

Texas Juvenile Justice Department Leadership Panel

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Judicial Conference on Juvenile Justice
August 18, 2026



TEXAS

JUVENILE  JUSTICE
DEPARTMENT

Overview of Programs



Declining Populations



Treatment Classifications



Emerging Trends



**Public Safety
Approach**

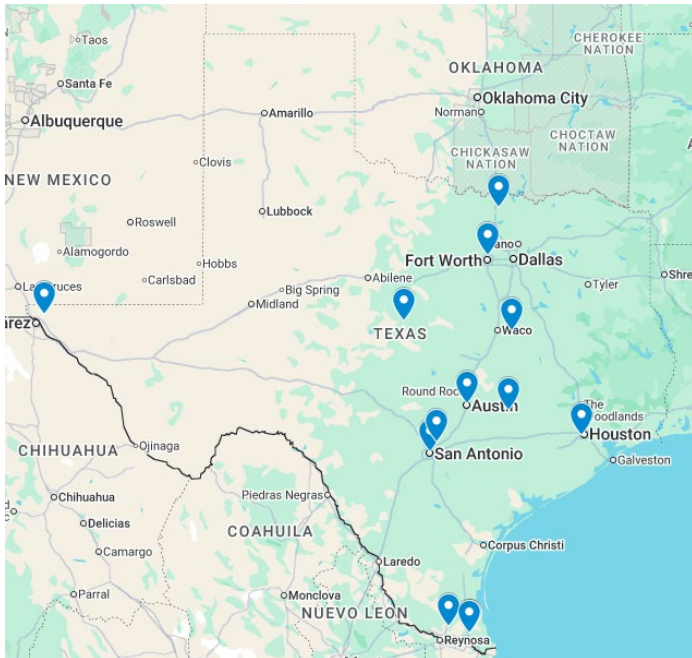
What is the Texas Juvenile Justice Department?

Primary state agency in charge of juvenile justice in Texas.

Mission:

Transforming young lives and creating safer communities

5 State Facilities
3 Reentry Centers
5 District Parole Offices



1949

1981



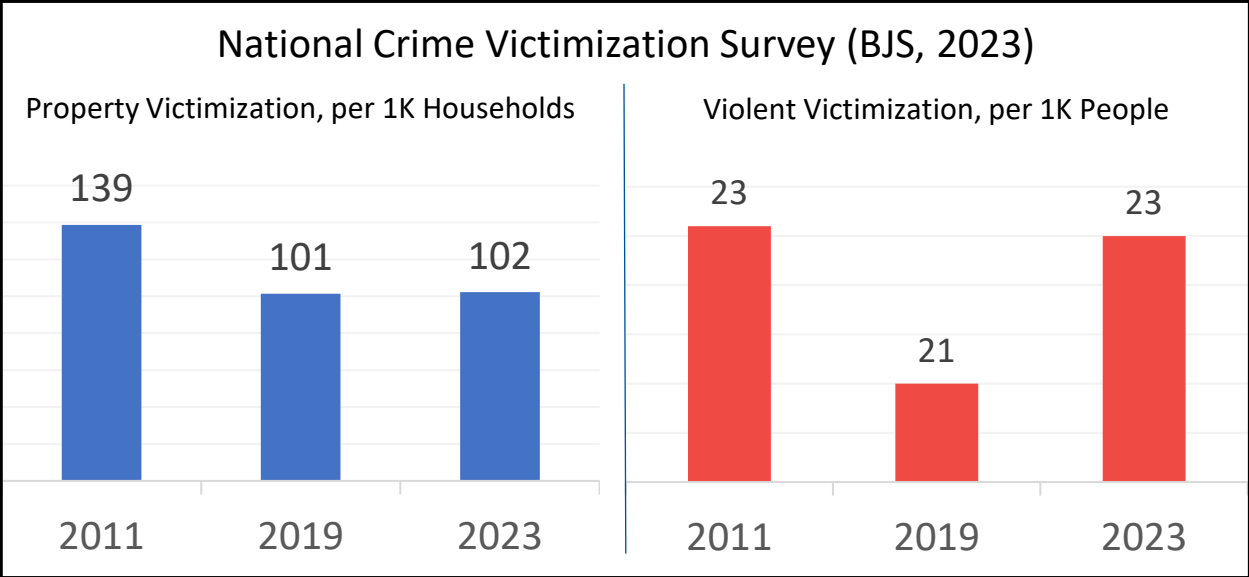
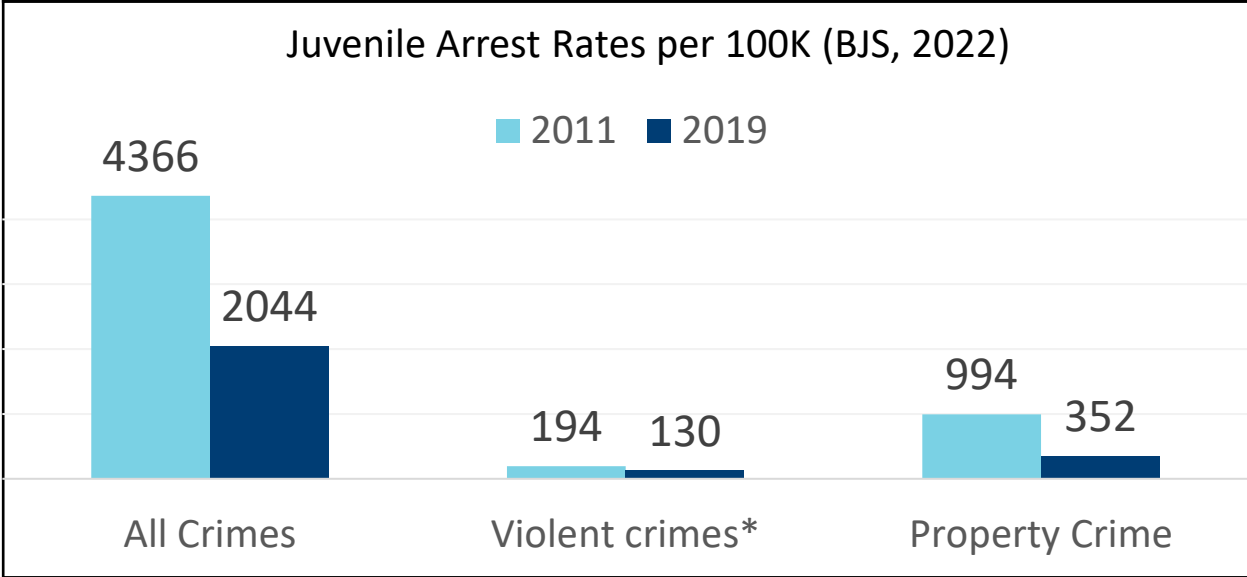
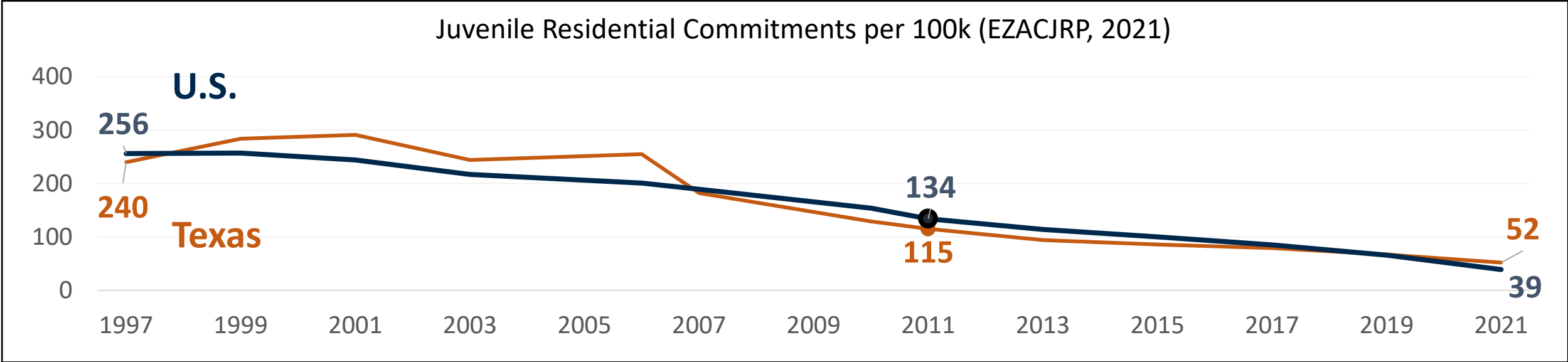
Texas
Juvenile
Probation
Commission

2011 (S.B. 653, 2011)

Create unified JJ system through:

1. Using community and family-based programs
2. Promoting effective rehabilitation programs
3. Operating state facilities to rehabilitate those who can't be served in another setting

Declining Juvenile Residential Commitment Rates



Development of Regionalization



1949

1981



Texas
Juvenile
Probation
Commission

2011 (S.B. 653, 2011)

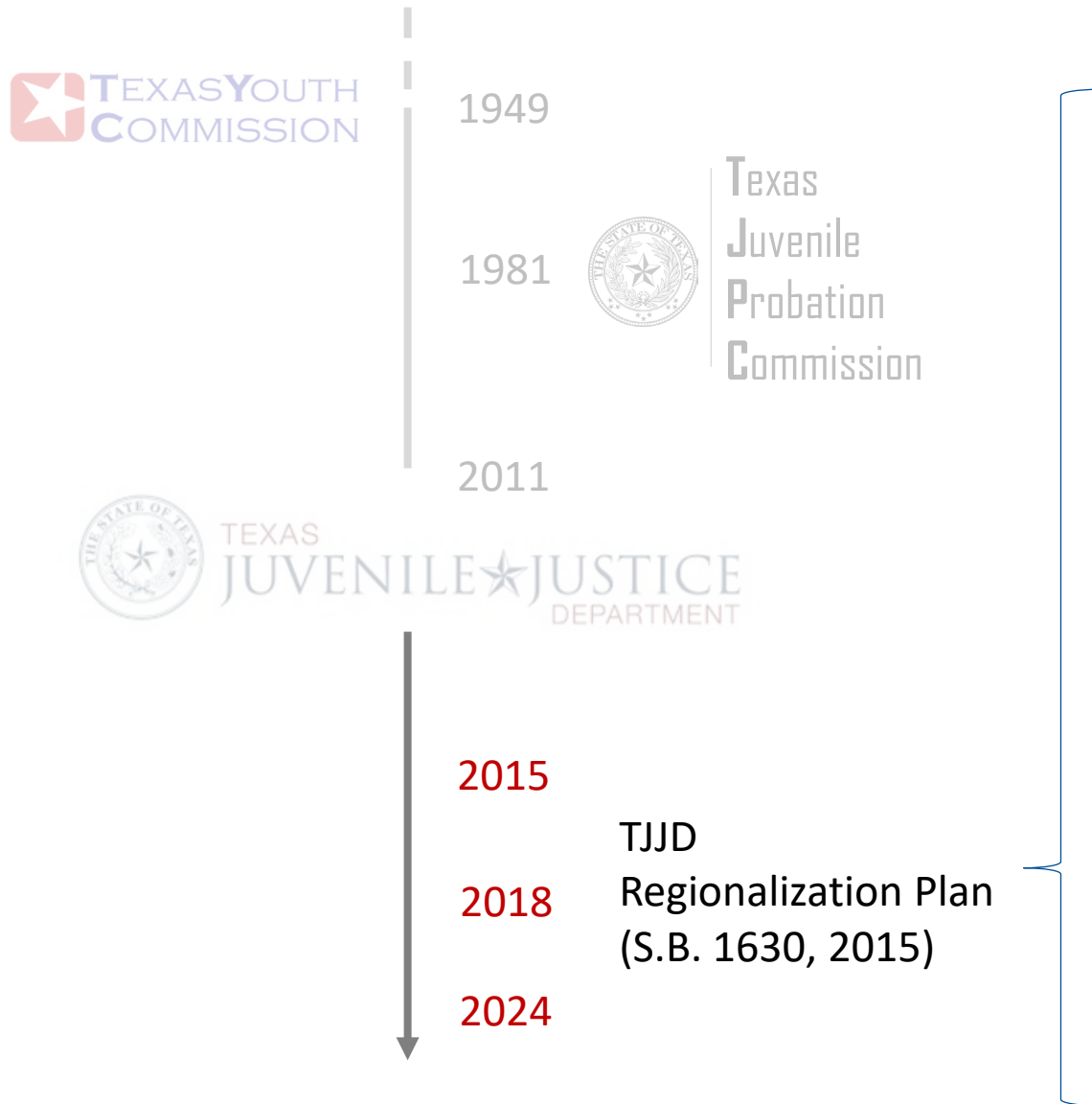


TEXAS
JUVENILE JUSTICE
DEPARTMENT

Abolished TYC & TJPC; Create unified JJ system through:

1. Prioritizing the use of community-based or family-based programs...
2. Promoting the use of programs... most effective in rehabilitating youth
3. Operating state facilities to effectively house and rehabilitate the youthful offenders that cannot be safely served in another setting
4. Accountability, quality, consistency, & transparency
5. Cooperative agreements between state & local gov'ts

Regionalization Today

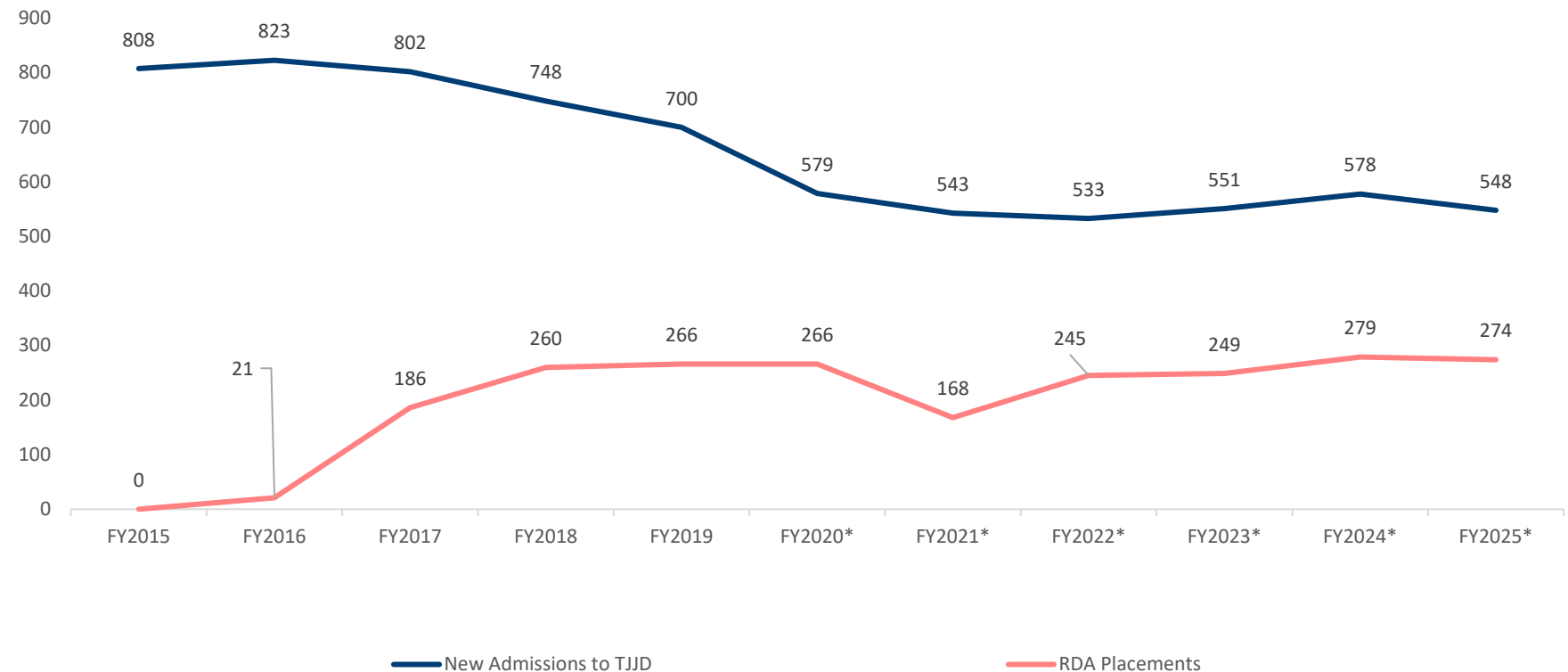


Established priority populations for diversion

- 10-14 years old
- Serious mental illness and/or developmental/intellectual disability
- Nonviolent-offenses;
- Low to moderate risk levels for re-offense
- "Clear Concern" on the CSE-IT
- ≥ 4 Adverse Childhood Experiences
- Parenting
- Females with a specialized treatment need
- Older youth in need of vocational/educ. services
- Substance abuse need
- Sp.Ed. Services

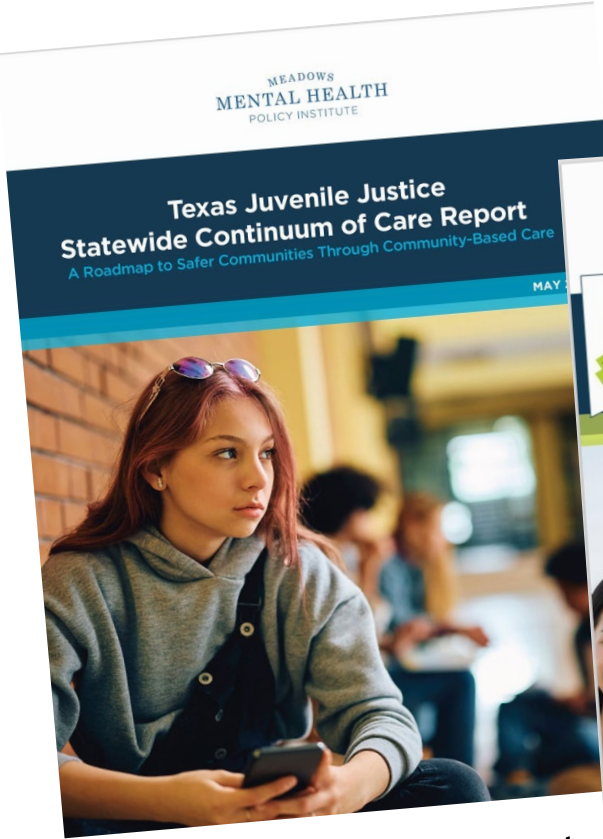
FY15 to FY25 TJJD Commitment and Diversion Efforts

- Regional Diversion Alternatives (RDAs) started in June of FY2016
- Residential Expansion (RE) started in FY2018
- COVID affected FY2020 and FY2021

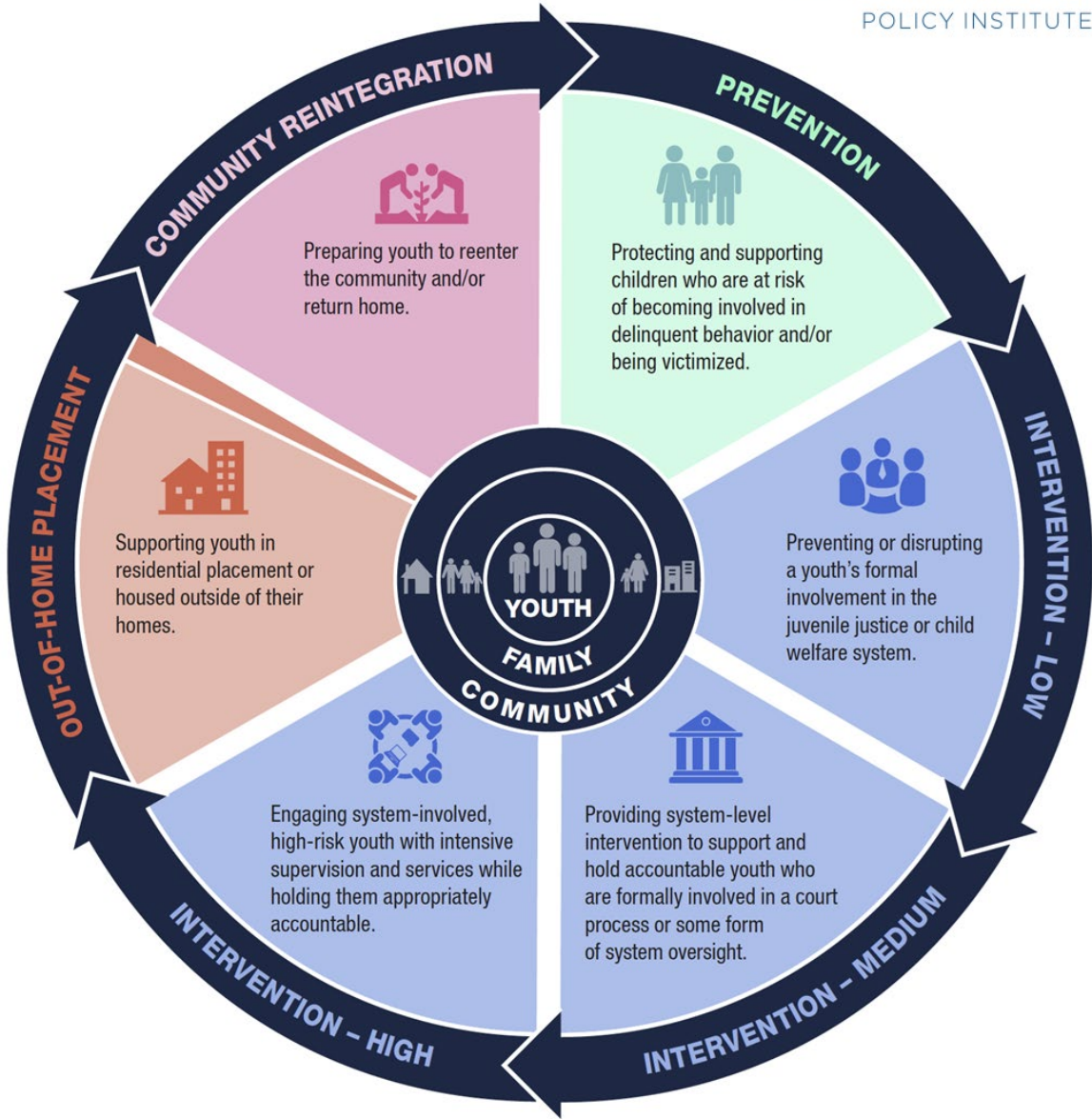
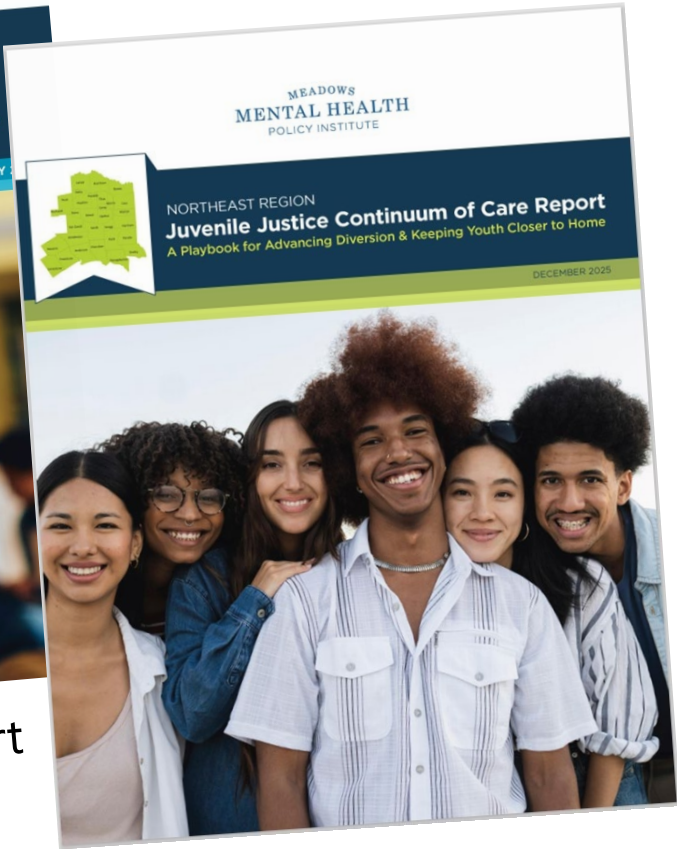


Continuum of Care Communities

7 Regional Playbooks



Statewide CoC Report



Continuum of Care Coordinators

Core Functions

- Continuum of care development
- Integration of services and systems of care
- Complex Case Consultation
- Hard to Place Youth
- Family Reentry Support Services
- DFPS Liaison for State facility and Parole youth
- DSA Grant Support and Monitoring
- RDA Application Review complex needs

Statewide
Manager



Ally Matteson, LCSW-S,
TBRI-Practitioner

Southeast



Gabriel Grady, LMSW

Central



Kim White, MA

Northeast



Nathan Longoria

North



Marisol Febles-
Sanchez, LMSW, LCPAA

South



Patty Garza, LMSW

Panhandle



Shelby Hatch, Ph.D., LCDC

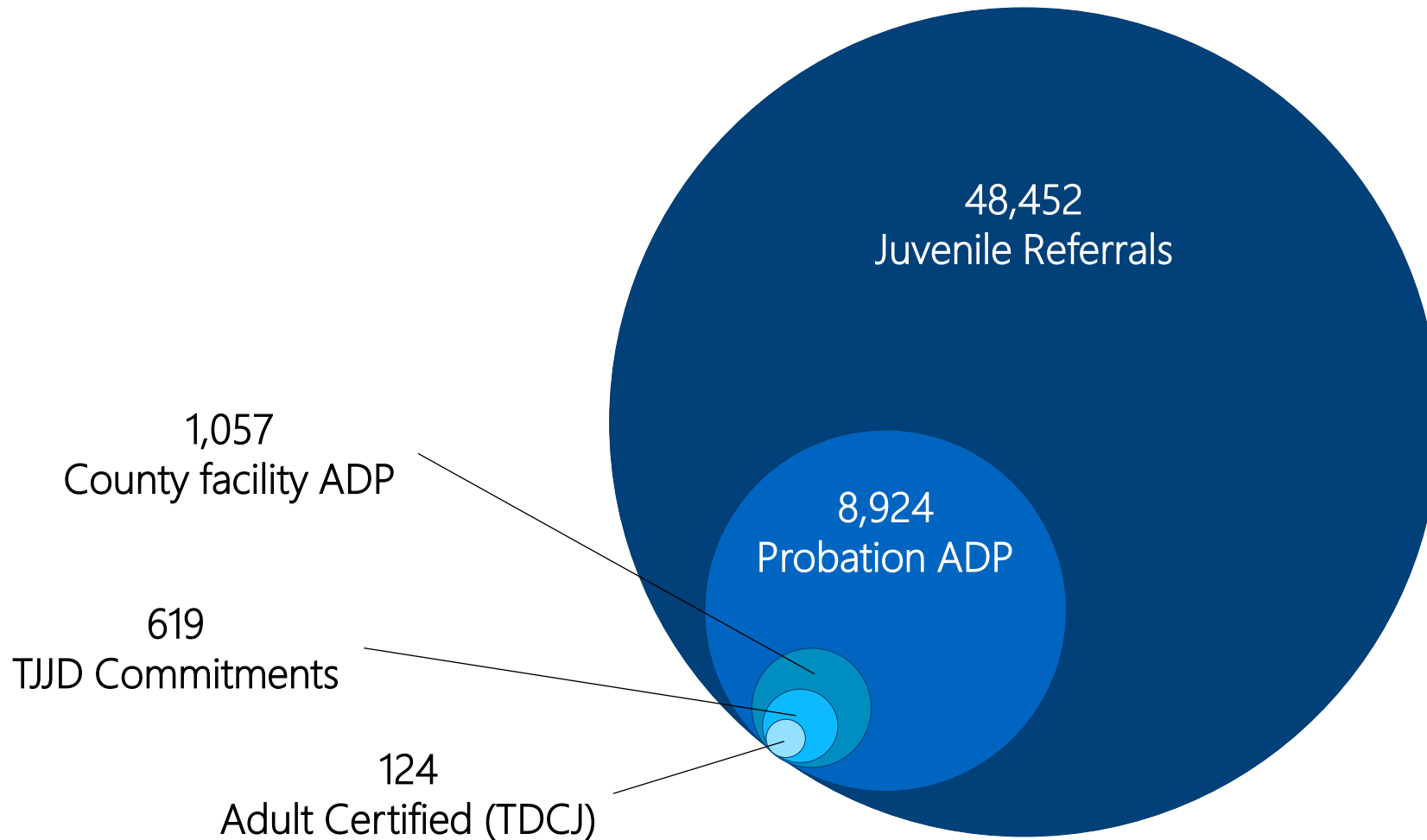
West



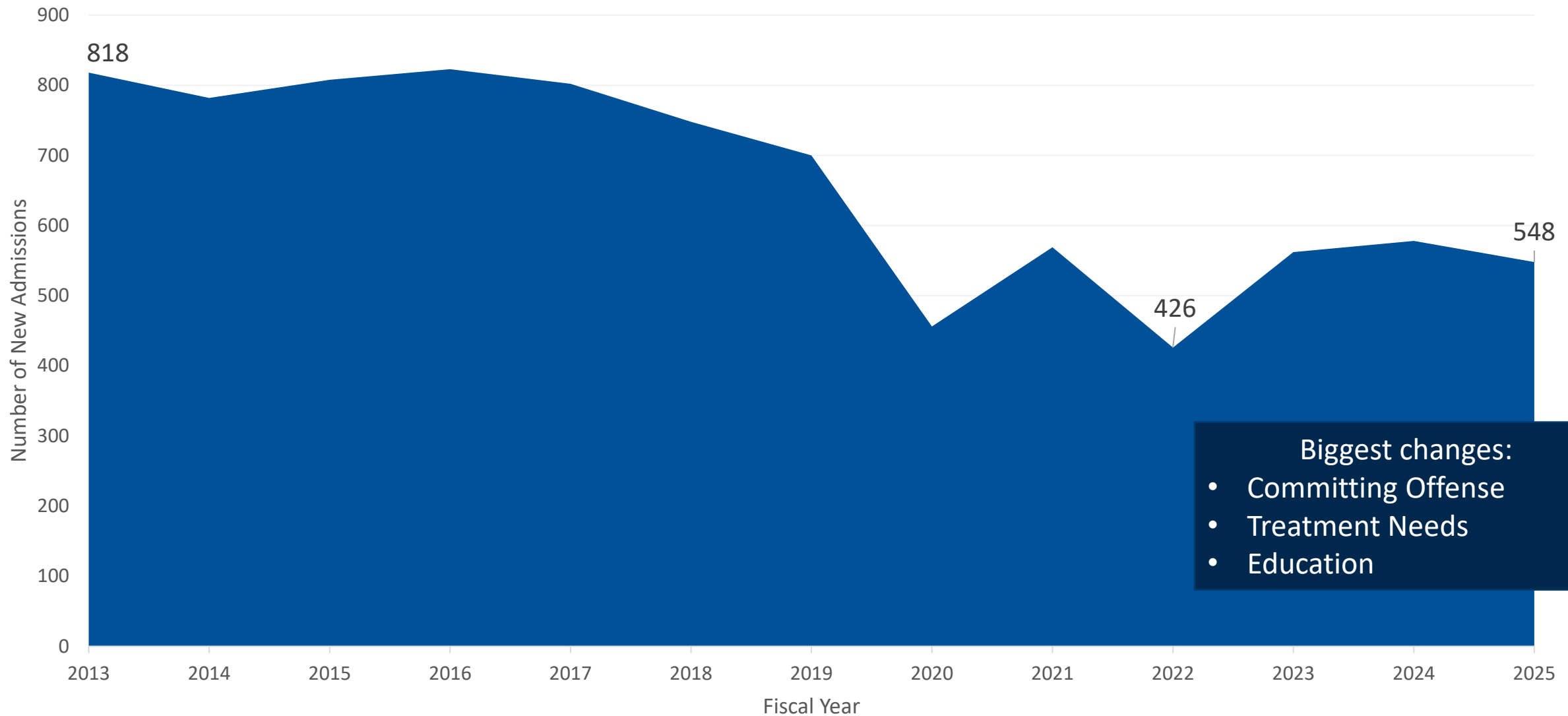
Charlene Quinones, MA

Texas Juvenile Justice Trends

1% of Texas juvenile population received referrals in FY2025
1% of those referrals were sent to TJJD or TDCJ



TJJD New Admissions Over Time



Big Change #1: Offense Severity & Sentencing

Nearly all of TJJD's top 10 committing offenses are made up of crimes against people

Top 10 Committing Offenses

FY 2013
BURGLARY
AGGRAVATED ASSAULT
ASSAULT
AGGRAVATED ROBBERY
AGGRAVATED SEXUAL ASSAULT
UNAUTHORIZED USE OF VEHICLE
ROBBERY
INDECENCY WITH A CHILD
EVADING ARREST
UNLAW.POSS.OF CONTROL.SUBS.

FY 2025
AGGRAVATED ROBBERY
AGGRAVATED ASSAULT
AGG ASSAULT w/DEADLY WEAPON
MURDER
ASSAULT
ASSAULT PUBLIC SERVANT
UNAUTHORIZED USE OF VEHICLE
AGGRAVATED SEXUAL ASSAULT
AGG SEXUAL ASSAULT CHILD
DEADLY CONDUCT DISCHARGE FIREARM

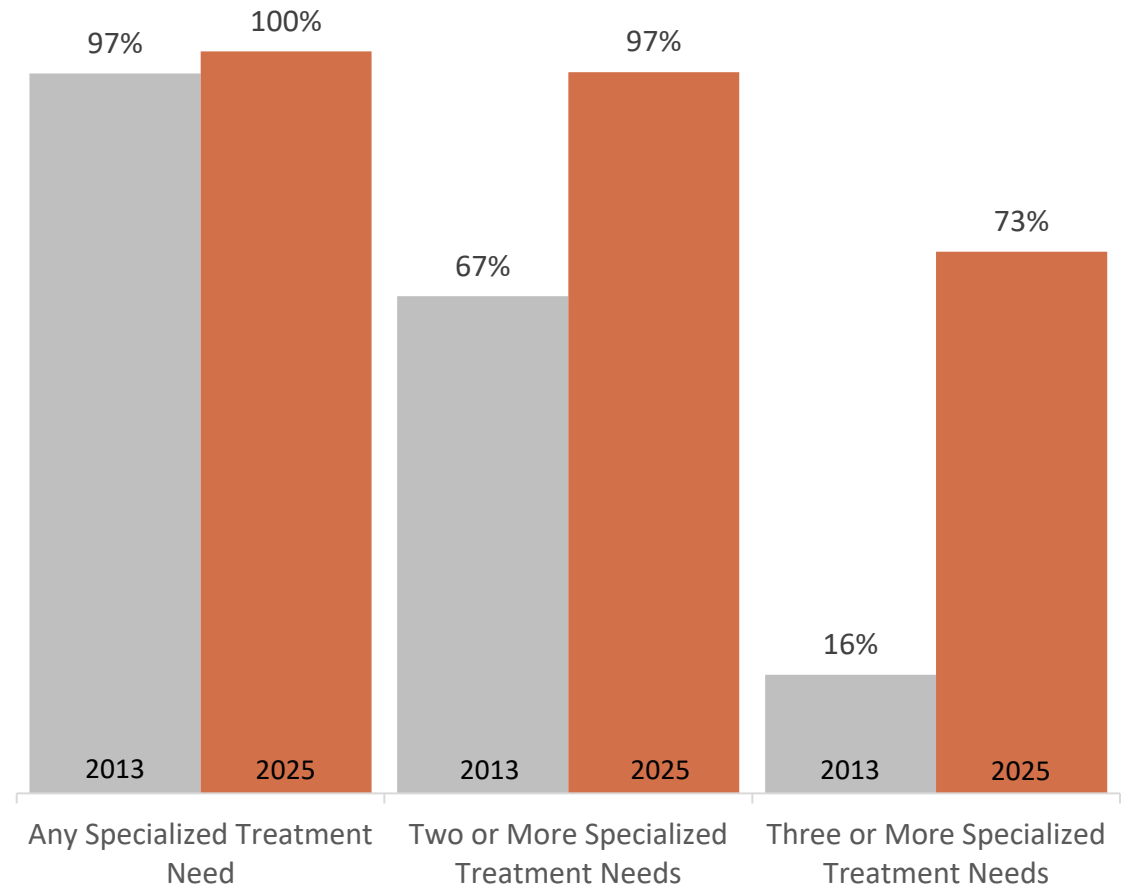
Big Change #2: Treatment Needs



Four Specialized Treatment Types:

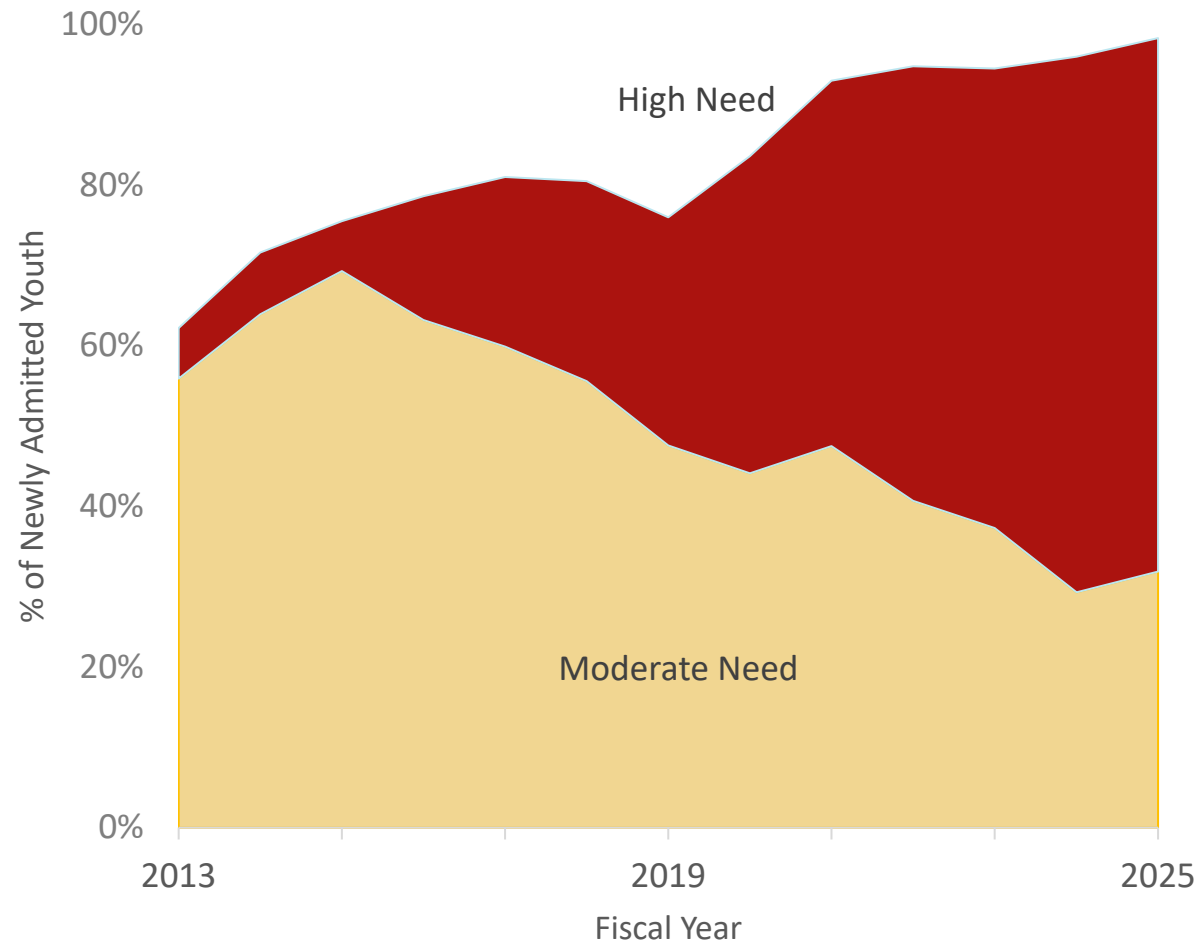
- Capital & Serious Violent Offender (CSVOT)
- Mental Health
- Substance Use
- Sexual Behavior

The percentage of youth with specialized treatment needs has increased

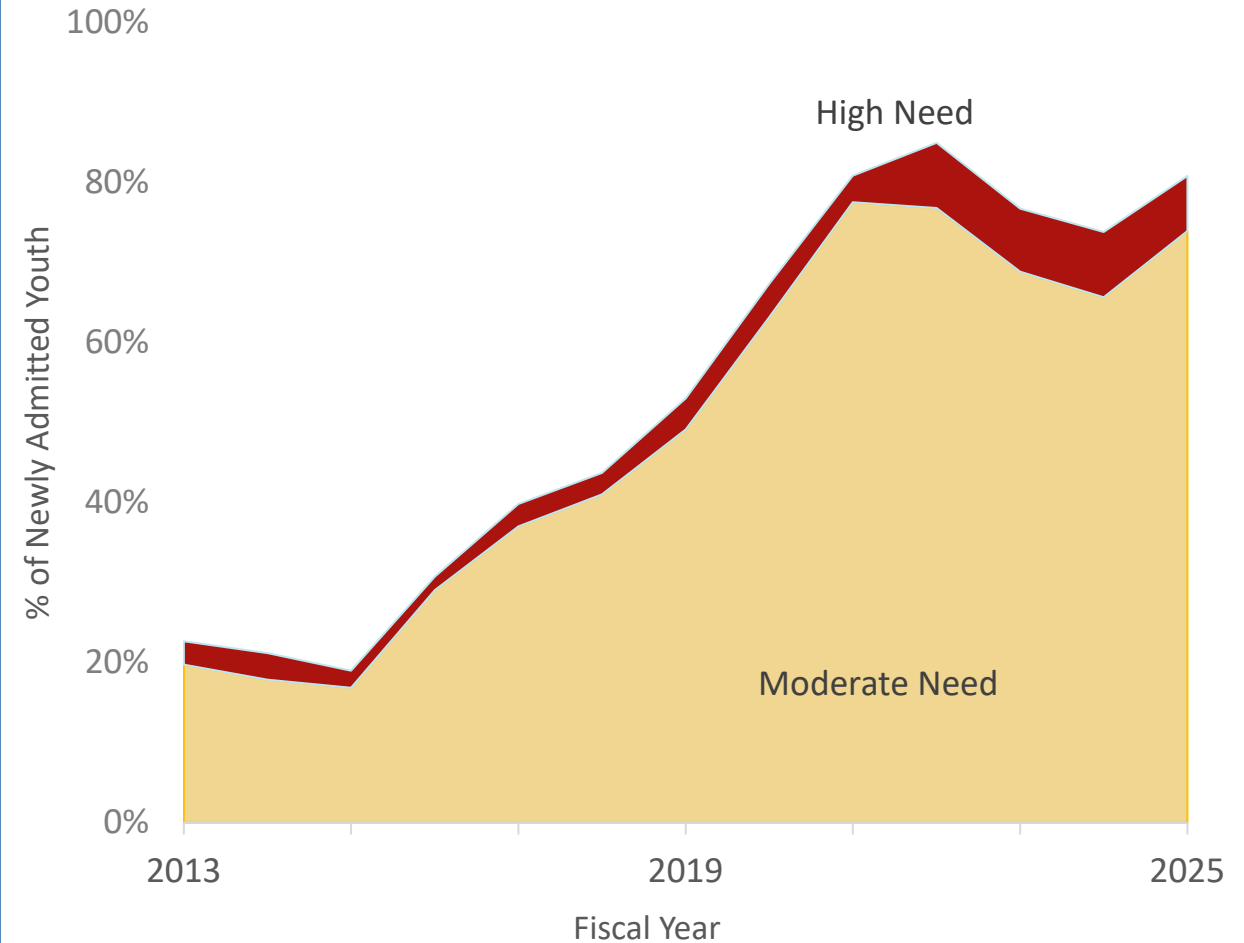


Big Change #2: Treatment Needs

Serious violent offender treatment needs have risen



Mental health treatment needs have risen



Big Change #2: Treatment Needs – Mental Health Diagnoses & Medication

Mental health diagnoses & psychotropic medication usage is prevalent

Description	Youth	% of Current Pop
Impulse Control & Conduct Disorders	921	93%
ADHD	439	44%
Trauma- and Stressor- Related Disorder	364	37%
Posttraumatic Stress Disorder	171	17%
Disruptive Mood Dysregulation Disorder	170	17%
Unspecified Depressive Disorder	128	13%
Borderline intellectual functioning	117	12%
Unspecified Anxiety Disorder	66	7%
Generalized Anxiety Disorder	35	4%
Major Depressive Disorder, Moderate, Recurrent episode	30	3%
Youth with 2+ Co-occurring Mental Health Diagnoses	846	85.5%
Youth with 3+ Co-occurring Mental Health Diagnoses	583	58.9%

62% Have been prescribed **antidepressants**

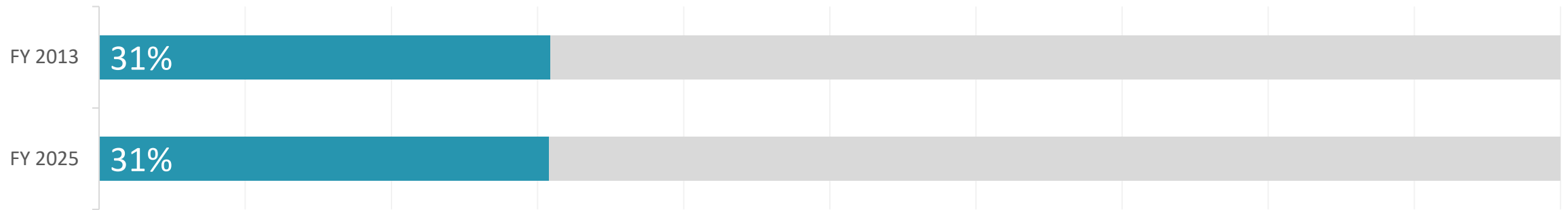
60% Have been prescribed **ADHD medication**

51% Have been prescribed **antipsychotics**

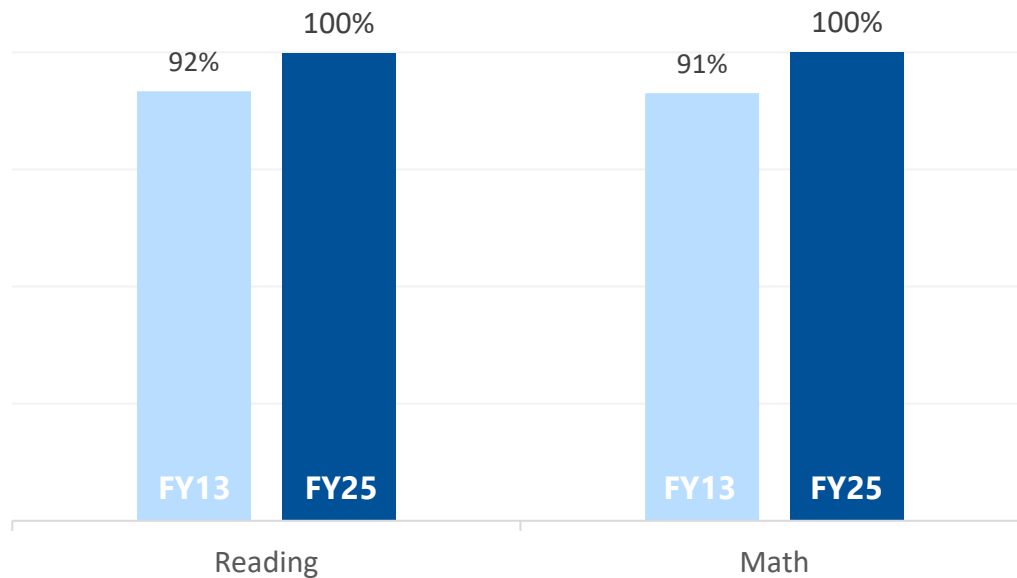
Big Change #3: Education

Educational deficits have increased and continue to be a major issue.

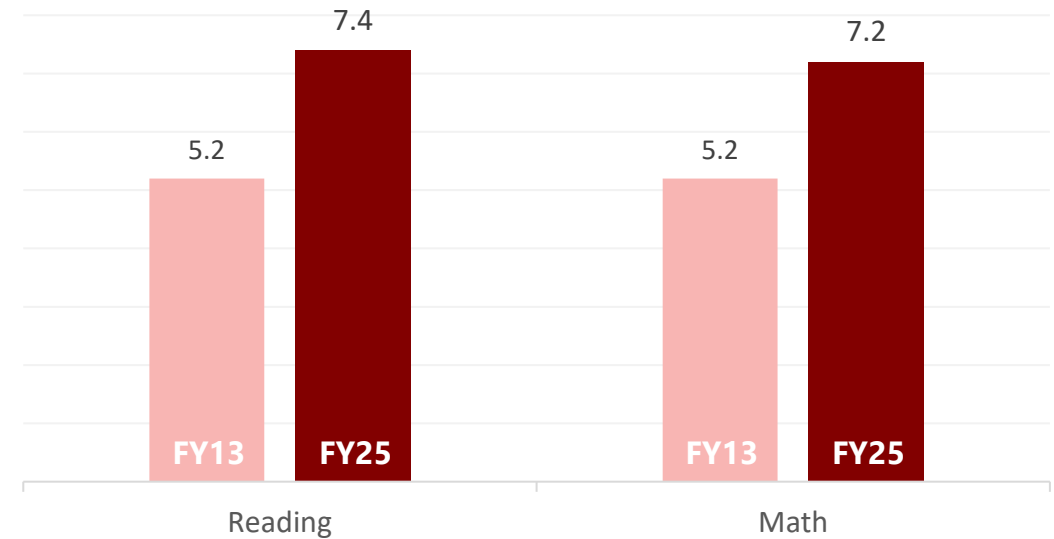
New Admissions by Special Education Eligibility



Achievement below Grade Level

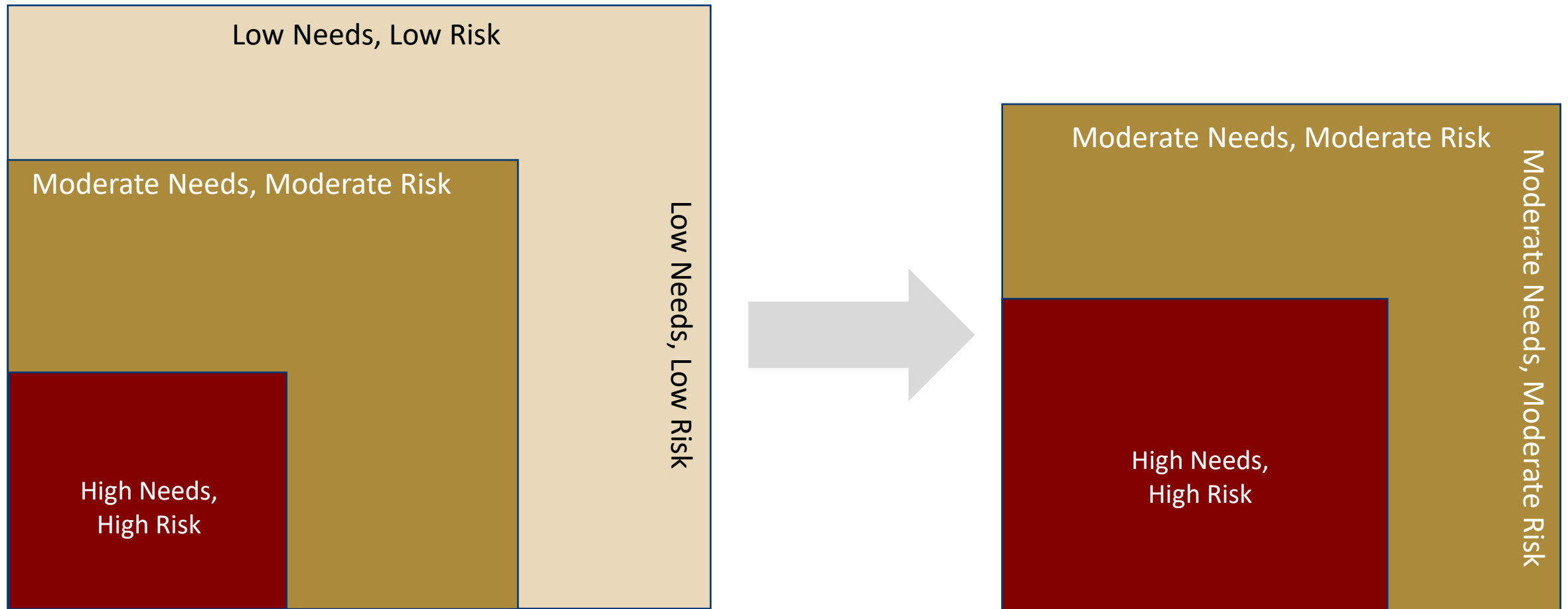


Median Years Below Grade Level



Population Shift Summary

Decrease in population, increase in proportion of youth who are high and moderate needs/risk.





Secure Facility Services

RNR Principle

Risk

Match the intensity of service and supervision to the youth's risk to re-offend

CAUTION -Leave low-risk alone!



Need

Interventions should target needs (e.g., dynamic risk factors)



Responsivity

Interventions must be selected that account for the characteristics of the youth, his/her individual circumstances, strengths, and challenges



TJJD Education

Education

- Credit recovery
- High school diploma
- GED certificate
- College credits
- College placement

Workforce Development (current)

- Welding (GNS, GID, Mart)
- Technology (GNS, Mart, Evins)
- Horticulture (GNS, GID, Mart, Evins)
- Career prep (all locations)
- Construction (GID, Mart)
- Auto body (GID)
- VR auto mechanics (Evins)
- Woodshop (Evins)
- Agriculture mechanics (Mart)

Workforce Develop't (Planned)

- Construction
- Culinary arts
- Auto tech
- Industrial maintenance
- 3D modeling
- Graphic design
- Robotics
- Family/consumer science
- Small engine repair
- Animal husbandry

DBT IN JUVENILE CORRECTIONAL SETTINGS

BUILDING SKILLS. CHANGING BEHAVIOR. TRANSFORMING LIVES.



SKILLS TODAY.
SAFETY TODAY.
SUCCESS
TOMORROW.

DBT equips youth with practical skills to manage emotions, make better choices, and build a life worth living.

REFORM INITIATED



Moving from compliance based treatment to **behavioral change**.

UNDERSTANDING TRAUMA



We understand trauma as a **reason** behind behavior, but not an **excuse** for behavior.

RISK-NEED-RESPONSIVITY



We focus on the right interventions for the **right youth**, delivered the **right way**.

TRUST-BASED RELATIONAL INTERVENTION



Connection, empowerment, and correction work together to create **safety** and promote **change**.

CO-REGULATION THE SAFE, STABLE ADULT



Staff serve as **safe, stable adults** who **co-regulate**—helping youth feel safe, calm, and ready to learn.

DBT TEACHES YOUTH SKILLS FOR LIFE



MINDFULNESS

Be present.
Stay focused.
Make wise choices.



DISTRESS TOLERANCE

Handle crisis without making it worse.



EMOTIONAL REGULATION

Understand and manage emotions.



INTERPERSONAL EFFECTIVENESS

Build healthy relationships.
Communicate effectively.



THE GOAL

Safer environments.
Stronger relationships.
Better outcomes.
Brighter futures.



Better skills lead to better choices. Better choices lead to safer communities.

THAT'S TRANSFORMATION.



TJJD TREATMENT PROGRAMMING

EVIDENCE-INFORMED. TRAUMA-RESPONSIVE. YOUTH-CENTERED.



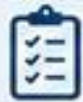
SUBSTANCE USE SERVICES

Building a foundation for lasting recovery.



Focus

Address substance use and co-occurring mental health needs to promote sobriety and pro-social decision making.



Services Include

- Screening & Assessment
- Individual & Group Counseling
- Relapse Prevention
- Family Engagement
- Aftercare Planning



Goal

Empower youth with the skills and support needed for a substance-free future.



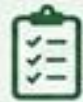
SEXUAL BEHAVIOR TREATMENT PROGRAM

Promoting accountability, safety, and healthy relationships.



Focus

Reduce risk of sexual harm by addressing behavior, attitudes, and thinking patterns that contribute to sexual offending.



Services Include

- Specialized Assessment
- Evidence-Based Treatment Groups
- Empathy & Victim Awareness
- Healthy Relationship Skills
- Relapse Prevention



Goal

Reduce recidivism and build the skills needed for safe, responsible behavior in the community.



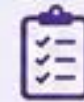
CAPITAL & SERIOUS VIOLENT OFFENDER PROGRAM

Targeted intervention for the highest risk youth.



Focus

Provide intensive, individualized treatment for youth with a history of serious violence or capital offenses.



Services Include

- Comprehensive Risk Assessment
- Intensive Cognitive-Behavioral Treatment
- Anger & Violence Management
- Trauma-Informed Care
- Reentry Planning & Support



Goal

Enhance public safety by reducing reoffending and preparing youth for successful reintegration.



Our treatment programs are designed to change lives, reduce recidivism, and support youth in becoming productive members of their communities.

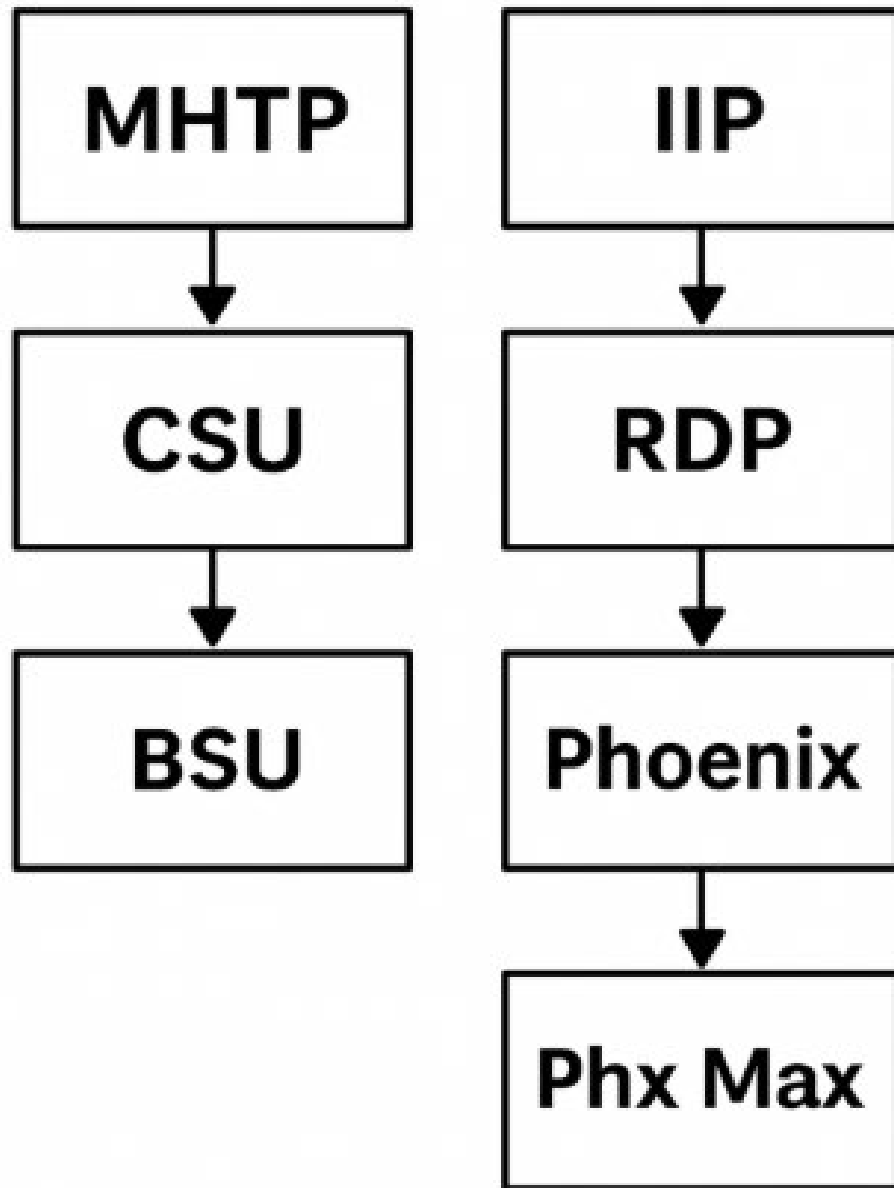


TJJD
TEXAS JUVENILE
JUSTICE DEPARTMENT

Responsivity Assessment Manual



**FOR TREATMENT PLANNING & TREATMENT DELIVERY
FOR JUSTICE-INVOLVED ADOLESCENTS**



Special Programs

Mental Health Continuum

Higher ratio programs specializing in individualized interventions for youth who suffer from severe mental or behavioral health issues

Violence Intervention Continuum

High ratio programs for youth who have an immediate need for intensive treatment for an aggressive target behavior.

EGREGIOUS BEHAVIOR PROTOCOL

1. Establish safety

2. Remove from programming
(monitor based on risk for harm)

3. Encourage recommitment
(to safe, skillful behavior)

4. Chain analysis

5. Identify skills for future situations

6. Demonstrate skills
(or begin to learn skills)

7. Repair damage done

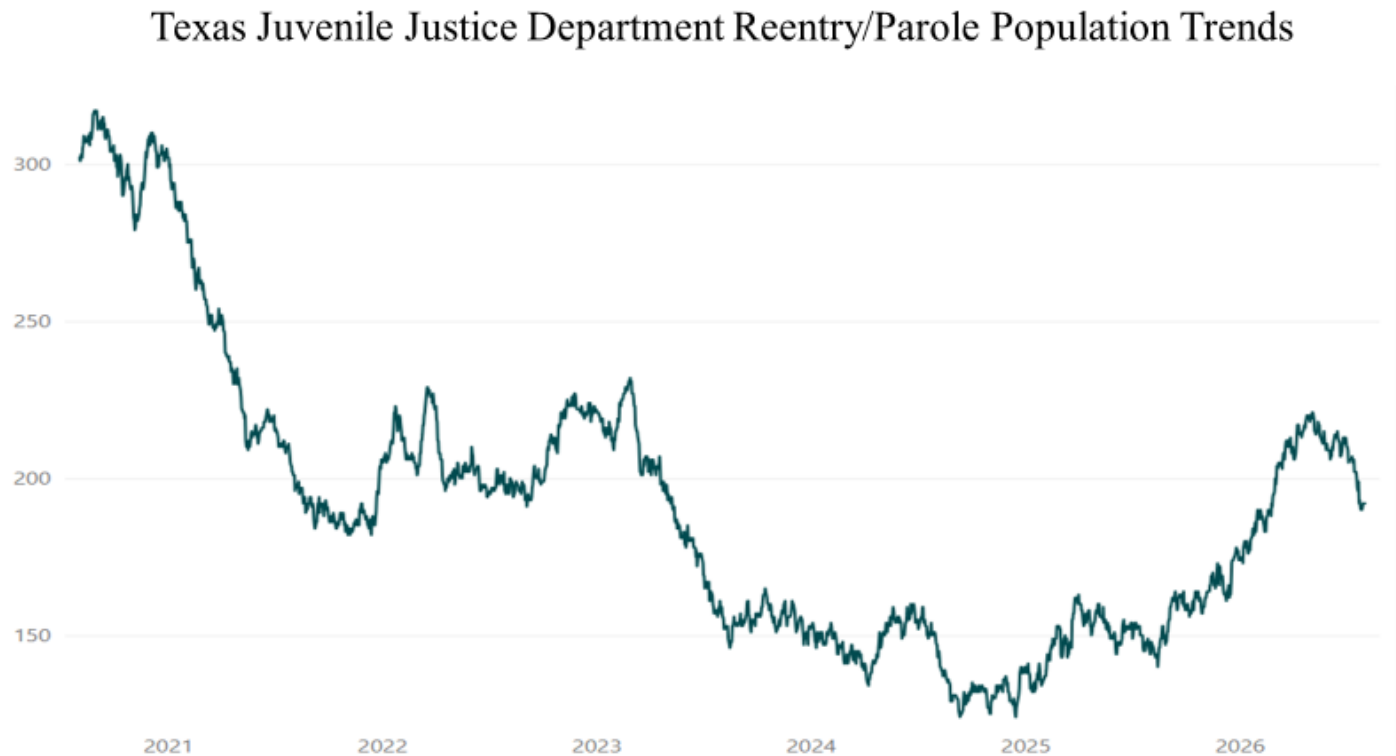
8. Return to regular programming



Designed by Freepick

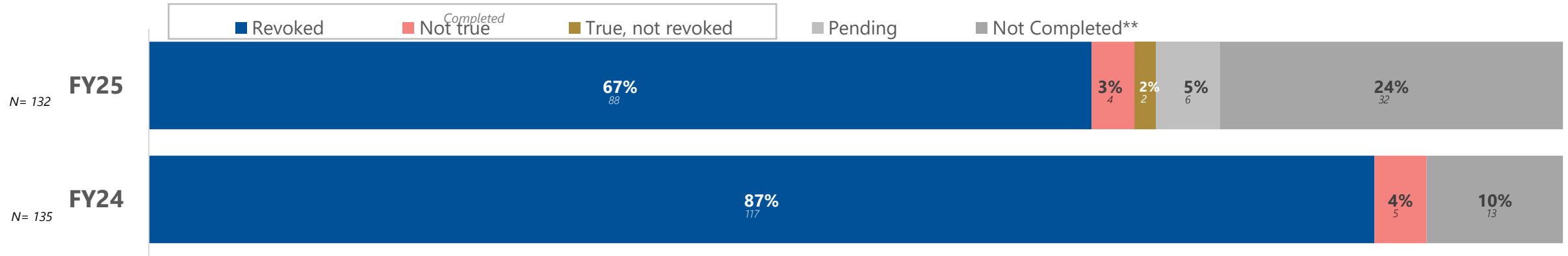
Parole and Reentry Services

- Population under parole supervision steadily increasing.
- Average length of time under parole supervision is just under six months.
- Emphasis on balancing responsivity and community safety through a continuum of interventions.
- Utilizes EPICS model.
- Strong collaboration with county juvenile probations departments and law enforcement.

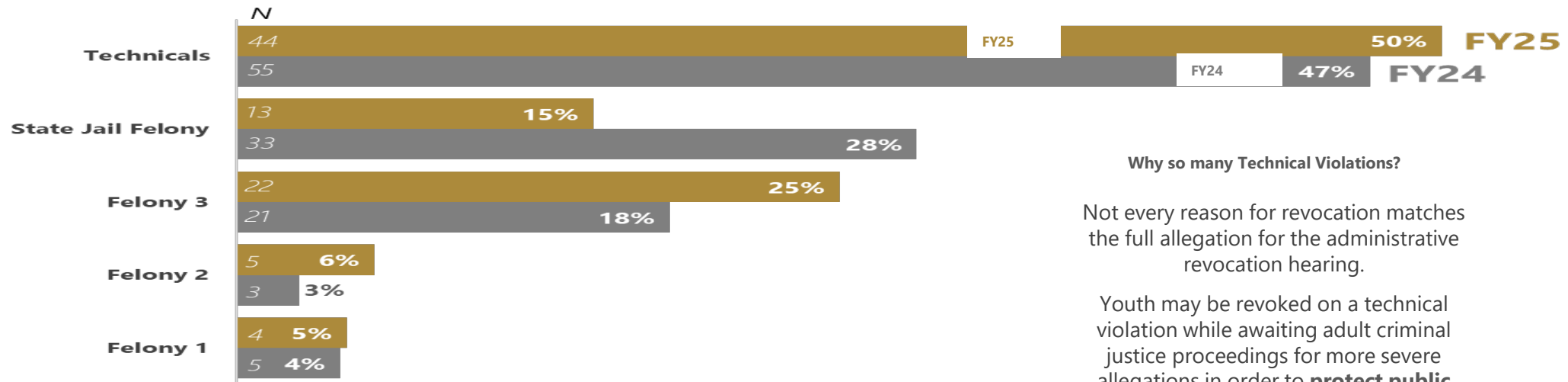


TJJD Parole Revocation Hearing Outcomes

FY24 and FY25*



Reason for Revocation



Why so many Technical Violations?

Not every reason for revocation matches the full allegation for the administrative revocation hearing.

Youth may be revoked on a technical violation while awaiting adult criminal justice proceedings for more severe allegations in order to **protect public safety**.

*FY25 Data is from 9/1/2025 thru 7/22/2025

**Not Completed = DA deferrals, adult charges completed before hearing, lack of evidence, exhaust community resources

The Limits of Recidivism Alone

Recidivism alone does not tell us TJJD treatment program effectiveness

- Many factors leading to arrest: state of the world, youth attitudes, social milieu, family life, law enforcement activity.
- Example: recidivism declined FY20-21, but in part due to reduced law enforcement activity on lesser offenses.
- However, recidivism did not increase substantially in FY23 despite a major increase in youth acuity.

Recidivism alone does not measure youth success

- Chronically homeless and unemployed + no re-offense = “successful”
- Incarcerated on a serious violent offense, successfully treated, reoffends on misdemeanor theft = “failure”
- New measure in the works on relative level of re-offense
(i.e. was the re-offense more or less severe than the initial)



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2026 JCJJ

presented by



SUPREME COURT OF TEXAS PERMANENT JUDICIAL
COMMISSION FOR CHILDREN, YOUTH AND FAMILIES

Thank you!