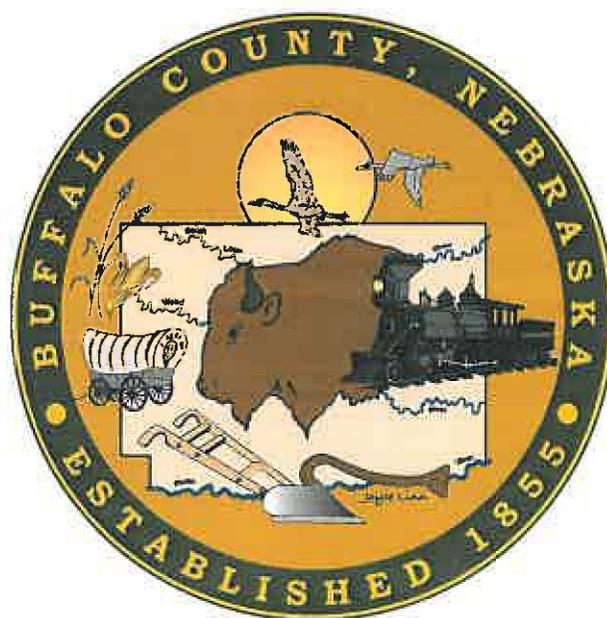


**Section I.**

# **Buffalo County Comprehensive Juvenile Justice Plan**

**July 1, 2012-June 30, 2015**



Approved June 26, 2012

## **Section II**

### **Community Team Section**

**Buffalo County Nebraska  
Comprehensive Juvenile**

# Justice Plan

## July 1, 2012-June 30, 2015

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**The Buffalo County Community Team** was formed as an advisory committee to the Buffalo County Board of Supervisors in 2002. The Buffalo County Community Team is comprised of representatives from agencies providing services to the youth and families of Buffalo County, i.e. education, the faith community, local business, youth of the community and community members at large. The Committee attempts to meet on a quarterly basis and functions as one committee with individual members working on various issues as specific needs arise. There are no permanent standing committees.

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**Section III**  
**Juvenile Justice System Analysis Tool**

**See attached as Appendix A.**

**Section IV.**  
**Community Socio-Economics:**

## **Buffalo County Socio-Economics:**

Buffalo County has a population of 46,102 people with six rural high schools. The City of Kearney has 30,787 people with two high schools, one public and one parochial. The University of Nebraska - Kearney is also located in the county.

Buffalo County is located in south-central Nebraska and covers 975 square miles. The southern border of the county runs parallel to Interstate 80. The population density per square mile of land (44) in 2010; is almost double the population density for the state of Nebraska (22.3). The city of Kearney is the county seat of Buffalo County. Great Lakes Aviation provides four daily flights to Denver International Airport in Denver, Colorado.

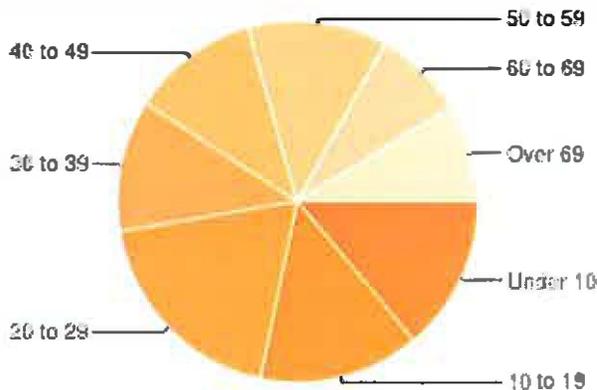
Buffalo County is a rural area of 9 towns, 1,442.5 sq. miles. Contextual conditions for the County include: 11.2% of residents live below the poverty level compared to a statewide average of 9.7%.

## **BUFFALO COUNTY DEMOGRAPHIC PROFILE**

### **Demographic Data**

The following data are from the 2010 U.S. Census released in June 2011. Visit [www.census.gov](http://www.census.gov) for further details.

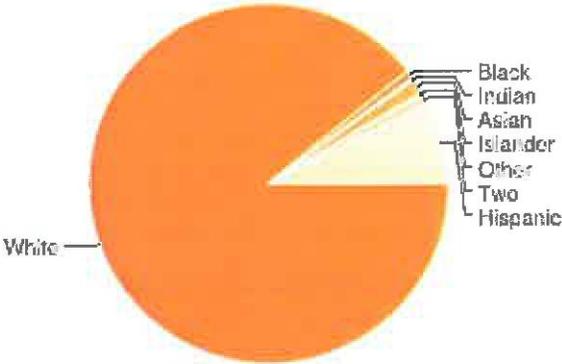
#### **Buffalo County 2010 Population by Age**



<b>Under 10 Years</b>	<b>13.9%</b>
<b>10 to 19 Years</b>	<b>14.4%</b>
<b>20 to 29 Years</b>	<b>19.0%</b>
<b>30 to 39 Years</b>	<b>11.8%</b>
<b>40 to 49 Years</b>	<b>11.5%</b>
<b>50 to 59 Years</b>	<b>12.5%</b>
<b>60 to 69 Years</b>	<b>8.2%</b>
<b>Over 69 Years</b>	<b>8.7%</b>

**Buffalo County Census 2010 Race Data**

Census 2010 race data for Buffalo County include the racial breakdown percentages of 0.8% black, 1.3% Asian and 7.4% Hispanic.



Race & Origin (Hispanic)		%
White		92.7
Black		0.8
Pacific Islander		0.0
Indian		0.2
Asian		1.3
Hispanic		7.4
Other		0.1
Two		1.0

**Population by Gender, Age, and Race/Ethnicity, 2010 U.S. Census Data\***

	Buffalo County		Behavioral Health Region 3		State of Nebraska	
	N**	%***	N**	%***	N**	%***
<b>Total</b>	46,102	100.0%	226,320	100.0%	1,826,341	100.0%
<b>Gender</b>						
Female	23,264	50.5%	113,793	50.3%	920,045	50.4%
Male	22,838	49.5%	112,527	49.7%	906,296	49.6%
<b>Age</b>						
<15	9,229	20.0%	46,224	20.4%	383,542	21.0%
15-17	1,840	4.0%	9,773	4.3%	75,679	4.1%
18-20	3,269	7.1%	9,722	4.3%	80,131	4.4%
21-24	4,017	8.7%	11,446	5.1%	102,396	5.6%
25-34	6,340	13.8%	26,160	11.6%	245,176	13.4%
35-44	5,043	10.9%	25,581	11.3%	220,838	12.1%
45-54	5,832	12.7%	32,486	14.4%	258,726	14.2%
55-64	4,954	10.7%	28,139	12.4%	213,176	11.7%
65+	5,578	12.1%	36,789	16.3%	246,677	13.5%
<b>Race/Ethnicity^</b>						
White	42,746	92.7%	207,599	91.7%	1,572,838	86.1%
Black	383	0.8%	1,845	0.8%	82,885	4.5%
Asian	596	1.3%	1,862	0.8%	32,293	1.8%
N. American	129	0.3%	1,051	0.5%	18,427	1.0%
Hispanic	3,432	7.4%	22,160	9.8%	167,405	9.2%
Minority	4,974	10.8%	28,505	12.6%	326,588	17.9%

\*2010 population data from the U.S. Census Bureau

\*\*Number of residents by demographic

\*\*\*Percentage of residents by demographic

^Race represents individuals who identified only one race (opposed to multiple races); Hispanic can be of any race; Minority represents individuals who identified themselves as being of a non-White race, multi-racial, or Hispanic.

## **RACE AND ETHNICITY**

The racial profile of Buffalo County is predominately white. The county is not as racially or ethnically diverse as the state of Nebraska. Whites account for 92.7% of the population in Buffalo County and 86.1% statewide. This represents an approximately 3 % decrease in the White population from the 2000 Census.

In Buffalo County Hispanics represent the largest proportion of a racial group other than white with 7.4% followed by Asians (1.3%), African Americana (0.8), and Native American (0.3%). Overall, the Minority population in Buffalo County represents 10.8 % of the population in Buffalo County.

Over ninety-percent of the population 5 years and older in Buffalo County speak English only. The village of Amherst contains the highest proportion of those who speak English only (98.2%) while the city of Gibbon has the lowest proportion (81.9%). County wide, 6.7% of the population speaks a language other than English at home. Gibbon again has the highest proportion (18.1%) followed by Shelton (16.3%). Pleasanton represents the lowest proportion with only 1.7% speaking a language other than English at Home. Less than three percent of the county population reports that they speak English less than very well.

## **EDUCATION: ENROLLMENT AND ATTAINMENT**

Overall there are thirty-five public and private K - 12 schools in Buffalo County. Nine of these are high schools, three are middle schools and twenty-three are elementary schools. Seven of these schools are private including three elementary, one middle school and three high schools. In addition to the K – 12 schools there is also the University of Nebraska at Kearney and Central Community College.

Buffalo County has eleven middle and high schools with 4,256 youth in 6<sup>th</sup> through 12<sup>th</sup> grades. School enrollment of the population three years and over is 14,318 (2000 Census). Of these, 32.5% are enrolled in grades 1 – 8, 18% in grades 9 – 13, and 40.9% in college or graduate school. Amherst has the highest percentage of the students enrolled in grades 1 – 8 (56.9%) and Kearney has the lowest (25.1%). Miller has the highest percentage of students enrolled in grades 9 – 12 (57.7%) and Kearney again has the lowest (13.0%).

## **EMPLOYMENT STATUS AND LABOR FORCE**

The labor force of Buffalo County includes individuals 16 years and older and includes 24,062 individuals. As of July 2007, of those in the labor force 2.86% were unemployed. The lowest level of unemployment in the county is in Elm Creek (0.6%) and the highest level is in Riverdale (4.2%).

Nebraska ranks 47 out of 50 in the average time it takes to commute to work. The commute time in Nebraska is at least seven minutes less than the national average. The commute time for employees in Buffalo County is even less than the state average (15.6 minutes). Miller residents report the longest commute time (47.8 minutes) and Kearney residents report the shortest time (13.8 minutes). Residents in four communities (Amherst, Elm Creek, Ravenna and Shelton) report commute times of more than 20 minutes but less than 30 minutes. The commute times of residents in the rural communities in the county indicate most of the residents must travel to another community for employment.

<b>Population 16 Years and Over</b>	<b>In Labor Force</b>	<b>Unemployed</b>	<b>Commute to Work</b>	<b>Mean Time in Minutes of Commute</b>
33,080	24,062	646 (2.0%)	23,078	15.6

Non-farm employment accounts for the majority of employment in Buffalo County (22,478). Trade, wholesale and retail comprise the largest employment sector (6,776). This is followed closely by services (5,574), Government (3,965), and manufacturing (3,505). Construction and mining, transportation, communications and utilities, and financing, insurance and real estate comprise 2,658 individuals.

The majority of those employed (8,908) are employed in non-manufacturing positions. Good Samaritan Hospital and the University of Nebraska at Kearney are the two largest non-manufacturing employers. Major employers include Baldwin Filters, Eaton Corporation, Coleman Powermate, Morris Press, Marshall Engines, West Company and Chief Industries Inc. Companies continually praise the efforts of the local work force.

## **INCOME**

The median household income in Buffalo County (\$36,782) is below that for the state of Nebraska (\$39,250). Households in Riverdale report the highest median income in the county at \$44,375 and Ravenna the lowest at \$31,875.

The median family income in the county is \$46,247. Riverdale is slightly above the county median at \$46,786 followed closely by families in Kearney at \$46,650. Miller families earn the lowest median income at \$36,875.

The per capita income for Buffalo County residents is \$17,510. Kearney is the only community in which the per capita income (\$17,713) is higher than the county overall. Elm Creek is just below the county average at \$17,339 and Miller residents have the lowest per capita income at \$13,968.

<b>Median Household Income</b>	<b>Median Family Income</b>	<b>Per Capita Income</b>	<b>Median Earnings Full-Time Year Round Workers</b>	
			<b>Male</b>	<b>Female</b>
\$36,782	\$46,247	\$17,510	\$30,182	\$21,977

The proportion of families in Buffalo County living below the poverty level (6.3%) is slightly lower than the proportion statewide (6.7%) but is almost three percent better than the overall proportion for the United States (9.2%). Six hundred fifty-three families (6.3%) live below the poverty level. Of these families, 530 include related children under 18 years and 286 families include children under 5 years. The highest percentage of families in the county living below the poverty level live in Kearney (7.4%) followed closely by Shelton (7.2%). The village of Miller has no families living below the poverty level.

There are 4,395 (11.2%) individuals living below the poverty level in Buffalo County. Of these individuals, 1,048 live with related children under 18 years and 670 live with children age 5 to 17 years. Kearney has the highest proportion of individuals living below the poverty level (13.4%) and Miller reports the lowest proportion (4.1%).

<b>Living Below Poverty Level</b>	<b>Number</b>	<b>Percent</b>	<b>With Related Children Under 18 Years</b>	<b>With Children Under 5 Years</b>
Families	653	6.3%	530	286
Individuals	4,395	11.2%	1,048	378

Females with no husband present (1,316 individuals) represent 8.3% of the householders in Buffalo County. The majority of these householders live in Kearney (1,019 female householders). In all communities in the county with the exception of Riverdale, females with no husband present represent five to ten percent of householders. In Riverdale they represent 10.8% of householders.

## **HOUSEHOLDS AND HOUSING CHARACTERISTICS**

There were 15,930 households out of which 32.70% had children under the age of 18 living with them, 52.90% were married couples living together, 8.30% had a female householder with no husband present, and 35.80% were non-families. 26.10% of all households were made up of individuals and 9.60% had someone living alone who was 65 years of age or older. The average household size was 2.48 and the average family size was 3.02.

## **Buffalo County Community Health Partners' 2010 Youth Risk Behavior Survey Results Grades 9 – 12**

The Results of the 2010 Youth Risk Behavior Survey Conducted in Eight Senior High Schools in Buffalo County, Nebraska, During the Fall of 2010.

The Youth Risk Behavior Survey (YRBS) has been administered in Buffalo County, Nebraska by the Buffalo County Community Health Partners from 2000 to 2010. In 2000, the YRBS was administered in eight Buffalo County, Nebraska senior high schools (N=931) to obtain information about adolescents and their health risks. In the spring of 2003, a sample of 1,228 students from grades 9-12 in nine high schools in Buffalo County, Nebraska completed the YRBS. The 2003 survey included 10 questions, in addition to the Nebraska state YRBS questions, specific to Buffalo County. In the spring of 2007, 1,334 students from the same nine high schools completed the YRBS. In the spring of 2009, 1,331 students, also from the same nine high schools, completed the YRBS. Each time the YRBS was administered, the questionnaire was modified to correspond with changes made on the Nebraska state YRBS in regard to what wording was used, and what questions were included, in the survey instrument. In the fall of 2010, the YRBS was administered to a sample of 659 students from grades 9-12 in eight high schools in Buffalo County. This is a change from the traditional model of administering the YRBS in spring semesters of odd calendar years. Students were selected using random sampling procedures provided by the Centers for Disease Control and Prevention (CDC).

**Section V**  
**Identified Priority Areas**  
for  
**2012 – 2015 Comprehensive Plan**

**Identified Priority Areas**

In the original 2002 Juvenile Justice Plan for Buffalo County the Buffalo County Community Team focused on identification and prioritization of concerns related to the youth of Buffalo County. During the original planning session the issues identified included:

1. parental involvement / interaction
2. substance abuse
3. parental sponsor development
4. introduction of at-risk youth & parents to positive programs
5. learning life skills
6. safe place programs

The 2002 Buffalo County Community Team developed a focus on the critical areas of need for youth in Buffalo County. The areas identified were:

1. Crisis Detention / Intervention
2. Diversion Programs with high accountability
3. Parental Involvement Programs with a focus on skills and styles of parenting

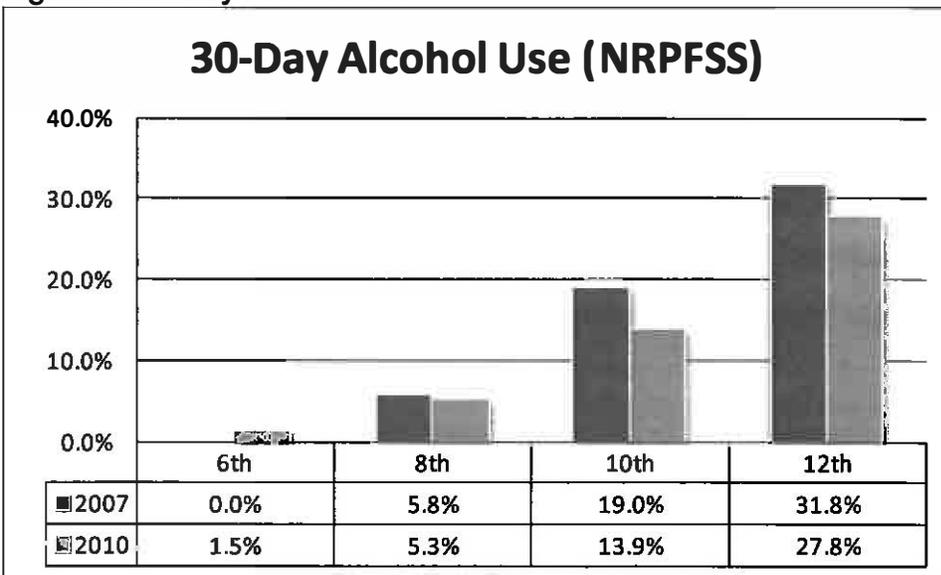
In developing the new priorities for the new three year Buffalo County Comprehensive Juvenile Justice Plan; The Buffalo County Community Team meet twice formally in 2010 and twice in 2011. There were several additional meetings throughout the year involving individual Team members. Included in these meetings were members from the various coalitions and subcommittees from within the Buffalo County Community Partners.

Information below was provided by the Buffalo County Community Health Partners  
**Outcome Evaluation Results**

Alcohol Use (17 and Younger)

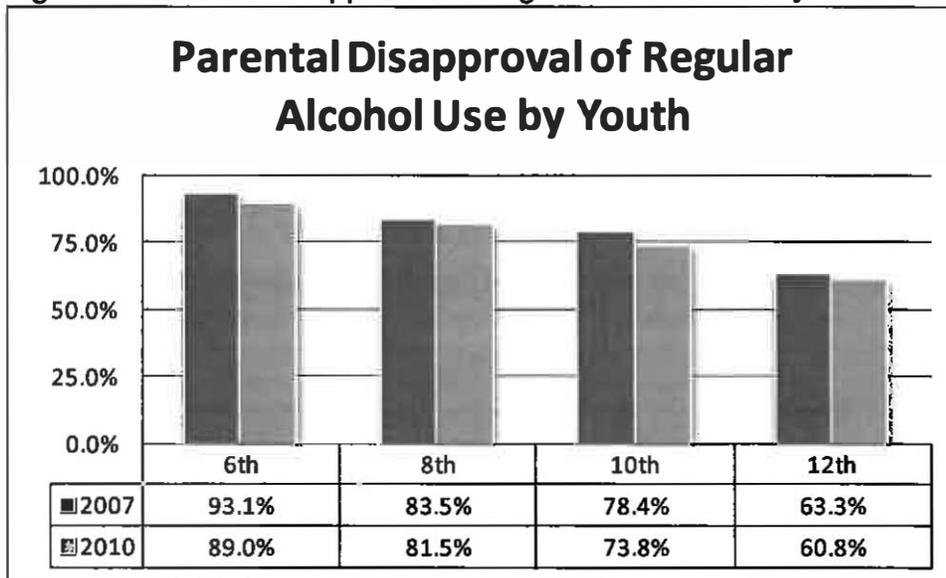
From 2007 to 2010 the percentage of 10th and 12th graders reporting using alcohol in the past 30 days declined on the Nebraska Risks and Protective Factors Student Survey (NRPFS). In 2007, 19.0% of 10th graders and 31.8% of 12th graders reported using alcohol in the past 30 days, compared to the lower rates of 13.9% for 10th graders and 27.8% for 12th graders in 2010 (See Figure 1). The Youth Risk Behavior Survey (YRBS) had slightly different outcomes for 30 day use, with the rates turning up higher than the NRPFS. Nevertheless, there was a strong decline from 2009 to 2010 in the number of youth reporting using alcohol in the past 30 days. For example, 39.9% of 12th graders reported having used alcohol in 2009, compared to 21.1% in 2010. The rates for 10th and 11th graders also dropped substantially, whereas no data were available for 9th graders.

Figure 1. 30-Day Alcohol Use



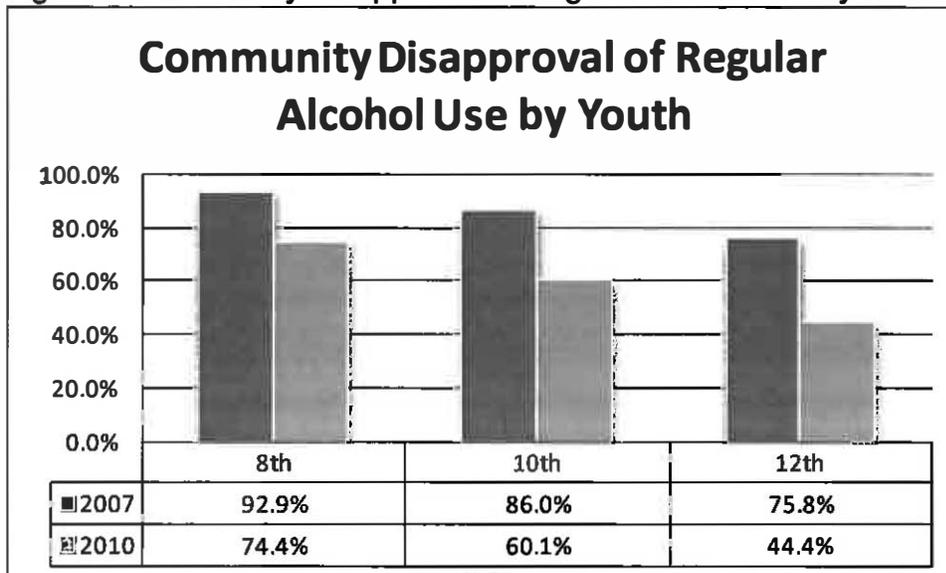
Although 30-day alcohol use has declined, the perception of parental and community acceptance has not improved. Fewer youth are reporting that their parents and adults in their neighborhood would feel that it is very wrong for them to drink regularly. On the 2007 NRPFS, 78.4% of 10th graders and 63.3% of 12th graders believed that their parents felt it was very wrong for them to drink regularly, compared to 73.8% of 10th graders and 60.8% of 12th graders in 2010 (see Figure 2).

Figure 2. Parental Disapproval of Regular Alcohol Use by Youth



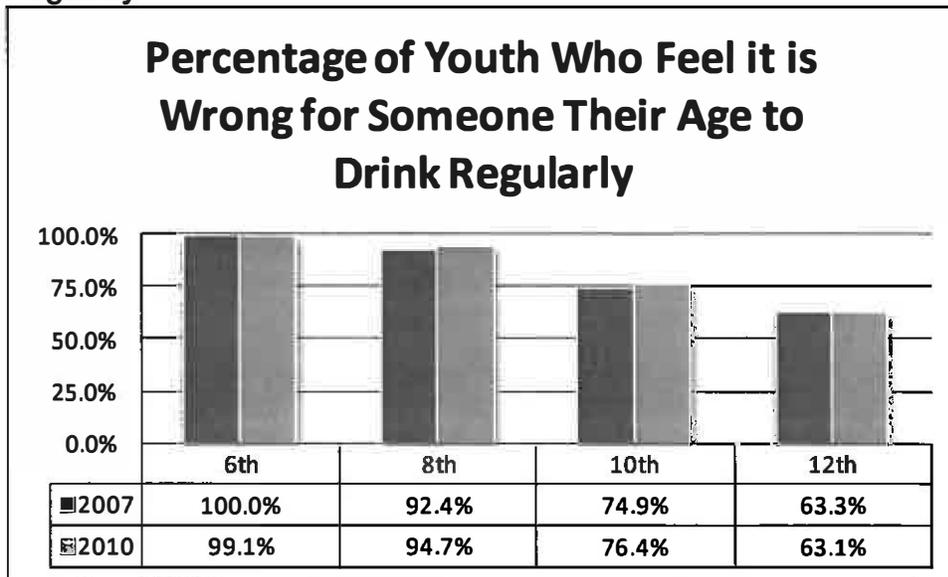
The rates of community disapproval dropped even more from 2007 to 2010. In 2007, 86.0% of 10th graders and 75.8% of 12th graders believed that most adults in their neighborhood felt it would be wrong for kids their age to drink regularly, compared to 60.1% of 10th graders and 44.4% of 12th graders in 2010.

Figure 3. Community Disapproval of Regular Alcohol Use by Youth



Whereas youth seem to perceive more lenient attitudes among their parents and adults in their neighborhood compared to 2007, there has been little change in the perception of youth themselves. In 2007, 74.9% of 10th graders and 63.3% of 12th graders felt it was wrong or very wrong for someone their age to drink regularly, compared to 76.4% of 10th graders and 63.1% of 12th graders in 2010 (see Figure 4).

Figure 4. Percentage of Youth Who Feel it is wrong for Someone Their Age to Drink Regularly



### Target Population

Buffalo County is a rural community with a total population of 46,102, 25% of which is under the age of 18. The ethnic makeup is 90% Caucasian, 7.4% Hispanic, and the remaining 1% representing Black, Asian, American Indian, and Pacific Islander. There are 11 middle and high schools in the county and 1 State of Nebraska University (UNK).

### Priorities and Strategies

Three priorities were selected for the Buffalo County SPF-SIG Program: 1) prevent alcohol use among persons 17 and younger, 2) reduce binge drinking among 18-25 year olds, and 3) reduce alcohol impaired driving across all ages. The table below details the strategies used to address these priority areas, as well as the target population for each strategy. The logic model located in Appendix A links the priorities with the strategies.

#### Strategies

Strategy	Target Population	Geographic Target	Estimated Number Reached/ Served	Actual Number of Participants	Number in Data Sample (NOM's)
CMCA (Media)	All ages	Buffalo County	45,354	45,354	N/A
CMCA (RBST)	Retailers/Servers	Buffalo County	100	227	N/A
CMCA (Social Norms Media Campaign)	College students	UNK Campus/Kearney	6,700	6,700	N/A
Project Alert	Middle school students	Kearney Catholic	35	48	23

<b>Project Towards No Drug Abuse</b>	High school students	Sumner-Eddyville-Miller Public School	25 Students	17	Did not administer post NOMs
<b>Protecting You/ Protecting Me</b>	Students in grades 1-5 (3-8 sessions)	KPS, SEM, Pleasanton, Bryant, Kenwood Public Schools	Unknown	250	Did not administer post NOMs
<b>Mentoring</b>	Students in grades 1-5, High School mentors	Pleasanton and Ravenna Public Schools	25	13 new matches	N/A
<b>Alcohol EDU</b>	Middle school students	KPS Progress School, SEM, Pleasanton Public School	30-40	65	Did not administer post NOMs

### *Strategies*

Strategy	Target Population	Geographic Target	Estimated Number Reached/ Served	Actual Number of Participants	Number in Data Sample
<b>Cruise Night Law Enforcement</b>	All ages	Kearney	60 citations/arrests	109 citations/arrests	N/A
<b>Diversion</b>	18-20	Buffalo County	30-50	*NYI	N/A
<b>40 Assets</b>	K-12 Teachers	Buffalo County	100	93 teachers trained in 2010 (30 from Buffalo County)	N/A
<b>CHOICES</b>	At-risk college students and freshman, athletes, Greek students	University of Nebraska at Kearney	1,000	100	Did not administer post NOMs

*\*NOMs - National Outcome Measures (pre/posttest assessments)*

## **Intervention Overview**

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### **Priorities**

As stated in the Buffalo County Community Health Partners' strategic plan, "The three priorities that will be addressed in Buffalo County by Positive Pressure Coalition are: alcohol use amongst 17 and younger, binge drinking amongst 18-25 year olds, and alcohol impaired driving across all age groups. The priorities were selected as a result of the data collected from the informant interviews, town hall meetings, focus groups, and from reviewing the information provided in the Community Data Document. After completion of the Community Needs Assessment the coalition ranked all three prevention priorities equally and felt as a community one priority cannot be addressed without addressing the other two priorities. As with binge drinking, it is imperative that we address this priority because Kearney has a University system and therefore, the availability of alcohol is more readily available."

## **Contributing Factors**

The strategic plan stated, “As a result of the informant interviews, focus groups, and town hall meetings the four major contributing factors related to the misuse of alcohol are: Social Access, Social Community Norms, Low Perceived Risk, and Retail Access. The youth focus group, using the script provided in the toolkit were specifically related to alcohol use, with additional questions related specifically to the ranking of contributing factors to alcohol use and misuse amongst youth. Youth were asked to rank the contributing factors based on what they feel is the greatest contributing factor of youth alcohol access. The same applies to the town hall meetings where residents were asked to rank the contributing factors based on alcohol access in their community. Based on the findings the following contributing factors and root causes were selected.”

### Contributing Factor: Easy Social Access

Root Causes: Provision of alcohol to minors, parents or older adults providing a location for underage drinking, community celebrations, and availability of unsupervised drinking locations.

### Contributing Factor: Favorable Social Community Norms

Root Causes: Acceptance, 'Rite of Passage', and Youth's attitudes and perceptions

### Contributing Factor: Low Perceived Risk

Root Cause: Low perceived risk of health problems

### Contributing Factor: Retail Access

Root Cause: Proper ID checking; sales to minors and intoxicated persons.

## **Strategies**

The coalition selected the following strategies to address the identified contributing factors and root causes:

- **Environmental strategies:**
  - CMCA (Media campaign – general and social norms targeting college students, Responsible Beverage Server Training)
    - CMCA is an environmental strategy to address alcohol use amongst age 17 and younger and binge drinking amongst 18-25 year olds. The target population is youth age 13-20. Contributing factors addressed: retail access, social access, enforcement, and social norms. Root causes addressed: compliance with laws and regulations, ID issues, acceptance, 'rite of passage', youth's attitudes and perceptions, provision of alcohol to minors, community celebrations, parents providing a location for underage drinking, and unsupervised drinking locations available.
  - Special law enforcement – Cruise night enforcement

- To help out with enforcement at the Kearney community summer event
- **Individual-level strategies:**
  - Project Alert (Kearney Catholic)
    - Project Alert is an individual strategy to address alcohol use amongst ages 17 and under. The target population is middle school students. Contributing factors addressed: social norms, low perceived risk, and risk and protective factors. Root causes addressed: acceptance, 'rite of passage', youth's attitudes and perceptions, and low perceived risk.
  - Project Towards No Drug Abuse (new at one rural high school)
    - Project Toward No Drug Abuse is an individual strategy to address alcohol use amongst those 17 and under. The target population is high school students. Contributing factors addressed: social norms, low perceived risk, and risk and protective factors. Root causes addressed: acceptance, 'rite of passage', youth's attitudes and perceptions, and low perceived risk.
  - Protecting You/Protecting Me (new at two rural elementary and four KPS)
    - Protecting You Protecting Me is an individual strategy to address alcohol use amongst ages 17 and under and alcohol impaired driving. The target population is students in grades 1-5 and grades 11-12. There are two options to the strategy: (1) using students in grades 11-12 as mentors to youth in grades 1-5 or (2) using counselors and teachers as mentors. For the purposes of SPF-SIG this program will be implemented with elementary school children. Contributing factors addressed: social norms, low perceived risk, and risk and protective factors. Root causes addressed: low perceived risk of health problems, and youth's attitudes and perceptions.
  - Mentoring (to be expanded to two to three rural elementary schools)
    - Mentoring is an individual strategy aimed at reducing alcohol use amongst youth, and address the young average age of onset of first use. The program also promotes healthy decision making skills. The target population is grades K-5. The current structure of the program covers K-5 with KPS, but with SPF-SIG the program will be expanded to cover K-5 students in rural elementary schools. Contributing factors addressed: favorable social community norms and low perceived risk. Root causes addressed: acceptance, 'rite of passage', youth's attitudes and perceptions, and low perceived risk of health problems.
  - Alcohol EDU (two rural middle school)
    - Alcohol EDU is an individual strategy to address underage and binge drinking. The target population is youth ages 13-17. Contributing factors addressed: low perceived risk. Root causes addressed: low perceived risk of health problems.

- Choices (expansion - UNK college students)
  - CHOICES is an individual strategy to address binge drinking amongst 18-25 year olds. The target population is high risk college and university students. Contributing factors addressed: social norms, and low perceived risk. Root causes addressed: low perceived risk of health problems.
- Diversion (expansion to 18-20 year olds)
  - Diversion is an individual strategy aimed at reducing alcohol use amongst youth. The target population is youth ages 18-20. The current structure of the diversion program in place services youth ages 12-17. The program is available to youth who obtain a citation for minor in possession and other misdemeanor charges. Contributing factors addressed: low perceived risk. Root causes addressed: low perceived risk of health problems.
- 40 Developmental Assets - County-wide
  - This training for teachers is grounded in extensive research in youth development, resiliency, and prevention. The Developmental Assets represent the relationships, opportunities, and personal qualities that young people need to avoid risks and to thrive. This is considered more of a philosophy than a strategy.

Each of the three logic models (Appendix A) link one of the priorities with the contributing factors and the identified root causes. The strategies which will be employed by the coalition are linked to the specific root causes.

### **Evaluation Measurements**

Community-level data is be used to assess the level of change as a result of the implementation of environmental-level strategies. This information was previously collected and compiled by the Nebraska Dept of Health and Human Services, Office of Community Health Development and they will continue to provide updates on the data to the coalition for their use in measuring community level change. The data include census data, state/county/school survey data, treatment and hospital admission data, motor vehicle crash data, alcohol-related arrest data, and liquor license data. The appropriate data will be used as outcome measures as they related to specific programs implemented but will be the key measure for environmental-level strategies.

Annual process and available outcome data (which includes administered NOMs) was collected. Fidelity assessments were conducted at 6-month intervals. The following table list the benchmark years for the identified measures listed in the worksheets:

Table 3. Measures, Benchmarks and Comparison Data

Measures	Benchmark Data (year)	Comparison Data (years)
NRPFS (NE Sharp)	2007	2010, 2012
YRBS (NE Sharp)	2009	2010, 2012
CDD	2008	2010, 2011, 2012
ARBFS	2007	2009, 2011
American College Health Association Survey (ACHAS)	2008	2010, 2012
Compliance Checks	2008	2009, 2010, 2011, 2012
NOMs Youth Survey	Pre	Post
NOMs Young Adult Survey	Pre	Post
Campus Police Data	July 2009-June 2010	July 2010-June 2011
Law Enforcement & County Attorney Data	2008, 2009	2010

## Process Evaluation

To maintain a consistent evaluation across coalitions, SPF-SIG specific implementation fidelity tools to assess both individual and environmental strategies were provided by RTI International. The tools were developed by a national workgroup of SPF-SIG project directors and evaluators, along with evaluation staff from the cross-site evaluation team. To assess fidelity, semi-structured interviews were conducted by the local evaluator with staff or at least one key program informant. The interviews were conducted four times at 6-month intervals during years 1 and 2.

The purpose of the interviews was to determine the extent to which core program dimensions were implemented. The interviews were structured on the fidelity assessment rubrics, which are used to calculate a fidelity score.

The table below outlines which activities had and had not been implemented as of June 2011. The degree to which the program was implemented according to the rubric is illustrated by the fidelity score as a fraction of the maximum score. Fidelity assessment item scores are averaged to obtain an overall fidelity score for each strategy. Each score represents 7 to 12 assessment items.

Table 4. Year 1 and Year 2 Fidelity Scores – Buffalo County.

	Overall Fidelity Scores				
	Jan-10	Jul-10	Jan-11	Jul-11	Max Score
<b>Environmental Strategies</b>					
Media (General)	(N)	3	3	3	3
Media (Social Norms-College Students)	(N)	3	3	2.67	3
Responsible Beverage Server Training	7	7	7	7	7
Law Enforcement: Cruise Night	4	4	(N)	(N) <sup>o</sup>	4
<b>Individual Strategies</b>					
Project Alert - Kearney Catholic	(N)	(N)	4	5	6

Project Towards No Drug Abuse - SEM	(N)	6		6	6
Protecting You/Protecting Me - NE (Chastity)	(N)	(N)	5	5	6
Protecting You/ Protecting Me - NE (Lori)	(N)	(N)	4	4	6
Protecting You/ Protecting Me - SEM	(N)	6	(N)	6	6
Protecting You/ Protecting Me - Amherst	(N)	6	(N)	(N)	6
Protecting You/ Protecting Me - Emerson/KPS	(N)	3	(N)	(N)	6
Protecting You/Protecting Me - Bryant	(N)	5	(N)	(N)	6
Protecting You/Protecting Me - Elm Creek	(N)	3	(N)	(N)	6
Protecting You/Protecting Me - Pleasanton	(N)	5	(N)	5	6
Friends Mentoring - Buffalo County	(N)	5	3	3	6
Alcohol EDU - KPS Progress	6	6	4	4	6
Alcohol EDU - SEM	(N)	(N)	(N)	6	6
Alcohol EDU - Pleasanton	(N)	(N)	(N)	6	6
Choices	(N)	5	4	*	6
Diversion	(N)	(N)	(N)	(N)	6

(N) Not implemented

°Cruise Night implemented in July 2011, not part of fidelity assessment which measures activities from January to June.

\*Fidelity is unavailable; former program deliverer is unresponsive.

## Description of Media Campaign

Media includes radio, social media, billboards, newspaper, a website, and posters. The social norms campaign at the University of Nebraska at Kearney was centered around the "It Ain't Pretty" slogan. This campaign is being adapted to incorporate the high school prevention effort with a proposed slogan of "Take a Stand." A media campaign for parents ages 35-50 is in the planning phase for Year 3 implementation using the same "Take a Stand" slogan. Data has been collected through a media survey to assist in the planning and implementation of this new media campaign.

## Liquor License Resolutions

On May 10th, 2011, Resolution 2011-22 was passed by the Buffalo County Board of Supervisors. This non-binding resolution outlined updates to the Board's policy for approving and renewing licenses to local businesses. Specifically, the resolution recommended restricted and/or denial of license applications and renewals to business who exceed the guidelines for number of violations of NE liquor laws (e.g., providing alcohol to minors, sales to visibly intoxicated persons, and sales after hours).

On May 22nd, 2011, the City Council of the City of Kearny passed resolution 2011-28 which requires business requesting new or renewed liquor licenses to complete certified liquor license training programs. Such training programs are intended to inform

employees of business seeking a liquor license (and/or a renewal license) of the City Council's policies regarding liquor licenses, which are similar to those outlined in Resolution 2011-22.

### **State Evaluator 2011 "Site Visit"**

In April of 2011 RTI conducted a phone interview with Lacrica Olson (Coalition Coordinator for the Positive Pressure Coalition of Buffalo County), who has since moved onto another employment opportunity. RTI asked about the implementation status of strategies selected by the coalition in their strategic plan. The Coalition Coordinator was also asked about the coalition's satisfaction and challenges with respect to each strategy. For the most part, all of the strategies have been implemented and are on-going. The coalition is generally very satisfied with their strategies. Below is a summary of the interview by each strategy.

#### Mentoring (Across Ages, Friends)

Implementation of this strategy is on-going with expansion to new schools. There are mentoring programs in Pleasanton and Ravenna. Elm Creek is being brought in and the coalition is trying to bring mentoring to Gibbon. Lacrica reported being very satisfied with the program, but mentioned having difficulty meeting with the director of the mentoring programs due to her being occupied with another full-time job.

#### Alcohol EDU High School

Implementation of this strategy is on-going. Five schools are currently using the program, and there will not be further expansion. The coalition wants to focus on sustaining the program in the schools where it is currently operating. Lacrica reported being very satisfied with the program, but mentioned having difficulty getting teachers to conduct the pre/post NOMs.

#### Project Alert

Implementation of this strategy is on-going in one high school (Kearney Catholic). There was reported difficulty with personnel at Kearney Catholic, which has since been resolved. Lacrica reported being somewhat satisfied.

#### Project Towards No Drug Abuse

Implementation of this strategy is ongoing. Challenges with sustainability of the program led to the coalition being somewhat satisfied. The coalition is unable to add more schools due to the cost of the program.

## Protecting You/Protecting Me

Implementation of this strategy is on-going, with implementation occurring in different time frames (i.e. beginning, middle, and end of the school year). Lacrica reported being very satisfied with this program, but disappointed that there will not be evaluation data due to NOMs not being collected. Due to budget cuts and the grant ending, the coalition is going to lose one of the social workers who were implementing the program. The program will not be able to replace her.

## 40 Developmental Assets

The coalition did a one-time training in May 2010 and opened it up to the state. Any organization receiving money from the Crime Commission Grant has to implement the 40 assets in their protocol. There were 100 in attendance at Kearney, with 30 teachers, counselors, and social workers from Buffalo County. The coalition pays a stipend twice yearly to those who were trained, provided that they write a report on how they were implementing their philosophy. The coalition hosted a "Train the Trainer" event in which the schools trained teachers to come in May 2011 and there is interest in a member of the school board in having someone talk with parents. These latter instances are ways the coalition is working to keep the strategy active. The one challenge has been getting teachers to turn in their reports; otherwise the coalition is very satisfied with 40 Developmental Assets.

## Choices

Implementation is ongoing, but slightly stalled at the moment due to the resignation of the project leader. The program intent is to create buy-in across campus and from students for the implementation of a larger strategy in which all incoming freshman have to take an alcohol education course prior to registering for classes at the University of Nebraska at Kearney (UNK). Lacrica reported being very unsatisfied with this program due to a lack of data collection and only partial implementation of the program. However, it is the hope that these challenges will be corrected by the now head of SPF SIG college activities.

## CMCA (Mass Media, Social Norms)

Implementation for these strategies is on-going. The media campaign on UNK campus is going very well. The coalition is in the progress of developing a statewide media campaign for the 36-50 age group. The coalition is very satisfied with this campaign, especially the binge drinking piece targeting UNK students. The coalition received total support from the Dean of the University and is looking at how to sustain it and involve more students.

### Responsible Beverage Server Training (RBST)

Implementation of this strategy is on-going. This is a strategy that was used in the county before SPF SIG, but currently there are more people using it. The coalition was successful in effecting policy change through the Kearney City Council. Under the new policy, in order to obtain a liquor license, the business must take the RBST for employees within 60 days of hire. Lacrica reported being very satisfied with RBST and the coalition is working on sustaining the program.

### Strengthening Adjudication/Diversion

This strategy was implemented in March 2012. Referrals were made from the Buffalo County Attorney's Office. Initially there were 84 referrals to the MIP Accountability Program. Individuals being referred are 18-20 yrs. of age.

**Community Capacity Inventory**-University of Nebraska, Juvenile Justice Institute. In November 2011, JJI started the Buffalo County Capacity Inventory. On March 8<sup>th</sup> 2012, Julie Rodgers met with the Buffalo County Community Team in Kearney to provide the following summary.

In summary, 48 different programs responded to the CCI survey. The Programs survey the following programs:

- ▶ After School Program Legal Services
- ▶ Parenting
- ▶ Prevention
- ▶ Residential
- ▶ Domestic Violence
- ▶ Mentoring
- ▶ Truancy
- ▶ Job Skills
- ▶ Gender Specific
- ▶ Mediation
- ▶ Basic Needs
- ▶ Behavioral Health
- ▶ Child Welfare
- ▶ Community Service
- ▶ Culture Specific
- ▶ Early Education
- ▶ Education
- ▶ Employment & Job Skills

- ▶ Juvenile Justice
- ▶ **Services Needed in Buffalo County:**

In developing the 2009-2011 Buffalo County Comprehensive Juvenile Services Plan, there were 23 individuals who responded to listing services which they felt were needed. In our new 2012-2015 plan individuals from 48 different agencies responded with similar ideas and suggestions for needed services.

Two individuals suggested a juvenile detention or holding facility was needed. Several individuals commented about having enough services being provided, but changes in “implementation” or how they are run should be updated or improved. The need for additional affordable behavioral health services for juveniles continues to be listed as a needed service.

The main areas for recommendations of services continue to fall within these categories:

- 1) Mental health services, affordable evaluations and Cognitive Behavioral Intervention Services/Programs with home-based therapy. More parent engagement services which are required.**
- 2) Better coordination of services between schools, Truancy/Diversion Programs, Probation, OJS and DHHS.**
- 3) Drug/Alcohol prevention programs with AA/NA support systems for youth and their families to include prevention/education/mentoring and family support programs with peer to peer support and job training.**
- 4) Additional diversion programs/services for 18-20 year old young adults. These services to include diversion and case management for MIP's and/or parenting classes.**
- 5) Additional recreational activities within each individual community. (Examples given were skate parks and teen centers)**
- 6) Juvenile Services facility which can safely detain a youth and provide mental health assessment/evaluations and provide facilitation of communication between all parties involved, i.e.-youth, parent(s), judicial system, DHHS/OJS, State Probation, and service providers.**

### **Three Priority Areas for Program Activity**

The interests of juveniles in Buffalo County will best be served by the following strategies. These strategies are viewed as being the priority to be supported by the Buffalo County Juvenile Justice Community Team and the Comprehensive Plan for Buffalo County.

1. Continue to fully implement, maximize, and expand the scope and effectiveness of the following: A) Buffalo County Juvenile Diversion; B) Buffalo County Truancy Program; C) Buffalo County Attention Center Program. (Place additional focus on all youth and especially the youth ages 11-13 who complete the MAYSI-2 assessment-SEE APPENDIX B)
2. Develop a plan to maximize the utilization and delivery of services for youth at the county level, provide better utilization of resources and broader community involvement in a manner that will focus on improving communication within communities, programs, groups and families. (Work with community coalitions such as Positive Pressure through the Buffalo County Community Health Partners-Appendix C)
3. Establish a set of service delivery components that enhances parent skills in working with youth, increases parental involvement in existing programs and services, better equips parents to be effective parents, and holds parents accountable in the care of their children.

## **Section VI: Strategies**

The development, examination and implementation of the strategies in support of improved juvenile justice, and youth services is undertaken with the solid principle that all efforts should include the greatest array of community representatives as possible. These strategies consider and involve law enforcement, the judiciary, corrections, Health and Human Services, private service providers, the County Attorney's Office, the Buffalo County Public Defender, youth, educators private business, church groups, and health care providers. The entire county-wide community has responsibility to contribute to these strategies. The primary support for the implementation of these services comes through the Buffalo County Attorney's Office and the Buffalo County Juvenile Justice Community Team (The Team). The strategies for Buffalo County focus on the following:

1. Continue to fully implement and maximize the effectiveness of the Buffalo County Juvenile Diversion Program, the Buffalo County Truancy Program and the Buffalo County Attention Center Program. Buffalo County should continue to test the provision of diversion services and seek ways to maximize the effectiveness of financial and human resources. This activity will be the responsibility of the the Director of Buffalo County Diversion Services. Efforts should be directed at the continued development of collaborative efforts for assessing and providing services to youth and parents.
2. Develop a plan to maximize the utilization and delivery of services for youth at the county level, provide better utilization of resources and broader community involvement in a manner that will focus on improving communication within communities, programs, groups and families. The Buffalo County Community Team should facilitate the organization, research, design and implementation of a Buffalo County Juvenile Services Focus Project with the goal of establishing an on-going review, assessment and adjustment of the focus of county level services. This process will require engaging all of the relevant parties associated with youth in Buffalo County and working to establish a unified approach toward youth issues. The Buffalo County Juvenile Justice Team; along with various organizations such as the Buffalo County Community Health Partners should identify key community youth programs and work with them to design and implement a Buffalo County Juvenile Services Focus Project.

3. Establish a set of service delivery components that enhance parent skills in working with youth, increase parental involvement in existing programs and services, better equip parents to be effective parents and hold parents accountable in the care of their children. Part of strategy #2 should be a specific assessment of all existing parental support and skill services with the goal of determining the utilization and affectiveness of existing programs and the need for greater support of existing services, a review of model parent support programs and creation of new programs where the need is identified.
4. Activities will be undertaken through the Buffalo County Team to gather information on model youth engagement and empowerment programs and assess the existence and provision of comparable programs within Buffalo County. The goal is to establish a program design and implement a comprehensive youth empowerment program. The efforts of this initiative shall link with activities and strategies involved in priority numbers two and three but should provide specific focus on engaging and strengthening positive youth activities and youth – parent programs. One program component should relate to youth employment.

### **The Philosophy and Direction to Accomplish the Strategies**

The concepts for solutions to addressing the issues identified in 2002 related to youth that either were involved in, or were viewed as being at risk of becoming involved with the juvenile justice system. The 2002 plan sought to address one of three areas of programmatic activity. Those three areas of programmatic activity in 2002 related to: 1) justice system crisis intervention, 2) diversion programs for first time juvenile offenders and 3) parental involvement and education.

Combined with the identification of the programmatic areas of need, the Buffalo County Community Team articulated, and continues to articulate, a service delivery philosophy that, by consensus, was adopted as the fundamental philosophical criteria upon which to base initiatives undertaken by and/or supported by the Buffalo County Board of Supervisors. The Team recommends that any programs be based upon and/or reflect “strength-based”, “whole-family”, “parental-involved”, “wrap-around” services. While these terms hold a somewhat different meaning to specific service providers the everyday meaning of this philosophy is that for too long the youth that the justice system deals with have been viewed as young individuals that have been involved in an isolated event or series of delinquent events that is the reason for being brought to the attention of the justice system.

A operational philosophy that looks to strength-based, whole family, parental involved, wrap-around services recognizes that the youth in question did not get to where they are by themselves. Historically the system often has viewed the youth as a bad or trouble youth for whom the system was responsible. In order to consider the issues that may need to be addressed within the philosophy presented, the youth must be considered as a person who has positive attributes as well as issues that need to be

considered and worked with. The youth is part of a family network whether considered functional or non-functional. Addressing the concerns with a youth involves the consideration of the strengths and needs of the whole family and the whole child in a manner that does not place a band aid on a wound that needs more serious attention.

The approaches encouraged within this plan can become complex. The recommendations are in recognition that the child and the child's behavior is a complex combination of needs and strengths and personal and familial responsibility. The need and encouragement of skills development that helps the individual and family deal with more than the fact that a child has been involved in a delinquent act is a major corner stone of the provision of services. This plan calls for an increasing emphasis on the focus of programs and services designed to engage youth, engage parents and equip both for interaction and problem solving. This plan also calls for a greater emphasis on coordination and utilization of existing programs, services and initiatives.

# APPENDIX A: SYSTEM POINT CHECK LIST

<b>SYSTEM POINT:            ARREST/ CITATION</b>	
PARTY RESPONSIBLE: Police/Law Enforcement STATUTE REFERENCE: NRS §§ 43-247 (1), (2), (4)	
<i><b>Decision: Whether an information report should be filed, or what offense, if any, with which juvenile should be cited or arrested.</b></i>	
<b>Formal Determining Factors</b> <ol style="list-style-type: none"> <li>a. Sufficient factual basis to believe offense was committed.</li> <li>b. Underlying support for a particular offense.</li> </ol>	<b>Informal Determining Factors</b> <ol style="list-style-type: none"> <li>a. Officer's Inclination/ patience</li> <li>b. Degree to which parent or service provider pushes the issue</li> <li>c. Youth's prior incidences with law enforcement.</li> <li>d. Youth and/or youth's families perceived status in the community.</li> </ol>
<b>Notes: Arrest/Citation</b> <p>The formal determining factors are of course appropriate. The Kearney Police Department takes exception with point "a" in the informal factors. It may be semantics but in the experience of the Chief of Police it is not an Officers patience or inclination as much as their opinion that the offender will not re-offend. This is of course true in very minor types of incidents. We mandate arrest for offenses such as MIP, DUI, Assault and the Officer has very little discretion in those types of instances.</p> <p>Area law enforcement would concur that point "c" is considered in some instances, as the tendency is to arrest persons who we have had prior contact on or in many instances, continued contact with as an offender.</p> <p>The Kearney Police Department does not believe point "d" is an issue. It is difficult to determine how much effect point "b" would have. The experience of the Kearney Police Department has seen people who are adamant to see someone charged and we have when appropriate, "negotiated" this out. We have also and more often seen someone who may not want someone arrested, merely cautioned and we were in a position where we needed to take a greater level of enforcement action.</p>	

**Decision: Whether to cite or arrest juvenile for juvenile or adult offense.**

<b>Formal Determining Factors</b> <ul style="list-style-type: none"><li>a. Seriousness of Offense</li><li>b. Is there a warrant?</li></ul>	<b>Informal Determining Factors</b> <ul style="list-style-type: none"><li>a. Degree to which juvenile cooperates with officer.</li><li>b. Victim's desire.</li><li>c. Is the youth already in the HHS or juvenile system?</li></ul>
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**Notes:**  
In the cite/arrest for juvenile or adult offense, this is often again not a discretionary matter. Status offenses of course would not apply to an adult. The Kearney Police Department has consistently addressed misdemeanor issues as a juvenile offense, unless the offender is already within the system for a prior offense. In these instances, depending on the nature of the incident, it may be reviewed and upgraded. Serious offenses are on a case by case basis. An assault, even if a misdemeanor, is certainly serious and could warrant a review of what level the case is filed at. I do believe that generally, this would be a youthful offender status rather than an adult charge. Under the informal factors, each of those is somewhat salient, but certainly not driving factors in the decision making process. Again, it is really more what the crime is, felony or misdemeanor that drives that decision.

**Decision: Whether to take juvenile into custody or to cite and release (NRS § 43-248 (1), (2); § 43-250 (1), (2), (3))**

<b>Formal Determining Factors</b> As per NRS 43-348	<b>Informal Determining Factors</b> <ul style="list-style-type: none"><li>a. Immediate risk to juvenile</li><li>b. Immediate/short term risk to public</li><li>c. Seriousness of perceived offense</li><li>d. Extent to which parent or other responsible adult available to take responsibility for juvenile.</li><li>e. Is there a warrant?</li><li>f. Availability of pre-adjudication detention options?</li></ul>
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**Notes:**  
Taking juvenile into custody or citing and release.  
This is driven by policy. Our greatest concern is for the welfare of the juvenile. As I'm certain we are all aware, the thought processes of a juvenile are erratic at best, even on a good day. Once having been arrested for an offense, it is never appropriate to simply cite and release. The

Kearney Police Department makes every effort to make certain these people are released to a responsible adult, usually a parent or guardian. We have had to make exceptions to other family members, such as Aunts, Uncles and in some instances adult siblings. Though not what we always want, we have even placed runaways on buses at the request of their parents. This is an area where status offenses, i.e. MIP, come into play. It would be wholly inappropriate to release an intoxicated juvenile with a citation. I also think that if you review statute, you would note that in your Informal factors, statutorily these may be more formal than informal.

Other informal factors do have an impact on decisions. This is a community that has a real issue with juvenile possession and consumption of alcohol. You can not treat this lightly or inconsistently. It seems that this includes licensing issues of businesses and the community is looking for significant answers to what seem to be age old questions. As Chief of Police, I think you'll find that arrest data and prosecution information will show a consistent effort to treat this type of offense seriously and regularly. I think a review of the Health Partners surveys for area youth can go along ways to help in making certain decisions. I know it is a self reporting instrument and I am cynical enough to wonder but it does give some insights.

I question whether there are specific age appropriate services for alcohol and drug counseling available to the community. I think our programming is at best haphazard in this area and is very much adult centered. I don't think there is enough age appropriate support available in this area. I think this is a very specific issue for juveniles and I don't think the adult solutions are as effective for youth. I also think this speaks directly to the failure and dismantling of the states mental health system.

<p><b>SYSTEM POINT: INITIAL DETENTION</b>  <b>PARTY RESPONSIBLE:</b> State of Nebraska Probation  <b>STATUTE REFERENCE:</b> NRS § 43-250(3), § 43-260, § 43-260.01</p>	
<p><b>Decision:</b> <i>Whether juvenile should be detained or released.</i></p>	
<p><b>Formal Determining Factors</b></p> <ul style="list-style-type: none"> <li>a. Risk assessment outcome</li> <li>b. Accessibility of placement options: <ul style="list-style-type: none"> <li>i. Parents/Guardians</li> <li>ii. Emergency Shelter</li> <li>iii. Staff Secure Facility</li> <li>iv. Secure Detention Facility</li> </ul> </li> </ul>	<p><b>Informal Determining Factors</b></p> <ul style="list-style-type: none"> <li>a. Juvenile attitude in regard to willingness to work with the situation, family, etc.</li> <li>b. Parental attitude in regard to willingness to work with the child and the authorities</li> <li>c. Victim sensitivity in the case. I.e. does the victim reside in the home of the youth.</li> </ul>
<p><b>Notes:</b>  Formal factors listed are appropriate.</p>	

**SYSTEM POINT: CHARGE JUVENILE**

PARTY RESPONSIBLE: County Attorney

STATUTE REFERENCE: NRS § 43-274(1), § 43-275, § 43-276

**Decision: Whether to prosecute juvenile.**

**Formal Determining Factors**

- a. Likelihood of successful prosecution
- b. Factors under NRS § 43-276:
  - i. Type of treatment to which juvenile would be most amenable
  - ii. Evidence that offense was violent, aggressive, or premeditated
  - iii. Motivation for commission of offense
  - iv. Age of juvenile and co-offenders
  - v. Previous offense history, especially patterns of prior violence or antisocial behavior
  - vi. Juvenile's sophistication and maturity
  - vii. Juvenile's prior contacts with law enforcement and the courts
  - viii. Whether there are facilities particularly available to the juvenile court for the treatment and rehabilitation of the juvenile
  - ix. Whether best interests of juvenile and public safety dictate supervision extending beyond his or her minority
  - x. Victim's inclination to participate in mediation
  - xi. "Such other matters as the county attorney deems relevant to his or her decision"

**Informal Determining Factors**

An informal factor includes whether prosecution will have any impact on the juvenile (e.g. change the placement, hold the youth accountable)

Notes:

<b>Decision: <i>Whether youth should be prosecuted as juvenile or adult.</i></b>	
Formal Determining Factors a. Seriousness of offense b. NRS 43-276	Informal Determining Factors Likelihood of completing probation successfully.
Notes:	

<b>Decision: <i>Offense for which juvenile should be charged.</i></b>	
Formal Determining Factors Likelihood of successful prosecution for that offense or whether lesser charge is more easily proven.	Informal Determining Factors None different than any other type of case.
Notes:	

<b>SYSTEM POINT: PRE-ADJUDICATION DETENTION</b>	
PARTY RESPONSIBLE: Juvenile Court Judge	
STATUTE REFERENCE: NRS § 43-253(2)	
<b>Decision: <i>Whether juvenile detained at the time of citation/arrest should continue in detention or out-of-home placement pending adjudication.</i></b>	
Options: 1. Parents/Guardians 2. Emergency Shelter 3. Staff Secure Facility 4. Secure Detention Facility 5. Electronic Monitoring	
Formal Determining Factors a. Whether there is an “immediate and urgent necessity for the protection of such juvenile” b. Whether there is an “immediate and urgent necessity for the protection of...the person or property of another” c. Whether juvenile is likely to flee the	Informal Determining Factors a. Lack of available placement for juvenile

jurisdiction of the court	
Notes: The main thing is the protection of the juvenile.	

<b>SYSTEM POINT: PROBABLE CAUSE HEARING</b>	
PARTY RESPONSIBLE: Juvenile Court Judge	
STATUTE REFERENCE: NRS § 43-256	
<b>Decision: Whether state can show that probable cause exists that juvenile is within the jurisdiction of the court.</b>	
Formal Determining Factors	Informal Determining Factors
Age of the juvenile	
Notes:	

<b>SYSTEM POINT: COMPETENCY EVALUATION</b>	
PARTY RESPONSIBLE: Juvenile Court Judge	
STATUTE REFERENCE: NRS § 43-258(1(b))	
<b>Decision: Whether juvenile is competent to participate in the proceedings.</b>	
Formal Determining Factors	Informal Determining Factors
<ul style="list-style-type: none"> <li>a. Does the juvenile understand the nature of the offense, the penalties and his or her rights?</li> <li>b. Can the juvenile assist his or her defense?</li> </ul>	
Notes:	

<b>Decision: Whether juvenile is "responsible" for his/her acts NRS § 43-258(1(c) and (2))</b>	
Formal Determining Factors	Informal Determining Factors
<ul style="list-style-type: none"> <li>c. Physician, Surgeon, Psychiatrist, Community Health Program, Psychologist</li> <li>d. "Complete evaluation of the juvenile including any authorized area of inquiry requested by court." (NRS § 43-258(2))</li> </ul>	<ul style="list-style-type: none"> <li>a. Family environment</li> <li>b. Legal history</li> <li>c. Medical history</li> <li>d. Education</li> </ul>
Notes:	

<b>SYSTEM POINT: ADJUDICATION</b>	
PARTY RESPONSIBLE: Juvenile Court Judge	
STATUTE REFERENCE: NRS § 43-279 (2) and (3)	
<b>Decision: Whether the juvenile is, beyond a reasonable doubt, “a person described by section 43-247.”</b>	
Formal Determining Factors <ul style="list-style-type: none"> <li>a. Legal sufficiency of evidence presented during adjudication hearing</li> <li>b. Whether juvenile admits the allegations of the petition (or, “pleads to the charges”)</li> </ul>	Informal Determining Factors NONE
Notes:	

<b>Decision: Whether to order probation to conduct a pre-disposition investigation (statutory authority unclear)</b>	
Formal Determining Factors <ul style="list-style-type: none"> <li>a. Nature of the offense</li> <li>b. Juvenile’s history</li> <li>c. Family and/or school problems</li> <li>d. Juvenile’s behavior</li> </ul>	Informal Determining Factors
Notes: In 99% of the cases a pre-disposition investigation is done.  *See NRS § 29-2261(2): A court may order a pre-sentence investigation in any case, except in cases in which an offender has been convicted of a Class IIIA misdemeanor, a Class IV misdemeanor, a Class V misdemeanor, a traffic infraction, or any corresponding city or village ordinance.	

<b>Decision: Whether to order OJS evaluation NRS § 43-281</b>	
Formal Determining Factors <ul style="list-style-type: none"> <li>a. Nature of the offense</li> <li>b. Juvenile’s history</li> </ul>	Informal Determining Factors <ul style="list-style-type: none"> <li>a. Family and/or school problems</li> <li>b. Juvenile’s behavior</li> </ul>
Notes:  *See also: NRS § 29-2204(3): Except when a term of life is required by law, whenever the defendant was under eighteen years of age at the time he or she committed the crime for which he or she was convicted, the court may, in its discretion, instead of imposing the penalty provided for the crime, make such disposition of the defendant as the court deems proper under the Nebraska Juvenile Code. Prior to	

making a disposition which commits the juvenile to the Office of Juvenile Services, the court shall order the juvenile to be evaluated by the office if the juvenile has not had an evaluation within the past twelve months.

***Decision: Whether to order a PDI or OJS Evaluation***

<p><b>Formal Determining Factors</b></p> <ul style="list-style-type: none"> <li>a. Presumably supplement each other</li> <li>b. Uncertainty about whether probation or commitment to OJS is in the juvenile's best interest</li> </ul>	<p><b>Informal Determining Factors</b></p> <ul style="list-style-type: none"> <li>a. Seriousness / Nature of the offense</li> <li>b. Juvenile history</li> <li>c. Family and/or school problems</li> <li>d. Juvenile's behavior</li> </ul>
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Notes:

**SYSTEM POINT:           DISPOSITION**  
 PARTY RESPONSIBLE: Juvenile Court Judge  
 STATUTE REFERENCE: NRS § 43-286 (1)

***Decision: Whether to place juvenile on probation*** NRS § 43-286(1)(a)(i)

<p><b>Formal Determining Factors</b></p> <ul style="list-style-type: none"> <li>a. Nature of the offense</li> <li>b. Treatment options available to the juvenile</li> </ul>	<p><b>Informal Determining Factors</b></p> <ul style="list-style-type: none"> <li>a. Family history</li> <li>b. School problems</li> <li>c. Behavior problems</li> </ul>
---	--

Notes:

***Decision: Whether to commit such juvenile to the Office of Juvenile Services*** NRS § 43-286(1)(b)

<p><b>Formal Determining Factors</b></p> <ul style="list-style-type: none"> <li>a. Office of Juvenile Services recommendation</li> <li>b. Juvenile's need of treatment</li> <li>c. Nature of the offense</li> </ul>	<p><b>Informal Determining Factors</b></p> <ul style="list-style-type: none"> <li>a. Family history</li> <li>b. School problems</li> <li>c. Behavior problems</li> <li>d. Juvenile history</li> </ul>
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Notes:

<b><i>Decision: Whether to place juvenile on probation and commit juvenile to HHS or OJS</i></b>	
<b>Formal Determining Factors</b> a. No apparent authority for delinquent in the legal custody of parents/guardian.	<b>Informal Determining Factors</b> a. Gives probation responsibility of supervision, but opens access to HHS/OJS funds for treatment or rehabilitation
<b>Notes:</b> <b>NO ONE AGENCY OR THE OTHER – EITHER / OR</b>  See Also, State v. David C., 6 Neb. App. 198, 572 N.W.2d 392 (1997): [9] It is clear that the court intended to commit David to the YRTC without actually revoking his probation. We can find no statutory basis for this procedure. Section 43-286 provides for the possible dispositions that a court may make, including continuing [*214] the disposition portion of the hearing and (1) placing the juvenile on probation subject to the supervision of a probation officer; (2) permitting the juvenile to remain in his or her [***31] own home, subject to the supervision of the probation officer; (3) placing the juvenile in a suitable home or institution or with the Department; or (4) committing him or her to OJS. <b>Section 43-286 provides no authority for a court to place a juvenile on probation under the care of OJS.</b> Section 43-286(4)(e) provides that if the court finds that the juvenile violated the terms of his or her probation, the court may modify the terms and conditions of the probation order, extend the period of probation, or enter "any order of disposition that could have been made at the time the original order of probation was entered . . . ." The court could not have originally entered an order providing for probation with commitment to YRTC, and it necessarily follows that the court could not enter such an order upon finding that the juvenile had violated the terms of his or her probation. The attempt to continue probation while committing David to a YRTC would also require a reversal of the order of April 30.	

**SYSTEM POINT: ADMINISTRATIVE SANCTIONS**

PARTY RESPONSIBLE: Probation

STATUTE REFERENCE: NRS § 29-2266

**Decision: Whether to impose administrative sanctions on a probationer**

Formal Determining Factors (NRS § 29-2266 (2))

- a. Probation officers has reasonable cause to believe that probationer has committed or is about to commit a substance abuse violation or a non-criminal violation
- b. Substance abuse violation refers to a positive test for drug or alcohol use, failure to report for such a test, or failure to comply with substance abuse evaluations or treatment
- c. Non-criminal violation means:
  - i. Moving traffic violations;
  - ii. Failure to report to his or her probation officer;
  - iii. Leaving the jurisdiction of the court or leaving the state without the permission of the court or his or her probation officer;
  - iv. Failure to work regularly or attend training school;
  - v. Failure to notify his or her probation officers of change of address or employment;
  - vi. Frequenting places where controlled substances are illegally sold, used, distributed, or administered;
  - vii. Failure to perform community service as directed;
  - viii. Failure to pay fines, courts costs, restitution, or any fees imposed pursuant to section 29-2262.06.

Informal Determining Factors

- a. has the juvenile started probation and has yet to start treatment
- b. is the juvenile taking own steps to correct behavior and it is a better course of action then the sanction
- c. have other sanctions already been tried and the same behavior has continued
- d. is the current placement in question in regard stability and contributions to positive outcomes.

Notes:

<b>SYSTEM POINT: MOTION TO REVOKE PROBATION</b>	
PARTY RESPONSIBLE: County Attorney	
STATUTE REFERENCE: NRS § 43-286(4)(b)(i)	
Formal Determining Factors Seriousness of the violation.	Informal Determining Factors What does the Probation Officer think should happen.
Notes:	

<b>SYSTEM POINT: MODIFICATION/REVOCATION OF PROBATION</b>	
PARTY RESPONSIBLE: Juvenile Court Judge	
STATUTE REFERENCE: NRS § 43-286(4)(b)(v)	
Formal Determining Factors  Treatment options. What programs are needed for the juvenile?	Informal Determining Factors  Look at where the juvenile is at, at that point in time?
Notes:	

<b>SYSTEM POINT: SETTING ASIDE ADJUDICATION</b>	
PARTY RESPONSIBLE: Juvenile Court Judge	
STATUTE REFERENCE: NRS § 43-2,104	
<b><i>Decision: Whether juvenile has satisfactorily completed his or her probation and supervision or the treatment program of his or her commitment</i></b> NRS § 43-2,102	
Formal Determining Factors (43-2,103) <ul style="list-style-type: none"> <li>a. Juvenile's post-adjudication behavior and response to treatment and rehabilitation programs</li> <li>b. Whether setting aside adjudication will depreciate seriousness of juvenile's conduct or promote disrespect for law</li> <li>c. Whether failure to set aside adjudication may result in disabilities disproportionate to the conduct upon which the adjudication was based.</li> </ul>	Informal Determining Factors  Has the juvenile been off of probation for one full year?

Notes: Never do it unless the juvenile has been off of probation for one full year.

***Decision: Whether juvenile should be discharged from the custody and supervision of OJS***

**Formal Determining Factors**

a. Presumably same as those for probation under NRS § 43-2,103

**Age of the Juvenile**

Age 18, subjected to prosecution in adult court for criminal charges.

**Informal Determining Factors**

Request of any of the parties.

**Notes:**

See Also, *In re Interest Tamantha S.*, 267 Neb. 78; 672 N.W.2d 24 (2003): it is clear under the language of § 43-408 that the committing court maintains jurisdiction over a juvenile committed to OJS, conducts review hearings every 6 months, and is to receive written notification of the placement and treatment status of juveniles committed to OJS at least every 6 months. See § 43-408(2) and (3). Thus, although the statute speaks of committed [\*\*28] juveniles' being "discharged from [OJS]," § 43-408(2), the statute does not explicitly say that OJS discharges the juveniles, and, on the contrary, the Legislature has explicitly mandated that the committing court "continues to maintain jurisdiction" over a juvenile [\*\*\*9] committed to OJS. *Id.* Therefore, while OJS may make an initial determination with regard to the advisability of the discharge of a juvenile committed to OJS, the committing court, as a result of its statutorily imposed continuing jurisdiction, must approve the discharge of the juvenile.

# APPENDIX B

## Buffalo County Youth Offender Results on the MAYSI-2 *2006-2011 Summary Report*

### Buffalo County Juvenile Services

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June 2012

Suggested Citation:



Financial support for this project was provided through the Strategic Prevention Framework State Incentive Grant (SPF SIG) funding from the Substance Abuse and Mental Health Services Administration (SAMHSA).

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## Introduction

### The MAYSI-2

The Massachusetts Youth Screening Instrument Version 2 (MAYSI-2) is a self-report inventory of 52 questions designed to assist juvenile justice facilities in identifying youth ages 12 to 17 years-old who may have special mental health needs. The 52 questions are aggregated into seven scales. Except for Traumatic Experiences, the scales give "Caution" and "Warning" indicators. Youth who score in the "Caution" range on a given scale register as having the most serious and alarming responses within a given scale. Youth who score in the "Warning" range on a given scale register as having less serious, but still concerning responses within a given scale. Because the Traumatic Experiences scale is not broken down into "Caution" and "Warning" indicators, for the purpose of this report they were categorized as "Traumatic Experiences (4-5)" and "Traumatic Experiences (2-3)." There are five items that make up the Traumatic experiences scale. Those who responded positively to four or five are categorized under "Traumatic Experiences (4-5)," which roughly equates to a "Caution" indicator. Those who responded positively to two or three are categorized under "Traumatic Experiences (2-3)," which roughly equates to a "Warning" indicator.

Below are descriptions of the MAYSI-2 scales.

#### **ALCOHOL/DRUG USE**

The AD scale is intended to identify youths who are using alcohol or drugs to a significant degree, and who are therefore at risk of substance dependence and/or abuse. The scale has eight items. Five of the items are concerned with various negative consequences of substance abuse, and the remaining three address characteristics of substance use that are thought to represent factors for abuse.

#### **ANGRY-IRRITABLE**

The AI scale is intended to assess explicit feelings of preoccupying anger and vengeance, as well as a general tendency toward irritability, frustration, and tension related to anger. The scale has 9 items. Four explicitly concern angry mood and thoughts, three others are concerned with irritability and risk of impulsive reactions, and the last two items pertain to behavioral expression of anger.

#### **DEPRESSED-ANXIOUS**

The DA scale is intended to elicit symptoms of mixed depression and anxiety. The scale has nine items. Five items inquire about manifestations of anxiety and inner turmoil, and four items are concerned with depressed mood.

#### **SOMATIC COMPLAINTS**

The SC scale includes six items that ask about various bodily aches and pains that may affect the youth, along with specific bodily expressions of anxiety. An elevated score on this scale could occur for a variety of reasons. For example, somatic complaints tend to co-occur with depression and anxiety, and sometimes they can be associated with trauma

history and with thought disorder as well. On the other hand, aches, pains, and other somatic complaints may be symptoms of physical illness, and such complaints should not be overlooked as symptoms in their own right.

### **SUICIDE IDEATION**

The SI scale has five items. Three of them specifically address thoughts and intentions about self-harm and two involve depressive symptoms that may present an increased risk for suicide. One of the items is shared with the DA scale.

### **THOUGHT DISTURBANCE (BOYS ONLY)**

The TD scale is intended to indicate the possibility of serious mental disorder involving problems with reality orientation. The scale has five items, four of which refer explicitly to altered perceptions in reality that are frequently associated with psychotic disorders. The remaining item refers to a condition of derealization ("things don't seem real") that is a more general abnormality of perception and consciousness. It is sometimes an early indication of a psychotic state, but it may simply arise in anxiety or dissociative states as well. In the study with which the MAYSI-2 was developed, the various ways that we used to identify which items came together as scales did not identify a "thought disturbance" scale for girls using MAYSI-2 items. Thus the TD scale should not be applied to girls.

### **TRAUMATIC EXPERIENCES**

The TE scale is intended to identify whether a youth has had greater exposure to traumatic events compared to other youths. Unlike other MAYSI-2 items, the TE items ask for responses regarding events or feelings over the youth's entire lifetime rather than just the "past few months." There are separate TE scales for boys and girls.

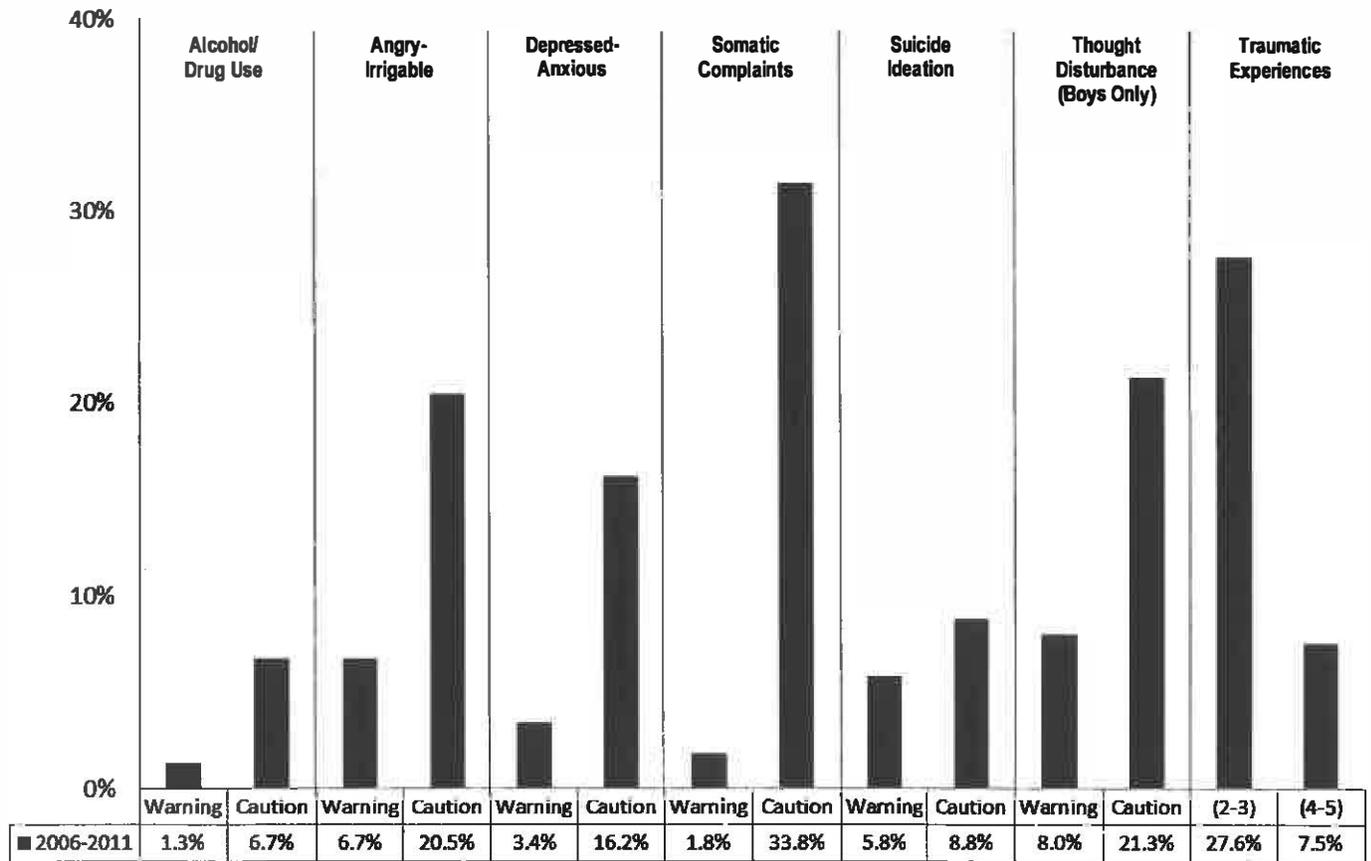
### **Participants**

MAYSI-2 data on 615 youth ages 11-18 referred to Buffalo County Juvenile Services were compiled from 2006-2011. The majority of the participants (72.9%) were ages 15-17. Almost two-thirds (63.3%) were male and 86.6% identified as white. Minority participants identified as Hispanic/Latino/Mexican (4.2%), Black/African American/African (2.8%), Native American/American Indian (1.8%), Asian (0.5%), Pacific Islander (0.2%) or Other (3.9%). All 615 of the youth were referred to Juvenile Services due to a criminal charge. Charges included alcohol, tobacco, and drug offenses, 3rd degree assaults, theft and shoplifting offenses, criminal mischief, disorderly conduct, trespassing, vandalism, disturbing the peace, arson, terroristic threats, obstructing a police officer, unauthorized access of a computer, curfew violation, and other misdemeanor offenses.

## MAYSI-2 Results Overall and by Year

The most commonly registered scale for the 615 youth screened by the MAYSI-2 in Buffalo County from 2006-2011 was Somatic Complaints, with approximately one-third of all youth identified in the "Caution" area. Over one-fourth of the youth identified two or three items within the traumatic experience category. Over 20% registered as "Caution" on the Angry-Irritable and Thought Disturbance (Boys Only) scales. For each of the scale items, with the exception of Traumatic Experiences, the "Caution" area of the scale had notably higher rates of registry than the "Warning" area (Figure 1).

**Figure 1. Overall MAYSI-2 Results (2006-2011)**



For several of the scale items, 2011 appears to mark a low point in the rate of youth being registered. In fact, 2011 marked the six-year low point of youth registering in the "Caution" area for the Alcohol/Drug Use, Angry-Irritable, Depressed-Anxious, Thought Disturbance (Boys), and Traumatic Experiences (4-5) scales. High points for youth registering in the "Caution" area were marked for four out of the seven scales at some point during the years of 2007 to 2009 (Table 1).

**Table 1. MAYSI-2 Results by Year**

	2006	2007	2008	2009	2010	2011
<b>Alcohol/Drug Use Warning</b>	1.2%	0.0%	0.9%	2.9%	3.2%	0.0%
<b>Alcohol/Drug Use Caution</b>	4.8%	9.1%	9.0%	8.6%	5.3%	4.2%
<b>Angry-Irritable Warning</b>	7.1%	9.1%	7.2%	6.7%	7.4%	4.2%
<b>Angry-Irritable Caution</b>	17.9%	22.1%	24.3%	25.7%	23.2%	11.9%
<b>Depressed-Anxious Warning</b>	1.2%	3.9%	5.4%	3.8%	4.2%	2.1%
<b>Depressed-Anxious Caution</b>	16.7%	19.5%	14.4%	16.2%	23.2%	11.2%
<b>Somatic Complaints Warning</b>	1.2%	1.3%	1.8%	3.8%	1.1%	1.4%
<b>Somatic Complaints Caution</b>	28.6%	28.6%	36.9%	36.2%	36.8%	33.6%
<b>Suicide Ideation Warning</b>	4.8%	6.5%	6.3%	5.7%	7.4%	4.9%
<b>Suicide Ideation Caution</b>	8.3%	10.4%	7.2%	8.6%	11.6%	7.7%
<b>Thought Disturbance Warning*</b>	6.8%	9.1%	6.3%	13.9%	8.3%	3.2%
<b>Thought Disturbance Caution*</b>	20.3%	18.2%	21.3%	26.4%	25.0%	15.9%
<b>Traumatic Experiences (2-3)</b>	26.2%	36.4%	33.3%	28.6%	28.4%	18.2%
<b>Traumatic Experiences (4-5)</b>	7.1%	9.1%	7.2%	9.5%	10.5%	3.5%

\*Boys only

## MAYSI-2 Results by Criminal Charge

Criminal charges were placed into one of four categories for the purpose of this report:

1. Alcohol, Tobacco, and Drug Offenses
2. 3rd Degree Assaults
3. Theft/Shoplifting Offenses
4. Other (includes criminal mischief, disorderly conduct, trespassing, vandalism, disturbing the peace, arson, terroristic threats, obstructing a police officer, unauthorized access of a computer, curfew violation, and other misdemeanor offenses)

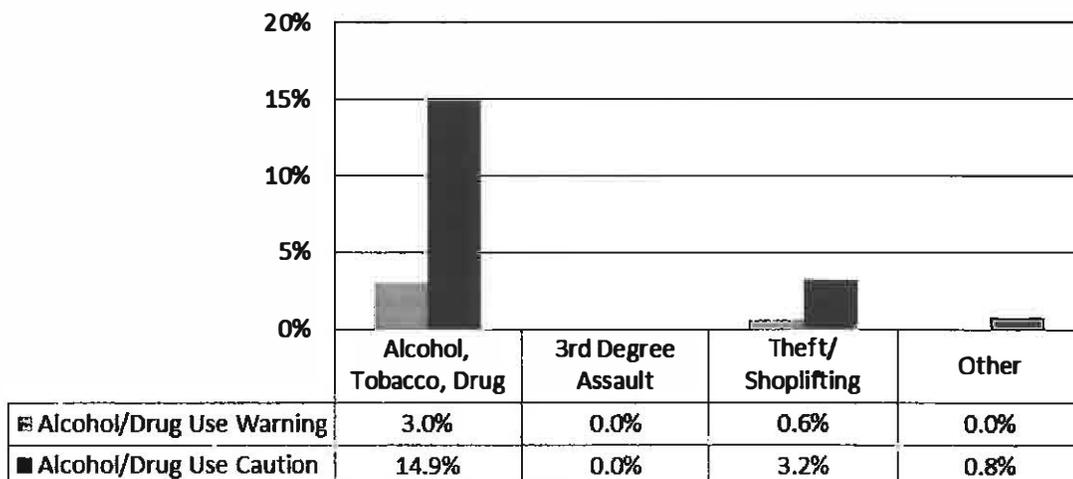
In several instances, a youth had multiple charges. For the purpose of this report, these youth were categorized into one of the first three categories if one of their charges fit with one of the categories. In the rare case where there were two or more charges that fit with one of the first three categories, the youth were identified with the most serious charge. Table 2 contains the breakdown of the youth by charge.

**Table 2. Criminal Charges (2006-2011)**

Alcohol, Tobacco, and Drug	3rd Degree Assaults	Theft/Shoplifting	Other
235 (38.2%)	95 (15.4%)	157 (25.5%)	128 (20.8%)

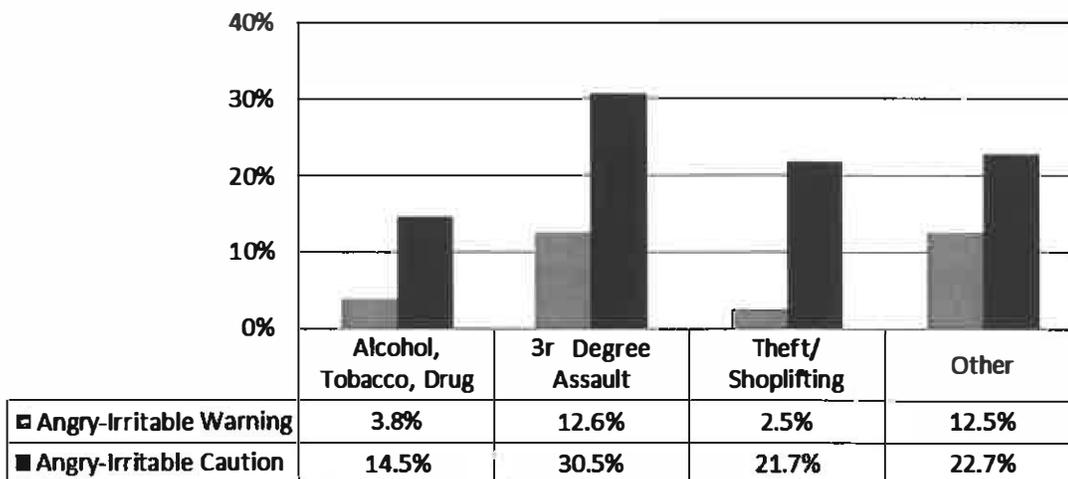
Alcohol/Drug Use was the most uncommonly registered scale among the youth. However, among those who were charged with alcohol, tobacco, or drug offenses, 14.9% registered in the "Caution" area and 3.0% in the "Warning" area (Figure 2).

**Figure 2. Alcohol/Drug Use by Charge (2006-2011)**



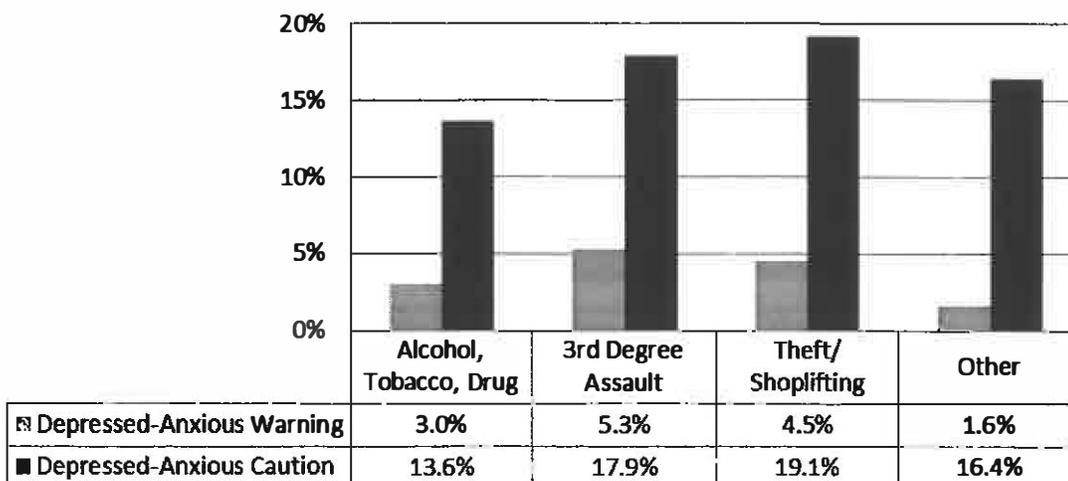
Youth who were charged with 3rd degree assault were the most likely to register in the "Caution" area on the Angry-Irritable scale, registering at a rate of 30.5%. Another 12.6% of 3rd degree assault offenders registered in the "Warning" area of the Angry-Irritable scale. Youth charged with alcohol, tobacco, or drug offenses were the least likely to register on the Angry-Irritable Scale, registering in the "Caution" area at a rate of 14.5% (Figure 3).

**Figure 3. Angry-Irritable by Charge (2006-2011)**



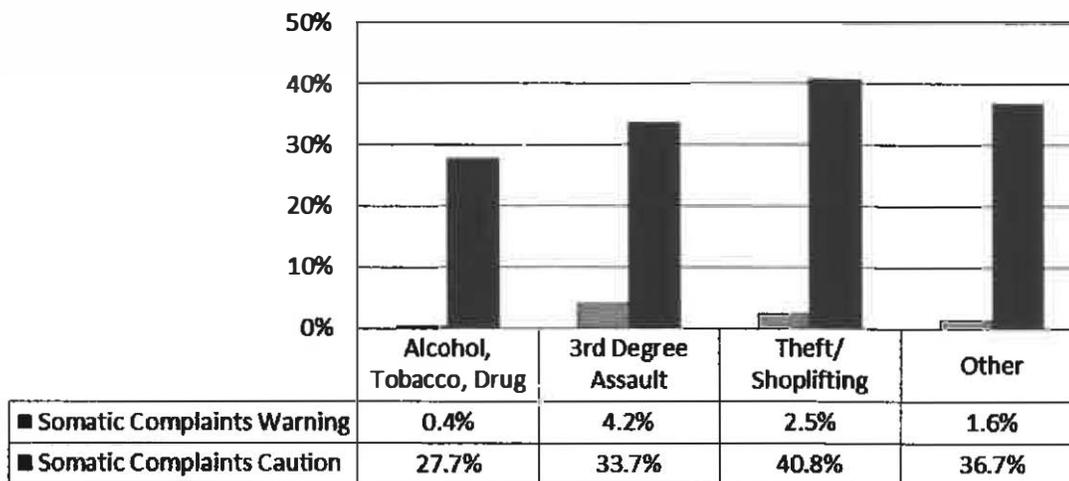
Youth charged with theft/shoplifting offenses and 3rd degree assault had the highest rates of "Caution" registry on the Depressed-Anxious scale, with rates just below 20%. Youth charged with alcohol, tobacco, and drug offenses again had the lowest rates of registry, with 13.6% in the "Caution" area for the Depressed-Anxious scale of the MAYSI-2 (Figure 4).

**Figure 4. Depressed-Anxious by Charge (2006-2011)**



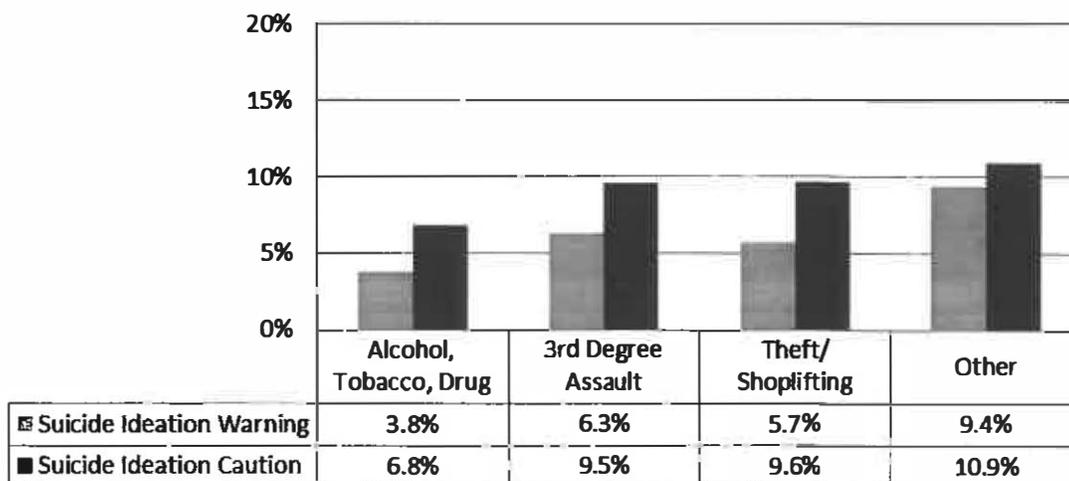
Overall, Somatic Complaints was the most commonly registered scale in the "Caution" area. Just over 40% of youth charged with theft/shoplifting registered in the "Caution" area of the Somatic Complaints scale, followed by offenders of other crimes (36.7%), 3rd degree assault offenders (33.7%), and alcohol, tobacco, and drug offenders (27.7%) were again the group with the lowest rates of "Caution" registry on the scale (Figure 5).

**Figure 5. Somatic Complaints by Charge (2006-2011)**



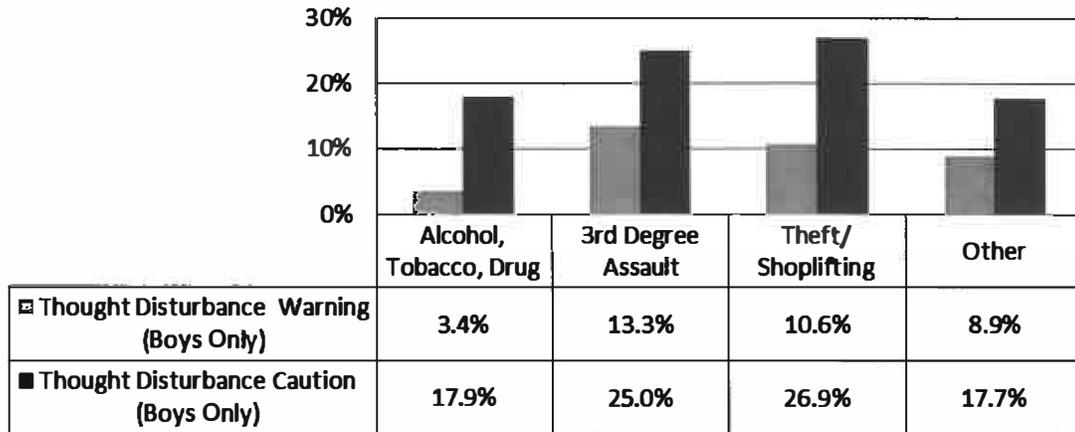
There does not appear to be a strong correlation between the Suicide Ideation scale and charge. Youth charged with alcohol, tobacco, and drug offenses were once again the least likely group to register in the "Warning" or "Caution" areas on this scale. The remaining three categories were largely comparable, with youth charged with other offenses having slightly higher levels of registry for both the "Warning" and "Caution" areas (Figure 6).

**Figure 6. Suicide Ideation by Charge (2006-2011)**



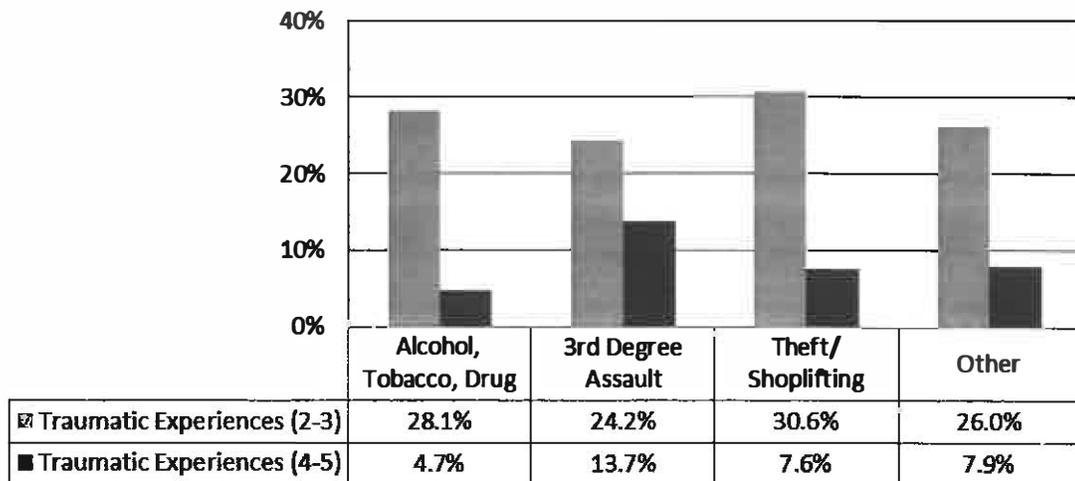
Only the MAYSI-2 scores for boys were tabulated into the Thought Disturbance scale. Boys charged with 3rd degree assault or theft/shoplifting offenses had the highest rates of "Warning" and "Caution" registry, with around 25% registering in the "Caution" area on the Thought Disturbance scale (Figure 7).

**Figure 7. Thought Disturbance (Boys Only) by Charge (2006-2011)**



As noted in the Introduction, the Traumatic Experiences scale is not broken down into "Warning" and "Caution" areas. For the purpose of this report, youth who identified two to three items or four to five items out of a possible five on the traumatic experienced scale were documented. Regardless of crime, there was a fairly high rate (around 25% to 30%) of registry on the lower end of the scale (i.e., 2-3). Youth charged with assault had the highest rates of registry on the high end of this scale, with 13.7% documenting 4 to 5 items on the Traumatic Experiences scale (Figure 8).

**Figure 8. Traumatic Experiences by Charge (2006-2011)**



## MAYSI-2 Results by Age

Youth were grouped into three age categories (11-13, 14-15, and 16-18). Table 3 contains the breakdown of the youth by age.

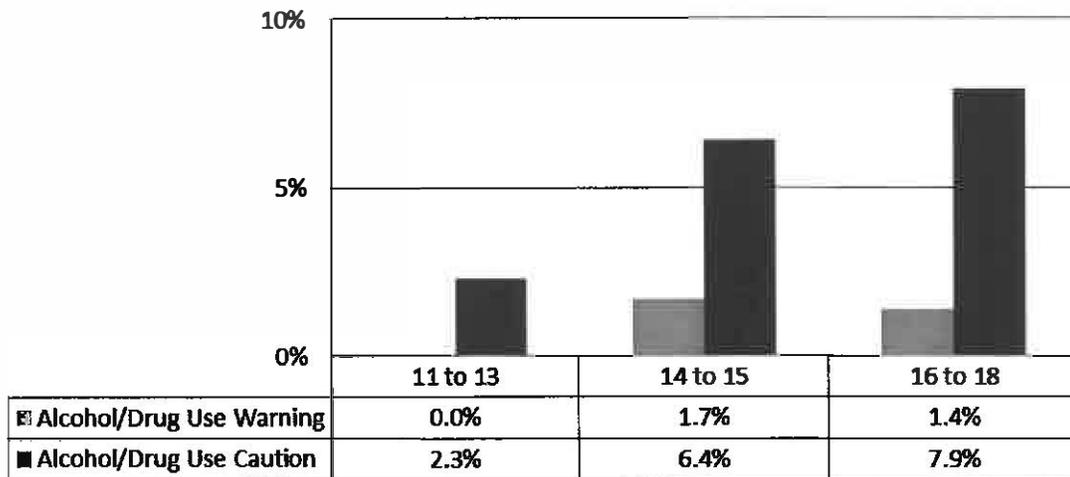
**Table 3. Age**

11-13	14-15	16-18
87 (14.2%)	172 (28.0%)	355 (57.8%)

Note: There were only 5 11 year-olds and 15 18 year-olds.

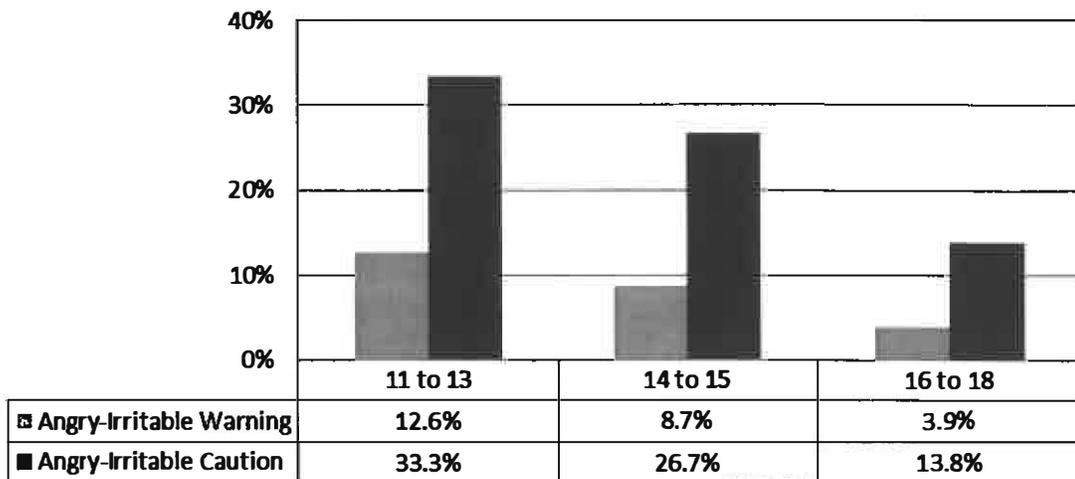
With the increase in age, there was a corollary increase in "Caution" registry on the Alcohol/Drug Use scale (Figure 9).

**Figure 9. Alcohol/Drug Use by Age (2006-2011)**



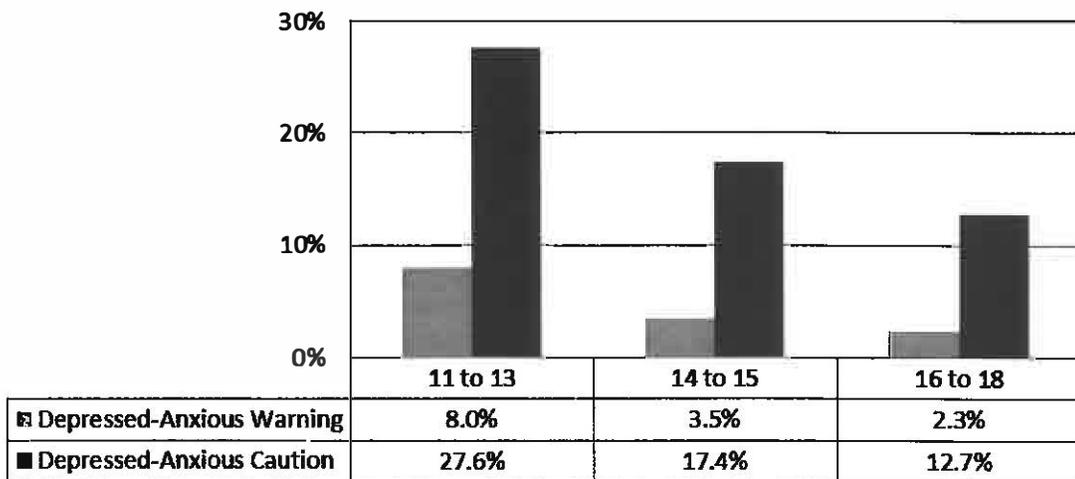
With the increase in age, there was a corollary decrease in registry on the Angry-Irritable scale, with one-third of all 11 to 13 year-olds registering in the "Caution" area (Figure 10).

**Figure 10. Angry-Irritable by Age (2006-2011)**



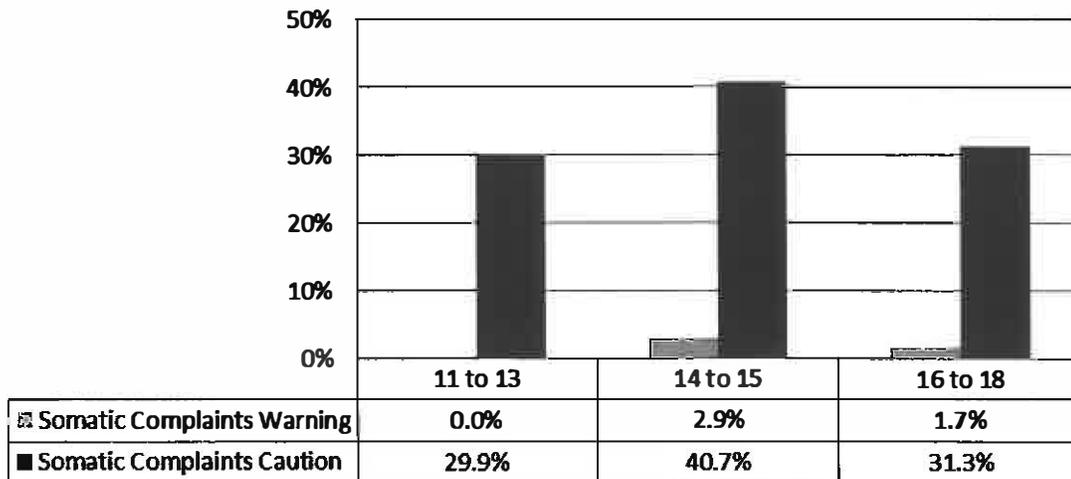
Again, younger offenders had the highest rates of "Warning" and "Caution" registry on the Depressed-Anxious scale, with 27.6% registering in the "Caution" area, which was notably higher than their older peers (Figure 11).

**Figure 11. Depressed-Anxious by Age (2006-2011)**



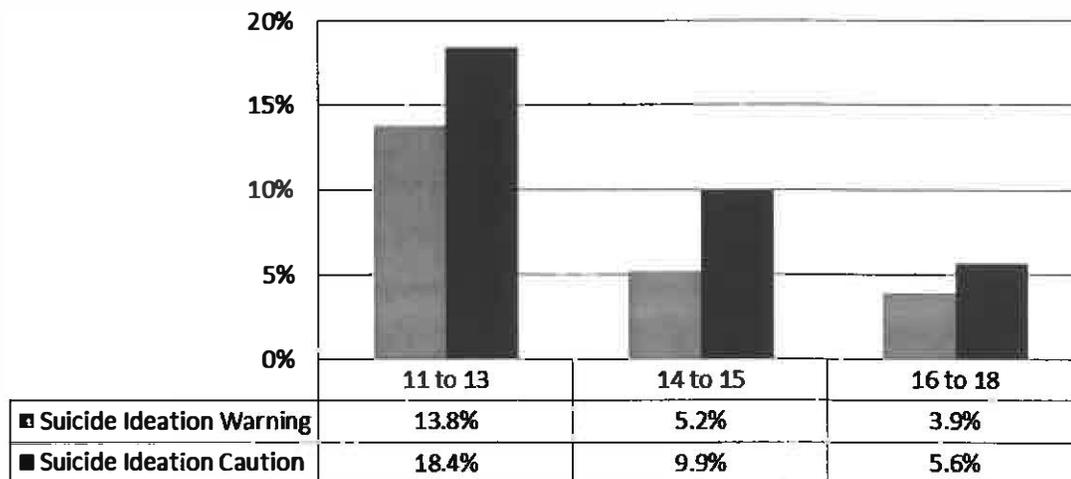
Youth ages 14 to 15 registered highest on the Somatic Complaints scale, with 40.7% registering in the "Caution" area. Youth ages 11 to 13 and 16 to 18 had a comparable rate of around 30% for "Caution" registry on the Somatic Complaints scale (Figure 12).

**Figure 12. Somatic Complaints by Age (2006-2011)**



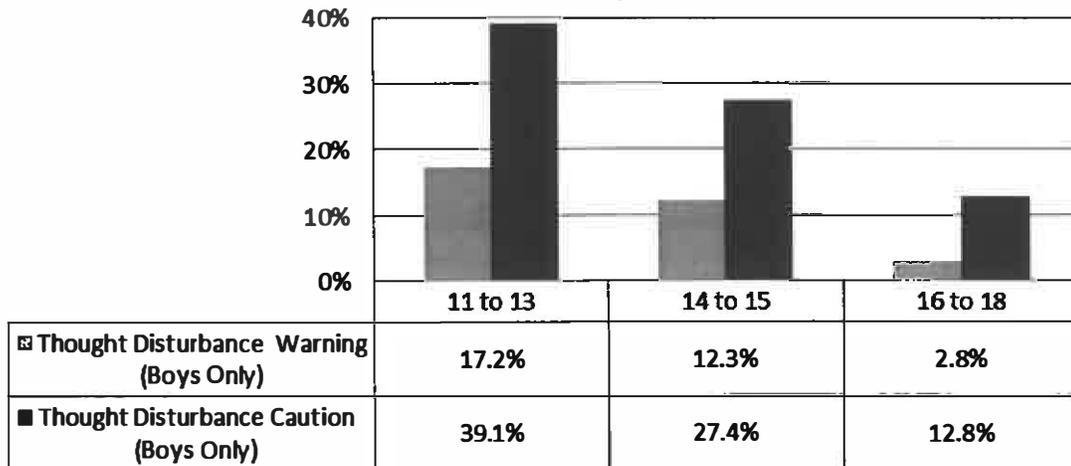
Youth ages 11 to 13 had notably higher rates of "Warning" and "Caution" registry on the Suicide Ideation scale, with 18.4% registering in the "Caution" area. The rates of registry on this scale decreased with age (Figure 13).

**Figure 13. Suicide Ideation by Age (2006-2011)**



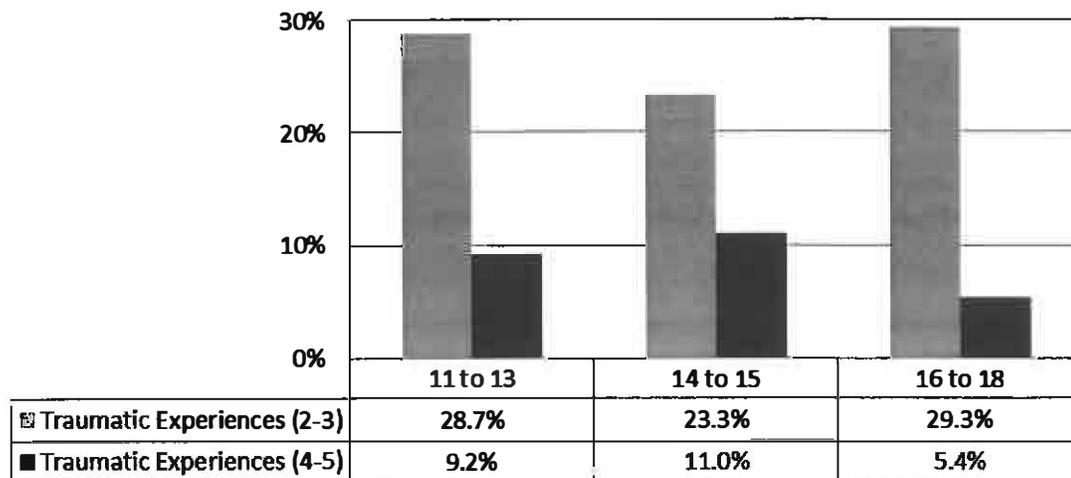
Thought Disturbance was most prevalent in the 11 to 13 year-old group, with 39.1% of boys registering in the "Caution" area. Once again, rates of registry on this scale decreased with age (Figure 14).

**Figure 14. Thought Disturbance (Boys Only) by Age (2006-2011)**



Participants ages 11 to 13 and 14 to 15 were around twice as likely to register on the high end of the Traumatic Experiences scale (i.e., 4-5) compared to 16 to 18 year-olds, with the 14 to 15 year-old group having the highest rate of registry on the high end at 11.0%.

**Figure 15. Traumatic Experiences by Age (2006-2011)**

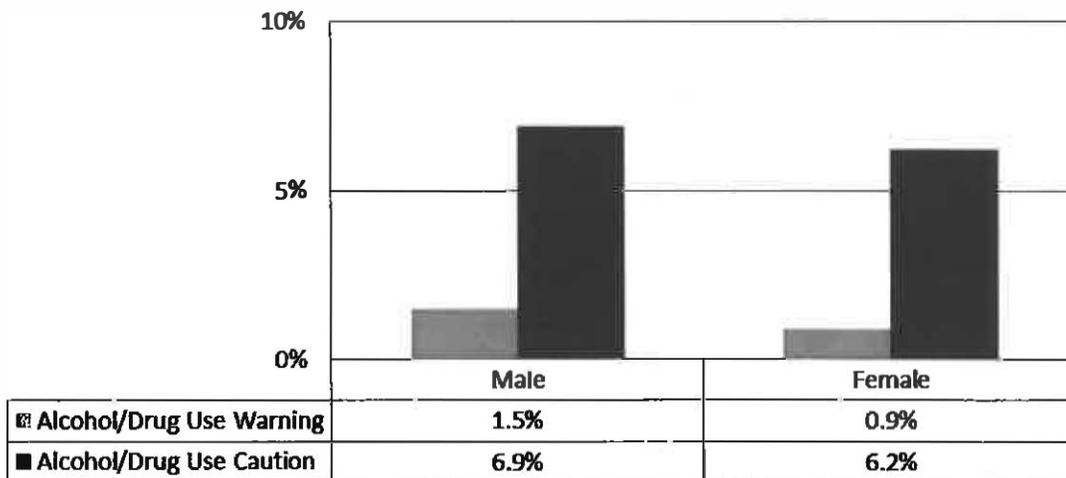


## MAYSI-2 Results by Gender

Of the 615 youth screened by the MAYSI-2, 63.3% were male and 36.7% were female.

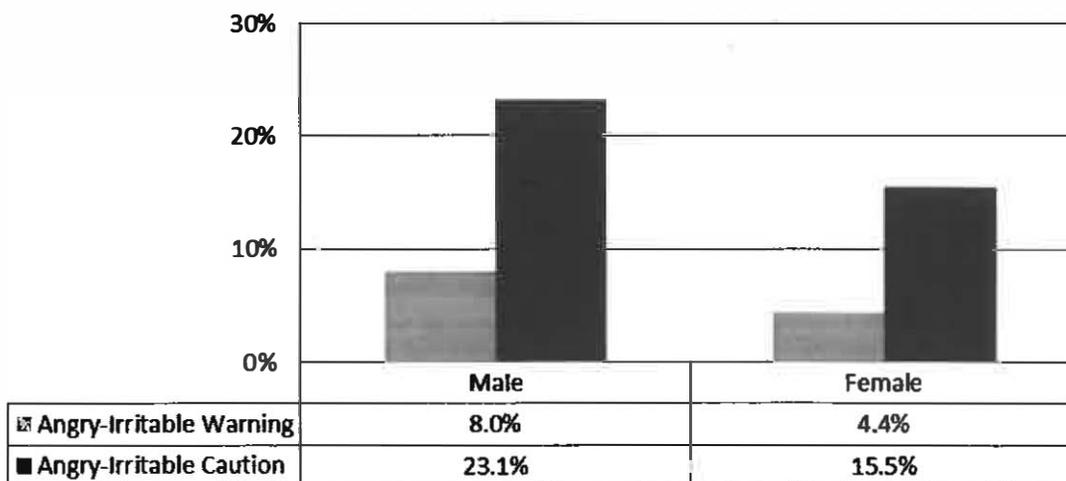
There does not appear to be a substantial difference between males and females with regard to registry on the Alcohol/Drug Use scale (Figure 16).

**Figure 16. Alcohol/Drug Use by Gender (2006-2011)**



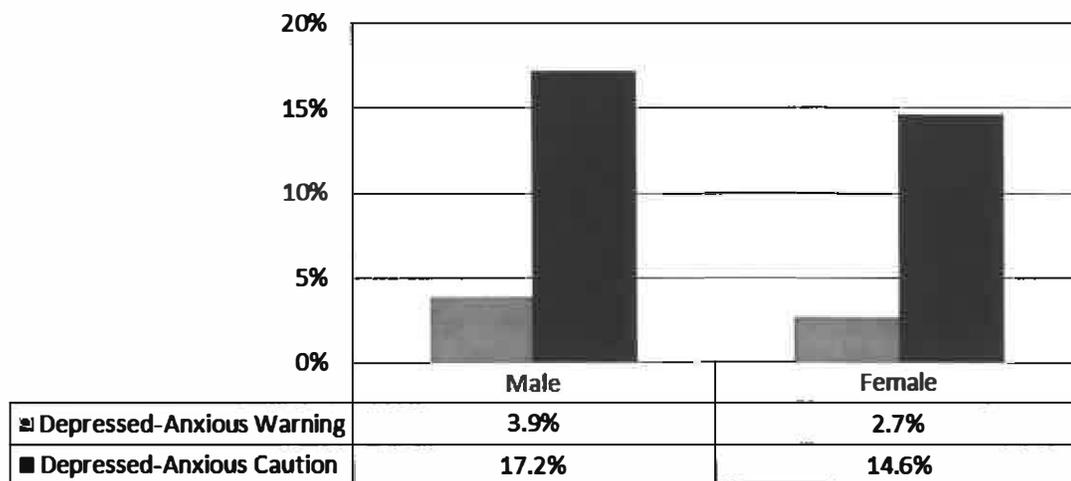
Males had higher rates of registry in both the "Warning" and "Caution" areas on the Angry-Irritable scale compared to females, with 23.1% of all males registering in the "Caution" Area, compared to 15.5% for females (Figure 17).

**Figure 17. Angry-Irritable by Gender (2006-2011)**



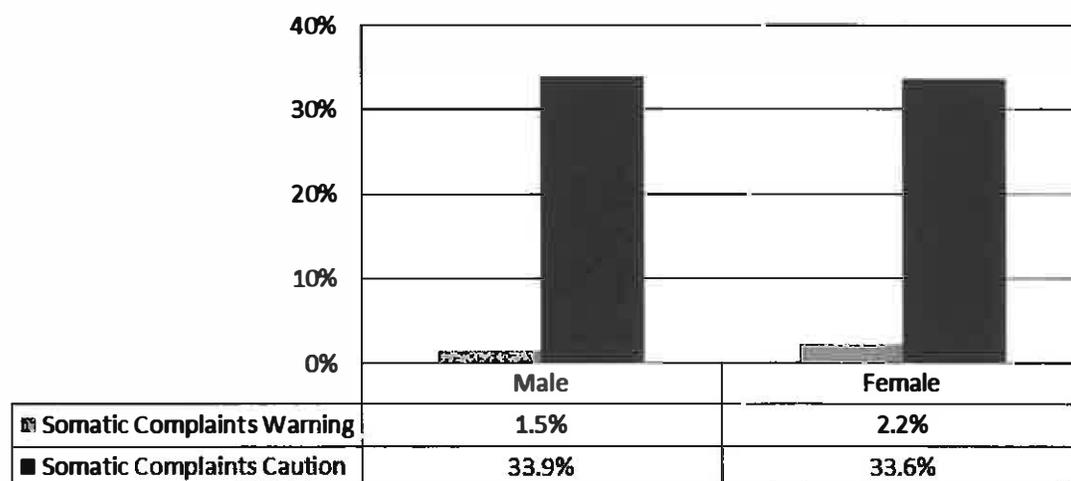
Males had a slightly higher rate of registry on the Depressed-Anxious scale, with 17.2% registering in the "Caution" area, compared to 14.6% for females (Figure 18).

**Figure 18. Depressed-Anxious by Gender (2006-2011)**



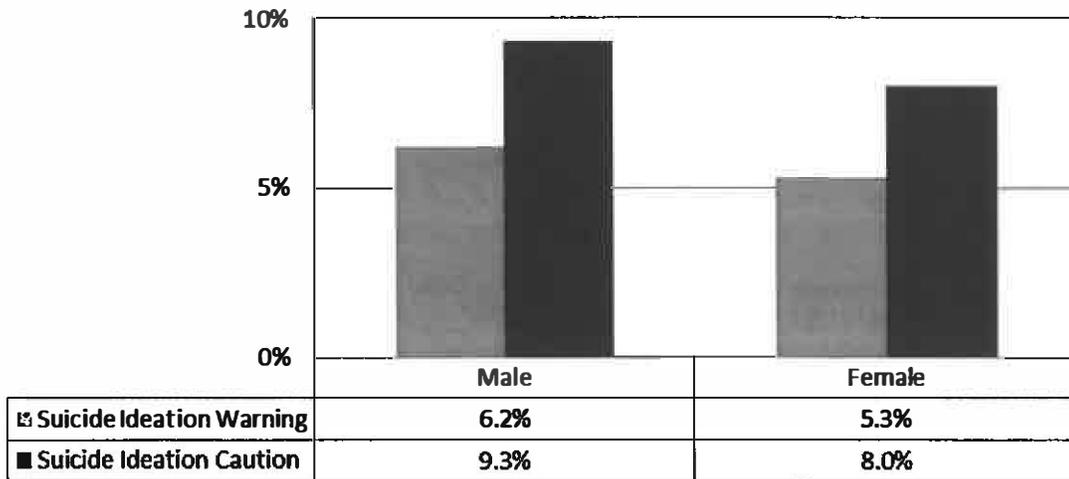
There do not appear to be any significant differences between gender on the Somatic Complaints scale. Just over one-third of males and females registered in the "Caution" area (Figure 19).

**Figure 19. Somatic Complaints by Gender (2006-2011)**



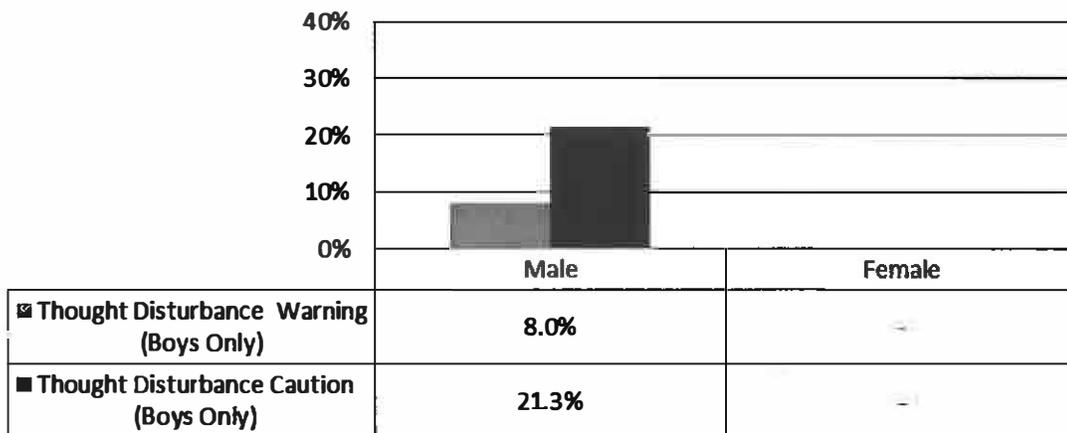
Males had slightly higher rates of Suicide Ideation compared to females, with 9.3% registering in the "Caution" area, compared to 8.0% for females (Figure 20).

**Figure 20. Suicide Ideation by Gender (2006-2011)**



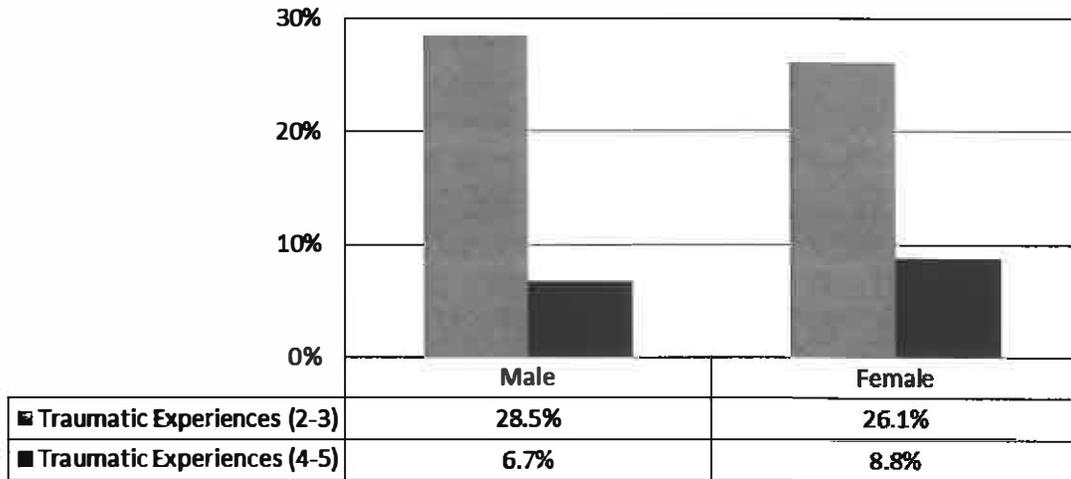
Only males are tabulated on the Thought Disturbance scale. Over 20% of all boys registered in the "Caution" area (Figure 21).

**Figure 21. Thought Disturbance (Boys Only) by Gender (2006-2011)**



There do not appear to be any substantial difference between genders on the Traumatic Experiences scale. Males had slightly higher rates of registry on the lower end of the scale (i.e., 2-3), while females had slightly higher rates on the higher end of the scale (i.e., 4-5) (Figure 22).

**Figure 22. Traumatic Experiences by Gender (2006-2011)**



## Summary

The most commonly registered MAYSI-2 scales among youth ages 11-18 referred to Buffalo County Juvenile Services were Somatic Complaints, Traumatic Experiences, Thought Disturbance (Boys), and Angry-Irritable. There was some variation across years, with 2007-2009 marking a high point in registry rates for a majority of the scales (4 out of 7), and 2011 marking a low point in registry rates for a majority of the scales (5 out of 7).

There were several noteworthy differences between the various criminal charges that led to the youth being referred to Juvenile Services. Alcohol, tobacco, and drug offenders generally had lower rates of registry on the MAYSI-2 scales, with the exception of the Alcohol/Drug Use scale, on which they had substantially higher rates of "Warning" and "Caution" registry compared to youth offenders of other crimes. Youth who were charged with 3rd degree assault had high rates of registry on the Angry-Irritable, Depressed-Anxious, Thought Disturbance (Boys), and Traumatic Experiences Scales. Youth who were charged with Theft/Shoplifting had high rates of registry on the Depressed-Anxious, Somatic Complaints, and Thought Disturbance (Boys) Scales.

The majority of the MAYSI-2 scales tended to have lower rates of registry as age increased. This is true for the Angry-Irritable, Depressed-Anxious, Suicide Ideation, and Thought Disturbance (Boys) Scales. The only scale that exhibited an increase in registry rates with age was the Alcohol/Drug Use scale. The Somatic Complaints and Traumatic Experiences had slightly elevated registry rates among the middle age group (i.e., 14-15 year-olds).

Males generally had slightly higher rates of registry on the seven scales compared to females. Males had notably higher rates of registry on the Angry-Irritable scale. Females had slightly higher rates of registry on the high end (i.e., 4-5) of the Traumatic Experiences scale.

For more information on the MAYSI-2 visit [www.maysiware.com/MAYSI2.htm](http://www.maysiware.com/MAYSI2.htm).

## **APPENDIX C**

# High Impact Prevention Services

## POSITIVE PRESSURE

A GOAL WORK GROUP OF BUFFALO COUNTY COMMUNITY PARTNERS

*Goal: To improve the health and quality of life in Buffalo County through prevention, leveraging and collaboration, planning, and programming. To aid communities in the coordination and integration of resources, and use of evidence-based practices to improve health and well-being.*

### *Accomplishments:*



*"Your investment has made a difference in our community. We have noted an improvement in substance-abuse related health issues in Buffalo County. However, our work is not done. It is our collective responsibility to continue to support and engage in prevention efforts to ensure that our youth become healthy and productive adults." Jessica Carter, Positive Pressure Coalition Coordinator*

# Our Partners

"The Positive Pressure Coalition contributes to the school's efforts to keep students informed and safe regarding health and personal well-being. We welcome their partnership"

-Carol Renner, Assistant Superintendent of Kearney Public Schools



Youth & Schools

## Local Government

"Positive Pressure has been a great resource...while serving on the City Council by providing 'real world' information. By helping me understand how our community can be more proactive, we have been able to create policies that focus on positive results, not just negative consequences."

-Bruce Lear, Senior Vice President, Black Oak Investment Counsel & City of Kearney Councilman



## Health Care & Mental Health

"It's important for students' physical and mental well-being to engage with those around them because it's proven to reduce high-risk behaviors. Positive Pressure is a great community partner in achieving these goals." -Ismael Torres, Peer Health Educator, University of Nebraska at Kearney



"[Our daughter] Jenna has had some amazing opportunities for leadership by caring adult coordinators."

-Leslie Martin, Parent of Youth Advisory Board student, Pleasanton



Parents

\*Also includes: Community members, media, civic groups, faith community, businesses, youth serving organizations and state agencies.



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**Other Coalition Members:** Denise Zwiener: Buffalo County Community Partners, Tiffany Gressley & Jenny Brown: Region 3 Behavioral Health Services, Doug Kramer: Buffalo County Attorney's Office, Terry Krohn, Heather Easton & Audrey Sinn: Two Rivers Public Health Department, Shawna Snider: Good Samaritan Hospital, LeAnn Obrecht, Greg Sandman, Ismael Torres & Tom Knott: University of Nebraska at Kearney, Joe Debban: Good Samaritan Hospital, Linda Neemeyer: Speedee Mart, Eph Valenzuela: Buffalo County Sheriff's Office, Joyce Schmeekle: Schmeekle Research Inc., and Deb Iwan: Buffalo County Reporting Center