# SAN DIEGO COUNTY COMPREHENSIVE STRATEGY FOR YOUTH, FAMILY, AND COMMUNITY

## COUNTY BOARD OF SUPERVISORS RESOLUTION

### **TABLE OF CONTENTS**

Executive Summary	• • • • • • • • •	i
Introduction		
Key to Success	1	
Vision	1	
Mission	2	
Guiding Principles	2	
Comprehensive Strategy Themes	3	
Risk Data and Definitions		
Risk Data Profile	•••••	4
Definitions of a Continuum of Prevention and Graduated Sanctions	5	
Assessment of Existing Resources in the Region		
Identified Gaps in the Continuum	6	
Addressing Juvenile Crime		
San Diego's Plan for Addressing Juvenile Crime	10	
Prevention Through Graduated Sanctions	19	
('Infrastructure')	•••••	20
Accomplishments and Branching Impacts	•••••	21
Implementation		
Implementing the Comprehensive Strategy	23	
Benchmarks: How Will We Know When We Get There?	23	

### **Forecasting the Future**

Major Trends	25
Projections	27
Summary	28
Appendix	29
TABLE OF CONTENTS (CONTINUED)	
Attachment 1: Summary of Community Risk Profile Data	31
Attachment 2: Inventory of Existing Resources	33
Attachment 3: Gender Specific Programming, County and State Arrest Rate Comparisons	
Attachment 4: San Diego County Report Card	51
Attachment 5: San Diego Regional Risk & Resiliency  V Checkup	
Attachment 6: San Diego Region Comprehensive Strategy Work Groups	

### Introduction\_\_\_\_

During the last decade, San Diego County experienced an upswing in juvenile crime and violence. Youth used and sold drugs. Youth armed themselves with weapons. Juvenile homicide rates rose. Dire predictions of a future filled with "super predators" frightened the public. Curfews were reinstated. "Zero Tolerance" initiatives were enacted for drugs and weapons on school campuses, and school police forces came into existence. Legislative and political agendas within the state and county responded to the community's cry for tighter controls on juveniles in the interest of public safety. This was a shift from a child welfare focus to one of juvenile accountability.

In early 1996, San Diego County Board of Supervisor Ron Roberts met with Shay Bilchik, Administrator, United States Department of Justice, Office of Juvenile Justice and Delinquency Prevention (OJJDP), to discuss the strengths and weaknesses of San Diego County in dealing with juvenile delinquency. San Diego County was looking for new approaches, cutting edge strategies and guidance from experts across the country to continue and expand our efforts in promoting positive development of youth and preventing juvenile delinquency. San Diego County was ready and able to implement OJJDP's new Comprehensive Strategy for Serious, Violent, and Chronic Juvenile Offenders. As a result, San Diego became one of the first three sites in the nation to be provided with technical assistance from OJJDP for the implementation of this strategy.

In May 1996, consultants hired by OJJDP from the National Council on Crime and Delinquency (NCCD) and Developmental Research and Programs (DRP) conducted a site visit to San Diego to begin the planning and training processes for the Comprehensive Strategy. During this visit, NCCD and DRP provided training outlining the goals and objectives of the Comprehensive Strategy for more than 50 county and community policy makers and key leaders. Following key leader buy-in, in December 1996, the consultants conducted a three-day training for more than 200 line staff and community members. During this training, individuals, agencies and organizations made a full commitment to join and participate in, both as initial planners and long-term members with, the San Diego County Comprehensive Strategy Team. Two task forces (Graduated Sanctions & Prevention) were created to continue the planning process for the Comprehensive Strategy Plan over the next year. In April 1997, the Comprehensive Strategy Planners altered their original structure and combined the two task forces into one. It was important to note that San Diego believed it was essential to have a united team, working side by side, with clear communication as the planning process was moving forward. San Diego's Comprehensive Strategy Team (CST) formed six work groups to deal specifically with issues of resource development, coordination, community engagement, advocacy, key leader buy-in and information sharing. The technical assistance from the NCCD and DRP culminated in a two-day workshop in October 1997, with more than 150 participants developing six promising approaches to fill the needs and gaps identified in the continuum of services, from prevention through graduated sanctions.

### Shared Vision\_\_\_\_\_

San Diego's Comprehensive Strategy Plan was developed with input from diverse sources that contributed experience, professional expertise, national, state and local data and statistics, and many creative ideas and methodologies. Researchers, front-line staff, executives and community representatives worked together to craft a course of action. Our strategic plan proposes an integrated systems approach with an expectation of sustained and measured results. This plan was based upon the shared vision that all of San Diego's youth will develop into Caring, Literate,

Educated And Responsible (CLEAR) community members. In order to achieve this vision, the Comprehensive Strategy Plan and Team must continue to represent a regional, coordinated effort and stay focused as it continues to work to strengthen communities and families to develop healthy, responsible youth through prevention, intervention and appropriate graduated sanctions.

M	ISSION	
_ I W I		

The mission of the Comprehensive Strategy Team is to:

- Strengthen families and communities by developing youth who are Caring, Literate, Educated And Responsible (CLEAR);
- Support core institutions, such as schools, health care providers, government agencies, faith communities and community-based organizations in their role in developing youth;
- Emphasize prevention as the most cost-effective approach to the reduction of delinquency;
- Provide immediate and effective intervention with youth at their first sign of problems or inappropriate behavior;
- Institute a broad range of care and rehabilitative services;
- Reduce duplication of effort and fill service gaps; and
- Help communities to define and establish effective collaboration.

### KEY TO SUCCESS\_\_\_\_\_

Policy makers, key leaders, youth and family-serving organizations and community members worked together from the beginning as a strong team in a coordinated fashion to create a vision, mission, strategies and design for the San Diego County Comprehensive Strategy Plan. It is vital to include, from the onset, community residents and youth, in discussions and planning. Their input, buy in and support are crucial to the implementation and sustainability of the Comprehensive Strategy Plan. It was the first time a collaboration of this magnitude occurred in the county specific to juvenile justice. Leadership and support from San Diego's policy and decision makers for the vision, process of cross-system teamwork, and support of community grass roots efforts are key to the success of the Comprehensive Strategy in San Diego County.

### GUIDING PRINCIPLES\_\_\_\_\_

San Diego's Comprehensive Strategy Plan will serve as a blueprint for community action and collaboration. It provides a broad spectrum of recommendations that will help mobilize youth, adults, agencies and organizations to strengthen youth, families and communities. The strategy must make everyone aware of our shared vision. No single individual, organization or agency can address all of the factors contributing to juvenile delinquency and violence. Working together, however, local leaders, representatives of public and private groups, schools and individual community members, including youth, can bring about systems change and strategies that work. Borrowing from OJJDP, the San Diego County Comprehensive Strategy Plan begins with the same five general principles:

Guiding Principle # 1 - We must strengthen families. We must recognize that the family has primary responsibility to instill values and provide guidance and support to children. When necessary, we must strengthen the family in support of these responsibilities. Where there is no functional family unit, we must establish a family surrogate and assist that entity to guide and nurture the child.

Guiding Principle # 2 - We must support core social institutions -- schools, faith community and community organizations -- in their roles of developing capable, mature and responsible youth.

Guiding Principle #3 - We must promote prevention as the most cost-effective and humane approach to reducing juvenile delinquency. Communities must take the lead in designing and building cohesive prevention approaches that address known risk factors and target other youth at risk of delinquency.

Guiding Principle # 4 - We must intervene immediately and effectively when delinquent behavior occurs to successfully prevent offenders from committing progressively more serious and violent crimes and becoming chronic offenders.

Guiding Principle # 5 - We must identify and sanction the small group of serious, violent and chronic juvenile offenders.

### San Diego Juvenile Crime at a Glance:\_\_\_\_\_

Comprehensive Strategy planners thoroughly reviewed risk data for the County of San Diego.

(Attachment 1-Summary of Community Risk Profile Data.) It is critical during the planning process to identify trends, shifts and significant increases and decreases in data related not just to atrisk behavior, but also to specific juvenile crime and conviction information. Specific statistics for the juvenile criminal justice system follow:

<u>Population Growth</u>: From 1994 to 2003, the number of San Diego youth between the ages of 10 and 19 is projected to increase 26%.

<u>Juvenile Arrest Rates:</u> The juvenile arrest rate was noticeably higher in 1995 (74 per 1,000 juveniles) than the adult rate (54 per 1,000 adults).

<u>Homicides for Youth</u>: Comparing all age categories, homicide rates countywide for each year between 1991 and 1993 were the highest for youth ages 15-19 years.

<u>Substance Abuse</u>: From 1991 to 1995, juvenile arrests for drug and alcohol violations increased 52%. Of particular interest is a 95% increase in arrests in the dangerous drug category, which includes methamphetamine. Also, violations of marijuana laws increased over 200%. The Drug Use Forecasting (DUF) program conducts quarterly, confidential interviews with juveniles taken into Juvenile Hall after arrest. **Based on urinalysis tests, 65% of the juveniles contacted in December 1996, showed recent drug use.** This contrasts with 34% testing drug-positive in 1992; 44% positive in 1993; and 54% positive in 1995.

Weapons Use: A San Diego Association of Governments (SANDAG) study interviewed youth taken to Juvenile Hall. Of the 202 male juveniles interviewed, 44% reported having owned a gun at some time, and the majority stated that it was easy to get a gun illegally. More than a quarter of youth said they had used a gun to commit a crime. Exposure to violence is related to gun possession. More than half of the youth interviewed in the DUF program reported having been shot at. More than one-third agreed that it is 'OK' to shoot someone who hurts you.

<u>Gang Membership</u>: A survey in October 1996, by the Jurisdictions Unified for Drug Gang Enforcement (J.U.D.G.E.) showed that in eight of the ten law enforcement jurisdictions covering the region, there are an estimated 126 gangs and 9,630 documented gang members.

<u>Juvenile Hall Admissions</u>: From 1992 to 1996, there was a 43% increase in admissions to Juvenile Hall (4278 versus 6,121). In 1996, 1,200 juveniles were admitted to Juvenile Hall for violent offenses, a 35% increase from 1992.

Remands to Adult Criminal Court: Remands to adult criminal court (707s) increased from 39 in 1992 to 322 in 1996.

# DEFINITIONS OF A CONTINUUM OF PREVENTION AND GRADUATED SANCTIONS\_\_\_\_\_\_

San Diego County Comprehensive Strategy Team recognized that having common language, terminology and definitions was crucial for organizations, agencies, community members and youth to effectively work as a cohesive team in all aspects of the planning process. In order to ensure the continuing participation of all team members, a commitment must be made to clearly define a shared language and frequently used terms that can be understood by those outside of the juvenile justice field. San Diego County Comprehensive Strategy Team defined the following key terms:

<u>Continuum</u>: A continuous spectrum of services and programs that can include prevention, intervention, supervision, incarceration and treatment.

<u>Prevention:</u> Programs and resources that address community, family and individual risk factors and enhance protective factors that will minimize the risk of delinquent behavior.

<u>Intervention:</u> Resources that provide immediate, swift responses within the community; often used for first-time, nonviolent offenders programs. Includes juvenile diversion and community intervention resources, Counsel-and-Close programs, community restitution and community service, etc. May be non-residential or residential.

<u>Supervision</u>: A spectrum of resources that are provided primarily by Probation (but not exclusively) ranging from informal supervision to intensive supervision.

<u>Incarceration:</u> Resources that are considered secure care, generally reserved for the most serious and violent offenders. These may include local resources such as Juvenile Hall and the Ranch Facilities, California Youth Authority (CYA) or jail. Incarceration may also be used as a means of providing swift and certain consequences for wards of the court that violate terms of their probation, such as Probation's Short Term Offender Program (STOP) combined with supervision following incarceration.

<u>Treatment:</u> Resources that address the specific needs and problems of both at-risk and delinquent youth and their families. Treatment includes substance abuse counseling and rehabilitation, mental health, vocational training, education, parent training and support and mentoring. Treatment can be appropriate at all stages of the continuum.

### ASSESSMENT OF EXISTING RESOURCES IN THE

REGION			
-			

During the planning of the San Diego County Local Action Plan (SB1760), a Juvenile Justice Coordinating Council was convened. This council was appointed by the San Diego County Board of Supervisors and is required by law. It is chaired by the Chief Probation Officer and appointees include representatives of the Board of Supervisors, Chief Administrative Officer, District Attorney, Public Defender, Sheriff, San Diego Police Department, Education, Chair of the Juvenile Justice Commission, Executive Directors of Community Agencies, Alcohol and other Drug Service Providers, Mental Health, Social Service, Juvenile Court and community-at-large members. This Council is the support and implementation body of the San Diego County Comprehensive Plan. The Council and the Comprehensive Strategy Team began with the premise that delinquency and violence have multiple causes, with many occurring simultaneously. Effective resolution and treatment requires that a broad spectrum of locally based resources be available to meet multiple needs. They also recognized that San Diego County has gained national recognition as a leader in developing collaborative, integrated service delivery models for addressing the multiple needs of atrisk children and their families. The Council extensively inventoried existing resources throughout San Diego County for the research and development of the San Diego Local Action Plan (SB1760). The Comprehensive Strategy Team, holding true to ending duplication and redundancy, used this detailed information when addressing needs and gaps in the County. (Attachment 2-**Inventory of Existing Resources.)** 

### IDENTIFIED NEEDS AND GAPS IN THE CONTINUUM\_\_\_\_\_

The Comprehensive Strategy planners used a structured decision-making approach to develop consensus on those service needs and gaps deemed most critical to the Comprehensive Strategy implementation. These critical needs and gaps were categorized into one of the following areas:

**Program** – Needs and gaps identified in this category represent either specific program services such as after-school programs for middle school age youth for prevention, as well as services that might be considered necessary components of a multi-systemic or comprehensive approach (such as providing substance abuse or vocational programming at a day treatment program);

**Geographic** - Certain areas of the County lack specific resources that are available to serve residents in other communities. Comprehensive Strategy planners were asked to identify program and service needs and gaps unique to various geographic areas of the County;

Concrete Support Services - In addition to primary program and service needs and gaps, there is recognition that additional support services must be available for primary treatment to be effective (such as childcare, transportation and housing). Comprehensive Strategy planners were asked to identify concrete support services that they believe are critical in supporting a comprehensive continuum of service; and

**Infrastructure** - In order for a system-wide, continuum-based approach to be effective, there are policy, process and procedural elements that must be in place, such as accountability/evaluation tools and communication mechanisms. Comprehensive Strategy Planners were asked to identify infrastructure needs critical to successful implementation of the Comprehensive Strategy Plan.

Using several comprehensive assessments of existing resources, from prevention through graduated sanctions and aftercare, the Comprehensive Strategy planners identified needs and gaps in the continuum, which are listed in the following tables:

### TABle 1 - Results of Survey To Identify Critical <u>Program Needs and Gaps</u> in the San Diego Region

Top Five Need and Gap Areas: (prioritized by number of times appearing in top 5):

- Substance abuse treatment for youth and families at all steps of the continuum (in- and outpatient);
- After-school programs for middle school age youth and latency age programs, both on and off school campuses;
- Parent education, training, support and home visitation;
- Vocational/technical training, especially in skilled trades; and
- Specific programs for girls.

### **Additional High Priority Program Needs and Gaps:**

- Services for abused adolescents, runaway and homeless youth;
- Aftercare reintegration and step-down programs with intensive family work, for all youth, including those from CYA;
- Community policing;
- Halfway houses for clean and sober youth targeted to specific ethnic groups;
- Community recreation;
- Day treatment programs;
- Emancipation/independent living skills;
- Early gang prevention and intervention;
- Graduation incentives;
- Specific juvenile sex offender programs;
- Literacy programs for all ages of youth;
- Mental health services for all family members;
  - Mentoring programs;
  - Recruiting program linkages;
  - Residential programs;
  - Residential and day treatment for offenders who are pregnant and parenting teens;
  - Early screening and intervention for high risk factors/behaviors across community systems;
  - Teen birth control clinics accessible regionally and institutionally; and
- Services and programs for victims of gang violence.

### Table 2 - Results of Survey to Identify Critical <u>Geographical Programming Needs and Gaps</u> in the San Diego Region

Geographic needs and gaps identified as critical, in addition to a common consensus that gaps and needs across the entire continuum of services exist in the North, East and South County areas:

- Day treatment and supervision programs to serve youth and families located within each region;
- Drug and alcohol services for adolescents available for youth and families within each region; and
- Correctional facilities and treatment programs in North County specifically.

### Table 3 - Results of Survey to Identify Critical <u>Concrete</u>, <u>Support Services needs and GAPS</u> in the San Diego Region

Concrete support services necessary for primary treatment programming to be effective include:

- Basic housing necessities, including utilities;
- Quality child care that is affordable and accessible;
- Clothing;
- Family preservation services and home support (including parenting classes);
- Graduation incentives:
- Quality health services that are affordable and accessible;
- Income maintenance:
- Independent living skills;
- Job training and placement;
- Mentoring support; and
- Transportation.

Table 4 - Results of Survey to Identify <u>Critical Infrastructure Needs and GAPS</u> in the San Diego Region

### Infrastructure needs and gaps (policy, process and procedural elements) that must be in place to 'hold' the system together and to work effectively:

- Accountability tools, such as ongoing quality assurance and system outcome measures, sanctions for not being a team player and holding participants in every sub-system accountable to the whole;
- Adoption of a system-wide approach to funding new and expanding programs, based upon risk and resource assessments;
- Common definitions of geographic boundaries and service delivery areas among all public agency systems to be used for planning and needs assessments. Allocation of resources, services, management of indicator data, etc. to facilitate integrated planning, service delivery, data sharing and outcome evaluation;
- Community development approaches that involve the community (including business) and youth in program planning, development and implementation, and support their involvement and commitment in developing safer community environments;
- Community education on service delivery systems and the role of the juvenile justice system throughout the county;
- Consistency among law enforcement agencies on policy and partnering strategies in developing and implementing the Comprehensive Strategy;
- Cross-systems training;
- Local control of state and federal funding;
- Management information and communication systems that allow accurate and efficient data collection, data compilation and data sharing to occur across multiple agencies (where allowed by law);
- Memorandums of agreement/understanding between programs and collaborating agencies that define responsibilities and roles for implementing a coordinated approach to working with at-risk youth and families;
- More participants in the Comprehensive Strategy effort (e.g., more school districts, youth and community members);
- Reintegration of students who have been expelled (reexamine zero tolerance policy);
- Risk and needs assessments for communities;
- Risk and needs assessments for at-risk youth at all stages of the continuum

and across program boundaries; and

• Strategies to integrate approaches for abused as well as delinquent youth and their families, including coordination with the system planning efforts and delivery functions of the Heartbeat project.

# RECOMMENDATIONS FOR AN EFFECTIVE CONTINUUM OF SERVICES, FROM PREVENTION THROUGH GRADUATED SANCTIONS

Historically, government has responded to youth problems by providing services to address symptoms. This often results in an inefficient use of scarce resources. Children labeled as delinquent traditionally enter the correctional system, which has been unable to address underlying family issues and other problems. Youth intervention agencies identify some children as abused or neglected, remove them from their homes, and place them in foster care, but agencies fail or are unable to provide family support or preventive mental health services. Children with acute mental health needs are placed in secure psychiatric settings with little opportunity for treatment in community-based, family-oriented mental health programs.

Fragmentation does not serve anyone effectively -- youth, families, communities or systems. The system is expensive and often fails to solve youths' problems. Comprehensive, integrated and targeted collaborative efforts can more effectively assess the needs of at-risk youth, implement promising strategies and maximize community resources.

Communities and families must have the primary role in preventing juvenile delinquency. All community members -- business leaders, media representatives, teachers, parents and grandparents, youth, policy makers, faith leaders, elected officials and law enforcement -- are responsible for ensuring the health and well-being of children. When all members of the community work together to achieve common goals, everyone benefits from the strength of the working partnership.

The following recommendations are presented to fill identified needs and gaps in the continuum of services. These recommendations are also intended to help San Diego communities and neighborhoods with community development and mobilization that will support them in identifying and prioritizing problems, creating opportunities and implementing solutions, as well as strengthen and enhance existing efforts focused on prevention.

**Recommendation #1 - Community Mobilization:** Increase the number of community members (individuals and families, schools, businesses, organizations and service providers) engaged to

mobilize and promote crime-free, healthy communities that are safe places for children to learn and grow.

Recommendation #2 - Community Risk and Resource Assessments: Adopt instruments to assess and identify local community needs, resources and priorities for development of community-based prevention programs that target at-risk youth and juvenile offenders.

<u>Recommendation # 3 - Substance Abuse Efforts</u>: Support the recommendations of San Diego's 1996 Substance Abuse Summit, 1996 Methamphetamine Strike Force and the San Diego County Juvenile Forensics Services on integrated approaches for the prevention of youth alcohol and substance abuse.

<u>Recommendation #4 - Community Norms</u>: Support development and adoption of community laws and norms that guard against substance abuse, weapon possession and all aspects of juvenile delinquency, and encourage positive alternatives.

<u>Recommendation #5 - Risk and Treatment Needs Instruments:</u> Adopt shared, structured decision-making instruments for assessing individual at risk youth and their families. Promote and secure consensus on use of these instruments from all involved public and private agencies.

## RECOMMENDATIONS FOR IMPLEMENTATION, MANAGEMENT AND EVALUATION

('Infrastructure')\_\_\_\_\_

San Diego is fortunate to have broad support for our comprehensive planning efforts from many elected officials and other juvenile justice policymakers, community leaders, public and private program administrators, schools, law enforcement and community programs and groups. However, given the large size of our region, both geographic and population (4,200 square miles, 18 incorporated cities and more communities within these cities and unincorporated areas) and the ethnic and cultural diversity of our communities, we must continue to garner regional community support and broad involvement - especially from youth and families.

Based upon on the OJJDP Guide description of key activities necessary for successful implementation of a comprehensive plan to reduce juvenile crime and delinquency, San Diego's Comprehensive Strategy planners developed the following recommendations to address critical infrastructure needs.

<u>Recommendation #6 - Systemwide, Balanced Approach to Funding:</u> Promote a balanced approach to funding prevention, early intervention and graduated sanctions programs that consider both safety needs of the community and treatment needs of at-risk and juvenile offenders, and their families.

**Recommendation #7 - Public Outreach Strategy:** Develop a comprehensive, countywide public outreach strategy that continuously engages the public and policy makers in the prevention and the reduction of juvenile crime and in the promotion of healthy and crime-free lifestyles.

<u>Recommendation #8 - Cross-Systems Training</u>: Provide cross-systems training between public and private agency providers to acquire common language and methodologies and promote collaborative efforts.

**Recommendation #9 - Interagency Agreements:** Develop formal interagency agreements (e.g. Memorandums of Understanding or Agreement) that explicitly state the relationships, roles, responsibilities and expected outcomes for all parties in collaborative efforts to reduce juvenile crime and delinquency, and promote positive development of youth.

<u>Recommendation #10 - Case Management and Process Control</u>: Develop a case management system that follows each youth through the various stages of the continuum of care. Designate the Chief Probation Officer with responsibility and resources needed to coordinate an interagency, centralized intake process, case management and program control (including assessment, monitoring and feedback) for identified at-risk and juvenile offenders.

<u>Recommendation #11 - Management Information System</u>: Build on existing management information system (MIS) efforts to facilitate relevant communication and data sharing by all criminal justice agencies and collaborating entities (public and private) consistent with appropriate protection of privacy rights.

<u>Recommendation #12 - Evaluation</u>: Provide for locally relevant ongoing evaluation of programs, agencies and strategies to ensure effectiveness and to allocate resources based upon need and documented effectiveness.

### Benchmarks\_\_\_\_

The Comprehensive Strategy Team designated specific benchmarks to identify successful completion of the recommendations. Each recommendation is accompanied by concrete outcomes that will demonstrate to the community an effective collaboration with sustainable and measurable

results.

### **Benchmarks:** There?

### **How Will We Know When We Get**

#### 1. Community Mobilization

The percentage of community members (individuals and families, schools, business, organizations and service providers) engaged in efforts to mobilize and promote crime-free, healthy communities will increase from 35% to 75%.

### 2. Community Risk and Resource Assessments

Instruments to assess and identify local needs, resources and priorities for development of community-based prevention programs that target at-risk youth and juvenile offenders are developed, adopted and implemented across agencies and organizations. The San Diego County Board of Supervisors and local municipalities will endorse these instruments.

#### 3. Substance Abuse Efforts

An integrated approach to the prevention of youth alcohol and substance abuse that involves individuals, families, schools and community organizations becomes a funding and implementation priority for the San Diego County Board of Supervisors, local municipalities and youth servicing agencies.

### 4. Community Norms

A community norms campaign is designed and implemented in partnership with police departments, probation departments, youth serving agencies, community members and youth that communicates positively-focused community laws and norms that address substance abuse, weapons possession and crime (including delinquency behaviors such as truancy).

### 5. **Risk and Treatment Needs** The San Diego County Board of Supervisors and **Instruments** other local municipalities adopt strength-based,

other local municipalities adopt strength-based, family-focused risk and resiliency assessment instruments for assessing at-risk youth and their families. Implementation is by public and private agencies and the community.

### 6. Systemwide, Balanced Approach To Funding

A <u>systemwide</u>, <u>balanced approach</u> to funding prevention, early intervention and graduated sanctions programs that considers both safety needs of the community and treatment needs of atrisk youth and families is utilized by the San Diego County Board of Supervisors, local municipalities, government agencies and youth serving agencies.

#### 7. Public Outreach Strategy

A comprehensive, regional public outreach strategy that engages the public and policy makers in the promotion of healthy and crime-free lifestyles, and focuses on prevention and reduction of juvenile crime, is operational in all areas of San Diego County.

#### 8. Cross-Systems Training

Design, develop and implement ongoing crosssystems training programs between public and private agency providers to acquire common language and methodologies and promote regional collaboration.

### 9. Interagency Agreements

Formal interagency agreements (such as Memorandums of Understanding or Agreement) are written and adopted that explicitly state the relationships, roles, responsibilities and expected outcomes between agencies working with children, youth and families.

### 10. Case Management and Process Control

Institutionalize a case management system that follows each youth and family throughout the various stages of the continuum. The Chief Probation Officer is designated with the responsibility and provided with the required resources to coordinate an interagency, centralized intake process, case management and program control (including assessment, monitoring and feedback) for identified at-risk and juvenile offenders.

### 11. Management Information System

MIS efforts are enhanced, available, and capable of facilitating relevant information and data sharing by all criminal justice agencies and collaborating entities (public and private), consistent with appropriate protection of privacy rights.

#### 12. Evaluation

Locally relevant, ongoing evaluation of programs, strategies, and systemwide responses are conducted on all programs in order to allocate resources by the San Diego County Board of Supervisors, local municipalities and youth serving agencies based upon need and documented effectiveness.

### IMPLEMENTING THE COMPREHENSIVE STRATEGY\_\_\_\_\_

Keeping with the theme of ending duplication and redundancy, the Juvenile Justice Coordinating Council from SB 1760 was asked to oversee the implementation of the Comprehensive Strategy Plan. This protected San Diego from forming yet another governing body and creating a larger bureaucracy. As the Comprehensive Strategy Team was moving forward in its planning, it became evident that a full-time coordinator was needed. San Diego learned that coordinating the efforts of public, private, youth and family serving entities throughout the region under the umbrella of the Comprehensive Strategy is a monumental task. Therefore, a full-time Coordinator position was established in April 1998. One of the many duties of the Comprehensive Strategy Coordinator is to facilitate and staff the six work groups, which deal specifically with issues revealed during planning and implementation phases. Representatives from the work groups are the conduits for information sharing between the Juvenile Justice Coordinating Council and the work group members. (Please see Attachment 6 for a brief description of the work groups, their missions and strategies.)

Throughout the planning process "Comprehensive Strategy Themes" clearly emerged. The Comprehensive Strategy Team concluded that these themes must be the foundation upon which services and programs are designed and delivered. The successful implementation of the Comprehensive Strategy must ensure that the spirit of these themes is incorporated not just in services and programs, but also in agencies, organizations and institutions that work with youth and their families.

### Comprehensive Strategy Themes\_\_\_\_\_

- Provide a full continuum of care:
- Include youth family members, and other significant community members in program design, development and implementation.
- **Be family-focused,** strengthen families and provide intergenerational family support services, resources and parenting skills.
- **Promote a community delinquency prevention model** as the most cost-effective and humane approach, assuring access to community-based resources; and
- **Provide graduated sanctions** with early identification, diversion, intervention and ongoing support as follows:
  - Immediate intervention for first-time, nonviolent offenders;
  - Intermediate sanctions for more serious offenders;
  - Secure care programs for most violent offenders; and
  - Aftercare programs involving family and community to assist youth with reintegrating into the community following out-of-home placement.
- Be holistic (comprehensive or multi-systemic) and multi-disciplinary, dealing simultaneously with many aspects of the youth's life. Address the youth's family and relationships dealing with intimacy, community, peers, school and work.
- Utilize a case manager and case management approach that begins at intake and follows the youth through various program phases until successful completion. This involves the development of individual service plans that are updated on a consistent and goal-driven basis.
- **Build upon youth and family strengths** rather than focusing on their weaknesses. We need to shift the primary emphasis from risks to resiliency.

- Hold families accountable for their children and systems accountable to families.
- Be gender-specific and culturally and linguistically appropriate. Programs must reach and be accepted by diverse racial, cultural and socioeconomic groups in the community.
- **Be intensive,** have multiple contacts with at-risk youth by staff who have manageable caseloads that allow for individualized attention and follow through.
- Offer comprehensive alcohol and other drug treatment, recovery and aftercare services in all phases of the continuum, including prevention.
- Have a solid focus on education, job readiness, skills training and employment through combined intensive support services.
- Utilize comprehensive community risk and resource models that prioritize target areas.
- Adopt common definitions, referral and response protocols, and instruments for assessing risks to the community and treatment needs of individual juvenile offenders that may be used by all agencies that participate in the juvenile justice system (including law enforcement, education and community-based organizations).
- **Develop information systems** that enable data sharing for client case management, tracking, budgeting, monitoring and evaluation, and that are accessible by criminal justice agencies and collaborating entities (while maintaining legally mandated confidentiality).
- **Provide ongoing evaluation** based upon agreed assessment and response mechanisms to all system participants for informed decision making.
- Adopt a system-wide resource allocation strategy, rather than funding on a program-by-program basis. Implement service consolidation and redesign where appropriate.

### PROMISING APPROACHES\_\_\_\_\_

Using the twelve reccomendations and the Comprehensive Strategy Themes the Comprehensive Strategy Team, through work facilitated by NCCD and DRP, designed six "Promising Approaches". These Approaches are the first step in beginning to fill identified needs and gaps in the continuum. The Approaches include desired outcomes, indicators, participant results, program

results and an implementation plan. Each Approach gives specific measurable results for all focus areas. The six Approaches are: Vocational Training/School to Career, Taking It to the Local Level, Parent Training and In Home Support, After-school Programs, Substance Abuse and Girls Programs.

#### PROMISING APPROACH #1:

#### **VOCATIONAL TRAINING-SCHOOL TO CAREER**

VOCATIONAL	L TRAINING-SCHOOL TO CAREER
Desired	1. Youth choose to be self-sufficient (financially, emotionally and socially);
Outcomes	2. Youth know their strengths and utilize them to be productive citizens of the community;
	3. Youth enter adulthood with basic life skills, as well as vocational and academic competency;
	and
	4. Education will promote and develop vocational training programs for those who are not
	college bound.
Indicators	1. Education V Decrease dropout and truancy rate. Increase graduations and certifications.
	2. Employment V Youth not in school receive vocational training or employment. Increase number
	employed or in school.
	3. Vocational Assessment/Personal Interest Inventory V All students receive one by grade 10; 50%
	by grade 7; and 25% by grade 4.
	by grade 7, and 25% by grade 4.
	4. Competency (individual & systemic) V Commitment to change focus from pass/fail to
	competency.
	5. Vocational Training V Increase options and capacity to provide opportunities for youth.
	6. Apprenticeships V Increase options and capacity to provide opportunities for youth.
Promising	1. Build the framework that will inventory and coordinate existing vocational skills, school to
Approaches	career, employment preparation and apprenticeship
	programs for the region; and
	2. Vocational Aptitude/Personal Interest Inventory provided by education in grades 4, 7 and 10.
	Purpose is to identify and build upon strengths for
	future educational/career track.
Participant	1. Lower dropout rate;
Results	2. Increased rate of certifications and graduations;
	3. Increased competency in life skills; and
	4. Increased rate of youth engaged in full-time education, training, employment or combination
<b>D</b>	thereof.
Program	1. Vocational training services are coordinated and linked throughout the region;
Results	2. Education partners with the private sector to increase youth's vocational skills and
	opportunities for employment; and
	3. Career/vocational opportunities are increased.

Implementation	1.	Identify the lead;
Plan	2.	Identify the key players;
	3.	Determine common vision;
	4.	Inventory existing services, capacities, gaps and resources;
	5.	Develop a partnership between business, education and the community;
	6.	Cultivate relationships with community collaboratives;
	7.	Develop subcommittees: What Works? Evaluation and Mentoring;
	8.	Career days; and
	9.	Implement Vocational Assessment/Personal Interest Inventory Project.

#### PROMISING APPROACH #2:

### TAKING IT TO THE LOCAL LEVEL

Desired	1. Obtain local key leader commitment to a regional Comprehensive Strategy;			
Outcomes	2. Establish neighborhood Comprehensive Strategy community planning teams; and			
	3. Institutionalize collaborative decision-making regionwide.			
Indicators	1a. Formal community resolutions are in place;			
	b. Memorandums of Agreement are in place;			
	c. Programs are funded based upon assessment;			
	d. Programs are funded based upon outcomes; and			
	e. Community planning team infrastructure is in place.			
	2a. Number of communities assessed for readiness to convene a planning			
	team;			
	b. Number of communities with planning teams established; and			
	c. Number of communities with a local Comprehensive Strategy Plan.			
	3a. Allocation of resources is reflective of a local community Comprehensive Strategy Plan;			
	b. A regional linkage exists for consistent governance of community planning teams;			
	c. Community governance exists over discretionary resource allocation;			
	d. Community planning teams obtain 5% private funding and resources; and			
	e. Regional collaborative training is available.			
Promising	Information Dissemination on Community Health			
Approaches	a. San Diego County Report Card; and			
	b. Regional Data Sharing Forum.			
	2. Community Engagement			
	a. Children's Initiative;			
	b. 1741's, Title V's, Community Collaboratives, Heartbeat, Healthy Starts, New			
	Beginnings, Partners for Success; and			
	c. Public Relations Campaign on community norm changing.			
Participant	Increased positive outcomes for children and families as indicated by key community health			
Results	indicators			
Program	1a. A shared, structured decision-making process is in place;			
Results	b. There is a shared MIS system in place (with unique ID algorithm);			
	2a. Number of Comprehensive Strategy community planning teams in place; and			
	b. Number of Comprehensive Strategy community plans in place.			

Implementation	
Plan	

- 1. San Diego County Report Card is currently operational. The Report Card will provide regional and local data on key health and safety indicators by zip code, census tract and city and county jurisdictions within two years. The first year of data collection will establish the baseline data;
- 2. Regional Data Sharing Forum meets monthly; and
- 3. Community Assessment Teams are using the same intake/screening assessment and data collection procedures.

#### PROMISING APPROACH #3:

#### PARENT TRAINING/IN HOME SUPPORT

Desired	1. Promote individual, family and community well-being;
Outcome	<ol> <li>Individuals, families and communities are safe;</li> </ol>
Outcome	3. All services are family driven;
	4. Families are self-sufficient;
	5. Families are involved and informed participants in decision making and planning; and
	6. Families are connected to each other and their communities.
To diastons	<u> </u>
Indicators	1a. Increases in women seeking prenatal care and increases in immunization rates; and
	b. Decreases in positive toxic births and decreases in substance abuse.
	2a. Decreases in child abuse and family violence incidents;
	b. Decreases in arrest rates; and
	c. Decreases in school suspensions and expulsions.
	3. Mutually agreed upon service plan and client satisfaction survey.
	4a. Increase employment rate and number of adults moving from welfare to work;
	b. Improve access to health care; and
	c. Improve access to housing and knowledge of community resources.
	5a. Improve involvement in schools and participation in community events; and
	b. Increase in voter registration and voting.
	6a. Increase number of families utilizing Community Centers and Family Resource Centers;
	b. Increase number of community members participating in local/regional planning; and
	c. Increase number of community volunteers.
Promising	1. Provide in-home visiting support that is culturally, developmentally appropriate and
Approaches	specifically tailored to meet individual and family needs.
	2. Increase citizen- and community- driven involvement through partnerships in community
	collaborations.
Participant	1. Increase number of families meeting basic needs and moving toward self-sufficiency as
Results	measured by improvements in employment, health care
	access and school performance, as well as decrease incidents of family violence and substance
	abuse.
	2a. Increase attendance at community events and responsibility for neighborhood; and
	b. Increase voting and personal accountability.
Program	1a. Parent-defined, in-home services are accessible through neighborhood centers in all local
Results	communities throughout San Diego County; and
	b. All services are provided in an individualized, culturally linguistically appropriate and sensitive
	manner.
	2. Collaboratives exist that include a broad range of empowered people and organizations that are
	responsible for their communities.
	1 1

Implementation	1. Identify key community stakeholders; public and private service providers;
Plan	2. Involve local neighborhood centers and utilize existing community assessments and input
	to identify family needs in communities;
	3. Identify needed resources and secure funding;
	4. Create multidisciplinary service teams to provide in-home services built upon the concepts
	of empowering families;
	5. Cross train staff and families; and
	6. Ten Service and Resource Centers exist in each county supervisorial district (GOAL).

### PROMISING APPROACH #4

#### **AFTER-SCHOOL PROGRAMS**

AFTER-SCHOOL	<u> </u>	
Desired		1. Increase quantity and quality of positive active alternatives for youth;
Outcomes		2. Increase quantity and quality of supervision of youth;
		3. Increase bonding between youth, their communities and programs for youth;
		4. Increase family support and active involvement of family in after-school
		environments;
		5. Increase safety for youth; and
		6. Increase quality of interactions between peers.
Indicators	1a.	Number of youth unsupervised after-school; and
		b. Youths' perceptions and evaluation of the quality of the after-school programming.
		2a. Youth and family member participation rates in after-school programs; and
		b. Parents' perception and evaluations of the quality of the after-school programming.
		3. Number of community members, youth and parents volunteering to work in the after-
		school programs.
		4a. Number of parents who volunteer in the after-school program; and
		b. Number of parents and siblings who participate in program celebrations, potlucks,
		community service activities, support groups, etc.
		5a. Number of youth who are victims or perpetrators of crimes after-school; and
		b. Number of youth exhibiting youth risk behaviors.
Promising		1. Establishment of <i>on or near</i> school site after-school programming that offers short-
Approaches		term activity choices, encourages peer and adult interactions and creates a community environment around the school.
		2. Youth form a Youth Planning Council where concerned parents, community
		8
		members and youth join together to discuss program planning and development, meet community leaders and share issues and concerns relevant to the youth and community.
		referred by the juvenile justice system or those at risk of early
		pregnancy or drug use.
Participant	1a.	Increased competency in specific, youth-identified interest areas;
Results	b.	Reduction in risk behaviors;
	c.	Increased levels of involvement in structured, supervised after-school activities; and
	d.	Increased social skills.
	2a.	Positive completion of justice system case plan;
	b.	Integration of at-risk youth into mainstream; and
	c.	Reduction in identified risk behavior.

Program Results	<ul> <li>Increased community attachment;</li> <li>High levels of satisfaction with program;</li> <li>Early identification resources;</li> <li>Decrease in juvenile crimes during after-school program hours;</li> <li>Increase in number of institutions and organizations activaly involved in the after school</li> </ul>
	e. Increase in number of institutions and organizations actively involved in the after-school program; and
	f. Improved ability to identify at-risk youth.
	<ul><li>Juvenile Justice System satisfaction with the after-school program; and</li><li>Reduction in youth recidivism rates.</li></ul>
Implementation	, , , , , , , , , , , , , , , , , , , ,
Plan	2. Select target communities and target population in community;
	3. Identify needs such as funding, space and resources and develop a plan to meet these
	needs; 4. Recruit, hire, orient and train staff and volunteers;
	5. Develop accountability fiscal and paperwork systems and program forms;
	6. Establish procedures for publicizing program and fostering community awareness and
	involvement;
	7. Conduct enrollment process; and
	8. Establish Youth Planning Council and regular meetings schedule.

### PROMISING APPROACH #5:

#### SUBSTANCE ARIISE

SUBSTANCE	ABUSE						
Desired	1. Increase number of healthy families;						
Outcomes	2. Increase attachment/bonding/modeling to adults and peers;						
	3. Increase positive interactions to institutions;						
	4. Clear and consistent messages regarding values;						
	5. Reduction of crime and violence; and						
	Increase access to culturally and linguistically appropriate health, education, social, psychological,						
	support and treatment services.						
Indicators	1a. Reduction of positive toxicology births;						
	b. Reported age of first use increases;						
	c. Reduction in reported use of Alcohol, Tobacco and Other Drugs (ATOD); and						
	d. Reduction of ATOD on board at Juvenile Hall admission.						
	2a. Increase in number of mentoring relationships between youth and adults; and						
	b. Increase in Beacon schools in County.						
	3a. Increase in number of culturally appropriate, accessible activities during after-school hours; and						
	b. Increase composition of planning/policy groups that reflect community composition.						
	4a. Increase in number of cities that require conditional use permits for alcohol outlets and						
	advertising.						
	b. Reduction in number of decoy citations; and						
	c. Reduction of ATOD use.						
	5a. Reduction of youth DUI arrests; and						
	b. Reduction of juvenile ATOD-related crimes (perpetrators and victims).						
	6. Increase in number of neighborhood centers.						

Promising	1. Neighborhood-based problem solving and governance: Beacon schools, neighborhood								
Approaches	centers, neighborhood councils, etc.; and								
	2. Youth involvement in the coordination of resources, blended funds and the standardization								
	of assessment and evaluation.								
Participant	1a. Increased engagement of community in problem-solving; and								
Results	b. Increased youth participation.								
<b>Program Results</b>	1. Increase in bed availability and numbers; and								
	2. Community-based, family-focused and youth-oriented services with organizational								
	development and training.								
Implementation	1. Community awareness meeting;								
Plan	2. Community organizational development and training;								
	3. System-wide coordination council/board;								
	4. Institutionalization of neighborhood councils;								
	5. Legislation change for information exchange;								
	6. Technology for information exchange;								
	7. Information repository established;								
	8. Standard evaluation system; and								
	9. On-going funding commitments.								

### PROMISING APPROACH #6:

### **GIRLS PROGRAMS**

Desired	1. A resource product based upon compilation and analysis of research-based data that identifies
Outcomes	the unique biological and psychosocial needs and problems of girls; and
	2. A county-wide educational, health and justice model that implements strategies and programs
	that promote health, well being and safety of girls.
Indicators	1. Decrease in victimization (child abuse, rape and dating violence);
	2. Decrease in teenage pregnancy;
	3. Decrease in self-abuse behavior (suicide, eating disorders, MH referrals);
	4. Decrease in substance abuse;
	5. Decrease in truancy/school dropout; and
	6. Decrease in violent behavior.
Promising	1. A countywide task force comprised of community leaders to provide guidance and oversight for
Approaches	community education that promotes attitudes in
	agencies and systems that encourage girls to reach their full potential; and
	2. Model local and national programs that have successfully implemented effective programs and
	services which respond to the needs of girls.
Participant	1. Improved health, education and safety;
Results	2. Improved self sufficiency; and
	3. Reduced teen pregnancy and substance abuse.
Program	1. Reduced victimization;
Results	2. Reduced teen pregnancy;
	3. Reduced criminal justice referral;
	4. Reduced substance abuse; and
	5. Increased resources for job training/employment.

Implementation	ı
Plan	ı

- 1. Identify key leaders and establish countywide task force;
- 2. Inventory existing services unique to girls;
- 3. Develop source documents to educate the public to the unique needs of girls; and
- 4. Provide a framework for development of short- and long-term strategies to address girls' issues.

(See Attachment 3 for a Description of Gender-Specific Programs)

Agencies, organizations and individuals have not waited for the completion of the Comprehensive Strategy planning process to begin to fill needs and gaps. Specific programs and strategies have been developed, funded and implemented as our work identifying needs continues. These programs and strategies are consistent with the afore mentioned recommendations, Comprehensive Strategy Themes and Promising Approaches. The programs and strategies include:

- **CRITICAL HOURS PROGRAM:** The County Board of Supervisors, through the Children's Investment Trust Fund, awarded \$1.2 million in FY '97-98 and \$1.5 million in FY '98-99 for after-school programs for middle school age youth in San Diego County. The San Diego County Critical Hours Program seeks to foster collaborative efforts among public, private and non-profit organizations that have in the past been fragmented and isolated in their efforts to serve children, youth and families. Critical Hours seeks to address youth violence, health and social issues that affect youth (e.g. crime, gang involvement, teen pregnancy, substance abuse and peer group pressure) and offer an alternative support system. With required program components, including health, education, recreation and interpersonal skills/self-esteem development, Critical Hours programs encourage a partnering of community organizations (i.e. education + recreation + social services + art organizations) to provide high quality programming at each site. Twenty-seven programs were started in September 1997, and have served more than 12,000 middle school age youth. The County will expand to 38 sites in 1998-99. There are currently 18 lead agencies with 150 collaborative partners.
- COMMUNITY CHALLENGE GRANTS: The California Office of Community Challenge Grants and the San Diego County Health and Human Services Agency, awarded eight \$500,000 Teen Pregnancy Prevention grants. The grants were awarded to San Diego Youth and Community Services, Escondido Youth Encounter, University of California, San Diego, Neighborhood House, YMCA-Youth and Family Services, North Park Family Health Clinic, Vista Community Clinic and San Dieguito Union School District. These grants are intended to prevent teenage pregnancy and to reduce the number of absent fathers. Emphasis is placed on communities with greatest need. Programs include mentoring for male youth, male involvement

in family programs, youth talk line, human sexuality for males/females, reproductive health education for males/females, development of healthy relationship skills, improving communication skills and the development of goals for a more enriched life.

- **BREAKING CYCLES:** Breaking Cycles is a \$6.9 million SB 1760 State grant awarded to the San Diego County Probation Department. This three-year program (beginning July 1997) funds delinquency prevention through a range of graduated sanctions to prevent initiation into a lifestyle of gangs, drugs, violence and crime. The graduated sanctions component provides for multidisciplinary assessment of all adjudicated youth removed from, or at risk of removal from, the home; expands day treatment to North County region; and provides substance abuse treatment for all families based upon assessed need. The prevention component establishes strength-based family assessment at Community Assessment Teams to reduce the number of youth entering the justice system by referring the youth and their families to the appropriate services.
- AT-RISK YOUTH EARLY INTERVENTION PROGRAM: Senator Alpert's SB 1050 secured a \$2 million, one-year grant (in addition to SB 1760) that builds upon the community assessment center framework that was defined in the Breaking Cycles grant. SB 1050 provides funding for direct wraparound services and linkages with community resources through family-focused, neighborhood based community assessment teams and centers. SB 1050 was awarded to the San Diego County Probation Department, which sub-contracted with local community based agencies to provide direct prevention and intervention services to youth and their families.
- JUVENILE REPEAT OFFENDER PREVENTION PROGRAM (Project 8%): California State funding of \$400,000 per year to Project 8% in San Diego County provides wraparound services to youth at risk of being chronic, serious violent offenders; subsequent legislation doubled the funding and extended the program for another two years (until June 2000). This funding was awarded to the San Diego County Probation Department and is a collaborative program between the Departments of Probation and the Health and Human Services Agency. This program has a multi-disciplinary team with a Probation Officer, Social Worker, Psychologist and Substance Abuse Counselor. It is designed to provide integrated services to families of at—risk youth to minimize delinquency and costs of processing youth through the juvenile justice system. It also provides prevention services to siblings at risk of entering the delinquency system and preservation services to their families.
- ALCOHOL, TOBACCO, and OTHER DRUGS (ATOD) PREVENTION FRAMEWORK: This framework re-engineers the San Diego County Health and Human Services Agency ATOD prevention services to regional based, youth- focused and collaboration-driven programs. This re-engineering is funded by the \$22 million General Fund, which includes Federal Substance Abuse Prevention Treatment Block Grant, State General Funds, and approximately eighteen other funding sources for 180 program components.
- SUBSTANCE ABUSE TREATMENT: The San Diego County Board of Supervisors has

taken actions over the past 18 months to increase adolescent alcohol and drug treatment and intervention funding by nearly \$2.8 million. This increases the number of youth served from 600 to 3,000 on an annual basis and has reduced wait time for services from 12 weeks to 2 weeks or less. It has also increased residential treatment beds to 750, and increased the number of treatment service providers. Funding is from the San Diego County Health and Human Services Agency General Fund, which includes Federal Substance Abuse Prevention Treatment Block Grant and State General Funds.

- SUBSTANCE ABUSE TREATMENT on DEMAND, for YOUTH: Twenty-two million dollars from the San Diego County Health and Human Services Agency General Fund was utilized to establish five additional regional Teen Recovery Centers in South Bay, San Marcos, Encinitas, Lakeside and Mid-City. Mental Health Systems, Phoenix House and San Diego Youth and Community Services are the agencies funded. These programs also expanded residential capacity for adolescents, including seventeen new detoxification beds. Services include one-to-one counseling, group counseling, family counseling, social recreation activities, NA/AA programs, and offer coping/life skills for success on the outside world.
- JUVENILE DEPENDENCY COURT RECOVERY PROJECT: The partnership between the San Diego County Chief Administrator's Office Dependency Court Tiger Team and the Superior Court introduced a new intervention for the Dependency Court process in mid-April 1998. Targeted toward parents whose neglect or abuse cases involve an alcohol and/or drug problem, a new substance abuse case management function has been implemented. This new process will provide assessment of substance abuse problems, prompt referral and assistance in entering alcohol and drug treatment programs, alcohol and drug testing and a comprehensive reporting system. This reporting system will report to the Dependency Court and the Children's Services Bureau the progress of parents in the program and their compliance to the Court order of participation.
- **GENDER-SPECIFIC SERVICES for GIRLS:** The San Diego YMCA, Youth and Family Services was recently awarded a \$100,000 one-year grant from the Office of Criminal Justice Planning to provide gender-specific services for San Diego girls, with highest priority given to girls on probation. These services include but are not limited to addressing physical and emotional abuse, relationship issues, sexuality and reproductive issues, individual and family counseling, independent living skills, vocational training and parenting skills. Additionally, the National Council on Crime & Delinquency was awarded a California Wellness Foundation Grant to study gender-specific programs for girls in San Diego County.
- SAN DIEGO COUNTY HEALTH and HUMAN SERVICES HOME VISITING: The San Diego County Health and Human Services Agency, Family Support Home Visiting Partnership (FSHVP) works to ensure that all children in San Diego County are: born healthy; begin school eager and ready to learn; and remain healthy, safe and secure. The FSHVP mission is to ensure all San Diego families have access to confidential and voluntary home visitation and family support services that are individualized, culturally and linguistically appropriate, cost-

effective and of the highest quality. In March 1998, the San Diego County Health and Human Services Agency implemented the Cal-SAHF "best practices" home-visiting program, which is funded by a \$954,000 three-year grant from the Office of Child Abuse Prevention. It was awarded to the San Diego County Health and Human Services Agency and contracted to the Escondido Youth Encounter (EYE) Counseling and Crisis Services. The EYE is delivering home visiting services to 125 families in the North Coastal region of the County. The target population is families with drug-exposed infants, age birth to three months, who are at-risk for child abuse and neglect.

- **JOB TRAINING for FOSTER, GANG and HIGH RISK YOUTH:** The San Diego Work Force Partnership has allotted more than \$1 million in funding to assist high-risk youth with job training skills and job placement.
- SCHOOL-TO-CAREER: The majority of youth on probation are in need of services to enable them to transition to independent living and adulthood. Temporary Assistance to Needy Families (TANF) funding has been earmarked for a School-to-Career Program to address this critical service gap identified by the Juvenile Justice Coordinating Council. Between 800 to 1000 wards of the Court annually are projected to receive services at an estimated cost of \$600 to \$750 per program participant. The Probation Department will provide program coordination and contract monitoring services for twenty Vocational Counselors and Job Placement Counselors providing the vocational assessment and employment placement services.
- SCHOOL, PROBATION and JUVENILE COURT COOPERATION: In San Diego County, schools and probation officers have worked hard to keep children in school. In July 1997, the District Attorney's Office increased its efforts to help combat truancy, a leading indicator of juvenile delinquency. A truancy database and the addition of a part-time assistant dedicated solely to School Attendance Review Board (SARB) cases have facilitated the effectiveness of the teamwork between SARB members, prosecutors and court staff. The Juvenile Court also has contributed to the efforts, by assigning one judge to hear truancy matters on a weekly basis.
- SAN DIEGO COUNTY REPORT CARD: The San Diego County Health and Human Services Agency and San Diego Children's Hospital Center for Child Health Outcomes have jointly created the components of a child/family health and well-being report card. The Report Card is comprised of scientifically based and/or consensus-derived measures that together form a population-based, data-driven monitoring system. The primary goal of this system is to track and trend identified child and family health and well-being indicators during a time of sweeping changes in both public policies and the systems servicing this population. A one-time grant of \$88,000 was awarded to Children's Hospital from the Alliance Health Care Foundation. (Please see Attachment 4 for a list of Indicators used in the Report Card).
- A SHARED, STRUCTURED DECISION-MAKING PROCESS: San Diego's Regional Risk & Resiliency 4Checkup: The Checkup is a research-based classification device for

engaging the community in neighborhood-based services to strengthen families. It is representative of the cutting-edge efforts in prevention and early intervention being field tested in San Diego. The Checkup uses the concept of a blood pressure check. A reading outside the normal range alerts a person to possible health problems and allows families to take steps to avoid harm. In many instances, that information is enough to motivate change. The Checkup provides a portrait of a family's risk and resiliency compared to what is typical for San Diego families. It will also provide information and access to community resources for at-risk families. A \$15,000 award was granted to the Justice System's Assessment and Training (Brian Mattson and Brad Bogue) from the National Institute of Corrections and the County of San Diego Probation Department. (**Please see Attachment 5 for the tool.**)

### Summary\_\_\_\_

As we move into the 21st century, San Diego County is dramatically re-engineering local government. The public sector is being expected to compete with the private sector and produce a quality, cost effective product. Under the direction of the San Diego County Board of Supervisors, business and strategic plans are being developed for each county department, functions and tasks are being merged, and outstanding risk management and customer service is being rewarded. As part of this process, local government agencies serving youth are being redesigned for maximum efficiency and improved effectiveness.

The bottom line is that approaches to serving the needs of youth and families in our region are rapidly evolving. Many changes are occurring - both in the way we think about programs and services and the methods used to deliver them. However, certain realities and priorities are clear and command consensus. Policy makers, legislators and the community support strengthening the prevention network and intervening effectively at the first "red flag" or "trigger" event that puts a child at risk of entering the juvenile justice system.

While San Diego County citizens support the incarceration of juveniles committing violent, serious crimes, they overwhelmingly favor providing prevention services to at-risk children and swift intervention for youth experiencing problems. San Diego County citizens expect the juvenile justice system to provide juvenile accountability, as well as victim and community restoration. Community solutions to community problems are preferred.

Some studies have shown that 90 percent of youth that have been exposed to prevention programs believe they made a positive difference in their lives. Californians and San Diegans have demonstrated that prevention programs are a good investment of their tax dollars.

This favorable attitude toward aggressive prevention and intervention strategies is particularly

#### INTRODUCTION

evident in the area of substance abuse treatment. San Diego County views substance abuse treatment as an investment that will reduce crime and save tax dollars that would otherwise be spent on prisons.

As San Diego County celebrates our accomplishments thus far, we also recognize the ongoing effort required to reach full implementation of the Comprehensive Strategy Plan. From policy makers to Neighborhood Watch groups, from agency diversion counselors to youth in leadership development programs, everyone must collaboratively engage in a sustained, regionwide commitment to actualize the CLEAR vision. In order to maintain the direction over the long term, we must continue our fiscal and philosophical commitment to supporting the Comprehensive Strategy Plan. As we build upon existing resources, address needs and gaps, strengthen youth and families, and integrate a full continuum of care, we are enhancing the quality of life for all San Diegans. The Comprehensive Strategy Plan serves as a blueprint and foundation for San Diego County as we strengthen and expand services and programs for youth and their families.

### **APPENDIX**

### **ATTACHMENT 1**

### SUMMARY OF COMMUNITY RISK PROFILE DATA

### **Attachment 1 - Summary of Community Risk Profile Data**

(As Reported For Law Enforcement Jurisdictions, Subregional Areas, or School Districts)

					4				4			1	
In	_	_	_	-	_	_	_	_	_	Top 5-	Top	Top	Top 15
top 5	5 -	property	-total #	homicide	firearm	firearm	drug	15-19		infant	5-	15-	zip
-total	violent	crime	juvenile	rate	deaths	injuries	deaths	suicide	school	mortality	births	zip	codes
crime	crime	rate	arrests		rate	rate	rate	rate	drop-		to 15-	codes	for
rate-	rate-	1996	1993						out		17 yr	for	youth in
1996	1996								rate		_		correct
												prob	facilities
4th		5th	3rd				Yes	Yes				Yes	Yes
	2nd	4th	2nd				Yes	Yes				Yes	Yes
3rd		3rd	4th									Yes	Yes
	3rd												
				Yes	Yes		Yes				Yes	Yes	Yes
1st	1st	1st	5th	Yes		Yes					Yes	Yes	Yes
	5th				Yes	Yes			Yes		Yes	Yes	Yes
				Yes	Yes	Yes				Yes	Yes	Yes	
								Yes					
	In top 5 -total crime rate- 1996 4th 3rd	In In top top 5 5total violent crime rate- 1996 1996  4th 2nd 3rd 3rd  1st 1st	In top In top 5 top 5 5 - property -total violent crime rate- rate- rate- 1996 1996  4th 5th  2nd 4th  3rd 3rd  3rd  1st 1st 1st 1st	In top In top 5 In top 5 top 5 5 - property -total # juvenile crime crime rate arrests 1996 1996 1996 4th 5th 3rd 2nd 4th 3rd 3rd 3rd 4th 3rd 5th 5th 5th 5th	In top In top 5 In top 5 Top 5- top 5 5 - property -total # homicide rotal violent crime rate rate- rate- 1996 1996  4th 5th 3rd  2nd 4th 2nd  3rd 3rd 4th  3rd Yes  1st 1st 1st 5th Yes	In top In top 5 In top 5 Top 5- Top 5- total brown top 5 5 - property total # homicide firearm juvenile rate arrests 1996 1996 1996 1996 1996 1996 1996 199	In top In top 5 In top 5 Top 5- Top 5- Top 5- top 5 5 - property total # homicide firearm firearm deaths rate rate-1996 1996 1996 1996 1996 1996 1996 1996	In top In top 5 In top 5 Top 5- Top 5	In top In top 5 In top 5 Top 5- top 5 - property -total violent crime rate rate- 1996 1996 1996 1996 1993 170	In top In top 5 In top 5 Top 5- Top 5	In top In top 5 In top 5	In top In top 5 In top 5	top 5 5 - property total # homicide firearm firearm drug violent crime rate rate-1996 1996 1996 1996 1998 1993 1993 1993 1993 1993 1993 1993

Camp		1									Yes			
Pendleton														
Central SD					Yes	Yes	Yes	Yes			Yes	Yes	Yes	Yes
Del Mar	2nd		2nd					Ì			Ì	Ì		
Fallbrook										Yes				
Lakeside									Yes				Yes	
La Mesa								Yes						
Lemon					Yes	Yes	Yes	Yes			Yes			
Grove														
North SD									Yes					
Ramona											Yes			
San	5th	4th		1st						Yes			Varies	Varies
Diego***														
Sweetwater										Yes				
Vista										Yes			Yes	Yes

<sup>\*</sup> Communities shown in italics with one \* have AB 1741 Youth Pilot Programs located within their boundaries.

\*\*\*"Community", in this table, is defined by available subregional, law enforcement jurisdiction, and school district data; these definitions are restrictive, and there are many more communities in the San Diego region than those represented in the chart above. For example, San Diego in the above table represents both the San Diego Unified School District, as well as the large area served by the San Diego Police Department, and numerous zip codes within the region. Many of the AB 1741 and Title V communities do not necessarily serve the entire subregional or law enforcement jurisdictional boundaries being reported on by this data.

#### **ATTACHMENT 2**

### SAN DIEGO'S REGIONAL SYSTEM OF PREVENTION, INTERVENTION AND GRADUATED SANCTION PROGRAMS AND ADDITIONAL COUNTY-SPONSORED TREATMENT PROGRAMS

<sup>\*\*</sup>Communities shown in italics with two \*\* have Title V Delinquency Prevention Programs within their boundaries; in addition to the two listed above, the Linda Vista community (part of San Diego) is also a Title V community.

#### **ATTACHMENT 2-1**

### San Diego's Regional System of Prevention, Intervention and Graduated Sanction Programs

Prevention/ Intervention/ Sanction	Program	Description	Target Group and Geographic Areas Served	Capacity/ # in Prog. (as applic.)
Prevention	Community Assessment Centers	Collaborative prevention programs funded by SB 1760 Breaking Cycles program. They are designed to assess and link families to neighborhood prevention services using a collaborative service model.	At-risk families  Mid-City and South Bay opened county- wide 2/98  North County and East County in 4/98.	2,600
Prevention	Countywide Truancy Program	Probation Officers (POs) are contracted by school districts throughout County to reduce truancy and address school-related problems. Salaries are offset by school districts through ADA revenue or grant funds.  Program is partnership with Juvenile Court, Probation Dept., various school districts, and School Attendance Review Board (SARB); share common vision to "keep kids in school".	Problem behavior & pre-delinquent  9 school POs at:  El Cajon Escondido Gompers	Total youth served: over 2,500 in 1996
Prevention	Family and Community Partnership	to First Offender Family Preservation and Mothers/Sons program components. Both provide intensive, home-based intervention services for families, based upon needs assessments.		22 families
Prevention	Family Preservation Program & Independent Living Skills (ILS) Services	3 POs are out-stationed at Dept. of Social Services to perform Family Preservation services; 1 provides ILS services for delinquent wards on verge of emancipation from own home.	Delinquent youth at risk of out-of-home placement  Countywide services	

Prevention	San Diego Regional Police Athletic League (PAL)	Positive activities for youth and families during non-school hours in form of recreational activities and literacy services.	Countywide	25,000 youth registered for various events FY 97/98
		Collaboration with Sheriff, Probation, Social Services, Parks and Recreation, Library, along with citizens, businesses & service organizations, working together for PAL to promote healthy lifestyles & positive identification with adult role models. Motto is 'Join a Team, Not a Gang.'		F1 9//90

# ATTACHMENT 2-2 San Diego's Regional System of Prevention, Intervention and Graduated Sanction Programs (Continued)

Prevention/	Program	Description	Target Group and	Capacity/
Intervention/			Geographic Areas	# in Prog. (as
Sanction			Served	applic.)
Juvenile Diversion	Community Intervention (CI) Program	5.5 CI Officers stationed throughout County to provide community linkages for services to divert youth from criminal justice system, as appropriate. Juveniles who commit crimes are referred to Probation Dept.; from information contained in referral, PO determines level of intervention required, and whether youth should be counseled and case closed, placed on informal probation or referred to Juvenile Court.	Prob East (1.5 Pos.), ECHO, etc.  North County Varies @ EYE,	Avg. 351 per month diverted: - 195 C & C (see below) - 68 Traffic - 88 Informal Probation
Juvenile Diversion	Quick Consequence Program - Counsel & Close	Allows youth/families to complete program of counseling, community service or restitution without being placed on Informal or Formal Probation. Once program is completed (30 days), case is closed with no further action; youth may be required to do community service work at Animal Shelter, Transit District, scrub graffiti, etc.		Avg. 45/month

Juvenile Diversion	Informal Probation	Youth are assigned to informal probation without being declared ward or placed on formal probation. Youth are required to complete program of counseling, restitution, community service or other appropriate sanctions.	Delinquent youth with less serious and first offenses Countywide	Avg. 625 cases, incl. Probation to the Court
Juvenile Diversion	Probation to the Court	Some youth referred to Court are placed on Probation to the Court & are not supervised by Probation. Youth are often required to complete a program similar to Informal Probation.	Delinquent youth with less serious and first offenses Countywide	Avg. 625 cases, incl. Informal Probation
Juvenile Diversion/Early Intervention	Police Intervention Programs		1 5	No limit to number of persons in the program.

# ATTACHMENT 2-3 San Diego's Regional System of Prevention, Intervention and Graduated Sanction Programs (Continued)

Prevention/	Program	Description	Target Group and	Capacity/
Intervention/			Geographic Areas	# in Prog.
Sanction			Served	(as applic.)
Juvenile Diversion	Border Youth	PO is designated as Border	Undocumented,	Average
	Program	Youth/Mexican Consulate Liaison	delinquent youth	5/month placed
		& interviews undocumented youth	committing less	in Mexico
		who commit delinquent acts. In	serious crimes	
		most instances, youth are diverted	(those committing	
		from the juvenile justice system	serious crimes are	
		and returned to their country of	brought before	
		origin through coordinated case	Juvenile Court via	
		planning with INS, Border Patrol	filing of petitions)	
		& Mexican Consulate.	Countywide	
Early Intervention/	Project 8%	2 multi-disciplinary teams with	At least one youth in	Avg. 30
Delinquency Prevention		PO, Social Worker, Psychologist	family is a newly	families per
	JROPP	and Substance Abuse Counselor.	declared ward of the	team
	(Juvenile Repeat	Designed to provide integrated	Court with indicators	
	Offender	services to families of at-risk	of high at-risk	
	Prevention	youth to minimize delinquency &	behavior	
	Project)	costs of processing youth through		
		juvenile justice system.		

Formal Probation	Juvenile Assessment & Mentoring Program (JAM) (started 7/97)	testing program for wards.	For non-addicted wards who have identified substance abuse issues. Countywide.	400 per yr.
Formal Probation	Banked Caseloads	community safety, are placed in this low service, low supervision category for monitoring of completion of various conditions of probation, such as restitution payments, community service, etc.	community safety Countywide	Avg. 1695 cases in FY 95/96
Formal Probation -Intervention and Intensive Supervision	Choice Program (opened doors 12- 4-96)	Probation & CBOs.  Family-centered, contact-intense program with worker caseload at 8 10 youth; day-to-day follow-up,	risk offenders (bank cases).  Mid-City, National City, Spring Valley, Lemon Grove, Escondido, San	192 youth at any point in time during year; 384-497 to be served in a year
Formal Probation	Regular Supervision	Youth are supervised in caseloads of 1 to 50, officers contact ward, families, and collateral workers in the community and in the office.  Officers conduct 4 <sup>th</sup> waiver searches, drug testing.	Minors on formal probation deemed to be at high risk for recidivism or danger to the community Countywide (3 officers outstationed in community-based schools.	Avg. 1346 cases in FY 95/96

### **ATTACHMENT 2-4**

# San Diego's Regional System of Prevention, Intervention and Graduated Sanction Programs (Continued)

Prevention/	Program	Description	Target Group and	Capacity/
Intervention/			Geographic Areas	# in Prog.
Sanction			Served	(as applic.)

ь	T WATCH	trace : Delate : 24	ln	la 22
Formal Probation- Treatment	Teen WATCH (Women and Their Children)	goal to ensure that each baby is born tox-free, that mothers remain drug- free, and that teen mothers gain appropriate parenting and health skills for the newborn.  Intensive monitoring occurs for up to 1 year after baby is born. From 4/94 - 7/96, 55 of 56 babies (98%) were born drug-free.	abuse problems. Countywide	Avg. 22 cases per officer
Formal Probation	Gang Suppression Unit	provides highest level of community control through	Documented gang members  Countywide	Avg. 360 cases
Formal Probation with Treatment	REFLECTIONS Central	placement; youth live at home and attend a structured school setting, with after-school counseling and	risk of being removed from their homes, and	Up to 65 youth (50 from Probation, 15 from Social Services)
	North County	family. Program includes Mental Health drug and alcohol specialists and wraparound services in home, focusing on	County, South Bay, Central, Mid City, Beach areas, North to Mira Mesa San Marcos	200 families served per year Up to 30 youth (25 from Prob. 5 from DSS) 100 families per yr.
Formal Probation	Coordinated Agency Network (started 1/97)	low-risk offenders (bank cases)	All bank wards in SDPD Southern Division jurisdiction.	80 wards

Aftercare Treatment	Individual treatment/supervision plans are developed and close surveillance is critical to maintaining positive behavior.	1	Avg. 125 cases in FY 96/97, to date
		Cycles; all areas.	

# ATTACHMENT 2-5 San Diego's Regional System of Prevention, Intervention and Graduated Sanction Programs (Continued)

Prevention/ Intervention/	Program	-	Geographic Areas	Capacity/ # in Prog.
Sanction			Served	(as applic.)
Custody-Incarceration	Juvenile Hall	Temporary detention facility used	·	Total bed
(Secure)		for pre- and post-adjudicated	chronic male/females;	capacity of
		youth.	_	512, including
				all programs.
			crimes and awaiting	Located in Hall
			court hearing or	(about 7000
			pending placement in	admitted last
			correctional treatment	year)
			prog, STC or STOP	
			1 Hall, Countywide	
Custody-Supervision	Home Supervision	Due to Juvenile Hall	Eligibility based on	Up to 200
		overcrowding, Detention	detention screening	youth per day
		Screening Criteria were developed	criteria	
		and revised over last 10 years to		
		determine appropriate situations	Countywide	
		when youth could be detained in		
		home pending court action. POs		
		closely monitor youth at home,		
		school or on the job while they		
		await court action, and make daily		
		personal/telephone contacts to		
		ensure compliance w/court orders.		
Custody-Supervision	Electronic	Juvenile Court orders that selected	_	
	Surveillance		hearings and others	
	Program (ESP)		transitioning back into	
		home to ensure greater	community after	
		supervision.	release from	
			placement.	

Custody -Incarceration	Juvenile Hall - Short Term Commitments (STC) Program	Short-term custody on weekends, or for up to 30 days as ordered by Juvenile Court.	Countywide	Part of Hall capacity of 512; avg 63/mo
Custody-Incarceration	Short Term Offender Program (STOP) for Boys (JH) and Girls (GRF)	deterrent for offenders in need of consequences and out-of-home treatment. Offered at Juvenile	juvenile offenders in need of consequences and out-of-home treatment.	Capacity of 60 (# incl. in 512 for Hall)
Private Placement- Treatment	Residential Treatment Facilities (24- Hour Schools)		Emotionally disturbed youth	About 200 in placement at this time

# ATTACHMENT 2-6 San Diego's Regional System of Prevention, Intervention and Graduated Sanction Programs (Continued)

Prevention/	Program	Description	Target Group and	Capacity/
Intervention/			Geographic Areas	# in Prog.
Sanction			Served	(as applic.)
Custody-Varies (see	SB 1760 Breaking	Offers continuum of rehabilitation	For all youth who are	52 boys/21 girls
below)	Cycles Graduated	services based upon assessed	adjudicated by the	at Juvenile Hall
	Sanctions	risks/needs to determine level of	Juvenile Court	pending
	component	supervision and specific program		completion of
		interventions. Minors detained up		assessment
		to 30 days pending completion of		(part of Hall
		assessment. Breaking Cycles		capacity of
		emphasizes family involvement		512)
		and empowerment. Youth		
		progress through continuum until		
		case plan goals have been attained		
		resulting in 'graduation'.		
		Breaking Cycles 90/150/240/365		
		commitment/maximum programs.		
Custody-Incarceration	Juvenile Ranch			Capacity of 250
(Minimum Security)	Facilities (JRF)	<ul> <li>Open ranch setting that</li> </ul>	Boys in need of	
		provides behavior modification,	temporary removal	
		school and drug treatment. Up	from community;	
		to 80% of youth admitted into	located in Campo;	

	n (Thob certor)					
			custody either admit or test pos. for drugs/ alcohol. Youth progress through program based upon achieved competencies.		Capacity of 30	
	C	C:-1-		Ciula in mand af		ı
	(Minimum Security)	Girls Rehabilitation Facility (GRF)	open girls correction treatment program that emphasizes drug treatment and behavior	Girls in need of temporary removal from community; adjacent to Juvenile Hall.		
	Custody-Incarceration		• Commitment. At JRF/GRF	Countywide		l
	(Minimum Security)		with YDC after 90/150/150/240/365 days	esanty wide		İ
	Short-term detention		• Commitment up to 30 days at Juvenile Hall and released with community agency or home confinement monitoring			
ŀ	Alternative to custody					ı
			<ul> <li>Home confinement and/or electronic surveillance with stayed JRF/GRF commitment</li> </ul>		Capacity of 125	
	Alternative to custody		<ul><li>Participate in REFLECTIONS</li></ul>			
	Community monitoring	Community Unit	REFERENCE			ı
			• May include electronic surveillance			
	ı				. ,	

# Attachment 2-7 San Diego's Regional System of Prevention, Intervention and Graduated Sanction Programs (Continued)

Prevention/	Program	Description	Target Group and	Capacity/
Intervention/			Geographic Areas	# in Prog.
Sanction			Served	(as applic.)

Custody-Intensive Reintegration Services (Supervision with Treatment)	Youth Day Center (YDC) Central	30-60 day transition program with intensive aftercare and reintegration services as final phase of correctional commitment	Countywide,	36 boys & girls
Treatment)	Central	at JRF/GRF. Youth attend school	Boutheast San Diego	
	North County	and receive counseling in structured setting during day; monitored by Home Confinement Officers at night until program graduation. Linkages with school and community services. To assist with transition to	during day; ne Confinement antil program ages with school ervices. To	
Custody-Incarceration	Youth	community.  Local sentencing for serious,	Older, more serious	Capacity for 16-
(Minimum Security)	Correctional	violent, male youth offenders,	adjudicated boys 16-	18 years is 125
(Minimum Security)	Center (YCC)	diverting them from more costly residential placements and CYA.	18 years	16 years is 123
		_	Located at Camp	
			Barrett;	
			Countywide	
Custody-Incarceration	California Youth	State custody programs in secure,	Juveniles convicted of	
(Secure)	Authority (CYA)	institutional settings for juveniles.	very serious crimes	
			who are dangerous to	
			community	
Custody-Incarceration	County Jail	Adult custody by court order;	Certain serious,	
(Secure)		recent law change allows juveniles	violent offenders age	
			14 and up, and wards	
		adult court.	over 18 years of age	

#### **ATTACHMENT 2-8**

# **Additional County-Sponsored**

# **Prevention, Intervention and Treatment/Recovery Programs**

Prevention/ Intervention	Program	Description		Capacity (if applic)
Alcohol & Drug	Countywide	11 regionally based community	Youth	
Prevention (ADS)	Primary	collaborations, implemented from		
	Prevention	2/1/98 thru 8/1/98 at \$2.7 million	Countywide	
		annually		

Alcohol & Drug Prevention (ADS)		Over 36,000 staff hours provided by 5 separate programs conducting educational presentations and training based upon implementing a specific curriculum, such as:  • D.A.R.E. Program with Sheriff- 17 week program for 5th/6th graders in unincorporated areas of County; and  • Club Live/Friday Night Live-County Office of Education; student clubs and programs to promote healthy, drug-free lifestyles, 7th-12th graders.	Youth	
Alcohol & Drug Treatment-Intervention (Alcohol & Drug Services Bureau-ADS)	Residential Care	40 residential beds for youth (at Phoenix House).  15 new dual diagnosis beds.	Youth Located in Descanso	40 beds contracted by ADS;15 dual diagnosis beds
Alcohol & Drug Treatment-Intervention (ADS)	Non-Residential (Outpatient) Care	<ul> <li>Teen Recovery Center (TRC)-S.D.Y.C.S., Mid-City and 5 other sites.</li> <li>Teen Options Program - S.D.Y.C.S.</li> <li>1 FTE Counselor at Juvenile Ranch &amp; 1 for Juvenile Offenders (MITE Program).</li> </ul>		20 slots-TRC 10 slots-Teen Options
Alcohol & Drug Treatment-Intervention (ADS)	Case Management Services	San Diego Adbregrant Pregnamaly Parenting Prograde (ScholdDAPP) within City Schools; staffed by 2 part-time nurses.		20 slots at any given time
Alcohol & Drug Treatment- Intervention (ADS)	Non-Residential (Outpatient) Care	8% Project - wraparound, family- focused approach to Health and Human Service needs; collaboration with Probation,		30 families served

### **ATTACHMENT 2-9**

# **Additional County-Sponsored**

**Prevention, Intervention and Treatment/Recovery Programs (Continued)** 

Prevention/	Program	Description	Target Group and	Capacity (if
Intervention			Geographic Areas	applic)
			Served	

Regional, County-funded Alcohol & Drug Treatment-Recovery Services	Recovery Groups	Several Recovery Group services for youth and their families:  • Happy Child Group for parents and kids (not funded by ADS)  • 5 youth and parent support meetings at Regional Recovery Centers  • Out-patient detox services available for youth; volunteer staff, open weekdays, 9:30-2:30 (not funded by ADS)  • AA and NA, 12-step meetings sponsored by RRCs or other sites open to adolescents  • 1250 participant visits for recovery services (self-help support group meetings and social/ recreational activities at TRC)	Varies	Varies
Mental Health Services- Treatment-Prevention	Critical Care Services for Child, Youth & Family	Emergency services/crisis intervention, inpatient eligibility and hospitalization referral; Totline Counseling line to answer questions for parents of children, birth - 5 years.	Child, youth and families Available 24 hours a day, 7 days/week	
Mental Health Services- Treatment	Special Education Services for Child, Youth & Family	care case management, and residential case management.	Access to AB 3632 services limited to children who have been referred by their school districts as part of their Individualized Education Plan (IEP) Kemper Street and Midway Drive locations	
Mental Health Services- Treatment-Intervention	Juvenile Forensic Services for Child, Youth & Family	Services for Dependent and Delinquent wards of the court, including Court-ordered evaluations, crisis intervention services for Juvenile Hall, short- term treatment for boys and girls at Juvenile Ranch/Girls Rehab facilities, counseling/chemical dependency services for the Spectrum Project, crisis intervention for dependents at Polinsky Children's Center,		

Outpatient House outpatient
services for dependents.

# **ATTACHMENT 2-10** Additional County-Sponsored

	on, Interventic	on and Treatment/Recovery	<u> Programs (Continu</u>	led)
Prevention/ Intervention	Program	Description		Capacity (if applic)
			Served	
Mental Health Services-	Inpatient	Child/adolescent inpatient services	Medi-Cal inpatient	
Treatment	Services for	for UCSD Child and Adolescent	facilities located at:	
	Children, Youth	Services program, Medi-Cal	Bayview	
	and Families	Inpatient facilities.	Hospital	
			•	
			Charter/Alvarado	
			Pkwy Institute	
			• Charger	
			Behavior Health	
			Systems	
			Mesa Vista	
			Hospital	
			• (CPC) San Luis	1
N 1 TT . 1.1 G	D : 1: 1		Rey Hospital	
Mental Health Services-	Regionalized	Child and adolescent outpatient	Offered at:	
Treatment	Programs-	services.	• Children's	
	Outpatient		Outpatient	
	Services for		Psychiatry-(Ocean-	
	Children, Youth		side, No. Coastal)	
	and Families		Alvin Dunn	
			School (San	
			Marcos)	
			• Children's	
			Outpatient	
			Psychiatry (Rancho	
			Bernardo)	
			Douglas Young	
			Clinic (Mira Mesa)	
			• Children's	
			Outpat. Psychiatry	
			of San Diego (San	
			Diego)	
			• Southeast	
			County Mental	
			Health Ctr.	
			• Rainbow Ctr.	
			(Mid-City at	
			Hamilton Elem.)	

<ul> <li>Sexual Treatment Education Program Svcs. STEPS (SD)</li> <li>UPAC Counseling and Treatment Ctr.</li> <li>UPAC Linda Vista Satellite Clinic</li> <li>Vista Hill Youth and Family Svcs. (Chula Vista)</li> <li>Youth Enhancement Svcs. (San Ysidro)</li> <li>East County Mental Health Ctr.</li> </ul>
East County

# ATTACHMENT 2-11 Additional County-Sponsored

# **Prevention, Intervention and Treatment/Recovery Programs (Continued)**

Prevention/	Program	Description	Target Group and	Capacity (if
Intervention			Geographic Areas	applic)
			Served	
Mental Health Services Treatment	Day Treatment for Children,	Various day treatment programs for children 5 - 14 years. Adolescent	Services offered at:  • East County	
Troumont	Youth &	Day treatment and Special	Day Treatment (San	
	Families	Education (AB 3632).	Miguel Elem. School.)	
			Hillcrest Day	
			Treatment	
			• Phase II	
			Adolescent (Encinitas)	
			<ul> <li>Venture</li> </ul>	
			Program	
			<ul> <li>Life School</li> </ul>	
			(Castle Park Middle	
			School, Chula Vista)	
			<ul> <li>Frontier</li> </ul>	
			Program (Homestead	
			School in Santee)	
			<ul> <li>Sexual</li> </ul>	

Mental Health Services-Treatment	for Children, Youth & Families	residential program.	Treatment Education Program Services- STEPS (San Diego) Svcs. at Comprehensive Adolescent Treatment Ctr. New Alternatives- South (Chula Vista)	
Prevention-Foster Care (DSS-funded)	Independent Living Skills	classes, workshops, special weekend camps and other activities; training in 5 skills areas: money, credit, consumer, education and employment.	rvices provided through s, workshops, special and camps and other activities; youth 16-19 years, g in 5 skills areas: money, consumer, education and special group care; also	
Juvenile Diversion Gang Prevention- Intervention (DSS CAP funded)	Gang Alternatives Program	array of services in individual or group settings:	Youth 9 - 15 years, with 55% from law enforcement, Juvenile Court, Probation  Serves Southeast SD, Mid-City, Kearny Mesa, South Bay, No. County Coastal ,Central	1,536 served/year
Juvenile Diversion & Prevention-Intervention (DSS CAP-funded)		15 contracts with CBOs for neighborhood youth centers for community-based programs to keep 'at-risk' youth from engaging in violent, delinquent, or criminal behavior; address poor school performance, low self-esteem,	delinquent youth, ages 8 17 years; referrals received from law enforcement, juvenile court, schools, service providers, families,	4000 County wide; varies by site from 79 (Ramona) to 500 (National City/Chula Vista/ Sweetwater)

#### **ATTACHMENT 2-12**

# **Additional County-Sponsored**

## **Prevention, Intervention and Treatment/Recovery Programs (Continued)**

			•		•	
Prevention/	Program	Description		Target G	roup and	Capacity (if
Intervention				Geograp	hic Areas	applic)
				Served		

Juvenile Diversion - Prevention (DSS CAP-funded)	Residential Services	4 contracts with CBOs to provide residential and aftercare services for youth:  • The Bridge (S.D.Y.C.S)  • The Gatehouse (S.D.Y.C.S.)  • Casa Nuestra (S.B.C.S)  • Juvenile Crisis & Oz Shelter Services (YMCA)	referred from Probation, police, CPS, service agencies- • The Bridge-	The Gatehouse 60 served in yr.(768 nights)
Prevention	After-school programs for middle school age youth (Board of Supervisors, 12/17/96)	Set aside \$1.2 million as seed money to establish San Diego County Critical Hours Programs for middle school students.	Middle school students in 27 locations Countywide	
	Alcohol & other drug screening, assessment & mentorship program for juveniles (Board of Supervisors action on 12/10/96)  This program has evolved into the JAM program seen on Attachment 2-3	Uses \$200,000 unanticipated revenue to begin program in partnership with Department of Health Services, Probation, Juvenile Court and CBOs; includes screening and assessment of 1500 juveniles over 6-month period (to 6/97) using SASSI to determine extent of minor's alcohol or drug use; results to be included in POs report prior to youth's Court hearing; Juvenile Court may then refer youth for intervention and random drug testing as condition of Probation.  Volunteer mentors will help youth and their families to address alcohol and other drug issues.  Funding beyond 6/97 not identified (implements AB 2564 to provide prevention and intervention to address alcohol/other drug		1500 during 1/97-6/97

	problems among youth declared	
	wards of Juvenile Court-did not	
	include funding).	

INTRODUCTION

# ATTACHMENT 2-13 Additional County-Sponsored

### **Prevention, Intervention and Treatment/Recovery Programs (Continued)**

Prevention/	Program	Description	Target Group and	Capacity (if
Intervention			Geographic Areas	applic)
			Served	
Prevention-Intervention-	Heartbeat	Development and establishment of	Seriously and	
Treatment	(Board of	a comprehensive system of care for	emotionally disturbed	
	Supervisors	seriously emotionally disturbed	children and	
	action on 12-10-	children and adolescents.	adolescents	
	96)			
		CAO directed to move forward on		
		implementation of Heartbeat		
		Consortium agreement by Health &		
		Human Services Agency (Mental		
		Health Services, Alcohol and Drug		
		Services & Department of Social		
		Services – Children's Services		
		Bureau), Probation Dept., County		
		Office of Education, Juvenile		
		Court, Regional Center for the		
		Developmentally Disabled &		
		Family/Consumer representatives		

#### **ATTACHMENT 3**

### GENDER SPECIFIC PROGRAMMING, COUNTY, AND STATE ARREST COMPARISONS

# ATTACHMENT 3-1 GENDER SPECIFIC PROGRAMMING

#### What is it?

The Office of Juvenile Justice and Delinquency Prevention (OJJDP) defines gender-specific services as those that are designed to meet the unique needs of female offenders; that value the female perspective; that celebrate and honor the female experience; that respect and take into account female development; that empower girls and young women to reach their full human potential; and that work to change established attitudes that prevent or discourage girls and young women from reaching their potential.

# **Guiding Principles**

- Equality does not mean sameness; equality must be defined in terms of providing opportunities that are relevant to each gender, not simply allowing women access to services traditionally reserved for men. Needed services may be different.
- Treatment based on theory of female development; gender-specific programs are not simply "female only" programs that were originally designed for males, but rather programs that acknowledge and address the unique needs and issues related to women's/girls' psychological development.
- **Female role models:** girls and women can benefit from positive female role models and mentors who exemplify survival and growth. Staff composition in terms of gender, race/ethnicity and sexual orientation is critical.

# Why is it necessary?

- Research on adolescent female development suggests that girls develop self-esteem differently, learn differently, value different things, process information differently and respond differently to people and situations than boys.
- Female identity is developed in relationship to others whereas boys develop their identity in relation to the world. Connectedness to relationships is a critical issue in the foundation of female identity and is a key rehabilitation treatment issue.
- Social theories of crime were developed to explain criminality in men. Individual and pathological theories were used to explain female criminality.
- Conformity to sex stereotypes and traditional gender roles is expected. Females who deviate and behave in "Adventurous, Aggressive or Outspoken" manners are viewed as "at-risk" or "in trouble". Men who exhibit similar behaviors are viewed as "normal".
- Criminal justice programs based on the male experience often neglect unique female needs. Effective female treatment will result from a theoretical approach that is gender sensitive.
- Girls confront problems that tend to be gender unique such as sexual abuse, sexual assault,

domestic violence, adolescent pregnancy and single parenthood.

## **ATTACHMENT 3-2**

# San Diego County Juvenile Arrests By Gender

MALE AND FEMALE						
Crime Category	1986	1996	% Increase			
Violent Felonies	692	1564	126%			
Felonies	4730	6022	27%			
Misdemeanors	8977	9787	9%			
Status Offenses	2839	3834	35%			

FEMALE						
Crime Category	1986	1996	% Increase			
Violent Felonies	59	222	276%			
Felonies	538	979	82%			
Misdemeanors	1991	2583	30%			
Status Offenses	1106	1390	26%			

MALE					
Crime Category	1986	1996	% Increase		
Violent Felonies	633	1342	112%		
Felonies	4192	5043	20%		
Misdemeanors	6986	7204	3%		
Status Offenses	1733	2444	41%		

## **ATTACHMENT 3-3**

California Juvenile Arrests By Gender

MALE AND FEMALE					
Crime Category	1986	1995	% Increase		
Violent Felonies	12560	22408	78 %		
Felonies	76192	85052	12 %		
Misdemeanors	134411	138501	3 %		
Status Offenses	25277	31645	25 %		

FEMALE						
Crime Category	1986	1995	% Increase			
Violent Felonies	1245	2759	122 %			
Felonies	8671	11518	33 %			
Misdemeanors	30484	34997	15 %			
Status Offenses	11319	12218	8 %			

MALE						
Crime Category	1986	1995	% Increase			
Violent Felonies	11315	19649	74 %			
Felonies	67521	73534	9 %			
Misdemeanors	103927	103504	(.4 % Decrease)			
Status Offenses	13958	19427	39 %			

## **ATTACHMENT 4**

### **SAN DIEGO COUNTY**

#### REPORT CARD

# ATTACHMENT 4 REPORT CARD INDICATORS FOR CHILDREN & FAMILIES IN SAN DIEGO COUNTY

#### **ECONOMIC**

CalWORKS aid recipient rate

Percent of CalWORKS participants working or involved in work-related activities

Food Stamp recipient rate

Number of people in families with children in shelters (on average at any point in time)

Rate of children living in poverty (under 18)

Unemployment rate

#### **HEALTH**

Infant mortality rate

Percent of low birth weight babies

Teen birth rate (15 - 17)

Number of youth suicides

Rate of hospitalization of children and youth for mental illness

Percent of youth that reported they had 5 or more drinks in a row on one or more days in the last 30 days

Percent of youth that reported they smoked marijuana on one or more days in the last 30 days Percent of youth that reported they smoked tobacco on one or more days in the last 30 days

#### ACCESS TO SERVICES

Percent of eligible children in subsidized child care (of those who requested it)

Average waiting time for outpatient alcohol and drug treatment services (publicly funded)

Average waiting time for non-emergency outpatient mental health services for children and youth (publicly funded)

Immunization coverage rate of two-year olds

Percent of insured children by type of coverage

#### **SAFETY**

Juvenile Crime: Rate of petitions filed in juvenile court

Homicide of youths by age

Rate of children living in out-of-home placement as a result of child abuse/neglect

Rate of domestic violence incidents (law enforcement responded)

Unintentional injury mortality rate of youth

Number of alcohol-related motor vehicle crash fatalities (under 18)

#### **EDUCATION**

High school dropout rate School attendance rate (K-12) Percent of CalWORKS school-aged children that regularly attends school School suspension/expulsion rate (K-12)

#### **ATTACHMENT 5**

SAN DIEGO REGIONAL RISK & RESILIENCY VCHECKUP

DATE	SAN DIEGO CO RISK & RESILI					NT TEA	MS	ID NUMBER
YOUTH NAME (L/F/M)	•	NICKNAME		GENDER	AGE	DOB	HOME PHONE	
RESIDENCE (STREET)				CITY	ļ	ZIP	Alt. Phone (specify)	
SCHOOL		GRAD	E	ETHNICITY	PRIMARY L	_ANGUAGE	INTERPRETER DESIRABLE 9 Youth 9 Caregiver 9 N/A	
What has already been done for youth/family?		<u>'</u>						-
Referral Source	Screened by (if different):			Parent/Guardia	an			
Name	Phone			Name			Phone	
	RESILIENCY FA	CTORS						
If your selection is <b>UNK</b>	not absolutely affirmative,	use an arro	w pointi	ing in the	E)	XAMPLE:	YES SOME	WHAT NO
direction you woul	d lean to if given another c	hoice. See	exampl	e at right.			92 :1 °	90 90
REQUIRED SOMEWHAT NO	YE UNK	s	NO	(OPTIOI	NAL)		YES S	OMEWHAT

FAMILY  1 Communicates with family	9	13 Family Activities 9 9	9	9
9 9 9 2 Constructive use of time at home 9 9 9	9	<ul> <li>14 Family Support</li> <li>9</li> <li>9</li> <li>15 Unconditional regard from a parent</li> <li>9</li> <li>9</li> <li>9</li> <li>9</li> </ul>	9	9
PEER 3 Positive peer relations	9	16 Values fairness 9 9 9	9	
9 9 9 4 Has at least one person to confide in 9 9 9	9	17 Able to make friends 9 9 9	9	
		18 Able to communicate disagreements 9 9 9	9	
NDIVIDUAL  5 Values Honesty/Integrity	9	19 Self efficacy in pro-social roles 9 9 9	9	
9 9 Self control	9	20 Problem-solving skills 9 9 9	9	
9 9 9		21 Plans, Organizes & Completes Tasks 9 9 9	9	
EDUCATION 7 School engagement/bonds	9	22 Positive Interactions with teachers 9 9 9	9	
9 9 9  3 Attachments w/academic achiever	9	23 Educational aspirations 9 9 9	9	
9 9 9		24 Caring/Supportive school climate 9 9 9	9	
DELINQUENCY  Support/Reinforcement in community	9	25 Extensive structured activities 9 9 9	9	
9 9 9 10 Pro-social adult relations	9	26 Participates in Faith Community 9 9 9	9	
9 9 9		27 Involved in community organization 9 9 9	9	

II	NTRODUCTION					
	Parents model healthy moderation 9 9  Effectively manages peer pressure 9 9	Ģ		9 9 9 29 Manages stress well 9 9 9	9 9 9	
SC	12 ITEM RESILIENCY FACTORE	ΓOR		TOTAL RESILIENCY FACT	OR	
PLE	EASE NOTE ANY SPECIAL CULTUR	RAL, HI	ALTH-RELA	ATED, UNIQUE CIRCUMSTANCES OR COMMENTS:		
so	mplete the most applicable box. If you mewhat NO UNK  ow pointing in the direction you would			•	YES	X
FA	MILY	YES	SOMEWHAT	EDUCATION	YES SON	MEWHAT
NO	UNK	-	-	NO UNK		-
31	Poor relations with parent(s)	0	0	46 Poor Academic Achievement	0	0
0	O			0 0		
32	Parental supervision deficiencies	0	0	47 Pattern of truancy past year	0	0
0	O			0 0		
33	Chaotic Family	$\circ$	0	48 Pattern of suspension/expelled	0	0
$\circ$	0			0 0		
34	Parental Criminality/Substance Abu	ise 🔿	0	49 Disruptive in classroom/school	0	0

Completed by:

Family Risk Subscale Score:

35 Runaway

Completed by:

 $\bigcirc$ 

50 Presently not in educational program

 $\bigcirc$ 

Education Risk Subscale Score:

PE	ER			DELINQUENCY		
36	S Socially Isolated			51 Prior Arrests	0 0	)
0	0			0 0		
37	Very few pro-social acquaintances			52 Lots of crime in neighborhood	0 0	)
0	0			0 0		
38	Has gang affiliation/associ	iation O	0	53 Offenses committed while under influence	0 0	)
0	0			0 0		
39	Has delinquent friends	0	0	54 Assaultive or fighting behavior	0 0	)
0	0			0 0		
40	No meaningful relationship	w/any adult 〇	0	55 Delinquent Orientation	0 0	)
0	0			0 0		
Comp	leted by:	Peer Risk Subscale S	core:	Completed by: Delinquency Risk Subsc	cale Score:	
	IVIDUAL			SUBSTANCE USE		
	No pro-social interests	0	0	56 Pattern of alcohol use	0 0	)
0	0			0 0		
42	Supportive of delinquency		0	57 Used mood-altering substance (other than alcohol)	0 0	)
0	0			O O		
43	Anger Management Issues		0 0	)		
0	0			O O		
44	Sensation seeking	0	0	59 Substance use interferes w/daily functioning	0 0	)
	0					_
45	Manipulative/Deceitful	0	0	60 Early onset of substance use (<13)		)
$\bigcirc$	0		_	C C		,
						_
Comp	leted by:	Individual Risk Subsca	ale Score:	Completed by: Substance Use Risk Substance	bscale Score:	
				TOTAL RISK FAC SCORE	TOR	<u> </u>
ЭТН	ER RISK FACTORS O Anin	mal Cruelty O	Health Problems	Predatory or harassing     Self-mutilation	○ Trauma (othe	er:
Spec	ify below)	der Control,	Homelessness	•	Violent	
	lses/Behavior		Inappropriate Sexua	•	OTHER:	
	ASE CHECK ALL O Blac	dder Control,	Behavior	O For personal gain Victim of:	· · · · · · · · · · · · · · · · · ·	
THA		nttime lack of Onic Tardiness O				
	O Emo	otional Distress O	Peers are older/you	nger O Resistant/Defiant of Authority O Racism		
OR ( Impu (PLE	CONCERNS O Blade Ises/Behavior  Dayti ASE CHECK ALL O Blace T MAY APPLY) Nigh O Chro O Emo	ime lack of Odder Control, ontitime lack of Onic Tardiness	Inappropriate Sexua Behavior Loss or Grief Parental Abuse/Ne	Hate Crime Suicide Attempts For personal gain Victim of: Racially based Domestic Violence Sexually based Physical Abuse		

COMMENTS AND OBSERVATION:	S:										
SHORT PROFILE RESILIEN	ICY SC	ORE	=								
TOTAL PROFILE RESILIEN	CY SC	_		S + RIS	K FACT	ORS =					
									(		
RESILIENCY									(		
			1								
			,								
San Diego	Cou	nty	Com	mun	ity A	sses	ssme	ent T	eam	S	
Risk	& Re	silie	ncy (	Chec	kup	(Refere	nce Sco	ores: 9/9	98)		
NAME:			Sc	ored b	y:						
Agency:				Date A	Admini	stered	l:				
SHORT PROFILE SCORES	score	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
12 Item Resiliency Factor		5	8	11	12	13	15	17	18	21	1
1 Risk Factor Sub-Scale			+		-2		-3	-4	-5	-7	+-
							ļ	Į	<u> </u>	'	
Circle Risk Factor Sub-Scale Used:	Family	Pee	r Ind	lividual	Educa	ition [	Delinque	ency S	ubstanc	es	
FULL PROFILE SCORES	score	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
Total Resiliency Factor		17	21	23	26	32	37	39	42	48	1
		 	<u> </u>	-	1	1		<u> </u>		<u> </u>	+
Total Risk Factor		0	-4	-10	-13	-17	-21	-25	-28	-33	$oldsymbol{ol}}}}}}}}}}}}}}}}}$
SCORES BY SUB-SCALE (comb	ned Resi	liency a	nd Risk	Factors)		1	1		<del>-</del>		
	score	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%

FAMILY	-3	-1	?	2	3	4	7	8	9	
PEER	-3	-2	-1	0	2	4	6	7	8	
INDIVIDUAL	-5	-4	-3	-1	1	1	3	5	6	
EDUCATION	-3	-2	-1	1	1	2	3	5	7	
DELINQUENCY	-4	-3	-1	0	1	1	2	4	5	
SUBSTANCE USE	-2	1	2	3	4	5	5	7	8	

#### SCORES BY PROFILE (combined Resiliency and Risk Factors)

	score	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
Short Profile RESILIENCY		-4	0	4	7	9	11	13	16	20	
Full Profile RESILIENCY		-12	-4	-2	7	14	19	24	30	37	

• .
Refer To Community Assessment Team
Refer for services:
Other:

**Screening Disposition:** 

### **ATTACHMENT 6**

# SAN DIEGO'S REGIONAL COMPREHENSIVE STRATEGY WORK GROUPS

#### **COMMITTEE MISSION STRATEGIES POLICYMAKER** Ensure that elected Investigate, evaluate and communicate the efforts and "BUY IN-STAY IN" officials, policy makers, successes of communities to establish laws, policies, and practices and community leaders that positively impact community norms. Utilize structured decision making process to allocate support the Comprehensive resources to fill identified gaps. In addition, the following entities have lead responsibilities: Strategy. Probation Department, in collaboration with Health & Human Services (Mental Health, Alcohol & Drug Services, Social Services), County Office of Education, community agency providers, and SANDAG Criminal Justice Research Division: Implement and evaluate the Breaking Cycles Demonstration Project during the period July 1, 1996, through June 30, 2000. Juvenile Justice Coordinating Council, Hearbeat, and Comprehensive Strategy Team: Systemwide, balanced approach to funding. Common definitions of geographic boundaries/service delivery areas among all the public and nonprofit service delivery systems. Juvenile Justice Coordinating Council, Partners for Success: Evaluate traditional roles of law enforcement providers and determine more effective training in prevention-focused, community-based, family-oriented partnerships. Juvenile Justice Coordinating Council, Agency Directors, Program Managers, Children's Initiative, Commission on Children, Youth & Families: Utilize resources (like Partners for Success) to provide cross-systems training throughout the region. Juvenile Justice Coordinating Council, Agency Directors, Program Managers, Children's Initiative, Commission on Children, Youth & Families: Develop formal, cooperative interagency agreements that clearly state the relationships between agencies, to include descriptions of and numbers of services to be provided, criteria for determining type of youth to be served (or referred), information that can be shared, by and to whom and under what circumstances, etc. County Board of Supervisors, Chief Administrative Officer, Juvenile Justice Coordinating Council, Heartbeat: Develop a case management system that follows youth through the various stages of the continuum. Designate the Chief PO with responsibility and provide resources needed to coordinate an interagency, centralized intake-case management-program control process and Management Information System. Fund

programs and develop new resources that are relevant to desired outcomes, and continue funding those that demonstrate effectiveness.

Juvenile Justice Coordinating Council, SANDAG Criminal Justice Research Division, local university researchers: Continue development of countywide outcome measures to evaluate effectiveness of systemwide and community strategies; develop and implement evaluation tools that match local strategies; develop ways to obtain local community participation in program evaluation efforts.

#### RESOURCE DEVELOPMENT

Develop and utilize a systemwide funding strategy based on outcomes and filling identified gaps

- 1. Recommend desired outcomes to policy makers.
- 2. Adopt assessment instruments and protocols to identify local needs, resources, priorities.
- 3. Utilize grant resource networks and community collaboratives to seek partners and resources to fill identified gaps.
- 4. Liaison with San Diego County Health and Human Service Agency to fill prevention gaps.
- 5. Continue to identify and educate community on "what works".
- 6. Collaborate with San Diego County Health and Human Service Agency and Probation to fill gaps utilizing Children's Investment Trust Fund and Local Juvenile Placement Trust Fund.
- 7. Pursue resources to fund identified gaps in the Local Action Plan and Community-Based Punishment Options Plan, with emphasis on geographic program placement, aftercare, and programs for girls
- 8. Focus on providing more prevention, early intervention (frontend) services as savings are realized by using more communitybased graduated sanction and aftercare programs.
- 9. Obtain more local control over state and federal funding with fewer restrictions.

#### INFORMATION DISSEMINATION AND ADVOCACY

Advocate and gain support for the Comprehensive Strategy in all areas of the community by engaging the community.

- 1. Ensure public awareness of the Comprehensive Strategy.
- 2. Gain support from the media, business, grass roots entities, and others to convey the vision in as broad a manner as possible.
- 3. Develop appropriate and relevant means for sharing information and engaging the community.
- 4. Secure media and public relations expertise for publicizing prevention and intervention strategies, engaging community involvement, and celebrating school, neighborhood, and community achievements.

# COORDINATION: Coordinate MERGING PARADES Comprehensive

Strategy efforts with all other initiatives serving youth and families. Involve youth and families in program design and implementation.

- 1. Develop common language that values and validates all input.
- 2. Develop uniform referral protocols.
- 3. Develop and train community planning teams to conduct community risk assessments (Communities That Care model).
- 4. Develop a comprehensive assessment tool or integrated process that can be used at different points in the continuum from prevention through aftercare.
- 5. Establish MOU's for cooperation, information sharing, and use of universal risk and needs assessments between all participants.
- 6. Explore use of regionally or neighborhood-based Resource Centers for one-stop service.
- 7. Explore use of a resource clearinghouse with a service hotline.
- 8. Establish process that assigns responsibility for referral follow-up and follow through.
- 9. Substance Abuse Treatment Efforts Adopt countywide common definitions for AOD treatment modalities, collect profiles on existing resources, involve offenders in design.

#### INFORMATION SHARING

Develop a comprehensive MIS for capturing and analyzing risk/needs assessment data.

#### COMMUNITY ENGAGEMENT, DEVELOPMENT-INCLUSIVENESS

Increase the number of community members (individuals, families, schools, businesses, organizations, service providers, etc.) engaged in efforts to mobilize and promote crime-free, healthy communities.

- 1. Liaison with Regional Data Sharing Forum to enhance communications, data sharing, and coordination among police, schools, CBO's, probation, public and private social service agencies.
- 2. Develop a comprehensive MIS for capturing and analyzing information collected in risk and needs assessments.
- 1. Develop protocols for community readiness and mobilization.
- 2. Expand representation on Comprehensive Strategy Team, either by adding members or charging current members with communicating and reporting back.
- 3. Develop formal linkages, coordinate and collaborate with all agencies, systems in the region that provide services to at-risk youth (i.e., CPS, Mental Health, AOD, etc.)
- 4. Support prevention-focused strategies of Substance Abuse Summit and Methamphetamine Strike Force.
- 5. Use existing or sponsor forums for youth to participate in all phases of planning and implementing full continuum of prevention and graduated sanction services.
- 6. Promote pictures and expectations of healthy lifestyles that can positively impact community norms.
- 7. Develop community-based prevention and intervention programs that target identified at-risk youth and juvenile offenders.

INTRODUCTION		