




JUVENILE JUSTICE STATISTICS

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Juvenile Residential Facility Census, 2016: Selected Findings

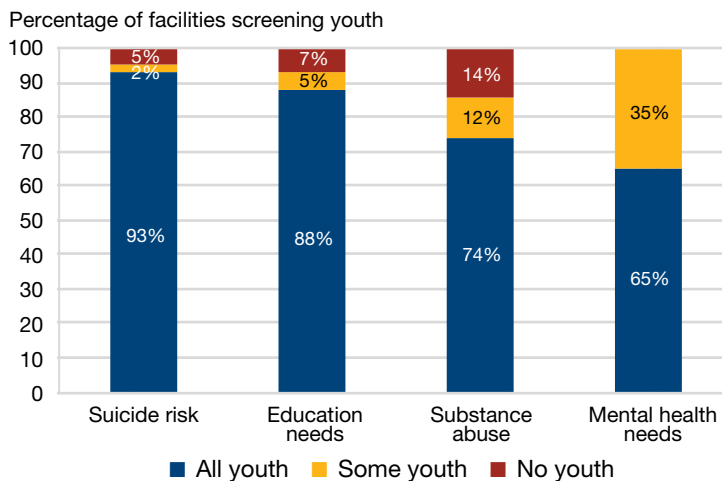
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Highlights

Nationally, 45,567 juvenile offenders were held in 1,772 residential placement facilities on October 26, 2016. Facilities that hold juvenile offenders vary in their operation, type, size, confinement features, screening practices, and services provided. To better understand the characteristics of these facilities,

the Office of Juvenile Justice and Delinquency Prevention sponsors the Juvenile Residential Facility Census (JRFC), a biennial survey of public and private juvenile residential facilities in every state. Findings in this bulletin are based on JRFC data collected for 2016.

Most facilities reported screening youth for service needs in 2016



Notes: The mental health needs percent is based on facilities that reported using an in-house mental health professional to screen youth, not the total number of facilities that responded to questions about mental health screening. For all other service needs, the percentages are based on all reporting facilities.

- More than half of all facilities were publicly operated in 2016; they held 71% of offenders.
- Nearly 6 in 10 facilities (56%) were small (20 or fewer residents), but more than half (57%) of all offenders were held in medium-size facilities (holding 21–100 residents).
- A small proportion (3%) of facilities operated over capacity in 2016; these facilities held 4% of all offenders.
- About 9 in 10 facilities screened all youth for suicide risk and educational needs.
- Six youth died in placement in 2016; one of these was ruled a suicide.

A Message From OJJDP

On October 26, 2016, OJJDP conducted the ninth Juvenile Residential Facility Census, a snapshot of the facilities—both publicly and privately operated—that house youth charged with or adjudicated for law violations.

OJJDP's biennial census collects data on how juvenile facilities operate and the services they provide. The census also provides information on facility ownership, security, capacity and crowding, and injuries and deaths of youth in custody.

Data from the 2016 census indicate that the number of youth in residential placement continues to decline, a trend that has lasted nearly two decades. In 2016, more youth were held in county, city, or municipally operated facilities on the census date than were held in state-operated facilities. Facility crowding affected a relatively small proportion of youth in custody. Most responding facilities routinely evaluated all youth for suicide risk, education needs, substance abuse, and mental health needs.

We hope this bulletin will serve as an important resource to inform and support efforts to ensure that the nation's juvenile residential facilities are safe and that youth in custody receive the necessary treatment and services.

Caren Harp
Administrator

The Juvenile Residential Facility Census provides data on facility operations

Facility census describes 2,345 juvenile facilities

In October 2016, the Office of Juvenile Justice and Delinquency Prevention (OJJDP) administered the ninth Juvenile Residential Facility Census (JRFC). JRFC began in 2000 with data collections occurring every other year. JRFC routinely collects data on how facilities operate and the services they provide. It includes questions on facility ownership and operation, security, capacity and crowding, and injuries and deaths in custody. The census also collects supplementary information each year on specific services, such as mental and physical health, substance abuse, and education.

JRFC does not capture data on adult prisons or jails, nor does it include facilities used exclusively for mental health or substance abuse treatment or for dependent children. Thus, JRFC includes most, but not all, facilities that hold juvenile offenders (i.e., youth who were charged with or adjudicated for law violations). The reporting facilities may also hold adults or youth for nonoffense reasons (e.g., abuse/neglect, mental health/substance abuse problems), but data were included only if the facility held at least one juvenile offender on the census date.

In this bulletin, the term resident is used when discussing facility size or crowding, as these are characteristics related to all persons in the facility. The terms offender and/or youth are used when discussing all other information directly related to offenders who were younger than 21 on the census date.

The 2016 JRFC collected data from 2,345 juvenile facilities. Analyses in this bulletin were based only on data from facilities housing juvenile offenders on the census date (October 26, 2016); 1,772 facilities were included in the analyses. Excluded from the analyses were data from 1 facility in the Virgin Islands, 5 facilities in Puerto Rico, 14 tribal facilities, and 553 facilities that held no juvenile offenders on that date.

The 1,772 facilities housed a total of 45,567 juvenile offenders. This represents the fewest such youth in residential placement since the 1975 Children in Custody Census (the predecessor data collection to the JRFC and its companion collection, the Census of Juveniles in Residential Placement), which reported 48,043 offenders in juvenile facilities on the census date. From 1975 to 2000, the data collections recorded increasingly larger 1-day counts of juvenile offenders in public and private residential placement facilities. From 2000 to 2016, those increases were erased, resulting in the lowest census population recorded since 1975.

Local facilities were more numerous, but state facilities held nearly as many youth

Historically, local facilities (those staffed by county, city, or municipal employees) held fewer juvenile offenders than state facilities, even though they comprised more than half of all public facilities. In recent years, the gap narrowed and, in 2016, local facilities held more youth than state facilities.

	Facilities		Juvenile offenders	
	Number	Percent	Number	Percent
Total	1,772	100%	45,567	100%
Public	978	55	32,301	71
State	365	21	15,095	33
Local	613	35	17,206	38
Private	794	45	13,266	29

Note: Detail may not total 100% because of rounding.

In 2016, JRFC asked facilities if a for-profit agency owned and/or operated them. Of reporting facilities, only a small percentage said that these types of agencies owned (8%) or operated (8%) them. In both cases, these facilities tended to hold 100 or fewer residents and were most likely to classify themselves as residential treatment centers.

On October 26, 2016, 55% of juvenile facilities were publicly operated; they held 71% of juvenile offenders

State	Juvenile facilities			Juvenile offenders			State	Juvenile facilities			Juvenile offenders		
	Total	Public	Private	Total	Public	Private		Total	Public	Private	Total	Public	Private
U.S. total	1,772	978	794	45,567	32,301	13,266	Missouri	56	50	6	874	844	30
Alabama	39	14	25	894	457	437	Montana	15	5	10	139	97	42
Alaska	18	7	11	217	167	50	Nebraska	10	5	5	426	247	179
Arizona	18	14	4	661	514	147	Nevada	18	13	5	529	511	18
Arkansas	31	17	14	673	491	182	New Hampshire	4	–	–	96	–	–
California	150	92	58	6,006	5,225	781	New Jersey	23	21	–	555	553	–
Colorado	31	16	15	1,001	826	175	New Mexico	17	14	3	387	343	44
Connecticut	5	3	–	99	95	–	New York	85	20	65	1,182	457	725
Delaware	8	6	–	180	165	–	North Carolina	28	23	5	473	399	74
District of Columbia	6	–	4	156	–	24	North Dakota	8	3	5	104	62	42
Florida	82	27	55	3,078	1,130	1,948	Ohio	70	59	11	2,105	1,981	124
Georgia	39	27	12	1,584	1,469	115	Oklahoma	35	18	17	563	391	172
Hawaii	3	–	–	37	–	–	Oregon	43	29	14	965	791	174
Idaho	19	13	6	476	395	81	Pennsylvania	106	22	84	2,753	678	2,075
Illinois	33	24	9	1,154	1,048	106	Rhode Island	14	–	13	213	–	123
Indiana	64	31	33	1,446	865	581	South Carolina	22	9	13	657	396	261
Iowa	44	10	34	867	252	615	South Dakota	17	9	8	189	81	108
Kansas	19	12	7	407	349	58	Tennessee	26	17	9	641	459	182
Kentucky	36	27	9	598	432	166	Texas	92	72	20	4,430	3,802	628
Louisiana	30	16	14	783	579	204	Utah	34	18	16	537	333	204
Maine	2	–	–	69	–	–	Vermont	2	–	–	15	–	–
Maryland	29	13	16	603	426	177	Virginia	41	40	–	1,070	1,037	–
Massachusetts	51	22	29	507	219	288	Washington	32	31	–	871	856	–
Michigan	48	27	21	1,676	832	844	West Virginia	42	10	32	674	242	432
Minnesota	44	19	25	756	522	234	Wisconsin	51	23	28	720	512	208
Mississippi	16	16	–	242	242	–	Wyoming	16	4	12	229	128	101

Notes: "State" is the state where the facility is located. Youth sent to out-of-state facilities are counted in the state where the facility is located, not the state where they committed their offense. Detail is not displayed in states with one or two private facilities to preserve the privacy of individual facilities.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

Training schools tend to be state facilities, detention centers tend to be local facilities, and group homes tend to be private facilities

Facility operation	Facility type							
	Total	Detention center	Shelter	Reception/ diagnostic center	Group home	Ranch/ wilderness camp	Training school	Residential treatment center
Number of facilities	1,772	662	131	58	344	30	189	678
Operations profile								
All facilities	100%	100%	100%	100%	100%	100%	100%	100%
Public	55	92	36	72	18	63	80	33
State	21	21	2	55	8	17	56	20
Local	35	72	34	17	10	47	24	14
Private	45	8	64	28	82	37	20	67
Facility profile								
All facilities	100%	37%	7%	3%	19%	2%	11%	38%
Public	100	62	5	4	6	2	15	23
State	100	37	1	9	8	1	29	37
Local	100	77	7	2	5	2	8	15
Private	100	7	11	2	36	1	5	57

- Detention centers, reception/diagnostic centers, ranch/wilderness camps, and training schools were more likely to be public facilities than private facilities.
- Most shelters, group homes, and residential treatment centers were private facilities.
- Detention centers made up the largest proportion of all local facilities and nearly two-thirds of all public facilities.
- Detention centers and residential treatment centers accounted for the largest proportions of all state facilities (37% each); training schools accounted for 29%.
- Residential treatment centers accounted for 57% of all private facilities, and group homes accounted for 36%.

Notes: Counts (and row percentages) may sum to more than the total number of facilities because facilities could select more than one facility type. Detail may not sum to total because of rounding.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

Confinement features and size varied across types of facilities

Facilities varied in their use of confinement features

Overall, 46% of facilities said that, at least some of the time, they locked youth in their sleeping rooms. Among public facilities, 81% of local facilities and 68% of state facilities reported locking youth in sleeping rooms. Few private facilities locked youth in sleeping rooms (8%).

Percentage of facilities locking youth in sleeping rooms

Total	46%
Public	76
State	68
Local	81
Private	8

Note: Percentages are based on facilities that reported confinement information (37 of 1,772 facilities [2%] did not report).

Among facilities that locked youth in sleeping rooms, most did this at night (89%) or when a youth was out of control (76%). Locking doors whenever youth were in their sleeping rooms (58%) and locking youth in their rooms during shift changes (49%) were also fairly common. Fewer facilities reported locking youth in sleeping rooms for a part of each day (25%) or when they were suicidal (21%). Very few facilities reported that they locked youth in sleeping rooms most of each day (2%) or all of each day (less than 1%). Eight percent (8%) had no set schedule for locking youth in sleeping rooms.

Facilities indicated whether they had various types of locked doors or gates to confine youth within the facility (see sidebar, this page). Of all facilities that reported confinement information, 60% said they had one or more confinement features (other

than locked sleeping rooms, with a greater proportion of public facilities using these features than private facilities (85% vs. 29%).

	Percentage of facilities	
	No confinement features	One or more confinement features
Total	40%	60%
Public	15	85
State	16	84
Local	14	86
Private	71	29

Note: Percentages are based on facilities that reported confinement information (37 of 1,772 facilities [2%] did not report).

Among detention centers and training schools that reported confinement information, more than 9 in 10 said they had one or more features (other than locked sleeping rooms).

Facilities reporting one or more confinement features (other than locked sleeping rooms)

Facility type	Number	Percentage
Total facilities	1,046	60%
Detention center	638	97
Shelter	35	27
Reception/ diagnostic center	45	78
Group home	46	14
Ranch/wilderness camp	13	43
Training school	179	95
Residential treatment center	316	48

Note: Detail sums to more than totals because facilities could select more than one facility type.

Among group homes, 1 in 8 facilities said they had locked doors or gates to confine youth. Facility staff also serves to confine youth. For some facilities, the remote location is a feature that also helps to keep youth from leaving.

The Juvenile Residential Facility Census asks facilities about their confinement features

- Are any young persons in this facility locked in their sleeping rooms by staff at any time to confine them?
- Does this facility have any of the following features intended to confine young persons within specific areas?
 - Doors for secure day rooms that are locked by staff to confine young persons within specific areas?
 - Wing, floor, corridor, or other internal security doors that are locked by staff to confine young persons within specific areas?
 - Outside doors that are locked by staff to confine young persons within specific buildings?
 - External gates in fences or walls *without* razor wire that are locked by staff to confine young persons?
 - External gates in fences or walls *with* razor wire that are locked by staff to confine young persons?

Overall, 27% of facilities reported external gates in fences or walls with razor wire. This arrangement was most common among training schools (51%), detention centers (49%), and reception/diagnostic centers (41%).

In general, the use of confinement features increased as facility size increased

In the past, among facilities providing confinement information, the largest facilities (those with more than 200 residents) were most likely to report using a variety of features. Although the use of confinement generally increased as facility size increased, for the first time in 2016 the proportion of facilities holding more than 200 residents using these features was lower than the proportion of facilities holding between 101 and 200 residents. Nearly 90% of facilities holding between 101 and 200 residents reported using one or more confinement features, compared with 63% of facilities holding more than 200 residents.

Although the use of razor wire is a far less common confinement measure, more than half (52%) of facilities holding between 101 and 200 residents said they had locked gates in fences or walls with razor wire.

The number of facilities that reported holding more than 200 residents has declined since 2006

In 2006, 3% of facilities held more than 200 residents, compared with 1% in 2016. Additionally, the proportion of youth held at these facilities has also decreased. In 2006, one-quarter (24%) of youth held in facilities on the census date were in large facilities, compared with 8% of youth held in 2016.

Large facilities were most likely to be state operated

Few (19%) state-operated facilities (68 of 365) held 10 or fewer residents in 2016. In contrast, 43% of private facilities (341 of 794) were that small. In fact, these small private facilities made up the largest proportion of private facilities.

More than half of facilities were small (holding 20 or fewer residents), although more than half of juvenile offenders were held in medium facilities (holding 21–100 residents)

Facility size	Number of facilities	Percentage of facilities	Number of offenders	Percentage of offenders
Total facilities	1,772	100%	45,567	100%
1–10 residents	598	34	3,171	7
11–20 residents	389	22	4,912	11
21–50 residents	495	28	13,788	30
51–100 residents	209	12	12,165	27
101–200 residents	65	4	7,698	17
201+ residents	16	1	3,833	8

- Although the largest facilities—those holding more than 200 residents—accounted for 1% of all facilities, they held 8% of all youth in placement.
- Inversely, although the smallest facilities—those holding 10 or fewer residents—accounted for 34% of all facilities, they held 7% of all youth in residential placement.

Note: Column percentages may not add up to 100% because of rounding.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

Among group homes and shelters, those holding 20 or fewer residents were most common

Facility size	Facility type						
	Detention center	Shelter	Reception/diagnostic center	Group home	Ranch/wilderness camp	Training school	Residential treatment center
Number of facilities	662	131	58	344	30	189	678
Total facilities	100%	100%	100%	100%	100%	100%	100%
1–10 residents	26	59	24	61	17	5	26
11–20 residents	23	21	17	22	23	10	22
21–50 residents	33	15	19	12	37	39	32
51–100 residents	12	5	14	4	23	30	16
101–200 residents	4	2	22	0	0	14	3
201+ residents	1	0	3	0	0	3	1

- 61% of group homes and 59% of shelters held 10 or fewer residents. For other facility types, this proportion was 26% or less.

- 3% each of reception/diagnostic centers and training schools held more than 200 residents. For other facility types, this proportion was 1% or less.

Notes: Facility type counts sum to more than 1,772 facilities because facilities could select more than 1 facility type. Column percentages may not add up to 100% because of rounding.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

Facility size	Facility operation		
	State	Local	Private
Total facilities	365	613	794
1–10 residents	68	189	341
11–20 residents	87	135	167
21–50 residents	117	195	183
51–100 residents	55	72	82
101–200 residents	33	16	16
201+ residents	5	6	5

State-operated facilities made up 21% of all facilities and accounted for 31% of facilities holding more than 200 residents. Private facilities constituted 45% of all facilities and accounted for 57% of facilities holding 10 or fewer residents.

Facility crowding affected a relatively small proportion of youth in custody

One in five youth were in facilities that were at or over their standard bed capacity

Facilities reported both the number of standard beds and the number of makeshift beds they had on the census date.

Occupancy rates provide the broadest assessment of the adequacy of living space. Although occupancy rate standards have not been established, as a facility's occupancy surpasses 100%, operational functioning may be compromised.

Crowding occurs when the number of residents occupying all or part of a facility exceeds some predetermined limit based on square footage, utility use, or even fire codes. Although it is an imperfect measure of crowding, comparing the number of residents to the number of standard beds gives a sense of the crowding problem in a facility. Even without relying on makeshift beds, a facility may be crowded. For example, using standard beds in an infirmary for youth who are not sick or beds in seclusion for youth who have not committed infractions may indicate crowding problems.

Twenty-two percent (22%) of facilities said that the number of residents they held on the 2016 census date put them at or over the capacity of their standard beds or that they relied on some makeshift beds. These facilities held 20% of offenders in 2016 compared with 42% of offenders in 2000. In 2016, 3% of facilities reported being over capacity (having fewer standard beds than they had residents or relying on makeshift beds). These facilities held 4% of offenders. In comparison, 8% of facilities in 2000 reported being over capacity and they held 20% of offenders.

Compared with other types of private facilities, ranch/wilderness camps were more likely to be over their standard bed capacity

Facility type	Percentage of facilities at their standard bed capacity			Percentage of facilities over their standard bed capacity		
	Total	Public	Private	Total	Public	Private
Total	18%	13%	24%	3%	3%	4%
Detention center	13	12	25	3	3	2
Shelter	21	9	29	2	4	0
Reception/diagnostic center	24	24	25	3	2	6
Group home	23	13	26	5	5	5
Ranch/wilderness camp	10	11	9	3	0	9
Training school	21	15	45	2	2	0
Residential treatment center	21	14	24	4	3	4

Notes: A single bed is counted as one standard bed, and a bunk bed is counted as two standard beds. Makeshift beds (e.g., cots, rollout beds, mattresses, and sofas) are not counted as standard beds. Facilities are counted as over capacity if they reported more residents than standard beds or if they reported any occupied makeshift beds. Facilities could select more than one facility type.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

Facilities holding between 101 and 200 residents were the most likely to be crowded

Facility size	Number of facilities	Percentage of facilities under, at, or over their standard bed capacity			Mean number of makeshift beds at facilities over capacity
		<100%	100%	>100%	
Total facilities	1,772	78%	18%	3%	2
1–10 residents	598	76	20	4	2
11–20 residents	389	78	20	2	1
21–50 residents	495	80	16	4	2
51–100 residents	209	79	15	5	2
101–200 residents	65	77	15	8	9
201+ residents	16	94	6	0	0

Notes: A single bed is counted as one standard bed, and a bunk bed is counted as two standard beds. Makeshift beds (e.g., cots, rollout beds, mattresses, and sofas) are not counted as standard beds. Facilities are counted as over capacity if they reported more residents than standard beds or if they reported any occupied makeshift beds. Facilities could select more than one facility type.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

Private facilities were more likely than public facilities to be operating at or above capacity

Among privately operated facilities, 4% exceeded standard bed capacity or had residents occupying makeshift beds on the 2016 census date. For publicly operated facilities, the proportion was 3%. In addition, a larger proportion of private facilities (24%) compared with public facilities (13%) said they were operating at 100% capacity. Of publicly operated facilities, a slightly larger

proportion of state-operated facilities than locally operated facilities exceeded capacity (4% and 2%, respectively).

Facility operation	Percentage of facilities at or over their standard bed capacity		
	≥100	100	>100
Total	22%	18%	3%
Public	16	13	3
State	24	20	4
Local	11	9	2
Private	28	24	4

Note: Detail may not add to totals because of rounding.

Use of makeshift beds varied widely

There were 62 facilities that reported having occupied makeshift beds, averaging 2 such beds per facility. Although some facilities rely on makeshift beds, many others operate well below standard bed capacity. On average, there were 16 unoccupied standard beds per facility. This average masks a wide range: 1 facility with 146 residents had 130 standard beds and 16 residents without standard beds; another facility with 596 standard beds had 137 residents, leaving 459 unoccupied beds.

Nationwide, 383 juvenile facilities (22%) were at or over standard capacity or relied on makeshift beds

State	Total facilities	Number of facilities under, at, or over capacity			Percentage of offenders in facilities at or over capacity		State	Total facilities	Number of facilities under, at, or over capacity			Percentage of offenders in facilities at or over capacity	
		<100%	100%	>100%	100%	>100%			<100%	100%	>100%	100%	>100%
U.S. total	1,772	1,389	321	62	15%	4%	Missouri	56	42	12	2	26%	8%
Alabama	39	32	5	2	11	2	Montana	15	13	2	0	6	0
Alaska	18	12	5	1	49	5	Nebraska	10	10	0	0	0	0
Arizona	18	14	4	0	15	0	Nevada	18	10	8	0	53	0
Arkansas	31	18	13	0	39	0	New Hampshire	4	3	1	0	17	0
California	150	126	24	0	7	0	New Jersey	23	21	2	0	4	0
Colorado	31	27	2	2	1	18	New Mexico	17	16	0	1	0	8
Connecticut	5	5	0	0	0	0	New York	85	68	17	0	22	0
Delaware	8	7	0	1	0	39	North Carolina	28	23	1	4	6	5
District of Columbia	6	3	2	1	9	53	North Dakota	8	8	0	0	0	0
Florida	82	49	26	7	32	11	Ohio	70	59	7	4	17	13
Georgia	39	24	12	3	33	12	Oklahoma	35	17	15	3	29	9
Hawaii	3	3	0	0	0	0	Oregon	43	35	6	2	8	9
Idaho	19	18	1	0	27	0	Pennsylvania	106	88	15	3	20	1
Illinois	33	29	3	1	4	2	Rhode Island	14	7	5	2	15	46
Indiana	64	53	8	3	9	3	South Carolina	22	19	2	1	7	1
Iowa	44	40	4	0	4	0	South Dakota	17	15	2	0	5	0
Kansas	19	17	2	0	3	0	Tennessee	26	20	6	0	19	0
Kentucky	36	30	3	3	5	4	Texas	92	83	6	3	6	2
Louisiana	30	23	6	1	8	2	Utah	34	14	20	0	57	0
Maine	2	2	0	0	0	0	Vermont	2	1	1	0	40	0
Maryland	29	23	5	1	3	1	Virginia	41	36	5	0	10	0
Massachusetts	51	39	12	0	35	0	Washington	32	26	5	1	37	3
Michigan	48	44	4	0	4	0	West Virginia	43	19	20	3	29	16
Minnesota	44	33	10	1	5	1	Wisconsin	51	34	11	6	34	6
Mississippi	16	15	1	0	6	0	Wyoming	16	16	0	0	0	0

Notes: A single bed is counted as one standard bed, and a bunk bed is counted as two standard beds. Makeshift beds (e.g., cots, rollout beds, mattresses, and sofas) are not counted as standard beds. Facilities are counted as over capacity if they reported more residents than standard beds or if they reported any occupied makeshift beds. Facilities could select more than one facility type. "State" is the state where the facility is located. Youth sent to out-of-state facilities are counted in the state where the facility is located, not the state where they committed their offense.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

Most youth were evaluated for educational needs and attended school while held in facilities

Facilities that screened all youth for educational needs held 85% of the youth in custody

As part of the information collected on educational services, the JRFC questionnaire asked facilities about their procedures regarding educational screening.

In 2016, 88% of facilities that reported educational screening information said that they evaluated all youth for grade level and educational needs. An additional 5% evaluated some youth. Only 7% did not evaluate any youth for educational needs.

Of the 73 facilities in 2016 that screened some but not all youth, 59% evaluated youth whom staff identified as needing an assessment, 52% evaluated youth with known educational problems, 54% evaluated youth for whom no educational record was available, and 22% evaluated youth who came directly from home rather than from another facility. In addition, 39% reported evaluating youth based on some “other” reason.

In 2016, those facilities that screened all youth held 85% of the juvenile offenders in custody. An additional 3% of such youth in 2016 were in facilities that screened some youth.

Most facilities used previous academic records to evaluate educational needs

The vast majority of facilities (92%) that screened some or all youth for grade level and educational needs used previous academic records. Some facilities also administered written tests (63%) or conducted an education-related interview with an education specialist (60%), intake counselor (38%), or guidance counselor (28%).

Most facilities reported that youth in their facility attended school

Eighty-eight percent (88%) of facilities reported that at least some youth in their facility attended school either inside or outside the facility. Facilities reporting that

all youth attended school (69% of facilities) accounted for 69% of the juvenile offender population in residential placement. Reception/diagnostic centers were the least likely to report that all youth attended school (43%) and the most likely to report that no youth attended school (22%).

The smallest facilities were the least likely to evaluate all youth for grade level

Education screening	Facility size based on residential population						
	Total	1–10	11–20	21–50	51–100	101–200	201+
Total facilities	1,772	598	389	495	209	65	16
Facilities reporting	1,565	497	364	448	181	60	15
All reporting facilities	100%	100%	100%	100%	100%	100%	100%
All youth screened	88	77	91	94	96	92	93
Some youth screened	5	8	5	3	1	5	0
No youth screened	7	15	4	4	3	3	7

■ Facilities holding 51–100 residents were the most likely to evaluate all youth for grade level in 2016.

Notes: Reporting total excludes five facilities that did not indicate which youth were screened. Column percentages may not add up to 100% because of rounding.

Source: Authors’ analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

Most facilities evaluated youth for grade level between 24 hours and 7 days after arrival

When youth are evaluated for educational needs	Number of juvenile facilities			As a percentage of facilities that evaluated youth for grade level		
	All facilities	All youth evaluated	Some youth evaluated	Facilities that evaluated	All youth evaluated	Some youth evaluated
Total reporting facilities	1,455	1,377	73	100%	95%	5%
Less than 24 hours	297	286	9	20	20	1
24 hours to 7 days	1,129	1,090	36	78	75	2
7 or more days	107	90	17	7	6	1
Other	68	45	23	5	3	2
Facilities not evaluating (or not reporting)	317	–	–	–	–	–

Note: Reporting facilities sum to more than 1,455 because they could select more than one time period.

Source: Authors’ analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

Facilities with 11–20 and 21–50 residents were most likely to report that all youth attended school (73% each), while facilities with 101–200 residents were least likely (58%) to have all youth attend school. Facilities reporting that no youth attended school (12%) accounted for 9% of all juvenile offenders in residential placement.

Facilities offered a variety of educational services

Facilities that provided both middle and high school-level education housed 90% of all juvenile offenders. Eighty-seven percent (87%) of all facilities provided high school-level education, and 80% provided middle school-level education. Most facilities also reported offering special education services (76%) and GED preparation (67%). A much smaller percentage of facilities provided vocational or technical education (36%) and post-high school education (33%).

In 2016, facilities were asked if they communicated information regarding the education status, services, and/or needs to the young person's new placement or residence; 82% of facilities said that they did. Most of these (88%) said that they communicated education status information for all youth departing the facility.

Group homes and small facilities were the least likely to report that youth in their facility attended school

Facility type	Percentage of facilities with youth attending school			
	Total	All youth	Some youth	No youth
Total facilities	100%	69%	19%	12%
Detention center	100	75	17	8
Shelter	100	70	24	5
Reception/diagnostic center	100	43	34	22
Group home	100	58	26	17
Ranch/wilderness camp	100	63	27	10
Training school	100	66	28	6
Residential treatment center	100	72	15	13
Facility size				
1–10 residents	100%	64%	19%	17%
11–20 residents	100	73	21	6
21–50 residents	100	73	17	11
51–100 residents	100	71	16	13
101–200 residents	100	58	34	8
201+ residents	100	69	25	6

Note: Row percentages may not add up to 100% because of rounding.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

Most facilities provided middle and high school-level education

Education level	Facility type							
	All facilities	Detention center	Shelter	Reception/diagnostic center	Group home	Ranch/wilderness camp	Training school	Residential treatment center
Elementary level	42%	61%	56%	28%	23%	13%	32%	34%
Middle school	80	88	92	67	66	67	84	79
High school	87	91	93	76	82	90	94	86
Special education	76	81	74	66	66	80	92	79
GED preparation	67	64	69	62	65	77	85	70
GED testing	46	36	44	47	56	67	74	51
Post-high school	33	20	24	28	41	53	66	41
Vocational/technical	36	19	24	40	45	63	68	47
Life skills training	56	50	50	48	61	70	70	63

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

Most facilities reported screening youth for substance abuse problems

Facilities that screened all youth held 70% of the juvenile offenders in custody

In 2016, 74% of facilities that reported substance abuse evaluation information said that they evaluated all youth, 12% said that they evaluated some youth, and 14% did not evaluate any youth.

Of the 190 facilities that evaluated some but not all youth, 88% evaluated youth that the court or a probation officer identified as potentially having substance abuse problems, 74% evaluated youth that facility staff identified as potentially having substance abuse problems, and 65% evaluated youth charged with or adjudicated for a drug- or alcohol-related offense. Those facilities that screened all youth held 70% of the juvenile offenders in custody. An additional 12% of offenders were in facilities that screened some youth.

The most common form of evaluation was a series of staff-administered questions

The majority of facilities (75%) that evaluated some or all youth for substance abuse problems had staff administer a series of questions that ask about substance use and abuse, 60% visually observed youth to evaluate them, 56% used a self-report checklist inventory that asks about substance use and abuse to evaluate youth, and 41% said they used a standardized self-report instrument, such as the Substance Abuse Subtle Screening Inventory.

Drug testing was a routine procedure in most facilities in 2016

As part of the information collected on substance abuse services, JRFC asked facilities if they required any youth to undergo drug testing after they arrived at the facility. The majority of facilities (69%) reported that they required at least some

youth to undergo drug testing. Of facilities that reported testing all or some youth, the most common reason for testing was because of a request from the court or the probation officer (66% for facilities that tested all youth, 68% for facilities that tested youth suspected of recent drug or alcohol use, and 65% for facilities that tested youth with substance abuse problems).

Facilities holding 11–20 residents were the least likely to evaluate all youth for substance abuse problems

Substance abuse screening	Facility size based on residential population						
	Total	1–10	11–20	21–50	51–100	101–200	201+
Total facilities	1,772	598	389	495	209	65	16
Facilities reporting	1,569	499	365	449	181	60	15
All reporting facilities	100%	100%	100%	100%	100%	100%	100%
All youth screened	74	73	71	76	81	77	73
Some youth screened	12	10	12	13	13	17	13
No youth screened	14	17	17	11	6	7	13

Note: Column percentages may not add up to 100% because of rounding.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

More than half of reporting facilities evaluated youth for substance abuse within their first day at the facility

When youth are evaluated for substance abuse	Number of juvenile facilities			As a percentage of facilities that evaluated youth for substance abuse		
	All facilities	All youth evaluated	Some youth evaluated	Facilities that evaluated	All youth evaluated	Some youth evaluated
Total reporting facilities	1,355	1,165	190	100%	86%	14%
Less than 24 hours	860	803	57	63	59	4
24 hours to 7 days	530	445	85	39	33	6
7 or more days	124	73	51	9	5	4
Other	89	41	48	7	3	4
Facilities not evaluating (or not reporting)	417	–	–	–	–	–

Note: Reporting facilities sum to more than 1,355 because they were able to select more than one time period.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

Circumstances of testing	Percentage of facilities
All youth	
After initial arrival	32%
At each reentry	25
Randomly	33
When drug use is suspected or drug is present	54
At the request of the court or probation officer	66
Youth suspected of recent drug/alcohol use	
After initial arrival	36%
At each reentry	23
Randomly	35
When drug use is suspected or drug is present	58
At the request of the court or probation officer	68
Youth with substance abuse problems	
After initial arrival	28%
At each reentry	21
Randomly	37
When drug use is suspected or drug is present	54
At the request of the court or probation officer	65

In 2016, JRFC asked facilities if they communicated information regarding the substance abuse status, services, and/or needs to the young person's new placement or residence; 57% of facilities said that they did. Of these facilities, many (73%) said that they communicated substance abuse status information for all youth departing the facility.

Substance abuse education was the most common service provided at all reporting facilities

Substance abuse screening	Facility size based on residential population						
	Total	1–10	11–20	21–50	51–100	101–200	201+
Total facilities	1,772	598	389	495	209	65	16
Facilities reporting	1,245	380	280	362	156	54	13
Substance abuse education	97%	96%	95%	98%	99%	100%	100%
Case manager to oversee treatment	52	52	43	52	61	61	69
Treatment plan for substance abuse	75	74	68	78	78	80	100
Special living units	8	2	4	7	16	39	38
None of above services provided	1	1	1	1	0	0	0

■ Of the facilities holding more than 100 residents that reported providing substance abuse services, all provided substance abuse education and were more likely than smaller facilities to have special living units in which all young persons have substance abuse offenses and/or problems.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

The majority of facilities that provided substance abuse counseling or therapy were most likely to provide services on an individual basis

Service provided	Facility type							
	Total	Detention center	Shelter	Reception/diagnostic center	Group home	Ranch/wilderness camp	Training school	Residential treatment center
Total facilities	1,772	662	131	58	344	30	189	678
Facilities reporting counseling	860	249	54	23	179	21	112	384
Individual	92%	91%	96%	83%	93%	81%	93%	90%
Group	82	78	74	83	77	86	90	87
Family	46	33	54	30	49	33	52	54
Facilities reporting therapy	1,095	313	76	33	236	22	167	501
Individual	96%	94%	97%	97%	98%	82%	98%	95%
Group	83	74	79	97	83	82	95	90
Family	50	38	59	45	49	41	62	58

■ In 2016, shelters were most likely to provide individual counseling, and group homes and training schools were most likely to provide individual therapy.

■ Training schools were the most likely to provide group counseling, and 97% of reception/diagnostic centers reported providing group therapy.

■ Half of all facilities provided family therapy, and almost half provided family counseling.

Note: Counts (and row percentages) may sum to more than the total number of facilities because facilities could select more than one facility type.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

Most youth were evaluated for mental health needs while held in facilities

In nearly two-thirds of facilities, in-house mental health professionals evaluated all youth held

Facilities provided information about their procedures for evaluating youth's mental health needs. Among facilities that responded to mental health evaluation questions in 2016, 65% reported they evaluated all youth for mental health needs using an in-house mental health professional. These facilities held 57% of offenders on the census date. Facilities that reported using an in-house mental health professional to evaluate some youth (35%), held 28% of youth.

In 2016, a greater proportion of privately operated than publicly operated facilities said that in-house mental health professionals evaluated all youth (83% vs. 54% of facilities reporting mental health evaluation information). However, in a greater proportion of public facilities than private facilities (46% vs. 17%), in-house mental health professionals evaluated some youth.

Evaluation by in-house mental health professional	Facility type	
	Public	Private
Total reporting facilities	774	511
All reporting facilities	100%	100%
All youth screened	54	83
Some youth screened	46	17

Facilities also indicated whether treatment was provided onsite. Facilities that said they provided mental health treatment inside the facility were likely to have had all youth evaluated by an in-house mental health professional. Facilities that did not provide onsite mental health treatment were more likely to have had some youth evaluated by an in-house mental health professional.

Evaluation by in-house mental health professional	Onsite mental health treatment?	
	Yes	No
Total reporting facilities	1,158	127
All reporting facilities	100%	100%
All youth screened	70	21
Some youth screened	30	79

In 2016, JRFC asked facilities if they communicated information regarding the mental health status, services, and/or needs to the young person's new placement or residence; 80% of facilities said that they did. Most of these (74%) said that they communicated mental health status information for all youth departing the facility.

The largest facilities were most likely to have in-house mental health professionals evaluate all youth for mental health needs

In-house mental health evaluation	Facility size based on residential population						
	Total	1-10	11-20	21-50	51-100	101-200	201+
Total facilities	1,772	598	389	495	209	65	16
Facilities reporting	1,285	332	298	405	176	60	14
All reporting facilities	100%	100%	100%	100%	100%	100%	100%
All youth evaluated	65	65	65	64	66	73	86
Some youth evaluated	35	35	35	36	34	27	14

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

Group homes and residential treatment centers were more likely than other types of facilities to have in-house mental health professionals evaluate all youth for mental health needs

In-house mental health evaluation	Facility type						
	Detention center	Shelter	Reception/diagnostic center	Group home	Ranch/wilderness camp	Training school	Residential treatment center
Total facilities	662	131	58	344	30	189	678
Facilities reporting	525	84	42	165	20	173	545
All reporting facilities	100%	100%	100%	100%	100%	100%	100%
All youth evaluated	43	48	71	79	70	77	79
Some youth evaluated	57	52	29	21	30	23	21

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

The most common approach to in-house mental health evaluation was to screen all youth by the end of their first day or first week at the facility

When youth are evaluated for mental health needs	Number of juvenile facilities			As a percentage of facilities that evaluated youth in-house for mental health needs		
	All facilities	All youth evaluated	Some youth evaluated	Facilities that evaluated	All youth evaluated	Some youth evaluated
	Total reporting facilities	1,281	840	441	100%	66%
Less than 24 hours	555	432	123	43	34	10
24 hours to 7 days	503	357	146	39	28	11
7 or more days	35	55	4	20	3	2
Other	168	16	152	13	1	12

■ In 62% of facilities that reported using an in-house mental health professional to perform mental health evaluations, they evaluated all youth for mental health needs by the end of their first week in custody.

Notes: Percentage detail may not add up to total because of rounding. Four facilities that reported youth were evaluated did not report when they were evaluated.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

Of facilities that reported using in-house mental health professionals to conduct mental health evaluations, 37% of juvenile offenders were in facilities that evaluated all youth on the day they arrived at the facility

When youth are evaluated for mental health needs	Number of offenders			As a percentage of offenders in facilities that provided in-house evaluation for mental health needs		
	All facilities	All youth evaluated	Some youth evaluated	Facilities that evaluated	All youth evaluated	Some youth evaluated
	Total offenders residing in reporting facilities	38,242	25,718	12,524	100%	67%
Less than 24 hours	18,085	14,022	4,063	47	37	11
24 hours to 7 days	14,199	9,665	4,534	37	25	12
7 or more days	1,267	920	347	3	2	1
Other	4,691	1,111	3,580	12	3	9

■ Facilities reporting that they evaluated all youth by the end of their first week held 62% of juvenile offenders who resided in facilities that reported using in-house mental health evaluation procedures.

Note: Percentage detail may not add up to total because of rounding.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

Most offenders were held in facilities that evaluate all youth for suicide risk on their first day

Facilities that screened all youth for suicide risk held 89% of the youth in custody

As part of the information collected on mental health services, the JRFC questionnaire asks facilities about their procedures regarding screening youth for suicide risk.

In 2016, 93% of facilities that reported information on suicide screening said that they evaluated all youth for suicide risk. An additional 2% said that they evaluated some youth. Some facilities (5%) said that they did not evaluate any youth for suicide risk.

In 2016, a larger proportion of public than private facilities said that they evaluated all youth for suicide risk (96% vs. 89%).

In 2016, among facilities that reported suicide screening information, those that screened all youth for suicide risk held 97% of juvenile offenders who were in residential placement—up from 81% in 2002. An additional 1% of such youth in 2016 were in facilities that screened some youth.

Suicide screening	2002	2016
Total offenders	102,235	45,567
Offenders in reporting facilities	99,972	41,506
Total	100%	100%
All youth screened	81	97
Some youth screened	12	1
No youth screened	7	2

Note: Detail may not add to totals because of rounding.

Some facilities used trained counselors or professional mental health staff to conduct suicide screening

More than half (53%) of facilities that screened some or all youth for suicide risk reported that mental health professionals with at least a master's degree in psychology

or social work conducted the screenings. Approximately one-third (31%) used neither mental health professionals nor counselors whom a mental health professional had trained to conduct suicide screenings.

Facilities reported on the screening methods used to determine suicide risk. Facilities could choose more than one method. Of facilities that conducted suicide risk screening, a majority (76%) reported that they incorporated one or more questions about suicide in the medical history or intake process to screen youth, 38% used a form their facility designed, and 25% used a form or questions that a county or state juvenile justice system designed to assess suicide risk. Nearly half of facilities (47%) reported using the Massachusetts Youth Screening Instrument (MAYSI)—39% reported using the MAYSI full form, and 8% used the MAYSI suicide/depression module. Very few facilities (less than 1%) used the Voice Diagnostic Interview Schedule for Children.

Of facilities that reported screening youth for suicide risk, 88% reassessed youth at some point during their stay. Most facilities (86%) reported rescreening on a case-by-case basis or as necessary. An additional 39% of facilities also reported that rescreening occurred systematically and was based on a

variety of factors (e.g., length of stay, facility events, or negative life events). Less than 1% of facilities did not reassess youth to determine suicide risk.

All facilities used some type of preventive measure once they determined a youth was at risk for suicide

Facilities that reported suicide screening information were asked a series of questions related to preventive measures taken for youth determined to be at risk for suicide. Of these facilities, 63% reported placing at-risk youth in sleeping or observation rooms that are locked or under staff security. Aside from using sleeping or observation rooms, 87% of facilities reported using line-of-sight supervision, 86% reported removing personal items that could be used to attempt suicide, and 75% reported using one-on-one or arm's-length supervision. Nearly half of facilities (48%) reported using special clothing to prevent suicide attempts, and 28% reported removing the youth from the general population. Twenty-two percent (22%) of facilities used restraints to prevent suicide attempts, and 19% of facilities used special clothing to identify youth at risk for suicide.

Suicide screening was common across facilities of all sizes

Suicide screening	Facility size based on residential population						
	Total	1–10	11–20	21–50	51–100	101–200	201+
Total facilities	1,772	598	389	495	209	65	16
Facilities reporting	1,568	498	365	448	182	60	15
All reporting facilities	100%	100%	100%	100%	100%	100%	100%
All youth screened	93	86	95	96	99	97	93
Some youth screened	2	3	1	1	1	2	7
No youth screened	5	10	4	3	0	2	0

Note: Column percentages may not add up to 100% because of rounding.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

Ranch/wilderness camps and group homes were the least likely to screen youth for suicide risk

Suicide screening	Facility type						
	Detention center	Shelter	Reception/diagnostic center	Group home	Ranch/wilderness camp	Training school	Residential treatment center
Total facilities	662	131	58	344	30	189	678
Facilities reporting	613	124	46	289	28	178	590
All reporting facilities	100%	100%	100%	100%	100%	100%	100%
All youth screened	98	90	89	82	71	97	94
Some youth screened	0	3	2	4	4	1	2
No youth screened	1	7	9	15	25	3	3

Note: Column percentages may not add up to 100% because of rounding.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

In 2016, the majority (94%) of juvenile offenders in facilities that screened for suicide risk were in facilities that conducted suicide screenings on all youth on the day they arrived

Suicide screening	When suicide risk screening occurs					
	Total	Less than 24 hours	24 hours to 7 days	7 days or more	Other	Never or not reported
Number of facilities that screened						
Total	1,487	1,374	94	3	16	285
All youth screened	1,460	1,362	86	3	9	–
Some youth screened	27	12	8	0	7	–
Percentage of facilities that screened						
Total	100%	92%	6%	0%	1%	–
All youth screened	98	92	6	0	1	–
Some youth screened	2	1	1	0	0	–
Number of offenders						
In facilities that screened	40,813	38,828	1,638	125	222	4,754
In facilities that screened all youth	40,353	38,517	1,589	125	122	–
In facilities that screened some youth	460	311	49	0	100	–
Percentage of offenders						
In facilities that screened	100%	95%	4%	0%	1%	–
In facilities that screened all youth	99	94	4	0	0	–
In facilities that screened some youth	1	1	0	0	0	–

■ Nearly all facilities (98%) that reported screening for suicide risk said they screened all youth by the end of the first week of their stay at the facility. A large portion (92%) said they screened all youth on their first day at the facility; these facilities that screened all youth accounted for 94% of juvenile offenders held in facilities that conducted suicide screenings.

■ Very few facilities that reported screening for suicide risk reported that they conducted the screenings at some point other than within the first week of a youth's stay (1%). Facilities that conducted screenings within other time limits gave varying responses. For example, some facilities reported that screenings occurred as needed or as deemed necessary. Some reported that screenings were court ordered. A small number of facilities indicated that screenings occurred before the youth was admitted.

Note: Percentage detail may not add up to total because of rounding.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

JRFC asks facilities about certain activities that may have occurred in the month before the census date

In addition to information gathered on the census date, JRFC collected data on the following questions for the 30-day period of September 2016:

- Were there any unauthorized departures of any young persons who were assigned beds at this facility?
- Were any young persons assigned beds at this facility transported to a hospital emergency room by facility staff, transportation staff, or by an ambulance?
- Were any of the young persons assigned beds here restrained by facility staff with a mechanical restraint?

- Were any of the young persons assigned beds here locked for more than 4 hours alone in an isolation, seclusion, or sleeping room to regain control of their unruly behavior?

Sports-related injuries were the most common reason for emergency room (ER) visits in the previous month

Reason for ER visit	Percentage of facilities
Total	34%
Injury	
Sports-related	41
Work/chore-related	3
Interpersonal conflict (between residents)	28
Interpersonal conflict (by nonresident)	5
Illness	34
Pregnancy	
Complications	4
Labor and delivery	1
Suicide attempt	11
Nonemergency	
No other health professional available	13
No doctor's appointment could be obtained	12
Other	22

Note: Percentages are based on facilities that reported emergency room information (162 of 1,772 facilities [9%] did not report).

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

One-fifth of facilities (19%) reported unauthorized departures in the month before the census date

Facility type	Number of facilities		Percentage of reporting facilities with unauthorized departures
	Total	Reporting	
Total facilities	1,772	1,567	19%
Detention center	662	611	4
Shelter	131	124	47
Reception/diagnostic center	58	46	17
Group home	344	289	29
Ranch/wilderness camp	30	28	21
Training school	189	178	7
Residential treatment center	678	591	26

- Shelters and group homes were most likely to report one or more unauthorized departures.

Note: Detail may sum to more than the totals because facilities could select more than one facility type.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

Nearly equal proportions of facilities reported using mechanical restraints and locking youth in some type of isolation; use of these practices differed by facility type

Facility type	Percentage of reporting facilities	
	Used mechanical restraints	Locked youth in room for 4 or more hours
Total facilities	24%	22%
Detention center	44	44
Shelter	4	4
Reception/diagnostic center	43	33
Group home	1	0
Ranch/wilderness camp	18	7
Training school	52	40
Residential treatment center	14	9

- Detention centers and reception/diagnostic centers were the most likely type of facility to use mechanical restraints (i.e., handcuffs, leg cuffs, waist bands, leather straps, restraining chairs, strait jackets, or other mechanical devices) in the previous month. Detention centers and training schools were the most likely to lock a youth alone in some type of seclusion for 4 or more hours to regain control of their unruly behavior.
- Group homes were the facility type least likely to use either of these measures.

Note: Percentages are based on 1,568 facilities that reported mechanical restraints information and 1,569 that reported locked isolation information, out of a total of 1,772 facilities.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

Facilities reported six deaths of youth in placement over 12 months—one was a suicide

Youth in residential placement rarely died in custody

Facilities holding juvenile offenders reported that six youth died while in the legal custody of the facility between October 1, 2015, and September 30, 2016. One facility reported two deaths.

Routine collection of national data on deaths of youth in residential placement began with the 1988–1989 Children in Custody (CIC) Census of Public and Private Juvenile Detention, Correctional, and Shelter Facilities. Accidents or suicides have usually been the leading cause of death. Over the years 1988–1994 (CIC data reporting years), an average of 46 deaths were reported nationally per year, including an annual average of 18 suicides. Over the years 2000–2016 (JRFC data reporting years), those averages dropped to 17 deaths overall and 7 suicides. In 2016, the number of suicides that occurred at residential facilities (one) was the lowest since OJJDP first started collecting data from JRFC in 2000.

Residential treatment centers reported two of the six deaths in 2016—one accidental death and one suicide. Detention centers also accounted for two deaths as the result of an illness and an accident. Group homes accounted for one of the six deaths, an accident, and ranch/wilderness camps accounted for one death as a result of an illness/natural cause.

There is no pattern in the timing of deaths in 2016

In 2016, the timing of death varied between 1 and 244 days after admission. One death as a result of an illness/natural cause occurred within 24 hours after admission; another occurred within 40 days.

During the 12 months prior to the census, accidental deaths were the most commonly reported cause of death in residential placement

Cause of death	Total	Inside the facility			Outside the facility		
		All	Public	Private	All	Public	Private
Total	6	1	0	1	5	2	3
Accident	3	0	0	0	3	1	2
Illness/natural	2	1	0	1	1	1	0
Suicide	1	0	0	0	1	0	1

■ In 2016, four deaths occurred at private facilities and two at public facilities.

Notes: Data are reported deaths of youth in custody from October 1, 2015, through September 30, 2016. None of the deaths from illness were AIDS related.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

In 2016, the death rate was higher for private facilities than for public facilities

Cause of death	Deaths per 10,000 youth held on the census date, October 26, 2016		
	Total	Public facility	Private facility
Total	1.3	0.6	3.0
Accident	0.7	0.3	1.5
Illness/natural	0.4	0.3	0.8
Suicide	0.2	0.0	0.8

Type of facility	Deaths per 10,000 youth held on the census date, October 26, 2016		
	Total	Public facility	Private facility
Detention center	1.0	1.0	0.0
Ranch/wilderness camp	11.0	0.0	43.1
Group home	3.1	0.0	3.8
Residential treatment center	1.2	0.0	2.0

■ The death rate in 2016 (1.3) was lower than that in 2000 (2.8). Of the 30 reported deaths of youth in residential placement in 2000, accidents were the most commonly reported cause. The same was true in 2016.

Notes: Data are reported deaths of youth in custody from October 1, 2015, through September 30, 2016. None of the deaths from illness were AIDS related. One death was reported in a privately operated ranch/wilderness camp, but the relatively small size of the population of youth held in such facilities in 2016 (approximately 230 youth) results in a high death rate.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

One accidental death occurred 4 days after admission, one occurred 4 months after admission, and one occurred 8 months after

admission. The remaining death, a suicide, occurred approximately 8 months (244 days) after admission.

Of the total deaths in residential placement (six), five involved males and one involved a female

Race/ethnicity	Cause of death							
	Total		Accident		Illness/natural		Suicide	
	Male	Female	Male	Female	Male	Female	Male	Female
Total	5	1	2	1	2	0	1	0
White non-Hispanic	1	0	0	0	0	0	1	0
Black non-Hispanic	3	0	1	0	2	0	0	0
American Indian/Alaska Native	0	0	0	0	0	0	0	0
Asian/Pacific Islander	0	0	0	0	0	0	0	0
Hispanic	1	1	1	1	0	0	0	0
Other race/ethnicity	0	0	0	0	0	0	0	0

Note: Data are reported deaths of youth in custody from October 1, 2015, through September 30, 2016.

Source: Authors' analysis of *Juvenile Residential Facility Census 2016* [machine-readable data file].

The Juvenile Residential Facility Census asks facilities about deaths of young persons at locations inside or outside the facility

During the year between October 1, 2015, and September 30, 2016, did any young persons die while assigned to a bed at this facility at a location either inside or outside of this facility?

If yes, how many young persons died while assigned beds at this facility during the year between October 1, 2015, and September 30, 2016?

What was the cause of death?

- Illness/natural causes (excluding AIDS)
- Injury suffered prior to placement here
- AIDS
- Suicide
- Homicide by another resident
- Homicide by nonresident(s)
- Accidental death
- Other (specify)

What was the location of death, age, sex, race, date of admission to the facility, and date of death for each young person who died while assigned a bed at this facility?

The Juvenile Residential Facility Census includes data that tribal facilities submitted

OJJDP works with the Bureau of Indian Affairs to ensure a greater representation of tribal facilities in the CJRP and JRFC data collections. As a result, the 2016 JRFC collected data from 14 tribal facilities. The tribal facilities were in Arizona, Colorado, Michigan, Mississippi, Montana, New Mexico, Oklahoma, and South Dakota and held 113 youth charged with or adjudicated for an offense (down from 133 in 2014, when 13 facilities reported).

Tribal facilities were asked what agency owned and/or operated their facilities. The tribe owned and operated 10 of the 14 facilities. The remaining four facilities

were owned and operated by the federal government.

Thirteen tribal facilities identified themselves as detention centers and one as a training school. Tribal facilities were small, most holding 20 or fewer residents; 74% of juvenile offenders were held at facilities that held between 11 and 20 residents. On the census day, almost all facilities (12) were operating at less than their standard bed capacity, and the remaining 2 facilities were operating at capacity. Standard bed capacities ranged from 1 to 198; only 2 facilities had more than 100 standard beds.

Twelve of the 14 tribal facilities reported locking youth in their sleeping rooms. Among tribal facilities that locked youth in their rooms, 11 did so when the youth was out of control. Nine facilities locked youth in their room at night, eight facilities locked youth in rooms during shift changes, and six locked youth in their rooms whenever the youth was in their room. Four facilities locked youth in their rooms when the youth was suicidal and four facilities locked youth in their rooms for part of each day. One facility stated there was no set schedule for locking youth in rooms.

Other OJJDP data collection efforts describe youth in residential placement

JRFC is one component in a multitiered effort to describe the youth placed in residential facilities and the facilities themselves. Other components include:

- National Juvenile Court Data Archive: Collects information on sanctions that juvenile courts impose.
- Census of Juveniles in Residential Placement: Collects information on the demographics and legal attributes of each youth in a juvenile facility on the census date.
- Survey of Youth in Residential Placement: Collected a broad range of self-reported information from interviews in 2003 with individual youth in residential placement.

Resources

OJJDP's online Statistical Briefing Book (SBB) offers access to a wealth of information about youth crime and victimization and about youth involved in the juvenile justice system. Visit the Juveniles in Corrections section of the SBB at ojjdp.gov/ojstatbb/corrections/faqs.asp for the latest information about youth in corrections. The Juvenile Residential Facility Census Databook is a data analysis tool that gives users quick access to national and state data on the characteristics of residential placement facilities, including detailed information about facility operation, classification, size, and capacity.

Data sources

Office of Juvenile Justice and Delinquency Prevention. Variable. *Juvenile Residential Facility Census* for the years 2000, 2002, 2004, 2006, 2008, 2010, 2012, 2014, and 2016 [machine-readable data files]. Washington, DC: U.S. Census Bureau (producer).

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