Comprehensive Services for At-Risk and Students in Juvenile Justice Programs

- Who are the at-risk students served in juvenile justice programs?
- Education, ESE and related services, substance abuse and mental health treatment.
- Transition planning for students in juvenile justice programs.

What should be the expectation of education and related services provided in juvenile justice programs?

- Quality education should mirror that of every other school in the district (e.g. in-field teachers, variety of instructional methods, rigorous curriculum, commensurate resources).
- Provision of ESE services based on the needs of the students and not the model of service delivery available in the facility.
- Administration of the DJJ (Department of Juvenile Justice) common assessment for mathematics and English language arts, state and district assessments.
- Adequate transition planning beginning upon entry and intensifying near the student’s release from a program. See school district transition contacts (handout).

What are barriers to performance outcomes for students in juvenile justice programs?

- Collaboration and coordination between sending school district and program school district. See Educational Records Coversheet (handout).
- Comprehensive district support (e.g., school counselors, accountability, professional development, CTE).
- Parental and community support.
- Provision of educational related services.

How does adequate transition planning in juvenile justice education benefit your districts and communities?

- Increase graduation rate, employment rates and post-secondary institution enrollment.
- Reduce dropout rate and recidivism.
- Rehabilitate mental health and substance abuse students to be productive citizens.

36 School Districts Serving Juvenile Justice Students
21 = Detention Centers
24 = Prevention Programs
12 = Day Treatment Programs (Intervention)
46 = Residential Programs

Number of Students Served in DJJ Programs in SY 2016-2017 = 18,240 (diagram 1)

Exceptionalities of Students with Disabilities in DJJ Programs for SY 2016-2017 (diagram 2)
93% of juvenile offenders reported at least one or more traumatic experiences. The average number of different traumas reported was six. Youth in the JJ population have rates of Post-Traumatic Stress Disorder comparable to those of service members returning from Iraq.

Where does mental health fit in the continuum of services in Florida juvenile justice programs?

- Residential, day treatment and detention programs provide mental health services and interventions based on the individual student’s need.
- Prevention and probation programs do not necessarily focus on mental health, but may be included based on the individual student’s need.
- Probation has referral systems in place for youth in need of mental health and/or substance abuse services in the community.
- Agency linkages established prior to student’s release from residential (e.g. Project Connect, Project Bridge, Check & Connect, SEDNET, APD, VR).
- MTSS- behavior support training, Trauma-informed care, PBIS training provided at some programs.

Florida Statutes (F.S.) and Florida Administrative Code (F.A.C.) rule referenced below are specific to DJJ Education:

s. 1001.31, F.S.

s. 1003.51, F.S.

s.1003.52, F.S.

s. 985.622, F.S.

Rule 6A-6.05281, F.A.C.

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65% – 70% of children in the juvenile justice system have a diagnosable mental health condition.