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March 21, 2023

**Ohio House Finance Subcommittee on Public Safety  
Interested Party Testimony on House Bill 33**

Thank you, Chair Kevin Miller, Ranking Member Adam Miller, and Members of the House Finance Subcommittee on Public Safety, for the opportunity to provide interested party testimony on House Bill 33.

My name is Leah Winsberg, and I'm a Staff Attorney with the Children's Law Center, Inc. (CLC). Established in 1989, CLC is a non-profit legal service center protecting the rights of children and youth to help them overcome barriers and transition into adulthood, better advocate for their needs, and successfully contribute to society. As an organization that is committed to protecting the rights of children and improving the systems that serve them, I offer this testimony on the Department of Youth Services' (DYS) proposed budget for fiscal years (FY) 2024-2025.

For over 15 years, I have worked with children and youth and advocated for child policy and practice improvements in child welfare and justice systems. CLC recognizes that the fundamental differences between youth and adults require our youth-serving systems to promote and utilize adolescent development research in tailoring interventions and services to meet the needs youth. Eliminating the unnecessary use of incarceration and out-of-home placements, meeting behavioral health needs, and creating positive strength-based programs for youth are essential in facilitating positive outcomes. As such, CLC believes it is a priority for Ohio to invest in more humane and effective alternatives to incarceration within local communities. Research shows that in order to achieve the best outcomes for youth and the general public we need to use community-based, empirically supported intervention practices as an alternative to incarceration wherever possible.

**Increased Funding is Needed to Sustain Proven, Community-Based Programs.**

HB 33 proposes a 19.6% increase from the FY22-23 DYS RECLAIM Line Item 470401. Yet, the vast majority of funding is allocated for institutions – Juvenile Correctional Facilities (JCFs), Private Facilities, and Community Corrections Facilities (CCFs) – without a proportional increase for community programs.

Out of the total RECLAIM increase to \$205 million in FY24, a mere \$2 million is allocated for an increase in county subsidies. No increase is proposed for supporting *proven-effective* programming (Behavioral Health/Juvenile Justice (BHJJ) Initiative, Targeted RECLAIM, and Competitive RECLAIM). Only about 20% of overall RECLAIM funds are slated for community and within that funding, only \$12 million goes towards supporting BHJJ, Targeted RECLAIM, and Competitive RECLAIM.

In fact, our young people tell us that these evidence-based community programs are exactly what they need. Below are direct quotations provided by justice-involved youth in Ohio:<sup>1</sup>

"Offer counseling and programs to try to help the kid. Not lock them up every time they get into trouble." - W.F.

"Sending them to prison is the law's only way to fix them. Why not try more programs to help re-create their minds and give them a future and see a better path in life because prison only helps build hate in the heart and mind." - D.I.

We support funding to expand capacity at Paint Creek, cost-of-living adjustments at CCFs, and other financial supports to maintain quality alternative and private placements. We also recognize the need to allocate additional funds to ensure proper staffing in the JCFs. Indeed, a well-trained, adequately staffed, and supported workforce ensures that the youth committed to DYS facilities are provided with programming, education, court-mandated treatment, recreation, and other services critical to their health, safety, wellbeing, and rehabilitation. However, just as DYS facilities and alternative institutions are facing serious challenges with recruitment and retention of staff to serve the most vulnerable and highest-needs youth, community programs serving justice-involved youth likewise face unprecedented workforce challenges.

### **Community Programming Provides a Safer, More Effective Approach to Youth Delinquency.**

Community programs are tasked with providing interventions to youth to ultimately avoid out-of-home placements and in lieu of sending youth to DYS facilities. We urge considering the budget through a lens of right-sizing community programs in conjunction with DYS facilities, given these programs are highly successful and cost-effective. Consider the following relevant data points:<sup>2</sup>

- The average length of stay for youth in a JCF is **16.4 months**—whereas the average stay in a CCF is **6.4 months** and the average program completion for BHJJ is **6.5 months**.
- The average cost of committing a child to a JCF is **\$321,777** and with marginal costs (food, clothing, medical, treatment) it costs **\$342,240** compared to an average cost of **\$5,200** for a child to complete BHJJ.
- The most recent recidivism rates for youth committed to a JCF were **13.9%** (after 1-year), **29%** (after 2 years), and **43.2%** (after 3 years)—whereas only **3.8%** of BHJJ youth were subsequently committed to a DYS facility.

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<sup>1</sup> W.F. and D.I.'s quotations and others throughout this testimony are from CLC's Storytelling Project, featuring stories from youth who have gone through the bindover process and their families. Their full stories can be found in CLC's Publication *In Their Own Words*: <https://ohiobindover.wordpress.com/>

<sup>2</sup> Department of Youth Services Reports, *Monthly Fact Sheets* (February 2023), <https://www.dys.ohio.gov/static/About+DYS/Communications/Reports/Monthly+Fact+Sheets/DYS+Monthly+Fact+Sheet+February+2023.pdf>. Case Western Reserve University, Executive Summary: *An Evaluation of Ohio's Behavioral Health/Juvenile Justice Initiative* (August 2020), <https://case.edu/socialwork/begun/sites/case.edu.begun/files/2020-09/Statewide%20BHJJ%20Evaluation%20Executive%20Summary%202019.pdf>. Department of Youth Services, Reports, *Recidivism Fact Sheet*, <https://www.dys.ohio.gov/static/About+DYS/Communications/Reports/Recidivism+Fact+Sheet.pdf>



Since their inception, congregate youth care facilities have provided poor public safety outcomes while exposing youth to maltreatment and abuses, and unconstitutional conditions. This is true nationally, despite genuine, dedicated efforts to improve such facilities. Ohio is not exempt from these challenges.<sup>3</sup> Ohio was the only state ranked “high” for its rate of sexual victimization of youth in JCFs based on national 2018 data reported by the DOJ.<sup>4</sup> And in 2021, a study revealed devastating mortality outcomes for formerly incarcerated youth in Ohio—comparing Medicaid-enrolled youths, boys were six-times and girls nine-times more likely to die after release from DYS than youth who weren’t incarcerated.<sup>5</sup>

“So I know from experience that they need to create more beneficial ways to help kids and stop locking them up. More connection with family instead of taking away the family. They seem to be ignorant minded when it come’s to what is helpful for today’s adolescents in this world. But that is my opinion on what desperately needs to change with the juvenile system.” - B.C.

CLC attorneys have been the catalyst for a number of civil rights cases that helped to transform DYS to ensure better outcomes for children and safer facilities. CLC worked collectively with DYS to create a comprehensive approach, through a federal litigation settlement agreement, that included a long-term goal of closing large institutional JCFs and create a system of smaller, community-based rehabilitative programming.<sup>6</sup>

DYS has made substantial improvements and continues to encourage counties to take innovative approaches to address and reduce delinquency through RECLAIM grants. Nevertheless, the historical challenges that persist in these facilities lend increasing support for the need to adequately invest in community-based alternatives.

**It is a Critical Time to Support the Increasing Needs of Adolescents in the Juvenile Justice System.** Our system is at a critical inflection point given the COVID-19 Pandemic caused an unprecedented mental health crisis among youth.<sup>7</sup> A variety of factors that increase the likelihood of

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<sup>3</sup> Channel 3, *Superintendent of Indian River Juvenile Correctional Facility in Stark County fired after investigation* (Feb. 17, 2023) <https://www.wkyc.com/article/news/local/stark-county/superintendent-indian-river-juvenile-correctional-facility-stark-county-fired/95-7fab4749-6d92-4af7-b819-b3f1d3b376cb>

<sup>4</sup> Department of Justice, Bureau of Justice Statistics, *Sexual Victimization Reported by Youth in Juvenile Facilities, 2018* (Dec. 2019), <https://bjs.ojp.gov/library/publications/sexual-victimization-reported-youth-juvenile-facilities-2018>

<sup>5</sup> Ruch, Donna A., Steelesmith, Danielle L., Brock, Guy, et al., *Mortality and Cause of Death Among Youths Previously Incarcerated in the Juvenile Legal System*, *JAMA Pediatrics* (Dec. 23, 2021), <https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2787434>

<sup>6</sup> Federal class action litigation originally filed in 2004 expanded in 2007 to include all facilities operated by or under contract with DYS to address system-wide conditions of confinement allegations. The comprehensive settlement agreement was approved in 2008 and the case was terminated in 2015. Children’s Law Center, *S.H., et al. v. Stickrath* Fact Sheet (2009), <https://static1.squarespace.com/static/571f750f4c2f858e510aa661/t/57da9d7cb8a79b526cc10f6f/1473944957499/SH-v-Stickrath-Fact-Sheet-3-2.pdf>

<sup>7</sup> From 2019-2020, emergency room visits for mental health increased by 24% for children ages 5-11 and by 31% for 12-17-year-olds. See Centers for Disease Control and Prevention, *Mental Health-Related Emergency Department Visits Among Children Aged <18 Years During the COVID-19 Pandemic* (Nov. 2020),



youth engaging in delinquent behaviors were exacerbated by the pandemic. Thus, it's critical our funding be allocated to the most promising interventions that can mitigate risk factors for delinquency and recidivism and reduce the number of youths who might otherwise be committed to a DYS facility.

Youth coming to the attention of juvenile courts and committed DYS have more complex needs given the disruptions caused by the pandemic. Predicted long-term impacts and reactions among adolescents include antisocial or disruptive behavior, aggression, and resistance of authority, and they may be at risk for developing persistent mental health disorders.<sup>8</sup> Over 90% of detained youth have experienced trauma and in DYS, a significant number of youth also have mental health needs—66% of males and 100% of females in DYS are on the mental health caseload.

"Our minds isn't fully developed so sometimes we make stupid decisions off of impulse. We don't think of the consequences untill after we've made our decision. The best way to handle these situations is to put the children in therapy untill they show progress.

A lot of the children that end up in situations like this has been through a lot of abuse and trama, like me. I grew up in foster care. I was raped while in foster homes and abused mentally and physically. I never reported these things cause I felt it was my fault. I know now that I wasn't the messed up one they where. I just hope that every kid that's going through the same thing that I went through get the proper treatment." - L.J.

DYS is seeing an increase in the number of youths committed to its facilities with more complex needs. In fact, commitments to DYS drastically declined since 2009 but starting in 2021, there has been a rapid increase in admissions. Under Director Ast's leadership, the length of stay has reduced from 18 months in the JCFs and more youth have been directly linked with CCFs that are better suited to meet the youths' needs and are, hopefully, closer to home.

But with two of the three JCFs near full capacity, it is incumbent on our leadership to invest in effective interventions that are proven to reduce out-of-home placements and incarceration. Given the pressing need for more behavioral health resources to address the impact of the pandemic on children, our budget should reflect a corresponding increase to sustain these critically important community-based programs, otherwise our facilities, and more importantly our children, will feel the future impact.

Thank you for your consideration and for the opportunity to testify on the proposed DYS budget impacts for justice-involved youth. I am happy to answer any questions you may have.

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[https://www.cdc.gov/mmwr/volumes/69/wr/mm6945a3.htm?s\\_cid=mm6945a3\\_w#suggestedcitation](https://www.cdc.gov/mmwr/volumes/69/wr/mm6945a3.htm?s_cid=mm6945a3_w#suggestedcitation).

Additionally, 70% percent of all public schools reported increases in the number of students seeking mental health services since the start of the pandemic. See Institute of Education Sciences, *2022 School Pulse Panel*, <https://ies.ed.gov/schoolsurvey/spp/#tab-7>

<sup>8</sup> National Institute of Health, *The COVID-19 pandemic and its potential enduring impact on children*, Current Opinion in Pediatrics, 2022 Feb; 34(1): 107-115 (Dec. 17, 2021), <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8728751/>



*/s/ Leah R. Winsberg*

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