

County Juvenile Services
Comprehensive Three Year Plan

Sherman County

July 1, 2015 to June 30, 2018

Completed by:

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II. Community Team

The Sherman County Prevention Coalition is the Community Team for Sherman County. The team was formed as Sherman County Prevention Policy Board in 1995 by a group of concerned parents, youth, and elected officials at the suggestion of the Sherman County Child Abuse Prevention and Treatment Team to address concerns about increased youth substance abuse and law violations. In 2009 the name changed to Sherman County Prevention Coalition to better suit all of its entities.

The demographic structure of the Prevention Coalition can be described as a volunteer community coalition consisting of parents, organizational leaders, business owners, youth, school representatives, law enforcement and policy making officials. The Board of Directors of the coalition, consists of a chairman, vice chairman, secretary/treasurer, up to two at large officers, an attorney, a representative from the University of Nebraska county extension, and a representative of the board of county commissioners. The team meets quarterly.

The members of the Sherman County Community Team:

Board of Directors:

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III. Community Planning Tool

Data sources used in the preparation of the Sherman County Juvenile Services Comprehensive Three Year Plan include the System Points Analysis Tool, the Nebraska SHARP results, local diversion data, the After School Program evaluation report, the Sherman County Cares evaluation report, UNO mental health data, and local juvenile justice system data. Sources of information include web-based resources, surveys, evaluation reports, program data and opinion.

Web-based resources include the U.S. Census Bureau, Office of Juvenile Justice and Delinquency Prevention, Nebraska Crime Commission and Kids Count. Surveys include the Nebraska Risk and Protective Factors Student Survey, Youth Risk Behavior Survey, local youth surveys, parent surveys, local teacher surveys, and the local coalition capacity survey. Qualitative information was shared during meetings and through the completion of the System Points Analysis Tool that give local insight to issues as well as gauge the capacity for addressing issues.

NEBRASKA JUVENILE COURT REPORT - SHERMAN COUNTY

(Nebraska Crime Commission)

	2007	2008	2009
ARRESTS	0	0	0
OFFENSES			
1st/2nd Degree Assault	0	0	0
3rd Degree Assault	0	0	0
Sexual Assault - 1st	0	0	0
Sexual Assault - 2nd	0	0	0
Burglary	0	0	0
Drug - Felony	0	0	0
Theft > \$1500	0	1	0
Theft < \$1500	0	0	0

Theft < \$500	0	0	0
Theft < \$200	0	0	0
Crim Mischief - Felony	0	0	0
Crim Mischief - Misd	0	1	2
Major Trespass	0	0	0
Forgery - Misd - Major	0	0	0
Weapon - Misd	0	0	0
Disturbing Peace	0	0	0
Other Felony	0	0	0
Other Misdemeanor	1	2	0
Truancy	0	0	0
Ungovernable Behavior	0	0	0
Possession of Alcohol	1	1	1
Other Status	0	0	0
Neglect	0	3	1
Dependent	0	0	0
Other/Unknown	0	0	14
TOTAL	2	8	18

Sherman County Data

Juvenile court offense data for Sherman County is provided for years 2007, 2008, and 2009 (Juvenile Court Reporting—Nebraska Crime Commission)¹. Arrest numbers for each year represent arrests made of 0 – 17 year-olds in Sherman County who requested to have their cases heard in juvenile court. Not represented are juveniles who participated in the juvenile pre-trial diversion program or those whose charges remained in adult court.

In 2007, according to OJJDP at http://www.ojjdp.gov/ojstatbb/ezapop/asp/profile_selection.asp, Sherman County had a juvenile population (ages 0 – 17 years old) of 690, with 681 white, 2 black, 0 American Indian, and 7 Asian. In addition, 13 were identified as Hispanic and 677 Non-Hispanic.

In 2008, according to OJJDP at http://www.ojjdp.gov/ojstatbb/ezapop/asp/profile_selection.asp, Sherman County had a juvenile population (ages 0 – 17 years old) of 697, with 688 white, 2 black, 0 American Indian, and 7 Asian. In addition, 14 were identified as Hispanic and 683 Non-Hispanic.

In 2009, according to OJJDP at http://www.ojjdp.gov/ojstatbb/ezapop/asp/profile_selection.asp, Sherman County had a juvenile population (ages 0 – 17 years old) of 698, with 689 white, 2 black, 0 American Indian, and 7 Asian. In addition, 14 were identified as Hispanic and 684 Non-Hispanic.

In 2013, according to OJJDP at http://www.ojjdp.gov/ojstatbb/ezapop/asp/profile_selection.asp, Sherman County had a juvenile population (ages 0 – 17 years old) of 660, with 648 white, 6 black, 1 American Indian, and 5 Asian. In addition, 20 were identified as Hispanic and 640 Non-Hispanic.

IV. Community Socio-Economics

Sherman County consists of five small, rural communities, Loup City (county seat), Litchfield, Rockville, Ashton and Hazard. Highways 92, 2 and 10 connect the communities. Sherman County rests in the middle of central Nebraska and is primarily agricultural. Major employers include county government, Central Nebraska Community Services and Loup City and Litchfield school systems. There are numerous small businesses with a few employees such as retail stores and banks. The table on the next page shows the demographic characteristics of the population. Employment opportunities within the county are limited, forcing residents to commute to larger communities for work. The most common destinations are Grand Island and Kearney which are approximately one hour away. This is in part contributing to a decline in population. Sherman County has seen a 1.1% regression in population in

the last year alone (2013-2014), and a 2.5% regression in population from 2010 to 2014. Employment is limited therefore, even if people previously from the local communities wanted to establish residents back in their “home” county it would be nearly impossible to find employment, so they are forced to commute or live in a more urban setting. Statistical information was obtained from the Census Bureau website <http://quickfacts.census.gov/qfd/states/31/31163.html>

Sherman County is home to Sherman Dam, a popular state operated recreational facility. Sherman Dam offers a variety of activities and serves as a valuable area attraction bringing in a large number of visitors especially during the summer season.

Most of the population in Sherman County share similar ancestries; which has created a situation where social class has proven to be a bigger barrier than ethnicity.

Unfortunately, as our economy has taken a downward turn in recent years the gap between the upper class and lower class has widened.

Subject	Number	Percent
SEX AND AGE		
Total population	3,152	100.0
Under 5 years	182	5.8
5 to 9 years	202	6.4
10 to 14 years	188	6.0
15 to 19 years	187	5.9
20 to 24 years	110	3.5
25 to 29 years	109	3.5
30 to 34 years	129	4.1
35 to 39 years	167	5.3
40 to 44 years	199	6.3
45 to 49 years	201	6.4
50 to 54 years	251	8.0
55 to 59 years	264	8.4
60 to 64 years	227	7.2
65 to 69 years	180	5.7
70 to 74 years	171	5.4
75 to 79 years	156	4.9
80 to 84 years	113	3.6
85 years and over	116	3.7
Median age (years)	47.8	(X)
16 years and over	2,539	80.6
18 years and over	2,445	77.6
21 years and over	2,367	75.1
62 years and over	877	27.8
65 years and over	736	23.4
Male population	1,549	49.1
Under 5 years	96	3.0
5 to 9 years	99	3.1
10 to 14 years	90	2.9
15 to 19 years	106	3.4
20 to 24 years	51	1.6
25 to 29 years	55	1.7
30 to 34 years	73	2.3

Subject	Number	Percent
35 to 39 years	83	2.6
40 to 44 years	81	2.6
45 to 49 years	104	3.3
50 to 54 years	125	4.0
55 to 59 years	146	4.6
60 to 64 years	122	3.9
65 to 69 years	78	2.5
70 to 74 years	78	2.5
75 to 79 years	71	2.3
80 to 84 years	48	1.5
85 years and over	43	1.4
Median age (years)	46.8	(X)
16 years and over	1,241	39.4
18 years and over	1,188	37.7
21 years and over	1,144	36.3
62 years and over	397	12.6
65 years and over	318	10.1
Female population	1,603	50.9
Under 5 years	86	2.7
5 to 9 years	103	3.3
10 to 14 years	98	3.1
15 to 19 years	81	2.6
20 to 24 years	59	1.9
25 to 29 years	54	1.7
30 to 34 years	56	1.8
35 to 39 years	84	2.7
40 to 44 years	118	3.7
45 to 49 years	97	3.1
50 to 54 years	126	4.0
55 to 59 years	118	3.7
60 to 64 years	105	3.3
65 to 69 years	102	3.2
70 to 74 years	93	3.0
75 to 79 years	85	2.7

Subject	Number	Percent
80 to 84 years	65	2.1
85 years and over	73	2.3
Median age (years)	48.6	(X)
16 years and over	1,298	41.2
18 years and over	1,257	39.9
21 years and over	1,223	38.8
62 years and over	480	15.2
65 years and over	418	13.3
RACE		
Total population	3,152	100.0
One Race	3,140	99.6
White	3,122	99.0
Black or African American	3	0.1
American Indian and Alaska Native	2	0.1
Asian	9	0.3
Asian Indian	0	0.0
Chinese	0	0.0
Filipino	2	0.1
Japanese	2	0.1
Korean	4	0.1
Vietnamese	0	0.0
Other Asian [1]	1	0.0
Native Hawaiian and Other Pacific Islander	0	0.0
Native Hawaiian	0	0.0
Guamanian or Chamorro	0	0.0
Samoan	0	0.0
Other Pacific Islander [2]	0	0.0
Some Other Race	4	0.1
Two or More Races	12	0.4
White; American Indian and Alaska Native [3]	5	0.2
White; Asian [3]	2	0.1
White; Black or African American [3]	3	0.1
White; Some Other Race [3]	1	0.0

Subject	Number	Percent
Race alone or in combination with one or more other races: [4]		
White	3,134	99.4
Black or African American	6	0.2
American Indian and Alaska Native	7	0.2
Asian	11	0.3
Native Hawaiian and Other Pacific Islander	1	0.0
Some Other Race	5	0.2
HISPANIC OR LATINO		
Total population	3,152	100.0
Hispanic or Latino (of any race)	31	1.0
Mexican	10	0.3
Puerto Rican	8	0.3
Cuban	0	0.0
Other Hispanic or Latino [5]	13	0.4
Not Hispanic or Latino	3,121	99.0
HISPANIC OR LATINO AND RACE		
Total population	3,152	100.0
Hispanic or Latino	31	1.0
White alone	27	0.9
Black or African American alone	0	0.0
American Indian and Alaska Native alone	0	0.0
Asian alone	0	0.0
Native Hawaiian and Other Pacific Islander alone	0	0.0
Some Other Race alone	3	0.1
Two or More Races	1	0.0
Not Hispanic or Latino	3,121	99.0
White alone	3,095	98.2
Black or African American alone	3	0.1
American Indian and Alaska Native alone	2	0.1
Asian alone	9	0.3
Native Hawaiian and Other Pacific Islander alone	0	0.0
Some Other Race alone	1	0.0
Two or More Races	11	0.3

Subject	Number	Percent
HOUSEHOLDS BY TYPE		
Total households	1,392	100.0
Family households (families) [7]	903	64.9
With own children under 18 years	325	23.3
Husband-wife family	782	56.2
With own children under 18 years	252	18.1
Male householder, no wife present	46	3.3
With own children under 18 years	26	1.9
Female householder, no husband present	75	5.4
With own children under 18 years	47	3.4
Nonfamily households [7]	489	35.1
Householder living alone	455	32.7
Male	218	15.7
65 years and over	63	4.5
Female	237	17.0
65 years and over	150	10.8
Households with individuals under 18 years	342	24.6
Households with individuals 65 years and over	483	34.7
Average household size	2.22	(X)
Average family size [7]	2.78	(X)

Source: U.S. Census Bureau @

<http://factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=bkmk>

V. Identified Priority

1. Increase awareness and improve the mental health system in Sherman County.
2. Improve the Sherman County prevention system for youth.
3. Improve the Sherman County Juvenile Pre-trial Diversion program.

1. Increase awareness and improve the mental health system in Sherman County.

Working through a great deal of data and following much discussion of what has worked and what has failed in the past, there is a consensus that mental health is often at the core of the many other issues juveniles face and that the mental health system in Sherman County is insufficient. Inadequacy in mental health systems is a common issue in rural communities across Nebraska. Another commonality is that many youth who enter the juvenile justice system are in need of mental health resources.

Necessary resources vary in degree much like the points along the juvenile justice system. Resources that are utilized by juveniles in the juvenile justice system include drug and alcohol evaluations, psychological evaluations, counseling, in-patient treatment, long-term therapy, prescription treatment and group therapy. These resources are all inadequate or completely non-existent in Sherman County.

In order to meet the needs of the juveniles in the community it is imperative that we make needed improvements to the mental health system of Sherman County. Improvements begin with raising awareness, changing perceptions about mental health, informing the community and improving access to resources. Our hope for the future is a reformed perception in the community in regards to mental health and easy access to plenty of resources.

2. Improve the Sherman County prevention system.

According to data from the Nebraska Risk Behavior Survey 1991-2011 and the Nebraska Risk and Protective Factors Student Survey 2003-2010, prevention is making strides in Nebraska. In 1991, 53% of high school students drank alcohol in the past 30 days, in 2011 only 27% gave this answer. In 2011 only 27% of high school students acknowledged being in a physical fight in the past 30 days compared to 42% in 1991. These statistics go on and on and unanimously point to the fact that prevention efforts are working. Fewer juveniles are participating in risky behaviors. To discontinue or even reduce the extent of our current prevention efforts would be foolish.

Our youth and our community are ever-changing and perhaps our greatest lesson over the past twenty years is that in order to better our community and the future of our youth, we must continually assess, plan and implement and evaluate and then repeat. As we learn from our successes and failures alike, it has remained important to keep growing, keep learning and keep moving ahead.

3. Improve the Sherman County Juvenile Pre-trial Diversion program.

The Sherman County Juvenile Pre-trial Diversion Program is an option for juveniles cited as an alternative to traditional court proceedings. It provides a vehicle for education for first time offenders and reduces recidivism. Many improvements have been made to the statewide diversion system and although improvements have been made to the Sherman County diversion program more are needed. Programming cannot simply stand still, we are either growing and improving or fading and deteriorating. Sherman County intends for the diversion program to continue to grow and improve.

Changes in leadership in 2015 in Sherman County have required us to review the diversion program and allow for educational opportunities. As we continue to look at policies and practices we continue to become a better informed group of community members.

VI. Strategies

The following strategies will be implemented in order to address each of the identified priorities.

Priority 1: The following strategies will be implemented in order to increase awareness of mental health and improve the mental health system in Sherman County.

- a) The Sherman County Prevention Coalition will continue to coordinate the Sherman County CARE Team. This team was formed through the Community Based Participatory Research program offered through the University of Nebraska. SCPC and UNL have brought together a wide variety of community members and mental health consumers to form the CARE Team. The CARE Team will be charged with investigating mental health disparities in Sherman County. Following data collection the team has identified strengths and weaknesses in the mental health system of the County. Upon completion of the study the team began to search for ways to fill the identified gaps. The team will

continue to assess, plan and implement improvements in the mental health system in Sherman County.

This strategy will take place over a three year period. The Sherman County Prevention Coalition has made the CARE Team a part of their operations. The executive director of SCPC will be responsible for coordinating the team and providing resources. Because Sherman County was selected to participate in the Community Based Participatory Research Program, the University of Nebraska will continue to provide resources needed. The community of Sherman County will provide the man power to fill the team's roster.

Expected results include continuation of the CARE team and continued assessment, planning and implementation of mental health resources.

- b) A resource list will be developed that identifies mental health professionals offering services in and around Sherman County. This resource list will be continuously updated with a full revision completed each year. Work began in early 2013 and we soon realized that local resources are so few, a resource guide is not yet possible. New resources have since been put in place and as we continue to add new resources, the guide is being developed. Necessary resources will be provided by the Sherman County Prevention Coalition with input from the CARE team and many community agencies. The expected result is a comprehensive mental health services resource guide that can be shared throughout Sherman County and surrounding communities.
- c) An effort will be made to train as many individuals as possible in the trauma informed care philosophies. Individuals who work and interact with juveniles will benefit from trauma informed care training and in turn the juvenile benefits as well. The CARE team will have the responsibility of promoting this training and our local trainer will facilitate. This strategy will be continuous throughout the term of this plan and beyond as deemed necessary. Necessary resources include the trainer, space to hold trainings, persons interested in further educating themselves and modest training materials. Materials and the trainer will be provided by SCPC, space for trainings will be provided by various agencies in the community. Results will include more individuals using a trauma informed care approach with youth and adults alike.
- d) The CARE Team and SCPC will work to develop a campaign to raise awareness of mental health in Sherman County. Raising awareness and educating the community will help reduce the stigma that is currently attached to mental health issues. Our hope for the future is a reformed perception in the community in regards to mental health. The CARE Team will be responsible for this continuing strategy. Resources will consist of volunteers to develop and promote ideas that will result in an increased awareness of issues.

Priority 2: Improve the Sherman County prevention system.

- a. In order to maintain and improve on an existing system the Sherman County Prevention Coalition will continue to assess the needs of the youth as well as the community capacity and evaluate our efforts as we go. Through assessment we can be certain we are aiming at the correct target and with evaluation we know if we have a hit or a miss. The Sherman County Prevention Coalition currently partners with Region III Behavioral Health Services to provide funding of evaluation for prevention programming. SCPC staff will coordinate the ongoing effort in order to maintain an annual evaluation report.
- b. Networking within the community will continue to be vital. In a small community it is important to make the best use of the resources available. The community team will bring together youth serving agencies across the county to provide programs and services for youth. As we work within the community to provide for the youth it is of utmost importance that we work with the youth first. Each month Sherman County Prevention Coalition staff will host youth meetings at Loup City and Litchfield schools to continue to empower and encourage these young members of the community. Agenda points will include assessment, planning and evaluation. Because youth are involved, fun is a standing agenda item as well! The group will look at issues facing youth, decide on actions to be taken, plan youth led events, brainstorm new possibilities and evaluate previous efforts. The biggest necessary resource for this strategy is time. Community team members will all have a hand in making connections within the community. SCPC staff will host youth group meetings and ensure that youth are being included. This is an ongoing strategy that does not have an end point. The strategy results in a closely connected, unified community and an improved prevention net for your young people.
- c. We will continue to work with Loup City and Litchfield Schools regarding the implementation of substance abuse prevention programs at the schools. We have excellent working relationships with both schools and will continue to bring new prevention programs to the youth. This is an ongoing strategy that is planned on an annual basis using the school calendar. Partners currently include school administration and staff, SCPC staff, law enforcement, CNCS and Loup Basin Public Health.
- d. Training will be provided to the community in order to educate adults. Training will include curricula such as the 40 Development Assets and Trauma Informed Care as well as up to date information on emerging drug and alcohol issues. Sherman County Prevention Coalition Staff, law enforcement and Central Nebraska Community Services have all taken a role in offering trainings.

Although training is an ongoing strategy, curricula offered will be re-evaluated on a regular basis. The expected outcome is that we have better equipped adults to function in the prevention system.

- e. Prevention of any undesirable behavior works best prior to the onset of that behavior. In order to be effective Sherman County will offer prevention at the earliest age suitable for the issue. By working with area agencies and programs we can offer a comprehensive, across the ages, prevention system. Beginning with programs such as Early Head Start/Head Start and the After School Program, continuing through both Loup City and Litchfield Public Schools and continuing to work with other organizations to sponsor alternative activities for youth and families we can reach people of all ages.

Priority 3: Improve the Juvenile Diversion program

- a. The diversion coordinator will continue to make use of improvements made as a result of the previous three year plan. Improvements include better communication, Youth Level Service administration and drug test administration. Necessary resources include funding for the diversion program which currently comes from Sherman County and grant funding from the Nebraska Crime Commission. The diversion coordinator will be responsible for maintaining and improving the diversion program in this ongoing strategy. The expected outcome is a diversion program that continues to grow and improve.
- b. Training is an ongoing strategy for the diversion program. The diversion coordinator will attend trainings and statewide meetings to build skills and find ways to enhance the Diversion Program. Training is funded by various sources, such as Sherman County, the Nebraska Crime Commission and Region III Behavioral Health Services.