

[00:00:00] Julie Herr: Council on Juvenile Justice and Delinquency Prevention. I'm Julie Herr, and I am the designated federal officer for today's meeting. Before we get started, for those in the room, I would just like to briefly call your attention to the evacuation procedures that are on the table in front of you. They look like this document right here. This meeting is now officially called to order.

For those who are in the room with us today, please be aware that we are webcasting this event. The recording will be posted along with a meeting transcript, or notes, on the coordinating council's website, www.juvenilecounsel.gov within 90 days of today's meeting. Questions or comments from members of the public may be submitted via the council's website, and a handout with this URL is available at the resource table, for those of you who are in the room. This URL will also be provided in WebEx for our virtual attendees.

All the written questions will receive a response subsequent to the meeting. For our council members and panelists here in the room, just a quick reminder to please speak directly into your microphone so that those who are joining us virtually will be able to hear. With that, I will go ahead and turn this meeting over to Administrator Liz Ryan, our coordinating council vice chair.

[00:01:28] Liz Ryan: Good afternoon and welcome to the Federal Coordinating Council on Juvenile Justice. I have the distinct pleasure of introducing Assistant Attorney General Amy Solomon. Before I do that, I also want to welcome everyone who is joining us virtually today, as well as here in person. Before I introduce AAG Solomon, I just want to thank you for coming this afternoon, and to say that AAG Solomon has a long and distinguished career in justice issues and has been a tremendous supporter of the Coordinating Council and is my boss and has just been an amazing boss in this work. I want to turn it over to her to give welcoming remarks.

[00:02:14] Amy Solomon: Great. Thank you so much, Ms. Ryan, and welcome everyone to this meeting of the Juvenile Justice Coordinating Council. I'm so pleased to join you today and appreciate the focus on trauma-informed and healing-centered approaches to youth justice. I'm really looking forward to the conversation. I particularly want to thank the panel who will be joining us here, for sharing your expertise and perspectives about these important issues.

I also want to take this opportunity to thank the council for all the work that you've been doing over the past two years. I think I've been to every meeting except for one over the last couple years, and it has been such a personal and professional joy to see this council come back to life and really lead the way and guide the way for youth justice and youth justice reforms in this country.

I do want to share with you, with a heavy heart, that this will be my last meeting. I've been here more than three years now and will be stepping down from the AAG position. However, this is just a great-- again, I have so much pride about the work that we've done at OJP and for the work of this council, and I just want to thank all of you for your commitment and thank Liz Ryan for her leadership of this council.

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We have watched you up close and from afar as you have put evidence-informed strategies at the center of these discussions, you've lifted up the voices of people with lived experiences and of youth themselves, which has been marvelous to watch. You've worked so hard to identify a path of effective, fair, and humane juvenile justice system, and you've even taken your deliberations to the field and lifted up promising practices that we hope represents the future of juvenile justice in this country.

These are impressive accomplishments, and I know that they're going to open up opportunities for young people and help justice-involved youth find their path, succeed in their communities, and thrive. You should be really proud of the work you're doing. I want you to know that you have the full support of the Department of Justice and the leadership of the Department of Justice.

In just a few moments, you're going to hear from our Associate Attorney General Ben Mizer, my boss, who is sitting here to my right. The associate attorney general is the third-ranking official at the Department of Justice. Earlier, you all had heard from Vanita Gupta at an early meeting. I want to thank in advance the associate attorney general for his support of OJP, of OJJDP, and certainly of this council, and really fighting for and supporting youth justice and safe communities. Thank you so much for your leadership and support.

While I plan to leave late next month, I know that this council and the direction of OJJDP is in great hands. Our principal deputy, AAG Brent Cohen, who's been in that role for the last year and is a veteran of this department, will become the acting when I leave. I particularly wanted to share that with all of you. Some of you will know Brent, that youth justice and young adults have long been his passion. He worked in New York to really reduce youth in confinement in New York City many years ago.

During the Obama administration, he was leading the charge on the brain science for juveniles and young adults and how they should be treated differently. You will continue to have champions at OJJDP and certainly at the department as you move this work forward.

In the meantime, I know that we are forging ahead as a council, getting closer to the finish line for the report to Congress, which I know you'll be discussing later today, and continuing to explore evidence-informed approaches for supporting youth. I know today's meeting focused on trauma-informed and healing-centered approaches is so important, not only for youth but across the justice system. We are thinking about this at OJP even more broadly than youth.

I believe, Liz, in just a moment, is going to talk about some of the ways that OJJDP is approaching this issue. I wanted to lift up just three examples for how OJP is approaching trauma-informed care in other parts of the office.

The first is our Office for Victims of Crime has launched, for the first time, a demonstration program that will help seed trauma recovery centers in more

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

jurisdictions across the country. For those of you who know TRCs as they go by, these are one-stop individualized services for victims. They offer counseling, and therapy, and peer support, and also basic necessities like food and medication.

For communities that have these trauma recovery centers, they have really gone a long way of reaching hard-to-serve victims. This new solicitation, which I believe is open now, will actually seed more trauma recovery system support centers in more jurisdictions around the country. That is one place that we're focusing on this work.

Another is in the community violence intervention area. You all know that we have been leaning in here with many of you focusing on community-led interventions to disrupt violence and address trauma in communities around the country. So far, we've invested over \$200 million in 76 sites in almost 30 states, and we'll be making a new round of awards this year. A really important element that we have not addressed yet, and will this year, focuses on the vicarious trauma and healing and wellness needs of the CVI workforce themselves.

They are exposed to trauma every day in their line of work, and we need them to be strong and healed so that they can do their lifesaving work with others in their communities. This year, we'll be making up to \$2.5 million in awards to help build CVI trauma-informed services and strategies for the CVI workforce. We're really looking forward to that new investment.

Then a final example is our Bureau of Justice Assistance is working through really hundreds of collaborations now that pair behavioral health specialists and justice system officials through the justice and mental health collaboration project. This is a way to get access for recovery and treatment service people all in the system from crisis response at the front end, all the way through the correction system.

These are different points in the system where I hope that we can take some of what is learned and shared in the panel and infuse that into the work that we're doing here at OJP. In all of these efforts, we are looking to community organizations, the health, and behavioral health specialists, to educators and community leaders, and to people with lived experiences including youth.

The stakeholders are key to sustainable solutions and to a long-term success of those who come into contact with the system. This is what we mean when we say, in our mission statement, that we are trying to strengthen the role of community as co-producer of safety and justice. We believe that these community partners are in the strongest position to address the root causes and the symptoms of trauma and victimization and that they have the credibility and the trust and the reach and unique expertise to reach people who need healing, both at the individual level and at the community level.

Needless to say, I'm so glad that we are dedicating this mission to this issue with a special focus on youth, and we will look forward to listening and learning from you today. It's been a privilege to join these deliberations, to watch this body come

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

together across sectors and come back to life and really identify solutions for the nation to make our youth strong, healthy, thriving parts of our society.

I want to thank you for your leadership. Liz, I do want to thank you for your leadership and what you brought to this department and OJJDP, and this council, and I'm looking forward to the discussion that follows.

[00:11:21] Liz: Thank you, Amy, for that kind introduction. We are so thankful for your leadership and the dedication that you've shown both to this council and to improving juvenile justice as a whole. Thank you so much. I also want to extend a special thank you to Associate Attorney General Ben Mizer for joining us today. We are grateful for the department's support of this important work.

I also want to thank the full council and the subcommittee members for your continued commitment, and especially for your ongoing contributions to the development of our report to Congress. I'm very excited. We've reached one of the most challenging stages in the process, and that is taking the five important recommendations we prioritized in April and finding ways to make them real by identifying specific actions to move this work forward.

While a huge part of the council's job is to educate and make recommendations to Congress and the White House, we also know that our nation's youth cannot afford to wait. We must find ways to begin this work now by ensuring better coordination of the resources that each of our federal agencies already oversees. It's a huge task, but one that I know everyone here takes very seriously, and I'm very excited about what we can achieve together.

When we last gathered in April, we learned about OJJDP's Continuum of Care framework, created in response to the youth justice field and to implement one of the new provisions of the Juvenile Justice Reauthorization Act of 2018. This council subsequently voted to adopt this framework as a way to guide this work moving forward. For today's meeting, we are concentrating on trauma-informed care and healing-focused practices. These two closely related subjects both stand out as important themes to the recommendations that all of you prioritized at our spring meeting.

Today, as we learn more about how you, our council member agencies, are implementing successful, trauma-informed approaches, we hope this information will highlight potential opportunities for collaboration. As Amy mentioned, addressing childhood trauma is essential to helping young people heal. We must meet young people where they are, and that includes addressing the trauma that they have experienced throughout their lives.

This is especially true for young people. Addressing trauma early can make an enormous difference. We can help young people avoid justice system involvement completely, or avoid moving deeper into the system, all by ensuring that we address their needs as previous victims or witnesses of violence, abuse, or neglect.

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

According to research from the Centers for Disease Control and Prevention, approximately two-thirds of US adults reported at least one adverse childhood experience on nationwide surveys conducted between 2011 and 2020. Adverse childhood experiences include violence, abuse or neglect, or witnessing violence in the home or community, and circumstances that underline children's sense of safety and stability, including substance use problems, parental separation, and the incarceration of close family members.

Most adults have experienced some form of negative and potentially traumatic events in their childhood. In many cases, adverse childhood experiences lead to toxic levels of stress that impair a child's brain development. These changes can result in lifelong effects on children's attention, decision-making, and learning, and as a result, when they are adults, they may struggle with finances, employment, and depression.

For example, a child who is separated from a parent due to incarceration or child welfare system involvement, suffers an enormous and traumatic loss. Forced separation from a parent can lead to feelings of abandonment, and may also trigger significant financial and emotional instability in a child's life.

That same child may struggle in school, fail to graduate, or become involved in delinquent behavior. We must find better ways to apply what we know about trauma and healing to youth impacted by the juvenile justice system so that they can address the trauma that so often contributes to youthful mistakes. We must make mental health and behavioral health treatment more readily available by ensuring access to necessary services at every stage in the Continuum of Care.

I'm enormously proud that OJJDP was among the first federal agencies to address children's exposure to violence as a significant source of trauma, beginning in 1999 when the Departments of Justice and Health and Human Services hosted the first National Summit on Children's Exposure to Violence. Our efforts include the Safe Start Demonstration initiative, launched in the early 2000, the first national survey on children's exposure to violence, the defending childhood demonstration sites, and two Attorney General-led task forces, just to name a few.

Today, guided by language in the Juvenile Justice and Delinquency Prevention Act that specifically calls on OJJDP to support trauma-informed programs, our office continues to fund initiatives across the continuum that help children who have been exposed to violence avoid or mitigate potential negative impacts. For example, in 2023, OJJDP invested more than \$92 million in nationwide mentoring programs, including programs for youth in the justice system, young people impacted by the opioid epidemic, and children of incarcerated parents.

We know that strong relationships with positive adult role models can help young people overcome negative experiences and build productive futures. OJJDP's Children Exposed to Violence program provided nearly \$8 million, in 2023, to support project sites that are focused on community-based interventions to help children

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

build resilience and prevent future violence, delinquency, and victimization.

By addressing trauma head-on, we are helping young people change their trajectories. Exposure to violence does not have to lead to a lifetime of negative consequences. OJJDP is also proud to support child advocacy centers, court-appointed special advocates, school violence prevention programs, and other programs to prevent and treat violence, neglect, and abuse in our homes, schools, and communities.

We know programs that provide trauma-informed care to help youth and families heal. In addition to helping fund programs that help children recover, OJJDP and our sister agency, the National Institute of Justice, have supported numerous studies that further our understanding of the correlation between childhood trauma and juvenile justice system involvement.

These studies provide compelling evidence that justice-involved youth experience elevated levels of childhood trauma. Unfortunately, research also shows that justice-involved youth tend to experience ongoing exposure to trauma, both during and following justice system involvement. This continuous exposure to violence is strongly related to re-offending in adulthood.

Childhood trauma has real, serious, and lasting consequences that we must acknowledge, prevent, and overcome. I know that so many federal agencies represented in this room today are also doing great work to address trauma, and I look forward to learning more about these efforts. As a body that is dedicated to coordination, we must be sure that we are making the most of the resources that we've been given. We must work together to give young people a chance to move beyond their negative experiences, to overcome their challenges, and to stop the cycle of crime and violence.

Together, I believe we can preserve, restore, and protect the innocence and opportunity that should always be synonymous with childhood. I look forward to a very productive afternoon. Thank you.

Now, it's my great privilege to turn it over to our next speaker, who I'm very glad was able to join us today. Acting Associate Attorney General Ben Mizer is a good friend to OJP, and a DOJ veteran, who deeply values the work of our nation's juvenile justice professionals. He's a strong supporter of OJJDP's work, and he brings a deep commitment to the youth in our country and to the work our partners, both in and outside the federal government, are doing to support our nation's youth and our youth-serving professionals. Please, give a warm welcome to Acting Associate Attorney General Ben Mizer.

[applause]

[00:20:50] Ben Mizer: Thank you, Liz, and thank you all for being here. It's great to be here myself. On behalf of the Attorney General, I want to welcome all of you to

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

this meeting of the Coordinating Council on Juvenile Justice and Delinquency Prevention. I know that this work is also very important to the attorney general and the deputy attorney general, as it was to my predecessor whom Amy mentioned, Vanita Gupta.

I want to start-- some of you who maybe didn't know Amy's news already, might still be crying, at least on the inside. I had a little more time to get used to the news. If you've been stunned and are grieving, I understand. I just want to thank Amy for helping to kick us off and for her outstanding leadership of the Office of Justice Programs over the last three-plus years.

Amy, you've been a wonderful ally, an advisor, a good friend, and a true champion for our youth and our communities. You are leaving OJP in excellent hands with Brent, and still there's no question that your absence will be deeply felt by the people in this room and many, many, many other rooms.

We are so very fortunate at DOJ to have leaders like Liz and her amazing team in OJJDP, to carry on the work of building safer communities and expanding opportunities for our youth. This work has never been more important, and the contributions of this council, never more necessary. We're reminded of the urgency of this work in every news cycle, in every report about the challenges that our young people are facing in the daily accounts of the difficult struggle our kids are encountering.

The overdose crisis, social isolation, anxiety about school shootings, these and so many other factors weigh heavily on the mind of our youth in ways that, we, adults, who were raised in a different time, cannot fully imagine or appreciate. Gun violence is high on the list of those challenges. Just two days ago, the surgeon general-- I'm used to talking about [unintelligible 00:22:59] general, but here we're talking about the surgeon general, issued an advisory declaring firearm violence a public health crisis.

The report points out that gun deaths, overall, have risen steadily over the last decade, and it underscores the deeply disturbing fact that firearm violence is the leading cause of death among children and teens, and it has been for the last four years. Tragically, that violence disproportionately affects people of color. Black and Latino youth were up to seven times more likely, in the past year, to experience a firearm homicide, than White youth.

As the surgeon general noted in another context, the challenges facing today's youth are unprecedented, and their effects on youth mental health are devastating. A vast body of research bears this out. Notably, these devastating effects aren't even limited to mental health outcomes. Trauma and stress take an incredible toll on both mind and body, and the consequences can be profound in some circumstances lasting a lifetime.

You all know, better than anyone else, that without intervention, traumatic childhood

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

experiences are a predictor of future victimization and justice involvement. They can also lead to a host of physical and psychological problems, including environmental stress so toxic that it can fundamentally alter the packaging of a child's DNA.

Exposure to gun and community violence, apart from the immediate dangers that it poses, can haunt and harm for years. We also know that if we are able to identify trauma early and apply the right intervention, we can be very effective in preventing these harmful outcomes. We know that young people are uniquely shaped by trauma and victimization, but we also know that youth are resilient and highly responsive to treatment, especially if we're able to reach them early. Our job is to help our colleagues in the field identify the most effective evidence-informed solutions, and bring those solutions to our communities.

I'm immensely proud of the work that Liz and her team are doing to make this happen. OJJDP's Continuums of Care Initiative offers a blueprint for intervention and support that will help justice-involved youth overcome the adversity that so many have faced in their young lives. Their work to deliver developmentally appropriate services to youth in their homes and in their communities whenever possible, and to lower the barriers to opportunity is strengthening safety and paving the way to success for our young people.

Amy has also outlined how we're working to build trauma-informed strategies into programs across the public safety spectrum to break cycles of harm among those who come into contact with the justice system. We know that the first vital step toward a healthy life involves healing. Only then can we hope to find sustainable answers to our community safety challenges.

I want to underscore how grateful the Justice Department's leadership is, that this distinguished body of experts is working together on behalf of our youth. You are the champions they need at the time when they need it most. We look forward to hearing the outcome of your deliberations and are eager to see the recommendations that you'll be making later this year. I wish I could stick around for more of the discussion, but I know that I will be hearing from Liz, and from Amy, and from Brent about everything that you're recommending. I would want to thank you for your time and wish you the best for the very productive conversations I know you'll be having. Thank you.

[00:27:02] Liz: Thank you so much, Acting Associate Attorney General Mizer, for being here and for your wonderful remarks. We really appreciate your support. Next, we are going to do introductions of the council, and I'm going to start to my left with Mark Patterson. If you could introduce yourself and your organization.

[00:27:24] Mark Patterson: Aloha, everyone. My name is Mark Patterson. I'm with the Hawaii Youth Correctional Facility. One more time? Aloha, everyone. I'm with the Hawaii Youth Correctional Facility. My name is Mark Patterson. Thank you for being here.

[00:27:41] Sonali Nijhawan: Good afternoon, everyone. My name is Sonali Nijhawan. I serve as the director for AmeriCorps for our state and national portfolio. I am here representing AmeriCorps.

[00:28:02] Michael Mendoza: Hi, everyone. Sorry about that. Thank you. Michael Mendoza, member practitioner of California and a member of the Anti-Recidivism Coalition.

[00:28:12] Tib Campise: Good afternoon. I'm Tib Campise and I work for the Department of Defense in the Military Community and Family Policy Office. I'm the associate director for Child Youth Advocacy.

[00:28:24] Jeff Hunt: Hi, everybody. I'm Jeff Hunt. I'm from the Department of Labors Employment and Training Administration. I work on the YouthBuild Program.

[00:28:33] Maria-Lana Queen: Good afternoon, everyone. I am Maria-Lana Queen. I am at the Department of Housing and Urban Development. I work in the Office of Public and Indian Housing. There, I serve as the HUD liaison for federal and/or agency work. I work with several of you. It's been a pleasure. Also, I serve as the co-lead of the HUD Strong Families Initiative, which you'll hear me talk about briefly today.

[00:29:00] Melinda Baldwin: Hi. Melinda Baldwin here representing SAMHSA, where I sit in the National Policy Laboratory, and I lead the Inter-Agency Task Force on Trauma-Informed Care.

[00:29:11] Adam Tierney: Good afternoon. Adam Tierney. I'm a National Juvenile Coordinator with Immigration and Customs Enforcement.

[00:29:18] Meghan Bishop: Hello. My name is Meghan Bishop. I'm **[unintelligible 00:29:20]** and a member of the Native Village of Afognak in Alaska. I'm a senior counselor to Assistant Secretary of Indian Affairs, Bryan Newland. My portfolio areas are social services, the Tiwahe Program, Indian Child Welfare Act, and then I support the Public Safety and Justice portfolio. Thank you.

[00:29:40] Gregory: Hi. I'm Gregory Henschel. I'm with the US Department of Education. We have a new correctional education office nested in the Office of Career Technical and Adult Education. Good afternoon.

[00:29:54] Dr. Nataki MacMurray: Good afternoon. My name is Dr. Nataki MacMurray. I am at the Office of National Drug Control Policy in our office on public health.

[00:30:04] Lourdes Rosado: Hello, everyone. My name is Lourdes Rosado. I'm president and general counsel of LatinoJustice PRLDEF. We're a nonprofit civil rights advocacy and law firm. I'm a practitioner member of this council.

[00:30:21] Jennifer Burnszynski: Hello, I'm Jennifer Burnszynski. I'm with the US Department of Health and Human Services. I'm in the Office of the Secretary, where I serve as the associate deputy assistant secretary for Human Services Policy.

[00:30:36] Liz: Great, thank you all. Next, I'd like to invite up all of the speakers who will be presenting to please join us at the table up front.

[pause 00:30:46]

[00:31:20] Liz: Thank you to our panelists who are joining us this afternoon and will be presenting. We're very excited to hear from such a diverse group of experts talking about trauma-informed and healing-centered approaches in each of your agencies. I'm going to ask you each to briefly introduce yourself and your agency. Before we get to that, I'm going to let everyone know who is on the panel here.

We have Renee Bradley from the Office of Elementary and Secondary Education and the Department of Education. Jennifer Burnszynski, the Associate Deputy Assistant Secretary for Human Services Policy at the US Department for Health and Human Services. Then we have Maria-Lana Queen, the HUD Liaison and Federal Interagency Youth Initiatives US Department of Housing and Urban Development.

We have Jeff Hunt, Director of the YouthBuild Program at the US Department of Labor, and Melinda Baldwin, Chief of the Child, Adolescent, & Family Branch at the Substance Abuse and Mental Health Services Administration. There are bios in each of your packets if you'd like more information on our presenters. We are going to start with Panel Member Renee Bradley. I'd like to have you briefly introduce yourself and begin your remarks, and then we will go to each of the other panelists.

[00:32:49] Renee Bradley: Great. Thank you, Liz, and thanks to the committee for letting us have some time with you today. I'm going to let you read my bio so I can get to the content. 10 minutes on trauma-informed care is a super short time, and I'd rather skip to that, but I will share. 25-plus years ago, I supported our assistant secretary as a member of this coordinating council.

One of my favorite investments that I had the privilege of working on was a co-funded project from OJJDP and Education. That was a recommendation from this committee. It was the Education Disability and Juvenile Justice Research Center. I know, firsthand, the great work that you do and the power of this group. It's a privilege to be here today. Thank you very much.

I'm going to talk about some of the things that Ed's doing and try to get through the questions in the time allowed, and hopefully, we might have some other time to connect on other issues. One of education's top three priorities for this administration is boldly improving learning conditions. That's in our raise-the-bar agenda. I think that's a really unique focus for an education administration. I've been here since 1997, and I've never seen that type of priority given to this kind of issue.

I really appreciated all the great context-setting earlier on. One of our focus areas is very similar to what you've discussed, is on prevention. In education, we have had a long history of creating safe, healthy, supportive learning environments that positively impacts students' well-being and academic outcomes. What that means to us is how do we support students to fully engage in and fully participate in both learning and all the educational activities. That includes the youth that we're here focused on today.

For these students that focus of our conversation, safety and security needs are primary, we know that, but that does not diminish our collective need to provide the needed supports and services and address the needs to facilitate this student success just as we would do any other student in a K-12 setting. Hopefully, transition them back with new skills that they can be integrated back into their home, their community, and their school settings.

As it was said earlier, most of our youth involved in juvenile justice have experienced early and repeated trauma. This multiple exposure to violence, isolation, exclusion, and basic insecurities like food, housing, and positive relationships, substantially impact our cognitive brain development. I could spend the whole time just talking about that impact. I will just put a pin there to hit on a couple of other big points.

I'm going to spend just a few minutes trying to hit some of the questions that y'all prepped us for, and give you some examples of how Ed is working to minimize the impact of trauma and look at a path forward for both recovery and resilience, and how we provide further-- we don't do further harm. Like, "Do no harm." We hear that a lot. How do we do no harm and not retraumatize students who have already been through more than most of us can even conceive of going through as a young person.

For our definition, and I think someone's on here from SAMHSA, so I won't doubt. Ed has relied on SAMHSA's definitions in this area for trauma and trauma-informed care. Not to steal thunder, and I'm paraphrasing, if I do it incorrectly, correct me later. How do we look at these students that it's been resulting from an event or a series of events or circumstances that they've experienced that either physically or emotionally harm them and so impact them that it may be life-threatening and they have lifelong effects. It's not just something we can fix. These are lifelong effects that both impact their individual functioning and their overall well-being.

That includes how they benefit from and exist in a K-12 school setting, wherever that setting may be. One of the headers that you asked us to address was a framework for addressing trauma-informed strategies in the Elementary Secondary Education Act, as well as the Individuals with Disabilities Education Act, are two big legislations in education. The law talks about a multi-tiered system of support.

Again, another thing we could easily spend 10 minutes on, the public health model, where we look at how we organize environments and practices to support students. When we're looking at an MTSS model, we're looking at what is the data that

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

supports what we're doing, what are the systems, and then what are the practices.

One of the PBIS, Positive Behavior Interventions and Supports, is one of the MTSS frameworks that you might have heard something about. When we refer to that in K-12 systems, it's school-wide PBIS. We've also done several model demonstrations where it's been facility-wide PBIS, it looks a little bit different. There's some core components, but it does look a little bit different as it rolls out in a facility.

In a facility, we're looking at all hours of the day, all staff, all environments integrated into daily operations. That looks like consistent routines, understanding what the expectations are to be successful in that environment. We don't need kids guessing, "What I have to do to be successful." You lay it out there. It's a predictable environment and they know what they have to do to be successful.

We promote and support positive behaviors. We differentiate support. None of us in this room need the same thing. We all need a little bit of a different thing. That's true for our students and especially true for those that have experienced more trauma in their lives. When we're looking at these multi-tiered systems of support, how do we tailor needs? How do we teach, remind, reinforce, and remediate? That can be what we do for all students in that context.

It can be what we add on for those that need a little bit extra work. It might be anger management, self-regulation strategies, and what we need to do for those students that need the most support.

How are youth being served in education's work? We at Ed, our primary client is states, but we also work with school districts, we work with individual schools, as well as those that are in corrections facilities. Along with safety and support, how do we put into place interventions that address issues that are common across this population, such as impulse control, self-regulation? How do we demonstrate more appropriate emotional responses to everyday situations?

Many of the students have been focused on survival. When we are focused on survival, our natural brain reactions or fight or flight, it doesn't matter if you're being nice to me or mean to me, those are my two go-to behaviors. How do we really support and redirect, reteach, retrain some of these? I'm a behaviorist historically, so part of that is looking at function-based thinking. In that approach, we don't say, "Oh, this kid's ruining my life. They're doing these behaviors on purpose to ruin my day." We look at why has this behavior happened, what's the root cause, or what is initiating this behavior from a certain student?

This idea of curiosity to know why this behavior's happening, not just to take the behavior on it, front face, but really to look at why it's happening, gives us the ability to go a little bit deeper. At our Elementary Secondary Education Act, there is Section 4108. Don't try to memorize it. It's way too long with all the activities that it does, but it is a focus on supporting safe and supportive environments. It specifically talks about reducing exclusion from school and intervening in the school-to-prison

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

pipeline.

One of the most important things we talk about with youth services for those that have been exposed to trauma, is how do we encourage and build relationships around them so that they have access to trusted adults. I'm going to skip over some of the barriers I have here, looking at my time. I'm trying to be cognizant of that, and focus on some of the funding opportunities really quickly and the resources that we have, and hopefully, we can talk about barriers during the Q&A.

During the Bipartisan Safe Communities Act, the BSCA money, we had two big pots of money. One was \$1 billion that went to two grant programs to increase the number of mental health service providers. The other was to a state formula-funded program on Stronger Connection Grants. The Stronger Connection Grants specifically lays out trauma-informed care, prevention activities, and a host of related topics that many of our context-setting speakers addressed this morning.

We also have a series of technical assistance centers. If there's an opportunity to share specific information on these, I can share that later. We were told to keep our remarks short and no PowerPoint. We have the National Center on Safe Supportive Learning Environments, the National Center on Positive Behavior Interventions and Support from the National Center on Emergency Management Planning, along with our full-service schools, 21st Century schools, and Project Prevent.

The last thing I'd want to say as additional resources is we have been doing a series of webinars that started with the COVID response to COVID, and it has just morphed into continuing. We have a whole series of those on creating positive supportive environments. We are in the process of planning some that are more juvenile justice-focused, and I'd be glad to share the dates of those when they come up. Happy to share any other details as we move on. Thank you.

[00:44:40] Liz: Thank you so much, Renee. Just so that everyone knows, we're going to take questions after the end of the panel. We're going to move to our next panelist. I'm going to ask Jennifer Burnszynski to speak. Thank you.

[00:44:55] Jennifer: Well, thank you. Thank you so much for providing HHS an opportunity to share a little bit about our work across the department. As administrator Ryan and others have already noted, trauma is widespread, harmful, and costly as a public health problem, and its affects are especially detrimental for children and youth. We are fortunate, within the Department of Health and Human Services, to have our Substance Abuse and Mental Health Services Administration colleagues like my fellow presenter, Melinda Baldwin, providing leadership and resources on trauma-informed approaches throughout HHS and other federal agencies like Ed.

Within HHS, we also use SAMHSA's definition of trauma and there are six key principles, which I'm sure Melinda will share a little bit more about. In addition to the really foundational and transformative work that SAMHSA does, HHS is also really

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

integrating trauma-informed approaches and mental health promotion in all of our federal initiatives and programs. Our operating divisions are conducting research, they're collecting data, and they're implementing their programs with a focus on strengthening the resiliency of children, families, and communities.

Today, I'm just going to share a few examples of HHS work and highlight some resources that we have that we have found helpful, and hopefully, you will too. I want to start out by talking about prevention because we know the very best way to address trauma, and particularly to address child trauma, is to stop it from occurring in the first place through primary prevention.

There are many causes of trauma and many ways to prevent it or mitigate its effects. However, preventing and addressing trauma requires really, I think, a broad range of services be available. I want to particularly emphasize those related to economic and concrete support for families who are struggling to provide adequate care for their children. We know recent studies have shown and really demonstrated the cost-effectiveness of economic and concrete support, such as cash assistance, childcare subsidies, child support, and the role they play in reducing adverse childhood experiences such as housing instability and maltreatment.

We also, unfortunately, know that one of the primary drivers of child welfare system involvement is really economic need, which we can sometimes label as neglect, really due to inadequate food or shelter or childcare. Research has demonstrated, again, a really strong association between what we call child maltreatment and poverty, and this persists across all racial and ethnic groups.

I think, particularly for HHS, it's also really important to acknowledge that many of our child and family-serving programs and systems actually can also cause trauma. For example, involvement in the child welfare system can clearly be traumatizing due to the investigation and the perceived threat to the family. We take this really seriously and are looking at ways to inform many of our programs that have interacted this way with families in the past.

In talking a little bit about our prevention focus, I'd like to start with work from the Center for Disease Control and Prevention and their preventing adverse childhood experiences work. We already heard a little bit about ACEs, so we know that safe, stable, nurturing relationships and environments are essential to children's health and well-being. Adverse experiences, or ACEs, are preventable potentially traumatic events that occur in childhood.

Preventing adverse childhood experiences is a priority for the Centers for Disease Control and Prevention. They really have a robust set of research and practice activities focused on measuring, understanding, and preventing ACEs. They've developed trainings on ACEs that are specifically targeted to professionals and community leaders. They've also developed resources like the Adverse Childhood Experiences Prevention Resources for Action, which helps states and communities take advantage of the best available evidence to prevent ACEs from happening in

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

the first place, and then also discuss the strategies to mitigate harm from ACEs once they've happened.

These resources include specific ways to achieve prevention strategies through programs, practices, and adoption of new policies. They've also recently stood up a National Center for Injury Prevention and Control, Adverse Childhood Experiences Prevention Strategy.

Last year, CDC also funded a program called Essentials for Childhood, which is focused on preventing adverse childhood experiences and also really promoting positive experiences. Looking at the flip side of that, there are 12 grant recipients, and they are funded to build or strengthen collection of ACEs data to use data to inform implementation of evidence-based prevention strategies and approaches, to ensure safe and stable environments for children. This program really builds on the accomplishments of some previous work they have done looking at the data.

I also want to talk a little bit about the Children's Bureau, which is within the Administration for Children and Families in our department. They are really placing a priority on reorienting the child welfare system to strengthen the resiliency of families, reduce trauma exposure, and give children what they need to thrive. For example, the community-based Child Abuse Prevention Program, which I think is currently the only federally-funded program that has a very specific focus on preventing child abuse and neglect, they provide services like voluntary home visits, parent education, family resource centers, and other supports to build parental capacity and resources.

Also, beginning in 2018, the Family First Prevention Services Act, or the acronym we use is FFPSA, authorized a new optional program for time-limited prevention services for mental health, substance abuse, in-home parent skills-based program. This is for children or youth who are candidates for foster care, for pregnant and parenting youth in foster care, and for parents or kin caregivers of those children and youth.

Nearly every state has an approved plan to provide these prevention services as part of their child welfare program. Our Maternal, Infant, and Early Childhood Home Visiting Program administered by the Health Resources and Services Administration, or HRSA, also has, as one of its main goals, the prevention of child abuse and neglect. This, again, is a voluntary program, evidence-based, that supports trained professionals to implement home visiting for expectant and new parents with children up to entry in kindergarten who live in communities that are at risk for poor maternal and child health outcomes.

We know that home visiting really helps prevent child injuries, child abuse, and neglect, as well as domestic violence. Then finally in the prevention space, my office has been developing a primary prevention framework for human services in which communities and people with lived expertise are at the forefront of the conversation. Human services agencies and leaders are supported in collaboration, program

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

funding, integration, and a no-wrong-door approach, and services and outreach augment well-being and protective factors and prevent ACEs and trauma using evidence-based approaches.

Really trying to get upstream and also focus on existing family strengths. In addition to that focus on really preventing trauma, HHS also has really been focusing and cares deeply about providing trauma-informed services for children and families who have already experienced trauma. As a department, we are incorporating trauma-informed approaches, again, in our programs, also trying to provide guidance, training, TA, and other resources to the field.

For example, HHS developed a guide to trauma-informed human services through a collaborative partnership among many, many programs in our department. The guide is really intended to help provide an introduction to the topic of trauma, a discussion of why understanding and addressing trauma is important for human services programs, and then a roadmap to find relevant resources.

The guide helps professionals really learn about trauma-informed care and engage in trauma-informed work to improve their current practice. It is chock-full of online resources, including a toolkit with trauma resources for specific human services programs or groups, including children and youth, childhood programs like Head Start, Runaway and Homeless Youth, and those specifically geared toward victims of sexual abuse.

The Children's Bureau is also supporting implementation of the Criminal Justice Act under which they are making grants to states to help them develop programs designed to improve the response and handling of child abuse and neglect in a way that really limits the additional trauma to the child and the child's family. We have numerous states working in that area.

Then, finally, my office has completed a project where we really examine trauma-informed efforts across sectors to assess what they look like in community settings, what impacts are we seeing in areas where we need more information or where there are some research gaps. When we looked at trauma-informed initiatives across systems, we found that they fell into three categories, or there are three ways that programs are looking at this.

One is strengthening their training around trauma-informed care. The second is screening for trauma, screening those being served for trauma. The third is really focusing on service improvement. I also want to mention that our interagency working group on youth programs very close collaborator with this group manages the youth.gov website, and they have developed tip sheets, trainings, webinars, all related to trauma-informed approaches.

For example, there's a portfolio of work around children of incarcerated parents, conducted in close partnership with OJJDP, and we recently released resources on using trauma-informed care principles and concepts during prison and jail visits for
File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

children and youth. Resources include a video and a discussion guide for correction staff and volunteers. In addition, Youth.gov hosted a webinar for youth on Instagram Live to discuss how youth can cope and build resiliency when faced with events that may be traumatic.

Finally, I know our colleague at DOJ mentioned the importance of supporting the workforce, and we are also really recognizing that the workforce providing services to children and families really needs support for the stress and trauma that they are experiencing on the job. Various programs across HHS have developed resources for staff capacity. Again, our Children's Bureau, trying to support a healthy trauma-informed workforce, has set up a quality improvement center strictly focused on workforce development which includes really two projects that are very specifically looking at how we address traumatic stress to improve worker retention.

Our Head Start program has developed something called Care for Ourselves as We Care for Others, which is a resource that, again, tries to really recognize the support needs for staff who are working with people who experience trauma and support their resilience.

Finally, we are conducting a study examining how to build capacity in practitioners to enhance emotional self-regulation and co-regulation skills to support youth. Thank you for letting me share a little bit about our work. I look forward to hearing from the other presenters and to the discussion.

[00:57:27] Liz: Thank you so much, Jennifer. Next, we'll hear from Maria Lana Queen.

[00:57:33] Maria-Lana: I thought I was last, but no worries. Hello. I'm Maria-Lana Queen, and of course, I'm at HUD. I'm in the Office of Public and Indian Housing. I was sharing with Amy earlier that, this week, I'm celebrating 33 years at HUD. I said that because I love the work that I'm doing, and most of it has been in the Office of Public and Indian Housing.

I came to HUD as a low-income student in college my junior year, and I literally never left the building's fourth floor. I'm doing something right. Allow me, I know this has been extremely helpful to hear your conversations. I'm sure what you're going to mention, Melinda and Jeff, is something that I've already have here scrapped down, but I want to plant the seed for public housing just for two minutes here.

There are over 3,200 public housing authorities across the country. They're the larger apartment-style developments across the city and every state, including Hawaii, every city where we are serving some of the nation's low-income families. Within those households in public housing, there are about 1.1 million households in public housing. Then we have what we term as housing choice voucher households, formerly known as Section 8. There are 2.2 million approximate families, low-income families that live there across the country in those units.

Within all of that, 3.2 million families, HUD-assisted households, within those families, 45% are families with children, babies to career, or young adults, I should say. I'm stating this because, obviously, we know that children who live in poverty already experience a level of trauma before they can even get to school, kindergarten potentially. Even their trajectory to graduate from high school without supportive services, it's really low. I want to set that stage because you have a child who is walking to school, they're going to potentially experience trauma because of low-income community violence. We spoke about gun violence earlier. This is summertime, where are the nutritional meals that kids would normally get in school? Trauma, they're hungry. Walking to the nearest store, that's not a nutritional store. It's a mom-and-pop store. Probably from breakfast, they have a ginger ale and hot Cheetos. Maybe domestic violence. Maybe the parent is absent or there aren't caregivers in that household.

Now I'm not saying that because you live in public housing, that's bad. We're actually very proud to be able to serve families who are in need. We do our best. We have a community and supportive services team that I work on at HUD, and that is exactly what we do. Aside from the bricks and mortar, we attempt to coordinate supportive services that are necessary for every young person to thrive. Regardless of if they're poor, middle class, or rich. Everyone needs food, housing, and supportive services.

Having said that, I want you to understand that we have coordinated with just about every agency in this room. HUD, unlike some of your agencies, we've looked at some of our appropriations. We get a slim amount for youth. A lot of it goes towards housing, keeping roofs over the heads of low-income individuals, maintenance, plumbing, et cetera. We also do a lot of revitalization. We have our Choice Neighborhoods program, which focuses on people, neighborhood, and housing, building beautiful mixed income communities. That's a small portion.

Again, 3,200 public housing authorities. If you're lucky to apply for that grant, that's fantastic. You see these beautiful communities across the country. If you're not, we're still working on ensuring that supportive services and positive youth development is within those communities. With that, I'm going to go down the line and tell you what we're doing, and we have a history of this.

We work closely with Department of Education, for instance. We want to ensure that every young person in poverty has an opportunity to pursue post-secondary education. Several years back around 2015, and we're still doing this through service coordination, we created a program that provided an education navigators. They were role models that probably lived in public housing, came back in the community, and worked with families and low-income students who were college bound to really help them.

Trauma was involved. Everything that I'm going to speak about is prevention. We're in the mindset for preventing trauma from a very early stage onto when a young person can get to college or pursue post-secondary education, but we're supplying

positive role models to really help low-income students avoid trauma, complete their financial aid forms, apply to college or post-secondary education and enroll. We've worked closely with the financial services division at Department of Education, but also with vocational training institutions.

Some of our young people who have experienced trauma, unfortunately, they're not thinking about college. They're not thinking four years, if not two years, but they are thinking career pathways. I want to be someone, somebody. I just need an opportunity for someone to meet me where I am. What are my interests? Vocational institutions offer that opportunity.

We're also working with Job Corps. We want safe havens for young individuals to be able to get out of these communities, to go away, to be in a safe haven, have nutritional food, meet new people, network, meet friends, have some positive role models, and walk away with a certification where now, you will get a job, you are on a career pathway. That's one example.

We're also working with Department of Labor, with Youth Build and mentioned Job Corps, but we are pretty much partnering in any way that we can. Whenever we hear about these great initiatives, and I wrote down several what you noted, that we can follow up. Our goal is to coordinate. We have an oasis of young people with an opportunity. Just because they're poor, big deal. I was poor. If you have an opportunity and supportive services and positive youth development, you can be on your way.

HUD has focused on looking at every day, mental health. We know that that's a crisis just about, not only for young people, not only for poor people. For people we went through COVID. I think the numbers went up. Now we're coordinating closely with Health and Human Services to ensure that social isolation is on the radar. We're doing webinars, we're providing these house authorities with webs-- Excuse me, tools and opportunities to be able to saturate this information in low-income housing. We are addressing trauma.

ACEs is always on the table with us, but again, we're focused on prevention. We want our young people not to experience trauma, or if they have, what can we do? We're going to open up our doors. We're working with Housing Authorities, who have community facilities. They're offering positive environments for young people.

We then offer STEM opportunities, and we have known-- Last year we worked with the Federal Aviation Administration, and they gave us all these drones. We put out a message to house authorities, and it was first come, first serve. We didn't have enough to expand to house authorities, but it was youth and teenage as young adults.

They got these drones, they began to work, to come in the community to play with them. They were learning. They decided they wanted to do coding. I may want a job in this. We talked to FAA. There are hundreds of jobs, career pathways that don't

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

require college degrees. What we're doing is coordinating, bringing those resources in front of young people while they can avoid trauma, because now they are in a safe place.

They're getting access to nutritional meals while having fun and learning. We're about working with house authorities to ensure that every service provider, even nonprofits, faith-based entities that are in those neighborhoods, come to the table and can basically offer some leverage opportunity. If it's not funding, then what are you already doing in the community that we can coordinate with you to support our vulnerable young people?

I focused on that. I'm going to go to some of my notes here. For Department of Justice, we have a history with the Coordinating council and OJJJ. Many years ago, we partnered with OJJJ to do expungement. Unfortunately, if we had young people who experienced a criminal justice system, now they can get their record expunged so that they can apply for a job. If they are 18 years or older, they can apply for assisted housing without having to check this box and then being removed for consideration.

We've done expungement and many of those young people are doing fine, are young adults. They actually are now working and are not stigmatized to rental property. That's just one example. We have also a fostering youth program. You spoke about the young people who are aging out of foster care. I'm going to butcher this, but it's the Fostering Youth Opportunities Program, I believe. We're giving vouchers to young people who are aging out and they can live in a voucher household for two years.

We recognize that may not be enough, but it's attached to coordination with the child welfare agencies. With that plethora of supportive services are in place. That means workforce development, that is supportive services, that is positive youth development. It's just presenting a positive environment where these young people have a second chance. We are focused on that.

Let me say this for young people, and actually this goes all the way up to I think age 18. HUD has a what's called a Book Rich Environment Initiative. It's been going strong since 2016. Basically, we're working with the National Book Foundation, and to date, since 2015, we have distributed over 2.5 free brand new books to kids and families, from toddlers all the way up to the age of 18, free books, so that we are creating these positive environments.

Removing young people from trauma, placing them in environments where they can read, they can see themselves in books. They get to meet authors, *New York Times* bestseller authors about book, talk about books. They get to go to a library. Again, you think the older you get to teenagers, they don't want to be in libraries. Well, they do, they are.

When you start putting books in front of them or having these fun environments and
File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627
1703-1.mp4

you have positive role models, law enforcement officers who are in the community, talking to young people while giving them books. It's the summertime. We know that violence is going to go up. We know this. That's what data shows. Kids are going to be out. They're not in school. They are trying to have fun, but unfortunately, they're going to maybe potentially get caught up in the negative environment.

We are trying to address that now. Everything that we're doing, we are putting out information to public housing authorities, here are some resources and opportunities for keeping your young people safe. We actually Googled Department of Justice's positive law enforcement programs for the summer, literally. We're offering this information to our house authorities, and housing authorities are a great mecca for partnerships because they too, as staff members, they want to help.

They don't want negative environments or negative press. Their resident services divisions and service coordinators, which we fund, are heavy at work, especially during the summertime to keep young people safe. I say all this, I can go on and on and on, but we do have a history of working with every one of your agencies year-round. We don't just want summer youth employment.

We want year-round employment opportunities, positive people allowing positive young people to shadow them, to do mock interviews, to let them know that, "Look, pursue your dreams, we'll meet you where you are. You don't have to necessarily be pushed into a mindset of a four-year college if that's not what you want, but we support you. We're going to work with Department of Education, if you want to go to college, that's fantastic. If you want to be enrolled in another post-secondary opportunity, we do that too."

I said a lot, but I also want to challenge each of you all to continue to work with us because that's what we do. We work together. We work on every federal agency. You mentioned Children of Incarcerated Parents, that was initiated during the Obama administration. We had a great time. I'm so happy that it's still existing. Fantastic.

We incorporate HUD and housing. We always say public housing, don't forget us. Don't forget about the young people who live in public housing or poor people, young people across the country. Some of us were, but with a little bit of help, we're doing just fine. I'm going to stop talking because I can talk all day long about this. I'm going to turn it over to the next person. Thank you. [chuckles]

[01:12:10] Liz: Maria-Lana, thank you so much, and also congratulations on your 33 years of service. That's incredible. Next, we will hear from Jeff Hunt from YouthBuild.

[01:12:21] Jeff Hunt: Thank you. Yes, I'm grateful for the opportunity here and I'm humbled by my fellow panelists' experience. I don't have 33 years, but I started my federal service about nine years ago. Prior to that, I was a high school teacher in Nashville, Tennessee so that might explain both my interest in this work, but also my repressed Southern accent that you'll hear come through a little bit.

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

I'll start broadly with the department's priorities and focus. We're really excited last month to debut a new website on dol.gov, dol.gov/youthmentalhealth. I hope that the topic is clear based on that URL. I think what's really fantastic about that website is that it's an acknowledgment not only of the mental health issues that our young workers and young job seekers are facing but also the vicarious trauma that many practitioners who work with those youth then take on themselves.

That website includes tools and tips and best practices that we're trying to share with our stakeholders. I'll zoom in a little bit. Nobody wants to hear about our whole org chart, but I work in the Office of Workforce Investment and OWI oversees the public workforce system. If you're not familiar with that, it's a giant beast that encompasses many pieces.

Some of it, of course, funded by formula funds that goes through the states and down to American job centers and workforce development boards all over the country. Then also discretionary competitive grant funds like the YouthBuild program that my team and I oversee. A lot of my examples today are going to be very YouthBuild-specific, but they represent broader departmental initiatives.

If you're not familiar with YouthBuild, sometimes we're the department's best-kept secret. At any given point, there's about 200 YouthBuild grants in operation around the country in 40 states. We're really excited. We just announced our new awards in May and for the first time, we have grantees in Guam and we're directly funding a tribe for the first time, **[unintelligible 01:14:32]** tribe in Idaho.

We funded organizations that work primarily with tribal youth before, but this is the first time we funded a tribe so we're really excited about that. Now in terms of what YouthBuild is, I'll start with who we serve. Of course, it's young people, aged 16 to 24. Most of them left high school without a diploma and they faced some other barrier to employment. Obviously, the most relevant barrier to this room is folks who are justice-involved.

I think most of the feds in the room can appreciate that sometimes we get stuck with outdated terminology because of statute or regulations and so we talk about offenders being eligible for the YouthBuild program. We try to shine that up when we can and say justice-involved, but we do have some material out there that talks about offenders.

I name them specifically to do, one, a little bit of exciting news. We have some preliminary evidence that suggests our YouthBuild programs that serve an over-representation of justice-involved youth have better outcomes. We're working on trying to confirm that and to figure out why, but we're excited about that and trying to communicate and learn from the field about what's going on there.

I also want to do a little bit of myth-busting. Sometimes we hear that programs under the impression that they cannot serve youth with felonies. That is not a federal requirement or restriction. There might be a state requirement or restriction or an

organization-level policy that stands in the way there, but that's not something that we require or restrict.

If a young person enrolls in YouthBuild, what will they get? They'll spend about half their time pursuing their diploma or equivalency, GED, something like that. They'll spend about 40% of their time in the program pursuing occupational skills training. All DOL-funded YouthBuild programs train in construction while our participants build or significantly renovate housing for folks in their own community.

You can understand then why, when federal funding was first established for YouthBuild, it was initially administered by HUD, but it did transfer to the Department of Labor in 2006 because there was a recognition that at its core, YouthBuild is a workforce development program. We have retained that focus on housing and we have retained that requirement that YouthBuild programs train participants in construction.

Since 2012, though, most of our YouthBuild programs train youth in other in-demand fields. YouthBuild is recognized as a pre-apprenticeship program. If you know anything about workforce, you know that apprenticeship has been a hot topic for a long time in workforce. I'm excited to say that this administration has backed up that hot topic with funding and initiatives that have really bolstered America's apprenticeship system.

YouthBuild, in the ideal sense, prepares the participants to enter registered apprenticeships when they're done with YouthBuild. They get that education, they get that training, and then really the secret sauce with YouthBuild, we've heard about it from a lot of folks today, is the supportive services. Our grants have high flexibility when it comes to using funds for supportive services to get those youth to the job site, to get those youth to the classroom, if that's bus passes, if that's assistance with childcare.

There's a long list of allowable supportive services and we're always excited to tell people what they can spend our money on. We're in the midst of a myth-busting campaign. Our legislation is the Workforce Innovation and Opportunity Act, WIOA, and so we do a lot of yes, WIOA can, where we're trying to make folks understand the ways that they do have access to flexibility.

I mentioned we announced our new awards in May. We're really excited because if you get on grants.gov now, the next opportunity is already forecast. The next chance to apply for YouthBuild grants is coming up in July, so you can get on there and search for us and find out more about the requirements there.

Now that I've summarized YouthBuild, I did want to talk about how we interact with trauma-informed care. You can appreciate that since our participants face certain barriers to employment, a lot of those barriers do come with trauma. I mentioned justice involvement, but we also serve youth in low-income families. We serve youth who are exiting the foster care system. A lot of the subgroups that have been

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

mentioned so far that unfortunately have higher incidences of trauma are coming to our door to enroll in YouthBuild.

I'm happy to say that we've established a really strong feedback loop when it comes to our stakeholders needing technical assistance in how to run our program, not just the requirements of our grant, but how to best serve the youth that show up. We heard from our stakeholders, our grantees, our program staff in the field, that youth were changing and that youth had new trauma, new issues that they needed help with.

In some ways, when the Surgeon General's advisory about the youth mental health crisis came out a couple of years ago, it was of course very helpful to us in terms of being a good resource and a good way to advocate for our youth, but it wasn't really news. We knew about this crisis, and we've been trying to help our field address that for some time.

Part of the reason for that is because another core component of YouthBuild is our focus on youth voice. We try to encourage our programs to solicit input directly from the youth on how they design their programs on their policies, on what's working for them. Thankfully, again, this strong feedback loop, the youth tell their program leadership, the program leaders tell us, and we try to be responsive with the technical assistance that we provide in response.

I should mention also broader than YouthBuild stepping out a little bit. We also did a survey recently to the public workforce system. I'll be reductive and say that we asked them, "How are you dealing with youth mental health? What do you know about youth mental health?" To be frank, the response was, "We don't know enough and we don't have enough."

That was really helpful to us in terms of being able, again, to make the case that we needed to give them more information, more tools to try and help those youth. I'll continue the love train that we've had for SAMHSA because I have leaned heavily on SAMHSA. No surprise that many YouthBuild participants in order to navigate trauma unfortunately look to substances in order to do that.

We've had, again, the feedback loop YouthBuild programs tell us, "We need help figuring out effective policies that can try to mitigate the substance use that youth are bringing to our programs." Obviously, if you've got young people coming and getting in a hard hat and working on a construction site and they're using substances, there are strong safety issues that need to be addressed.

Again, we've been super lucky to collaborate with SAMHSA. We did a webinar this spring on substance use policies. We've got a technical assistance session coming up this summer that's about harm reduction and how YouthBuild programs can implement some of those policies with their youth. Thank you, SAMHSA.

I'll also mention on a personal note, I think one of the things that's been most helpful

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

for me and my team as we try to help our programs, help the participants that show up is that a couple of years ago, and I can't claim wisdom here, but I hired a young social worker to join my team. She's been crucial in terms of knowing this terminology like ACEs, but also, frankly, she's closer in age to the young people that we're serving. Having that vocabulary close by has been super helpful. If you have the chance to add social workers to your team, I recommend that you do that.

I'll close out with another specific initiative that we've rolled out recently. In the spring, we had a series of what we call peer-to-peer convenings, where we bring together YouthBuild programs to share best practices amongst themselves. We had a pretty, I think, innovative session that was a mix of a plenary talking on the stage, kind of thing, and a workshop where we talked about what community violence looks like.

We recognize that because of the diversity of programs across the country that are implementing YouthBuild, community violence looks different in a rural area, in an urban area, in Los Angeles versus Phoenix, versus New York, versus Atlanta. We acknowledged the fact that unfortunately, community violence is a reality and it looks different from place to place, there's no one-size-fits-all approach.

We used the rest of the workshop time to walk staff through a practice called Healing Circles. It has its origins in different indigenous communities. If you've ever seen structured conversations where folks sit in a circle, and have designated roles, and maybe there's a talking rock that gets passed around, and people share and navigate trauma together, that was very powerful.

I think it ties back to what I said earlier about trying to keep in mind that not only are the youth going through trauma and figuring their way out through trauma, but the people who are directly serving them are getting the collateral damage as well. I think I was in the room for a couple of those sessions, and it was very powerful to see the staff model and go through the healing circle themselves and recognize how useful it could be in terms of serving their youth. Let me do a quick scan of my notes really quick and make sure, but yes, I think that's all I wanted to say. Thank you very much.

[01:24:51] Liz: Thank you so much, Jeff. Next, we'll hear from Melinda Baldwin.

[01:24:56] Melinda Baldwin: Sure. I don't know if I need to say anything, right? [laughs] Thank you for inviting SAMHSA to this panel and to the meeting today. As many people have spoken very eloquently today, trauma-informed approaches recognize and intentionally respond to lasting adverse effects of traumatic experiences while promoting linkages to recover and resilience for those impacted individuals and families.

Not only is trauma widespread and costly public health problem that may occur from experiencing emotionally harmful events such as violence, abuse, neglect, or natural disasters, for those with mental health and substance use issues conditions, trauma

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

is almost a universal experience. It negatively impacts mental and physical health as we've all talked about, but these adverse effects may have both short-term and long-term consequences.

I neglected to introduce myself, so I apologize. Maybe I'll jump back if that's all right. I'm Melinda Baldwin and I currently sit in the National Policy Laboratory, and I lead the Inter-Agency Task Force for Trauma-Informed Care, which I'll talk about today, but I also serve on detail to the Office of Management and Budget leading a project there on Trauma-Informed Care and Natural Disaster Recovery.

It not only warms my heart, but I'm so thankful that all of you have been able to use SAMHSA's work, and that has been really helpful. From looking at how trauma impacts an individual, you mentioned the effects, the experience, and the event, this all comes out of a paper SAMHSA put out in 2014. Was not only 10 years ago, it hasn't really been that long.

We also need to think about how trauma impacts whole communities. We know that they can be profoundly shaped by significant mass violence events, by natural disasters, historical intergenerational trauma, and daily experiences of interpersonal and structural racism, community violence, and discrimination. All of those impact not only us as individuals but our communities as a whole.

That paper in 2014 talked about two other things I think that are really important, and you can see traces in all of the work that you guys are doing. One, we talked about the four Rs. How do we realize that trauma is a widespread experience? How do we recognize the symptoms, and those we work with, those that we serve so we can help co-regulate, so we can help bring folks to the table? How do we respond to traumatic experiences? Most importantly for those of us in this room, how do we ensure that our own systems aren't re-traumatizing?

Sometimes we don't even realize it, I think, but sometimes the systems that people interact with are retraumatizing. Within that paper, SAMHSA talks about six principles. Is really heartwarming to hear how those run through all of the programs that you guys have talked about, safety, personal and psychological safety, how do we ensure? I think out of all the six, that's the critical one.

Trust and transparency. How do we ensure that our systems evoke trust in those we serve and that we're transparent about what we can and we can't do? How do we use peer support to harness that wonderful energy from lived, and Jennifer, you said lived expertise that we have in our systems?

How do we collaborate and how do we use each other in that way? How do we empower with voice and choice with those that we work with and those that we serve? How do we recognize the cultural, gender, and historical issues that are present in our communities that impact those we work with?

In 2023, SAMHSA put a new strategic plan into place, and it presents a new person-
File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

centered mission and vision that highlights four key principles over five priorities. The five priorities prevent substance use and overdose, enhance access to suicide prevention and mental health services, promote resilience and emotional health for children, youth, and families, integrating behavioral and physical healthcare, and strengthening the behavioral health workforce.

Undergirding those five priorities are four core principles, recovery, commitment to data and evidence, equity, and trauma-informed approaches. What we've done at SAMHSA is every notice of funding announcement, every contract that goes out on the street, we ensure and it passes through on my desk and other people's desk, that trauma-informed approaches are infused in each part of it. That we allow for grantees to use funding to promote those kinds of activities, but also that they operate their programs in trauma-informed ways.

We have made a concerted effort to make sure that we not only operate in that way, but the grantees receiving SAMHSA funds are also very cognizant of that. I would like to share with you today, is the work that the inter-agency task force on trauma-informed care has done. What's exciting about this group and having an entire afternoon devoted to trauma-informed care is that that's just an example of that collaboration that we can do.

The task force was formed in 2019 out of the support for patients substance use disorder prevention that promotes opioid recovery in Communities Act. There'll be a test on that one later, the support act, as we affectionately call it. They were charged with two overarching things. One, is to develop a national strategy for trauma-informed care.

What Congress said was, develop the strategy, but just submit an operating plan telling us how you think we could implement that. What a wonderful opportunity that was for not just to say, do it this way, but to tell us how you think by bringing all these agencies together, how we could do it.

The second one was identify, evaluate, and make recommendations about best practices with respect to children and families who have experienced trauma, or how can we prevent the risk of experiencing trauma? Then the ways federal agencies can coordinate better together. This afternoon is just a key example of that.

I think about that, I spent many years at the intersection of child maltreatment in children's mental health and doing a lot of play therapy. I think about this in terms of the development of play. We're really good at parallel play. I'm not sure how good we've moved to collaborative play, but we'll talk more about that later.

SAMHSA's held its first meeting in May of 2019. We've had monthly full task force meetings, multiple subcommittee meetings, and 20 agencies were named in the legislation. However, 23 regularly participate and many others have said, can we come? It's open to all. We came up with a four-pillar national strategy for trauma-informed care.

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

To get there, we had very deliberative meetings and a couple, you wondered, wow, people were so engaged and so committed to this work but we found four stumbling blocks. The first one was, how do we think about trauma? We talk about the three Es, but that was in 2014. We have become much more cognizant of how trauma impacts us. How do we really begin to capture all that we've learned?

The other is, how do we measure and evaluate trauma-informed approaches in care? We have the six principles, we have the four Rs, but how do we begin to measure that and know that we're doing it? What are best practices? We have folks from NIMH on our task force, and we really thought about how do we begin to measure these? How do we know our grantees are implementing it? How do we know what's happening?

Then equity, how do we know that we're really implementing this in an equitable manner? I also want to say that we were developing this national strategy in the midst. Think about the timeframe. We had our first meeting in 2019, had monthly meetings, and then we all went home in 2020. The social justice movements were happening that summer.

As we were building this strategy, it became very, very important for us to listen to the voices that we were hearing in our communities, because Congress said, "Don't do this in isolation. Involve stakeholders." Don't just fit in an office in DC and decide how this should be done. We United States Digital Service helped us and brought in a human-centered design approach where we brought in stakeholders in various meetings, various kinds of workshops. We had two larger meetings. The white papers that are in development were able to get stakeholder feedback. It wasn't like, here's a draft rubber stamp it, here is an outline, here is a substance, but tell us how to fill it in.

The four pillars are-- as we looked at this, what is the legislation telling us and what do we know? The first one is best practices. To identify and make recommendations on evidence-based and evidence-informed practices with respect to prevention of exposure to potentially traumatic events, identification of trauma-related behavioral health, and other health needs. How to refer and implement a trauma focused intervention in practice?

The second one is research. How do we build a robust research agenda? What do we know and what do we don't know? How do we go about building that? The third one is data. When we think about what data do we collect because we collect a lot of data. All of us, as you guys, are all smiling and how can we use, how can we harness that data?

The other thing we've heard from our folks in communities is they want to track this. They want to know they're making a difference. What do they track? The final one is federal coordination. How do we play better in the sandbox? We really put that collaboration pillar principle into practice.

I want to tell you what we've learned so far. When we thought about under the best practice pillar and that common language, how do we develop that, we thought about could we develop a core components framework. What are the core components? I see you smiling and nodding. We wanted to develop a shared language to have standardized outcomes, to develop a taxonomy that could begin to put us there.

I know that at a granular level, a taxonomy often is too specific. We were hoping to be able to go in the weeds and then generalize to build a universal framework. What we found is there's four categories. We looked at the literature, I think there was the last count, 700 articles, four categories.

Folks are usually measuring youth mental health and behavioral health outcomes. They measure other kinds of outcomes. I used to work at the Children's Bureau and some of the outcomes we look at there were placement stability. We learned at the Children's Bureau that if you just screen for trauma, you have better placement stability, caregiver and family outcomes, and then of course organizational and program outcomes. We're beginning to build that taxonomy.

Of course, we are moving now to look at systems level outcomes and how can we look at systems. With our research pillar, we had two questions. What principles, approaches, and activities have been studied or evaluated in systematic reviews under the term trauma-informed care? The second was when we know that children use in their families have been exposed to trauma, what knowledge has been gained from analysis of those systematic reviews that we can use to prevent or reduce trauma symptoms and promote wellbeing?

This is the sad part, we don't know a whole lot. We do know that the need to address trauma is increasingly recognized as we can see from everyone here. It's an important component of effective social service delivery. Yet an evidence-based understanding of how to do it, it's still being developed. We're still trying to figure it out.

We need to better define trauma-informed approaches that there's too little high-quality research on trauma-informed care. That studies are needed to define, measure, and test intervention mechanisms so we know what works, but also what doesn't work. We tend to report on things that work. I encourage all of you that are doing research is to report on things that don't work. We can learn from those things as well.

The third pillar being the data pillar. We're continuing the scan. We looked at 23 reporting systems that track formula, block grants, and discretionary grant services for children and families. In ed, we dipped our toe into justice. We're continuing to do more there at HHS and at HUD. Most federal reporting systems provide limited or no opportunity. This doesn't surprise us to identify individual children and families because we're not collecting data in that way.

Although some grants require services to be trauma-informed, data reporting

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

systems provide limited understanding of if and how they implemented that because we're just not collecting that data. That performance measures, both process and outcome align with the focus of the program and federal agency goals. Therefore, it's hard for us to look across systems. do we have common measures that we could look across systems? We're not quite there yet.

Then when we looked at federal coordination, most of federal departments and agencies don't coordinate services for people who are at risk by trauma, despite many of them serving the same families. All federal staff, we heard this over and over, want to learn more about trauma, and they feel like they have vicarious trauma that impacts their daily work.

Most of the federal activities incorporate trauma-informed approaches are often not trauma-specific programs, which is good that they're being integrated in other things. That a lot of programs that incorporate trauma-informed approaches aim to advance racial equity and provide support for underserved communities. Exciting things in that we're finding out a lot, but there's a lot of work to be done. Thank you.

[01:41:14] Liz: Thank you so much, Melinda, and thank you to the panel for this rich array of information. I think I have about 20 pages of notes here from the panel. I want to open it up to the council for questions and just looking around the room if anyone, oh, yes, please.

[01:41:32] Meghan: Thank you so much. Meghan Bishop from the Department of the Interior. Our tribal communities are really struggling, whether it's up in Alaska, down in California, the Great Plains region especially our youth. Our youth are disproportionately represented across the board, whether it's foster care, the MMIP crisis, criminal justice educational outcomes, are pretty stark.

Substantial mental health and substance abuse disorders are represented in our community. Crime rates are high. We've been up testifying on the hill, I think every week for the past seven weeks, mostly about public safety and justice in the fentanyl crisis. The school-to-prison pipeline or MMIP pipeline, the foster care to prison or MMIP pipeline as well.

Department of the Interior, Bureau of Indian Affairs, as well as Bureau of Indian Education, we don't provide grants to tribes. We provide direct funding and the funding that we're able to prevent provide tribes is dependent on discretionary appropriations from Congress. Our tribes have to rely on other agencies grant funding to be able to support and build just basic services to their tribal members.

We know it's burdensome for tribes. I come from a very tiny tribe where my tribal administrator wears I think four or five different hats. Applying for those competitive grants is difficult as is it's administratively burdensome to administer the grants. We recently put out the TLOA report, the Tribal Law and Order Act report because of the funding cycles. It's the 2021 to 2023 funding.

It indicated a need to fully fund law enforcement detention centers and court, so just a piece of this larger conversation around juvenile justice. We need over \$3 billion of appropriations. Our current appropriations funds those services at around 13%. I actually provided a statistic to our team that just in Oregon, Public Defense Services finally got around \$600 million in yearly funding just for public defense services in a state of about 3 million to 4 million people. That's still more than the Office of Justice Services budget for the entirety of Indian country to provide services in law enforcement courts and detention centers.

We do have a prevention program, it's been in pilot for 10 years. it's called the Tiwahe Program, and it funds in seven different areas. It's a budget of \$44 million. We're providing tribes \$2.5 million to \$3 million. We're providing 10 tribes that, and then we have 12 tribes developing Tiwahe grants. It would cost \$1.75 billion to fully fund our 574 tribes.

I'm glad I've been diligently taking notes too about all of the funding opportunities available. I'm glad that Nez Perce is finally in the 30 years of the YouthBuild program as their first tribe to receive that funding. I hope that they request that that grant be put through their 477 program, but I am concerned, and I looked through a lot of these programs to see who the tribal recipients were.

There doesn't seem to be many grants that have tribal set aside. Most of these grants seem to be competitive. I'm not hearing a lot about tribes receiving these grants. Last year, President Biden signed Executive Order 14112, which requires all agencies to review their funding for tribes to make it easier for tribes to access funding.

As you're reporting out these grant opportunities, I'm hopeful that after that executive order has been signed, there's going to be more outreach to tribes to alert them of this, providing them technical assistance to be able to apply for these grants. Also more consultation with tribes on what their funding needs are, et cetera, and that you're willing and take this back to your agencies because there are some agencies that are really, really phenomenal about their willingness to put their grants through 477.

If you're not familiar with that program, it's a grant consolidation program, which reduces the administrative burden on tribe, and looking to see-- open up the possibility of more grants going through that program. It's not really a question, it's just a comment just about making it easier for tribes to access these wonderful programs that you're all have discussed today.

I really am excited, I was texting furiously with our people about what's out there and going back to what Dr. Baldwin said, how we can be more collaborative. Also, us at Interior, we're always available, if you have tribal questions and you don't have a robust tribal office within your agency, I can connect you with whomever your counterpart would be at the agency to see how we can be more collaborative and include more tribes in your funding opportunities. Thank you.

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

[01:47:23] Liz: Other questions? Yes.

[01:47:27] Nataki: Good afternoon again. Dr. Nataki McMurray of ONDCP. Yes, I was smiling because I think every time I come to an OJJDP coordinating council meeting, I find a new best friend. Today, Dr. Baldwin, you are my new best friend because often what I've talked about is especially when we're talking about youth, a lot of our programs are focusing on the same kids, families, and communities.

I literally had a conversation just yesterday with someone from [unintelligible] 01:47:57] who's working on a committee on core components. We were talking about this longstanding need for us to collectively come out of our silos. Although I know a lot of what we do is to protect the integrity of our funding and the investments that come our way but still, same kids, same families, same communities, and what we have in common is more than what we have different.

Even though we're talking today about trauma-informed care, whatever our next topic that we're going to talk about, we're probably going to find a lot of core components to what we're talking about in the same and similar risk and protective factors that increase or decrease the likelihood of young people being engaged in our systems and in need of our services but we still don't have great models anymore of collaboration.

I'm so glad that as we've deliberated on our report to Congress, one of the recommendations is around opportunities for joint funding. Earlier in your presentation, I thought you were talking about funding that we had done some great work with the council previously. I thought you were going to talk about the safe schools healthy students, which used to be SAMHSA and ED.

We were going in the right direction and then we went back to our silos. I'm hoping that as we think more comprehensively when we realized and understand that we're talking about the same kids, families, and communities, that we think about how we build core components into all of our programs, how we build in some sense of not necessarily standardized, but probably more understanding the shared outcomes, so that we can talk about the multiple benefits of our common investment.

Kudos to the work that all of you all are doing. It's great that we are continue to share information about what each is doing, but we're still-- I'm hearing the opportunities for not just collaboration but integration of a lot of the work that we do. Congratulations, you win the gold star for being my best friend today, and thank you for actually even mentioning core components because it has to be a big part of what we're thinking about, especially as we're looking at how pervasive the trauma-informed care need is across our programs for youth and for families.

Thank you very much for the information and for the direction that all of your agencies are going in. Let's think about how we can bump this up into what we talk to our appropriators about, what we talk to our evaluators about, and what we plan in our strategic plans going forward. Thank you.

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

[01:50:51] Liz: Did you all want to comment on anything that's been said? want to make sure.

[01:50:58] Jeff: Yes, I'd like to speak about the tribe issue. A few things I'll share. Last year, I was very excited that someone from HUD invited me to come and speak to tribally designated housing, entities, enterprises, I forget my abbreviation. I was happy to find a new audience to share the opportunity with, and it was a great chance to talk about not only the YouthBuild program but accessing the funds and where we can be flexible.

I'll also share that for the last two or three funding opportunity announcements for YouthBuild, we've been able to include a waiver on the match requirement specifically for tribes and insular areas. Most organizations that apply for YouthBuild funding have to find 25% match from some other sources and tribes let us know that that was a particular burden for them. We were happy to be able to include a waiver for tribes that apply for our funds, and we foresee that remaining available in future funding opportunity announcements.

I also wanted to speak to a broader effort that the department is participating in around what we call advancing equity and grant-making. We've done a few things in this space. Last year, we hosted an online message board where we invited all applicants for all of our grants, whether they received funds or not to come and voice their concerns about our processes.

I was one of the anonymous moderators behind the scenes who commented on comments and said, "Please say more. What was the specific barrier that you faced?" We got a lot of really great information out of there. I think some of our most vocal commenters we're coming from rural areas, but we definitely had some tribal folks in there as well and that is continuing. We're working on obviously under this administration equity is a major priority.

Then you mentioned set-asides, I alluded to our authorizing legislation, the Workforce Innovation and Opportunity Act, WIOA. It is currently going through a reauthorization process right now. A version has passed the House and in that version, in that House bill, there is a tribal set aside for YouthBuild. We'll see if that pops up in the Senate version and in the consensus version. Unfortunately, I don't have that magic wand but we were excited to see that in there and hopefully when WIOA gets reauthorized, that'll be something that we can learn more about.

[01:53:34] Meghan: I would just say too, if agencies see that in their legislation, reach out to us and we can always provide supportive statements.

[01:53:46] Maria-Lana: Hi. Jeff's got me thinking. Yes, we have an-- I'm Public and Indian Housing. Don't ask me why we're still stating Indian, we're working on Native American. We do have an Office of Native American Programs, but I'm representing Public and Indian Housing. We actually have the ROSS, which is the Resident Opportunities and Supportive Services Program and the eligible applicants are tribal
File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

entities. We have several tribes which have been funded over the years to coordinate services to families. There is an emphasis on young people in tribal entities and communities and so that is evident, but I appreciate your mentioning the equity piece of it.

Public and Indian Housing has a larger equity committee, I serve on that. There are a number of staff members in Public and Indian Housing. We've gotten together per the executive directives from the White House to really look at equity. The tribal entities are on the table, we're trying to make it better, just based on what you've noted and I can't see your name again, I'm sorry, I don't have my glasses.

Meghan, based on what you noted, we have a specific sub-working group on working better and closer with tribes, making it easier as far as the navigation process for them to apply for funding to understand the funding eligibility and this whole consolidated effort. I do believe we're working on that and stay tuned. I would be happy to report out on any deliverables to the council that becomes of that effort.

[01:55:19] Liz: Thank you so much. You were going to comment? Then we're going to take a break after.

[01:55:23] Jennifer: Oh, okay. I'll just really quickly speak to both questions. Meghan, thank you for raising that. I think while there are still often match requirements, many of the standing programs like child welfare, the temporary assistance for needy families programs, the child support program, Head Start, tribes that can run their own programs where we have flexibility, like with the child support program. We just got rid of the required match for tribes to try to ease the financial burden there.

Certainly, we have many tribal serving programs like our Indian Health Service, our administration for Native Americans that have been really pivotal parts of our work there. Just want to point out that in that guide to Trauma-Informed Human Services, there is a specific focus on American-Indian and Alaska Native communities and resources for them.

You're talking about larger structural financial issues, but just wanted to point out some of these resources and opportunities. Then also again, just really agree with your urging us to think about opportunities for integration and better building services around families and communities rather than inviting people to our different silos.

Our department has just this year launched something called the Children's Center Agency Coordinating Council, which we hope will partner with this group, which is I think one of the only groups that's really focused on children and well-being of poverty. We are doing some internal learning this year, but are hoping at the beginning of the calendar year to really lay out a five-year or longer plan for that and think about what we can bring together to really support child wellbeing there. Thanks for reminding us how important that work is.

[01:57:13] Liz: Thank you so much. Please join me in thanking our panels.

[applause]

We will now take a 10-minute break and we'll come back at 3:10. Thank you. I'm going to invite Kristen Kracke to present on the subcommittees for their report and see if the council has questions. Kristen.

[01:58:05] Kristen Kracke: Good afternoon. I am pleased today to report on behalf of the chairs, all three of us, of the coordinating council, policy subcommittee, and its programs and practice of subcommittee. I would ask the council members to point to the subcommittee report in your packet.

The subcommittees met jointly three times on the shared task of continued development of the recommendations for the report to Congress. Since the last council meeting on April 10th, the council members just as you may recall, selected their top five priority recommendations. Since then, the subcommittee members have been exploring these recommendations in further detail and developing more specific ways to operationalize these recommendations, which will serve as a foundation for the annual report to Congress and the president.

The subcommittee report in your packet outlines those top five priority recommendations for your ease of reference. During the first meeting of the subcommittees, members reviewed federal strategic levers that can be used to advance these recommendations. Those levers were defined as fiscal, financial, legislative, practice, capacity building, policy, research, data and metrics, and then communications.

With these levers in mind, the subcommittee members then used a collaborative online tool to develop proposed strategies, actions, and activities. The next two meetings have been used to review, discuss, consider those proposed actions and activities and organize those activities into the report in two identifying ways. One, actions for Congress and the President per our statute. Two, actions the council can accomplish on its own through coordination and collaboration within our own current authorities. One of our council staff, Marcy Mistrett, will go over the current proposed strategies in more detail with each of you shortly, and the council will have an opportunity today to discuss in more detail. Some things to note, the subcommittees are not making any formal recommendations today. Members reviewed and contributed to these recommended actions and some discussion was had about focusing the council actions to one year in the report for our initial year. Lastly, I am pleased to report that the programs and practices subcommittee has continued to work to finalize the seven sessions proposed for the OJJDP National Conference that the council approved on April 10th.

These seven sessions, as a reminder, make up the federal coordinating council's track for OJJDP's National Conference. The sessions will focus on exploring the work of the federal government, as well as examining the challenges that

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

communities face in advancing youth justice and meeting the needs of youth and families. With that, I am pleased to submit the subcommittee's reports to the council. Thank you.

[02:01:41] Liz: Thank you, Kristen. Do council members have questions for Kristen about the report? With that, I will ask for a voice vote for approval of the subcommittee report. All in favor say aye.

[02:02:00] Council Members: Aye.

[02:02:00] Liz: All opposed say nay.

[02:02:02] Lourdes: Nay.

[laughter]

[02:02:07] Liz: Did you want to change your vote Lourdes? All right. The subcommittee report is approved. Thank you so much, Kristen. Thank you to everyone who has participated in the subcommittees. I know you all have been doing a lot of work to pull that together. Next, I'd like to invite up Marcy Mistrett to give a presentation in more detail on the recommendations. Marcy.

[02:02:45] Marcy Mistrett: I think that's right. Thanks, Liz. Good afternoon. It's really nice to see everybody. As you all know, my name is Marcy Mistrett. I'm a senior policy specialist in our policy coordination division here at OJJDP. Really do want to just echo the thanks to all of you both for that really invigorating panel this morning, but also for the work that we've put in since we were all last together back in April.

You guys are good. I saw my little mouse. We've got two goals this afternoon. One is to review and discuss possible recommendations for Congressional executive action in the council's fiscal year '24 report to Congress. Secondly, to look at some possible actions that this council can take in fiscal year '25 as part of its work plan or at least to start those discussions.

That said, we recognize that a number of people who are here today haven't necessarily previously represented their agencies at a council meeting. I'm going to go back and give a refresher on how we got to where we are today. In your packets, there's a couple things I want to point out to you. One is a four-page document. I'm going to have pieces of this up on the PowerPoint, but this one right here that's stapled on the right side of your packet, that is going to inform a lot of this discussion.

Then there is also in here the outline for the reports Congress. For anyone that wants to know the general content that's going into that report, that's there for your reference. To go back over where we've been, in October of 2022, which feels like a really long time ago now, the Coordinating Council was relaunched following the pandemic-induced break, and it had a really renewed focus on coordinated action

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

and getting a report out to Congress.

During the first four meetings between 2022 and 2023, we really devoted a lot of time to listening and learning from impacted young people to practitioners, experts from the field, and researchers to gather more than a hundred recommendations. Those came in from all over the country. Really driven by an initiated first by youth voice on ways to strengthen the federal response to just involve young people.

Members of the subcommittees, jointly work to narrow this list from that list of 100 down to 15. At our last full meeting on April 10th, the council voted to adopt the continuum of care, which as a reminder, let's see if I know how to work the green button. Thank you, Juan. High rescuer. Where does it have to point to? It stays down, right? There we go.

One, to adopt this continuum of care as a guiding framework for our report to Congress and the White House. We approved the subcommittee's top 15 recommendations from the field, and then we participated in that exercise to reduce those 15, the top 5 priorities. That would be our immediate focus. These top five priorities span the entire continuum of OJJDP Care. You didn't tell me the bottom one works, Juan.

From early prevention to intervention to out-of-home placement and back into reintegration. Since April, subcommittee members have met three different times. During these meetings, members considered a list of federal strategies beyond legislative or White House action that could guide us in terms of what we can do as federal agencies.

Then members then work through this list to look at legislative and executive action that would inform those top five priorities. At its most recent meeting, the joint committee reviewed and discussed a list of initial activities that could be explored for implementation in '20 and fiscal year '25 with careful consideration to potential impacts and funding and staffing. These potential work plan activities will be discussed today further.

Today's meeting also will explore potential recommendations for the legislative and executive action as contributed by members of this subcommittee. Just as a note, again, those recommendations really do tie to the top five priorities. I do want to give a nod that on an April meeting, somebody noted that there are cross-cutting values that really integrate across all five of these priorities.

You'll see this language pop up again, but I'm sharing them because it really became apparent that these were coming up over and over again. One is that our priorities are trauma-informed. That they are healing-focused and culturally responsive. That they do address that continuum because all parts of the continuum are important. That they engage meaningfully with those with lived experience.

That they are community-based or community-led where possible. That they don't

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

create additional silos. To our earlier discussion, we really want to work on breaking those down. That they reduce administrative burden, Meghan, to your point earlier. Really just hold these as values that we all agreed on in moving these five priorities.

A quick review of those five priorities are here. I'm going to really highlight the places that are in bold are really the emphasis. The first one was really about supporting community-based programs that are in response to the cons of local context that deal with root causes of delinquency. That was that prevention piece of the pie. The second one is that we are ensuring that there's funding, training, and support for community-based culturally, and developmentally informed trauma and healing center services.

Again, really that focus early on. Many of our panelists today talked about the importance of prevention. We actually don't want to get to trauma responsive. We want to get to preventing that to begin with. The third one was to again respond to not only our surgeon general's response, but to everything that we're hearing from young people in the field, that mental health and substance use remain a priority. That we want to ensure that those young people have access to those needed services in community so that they're not going to have a home placement unnecessarily.

Again, that gets to more medium, medium-high levels of intervention. We want to also provide financial incentives and rewards to communities that are able to keep youth out of detention and commitment and with their families. What alternatives do we have? Where are those opportunities? How can we expand on them?

I'm just going to note that we have figured a lot of this out because we've reduced the number of young people in facilities by 80%. We know some strategy, let's keep them going. Then number five is really that re-entry piece. For the very small number of children who might have to be an out-of-home placement, God bless you. What does post-secondary education and career training look like?

The next section here are is really-- this group came up with 14 recommendations to Congress and the White House. The places that are in bold on here are contributions that people made through their comments that everyone hasn't seen yet because we are collecting them up to the last minute. Anything in bold is a little adjustment maybe to what the initial list that went out to folks in the Excel sheet through the sub-committee working groups. Two, three, and four are new. I want you to pay a little bit closer attention to those.

I'm going to put these on. I do want to point out here that across all of these, you will see that some are asking for funding and will require an appropriations response. There are multiple legislative asks. Either those that build on current legislation or extend new ones. There's a lot of TTA and public education requests, investments for programs that are really supported by evidence and research. Just keep an eye on those that we really did a good job on expanding, really looking at every possible tool in our toolbox, I would say.

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

One thing I will say is some of these still need some clarification in terms of it. They ask, is it really clear if it's an executive or legislative ask? We want to make sure that that we're very explicit about that. My scan said that we are hitting most pieces of that continuum, but I would welcome other people's input into making sure that we've accurately captured all pieces of that pie when we are covering our recommendations. Then the last thing is that while many agencies I think are listed in here, there might be some that aren't here now, that will come in later years, I would say.

Then the last section that we had talked about at our last meeting was proposed council activities for fiscal year '25. Recognizing that our '25 budgets that we're really already working in '26 budgets, [chuckles] they've been submitted. We also recognize the uncertainties that come with an election year. With this in mind, our goal is to really begin with some simpler activities that the council could undertake that would work within existing authorities and resources.

That would include-- sorry, my eyes can't read that far. One would be to support a five-part webinar series that addresses each of the top five recommendations and highlights the work of the council agencies in each of our five priority areas. Each webinar could be hosted by a different council agency and include representatives from the various agencies.

Second is to demonstrate how the continuum of care looks across federal agencies by identifying current investments in each piece of the pie. I think our panel gave us a good start on that possibility this morning or earlier this afternoon. Third would be to consider developing a series of one pages that highlight progress the federal agencies have made under each program area. I think, Jeff, you at YouthBuild named a couple of these.

As well, Maria-Lana, I know you've talked previously about this being approached as an update to MythBusters that were released by the Federal Interagency Reentry Council. Some of that work may exist and just needs to be updated. Then finally, each agency request FY '26 funds that support a priority on the coordinating council workplan. Nataki, thank you for that recommendation. With that, I want to pause to see if I need to clarify anything for anyone.

[02:16:34] Liz: Does anyone need clarification from Marcy on any of these items? Go ahead.

[02:16:39] Nataki: Just wanted to confirm, there's a term diversion that's used on recommendation number-

[02:16:47] Marcy: 13.

[02:16:47] Nataki: -13, thank you. I just want to make sure this is used in the context of diverting from jail, prison, incarceration, correct?

[02:16:54] Marcy: Right. Yes, ma'am.

[02:16:56] Nataki: In my world, diversion often means something different. I just wanted to clarify. Thank you.

[02:17:00] Marcy: Yes, we're using--

[laughter]

[02:17:02] Nataki: Thank you.

[02:17:05] Liz: Any other questions or clarifying anything? I want to open it up-- thank you so much, Marcy. If you don't mind staying there, just in case other items come up. I want to make sure, does everyone have a copy of this handout in front of them?

I want to just first to start with, thank you for all of you who contributed to these. I know that this work isn't easy and that you are all very busy. I appreciate the time and effort that's gone into getting us closer to the finish line here. I know we have a lot of work that we still need to do to get this approved by September, but I want to thank you for that.

I want to get a sense from the council overall, how do these look to you? Are these ideas things that you believe you could support? I want to just open that up and I'll just look around to see who wants to jump in. Go ahead, Michael.

[02:18:08] Michael: Thank you, Liz. Marcy, thank you so much for all the work you've been putting in and really bringing us along this process. I'm also grateful to the panel who spoke earlier and really prioritizing trauma-informed care and ACEs, and how it's going to be addressed as being a really important issue to me personally and for a lot of the people that I work with who are personally impacted or formerly incarcerated.

Some things did stand out to me within the panel, especially mentioned by Melinda Baldwin about the importance of data. Throughout the whole entire panel, I kept hearing about how data's important. I haven't learned as much as I have in the last month about how data's important. That's because I've been working with Republican Senator Shannon Grove in California on a bill SB 1043.

It's in partnership with Paris Hilton and 11:11 Media affecting the short-term residential therapeutic programs. These short-term residential therapeutic programs in this bill, we asked to collect two data points and include on their dashboard of the California Department of Social Services. The two data points we requested to include on the dashboard was when a child is restrained or secluded.

We ended up asking the department, how many staff are on board to collect this kind of data? The short answer was that there's no specific person solely dedicated to

collecting this data. What was even more alarming was the fact that the process of collecting this data was, it would be handwritten onto a log and then this reporting log would then be submitted to a regional office that oversees the facility, and then they would determine whether the incident would need to be investigated or reported.

It was unfortunate to me because it just seemed like there was too many steps in the process of when a child is restrained or secluded in a program where they didn't break the law. If you read some of these incident reports, some of these kids, their bones were broken when doors were shut on them, or there's lacerations in their hands when being restrained.

I sit here and think that if we really want to be about delinquency prevention, this is one area where we can improve. We can improve avoiding ACEs if we can streamline the process, appropriately use taxpayer dollars and ensure that kids who are in a program for therapy aren't being further traumatized.

It brought a lot for me together and thinking about this report. Is there a way we can strengthen data processes and ensure that we not only hold our agencies accountable, but we prevent ACEs or adverse childhood experiences when they do, unfortunately, may need to be restrained or isolated?

I can understand if we do that for kids or people who commit crimes like lowans did, but when we look at kids who have not committed a crime, especially in these programs where a child who's affiliated or even impacted by a gang can even be in some of these therapeutic programs, when these instances happen, it does leave a distrustful taste in a young child's mind. For me, it made me take a deeper look and want to think more about how can we improve data processes in our government agencies, state agencies to ensure that kids who need help are being treated appropriately.

I just want to thank you Marcy so much and the counselor for all their commitment to this report and seeing if there's something we can add around data in the first year to keep track of where we are, where we're going and where we need to be. Thank you.

[02:22:27] Liz: Thank you, Michael. I would just ask the other members-- Oh, I was just going to ask the other members of the council, if you have thoughts about lifting this up for discussion as part of the as the subcommittee's work on refining these recommendations, if this is something that you all could support. I have Lourdes and then Maria-Lana.

[02:22:50] Lourdes: I would support that. Yes.

[02:22:54] Liz: Did you have a question too?

[02:22:55] Lourdes: I did, but I didn't want to move off this topic until others had a chance.

[02:22:59] Liz: Let me go to Maria-Lana, and then we'll come back to you.

[02:23:02] Maria-Lana: Yes, and I'm on this subcommittee but I wanted to, one, thank you so much for recapping this. It's great to see it in writing after we went through all of the recommendations. For recommendation number four for possible recommendations for the White House and Congress, I don't know why I didn't think of this before. When you read it, you're automatically going to think of education or schools, fund initiatives that focus on repair and healing, et cetera.

When I was on the panel, I noted that HUD usually has the smallest amount of appropriations compared to most of the other agencies for serving children and young people. We get a lot of it in brick and mortar, revitalization, and a small amount for court service coordination. I only wish that we can actually say, including HUD education or whatever.

I just feel like if we're not noting certain agencies that this is not going to go anywhere or again, we're always going to be at HUD fighting for more funding to do more. I guess just food for thought, I have seen some recommendations to Congress by other coordinating working groups, and it sometimes references a few of those agencies that have been more of a disadvantage for receiving funding. Food for thought.

[02:24:25] Liz: Thank you so much. Do folks feel like that's something that they could support expanding under the recommendation to the White House and Congress, including HUD as well as education? Go ahead.

[02:24:44] Tib: Well, to her point, I was thinking about just the basic question of who else needs to be at the table because when I think about housing, we didn't talk about that early on in this process about how important the services in programs that you support, how important that is for the mix.

I'm trying to think about how do you put that in language that instead of thinking about agency specific, instead to think about the universe, the ecology of support that needs to be present, and how do you fund that? How do you fund that instead of funding agencies? That it is really about funding the spider web, the web of support, and each agency represents something that they can bring to the table.

The other thing I wanted to mention though, just really quickly, was to something that you were saying really brought my mind back to when we heard from the youth at the very first of this process when we had youth voice here. I'm wondering if we could just take some time to bump these recommendations against what they said to ensure that their voices are reflected in these recommendations because several months have passed, and I can probably pull the minutes up and take a look, but I think it's really important that we ensure that those voices are represented in whatever we put forth.

[02:26:25] Liz: Absolutely. Thank you. That's very helpful. Lourdes, did you have a
File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627
1703-1.mp4

comment and then--

[02:26:31] Lourdes: Thank you, Liz. There were two recommendations that I wanted to just focus on for a moment and maybe offer some suggested revisions or additions to them. I apologize, for work commitments and travel commitments, I was not able to attend the last two subcommittee meetings. On number nine, with regard to confidentiality, I'm a little concerned about how it's worded right now, because yes, different systems and agencies have different confidentiality laws and protections that they need to abide by.

While in my time representing young people and delinquency proceedings in adult court, I certainly saw instances where these protections could inhibit coordination, I also saw many instances where information was shared sometimes unlawfully and to the detriment of the youth in the family, and it can be harmful as well. I would want to suggest to the group some light wordsmithing to say, publish, educate, provide training on best practices for lawfully sharing information about youth involved in multiple systems when confidentiality protections may inhibit coordination, something along those lines.

Then the other one I just wanted to go on was 13 around diversion. I really support this recommendation, but I wonder if we can expand it beyond law enforcement diversion to all points in the system when diversion is possible. If you think of the moment of contact with law enforcement to adjudication and possibly confinement, there are lots of places where the train can go diverted off the rail.

That includes at the time of when the prosecutor has to make a charging decision, when the prosecutor and the judge have to decide on whether or not the child will be given some type of adjournment, contemplating dismissal type of plea. There are different ways and so I would ask that we consider including those other entities that have responsibility, most specifically prosecutor's offices in that recommendation.

[02:28:58] Liz: Thank you, Lourdes. Do these thoughts sound like something that we can talk about in the subcommittees to fine tune the language? Are people good with that? Does that look okay? Thank you, Lourdes.

[02:29:11] Lourdes: Thank you.

[02:29:11] Liz: Does anyone else have comments or thoughts about anything else you're seeing on the congressional recommendations on this?

[02:29:22] Jennifer: I think I would just say while we really clearly want to expand access to prevention services, I noticed that one of the recommendations that I'm just seeing here is very specific to HHS. We'll probably just need to really think about that, consult, align it with our other processes as we're thinking about that.

[02:29:40] Liz: Were you talking about the recommendation to the Congress, or are you talking about the--

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

[02:29:45] Jennifer: The recommendation to Congress number 14, yes. About an HHS statutory authority. We'll want to get all the right folks on that opportunity.

[02:29:55] Liz: Thank you.

[02:29:57] Nataki: Actually, if I can just add to Lourdes's comment about diversion, it's not specific to the subcommittee. I just wanted to introduce the idea of deflection. That's one of the things that we've been talking about for years. We talk about diversion from incarceration, but there's also a burgeoning term about deflection from arrest. That crosses some of the other work that we've been doing.

We can talk a little bit more about it in the subcommittee level, but I wanted to bring it up in the general setting as an opportunity to think about services as an alternative to even arrest. We're calling it deflection.

[02:30:36] Liz: Thank you. I know we only have about 15 more minutes, and I want to hear a little bit from all of you on the year one activities for the council. Go ahead.

[02:30:51] Meghan: Just looking at number four regarding fiscal year '26 funds, I know we are at the tail end of that budget request cycle. Should we highlight-- maybe see something highlight about the request made in fiscal year '26 and then focus on amending or updating those funding requests for fiscal year '27?

[02:31:18] Liz: I think we probably need more discussion on just that exact thing because you're right, we want to make sure that we're not working on something that has already been completed through the agency's process. Thank you. It would be helpful to get a sense from all of you of other things or ways we could add to these year one activities, if there are things that you think that your agencies could commit to.

It doesn't have to be all 14 federal agencies that are represented here doing one activity together. It could be a couple of us together. I heard a lot of great things on the panel about ways we could coordinate and collaborate on various pieces. Just wanting to get a sense from any of you on any additional recommendations for the council to consider along those lines.

[02:32:13] Maria-Lana: I do have a question for the year number one to host these webinars. Who would be the audience? I understand the importance, and you can remind me. Sorry, I may have missed this, but agencies would prioritize these five-part webinars. Each webinar could be hosted by a different council member agency. Would they be our audience? For instance, we would be hosting the same webinars, but just to the audience that we serve. I just wanted clarification.

[02:32:52] Marcy: Yes. I think what was discussed, and if anyone heard this differently than me, please speak up. I think the idea was looking at primary prevention, and let's say you three were like, "Oh, we all want to talk about it." It would go out to the three of your audience primarily to maybe uplift your grant

programs or opportunities that are coming up or new research around that topic.

Then the second topic being around trauma-informed care. If we replicated this panel those five agencies would generate it out to-- or we could all support-- Conversely, we could all push it out, which would probably be even a broader audience, but at least the agencies that are participating, I think should.

[02:33:42] Maria-Lana: When we do these webinars, could there be a proposed deliverable at the end of it, like, "Okay, can you commit?" It doesn't have to be funding. I just want to take it maybe to the next level of just the conversation. Not only conversation and information, but now what do you do with this information? A challenge or so to the networks that we are in contact with to do something with the information.

[02:34:16] Liz: Let me just ask you a question on that. Do you mean people who are listening in, or do you mean the federal agencies that are getting--

[02:34:25] Maria-Lana: That's why I was asking the question about who the audience would be. In this sense, I would be talking about, say the audience that we're serve, so what we're funding. We fund public housing authorities. We put out this information and maybe we say, "Now that you have this information, what are you going to do with it?" Maybe there could be a collective suggestion from the council.

That way, all of our networks are being tasked with the same challenge. Better yet, they may already be working together in the community anyway. We talked about that we're-- It's more or less a maybe a proposed deliverable at the end of the webinar conversations.

[02:35:10] Liz: It sounds like we could come up with a list of things that are ways that people could utilize the information, like posting on their website, sharing it with their networks, connecting with other federally funded programs in that community so that there's some connectivity around that so that everybody's accessing the information.

[02:35:33] Maria-Lana: Or if you've already done research, could there be a data collection agreement or some data sharing agreement where other agencies can learn from best practices. I guess we can think about it more, but I was just thinking if we have an opportunity to do this, maybe at the end of the day there's some deliverable low hanging fruit and something that folks can take away and say, "We did this as a result of the council sharing this information."

[02:36:02] Liz: A reporting out activity?

[02:36:03] Maria-Lana: Yes.

[02:36:05] Liz: Do members of the council, how does that land with you that--

[02:36:10] Nataki: Just wondering about how much specificity we want to place on this, because I know we're trying to be open enough to-- a council what may change in our circles given the next year, but at the same time wanted to make sure it's impactful. I don't know how prescriptive we want to be in this recommendation at this point, but certainly it would seem to be something that we as a council may want to have an input on how we shape each of the webinars so that we do address issues around audience and the what next or the what now, that we've provided the information. How do we make it stick? How do we make it implementable? Who do we want to target, et cetera? That may be something we get to in the weeds as we plan forward, or do we want to make it specific in this format?

[02:37:03] Liz: Something for the council to think about is part of the rationale for actually having these specifics in here is so that we're utilizing our existing authorities, existing resources to do that collaborative work. There are a lot of federal reports that get put out there that have a lot of high level language in them that then don't really mean anything in terms of the implementation of them. This way, this gives us a few concrete things to work around.

I'm sure there's other things we can think of too. Maybe this particular one, we can talk in the subcommittee about a couple of things we could do in terms of deliverables or outcomes so that people who are getting this information can utilize it. I was hoping that we could add more to this list, add a few more activities. Again, just utilizing existing authorities, existing resources with strategies, I think some of which were proposed by the panel. Does anyone else have thoughts?

[02:38:16] Tib: I don't know if this would be helpful at all. I know that one of the things that we did in my organization when we had to take on a mission we were very unfamiliar with having to do with youth and how important it was. One of our founding principles was to use existing pathways and structures, to use what's existing, but to use them in a different way.

We knew we weren't going to get additional funding, we knew that we were going to have to work with what we had. It was more about taking a look at what's-- we know we're going to use what's existing, but let's use it in a different way. I think that this coordinating council has been trying to do that, at least from my perspective. I know that we're not a grant making agency, but it's a different way of thinking about the problem.

That's worth telling people about so that they can start thinking about things differently. Not necessarily doing immediately, because sometimes the doing comes from just talking about how you're thinking about it differently, the way that we've been really emphasizing the importance of collaboration. Are there any opportunities at all to share, whether it's shared knowledge, share resources, what is available to us without changing what our agencies require us to do, but we can come together in a different way and to remove some of the stove piping and kids falling through the crack and that sort of thing.

Some of those foundational principles is what glues us together, to be trauma-informed, to utilize best practices to discover. I just discovered a lot from listening to youth build, for instance, and got my wheels turning. That's us here. I'm wondering if there's a way to communicate what we did here as a way that people can do at all levels to start thinking differently about how they're approaching these issues.

[02:40:38] Liz: Thank you. Yes, Sonali.

[02:40:40] Sonali: I don't know if it is to add on, but just to build off of the topic of collaboration and sharing resources. The second activity for consideration of identifying current investments in each piece of the pie of the continuum. For AmeriCorps, just last month, we launched, in partnership with Philanthropy and Pinterest, we launched a Youth Mental Health Corps, which is an initiative that we are the sole federal partner, but don't have to be the sole federal partner.

I wonder if one of the activities is not just demonstrating how the continuum of care looks across federal agencies, but also demonstrating how federal agencies can come together to bolster initiatives that may already be in existence. Something just adding a little extra and where there might be some funding, some set asides, or some opportunity for that partnership that agencies like AmeriCorps that are primarily grant making entities can be of support service and engage in that partnership. Just wanted to put that out there.

[02:42:04] Liz: How do these recommendations sound to people? I see a lot of head nodding. I want to go back to one thing that I heard the panel talk about. I think it was you, Jeff, where you talked about youth voice, and I know that that's something this council members have brought up a number of times, and I'm just wondering, in terms of these activities for consideration in year one, whether, to your point, Mary, about doing things differently. It sounds like a lot of our agencies do stakeholder engagements or meetings or listening sessions, things like that.

Are we all ensuring that justice-involved youth are part of those? I just put that out there as something that I know we're really focused on, and I know a number of you are focused on whether that's something you would see as it's inviting and it's ensuring that. For example, I've gone to a couple meetings where they said, "Oh, we have youth there." There were only a couple of justice-involved youth who were at the meeting.

I just put that out there as a thought for us to think about. If you think that gets to your point about doing something a little differently, but it's something we're already all doing already in terms of that. I just want to throw that out there and see if there's any thoughts on that or reaction.

[02:43:32] Maria-Lana: I like that idea. Something that I forgot to mention here is that HUD did a series of listening sessions, and it was focused on wealth building and helping families meet their financial goals. However, we did include one youth-related listening session where we just wanted to hear from them, like, "What's

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4

working? What do you know about HUD? If you don't know anything about HUD, then what has your experience been?"

Some were talking about their experience with homeless shelters and how insensitive, for instance, staff there are towards homeless young people, LGBTQ, young people. I think that you have a great idea, because all we did was put out a call. We started working with our networks, and we said we wanted to speak with young people who had some experience living in low income communities or poverty that could have met those who were returning from being in the criminal justice system.

We don't know, but I think it's a simple ask. When we do a listening session, just say including young people that have experiences in the criminal justice system. We literally said LGBTQ+. We said youth aging out of foster care. I think it's a simple ask. Then we'll work with our networks to make sure we have incorporated that voice. Then the challenge we had was, yes, we heard some great feedback. Don't wait too long to demonstrate how you learned what you learned and then how you actually acted on it.

That's something. The momentum is there, but we can get so far apart from those listening sessions that young people are like, "Why did I even participate?" Then it would be helpful to consider compensation. We're working on that, as well as HUD, compensating them for their expertise, sharing their information, their time.

[02:45:25] Liz: Thank you.

[02:45:26] Nataki: Can I also add? This is really along the lines of what Maria-Lana is talking about, a number of agencies around the table have some existing youth advisory councils or have done youth listening sessions. Rather than necessarily reconvening or convening a new round of such, if there's a way for us to put as a year-one activity to do a crosswalk of whether or not our recommendations actually do respond to what we've already heard so that we are making sure that we are making use of the youth voice.

I know Department of Justice has the opioid affected Youth Initiative Advisory Council. I know the HHS ASPE workgroup on youth programs has the youth editorial for Change editorial board, there's a number of folks, SAMHSA has a group, et cetera. Rather than reconvening or convening a new round, maybe we could create a concrete step that we are actually cross walking our plan, our report, our recommendations with what we've already heard and giving ourselves our own analysis of whether or not we actually are responsive to what we've already heard.

[02:46:43] Liz: Thank you for that thought. I think we can definitely do that between now and when the report comes out. We don't have to put it in here as a bullet point and then have that be a recommendation we do later. It sounds like your recommendation is something we could do now. I thank you so much, everyone, for your comments and your contributions. We need to close the meeting out now, and I

File name: Coordinating Council on Juvenile Justice and Delinquency Prevention Meeting-20240627 1703-1.mp4



appreciate the work that we're going to do together between now and September. Thank you so much and I will turn it back to Julie to close us out.

[02:47:19] Julie: Thank you so much, all. Our meeting is adjourned.

[02:47:28] [END OF AUDIO]