

Reforming Juvenile Detention in Florida

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Executive Summary

Purpose/Background

The National Council on Crime and Delinquency (NCCD) was sponsored by the Jessie Ball duPont Fund to independently study and assess the quality of care in juvenile detention facilities in Florida and how effectively resources are being used. NCCD interviewed 317 youth in secure detention as well as a number of staff who worked at the selected facilities of the Florida Department of Juvenile Justice (DJJ)—Miami-Dade Regional, SW Florida Regional, Brevard, Orange, Duval, and Leon Regional Juvenile Detention Centers. The study is a fair assessment of the conditions of confinement, needs of youth entering the system, and services received as reported by youth and staff. It also estimates the number of youth that could safely be placed in a non-secure alternative environment, thus reducing the overall burden on the system.

Major Findings and Recommendations

The comprehensive report distills primary and secondary data and details the critical areas of juvenile detention in Florida.

Is juvenile detention being used appropriately in Florida?

- It appears that Florida is overusing detention facilities, one reason being that they are not adequately funding alternatives. Approximately 35% of all youth referred to DJJ are admitted to secure detention. Minority youth were admitted to secure detention at higher rates than those for White youth.

Secure detention should be used to ensure public safety; it is not appropriate for youth, nor is it cost-effective for the state, to detain technical violators or non-violent offenders. NCCD recommends that DJJ validate and refine Florida's Detention Risk Assessment Instrument (DRAI) to identify youth who can be safely managed in less secure settings. It would also be worthwhile for the Department to collect and monitor detention/release rate trends and decision making, as this will provide important feedback to the system.

What are the conditions of confinement, and are they adequate?

Although the Department has made some improvements, such as investigations of staff misconduct and increased staff training, the following are findings that warrant immediate attention.

- Approximately 40% of all youth had experienced solitary confinement while in detention; most for less than one day. Group punishment was identified as the type of discipline most frequently used (73%). Significant differences were found across sites and by race/ethnicity.
- African American youth perceived unnecessary use of force by staff twice as often as White or Hispanic youth.
- Living conditions (cleanliness, food, recreation activities) were perceived to be deficient by the majority of youth in detention.

NCCD recommends that Florida create an independent panel, validated by the Department, that can further examine conditions (incident and

abuse investigations, use of solitary confinement, etc.) to avert potential problems and institute solutions. Florida should also consider administering a survey on the conditions of confinement to youth in every facility on an annual basis, which can help improve quality assurance and staff training.

What are the service needs of youth in detention, and are they being met?

Detention facilities are required to provide medical and education services to detained youth. Mental health and substance abuse treatment services are provided as needed and mostly for youth who are awaiting placement.

- **Education**—It appears that most youth participated in the education program, and many reported it to be a good program.
- **Medical Care**—About half of the youth reported needing medical care for an illness or injury while in detention. Though some sites were able to meet these needs, a few sites did not provide an adequate level of medical care services. Forty percent of youth reported not receiving needed medical services.

Girls reported a higher need for medical care for an illness (50% compared with 29% of males). Approximately 10% of the girls in our sample were pregnant.

The need for 24-hour medical care was reported by medical staff, care and custody staff, as well as some administrative staff as a means of increasing the overall efficiency of resource use.

- **Mental Health**—Many of the youth in detention reported emotional problems and high levels of

drug use. On average, girls reported more drug use, more emotional problems, and experiencing more traumatic events than males. Few youth reported receiving counseling or substance abuse treatment. Medical care staff, mental health staff, and education staff reported the need for more staff to assist in the delivery of services.

In order to prevent further tragedies related to medical care or crisis intervention, NCCD recommends that the state fund 24-hour medical staff. The state would do well to hire additional staff in medical care, education, and mental health departments to assist with paperwork, thus facilitating service delivery. This would also help to lower the high turnover rate of detention care workers.


Are there sufficient, well-tested alternatives to secure detention?

- The only alternative to secure detention in Florida is home-detention, for which there is little funding.


DJJ should consider an alliance with the Juvenile Detention Alternatives Initiative of the Annie E. Casey Foundation. The JDAI approach strongly emphasizes detention programming and alternatives that are culturally competent and gender responsive. Through a series of simulations, NCCD proposes that \$1.5 to \$2 million per year could be saved for each bed day if only 32% of youth in detention (or 16,709) were placed in alternative, low-risk residential settings or intensive outreach/tracking programs. These savings could be reinvested into treatment programs for those youth who remain in secure detention and used to improve services at DJJ residential programs.

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Introduction

Juvenile detention is one of the most critical points along the juvenile justice continuum, because it serves as the gateway into the system. In Florida and in other states, problems in juvenile detention have far-reaching implications. Being subjected to unsafe and oppressive conditions can harm the youth detained and their families and communities. Of primary importance, youth involved in this system have rights guaranteed to them under constitutional, federal, and state laws that should never be violated, especially by those entrusted to care for and protect them. Unfortunately, some youth in detention centers are denied their most basic needs such as food, clean and adequate clothing, and a safe living environment (Burrell, 1999). This situation has been compounded by an explosive increase in the number of youth in detention centers, which has led to a national crisis.

Overview of Research

The National Council on Crime and Delinquency (NCCD) was sponsored by the Jessie Ball duPont Fund to independently study and assess the quality of care in juvenile detention facilities in Florida and how effectively resources are being used.

NCCD's initial research questions and other important issues that emerged during the study were:

- What are the profiles of youth in detention (characteristics, conditions of confinement, youth needs and services received, and safety and security)?
- Are there any significant differences between gender and race/ethnicity regarding conditions (emotional conditions, services received, perceptions of staff)?
- What are the standards of operation in detention facilities across the state?
- What are the potential benefits for youth and taxpayers of using research-based alternatives to detention in Florida?

NCCD compiled information from a number of sources to answer these queries—one-on-one, in-depth interviews with youth in detention, interviews with knowledgeable staff members, on-site observations, facility documentation, state Quality Assurance standards and reports, and national best practice research.

The youth interviews took place at a representative sampling of six Florida juvenile facilities—Dade, Orange, Duval, SW Florida, Leon, and Brevard Regional Juvenile Detention Centers. The total sample of 317 youth, selected at random, were all awaiting adjudication, disposition, or program placement. From December of 2004 to February of 2005, using a validated, field-testing survey, trained interviewers asked the youth about their personal characteristics, the conditions of their confinement, their needs and the services they had received, and their views of safety in the facility.

The National Picture

A one-day census in 1995 of juveniles in residential placement found that there were over 24,000 juveniles in public detention centers nationwide, 74% more than were held in 1985. In 2001, there were over 27,000 juveniles in detention centers nationwide on an average day (Sickmund, Sladky, and Kang, 2004). Much of this growth can be attributed to an expansion of detainable offenses through changes in statutes. Approximately 24% of these youth were detained for technical violations (Sickmund, et al., 2004). It is alarming that such a large percentage of the youth that are currently detained do not need such restrictive measures.

How Does Florida Compare?

Detention Rates

The rate of youth detention in Florida is greater than the national average. In 2001, Florida detained

100 per 100,000, compared to the national rate of 88 per 100,000 detained juveniles ages 10 through the maximum age of jurisdiction for each state (Sickmund et al., 2004). In Florida, there were 52,181 admissions and 8,108 transfers to secure detention centers in FY 2002-03 (Florida DJJ, 2004f). Like many other states, Florida is overburdened by crowded and costly detention facilities.

Gender

In the U.S. most of the detained youth are males (81%), although the detention rates for young women are rising. The rate of detention for girls in Florida was higher than the national rate in 2001, 38 compared to 34 per 100,000 youth (Sickmund et al., 2004). In FY 2002-03, girls comprised 23% of the youth population detained in Florida. The Office of Program Policy Analysis and Government Accountability (OPPAGA) reviewed 90 case files of girls in the system in Florida, and found that they have high rates of diagnosed mental health problems (94%), conduct disorder and behavior disorders (84%), and use of psychotropic medication (48%) (OPPAGA, 2005). In Florida, almost half of girls in moderate- and high-risk residential programs have been sexually abused, more than 60% have been physically abused, and more than 60% have witnessed domestic violence in their homes. Seventy-five percent have run away from home at least once. More than 60% of these girls have a parent who has been arrested, and about 25% of girls in residential programs have been in foster care (Florida DJJ, 2004e). These issues are similar to the national profile of girls in residential programs. The number of girls entering the system, their histories, and the lack of available programs that are gender responsive should all be cause for serious concern.

Race/Ethnicity

Research has revealed that, in the national juvenile detention population, the disproportion of African American and Hispanic youth has skyrocketed. Since the 1980s, there has been an increase of 114% for

African Americans and 83 % for Hispanics, compared with a decrease of 14% for Whites (Krisberg, Noya, Jones, and Wallen, 2001). A substantially greater percentage of African American youth were detained in every offense category compared to White youth (Poe-Yamagata and Jones, 2000). Furthermore, even when referred for the same type of offense, African American youth were more likely to be formally charged in juvenile court (Poe-Yamagata and Jones, 2000). In Florida, African American youth make up 22% of the general population ages 10-17 (Puzzanchera, Finnegan, and Kang, 2005) compared to 45% of the youth in secure detention (Florida DJJ, 2004f).

Current Florida Picture

The critical issues in juvenile detention in Florida are the safety of the youth in secure detention, lack of alternatives, and lack of funding. There have been several highly publicized media stories about Florida's detention system, such as that of Omar Paisley, who died in his detention cell of a burst appendix after he cried in pain for three days. Both the Miami-Dade Grand Jury and the Florida House Select Committee on Juvenile Detention Facilities have examined the conditions in facilities in efforts to improve detention and prevent other abuses. Some DJJ officials, members of the legislature, and child advocates support research-based alternatives to detention that serve public safety and place children in the least restrictive environment. However, budget cuts have eliminated alternatives to secure detention, pressuring DJJ to make decisions that will enhance safety measures at detention facilities as well as look for ways to cut costs. Effective October, 2004, and pursuant to s. 985.2155 F.S., counties are sharing the costs for pre-disposition juvenile detention care services. Counties that are not fiscally constrained will pay an estimated amount to cover the costs of holding youth prior to their disposition. According to DJJ numbers, the cost is approximately \$186/per bed day in secure detention (Florida

DJJ, 2004g). This cost is passed on to taxpayers.

On a given day, there are approximately 2,000 youth in 26 detention centers across the state. In FY 2002-03, ten of the detention centers operated above capacity. Although there has been a slight decrease in the number of total admissions to secure detention, it has remained over 50,000 for the last 5 years. Interestingly, there was more than a 50% increase in the number youth admitted to residential programs for violations of probation between FY 2001-02 and FY 2002-03 (Florida DJJ, 2003). This is a result of the Department's emphasis on holding youth and staff accountable to individual terms of probation. The increase can also be attributed to judges who may commit youth in order to obtain treatment services that are not available or are inadequate in lower security programs (OPPAGA, 2003). The Florida Supreme Court has noted the "lack of adequate gender-specific programs and services for juvenile delinquent girls" and acknowledged NCCD's 2004 Florida Report about the many youth that can be better served by intensive home-based services and shorter institutional stays, followed by high-quality reentry services (Florida Supreme Court, 2004). Unfortunately, lower-level residential programs with treatment services or intensive in-home treatment services are not available options to judges in Florida.

What Should Be Done ?

We know that a substantial number of young people could be better served in less restrictive and less costly programs. In fact, failure to provide or utilize more appropriate and economical alternatives to incarceration has serious consequences. We should bear in mind that detention is a traumatic process for youth and their families to begin with. If we add substandard conditions and treatment to that, the problems are compounded in countless ways. Additionally, unnecessary detention costs and lawsuits resulting from substandard conditions are a financial

burden on taxpayers.

Greater awareness about the problems in juvenile detention is needed to improve conditions and guide detention reform. NCCD's recent Florida report, *Juvenile Justice in Florida: What Kind of Future?* shows that the issue of short-term secure detention deserves a separate and in-depth analysis. Florida can realize substantial cost savings without compromising crucial public safety and child protection goals in the area of secure detention (Krisberg and Patiño, 2004). NCCD already raised this issue in the context of residential placement. Secure detention offers a similar, compelling cost-savings potential. Youth who have violated probation or who have committed nonviolent offenses (public order, low-level, non-trafficking drug offenses, and property offenses) can easily be diverted into alternative non-secure settings as they await disposition or placement. Furthermore, more appropriate sanctions for eligible youth would maximize secure detention resources for those that need those most. Examples of alternatives to detention that Florida can consider are discussed in a later section.

NCCD's research study offers insight into the Florida Department of Juvenile Justice and into the State of Florida; it is a fair assessment of the conditions of confinement and issues of safety and security as reported by youth and staff. In addition to providing information about the nature of youth entering the juvenile justice system and their needs, the study reviews mental health, education, and medical services at these facilities. It also compares the experiences of youth in secure detention relative to gender and ethnicity. Further, it identifies appropriate alternatives to secure detention and estimates the number of youth that could safely be placed in a less restrictive environment. Finally, it recommends best practices that can improve the conditions of confinement for the remaining youth in secure detention, thus reducing the overall burden on the system.

Methodology

Below are NCCD's initial research questions and other important issues that emerged during the study.

- What are the profiles of youth in detention (characteristics, conditions of confinement, youth needs and services received, and safety and security)?
- Are there any significant differences relative to gender and race/ethnicity regarding conditions (emotional conditions, services received, perceptions of staff)?
- What are the standards of operation in detention facilities across the state?
- What are the potential benefits for youth and taxpayers of using research-based alternatives to detention in Florida?

NCCD selected six sites—Dade, Orange, Duval, SW Florida, Leon, and Brevard Regional Juvenile Detention Centers. These sites represent a cross-section of locations throughout the state (north region, central region, south region, and urban or rural) and a range of operating capacities (small or large) and utilization (above or below capacity). See the appendix for a description of detention centers across the state. Based on the average daily population of all detention sites in FY 2002-2003 (n=1961), we planned to interview a sample of 322 youth in detention. This sample was based on a power analysis with a 95% confidence level¹. The sample included youth that were awaiting adjudication, disposition, or placement into a program, had been in detention for at least 72 hours, and agreed to participate.

NCCD first obtained approval from the Florida

Department of Juvenile Justice Institutional Review Board (IRB) to conduct this study. Next, NCCD delivered a comprehensive training to the interviewers and secured background screening approval from the DJJ. NCCD then contacted the selected sites to explain the research study and data collection plan and to schedule the interviews. On the first day at each scheduled site, the DJJ staff generated a list of current admissions, stratified by gender. Due to an unanticipated low weekly population at one of the sites, the total sample of youth who participated in the survey was n=317.

To determine which youth to survey, a random sample was drawn from the male stratum based on the proportion/percentage of beds at each facility. All eligible females were asked to participate in order to reach a statistically valid sample. If by chance, a youth that was selected from the current admissions list had been in detention for less than 72 hours, we replaced her with an eligible alternate or waited to interview that youth until after she had served a minimum of 72 hours. This sampling strategy allowed for interviews with youth who had been in detention for a short time as well as youth who were more serious offenders or who had special needs.

Data collection

The data was collected between December of 2004 and February of 2005. In general, interviews were conducted on the weekends or during after-school hours. Youth had the right to refuse to participate in the interview or to stop participation at any time. Youth were randomly assigned to an interviewer and moved to a private area where they could answer questions in a one-on-one setting. Each interviewer was required to explain the project, procedures, time commitment, risks and benefits of participation, and safeguards to maintaining confidentiality of the youth. Interviewers secured permission from youth prior to asking them questions. Interviewers recorded their responses onto the survey protocol.

¹ Sample size determined by formula: $Z^2 * (p) * (1-p) / c^2$ where Z = Z value (e.g., 1.96 for 95% confidence level) p = percentage picking a choice, expressed as decimal (.5 used for sample size needed) c = confidence interval, expressed as decimal (e.g., .05 = ±5)

Sampling of Detention Facilities

Facility	Type of Facility	Facility Bed Space		Planned Youth Sample (n=322)	Actual Youth Sample (n=317)
		Number of Beds	Percentage of Total (n=689 beds)		
Dade	Large Urban Over capacity	226	33%	106	106
Orange	Large Urban Over capacity	151	22%	71	71
Duval	Large Urban Below capacity	144	21%	68	63
Leon	Small Rural Over capacity	56	8%	26	26
SW Florida	Small Rural Over capacity	60	9%	29	29
Brevard	Small Rural Below capacity	52	7%	22	22
Total		689	100%	322	317

Participants were administered an in-depth questionnaire, including but not limited to constructs such as youth characteristics (age, gender, ethnicity), conditions of confinement (number of residents sleeping in the same room, perceptions of facility staff), youth needs and services received (mental health, education, substance use, abuse), and safety and security (victimization in facility, fear of being attacked, presence of and involvement in gang activity). Scanning technology expedited the data processing. No personal identifiable information was collected.

Data Analysis

The data collected from the surveys (n=317) was scanned into SPSS and was analyzed with regard to characteristics of youth in detention, needs, services, perceptions regarding rules, and treatment by staff. Data was examined by gender and by race and ethnicity. Our sample consisted of 235 male youth and 82 female youth or 74% male and 26% female. Youth in our sample were 11-19 years of age. When asked about race and ethnicity, 23% of the identified as White, 53% as African American, 20% as Hispanic,

and 4% as “Other².” Of the Hispanic youth, 60% said they were Puerto Rican. Youth could choose more than one Latino ethnicity.

In addition to the survey data, a variety of sources were used to answer the research questions and complete the data analysis. Qualitative data was collected from structured interviews with staff at juvenile detention facilities, on-site observations, and documentation provided by the facilities (organizational charts, facility operating procedures, annual training calendars, youth orientation brochures, and other pertinent information related to mental health, medical, and educational services). We asked administrators to select several knowledgeable staff at each facility who could provide the most information about medical care, education, mental health needs, security, and staff training. A total of 36 interviews with staff were conducted, and the responses are incorporated in this report. Conceptual analysis was used to extract common themes and patterns related to the issue areas: operating procedures, above and beyond areas, areas of challenge, critical issues, training, available resources, and resources needed. This qualitative information was supplemented through additional documentation such as facility documentation, state Quality Assurance (QA) standards and reports, and national best practice research.

Quantitative data collection involved aggregate data regarding the number of referrals to the department, admissions to secure detention, average length of stay, and other related information by offense, gender, and race/ethnicity. Much of this information is accessible online (<http://www.djj.state.fl.us/research/statsnresearch/index.shtml>) through DJJ’s management reports and delinquency profile 2002-2003 data system. The Office of Juvenile Justice and Delinquency Prevention (OJJDP) tracks national data on the use of detention centers through the Census of Juveniles in Residential Placement databook which is

² “Other” includes: Haitian, American Indian or Alaska Native, Asian, or Native Hawaiian or Pacific Islander

also accessible online at <http://ojjdp.ncjrs.org/ojstatbb/Cjrp/>. NCCD used a compilation of cost data provided by the DJJ Quality Assurance Annual Reports and the DJJ Pre and Post Dispositional Analysis for Secure Detention Projections to simulate the cost-savings of diverting a percentage of youth in secure detention into an alternate non-secure residential setting.

Limitations

The limitations for this research study are that, while every effort was made to include a cross-section of detention center sites throughout the state, the data can only be generalized for these six sites. Additionally, the information regarding conditions of confinement and services received are self-report data provided to interviewers.

Conclusion

This methodology yielded results about the nature of youth in detention, their services received, and their safety and security, for which little information exists. The selection of six sites was critical in providing a cross-section analysis of the conditions throughout the state. The sites represented large and small facilities, urban and rural locations, and over-capacity and below-capacity conditions. The heart of the research is an analysis of what was shared by youth regarding current conditions and practices. Supplemental data that came from staff interviews, on-site observations, facility documentation, state QA standards and reports, and DJJ and OJJDP data provide the context in which to interpret youth responses and fairly assess the comprehensive picture. Scanning technology not only greatly expedited the data analysis, but increased reading accuracy as well.

Research Findings

The original research questions, in combination with other important issues that arose during interviews, framed the following critical areas regarding juvenile detention in Florida.

- Is juvenile detention being used appropriately in Florida?
- What are the conditions of confinement and are they adequate?
- What are the service needs of youth in detention and are they being met?
- Are there sufficient, well-tested alternatives to secure detention?

Is juvenile detention being used appropriately in Florida?

The data provided by the Census of Juveniles in Residential Placement indicates that Florida locks up more youth in secure detention than the national average (Sickmund, Sladky, and Kang, 2004). The purpose of detention in Florida is to provide temporary custody of youth who are awaiting court adjudication, disposition, or placement into a DJJ program. In Florida, a standardized detention risk assessment instrument (DRAI) is used to screen youth who are a risk to public safety and to determine if detention care is warranted.

The use of detention is based on the DRAI score or a finding that 1) youth present a substantial risk of not appearing at a hearing, 2) there is a significant risk of the youth inflicting bodily harm to others as evidenced by recent behavior, history of committing a property offense prior to adjudication, disposition, or placement, 3) the youth committed contempt of court, or 4) there are requests for protection from imminent bodily harm (s. 985.213 F.S.). Examples of specific offenses that mandate secure detention in

Florida are possession of or discharging a firearm on school property (s. 790.115 F.S.), domestic violence (s. 741.28 F.S.), capital felony, life felony, first or second degree felonies, or a third degree felony that is an act of violence (s. 985.213 F.S.). Based on the assessment, a decision is made to place the youth into secure, non-secure, or home detention care (s. 985.213 F.S.).

Secure Detention

Secure detention is a secure, jail-like facility operated by the Florida Department of Juvenile Justice. There are currently 26 centers across the state. In secure detention, youth receive basic educational services, medical services, mental health counseling, substance abuse counseling, crisis intervention, food services, and structured recreational activities. Youth are also allowed visitation, correspondence, and telephone calls.

Non-secure Detention

Non-secure detention is temporary custody in a community-based residence that is contracted with the Department. Unfortunately, there is virtually no funding for this type of alternative in Florida; therefore, it is not a real option, though authorized in statute.

Home Detention care

Home detention care is used for youth who can be released to a physically non-restrictive environment, such as their home, usually to a parent or guardian. Funding for electronic monitoring was vetoed by the governor during the 2004 session. Unfortunately, loss of home detention staff due to budget cuts may have resulted in increased use of secure detention for lower risk youth.

Because non-secure detention is not a readily available option in Florida, there may be many youth that otherwise would meet the criteria for a less-restrictive holding environment, but for lack of such an environment are sent to secure detention. This chapter will conclude with a discussion of more

appropriate practices and alternatives for youth who do not need secure detention.

To answer the question of whether juvenile detention is being used appropriately in Florida, NCCD analyzed the trends related to gender, race, and ethnicity, for youth that are referred (arrested) for an offense compared with those that are detained. The profile data from the DJJ show that approximately 97,000 youth were referred to DJJ in FY 2002-2003. This is a slight decrease from 1998. Most youth are referred for misdemeanor offenses, which is a trend that has remained steady. Over the last five years, there has been a decrease of 13% for felony referrals. However, over the same five-year period, there was an increase of more than 30% in the number of youth referred for “other” offenses, which include violations of probation and transfers to secure detention. Of the youth referred, most are between the ages of 16 and 17, although the largest increase was for 13-15-year-olds. Although still the majority, the number of males referred has decreased by 12 %, while referrals for females have increased 10% over the last five years. Similar to national trends, in Florida, more White youth are referred to the system than any other group. Despite this fact, rates for referrals, detention, and commitment per general population show that African American and Hispanic youth are overrepresented in the juvenile justice system (Florida DJJ, 2004c). The data for the Hispanic population is unreliable prior to 2000³, but shows a steady increase in referrals from FY 2001-2003. See the appendix for complete trend charts.

The data on detained youth differ from that on referred youth. In FY 2002-2003 there were over 52,000 admissions to secure detention. Similar to national trends, African American youth are disproportionately represented in secure detention in Florida. Of all youth in secure detention, 45% are African American; whereas African American youth

³Data collected from FY 1998-99 and 1999-00 is not accurate for Race-Ethnicity, particularly for the Hispanic population. Please discount the results displayed from FY 98-99 and 1999-00.

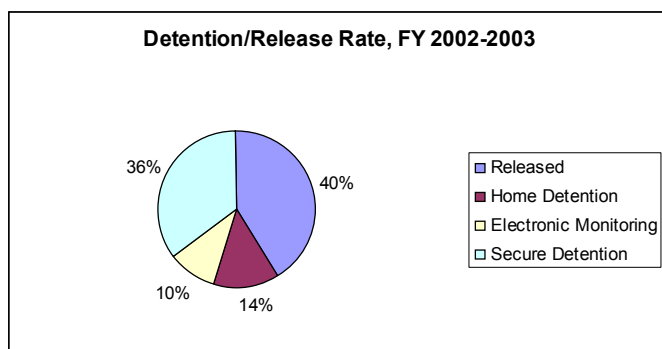
Table 1:
Percentage of Youth Admissions to Secure Detention by Gender and Race/Ethnicity, FY 2002-2003

Gender and Race/Ethnicity	Referrals (Total Admissions)	Admissions to Secure Detention	Percentage Detained
White Male	50,796	15,399	30%
African American Male	43,408	18,549	43%
Hispanic Male	13,555	5,151	38%
Other Male	2,576	1,273	49%
White Female	19,818	5,218	26%
African American Female	15,976	5,135	32%
Hispanic Female	3,842	1,167	30%
Other Female	770	289	38%
Total Admissions†	150,741	52,181	35%

Source: Table adapted from 2004 Outcome Evaluation admissions to secure detention and DJJ Profile “referrals” data for 2002-2003. † Youth may have been referred to DJJ more than one time during the year. Numbers reflect total admissions for both referrals and detention.

comprise only 22% of the general population⁴. Of the youth in detention, 23% were female.

Based on this data, it appears that approximately 35% of youth referrals become admissions to secure detention. However, the percentage of White males and females is lower (30% and 26% respectively) in comparison to their African American, Hispanic, and “Other” counterparts. The pie chart below shows the other detention options available at intake/assessment. Of the youth⁵ who were referred to the DJJ in FY 2002-2003 (n=7,743), 40% were released or processed



Source: Unduplicated numbers of youth in secure detention, FY 2002-2003, DJJ, 2005. Provided by Mark Greenwald, DJJ analyst, on 4/15/05.

⁴In the general population ages 10-17, youth represent the following breakdown: White youth (56%); African American youth (22%); Hispanic youth (19%); and Other (3%). Puzzanchera, Finnegan, and Kang, (2005). Easy Access to Juvenile Populations Online. Available: <http://www.ojjdp.ncjrs.org/ojstatbb/ezapop/>

through non-judicial options. The remainder of youth were placed in secure detention (36%), electronic monitoring (10%), or home detention (14%).

Unfortunately, the detention/release rate by most serious offense is not available from the DJJ at this time. DJJ has made modifications to its Juvenile Justice Information System (JJIS) to begin to collect and match records, which may have several referral numbers (transfers, pick-up order, etc.), with a youth’s original arresting charge. To estimate the percentage of youth who may be eligible for a less restrictive and less costly placement, NCCD analyzed OJJDP-detailed offense profile data of youth detained in Florida for whom data is available (See Table 2). This revealed that 24% of youth were detained for a technical violation (as most serious offense), 3% for an “other property offense,” 5% for “other drug offense-non trafficking,” 7% for public order, and 1% for a status offense (Sickmund, Sladky, and Kang, 2004).

Table 2:
Percentage of Youth Detained in Florida by Most Serious Offense, 2001 (snapshot data)

Stay in Detention		Eligible Estimates	
Person	32%	Technical Violations	24%
Property	25%	Other Property	3%
Drug	1%	Other Drug	5%
Weapons	2%	Other Public Order	7%
		Status Offense	1%
Total	60%	Total	40%

Table adapted from Census of Juveniles in Residential Placement, Sickmund, Sladky, and Kang, 2004.

Summary

It appears that the option to place youth in secure detention is used frequently in Florida. At least ten detention centers operate over capacity on any given day (See appendix). In 2003, approximately 35% of youth referred to DJJ were placed in secure detention, and only 14% were placed on home detention. Minority youth were admitted to secure detention at higher rates than White youth. Because of a lack of funding,

⁵ Youth count is unduplicated.

electronic monitoring is no longer an option, which may cause an additional 10% of youth who would be eligible for electronic monitoring (alternative) to be placed in secure detention. Based on the OJJDP snapshot data of youth detained in Florida by more serious offense, approximately 40% of youth in secure detention may not need such restrictive measures. Because non-secure detention in Florida is not available, with the exception of home detention (for which there is limited funding), it is important to discover the number of youth who scored less than the minimum points needed on the DRAI, but were placed in secure detention because of lack of alternatives. It is also important to note that DJJ is not the only authority for making detention decisions; the courts may also order a youth into secure detention, which overrides the screening instrument.

Reconvening the Detention Risk Assessment Instrument Committee to review and make appropriate changes to the screening criteria for youth in detention is recommended. The instrument should be research-based and validated. The level of consistency and accuracy of scoring should be examined.

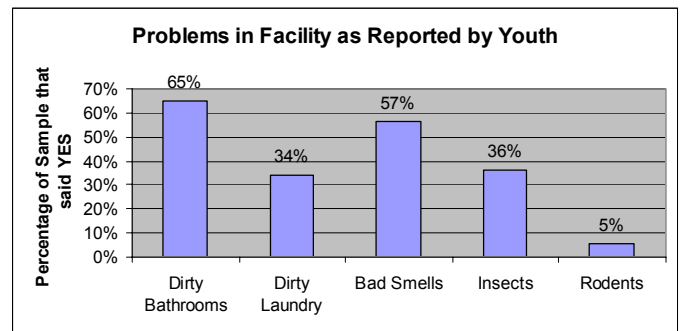
Further analysis is needed to determine whether decisions to detain youth in secure detention are appropriate, based on assessment data. Because we could not obtain from DJJ detention release information by offense, we cannot draw conclusions about the appropriateness of those decisions. It would be worthwhile for the department to collect and monitor this information, as it will provide important feedback to the system. It would also be beneficial to examine the conditions that result in the disproportionate use of detention for minority youth. Additionally, DJJ should add measures to the instrument to identify youth who can safely be placed in an alternative to secure detention. Examples of alternatives to detention are provided at the end of this chapter along with a cost-analysis of providing a level of care that may be more consistent with public safety for youth detained for technical violations and non-violent offenses.

What are the conditions of confinement? Are they adequate as reported by youth and staff?

The following section will report the perceptions of detained youth regarding living environment, treatment by staff, length of time in solitary confinement, safety and security, victimization and other concerns, including significant differences by gender, by race or ethnicity and by site. Lastly, this section will report the responses of detention staff about security, resources, and written policies and procedures.

Living Environment

Under the category of living conditions, the majority of youth (64%) reported that the facilities provided a good education program. However, most reported that the facility was not clean (57%), did not serve good food (78%) or did not offer good recre-



ation (65%). There were significant differences between sites regarding youth perception of cleanliness, where at one site only 23% of youth felt the site was not clean, compared with 76% of youth at another site.

The majority of youth identified dirty bathrooms (65%) and bad smells (57%) as problems in the facility

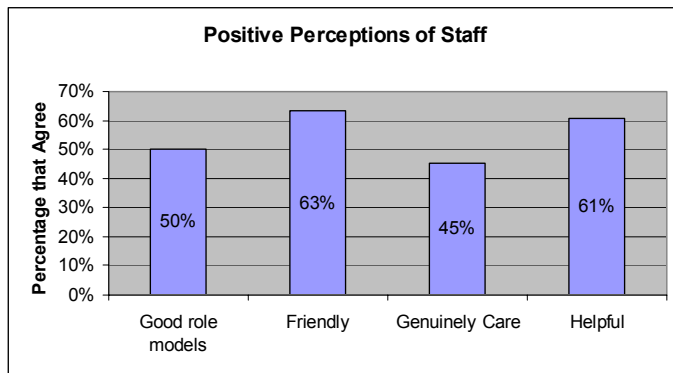
along with many who stated that the facility had insects (36%) and dirty laundry (34%). Rodents were named by some as being a problem in the facilities.

Fifty-three percent of the youth reported difficulty falling asleep (n=167); the most frequent reason for not being able to sleep was the light (65%) followed by noise (48%). White youth were more likely to share a room with another resident (75%) as compared with African American youth (55%) and Hispanic youth (49%).

Perceptions About Staff

When asked about the characteristics of staff, youth held both positive and negative perceptions. The majority of the youth in this sample felt that staff were friendly and helpful, and over a third stated that they were good role models who genuinely care. More than 40% felt that staff were disrespectful and mean, and about a third felt they were hard to get along with. The more likely youth were to agree to positive staff perceptions, the less likely they were to agree to negative perceptions.

Notably, females were less likely to think staff were friendly (55% compared with 65% of males). The most variation occurred by site, for example,



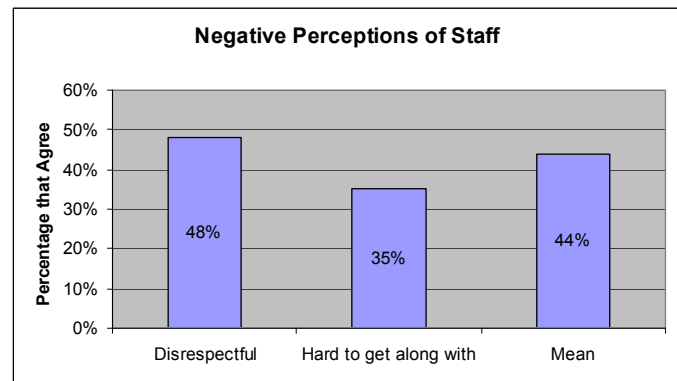
when asked if staff were helpful, 83% of the youth at one site answered yes whereas at another site 49% of the youth found staff to be helpful. At one site 29% of youth stated that they felt the staff genuinely cared

about them, whereas at another site 68% said the same. The site where the lowest percentage of youth felt that staff genuinely cared for them also had the lowest percentage when answering if they felt that staff were good role models (39%).

Treatment by Staff

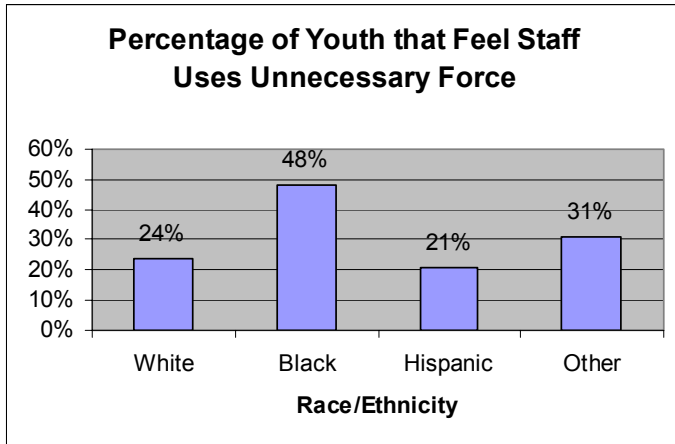
Youth were asked if they felt detention staff used physical force when they really did not need to. Nearly half of African American youth (48%) felt that staff used unnecessary force (n=76). This is twice as high as for Hispanic (21%, n=13) and White youth (24%, n=17). Response levels about unnecessary force ranged from 18% to 48%, depending on the site. Sixty two percent of Hispanic youth reported that they experienced loss of special privileges compared with 51% of White and 48% of African American.

Interestingly, when asked, 55% of the girls felt that



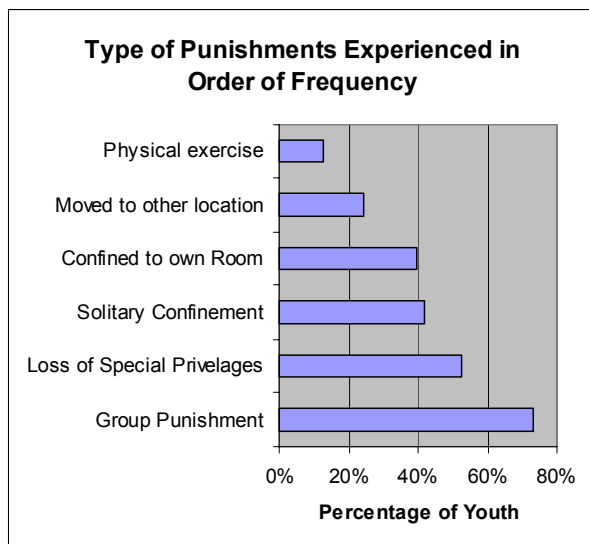
they did deserve the punishment they received, whereas only 40% of the boys felt they did deserve the punishment. There was a significant variation among sites about the fairness of punishment, where 36% of youth at one site felt that they were punished unfairly, and 73% at another site said this was true.

Youth reported experiencing group punishment with the greatest frequency (73%). Fewer girls than boys reported this—65% and 76%, respectively. There were differences among sites in the areas of group punishment (50% and 61% at two sites and 77% elsewhere) and loss of special privileges such as watching television and phone calls for 27% at one



site compared with 78% of youth at another.

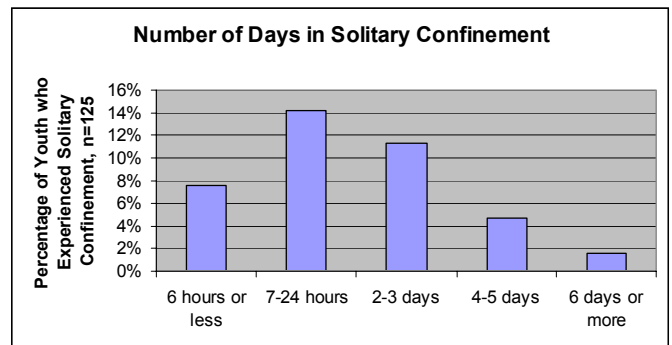
Approximately 40% (n=125) of youth had been sent to solitary confinement during their time in secure detention. Solitary confinement is a form of discipline where youth are moved to an isolated cell



and are not allowed to have any contact with other youth. While more than half of these (22%) reported that the length of time away from other residents in detention was for less than one day, 11% reported being in confinement for 2-3 days, 5% for 4-5 days, and 2% for 6 days or more at one time⁶. There were no significant differences by gender or by site for solitary confinement. However, we found statistically

⁶Youth self report their current length of stay in solitary confinement.

significant differences by race and ethnicity, where 28% of the White youth, 47% of the African American youth, 41% of the Hispanic youth, and 54% of “Other” youth reported having been sent to solitary confinement as a form of discipline.



Safety and Security

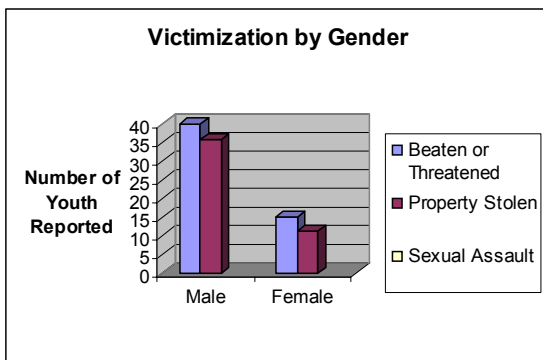
Fear of physical attack by another resident, staff member, or outsider coming into the facility was not significant across race/ethnicity or by gender. However, approximately 25% of girls were somewhat or very afraid of physical attack by another resident. More males reported fights in the facility (82%) compared to females (65%).

The most significant variation regarding fear of attack was by site. At one site, 34% of the youth said that they feared being attacked by another resident, whereas less than 15% of the youth experienced this fear at most of the other sites. At three of the sites, over 15% of the youth feared attack by staff (15%, 17%, and 20%). At one site, 17% of the youth feared attack by an outsider, where 5% at another site had this issue.

Victimization

No sexual assault was reported by this sample. Less than 20% of youth reported being beaten or threatened with being beaten in detention (n=55). Eight youth reported injuries such as bruises, cuts, or

chipped teeth as a result of being beaten, three of which needed medical treatment. Of these eight youth, five reported being hurt by another resident, while three youth reported being hurt by staff. It is important to note that, of the youth that reported being threatened or beaten (n=55), half said the incident was reported, and 70% of them said that no steps were taken to stop this from happening again. There were no significant differences between gender, race/ethnicity, or by site regarding victimization.



Fighting and Gangs

When questioned about fighting and gangs, 77% of youth reported that fights occurred inside the facility during their stay in detention; 40% of youth reported gangs inside the facility; and 25% of youth reported fighting between rival gangs. There were significant differences between sites; the percentage of youth reporting the existence of gangs ranged from 5% to 70%.

Contraband

Youth reported a low level (less than 1%) of contraband, which included illegal drugs, guns, and knives.

Staff Interview Data

Safety/Security

Detention center staff are responsible for the care and custody of youth. This includes movement of

youth, visual checks, random head counts, visitation, and crisis intervention. The finding that sites were virtually free of contraband was noted as a positive accomplishment that adds to youth and staff safety. Staff at one site mentioned their behavior management system had good “buy in,” whereas staff at another site said their system needed improvement. The challenges that exist for women officers were acknowledged. Lack of riot training was mentioned as an area of concern regarding safety. Interestingly, it was suggested that input from detention officers (floor staff) should be included in administrative planning and policy changes. The inability to use juvenile detention officers in a direct care role when they have not completed their three-phase training was a challenge for several sites, especially when there is high turnover of other staff. OPPAGA has reported that the turnover rate of detention care workers is double the average of other state employees, 26% compared with 13% (OPPAGA, 2002).

Policies and Procedures

All juvenile detention centers receive performance and compliance ratings by the DJJ Bureau of Quality Assurance. Program components include Administration—program management and training and staff development, Core Services—booking, living environment, mental health/substance abuse services, behavior management, food services, and health services, and Safety and Security—program security, program safety). Education services are monitored by the Florida Department of Education. Several of the sites provide youth with an orientation handbook or introductory video regarding their rights, services they receive, and the rules at the center. Youth and staff are allowed to call the statewide child abuse hotline to report any abuse. Additionally, policy changes have been made since the death of Omar Paisley to allow staff to call 911 in the event of an emergency. Staff are also encouraged to report staff misbehavior to the new Central Command Unit. Additionally, the new administration has implemented an exit interview with

a youth component to provide feedback from youth to staff about their experiences while in detention.

Facility Operating Procedures (FOPs) are developed by each site based on the state standards and specific issues of the facility. Summary versions of the policies and procedures were posted in several locations throughout the sites. Although many of the facilities were in the process of revising their FOPs based on the new standards for 2005⁷, several of the sites had copies for staff access in various locations. At one site, staff are given a pocket information guide that contains relevant policies and procedures.

Summary

Although the Department has made some improvements, such as investigations of staff misconduct and increased staff training, the following are findings that warrant immediate attention:

- Approximately 40% of all youth had experienced solitary confinement while in detention; most for less than one day. Group punishment was identified as the type of discipline most frequently experienced (73%). Significant differences were found across site and by race/ethnicity.
 - African American youth perceived the unnecessary use of force at almost twice the percentage of White or Hispanic youth.
 - More than 50% of youth of all races reported being punished unfairly.
 - The level of fighting inside of facilities should be examined, because it appears to occur frequently.
 - Living conditions (cleanliness, food, recreation activities) were perceived to be deficient.

⁷Detention Program Standards 2005 (Florida DJJ, 2004d) can be accessed at <http://www.djj.state.fl.us/DJJServices/qa/standards05/detention.shtml>. These components are developed based on national best practice standards. For a comparison chart of state and national standards, see appendix.

- Dirty bathrooms were identified most frequently as a problem in the facility compared with laundry, smells, insects, or rodents.
 - More than half of the youth in our sample reported difficulty falling asleep. The most frequent reason was identified as “light.”
 - A strong percentage of youth reported staff had positive characteristics (friendly, helpful), but a large number also perceived staff with negative characteristics (disrespectful, mean).

Positive Findings:

- About 75% of youth felt that problems between residents and staff could be worked out.
 - Fewer than 20% of youth were intimidated about filing a grievance.
 - Less than 15% of youth reported being “held down” by staff.
 - There was a relatively low level of victimization across all groups.

This study did not examine the reasons that some of these disproportionate conditions and practices exist. However, NCCD believes that conditions in some Florida detention facilities are unacceptable and could expose the State to litigation. NCCD recommends that Florida create an independent panel (validated by the department) that can further examine conditions (incident and abuse investigations, use of solitary confinement, etc.) in order to stay ahead of potential problems and institute solutions. Florida should also consider administering a survey on conditions of confinement to youth in every facility on an annual basis, which can help improve quality assurance measures and provide information regarding staff training needs.

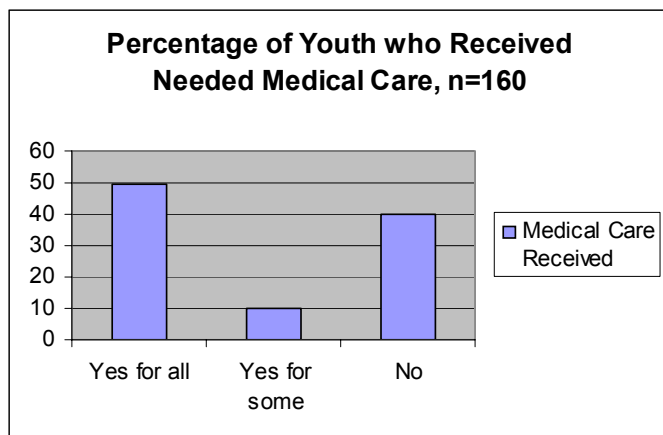
What are the service needs of youth in detention, and are they being met?

The following section will discuss the overall needs and level of services received as reported by youth in the areas of medical care, education, emotional issues, and substance abuse including significant differences by race/ethnicity, by gender, and by site.

Medical Needs and Services

About half of the youth (n=160) reported that they needed medical care for an illness, injury, or for their eyes, teeth and/or hearing. Of those youth, 50% reported not receiving all the medical care they needed⁸.

Significantly, girls reported more medical needs; 50% of girls needed medical care for an illness compared with 29% of males. More girls (23%) needed medical care for their eyes, teeth, or hearing as compared with 9% of males. However, more girls (43%)



⁸Our sample consisted of youth that had been in detention for at least 72 hours. The 50% is comprised of 20% of youth that had been there 4-10 days and 30% of youth who had been there more than 11 days. These youth reported not receiving the medical care they needed.

reported receiving all the medical care they needed as compared with only 26% of males. African American youth were the least likely to report having needed medical care for an illness—28%, compared with 62% of “Other youth,” 35% of Whites, and 44% of Hispanics. There were no statistically significant differences by race/ethnicity in medical care received. Differences in medical care services were found across sites; all youth at one site reported receiving all the care they needed, compared with three sites where at least 30% of youth reported not receiving all the care they needed.

Pregnancy

Fifteen percent of females in detention had children. Ten percent of females in detention were currently pregnant. If this number were applied to detention statewide, we could expect that on a given day, as many as 50 girls⁹ in detention are pregnant.

Education

Thirty percent of youth reported being at the same grade as they were during the last school year (n=114). Approximately 40% of the sample reported being in the ninth grade. Most youth interviewed reported spending 5-6 hours in school while in detention; however, at one site, 60% of youth reported spending 2 hours or less in school per day. Based on Florida Department of Education standards, youth are required to receive 300 minutes of education daily. Most youth had a positive perception of the school program at their facility (63%), though girls were significantly less likely to agree. Of those youth who were 16 and older, 14% reported availability of GED preparation and 6% participated in GED testing.

According to the Florida Department of Education, 15% of the students enrolled in public school for Fall 2003 were identified as students with disabilities.

⁹Fifty girls is a calculation based on ten percent of the average daily population of females in detention statewide.

The percentage of Exceptional Student Education (ESE) students (those having physical, intellectual, emotional or other special needs) in the Department of Juvenile Justice was 44%, almost three times that of public schools. More specifically, students with behavior disorders comprise 48% of the ESE juvenile justice population, but represent only seven percent of the ESE school population (JJEEP, 2003).

Emotional Needs

Up to 36% of the girls reported having experienced five or more emotional issues in the previous two months, compared with 10% of males. Six percent of the girls reported experiencing 10 of the 11 identified emotional issues¹⁰. Also, 61% of girls reported having experienced “something very bad or terrifying” happen to them, and 31% of girls reported having attempted suicide. More than 50% of both boys and girls reported having witnessed someone being severely injured or killed. Thirteen percent of our sample (n=41) reported taking medication regularly for an emotional condition. A significantly larger portion of girls than boys reported taking such medication—22 of 82 girls (27%) versus 19 of 235 boys (8%). Of both boys and girls, 24% of White, 15% of Hispanic, and 9% of African American youth were taking medication regularly.

Available Counseling¹¹

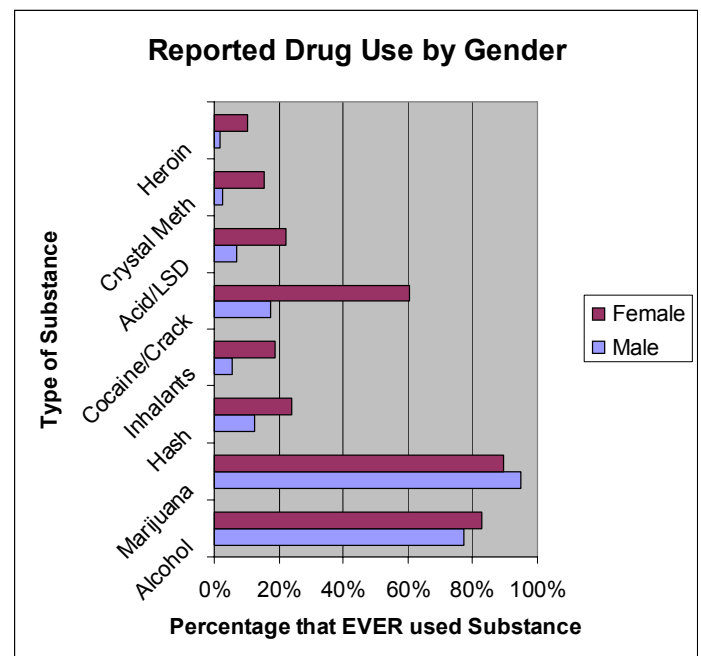
Only 22% of youth (n=70) reported receiving counseling for emotional problems (39% of females and 16% of males) while in secure detention, 93% of those reported receiving individual counseling, and 34% reported receiving group counseling. More than 70% of these youth reported that counseling was either somewhat helpful or very helpful. The most frequent reason given by those youth who did not receive counseling for emotional problems (n=245), was “didn’t need to talk with a counselor” (36%),

¹⁰Emotional issues included: ability to pay attention, suicidal ideation, feelings of loneliness, anger, bad thoughts/dreams about personal events, etc.

“facility doesn’t offer counseling” (29%), and “didn’t know how to arrange for counseling” (19%). The utilization of counseling services also differed significantly across race and ethnicity, where Hispanics were least likely to receive counseling (10%) compared with 26% of Whites and 24% of African Americans. Sites varied in the level of counseling services received as reported by youth, ranging from 13% to 54%.

Substance Use

Of those youth who reported using drugs (n=217), 90% reported not receiving any substance abuse treatment in detention. When looking at drug use by gender, females reported using more types of drugs compared to males. On average, females had used 3 types of substances, compared with 1.6 for



¹¹DJJ notes that a sizable proportion of youth are released from secure detention shortly after admission by the courts, which limits the opportunity to provide counseling to every youth that enters the facility. For this reason, NCCD data only applies to youth who have been in detention for three days or longer. Half of the youth who reported not receiving counseling were there 4-15 days, but at least 30% of youth who had been there 16 days or more reported not receiving counseling.

males. Use of Cocaine/crack, Ecstasy, and “Other,” which includes illegally obtained prescription medication, was higher for females than males. Significant findings regarding substance use by race/ethnicity show that White youth were more likely (84%) than Hispanic (72%) and African American (60%) to report ever using drugs. Most youth in detention did not receive substance abuse treatment. Only 19% of females and 6% of males received drug treatment.

Staff Interview Data

The interviews with detention staff provided invaluable information and insight into each site. Staff, as adults providing a service to youth, have an important perspective about how various areas are handled by their facility. Although there were several staff who had been working at their sites for less than one year, many had been at the same site for five to ten years. The information from staff provided context for many of the responses reported by youth.

Each site contracts all of its own medical care and mental health services. Education services are provided by the local school department and staffed by certified county teachers. Staff discussed the following issues with regard to availability of services and resources with NCCD staff.

Medical

All sites have an on-site medical clinic or designated area. With regard to the consistency of communication, at several sites, medical staff and detention supervisors meet weekly to discuss medical issues and alerts. Sites varied regarding procedures such as sick call and medication distribution. For example, two sites handled sick call on a priority triage basis, two sites had daily sick call, and the other two sites would see youth within 24 hours. At least half of sites stated that supervisors and senior officers are trained to distribute medication when medical staff is not on site. Most sites stated they were struggling with similar medical care challenges. Several sites mentioned that there is a 24-hour need for medical care services; it is a

challenge to perform all care within working hours. Five sites indicated that they need more staff to carry out the medical services at the facility. The types of staff needed included medical staff, custodial staff, clerical, and detention officers to transport the youth.

Mental Health

Staff at all sites discussed the mental health intake process, which includes noting youth that are at risk of suicide or have serious mental health needs. Mental health staff participate in weekly or bi-weekly staff meetings and provide periodic training to detention officers on mental health issues and awareness. One site provided stress management training to staff. Four of five sites mentioned on-site or on-call crisis intervention and two sites discussed gender-specific group counseling for girls. While several sites discussed that training is provided by mental health staff to officers, other detention staff reported more mental health staff and training were necessary. Several mental health staff discussed the challenge meeting the requirement of duplicate paperwork for the site’s system, the state system, and their contracted system’s database. Staff at several sites commented on the need for more space to provide services, and those at one site discussed the challenges of maintaining confidentiality when officers must keep youth in sight during counseling.

Education

At these sites, youth were grouped by age, gender, or grade level for class time. Many times, the older boys would be separated by grade level, but girls and younger boys, respectively, were kept together in the same class throughout the day. Officer and teacher collaboration was an area of highlight. All sites referred to officer presence in the classroom; some suggested that having the same officer assigned to a teacher would help with the consistency of classroom rules and flow. School is mandatory for all youth in all detention centers. Staff at two sites mentioned that detention officers participate in education by aiding in instruction or acting as mentors. In addition, staff at most sites said they have strong support from their

local school administration and felt they had the necessary educational resources including textbooks, supplies, and furniture to provide education to youth. The challenges mentioned, however, were numerous. They included lack of clerical support and parent support, a high number of dropout students, high enrollment, a high percentage of ESE students, constant changes in education standards, and paperwork. Staff at two-thirds of the sites referred to the challenges of providing for ESE needs. Other challenges included the continuous flow of students (many youth stay less than 5 days), a lack of space, and the need for more detention staff. Staff at one site mentioned the importance of internet access for youth. The transport of youth to educational programs was said to be a safety issue at one of the larger sites.

The need for more staff was reported at every level and by every group of service providers. Shortages of medical, mental health, and security staff were repeatedly mentioned as barriers to providing crucial services. In no other area was the expressed need as consistent across sites and staff.

Summary

Detention facilities are required to provide medical and education services to youth in detention. All youth receive mental health assessments, including screening for suicide risk and substance abuse. Treatment services are meant to be provided as needed. Based on our survey, it appears that most youth participated in the education program, and many reported it to be a good program. About half of the youth reported needing medical care services while in detention. Though some sites were able to meet these needs, a few sites did not provide an adequate level of medical care services. Forty percent of youth that needed medical care reported not receiving services. Although many of the youth in detention reported emotional problems and high levels of drug use, there were very few who reported receiving counseling or substance

abuse treatment. Medical care staff, mental health staff, and several education staff reported the need for more staff to assist in the delivery of services. Most specifically, the need for 24-hour medical care was reported by medical staff, care and custody staff, as well as some administrative staff as a means of increasing the overall efficiency of resource use.

In order to prevent further tragedies related to medical care or crisis intervention, NCCD recommends that the state fund 24-hour medical staff. The state would do well to offer additional staff in medical care, education, and mental health departments to assist with paperwork, thus facilitating service delivery. This would also help to lower the high turnover rate of detention care workers.

Are there sufficient, well-tested alternatives to secure detention?

The only alternative to secure detention in Florida is home-detention, for which there is little funding. The current budget for secure detention is approximately \$182 million. Of that, \$2.2 million is used for home detention, although it is not an allocation and therefore subject to change (Florida Budget 2005-06). The following section is a review of the research about alternatives to detention and the potential impact of their implementation in Florida.

What does the Research Show?

There have been efforts around the country to establish more effective and efficient systems in juvenile detention. This includes implementation of community-based alternatives to secure detention. The Juvenile Detention Alternatives Initiative (JDAI), funded by the Annie E. Casey Foundation is an example of these efforts. The four objectives of the JDAI initiative were 1) to eliminate the inappropriate or unnecessary use of secure detention, 2) to minimize

the failures to appear and incidence of delinquent behavior, 3) to redirect public finances from building new facility capacity to responsible alternative strategies, and 4) to improve conditions in secure detention facilities (Bishop et al., 1999).

Jurisdictions that have produced impressive results include Broward County, FL (in the late 1980s), Cook County, IL, Multnomah County, OR, and Santa Cruz, CA. The NCCD national evaluation showed that detention admissions could be safely reduced and that detention crowding could be eliminated. These jurisdictions also demonstrated an impressive ability to improve the conditions of confinement for the youths remaining in secure detention and to reduce the disproportionate detention of minority children (Krisberg, Noya, Jones, and Wallen, 2001). The evaluation also showed that these detention reforms did not result in any measurable increase in juvenile crime or in failures to appear for court hearings (Krisberg and Lubow, in press).

Detention systems should contain a continuum of home-based care and community-based alternatives that offer various degrees of supervision and treatment services matched to the risks and needs of individual young people. Youth should be moved to more or less restrictive settings as a function of their behavior in the alternative setting. There should also be a structured decision making tool in place that guides the decisions for frequency of contact, intensity of supervision, and placement needs. The continuum should include home confinement or community supervision, day or evening reporting centers, and non-secure shelters that provide 24-hour supervision. Foster care and intensive case management can also be used in combination with these alternatives when appropriate to increase support or provide additional options. Other types of alternatives to detention that have been implemented and have shown positive results include employment and career programs, restorative justice models, and specialized probation. Like effective graduated sanctions programming, detention alternatives should be staffed by people who

can best relate to youth, be located in home communities, and consider the special needs of their clients.

Alternatives to Detention

Home Confinement/ Community Supervision

This alternative is primarily for youth who can remain either at home or with relatives. Staff typically provide supervision at random times, which occur initially with great frequency. Without notice, staff make contact face-to-face or by phone. It is common for youth to have set curfews and restricted movement outside of the home, which is limited to pre-approved locations such as school and work. Electronic monitoring can be used in conjunction with home confinement if there is a need for closer supervision.

Day or Evening Reporting Centers

Day or evening reporting centers provide a higher level of supervision than home confinement. These centers typically provide anywhere from six to twelve hours of supervision for youth who are either not in school or need closer monitoring. Centers may offer educational or recreational activities not otherwise available. They are a less restrictive alternative to secure detention while still maintaining needed supervision and structure to prevent youth from having too much idle time. Evening reporting centers serve to ensure that youth are supervised during the most critical after-school and evening hours. It is common for youth to report for a minimum of thirty days. This alternative can also be used with electronic monitoring if necessary.

Non-Secure Shelters

Non-secure shelters, also known as non-secure detention or staff-secure placement, are a viable option for youth that need constant and continuous supervision or for youth who lack appropriate housing. Youth are monitored 24 hours a day, seven days a week, and there is typically a low staff-to-youth ratio

to ensure close supervision and safety. Shelters can offer educational and recreational programming and other age-appropriate activities and services. Shelters are generally used on a short-term basis, where the length of stay would not exceed 30 days.

Outreach and Tracking Programs

Outreach and tracking programs provide intensive face-to-face contact with youth in their schools, homes, and communities as an alternative to placement in an institutional setting. This program targets youth who have a wide range of emotional problems or destructive behavior. The level of intensity ranges from two to five or more times a day, seven days a week. Counselors provide structured support and supervision, counseling, and advocacy and are available for crisis intervention 24 hours a day.

Potential Impact of Implementing Alternatives to Secure Detention

Table 4
Estimated Cost Savings

CURRENT STATEWIDE NUMBERS FY 2002-2003	Number	Cost per bed day	ALOS	Est. cost per day	Est. cost per ALOS
Secure Detention Previous Cost (status quo)	52,216	\$158.90	13	\$8,297,122	\$107,862,591
32% Eligible Alternate-Intensive Outreach/Tracking (3x/day)	16,709	\$40.00	13	\$668,365	\$8,688,742
Remainder Stay in Secure Detention	35,507	\$158.90	13	\$5,642,043	\$73,346,562
Total New Cost				\$6,310,408	\$82,035,304
Total Savings				\$1,986,714	\$25,827,287

Source: Numbers are adapted from Long-Range Program Plan, Florida DJJ, 2003; Pre and Post Dispositional Analysis Projection, Florida DJJ, 2004g; and Cost estimate from Southwest Key Program, 2005.

Definitions:

Number: based on the number of admissions to secure detention in FY 2002-2003

Cost per bed day: daily cost to provide services to one youth

ALOS: statewide average length of stay (13 days) in a short-term detention program—includes both youth awaiting court and youth awaiting placement in residential commitment programs

Est. cost per day: number of admissions multiplied by the cost per day

Est. cost per ALOS: estimated cost per day multiplied by the average length of stay (13 days)

Table 3
Estimated Cost Savings

CURRENT STATEWIDE NUMBERS FY 2002-2003	Number	Cost per bed day	ALOS	Est. cost per bed day	Est. cost per ALOS
Secure Detention Previous Cost (status quo)	52,216	\$158.90	13	\$8,297,122	\$107,862,591
32% Eligible Alternate Low-risk residential setting	16,709	\$65.80	13	\$1,099,460	\$14,292,981
Remainder Stay in Secure Detention	35,507	\$158.90	13	\$5,642,043	\$73,346,562
Total New Cost				\$6,741,503	\$87,639,543
Total Savings				\$1,555,619	\$20,223,048

Source: Numbers are adapted from Bureau of Quality Assurance Annual Report, Florida DJJ, 2004b; Long-Range Program Plan, Florida DJJ, 2003; and Pre and Post Dispositional Analysis Projection, Florida DJJ, 2004g.

Florida should consider implementation of alternatives to secure detention. The population of youth that is most appropriate for diversion from secure detention are probation violators and low-level offenders (trespassing, vandalism, drug possession or use, public order offenses/non-DUI or weapons such as disorderly conduct, traffic offenses, and status offenders, including runaways, truants, and underage drinkers.) NCCD has estimated that approximately 40% of youth in secure detention fit this definition (See Table 2, page 14).

OPPAGA has already estimated that the state could save \$1.7 million if youth who violated probation were sent to a Redirection Program that provided community-based treatment instead of secure detention/incarceration (OPPAGA, 2003).

Table 5
Estimated Cost Savings

CURRENT STATEWIDE NUMBERS FY 2002-2003	Number	Cost per bed day	ALOS	Est. cost per day	Est. cost per ALOS
Secure Detention Previous Cost (status quo)	52,216	\$158.90	13	\$8,297,122	\$107,862,591
32% Eligible	16,709				
1/2 Alternate Low-risk residential setting	8,355	\$65.80	13	\$549,730	\$7,146,491
1/2 Alternate Intensive Outreach /Tracking (3x/day)	8,354	\$40.00	13	\$334,160	\$4,344,080
Remainder Stay in Secure Detention	35,507	\$158.90	13	\$5,642,062	\$73,346,810
Total New Cost				\$6,525,952	\$84,837,381
Total Savings				\$1,771,170	\$23,025,211

majority of time in secure detention is pre-disposition service days (567,225 bed days compared with 121,225 bed days for post-disposition), diversion into an alternative for those who are eligible should occur at initial assessment (Florida DJJ, 2004g). Table 3 estimates a savings of \$20 million/year based on a 13-day average length of stay or \$1.5 million per day for diversion into a DJJ low-risk residential setting. Table 4 shows that even more savings could be realized if a community-based component (such as intensive outreach and tracking) were used as an alternative for the 32% of youth who may be eligible.

NCCD further proposes that for each day that 32% of detained youth were placed in alternative low-risk residential settings or intensive outreach/tracking programs, the state could save \$1.5 to \$2 million over the course of the year. The following two scenarios illustrate this information:

The tables above are a simulated cost-savings analysis based on DJJ admission numbers to secure detention in FY 2002-2003. We do not assume that all youth who are detained for technical violations and other non-violent offenses can be safely diverted, but rather calculate that 80% of the technical violators and 80% of the “others” (n=16,709) may be eligible. We estimate that approximately 32% of youth who are in secure detention can be placed in an alternative setting. The 32% eligibility is based on the percentage of youth detained in Florida for technical violations and other¹² non-violent offenses as reported in OJJDP’s detailed offense profile one-day count census in FY 2001 (Sickmund, Sladky, and Kang, 2004). Because the

Contracted staff would provide face-to-face contact with youth three times a day, seven days a week, as well as provide 24-hour crisis intervention. Almost \$2 million could be saved for each day that 32% of detained youth were placed in an outreach and tracking program. Based on the 13-day average length of stay¹³, as much as \$25 million could be saved each year by placing these youth in alternatives.

Table 5 is a combination of the two proposed alternatives to secure detention. If Florida were to pilot diverting 40% of the probation violators and other non-violent offenders into a low-risk residential program, and another 40% of the probation violators and other non-violent offenders into an intensive outreach/tracking program, the potential cost savings could be \$1.7 million per day or \$23 million per year for these identified youth. These savings could be reinvested into treatment programs for those youth who remain in secure detention and used to improve services at DJJ residential programs.

¹² The “other” category includes: other property offenses (vandalism, trespassing, selling stolen property, possession of burglar’s tools, fraud); other drug related offenses/non-trafficking (possession or use, visiting a place where drugs are found); other public order offenses/non-DUI or weapons (obstruction of justice, non-violent sex offenses, cruelty to animals, disorderly conduct, traffic offenses); and status offenses (incorrigible, running away, truancy, underage drinking.)

¹³ NCCD was not able to get detention/release rate information by offense (including ALOS) from DJJ; the total cost savings is predicted by DJJ’s published ALOS, which includes youth awaiting court and youth awaiting placement. The daily cost savings is only applied to the estimated number of youth who would be eligible, not youth awaiting placement into a high-level residential program.

Policy Considerations and Recommendations

In response to tragic events, the Florida House of Representatives formed a Select Committee on Juvenile Detention Facilities to investigate the conditions in the state's facilities. The new DJJ Secretary Anthony Schembri has made clear his commitment to ending failed policies and practices and reforming the DJJ detention facilities; he has made significant changes in management and staffing to that end. The Florida Children's Campaign has mobilized its supporters to push for meaningful, badly needed reforms. Now is the time for Florida to substantially reform its juvenile detention programs.

With generous funding from the Jessie Ball duPont Fund and the complete cooperation of legislative and DJJ leadership, NCCD completed this comprehensive study of detention in Florida. The findings point to an agenda for reform in the immediate future as follows:

1. **Revise Florida's Detention Risk Assessment Instrument**—the system used to make detention decisions has been in place for some time and has reduced the detention populations to a degree; however, NCCD's data analyses suggest that more could be achieved with improved screening. First, DJJ needs to revalidate the screening tool to determine if it is still does a good job of classifying youths who are at high risk of not appearing in court, or of committing further offenses while awaiting their final case dispositions. Second, the instrument should be refined to not merely sort youths into the categories of "detain or release," but also to identify who could be safely managed in less secure settings. This would permit DJJ to effectively assign youths to a range of alternatives to detention.

2. **Expand the range of detention alternatives.** Florida operates a very limited range of alternatives to secure detention, and funding for these has been reduced in recent years. DJJ and the legislature need to develop and fund a full range of alternatives that are evidence based and are cost effective. DJJ

staff, judges, and law enforcement must be trained in the public safety and fiscal benefits of appropriate alternatives.

3. **Conduct the youth survey in every DJJ facility at least annually.** Conditions in some Florida detention facilities are unacceptable and possibly expose the state to litigation. The NCCD survey measured youth perceptions of the quality of services and the care that they were receiving. It revealed potential problems as perceived by the residents of these facilities. In most instances our interviews with staff confirmed that there were problems areas. The survey responses also indicated significant differences in the quality of care by gender and by ethnicity. Based on these survey results, DJJ could identify areas of potential concern and develop remedy plans, averting potential problems and instituting solutions, improving quality assurance and structuring improved staff training.

4. **DJJ should consider an alliance with the Juvenile Detention Alternatives Initiative (JDAI),** led by the Annie E. Casey Foundation. The JDAI has developed proven methods and excellent resource materials on various aspects of detention reform. The Casey Foundation has a national network of experts who can assist states and communities to form local collaboratives as a means of improving detention policies and practices. JDAI has helped dozens of communities across the nation to implement proven alternatives to secure detention, enhance screening systems, and improve the quality of care for those youths who must be confined in secure settings. The JDAI approach emphasizes detention programming that is sensitive to cultural diversity and are gender responsive. These are all areas that surfaced in the current NCCD study of DJJ detention programs. Moreover, the involvement of major national philanthropic groups could help leverage funding from Florida foundations to accomplish needed reforms.

Appendix

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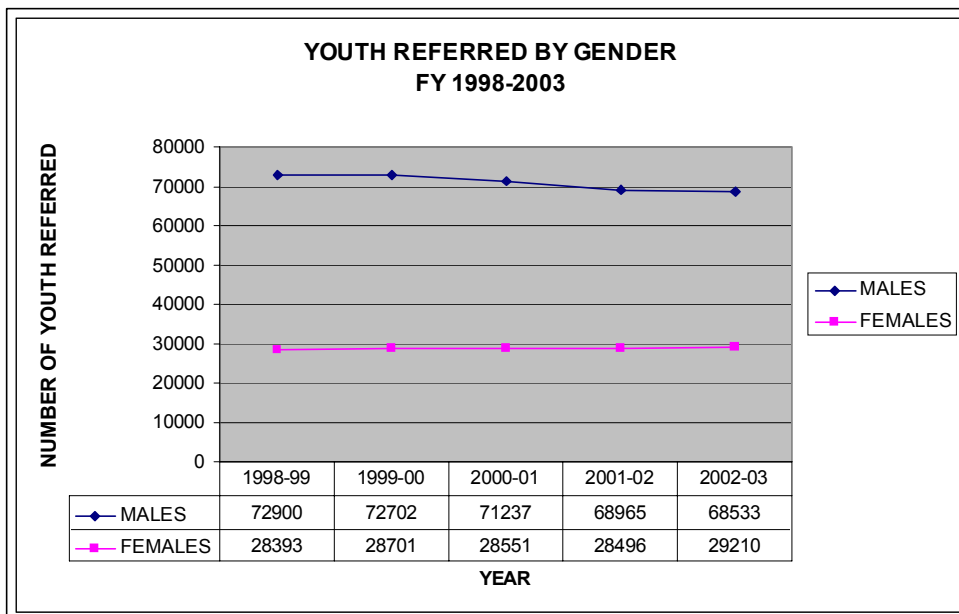
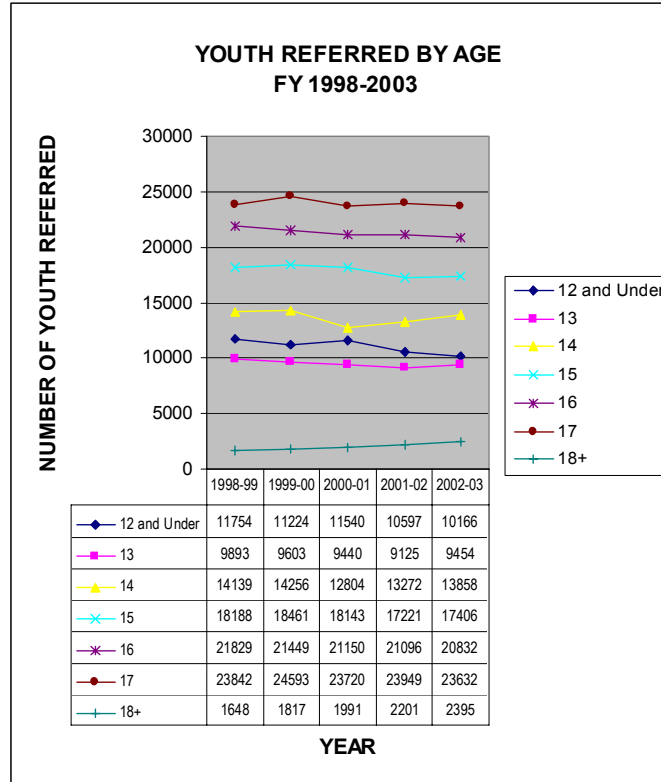
Florida Juvenile Detention Centers, FY 2002-2003

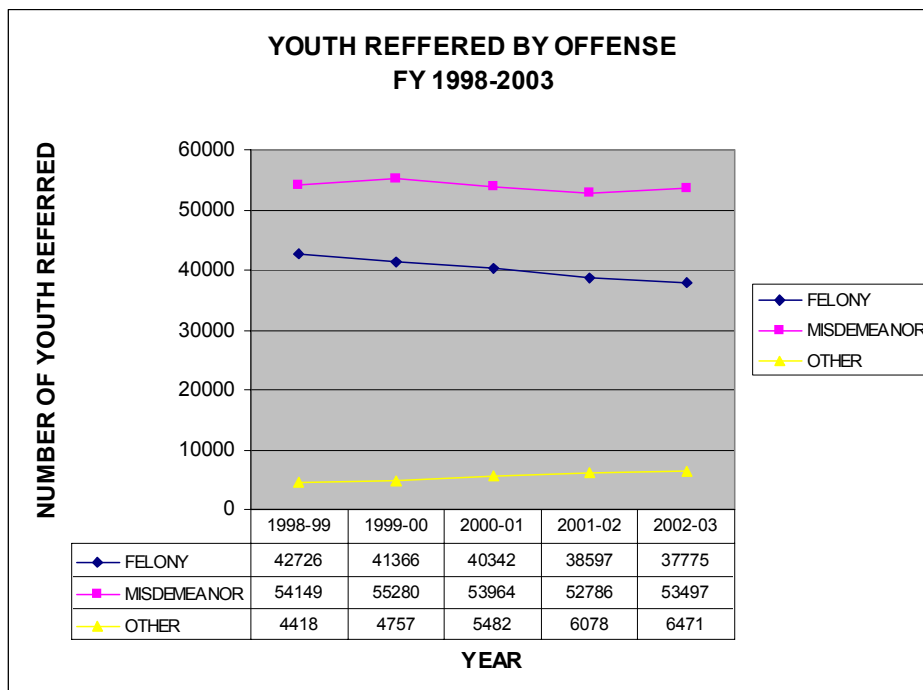
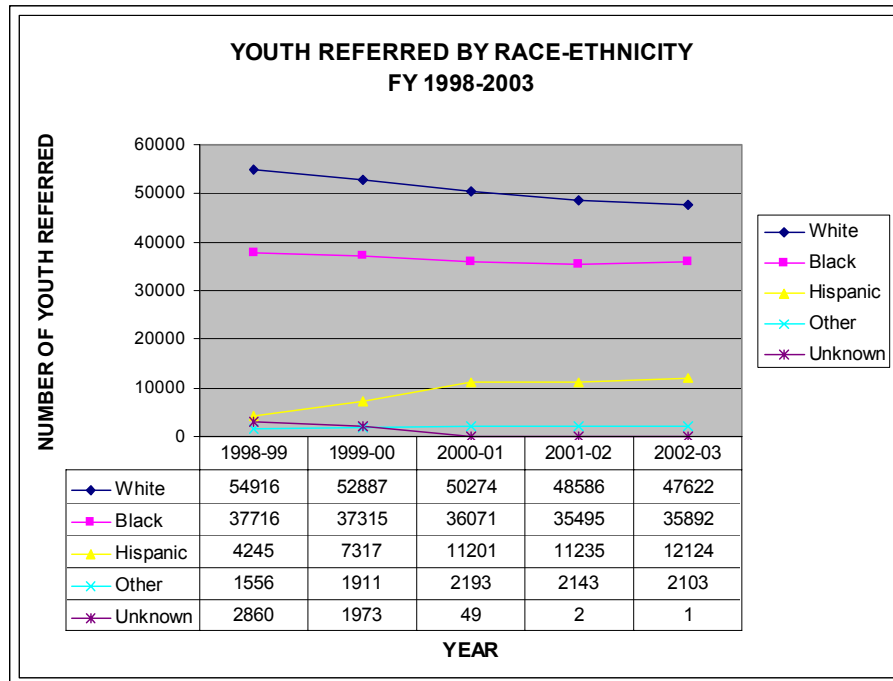
Detention Center	Counties Served	DJJ Region	Operating Capacity (# of beds)	Utilization	Admissions (Male)	ALOS (Male) (03-04)	Admissions (Female)	ALOS (Female) (03-04)
Alachua	Alachua, Baker, Bradford, Columbia, Dixie, Gilchrist, Hamilton, Lafayette, Levy, Putnam, Suwannee, Union	North	72	88%	1,375	11	337	9
Bay	Bay, Calhoun, Gulf, Holmes, Jackson, Washington	North	52	89%	685	16	210	12
Brevard	Brevard	Central	52	84%	988	13	352	13
Broward	Broward	South	109	116%	3,473	10	783	8
Collier	Collier	South	50	66%	535	11	196	10
Dade	Dade, Monroe*	South	226	115%	4,752	14	1,288	10
Duval	Duval, Clay, Nassau	North	144	70%	2,553	11	742	6
Escambia	Escambia, Santa Rosa	North	50	115%	1,373	10	554	11
Hillsborough E	Hillsborough	Central	50	104%	1,170	9	260	9
Hillsborough W	Hillsborough	Central	93	92%	1,897	13	507	10
Leon	Leon, Gadsden, Jefferson, Franklin, Liberty, Madison, Taylor, Wakulla	North	56	110%	769	19	256	17
Manatee	Manatee, Sarasota, DeSoto	Central	72	102%	1,281	13	430	10
Marion	Marion, Citrus, Hernando, Lake, Sumter	North	88	119%	1,593	15	462	13
Okaloosa	Okaloosa, Walton	North	50	84%	699	13	226	15
Orange	Orange	Central	151	102%	3,700	10	1,075	8
Osceola	Osceola	Central	50	59%	493	13	140	9
Palm Beach	Palm Beach	South	93	98%	1,923	11	614	10
Pasco	Pasco	Central	57	91%	851	12	245	10
Pinellas	Pinellas	Central	120	99%	2,600	13	742	10
Polk	Polk, Hardee, Highlands	Central	90	105%	1,718	13	528	11
Seminole	Seminole	Central	39	85%	888	11	223	9
St. Johns	St. Johns	North	50	66%	527	12	139	11
St. Lucie	St. Lucie, Indian River, Martin, Okeechobee	South	78	77%	1,385	11	476	8
Southwest FL	Lee, Hendry, Glades, Charlotte	South	60	118%	1,611	10	477	7
Volusia	Volusia, Flagler	North	90	82%	1,533	11	547	11
Statewide Total			2,042	96%	40,372		Total 11,809	

* The recently opened Monroe Regional Juvenile Detention Center now serves Monroe County.

Trend Charts

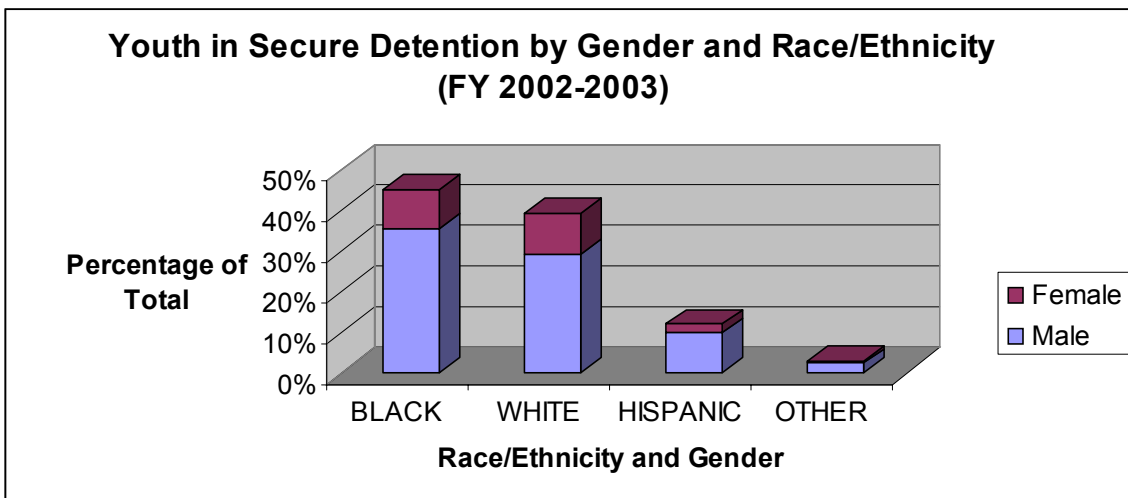
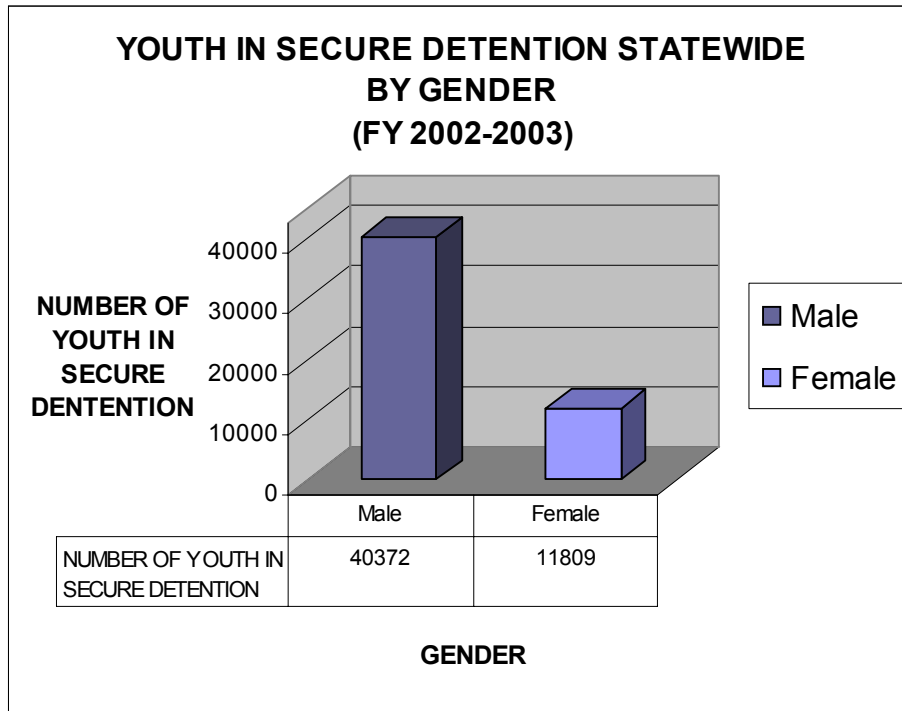
Characteristics of Referred (Arrested) Youth





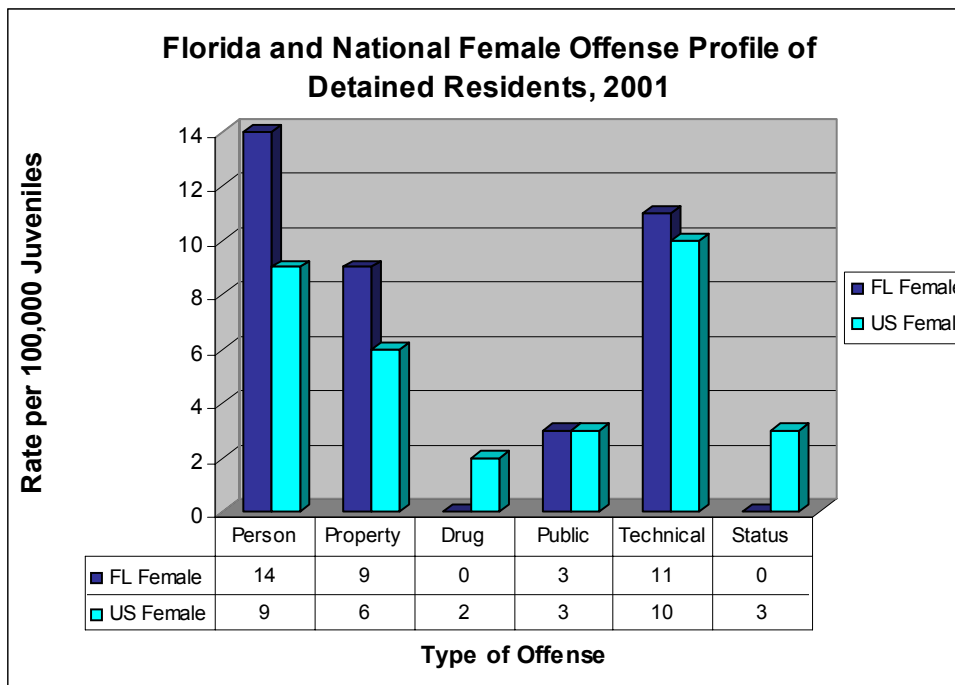
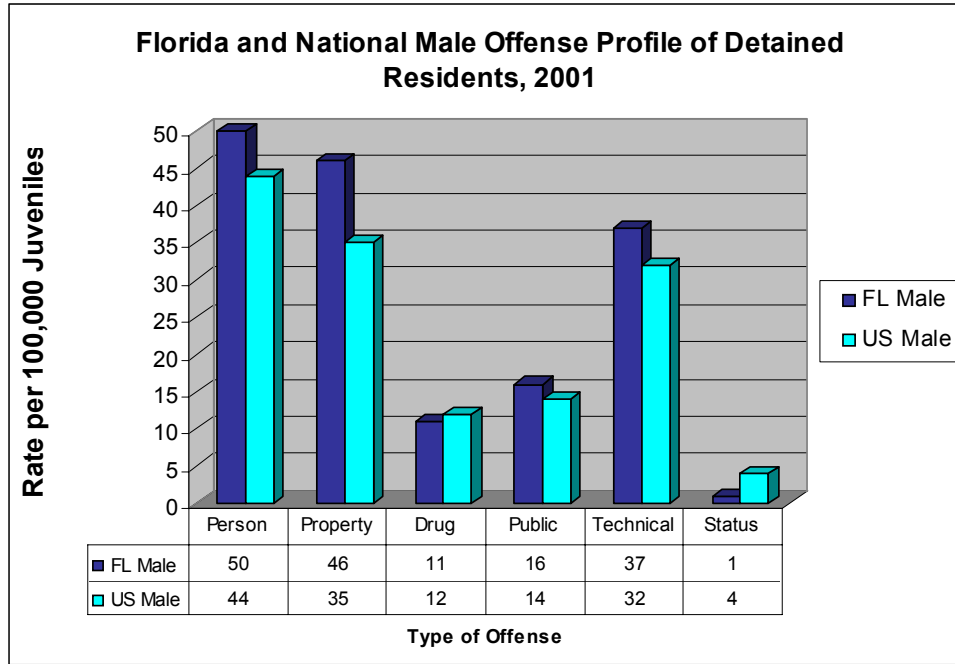
Source: Referral Charts adapted from Department of Juvenile Justice Bureau of Data and Research (2004). A Profile of Florida Delinquency FY 1998/99- FY 2002/03. Available online at http://www.djj.state.fl.us/Research/statsnresearch/0003prof/profile_02-03.html

Characteristics of Youth in Secure Detention



Source: Adapted from DJJ 2004 Outcome Evaluation Report. Available online at: http://www.djj.state.fl.us/Research/statsnresearch/mr/2004_mr/2004_oe_report/2004_oe_report_detention.pdf

Snapshot Data: Florida v. National



Source: Census of Juveniles in Residential Placement, Sickmund, Sladky, and Kang, 2004.

National and Florida State Detention Center Standards Comparison Table

	NATIONAL STANDARDS	STATE STANDARDS
MEDICAL		
<ul style="list-style-type: none"> Health Screening 	Screening mechanism for: <ul style="list-style-type: none"> Communicable diseases and STDs, pregnancy, current illness and/or health problems, alcohol or drug intoxication and/or problems, medication needs, vision, teeth, and hearing checked for youth staying long term and observe behaviors and skin conditions 	Screening mechanism for: <ul style="list-style-type: none"> Tuberculosis, pregnancy, head Injuries (in the last two weeks), diabetes, seizure disorder, cardiac disorders, asthma, hemophilia
<ul style="list-style-type: none"> Health Care 	Provisions for: <ul style="list-style-type: none"> Full-time doctor Regular sick call Administering prescription medication Responding to medical and dental emergencies Notifying parents of medical issues Addressing ongoing medical needs HIV/ AIDS Staff Training 	Provisions for: <ul style="list-style-type: none"> Designated Health Authority responsible for oversight Sick Call (frequency depends on bed number) Proper receipt, storage, access, inventory, administration monitoring and disposal of medication Parent notification of significant changes Immunizations and gynecological services as needed Proper record keeping and permits Communicable disease control and HIV/ AIDS guidelines Medical and mental health alert and emergency care
MENTAL HEALTH		
<ul style="list-style-type: none"> Psychological Care 	Services include: <ul style="list-style-type: none"> Psychological screening upon intake Access to psychological services 24 hours a day Staff training for using forms Programming includes ways for youth to talk about their problems Treatment plans and ongoing services for youth staying long term That staff dispensing medication be properly trained and keep records that include youth's name, name of medication, amount of dosage and frequency of administration 	Services include: <ul style="list-style-type: none"> Designated Mental Health Authority responsible for oversight Initial and comprehensive service plans Suicide prevention plans and suicide risk screening and assessment Crisis intervention and emergency response plans Mental health and substance abuse services Precautionary observation and secure observation

EDUCATION		
<ul style="list-style-type: none"> • Education Instruction 	<p>Education Program:</p> <ul style="list-style-type: none"> - Most crucial service that is provided - Service should begin after detention hearing (usually 3 days) - 5 hours of instruction daily by Sufficient number of qualified teachers - Appropriate learning environment - Provisions for student to participate in learning activities when sent to their rooms <p>Special Education:</p> <ul style="list-style-type: none"> - Screen and identify students with special needs - Contact previous school for testing results or conduct testing when necessary - Provide special education services - Instructors are certified in special education - Staff cooperate with special education needs 	<p>Transition Services</p> <p>Assessment and planning</p> <p>Curriculum and Instruction</p> <p>ESE and related services</p> <p>Educational Personnel Qualifications and Personnel Development</p> <p>Learning Environment and Resources</p> <p>School District Monitoring, Accountability and Evaluation</p>
LIVING CONDITIONS		
<ul style="list-style-type: none"> • Access Issues 	<p>Visitation:</p> <ul style="list-style-type: none"> - Scheduled at least twice weekly - Arrangements made for special visits - Visits can be denied with due cause <p>Telephone:</p> <ul style="list-style-type: none"> - During admission, youth is allowed two calls - Two calls per week (not taken away for violation of rules) to appropriate people - Calls can be denied with concrete evidence of a safety issue <p>Mail:</p> <ul style="list-style-type: none"> - Writing materials and stamps are provided - Mail divided into privileged and non-privileged - Privileged (legal) mail is not opened except to check for contraband - Non-privileged mail may be inspected but only read when there is concrete evidence that indicates the necessity - Mail inspections should be done with youth present to observe 	<p>Visitation:</p> <ul style="list-style-type: none"> - Scheduled a minimum of one day per week - Rules provided re: hours, areas and requirements (id etc.) - Visits are terminated following procedure with due cause - Unlimited visits by legal representatives <p>Telephone:</p> <ul style="list-style-type: none"> - Hours, procedures, privileges and restrictions are clear - Rules that prevent calling crime victim - Allowed 15 minutes of phone time per week - Minimum of one collect call to parents per week <p>Mail:</p> <ul style="list-style-type: none"> - Materials and postage for two letters a week minimum - Mail is screened and checked for contraband and threats - Privileged mail not screened for written content - Outgoing envelopes are reviewed - Rules against contact of crime victim - No restrictions for legal correspondence

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