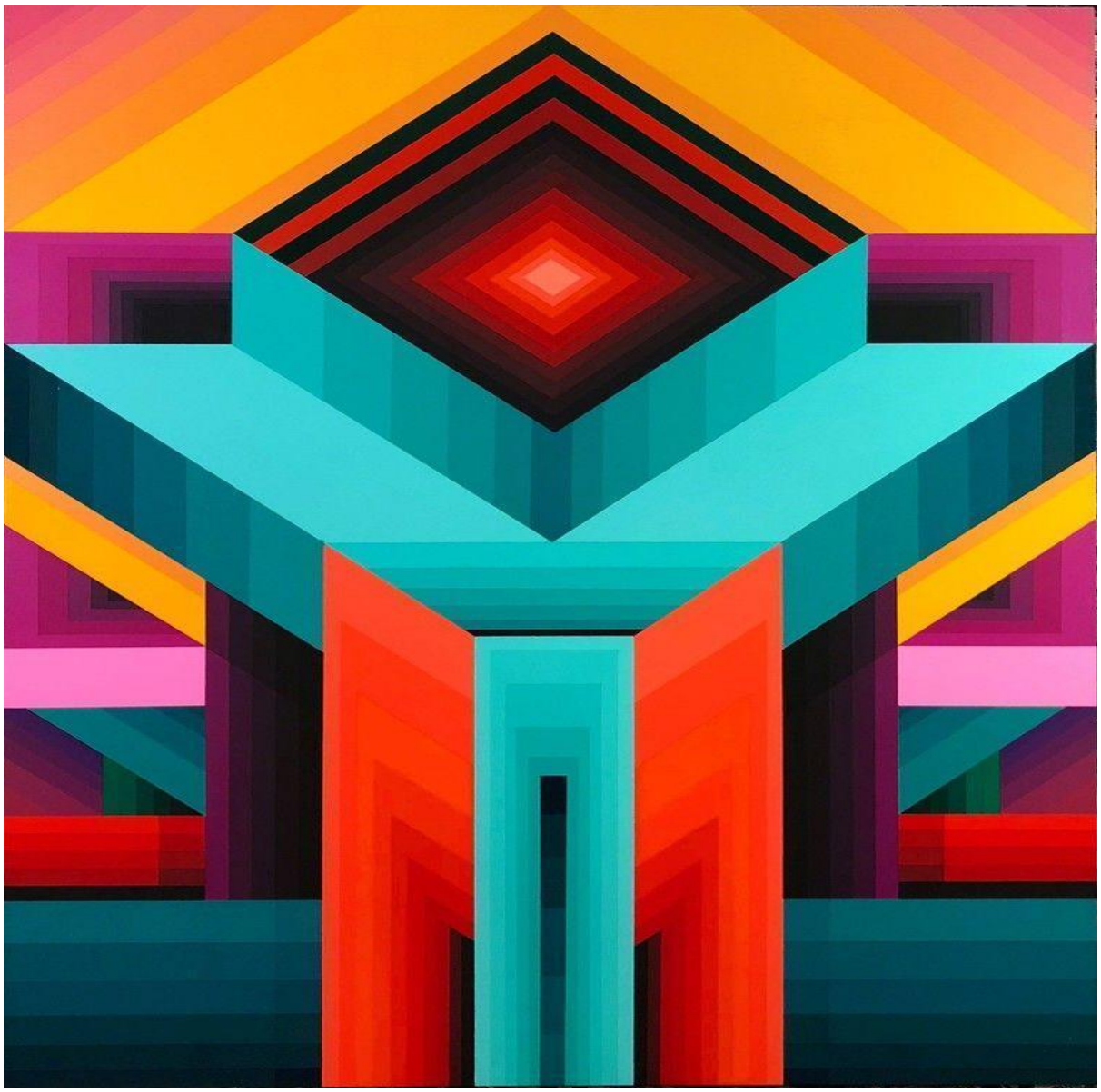

Kitsap County Girls Court Pilot Program

Final Evaluation Report

January 2023

WASHINGTON COURTS

Washington State Center for Court Research
Administrative Office of the Courts

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EXECUTIVE SUMMARY

In 2019, Kitsap County became the first jurisdiction in Washington State to launch a 3-year long girls' court pilot program[1]. The Kitsap County Girls Court[2] is a specialized, trauma-informed, gender-responsive, problem-solving court program designed to meet the unique needs of justice-involved girls[3] in a developmentally appropriate manner. Program goals include reducing recidivism, improving school performance, increasing confidence and self-efficacy, strengthening interpersonal skills, increasing goal setting, improving well-being, and building positive relationships and support systems. These goals are targeted through treatment (as necessary), a collaborative program team, life skills building, community mentoring, family[4] engagement, job training, and education support in an environment that reflects an understanding of the realities and life experiences that girls bring to the justice system. These experiences might include, but are not limited to, school-related challenges, family problems, trauma, mental health issues, and substance use. The program has utilized many gender-responsive best practices, along with several innovative local strategies, by leveraging existing community resources.

Being the first girls' court program in the state, it has been important for the Kitsap County Girls Court team to track program implementation and monitor if the desired outcomes are being achieved. A program evaluation was planned and carried out by the Washington State Center for Court Research (WSCCR),[5]under a grant awarded by the Center for Children & Youth Justice (CCYJ). The evaluation activities began in June 2019, at the time of program launch, and have continued throughout the 3-year pilot period.

It is important to acknowledge that a large portion of the evaluation activities were carried out during the "Stay Home, Stay Healthy" order enacted on March 23, 2020, due to the COVID-19 pandemic. COVID-19 has impacted every aspect of the Girls Court Program, including youth recruitment, program delivery, maintaining connections with program participants, data collection, and evaluation. For example, the program was expected to serve approximately 25 girls per year (or approximately 75 girls during the 3-year long pilot period), but only 27 girls participated in the pilot. Low enrollment has had direct implications for the logistics of collecting data and the evaluation activities. Eligibility for the program also changed midway through the program. When the Kitsap County Girls Court began, the program was post-dispositional, meaning that girls were referred after being adjudicated. The program switched to a pre-dispositional model in mid-2021, meaning that girls are identified and, if eligible, referred before being adjudicated. When Girls Court changed to a pre-dispositional therapeutic model, it shifted focus to the needs of the youth, instead of the risk classification, allowing for youth who are classified moderate or high to participate in activities with youth who are classified low risk, as indicated by their Positive

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[1] Though initial funding for the pilot ended in spring of 2022, at the time of writing this report (summer 2022) Kitsap County continues to operate the program.

[2] For a more detailed description, see Gertseva, A., & Mocha, C. (2023). *Girls Court Program: Blueprint for Implementation*. Olympia, WA. Washington State Center for Court Research (WSCCR), Administrative Office of the Courts. This publication is available on the CCYJ Web site at: https://ccyj.org/our-work/girls-court/

[3] "Girls" and "female" refer to cisgender and transgender girls as well as gender-expansive youth (non-binary youth, gender non-conforming youth, gender queer youth, and any female-identified youth). Although participants in this pilot were mostly cis white girls, program staff were trained and prepared to provide supportive environment for gender-expansive youth.

[4] The court recognizes that a family can include people of various ages who are united through biology, marriage, or adoption or who are so closely connected through friendships or shared experience that they are taken to be family members.

[5] Although WSCCR is administratively located inside the Administrative Office of the Courts (AOC), it has been able to maintain an independent capacity for objective research within the judicial branch since 2004, when it was established by order of the Washington State Supreme Court.

Achievement Change Tool (PACT).[6] Expanding eligibility has impacted program delivery as well as study methodology and data collection considerations.

Despite these challenges, program staff are determined to continue the program. The Kitsap team has already begun to think about how to expand program options and create opportunities for serving all youth in the juvenile justice system, including girls, boys, LGBTQ+ youth, and youth from traditionally underserved communities (i.e. Black, Indigenous, and People of Color (BIPOC)). By creating and sustaining inclusive practices, the program staff is hoping to promote equity by supporting all youth entering the juvenile justice system.

An original evaluation plan developed prior to the pandemic was updated several times to reflect program changes during the pandemic. The project team prioritized evaluation activities and identified design options that were feasible in the context of virtual programming and social distancing protocols, and discarded those that would be challenging, if not impossible, to carry out. Although the evaluation process has been constantly evolving to adjust to the reality of the COVID-19 pandemic, all efforts were made to ensure that the findings and recommendations from the evaluation would help the Kitsap team monitor their performance and identify opportunities for improvement in program management and service delivery.

This consolidated report concludes a series of five separate evaluation reports prepared at different times of the pilot.[7] It provides a synthesis of evaluation activities and data collected throughout the 3-year pilot period, and presents the lessons learned along the way. By sharing practical tools and tips used to evaluate the Girls Court Program in one community, we hope to inspire others to invest in program evaluation when implementing a girls' court in their own communities. Our approach is not one size fits all. Rather, it should be tailored to local conditions, existing resources, opportunities, and programming objectives. Terminology used in this report is explained below.

TERMINOLOGY

The binary terms "boy/girl" and "male/female", used in this report to summarize past and current research, refer to sex assigned at birth, not gender identity. Most data and research in the juvenile justice system does not capture or acknowledge gender identity, much less gender expansiveness.

Gender is a social construct composed of norms, behaviors, relationships, and roles. Gender may be categorized as non-binary, as well as man or woman, boy or girl, or many other identities. For many individuals, gender identity is experienced (and gender is expressed) in expansive ways, outside of the girl/woman versus man/boy binary. Almost all data is about sex assigned at birth and not gender identity. Sex assigned at birth is based on physical characteristics; gender identity is an internal sense of self. We can't know someone's gender identity unless we ask.

[6] Research indicates mixing young people who have been assessed at high risk to reoffend with young people assessed at low risk can be problematic when mixed groups are unsupervised. Lipsey, M. W. (2006). The Effects of Community-Based Group Treatment for Delinquency: A Meta-Analytic Search for Cross-Study Generalizations. In K. A. Dodge, T. J. Dishion, & J. E. Lansford (Eds.), Deviant peer influences in programs for youth: Problems and solutions (pp. 162–184). The Guilford Press. Lipsey did not find any evidence of adverse peer contagion effect in mixed groups if the activities are supervised. *Id*. Opportunities for unsupervised interactions within the Girls Court are non-existent. All program activities and group treatment continued to be supervised after the transition to a pre-dispositional model, eliminating the risk of peer contagion. At the time of writing this report (Fall 2022), there was only one girl who scored as low risk on the PACT who has participated in the program.

[7] To view the previous five evaluation reports visit https://ccyj.org/our-work/girls-court/

Key Findings of the Evaluation

The evaluation identified a number of program strengths as well as relevant findings about participants. The key findings can be summarized in the following:

1. **The program led to changes in staff capacity, partnerships, and program environment**
    - Court staff were successful in building new partnerships with community stakeholders that made youth's access to community resources more streamlined and efficient. Since 2019, program staff has developed effective working relationships with 17 community organizations. These relationships started with networking and, over time, evolved to incorporate many elements of collaboration.
    - As a result of the program, community stakeholders and court professionals have developed channels for communication that did not exist before through monthly court hearings and stakeholder meetings, as well as regular emails and phone calls.
    - All program staff reported developing new knowledge and skills in gender-responsive programming through a series of trainings, which, according to staff, enhanced their ability to use trauma-informed practices, whether they work directly with program participants or with other staff.
    - The program elements and activities incorporated many core elements identified as meeting criteria for gender-responsive programming set by the Office of Juvenile Justice and Delinquency Program (OJJDP).[8]

2. **Participants reported a wide range of needs at program entry**
    - Program participants reported numerous needs at program entry, including histories of trauma, mental health issues, substance abuse, unhealthy relationships, family dysfunction, academic failure, and school disengagement.
    - Based on the programmatic needs of the girls, the program staff created personalized treatment plans that support each girl's needs.
    - Willingness to participate with mental health and a substance abuse treatment plan was identified by staff as crucial to achieve intended outcomes, and also an area of pushback from some girls, especially with in-patient treatment.

3. **The program delivered a range of services and treatment, according to each participant's needs**
    - Nearly 80% of all participants received some form of mental health and/or substance use treatment during the program, including 11% who received inpatient mental health treatment.
    - Nearly 50% of participants participated in life skills development programs, as well as job training in a wide variety of community settings.

[8] Kerig, P. K., & Schindler, S. R. (2013). Engendering the evidence base: A critical review of the conceptual and empirical foundations of gender-responsive interventions for girls' delinquency. *Laws*, 2, 244-28.

- Over two-thirds were provided student assistance, independent living skills, counseling support, school reengagement services, and dropout intervention.

4. The program created positive changes for participants

The program's strengths are in skills building and in enhancing attitudes and behaviors related to emotional stability and cognitive reasoning. For example, almost two-thirds of Girls Court participants (67%) improved in prosocial moral reasoning and problem solving, and 57% improved in emotional stability (e.g., ability to regulate impulsivity, having empathy for victims, and accepting responsibility for behavior).

- The pilot has also shown evidence of school improvement, with 47% of girls demonstrating positive changes in academic engagement (i.e., school enrollment status, attitudes toward education, school attendance, academic performance, and school conduct).
- Girls' behavioral health gains were very modest, with 40% showing positive changes in substance use and 28% showing improvement in mental health.

5. **Recidivism was lowered**[9]

- Recidivism among program participants was lower (19%), compared to a 24% recidivism rate among Kitsap girls (N=38) who were sentenced to community supervision a year prior to the launch of the program.
- Out of 27 participants in the pilot, only one youth (4%) re-offended[10] after completing the program, and four girls (15%) reoffended while on community supervision with/participating in the Kitsap Girls Court. The girls who reoffended while participating in Girls Court were promptly offered appropriate services through the program. One of those girls still was able to come off supervision early due to her positive efforts after the new offense occurred.

[9] The original plan to examine differences in recidivism rate (the number/percentage of youth referred to the courts, measured by court filings, at least once up to 18 months following program completion) between program participants and non-participants was not fully executed due to COVID-19's dramatic impact on program enrollment and time constraints of the pilot. That is why in this report, instead of program completion date, we used the program start date as the start date for tracking recidivism. The presence or lack of re-offending behavior was measured by a new court referral based on the offender matter.

[10] Recidivism was measured by a court referral that represented a juvenile referred to court on an offender matter regardless of the number of violations committed by the juvenile. This does not automatically indicate that a referral has been formally processed, nor does it imply the outcome of the case (deferred, diverted, dismissed, or found guilty). All of these cases were included.

Lessons Learned

The following lessons proved essential to the success of the Kitsap County Girls Court implementation during COVID-19 and could be useful to other girls' courts. Social distancing protocols, restricted "non-essential" movement outside the home and school closures have impacted participating youth, including their connections with others and engagement with social activities. The pandemic-related changes have also posed challenges for service providers and court professionals to deliver the program the way it was originally planned. It is important to note that what works for one community may not work for another. However, the lessons learned in Kitsap in response to COVID-19 can be applied across communities in a post-COVID world.

- **Provide hybrid programming**:[11] Most program staff said they intend or hope to combine the best practices of digitally-enabled care with in-person elements to ensure a meaningful balance between the two modes of program delivery. Digital technology enabled staff to maintain considerable flexibility in the way they connected with program participants, but face-to-face communication was viewed as paramount for building trust and positive relationships with the girls.

- **Start small**: When introducing new practices and/or activities, start small, learn if it works, and then decide whether to use it in the future. This trial-and-error method was reported by program staff to be the most suitable in the environment where in-person contact with youth was largely interrupted due to COVID-19 and the level of uncertainty about service effectiveness was high.

- **Be flexible**: The program strategies and tactics must be flexible. This includes being ready to adapt to a quickly-changing environment, being open to new ideas, being prepared to address the urgent needs of youth, designing and piloting new program activities, and trying new engagement strategies.

- **Provide crisis support**: Many stakeholders emphasized the importance of providing crisis counseling (e.g., on-line, over messaging, and/or face-to-face) to help youth deal with the COVID-19 and other life crises. Particular attention should be given to youth with pre-existing mental health conditions and/or substance use disorders.

- **Continue program performance monitoring**: Many of the program gains only began to manifest during the pilot. Additional research is warranted. Program staff should establish a continuous process for self-assessment, tracking progress, identifying challenges, and taking steps to address them. Within this process, it is important to solicit input from youth and families regarding their experiences with the program. Program staff can collect this input using various mechanisms, such as surveys, focus groups, and informal conversations.

[11] In response to COVID-19, court professionals and youth-serving providers transitioned to virtual programming including case management, court hearings, program activities, and service provision. For case management, court professionals during the pandemic continued their standard practices, but increasingly leveraged virtual modes (Zoom or phone) with an option of conducting an in-person meeting for the initial intake and assessment. Zoom emerged as the most commonly reported platform for doing assessments, delivering case management and conducting video calls. Practically all stakeholders described using this application to virtually connect with youth. For court hearings, Kitsap County Superior Court was also utilizing the Zoom platform. All respondents agreed that Zoom (and other virtual platforms) was a valuable tool in many instances.

EVALUATION QUESTIONS

A program evaluation began shortly after the launch of the program.[12] It started with generating a theory of change that is visually represented by a logic model[13] in Figure 1. Building this model was an iterative process; it has been updated several times based on local conditions and feedback from program staff to reflect program changes over time. The final logic model served as a basis for the entire evaluation process. The top of the diagram (Figure 1) portrays the sequence and a concise description of six program elements leading to outcomes: 1) inputs (e.g., resources); 2) activities (e.g., program events or strategies); 3) outputs (e.g., results of program activities); 4) short-term outcomes (immediate effects of the program); 5) intermediate effects (the intended effects that occur over the midterm of the project period); and 6) impact (e.g., long-term effects of the program).

The evaluation included a process and an outcome evaluation. The process evaluation was used to assess the extent to which program activities were carried out as planned and to identify any obstacles that were encountered, as well as how these obstacles were overcome.

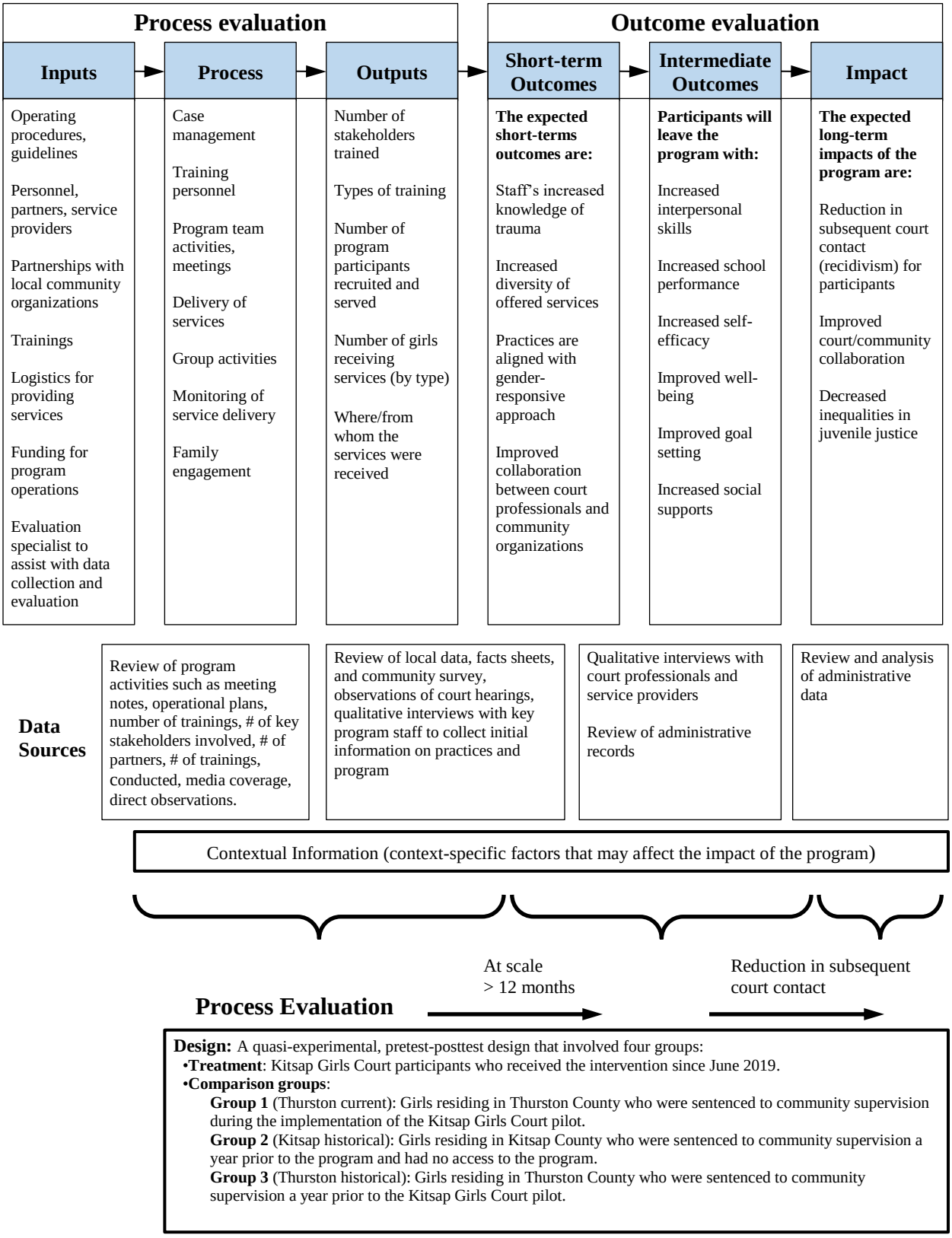
Among the key questions considered in the process evaluation were:

1. What is the community context for the program?
2. Who are the Kitsap County Girls Court participants? What is their demographic make-up and in what ways are program participants different from other girls sentenced to community supervision?
3. What are the primary needs of girls participating in the program?
4. How many girls have been served by the Kitsap County Girls Court pilot?
5. Was the Kitsap County Girls Court implemented following the intended model?
    - Are the program activities aligned with the core components of gender-responsive programming?
6. How do staff view the services provided to participants during the pandemic?
    - How did court professionals adjust and innovate in response to the changing needs of youth during the pandemic?
    - Do staff think they were able to ensure continuity of services during transition to virtual work in response to COVID-19?
7. What were key lessons learned from implementing the program during the pandemic?

[12] In May 2019, the Washington State Center for Court Research (WSCCR), was contracted by the by the Center for Children & Youth Justice (CCYJ) to conduct evaluation of the Girls Court pilot. Although WSCCR is administratively located inside the Administrative Office of the Courts (AOC), it has been able to maintain an independent capacity for objective research within the judicial branch since 2004, when it was established by order of the Washington State Supreme Court.

[13] Funnell, S.C. & Rogers, P. J. (2011). Purposeful program theory: Effective use of theories of change and logic models. San Francisco: Jossey-Bass/Wiley. http://journals.sfu.ca/jmde/index.php/jmde_1/article/view/496/444

Figure 1: Kitsap Girls Court Program Logic Model



The outcome evaluation was used to examine whether the program achieved its intended goals.[14] It mostly focused on short-term and intermediate outcomes that occur while a participant is still in the program. Because long-term impacts of the program usually take a long time to be seen (sometimes up to three years after the program), the evaluation could only measure recidivism that took place during the evaluation period (or between June 15, 2019 and August 31, 2022).

Among the key questions considered in the outcome evaluation were:

1. How has the program influenced the stakeholder community, and what capacities has it built?
2. Does the program deliver the intended services?
3. Does participation in the program lead to improved life circumstances, developmental competencies, needs, challenges, and characteristics for participants compared to those who did not participate?
4. If it does, what are the areas where the biggest change happened and the areas where little or no change occurred?

Figure 1 also presents sources of relevant data collected at different times of the pilot. The logic model also briefly describes a quasi-experimental, pretest-posttest design that was used in the study to compare the Girls Court participants with three comparison groups of girls who did not participate in the program.[15] One consisted of Kitsap girls sentenced to probation prior to program implementation, and the other two consisted of girls residing in Thurston County (Fig.2).

Thurston County was chosen as a comparison community because of its similarity to Kitsap in regard to several indicators such as population size (252,264 people in Thurston and 251,133 in Kitsap), household median income ($60,930 and $59,549, respectively), poverty (10% of the population below the poverty line in Thurston and 9.4% in Kitsap), prevalence of female headed households (11% and 10%, respectively), alcohol-or-drug related deaths, per 100 deaths (14.41 and 14.71, respectively), and victims of child abuse and neglect in accepted referrals, per 1,000 children (0-17) (32.85 and 36.22, respectively).

Figure 2: Kitsap and Thurston Counties

[14] The evaluation reports are posted on the CCYJs' website. To view them click here.

[15] This method was utilized to evaluate the impact of the Crossover Youth Practice Model (CYPM) in an urban county in a Midwestern state: Haight, W., Bidwell, L., Seok Choi, W., and Choa, M. (2016). An evaluation of the Crossover Youth Practice Model (CYPM): Recidivism outcomes for maltreated youth involved in the juvenile justice system, *Children and Youth Services Review* 65: 78–88.

METHODS AND DATA

This section describes the methods and data sources used in the evaluation.

Community Assessment

Several publicly available data sources were used, such as public health program tracking, fact sheets, reports, and community surveys, to examine community contextual factors. Particular attention was paid to key factors identified by service providers and program staff as the top three challenges specific to program participants during in-person key stakeholders interviews conducted between July and September of 2020. These key dimensions included school-related challenges, substance use, and mental health.

The following data sources were used:

- 2019 Kitsap Community Health Assessment (KCHA)
  - 2019 Kitsap Community Health Priorities Survey Results
  - 2019 Qualitative Findings from Kitsap Community Input
- 2018 Healthy Youth Survey (Kitsap County)
- 2018 Kitsap County Core Public Health Indicators Report
- 2020 Kitsap County Risk and Protective Profile for Substance Abuse Prevention (RDA)
- 2020 Kitsap Community Risk Profile Summary, by school district (RDA)

These data allowed us to understand the local environment in which the girls' court program is operating, identify the existing community challenges, discuss possible implications of these challenges for the program, and suggest recommendations for program implementation.

Observations

A WSCCR researcher visited the Kitsap Juvenile Court four times in 2019 to observe on-site training sessions, staff meetings, and court sessions. These observations provided information about how the program staff responded to the trainings and whether they are applying the gender-responsive approach[16] at program planning meetings and/or court hearings. During court sessions, the researcher observed what was happening in the courtroom, including but not limited to the interactions between the judge, program participants, and court staff. The researcher also observed whether the girls had an opportunity to voice their concerns during hearings and whether the judge engaged youth at the hearings (e.g., whether the judge explained hearing purpose and process, whether the judge spoke directly to and addressed the girls by their first name, whether the judge asked if youth had questions, making sure participants understand what was happening during the hearing and what comes next, whether the progress of each participant was meaningfully discussed, including what was going well and where additional support was needed).

[16] Kerig, P. K., & Schindler, S. R. (2013). Engendering the evidence base: A critical review of the conceptual and empirical foundations of gender-responsive interventions for girls' delinquency. *Laws*, 2, 244-28.

Post-training Feedback Surveys

All program staff, including the judge, prosecutor, probation manager, court supervisor, detention manager, detention alternative staff, program director, and local service providers received a series of trainings from consultants and other experts brought to the site. Several post-training feedback surveys were used to measure the staffs' reactions to training they received, and the degree to which training participants acquired the intended knowledge, skills, attitudes, confidence, and commitment to the gender-responsive approach. These surveys provided information about staff knowledge and readiness for the program, to identify what was missing, and to address those gaps.

Program Document Review

A WSCCR researcher reviewed program documents, including an assessment tool, program referral form, case management form, and weekly progress reports to better understand the operations and practices of the program and to ascertain they are aligned with the core components of the gender-responsive approach and Hope Principles.[17] This information helped to understand how the program is implemented and how it operates.

Key Stakeholder Interviews

Two sets of key stakeholder interviews were conducted via video conference, first at the beginning of the program and again at the end of the program. The interviews were designed to better understand the effectiveness of the program through the lens of key experts who are directly involved with the program and with its participants. This includes internal court system stakeholders (e.g., court administration, attorneys, prosecutors, clerks, and other court staff) and external stakeholders from the community (e.g., service providers, volunteers, and non-profit organizations). The first wave of interviews, conducted between July and September of 2020, provided a deeper understanding of the program's structure, procedures, and practices established during the first year of implementation, while the second wave of interviews, conducted between September and December of 2021, identified changes that were made to the program in response to COVID-19.

Administrative Data

Two sources of administrative data were used: 1) the Judicial Information System (JIS), the primary information system for courts in Washington, and 2) the Positive Achievement Change Tool (PACT), [18] which captures risk and needs assessment information on all youth placed on probation.

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[17] The Kitsap Juvenile Court contracted with Kitsap Strong to receive consulting around utilization of the science of Hope in their practices. **Hope** is the belief that the future will be better than today, and you have the power to make it so. Hope is based on three main ideas: desirable goals, pathways to goal attainment, and willpower to pursue those pathways. **Goals** are desired outcomes you are trying to accomplish. **Achievement** (positive) goals are those we want to attain. **Pathways** are the roadmaps individuals have in mind that will allow them to begin the journey toward the future; a goal without a pathway is only a wish. **Willpower** is your ability to dedicate mental energy to begin and sustain the journey toward your goals. Ideas developed by Dr. Chen Hellman, professor of social work at the University of Oklahoma and Director of The Hope Research Center. Tulsa Schusterman Center. (2022). *Hope Research Center*. https://www.ou.edu/tulsa/hope.

[18] Prior to the program, court staff performed risk and needs assessments using the Positive Achievement Change Tool (PACT), a 126-item, multiple choice in-depth assessment instrument, which produces risk level scores measuring a girl's risk of re-offending. The PACT helps to match a girl's needs with the appropriate programs and services. PACT reassessments inform the court professionals of the girl's improvements.

The administrative data were used to:

1. Identify girls sentenced to community supervision between 2018 and 2019 in Kitsap and Thurston County (for comparison) and create four study groups: a treatment group (Kitsap girls who participated in the program since its launch, June 2019) and three comparison groups (girls who did not participate in the program) (see the Logic Model, p. 8).
2. Examine selected pre-pilot characteristics (e.g., school experiences, family relationships, mental health issues, and substance use) of youth who participated in the program (the treatment group), compared with youths who did not participate in the program (the comparison groups).
3. Examine the extent to which a participant's life circumstances, developmental competencies, and characteristics (these are frequently referred to as protective and risk factors) change over the course of the program, compared with those who had no access to the program.
4. Monitor the recidivism among program participants by capturing referral for a new felony or misdemeanor charge while participating in the Kitsap Girls Court program, as well as within 18 months following program completion date, as measured by a court referral/arrest.[19]

RESULTS: PROCESS EVALUATION

What was the community context for the program?

The program operated within the larger context of Kitsap County. This section discusses the contextual characteristics of the local community that could facilitate or impede successful implementation of the Girls Court program. This approach follows an ecological framework of effective program implementation, which was originally developed to promote success of community-based health programs.[20] The community assessment focused on three factors identified by the program staff (via in-person interviews) as the top three challenges facing program participants: 1) school-related challenges; 2) substance use; and 3) mental health.

The analysis of the Healthy Youth Survey (HYS)[21] data related to school factors showed that in 2018, more than 40% of Kitsap County 8th-, 10th-, and 12th-grade girls experienced academic failure (e.g., having mostly C's, D's, and F's grades) and low commitment to school. About a fifth of Kitsap girls in 8th, 10th, and 12th grades (21%, 23%, and 29%, respectively) believed that school work is not meaningful and more than a fourth of 8th and 12th graders (27% and 28%,

[19] Due to time constraints of the pilot, we were not able to track recidivism for every participant within an 18-month follow-up period. For some girls who completed the program in 2022, the follow-up period was less than three months. The Kitsap team continues monitoring and reporting how many girls committed a new offense, what offenses they committed, or how many offenses they committed while being in the program as well as during the 18-month mark of follow up, measured by court referral.

[20] Durlak, J. A. & DuPre, E.P. (2008) "Implementation matters: A review of research on the influence of implementation on program outcomes and the factors affecting implementation." *American Journal of Community Psychology*; 41:327-350.

[21] The Healthy Youth Survey (HYS) is a collaborative effort of the Office of the Superintendent of Public Instruction, the Department of Health, the Health Care Authority's Division of Behavioral Health and Recovery, and the Liquor and Cannabis Board. In fall 2018, students in grades 6, 8, 10, and 12 answered questions about mental health, substance use, safety and violence, and related risk and protective factors.

respectively) and more than a third of Kitsap girls in 10th grade (34%) indicated that learning is not important for the future. The percentage of Kitsap girls skipping school increased from middle school throughout high school, reaching its highest rate in 12th grade (23% for Kitsap and 26% for the state), and approximately 1 in 10 Kitsap girls in all grades reported missing school because they felt unsafe at school.

Substance abuse, according to more than half of the 2019 Kitsap Community Health Priority Survey respondents, is one of the three biggest health problems impacting the health of Kitsap youth (ages 11-18). The HYS data showed that more than a quarter of high school girls in Kitsap (28%) reported easy availability of drugs in the community and the belief that the norms in their community are favorable to drug use. This means that in a typical-sized Kitsap 12th grade classroom,[22] at least 4 girls can easily access drugs. Prescription drugs are the second most abused illicit drug, behind marijuana, among 10th and 12th graders in Kitsap. Though the percentage of girls abusing prescription drugs is still relatively low (7-8%) compared to marijuana use (17-29%), there are troubling signs that youth nationwide view abusing prescription drugs as safer than illegal drugs.[23]

Mental health needs (treatment, medication, suicide prevention, etc.,) were identified by almost half of community members as one of the three biggest health problems impacting youth in Kitsap County.[24] Based on the HYS data from 2018, more than 30% of Kitsap girls in 8th, 10th and 12th grades reported having seriously considered suicide, over 20% reported having made a suicide plan, and just over 10% reported having attempted suicide. This means that in a typical-sized Kitsap high school classroom, chances are one or two girls have attempted suicide in the past year.

The Girls Court program was designed to buffer the adverse community circumstances by providing services designed to increase confidence and self-efficacy, strengthen interpersonal skills, and improve school performance and goal setting by building positive relationships and support systems. Research shows that expanding girls' social support network through creating relationships with formal mentors, "very important non-parental adults" (VIPs),[25] and adults providing social support in their community improves girls' social connectedness. Youth who feel connected at school, at home, and in the community were found in the recent CDC study to be as much as 66% less likely to experience health risk behaviors related to sexual health, substance use, violence, and mental health in adulthood.[26]

[22] About 30 students with 50/50 gender ratio.
[23] National Survey Results of Drug Use (2020)
[24] Kitsap county 2019 community health priorities survey results participation summary
[25] Beam MR, Chen C, Greenberger E. (2002). "The nature of adolescents' relationships with their "very important" non-parental adults. *American Journal of Community Psychology,* 30:305–325.
[26] Steiner, R. J., Sheremenko, G., Lesesne, C., Dittus, P.J., Sieving, R.E., and Ethier, K.A. (2019). "Adolescent Connectedness and Adult Health Outcomes." *Pediatrics*, 144(1): 2018-3766.

Characteristics of program participants

Within the evaluation context, examining participants' pre-program needs provides useful information for understanding who the clients are and what they bring into the treatment setting. This analysis serves as a baseline measure, against which subsequent progress can be assessed.[27]

The program began in June of 2019 and continued through May 31, 2022.[28] During this time, 27 girls participated in the program.[29] The PACT data were available for only 24 girls. All results in this section are based on PACT data for these 24 participants (see Table 1).

For the most part, the program participants were representative of the girls in the general Kitsap female population (ages 12-17) with a majority of participants being White (63%), except that program participants included a higher percentage of Black girls (8% in the program vs. 3% in the general Kitsap's female population) and higher proportion of Native Hawaiian or other Pacific Islander girls (8% and 1%, respectively). Also, participants consisted of a lower percentage of multiracial girls (0% vs. 13%). The average age of girls in the program was 15, with the youngest girl being 13 and the oldest girls being 17 years of age.

Table 1: Demographic characteristics of program participants

	Kitsap female population (ages 12-17)		*Kitsap Girls Court participants*	
	N	*%*	*N*	*%*
White	5,695	64%	15	63%
Black/African American	265	3%	2	8%
Asian	534	6%	1	4%
Native Hawaiian/Pacific Islander	132	1%	2	8%
Hispanic/Latinx	1,008	11%	3	13%
American Indian/Alaskan Native	157	2%	-	-
Two or more races	1,115	13%	-	0%
Unknown	-	-	1	4%
TOTAL	8,906	100%	24	100%

The characteristics of program participants were further examined based on their PACT responses to sets of items related to school status, family relationships, trauma, alcohol/drug use, and mental health status.

[27] The Positive Achievement Change Tool (PACT) assessment data were used for this analysis. PACT is a software-scored/automated version of the Washington State Juvenile Court Assessment [WSJCA] that is administered to every youth sentenced to community supervision . The PACT is comprised of 12 domains: criminal history, demographics, school, use of free time, employment, relationships, family, alcohol and drugs, mental health, attitudes, aggression, and social skills.

[28] At the time of writing this report (Fall 2022), Kitsap County continues to operate the program.

[29] The program was expected to serve approximately 25 girls per year (or approximately 75 girls during the 3-year long pilot period), but COVID-19 has had a profound impact on program enrollment.

Our results showed that school-related issues were very common among girls entering the program. Nearly 29% of participants had special education needs at intake, with 17% reporting having learning disabilities and 25% being diagnosed with ADHD. The majority (83%) had a history of conduct problems in school at intake. These included behavior problems reported by teachers (29%) and problems resulting in calling parents and/or police (54%). The majority (79%) has had a history of school expulsions. Of those program participants with a history of expulsions, 71% were between 10 and 13 years of age at the time of their first expulsion. Previous research had established a link between early exclusionary school discipline (out-of-school suspensions and expulsions) and student outcomes such as lower test scores, truancy, dropout, grade retention, and involvement in the juvenile justice system. Consistent with this research, the majority of program participants were skipping school (66%), reported not being close to any teachers, school staff, or coaches (71%), and 33% had failing grades at the time of the assessment (grades Ds and mostly Fs).

A large proportion of participants (75%) had a history of running away from home, 42% were victims of neglect, 33% had a history of dependency, 29% had a history of out-of-home placement, and 8% were in foster care at the time of the assessment. The majority of participants (88%) were exposed to family conflict and/or violence. In particular, more than half (50%) experienced verbal intimidation, yelling, and heated arguments in the family, while 29% experienced domestic violence. Almost a half (46%) of program participants witnessed violence, 38% were victims of physical abuse and 42% were victims of sexual abuse. More than half (54%) had a history of mental health problems, 38% reported experiencing consistent feelings of depression/anxiety, and 8% reported impairment in everyday tasks due to depression/anxiety. Despite the high rates of mental health problems, only about 22% of program participants had undergone mental health treatment or had been prescribed medication prior to the program. Further, more than half (66%) used drugs and 33% used alcohol within 6 months prior to entering the program.

In interviews, program staff reported a shared understanding of the primary needs of girls entering the program. All agreed that although needs vary from girl to girl, they are generally within the same areas of concern, including histories of trauma, mental health issues, substance abuse, unhealthy relationships, family dysfunction, academic failure, school disengagement, and lack of social support. These needs intersect and correlate with one another resulting in multi-layered personal, school, and familial issues affecting their lives. Based on the programmatic needs of the girls, the program staff creates personalized treatment plans that support each girl's needs. The majority of program staff agreed that the success of participants in the program depends on whether trauma-related issues are addressed and where the girls are in their recovery process.

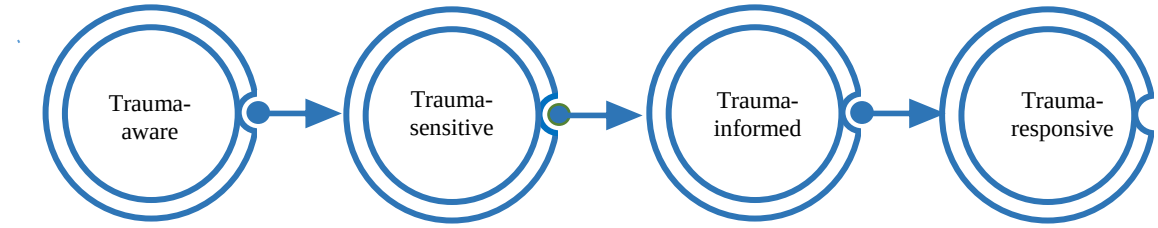
> *"If they [girls] can overcome trauma that they experienced, work on mental health and substance abuse issues, they can eventually deal with other issues. If these issues are not taken care of, they can cause other problems down the road and result in the same behaviors that brought the girl in the system in the first place."*
>
> *-Kitsap court professional*

Building Staff Competencies

All program staff, including the judge, prosecutor, probation manager, court supervisor, detention manager, detention alternative staff, program director, and local service providers received a series of trainings from consultants and other experts brought to the site. The purpose of the trainings was to help program staff in planning for, implementing and sustaining a trauma-informed organizational change process. The trainings focused on topics that constitute core elements of gender-responsive interventions such as girl-centered practices and gender responsiveness, trauma and trauma-informed care, serving LGBTQ + youth, sexual exploitation, and racial equity. Each training included interactive activities that allowed participants to discuss how the knowledge and skills the training taught will be used in the workplace. Table 1 provides a list of training topics, experts conducting each training, and the dates when each training occurred.

Figure 1 illustrates four stages of an ongoing organizational change process that emerged as the result of these trainings. This assessment is based on post-training surveys, key stakeholder interviews, court hearing observations, and informal conversations with court professionals and service providers. As a result of the trainings, program staff developed new skills and knowledge that allowed them to evolve from being trauma-aware (staff know the definition of trauma and its impact on people) to being trauma-sensitive (staff value and prioritize the trauma lens in their work), and then to being trauma-informed (staff apply new knowledge about trauma to their specific work), while demonstrating some elements of being trauma-responsive (staff have made trauma-responsive practices a part of programming, staff presumes that all girls have experienced trauma (i.e., universal precautions approach.) and all program participants are screened for trauma).[30]

Figure 1: A Developmental Framework for Trauma-Responsive Care



Most program staff agreed that, as the result of the trainings, they not only became more knowledgeable about the lifelong effects of trauma, recovery needs, and implementation of trauma-focused treatment interventions, but also better positioned to use trauma-informed practices, whether they work directly with girls coming into contact with the juvenile justice system or with other staff.

[30] Adopted from the three sessions of NIC's 2020 Becoming Trauma-Informed Webinar series. Videos and other details about these sessions can be found on the http://nicic.gov\ website. Becoming Trauma-informed and moving to trauma-responsive webinar is here Becoming Trauma Informed and Moving to Trauma Responsive, Part 3 | National Institute of Corrections (nicic.gov)

In addition to trainings, three learning sessions were conducted, each following the release of a new evaluation report. The intent of these sessions was to help the Kitsap team engage in a discussion about what is working and what is not working, diagnose what they need to improve, and use that information to make changes. Based on several comments from court professionals, learning sessions enabled program staff to identify potential solutions, determine whether the ability to make change lies within the team's control, and identify who is responsible for making the change.

Table 1: Trainings, description, providers, and the dates

Training	Provider	Date
Girl-Centered Practices and Gender Responsiveness Key topics included research and data on gender disparities in the juvenile justice system, distinctions in physical, mental, emotional, and social health needs for girls, trust and relationship building with at-risk girls, and strategies for resolving interpersonal conflicts with at-risk girls.	The Justice for Girls Coalition	5/7/19
Serving LGBTQIA+ Youth This training was designed for youth serving professionals (but open to all) who want to learn more about supporting LGBTQ+ youth. Key topics included: ● Why we need specific protections and supports for LGBTQ+ youth; ● What it means to be LGBTQ+, including the definitions of sexual orientation, gender identity, and gender expression (SOGIE); ● Some fundamental protections and supports for LGBTQ+ youth; ● Some promising practices for discussing SOGIE with youth; and ● Two steps they can take toward making their court, agency, or organization safer and more affirming.	The Center for Children & Youth Justice	8/19/19
Serving Child Survivors of Commercial Sexual Exploitation This training provided information on the what, who, how, and why of Commercial Sexual Exploitation of children, with a focus on victim engagement and a detailed discussion of identification and the "red flags."	The Center for Children & Youth Justice	9/9/19

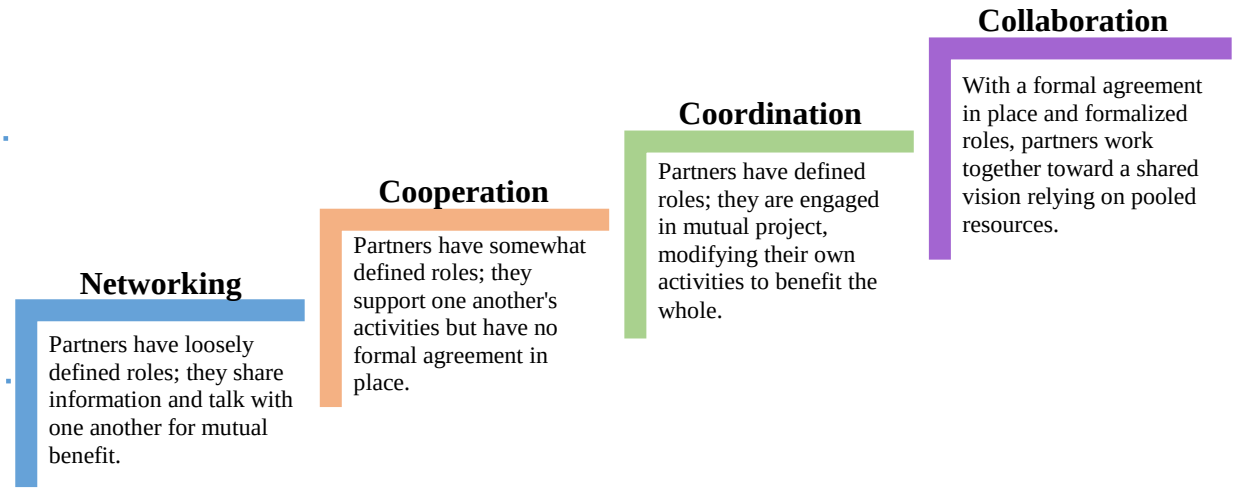
Training	Provider	Date
Nutrition and Trauma ("Protein For All") The training was designed to train court officials to use food to improve their own energy, mental clarity, and decision making. For the court officials, using the food helps to reduce secondary trauma and burnout. For the clients, food helps engage their responsive brain versus their reactive brain to increase engagement.	Kristen Allott, ND, MS	10/28/19
Race Equity Training Series ● *Session 1: Welcome & laying the groundwork* This session introduced core concepts such as systemic racism, equity vs. equality, race equity, and implicit bias, and why these key concepts are critical for justice system workers to know, understand, and integrate into their work. ● *Session 2: Structural racism & systems thinking.* This session described the historical context of the law and justice system and explained how systems become oppressive. ● *Session 3: Addressing bias & interrupting racism & oppression (part 1)* This session helped participants examine the impact their lived experiences, and interpersonal interactions have on clients and colleagues. ● *Session 4: Addressing bias & interrupting racism & oppression (part 2)* This session offered strategies to interrupt racism and bias to support engaging more competently with court participants and colleagues of color.	JustLead Washington	3/2/21 – 3/23/21
Science of Hope Trainings Series ● *Session 1: Science of Hope - Overview* This presentation presented an overview of the science of hope and its ability to 1: buffer adversity and stress, 2: lead to positive outcomes, and 3: is a strength that can be nurtured with targeted intervention. ● *Session 2: Regulation, Neuroscience of Motivation, and Tools for Building Hope*. Review the science of hope framework and dive-deep into the neuroscience of regulation and motivation. Participants will be invited to explore practical tools/solutions for increasing agency thinking, pathway thinking, and visioning.	Kitsap Strong	01/05/21-10/12/21

Evolution of Partnership with Community Organizations

Figure 3 illustrates four stages of partnership evolution between the Kitsap court and local service providers that emerged as the result of the program. This assessment is based on key stakeholder interviews, court hearing observations, and informal conversations with court professionals and service providers. The analysis is grounded in the Prevention Collaboration in Action Framework[31] that was developed to help public health systems determine their current level of involvement with various partners, as well as options for deepening these relationships over time.[32]

Successful collaboration with local partners, according to program staff, was possible because of strong judicial leadership and the program's proactive outreach approach in finding and bringing together local community-based organizations such as schools, service providers, and others. Since 2019, program staff has developed effective working relationships with 17 community organizations. These relationships started, prior to the launch of the program, with networking involving informal communication among partners about existing programs, activities, or services that could benefit the Kitsap Girls Court Program participants. Over time these relationships progressed into the next stage – cooperation— when program staff and community members were engaged in informal supportive relationships while creating collaborative structures that involved top administrators and middle managers. After the launch of the program, the partnership between the Kitsap court team and community partners evolved to incorporate many elements of coordination at first, (e.g., shared decision-making, regular communication), and then collaboration (e.g., formalized roles and signed memorandum of understanding, common trainings and learning sessions, established guidelines and procedures, shared decision-making, developing new services and funding for collaborative service delivery, etc.).

Figure 3: Kitsap Team Collaboration Progression



[31] Prevention Collaboration in Action was developed under the Substance Abuse and Mental Health Services Administration's Center for the Application of Prevention Technologies task order: Levels of Collaboration (edc.org)

[32] Frey, B. B., Lohmeier, J. H., Lee, S. W., & Tollefson, N. (2006). Measuring collaboration among grant partners. *American Journal of Evaluation*, 27(3), 383–392.

As a result of the program, community stakeholders and court professionals have developed channels for communication that did not exist before, through monthly court hearings and stakeholder meetings, as well as regular emails and phone calls. Although the communication among these two groups of stakeholders varied throughout the pilot from regular (e.g., weekly) to occasional contacts that occurred on an as-needed basis, the majority of program staff indicated that team members worked well together and that digital technology enabled program staff to maintain considerable flexibility in the way they connected with each other and with program participants.

These relationships, once built, will remain to support participants during the program as well as after they have left Girls Court. For example, the Individual Living Skills (ILS) program[33] offers services to participants well past the youth's "graduation" from the Girls Court Program. Youth are eligible to receive ILS services until they turn 21, and the majority of girls referred chose to continue to engage in this program long after they were off court supervision.

Alignment of the Program with the Core Elements of the Gender-Responsive Approach

Becoming a gender-responsive program requires knowledge of the principles of gender-responsive care and a commitment to change. A "gender-responsive approach" is not a program model that can be implemented and then simply monitored by a checklist. Rather, it is a paradigm shift in knowledge, perspective, attitudes and skills that continues to deepen and unfold over time.

Table 2 provides an overview of the Kitsap Girls Court Program strategies and activities that have been identified as meeting criteria for gender-responsive programming set by the Office of Juvenile Justice and Delinquency Program[34] and which incorporate theoretically informed gender-responsive elements from feminist pathways theory (e.g., addressing trauma, victimization, abuse, and neglect)[35] and relational/cultural theory that emphasizes relationships as building blocks for youths' wellness (e.g., centrality of relationships, inclusion of girls' voices, and sense of connection to others).[36]

This assessment is based on program documents review, key stakeholder interviews, court staff meetings, and court observations. In sum, many Kitsap Girls Court Program activities are aligned with the core principles and elements of gender-responsive interventions grouped into the following practice areas: 1) community-based; 2) relational; 3) behavioral needs: 4) trauma-responsive; 5) communication-based; 6) comprehensive/holistic; and 7) resources.

[33] The ILS program prepares them for adulthood by teaching youth the skills they need to be independent, and empowers them to reach their unique goals

[34] Kerig, P. K., & Schindler, S. R. (2013). Engendering the evidence base: A critical review of the conceptual and empirical foundations of gender-responsive interventions for girls' delinquency. *Laws*, 2, 244-28.

[35] Wattanaporn, K.A., & Holtfreter, K. (2014). The Impact of Feminist Pathways Research on Gender-Responsive Policy and Practice. *Feminist Criminology*. 9(3), 191-207.

[36] Cannon, K., Hammer, T., Reicherzer, S., & Gilliam, B. (2012). Relational-Cultural Theory: A Framework for Relational Competencies and Movement in Group Work with Female Adolescents. *Journal of Creativity in Mental Health* 7(1), 2-16.

Table 2: Kitsap Girls Court Program Components Matching Gender-Responsive Elements

Gender-Responsive Elements	Kitsap Girls Court Program Components
Community-based	• Girls are served in their local communities • Since 2019, program staff has developed effective working relationships with 17 community-based organizations • Community partners are permitted to review progress reports and participate in staffing • Girls have the option to remain connected to community services even after completing the program • Relationships between participants and community members developed during the program may continue to be a source of support for participants after leaving the program
Relational focus	• There is a dedicated judge (female) who oversees the cases and actively administers the program • The judge participates not only in court hearings but also in shared activities outside the courtroom • There is a high staff-to-participant ratio[37] • Each participant receives individualized attention from staff who know them well on a personal level • There is a focus on participants building positive relationships with other Girls Court participants, program staff, community service providers, and family members • There are weekly contact/meetings with the Court Services Officer[38] • Participants take part in monthly in-group shared activities that enable girls to connect with each other • The program engages families in the treatment process • The program supports ongoing positive relationships with mentors, family and peers
Behavioral health needs	• Inpatient and outpatient mental health therapy and outpatient substance use treatment are provided • Individualized therapy/counseling are offered as needed • Individual goal planning is used with each participant

[37] The target number of participants is 15-20, with a 1 to 3 ratio of staff to participants.

[38] Courts use "probation counselor" and "probation officer" terms interchangeably. RCW 13.04.035 uses "probation counselor" language, while RCW 13.04.050 has some references to "probation officer." Yet, some courts are using "court services officer" terminology to describe a position providing statutory, support, supervisory and counseling services for the superior court and juvenile department in the areas of diversion, probation, special supervision, dependency, assessments and evaluations (i.e., Okanogan, Kitsap).

Gender-Responsive Elements	Kitsap Girls Court Program Components
Trauma-responsive	• All staff members received training in gender-responsive programming • Individualized therapy is used to address trauma • Through the screening and goal-setting process, staff come to understand each girl's individual background • There is a physical site(s) available to host activities that is safe and welcoming • Program staff pays close attention to girls in crisis to ensure the physical and emotional safety of all girls
Communication	• The program provides communication skills building services/activities • The program strengthens family communication patterns and improves overall family functioning • Parents and caregivers are invited to visit court hearings (when held in person) • Parents and caregivers are included in the process of goal setting
Comprehensive /holistic	• The program integrates family, school, and other community-based agencies • The program creates opportunities for positive changes to benefit girls on an individual level, within their relationships and within the community • The program takes into account girls' needs for support, safety and intimacy • In moments of negative or disruptive behavior, staff look beyond the behavior to understand the issue driving that behavior • Program staff emphasize the importance of knowing each girl's material situation and needs (e.g., food, shelter, transportation, hygiene products, and clothes) in order to support meeting those needs
Resources for girls	• Participants have access to life skills development programs as well as job training in a wide variety of community settings • Participants receive student assistance, counseling support, school reengagement services and dropout intervention • Girls can access assistance with transportation and/or access to basic needs such as clothes and food • There is a rewards-based system based on girls' individualized interests • The program uses incentives to motivate behavior change (e.g., positive regard from the judge, tangible rewards)

RESULTS: OUTCOME EVALUATION

Community-based Service Engagement

According to key stakeholders, not every girl requires the same types of resources. In order to provide an adequate level of care to a participant, the program staff relies on the Court Services Officer (CSO), who uses the PACT and structured interviewing techniques to assess criminogenic needs and protective factors of each girl prior to enrolling in the program. In addition to risks and needs, the CSO identifies youths' strengths, interests, hobbies, and communication style, and engages participants and their families in creating individualized case plans. Development of the case plan emphasizes fitting services to each girl's particular needs. Weekly progress reports are drafted for each girl. These reports help program staff determine the extent to which girls are connected with needed services and make adjustments as needed.

Since June of 2019, 27 girls have participated in the program.[39] Table 3 shows the number of participants who were engaged in community-based services (by service type) throughout the pilot. Nearly 80% of all participants received some form of mental health and/or substance use treatment, including 11% who received inpatient mental health treatment. Nearly 50% of participants participated in life skills development programs, as well as job training in a wide variety of community settings.

Over two-thirds were provided student assistance, counseling support, school reengagement services, and dropout intervention. The majority of professionals we interviewed reported that service delivery depends on girls' motivation to participate and engage. Willingness to participate with mental health counseling/treatment and substance abuse treatment services was identified as crucial, and also an area of pushback from some girls, especially regarding in-patient treatment. Some girls are resistant to treatment for personal reasons, such as a lack of trust in the system, a feeling of being trapped or forced into treatment, and a belief that they do not have a choice or cannot change their circumstances. Several service providers noted that girls' engagement is affected by how much they know about the program and/or the community partner either through court staff or peers.

The more girls know about the program and services, the more willing they may be to participate. As one service provider stated: "We have some girls who really bought into the program and responded very well, they were satisfied with the outcomes and services." The introduction of incentive-based programming,[40] in addition to weekly progress reports, according to program staff, proved to be effective for improving participants' engagement with the program. This approach is rooted in a micro-economy framework for promoting behavior change in youth through reward-seeking behavior [41] that has been successfully applied in various settings.

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[39] The program was expected to serve approximately 25 girls per year (or approximately 75 girls during the 3-year long pilot period), but COVID-19 has had a profound impact on program enrollment.

[40] At the end of June 2021, staff started incentive-based programming, an approach that relies on offering incentives to participating youth for meeting weekly goals. Within this approach, probation staff and youth worked together to develop a case plan that included defining weekly goals and milestones.

[41] Doll, Christopher, et al. (2013). "The Token Economy: A Recent Review and Evaluation." *International Journal of Basic and Applied Science*, 2 (1): 131–149.

Table 3: Kitsap Community Partners and Services Provided[42]

Services	Provider	# Girls served (N=27)
Mental health therapy	Kitsap mental health or private	17
Intensive mental health and substance use	Wraparound with Intensive Services (WISe)	10
Inpatient mental health	Daybreak Youth Services	< 5
Behavioral rehabilitation services	Kitsap County & Peninsula, Catholic Community Services	< 5
Mental health treatment, employment assistance, educational advising, housing support services	Scarlett Road	5
Independent living skills, educational and career advancement counseling regarding attainment of general equivalency diploma (GED)	Olive Crest	5
Outpatient chemical dependency treatment	Agape	10
Mentoring (enrichment, social skills, career skills, school-based advocacy health & wellness, financial literacy)	OurGEMS	9
Housing	Youth housing authority	9
Student Advocate	South Kitsap School District	8
Job preparation and internships	The Coffee Oasis	< 5
Family Assessment Response	FAR/DCYF	5
Job preparation, including successful work ethic and attitude models	OESD 114 Early Learning	< 5
Providing professional clothing for school, interview for a job, or court hearing	Kitsap Juvenile Court, funded by Soroptomists	< 5
Individualized services, customized one-on-one programs for youth	Hope Inc	< 5
Education and training skills, empowerment	Soroptimists	10
Alternative to detention/activity provider	Alternatives to detention	10-15
Activities provider	Kitsap Credit Union	10

[42] Numbers less than 5 are suppressed to protect disclosure of individual data

Intermediate Program Outcomes

The outcome evaluation mostly focused on intermediate outcomes of the program that were measured at the end of the program and/or community supervision. In this report, "intermediate outcomes" refer to changes in the youth's life circumstances, developmental competencies, skills, needs, challenges, and characteristics (these are frequently referred to as protective and risk factors measured by PACT[43]) among girls who participated in the program (treatment), compared with those who had no access to the program (comparison). The current analyses include the girls who received both the initial and final risk and needs assessments. Girls who were assessed only once or who had missing PACT scores were excluded from the analyses. Out of 27 girls who had been participating in the Girls Court pilot, only 21 have had records of both initial and final assessments and, thus, were included in these analyses.

We used a quasi-experimental, pretest-posttest design in which Girls Court participants with available PACT scores (n=21) were compared to three comparison groups of girls who resided either in Kitsap or Thurston County either during the program (Thurston) or a year prior to the program (Kitsap and Thurston). Youth were not randomly assigned to four groups, but rather selected from the administrative data based on the place and the timing of their community supervision. All four groups were compared based on the baseline measures to control for pre-intervention group differences.[44] The groups were largely comparable; of the 25 variables examined, differences between the treatment and comparison groups were identified for only six variables.[45]

The evaluation examined the effect of the program on 10 distinct PACT domains: (1) school, (2) employment, (3) use of free time, (4) living arrangements, (5) alcohol and drug use, (6) mental health, (7) relationships, (8) antisocial attitudes, (9) aggression, and (10) social skills.

The key findings include the following:

- Overall, 67% of girls participating in the program showed improvement by the end of the program, as indicated by the reduction in risk scores or by the enhancement in protective scores in at least one domain.
- The areas in which the largest percentage of program participants, compared with the comparison groups, showed improvement were: 1) skills (67% for program participants vs. 44-58% for comparison groups) and 2) attitudes and behaviors (57% for program participants vs. 30-55% for comparison groups). Skills include items such as consequential thinking, goal setting, problem solving, situational perception, skills for dealing with difficult situations, feelings/emotions, and others, and skills for controlling impulsive

[43] The Positive Achievement Change Tool (PACT), is a 126-item, multiple choice in-depth assessment instrument which produces risk level scores measuring a girl's risk of re-offending. The PACT provides information for a case plan specific to the girl's identified needs and helps to match a girl's needs with the appropriate programs and services. PACT re-assessments inform the court professionals of the girl's improvements.

[44] Of note, the results in this report must be interpreted carefully, because they are based on a small number of observations. Small sample sizes did not allow us to use a propensity score matching technique to reduce the differences between the treatment and the comparisons groups. In smaller sample studies, propensity score matching leaves too few cases for meaningful analysis. For the future, we recommend considering the creation of comparison groups using propensity score matching to minimize pre-intervention differences.

[45] Because of an insufficient number of girls sentenced to community supervision in Kitsap, this created difficulties for using the propensity score matching technique to control for pre-intervention differences between the treatment and the comparison group.

behaviors. The attitudes and behaviors domain includes items such as emotions, optimism, impulsivity, self-control, empathy for victims, sympathy, and respect for others' property, authority, law-abiding behavior, and accepting responsibility for behavior. Broadly speaking, this domain is about emotional stability and cognitive reasoning.

- The program shows promise in reducing school-related risk factors. A positive change in this domain was observed among 43% of program participants. This improvement is smaller than two comparison groups (55% for Kitsap historical, and 47% for Thurston historical groups), but we still consider it meaningful given the high prevalence of school-related problems experienced by program participants at the beginning of the program. The majority were skipping school (66%), were not close to any teachers, school staff, or coaches (71%), had behavioral problems at school (89%), and has a history of school expulsions (79%)
- In mental health, 28% of program participants showed improvement. This progress was larger than three comparison groups (17% for Kitsap historical, 22% for Thurston current and 10% for Thurston historical group). While not large, this positive change between the initial and final assessments is encouraging, given a high prevalence of mental health issues experienced by the girls coming to the program and the juvenile justice system, in general.

Overall, the results suggest that the program's strengths are in skills building and in enhancing attitudes and behaviors related to emotional stability and cognitive reasoning. These outcomes are closely related to the stated program's goals such as strengthening interpersonal skills, increasing goal setting and self-efficacy.

Long-term Program Outcomes

Because long-term impacts of the program usually take some time to be seen (sometimes up to three years after the program), the evaluation could only measure the outcomes that took place during the evaluation period (or between June 15, 2019 and August 31, 2022). The original plan to examine differences in recidivism rate (the number/percentage of youth referred to the courts, measured by court filings, at least once up to 18 months[46] following program completion) between program participants and non-participants was not fully executed due to COVID-19's dramatic impact on program enrollment and time constraints of the pilot.

As practice showed, not every girl found eligible for the program would finish the program. Given a small number of participants, even a small change in denominator can result in shifts in recidivism estimates. That is why in this report, instead of the program completion date, we used the program start date as the start for tracking recidivism. The presence or lack of re-offending behavior was measured by a new court referral based on the offender matter. Court referral is a proxy of the arrest. This does not automatically indicate that a case has been formally processed, nor does it imply the outcome of the case (deferred, diverted, dismissed, or found guilty). All these cases were included in the current analyses.

[46] The 18-month tracking period was selected because it was decided that recidivism beyond 18 months would be less likely to be related to the interventions provided during the period of juvenile probation supervision.

Overall recidivism among 27 girls who participated in the program at any point between June 15, 2019 and August 31, 2022 was lower (19%), compared to a 24% recidivism rate among Kitsap girls (N=38) who were sentenced to community supervision a year prior to the launch of the program. There was only one youth (4%) who was referred to the juvenile court for a new offense after completing the program (this girl returned to the program). Four girls, or 15% of participants, had new referrals while on community supervision with the Kitsap Girls Court. These girls were promptly offered coordinated and appropriate services. One of those girls was able to come off supervision early due to her positive efforts after the new offense occurred.

Evaluation Limitations

It is important to acknowledge the limitations of this evaluation. The first challenge was a small number of participants. The program was expected to serve approximately 25 girls per year (or approximately 75 girls during the 3-year long pilot period), but COVID-19 has had a profound impact on program enrollment. Since program launch, 27 girls participated in the program. The results produced on 27 participants must be interpreted carefully. When the number of observations is small, the analysis can overestimate or underestimate the magnitude of the effect.

The second challenge was related to completeness of administrative data at the time of data extraction. Court administrative records are not always up to date and may be inaccurate for many reasons. For example, for cases when a youth is transferred from a jurisdiction outside of Washington State, records are not always updated quickly and some data, like PACT scores, might be missing. Further, a change in program status may not be updated immediately. It can take a few weeks for the status to be updated. Even if case files are up to date, the information may not make it into the court case management system for some time.

Due to COVID-19, some data elements were not available at all, and some were gathered in a way that limited their generalizability, or could not fully inform questions related to program effectiveness. For example, the original plan to examine differences in recidivism rate (the number/percentage of youth referred to the courts, measured by court filings, at least once up to 18 months following program completion) between program participants and non-participants was not fully executed due to COVID-19's dramatic impact on program enrollment and time constraints of the pilot. In particular, recidivism reported in this evaluation (19%) was measured starting from the entry into a program. Out of 27 participants in the pilot, only one youth (4%) was referred within 18 months after completing the program, and four girls (15%) were referred while on community supervision with/participating in the Kitsap Girls Court.

Further, direct observations of court hearings and program activities were conducted only prior to COVID-19. The move to virtual programming demonstrated the adaptability of the program to COVID-19, but it also presented some new data collection challenges, including difficulties with primary data collection. Obtaining qualitative data from youth was a particular challenge during the pandemic. During the last year of the pilot, several attempts to interview program participants were made. Shortly after securing Institutional Review Board (IRB) approval, active outreach activities were initiated to recruit participants for a focus group. These activities included distributing a flier explaining the purpose of the study, offering an incentive ($25 gift card), and providing a researcher's contact information for inquiries about the study and/or focus group participation. Out of four girls participating in the program at that time, none chose to participate in the focus group.

When an original plan of conducting focus groups with program participants was not feasible, it was substituted by an option of interviewing the youth in a one-on-one format. When no participants responded to the call to interview, a web survey was designed as an alternative to interviewing, but no participants responded to the survey. Researcher notes indicated that several potential participants shared with the CSO that they had "too much going on", suggesting participation was perceived as burdensome.

RECOMMENDATIONS

The following are recommendations to better support and sustain the Kitsap Girls Court Program. These suggestions are based on the interviews with court professionals and service providers conducted during the last year of the pilot.

1. **Strengthen Parent/Caregiver involvement**
   The girls' court model acknowledges that close, positive family relationships help young people stay healthy and avoid risky behavior.[47] Program staff recognized the value of family involvement, and they also acknowledged the barriers to engaging parents in general, and during COVID-19 in particular. We recommend continued collaboration with Kitsap Strong to develop adaptive strategies for parent/caregiver involvement. Hosting periodic activities that include parents/caregivers is an excellent way to get them involved. Also, the CSO could continue engaging parents/caregivers by asking them to review youth's weekly goals and encouraging them to communicate their opinions, concerns, or suggestions to adjust future planning.

2. **Build trust**
   Continue building trust with program participants. The topic of trust was consistently mentioned by stakeholders as a foundation for program success. The research shows a significant relationship between youth trust, behavior, and school outcomes.[48] When asked about ways to establish a trusting relationship, common responses included demonstrating commitment to follow through, taking a personal interest in the well-being of participants, and being consistent and patient.

3. **Monitor performance**
   Performance measures and sources of data can be developed locally by program staff, and assistance and support for this process can be provided by the AOC. Performance monitoring and regular sharing of such information with community members, partners, grant funders, local public health agencies, and other local governmental agencies will allow program staff to have more empirical evidence to validate the original findings and also enhance self-capacity to track their own progress.

4. **Conduct exit interviews**
   We recommend conducting exit interviews with program participants. The exit interview allows the program staff to see the program through the eyes of the participant and get a better idea of the program's effectiveness. The interviews should address the following topics: if the needs of girls are being met, how responsive girls are to the services provided, if the services are effective in helping participants achieve stated goals, and how to improve the overall program approach.

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[47] Yang, F., Tan, K.-A., and Cheng, W. J. Y. (2013). The effects of connectedness on health-promoting and health-compromising behaviors in adolescents: Evidence from a statewide survey. *The Journal of Primary Prevention*, 35(1), 33-46; Ackard, D. M., Neumark-Sztainer, D., Story, M., and Perry, C. (2006). Parent-child connectedness and behavioral and emotional health among adolescents. *American Journal of Preventive Medicine*, 30(1), 59-66.

[48] Romero, L.S. (2015), "Trust, behavior, and high school outcomes", Journal of Educational Administration, Vol. 53 No. 2, pp. 215-236.