



An Evaluation of the Behavioral Health/Juvenile Justice Initiative (BHJJ): 2006 – 2013

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Executive Summary

Juvenile justice-involved youth with serious behavioral health issues often have inadequate and limited access to care to address their complex and multiple needs. Ohio's Behavioral Health/Juvenile Justice (BHJJ) initiative was intended to transform and expand the local systems' options to better serve these youth. Recent emphasis was placed on decreasing the population of ODYS facilities while providing alternatives to incarceration. Six counties participated in BHJJ in the newest biennium: Cuyahoga, Franklin, Montgomery, Hamilton, Lucas and Summit. BHJJ was funded by a partnership between the Ohio Departments of Youth Services (ODYS) and Mental Health and Addiction Services (ODMHAS). The Begun Center for Violence Prevention Research and Education at Case Western Reserve University provided research and evaluation services for the program.

The BHJJ program diverts youth from local and state detention centers into more comprehensive, community-based mental and behavioral health treatment. The BHJJ program enrolled juvenile justice-involved youth between 10-18 years of age who met several of the following criteria: a DSM IV Axis I diagnosis, substantial mental status impairment, a co-occurring substance use/abuse problem, a pattern of violent or criminal behavior, and a history of multi-system involvement.

Demographics and Youth Characteristics

- ❖ 2,545 youth have been enrolled in BHJJ (58% males, 52% Caucasian). In the past two years, more non-whites (57%) than whites (43%) and males (67%) than females (33%) have been enrolled.
- ❖ Youth averaged 2.3 Axis I diagnoses. Females were significantly more likely to be diagnosed with Depressive Disorders, Alcohol-related Disorders, Bipolar Disorder, and Post-traumatic Stress Disorder (PTSD) and Adjustment Disorders. Males were significantly more likely to be diagnosed with Attention Deficit Hyperactivity Disorder (ADHD), Cannabis-Related Disorders, and Conduct Disorder.
- ❖ Over 40% of males and 34% of females were diagnosed with both a mental health and substance use diagnosis.
- ❖ Caregivers reported that 28% of the females had a history of sexual abuse, nearly 50% talked about suicide, and over 22% had attempted suicide. Over 60% of males and 68% of females had family members who were diagnosed with or showed signs of depression.
- ❖ According to the OYAS, 71% of the youth served in BHJJ were moderate or high risk.
- ❖ In the current BHJJ counties, 35% of youth had felony charges in the 12 months prior to enrollment, ranging from 17% in Montgomery County to 90% in Summit County.

Educational Information

- ❖ Nearly 70% of the youth were suspended or expelled from school in the year prior to their enrollment. At termination, 83% of youth were attending school. At intake, 36% of youth earned mostly A's, B's, or C's while at termination, 49% of youth earned mostly A's, B's, or C's.
- ❖ At termination, workers reported that 94% of youth were attending school more or about the same amount as they were before starting treatment.

Mental/Behavioral Health Outcomes

- ❖ BHJJ youth reported a significant decrease in trauma symptoms from intake to termination.
- ❖ Results from the Ohio Scales indicated the caregiver, worker, and youth all reported increased youth functioning and decreased problem severity while in BHJJ treatment.
- ❖ Both males and females reported decreased substance use with respect to most of the commonly used substances, including alcohol and marijuana.
- ❖ Youth demonstrated a 50% reduction in the risk for out of home placement at termination. Seven percent of successful completers and 57% of unsuccessful completers were at risk for out of home placement at termination.
- ❖ Over 92% of caregivers agreed that they were satisfied with the services their child received through BHJJ and 95% agreed that the services they received were culturally and ethnically sensitive.

Termination and Recidivism Information

- ❖ Sixty-five percent (65.1%) of the youth terminated from the BHJJ program were identified locally as successful treatment completers. Nearly 72% (71.9%) of youth enrolled in the past biennium were identified as successful treatment completers. The average length of stay in the program was approximately 7 months (5.5 months for youth enrolled during previous biennium).
- ❖ Successful treatment completion produced lower percentages of subsequent juvenile court charges, felonies, misdemeanors, and delinquent adjudications than unsuccessful completion, although both groups demonstrated decreased juvenile court involvement after termination compared to before enrollment.
- ❖ One year after termination from BHJJ, 15% of successful treatment completers and 21% of unsuccessful treatment completers had a new felony charge. Of the youth entering BHJJ with at least one felony charge, 23% of successful treatment completers and 32% of unsuccessful treatment completers were charged with a new felony in the 12 months following termination from BHJJ.
- ❖ Eighty-two of the 2336 youth (3.5%) enrolled in BHJJ for whom we had recidivism data were sent to an ODYS facility at any time following their enrollment in BHJJ.
- ❖ In a matched comparison, 2.2% of youth who completed BHJJ successfully were committed to an ODYS institution 12 months after their termination while 19.0% of youth released from an ODYS facility were re-committed to an ODYS facility in the 12 months following their release.
- ❖ Using only the direct State contribution to BHJJ of \$12.6 million since 2006, the average cost per youth enrolled in BHJJ was \$4954. The FY12 per diem to house a youth at an ODYS institution was \$466 and the average length of stay was 11.8 months. Based on these numbers, the estimated cost of housing the average youth at an ODYS facility in FY12 was approximately \$167,000.