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Annual Report 2020-2022: Evidence-based Nebraska Pre-and-Post Assessment Tool

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EVIDENCE-BASED NEBRASKA

ANNUAL REPORT 2020-2022

Evidence-based Nebraska Pre-and-post Assessment Tool



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2020-2022 Annual Report

Evidence-based Nebraska Pre-and-post Assessment Tool

August 2022

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Authors' Note: Erin Wasserburger served as the Program Specialist for the Juvenile Justice Institute until June 2022; she has since taken a position as Grant Administrator with the Nebraska Crime Commission. She is listed as an author according to her contributions on the report during the time she was with JJI.

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Executive Summary

This annual report is an evaluation of the effectiveness of Mental Health, Mentoring, Promotion/Prevention, School-based Interventions, and Afterschool programs funded by Community-based Aid (CBA). The program type analysis includes referrals to programs from July 1, 2020 – February 28, 2022, reported by programs to the Juvenile Case Management System (JCMS). This evaluation also includes data collected with the EB-NE Pre-and-post Assessment Tool co-created with Dr. Karina Blair at Boys Town Research Hospital.

Evaluation of programs is broken down by program type and includes demographic characteristics and outcomes for youth in each of the five program types included in this report. Overall, from July 1, 2020, through February 28, 2022, programs entered 4,740 cases into the JCMS for Afterschool, School Interventionist, Mental Health, Mentoring, and Promotion/Prevention programs. Statewide, the youth served by these programs for the report period were:

- On average 13 years old
- 34.2% White, 65.8% Non-White
- 51.4% male
- 33.2% of cases successfully closed, 10.3% unsuccessfully closed, 56.5% of case closure status missing (Note: Missing data on case closures may be related to open cases. Cases may also be left open and not discharged because the youth may still be enrolled in the program even if they are not receiving CBA.)

One of the unknown aspects of delinquency intervention programs is whether they are serving the correct population (Kotlaja, Unpublished Manuscript). Delinquency prevention and promotion (PP) programs generally aim to reduce the likelihood of system involvement by addressing risk factors and enhancing protective factors thought to be related to antisocial behavior (Pardini, 2016). Despite the importance, most programs assume they are serving the right population, and few programs actually track whether they are serving the correct population.

For youth in each program, analysis of the pre- and post-assessment tool data are included. Using a number of well-established assessment tools from the literature, we were able to analyze what types of problems youth identify at intake. The assessment tool measures impairments in emotional and behavioral functioning (SDQ), emotional callousness/ unemotionality (ICU), Substance Use (SU), and trauma levels (BTSSY). When individual youth completed post assessments, we were also able to analyze whether program types are effectuating change in those specific problem areas. Complete findings and tables are included in Appendix 2 and individual program findings when available are included in Appendix 3. The main findings from these analyses reveal that:

- Analysis of problems youth identify with at intake suggest that youth in the Mental Health programs showed greater mental health issues (emotional problems, hyperactivity, and symptoms associated with trauma exposure) than youth in the other programs. Participation in the Mental Health programs was associated with significant declines in all three forms of symptoms.
- When considering change in specific problem areas, our analyses suggest that youth in the Interventionist and Mentoring programs showed marked benefit with respect to their reported reduced substance use (intake to follow-up).

As an additional measure of program effectiveness, future system involvement was calculated for youth who were discharged from a program with a discharge date. Future system involvement (FSI) among youth discharged from these JCMS programs overall was low. Statewide percentages for FSI were 1.1% for new status offense court filings, 4% for new law violations, 3.9% youth adjudicated and placed on probation, and 2.3% youth detained in year following program discharge.

Finally, JJI was asked to provide an assessment of overall program effectiveness for each program included in this report. This was possible for this report given that programs reported data to the JCMS, collected data with the EB-NE Pre-and-post Assessment Tool, and FSI could be assessed for youth discharged from programs. Program assessment involved examining the overall percentage of data programs had submitted to the JCMS, outcome improvement, assessment tool findings, and FSI. To be deemed effective, programs must enter data into the JCMS, they must show improvement in program-specific outcomes, and report assessment tool data suggesting some degree of improvement. Finally, youth who participated must have low rates of future system involvement.

Prior research on future system involvement of juveniles is limited. National recidivism rates for juveniles are not available and research on juvenile recidivism at the state level on populations of youth returned to communities following residential placement found that 55% of youth were rearrested within a year of release, reincarceration and reconfinement rates average 24% (OJJDP, 2020). Research in Nebraska on youth successfully discharged from probation suggests that 25.9% of youth met the definition of recidivism within one year (Wiener, 2018). These figures refer to measures of future system involvement among justice involved youth who were previously detained or on probation and therefore may indicate that these youth are at a higher risk for reoffense compared to the population of youth served in funded programs in Nebraska. As such, JJI was conservative in defining rates of FSI used to assess overall program effectiveness, the following benchmarks were applied. Low FSI indicates that fewer than 10% of youth had a new status offense court filing, law violation, were placed on probation, or were sent to a detention facility in the year following program discharge. Moderate FSI indicates that between 10 and 30% of youth had a new status offense court filing, law violation, were placed on probation, or were sent to a detention facility in the year following program discharge. High FSI indicates that over 30% of youth had a new status offense court filing, law violation, were placed on probation, or were sent to a detention facility in the year following program discharge.

JJI classified programs as either effective, promising, or inconclusive. For programs to be deemed overall "effective" the following criteria must be met: 1) reporting more than 80% of the data on closed cases, 2) improvement or mixed findings for outcomes and assessment tool variables, and 3) low future system involvement. Programs deemed "promising" met the following criteria: 1) reported between 60-80% of data on closed cases, 2) improvement or mixed findings for outcomes and mixed, missing, or inconclusive assessment tool variables, and 3) low future system involvement. Programs categorized as "inconclusive" met the following criteria: 1) reported less than 60% of data on closed cases, 2) improvement, mixed, missing, or inconclusive findings for outcomes and assessment tool variables, and 3) low to high future system involvement. It is important to note that higher amounts of missing data on case closure may be related to youth who are still enrolled in the program or open cases resulting from a program no longer being funded.

Community-based Juvenile Services Aid Program and the JCMS

The state of Nebraska established a fund entitled the Community-based Juvenile Services Aid Program (CBA), to support local programs and services for juveniles (Neb. Rev. Stat. § 43-2404.02). The purpose of the Community-based Aid Program is to assist counties and tribes with "the establishment and provision of community-based services for juveniles who come in contact with the juvenile justice system" consistent with the Juvenile Services Act (Neb. Rev. Stat. § 43-2404.02(1)). The Juvenile Services Act encourages the provision of appropriate preventive, diversionary, alternatives for juveniles, as well as better coordination of the juvenile services system (Neb. Rev. Stat. § 43-2403).

Programs funded through Community-based Aid are required to report data to the Nebraska Commission on Law Enforcement and Criminal Justice (Nebraska Crime Commission) (Neb. Rev. Stat. § 43-2404.02(4)(a)). Programs meet their reporting requirements, while measuring whether the program is reaching goals, when programs enter youth information into the Juvenile Case Management System (JCMS). The JCMS is a secure, web-based tool that serves "as a primary data collection site for any intervention funded by the Community-based Juvenile Services Aid Program designed to serve juveniles and deter involvement in the formal juvenile justice system" (Neb. Rev. Stat. §43-2404.02(2)(b)). More importantly, as a statewide system, programs are held to a uniform standard of reporting and utilize common definitions.

History of the Evidence-Based Nebraska Assessment Tool

In July of 2019, the Juvenile Justice Institute (JJI) staff met with Dr. Karina Blair, the Director of the Program for Trauma and Anxiety in Children (PTAC) at the Center for Neurobehavioral Research with Boys Town Research Hospital to discuss using some of the same measures Boys Town is using in their research on youth who have experienced trauma. Specifically, the JJI was looking for a way to measure change in thoughts and attitudes before program enrollment and after being enrolled in a CBA program rather than relying solely on future system involvement as a measure of success. The idea was to pilot this tool on mentoring programs, and then expand to other program types if the pilot was successful.

In September of 2019, Dr. Blair provided JJI staff with an assessment tool comprised of four validated tools: Strengths and Difficulties Questionnaire (SDQ), Substance Use screener, Brief Trauma Symptom Screen for Youth (BTTSY), and Inventory for Callous and Unemotional Traits (ICU). These four tools were presented to the mentoring programs receiving funding in September 2019, and a meeting was held with five of the nine funded programs to discuss the tools and the intention behind the project. The four programs who were not able to attend were emailed a recording of the meeting and all the materials to review. Overall, the programs were receptive of this project as they felt it would help show

the success in their programs. It was suggested to add Strength of Relationship scales to the follow-up form for both the mentors and mentees to complete. Dr. Lindsey Wylie, the Director of Research at the JJI during this process, also created a brief assessment based on the expected outcomes of a mentoring program (e.g., positive relationship with an adult, trust in adults) to include.

The tool was released to mentoring programs receiving CBA funding on November 4, 2019, to begin using in their upcoming referrals and intakes. Initially, these were only available in a paper form, and program staff were instructed to let the youth complete the assessments on their own (if possible). Regarding completed tools, program staff were asked to either upload them into a secure file maintained by the JJI, scan and email to JJI staff, arrange pick up or drop off by JJI and program staff, or mail to JJI staff.

During the pilot, few intake tools were completed. The school-based mentoring programs informed JJI staff that the majority of new referrals happens at the beginning of the school year, which was missed by the pilot start date by a few months. At the end of March 2020, there were 21 intake and 17 follow up assessments completed and returned to the JJI. It was decided during February and March of 2020 that the tool should be modified and given to four other program types: mental health, promotion/prevention, after school, and school-based interventionists. As schools and programs shut down and modified how they were serving youth mid-March 2020 in response to the COVID-19 pandemic, the training and roll-out to the new program types was put on hold until August 4, 2020. In the interim, the tools were created in an online format so that mentoring programs working remotely to serve youth could still administer the tool. Promotion/prevention programs also have youth complete a modified risk and protective factors survey, and the two tools were combined for these programs to administer intake.

In November of 2020, Dr. Blair did a preliminary analysis of data obtained up to that point.

For this evaluation, we included any tools submitted before March 1, 2022. Fifty-eight programs submitted at least one intake in that time frame; 40 programs submitted at least one follow up tool. Of the 19 programs that submitted intakes but not follow up tools, 11 had funding changes before they were able to administer the follow up tools, four programs indicate miscommunication with service providers and/or staff changes led to missing follow ups, two programs had issues with the site not administering the tool during the pandemic and then not allowing the tool to be administered during the school year (this has been resolved), one program didn't receive funding/take new referrals until later in the project and has not had enough time pass to submit follow up tools, and one program indicated that youth leave before they are able to be given the follow up (and with little advance notice).

Program Type Analysis

Afterschool Programs

After school programs provide activities after school and during the summer to give youth a place to be engaged in constructive activity with the hopes of reducing juvenile crime. This can include tutoring services or other educational support for youth, but also offer supervised time when violent juvenile crime is highest after school hours when parental supervision is limited (U.S. DOJ. OJJDP Statistical Briefing Book).



Demographic Data

Community-based Aid currently funds one afterschool program in Nebraska which is in bold in Table 1. Other afterschool programs included in Table 1 are no longer funded but submitted data during the observation period.

Table 1. Afterschool programs FY 20/21 – FY 21/22

Progran	า	Youth Served			Case Closures ¹		
Name (N)	County/ Tribe	Age (M)	White (%)	Male (%)	Successful (%)	Neutral (%)	Missing (%)
Zone Homework $(n = 71)$	Adams	11.7	64.8	54.9	2.8	-	97.2
FYI Center CASTLE Program (n = 8)	Jefferson	13.5	87.5	12.5	-	-	100
Lighthouse (n = 36)	Lancaster	14	25	58.3	94.4	-	5.6
Great Futures Initiative (n = 360)	Lancaster	13.3	39.7	50.6	-	3.6	96.4
Tutoring Services (n = 41)	Madison	15.3	43.9	65.9	21.9	65.9	12.2
All Afterschool Programs $(n = 516)$	State of Nebraska	13.3	43.2	52.3	8.7	7.8	83.5

Afterschool programs funded from FY20/21 to FY21/22 reported a total of 516 cases in the JCMS statewide. Just over half of youth (52.3%) were male, 43.2% were White, and they had an average age of 13.3 years old. Regarding race, two programs served primarily White youth while three programs served mostly minority populations. When examining program demographics for gender, most programs report serving primarily male youth and one reports serving primarily female youth.

¹ Successful case closures are a combined rate of cases coded as "Other (moved away/death/etc.)," "Transferred Schools," "Graduated," and "Other Commitments." Neutral case closures include cases where youth "Stopped Attending."

Case closures statewide included a large percentage (83.5%) of missing data, making statewide comparisons of successful and neutral closures difficult. Lighthouse reported that nearly all cases were successfully discharged (94.4%). Tutoring Services data suggests that most cases (65.9%) were neutral closures (coded as "stopped attending"), compared to 21.9% successful closures. This program also reported the highest average age for youth in the program, which may indicate that the population of youth they serve is higher risk.

Assessment Tool Findings

At intake, youth in Afterschool programs (n=85 intake and n=31 intake and discharge) reported lower levels of conduct problems compared to youth in mental health programs, lower levels of lifetime cannabis problems compared to youth from interventionist programs, and lower levels of three-month cannabis use relative to youth from interventionist, mental health, and mentoring programs. When examining change from intake to discharge, there were significant reductions in in callous and unemotional traits (ICU) for youth in Afterschool programs. There were no other significant changes from intake to discharge for youth from Afterschool programs, likely due to small sample size.

Individual program analyses suggest little impact on the indices measures except that there was a decline in ICU (callous and emotional traits) scores (p=0.06) – irrespective of program. Assessment tool data for afterschool programs are included in Appendix 3.

Outcome Measures

Program Effectiveness: School-related Outcome Measures

School-related outcome measures of program effectiveness assess changes in attendance, grades, and engagement with school. To assess outcomes at discharge for this variable, we require at least 80% of data at intake and discharge to be included in the JCMS. Regarding the outcomes of interest, one program, Tutoring Services, reported sufficient data to examine change before and after programming.

Outcome 1: Improve Attendance. These variables measure how often a youth misses school at intake and discharge. Analyses found that a smaller percentage of youth from Madison County's Tutoring Services program reported frequent or sometimes missing school following programming. However, the percentage of youth reporting that they never or rarely miss school decreased from intake to discharge, which may be a result of a greater percentage of missing data on this variable at discharge.

Analyses that statistically measure change from pre-enrollment to post-enrollment indicated that:

• The Tutoring Services Afterschool program does not appear to be making an impact on school attendance. There was not a statistically significant improvement on missing school from intake to discharge for youth in this program (Wilcoxon z = .647, p = .518, n = 36); specifically, 3 students improved, 3 students declined, and 30 students remained the same.

Table 2a. School-related Outcomes: Misses School at Intake

Name	County/Tribe	Freq or Sometimes	Never or Rarely	Unknown	Missing
Zone Homework	Adams	7%	91.6%	1.4%	0%
FYI Center CASTLE Program	Jefferson	100%	0%	0%	0%
Lighthouse	Lancaster	0%	0%	97.2%	2.8%
Great Futures Initiative	Lancaster	0%	0%	0%	100%
Tutoring Services	Madison	46.3%	53.7%	0%	0%

Table 2b. School-related Outcomes: Misses School at Discharge

Name	County/Tribe	Freq or Sometimes	Never or Rarely	Unknown	Missing
Zone Homework	Adams	2.8%	0%	0%	97.2%
FYI Center CASTLE Program	Jefferson	0%	0%	0%	100%
Lighthouse	Lancaster	0%	0%	94.4%	5.6%
Great Futures Initiative	Lancaster	0%	0%	3.6%	96.4%
Tutoring Services	Madison	36.6%	43.9%	0%	12.2%

Outcome 2: Improve Grades. These variables assess a youth's grades in school at intake and discharge. Findings suggest that the percent of youth reporting grades of As, Bs, or Cs improved from intake to discharge. Slightly more youth's grades were unknown and missing at discharge compared to intake.

Analyses that statistically measure change from pre-enrollment to post-enrollment indicated that:

• The Tutoring Services Afterschool program does appear to be making an impact on youth grades. The data indicate that there was a statistically significant change in youth grades from intake to discharge (Wilcoxon z = -2.217, p = .027, n = 36); specifically, 3 students improved, 10 students declined, and 23 students remained the same.

Table 3a, School-related Outcomes: Grades at Intake

Name	County/Tribe	As, Bs, or Cs	Ds or Fs	Unknown	Missing
Zone Homework	Adams	97.2%	0%	2.8%	0%
FYI Center CASTLE Program	Jefferson	100%	0%	0%	0%
Lighthouse	Lancaster	0%	0%	97.2%	2.8%
Great Futures Initiative	Lancaster	0%	0%	0%	100%
Tutoring Services	Madison	34.1%	61%	4.9%	0%

Table 3b. School-related Outcomes: Grades at Discharge

Name	County/Tribe	As, Bs, or Cs	Ds or Fs	Unknown	Missing
Zone Homework	Adams	2.8%	0%	0%	97.2%
FYI Center CASTLE Program	Jefferson	0%	0%	0%	100%
Lighthouse	Lancaster	0%	0%	94.4%	5.6%
Great Futures Initiative	Lancaster	0%	0%	3.6%	96.4%
Tutoring Services	Madison	41.5%	39.1%	7.3%	12.2%

Outcome 3: Improve School Attachment. School attachment variables assess the youth's level of engagement at intake and discharge. Findings regarding improving attachment suggest that the percent of youth from the Madison County program reporting high or medium attachment decreased from intake to discharge. However, fewer youth reported low levels of engagement in school following program discharge. Decreases in reported levels of engagement with school may be due to increases in the amount of unknown and missing data reported by the program.

Analyses that statistically measure change from pre-enrollment to post-enrollment indicated that:

• The Tutoring Services Afterschool program does not appear to be making an impact on youth attachment to school. There was not a statistically significant improvement on levels of school engagement from intake to discharge (Wilcoxon z = .284, p = .776, n = 36); specifically, 5 students improved, 6 students declined, and 25 students remained the same.

Table 4a. School-related Outcomes: School Attachment at Intake

Name	County/Tribe	High or Medium	Low	Unknown	Missing
Zone Homework	Adams	87.4%	8.5%	1.4%	2.8%
FYI Center CASTLE Program	Jefferson	87.5%	12.5%	0%	0%
Lighthouse	Lancaster	0%	0%	97.2%	2.8%
Great Futures Initiative	Lancaster	0%	0%	0%	100%
Tutoring Services	Madison	56.1%	43.9%	0%	0%

Table 4b. School-related Outcomes: School Attachment at Discharge

Name	County/Tribe	High or Medium	Low	Unknown	Missing
Zone Homework	Adams	2.8%	0%	0%	97.2%
FYI Center CASTLE Program	Jefferson	0%	0%	0%	100%
Lighthouse	Lancaster	0%	0%	94.4%	5.6%
Great Futures Initiative	Lancaster	0%	0%	3.6%	96.4%
Tutoring Services	Madison	46.4%	34.1%	7.3%	12.2%

Findings from the analyses of outcome measures above indicate that the Madison County Afterschool program, Tutoring Services, is not improving youth attendance or attachment to school but is having an impact on youth grades. Higher levels of missing and unknown data at discharge may have negatively impacted the reliability of these findings.

Future System Involvement

Beyond evaluating program outcome measures to assess effectiveness, JJI also examines future system involvement (FSI) among youth who have completed programs. However, it is important to note that afterschool programs may not work with youth at risk of FSI and detention making these less-than-ideal measures for examining program effectiveness.

In Table 5 below, programs with no data reported for FSI and detainment did not have cases included in the court or detention datasets. This is likely due to the high number of cases from these programs that are missing discharge dates, which may be due to cases still being open.

Cases in which no discharge date was entered were removed from these analyses. The final sample for youth from Afterschool programs to examine FSI and detention was 84.

Table 5. Future System Involvement for Afterschool Programs

		Court	Filings	Probation ²	Detention ³		
Name (N)	County/Tribe	Status Offense (%)	Law Violation (%)	Formal (%)	Detained (%)		
Zone Homework $(n = 2)$	Adams	0	0	0	0		
FYI Center CASTLE Program ⁴	Jefferson	-	-	-	-		
Lighthouse $(n = 34)$	Lancaster	0	0	2.9	2.9		
Great Futures Initiative $(n = 13)$	Lancaster	0	0	0	0		
Tutoring Services $(n = 36)$	Madison	2.8	11.1	13.9	8.3		
All Afterschool Programs $(n = 85)$	State of Nebraska	1.2	4.7	7	4.7		

Future system involvement among youth from these programs was low. One youth had a new status offense court filing following program release. Four youth had a new law violation, two successfully completed programming and the four ranged in age from 12 to 16 years old. Further, six youth were adjudicated and placed on probation following program discharge. Half of these youth were successfully discharged from a program, and all ranged in age from 12 to 17 years old. Finally, four youth were detained in a facility within one year following program discharge. Half of these youth were successfully discharged from the program and ranged in age from 12 to 16 years old. Given the limitations in the data, it's difficult to reliably say whether most programs were successful in preventing FSI and detention or if the population of youth served in these programs were overall less at risk.

Youth from Madison County's Tutoring Services Afterschool program were older than the average youth in an afterschool program and more likely to be male compared to other afterschool programs. Tutoring Services also had the highest percentage of neutral case closures which may indicate that the population of youth they serve is at greater risk for FSI and detention resulting in higher percentages of both compared to other afterschool programs. Please note due to limitations in the JCMS coding for discharge reasons for afterschool programs, a neutral case closure (i.e., "stopped attending") may not indicate that a youth was unsuccessful in the program.

² Indicates that a youth was adjudicated and placed on probation

³ Sarpy County detention data not provided

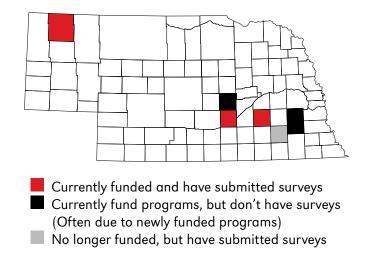
⁴ All program discharge dates missing

Table 6. Afterschool Program Effectiveness Assessment

Name (n)	County/Tribe	% of cases included in evaluation	Overall Outcome Improvement	Assessment Tool Findings	FSI⁵	Overall Deemed "Effective"
Zone Homework $(n = 71)$	Adams	2.8%	Missing	Mixed	Low	Inconclusive
FYI Center CASTLE Program (n = 8)	Jefferson	0%	Missing	Missing	-	Inconclusive
Lighthouse $(n = 36)$	Lancaster	94.4%	Missing	Missing	Low	Inconclusive
Great Futures Initiative $(n = 360)$	Lancaster	3.6%	Missing	Missing	Low	Inconclusive
Tutoring Services (n = 41)	Madison	85.4%	Mixed	Mixed	Moderate	Inconclusive

School Interventionists

At first, many of these programs were classified as truancy/ absenteeism programs. However, over time we identified that school interventionists were doing more than attendance work. As such, we created a program type called "school interventionist." School interventionists follow a social work model by identifying and coordinating behavioral or academic interventions for students in matters of attendance, poor grades, lack of engagement, or behavioral problems. The intervention can include other supports for the youth within the school or community.



Demographic Data

Community-based Aid currently funds five School-based Interventionist programs in Nebraska which are in bold in Table 7. Other school interventionist programs included in Table 7 are no longer funded but submitted data during the observation period.

⁵ Low indicates under 10% FSI for the program; Moderate indicates 10 – 30% FSI for program; High indicates over 30% FSI for the program



Table 7. School Interventionists programs FY 20/21 – FY 21/22

Progran	n		Youth Served			Case Closures ⁶	
Name (N)	County/ Tribe	Age (<i>M</i>)	White (%)	Male (%)	Successful (%)	Unsuccessful (%)	Missing (%)
School Social Worker $(n = 0)^7$	Howard	-	-	-	-	-	-
Dawes County School Social Work Program (n = 32)	Dawes	14.3	50	50	50	12.5	37.5
High school / Middle school Interventionist (n = 139)	Hall	13.9	34.5	48.9	56.8	11.5	31.7
Back on Track (n = 66)	Lancaster	16.7	21.2	51.5	63.6	6.1	30.3
School Interventionist $(n = 20)$	Saline	14.9	30	55	85	15	0
Interventionist $(n = 21)$	York	15.1	57.1	52.4	14.3	-	85.7
All School Interventionist Programs (n = 278)	State of Nebraska	14.8	34.5	50.4	56.5	9.7	33.8

School Interventionist programs funded from FY20/21 through 21/22 reported a total of 278 cases in the JCMS statewide. Roughly half (50.4%) of youth were male, 34.5% White, and are an average age of 14.8 years old. Regarding race, one program served primarily White youth while three programs served mostly minority populations. One program reported serving an equal proportion of White and minority youth. When examining program demographics for gender, three programs report serving primarily male youth and one report serving primarily female youth. One program reported serving an equal proportion of male and female youth.

JCMS data on case closures statewide demonstrate that just over half (56.5%) of youth were successfully discharged from the school interventionist program, compared to 9.7% of youth who had been unsuccessfully discharged. Saline County School Interventionist reported the highest successful closure rate (85%). The same program also reported the highest percentage of unsuccessful case closures, 15%, higher than the statewide average, which is likely due to the program having no missing data on case closures.

⁶ Successful case closures are a combined rate of cases coded as "Other (moved away/death/etc.)," "Transferred Schools," "Graduated," "Youth/ Parent Refused," "Completed Program Requirements," and "Other Commitments." Unsuccessful case closures include cases where youth "Dropped Out," "Stopped Attending," "New Charges/Probation," and "Did Not Complete Program Requirements."

⁷ No individual level data entered

Assessment Tool Findings

At intake, youth from Interventionist programs (n = 148 intake and n = 57 intake and discharge) reported higher callous and unemotional traits symptoms compared to all the other programs. Youth working with a School Interventionist also had significantly higher levels of some substance use measures compared to other program types. First, Interventionist youth were more likely to have higher lifetime alcohol problems compared with youth in Mentoring programs. Second, Interventionist youth reported significantly higher levels of lifetime cannabis problems relative to the Afterschool and Mentoring program youth. And finally, youth also had significantly higher levels of three-month cannabis use relative to youth in Afterschool programs. With respect to changes from intake to discharge for Interventionist program youth, there were significant declines in both alcohol and cannabis use.

Due to small sample sizes, only one school interventionist program was considered. Results suggest decreases in alcohol use among the High School / Middle School Interventionist Hall County Program. Analyses of individual school interventionist program data are included in Appendix 3.

Outcome Measures

Program Effectiveness: School-related Outcome Measures

School-related outcome measures of program effectiveness assess changes in attendance, grades, and engagement with school. To assess outcomes at discharge for this variable, we require at least 80% of data at intake and discharge to be included in the JCMS. Regarding the outcomes of interest, one program, School Interventionist – Saline County, reported sufficient data to examine change before and after programming. One program with no individual level data was dropped from the analyses.

Outcome 1: Improve Attendance. These variables measure how often a youth misses school at intake and discharge. Analyses found that a lower percentage of youth from Saline County's School Interventionist program reported frequently or sometimes missing school following programming. The percentage of youth reporting that they never or rarely miss school increased from intake to discharge.

Analyses that statistically measure change from pre-enrollment to post-enrollment indicated that:

• The Saline County School Interventionist program does not appear to be making an impact on school attendance. There was not a statistically significant improvement on missing school from intake to discharge for youth in this program (Wilcoxon z = .816, p = .414, n = 20); specifically, 2 students improved, 1 student declined, and 17 students remained the same.

Table 8a. School-related Outcomes: Misses School at Intake

Name	County/Tribe	Freq or Sometimes	Never or Rarely	Unknown	Missing
Dawes County School Social Work Program	Dawes	56.5%	37.5%	6.3%	0%
High school / Middle school Interventionist	Hall	81.3%	16.5%	1.4%	0.7%
Back on Track	Lancaster	84.8%	10.6%	0%	4.5%
School Interventionist	Saline	75%	25%	0%	0%
Interventionist	York	66.7%	23.8%	0%	9.5%

Table 8b. School-related Outcomes: Misses School at Discharge

Name	County/Tribe	Freq or Sometimes	Never or Rarely	Unknown	Missing
Dawes County School Social Work Program	Dawes	25%	31.3%	6.3%	37.5%
High school / Middle school Interventionist	Hall	58.9%	10.1%	0.7%	30.2%
Back on Track	Lancaster	43.9%	21.2%	4.5%	30.3%
School Interventionist	Saline	70%	30%	0%	0%
Interventionist	York	14.3%	0%	0%	85.7%

Outcome 2: Improve Grades. These variables assess a youth's grades in school at intake and discharge. Findings suggest that the percent of youth reporting grades of As, Bs, or Cs decreased from intake to discharge and the percentage of youth receiving mostly Ds and Fs, increased.

Analyses that statistically measure change from pre-enrollment to post-enrollment indicated that:

• The Saline County School Interventionist program does not appear to be making an impact on youth grades. The data indicate that there was not a statistically significant change in youth grades from intake to discharge (Wilcoxon z = 1.406, p = .160, n = 20); specifically, 5 students improved, 2 students declined, and 13 students remained the same.

Table 9a. School-related Outcomes: Grades at Intake

Name	County/Tribe	As, Bs, or Cs	Ds or Fs	Unknown	Missing
Dawes County School Social Work Program	Dawes	53.2%	43.8%	3.1%	0%
High school / Middle school Interventionist	Hall	32.4%	64%	2.9%	0%
Back on Track	Lancaster	18.2%	77.3%	0%	4.5%
School Interventionist	Saline	60%	40%	0%	0%
Interventionist	York	66.7%	23.8%	0%	9.5%

Table 9b. School-related Outcomes: Grades at Discharge

Name	County/Tribe	As, Bs, or Cs	Ds or Fs	Unknown	Missing
Dawes County School Social Work Program	Dawes	34.5%	25%	3.1%	37.5%
High school / Middle school Interventionist	Hall	30.9%	37.4%	0.7%	30.9%
Back on Track	Lancaster	33.3%	31.8%	4.5%	30.3%
School Interventionist	Saline	45%	55%	0%	0%
Interventionist	York	9.6%	4.8%	0%	85.7%

Outcome 3: Improve School Attachment. School attachment variables assess the youth's level of engagement at intake and discharge. Findings regarding improving attachment suggest that the percent of youth from the Saline County School Interventionist program reporting high or medium attachment decreased from intake to discharge and the percentage of youth reporting low engagement with school increased. Declines in reported levels of engagement with school may be due to a small sample size or the higher amount of unknown data at intake reported by the program.

Analyses that statistically measure change from pre-enrollment to post-enrollment indicated that:

• The Saline County School Interventionist program does not appear to be making an impact on youth attachment to school. There was not a statistically significant improvement on levels of school engagement from intake to discharge (Wilcoxon z = .325, p = .745, n = 20); specifically, 7 students improved, 4 students declined, and 9 students remained the same.

Table 10a. School-related Outcomes: School Attachment at Intake

Name	County/Tribe	High or Medium	Low	Unknown	Missing
Dawes County School Social Work Program	Dawes	78.1%	18.8%	3.1%	0%
High school / Middle school Interventionist	Hall	51.8%	44.6%	2.9%	0.7%
Back on Track	Lancaster	22.7%	57.6%	15.2%	4.5%
School Interventionist	Saline	55%	35%	10%	0%
Interventionist	York	52.4%	33.3%	4.8%	9.5%

Table 10b. School-related Outcomes: School Attachment at Discharge

Name	County/Tribe	High or Medium	Low	Unknown	Missing
Dawes County School Social Work Program	Dawes	40.7%	21.9%	0%	37.5%
High school / Middle school Interventionist	Hall	34.5%	34.5%	0.7%	30.2%
Back on Track	Lancaster	37.9%	27.3%	4.5%	30.3%
School Interventionist	Saline	35%	60%	5%	0%
Interventionist	York	9.5%	4.8%	0%	85.7%

Findings from the analyses of outcome measures above indicate that Saline County's School Interventionist program is not improving youth attendance, grades, or attachment to school. A small sample size and higher levels of unknown data at intake may have negatively impacted the reliability of these findings.

Future System Involvement

Beyond evaluating program outcome measures to assess effectiveness, JJI also examines future system involvement (FSI) among youth who have completed programs.

One program reported no individual level data on cases and was therefore dropped from FSI and detention analyses. Further, cases in which no discharge date was entered were removed from these analyses. The final sample for youth from all school interventionist programs to examine FSI and detention was 184.

Table 11. Future System Involvement for School Interventionist Programs

		Court	Filings	Probation ⁸	Detention ⁹
Name (<i>N</i>)	County/Tribe	Status Offense (%)	Law Violation (%)	Formal (%)	Detained (%)
Dawes County School Social Work Program $(n = 20)$	Dawes	0	5	0	0
High school / Middle school Interventionist (n = 95)	Hall	2.1	11.6	9.5	1.1
Back on Track $(n = 46)$	Lancaster	0	0	0	2.2
School Interventionist $(n = 20)$	Saline	20	5	0	0
Interventionist $(n = 3)$	York	0	0	0	0
All School Interventionist Programs (n = 184)	State of Nebraska	3.3	7.1	4.9	1.1

Future system involvement among youth from these programs was relatively low with a few exceptions. Overall, six youth had new status offense court filings. All youth with new status offense filings were successfully discharged from a program and were between the ages of 12 and 16 years old at the time of referral. Thirteen youth between the ages of 12 and 17 years old had new law violations. Eight of these youth were successfully discharged from a school interventionist program and five were unsuccessfully discharged from a school interventionist program. Nine youth from 13 to 17 years old were adjudicated and placed on probation. Over half, 66.7%, were successfully discharged from a school interventionist program and the remaining three were unsuccessfully discharged. Finally, two youth were detained within one year following program discharge, one was successfully discharged and the other unsuccessfully discharged.

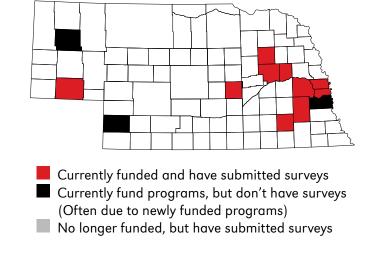
FSI among cases discharged from Saline County's School Interventionist program were the highest reported new status offense court filings at 20% (n=4). This may be due to the program having a small sample size and serving higher risk youth . Further, 11.6% of youth discharged from the Hall County High school / Middle school Interventionist program had a new law violation post-discharge.

Table 12. School Interventionist Program Effectiveness Assessment

Name (n)	County/Tribe	% of cases included in evaluation	Overall Outcome Improvement	Assessment Tool Findings	FSI ¹⁰	Overall Deemed "Effective"
School Social Worker $(n=0)$	Howard	0%	Missing	Missing	-	Inconclusive
Dawes County School Social Work Program (n = 32)	Dawes	62.5%	Missing	Inconclusive	Low	Inconclusive
High school / Middle school Interventionist (n = 139)	Hall	62.9%	Missing	Reductions in 3-month alcohol use	Moderate	Inconclusive
Back on Track (n = 66)	Lancaster	69.7%	Missing	Missing	Low	Inconclusive
School Interventionist $(n = 20)$	Saline	100%	Mixed	Inconclusive	Moderate	Inconclusive
Interventionist (n = 21)	York	14.3%	Missing	Missing	Low	Inconclusive

Mental Health Programs

Mental health programs work with youth to promote coping skills and well-being. CBA-funded mental health programs may be funded to provide assessment services for ongoing treatment. Although studies indicate that mental health issues alone do not increase risk of future system involvement, (Guebert & Olver, 2014; Wylie & Rufino, 2018), treating a juvenile's mental health needs is a responsive treatment in conjunction with addressing their specific criminogenic needs (Andrews et al., 1990).



Demographic Data

Community-based Aid currently funds 20 Mental Health programs in Nebraska which are in bold in Table 13. Other mental health programs included in Table 13 are no longer funded but submitted data during the observation period.

⁸ Indicates that a youth was adjudicated and placed on probation

⁹ Sarpy County detention data not provided

¹⁰ Low indicates under 10% FSI for the program; Moderate indicates 10 – 30% FSI for program; High indicates over 30% FSI for the program

Table 13. Mental Health programs FY 20/21 – FY 21/22

Progran	n		Youth Served	ł		Case Closures ¹¹	
Name (N)	County/ Tribe	Age (<i>M</i>)	White (%)	Male (%)	Successful (%)	Unsuccessful (%)	Missing (%)
Social Emotional Health $(n = 0)^{12}$	Box Butte	-	-	-	-	-	-
Heartland Family Services- Behavioral Health Services $(n = 0)^{13}$	Cass	-	-	-	-	-	-
Mental Health – Chase (n = 7)	Chase	13.1	28.6	14.3	57.2	28.6	14.3
Mental Health – Dundy $(n = 0)^{14}$	Chase	-	-	-	-	-	-
Mental Health - Red Willow $(n = 0)^{15}$	Chase	-	-	-		-	-
Mental Health – Hitchcock (n = 3)	Chase	8.7	100	33.3	66.6	33.3	0
Mental Health – Hayes $(n = 0)^{16}$	Chase	-	-	-	-	-	-
Mental Health – Furnas (n = 2)	Chase	14.5	50	0	0	100	0
Mental Health Services (n = 26)	Cheyenne	14	96.2	42.3	30.7	11.5	57.7
Mental Health Assessment (n = 40)	Colfax	15.7	22.5	35	27.5	5	67.5
Missing Youth Services Therapist (n = 19)	Douglas	14.6	0	36.8	21.1	73.7	5.3
Children's Mental Health Services (n = 135)	Douglas	11.2	5.9	52.6	-	-	100
On-Site Mental Health Therapy (n = 64)	Howard	11.8	92.2	37.5	14.2 28.1		57.8
Family Service School Therapy (n = 78)	Lancaster	15.2	64.1	25.6	29.5	12.8	57.7
Pilots of Change (n = 14)	Lancaster	15.6	14.3	50	28.5	21.4	50

¹¹ Successful case closures are a combined rate of cases coded as "Completed Program Requirements," Other (moved away/death/etc.),"

Progran	n		Youth Served	J					
Name (N)	County/ Tribe	Age (<i>M</i>)	White (%)	Male (%)	Successful (%)	Unsuccessful (%)	Missing (%)		
Malone Therapist $(n = 156)$	Lancaster	9.6	7.7	51.3	20.5	34			
School-based Therapy (n = 25)	Lancaster	15.3	60	24	84	84 -			
NJJDP Mental Health Services (n = 8)	Madison	15.3	75	75	75 37.5 37.5		25		
Mental Health Services (n = 8)	Platte	14.3	75	50	12.5	12.5 -			
Behavioral Health Therapist $(n = 16)$	Saline	13.9	25	62.5	31.3	-	68.8		
Post-Crisis Response Services (n = 19)	Sarpy	15.6	68.4	73.7	100	0	0		
Saunders County In-Home Therapy (n = 89)	Saunders	13	96.6	36	45	5.6	49.4		
School Based Behavioral Health Program (n = 97)	Saunders	11.9	82.5	53.6	40.2 6.2		53.6		
All Mental Health Programs (n = 806)	State of Nebraska	12.4	47.3	44.7	27.9	17.4	54.7		

Mental Health programs funded from FY20/21 through 21/22 reported a total of 806 cases in the JCMS statewide. Under half (44.7%) of youth were male, 47.3% white, and are an average age of 12.4 years old. Regarding race, 10 programs served primarily White youth while seven programs served mostly minority populations (with one of these programs serving an all-minority population). One program reported serving an equal proportion of White and minority youth. When examining program demographics for gender, six programs report serving primarily male youth and 10 report serving primarily female youth. Two programs reported serving an equal proportion of male and female youth.

JCMS data on case closures statewide demonstrate that just over a quarter (27.9%) of youth were successfully discharged from the mental health program, compared to 17.4% of youth who had been unsuccessfully discharged. Four programs reported more than half of their cases closed successfully. More than half of the mental health program cases in the JCMS are missing case closure data which may be the result of youth still being enrolled or programs no longer receiving funding.

We also examined the most commonly reported mental health diagnosis by program in the JCMS. Statewide, the most common diagnoses were no diagnosis (41.4%) and adjustment disorder (23%). Note: Diagnosis data includes that which was entered by programs into the JCMS and may not be inclusive of every diagnosis. Youth may have been diagnosed at a later date or may have had a diagnosis that was not shared with the program. Programs with fewer than 10 youth with mental health diagnosis included in the JCMS are masked for privacy.

[&]quot;Transferred Schools,", "Youth Refused," and "Parent Refused." Unsuccessful case closures include cases where youth "Stopped Attending" or

[&]quot;Referred to Higher Level of Service."

¹² No individual level youth data entered

¹³ No individual level youth data entered

¹⁴ No individual level youth data entered

¹⁵ No individual level youth data entered

¹⁶ No individual level youth data entered

Table 14. Mental Health Diagnosis

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Name (N)	Adjustment Disorder (%)	Personality Disorder (%)	Behavioral/Conduct Disorder (%)	Attachment Disorder (%)	Autism Spectrum (%)	Attention or Hyperactivity (%)	Anxiety (%)	Depression/ Bipolar (%)	Substance-related or Addictive (%)	Trauma/PTSD (%)	Learning Disorder (%)	Intellectual Disability (%)	Issues due to Family/ Home Environment (%)	No Diagnosis (%)	Missing (%)
Social Emotional Health $(n = 0)^{17}$	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Heartland Family Services- Behavioral Health Services $(n=0)^{18}$	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-
Mental Health – Chase $(n = 7)$	-	-	-	-	-	-	-	-	-		-	-	-	-	-
Mental Health – Dundy $(n=0)^{19}$	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Mental Health - Red Willow $(n = 0)^{20}$	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Mental Health – Hitchcock (n = 3)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Mental Health – Hayes $(n = 0)^{21}$	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Mental Health – Furnas $(n = 2)$	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Mental Health Services $(n = 26)$	3.8	0	0	0	0	0	0	0	0	0	0	0	0	96.2	0
Mental Health Assessment (n = 40)	-	-	-	-	-	2.5	22.5	12.5	2.5	-	2.5	2.5	12.5	40	2.5
Missing Youth Services Therapist (n = 19)	26.3	-	-	-	-	-	-	21.1	-	5.3	-	-	-	-	47.4
Children's Mental Health Services (n = 135)	0.7	-	-	-	-	-	-	-	-		-	-	-	86.7	12.6
On-Site Mental Health Therapy $(n = 64)$	42.2	-	-	3.1	1.6	6.3	17.2	10.9	-	4.7	-	-	-	-	14.1
Family Service School Therapy $(n = 78)$	50	-	1.3	-	2.6	6.4	20.5	9	-	5.1	-	-	1.3	2.6	1.3
Pilots of Change (n = 14)	57.1	-	-	-	-	7.1	7.1	7.1	1	14.3	-	1	-	-	7.1
Malone Therapist (n = 156)	-	-	-	-	-	-	-	-	-	-	-	-	-	73.7	26.3
School-based Therapy $(n = 25)$	56	-	4	-	-	-	4	16	-	4	-	-	-	-	16
NJJDP Mental Health Services $(n = 8)$	-	-	-	-	-	-	-	-	1	-	-	1	1	-	-
Mental Health Services $(n = 8)$	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Behavioral Health Therapist $(n = 16)$	62.5	0	0	0	0	6.3	18.8	0	0	6.3	0	0	0	6.3	0

Name (N)	Adjustment Disorder (%)	Personality Disorder (%)	Behavioral/Conduct Disorder (%)	Attachment Disorder (%)	Autism Spectrum (%)	Attention or Hyperactivity (%)	Anxiety (%)	Depression/ Bipolar (%)	Substance-related or Addictive (%)	Trauma/PTSD (%)	Learning Disorder (%)	Intellectual Disability (%)	Issues due to Family/ Home Environment (%)	No Diagnosis (%)	Missing (%)
Post-Crisis Response Services $(n = 19)$	0	0	0	0	0	5.3	0	5.3	0	0	0	0	0	89.5	0
Saunders County In-Home Therapy $(n = 89)$	44.9	-	2.2	-	3.4	2.2	7.9	10.1	-	3.4	-	-	-	15.7	10.1
School Based Behavioral Health Program (n = 97)	37.1	1	3.1	12.4	1	0	12.4	7.2	0	2.1	0	0	3.1	20.6	0
All Mental Health Programs (n = 806)	23	0.1	0.9	0.2	0.9	3.5	7.8	5.7	0.2	2.4	0.1	0.1	1.1	41.4	12.5

Assessment Tool Findings

Mental Health programs take in youth (n=340 intake and n=111 intake and discharge) with significantly greater emotional problems, hyperactivity, and significantly higher trauma symptoms (BTSSY) compared with other program types. Regarding change from intake to discharge, results suggest that reductions in emotional problems and trauma symptoms (BTSSY) were significantly greater for youth in Mental Health programs compared to most other program types. There were also notably significant reductions in callous and unemotional traits (ICU) and hyperactivity in youth from Mental Health from intake to discharge.

Assessment tool findings related to individual programs suggest that mental health programs in general were associated with decreases in conduct problems (0.06), emotional problems, hyperactivity, ICU scores and trauma symptom severity. These results were not significantly differentiated by individual program (four programs were considered) with the trend level difference for trauma symptom decline (this was less for the Family Service School Therapy Lancaster County). Other assessment tool findings for mental health programs are included in Appendix 3.

Outcome Measures

Program Effectiveness: Mental Health Outcome Measures

Mental health outcome measures of program effectiveness assess the level of improvement and effort relevant to program expectations which is assessed at discharge from the program. Progress is measured on an ordinal scale from significant progress to significant regression at discharge. Table 15 below includes the percentage of cases for each program reporting either "significant or some progress," "no progress or regression," "some or significant regression," and missing. Programs with no individual level data were removed from the analyses.

¹⁷ No individual level youth data entered

¹⁸ No individual level youth data entered

¹⁹ No individual level youth data entered

²⁰ No individual level youth data entered

²¹ No individual level youth data entered

Outcome: Level of improvement and effort relevant to program expectations. Table 15 below includes data on reported level of improvement or effort for youth at program discharge. Overall, 35.7% of all cases reported significant or some progress at discharge. Specifically, seven programs reported that 50% or more of cases had significant or some progress at discharge. One program, Post-Crisis Response Services (n = 19) reported that all cases were assessed as significant or some progress at discharge. Percentages of cases with no progress or regression were lower statewide at 10.8%. No program reported some or significant regression in level of improvement or effort relevant to program expectations upon discharge, but it should be noted that this may be less reliable due to high levels of missing data.

Table 15. Program Outcome Level of Improvement and Effort Relevant to **Program Expectations**

Name	County/Tribe	Significant or Some Progress (%)	No Progress or Regression (%)	Some or Significant Regression (%)	Missing (%)
Mental Health – Chase $(n = 7)$	Chase	57.2	28.6	-	14.3
Mental Health – Hitchcock (n = 3)	Chase	33.3	-	-	66.7
Mental Health – Furnas $(n = 2)$	Chase	50	50	0	0
Mental Health Services (n = 26)	Cheyenne	26.9	15.4	-	57.7
Mental Health Assessment (n = 40)	Colfax	2.5	30	-	67.5
Missing Youth Services Therapist (n = 19)	Douglas	52.6	42.1	-	5.3
Children's Mental Health Services (n = 135)	Douglas	-	-	-	100
On-Site Mental Health Therapy (n = 64)	Howard	32.8	6.3	-	60.9
Family Service School Therapy $(n = 78)$	Lancaster	30.8	11.5	-	57.7
Pilots of Change $(n = 14)$	Lancaster	28.6	21.4	-	50
Malone Therapist $(n = 156)$	Lancaster	67.3	5.1	-	27.6
School-based Therapy $(n = 25)$	Lancaster	68	16	-	16
NJJDP Mental Health Services (n = 8)	Madison	50	25	-	25
Mental Health Services $(n = 8)$	Platte	12.5	-	-	87.5
Behavioral Health Therapist (n = 16)	Saline	25	6.3	-	68.8
Post-Crisis Response Services (n = 19)	Sarpy	100	0	0	0
Saunders County In-Home Therapy (n = 89)	Saunders	28.1	26.9	-	44.9
School Based Behavioral Health Program (n = 97)	Saunders	41.3	5.1	-	53.6
All Mental Health Programs	State of Nebraska	35.7	10.8	-	53.5

Future System Involvement

Beyond evaluating the program outcome measure to assess effectiveness, JJI also examines future system involvement (FSI) among youth who have completed programs.

Five programs reported no individual level data on cases and were therefore removed from FSI and detention analyses. Further, cases in which no discharge date was entered were removed from these analyses. The final sample for youth from mental health programs to examine FSI and detention was 365.

Table 16. Future System Involvement Mental Health Programs

		Court	Filings	Probation ²²	Detention
Name (N)	County/Tribe	Status Offense (%)	Law Violation (%)	Formal (%)	Detained (%)
Mental Health – Chase (n = 6)	Chase	0	0	0	0
Mental Health – Hitchcock (n = 3)	Chase	0	0	0	0
Mental Health – Furnas $(n = 2)$	Chase	0	0	0	0
Mental Health Services $(n = 11)$	Cheyenne	0	0	0	0
Mental Health Assessment (n = 13)	Colfax	7.7	0	7.7	7.7
Missing Youth Services Therapist $(n = 18)$	Douglas	0	0	0	0
Children's Mental Health Services ²³	Douglas	-	-	-	-
On-Site Mental Health Therapy (n = 27)	Howard	0	0	0	0
Family Service School Therapy $(n = 33)$	Lancaster	0	0	0	0
Pilots of Change $(n = 7)$	Lancaster	0	0	0	14.3
Malone Therapist $(n = 103)$	Lancaster	0	1	1	0
School-based Therapy $(n = 21)$	Lancaster	0	0	0	0
NJJDP Mental Health Services (n = 6)	Madison	0	0	16.7	0
Mental Health Services $(n = 1)$	Platte	0	0	0	0
Behavioral Health Therapist $(n = 5)$	Saline	0	0	0	0
Post-Crisis Response Services (n = 19)	Sarpy	0	5.3	5.3	26.3
Saunders County In-Home Therapy (n = 45)	Saunders	0	0	0	2.2
School Based Behavioral Health Program (n = 45)	Saunders	0	2.2	2.2	0
All Mental Health Programs (n = 365)	State of Nebraska	0.3	0.8	1.4	2.2

²² Indicates that a youth was adjudicated and placed on probation

²³ All program discharge dates missing

Future system involvement among youth from these programs was low. One youth had a new status offense court filing following program release, this youth was successfully discharged from the program, had no diagnosis recorded, and progress at discharge was coded as "no progress."

Three youth had new law violations, all were successfully discharged from a program, between the ages of 10 and 17 years old at the time of referral. Two had no mental health diagnosis and one had a recorded diagnosis of anxiety. Progress at discharge for all three youth was coded as "significant" or "some progress."

Further, five youth were adjudicated and placed on probation, all but one was successfully discharged from a program, between the ages of 10 and 17 years old at referral, three had no diagnosis, and two had anxiety diagnoses. When examining progress at discharge for these five youth, three youth were coded as either "significant" or "some progress" and two were coded as either "no progress" or "regression."

Finally, eight youth were detained in a facility within one year following program discharge. Youth that were detained post release from programming were between 15 and 17 years old at referral, all but one was successfully discharged from a program. One youth had depression/bipolar diagnosis and the rest had no diagnosis. For progress at discharge, most of these youth were coded as having "significant progress" (n = 5), the remaining three were coded as "no progress." Overall, it appears that mental health programs were effective in preventing future system involvement and detention among youth discharged from programs.

Table 17. Mental Health Program Effectiveness Assessment

Name (n)	County/Tribe	% of cases included in evaluation	Overall Outcome Improvement	Assessment Tool Findings	FSI ²⁴	Overall Deemed "Effective"
Social Emotional Health (n = 0)	Box Butte	0%	Missing	Missing	-	Inconclusive
Heartland Family Services-Behavioral Health Services (n=0)	Cass	0%	Missing	Missing	-	Inconclusive
Mental Health – Chase (n = 7)	Chase	85.7%	Yes	Missing	Low	Promising
Mental Health – Dundy (n = 0)	Chase	0%	Missing	Missing	-	Inconclusive
Mental Health - Red Willow $(n = 0)$	Chase	0%	Missing	Missing	-	Inconclusive
Mental Health – Hitchcock (n = 3)	Chase	100%	Mixed	Missing	Low	Promising
Mental Health – Hayes (n = 0)	Chase	0%	Missing	Missing	-	Inconclusive

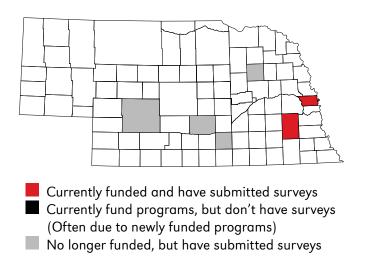
 $^{^{24}}$ Low indicates under 10% FSI for the program; Moderate indicates 10 – 30% FSI for program; High indicates over 30% FSI for the program



Name (n)	County/Tribe	% of cases included in evaluation	Overall Outcome Improvement	Assessment Tool Findings	FSI ²⁴	Overall Deemed "Effective"
Mental Health – Furnas (n = 2)	Chase	10%	Mixed	Missing	Low	Inconclusive
Mental Health Services $(n = 26)$	Cheyenne	42.3%	Mixed	Missing	Low	Inconclusive
Mental Health Assessment $(n = 40)$	Colfax	32.5%	Mixed	Missing	Low	Inconclusive
Missing Youth Services Therapist (n = 19)	Douglas	94.7%	Yes	Inconclusive	Low	Promising
Children's Mental Health Services (n = 135)	Douglas	0%	Missing	Missing	-	Inconclusive
On-Site Mental Health Therapy (n = 64)	Howard	42.2%	Missing	Inconclusive	Low	Inconclusive
Family Service School Therapy $(n = 78)$	Lancaster	42.3%	Mixed	Mixed	Low	Inconclusive
Pilots of Change $(n = 14)$	Lancaster	50%	Mixed	Inconclusive	Low	Inconclusive
Malone Therapist (n = 156)	Lancaster	66%	Yes	Missing	Low	Inconclusive
School-based Therapy $(n = 25)$	Lancaster	84%	Yes	Mixed	Low	Effective
NJJDP Mental Health Services $(n = 8)$	Madison	75%	Mixed	Missing	Low	Promising
Mental Health Services $(n = 8)$	Platte	12.5%	Mixed	Inconclusive	Low	Inconclusive
Behavioral Health Therapist $(n = 16)$	Saline	31.2%	Mixed	Missing	Low	Inconclusive
Post-Crisis Response Services (n = 19)	Sarpy	100%	Yes	Inconclusive	Moderate	Inconclusive
Saunders County In-Home Therapy (n = 89)	Saunders	50.6%	Mixed	Mixed	Low	Inconclusive
School Based Behavioral Health Program (n = 97)	Saunders	46.4%	Mixed	Mixed	Low	Inconclusive

Mentoring Programs

Mentoring programs match a young person (mentee) with a more experienced person who is working in a non-professional capacity (mentor) to provide support and guidance to the mentee in one or more areas of the mentee's development. There are four types of mentoring programs: Community (CB), Juvenile Justice (JJ), School-based (SB), and Youth Initiated MentoringTM (YIM). Mentoring programs have been found to be an effective strategy for improving several outcomes, including behavioral, social, emotional, and academic domains (DuBois et al., 2011).



Demographic Data

Community-based Aid currently funds three Mentoring programs in Nebraska which are in bold in Table 18. Other mentoring programs included in Table 18 are no longer funded but submitted data during the observation period.

Table 18. Mentoring programs FY 20/21 – FY 21/22

Progran	n	Youth Served			Case Closures ²⁵		
Name (N)	County/ Tribe	Age (<i>M</i>)	White (%)	Male (%)	Successful (%)	Unsuccessful (%)	Missing (%)
CareerConnect (n = 17)	Adams	16.2	76.5	17.6	-	-	100
Bridge to Prosperity (n = 148)	Douglas	13.3	0	52	12.9	9.5	77.7
Goal Setting (n = 276)	Douglas	9.9	28.3	49.6	2.1	13.1	84.8
Youth initiated Mentoring TM (n = 28)	Douglas	14.6	21.4	71.4	3.6	46.4	50
Community-based Mentoring $(n = 1)$	Douglas	11	0	0	-	-	100
Pathfinders Mentoring (n = 8)	Douglas	13.3	0	0	-	-	100
Community-based Mentoring $(n = 22)$	Lancaster	12.4	36.4	31.8	-	13.6	86.4
Community Connections Mentoring (n = 21)	Lincoln	9.9	61.9	57.1	38	14.3	47.6

²⁵ Successful case closures are a combined rate of cases coded as "Other (moved away/death/etc.)," "Closed Successfully," and "Program Ended, Relationship Continued." Unsuccessful case closures include cases are a combined rate of "Closed by Mentee," "Closed by Program," "Closed by Mentor," and "Discharged Prior to Matching."

Progran	1	Youth Served			Case Closures ²⁵		
Name (<i>N</i>)	County/ Tribe	Age (<i>M</i>)	White (%)	Male (%)	Successful (%)	Unsuccessful (%)	Missing (%)
Stanton High School TeamMates (n = 3)	Madison	11.7	100	100	-	-	100
40 Assets Shipmates $(n = 0)^{26}$	Platte	-	-	-	-	-	-
Centennial TeamMates $(n = 0)^{27}$	Seward	-	-	-	-	-	-
All Mentoring Programs (n = 524)	State of Nebraska	11.5	23.1	49.4	6.6	13.2	80.3

Mentoring programs funded from FY20/21 through 21/22 reported a total of 524 cases in the JCMS statewide. Roughly half (49.4%) of youth were male, 23.1% White, and are an average age of 11.5 years old (range from 9.9 to 16.2 years old). Regarding race, three programs served primarily White youth while six programs served mostly minority populations (with three programs of these programs serving all minority populations). When examining program demographics for gender, four programs report serving primarily male youth and five report serving primarily female youth.

JCMS data on case closures statewide demonstrate that there is a high rate of missing data on case closures, results should be interpreted with caution. Statewide, for programs reporting data on closures into the JCMS, 6.6% were reported as successfully closed compared to 13.2% unsuccessfully closed. Community Connections Mentoring in Lincoln County reported the highest rate of successful case closures at 38%, with 14.3% of cases closed unsuccessfully.

Frequency by program for youth that matched with a mentor

Of the 524 cases entered by programs into the JCMS, 216 (41.2%) had been matched with a mentor. A total of 277 mentor profiles were entered into the JCMS during this time. The total number of mentor profiles entered is greater than the number of mentor-mentee matches because some cases were matched with more than one mentor.

If a youth had more than one mentor, we included each mentor. As such, there were a total of 277 mentors.

²⁶ No individual level youth data entered

²⁷ No individual level youth data entered

Table 19. Number and Percent of Mentee-Mentor Matches

Name (N)	County/Tribe	Mentoring Type	Number of Matches	Total Number of Enrolled Cases	Percent Matched Youth
CareerConnect $(n = 17)$	Adams	Community-based	0	17	0%
Bridge to Prosperity $(n = 148)$	Douglas	Community-based	146	148	98.6%
Goal Setting $(n = 276)$	Douglas	Community-based	22	276	8%
Youth initiated Mentoring TM $(n = 28)$	Douglas	Youth Initiated	1	28	3.6%
Community-based Mentoring $(n = 1)$ Douglas County	Douglas	Community-based	1	1	100%
Pathfinders Mentoring $(n = 8)$	Douglas	Community-based	8	8	100%
Community-based Mentoring $(n = 22)$ Lancaster County	Lancaster	Community-based	21	22	95.5%
Community Connections Mentoring $(n = 21)$	Lincoln	Community-based	15	21	71.4%
Stanton High School TeamMates (n = 3)	Madison	School-based	2	3	66.7%
40 Assets Shipmates $(n = 0)$	Platte	School-based	-	0	-
Centennial TeamMates $(n = 0)$	Seward	School-based	-	0	-
All Mentoring Programs (n = 524)	State of Nebraska		216	524	41.2%

Statewide, mentoring programs reported just under half (41.2%) of youth were matched with a mentor while in the program. Two programs with small sample sizes reported that all youth enrolled in the program were matched with a mentor (Community-based Mentoring Douglas County and Pathfinders Mentoring). Other programs reported nearly all youth as matched, Bridge to Prosperity (98.6%, 146 of 148 youth) and Community-based Mentoring Lancaster County (95.5%, 21 of 22 youth). Smaller percentages of matched youth may be an artifact of youth being newly enrolled in the program at the time the data for this report were pulled and should be interpreted cautiously. Further, the small overall percentage of youth statewide that have been matched is largely driven by programs that are outliers in the data, in this case, the program with the largest number of enrolled cases is reporting an 8% match rate at the time the data was collected.

Assessment Tool Findings

At intake, youth in Mentoring programs (n = 202 intake and n = 74 intake and discharge) reported significantly lower hyperactivity symptoms than those in other programs. With respect to change from intake to discharge, the Mentoring programs were associated with marked declines in alcohol, cannabis, and nicotine usage.

Individual level assessment tool analyses suggest that mentoring programs were associated with reductions in peer problems, particularly among the Goal Setting Douglas County Program and the Friends Program Buffalo County²⁸. We also found associated with reductions in alcohol and cannabis use, particularly the Bridge to Prosperity Douglas County Program. This program's clients also had the most severe problems at intake. Further, mentoring was associated with reductions in nicotine use, particularly the Buffalo County Friends Program and the Bridge to Prosperity Douglas County Program (both Programs whose clients at intake had the most severe problems). Other assessment tool findings for mentoring programs are included in Appendix 3.

Outcome Measures

Program Effectiveness: Mentoring Outcome Measures

To assess mentoring effectiveness, JJI looked at the average length of contact youth had with mentors and the average length of the match relationship. Programs with no individual level data were removed from the analyses. Research on effective match relationships suggests that to achieve the best outcomes for youth, programs should pay attention to the length, frequency, and total hours of mentoring required by the program (Grossman & Rhodes, 2002; Herrera et al., 2007; Kremer & Cooper, 2014; Wyman et al., 2010). In general, longer-term (at least one year) mentoring relationships are associated with more benefits to youth compared to shorter-term relationships and ensuring that the relationship lasts for the intended duration of the commitment period (Larose et al., 2005). Ending the match prematurely may result in negative youth outcomes, especially if the match ends suddenly or on less than ideal terms (MENTOR, 2015).

Outcome 1: Frequency of Interactions. JJI examined the total number of contact minutes per case. Length of contact could be calculated for 193 cases in which data on minutes of contact with mentors were included. Average length of contact (in minutes) ranged from 90 minutes to 3842.3 minutes among programs with a statewide average of 2441.4 minutes. In addition to average length of contact, standard deviation is also included as a measure of the variation in the data. Standard deviation is an indication of the range of the data, a high standard deviation would suggest a wide range in minutes of contact youth are receiving. Data on required length of contact per case were not included in the JCMS, therefore we could not assess the degree to which contact minutes and the frequency of interactions aligned with program-specific goals and guidelines. For more information about average length of contact or standard deviation, please contact JJI.

Table 20. Average Length of Contact in Minutes (ALOC)

Name	County/Tribe	Mentoring Type	Number of Cases	Mean ALOC (mins)	SD
CareerConnect	Adams	Community- based	-	-	-
Bridge to Prosperity	Douglas Community- based		-	-	-
Goal Setting	Douglas	Community- based	1	90	-
Youth initiated Mentoring TM	Douglas	Youth Initiated	-	-	-
Community-based Mentoring	Douglas	Community- based	1	120	-
Pathfinders Mentoring	Douglas	Community- based	8	3842.3	5336.9
Community-based Mentoring	Lancaster	Community- based	22	321.5	162.3
Community Connections Mentoring	Lincoln	Community- based	14	940.7	577.4
Stanton High School TeamMates	Madison	School-based	2	142.5	74.2
All Mentoring Programs	State of Nebraska		193	2441.4	2229

²⁸ This program had reported assessment tool data but were not included in the JCMS data as they were not currently funded during the report period.

Note. Only those programs with ALOC were included in this table. Standard Deviation cannot be calculated for programs with a single case.

Outcome 2: Length of Match Relationship. Of the 277 mentor matches, 51 had neither a start nor an end date of the match relationship. A total of 244 cases had a start date, but only 39 of these cases had an end date, indicating the case may still be open. Of the total 39 cases that included both a start and end date, three cases were duplicate youth who were in the same program twice. Length of match was calculated as a total per youth for these cases which resulted in 36 cases with data to examine the duration of the mentoring relationship.

We calculated the average length of the match (ALOM) on the 36 cases that had an individual mentor and included both a start date and end date. The average length of time a youth was matched to their mentor was just over half a year, at 215.1 days (SD = 142.16).

Next, we included average length of match by program for the 36 cases for which it could be calculated (Table 21). As noted above, longer-term matches (at least one year) are generally associated with better outcomes for youth compared to shorter-term matches. For the 36 cases with data on average length of match included in the dataset, no program met this benchmark. It is important to note that small sample sizes and missing data on average length of match make assessments of length of match relationship difficult. For more information about standard deviation, please see explanation above or contact JJI.

Table 21. Average Length of Match in Days (ALOM)

Name	County/Tribe	Mentoring Type	Number of Cases	Mean ALOM (days)	SD
CareerConnect	Adams	Community- based	-	-	-
Bridge to Prosperity	Douglas	Community- based	19	256.1	176
Goal Setting	Douglas	Community- based	3	142	116.6
Youth initiated Mentoring TM	Douglas	Douglas Youth Initiated		-	-
Community-based Mentoring	Douglas	Community- based	-	-	-
Pathfinders Mentoring	Douglas	Douglas Community- based		-	-
Community-based Mentoring	Lancaster	Community- based	1	53	-
Community Connections Mentoring	Lincoln	Community- based	13	184.5	55
Stanton High School TeamMates	Madison	School-based	-	-	-
All Mentoring Programs	State of Nebraska		36	215.1	142.2

Note. Only those programs with ALOM were included in this table. Standard Deviation cannot be calculated for programs with a single case.

Match Variables on Length of Match

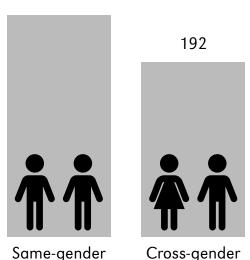
Gender of Mentee & Mentor

We tested whether matching based on gender has an impact on the length of the match using a One-Way ANOVA to compare the cross-gender matches to the same-gender matches on average length of match with the 36 cases for which we had average length of match and gender information for the mentee and mentor.

Although the same-gender matches had a higher average length of match (240.9 days compared to 192 days for cross-gender matches), there was not statistical difference between each group F(1,34) = 1.065, p = .309. This means that being matched with a mentor of the same or different gender did not have an effect on the length of the relationship. These results should be interpreted with caution due to the small numbers of same- (n = 17) and cross-gender (n = 19) matches.

Figure 1. Average Length of Match by Gender Matching (in days)

240.9

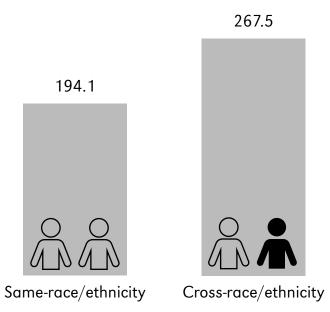


Race/Ethnicity of Mentee & Mentor

Next, we tested whether matching based on race/ethnicity had an impact on the match using a One-Way ANOVA to compare the cross-race/ethnicity matches to the same-race/ethnicity matches on average length of match with the 23 cases for which we had average length of match and race/ethnicity information for the mentee and mentor.

The results revealed there was not a significant difference F(1,22) = 1.046, p = .318. This means that being matched with a mentor of the same or different race/ethnicity did not have an effect on the length of the relationship. Cross-matches did have a higher average length (267.5 days) of match than same-race/ethnicity matches (194.1 days). These results should be interpreted with caution due to the small numbers of same- (n = 11) and cross-race/ethnicity (n = 12) matches.

Figure 2. Average Length of Match by Race/Ethnicity Matching (in days)



Age of Mentee & Mentor

We investigated whether age of the mentor and age of the mentee impacted average length of the match using Pearson's correlation with the 23 cases for which we had average length of match and age information for the mentee and mentor.

Overall, the mentee's age did not significantly predict the match length r(23) = -.384, p = .070. The mentor's age, however, did significantly predict the match length, such that youth with younger mentors were more likely to have a longer length of match r(23) = -.456, p = .029 compared to older mentors.

Future System Involvement

Beyond evaluating program outcome measures to assess effectiveness, JJI also examines future system involvement (FSI) among youth who have completed programs.

Two programs reported no individual level data on cases and were therefore removed from FSI and detention analyses. Further, cases in which no discharge date was entered were removed from these analyses. The final sample for youth from all Mentoring programs to examine FSI and detention was 105.

Table 22. Future System Involvement for Mentoring Programs

<i></i>		<u> </u>					
		Court	Filings	Probation ²⁹	Detention ³⁰		
Name (<i>N</i>)	County/Tribe	Status Offense (%)	Law Violation (%)	Formal (%)	Detained (%)		
CareerConnect $(n = 0)^{31}$	Adams	-	-	-	-		
Bridge to Prosperity $(n = 33)$	Douglas	0	0	0	0		
Goal Setting $(n = 22)$	Douglas	0	0	0	0		
Youth initiated Mentoring TM $(n = 14)$	Douglas	0	21.4	14.3	14.3		
Community-based Mentoring $(n = 0)^{32}$ Douglas County	Douglas	-	-	-	-		
Pathfinders Mentoring $(n = 0)^{33}$	Douglas	-	-	-	-		
Community-based Mentoring $(n = 3)$ Lancaster County	Lancaster	0	0	0	0		
Community Connections Mentoring (n = 10)	Lincoln	0	0	0	0		
Stanton High School TeamMates $(n = 0)^{34}$	Madison	-	-	-	-		
All Mentoring Programs (n = 105)	State of Nebraska	0	2.9	1.9	1.9		

Future system involvement among youth discharged from a mentoring program was very low. No youth had a new status offense post-discharge, three had a new law violation, two were adjudicated to probation, and two were detained within a year of discharge from programming. All FSI cases were from one program, among youth that were not matched while in the program. The Youth initiated Mentoring TM program is the only mentoring program that receives referrals primarily from diversion and/or probation. As such, the youth that they serve are likely higher risk for future system involvement.

We also examined the average length of time youth were in a mentoring program to look for differences between those that had future system involvement compared to those that did not. The average days in the program for youth who were discharged either successfully or unsuccessfully from a mentoring program was 157.3 compared to an average of 80.8 days for youth who had future system involvement post release.

Overall, it appears that mentoring programs were effective in preventing future system involvement among youth discharged from programs, especially among youth matched with mentors while in the program.

²⁹ Indicates a youth was adjudicated and placed on probation

³⁰ Sarpy County detention data not provided

³¹ All program discharge dates missing

³² All program discharge dates missing

³³ All program discharge dates missing

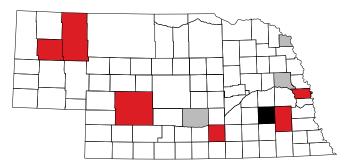
³⁴ All program discharge dates missing

Table 23. Mentoring Program Effectiveness Assessment

Name (n)	County/Tribe	% of cases included in evaluation	% of Youth Matched	Assessment Tool Findings	FSI ³⁵	Overall Deemed "Effective"
CareerConnect (n = 17)	Adams	0%	0%	Missing	-	Inconclusive
Bridge to Prosperity (n = 148)	Douglas	22.3%	98.6%	Reductions in 3-month nicotine, alcohol, and cannabis use	Low	Inconclusive
Goal Setting (n = 276)	Douglas	15.2%	8%	Reductions in Peer Problems	Low	Inconclusive
Youth initiated Mentoring TM $(n = 28)$	Douglas	50%	3.6%	Missing	Moderate	Inconclusive
Community-based Mentoring (n = 1)	Douglas	0%	100%	Missing	-	Inconclusive
Pathfinders Mentoring (n = 8)	Douglas	0%	100%	Missing	-	Inconclusive
Community-based Mentoring $(n = 22)$	Lancaster	13.6%	95.5%	Missing	Low	Inconclusive
Community Connections Mentoring $(n = 21)$	Lincoln	52.4%	71.4%	Inconclusive	Low	Inconclusive
Stanton High School TeamMates $(n = 3)$	Madison	0%	66.7%	Missing	1	Inconclusive
40 Assets Shipmates (n = 0)	Platte	0%	-	Missing	-	Inconclusive
Centennial TeamMates (n = 0)	Seward	0%	-	Missing	-	Inconclusive

Promotion/Prevention Programs

Promotion/prevention programs use methods or activities to reduce or deter specific problem behaviors such as bullying, gang involvement, substance abuse, or to promote positive behaviors and outcomes. Promotion/prevention programs that aim to promote positive behaviors can focus on employment skills, life skills, or be pro-social activities that are to encourage youth to behave in ways that benefit others. Some promotion/prevention programming can touch on different areas of promoting positive behaviors, while working to prevent the problem behaviors within the same program. Programs in this category will meet with youth on an ongoing basis over an extended period of time.



- Currently funded and have submitted surveys
 Currently fund programs, but don't have surveys
 (Often due to newly funded programs)
- No longer funded, but have submitted surveys

Demographic Data

Community-based Aid currently funds 17 Promotion/Prevention programs in Nebraska (bolded in the table below). Please note, cases from Thrive Omaha (n=18) were removed from the dataset. Also, cases from Healing Hearts and Families (n=2) were removed from the dataset due to reclassification of the program occurring the spring of 2020. Other promotion/prevention programs included in Table 24 are no longer funded but submitted data during the observation period.

Table 24. Promotion/Prevention Programs FY20/21 - FY 21/22

			··· · · · · · · · · · · · · · · · · ·		/		
Progran	n		Youth Served	ł		Case Closures ³⁶	
Name (N)	County/ Tribe	Age (<i>M</i>)	White (%)	Male (%)	Successful (%)	Unsuccessful (%)	Missing (%)
Horizon Lifeskills (n = 93)	Adams	15.4	88.2	55.9	69.9	2.2	28
Alliance Public Schools Job Coach (n = 36)	Box Butte	16.8	52.8	50	25	11.1	63.9
Decision Making Classes (n = 21)	Buffalo	15.1	95.2	90.5	81	-	19
Teen Citizen Academy $(n = 5)$	Dakota	16	0	40	100	0	0
Skill Builders (n = 21)	Dodge	15.5	76.2	61.9	9.6	-	90.5
You Turn (<i>n</i> = 47)	Douglas	16.2	2.1	78.7	38.3	2.1	59.6
Urban B.O.L.T. (n = 73)	Douglas	15.1	0	58.9	75.3	16.4	8.2

³⁶ Successful case closures are a combined rate of cases coded as "Other (moved away/death/etc.)," "Successful Completion," 'Youth/Parent Refused," and "Case Closed." Unsuccessful case closures include "Unsuccessful Completion."

³⁵ Low indicates under 10% FSI for the program; Moderate indicates 10 – 30% FSI for program; High indicates over 30% FSI for the program

Progran	n		Youth Served	<u></u> _	Case Closures ³⁶			
Name (N)	County/ Tribe	Age (M)	White (%)	Male (%)	Successful (%)	Unsuccessful (%)	Missing (%)	
Creative Writing Program $(n = 0)^{37}$	Douglas	-	-	-	-	-	-	
Healing Circulos Facilitator (n = 33)	Douglas	15.6	3	100	30.3	15.2	45.5	
Success Prep $(n=0)^{38}$	Douglas	-	-	-	-	-	-	
Restorative Practices $(n = 14)$	Douglas	15.9	0	64.3	85.7	-	14.3	
PACE $(n = 1130)$	Douglas	10.7	17.6	73.3	99.7	0.1	0.2	
Community Alternatives to Suspension (C.A.T.S.) Program (n = 14)	Douglas	13.9	7.1	71.4	-	-	100	
Latinx Outreach $(n=0)^{39}$	Hall	-	-	-	-	-	-	
Character Strong SEL Program (n = 1)	Jefferson	13	100	0	-	-	100	
Joven Noble/ Latina Leaders ⁴⁰ (n = 373)	Lancaster	13	3.8	48	0.8	-	99.2	
ACCC Serving Immigrant and Refugee Youth (n = 150)	Lancaster	13.1	14.7	46	2	-	98	
All-Access Pass (n = 15)	Lancaster	12.5	13.3	40	-	-	100	
Strengthfinder Coaching (n = 14)	Lancaster	14.7	50	42.9	50	7.1	42.9	
Girl Scouts Juvenile Justice Outreach (n = 146)	Lancaster	15.9	11.6	0.7	100	0	0	
Community Youth Services $(n = 90)$	Lancaster	14.9	57.8	61.1	84.4	14.4	1.1	
5-0 Club (n = 39)	Lancaster	15.3	17.9	59	97.4	-	2.6	
Malone Community Center ⁴¹ (n = 110)	Lancaster	15.1	9.1	61.8	18.2	0.9	80.9	

³⁷ No individual level youth data entered

Progran	n		Youth Served	ł	Case Closures ³⁶			
Name (<i>N</i>)	County/ Tribe	Age (<i>M</i>)	White (%)	Male (%)	Successful (%)	Unsuccessful (%)	Missing (%)	
Changing Behaviors Alternative Program (n = 88)	Lincoln	13.8	68.2	55.7	36.4	51.1	12.5	
Asset Building (n = 16)	Lincoln	12.4	81.3	50	100	0	0	
Platte County Juvenile Services ⁴² (n = 69)	Platte	13.7	62.3	49.3	92.7	1.4	5.8	
1st Job $(n = 0)^{43}$	Seward	-	-	-	-	-	-	
Behavioral Health $(n = 18)$	Sheridan	13.7	61.1	66.7	94.4	5.6	0	
All Promotion/ Prevention Programs (n = 2616)	State of Nebraska	12.8	22.9	60.2	66.4	3.3	30.1	

Promotion/Prevention programs funded from FY20/21 through 21/22 reported a total of 2616 cases in the JCMS statewide. Over half (60.2%) of youth were male, 22.9% White, and are an average age of 12.8 years old (range from 10.7 to 16.8 years old). Regarding race, 10 programs served primarily White youth while 13 programs served mostly minority populations. One program reported serving an equal proportion of White and minority youth. When examining program demographics for gender, 14 programs report serving primarily male youth and eight report serving primarily female youth. Two programs reported serving equal proportions of male and female youth.

JCMS data on case closures statewide demonstrate a moderate rate of missing data on case closures. Statewide, 66.4% of cases were closed successfully compared to 3.3% of cases closing unsuccessfully. Twelve programs reported case closures for more than 80% of their cases. Closure rates for these programs ranged from 36.4% to 100%, with an average rate of successful closures at 87.25%.

Assessment Tool Findings

Promotion/Prevention program youth (n = 723 intake and n = 170 intake and discharge) were not markedly different from youth entering into other programs. Youth in Promotion/Prevention programs showed some reduced cannabis use (intake relative to follow-up). However, this result was only marginally significant.

³⁸ No individual level youth data entered

³⁹ No individual level youth data entered

⁴⁰ This includes Joven Noble and Latina Leaders both of which are currently funded for FY21/22. There is no program name entered on these 373 cases in the JCMS to differentiate which program the youth participated in.

⁴¹ This includes Take Pause, Malone Leadership Academy for Young Women (Strong and Smart Girls), and Malone Leadership Academy (Talented Tenth). Take Pause is the only currently funded program for FY21/22. There is no program name entered on these 6 cases in the JCMS to differentiate which program the youth participated in.

⁴² This includes Upward Movement and 40 Developmental Assets. There is no program name entered on these 69 cases in the JCMS to differentiate which program the youth participated in.

⁴³ No individual level youth data entered

Individual program assessment tool findings suggest promotion/prevention programs were associated with declines in cannabis use, particularly for the Urban B.O.L.T. Douglas County Program, the Malone Community Center Lancaster County Program, and the Behavioral Health Sheridan County Program. Further, we also found associated with declines in trauma related symptoms, particularly Alliance Public Schools Job Coach Box Butte County Program, Malone Community Center Lancaster County Program, and the Behavioral Health Sheridan County Program. Other assessment tool findings for promotion/prevention programs are included in Appendix 3.

Outcome Measures

Program Effectiveness: Promotion/Prevention Outcome Measures

Promotion/Prevention program related outcome measures include youth attendance most of the required days and programming variety. Four programs with no individual level data were removed from the analyses.

Outcome 1: Youth Attendance. One outcome of interest with promotion/prevention programs is youth attendance. Programs report the number of times youth attended a program event, the total hours completed, and the total hours required. Table 25a below represents the number of times youth attended a programming event. Programming event attendance was included for 2,333 youth with data in the JCMS during the observation period. Most youth attended only once (n = 1838), but times attended ranged from one to 12 across all programs reporting data. PACE, for example, reported youth attendance in a program event ranged from one to 12 times, 65.5% of youth from PACE attended an event once, 26% attended an event twice, and 8.4% attended an event three or more times.

Table 25a. All Prevention/Promotion Programs Youth Attendance

Times Youth Attended Program	Number of Youth			
1	1838			
2	366			
3	57			
4	29			
5	18			
6	9			
7	5			
8	4			
9	3			
10	2			
11	1			
12	1			

Table 25b includes data programs entered on the number of hours of programming youth completed. JJI also calculated the average percentage of required program hours completed by youth using data programs entered in the JCMS. Research suggests that youth assessed as low risk should receive below 100 hours of services, moderate risk youth should receive 100 – 150 hours (Virginia Department of Juvenile Justice, 2019). Youth statewide completed an average of just over 20 hours of programming (23.13). Variation in average hours completed was noted between programs. Nine programs reported average hours completed by youth as under 10 hours. Four programs reported youth completing an average of 10 – 20 hours of programming, and three programs reported youth completing an average of more than 20 hours or programming. Statewide, the percentage of required hours completed by youth was 74.89%, with a range from 22.22% to 104.37% of required hours. Dashes in cells indicate where data on hours completed and required by program were missing or not otherwise included in the JCMS and could not be calculated.

Table 25b. Hours Completed and Percent of Required Hours - Youth Attendance

Program	County/Tribe	Number of Cases	Average Hours Completed by Program, SD	Average Percent of Required Hours Completed, SD
Horizon Lifeskills	Adams	67	10.73, 6.71	88.65, 18.44
Alliance Public Schools Job Coach	Box Butte	20	16.5, 26.19	38.57, 29.26
Decision Making Classes	Buffalo	15	5.13, 1.68	100, 0
Teen Citizen Academy	Dakota	-	-	-
Skill Builders	Dodge	-	-	-
You Turn	Douglas	-	-	-
Urban B.O.L.T.	Douglas	53	12.56, 6.35	70.62, 30.29
Healing Circulos Facilitator	Douglas	11	3.5, 5.28	30.23, 40.03
Restorative Practices	Douglas	-	-	-
PACE	Douglas	1125	22.11, 16.96	99.64, 5.16
Community Alternatives to Suspension	Douglas	-	-	-
Character Strong SEL Program	Jefferson	-	-	-
Joven Noble/Latina Leaders	Lancaster	166 ⁴⁴ 206 ⁴⁵	120, 0 ⁴⁶ 118.45, 11.07 ⁴⁷	100, 0 ⁴⁸ 104.37, 62.71 ⁴⁹
ACCC Serving Immigrant and Refugee Youth	Lancaster	129	7.83, 9.58	31.37, 20.38
All-Access Pass	Lancaster	-	-	-
Strengthfinder Coaching	Lancaster	9	4.89, 1.96	90.74, 22.22
Girl Scouts Juvenile Justice Outreach	Lancaster	132	3.14, 0.6	100, 050

⁴⁴ Latina Leaders

⁴⁵ Joven Noble

⁴⁶ Latina Leaders

⁴⁷ Joven Noble

⁴⁸ Latina Leaders

⁴⁹ Joven Noble

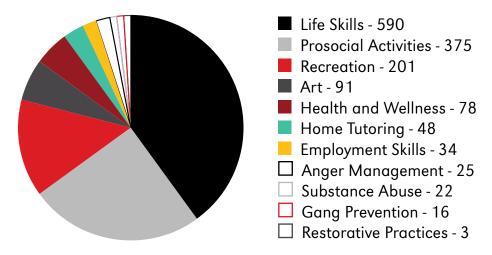
 $^{^{50}}$ n = 131

Program	County/Tribe	Number of Cases	Average Hours Completed by Program, SD	Average Percent of Required Hours Completed, SD
Community Youth Services	Lancaster	86	8.5, 5.52	86.05, 34.85
5-0 Club	Lancaster	38	3, 2.04	93.23, 24.12
Malone Community Center ⁵¹	Lancaster	-	-	-
Changing Behaviors Alternative Program	Lincoln	68	47.19, 46.75	74.63, 25.72 ⁵²
Asset Building	Lincoln	17 ⁵³	8.29, 6.24	30.95, 21.41
Platte County Juvenile Services ⁵⁴	Platte	63^{55} 4^{56}	15.11, 1.27 ⁵⁷ 2, 1.41 ⁵⁸	94.44, 7.95 ⁵⁹ 22.22, 15.71 ⁶⁰
Behavioral Health	Sheridan	18	7.39, 1.42	92.36, 17.75
All Promotion/Prevention Programs	State of Nebraska	2218	23.13, 36.49	74.89, 29.6

Outcome 2: Programming Variety. A second outcome necessary to evaluate if Promotion/ Prevention programs are evidence based is programming variety. Programs are asked to gather and report data on the type of activity youth participate in and the hours youth complete by activity type.

Figure 3 below includes activity type for all youth in promotion/prevention programs statewide. There are 11 activity categories. The most popular activity type youth participated in was "life skills" (n = 590), followed by "prosocial activities (n = 375), and "recreation" (n = 201).

Figure 3. All Programs - Youth by Activity Type



⁵¹ This includes Take Pause, Malone Leadership Academy for Young Women (Strong and Smart Girls), and Malone Leadership Academy (Talented Tenth)

Table 26 below represents the number of youth who participated in a specified activity type included in the JCMS data. Please note, youth may have participated in multiple activity types during their time in the program. The average hours completed by activity type included in the table below represents an average of the total hours completed that had a corresponding activity type listed by program in JCMS. Dashes in cells indicate where data on activity type and hours completed by activity type were missing or not otherwise included in the JCMS. Statewide, youth completed on average 52.02 hours of programming by activity type.

Table 26. Number of Youth by Activity Type

Program	Home	Employment Skills	Recreation	Gang	Art	Prosocial Activities	Substance Abuse	Restorative Practices	Life Skills	Health & Wellness	Anger Management	Average Hours Completed by Activity Type, SD
Horizon Lifeskills	-	-	-	-	-	-	-	-	-	-	-	-
Alliance Public Schools Job Coach	33	29	23	-	27	11	4	-	30	21	8	10.05, 8.62
Decision Making Classes	-	-	-	-	-	1	2	-	8	-	1	5.29, 2.05
Teen Citizen Academy	-	-	-	-	-	-	-	-	-	-	-	-
Skill Builders	-	-	-	-	-	-	-	-	-	-	-	-
You Turn	-	-	-	-	-	-	-	-	-	-	-	-
Urban B.O.L.T.	-	-	-	1	-	54	-	-	-	-	-	12.36, 6.2
Healing Circulos Facilitator	-	-	-	-	-	23	-	-	1	-	-	8.17, 4.73
Restorative Practices	-	-	-	6	-	8	6	-	14	-	7	34.43, 10.11
PACE	1	-	105	-	-	-	-	-	-	-	-	26.46, 6.63
Community Alternatives to Suspension	-	-	-	-	-	-	-	-	-	-	-	-
Character Strong SEL Program	-	-	-	-	-	-	-	-	-	-	-	-
Joven Noble/Latina Leaders	-	1	-	8	-	-	-	-	363	-	-	119.14, 8.26
ACCC Serving Immigrant and Refugee Youth	14	-	73	-	6	128	-	2	71	8	-	10.85, 12.79
All-Access Pass	-	1	-	-	-	12	-	-	3	-	-	8.4, 1.59
Strengthfinder Coaching	-	1	-	-	-	1	-	-	7	-	-	4.88, 1.89
Girl Scouts Juvenile Justice Outreach	-	-	-	-	58	6	-	-	34	46	-	3.63, 1.37
Community Youth Services	-	2	-	-	-	88	-	-	-	-	-	8.55, 5.64
5-0 Club	-	-	-	-	-	6	-	-	-	-	-	2.33, 0.82
Malone Community Center	-	-	-	-	-	-	-	-	-	-	-	-
Changing Behaviors Alternative Program	-	-	-	-	-	37	10	1	59	3	9	48.35, 43.54
Asset Building		-	_	-	-	-	-	-	-	_	-	-
Platte County Juvenile Services ⁶¹	-	-	-	1	-	-	-	-	-	-	-	4
Behavioral Health	-	-	-	-	-	-	-	-	-	-	-	-
All Promotion/Prevention Programs	48	34	201	16	91	375	22	3	590	78	25	52.02, 52.35

⁶¹ This includes Upward Movement and 40 Developmental Assets

⁵² n – 66

⁵³ One case listed as attending this program was linked with a different agency code

⁵⁴ This includes Upward Movement and 40 Developmental Assets

^{55 40} Developmental Assets

⁵⁶ Upward Movement

⁵⁷ 40 Developmental Assets

⁵⁸ Upward Movement

⁵⁹ 40 Developmental Assets

⁶⁰ Upward Movement

Note: Standard Deviation cannot be calculated for programs with a single case.

Outcomes of interest for promotion/prevention programs include youth attendance and programming variety. Statewide, for youth who had program event attendance data included, we found that most youth (78.8%) are attending one programming event. A secondary measure of youth attendance, hours of programming, was also included in the analyses. We found that statewide, youth completed an average of just over 20 hours of programming (23.13), or nearly 75% of required programming hours. This aligns with research suggesting optimal dosage for lower risk youth at under 100 hours. Regarding programming variety, we found that promotion/prevention programs were effective in offering a variety of activity types to youth. The most common activity type youth participated in was "life skills" (n = 590), followed by "prosocial activities (n = 375), and "recreation" (n = 201).

Future System Involvement

Beyond evaluating program outcome measures to assess effectiveness, JJI also examines future system involvement (FSI) among youth who have completed programs.

Four programs reporting no individual level data were removed from FSI and detention analyses. Further, cases in which no discharge date was entered were removed from these analyses. The final sample for youth from all promotion/prevention programs to examine FSI and detention was 1843.

Table 27. Future System Involvement for Promotion/Prevention Programs

		Court	Filings	Probation ⁶²	Detention	
Name (N)	County/Tribe	Status Offense (%)	Law Violation (%)	Formal (%)	Detained (%)	
Horizon Lifeskills (n = 67)	Adams	0	1.5	0	3	
Alliance Public Schools Job Coach $(n = 13)$	Box Butte	0	7.7	0	0	
Decision Making Classes (n = 17)	Buffalo	0	5.9	5.9	0	
Teen Citizen Academy (n = 5)	Dakota	0	0	0	0	
Skill Builders $(n = 2)$	Dodge	50	50	100	0	
You Turn (<i>n</i> = 19)	Douglas	0	15.8	10.5	0	
Urban B.O.L.T. (<i>n</i> = 73)	Douglas	0	12.3	11	2.7	
Healing Circulos Facilitator $(n = 15)$	Douglas	0	6.7	6.7	0	
Restorative Practices $(n = 14)$	Douglas	0	14.3	14.3	14.3	
PACE (n = 1127)	Douglas	0.3	1.2	1	0.1	
Community Alternatives to Suspension $(n = 2)$	Douglas	0	0	0	0	
Character Strong SEL Program ⁶³	Jefferson	-	-	-	-	
Joven Noble/Latina Leaders (n = 5)	Lancaster	0	0	0	0	

⁶² Indicates a youth was adjudicated and placed on probation

		Court	Filings	Probation ⁶²	Detention
Name (N)	County/Tribe	Status Offense (%)	Law Violation (%)	Formal (%)	Detained (%)
ACCC Serving Immigrant and Refugee Youth $(n = 3)$	Lancaster	0	0	0	0
All-Access Pass ⁶⁴	Lancaster	-	-	-	-
Strenghtfinder Coaching $(n = 8)$	Lancaster	0	0	0	0
Girl Scouts Juvenile Justice Outreach $(n = 146)$	Lancaster	0	2.7	2.1	4.8
Community Youth Services (n = 89)	Lancaster	2.2	19.1	20.2	5.6
5-0 Club (n = 39)	Lancaster	0	7.7	5.1	23.1
Malone Community Center $(n = 21)$	Lancaster	0	0	0	0
Changing Behaviors Alternative Program $(n = 78)$	Lincoln	7.7	35.9	41	2.6
Asset Building $(n = 16)$	Lincoln	0	0	0	0
Platte County Juvenile Services $(n = 66)$	Platte	0	0	0	0
Behavioral Health (n = 18)	Sheridan	0	0	0	0
All Promotion Prevention Programs (n = 1843)	State of Nebraska	0.7	4.6	4.4	1.6

Future system involvement among youth from these programs was low. Statewide, twelve youth had a new status offense court filing following program release. Youth with a new status offense filing were between the ages of five⁶⁵ and 16 years old, eight had successfully been discharged from a program, and four had been unsuccessfully discharged. When examining differences in average hours of programming completed by youth, for youth with hours reported by programs, the average hours completed by youth with new status offense court filings was 43.5 hours, higher than the average statewide hours completed of 23.13 hours.

Next, 84 youth discharged from a promotion/prevention program had a new law violation within a year following discharge, these youth were between the ages of seven⁶⁶ and 17 at the time of referral, and equally likely to have been either successfully or unsuccessfully discharged from a program. When examining differences in average hours of programming completed by youth, for those that had future law violations following program discharge, the average number of program hours completed was 23.64, this is fewer than the average number of hours for those with new status offense filings, but still greater than the average number of completed hours statewide.

⁶³ All program discharge dates missing

⁶⁴ All program discharge dates missing

⁶⁵ A discrepancy in age between the program data and court/detention datasets was noted for the youth listed as 5 years old. Program verified date of birth

⁶⁶ A discrepancy in age between the program data and court/detention datasets was noted for the youth listed as 7 years old. Program verified date of birth.

Further, 82 youth were adjudicated and placed on probation. Youth on probation ranged in age from five⁶⁷ to 17 at the time of referral and were more likely to be unsuccessfully discharged from a program (52.4%). Youth who were placed on probation completed an average of 25.82 hours of programming, higher than the statewide average program completion hours.

Finally, 30 youth were detained in a facility within one year following program discharge. These youth were between the ages of 12 and 18 at the time of referral and most successfully completed programming (86.7%). On average, youth sent to a detention facility in the year following program discharge completed an average of 6.88 hours of programming, far less than the statewide average.

Considering the fact that Nebraska programs are not seeing high future system involvement, and they are providing a substantial number of hours of services, the dosage appears to be effective and a good use of resources.

Table 28. Promotion/Prevention Program Evaluation Assessment

Name (n)	County/Tribe	% of cases included in evaluation	Overall Average % of Programming Completed	Assessment Tool Findings	FSI ⁶⁸	Overall Deemed "Effective"
Horizon Lifeskills $(n = 93)$	Adams	72%	88.65%	Mixed	Low	Promising
Alliance Public Schools Job Coach (n = 36)	Box Butte	36.1%	38.57%	Reductions in Trauma-related symptoms	Low	Inconclusive
Decision Making Classes (n = 21)	Buffalo	81%	100%	Missing	Low	Promising
Teen Citizen Academy (n = 5)	Dakota	0%	-	Inconclusive	Low	Inconclusive
Skill Builders $(n = 21)$	Dodge	9.5%	-	Inconclusive	High	Inconclusive
You Turn (<i>n</i> = 47)	Douglas	40.4%	-	Missing	Moderate	Inconclusive
Urban B.O.L.T. (<i>n</i> = 73)	Douglas	91.8%	70.62%	Reductions in 3-month cannabis use	Moderate	Inconclusive
Creative Writing Program $(n = 0)$	Douglas	0%	-	Missing	-	Inconclusive
Healing Circulos Facilitator (n = 33)	Douglas	54.5%	30.23%	Inconclusive	Low	Inconclusive
Success Prep (n = 0)	Douglas	0%	-	Missing	-	Inconclusive
Restorative Practices (n = 14)	Douglas	85.7%	-	Missing	Moderate	Inconclusive
PACE (n = 1130)	Douglas	99.8%	99.64%	Missing	Low	Promising
Community Alternatives to Suspension (C.A.T.S.) Program $(n = 14)$	Douglas	0%	-	Missing	Low	Inconclusive

⁶⁷ A discrepancy in age between the program data and court/detention datasets was noted for the youth listed as 5 years old. Program verified date of birth.

Name (n)	County/Tribe	% of cases included in evaluation	Overall Average % of Programming Completed	Assessment Tool Findings	FSI ⁶⁸	Overall Deemed "Effective"
Latinx Outreach $(n = 0)$	Hall	0%	-	Missing	-	Inconclusive
Character Strong SEL Program $(n = 1)$	Jefferson	0%	-	Missing	-	Inconclusive
Joven Noble/Latina Leader (n = 373)	Lancaster	0.8%	100%, 104.37%	Missing	Low	Inconclusive
ACCC Serving Immigrant and Refugee Youth (n = 150)	Lancaster	2%	31.37%	Mixed	Low	Inconclusive
All-Access Pass (n = 15)	Lancaster	0%	-	Missing	-	Inconclusive
Strengthfinder Coaching $(n = 14)$	Lancaster	57.1%	90.74%	Inconclusive	Low	Inconclusive
Girl Scouts Juvenile Justice Outreach (n = 146)	Lancaster	100%	100%	Missing	Low	Promising
Community Youth Services $(n = 90)$	Lancaster	98.9%	86.05%	Missing	Moderate	Inconclusive
5-0 Club (n = 39)	Lancaster	97.4%	93.23%	Missing	Moderate	Inconclusive
Malone Community Center (n = 110)	Lancaster	19.1%	-	Reductions in 3-month cannabis use and Trauma- related symptoms	Low	Inconclusive
Changing Behaviors Alternative Program $(n = 88)$	Lincoln	87.5%	74.63%	Inconclusive	High	Inconclusive
Asset Building $(n = 16)$	Lincoln	100%	30.95%	Missing	Low	Inconclusive
Platte County Juvenile Services (n = 69)	Platte	94.2%	94.44% ⁶⁹ , 22.22% ⁷⁰	Missing	Low	Promising ⁷¹ , Inconclusive ⁷²
1st Job (<i>n</i> = 0)	Seward	0%	-	Missing	-	Inconclusive
Behavioral Health (n = 18)	Sheridan	100%	92.36%	Reductions in 3-month cannabis use and Trauma- related symptoms	Low	Effective

⁶⁸ Low indicates under 10% FSI for the program; Moderate indicates 10 – 30% FSI for program; High indicates over 30% FSI for the program

⁶⁹ 40 Developmental Assets

⁷⁰ Upward Movement

⁷¹ 40 Developmental Assets

⁷² Upward Movement

Conclusion

Juvenile justice programs in Nebraska appear to be serving the correct population and preventing subsequent law violations. Therefore, programs that have entered data appear to be meeting their intended outcomes and should continue to be funded. As we mentioned at the opening of this report, prevention programs often assume they are serving the correct population, but few assess whether they truly are.

We compared mental health programming to other types of prevention programs, to specifically test whether Nebraska program are serving the target population. Mentored populations should be statistically different than youth served by mental health programs, or afterschool programs, or interventionists. This is an important analysis because in rural areas, with limited resources it may be tempting to combine populations and blend interventions. Nebraska's programs do not appear to be blending youth populations. This is important for step for ensuring effective interventions.

While programs in Nebraska are overall effective at preventing youth from reoffending, it is less clear which specific intervention is effective. Under the current statute, the JJI is called upon to evaluate two items:

- The varying rates of recidivism, as defined by rules and regulations adopted and promulgated by the commission, and other measures for juveniles participating in community-based programs; and
- Whether juveniles are sent to staff secure or secure juvenile detention after participating in a program funded by the Community-based Juvenile Services Aid Program.

This report has examined the varying rates of recidivism, and whether youth are sent to staff secure or secure juvenile detention. The next steps in evaluation would ideally include randomized testing. Randomized control trials (RCT) allow science to conclusively state that a specific program or intervention is effective at preventing new law violations. However, RCTs are generally not utilized in evaluations of juvenile justice programming. Short of that, a quasi-experimental design will allow us to determine the "other measures" that are effective interventions. In upcoming years, the JJI hopes to work closely with specific programs to analyze which the techniques and methods appear to keep youth from reoffending.

General JCMS Data Limitations

The ongoing nature of many of these programs often results in open cases when data are pulled for analysis, which limits the statistical analyses that can be done. Further, missing data often results when programs lose funding, when this happens, cases may be left open and not discharged because the youth may still be enrolled in the program even if they are not receiving CBA. Discharging these cases without confirmation that they have been either successfully or unsuccessfully discharged from the program could skew FSI and detention analyses and is therefore not done. There is ongoing discussion about how to best capture when this occurs to improve data completion and reporting accuracy.

Defining Future System Involvement

To examine future system involvement (FSI) and detention following program participation, the Juvenile Justice Institute received an extract of court filing data from the Nebraska Crime Commission's (NCC) Justice Data Transformation System (JDTS). The JDTS extract is a deidentified masked dataset that matched court data to the JCMS using first name, last name, middle name (if available in both datasets), and date of birth. These fields need not be identical; instead, the matching process uses a probabilistic process and the level of "matchingness" is based on how well the variables match each other. If interested in the matching levels, documentation on this probabilistic process is available from the NCC. Please note, referral date was used to code for the date a youth was "filed on" as this is the variable provided by the NCC and, according to the Administrative Office of the Courts and Probation, is typically the same as the filed-on date.

Data was provided to the JJI for all matched cases – any time a juvenile's name appeared in the court data and matched a juvenile who was referred to a program. Next, the JJI filtered out any court filings that were dismissed (dismissed-unfounded and dismissed-warned), cases in which the offense did not meet the EB-Nebraska definition of FSI (see Appendix 1), court filings that occurred prior to discharge from the program, and court filings that occurred greater than one-year post-discharge.

If a juvenile had more than one offense that met these criteria, we included the first offense following discharge from the program as the measure of FSI. Offenses were categorized according to whether they were status offenses or law violations.

In addition to FSI, we also examined the percent of youth from each program that were adjudicated and placed on probation or those sent to either a secure or staff secure juvenile facility after participating in a Community-based Aid funded program. Youth were considered to be detained if they were sent to a detention facility at all following release from the program. Please note, if a youth had more than one entry into a detention facility post-release, only the facility placement from the first incident post-release was coded.

References

- Andrews, D., Zinber, I., Hoge, R., Bonta, J., Gendreau, P., & Cullen, F. (1990). Does correctional treatment work? A clinically-relevant and psychologically informed meta-analysis. *Criminology*, 28(3), 369-404.
- DuBois, D., Portillo, N., Rhodes, J., Silverthron, N., & Valentine, J. C. (2011). How effective are mentoring programs for youth? A systematic assessment of the evidence. *Psychological Science in the Public Interest*, 12(2), 57-91.
- Grossman, J., & Rhodes, J. (2002). The test of time: Predictors and effects of duration in youth mentoring relationships. *American Journal of Community Psychology*, 30, 199-219.
- Guebert, A., & Olver, M. (2014). An examination of criminogenic needs, mental health concerns, and recidivism in a sample of violent yount offenders: Implications for risk, need, and responsivity. *International Journal of Forensic Mental Health*, 13, 295-310.
- Herrera, C., Grossman, J., Kaugh, T., Feldman, A., McMaken, J., & Jucovy, L. (2007). Making a difference in schools: The Big Brothers/Big Sisters school-based mentoring impact study. Philadelphia, PA: Public/Private Ventures.
- Kotlaja, M. (Unpublished Manuscript). Assessing Barriers to Retention and Recruitment in Youth Delinquency Prevention and Promotion Programs. [Unpublished manuscript]. Department of Criminal Justice and Criminology, University of Missouri-Kansas City.
- Kremer, S., & Cooper, B. (2014). Mentor screening and youth protection. In D. L. DuBois and M. J. Karcher (Eds.), Handbook on youth mentoring (2nd Ed.) (pps. 411-425). Thousand Oaks, CA: Sage.
- MENTOR (2015). Elements of Effective Practices for Mentoring, 4th Edition. https://www.mentoring.org/wp-content/uploads/2019/11/Final_Elements_Publication_Fourth.pdf
- Office of Juvenile Justice and Delinquency Prevention "Offending by Juveniles," *Statistical Briefing Book*, October 2018.
- Office of Juvenile Justice and Delinquency Prevention. (2020). Research central: Measuring what works in juvenile reentry. https://ojjdp.ojp.gov/newsletter/ojjdp-news-glance-novemberdecember-2020/research-central-measuring-what-works-juvenile-reentry
- Pardini, D. (2016). Empirically based strategies for preventing juvenile delinquency. *Child and Adolescent Psychiatric Clinics of North America*, 25(2), 257-268.
- Virginia Department of Juvenile Justice. (October 2019). Dosage: Knowing when and how much. https://www.djj.virginia.gov/documents/community/csunity/CSUnity%20-October%20 2019%20-%20Dosage.pdf
- Wiener, R. (2018). Recidivism Rates for Nebraska Juvenile Probationers: 2010 to 2015. https://supremecourt.nebraska.gov/sites/default/files/NE-Juv-Recidivsm-Rpt-Feb-2018.pdf
- Wylie, L. E., & Rufino, K. A. (2018). The impact of victimization and mental health symptoms on recidivism for early system-involved juvenile offenders. *Law and Human Behavior*, 42, 558-569.
- Wyman, P., Cross, W., Brown, K., Yu, Q., Tu, X., & Eberly, S. (2010). Intervention to strengthen emotional self-regulation in children with emerging mental health problems: Proximal impact on school behavior. *Journal of Abnormal Child Psychology*, 38(24), 707-720.

Appendix 1

Definition of Future System Involvement

To accurately assess post-program law violations across Community-based Aid (CBA) funded programs, the Juvenile Justice Institute and other researchers shall utilize the following uniform definition of future law violations for juveniles who participated in a CBA-funded program.

- I. Court Filings
 - (A) This definition shall apply to both juveniles, and individuals who have aged out of the juvenile justice system:
 - 1. Future System Involvement shall mean that within 1 year following discharge from a CBA-funded program the juvenile has:
 - (a) been filed on, which has not been dismissed or dropped, for an act that would constitute a felony under the laws of this state, and who, beginning on July 1, 2017, was eleven years of age or older at the time the act was committed.
 - (b) been filed on, which has not been dismissed or dropped, for an act that would constitute a misdemeanor or an infraction under the laws of this state, or a violation of a city or village ordinance, and who, beginning on July 1, 2017, was eleven years of age or older at the time the act was committed.
 - (i) Future system involvement shall include minor in possession under Neb. Rev. Statute 53-180.02 and is coded as a law violation.
 - (ii) Future system involvement shall not include less serious misdemeanors or infractions that do not impact community safety, including animal(s) at large, failure to return library materials, and littering.
 - (iii) Future system involvement shall not include failure to appear. (c) been filed on, which has not been dismissed or dropped, for an act that would constitute a status offense to include truancy under Neb. Rev. Statute 43-247(3)(b) (3) or Neb. Rev. Statute 79-201 ("compulsory attendance"), uncontrollable juvenile under Rev. Statute 43-247(3)(b)(2), curfew violations under city or village ordinance, or Tobacco use by a Minor under Neb. Rev. Statute 28-1418.
 - (i) Although status offenses are included in the definition of future system involvement, status offenses shall be reported separately from law violations.
 - (d) been filed on, which has not been dismissed or dropped, for an act that would constitute a serious traffic offense to include driving under the influence under Neb. Rev. Statute 60-6, 196 or similar city/village ordinance, leaving the scene of an accident under Neb. Rev. Statute 60-696(A), reckless driving under Neb. Rev. Statute 60-6, 214(A), engaging in speed contest/racing under Neb. Rev. Statute 60-6, 195 (a) or (b) or related city/village ordinance.

- (i) Future system involvement shall not include less serious traffic violations that do not impact community safety, including careless driving, failure to yield, failing to stop, speeding, violating learner's permit, driving on suspended license, no valid insurance, no helmet, following too close, failure to display plates.
- 2. Future law violation shall not include the following:
 - (a) been filed on and that has not been dismissed or dropped, for an act that would constitute a Games and Parks violation as found in Neb. Rev. Statute Chapter 37
 - (b) been filed on for being mentally ill and dangerous, under Neb. Rev. Statute 43-247(3)(c) or harmful to self or others under 43-247(3)(b)(2)

II. Probation

- (A) Future System Involvement shall mean that following discharge from a CBA-funded program the juvenile had Juvenile Probation intake as a result of:
 - (1) Running away or a technical probation violation
 - (2) A new law violation
 - (3) Warrant
 - (a) although running away/technical violations are included in the definition of future system involvement, running/away technical violations shall be reported separately from a new law violation.
 - (b) although warrants are included in the definition of future system involvement, warrants shall be reported separately from a new law violation.

III. Detention

(A) Future System Involvement shall mean that following discharge from a CBA-funded program the juvenile was booked into a staff secure or secure detention center.

Appendix 2

Analysis Results

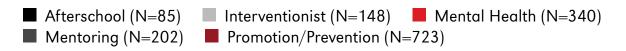
1. General Notes:

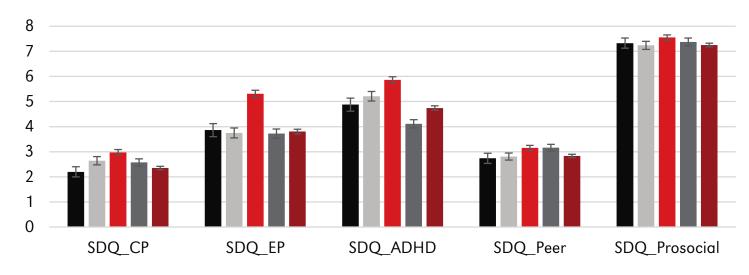
Data for 1692 participants at intake and 602 participants at follow-up were provided. However, some participants were duplicate records and others had no identifying ID number (149 at intake and 50 at follow-up). This left 1543 participants at intake and 552 participants at follow-up. Moreover, for 90 follow-up participants there was no obvious intake data. As such, analysis of the population characteristics is based on 1543 intake participants (checked also for the 462 participants for whom there are intake and follow-up data). Analyses of program impact are based on the 462 participants.

2. Population Characterizations

Client groups were characterized with a battery of standard questionnaire measures assessing impairments in emotional and behavioral functioning (SDQ), emotional callousness/ unemotionality (ICU), Substance Use (SU), and trauma levels (BTSSY).

2.1 Impairments in emotional and behavioral functioning (SDQ)





The MANOVA on the program type revealed highly significant differences in program type ([F=7.46, p<0.001; pn² =0.03]. Specifically, there were significant differences in conduct problems [F(4,1414)=5.83, p<0.001; pn² =0.016], emotional problems [F(4,1414)=21.80 p<0.001; pn² =0.06], hyperactivity [F(4,1414)=18.77, p<0.001; pn² =0.05], and peer problems [F(4,1414)=3.04, p=0.02; pn² =0.009].

Conduct problems: Bonferroni follow-up analyses revealed that this reflected higher levels of conduct problems in the Mental Health program relative to the Afterschool and Promotion/ Prevention programs (mean difference=0.70 and 0.61, p=0.054 and p<0.001, respectively).

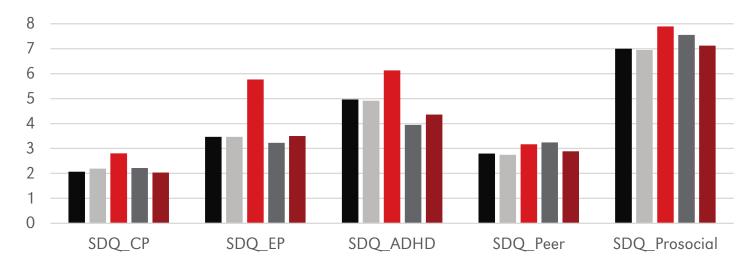
Emotional problems: Bonferroni follow-up analyses revealed that this reflected higher levels of emotional problems in the youth in the Mental Health programs relative to all other programs (mean difference=1.36 to 1.53, p<0.001). There were no significant differences between the other programs.

Hyperactivity: Bonferroni follow-up analyses revealed that this reflected higher levels of hyperactivity in the youth in the Mental Health programs relative to all other programs (mean difference=0.95 to 1.64, p=01 to p<0.001; note for comparison with Interventionist, mean difference = 0.63, p=0.06). Participants in the Mentoring programs also reported lower hyperactivity symptoms than those in the Interventionist and Promotion/Prevention programs (mean difference=-1.00 & -0.53, p<0.001 & p=0.06 respectively). There were no other significant differences between programs.

Peer problems: None of the Bonferroni follow-up comparisons were significant.

Conclusions: The Mental Health program takes in youth with particularly significantly greater emotional problems and hyperactivity. The Mentoring program takes on youth with significantly less hyperactivity than the other programs. Note: These findings were also seen at intake within the participants for whom intake and follow-up data were available (see below). Participants in the Mental Health programs had greater emotional problems and hyperactivity.

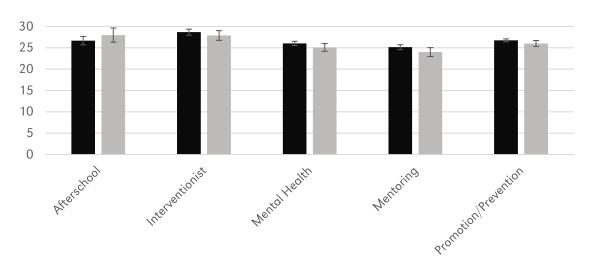




2.2 Callous and Unemotional Traits (ICU)

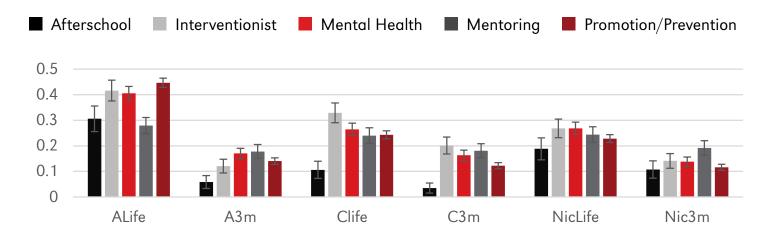
For the entire intake sample, there was a main effect of program (F(4,1334)=3.827, p=0.004); see below. Bonferroni follow-up analyses revealed that this reflected increase ICU level in the participants in the Interventionist program relative to the Mental health and Mentoring programs (mean difference=2.64 & 3.51, p=0.02 & p=0.002). There were no other significant differences between programs. There was also no effect of program for only those with intake and follow up data (F(4,404)=2.02, p=0.091).

■ All ■ Participants with intake and follow-up data



2.3 Substance Use (SU)

The MANOVA on the program type revealed highly significant differences in program type ([F=4.16, p=0.001; pn² =0.02]. Specifically, there were significant program differences in all variables except life time nicotine use [F(4,1459)=2.42 to 6.68, p=0.05 to p<0.001, pn²=0.007 & 0.018).



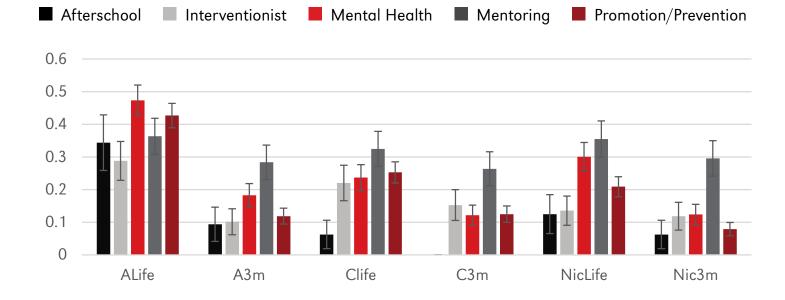
Lifetime alcohol: Bonferroni follow-up analyses revealed that this reflected lower levels of lifetime alcohol problems in the youth in the Mentoring programs relative to the Interventionist, Mental Health, and Promotion/Prevention programs (mean difference=-0.17, -0.16 & -0.19, p=0.02, 0.003 & <0.001 respectively). There were no other program differences.

Three-month alcohol: None of the Bonferroni follow-up comparisons were significant. Lifetime cannabis: Bonferroni follow-up analyses revealed that this reflected higher levels of lifetime cannabis problems in the youth in the Interventionist programs relative to the Afterschool and Mentoring programs (mean difference=0.22 & 0.13, p=0.002 & 0.05). All other comparisons were non-significant.

Three-month cannabis: Bonferroni follow-up analyses revealed that this reflected lower levels of three-month cannabis in the youth in the Afterschool programs relative to the Interventionist, Mental Health, and Mentoring programs (mean difference=-0.17, -0.12 & -0.16, p=0.005, 0.04 & 0.008 respectively). All other comparisons were non-significant.

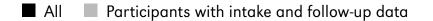
Three-month nicotine: Bonferroni follow-up analyses revealed that this reflected higher levels of lifetime nicotine usage in the youth in the Mentoring programs relative to the Promotion/Prevention programs (mean difference=0.09, p=0.02). All other comparisons were non-significant.

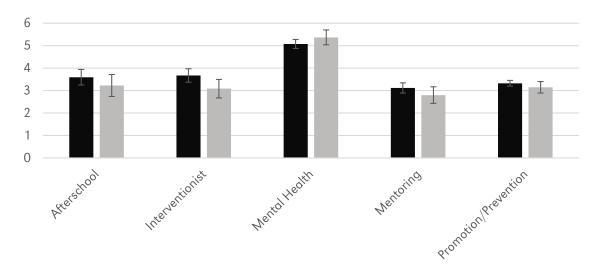
Note: These findings were also largely seen at intake within the participants for whom intake and follow-up data were available (see below). Participants in the Mental Health programs had greater emotional problems and hyperactivity.



2.4 Trauma Symptoms (BTSSY)

For the entire intake sample, there was a main effect of program (F(4,1498)=16.87, p<0.001); see below. Bonferroni follow-up analyses revealed that this reflected increased BTSSY scores in the participants in the Mental Health programs relative to all other programs (mean difference=1.41 to 1.96, p=0.005 to <0.001). There were no other significant differences between programs. There results were mirrored in the intake data from the participants with intake and follow-up data (main effect of program: F(4,450)=10.41, p<0.001 and again the participants in the Mental Health programs had higher BTSSY scores than the participants in the other programs).





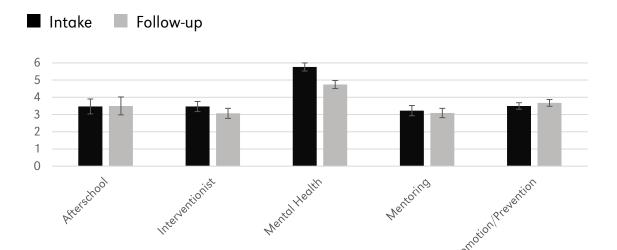
3. Change

Note: Given the significant differences in the problems facing the clients entering into the different programs, it is important to treat any between-program comparisons with caution.

3.1 Impairments in emotional and behavioral functioning (SDQ)

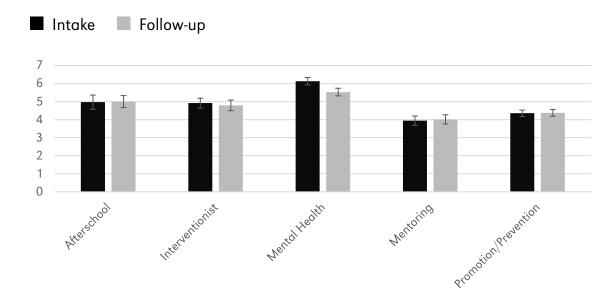
3.1.1. Emotional problems

There was significant reduction in emotional problems from intake to follow-up (F(1,445)=4.18, p=0.04). This main effect primarily reflected a Time (intake vs follow-up) by Program interaction (F(4,445)=4.68, p=0.001) – Reduction in emotional problems was greater for those in the Mental Health programs.



3.1.2. Hyperactivity

There was trend Time (intake vs follow-up) by Program interaction (F(4,445)=2.00, p=0.094) – again reduction in emotional problems was greater for those in the Mental Health programs (and indeed highly significant when considering those programs alone; (F(1,113)=10.88, p=0.001).



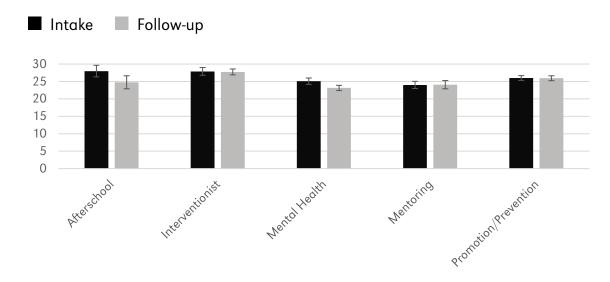
3.1.3: Conduct problems, Peer Problems and Prosocial Behavior

There were no significant main effects of Time or Time x Program interactions for Conduct Problems (F(1,445)=0.40, p=0.527 & F(4,445)=1.61, p=0.17), Peer Problems (F(1,435)=1.05, p=0.31 & F(4,435)=0.86, p=0.49), or Prosocial Behavior (F(1,446)=0.04, p=0.84 & F(4,446)=0.33, p=0.86); see Table below.

		Intake	Follow-up	Intake	Follow-up	Intake	Follow-up
Program		СР	СР	Peer	Peer	Prosocial	Prosocial
Afterschool	Mean	2,06	2,22	2,79	2,97	7,00	6,88
	sd	1,459	1,791	1,934	1,596	1,789	2,472
Interventionist	Mean	2,19	2,34	2,75	3,11	6,95	7,09
	sd	1,597	1,978	1,372	1,566	1,833	1,931
Mental Health	Mean	2,80	2,32	3,17	3,23	7,89	8,05
	sd	2,049	2,004	1,982	1,759	1,536	1,846
Mentoring	Mean	2,22	2,13	3,24	3,08	7,55	7,53
	sd	2,036	2,022	2,131	1,883	2,113	2,286
Promotion/Prevention	Mean	2,04	2,03	2,89	3,04	7,12	7,14
	sd	2,029	1,829	1,868	1,917	2,082	2,215

3.2 Callous and Unemotional Traits (ICU)

There was a significant main effects of Time but no Time x Program interaction for ICU score (F(1,374)=6.19, p=0.013 & F(4,374)=1.61, p=0.17). As can be seen, the main effect of Time was driven by the Afterschool and Mental Health programs.

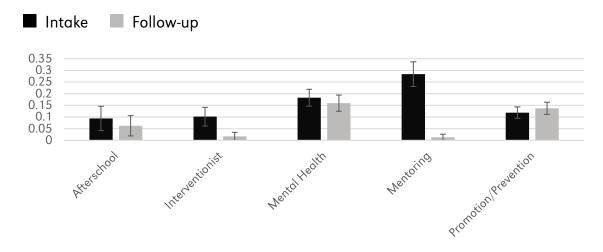


3.3 Substance use

This was examined for the 3-month use variables.

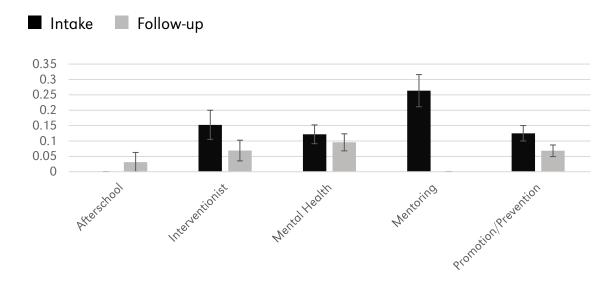
3.3.1: Three-month alcohol use

There was a significant main effect of Time and a Time x Program interaction for three month alcohol use (F(1,445)=11.54, p=0.001 & F(4,445)=6.72, p<0.001). However, Bonferroni corrected follow-up tests did not reveal significant differences between the programs.



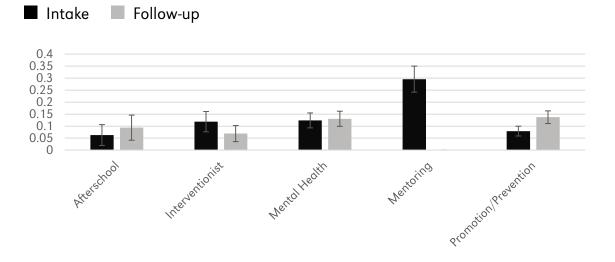
3.3.2: Three-month cannabis use

There was a significant main effect of Time and a Time x Program interaction for three month cannabis use (F(1,444)=18.36, p<0.001 & F(4,444)=7.43, p<0.001). However, Bonferroni corrected follow-up tests again did not reveal significant differences between the programs.



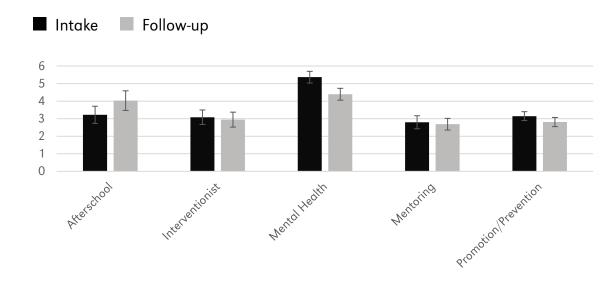
3.3.3: Three-month nicotine use

There was a significant main effect of Time and a Time x Program interaction for three month nicotine use (F(1,442)=6.06, p=0.014 & F(4,442)=12.24, p<0.001). However, Bonferroni corrected follow-up tests again did not reveal significant differences between the programs.



3.4 Trauma Symptoms (BTSSY)

There was no significant main effect of Time but there was a significant Time x Program interaction for BTSSY symptoms (F(1,444)=1.06, p=0.305 & F(4,444)=2.53, p=0.04). Bonferroni corrected follow-up tests indicated that BTSSY symptom decline was significantly greater for participants in the Mental Health programs than those in the Interventionist, Mentoring, and Promotion/ Prevention programs (mean difference = 1.9 to 2.1, p=0.001).



Appendix 3

Analysis Results – Program Level Addendum

Programs marked in red in the table had fewer than 10 youth participating and were therefore dropped from the analysis. The individual program results are provided to allow programs to review changes from intake to discharge for each variable assessed. Please note that as sample sizes for individual programs are small, the results must be interpreted with caution. Dr. Blair conducted 50 individual repeated measures ANOVAs on these data, although no correction for multiple comparison was conducted, as such some of the results likely reflect chance findings. Significant findings are included below by program type.

Results presented in the table include the mean (or average) score by variable, the sample size (n), and the standard deviation (variation in the scores). These data are presented for each variable (variable definitions are included in the table key below) collected at both intake and discharge. As some programs reported smaller sample sizes, these data and comparisons between intake and discharge should be approached cautiously.

Afterschool Programs

There was relatively little impact on the indices measures except that there was a decline in ICU (callous and emotional traits) scores (p=0.06) – irrespective of program.

Interventionist

Due to small sample sizes, only one school interventionist program was considered. Results suggest decreases in alcohol use among the High School / Middle School Interventionist Hall County Program.

Mental Health

Mental Health programs in general were associated with decreases in conduct problems (0.06), emotional problems, hyperactivity, ICU scores and Trauma symptom severity. These results were not significantly differentiated by individual program (four programs were considered) with the trend level difference for trauma symptom decline (this was less for the Family Service School Therapy Lancaster County).

Mentoring

Mentoring programs were associated with reductions in peer problems, particularly among the Goal Setting Douglas County Program and the Friends Program Buffalo County¹.

We also found associated with reductions in alcohol and cannabis use, particularly the Bridge to Prosperity Douglas County Program. This program's clients also had the most severe problems at intake.

Further, mentoring was associated with reductions in nicotine use, particularly the Buffalo County Friends Program and the Bridge to Prosperity Douglas County Program (both Programs whose clients at intake had the most severe problems).

Promotion/Prevention Paradigms

Findings suggest promotion/prevention programs were associated with declines in cannabis use, particularly for the Urban B.O.L.T. Douglas County Program, the Malone Community Center Lancaster County Program, and the Behavioral Health Sheridan County Program.

Further, we found associated with declines in trauma related symptoms, particularly Alliance Public Schools Job Coach Box Butte County Program, Malone Community Center Lancaster County Program, and the Behavioral Health Sheridan County Program.

Tables Key

SDQ/CP: Conduct Problems SDQ/EP: Emotional Problems SDQ/ADHD: Hyperactivity SDQ/Peer: Peer Problems

SDQ/Prosocial: Prosocial Problems ICU: Callous and Unemotional Traits

Alife: Lifetime Alcohol Use
A3m: 3-month Alcohol Use
Clife: Lifetime Cannabis Use
C3m: 3-month Cannabis Use
NicLife: Lifetime Nicotine Use
Nic3m: 3-month Nicotine Use
BTsyTot: Trauma Symptoms

¹ This program was not funded for FY20-21 or FY21-22 but had submitted assessment tool data.

Table 1.1: Conduct Problems and Emotional Problems (pages 66-68)

	Program	Program Name,		Intake	Follow-up	Intake	Follow-up
PNameNumber	Туре	County/Tribe		SDQ_CP	SDQ_CP	SDQ_EP	SDQ_EP
11,00	Afterschool	Zone Homework, Adams	Mean	2.0000	2.1429	3.1429	3.1905
		County	N	20	21	21	21
			Std. Deviation	1.48678	1.74028	2.51567	2.61952
12,00	Afterschool	Tutoring Services, Madison	Mean	2.1818	2.3636	4.0909	4.0909
		County	N	11	11	11	11
			Std. Deviation	1.47093	1.96330	2.25630	3.47720
21,00	Promotion/	Horizon Life Skills, Adams	Mean	1.8049	2.0000	3.9773	4.2000
	Prevention	County	N	41	42	44	45
			Std. Deviation	1.69144	1.62301	2.69788	2.52802
22,00	Promotion/	Alliance Public Schools Job	Mean	1.4000	1.3000	4.4000	3.5000
	Prevention	Coach, Box Butte County	N	10	10	10	10
			Std. Deviation	1.50555	1.82878	2.71621	2.36878
23,00 Promotion/ Prevention	Promotion/	Teen Citizen Academy,	Mean	0.5000	0.5000	1.7500	1.7500
	Prevention	Dakota County	N	4	4	4	4
		Std. Deviation	0.57735	1.00000	2.36291	2.36291	
24,00	Promotion/	Skill Builders, Dodge	Mean	1.7500	1.7500	4.2500	4.2500
	Prevention	County	N	8	8	8	8
			Std. Deviation	1.48805	1.98206	3.28416	3.57571
25,00	Promotion/	Healing Circulos Facilitator,	Mean	1.5000	1.8333	2.0000	2.1667
	Prevention	Douglas County	N	6	6	6	6
			Std. Deviation	1.37840	1.94079	1.54919	1.94079
26,00	Promotion/	Urban B.O.L.T., Douglas	Mean	2.3913	2.2500	2.2083	2.2917
	Prevention	County	N	23	24	24	24
			Std. Deviation	1.55911	2.00543	1.74404	2.13621
28,00	Promotion/	ACCC Serving Immigrant	Mean	2.1892	1.9730	4.2973	4.8378
	Prevention	and Refugee Youth, Lancaster County	N	37	37	37	37
		Editiouster County	Std. Deviation	2.15816	1.64125	2.36719	2.51124
29,00	Promotion/	Strenghtfinder Coaching,	Mean	4.0000	3.2000	2.6000	2.4000
	Prevention	Lancaster County	N	5	5	5	5
			Std. Deviation	2.91548	2.04939	1.81659	2.40832
291,00	Promotion/	Malone Community Center,	Mean	2.2381	2.1250	2.8261	3.0000
	Prevention	Lancaster County	N	21	24	23	23
			Std. Deviation	2.84438	2.15311	2.28935	2.59370

Table 1.1: Conduct Problems and Emotional Problems (pages 66-68)

PNameNumber	Program	Program Name,		Intake	Follow-up	Intake	Follow-up
rivamenumber	Туре	County/Tribe		SDQ_CP	SDQ_CP	SDQ_EP	SDQ_EP
292,00	Promotion/	Changing Behaviors	Mean	3.6667	3.6667	5.3333	5.3333
	Prevention	Alternative Program,	N	3	3	3	3
		Lincoln County	Std. Deviation	1.52753	1.15470	1.52753	2.08167
293,00	Promotion/	Behavioral Health,	Mean	1.7500	2.0833	3.1538	3.3077
	Prevention	Prevention Sheridan County	N	12	12	13	13
			Std. Deviation	2.37888	2.10878	2.60916	2.89783
31,00	Interventionist	Dawes County School	Mean	1.3333	2.5000	4.3333	3.5000
		Social Work Program, Dawes County	N	3	2	3	2
		Dawes county	Std. Deviation	0.57735	2.12132	2.08167	0.70711
32,00	Interventionist	High school / Middle	Mean	2.3750	2.5208	3.3542	3.0417
		school Interventionist, Hall County	N	48	48	48	48
		County	Std. Deviation	1.69637	2.07302	2.33830	2.36066
33,00	Interventionist	School Interventionist,	Mean	1.5714	1.0000	3.5000	2.8571
		Saline County	N	7	8	8	7
			Std. Deviation	0.78680	0.92582	1.92725	1.46385
41,00	Mental Health	Missing Youth Services Therapist, Douglas County	Mean	2.0000	2.0000	5.0000	5.0000
			N	1	1	1	1
			Std. Deviation				
42,00	Mental Health	On-Site Mental Health	Mean	2.7500	1.2500	5.5000	4.2500
		Therapy, Howard County	N	4	4	4	4
			Std. Deviation	1.25831	1.25831	2.08167	2.06155
43,00	Mental Health	Family Service School	Mean	2.7879	2.2188	6.1471	5.5000
		Therapy, Lancaster County	N	33	32	34	34
			Std. Deviation	1.70949	1.71773	2.24462	2.20537
45,00	Mental Health	Pilots of Change, Lancaster	Mean	2.5000	2.5000	6.3333	4.0000
		County	N	6	6	6	6
			Std. Deviation	1.64317	2.58844	1.21106	1.41421
46,00	Mental Health	School based therapy,	Mean	3.3846	2.9286	7.6429	6.2143
		Lancaster County	N	13	14	14	14
			Std. Deviation	2.50128	2.26900	1.64584	2.72251
47,00	Mental Health	Mental Health Services,	Mean	2.0000	3.0000	7.0000	3.0000
		Platte County	N	2	2	2	2
			Std. Deviation	0.00000	2.82843	1.41421	4.24264

Table 1.1: Conduct Problems and Emotional Problems (pages 66-68)

				· • · · · · · · · · · · · · · · · · · ·	9	<u> </u>	
DNI Ni i	Program	Program Name,		Intake	Follow-up	Intake	Follow-up
PNameNumber	Туре	County/Tribe		SDQ_CP	SDQ_CP	SDQ_EP	SDQ_EP
48,00	Mental Health	Post-Crisis Response	Mean	4.5000	4.5000	4.5000	3.5000
		Services, Sarpy County	N	2	2	2	2
			Std. Deviation	4.94975	6.36396	6.36396	4.94975
49,00	Mental Health	Saunders County In-Home	Mean	1.9231	2.1538	4.9231	4.8462
		Therapy, Saunders County	N	13	13	13	13
			Std. Deviation	1.38212	1.72463	3.17442	2.57702
491,00	Mental Health	School Based Behavioral	Mean	2.9459	2.1389	4.9737	3.8421
		Health Program, Saunders	N	37	36	38	38
		County	Std. Deviation	2.37985	1.97343	2.38788	2.41086
51,00	Mentoring	Goals Setting , Douglas	Mean	4.3636	4.0909	4.6364	3.8182
		County	N	11	11	11	11
			Std. Deviation	2.20330	1.75810	2.97566	2.18258
52,00	Mentoring	Friends Program, Buffalo	Mean	2.0000	1.7059	3.1250	2.8824
		County	N	17	17	16	17
			Std. Deviation	2.52488	2.61641	2.70493	2.61922
53,00	Mentoring	Bridge to Prosperity,	Mean	1.5250	1.5366	2.6429	2.5814
		Douglas County	N	40	41	42	43
			Std. Deviation	1.26060	1.28642	1.88475	1.94242
54,00	Mentoring	Community Connections,	Mean	3.5000	3.8333	5.3333	6.0000
		Lincoln County	N	6	6	6	6
			Std. Deviation	1.37840	1.94079	3.93277	2.75681
Total	All Program	All Programs State of	Mean	2.2883	2.1622	4.0109	3.7489
	Types	Nebraska	N	444	450	457	458
			Std. Deviation	1.96533	1.92346	2.66267	2.60118

Table 1.2: Hyperactivity and Peer Problems (pages 69-71)

	D	D		Intake	Follow-up	Intake	Follow-up
PNameNumber	Program Type	Program Name, County/Tribe		SDQ_ ADHD	SDQ_ ADHD	SDQ_ Peer	SDQ_ Peer
11,00	Afterschool	Zone Homework, Adams	Mean	4.7895	5.1905	2.8333	3.0476
		County	N	19	21	18	21
			Std. Deviation	2.41704	1.88730	2.17607	1.49921
12,00	Afterschool	Tutoring Services, Madison	Mean	5.2727	4.6364	2.7273	2.8182
		County	N	11	11	11	11
			Std. Deviation	1.61808	1.91169	1.55505	1.83402
21,00	Promotion/	Horizon Life Skills, Adams	Mean	4.6512	4.8889	2.5556	2.7045
	Prevention	County	N	43	45	45	44
			Std. Deviation	2.30820	2.49747	2.26189	2.14128
22,00	Promotion/	Alliance Public Schools Job	Mean	3.9000	4.1000	3.3000	3.0000
	Prevention	Coach, Box Butte County	N	10	10	10	10
			Std. Deviation	2.18327	2.13177	2.26323	1.88562
23,00	Promotion/	Teen Citizen Academy,	Mean	2.6667	2.0000	2.2500	2.0000
	Prevention	Dakota County	N	3	4	4	4
			Std. Deviation	3.05505	2.44949	2.06155	2.16025
24,00	Promotion/	Skill Builders, Dodge	Mean	4.6250	4.1250	2.2500	1.8750
	Prevention	County	N	8	8	8	8
			Std. Deviation	2.82527	2.53194	1.03510	0.83452
25,00	Promotion/	Healing Circulos Facilitator,	Mean	3.8000	3.1667	4.0000	3.0000
	Prevention	Douglas County	N	5	6	4	6
			Std. Deviation	1.78885	1.94079	0.81650	1.26491
26,00	Promotion/	Urban B.O.L.T., Douglas	Mean	4.2500	3.5000	3.1304	3.0800
	Prevention	County	N	24	24	23	25
			Std. Deviation	1.56733	1.95604	1.39167	1.52534
28,00	Promotion/	ACCC Serving Immigrant	Mean	4.4054	5.0811	3.2162	3.4595
	Prevention	and Refugee Youth,	N	37	37	37	37
		Lancaster County	Std. Deviation	2.47722	2.60745	1.70188	1.81956
29,00	Promotion/	Strenghtfinder Coaching,	Mean	3.4000	2.6000	3.2000	3.2000
	Prevention	Lancaster County	N	5	5	5	5
			Std. Deviation	2.07364	2.07364	2.38747	3.27109

Table 1.2: Hyperactivity and Peer Problems (pages 69-71)

	D	Dunganan Nama		Intake	Follow-up	Intake	Follow-up
PNameNumber	Program Type	Program Name, County/Tribe		SDQ_	SDQ_	SDQ_	SDQ_
	.570			ADHD	ADHD	Peer	Peer
291,00	Promotion/	Malone Community Center,	Mean	3.4167	3.3333	2.9130	3.6957
	Prevention	Lancaster County	N	24	24	23	23
			Std. Deviation	1.95419	2.27781	1.92857	1.96410
292,00	Promotion/	Changing Behaviors	Mean	8.3333	7.6667	2.6667	4.0000
	Prevention	Alternative Program,	N	3	3	3	3
		Lincoln County	Std. Deviation	0.57735	1.52753	1.15470	1.00000
293,00	Promotion/	Behavioral Health,	Mean	5.6154	5.2308	2.3077	2.5385
	Prevention	Sheridan County	N	13	13	13	13
			Std. Deviation	2.56705	2.52170	1.70219	2.02548
31,00	Interventionist	Dawes County School	Mean	5.3333	6.0000	2.6667	4.0000
		Social Work Program,	N	3	2	3	2
		Dawes County	Std. Deviation	1.52753	0.00000	1.52753	1.41421
32,00	Interventionist	High school / Middle school Interventionist, Hall County	Mean	4.9583	4.7917	2.7917	3.0625
			N	48	48	48	48
			Std. Deviation	2.20211	2.27809	1.36769	1.68101
33,00	Interventionist	School Interventionist, Saline County	Mean	4.3750	3.7143	2.6250	2.5714
			N	8	7	8	7
			Std. Deviation	1.18773	2.81154	1.40789	1.13389
41,00	Mental Health	Missing Youth Services	Mean	7.0000		3.0000	3.0000
		Therapist, Douglas County	N	1		1	1
			Std. Deviation				
42,00	Mental Health	On-Site Mental Health	Mean	6.2500	5.0000	2.5000	3.5000
		Therapy, Howard County	N	4	4	4	4
			Std. Deviation	1.50000	0.00000	1.91485	1.91485
43,00	Mental Health	Family Service School	Mean	6.4857	6.2571	3.4545	3.4688
		Therapy, Lancaster County	N	35	35	33	32
			Std. Deviation	1.96096	2.18744	2.20923	1.56544
45,00	Mental Health	Pilots of Change, Lancaster	Mean	6.3333	4.8333	3.5000	2.3333
		County	N	6	6	6	6
			Std. Deviation	2.16025	3.65605	1.04881	1.36626

Table 1.2: Hyperactivity and Peer Problems (pages 69-71)

	D	December Name		Intake	Follow-up	Intake	Follow-up
PNameNumber	Program Type	Program Name, County/Tribe		SDQ_ ADHD	SDQ_ ADHD	SDQ_ Peer	SDQ_ Peer
46,00	Mental Health	School based therapy,	Mean	7.0714	6.5714	2.9286	3.3571
		Lancaster County	N	14	14	14	14
			Std. Deviation	2.16490	1.86936	1.85904	1.69193
47,00	Mental Health	Mental Health Services,	Mean	5.0000	2.5000	1.5000	2.5000
		Platte County	N	2	2	2	2
			Std. Deviation	0.00000	3.53553	0.70711	0.70711
48,00	Mental Health	Post-Crisis Response	Mean	5.0000	4.5000	3.0000	2.5000
		Services, Sarpy County	N	2	2	2	2
			Std. Deviation	5.65685	6.36396	2.82843	3.53553
49,00	Mental Health	Saunders County In-Home	Mean	5.2308	5.0769	3.6923	3.9167
		Therapy, Saunders County	N	13	13	13	12
			Std. Deviation	2.80339	1.60528	2.68901	2.02073
491,00	Mental Health	School Based Behavioral	Mean	5.8158	5.0000	2.9474	2.9730
		Health Program, Saunders County	N	38	38	38	37
		·	Std. Deviation	1.94318	2.09246	1.72341	1.86319
51,00	Mentoring	Goals Setting , Douglas	Mean	5.6364	5.5455	5.0909	3.8182
		County	N	11	11	11	11
			Std. Deviation	1.68954	1.12815	1.70027	1.25045
52,00	Mentoring	Friends Program, Buffalo	Mean	4.1250	3.5294	2.8125	2.5294
		County	N	16	17	16	17
			Std. Deviation	2.44609	2.69531	2.40052	2.40098
53,00	Mentoring	Bridge to Prosperity,	Mean	3.1463	3.4474	2.6585	2.7907
		Douglas County	N	41	38	41	43
			Std. Deviation	1.93082	1.76601	1.60639	1.58201
54,00	Mentoring	Community Connections,	Mean	6.6667	6.1667	5.5000	5.3333
		Lincoln County	N	6	6	6	6
			Std. Deviation	1.21106	1.83485	2.42899	1.50555
Total	All Program	All Programs State of	Mean	4.8675	4.6784	2.9956	3.0881
	Types	Nebraska	N	453	454	450	454
			Std. Deviation	2.34618	2.38883	1.89360	1.81025

Table 1.3: Prosocial Problems and Callous and Unemotional Traits (pages 72-74)

	6	D N		Intake	Follow-up	Intake	Follow-up
PNameNumber	Program Type	Program Name, County/Tribe		SDQ_	SDQ_	ICUTotalJB	ICUTotalJB
	Туре	County/ ITibe		Prosocial	Prosocial		
11,00	Afterschool	Zone Homework, Adams	Mean	7.1000	7.5238	25.5000	22.5500
		County	N	20	21	16	20
			Std. Deviation	1.77408	2.06444	8.43801	9.63806
12,00	Afterschool	Tutoring Services, Madison	Mean	6.8182	5.6364	31.5455	28.7273
		County	N	11	11	11	11
			Std. Deviation	1.88776	2.80260	7.90397	11.09136
21,00	Promotion/	Horizon Life Skills, Adams	Mean	7.4000	7.8864	24.1818	24.3659
	Prevention	County	N	45	44	44	41
			Std. Deviation	1.80151	1.64551	7.33983	7.23103
22,00	Promotion/	Alliance Public Schools Job	Mean	8.2000	8.3000	23.8000	21.5556
	Prevention	Coach, Box Butte County	N	10	10	10	9
			Std. Deviation	1.68655	1.88856	9.64711	10.85255
23,00	Promotion/	Teen Citizen Academy, Dakota County	Mean	8.2500	9.0000	15.3333	13.0000
	Prevention		N	4	4	3	3
			Std. Deviation	1.25831	0.81650	7.63763	7.00000
24,00	Promotion/	Skill Builders, Dodge	Mean	7.6250	7.5000	22.6250	23.8750
	Prevention	County	N	8	8	8	8
			Std. Deviation	1.76777	2.07020	9.08590	7.90005
25,00	Promotion/	Healing Circulos Facilitator,	Mean	7.3333	7.3333	29.6667	27.0000
	Prevention	Douglas County	N	6	6	3	4
			Std. Deviation	2.06559	1.63299	11.84624	8.28654
26,00	Promotion/	Urban B.O.L.T., Douglas	Mean	5.8750	6.6522	28.7143	28.3478
	Prevention	County	N	24	23	21	23
			Std. Deviation	2.27104	2.22810	8.60316	8.58968
28,00	Promotion/	ACCC Serving Immigrant	Mean	7.2432	6.6757	26.0000	26.7568
	Prevention	and Refugee Youth, Lancaster County	N	37	37	37	37
		Luncuster County	Std. Deviation	2.04675	1.97279	7.74597	7.10401
29,00	Promotion/	Strenghtfinder Coaching,	Mean	6.6000	6.8000	24.2500	27.0000
	Prevention	Lancaster County	N	5	5	4	4
			Std. Deviation	2.07364	1.92354	11.87083	13.97617

Table 1.3: Prosocial Problems and Callous and Unemotional Traits (pages 72-74)

	Due surer	Duo annum Nama		Intake	Follow-up	Intake	Follow-up
PNameNumber	Program Type	Program Name, County/Tribe		SDQ_	SDQ_	ICUTotalJB	ICUTotalJB
	.,,,,,	Journey, miles		Prosocial	Prosocial		
291,00	Promotion/	Malone Community Center,	Mean	6.8750	6.0870	28.2632	25.4375
	Prevention	Lancaster County	N	24	23	19	16
			Std. Deviation	2.77116	3.30169	13.15228	13.55467
292,00	Promotion/	Changing Behaviors	Mean	6.6667	6.3333	34.3333	30.6667
	Prevention	Alternative Program, Lincoln County	N	3	3	3	3
		Lincoln County	Std. Deviation	0.57735	2.51661	9.01850	5.68624
293,00	Promotion/	Behavioral Health,	Mean	7.3846	7.2500	28.0833	29.6154
	Prevention	Sheridan County	N	13	12	12	13
			Std. Deviation	1.80455	1.95982	6.14164	8.74203
31,00	Interventionist	Dawes County School	Mean	7.6667	8.0000	25.3333	29.0000
		Social Work Program,	N	3	2	3	2
		Dawes County	Std. Deviation	1.52753	1.41421	6.02771	7.07107
32,00	Interventionist	High school / Middle	Mean	6.8125	6.8542	28.4375	27.7917
		school Interventionist, Hall County	N	48	48	48	48
			Std. Deviation	1.89800	1.93500	8.72489	6.58483
33,00	Interventionist	School Interventionist,	Mean	6.8750	8.3750	27.5000	26.8000
		Saline County	N	8	8	4	5
			Std. Deviation	1.80772	1.40789	5.80230	4.96991
41,00	Mental Health	Missing Youth Services	Mean	5.0000	5.0000	35.0000	35.0000
		Therapist, Douglas County	N	1	1	1	1
			Std. Deviation				
42,00	Mental Health	On-Site Mental Health	Mean	7.5000	8.2500	24.2500	22.0000
		Therapy, Howard County	N	4	4	4	4
			Std. Deviation	0.57735	0.50000	4.64579	2.94392
43,00	Mental Health	Family Service School	Mean	7.9118	8.0606	26.2414	23.3125
		Therapy, Lancaster County	N	34	33	29	32
			Std. Deviation	1.69433	2.29046	10.40829	9.10313
45,00	Mental Health	Pilots of Change, Lancaster	Mean	8.5000	8.6667	22.0000	21.4000
		County	N	6	6	6	5
			Std. Deviation	1.04881	1.50555	6.19677	7.02140

Table 1.3: Prosocial Problems and Callous and Unemotional Traits (pages 72-74)

	Dun aureum	Dunamana Nama		Intake	Follow-up	Intake	Follow-up
PNameNumber	Program Type	Program Name, County/Tribe		SDQ_	SDQ_	ICUTotalJB	ICUTotalJB
	Турс	County/ ITIDE		Prosocial	Prosocial		
46,00	Mental Health	School based therapy,	Mean	8.5000	8.8571	26.9231	26.5000
		Lancaster County	N	14	14	13	14
			Std. Deviation	1.28602	1.16732	10.38799	9.51719
47,00	Mental Health	Mental Health Services,	Mean	9.0000	7.0000	24.0000	26.0000
		Platte County	N	2	2	2	1
			Std. Deviation	1.41421	1.41421	1.41421	
48,00	Mental Health	Post-Crisis Response	Mean	5.0000	5.0000	39.5000	30.5000
		Services, Sarpy County	N	2	2	2	2
			Std. Deviation	2.82843	2.82843	24.74874	13.43503
49,00	Mental Health	Saunders County In-Home	Mean	7.9231	7.6923	22.8000	22.4167
		Therapy, Saunders County	N	13	13	10	12
			Std. Deviation	1.18754	1.37747	4.68568	5.46823
491,00	Mental Health	School Based Behavioral	Mean	7.7632	8.0789	23.5758	21.6486
		Health Program, Saunders County	N	38	38	33	37
		County	Std. Deviation	1.47839	1.69867	8.02352	6.93308
51,00	Mentoring	Goals Setting , Douglas	Mean	5.5455	5.7273	30.9000	28.9091
		County	N	11	11	10	11
			Std. Deviation	2.58316	3.03615	4.74810	9.94439
52,00	Mentoring	Friends Program, Buffalo	Mean	7.6471	8.2353	21.0769	19.0625
		County	N	17	17	13	16
			Std. Deviation	2.02920	2.07754	11.80015	11.18015
53,00	Mentoring	Bridge to Prosperity,	Mean	8.0714	7.7442	23.1429	24.4516
		Douglas County	N	42	43	35	31
			Std. Deviation	1.77232	2.05974	6.07862	7.13133
54,00	Mentoring	Community Connections,	Mean	6.8333	7.3333	27.5000	27.2000
		Lincoln County	N	6	6	4	5
			Std. Deviation	1.32916	1.50555	7.50555	10.03494
Total	All Program	All Programs State of	Mean	7.3399	7.4132	25.9167	25.0694
	Types	Nebraska	N	459	455	408	418
			Std. Deviation	1.94744	2.15087	8.81577	8.67851

Table 1.4: Lifetime Alcohol Use and 3-month Alcohol Use (pages 75-77)

PNameNumber	Program	Program Name,		Intake	Follow-up	Intake	Follow-up
rivamenumber	Туре	County/Tribe		ALife	ALife	A3m	A3m
11,00	Afterschool	Zone Homework, Adams	Mean	0.3500	0.3333	0.1053	0.0952
		County	N	20	21	19	21
			Std. Deviation	0.48936	0.48305	0.31530	0.30079
12,00	Afterschool	Tutoring Services, Madison	Mean	0.2727	0.2727	0.0909	0.0000
		County	N	11	11	11	11
			Std. Deviation	0.46710	0.46710	0.30151	0.00000
21,00	Promotion/	Horizon Life Skills, Adams	Mean	0.6889	0.6667	0.2222	0.2727
	Prevention	County	N	45	45	45	44
			Std. Deviation	0.46818	0.47673	0.42044	0.45051
22,00	Promotion/	Alliance Public Schools Job	Mean	0.7000	0.5000	0.1111	0.2000
	Prevention	Coach, Box Butte County	N	10	10	9	10
			Std. Deviation	0.48305	0.52705	0.33333	0.42164
23,00	Promotion/	Teen Citizen Academy,	Mean	0.2500	0.2500	0.0000	0.0000
	Prevention	Dakota County	N	4	4	4	4
			Std. Deviation	0.50000	0.50000	0.00000	0.00000
24,00	Promotion/	Skill Builders, Dodge County	Mean	0.6250	0.6250	0.1250	0.0000
	Prevention		N	8	8	8	8
			Std. Deviation	0.51755	0.51755	0.35355	0.00000
25,00	Promotion/	Healing Circulos Facilitator,	Mean	0.5000	0.6667	0.3333	0.1667
	Prevention	Douglas County	N	6	6	6	6
			Std. Deviation	0.54772	0.51640	0.51640	0.40825
26,00	Promotion/	Urban B.O.L.T., Douglas	Mean	0.1200	0.1304	0.0000	0.0435
	Prevention	County	N	25	23	25	23
			Std. Deviation	0.33166	0.34435	0.00000	0.20851
28,00	Promotion/	ACCC Serving Immigrant	Mean	0.1351	0.1892	0.0270	0.1081
	Prevention	and Refugee Youth, Lancaster County	N	37	37	37	37
		Editcuster County	Std. Deviation	0.34658	0.39706	0.16440	0.31480
29,00	Promotion/	Strenghtfinder Coaching,	Mean	0.2000	0.0000	0.0000	0.0000
	Prevention	Lancaster County	N	5	5	5	5
			Std. Deviation	0.44721	0.00000	0.00000	0.00000
291,00	Promotion/	Malone Community Center,	Mean	0.4091	0.0000	0.1739	0.0000
	Prevention	Lancaster County	N	22	24	23	24
			Std. Deviation	0.50324	0.00000	0.38755	0.00000

Table 1.4: Lifetime Alcohol Use and 3-month Alcohol Use (pages 75-77)

					Jugue 7		
PNameNumber	Program Type	Program Name, County/Tribe		Intake ALife	Follow-up ALife	Intake A3m	Follow-up A3m
		• ,					
292,00	Promotion/ Prevention	Changing Behaviors Alternative Program,	Mean	0.3333	0.3333	0.0000	0.0000
	Trevention	Lincoln County	N	3	3	3	3
		, , , , , , , , , , , , , , , , , , , ,	Std. Deviation	0.57735	0.57735	0.00000	0.00000
293,00	Promotion/	Behavioral Health,	Mean	0.6154	0.7692	0.1538	0.3333
	Prevention	Prevention Sheridan County	N	13	13	13	12
			Std. Deviation	0.50637	0.43853	0.37553	0.49237
31,00	Interventionist	Dawes County School	Mean	0.6667	0.0000	0.0000	0.0000
		Social Work Program,	N	3	2	3	2
		Dawes County	Std. Deviation	0.57735	0.00000	0.00000	0.00000
32,00	Interventionist	High school / Middle	Mean	0.2917	0.1667	0.1250	0.0208
		school Interventionist, Hall	N	48	48	48	48
		County	Std. Deviation	0.45934	0.37662	0.33422	0.14434
33,00	Interventionist	School Interventionist,	Mean	0.2500	0.1250	0.0000	0.0000
		Saline County	N	8	8	8	8
		Std. Deviation	0.46291	0.35355	0.00000	0.00000	
41,00	Mental Health	Therapist, Douglas County	Mean	1.0000	1.0000	0.0000	0.0000
			N	1	1	1	1
			Std. Deviation				
42,00	Mental Health	lth On-Site Mental Health Therapy, Howard County	Mean	0.0000	0.0000	0.0000	0.0000
			N	4	4	4	4
			Std. Deviation	0.00000	0.00000	0.00000	0.00000
43,00	Mental Health	Family Service School	Mean	0.5143	0.5429	0.2353	0.1471
		Therapy, Lancaster County	N	35	35	34	34
			Std. Deviation	0.50709	0.50543	0.43056	0.35949
45,00	Mental Health	Pilots of Change, Lancaster	Mean	0.5000	0.8000	0.0000	0.1667
		County	N	6	5	6	6
			Std. Deviation	0.54772	0.44721	0.00000	0.40825
46,00	Mental Health	School based therapy,	Mean	0.6429	0.6429	0.1429	0.2857
		Lancaster County	N	14	14	14	14
			Std. Deviation	0.49725	0.49725	0.36314	0.46881
47,00	Mental Health	Mental Health Services,	Mean	0.0000	0.0000	0.0000	0.0000
		Platte County	N	2	1	2	2
			Std. Deviation	0.00000		0.00000	0.00000

Table 1.4: Lifetime Alcohol Use and 3-month Alcohol Use (pages 75-77)

DNI sum a Ni susa h	Program	Program Name,		Intake	Follow-up	Intake	Follow-up
PNameNumber	Type	County/Tribe		ALife	ALife	A3m	A3m
48,00	Mental Health	Post-Crisis Response	Mean	0.5000	0.5000	0.5000	0.0000
		Services, Sarpy County	N	2	2	2	2
			Std. Deviation	0.70711	0.70711	0.70711	0.00000
49,00	Mental Health	Saunders County In-Home	Mean	0.3333	0.5385	0.1538	0.3077
		Therapy, Saunders County	N	12	13	13	13
			Std. Deviation	0.49237	0.51887	0.37553	0.48038
491,00	Mental Health	School Based Behavioral	Mean	0.4595	0.4474	0.2162	0.1081
		Health Program, Saunders	N	37	38	37	37
		County	Std. Deviation	0.50523	0.50390	0.41734	0.31480
51,00	Mentoring	Goals Setting , Douglas	Mean	0.0909	0.0909	0.0000	0.0000
		County	N	11	11	11	11
			Std. Deviation	0.30151	0.30151	0.00000	0.00000
52,00	Mentoring	Friends Program, Buffalo	Mean	0.1765	0.1176	0.0000	0.0000
		County	N	17	17	17	17
			Std. Deviation	0.39295	0.33211	0.00000	0.00000
53,00	Mentoring	Bridge to Prosperity,	Mean	0.5349	0.0000	0.5000	0.0000
		Douglas County	N	43	43	40	43
			Std. Deviation	0.50468	0.00000	0.50637	0.00000
54,00	Mentoring	Community Connections,	Mean	0.1667	0.1667	0.1667	0.1667
		Lincoln County	N	6	6	6	6
			Std. Deviation	0.40825	0.40825	0.40825	0.40825
Total	All Program	All Programs State of	Mean	0.3996	0.3210	0.1586	0.1009
	Types	Nebraska	N	458	458	454	456
			Std. Deviation	0.49034	0.46736	0.36570	0.30150

Table 1.5: Lifetime Cannabis Use and 3-month Cannabis Use (pages 78-80)

PNameNumber	Program	Program Name,		Intake	Follow-up	Intake	Follow-up
rivamenumber	Туре	County/Tribe		Clife	Clife	C3m	C3m
11,00	Afterschool	Zone Homework, Adams	Mean	0.0476	0.0476	0.0000	0.0476
		County	N	21	21	21	21
			Std. Deviation	0.21822	0.21822	0.00000	0.21822
12,00	Afterschool	Tutoring Services, Madison	Mean	0.0909	0.0909	0.0000	0.0000
		County	N	11	11	11	11
			Std. Deviation	0.30151	0.30151	0.00000	0.00000
21,00	Promotion/	Horizon Life Skills, Adams	Mean	0.1111	0.2222	0.0227	0.0667
	Prevention	County	N	45	45	44	45
			Std. Deviation	0.31782	0.42044	0.15076	0.25226
22,00	Promotion/	Alliance Public Schools Job	Mean	0.6000	0.5000	0.2222	0.2000
	Prevention	Coach, Box Butte County	N	10	10	9	10
			Std. Deviation	0.51640	0.52705	0.44096	0.42164
23,00	Promotion/	Teen Citizen Academy,	Mean	0.0000	0.0000	0.0000	0.0000
	Prevention	Dakota County	N	4	4	4	4
			Std. Deviation	0.00000	0.00000	0.00000	0.00000
24,00	Promotion/	Skill Builders, Dodge County	Mean	0.8750	0.8750	0.3750	0.0000
	Prevention		N	8	8	8	8
			Std. Deviation	0.35355	0.35355	0.51755	0.00000
25,00	Promotion/	Healing Circulos Facilitator,	Mean	0.5000	0.6667	0.3333	0.1667
	Prevention	Douglas County	N	6	6	6	6
			Std. Deviation	0.54772	0.51640	0.51640	0.40825
26,00	Promotion/	Urban B.O.L.T., Douglas	Mean	0.2400	0.1739	0.2000	0.0909
	Prevention	County	N	25	23	25	22
			Std. Deviation	0.43589	0.38755	0.40825	0.29424
28,00	Promotion/	ACCC Serving Immigrant	Mean	0.0811	0.1081	0.0270	0.0811
	Prevention	and Refugee Youth, Lancaster County	N	37	37	37	37
		Editcuster County	Std. Deviation	0.27672	0.31480	0.16440	0.27672
29,00	Promotion/	Strenghtfinder Coaching,	Mean	0.2000	0.2000	0.2000	0.0000
	Prevention	Lancaster County	N	5	5	5	5
			Std. Deviation	0.44721	0.44721	0.44721	0.00000
291,00	Promotion/	Malone Community Center,	Mean	0.3913	0.0000	0.2174	0.0000
	Prevention	Lancaster County	N	23	24	23	24
			Std. Deviation	0.49901	0.00000	0.42174	0.00000

Table 1.5: Lifetime Cannabis Use and 3-month Cannabis Use (pages 78-80)

PNameNumber	Program	Program Name,		Intake	Follow-up	Intake	Follow-up
Pinameinumber	Туре	County/Tribe		Clife	Clife	C3m	C3m
292,00	Promotion/	Changing Behaviors	Mean	0.6667	0.6667	0.3333	0.3333
	Prevention	Alternative Program,	N	3	3	3	3
		Lincoln County	Std. Deviation	0.57735	0.57735	0.57735	0.57735
293,00	Promotion/	Behavioral Health,	Mean	0.2308	0.1538	0.0769	0.0000
	Prevention	Sheridan County	N	13	13	13	13
			Std. Deviation	0.43853	0.37553	0.27735	0.00000
31,00	Interventionist	Dawes County School	Mean	0.3333	0.5000	0.0000	0.0000
		Social Work Program, Dawes County	N	3	2	3	2
		Duwes County	Std. Deviation	0.57735	0.70711	0.00000	0.00000
32,00	Interventionist	High school / Middle	Mean	0.2292	0.2292	0.1667	0.0833
		school Interventionist, Hall County	N	48	48	48	48
		County	Std. Deviation	0.42474	0.42474	0.37662	0.27931
33,00	Interventionist	School Interventionist, Saline County	Mean	0.1250	0.1250	0.1250	0.0000
			N	8	8	8	8
			Std. Deviation	0.35355	0.35355	0.35355	0.00000
41,00	Mental Health	Missing Youth Services Therapist, Douglas County	Mean	1.0000	1.0000	1.0000	1.0000
			N	1	1	1	1
			Std. Deviation				
42,00	Mental Health	On-Site Mental Health	Mean	0.0000	0.0000	0.0000	0.0000
		Therapy, Howard County	N	4	4	4	4
			Std. Deviation	0.00000	0.00000	0.00000	0.00000
43,00	Mental Health	,	Mean	0.2571	0.3143	0.1143	0.1429
		Therapy, Lancaster County	N	35	35	35	35
			Std. Deviation	0.44344	0.47101	0.32280	0.35504
45,00	Mental Health	Pilots of Change, Lancaster	Mean	0.5000	0.6000	0.1667	0.1667
		County	N	6	5	6	6
			Std. Deviation	0.54772	0.54772	0.40825	0.40825
46,00	Mental Health	School based therapy,	Mean	0.2857	0.4286	0.0714	0.0714
		Lancaster County	N	14	14	14	14
			Std. Deviation	0.46881	0.51355	0.26726	0.26726
47,00	Mental Health	Mental Health Services,	Mean	0.0000	0.0000	0.0000	0.0000
		Platte County	N	2	1	2	2
			Std. Deviation	0.00000		0.00000	0.00000

Table 1.5: Lifetime Cannabis Use and 3-month Cannabis Use (pages 78-80)

	Program	Program Name,		Intake	Follow-up	Intake	Follow-up
PNameNumber	Type	County/Tribe		Clife	Clife	C3m	C3m
48,00	Mental Health	Post-Crisis Response	Mean	0.5000	0.5000	0.5000	0.0000
		Services, Sarpy County	N	2	2	2	2
			Std. Deviation	0.70711	0.70711	0.70711	0.00000
49,00	Mental Health	Saunders County In-Home	Mean	0.1538	0.0769	0.0769	0.0000
		Therapy, Saunders County	N	13	13	13	13
			Std. Deviation	0.37553	0.27735	0.27735	0.00000
491,00	Mental Health	School Based Behavioral	Mean	0.1892	0.2105	0.1316	0.0789
		Health Program, Saunders County	N	37	38	38	38
			Std. Deviation	0.39706	0.41315	0.34257	0.27328
51,00	Mentoring	Goals Setting , Douglas County	Mean	0.0000	0.0000	0.0000	0.0000
			N	11	11	11	11
			Std. Deviation	0.00000	0.00000	0.00000	0.00000
52,00	Mentoring	Friends Program, Buffalo	Mean	0.0000	0.0000	0.0000	0.0000
		County	N	17	17	17	17
			Std. Deviation	0.00000	0.00000	0.00000	0.00000
53,00	Mentoring	Bridge to Prosperity,	Mean	0.5581	0.0000	0.4737	0.0000
		Douglas County	N	43	43	38	43
			Std. Deviation	0.50249	0.00000	0.50601	0.00000
54,00	Mentoring	Community Connections,	Mean	0.1667	0.0000	0.1667	0.0000
		Lincoln County	N	6	5	6	5
			Std. Deviation	0.40825	0.00000	0.40825	0.00000
Total	All Program	All Programs State of	Mean	0.2430	0.1860	0.1407	0.0611
	Types	Nebraska	N	461	457	455	458
			Std. Deviation	0.42933	0.38953	0.34805	0.23984

Table 1.6: Lifetime Nicotine Use and 3-month Nicotine Use (pages 81-83)

PNameNumber	Program	Program Name,		Intake	Follow-up	Intake	Follow-up
rivamenumber	Туре	County/Tribe		NicLife	NicLife	Nic3m	Nic3m
11,00	Afterschool	Zone Homework, Adams	Mean	0.1429	0.0952	0.0476	0.0952
		County	N	21	21	21	21
			Std. Deviation	0.35857	0.30079	0.21822	0.30079
12,00	Afterschool	Tutoring Services, Madison	Mean	0.0909	0.1818	0.0909	0.0909
		County	N	11	11	11	11
			Std. Deviation	0.30151	0.40452	0.30151	0.30151
21,00	Promotion/	Horizon Life Skills, Adams	Mean	0.2500	0.4318	0.0455	0.1628
	Prevention	County	N	44	44	44	43
			Std. Deviation	0.43802	0.50106	0.21071	0.37354
22,00	Promotion/	Alliance Public Schools Job	Mean	0.7000	0.5000	0.4000	0.5000
	Prevention	Coach, Box Butte County	N	10	10	10	10
			Std. Deviation	0.48305	0.52705	0.51640	0.52705
23,00	Promotion/	Teen Citizen Academy, Dakota County	Mean	0.2500	0.2500	0.0000	0.0000
	Prevention		N	4	4	4	4
			Std. Deviation	0.50000	0.50000	0.00000	0.00000
24,00	Promotion/	Skill Builders, Dodge	Mean	0.3750	0.5000	0.1250	0.2500
	Prevention	County	N	8	8	8	8
			Std. Deviation	0.51755	0.53452	0.35355	0.46291
25,00	Promotion/ Prevention	Healing Circulos Facilitator, Douglas County	Mean	0.3333	0.5000	0.1667	0.5000
			N	6	6	6	6
			Std. Deviation	0.51640	0.54772	0.40825	0.54772
26,00	Promotion/ Prevention	Urban B.O.L.T., Douglas	Mean	0.0000	0.0000	0.0000	0.0000
		County	N	25	23	25	23
			Std. Deviation	0.00000	0.00000	0.00000	0.00000
28,00	Promotion/	ACCC Serving Immigrant	Mean	0.1081	0.1622	0.0541	0.1351
	Prevention	and Refugee Youth, Lancaster County	N	37	37	37	37
		Edificaster County	Std. Deviation	0.31480	0.37368	0.22924	0.34658
29,00	Promotion/	Strenghtfinder Coaching,	Mean	0.2000	0.2000	0.0000	0.2000
	Prevention	Lancaster County	N	5	5	5	5
			Std. Deviation	0.44721	0.44721	0.00000	0.44721
291,00	Promotion/	Malone Community Center,	Mean	0.1739	0.0000	0.0870	0.0000
	Prevention	Lancaster County	N	23	24	23	24
			Std. Deviation	0.38755	0.00000	0.28810	0.00000

Table 1.6: Lifetime Nicotine Use and 3-month Nicotine Use (pages 81-83)

	Program	Program Name,		Intake	Follow-up	Intake	Follow-up
PNameNumber	Type	County/Tribe		NicLife	NicLife	Nic3m	Nic3m
292,00	Promotion/	Changing Behaviors	Mean	1.0000	0.6667	0.3333	0.3333
ŕ	Prevention	Alternative Program,	N	3	3	3	3
		Lincoln County	Std.	0.00000	0.57735	0.57735	0.57735
			Deviation				
293,00	Promotion/	Behavioral Health,	Mean	0.1538	0.3077	0.0769	0.0769
	Prevention	Sheridan County	N	13	13	13	13
			Std. Deviation	0.37553	0.48038	0.27735	0.27735
31,00	Interventionist	Dawes County School	Mean	0.0000	1.0000	0.0000	0.0000
		Social Work Program,	N	3	2	3	2
		Dawes County	Std. Deviation	0.00000	0.00000	0.00000	0.00000
32,00	Interventionist	High school / Middle	Mean	0.2292	0.2500	0.1250	0.0833
		school Interventionist, Hall	N	48	48	48	48
		County	Std. Deviation	0.42474	0.43759	0.33422	0.27931
33,00	Interventionist	School Interventionist, Saline County	Mean	0.1250	0.1250	0.1250	0.0000
			N	8	8	8	8
		Std. Deviation	0.35355	0.35355	0.35355	0.00000	
41,00	Mental Health	Missing Youth Services Therapist, Douglas County	Mean	0.0000	0.0000	0.0000	0.0000
			N	1	1	1	1
			Std. Deviation				
42,00	Mental Health	On-Site Mental Health Therapy, Howard County	Mean	0.0000	0.0000	0.0000	0.0000
			N	4	4	4	4
			Std. Deviation	0.00000	0.00000	0.00000	0.00000
43,00	Mental Health	Family Service School	Mean	0.3824	0.3143	0.1176	0.2000
		Therapy, Lancaster County	N	34	35	34	35
			Std. Deviation	0.49327	0.47101	0.32703	0.40584
45,00	Mental Health	Pilots of Change, Lancaster	Mean	0.5000	0.3333	0.1667	0.1667
		County	N	6	6	6	6
			Std. Deviation	0.54772	0.51640	0.40825	0.40825
46,00	Mental Health	School based therapy,	Mean	0.1429	0.2857	0.0714	0.0714
		Lancaster County	N	14	14	14	14
			Std. Deviation	0.36314	0.46881	0.26726	0.26726
47,00	Mental Health	Mental Health Services,	Mean	0.5000	1.0000	0.5000	0.0000
		Platte County	N	2	1	2	2
			Std. Deviation	0.70711		0.70711	0.00000

Table 1.6: Lifetime Nicotine Use and 3-month Nicotine Use (pages 81-83)

DNI Ni	Program	Program Name,		Intake	Follow-up	Intake	Follow-up
PNameNumber	Type	County/Tribe		NicLife	NicLife	Nic3m	Nic3m
48,00	Mental Health	Post-Crisis Response	Mean	0.5000	0.5000	0.5000	0.5000
		Services, Sarpy County	N	2	2	2	2
			Std. Deviation	0.70711	0.70711	0.70711	0.70711
49,00	Mental Health	Saunders County In-Home	Mean	0.3077	0.3077	0.0769	0.0000
		Therapy, Saunders County	N	13	13	13	13
			Std. Deviation	0.48038	0.48038	0.27735	0.00000
491,00	Mental Health	School Based Behavioral	Mean	0.2703	0.3421	0.1351	0.1316
		Health Program, Saunders County	N	37	38	37	38
			Std. Deviation	0.45023	0.48078	0.34658	0.34257
51,00	Mentoring	Goals Setting , Douglas	Mean	0.0000	0.0000	0.0000	0.0000
		County	N	11	11	11	11
			Std. Deviation	0.00000	0.00000	0.00000	0.00000
52,00	Mentoring	Friends Program, Buffalo County	Mean	0.1176	0.1176	0.0588	0.0000
			N	17	17	17	17
			Std. Deviation	0.33211	0.33211	0.24254	0.00000
53,00	Mentoring	Bridge to Prosperity, Douglas County	Mean	0.5714	0.0000	0.5135	0.0000
			N	42	42	37	42
			Std. Deviation	0.50087	0.00000	0.50671	0.00000
54,00	Mentoring	Community Connections,	Mean	0.1667	0.0000	0.1667	0.0000
		Lincoln County	N	6	6	6	6
			Std. Deviation	0.40825	0.00000	0.40825	0.00000
Total	All Program	All Programs State of	Mean	0.2511	0.2232	0.1280	0.1028
	Types	Nebraska	N	458	457	453	457
			Std. Deviation	0.43412	0.41684	0.33450	0.30409

Table 1.7: Trauma Symptoms (pages 84-86)

	Program Program Program N			Intake	Follow-up
PNameNumber	Туре	County/Tribe		BTsyTot	BTsyTot
11,00	Afterschool	Zone Homework, Adams	Mean	3.3500	4.0952
		County	N	20	21
			Std. Deviation	2.71981	3.12897
12,00	Afterschool	Tutoring Services, Madison	Mean	3.0000	3.9091
		County	N	11	11
			Std. Deviation	2.86356	3.38982
21,00	Promotion/	Horizon Life Skills, Adams	Mean	2.9545	2.9091
	Prevention	County	N	44	44
			Std. Deviation	3.72892	3.58821
22,00	Promotion/	Alliance Public Schools Job	Mean	3.7000	3.0000
	Prevention	Coach, Box Butte County	N	10	10
			Std. Deviation	3.33500	3.94405
23,00	Promotion/ Prevention	Teen Citizen Academy, Dakota County	Mean	2.5000	1.2500
			N	4	4
			Std. Deviation	1.73205	1.50000
24,00	Promotion/ Prevention	Skill Builders, Dodge County	Mean	4.0000	3.8750
			N	8	8
			Std. Deviation	3.92792	3.83359
25,00	Promotion/ Prevention	Healing Circulos Facilitator, Douglas County	Mean	1.5000	1.2500
			N	6	4
			Std. Deviation	1.51658	2.50000
26,00	Promotion/	Urban B.O.L.T., Douglas	Mean	1.8800	2.2500
	Prevention	County	N	25	24
			Std. Deviation	2.66646	2.87795
28,00	Promotion/	ACCC Serving Immigrant	Mean	4.0811	4.5676
	Prevention	and Refugee Youth, Lancaster County	N	37	37
		Edificaster County	Std. Deviation	3.69969	4.09973
29,00	Promotion/	Strenghtfinder Coaching,	Mean	1.6000	1.2000
	Prevention	Lancaster County	N	5	5
			Std. Deviation	3.57771	2.68328
291,00	Promotion/	Malone Community Center,	Mean	3.3478	0.8333
	Prevention	Lancaster County	N	23	24
			Std. Deviation	2.83819	1.09014

Table 1.7: Trauma Symptoms (pages 84-86)

DNI Ni l	Program	Program Name,		Intake	Follow-up
PNameNumber	Type	County/Tribe		BTsyTot	BTsyTot
292,00	Promotion/	Changing Behaviors	Mean	5.3333	5.3333
	Prevention	Alternative Program,	N	3	3
		Lincoln County	Std. Deviation	3.51188	4.72582
293,00	Promotion/	Behavioral Health,	Mean	3.0769	2.1538
	Prevention	Sheridan County	N	13	13
			Std. Deviation	3.35315	3.48440
31,00	Interventionist	Dawes County School	Mean	4.3333	5.0000
		Social Work Program, Dawes County	N	3	2
		,	Std. Deviation	1.15470	1.41421
32,00	Interventionist	High school / Middle	Mean	3.2917	2.9792
		school Interventionist, Hall County	N	48	48
		,	Std. Deviation	3.26137	3.35483
33,00	Interventionist	School Interventionist, Saline County	Mean	1.5000	2.3750
			N	8	8
			Std. Deviation	2.50713	2.82527
41,00	Mental Health	Missing Youth Services Therapist, Douglas County	Mean	8.0000	8.0000
			N	1	1
			Std. Deviation		
42,00	Mental Health	on-Site Mental Health Therapy, Howard County	Mean	4.0000	3.5000
			N	4	4
			Std. Deviation	3.36650	3.51188
43,00	Mental Health	Family Service School	Mean	5.4706	5.4706
		Therapy, Lancaster County	N	34	34
			Std. Deviation	3.58647	3.79182
45,00	Mental Health	Pilots of Change, Lancaster	Mean	5.5000	1.8333
		County	N	6	6
			Std. Deviation	1.87083	3.54495
46,00	Mental Health	School based therapy,	Mean	7.4286	6.3571
		Lancaster County	N	14	14
			Std. Deviation	3.85735	4.06878
47,00	Mental Health	Mental Health Services,	Mean	6.5000	5.0000
		Platte County	N	2	2
			Std. Deviation	0.70711	2.82843

Table 1.7: Trauma Symptoms (pages 84-86)

Table 1.7: Ire	auma Symp	otoms (pages 84-86	o)		
DNI Ni	Program	Program Name,		Intake	Follow-up
PNameNumber	Type	County/Tribe		BTsyTot	BTsyTot
48,00	Mental Health	Post-Crisis Response	Mean	4.5000	4.0000
		Services, Sarpy County	N	2	2
			Std. Deviation	6.36396	5.65685
49,00	Mental Health	Saunders County In-Home	Mean	5.3077	3.0000
		Therapy, Saunders County	N	13	12
			Std. Deviation	3.59130	2.13201
491,00	Mental Health	School Based Behavioral	Mean	4.5789	3.5789
		Health Program, Saunders	N	38	38
		County	Std. Deviation	3.56129	3.14197
51,00	Mentoring	Goals Setting , Douglas County	Mean	3.1000	3.0000
			N	10	11
			Std. Deviation	4.09471	2.68328
52,00	Mentoring	ng Friends Program, Buffalo County	Mean	3.6875	3.4706
			N	16	17
			Std. Deviation	3.38071	3.50210
53,00	Mentoring	Bridge to Prosperity,	Mean	2.2143	1.8837
		Douglas County	N	42	43
			Std. Deviation	2.45482	2.28045
54,00	Mentoring	Community Connections,	Mean	5.1667	5.6667
		Lincoln County	N	6	6
			Std. Deviation	4.79236	3.55903
Total	All Program	All Programs State of	Mean	3.6535	3.2851
	Types	Nebraska	N	456	456
			Std. Deviation	3.45624	3.43765







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