

NEBRASKA

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DEPT. OF HEALTH AND HUMAN SERVICES



Jim Pillen, Governor

December 15, 2025

The Honorable Jim Pillen
Governor of Nebraska
P.O. Box 94848
Lincoln, NE 68509

The Honorable Jeffrey Funke
Chief Justice
Supreme Court of the State of Nebraska
P.O. Box 98910
Lincoln, NE 68509

Mr. Brandon Metzler
Clerk of the Legislature
P.O. Box 94604
Lincoln, NE 68509

Subject: Juvenile Evidence-Based Practice Report

Dear Governor Pillen, Chief Justice Funke, and Mr. Metzler:

Nebraska Revised Statute § 43-407 required the Office of Juvenile Services to begin implementing evidence-based practices, policies, and procedures by January 15, 2016. Thereafter, on December 15 of each year, the office is required to submit a comprehensive report to the Governor, the Chief Justice of the Supreme Court, and the Legislature on its efforts to implement evidence-based practices.

I am submitting this report to fulfill the requirements outlined above.

Sincerely,

A handwritten signature in blue ink that reads "Kathleen M. Stolz".

Kathleen Stolz, JD
Acting Director, Division of Children and Family Services

Attachment

Division of Children and Family Services: Office of Juvenile Services

Juvenile Evidence-Based Practice Report

December 2025

Neb. Rev. Stat. § 43-407

Juvenile Evidence-Based Practice Report

Percentage of Juveniles Supervised with Evidence-Based Practices

Currently, all youth (100%) at the Youth Rehabilitation and Treatment Centers (YRTCs) in Kearney, Hastings, and Lincoln participate in evidence-based treatment and programming.

All staff (100%) at the YRTC-Kearney, YRTC-Hastings, and YRTC-Lincoln facilities receive training in Motivational Interviewing (MI), an evidence-based clinical approach used to help youth move forward through the change process. Additionally, all staff receive internal training on the impact of trauma on brain development and related behaviors, and de-escalation strategies so that physical interventions can be prevented.

Percentage of State Funds Expended on Evidence-Based Practices

The YRTCs collectively spent \$36,876 on training costs, materials, and supplies for evidence-based programming in FY2025. This represents a negligible amount of the Department's \$1.9 billion state General Fund appropriation for FY2025, accounting for 0.62% of the Office of Juvenile Justice's annual General Funds operations budget. The amount spent on evidence-based programming in FY2025 is slightly higher than in recent years, due to the introduction of new programs, ongoing costs, and the need for additional training facilitators.

Evidence-Based Programs and Practices

YRTC-Kearney has a total of six Licensed Mental Health Practitioners (LMHPs), YRTC-Hastings employs two full-time LMHPs, and YRTC-Lincoln employs one LMHP. All LMHPs provide substance abuse, mental health, and family therapy services to youth at each facility. Additionally, the Office of Juvenile Services system continues to employ a Clinical Program Director to oversee the mental health and programming services offered at all three YRTC facilities, as well as a Clinical Psychologist who provides psychological testing as needed for youth at any of the YRTC facilities, co-supervises clinical therapists, and assists with group, individual, and family therapy at the YRTC-Hastings campus.

Community Reinforcement Approach (A-CRA)

YRTC-Kearney has continued to utilize the Adolescent Community Reinforcement Approach (A-CRA), an evidence-based treatment approach with positive research findings that align with the facility's framework and structure. All licensed Mental Health Practitioners at YRTC-Kearney are trained in the A-CRA model, and one of the practitioners serves as a trainer in the model.

A-CRA is a skills-based approach to treating substance use disorders by increasing family, social, and educational reinforcements that support recovery from substance abuse. A-CRA involves three types of sessions: individual sessions with the youth, individual sessions with the parent or caregiver, and joint

sessions with both the youth and caregiver. A-CRA has been implemented in more than 470 organizations across the United States and several other countries. The U.S. Office of Juvenile Justice and Delinquency Prevention (OJJDP) evaluated the research on this program, assigning it an evidence-based program rating of "promising." Additionally, the California Evidence-Based Clearinghouse (CEBC) for Child Welfare rates A-CRA as a 2, indicating that this program is supported by research evidence.

Aggression Replacement Training (ART)

The YRTC-Kearney continues to implement Aggression Replacement Training (ART), a program that has been proven effective in reducing recidivism among the adolescent population. ART is a 10-week cognitive behavioral treatment protocol that addresses three interrelated components: Social Skills Training, Anger Control Training, and Moral Reasoning. Each component focuses on a specific prosocial behavioral strategy that is learned through repetitive exposure to the material. The OJJDP evaluated the research on this program, assigning it an evidence-based program rating of "promising." Additionally, CEBC rates ART as a 3, indicating that this program demonstrates promising research evidence.

Applied Behavioral Analysis

The YRTC-Lincoln continues to utilize Applied Behavioral Analysis programming, which includes the evaluation of the youth by a Behavioral Support Specialist who develops an individualized Behavioral Support Plan based on the youth's identified strengths and areas of need. Youth are provided hourly feedback and ratings on the goals related to their individual target behaviors.

Trauma Affect Regulation Guide for Education and Therapy (TARGET®)

YRTC-Lincoln and YRTC-Hastings continue to utilize the Trauma-Affect Regulation: Guide for Education and Therapy (TARGET®) model for intensive behavioral modification programming. TARGET® is a psychosocial intervention that provides education about the impact of complex traumatic stress on the brain's stress response system and strengths-based practical skills for resetting the trauma-related alarms/survival reactions that occur in complex PTSD. The OJJDP endorses the TARGET® model. OJJDP evaluated the research on this program, assigning it an evidence-based program rating of "effective." In addition, the CEBC rates TARGET® as a 3, which indicates that this program shows promising research evidence.

Moral Reconnection Therapy (MRT)

Moral Reconnection Therapy (MRT) remains an additional treatment component incorporated into the YRTC-Kearney, YRTC-Hastings, and YRTC-Lincoln programs. MRT is a Cognitive Behavioral Therapy (CBT) program designed to address antisocial behavior in adolescents in residential programs, with an overarching goal to reduce recidivism and increase prosocial behaviors.

Voices: A Program of Self-Discovery and Empowerment for Girls

Staff at YRTC-Hastings have all been trained in Voices: A Program of Self-Discovery and Empowerment for Girls, which is a female-specific curriculum. Voices is grounded in the realities of girls' lives and the principles of gender responsiveness, drawing on theory, research, and clinical experience. This program advocates a strengths-based approach and employs a range of therapeutic approaches, including

psychoeducation, cognitive-behavioral therapy, mindfulness, body-oriented therapy, and expressive arts therapy. All activities are designed to be trauma sensitive. The Voices participant's journal utilizes an evidence-based process called Interactive Journaling®, which incorporates both MI and CBT prompts to support behavioral change. While the VOICES program itself is not yet rated, the CEBC rates MI and CBT as a 1, indicating that they are well-supported by research evidence.

Love Notes

The YRTC-Lincoln facility continues to utilize a curriculum by The Dibble Institute® called Love Notes in its clinical programming. Love Notes is an evidence-based program that focuses on healthy relationships. The main goal of the program is to establish healthy relationship boundaries and to prevent unplanned pregnancy by providing teens with information to make wise relationship choices. This program teaches skills that can be applied in all types of relationships, with a particular focus on romantic relationships. Love Notes programming is delivered through group discussions, PowerPoints, workbooks, exercises, role-playing, and creative activities over thirteen sessions. Love Notes groups are facilitated by clinical staff members who have received special training on this curriculum. The CEBC rates Love Notes at a 3, which indicates that this program shows promising research evidence.

Power Source

Power Source curriculum was implemented at all YRTCs in 2024. A select group of staff and clinicians completed a full training with the developer, the Lion Heart Foundation, to learn about the group and individual applications of this new intervention. Power Source is traditionally a group-based CBT and Mindfulness Training (MT) intervention that targets male youth, ages 16-18, in high-security correctional settings or those with high acuity/high-risk behaviors. Power Source blends problem-solving and change components of CBT with the attentional and response modification elements of MT. By combining CBT and MT, Power Source was designed to help modulate physiological responses to stressful and high-risk situations and encourage prosocial behavioral responses. There are fifteen modules, with two to three groups per module. The OJJDP rates Power Source as promising.

Evidence-Based Assessment Tools

During FY2025, the YRTCs have continued to utilize evidence-based assessment tools to measure an individual youth's progress and the overall program's efficacy. Newly implemented in 2025 is the use of the Short-Term Assessment of Risk and Treatability: Adolescent Version (START: AV). This assessment is an individualized assessment of the vulnerabilities that contribute to adverse outcomes and the strengths that help protect against them. Also newly implemented is the Behavioral Assessment System for Children, Third Edition (BASC-3), a comprehensive set of rating scales designed to help professionals understand the behaviors and emotions of each adolescent. While the BASC-3 has been used previously on an as-needed basis with YRTC youth, it is now being used comprehensively. Peer-reviewed research articles indicate the validity of these instruments in measuring what they are intended to measure.

During intake of youth at the YRTCs, trained mental health professionals complete diagnostic assessments to evaluate co-occurring substance use and mental health issues. Youth also receive both an interview-based assessment and a substance use screening, such as the Adolescent Substance

Abuse Subtle Screening Inventory-A3 (SASSI-A3), at a minimum. Additional individualized assessments may also be used as needed to assess the individual treatment needs of youth such as the Vanderbilt Attention Deficit Hyperactivity Disorder Diagnostic Rating Scale (VADRS) or the Conners' Adult ADHD Rating Scale (Conners) assessments, or youth who have problematic sexualized behaviors by using the Estimate of Risk of Adolescent Sexual Offense Recidivism (ERASOR) tool or the Protective + Risk Observations For Eliminating Sexual Offense Recidivism (PROFESOR) tool.

The YRTC's continue to utilize the evidence-based Youth Level of Service/Case Management Inventory (YLS/CMI) as an assessment tool to inform the development of treatment goals and objectives. The YLS/CMI is a risk and needs assessment designed to help identify treatment needs and aid in case planning. It can also be used as a measure of progress, as it can be re-administered toward the end of a youth's treatment to determine if risk/need levels have improved. This is the same assessment tool that is used by Juvenile Probation across the state and is typically provided to the YRTC's by probation at the time of admission. If the YLS/CMI has not been completed prior to admission, it will be completed during the initial assessment.

Recommendations for Collaboration

The Department of Health and Human Services (DHHS) Human Resources and Talent Acquisition teams, along with the YRTC facilities, have partnered to create a paid internship program for clinical students pursuing licensure as LMHPs. Both the talent acquisition staff and clinical staff from the YRTC's work to establish and maintain relationships with educational institutions that offer graduate-level counseling and social work degrees, in order to secure student interns. This program encourages college students enrolled in the behavioral health field to apply for a paid internship through DHHS, ultimately helping the YRTC's recruit quality candidates.

YRTC's clinical and administrative staff continue to consult with curriculum developers to ensure the evidence-based programs utilized in the facilities are executed with fidelity.

Due to the YRTC's strong community partnerships, no additional recommendations for collaboration are needed.