking and common efforts

Strategy 8: Provide training for agencies, systems, and schools that supports the needs of youth.

- 8.1 Mental Health First Aid
- 8.2 Evidence-based programs, policies and practices.
- 8.3 Autism Spectrum Disorder
- 8.4 Darkness to Light
- 8.5 Adverse Childhood Experiences
- 8.6 Substance use prevention
- 8.7 Adolescent Brain Development
- 8.8 Youth Thrive
- 8.9 Question, Persuade, Refer (QPR)
- 8.10 Trauma Informed Care
- 8.11 Any other additional qualified trainings

PRIORITY AREA: SECONDARY PREVENTION

Definition: Focused secondary prevention programs for youth in the community at greatest risk but not involved with the juvenile justice system or, perhaps, diverted from the juvenile justice system. These strength based resources enhance resilience and protective factors.

Array of Programs, Policies and Practices

The array of programs, policies and practices which pertain to this area address the following:

- activity memberships
- adolescent mental health counselors
- alternative schools
- anger management classes
- daily living skills
- Diversion
- employment readiness skills
- gang prevention programs
- general education classes
- ged testing fees

- educational supports
- family support
- job coaching
- Juvenile Assessment Center
- mental/behavioral health assessments
- mentors
- navigators
- peer support families
- peer support youth
- relationship violence supports
- school resource officers
- mediation
- school community improvement plans

- safe place designations
- substance use assessments/tests
- substance use education and support
- suicide prevention services
- teen parenting programs
- transportation
- truancy programs
- tutoring
- youth crisis alternatives
- 1184 treatment teams

Priority 1: Coordinated and integrated youth-driven, family-centered Secondary Prevention programs, policies, and practices are available through multiple funding sources and without requiring access to higher end systems

Strategy 1: Maintain and utilize a common database of high-risk youth populations by county to identify and address gaps and needs for evidence based practices and resources

- 1.1 Review data to identify groups of children, youth who may be falling between the cracks
- 1.2 Prioritize the use of a relevant portion of braided prevention and community funds for secondary prevention for at risk populations

- 1.3 Establish regional information and referral system infrastructure to maximize timely use of services, track utilization, and improve outcomes for youth
 - 1.4 Increase data sharing
- Strategy 2: Develop group-based secondary prevention services to increase positive peer cultures that support behavior change and are cost effective
- Strategy 3: Develop and enhance local diversion programs and the juvenile assessment center to provide individualized secondary prevention services based on the screened risks and strengths of youth

Actions:

- 3.1 Provide regional training and local support to enhance diversion programs and the juvenile assessment center
- 3.2 Provide regional templates for documentation of individualized diversion programs
- 3.3 Encourage the use of a portion of Community Based funds for individualized diversion services fees where such fees are prohibitive to families
- 3.4 Assure that youth who are referred to community service diversion can function in and benefit from this resource
- 3.5 Prior to commencing community service meet with community service entity to establish expectations and special requirements with the youth
- 3.6 Promote Restorative Justice programming
- Strategy 4: Common basic training and skill sets for Youth Specialists working with high-risk youth in community based settings

Actions:

- 4.1 Establish the 40-hour core curriculum within the Training Academy using web-based training as able to improve access for all new employees.
- 4.2 Provide Trauma Informed Care training for Youth Specialists
- 4.3 Youth Thrive Training
- 4.4 Other trainings identified by county/program
- Strategy 5: Implement wraparound services with fidelity for any youth or family receiving individualized services from more than one agency, or programs within one agency.

- 5.1 Provide regional Wraparound training
- 5.2 Establish a regional Wraparound fidelity process

Strategy 7: Implement prevention programs, policies and practices based on local community plans and data

Actions:

7.1 Local community councils develop plans to apply for funding and sustain need prevention programs

Strategy 8: Partner with like entities to address access disparities for Behavioral Health services due to insurance coverage and reimbursements

Actions:

8.1 Develop database to identify populations and estimate needs

Strategy 9: Increase the number of counties which utilize an individualized diversion program which enhances youth strengths and resilience

Actions:

- 9.1 Develop a mechanism to engage Eyes of the Child Teams, county attorneys, and justices in developing timely individualized diversion as a more effective manner of addressing youth behaviors and reducing entry into high-end systems
- 9.2 Develop/utilize MOU's between counties if they do not have full programs

PRIORITY AREA: COMMUNITY INTERVENTION

Definition: Intervention services tailored to the individuals' identified strengths, needs and risk factors.

Array of Programs, Policies and Practices

The array of programs, policies and practices which pertain to this area include the following:

Priority 1: An array of accessible community intervention programs, policies and practices increase youth resilience and strengths and improve youth outcomes within their home, school and community

Strategy 1: Common screening tools are used throughout the region to identify youth in need of community intervention

Action:

- 1.1 Review risk and asset screening tools used for Transition Youth for adoption or possible revision
- 1.2. Determine if YLS is best practice for screening tool for all partners

Strategy 2: Common data collection process to track screenings results, identified risk areas, and behaviors that resulted in diversion or high-end systems.

Action:

- 2.1 Develop process with key partners to collect accurate, non-duplicative data for high-risk youth with significant social and emotional concerns including but not limited to: schools, mental and behavioral health, juvenile justice.
- 2.2 Use data to determine service needs

Strategy 3: Implement wraparound services with fidelity for any youth or family receiving individualized services from more than one agency or programs within one agency.

Actions:

- 3.1 Provide regional Wraparound training.
- 3.2 Establish regional Wraparound fidelity process.

Strategy 4: Training and education on co-occurring disorders, disabilities and autism spectrum

PRIORITY AREA: INTENSIVE INTERVENTION SERVICES

Definition: Intensive use of probation supervision or residential facilities tailored to individual identified risk and need factors.

Array of Programs, Policies and Practices

The array of programs, policies and practices which pertain to this area address the following:

Priority 1: An effective use of youth centered Intensive Intervention Services based on assessed risk and strengths.

Strategies:

Strategy 1: An array of intensive intervention services is collaboratively planned and available within counties and the Panhandle based on regional data Actions:

- 1.1 Utilization and outcome data is collected and shared for planning and assessment purposes
- 1.2 The plan maximizes the use of existing agencies, personnel and fiscal resources without duplication wherever possible
- 1.3 The "system" is collaboratively messaged to judges, senators, county attorney, and county commissioners
- 1.4 A central information and referral process is available to assist in the process

Strategy 2: Intensive intervention services are provided through a coordinated plan to maximize the outcomes for youth.

- 2.1 Standardized assessments, evaluations and assessments of risk are completed in accordance with juvenile state statute and court discretion 2.2 Intensive Intervention Services have established policies and practices for parent and/or family Involvement as an essential component of service delivery
- Strategy 3: Adolescent substance use assessment, residential and day treatment resources are available in the Panhandle for youth from the Panhandle.

- 3.1 Substance use programs are available as part of diversion as well as intensive intervention
- 3.2 Substance use programs are accessible through multiple public and private payment sources

3.3 Parents and families are actively involved in the treatment of the youth substance use concerns

Strategy 4: Intensive intervention services are available to youth who have been assessed through standardized assessments and evaluations before or without involvement in the juvenile services system or the Child Protective Services system.

Actions

- 4.1 Data is collected on the utilization needs and early identification of youth requiring intensive intervention to identify potential policy and funding changes. This would promote availability of services without highend intervention, particularly for youth requiring treatment for alcohol, substance use, and behavioral health disorders.
- 4.2 The Panhandle levels of governments and agencies collaborate with statewide partners to identify and address policy and funding changes required to address the treatment needs of youth prior to involvement in systems.

Strategy 5: Enhance the mental/behavioral youth-serving workforce, and access to services.

Actions:

- 5.1 Support partner efforts within the state to change reimbursement rates as an incentive for those who provide specialty care
- 5.2 Address access to psychiatrists through telehealth services and medicine
- 5.3 Develop mechanisms for youth to be able to select the counselor of choice and have assistance with payment options

Strategy 6: Youth Specialists working in intensive intervention have a common set of basic core level of training.

Actions:

- 6.1 The basic Youth Specialist curriculum is agreed upon by partner agencies and provided through the Panhandle Partnership Training Academy.
- 6.2 Additional skills and tools are provided through common the Training Academy.
- 6.3 Panhandle Partnership members continue to promote and discuss the need, opportunities and benefits of a statewide Youth Services worker certification and a professional association of Youth Services Workers to help move such efforts forward.

Strategy 7: The intensive intervention services systems shared a continuous quality improvement process to review and address program, policy, and practice items and to improve outcomes for youth.

7.1 The CQI team is comprised of the directors and or selected representatives of DHHS, Probation, Region I Mental/Behavioral Health, and agencies which provide Intensive Intervention Services.

PRIORITY AREA: MULTI-COMPONENT INTENSIVE INTERVENTION PROGRAMS

Definition: Youth 12-18 who are the most serious, violent, and chronic offenders based on a valid risk assessment.

Array of Services:

The array of services required for this area needs to be determined based on data and assessed client need.

Priority 1: Accurate data of needs, utilization and effectiveness of services for youth in this area regionally and on a state level.

Strategy 1: Collect local data.

Strategy 2: Develop a process and plan to identify and meet the needs for this population.

PRIORITY AREA: DETENTION

In April 2016, the Scotts Bluff County Juvenile Detention Center that served the Panhandle region closed. The need for this service remains as evidenced by the dollars currently being spent for youth who previously received services in the Panhandle who are now having to travel outside the region. The Panhandle believes local communities are best situated and most motivated to serve youth within their community. The Panhandle team is currently developing and implementing community-based solutions to address the gap created by the loss of this regional resource. Given the duration of the plan, it has been deemed appropriate to retain Detention's component in the Comprehensive Youth Services plan. As the situation develops, we are prepared to adapt, assess, and plan for additional developments in this area.

PRIORITY AREA: TRANSITION SERVICES

Definition: Community-based services for youth 16-24 who are on their own, have received services from Department of Health and Human Services and are transitioning

from systems, or are not currently receiving supports, to independent or community based living situations.

Array of Programs, Policies and Services

- safe and stable housing
- education services and supports
- employment readiness and supports
- daily living skills/resources

- health care and mental health care
- economic stability/financial counseling
- credit recovery
- permanence and belonging
- individual development accounts

- central navigator/intake
- youth leadership institute
- regional youth council
- policy team/CQI process
- online case management system
- Child and Youth Care Worker certification training

Priority 1: Collaboratively implement the regional Connected Youth Initiative as established in the written grant application and through the ongoing development of Implementation Policies and Practices.

Strategy 1: Implementation of system infrastructure including Central Navigation, Youth Council, Youth Leadership Institute and Support Services through collaborative leadership and training.

Strategy 2: Disseminate data and lessons learned to partners on a six-month basis.

Strategy 3: Identify potential for expansion of specific services and resources, such as central navigation to other youth system priority areas.

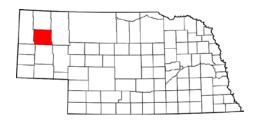
PRIORITY AREA: Backbone Organization for Regional Collaboration

Priority 1: An effective backbone organization enhances regional youth services through collaborative processes such as assessments, planning, implementation, evaluation and sustainability of quality, cost effective youth service system. A backbone organization is essential in frontier areas to support facilitation, training and funding mobilization.

Strategy 1: Regional meetings for communication, updates, education and plan revision. Actions: Plan meetings in conjunction with the Prevention Coalition and Connected Youth Workgroup wherever possible	PPI	Quarterly
 Strategy 2: Support County Community-Based Fund Applications Actions: Assure all counties apply for funds or designate another county to apply. Provide a written summary of the collaborative activities for grant applications. Provide technical assistance to county grant writers. 	PPI	Annually Dec-Jan And as required
Strategy 3: Ongoing assessment and data Collection Actions: Maintain up to date data reports based on state and local data sources Data reports available on website	Juvenile Justice Institute PPI	At least annually
Strategy 4: Braid resources and efforts across systems and leverage new resources to enhance and sustain prevention resources and accessible services. Actions: Develop and implement an ongoing practice of identifying and documenting resources from multiple sources which support components of the system and the impact of those funds Identify new resources and opportunities for additional funding Explore and engage in public private partnerships and social entrepreneurship to enhance opportunities for all youth in their communities	PPI Regional Stakeholders	12/14 Ongoing Ongoing

Strategy 5: A regional training plan which enhances the spectrum of the youth serving system.	PPI	
 Action: Complete and implement the Child and Youth Care Worker Certification course 	PPI	10/31/17
 Identify additional skills and tools required for the system and provide as able, such as distance learning opportunities Assure each course is provided with regional resources, including the training academy and provides certificates for CEU's, criminogenic hours and other recognitions as needed. 	PPI Training Academy	Ongoing
Strategy 6: A CQI Oversight Committee for all collaborative youth systems comprised of agency and organizational leadership. Actions:	PPI	
 Committee is minimally comprised of decision-makers from DHHS, Probation, Region I Behavioral Health, advocacy groups, agency directors, and schools Committee provides oversight to all systems and collective processes Committee identifies and addresses fiscal, policy and practice issues within the youth system 	CQI Committee	At least 6 meetings per year
Strategy 7: A regional Disproportionate Minority Sub-Committee Actions:		
Reinvigorate and sustain Total list many in male dealers	PPI	12/31/17
 Establish meeting schedule Utilize the Casey Model developed for JDAC to develop a regional process 	DMC Committee	ongoing
Strategy 8: Communicate plans and findings		
 Actions: Develop and maintain an ongoing process for dialogues with Judges to ensure an open exchange of information Develop and maintain an ongoing information exchange with County Attorney offices Update partners and the communities on the actions and impacts of this work 	PPI Designated team	6/30/18

Strategy 9: System and Service Evaluation	PPI	Annually
 On an annual basis, participate in regional Collective 		and
impact evaluation		ongoing
• Identify and utilize common service/participant evaluations		
for regional data		
 Report all evaluation findings to the larger collaborative 		



Box Butte County Juvenile Justice Data – 2016/17

2016 Box Butte County Youth (Ages 10-17)

Data was collected from the Office of Juvenile Delinquency's Easy Access to Juvenile Populations (http://ojjdp.gov/ojstatbb/ezapop/asp/profile_selection.asp)

Race/Ethnicity	Number	Percent
White	909	77.0%
Black	27	2.3%
American Indian	55	4.7%
Asian	3	0.3%
Hispanic*	186	15.8%
Total	1,180	100.0%

^{*}May include another racial group

CY 2016: (Under 17) Juvenile Arrests

http://www.nebraska.gov/crime_commission/arrest/arrest.cgi

Department Name	Number	Percent
Box Butte Co. Sheriff's Office	1	5.0%
Alliance Police Department	16	80.0%
Nebraska State Patrol	3	15.0%
Total	20	100.0%

CY 2016: (Under 17) Juvenile Arrests by Race/Ethnicity

http://www.nebraska.gov/crime_commission/arrest/arrest.cgi

Race/Ethnicity	Number	Percent
White	20	100.0%
Black	0	0.0%
Native American	0	0.0%
Asian	0	0.0%
Total	20	100.0%

Court Filings: Juvenile FY 2016/17 & Adult CY 2015

Juvenile court data collected from The Nebraska Supreme Court Administrative Office of Courts/Probation: County Court Annual Caseload Report; https://supremecourt.nebraska.gov/sites/default/files/FY-2017-county-caseload-report.pdf

Adult court data collected by Kids Count/Voices for Children in Nebraska; http://voicesforchildren.com/wp-content/uploads/2017/01/2016-Kids-Count.pdf

Court	Number
Juvenile Court	28
Adult Court (Source: JUSTICE, Administrative Office of the Courts)	44

CY 2016: Child Welfare Indicators (Ages 0-17)

Data was collected by Kids Count/Voices for Children in Nebraska

Child Welfare Indicators	Number	Percent
Percent of Children in Poverty (Source: US Census Bureau, 2010-2014 American Community Survey 5-year Averages Table B17001)	1,097	39.1%
Number of Children experienced Substantiated Maltreatment (Source: Nebraska Department of Health and Human Services CY 2015)	6	0.2%
Number of children in out of home care (Source: Nebraska Department of Health and Human Services CY 2015)	7	0.2%
Number of high school graduates	Data not Available	Data not Available

^{*}Numbers are based on 2,806 total children ages 0-17

CY 2016: Referrals to Juvenile Diversion

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice.

Race/Ethnicity	Number	Percent
White		%
Black		%
Hispanic		%
American Indian/Alaska Native		%
Asian		%
Hawaiian/Other		%

CY 2016: Youth Enrolled in Juvenile Diversion

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice

Race/Ethnicity	Number	Percent
White		%
Black		%
Hispanic		%
American Indian		%
Asian		%
Other		%
Total Enrolled		%

^{*}No enrollment dates reported

CY 2016: Reasons for Non-Enrollment

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice

Closure Reason	Number	Percent
Juvenile discharged from diversion, no further legal action		%
Juvenile failed to comply with program conditions		%
No reason listed		%
Total Closures		%

Note: The above numbers represent youth with no diversion enrollment date, i.e., youth who did not officially enroll in a diversion program.

CY 2016: Outcomes for Juvenile Diversion

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice

Discharge Reason	Number	Percent	Statewide
County/City Attorney or school withdrew youth's referral to diversion program		%	%
Diversion program declined admission		%	%
Juvenile discharged from diversion, no further legal action		%	%
Juvenile failed to comply with program conditions		%	%
Juvenile had new law violation(s)		%	%
Other (moved away, death, etc.)		%	%
Youth/Parent refused diversion		%	%
Unspecified/Unknown		%	%
Total		%	%

Note: The above numbers represent youth with an assigned diversion enrollment date, i.e., youth who officially enrolled in a diversion program.

CY 2016: Youth on Probation in Box Butte County

Data was collected from the Nebraska Probation Administration https://supremecourt.nebraska.gov/sites/default/files/2016-juvenile-justice-system-statistical-annual-report-viewing.pdf

Race/Ethnicity	Number	Percent
White	5	38.5%
Black	1	7.7%
American Indian	6	46.2%

Other	1	7.7%
Hispanic*	0	0.0%
Total Youth Placed on Probation	13	100.0%

FY 2013: Youth in Geneva and Kearney

Data was collected from the YRTC Annual Reports located online at

http://dhhs.ne.gov/Reports/Youth%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Report%20-%202016-2017.pdf

http://dhhs.ne.gov/Reports/Youth%20Rehabilitation%20and%20Treatment%20Center%20Kearney%20Annual%20Report%20-%202016-2017.pdf

	Number
YRTC Geneva	1
YRTC Kearney	0
Total	1

Note: The tables in this document include duplicate counts.

This report provides only a snapshot of the county's juvenile justice system. Further research should include success rates by intervention and a determination of which programs are effective, promising or evidence based.

If you have questions or comments, contact Dr. Anne Hobbs at ahobbs2 @unl.edu.

^{*}May include another racial group



Dawes County Juvenile Justice Data - 2016/17

2016 Dawes County Youth (Ages 10-17)
Data was collected from the Office of Juvenile Delinquency's Easy Access to Juvenile Populations (http://ojjdp.gov/ojstatbb/ezapop/asp/profile_selection.asp)

Race/Ethnicity	Number	Percent
White	598	81.1%
Black	24	3.3%
American Indian	37	5.0%
Asian	10	1.4%
Hispanic*	68	9.2%
Total	737	100.0%

^{*}May include another racial group

CY 2016: (Under 17) Juvenile Arrests

http://www.nebraska.gov/crime_commission/arrest/arrest.cgi

Department Name	Number	Percent
Nebraska State Patrol	12	31.6%
Chadron Police Department	21	55.3%
Dawes Co. Sheriff's Office	5	13.1%
Total	38	100.0%

CY 2016: (Under 17) Juvenile Arrests by Race/Ethnicity

http://www.nebraska.gov/crime_commission/arrest/arrest.cgi

Race/Ethnicity	Number	Percent
White	34	89.5%
Black	0	0.0%
Native American	4	10.5%
Asian	0	0.0%
Unknown	0	0.0%
Total	38	100.0%

Court Filings: Juvenile FY 2016/17 & Adult CY 2015

Juvenile court data collected from The Nebraska Supreme Court Administrative Office of Courts/Probation: County Court Annual Caseload Report; https://supremecourt.nebraska.gov/sites/default/files/FY-2017-county-caseload-report.pdf

Adult court data collected by Kids Count/Voices for Children in Nebraska; http://voicesforchildren.com/wp-content/uploads/2017/01/2016-Kids-Count.pdf

Court	Number
Juvenile Court	51
Adult Court (Source: JUSTICE, Administrative Office of the Courts)	20

CY 2016: Child Welfare Indicators (Ages 0-17)

Data was collected by Kids Count/Voices for Children in Nebraska

Child Welfare Indicators	Number	Percent
Percent of Children in Poverty (Source: US Census Bureau, 2010-2014 American Community Survey 5-year Averages Table B17001)	281	17.7%
Number of Children experienced Substantiated Maltreatment (Source: Nebraska Department of Health and Human Services CY2015)	7	0.4%
Number of children in out of home care (Source: Nebraska Department of Health and Human Services CY2015)	5	0.3%
Number of high school graduates	Data not Available	Data not Available

^{*}Numbers are based on 1,588 total children ages 0-17

CY 2016: Referrals to Juvenile Diversion

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice.

Race/Ethnicity	Number	Percent
Total Referred to Diversion		%

CY 2016: Youth Enrolled in Juvenile Diversion

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice

Race/Ethnicity	Number	Percent
Total Enrolled		%

CY 2016: Reasons for Non-Enrollment

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice

Closure Reason	Number	Percent
Total Closures		%

Note: The above numbers represent youth with no diversion enrollment date, i.e., youth who did not officially enroll in a diversion program.

CY 2016: Outcomes for Juvenile Diversion

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice

Discharge Reason	Number	Percent	Statewide
County/City Attorney or school withdrew youth's referral to diversion program	-	-	%
Diversion program declined admission	-	-	%
Juvenile discharged from diversion, no further legal action	-	-	%
Juvenile failed to comply with program conditions	-	-	%
Juvenile had new law violation(s)	-	-	%
Other (moved away, death, etc.)	-	-	%
Youth/Parent refused diversion	-	-	%
Unspecified/Unknown	-	-	%
Total	-	-	%

Note: The above numbers represent youth with an assigned diversion enrollment date, i.e., youth who officially enrolled in a diversion program.

CY 2016: Youth on Probation in Dawes County

Data was collected from the Nebraska Probation Administration https://supremecourt.nebraska.gov/sites/default/files/2016-juvenile-justice-system-statistical-annual-report-viewing.pdf

Race/Ethnicity	Number	Percent
White	24	80.0%
Black	0	0.0%
American Indian	2	6.7%
Unknown	2	6.7%

*Hispanic	2	6.7%
Total Youth Placed on Probation	30	100.0%

^{*}May include another racial group

FY 2016: Youth in Geneva and Kearney

Data was collected from the YRTC Annual Reports located online at

 $\frac{http://dhhs.ne.gov/Reports/Youth\%20Rehabilitation\%20and\%20Treatment\%20Center\%20Geneva\%20Annual\%20Rehabilitation\%20and\%20Treatment\%20Center\%20Geneva\%20Annual\%20Rehabilitation\%20and\%20Treatment\%20Center\%20Geneva\%20Annual\%20Rehabilitation\%20and\%20Treatment\%20Center\%20Geneva\%20Annual\%20Rehabilitation\%20and\%20Treatment\%20Center\%20Geneva\%20Annual\%20Rehabilitation\%20and\%20Treatment\%20Center\%20Geneva\%20Annual\%20Rehabilitation\%20and\%20Treatment\%20Center\%20Geneva\%20Annual\%20Rehabilitation\%20and\%20Treatment\%20Center\%20Geneva\%20Annual\%20Rehabilitation\%20and\%20Treatment\%20Center\%20Geneva\%20Annual\%20Rehabilitation\%20and\%20Treatment\%20Center\%20Geneva\%20Annual\%20Rehabilitation\%20and\%20Treatment\%20Center\%20Geneva\%20Annual\%20Rehabilitation\%20and\%20Treatment\%20Center\%20Geneva\%20Annual\%20Rehabilitation\%20Annual\%20Rehabilitation\%20Annual\%20Rehabilitation\%20Annual$

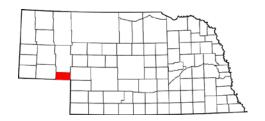
http://dhhs.ne.gov/Reports/Youth%20Rehabilitation%20and%20Treatment%20Center%20Kearney%20Annual%20Report%20-%202016-2017.pdf

	Number
YRTC Geneva	0
YRTC Kearney	0
Total	0

Note: The tables in this document include duplicate counts.

This report provides only a snapshot of the county's juvenile justice system. Further research should include success rates by intervention and a determination of which programs are effective, promising or evidence based.

If you have questions or comments, contact Dr. Anne Hobbs at ahobbs2 @unl.edu.



Deuel County Juvenile Justice Data - 2016/17

2013 Deuel County Youth (Ages 10-17)
Data was collected from the Office of Juvenile Delinquency's Easy Access to Juvenile Populations (http://ojjdp.gov/ojstatbb/ezapop/asp/profile_selection.asp)

Race/Ethnicity	Number	Percent
White	171	86.3%
Black	1	0.5%
American Indian	3	1.5%
Asian	0	0.0%
Hispanic*	23	11.6%
Total	198	100.0%

^{*}May include another racial group

CY 2016: (Under 17) Juvenile Arrests

http://www.nebraska.gov/crime_commission/arrest/arrest.cgi

Department Name	Number	Percent
Nebraska State Patrol	0	0.0%
Deuel Co. Sheriff's Office	0	0.0%
Total	0	0.0%

CY 2016: (Under 17) Juvenile Arrests by Race/Ethnicity

http://www.nebraska.gov/crime_commission/arrest/arrest.cgi

Race/Ethnicity	Number	Percent
White	0	0.0%
Black	0	0.0%
Native American	0	0.0%
Asian	0	0.0%
Total	0	0.0%

Court Filings: Juvenile FY 2016/17 & Adult CY 2015

Juvenile court data collected from The Nebraska Supreme Court Administrative Office of Courts/Probation: County Court Annual Caseload Report; https://supremecourt.nebraska.gov/sites/default/files/FY-2017-county-caseload-report.pdf

Adult court data collected by Kids Count/Voices for Children in Nebraska; http://voicesforchildren.com/wp-content/uploads/2017/01/2016-Kids-Count.pdf

Court	Number
Juvenile Court	7
Adult Court (Source: JUSTICE, Administrative Office of the Courts)	5

CY 2016: Child Welfare Indicators (Ages 0-17)

Data was collected by Kids Count/Voices for Children in Nebraska

Child Welfare Indicators	Number	Percent
Percent of Children in Poverty (Source: US Census Bureau, 2010-2014 American Community Survey 5-year Averages Table B17001)	132	31.2%
Number of Children experienced Substantiated Maltreatment (Source: Nebraska Department of Health and Human Services CY 2015)	1	0.2%
Number of children in out of home care (Source: Nebraska Department of Health and Human Services CY 2015)	3	0.7%
Number of high school graduates	Data not Available	Data not Available

^{*}Numbers are based on 423 total children ages 0-17

CY 2016: Referrals to Juvenile Diversion

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice.

Race/Ethnicity	Number	Percent
White		%
Black		%
Hispanic		%
American Indian		%
Asian		%
Other		%
Total Referred to Diversion		%

CY 2016: Youth Enrolled in Juvenile Diversion

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice

Race/Ethnicity	Number	Percent
White		%
Black		%
Hispanic		%
American Indian		%
Asian		%
Other		%
Total Enrolled		%

^{*}No enrollment dates reported

CY 2016: Reasons for Non-Enrollment

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice

Closure Reason	Number	Percent
Juvenile discharged from diversion, no further legal action		%
Juvenile failed to comply with program conditions		%
Total Closures		%

Note: The above numbers represent youth with no diversion enrollment date, i.e., youth who did not officially enroll in a diversion program.

CY 2016: Outcomes for Juvenile Diversion

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice

Discharge Reason	Number	Percent	Statewide
County/City Attorney or school withdrew youth's referral to diversion program		%	%
Diversion program declined admission		%	%
Juvenile discharged from diversion, no further legal action		%	%
Juvenile failed to comply with program conditions		%	%
Juvenile had new law violation(s)		%	%
Other (moved away, death, etc.)		%	%
Youth/Parent refused diversion		%	%
Unspecified/Unknown		%	%
Total		%	%

Note: The above numbers represent youth with an assigned diversion enrollment date, i.e., youth who officially enrolled in a diversion program.

CY 2016: Youth on Probation in Deuel County

Data was collected from the Nebraska Probation Administration https://supremecourt.nebraska.gov/sites/default/files/2016-juvenile-justice-system-statistical-annual-report-viewing.pdf

Race/Ethnicity	Number	Percent
White	0	0.0%
Black	0	0.0%
American Indian	0	0.0%
Asian/PI	1	100.0%
Hispanic*	0	0.0%
Total Youth Placed on Probation	1	0.0%

^{*}May include another racial group

FY 2016: Youth in Geneva and Kearney
Data was collected from the YRTC Annual Reports located online at <a href="http://dhhs.ne.gov/Reports/Youth%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Rehabilitation%20Annual%20A port%20-%202016-2017.pdf

http://dhhs.ne.gov/Reports/Youth%20Rehabilitation%20and%20Treatment%20Center%20Kearney%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Kearney%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Kearney%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Kearney%20Annual%20Rehabilitation%20and%20Treatment%20Center%20Kearney%20Annual%20Rehabilitation%20Annual%20Rehabilitation%20Annual%20Rehabilitation%20Annual%20Rehabilitation%20Annual%20Rehabilitation%20Annual%20Rehabilitation%20Annual%20Rehabilitation%20Annual%20Rehabilitation%20Annual%20Ann eport%20-%202016-2017.pdf

	Number
YRTC Geneva	0
YRTC Kearney	0
Total	0

Note: The tables in this document include duplicate counts.

This report provides only a snapshot of the county's juvenile justice system. Further research should include success rates by intervention and a determination of which programs are effective, promising or evidence based.

If you have questions or comments, contact Dr. Anne Hobbs at ahobbs2 @unl.edu.



Morrill County Juvenile Justice Data – 2016/17

2016 Morrill County Youth (Ages 10-17)
Data was collected from the Office of Juvenile Delinquency's Easy Access to Juvenile Populations

(http://ojjdp.gov/ojstatbb/ezapop/asp/profile_selection.asp)

Race/Ethnicity	Number	Percent
White	400	72.5%
Black	8	1.4%
American Indian	7	1.3%
Asian	5	0.9%
Hispanic*	132	23.9%
Total	552	100.0%

^{*}May include another racial group

CY 2016: (Under 17) Juvenile Arrests

http://www.nebraska.gov/crime_commission/arrest/arrest.cgi

Department Name	Number	Percent
Bayard Police Department	20	83.3%
Nebraska State Patrol	4	16.7%
Bridgeport Police Department	0	0.0%
Morrill Co. Sheriff's Office	0	0.0%
Total	24	100.0%

CY 2013: (Under 17) Juvenile Arrests by Race/Ethnicity

http://www.nebraska.gov/crime_commission/arrest/arrest.cgi

Race/Ethnicity	Number	Percent
White	22	91.6%
Black	0	0.0%
Native American	1	4.2%
Asian	1	4.2%
Total	24	100.0%

Court Filings: Juvenile FY 2016/17 & Adult CY 2015

Juvenile court data collected from The Nebraska Supreme Court Administrative Office of Courts/Probation: County Court Annual Caseload Report; https://supremecourt.nebraska.gov/sites/default/files/FY-2017-county-caseloadreport.pdf

Adult court data collected by Kids Count/Voices for Children in Nebraska; http://voicesforchildren.com/wpcontent/uploads/2017/01/2016-Kids-Count.pdf

Court	Number
Juvenile Court	26
Adult Court (Source: JUSTICE, Administrative Office of the Courts)	21

CY 2016: Child Welfare Indicators (Ages 0-17) Data was collected by Kids Count/Voices for Children in Nebraska

Child Welfare Indicators	Number	Percent
Percent of Children in Poverty (Source: US Census Bureau, 2010-2014 American Community Survey 5-year Averages Table B17001)	244	26.8%
Number of Children experienced Substantiated Maltreatment (Source: Nebraska Department of Health and Human Services CY 2015)	9	0.8%
Number of children in out of home care (Source: Nebraska Department of Health and Human Services CY 2015)	4	0.3%
Number of high school graduates SY 2011-2012	Data not Available	Data not Available

^{*}Numbers are based on 1,167 total children ages 0-17

CY 2016: Referrals to Juvenile Diversion

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice.

	Number	Percent
Total Referred to Diversion		%

CY 2016: Youth Enrolled in Juvenile Diversion

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice

	Number	Percent
Total Enrolled		%

CY 2016: Reasons for Non-Enrollment

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice

Closure Reason	Number	Percent
Total Closures		%

Note: The above numbers represent youth with no diversion enrollment date, i.e., youth who did not officially enroll in a diversion program.

CY 2016: Outcomes for Juvenile Diversion

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice

Discharge Reason	Number	Percent	Statewide
County/City Attorney or school withdrew youth's referral to diversion program			%
Diversion program declined admission			%
Juvenile discharged from diversion, no further legal action			%
Juvenile failed to comply with program conditions			%
Juvenile had new law violation(s)			%
Other (moved away, death, etc.)			%
Youth/Parent refused diversion			%
Unspecified/Unknown			%
Total			%

Note: The above numbers represent youth with an assigned diversion enrollment date, i.e., youth who officially enrolled in a diversion program.

CY 2016: Youth on Probation in Morrill County Data was collected from the Nebraska Probation Administration

https://supremecourt.nebraska.gov/sites/default/files/2016-juvenile-justice-system-statistical-annual-reportviewing.pdf

Race/Ethnicity	Number	Percent
White	9	81.8%
Black	0	0.0%
American Indian	0	0.0%
Asian	0	0.0%
Hispanic*	1	9.1%
Unknown	1	9.1%
Total Youth Placed on Probation	11	100.0%

^{*}May include another racial group

CY 2016: Youth in Detention, arrested in Morrill County

Data was collected from the Nebraska Commission on Law Enforcement and Criminal Justice regarding youth booked-into detention.

Facility	Number	Percent
Douglas Co. Youth Center		%
Lancaster Co. Detention Center		%
Northeast Nebraska Juvenile Center		%
West Nebraska Juvenile Detention Center		%
All Adult Jails		%
Total		%

FY 2016/17: Youth in Geneva and Kearney

Data was collected from the YRTC Annual Reports located online at

http://dhhs.ne.gov/Reports/Youth%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Report%20-%202016-2017.pdf

http://dhhs.ne.gov/Reports/Youth%20Rehabilitation%20and%20Treatment%20Center%20Kearney%20Annual%20Report%20-%202016-2017.pdf

	Number
YRTC Geneva	0
YRTC Kearney	0
Total	0

Note: The tables in this document include duplicate counts.

This report provides only a snapshot of the county's juvenile justice system. Further research should include success rates by intervention and a determination of which programs are effective, promising or evidence based.

If you have questions or comments, contact Dr. Anne Hobbs at ahobbs2@unl.edu.



Scotts Bluff County Juvenile Justice Data - 2016/17

2016 Scotts Bluff County Youth (Ages 10-17)
Data was collected from the Office of Juvenile Delinquency's Easy Access to Juvenile Populations (http://ojjdp.gov/ojstatbb/ezapop/asp/profile_selection.asp)

Race/Ethnicity	Number	Percent
White	2,480	60.6%
Black	58	1.4%
American Indian	72	1.8%
Asian	66	1.6%
Hispanic*	1,415	34.6%
Total	4,091	100.0%

^{*}May include another racial group

CY 2016: (Under 17) Juvenile Arrests

http://www.nebraska.gov/crime_commission/arrest/arrest.cgi

Department Name	Number	Percent
Nebraska State Patrol	36	15.4%
Mitchell Police Department	0	0.0%
Gering Police Department	25	10.7%
Scotts Bluff Police Department	167	71.4%
Scotts Bluff Co. Sheriff's Office	6	2.6%
Total	234	100.0%

CY 2016: (Under 17) Juvenile Arrests by Race/Ethnicity

http://www.nebraska.gov/crime_commission/arrest/arrest.cgi

Race/Ethnicity	Number	Percent
White	199	85.0%
Black	2	0.9%
Native American	23	9.8%
Asian	0	0.0%
Unknown	10	4.3%
Total	234	100.0%

Court Filings: Juvenile FY 2016/17 & Adult CY 2015

Juvenile court data collected from The Nebraska Supreme Court Administrative Office of Courts/Probation: County Court Annual Caseload Report; https://supremecourt.nebraska.gov/sites/default/files/FY-2017-county-caseload-report.pdf

Adult court data collected by Kids Count/Voices for Children in Nebraska; http://voicesforchildren.com/wp-content/uploads/2017/01/2016-Kids-Count.pdf

Court	Number
Juvenile Court	354
Adult Court (Source: JUSTICE, Administrative Office of the Courts)	180

CY 2016: Child Welfare Indicators (Ages 0-17)

Data was collected by Kids Count/Voices for Children in Nebraska

Child Welfare Indicators	Number	Percent
Percent of Children in Poverty (Source: US Census Bureau, 2010-2014 American Community Survey 5-year Averages Table B001)	1,907	21.5%
Number of Children experienced Substantiated Maltreatment (Source: Nebraska Department of Health and Human Services CY 2015)	94	1.1%
Number of children in out of home care (Source: Nebraska Department of Health and Human Services CY 2015)	151	1.7%
Number of high school graduates	Data not Available	Data not Available

^{*}Numbers are based on 8,870 total children ages 0-17

CY 2016: Referrals to Juvenile Diversion

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice.

Race/Ethnicity	Number	Percent
White		%
Black		%
Hispanic		%
American Indian/Alaska Native		%
Asian		%
Other		%
Total Referred to Diversion		%

CY 2016: Youth Enrolled in Juvenile Diversion

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice

Race/Ethnicity	Number	Percent
White		%
Black		%
Hispanic		%
American Indian		%
Asian		%
Other		%
Total Enrolled		%

CY 2016: Reasons for Non-Enrollment

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice

Closure Reason	Number	Percent
Total Closures		%

Note: The above numbers represent youth with no diversion enrollment date, i.e., youth who did not officially enroll in a diversion program.

CY 2016: Outcomes for Juvenile Diversion

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice

Discharge Reason	Number	Percent	Statewide
County/City Attorney or school withdrew youth's referral to diversion program		%	%
Diversion program declined admission		%	%
Juvenile discharged from diversion, no further legal action		%	%
Juvenile failed to comply with program conditions		%	%
Juvenile had new law violation(s)		%	%
Other (moved away, death, etc.)		%	%
Youth/Parent refused diversion		%	%
Unspecified/Unknown		%	%
Total		%	%

Note: The above numbers represent youth with an assigned diversion enrollment date, i.e., youth who officially enrolled in a diversion program.

CY 2016: Youth on Probation in Scottsbluff County

Data was collected from the Nebraska Probation Administration

https://supremecourt.nebraska.gov/sites/default/files/2016-juvenile-justice-system-statistical-annual-report-viewing.pdf

Race/Ethnicity	Number	Percent
White	48	51.6%
Black	0	0.0%
American Indian	12	12.9%
Other	33	35.5%
Total Youth Placed on Probation	93*	100.0%
Hispanic**	41	44.1%

^{*}Another part of this document indicated that there were 231 youth placed on probation

^{**}May include another racial group

FY 2016: Youth in Geneva and Kearney

Data was collected from the YRTC Annual Reports located online at

http://dhhs.ne.gov/Reports/Youth%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Report%20-%202016-2017.pdf

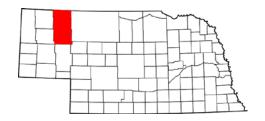
http://dhhs.ne.gov/Reports/Youth%20Rehabilitation%20and%20Treatment%20Center%20Kearney%20Annual%20Report%20-%202016-2017.pdf

	Number
YRTC Geneva	1
YRTC Kearney	3
Total	4

Note: The tables in this document include duplicate counts.

This report provides only a snapshot of the county's juvenile justice system. Further research should include success rates by intervention and a determination of which programs are effective, promising or evidence based.

If you have questions or comments, contact Dr. Anne Hobbs at ahobbs2 @unl.edu.



Sheridan County Juvenile Justice Data – 2016/17

2016 Sheridan County Youth (Ages 10-17)
Data was collected from the Office of Juvenile Delinquency's Easy Access to Juvenile Populations (http://ojjdp.gov/ojstatbb/ezapop/asp/profile_selection.asp)

Race/Ethnicity	Number	Percent
White	407	72.5%
Black	9	1.6%
American Indian	99	17.6%
Asian	4	0.7%
Hispanic*	42	7.5%
Total	561	100.0%

^{*}May include another racial group

CY 2016: (Under 17) Juvenile Arrests

http://www.nebraska.gov/crime_commission/arrest/arrest.cgi

Department Name	Number	Percent
Nebraska State Patrol	1	33.3%
Gordon Police Department	0	0.0%
Sheridan Co. Sheriff's Office	2	66.7%
Total	3	100.0%

CY 2016: (Under 17) Juvenile Arrests by Race/Ethnicity

http://www.nebraska.gov/crime_commission/arrest/arrest.cgi

Race/Ethnicity	Number	Percent
White	1	33.3%
Black	0	0.0%
Native American	2	66.7%
Asian	0	0.0%
Total	3	100.0%

Court Filings: Juvenile FY 2016/17 & Adult CY 2015

Juvenile court data collected from The Nebraska Supreme Court Administrative Office of Courts/Probation: County Court Annual Caseload Report; https://supremecourt.nebraska.gov/sites/default/files/FY-2017-county-caseloadreport.pdf

Adult court data collected by Kids Count/Voices for Children in Nebraska; http://voicesforchildren.com/wpcontent/uploads/2017/01/2016-Kids-Count.pdf

Court	Number
Juvenile Court	45
Adult Court (Source: JUSTICE, Administrative Office of the Courts)	32

CY 2016: Child Welfare Indicators (Ages 0-17) Data was collected by Kids Count/Voices for Children in Nebraska

Child Welfare Indicators	Number	Percent
Percent of Children in Poverty (Source: US Census Bureau, 2010-2014 American Community Survey 5-year Averages Table B01001)	407	23.3%
Number of Children experienced Substantiated Maltreatment (Source: Nebraska Department of Health and Human Services CY 2015)	8	0.5%
Number of children in out of home care (Source: Nebraska Department of Health and Human Services CY 2015)	14	0.8%
Number of high school graduates	Data not Available	Data not Available

^{*}Numbers are based on 1,747 total children ages 0-17

CY 2016: Referrals to Juvenile Diversion

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice.

	Number	Percent
Total Referred to Diversion		%

CY 2016: Youth Enrolled in Juvenile Diversion

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice

	Number	Percent
Total Enrolled		%

CY 2016: Reasons for Non-Enrollment

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice

Closure Reason	Number	Percent
Total Closures		%

Note: The above numbers represent youth with no diversion enrollment date, i.e., youth who did not officially enroll in a diversion program.

CY 2016: Outcomes for Juvenile Diversion

Data was collected from the Nebraska Juvenile Diversion Case Management System through the Nebraska Commission on Law Enforcement and Criminal Justice

Discharge Reason	Number	Percent	Statewide
County/City Attorney or school withdrew youth's referral to diversion program		%	%
Diversion program declined admission		%	%
Juvenile discharged from diversion, no further legal action		%	%
Juvenile failed to comply with program conditions		%	%
Juvenile had new law violation(s)		%	%
Other (moved away, death, etc.)		%	%
Youth/Parent refused diversion		%	%
Unspecified/Unknown		%	%
Total		%	%

Note: The above numbers represent youth with an assigned diversion enrollment date, i.e., youth who officially enrolled in a diversion program.

CY 2016: Youth on Probation in Platte County

Data was collected from the Nebraska Probation Administration https://supremecourt.nebraska.gov/sites/default/files/2016-juvenile-justice-system-statistical-annual-report-viewing.pdf

Race/Ethnicity	Number	Percent
White	5	20.0%
Black	0	0.0%
American Indian	20	80.0%
Asian	0	0.0%
Hispanic*	0	0.0%
Total Youth Placed on Probation	25	100.0%

^{*}May include another racial group

FY 2016: Youth in Geneva and Kearney

Data was collected from the YRTC Annual Reports located online at

http://dhhs.ne.gov/Reports/Youth%20Rehabilitation%20and%20Treatment%20Center%20Geneva%20Annual%20Report%20-%202016-2017.pdf

http://dhhs.ne.gov/Reports/Youth%20Rehabilitation%20and%20Treatment%20Center%20Kearney%20Annual%20Report%20-%202016-2017.pdf

	Number
YRTC Geneva	0
YRTC Kearney	0
Total	0

Note: The tables in this document include duplicate counts.

This report provides only a snapshot of the county's juvenile justice system. Further research should include success rates by intervention and a determination of which programs are effective, promising or evidence based.

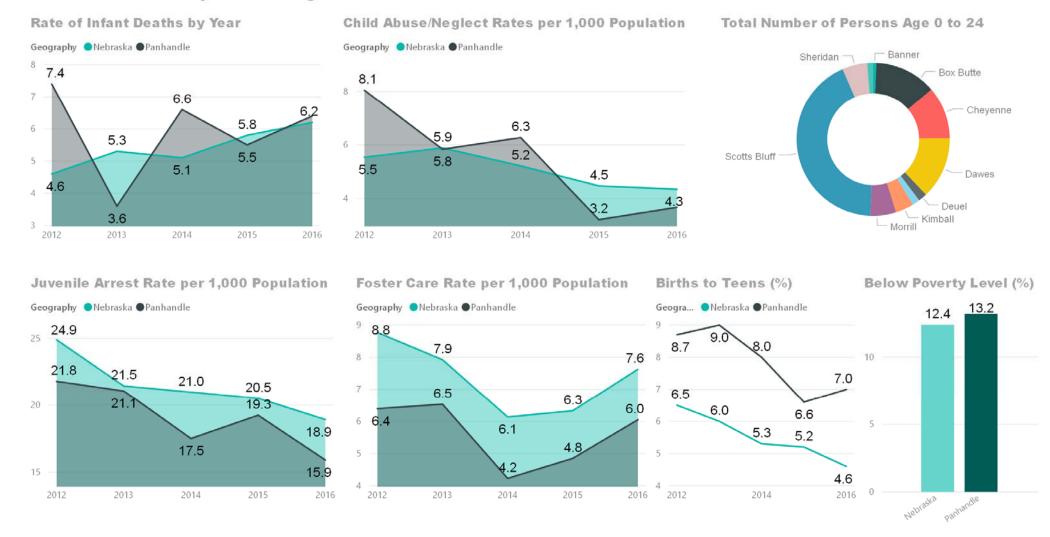
If you have questions or comments, contact Dr. Anne Hobbs at ahobbs2 @unl.edu.

Panhandle Community Well-Being Indicators

Prepared for the Panhandle Partnership June 8, 2018

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Selected Community Well-Being Indicators for the Panhandle and Nebraska



Community Well-Being Indicators for Panhandle Counties, 2016

Geography	Infant Death s (#)	Rate of Infant Deaths	Births to Teens (#)	Births to Teens (%)	Child Abuse/Neglect Substantiated Reports	Child Abuse/Neglec t Rates	Juvenille Arrests	Juvenile Arrest Rate per 1,000 Population		Foster Care Rate	High School Graduation Rate (%)	Percent Proficient Reading at Third Grade	Language other than English Spoken at Home among Population Aged 5+ (%)	Children in Single Parent Households (%)	Population Below Poverty Level (%)
Banner	0		0		0		1		2			100.00	3.50	28.11	11.98
Box Butte	1		10	6.50	5	1.68	20	6.73	7	2.36	88.81	81.15	3.20	23.60	13.97
Cheyenne	2		8	5.50	6	2.39	16	6.38	11	4.39	96.80	84.33	4.90	26.93	10.01
Dawes	0		0		5	2.54	38	19.33	8	4.07	51.76	85.29	5.10	20.16	15.98
Deuel	0		0		0		0		2		91.67	77.14	4.60	23.65	10.46
Garden	0		0		3		0		2		100.00	92.86	5.00	10.40	11.61
Kimball	0				2		6	7.00	2		97.50	75.76	7.10	36.13	10.33
Morrill	0		7	14.00	3		24	19.60	3		93.85	77.36	9.00	41.19	12.35
Scotts Bluff	4		48	9.90	53	5.57	234	24.58	89	9.35	90.26	78.41	12.40	44.64	13.45
Sheridan	0				2		3		4		93.62	86.44	3.30	33.91	16.81
Sioux	0		0		0		0		0			66.67	0.20	17.31	10.99
Total	7		73		79		342		130						

Community Well-Being Indicators for Nebraska and Panhandle Counties

Geography		Rate of Infant Deaths	to	Births to Teens (%)	Child Abuse/Neglect Substantiated Reports	Child Abuse/Neglect Rates		Juvenile Arrest Rate per 1,000 Population					Language other than English Spoken at Home among Population Aged 5+ (%)	Children in Single Parent Households (%)
Panhandle	7	6.40	1	7.00	79	3.68	342	15.92	130	6.05				
Nebraska	166	6.20	1227	4.60	2174	4.35	9463	18.93	3812	7.63	89.30	84.00	11.00	28.79
Total	173		1228		2253		9805		3942					

Panhandle Counties with One or More Community Well-Being Indicators Worse Than the Panhandle Average, 2016

- 1. Box Butte (Percent Below Poverty)
- 2. Dawes (Juvenille Arrest Rate, Percent Below Poverty)
- 3. Morrill (Teen Births, Juvenille Arrest Rate)
- 4. Scotts Bluff (Teen Births, Child Abuse/Neglect Rates, Juvenille Arrest Rates, Foster Care Rate, Percent Below Poverty)
- 5. Sheridan (Percent Below Poverty)

Definitions and Source Information for Data Provided

InfantDeaths

Infant death are the deaths of people under one year of age, and the infant death rate is the number of infant deaths per 1,000 live births. Crude rates are not calculated for counties with less than five events.

Source for 2013 data: http://dhhs.ne.gov/publichealth/v/tal%20Statistics%20Reports/v/tal%20Statistics%20Report%202013.pdf

Source for 2014 data: Nebraska 2014 Vital Statistics Report, Table 59: Infant and neonatal deaths by place of residence, 2014 and 2010-2014

http://dhhs.ne.gov/publichealth/Vital%20Statistics%20Reports/Vital%20Statistics%20Report%202014.pd

Source for 2015 data: Nebraska 2015 Vital Statistics Report, Table 59: Infant and neonatal deaths by place of residence, 2015 and 2011-2015. http://dhhs.ne.gov/publichealth/Vital%20Statistics%20Reports/Vital%20Statistic

Teen Births

Teen births are the number of births to women aged 19 and under, and the percent of teen births is the number of teen births divided by total births for each county.

Source for 2013 data: Nebraska 2013 Vital Statistics Report, Table 7: Teen Births by Place of Residence, 2013 and 2009-2013. http://dhhs.ne.gov/publichealth/Vital%20Statistics%20Reports/Vital%20Statistics%20Reports/202013.pdf

Source for 2014 data: Nebraska 2014 Vital Statistics Report, TABLE 7: Teen Births by Place of Residence, 2014 and 2010-2014. http://dhhs.ne.gov/publichealth/Vital%20Statistics%20Reports/Vital%20Statistics%20Reports/202014.pdf

Source for 2015 data: Nebraska 2015 Vital Statistics Report, TABLE 7: Teen Births by Place of Residence, 2015 and 2011-2015. http://dhhs.ne.gov/publichealth/Vital%20Statistics%20Reports/Vital%20Statis

Juvenile Arrests

calculated for counties with less than five events.

Juvenile arrests are the number of arrests of individuals under 18. An arrest is counted each time a person is taken into custody or issued a citation or summons. In the case of a juvenile (defined as a person under the age of 18) an arrest is counted when they are merely warned and released without any further action. For 2013, the sum of arrests from each counties does not equal the total for the state; the reason for this discrepancy is that two arrests occurred on Nebraska state property rather than a county. The juvenile arrest rate is the number of such arrests per 1,000 individuals age 0 to 18. Crude rates are not

Source for 2013 data: For arrest data, Nebraska Commission on Law Enforcement and Criminal Justice, Adult/Juvenile Versus County, Year: 2013, Age: Juvenile (0-17), Retrieved from

http://www.ncc.nebraska.gov/statistics/data_search/arrest/arrest_crosstab.phtml. For population data, 2013 Vintage Population Estimates from the U.S. Census Bureau as compiled and analyzed by the Center for Public Affairs Research (CPAR) at the University of Nebraska at Omaha.

Source of 2014 data: For arrest data, Nebraska Crime Commission, Arrest Data Query, Year VS County for Juvenile (0-17 years). Retrieved from http://www.nebraska.gov/crime_commission/arrest/arrest.cgi. For

population data, 2014 Vintage Population Estimates from the U.S. Census Bureau as compiled and analyzed by the Center for Public Affairs Research (CPAR) at

the University of Nebraska at Omaha. Source of 2015 data: For arrest data, Nebraska Crime Commission, Arrest Data Query, Year VS County for Juvenile (0-17 years). Retrieved from http://www.nebraska.gov/crime_commission/arrest_data, Nebraska Crime Commission, Arrest Data Query, Year VS County for Juvenile (0-17 years). Retrieved from http://www.nebraska.gov/crime_commission/arrest_data, Nebraska Crime Commission, Arrest Data Query, Year VS County for Juvenile (0-17 years). Retrieved from http://www.nebraska.gov/crime_commission/arrest_data, Nebraska Crime Commission, Arrest Data Query, Year VS County for Juvenile (0-17 years). Retrieved from http://www.nebraska.gov/crime_commission/arrest_data, Nebraska Crime Commission, Arrest Data Query, Year VS County for Juvenile (0-17 years). Retrieved from http://www.nebraska.gov/crime_commission/arrest_data, Nebraska Crime Commission, Arrest Data Query, Year VS County for Juvenile (0-17 years). Retrieved from http://www.nebraska.gov/crime_commission/arrest_data, Nebraska Crime County for Juvenile (0-17 years). Retrieved from http://www.nebraska.gov/crime_commission/arrest_data, Nebraska Crime County for Juvenile (0-17 years). Retrieved from http://www.nebraska.gov/crime_commission/arrest_data, Nebraska Crime County for University (0-17 years). Retrieved from http://www.nebraska.gov/crime_commission/arrest_data, Nebraska Crime County for University (0-17 years). Retrieved fro

Source for 2016 data: Source for arrest data: Nebraska Crime Commission. (n.d.) Arrest data query, year vs county, year: 2016, age: juvenile (0-17 years), [Data file]. Source for population data: U.S. Census Bureau. (Annual). Vintage Population Estimates from the U.S. Census Bureau, 2016. Data compiled and analyzed by the Center for Public Affairs Research (CPAR) at the University of Nebraska at Omaha.

Child Abuse and Neglect

Child abuse and neglect substantiated reports are a subset of the total number of reports of child maltreatment that were made in a given year. "Substantiated" means that a determination was made that the incident of maltreatment did occur. "Child maltreatment" is defined by the Nebraska Department of Health and Human Services as physical, emotional, or sexual harm done to a child from birth to age 17. This harm may occur either through abuse or neglect. The child abuse and neglect substantiated report rate is the number of such reports per 1,000 individuals age 0 to 18 in a given county. Crude rates are not

calculated for counties with less than five events.

Source for 2013 data: Nebraska Department of Health and Human Services (2013) Child Abuse and Neglect: Annual Data, Calendar Year 2013, Table 1-7: 2013 CAN Reports by County, Retrieved from http://dhhs.ne.gov/children_family_services/Documents/CAN2013ANNUALREPORT.pdf For population data, 2013 Vintage Population Estimates from the U.S. Census Bureau as compiled and analyzed by the Center for Public Affairs Research (CPAR) at the University of Nebraska at Omaha.

Source for 2014 data: Nebraska Department of Health and Human Services (2014) Child Abuse and Neglect: Annual Data, Calendar Year 2014, Table 1-7: 2014 CAN Reports by County, Retrieved from http://dhhs.ne.gov/children_family_services/Documents/2014CANReport.pdf For population data, 2014 Vintage Population Estimates from the U.S. Census Bureau as compiled and analyzed by the Center for Public Affairs Research (CPAR) at the University of Nebraska at Omaha.

Source of 2015 data: Nebraska Department of Health and Human Services (2015) Child Abuse and Neglect: Annual Data, Calendar Year 2015, Table 1-7: 2015 CAN Reports by County, Retrieved from http://dhhs.ne.gov/children-family-services/Documents/CAN2015ANNUALDATAREPORT.pdf For population data, 2015 Vintage Population Estimates from the U.S. Census Bureau

as compiled and analyzed by the Center for Public Affairs Research (CPAR) at the University of Nebraska at Omaha. Note: Also available is data from Nebraska\ Department of Health and Human Services, prepared by Voices for Children, that shows the number of children/victims (as opposed to reports)

Source for 2016 data: Source for 2016 child abuse and neglect data: Nebraska Department of Health and Human Services, Division of Children and Families. Child abuse and neglect (CAN) data report, 2016. Source for population data: U.S. Census Bureau. (Annual). Vintage Population Estimates from the U.S. Census Bureau, 2016. Data compiled and analyzed by the Center for Public Affairs Research (CPAR) at the University of Nebraska at Omaha.

Foster Care

The number in foster care is how many children and youth were in out-of-home care as of a given date. The foster care rate is the number of children and youth in foster care per 1,000 individuals age 0 to 18 in a given county. Crude rates are not calculated for counties with less than five events.

Source for 2009 data: Foster Care count as of December 31, 2009, Foster Care Review Board. http://datacenter.kidscount.org/data/tables/2067-children-in-foster-care?loc=29&loct=2#detailed/2/any/false/867,133,38,35,18/any/4338.

Source for 2011 data: State Wards as of December 31, 2010, requested directly from the Nebraska Department of Health and Human Services - Childrenand Family Services.

Source for 2012 data: Number in Foster Care as of December 31, 2011, Nebraska Foster Care Review Board.

Source for 2013 data: Nebraska Foster Care Review Office (2013). The Nebraska Foster Care Review Office Annual Report, Children in Out-of-Home Care on Dec. 31, 2012, by County of Court Commitment and Misc. Outcome Indicators, retrieved from http://www.fcro.nebraska.gov/pdf/FCRO-Reports/2013-FCRO-Annual-Report-issued-December-2013.pdf

For population data, 2013 Vintage Population Estimates from the U.S. Census Bureau as compiled and analyzed by the Center for Public Affairs Research (CPAR) at the University of Nebraska at Omaha.

Source for 2014 data: Nebraska Foster Care Review Office (2014). The Nebraska Foster Care Review Office Annual Report, Appendix B – County Data, retrieved from http://www.fcro.nebraska.gov/pdf/FCRO-Reports/2014-FCRO-Annual-Report-December:pdf For population data, 2014 Vintage Population Estimates from the U.S. Census Bureau as compiled and analyzed by the Center for Public Affairs Research

(CPAR) at the University of Nebraska at Omaha. Source for 2015 data: Nebraska Foster Care Review Office (2015). The Nebraska Foster Care Review Office Annual Report, Appendix B – County Data, retrieved

from http://www.fcro.nebraska.gov/pdf/FCRO-Reports/2015-Q4-FCRO-Annual-Report.pdf For population data, 2015 Vintage Population Estimates from the U.S. CensusBureau as compiled and analyzed by the Center for Public Affairs Research (CPAR) at the University of Nebraska at Omaha. Note: Also available is datafrom Nebraska Department of Health and Human Services, prepared by Voices for Children, that shows the a total count (includes duplicates, however) of the number of children in out of home care over the course of calendar year 2015 (as opposed to a point in time count).

Source for 2016 data: Source for 2016 child abuse and neglect data: Nebraska Department of Health and Human Services, Division of Children and Families. Child abuse and neglect (CAN) data report, 2016. Source for population data: U.S. Census Bureau, (Annual), Vintage Population Estimates from the U.S. Census Bureau, 2016. Data compiled and analyzed by the Center for\Public Affairs Research (CPAR) at the University of Nebraska at Omaha.

High School Graduation

The high school graduation rate is the 4-year cohort graduation rate, by county.

Source for 2009 data: High School Graduation Rates, Nebraska Dept. of Education, 2008-2009 State of the Schools Report, NOTE: The source data are reported by school districts. We calculated the county-level rates by taking the weighted average of all school districts within a county. The weights are the graduated students count. http://reportcard.education.ne.gov/Main/DataDownload.aspx

Source for 2011 data: High School Graduation Rates, 2010-2011, Nebraska Dept. of Education, 2009-2010 State of the Schools Report, NOTE: The source data are reported by school districts. We calculated the county-level rates by taking the weighted average of all school districts within a county. The weights are the graduated students count. http://reportcard.education.ne.gov/20102011/Main/Home.aspx

Source for 2012 data: 6. High School Graduation Rates, Nebraska Dept. of Education, 4 Year Cohort Graduation Rate (Countywide - Public Districts) 2011-2012. Data provided by Nebraska Dept. of Education

Source for 2013 data: Nebraska Department of Education, 4 Year Cohort Graduation Rate (Countywide - Public Districts) 2012-2013. Data provided by Nebraska Department of Education.

Source for 2014 data: Nebraska Department of Education, 4 Year Cohort Graduation Rate (Countywide - Public Districts) 2013-2014. Data provided by Nebraska Department of Education.

Source for 2015 data: Nebraska Department of Education, 4 Year Cohort Graduation Rate (Countywide - Public Districts) 2014-2015. Data provided by Nebraska Department of Education and prepared by Voices for Children.

Source for 2016 data: Nebraska Department of Education, 4 Year Cohort Graduation Rate (Countywide - Public Districts) 2015-2016. Data provided by Nebraska Department of Education and prepared by Voices for Children.

Percent of Language other than English spoken at home

The percent of language other than English spoken at home among population age 5 plus is an estimate of the number of individuals over five years of age who live in a household where the language spoken at home is one other than English. Source for 2009 data: U.S. Census Bureau, 2009 QuickFacts, Language other than English spoken at home, percent ages 5+ years, 2005-2009. quickfacts.census.gov/qfd/states/31000.html

Source for 2011 data: 8. Non-English Primary Home Language, U.S. Census Bureau, 2011 QuickFacts, Language other than English spoken at home, percent ages 5+ years, 2007-2011. quickfacts.census.gov/qfd/states/31000.html

Source for 2012 data: Non-English Primary Home Language, U.S. Census Bureau American Fact Finder, Percent of People 5 Years and Over who Speak a Language other than English at Home, 2008-2012

Source for 2013 data: U.S. Census Bureau, 2009-2013-5-Year American Community Survey, Table S1601. http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk

Source of 2014 data: U.S. Census Bureau, 2010-2014 5-Year American Community Survey, Table S1601. http://factfinder.census.gov/bkmk/table/1.0/en/ACS/14_5YR/S1601/0400000US310400000US31.0500

Source of 2015 data: U.S. Census Bureau, 2011-2015 5-Year American Community Survey, Table S1601. Data prepared by Voices for Children.

Source for 2016 data: U.S. Census Bureau, 2012-2016 5-Year American Community Survey, Table S1601. Prepared by Voices for Children.

Poverty

The percent population below poverty is an estimate of the number of ndividuals with reported incomes that place them below the poverty line.

Source for 2009 data: U.S. Census Bureau, QuickFacts, Persons below poverty level, percent, 2009 State and County, quickfacts.census.gov/qfd/states/31000.html

Source for 2011 data: Percent Population Below Poverty Level, U.S. Census Bureau, QuickFacts, Persons below poverty level, percent, 2011 State and County, quickfacts.census.gov/qfd/states/31000.html

Source for 2012 data: Percent Population Below Poverty Level, U.S. Census Bureau, American Fact Finder, Percent of People Below Poverty Level in the Past 12 Months, 2008-2012 State and County.

http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk

Source for 2013 data: U.S. Census Bureau, 2009-2013 5-Year American Community Survey, Table, B17001.

Source for 2014 data: U.S. Census Bureau, 2010-2014 5-Year American Community Survey, Table, B17001.

Source for 2015 data: U.S. Census Bureau, 2011-2015 5-Year American Community Survey, Table, B17001. Data prepared by Voices for Children.

Source for 2016: U.S. Census Bureau, 2012-2016 5-Year American Community Survey, Table B17001. Prepared by Voices for Children.

Single Parent Households

The percent of children in single parent households are the number of individuals age 0-18 living in a household with either their mother or their father.

Source for 2013 data: County Health Rankings & Roadmaps Program, 2013 Nebraska Rankings Data, Retrieved from http://www.countyhealthrankings.org/rankings/data/ne

Source of 2014 data: County Health Rankings & Roadmaps Program, 2014 Nebraska Rankings Data, Retrieved from http://www.countyhealthrankings.org/app/nebraska/2015/downloads

Source for 2015 data: U.S. Census Bureau, 2015 American Community Survey 5-year estimates, Table B09005, 2012-2016. Prepared by Voices for Children.

Reading Proficiency

The number proficient reading at third grade is the number of third grade children who tested proficient, and the percent is that number divided by the total number of students tested. Crude rates are not calculated for counties with less than 10 events.

Source for 2011 data: Percent Proficient Reading at Third Grade, 2010-2011, Nebraska Dept. of Education, 2010-2011 State of the Schools Report, NOTE: The source data are reported by school districts. We calculated the county-level rates by taking the weighted average of all school districts within a county. The weights are the number of students tested for reading at third grade. http://reportcard.education.ne.gov/Main/DataDownload.aspx Source for 2013, 2012, and 2009 data: Nebraska Department of Education, 2012-2013 NSSRS Database as provided by the NDE ITS department. NeSA data from State of the Schools Report.

Source for 2013 data: Nebraska Department of Education, Early Childhood Report for School Year 2012-2013, NeSA Reading – Grade 3, Proficient Count & Total Student Test Count by County.

Source for 2014 data: Nebraska Department of Education, Early Childhood Report for School Year 6/30/2015, NeSA Reading - Grade 3, Proficient Count & Total Student Test Count by County.

Source for 2015 data: Data provided by Nebraska Department of Education and prepared by Voices for Children.

Source for 2016 data: Nebraska Department of Education Nebraska Department of Education. (n.d.) Percent proficient at 3rd grade reading, as provided by the Nebraska Department of Education. Data prepared by Voices for Children.

Population Data

Source for 2013 data: 2015 Vintage Population Estimates from the U.S. Census Bureau as compiled and analyzed by the Center for Public Affairs Research (CPAR) at the University of Nebraska at Omaha. To split 18 and 19 year olds, which can be isolated, and divided that figure by 2 to allocate to 18 year olds specifically. Note that, per CPAR, the 18/19 estimate could differ from reality is certain college counties such as Lancaster, Wayne or Dawes. Source for 2014 data: 2015 Vintage Population Estimates from the U.S. Census Bureau as compiled and analyzed by the Center for Public Affairs Research (CPAR) at the University of Nebraska at Omaha. To split 18 and 19 year olds, CPAR took the estimated number of 18 and 19 year olds, which can be isolated, and divided that figure by 2 to allocate to 18 year olds and 19 year olds and 19 year olds specifically. Note that, per CPAR, the 18/19 estimate could differ from reality is certain college counties such as Lancaster, Wayne or Dawes.

Source for 2015 data: 2015 Vintage Population Estimates from the U.S. Census Bureau as compiled and analyzed by the Center for Public Affairs

estimated number of 18 and 19 year olds, which can be isolated, and divided that figure by 2 to allocate to 18 year olds and 19 year olds specifically.

Research (CPAR) at the University of Nebraska at Omaha. To split 18 and 19 year olds, CPAR took the estimated number of 18 and 19 year olds, which can be isolated, and divided that figure by 2 to allocate to 18 year olds and 19 year olds specifically. Note that, per CPAR, the 18/19 estimate could differ from reality is certain college counties such as Lancaster, Wayne or Dawes. Additional data quality note: Per CPAR, "figures for Washington County do not fully reflect reality as the Census estimates program is still including students in the Dana College dorms, which are now closed. There were 357 such students in dorms in the 2010 census. So Washington County figures shown here are likely around 357 too high. We are trying to get this corrected but they will not be appropriate even in the new 2016 vintage data set to come out this spring – it'll be the following spring when the correction is made. The estimates are likely reflecting the movement of students who were not living in dorms adequately." Note also that for this year, data is also available with the "standard" age breakdowns; the source for this data is the same and this data was prepared by Voices for Children.

Source for 2016 data: 2016 Vintage Population Estimates from the U.S. Census Bureau as compiled and analyzed by the Center for Public Affairs Research (CPAR) at the University of Nebraska at Omaha. To split 18 and 19 year olds, CPAR took the

Nebraska Risk and Protective Factor Student Survey Results for 2016

Profile Report:

Region 1



Sponsored by:

Nebraska Department of Health and Human Services
Division of Behavioral Health

Administered by:

Bureau of Sociological Research University of Nebraska-Lincoln

NRPFSS is part of the Student Health and Risk Prevention (SHARP) Surveillance System that administers surveys to youth enrolled in Nebraska schools

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Introduction and Overview

This report summarizes the findings from the 2016 Nebraska Risk and Protective Factor Student Survey (NRPFSS). The 2016 survey represents the seventh implementation of the NRPFSS and the fourth implementation of the survey under the Nebraska Student Health and Risk Prevention (SHARP) Surveillance System. SHARP consists of the coordinated administration of three school-based student health surveys in Nebraska, including the NRPFSS, the Youth Risk Behavior Survey (YRBS), and the Youth Tobacco Survey (YTS). The Nebraska SHARP Surveillance System is administered by the Nebraska Department of Health and Human Services and the Nebraska Department of Education through a contract with the Bureau of Sociological Research at the University of Nebraska-Lincoln. For more information on the Nebraska SHARP Surveillance System please visit http://bosr.unl.edu/sharp.

As a result of the creation of SHARP and its inclusion of the NRPFSS, the administration schedule shifted from the fall of odd calendar years to the fall of even calendar years. The first three administrations of the NRPFSS occurred during the fall of 2003, 2005, and 2007, while the fourth administration occurred during the fall of 2010, leaving a three-year gap (rather than the usual two-year gap) between the most recent administrations. The 2012, 2014, and 2016 administrations also occurred during the fall, as will future administrations, taking place during even calendar years (i.e., every two years).

The NRPFSS targets Nebraska students in grades 8, 10, and 12 with a goal of providing schools and communities with local-level data. As a result, the NRPFSS is implemented as a census survey, meaning that every public and non-public school with an eligible grade can choose to participate. Therefore data presented in this report are not to be considered a representative statewide sample. The survey is designed to assess adolescent substance use, delinquent behavior, and many of the risk and protective measures that predict adolescent problem behaviors. The NRPFSS is adapted from a national, scientifically-validated survey and contains information on risk and protective measures that are locally actionable. These risk and protective measures are also highly correlated with substance abuse as well as delinquency, teen pregnancy, school dropout, and violence. Along with other locally attainable sources of information, the information from the NRPFSS can aid schools and community groups in planning and implementing local prevention initiatives to improve the health and academic performance of their youth.

Table 1.1 provides information on the student participation rate for Region 1 and the state as a whole. The participation rate represents the percentage of all eligible students who took the survey. If 60 percent or more of the students participated, the report is generally a good indicator of the levels of substance use, risk, protection, and delinquent behavior in Region 1. If fewer than 60.0 percent participated, a review of who participated should be completed prior to generalizing the results to your entire student population.

2016 NRPFSS Sponsored by:

The 2016 NRPFSS is sponsored by Grant #5U79SP020162-04 under the Strategic Prevention Framework Partnerships for Success Grant for the Substance Abuse and Mental Health Services Administration Center for Substance Abuse Prevention through the Nebraska Department of Health and Human Services Division of Behavioral Health.



SHARP | NRPFSS 2016

The Bureau of Sociological Research (BOSR) at the University of Nebraska – Lincoln (UNL) collected the NRPFSS data for this administration as well as the 2010, 2012, and 2014 administrations. As part of BOSR's commitment to high quality data, BOSR is a member of the American Association of Public Opinion Researchers (AAPOR) Transparency Initiative. As part of this initiative, BOSR pledges to provide certain methodological information whenever data are collected. This information as it relates to the NRPFSS is available on BOSR's website (www.bosr.unl.edu/sharp).

Table 1.1. Survey Participation Rates, 2016

		Region 1 2016		State 2016		
	Number Participated	Number Enrolled	Percent Participated	Number Participated	Number Enrolled	Percent Participated
Grade						
8th	894	1120	79.8%	10803	25792	41.9%
10th	859	1078	79.7%	9580	25029	38.3%
12th	669	1086	61.6%	8327	25541	32.6%
Total	2422	3284	73.8%	28710	76362	37.6%

Note. The grade-specific participation rates presented within this table consist of the number of students who completed the NRPFSS divided by the total number of students enrolled within the participating schools. For schools that were also selected to participate in the YRBS or YTS, the participation rate may be adjusted if students were only allowed to participate in one survey. In these cases, the number of students who completed the NRPFSS is divided by the total number of students enrolled that were not eligible to participate in the YRBS or YTS.

Again, the goal of the NRPFSS is to collect school district and community-level data and not to collect representative state data. However, state data provide insight into the levels of substance use, risk, protection, and delinquent behavior among all students in Nebraska. In 2016, 37.6 percent of the eligible Nebraska students in grades 8, 10, and 12 participated in the NRPFSS.

The 2016 participation rate for the state as a whole remains lower than the 60.0 percent level recommended for representing students statewide, so the state-level results should be interpreted with some caution. Failure to obtain a high participation rate statewide is, in part, due to low levels of participation within Douglas and Sarpy Counties, which combined had a 17.2% participation rate in 2016 compared to 51.3% for the remainder of the state.

Table 1.2 provides an overview of the characteristics of the students who completed the 2016 survey within Region 1 and the state overall.

Table 1.2. Participant Characteristics, 2016

	-	gion 1 016		ate 16
	n	%	n	%
Total students	2445		28940	
Grade				
8th	894	36.6%	10803	37.3%
10th	859	35.1%	9580	33.1%
12th	669	27.4%	8327	28.8%
Unknown	23	0.9%	230	0.8%
Gender				
Male	1207	49.4%	14737	50.9%
Female	1226	50.1%	14129	48.8%
Unknown	12	0.5%	74	0.3%
Race/Ethnicity				
Hispanic*	611	25.0%	4702	16.2%
African American	43	1.8%	953	3.3%
Asian	26	1.1%	587	2.0%
American Indian	105	4.3%	783	2.7%
Pacific Islander	14	0.6%	88	0.3%
Alaska Native	2	0.1%	35	0.1%
White	1607	65.7%	21376	73.9%
Other	26	1.1%	341	1.2%
Unknown	11	0.4%	75	0.3%

Notes. *Hispanic can be of any race. In columns, n=number or frequency and %=percentage of distribution.

Overview of Report Contents

The report is divided into the following three sections: (1) substance use; (2) violence, bullying, and mental health; and (3) feelings and experiences at home, school, and in the community. Within each section, highlights of the 2016 survey data for Region 1 are presented along with state and national estimates, when available.

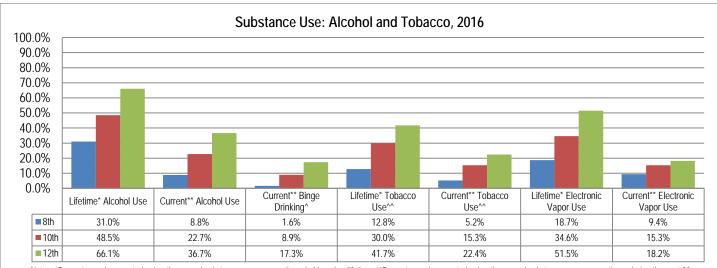
When there are less than 10 survey respondents for a particular grade, their responses are not presented in order to protect the confidentiality of individual student participants. However, those respondents are included in regional- and state-level results. Furthermore, if a grade level has 10 or more respondents but an individual question or sub-group presented in this report has less than 10 respondents then results for the individual item or sub-group are not reported.

A number of honesty measures were also created to remove students who may not have given the most honest answers. These measures included reporting use of a fictitious drug, using a substance during the past 30 days but not in one's lifetime, answering that the student was not at all honest when filling out the survey, and providing an age and grade combination that are highly unlikely. Students whose answers were in question for any one of these reasons were excluded from reporting. For Region 1, 89 students met these criteria.

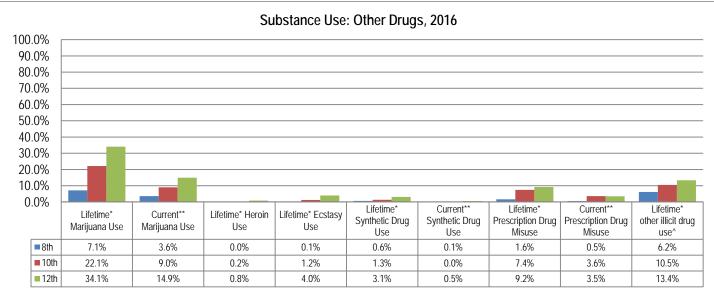
Substance Use

This section contains information on the use of alcohol, tobacco, and other drugs among 8th, 10th, and 12th grade students in Nebraska. In addition, there is information on the sources and places of use, attitudes and perceptions, sources for help with problems, and awareness of prevention messages. To provide greater context for the results from Region 1, overall state and national results are presented when available. As discussed earlier, the state results are not to be considered a representative statewide sample. The national data source is the Monitoring the Future survey, administered by the Institute for Social Research at the University of Michigan and sponsored by the National Institute on Drug Abuse and National Institutes of Health.

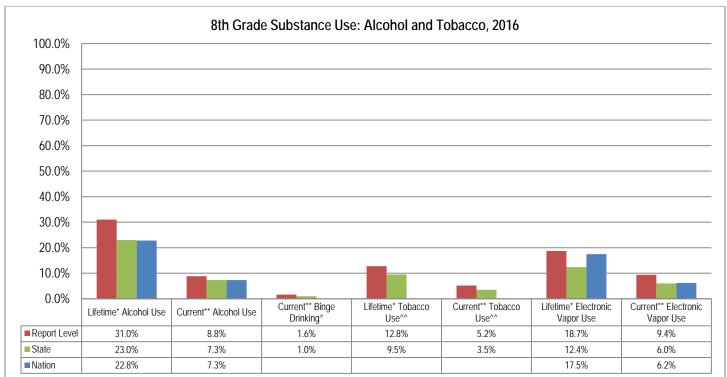
Substance Use



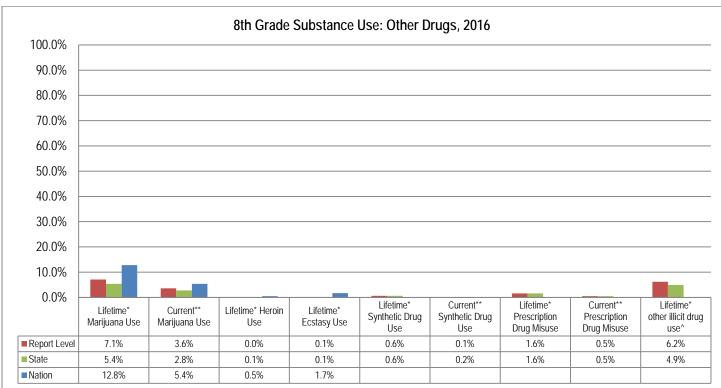
Notes. "Percentage who reported using the named substance one or more times in his or her lifetime. ""Percentage who reported using the named substance one or more times during the past 30 days. "Percentage who reported having five or more drinks of alcohol in a row, within a couple of hours. ""Tobacco use includes cigarettes and smokeless tobacco. Individual results for each can be found in Appendix A.



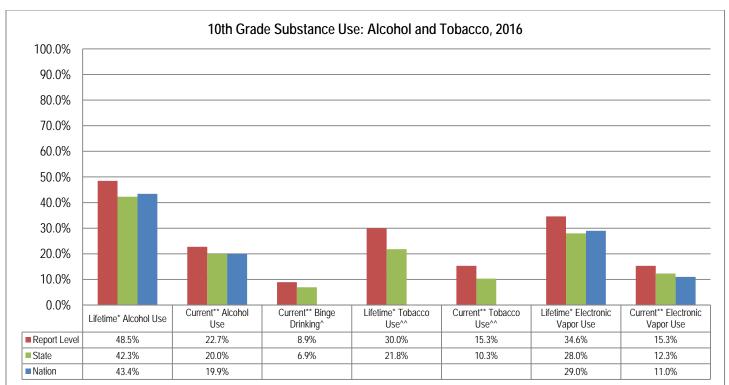
Notes. *Percentage who reported using the named substance one or more times in his or her lifetime. **Percentage who reported using the named substance one or more times during the past 30 days. ^Other illicit drugs includes LSD or other psychodelics, cocaine/crack, meth, inhalants, sterioids, other performance-enhancing drugs, and non-prescription over the counter drugs. Results by these drugs can be found in Appendix A.



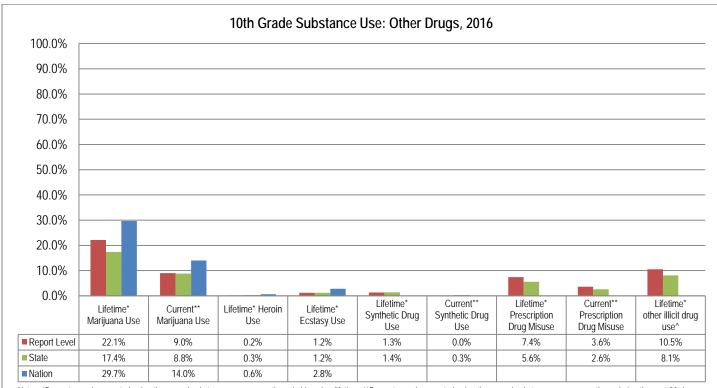
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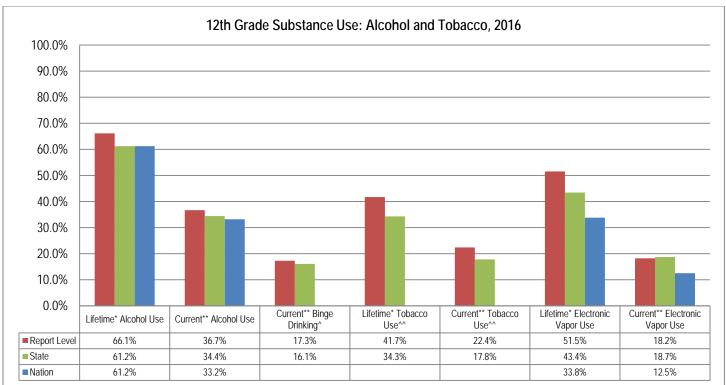
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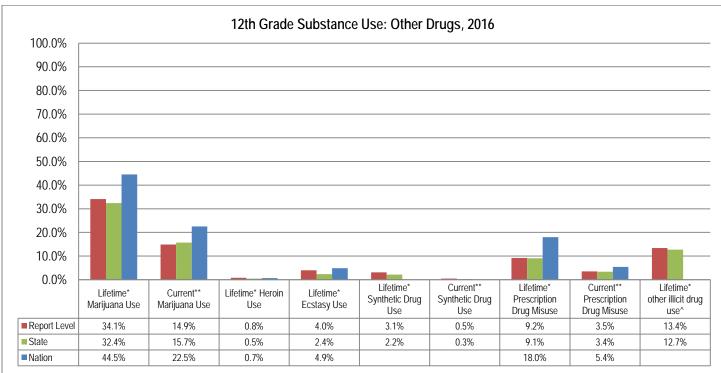
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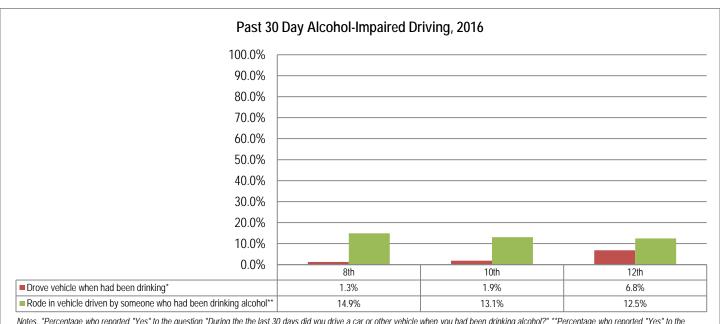


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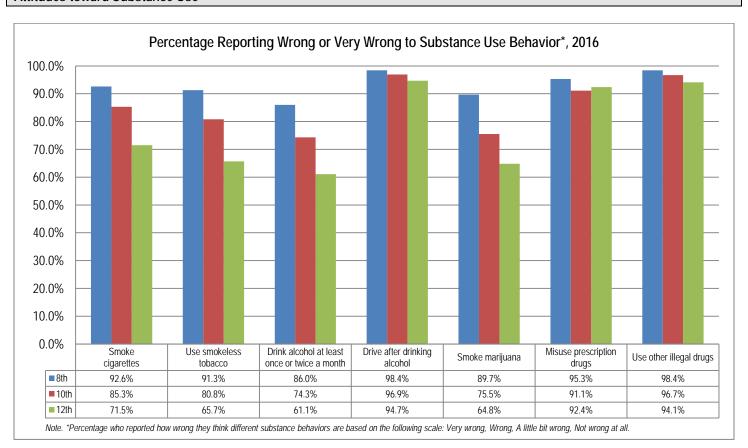
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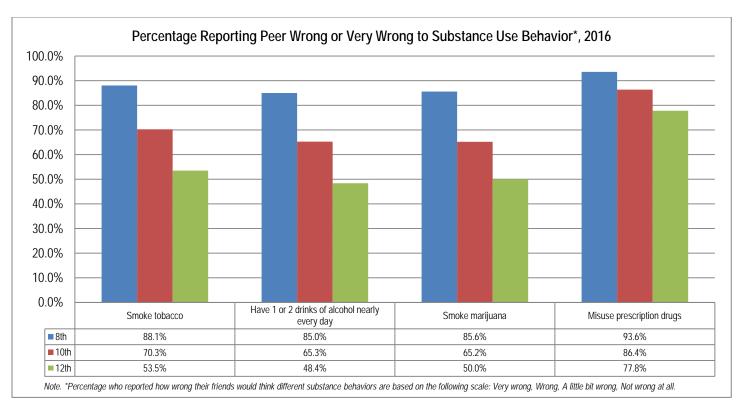
Past 30 Day Alcohol-Impaired Driving

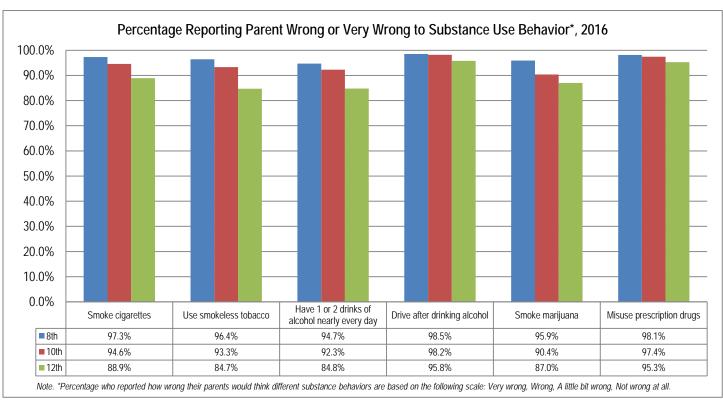


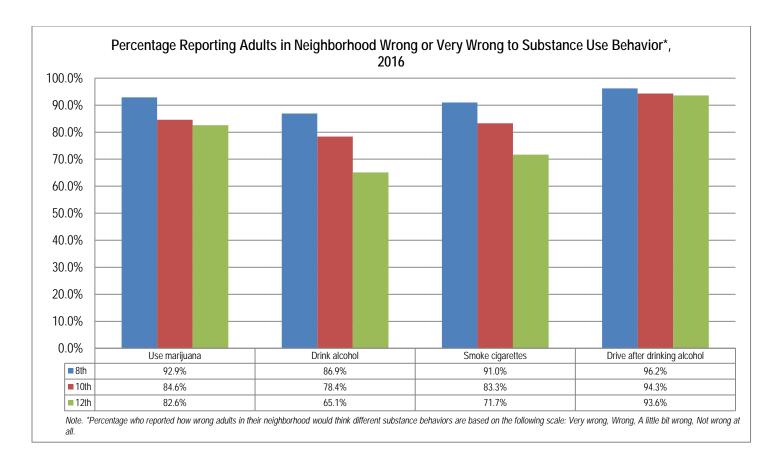
Notes. "Percentage who reported "Yes" to the question "During the the last 30 days did you drive a car or other vehicle when you had been drinking alcohol?" **Percentage who reported "Yes" to the question "During the the last 30 days did you ride in a car or other vehicle driven by someone who had been drinking alcohol?"

Attitudes toward Substance Use

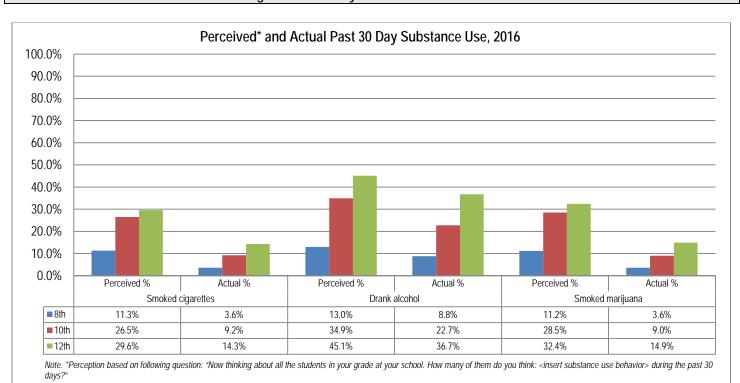




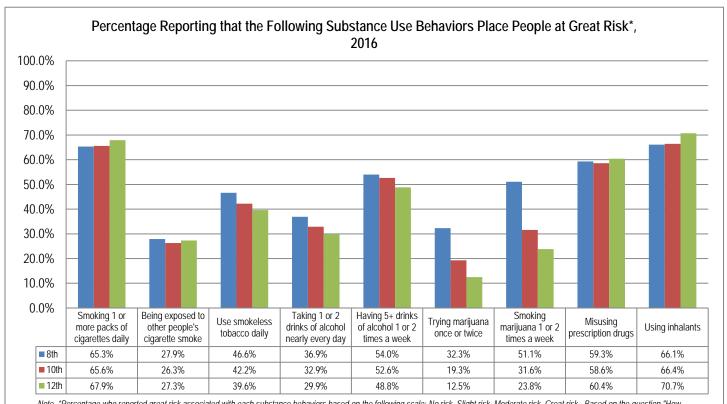




Perceived and Actual Substance Use during the Past 30 Days

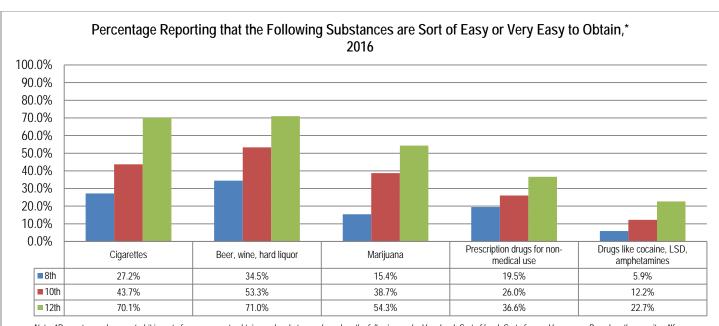


Perceived Risk from Substance Use

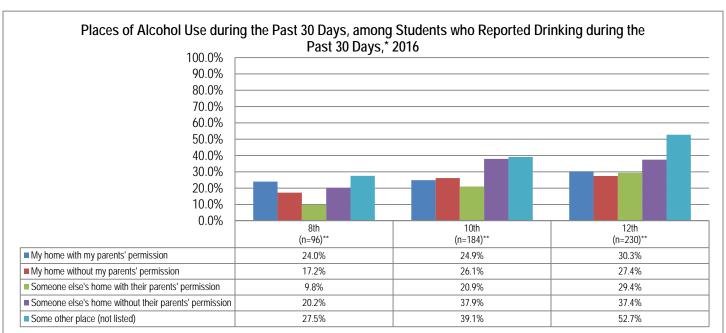


Note. *Percentage who reported great risk associated with each substance behaviors based on the following scale: No risk, Slight risk, Moderate risk, Great risk. Based on the question "How much do you think people risk harming themselves (physically or in other ways) if they: <insert substance use behavior>."

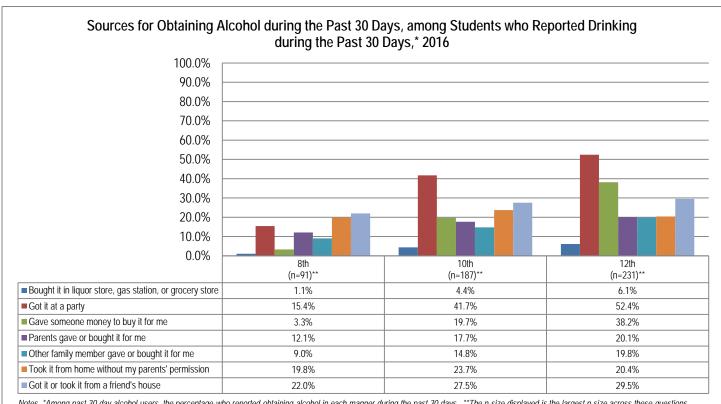
Perceived Availability of Substances

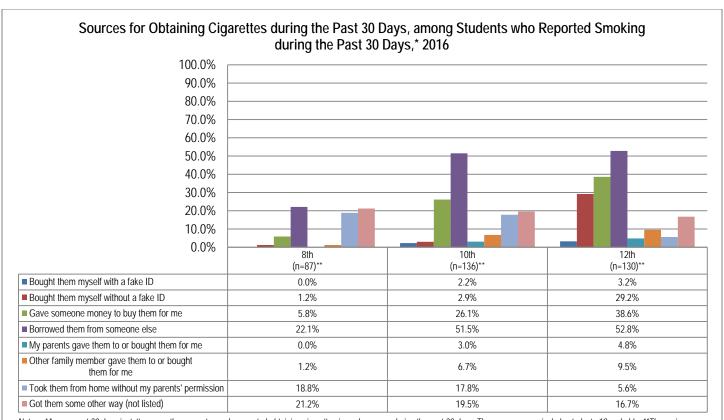


Places and Sources of Substance Use during the Past 30 Days

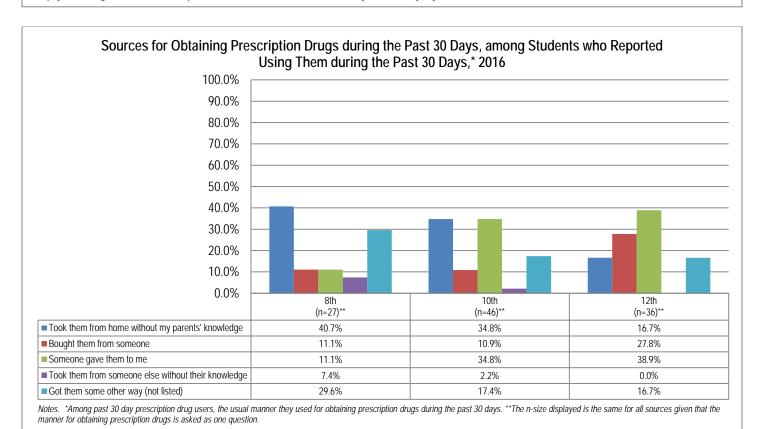


Notes. *Among past 30 day alcohol users, the percentage who reported using alcohol in each manner during the past 30 days. **The n-size displayed is the largest n-size across these questions. Because each place is asked individually, the n-size may vary across places.

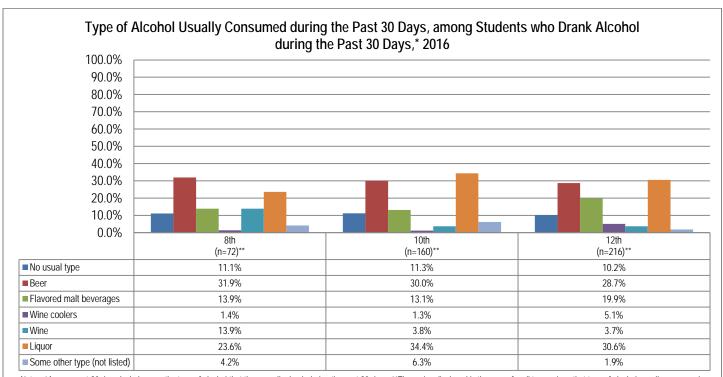




Notes. *Among past 30 day cigatette users, the percentage who reported obtaining cigarettes in each manner during the past 30 days. These scores may include students 18 and older.**The n-size displayed is the largest n-size across these questions. Because each source is asked individually, the n-size may vary across sources.

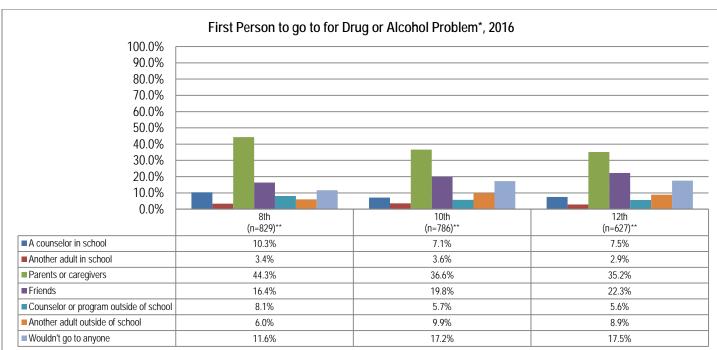


Types of Alcohol Used Among Those Who Used Alcohol during the Past 30 Days



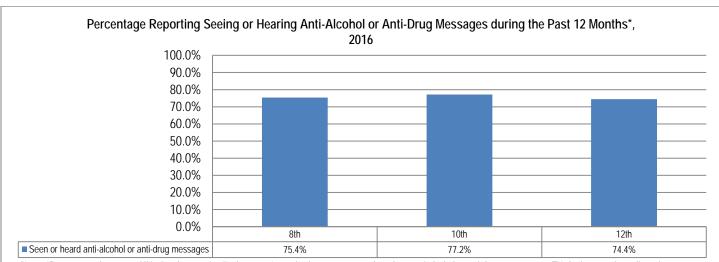
Notes. *Among past 30 day alcohol users, the type of alcohol that they usually drank during the past 30 days. **The n-size displayed is the same for all types given that type of alcohol usually consumed is asked as one question.

Sources for Help with Drug or Alcohol Problem



Notes. "Based on the question "If you had a drug or alcohol problem and needed help, who is the first person you would go to?" **The n-size displayed is the same for all sources given that source of help for a drug or alcohol problem is asked as one question.

Anti-Alcohol and Anti-Drug Message Awareness

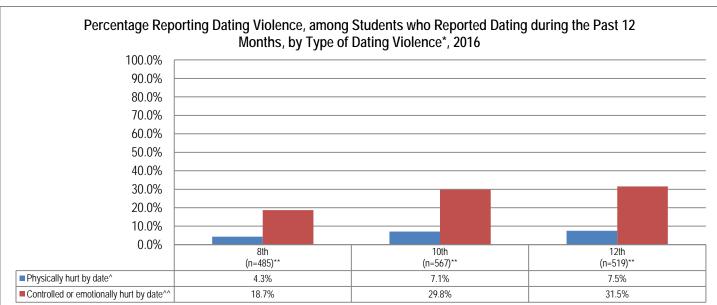


Notes. *Percentage who reported "Yes" to the question "In the past 12 months, have you seen or heard any anti-alcohol or anti-drug messages on TV, the internet, the radio, or in newspapers or magazines?"

Violence, Bullying, and Mental Health

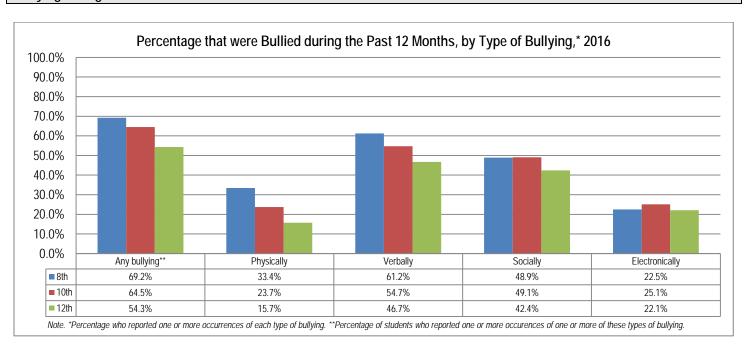
This section contains information on dating violence, bullying, anxiety, depression, and suicide among 8th, 10th, and 12th grade students in Nebraska. In addition, there is information on sources for help with depression and suicide ideation and attitudes toward the future.

Dating Violence during the Past 12 Months

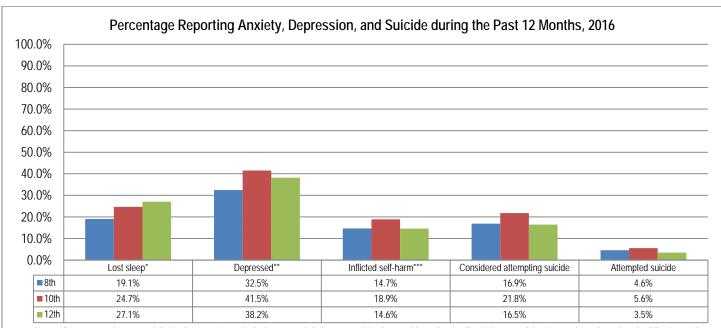


Notes. *Among students that dated or went out with anyone during the past 12 months, the percentage who reported experiencing each type of dating violence. ^Percentage who reported "Yes" to the question "During the past 12 months, did someone you were dating or going out with physically hurt you on purpose?" ^^Percentage who reported one or more occurrences of being purposely controlled or emotional hurt by someone they were dating or going out with during the past 12 months. **The n-size displayed is the largest n-size across these questions. Because each type is asked individually, the n-size may vary across types.

Bullying during the Past 12 Months

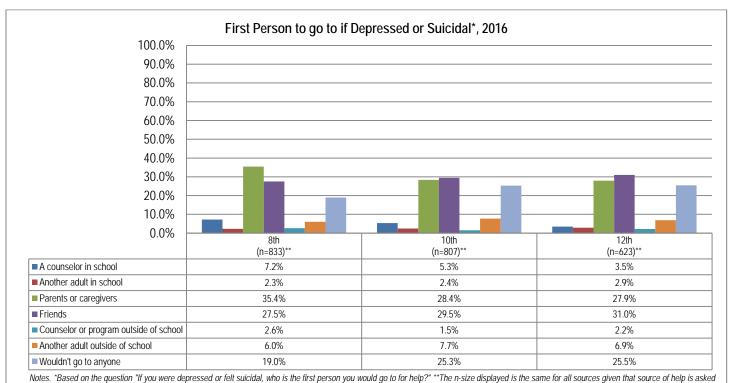


Anxiety, Depression, and Suicide during the Past 12 Months

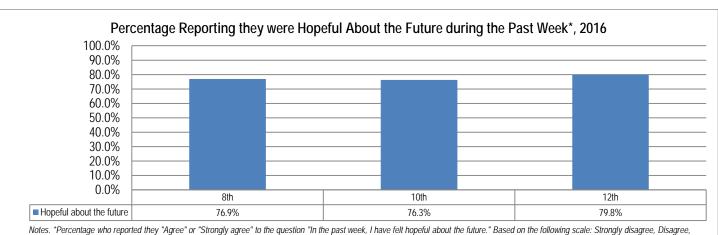


Notes. *Percentage who reported during the past 12 months being so worried about something they could not sleep well at night most of the time or always based on the following scale: Never, Rarely, Sometimes, Most of the time, Always. **Percentage who reported "Yes" to the question "During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?" ***Percentage who reported "Yes" to the question "During the past 12 months, did you hurt or injure yourself on purpose without wanting to die?"

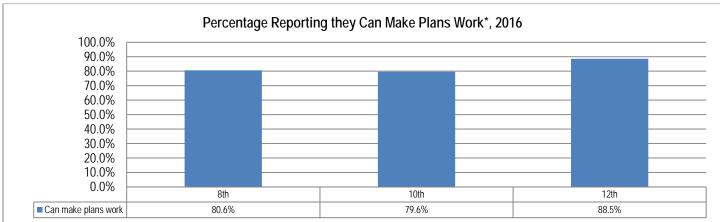
Sources for Help if Depressed or Suicidal



Attitudes toward the Future



Notes. "Percentage who reported they "Agree" or "Strongly agree" to the question "In the past week, I have felt hopeful about the future." Based on the following scale: Strongly disagree, Disagree Agree, Strongly agree.

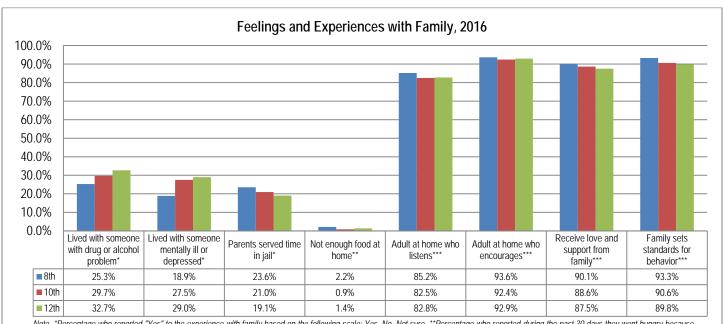


Notes. "Percentage who reported they "Agree" or "Strongly agree" to the question "When I make plans, I am almost certain that I can make them work." Based on the following scale: Strongly disagree, Disagree, Agree, Strongly agree.

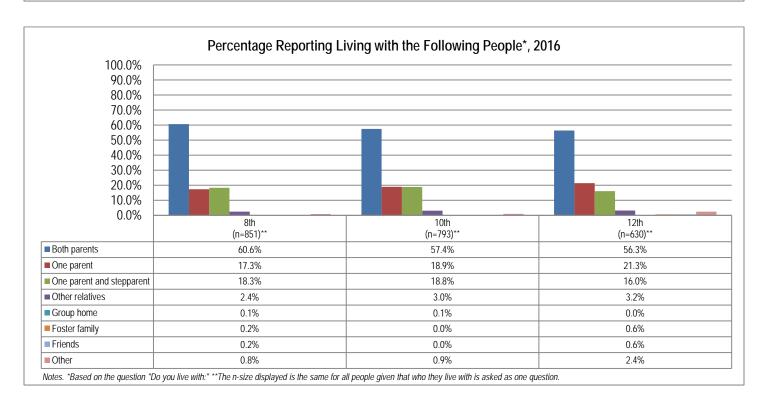
Feelings and Experiences at Home, School, and in the Community

This section contains information on feelings and experiences with family, at school, and in the community for 8th, 10th, and 12th grade students in Nebraska.

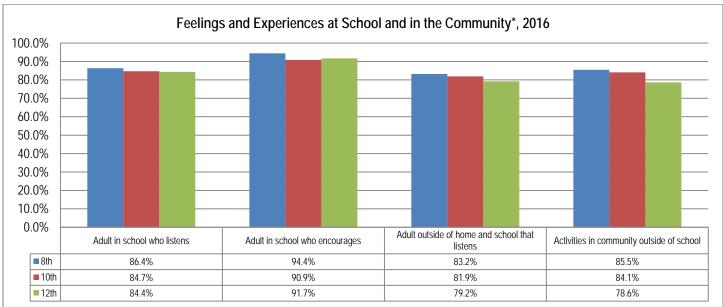
Feelings and Experiences with Family



Note. "Percentage who reported "Yes" to the experience with family based on the following scale: Yes, No, Not sure. *"Percentage who reported during the past 30 days they went hungry because there was not enough food in their home most of the time or always based on the following scale: Never, Rarely, Sometimes, Most of the time, Always. ***Percentage who reported they agree or strongly agree to the experience or feeling with family based on the following scale: Strongly disagree, Disagree, Agree, Strongly agree.



Feelings and Experiences at School and in the Community



Note. *Percentage who reported they agree or strongly agree to each of the experiences or feelings at school or in the community based on the following scale: Strongly disagree, Disagree, Agree, Strongly agree.

Tips for Using the NRPFSS Results

As prevention training and technical assistance providers, you play an important role in prevention by teaching skills, imparting knowledge, and in helping to establish a strong foundation of character and values based on wellness, including prevention of substance use, suicide, and other risky behaviors. Preventing mental and/or substance use disorders and related problems in children, adolescents, and young adults is critical to promoting physical health and overall wellness.

There are a variety of strategies (or interventions) that can be used to increase protective factors and reduce the impact of risk factors. Prevention in schools is often completed through educational programs and school policies and procedures that contribute to the achievement of broader health goals and prevent problem behavior.

Prevention strategies typically fall into two categories:

Environmental Strategies

- o These strategies effect the entire school environment and the youth within it.
 - An example of an environmental strategy would be changing school policy to not allow athletes to play if they are caught using substances.

Individual Strategies

- o These strategies target individual youth to help them build knowledge, wellness, and resiliency.
 - An example of an individual strategy would be providing a curriculum as part of a health class about the harms of substances.

The following websites provide listings of evidence-based practices:

The National Registry of Evidence-based Programs and Practices (NREPP)

- This is a searchable online evidence-based repository and review system designed to provide the public with reliable information on more than 350 mental health and substance use interventions that are available for implementation.
- Website: http://nrepp.samhsa.gov/landing.aspx

• The Office of Juvenile Justice and Delinquency Prevention's (OJJDP's) Model Programs Guide (MPG)

- This contains information about evidence-based juvenile justice and youth prevention, intervention, and reentry programs. It is a resource for practitioners and communities about what works, what is promising, and what does not work in juvenile justice, delinquency prevention, and child protection and safety.
- Website: https://www.ojjdp.gov/mpg/

The Suicide Prevention Resource Center

- o This has a variety of suicide prevention resources available.
- Website: http://www.sprc.org/

In accordance with LB923, public school staff in Nebraska are required to complete at least 1 hour of suicide awareness and prevention training each year. To learn more, visit the Nebraska Department of Education website at https://www.education.ne.gov/Safety/index.html. Resources on Bullying Prevention and Suicide Prevention are listed.

A variety of print materials on behavioral health topics including depression, trauma, anxiety, and suicide are available from the Substance Abuse and Mental Health Services Administration (SAMHSA). Materials include toolkits for school personnel, educational fact sheets for parents and caregivers, wallet cards and magnets with the National Suicide Prevention Lifeline. The direct link to the SAMHSA store is https://store.samhsa.gov/home.

Another resource for kids, teens, and young adults is the **Boys Town National Hotline**, specifically the **Your Life Your Voice campaign**. Wallet cards and other promotional materials are available at no cost for distribution to students, school staff, parents, etc. **http://www.yourlifeyourvoice.org/Pages/home.aspx**. Remember, talking about suicide with a student does not put an idea of attempting suicide in a student's mind.

Additional contacts for tips on data use and prevention resources can be found in Appendix B.

APPENDIX A: Trend Data

Outcomes	Definition	Grade 8							Grade 10						Grade 12							
Outcomes		2003	2005	2007	2010	2012	2014	2016	2003	2005	2007	2010	2012	2014	2016	2003	2005	2007	2010	2012	2014	2016
	Alcohol	44.7%	50.5%	44.5%	31.9%	31.7%	20.9%	31.0%	68.6%	72.2%	69.0%	61.4%	53.5%	50.6%	48.5%	79.1%	84.1%	80.1%	74.4%	69.0%	62.6%	66.1%
	Cigarettes	29.0%	29.4%	17.7%	17.5%	21.5%	12.8%	9.5%	51.5%	41.7%	40.4%	36.0%	32.1%	30.6%	23.3%	61.8%	53.5%	52.1%	49.6%	50.2%	36.5%	34.5%
	Smokeless tobacco	12.1%	11.7%	11.5%	13.0%	11.7%	5.1%	5.6%	27.5%	25.0%	21.4%	23.7%	21.0%	19.6%	15.5%	37.7%	34.4%	31.3%	33.7%	34.9%	27.0%	25.8%
	Marijuana ¹	8.2%	9.7%	7.0%	8.6%	10.2%	6.7%	7.1%	33.8%	22.7%	25.4%	25.6%	23.3%	24.9%	22.1%	40.3%	37.2%	34.4%	33.2%	36.8%	30.0%	34.1%
	LSD/other psychedelics	0.4%	1.4%	0.5%	0.3%	0.1%	0.2%	0.8%	3.1%	1.4%	1.8%	1.9%	1.9%	2.3%	3.4%	3.2%	3.7%	2.1%	3.3%	4.3%	3.2%	6.3%
Lifetime	Cocaine/crack	1.4%	1.3%	1.3%	0.7%	0.9%	0.4%	0.2%	6.7%	2.1%	3.1%	2.4%	2.5%	2.3%	1.2%	7.5%	5.6%	5.4%	2.6%	3.5%	3.6%	4.3%
Substance Use	Meth ²	0.6%	1.1%	0.9%	0.4%	0.8%	0.1%	0.3%	5.4%	1.4%	1.4%	1.1%	1.2%	0.7%	0.4%	5.5%	3.4%	2.0%	1.9%	1.3%	1.5%	1.7%
USC	Inhalants	11.5%	12.5%	12.1%	7.8%	6.2%	5.5%	5.0%	13.3%	12.3%	12.2%	7.3%	6.2%	5.5%	4.0%	10.9%	10.6%	8.5%	6.5%	4.4%	3.4%	4.5%
	Steroids	NA	1.3%	0.9%	0.7%	0.6%	0.4%	0.6%	NA	1.7%	1.5%	0.8%	0.7%	0.4%	0.5%	NA	1.3%	0.9%	2.1%	0.6%	0.3%	0.5%
	Other performance- enhancing drugs	NA	2.6%	2.0%	0.3%	0.4%	0.5%	0.4%	NA	6.2%	6.7%	3.5%	3.6%	2.0%	1.0%	NA	12.3%	11.7%	8.7%	6.5 %	4.5%	2.3%
	Prescription drugs ³	NA	7.6%	5.4%	1.9%	2.1%	1.6%	1.6%	NA	13.8%	12.5%	8.5%	6.0%	6.5%	7.4%	NA	15.5%	14.2%	15.6%	14.7%	7.4%	9.2%
	Non-prescription drugs ⁴	NA	NA	3.1%	2.9%	1.9%	1.8%	1.0%	NA	NA	6.0%	5.2%	5.1%	4.2%	3.9%	NA	NA	5.3%	6.9%	7.1%	5.2%	5.4%
	Alcohol	18.0%	17.4%	11.9%	9.4%	9.8%	6.1%	8.8%	42.6%	39.7%	35.7%	25.6%	19.0%	18.8%	22.7%	52.6%	50.2%	45.6%	35.6%	32.4%	25.9%	36.7%
5	Binge drinking	NA ⁹	NA ⁹	5.1%	4.5%	4.8%	3.0%	1.6%	NA ⁹	NA ⁹	21.5%	16.7%	12.6%	11.3%	8.9%	NA ⁹	NA ⁹	30.7%	23.8%	22.4%	18.2%	17.3%
Past 30 Day Substance	Cigarettes	5.6%	8.1%	3.8%	6.2%	7.4%	4.3%	3.6%	23.2%	17.5%	16.2%	14.3%	13.6%	13.6%	9.2%	25.3%	25.4%	26.4%	21.5%	26.0%	14.6%	14.3%
Use	Smokeless tobacco	3.7%	4.2%	5.2%	5.0%	4.8%	2.2%	3.1%	11.8%	12.2%	10.9%	12.4%	10.4%	12.1%	9.4%	16.9%	15.8%	18.0%	17.1%	18.1%	15.8%	14.0%
	Marijuana ¹	3.6%	3.7%	2.2%	2.3%	3.6%	2.8%	3.6%	16.5%	9.9%	11.7%	11.8%	9.9%	9.5%	9.0%	16.7%	14.5%	12.8%	14.1%	14.2%	9.9%	14.9%
	Prescription drugs ³	NA	3.3%	2.6%	0.6%	1.2%	0.4%	0.5%	NA	6.4%	5.2%	2.7%	3.2%	2.5%	3.6%	NA	7.6%	5.7%	5.3%	5.4%	2.1%	3.5%
Past 30 Day Perceived Substance Use	Other illegal drugs	NA ⁵	NA ⁵	NA ⁵	7.7%	7.7%	6.2%	6.0%	NA ⁵	NA ⁵	NA ⁵	15.2%	19.8%	14.6%	14.8%	NA ⁵	NA ⁵	NA ⁵	14.5%	19.4%	13.2%	16.5%
Ago of First	Smoked cigarettes	22.4%	24.5%	16.0%	12.3%	13.9%	9.2%	7.0%	26.7%	21.5%	21.3%	12.6%	12.1%	11.6%	9.3%	22.9%	23.3%	17.7%	11.6%	12.7%	7.0%	9.3%
Age of First Use	Drank alcohol	32.2%	35.3%	27.9%	21.8%	21.9%	16.7%	21.1%	23.1%	24.4%	22.6%	14.4%	13.3%	14.5%	12.6%	17.5%	20.6%	15.4%	11.7%	9.7%	10.8%	10.5%
(12 or Younger)	Drank alcohol regularly	4.7%	3.8%	3.2%	2.6%	3.3%	2.0%	1.4%	3.1%	2.6%	3.1%	1.6%	2.4%	2.3%	1.2%	2.5%	2.0%	2.0%	1.4%	1.3%	1.8%	1.5%
/ Juligoi)	Smoked marijuana	3.3%	6.3%	4.6%	3.2%	5.0%	2.5%	2.9%	6.9%	6.2%	4.6%	3.3%	5.8%	6.5%	3.9%	5.4%	4.4%	3.8%	3.2%	2.9%	4.1%	3.1%

Outcomes	Definition	Grade 8								Grade 10							Grade 12						
		2003	2005	2007	2010	2012	2014	2016	2003	2005	2007	2010	2012	2014	2016	2003	2005	2007	2010	2012	2014	2016	
Experiences at School	Grades were A's and B's	NA	NA	73.8%	74.5%	76.1%	74.2%	78.0%	NA	NA	75.2%	73.5%	72.5%	74.3%	72.9%	NA	NA	75.4%	78.7%	72.9%	75.2%	76.1%	
	Interesting courses	31.6%	46.8%	41.1%	37.2%	31.1%	34.5%	30.7%	22.5%	38.2%	37.9%	29.1%	31.8%	30.0%	33.3%	26.4%	41.9%	40.3%	36.3%	36.2%	32.5%	35.6%	
	Learning important for future	70.1%	72.3%	68.8%	75.2%	69.7%	67.2%	66.5%	52.6%	60.0%	54.7%	64.5%	56.8%	49.1%	52.3%	39.4%	50.5%	45.7%	48.5%	47.9%	42.4%	42.4%	
	Enjoy being in school	48.6%	46.9%	42.7%	43.3%	38.1%	40.6%	38.4%	34.1%	41.0%	37.5%	32.7%	32.6%	32.0%	33.4%	35.2%	40.8%	40.5%	39.0%	32.3%	31.4%	32.2%	
	Teacher acknowledgement ⁶	NA	NA	NA	73.8%	67.9%	67.3%	74.0%	NA	NA	NA	77.6%	68.6%	60.9%	71.0%	NA	NA	NA	72.8%	68.3%	66.4%	68.7%	
	Chances to get involved6	96.0%	94.6%	96.2%	94.5%	94.0%	94.3%	93.2%	96.4%	95.7%	94.9%	96.8%	95.1%	94.9%	95.3%	95.0%	96.5%	96.0%	93.2%	92.6%	95.3%	94.6%	
	Chances to talk with teachers ⁶	89.0%	87.4%	83.0%	85.7%	82.9%	83.1%	82.3%	82.8%	84.8%	81.3%	87.7%	83.3%	81.9%	85.9%	87.6%	87.8%	87.6%	86.2%	85.6%	89.7%	86.8%	
	Feel safe ⁶	NA	NA	NA	89.5%	82.1%	86.9%	84.0%	NA	NA	NA	87.7%	85.0%	80.6%	84.7%	NA	NA	NA	92.6%	87.3%	87.4%	86.6%	
	Okay to cheat ⁶	19.6%	24.2%	24.4%	13.0%	17.4%	10.2%	14.2%	46.7%	41.5%	44.6%	28.7%	24.2%	25.0%	23.9%	46.0%	39.6%	42.4%	31.9%	30.6%	28.9%	32.4%	
Experiences with Family	Parents know where I am ^{6,7}	88.2%	88.1%	92.0%	92.6%	92.7%	94.3%	92.5%	86.4%	87.8%	87.0%	87.1%	90.8%	92.3%	91.1%	83.7%	82.4%	84.1%	82.4%	86.6%	89.3%	91.0%	
	Clear substance use rules ⁶	93.4%	92.5%	94.2%	92.7%	92.5%	94.4%	92.3%	89.0%	89.6%	89.6%	89.8%	90.8%	90.2%	88.8%	88.7%	85.4%	89.6%	87.1%	86.8%	91.4%	86.4%	
	Help for personal problems ^{6,7}	82.2%	81.2%	80.9%	85.3%	84.1%	83.7%	84.9%	75.8%	78.1%	73.6%	77.4%	79.9%	79.2%	82.2%	80.9%	78.2%	77.7%	78.0%	77.1%	80.5%	80.5%	
	Ask about homework ^{6,7}	92.2%	88.8%	90.5%	91.3%	91.0%	92.3%	90.8%	83.8%	84.4%	80.0%	83.3%	83.3%	83.3%	85.5%	74.5%	75.7%	72.0%	74.4%	74.4%	77.6%	79.2%	
	Important to be honest with parents ^{6,7}	93.4%	90.5%	90.7%	91.6%	93.5%	92.2%	90.7%	89.9%	87.6%	85.1%	87.7%	89.3%	89.5%	87.4%	90.7%	86.0%	87.9%	87.9%	86.4%	89.3%	86.1%	
	Discussed dangers of alcohol ⁷	NA	NA	NA	49.0%	48.9%	51.3%	44.4%	NA	NA	NA	49.4%	48.6%	47.6%	39.6%	NA	NA	NA	46.0%	46.4%	42.3%	37.1%	
	Hard to buy alcohol from store	NA	NA	NA	81.5%	76.8%	79.6%	81.8%	NA	NA	NA	75.3%	75.8%	75.8%	81.3%	NA	NA	NA	78.5%	76.7%	75.5%	74.2%	
Experiences	Caught by police if drinking ^{6,8}	37.1%	35.2%	37.0%	NA	41.8%	47.8%	60.4%	20.4%	22.7%	25.4%	NA	30.5%	30.8%	45.3%	22.9%	23.4%	25.0%	NA	27.3%	29.9%	37.0%	
in	Caught by police if drinking and driving ^{6,8}	NA	NA	NA	NA	72.4%	74.8%	79.6%	NA	NA	NA	NA	61.3%	64.9%	73.3%	NA	NA	NA	NA	60.4%	64.4%	67.5%	
Community	Caught by police if smoking marijuana ^{6,8}	50.1%	52.1%	51.2%	NA	57.2%	62.0%	69.6%	24.8%	32.2%	34.4%	NA	38.1%	39.6%	49.0%	21.3%	24.8%	27.3%	NA	32.2%	34.9%	40.1%	
	Adults I can talk to ⁶	73.4%	70.7%	60.2%	NA	58.5%	62.2%	64.5%	56.6%	71.3%	55.8%	NA	58.4%	54.6%	54.9%	54.1%	70.4%	57.8%	NA	51.7%	58.2%	49.5%	
	Okay to steal ⁶	7.0%	9.5%	10.4%	4.7%	6.5%	4.2%	5.0%	12.7%	12.9%	14.5%	7.1%	5.7%	6.0%	6.1%	8.9%	10.1%	13.3%	7.5%	4.9%	5.9%	5.3%	
Other Experiences	Okay to beat people up ⁶	46.9%	43.8%	46.0%	41.3%	40.1%	34.5%	36.2%	57.8%	53.6%	53.5%	53.4%	44.8%	43.8%	44.9%	60.9%	53.6%	58.8%	48.3%	45.9%	44.1%	46.0%	
	Gang involvement	5.7%	6.8%	7.6%	7.5%	6.1%	4.2%	4.2%	6.8%	7.8%	10.4%	5.8%	5.7%	5.9%	4.4%	3.6%	5.1%	5.7%	5.0%	4.6%	4.2%	3.2%	

Notes

- *This indicates that there were less than 10 cases.
- **This indicates that the criteria for a report were not met.
- 1 Prior to 2010, the question asked students if they had "used marijuana (grass, pot) or hashish (hash, hash oil)." In 2010, the wording was changed to "used marijuana."
- ²Prior to 2010, the question asked students if they had "taken 'meth' (also known as 'crank', 'crystal', or 'ice'." In 2010, the wording was changed to "used methamphetamines (meth, speed, crank, crystal meth, or ice)."

 ³Prior to 2010, the question asked students if they had "used prescription drugs (such as Valium, Xanax, Ritalin, Adderall, Oxycotin, or sleeping pills without a doctor telling you to take them." In 2010, the wording was
- changed to "used prescription drugs (such as Valium, Xanax, Ritalin, Adderall, Oxycotin, Vicodin, or Percocet) without a doctor telling you to take them."
- ⁴Prior to 2010, the question asked students if they had "used a non-prescription cough or cold medicine (robos, DMX, etc.) to get high and not for medical reasons." In 2010, the wording was changed to "used a non-prescription cough or cold medicine (robo, robo-tripping, DMX) to get high and not for medical reasons."
- ⁵In 2010, this question was changed significantly. As a result, trend data are not available prior to 2010.
- ⁶Prior to 2016, the question was asked using the following scale: NOI, no, yes, YES!. In 2016, the question scale changed to the following: Strongly disagree, Disagree, Agree, Strongly agree.
- ⁷Prior to 2016, the question asked students about their "parents" or "mom or dad". In 2016, the wording was changed to "parents or caregivers".
- ⁸Prior to 2016, the question asked students "Would a kid be caught by police, if he or she:". In 2016, the wording was changed to "You would be caught by the police if you:".
- Prior to 2007, the question asked students about binge drinking "during the past 2 weeks". In 2007, the wording was changed to ask students about binge drinking "during the past 30 days". Because of this difference, trend data are not available prior to 2007.

Note. The number of students and/or school districts included from year to year could vary due to schools participating in some administrations and not others. As a result, these trend findings should be approached with some caution.

APPENDIX B: Contacts for Prevention

Division of Behavioral Health

Nebraska Department of Health and Human Services Renee Faber, Behavioral Health Services Manager renee.faber@nebraska.gov

301 Centennial Mall South

P.O. Box 95026

Lincoln, NE 68509-5026 (402) 471-7772 phone (402) 471-7859 fax

http://www.dhhs.ne.gov/Behavioral_Health/

Tobacco Free Nebraska

Nebraska Department of Health and Human Services

Amanda Mortensen

Tobacco Free Nebraska Program Manager amanda.mortensen@nebraska.gov

301 Centennial Mall South

P.O. Box 95026

Lincoln, NE 68509-5026

(402) 471-9270 phone

(402) 471-6446 fax

www.dhhs.ne.gov/tfn

Nebraska Department of Education

Chris Junker, Safe and Healthy Schools Coordinator chris.junker@nebraska.gov

123 N. Marian Road

Hastings, NE 68901

(402) 462-4187 ext. 166 phone

(402) 460-4773 fax

www.education.ne.gov

Nebraska Department of Highway Safety

Fred Zwonechek, Administrator

Fred.Zwonechek@nebraska.gov

5001 S. 14th Street

P.O. Box 94612

Lincoln, NE 68509

(402) 471-2515 phone

(402) 471-3865 fax

http://www.transportation.nebraska.gov/nohs/

This report was prepared for the State of Nebraska by the Bureau of Sociological Research (BOSR) at the University of Nebraska-Lincoln.

bosr@unl.edu

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P.O. Box 880325

Lincoln, NE 68588-0325

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For information about SHARP and/or the NRPFSS:

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University of Nebraska-Lincoln

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(402) 472-3692 phone

(402) 472-4568 fax

http://bosr.unl.edu/sharp

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PANHANDLE COMPRENEHSIVE YOUTH SERVICES PLAN 2014-2018

APPENDIX E

TRANSITION SERVICES FOR OLDER YOUTH 16-24 FRAMEWORK DOCUMENT

Panhandle Transitional Services for Youth 14-24 Framework Document

Eligibility

Young people age 16-24 who are on their own with no family or guardian stabilizers or supports, including:

- 1. Youth who are current or former foster youth.
- 2. Youth who have been in foster care but who are not aging out of the system to receive benefits through LB 216.
- 3. Youth who have received in-home support services or out of home services from DHHS as a result of abuse or neglect in their lifetime.
- 4. Youth who have been involved in multiple systems including DHHS, Juvenile Justice, and Mental /Behavioral Health, are not currently in Probation, and have unmet needs or require a single coordinated plan.

Priority Response

In the event that the project is at or near capacity new services for youth will be given the following priority in the numerical order above.

Former Wards from Out of State

Out of state former wards may be fully served by the program as follows:

- Must be a "resident" of the community by having some sort of permanent connections to the community such as being in a relationship, enrolled in college, working, etc.
- There must be an intent/need/desire by the youth to stay here.
- There has to be some established other supports being put in place after a period of time. Youth cannot be solely connected to these resources.

Overview: Success Benchmarks

The benchmarks are the core components of services. Youth are assisted in assessing and obtaining these bench marks. Youth may choose which services they receive. Youth successfully transitioning into adulthood will have:

Housing:

- Result Indicator: Youth resides in housing that is safe and stable. If independent housing youth
 has successfully lived in the housing for at least 3 months and can sustain the housing
 financially).
- Result Indicator: Housing is able to be retained by youth.

Education:

• Result Indicator: Youth has minimally received a GED or High School Diploma at exit from program. We encourage and support youth to aim higher.

Employment:

• Result Indicator: Youth has held a job for 90 days. The aim is that the job has a living wage and support for healthcare.

Daily Living Skills/Resources:

- Result Indicator: Youth has obtained and demonstrated the skills to thrive independently as
 determined in the individual goals but can generally meet daily living needs including housing,
 basic needs, and transportation.
- Result Indicator: Youth has developed sufficient "thriving assets" to manage daily living.

Health Care and Mental Health Care:

- Result Indicator: Youth has the capacity to access needed health and mental health resources.
- Result Indicator: Youth understands and places priority on wellness, basic health and needed mental health services.

Permanence and Belonging:

- Result Indicator: Youth has at least three trusted, informal supports that can be relied on in times of crises and positive celebration.
- Result Indicator: Youth has informal supports capable of providing guidance and legitimate supports to meet physical, emotional, and spiritual needs.

Economic Stability:

 Result Indicator: Youth has skills and resources available to meet daily living requirements for ongoing education or work.

Transition Components

1. Youth Council and Youth Leadership

Youth voice is the foundation of the transitional project. The Youth Council has been expanded to include youth from various circumstances and throughout the region. The Youth Council, comprised of youth from all backgrounds, including foster care, provides leadership to this and other youth projects.

The Youth Leadership Institute in conjunction with Western Nebraska Community College provides leadership courses, certificates and service learning projects throughout the Panhandle. The Youth Leadership Institute curriculum includes:

1. Communication Skills

- Basic Written and Oral
- Electronic Communications

2. Self Awareness

- Personality Traits
- Life Mapping

3. Team Building/Relationships

- Understanding Boundaries
- 4. Decision Making and Goal Setting
- 5. Self-Care
 - Wellness Practices
 - Drug and Alcohol Education

6. Community Connections

- Service Planning
- Service Learning
- Completing Service Learning projects

7. Diversity

- Race, Ethnicity, Culture, Gender, LGBTQ
- 8. Global Awareness
- 9. Entrepreneurship
- 10. Youth Adult Partnership Skills (Intergenerational Relationships)
- 11. Life Skills (as required)
 - Responsible Money Handling/Finances

- Renting
- Employment/ Job Readiness Applications/Resumes
- Interview Skills
- Dress for Success
- Marketing Self
- Nutrition
- Basic Hygiene

2. Opportunity Passport

Opportunity Passport is available to youth who have been DHHS wards in foster care. Opportunity passport includes financial education, coaching and starting an Individual Development Account (IDA). Opportunity Passport Services include:

- 1. Financial literacy classes and coaching are available to any eligible youth. Financial literacy services include:
 - Financial education and training classes
 - Credit repair and credit repair counseling
 - Individual counseling and supports
 - 2 Creation of an individual development account (IDA) is only available to former foster youth at this time.
 - a. Policies and procedures for the IDA's are available through the Opportunity Passport coordinator.
 - 2.12 Provide Opportunity Passport participant's information to the Nebraska Foster Youth Council regularly; and
 - 2.13 Track participant use of Door Openers and provide related accurate and timely information to the Foundation.

3. Needs Based Funds

The Needs Based Fund is an emergency fund available to youth who are between the ages 16-24, and is a current or former ward with an active case at age 16 or older. Those who are eligible can receive up to a \$500.00 grant available over a 12 month period of time. The Needs Based Fund will cover the following unless there is another resource available:

- Housing = rent, deposit, furniture, appliances, supplies
- Utility bills = electric or water
- Transportation to work or school = vehicle purchase (must have employment and savings to pay for insurance, licensing, and maintenance), bus passes, repairs, insurance, licensing, gas, bicycle
- Food

- Parenting Expenses: food for children, clothing, etc
- Education/vocational trainings/personal development: College classes, GED, computer (for youth in college or other post high school programs), books, supplies (directly for job/educational programs), study abroad program, etc.

4. Service System

Foundations

Services are provided by a youth specialist determined from an interagency team of persons working collaboratively to support youth in meeting their goals. The general parameters of the services are as follows:

- Youth are provided the level of services required for transition to adulthood. For example, some youth may only want (and require) Opportunity Passport Services. Others may require case managed supports in multiple domains.
- Services are a support to the youth and respect self-determination.
- Services are person -centered, strength based, build protective factors and assets, are individualized and promote thriving.
- Services are provided through trauma informed care practices.
- Extensive services, those requiring planning with youth in many domains, may extend to 18 months in duration as long as the youth is engaged, making progress and is eligible by age.
- The youth and youth specialist create a plan based on the needs and interests of the youth
- Stabilizations services are generally more intensive at the onset as the youth housing is stabilized and the youth is engaged through assessment and relationship building with the youth specialist. Up to 10 hours a week may be expended with youth during the first month of the services. By the second through fourth month of services the youth receives an average of six hours per week of one to one contact. To the end of the 12th 18th month the average is 10-12 hours per month.
- Aftercare contact is provided to assure independence and thriving. Aftercare averages 5
 hours per month for the first few months and decreases to support contacts as desired by the
 youth.
- Youth may receive access support to an array of services as determined by assessment.
- Youth may also participate in groups, classes, workshops and a Youth Leadership institute to obtain skills and relationships.

PPHHS Sub- Contracts

Panhandle Partnership for Health and Human Services sub-contracts with entities to provide support resources to youth as requested by youth. The following are required for subcontracts:

- Proof of Independent Business or 501-c-3
- Demonstration of Financial Stability (Audit, Accountant Letters, 990)
- Background Checks for all staff who will be unsupervised with youth (Sex Offense, Child/Adult Abuse, State Patrol Criminal, Out of State Criminal)

Proof of Insurance (Certificate of Liability Insurance) General Liability; \$1M Property
Damage, \$2M Aggregate, Workers Comp, \$1M Auto Liability, \$1M Umbrella Excess over
Primary

Sub Contracts cover a grant year. Agencies are notified electronically about new youth to be served.

Common Coordinated Screening, Intake, Assessment and Referral Process

No Wrong Door

Services may be accessed through any partner organization in the region. If the youth is new to the services the partner organization will assist the youth in completing the application form and in contacting the Central Navigator for further action.

Central Navigator Role

The Central Navigator role includes:

- Serving as a central access point with youth who referred or self-refer to the program to get them linked to requested services and case management.
- Provide support and communication regarding resources with youth and agencies that are already accessing services.
- Provide transition link for youth from DHHS or eligible youth from Probation.
- Maintaining an updated list of resources
- Tracking data and developing data reports
- Maintain accountability to youth, partners and funders
- Promote the collaborative work of the Panhandle Partnership

Outcome: A referral system, common screening, intake, and assessment processes assure quality equitable service delivery for all youth.

Indicator: A part time service Navigator oversees the referral, eligibility screening, common intake, assessment and allocation of resources to assure fidelity to process, access to needed services and efficient allocation of resources and collection of data.

Indicator: A central referral system provides expedient access to needed services.

Indicator: An effective efficient basic screening process that provides access to needed services for eligible youth within 3 hours of contact.

Indicator: A common Intake process is completed on all youth admitted to the program.

Indicator: Youth have supporting in self-assessing their needs for medical and dental services. **Indicator:** Youth have continuous mental/behavioral health care or access to assessments with the provider of their choice.

Array of Youth Support Services

Safe and Stable Housing

Indicator: Youth 16-24 have safe and stable housing.

Emergency and Stabilization Services (first two weeks)

Upon initial contact the first action that is taken, before screening and assessment is to assure the youth immediately has safe housing. Resources, both financial and physical, for "emergency" or "stabilization" housing are extremely limited in the Panhandle. These resources will be increased through use of funds to increase access to:

- Safe Space (use of a group care beds for stabilization if the youth is at risk of harming self or being harmed by others, if the youth is under the age of 18 or if the youth requires observation or assessment.)
- Emergency Host Homes
- Access to motels that meet basic health codes and where youth are safe.

Practice Guidelines:

- Youth under 18 years of age will be placed in supervised housing.
- No youth will be in emergency housing for longer than two weeks.
- All youth in emergency housing will have a youth specialist who will see them at least five times a week.

Long Term (week 2 to 18 months)

Safe and stable housing will remain a priority throughout the rest of the service and is a requirement for successful termination of services. As youth needs are met in this area youth may progress through a series of housing opportunities until the youth is in a long term housing arrangement with the skills and capacity to meet future housing needs. These options may include:

- Transitional Living Planning and Preparation in a group living facility.
- Host Homes primarily with persons who are known to the youth and are found to meet basic health safety requirements.
- Transitional Living apartments
- Independent Living apartments
- College Dorms

Regional resources will be braided to provide this array of services. These resources include but are not limited to:

- Supportive Services for Rural Homeless Youth- Housing
- Housing Vouchers
- HUD Funded Housing
- Sunrise Community Services (Chadron)

Support Services:

Indicator: Youth 16-24 have access to an array of formal and informal supportive services which enhance protective factors and thriving indicators.

In addition to the Medical, Dental and Mental Health services reported earlier youth may receive a number of individualized support services as needed and based on the youth plan outcomes. These services may include but not be limited to:

- Transitional Living Housing
- Apartment Rental Down Payment Support
- Utilities/Deposits Support
- Emergency Support for Utilities and Rent under extenuating circumstances
- Obtaining Drivers Licenses
- Credit Recovery
- Financial Education
- Basic Living Skills and Supports
- Educational Supports and Counseling through
- Pre –Employment and Employment Skills
- Employment Coaching and Supports
- Entrepreneurship

A list of service fees is found in Schedule A. In addition there are many existing services which will be accessible to the youth and will not be duplicated.

4 ADMINISTRATIVE STRUCTURE

Project Management (Contract)

PPHHS contracts with an organization to provide the day to day Project Management for youth transitions services. This process assures that funds flow and services are rendered in a timely manner.

Deliverables will include:

- 5.1 Contracting for services
- 5.2 Managing resources to adapt to regional area capacity needs
- 5.3 Review of data and demographics both of those served and those not served to identify system barriers and gaps.
- 5.4 Identification of policies and practices impacting youth success.
- 5.5 Promote system change at the local and state level to improve outcomes for future youth

Continuous Quality Improvement

A Project Oversight Team comprised of youth and representatives from DHHS, Probation, Project Manager and Agency Directors will provide oversight and continuous quality improvement. The group will be chartered through Panhandle Partnership for Health and Human Services and will report to the Board. The functions of this group will include but not be limited to:

- Review of data and demographics both of those served and those not served to identify system barriers and gaps.
- Identification of policies and practices impacting youth success.
- Promote system change at the local and state level to improve outcomes for future youth.

PHHS Administration

- 7.1 Maintain collaborative relationships between agencies.
- 7.2 PPHHS Board will submit status reports, and financial reports to Nebraska Children and Families Foundation.
- 7.3 PPHHS will maintain all grant communications with NCFF
- 7.4 Coordinate a Project Oversight Team

Please note: Joan Frances time to assure effective implementation of this project is contracted through NCFF.

Schedule A: Fee Structure

The Transitional Youth Funds are accessed after all other resources are utilized. The funds cannot supplant existing agency funds. The following rates are proposed based on current level of payments to provide for services and using DHHS contracts and Probation rates for services as a guide:

Case/Care management /Youth Specialist:

		1.25		
	Range	hours	A=15%	Travel
\$11.00	\$13.50	\$16.87	\$19.40	\$13.50
\$13.51	\$15.00	\$18.75	\$21.56	\$15.00
\$15.01	\$16.50	\$20.37	\$23.42	\$16.50
\$16.51	\$18.00	\$22.50	\$25.87	\$18.00
\$18.01	\$19.50	\$24.37	\$30.18	\$19.50
\$19.51	\$22.00	\$27.50	\$32.33	\$22.00
\$22.01	\$23.50	\$29.37	\$33.77	\$23.50
\$23.51	\$25.00	\$31	\$35.93	\$25.00
\$25.01	\$26.50	\$33.12	\$38.08	\$26.50
\$26.51	\$28.00	\$35.00	\$40.25	\$28.00
\$28.01	\$30.00	\$37.50	\$43.12	\$30.00
\$30.01	\$31.50	\$39.37	\$45.27	\$31.50

Mileage for Youth Transportation:

Federal Mileage Rate

This would include mileage to transport youth to appointments, youth leadership events, life skills courses, job searching, or temporary emergency transportation to work and/or school while the youth is developing a longer term transportation plan.

Emergency Hygiene/Food Supplies:

\$100.00

This would include providing youth emergency hygiene and/or food items when they move into their apartment. This would help start the youth in their apartment/host home/other living situation if they are unable to provide for their own initial start-up. This would be a one-time start-up that could be kept on-hand in order to access at any time day or night.

Weekly Grocery/Cleaning Stipend:

\$30/week

This grocery stipend is intended to help a youth provide for basics in their home while they are working toward employment, obtaining food stamps, or other means of groceries. Length of time is determined by the case plan and work with the Youth Specialist/Care Manager. Youth can use the \$30 to purchase food items (not fast food or cooked deli food) that can be prepared in their apartment and/or cleaning supplies for their apartment and/or hygiene items if needed. This stipend is not intended to cover all grocery expenses. Youth are expected to be working toward goals to independence.

Host Home Stipends:

\$400/month

This stipend is paid to a qualified* Host Home Parent when a youth is housed with them. Youth must be provided their own space (bedroom or similar space) and access to all other necessities of the

home. Host Home parent must provide for reasonable requests for transportation from the youth including school (if at all possible) and/or employment. HH Parents must provide food for basic meals and snacks. Youth can also qualify for a grocery/hygiene stipend if needed to assist with their own needs for food and personal items.

- * qualified Host Home Parent includes passing applicable back ground checks, completing required training, and working with the Youth Specialist/Care Manager.
- * host home reimbursement may be prorated on a daily of weekly basis if the length of stay is less than one month.

Emergency Host Homes:

Host homes used for a short term stay 14-21 days at the most. Stipends are paid to a qualified host home parent on a nightly basis of \$25/night. Same guidelines are used as above.

Apartment Deposits:

This can be deposits used for youth to start on their own in an apartment. This would be approximately \$400/youth. 4-5 youth per/year.

Utility Connection Fees:

Electric/gas deposits must be paid in order for youth to move into their own apartment/house. These cost approximately \$150 per utility.

Mental Health Evaluations:

Negotiated Rates

This service includes providing for youth to receive a mental health evaluation and counseling if they have no other means of payment. This will be coordinated with the Counselor of their choice.

Emergency Physical/Dental Co-Pays:

This service includes providing for the \$20 co-payment for youth to be seen at the CAPWN Health clinic in Scottsbluff or for youth to attend a medical or dental provider in their own community. This would cover the initial cost to receive a basic checkup or physical if youth have no other means of payment available. If the youth is in an outlying area, arrangements will be made with clinics in those communities.

After the initial emergency services youth specialists will work with youth to research insurance possibilities through Medicaid and the insurance exchange. Native American youth specialists will work with youth and their families to assure youth are enrolled through their tribes in order to access insurance. Youth may receive an insurance stipend to offset the cost of insurance as part of their care plan. The capacity to maintain insurance will be a consideration in final termination of services and personal independence.

Employment Services:

Youth who were not quite ready for an outside job or are having a hard time securing an outside
job may receive a stipend to be placed in a "coached" or "mentored" position to gain
employment skills.

Educational Support:

• Support may be given to youth to complete Training Courses Fees (WNCC), College Entrance fees and GED fees as per the care plan.

Jnifor	orms and Materials for Employment	
•		shoes/outfit.
	Panha	andle Transitional Services for Older Youth Framework