

2025 Gender Responsive Connecticut Landscape Analysis

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Table of Contents

	Page
I. Executive Summary	2
II. Previous Gender Responsive Work and Legislation in Connecticut	4
Defining “Gender Responsive” And “Gender Responsive Practices”	
Previous Work and Legislation	
III. National Best Practices and Existing Work	8
Best Practices	
Existing Work and Practices	
IV. Data Analysis of Girls in Connecticut’s Child Welfare and Juvenile Justice Systems	
Data From the Department of Children and Families	12
Data From the Judicial Branch Court Support Services Division	17
Data From the Department of Corrections	33
V. Level Setting on Intellectual and Learning Disabilities	34
Data From the Department of Children and Families	36
Data From the Judicial Branch Court Support Services Division	43
VI. Barriers	43
VII. Looking Forward	44
VIII. Glossary	45

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I. Executive Summary

The Office of Juvenile Justice and Delinquency Prevention (**OJJDP**) encourages the investment in girls as they become an ever-increasing population in the juvenile justice and criminal justice systems.¹ Girls in the juvenile justice system suffer from **comorbid concerns** that stretch across their **emotional, behavioral, and physical health**.² Compared to their male counterpart, juvenile justice involved girls struggle with a higher rate of comorbid mental health and sexual misconduct concerns.² Additionally, **girls who enter the juvenile justice system are likely to have suffered sexual abuse, violence, and/or other trauma, as well as child welfare involvement**.² In their assessment of juvenile justice involved girls, the OJJDP found that many of the girls had been placed in a foster or group home and had been moved through the child welfare system.¹ Spanning across genders, youth involved in the child welfare system are at risk for future juvenile justice involvement³, thus being labeled “at-risk.” **After their entrance to the juvenile justice system, a system designed around boys, girls are faced with a number of additional hurdles**.² Specifically, **many juvenile justice involved girls have not received “trauma informed, gender responsive support”** that they need, leading to long-lasting negative outcomes.²

Girls with juvenile justice involvement are not an equal representation of the female population. **Girls of color are more likely than White girls** to be involved with the juvenile justice system.² **Girls with a diagnosed disability under the Individual with Disabilities Education Act (IDEA), and LGBT or gender nonconforming girls** are overrepresented in the juvenile justice system as well.² Age is also an important element to consider, as **girls of different ages have different needs, even if they still fall within the adolescent development period**.

During the 2024 Connecticut legislative session, **Public Act 24-139⁴ was enacted** and charged the Juvenile Justice Policy and Oversight Committee (JJPOC) with the **development of a gender responsive landscape analysis**. This landscape analysis, in order to be compliant with this public act, must accomplish seven tasks:

1. **“Define** ‘gender responsive’ and ‘gender responsive practices’
2. **Receive and consider** input from youth, families, and communities directly impacted by any gaps in gender responsive work.

¹ Office of Juvenile Justice and Delinquency Prevention. (1999). Juvenile justice: Investing in girls: a 21st century strategy. *Juvenile Justice*, 5(1).

² Patrick, K., & Chaudhry, N. (2017). Let her learn: Stopping school pushout for girls involved in the juvenile justice system. *National Women’s Law Center*, 1-3.

³ Cutuli, J. J., Goerge, R. M., Coulton, C., Schretzman, M., Crampton, D., Charvat, B. J., Lalich, N., Raithel, J. A., Gacitua, C., & Lee, E. L. (2016). From foster care to juvenile justice: Exploring characteristics of youth in three cities. *Children and Youth Services Review*, 67, 84–94. <https://doi.org/10.1016/j.childyouth.2016.06.001>

⁴ Substitute House Bill No. 5508 – Public Act No. 24-139: AN ACT CONCERNING RECOMMENDATIONS FROM THE JUVENILE JUSTICE POLICY AND OVERSIGHT COMMITTEE. *Connecticut General Assembly*. <https://www.cga.ct.gov/2024/act/Pa/pdf/2024PA-00139-R00HB-05508-PA.PDF>

3. **Review national best practices**, including approaches and types of services provided and system considerations.
4. **Review previous work and legislation** concerning gender responsive work.
5. **Identify any gaps** in gender responsive work resulting from system or programmatic changes.
6. **Review existing work and practices** on gender responsiveness among agencies and community providers.
7. **Review data**, broken down by race, ethnicity, gender, age, location and level of system involvement, including the type of offenses committed by youth and how such offenses are handled within the juvenile justice system.”

The current landscape analysis meets provisions I, III, IV, V, VI, and VII. **Provision II will be met through an addendum shortly following the release of this landscape analysis by Fall 2026.** The addendum will contain an analysis of survey responses from youth, families, and communities directly impacted by any gaps in gender responsive work. This report is a product of the Gender Responsiveness Subgroup as part of the larger Incarceration Workgroup.

Other female-focused legislation includes House Bill No. 7250. Pursuant to House Bill No. 7250⁵, the Department of Children and Families (DCF) is required to present annually to the JJPOC beginning July 1st, 2025 on its implementation of the Specialized Trauma-Informed Treatment Assessment and Reunification (STTAR) Enhancement Plan, which was released in March 2024.⁶ The enhancement plan was developed to address the recent concerns regarding these programs, previously known as STAR (Short-Term Assessment and Respite). This legislation and the developed plan helped inform this current landscape analysis.

This landscape analysis is to serve as a snapshot of the experience of girls within the child welfare and juvenile justice systems in Connecticut. In addition to the Connecticut legislation that has passed in recent years, this report analyzes the **profile of girls involved in the juvenile justice and child welfare systems, including race, ethnicity, age, location, and intellectual/learning disability diagnosis, among other characteristics.** For the purpose of this report, “girl” or “girls” refer to any youth that identifies as female.

⁵ Substitute House Bill No. 7250: AN ACT IMPLEMENTING THE RECOMMENDATIONS OF THE JUVENILE JUSTICE POLICY AND OVERSIGHT COMMITTEE. *Connecticut General Assembly*.
<https://www.cga.ct.gov/2025/TOB/H/PDF/2025HB-07250-R02-HB.PDF>

⁶ Connecticut Department of Children and Families. (2025). STARR Home Enhancement Plan Update for JJPOC.
<https://portal.ct.gov/dcf/-/media/dcf/dataconnect/legislative-reports/2025/sttar-report-for-jjpod-07-01-2025-final.pdf?rev=781de7306fc54c32b29d0c6133e7bb07&hash=5D52FD121407C682BAA361D1E6DBA1DC>

II. Previous Gender Responsive Work and Legislation in Connecticut

Defining “Gender Responsive” and “Gender Responsive Practices”

Gender responsive programming is defined as a “**multidimensional, strengths-based approach based** on theoretical perspectives that consider **girls’ pathways** into the system and provide interventions that address social, cultural, and psychological factors.”⁷ In 1998, the Office of Juvenile Justice and Delinquency Prevention (OJJDP) released a report detailing recent gender responsive reforms throughout 25 states.⁸ Outlined in the report were **five guidelines**: **(1)** programs should be all female whenever possible; **(2)** girls should be treated in the least restrictive environment whenever possible; **(3)** programs should be close to the girls’ homes in order to maintain family relationships; **(4)** programs should be consistent with female development and stress the roles of relationships between staff members and girls; and **(5)** programs should address the needs of parenting and pregnant teens.⁸ The limitation of implementing these recommendations, though, was and continues to be, a lack of commitment from funding agencies, particularly state funding and support.⁹ Still, **many states pushed forward, paving the way for gender responsive reforms. Connecticut was an early leader.**

Previous Work and Legislation

The early 2000s marked a transformation in gender responsive efforts in Connecticut across the juvenile justice system which spanned three agencies, **(1)** the State of Connecticut Judicial Branch Court Support Services Division (JB-CSSD), which handled juvenile detention, juvenile probation, and services in the community for status offenders, programs for juvenile probationers, and residential facilities as an alternative to incarceration; **(2)** the Department of Children and Families (DCF), which handled juveniles adjudicated delinquent and court ordered to the Connecticut Juvenile Training School (formerly Long Lane School); and **(3)** the Department of Corrections (DOC), which handled youth age 14 or older who were transferred to Criminal Court (adult) due to the severity of the charge and convicted for a felony. **Over the course of a decade, the juvenile justice system in Connecticut improved substantially for girls**, with revised policy and practice, improved detention practices, designated and trained gender responsive probation officers, gender responsive parole practices, new assessments, services and interventions, all to meet the needs of court-involved girls and reduce the risk of justice involvement. **In 2001, Public Act No. 01-181¹, enacted into law, required the provision of gender specific programs for justice involved individuals, specifically girls.** JB-CSSD, formerly known as the Office of Alternative Sanctions, was charged with the responsibility of developing such programs that would provide five core services: **(1)** intensive general educational programs with an individual educational plan for each youth; **(2)** specific educational components in the management of anger and nonviolent conflict resolution; **(3)** treatment for chemical dependency; **(4)** mental health screening, assessment, and treatment; and **(4)** sexual offender treatment.¹⁰

⁷ Ryon, S. B., Devers, L. N., Early, K. W., & Hand, G. (2012). Gender responsive probation model outcome evaluation. *The Justice Research Center*.

⁸ Pub. L. No. 102-586, 106 Stat. 4982 (codified as amended at 42 U.S.C. §§ 5601-5681 (2006)); Office of Juvenile Justice & Delinquency Prevention, *Juvenile Female Offenders: A Status of the States Report* (1998)

⁹ Watson, L., & Edelman, P. (2012). Improving the juvenile justice system for girls: Lessons from the states. *Georgetown Center on Poverty, Inequality, and Public Policy*.

Commissioned by JB-CSSD, **the University of Connecticut’s School of Social Work released a report in 2002 that evaluated the state of girls in Connecticut’s juvenile justice system.** This report revealed that girls in Connecticut’s detention centers were often low risk but high need, with 88% of the girls who were adjudicated delinquent and placed at the state’s secure facility for adjudicated youth were status offenders.⁹ **In 2004, Special Act No. 04-5¹⁰ was enacted and established a plan for community-based services for adolescent girls involved in the juvenile justice system.** As a result of this act, DCF collaborated with multiple state agencies and individuals in Connecticut to develop the **“Plan for a Continuum of Community Based Services for Adolescent Females Involved in the Juvenile Court System.”**¹¹ The plan outlined numerous recommendations regarding system reforms, continuum of care reforms, and quality improvement mechanisms.¹² Additionally, a review of services that were available for girls at the time of the report’s completion was provided. A complete outline of these recommendations and practices can be found in the official report.¹²

In 2002, the “Court Involved Girls Study” was conducted. This study informed the Gender Responsive Probation Model. In 2006, JB-CSSD began to pilot the Gender Specific Probation Officer model, later obtaining funding to expand across all juvenile probation offices. This model blended traditional probation work with gender responsive principles, offering probation officers more skills and methods to work effectively with their female clients. Later, DCF trained parole officers in a similar model.

Connecticut continued to pave the way in modern justice system reforms. Early in the 2000s JB-CSSD moved toward a research-based system that integrated evidence-based practices across the service delivery system. Improvements included training all probation and detention staff in Motivational Interviewing, ensuring that new programs had a strong evidence base for reducing the risk of recidivism, integrating strengths-based practices, and implementing trauma informed programs. These changes complimented the gender specific work being done and enhanced the system. In addition, **between 2003 and 2004 Connecticut’s state-operated detention system became part of an elite group of nationally accredited detention facilities.**¹² The three state detention facilities met the standards of the American Correctional Association in May 2003 and the National Commission on Correctional Health Care in 2004.¹³ Along with this impressive designation, a new behavior management approach was implemented, policy changes were made, and cross-system teaming practices were enacted in an effort to keep youth out of detention whenever possible. Lastly, **JB-CSSD launched a training series on working with girls, provided quality assurance, and updated the requirements in contracts to ensure gender**

¹⁰ Substitute House Bill No. 5366 – Special Act No. 04-5: AN ACT ESTABLISHING A PLAN OF COMMUNITY-BASED SERVICES FOR ADOLESCENT FEMALES INVOLVED IN THE JUVENILE COURT SYSTEM. *Connecticut General Assembly*. <https://www.cga.ct.gov/2004/act/sa/2004SA-00005-R00HB-05366-SA.htm>

¹¹ Dunbar, D. (2004). Plan for a continuum of community-based services for adolescent females involved in the juvenile court system. *DCF Girls’ Services Steering Committee*.

¹² Sanctions. (2008). Update.

responsive practices were provided across the service delivery network, including detention.

In 2008, a report outlining program guidelines for girls' services in Connecticut was a part of the Department of Children and Families (DCF) and Judicial Branch Court Support Services Division (JB-CSSD) Girls' Programs Standards and Certification Project.¹³ **The project included comprehensive training for providers.** It offered both education and instruction on how to use the Guidelines as a program assessment tool and a plan to improve the delivery of services. This effort helped to broadly distribute gender responsive principles and practices across dozens of community service providers who received funding from JB-CSSD and/or DCF. **Eight program components** were presented to guide gender responsive program improvements:

1. Philosophy/Conceptual Framework
2. Facility
3. Management and Staffing
4. Program Culture/Milieu
5. Behavior Motivation
6. Treatment/Service Planning and Review
7. Programming and Services
8. Total Quality Improvement

The components established a framework to understand how programs were performing and what future program development was needed. This report was revised in 2017.¹⁴

Around the same time as this report was being released, an update from JB-CSSD through their "Sanctions Update" was provided.¹³ This update outlined several gender responsive initiatives across probation, detention, and services. For diversionary efforts, the CARE program was highlighted as a key contributor. **The Center for Assessment, Respite and Enrichment (CARE) was a program developed to divert status offending girls from detention.** Two programs were funded at the time, offering a brief (2-week) stay and connection to meaningful home-based services or community-based supports. Later a program was opened for boys. In 2008, 80% of CARE participants had remained free from involvement in detention and 70% had not returned to court.⁸ In 2007, Connecticut began its efforts to fully decriminalized status offenders, removing the pathway to the court, which resulted in the eventual closure of the CARE programs in 2012.¹³

The Family Support Center (FSC) was created to assist youth aged 12-17-years old who identified as Family with Service Needs (FWSN). In other words, status offenders. FSC was designed to stabilize the family unit, identify behavior-based interventions, and to assess and advocate for the youth's educational needs. **CARE and FSC were deliberately designed with girls in mind and helped to ensure a gender responsive system.** Status offenses were eliminated from juvenile justice in 2007; a move that was and is supported by advocates. Even

¹³ Sokoloff, K., Sneed, T., Guthrie, B., & Benedict, A. (2008). Program Guidelines for Girls' Services in Connecticut. *DCF-CSSD Girls' Programs Standards and Certification Project*. https://portal.ct.gov/-/media/DCF/Girls_Services/pdf/ProgramGuidelinesFinalCopywithGraphicspdf.pdf

¹⁴ Sokoloff, K., Sneed, T. M., Guthrie, B., & Benedict A. (2017). Guiding principles for girls' services in Connecticut. *DCF-CSSD Girls' Programs Standards and Certification Project*.

though status offenders were no longer at the court's door, the value of the programming may have been beneficial in other ways, particularly in early intervention for at-risk and system-involved youth.

In 2013, **A DCF training curriculum for providers serving adolescent girls was created that outlines five modules**, as follows:¹⁵

1. Module one focused on the participants' different attachment styles and how early attachment experience influences one's later expectation of safety in the world.
2. Module two introduced participants to the research regarding how culture and parenting practices set the foundation for how girls experience and express emotions.
3. Module three was dedicated to helping participants understand the risk and resiliency factors associated with trauma, compassion fatigue, and post-traumatic stress disorder (PTSD).
4. Module four helped assist participants in understanding the crucial, and potentially lethal, role of relational aggression in the lives of girls through the socio-cultural construction of the rules for girls. Participants would learn the definition, purpose, roles, and dynamics of relational aggression and the long-term psychological outcomes associated with such aggression in childhood and adolescence.
5. Module five focused on psychosexual development and sexuality to help participants understand and respond to a girl's sexual behavior in the context of her development and cultural context.

This curriculum, in its entirety, better informed providers of services to adolescent girls and enhanced the gender responsive practices in Connecticut. Focus groups, observation, individual interviews, document review, data review, and surveys were utilized to gain information regarding the practices of each program and the respective assessment aimed to determine whether the program qualifies as a gender specific program. If not, whether it had features of a gender specific program.¹⁶

Several prominent advocates highlighted Connecticut's progress during the 2000s through the early 2010s, as it marked significant improvements in Connecticut's juvenile justice system for girls. **The Georgetown Institute for Women, Peace and Security released a report in 2020 that identified Connecticut as the second-highest ranking state on the US Women, Peace, and Security Index.**¹⁷ This index takes into consideration three dimensions: **inclusion** (economic, social, and political); **justice** (formal laws and informal discrimination); and **security** (at the individual and community levels).¹⁸ Connecticut scored especially strong on inclusion and security. Still, there is a reinvigorated movement among agencies to improve the services that

¹⁵ Department of Children and Families. (2013). Understanding girls: A trauma informed perspective.

¹⁶ Department of Children and Families & Court Support Services Division. (2011). Program Self-Assessment of the Program Guidelines for Girls' Services in Connecticut. *DCF-CSSD Girls' Programs Standards and Certification Project*

¹⁷ Klugman, J. (2020). The best and worst states to be a woman: Introducing the U.S. Women, Peace, and Security Index. *Georgetown Institute for Women, Peace and Security*. <https://giwps.georgetown.edu/wp-content/uploads/2020/10/The-Best-and-Worst-States-to-Be-a-Woman.pdf>

girls receive and review system-wide practices that may better support the girls within Connecticut's juvenile justice and child welfare systems.

III. National Best Practices and Existing Work

Best Practices

Five core principles of gender responsive programming have been identified through literature: (1) cultural responsiveness, (2) relationships, (3) safety, (4) a skills-based and strengths-based approach, and (5) holistic approach.¹⁸ **Cultural responsiveness** aims to address girls' needs and risks based on the girls' identified culture. This may include gender, race, ethnicity, religion, class, ability, and sexual orientation.¹⁹ **Relationships** focus on understanding that healthy female development relies on healthy, mature relationships.¹⁹ Thus, programs should educate its girls on what these relationships should look like. Addressing **safety** requires trauma-informed care and the awareness of socially-based power differences that girls face.¹⁹ Using a **skills-based and strengths-based approach** relies on increased engagement in service, increased confidence, and the development of multiple competencies by the girls in the programs.¹⁹ Finally, serving girls **holistically** refers to considering the "whole girl:" considering individual differences, addressing needs in multiple domains, and supporting girls through a variety of options.¹⁹ There continues to be a growing emphasis in literature that focuses on the continuum of care which concerns the importance of maintaining consistency in services across levels of the justice system: arrest/sentencing, detention, probation, residential, and parole.¹⁹

Existing Work and Practices

The Department of Children and Families (DCF) offers a variety of services and programs for girls. Diversionary services include three DCF-contracted Juvenile Review Boards (JRBs) in Hartford, Bridgeport, and New Haven. Additionally, through two different contracts, DCF provides smaller financial supports to approximately 40 other JRBs. DCF also has specific contracts for youth in care or who are transitioning from care, including: Substance Screening, Treatment and Recovery for Youth (SSTRY); Multi-Systemic Therapy (MST); and recovery services. DCF also funds additional contracted programs that utilize evidence-based practices. DCF supports the Sub-Acute Crisis Stabilization program (SACS) and Residential Treatment Centers (RTC) to further support the youth in its care. For youth requiring specialized services such as mentoring, alternative treatment modalities, and intensive trauma-informed treatment programs, DCF will uniquely contract for these services.

There are other services available specifically for those that are older, including Transitional Supports for Emerging Adults (17 to 21 years old); Launch: a skill development service for 14- to 17-year-olds; year-round employment; and Youth Link Mentoring for LGBTQ+ youth. Regarding community-based services, DCF offers several, such as Functional Family Therapy (FFT),

¹⁸ Walker, S. C., Munro, A., & Sullivan-Colglazier, C. (2015). Principles in practice: A multistate study of gender-responsive reforms in the juvenile justice system. *Crime & Delinquency*, 61(5), 742-766. DOI: 10.1177/001128712449712

Outpatient Psychiatric Clinics for Children (OPCC), Outpatient Urban Trauma Centers (OUTC), Extended Day Treatment (EDT), and Urgent Crisis Centers (UCC).

To target and prevent human trafficking, **DCF has a specialized team known as the Human Anti-Trafficking Response Team (HART) that is led by the DCF Director of Human Trafficking and Gender Responsiveness.** This team includes internal HART liaisons, leads, and external partners. Internal efforts include consultation and referral for supports and services for youth who are suspected of being victims of human trafficking. The team is also responsible for internal structured responses to reports of human trafficking concerns. Girls are the primary recipients of these reports and consultations, which is representative of the larger statistic: **94% of identified human trafficking victims in the Greater Hartford region alone between 2022 and 2024 were female.¹⁹ Of these victims, 84% were minors between the ages of 13 and 17.²¹** In 2025 alone, DCF's HART completed over 230 consults.²⁰ The importance of DCF's HART cannot be understated given the recent increase in human trafficking reports (**200% since 2022, according to the Regionalized Human Trafficking Recovery Taskforce of the Greater Hartford Region**).

Connecticut has multidisciplinary teams (MDTs) and Child Advocacy Centers (CACs), which are both critical components of the state's response to human trafficking. MDTs are teams made up of a variety of professionals that aid in the support of children experiencing trauma. CACs are facilities that provide child-focused and trauma informed care in collaboration with MDTs. DCF's response to trafficking cases includes automatically referring all trafficking cases, both accepted and non-accepted reports, to MDTs for coordinated response and services.

The wide range of services available allow for the treatment of multiple issues facing girls in the child welfare system. Specifically, programs are available that address some of the principles outlined by gender responsive best practices: addressing safety, using a skills-based and strengths-based approach, and serving girls holistically. **The majority of these services focus on addressing safety and strengthening relationships and connections to caregivers through trauma informed treatment,** while Launch is specific to a skills-based approach. The existence of such a wide range of services contributes to the holistic treatment of girls.

Therapeutic Group Homes (TGH) and Specialized Trauma-Informed Treatment and Reunification (STTAR) are DCF-monitored treatment facilities within the community that offer gender specific milieus. DCF also maintains Intensive Transitional Treatment Centers (ITTC) and Psychiatric Residential Treatment Facilities (PRTF) that offer additional gender-specific services for females. To address cultural competency, DCF has recently implemented strategies to improve its service of racial justice by partnering with local communities to improve racial equity outcomes and reduce disproportionality across all racial and ethnic populations.¹

¹⁹ Rich, K., Walcott, S. (2025). Journey Mapping Report. *Regionalized Human Trafficking Recovery Taskforce of the Greater Hartford Region*. <https://portal.ct.gov/dcj/-/media/dcj-beta/2025rhtrt-report-digital.pdf?rev=dcbcf0aaef884e6b9e463a9e76e31608&hash=0C00DC185AECC41D8A2995787E1A94E6>

²⁰ Department of Children and Families. (2026). Spotlight on what's right.

The Judicial Branch Court Support Services Division (JB-CSSD) has created specialized girls-only probation units and opened several respite and community-based alternative programs specifically for girls, rather than admitting them to the state's secure detention facilities. The **LYNC program (Linking Youth to Natural Communities)** is a program that provides girls and boys that are between the ages of 12 and 17 years old and are justice involved with services that target behavior and recidivism reduction. **LYNC has girl-specific programming as well, including the Girls Circle. The Girls Circle is a structured support group for girls between the ages of 12 and 18 years old.** This group integrates relational theory, resiliency practices, and skills training that increases positive connection, personal and collective strengths, and competence in girls.²¹

JB-CSSD offers Multi-Systemic Therapy (MST) to 12- to 17-year-olds. MST is an intensive, family- and community-based treatment program that aims to keep youth who have exhibited serious clinical issues within their community. Credible Messenger is a community-based program also provided by JB-CSSD that provides high risk and high need youth with intensive mentoring. Additionally, JB-CSSD offers employment recruitment assistance where it recruits and obtains agreements with employers to hire justice-involved youth, specifically those between the ages of 15 to 18 years old.

Journey House is a REGIONS program for girls that is offered by JB-CSSD. REGIONS are community residential programs. This program is a limited hardware secure residential treatment program for female-identifying youth who are adjudicated on probation with placement in a **home-like, trauma-informed, therapeutic setting** operated by Hartford Healthcare. It is a comprehensive Dialectical Behavioral Therapy (DBT) program that offers individual therapy, family therapy, substance misuse treatment, therapeutic milieu, skill-based learning, education, vocational exploration and certification opportunities, yoga, recreation and enrichment opportunities. **As the girls attain treatment goals, they go back into the community to practice their skills, do job interviews, get a job, participate in vocational programs and engage with prosocial activities.** Further, the girls are supported by a Reintegration Mentor and a Family Support Specialist who work with the youth and family while the youth is in the program and for a period of time after discharge from the residential program.

Because of the DBT residential continuum, JB-CSSD offers Multisystemic Therapy – Family Integrated Transitions (MST-FIT), which is an adaption of MST that incorporates DBT and is for youth who are being discharged from a DBT residential facility. The model **provides a warm hand-off to support a successful transition home.** A therapist begins working with the family **approximately 4-8 weeks** before the youth is discharged from the residential program, teaching them the skills that the youth has learned while in treatment. The intensive in-home program **requires that the clinician is available to the family 24/7** as the initial transition home

²¹ Connecticut Renaissance. (n.d.). LYNC: Linking Youth to Natural Communities. <https://ctrenaissance.org/programs-2/445-2/>

can be challenging. Further, the therapists visit the family in their home or in the community approximately three times a week to help support the transition.

Community Solutions, Inc. (CSI) in Connecticut operates two programs that incorporate healthy relationship building with each girl served, adhering to gender responsive principles. Lisa's SAIL program (named after Lisa Steinberg who died due to child abuse and neglect) provides efficiencies and one-bedroom apartments for older girls and boys currently in DCF care, but who also may be court-involved.²² The program is designed to meet the needs of foster care youth between the ages of 18 and 21 years old.¹⁶ Through a contract with JB-CSSD, CSI provides treatment, services, and interventions to girls (12 to 17 years old) who are justice involved through its intermediate residential program (known as AFIR - Adolescent Female Intermediate Residential program). The program provides a healthy, home-style program for girls (12 to 17 years old) that are involved in the justice system and referred by JB-CSSD.¹⁶ Here, girls have access to services that assist with emotion regulation, decision making, education, and relationship building. The services provided include vocational training, educational support, therapy to support life skills, and multiple recreational activities. Treatment services are tailored to the unique needs of each girl, promoting holistic services.

Love146 is a Connecticut organization that aims to prevent child trafficking and provide holistic support to survivors.²³ Love146 provides a multitude of services: rapid responses to 13- to 17-year-olds who are at high risk for trafficking by providing information and safety planning; long-term services to 13- to 17-year-olds at the time of referral (with no age limit on service delivery) that provide wraparound services to victims of trafficking; and transitional services to youth 16 years old or older by providing support for victims of trafficking as they transition to adulthood. These services are partially funded through DCF. In addition to Love146, ROCA is a violence intervention and behavioral health program in Connecticut for young people and offers a women's program for girls between the ages of 14 and 24 years old who are disconnected from school and/or work, are involved in or experiencing violence, and are multi-system involved.

York Correctional Institution (YCI) in Niantic is a high-security facility and serves as Connecticut's only state-operated prison for female offenders, both girls and women. YCI only has a handful of girls under the age of 18 at any given time, being mainly responsible for adult women. Due to such low numbers of a youth population, the correctional institution is not suited to meet the unique needs of young girls. York staff have expressed how they often feel overlooked in discussions and shared that they lack educational funding and age-appropriate, gender responsive resources. They have also shared the social isolation that these girls experience due to federal regulations of youth being out of sight and sound of adults. Even with a small population, the girls housed in York are as very bit deserving of the types of resources

²² Community Solutions, Inc. (n.d.). Youth: Residential programs. <https://csi-online.org/programs/youth-services/youth-residential-programs>

²³ Love146. (n.d.). Home. <https://love146.org>

provided to the girls involved with the Department of Children and Families and Judicial Branch Court Support Services Division.

The Women Overcoming Recidivism Through Hard Work (W.O.R.T.H.) Unit is York Correctional Institution’s specialized housing unit for female offenders between the ages 18 and 25. Opened in June 2018, the W.O.R.T.H. Unit focuses on developmentally appropriate programming to reduce the likelihood of young women recidivating, understanding that young adults are re-incarcerated at higher rates compared to any other age group.²⁴ Still, the W.O.R.T.H. Unit does not serve girls under the age of 18, which leaves a gap in service provisions. Without gender responsive services and resources that are specific for minor girls, this population at YCI will not be adequately served.

Connecticut has implemented a multitude of girl- and woman-first programs and policies to address the unique needs of girls within the justice and child welfare systems in both the private and public sectors. To better understand the characteristics of the girls that are involved in these, Department of Children and Families (DCF), the Judicial Branch Court Support Services Division (JB-CSSD), and the Department of Correction (DOC) have provided data regarding the girls that have touched their respective system in the past three calendar years. An analysis of this data is provided.

IV. Data Analysis of Girls in Connecticut’s Child Welfare and Juvenile Justice Systems

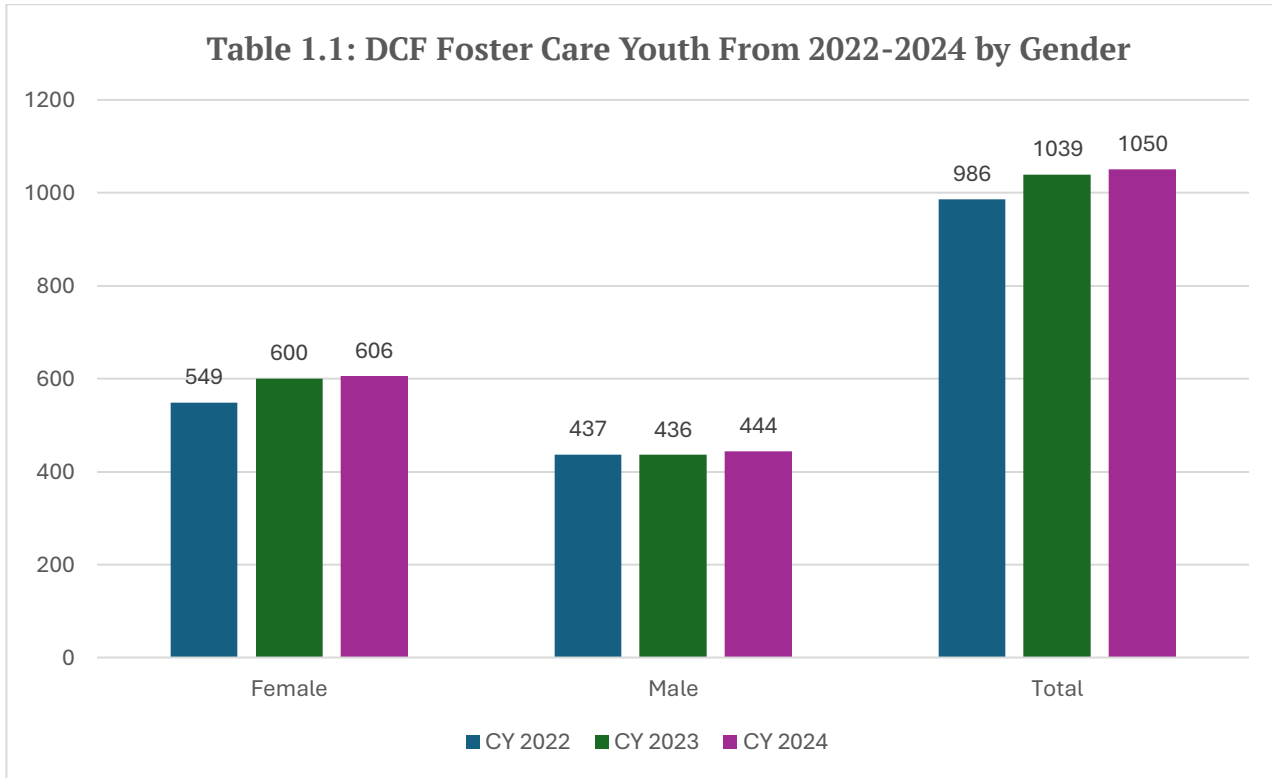
Data from the Department of Children and Families

Between August 2025 and November 2025, the Department of Children and Families (DCF) was tasked with responding to a data request from the Juvenile Justice Policy and Oversight Committee (JJPOC) regarding the youth in their care. DCF provided the Tow Youth Justice Institute (TYJI) with data regarding youth between the ages of 12 and 17 years old with DCF involvement across calendar year 2024. **DCF involvement is defined as any contact with DCF.** Follow-up data was provided from calendar year 2023 through August 6th, 2025. This data was categorized based on gender, age, race and ethnicity, reasons for the removal from home, locations of the families, and outcomes of reports. **All data that was provided for the development of this landscape analysis was de-identified, secondary data.** To comply with Data Suppression Guidelines of the Connecticut State Department of Education (CSDE), any data point ≤ 5 has been removed or replaced with an asterisk (*). The provided data is further elaborated upon below.

²⁴ Malloy, D. P. (2018). Gov. Malloy announces opening of new corrections unit preparing young female inmates to become productive members of society. *State of Connecticut*. [https://portal.ct.gov/Malloy-Archive/Press-Room/Press-Releases/2018/07-2018/Gov-Malloy-Announces-Opening-of-New-Corrections-Unit-Preparing-Young-Female-Inmates#:~:text=Unit%20Opened%20with%20Goal%20of,society%2C"%20Governor%20Malloy%20said.](https://portal.ct.gov/Malloy-Archive/Press-Room/Press-Releases/2018/07-2018/Gov-Malloy-Announces-Opening-of-New-Corrections-Unit-Preparing-Young-Female-Inmates#:~:text=Unit%20Opened%20with%20Goal%20of,society%2C)

Gender

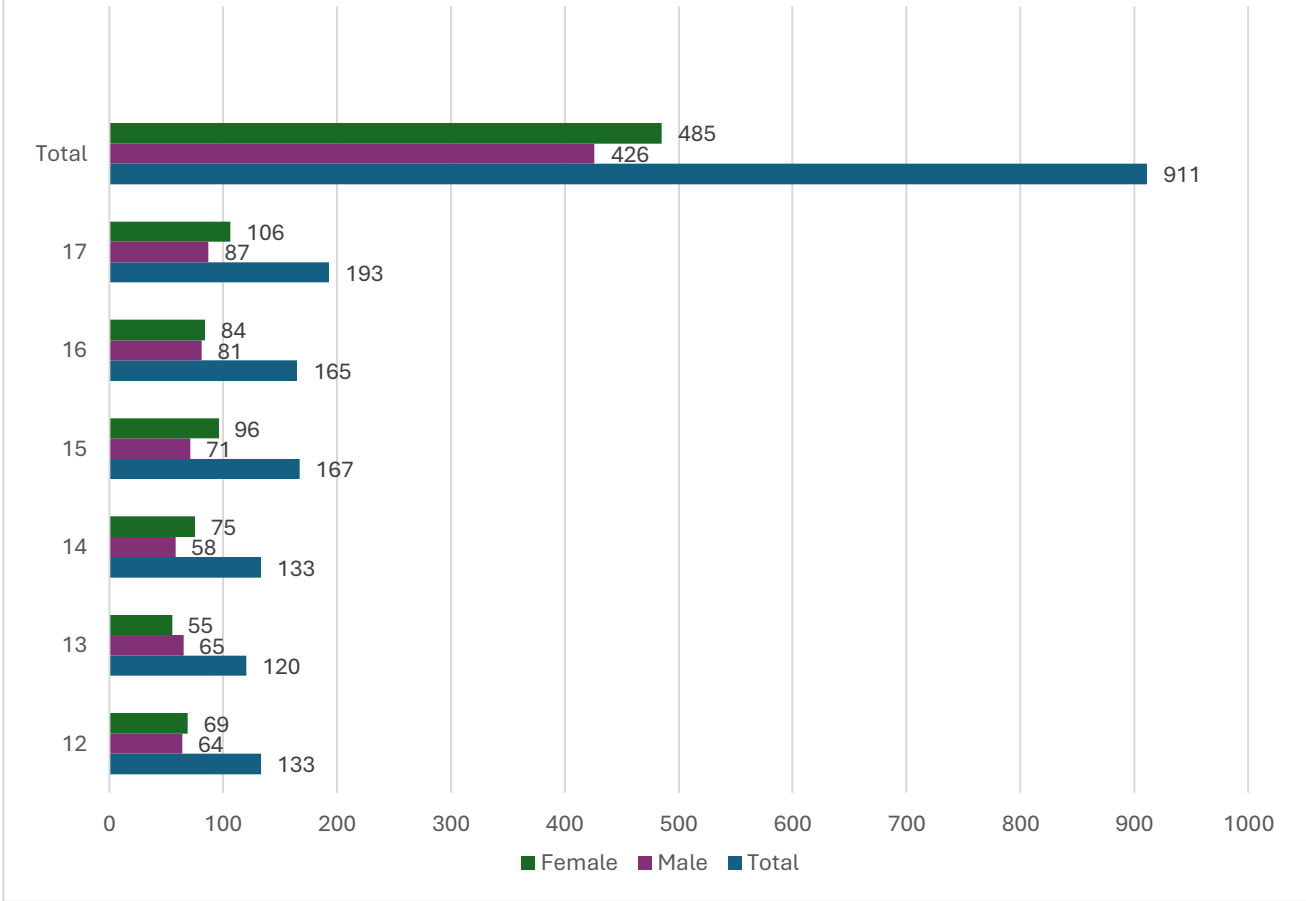
Across calendar years (CYs) 2022, 2023, and 2024 **more girls were in foster care with DCF compared to boys**. Each calendar year saw a slight increase in the number of girls in foster care, with the total number of youths in foster care increasing each year as well.



Age

DCF provided the number of youths of each age in foster care as of December 31st, 2024, specified by gender. For girls, there were more 17-year-olds than any other age group, with the fewest 13-year-olds. Girls made up 51.9% of all 12-year-olds, 45.8% of all 13-year-olds, 56.4% of all 14-year-olds, 57.5% of all 15-year-olds, 50.9% of all 16-year-olds, and 54.9% of all 17-year-olds. For boys, there were more 17-year-olds than any other age group, with the fewest 14-year-olds. Still, there were more girls than boys in foster care at this time, with a total of 911 youth. For each age group between 12 and 17 years old there were more girls in each group compared to boys except for age 13, in which there were 10 more boys than girls.

Table 1.2: DCF Foster Care Youth as of December 31st, 2024 by Age

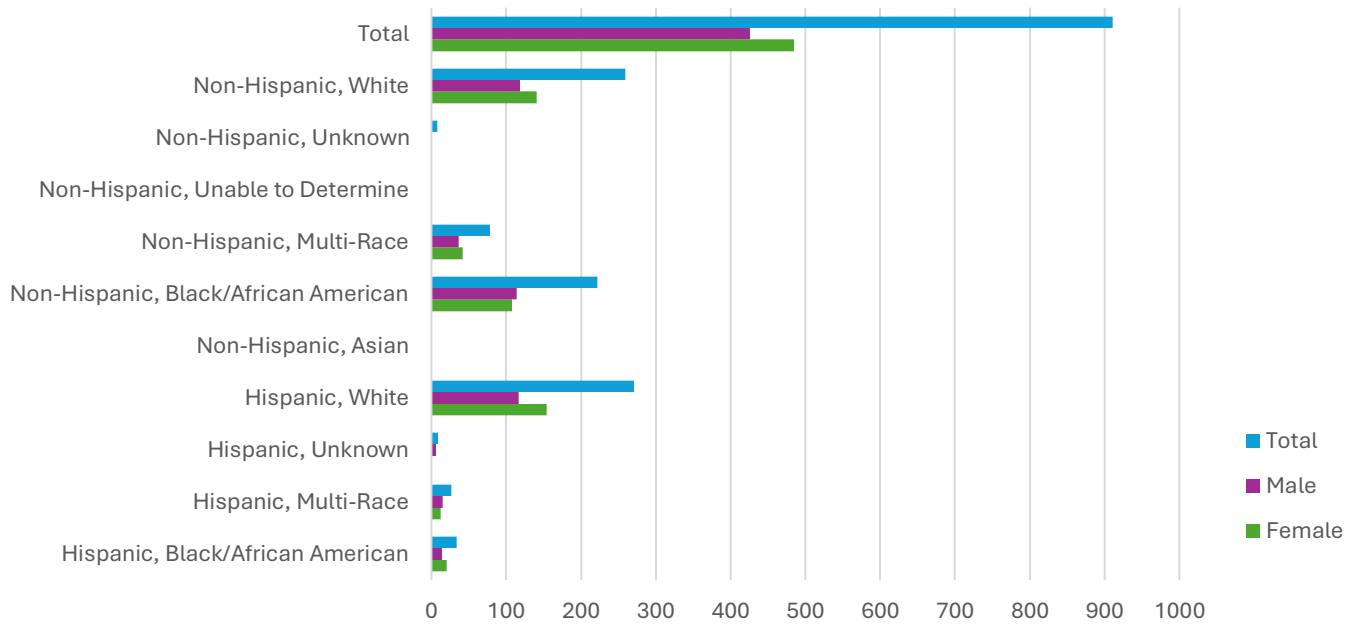


Race/Ethnicity

The race and ethnicity of each youth in foster care as of December 31st, 2024 was reported by DCF. Race was designated as Black/African American, Multi-Race, White, Asian, Unknown, and Unable to Determine. Ethnicity was categorized as either Hispanic or Non-Hispanic. The largest race/ethnicity category for all youth was Hispanic White, consisting of 271 youths (29.7%), followed by Non-Hispanic White with 259 youths (28.4%) and Non-Hispanic Black/African American with 222 youths (24.4%).

The most common race/ethnicity for girls was Hispanic White with 31.8% of girls identifying as such. The least common race/ethnicity for girls was Non-Hispanic Unable to Determine, followed by Non-Hispanic Asian, Hispanic Unknown, and Non-Hispanic Unknown.

Table 1.3: DCF Foster Care Youth From 2022-2024 by Race/Ethnicity



	Hispanic, Black/African American	Hispanic, Multi-Race	Hispanic, Unknown	Hispanic, White	Non-Hispanic, Asian	Non-Hispanic, Black/African American	Non-Hispanic, Multi-Race	Non-Hispanic, Unable to Determine	Non-Hispanic, Unknown	Non-Hispanic, White	Total
Total	34	27	9	271	222	78			8	259	911
Male	14	15	6	117	114	36				118	426
Female	20	12		154	108	42				141	485

Reasons for Removal From Home

As of December 31st, 2024, “**neglect**” was the most common reason for removal from the home for all youth; the number of cases of neglect being the cause for removal is notably higher than any of the other reasons provided, with 550 cases (33% of all cases). Of these, female youths are involved in 295 of these cases (33.5% of girl-involved cases). The next most common reason for removal for girls was “caretaker drug use” (11.2%), closely followed by “child behavior” (9.2%). Girls were removed from the home for “sexual abuse” almost **seven times** as much as male youth (49 cases versus 8) and made up 5.6% of all reasons for removal for girls. Sexual abuse and physical abuse together made up 11.5% of all removals for girls, compared to 6.2% for boys.

Table 1.4: Reasons for Removal by Gender as of December 31st, 2024
Based on Total 881 Females

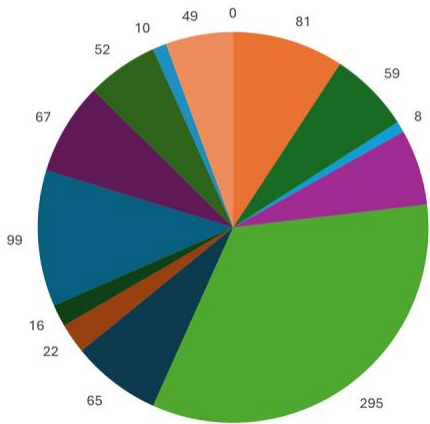
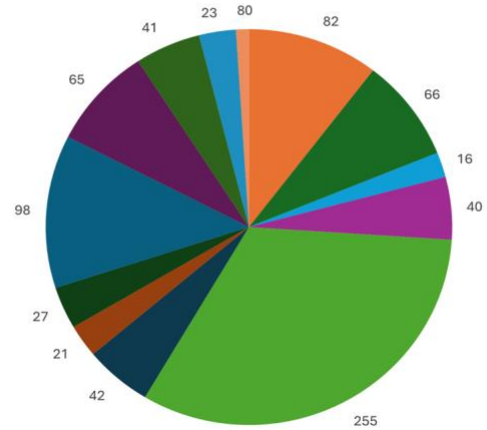


Table 1.4: Reasons for Removal by Gender as of December 31st, 2024
Based on Total 786 Males



- Child Alcohol Use
- Child Behavior
- Child Diagnosed Condition
- Child Drug Use
- Inadequate Housing
- Neglect
- Caretaker Alcohol Use
- Caretaker Death
- Caretaker Incarceration
- Caretaker Drug Use
- Caregiver Significant Impairment Physical Emotional
- Physical Abuse
- Relinquishment
- Sexual Abuse

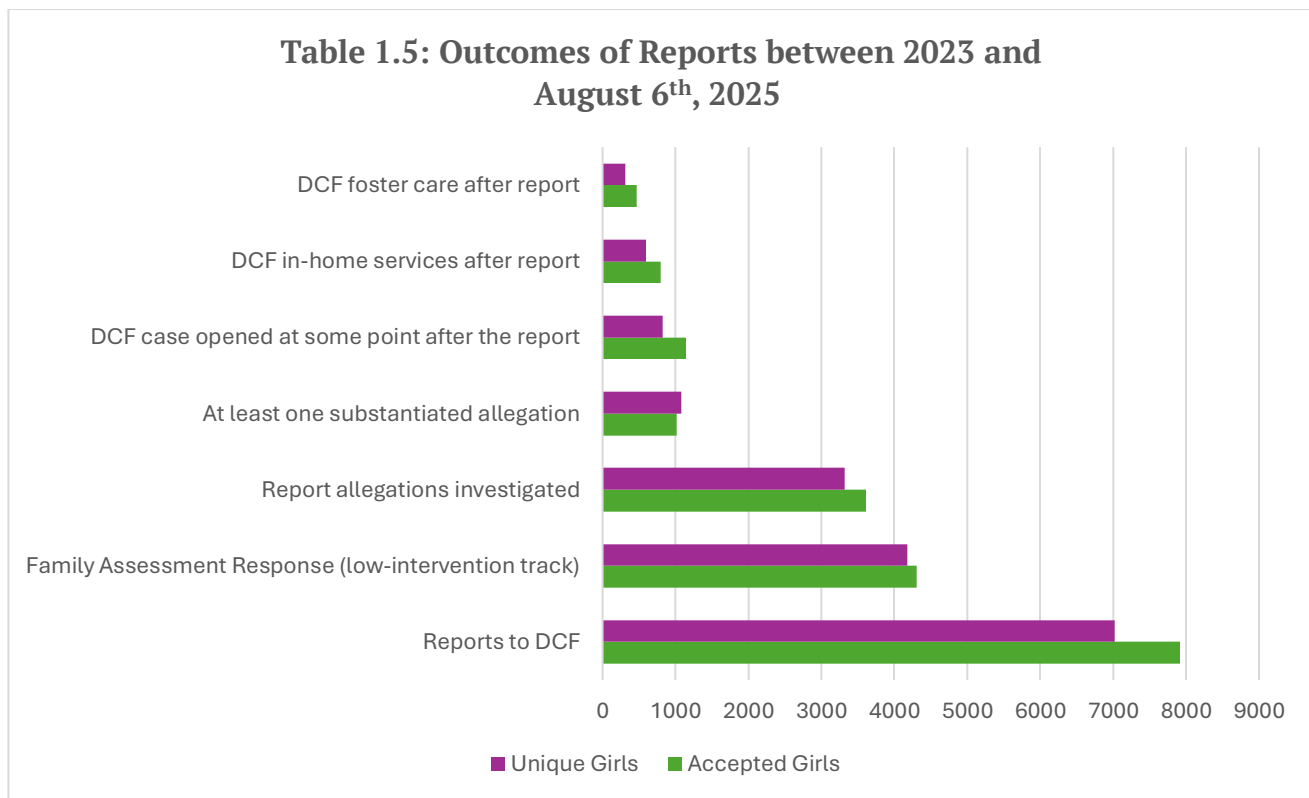
Locations of the Families

The current location of the families of the girls with DCF involvement at the time of the provision of this information (December 31st, 2024) was provided. New Haven had the highest number of families of the girls in foster care (42), closely followed by Hartford with 36 families and Waterbury and Bridgeport, both with 27 families. 22 families reside outside of Connecticut.

Outcomes of Reports

The reports made to DCF that involve girls are subsequently followed up on. The outcome of reports refers to the results of these investigations, regarding substantiation of claims and DCF response to such substantiation. During the 2023 calendar year, 7,919 reports were accepted by DCF with 7,023 involving a unique girl (88.7% of reports). **Unique girl refers to a girl who has not been included in another DCF report.** 54.4% of these accepted reports resulted in a Family Assessment Response, which is a low-intervention track. 97.0% of these cases involved unique girls. In 45.6% of cases, the report allegations were investigated, and 91.8% involved unique girls. Of the reports, 14.5% resulted in a DCF case being opened at some point, with 71.9% involving unique girls. DCF in-home services were provided after the report in 10.0% of the reported cases, with the involvement of unique girls in 75.1% of these cases. 5.9% of the reported cases resulted in DCF foster care after the report was made, with 67.1% involving unique girls. Of the reports to DCF, there was at least one substantiated allegation in 12.8% of

cases. Of the DCF cases that were opened following a report, 69.4% resulted in in-home services and 40.9% resulted in foster care placement.



Data from the Judicial Branch Court Support Services Division

Nine questions were initially posed to Connecticut’s Judicial Branch Court Support Services Division (JB-CSSD) regarding the make-up of the young people with JB-CSSD involvement. Each question and the respective results are outlined below. **All data that was provided for the development of this landscape analysis was de-identified, secondary data.** To comply with Data Suppression Guidelines of the Judicial Branch Court Support Services Division (JB-CSSD), any data point < 10 has been removed or replaced with an asterisk (*).

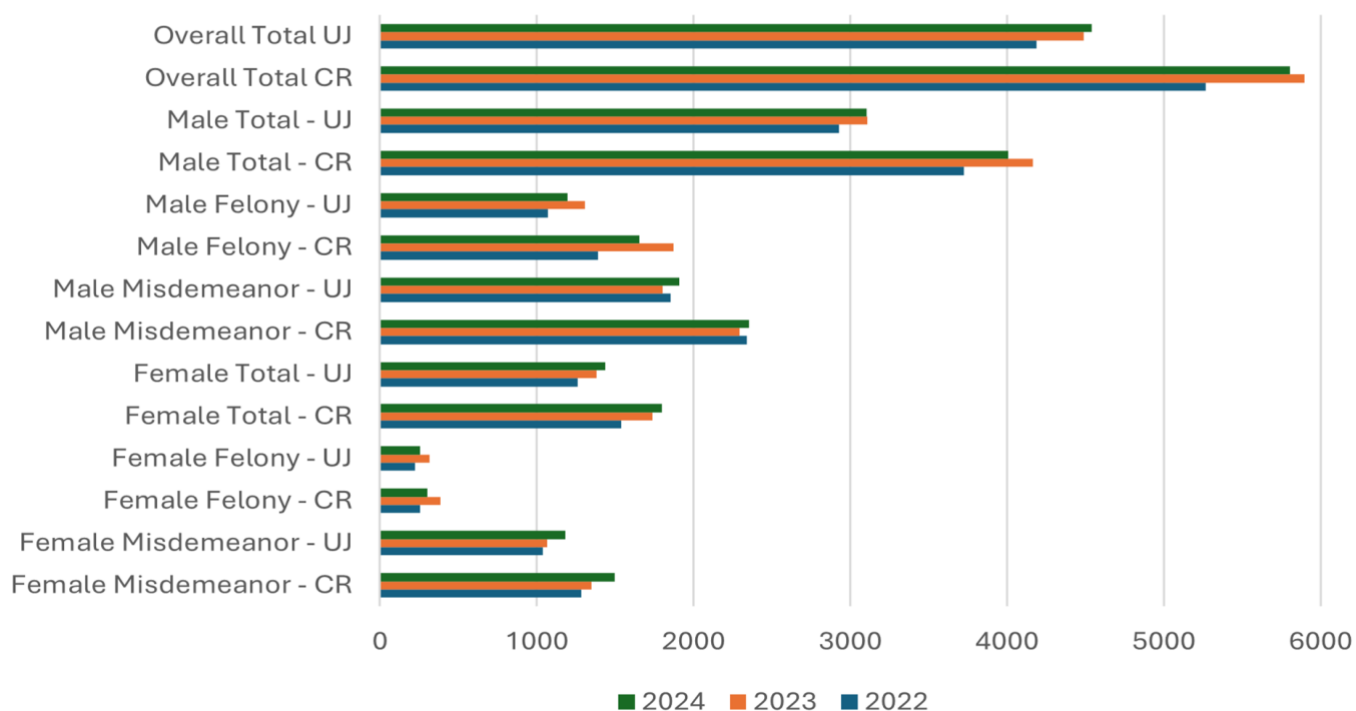
All pre-disposition court referrals and unique juveniles between the ages of 10 and 17 years old at the time of their arrest between January 1st, 2022, and December 31st, 2024 were examined. Referrals with a most serious charge of infraction, violation, or unclassified were excluded from the data request. **Unique juveniles refer to a youth that is not involved with another referral.**

Charge Severity and Number of Arrests by Gender

In 2022, misdemeanors involving girls made up 24.4% of all referrals and 24.8% of all unique juveniles. Felony court referrals involving girls made up 4.8% of all referrals and 5.3% of all unique juveniles. In 2023, misdemeanors involving girls made up 22.9% of all referrals and 23.7% of all unique juveniles. Felony court referrals involving girls made up 6.5% of all referrals and 7.0% of all unique juveniles. Between 2022 and 2023 there was an increase in the number of misdemeanor and felony court referrals and the number of unique juveniles for each charge severity for girls. In 2024, misdemeanors involving girls made up 25.8% of all referrals and 26.0% of all unique juveniles. Felony court referrals involving girls made up 5.2% of all referrals and 5.6% of all unique juveniles. Between 2023 and 2024 there was an increase in the number of misdemeanor court referrals and unique girls involved but a decrease in the number of felony court referrals and the number of unique juveniles.

For each calendar year evaluated, there was a notably higher number of court referrals for boys compared to girls with over 2,000 more court referrals every year for boys. In 2024 there were more girl-involved court referrals and unique juveniles compared to 2022 and 2023. The year 2022 marked the lowest number of girl-involved court referrals of the three calendar years, with 2023 and 2024 having roughly 200 more female court referrals than 2022. In the following table, “**CR**” refers to “**court referral**” and “**UJ**” refers to “**unique juveniles.**”

Table 2.1.: Number of Arrests/Referrals by Charge Severity and Gender Between 2022 and 2024



Dispositions in Connecticut’s Juvenile Justice System For 2022-2024 By Gender

All disposed court referrals and unique juveniles between the ages of 10 and 17 years old at the time of their arrest between January 1st, 2022 and December 31st, 2024 were examined by gender. **Disposition refers to the final decision by the court in a juvenile justice case.** In terms of data analysis, “No JJ Involvement” refers to any dispositions of “Discharge,” “Dismissal,” “No Disposition,” “Nolle/Not Prosecuted,” and “Not Accepted.” **“Probation with Placement”** refers to a legal status whereby a juvenile who has been adjudicated delinquent is placed by the court under the supervision of juvenile probation for a specified period of time, upon such terms as the court determines, that include a period of placement in a secure or staff-secure residential treatment facility, as ordered by the court, and a period of supervision in the community. **“Supervision”** refers to a legal status whereby a juvenile who has been adjudicated delinquent is placed by the court under the supervision of juvenile probation for a specified period of time and upon such terms as the court determines. These legal definitions have been provided directly by JB-CSSD. **“Suspended Prosecution”** refers to a court case in which delinquency proceeding are suspended pending the successful completion of court ordered programming to address specific behaviors. **“Transfer”** refers to a court case that has been transferred to the adult criminal justice system.

For girls, court dispositions that resulted in “No JJ Involvement” maintained relatively stable across 2022 through 2024. There was a noticeable decrease in girls who were placed on “Probation with Placement” in 2024, compared to 2022 and 2023. There was a peak of court dispositions of “Supervision” for girls in 2023; 2024 still saw a greater number of “Transfer” dispositions for girls compared to 2022, yet fewer than seen in 2023.

Table 2.2: Juvenile Court Dispositions Between 2022-2024

		2022		2023		2024	
		Total Dispositions	Unique Juveniles	Total Dispositions	Unique Juveniles	Total Dispositions	Unique Juveniles
No JJ Involvement	Female	1,190	1,047	1,175	977	1,237	2,068
	Male	2,601	2,152	2,724	2,192	2,602	2,198
	Total	3,791	3,199	3,899	3,169	3,839	3,266
Probation with Placement	Female	21	13	25	10	15	14
	Male	121	59	119	61	106	55
	Total	142	72	144	71	121	69
Supervision	Female	367	310	580	475	518	428
	Male	1,086	863	1,407	1,072	1,142	893
	Total	1,453	1,173	1,987	1,547	1,660	1,321
Suspended Prosecution	Female	*	*	*	*	*	*
	Male	*	*	*	*	10	10
	Total	*	*	*	*	13	13
Transfer	Female	*	*	12	10	10	*
	Male	127	110	134	113	142	106
	Total	133	116	146	123	152	113

Unique Juveniles Involved in Connecticut’s Juvenile Justice System for Calendar Years 2022-2024 By Disposition, Gender, And Number of Prior Arrests

All court referrals and unique juveniles between the ages of 10 and 17 years old at the time of their arrest that were filed between January 1st, 2022 and December 31st, 2024 were examined by gender, disposition type, and the number of previous arrests. **Prior arrests refer to the number of delinquent court referrals a youth had prior to the current referral.** Definitions of “No JJ Involvement,” “Probation with Placement,” “Supervision,” “Suspended Prosecution,” and “Transfer” are the same as previously outlined.

As seen with other measures provided by JB-CSSD, boys involved in all disposition types drastically outnumber that of girls. Next to “No JJ Involvement,” a disposition of “Supervision” was the most common for girls each year, with a 41.1% increase from 2022 to 2024. A disposition of “Suspended Prosecution” remained the lowest disposition in terms of the number of girls involved. More girls were transferred to the adult criminal justice system in 2023 compared to 2022 and 2024. Still, **over one thousand girls had some form of contact with the juvenile justice system each year.**

Table 2.3: Court Referrals and Unique Juveniles by Disposition, Gender, and Number of Prior Arrests between 2022 and 2024

Disposition	Prior Arrests	2022				2023				2024			
		Female		Male		Female		Male		Female		Male	
		CR	UJ	CR	UJ	CR	UJ	CR	UJ	CR	UJ	CR	UJ
No JJ Involvement	0	736	735	1,138	1,319	695	688	1,349	1,306	776	766	1,427	1,409
	1	191	183	406	392	166	163	419	410	183	180	412	405
	2	93	92	228	227	91	86	263	259	97	95	259	251
	3	52	51	160	155	52	51	173	170	57	56	187	175
	4+	121	84	480	297	182	95	533	333	186	115	550	345
	Total	1,193	1,145	2,612	2,590	1,186	1,083	2,737	2,478	1,299	1,212	2,835	2,585
Probation with Placement	0	*	*	*	*	*	*	*	*	*	*	*	*
	1	*	*	*	*	*	*	*	*	*	*	*	*
	2	*	*	*	*	*	*	12	11	*	*	*	*
	3	*	*	*	*	*	*	12	10	*	*	10	*
	4+	14	10	96	49	21	*	90	50	*	*	86	43
	Total	21	17	121	72	25	13	119	76	15	14	106	62
Supervision	0	200	197	528	504	290	282	598	578	238	234	484	470
	1	84	84	259	249	133	131	351	333	131	131	274	268
	2	37	36	125	125	72	70	194	188	70	70	148	142
	3	21	21	72	70	37	36	107	107	37	36	91	90
	4+	25	21	102	74	48	37	157	110	42	27	145	103
	Total	367	359	1,086	1,022	580	556	1,407	1,316	518	498	1,142	1,073
Suspended Prosecution	0	*	*	*	*	*	*	*	*	*	*	*	*
	1	*	*	*	*	*	*	*	*	*	*	*	*
	2	*	*	*	*	*	*	*	*	*	*	*	*
	3	*	*	*	*	*	*	*	*	*	*	*	*
	4+	*	*	*	*	*	*	*	*	*	*	*	*
	Total	*	*	*	*	*	*	*	*	*	*	10	10
Transfer	0	*	*	33	33	*	*	40	40	*	*	32	32
	1	*	*	13	13	*	*	14	13	*	*	11	11
	2	*	*	12	10	*	*	19	19	*	*	*	*
	3	*	*	13	10	*	*	10	10	*	*	14	14
	4+	*	*	56	49	*	*	51	39	*	*	76	47
	Total	*	*	127	115	12	11	134	121	10	*	142	113

Number of Girls Involved in Connecticut’s Juvenile Justice System In 2024 By Disposition Type

All court referrals and unique juveniles between the ages of 10 and 17 years old at the time of their arrest that were filed between January 1st, 2024 and December 31st, 2024 were examined by age of arrest, race/ethnicity, court location, and risk level. Prior arrests refer to the number of delinquent court referrals a youth had prior to the current referral. Definitions of “No JJ Involvement,” “Probation with Placement,” “Supervision,” “Suspended Prosecution,” and “Transfer” are the same as previously outlined.

Age

The number of court referrals resulting in a disposition of “Probation with Placement” and “Supervision” peaked at 15 years old. The number of court referrals resulting in a disposition of “Transfer” peaked at 16 years old. The number of court referrals resulting in a disposition of “Suspended Prosecution” maintained relatively stable across all ages of arrest. The ratio of court referrals to unique juveniles increased through age 15, with the largest difference between the number of court referrals and unique juveniles at 15 years old; thus, indicating the **highest rates of re-arrest for 15-year-olds**. This ratio begins to decrease after age 15, indicating a decreasing rate of re-arrest for older girls. The highest number of “Transfer” dispositions involved 16-year-olds.

Table 2.4.a.: Juvenile Justice Involved Girls by Age in Connecticut for 2024

Age of Arrest	No JJ Involvement		Probation with Placement		Supervision		Suspended Prosecution		Transfer	
	CR	UJ	CR	UJ	CR	UJ	CR	UJ	CR	UJ
10	*	*	*	*	*	*	*	*	*	*
11	13	13	*	*	*	*	*	*	*	*
12	54	52	*	*	30	27	*	*	*	*
13	130	99	*	*	68	55	*	*	*	*
14	209	168	*	*	107	90	*	*	*	*
15	280	237	*	*	122	99	*	*	*	*
16	303	279	*	*	108	93	*	*	*	*
17	310	293	*	*	74	68	*	*	*	*
Total	1,299	1,141	15	14	518	441	*	*	10	*

Race/Ethnicity

Non-Hispanic Black girls made up the majority of the court referrals and unique juveniles for dispositions of “No JJ Involvement,” “Probation with Placement,” and “Supervision.” A total of 662 Non-Hispanic Black girls touched the juvenile justice system, making up 42.4% of all unique girls referred to court in Connecticut and roughly 43.6% of all court referrals involving girls. Non-Hispanic White girls represented 36.6% of unique girls and 34.5% of court referrals

involving girls. Hispanic girls made up 19.4% of unique girls and roughly 20.6% of court referrals involving girls.

Table 2.4.b: Juvenile Justice Involved Girls by Race/Ethnicity in Connecticut for 2024

Race/Ethnicity	No JJ Involvement		Probation with Placement		Supervision		Suspended Prosecution		Transfer	
	CR	UJ	CR	UJ	CR	UJ	CR	UJ	CR	UJ
Hispanic	235	185	*	*	135	110	*	*	*	*
Non-Hispanic Black	591	483	*	*	202	169	*	*	*	*
Non-Hispanic White	452	419	*	*	177	145	*	*	*	*
Non-Hispanic Other	21	21	*	*	*	*	*	*	*	*
Total	1,299	1,108	15	14	518	428	*	*	10	*

Court Location

Bridgeport accounted for the majority of unique girls and court referrals that were disposed as “No JJ Involvement,” accounting for 23% of unique girls and 22.3% of the court referrals resulting in this disposition. The highest rates of a disposition of “No JJ Involvement” occurred in Bridgeport, New Haven (17.6%), and Hartford (13.5%). Most dispositions that resulted in “Probation with Placement” occurred in Bridgeport as well. New Haven had the majority of court referrals and unique girls with a disposition of “Supervision,” accounting for 25.1% of court referrals and 22.9% of unique girls with this disposition. Bridgeport accounted for the second highest rate of court referrals resulting in a “Supervision” disposition (15.1%).

Court referrals that resulted in a disposition of “Suspended Prosecution” only occurred in three cities: Bridgeport, Waterford, and Willimantic. The majority of “Transfer” dispositions occurred in New Britain; “Transfer” dispositions also occurred in New Haven, Waterbury, and Hartford.

Table 2.4.c.: Juvenile Justice Involved Girls by Court Locations in Connecticut for 2024

Court Location	No JJ Involvement		Probation with Placement		Supervision		Suspended Prosecution		Transfer	
	CR	UJ	CR	UJ	CR	UJ	CR	UJ	CR	UJ
Bridgeport	290	255	*	*	78	65	*	*	*	*
Hartford	175	154	*	*	39	36	*	*	*	*
Middletown	70	60	*	*	14	13	*	*	*	*
New Britain	164	135	*	*	41	36	*	*	*	*
New Haven	228	194	*	*	130	98	*	*	*	*
Rockville	97	80	*	*	66	57	*	*	*	*
Torrington	30	21	*	*	11	10	*	*	*	*
Waterbury	111	100	*	*	67	55	*	*	*	*
Waterford	93	71	*	*	44	33	*	*	*	*
Willimantic	41	39	*	*	28	25	*	*	*	*
Total	1,299	1,109	15	14	518	428	*	*	10	*

Risk Level

The PrediCT assessment was used to determine the risk level of each girl. The PrediCT was developed by JB-CSSD Juvenile Probation in partnership with Central Connecticut State University in 2010 and was implemented statewide in 2018. The PrediCT is a 52-item validated, scripted, actuarial risk tool that identifies risks, needs, strengths, and responsivity factors, and classifies clients as one of five risk tiers based on their likelihood to recidivate.

Juvenile Probation Services is able to screen justice-connected youths to determine delinquency handling decisions based on the youth’s risk of recidivating and behavioral health needs.²⁵ The purpose of the assessment is to inform case handling decision, target areas likely to reduce recidivism, and categorized clients into one of five supervision tiers based on their risk and needs. The risk level of each youth determines whether the youth’s court case will result in community diversion, non-judicial handling by a Juvenile Probation Officer, or judicial handling before a Juvenile Court Judge.²⁷ Specifically, the lower risk youth will be referred to the community for support while higher risk youth will be provided support that is based on need by the juvenile justice courts.²⁷

Out of the 15 court referrals that resulted in a “Probation with Placement” disposition involving a girl, 12 involved a girl with a Tier V risk level as designated by the PrediCT assessment, constituting 80% of these dispositions. These court referrals involved 11 unique girls. Of the court referrals that resulted in a “Supervision” disposition involving a girl, the most common risk level was Tier III, which constituted 72.2% of these court referrals and 75.3% of the unique girls. 13.2% of these court referrals involved girls with a risk level of Tier IV; 8.3% involved girls with a risk level of Tier II; and 6.1% involved girls with a risk level of Tier V. Of the 444 total unique girls that were assessed, 9.5% had a Tier II risk level, 73% had a Tier III risk level, 11.5% had a Tier IV risk level, and 5.9% had a Tier V risk level.

Table 2.4.d.: Supervised Girls by Risk Level in Connecticut in 2024*

Risk Level	Probation with Placement		Supervision	
	CR	UJ	CR	UJ
Tier I	*	*	*	*
Tier II	*	*	42	42
Tier III	*	*	367	324
Tier IV	*	*	67	48
Tier V	12	11	31	15
Total	15	14	508	430

²⁵ Juvenile Justice Policy and Oversight Committee. (2023). 2023 Juvenile Justice Policy and Oversight Committee recommendations and legislative package. *Tow Youth Justice Institute*. <https://towyouth.newhaven.edu/wp-content/uploads/2023/02/2023-JJPOC-Recommendations-Package-2-16-23-Final.pdf>

*Note: Risk level only applies to those juveniles with a disposition of “Supervision” or “Probation with Placement.”

Number of girls dually involved in Connecticut’s juvenile justice system and Department of Children and Families (DCF) - Child Welfare in 2024 broken by age, race/ethnicity, court catchment and risk level.

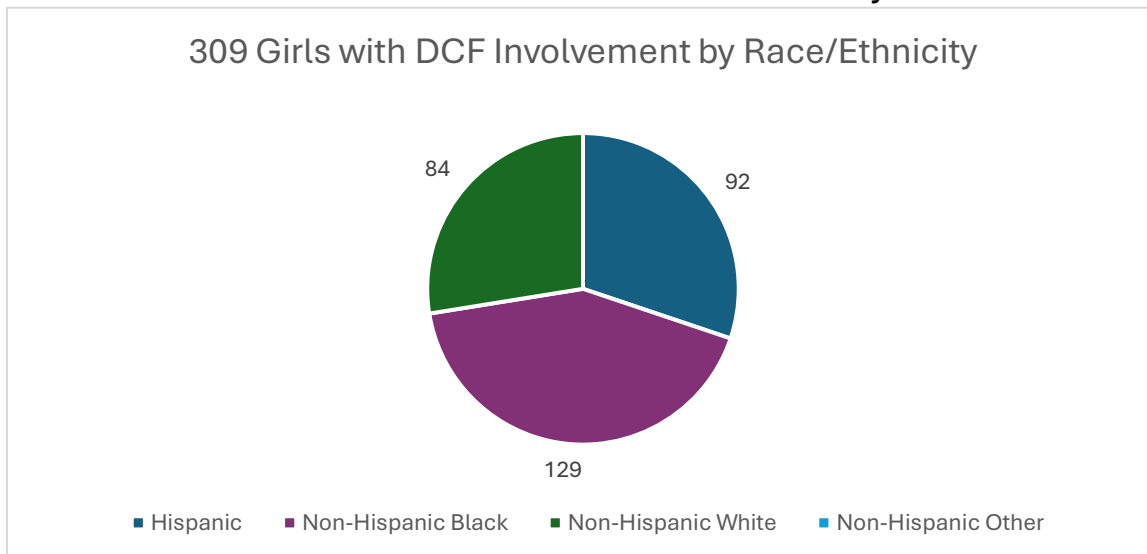
Data on Dually Involved Girls

Dually involved girls are girls that either had DCF involvement at the time of their detention admission or at the time of their most recent juvenile justice system contact prior to admission. To determine the number of dually involved youth in Connecticut, JB-CSSD examined the number of unique juveniles with open cases in 2024 that were identified as having current or prior involvement with the Department of Children and Families (DCF) and are disaggregated by race/ethnicity, age at which the case began, risk level, and court location. To determine the risk level of each girl, the PrediCT assessment was used.

Race/Ethnicity

Of the 309 justice-connected girls that are DCF involved, 41.7% were categorized as Non-Hispanic Black, 29.8% were categorized as Hispanic, and 27.2% were categorized as Non-Hispanic White.

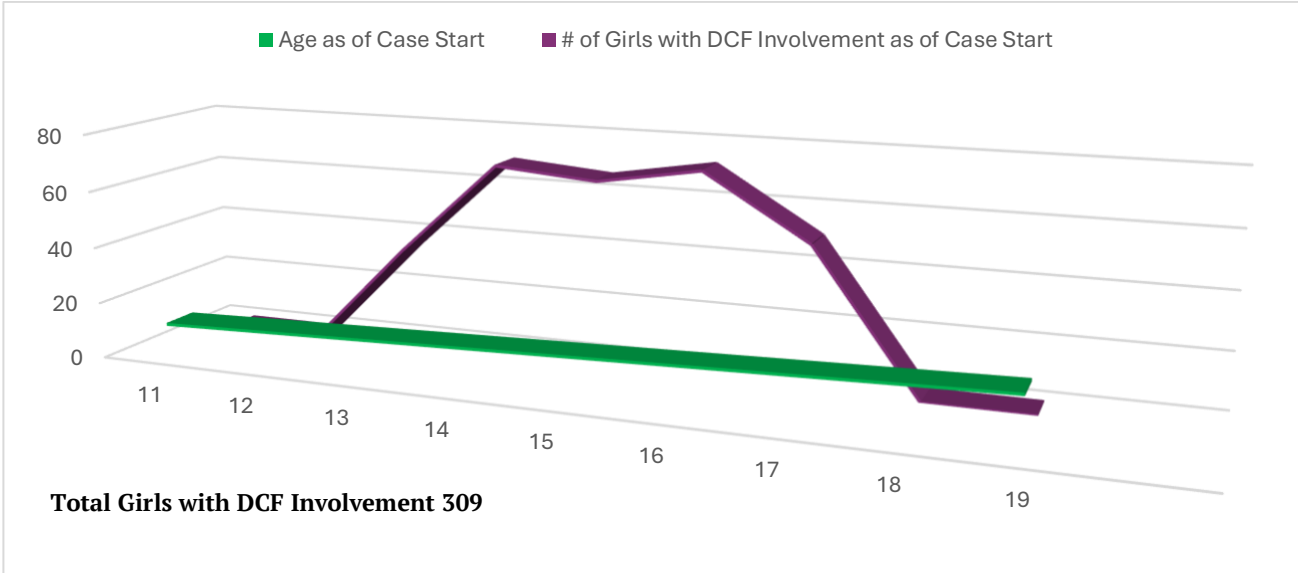
Table 2.5.a All data points as reported by JB-CSSD regarding the race/ethnicity of justice-connected girls that have DCF involvement for the 2024 calendar year.



Age

Of the 309 justice-connected girls that are DCF involved, the most common age for a justice case to begin was 16 years old. 11.7% of these girls were 13 years old when their justice case began. 22.3% of these girls were 14 years old when their justice case began. 21.4% of these girls were 15 years old when their justice case began. 23.3% of these girls were 16 years old when their justice case began. 16.2% of these girls were 17 years old when their justice case began.

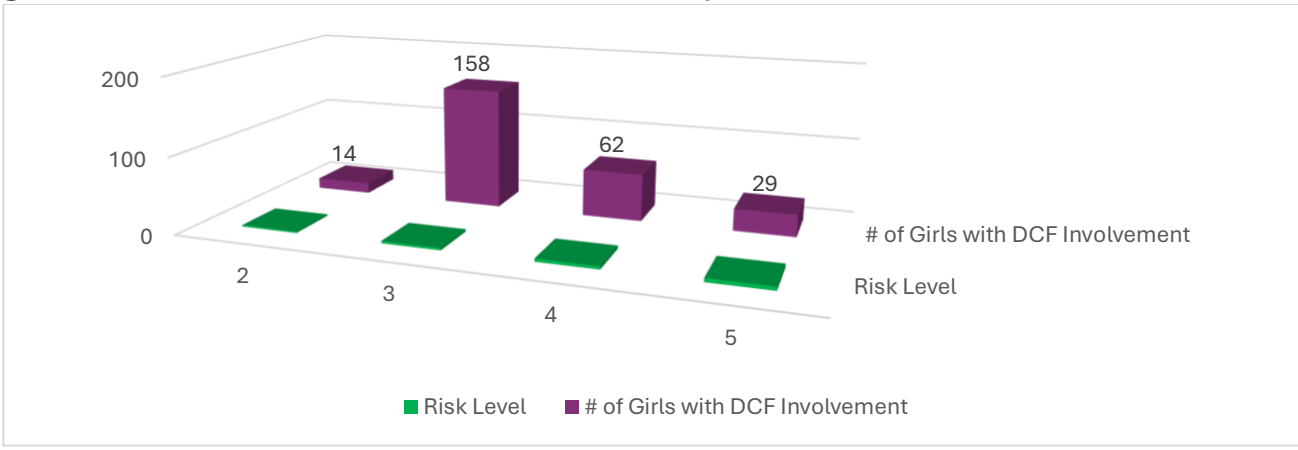
Table 2.5.b.: Girls with DCF Involvement by Age When Case Started in 2024



Risk Level

309 justice-connected girls were identified as being DCF involved. 46 girls were not assigned a risk level due to them falling under the “NULL” category. Therefore, risk levels will only be discussed for the remaining 263 girls. Of these girls, the **majority were classified as a Risk Level of 3** (60.1%). A Risk Level of 2 was the least common, consisting of only 5.3% of these girls. 23.6% of these girls were classified as a Risk Level 4 and 11.0% were classified as a Risk Level 5.

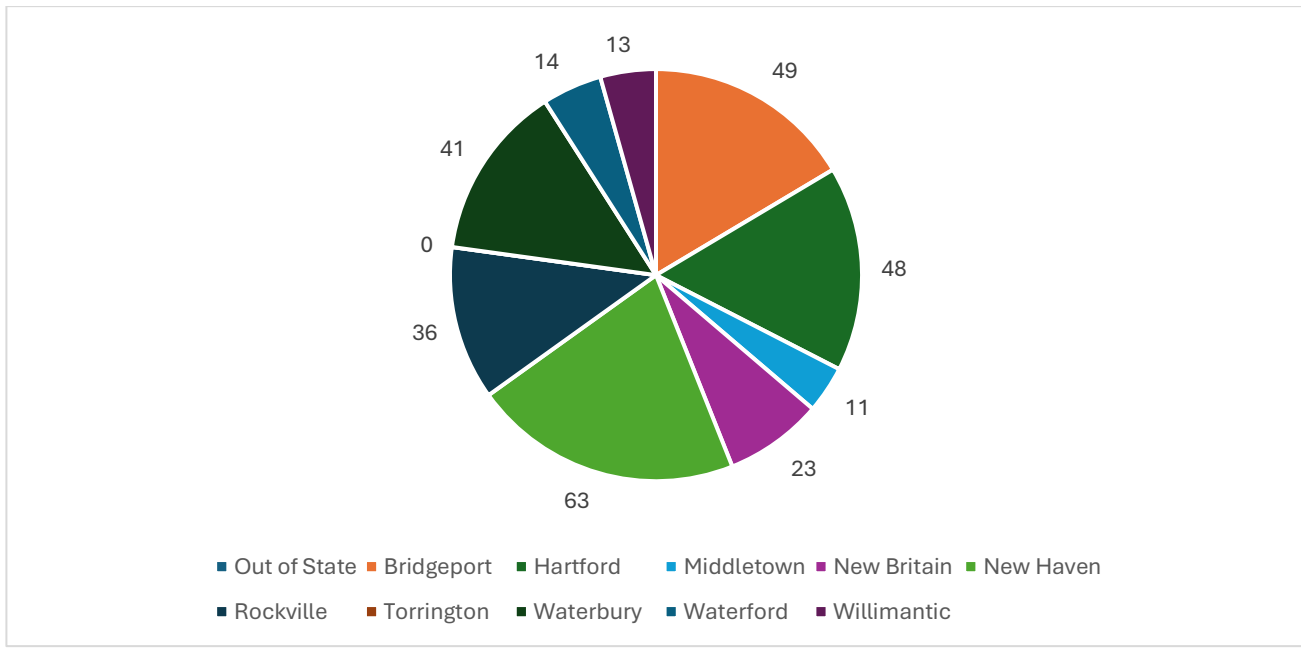
Table 2.5.c. displays all data points as reported by JB-CSSD regarding the risk level of justice-connected girls that have DCF involvement for the 2024 calendar year.



Court Location

New Haven had the greatest number of justice-connected girls with DCF involvement (63 girls), which constitutes 20.4% of these girls. Following New Haven, Bridgeport and Hartford had the greatest number of justice-connected girls with DCF involvement, with 49 girls (15.9%) and 48 girls (15.5%), respectively. The fewest number of girls with DCF involvement had a court location out of state. In-state, Torrington, Middletown (3.6%), Willimantic (4.2%), and Waterford (4.5%) had the fewest number of court cases of girls with DCF involvement.

Table 2.5.d. All data points as reported by JB-CSSD regarding the court location of justice-connected girls that have DCF involvement for the 2024 calendar year.



Total number of female clients in 2024 broken out by areas of need as identified by the PrediCT assessment

JB-CSSD examined the number of unique juvenile girls in 2024 who were disposed as “Supervision” or “Probation with Placement” by area of need as identified by the PrediCT risk assessment. “Above threshold” refers to girls having a specific area of need that exceeds the baseline set forth by the PrediCT assessment.

Of 696 girls, the most common area of need as identified by the PrediCT assessment for supervised girls was **“Mental Health” (52.3%)**. This percentage of girls has been identified as needs above the threshold. “Mental Health” as an area of need was significantly higher than the other identified areas of need. The high rate of mental health needs further supports the recommendation of the Gender Responsiveness Workgroup (now subgroup) from the 2024 legislative session: “The Gender Responsiveness Workgroup [now subgroup] and Transforming

Children’s Behavioral Health Committee will share information on gender responsive practices and policies for youth with child welfare involvement.”

The area of need with the second highest percentage of girls with need above threshold is **“Callousness” (37.6%)**. The other areas of need were close together in terms of the percentage of girls with need above threshold: “Substance Use” (34.1%), “Impulsive/Oppositional” (33.6%), “Family Distress” (33.3%), “Anger and Aggression” (33.0%), “Academic Disengagement” (30.9%), and “Antisocial Peers” (26.3%).

Table 2.6 displays the areas of need as identified by the PrediCT assessment and the number and percentage of girls with need above threshold.

Areas of Need	Girls with Need Above Threshold	% of Girls with Need Above Threshold
Mental Health	364	52.3%
Callousness	262	37.6%
Substance Use	237	34.1%
Impulsive/Oppositional	234	33.6%
Family Distress	232	33.3%
Anger and Aggression	230	33.0%
Academic Disengagement	215	30.9%
Antisocial Peers	183	26.3%

Three-Year Recidivism Rate for Youth Broken Out By Gender, Risk Level, And Disposition

JB-CSSD reviewed the three-year recidivism rate for youth in Connecticut’s juvenile justice system by gender, disposition type, and risk level. To do this, all referrals disposed between July 1st, 2019 and June 30th, 2022 were pulled to allow for three years between the disposition date and the date the data was examined. **Recidivism is considered another arrest within 36 months following the original referral.**

In terms of data analysis, “No JJ Involvement” refers to any dispositions of “Discharge,” “Dismissal,” “No Disposition,” “Nolle/Not Prosecuted,” and “Not Accepted.” Definitions of “No JJ Involvement,” “Probation with Placement,” “Supervision,” “Suspended Prosecution,” and “Transfer” are the same as previously outlined.

Recidivism Rates

The recidivism rates and number of youths is provided based on gender and disposition type. For each disposition type other than “Suspended Prosecution” boys had higher rates of

recidivism. The recidivism rates of girls by disposition are as follows, in order of highest to lowest: “Suspended Prosecution” (100.0%), “Probation with Placement” (85.0%), “Transfer” (62.5%), “Supervision” (50.3%), and “No JJ Involvement” (45.4%). Overall, boys had higher rates of recidivism.

Table 2.7.a: Recidivism Rates by Disposition Type between 2019 and 2022

Disposition Type	Female		Male	
	Rate	Number of Youth	Rate	Number of Youth
No JJ Involvement	45.4%	3,027	67.1%	7,476
Probation with Placement	85.0%	20	93.7%	457
Supervision	50.3%	1,172	67.4%	3,436
Suspended Prosecution	100.0%	*	75.0%	*
Transfer	62.5%	16	64.3%	347

Risk Levels

The recidivism rates and number of youths was provided based on gender and risk level as indicated by the PrediCT assessment. The **highest recidivism rate** was for girls who were assigned a **Tier IV risk level** (85.8%). The lowest recidivism rate was for girls who were assigned a Tier I risk level (37.0%). The recidivism rates for the remaining risk levels are as follows: Tier II (52.3%), Tier III (57.1%), and Tier V (75.0%). For girls, the recidivism rates increased along with the risk levels until Tier IV. Girls assigned a Tier V risk level then had lower recidivism rates compared to girls assigned a Tier IV risk level.

The highest recidivism rate was for boys who were assigned a Tier V risk level. The lowest recidivism rate was for boys with a Tier I risk level. The recidivism rates for the remaining risk levels are as follows: Tier II (67.5%), Tier III (79.6%), and Tier IV (91.7%). As the risk level increases, the recidivism rates for boys increases.

Table 2.7.b: Recidivism Rates by Risk Level between 2019 and 2022

Risk Level	Female		Male	
	Rate	Number of Youth	Rate	Number of Youth
Tier I	37.0%	46	45.6%	158
Tier II	52.3%	174	67.5%	687
Tier III	57.1%	184	79.6%	663
Tier IV	85.8%	113	91.7%	577
Tier V	75.0%	28	95.7%	506

JB-CSSD examined all female juveniles with a detention admission between January 1st, 2022 and December 31st, 2024 disaggregated by age of admission, race/ethnicity, DCF involvement, and court location.

Age At Admission

In 2022, there were 98 detention admissions involving 76 unique girls, with the most common age of admission being 16 years old (31.6% of admissions). 17 years old was the second most common age of admission with 25.5% of admissions, followed by 14 years old (23.5%), and 15 years old (15.3%), respectfully. The number of admissions and unique girls peaked at 16 years old, decreasing for 17 and 18+ years old.

In 2023, there were 172 detention admissions involving girls, which was a 75.5% increase in the number of detention admissions compared to 2022. There were 120 unique girls involved, which was a 57.9% increase in the number of unique girls involved compared to 2022. The most common age at detention admission was 15 years old, younger than the year prior, representing 26.7% of admissions. The second most common age at admission was 16 years old (23.3%), followed by 17 years old (20.3%) and 14 years old (20.3%), respectfully. The number of admissions and unique girls peaked at 15 years old, subsequently decreasing for girls older than 15.

In 2024, there was a 1.2% increase in the number of detention admissions but a 3.3% decrease in the number of unique girls involved compared to 2023, meaning more girls were admitted to detention centers on multiple occasions. Of the 174 detention admissions involving girls, 35.1% were 15 years old at admission. 15-year-olds were the most common age at admission. 16 years old was the second most common age of admission, making up 21.3% of all detention admissions involving girls, followed by 14 years old (16.1%), 17 years old (13.8%), and 13 years old (10.3%), respectfully. Compared to 2022, the most common age at admission had decreased from 16 years old to 15 years old.

Table 2.8.a: Detention Admissions for Girls by Age at Admission between 2022 and 2024

Age at Admission	2022		2023		2024	
	Number of Admissions	Number of Unique Girls	Number of Admissions	Number of Unique Girls	Number of Admissions	Number of Unique Girls
12	*	*	*	*	*	*
13	*	*	*	*	18	10
14	23	15	35	21	28	20
15	15	14	46	32	61	37
16	31	23	40	27	37	24
17	25	20	35	27	24	19
18+	*	*	*	*	*	*
Total	98	76	172	120	174	116

Race/Ethnicity

In 2022, the highest number of admissions and unique girls involved Non-Hispanic Black girls, with 50.5% of admissions involving Non-Hispanic Black girls. Of the unique girls, 50% were Non-Hispanic Black. The second highest number of admissions (34.3%) and unique girls (33.3%) involved Hispanic girls, and the third highest number of admissions (14.1%) and unique girls (15.3%) involved Non-Hispanic White.

In 2023, the highest number of admissions and unique girls involved Hispanic girls, with 45.9% of admissions involving Hispanic girls. Of the unique girls, 43.6% were Hispanic. Non-Hispanic Black girls constituted 31.9% of admissions and 35.5% of unique girls. Non-Hispanic White girls constituted 18.6% of admissions and 18.2% of unique girls.

In 2024, the highest number of admissions and unique girls involved Non-Hispanic Black girls, with 45.9% of admissions involving Non-Hispanic Black girls. Of the unique girls, 45.5% were Non-Hispanic Black. Hispanic girls constituted 37.9% of admissions and 36.6% of unique girls. Non-Hispanic White girls constituted 16.1% of admissions and 17.9% of unique girls.

Table 2.8.b: Detention Admissions for Girls by Race/Ethnicity Between 2022 and 2024

Race/Ethnicity	2022		2023		2024	
	Number of Admissions	Number of Unique Girls	Number of Admissions	Number of Unique Girls	Number of Admissions	Number of Unique Girls
Hispanic	34	24	79	48	66	41
Non-Hispanic Black	50	36	55	39	80	51
Non-Hispanic White	14	11	32	20	28	20
Non-Hispanic Other	*	*	*	*	*	*
Total	99	72	172	110	174	112

DCF Involvement

JB-CSSD indicated DCF involvement for girls who met one of the following criteria on their intake screen: (1) the client is marked as currently DCF involved, or (2) the client had previous DCF placement. This data was pulled from the agency's information system for all clients marked as female with open cases in 2024. There were 145 dually involved girls between 2022 and 2024.

Across all three calendar years there were higher numbers of admissions for girls with DCF involvement compared to girls with no DCF involvement, yet there were fewer unique girls with DCF involvement compared to those with no DCF involvement. **This indicates that girls with**

DCF involvement are more likely to be admitted to detention facilities on more than one occasion compared to girls with no DCF involvement.

In 2022, 53.5% of detention admissions involved girls with DCF involvement. The remaining girls admitted to a detention facility were not involved with DCF. 2023 saw 52.3% of detention admissions involving girls with DCF involvement. 51.7% of detention admissions in 2024 involved girls with DCF involvement. 2024 also saw a slight decrease in the number of unique girls with no DCF involvement that were admitted to a detention facility.

Table 2.8.c: Detention Admissions for Girls by DCF Involvement Between 2022 and 2024

DCF Involvement	2022		2023		2024	
	Number of Admissions	Number of Unique Girls	Number of Admissions	Number of Unique Girls	Number of Admissions	Number of Unique Girls
Yes	53	37	90	50	90	58
No	46	39	82	66	84	59
Total	99	76	172	116	174	117

By Court Location

Waterbury (17.2%), Bridgeport (16.2%), New Britain (15.2%), and Hartford (14.1%) had the highest numbers of detention admissions in 2022. Waterbury had the largest admission number to unique girls ratio, indicating they had the highest number of girls who were admitted to a detention facility more than once in comparison to the other municipalities evaluated.

In 2023, most municipalities evaluated saw an increase in the number of detention admissions compared to 2022. Bridgeport (21.5%), New Haven (18.0%), Hartford (16.3%), and New Britain (14.0%) had the highest numbers of detention admissions in 2023. Overall, 2023 saw a 73.7% increase in overall detention admissions from 2022.

In 2024, most municipalities evaluated saw an increase in the number of detention admissions compared to 2023. Bridgeport (25.3%), New Haven (18.4%), and Waterbury (12.6%) had the highest number of detention admissions in 2024. Overall, 2024 saw a 1.2% increase in the number of detention admissions.

Table 2.8.d: Detention Admission for Girls by Court Location Between 2022 and 2024

Court Location	2022		2023		2024	
	Number of Admissions	Number of Unique Girls	Number of Admissions	Number of Unique Girls	Number of Admissions	Number of Unique Girls
Bridgeport	16	11	37	25	44	25
Hartford	14	14	28	14	16	13
Middletown	*	*	15	11	17	10
New Britain	15	10	24	14	12	*
New Haven	11	*	31	21	32	17
Rockville	*	*	*	*	12	10
Stamford	*	*	*	*	*	*
Torrington	*	*	*	*	*	*
Waterbury	17	*	20	16	22	17
Waterford	*	*	*	*	13	10
Willimantic	*	*	*	*	*	*
Total	99	76	172	116	174	117

Service Type

JB-CSSD examined all female juveniles with a probation case who received services between January 1st, 2022 and December 31st, 2024. Service types include home-based, community-based, staff secure residential, and secure residential. Detention is excluded. Home-based services refer to services that are provided within the girl’s home. Community-based services refer to services that are provided within the community, such as for behavioral health concerns. Secure residential refers to a residential facility that is hardware secured with direct staff supervision, surveillance enhancements, and physical barriers that allow for close supervision and controlled movement for the youth housed there.²⁷ Staff secure residential refers to a residential facility that provides residential treatment for youth in a structured setting where youth are monitored by staff.

In 2022, the most common service type for girls was community-based, which served 325 unique girls (66% of all supervised girls). Home-based services were the next most common service type for girls, serving 94 unique girls (19% of all supervised girls). Staff-secure residential services were the third most common service type, serving 16 unique girls (3% of all

²⁷ Substitute House Bill No. 5041 - Public Act No. 18-31: AN ACT CONCERNING THE RECOMMENDATIONS OF THE JUVENILE JUSTICE POLICY AND OVERSIGHT COMMITTEE AND CONCERNING THE TRANSFER OF JUVENILE SERVICES FROM THE DEPARTMENT OF CHILDREN AND FAMILIES TO THE COURT SUPPORT SERVICES DIVISION OF THE JUDICIAL BRANCH. *Connecticut General Assembly*. <https://www.cga.ct.gov/2018/act/pa/2018PA-00031-R00HB-05041-PA.htm>

supervised girls). The least common service type was secure residential which served 14 unique girls (3% of all supervised girls).

In 2023, the most common service type was community-based which served 436 unique girls (68% of all supervised girls). The next most common service type was home-based services which served 128 unique girls (20% of all supervised girls). The third most common service type was secure residential which served 20 unique girls (3% of all supervised girls). The least common service type was staff-secure residential.

In 2024, the most common service type was community-based which served 493 unique girls (71% of all supervised girls). The next most common service type was home-based services which served 165 unique girls (24% of all supervised girls). The third most common service type was secure residential which served 23 unique girls (3% of all supervised girls). The least common service type was staff-secure residential which served 15 unique girls (2% of all supervised girls).

Table 2.9: Unique Girls in Each Service Type Between 2022 and 2024

Service Type	2022			2023			2024		
	Unique Girls	Supervised Girls	% of Unique Girls	Unique Girls	Supervised Girls	% of Unique Girls	Unique Girls	Supervised Girls	% of Unique Girls
Community-Based	325	491	66%	436	640	68%	493	698	71%
Home-Based	94	491	19%	128	640	20%	165	698	24%
Secure Residential	14	491	3%	20	640	3%	23	698	3%
Staff-Secure Residential	16	491	3%	*	640	1%	15	698	2%

[Data from the Department of Correction](#)

The Department of Correction (DOC) provided data for the girls in their care at York Correctional Institution (YCI) between 2022 and 2024. A total of 19 girls under the age of 18 were admitted to YCI between 2022 and 2024. The earliest admit date provided was in January 2022 and the latest admit date was in November 2024. Due to such a small population of girls under the age of 18 at YCI, the data will be analyzed across the entire time range. All data that was provided for the development of this landscape analysis was de-identified, secondary data.

[Demographics](#)

The largest age group of girls housed at YCI between 2022 and 2024 was 17 years old, at 47.4% of all girls admitted under the age of 18. 16-year-olds made up the second largest age group of

these girls, at 42.1%. The remaining girls were 15 years old. All of the girls were unsentenced at the time of their admission. 78.9% of these girls were discharged during the date range. Of the remaining 21.9% of girls that were not discharged, they turned 18 years old at some point between 2022 and 2024.

Details of Stay

Four of the girls had a disciplinary report (DR) with seven total disciplinary reports between them. The offenses that resulted in a DR included threats, fighting, insulting language or behavior, security tampering, or flagrant disobedience. The most common offenses were threats and fighting, with two incidents of each. The remaining offenses only had one incident each.

Of the girls that were discharged, **the mean length of stay was 56 days**, with a range between zero days (discharged the same day of admission) and 228 days. The girls who were not indicated as being discharged were not included in this analysis.

V. Data Analysis of Intellectual and Learning Disabilities

Level Setting

Intellectual disabilities are defined by significant cognitive deficits (specifically an IQ score of below 70) and is marked by significant deficits in functional and adaptive skills.²⁸ Adaptive skills involve the ability to carry out age-appropriate daily life activities.³¹ The Diagnostic and Statistical Manual of Mental Disorders, 5th Edition (DSM-5)²⁹ defines intellectual disabilities as neurodevelopmental disorders that begin in childhood and are characterized by intellectual difficulties in combination with difficulties in conceptual, social, and practical areas of living.³¹

Learning disabilities are diagnosed through both medical and educational perspectives.³¹ From an educational perspective, a specific learning disorder is defined by the *Individuals with Disabilities Education Act (IDEA)* as “a disorder in one or more of the basic psychological processes involved in understanding or in using language, spoken or written, which disorder may manifest itself in the imperfect ability to listen, think, speak, read, write, spell, or do

mathematical calculations.”³⁰ Youth are typically diagnosed using the IDEA criteria in school settings as a prerequisite to receiving educational interventions and accommodations.³¹ The DSM-5 is used to diagnose a specific learning disability through a medical perspective and consists of four potential symptoms:

²⁸ Committee to Evaluate the Supplemental Security Income Disability Program for Children with Mental Disorders, Boat, T. F. (Editor), Wu, J. T. (Editor), Board of the Health of Select Populations, Board on Children, Youth, and Families, Institute of Medicine, and Division of Behavioral and Social Sciences and Education. (2015). Mental disorders and disabilities among low-income children. *The National Academies Press*.

²⁹ American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders (5th ed.).

³⁰ Individuals with Disabilities Education Act, 20 U.S.C. § 1400 (2004)

1. Persistent difficulties in reading, writing, arithmetic, or mathematical reasoning skills during formal years of schooling. Symptoms may include inaccurate or slow and effortful reading, poor written expression that lacks clarity, difficulties remembering number facts, or inaccurate mathematical reasoning.
2. Current academic skills must be well below the average range of scores in culturally and linguistically appropriate tests of reading, writing, or mathematics. Accordingly, a person who is dyslexic must read with great effort and not in the same manner as those who are typical readers.
3. Learning difficulties begin during the school-age years.
4. The individual's difficulties must not be better explained by developmental, neurological, sensory (vision or hearing), or motor disorders and must significantly interfere with academic achievement, occupational performance, or activities of daily living.³²

DCF and JB-CSSD were tasked with providing information concerning the girls with involvement in each respective agency that have been diagnosed with an intellectual and/or learning disability. Along with such disabilities comes the provision of specialized education resources. The information provided by both agencies is outlined below.

Data from the Department of Children and Families

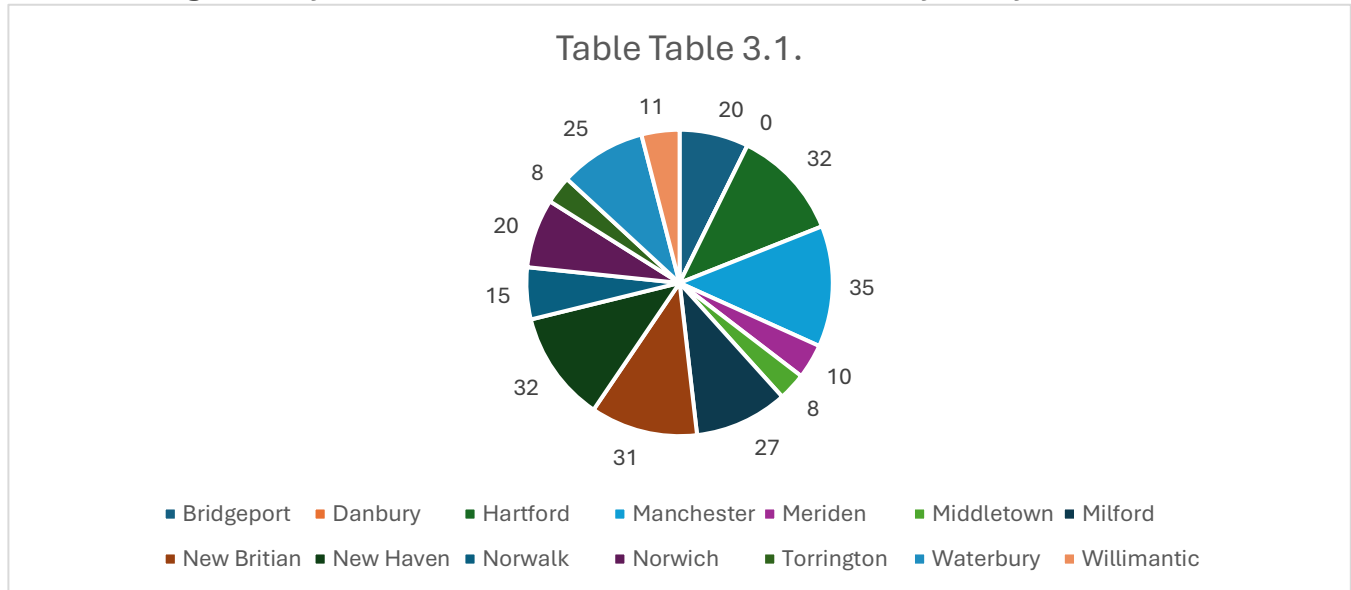
The Department of Children and Families (DCF) provided data representing unique girls between the ages of 12 and 17 years old that were in DCF care between January 1st, 2025 and September 1st, 2025 that were receiving special education services. A total of 279 girls were identified as receiving special education services out of 701 total girls with DCF involvement with available education data, making up 39.8% of the overall total of girls. To comply with Data Suppression Guidelines of the Connecticut State Department of Education (CSDE), any data point ≤ 5 has been removed or replaced with an asterisk (*).

Location

DCF provided data on the number of girls under DCF care that have been identified as having any intellectual and/or learning disability for the 2023-2024 and 2024-2025 academic years by DCF area office location, totaling 14 locations across Connecticut.

Manchester had the highest number of girls that have been identified as having an intellectual and/or learning disability with 35 girls, making up 12.5% of the identified girls. Manchester is closely followed by New Haven and Hartford with 32 girls (11.5% of all identified girls) and New Britain with 31 girls (11.1% of all identified girls). Danbury had the lowest number of girls with intellectual and/or learning disabilities, as it falls under the data suppression guideline threshold.

Table 3.1. Number of Female students in DCF care that have been identified as having any intellectual and/or learning disability for the 2023-2024 and 2024-2025 academic years by locations.



Age

DCF provided data on the number of girls under DCF care that have been identified as having any intellectual and/or learning disability for the 2023-2024 and 2024-2025 academic years by DCF area office location and age.

17-year-olds represented the highest number of girls in the child welfare system that have been identified as having an intellectual and/or learning disability across the 2023-2024 and 2024-2025 academic years, making up over a quarter (25.8%) of all identified girls. 12- and 14-year-olds were the smallest groups of identified girls, making up 11.5% and 11.8% of all girls, respectfully. Danbury had the lowest number of girls identified as having an intellectual and/or learning disability, followed by Middletown (2.9%), and Torrington (2.9%).

Table 3.2. Female students identified as having any intellectual/learning disability for the 2023-2024 and 2024-2025 academic years by age and location.

Area Office Location	Age						Grand Total
	12	13	14	15	16	17	
Bridgeport	*	*	*	6	*	*	20
Danbury		*	*	*			*
Hartford	*	*	*	*	*	11	32
Manchester	*	*	*	*	10	9	35
Meriden		*	*	*	*	*	10
Middletown	*	*	*	*	*	*	8
Milford	6	*	*	6	*	8	27
New Britain	*	*	*	*	6	9	31
New Haven	*	*	*	9	*	8	32
Norwalk	*	*	*	*	*	*	15
Norwich	*	*	*	*	*	*	20
Torrington	*	*	*	*	*	*	8
Waterbury	*	*		6	*	6	25
Willimantic	*	*		*	*	*	11
Grand Total	32	37	33	54	51	72	279

Race/Ethnicity

DCF provided data on the number of girls under DCF care that have been identified as having any intellectual and/or learning disability for the 2023-2024 and 2024-2025 academic years by DCF area office location and race/ethnicity as reported to the Connecticut State Department of Education.

Race/ethnicity was categorized into five categories: American Indian or Alaska Native, Black or African American, Hispanic/Latino of any race, Two or More Races, and White. Hispanic/Latino girls make up the highest race/ethnicity category of girls in DCF care that have been identified

as having an intellectual and/or learning disability, at 37.9%. White girls consist of the second highest percentage of girls in the child welfare system with an identified intellectual and/or learning disability accounting for 27.2%, closely followed by Black or African American girls accounting for 26.5%. Girls with two or more races accounted for 7.9% of the 279 girls identified.

Table 3.3. Female students identified as having any intellectual/learning disability for the 2023-2024 and 2024-2025 academic years by location and race/ethnicity.

Area Office Location	Race/Ethnicity Reported to CSDE					Grand Total
	American Indian or Alaska Native	Black or African American	Hispanic/Latino of any race	Two or More Races	White	
Bridgeport		6	9	*	*	20
Danbury	*		*		*	*
Hartford		16	14		*	32
Manchester		*	12	*	16	35
Meriden		*	*	*	*	10
Middletown			*	*	6	8
Milford		6	12	*	*	27
New Britain		*	14	*	11	31
New Haven		18	10		*	32
Norwalk		*	6	*	*	15
Norwich		*	*	*	11	20
Torrington		*	*	*	*	8
Waterbury		*	13	*	*	25
Willimantic		*	*		6	11
Grand Total	*	74	106	22	76	279

Identified Disability

DCF has provided data on the number of girls in its care with a certain intellectual or learning disability for the 2023-2024 and 2024-2025 academic years. The procurement of this data is meant to better understand the specific needs of the girls in the child welfare system in hopes of improving the support they receive.

A significant percentage (41.6%) of the 279 girls identified by DCF have been diagnosed with Emotional Disability (ED). Emotional Disability is defined in Connecticut as “a condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree, that adversely affects educational performance:

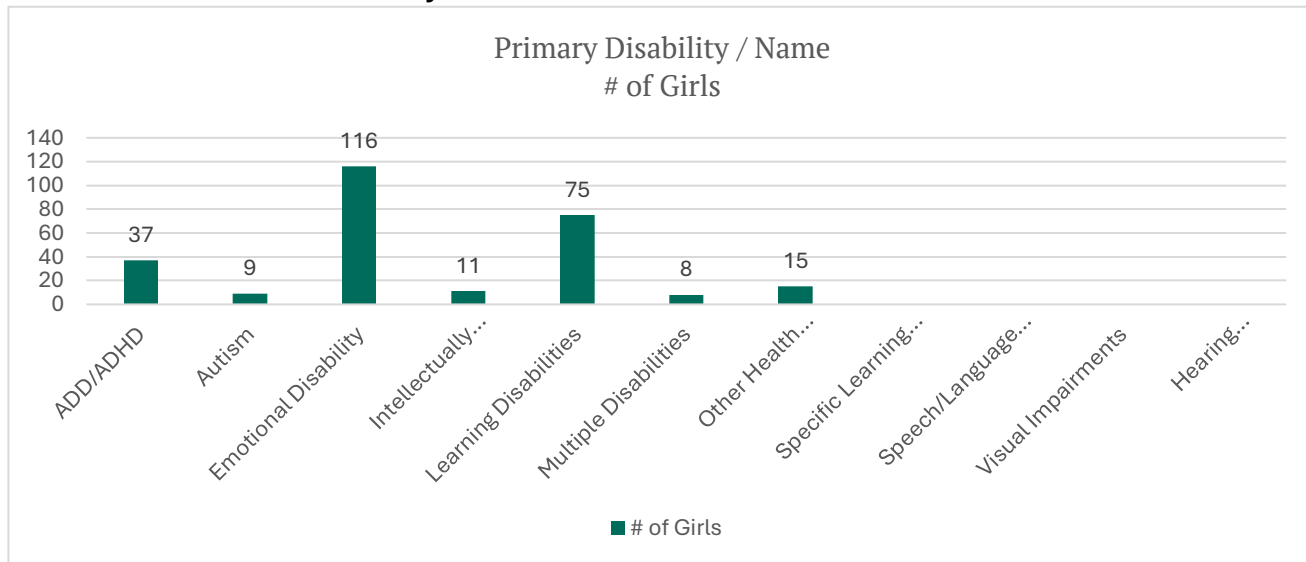
1. an inability to learn that cannot be explained by intellectual, sensory or health factors;
2. an inability to build or maintain satisfactory interpersonal relationships with peers and teachers;
3. inappropriate types of behavior or feelings under normal circumstances;
4. a general pervasive mood of unhappiness or depression; or
5. a tendency to develop physical symptoms or fears associated with personal or school problems.”³¹

This definition is consistent with the language used by the *Individuals with Disabilities Education Act* (IDEA). The percentage of girls with diagnosed emotional disability is likely due to the nature of the criteria which serves as a “catch-all” for irregular behavior and an inability to learn in individuals.

Following emotional disability, learning disabilities is the second highest diagnosis, with just over a quarter of the identified girls (26.9%) being diagnosed with some sort of learning disability. Attention Deficit Disorder/Attention-Deficit/Hyperactivity Disorder (ADD/ADHD) was a diagnosis among 13.3% of these girls. 5.4% of the girls was assigned a general diagnosis of “Other Health Impairments;” 3.9% of the girls were diagnosed as being “Intellectually Disabled;” and 2.9% of the girls were diagnosed with “Multiple Disabilities,” indicating a small percentage of girls facing a comorbidity of disabilities. The number of Specific Learning Disabilities/Dyslexia, Speech/Language Impairments, Visual Impairments, and Hearing Impairments diagnoses were all very small (≤ 5), therefore the exact number cannot be provided. Yet the small population among this cohort with these disabilities indicates that this is not a high-need area for DCF-involved female students.

³¹ Connecticut State Department of Education. (n.d.). Guidelines for identifying and educating students with emotional disability. <https://portal.ct.gov/sde/publications/identifying-and-educating-students-with-emotional-disability/definition-and-interpretation>

Table 3.4. Female students identified as having a specific intellectual/learning disability for the 2023-2024 and 2024-2025 academic years.



Identified Disability and Location

DCF provided data on the number of girls under DCF care that have been identified as having any intellectual and/or learning disability for the 2023-2024 and 2024-2025 academic years by DCF area office.

The only disabilities that had enough girls with that diagnosis were ADD/ADHD, Emotional Disability, and Learning Disabilities. All locations met the data suppression threshold for girls diagnosed with any other disability, indicating a low prevalence. ADHD/ADD diagnoses were highest in Hartford at 18.9% and New Haven at 16.2%. No other location met the data suppression threshold.

Manchester was identified as having the largest percentage of Emotional Disability and Learning Disabilities diagnoses, 13.8% and 18.7% respectfully. Girls located in Milford and New Britain each made up 12.9% of ED diagnoses, girls in New Haven made up 11.2% of ED diagnoses, followed by girls in Norwich (9.5%), Hartford (7.8%), Waterbury (6.0%), and Willimantic and Bridgeport (5.2%). The remaining locations did not meet the data suppression threshold.

Enough girls were diagnosed with Learning Disabilities (LD) in Hartford, Bridgeport, New Britain, Norwalk, Waterbury, and New Haven to cross the data suppression threshold. 13.3% of LD diagnoses were in Hartford, 12.0% were in Bridgeport, 10.7% were in New Britain, Norwalk, and Waterbury; and 8.0% were in New Haven.

Table 3.5. Female students identified as having a specific intellectual/learning disability for the 2023-2024 and 2024-2025 academic years by location

Primary Disability	Area Office Location														Grand Total
	Bridgeport	Danbury	Hartford	Manchester	Meriden	Middletown	Milford	New Britain	New Haven	Norwalk	Norwich	Torrington	Waterbury	Willimantic	
ADD / ADHD	*	*	7	*	*	*	*	*	6			*	*		37
Autism	*		*				*	*	*				*		9
Emotional Disability	6	*	9	16	*	*	15	15	13	*	11	*	7	6	116
Intellectually Disabled		*	*	*		*		*	*	*				*	11
Learning Disabilities	9		10	14			*	8	6	8	*	*	8	*	75
Multiple disabilities							*	*	*				*	*	8
Other Health Impairments			*		*	*	*	*	*		*	*	*		15
Specific Learning Disabilities/ Dyslexia										*	*	*		*	*
Speech/ Language Impairments				*									*		*
Visual Impairments											*				*
Hearing Impairments	*														*
Grand Total	20	*	32	35	10	8	27	31	32	15	20	8	25	11	279

Identified Disability and Race/Ethnicity

DCF has provided data regarding specific identified disabilities broken down by race/ethnicity across the 2023-2024 and 2024-2025 academic years. Across all races/ethnicities Emotional Disability (ED) was the most common disability reported. Girls who identify as Hispanic/Latino comprise the majority of the cohort with any diagnosed disability, followed by White and Black or African American students. While the same number of Hispanic/Latino and Black or African American girls were diagnosed with ED, this diagnosis makes up a much greater percentage of Black or African American girls (50.0%) than Hispanic/Latino girls (34.9%). Girls with this diagnosis also make up 50.0% of girls who identify as two or more races and 39.5% of White girls. An Intellectually Disabled diagnosis is highest among Hispanic/Latino girls, with no other notable racial/ethnic populations. ADD/ADHD was most prevalent in Hispanic/Latino DCF-involved girls, with 40.5% of all ADD/ADHD diagnoses involving a girl identified as Hispanic/Latino. White girls follow closely with 27.0% of these diagnoses and Black or African American follow with 21.6%. Of all disabilities, Hearing Impairments and Visual Impairments were the least common to be reported.

Table 3.6. Female students identified as having a specific intellectual/learning disability for the 2023-2024 and 2024-2025 academic years by race and ethnicity.

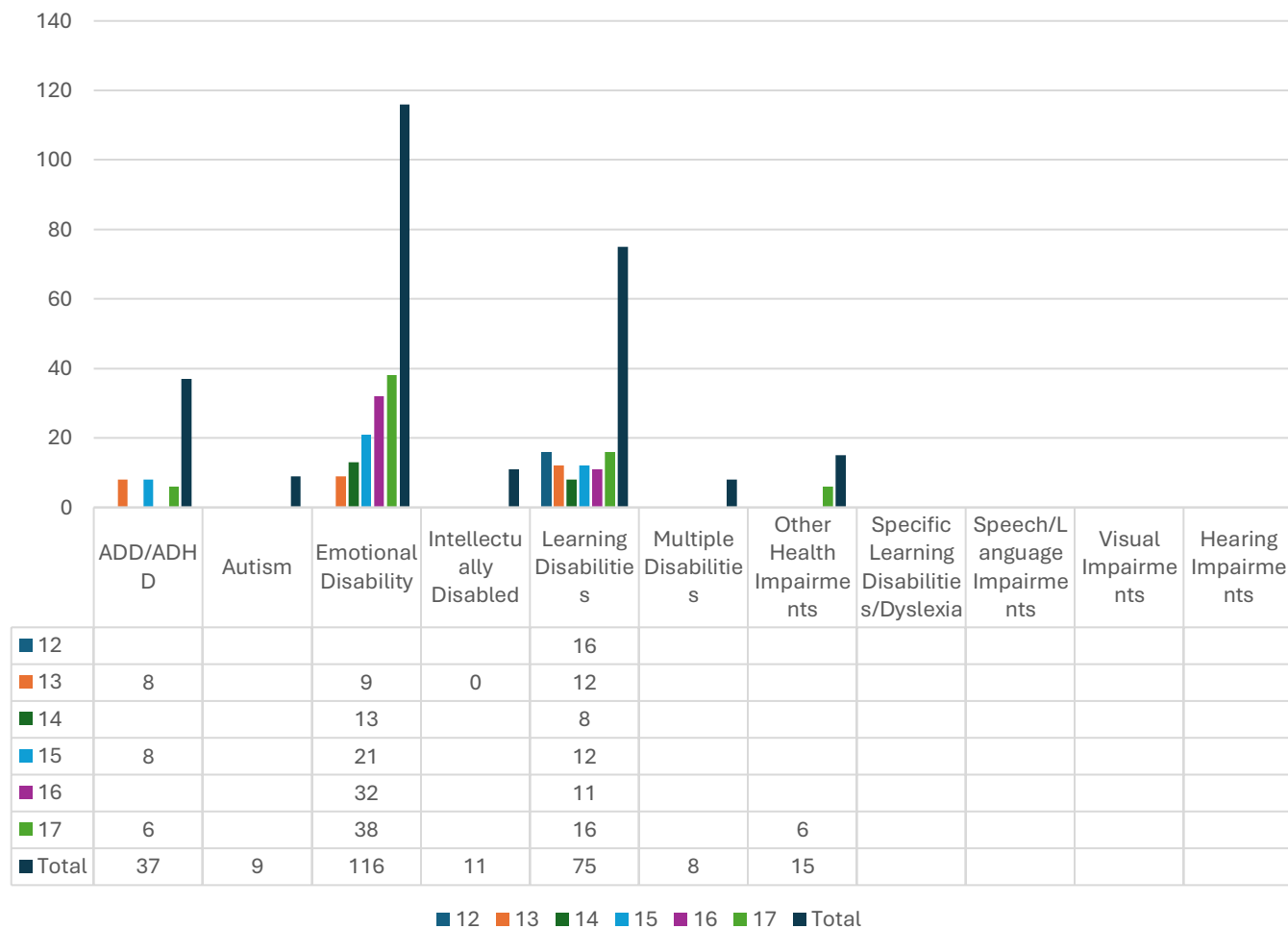
Primary Disability	Race/Ethnicity Reported to CSDE					Total
	American Indian or Alaskan Native	Black or African American	Hispanic/Latino of any race	Two or more races	White	
ADD/ADHD		8	15	*	10	37
Autism		*	*	*	*	9
Emotional Disability	*	37	37	11	30	116
Intellectually Disabled			7	*	*	11
Learning Disabilities		19	34	*	19	75
Multiple Disabilities		*	*	*	*	8
Other Health Impairments		*	*		*	15
Specific Learning Disabilities/Dyslexia		*			*	*
Speech/Language Impairments			*			*
Visual Impairments			*			*
Hearing Impairments					*	*
Total	*	74	106	22	76	279

Identified Disability and Age

DCF has provided data regarding specific identified disabilities broken down by age across the 2023-2024 and 2024-2025 academic years. An ADD/ADHD diagnosis was present among 13.3% of the girls in this cohort. The prevalence of ADD/ADHD among this cohort of girls was most present in 13-, 15-, and 17- year-olds: 21.6% of all 13-year-olds, 14.8% of all 15-year-olds, and 8.3% of all 17-year-olds.

17-year-olds had the highest number of ED diagnoses, making up 32.8% of all ED diagnoses. Quickly following, 16-year-olds comprised 27.6% of the ED diagnoses. The number of girls with an ED diagnosis increased with age, with a 44.4% increase between 13 and 14, a 61.5% increase between 14 and 15, a 52.4% increase between 15 and 16, and a 18.8% increase between 16 and 17. The most significant increase in the number of girls with an ED diagnosis occurred between the ages of 14 and 15 years old, indicating an increase in diagnoses given to this age group.

Table 3.7. Female students identified as having a specific intellectual/learning disability for the 2023-2024 and 2024-2025 academic years by age.



Data from the Judicial Branch Court Support Services Division

JB-CSSD provided general data regarding the youth in their system who have been identified with possible intellectual concerns based on the intake interview conducted by the Classification and Program Officer. This data is not as granular compared to the data provided by DCF due to a much lower number of girls in this cohort. In 2025, only about 120 girls came into JB-CSSD care. Below you can find a brief summary of the makeup of youth with possible intellectual concerns that were involved in pretrial detention across fiscal years 2023, 2024, and 2025.

In fiscal year 2023, 52.4% of the pretrial juvenile detention population, which includes boys and girls, were identified with possible intellectual concerns. Of youth admitted to pretrial juvenile detention, 19.1% reported that they were involved with special education, while 37.0% of the parents reported their child was involved with special education. In fiscal year 2024, 53.2% of the pretrial juvenile detention population were identified with possible intellectual concerns. Of youth admitted to pretrial juvenile detention, 24.9% reported that they were involved with special education while 43.4% of parents reported their child was involved with special education. In fiscal year 2025, at the time of this data collection, 42.6% of youth admitted to pretrial juvenile detention was identified with possible intellectual concerns. Of this population, 22.0% reported that they were involved with special education and 39.7% of parents reported that their child was involved with special education.

VI. Barriers

During the development of this landscape analysis, multiple barriers needed to be addressed, most of which were due to the development and implementation of a survey for system-involved girls. To acquire feedback from those directly affected by the gender responsive practices in Connecticut, as legislatively charged, a survey was developed to be administered to girls involved with DCF and JB-CSSD. This survey was to be administered by DCF and JB-CSSD personnel. DOC-involved girls were excluded from the target sample due to the minute number of girls in the York Correctional Institution (YCI) at any one time. This effort is to protect them from identifying information being shared. The target population was intended to be girls with at least one month of DCF involvement and any current or prior involvement with the juvenile justice system.

Barriers were met when it came to implementation. Identifying the correct cohort of girls to include in the survey responses proved to be difficult due to data-sharing limitations across state agencies. Since the target population was intended to be girls with dual-system involvement, the two state agencies had concerns over how to identify the girls that were included in the other agency's response set to prevent duplicative data. There is no standardized method of data sharing between agencies, which makes this action step next to impossible. Additional steps should be taken to better standardize the data sharing process and produce structured guidelines for cross-agency data sharing.

Another barrier was met with regards to speaking with youth in general. Minors (those under the age of 18) and those who are supervised (incarcerated individuals, child welfare-involved individuals, etc.) are considered protected classes of people. Therefore, outside entities having access to these youth produce a risk to them. This makes receiving feedback from youth difficult to navigate. To ensure the proper avenues are taken, this aspect of the report has been paused. State agencies and stakeholders are regrouping on the feedback portion and how to best accomplish this. An addendum will be made to this report once the survey is administered and analysis is completed. In the future iteration of this report that includes the survey response analysis, legislative and/or policy recommendations will be presented.

Trauma-informed, gender-responsive, and culturally competent somatic interventions are a critical component of physical and mental health approaches for girls involved in the justice system.³² **Developing new programs with these focus areas for system-involved girls in justice and residential facilities and improving existing programs is crucial.**

VII. Looking Forward

Following the release of this landscape analysis, efforts will be continued to ensure the voices of systems-involved girls are considered in future gender responsive work. A survey will be administered to girls with at least one month of current involvement with the Department of Children and Families (DCF) and either current or previous involvement with the Judicial Branch Court Support Services Division (JB-CSSD). The survey aims to capture their personal opinions as well as changes they believe would be beneficial for systems-involved girls. Participation in the survey will be entirely voluntary, and the survey itself will be administered by the respective agency's personnel. To protect the privacy of the girls who choose to participate in the survey, all responses will be deidentified.

The purpose of this survey is not only to comply with the legislative charge but is also to focus the attention of this matter to those it directly effects: the girls in Connecticut's juvenile justice and child welfare systems. To not lose sight of this, it is crucial that the voices of girls are not only heard but listened to. These responses will also help lead future recommendations regarding gender responsiveness for legislative consideration. The analysis of the survey and subsequent follow up to this landscape analysis will be released in Fall 2026.

³² Epstein, R., & Gonzalez, T. (2017). Gender & trauma: Somatic interventions for girls in juvenile justice: Implications for policy and practice. *Georgetown Law Center on Poverty and Inequality*.
<https://genderjusticeandopportunity.georgetown.edu/wp-content/uploads/2020/06/gender-and-trauma-1.pdf>

VIII. Glossary

DCF involved – any contact with the Department of Children and Families (DCF)

Discharge - A legal status following case disposition whereby there is an adjudication of delinquency, but no further court intervention is warranted.

Dismissal - A legal status following case disposition whereby the court case is terminated and there is no finding or admission of guilt and no further court intervention warranted.

Disposition – the final decision by the court in a juvenile justice case

Dually involved – having DCF involvement at the time of a youth’s detention admission or at the time of their most recent juvenile justice system contact prior to admission

Nolle/Not Prosecuted - A prosecutorial decision to suspend prosecution for a period of 13 months

Not Accepted - When a determination is made at court intake, based on the allegations and/or the juvenile’s risk factors and behavioral health needs, that a delinquency complaint does not warrant court intervention and/or the juvenile could benefit from community-based interventions.

PrediCT – a scripted, actuarial, criminal risk/needs assessment that examines the youth's risks, needs, and protective factors related to their academics, family, behavior, attitudes, peers, mental health, substance use, and criminal history. The PrediCT places the youth in one of five (5) tiers that indicate and outline risk domains, and probable 12-month recidivism rates. The lower tier levels (I, II) indicate lower levels of risk and needs and identify youth who have limited need for intervention. The higher tier levels (III, VI, V) indicate a higher level of risk and needs and identify youth recommended for higher levels of supervision and services.

Prior arrests – the number of delinquent court referrals a youth had prior to the current referral

Probation with Placement - a legal status whereby a juvenile who has been adjudicated delinquent is placed by the court under the supervision of juvenile probation for a specified period of time, upon such terms as the court determines, that include a period of placement in a secure or staff-secure residential treatment facility, as ordered by the court, and a period of supervision in the community

Recidivism – another arrest within 36 months following the original referral

Status offenses – a non-criminal act committed by someone under the age of 18 that is illegal solely because of their age such as truancy, running away, violating curfew, violating underage liquor laws, and ungovernability

Supervision - a legal status whereby a juvenile who has been adjudicated delinquent is placed by the court under the supervision of juvenile probation for a specified period of time and upon such terms as the court determines

Suspended Prosecution - to a court case in which delinquency proceeding are suspended pending the successful completion of court ordered programming to address specific behaviors

Transfer - to a court case that has been transferred to the adult criminal justice system

Unique girl – a girl who has not been included in another Department of Children and Families (DCF) report

Unique juvenile – a youth that is not involved with another juvenile justice referral



University of New Haven