



# *2022* Annual Impact Report



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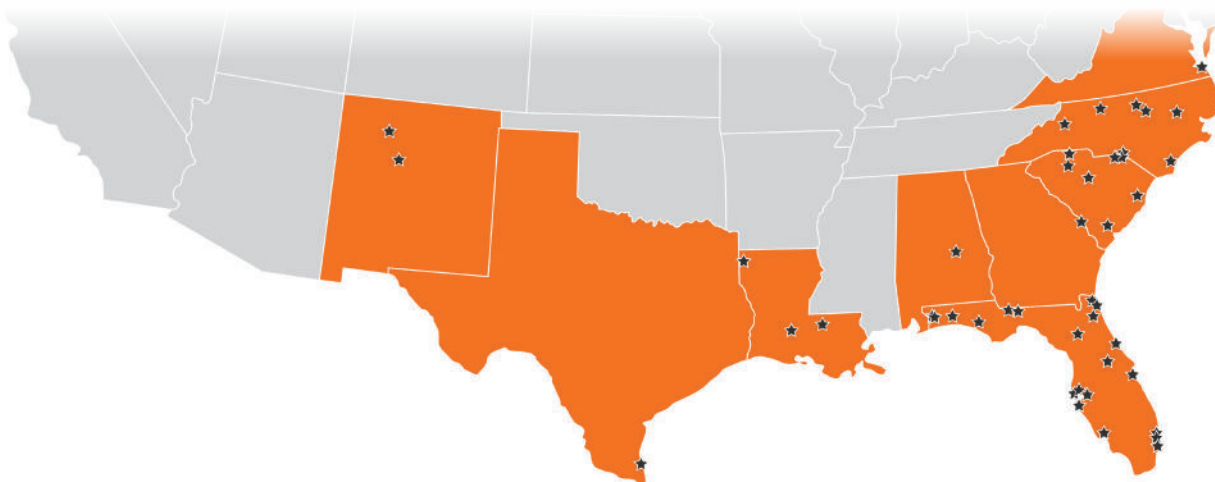
## 2022 Highlights

- In 2022, AMIkids served 3,814 youth in our **54 unique programs across nine states and 227 counties.**
- The average length of engagement for youth in AMIkids programs was 161 days or a little over five months.
- Youth participated in over 400 service learning opportunities, totaling over 5,600 hours in experiential education.
- Of the youth who exited a program in 2022, **81% completed the program** by successfully meeting their goals or completing the available programming.
- **Nearly a third of our youth increased one or more grade levels.**
- A total of 73 High School Diplomas or GEDs were earned during 2022.
- A total of 1,267 middle school credits, 1,868 high school credits (662 credits were retrieved) and 15 college credits were earned in 2022.
- A total of **2,377 courses were completed towards industry-recognized certifications, with 952 certifications earned.**
- Youth reported significant increases in feeling connected to school, emotion regulation skills, and building positive relationships.
- Over **97% of youth utilized at least one positive coping strategy** during a recent challenging situation.

## AMIkids Reach

AMIkids, Inc. is a national youth serving organization that provides individualized services to support youth from all backgrounds across 227 counties in nine states at 54 unique programs. Specifically, in calendar year 2022, AMIkids served youth in Alabama, Florida, Georgia, Louisiana, New Mexico, North Carolina, South Carolina, Texas, and Virginia.

Many of the youth served have been impacted by systems, and AMIkids introduces these young people to opportunities that help them thrive in their homes, schools, and communities. In the past 53 years, the organization has reached over 160,000 youth and countless family members by providing a variety of services that help youth develop into responsible and productive citizens. Service delivery ranges from prevention to day treatment to residential programming and is enhanced through experiential marine education opportunities – a hallmark of our programming since our founding.



# AMIkids Programs and Services

AMIkids offers a wide range of programs and services across the South and Southeast designed to meet the specific needs of the youth and communities served. AMIkids programs and services can be categorized into three main categories: 1) community-based programs (offering daily services to youth and families, with youth returning home each day if programming takes place off site), 2) residential programs (youth may live at an AMIkids campus and receive services 24 hours a day, seven days a week), or 3) service coordination. AMIkids also offers enhancements to services in addition to their regular programming. A short description of each program can be found below.

## COMMUNITY-BASED PROGRAMS

These include Juvenile Justice Day Treatment, Alternative Education (Charter, Infinity), After School, Delinquency Prevention, Family Services, and Pre-Apprenticeship programs, all of which are offered directly within the community.

**Juvenile Justice Day Treatment** programs provide intensive supervision and programming for youth referred primarily due to delinquency. Behavior modification, education, and treatment services are provided five days per week, typically three to eight hours daily

**Alternative education (charter, infinity schools, school-within-a-school)** programs are designed to help students who require additional support typically not available in traditional schools. Students in attendance benefit from academic remediation, positive behavioral skills development, and individualized attention to succeed. AMIkids Alternative Education programs include Infinity Schools, School-within-a-School, and Charter Schools, which operate according to the school district schedule.

**Charter schools** are public schools designed to offer students unique experiences centered around the ocean being the classroom. In addition to academic studies, students are exposed to multiple aspects of marine-focused careers, as they develop as future leaders and responsible stewards of our environment.

**After School** programs offer a variety of activities such as tutoring, career readiness, and technical training to students during after-school hours. AMIkids After School programs provide students with comprehensive programming and support services to engage youth in positive opportunities that prepare them for success.

**Delinquency Prevention** programs provide gender-specific life management skills training, educational services, and youth development activities designed to prevent entry or further involvement in the juvenile justice system.

**Family Services** programs provide home-based skills building and/or family counseling and intervention using evidence-based practices. Family services may include program models such as Functional Family Therapy, Wraparound Services, and the AMIkids Family Centric Model. Family Services programs last approximately two to six months.

**Pre-apprenticeship (career exploration, workforce development)** programs prepare students aged 16-24 for successful careers, offering industry training that is aligned with each community's needs for skilled workers. With a combination of academic, technical, and job readiness courses and individualized case management, AMIkids prepares and places students into higher education, jobs, and apprenticeships.

**Outpatient Treatment Services** include screening, crisis/risk assessment, comprehensive assessment with behavioral health diagnosis, case coordination, and/or counseling services including individual, family, and group therapy. These services may be provided in the home, community, and/or facility between one and three days weekly by clinical staff members.



# AMikids Programs and Services

## RESIDENTIAL PROGRAMS

These programs operate 24 hours per day, seven days per week, with youth residing on campus. Staff implement trauma-informed programming to help youth develop skills for successfully transitioning to community settings and/or the home environment.

**Juvenile Justice with or without mental health and/or substance use treatment** programs provide 24-hour rehabilitative care for youth referred primarily due to delinquency. These programs may include treatment services for youth with mental health and/or substance abuse conditions.

**Child Welfare Group Care** programs provide a 24-hour group living setting for youth requiring a structured out-of-home care placement.

**Specialized Therapeutic** programs provide 24-hour psychotherapeutic rehabilitative care for youth with severe behavioral, psychological, or emotional problems. Services are provided by a multi-disciplinary treatment team including clinical staff members.

## SERVICE COORDINATION

Currently, AMikids provides regional service coordination for the Virginia Department of Juvenile Justice as part of their transformation initiative. In our role as a service coordinator, we work with local or state agencies to develop and manage a continuum of community based and residential services from subcontracted direct service providers.

## AMIKIDS PROGRAM ENHANCEMENTS

These services may be provided as a standalone or supplementary program.

### **Mentoring**

AMikids provides on-site, supervised, individual and small group mentoring to help youth develop important life skills, gain exposure to new opportunities, develop meaningful relationships, and access a wide array of resources.

### **Career and Technical Education**

Provided in two age-appropriate models:

- The AMikids Career Exploration Model, for ages 11-15, helps youth build self-awareness, learn about potential careers, and develop a plan for reaching future goals.
- The AMikids Workforce Development Model, for ages 16-24, utilizes a combination of school-based and work-based learning to help youth learn job readiness skills, earn industry-recognized certifications, and transition to the workforce.

### **AMikids Family Centric Model™ (FCM)**

Services include research informed skills training for families, provided in the home or community setting weekly. Services are designed to reduce anti-social behaviors of youth, improve psychosocial functioning of youth, and improve family functioning.

### **Functional Family Therapy (FFT)**

Services are provided in-home with youth and their family, for an average of 12-16 sessions over three to six months. Developed by FFT, LLC., FFT is a strengths-based and research driven model that reduces risk factors and increases protective factors for youth and families.

# AMikids Programs and Services

## AMikids WINGS

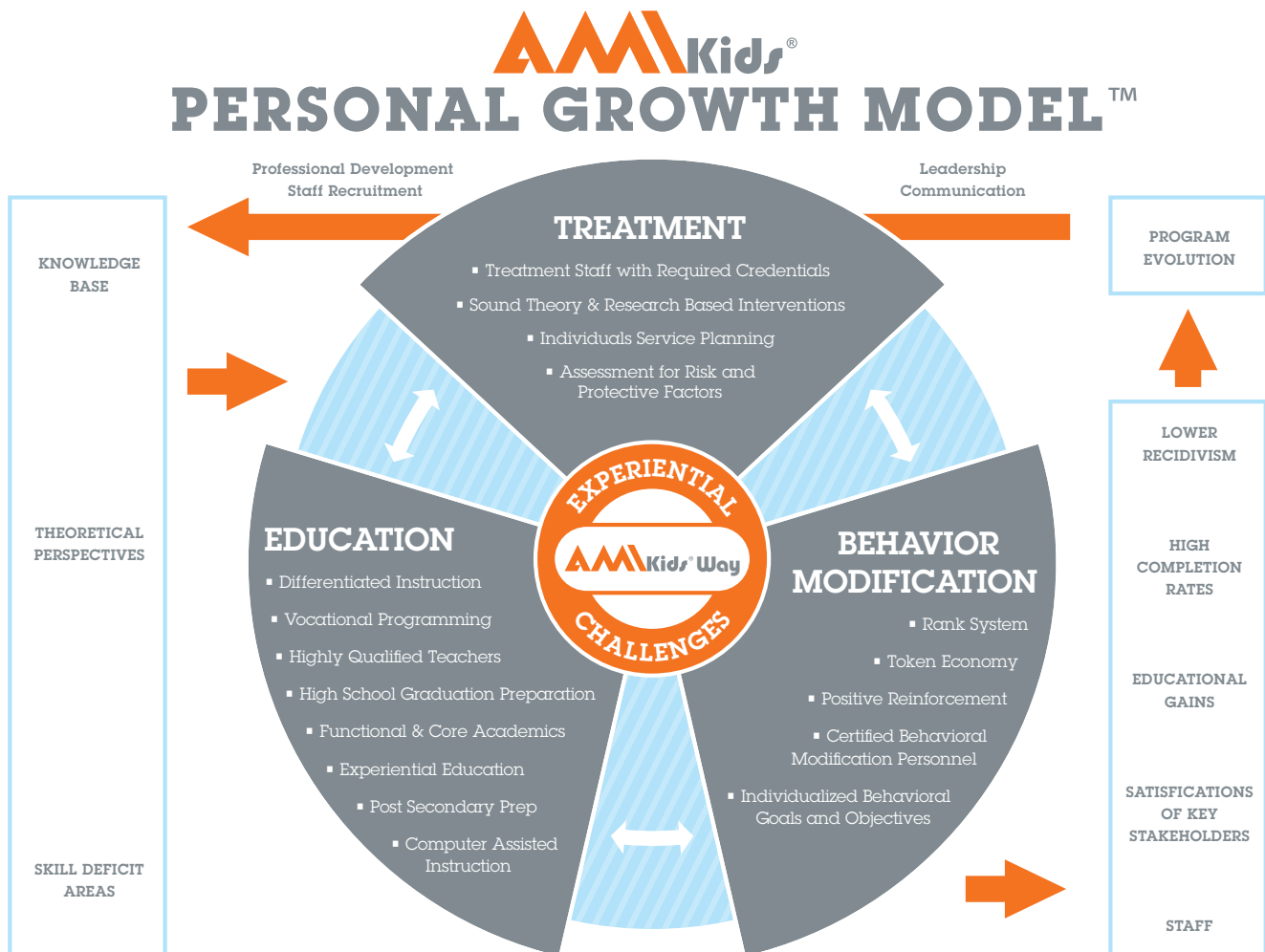
The program model is designed specifically for girls, and services include comprehensive care management, therapeutic support services, student-centered education, family engagement, skills building, and leadership development in a healing-centered environment.

## Wraparound Services

A comprehensive, family and youth-driven approach to managing service delivery options. Wraparound emphasizes the importance of keeping youth in their homes and communities, and involves families working with a team of service providers to meet the child's specific needs.

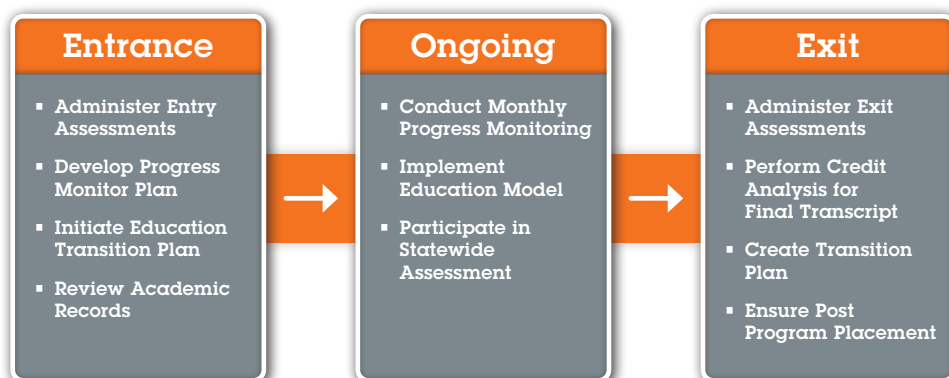
## AMikids Personal Growth Model™

All AMikids programs and services are rooted in the evidence-based AMikids Personal Growth Model™ (PGM). The PGM is a comprehensive approach to treatment for youth who have experienced family issues, are struggling in school and are at risk of dropping out, have demonstrated behavior that could lead to offenses, or have been adjudicated and in lieu of incarceration, have been sent to a day treatment or residential program. This model is also applied to youth who are at risk of entering the justice system and participate in our other programs offered such as prevention programs or Infinity Schools.



# AMikids Personal Growth Model™

The PGM is designed to target and reduce the risk factors that sustain negative behavior and academic failure, improve successful program completion rates, and promote academic achievement. When youth enroll in an AMikids program, staff conduct an assessment to determine their specific risks and protective factors. From this information, individualized service planning is completed for each youth, offering tailored, evidence-based treatment approaches that are matched to the characteristics and needs of the youth. This treatment plan combines the core components of the model: Treatment, Education, and Behavior Modification.



## CORE COMPONENTS OF THE PGM

### ***Treatment***

Treatment component is individualized based on each youth's assessments. Staff provide research-based mental health and/or substance abuse interventions (e.g., cognitive behavioral therapy, motivational enhancement therapy, Functional Family Therapy, Motivational Interviewing) to youth, as well as their families. Youth receive group services daily, and individual and family sessions are provided on a schedule determined by the individualized treatment plan. Staff members implementing this component are licensed mental health professionals or therapists/counselors who are supervised by a licensed mental health professional.

### ***Education***

The education component uses three primary methods to enhance learning: experiential education, project-based learning, and service learning. Students attend classes in an academic setting, and teachers use a rigorous curriculum designed to address the students' individualized needs and diverse learning styles. Teachers implementing this component are certified and highly qualified based on state, local, and AMikids requirements. What helps set AMikids apart are four "challenge" events hosted each year. Two of these events provide rewards for top performers with once-in-a-lifetime experiences like scuba diving and rappelling/white-water rafting. The other two events focus on challenging our youth both academically and athletically, and allowing them to express their talents and support one another through sportsmanship and teamwork.

### ***Behavior Modification***

The behavior modification component is designed to develop or strengthen desired pro-social behaviors and eliminate or weaken antisocial behaviors through three techniques using positive reinforcement: a point card system, a token economy, and a rank system. Staff implementing this component must be designated AMikids Behavior Modification professionals who have completed the AMikids Behavior Modification System training.

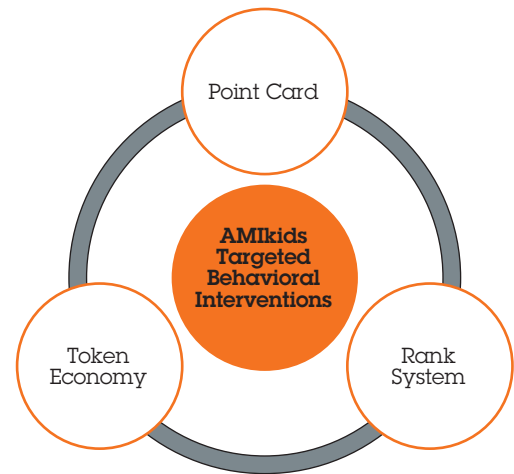


# AMikids Personal Growth Model™

**Rank system.** Youth at AMikids are divided into five ranks. When a youth enters the program, he or she begins at the lowest rank and is given a set of individualized behavior goals. Upon meeting those goals, youth may request to move to a higher rank by appearing before their team of teachers, mentors, and counselors. A rank request is granted once the mentor team agrees that the youth has met certain goals, and new goals are set for the new rank. As youth progress to higher ranks, they earn more responsibilities, leadership opportunities, and privileges. Attaining the fifth and highest rank allows a youth to be eligible for graduation from the program.

**Point card system.** Each youth has a card which lists individual behavioral goals, such as showing respect, dressing appropriately, or participating in class. The youth earns points on the card based on how well they are working towards each behavior goal. Teachers and staff provide feedback and point scores for the youth at the end of each class or activity throughout the day. This constant coaching is given one-on-one as part of a caring relationship between mentor and mentee. At the end of each week, youth are awarded a color-coded card to indicate the number of points earned. Earning high marks on a point card directly relates to how quickly a youth may make progress in the rank system. Youth who earn high marks on their point card are rewarded with a Friday night pizza party, movie night, game night, or field trip such as bowling or fishing.

**Token economy.** As youth display positive behavior changes, teachers and staff reinforce those behaviors in real time by awarding tokens. At the end of a given week, youth may spend these tokens in a special “store” at the program. Items in the token store range from necessities like socks, soap, and hair combs to snacks, treats, and games. Kids with higher point cards have access to purchase more desirable items.

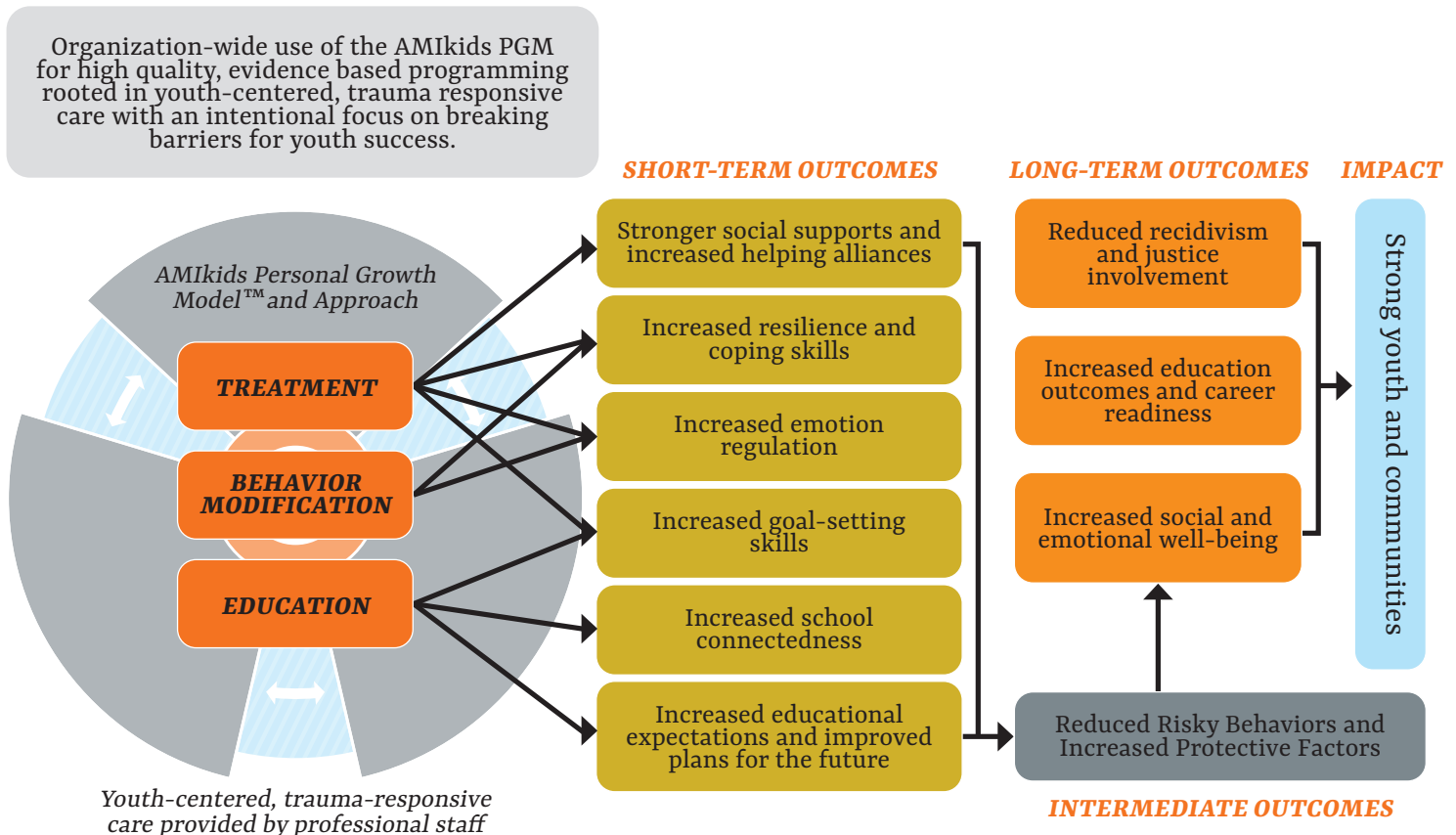




# Logic Model and Theory of Change

## LOGIC MODEL AND THEORY OF CHANGE

AMikids' PGM is rooted in youth-centered, trauma-responsive care with an intentional focus on breaking barriers for youth success. Implementation of the PGM with strong fidelity to the model provides high quality programming for youth and families and produces a variety of positive short and long-term outcomes.



When our professional team members deliver the model in a way that is consistent with our organizational values, youth learn to build strong relationships and skills needed to reduce risky behaviors and increase protective factors. Changes in protective and risk factors result in reduced recidivism and justice involvement, increased educational and career readiness, and increased social and emotional well-being – creating strong youth and communities.

## MEASUREMENT AND DATA COLLECTION

AMikids prides itself on being data-driven and research-based. AMikids uses several assessment tools to measure risk and protective factors, substance use, mental health, trauma history, and educational attainment. Each tool is discussed further in the document alongside its data for calendar year 2022.

Youth data is collected and managed in two centralized, web-based data management systems: K.I.D.S and Lauris. The **Kids Information Data System (K.I.D.S.)** allows for tracking all youth program enrollments across the organization from intake to termination to follow-up. **Lauris** is a case management and counseling system that AMikids programs use to enter and track mental health and behavioral data for the youth served. These systems work together to securely house real-time data and information on all of the youth served each year, tracking youth goals and outcomes and supporting overall organizational reporting.

# Logic Model and Theory of Change

## EXTERNAL DATA VALIDATION AND REPORTING

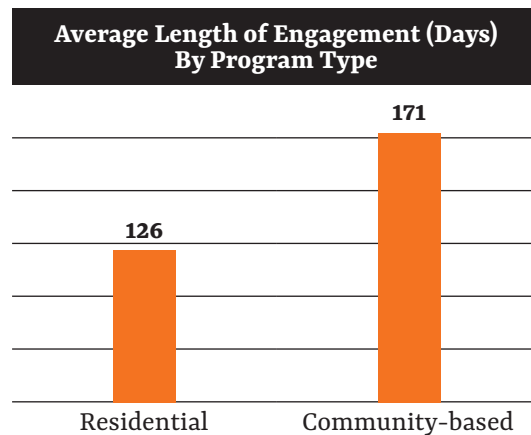
AMIkids collects a wide range of data from youth and families. It is critical that this data be accurate and reliable as this information is not only used in daily service delivery, but also to inform a variety of stakeholders on program effectiveness and youth needs. In addition to AMIkids' regular internal data validation and auditing processes applied to organization-wide data, data integrity is validated monthly with external data sources (e.g., documentation and data from state agencies). Specifically for justice-involved youth served by AMIkids Florida programs, data is annually cross-checked and validated by comparing K.I.D.S. data and Juvenile Justice Information System (JJIS) data for the Department of Juvenile Justice Comprehensive Accountability Report (CAR).

External evaluation is also completed on an annual basis by the Policy Research Institute to independently evaluate AMIkids' effectiveness on reducing recidivism. This annual report, The AMIkids Outputs and Outcomes Report, tracks any justice involvement for 12 months following a youth's release from the program and includes other juvenile justice-related measures such as demographics of youth served, arrest history, and successful program completion rates at each AMIkids program.

## Youth Served in 2022

In 2022, AMIkids served 3,814 youth in our 54 unique programs spanning across nine states. A total of 656 youths were served in our residential programs, 2,358 youths in our community-based programs, and 800 youths through service coordination. The average length of engagement for youth was 161 days or a little over 5 months.

| State          | # of Youth Served |
|----------------|-------------------|
| Alabama        | 43                |
| Florida        | 1,443             |
| Georgia        | 32                |
| Louisiana      | 564               |
| New Mexico     | 101               |
| North Carolina | 317               |
| South Carolina | 491               |
| Texas          | 23                |
| Virginia       | 800               |

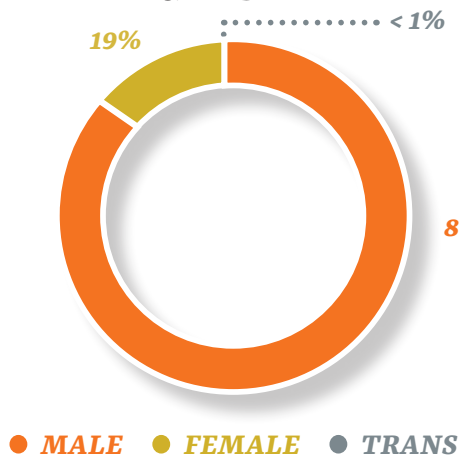


# Youth Served in 2022

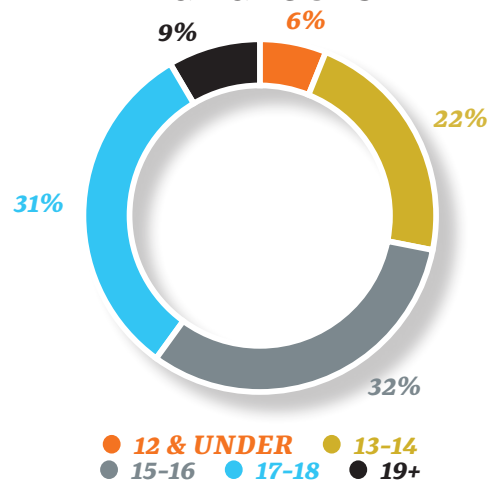
## DEMOGRAPHICS <sup>3</sup>

- A majority of the youth served in 2022 were male (80%), 19% were female, and 4 youth identified as trans (<1%).
- An estimated 63% of youth served were Black, 23% were White, 10% were Hispanic, and 3% were two or more races. Fewer than 2% identified as Asian, American Indian or Alaskan Native, Native Hawaiian or Pacific Islander, or another race (7 youth were Asian, 17 were American Indian or Alaskan Native, 5 were Native Hawaiian or Pacific Islander, and 18 listed “Other” as their race).
- The average age of youth served in 2022 was 16 years old.
- The largest age group of youth served in 2022 was youth ages 15-16 years old (32%), followed by 17-18-year-olds (31%), 13-14-year-olds (22%), 19 or older (8%), and 12 or under (6%).
- A small portion of youth served youth had children (N= 36) or were expecting children (N = 22).
- About 2,198 (73%) youth received a free or reduced lunch from school - a proxy measure of poverty.

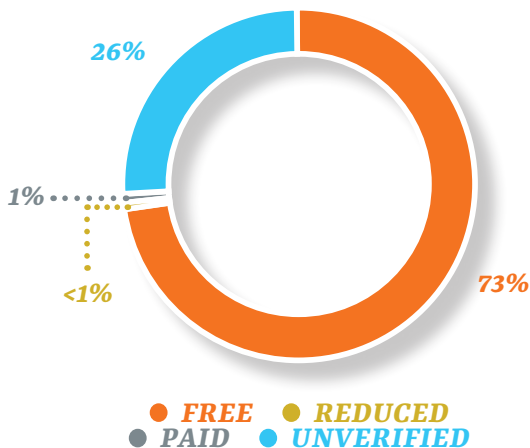
### GENDER



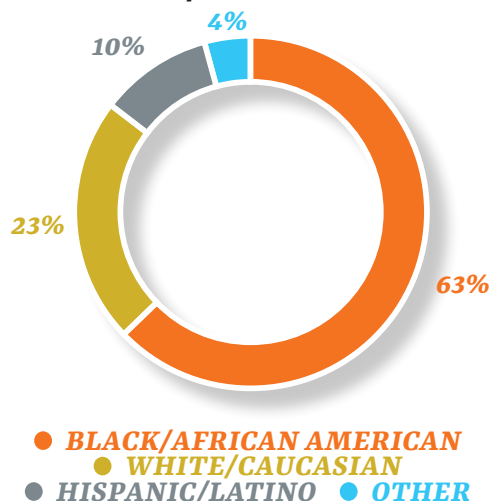
### AGE GROUPS



### FREE / REDUCED LUNCH



### RACE / ETHNICITY



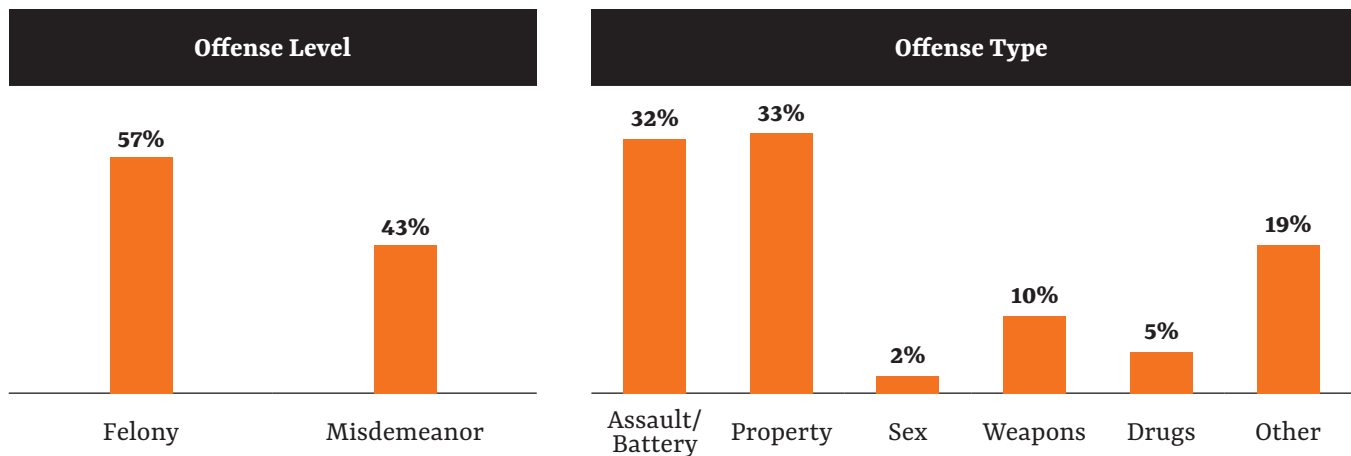
<sup>3</sup> Demographics are based on the unduplicated youth served. There were 176 youth that had more than one program enrollment during 2022. Youth served through AMIkids Virginia Services were also excluded.



# Juvenile Justice History

There are a multitude of situations that can negatively impact a youth's life and create challenges for future success, including family issues, negative peer influences, and engagement in criminal offenses. Some of the youth that enter AMIkids programs have a history of juvenile justice system involvement. The levels and types of offenses of such youth can be seen below:

- Over half (56%) of youth who had been arrested prior to enrollment had felony charges – an estimated 51% decrease from youth served in 2021. Misdemeanor offenses decreased by 49% from 2021.
- Almost one third (33%) of the youth who had been arrested prior to their program enrollment committed a property-related offense – this includes auto theft, unauthorized use of automobile, burglary, vandalism, or larceny.
- The next most common crime was assault or battery (32%), followed by criminal mischief & disorderly conduct or truancy (other in graph, 19%), drug offenses (5%), possession of or concealed weapons (10%), and sex-related offenses (2%) (sexual battery, lewd and lascivious).



# Trauma History

## ADVERSE CHILDHOOD EXPERIENCES (ACES)

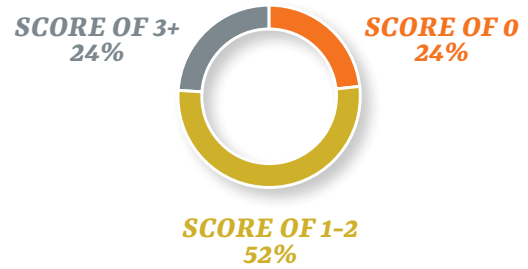
ACEs, or Adverse Childhood Experiences, refers to difficult or traumatic experiences children face in their environment. These can include physical and emotional abuse, neglect, household or community violence, caregiver mental illness, or even racism. Experiencing many of these can cause toxic stress and lead to long-lasting wear and tear on the body and brain. Research has shown that there is a correlation between children with ACEs and poor outcomes later in life. There is a spectrum of responses that can be taken to help youth recover from the trauma caused by ACEs and toxic stress, including therapeutic interventions, trauma-informed care or practice, and fostering strong and responsive life relationships to help children and adults build core life skills to buffer the effects of toxic stress.

AMIkids has committed to moving beyond trauma-informed care to taking action with training staff on how to be trauma-responsive. To identify youth who may need additional support due to a history of trauma, the ACEs assessment is administered to all AMIkids youth<sup>4</sup>.

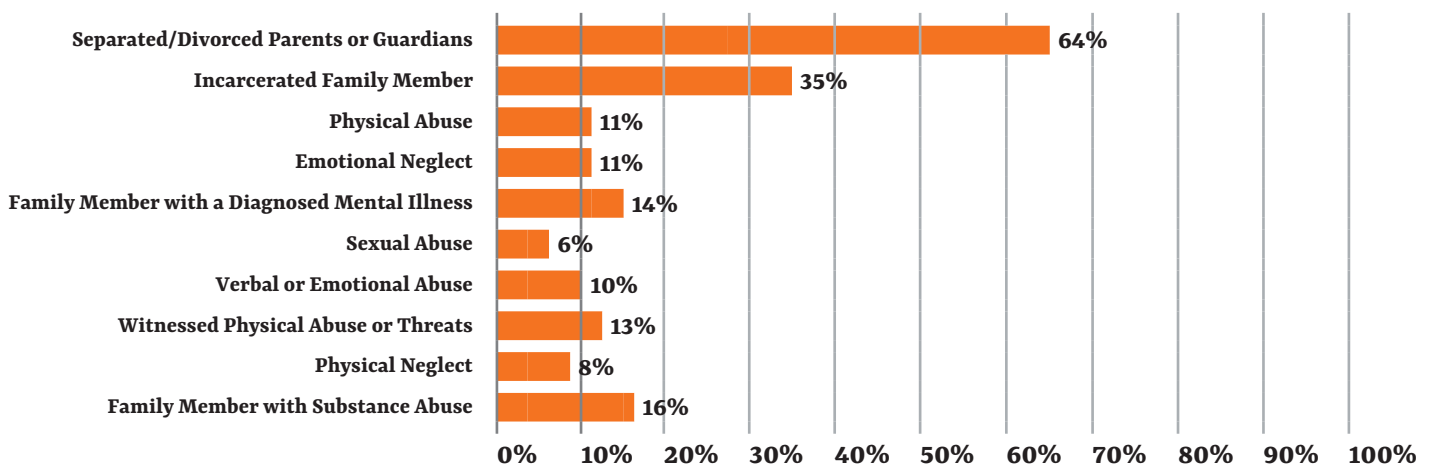
A majority of youth entering AMIkids programs have experienced some trauma with 86% reporting at least one ACE and about a quarter of youth (24%) report experiencing three or more ACEs. Research shows that of individuals with a score of three or more, 36.2% have experienced depression in the past year, 21.5% have used illicit drugs, and 10.3% suffer from obesity.

Of those ACEs experienced by youth served by AMIkids, the types of traumas most often endorsed are around relationships, or more specifically, the loss of a relationship. An estimated 64% of youth reported that their parents/guardians were separated or divorced and 35% of youth reported living with a family member who served time in jail or prison. Supportive relationships are key for positive youth development. As such, AMIkids's PGM supports promoting a positive learning environment through peer-to-peer and youth-adult bonding. When youth build trusting relationships with staff and others, they experience increases in academic motivation, self-confidence, life skills, and leadership skills<sup>5</sup> – all associated with long-term success.

## ACES SCORES FOR YOUTH SERVED IN 2022



## Types of Trauma Self-Reported by Youth



<sup>4</sup> Aggregate data is limited as behavioral health data began being tracked in Lauris in 2019 with a select number of programs. The strategic rollout of programs collecting data in Lauris continued throughout 2022.

<sup>5</sup> Gambone, M.A., Klem, A.M. & Connell, J.P. (2002). Finding Out What Matters for Youth: Testing Key Links in a Community Action Framework for Youth Development. Philadelphia: Youth Development Strategies, Inc., and Institute for Research and Reform in Education.

# Substance Use and Mental Health

Youth are assessed upon enrollment in the program to understand any potential substance use and mental health disorders and needs. There are two different types of assessments: the Prevention Eligibility Assessment, which is used with youth entering a prevention program to assess need and risk level, and the Comprehensive Assessment, which is used with youth who may have higher needs and elevated risk factors.

## PREVENTION ELIGIBILITY ASSESSMENT

The Prevention Eligibility Assessment is a tool Florida prevention programs use to assess risk factors for youth to evaluate whether youth would benefit from the prevention program. If the youth has three or more risk factors, they are deemed eligible for the program.

Only the following Florida programs are included in the results below: Clay, Duval, Gadsden, Manatee, Tallahassee, and Tampa. Of the youth enrolled at these programs in 2022, 177 youth (40%) answered the following questions related to their risk factors:



### 3 IN 4 YOUTH HAVE FAMILY INSTABILITY OR CONFLICT

- 25% of youth have influence of a family member with a criminal history.
- 76% of youth have family instability or conflict.
- 17% of youth have a parent with substance abuse problems.



### 4 IN 5 YOUTH HAVE SCHOOL-RELATED RISK FACTORS

- About half (46%) of youth who were assessed for prevention eligibility in 2022 were suspended or expelled from school within the last six months.
- 55% of youth had failed one or more classes within the last six months.
- 73% of youth claimed to have school instability or failure prior to their program enrollment, and 26% of youth had habitual truancy or class skipping within the last six months.
- Almost one-sixth of the assessed youth (12%) had been formally diagnosed with a special education need or exceptionality.



### 4 IN 5 YOUTH HAVE UNMET PERSONAL AND MENTAL HEALTH NEEDS

- 80% of youth have ACEs related to their personal needs not being met (e.g. neglect or physical health problems) or negative experiences (e.g. abuse or violence).
- 18% of youth struggle with mental health or substance use.
- Yet, only 7% of the assessed youth have a mental health diagnosis.



# Substance Use and Mental Health

Families serve as one of the most influential socializing forces in a person's life. Research has demonstrated that behavioral issues during childhood can predict subsequent delinquency and criminal behavior. Youth who are neglected by their parents or grow up in homes with instability or conflict are at the greatest risk of becoming delinquents. As illustrated, although our prevention youth may not have been flagged as at-risk or been involved in the justice system, the youth entering these types of programs experience several challenges and needs.

## COMPREHENSIVE ASSESSMENT

The Comprehensive Assessment is used to design treatment plans for youth in clinical services at AMIkids day treatment and residential programs who are referred by DJJ or other state systems. Mental health disorders are prevalent among youth involved in the juvenile justice system. A meta-analysis<sup>7</sup> of studies examining sex and race differences in mental health symptoms proposed that up to 70% of youth in the juvenile justice system have a diagnosable mental health problem. Additionally, mental health problems among adolescents are frequently linked to substance abuse, which is related to a higher risk of

The assessment evaluates the youth based on their family history, current behaviors, mental status, strengths, needs, abilities, and preferences. The qualified clinical team member then decides if clinical services are recommended based on the assessment results and then formulates a diagnosis and develops a treatment plan for the youth.

### *Types of Diagnoses*

Youth are given primary and secondary diagnoses based on their comprehensive assessment results. The types of diagnoses are as follows:

- Academic problems
- Adjustment disorder
- Antisocial behavior
- Anxiety disorder
- Attention-deficit hyperactivity disorder (ADHD)
- Bipolar disorder
- Conduct disorder
- Disruptive mood dysregulation disorder
- Inadequate housing
- Intermittent explosive disorder
- Major depressive disorder
- Parent/child relationship problems
- Post-traumatic stress disorder (PTSD)
- Substance-abuse disorder (cannabis, alcohol, tobacco, or stimulants)
- Victim of child sexual abuse or physical abuse

The data for 2022 is limited. Only the following programs are included in the results below: Albuquerque Transitional Living, Farmington, Rio Grande Valley, Bennettsville, Escambia Boys Base, Gainesville, Greater Fort Lauderdale, Jacksonville, Melbourne Center for Personal Growth, Miami Dade North, Miami Dade South, Orlando, WINGS Piedmont, Volusia and YES. Additionally, about 396 youth (53%) answered the following questions from the above program enrollments in 2022.

<sup>7</sup> Vincent, G.M., Grisso, T., Terry, A. Banks, S. (2008). Sex and race differences in mental health symptoms in juvenile justice: The MAYSI-2 national meta-analysis. *Journal of the American Academy of Child & Adolescent Psychiatry*, 47 (3), 282-290.

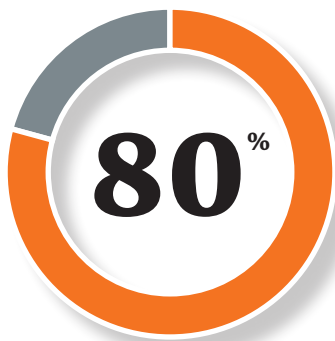
# Substance Use and Mental Health

## Substance Use and Mental Health Diagnoses

Overall, the youth assessed reported high rates of substance use and mental health challenges:

- An estimated 81% of the youth assessed using the Comprehensive Assessment reported that they use cannabis, 47% use alcohol, 38% use nicotine products, 22% use sedatives (barbiturates, narcotics, tranquilizers), 14% use hallucinogens, and 10% use stimulants.
- 98% of the youth had at least one mental health diagnosis, with behavior disorders being the top primary diagnosis (42%).
- 82% of youth had substance abuse as a primary and/or secondary diagnosis.

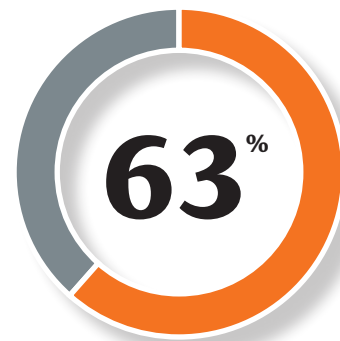
| Drug type     | % of users |
|---------------|------------|
| Alcohol       | 47%        |
| Cannabis      | 81%        |
| Hallucinogens | 14%        |
| Inhalants     | <1%        |
| Nicotine      | 38%        |
| Stimulants    | 10%        |
| Sedatives     | 23%        |



of youth have two or more mental health diagnoses

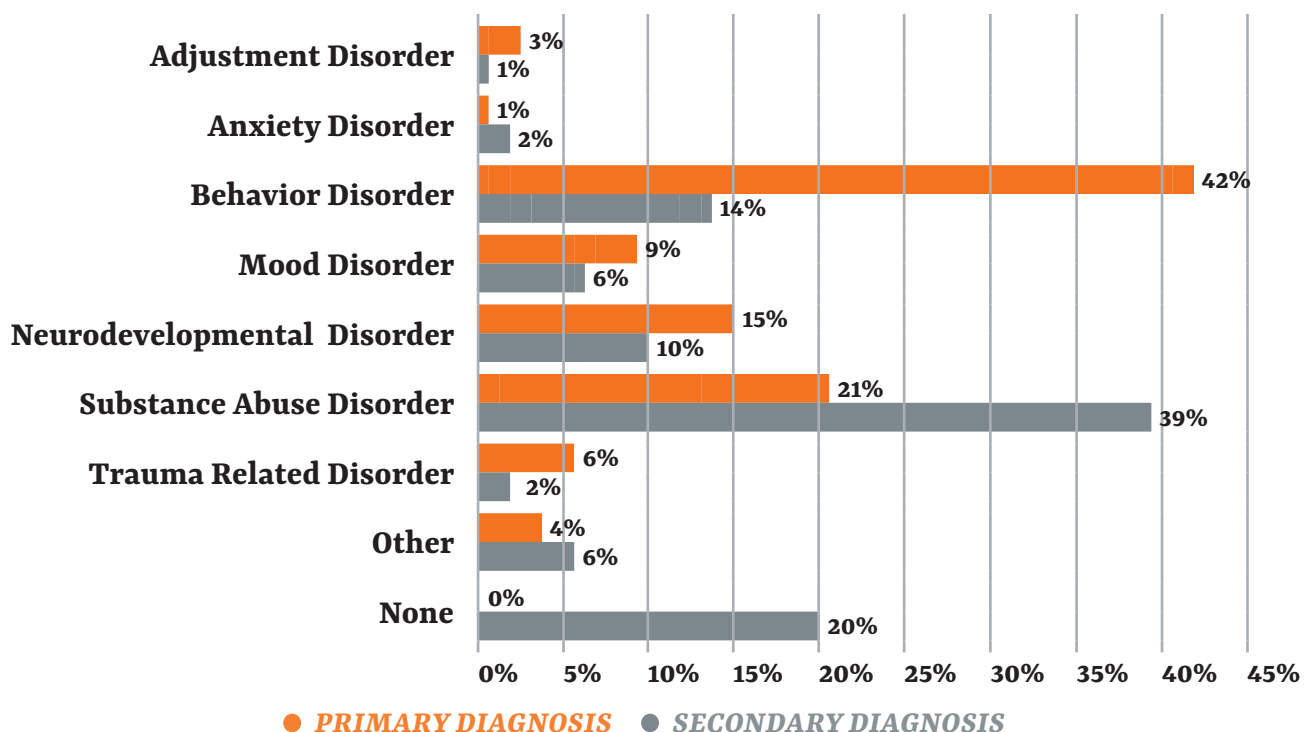


of youth have good or fair motivation for treatment



of youth have a high or moderate proclivity to violence

## Primary and Secondary Diagnoses of Youth %



# Risk and Protective Factors

## FLORIDA-SPECIFIC ASSESSMENTS

There are three different assessments used in Florida-based programs to identify risk and protective factors for youth. Descriptions of each of these can be found with related data and findings accompanying them.

### ***Prevention Assessment Tool (PAT)***

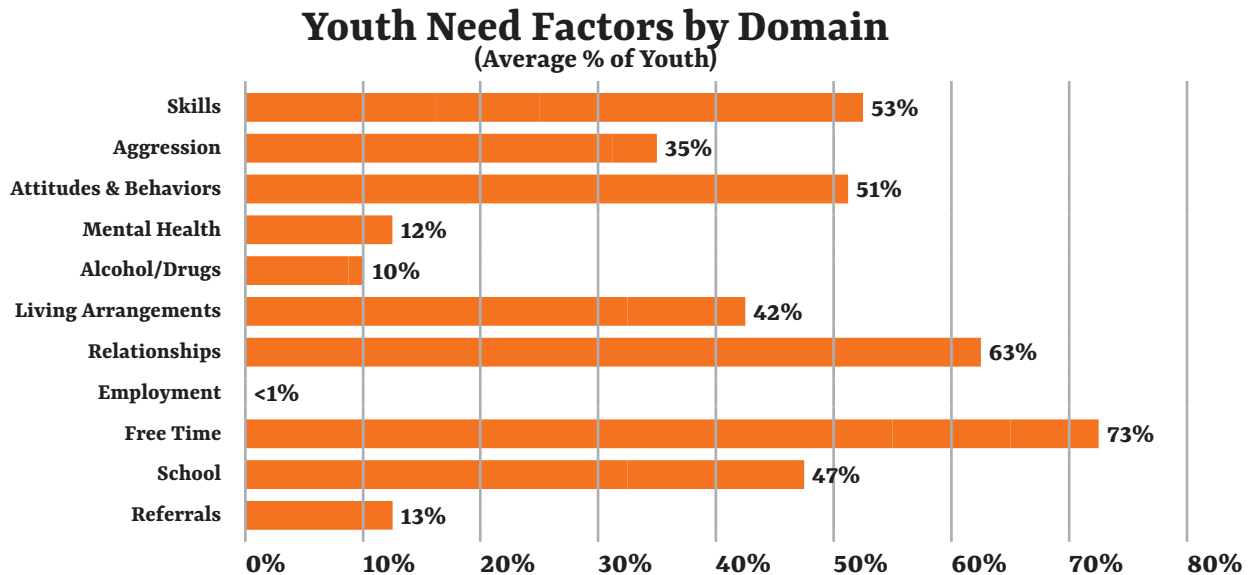
The PAT assists prevention and civil citation programs in identifying areas of criminogenic need, developing an individualized intervention plan for the youth, and monitoring progress in reducing youth's risk factors. The philosophy behind PAT is that it enables staff to reduce the number of youth entering the juvenile justice system by encouraging positive changes in their behavior and attitudes.

The PAT is broken down into 11 domains, which are listed below (Domain 2 is demographics and is omitted in the results):

|                  |   |
|------------------|---|
| <b>Domain 1</b>  | <b>Referrals</b> – record of referrals resulting in diversion, adjudication withheld, adjudication, or deferred prosecution   |
| <b>Domain 3</b>  | <b>School</b> – special needs, current status, conduct, attendance, performance, and suspensions or expulsions  |
| <b>Domain 4</b>  | <b>Use of Free Time</b> – types of structured recreational activities in which youth currently participate  |
| <b>Domain 5</b>  | <b>Employment</b> – current employment status   |
| <b>Domain 6</b>  | <b>Relationships</b> – current friends youth spends time with, currently admires anti-social peers, current resistance to anti-social influence   |
| <b>Domain 7</b>  | <b>Family/Living Arrangement</b> – imprisonment history of those living in household, problem history with parents or siblings, current living situation, level of household conflict, parental authority and control               |
| <b>Domain 8</b>  | <b>Alcohol and Drugs</b> – youth's alcohol and drug usage, current or prior participation in drug & alcohol treatment program   |
| <b>Domain 9</b>  | <b>Mental Health</b> – history of violence or physical abuse, being a victim of sexual abuse/rape or neglect, suicidal ideation, current suicidal risks, and mental health problems currently interfere with working with the youth |
| <b>Domain 10</b> | <b>Attitudes/Behaviors</b> – impulsive, feelings for victim of criminal behavior, respect for authority figures   |
| <b>Domain 11</b> | <b>Aggression</b> – hostile interpretations, belief in fighting or physical aggression, evidence of non-criminal history violence   |
| <b>Domain 12</b> | <b>Skills</b> – consequential thinking, goal setting, problem-solving, dealing with people/difficult situations, control of impulsive behaviors or aggression)  |



# Risk and Protective Factors



The top needs identified using the PAT align with the findings from the ACEs scores – most of our youth have a need for positive relationships and a supportive, engaging environment. These unmet needs often manifest as aggressive attitudes and behaviors, as seen in the chart above.

## **Community Assessment Tool (CAT)**

The CAT is a pre-screening assessment that assesses risk level scores measuring a juvenile's risk of re-offending and provides information that can be used by juvenile probation officers, youth, and families to collaboratively develop the Youth-Empowered Success (YES) Plan, which includes individual goals and action steps. CAT data is only provided at the individual level; therefore, no summary data is available.

## **Residential Assessment for Youth (RAY)**

The RAY is a research-based assessment specially designed for the residential setting. Program staff utilize the RAY instrument to identify a youth's criminogenic needs and to address the youth's risk and protective factors, ultimately reducing the youth's risk to re-offend. RAY data is only provided at the individual level; therefore, no summary data is available.

## **NON-FLORIDA ASSESSMENTS**

For programs outside of Florida, the assessment of choice to measure risk and protective factors with AMIkids youth is the YASI.

## **Youth Assessment and Screening Instrument (YASI)**

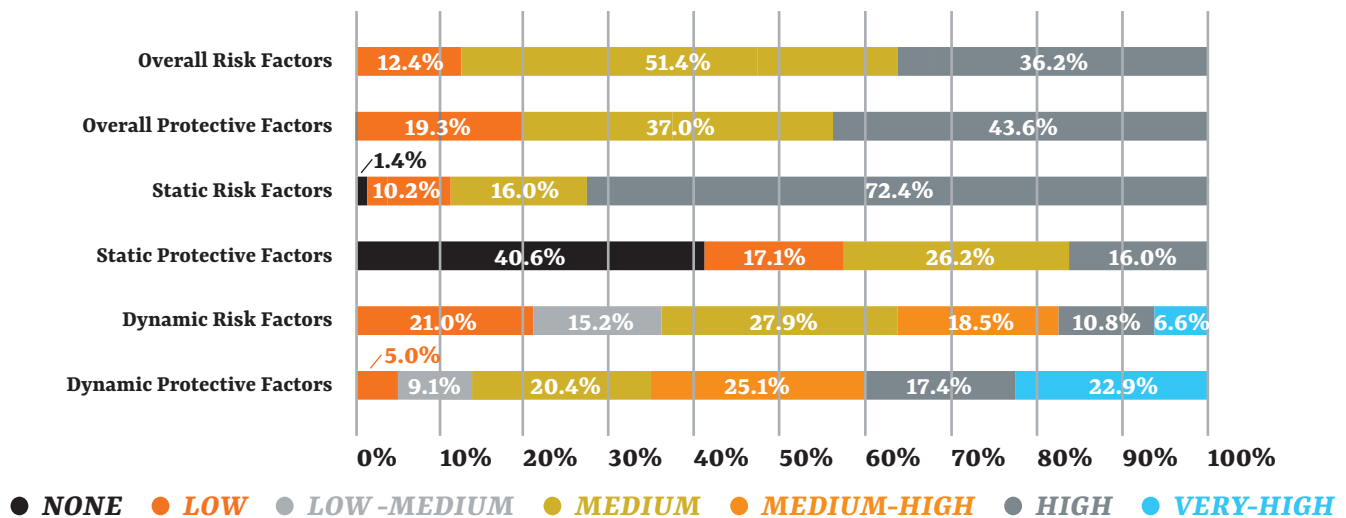
The YASI is an assessment tool that measures risk, needs, and protective factors in at-risk and juvenile justice-involved youth. Youth are assessed when they enter the program and reassessed at 90 days or six months and again at discharge. Findings from the baseline YASI are used to understand the strengths and needs of youth to improve case management and treatment planning.

In 2022, the YASI was used in Louisiana, New Mexico, and South Carolina. Baseline findings from 2022 indicate that overall, youth entering these programs have high risk factors that could lead to future delinquency and entering or re-entering the justice system. Of the 362 youth who completed a full assessment, more than a third (36%) have high risk factors while a little under half (44%) have high protective factors. Of note, a majority of youth (72%) had high levels of static risk factors, or risk factors

# Risk and Protective Factors

that cannot be changed. This result is expected given that a majority of the youth from these programs are referred from the justice system and have a history of justice involvement, engaging in risky behaviors, or violence. However, it is important to understand that about 86% of youth have medium to very high dynamic protective factors, or factors that can be positively impacted through effective programming.

## Overall Full YASI Assessment Results (N=304)



Examination of the specific types of risk factors show a large proportion of youth with medium to high levels of dynamic risks around substance use (51%) and needs in community or peer relationships (61%) and skills (71%). Static risks show about half having a high risk associated with their legal history (49%) and violent history (53%).

The highest endorsed protective factor was in employment/free time, with nearly two-thirds (65%) of youth scoring high for engaging in positive, structured extracurricular activities or being employed. The bulk of youth scored much lower around other areas that serve as protective factors such as family, school, community/peers, and attitude – indicated areas of need for support or change.



# Outputs and Outcomes for 2022

Through the AMIkids PGM and individualized care planning, AMIkids positively impacts **education and career readiness, social and emotional well-being, and behavior** by increasing skills, building relationships, increasing protective factors, and decreasing risk factors, all which contribute to successful program completion and brighter futures.

## AMIkids Youth Outcomes Survey (AYOS)

The AYOS measures the short-term outcomes that lead to long-term success such as increased **school connectedness, educational expectations, emotion regulation, goal setting, coping skills and helping alliances**. This survey consists of externally validated scales and is administered at enrollment, quarterly, and prior to leaving the program to assess the impact of the program over time. Pre-survey scores (enrollment) versus post-survey scores (most recent administration of the survey during 2022) are included in this year's outcomes.

## EDUCATION

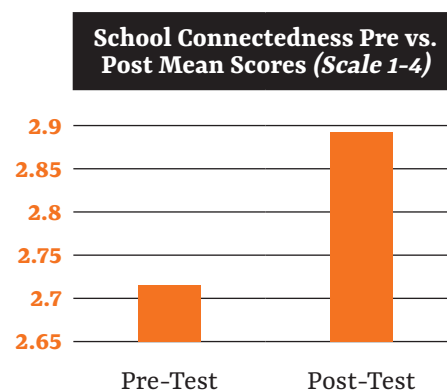
AMIkids' educational services focus on improving student engagement and increasing academic functioning. We work collaboratively with local school districts and/or the Department of Juvenile Justice to meet state educational standards. Many of the youth served by AMIkids have experienced challenges in the traditional public-school system and need individualized support to reengage them in their schoolwork to meet their educational goals.

### Service Learning and Experiential Education

A hallmark of AMIkids programming is experiential education or service-learning opportunities. These engaging activities include AMIkids events such as Legislative Day or the Presidential Dive Trip, as well as community service, civic engagement, and marine education. **In 2022, youth participated in over 400 service-learning opportunities, totaling over 5,600 hours in experiential education!**

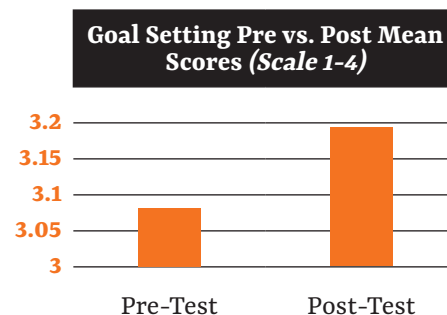
### School Connectedness<sup>8</sup>

This measure assesses a youth's level of engagement and attachment to school. School connectedness is associated with school achievement, health, and reductions in delinquency. In 2022, AMIkids youth reported a significant increase in feeling connected to and engaged in school from pre- (2.72) to post-survey (2.89) ( $p < .01$ ).



### Goal Setting<sup>9</sup>

This measure evaluates a youth's ability to set and pursue goals – a skill central to positive youth development, reduced behavioral problems, and future success. AMIkids youth reported a significant increase in goal setting skills from pre- (3.08) to post-survey (3.19) ( $p < .05$ ).



<sup>8</sup> Adapted from Karcher's Hemmingway Measure of Adolescent Connectedness (2011).

<sup>9</sup> Adapted from Lippman, Guzman, & Moore (2012).



# Outputs and Outcomes for 2022

## **Educational Expectations**

This measure consists of several standardized questions around a youth's plans to graduate high school, go to college, and plans right after high school. Educational expectations have been linked to academic performance and future educational attainment. Youth who have completed at least one post-survey showed a positive outlook on their future education and life goals:

- 95% of AMIkids youth think they will finish high school or earn their GED
- Over 72% of AMIkids youth plan on going to college at some point
- About 92% of youth had education or career plans for their first year after high school
- Of those youth with plans for their first year after completing high school or earning their GED:
  - 77% plan to get a job and work
  - 45% plan to go to college
  - 40% plan to go to a technical school or community college for a special trade
  - 24% plan to participate in an apprenticeship or internship
  - 14% plan to join the military

As a result of improved skills and attitudes related to educational and career goals, AMIkids youth achieved a number of positive outcomes in 2022:

- On average, youth entered AMIkids programs at a ninth-grade level (with the average youth age at 16 years old). Over a third of our youth (34%) increased one or more grade levels during their time at AMIkids in 2022.
- A total of 73 youth earned their high school diploma or GED in 2022 while at an AMIkids program. In addition, 1,266.5 middle school credits, 1,868.25 (662.25 retrieved) high school credits and 15 college credits were earned in 2022 through our program before returning to their neighborhood schools to earn their degrees.

## **STAR Assessments**

All of our youth take Renaissance STAR assessments upon 10 days of enrollment and are re-tested monthly throughout the course of their program, and upon termination. STAR assessments are computer-adaptive tests (CATs) that are used to screen students for their reading and math literacy levels. This helps us place students into appropriate courses and allows us to monitor their growth and progress throughout the program.

- Nearly half (40.5%) of youth served in 2022 had gains in STAR math scores and in STAR reading scores (36.8%).

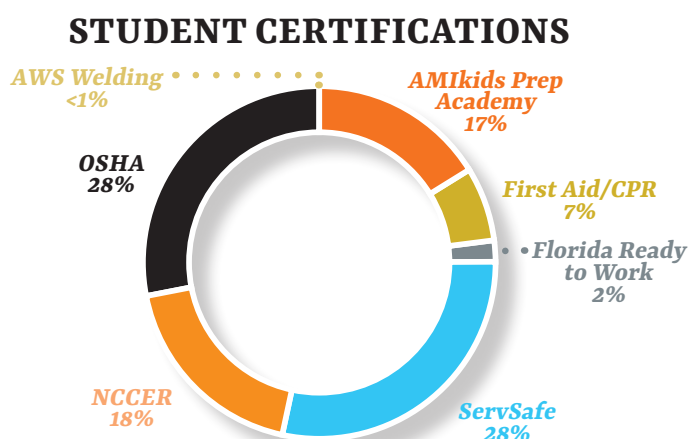
## **CAREER READINESS**

AMIkids offers workforce development programs and career readiness services as add-ons to our standard programs. Workforce development programming provides training opportunities and other related services that will help prepare our youth for the workforce. In 2022, we served 991 youth in our workforce development programs.

- A total of 2,377 courses were completed towards industry-recognized certifications, with 952 certifications earned in 2022.

# Outputs and Outcomes for 2022

- Of the certifications, there were:
  - 157 AMIkids Prep Academy (workforce readiness) certificates (17%),
  - 65 First Aid/CPR certificates (7%),
  - 20 Florida Ready to Work certificates (2%),
  - 265 ServSafe Food Handler certificates
  - 1 ServSafe Manager certificates (28% combined),
  - 171 NCCER Core Construction certificates,
  - 1 NCCER Level 1 Carpentry,
  - 3 NCCER Level 1 Welding certificates and 1 AWS Gas, Metal, Art Welding Certification (18% NCCER and AWS combined),
  - 251 OSHA 10-hour Construction, and 10 OSHA 30, and 7 OSHA Forklift Operator (28% combined).
  - Over two hundred (N = 231) job placements were made in 2022, with an average hourly wage of \$12.15.



## SOCIAL AND EMOTIONAL WELL-BEING

The AMIkids Way and PGM are rooted in positive youth development approaches that promote a safe, trauma-responsive environment for team members to teach youth how to overcome stressful situations and build healthy, supportive relationships. Developing skills, identifying coping strategies, and learning how to build and maintain relationships are essential for lifelong social and emotional wellness.

### **Resilience and Coping Skills<sup>10</sup>**

This scale assesses the use of both positive (adaptive) and negative (maladaptive) coping strategies (14 total), including how much each strategy has helped during recent stressful situations (1 being “not at all” and 3 being “a lot”). Increased use of positive coping skills (e.g., “reaching out to others to find a solution to a problem”) is directly related to a higher likelihood of navigating challenging situations successfully and improved resilience. In 2022, AMIkids youth reported increased use of positive coping strategies from pre- to post-survey and found them more effective during the most recent use. Over 97% of youth reporting using at least one positive coping skill during a recent challenge.

Youth continued to engage in the use of negative coping strategies from pre- to post-survey; however, the slight increase from pre- to post-survey was insignificant. When they engaged in maladaptive coping behaviors, they reported feeling that the strategies were helpful. The top three negative coping strategies used by youth were: 1) “I wished I could make things different”, 2) “I wished the problem had never happened”, and 3) “I stayed by myself.”

| Measure                                | Average Pre-Score<br>(range) | Average Post-Score<br>(range) |
|--|------------------------------|-------------------------------|
| Coping Strategies (total sum - #)      | 3.23 (0-4)                   | 3.23 (0-4)                    |
| Coping Strategies (effectiveness)      | 2.31 (1-3)                   | 2.33 (1-3)                    |
| Maladaptive Strategies (total sum - #) | 6.58 (0-10)                  | 6.63 (0-10)                   |
| Maladaptive Strategies (effectiveness) | 2.01 (1-3)                   | 2.04 (1-3)                    |

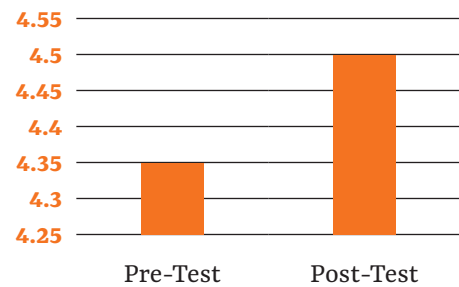
<sup>10</sup> Adapted from KidCope (Spirito, Stark, & Williams, 1988).

# Outputs and Outcomes for 2022

## Helping Alliances<sup>11</sup>

This scale measures the strength of the bonds developed between youth and AMIkids team members. The presence of strong social supports acts as a protective factor and is linked to increased social and emotional wellbeing. In 2022, AMIkids youth experienced a significant increase in feeling positively connected to AMIkids team members (4.35 to 4.50,  $p < .01$ ).

Helping Alliances Pre vs. Post Mean Scores (scale 1-6)



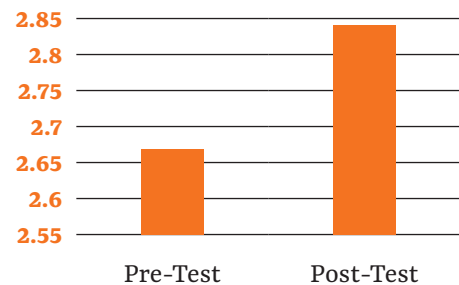
## BEHAVIOR

As one of the three critical components of the AMIkids PGM, positive reinforcement techniques are used to help youth develop and strengthen pro-social behaviors and learn how to manage their emotional and physical responses to difficult situations or as a result of trauma.

## Emotion Regulation<sup>12</sup>

This scale influences physical and mental health and is associated with greater social competence, school performance, and positive well-being. Emotion regulation is a skill that can be learned and is beneficial to successful one-on-one relationships with family, peers, and other adults. In 2022, AMIkids youth reported significantly higher levels of emotion regulation from pre- (2.67) to post-survey (2.84;  $p < .01$ ).

Emotion Regulation Pre vs. Post Mean Scores (scale 1-4)



## RISK AND PROTECTIVE FACTORS

Comparison of the baseline risk and protective factor assessments to the most recent reassessment in 2022 indicate:

- 92% of youth maintained<sup>13</sup> or significantly increased their protective factors (10% higher than 2021 outcomes).
- About 36% of youth decreased their risk factors (16% higher than 2021 outcomes).

<sup>11</sup> Adapted from Helping Alliance Questionnaire (HAQ=II) (Luborsky et al., 1996).

<sup>12</sup> Adapted from the Middle School Youth Survey, originally from Prior et al. (2000).

<sup>13</sup> Maintenance is included as a positive outcome as youth typically would experience a decline in these areas without support from the programs.



# Outputs and Outcomes for 2022

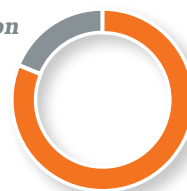
## SUCCESSFUL COMPLETIONS

Engagement, increased skills, and reduced risk factors most often lead to successful program completion.

- Approximately 81% of youth completed the program by successfully meeting their goals or completing the available programming.
- About 19% of youth did not successfully complete their program – this includes youth getting a new law violation, youth running away or absconding, violation of program requirements, or violation of probation.
- In 2022, there were 256 program terminations that were considered “neutral” and excluded from the program completion calculations (12% of terms). Neutral reasons include program enrollments termed within 10 days, changes in contract/end of the semester, or a youth who returned a second time within a short period of time (second program enrollment is assessed for successful or unsuccessful program completion).

## PROGRAM COMPLETIONS

Unsuccessful/Violation  
19%



Completed Program  
81%

## Future Direction

In 2022, AMIkids completed its five-year organizational strategic plan which was focused on improving and increasing the quality and availability of programming for youth and families in the communities served by AMIkids. These efforts led to:

1. Increased revenue to strengthen support for programs to continue service to communities;
2. Increased access to career readiness and job placement services to all AMIkids youth; and
3. Increased mental health services to youth.

AMIkids is continuing its journey to becoming one of the leading youth empowerment agencies in the nation with its 2023-2025 Strategic Plan. Our three-year vision is to positively impact more lives using four strategic goals as our guide:

1. Diversify Funding
2. Retain Staff
3. Enhance Individual Learning and Skill Development
4. Expand Programming to Address Community Needs and Service Gaps

AMIkids will help 20,000 youth and families realize their full potential through innovative programming and partnerships. To learn more about our Strategic Plan, please visit: <http://www.amikids.org/about-ami-kids/2023-2025-strategic-plan>.

## LIMITATIONS

In 2022, AMIkids focused on evaluating programs' adoption of the new tools introduced across the organization in 2021 to standardize data collection across the organization and increase the level of shared measurement. Data quality assessment has indicated an increase in their use, however, data available for this report is limited due to the continued implementation phase.



If you would like to learn more about the information in this report, please contact:  
Dr. Jessica Mitchell at [jnm@amikids.org](mailto:jnm@amikids.org)



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