



The Office of Innovation, Alignment, and Accountability

A SNAPSHOT OF CURRENT JUVENILE REHABILITATION YOUTH: SUBSTANCE USE DISORDER & TREATMENT NEEDS



Washington State Department of
CHILDREN, YOUTH & FAMILIES

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Cross, S. (2022). A Snapshot of Current Juvenile Rehabilitation Youth: Substance Use Disorder & Treatment Needs. Washington State Department of Children, Youth, and Families – Office of Innovation, Alignment, and Accountability.

About the Data

This report provides a snapshot of clients who are currently in either a Juvenile Rehabilitation (JR) institution or community facility (N=332) as of Aug. 11, 2021. Global Appraisal of Individual Needs – Short Screen (GAIN-SS) Substance Disorder Screener (SDS) scores as well as Adolescent Substance Use Assessment (ASUA) scores were examined in order to determine where a client has a substance use disorder (SUD) and treatment need. Client Activity Service Tracker (CAST) information for each client was gathered to assess whether clients have participated in previous, or are participating currently, in SUD treatment. The Integrated Treatment Assessment (ITA) was also examined for each client. The ITA is a comprehensive assessment that measures a number of criminogenic domains to provide information on risk/need and protective factors for each client. The ITA is administered using one-on-one interviewing and review of official records and is intended to be given three times (initial, reassessment, and final) throughout a client's JR obligation. This report uses domains 8A and 8B (Drug/Alcohol History and Current) of the ITA for each client. Domains 8A and 8B of the ITA ask about a client's history with drug/alcohol use and SUD treatment, as well as whether the client has used any drugs or alcohol in the past four weeks of the date the ITA is given. While the ITA is not directly connected to the GAIN-SS, ASUA, or current SUD treatment needs, it does provide an indicator of previous and current drug/alcohol use and treatment and the information obtained can be used in addition to the GAIN-SS and ASUA to provide additional insight into a client's SUD needs.

JR runs varying state-certified SUD treatment models and programs within each of the three institutions. Substance use treatment in JR provides a range of services, including assessment, education, pre-treatment, treatment, and continued care. JR currently operates one intensive inpatient program, one intensive outpatient program, and three outpatient programs, with continued care services being provided on an individual basis. Clients do not transfer institutions to receive services, but rather receive the level of treatment available at the facility they are assigned to. JR currently has a treatment capacity of 91 clients per year across three treatment models in addition to outpatient services for clients as needed. This number is an estimate and does not include clients who are receiving, or have received, treatment at community facilities, those clients receiving services on parole, or those clients receiving services through grant-funded programs.

Typically, when clients enter JR they are given the GAIN-SS within 48 hours of admission. All clients reflected in this report were eligible, based on admission date, to receive the GAIN-SS. The GAIN-SS is a short version of the Global Appraisal of Individual Needs (GAIN-I), consists of 15 questions, and takes roughly 15 minutes to complete. The GAIN-SS can quickly identify clients who may have one or more behavioral health disorders. If the client scores a 2 or above on the GAIN-SS, they are identified as having a treatment need and are then assessed by a Substance Use Dependency Professional (SUDP) using the ASUA before being referred to treatment. The ASUA is a modified version of the Adolescent Chemical Dependence Assessment (ACDA) developed by JR in 2003, and is used to identify the level of dependence (mild; moderate; severe) by substance type. The ASUA takes approximately one to two hours to administer. It is possible for a client to initially score below a 2 on the GAIN-SS, indicating no treatment need, and be given the ASUA at a later date after divulging previous or current drug/alcohol use to JR staff. Furthermore, there are differing administration practices at each institution. Of the 203 clients who scored a 0 or 1 on the GAIN-SS, 45% (N=92) were given an ASUA at a later date.

Additional information on the screening tools used in JR, as well as access to substance use treatment can be found at: <https://dcyf.wa.gov/sites/default/files/pdf/reports/SUD2019.pdf>.

Current Client Demographics

Table 1 shows the demographic breakdown of current JR clients. The majority of JR clients are males (92.2%), Black/African American (28.3%), White (28.3%), or Hispanic (27.7%), and 18 years or older (72.3%). The majority of clients are serving a JR sentence (65.7%) as opposed to an adult sentence (34.3%), and are housed within one of the three JR institutions (75%). The anticipated average length of stay, based on admission date and estimated release date, for current clients in JR, as of Aug. 11, 2021, is 1,427 days, with the minimum stay being 48 days and the maximum being 11,206 days (approximately 30.5 years).

Table 1

Demographics of Current JR Clients

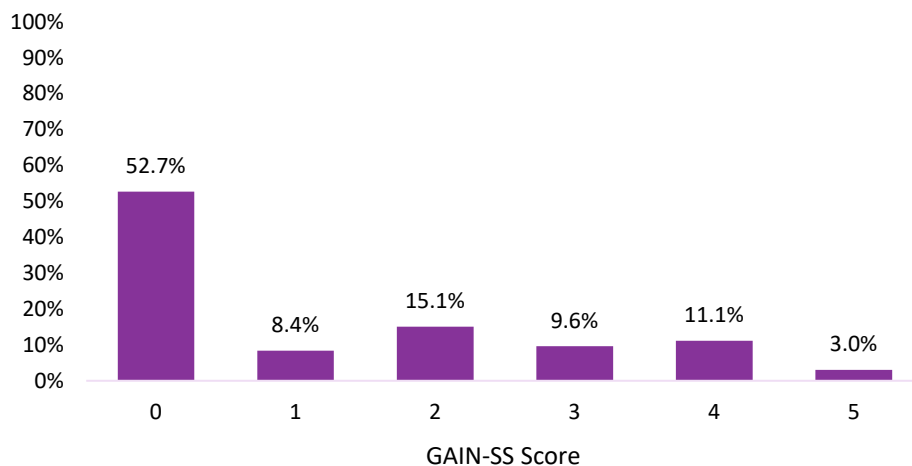
Gender	Count	%
Female	26	7.8%
Male	306	92.2%
Race/Ethnicity		
American Indian/Alaskan Native	26	7.8%
Asian/Pacific Islander	16	4.8%
Black/African American	94	28.3%
Hispanic	92	27.7%
White	94	28.3%
Multi-Other	3	0.9%
Unreported	7	2.1%
Age		
Under 18	92	27.7%
18 and Over	240	72.3%

Data Source: DCYF Juvenile Rehabilitation (August 2021). Automated Client Tracking (ACT).
 WSRDAC/M Reporting Standard: No; AI/AN, Multiracial included in AI/AN counts and Black/African American,
 Multiracial included in Black/African American counts

GAIN-SS SDS Scores

Figure 1 shows the number of clients who received each score (0 to 5) on the GAIN-SS Substance Use Disorder Screener. The majority of clients scored below a 2 (61.1%), indicating no SUD treatment need, while 39.9% of clients scored a 2 or above, indicating treatment need.

Figure 1: Percent of Clients by GAIN-SS Score

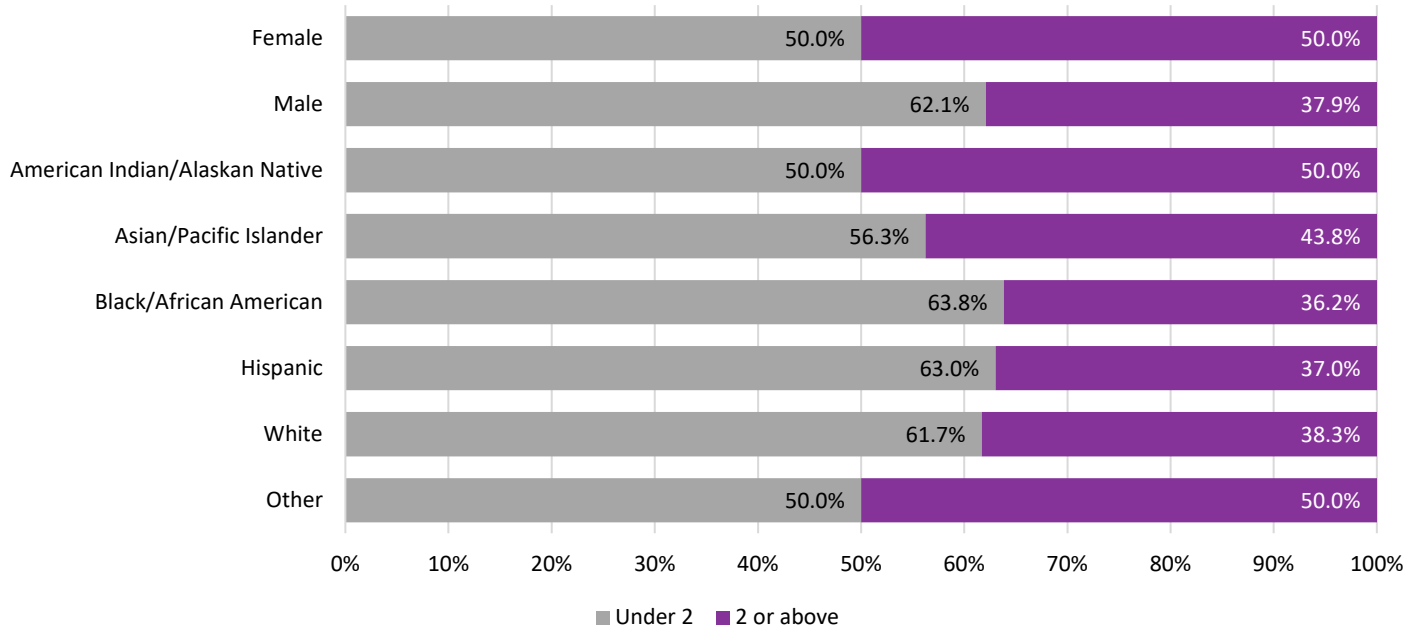


Data Source: DCYF Juvenile Rehabilitation (August 2021). Automated Client Tracking (ACT)

Figure 2 shows the percentage of clients who scored either under 2 on the GAIN-SS or a 2 or above on the GAIN-SS Substance Use Screener, broken down by gender and race/ethnicity. The majority of males scored under 2 (62.1%) while exactly half of females scored under 2. The majority of all races/ethnicities scored under 2 with only 38.8% of clients scoring a 2 or above. The anticipated average length of stay for those clients scoring less than 2 is 1,755.5 days while the

anticipated average length of stay for clients who score 2 or above is 910.2 days. It is important to note that these differences in anticipated average length of stay could be due to factors such as age or offense type.

Figure 2: GAIN-SS Score by Gender and Race/Ethnicity

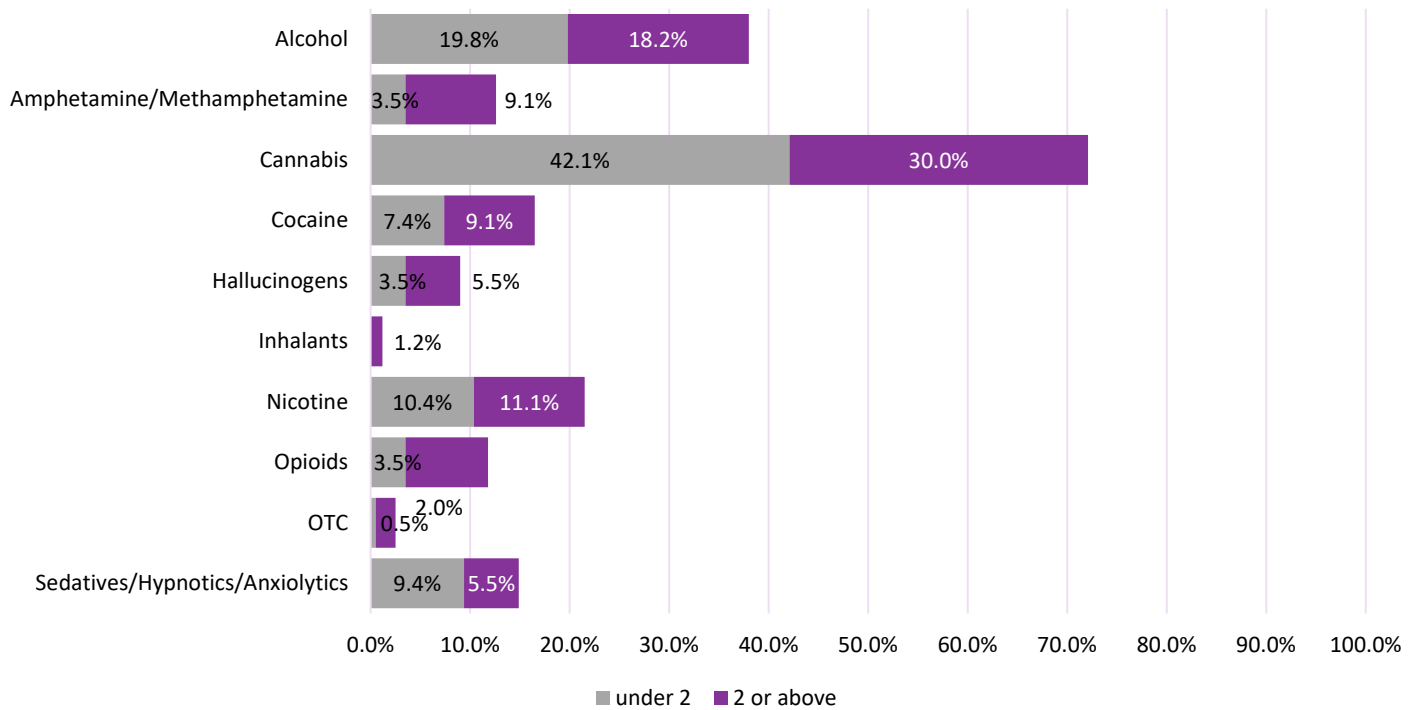


Data Source: DCYF Juvenile Rehabilitation (August 2021). Automated Client Tracking (ACT)

WSRDAC/M Reporting Standard: Yes; AI/AN, Multiracial included in AI/AN counts and Black/African American, Multiracial included in Black/African American counts

Figure 3 shows the percentage of clients with a ‘moderate’ or ‘severe’ ASUA score by drug type and GAIN-SS score. As stated above, it is possible for a client to initially score below a 2 on the GAIN-SS, indicating no treatment need, and be given the ASUA at a later date after divulging previous and/or current drug/alcohol use to JR staff. In all, for clients who scored under 2 on the GAIN-SS (N=203), indicating no treatment need, 92 clients were given the ASUA (45.3%). Of those 92 clients, 57 clients (62%) had at least one ‘moderate’ use score on the ASUA and 73 (79.3%) had at least one ‘severe’ use score on the ASUA, indicating possible substance use disorder that the GAIN-SS did not identify. For clients who scored a 2 or above on the GAIN-SS (N=129), indicating a treatment need, only 79 clients (61.2%) were given the ASUA. Of those 79 clients, 49 clients (62%) had at least one ‘moderate’ use score on the ASUA and 73 (92.4%) had at least one ‘severe’ use score on the ASUA. All in all, of the 171 clients who were given the ASUA, 106 clients (62%) had at least one ‘moderate’ use score on the ASUA and 146 (85.3%) had at least one ‘severe’ use score on the ASUA. The majority of clients who scored a ‘moderate’ or ‘severe’ use score on the ASUA for each individual drug type also scored a 2 or above on the GAIN-SS with the exception of clients using Cannabis and/or Sedatives/Hypnotics/Anxiolytics in which the majority of ‘moderate’ and/or ‘severe’ use clients scored under 2 on the GAIN-SS, indicating the GAIN-SS is not correctly identifying these clients as having a treatment need.

Figure 3: Percent of Clients With a Moderate or Severe ASUA Score by Drug Type and GAIN-SS Score

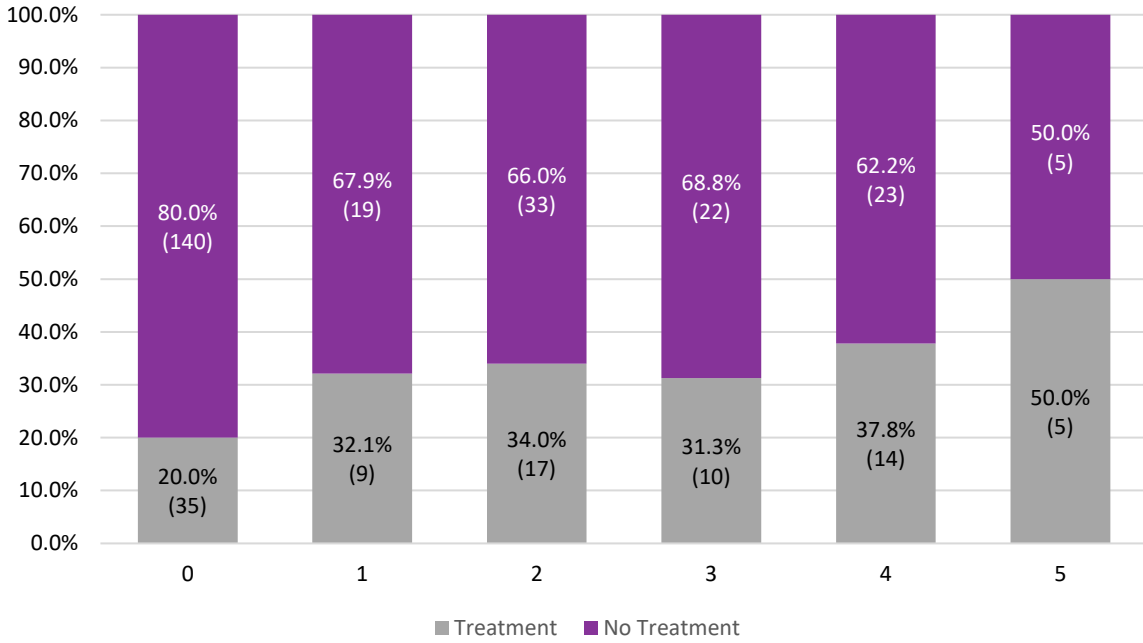


Data Source: DCYF Juvenile Rehabilitation (August 2021). Automated Client Tracking (ACT) (ACT).

GAIN-SS and Treatment

Figure 4 shows the percentage of clients who have received or are currently receiving SUD treatment by GAIN-SS score in addition to the percentage of clients who have currently received no SUD treatment. The majority of clients who scored a 2 or above (indicating treatment need) have not received SUD treatment (64.3%, N=83). Clients with a GAIN-SS score of 5 are the exception with exactly half of the clients receiving treatment and half receiving no treatment. The anticipated average length of stay for clients receiving treatment is 1,189.4 days, while the anticipated average length of stay for those receiving no treatment is 755.4 days, indicating those clients receiving treatment have a longer anticipated average length of stay.

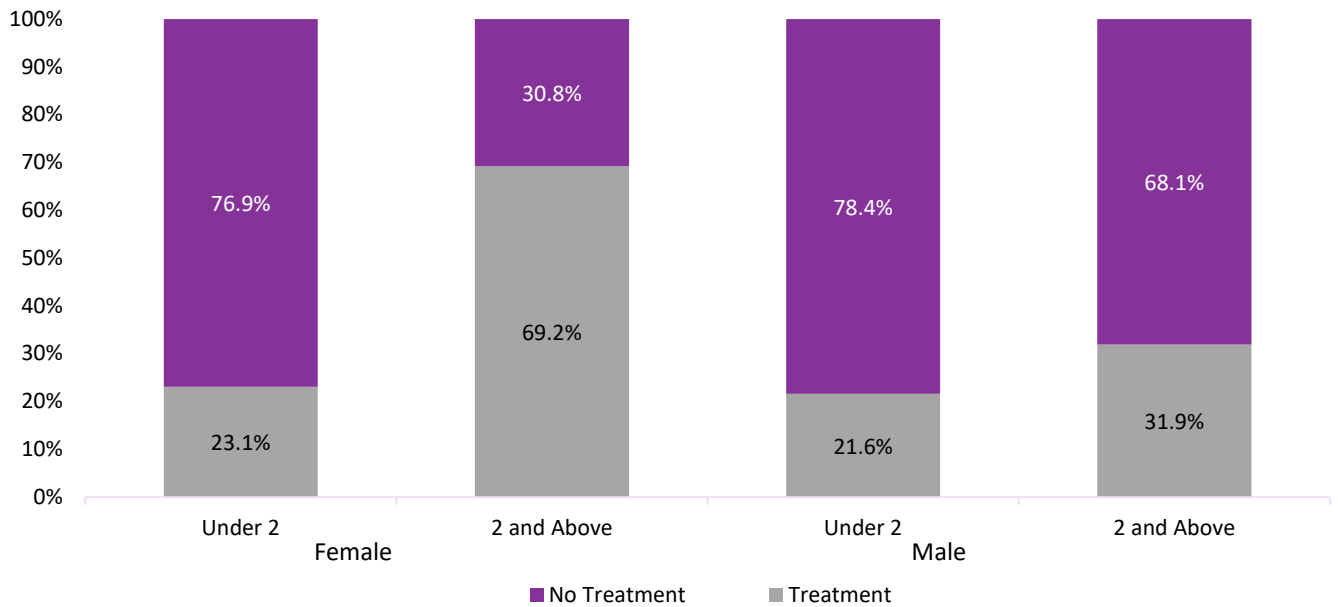
Figure 4: Percent of Clients Who Have Received or Are Currently Receiving Treatment by GAIN-SS Score



Data Source: DCYF Juvenile Rehabilitation (August 2021). Automated Client Tracking (ACT)

Figure 5 shows the percentage of clients receiving SUD treatment by gender and GAIN-SS scores. While male clients make up the majority of all JR clients (92.2%), they are underrepresented when it comes to receiving SUD treatment in comparison to female clients. The majority of females who scored a 2 or above on the GAIN-SS have received or are receiving treatment (69.2%) while only 31.9% of males who scored a 2 or above have or are receiving treatment.

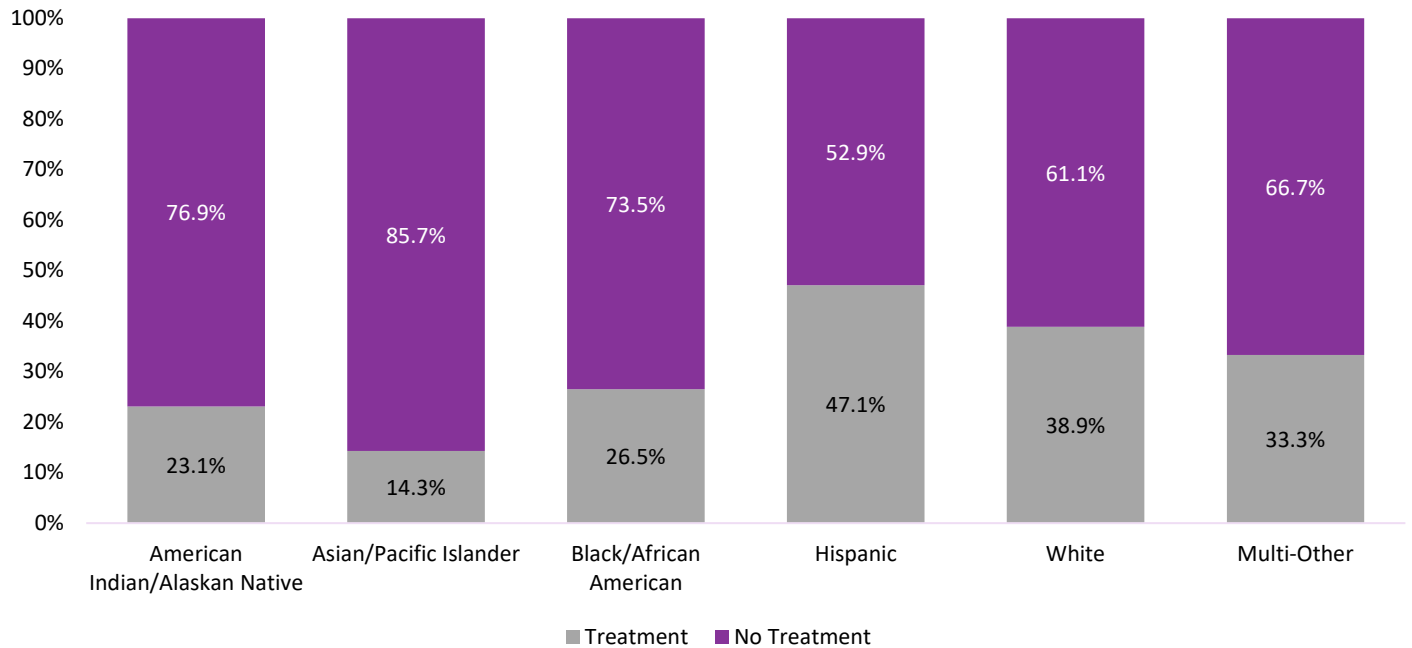
Figure 5: Percent of Clients Receiving Treatment by Gender and GAIN-SS Score



Data Source: DCYF Juvenile Rehabilitation (August 2021). Automated Client Tracking (ACT).

Figure 6 shows the percentage of clients receiving SUD treatment by race/ethnicity for clients with a GAIN-SS score of 2 or more. The majority of all races are not receiving treatment. Hispanic clients have the highest percentage of receiving treatment at 47.1% followed by White clients at 38.9 percent.

Figure 6: Percent of Clients Receiving Treatment by Race/Ethnicity (GAIN-SS Score 2 or more)



Data Source: DCYF Juvenile Rehabilitation (August 2021). Automated Client Tracking (ACT)
 WSRDAC/M Reporting Standard: Yes; AI/AN, Multiracial included in AI/AN counts and Black/African American, Multiracial included in Black/African American counts

Table 2 shows the percentage of clients receiving treatment by SUD treatment type (Intensive Outpatient, Intensive Inpatient, Outpatient, and/or Education) and outcome of treatment. Of those clients in treatment or receiving it earlier in their JR sentence (N=90), the majority of clients were placed into Intensive Outpatient Substance Use treatment (70%) followed by Outpatient Substance Use treatment (15.6%). Of those 90 clients, 3 clients (3.3%) either did not receive the recommended treatment or refused the recommended treatment. Regardless of treatment type, the majority of clients have either completed treatment or are still receiving treatment.

Table 2

Percent of Clients Receiving Treatment by Treatment Type and Outcome

Outcome	Intensive Outpatient		Drug/Alcohol Education		Intensive Inpatient		Outpatient	
	Count	%	Count	%	Count	%	Count	%
Completed	36	59.0%	2	33.3%	5	41.7%	6	46.2%
Dropped out	2	3.3%	0	0.0%	0	0.0%	0	0.0%
Expelled	0	0.0%	0	0.0%	1	8.3%	0	0.0%
Non-compliance	3	4.9%	0	0.0%	0	0.0%	0	0.0%
Released/transferred before completion	0	0.0%	0	0.0%	0	0.0%	1	7.7%
Still receiving treatment	20	32.8%	4	66.7%	6	50.0%	6	46.2%
Total	61	100.0%	6	100.0%	12	100.0%	13	100.0%

* Youth can be in more than one treatment type

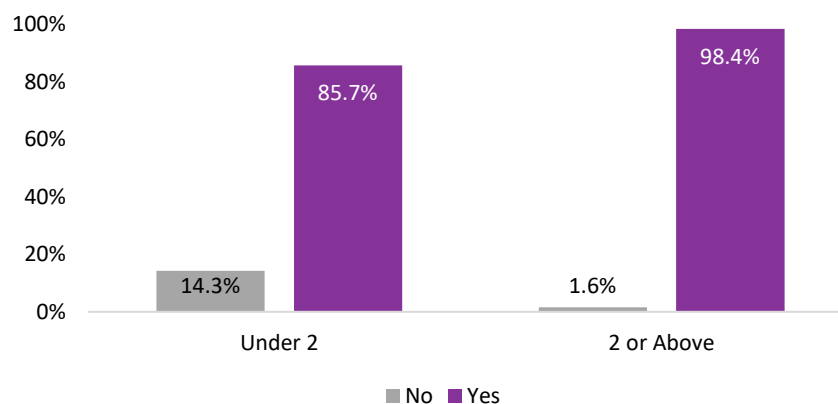
Data Source: DCYF Juvenile Rehabilitation (August 2021). Automated Client Tracking (ACT).

GAIN-SS and ITA

Domains 8A and 8B of the ITA were examined to assess any previous drug/alcohol use and treatment as well as current use. This report used the initial ITA only, as not every client had been given a reassessment or final ITA as of the date the data were collected.

Figure 7 shows the percentage of clients with a history of any drug or alcohol use by GAIN-SS score. The majority of clients report using drugs or alcohol at some point before being admitted to JR, with only 1.6% of clients who scored a 2 or above on the GAIN-SS reporting to have never used drugs or alcohol in the past compared to 14.3% of clients who scored below a 2 on the GAIN-SS.

Figure 7: Percent of Clients With a History of Drug/Alcohol Use by GAIN-SS Score



Data Source: DCYF Juvenile Rehabilitation (August 2021). Automated Client Tracking (ACT)

Table 3 shows the percentage of clients who self-report a history of SUD referrals and treatment prior to their JR admission, by GAIN-SS Score. The majority of clients who scored less than 2 on the GAIN-SS report having never been referred for a SUD assessment (72.9%) while 20.7% of clients scoring below 2 on the GAIN-SS have previously been

diagnosed with substance abuse or as dependent/addicted. Nearly half, 45%, of clients who scored a 2 or above on the GAIN-SS have never been referred for a SUD assessment, while 42.7% of clients who scored a 2 or above have previously been diagnosed with substance abuse or as dependent/addicted. The majority of all clients, regardless of GAIN-SS score, have no history of attending any SUD treatment. Of those clients who scored under 2 on the GAIN-SS, 38 clients have previously attended treatment with the majority doing so at the court’s direction (50%). Similarly, for those clients who scored a 2 or above on the GAIN-SS, 60 clients have previously attended treatment, with the majority doing so at the court’s direction (75%, N=45). The majority of youth are coming in to JR reporting that they’ve never been referred for a SUD assessment, yet rates of need are high.

Table 3
History of SUD Referrals and Treatment By GAIN-SS Score

History of Referrals	Under 2		2 or Above	
	Count	%	Count	%
Diagnosed as Abuse	24	11.8%	25	19.4%
Diagnosed as Dependent/Addicted	18	8.9%	30	23.3%
Referred but Never Assessed	12	5.9%	13	10.1%
Never Referred for Assessment	148	72.9%	58	45.0%
Diagnosed as No Problem	1	0.5%	3	2.3%
Total	203	100.0%	129	100.0%

History of Attending Treatment	Under 2		2 or Above	
	Count	%	Count	%
Attended at Court Direction	19	9.4%	45	34.9%
Attended at Parent/School/Other Request	14	6.9%	9	7.0%
Voluntarily Attended	5	2.5%	6	4.7%
Never Attended	165	81.3%	69	53.5%
Total	203	100.0%	129	100.0%

Data Source: DCYF Juvenile Rehabilitation (August 2021). Automated Client Tracking (ACT).

Discussion

This study provides insight into the SUD needs and treatment for current JR clients. While this study does indicate that some clients with treatment need based on GAIN-SS scores of 2 or above are receiving treatment, the majority of these clients with SUD treatment needs are not receiving treatment (64.3%, N=83). Additionally, 21.7% (N=44) of clients scoring less than a 2 on the GAIN-SS are receiving SUD treatment, indicating that the GAIN-SS is not sufficient at identifying youth with SUD treatment needs. Furthermore, only 38.9% (N=129) of JR clients scored a 2 or more on the GAIN-SS while 50.6% (N=168) of all JR clients, regardless of GAIN-SS score, have at least one moderate, severe, or combination thereof, level of dependency on one more drugs based on the ASUA. These findings indicate that clients initially scoring below a 2 on the GAIN-SS are often later identified as having a SUD treatment need, and possibly show the benefit of administering the ASUA to all youth, regardless of GAIN-SS score as this is possibly the youth’s first access to any treatment. Therefore, JR should reexamine the current SUD assessments being used (GAIN-SS and ASUA) to ensure the assessments used are more accurately identifying clients with SUD treatment need and in a timeframe that provides the client with a greater opportunity to access treatment. A GAIN-SS score of under 2 should not rule out that a client may have a SUD treatment need, as shown by the data in this report, and a lower cutoff score could more accurately capture SUD treatment need. A more reliable way of accurately identifying clients who have an SUD treatment need would benefit the JR population overall.

Importantly, JR needs to find ways to expand evidence-based SUD treatment services to a larger proportion of the JR population. This can be accomplished with more SUD treatment dedicated staff and more funding dedicated to

evaluating current SUD treatment programs and expansion options. Governor Jay Inslee has determined that current funding levels are not sufficient to fully assess all youth or provide adequate treatment to all youth with needs. The 2021-2023 proposed budget provides 23 full time substance use dependence professionals and dialectical behavioral therapy specialists to fully implement the dialectical behavioral therapy and substance use treatment components of the agency's Integrated Treatment Model.¹ Furthermore, JR is currently onboarding significant resources from targeted funding for SUD treatment in the form of nine full time employees in institutions, re-classifying all SUDPs for retention, and increasing aftercare at community facilities and within the community through community-based contracts.

¹ <https://ofm.wa.gov/budget/state-budgets/gov-inslees-proposed-2021-23-budgets/agency-recommendation-summaries/307#BH>