



ICAN

Deanne Tilton, Executive Director

Los Angeles County Inter-Agency Council on Child Abuse and Neglect

4042 North Durfee Avenue ♦ El Monte, CA 91732

(626) 455-4585 ♦ Fax: (626) 444-4851 ♦ Website: www.ican-ncfr.org



Report Compiled from 2007 Data

THE STATE OF CHILD ABUSE IN LOS ANGELES COUNTY

Photographs were selected from commercially available sources and are not of children in the child protective service system.

Children's names in case examples have been changed to ensure confidentiality.

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County Prosecutors Association

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Director, California
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and Rehabilitation

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I

C

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Office of County Counsel

Charlie Beck

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Jonathan Byers

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Internal Services Department

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State Department of Social Services

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Los Angeles Police Department

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ICAN/NCFR

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David Hindman, Ph.D.

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Retired, Office of Education

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Los Angeles County Fire Department

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Department of Mental Health
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Los Angeles City Attorney's Office

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Los Angeles County Sheriff's Department

Lari Sheehan

Chief Administrative Office
Service Intergration Branch

Anita Keys Spencer

Department of Public Social Services

Cheri Todoroff

Department of Health Services

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Office of Court Appointed
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Olivia Carrera

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Los Angeles County
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Dr. Margaret Chao

Department of Public Health

Lisa Cheng

Los Angeles County
Internal Services Department

Ana Maria Correa

Los Angeles County
Internal Services Department

Brian L. Cosgrove

Los Angeles County Coroner

Sandy DeVos

ICAN

Tracy Dodds

County Counsel, Dependency Division

Ruben Egoyan

Los Angeles County
Department of Public Social Services

Marian Eldahaby

Maternal, Child & Adoles. Health Programs
Department of Public Health

Jessica Gama

Los Angeles County Probation Department

Robert Gilchick, M.D., MPH

Director, Child & Adoles. Health Programs
Department of Public Health

Doug Harvey

California Department of Social Services

Lt. Peter Hahn

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Los Angeles County Sheriff's Department

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Los Angeles Police Department

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Los Angeles County
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Dionne T. Lyman-Chapman

Los Angeles County
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Los Angeles County Public Library

Rebecca Mills

Child Protection System
Department of Justice

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Los Angeles Police Department



Thomas Nguyen

Los Angeles County
Department of Children and Family Services

Regi Pappachan

Juvenile Dependency, Children's Court

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Los Angeles County
Internal Services Department

Ray Vincent

Los Angeles County Office of Education

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Los Angeles County
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Los Angeles County
Department of Mental Health

M. Donna Uy-Barreta

Office of the City Attorney

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**LOS ANGELES COUNTY
CHILD ABUSE COUNCILS
COORDINATION PROJECT
MEMBERS**



The Los Angeles Community Child Abuse Councils consist of 12 community-based councils throughout Los Angeles County. The mission of the Councils is to reduce the incidence of child abuse and neglect, and to raise public awareness of child abuse and family violence issues. The membership of the Councils is made up of professionals working in the fields of child welfare, education, law enforcement, health and mental health as well as parents and anyone concerned about the problems of child abuse and family violence.

The Child Abuse Councils Coordination Project facilitates the joint projects of the 12 Community Councils. Since the child abuse councils are volunteer organizations, and most members have full time jobs apart from their involvement with the councils, it is important that our projects can be implemented easily and quickly.

The Coordination Project also serves the councils by providing technical assistance and professional education, advocating for children issues, and networking with other councils and agencies on behalf of the Councils.

The Coordination Project has been in existence since 1987, and has been a non-profit corporation since March 1998. The Coordination Project acts as contractor with the Los Angeles County Department of Children and Family Services and the Office of Child Abuse Prevention (OCAP) to provide services to benefit the 12 Child Abuse Councils in their efforts to prevent child abuse.

The Los Angeles Community Child Abuse Councils are involved in the following nine joint projects:

- The April Child Abuse Prevention Campaign
- Publication of The Children's Advocate Newsletter
- The Report Card Insert Project
- Coordination of Non-Profit Bulk Mailings
- Establishment and Maintenance of a Los Angeles Community Child Abuse Councils Website
- Training and Technical Assistance to the Community Relating to Child Abuse and Family Violence Issues
- Networking Meetings
- Coordination of Suicide Resource Prevention and Postvention Cards
- Special Projects for Individual Councils

For further information about the Los Angeles Community Child Abuse Councils contact Monika McCoy , at (818) 790-9448 or visit our website at latchildabusecouncils.org.



Coordination Project Director

Monika McCoy (818) 790-9448

San Gabriel Valley Family Violence Council

Starr Harrison (626) 966-1755

Community Child Abuse Councils

Advocacy Council for Abused Deaf Children

Jean Marie Hunter (626) 798-6793

Service Planning Area 7 Child Abuse Council

Paula Jeppson (626) 967-7153

Asian Pacific Child Abuse Council

Larry Lue (213) 808-1701

Yasuko Sakamoto (213) 473-1602

Westside Child Trauma Council

Lynn Zimmerman (310) 829-8487

Eastside Child Abuse Prevention Council

Elvia Torres (626) 442-1400

Yes2KIDS

Bob Broyles (661) 538-1846

Long Beach End Abuse

Paula Cohen (562) 435-3501

ext.3842

Helene Handler (562) 491-3670

Family, Children, Community Advisory Council

Sandra Guine (213) 639-6443

Foothill Child Abuse Domestic Violence Prevention Council

Sarah Jin (626) 795-6907

Gay, Lesbian, Bisexual, and Transgender (GLBT) Child Abuse Prevention Council

Howard Jacobs (310) 358-8727

San Fernando Valley Child Abuse Council

Rita Baer (818) 772-9981

Cyndee Bellamy (818) 772-9981

INTRODUCTION

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This unique report, published by the Los Angeles County Inter-Agency Council on Child Abuse and Neglect Data/Information Sharing Committee, features data from ICAN agencies about activities for 2007, or 2006/2007 for some agencies. The report includes some information about programs, but is intended primarily to provide visibility to data about child abuse and neglect in Los Angeles County and information drawn from that data. Much of the report assumes the reader has a basic knowledge of the functions and organization of ICAN and its member agencies. The Appendix describes ICAN's organizational structure.

The Data/Information Sharing Committee continues to be committed to applying our data assets to improve the understanding of our systems and our interdependencies. We believe this understanding will help support us all in better serving the children and families of Los Angeles County.

Section I of the report highlights the inter-agency nature of ICAN by providing reports, conclusions and recommendations that transcend agency boundaries. Significant findings from participating agencies are included here, as well as special reports.

Section II includes special reports from ICAN Associates; ICAN Multi-Agency Child Death Review Team; ICAN Child Abduction Task Force; California Department of Social Services Community Care Licensing; Child Abuse and Developmental Disabilities and the Children's Planning Council Scorecard. Also included is our annual inter-agency analysis of data collection. This analysis continues to evolve, providing an opportunity to view from a more global perspective the inter-agency linkages of the child abuse system.

Section III includes the detailed reports that are submitted each year by ICAN agencies for analysis and publication. In response to the goals set by the Data/Information Sharing Committee, Departmental reports continue to improve. Most departmental reports now include data on age, gender, ethnicity and/or local geographic areas of the county, which allows for additional analysis and comparisons. The reports reflect the increasing sophistication of our systems and the commitment of Data Committee members to meet the challenge of measuring and giving definition to the nature and extent of child abuse and neglect in Los Angeles County.

In this twenty third edition of *The State of Child Abuse in Los Angeles County*, we are once again pleased to include the artwork of winning students from the ICAN Associates Annual Child Abuse Prevention Month Poster Contest. The contest gives 4th, 5th, and 6th grade students an opportunity to express their feelings through art, as well as to discuss child abuse prevention and what children need to be safe and healthy.

The Data/Information Committee is again grateful to the Los Angeles County Internal Services Department - Information Technology Service, especially Ana Maria Correa, Christopher Chapman, Dionne Lyman, and Lisa Cheng. They have provided the technical desktop publishing support to produce this final document.

ICAN ORGANIZATIONAL SUMMARY

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The Inter-Agency Council on Child Abuse and Neglect (ICAN) was established in 1977 by the Los Angeles County Board of Supervisors. ICAN serves as the official County agent to coordinate development of services for the prevention, identification and treatment of child abuse and neglect.

Twenty-seven County, City, State and Federal agency heads are members of the ICAN Policy Committee, along with UCLA, five private sector members appointed by the Board of Supervisors, the Children's Planning Council, and an ICAN youth representative. ICAN's Policy Committee is comprised of the heads of each of the member agencies. The ICAN Operations Committee, which includes designated child abuse specialists from each member agency, carries out the activities of ICAN through its work as a committee and through various standing and ad hoc subcommittees. Sixteen community based inter-disciplinary child abuse councils interface with ICAN and provide valuable information to ICAN regarding many child abuse related issues. ICAN Associates is a private non-profit corporation of volunteer business and community members who raise funds and public awareness for programs and issues identified by ICAN. In 1996, ICAN was designated as the National Center on Child Fatality Review by the U.S. Department of Justice.

This strong multi-level, multi-disciplinary and community network provides a framework through which ICAN is able to identify those issues critical to the well-being of children and families. The Council is then able to advise the members, the Board and the

public on relevant issues and to develop strategies to implement programs that will improve the community's collective ability to meet the needs of abused and at-risk children with the limited resources available.

ICAN has received national recognition as a model for inter-agency coordination for the protection of children. All ICAN Policy and Operations Committee meetings are open to the public. All interested professionals and community volunteers are encouraged to attend and participate.

For further information contact:

**Inter-Agency Council
on Child Abuse & Neglect**

4024 N. Durfee Road
El Monte, CA 91732
(626) 455-4585
Fax: (626) 444-4851

Deanne Tilton
ICAN Executive Director

Edie Shulman
ICAN Assistant Director

Sandy DeVos
ICAN Program Administrator

Lidia Escobar
ICAN Program Administrator

Maria Melton
ICAN Program Administrator

Mary Nichols
ICAN Program Administrator



Cathy Walsh
ICAN Program Administrator

Teresa Rodriguez
Administrative Assistant

Sabina Alvarez
ICAN Secretary

Lorraine Abasta
ICAN Associate Staff

ICAN ASSOCIATES STAFF

Paul Click
Technology Manager

Vivian Ng
Project Coordinator

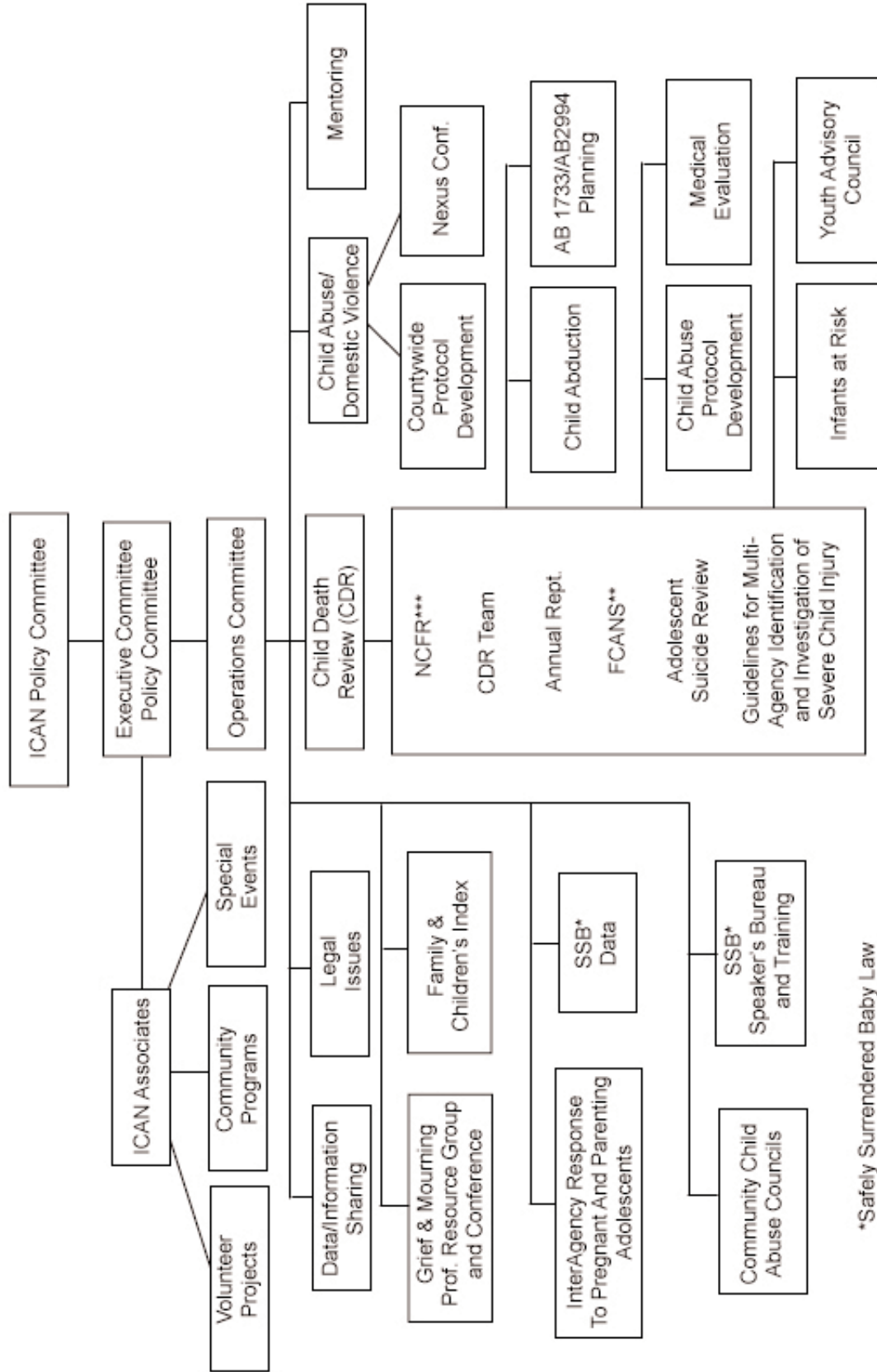
Laurence Kerr
IT Assistant

Briana Guzman
Office Assistant

Laura Sparks
Bookkeeper



Inter-Agency Council on Child Abuse and Neglect (ICAN)



*Safely Surrendered Baby Law

**FCANS - Fatal Child Abuse and Neglect Surveillance

***National Center on Child Fatality Review



POLICY COMMITTEE

Twenty-seven Department heads, UCLA, five Board appointees, an ICAN youth representative and the Children's Planning Council. Gives direction and forms policy, reviews the work of subcommittees and votes on major issues. (Meets twice annually).

COUNTY EXECUTIVES POLICY COMMITTEE

Nine County Department heads. Identifies and discusses key issues related to county policy as it affects the safety of children. (Meets as needed).

OPERATIONS COMMITTEE

Working body of member agency and community council representatives. Reviews activities of subcommittees, discusses emerging issues and current events, recommends specific follow-up actions. (Meets monthly).

OPERATIONS EXECUTIVE COMMITTEE

Leadership for Operations Committee and liaison to Policy Committee. Helps set agenda for Operations and Policy meetings. (Meets as needed).

ICAN ASSOCIATES

Private incorporated fundraising arm and support organization of ICAN. Sponsors special events, hosts ICAN Policy meetings and receptions, promotes public awareness and raises funds for specific ICAN projects. Maintains volunteer program, conducts

media campaigns, issues newsletter and provides support and in-kind donations to community programs, supports special projects such as Roxie Roker Memorial Fund, L.A. City Marathon fundraiser, MacLaren Holiday Party and countywide Children's Poster Art Contest. Promotes projects developed by ICAN (e.g., Family and Children's Index). (Meets as needed).

CHILD DEATH REVIEW TEAM

Provides multi-agency review of intentional and preventable child deaths for better case management and for system improvement. Produces annual report. (Meets monthly).

DATA/INFORMATION SHARING

Focuses on intra and inter agency systems of information sharing and accountability. Produces annual ICAN Data Analysis Report The State of Child Abuse in Los Angeles County, which highlights data on ICAN agencies' services. Issues annual report. (Meets monthly).

LEGAL ISSUES

Analyzes relevant legal issues and legislation. Develops recommendations for ICAN Policy Committee and Los Angeles County regarding positions on pending legislation; identifies issues needing legislative remedy. (Meets as needed).

TRAINING

Provides and facilitates intra and inter agency training. (Meets as needed).



CHILD ABUSE COUNCILS

Provides interface of membership of 16 community child abuse councils involving hundreds of organizations and professionals with ICAN. Councils are interdisciplinary with open membership and organized geographically, culturally, and ethnically. Coordinates public awareness campaigns, provides networking and training for professionals, identifies public policy issues and opportunities for public/ private, community-based projects. (Meets monthly).

CHILD ABUSE/DOMESTIC VIOLENCE

Examines the relationship between child abuse and domestic violence; develops interdisciplinary protocols and training for professionals. Provides training regarding issues of family violence, including mandatory reporting. Sponsors the annual NEXUS conference (Meets as needed for the planning of NEXUS Conference).

GRIEF AND MOURNING PROFESSIONAL RESOURCE GROUP AND CONFERENCE

A professional peer group which serves as a resource pool of experts in grief and loss therapy to those providing mental health interventions to surviving family members of fatal family violence. The Group is developing specialized training in grief issues in instances of fatal family violence and a resource directory of services. (Meets monthly).

FAMILY AND CHILDREN'S INDEX

Development and implementation of an inter-agency database to allow agencies access to information on whether other

agencies had relevant previous contact with a child or family in order to form multidisciplinary personnel teams to assure service needs are met or to intervene before a child is seriously or fatally injured. (Meets monthly).

CHILD ABDUCTION

Public/private partnership to respond to needs of children who have experienced abduction. Provides coordinated multi-agency response to recovery and reunification of abducted children, including crisis intervention and mental health services. (Meets monthly).

AB 1733/AB 2994 PLANNING

Conducts needs assessments and develops funding guidelines and priorities for child abuse services; participates in RFP process and develops recommendations for funding of agencies. (Meets as needed).

INTERAGENCY RESPONSE TO PREGNANT AND PARENTING ADOLESCENTS

Focuses on review of ICAN agencies' policies, guidelines and protocols that relate to pregnant and parenting adolescents and the development of strategies which provide for more effective prevention and intervention programs with this high risk population. Includes focus on child abuse issues related to pregnant teens, prevention of teen pregnancies, placement options for teen mothers and babies, data collection, legal issues and public policy development. (Meets monthly).



CHILD ABUSE PROTOCOL DEVELOPMENT

Develops a countywide protocol for inter-agency response to suspected child abuse and neglect. (Meets as needed).

CHILD ABUSE EVALUATION REGIONALIZATION

Coordinates efforts to facilitate and expand availability of quality medical exams for child abuse victims throughout the County. (Meets as needed).

NATIONAL CENTER ON CHILD FATALITY REVIEW (NCFR)

In November 1996, ICAN was designated as the NCFR and serves as a national resource to state and local child death review teams. The NCFR web site address is: www.ICAN-NCFR.org.

CHILD AND ADOLESCENT SUICIDE REVIEW TEAM

Multi-disciplinary sub-group of the ICAN Child Death Review Team. Reviews child and adolescent suicides. Analyzes trends and makes recommendations aimed at the recognition and prevention of suicide and suicidal behaviors. (Meets monthly).

INFANTS AT RISK

Works with hospitals regarding reporting of infants at risk of abuse/neglect and is developing a tracking system to assist in coordination of services systems for neonates reported to DCFS.

MULTI-AGENCY IDENTIFICATION AND INVESTIGATION OF SEVERE AND FATAL CHILD INJURY

With the support of a grant from the Office of Emergency Services (OES), ICAN is working to update the L.A. County SCAN team registers, collect existing SCAN and Child Death Review protocols, survey literature for trends and standards, search for data systems that may assist in information sharing among agencies, develop a Best Practices Protocol for Los Angeles County, build a network structure for agencies, facilitate local and statewide training and extend work to a statewide network and protocol,

SAFELY SURRENDERED BABY LAW

Responsible for notifying the Board of Supervisors, Chief Administrative Office and others of safe surrenders and abandonment's, as well as collecting and analyzing data on these cases and preparing an annual written report to the Board of Supervisors. ICAN maintains a Speakers' Bureau, which has trained nearly a thousand individuals in the public and private sectors. ICAN also is responsible for updating and revising the countywide training curriculum to be utilized by County Departments and participates in the County's Public Information campaign.

SECTION I INTER-AGENCY OVERVIEW

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SELECTED FINDINGS

LOS ANGELES CITY ATTORNEY'S OFFICE

In 2007, there were 1,660 reviewed cases which resulted in an increase of 964 cases from last year. Also, in 2007 there were 159 ICAN-related cases that reached a disposition – a decrease of 390 disposition cases. This decrease between 2006 and 2007 in ICAN-related cases that reached disposition, reflect an increase in the quantity and quality of the various crime prevention programs that target children, sponsored by the Los Angeles City Attorney's Office.

DEPARTMENT OF CORONER

In calendar year 2007, after a review of the cases based on the ICAN-established criteria, of the total child deaths reported, 284 were referred to the Inter-Agency Council on Child Abuse and Neglect for tracking and follow-up. In calendar 2006, the total child deaths referred to the Inter-Agency Council on Child Abuse and Neglect for tracking and follow-up was 305, a decrease of 21 cases.

The Coroner refers to ICAN all non-natural deaths where the decedent was under 18 years of age. If the mode of death is homicide, only those cases where the death is caused by a parent, caregiver, or other family member are referred to ICAN. This year's Child Death Review Team Report includes third party homicides of children.

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

Referral children received during CY 2007 reflect a 2.8% increase over CY 2006, from 162,711 to 167,325.

- Despite the overall decrease in the DCFS caseload, the numbers of children in the age groups Birth - 2 Years, 3 – 4

Years, and 18 & Over reflect increases.

- The most vulnerable are children in the age group Birth - 2 Years. This population accounts for 17.7% of the total DCFS child caseload at the end of CY 2007, which is slightly up from 16.8% at the end of CY 2006. While the overall decrease of the total caseload between CY 2006 and CY 2007, the number of children in this age group category exhibits a 0.7% increase, from 6,443 to 6,487.
- Children in the age group 3 – 4 Years also exhibit an increase. The number of children in this age group reflects a 1.0% increase, from 3,718 at the end of CY 2006 to 3,757 at the end of CY 2007. This population accounts for 10.3% of the children in the total caseload, slightly up from 9.7% at the end of CY 2006.
- Youth in the age group 18 & Older account for 5.4% of the total DCFS children at the end of CY 2007, slightly up from 5.0% from the end of CY 2006. The number of these young adults (1,968) reflects a 1.7% decrease from 1,936 at the end of CY 2006.

Hispanic children continue to be the largest of all ethnic populations among DCFS children. This population accounts for 52.7% of the total caseload at the end of CY 2007, up from 40.8% at the end of CY 2006. The Hispanic child population shows a 0.9% decrease from 19,500 to 19,319.

DCFS children in Out-of-Home Placement (19,182) at the end of CY 2007 reflect a 6.2% decrease from 20,454 at the end of CY 2006. This decrease is in line with a major DCFS goal in reducing the number of children/youth in out-of-home care. A related goal to reducing the total number of children



in out-of-home care is reducing the number of children/youth in group care. Children/youth in Group Home decreased by 14.4%, from 1,557 at the end of CY 2006 to 1,333 at the end of CY 2007. .

As of December 2007, the Permanency Partners Program has provided services to 2,311 youth. Approximately 32% (747) of these youth now have a legally permanent plan identified or established.

DEPARTMENT OF HEALTH SERVICES

Infant mortality rates for Los Angeles County had decreased from 5.5 infant deaths per 1,000 live births in 2002 to 4.9 infant deaths per 1,000 live births in 2006 (Figure 1).

- African Americans still have the highest infant mortality rate among race/ethnic groups (Figure 2). Nevertheless, since 2002, it decreased from 13.0 infant deaths per 1,000 live births in 2002 to a low of 10.7 infant deaths per 1,000 live births in 2005 (Table 1). There was a rise in 2006 to a rate of 11.6 infant deaths per 1,000 live births, but this still reflects a 10.8% decrease in infant mortality rate over the four-year period.
- SPA 1 (Antelope Valley) and SPA 6 (South) have the two highest infant mortality rates. In 2006, the infant mortality rate for Antelope Valley was 7.5 deaths per 1,000 live births (down from 10.8 deaths per 1,000 live births in 2002). South had the second highest infant mortality rate in Los Angeles County at 5.4 deaths per 1,000 live births (down from 6.5 deaths per 1,000 live births in 2003) (Figure 3).
- Overall child abuse related infant death rates have remained relatively low between 2002 and 2006. There

were four child abuse related infant death reported in 2006 (Figure 8). Child abuse related deaths among children ages 1 to 17 have also remained steady between 2002 and 2006. In 2006, child abuse related death rate for children ages 1 to 17 was 0.1 deaths per 100,000 children ages 1 to 17 (Figure 12).

- Between 2002 and 2006, child death rates among children ages 1 to 17 decreased from 21.2 per 100,000 to 19.4 deaths per 100,000 in 2005 (Figure 9). Among race/ethnic groups, African American children ages 1 to 17 had the highest death rate at 41.7 deaths per 100,000 in 2006 (Figure 10). Among SPAs, SPA 1 (Antelope Valley) had the highest rate at 37.4 deaths per 100,000 followed by SPA 6 (South) at 32.1 deaths per 100,000 (Figure 11).
- In 2006, the leading cause of death among infants and among children ages 1 to 4 was congenital malformations, deformations and chromosomal abnormalities (Figure 6).

CALIFORNIA DEPARTMENT OF JUSTICE

During calendar year 2007, California's reporting agencies submitted a total of 20,967 reports to the CACI. Thirty-two (32) of the total submissions reported the death of the victim. Physical abuse continues to be the most prevalent type of abuse noted in the reports submitted to the CACI.

Overall, the reports of child abuse submitted to the CACI for the categories of physical abuse, mental abuse, neglect and sexual abuse decreased from 25,674 to



20,967 (18%) during the last five years. The DOJ is working with stakeholder groups around the state and with the Department of Social Services to make business process modifications to improve state and local reporting.

Los Angeles County submitted 5,354 reports to the CACI, which represents approximately 26% of the state's total. Of these, 2,591 (48%) reported physical abuse, 894 (17%) reported mental abuse, 120 (2%) reported severe neglect, and 1,749 (33%) reported sexual abuse. There were nine submissions from Los Angeles County agencies that reported the death of the victim.

DEPARTMENT OF MENTAL HEALTH

- During FY 2006-07, The Family Preservation (FP) program treated 1,059 clients. Family Reunification served eight outpatients. Rate Classification Level-14 (RCL-14) facilities treated 249 and Community Treatment Facilities (CTF) treated 120. The Child Abuse Prevention, Intervention and Treatment (CAPIT) program was offered to 1,089 individuals. Interagency Delinquency Prevention (IDP) services were given to 343. The three Juvenile Hall Mental Health Units (JMHU) served 12,079. Dorothy Kirby Center provided mental health services to 451. At Challenger Memorial Youth Center and the Juvenile Justice Camps, 2,073 children/youth received mental health services. A total of 17,471 children and adolescents, potentially at-risk for child abuse or neglect, were served by these mental health treatment programs.
- Clients receiving mental health services in the IDP program, CAPIT, Family Preservation, and Family Reunification programs were 14% of the clients at the programs considered. Of these, 25% were identified as DCFS referrals.
- Clients treated in RCL-14 or Community Treatment Facilities were 2% of the clients considered. DCFS referrals constituted 46% of the RCL-14 referrals and 70% of the CTF referrals.
- Clients in the Mental Health Units of the three juvenile halls made up 69% of the clients considered. Of these, 4% were identified as DCFS referrals.
- Clients in the Mental Health Units at the Challenger Youth Center/ Juvenile Justice Camps and Dorothy Kirby Youth Center were 14% of the clients at the programs reviewed. Of these, 5% were identified as DCFS referred.
- Clients in Mental Health Units of the Youth Centers were distributed as follows: 82% in Challenger Youth Center/Juvenile Justice Camps, and 18% in Dorothy Kirby Center.
- The CAPIT program served 87 clients receiving a DSM diagnosis of Child Abuse and Neglect (CAN). This is the largest number diagnosed with CAN in any of the programs considered and is 53% of the clients with CAN in the programs considered. During FY 05-06, CAPIT treated 57% of clients diagnosed with CAN in these treatment programs.
- The FP Program served 27 clients diagnosed with CAN. This is 16% of the 162 clients diagnosed with CAN in the programs considered, a decrease of 3% from FY 05-06, and establishes the FP program with the third largest concentration of clients diagnosed



with CAN.

- The Juvenile Hall Mental Health Units served 35 clients diagnosed with CAN. This is 22%, the second largest concentration of clients with CAN in the programs considered. In FY 05-06, the frequency of clients with CAN diagnosed at the juvenile hall mental health units was 19% of the programs considered.
- The IDP program served 13 children diagnosed with CAN during FY 06-07. This is consistent with the finding in FY 05-06 that less than 1% of the children with CAN were served by this program as well as by the mental health units of Challenger Youth Center and its associated juvenile justice camps, and by the mental health unit of Dorothy Kirby Center.
- The most frequent DSM diagnoses for clients in the treatment programs considered are Adjustment/Conduct Disorder/ADHD and Major Depression. Adjustment/Conduct Disorder/ADHD was the most frequent diagnosis received by clients in the FP, IDP, Juvenile Hall mental health programs, and at Challenger, with Major Depression a frequent diagnosis at these programs. Major Depression was the most frequent diagnosis received by clients in the CAPIT program. At Dorothy Kirby, Bipolar Disorder was most frequent, followed by Adjustment/Conduct Disorder/ADHD.
- Among substance using clients, marijuana was most frequently reported, followed in frequency by polysubstance use.

LOS ANGELES COUNTY DISTRICT ATTORNEY'S OFFICE

- A total of 4,872 cases relating to child abuse and neglect were submitted for filing consideration against adult defendants.
- Of these, charges were filed in 47% (2,292) of the cases reviewed. Felony charges were filed in 61% (1,422) of these matters.
- Of those cases declined for filing (a total of 2,580 – both felonies and misdemeanors), cases submitted alleging a violation of PC §288(a) accounted for 37% of the declinations (950).
- In 80% of the cases filed involving child abuse, the gender of the defendant was male.
- Convictions were achieved in 91% of the cases filed against adult offenders. Defendants received grants of probation in 69% (1,144) of these cases. State prison sentences were ordered in 29% (479) of the cases; with 1% (9) of the defendants receiving a life sentence in state prison.
- A total of 447 cases relating to child abuse and neglect were submitted for filing consideration against juvenile offenders.
- Of these, charges were filed in 64% (286) of the cases reviewed. Felony charges were filed in 94% (270) of these cases.
- Of the filed cases, 67% (183) alleged a violation of PC §288(a).
- Of the declined cases (161 – both felonies and misdemeanors), 74% (119) alleged a violation of PC §288(a).
- In 94% of the petitions filed involving



child abuse, the gender of the minor was male.

- Sustained petitions were achieved in 89% of the juvenile cases.

LOS ANGELES COUNTY SHERIFF'S DEPARTMENT

In 2007, the Special Victim's Bureau (SVB) caseload remained the same as in 2005. The number of victims in the under three years of age category decreased by 48% in 2007 from 2006.

The percentage of juvenile offenders increased 14.5% from 2006.

LOS ANGELES POLICE DEPARTMENT – Juvenile Division

- The total investigations (crime and non-crime) conducted by the unit in 2007 (27,286) showed an increase (39.66 percent) over the number of investigations in 2006 (19,538).
- Adult arrests by the unit in 2007 (279) showed an increase (48.40 percent) in the number of arrests made in 2006 (188).
- The number of dependent children handled by the unit in 2007 (1,492) showed an increase (15.66 percent) from the number handled in 2006 (1,290).

LOS ANGELES SUPERIOR COURT

- A noticeable increase in filings occurred in 2007, continuing a trend that began in 2005.
- New WIC §300 petitions constituted 53.5% of total filings in 2007.

- 11,057 new children were brought in under new WIC §300 petitions filed in 2007, while 12,624 children exited the Dependency System.

LOS ANGELES COUNTY PROBATION DEPARTMENT

Of the 654 Child Abuse referrals received by the Adult Bureau in 2007, 154 (23,5%) resulted in a court ordered grant of formal probation. The adult defendants not placed on formal probation may have been sentenced to state prison, county jail, placed on informal probation to the court, found not guilty or had their cases dismissed.



2008 DATA RECOMMENDATIONS

In the 2007 ICAN Data Report regarding children and youth, the following two recommendations were made:

RECOMMENDATION ONE:

Juvenile Offender Data Collection

Agencies should, to the extent possible, obtain and include data on juvenile offenders. A juvenile offender is defined as any individual who is under court supervision due to a Welfare and Institutions Code (WIC) §601 or §602 petition, or jointly filed WIC §300 and WIC §600 petitions, i.e. WIC §241.1 cases.

RATIONALE:

The Department of Children and Family Services has implemented a system to track data on the number of WIC §300 dependents who are supervised by Delinquency Court due to the filing of a WIC §600 petition. Additional juvenile offender data is needed to determine the scope of this issue. This data also will enable analysis to determine how best to provide services to meet the needs of youth in their transition to independent living.

RECOMMENDATION TWO:

Permanency initiatives or mentoring programs that impact children and youth

Agencies that submit annual data statements to the ICAN Data and Information Sharing Committee should include data and information about permanency initiatives, educational programs and mentoring programs focused on serving the needs of their teen-age clients.

RATIONALE:

Agencies involved in some aspect of child welfare and/or in providing services for

at-risk families and children have rightly focused on the needs of the youngest and most vulnerable of their children served. At the same time, teens served by these agencies also have critical needs for education, support, stability, and community services. In recent years, this often overlooked population has received renewed focus and resources in recognition of their health, psychological, and life-skill needs. Agencies which have targeted this population of young people with additional resources and new programs should include discussion of these efforts in their annual ICAN data statements.

Regarding Recommendation One, the Department of Children and Family Services (DCFS) currently is collecting data and is tracking youth related to WIC §241.1 child cases. An automated tracking system is still under development. As the tracking system is still under development, the Data Committee is recommending that this first recommendation be repeated for 2008.

In regards to Recommendation Two, DCFS did include data and information on the Permanency Partners Program (P3) which is aimed at helping teen-age youth achieve legally permanency. In addition, the Public Defenders reported on its collaborative program, Project Youth Embrace which targets and provides services to juvenile offenders.

The Department of Mental Health, Department of Probation, LA City Attorney's Office and District Attorney's Office likewise reported on their efforts to better report on the juvenile offender population and collaborative programs servicing these youth as well as efforts to help these youths achieve permanency.

As these agencies are carrying over their permanency initiatives for older youth into the next year, Recommendation Two is being carried over as a recommendation for 2008.



The following additional two recommendations are being made for 2008:

RECOMMENDATION THREE:

Reporting of data

Agencies contributing to this ICAN report should, to the extent possible, report data categories in a consistent manner. Examples of categories could be race, age, Service Planning Area (SPA), or zip codes. This would allow for a more meaningful comparison of data across agencies.

RATIONALE:

Due to the data reporting differing from agency to agency, contributing agencies are rarely able to infer a correlation between data and other factors. Reporting data in a consistent manner would provide an opportunity for agencies to view their data in a multi-agency context. This would assist in making the report more comprehensive and useful for the formation of future recommendations regarding child welfare initiatives and program development.

RECOMMENDATION FOUR:

Use of spatial data

Agencies contributing data when possible should use Geographic Information System (GIS) mapping techniques to report data.

RATIONALE:

The use of GIS mapping will strengthen the spatial data reported by providing thematic maps. This will assist agencies in viewing the data making it more useful for policy and planning purposes regarding child welfare initiatives and program development.



ANALYSIS OF INTER-AGENCY DATA COLLECTION

There is limited information available from individual agencies which can be linked with other agency data to portray the child victim's route through the criminal justice and juvenile dependency systems. Information in the 2008 State of Child Abuse in Los Angeles County report presents data unique to each agency which may include the type of abuse/neglect involved, detailed information on the victim, or the extent of the agency's work. This special inter-agency section of the report attempts to show the data connections which exist between agencies and information areas which could be expanded.

The regular inclusion of this special report section is in response to two recommendations presented to the ICAN Policy Committee in the 1990 ICAN Data Analysis Report:

1. All ICAN agencies review their current practices of data collection to ensure that the total number of reports or cases processed by the agencies, irrespective of reason, are submitted in their data reports.
2. ICAN agencies support the Data/Information Sharing Committee efforts to establish guidelines for common denominators for intake, investigations, and dispositional data collection.

To implement these recommendations, a team of ICAN Data/Information Sharing Committee members, with the benefit of comment from the full Committee, developed and regularly updates the following material:

I. LIST OF CHILD ABUSE AND NEGLECT SECTIONS

Figures 1 and 2 list criminal offense code

sections, identifying relevant child abuse offenses which permit ICAN agencies to verify and consistently report the offenses which should be included as child abuse offenses. The breakdown of these sections into seven child abuse and neglect categories permits consistency in the quantification of child abuse activity completed by the agencies, particularly the law enforcement agencies that use these criminal offense code sections. Use of this list may uncover offenses which were not counted in the past and therefore maximize the number of child abuse cases counted by each agency.

II. FLOW CHARTS

Flow Charts were developed to:

- Show the interrelationship of all departments in the child abuse system;
- Show the individual agency's specific activities related to child abuse;
- Reflect the data used in the annual report by showing the extent of data currently collected, and by the absence of data, graphically depict whether additional data may be reported, if the agency so chooses;
- Show differences in items being counted between agencies with similar activities; and
- Provide a basis for any future modifications to be used in data collection.

Flow Chart II presents a simplified overview of the manner in which the ICAN agencies interrelate with each other and the way in which the agencies' data does (or does not) correlate with that of other agencies. Because this chart intends to provide an overview, it does not present every activity or item of data collected as detailed in the other agency Flow Charts, III through VIII. Where possible, it reflects totals for common data categories between agencies.



Figure 1

CHILD ABUSE/NEGLECT OFFENSES BY CATEGORY

ABUSE TYPE	SECTION	FELONY/MISD	DESCRIPTION
General Neglect	270PC	M	Failure to Provide
General Neglect	270.5PC	M	Failure to Accept Child Into Home
General Neglect	272PC	M	Contribute to the Delinquency of a Minor
General Neglect	273ePC	M	Send Child to Improper Place
General Neglect	273fPC	M	Send Child to Immoral Place
General Neglect	273gPC	M	Immoral Acts Before Child.
General Neglect	313.1(A)PC	M	Give Harmful Matter to Child
General Neglect	278.5PC	F/M	Violation of Custody Decree
Severe Neglect	278PC	F/M	Child Concealment/Noncustodial Person
Severe Neglect	280PC	F/M	Violation of Adoption Proceedings
Exploitation	311.10(a)PC	F/M	Advertising Obscene Matter Depicting Child
Exploitation	311.11PC	F/M	Poss/Control Child Pornography.
Exploitation	311.2PC	F/M	Importing Obscene Matter Depicting a Child
Exploitation	311.3(A)PC	F/M	Creation of Obscene Matter Depicting Child
Exploitation	311.4PC	F/M	Use Minor For Obscene Act
Caretaker Absence	271aPC	F/M	Abandonment of Child Under 14
Caretaker Absence	271PC	F/M	Desertion with Intent to Abandon Child Under 14



Figure 1 (continued)

CHILD ABUSE/NEGLECT OFFENSES BY CATEGORY

ABUSE TYPE	SECTION	FELONY/MISD	DESCRIPTION
General Neglect	270PC	M	Failure to Provide
General Neglect	270.5PC	M	Failure to Accept Child Into Home
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General Neglect	278.5PC	F/M	Violation of Custody Decree
Severe Neglect	278PC	F/M	Child Concealment/Noncustodial Person
Severe Neglect	280PC	F/M	Violation of Adoption Proceedings
Exploitation	311.10(a)PC	F/M	Advertising Obscene Matter Depicting Child
Exploitation	311.11PC	F/M	Possession/Control Child Pornography
Exploitation	311.2PC	F/M	Importing Obscene Matter Depicting a Child
Exploitation	311.3(A)PC	F/M	Creation of Obscene Matter Depicting Child
Exploitation	311.4PC	F/M	Use Minor For Obscene Act
Caretaker Absence	271aPC	F/M	Abandonment of Child Under 14
Caretaker Absence	271PC	F/M	Desertion with Intent to Abandon Child Under 14



Flow Chart I

REPORTING DEPARTMENTS INVOLVEMENT IN CHILD ABUSE CASES - 2007



REPORTING DEPARTMENTS WORKLOAD

CHIEF MEDICAL EXAMINER CORONER	284
L. A. COUNTY PROBATION DEPARTMENT	654
DEPT. OF PUBLIC SOCIAL SERVICES	175
LOS ANGELES POLICE DEPARTMENT	27,286
L.A. COUNTY SHERIFF'S DEPT. FCB	3,257
DEPT. OF CHILDREN & FAMILY SERVICES	162,325



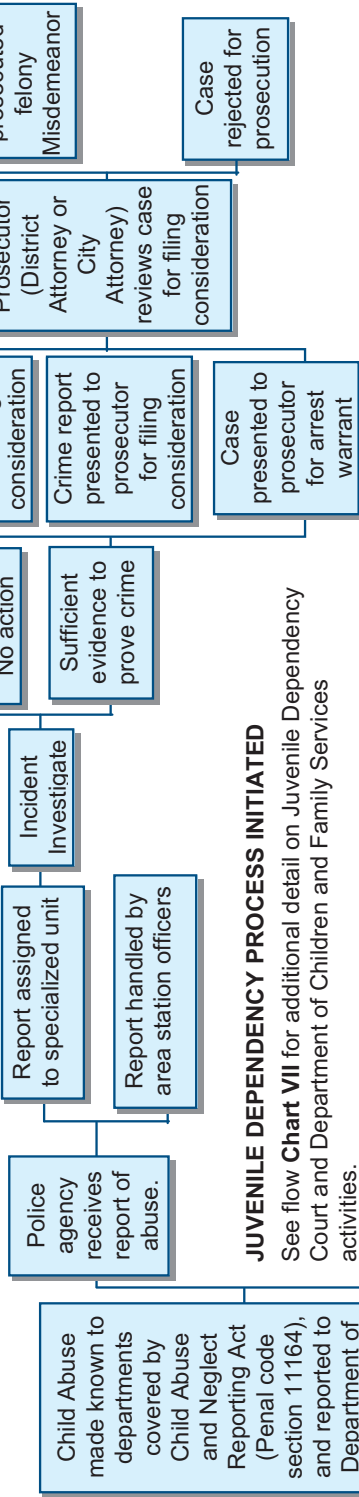
Flow Chart II

ICAN AGENCY INVOLVEMENT IN CHILD ABUSE CASES

CHILD PROCESS INITIATED

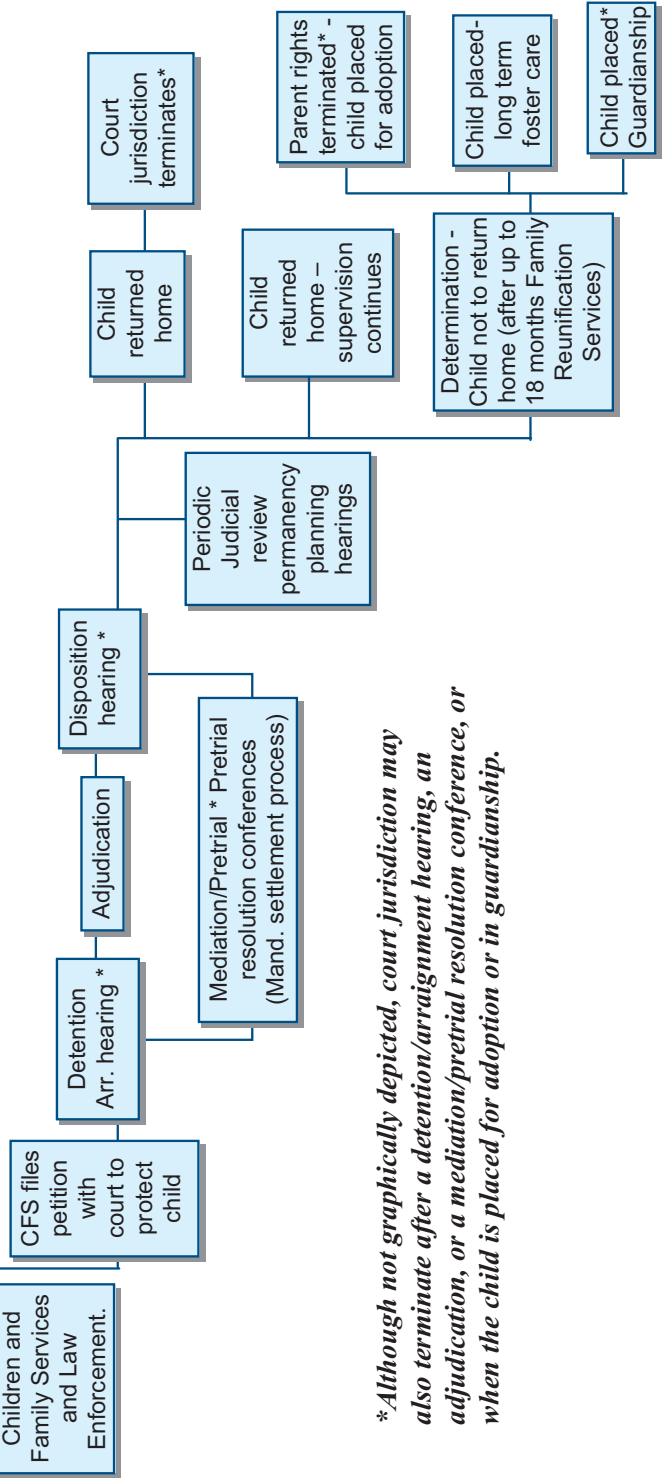
See flow Charts III, IV for individual detail on LAPD and LASD
See Flow Chart VI for detail on the L.A. District Attorney.
Where possible similar categories of agency data have been totaled.

CHILD ABUSE/NEGLECT REPORT



JUVENILE DEPENDENCY PROCESS INITIATED

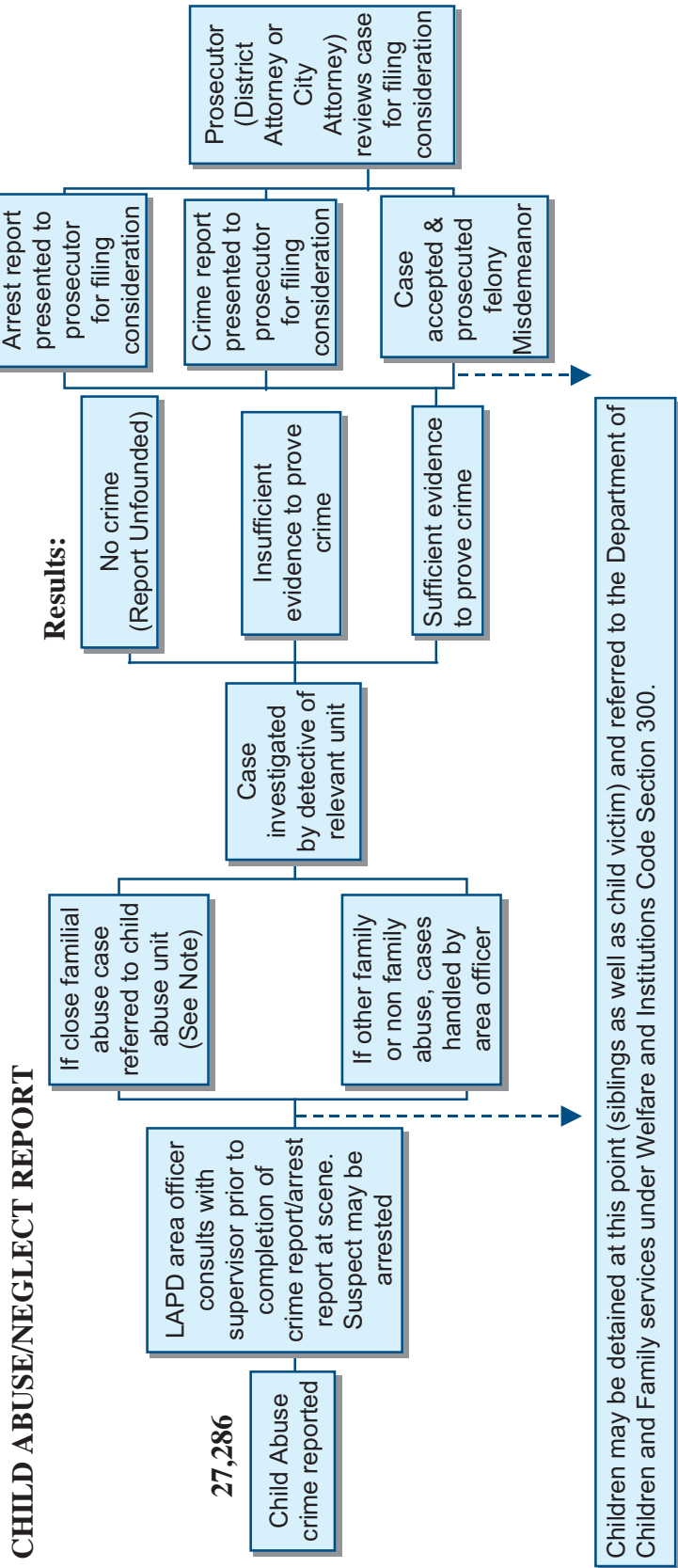
See flow Chart VII for additional detail on Juvenile Dependency Court and Department of Children and Family Services activities.



** Although not graphically depicted, court jurisdiction may also terminate after a detention/arraignment hearing, an adjudication, or a mediation/pretrial resolution conference, or when the child is placed for adoption or in guardianship.*



Flow Chart III
LOS ANGELES POLICE DEPARTMENT INVOLVEMENT IN CHILD ABUSE CASES - 2007



NOTE:

Case Count Definition

Endangering cases:

Multiple victims in same family = 1 report (case)

All other cases:

Each victim = 1 report (case)

Child Abuse Unit Responsibilities

Child Abuse Unit handles abuse involving parents, step parent, legal guardian, common law spouse.

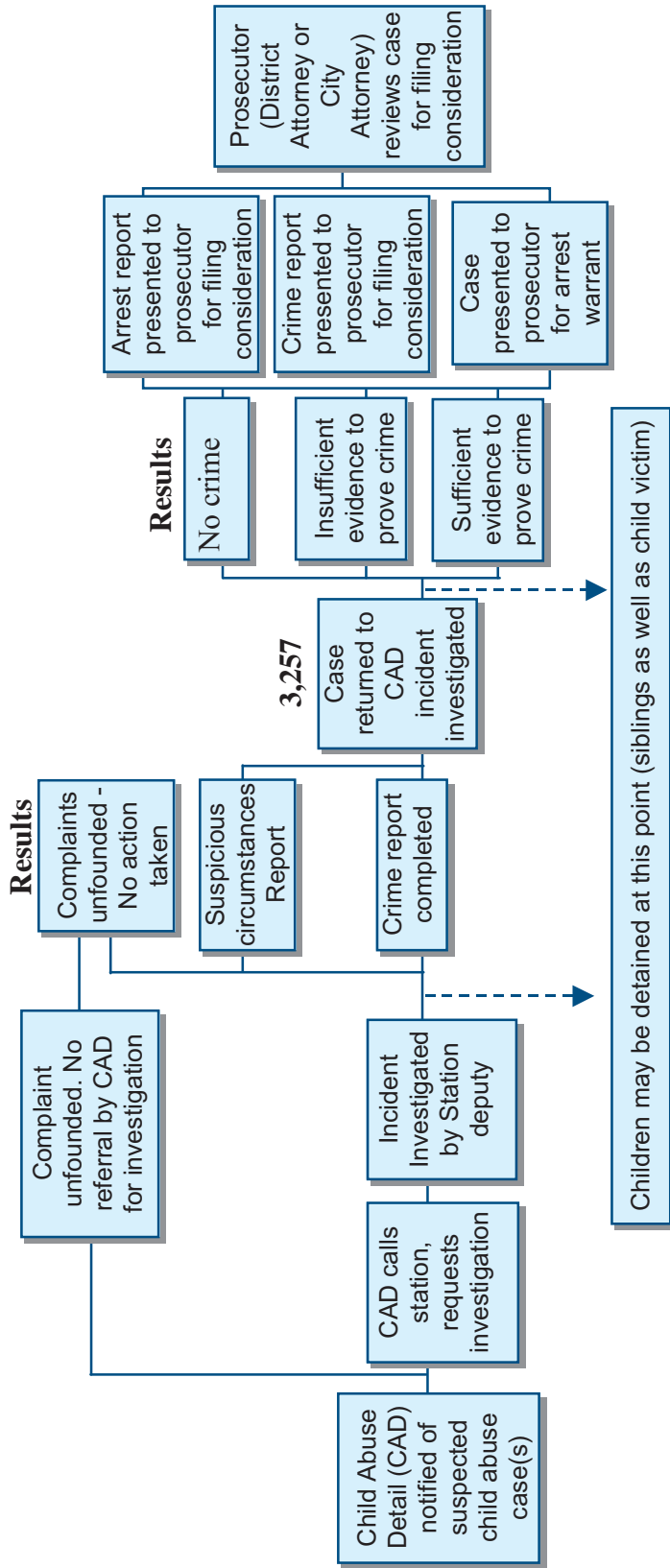
GEOGRAPHIC AREA RESPONSIBILITIES

Abuse in which perpetrator is not parent, step parent, legal guardian, or common law spouse: child not primary object of attack, but receives injury; unfit homes, endangering and dependent child cases; other cases where criteria does not meet Abused Child Unit.



Flow Chart IV

LOS ANGELES SHERIFF DEPARTMENT INVOLVEMENT IN CHILD ABUSE CASES - 2007



NOTE:

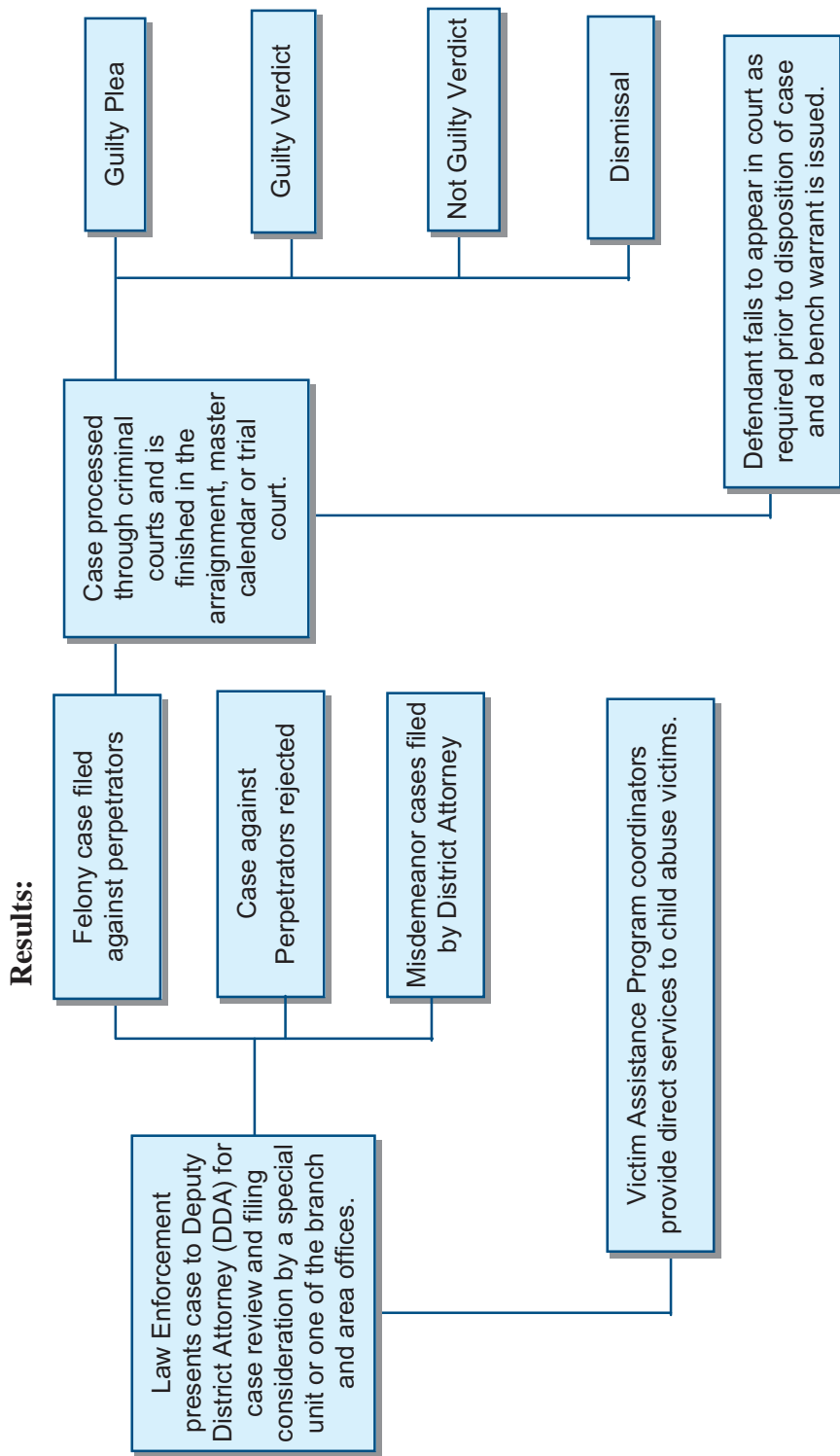
CASE COUNT DEFINITION

*Multiple victims of the same incident, in the same family are treated as one case.
The Child Abuse Detail does not handle neglect/endorsement cases.*

See the Los Angeles Sheriff's Department Report for more details on their workload.



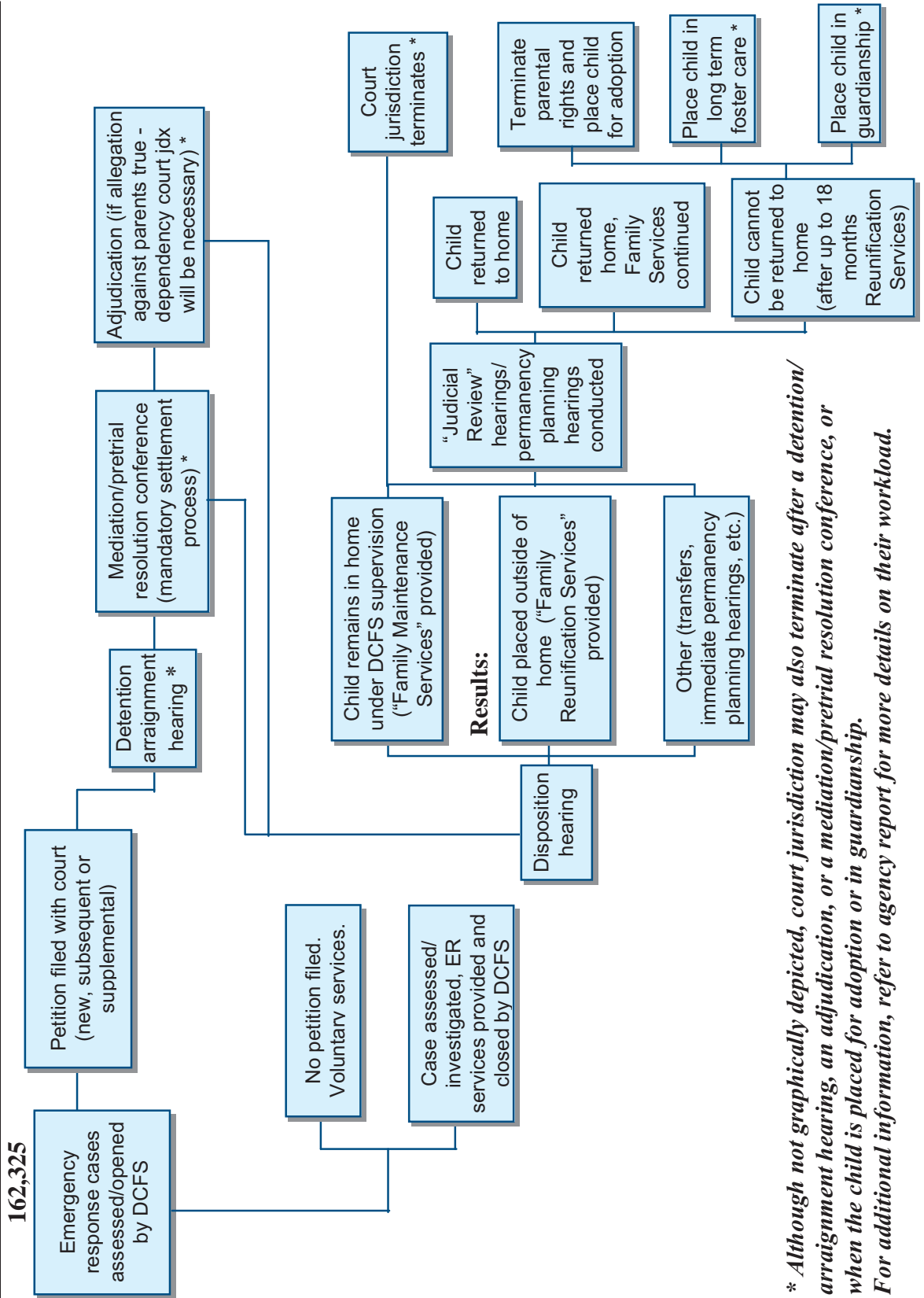
Flow Chart V
LOS ANGELES POLICE DEPARTMENT
INVOLVEMENT IN CHILD ABUSE CASES





Flow Chart VI

JUVENILE DEPENDENCY COURT/DEPARTMENT OF CHILDREN AND FAMILY SERVICES
INVOLVEMENT IN CHILD ABUSE CASES - 2007



** Although not graphically depicted, court jurisdiction may also terminate after a detention/arraignment hearing, an adjudication, or a mediation/pretrial resolution conference, or when the child is placed for adoption or in guardianship. For additional information, refer to agency report for more details on their workload.*



Flow Chart VII

**LOS ANGELES COUNTY INDEPENDENT POLICE AGENCY DATA
Involvement in Child Abuse Cases During 2007**

AGENCY	TOTAL POPULATION*	CHILD POPULATION*	2007 INVESTIGATIONS*	2007 ARRESTS*	CHILDREN PLACED IN PROTECTIVE CUSTODY*	2007 DOMESTIC VIOLENCE INVESTIGATIONS
Alhambra	85,804*	21,377*	39	10	8	148
Baldwin Park	78,568*	23,747*	16	11	3	403
Beverly Hills	34,941	6,988	89	4	not provided*	131
Claremont	36,612	6,846	106	34	8	34
Covina	49,378	13,826	15	5	0	209*
Gardena	59,733	13,738	30	20	5	215
Hawthorne	86,400	not provided	292	34	21	319
La Verne	33,449	7,784	94	11	not provided	132
Manhattan Beach	33,852	7,548	75	5	0	42
Monterey Park	62,183	13,244	127	5	4	71
Pomona	145,000	not provided	174	61	not provided*	1464
Redondo Beach	67,114	11,452	33	19	3	105
San Fernando	25,230	8,109	140	9	0	181
San Marino	13,094	3,736	12	1	0	5
Santa Fe Springs	17867*	not provided	10	3	0	59
Santa Monica	90,000	13,000	102	11	71	256
Signal Hill	11,402	not provided	37	1	6	79
South Gate	96,260*	34,245*	55	37	13	248
Vernon	91	36	2	0	0	9
Whittier	87250*	not provided	19	17	23	259



This year, we are again pleased to have data on overall youth demographics for Los Angeles County. These figures are provided by the State of California, Department of Finance. The data

are presented here to give the reader a baseline of youth age from which to draw comparisons when examining other data presented by the various agencies represented in this book.

Figure 1

POPULATION ESTIMATE BY AGE
Los Angeles County, 1999 - 2007

Age	1999	2000	2001	2002	2003	2004	2005	2006	2007
0	168,212	143,291	155,395	151,965	152,098	150,442	149,722	140,295	142,294
1	168,534	143,060	148,081	157,164	153,108	152,621	150,191	148,797	139,554
2	168,234	145,189	145,760	149,839	158,310	153,650	152,408	149,340	148,122
3	168,498	150,148	147,308	147,517	150,989	158,677	153,463	151,653	148,763
4	171,981	155,943	151,925	149,301	148,832	151,334	158,677	152,685	151,070
5	179,656	158,512	158,416	154,501	150,984	149,632	151,334	157,626	151,906
6	183,692	157,394	162,593	161,685	156,607	151,949	149,162	149,915	156,576
7	194,887	160,982	163,352	167,491	164,248	157,749	151,307	147,366	148,593
8	194,752	162,356	167,162	170,655	169,704	165,615	156,930	149,094	145,743
9	166,651	162,803	170,536	173,801	171,878	171,300	164,614	154,262	147,131
10	152,574	157,206	170,379	175,011	175,749	173,101	170,494	162,524	152,747
11	146,317	147,467	163,580	173,049	176,691	176,454	172,579	169,231	161,638
12	138,351	143,810	151,822	164,208	173,432	176,836	176,297	172,346	169,135
13	137,668	137,754	145,479	152,256	164,465	173,513	176,696	176,177	172,340
14	130,647	137,415	139,831	145,758	152,418	164,507	173,400	176,697	176,274
15	126,616	134,159	137,757	139,769	145,708	152,358	164,425	173,565	176,284
16	127,401	133,065	134,266	137,212	139,410	145,485	152,324	164,832	173,976
17	120,534	137,422	131,179	133,069	136,394	138,968	145,490	153,051	165,498
TOTAL	2,845,205	2,667,976	2,744,821	2,804,251	2,841,025	2,864,682	2,869,513	2,849,456	2,827,644

1999 - 2007 Source: State of California, Department of Finance, Race/Ethnic Population with Age and Sex Detail for counties, 200 - 2050, Sacramento, CA July 2007.

SECTION II SPECIAL REPORTS

- 61 ICAN Associates
- 63 ICAN Multi-Agency
- 65 ICAN Child Abduction Task Force



ICAN ASSOCIATES

ICAN Associates is a private/non-profit organization which supports the LA County Inter-Agency Council on Child Abuse and Neglect (ICAN) and the important issues addressed by ICAN. The Board of ICAN Associates consists of business, media and community leaders.

ICAN Associates supports ICAN through the provision of services including dissemination of materials, hosting media campaigns, sponsorship of educational forums, support of direct and indirect services to prevent child abuse and neglect as well as promoting integration and collaboration among child service agencies. Further, ICAN Associates sponsors special events for vulnerable and abused children, publishes newsletters, and coordinates community educational projects. The formation of ICAN Associates represents one of the first and most effective public/private partnerships in the nation addressing the critical issues and needs surrounding child abuse and neglect.

ICAN Associates has been extremely successful in securing funding through grants and corporate sponsorships:

In November 1996, ICAN/ICAN Associates launched the ICAN National Center on Child Fatality Review (ICAN/NCFR) at a news conference held in connection with the United States Department of Justice and United States Department of Health and Human Services. Funding for this major national project was facilitated through the efforts of ICAN Associates. Generous support was secured through the United States Department of Justice, Office of Juvenile Justice and Delinquency Prevention; Times Mirror Foundation and the family of Chief Medical

Examiner Lakshmanan Sathyavagiswaran. The NCFR web site is at www.ICAN-NCFR.org.

ICAN/ICAN Associates continues to provide statewide Child Death Review Team Training designed to address a range of issues to benefit the overall development and functioning of Child Death Review Teams throughout the State. The training curriculum is funded through a grant from the California Department of Social Services (CDSS).

The Times Mirror Company continues to assist ICAN Associates with their challenge grant to help fund the work of ICAN and its critically needed services for abused and neglected children.

In October 2008, ICAN Associates sponsored "NEXUS XII" in conjunction with The Department of Children and Family Services (DCFS), First5 LA, community groups and ICAN agencies. The Sheraton Universal Hotel in Universal City provided the exquisite setting. The conference presented an opportunity to hear from local, state and national experts, about the impact of all forms of violence within the home on children as well as potential solutions. It is hoped that the information presented will inspire professionals and volunteers to develop and participate in efforts aimed at preventing violence in the home and in communities.

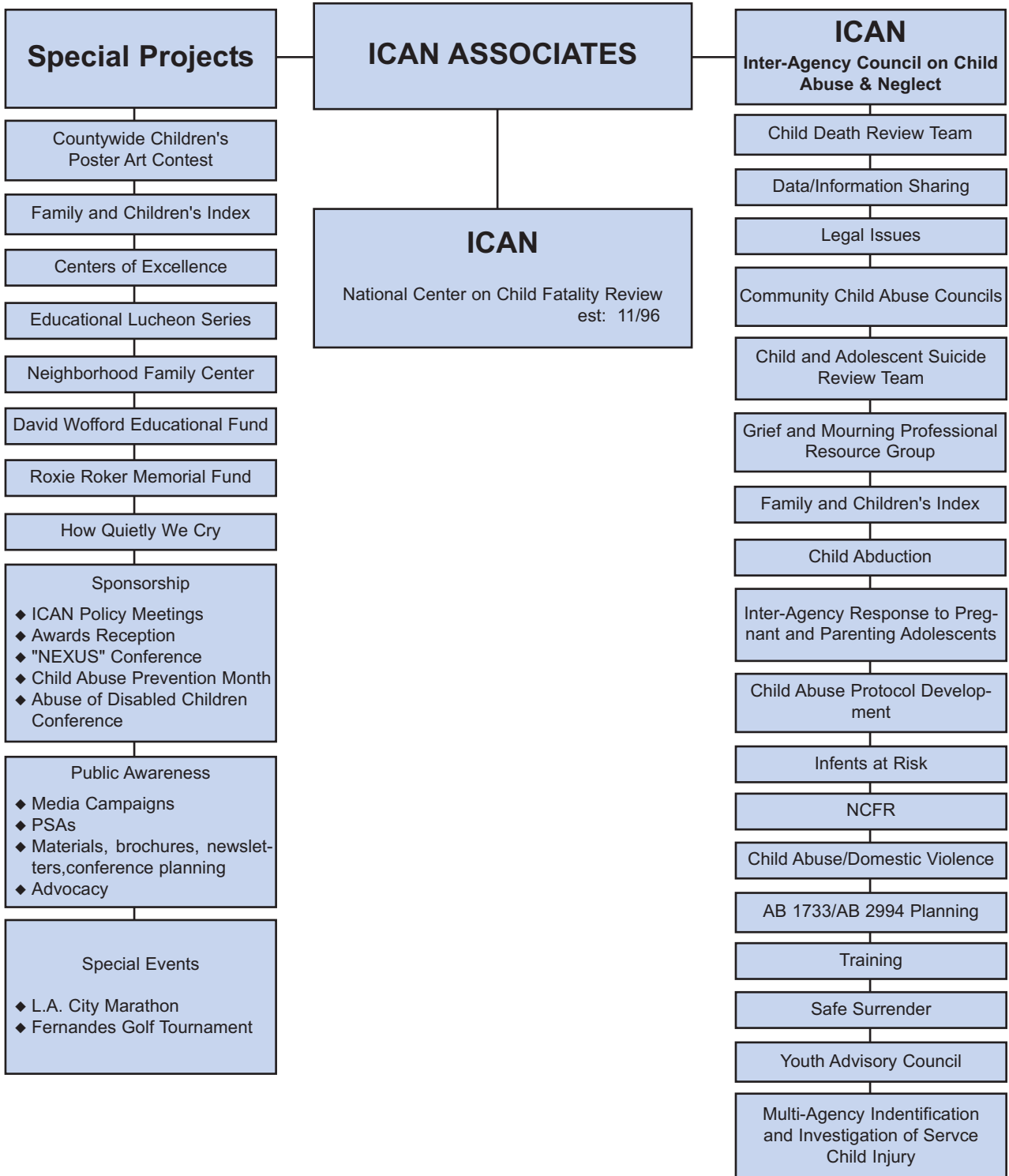
ICAN Associates again sponsored the Annual Child Abuse Prevention Month Children's Poster Art Contest which raises awareness about child abuse in schools throughout Los Angeles County. Children in the 4th, 5th and 6th grades and in special education classes participate in this contest. The children's artwork is displayed at the California Department of Social Services in Sacramento, Edmund D. Edelman Children's Court, L. A. County Office of Education,



District Attorney's Office, Hollywood Library and in numerous national publications.

ICAN Associates was honored to serve as one of the official charities of the Los Angeles Marathon. Funds raised from this event are used to assist in various projects for abused and neglected children.

ICAN Associates continues its mission of supporting ICAN's efforts on behalf of abused and neglected children in Los Angeles County, in the State of California and nationally.



**ICAN CHILD ABDUCTION
TASK FORCE REUNIFICATION OF
MISSING CHILDREN PROGRAM**

SPECIAL REPORT



REUNIFICATION OF MISSING CHILDREN PROGRAM

It is estimated that each year thousands of children are abducted by parents in Los Angeles County. In addition, numerous children are abducted each year by strangers. Thanks in part to local law enforcement, Los Angeles District Attorney Child Abduction Unit Investigators, the FBI, and Department of Children and Family Services social workers, many of these children are recovered and reunified with their custodial or foster parents. While the trauma of abduction is obvious, reunification with the searching parent and family can present its own set of difficulties. In the case of parental abduction, allegations of child abuse, domestic violence and chronic substance abuse require skilled assessment by investigating agencies.

To study and work on these issues, ICAN formed the Child Abduction Task Force in July 1990. As a result of the Task Force's efforts, in September 1991, the Reunification of Missing Children Project was initiated. The initial Project encompassed an area in West Los Angeles consisting of LAPD's West Los Angeles and Pacific Divisions; Sheriff's Marina Del Rey, Malibu/Lost Hills, West Hollywood and Lennox station areas; and the Culver City Police Department.

In September 1995, the Project was expanded countywide. The U.S. Department of Justice and the Office of Juvenile Justice and Delinquency Prevention made funding available for mental health services at two additional community mental health sites, the HELP Group in the San Fernando Valley and Plaza Community Services in East Los Angeles. Training was conducted for law enforcement agencies throughout the County, Department of

Children and Family Services social workers, mental health therapists from the HELP Group and Plaza Community Services, and District Attorney Victim Assistance staff to familiarize them with the Project and its benefits.

The expanded Project is currently referred to as the ICAN Child Abduction Task Force/Reunification of Missing Children Program, and participants include: Find the Children, Los Angeles Police Department, Los Angeles Sheriff's Department, Didi Hirsch Community Mental Health Center, ICAN Prototypes, the Child Guidance Clinic, Los Angeles County Department of Children and Family Services, Los Angeles District Attorney Child Abduction Unit, Los Angeles Legal Aid Foundation, Los Angeles County Office of County Counsel, Mexican Consulate, United States Secret Service and FBI.

The Program's goal is to reduce trauma to children and families who are victims of parental or stranger abductions by providing an effective, coordinated multi-agency response to child abduction and reunification. Services provided by the Program include quick response by mental health staff to provide assessment and intervention, linkage with support services, and coordination of law enforcement, child protection and mental health support to preserve long term family stability.

The Task Force is coordinated by Find the Children. Find the Children places a strong emphasis on preventative education through community outreach programs such as the Elementary School and Parent Presentation Program. The goal of programs like these is to educate the public on the issue of child abduction and abuse and to present measures that should be taken to



help ensure the safety of all children. These prevention-based programs are also intended to support the efforts of the Task Force.

In order to monitor and evaluate the progress of ongoing cases receiving services, Find the Children holds monthly meetings where all cases are reviewed. The Task Force participants provide expertise and assess each case for further action.

Figure 1 below shows that in 2007, the Program served 39 children in 31 cases¹ as compared to the 26 children in 21 cases served in 2006. This is a 48% increase in caseload and a 50% increase in the number of children served from the previous year. Although the increase in the number of children and families served is significant, it is still well below the eight-year average of 45,875 cases and 56,875 children. The increase in the number of children and cases over 2006 can, in part, be attributed to the on-going outreach efforts of the Task Force and Find the Children.

Figure 2 shows the ethnic breakdown for the 39 children served in calendar year 2007: 67% were Hispanic, 13% were Caucasian and 18% were African American (2% of the children did not have any race denoted). Figure 3 shows the age range of the children served in calendar year 2007: 44% percent of the children served were age 5 or younger, 25% were age 6 to 10 and 31% were age 11 or older. Figure 4 shows that of the children served, 84% were under the jurisdiction of the Department of Children and Family Services while 16% were not. Lastly, Figure 5 reflects trend data on the number of cases and children served by the Reunification Program for calendar year 2000 through 2007. Over the past 8-year period, the number of cases has averaged

45,875 per year, while the number of children served has averaged 56,875 per year. Overall, there has been a steady decrease in the number of cases and children served, except in 2003, when a slight increase in the number of cases and children served was experienced from the previous year. In 2005, there was a slight increase in children served as compared to the number of children served in 2004. Finally, in 2007 a significant increase in the number of children and cases served was experienced from 2006 which is counter to the overall trend.

¹A case represents a family which may include one or more children.



Figure 1

**NUMBER OF CASES/CHILDREN SERVED
BY REUNIFICATION PROGRAM 2006 VS 2007**

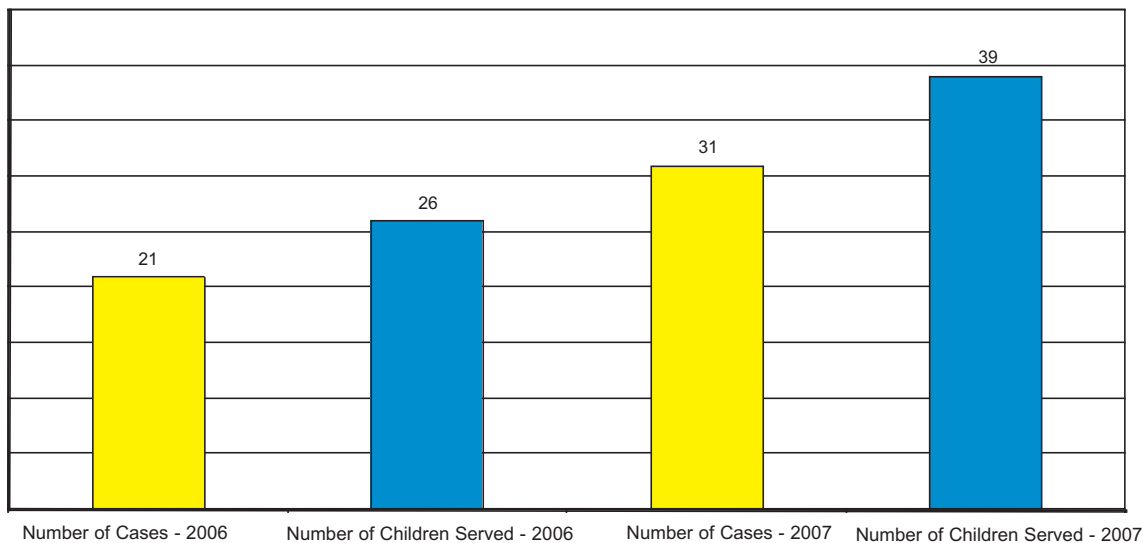
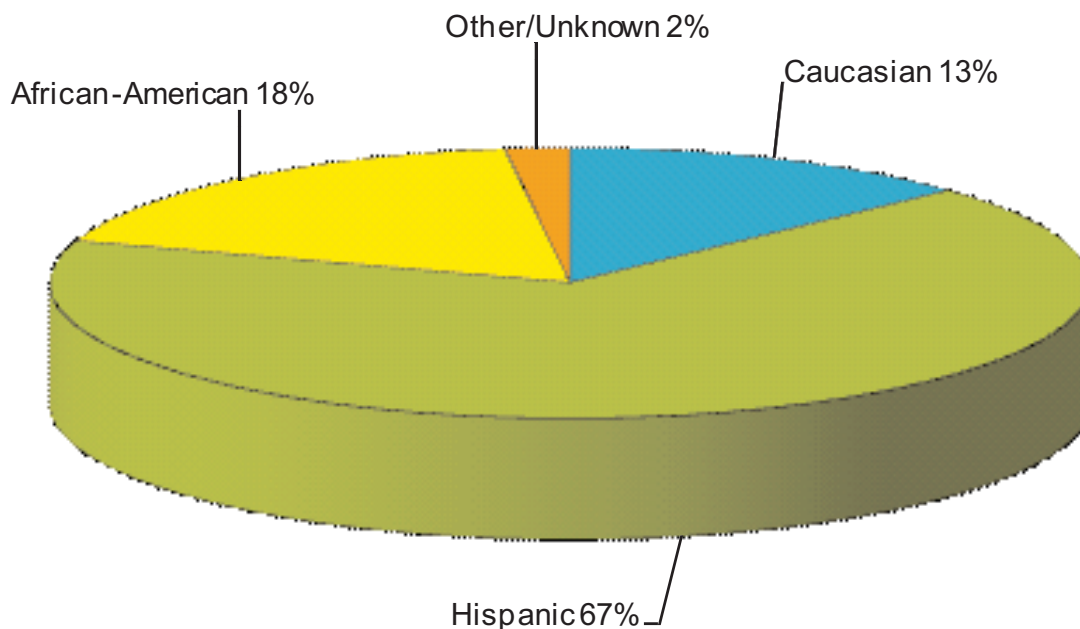


Figure 2

ETHNIC BREAKDOWN OF CHILDREN SERVED - 2007



Percentage of Child Population in Los Angeles County¹
Hispanic 59.5% Caucasian 20% African American 9.8% Asian/Pacific Islander 10.4% American Indian 0.2%

¹ From Los Angeles County Children's Planning Council Scorecard 2006



Figure 3

AGE RANGE OF CHILDREN SERVED - 2007

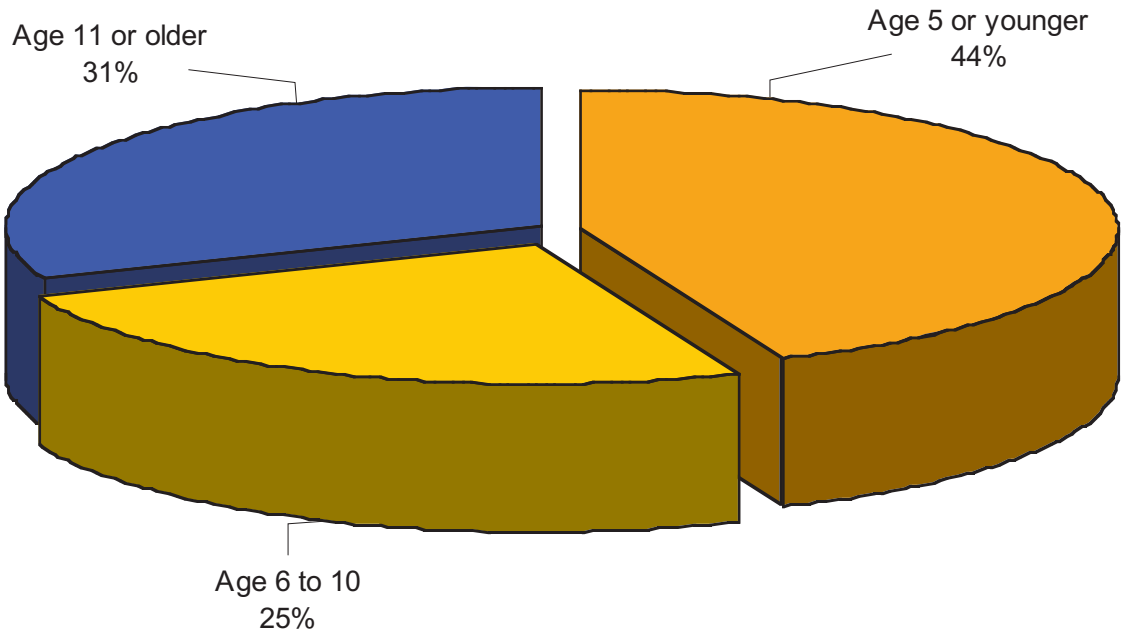


Figure 4

PERCENTAGE OF CHILDREN SERVED UNDER DCFS SUPERVISION - 2007

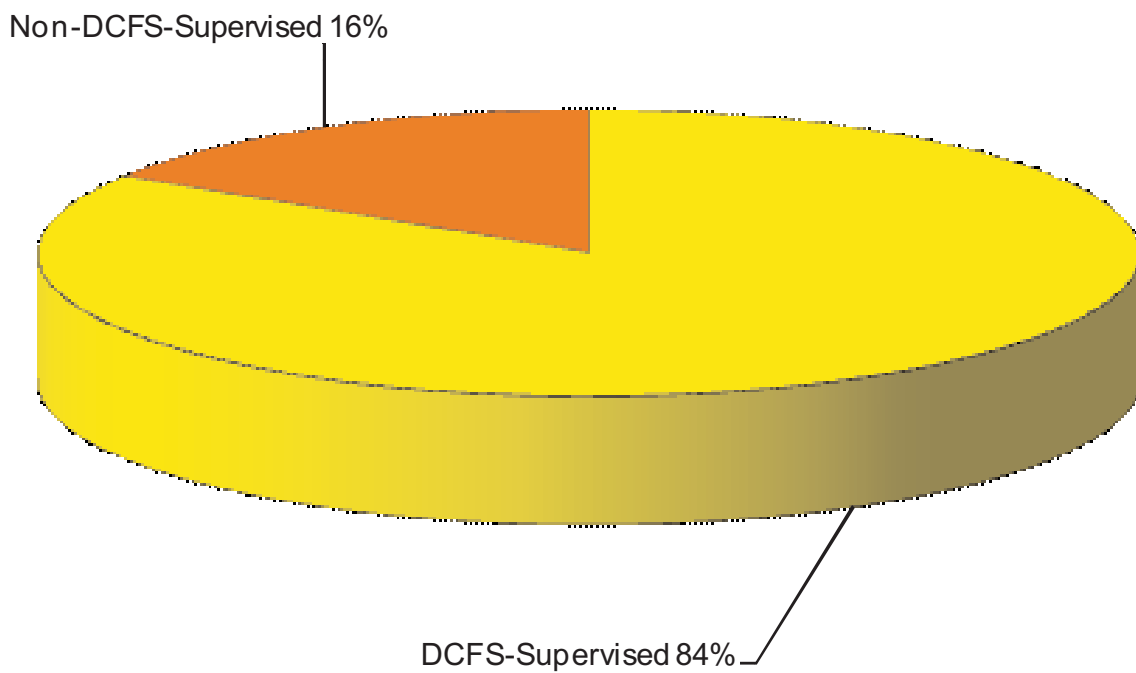
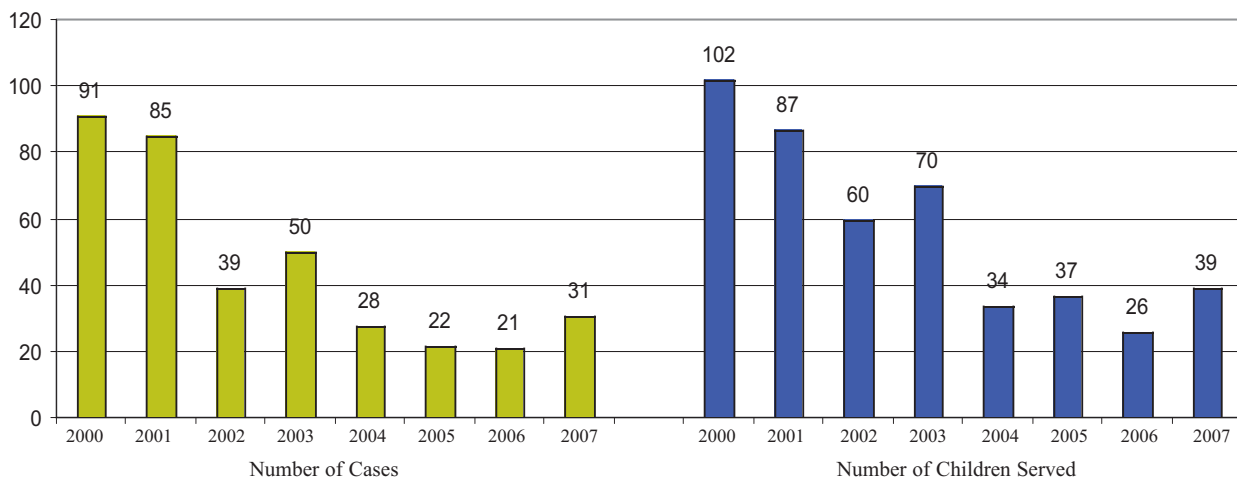




Figure 5

**CASES/CHILDREN SERVED BY REUNIFICATION
PROGRAM 2000 THROUGH 2007**



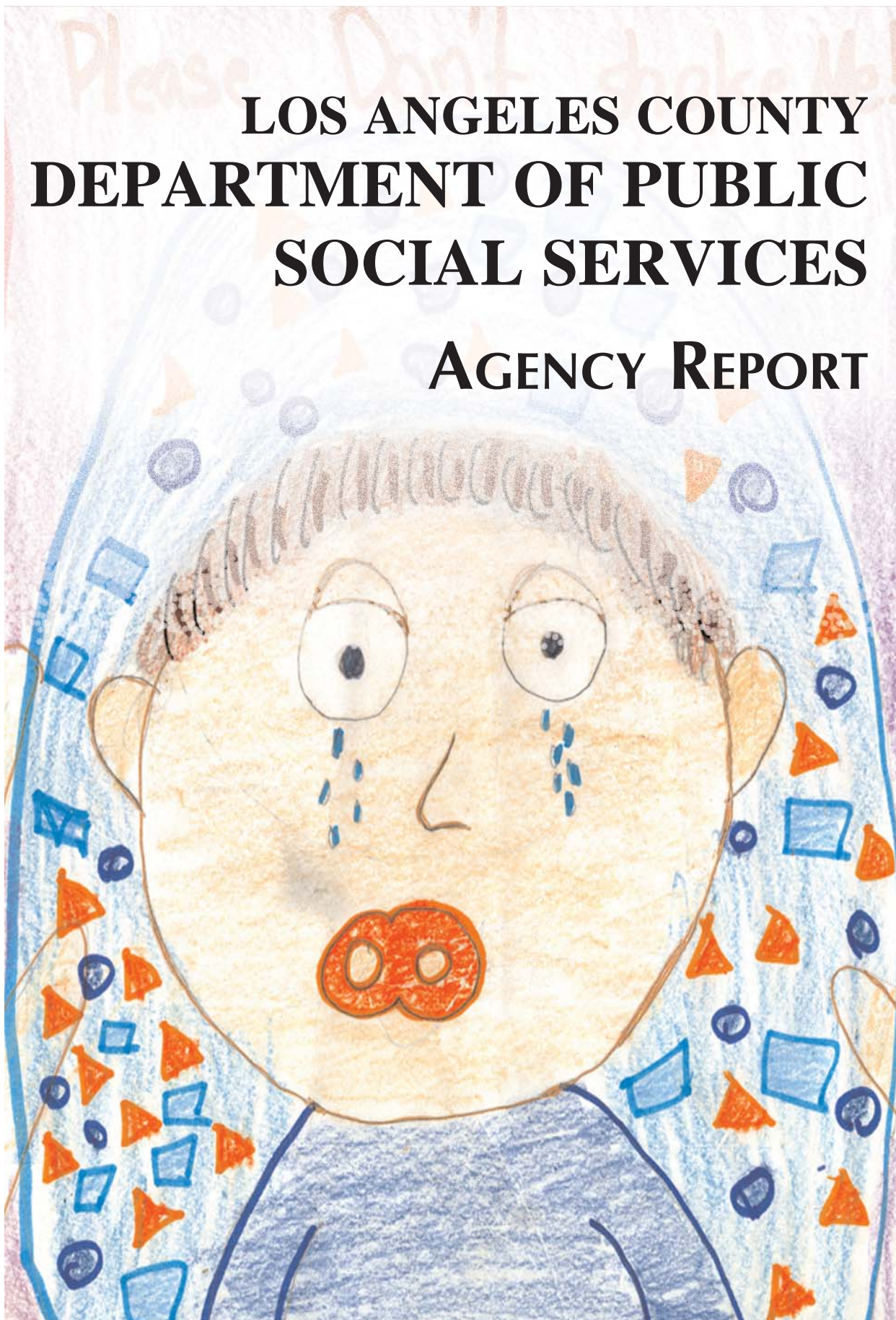
SECTION III

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**LOS ANGELES COUNTY
DEPARTMENT OF PUBLIC
SOCIAL SERVICES**

AGENCY REPORT





DEPARTMENT OF PUBLIC SOCIAL SERVICES

The Department of Public Social Services (DPSS) has an operating budget of \$3.17 billion and 14,550 employees for FY 2007-2008. The Department's primary responsibilities, as mandated by public law, are:

- To promote self-sufficiency and personal responsibility.
- To provide financial assistance to low-income residents of Los Angeles County.
- To provide protective and social services to adults who are abused, neglected, exploited or need services to prevent out-of-home care, and
- To refer a child to protective services whenever it is suspected that the child is being abused, neglected or exploited, or the home in which the child is living is unsuitable.

The Department's mission has changed dramatically. The focus of its programs has shifted from ongoing income maintenance to temporary assistance coupled with expanded services designed to help individuals and families achieve economic independence.

In 2004, the Department adopted the following "DPSS Mission and Philosophy":

DPSS MISSION

To enrich lives through effective and caring service.

DPSS PHILOSOPHY

DPSS believes that it can help those it serves to enhance the quality of their lives, provide for themselves and their families, and

make positive contributions to the community.

DPSS believes that to fulfill its mission, services must be provided in an environment that supports its staff's professional development and promotes shared leadership, teamwork and individual responsibility.

DPSS believes that as it moves towards the future, it can serve as a catalyst for commitment and action within the community, resulting in expanded resources, innovative programs and services, and new public and private sector partnership.

DPSS PROGRAMS

The State and Federal assistance programs that DPSS administers include California Work Opportunity and Responsibility to Kids (CalWORKs), the Refugee Resettlement Program (RRP), Food Stamps Program, and Medical Assistance Only (MAO). DPSS also administers the General Relief (GR) Program for the County's indigent population and the Cash Assistance Program for Immigrants (CAPI). The goal of these programs is to provide the basic essentials of food, clothing, shelter, and medical care to eligible families and individuals. In Calendar Year 2007, DPSS provided public assistance to a monthly average of 2.1 million persons, including In-Home Supportive Services (IHSS).

As a result of Welfare Reform, the California Work Opportunity and Responsibility to Kids (CalWORKs) Program replaced the Aid to Families With Dependent Children (AFDC) program effective January 1, 1998. The CalWORKs Program is designed to transition participants from welfare to work. To achieve the goal of Welfare Reform, DPSS has developed programs which help participants achieve self-sufficiency in a time-limited welfare environment. The Department's Welfare-to-



Work programs currently provide the following services: Child Care, Transportation, Post Employment Services, and treatment programs for Substance Abuse, Domestic Violence and Mental Health.

AIDED CASELOAD

As shown in the Persons Aided charts (Figure 2), using December 2006 and December 2007 as points in time for comparison, the number of CalWORKs aided persons decreased by 4.4% (16,267 persons). The number of Medical Assistance Only aided persons decreased from 1,612,219 in December 2006 to 1,602,354 in December 2007. This represents a 0.6% decrease (9,865 persons).

In total, there was a 0.6% decrease (12,206) in the number of persons receiving assistance for all programs combined from December 2006 to December 2007.

The following represents caseload changes in programs where children are most likely to receive aid:

CalWORKs

The number of participants receiving assistance through the CalWORKs Program has slowly been declining since February 2002 (Figure 6). In December 2007, 349,574 persons received cash assistance from CalWORKs. This represents a 4.4% decrease (16,267 persons) from 365,841 persons aided in December 2006 (Figure2).

FOOD STAMPS

Like the cash assistance program for families, the number of persons receiving Food Stamps peaked in 1995. In December

2007, 641,215 persons have been aided in Food Stamps Program. This represents a 1.0% increase (6,452 persons) from 634,763 aided persons in December 2006 (Figure2).

MEDICAL ASSISTANCE ONLY (MAO)

Over the 12-month period, there was a decrease from 1,612,219 persons aided in December 2006 to 1,602,354 persons aided in December 2007 (Figure2).

CASELOAD CHARACTERISTICS BY SERVICE PLANNING AREAS (SPA) – CITIZENSHIP STATUS, PRIMARY LANGUAGE, AND ETHNIC ORIGIN.

These charts display the total number of persons aided by citizenship status and ethnic origin, and the total number of cases aided by primary language for all programs by SPA.

CHILD ABUSE PREVENTION, CHILD ABUSE REFERRALS AND STAFF TRAINING

A major focus of the Department is to ensure that all of its employees are active participants in child abuse prevention. In 1987, the DPSS Training Academy implemented a comprehensive Child Abuse Prevention training program. The primary purpose of this training is to inform DPSS public contact employees about the seriousness of the child abuse problem in Los Angeles County and the employees' mandated reporting responsibilities.

Since its inception, the Child Abuse Prevention training program has been delivered to DPSS public contact staff, including social workers, GAIN Services workers, Eligibility Workers, clerical staff,



and managers. To ensure that all DPSS public contact staff receive the training, the program is incorporated into the orientation course given to all new hires.

During the training session, the trainees are informed of the types of child abuse, indicators of such abuse, provisions of the reporting law, and DPSS employees' reporting responsibilities and procedures. The trainees also review and discuss handouts given to them related to the indicators of child abuse.

Program materials and other trainings emphasize to staff that one of the child abuse/neglect indicators is violence between household members, which often endangers the child. The Domestic Violence Council provides Domestic Violence training to all of the Department's public contact staff.

During 2007, the department administered a mandatory Child Abuse and Neglect training classes for all district office, welfare fraud, and appeals staff.

In Calendar Year 2007, a total of 175 child abuse referrals were made to the Department of Children & Family Services. This represented a 41.5% decrease from the 299 referrals made in 2006 (Figure 3).

CAL-LEARN PROGRAM

Over the 12-month period, DPSS served a monthly average of 2,294 Cal-Learn participants. This represents a 5.2% decrease from a monthly average of 2,420 participants served during Calendar Year 2006 (Figure 4).



Figure 1 DPSS CASELOAD CHARACTERISTICS DECEMBER 2007 Los Angeles County Totals							
	CalWORKs	General Relief	Refugee	CAPI	Medical Assistance Only	Food Stamps	In-Home Supportive Services
CITIZENSHIP STATUS OF AIDED PERSONS							
Citizen	331,043	55,749	0	13	1,068,916	585,919	N/A
Legal Immigrants	17,917	5,614	1,245	4,111	191,995	54,672	N/A
Other	500	36	22	8	3,602	589	N/A
Undocumented Immigrants	114	7	0	1	337,841	35	N/A
TOTAL	349,574	61,406	1,267	4,133	1,602,354	641,245	N/A
PRIMARY LANGUAGE OF AIDED CASES							
Armenian	3,071	922	775	1,230	16,715	6,017	27,096
Cambodian	1,030	73	0	19	1,786	1,326	2,033
Chinese	698	190	31	180	22,858	2,300	13,159
English	82,410	55,634	51	246	292,550	173,257	66,138
Farsi	319	43	81	135	3,321	603	5,189
Korean	110	116	0	175	10,083	565	3,759
Russian	240	88	10	209	3,925	514	7,677
Spanish	51,450	3,627	38	1,149	303,779	93,069	32,048
Tagalog	57	45	0	116	5,125	317	4,852
Vietnamese	963	229	6	51	8,791	2,401	3,469
Other	262	53	26	111	5,097	559	3,057
TOTAL	140,610	61,020	1,018	3,621	674,030	280,928	168,477
ETHNIC ORIGIN OF AIDED PERSONS							
American Indian/Alaskan	377	395	0	0	1,367	1,196	372
Asian	13,267	1,670	66	728	140,846	30,742	32,283
Black	82,273	30,399	22	35	123,891	152,097	31,863
Hispanic	218,079	16,712	44	1,265	1,150,426	383,788	44,406
White	29,756	11,222	1,127	2,020	147,016	61,828	59,553
Other	5,822	1,008	8	85	38,808	11,564	0
TOTAL	349,574	61,406	1,267	4,133	1,602,354	641,215	168,477



Figure 1.1

DPSS CASELOAD CHARACTERISTICS DECEMBER 2007
Service Planning Area 1

	CalWORKs	General Relief	Refugee	CAPI	Medical Assistance Only	Food Stamps	In-Home Supportive Services
CITIZENSHIP STATUS OF AIDED PERSONS							
Citizen	23,819	2,560	0	0	48,054	38,248	N/A
Legal Immigrants	419	74	2	45	4,470	1,310	N/A
Other	25	0	0	0	72	12	N/A
Undocumented Immigrants	1	0	0	0	9,079	4	N/A
TOTAL	24,264	2,634	2	45	61,675	39,574	N/A
PRIMARY LANGUAGE OF AIDED CASES							
Armenian	6	1	0	1	25	10	52
Cambodian	2	0	0	1	2	2	6
Chinese	0	0	0	0	15	2	7
English	7,741	2,555	0	4	14,489	12,896	4,985
Farsi	0	0	1	0	6	2	17
Korean	0	0	0	1	26	1	9
Russian	0	0	0	0	3	0	3
Spanish	1,186	54	0	28	7,854	2,257	769
Tagalog	0	0	0	3	43	1	85
Vietnamese	1	0	0	0	22	10	7
Other	11	0	0	2	65	14	68
TOTAL	8,947	2,610	1	40	22,550	15,195	6,008
ETHNIC ORIGIN OF AIDED PERSONS							
American Indian/Alaskan	52	23	0	0	127	123	44
Asian	229	28	0	8	1,458	471	247
Black	10,044	1,292	0	2	10,735	15,347	2,412
Hispanic	9,202	445	0	30	37,374	15,459	1,375
White	4,205	805	2	5	10,320	7,322	1,930
Other	532	41	0	0	1,661	852	0
TOTAL	24,264	2,634	2	45	61,675	39,574	6,008



Figure 1.2 DPSS CASELOAD CHARACTERISTICS DECEMBER 2007 Service Planning Area 2							
	CalWORKs	General Relief	Refugee	CAPI	Medical Assistance Only	Food Stamps	In-Home Supportive Services
CITIZENSHIP STATUS OF AIDED PERSONS							
Citizen	37,454	3,934	0	4	176,159	65,424	N/A
Legal Immigrants	7,063	1,146	1,059	1,682	41,764	15,068	N/A
Other	66	7	0	4	483	85	N/A
Undocumented Immigrants	16	0	0	0	58,089	3	N/A
TOTAL	44,599	5,087	1,059	1,690	276,495	80,580	N/A
PRIMARY LANGUAGE OF AIDED CASES							
Armenian	2,469	758	743	979	12,971	4,903	20,578
Cambodian	18	0	0	1	32	18	41
Chinese	9	2	0	4	335	19	191
English	8,075	3,760	14	52	53,117	16,526	7,758
Farsi	226	28	62	69	1,656	427	2,736
Korean	18	8	0	19	1,043	54	371
Russian	109	41	5	75	973	229	2,213
Spanish	6,599	322	8	147	52,806	11,628	4,589
Tagalog	19	10	0	30	1,230	94	1,232
Vietnamese	77	16	0	5	693	185	355
Other	82	17	4	33	1,539	167	1,195
TOTAL	17,701	4,962	836	1,414	126,395	34,250	41,259
ETHNIC ORIGIN OF AIDED PERSONS							
American Indian/Alaskan	58	29	0	0	183	147	78
Asian	1,138	137	0	90	16,786	2,424	3,093
Black	3,601	917	1	1	6,702	6,378	1,300
Hispanic	26,657	1,408	10	165	183,506	46,269	5,849
White	12,555	2,553	1,048	1,410	62,915	24,241	30,939
Other	590	43	0	24	6,403	1,121	0
TOTAL	44,599	5,087	1,059	1,690	276,495	80,580	41,259



Figure 1.3

DPSS CASELOAD CHARACTERISTICS DECEMBER 2007
Service Planning Area 3

	CalWORKs	General Relief	Refugee	CAPI	Medical Assistance Only	Food Stamps	In-Home Supportive Services
CITIZENSHIP STATUS OF AIDED PERSONS							
Citizen	42,065	6,395	0	3	171,756	76,652	N/A
Legal Immigrants	1,718	576	62	448	37,061	6,740	N/A
Other	37	2	4	0	564	41	N/A
Undocumented Immigrants	13	0	0	0	43,062	4	N/A
TOTAL	43,833	6,973	66	451	252,443	83,437	N/A
PRIMARY LANGUAGE OF AIDED CASES							
Armenian	56	19	7	20	603	130	1,320
Cambodian	99	6	0	2	261	131	167
Chinese	518	157	28	138	17,342	1,737	9,641
English	10,706	6,196	5	27	50,631	21,514	8,536
Farsi	3	0	0	3	104	6	111
Korean	7	4	0	10	638	22	228
Russian	5	0	0	3	30	6	61
Spanish	5,159	344	8	129	38,842	9,650	4,952
Tagalog	13	3	0	22	768	43	934
Vietnamese	632	169	5	33	6,072	1,667	2,247
Other	56	7	9	24	991	106	557
TOTAL	17,254	6,905	62	411	116,282	35,012	28,754
ETHNIC ORIGIN OF AIDED PERSONS							
American Indian/Alaskan	86	72	0	0	307	220	44
Asian	4,064	484	41	252	57,229	11,591	14,258
Black	4,587	1,617	1	1	8,134	8,377	2,091
Hispanic	31,138	3,292	10	140	163,387	54,982	7,965
White	3,457	1,375	10	45	16,799	7,106	4,396
Other	501	133	4	13	6,587	1,161	0
TOTAL	43,833	6,973	66	451	252,443	83,437	28,754



Figure 1.4 DPSS CASELOAD CHARACTERISTICS DECEMBER 2007 Service Planning Area 4							
	CalWORKs	General Relief	Refugee	CAPI	Medical Assistance Only	Food Stamps	In-Home Supportive Services
CITIZENSHIP STATUS OF AIDED PERSONS							
Citizen	37,273	10,049	0	1	133,036	73,641	N/A
Legal Immigrants	2,683	1,472	46	934	30,977	9,955	N/A
Other	79	12	18	3	713	129	N/A
Undocumented Immigrants	16	2	0	1	55,213	5	N/A
TOTAL	40,051	11,535	64	939	219,939	83,730	N/A
PRIMARY LANGUAGE OF AIDED CASES							
Armenian	495	135	17	202	2,740	894	4,458
Cambodian	49	3	0	4	208	78	98
Chinese	147	21	1	18	3,328	459	2,317
English	6,253	10,042	13	55	31,166	19,677	6,154
Farsi	4	0	0	7	180	11	305
Korean	63	81	0	108	6,033	362	2,166
Russian	102	40	4	99	2,299	237	4,059
Spanish	9,644	1,096	6	293	47,720	18,729	5,590
Tagalog	13	22	0	28	1,914	110	1,241
Vietnamese	78	24	0	6	725	205	243
Other	22	11	11	20	903	93	246
TOTAL	16,870	11,475	52	840	97,216	40,855	26,877
ETHNIC ORIGIN OF AIDED PERSONS							
American Indian/Alaskan	35	92	0	0	147	179	38
Asian	1,480	371	15	211	27,698	4,613	6,906
Black	3,197	4,662	15	10	6,317	9,754	1,726
Hispanic	32,661	4,372	5	311	164,756	61,953	7,068
White	2,308	1,843	29	388	17,374	6,242	11,139
Other	370	195	0	19	3,647	989	0
TOTAL	40,051	11,535	64	939	219,939	83,730	26,877



Figure 1.5

DPSS CASELOAD CHARACTERISTICS DECEMBER 2007
Service Planning Area 5

	CalWORKs	General Relief	Refugee	CAPI	Medical Assistance Only	Food Stamps	In-Home Supportive Services
CITIZENSHIP STATUS OF AIDED PERSONS							
Citizen	3,780	3,181	0	1	22,420	9,906	N/A
Legal Immigrants	340	174	31	140	5,432	915	N/A
Other	2	1	0	0	118	6	N/A
Undocumented Immigrants	2	0	0	0	4,805	2	N/A
TOTAL	4,124	3,356	31	141	32,775	10,829	N/A
PRIMARY LANGUAGE OF AIDED CASES							
Armenian	1	0	2	2	25	4	29
Cambodian	0	0	0	0	2	1	1
Chinese	0	0	0	1	172	2	50
English	1,374	3,270	7	28	11,954	6,006	2,685
Farsi	67	15	14	46	1,174	131	1,794
Korean	2	1	0	0	117	4	27
Russian	10	4	0	17	462	22	1,071
Spanish	337	53	1	18	4,530	712	501
Tagalog	0	0	0	1	47	2	15
Vietnamese	2	0	0	0	24	3	13
Other	14	3	2	12	312	33	142
TOTAL	1,807	3,346	26	125	18,819	6,920	6,328
ETHNIC ORIGIN OF AIDED PERSONS							
American Indian/Alaskan	20	28	0	0	37	56	11
Asian	116	47	3	13	2,063	254	288
Black	1,469	1,557	1	4	3,079	3,946	545
Hispanic	1,565	371	1	19	15,049	3,094	755
White	845	1,291	25	98	10,663	3,199	4,729
Other	109	62	1	7	1,884	280	0
TOTAL	4,124	3,356	31	141	32,775	10,829	6,328



Figure 1.6 DPSS CASELOAD CHARACTERISTICS DECEMBER 2007 SERVICE PLANNING AREA 6							
	CalWORKs	General Relief	Refugee	CAPI	Medical Assistance Only	Food Stamps	In-Home Supportive Services
CITIZENSHIP STATUS OF AIDED PERSONS							
Citizen	86,042	12,745	0	0	189,908	144,166	N/A
Legal Immigrants	2,031	860	1	238	23,739	8,180	N/A
Other	110	8	0	0	567	115	N/A
Undocumented Immigrants	38	4	0	0	72,013	9	N/A
TOTAL	88,221	13,617	1	238	286,227	152,470	N/A
PRIMARY LANGUAGE OF AIDED CASES							
Armenian	1	0	0	1	12	1	2
Cambodian	20	1	0	1	27	23	36
Chinese	1	0	0	1	47	4	17
English	21,898	12,823	1	7	38,190	41,934	16,966
Farsi	1	0	0	0	2	1	2
Korean	3	8	0	10	435	38	206
Russian	0	1	0	0	8	1	6
Spanish	13,764	752	0	198	59,846	23,728	3,817
Tagalog	2	0	0	0	30	2	45
Vietnamese	3	0	0	0	17	9	8
Other	16	4	0	4	142	31	73
TOTAL	35,709	13,589	1	222	98,756	65,772	21,178
ETHNIC ORIGIN OF AIDED PERSONS							
American Indian/Alaskan	25	28	0	0	89	92	37
Asian	551	79	1	11	2,223	997	446
Black	36,693	10,728	0	7	49,802	63,771	15,720
Hispanic	49,286	2,083	0	213	228,316	84,171	4,588
White	554	464	0	1	1,748	1,331	387
Other	1,112	235	0	6	4,049	2,108	0
TOTAL	88,221	13,617	1	238	286,227	152,470	21,178



Figure 1.7

DPSS CASELOAD CHARACTERISTICS DECEMBER 2007
Service Planning Area 7

	CalWORKs	General Relief	Refugee	CAPI	Medical Assistance Only	Food Stamps	In-Home Supportive Services
CITIZENSHIP STATUS OF AIDED PERSONS							
Citizen	43,143	2,265	0	1	153,090	70,789	N/A
Legal Immigrants	1,726	573	17	319	23,676	5,687	N/A
Other	94	2	0	0	475	100	N/A
Undocumented Immigrants	12	1	0	0	48,666	2	N/A
TOTAL	44,975	2,841	17	320	225,907	76,578	N/A
PRIMARY LANGUAGE OF AIDED CASES							
Armenian	14	2	1	11	102	25	519
Cambodian	40	5	0	2	173	63	218
Chinese	11	4	0	10	798	27	647
English	9,902	2,201	0	22	36,261	15,257	6,530
Farsi	2	0	0	1	14	1	9
Korean	6	1	0	12	829	31	272
Russian	1	0	0	2	19	3	40
Spanish	7,853	589	13	208	50,906	14,005	8,486
Tagalog	4	1	0	8	471	20	401
Vietnamese	28	6	0	1	263	54	147
Other	20	3	0	9	561	45	320
TOTAL	17,881	2,812	14	286	90,397	29,531	17,589
ETHNIC ORIGIN OF AIDED PERSONS							
American Indian/Alaskan	45	22	0	0	219	134	48
Asian	776	65	0	50	9,405	1,484	2,257
Black	2,436	199	0	1	4,214	3,676	772
Hispanic	38,964	2,118	16	239	197,705	66,213	12,066
White	2,210	403	0	20	9,458	3,873	2,446
Other	544	34	1	10	4,906	1,198	0
TOTAL	44,975	2,841	17	320	225,907	76,578	17,589



Figure 1.8 DPSS CASELOAD CHARACTERISTICS DECEMBER 2007 Service Planning Area 8							
	CalWORKs	General Relief	Refugee	CAPI	Medical Assistance Only	Food Stamps	In-Home Supportive Services
CITIZENSHIP STATUS OF AIDED PERSONS							
Citizen	54,524	14,297	0	2	153,276	101,848	N/A
Legal Immigrants	1,749	658	12	238	21,611	6,174	N/A
Other	82	3	0	0	550	91	N/A
Undocumented Immigrants	16	0	0	0	42,000	6	N/A
TOTAL	56,371	14,958	12	240	217,437	108,119	N/A
PRIMARY LANGUAGE OF AIDED CASES							
Armenian	0	1	0	3	29	2	61
Cambodian	790	55	0	8	1,060	994	1,463
Chinese	3	4	1	2	384	23	228
English	15,775	14,462	9	44	47,997	38,108	11,913
Farsi	5	0	0	5	78	7	158
Korean	8	10	0	14	703	43	445
Russian	3	0	1	5	40	5	99
Spanish	6,404	359	1	106	36,021	11,381	2,993
Tagalog	6	9	0	23	514	41	864
Vietnamese	132	12	0	5	805	243	424
Other	35	7	0	6	476	61	426
TOTAL	23,161	14,919	12	221	88,107	50,908	19,074
ETHNIC ORIGIN OF AIDED PERSONS							
American Indian/Alaskan	56	100	0	0	208	233	70
Asian	4,754	444	2	82	21,404	8,539	4,579
Black	19,617	9,284	4	8	31,865	39,784	7,038
Hispanic	26,653	2,484	1	124	141,584	48,000	4,279
White	3,269	2,385	3	21	13,501	7,780	3,108
Other	2,022	261	2	5	8,875	3,783	0
TOTAL	56,371	14,958	12	240	217,437	108,119	19,074



Figure 1.9

DPSS CASELOAD CHARACTERISTICS DECEMBER 2007
Service Planning Area Unknown*

	CalWORKs	General Relief	Refugee	CAPI	Medical Assistance Only	Food Stamps	In-Home Supportive Services
CITIZENSHIP STATUS OF AIDED PERSONS							
Citizen	2,943	323	0	1	21,217	5,245	N/A
Legal Immigrants	188	81	15	67	3,265	643	N/A
Other	5	1	0	1	60	10	N/A
Undocumented Immigrants	0	0	0	0	4,914	0	N/A
TOTAL	3,136	405	15	69	29,456	5,898	N/A
PRIMARY LANGUAGE OF AIDED CASES							
Armenian	29	6	5	11	208	48	77
Cambodian	12	3	0	0	21	16	3
Chinese	9	2	1	6	437	27	61
English	686	325	2	7	8,745	1,339	611
Farsi	11	0	4	4	107	17	57
Korean	3	3	0	1	259	10	35
Russian	10	2	0	8	91	11	125
Spanish	504	58	1	22	5,254	979	351
Tagalog	0	0	0	1	108	4	35
Vietnamese	10	2	1	1	170	25	25
Other	6	1	0	1	108	9	30
TOTAL	1,280	402	14	62	15,508	2,485	1,410
ETHNIC ORIGIN OF AIDED PERSONS							
American Indian/Alaskan	0	1	0	0	50	12	2
Asian	159	15	4	11	2,580	369	209
Black	629	143	0	1	3,043	1,064	259
Hispanic	1,953	139	1	24	18,749	3,647	461
White	353	103	10	32	4,238	734	479
Other	42	4	0	1	796	72	0
TOTAL	3,136	405	15	69	29,456	5,898	1,410

* Unknown counts represent cases with addresses that cannot be geocoded for various reasons such as P.O. Box addresses, incomplete addresses, and etc.



Figure 2

PERSONS AIDED-ALL AID PROGRAMS DECEMBER 2007
Compared to December 2006

Program	Dec. 2006	Dec. 2007	Change	% Change
CalWORKs	365,841	349,574	-16,267	-4.4%
General Relief	57,145	61,406	4,261	7.5%
CAPI	2,935	4,133	1,198	40.8%
Refugee	966	1,267	301	31.2%
Medical Assistance Only	1,612,219	1,602,354	-9,865	-0.6%
Food Stamps	634,763	641,215	6,452	1.0%
IHSS	159,250	168,477	9,227	5.8%
Total All Programs *	2,130,380	2,118,174	-12,206	-0.6%

* This total represents an unduplicated count of persons across all programs since some persons are aided in more than one program.

Figure 3

CHILD ABUSE REFERRALS
January 1998 - December 2007

Month	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	06/07 change	06/07 % change
Jan	80	78	29	56	47	20	37	20	26	16	-10	-38.5%
Feb	86	41	42	39	50	13	33	24	16	13	-3	-18.8%
Mar	88	70	64	41	23	32	32	21	31	12	-19	-61.3%
Apr	104	49	64	42	50	28	29	34	41	15	-26	-63.4%
May	73	67	87	51	43	31	27	15	29	13	-16	-55.2%
June	88	54	78	43	43	50	32	32	31	12	-19	-61.3%
July	99	49	65	51	32	38	43	36	26	13	-13	-50.0%
Aug	98	85	61	47	28	48	38	36	34	15	-19	-55.9%
Sept	75	69	58	46	34	45	35	20	21	20	-1	-4.8%
Oct	71	65	59	60	31	35	17	26	27	22	-5	-18.5%
Nov	17	53	53	42	21	28	23	24	14	17	3	21.4%
Dec	40	30	61	38	21	28	19	17	3	7	4	133.3%
TOTAL	919	710	721	556	423	396	365	305	299	175	-124	-41.5%

Some of the referrals may have been for the same children. Referral counts are from two sources.

- (1) DPSS employees observing incidents which indicate abuse/neglect and making referrals to the Department of Children and Family Services.
- (2) Data collated from reports received from the DPSS Welfare Fraud Preventing & Investigation Section.



Figure 4

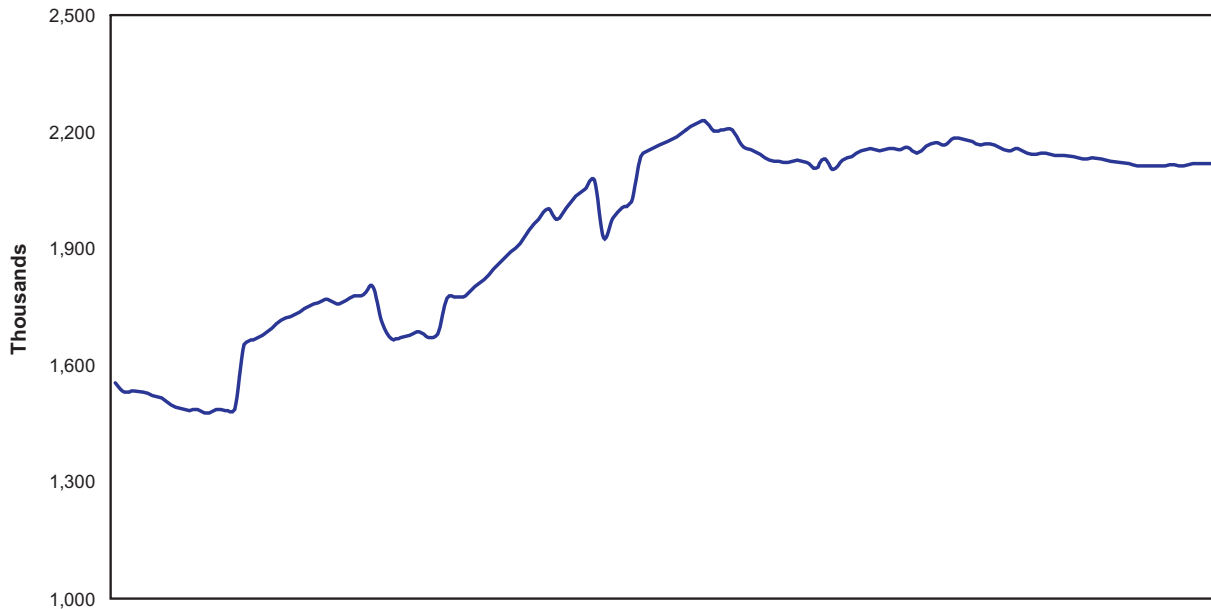
CAL-LEARN PARTICIPANTS SERVED
January 2001 - December 2007

Year Month	2001	2002	2003	2004	2005	2006	2007	2006/07 change	2006/07 % change
Jan	3,253	3,431	3,281	2,699	2,358	2,452	2,181	-271	-11.1%
Feb	3,251	3,586	3,278	2,650	2,390	2,504	2,234	-270	-10.8%
Mar	3,288	3,411	3,106	2,505	2,377	2,435	2,155	-280	-11.5%
Apr	3,238	3,395	3,005	2,557	2,369	2,467	2,186	-281	-11.4%
May	3,176	3,427	2,911	2,533	2,430	2,339	2,270	-69	-2.9%
June	3,110	3,417	2,966	2,554	2,355	2,412	2,307	-105	-4.4%
July	3,206	3,385	2,826	2,511	2,371	2,410	2,250	-160	-6.6%
Aug	3,329	3,308	2,840	2,437	2,456	2,442	2,292	-150	-6.1%
Sept	3,327	3,296	2,803	2,360	2,344	2,414	2,305	-109	-4.5%
Oct	3,464	3,269	2,789	2,353	2,424	2,366	2,408	42	1.8%
Nov	3,447	3,287	2,793	2,327	2,400	2,412	2,450	38	1.6%
Dec	3,521	3,294	2,682	2,365	2,444	2,389	2,488	99	4.1%



Figure 5

PERSONS AIDED - ALL AIDS COMBINED
January 1998 - December 2007



Month	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
January	1,553,899	1,483,869	1,756,212	1,772,223	1,974,284	2,176,029	2,125,174	2,157,416	2,159,561	2,125,532
February	1,530,151	1,486,946	1,766,419	1,774,694	2,004,216	2,185,622	2,121,033	2,155,158	2,151,993	2,121,183
March	1,534,206	1,652,199	1,778,684	1,777,189	2,033,305	2,205,706	2,126,252	2,160,504	2,156,830	2,118,608
April	1,530,926	1,665,832	1,781,558	1,801,891	2,053,985	2,220,340	2,120,822	2,143,971	2,146,245	2,112,631
May	1,521,529	1,676,300	1,803,096	1,820,217	2,077,231	2,227,731	2,107,699	2,164,290	2,143,301	2,113,264
June	1,517,219	1,694,090	1,710,715	1,846,217	1,928,402	2,202,094	2,131,565	2,170,799	2,144,293	2,111,673

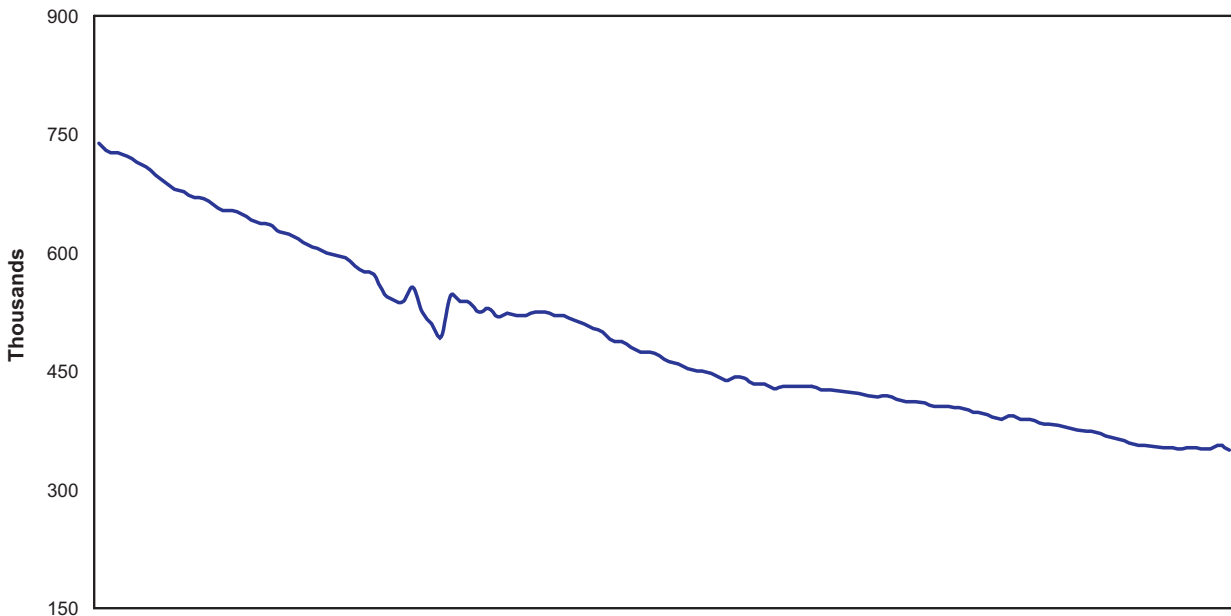
July	1,496,928	1,716,905	1,667,884	1,871,520	1,977,951	2,205,980	2,102,765	2,165,355	2,138,980	2,112,568
August	1,490,182	1,724,536	1,671,997	1,890,253	2,005,337	2,203,801	2,127,918	2,184,371	2,140,548	2,116,434
September	1,484,360	1,737,460	1,676,433	1,911,380	2,018,573	2,165,470	2,137,604	2,182,116	2,137,037	2,113,352
October	1,487,282	1,751,308	1,685,273	1,947,269	2,134,995	2,154,853	2,151,665	2,174,983	2,129,048	2,118,831
November	1,476,617	1,761,779	1,671,996	1,975,315	2,153,486	2,142,473	2,156,602	2,164,674	2,132,091	2,119,663
December	1,487,157	1,768,072	1,680,884	2,002,498	2,166,367	2,128,450	2,152,193	2,170,366	2,130,380	2,118,174

Note: Effective July 2000, the data includes actual counts from LEADER districts.
 Data from May 1999 to June 2000 includes estimated LEADER counts.



Figure 6

PERSONS AIDED - CalWORKs
January 1998 - December 2007



	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
January	738,794	661,221	599,169	493,919	520,000	462,610	430,391	414,741	393,222	361,495
February	727,891	654,160	596,444	546,415	521,144	459,815	430,449	411,996	389,308	357,170
March	727,230	653,703	593,048	538,982	514,243	453,464	431,113	411,982	388,639	355,533
April	722,847	648,935	583,782	537,586	509,779	450,140	430,219	409,394	384,683	354,031
May	715,096	641,760	575,411	524,665	504,467	448,322	426,729	405,720	382,422	353,662
June	709,102	636,322	572,814	530,180	499,743	445,039	426,184	405,630	381,675	353,094

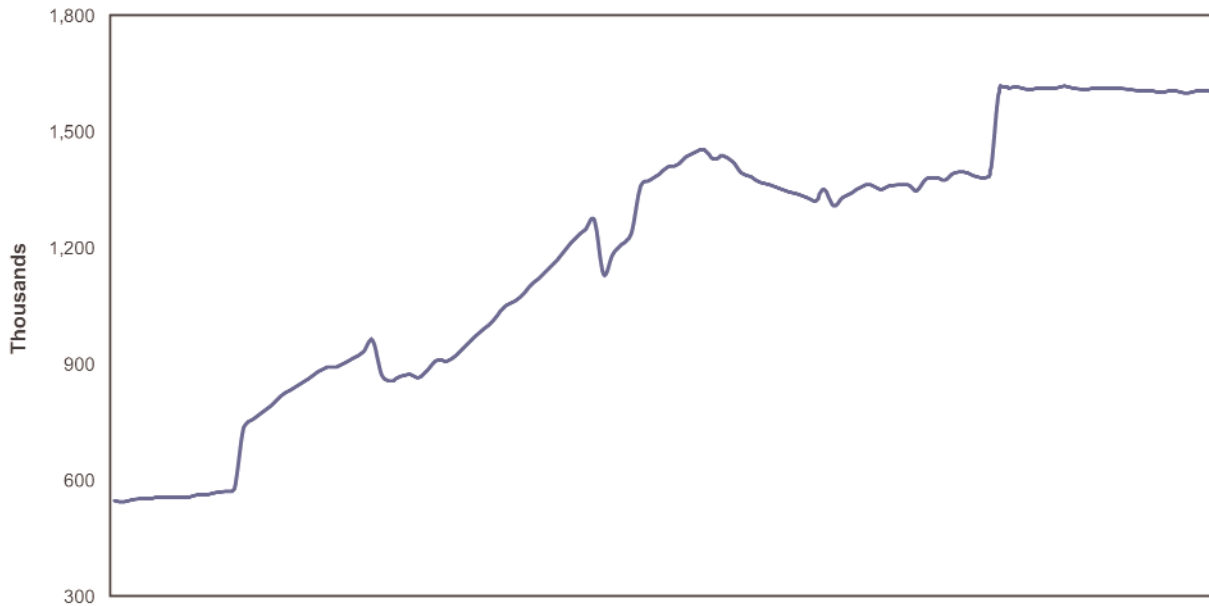
July	697,893	635,161	547,261	519,300	488,909	438,361	424,338	403,975	378,299	351,664
August	689,690	626,604	540,582	523,951	487,753	443,245	422,880	403,067	375,389	352,669
September	680,358	623,957	538,382	521,095	480,849	441,248	421,714	397,342	374,190	351,816
October	676,982	618,375	556,985	520,694	474,026	434,549	419,500	396,161	372,159	352,014
November	670,044	610,687	524,966	524,578	474,233	433,899	417,371	392,509	368,084	355,989
December	669,088	606,237	510,582	525,443	469,554	428,578	418,660	388,447	365,841	349,574

Note: Effective July 2000, the data includes actual counts from LEADER districts.
Data from May 1999 to June 2000 includes estimated LEADER counts.



Figure 7

PERSONS AIDED - MEDICAL ASSISTANCE ONLY
January 1998 - December 2007



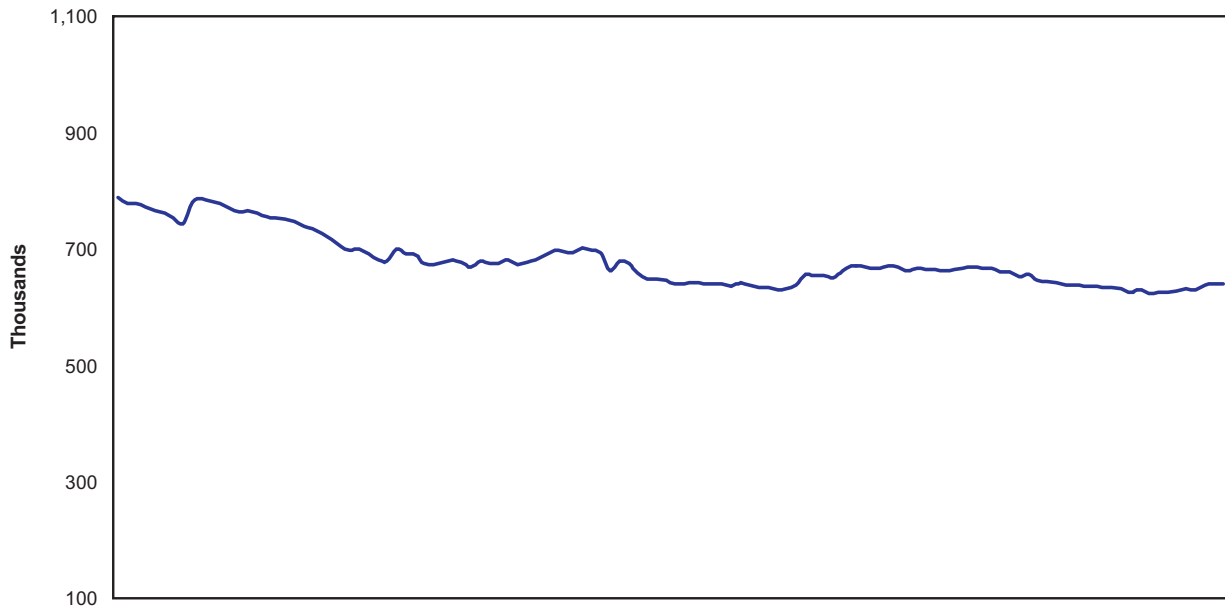
Month	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
January	545,557	571,007	889,755	906,938	1,166,682	1,406,522	1,353,228	1,358,470	1,610,580	1,610,495
February	541,932	577,075	902,304	921,546	1,195,551	1,413,691	1,344,771	1,362,025	1,609,912	1,611,324
March	547,734	736,143	914,589	945,297	1,224,869	1,433,380	1,336,927	1,361,840	1,612,873	1,606,981
April	551,182	754,584	931,347	968,075	1,244,420	1,445,267	1,329,514	1,346,964	1,608,581	1,603,501
May	551,338	773,607	961,482	990,852	1,271,226	1,452,265	1,319,549	1,376,740	1,610,182	1,604,117
June	553,940	792,953	870,789	1,011,611	1,132,120	1,427,276	1,350,166	1,380,861	1,611,201	1,601,343
July	554,563	814,968	853,517	1,040,397	1,181,503	1,436,246	1,308,380	1,373,812	1,611,515	1,602,534
August	555,691	829,576	865,679	1,054,721	1,209,942	1,423,220	1,328,548	1,392,970	1,615,820	1,603,846
September	555,105	844,984	871,567	1,070,178	1,234,504	1,390,581	1,339,599	1,395,267	1,612,472	1,600,003
October	561,363	862,429	863,525	1,099,190	1,358,891	1,382,429	1,356,053	1,387,259	1,607,194	1,603,238
November	559,878	879,336	886,356	1,119,379	1,374,175	1,367,723	1,361,372	1,380,600	1,612,304	1,604,229
December	565,886	892,420	908,567	1,142,324	1,389,420	1,361,270	1,351,417	1,389,196	1,612,219	1,602,354

- Note:
1. The increase in the caseload beginning March 1999 was a result of the Section 1931(b) Medi-Cal Program. It also established the automatic conversion of most terminated CalWORKs cases into regular Medi-Cal cases.
 2. The drop in June 2000 was a result of the termination of about 35,000 Section 1931(b) MAO family cases not responding to redetermination notices.
 3. Effective July 2000, the data includes actual counts from LEADER districts. Data from May 1999 to June 2000 includes estimated LEADER counts.
 4. Effective January 2006, the data includes MAO-eligible persons associated with CalWORKs cases.



Figure 8

PERSONS AIDED - FOOD STAMPS
January 1998 - December 2007



Month	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
January	789,311	769,511	703,778	681,715	694,947	640,239	632,052	668,997	661,664	631,850
February	777,831	763,230	698,505	676,542	694,210	639,800	638,116	663,088	653,479	625,321
March	777,828	765,154	700,194	669,461	701,512	641,417	656,154	667,068	657,003	629,729
April	773,173	762,544	691,058	679,643	697,071	639,816	654,400	665,689	645,412	622,860
May	765,220	756,139	680,875	674,655	693,056	641,206	654,425	665,018	644,941	624,750
June	761,220	752,897	680,184	676,184	663,140	639,950	651,213	663,654	642,842	624,827
July	753,633	751,832	699,125	681,200	678,885	636,053	662,139	664,358	638,219	627,626
August	744,266	748,143	692,766	673,463	675,000	642,295	671,442	667,652	637,972	631,525
September	779,386	738,767	690,494	676,885	658,674	637,365	670,871	669,642	636,555	630,752
October	787,472	735,529	676,173	681,588	647,434	634,616	667,536	667,981	635,344	638,796
November	782,681	726,838	673,829	690,221	647,617	634,291	666,183	667,264	633,506	639,412
December	777,464	716,673	678,281	697,889	645,854	629,613	671,176	661,703	634,763	641,215

Note: Effective July 2000, the data includes actual counts from LEADER districts. Data from May 1999 to June 2000 includes estimated LEADER counts.



GLOSSARY OF TERMS

DEPARTMENT OF PUBLIC SOCIAL SERVICES

(DPSS) – Administers programs that provide services to individuals and families in need. These programs are designed to both alleviate hardship and promote family health, personal responsibility, and economic independence. Most DPSS programs are mandated by Federal and State laws.

California Work Opportunity and Responsibility to Kids (CalWORKs)

– Provides temporary financial assistance and employment-focused services to families with minor children who may or may not have income, and their property limit is below State maximum limits for their family size. In addition, the family must meet one of the following deprivations:

- Either parent is deceased;
- Either parent is physically or mentally incapacitated;
- The principal wage earner is unemployed; and
- Either parent is absent from the home in which the child is living.

Cash Assistance Program to Immigrants

(CAPI) – Provides cash to certain aged, blind, and disabled legal non-citizens ineligible for Supplemental Security Income/State Supplemental Payment (SSI/SSP) due to their immigration status. CAPI participants may be eligible for Medi-Cal, In-Home Supportive Services (IHSS), and/or Food Stamp benefits. Individuals requesting such benefits must file the appropriate application for the other program.

Food Stamps – Help eligible low-income families and individuals meet their basic nutritional needs by increasing their food purchasing power. Individuals residing in room and board arrangements, homeless individuals in shelters, and temporary residents of a shelter for battered women and children, may also be eligible to receive Food Stamps.

General Relief (GR) – Is a County-funded program that provides cash aid to indigent adults who are ineligible for Federal or State programs.

In-Home Supportive Services (IHSS)

– Enables low-income, aged, blind and disabled individuals to remain safely at home by paying caregivers to provide personal care and domestic services.

LEADER – Is an acronym for Los Angeles Eligibility, Automated Determination, Evaluation and Reporting System.

Medical Assistance Only (MAO) – Provide essential and comprehensive healthcare coverage to low-income persons that are:

- Under the age of 21 (children),
- Pregnant women,
- Blind,
- Disabled,
- Age 65 or older and
- Parents or caretakers caring for child whose parents are:
 - Deceased;
 - Absent;
 - Incapacitated;
 - Under employed; or
 - Unemployed.



The eligibility criteria are dependent on the total family unit income and resource levels. Individuals and families eligible to Social Security SSI/SSP, CalWORKs, Refugee Assistance, Foster Care, Adoption Assistance Program, and In-Home Supportive Services can potentially receive no-cost or share-of-cost Medi-Cal.

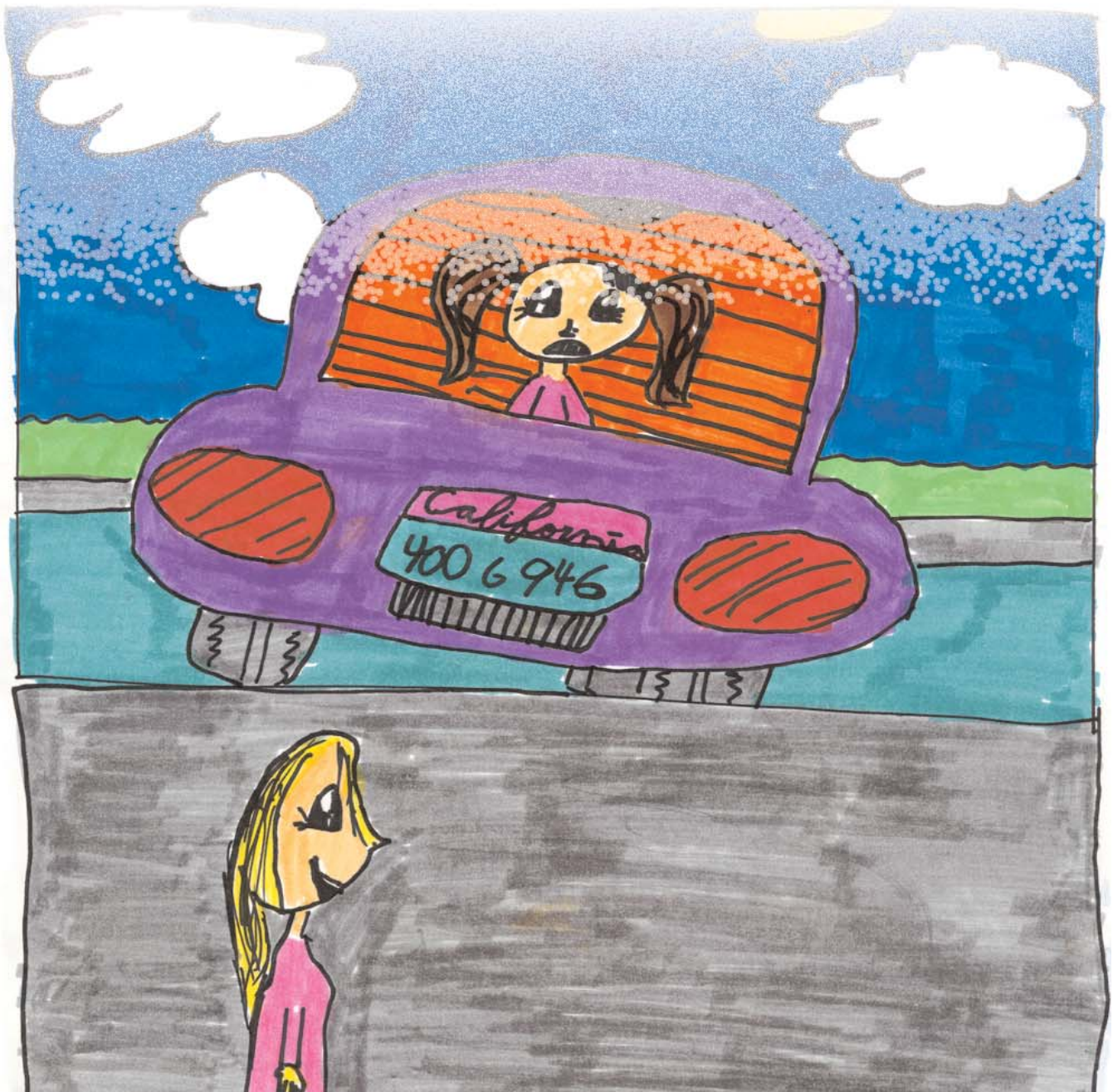
- \$100 bonuses up to four times a year for satisfactory school progress;
- \$500 one-time-only bonus for receiving a high school diploma or its equivalent.

Refugee Resettlement Program (RRP) – Is made up of many program partners at the federal, state, county, and community levels. Typically, refugees are eligible for the same assistance programs as citizens including CalWORKs, Food Stamps, Medi-Cal, SSI/SSP, and General Relief. In addition, single adults or couples without children who are not eligible for other welfare assistance may receive Refugee Cash Assistance (RCA). Vital to the success of the California Refugee Program are the contributions made by Mutual Assistance Associations, and Community Based Organizations (CBOs) that provide culturally and linguistically appropriate services.

Cal-Learn – Is a mandatory program for CalWORKs participants who are under 19 years of age, are pregnant or parenting, and have not yet completed their high school education. The Cal-Learn program is designed to address long-term welfare dependency by encouraging and assisting teen parents on the CalWORKs Program to remain in or return to school. Cal-Learn focuses on providing these youths with the following supportive services needed to complete their high school education or equivalent:

- Intensive case management services;
- Payments for child care, transportation, and school expenses;

**LOS ANGELES COUNTY
DEPARTMENT OF PUBLIC HEALTH
AGENCY REPORT**





DEPARTMENT OF PUBLIC HEALTH MATERNAL CHILD & ADOLESCENT HEALTH PROGRAMS

OVERVIEW

Child maltreatment, whether in the form of physical, sexual, or emotional abuse or neglect, adversely affects the developing child and increases the risks for emotional, behavioral, social, and physical problems throughout the child's life. Experiences of abuse or neglect occurring as early as the first year of life may lead to symptoms of poor psychological well-being, such as depression and anxiety, difficulties in forming and developing healthy relationships, and increases the likelihood of developing negative behavioral consequences such as future alcohol and substance abuse, eating disorders, and criminal and violent behaviors. These high-risk behaviors may lead to serious long-term health problems such as sexually transmitted diseases and obesity.

The Los Angeles County Department of Public Health (DPH) has as its mission disease prevention and protection of health of communities and Los Angeles County residents. DPH recognizes the significant physical, emotional, and psychosocial impacts of child abuse and neglect on child development and makes every effort to prevent these adverse outcomes through primary prevention efforts that focus on healthy child development, family resiliency and economic self-sufficiency. DPH seeks to achieve this by partnering with communities to tackle the risk factors for child abuse such as poverty, lack of social services or social support, and lack of access to healthcare. Many of our programs are committed to improving the social environment for communities, providing healthcare access to low-income households, providing education to improve

parenting skills, and to raise awareness and self-esteem for individuals.

Maternal, Child and Adolescent Health Programs (MCAH) is an important division of DPH that has as its mission to maximize the health and quality of life for all women, infants, children, adolescents, and their families in Los Angeles County. MCAH seeks to ensure optimal maternal health, birth outcomes, and healthy child and adolescent development by providing leadership in planning, implementing and evaluating priority needs and services for the targeted population via the following public health programs:

- Black Infant Health Program
- Child and Adolescent Health Program
- Children's Health Outreach Initiative
- Childhood Lead Poisoning Prevention Program
- Comprehensive Perinatal Services Program
- Fetal Infant Mortality Review Program
- Newborn Screening Program
- Nurse Family Partnership Program
- Prenatal Care Guidance Program
- Sudden Infant Death Syndrome Program
- Los Angeles County Preconception Health Collaborative

This report is divided into two sections. The first section provides background information on MCAH programs and their activities related to prevention of child abuse and neglect. The second section presents data on infant and child deaths in Los Angeles County. Trends in infant and child deaths are presented for the most recent 5



years of available data (2002-2006). Data stratifying deaths by race/ethnicity and Service Planning Area (SPA) are provided where available.

Section 1. Health Promotion and Child Abuse Prevention within Maternal, Child and Adolescent Health Programs (MCAH)

BLACK INFANT HEALTH PROGRAM (BIH)

BIH was established in 1989 in response to the alarming and disproportionate infant mortality rates in the African-American community. This community-based program identifies at-risk pregnant and parenting African-American women, 18 years and older, and assists them to access healthcare and other family support services to improve their health and the health of their infants and families.

BIH, in coordination with five subcontractors, implements two BIH perinatal intervention strategies: Prenatal Care Outreach (PCO) and Social Support Empowerment (SSE). PCO links African-American mothers to accessible healthcare services, primarily prenatal care and pediatric services. SSE is a facilitated series of eight classes that combine peer support, health education, personal skill-building and self-efficacy techniques for African-American women.

BIH ensures access for clients to a variety of medical and social services by maintaining working relationships with a cross-section of collaborators throughout the County. These collaborators include: March of Dimes; Healthy African American Families; First 5 LA; Women, Infants, and Children (WIC); various community, civic, and state leaders; the faith/religious community and obstetrical/gynecological providers.

Although BIH does not directly provide child abuse and domestic violence services, the program creates a culture that encourages client empowerment and awareness. By providing social support to women enrolled in the program, BIH begins to ameliorate some of the underlying risk factors that lead to child abuse. Appropriate referrals are given to clients for potential child abuse and domestic violence cases.

Preliminary data shows that BIH Program subcontractors served nearly 1,250 African-American mothers and their infants during the period from July 1, 2007 through June 30, 2008. During this same period, more than 200 BIH clients graduated from Social Support and Empowerment classes.

THE CHILD AND ADOLESCENT HEALTH PROGRAM (CAH)

CAH was established to promote the health and well-being of children, adolescents and young adults in Los Angeles County.

Moreover, CAH plays a major role in preventing the occurrence of child abuse in Los Angeles County. CAH serves Los Angeles County as the lead public health program in raising awareness of abuse and neglect, improving child abuse reporting and management among health care professionals through training and conferences, disseminating child abuse prevention and reporting protocols, and consulting on specific child abuse issues.

Through collaboration with other public health programs, private agencies and community-based organizations, CAH has developed the Los Angeles County Adolescent Health Collaborative (LAC-AHC) to bring together professionals interested in the health and well-being of children, adolescents and young adults for training, networking, and



advocacy to improve services, resources, and opportunities for youth throughout Los Angeles County.

During the Fiscal Year (FY) 2007-2008, CAH coordinated, conducted and participated in the following activities:

- Collaborated with the Family Children Community Advisory Council (FCCAC) in disseminating all legislation and funding resources related to family violence and child abuse; expanding the skills, professional growth, and development of service providers through an annual conference for child and adolescent professionals on “Trends in Adolescent Sexual Behaviors”
- Participated in the National Blue Ribbon Campaign designed to raise awareness of child abuse in the community by providing child abuse prevention services and distributing resources (800,000 child abuse prevention bookmarks, posters, pens and other educational materials) to community agencies, schools and families within Los Angeles County
- Supported the Family and Children's Index (FCI) users in the use of FCI by participating with other County departments in obtaining additional information and completing assessments of children and/or families in their care; and the generation of reports to identify high-risk cases
- With the LAC-AHC, conducted workshops on Gang Violence and Its Impact on Youth, Families & Communities; Adolescent Substance Use; Intimate Partner Abuse within Adolescent Relationships; and Epidemiology of Suicide Among Adolescents and Young Adults.
- Worked with the Los Angeles Child Abuse Council Chairs to: conduct educational outreach activities that provide current information and networking for families and professionals; published the Children’s Advocate Newsletter; coordinated the National Blue Ribbon Campaign/Child Abuse Prevention Campaign; implemented the Report Card Insert Project; coordinated the dissemination of suicide prevention resources; and provided training and technical assistance to the community relating to Child Abuse Councils
- Participated in the Inter-agency Council on Child Abuse and Neglect (ICAN) Policy Committee to provide support or opposition on pending State legislation for children and families of Los Angeles County; to develop a proposal to track and evaluate the short- and long-term outcomes for infants at risk who will come to the attention of the child protection system; and to collaborate with the Department of Children and Family Services (DCFS), the District Attorney’s Office, and the Los Angeles Sheriff’s Department to implement the Electronic Suspected Child Abuse Reporting System (E-SCARS)
- Assisted the Los Angeles County Child Abuse and Neglect Protocol Committee in updating the countywide protocol. The Protocol serves as a best practice guideline for professionals to maximize successful interventions for the prevention of child abuse and contains new laws affecting the reporting and follow-up of child abuse cases. CAH provided Child Abuse and Neglect Protocol Trainings to various organizations, including county school districts, the Dependency Court Judges, the District Attorney’s



Office, the Department of Health Services, County Counsel, the Sheriff's Department and community agencies.

CHILDREN'S HEALTH OUTREACH INITIATIVE PROGRAM (CHOI)

This program serves as a liaison between other DPH programs and outside offices working on children's health issues. CHOI staff represent DPH in the Children's Health Initiatives (CHI) of Greater Los Angeles in the mission of providing universal health coverage for children. CHI expanded the Healthy Kids Program to include all children in Los Angeles County. CHOI's Program Integration Workgroup aims to simplify enrollment and retention processes for the various health insurance programs and to pursue high-yield enrollment opportunities. The workgroup also focuses on barriers such as Deficit Reduction Act, which slows the growth in funding for Medi-Care; interfaces between Emergency Medi-Cal and Healthy Kids; and addresses waiting list issues.

CHOI was established in 1997 to provide coordinated outreach to low-income children in order to enroll them in health insurance programs. Through this activity, CHOI hopes to reduce the number of uninsured children in Los Angeles County. CHOI administers a multi-million dollar outreach and enrollment project, and receives funding primarily from First 5 LA. With this funding, CHOI contracts with 15 community-based organizations, schools, local governments, and health clinics to provide direct client services. Organizations are encouraged to be holistic in their approach in helping families access low or no cost health coverage programs. Once a family is enrolled, the organizations follow-up with them to ensure utilization and retention of health benefits. Additionally, contracted

organizations also refer families to other health and social services. CHOI also sponsors comprehensive training for agency staff and Certified Application Assistors (CAAs) in Los Angeles County on a full range of coverage programs and best practices.

CHOI activities during FY 2007-2008 included:

- Coordination of CAA conferences, which keep CAA's in the county updated on new program information
- Participation in the creation and maintenance of LACountyHelps.org, a web-based preliminary screening for social service programs, including health coverage.

During FY 2007-2008, over 30,000 applications were submitted by the contracted agencies and over 65% of CHOI's clients retained their coverage 14 months after enrollment.

CHILDHOOD LEAD POISONING PREVENTION PROGRAM (CLPPP)

Los Angeles County is mandated since 1991 to identify and provide appropriate case management services for children (birth to 21 years of age) with elevated blood lead levels and to ensure that children enrolled in publicly funded programs for low-income children are screened for lead poisoning. Appropriate case management includes health referrals, medical case management-coordination care, environmental assessment, and educational activities targeted at child health providers.

Specific program activities include surveillance, provider and public health education, nursing case management, environmental inspection, and remediation services.



CLPPP encourages all nurse case managers to participate in child abuse reporting training. This effort is to ensure that all case managers are aware of their roles and responsibility in reporting any suspected or potential instance of child abuse as they conduct home assessments.

During FY 2007-2008, CLPPP served over 450 children under the age of six years with a staff of six Public Health Nurses (PHNs). By January 2009, CLPPP will begin entering into its surveillance system patient information documented on the case management reporting (CMR) form that tracks the number of cases assigned to Foster Care due to child abuse and neglect.

CLPPP continues to strengthen linkages with the following programs and organizations:

- Nurse Family Partnership (NFP)
- Department of Children and Family Services (DCFS)
- Juvenile Court Health Services (JCHS)
- Child Health & Disability Prevention (CHDP) Program
- California Children's Services (CCS) and
- Women, Infant and Children (WIC)

COMPREHENSIVE PERINATAL SERVICES PROGRAM (CPSP)

CPSP was initiated in 1987 to reduce morbidity and mortality among low-income, Medi-Cal eligible pregnant women and their infants in California. CPSP is built on the premise that pregnancy and birth outcomes improve when routine obstetric care is enhanced with specific nutrition, health education, and psychosocial services. Based on this foundation, CPSP provides enhanced client-centered, culturally competent obstetric services for eligible low-income, pregnant and postpartum women.

By improving pregnancy outcomes and providing intrapartum and postpartum support, CPSP can impact and mitigate some of the risk factors that contribute to child abuse.

During FY 2007-2008:

There were 475 certified CPSP providers. CPSP staff conducted 60 training sessions on various topics including Breastfeeding, Nutrition, Basic CPSP, CPSP Assessment & Care Plan, and Intimate Partner Violence.

CPSP staff collaborated with the Los Angeles Best Babies Network (LABBN) Care Quality Collaborative to help ten CPSP-approved community clinics and private providers implement a national model for best practices for prenatal care.

CPSP staff also cooperated with March of Dimes in the Comenzando Bien program, a culturally sensitive curriculum that addresses the needs of Latino women and their families to reduce the incidence of premature births in the Latino community.

FETAL INFANT MORTALITY REVIEW PROGRAM (FIMR)

FIMR was implemented in 12 California counties beginning in 1994 to address the problem of fetal and infant death in areas with high rates of prenatal mortality. The goal of the program is to enhance the health of infants and their mothers by examining factors that contribute to fetal, neonatal, and post-neonatal deaths and developing and implementing intervention strategies in response to identified needs.

Traditionally, the County conducted FIMR reviews on specifically selected cases of fetal and infant death. These reviews involved interviews of mothers by PHNs and the completion of case reviews of the medical and autopsy records.



Following the review, a Technical Review Panel comprised of doctors, coroners, and public health professionals made recommendations for change to prevent similar fetal and infant deaths from occurring.

In 2003, the Los Angeles County DPH FIMR program began incorporating the Perinatal Periods of Risk (PPOR) framework into its scope of work. PPOR is a tool to prioritize and mobilize prevention efforts in the community. The revised FIMR project involves analyzing fetal and infant death cases countywide and recommending appropriate policies and interventions for reducing the mortality rate.

During FY 2007-2008, the FIMR Program:

- Maintained the Fetal-Infant Mortality Expanded Surveillance System (FIMESS) database and designed utilities for increased functionality.
- In collaboration with Research, Evaluation & Planning unit within MCAH Programs, implemented the countywide Los Angeles Health Overview of a Pregnancy Event (L.A. HOPE) Project – data collection on women who have recently suffered a fetal or infant loss. This data is used to develop policy interventions and maximize resource allocation for perinatal health and social services in Los Angeles County.

NEWBORN SCREENING PROGRAM

The goal of the Newborn Screening Program is to prevent catastrophic health consequences and the emotional and financial burden for families caused by genetic and congenital disorders. In August 2007, the program expanded to include screening for Cystic Fibrosis and Biotinidase Deficiency.

This expansion means that over one-half million babies born in California will be screened for these two disorders in addition to the current panel of metabolic, hemoglobin, and endocrine diseases. L.A. County partners with two Area Service Centers at Harbor-UCLA and UCLA Medical Center to monitor births that occur outside of hospitals and result in missed screenings, to provide follow-up referrals for these missed screenings and to ensure that infants with positive screens are located and referred for appropriate services. In addition, the program provides outreach and education to the community on genetic disorders and resources to families affected by these conditions.

During FY 2007-2008 the Los Angeles County Newborn Screening Program:

- Conducted 3 trainings to increase awareness of the Newborn Screening Program and the recent expansion of diseases in its panel to district and Program Public Health Nurses.
- Received 413 notices on outside of hospital deliveries.
- Received 10 referrals for missed or positive genetic screens. These babies have been located and referred for follow-up.

NURSE FAMILY PARTNERSHIP (NFP)

NFP is an intensive home visitation program that employs Dr. David Olds' "Prenatal and Early Childhood Nurse Home Visitation" model. The model has been empirically studied for over 30 years; it targets low income, socially disadvantaged, first-time mothers and their children to help improve pregnancy outcomes, the quality of parenting, and the associated child health and maternal life-course development.



NFP replicates the Olds model to improve these outcomes among program participants:

- Increase the number of normal weight infants delivered;
- Decrease the number of mothers who smoke;
- Decrease the number of substantiated reports of child abuse or neglect;
- Decrease the number of emergency room and urgent care encounters for injuries or ingestion of poisons among infants and toddlers;
- Increase the number of mothers in the labor force;
- Increase the number of mothers enrolled in educational programs;
- Reduce the number of mothers who use alcohol or drugs during pregnancy; and
- Delay subsequent pregnancies.

PHNs conduct home visits that begin before the mother's 28th week of pregnancy and continue until the child reaches his/her second birthday. Home visits focus on personal health, child discipline, childcare, maternal role development, maternal life-course development, and social support.

PHNs assess the needs of mothers and newborns and provide them with intervention services such as referrals, education, or counseling for any identified problems. When the infant is approximately 10 weeks old, PHNs and parents discuss the importance of nurturing children through physical and emotional security, trust, and respect. When the baby is approximately five months old, PHNs address topics on violence such as sexual abuse, emotional abuse, and physical abuse with parents. PHNs refer families for additional social and support services if risk factors for child abuse and neglect are observed.

During FY 2006-2007, NFP served 219 first-time pregnant women with 19 public health nurses. NFP also partnered with Dr. Olds and New York City's Nurse Family Partnership Program to establish and field test a mental health screening tool to more fully evaluate maternal depression and other complicating mental health disorders. In addition, NFP, along with the Prenatal Care Guidance program, collaborated with the City of Los Angeles' Gang Reduction Program on the development of their screening form and to revise the NFP model to better support the highest risk juveniles in our county. Fiscal year data shows that NFP program outcomes have matched or exceeded the standards set by Dr. David Olds and his colleagues as well as those set within the Healthy People 2010 document.

PRENATAL CARE GUIDANCE PROGRAM (PCG)

Los Angeles County implemented the PCG Program in 1985 to provide home visitation, individualized case management, health education, coordination of referrals, and community outreach services to Medi-Cal eligible pregnant women. The program emphasizes access to appropriate prenatal care, parenting skills, and overall quality of family life as a means to achieve improved maternal and fetal outcomes. Public and private agencies/organizations, schools, juvenile health facilities, County public health clinics, and other community-based organizations refer women to the program.

Eligible women must be of childbearing age; pregnant or possibly pregnant; and fall into high-risk medical, educational, and psychosocial categories that increase the likelihood of poor maternal and fetal outcomes. Some of these categories include poverty,



maternal age less than 16 or over 35 years, substance abuse (tobacco, drug, and alcohol), high-risk behaviors (gang involvement and multiple sexual partners), homelessness, lack of a social support system, and having previously delivered a low birth weight infant. These are also some of the same risk factors for child abuse.

The Probation-Prenatal Outreach Project (P-POP) within the PCG Program has established an outreach program within the juvenile detention facilities and has established a Memorandum of Understanding (MOU) with the Department of Probation in order to enhance outreach to the highest risk pregnant girls and women in Los Angeles. The "Probation Liaison PHN" (LPHN) works to identify high-risk pregnant minors who are detained in local juvenile detention facilities to refer them to an appropriate provider and care system upon their release.

Between July 2005 and December 2006, there were 365 pregnant minors identified in the Juvenile Detention facilities. The LPHN assessed 250 (68%) minors and referred 126 (50%) to the Nurse Family Partnership (NFP) and PCG case management programs for continuous prenatal care follow up upon release.

In addition, the P-POP PCG program will be linked to a new MCAH grant involving the City of Los Angeles, Office of the Mayor, Homeland Security to prevent gang involvement and violence in the area of Boyle Heights. In this capacity, the NFP/PCG public health nurse will case manage pregnant minors being released from detention facilities and if needed refer qualified minors other health and support programs within their Boyle Heights home community. These clients will be pregnant minors who are involved with gangs and who need to identify and access an appropriate health care provider

network for continuing prenatal care after their release. Due to the increased demand for PCG assistance with outreach and case management, the program is no longer accepting postpartum clients into their case-loads.

Activities & accomplishments for this reporting year include the following:

- P-POP selected as a "Promising Practice" by the National Association of county & city Health Officials; and
- P-POP selected to do oral presentation at the American Public Health Association (APHA) in November 2007.

NFP and PCG programs continue to collaborate with other Department of Public Health (DPH) programs, Los Angeles County Probation Department, Los Angeles County Department of Children and Family Services, and Los Angeles County Department of Mental Health to provide outreach and intervention for pregnant and parenting teens who are in juvenile detention facilities. Both programs are committed to working with other departments, mothers, and babies to ameliorate the risk factors that lead to child abuse.

SUDDEN INFANT DEATH SYNDROME PROGRAM (SIDS)

In compliance with state mandates, the coroner reports all presumptive Sudden Infant Death Syndrome (SIDS) cases to the California Department of Health Services and the Los Angeles County SIDS Program. Subsequently, the assigned PHN provides grief and bereavement case management services to parents and family members, foster parents, and other child care



providers. Program staff focus their outreach and training efforts on the importance of placing healthy infants to sleep on their backs; of providing a smoke-free, safe-sleep environment; and disseminating information about other identified risk factors and promoting American Academy of Pediatrics Guidelines.

During FY 2007-2008, SIDS Program coordinated the following activities:

- Conducted Annual SIDS training for district public health nurses who provide grief and bereavement support
- Placed SIDS training, education, and grief support materials on the Los Angeles County MCAH website
- Developed low literacy bed sharing (co-sleeping) brochure “Safe Sleep Tips for Your Baby” to distribute in communities with highest infant mortality rates
- Developed curriculum, protocol, and procedures, utilizing “1st Candle Behavior Model” for educating staff in Mother Baby Units (MBU) and Neonatal Intensive Care Units (NICU) in Los Angeles County birthing hospitals
- Developed questionnaire to assess and evaluate infant sleep positioning practices and breastfeeding recommendations used by hospital staff
- Conducted (27) Newborn Nursery survey assessments with trainings for hospital staff; and
- In collaboration with the Research, Evaluation & Planning Unit and the LA County Coroner’s office, developed a three-page Sudden and Unexpected Infant Death (SUID) Investigative Form to be completed by coroners on all presumptive SIDS cases.

LOS ANGELES COUNTY PRECONCEPTION HEALTH COLLABORATIVE

The Los Angeles County Preconception Health Collaborative is one of three teams in the nation selected by the Centers for Disease Control and Prevention (CDC) and CityMatCH to serve as demonstration projects for the integration of preconception health into public health practice. The Los Angeles County travel team includes the Los Angeles County Public Health Department, California Family Health Councils (CFHC), the March of Dimes, and the Public Health Foundation Enterprises – Women, Infants, and Children (PHFE-WIC) Program. The collaborative plans to:

The collaborative plans to:

- Develop briefs on preconception care
- Develop a Speakers’ Bureau presentation on preconception health
- Develop a curriculum for integration of pre- and interconception health promotion into family planning clinic curriculums (CHFC)
- Develop a model high-risk case management program for WIC clients
- Establish an early identification system of high-risk pregnant women to improve birth outcomes and maternal health

Section 2. Overview of LAC Child Death Data

A. DEATH RELATED TO CHILD ABUSE AND NEGLECT

a. Death Rates and Causes of Death among Infants

Infant mortality rate is defined as the number of infant deaths occurring at less than 365 days of age per 1,000 live births. Since the beginning of the 20th century,



infant mortality rates have been declining steadily. This progress can be attributed to better living conditions, increased access to care, and advances in medicine and public health. Factors associated with infant mortality include, but are not limited to, race/ethnicity, prematurity, low birth weight, maternal substance use or abuse (e.g. alcohol, tobacco and illicit drug), inadequate prenatal care, maternal medical complications during pregnancy, short inter-pregnancy intervals, injury and infection.

Infant mortality rates for Los Angeles County have fallen from 5.5 to 4.9 infant deaths per 1,000 live births between 2002 and 2006 (Figure 1).

Figure 2 shows infant mortality rates by race/ethnicity in Los Angeles County in 2006. Although Hispanics comprised the highest number of infant deaths, which consisted of more than half of all infant deaths in Los Angeles County, African Americans continued to experience disproportionately higher rates of infant mortality compared to other race/ethnic groups. In 2006, African Americans experienced the highest infant mortality rate (11.6 per 1,000 live births). This was followed by Hispanics (4.5 per 1,000 live births), Whites (3.9 per 1,000 live births) and Asian/Pacific Islanders (3.7 per 1,000 live births). Figure 3 shows infant mortality rates by race/ethnicity in Los Angeles County from 2002 to 2006.

Los Angeles County is divided into eight Service Planning Areas (SPAs) for health planning purposes. Within the LACDPH organizational structure, each SPA has an Area Health Officer that is responsible for public health and clinical services planning according to the health needs of local communities.

Figure 4 presents infant mortality by Service Planning Area in 2006, while Figure

5 presents the same statistics between 2002 and 2006. Infant mortality rates have remained fairly stable for all SPAs with the exception of Antelope Valley (SPA 1). Between 1999 and 2002, SPA 1 experienced a two-fold increase in infant mortality rates (from 5.0 per 1,000 live births to 10.8 per 1,000 live births). Intense public health efforts have focused to reduce infant mortality rate in Antelope Valley. In 2005, SPA 1's infant mortality rate had decreased to 6.6 infant deaths per 1,000 live births. It must be noted though, for 2006, the rate in Antelope Valley has shown a rise to 7.5 infant deaths per 1,000 live births, a level still significantly lower than the 2002 high, but a trend that must be monitored closely.

b. Death Rates and Causes of Death among Children

The Child Death Rate used in this report measures the number of deaths among children ages 1-17, per 100,000 children, for all causes. This age range explicitly excludes all cases of infant mortality.

Throughout the twentieth century and continuing to the present, the child death rate continues to decline as medical science and public health improve.

In terms of leading causes of deaths among children ages 0 to 19 in Los Angeles County in 2006, homicides continued to be the number one cause of deaths among adolescents ages 13 to 19 years (Figure 7). Congenital malformations were the leading cause of death among infants (Figure 6) and for children ages 1 to 4 (Figure 7). Accidents (unintentional injuries) were the leading cause of death among children ages 5 to 12 (Figure 7).

Figure 8 shows child abuse related death rates among infants in Los Angeles County.



The absolute numbers of abuse related deaths among infants are small. Between 2002 and 2006, the number of child abuse related infant deaths ranged between 1 and 5 deaths per year, with a median and modal value of 4 deaths per year. In 2006, there were 4 child abuse related infant deaths.

Figure 8 also shows child-abuse related infant death rates by gender in Los Angeles County between 2002 and 2006. The highest child abuse related death rate for female infants was 4.0 per 100,000 live births in 2003 (n=3). The same statistic was highest in 2003 and 2006 for male infants with 3 infant deaths in each of those years.

From 2002 to 2006 the LAC child death rate decreased from 21.2 deaths per 100,000 children to 19.4, representing an 8.5 percent decrease (Figure 9).

Figure 10 shows child death rates by race/ethnicity in Los Angeles County for 2006. The child death rate was more than twice as high for African Americans (41.7 per 100,000 population) compared to Hispanics (18.8), followed by Asian/Pacific Islanders (17.3) and Whites (14.7).

Figure 11 presents child death rates by SPAs in Los Angeles County in 2005. The child death rate was highest in SPA 1 (Antelope Valley) at 37.4 per 100,000 followed by SPA 6 (South) at 32.1 per 100,000 children ages 1 to 17. SPA 5 (West) and SPA 2 (San Fernando) had the lowest child death rates at 13.1 and 13.2, respectively.

Figure 12 shows the child abuse related death rates among children ages 1 to 17 by gender in Los Angeles County. The child abuse related death rate for both genders combined has held steady at 0.1 per 100,000 population ages 1 to 17 for years 2004 through 2006.

LIMITATIONS OF DATA

Presenting information on child abuse outcomes is at times limited by both the small numbers of cases and agency specific age group reporting requirements.

Deaths related to child abuse and neglect may be underreported in death records. The true number of cases may not be reflected in death records when pending case investigations are not completed for death registration recording.

The small number of hospitalizations due to child abuse and neglect may be artificially low due to poor documentation or underreporting in hospital discharge records.

SUMMARY OF FINDINGS

- Infant mortality rates for Los Angeles County had decreased from 5.5 infant deaths per 1,000 live births in 2002 to 4.9 infant deaths per 1,000 live births in 2006 (Figure 1).
- African Americans still have the highest infant mortality rate among race/ethnic groups (Figure 2). Nevertheless, since 2002, it decreased from 13.0 infant deaths per 1,000 live births in 2002 to a low of 10.7 infant deaths per 1,000 live births in 2005 (Table 1). There was a rise in 2006 to a rate of 11.6 infant deaths per 1,000 live births, but this still reflects a 10.8% decrease in infant mortality rate over the four-year period.
- SPA 1 (Antelope Valley) and SPA 6 (South) have the two highest infant mortality rates. In 2006, the infant mortality rate for Antelope Valley was 7.5 deaths per 1,000 live births (down from 10.8 deaths per 1,000 live births in 2002). South had the second highest infant mortality rate in Los Angeles



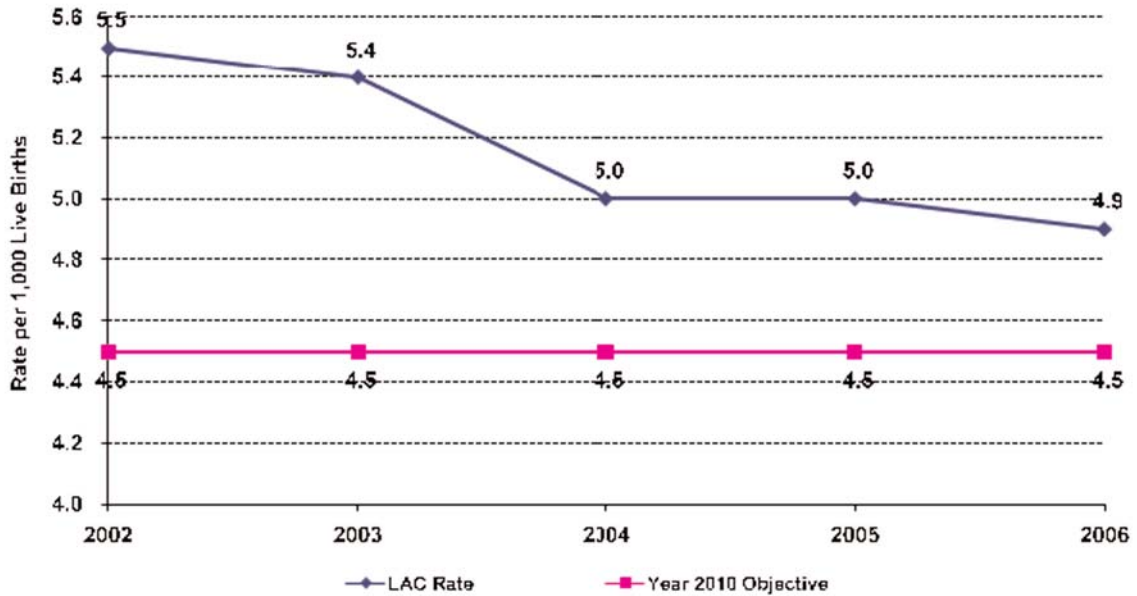
County at 5.4 deaths per 1,000 live births (down from 6.5 deaths per 1,000 live births in 2003) (Figure 3).

- Overall child abuse related infant death rates have remained relatively low between 2002 and 2006. There were four child abuse related infant death reported in 2006 (Figure 8). Child abuse related deaths among children ages 1 to 17 have also remained steady between 2002 and 2006. In 2006, child abuse related death rate for children ages 1 to 17 was 0.1 deaths per 100,000 children ages 1 to 17 (Figure 12).
- Between 2002 and 2006, child death rates among children ages 1 to 17 decreased from 21.2 per 100,000 to 19.4 deaths per 100,000 in 2005 (Figure 9). Among race/ethnic groups, African American children ages 1 to 17 had the highest death rate at 41.7 deaths per 100,000 in 2006 (Figure 10). Among SPAs, SPA 1 (Antelope Valley) had the highest rate at 37.4 deaths per 100,000 followed by SPA 6 (South) at 32.1 deaths per 100,000 (Figure 11).
- In 2006, the leading cause of death among infants and among children ages 1 to 4 was congenital malformations, deformations and chromosomal abnormalities (Figure 6).



Figure 1

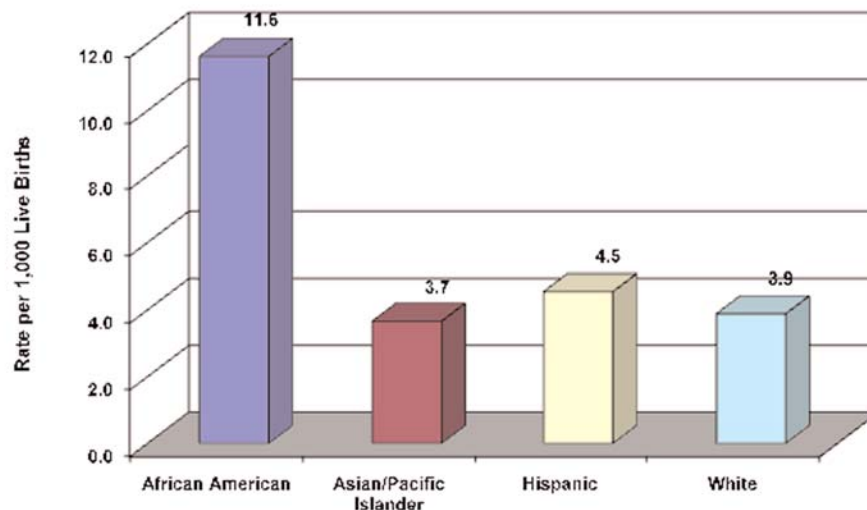
INFANT MORTALITY RATE LOS ANGELES COUNTY, 2002 -2006



Note: Infant mortality rate is defined as infant deaths occurring at less than 365 days of age per 1,000 live births
Source: California Department of Public Health, Center for Health Statistics, OHIR Vital Statistics Section, 2002-2006

Figure 2

INFANT MORTALITY RATE BY RACE/ETHNICITY LOS ANGELES COUNTY, 2006



Note: Infant mortality rate is defined as infant deaths occurring at less than 365 days of age per 1,000 live births
Source: California Department of Public Health, Center for Health Statistics, OHIR Vital Statistics Section, 2002-2006

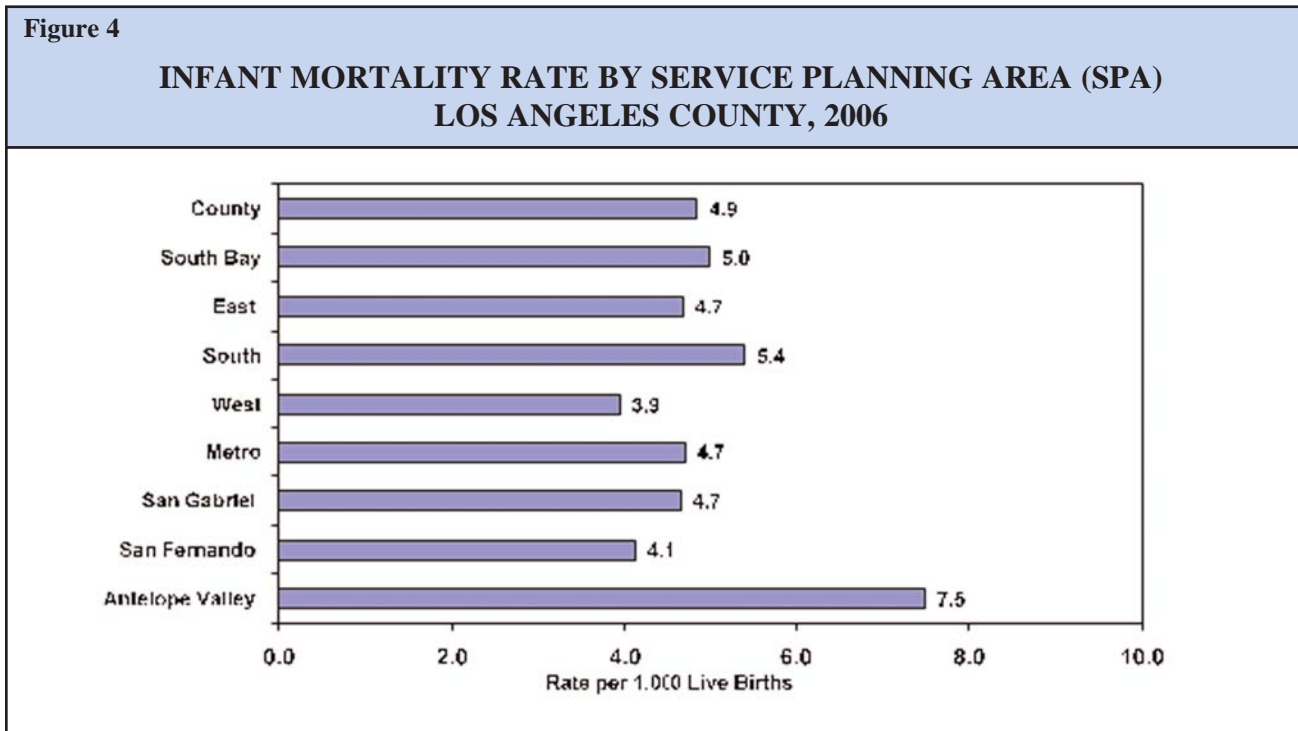


Figure 3

**INFANT MORTALITY RATE BY RACE/ETHNICITY
LOS ANGELES COUNTY, 2002 – 2006**

		2002	2003	2004	2005	2006
African American	Number of Deaths	156	145	136	123	134
	Number of Live Births	11,973	11,849	11,610	11,459	11,531
	Rate	13.0	12.2	11.7	10.7	11.6
Asian/Pacific Islander	Number of Deaths	63	57	53	41	61
	Number of Live Births	15,924	16,326	16,611	16,453	16,665
	Rate	4.0	3.5	3.2	2.5	3.7
Hispanic	Number of Deaths	458	490	428	455	438
	Number of Live Births	94,742	95,070	94,894	94,780	96,490
	Rate	4.8	5.2	4.5	4.8	4.5
White	Number of Deaths	144	126	137	122	102
	Number of Live Births	27,674	28,060	27,439	16,569	26,279
	Rate	5.2	4.5	5.0	4.6	3.9
County	Number of Deaths	826	822	757	745	738
	Number of Live Births	151,167	152,192	151,504	150,377	151,837
	Rate	5.5	5.4	5.0	5.0	4.9

Note: Infant mortality rate is defined as infant deaths occurring at less than 365 days of age per 1,000 live births
 Source: California Department of Public Health, Center for Health Statistics, OHIR Vital Statistics Section, 2002-2006



Note: Infant mortality rate is defined as infant deaths occurring at less than 365 days of age per 1,000 live births
 Note: Designation of SPA was based on zip codes (published in April 2003). Published SPA statistics based on other designation may differ
 Source: California Department of Public Health, Center for Health Statistics, OHIR Vital Statistics Section, 2002-2006



Figure 5

**INFANT MORTALITY RATE BY SERVICE PLANNING AREA (SPA)
LOS ANGELES COUNTY, 2002 – 2006**

	2002			2003			2004		
	Infant Deaths	Live Births	Rate/ 1,000	Infant Deaths	Live Births	Rate/ 1,000	Infant Deaths	Live Births	Rate/ 1,000
Antelope Valley	53	4,903	10.6	48	4,948	9.7	29	5,210	155.6
San Fernando	145	29,163	5.0	126	29,318	162	162	28,930	5.6
San Gabriel	134	15,690	5.2	127	25,841	111	111	25,786	4.3
Metro	92	17,155	5.4	87	17,153	76	76	17,173	4.4
West	24	6,655	3.6	31	6,889	29	29	6,894	4.2
South	136	21,981	6.2	145	22,231	135	135	22,418	6.0
East	105	22,243	4.7	107	22,162	92	92	22,038	4.2
South Bay	124	22,885	5.4	138	23,328	116	116	22,802	5.1
County Total	826	151,167	5.4	822	152,192	757	757	151,504	5.0

	2004			2005		
	Infant Deaths	Live Births	Rate/ 1,000	Infant Deaths	Live Births	Rate/ 1,000
Antelope Valley	37	5,575	6.6	46	6,140	7.5
San Fernando	149	28,878	5.2	121	29,369	4.1
San Gabriel	127	25,525	5.0	120	25,702	4.7
Metro	72	16,491	4.4	79	16,759	4.7
West	18	6,804	2.6	27	6,855	3.9
South	126	22,170	5.7	122	22,546	5.4
East	98	21,773	4.5	100	21,299	4.7
South Bay	115	22,649	5.1	114	22,791	5.0
County Total	745	150,377	5.0	738	151,837	4.9

Note 1: Infant mortality rate is defined as infant deaths occurring at less than 365 days of age per 1,000 live births

Note 2: Designation of SPA was based on zip codes (published in April 2003). Published SPA statistics based on other designation may differ

Note 3: Sum of SPA totals do not add up to County total due to records that are not assignable to any SPAs.

Source: California Department of Public Health, Center for Health Statistics, OHIR Vital Statistics Section, 2002-2006



Figure 6 LEADING CAUSES OF DEATH FOR INFANTS LOS ANGELES COUNTY, 2006
Childrend Less Than 1 Year Old
Congenital Malformations, Deformations & Chromosomal Abnormalities Disorders Related to Short Gestation & Low Birthweight, Not Elsewhere Classified Other Perinatal Conditions or Conditions Originating in the Perinatal Period Diseases of the Respiratory System Hemorrhagic and Hematological Disorder of Newborn Newborn Affected by Maternal Complication of Pregnancy

Source: California Department of Public Health, Center for Health Statistics, OHIR Vital Statistics Section, 2002-2006

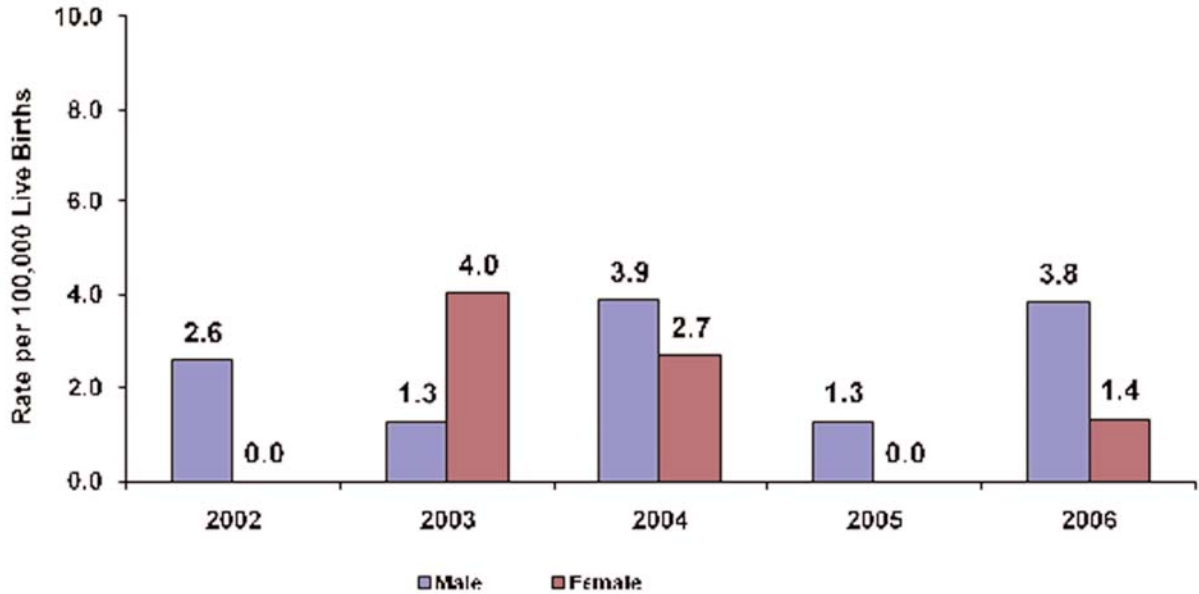
Figure 7 LEADING CAUSES OF DEATH FOR CHILDREN BY AGE CATEGORIES LOS ANGELES COUNTY, 2006
Children Ages 1 to 4
Congenital Malformations, Deformations & Chromosomal Abnormalities Accidents (Unintentional Injuries) Malignant Neoplasms Assault (Homicide) Diseases of the Respiratory System
Children Ages 5 to 12
Accidents (Unintentional Injuries) Malignant Neoplasms Congenital Malformations, Deformations & Chromosomal Abnormalities Diseases of the Nervous System Assault (Homicide)
Youth Ages 13 to 19
Assault (Homicide) Accidents (Unintentional Injuries) Malignant Neoplasms Diseases of the Nervous System Intentional Self-Harm (Suicide)

Source: California Department of Public Health, Center for Health Statistics, OHIR Vital Statistics Section, 2002-2006



Figure 8

**CHILD ABUSE RELATED INFANT DEATH RATE BY GENDER
LOS ANGELES COUNTY, 2002 – 2006**



	Male			Female			Total		
	Number of Deaths	Number of Live Births	Death Rate	Number of Deaths	Number of Live Births	Death Rate	Number of Deaths	Number of Live Births	Death Rate
2002	2	77,329	2.6	0	73,836	0.0	2	151,167	1.3
2003	1	77,947	1.3	3	74,241	4.0	4	152,192	2.6
2004	3	77,378	3.9	2	74,124	2.7	5	151,504	3.3
2005	1	76,959	1.3	0	73,416	0.0	1	150,377	0.7
2006	3	77,959	3.8	1	73,876	1.4	4	151,837	2.6

Note: Diagnoses for child abuse injury include International Classification of Diseases 10th Revision (ICD 10) codes Y06-Y07.

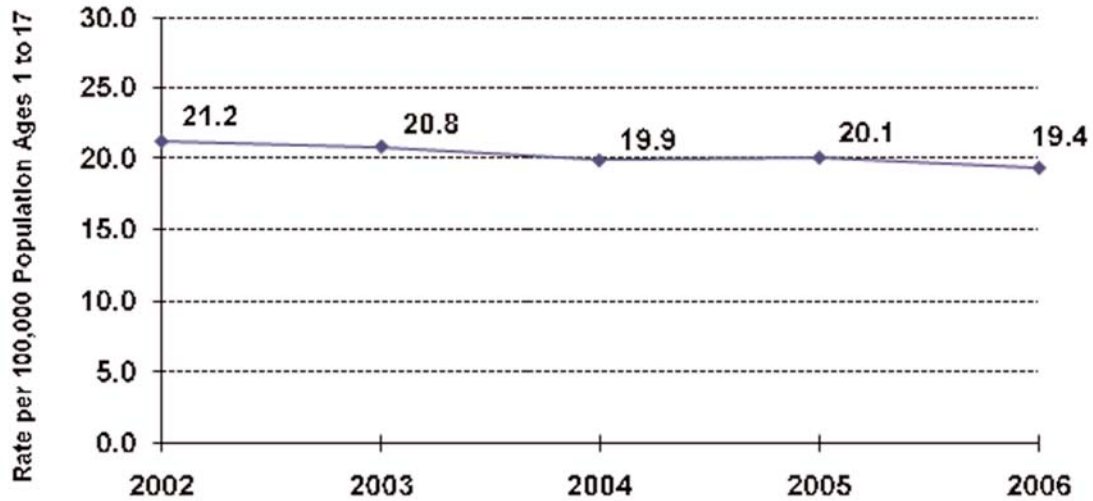
Sum of each gender total may not add up to both gender total due to records that are not specified to any gender

Source: California Department of Public Health, Center for Health Statistics, OHIR Vital Statistics Section, 2002-2006



Figure 9

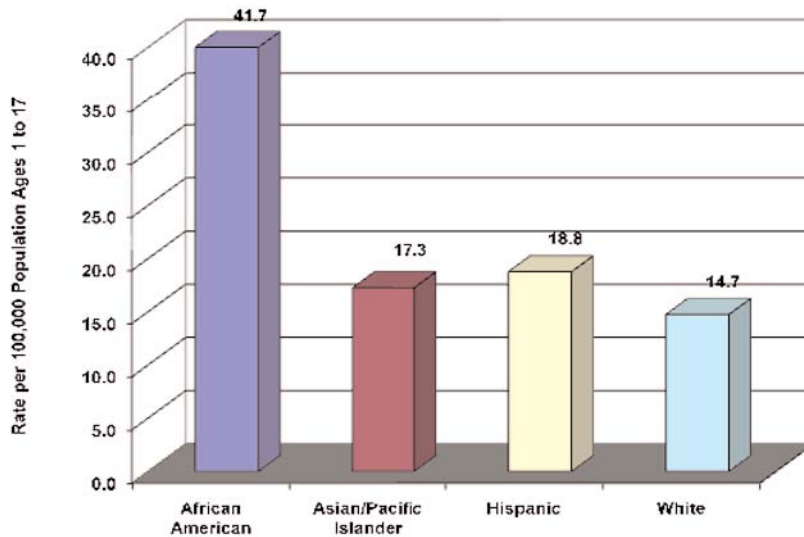
**CHILD DEATH RATE AMONG CHILDREN AGES 1 – 17
LOS ANGELES COUNTY, 2002 – 2006**



Note: Child death rate is defined as the number of deaths occurring in children ages 1 to 17 per 100,000 population ages 1 to 17
 Source: California Department of Public Health, Center for Health Statistics, OHIR Vital Statistics Section, 2002-2006 State of California, Department of Finance, Race/Ethnic Population Estimates with Age and Sex Details. 1970-2050, Sacramento, California, July, 2007
 Due to the updated population estimates, rates calculated in previous ICAN DHS reports may not be comparable

Figure 10

**CHILD DEATH RATE AMONG CHILDREN AGES 1 – 17 BY RACE/ETHNICITY
LOS ANGELES COUNTY, 2006**

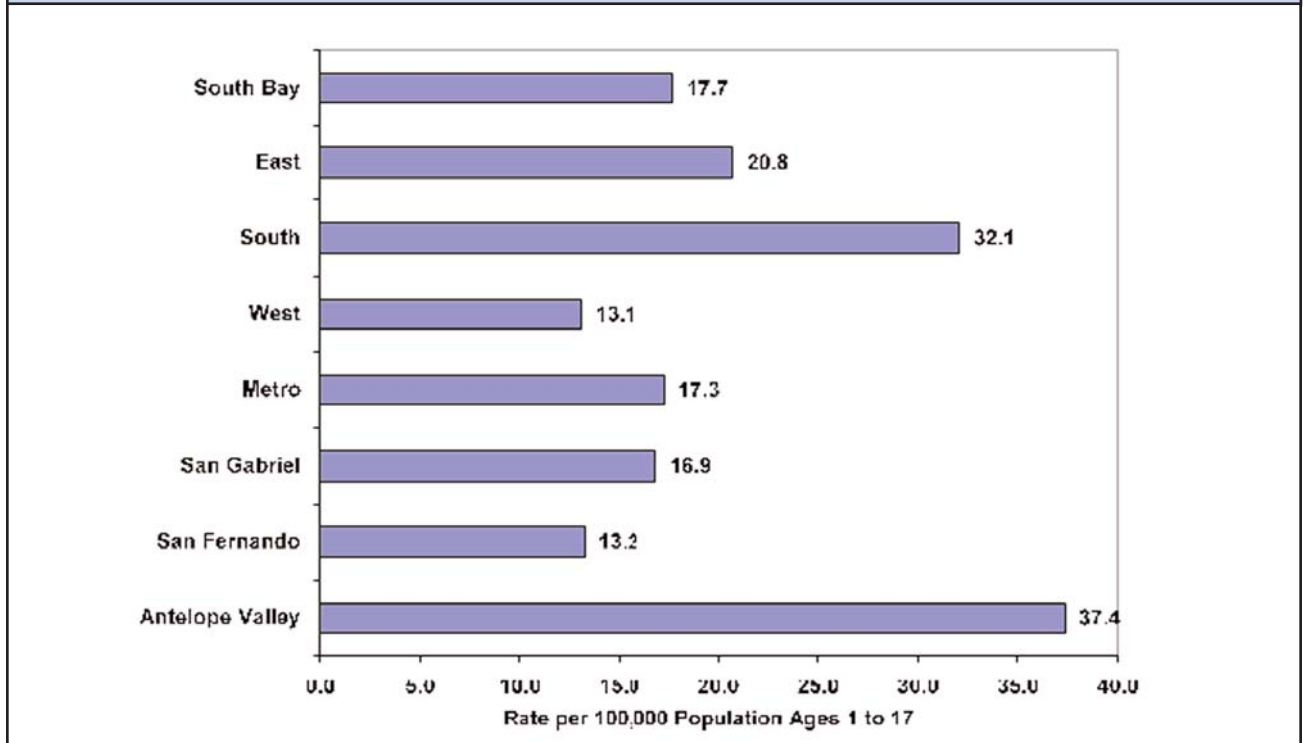


Note: Child death rate is defined as the number of deaths occurring in children ages 1 to 17 per 100,000 population ages 1 to 17
 Source: California Department of Public Health, Center for Health Statistics, OHIR Vital Statistics Section, 2002-2006 State of California, Department of Finance, Race/Ethnic Population Estimates with Age and Sex Details. 1970-2050, Sacramento, California, July, 2007



Figure 11

**CHILD DEATH RATE AMONG CHILDREN AGES 1 – 17 BY PLANNING AREA (SPA)
LOS ANGELES COUNTY, 2006**



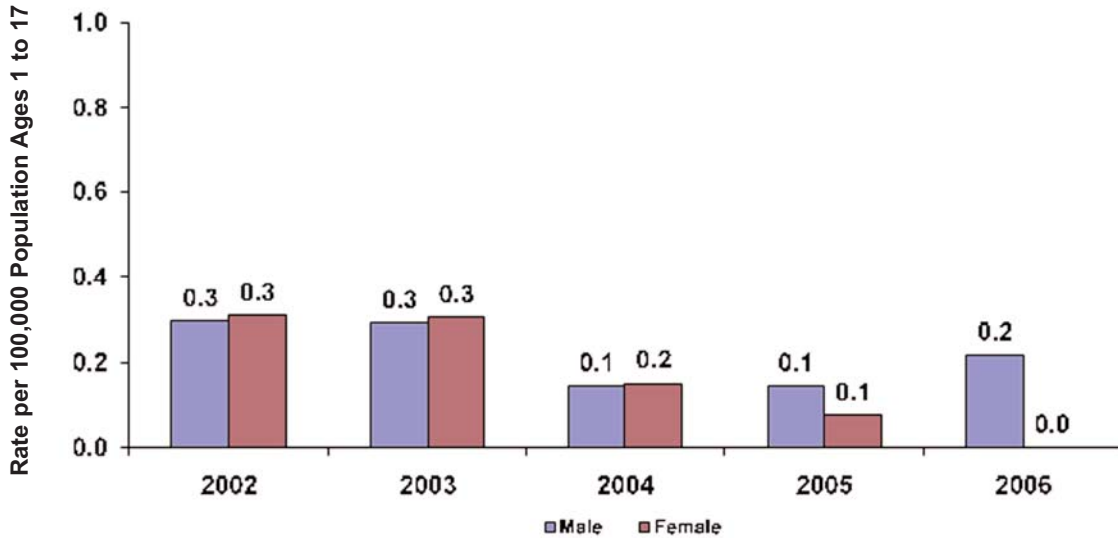
Note: Child death rate is defined as the number of deaths occurring in children ages 1 to 17 per 100,000 population ages 1 to 17

Source: California Department of Public Health, Center for Health Statistics, OHIR Vital Statistics Section, 2002-2006 July 1, 2005 Population Estimates prepared by Walter R. McDonald & Associates, Inc. (WRMA) for Urban Research, LA County CAO released June 15, 2006



Figure 12

**CHILD ABUSE RELATED DEATH RATE AMONG CHILDREN AGES 1 – 17 BY GENDER
LOS ANGELES COUNTY, 2002 – 2006**



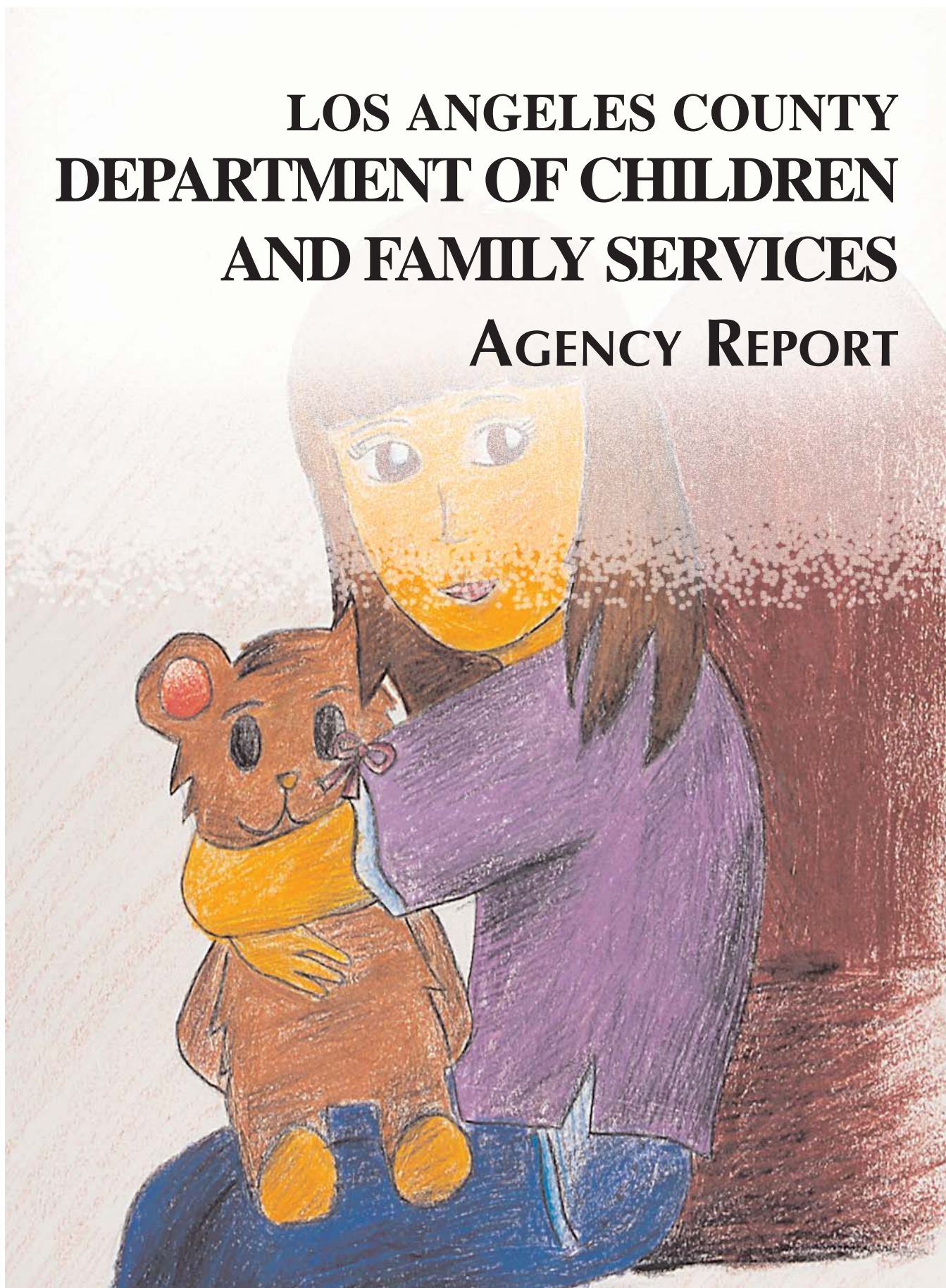
	Male			Female			Total		
	Number of Deaths	Population	Death Rate	Number of Deaths	Population	Death Rate	Number of Deaths	Population	Death Rate
2002	4	1,320,940	0.3	4	1,262,549	0.3	8	2,583,489	0.3
2003	4	1,335,688	0.3	4	1,277,389	0.3	8	2,613,077	0.3
2004	2	1,338,724	0.1	2	1,281,104	0.2	4	2,619,828	0.2
2005	2	1,389,476	0.1	1	1,330,315	0.1	3	2,719,791	0.1
2006	3	1,384,085	0.2	0	1,325,076	0.0	3	2,709,161	0.1

Note: Diagnoses for child abuse injury include International Classification of Diseases 10th Revision (ICD 10) codes Y06-Y07

Source: California Department of Public Health, Center for Health Statistics, OHIR Vital Statistics Section, 2002-2006 State of California, Department of Finance, Race/Ethnic Population Estimates with Age and Sex Details. 1970-2050, Sacramento, California, July, 2007

Due to the updated population estimates, rates calculated in previous ICAN DHS reports may not be comparable

**LOS ANGELES COUNTY
DEPARTMENT OF CHILDREN
AND FAMILY SERVICES
AGENCY REPORT**





DEPARTMENT OF CHILDREN AND FAMILY SERVICES

The Los Angeles County Department of Children and Family Services (DCFS) began operations on December 1, 1984. The formation of the Department consolidated the Department of Adoptions and the Children's Services functions of the Department of Public Social Services into one County department devoted exclusively to serving children and their families.

OUR VISION

Children grow up safe, physically and emotionally healthy, educated, and in permanent homes.

OUR MISSION

The Department of Children and Family Services, with public, private and community partners, provides quality child welfare services and supports so children grow up safe, healthy, educated and with permanent families.

CURRENT GOALS

The Department of Children and Family Services is led by Patricia S. Ploehn, LCSW, who became the Department's Director in September of 2006. Ms. Ploehn is a long time DCFS employee who held numerous line and management positions within the Department until her appointment as Director by the Board of Supervisors. Ms. Ploehn has maintained focus on three primary outcome goals for the Department that mirror the Program Improvement Goals mandated by Assembly Bill (AB) 636:

- **INCREASED SAFETY** – Significantly reduce the recurrence rate of abuse or neglect for children investigated and reduce the rate of abuse in foster care.
- **IMPROVED PERMANENCE** – Shorten the timelines for permanency for children

removed from their families with a particular emphasis on reunification, kinship and adoption. Reductions in the emancipation population will also be critical.

- **REDUCED RELIANCE ON DETENTION AND OUT-OF-HOME CARE** – Reduce reliance on detention through expansion of alternative community-based strategies.

AB 636

AB 636, The Child Welfare System Improvement and Accountability Act, which took effect on January 1, 2004, outlines how counties in California will be held accountable for ensuring the safety, permanence, and well-being of children served by child welfare agencies in the State of California. This statewide accountability system, known formally as the California Child and Family Review System, focuses on the reporting and measurement of results achieved for children. AB 636 will improve services for children through support of state and county partnerships; through requiring counties to publicly share their results for children and families and collaboration with community partners; through mandated county-specific system improvement plans; and through the encouragement of interagency coordination and shared responsibility for families.

AB 636 focuses on the following goals:

- Children are protected from abuse and neglect.
- Children are safely maintained in their own homes whenever possible and appropriate.
- Children have permanency and stability in their living situations.
- The continuity of family relationships and connections is preserved for children.
- Families have enhanced capability to provide for their children's needs.



- Children receive appropriate services to meet their educational needs.
- Children receive adequate services to meet their physical and mental health needs.
- Youth aging out from foster care are prepared for transition to adulthood.

Performance indicators measuring progress toward these goals include: the number of children in foster care; the rate of recurrence of maltreatment of children in foster care; the number of placements of a foster child; length of time to reunification with birth parents; and the rate of adoption. Outcome measure data that meet federal standards and other essential measures required by the California Department of Social Services (CDSS) have been developed by the University of California, Berkeley (UCB).

In addition to the primary broad outcome goals of improved permanence, improved child safety and reduced reliance on detention, all consistent with AB 636, Ms. Ploehn has emphasized increased effort to achieve permanence for older DCFS youth through the Permanency Partners Program (P3), and more home-like setting placement with relatives through more timely assessment, re-assessment, and approval of relative homes as required by the Adoptions and Safe Families Act (ASFA).

TITLE IV-E WAIVER

Implemented in July 2007, the Title IV-E Waiver allows DCFS to divert funds that were previously tied to children placed in foster care to activities aimed at furthering the goals of reduced reliance on out-of-home care, increased child safety, and improved permanence. Specifically, the Title IV-E Waiver will enhance the “key three” primary objectives by targeting the following outcomes:

Safety

- Reduce rate of abuse in foster care and relative care.
- Reduce substantiated maltreatment.

Permanency

- Decrease time lines to permanency: reunification, adoption, and legal guardianship.
- Decrease re-entry into placement.
- Decrease the number of children/youth in Long Term Foster Care
- Decrease the time children/youth are in Long Term Foster Care.

Reduce reliance on out-of-home care

- Reduce the number of children/youth in out-of-home care.
- Reduce the number of children/youth in group care.
- Increase the percentage of family maintenance cases relative to the total number of cases.

The Title IV-E Waiver will be implemented through eight priority initiatives in sequences:

First Sequence Priorities

- Expansion of Family Team Decision-Making (FTDM) Conferences to focus on permanency.
- Upfront assessment for mental health, substance abuse and domestic violence for high risk cases, with expanded family preservation slots.
- Expansion of Family Finding and Engagement through Specialized Permanency Units.
- Prevention Initiative focusing on locally based networks of prevention services and supports.



Next Sequence Priorities

- Expansion of Family Preservation Services.
- Recruitment, development and utilization of community-based placements.
- Enhancement of Parent-Child Visitation including plans to bring in more staff to serve as trained monitors to assist social workers with visits.
- Use of aftercare support services.

Title IV-E Waiver Outcomes

In order to achieve the primary goals outlined above, focusing on the priorities identified, DCFS relies on five core strategies: Point of Engagement (POE), Structured Decision Making (SDM), Team Decision Making (TDM), Concurrent Planning and the Permanency Partners Program (P3). The State of California released data comparing DCFS' progress between 2002 and 2007, which is the five year period before the Waiver began. Looking at trends since 2002, DCFS has seen marked improvement in the following indicators: no recurrence of maltreatment; reunification within 12 months; median time to reunification; adoption within 24 months; and median time to adoption.

Thus, even prior to the State and the Federal governments' acceptance of DCFS's application for the Title IV-E Waiver, the department had already been making substantial progress on most of the indicators. However, the Federal government has set national goals or standards for child welfare agencies to meet, and there remains room for improvement when comparing them to some of DCFS' 2007 baseline indicators.

CHILD WELFARE SERVICES

Emergency Response Services

The Emergency Response (ER) services system includes immediate, in-person response, 24 hours a day and seven days a week, to reports of abuse, neglect, or exploitation, for the purpose of providing initial intake services and crisis intervention to maintain the child safely in his or her home or to protect the safety of the child.

Family Maintenance Services

Family Maintenance (FM) involves time-limited, supportive services to prevent or remedy neglect, abuse, or exploitation, for the purpose of preventing separation of children from their families.

Performance Measure/Indicator	2002 Data	Baseline 2007	% Change	National Goal
No recurrence of maltreatment	90.8%	93.4%	2.9%	94.6%
No maltreatment in foster care	99.99%	99.82%	-0.17%	99.68%
Reunification within 12 months	44.6%	60.8%	36.3%	75.2%
Median time to reunification	13.5 months	8.2 months	-39.3%	5.2 months
Adoption within 24 months	9.5%	24.6%	158.9%	36.6%
Median time to adoption	50.2 months	33.6 months	-33.1%	27.3 months
Reentry following reunification	4.8%	10.2%	112.5%	9.9%



Family Reunification Services

Family Reunification (FR) provides time-limited foster care services to prevent or remedy neglect, abuse, or exploitation, when the child cannot safely remain at home and needs temporary foster care while services are provided to reunite the family.

Permanent Placement Services

Permanent Placement (PP) services provide an alternate, permanent family structure for children who, because of abuse, neglect, or exploitation, cannot safely remain at home, and who are unlikely to be reunified with their parent(s) or primary caretaker(s).

PROTECTIVE SERVICES – REFERRED CHILDREN RECEIVED

During Calendar Year (CY) 2007, an average of 13,944 children who were referred to DCFS per month. Of these, an average of 12,556 children (90%) required an in-person investigation. As shown in Figure 1, there were 167,325 children referred during CY 2007 compared to 162,711 in CY 2006, an increase by 2.8% in volume over CY 2006.

Figure 2 provides referral data by Service Planning Area (SPA). Please refer to the Los Angeles County SPA map and the ZIP Code list for identification of communities in each SPA.

Referrals Received by Allegation Type

Referrals of child abuse or neglect received by DCFS are categorized by seven reporting categories in Figure 3 and Figure 4 and are ranked by order of severity of abuse, as defined by CDSS. Please refer to the Glossary in this report or the Definitions of Abuse. Also included are categories “At Risk, Sibling Abuse” and “Substantial Risk,” which were added with the implementation of Child Welfare Services/Case Management

System (CWS/CMS) for siblings who may be at risk but were not identified as victims in the referral. Referral data in Figure 3 and Figure 4 represent children in referrals received by DCFS.

- Children referred due to Sexual Abuse allegations account for 6.5% of the total children referred to DCFS during CY 2007, down slightly from 6.9% in CY 2006. The number of referred children with this allegation in CY 2007 (10,957) reflects a 2.4% decrease from 11,232 referred children received in CY 2006.
- Children with allegations of Physical Abuse account for 18.6% of the total children referred. The number of referred children for this allegation shows a 1.1% increase, from 30,722 in CY 2006 to 31,046 in CY 2007.
- Children with allegation of Severe Neglect account for 1.1% of the total referred children received during CY 2007. The number of children received for this allegation shows no significant increase in volume, from 1,898 in CY 2006 to 1,899 in CY 2007.
- General Neglect continues to be the leading reported allegation in the emergency response referrals received. Children from referrals due to this allegation account for 26.9% of the total children referred during CY 2007. The number of children from referrals alleging general neglect in CY 2007 (45,064) reflects a 1.1% increase from 44,554 referred children received for the same allegation in CY 2006.
- Referred children from Emotional Abuse referrals remains at 7.7% of the total referred children. The number of children from these referrals reflects a 2.5% increase, from 12,549 in CY 2006 to 12,863 in CY 2007.



- Exploitation continues to be the least reported allegation. Children referred due to this allegation remains at 0.1% of total children referred during CY 2006 and CY 2007. The number of children in referrals for this allegation in CY 2007 (100) reflects a 26.5% decrease from 136 in CY 2006.
- Children with Caretaker Absence/Incapacity allegations account for 3.3% of the total children referred during CY 2007. The number of children from this referral category decreased 7.0% from 5,959 in CY 2006 to 5,543 in CY 2007.
- When children from referrals due to Severe Neglect, General Neglect and Caretaker Absence/Incapacity are combined into a single category of Neglect, they represent 31.4% of the total children referred during CY 2007, down slightly from 32.3%.
- Children listed in referral categories At Risk, Sibling Abuse and Substantial Risk account for 35.8% of the total children referred during CY 2007. An analysis of referrals, in which referred children were assessed as At Risk, Sibling Abuse, shows a slight decrease from CY 2006. The referred children from At Risk, Sibling Abuse referrals account for 18.5% of all referred children. Substantial Risk referred children, accounting for 17.3% of the total children referred during CY 2007, reflect a 17.0% increase, from 24,743 in CY 2006 to 28,955 in CY 2007.

IN-HOME AND OUT-OF-HOME SERVICES CASELOAD

Figure 5 and Figure 6 exhibit the total DCFS child caseload, In-Home and Out-of-Home Services Caseload, at the end of CY

2007 (i.e., as of December 31, 2007). These data represent a caseload breakdown by the four child welfare service components: Emergency Response, Family Maintenance, Family Reunification, and Permanent Placement. The Adoptions services caseload is shown separately. Between the end of CY 2006 and the end of CY 2007, the total child caseload shows a 4.6% decrease, from 38,383 to 36,632.

CHILD CHARACTERISTICS

Figure 7, Figure 8, Figure 9 and Figure 10 exhibit demographic data on children in the DCFS In-Home and Out-of-Home Services Caseload at the end of CY 2007 by age group, ethnicity and gender.

Age

- Most vulnerable are children in the age group Birth - 2 Years. This population account for 17.7% of the total DCFS child caseload at the end of CY 2007, which is slightly up from 16.8% at the end of CY 2006. Despite of the overall decrease of the total caseload between CY 2006 and CY 2007, the number of children in this age group category exhibits a 0.7% increase, from 6,443 to 6,487.
- Children in the age group 3 - 4 Years also exhibit an increase. The number of children in this age group reflects a 1.0% increase, from 3,718 at the end of CY 2006 to 3,757 at the end of CY 2007. This population accounts for 10.3% of the children in the total caseload, slightly up from 9.7% at the end of CY 2006.
- Children in the age group 5 - 9 Years continue to be the largest population among all age groups. This population accounts for 23.3% of the total caseload. The number of children in this population (8,547) at the end of



CY 2007 shows a 3.7% decrease from 8,877 at the end of CY 2006.

- Age group of 10 - 13 Years children account for 19.6% of the total caseload, down from 20.8% at the end of CY 2006. The number of children in this age group (7,170) at the end of CY 2007 reflects a 10.0% decrease from 7,966 at the end of CY 2006.
- Children in the age group 14 - 15 Years account for 11.7% of the total caseload at the end of CY 2007, slightly down from 12.4% at the end of CY 2006. The number of children in this age group category reflects a 10.5% decrease, from 4,778 at the end of CY 2006 to 4,278 at the end of CY 2007.
- Youth in the age group 16 - 17 Years account for 12.1% of the total caseload. The number of youth in this age group shows a 5.1% decrease, from 4,665 at the end of at the end of CY 2006 to 4,425 at the end of CY 2007.
- Youth in the age group 18 & Older account for 5.4% of the total DCFS children at the end of CY 2007, slightly up from 5.0% from the end of CY 2006. The number of these young adults (1,968) reflects a 1.7% decrease from 1,936 at the end of CY 2006.
- Overall, children 13 years and under account for 70.9%, and children 14 years and older account for 29.1% of the total caseload.

Ethnicity

- White children account for 12.9% of the total DCFS caseload at the end CY 2007, slightly down 13.4% at the end of CY 2006. The number of children in this ethnic population (4,719) at the end of CY 2007 reflects an 8.2% decrease from 5,139 at the end of CY 2006.

- Hispanic children continue to be the largest of all ethnic populations among DCFS children. This population accounts for 52.7% of the total caseload at the end of CY 2007, up from 40.8% at the end of CY 2006. The Hispanic child population shows a 0.9% decrease from 19,500 to 19,319.
- Following the Hispanic child population, African American children represent the next largest ethnic population among DCFS children. This population accounts for 30.6% of the total caseload at the end of CY 2007, down from 32.0% at the end of CY 2006. The number of African American children exhibits an 8.7% decrease, from 12,277 at the end of CY 2006 to 11,203 at the end of CY 2007.
- The Asian/Pacific Islander population accounts for 2.2% of the total DCFS children at the end of CY 2007, down slightly from 2.4% at the end of CY 2006. The population reflects an 11.8% decrease, from 912 at the end of CY 2006 to 804 at the end of CY 2007.
- American Indian/Alaskan Native, Filipino and Other ethnicity each accounts for 0.5%, 0.6% and 0.5% of the total DCFS child caseload, respectively.

Gender

Male and Female child populations have been nearly even. The total DCFS caseload at the end of CY 2007 shows 49.9% male and 50.1% female.

CHILDREN IN OUT-OF-HOME PLACEMENT

Figure 11, Figure 12, and Figure 13 identify DCFS children who are in out-of-home placements excluding children in Guardian Home, Adoptive Home, Non-Foster Care Placement Facility, as of December 31, 2007.



Between CY 2006 and CY 2007, the number of children in out-of-home placement shows a 6.2% decrease from 20,454 to 19,182 in CY 2007.

- Children in Relative/Non-Relative Extended Family Member (Relative/NREFM) Home continue to represent the largest child population in the out-of-home placement caseload. These children remain at 53.1% of the total children in out-of-home placements at the end of CY 2007. The number of children in this placement category shows a 6.3% decrease, from 10,868 at the end of CY 2006 to 10,184 at the end of CY 2007.
- Children in Foster Family Home account for 8.1% of the total out-of-home placements at the end of CY 2007, slightly down from 8.8% at the end of CY 2006. The number of children in this population reflects a 14.3% decrease, from 1,807 at the end of CY 2006 to 1,548 at the end of CY 2007.
- Children in Foster Family Agency Certified Home account for 31.0% of the total children in the out-of-home placement caseload at the end of CY 2007, up from 29.5% at the end of CY 2006. The number of children in this placement category (5,971) at the end of CY 2007 reflects a 1.3% decrease from 6,029 at the end of CY 2006.
- Children in Small Home account for 0.7% of the total children in out-of-home placement. The number of children in this placement type (126), at the end of CY 2007 reflects an 8.7% decrease from 138 at the end of CY 2006.
- Children in Group Home account for 6.9% of the total out-of-home placement caseload at the end of CY 2007, slightly down from 7.6% at the end of CY 2006. This child population reflects

a 14.4% decrease from 1,557 at the end of CY 2006 to 1,333 at the end of CY 2007.

- Placement type “Other” consists of Court Specified Home and Tribal Home. Children in this placement category account for 0.2% of the total children in out-of-home placement caseload.

PERMANENCY PARTNERS PROGRAM (P3)

All children in foster care deserve to be raised in a loving, legal and permanent family of their own. One of the primary goals of DCFS is to safely return children to their parents; however, if this is not possible then it is the Department’s obligation to identify families for these youth through adoption or legal guardianship. Yet, despite our efforts, children twelve (12) and older in the foster care system have difficulty finding families, often ending up having multiple moves and being raised in foster care. Once emancipated, these youth are at increased risk for homelessness, incarceration, unemployment, early pregnancy, and low educational achievement.

In October 2004, P3 was begun specifically to address the need for permanent families for older youth in long term foster care (AKA Planned Permanent Living Arrangement or PPLA) in Los Angeles County. The P3 program pairs the youth with one of the programs Permanency Partners, primarily retired social workers with extensive experience with foster youth, who know how to navigate our internal records and systems. The P3 workers are not the youth’s primary social worker but are instead an additional resource focused on finding family for these youth. The P3 worker focuses on the youth’s desires for permanence, working with them to overcome barriers, and actually doing the footwork involved in collaborating with them to locate a caring adult resource for the youth to connect with



or reintroduce into their lives and to possibly provide a permanent home.

The P3 worker has the time to create an intensive relationship with the child; to be able to focus on the child's permanency needs; to look at the case from a different point of view; and to utilize a variety of methods to locate resources. P3 workers follow leads given to them from the youth, from reading the entire case from cover to cover, or searching the internet for friends and relatives. They seek to engage or re-engage parents, relatives or others who care about this youth who might have been previously disillusioned by the child welfare system or previously had not been in a position to help the child, but whose situation has changed, and encourage their active participation on behalf of the youth. The P3 worker's objective is to locate meaningful connections from the youth's past/present, with the ultimate goal of achieving life long permanence, possibly through reunification with a parent, or through adoption or guardianship. P3 also seeks to identify and locate adult connections with which the youth can develop lasting relationships.

Results

As of December 2007, the Permanency Partners Program has provided P3 services to 2,311 youth. Approximately 32% (747) of the youth now have a legally permanent plan identified or established. Of the 747 children, a total of 76 youth have returned home to a parent and had their child welfare case closed, 23 youth have returned home and continue to have their case supervised by DCFS and 79 are moving towards reunification with a parent. In addition, 12 youth have been adopted, 9 youth are in adoptive placements, and 214 youth who were previously opposed to adoption are now involved in adoption planning. Finally, 30 youth have had a legal guardian appointed and their cases closed

through Kin-GAP, 90 youth are in legal guardianship and continue to have their case supervised by DCFS, and 214 youth have a plan of legal guardianship identified and are moving through the court process.

AWOL Youth Assignment

In January 2006 the P3 program began working on a temporary basis with all under 18 AWOL youth throughout the county. In addition to providing traditional P3 services to these youth, P3 CSWs assisted the case carrying CSWs in locating runaway youth and supported permanency planning. Once found, the P3 staff worked with the youth, the worker, and the family in an attempt to locate a placement resource that would not only safely bring the youth back off the street, but one that could offer the youth a true chance at permanence. During the two year span that P3 provided AWOL services, there was a reduction of 210 (42%) AWOL youth; from 505 AWOL youth in January 2006, to 295 in December 2007. Beginning in March 2008, after a several month transition period, the Runaway Outreach Unit (ROU) assumed full responsibility for servicing the runaway population.

ADOPTION PLANNING

Figure 14 and Figure 15 reflect comparative data on children placed in adoptive homes annually by the Adoptions Division. During CY 2006, there were 2,236 children placed in adoptive home compared to 2,281 placements made during CY 2005.

ICAN PUBLIC WEB SITE

The public may access the DCFS CY 2007 Data Statement as part of the ICAN State of Child Abuse in Los Angeles County Report for 2008 at the following Web Site address:

<http://ICAN.CO.LA.CA.US>



Questions regarding the DCFS CY 2007 Data Statement may be directed to Thomas Nguyen at (562) 345-6712.

SELECTED FINDINGS

Referral children received during CY 2007 reflect a 2.8% increase over CY 2006, from 162,711 to 167,325.

- Despite the overall decrease in the DCFS caseload, the numbers of children in the age groups Birth - 2 Years, 3 - 4 Years, and 18 & Over reflect increases.
- The most vulnerable are children in the age group Birth - 2 Years. This population accounts for 17.7% of the total DCFS child caseload at the end of CY 2007, which is slightly up from 16.8% at the end of CY 2006. While the overall decrease of the total caseload between CY 2006 and CY 2007, the number of children in this age group category exhibits a 0.7% increase, from 6,443 to 6,487.
- Children in the age group 3 - 4 Years also exhibit an increase. The number of children in this age group reflects a 1.0% increase, from 3,718 at the end of CY 2006 to 3,757 at the end of CY 2007. This population accounts for 10.3% of the children in the total caseload, slightly up from 9.7% at the end of CY 2006.
- Youth in the age group 18 & Older account for 5.4% of the total DCFS children at the end of CY 2007, slightly up from 5.0% from the end of CY 2006. The number of these young adults (1,968) reflects a 1.7% decrease from 1,936 at the end of CY 2006.

Hispanic children continue to be the largest of all ethnic populations among DCFS children. This population accounts for

52.7% of the total caseload at the end of CY 2007, up from 40.8% at the end of CY 2006. The Hispanic child population shows a 0.9% decrease from 19,500 to 19,319.

DCFS children in Out-of-Home Placement (19,182) at the end of CY 2007 reflect a 6.2% decrease from 20,454 at the end of CY 2006. This decrease is in line with a major DCFS goal in reducing the number of children/youth in out-of-home care. A related goal to reducing the total number of children in out-of-home care is reducing the number of children/youth in group care. Children/youth in Group Home decreased by 14.4%, from 1,557 at the end of CY 2006 to 1,333 at the end of CY 2007.

As of December 2007, the Permanency Partners Program has provided services to 2,311 youth. Approximately 32% (747) of these youth now have a legally permanent plan identified or established.

RESPONSE TO RECOMMENDATIONS FROM 2007 REPORT

RECOMMENDATION ONE:

Juvenile Offender Data Collection

The Department of Children and Family Services currently collects and tracks various data relating to WIC 241.1 child cases. The development of an automated tracking system is underway.

RECOMMENDATION TWO:

Permanency initiatives or mentoring programs that impact children and youth

The annual data statement submitted by the Department of Children and Family Services currently includes data and information on the Permanency Partners Program (P3), a promising initiative developed by the Department over the last three years.



SERVICE PLANNING AREA (SPA)	ZIP CODE	CITY/COMMUNITY
SPA 1	93243	Lebec
SPA 1	93510	Acton
SPA 1	93523	Edwards AFB
SPA 1	93532	Elizabeth Lake/Lake Hughes
SPA 1	93534	Lancaster
SPA 1	93535	Hi Vista
SPA 1	93536	Lancaster/Quartz Hill
SPA 1	93543	Littlerock/Juniper Hills
SPA 1	93544	Llano
SPA 1	93550	Palmdale/Lake Los Angeles
SPA 1	93551	Palmdale
SPA 1	93552	Palmdale
SPA 1	93553	Pearblossom
SPA 1	93560	Rosamond
SPA 1	93563	Valyermo
SPA 1	93591	Palmdale/Lake Los Angeles
SPA 2	90290	Topanga
SPA 2	91011	La Canada-Flintridge
SPA 2	91020	Montrose
SPA 2	91040	Sunland (City of LA)/Shadow Hills (City of LA)
SPA 2	91042	Tujunga (City of LA)
SPA 2	91046	Glendale (Verdugo City)
SPA 2	91201	Glendale
SPA 2	91202	Glendale
SPA 2	91203	Glendale
SPA 2	91204	Glendale (Tropico)
SPA 2	91205	Glendale (Tropico)
SPA 2	91206	Glendale
SPA 2	91207	Glendale
SPA 2	91208	Glendale
SPA 2	91210	Galleria (Glendale)
SPA 2	91214	La Crescenta
SPA 2	91301	Agoura/Oak Park
SPA 2	91302	Calabasas/Hidden Hills
SPA 2	91303	Canoga Park (City of LA)
SPA 2	91304	Canoga Park (City of LA)
SPA 2	91306	Winnetka (City of LA)
SPA 2	91307	West Hills (City of LA)
SPA 2	91311	Chatsworth (City of LA)

Source: Child Protection Hotline ZIP Code Report created on September 1, 2006 by DCFS ITS GIS Unit.



SERVICE PLANNING AREA (SPA)	ZIP CODE	CITY/COMMUNITY
SPA 2	91316	Encino (City of LA)
SPA 2	91321	Santa Clarita (Newhall)
SPA 2	91324	Northridge (City of LA)
SPA 2	91325	Northridge (City of LA)
SPA 2	91326	Porter Ranch (City of LA)
SPA 2	91330	Northridge (City of LA), California State University
SPA 2	91331	Arleta (City of LA)/Pacoima (City of LA)
SPA 2	91335	Reseda (City of LA)
SPA 2	91340	San Fernando
SPA 2	91342	Lake View Terrace (City of LA)/Sylmar (City of LA)
SPA 2	91343	North Hills (City of LA)
SPA 2	91344	Granada Hills (City of LA)
SPA 2	91345	Mission Hills (City of LA)
SPA 2	91350	Agua Dulce/Saugus
SPA 2	91351	Santa Clarita (Canyon Country)
SPA 2	91352	Sun Valley (City of LA)
SPA 2	91354	Santa Clarita (Valencia)
SPA 2	91355	Santa Clarita (Valencia)
SPA 2	91356	Tarzana (City of LA)
SPA 2	91361	Westlake Village
SPA 2	91362	Westlake Village
SPA 2	91364	Woodland Hills (City of LA)
SPA 2	91367	Woodland Hills (City of LA)
SPA 2	91381	Stevenson Ranch
SPA 2	91382	Santa Clarita
SPA 2	91384	Castaic
SPA 2	91387	Canyon Country
SPA 2	91390	Santa Clarita
SPA 2	91401	Van Nuys (City of LA)
SPA 2	91402	Panorama City (City of LA)
SPA 2	91403	Sherman Oaks (City of LA)/Van Nuys (City of LA)
SPA 2	91405	Van Nuys (City of LA)
SPA 2	91406	Van Nuys (City of LA)
SPA 2	91411	Van Nuys (City of LA)
SPA 2	91423	Sherman Oaks (City of LA)/Van Nuys (City of LA)
SPA 2	91436	Encino (City of LA)
SPA 2	91501	Burbank
SPA 2	91502	Burbank
SPA 2	91504	Burbank (Glenoaks)

Source: Child Protection Hotline ZIP Code Report created on September 1, 2006 by DCFS ITS GIS Unit.



SERVICE PLANNING AREA (SPA)	ZIP CODE	CITY/COMMUNITY
SPA 2	91505	Burbank
SPA 2	91506	Burbank
SPA 2	91521	Burbank
SPA 2	91522	Burbank
SPA 2	91523	Burbank
SPA 2	91601	North Hollywood (City of LA)
SPA 2	91602	North Hollywood (City of LA)/Toluca Lake (City of LA)
SPA 2	91604	North Hollywood (City of LA)/Studio City (City of LA)
SPA 2	91605	North Hollywood
SPA 2	91606	North Hollywood
SPA 2	91607	North Hollywood (City of LA)/Valley Village (City of LA)
SPA 2	91608	Universal City
SPA 3	91001	Altadena
SPA 3	91006	Arcadia
SPA 3	91007	Arcadia
SPA 3	91010	Bradbury
SPA 3	91016	Monrovia
SPA 3	91023	Mount Wilson
SPA 3	91024	Sierra Madre
SPA 3	91030	South Pasadena
SPA 3	91101	Pasadena
SPA 3	91103	Pasadena
SPA 3	91104	Pasadena
SPA 3	91105	Pasadena
SPA 3	91106	Pasadena
SPA 3	91107	Pasadena
SPA 3	91108	San Marino
SPA 3	91125	Pasadena (California Institute of Technology)
SPA 3	91126	Pasadena (California Institute of Technology)
SPA 3	91702	Azusa
SPA 3	91706	Baldwin Park/Irwindale
SPA 3	91711	Claremont
SPA 3	91722	Covina
SPA 3	91723	Covina
SPA 3	91724	Covina
SPA 3	91731	El Monte
SPA 3	91732	El Monte
SPA 3	91733	South El Monte

Source: Child Protection Hotline ZIP Code Report created on September 1, 2006 by DCFS ITS GIS Unit.



SERVICE PLANNING AREA (SPA)	ZIP CODE	CITY/COMMUNITY
SPA 3	91740	Glendora
SPA 3	91741	Glendora
SPA 3	91744	Cityof Industry/La Puente/Valinda
SPA 3	91745	La Puente (Hacienda Heights)
SPA 3	91746	Bassett/City of Industry/La Puente
SPA 3	91748	Rowland Heights
SPA 3	91750	La Verne
SPA 3	91754	Monterey Park
SPA 3	91755	Monterey Park
SPA 3	91759	Mt Baldy
SPA 3	91765	Diamond Bar
SPA 3	91766	Phillips Ranch/Pomona
SPA 3	91767	Pomona
SPA 3	91768	Pomona
SPA 3	91770	Rosemead
SPA 3	91773	San Dimas
SPA 3	91775	San Gabriel
SPA 3	91776	San Gabriel
SPA 3	91780	Temple City
SPA 3	91789	Diamond Bar/City of Industry/Walnut
SPA 3	91790	West Covina
SPA 3	91791	West Covina
SPA 3	91792	West Covina
SPA 3	91801	Alhambra
SPA 3	91803	Alhambra
SPA 3	92397	Wrightwood
SPA 4	90004	Hancock Park (City of LA)
SPA 4	90005	Koreatown (City of LA)
SPA 4	90006	Pico Heights (City of LA)
SPA 4	90010	Wilshire Blvd (City of LA)
SPA 4	90012	Civic Center (City of LA)/Chinatown (City of LA)
SPA 4	90013	Downtown Los Angeles (City of LA)
SPA 4	90014	Los Angeles
SPA 4	90015	Downtown Los Angeles (City of LA)
SPA 4	90017	Downtown Los Angeles (City of LA)
SPA 4	90019	Country Club Park (City of LA)/Mid City (City of LA)
SPA 4	90020	Hancock Park (City of LA)
SPA 4	90021	Downtown Los Angeles (City of LA)

Source: Child Protection Hotline ZIP Code Report created on September 1, 2006 by DCFS ITS GIS Unit.



SERVICE PLANNING AREA (SPA)	ZIP CODE	CITY/COMMUNITY
SPA 4	90026	Echo Park/Silverlake (City of LA)
SPA 4	90027	Griffith Park (City of LA)/Los Feliz (City of LA)
SPA 4	90028	Hollywood (City of LA)
SPA 4	90029	Downtown Los Angeles (City of LA)
SPA 4	90031	Montecito Heights (City of LA)
SPA 4	90032	El Sereno (City of LA)/Monterey Hills (City of LA)
SPA 4	90033	Boyle Heights (City of LA)
SPA 4	90036	Park La Brea (City of LA)
SPA 4	90038	Hollywood (City of LA)
SPA 4	90039	Atwater Village (City of LA)
SPA 4	90041	Eagle Rock (City of LA)
SPA 4	90042	Highland Park (City of LA)
SPA 4	90046	Mount Olympus (City of LA)
SPA 4	90048	West Beverly (City of LA)
SPA 4	90057	Westlake (City of LA)
SPA 4	90065	Cypress Park (City of LA)/Glassell Park (City of LA)
SPA 4	90068	Hollywood (City of LA)
SPA 4	90069	West Hollywood
SPA 4	90071	ARCO Towers (City of LA)
SPA 5	90024	Westwood (City of LA)
SPA 5	90025	Sawtelle (City of LA)/West Los Angeles (City of LA)
SPA 5	90034	Palms (City of LA)
SPA 5	90035	West Fairfax (City of LA)
SPA 5	90045	LAX Area (City of LA)/Westchester (City of LA)
SPA 5	90049	Bel Air Estates (City of LA)/Brentwood (City of LA)
SPA 5	90056	Ladera Heights (City of LA)
SPA 5	90064	Cheviot Hills (City of LA)/Rancho Park (City of LA)
SPA 5	90066	Mar Vista (City of LA)
SPA 5	90067	Century City (City of LA)
SPA 5	90073	VA Hospital (Sawtelle)
SPA 5	90077	Bel Air Estates & Beverly Glen (City of LA)
SPA 5	90094	Playa Vista
SPA 5	90095	Los Angeles (UCLA)
SPA 5	90210	Beverly Hills/Beverly Glen (City of LA)
SPA 5	90211	Beverly Hills
SPA 5	90212	Beverly Hills
SPA 5	90230	Culver City
SPA 5	90232	Culver City
SPA 5	90263	Pepperdine University (Malibu)
SPA 5	90265	Malibu

Source: Child Protection Hotline ZIP Code Report created on September 1, 2006 by DCFS ITS GIS Unit.



SERVICE PLANNING AREA (SPA)	ZIP CODE	CITY/COMMUNITY
SPA 5	90272	Castellemare (City of LA)/Pacific Highlands (City of LA)
SPA 5	90291	Venice (City of LA)
SPA 5	90292	Marina del Rey
SPA 5	90293	Playa del Rey (City of LA)
SPA 5	90401	Santa Monica
SPA 5	90402	Santa Monica
SPA 5	90403	Santa Monica
SPA 5	90404	Santa Monica
SPA 5	90405	Santa Monica
SPA 6	90001	Florence/South Central (City of LA)
SPA 6	90002	Watts (City of LA)
SPA 6	90003	South Central (City of LA)
SPA 6	90007	South Central (City of LA)
SPA 6	90008	Baldwin Hills/Crenshaw (City of LA)/Leimert Park (City of LA)
SPA 6	90011	South Central (City of LA)
SPA 6	90016	West Adams (City of LA)
SPA 6	90018	Jefferson Park (City of LA)
SPA 6	90037	South Central (City of LA)
SPA 6	90043	Hyde Park (City of LA)/View Park/Windsor Hills
SPA 6	90044	Athens
SPA 6	90047	South Central (City of LA)
SPA 6	90059	Watts (City of LA)/Willowbrook
SPA 6	90061	South Central (City of LA)
SPA 6	90062	South Central (City of LA)
SPA 6	90089	USC (City of LA)
SPA 6	90220	Compton/Rancho Dominguez
SPA 6	90221	East Rancho Dominguez
SPA 6	90222	Compton/Rosewood/Willowbrook
SPA 6	90262	Lynwood
SPA 6	90723	Paramount
SPA 7	90022	East Los Angeles
SPA 7	90023	East Los Angeles (City of LA)
SPA 7	90040	Commerce, City of
SPA 7	90058	Vernon
SPA 7	90063	City Terrace
SPA 7	90201	Bell/Bell Gardens/Cudahy
SPA 7	90240	Downey
SPA 7	90241	Downey
SPA 7	90242	Downey

Source: Child Protection Hotline ZIP Code Report created on September 1, 2006 by DCFS ITS GIS Unit.



SERVICE PLANNING AREA (SPA)	ZIP CODE	CITY/COMMUNITY
SPA 7	90255	Huntington Park/Walnut Park
SPA 7	90270	Maywood
SPA 7	90280	South Gate
SPA 7	90601	Whittier
SPA 7	90602	Whittier
SPA 7	90603	Whittier
SPA 7	90604	Whittier
SPA 7	90605	Whittier/South Whittier
SPA 7	90606	Los Nietos
SPA 7	90631	La Habra Heights
SPA 7	90638	La Mirada
SPA 7	90639	La Mirada (Biola Univ.)
SPA 7	90640	Montebello
SPA 7	90650	Norwalk
SPA 7	90660	Pico Rivera
SPA 7	90670	Santa Fe Springs
SPA 7	90701	Cerritos
SPA 7	90703	Cerritos
SPA 7	90706	Bellflower
SPA 7	90712	Lakewood
SPA 7	90713	Lakewood
SPA 7	90715	Lakewood
SPA 7	90716	Hawaiian Gardens
SPA 7	90755	Signal Hill
SPA 8	90245	El Segundo
SPA 8	90247	Gardena
SPA 8	90248	Gardena
SPA 8	90249	Gardena
SPA 8	90250	Hawthorne (Holly Park)
SPA 8	90254	Hermosa Beach
SPA 8	90260	Lawndale
SPA 8	90261	Lawndale (Federal Bldg)
SPA 8	90266	Manhattan Beach
SPA 8	90274	Palos Verdes Estates/Rolling Hills/Rolling Hills Estates
SPA 8	90275	Rancho Palos Verdes
SPA 8	90277	Redondo Beach/Torrance

Source: Child Protection Hotline ZIP Code Report created on September 1, 2006 by DCFS ITS GIS Unit.



SERVICE PLANNING AREA (SPA)	ZIP CODE	CITY/COMMUNITY
SPA 8	90278	Redondo Beach/Torrance
SPA 8	90301	Inglewood
SPA 8	90302	Inglewood
SPA 8	90303	Inglewood
SPA 8	90304	Lennox
SPA 8	90305	Inglewood
SPA 8	90501	Torrance
SPA 8	90502	Torrance
SPA 8	90503	Torrance
SPA 8	90504	Torrance
SPA 8	90505	Torrance
SPA 8	90506	Torrance (Camino College)
SPA 8	90704	Avalon
SPA 8	90710	Harbor City (City of LA)
SPA 8	90717	Lomita/Racho Palos Verdes
SPA 8	90731	San Pedro (City of LA)/Terminal Island (City of LA)
SPA 8	90732	Rancho Palos Verdes
SPA 8	90744	Wilmington (City of LA)
SPA 8	90745	Carson
SPA 8	90746	Carson
SPA 8	90747	Carson (Cal State Univ. Dominguez Hills)
SPA 8	90802	Long Beach
SPA 8	90803	Long Beach
SPA 8	90804	Long Beach
SPA 8	90805	North Long Beach (Long Beach)
SPA 8	90806	Long Beach
SPA 8	90807	Long Beach
SPA 8	90808	Long Beach
SPA 8	90810	Carson/Long Beach
SPA 8	90813	Long Beach
SPA 8	90814	Long Beach
SPA 8	90815	Long Beach
SPA 8	90822	Long Beach
SPA 8	90831	Long Beach(World Trade Center)
SPA 8	90840	Long Beach (Cal State University Long Beach)
SPA 8	90846	Long Beach (Boeing)

Source: Child Protection Hotline ZIP Code Report created on September 1, 2006 by DCFS ITS GIS Unit.



Figure 1

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

Total Children Referred to DCFS Calendar Years 1984 Through 2007

Calendar Year	Children
1984	74,992
1985	79,655
1986	103,116
1987	104,886
1988	114,597
1989	111,799
1990	108,088
1991	120,358
1992	139,106
1993	171,922
1994	169,638
1995	185,550
1996	197,784
1997	179,436
1998	157,062
1999	146,583
2000	151,108
2001	147,352
2002	161,638
2003	162,361
2004	154,993
2005	156,831
2006	162,711
2007	167,325



Figure 2

DEPARTMENT OF CHILDREN AND FAMILY SERVICES			
Referred Children By Service Planning Area Calendar Year 2007			
SERVICE PLANNING AREA (SPA)	EVALUATED OUT	IN-PERSON RESPONSE	TOTAL REFERRAL CHILDREN RECEIVED
1	982	9,951	10,933
2	2,520	22,315	24,835
3	1,581	18,894	20,475
4	1,443	14,347	15,790
5	368	3,112	3,480
6	2,240	23,855	26,095
7	1,689	18,320	20,009
8	1,866	20,182	22,048
Out of County/Other*	3,963	19,697	23,660
TOTAL	16,652	150,673	167,325

Note: Data are based on address of origin for referrals received by DCFS.

* Addresses with erroneous, incomplete, unknown, P.O. Box, or empty address fields that cannot be successfully matched to the Thomas Bros. Street Network Database.

Figure 3

DEPARTMENT OF CHILDREN AND FAMILY SERVICES		
Referred Children By Allegation Type Calendar Year 2007		
ALLEGATION TYPE	CHILDREN	PERCENTAGE
Sexual Abuse	10,957	6.5%
Physical Abuse	31,046	18.6%
Severe Neglect	1,899	1.1%
General Neglect	45,064	26.9%
Emotional Abuse	12,863	7.7%
Exploitation	100	0.1%
Caretaker Absence/Incapacity	5,543	3.3%
At Risk, Sibling Abuse	30,898	18.5%
Substantial Risk	28,955	17.3%
TOTAL	167,325	100%



Figure 4

DEPARTMENT OF CHILDREN AND FAMILY SERVICES
Referred Children By Allegation Type Calendar Year 2007

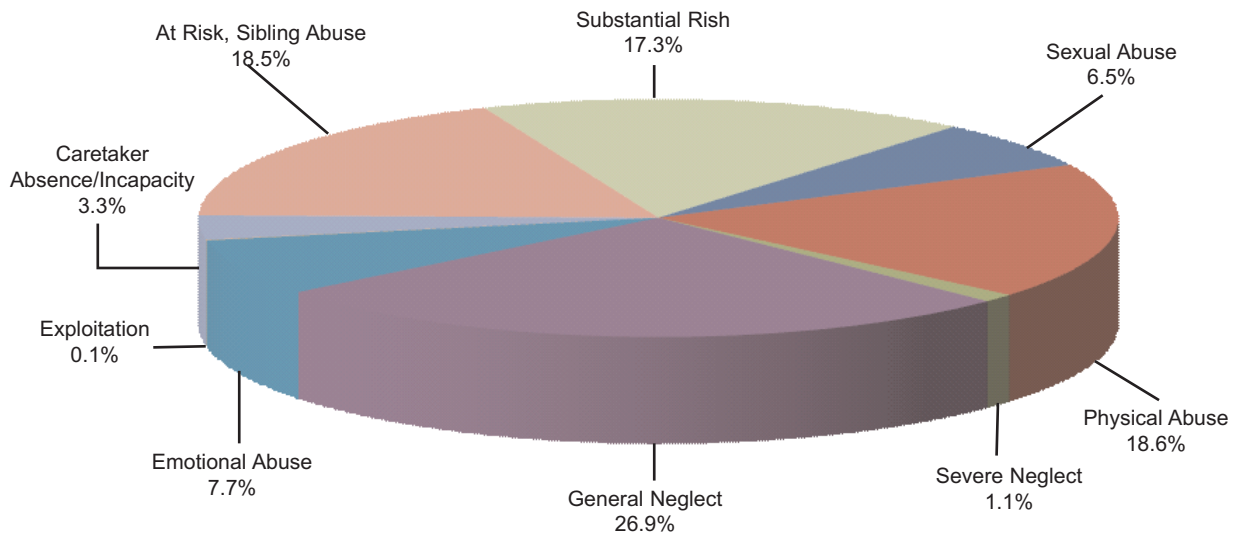


Figure 5

DEPARTMENT OF CHILDREN AND FAMILY SERVICES
In-Home and Out-Of-Home Services Caseload as of December 31, 2007

SERVICES TYPE	CHILDREN	PERCENTAGE
Emergency Response	769	2.1 %
Family Maintenance	10,656	29.1%
Family Reunification	9,853	26.9%
Permanent Placement	13,835	37.8%
Adoptions	1,519	4.1%
TOTAL	36,632	100.0%



Figure 6

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

In-Home and Out-Of-Home Services Caseload as of December 31, 2007

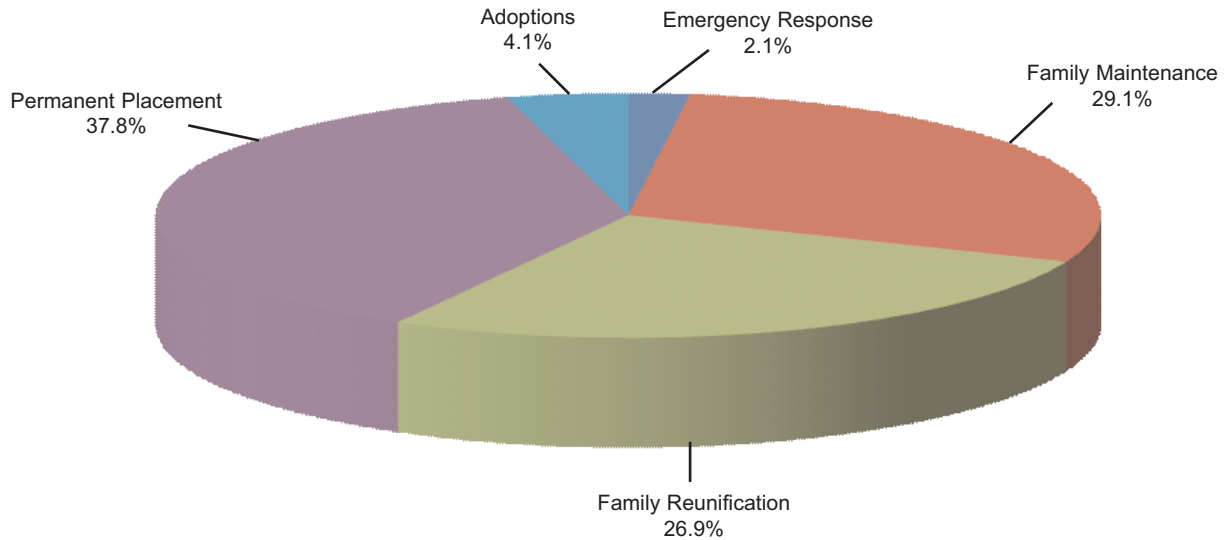


Figure 7

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

In-Home and Out-Of-Home Services Caseload Child Characteristics as of December 31, 2007

CATEGORY		CHILDREN	PERCENTAGE
AGE GROUP	Birth - 2 Years	6,487	17.7
	3 - 4 Years	3,757	10.3
	5 - 9 Years	8,547	23.3
	10 - 13 Years	7,170	19.6
	14 - 15 Years	4,278	11.7
	16 - 17 Years	4,425	12.1
	18 Years & Older	1,968	5.4
	TOTAL	36,632	100.0%
ETHNICITY	White	4,719	12.9
	Hispanic	19,319	52.7
	African American	11,203	30.6
	Asian/Pacific Islander	804	2.2
	American Indian/Alaskan	192	0.5
	Filipino	217	0.6
	Other	178	0.5
	TOTAL	36,632	100.0%
GENDER	Male	18,264	49.9
	Female	18,368	50.1
	TOTAL	36,632	100.0%



Figure 8

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

In-Home and Out-Of-Home Services Caseload By Age Group as of December 31, 2007

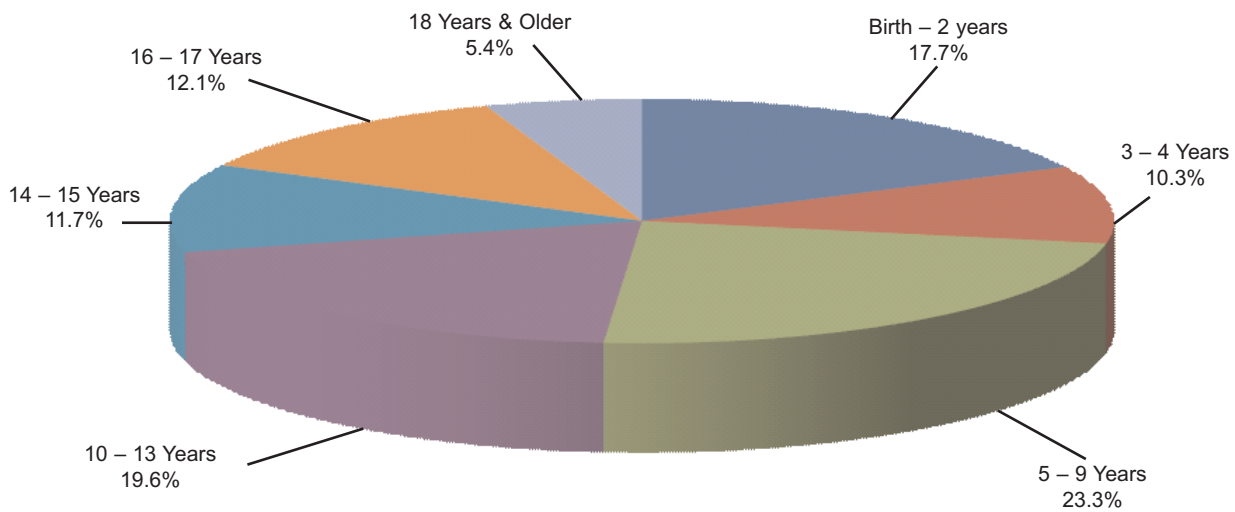


Figure 9

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

In-Home and Out-Of-Home Services Caseload By Ethnicity as of December 31, 2007

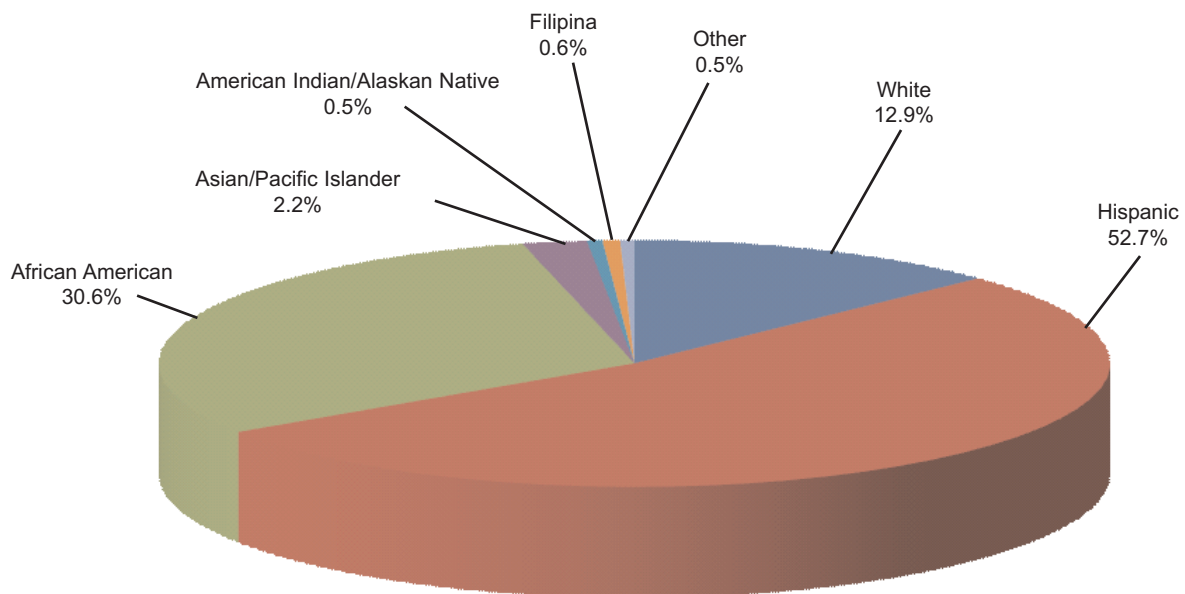




Figure 10

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

In-Home and Out-Of-Home Services Caseload By Gender as of December 31, 2007

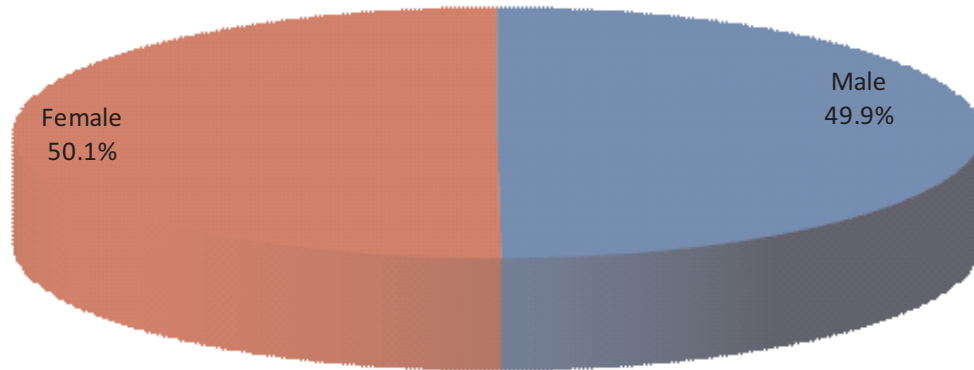


Figure 11

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

**Children In Out-Of-Home Placement By Service Planning Area as of December 31, 2007
(Non Foster Care, Adoptive Home, and Guardian Home Placements Excluded)**

SERVICE PLANNING AREA (SPA)	BIRTH - 2 YEARS	3 - 4 YEARS	5 - 9 YEARS	10 - 13 YEARS	14 - 15 YEARS	16 - 17 YEARS	18 YEARS & OLDER	TOTAL
SPA 1	355	184	395	275	175	205	119	1,708
SPA 2	428	189	374	297	188	265	101	1,842
SPA 3	499	279	672	647	390	417	214	3,118
SPA 4	141	82	151	93	64	96	60	687
SPA 5	43	25	28	25	29	45	16	211
SPA 6	634	328	687	630	419	492	269	3,459
SPA 7	542	264	548	404	216	233	102	2,309
SPA 8	509	242	523	427	330	339	174	2,544
Out of County/Other *	578	311	721	616	417	441	220	3,304
TOTAL	3,729	1,904	4,099	3,414	2,228	2,533	1,275	19,182

(1) Data are based on child's placement address.

(2) * Addresses with erroneous, incomplete, unknown, P.O. Box, or empty address fields that cannot be successfully matched to the Thomas Bros. Street Network Database.



Figure 12

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

Children In Out-Of-Home Placement as of December 31, 2007

(Excluding Guardian Home, Adoptive Home and Non-Foster Care Placement Facility)

FACILITY TYPE	CHILDREN	PERCENTAGE
Relative/Non-relative Extended Family Member Home	10,184	53.1%
Foster Family Home	1,548	8.1 %
Foster Family Agency Certified Home	5,950	31.0 %
Small Family Home	126	0.7 %
Group Home	1,333	6.9 %
Other (Tribal Home and Court Specified Home)	41	0.2 %
TOTAL OUT-OF-HOME PLACEMENT	19,182	100.0%

Figure 13

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

Children In Out-Of-Home Placement as of December 31, 2007

(Excluding Guardian Home, Adoptive Home and Non-Foster Care Placement Facility)

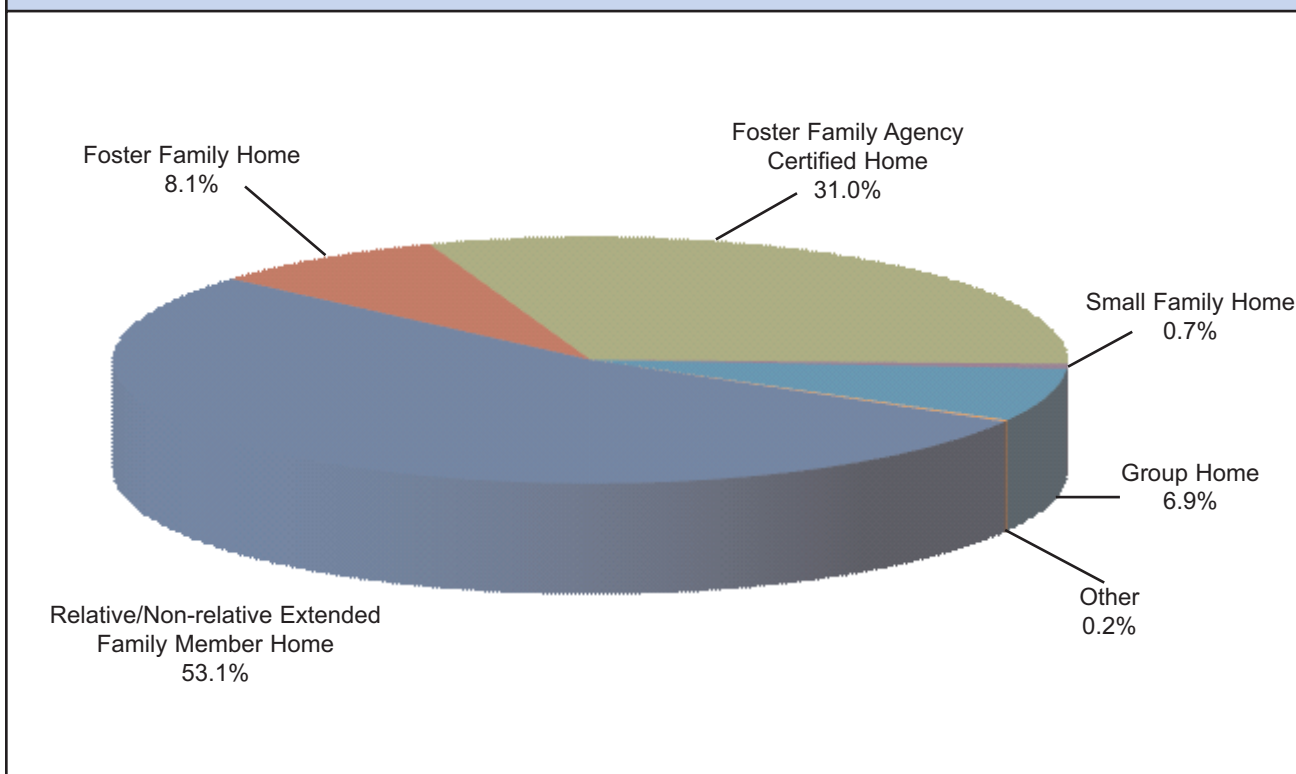




Figure 14

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

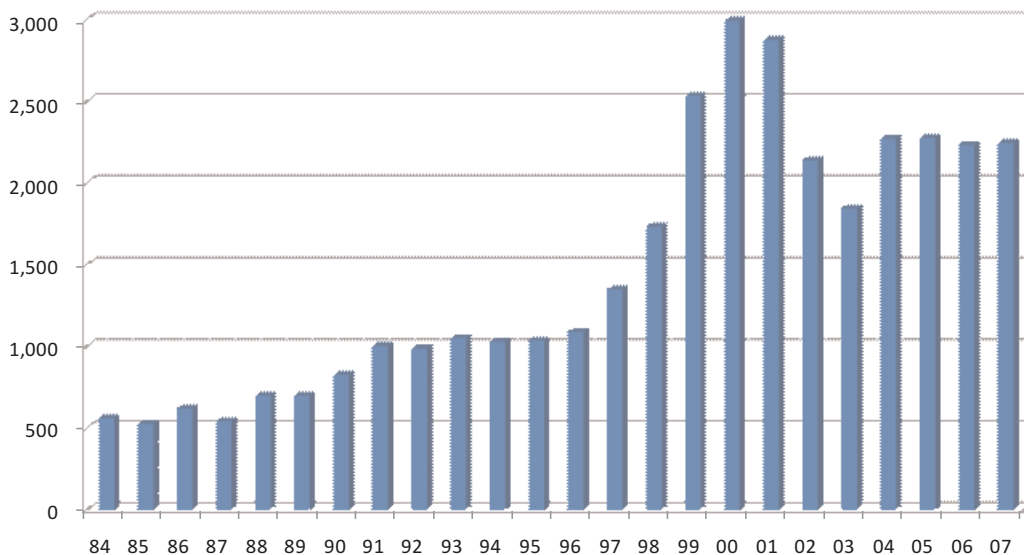
Adoptions Permanency Planning Caseload Calendar Years 1984 Through 2007

CALENDAR YEAR	CHILDREN PLACED IN ADOPTIVE HOMES DURING THE YEAR	CALENDAR YEAR	CHILDREN PLACED IN ADOPTIVE HOMES DURING THE YEAR
1984	558	1996	1,087
1985	524	1997	1,346
1986	617	1998	1,728
1987	541	1999	2,532
1988	698	2000	2,991
1989	696	2001	2,873
1990	824	2002	2,135
1991	1,000	2003	1,842
1992	985	2004	2,271
1993	1,049	2005	2,273
1994	1,027	2006	2,229
1995	1,035	2007	2,243

Figure 15

DEPARTMENT OF CHILDREN AND FAMILY SERVICES

CHILDREN PLACED IN ADOPTIVE HOMES Calendar Years 1984 Through 2007





GLOSSARY

Adoption – A legal process in which a child is freed from his or her birth parents by relinquishment, consent or termination of parental rights and placed with applicants who have been approved to take a child into their own family and raise as their own with all of the rights and responsibilities granted thereto including, but not limited to, the right of inheritance. Adoption terminates any inheritance from the parents or other relatives to the child unless they make specific provision by will or trust; the child legally inherits from his or her adoptive parents. The adoption of an American Indian child terminates inheritance from the biological parents or other relatives to the child; however, any rights or benefits the child has or may be eligible for as a result of his or her status as an American Indian are unaffected. (Title 22, California Administrative Code, Division 2, Chapter 3, Subchapter 4).

At Risk, Sibling Abused – Based upon WIC 300 subdivision (j), the child's sibling has been abused or neglected, as defined in WIC 300 subdivision (a), (b), (d), (e), or (i), and there is a substantial risk that the child will be abused or neglected, as defined in those subdivisions. The court shall consider the circumstances surrounding the abuse or neglect of the sibling, the age and gender of each child, the nature of the abuse or neglect of the sibling, the mental condition of the parent or guardian, and any other factors the court considers probative in determining whether there is a substantial risk to the child.

Calendar Year (CY) – A period of time beginning January 1 through December 31 for any given year.

California Department of Social Services (CDSS) – The state agency in California responsible for aiding, servicing and protecting needy children and adults. At the same time, the CDSS strives to strengthen and encourage individual responsibility and independence for families. The objectives of the CDSS are carried out through the 4,200 employees located in 51 offices throughout the state, the 58 county welfare departments, offices and a host of community-based organizations.

Case – A basic unit of organization in CWS/CMS, created for each child in a referral found to be a victim of a substantiated allegation of child abuse or neglect. When allegations are substantiated, ongoing DCFS services will be provided to the child and family, and when a case plan is developed for the family, the referral is promoted to a case. Several children and adults can be linked together through related cases. A new case can be created without a referral such as when there is a Probation placement case or a Kin-GAP case. Both of these cases are open to Revenue Enhancement for payment purposes only.

Caretaker Absence/Incapacity – This refers to situations when the child's parent has been incarcerated, hospitalized or institutionalized and cannot arrange for the care of the child; parent's whereabouts are unknown or the custodian with whom the child has been left is unable or unwilling to provide care and support for the child, or when the child's parent or guardian is unable to provide adequate care for the child due to the parent or guardian's mental illness, developmental disability or substance abuse.



Child Welfare Services/Case Management System (CWS/CMS) – California’s statewide-automated information system composed of multiple software applications that provide comprehensive case management functions.

Department of Children and Family Services (DCFS) – The County of Los Angeles child protective services agency.

Emergency Response – A child protective services component that includes immediate in-person response, 24 hours a day and seven days a week, to reports of abuse, neglect, or exploitation, for the purpose of providing initial intake services and crisis intervention to maintain the child safely in his or her home or to protect the safety of the child.

Emotional Abuse – Means nonphysical mistreatment, the results of which may be characterized by disturbed behavior on the part of the child such as severe withdrawal, regression, bizarre behavior, hyperactivity, or dangerous acting-out behavior. Such disturbed behavior is not deemed, in and of itself, to be evidence of emotional abuse.

Exploitation – Forcing or coercing a child into performing functions, which are beyond his or her capabilities or capacities, or into illegal or degrading acts. See "sexual exploitation."

Family Maintenance – A child protective services component that provides time-limited services to prevent or remedy neglect, abuse, or exploitation, for the purpose of preventing separation of children from their families.

Family Reunification – A child protective services component that provides time-limited foster care services to prevent or remedy neglect, abuse, or exploitation, when the child cannot safely remain at home and needs temporary foster care while services are provided to reunite the family.

Final Decree of Adoption – A court order granting the completion of the adoption.

Foster Family Agency – A non-profit organization licensed by the State of California to recruit, certify, train, and provide professional support to foster parents. Agencies also engage in finding homes for temporary and long-term foster care of children.

Foster Family Home (Resource Family Home) – Any home in which 24-hour non-medical care and supervision are provided in a family setting in the licensee’s family residence for not more than six foster children inclusive of the member’s family.

General Neglect – The negligent failure of a person having the care or custody of a child to provide adequate food, clothing, shelter, medical treatment, or supervision where no physical injury to the child has occurred.

Group Home – A facility that provides 24-hour non-medical care and supervision to children provides services to a specific client group and maintains a structured environment, with such services provided at least in part by staff employed by the licensee.



Inconclusive – An allegation is inconclusive if it can neither be proved nor disproved.

Legal Guardian – A person appointed by the Superior Court pursuant to the provisions of the Probate Code or appointed by the Dependency court pursuant to the provisions of the Welfare and Institutions Code who is not or related to the child by blood, adoption or affinity within the fifth degree of kinship, including stepparents, stepsiblings, and all relatives whose status is preceded by the words, "great," "great-great" or "grand" or the spouse of any of these persons even if the marriage was terminated by death or dissolution. A former stepparent is considered a relative only if the child is federally eligible.

Neglect – Means the negligent treatment or maltreatment of a child by acts or omissions by a person responsible for the child’s welfare under circumstances indicating harm or threatened harm to the child’s health or welfare, including physical and/or psychological endangerment. The term includes both severe and general neglect.

Non-relative Extended Family Member (NREFM) – Any adult caregiver who has established familial or mentoring relationship with the child. The parties may include relatives of the child, teachers, medical professionals, clergy, and neighbors and family friends.

Out-of-Home Care – The 24-hour care provided to children whose own families [parent(s)/guardian(s)] are unable or unwilling to care for them, and who are in need of temporary or long-term substitute parenting. Out-of-home care providers include relative caregivers, Resource Family Homes, Small Family

Homes, Group Homes, family homes certified by a Foster Family Agency and family homes with DCFS Certified License Pending.

Out-of-Home Care Provider – The individual providing temporary or long-term substitute parenting on a 24-hour basis to a child in out-of-home care, including relatives.

Permanency Planning – The services provided to achieve legal permanence for a child when efforts to reunify have failed until the court terminates Family Reunification. These services include identifying permanency alternatives, e.g., adoption, legal guardianship and long-term foster care. Depending on the identified plan, the following activities may be provided: inform parents about adoptive planning and relinquishment, locate potential relative caregivers and provide them with information about permanent plans (e.g., adoption, legal guardianship) and refer the caregiver to the Adoptions Division for an adoptive home study, etc.

Permanent Placement – A child protective services component that provides an alternate, permanent family structure for children who, because of abuse, neglect, or exploitation, cannot safely remain at home, and who are unlikely to be reunified with their parent(s) or primary caretaker(s).

Physical Abuse – The non-accidental bodily injury that has been or is being inflicted on a child. It includes, but not limited to, those forms of abuse defined by Penal Code Sections 11165.3 and .4 as “willful cruelty or unjustifiable punishment of a child” and “corporal punishment or injury.”



Relative – A person connected to another by blood or marriage. It includes parent, stepparent, son, daughter, brother, sister, stepbrother, stepsister, half-brother, half-sister, uncle, aunt, niece, nephew, first cousin or any such person denoted by the prefix “grand” or “great” or the spouse of any of the persons specified in this definition, even after the marriage has been terminated by death or dissolution.

Resource Families – Foster families whose focus is to reunite children with their birth families. If children cannot return home safely, the Resource Family would be able and willing to provide these children with a safe and permanent home.

Severe Neglect – The negligent failure of a person having the care or custody of a child to protect the child from severe malnutrition or medically diagnosed non-organic failure to thrive. Severe neglect also means those situations of neglect where any person having the care or custody of a child willfully causes or permits the person or health of the child to be placed in a situation such that his or her person or health is endangered as prescribed by WIC § 11165.3, including the intentional failure to provide adequate food, clothing, shelter, or medical care. Child abandonment would come under this section.

Sexual Abuse – The victimization of a child by sexual activities, including, but not limited to, those activities defined in Penal Code §11165.1 (a)(b)(c). See "sexual assault" and "sexual exploitation."

Sexual Assault – Conduct in violation of one or more of the following Penal Code sections:

261 (rape), 264.1 (rape in concert), 285 (incest), 286 (sodomy), subdivisions (a) and (b) of 288 (lewd or lascivious acts upon a child under 14 years of age), 288a (oral copulation), 289 (penetration of a genital or anal opening by a foreign object), or 647a (child molestation).

Sexual Exploitation – Conduct involving matter depicting a minor engaged in obscene acts in violation of Penal Code § 311.2 (preparing, selling, or distributing obscene matter) or subdivision (a) of § 311.4 (employment of minor to perform obscene acts).

Any person who knowingly promotes, aids or assists, employs, uses, persuades, induces or coerces a child, or any person responsible for a child's welfare who knowingly permits or encourages a child to engage in, or assist others to engage in, prostitution or a live performance involving obscene sexual conduct or to either pose or model alone or with others for the purpose of preparing a film, photograph, negative, slide, drawing, painting or other pictorial depiction involving obscene sexual conduct. "Person responsible for a child's welfare" means a parent, guardian, foster parent, or a licensed administrator, or employee of a public or private residential home, residential school, or other residential institution.

Any person who depicts a child in, or who knowingly develops, duplicates, prints, or exchanges, any film, photograph, video tape, negative, or slide in which a child is engaged in an act of obscene, sexual conduct, except for those activities by law enforcement and prosecution agencies and other persons described in subdivisions (c) and (e) of § 311.3."

Small Family Home – Any residential facility in the licensee's family residence providing 24 hour a day care for six or fewer children who



are mentally disordered, developmentally disabled or physically handicapped and who require special care and supervision as a result of such disabilities.

Substantial Risk – Is based upon WIC § 300 (a), (b), (c), (d), and (j). It is applicable to situations in which no clear, current allegations exist for the child, but the child appears to need preventative services based upon the family’s history and the level of risk to the child. This allegation is used when a child is likely to be a victim of abuse, but no direct reports of specific abuse exist. The child may be at risk for physical, emotional, sexual abuse or neglect, general or severe.

Substantiated – An allegation is substantiated, i.e., founded, if it is determined, based upon credible evidence, to constitute child abuse, neglect or exploitation as defined by Penal Code § 11165. 6.

Unfounded – An allegation is unfounded if it is determined to be false, inherently improbable, involved accidental injury or does not meet the definition of child abuse.

**LOS ANGELES COUNTY
SUPERIOR COURT**

AGENCY REPORT

Get in
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Stranger's
Car





LOS ANGELES SUPERIOR COURT JUVENILE DEPENDENCY COURT 2007

COURT OVERVIEW

Juvenile Court proceedings are governed by the Welfare and Institutions Code (WIC), hereinafter, the Code. Through the Code, the legislative branch of government sets the parameters for the Court and other public agencies to establish programs and services which are designed to provide protection, support or care of children; provide protective services to the fullest extent deemed necessary by the juvenile court, probation department or other public agencies designated by the Board of Supervisors to perform the duties prescribed by the Code; and insure that the rights and the physical, mental or moral welfare of children are not violated or threatened by their present circumstances or environment (WIC §19).

The Juvenile Court has the authority to interpret, administer and assure compliance with the laws enumerated in the Code such that the protection and safety of the public and each child under the jurisdiction of the Juvenile Court is assured and the child's family ties are preserved and strengthened whenever possible. Children are removed from parental custody only when necessary for the child's welfare or for the safety and protection of the public. The child and his family are provided reunification services whenever the Juvenile Court determines removal must be necessary.

The Los Angeles County Juvenile Division is headed by the Presiding Judge of the Juvenile Court and encompasses Courts which adjudicate three types of proceedings: Delinquency, Informal Juvenile and Traffic, and Dependency. Delinquency proceedings involve children under the age of 18 who are alleged to have committed a delinquent act (conduct that would be criminal if committed by an adult) or who are habitually disobedient,

truant or beyond the control of the parent or guardian (engaging in non-criminal behavior that may be harmful to themselves) (WIC §§ 601, 602).

There are two specialized Delinquency Courts: The Juvenile Mental Health Court and the Juvenile Drug Court. The Juvenile Mental Health Court treats juvenile offenders who suffer from diagnosed mental disorders and mental disabilities. The Juvenile Drug Court provides voluntary comprehensive treatment programs for non-violent minors who have committed drug- or alcohol-related offenses or delinquent behavior and had a history of drug use.

Informal Juvenile and Traffic Courts hear and dispose of cases involving children under the age of 18 who have been charged with offenses delineated in WIC § 256. These offenses include traffic offenses, loitering, curfew violations, evading fares, defacing property, etc.

Dependency proceedings exist to protect children who have been seriously abused, neglected or abandoned, or who are at substantial risk of abuse or neglect (WIC §§ 202, 300.2).

The Department of Children and Family Services (DCFS) investigates allegations of abuse and is the petitioner on all new cases filed in the Dependency Court. DCFS bears the burden of proof and must make a prima facie showing at the initial hearing (the arraignment/detention hearing) that the child requires the protection of the Court.

There are twenty Dependency Courts in the Los Angeles Court system. Nineteen are located in the Edmund D. Edelman Children's Court in Monterey Park; one is in the Lancaster Courthouse and serves families and children residing in the Antelope Valley. An additional courtroom at the Edelman Children's Court has been designated for private and agency adoptions. Two of the



Dependency Courts hear matters involving the hearing-impaired, and another two hear matters that fall within the Indian Child Welfare Act (25 U.S.C. § 1901 et. seq., CRC 439). There are five Dependency Courts utilizing the Drug Court Parent protocol, and six Dependency Courts are following the Drug Court Dependency Youth protocol.

THE COURT PROCESS

The fundamental goal of the Juvenile Dependency system is to assure the safety and protection of the child while acting in the child's best interest. The best interest of the child is achieved when a child is protected from abuse and feels secure and nurtured within a stable, permanent home.

To act in the best interest of the child, the Court must safeguard the parents' fundamental right to raise their child and the child's right to remain a part of the family of origin by preserving the family as long as the child's safety can be assured. All parents who appear in the Court and all children are represented by legal counsel. The Court will appoint legal counsel for a parent unless the parent has retained private counsel. Legal counsel for children are appointed by the Court and are statutorily mandated to inform the Court of the child's wishes. Legal counsel acts in the best interest of the child by informing the Court of any conflict between what the child seeks and what may be in the child's best interest. DCFS is represented by County Counsel. All parties who appear in the Dependency Court are entitled to be represented by counsel. Children are appointed counsel regardless of their appearance in Court (WIC §317).

Preservation of the family can be facilitated through family maintenance and family reunification services. Family maintenance services are provided to a parent who has custody of the child. Family reunification services are provided to a parent whose

child has been removed from his/her care and custody by the Court and placed in foster care. Prior to filing a petition in the Court, DCFS must make reasonable efforts to provide services that might eliminate the need for the intervention of the Court.

Before a parent can be required to participate in these services, the Court must find that facts have been presented which prove the assertion of parental abuse, neglect or the risk of abuse or neglect as stated in the petition filed by the DCFS.

Findings of abuse or neglect are made at the Jurisdiction/Disposition hearing and result in the Court declaring the child dependent and the parents and child subject to the jurisdiction of the court. Reunification services for the family are delineated in the disposition case plan, which is tailored by the court to the requirements of each family, and provided to them under the auspices of the DCFS.

Reunification services facilitate the safe return of the child to the family and may include drug and alcohol rehabilitation, the development of parenting skills, therapeutic intervention to address mental health issues, education and social skills, in-home modeling to develop homemaking and/or budgeting skills. The disposition case plan must delineate all the services deemed reasonable and necessary to assure a child's safe return to his/her family. When a family fully and successfully participates in reunification services that have been appropriately tailored, the family unit is preserved and the child may remain with the birth family.

Stability and permanence are also assured when a child is able to safely remain within the family unit without placement in foster care while parents receive family maintenance services from DCFS under the supervision of the Court. If the Court has ordered that the child may reside with a parent,



the case will be reviewed every six (6) months until such time the Court determines that the conditions which brought the child within the court's jurisdiction no longer exist. At this time, the Court may terminate jurisdiction (WIC§ 364).

Preserving the family unit through family maintenance and reunification services is one aspect of what is called Permanency Planning. Permanency Planning also involves the identification and implementation of a plan for the child when he/she cannot be safely returned to a parent or guardian (WIC §366.26). Concurrent Planning occurs when the Court orders reunification services simultaneous with planning for permanency outside of the parents' home. In the Dependency system, Concurrent Planning begins the moment a child has been removed from the parents' care.

Children require stability, a sense of security and belonging. To assure that concurrent planning occurs in a manner that will provide stability for the child, periodic reviews of each case are set by the Court. When a child is removed from the care of a parent and suitably placed in foster care under the custody of the DCFS, the Court will order six (6) months of reunification services for children under the age of three (3), including sibling groups with a child under that age. For all other children, the reunification period is twelve (12) months. If the Court finds compliance with the service plan at each and every six-month Judicial Review hearing, the Court may continue services to a date eighteen (18) months from the date of the filing of the original WIC §300 petition. To extend reunification services to the twelfth (12th) or eighteenth (18th) month date, the Court, based upon its evaluation of the history of the case, must find a substantial likelihood of the child's return to the parent or guardian on or before the permanency planning

18th month hearing (WIC § 366.21, et. seq.).

When children are returned to parents or guardians, the family is provided six months of family maintenance services to ensure the stability of the family and the well-being of the child. If reunification services are terminated without the return of the child to the parent or guardian, the Court must establish a Permanent Plan for the child. Termination of reunification services without return of the child to the parent is tantamount to finding the parent to be unfit. A parent who has failed to reunify with a child may be prevented from parenting later-born children if the Court sustains petitions involving the later-born children. The Court may deny reunification services to the parent. In that case, the Court will set a Permanency Planning Hearing to consider the most appropriate plan for the child. The Code provides circumstances under which the Court may in its discretion order no reunification services for a parent (WIC § 361.5). Examples are when a parent has inflicted serious abuse upon a child; has a period of incarceration that exceeds the time period set for reunification; has inflicted serious sex abuse upon a child, etc.

If it is consistent with the best interest of the child, concurrent planning will take place during the reunification period. In the event the parents do not reunify with the child, the Court and DCFS are prepared to secure a stable and permanent home under one of three permanent plans set out in the Code (WIC §366.26):

1. Adoption of the child following a hearing where Dependency Court has terminated parental rights. Adoption is the preferred plan as it provides the most stability and permanence for the child.
2. Appointment of a Legal Guardian for the child. Legal Guardians have the same responsibilities as a parent to care for and control a child. However,



legal guardianship provides less permanence, as a guardianship may be terminated by Court order or by operation of law when the child reaches the age of 18.

3. Planned Permanent Living Arrangement (formerly Long Term Foster Care). This plan is the least stable for the child because the child has not been provided a home that will commit to parent him or her into adulthood while providing the legal relationship of parent and child.

When a Permanent Plan is implemented, the Court reviews it every six months until the child is adopted, guardianship is granted, or the child reaches age eighteen (18). Court jurisdiction for children under a Planned Permanent Living Arrangement cannot be terminated until the child reaches age eighteen. Jurisdiction may terminate for children under a plan of legal guardianship or when a child's adoption has been finalized.

SUBSEQUENT AND SUPPLEMENTAL PETITIONS

Subsequent and supplemental petitions may be filed within existing cases by DCFS, the parents, and persons who are not a party to the original action. These petitions are filed to protect and/or assert the rights of parties, including the rights and interests of the child. Due Process issues may exist whenever a petition is filed in the Dependency Court. The Court may, therefore, be compelled to appoint counsel (if appropriate), set these matters for contested hearings, and, if the parents are receiving reunification services, resolve the new petitions while maintaining compliance within the statutory time lines.

Subsequent Petitions may be filed by DCFS anytime after the original petition has been adjudicated. They allege new facts or

circumstances other than those under which the original petition was sustained (WIC § 342). A subsequent petition is subject to all of the procedures and hearings required for the original petition.

Supplemental Petitions may be filed by DCFS to change or modify a prior Court order placing a child in the care of a parent, guardian, relative or friend, if DCFS believes there are sufficient facts to show that the child will be better served by placement in a foster home, group home or in a more restrictive institution (WIC § 387). A supplemental petition is subject to all of the procedural requirements for the original petition.

Petitions for Modification (Pre- and Post-Disposition) may be filed to change or set aside any order made by the court (WIC § 385). Any person subject to the jurisdiction of the Court may make a motion pursuant to WIC § 385 at any time. Orders may be modified as the Court deems proper, subject to notice to the counsel of record.

Petitions for Modification (Post- Disposition) may be filed by a parent or any person having an interest in a child who is a dependent child, including the child himself or herself. These petitions allege either a change of circumstances or new evidence that could compel the Court to modify previous orders or issue new orders. (WIC § 388).

CASELOAD OVERVIEW

The data collected at this time does not fully reflect the workload of the Dependency Courts. In addition to the statutorily mandated hearings (Detention/Arrestment Hearing; Jurisdictional Hearing; Disposition Hearing; six-, twelve- and eighteen-month review hearings; Selection and Implementation Hearing), the Court, acting in the best interest of the child, must often schedule hearings to receive progress reports if it is determined that Court-ordered services may be lacking.



Interim hearings may be scheduled to handle matters that have not been or cannot be resolved without Court intervention. Cases that are transferred from other counties must be immediately set on the Court's calendar; and recently all of the courts began hearing adoption hearings once or twice a month, so that permanency occurs without delay. All Dependency courts have a significant number of children who are prescribed psychotropic medication, which cannot be given to dependent children without Court authorization. Regular review hearings are often continued because children are not brought to Court for hearing, incarcerated parents are not transported to Court, notice of hearing has not been found proper by the Court, or reports needed for the hearing are not available. The Court will often make interim orders to address issues, even though the case must be continued for hearing. These additional hearings impact the child, particularly when the case is in reunification.

ANALYSIS

In 2007, new, subsequent and supplemental petitions were filed involving 20,675 children: 11,057 children were before the Court with new WIC §300 petitions. Additionally, 8,345 supplemental and/or subsequent petitions were filed in 2007. New petitions were filed in 1,273 previously dismissed or terminated cases. (Figure 1)

Statutorily- mandated hearings in 2007 involved 129,028 children. (Figure 2) This number reflects the total number of children whose cases were brought into the court in 2007 and not the number of children who are dependents of the court. (Many cases require judicial oversight multiple times in a calendar year.)

The data indicates a substantial decline in the number of annual filings since the peak year of 1997, when 22,645 petitions

were filed in the Dependency Court. Filings in 2002 increased modestly over 2001 filings. Total filings in 2003 declined slightly to the levels of 2000 and 2001; the number of total filings reached its lowest point 2004. Accordingly, the modest increase in 2002 appears to be an exception to a continuing downward trend. The number of review hearings rose consistently between 1992 and 2000, but they declined from 2001 through 2005 before increasing moderately in 2006 and substantially in 2007. (Figure 3)

Of the 11,057 new WIC §300 petitions, out-of-home placement was ordered for 4,433 children in 2007. This latter number represents the foster care placement of under sixty eight percent (62.1%) of the 7,141 children whose cases went to disposition in 2007. (Figure 4) Analysis of the ten-year period from 1997 to 2007 shows a strong decline in new 300 WIC filings from 1997 to 2001, when a modest upward trend began. The downward trend resumed in 2003; the number of new filings in 2004 remained at essentially the same level as the previous year. A strong upswing, however, was evident in new filings from 2005 through 2007. From 2006 to 2007, the number of subsequent petitions increased by 541, and supplemental petitions by 408.

The composition of filings has also changed moderately over this decade. New petitions comprised approximately 60% of total petition filings in 1997; by 2007, new filings comprised approximately 54% of total petition filings.

While the numbers of new filings and total petition filings in 2007 were the highest since 1997, the 2007 numbers are still below those of 1997 with one exception. The number of Supplemental 388 WIC petitions filed in 2007 is three times the number filed in 1997. (Figure 5)



EXITING THE DEPENDENCY COURT SYSTEM

The data indicates that on average 62% of the disposition hearings end with the removal of children from their parents or guardian. In 2007, 11,057 children were the subject of new Dependency court petitions and 12,624 children had their cases dismissed or jurisdiction terminated. Since 1997, more children have exited the system than entered it (Figure 6).

This is directly related to the growth in petition filings from 1992 to 1997. The increase in new petitions filed during this period caused an increase in the Juvenile Dependency population who, due to post-disposition review hearings, remain in the system for many years subsequent to their entry. Thus, children exiting the Dependency system do not show up in the statistics until several years after they have been identified as having entered it.

The greater number of children exiting the Dependency system than entering it may be the result of several factors, including the following:

- Changes in the Code authorized the Court to terminate jurisdiction for children placed in a permanent plan of Legal Guardianship;
- DCFS developed new approaches to prevention and treatment (family preservation, family group decision-making, etc.) resulting in fewer new petitions;
- the Code mandated Concurrent Planning, shorter periods for parents to reunify, and adoption as the preferred plan when parents failed to respond to reunification services;
- the Code made reunification discretionary in certain cases resulting in more children being made available for permanency planning.

These substantive changes in law, policy and practice may signify a Dependency Court with fewer filings.

The dramatic rise in filings from 1992 to 1997 was, in large part, due to the increasing availability and usage of “crack” cocaine in the late 1980s and mid 1990s, resulting in an explosion of children born with exposure to drugs and parents whose addiction negated their ability to parent.

The Courts are now witnessing a rise in drug-related filings involving the methamphetamine. The availability of this drug has proliferated, which may explain the increase in the numbers of new petitions and total petitions in 2007. The damage posed to babies born with a positive toxicology for this drug is ominous. This is a natural result of the impact that the larger social order has on the functioning of parents and, therefore, on the operation of the Dependency Court.

SELECTED FINDINGS

- A noticeable increase in filings occurred in 2007, continuing a trend that began in 2005.
- New WIC §300 petitions constituted 53.5% of total filings in 2007.
- 11,057 new children were brought in under new WIC §300 petitions filed in 2007, while 12,624 children exited the Dependency System.



Figure 1

DEPENDENCY PETITIONS FILED

Year	New 300	Subseq. 300	Subseq. 342	Suppl. 387	Suppl. 388	Reactivated	TOTAL
1997	13,465	4,765	860	2,540	1,015	0	22,645
1998	9,807	4,245	870	2,503	1,095	0	18,520
1999	8,918	4,748	628	2,541	1,461	0	18,296
2000	8,015	3,896	429	2,412	1,367	0	16,119
2001	8,285	2,873	580	2,148	2,236	0	16,122
2002	8,803	3,011	526	1,843	2,812	0	16,995
2003	7,501	2,244	716	1,598	2,941	1,169	16,169
2004	7,691	1,974	608	1,361	2,961	1,239	15,834
2005	9,957	2,381	681	1,295	2,987	1,326	18,627
2006	10,235	2,222	611	1,328	3,235	1,239	18,870
2007	11,057	2,668	706	1,326	3,645	1,273	20,675

Figure 2

JUVENILE DEPENDENCY COURT

Dependency Court Workload

Year	Petitions Filed	Judicial Reviews	Total Petitions and Reviews
1997	22,645	94,289	116,934
1998	18,522	105,291	123,813
1999	18,296	158,715	177,011
2000	16,119	165,187	181,306
2001	16,122	157,369	173,491
2002	16,995	140,436	157,431
2003	16,169	127,368	143,537
2004	15,834	124,323	140,157
2005	18,627	118,948	137,575
2006	18,870	119,563	138,433
2007	20,675	129,028	149,703



Figure 3

JUVENILE DEPENDENCY COURT

Petition Filings and Judicial Reviews

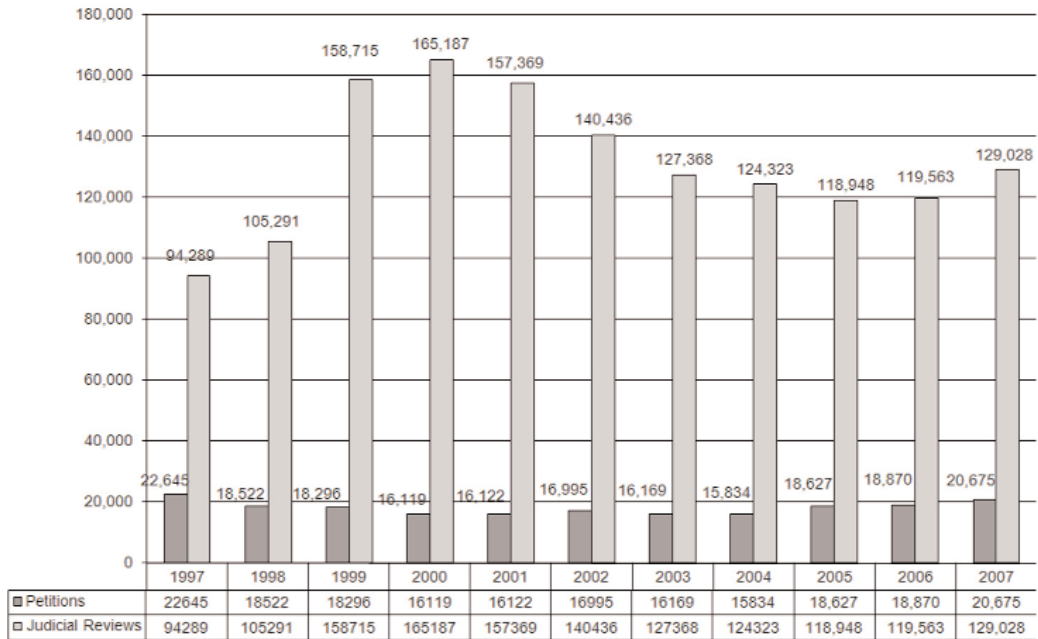


Figure 4

JUVENILE DEPENDENCY COURT

Disposition Hearing Results by Category With Percentage of Total Dispositions

YEAR	TOTAL	HOME OF PARENT	SUITABLE PLACEMENT	OTHER
1997	8,224	2,399 (29%)	5,723 (70%)	102 (0.7%)
1998	7,550	2,445 (32%)	5,066 (67%)	39 (0.5%)
1999	6,964	2,164 (31%)	4,618 (66%)	182 (2.6%)
2000	6,964	2,088 (30%)	4,640 (67%)	236 (3.5%)
2001	7,197	1,942 (27%)	5,010 (69.9%)	245 (3.4%)
2002	8,175	2,124 (26%)	5,748 (70.3%)	303 (3.7%)
2003	6,549	2,015 (31%)	4,296 (65%)	238 (4.0%)
2004	5,805	1,618 (27.9%)	3,960 (68.2%)	227 (3.9%)
2005	6,395	2,079 (32.5%)	4,027 (62.9%)	297 (4.6%)
2006	6,375	2,098 (33%)	4,026 (63.2%)	251 (4.0%)
2007	7,141	2,708 (37.9%)	4,097 (57.4%)	336 (4.7%)



Figure 5

DEPENDENCY PETITIONS FILED

New, Subsequent, Supplemental and Reactivated

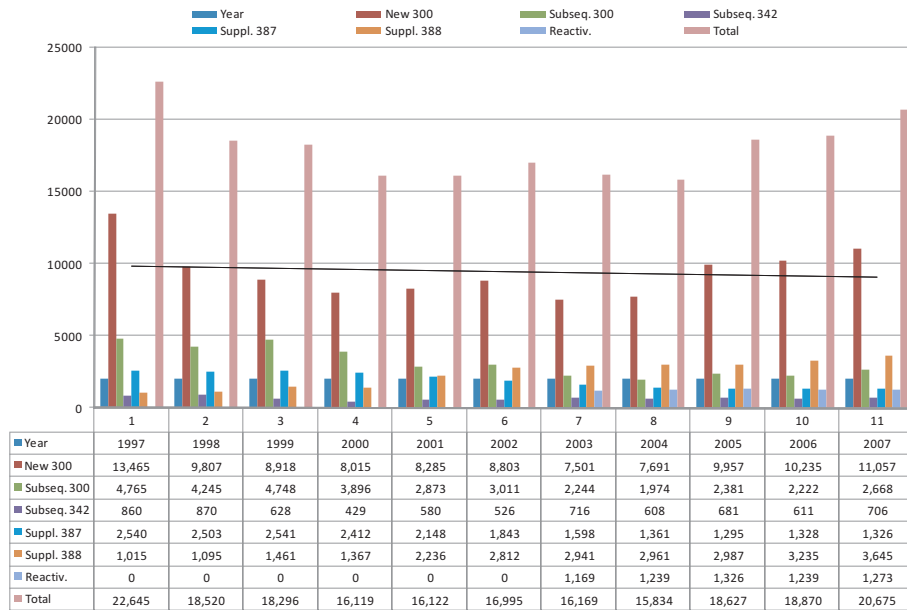
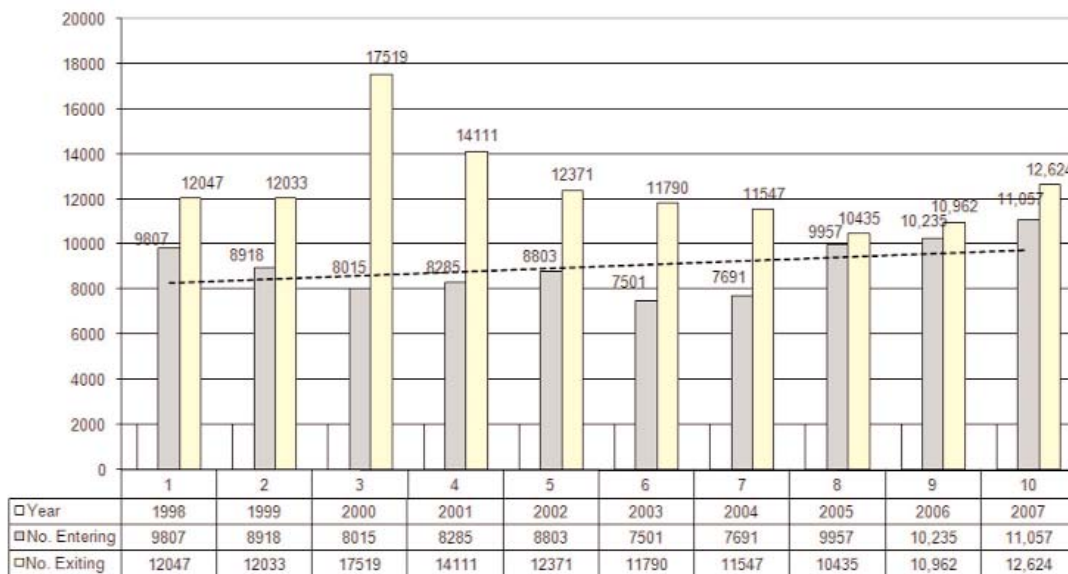


Figure 6

**NEW CHILDREN ENTERING THE DEPENDENCY SYSTEM
VS.
EXISTING CHILDREN EXITING THE DEPENDENCY SYSTEM**





GLOSSARY

Adjudication – A hearing to determine if the allegations of a petition are true.

Detention Hearing – The initial hearing which must be held within 72 hours after the child is removed from the parents. If the parents are present, they may be arraigned.

Disposition – The hearing in which the Court assumes jurisdiction of the child. The Court will order family maintenance or family reunification services. The Court may also calendar a Permanency Planning Hearing.

Permanency Planning Hearing (PPH) – A post-disposition hearing to determine the permanent plan of the child. This hearing may be held at the six-, twelve- or eighteen-month date.

Prima facie showing – A minimum standard of proof asserting that the facts, if true, are indicative of abuse or neglect.

Review of Permanent Plan – A hearing subsequent to the Permanency Planning Hearing to review orders made at the PPH and monitor the status of the case.

Selection and Implementation Hearing – A permanency planning hearing pursuant to WIC §366.26 to determine whether adoption, legal guardianship or a planned permanent living arrangement is the appropriate plan for the child.

WIC §300 Petition – The initial petition filed by the Department of Children and Family Services that subjects a child to Dependency Court supervision. If sustained, the child may

be adjudged a dependent of the court under subdivisions (a) through (j).

WIC §342 Petition – A subsequent petition filed after the WIC 300 petition has been adjudicated and while jurisdiction is still open, alleging new facts or circumstances.

WIC §387 Petition – A petition filed by DCFS to change the placement of the child.

WIC §388 – A petition filed by any party to change, modify or set aside a previous Court order.

**LOS ANGELES
COUNTY COUNSEL
AGENCY REPORT**





LOS ANGELES COUNTY COUNSEL

DEPENDENCY DIVISION

The mission of the Office of the Los Angeles County Counsel is to provide timely and effective legal representation, advice, and counsel to the County, the Board of Supervisors, and public officers and agencies.

The Dependency Division of the County Counsel is headquartered at the Edmund D. Edelman Children's Court in Monterey Park. However, some attorneys are located in the Dependency Court in Lancaster, and others are out-stationed in Department of Children and Family Services (DCFS) regional offices spread throughout the county. The Dependency Division is the largest County Counsel division consisting of 104 attorneys and 41 support staff.

The Division's primary mission is the litigation of dependency trials and appeals. Dependency cases involve allegations of child abuse and neglect, and the County Counsel represents DCFS. DCFS is the agency charged with initiating petitions under Welfare and Institutions Code (WIC) § 300 requesting the juvenile court to intervene in the lives of children who are alleged to be victims of child abuse or neglect. Last year, there were approximately 15,000 cases involving over 31,000 dependent children. The Division also handles over 500 appellate matters each year. In 2007, the Division filed or handled over 535 appellate briefs. The Division is second only to the State Attorney General in the number of briefs filed in the Second District Court of Appeal.

Assistant County Counsel James Owens is the Division Chief of the Dependency Division. Currently, six section heads are assigned to supervise the staff attorneys. The current section heads are as follows: Principal Deputy County Counsel William Roth, supervisor of attorneys assigned to Departments 402-408; Principal Deputy

County Counsel Howard Haffner, supervisor of attorneys assigned to Departments 409-414, the mediation unit, and the Intake and Detention Center; Principal Deputy County Counsel Randall Harris, supervisor of attorneys assigned to Departments 415-420; Principal Deputy County Counsel Scott Miller, supervisor of attorneys assigned to Department 426 and the four regional DCFS offices located in the North County; Principal Deputy County Counsel Lianne Edmonds, supervisor of attorneys assigned to the regional DCFS offices; Principal Deputy County Counsel Kristine Miles, supervisor of the attorneys assigned to the Appeals Section.

There are 19 courtrooms in Monterey Park and one in Lancaster. Three or four deputies are assigned to each courtroom. Attorneys assigned to a dependency court have case-loads of approximately 250 cases. They appear in court on a daily basis and handle approximately eight or more cases on the court's calendar.

Training programs offered to County Counsel are coordinated through a County Counsel Training Committee. The training subjects reflect a consensus and comprehensive approach to the planning and delivery of the training at all levels of County Counsel legal staff. Newly assigned attorneys are provided with an intensive three-week training course, and are given an individual mentor program to acquaint them with Dependency Court law and procedures. There is also an ongoing attorney training program which features Mandatory Continuing Legal Education (MCLE) presentations by recognized experts in dependency-related matters, trial and legal writing skills programs designed particularly for County Counsel, in addition to monthly "round table" discussions updating staff on new case decisions and legislation. Members of DCFS, judicial officers, and children's attorneys are welcome to attend



County Counsel trainings. As part of County Counsel's commitment to on-going legal education and trial skills development, County Counsel staff has authored a Dependency Trial Manual and a Dependency Trial Notebook, both of which contain highly specialized reference materials utilized by County Counsel at every stage of the dependency proceedings. The Division is an integral part of DCFS' social worker training program and is an active participant in the training academy for new social workers, as well as on-going training of experienced social workers.

County Counsel actively participates on various Inter-Agency Council on Child Abuse and Neglect (ICAN), court, DCFS, and other committees. They work with groups such as Find the Children (to facilitate the return of abducted children), the Los Angeles District Attorney (on the Los Angeles County Protocol on Child Abuse and Neglect), and the Juvenile Justice Task Force. County Counsel also provides advice to DCFS legislative forums.

The Outstation Section consists of 10 attorneys. Outstationed attorneys staff the DCFS regional offices, DCFS Adoptions Division, and the Command Post on a rotating basis. Outstationed lawyers answer the day-to-day questions social workers raise related to their cases. In addition, these attorneys provide social worker training on a wide variety of topics including notice pursuant to the Indian Child Welfare Act (ICWA), court report writing, Child Abuse Central Index (CACI) reporting requirements, and testifying. Outstationed attorneys also provide relief for the trial and appellate attorneys who are on extended leaves or absences and cover courtroom needs as they arise.

The Dependency Appeals Section consists of fourteen attorneys who handle dependency related writs and appeals. This includes appellant's opening briefs, respondent's

briefs, answers to writ petitions, emergency writ petitions, petitions for review, stipulations to reverse or concession letters, letter briefs, and motions to dismiss. In 2007, the appellate section attorneys handled and or filed over 535 appellate briefs, an increase of approximately 37% from the previous year. In addition to these cases, during the last fiscal year, the appellate attorneys consulted with DCFS on approximately 54 possible emergency writ matters involving child safety issues, almost half of which resulted in filing an emergency writ petition on behalf of DCFS. They also assessed approximately 25 cases for affirmative appellate action by DCFS and responded to or monitored 24 writ petitions filed by other counsel.

Historically, Los Angeles County Counsel has won appellate court cases that helped shape California dependency law. These include *In re Cindy L.* (1997) 17 Cal.4th 15 [established the child dependency hearsay exception which led to the statute (WIC § 355) which authorized the admission of hearsay statements of a child victim contained in a social study report]; *In re Brooke C.* (2005) 127 Cal.App.4th 377 [found that a limited remand, rather than reversal, was appropriate for ICWA compliance in non-termination of parental rights cases]; *In re April C.* (2005) 131 Cal.App.4th 599 [found that *Crawford v. Washington*, involving a criminal defendant's right to confrontation under the Sixth Amendment, did not apply to juvenile dependency proceedings]; *In re E. H.* (2003) 108 Cal.App.4th 659 [found that parents reasonably should have known who inflicted their child's severe physical abuse where child was never out of their custody]. In 2007, 12 of the cases briefed by County Counsel were published by the appellate court to provide guidance in future cases. Two of those cases were decided in the California Supreme Court, *In re Joshua S.* (2007) 41 Cal.4th 261 [disallowed foster care



payments to children in foreign placements] and *Tonya M. v. Superior Court* (2007) 42 Cal. 4th 836 [delayed six month review hearing does not extend family reunification services for families of young children.] The other cases, decided by the Second District Court of Appeal, are: *In re Jacob P.* (2007) 157 Cal. App.4th 819; *In re J.H.* (2007) 158 Cal.App.4th 174; *In re P.A.* (2007) 155 Cal.App.4th 1197; *In Re D.R.* (2007) 155 Cal.App.4th 480; *R.S. v. Superior Court* (2007) 154 Cal.App.4th 1262; *Bridget A. v. Superior Court* (2007) 148 Cal.App.4th 285; *Ricardo V. v. Superior Court* (2007) 147 Cal.App.4th 419; *In re Kobe A.* (2007) 146 Cal. App.4th 1113. *In re Neil D.* (2007) 155 Cal. App. 4th 219, *Los Angeles County Department of Children and Family Services v. Superior Court (DeShawn W.)* (2007) 158 Cal.App.4th 1562.

THE PRACTICE OF DEPENDENCY LAW

The practice of dependency law provides an opportunity for members of the Dependency Division to partner with DCFS to protect abused, neglected, or abandoned children, to preserve and strengthen family ties, and to provide permanency for children.

The purpose of Dependency Court as embodied in the statutes that govern it is to provide for the safety and protection of each child under its jurisdiction and to preserve and strengthen the child's family ties whenever possible. Parenting is a fundamental right that may not be disturbed unless a parent is acting in a way that is contrary to the safety and welfare of the child. A child is removed from parental custody only if it is necessary to protect him or her from harm. When the court determines that removal of a child is necessary, reunification of the child with his or her family becomes the primary objective.

The proceedings in Dependency Court differ significantly from civil and criminal

actions and affect the fundamental rights of both parents and children. Knowledge of the law and the case, combined with insight and judgment, enable County Counsel to handle cases with opposing counsel in a spirit of cooperation to achieve realistic and reasonable results for the family and child while assuring the child is protected.

The Dependency Mediation Program encourages non-adversarial case resolution. Two County Counsel work with the mediators and children's social workers (CSW) to assist the trial attorneys in resolving legal issues, assuring appropriate case resolutions, reviewing case plans, and reaching meaningful agreements between DCFS and the parents and children through their respective counsel.

PREFILING PROCEDURES

Prior to the initiation of a dependency court case, a child abuse investigation is initiated through a call to the Child Protection Hotline. DCFS has the responsibility of investigating allegations of child abuse and neglect and determining whether a petition should be filed alleging that the child comes within the jurisdiction of the Dependency Court. Should the social worker determine that a child is in need of the protection of the juvenile court, the CSW submits the petition request to the Intake and Detention Control Section of DCFS. County Counsel staffs Intake and Detention Control with an attorney who reviews the petition to assure it is legally sufficient. In addition, the Intake and Detention Control attorney gives legal advice on detention and filing issues and provides summaries of child death cases. There were 13,835 new petitions filed in 2007, which is an increase of nearly 5% from the previous year when there were 13,196.

Once a petition has been filed, the petitioner (DCFS), through its attorney, has the burden of proof at the initial hearing and subsequent



jurisdiction, disposition, review, and selection and implementation hearings held in Dependency Court. There is a direct calendaring system in Dependency Court, whereby all hearings in a case are held before the same judicial officer, wherever possible. In addition, the County Counsel provides vertical representation throughout the proceedings, which provide necessary continuity and familiarity on a case.

INITIAL HEARING

The purpose of the initial petition hearing is to advise parents of the allegations in the petition and to determine detention issues. Based on prima facie evidence submitted in the CSW's detention report, the court makes a determination whether (1) the child should remain detained and (2) if the child comes within the description of WIC § 300 (a) - (j). County Counsel advocates for continued detention if it appears necessary for the safety and protection of the child because of the following circumstances: there is a substantial danger to the physical health of the child or the child is suffering severe emotional damage, and there are no reasonable means by which the child's emotional or physical health can be protected without removing the child from the custody of the parents or guardian; or there is substantial evidence that a parent, guardian, or custodian of the child is likely to flee the jurisdiction of the court; the child has left a placement in which he or she was placed by the Dependency Court; or, the child indicates an unwillingness to return home and has been physically or sexually abused by a person residing in the home.

If the juvenile court orders a child detained, the court must make a finding that there is substantial danger to the physical and/or emotional health and safety of the child and there are no reasonable means to protect the child without removing the child

from the custody of the parents. The court also must make a finding that reasonable efforts were made to prevent or eliminate the need to remove the child from parental custody.

JURISDICTION

At the jurisdiction hearing, DCFS has the burden of proof to establish, by a preponderance of the evidence, the allegations in the petition are true and the child has suffered, or there is a substantial risk that the child will suffer, serious physical or emotional harm or injury.

The parties may set a matter for mediation or a Pretrial Resolution Conference during which County Counsel participates in informal settlement negotiations with other counsel.

Alternatively, the matter may be set for an adjudication. If the child is detained from the parent's home, the matter must be calendared within 15 days. If the child is released to a parent, the time for trial is 30 days. At the adjudication, County Counsel litigates the counts set forth in the petition to establish the legal basis for the court's assumption of jurisdiction. If it is necessary to call a child as a witness, County Counsel or the child's attorney may request that the court permit the child to testify out of the presence of the parents. The court will permit chambers testimony if the child either is (1) intimidated by the courtroom setting, (2) afraid to testify in front of his or her parents, or (3) it is necessary to assure that the child tell the truth.

The social study report prepared by the CSW, attachments to the report, and hearsay statements in the report may be used as substantive evidence subject to specific objections. The CSW, as the preparer of the report, and other hearsay declarants must be available for cross-examination. Statements made by a child under 12 years of age who is the subject of the petition also are admissible



as evidence if they were not procured by fraud, deceit, or undue influence.

At the conclusion of testimony, the court may: find the allegations true and sustain the petition; or find some of the allegations true, amend the petition and sustain an amended petition; or, find the child is not a person described by WIC § 300 and dismiss the petition.

DISPOSITION

If the child is found by the court to be a person described by WIC § 300 (a) - (j), a disposition hearing is held to determine the proper plan for the child. The Disposition hearing is held 10 days after the adjudication if the minor is detained, or 30 days if DCFS is recommending the court order no reunification services for the parents or if DCFS seeks to release the child to the custody of a parent.

If DCFS recommends that the child be removed from parental custody, County Counsel must establish by clear and convincing evidence that return of the child to his or her parents would create a substantial risk of detriment to the safety, protection, or physical or emotional well-being of the child, and there are no reasonable means by which to protect the child. A non-custodial parent is entitled to custody of his or her child unless it can be shown that custody would be detrimental to the safety, protection, or physical or emotional well-being of the child. When the court is making a placement decision for a child, it first must consider placement with the custodial parent followed by the non-custodial parent, relative, foster home, community care facility, foster family agency, or group home. In addition, the court is required to develop and/or maintain sibling relationships whenever possible.

If a child is removed from parental custody, the court may order family reunification services. There must be a reunification plan that is designed to meet the needs of the family which may include counseling and other treatment modalities that will alleviate the problems that led to dependency court involvement. If the child is three years of age or older, the period of reunification is 12 months and may not exceed 18 months. If the child is under three years of age at the time of initial removal, a parent has six months from the date the child entered foster care to successfully reunify with the child. The court has the discretion to limit the period of reunification for older siblings when one of the siblings is under three.

Reunification services are not ordered in all cases. If a parent is in custody, the court may deny reunification if it finds it would be detrimental to the child to order reunification services. If DCFS has determined that it would not be in the best interests of the child to reunify with his or her parents, County Counsel must demonstrate to the court that the specific statutory criteria have been met on which the court may base a non-reunification order. There are 15 statutory grounds under which a court may deny reunification services to the parent. Those grounds are:

- The whereabouts of the parent is unknown;
- The parent is suffering from a mental illness and is incapable of benefiting from reunification services;
- A child or sibling has been physically or sexually abused as determined on two separate dependency petitions;
- The parent has caused the death of a child through abuse or neglect;
- The child is under three years old and has been severely physically abused;



- The child or the child's sibling has been severely sexually abused or severely physically harmed;
- The parent is not receiving reunification services for a sibling or half sibling pursuant to §361.5(a)(3),(5) or (6);
- The child has been willfully abandoned which has caused serious danger to the child, or the child has been voluntarily surrendered;
- The parent has been convicted of a violent felony as defined in Penal Code (PC) § 667.5;
- The child has been conceived under PC §§ 288 or 288.5 (child molestation);
- The parent has abducted the child's sibling or half-sibling;
- Reunification services have been terminated for a sibling after the sibling was removed from the home;
- Parental rights were terminated on a sibling, and the parent has not made an effort to treat the problems that led to the removal of the sibling;
- The parent is a chronic abuser of drugs or alcohol, and has resisted court ordered treatment; or,
- The parent has advised the court that he or she is not interested in receiving family reunification services or having the child placed in his or her custody.

If the court has not ordered reunification services for the family, a hearing to select and implement a permanent plan must be calendared within 120 days. If the parent's whereabouts is unknown, the selection and implementation hearing is not scheduled until after the initial six-month review.

REVIEW HEARINGS

(WIC § 364) If the court has ordered that the child reside with a parent, the case will be reviewed every six months until the court determines that conditions no longer exist which brought the child within the court's jurisdiction, the child is safe in the home, and that jurisdiction may be terminated.

(WIC § 366.21 (e)) If the court has ordered family reunification services, the subsequent review hearings are held every six months. At each of the review hearings, the court reviews the status of the child and the progress the parents have made with their case plan. The court is mandated to return the child to the custody of his or her parents unless it finds by a preponderance of the evidence that return would create a substantial risk of detriment to the safety, protection or physical or emotional well-being of the child. Failure of a parent to participate regularly and make substantive progress in court-ordered treatment programs is *prima facie* evidence that return of the child would be detrimental.

If the child was under the age of three on the date of initial removal from parental custody, the first six-months review hearing is a permanency hearing.

(WIC § 366.21 (f)) The 12-month review is the permanency hearing for a child who was three or older on the date of initial removal from parental custody. If the child is not returned to the custody of his or her parents, the court must terminate reunification and set the matter for a hearing at which a permanent plan of adoption, guardianship, or long term foster care is selected. In rare instances, the court may continue the case for an additional six months if it is able to make a finding that there is a substantial probability that the child will be safely returned and maintained in the home by the time of the next hearing.



(WIC § 366.22) The final permanency hearing must occur within 18 months of the original detention of the child, and if the child is not returned home at this hearing, the court must set a selection and implementation hearing within 120 days.

(WIC § 366.26) The selection and implementation hearing is the hearing at which the court selects the permanent plan for the child. The preferred plan is adoption followed by legal guardianship and a planned permanent living arrangement. If the court selects adoption as the plan, before terminating parental rights, the court must find by clear and convincing evidence that the child is adoptable. If the child is adoptable, the court shall terminate parental rights unless one of the following circumstances applies:

- A relative caretaker is unwilling or unable to adopt because of circumstances that do not include an unwillingness to accept legal or financial responsibility for the child, and removal of the child from the relative would be detrimental to the child.
- Termination would be detrimental to the child because the parents have maintained regular visitation and contact with the child, the child will benefit from continuing the relationship, and the benefit will outweigh the benefit derived from the permanence of an adoptive home.
- Termination would be detrimental to the child because a child 12 years of age or older does not wish to be adopted.
- Termination would be detrimental to the child because the child requires residential treatment and adoption is unlikely or undesirable.
- Termination would be detrimental to the child because there would be

substantial interference with a child's sibling relationship,

- Termination would be detrimental to the child because the child is living with a non-relative caretaker who is unwilling or unable to adopt because of exceptional circumstances, and removal of the child from that home would be detrimental to the child.
- Termination would not be in the best interest of the child because there would be a substantial interference with an Indian child's connection to his or her tribal community or the child's tribal membership rights .
- Termination would not be in the best interest of the child because an Indian child's tribe has identified guardianship or long term foster care with a fit or willing relative as an appropriate plan.

(WIC § 366.3) After the permanency hearing, the status of the child is reviewed at least once every six months. The court determines the progress made to provide a permanent home for the child and efforts extended to find and maintain significant relationships between the child and individuals who are important to the child. Sibling relationships are evaluated and maintained where possible. Emancipation and independent living services which have been offered are reviewed for the teenager as he or she approaches adulthood.



GLOSSARY

Brief – A document filed in court that summarizes the facts of the case and then analyzes the facts in accordance with applicable law.

Concession Letter – A letter a reviewing court which admits the opposing party's argument has merit.

Detention Hearing – The initial hearing that is held in dependency court following the removal of a child from parental custody and the filing of a petition.

Direct Calendaring – A case is assigned to a courtroom at the initial hearing and will remain in the same courtroom throughout the proceedings.

Disposition – If the child is found to be a person described in WIC § 300, a disposition hearing is held to determine the appropriate placement of the child and the case plan.

Family Reunification– Child welfare services provided to a child and the child's parents or guardians for facilitating reunification of the family.

Hearsay– An out of court statement offered in evidence for the truth of the matter stated.

Indian Child Welfare Act – Federal law enacted to protect and preserve American Indian Families.

Initial Hearing – See detention hearing.

Jurisdiction – The scope of the a court's authority to make orders. A child who comes within the description of WIC § 300 (a) – (j) falls within the juvenile court's jurisdiction.

Legal Guardianship – Legal authority and responsibility for the care of a child.

Non-related Extended Family Member – An adult caregiver who has an established familial or mentoring relationship with the child.

Notice – Formal communication with a party, usually written, informing them of court proceedings.

Planned Permanent Living Arrangement – (Formerly Long Term foster care) A permanent plan for a dependent child for whom neither adoption nor legal guardianship is a viable plan.

Preponderance of Evidence – The standard of proof wherein a court is only required to find that it is more likely than not that the thing sought to be proven is true.

Pretrial Resolution Conference – A court hearing held prior to the jurisdictional hearing, in which the parties meet in an attempt to resolve the issues before the court.

Prima Facie Evidence – Evidence that, if uncontradicted, would support the requested finding. In a dependency proceeding, the court, at an initial hearing, needs only *prima facie* evidence that the child is described by WIC § 300 may not remain safely in the home of the parent or guardian in order to make detention findings



Review Hearing – Hearings which occur every six months during which the court reviews the appropriateness of the case plan

Selection and Implementation Hearing – Hearing at which the court sections and implements a permanent plan for the child. That plan may be either adoption, legal guardianship, or, on rare occasions, a planned permanent living arrangement.

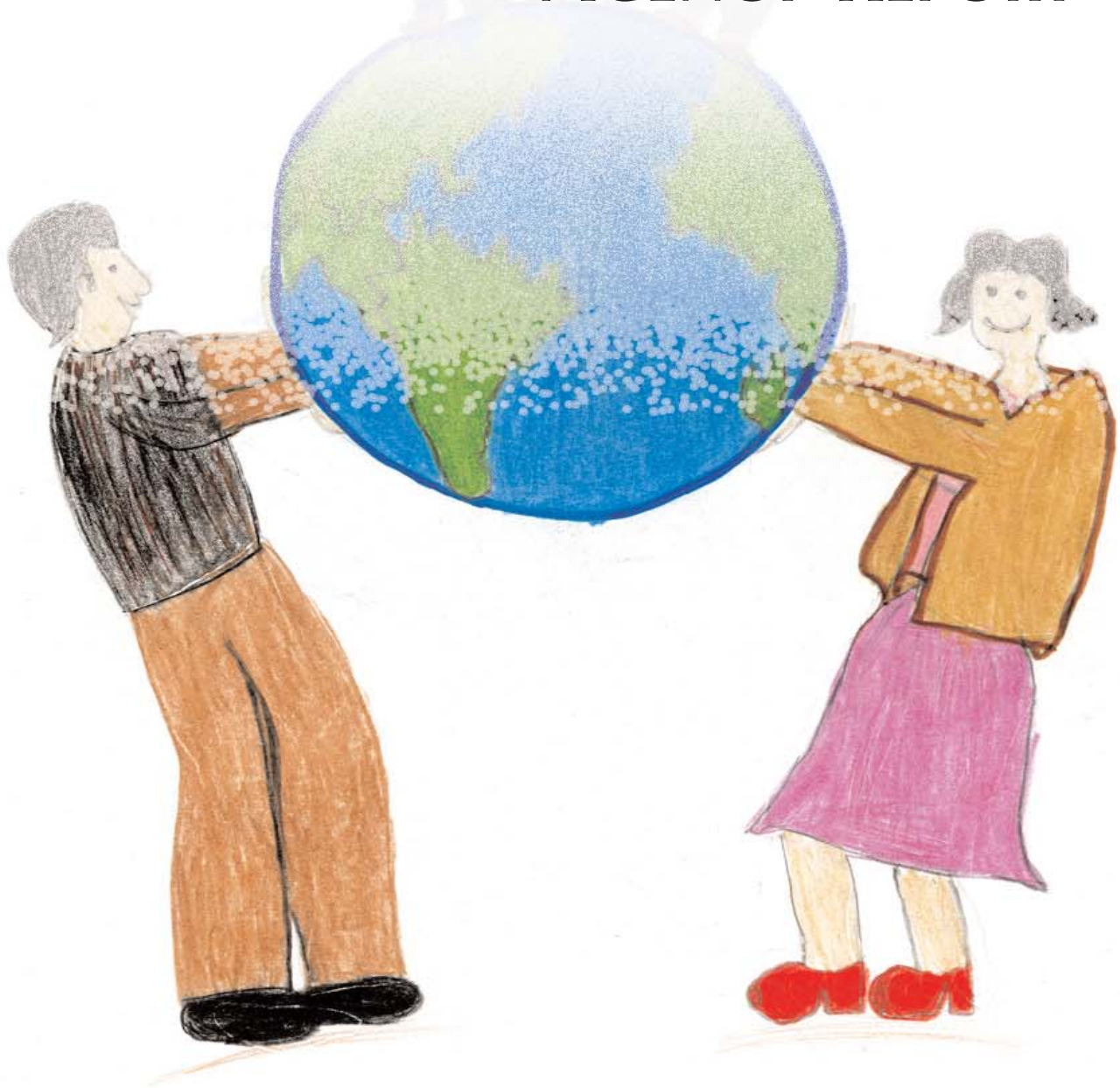
Social Study Report – A report prepared by the children’s social worker that provides information to the court regarding the problems challenging a family and the family’s progress regarding those challenges.

Termination of Parental Rights – If the court determines that adoption is the appropriate plan at the Selection and Implementation hearing, the court must free the child for adoption by terminating parental rights.

Vertical Representation – In dependency proceedings, an attorney representing a party remains on the case at all stages of the proceedings, so as to provide continuity of representation.

Care for the Children

LOS ANGELES COUNTY SHERIFF'S DEPARTMENT AGENCY REPORT



Care for the world



LOS ANGELES COUNTY SHERIFF'S DEPARTMENT

SPECIAL VICTIMS BUREAU

The Los Angeles County Sheriff's Department, the largest in the United States, is responsible for providing law enforcement services to nearly 3 million people. This service extends to 40 contract cities and unincorporated County areas. The Special Victims Bureau (SVB) is the unit that investigates cases of physical and sexual child abuse that occur within its jurisdiction. Cases of child endangerment, neglect, emotional abuse, and child concealment are investigated by detectives assigned to one of the twenty-four stations located throughout the County. These cases are not included in this report.

The origins of SVB began in 1972 with the creation of the Youth Services Bureau which handled primarily juvenile diversions. In 1974, the Child Abuse Detail became a separate unit tasked with investigating these specialized cases. In 1986, the Juvenile Investigations Bureau (JIB) was developed and contained the Child Abuse Detail, as well as other details responsible for juvenile diversions, petition intake and control and juvenile delinquency court liaisons. During the 1990s, the Bureau was reorganized to handle only child physical and sexual abuse cases. In October 1999 the Bureau was renamed to the more descriptive name of Special Victims Bureau.

Detectives who aspire to aid the children of Los Angeles County must pass an application and interview process before receiving training in child physical abuse, sexual assault, interviewing and interrogation techniques, as well as warrant writing. New detectives are paired with experienced personnel during

a training period to further hone their investigative and interviewing skills. Detectives are in contact, often daily, with Children's Social Workers (CSW) from the Department of Children and Family Services (DCFS), the District Attorney's Office, other law enforcement agencies, medical professionals and various social services providers, all of whom add insight and training.

Members of SVB provide training in child abuse laws and investigations to new Sheriff's Academy Recruits, experienced Departmental personnel, and other law enforcement agencies. Additionally, training is offered to social service providers, foster family agencies, schools, as well as many parent and civic groups. SVB personnel have been involved for the past several years in training new DCFS CSWs in the areas of collaborative efforts with law enforcement and CSW safety in order to assist them prior to their initial field assignments.

The Sheriff's Department has created a new Los Angeles County Regional Sexual Assault Felony Enforcement (SAFE) Team which targets registered sex offenders, child exploitation and internet based predators. The team is comprised of five Sheriff's Detectives, one Assistant District Attorney, one Probation Officer, one Parole Agent and a company of Reserve Deputy Sheriffs.



Figure 1

CASES REPORTED BY STATION AND TYPE OF ABUSE – 2007

STATION	PHYSICAL	SEXUAL	TOTAL
Altadena	30	34	64
Avalon	6	5	11
Carson	54	59	113
Century	87	219	306
Cerritos	12	13	25
Compton	78	152	230
Crescenta Valley	18	18	36
Community Colleges	1	4	5
East Los Angeles	46	144	190
Industry	70	147	217
Lakewood	135	175	310
Lancaster	148	252	390
Lennox	44	113	157
Lomita	28	24	52
Lost Hills/ Malibu	22	26	48
Marina del Rey	13	12	25
Norwalk	90	44	134
Palmdale	102	170	272
Pico Rivera	39	85	124
Pre-Employment	0	3	3
Santa Clarita Valley	88	124	212
San Dimas	21	52	73
Special Victims Bureau	0	16	16
Temple	46	103	149
Transit Services Bureau	1	6	7
Walnut/Diamond Bar	22	51	73
West Hollywood	4	11	15
TOTAL	1,205	2,052	3,257

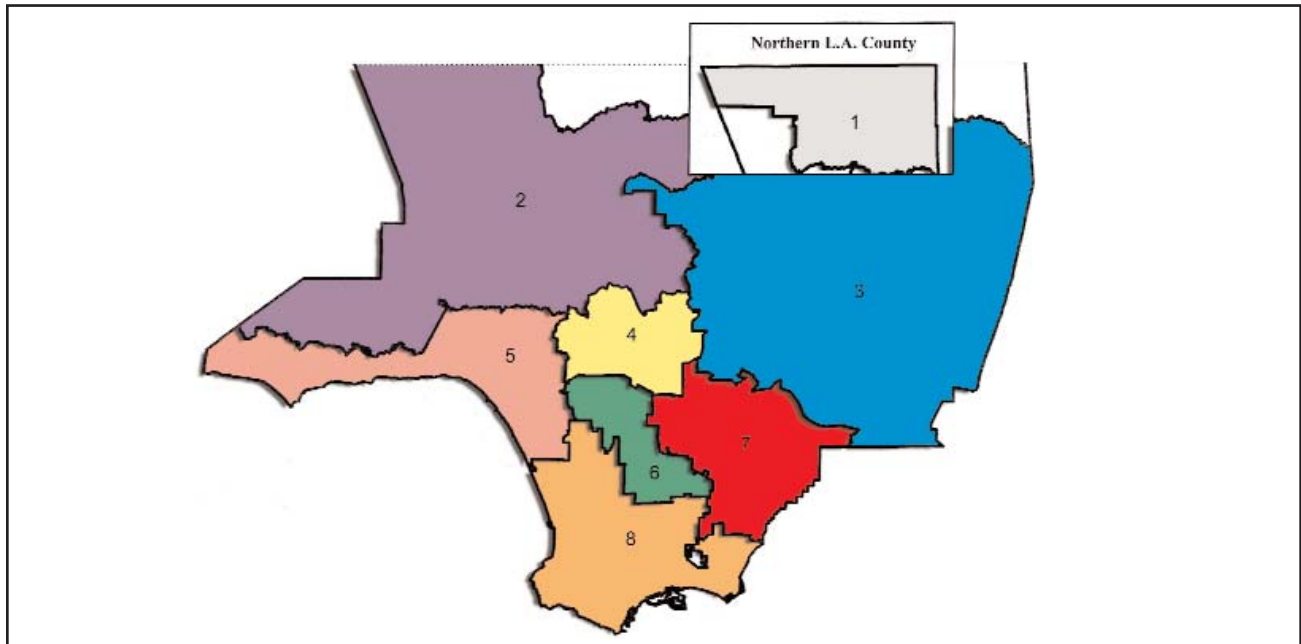


Figure 2

CASES BY SERVICE PLANNING AREAS (SPA) AND BY STATIONS – 2007

SPA	STATION	CASES
1	Lancaster	390
	Palmdale	272
	TOTAL SPA 1	662
2	Crescenta Valley	36
	Lost Hills	48
	Santa Clarita Valley	212
	TOTAL SPA 2	296
3	Altadena	64
	Industry	217
	San Dimas	73
	Temple	149
	Walnut/Diamond Bar	73
TOTAL SPA 3	576	
4	West Hollywood	15
	TOTAL SPA 4	15
5	Marina Del Rey	25
	TOTAL SPA 5	25

Figure 2 (Cont.)

CASES BY SERVICE PLANNING AREAS (SPA) AND BY STATIONS – 2007

SPA	STATION	CASES
6	Century	306
	Compton	230
	TOTAL SPA 6	536
7	Cerritos	25
	East Los Angeles	190
	Lakewood	310
	Norwalk	134
	Pico Rivera	124
TOTAL SPA 7	783	
8	Avalon	11
	Carson	113
	Lennox	157
	Lomita	52
TOTAL SPA 8	333	
TOTAL	3,226	

* The difference between the totals by SPA (3,226) and the total number of cases investigated (3,257) is due to cases generated by Pre-Employment Transit Services Bureau, Special Victims Bureau and Community Colleges Bureau not included by SPA.



Figure 3

CASES REPORTED BY STATION- 2007
COMPARISON OF CASES FOR TEN YEARS FROM 1998 – 2007

	1998	1999	2000	2001	2002
Altadena ¹	na	na	na	40	64
Avalon	7	9	8	17	7
Carson	158	143	143	134	149
Century	280	297	270	240	327
Cerritos ²	na	na	20	33	41
Community Colleges	0	0	0	0	0
Compton ³	na	na	66	214	245
Court Services ⁴	0	0	1	1	0
Crescenta Valley	67	67	82	31	27
East Los Angeles	185	192	222	192	248
SVB	na	14	20	17	15
Homicide	na	0	0	1	0
Industry	162	169	228	230	244
Lakewood	356	312	278	340	383
Lancaster	603	356	349	321	284
Lennox	169	160	159	179	243
Lomita	53	52	41	44	61
Lost Hills/ Malibu	43	41	62	49	54
Marina del Rey	27	26	21	29	22
NCCF ⁵	0	0	1	0	0
Norwalk	241	213	245	271	288
Palmdale ⁶	na	274	284	274	302
Pico Rivera	87	82	105	103	103
Pre-Employment	0	0	0	0	0
San Dimas ⁷	na	na	101	92	110
Santa Clarita	171	194	195	214	181
Temple	159	170	148	168	211
Transit Services	0	3	3	3	0
Walnut/ Diamond Bar	175	165	76	84	102
West Hollywood	21	18	9	8	23
TOTAL	2,964	2,957	3,136	3,329	3,734

These statistics show the reported cases of Child Abuse assigned to the Special Victims Bureau for the past ten years 2007 Yr cases do not include cases reassigned to other agencies or substations

Notes:

- 1 Altadena Station was a satellite station of Crescenta Valley until July 2001
- 2 Cerritos Station became operational in January 2000
- 3 Compton Station became operational in September 2000
- 4 Court Services Bureau had not submitted any Child Abuse cases until 2000
- 5 NCCF report was a child vistor injured by a family member
- 6 Palmdale Station became operational in 1999
- 7 San Dimas Station became operational in 2000



Figure 3 (Cont.)

CASES REPORTED BY STATION- 2007						
COMPARISON OF CASES FOR TEN YEARS FROM 1998 – 2007						
	2003	2004	2005	2006	2007	TOTAL
Altadena ¹	64	49	39	51	64	371
Avalon	3	2	3	5	11	72
Carson	137	149	144	157	113	1,427
Century	283	324	300	310	306	2,937
Cerritos ²	37	28	28	19	25	231
Community Colleges	0	0	0	0	5	5
Compton ³	175	192	201	228	230	1,551
Court Services ⁴	0	0	0	0	0	2
Crescenta Valley	18	29	35	41	36	433
East Los Angeles	198	223	192	167	190	2,009
SVB	22	25	23	17	16	169
Homicide	0	0	0	0	0	1
Industry	220	209	186	187	217	2,052
Lakewood	353	468	474	443	310	3,717
Lancaster	274	312	273	300	390	3,462
Lennox	197	161	162	180	157	1,767
Lomita	55	64	62	60	52	544
Lost Hills/ Malibu	50	44	60	66	48	517
Marina del Rey	17	19	19	33	25	238
NCCF ⁵	0	0	0	0	0	1
Norwalk	291	296	242	242	134	2,463
Palmdale ⁶	294	351	246	318	272	2,615
Pico Rivera	112	102	124	119	124	1,061
Pre-Employment	0	0	0	0	3	3
San Dimas ⁷	80	93	75	88	73	712
Santa Clarita	194	187	209	217	212	1,974
Temple	145	162	135	152	149	1,599
Transit Services	4	3	4	5	7	32
Walnut/ Diamond Bar	89	78	68	78	73	988
West Hollywood	21	16	4	8	15	143
TOTAL	3,333	3,586	3,308	3,491	3,257	33,096



Figure 4

VICTIMS BY AGE AND TYPE OF ABUSE – 2007

PHYSICAL ABUSE			SEXUAL ABUSE		
Under 3 years	151	(11.26%)	Under 3 years	39	(1.67%)
3-4 years	129	(9.61%)	3-4 years	162	(6.93%)
5-9 years	380	(28.29%)	5-9 years	391	(16.73%)
10-14 years	415	(3.90%)	10-14 years	719	(30.77%)
15-17 years	262	(19.51%)	15-17 years	913	(39.07%)
Over 17 years*	6	(0.45%)	Over 17 years*	113	(4.84%)
TOTAL	1,343		TOTAL	2,337	

*Age of victim at time of crime was under 17

Figure 5

VICTIMS BY GENDER AND TYPE OF ABUSE – 2007

PHYSICAL ABUSE			SEXUAL ABUSE		
Male	663	(51.72%)	Male	373	(16.89%)
Female	619	(48.28%)	Female	1,836	(83.11%)
TOTAL	1,282		TOTAL	2,209	

Figure 6

VICTIMS BY ETHNICITY AND TYPE OF ABUSE – 2007

ETHNICITY	PHYSICAL		SEXUAL	
Hispanic	652	(52.54%)	1,194	(56.21%)
Black	298	(24.01%)	403	(18.97%)
White	224	(18.06%)	430	(20.24%)
Other/Unknown	67	(5.40%)	97	(4.57%)
Total	1,241		2,124	



Figure 7

SUSPECTS BY AGE AND TYPE OF ABUSE – 2007

PHYSICAL ABUSE		SEXUAL ABUSE	
Under 18 years	24 (2.10%)	Under 18 years	464 (20.84%)
18-24 years	116 (10.15%)	18-24 years	538 (24.16%)
25-45 years	769 (67.28%)	25-45 years	913 (41.00%)
Over 45 years	234 (20.47%)	Over 45 years	312 (14.01%)
TOTAL	1,143	TOTAL	2,227

Figure 8

SUSPECTS BY GENDER AND TYPE OF ABUSE – 2007

PHYSICAL ABUSE		SEXUAL ABUSE	
Male	596 (56.82%)	Male	1,638 (91.36%)
Female	453 (43.18%)	Female	155 (0.09%)
TOTAL	1,049	TOTAL	1,793

Figure 9

SUSPECTS BY ETHNICITY AND TYPE OF ABUSE – 2007

ETHNICITY	PHYSICAL	SEXUAL
Hispanic	489 (51.0%)	1,247 (56.27%)
Black	273 (27.6%)	404 (18.23%)
White	233 (21.05%)	383 (17.28%)
Other/Unknown	112 (10.12%)	182 (8.21%)
TOTAL	1,107	2,216



GLOSSARY OF LAW ENFORCEMENT TERMS AND CHILD ABUSE RELATED CRIMES

Battery – Unlawful touching of another person. Misdemeanor physical abuse is occasionally filed as a battery by the District Attorney’s Office when there is insufficient evidence to prove a willful act.

Case – The compilation of all reports and interviews pertaining to an incident initiated by a patrol deputy. The case may be presented to the District Attorney or, if insufficient evidence, receive an alternative disposition. A case may involve one or multiple victims and/or suspects.

Child Abuse – Intentional acts causing physical harm or which place a child at risk of endangerment. Classifications include any sexual act, general or severe neglect or emotional trauma.

Endangerment - Any situation in which a child is at risk of possible harm, but not actually assaulted or injured.

Exigent Circumstances – Following or chasing a suspect of a crime which has just been committed, or where a person is in immediate danger of injury or death.

Incident Report – A report of an incident, whether criminal or not, usually generated by a uniformed Deputy Sheriff. These are also called a “complaint reports” or “first reports.”

Mandated Reporter – A person required by state law to report known or suspected child abuse or neglect. Peace officers, social workers, teachers, school administrators, and health practitioners are but a few examples.

Neglect – A failure to provide the basic necessities, (i.e. food, shelter, or medical attention), poor sanitation, or poor hygiene. These cases may be classified as either general neglect or severe neglect.

Physical Abuse – Willfully causing or permit any child to suffer or inflict thereon unjustifiable physical pain or suffering, or having the care and custody of any child cause or permit that child or health of that child to be injured or placed in a situation where their person or health is endangered.

Physical Abuse (Felony) – Any physical abuse under circumstances likely to produce great bodily harm or death.

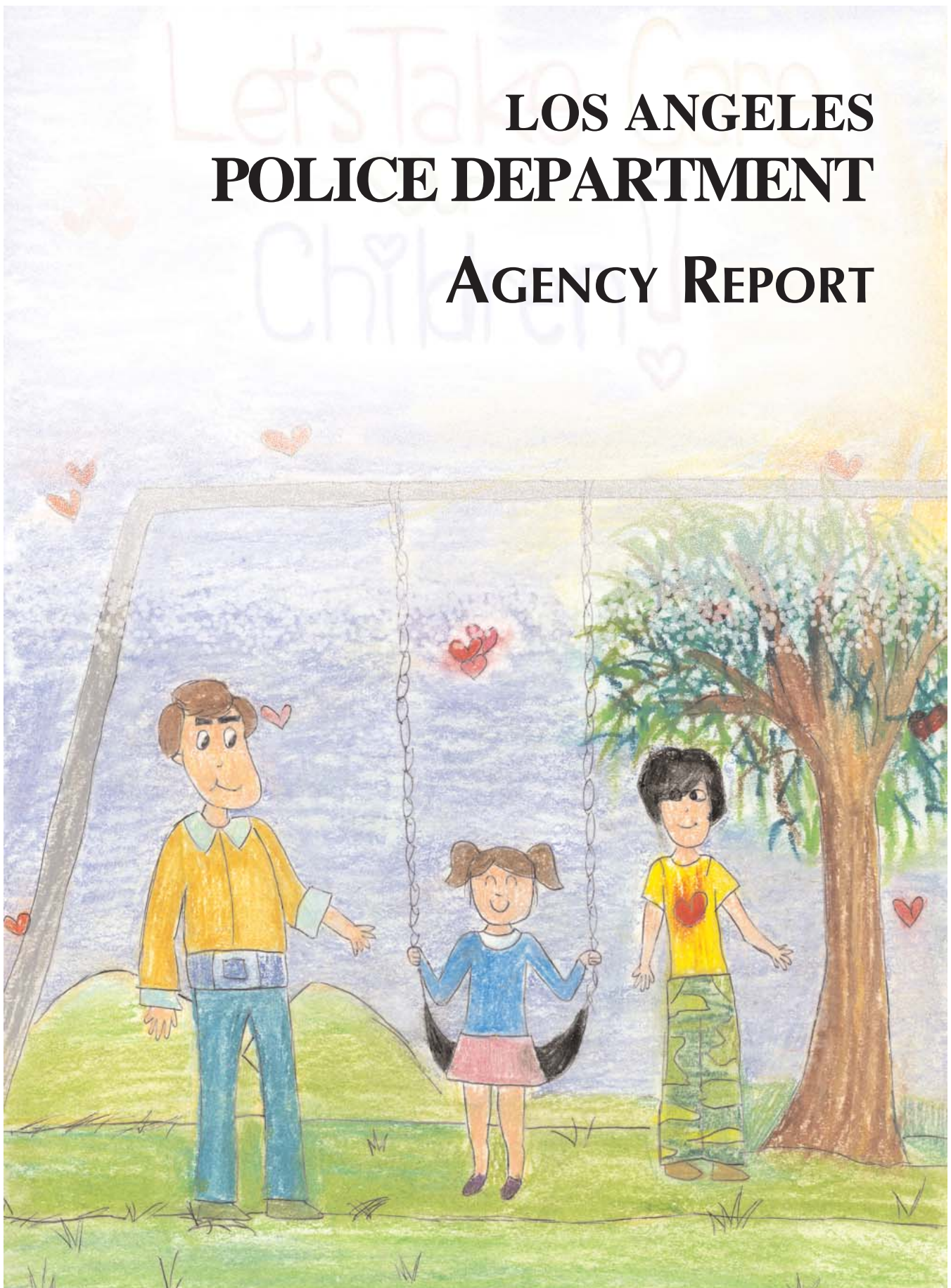
Physical Abuse (Misdemeanor) – Any physical abuse under circumstances or conditions other than those likely to produce great bodily harm or death.

Sexual Abuse – Any lewd or lascivious act involving a child. Fondling, oral copulation, and sexual intercourse are considered lewd acts.

Sexual Abuse (Felony) – Any lewd or lascivious act wherein the punishment includes the possibility of incarceration in a state prison. This includes oral copulation, rape and unlawful intercourse.

Sexual Abuse (Misdemeanor) – An act wherein the punishment is incarceration in a county jail. This usually involves an older child (16 or 17 years old).

**LOS ANGELES
POLICE DEPARTMENT
AGENCY REPORT**





LOS ANGELES POLICE DEPARTMENT (LAPD)

The Abused Child Section, Juvenile Division, was created to provide a high level of expertise to the investigation of child abuse cases. The unit investigates child abuse cases wherein the parent, step-parent, legal guardian, or common-law spouse appears to be responsible for any of the following:

- Depriving the child of the necessities of life to the extent of physical impairment;
- Physical or sexual abuse of a child;
- Homicide, when the victim is under 11 years of age;
- Conducting follow-up investigations of undetermined deaths of juveniles under 11 years of age;
- The tracking of Suspected Child Abuse Reports (SCARs);
- Assisting LAPD personnel and outside organizations by providing information, training, and evaluation of child abuse policies and procedures;
- Implementing modifications of child abuse policies and procedures as needed;
- Reviewing selected child abuse cases to ensure that LAPD policies are being followed;
- Acting as the LAPD's representative to, and maintaining liaison with, various public and private organizations concerned with the prevention, investigation, and treatment of child abuse.

SEXUALLY EXPLOITED CHILD UNIT

The Sexually Exploited Child Unit, Juvenile Division, is responsible for seeking

out and investigating violations of state laws pertaining to the sexual exploitation of children when:

- The children are under the age of 16;
- Cases involve multiple victims;
- There has been substantial, felony, sexual conduct and the suspect is in a position of trust;
- Child pornography cases, not involving the Internet, including production, distribution, or possession of child pornography;
- Complaints of possible child pornography from photography processing facilities, computer repair businesses, or community members;
- The Unit provides child exploitation advice and expertise to LAPD, including training for Department schools.

INTERNET CRIMES AGAINST CHILDREN UNIT

The Internet Crimes Against Children Unit, Juvenile Division is responsible for seeking out and investigating violations of state and federal laws pertaining to the exploitation of children when:

- The children are under the age of 16;
- There has been substantial felonious sexual conduct;
- The sexual predator used the Internet to contact the child and lure the child away for the purpose of having sex with the child;
- Child pornography cases involving the Internet, including production, distribution, and possession of child pornography;



- Child pornography websites, email Spam, and Cyber tips received from the National Center for Missing and Exploited Children (NCMEC);
- The Unit also manages the Los Angeles Internet Crimes Against Children (LAICAC) Task Force;
- Conducts Internet safety presentations for children, parents, schools, and community groups;

- Provides child exploitation advice and expertise, when the Internet is involved, to LAPD, including training for LAPD schools.

GEOGRAPHIC AREAS

LAPD maintains 19 community police stations known as geographic areas. Each area is responsible for the following

Figure 1
LOS ANGELES POLICE DEPARTMENT
JUVENILE DIVISION
2007 Crimes Investigated

Type	Number	% of Total
Physical Abuse*	1,101	47.43%
Sexual Abuse	574	24.73%
Endangering	514	22.15%
Homicide	5	0.22%
Others	127	5.47%
TOTALS	2,321	100.0%

*Includes ADW and battery

Figure 2
LOS ANGELES POLICE DEPARTMENT
GEOGRAPHIC AREAS
2007 Crimes Investigated

Type	Number	% of Total
Physical Abuse	0	0%
Sexual Abuse*	953	74.69%
Endangering**	323	25.31%
Homicide	0	0%
TOTALS	1,276	100.0%

*Includes Child Annoying

** Includes Child Abandonment

Figure 3
LOS ANGELES POLICE DEPARTMENT
JUVENILE DIVISION
2007 Crimes Investigated

Type	Number	% of Total
Injury	4,776	19.13%
Death	69	0.28%
Exploitation	59	0.24%
Internet Crime	223	0.89%
SCAR Reports	19,838	79.46%
TOTALS	24,965	100.0%

Figure 4
LOS ANGELES POLICE DEPARTMENT
NUMBER OF ARRESTS PROCESSED
by Juvenile Division in 2007

Type	Number	% of Total
Homicide (PC§187)	3	1.08%
Child Molestation (PC§288)	119	42.65%
Child Endangering (PC§273a)	26	9.32%
Child Abuse (PC§273d)	100	35.84%
Others	31	11.11%
TOTALS	279	100.0%



juvenile investigations relating to child abuse and endangering cases:

- Unfit homes, endangering, and dependent child cases;
- Child abuse cases in which the perpetrator is not a parent, step-parent, legal guardian, or common-law spouse;
- Cases in which the child receives an injury, but is not the primary object of the attack;
- Child abductions.

Figure 5
**LOS ANGELES POLICE DEPARTMENT
NUMBER OF ARRESTS PROCESSED
by Geographic Areas in 2007**

Type	Number	% of Total
Homicide (PC§187)	0	0%
Child Molestation (PC§288)	271	91.55%
Child Endangering (PC§273a)	0	0%
Child Abuse (PC§273d)	6	2.03%
Others	19	6.42%
TOTALS	296	100.0%

Figure 6
**LOS ANGELES POLICE DEPARTMENT
NUMBER OF DEPENDENT CHILDREN
Processed by Juvenile Division in 2007**

Type	Number	% of Total
WIC §300 (Physical Abuse)	NA	NA
WIC §300 (Sexual Abuse)	NA	NA
WIC §300 (Endangered)	NA	NA
TOTALS	1,492	100.0%

NOTE: Juvenile Division no longer separates 300 WIC by category. In 2007, the division handled 1,492 300 WIC §300.

Figure 7
**LOS ANGELES POLICE DEPARTMENT
NUMBER OF DEPENDENT CHILDREN
Processed by Geographic Areas in 2007**

Type	Number	% of Total
WIC §300 (Physical Abuse)	184	13.05%
WIC §300 (Sexual Abuse)	365	25.89%
WIC §300 (Endangered)	861	61.06%
TOTALS	1,410	100.0%

Figure 8
**LOS ANGELES POLICE DEPARTMENT REPORTS THE AGE CATEGORIES OF
CHILDREN WHO WERE VICTIMS OF CHILD ABUSE IN 2007**

Type	0 – 4 YRS	5 – 9 YRS	10 – 14 YRS	15 – 17 YRS	Total
Physical Abuse	115	222	107	67	511
Sexual Abuse	176	389	717	253	1,535
Endangering	552	394	311	122	1,379
TOTAL	843	1,005	1,135	442	3,425

Figure 3 indicates the number of other investigations, of a child abuse nature, conducted by Juvenile Division in 2007.



**LOS ANGELES POLICE DEPARTMENT –
2007 CHILD ABUSE FINDINGS
JUVENILE DIVISION**

1. The total investigations (crime and non-crime) conducted by the unit in 2007 (27,286) showed an increase (39.66%) over the number of investigations in 2006 (19,538).
2. Adult arrests by the unit in 2007 (279) showed an increase (48.40%) in the number of arrests made in 2006 (188).
3. The number of dependent children handled by the unit in 2007 (1,492) showed an increase (15.66%) from the number handled in 2006 (1,290).

GEOGRAPHIC AREAS

1. The total investigations conducted by the areas in 2007 (1,276) showed a decrease of (12.84%) from 2006 (1,464).
2. Adult arrests made by the areas in 2007 (296) showed a decrease of (17.55%) percent from 2006 (359).
3. The number of dependent children handled by the areas in 2007 (1,410) was an increase of (14.17%) from the number handled in 2006 (1,235).

GLOSSARY

Child – A person under the age of 18 years.

Physical Abuse – Any inflicted trauma through non-accidental means.

SCAR (Suspected Child Abuse Report) – Department of Justice Form SS 8572, is completed by Department of Children and Family Services (DCFS) personnel as well as other mandated reporters including teachers and medical health professionals.

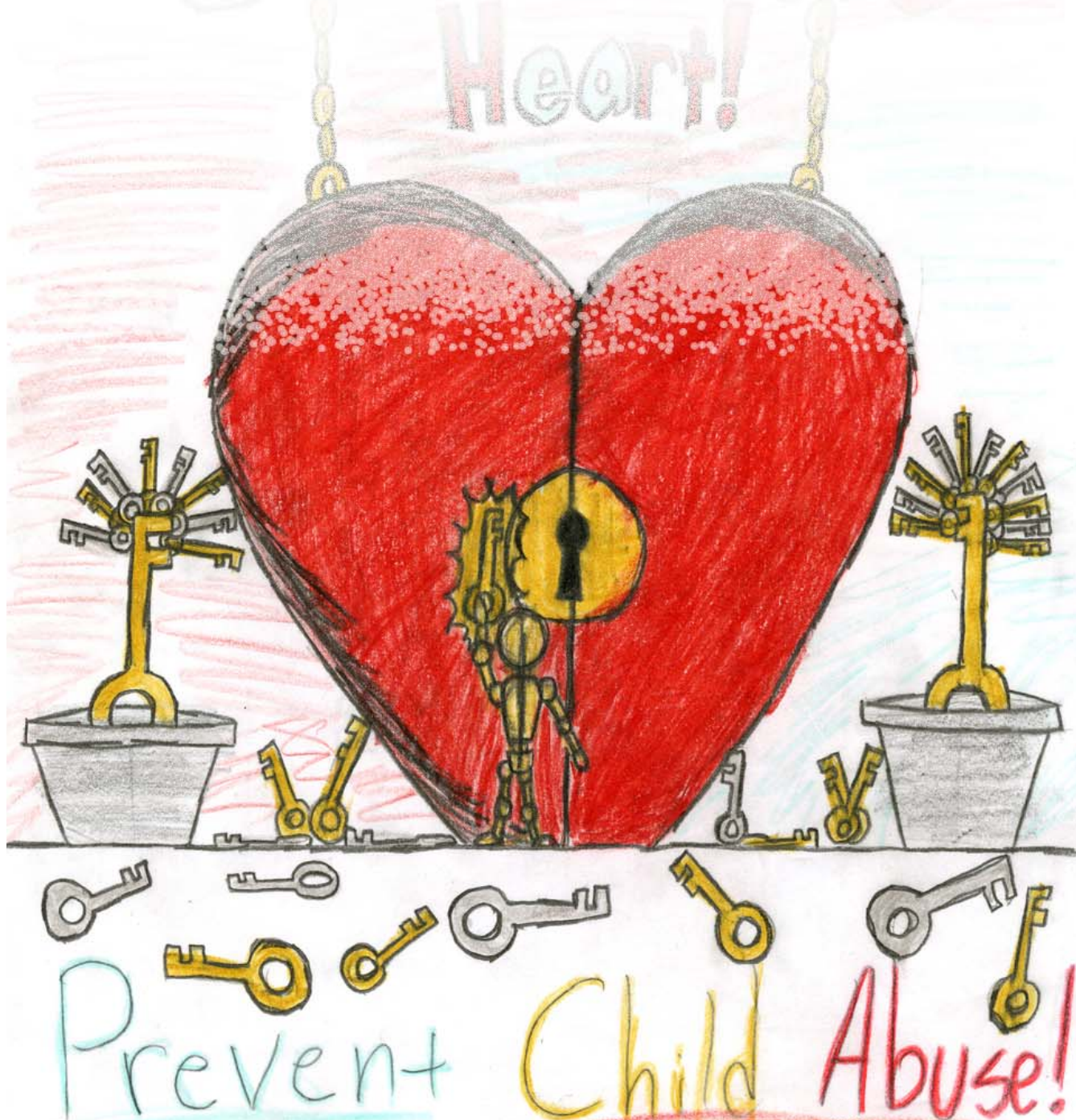
Sexual Abuse – Any touching with in a sexual context.

Sexual Exploitation – As defined by §11165, subdivision (b) (2), sexual exploitation includes conduct in violation of the following sections of the Penal Code (PC): PC §311.2 (pornography), PC§311.3 (minors and pornography), PC§288 (lewd and lascivious acts with a child), and PC§288a (oral copulation).

Figure 9			
LOS ANGELES POLICE DEPARTMENT COMPARISON OF 2006 AND 2007			
Type	2006	2007	% of Change
Total Investigations	21,002	28,562	35.99%
Total Adult Arrests	547	575	5.12%
Dependent Children	2,525	2,902	14.93%

Figure 9 indicates a comparison of 2006 and 2007 total figures from Juvenile Division and the geographic areas and the percentage of change between the two years.

**LOS ANGELES COUNTY
DISTRICT ATTORNEY'S OFFICE
AGENCY REPORT**





INTRODUCTION

Continuing under the leadership of Steve Cooley, District Attorney for Los Angeles County, the Los Angeles County District Attorney's Office (District Attorney's Office) operates with the clear mission of evaluating and prosecuting cases in a fair, evenhanded and compassionate manner. The District Attorney's Office has demonstrated its commitment to justice for all citizens of the county and is dedicated to serving the special needs of child victims and witnesses.

Every year in Los Angeles County, thousands of children are reported to law enforcement and child protective service agencies as victims of abuse and neglect. Dedicated professionals investigate allegations of sexual abuse, physical abuse, and severe neglect involving our most vulnerable citizens, our children. All too often, the perpetrators of these offenses are those in whom children place the greatest trust – parents, grandparents, foster parents, guardians, teachers, clergy members, coaches, and trusted family friends. The child victim is a primary concern of the District Attorney's Office throughout the prosecution process. Skilled prosecutors are assigned to handle these cases and victim/witness advocates are readily available to assist the children. District attorney personnel have the best interests of the child victim or witness in mind. Protection of our children is, and will continue to be, one of the top priorities of the District Attorney's Office.

The District Attorney's Office becomes involved in child abuse cases after the cases are reported to and investigated by the police. Special divisions have been created in the District Attorney's Office to handle child abuse cases. Highly skilled prosecutors with special training in working with children and issues of abuse and neglect are assigned

to these divisions. These prosecutors attempt to make the judicial process easier and less traumatic for the child victim and witness. Additionally, there are trained investigators from the District Attorney's Bureau of Investigation and skilled advocates of the Victim/Witness Assistant Program who work with the prosecutors to ensure justice for our youngest victims of crime.

The District Attorney's Office prosecutes all felony crimes committed in Los Angeles County, all juvenile delinquency offenses, and misdemeanor crimes in the unincorporated areas of the County or in jurisdictions where cities have contracted for such service. Felonies are serious crimes for which the maximum punishment under the law is either state prison or death; misdemeanors are crimes for which the maximum punishment is county jail. Cases are referred by law enforcement agencies or by the Grand Jury. The District Attorney's Office is the largest local prosecuting agency in the nation with 2,165 permanent employees and 167 temporary employees. Of the permanent employees, 1,058 are full-time attorneys and 23 are part-time attorneys. In 2007, the District Attorney's Office reviewed 102,739 felony cases; 66,596 were filed and 36,143 were declined for filing. The District Attorney's Office reviewed 148,466 misdemeanor cases; 130,111 were filed and 18,355 were declined for filing.

THE DISTRICT ATTORNEY AND CHILDREN IN THE CRIMINAL JUSTICE SYSTEM

Because children are among the most defenseless victims of crime, the law provides special protection for them. Recognizing the special vulnerability and needs of child victims, the District Attorney's Office has mandated that all felony cases involving child physical



abuse/endangerment, child sexual abuse or exploitation, and child abduction are vertically prosecuted. Vertical prosecution involves assigning specially-trained, experienced prosecutors to handle all aspects of a case from filing to sentencing. In some instances, these deputy district attorneys (DDA) are assigned to special divisions (Family Violence Division, Sex Crimes Division, Child Abduction Section, or Abolish Chronic Truancy). In other instances, the DDAs are designated as special prosecutors assigned to the Victim Impact Program (VIP) in Branch Offices (Airport, Alhambra, Antelope Valley, Compton, Long Beach, Norwalk, Pasadena, Pomona, San Fernando, Torrance/South Bay Child Crisis Center, and Van Nuys) or the Domestic Violence Unit within the Central Trials Division.

The vast majority of cases are initially presented to the District Attorney's Office by a local law enforcement agency. When these cases are subject to vertical prosecution under the above criteria, the detective presenting the case is directed to the appropriate DDA for initial review of the police reports. In cases where the child victim is available and it is anticipated that the child's testimony will be utilized at trial, it is strongly encouraged that a pre-filing interview is conducted involving the child, the assigned DDA, and the investigating officer because it is essential to establish rapport between the child and the DDA assigned to evaluate and prosecute the case. In cases alleging sexual abuse of a child, the interview is required absent unusual circumstances. The interview provides the child with an opportunity to get to know the prosecutor and allows the prosecutor the opportunity to assess the child's competency to testify. The court will only allow the testimony of a witness who can demonstrate that he or she has the ability to recollect and

recall and can understand and appreciate the importance of relating only the truth while on the witness stand. Ordinarily, this is established by taking an oath administered by the clerk of the court. The law recognizes that a child may not understand the language employed in the formal oath and thus provides that a child under the age of 10 may be required only to promise to tell the truth [Evidence Code (EC) §710]. The pre-filing interview affords the DDA an opportunity to determine if the child is sufficiently developed to understand the difference between the truth and a lie, knows that there are consequences for telling a lie while in court, and can recall the incident accurately.

The pre-filing interview will also assist in establishing whether the child will cooperate with the criminal process and, if necessary, testify in court. The victim of a sexual assault (whether an adult or child victim) cannot be forced to testify under threat of contempt [Code of Civil Procedure (CCP) §1219]. If the child who is the victim of sexual assault does not wish to speak with the deputy or is reluctant to commit to testifying in court and his or her testimony is required for a successful prosecution, then the child's decision will be respected and no case will be filed. In all cases involving a child victim, every effort will be made to offer support to the child through the presence of an advocate from the District Attorney's Office's Victim/Witness Assistance Program. The victim/witness advocate will work closely with the child and the child's family (if appropriate) to ensure that they are informed of the options and services available to them such as counseling or medical assistance.

After reviewing the evidence presented by the investigating officer from the law enforcement agency, the DDA must determine



that four basic requirements are met before a case can be filed:

1. After a thorough consideration of all pertinent facts presented following a complete investigation, the prosecutor is satisfied that the evidence proves that the accused is guilty of the crime to be charged;
2. There is legally sufficient, admissible evidence of the basic elements of the crime to be charged;
3. There is legally sufficient, admissible evidence of the accused's identity as the perpetrator of the crime charged;
4. The prosecutor has considered the probability of conviction by an objective fact finder and has determined that the admissible evidence is of such convincing force that it would warrant conviction of the crime charged by a reasonable and objective fact finder after hearing all the evidence available to the prosecutor at the time of charging and after considering the most plausible, reasonably foreseeable defense inherent in the prosecution evidence.

If a case does not meet the above criteria, the DDA will decline to prosecute the case and write the reasons for the declination on a designated form. The reasons can include, but are not limited to: a lack of proof regarding an element of the offense; a lack of sufficient evidence establishing that a crime occurred or that the accused is the perpetrator of the offense alleged; the victim is unavailable or declines to testify; or the facts of the case do not rise to the level of felony conduct. When the assessment determines that at most misdemeanor conduct has occurred, the case is either referred to the appropriate city

attorney or city prosecutor's office or, in jurisdictions where the District Attorney prosecutes misdemeanor crimes, the case is filed as a misdemeanor.

Once a determination has been made that sufficient evidence exists to file a case, the DDA will employ special provisions that are designed to reduce the stress imposed upon a child during the court process. When a child under the age of 11 is testifying in a criminal proceeding in which the defendant is charged with certain specified crimes, the court, in its discretion, may:

- allow for reasonable breaks and relief from examination during which the child witness may leave the courtroom [PC §868.8(a)]
- remove its robe if it is believed that such formal attire may intimidate the child [PC §868.8(b)]
- relocate the parties and the courtroom furniture to facilitate a more comfortable and personal environment for the child witness [PC §868.8(c)]
- provide for testimony to be taken during the hours that the child would normally be attending school [PC §868.8(d)]

These provisions come under the general directive that the court ". . . shall take special precautions to provide for the comfort and support of the minor and to protect the minor from coercion, intimidation, or undue influence as a witness. . . ." provided in the Penal Code (PC §868.8).

There are additional legal provisions available to better enable children to speak freely and accurately of the experiences that are the subject of judicial inquiry:



- the court may designate up to two persons of the child’s own choosing for support, one of whom may accompany the child to the witness stand while the second remains in the courtroom [PC §868.5(a)];
- each county is encouraged to provide a room, located inside of, or within a reasonable distance from, the courthouse, for the use of children under the age of 16 whose appearance has been subpoenaed by the court [PC §868.6(b)];
- the court may, upon a motion by the prosecution and under limited circumstances, permit a hearing closed to the public [PC §§868.7(a) and 859.1] or testimony on closed-circuit television or via videotape (PC §1347);
- the child must only be asked questions that are worded appropriately for his or her age and level of cognitive development [EC §765(b)];
- the child must have his or her age and level of cognitive development considered in the evaluation of credibility (PC §1127f); and the prosecutor may ask leading questions of the child witness on direct examination. [EC §767(b)]

SPECIALLY TRAINED PROSECUTORS WORKING WITH CHILDREN IN THE CRIMINAL JUSTICE SYSTEM

DDAs who are assigned the challenge of prosecuting cases in which children are victimized receive continuing special training throughout their assignment to enhance their ability to effectively prosecute these cases. These DDAs work very closely with victim advocates from the Los Angeles County District Attorney’s Victim/Witness Assistance Program and other agencies to diminish the

potential for additional stress and trauma caused by the experience of the child’s participation in the criminal justice system.

SPECIAL DIVISIONS AND PROGRAMS

The District Attorney’s Office has formed a system of special divisions and programs designed either specifically for the purpose of, or as part of their overall mandate, to recognize the special nature of prosecutions in which children are involved in the trial process as either victims or witnesses.

ABOLISH CHRONIC TRUANCY

The Abolish Chronic Truancy (ACT) Program is a District Attorney’s Office crime prevention/ intervention program that enforces compulsory education laws by focusing on parental responsibility and accountability. ACT targets parents and guardians of elementary school-aged children who are in danger of becoming habitually truant. By addressing the problem early on, during a stage of development when parents have greater control over the behavior of their children, the chances of students developing good attendance habits are increased. Likewise, the likelihood of truancy problems emerging in middle and high school years, a leading precursor to juvenile delinquency and later adult criminality, are decreased. Losing days of learning in elementary school years can cause children to fall behind in their education. It is often difficult for these truant students to catch up and compete academically with their peers. When the successes for a student are few at school, attendance predictably drops, and the cycle of truancy becomes entrenched.

ACT partners with elementary schools throughout Los Angeles County. Among ACT’s goals are promoting a greater under-



standing of the compulsory education laws, increasing the in-seat attendance of children at school, and making appropriate referrals to assist families who are not in compliance with school attendance laws. Through a series of escalating interventions, the message consistently conveyed by District Attorney representatives is that parents must get their children to school every day and on time because it is good for the child and for the community and because it is the law. ACT seeks to reform not only the attendance habits of individual students, but to redefine the "school's culture" of "zero tolerance" for school truancy.

The ACT Program is now in partnership with 359 schools in Los Angeles County, representing 30 school districts. During the 2007-2008 school year, ACT was able to expand into previously under- or unserved areas in the Antelope Valley and South Los Angeles.

In February 2008, the second Countrywide Chronic Truancy Symposium was held. It represented a collaboration between many different public and governmental agencies, including the Los Angeles County District Attorney's Office; the Los Angeles County Probation Department; the Los Angeles City Attorney's Office; the Los Angeles Superior Court; the Los Angeles County Office of Education; the Los Angeles Unified School District; the Los Angeles Police Department; the Los Angeles School Police Department; and the Los Angeles County Sheriff's Department. The event was hailed as an overwhelming success and it drew almost 575 attendees. The idea for the symposium originated with the District Attorney's Office's ACT Program which also took the primary role in its planning. Planning for the 2009 Symposium is currently underway. In

October 2007, these accomplishments were recognized when the ACT Program was honored as a Top Ten Award Winner at the 21st Annual Los Angeles County Quality and Productivity Awards ceremony.

CHILD ABDUCTION SECTION

Child abduction cases involve cross-jurisdictional issues covering criminal, dependency, family law, and probate courts. The victim of the crime is the lawful custodian of the child. It is essential for the child who had been abducted to be treated with particular sensitivity and understanding during the prosecution of these cases. The Child Abduction Section handles all child abduction cases under PC §§278 and 278.5, which includes stranger, parental, relative, and other cases. In addition, the Child Abduction Section handles all cases arising under the Hague Convention on the Civil Aspects of International Child Abduction. Signatory countries to this international treaty require that children be returned to their country of habitual residence under specified court procedures. California law has granted District Attorneys the authority to take all actions necessary, using criminal and civil procedures, to locate and return the child and the person violating the custody order to the court of proper jurisdiction.

Services available to the public are explained on the District Attorney's Office's website (www.da.lacounty.gov). The questionnaire that needs to be completed to obtain Family Code services can be downloaded and filled out in the privacy of the home and then brought to our downtown office located at 320 W. Temple Street, Los Angeles, CA 90012. At the end of 2007, the Child Abduction Section was pursuing abductors in 292 open



criminal cases. During 2007, district attorney investigators (DAI's) initiated 209 new cases under the Family Code, while closing 203 cases. At the conclusion of 2007, the Child Abduction Section was pursuing abductors on behalf of the Family Court in 54 open cases.

Under the terms of the Hague Convention, the Child Abduction Section assisted in the location and recovery of children abducted from other countries and brought to Los Angeles County in 32 cases. The Child Abduction Section also assisted eight county residents in recovering their children from other countries through the use of the treaty.

The Child Abduction Section conducted numerous training sessions for law enforcement and others throughout 2007. A key purpose of the training sessions was to overturn the common misconception that a parent cannot be criminally prosecuted for abducting his or her own child. The training was designed to provide the necessary information to first responders and investigating officers in order to properly investigate and file these potentially serious felony cases with the Child Abduction Section.

FAMILY VIOLENCE DIVISION

The Family Violence Division (FVD) was established in July of 1994. FVD is responsible for the vertical prosecution of felony domestic violence and child physical abuse/endangerment cases in the Central Judicial District. At times, FVD deputies travel to different judicial districts within the County of Los Angeles to vertically prosecute intimate partner and child homicide cases. Allocating special resources to abate serious spousal abuse in Los Angeles County was prompted by the 1993 Department of Justice report which found that one-third of the domestic violence calls in the State of

California came from the County of Los Angeles. Children living in homes where domestic violence occurs are often subjected to physical abuse as well as the inherent emotional trauma that results from an environment of violence in the home. FVD's staff includes DDAs, district attorney investigators, two paralegals, two victim/witness advocates, two witness assistants, and clerical support staff. All of the staff is specially trained to deal sensitively with family violence victims. The goal is to make certain that the victims are protected and that their abusers are held justly accountable in a court of law for the crimes they commit. FVD specializes in domestic and child homicides and attempted homicides and serious and recidivist offenders of family violence. FVD's staff is actively involved in legislative advocacy and many interagency prevention, intervention, and educational efforts throughout the county. Consistent with its mission, FVD continues to bring a commitment to appreciating the seriousness of the cases and respecting the victims in the prosecution of family violence cases; this was very much needed for the criminal justice system to do its part in stopping the cycle of violence bred from domestic violence and child abuse. As in past years, the percentage of the child abuse related felonies prosecuted where there were also charges alleging a violation of PC §273.5, Spousal Abuse, remains significant. This data does not take into account the number of cases in which a child is listed as a witness to the offense charged in a domestic violence case, including cases in which a child is the sole witness to one parent murdering the other.

A significant portion of the work done by FVD staff involves the prosecution of felony child physical abuse/endangerment cases. Injuries inflicted upon the children include



bruises, scarring, burns, broken bones, brain damage, and death. In many instances, the abuse was long-term; there are instances, however, wherein a single incident of abuse may result in a felony filing. At the conclusion of 2007, FVD was in the process of prosecuting 13 murder cases involving child victims. When a murder charge under PC §187 is filed involving a child victim under the age of eight alleging child abuse leading to the death of the child, a second charge alleging a violation of PC §273ab is also filed in most instances. It is extremely difficult to convict a parent of murdering their child because jurors must find that the parent acted with malice and intended to kill their child. In cases alleging the abuse of a child under eight leading to death, the jury need not find that the parent intended to kill the child. It is sufficient for the jury to find that the parent intended or permitted the abuse that led to the death of the child in order to convict. The punishment for violating PC §273ab is a sentence of 25 years to life in state prison – the same punishment for a conviction of first degree murder.

In child homicide cases where one parent, guardian, or caregiver kills a child, the law provides that the passive parent, guardian, or caregiver may, in some circumstances, be charged with the same crime as the person who actually inflicted the fatal injuries. The passive parent is one who has a duty of care for the child, knows he or she has that duty of care, and intentionally fails to perform that duty of care. In 2007, an FVD DDA prosecuted a case against a mother who knew that her spouse was a danger to their children, but left their son in the defendant's care. Although the mother knew or should have known that the defendant was abusing the toddler because she was in the same apartment as the defendant and toddler when the torture

was occurring, the mother did not come to the aid of her child. After the toddler died, the mother helped the defendant attempt to cover-up the crime. Because there were no statutes on point, the DDA argued case law which discussed common law to support the charges against the mother. In 2008, the appellate court upheld the verdict and the California Supreme Court declined to review it, so the published portion of the opinion in *People v. Rolon* (2008), 160 Cal.App.4th 1206 may now be cited as precedent in these types of cases.

FVD attorneys also prosecute cases where a mother gives birth and then kills the baby or allows the baby to die. These crimes are typically committed with no witnesses present. The prosecution relies on medical evidence to prove that the child was born alive – the threshold issue in infanticide cases.

FVD utilizes all tools available to determine the appropriate charges to file. FVD, along with the VIP Divisions in Branch and Area Operations, and the Sex Crimes Division, utilize the Family and Child Index (FCI) to determine what, if any, contacts the child victim or his or her family has had with other Los Angeles County agencies. Additionally, DDAs who handle crimes with children as victims access the Suspected Child Abuse Report repository maintained by the District Attorney's Office. The Office is anticipating the completion of E-SCARS, an electronic system that will be accessible by many different governmental agencies to review SCAR reports. FVD attorneys also request Department of Children and Family Services (DCFS) records to assist in the prosecution of child abuse/endangerment and child homicide cases.

In addition to the work done in the courtroom, the DDAs in the unit speak to



various government agencies and community based organizations on the topic of mandated reporting. Under the Child Abuse and Neglect Reporting Act [PC §11164, et seq.], people in specified professions must report child abuse where there have reasonable objective suspicions that it is occurring. Failure of the mandated reporter to file the necessary report with law enforcement or the child protective agency may result in misdemeanor prosecution. The attorneys in this division also train deputies in other units within the District Attorney's Office to ensure the uniform treatment of child abuse cases.

FVD deputies collaborate with multidisciplinary teams to improve the understanding of child abuse and endangerment cases and child homicide cases. FVD members are active members of the ICAN Child Death Review Team, ICAN Policy and Operations Committees, the ICAN Guidelines to Effective Response to Domestic Abuse (GERDA) Committee, the ICAN Los Angeles County Child Abuse and Neglect Protocol Committee, The ICAN Data Committee, the ICAN Legislative Committee, and the Children's Planning Council.

FVD DDAs also are instrumental in reviewing new legislation. In 2000, the Safely-Surrendered Newborn Law passed. This law has the overarching goal of saving the lives of newborn children at risk of being discarded by their parent. The intent of the law is to provide the option to the parent to safely and anonymously surrender the newborn to any employee on duty at a public or private hospital emergency room or additional location approved by the board of supervisors. The District Attorney's Office drafted three amendments to what is now codified in PC §271.5.

In 2007, FVD and the Sex Crimes Division reviewed and made recommendations on 59

bills aimed at protecting victims of intimate partner battering and child abuse and neglect. Notably, attorneys from the District Attorney's Office and the Los Angeles County Counsel's Office partnered to draft legislation regarding information-sharing between certain government agencies. ICAN co-sponsored the legislation. AB 1687 amends Civil Code §56.10 by adding §56.103. The new law allows a healthcare provider to disclose medical information to a county social worker, probation officer, or any other person who is legally authorized to have custody or care of a minor for the purpose of coordinating healthcare services and medical treatment provided to the minor.

SEX CRIMES DIVISION

The Sex Crimes Division is comprised of three separate sections: the Sex Crimes Section, the Sexually Violent Predator (SVP) Section, and Stuart House.

Sex Crimes Section

DDAs assigned to the Sex Crimes Section vertically prosecute all felony sexual assaults occurring in the Central Judicial District and may handle other serious cases in judicial districts throughout the County of Los Angeles. DDAs handle cases involving both adult and child victims. The DDAs work closely with a victim/witness advocate assigned to the Sex Crimes Section who has received specialized training in this difficult work. As previously indicated, in cases alleging sexual abuse of a child, a pre-filing interview is conducted with the child victim, the DDA assigned to the case, the detective assigned to the case from the law enforcement agency and, frequently, the victim/witness advocate. This interview is important both to build rapport with the child and to establish the number and types of charges that can be filed.



Because many cases of child sexual assault are committed by individuals in the child's home, the Department of Children and Family Services (DCFS) and Dependency Court are often involved with a child who is the victim in the criminal prosecution. The DDA vertically prosecuting the criminal case is required to make contact with relevant individuals and obtain relevant records in connection with DCFS and Dependency Court proceedings. It is important that the criminal justice system and dependency system work together to minimize trauma to the child and arrive at a just result in criminal court as well as a safe and supportive placement for the child.

The DDA assigned to the case is responsible for making the filing decision and insuring that the case is properly filed and arraigned. This DDA also conducts the preliminary hearing and appears at all stages of the case in Superior Court, including the jury trial. Contact with the victim and the victim's family is essential throughout this process. If there are discussions with the defense attorney regarding a possible case resolution before preliminary hearing or trial, the DDA will advise the child and the child's parents or guardian of the pending disposition to seek their input before formalizing the disposition in court. At the time of sentencing, the child and/or the child's parents or guardian are by law entitled to have an opportunity to address the court regarding the impact the defendant's crime has had on the child.

Sexual assault of a child under 14 is usually filed as a violation of PC §288, defined as lewd and lascivious acts. A probationary sentence may not be imposed for this offense unless and until the court obtains a report from a reputable psychiatrist or psychologist who evaluates the mental condition of the

defendant pursuant to PC §288.1. If, in evaluating the report, the court and the DDA find that the interests of justice and the safety of the community are served by imposing a probationary sentence, the defendant will receive a suspended sentence which will include, but not be limited to, the following terms and conditions of probation for a five year period: confinement for up to a year in county jail; counseling to address the defendant's psychological issues; an order from the court to stay away from the victim; a separate order not to be in the presence of minor children without the supervision of an adult; and restitution to the victim. If the defendant violates any of the terms and conditions of probation, a state prison sentence may then be imposed. In the alternative, depending on the nature of the offenses, a defendant may be sentenced directly to state prison. As part of any sentence, whether state prison or probation is initially imposed, the defendant is ordered to register as a sex offender upon release from custody with the local law enforcement agency in his area of residence. The registration must be updated annually and this is a lifetime obligation placed upon the offender.

Sexually Violent Predator Section

The Sexually Violent Predator (SVP) Section handles cases in which the District Attorney's Office seeks a civil commitment in a mental hospital for individuals who have been convicted of a sexually violent criminal act against an adult or child victim, and who also have a current diagnosed mental disorder that makes it likely that they will engage in sexually violent behavior if they are released into the community. A true finding by a jury under the SVP law results in the offender receiving an indeterminate commitment to a



state hospital at which he or she will be given the opportunity to participate in a mental health program designed to confront and treat the disorder. The offender may periodically apply for release into the community. If it is determined that the offender presents a continued threat to the safety of the community, SVP commitment will continue. The SVP law authorizes conducting these proceedings without renewed testimony from the victims previously traumatized by the offender's prior predatory behavior.

Stuart House

Stuart House is a multi-disciplinary center located in Santa Monica that responds to incidents of child sexual assault. It is considered a state-of-the-art center where the various disciplines involved in the response to and incident of child abuse are housed in one location. Stuart House staff includes DDAs, law enforcement officers, certified social workers, victim advocates, and therapists. Medical exams are performed by an expert in child sexual abuse at a hospital only one block away. This model significantly reduces trauma to the child by reducing the number of interviews that a child must endure by allowing all necessary members of the multi-disciplinary team to observe one interview conducted by a selected member of the team. The presence of all team members at one location provides enhanced communication and coordination. As with cases in the Sex Crimes Section, all cases at Stuart House are vertically prosecuted.

BRANCH AND AREA OPERATIONS - VICTIM IMPACT PROGRAM

A majority of the DDAs assigned to vertically prosecute cases in which children are victimized are assigned directly to Branch Offices with a caseload that covers

both adult and child victims. The Branch and Area Victim Impact Program (VIP) obtains justice for victims through vertical prosecution of cases involving domestic violence, sex crimes, stalking, elder abuse, hate crimes, and child physical abuse/endorsement. VIP represents a firm commitment of trained and qualified deputies to prosecute crimes against individuals often targeted as a result of their vulnerability. The goal of the program is to obtain justice for victims while holding offenders justly accountable for their criminal acts. Each of the 11 Branches designates an experienced DDA to act as the VIP Coordinator. The Coordinator works closely with the assigned DDAs to ensure that all cases are appropriately prepared and prosecuted. All VIP DDAs receive enhanced training designed to cover updated legal issues, potential defenses, and trial tactics.

In the Torrance Branch, DDAs assigned to VIP are given the specific assignment of specializing in the prosecution of cases involving child victims as part of a Multi-Disciplinary Interview Team.

Multi-Disciplinary Centers in Branch and Area Operations

Multi-Disciplinary Centers provide a place and a process that involves a coordinated child sensitive investigation of child sexual abuse cases by professionals from multiple disciplines and multiple agencies. Emphasis is placed on the child interview, within the context of a team approach, for the purpose of reducing system related trauma to the child, improving agency coordination, and ultimately aiding in the prosecution of the suspect. The Children's Advocacy Center for Child Abuse Assessment and Treatment in Pomona and the South Bay Child Crisis Center in Torrance are two programs that



follow this model, similar to Stuart House in Santa Monica.

Children's Advocacy Center for Child Abuse Assessment and Treatment (Children's Advocacy Center)

The Children's Advocacy Center provides an array of services for children who live in the Pomona and East San Gabriel Valleys. Professional forensic interviews are conducted at the Children's Advocacy Center of children who witness criminal acts and/or are victims of sexual or physical abuse. While these interviews are being conducted, prosecutors from Pomona Branch's VIP Team, law enforcement officers, and child protective services workers sit behind a one-way mirror and provide input for follow-up questioning. This approach allows each agency to fulfill their respective mission, yet minimizes the number of times the child must be interviewed. The interviews are conducted in a child-friendly and culturally-sensitive manner.

The forensic interviews are conducted by trained professionals and are digitally recorded. Research has shown that skillful, age-appropriate questioning improves the accuracy and truthful nature of child interviews. Besides prosecutors, other professionals in this multi-disciplinary team include forensic interviewers, law enforcement officers, mental health professionals, medical personnel, victim-advocates, and child protective services workers. In addition to attending the actual interview, prosecutors attend routine case review sessions. The Children's Advocacy Center's facilities have also been used to assist in the preparation and presentation of a Victim Impact Statement in court by young victims of child abuse.

Planning for the Children's Advocacy Center began in 2002 as a collaborative

effort by local professionals working in the field of child abuse, including Los Angeles County DDAs. The Children's Advocacy Center was organized as a non-profit corporation and opened its doors in July 2004. By November 2007, it had achieved national accreditation from the National Children's Alliance. To date, it has provided services for over 600 children and their families. The vast majority of clients are girls under the age of 12.

DOMESTIC VIOLENCE COURTS

In certain judicial districts, the presiding judge has mandated that courts designated as Domestic Violence Courts be instituted. These courtrooms are dedicated to handling strictly domestic violence-related cases from arraignment through sentencing. It is strongly encouraged that the DDAs assigned to these courts are experienced prosecutors with special training in the area of family violence.

JUVENILE DIVISION

The District Attorney's Office is also charged with the responsibility of petitioning the court for action concerning juvenile offenders who perpetrate crimes in Los Angeles County. The Los Angeles County Probation Department (Probation), law enforcement, the Los Angeles County Office of the Public Defender (Public Defender), and the Los Angeles Superior Court Juvenile Division (juvenile delinquency court) are also involved in the process of combating juvenile delinquency. In the juvenile justice system, the schools, law enforcement, and Probation all work actively to monitor and mentor youths who appear on the threshold of involvement in serious criminal activity.

In most instances involving juvenile violators, informal means of addressing



criminal activity are employed without intervention from the District Attorney's Office or the juvenile delinquency court. Minors can be counseled and released; placed in informal programs through the school, law enforcement agency, or Probation; referred to Probation for more formal processing; or referred to the District Attorney's Office for filing consideration pursuant to Welfare and Institutions Code (WIC) §626. In many instances, a deputy probation officer (DPO) assigned to review a referral from law enforcement will decide to continue to handle the matter informally and reserve sending the referral for review to the District Attorney's Office. If the minor complies with the terms of informal supervision, the case does not come to the attention of the District Attorney's Office or the juvenile delinquency court; if the minor fails to comply, the DPO could then decide to refer the case for filing consideration.

If law enforcement submits a request to Probation for a petition to be submitted for filing regarding allegations involving serious felony criminal activity under WIC §707; a second felony referral for a minor under the age of 14; a felony referral for a minor 14 years of age or older; an offense involving sale or possession for sale of a controlled substance; possession of narcotics on school grounds; assault with a deadly weapon upon a school employee; possession of a firearm or a knife at school; certain instances of gang activity; car theft by a minor 14 years or older at the time of the offense; an offense involving over \$1,000 of restitution to the victim, or if the minor has previously been placed on informal probation and has committed a new offense, the petition must be submitted to the District Attorney's Office immediately and cannot be handled informally by Probation (WIC §§652 and 653.5).

The Juvenile Division of the District Attorney's Office is under the auspices of the Bureau of Specialized Prosecutions. The Juvenile Division is divided into two sections along geographical lines – North and South. North offices include Antelope Valley Juvenile, Eastlake Juvenile, Pasadena Juvenile, Pomona Juvenile, and Sylmar Juvenile. South offices include Compton Juvenile, Inglewood Juvenile, Kenyon Juvenile Justice Center, Long Beach Juvenile, and Los Padrinos Juvenile.

There are three Juvenile Halls in Los Angeles County. They are located in Sylmar (Barry J. Nidorf Juvenile Hall), East Los Angeles (Central Juvenile Hall), and Downey (Los Padrinos Juvenile Hall). They are all under the supervision of Probation. Minors (individuals under the age of 18 alleged to have violated WIC §§601 or 602) cannot be detained in custody with adults.

If a minor is delivered by law enforcement to probation personnel at a juvenile hall facility, the DPO to whom the minor is presented determines whether the minor remains detained. If a minor 14 years of age or older is accused of personally using a firearm or having committed a serious or violent felony as listed under WIC §707(b), detention must continue until the minor is brought before a judicial officer. In all other instances, the DPO can only continue to detain the minor if one or more of the following is true: the minor lacks proper and effective parental care; the minor is destitute and lacking the necessities of home; the minor's home is unfit; it is a matter of immediate and urgent necessity for the protection of the minor or a reasonable necessity for the protection of the person or property of another; the minor is likely to flee; the minor has violated a court order; or the minor is physically dangerous



to the public because of a mental or physical deficiency, disorder or abnormality (if the minor is in need of mental health treatment, the court must notify the Department of Mental Health).

If one or more of the above factors are present but the DPO deems that a 24-hour secure detention facility is not necessary, the minor may be placed on home supervision (WIC §628.1). Under this program, the minor is released to a parent, guardian, or responsible relative pursuant to a written agreement that sets forth terms and conditions relating to standards of behavior to be adhered to during the period of release. Conditions of release could include curfew, school attendance requirements, behavioral standards in the home, and any other term deemed to be in the best interest of the minor for his or her own protection or the protection of the person or property of another. Any violation of a term of home supervision may result in placement in a secure detention facility subject to a review by the court at a detention hearing.

If the minor is detained, a DDA must make a decision on whether to file a petition within 48 hours of arrest (excluding weekends and holidays). A detention hearing must be held before a judicial officer within 24 hours of filing [WIC §§ 631(a) and 632]. When a minor appears before a judicial officer for a detention hearing, the court must consider the same criteria as previously weighed by the DPO in making the initial decision to detain the minor. There is a statutory preference for release if reasonably appropriate (WIC §§202 and 635). At the conclusion of the detention hearing, the court may release the minor to a parent or guardian; place the minor on home supervision; detain in a non-secure facility (foster home); or detain the minor in a secure facility.

A minor may be found an unfit subject for consideration under juvenile court law and may have his case remanded to adult court to face trial as an adult. Under WIC §707, the court must consider each of the following factors in determining whether the minor's case remains in juvenile court: the degree of criminal sophistication exhibited by the minor; whether the minor can be rehabilitated prior to the expiration of the juvenile court's jurisdiction; the minor's previous delinquent history; the success of previous attempts by the juvenile court to rehabilitate the minor; and the circumstances and gravity of the offense alleged to have been committed by the minor. Minors age 14 years and over who personally commit murder are presumed to be unfit. Minors age 16 years and over are presumed unfit if they commit a serious or violent offense as listed in WIC §707(b) (such as arson; robbery; rape with force or violence; sodomy by force or violence; forcible lewd and lascivious acts on a child under the age of 14; oral copulation by force and violence; kidnapping for ransom; attempted murder, etc.). Minors age 14 or 15 years who commit an offense listed in WIC §707(b) are also subject to a fitness petition alleging that they should not receive the protections of the juvenile court but, during the course of the hearing, they are presumed to be fit. The importance of the presumption is that at the beginning of the hearing, the party with the presumption has the advantage when the court begins the weighing process. In instances where the minor has the presumption of fitness, the burden is on the DDA to present substantial evidence that the minor is unfit and should be remanded to adult court.

On March 7, 2000, the California electorate passed Proposition 21, the Gang Violence and Juvenile Crime Prevention Initiative.



This initiative became effective on March 8, 2000 and applies to prosecutions of crimes committed on or after March 8, 2000. It significantly amended California law regarding the means by which a minor could be prosecuted in adult court. Section 26 of Proposition 21 amended WIC §707(d). The primary impact under this section is to permit the prosecuting authority, in its discretion, to file against minors directly in adult court when certain crimes are alleged. WIC §602(b) was also amended by the initiative to mandate that the prosecuting agency file cases involving a minor age 14 years or older who is alleged to have committed certain crimes directly in adult court, thus bypassing the fitness process ordinarily required.

Under the discretionary direct file mechanism for trying minors in adult court, if a minor is age 16 or older and commits an offense listed in WIC §707(b), the prosecutor may file directly in adult court. Under the mandatory direct file mechanism, if a minor age 14 or older is charged with one or more of the following offenses, the case must be filed in adult court:

- A first degree murder (PC §187) with special circumstances, if it is alleged that the minor personally killed the victim or
- Forcible sexual assaults alleged pursuant to PC §667.61, if it is alleged that the minor personally committed the offense.

In cases where direct filing against a minor in adult court is discretionary, the policy of the District Attorney's Office is to use this power selectively. If a minor is believed to be an unfit subject to remain in juvenile court, reliance upon the use of the traditional fitness hearing conducted under the

provisions of WIC §707(a)-(c) is the preferred means of achieving this result. In those instances when a direct filing in adult court is deemed necessary for reasons of judicial economy or to ensure a successful prosecution of the case, the discretionary powers provided under WIC §707(d) will be employed.

If a minor's case remains in juvenile court, the minor has a right to an adjudication. The adjudication is similar to a court trial. Minors do not have a right to a jury trial. The minor does have a right to counsel, to confront and cross-examine the witnesses against him or her, and the privilege against self-incrimination. The court must be convinced beyond a reasonable doubt that the minor committed the offense alleged in the petition. The DDA has the burden of proof in presenting evidence to the court. If the court has been convinced beyond a reasonable doubt of the allegations in the petition, the petition is found true. If the court is not convinced, the petition is found not true. There is no finding of guilty or not guilty. If the minor is age 13 or younger, proof that the minor had the capacity to commit the crime must be presented by the DDA as such individuals are not presumed to know right from wrong. For example, if a 12-year-old is accused of a theft offense, it is not presumed that the minor knew it was wrong to steal. The DDA must present evidence that the minor knew the conduct committed was wrong. This burden can be met by calling a witness to establish that this minor knew that it was wrong to steal. The witness can be the minor's parent or a police officer or school official who can testify that the minor appreciated that it was wrong to steal.

If the petition is found true by the court, a disposition hearing is then held to determine the disposition consistent with the best



interests of the minor and is in conformity with the interests of public safety and protection. This guidance may include punishment that is consistent with the rehabilitative objectives of WIC §202(b). Disposition alternatives available to the court include: home on probation (HOP); restitution; a brief period of incarceration in juvenile hall as an alternative to a more serious commitment; drug testing; restrictions on the minor's driving privilege; suitable placement; placement in a camp supervised by the Probation Department; placement in the California Department of Corrections and Rehabilitation, Division of Juvenile Justice; and placement in the Border Project (available only to a minor who is a Mexican national).

Proposition 21 provided the possibility of deferred entry of judgment for minors 14 years of age or older who appear before the court as accused felons for the first time. Under the provisions established in WIC §790 and subsequent sections, a minor who has not previously been declared a ward of the court for commission of a felony; is not charged with a WIC §707(b) offense; has never had probation revoked previously; and is at least 14 years of age at the time of the hearing is eligible for deferred entry of judgment. In order to enter the program, the minor must admit all allegations presented in the petition filed with the court. There are strict rules imposed by the court. The minor must participate in the program for no less than 12 months and must successfully complete the program within 36 months. If the program is successfully completed, the charges are dismissed against the minor, the arrest is deemed never to have occurred, and the record of the case is sealed.

If the minor is accused of a listed misdemeanor or a violation of certain ordinances or infractions, the matter may be referred to

a Traffic Hearing Officer for resolution under WIC §256. Sanctions which can be imposed upon minors by a Hearing Officer include: a reprimand with no further action; direct probation supervision for up to six months; a fine; suspension of the minor's driver's license; community service, or a warrant for any failures to appear. The minor has the right to an attorney for any misdemeanor violation referred to the Traffic Hearing Officer.

JUVENILE OFFICE HEARINGS

The Hearing Officer Program offers an arbitration-like setting to deal with school truancy issues and some minor, non-violent, first-time offenses for juveniles.

TRUANCY

The Hearing Officer Program works with school districts' School Attendance Review Boards (SARBs) to combat truancy. When students and/or their parents violate school attendance laws, the matters are often referred to the District Attorney's Office for an office hearing.

The goal of the mediation process is to return truants to school while holding them responsible for their actions. In lieu of immediate referral for prosecution, the student and parents are given an opportunity to enter into a District Attorney School Attendance Contract. By entering the contract, students and parents agree to immediately eliminate unexcused absences and tardies, to correct behavioral problems, and to adhere to SARB directives and other hearing officer resolutions. Failure to adhere to the contract can result in formal prosecution.

JUVENILE OFFENDER INTERVENTION NETWORK (J.O.I.N.)



The District Attorney recognizes the need for early interventions in certain kinds of juvenile arrests. To that end, the District Attorney's Office has implemented the Juvenile Offender Intervention Network (J.O.I.N.), which deals with non-violent, first-time juvenile offenders in an out-of-court setting.

To participate in the program, parents and youthful offenders agree to the terms of a J.O.I.N. contract. In the contract, juvenile offenders acknowledge responsibility for their acts and agree to pay restitution, maintain good school attendance, and perform community service. Parents agree to attend parenting classes, and all families are referred to group counseling. Cases are intensely supervised and monitored by the hearing officer for one year. If the minor reoffends or fails to adhere to the J.O.I.N. contract, the original case is referred for prosecution.

J.O.I.N. is a highly effective program. It aims to address the root causes of the delinquent behavior, offers intense supervision and monitoring of the juvenile, and metes out consequences for the crime often within two weeks of an arrest – rather than the 60 days it may take for a juvenile court to hear a matter. In a three-year study, less than 5% of all youth who participated in J.O.I.N. reoffended.

NARCOTICS DIVISION

Drug abuse damages all sectors of society. Drugs destroy individual lives, break families apart, and are very often the motivating factor behind crimes.

To combat the drug problem, the District Attorney's Office pursues several strategies. The District Attorney's Office participates in Drug Court, an effective diversion program for drug abusers. When cases are not appropriate for Drug Court, the District Attorney's

Office effectively prosecutes drug cases.

In addition, the District Attorney's Office has established the Major Narcotics Division, a team of specially trained attorneys responsible for prosecuting significant narcotics trafficking organizations that operate in Los Angeles County. This division ensures that highly effective prosecutors represent the people of the State of California in cases against drug traffickers most responsible for the drug supply. The Major Narcotics Division also is responsible for processing all applications for wiretaps, an effective information tool against drug traffickers and dealers.

DRUG ENDANGERED CHILDREN (DEC) RESPONSE TEAM

The clandestine manufacture and distribution of methamphetamine continues to create a public health and safety crisis in Los Angeles County. Recent changes in the law, the creation of joint taskforces to combat methamphetamine labs, and effective prosecution have caused a decrease in the number of labs in Southern California. However, until all such labs have been completely eradicated their existence continues to jeopardize the safety of children long before the drugs hit the streets. More than 80% of all methamphetamine labs seized are found in homes, garages, apartments, motels, or mobile homes where children are often present. These labs, stocked with toxic chemicals and at high risk for explosions, expose children to highly dangerous living conditions.

To address this issue, the District Attorney's Office and Department of Children and Family Services partnered with the Los Angeles Interagency Police Apprehension Crime Task Force to create the Drug Endangered Children (DEC) Response Team. The DEC



Response Team specializes in seizing labs that manufacture methamphetamine and provides a coordinated response to the crisis of children found in home methamphetamine labs. To date, more than 100 children have been rescued from methamphetamine labs. All have received specialized medical and social services to diagnose and treat the physical and emotional effects of drug exposure.

In addition, the District Attorney's Office vertically prosecuted over 470 criminal defendants involved in the manufacture of methamphetamine, meaning a highly trained prosecutor handled each case from beginning to end. Also, criminal child endangerment charges were filed in all major narcotics cases where such charges were factually appropriate.

In 2003, the District Attorney's Drug Endangered Children Response Team was named a Top Ten Award Winner by the Los Angeles County's Quality and Productivity Commission at its annual awards program. The DEC Response Team saved Los Angeles County over fifteen million dollars (\$15,000,000) in costs. More importantly, it has potentially saved the lives of hundreds of children.

Due in part to the DEC Response Team efforts, California has now restricted sales of pseudoephedrine and ephedrine, the precursors to methamphetamine. The restriction, combined with the prosecution of methamphetamine manufacturers where children are present, has resulted in a sharp decrease in the prevalence of methamphetamine laboratories in California.

HARDCORE GANG DIVISION

Cognizant of the fact that gangs and violent crimes continue to plague our communities and pose a serious threat to the safety and security of all citizens of Los Angeles, the District Attorney's Office remains committed

to vigorously prosecuting the juveniles and adults who commit gang offenses. With more than 1,400 street gangs in Los Angeles County, gang violence, graffiti, and vandalism continue to deteriorate communities and diminish the quality of life in numerous neighborhoods. The District Attorney's Office utilizes vertical prosecution to ensure that these serious crimes and the victims of those crimes receive the dedicated attention of knowledgeable experts in the field. The District Attorney's Office published *Gang Crime and Violence in Los Angeles County: Findings and Proposals* from the District Attorney's Office in April 2008. The entire report and statistical data may be obtained at the District Attorney Office's website at www.da.lacounty.gov under "Top Documents." In addition to prosecuting gang members, the Office actively works to prevent or dissuade children from entering gangs.

THE HEAT PROGRAM

The HEAT (Heightened Enforcement and Targeting) Program is a multi-agency gang enforcement program initiated by the Hardcore Gang Division of the District Attorney's Office in the late 1990s and staffed by Los Angeles County agencies. The program was developed to address a sudden increase in certain unincorporated areas of the county and began operation in the areas of Valinda, Athens, and East Los Angeles. Initially funded by the Los Angeles County Board of Supervisors, additional HEAT sites throughout the county have received funding through a variety of state and federal grants.

Some of the HEAT sites have expanded the concept of a multidisciplinary approach to combating gang violence by including a community based component. The enforcement team at the Lennox HEAT site created Project STOP. The enforcement team is



comprised of a specially trained deputy district attorney from the Hardcore Gang division, a LASD Deputy assigned to Operation Safe Streets (OSS), and a probation officer. Project STOP expanded the enforcement team to include a community based organization and the local school district. The team created a prevention component that focused on middle school students and included a program teaching the children to become mediators and to intervene to prevent violence among peers.

SAGE (STRATEGY AGAINST GANG ENVIRONMENT)

The SAGE Program is aimed at improving the quality of life in neighborhoods by placing experienced DDAs in cities or areas to work with established agencies to develop new programs. SAGE DDAs are active members of the communities in which they work, teaching residents how to recognize early signs of gang involvement in their children, how to divert their children from gangs, how to improve their neighborhoods, and how to effectively use the services provided by law enforcement. The program is tailored to each community in which it is activated.

Supervisor Gloria Molina's office initiated the development and funding for the Pico Rivera Task Force, a SAGE Team in the Whittier/Pico areas of the county, targeting graffiti and vandalism crimes. The team is comprised of a deputy district attorney, four LASD deputies, a LASD sergeant, and a probation officer. The team handles cases involving adults and minors. As of June 2008, it has filed 69 cases in the Whittier Area Office and Los Padrinos Juvenile Court.

EAST LOS ANGELES PARENT PROJECT

The goal of the East Los Angeles Parent

Project, which is directed through the District Attorney's Office's SAGE program, is to reduce gang membership by improving the parenting skills of those whose children are at risk of joining gangs. The East Los Angeles Parent Project Collaboration includes the District Attorney's Office, Los Angeles County Parks and Recreation Department, LASD, Supervisor Gloria Molina's office, the Los Angeles County Probation Department, and the Boys and Girls Club of East Los Angeles, and provides parenting classes at three parks in East Los Angeles.

The classes are open to any interested parent, but approximately 80% of the attendees are referrals from juvenile court. During the 10-week program, parents learn to identify potential gang and drug problems with their children, learn the difference between influencing and controlling conduct, learn to modify behavior, and learn how to develop an effective action plan. The program stresses "active" supervision of the child and teaches the parent to take an interest in the child's friends, activities, and school.

The program has been extremely effective and it is hoped that it can be replicated in others of the county.

OFFICE WIDE UNITS

VICTIM/WITNESS ASSISTANCE PROGRAM

The program is staffed by victim/witness advocates who have received special training in state programs regarding restitution for victims of crime and advocacy and support for victims of violence. The advocate's primary responsibility is to provide support to the victim. This function is considered essential in cases with a child victim. Often, the advocate will be the first person associated with the District Attorney's Office with whom



the child will meet.

The advocate will explain each person's role in the criminal justice process while working to establish a rapport with the child. The advocate is available to participate in the pre-filing interview to give emotional support for the child victim and to provide a friendly, nurturing sense of care. The advocate assists the non-offending parents or guardians of the child victim to connect with appropriate counseling for children who either witness or are victims of violent crimes in order to promote the mental and emotional health of the child.

The advocate provides court accompaniment to the child victim and the victim's family and assists in explaining the court process. There are two essential tools that the advocate relies upon in explaining the criminal court process. The advocate uses an activity book for children produced by the Administrative Office of the Courts entitled, *What's Happening in Court?*, and a short educational video that illustrates what happens in court, the roles of court personnel, the rules associated with court procedures, and how the child's role is important to the court process. By using these tools, the child's experience in court becomes more understandable. Whenever possible, the advocate will attempt to take the child and the child's family into an accessible courtroom. This opportunity will allow the child to visualize each person's role and where they are positioned in court. The child will have the opportunity to sit in the witness chair in order to become familiar with the courtroom setting and to ease any tensions and fears that may arise as a result of appearing in an unfamiliar setting.

Other services offered by the advocate include but are not limited to the following:

- Crisis intervention
- Emergency financial assistance
- Referrals for counseling, legal assistance and other resources
- Assistance in filing for State Victim Compensation
- Referrals and information to appropriate community agencies and resources
- Speaking engagements explaining the services provided through the Los Angeles County District Attorney's Office Victim/Witness Assistance Program

S.A.V.E. (SPECIAL ASSISTANCE FOR VICTIMS IN EMERGENCY)

The Victim/Witness Assistance Program also oversees S.A.V.E., a victim services program which provides immediate assistance to victims of violent crime and their families in emergency situations. Volunteers and staff members offer services at victim centers in District Attorney offices, as well as at selected police and sheriff stations throughout the County. Contributions help provide crime victims and their families with food, shelter, and clothing.

KID'S COURT

The District Attorney's Office participates in this Los Angeles County Bar Association program. Children who are either victims or witnesses in criminal cases are invited to come to court on a Saturday. A Superior Court judge volunteers to open up the courtroom and give these children an opportunity to become more familiar with the court process. The facts of the child's case are not discussed on this date. Instead, the child is able to explore a courtroom, learn about



the court system, meet a judge, and ask questions about what happens in court. The children and their parents or guardians receive age appropriate written materials that provide answers to frequently asked questions concerning participation in the court process.

DISTRICT ATTORNEY CRIME PREVENTION AND YOUTH SERVICES

The District Attorney’s Office is committed to working with youth and their parents to keep young people in school, away from drugs and gangs, and on the path to a productive adulthood. In these pages you will learn of the crime prevention measures implemented by the District Attorney’s Office and be able to access informational resources available within the office in the areas of crime prevention, public safety, and victim assistance.

PROJECT L.E.A.D. (LEGAL ENRICHMENT AND DECISION-MAKING)

Project L.E.A.D. is an educational program, begun in 1993, that places prosecutors and other professionals inside fifth-grade classrooms one hour a week for 20 weeks. Students follow a challenging curriculum designed to develop the knowledge, skills, understanding, and attitudes that will allow them to function as participating members of a democratic society. The program’s curriculum focuses on issues involving drug abuse, violence, and hate crimes. It also provides social tools, such as conflict resolution and coping with peer pressure. During the 2007-2008 school year, 86 volunteers, mostly from the District Attorney’s Office, taught the curriculum to 1,350 students at 32 schools throughout Los Angeles County. As part of the program, 1,071 students toured Los Padrinos Juvenile Hall, 804 students visited the Museum of Tolerance

and 440 students explored their local court-houses. (See participating schools below.)

Project L.E.A.D. Participating Schools

School	District	Number of Students
Ann Street	Los Angeles	27
Aragon Avenue	Los Angeles	25
California Avenue	La Puente	59
Castelar Street	Los Angeles	54
City Terrace	Los Angeles	64
Cogswell	El Monte	94
Dena	Los Angeles	55
Elysian Heights	Los Angeles	26
Foster Road	La Mirada	65
Daniel Freeman	Inglewood	33
Evelyn Gratts	Los Angeles	49
Hollingworth	West Covina	50
Hoover Street	Los Angeles	23
Thomas Jefferson	Bellflower	32
Kelso Street	Inglewood	18
Robert Kennedy	Los Angeles	30
Kester Avenue	Van Nuys	26
La Canada	La Canada	20
Laguna Nueva	Montebello	32
Lorena Street	Los Angeles	60
Madison	Pomona	30
Mariposa	Lancaster	30
Melrose Avenue	Los Angeles	42
Mt. Washington	Los Angeles	32
Murchison Street	Los Angeles	52
Newhall	Newhall	32
Palm Crest	La Canada	9
Paradise Canyon	La Canada	18
General Rosecrans	Compton	90



Utah Street	Los Angeles	52	Enterprise	Compton Unified
Van Nuys	Los Angeles	28	Willowbrook	Compton Unified
Ynez	Monterey Park	99	Northview	Duarte Unified

RESCUE

A partnership with the Los Angeles County, Long Beach, and Montebello fire departments, this program, begun in 1992, establishes mentoring relationships between firefighters and middle school students, ages 12 to 14. Students must commit to visiting their local firehouse once a week for two hours throughout the school year and into the summer. Mentors work to develop the self-esteem of the students and to teach them such life skills as responsibility, discipline, and teamwork. Field trips and other activities promote individual and group responsibility. Students and their mentors plant trees in the Angeles National Forest, go deep-sea fishing, and learn to surf and kayak as part of an ocean safety day. RESCUE students also tour the California Department of Corrections and Rehabilitation, Division of Juvenile Justice (formerly CYA) to see first-hand the consequences of criminal behavior. During the 2007-2008 school year, the RESCUE program matched 325 firefighters with 115 students from 65 schools throughout Los Angeles County. (See participating schools below.)

RESCUE Participating Schools

School	District			
Martin Tetzlaff	ABC Unified		Bancroft	Long Beach Unified
Slauson	Azusa Unified		Mary Butler	Long Beach Unified
Jerry Holland	Baldwin Park Unified		Franklin	Long Beach Unified
Jones	Baldwin Park Unified		Jefferson	Long Beach Unified
Olive	Baldwin Park Unified		Jordan Academy	Long Beach Unified
Castaic	Castaic Union		Lindbergh	Long Beach Unified
El Roble	Claremont Unified		Lindsey Academy	Long Beach Unified
			Rogers	Long Beach Unified
			Stephens	Long Beach Unified
			Bancroft	Los Angeles Unified
			Belvedere	Los Angeles Unified
			Andrew Carnegie	Los Angeles Unified
			Gage	Los Angeles Unified
			Glenn Curtiss	Los Angeles Unified
			Griffith	Los Angeles Unified
			Horace Mann	Los Angeles Unified
			Granada	East Whittier City
			Columbia	El Monte City
			Durfee	El Monte City
			Gidley	El Monte City
			Loma	El Monte City
			North Park	El Rancho Unified
			Sandburg	Glendora Unified
			Sparks	Hacienda/La Puente
			Valinda	Hacienda/La Puente
			Hawthorne	Hawthorne
			Crozier	Inglewood
			Almondale	Keppel Union
			Crossroads	Lancaster
			Park View	Lancaster
			A.E. Wright	Las Virgenes
			Lindero Canyon	Las Virgenes



LACES	Los Angeles Unified
LeConte	Los Angeles Unified
Marina Del Rey	Los Angeles Unified
Morningside	Los Angeles Unified
Orville Wright	Los Angeles Unified
Robert Peary	Los Angeles Unified
Stephen White	Los Angeles Unified
Southeast	Los Angeles Unified
Laguna Nueva	Montebello Unified
Hutchinson	Norwalk/La Mirada
Nettie L. Waite	Norwalk/La Mirada
Tanner	Paramount Unified
Lorbeer	Pomona Unified
Palomares	Pomona Unified
Simons	Pomona Unified
Rincón	Rowland Unified
Malibu High	Santa Monica/Malibu
Oak Avenue	Temple City Unified
South Pointe	Walnut Valley Unified
Walter Dexter	Whittier City
Sierra Vista	William S. Hart Union
La Mesa	William S. Hart Union
Dana	Wisburn

parents, school counselors, pediatricians, and children at various venues, such as parent meetings and counselor training sessions, since its inception in 2004. (See participating groups from January 2007 through May 2008 below.)

**Protecting Our Kids Participating Groups:
School**

Date	Audience
Chatsworth Middle School 1/22/07	Parents
Downey Girl Scout Troop 2/2/07	Parents
Chino Middle School 2/7/07	Parents
31st District PTSA Safety Workshop (Van Nuys) 2/10/07	Parents
San Gabriel Valley Middle School Girls Conference (Pasadena) 3/10/07	Parents
Migrant Education Program, HLPUSD (La Puente) Spanish presentation 4/26/07	Parents
Beverly Vista Elementary School 5/2/07	Parents
Torres Martinez Tribal T.A.N.F. (Commerce) 6/27/07	Students & Parents
Newton Middle School 10/20/07	Students & Parents
El Sereno Middle School 11/7/07	Students
Bellflower Public Library 11/07/07	Parent group
Bellflower Public Library 11/13/07	Parent group
Southwest College Community Day 1/19/08	Community
United American Indian Involvement 7 Tribes (Los Angeles)	

Protecting Our Kids: Keeping Kids Safe on the Internet

This program is dedicated to helping parents protect their children from the threats of predators using the Internet to victimize children. A major component is available through our Web site, <http://da.lacounty.gov/POK>. The site provides parents with a list of warning signs that a child may be in contact with an Internet predator. It also provides links to other sites that offer parenting guides to the Internet and teach children online safety. Bureau staff members have introduced the Protecting Our Kids program to thousands of



1/25/08	Students
Foster Road Elementary School	
1/29/08	Parents
Baker Elementary School	
2/5/08	Students
New River Elementary School	
2/21/08	Students & Parents
Cedarlane Middle School	
2/26/08	Students
Pasadena Junoir League Bodywise Conference	
3/15/08	Students & Parents
Unity and Peace Fair Community (South Los Angeles)	
3/29/08	Community
Jersey Elementary School	
4/3/08	Parents
Stevenson Middle School	
4/5/08	Students & Parents
Amino Charter School Crenshaw Center	
4/10/08	Students & Parents
California PTA Conference	
5/1/08	Parents & Schoo; Administrators
LACOE Cyberbullying Workshop (Downey)	
5/2/08	Educators
Cogswell Elementary School	
5/7/08	Students & Parents

ENVIRONMENTAL SCHOLARSHIP PROGRAM

A college scholarship fund was established at five Los Angeles County high schools as the result of the prosecution and settlement of a major environmental crime case. Graduating seniors at Bell Gardens, El Rancho, Montebello, Pioneer, and Schurr High Schools are eligible for the scholarships. They are awarded annually to students who have demonstrated a serious interest or commitment to environmental issues. This interest can be demonstrated through achievements in science, social

sciences, or community activities involving air pollution, waste disposal, recycling, or environmental education. In addition to the high schools in the area affected by the crime, scholarship funds also have been established at the Environmental Physical Sciences Magnet Center at Reseda High School and the Los Angeles Conservation Corps. The District Attorney's Office has awarded 304 scholarships totaling more than \$182,000 to local students since the fund was established in 1991.

**DOMESTIC VIOLENCE HOTLINE
(1-800-978-3600)**

The District Attorney's Office established the Los Angeles County Domestic Violence Hotline in 1994 to help victims find a safe way out of their abusive environments. Thousands of callers are routed directly to trained shelter personnel fluent in 11 languages – English, Spanish, Korean, Vietnamese, Mandarin, Cantonese, Tagalog, Khmer, Japanese, Thai, and Armenian.

COURAGEOUS CITIZEN AWARDS PROGRAM

The Courageous Citizens Awards, established in 1986, recognize people who have acted with courage and at considerable personal risk to help a victim of crime, assist in the capture of a suspect, or testify in the face of extraordinary pressures. Courageous Citizen Awards are presented at luncheon ceremonies hosted by local Rotary & Kiwanis clubs throughout Los Angeles County.

PUBLIC INFORMATION PAMPHLETS

These pamphlets are designed to inform individuals of the functions and responsibilities of the District Attorney's



Office as well as services and tips to avoid becoming a victim of crime. Topics include identity theft, domestic violence, hate crimes, bad checks, and the unauthorized practice of law. Pamphlets are available online at <http://da.lacounty.gov/cpys.pip.htm>.

THE SPEAKERS' BUREAU

Experts within the District Attorney's Office are available to speak to community groups, schools, and other organizations about criminal justice issues. The presentations are free and available in English and Spanish. Los Angeles County residents may arrange for a speaker by calling the District Attorney's Speakers Bureau at (213) 974-7401.

WHITTIER PEER MENTORING PROGRAM

As part of the community prosecution effort in Whittier, CA, the District Attorney's Office has worked with the city and local school district to create the Peer Mentoring Program. In the Peer Mentoring Program, college-bound high school seniors serve as mentors to fifth-graders in need of a role model.

Prospective mentors undergo an extensive selection process, including a panel interview. Those selected as mentors are then given a comprehensive training on mentoring techniques and strategies. Mentees, fifth-graders who most need a role model in their lives, are selected by school district personnel.

The Peer Mentoring Program aims to develop the mentees' social and academic skills through a variety of activities – including tutoring – during the year-long mentoring relationship. The Program sponsors field trips to museums, hiking trips, sporting events, local colleges, local courthouses, and the Whittier Police Department. For

more information on the Whittier Peer Mentoring Program, call (562) 945-8285.

DATA GATHERING AND ANALYSIS

In order to maximize accuracy in representing the work done by the District Attorney's Office in prosecuting cases involving child abuse and neglect, data is gathered based upon a case filing. When a case is filed, the case number represents one unit for data purposes. A case may, however, represent more than one defendant and more than one count; in cases where there is more than one count, more than one victim may be represented. This method was adopted to ensure that a single incident of criminal activity was not double counted. When a case is presented for filing to a prosecutor, it is submitted based upon the conduct of the perpetrator. If a single perpetrator has victimized more than one victim, all of the alleged criminal conduct is contained under one case number. If a victim has been victimized on more than one occasion by a single perpetrator, the separate incidents will be represented by multiple counts contained under a single case number. A single incident, however, also may be represented by multiple counts; such counts might be filed in the alternative for a variety of reasons but could not result in a separate sentence for the defendant due to statutory double jeopardy prohibitions. If multiple defendants were involved in victimizing either a single victim or multiple victims, this is represented by a single case number.

A priority list was established based upon seriousness of the offense (Figure 1) from which the data sought would be reflected under the most serious charge filed. In other words, if the most serious charge presented against the perpetrator was a homicide



charge reflecting a child death but additional charges were also presented and filed alleging child physical abuse or endangerment, then the conduct would be reflected only under the statistics gathered using PC §187 in the category of total filings (Figure 2). If, at the conclusion of the case, the Murder (PC §187) charge was dismissed for some reason but the case resulted in a conviction on lesser charges (such as Assault Resulting in Death of a Child Under Age 8, PC §273ab), that statistic would be reflected as a conviction under the statistics compiled for the lesser charge (Figures 6 and 7).

In assessing cases that were either dismissed or declined for filing (Figures 3 and 4), it is important to keep in mind that among the reasons for declining to file a case (lack of corpus; lack of sufficient evidence; inadmissible search and seizure; interest of justice; deferral for revocation of parole; a probation violation was filed in lieu of a new filing; and a referral for misdemeanor consideration to another agency) is the very important consideration of the victim being unavailable to testify (either unable to locate the victim or the victim being unable to qualify as a witness) or unwilling to testify. In cases involving allegations of sexual assault against children, the child or the parents/guardians acting on behalf of the child may decline to participate in a prosecution and not face the prospect of being held in contempt of court for failing to testify (CCP §1219). As a general principle, it is considered essential to protect the child victim from additional harm; forcing a child to participate in the criminal justice process against their will would not meet these criteria. This deference to the greater goal of protection of the victim results in some cases which would ordinarily meet the filing criteria to be declined and others which had already

been filed to be dismissed or settled for a compromise disposition.

A synopsis of the charges used to compile this report is included as an addendum to this narrative. The statistics for 1998 also included reporting some statutes that were no longer valid for crimes committed during the 1998 calendar year. This was due to either filing error or the fact that the case was filed in 1998 but alleged conduct which occurred in prior years.

Sentencing data is broken down to cover cases in which a defendant has received a life sentence, a state prison sentence or a probationary sentence (Figures 7 and 8). A probationary sentence includes, in a vast majority of cases, a sentence to county jail for up to 1 year as a term and condition of probation under a 5-year grant of supervised probation.

As it is not uncommon for minors to commit acts of abuse against children, juvenile delinquency statistics detailing the number of felony and misdemeanor petitions filed, dismissed, and declined are included (Figures 12, 13, 14, 15, and 16). It is important to note the fact that the perpetrator of the offense is under the age of 18 is not the sole determinative factor in making a decision as to whether the minor perpetrated a criminal act against a child. A schoolyard fight between peers would not be categorized as an incident of child abuse nor would consensual sexual conduct between underage peers be automatically categorized as child molestation; but an incident involving a 17 year old babysitter intentionally scalding a 6 year old child with hot water would be investigated as a child abuse and an incident in which a 16 year old cousin fondled the genitals of an 8 year old family member would be investigated as a child molestation.



Statistics regarding the gender of defendants are also included. It is important when comparing the years of available statistics covering juvenile delinquency offenses to remember that Proposition 21, as discussed in the Juvenile Division section of this report, was in effect beginning in March of 2000. This factor may make any meaningful comparison between the statistics prior to the passage to those subsequent to the passage of Proposition 21 difficult. Adult and juvenile comparisons are provided as are comparisons among both groups for total cases filed by the District Attorney's Office compared to a gender breakdown for child abuse related offenses (Figures 18, 19, 20, and 21).

Information contained by Zip Code is provided as a means of determining how children in different areas of the county are impacted by these crimes (Figures 10 and 17).

For the fifth year, the report contains data regarding the number of child abuse cases filed during 2007 that also included the filing of a count of Spousal Abuse within the meaning of PC §273.5 (Figure 22). In all five years, the percentage of cases in which these offenses are joined has been consistent. In 2003, this joinder occurred in 9% of the cases filed; in 2004, it occurred in 8% of the cases; in 2005, the joinder occurred in 9% of the cases; in 2006, the joinder occurred in 7% of the cases, and in 2007, the joinder occurred in 7% of the cases.

This is the first year that this report contains data regarding adult filings by District Attorney's Branch and Area Office addresses (Figure 23). In future reports, trends regarding this data will be analyzed.

SELECTED FINDINGS

- A total of 4,872 cases relating to child abuse and neglect were submitted for filing consideration against adult defendants.
- Of these, charges were filed in 47% (2,292) of the cases reviewed. Felony charges were filed in 61% (1,422) of these matters.
- Of those cases declined for filing (a total of 2,580 – both felonies and misdemeanors), cases submitted alleging a violation of PC §288(a) accounted for 37% of the declinations (950).
- In 80% of the cases filed involving child abuse, the gender of the defendant was male.
- Convictions were achieved in 91% of the cases filed against adult offenders. Defendants received grants of probation in 69% (1,144) of these cases. State prison sentences were ordered in 29% (479) of the cases; with 1% (9) of the defendants receiving a life sentence in state prison.
- A total of 447 cases relating to child abuse and neglect were submitted for filing consideration against juvenile offenders.
- Of these, charges were filed in 64% (286) of the cases reviewed. Felony charges were filed in 94% (270) of these cases.
- Of the filed cases, 67% (183) alleged a violation of PC §288(a).
- Of the declined cases (161 – both felonies and misdemeanors), 74% (119) alleged a violation of PC §288(a).
- In 94% of the petitions filed involving



child abuse, the gender of the minor was male.

- Sustained petitions were achieved in 89% of the juvenile cases.

CONCLUSION

The Los Angeles County District Attorney's Office is dedicated to providing justice to the children of this community. Efforts to enhance their safety through the vigorous prosecution of individuals who prey upon children are tempered with care and compassion for the needs of the children who have been victimized. This process is important to a prosecuting entity that has been sensitized to the special nature of these cases and assisted by active partnerships with other public and private entities in crime prevention efforts designed to enrich the lives of all children. Through these efforts, the Los Angeles County District Attorney's Office has established a leadership role in community efforts to battle child abuse and neglect.

RESPONSE TO RECOMMENDATIONS FROM 2007 REPORT

RECOMMENDATION ONE:

Juvenile Offender Data Collection

The Data Report submitted by the District Attorney's Office includes data on juvenile offenders.

RECOMMENDATION TWO:

Agency Data Report Definitions

The Data Report submitted by the District Attorney's Office includes a glossary explaining the acronyms and legal definitions of terms used. When referring to the law, all references are to California statutes unless otherwise specified. Where terms have a common meaning between all agencies included in this report, the glossary contains the definition from Black's Law Dictionary, 8th Edition. Since some common words are used differently by various agencies, an explanation of the usage of the term by the District Attorney's Office is included in the glossary.

RECOMMENDATION THREE:

Permanency initiatives or mentoring programs that impact children and youth

The Data Report submitted by the Los Angeles District Attorney's Office includes information regarding programs offered through the office's Bureau of Crime Prevention and Youth Services and other divisions.



Figure 1

LIST OF PRIORITIZED STATUTES

CODE	STATUTE	FORM NO	ORDER		CODE	STATUTE	FORM NO	ORDER
PC	187(A)		1		PC	288A(B)(1)		40
PC	273AB		2		PC	266J		41
PC	273A(2)		3		PC	266H(B)		42
PC	269(A)(1)		4		PC	266H(B)(1)		43
PC	269(A)(2)		5		PC	266H(B)(2)		44
PC	269(A)(3)		6		PC	266I(B)		45
PC	269(A)(4)		7		PC	266I(B)(1)		46
PC	269(A)(5)		8		PC	266I(B)(2)		47
PC	664/187(A)		9		PC	266		48
PC	207(B)		10		PC	288A(B)(2)		49
PC	207(C)	002	11		PC	12035(B)(1)		50
PC	207(D)	002	12		PC	311.4(B)		51
PC	207(A)	002	13		PC	311.2(B)		52
PC	207(A)	003	14		PC	311.2(D)		53
PC	208(B)		15		PC	311.3(E)		54
PC	288.5(A)		16		PC	311.10		55
PC	288.5		17		PC	311.11(B)		56
PC	286(C)(1)		18		PC	261.5(D)		57
PC	286(C)	001	19		PC	261.5(C)		58
PC	288(B)(1)		20		PC	311.1(A)		59
PC	288(B)		21		PC	311.4(C)		60
PC	288(A)		22		PC	271A		61
PC	288A(C)(1)		23		PC	12035(B)(2)		62
PC	288A(C)	001	24		PC	12036(B)		63
PC	289(J)		25		PC	12036(C)		64
PC	289(I)		26		PC	267		65
PC	289(H)		27		PC	647.6(B)		66
PC	273A(A)		28		PC	647.6(A)	002	67
PC	273A		29		PC	647.6		68
PC	273A(1)		30		PC	647.6(A)	001	69
PC	273A(A)(1)		31		PC	261.5(A)		70
PC	273D(A)		32		PC	261.5(B)		71
PC	278		33		PC	261.5		72
PC	278.5		34		PC	273A(B)		73
PC	278.5(A)		35			273G		74
PC	288(C)(1)		36		PC	311.1		75
PC	288(C)		37		PC	311.4(A)		76
PC	286(B)(2)		38		PC	311.11(A)		77
PC	286(B)(1)		39					



Figure 2

TOTAL ADULT FILINGS BY CHARGE FOR 1998 THROUGH 2007

Charge	1998		1999		2000		2001		2002	
	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd
PC12035(b)(1)	0	0	0	0	0	0	1	0	0	0
PC12035(b)(2)	0	0	0	0	0	0	0	0	0	0
PC12036(b)	0	0	0	0	0	0	0	1	0	2
PC187(a)	27	0	38	0	33	0	25	0	25	0
PC207(a)	5	0	11	0	1	0	9	0	26	0
PC207(b)	0	0	0	0	9	0	6	0	7	0
PC208(b)	19	0	13	0	22	0	11	0	13	0
PC261.5	0	0	0	0	0	0	0	0	0	0
PC261.5(a)	0	0	0	0	0	0	0	0	0	0
PC261.5(b)	0	0	3	23	0	2	0	38	0	28
PC261.5(c)	141	4	202	0	138	2	121	52	112	70
PC261.5(d)	141	4	82	5	69	8	41	13	39	12
PC266	0	0	0	0	0	0	0	0	0	0
PC266h(b)	0	0	0	0	0	0	2	0	1	0
PC266h(b)(1)	0	0	0	0	0	0	0	0	0	0
PC266h(b)(2)	0	0	0	0	0	0	0	0	0	0
PC266i(b)	88	8	0	0	0	0	0	0	0	0
PC266i(b)(1)	0	0	0	0	0	0	0	0	0	0
PC266i(b)(2)	0	0	0	0	0	0	0	0	0	0
PC266j	5	0	7	0	2	0	3	0	5	0
PC269	0	0	0	0	1	0	0	0	0	0
PC269(a)(1)	8	0	14	0	17	0	18	0	22	0
PC269(a)(2)	0	0	0	0	0	0	0	0	1	0
PC269(a)(3)	3	0	4	0	3	0	8	0	13	0
PC269(a)(4)	3	0	1	0	5	0	0	0	3	0
PC269(a)(5)	0	0	2	0	9	0	3	0	4	0
PC271a	1	4	0	6	0	4	2	7	1	7
PC273a(1)	1	1	0	0	0	0	0	0	0	0
PC273a(2)	0	1	0	0	0	0	0	0	0	0
PC273a(a)	385	91	479	76	452	94	436	128	587	119
PC273a(a)(1)	2	6	0	1	0	0	0	0	0	0
PC273a(b)	128	401	70	423	0	606	2	601	4	578
PC273ab	2	1	1	0	1	0	0	0	0	0
PC273d(a)	79	82	77	82	66	85	58	88	25	87
PC273g	0	0	0	0	0	0	0	5	0	2
PC278	18	1	18	4	1	3	24	3	27	6
PC278.5	6	3	13	2	4	1	47	7	9	5



Figure 2 (cont.)

TOTAL ADULT FILINGS BY CHARGE FOR 1998 THROUGH 2007

Charge	2003		2004		2005		2006		2007	
	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd
PC12035(b)(1)	3	0	0	0	0	0	0	1	1	1
PC12035(b)(2)	0	0	0	0	0	0	0	0	0	0
PC12036(b)	0	1	0	0	0	0	0	0	0	0
PC187(a)	31	0	23	0	25	0	17	0	20	0
PC207(a)	20	0	13	0	19	0	11	0	18	0
PC207(b)	3	0	11	0	6	0	6	0	8	0
PC208(b)	3	0	1	0	1	0	1	0	0	0
PC261.5	0	0	0	0	1	0	1	1	1	1
PC261.5(a)	0	0	0	0	0	0	0	0	0	0
PC261.5(b)	0	17	0	11	0	36	0	17	0	18
PC261.5(c)	101	48	87	57	80	43	72	37	86	46
PC261.5(d)	38	6	45	7	39	4	27	6	42	6
PC266h	0	0	0	0	1	0	0	0	0	0
PC266h(b)	0	0	0	0	1	0	0	0	0	0
PC266h(b)(1)	0	0	0	0	5	0	4	0	5	0
PC266h(b)(2)	0	0	0	0	0	0	6	0	2	0
PC266i(b)	0	0	0	0	0	0	0	0	0	0
PC266i(b)(1)	0	0	0	0	1	0	2	0	0	0
PC266i(b)(2)	0	0	0	0	1	0	1	0	0	0
PC266j	4	0	3	0	2	0	0	0	1	0
PC269	0	0	0	0	0	0	0	0	0	0
PC269(a)(1)	26	0	23	0	26	0	14	0	22	0
PC269(a)(2)	0	0	2	0	2	0	1	0	2	0
PC269(a)(3)	8	0	4	0	3	0	3	0	7	0
PC269(a)(4)	6	0	7	0	4	0	1	0	7	0
PC269(a)(5)	7	0	10	0	5	0	3	0	3	0
PC271a	6	6	1	1	3	2	2	3	1	6
PC273a(1)	0	0	0	0	1	0	0	0	0	1
PC273a(2)	0	0	0	0	0	0	0	0	0	0
PC273a(a)	446	108	411	111	432	117	374	123	399	123
PC273a(a)(1)	0	0	0	0	0	0	0	0	0	0
PC273a(b)	1	550	1	581	0	591	0	475	1	557
PC273ab	1	0	0	0	5	0	1	0	0	0
PC273d(a)	31	75	37	66	24	69	41	55	45	50
PC273g	0	1	0	0	0	0	0	0	0	14
PC278	25	2	19	1	26	2	11	4	11	3
PC278.5	15	0	4	1	4	3	4	2	1	1



Figure 2 (cont.)

TOTAL ADULT FILINGS BY CHARGE FOR 1998 THROUGH 2007

Charge	1998		1999		2000		2001		2002	
	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd
PC278.5(a)	14	2	15	1	34	3	0	0	9	5
PC286(b)(1)	10	0	3	1	6	0	8	0	39	10
PC286(b)(2)	6	0	9	0	8	0	4	0	6	1
PC286(c)	11	0	1	0	1	0	1	0	2	0
PC286(c)(1)	0	0	0	0	0	0	13	0	2	0
PC288(a)	557	0	606	0	538	0	714	0	9	0
PC288(b)	6	0	6	0	7	0	1	0	498	1
PC288(b)(1)	0	0	0	0	0	0	98	0	2	0
PC288(c)	4	0	6	0	2	0	1	0	47	1
PC288(c)(1)	0	0	0	0	0	0	106	1	1	0
PC288.5	79	0	15	0	28	0	13	0	120	3
PC288.5(a)	0	0	0	0	0	0	0	0	6	0
PC288.5(b)	0	0	0	0	0	0	216	0	206	0
PC288a(b)(1)	26	0	23	3	32	0	19	0	0	0
PC288a(b)(2)	0	0	0	0	22	0	16	0	26	10
PC288a(c)	6	0	2	0	0	0	0	0	9	0
PC288a(c)(1)	0	0	0	0	0	0	4	0	2	0
PC289(h)	17	1	16	1	25	0	30	0	4	0
PC289(i)	10	0	16	0	15	0	12	0	11	5
PC289(j)	4	0	2	0	1	0	0	0	19	0
PC311.1	0	0	0	0	0	0	0	0	0	0
PC311.10	0	0	0	0	1	0	1	0	0	0
PC311.1(a)	4	0	7	0	3	0	1	0	0	0
PC311.11(a)	8	6	6	7	0	18	0	10	2	1
PC311.11(b)	1	0	1	0	1	0	0	0	0	14
PC311.2(b)	0	0	0	0	1	0	2	0	2	0
PC311.4(b)	1	0	0	0	0	0	1	0	0	0
PC311.2(d)	0	0	0	0	0	0	0	0	0	0
PC311.4(c)	2	0	5	0	3	0	1	0	0	0
PC647.6	0	0	0	0	0	0	0	0	0	0
PC647.6(a)	2	0	21	0	0	5	9	0	8	0
PC647.6(b)	4	1	3	0	4	3	2	2	3	0
PC664/187(a)	0	0	0	0	43	0	11	0	20	0



Figure 2 (cont.)
TOTAL ADULT FILINGS BY CHARGE FOR 1998 THROUGH 2007

Charge	2003		2004		2005		2006		2007	
	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd
PC278.5(a)	24	3	31	0	8	0	18	4	16	1
PC286(b)(1)	8	1	7	1	3	1	7	0	5	0
PC286(b)(2)	3	0	1	0	5	0	3	0	4	0
PC286(c)	2	0	0	0	0	0	0	0	1	0
PC286(c)(1)	8	0	5	0	4	0	8	0	8	0
PC288(a)	437	0	476	1	350	0	410	0	382	0
PC288(b)	2	0	3	0	0	0	5	0	1	0
PC288(b)(1)	60	0	46	0	55	0	52	0	36	0
PC288(c)	0	0	0	0	0	0	0	0	0	0
PC288(c)(1)	96	2	110	4	75	4	85	1	76	1
PC288.5	12	0	6	0	2	0	4	0	3	0
PC288.5(a)	132	0	124	0	118	0	110	0	116	0
PC288.5(b)	0	0	18	2	0	0	0	0	0	0
PC288a(b)(1)	31	6	6	0	21	3	21	5	18	2
PC288a(b)(2)	17	0	0	0	12	0	4	0	4	0
PC288a(c)	0	0	0	0	0	0	0	0	1	0
PC288a(c)(1)	0	0	0	0	2	0	0	0	7	0
PC289(h)	15	2	17	1	15	3	13	3	19	2
PC289(i)	16	0	6	0	10	0	12	0	12	0
PC289(j)	0	0	0	0	0	0	1	0	1	0
PC311.1	0	0	0	0	1	0	0	0	0	0
PC311.10	1	0	3	0	2	0	2	0	0	0
PC311.1(a)	2	0	3	0	4	0	1	0	4	0
PC311.11(a)	0	11	0	19	0	9	2	17	20	5
PC311.11(b)	0	0	0	0	2	0	2	0	1	0
PC311.2(b)	0	0	0	0	2	0	0	0	2	0
PC311.4(b)	0	0	0	0	0	0	0	0	1	0
PC311.2(d)	0	0	0	0	0	0	1	0	0	0
PC311.4(c)	1	0	1	0	2	0	1	0	1	0
PC647.6	0	0	0	0	0	2	0	2	0	0
PC647.6(a)	6	0	9	0	3	140	4	107	0	13
PC647.6(b)	0	0	0	0	1	0	0	3	3	1
PC664/187(a)	12	0	9	0	19	0	11	0	15	0



Figure 3

TOTAL ADULT DISMISSALS BY CHARGE FOR 1998 THROUGH 2007

Charge	1998		1999		2000		2001		2002	
	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd
PC12035(b)(1)	0	0	0	0	0	0	0	0	0	0
PC187(a)	0	0	0	0	0	0	0	0	1	0
PC207	5	0	1	0	0	0	0	0	0	0
PC207(a)	0	0	0	0	0	0	1	0	5	0
PC207(b)	0	0	0	0	0	0	1	0	0	0
PC208	2	0	3	0	1	0	0	0	0	0
PC208(b)	0	0	0	0	0	0	0	0	1	0
PC261.5(b)	4	0	0	3	0	1	0	1	0	5
PC261.5(c)	6	5	5	3	8	0	12	5	10	2
PC261.5(d)	7	0	4	0	3	0	2	1	0	0
PC266h(b)	0	0	0	0	0	0	1	0	1	0
PC266h(b)(1)	0	0	0	0	0	0	0	0	0	0
PC266h(b)(2)	0	0	0	0	0	0	0	0	0	0
PC266i(b)	1	0	0	0	0	0	0	0	0	0
PC266j	0	0	2	0	0	0	0	0	3	0
PC269(a)(1)	0	0	1	0	0	0	2	0	0	0
PC269(a)(2)	0	0	0	0	0	0	0	0	0	0
PC269(a)(3)	1	0	0	0	0	0	0	0	0	0
PC269(a)(4)	0	0	0	0	1	0	0	0	0	0
PC269(a)(5)	0	0	0	0	0	0	0	0	1	0
PC271a	0	1	0	0	0	0	0	0	0	0
PC273a(1)	0	1	0	0	0	0	0	0	0	0
PC273a(a)	35	16	24	6	39	6	19	9	46	8
PC273a(b)	5	68	6	37	4	60	0	57	0	42
PC273ab	1	0	0	0	0	0	0	0	0	0
PC273d(a)	6	10	6	18	1	14	7	10	5	10
PC273g	0	0	0	0	0	0	0	0	0	0
PC278	0	0	0	0	3	0	0	0	2	2
PC278.5	0	1	1	0	3	0	6	0	1	0
PC278.5(a)	0	1	2	0	0	0	0	0	5	0



Figure 3 (cont.)
TOTAL ADULT DISMISSALS BY CHARGE FOR 1998 THROUGH 2007

Charge	1998		1999		2000		2001		2002	
	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd
PC286(b)(1)	0	0	1	0	1	0	0	0	5	0
PC286(c)	2	0	0	0	0	0	0	0	1	0
PC286(c)(1)	0	0	0	0	0	0	0	0	0	0
PC288(a)	42	0	23	0	40	0	0	0	1	0
PC288(b)	1	0	0	0	0	0	0	0	23	0
PC288(b)(1)	0	0	0	0	0	0	2	0	3	0
PC288(c)	0	0	0	0	1	0	0	0	0	0
PC288(c)(1)	0	0	0	0	0	0	4	0	6	0
PC288.5	3	0	1	0	1	0	0	0	0	0
PC288.5(a)	0	0	0	0	0	0	0	0	10	0
PC288.5(b)	0	0	0	0	0	0	8	0	0	0
PC288a(b)(1)	2	1	2	0	2	0	1	0	4	0
PC288a(b)(2)	0	0	0	0	1	0	1	0	1	0
PC288a(c)	0	0	0	0	2	0	0	0	1	0
PC288a(c)(1)	0	0	0	0	0	0	0	0	0	0
PC289(h)	1	1	0	0	1	1	0	0	2	0
PC289(i)	1	0	0	0	0	0	1	0	0	0
PC289(j)	0	0	1	0	0	0	0	0	0	0
PC311.11(a)	0	1	0	1	0	1	0	0	0	2
PC311.11(b)	0	0	0	1	0	0	0	0	0	0
PC311.2	0	0	0	0	1	0	0	0	0	0
PC311.4(b)	0	0	0	0	1	0	0	0	0	0
PC647.6(a)	0	0	0	0	0	0	1	0	3	0
PC647.6(b)	1	0	0	0	0	0	0	0	0	0
664/187(a)	0	0	0	0	0	0	0	0	0	0



Figure 3 (cont.)

TOTAL ADULT DISMISSALS BY CHARGE FOR 1998 THROUGH 2007

Charge	2003		2004		2005		2006		2007	
	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd
PC12035(b)(1)	0	0	0	0	0	0	0	0	1	0
PC187(a)	0	0	0	0	1	0	1	0	0	0
PC207	2	0	0	0	0	0	0	0	0	0
PC207(a)	0	0	1	0	3	0	0	0	1	0
PC207(b)	0	0	1	0	1	0	0	0	1	0
PC208	0	0	0	0	0	0	0	0	0	0
PC208(b)	0	0	0	0	0	0	0	0	0	0
PC261.5(b)	0	1	0	3	0	5	0	3	0	1
PC261.5(c)	5	9	9	7	2	2	5	2	8	3
PC261.5(d)	0	1	5	1	1	0	1	0	0	1
PC266h(b)	0	0	0	0	0	0	0	0	0	0
PC266h(b)(1)	0	0	0	0	0	0	1	0	0	0
PC266h(b)(2)	0	0	0	0	0	0	0	0	1	0
PC266i(b)	0	0	0	0	0	0	0	0	0	0
PC266j	0	0	0	0	1	0	0	0	0	0
PC269(a)(1)	1	0	2	0	1	0	0	0	2	0
PC269(a)(2)	0	0	0	0	1	0	0	0	0	0
PC269(a)(3)	0	0	0	0	0	0	0	0	1	0
PC269(a)(4)	0	0	1	0	1	0	0	0	0	0
PC269(a)(5)	0	0	1	0	0	0	0	0	0	0
PC271a	2	1	0	1	0	0	0	0	0	0
PC273a(1)	0	0	0	0	0	0	0	0	0	0
PC273a(a)	26	17	44	6	35	11	22	8	27	16
PC273a(b)	0	46	0	75	0	52	0	37	0	52
PC273ab	0	0	0	0	0	0	0	0	0	0
PC273d(a)	3	10	2	2	5	12	6	4	6	8
PC273g	0	0	0	0	0	0	0	0	0	4
PC278	5	2	2	0	4	1	0	1	0	2
PC278.5	3	0	0	1	0	0	1	0	1	0
PC278.5(a)	3	2	4	0	0	0	0	0	2	1



Figure 3 (cont.)
TOTAL ADULT DISMISSALS BY CHARGE FOR 1998 THROUGH 2007

Charge	2003		2004		2005		2006		2007	
	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd
PC286(b)(1)	0	0	0	0	0	0	0	0	0	0
PC286(c)	0	0	0	0	0	0	0	0	0	0
PC286(c)(1)	0	0	0	0	0	0	0	0	0	0
PC288(a)	37	0	36	0	26	0	16	0	6	0
PC288(b)	0	0	0	0	0	0	0	0	0	0
PC288(b)(1)	5	0	3	0	4	0	2	0	1	0
PC288(c)	0	0	0	0	0	0	0	0	0	0
PC288(c)(1)	5	0	7	1	2	1	6	0	1	0
PC288.5	1	0	0	0	0	0	0	0	0	0
PC288.5(a)	7	0	6	0	7	0	3	0	3	0
PC288.5(b)	0	0	0	0	0	0	0	0	0	0
PC288a(b)(1)	2	1	0	0	1	0	2	0	1	0
PC288a(b)(2)	1	0	0	0	1	0	0	0	0	0
PC288a(c)	0	0	0	0	0	0	0	0	0	0
PC288a(c)(1)	0	0	0	0	1	0	0	0	0	0
PC289(h)	1	0	1	0	2	0	0	0	1	0
PC289(i)	0	0	0	0	0	0	0	0	0	0
PC289(j)	0	0	0	0	0	0	0	0	0	0
PC311.11(a)	0	0	0	0	0	0	1	0	1	1
PC311.11(b)	0	0	0	0	0	0	0	0	0	0
PC311.2	0	0	0	0	0	0	0	0	0	0
PC311.4(b)	0	0	0	0	0	0	0	0	0	0
PC647.6(a)	0	0	1	0	1	7	0	5	0	1
PC647.6(b)	0	0	0	0	0	0	0	0	1	0
664/187(a)	1	0	0	0	1	0	0	0	1	0



Figure 4

TOTAL ADULT CASES DECLINED FOR FILING FOR 1998 THROUGH 2007

	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
Charge	Count	Count	Count	Count	Count	Count	Count	Count	Count	Count
PC12035(b)(1)	0	0	0	4	4	1	1	1	3	1
PC12035(b)(2)	0	0	0	2	0	0	0	0	0	0
PC12036(b)	0	0	0	0	0	0	0	0	0	2
PC12036(c)	0	0	0	0	0	0	0	0	1	0
PC187(a)	0	0	0	4	3	1	2	3	0	7
PC207	1	6	5	0	0	0	0	0	0	0
PC207(a)	0	0	0	4	3	0	2	2	1	5
PC207(b)	0	0	0	2	4	0	1	2	1	3
PC208	1	1	1	0	0	0	0	0	0	0
PC208(b)	0	0	0	1	0	0	0	0	0	0
PC261.5	0	0	0	0	0	0	0	11	0	1
PC261.5(a)	0	0	0	3	0	0	1	2	1	1
PC261.5(b)	34	29	0	60	36	80	94	142	156	127
PC261.5(c)	146	214	224	268	170	145	137	187	249	293
PC261.5(d)	60	82	0	94	99	92	81	70	29	32
PC266	0	0	0	0	0	0	0	0	0	2
PC266h(b)	0	0	0	1	0	1	0	1	1	0
PC266h(b)(1)	0	0	0	0	0	0	0	0	2	1
PC266h(b)(2)	0	0	0	0	0	0	0	0	1	5
PC266j	5	0	1	2	2	3	2	0	1	0
PC267	0	0	1	0	0	0	0	0	1	0
PC269(a)(1)	0	0	2	0	1	0	3	3	1	2
PC269(a)(2)	0	0	0	0	0	0	0	0	0	1
PC269(a)(5)	0	0	1	0	0	0	0	0	0	1
PC271a	2	2	2	7	10	8	8	5	3	3
PC273a	0	0	0	0	1	1	0	1	1	1
PC273a(1)	4	0	0	0	0	0	0	0	0	0
PC273a(2)	0	0	0	0	0	0	0	0	2	0
PC273a(a)	333	208	251	388	523	421	399	464	502	461
502PC273a(a)	333	208	251	388	523	421	399	464	502	0
PC273a(a)(1)	0	1	0	0	0	0	0	0	0	233
PC273a(b)	43	42	69	88	164	162	177	148	150	3
PC273ab	6	2	1	0	4	1	2	1	3	139
PC273d(a)	72	57	62	69	83	139	133	103	127	1



Figure 4 (cont.)

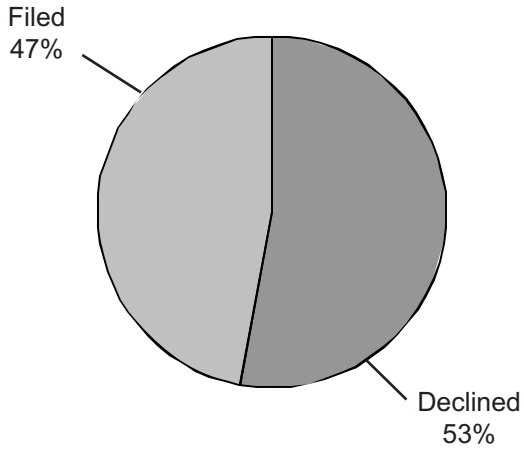
TOTAL ADULT CASES DECLINED FOR FILING FOR 1998 THROUGH 2007

Charge	1998 Count	1999 Count	2000 Count	2001 Count	2002 Count	2003 Count	2004 Count	2005 Count	2006 Count	2007 Count
PC273g	0	0	0	1	0	0	0	1	1	40
PC278	31	47	43	30	32	50	29	39	55	9
PC278.5	46	89	100	65	41	40	49	35	18	57
PC278.5(a)	87	68	43	0	99	115	58	48	55	6
PC286(b)(1)	7	9	11	10	10	11	13	9	18	2
PC286(b)(2)	1	3	4	4	1	0	5	0	4	0
PC286(c)	7	2	0	0	0	0	0	0	0	3
PC286(c)(1)	0	0	0	2	1	5	9	0	2	950
PC288(a)	813	783	400	1,136	1,050	986	1,013	1,094	1,116	0
PC288(b)	0	5	1	1	2	0	2	0	0	14
PC288(b)(1)	0	0	0	26	14	9	10	11	15	1
PC288(c)	2	2	9	0	2	1	0	0	0	72
PC288(c)(1)	0	0	0	63	63	88	83	98	90	10
PC288.5	20	13	8	13	3	1	1	2	4	37
PC288.5(a)	0	0	0	0	46	34	46	35	35	0
PC288.5(b)	0	0	0	27	0	0	0	0	0	9
PC288a(b)(1)	15	9	27	30	17	31	22	21	27	1
PC288a(b)(2)	0	0	3	10	3	2	6	1	5	0
PC288a(c)	12	1	1	0	0	0	0	0	0	4
PC288a(c)(1)	0	0	0	8	9	6	8	4	3	8
PC289(h)	3	3	5	3	7	5	2	8	5	0
PC289(i)	0	1	2	1	0	0	0	4	3	0
PC289(j)	0	0	7	3	0	0	1	2	1	0
PC311.1(a)	0	0	0	0	0	0	2	0	1	2
PC311.10	0	0	1	0	1	0	0	0	4	7
PC311.11(a)	1	3	0	1	5	3	6	0	0	1
PC311.11(b)	0	2	0	1	0	1	4	0	1	0
PC311.2(b)	0	0	0	1	0	0	0	0	0	0
PC311.4(a)	0	0	0	0	0	0	1	0	1	0
PC311.4(b)	2	0	0	1	2	0	0	0	0	0
PC311.4(c)	1	0	2	0	1	0	0	0	0	0
PC647.6	0	0	0	0	0	0	0	0	1	0
PC647.6(a)	7	10	11	12	12	17	11	113	109	20
PC647.6(b)	6	9	8	9	12	6	9	10	4	2
PC664/187(a)	0	0	0	1	0	3	0	0	0	0



Figure 5

**FILED/DECLINED
(ADULT) - PIE CHART**

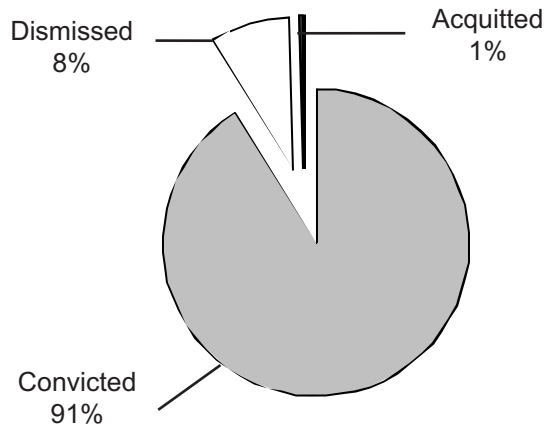


ADULT PRESENTED IN 2007

Declined	2,580
Filed	2,292

Figure 6

**CONVICTED/ACQUITTED/DISMISSED
(ADULT) - PIE CHART**



CONVICTED/ACQUITTED/DISMISSED

Convicted	1,711
Acquitted	10
Dismissed	157

Figure 7

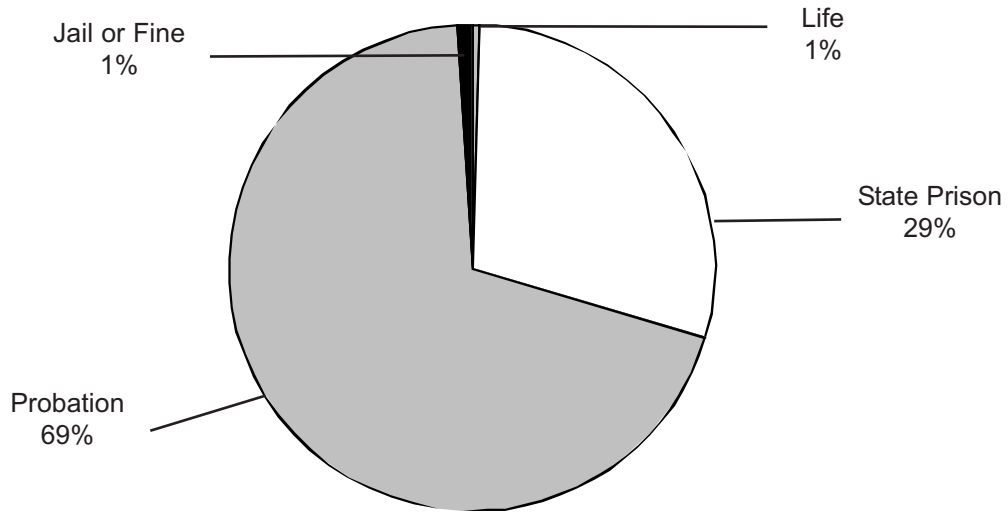
TOTAL ADULT CASES SENTENCED 1998 THROUGH 2007

	1998	1999	2000	2001	2002
Sentence Type	Count	Count	Count	Count	Count
Life	10	9	4	12	24
State Prison	714	605	503	525	533
Probation	1,359	1,388	1,244	1,552	1,624
Jail or Fine	n/a	n/a	n/a	n/a	n/a
	2003	2004	2005	2006	2007
Sentence Type	Count	Count	Count	Count	Count
Life	23	13	8	6	9
State Prison	499	472	349	401	479
Probation	1,411	1,284	1,113	1,077	1,144
Jail or Fine	n/a	n/a	42	43	16



Figure 8

PIE CHART -- SENTENCING (ADULT)

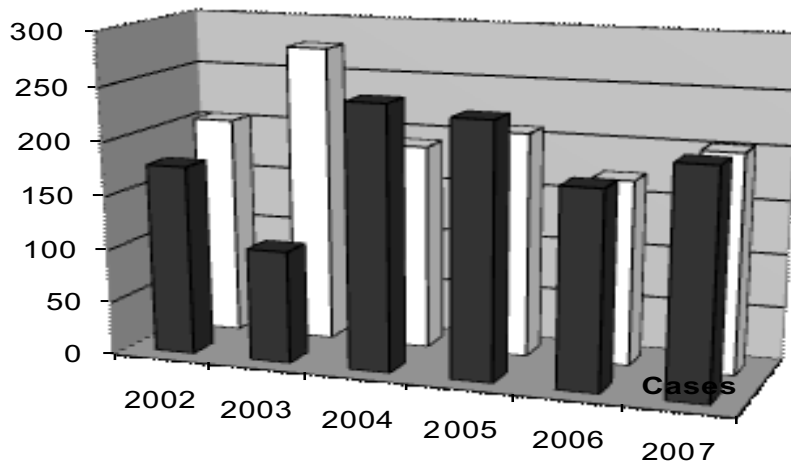


SENTENCE TYPE IN 2007

Life	9	Probation	1,144
State Prison	479	Jail or Fine	16

Figure 9

CHILD ABDUCTION CASES



	2002	2003	2004	2005	2006	2007
New Cases	177	105	245	236	183	209
Cases Closed	205	277	191	209	172	203



Figure 10

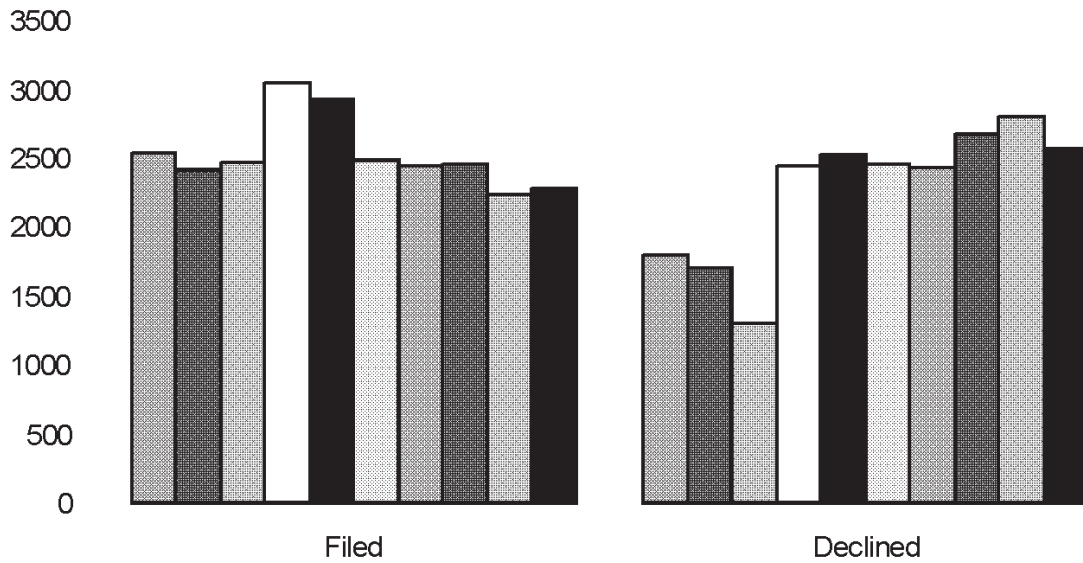
TOTAL ADULT CASES FILED BY ZIP CODE FOR 1998 THROUGH 2007

Zip Code	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
90007	27	56	16	18	24	18	19	52	17	34
90012	533	627	587	546	613	437	424	445	350	363
90022	39	41	60	50	58	39	38	40	35	30
90025	61	66	0	0	0	0	0	0	0	0
90045	0	4	46	99	121	84	118	103	75	57
90066	0	0	1	0	0	0	0	0	0	0
90210	22	14	17	7	9	8	2	4	13	12
90220	107	109	119	199	232	222	243	219	229	292
90231	11	13	10	0	0	0	0	0	0	0
90242	99	55	107	72	54	57	86	61	46	19
90255	108	111	84	53	58	58	47	0	0	0
90262	83	80	58	17	7	0	0	0	0	0
90265	11	15	19	16	16	14	7	13	3	3
90301	50	39	60	37	64	49	45	35	51	54
90401	14	9	14	8	7	0	0	0	0	0
90503	116	101	120	133	124	86	103	75	98	67
90602	53	54	58	55	48	58	64	62	50	63
90650	61	50	47	177	201	200	178	207	178	177
90706	61	43	43	28	33	30	40	80	51	47
90802	130	118	150	118	152	141	131	110	130	83
91016	8	1	0	0	0	0	0	0	0	0
91101	88	100	93	100	74	88	68	77	55	88
91205	48	76	60	59	76	48	40	56	41	34
91331	0	1	2	0	0	0	0	0	0	0
91340	65	75	74	73	75	91	86	65	86	89
91355	34	61	53	44	28	28	56	86	72	48
91401	128	84	79	82	105	74	93	49	81	94
91502	0	0	0	0	0	0	0	0	21	14
91731	109	116	122	128	128	88	66	81	63	79
91766	78	84	133	157	282	268	203	171	166	181
91790	123	111	112	159	116	90	67	80	69	86
91801	56	39	47	48	39	53	50	69	53	40
93534	232	246	223	210	190	170	173	222	213	238



Figure 11

TOTAL ADULT PRESENTED FOR 1998 THROUGH 2007



	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
Field	2,556	2,431	2,483	3,057	2,934	2,499	2,447	2,462	2,246	2,292
Declined	1,808	1,703	1,306	2,456	2,540	2,469	2,435	2,681	2,814	2,580



Figure 12

TOTAL JUVENILE FILINGS BY CHARGE FOR 1999 THROUGH 2007

Charge	1999		2000		2001	
	Felony	Misd	Felony	Misd	Felony	Misd
PC12036(b)	0	0	0	0	0	0
PC187(a)	4	0	2	0	1	0
PC207(a)	0	0	1	0	0	0
PC207(b)	0	0	5	0	1	0
PC208(b)	0	0	0	0	0	0
PC261.5	0	0	0	0	0	0
PC261.5(b)	0	16	0	3	0	11
PC261.5(c)	3	1	0	3	5	0
PC261.5(d)	0	0	0	0	0	0
PC266j(b)(2)	0	0	0	0	0	0
PC266j	0	0	0	0	0	0
PC269(a)(5)	0	0	0	0	0	0
PC271a	1	0	1	0	0	0
PC273a(a)	17	0	22	0	16	0
PC273a(b)	0	8	0	6	0	6
PC273d(a)	4	0	2	0	1	0
PC273g	0	0	0	0	0	0
PC278	3	0	5	0	1	0
PC278.5	0	0	1	0	0	0
PC286(b)(1)	1	0	1	0	1	0
PC286(b)(2)	1	0	0	0	0	0
PC286(c)(1)	0	0	0	0	6	0
PC288(a)	250	0	234	0	234	0
PC288(b)	4	0	2	0	0	0
PC288(b)(1)	0	0	0	0	38	0
PC288(c)	0	0	2	0	0	0
PC288.5(a)	0	0	0	0	0	0
PC288.5(b)	0	0	0	0	42	0
PC288a(b)(1)	6	0	1	0	3	0
PC288a(c)(1)	0	0	0	0	0	0
PC289(h)	3	0	6	0	6	0
PC289(i)	1	0	0	0	0	0
PC311.10	0	0	0	0	0	0
PC311.1(a)	1	0	0	0	0	0
PC311.11(a)	0	1	0	0	0	0
PC311.2(b)	0	0	0	0	2	0
PC311.2(d)	0	0	0	0	0	0
PC311.4(c)	1	0	1	0	0	0
PC647.6(a)	0	0	0	1	0	0
PC647.6(b)	1	0	1	0	0	0
PC664/187(a)	0	0	0	0	0	0



Figure 12 (cont.)
TOTAL JUVENILE FILINGS BY CHARGE FOR 1999 THROUGH 2007

Charge	2002		2003		2004	
	Felony	Misd	Felony	Misd	Felony	Misd
PC12036(b)	0	0	0	0	0	0
PC187(a)	0	0	0	0	0	0
PC207(a)	0	0	3	0	3	0
PC207(b)	4	0	0	0	0	0
PC208(b)	3	0	0	0	0	0
PC261.5	0	0	0	0	0	0
PC261.5(b)	0	8	0	9	0	9
PC261.5(c)	3	2	3	1	3	1
PC261.5(d)	0	0	0	0	0	0
PC266j(b)(2)	0	0	0	0	0	0
PC266j	0	0	1	0	1	0
PC269(a)(5)	0	0	0	0	0	0
PC271a	0	0	0	0	0	0
PC273a(a)	8	0	8	0	8	0
PC273a(b)	0	9	0	5	0	5
PC273d(a)	2	0	2	0	2	0
PC273g	0	0	0	1	0	1
PC278	3	0	2	0	2	0
PC278.5	0	0	0	0	0	0
PC286(b)(1)	0	0	0	0	0	0
PC286(b)(2)	0	0	0	0	0	0
PC286(c)(1)	0	0	2	0	2	0
PC288(a)	185	0	177	0	177	0
PC288(b)	1	0	0	0	0	0
PC288(b)(1)	39	0	55	0	55	0
PC288(c)	0	0	0	0	0	0
PC288.5(a)	39	0	24	0	24	0
PC288.5(b)	0	0	0	0	0	0
PC288a(b)(1)	2	0	4	0	4	0
PC288a(c)(1)	0	0	0	0	0	0
PC289(h)	0	0	6	0	6	0
PC289(i)	0	0	0	0	0	0
PC311.10	0	0	0	0	0	0
PC311.1(a)	0	0	0	0	0	0
PC311.11(a)	0	1	0	0	0	0
PC311.2(b)	0	0	0	0	0	0
PC311.2(d)	0	0	0	0	0	0
PC311.4(c)	1	0	0	0	0	0
PC647.6(a)	0	0	0	0	0	0
PC647.6(b)	0	0	2	0	2	0
PC664/187(a)	1	0	0	0	0	0



Figure 12 (cont.)

TOTAL JUVENILE FILINGS BY CHARGE FOR 1999 THROUGH 2007

Charge	2005		2006		2007	
	Felony	Misd	Felony	Misd	Felony	Misd
PC12036(b)	0	0	0	0	0	1
PC187(a)	0	0	0	0	0	0
PC207(a)	0	0	0	0	0	0
PC207(b)	0	0	0	0	0	0
PC208(b)	0	0	0	0	0	0
PC261.5	0	0	0	0	1	0
PC261.5(b)	0	5	0	4	0	7
PC261.5(c)	1	2	3	0	1	0
PC261.5(d)	0	0	0	0	1	0
PC266j(b)(2)	0	0	0	0	1	0
PC266j	0	0	0	0	0	0
PC269(a)(5)	1	0	0	0	0	0
PC271a	0	0	0	0	0	0
PC273a(a)	9	0	7	0	7	0
PC273a(b)	0	8	0	2	0	8
PC273d(a)	0	0	2	0	2	0
PC273g	0	0	0	0	0	0
PC278	4	0	2	0	0	0
PC278.5	0	0	0	0	0	0
PC286(b)(1)	0	0	1	0	2	0
PC286(b)(2)	0	0	0	0	0	0
PC286(c)(1)	0	0	1	0	2	0
PC288(a)	175	0	176	0	183	0
PC288(b)	0	0	1	0	0	0
PC288(b)(1)	41	0	28	0	44	0
PC288(c)	0	0	0	0	0	0
PC288.5(a)	34	0	22	0	22	0
PC288.5(b)	0	0	0	0	0	0
PC288a(b)(1)	3	0	0	0	0	0
PC288a(c)(1)	0	0	0	0	3	0
PC289(h)	5	0	2	0	0	0
PC289(i)	0	0	0	0	0	0
PC311.10	1	0	0	0	1	0
PC311.1(a)	0	0	0	0	0	0
PC311.11(a)	0	2	0	0	0	0
PC311.2(b)	0	0	0	0	0	0
PC311.2(d)	0	0	2	0	0	0
PC311.4(c)	0	0	0	0	0	0
PC647.6(a)	1	0	0	6	0	0
PC647.6(b)	0	0	0	0	0	0
PC664/187(a)	0	0	0	0	0	0



Figure 13

TOTAL JUVENILE DISMISSALS BY CHARGE FOR 2002 THROUGH 2007

Charge	2002		2003		2004		2005		2006		2007	
	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd
PC207(a)	0	0	1	0	0	0	0	0	0	0	0	0
PC261.5(b)	0	1	0	4	0	0	0	3	0	0	0	1
PC261.5(c)	1	0	2	0	0	0	0	0	0	0	0	0
PC273a(a)	1	0	1	0	0	1	1	0	0	0	1	0
PC273a(b)	0	0	0	0	0	0	0	0	0	0	0	2
PC273d(a)	0	0	0	0	0	0	0	0	0	0	1	0
PC286(c)(1)	0	0	0	0	0	0	0	0	1	0	0	0
PC288(a)	18	0	18	0	18	0	7	0	9	0	14	0
PC288(b)	1	0	0	0	0	0	0	0	0	0	0	0
PC288(b)(1)	3	0	7	0	7	0	2	0	4	0	4	0
PC288.5(a)	3	0	3	0	3	0	3	0	3	0	1	0
PC288a(b)(1)	0	0	1	0	0	0	0	0	0	0	0	0
PC289(h)	0	0	1	0	0	0	0	0	0	0	0	0
PC311.2(d)	0	0	0	0	0	0	2	0	0	0	0	0
PC647.6(a)	0	0	0	0	0	0	0	1	0	0	0	0



Figure 14

TOTAL JUVENILE DECLINATIONS BY CHARGE FOR 1999 THROUGH 2007

Charge	1999		2000		2001		2002		2003	
	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd
PC207(b)	0	0	1	0	0	0	0	0	0	0
PC261.5	0	0	0	0	0	0	0	0	0	0
PC261.5(a)	0	0	0	0	0	2	0	0	0	0
PC261.5(b)	0	23	0	32	0	25	0	0	0	23
PC261.5(c)	1	3	2	5	4	0	0	14	5	3
PC261.5(d)	7	0	9	0	11	0	5	0	1	0
PC266h(b)	0	0	1	0	0	0	0	0	0	0
PC273a(a)	6	0	4	0	2	0	6	0	3	0
PC273a(b)	0	0	0	4	0	3	0	0	0	0
PC273ab	0	0	0	0	0	0	0	2	0	0
PC273d(a)	0	0	0	0	0	0	1	0	0	0
PC278	3	0	10	0	1	0	3	0	2	0
PC278.5(a)	0	0	0	0	0	0	0	0	0	0
PC286(b)(1)	0	0	4	0	3	0	0	0	4	0
PC286(b)(2)	2	0	1	0	1	0	0	0	1	0
PC286(c)(1)	0	0	0	0	2	0	0	0	0	0
PC288(a)	120	0	265	0	167	0	145	0	177	0
PC288(b)(1)	0	0	0	0	5	0	7	0	10	0
PC288(c)(1)	0	0	0	0	0	0	2	0	0	0
PC288a(b)(1)	2	0	11	0	4	0	2	0	1	0
PC288a(b)(2)	0	0	1	0	1	0	1	0	1	0
PC288a(c)(1)	0	0	0	0	1	0	2	0	1	0
PC288.5(a)	0	0	0	0	0	0	0	0	0	0
PC289(h)	3	0	3	0	0	0	2	0	0	0
PC289(i)	0	0	1	0	0	0	0	0	0	0
PC289(j)	0	0	0	0	1	0	0	0	0	0
PC311.11(a)	0	0	0	1	0	0	0	0	0	0
PC647.6(a)	0	0	2	0	0	0	1	0	0	0
PC647.6(b)	0	0	1	0	0	0	0	0	0	0

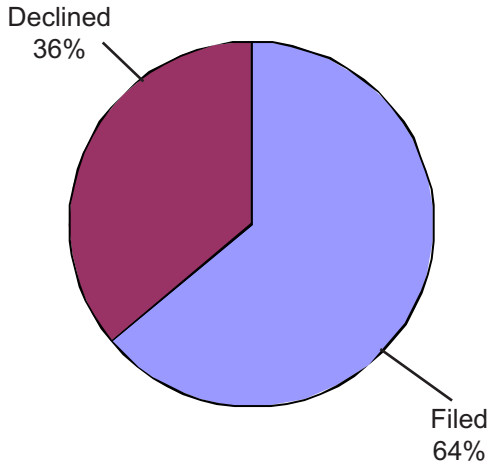


Figure 14 (Cont.)
TOTAL JUVENILE DECLINATIONS BY CHARGE FOR 1999 THROUGH 2007

Charge	2004		2005		2006		2007	
	Felony	Misd	Felony	Misd	Felony	Misd	Felony	Misd
PC207(b)	1	0	0	0	0	0	0	0
PC261.5	0	0	4	0	6	0	1	0
PC261.5(a)	0	0	0	0	0	0	0	0
PC261.5(b)	0	18	0	13	0	26	0	13
PC261.5(c)	2	1	6	2	6	1	3	3
PC261.5(d)	0	0	0	0	0	0	0	1
PC266h(b)	0	0	0	0	0	0	0	0
PC273a(a)	7	0	3	0	2	0	1	0
PC273a(b)	0	0	0	0	0	2	0	3
PC273ab	1	0	0	0	0	0	0	0
PC273d(a)	0	0	1	0	0	0	0	0
PC278	0	0	0	0	0	0	0	0
PC278.5(a)	0	0	0	0	0	0	1	0
PC286(b)(1)	0	0	0	0	1	0	1	0
PC286(b)(2)	0	0	0	0	0	0	0	0
PC286(c)(1)	2	0	0	0	1	0	0	0
PC288(a)	156	0	165	0	182	0	119	0
PC288(b)(1)	3	0	8	0	8	0	9	0
PC288(c)(1)	0	0	2	0	0	0	1	0
PC288a(b)(1)	1	0	2	0	0	0	2	0
PC288a(b)(2)	0	0	1	0	0	0	2	0
PC288a(c)(1)	0	0	0	0	0	0	0	0
PC288.5(a)	1	0	1	0	1	0	0	0
PC289(h)	0	0	2	0	0	0	0	1
PC289(i)	0	0	0	0	0	0	0	0
PC289(j)	0	0	0	0	0	0	0	0
PC311.11(a)	0	0	0	0	0	0	0	0
PC647.6(a)	1	0	0	5	0	1	0	0
PC647.6(b)	0	0	1	0	0	0	0	0



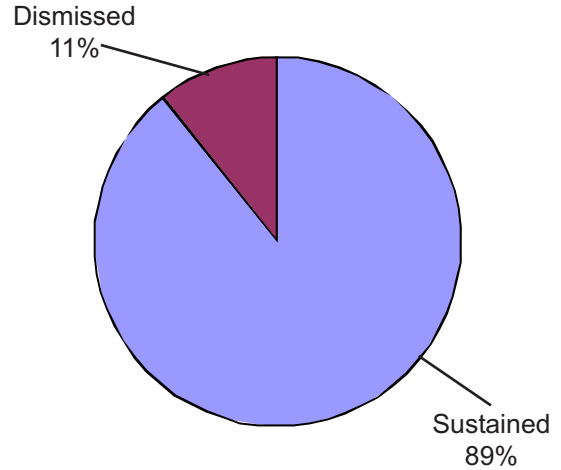
Figure 15
LED/DECLINED (JUVENILE) -
PIE CHART



JUVENILE PRESENTED IN 2007

Filed	286
Declined	161

Figure 16
SUSTAINED/DISMISSED/NOT
SUSTAINED (JUVENILE) - PIE CHART



SUSTAINED/DISMISSED/NOT SUSTAINED

Sustained	200
Dismissed	24

Figure 17
TOTAL JUVENILE CASES FILED BY ZIP CODE FOR 2002 THROUGH 2007

Zip Code	2002	2003	2004	2005	2006	2007
90001	14	23	23	18	19	28
90033	66	51	55	59	64	55
90220	24	27	35	29	18	24
90242	43	29	23	33	34	23
90301	24	23	20	26	13	25
90802	33	40	30	24	13	28
91101	22	21	14	24	17	14
91342	43	50	53	51	30	42
91766	43	41	36	24	46	32
93534	0	0	3	6	5	15



Figure 18

TOTAL FILINGS BY GENDER (ALL CHARGES) FOR 1999 THROUGH 2007

	1999				2000			
Gender	Juvenile	%	Adult	%	Juvenile	%	Adult	%
Female	4,063	16%	31,211	17%	3,549	17%	30,504	17%
Male	21,732	84%	151,598	83%	17,750	83%	150,580	83%
Total	25,795		182,809		21,299		181,084	

	2001				2002			
Gender	Juvenile	%	Adult	%	Juvenile	%	Adult	%
Female	3,992	18%	30,852	17%	3,950	19%	31,497	18%
Male	17,736	82%	146,463	83%	17,036	81%	148,018	82%
Total	21,728		177,315		20,986		179,515	

	2003				2004			
Gender	Juvenile	%	Adult	%	Juvenile	%	Adult	%
Female	3,720	18%	33,289	18%	3,740	18%	33,641	18%
Male	16,795	82%	150,343	82%	16,699	82%	154,994	82%
Total	20,515		183,632		20,439		188,635	

	2005				2006			
Gender	Juvenile	%	Adult	%	Juvenile	%	Adult	%
Female	4,191	19%	35,722	18%	4,188	18%	35,677	19%
Male	18,106	81%	157,849	82%	18,575	82%	155,992	81%
Total	22,297		193,571		22,763		191,669	

	2007			
Gender	Juvenile	%	Adult	%
Female	4,438	19%	37,088	19%
Male	18,525	81%	160,042	81%
Total	22,963		197,130	



Figure 19

**CHILD ABUSE AND NEGLECT STATUTES FILINGS BY GENDER
FOR 1999 THROUGH 2007**

Gender	1999				2000			
	Juvenile	%	Adult	%	Juvenile	%	Adult	%
Female	21	6%	483	19%	26	9%	522	20%
Male	333	94%	2,052	81%	275	91%	2,108	80%
Total	354		2,535		301		2,630	

Gender	2001				2002			
	Juvenile	%	Adult	%	Juvenile	%	Adult	%
Female	30	8%	539	20%	23	7%	581	20%
Male	343	92%	2,154	80%	289	93%	2,353	80%
Total	373		2,693		312		2,934	

Gender	2003				2004			
	Juvenile	%	Adult	%	Juvenile	%	Adult	%
Female	19	6%	544	22%	20	7%	522	21%
Male	286	94%	1,955	78%	272	93%	1,925	79%
Total	305		2,499		292		2,447	

Gender	2005				2006			
	Juvenile	%	Adult	%	Juvenile	%	Adult	%
Female	20	7%	535	22%	12	5%	392	17%
Male	274	93%	1,927	78%	247	95%	1,854	83%
Total	294		2,462		259		2,246	

Gender	2007			
	Juvenile	%	Adult	%
Female	18	6%	464	20%
Male	268	94%	1,828	80%
Total	286		2,282	

Figure 20

TOTAL JUVENILE FILINGS BY GENDER FOR 1999 THROUGH 2007

Gender	1999				2000			
	Child Abuse	%	All Charges	%	Child Abuse	%	All Charges	%
Female	21	6%	4,063		26	9%	3,549	16%
Male	333	94%	21,732		275	91%	17,750	84%
Total	354		25,795		301		21,299	



Figure 20 (Cont.)

TOTAL JUVENILE FILINGS BY GENDER FOR 1999 THROUGH 2007

	2001				2002			
Gender	Child Abuse	%	All Charges	%	Child Abuse	%	All Charges	%
Female	30	8%	3,992	18%	23	7%	3,950	19%
Male	343	92%	17,736	82%	289	93%	17,036	81%
Total	373		21,728		312		20,986	

	2003				2004			
Gender	Child Abuse	%	All Charges	%	Child Abuse	%	All Charges	%
Female	19	6%	3,720	18%	20	7%	3,740	18%
Male	286	94%	16,795	82%	272	93%	16,699	82%
Total	305		20,515		292		20,439	

	2005				2006			
Gender	Child Abuse	%	All Charges	%	Child Abuse	%	All Charges	%
Female	20	7%	4,191	19%	12	5%	4,188	18%
Male	274	93%	18,106	81%	247	95%	18,575	82%
Total	294		22,297		259		22,763	

	2007			
Gender	Juvenile	%	Adult	%
Female	18	6%	4,438	19%
Male	268	94%	18,525	81%
Total	286		22,963	

Figure 21

TOTAL ADULT FILINGS BY GENDER FOR 1999 THROUGH 2007

	1999				2000			
Gender	Child Abuse	%	All Charges	%	Child Abuse	%	All Charges	%
Female	483	19%	31,211	17%	522	20%	30,504	17%
Male	2,052	81%	151,598	83%	2,108	80%	150,580	83%
Total	2,535		182,809		2,630		181,084	

	2001				2002			
Gender	Child Abuse	%	All Charges	%	Child Abuse	%	All Charges	%
Female	539	20%	30,852	17%	581	20%	31,497	18%
Male	2,154	80%	146,463	83%	2,353	80%	148,018	82%
Total	2,693		177,315		2,934		179,515	



Figure 21 (Cont.)

TOTAL ADULT FILINGS BY GENDER FOR 1999 THROUGH 2007

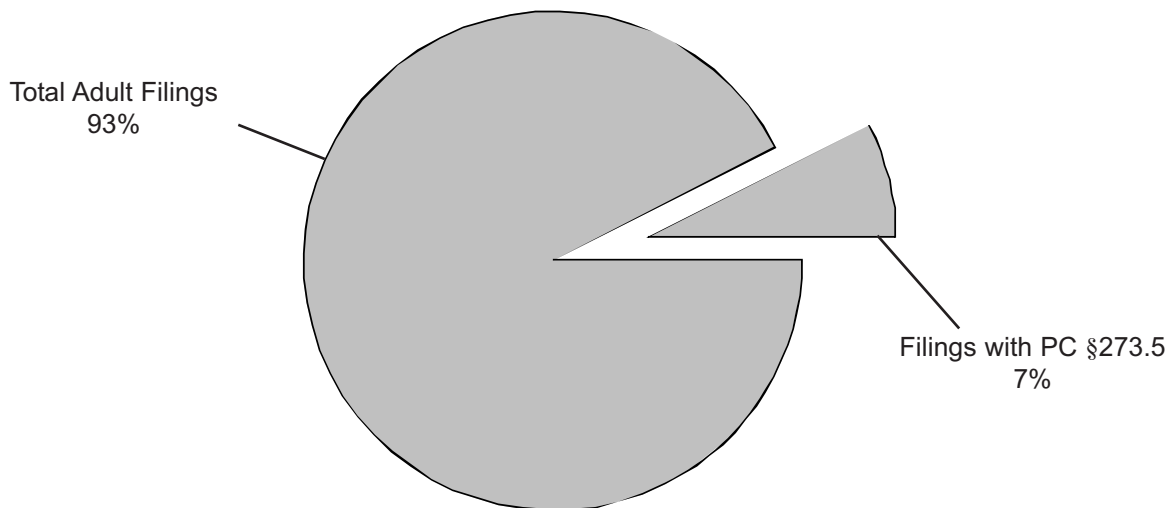
Gender	2003				2004			
	Child Abuse	%	All Charges	%	Child Abuse	%	All Charges	%
Female	544	22%	33,289	18%	522	21%	33,641	18%
Male	1,955	78%	150,343	82%	1,925	79%	154,994	82%
Total	2,499		183,632		2,447		188,635	

Gender	2005				2006			
	Child Abuse	%	All Charges	%	Child Abuse	%	All Charges	%
Female	535	22%	35,722	18%	392	17%	35,677	19%
Male	1,927	78%	157,849	82%	1,854	83%	155,992	81%
Total	2,462		193,571		2,246		191,669	

Gender	2007			
	Juvenile	%	Adult	%
Female	464	20%	37,088	19%
Male	1,828	80%	160,042	81%
Total	2,292		197,130	

Figure 22

**FILINGS WITH PC §273.5 CHARGE VERSUS
TOTAL FILINGS FOR 2007 - PIE CHART**



Total Adult Filings	1,144
Filings with PC §273.5	16



Figure 23 ADULT ICAN FILINGS BY FILING OFFICE ADDRESS 2007	
Address	Count
1945 S HILL ST LOS ANGELES CA 90007	34
210 W TEMPLE ST LOS ANGELES CA 90012	363
4848 E CIVIC CENTER WAY LOS ANGELES CA 90022	30
11701 S LA CIENEGA BL LOS ANGELES CA 90045	57
9355 BURTON WY BEVERLY HILLS CA 90210	12
200 W COMPTON BL COMPTON CA 90220	292
7500 E IMPERIAL HY DOWNEY CA 90242	19
23525 W CIVIC CENTER WY MALIBU CA 90265	3
ONE REGENT ST INGLEWOOD CA 90301	54
825 MAPLE AV TORRANCE CA 90503	67
7339 S PAINTER AV WHITTIER CA 90602	63
12720 NORWALK BL NORWALK CA 90650	177
10025 E FLOWER ST BELLFLOWER CA 90706	47
415 W OCEAN BL LONG BEACH CA 90802	83
300 E WALNUT ST PASADENA CA 91101	88
600 E BROADWAY GLENDALE CA 91205	34
900 THIRD ST SAN FERNANDO CA 91340	89
23747 W VALENCIA BL VALENCIA CA 91355	48
6230 SYLMAR AV VAN NUYS CA 91401	94
300 E OLIVE BURBANK CA 91502	14
11234 E VALLEY BL EL MONTE CA 91731	79
400 CIVIC CENTER PZ POMONA CA 91766	181
1427 W COVINA PY WEST COVINA CA 91790	86
150 W COMMONWEALTH AV ALHAMBRA CA 91801	40
42011 W 4TH ST LANCASTER CA 93534	238
Grand Total Adult Filings	2,292



SYNOPSIS OF SELECTED CALIFORNIA PENAL CODE STATUTES RELATING TO CHILD ABUSE AND NEGLECT

PC §187 – Murder Defined

(a) Murder is the unlawful killing of a human being, or a fetus, with malice aforethought.

(b) This section does not apply to any person who commits an act that results in the death of a fetus if any of the following apply:

1) The act complied with the Therapeutic Abortion Act, Article 2 (commencing with Section 123400) of Chapter 2 of Part 2 of Division 106 of the Health and Safety Code.

2) The act was committed by a holder of a physician's and surgeon's certificate, as defined in the Business and Professions Code, in a case where, to a medical certainty, the result of childbirth would be death of the mother of the fetus or where her death from childbirth, although not medically certain, would be substantially certain or more likely than not.

3) The act was solicited, aided, abetted, or consented to by the mother of the fetus.

(c) Subdivision (b) shall not be construed to prohibit the prosecution of any person under any other provision of law.

PC §207 – Kidnapping

(a) Every person who forcibly, or by any other means of instilling fear, steals or takes, or holds, detains, or arrests any person in this state, and carries the person into another country, state, or county, or into another part of the same county, is guilty of kidnapping.

(b) Every person, who for the purpose of committing any act defined in Section 288 (lewd and lascivious acts) hires, persuades, entices, decoys, or seduces by false promises,

misrepresentations or the like, any child under the age of 14 years to go out of this country, state, or county or into another part of the same county, is guilty of kidnapping.

PC §208(b) – Punishment for Kidnapping; Victim Under 14 Years of Age

If the person kidnapped is under 14 years of age at the time of the commission of the crime, the kidnapping is punishable by imprisonment in the state prison for 5, 8, or 11 years. This subdivision is not applicable to the taking, detaining, or concealing of a minor child by a biological parent, a natural father, as specified in Section 7611 of the Family Code, an adoptive parent or a person who has been granted access to the minor child by a court order.

PC §261.5 – Unlawful Sexual Intercourse with Person under 18

(a) Unlawful sexual intercourse is an act of sexual intercourse accomplished with a person who is not the spouse of the perpetrator, if the person is a minor. For the purposes of this section, a "minor" is a person under the age of 18 years and an "adult" is a person who is at least 18 years of age.

(b) Any person who engages in an act of unlawful sexual intercourse with a minor who is not more than three years older or three years younger than the perpetrator, is guilty of a misdemeanor.

(c) Any person who engages in an act of unlawful sexual intercourse with a minor who is more than three years younger than the perpetrator is guilty of either a misdemeanor or a felony, and shall be punished by imprisonment in a county jail not exceeding one year, or by imprisonment in the state prison.



(d) Any person 21 years of age or older who engages in an act of unlawful sexual intercourse with a minor who is under 16 years of age is guilty of either a misdemeanor or a felony, and shall be punished by imprisonment in a county jail not exceeding one year, or by imprisonment in the state prison for two, three, or four years.

PC §266h – Pimping

(a) - Except as provided in subdivision (b), any person who, knowing another person is a prostitute, lives or derives support or maintenance in whole or in part from the earnings or proceeds of the person’s prostitution, or from money loaned or advanced to or charged against that person by any keeper or manager or inmate of a house or other place where prostitution is practiced or allowed, or who solicits or receives compensation for soliciting for the person, is guilty of pimping, a felony, and shall be punished by imprisonment in the state prison for three, four, or six years.

(b) Any person who, knowing another person is a prostitute, lives or derives support or maintenance in whole or in part from the earnings or proceeds of the person’s prostitution, or from the money loaned or advanced to or charged against that person by any keeper or manager or inmate of a house or other place where prostitution is practiced or allowed, or who solicits or receives compensation for soliciting for the person, when the prostitute is a minor, is guilty of pimping a minor, a felony, and shall be punished as follows:

(1) If the person engaged in prostitution is a minor over the age of 16 years, the offense is punishable by imprisonment in the state prison for three, four, or six years.

(2) If the person engaged in prostitution is

under 16 years of age, the offense is punishable by imprisonment in the state prison for three, six, or eight years.

PC §266i – Pandering

(a) - Except as provided in subdivision (b), any person who does any of the following is guilty of pandering, a felony, and shall be punished by imprisonment in the state prison for three, four, or six years:

(1) Procures another person for the purpose of prostitution.

(2) By promises, threats, violence, or by any device or scheme, causes, induces, persuades, or encourages another person to become a prostitute.

(3) Procures for another person a place as an inmate in a house of prostitution or as an inmate of any place in which prostitution is encouraged or allowed within this state.

(4) By promises, threats, violence, or by any device or scheme, causes, induces, persuades or encourages an inmate of a house of prostitution, or any other place in which prostitution is encouraged or allowed, to remain therein as an inmate.

(5) By fraud or artifice, or by duress of person or goods, or by abuse of any position of confidence or authority, procures another person for the purpose of prostitution, or to enter any place in which prostitution is encouraged or allowed within this state, or to come into this state or leave this state for the purpose of prostitution.

(6) Receives or gives, or agrees to receive or give, any money or thing of value for procuring, or attempting to procure, another person for the purpose of prostitution, or to come into this state or leave this state for the purpose of prostitution.



(b) Any person who does any of the acts described in subdivision (a) with another person who is a minor is guilty of pandering, a felony, and shall be punishable as follows:

(1) If the other person is a minor over the age of 16 years, the offense is punishable by imprisonment in the state prison for three, four, or six years.

(2) If the other person is under 16 years of age, the offense is punishable by imprisonment in the state prison for three, six, or eight years.

PC §266j – Procurement of Child Under Age 16 for Lewd and Lascivious Acts; Punishment

Any person who intentionally gives, transports, provides, or makes available, or who offers to give, transport, provide, or make available to another person, a child under the age of 16 for the purpose of any lewd or lascivious act as defined in Section 288, or who causes, induces, or persuades a child under the age of 16 to engage in such an act with another person, is guilty of a felony and shall be imprisoned in the state prison for a term of three, six, or eight years, and by a fine not to exceed fifteen thousand dollars (\$15,000).

PC §267 – Abduction; Person Under 18 for Purpose of Prostitution; Punishment

Every person who takes away any other person under the age of 18 years from the father, mother, guardian, or other person having the legal charge of the other person, without their consent, for the purpose of prostitution, is punishable by imprisonment in the state prison, and a fine not exceeding two thousand dollars (\$2,000).

PC §269 – Aggravated Sexual Assault of a Child

(a) Any person who commits the following

acts upon a child who is under 14 years of age and seven or more years younger than the person is guilty of aggravated sexual assault of a child:

(1) Rape, in violation of paragraph (2) or (6) of subdivision (a) of Section 261.

(2) Rape or sexual penetration, in concert, in violation of Section 264.1.

(3) Sodomy, in violation of paragraph (2) or (3) of subdivision (c), or subdivision (d) of Section 286.

(4) Oral Copulation, in violation of paragraph (2) or (3) of subdivision (c), or subdivision (d) of Section 288a.

(5) Sexual penetration, in violation of subdivision (a) of Section 289.

(b) Any person who violates this section is guilty of a felony and shall be punished by imprisonment in the state prison for 15 years to life.

(c) The court shall impose a consecutive sentence for each offense that results in a conviction under this section if the crimes involve separate victims or involve the same victim on separate occasions as defined in subdivision (d) of Section 667.6.

PC §271a – Abandonment or Failure to Maintain Child Under 14; False Representation That Child Is Orphan; Punishment

Every person who knowingly and willfully abandons, or who, having ability so to do, fails or refuses to maintain his or her minor child under the age of 14 years, or who falsely, knowing the same to be false, represents to any manager, officer or agent of any orphan asylum or charitable institution for the care of orphans, that any child for whose admission into such asylum or institution



application has been made is an orphan, is punishable by imprisonment in the state prison, or in the county jail not exceeding one year, or by fine not exceeding one thousand dollars (\$1,000) or by both.

PC §271.5 – Safe-Surrender Sites; Parents or Other Individuals Surrendering Custody of Baby

(a) No parent or other individual having lawful custody of a minor child 72 hours old or younger may be prosecuted for a violation of Section 270, 270.5, 271, or 271a if he or she voluntarily surrenders physical custody of the child to personnel on duty at a safe-surrender site.

PC §273a – Willful Harm or Injury to Child; Endangering Person or Health (Note: If the willful harm or abuse leads to the death of the child, the enhancement of PC §12022.95 should be alleged).

(a) Any person who, under circumstances or conditions likely to produce great bodily harm or death, willfully causes or permits any child to suffer, or inflicts thereon unjustifiable physical pain or mental suffering, or having the care or custody of any child, willfully causes or permits the person or health of that child to be injured, or willfully causes or permits that child to be placed in a situation where his or her person or health is endangered, shall be punished by imprisonment in a county jail not exceeding one year, or in the state prison for two, four, or six years.

(b) Any person who, under circumstances or conditions other than those likely to produce great bodily harm or death, willfully causes or permits any child to suffer, or inflicts thereon unjustifiable physical pain or mental suffering, or having the care or custody of

any child, willfully causes or permits the person or health of that child to be injured, or willfully causes or permits that child to be placed in a situation where his or her person or health may be endangered, is guilty of a misdemeanor.

PC §273ab – Assault Resulting in Death of Child Under 8

Any person who, having the care of custody of a child who is under eight years of age, assaults the child by means of force that to a reasonable person would be likely to produce great bodily injury, resulting in the child’s death, shall be punished by imprisonment in the state prison for 25 years to life. Nothing in this section shall be construed as affecting the applicability of subdivision (a) of Section 187 or Section 189.

PC §273d(a) – Corporal Punishment or Injury of Child

Any person who willfully inflicts upon a child any cruel or inhuman corporal punishment or an injury resulting in a traumatic condition is guilty of a felony and shall be punished by imprisonment in the state prison for two, four, or six years, or in a county jail for not more than one year, by a fine of up to six thousand dollars (\$6,000), or by both that imprisonment and fine.

PC §273g – Degrading, Immoral, or Vicious Practices or Habitual Drunkenness in Presence of Children

Any person who in the presence of any child indulges in any degrading, lewd, immoral or vicious habits or practices, or who is habitually drunk in the presence of any child in his care, custody or control, is guilty of a misdemeanor.



PC §278 – Noncustodial Persons; Detainment or Concealment of Child from Legal Custodian

Every person, not having a right to custody, who maliciously takes, entices away, keeps, withholds, or conceals any child with the intent to detain or conceal that child from a lawful custodian, shall be punished by imprisonment in a county jail not exceeding one year, a fine not exceeding one thousand dollars (\$1,000), or both that fine and imprisonment, or by imprisonment in the state prison for two, three, or four years, a fine not exceeding ten thousand dollars (\$10,000), or both that fine and imprisonment.

PC §278.5 – Deprivation of Custody of Child or Right to Visitation

(a) Every person who takes, entices away, keeps, withholds, or conceals a child and maliciously deprives a lawful custodian of a right to custody, or a person of a right to visitation, shall be punished by imprisonment in a county jail not exceeding one year, a fine not exceeding one thousand dollars (\$1,000), or both that fine and imprisonment, or by imprisonment in the state prison for 16 months, or two, or three years, a fine not exceeding ten thousand dollars (\$10,000), or both that fine and imprisonment.

(b) Nothing contained in this section limits the court's contempt power.

(c) A custody order obtained after the taking, enticing away, keeping, withholding, or concealing of a child does not constitute a defense to a crime charged under this section.

PC §286 – Sodomy

(b)(1) Except as provided in Section 288, any person who participates in an act of sodomy with another person who is under 18 years of

age shall be punished by imprisonment in the state prison, or in a county jail for not more than one year.

(b)(2) Except as provided in Section 288, any person over the age of 21 years who participates in an act of sodomy with another person who is under 16 years of age shall be guilty of a felony.

(c)(1) Any person who participates in an act of sodomy with another person who is under 14 years of age and more than 10 years younger than he or she, shall be punished by imprisonment in the state prison for three, six, or eight years.

(2) Any person who commits an act of sodomy when the act is accomplished against the victim's will by means of force, violence, duress, menace, or fear of immediate and unlawful bodily injury on the victim or another person shall be punished by imprisonment in the state prison for three, six, or eight years.

(3) Any person who commits an act of sodomy where the act is accomplished against the victim's will by threatening to retaliate in the future against the victim or any other person, and there is a reasonable possibility that the perpetrator will execute the threat, shall be punished in the state prison for three, six, or eight years.

PC §288 – Lewd or Lascivious Acts

(a) Any person who willfully and lewdly commits any lewd or lascivious act, including any of the acts constituting other crimes provided for in Part 1, upon or with the body, or any part or member thereof, of a child who is under the age of 14 years, with the intent of arousing, appealing to or gratifying the lust, passions, or sexual desires of that person or the child, is guilty of a felony



and shall be punished by imprisonment in the state prison for three, six, or eight years.

(b)(1) Any person who commits an act described in subdivision (a) by use of force, violence, duress, menace, or fear of immediate and unlawful bodily injury on the victim or another person, is guilty of a felony and shall be punished by imprisonment in the state prison for three, six, or eight years.

(2) Any person who is a caretaker and commits an act described in subdivision (a) upon a dependent person by use of force, violence, duress, menace, or fear of immediate and unlawful bodily injury on the victim or another person, with the intent described in subdivision (a), is guilty of a felony and shall be punished by imprisonment in the state prison for three, six, or eight years.

(c)(1) Any person who commits an act described in subdivision (a) with the intent described in that subdivision, and the victim is a child of 14 or 15 years, and that person is at least 10 years older than the child, is guilty of a public offense and shall be punished by imprisonment in the state prison for one, two, or three years, or by imprisonment in a county jail for not more than one year. In determining whether the person is at least 10 years older than the child, the difference in age shall be measured from the birth date of the person to the birth date of the child.

(2) Any person who is a caretaker and commits an act described in subdivision (a) upon a dependent person, with the intent described in subdivision (a), is guilty of a public offense and shall be punished by imprisonment in the state prison for one, two, or three years, or by imprisonment in a county jail for not more than one year.

PC §288a – Oral Copulation

(a) Oral copulation is the act of copulating the mouth of one person with the sexual

organ or anus of another person.

(b)(1) Except as provided in Section 288, any person who participates in an act of oral copulation with another person who is under 18 years of age shall be punished by imprisonment in the state prison, or in a county jail for a period of not more than one year. (b)(2) Except as provided in section 288, any person over the age of 21 years who participates in an act of oral copulation with another person who is under 16 years of age is guilty of a felony.

(c)(1) Any person who participates in an act of oral copulation with another person who is under 14 years of age and more than 10 years younger than he or she, shall be punished by imprisonment in the state prison for three, six, or eight years.

(2) Any person who commits an act of oral copulation when the act is accomplished against the victim’s will by means of force, violence, duress, menace, or fear of immediate and unlawful bodily injury on the victim or another person, shall be punished by imprisonment in the state prison for three, six, or eight years.

(3) Any person who commits an act of oral copulation where the act is accomplished against the victim’s will by threatening to retaliate in the future against the victim or any other person, and there is a reasonable possibility that the perpetrator will execute the threat shall be punished by imprisonment in the state prison for three, six, or eight years.

PC §288.3 – Contact of Minor with Intent to Commit Sexual Offense; Punishment

(a) Every person who contacts or communicates with a minor, or attempts to contact or communicate with a minor, or who knows or reasonably should know that the person is a minor, with intent to commit an offense



specified in Section 207, 209, 261, 264.1, 273a, 286, 288, 288a, 288.2, 289, 311.1, 311.2, 311.4, or 311.11 involving the minor shall be punished by imprisonment in the state prison for the term prescribed for an attempt to commit the intended offense.

(b) As used in this section, "contact or communicates with" shall include direct and indirect contact or communication that may be achieved personally or by use of an agent or agency, any print medium, any postal service, a common carrier or communication common carrier, any electronic communications system, or any telecommunications, wire, computer, or radio communications device or system.

(c) A person convicted of a violation of subdivision (a) who has previously been convicted of a violation of subdivision (a) shall be punished by an additional and consecutive term of imprisonment in the state prison.

PC §288.5 – Continuous Sexual Abuse of a Child

(a) Any person who either resides in the same home with the minor child or has recurring access to the child, who over a period of time, not less than three months in duration, engages in three or more acts of substantial sexual conduct with a child under the age of 14 years at the time of the commission of the offense, as defined in subdivision (b) of Section 1203.066, or three or more acts of lewd or lascivious conduct, as defined in Section 288, with a child under the age of 14 years at the time of the commission of the offense is guilty of the offense of continuous sexual abuse of a child and shall be punished by imprisonment in the state prison for a term of 6, 12, or 16 years.

(b) To convict under this section the trier of fact, if a jury, need unanimously agree only that the requisite number of acts occurred not on which acts constitute the requisite number.

(c) No other act of substantial sexual conduct, as defined in subdivision (b) of Section 1203.066, with a child under 14 years of age at the time of commission of the offenses, or lewd and lascivious acts, as defined in Section 288, involving the same victim may be charged in the same proceeding with a charge under this section unless the other charged offense occurred outside the time period charged under this section or the other offense is charged in the alternative. A defendant may be charged with only one count under this section unless more than one victim is involved in which case a separate count may be charged for each victim.

PC §288.7 – Sexual Intercourse or Custody with Child 10 Years of Age or Younger; Punishment; Oral Copulation or Sexual Penetration of Child 10 Years of Age or Younger; Punishment

(a) Any person 18 years of age or older who engages in sexual intercourse or sodomy with a child who is 10 years of age or younger is guilty of a felony and shall be punished by imprisonment in the state prison for a term of 25 years to life.

(b) Any person 18 years of age or older who engages in oral copulation or sexual penetration, as defined in Section 289, with a child is 10 years of age or younger is guilty of a felony and shall be punished by imprisonment in the state prison for a term of 15 years to life.



PC §289 – Forcible Acts of Sexual Penetration

(h) Except as provided in Section 288, any person who participates in an act of sexual penetration with another person who is under 18 years of age shall be punished by imprisonment in the state prison or in the county jail for a period of not more than one year.

(i) Except as provided in Section 288, any person over the age of 21 years who participates in an act of sexual penetration with another person who is under 16 years of age shall be guilty of a felony.

(j) Any person who participates in an act of sexual penetration with another person who is under 14 years of age and who is more than 10 years younger than he or she, shall be punished by imprisonment in the state prison for three, six, or eight years.

PC §311.1(a) – Sent or Brought into State for Sale or Distribution; Possessing, Preparing, Publishing, Producing, Developing, Duplicating, or Printing Within State; Matter Depicting Sexual Conduct by Minor

Every person who knowingly sends or causes to be sent, or brings or causes to be brought, into this state for sale or distribution, or in this state possesses, prepares, publishes, produces, develops, duplicates, or prints any representation of information, data, or image, including, but not limited to, any film, filmstrip, photograph, negative, slide, photocopy, videotape, video laser disc, computer hardware, computer software, computer floppy disc, data storage media, CD-ROM, or computer-generated equipment or any other computer-generated image that contains or incorporates in any manner, any film or filmstrip, with intent to distribute or to exhibit to, or to exchange with, others, or

who offers to distribute, distributes, or exhibits to, or exchanges with, others any obscene matter, knowing that the matter depicts a person under the age of 18 years personally engaging in or personally simulating sexual conduct, as defined in Section 311.4, shall be punished either by imprisonment in the county jail for up to one year, by a fine not to exceed one thousand dollars (\$1,000), or by both the fine and imprisonment, or by imprisonment in the state prison, by a fine not to exceed ten thousand dollars (\$10,000), or by the fine and imprisonment.

PC §311.2 – Sending or Bringing into State for Sale or Distribution; Printing, Exhibiting, Distributing, Exchanging or Possessing Within State; Matter Depicting Sexual Conduct by Minor; Transaction with Minor

(a) Every person who knowingly sends or causes to be sent, or brings or causes to be brought, into this state for sale or distribution, or in this state, possesses prepares, publishes, produces, or prints, with intent to distribute or to exhibit to others, any obscene matter is for a first offense, guilty of a misdemeanor. If the person has previously been convicted of any violation of this section, the court may, in addition to the punishment authorized in Section 311.9, impose a fine not exceeding fifty thousand dollars (\$50,000).

(b) Every person who knowingly sends or causes to be sent, or brings or causes to be brought, into this state for sale or distribution, or in this state possesses, prepares, publishes, produces, develops, duplicates, or prints any representation of information, data, or image, including, but not limited to, any film, filmstrip, photograph, negative, slide, photocopy, videotape, video laser disc, computer hardware, computer software, computer floppy disc,



data storage media, CD-ROM, or computer-generated equipment or any other computer-generated image that contains or incorporates in any manner, any film or filmstrip, with intent to distribute or to exhibit to, or to exchange with, others for commercial consideration, or who offers to distribute, distributes, or exhibits to, or exchanges with, others for commercial consideration, any obscene matter, knowing that the matter depicts a person under the age of 18 years personally engaging in or personally simulating sexual conduct, as defined in Section 311.4, is guilty of a felony and shall be punished by imprisonment in the state prison for two, three, or six years, or by a fine not exceeding one hundred thousand dollars (\$100,000), in the absence of a finding that the defendant would be incapable of paying that fine, or by both that fine and imprisonment.

(c) Every person who knowingly sends or causes to be sent, or brings or causes to be brought, into this state for sale or distribution, or in this state possesses, prepares, publishes, produces, develops, duplicates, or prints any representation of information, data, or image, including, but not limited to, any film, filmstrip, photograph, negative, slide, photocopy, videotape, video laser disc, computer hardware, computer software, computer floppy disc, data storage media, CD-ROM, or computer-generated equipment or any other computer-generated image that contains or incorporates in any manner, any film, or filmstrip, with intent to distribute or exhibit to, or exchanges with, a person 18 years of age or older any matter, knowing that the matter depicts a person under the age of 18 years personally engaging in or personally simulating sexual conduct, as defined in Section 311.4, shall be punished by imprisonment in the county jail for up to one year, or by a fine not exceeding two

thousand dollars (\$2,000), or by both that fine and imprisonment, or by imprisonment in the state prison. It is not necessary to prove commercial consideration or that the matter is obscene in order to establish a violation of this subdivision. If a person has been previously convicted of a violation of this subdivision, he or she is guilty of a felony.

PC §311.3(a) – Sexual Exploitation of Child

A person is guilty of sexual exploitation of a child if he or she knowingly develops, duplicates, prints, or exchanges any representation of information, data, or image, including, but not limited to, any film, filmstrip, photograph, negative, slide, photocopy, videotape, video laser disc, computer hardware, computer software, computer floppy disc, data storage media, CD-ROM, or computer-generated equipment or any other computer-generated image that contains or incorporates in any manner, any film or filmstrip that depicts a person under the age of 18 years engaged in an act of sexual conduct.

PC §311.4 – Employment or Use of a Minor to Perform Prohibited Acts

(a) Every person who, with knowledge that a person is a minor, or who, while in possession of any facts on the basis of which he or she should reasonably know that the person is a minor, hires, employs, or uses the minor to do or assist in doing any of the acts described in Section 311.2, shall be punished by imprisonment in the county jail for up to one year, or by a fine not exceeding two thousand dollars (\$2,000), or by both that fine and imprisonment, or by imprisonment in the state prison. If the person has previously been convicted of any violation of this



section, the court may, in addition to the punishment authorized in Section 311.9, impose a fine not exceeding fifty thousand dollars (\$50,000).

(b) Every person who, with knowledge that a person is a minor under the age of 18 years, or who, while in possession of any facts on the basis of which he or she should reasonably know that the person is a minor under the age of 18 years, knowingly promotes, employs, uses, persuades, induces, or coerces a minor under the age of 18 years, or any parent or guardian of a minor under the age of 18 years under his or her control who knowingly permits the minor, to engage in or assist others to engage in either posing or modeling alone or with others for purposes of preparing any representation of information, data, or image, including, but not limited to, any film, filmstrip, photograph, negative, slide, photocopy, videotape, video laser disc, computer hardware, computer software, computer floppy disc, data storage media, CD-ROM, or computer-generated equipment or any other computer generated image that contains or incorporates in any manner, any film, filmstrip, or a live performance involving, sexual conduct by a minor under the age of 18 years alone or with other persons or animals, for commercial purposes, is guilty of a felony and shall be punished by imprisonment in the state prison for three, six, or eight years.

(c) Every person who, with knowledge that a person is a minor under the age of 18 years, or who, while in possession of any facts on the basis of which he or she should reasonably know that the person is a minor under the age of 18 years, knowingly promotes, employs, uses, persuades, induces, or coerces a minor under the age of 18 years, or any parent or guardian of a minor under the age of 18 years under his or her control who knowingly permits the minor, to engage in or

assist others to engage in either posing or modeling alone or with others for purposes of preparing any representation of information, data, or image, including, but not limited to, any film, filmstrip, photograph, negative, slide, photocopy, videotape, video laser disc, computer hardware, computer software, computer floppy disc, data storage media, CD-ROM, or computer-generated equipment or any other computer generated image that contains or incorporates in any manner, any film, filmstrip, or a live performance involving, sexual conduct by a minor under the age of 18 years alone or with other persons or animals, is guilty of a felony. It is not necessary to prove commercial purposes in order to establish a violation of this subdivision.

PC §311.10 – Advertising for Sale or Distribution Obscene Matter Depicting a Person Under the Age of 18 Years Engaging in or Simulating Sexual Conduct; Felony; Punishment

(a) Any person who advertises for sale or distribution any obscene matter knowing that it depicts a person under the age of 18 years personally engaging in or personally simulating sexual conduct, as defined in Section 311.4, is guilty of a felony and is punishable by imprisonment in the state prison for two, three, or four years, or in a county jail not exceeding one year, or by a fine not exceeding fifty thousand dollars (\$50,000), or by both such fine and imprisonment.

(b) Subdivision (a) shall not apply to the activities of law enforcement and prosecution agencies in the investigation and prosecution of criminal offenses.

PC §311.11 – Possession or Control of Matter Depicting Minor Engaging in or



Simulating Sexual Conduct; Punishment; Previous Conviction

(a) Every person who knowingly possesses or controls any matter, representation of information, data, or image, including but not limited to, any film, filmstrip, photograph, negative, slide, photocopy, videotape, video laser disc, computer hardware, computer software, computer floppy disc, data storage media, CD-ROM, or computer-generated equipment, or any other computer-generated image that contains or incorporates in any manner, any film or filmstrip, that production of which involves the use of a person under the age of 18 years, knowing that the matter depicts a person under the age of 18 years personally engaging in or simulating sexual conduct, as defined in subdivision (d) of Section 311.4, is guilty of a public offense and shall be punished by imprisonment in the state prison, or by a fine not exceeding two thousand five hundred dollars (\$2,500), or by both the fine and imprisonment.

(b) Any person who commits a violation of subdivision (a) and who has previously been convicted of a crime for which registration is required pursuant to Section 290, or any person who has ever been adjudicated as a sexually violent predator pursuant to Article 4 (commencing with Section 6600) of Chapter 2 of Part 2 of Division 6 of the Welfare and Institutions Code, is guilty of a felony and shall be punished by imprisonment for two, four, or six years.

(c) It is not necessary to prove that the matter is obscene in order to establish a violation of this section.

(d) This section does not apply to drawings, figures, statues, or any film rated by the Motion Picture Association of America, nor does it apply to live or recorded telephone messages when transmitted, disseminated, or distributed as part of a commercial transaction.

PC §647.6 – Annoying or Molesting Child Under 18

(a)(1) Every person who annoys or molests any child under 18 years of age shall be punished by a fine not exceeding five thousand dollars (\$5,000), by imprisonment in a county jail not exceeding one year, or by both the fine and imprisonment.

(a)(2) Every person who, motivated by an unnatural or abnormal sexual interest in children, engages in conduct with an adult whom he or she believes to be a child under 18 years of age, which conduct, if directed toward a child under 18 years of age, would be in violation of this section, shall be punished by a fine not exceeding five thousand dollars (\$5,000), by imprisonment in a county jail for up to one year, or by both that fine and imprisonment.

PC §664/187 – Attempted Murder

When a person attempts to commit murder, but fails, or is prevented or intercepted in its perpetration.

PC §12022.95 – Willful Harm or Injury Resulting in Death of Child; Sentence Enhancement; Procedural Requirements

Any person convicted of a violation of Section 273a, who under circumstances or conditions likely to produce great bodily harm or death, willfully causes or permits any child to suffer, or inflicts thereon unjustifiable physical pain or injury that results in death, or having the care or custody of any child, under circumstances likely to produce great bodily harm or death, willfully causes or permits that child to be injured or harmed, and that injury or harm results in death, shall receive a four-year enhancement for each violation, in addition



to the sentence provided for that conviction. Nothing in this paragraph shall be construed as affecting the applicability of subdivision (a) of Section 187 or Section 192. This section shall not apply unless the allegation is included within an accusatory pleading and admitted by the defendant or found to be true by the trier of fact.

PC §12035 – Storage of Firearms Accessible to Children

(b)(1) Except as provided in subdivision (c), a person commits the crime of “criminal storage of a firearm of the first degree” if he or she keeps any loaded firearm within any premises under his or her custody or control and he or she knows or reasonably should know that a child is likely to gain access to the firearm without the permission of the child’s parent or legal guardian and the child obtains access to the firearm and thereby causes death or great bodily injury to himself, or herself or any other person.

(2) Except as provided in subdivision (c), a person commits the crime of “criminal storage of a firearm of the second degree” if he or she keeps any loaded firearm within any premises that are under his or her custody or control and he or she knows or reasonably should know that a child is likely to gain access to the firearm without the permission of the child’s parent or legal guardian and the child obtains the firearm and thereby causes injury, to himself, herself, or any other person, or carries the firearm either to a public place or in violation of Section 417.

(c) Subdivision (b) shall not apply whenever any of the following occurs:

(1) The child obtains the firearm as a result of an illegal entry to any premises by any person.

(2) The firearm is kept in a locked container or in a location that a reasonable person would believe to be secure.

(3) The firearm is carried on the person or within such a close proximity thereto that the individual can readily retrieve and use the firearm as if carried on the person.

(4) The firearm is locked with a locking device that has rendered the firearm inoperable.

(5) The person is a peace officer or member of the armed forces or the National Guard and the child obtains the firearm during, or incidental to, the performance of the person’s duties.

(6) The child obtains, or obtains and discharges, the firearm in a lawful act of self-defense or defense of another person, or persons.

(7) The person who keeps a loaded firearm on any premise that is under his or custody and control has no reasonable expectation, based on objective facts and circumstances that a child is unlikely to be present on the premises.

PC §12036 – Firearms Accessed by Children and Carried off the Premises

(b) A person who keeps a pistol, revolver or other firearm capable of being concealed upon the person, loaded or unloaded, within any premises that are under the person’s custody and control and the person knows or reasonably should know that a child is likely to have access to that firearm without the permission of the child’s parent or legal guardian and the child obtains access to the firearm and thereafter carries that firearm off-premises, shall be punished by imprisonment in a county jail not exceeding one year, by a fine not exceeding one thousand dollars (\$1,000), or by both that imprisonment and fine.

(c) A person who keeps any firearm within



any premises that is under his or her custody or control and he or she knows or reasonably should know that a child is likely to gain access to the firearm without permission of the child's parent or legal guardian and the child obtains access to the firearm and thereafter carries that firearm off-premises to any public or private preschool, elementary school, middle school, high school, or to any school-sponsored event, activity, or performance whether occurring on school grounds, or elsewhere, shall be punished by imprisonment in a county jail not exceeding one year, by a fine not exceeding five thousand dollars (\$5,000), or by both that imprisonment and fine.



GLOSSARY OF TERMS

Accusatory Pleading – An indictment, information, or complaint by which the government begins a criminal prosecution.*

Acknowledgment of Discovery – A form signed by the defense attorney acknowledging the receipt or inspection of specified documents relating to the court case.

Adjudication – The legal process of resolving a dispute.* In criminal court, this term generally means a determination of guilty or not guilty. When used to describe a proceeding in juvenile delinquency court, it describes the trial process under which the judge hears evidence as the trier of fact in order to determine whether a petition filed on behalf of the minor in court is found to be true (sustained petition) or not true (dismissed). As the purpose of a delinquency court proceeding is to determine the truth of the matter alleged and, if sustained, develop a rehabilitation plan on behalf of the minor, a true finding by the court resulting from and adjudication does not have the same consequences as a conviction for a similarly charged adult defendant.

Adult – Age when a person is considered legally responsible for his or her actions. For criminal actions, all persons 18 years of age and over in California are considered adults. In some cases, juveniles may be tried as adults.

Amend a Complaint or Information – One amends a complaint or information by adding or deleting from it. This must be

approved by the court. It can be done either by interlineation or by submitting a new document containing the charges. Generally a complaint or information is amended based on newly discovered evidence or to conform to proof presented at a court hearing.

Appeal – A proceeding undertaken to have a lower court's decision reconsidered by a court of higher authority.* The appellate court may refuse to hear the case, affirm the lower court's ruling, or reverse or overturn the lower court ruling on the issue(s) being appealed.

Appellate Court – A court of review which determines whether or not the ruling and judgments of the lower court were correct.

Arraignment – The initial step in a criminal prosecution whereby the defendant is brought before the court to hear the charges and enter a plea.* The defendant is given a copy of the complaint, petition, or other accusatory instrument, and informed of his or her constitutional rights.

Arrest – The physical taking of a person into custody for violating the law, the purpose of which is to restrain the accused until he can be held accountable for the offense at court proceedings. The legal requirement for an arrest is probable cause.

Arrest Warrant – Authorization, issued only upon a showing of probable cause, directing a law enforcement officer to arrest and bring a person to court.*



Bail – A monetary or other form of security given to ensure the appearance of the defendant at every stage of the proceedings in lieu of actual physical confinement in jail.

Bench Warrant – A writ issued directly by a judge to a law enforcement officer, especially for the arrest of a person who has been held in contempt; has been indicted; has disobeyed a subpoena; or has failed to appear for a hearing or trial.*

Beyond a Reasonable Doubt – The burden of proof in a criminal trial. The California jury instruction defines reasonable doubt as: It is not a mere possible doubt; because everything relating to human affairs is open to some possible or imaginary doubt. It is that state of the case which, after the entire comparison and consideration of all of the evidence, leaves the minds of the jurors in that condition that they cannot say they feel an abiding conviction of the truth of the charge.

Booking – An administrative record of an arrest made in police stations listing the offender's name, address, physical description, date of birth, employer, time of arrest, offense, and the name of arresting officer. Photographing and fingerprinting the offender are also part of the booking process.

Burden of Proof – A party's duty to prove a disputed assertion or charge.*

Case Law – Law derived from previous court decisions, as opposed to statutory law which is passed by legislature.

Certified Plea – Occurs when a defendant pleads guilty or no contest to a felony charge thereby foregoing a preliminary hearing.

Change of Venue – Moving the trial away from the responsible judicial jurisdiction to another to obtain an impartial jury (usually done when pretrial publicity prevents the selection of an impartial jury in the court of original jurisdiction).

Charge – A formal allegation that a person has committed a crime.

Charging Document – Generic term used in place of complaint, information, or grand jury indictment. The document lists the date of the crime and the code section which defines the crime.

City Attorney – Prosecutor for a city. City Attorneys represent the people of a city and prosecute infractions and misdemeanors occurring within that city.

Classification of Crime – Crimes are designated as felonies or misdemeanors. Some crimes may be either misdemeanors or felonies (wobblers). Under PC §17(b)(4), the prosecuting attorney may designate a wobbler as a misdemeanor. Under PC § 17(b)(5), the court may designate a wobbler as a misdemeanor.

Complaint – A sworn allegation made in writing to a court or judge that an individual has committed one or more public offenses.

Consolidation – The combination of two or more charging documents into one. The



charging documents can be for one or more defendants.

Continuance – The postponement of a court proceeding to a future date.

Conviction – A judgment of guilt; this occurs as a result of a verdict by a jury, a plea by a defendant, or a judgment by a court that the accused is guilty as charged.

Count – The part of an indictment, information, or complaint charging the defendant with a distinct offense.* In law enforcement, this is the number of offenses with which a suspect has been charged. For instance, one count of PC §211 (robbery) and two counts of PC §244 (assault with a caustic substance). In other criminal justice agencies (District Attorney’s Office, courts, etc.) this is the sequence number identifying a charge on the accusatory pleading document. For instance, Count 1 is for PC §211, Count 2 is for PC §244, and Count 3 is for PC §244.

Court Calendar – A list of matters scheduled for trial or hearing.

Court Case – A case that has been identified, numbered, and is recognized by the court system. Not to be confused with a District Attorney case (see below).

Credit – Time in days that reduces an inmate’s sentence term. Credits are typically issued for "good time and work time" or time in custody already served by a defendant.

Crime – Any act that lawmakers designated as forbidden and subject to punishment imposed by the courts.

De Novo Hearing – In juvenile court proceedings, the rehearing where the judgment in the initial hearing is set aside and the new hearing takes place before a judge as if the first hearing never occurred. The de novo hearing may occur when the first hearing was held before a referee.

Defendant – The accused in criminal proceedings.

Demurrer – A written document filed (or plea entered) by a defendant that attacks the accusatory pleading for failing to state sufficient facts to constitute a public offense.

Dennis H. Hearing – An optional juvenile detention hearing requested by the defense to attack the sufficiency of the evidence presented by the District Attorney’s Office that the minor has committed a crime or crimes which require the continued detention of the minor.

Detention Hearing – In delinquency court, a hearing held to determine whether a juvenile accused of delinquent conduct should be detained, continued in confinement, or released pending an adjudication.*

Determinate sentence – A sentence for a fixed length of time rather than for an unspecified duration.*



Diagnostic – In appropriate juvenile cases, the court has the power to order a diagnostic report from the California Department of Corrections and Rehabilitation, Division of Juvenile Justice regarding whether the juvenile would benefit from any of the programs offered by the Department of Corrections and Rehabilitation, Juvenile Division. In adult cases, the court can refer a convicted defendant to the California Department of Corrections and Rehabilitation pursuant to PC §1203.03 for a 90-day period and a diagnostic report recommending whether the defendant should be committed to state prison.

Discovery – Procedure whereby one party to an action gains information held by another party.

Dismiss a Case – To terminate a case without a trial or conviction.

Disposition – For juvenile offenders, the equivalent of sentencing for adult offenders. Possible dispositions are dismissal of the case; release of the juvenile to parental custody; place the juvenile on probation; or send juvenile to a county institution or to a state correctional institution.

District Attorney Case – When crimes are committed, law enforcement conducts an investigation and then submits its reports to the District Attorney's Office for filing consideration. If sufficient evidence exists to prove the case beyond a reasonable doubt, the reviewing DDA will file the appropriate charges. The charging document, police reports, attorneys' work product, and other

evidence constitute the District Attorney case. A case may represent more than one defendant and more than one count. Both adult and juvenile District Attorney's cases have an internal number as well as the official case number issued by the Superior Court. The cases may be tracked in the District Attorney's Office internal computer system, PIMS (Prosecutor's Information Management System).

Diversion Program – A program that refers certain criminal defendants before trial to community programs on job training, education, and the like, which if successfully completed, may lead to the dismissal of the charges.*

Docket – A formal record of the events in which a judge or court clerk briefly notes all the proceedings and filings in a court case.*

Double Jeopardy – The Fifth Amendment of the United States Constitution prohibits a second prosecution or sentencing of a person for the same charge if jeopardy has attached unless there has been an appeal from a conviction.*

Edsel P. Hearing – A juvenile court hearing to determine if there is sufficient prima facie evidence to substantiate that a WIC §707b offense (which gives rise to the presumption that the juvenile is not fit to be tried as a juvenile) has been committed.

Enhancement/Allegation – Statutes that increase the punishment for a crime.



Evidence – Something (including testimony, documents, and tangible objects) that tend to prove or disprove the existence of an alleged fact.*

Expert Witness – A witness qualified by knowledge, skill, experience, training, or education to provide a scientific, technical, or other specialized opinion about the evidence or a fact issue.*

Expungement of Record – The removal of a conviction from a person’s criminal record.*

Felony – A serious crime punishable by imprisonment for more than one year or by death.*

Filing – In the District Attorney’s Office, this is the process where the prosecutor reviews the facts and evidence presented by law enforcement to make a determination as to whether crimes may be charged, and if so, what the appropriate charges are. The prosecutor evaluates the case to determine not only whether all of the legal elements of the crimes are present but also whether it is reasonably likely that the trier of fact could find the accused guilty beyond a reasonable doubt. Once the charging document is prepared in the District Attorney’s Office, it is then filed in Superior Court.

Fitness Hearing – A hearing to determine if a juvenile should be tried as an adult rather than remain in the juvenile system.

Grand Jury – A group of citizens (usually 23 in number) that investigates wrongdoing and

that, after hearing evidence submitted by the prosecutor, decide by majority vote whether to indict defendants. Grand jury proceedings are conducted in secret and without the presence of the accused or his attorney.

Habeas Corpus Proceeding – A hearing to determine the legality of a person’s confinement.

Hearing – A judicial session, usually open to the public, held for the purpose of deciding issues of fact or of law, sometimes with witnesses testifying.*

Held to Answer – In felony cases, a magistrate decides at the preliminary hearing whether there is sufficient cause to believe the defendant is guilty of felony charges.

Home on Probation – A juvenile delinquency court disposition which allows a minor to remain in his home while complying with the terms and conditions of probation.

Home Supervision Program (HSP) – A program in which persons who would otherwise be detained in the juvenile hall are permitted to remain in their homes pending court disposition of their cases, under the supervision of a probation officer.

Hung Jury – A jury that is unable to reach agreement about whether a defendant is guilty or not guilty. This allows the prosecution to retry the case if it chooses unless the trial judge decides otherwise and dismisses the case.



In Lieu of Filing – A procedure where a probation violation petition is filed pertaining to the facts of a new crime instead of filing a new criminal complaint on those same facts.

Indeterminate Sentence – An open-ended sentence, such as from 25 to life, that gives correctional authorities the right to determine the amount of time actually served within the prescribed limits.

Indictment – A written accusation returned by a grand jury charging an individual with a specified crime after determining probable cause.

Informal Probation – Supervised probation of a juvenile offender. This status may be granted by a probation officer (in lieu of requesting the filing of a petition) or by the court (suspending the delinquency proceedings) prior to adjudication. This is similar to diversion in the adult system.

Information – Like the complaint or indictment, a formal charging document.

Infraction – A crime that is not punishable by imprisonment.

In Propria Persona (also known as In Pro Per, or Pro Per) – Refers to a defendant who represents his or herself in a legal action. The defendant has a legal right to counsel but also has the right to self-representation. Before the court may accept a waiver to the right to counsel, it must satisfy itself that the defendant is making a knowing and intelligent waiver of that right. For capital

(death penalty) cases in California, the court is statutorily obligated to appoint defense counsel even if the defendant asks to act as his or her own attorney.

Interlineation – The changing of a charging document, with court approval, by all parties writing the change on their copy of the charging document.

Jeopardy – The risk of conviction and punishment that a criminal defendant faces at trial. In a jury trial, jeopardy attaches after the jury has been impaneled and in a court trial, after the first witness is sworn.*

Joinder – The joining of several offenses into one charging document which either arise from the same factual incident or are offenses of the same nature.

Jurisdiction – The type (e.g., territorial, subject matter, appellate, personal, etc.) or range of a court's or law enforcement agency's authority.*

Jury – A group of citizens, randomly selected from the community, chosen to hear evidence and decide questions of fact in a trial.

Juvenile Court Jurisdiction – Under WIC §602, any person under the age of 18 years when he or she violates any law of California or the United States, or any city or county of California defining crime (other than an ordinance establishing curfew based solely on age), is within the jurisdiction of the juvenile court, which may adjudge such person to be a ward of the court, except in those circumstances where the offense



provides that the juvenile may be tried as an adult.

Law Enforcement Agency – Agency with the responsibility of enforcing the laws and preserving the peace of its jurisdiction.

Lawful Custody – As used in reference to the Safe-Surrender law in PC §271.5, Health and Safety Code §1255.7 defines “lawful custody” as physical custody of a minor 72 hours old or younger accepted by a person from a parent of the minor, who the person believes in good faith is the parent of the minor, with the specific intent and promise of effecting the safe surrender of the minor.

Minor – A person who has not reached full legal age; a child or a juvenile.*

Minute Order – An order recorded in the minutes of the court rather than directly on a case docket.*

Misdemeanor – A crime that is less serious than a felony and is usually punishable by fine, penalty, forfeiture, or confinement in a place other than prison.*

Mistrial – A trial that a judge brings to an end, without a determination on the merits, because of a procedural error or serious misconduct occurring during the proceedings,* or due to a hung jury.

Motion – A written or oral application requesting a court to make a specified ruling or order.

Motion to Dismiss Pursuant to PC §995 – A motion made in superior court to dismiss a case on one or more counts based on insufficient evidence produced at the preliminary hearing.

Obscene Matter – Pursuant to PC §311(a), this means matter, taken as a whole, that to an average person, applying contemporary statewide standards, appeals to the prurient interest, that taken as a whole, depicts or describes sexual conduct in a patently offensive way, and that, taken as a whole, lacks serious literary, artistic, political, or scientific value.

Office Hearing – The District Attorney’s Office handles certain criminal situations in a non-courtroom setting with the objective of solving problems before they become more serious. These criminal matters are minor in nature. The hearing officer speaks to both parties and attempts to resolve the matter. If that fails, a decision is made whether to file, seek additional information, or not file a complaint.

Petition – A formal written request presented to a court or other official body.* In juvenile court, the Probation Department requests the District Attorney’s Office to file a petition for a juvenile. The charging document is called a petition in juvenile court, while the charging document is called an indictment, information, or complaint in adult court.

Petition (WIC §601) – Juvenile charging document prepared by the District Attorney’s Office (and occasionally the probation officer) for those offenses (typically matters



involving incorrigibility) that are not violations of the law if committed by an adult.

Petition (WIC §602) – Juvenile charging document prepared by the District Attorney's Office for those offenses that are violations of the law if committed by an adult.

Petition (WIC §777) – Juvenile charging document prepared by the District Attorney's Office for those offenses that constitute a violation of probation (making it necessary to modify the previous orders of the court).

Plea – An answer to formal charges by an accused. Possible pleas include guilty, nolo contendere or no contest, not guilty, and not guilty by reason of insanity.

Plea Bargaining – The process whereby the accused and the prosecutor negotiate a mutually satisfactory disposition of the case. This is also known as a case settlement or negotiated plea.

Preliminary Hearing – A criminal hearing to determine whether probable cause exists to prosecute an accused person. If sufficient evidence exists, the case will be held to answer and an information will be filed. At the hearing, the prosecution must establish a prima facie case, that is, show that a felony occurred and to raise strong suspicion that the defendant committed it.

Preponderance of Evidence – The standard of proof in a civil trial. It is less than required in a criminal trial (i.e., beyond a reasonable doubt). Specifically, the weight of evidence

for guilt is deemed greater than the weight of evidence for innocence.

Pre-Sentence Report – A report by a probation officer made prior to sentencing that diagnoses offenders, predicts their chance of being rehabilitated, recommends to the court that specific sentence elements be imposed upon the defendant, and addresses the danger they pose to society.

Pre-Trial Hearing – The pre-trial hearing is held to facilitate case settlement prior to the trial. Various motions may also be heard at the pretrial.

Prima Facie – A term that usually refers to the strength of evidence of a criminal charge. Prima facie evidence is sufficient to establish a fact or a presumption of fact unless disproved or rebutted.*

Probable Cause – A reasonable ground to suspect that a person has committed or is committing a crime or that a place contains specific items connected with a crime.* The evidentiary criterion necessary to sustain an arrest or the issuance of an arrest or search warrant; less than an absolute certainty or "beyond a reasonable doubt" but greater than mere suspicion or "hunch".

Probation – A procedure whereby a convicted defendant is not punished by incarceration alone but is released for a designated period of time subject to conditions imposed by the court. One of the conditions of probation can be a period of incarceration in local (county) institutions.



Probation Violation – When a person does not abide by one or more of the conditions of his probation.

Probation/Sentencing Hearing – A hearing after a defendant has been found guilty or pled guilty where the sentence is imposed.

Register of Action – A formal record of the events that have occurred in a superior court case maintained by the court clerk.

Registration – Pursuant to PC §290, persons convicted of certain sexual offenses must give all pertinent identifying information to the law enforcement agency in the area where they live and, if applicable, where they attend a university, college, or community college within a certain time period. This requirement is often for life.

Safe-Surrender Site – As defined in Health and Safety Code §1255.7, (a) a location designated by the board of supervisors of a county to be responsible for accepting physical custody of a minor child who is 72 hours old or younger from a parent or individual who has lawful custody of the child and who surrenders the child pursuant to PC §271.5 and (b) a location within a public or private hospital that is designated by that hospital to be responsible for accepting physical custody of a minor child who is 72 hours old or younger from a parent or individual who has lawful custody of the child and who surrenders the child pursuant to PC §271.5.

Sealing of Records – The act or practice of officially preventing access to particular records, in the absence of a court order.*

Search Warrant – A judge’s written order authorizing a law enforcement officer to conduct a search of a specified place and to seize evidence.*

Sentence – The criminal sanction imposed by the court upon a convicted defendant. When there are multiple charges, the court may sentence concurrently or consecutively. If the sentences are concurrent, they begin the same day and sentence is completed after the longest term has been served. If the sentence is to be served consecutive to another charge, the defendant must complete the first sentence before the other term of incarceration begins. Within one court case, sentences for charges can be consecutive and if the defendant has more than one court case, sentences for each court case can be consecutive.

Severance – Can involve the separating of two or more defendants named in the same charging document. Also, can involve the separating of two or more charges against a defendant into multiple cases.

Stay – A judicial order whereby some action is forbidden or held in abeyance until some event occurs or the court rescinds its order.

Submission on Transcript (SOT) – If the defendant waives his right to a jury trial and the right to confront and cross-examine witnesses, and the Deputy District Attorney concurs, the case may be submitted to the judge on the preliminary hearing transcript.

Subpoena – A court order directing a person to attend a court proceeding.



Subpoena Duces Tecum (SDT) – A court order directing a witness to bring to court documents that are under the witness' control.

or prohibit action in the lower court where the criminal case is pending.

Sustain the Petition – The judicial finding in a juvenile delinquency case. If the court finds the allegations to be true, it sustains the petition; this is functionally equivalent to a guilty verdict. If the petition is not sustained, the court will find the petition not true; this is functionally equivalent to a not guilty verdict.

*Definition from Black's Law Dictionary, (8th ed. 2004)

Trier of Fact (also known as the Fact Finder)
– Hears testimony and reviews evidence to rule on a factual issue. In a preliminary hearing, a magistrate is the trier of fact. In a jury trial, jurors are the triers of fact. In a court trial, the judge is the trier of fact. In all instances, the court rules on the law.

Venue – The place designated for trial.

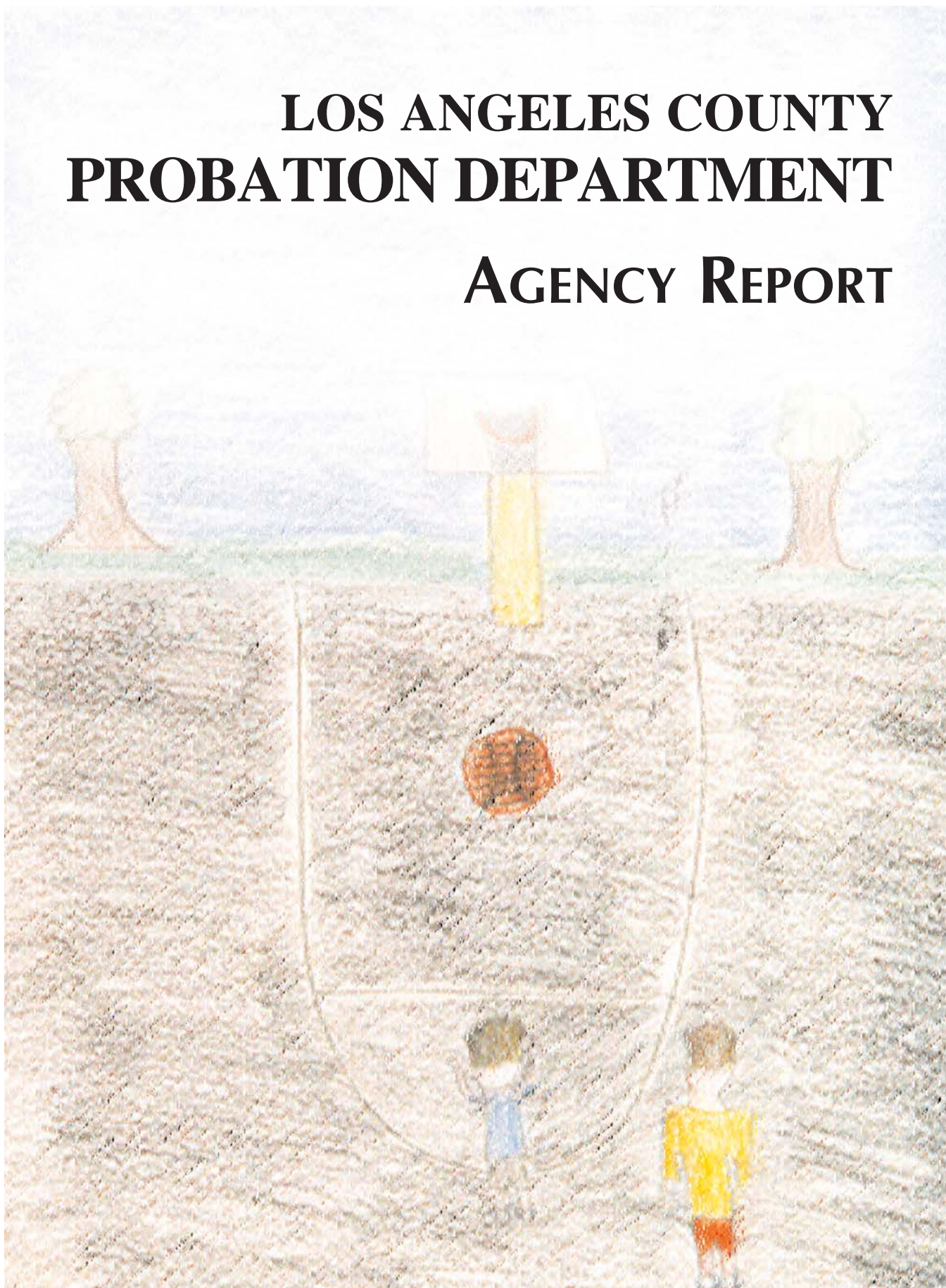
Vertical Prosecution – The prosecution of a defendant whereby a specific prosecutor is assigned for the duration of the case.

Witness – One who gives evidence in a cause before a court and who attests or swears to facts or gives or bears testimony under oath.

Wobbler – A criminal offense that is punishable as either a felony or a misdemeanor.

Writ – An appellate remedy seeking an order from a higher court either to mandate

**LOS ANGELES COUNTY
PROBATION DEPARTMENT
AGENCY REPORT**





THE LOS ANGELES COUNTY PROBATION DEPARTMENT

The Los Angeles County Probation Department was established in 1903 with the enactment of California's first probation laws. As a criminal justice agency, the Department has expanded to become the largest probation department in the world.

The Chief Probation Officer has jurisdiction over the entire county, including all of the cities within its borders. The legal provisions setting forth his office, duties, and responsibilities are found in the California Welfare and Institutions Code and Penal Code.

Currently funded by a net appropriation of approximately \$630 million, the Department provides an extensive range of services through the efforts of over 5,800 employees deployed in more than 50 locations throughout the County. The Department serves all the municipal and superior courts of the County. Its services to the community include recommending sanctions to the court, enforcing court orders, operating juvenile detention facilities and probation camps, assisting victims, and providing corrective assistance to individuals in conflict with the law.

The Los Angeles County Probation Department is among the national leaders in the correctional field with over two-thirds of its employees engaged in some professional aspect of probation work. This includes Deputy Probation Officers (DPO), Pretrial Release Investigators, Detention Services Officers, and Supervisors. Its employees staff over 50 work locations, including juvenile detention centers, residential treatment facilities, and field services offices.

The Department strives for detailed and complete investigation reports, lower caseloads for DPOs, increased supervision of the individual probationer, and a higher level of

coordination with other criminal justice and child protective agencies.

INVESTIGATION SERVICES

Both adults (age 18 and older) and juveniles (under age 18 at the time of commission of a crime) may be referred to the Department for investigation. Adults are referred by the Los Angeles County Superior Court Criminal Division while juveniles are referred by the Los Angeles County Superior Court Juvenile Court, law enforcement agencies, schools, parents, or other interested community sources. The DPO provides a court report with a recommendation supported by factors that include but are not limited to the offender's social history, prior record, statement from the victim and other interested parties, and an analysis of the current living arrangements. Recommendations support the needs of the individual while considering the safety of the community and ensuring victim's rights.

If the court grants probation, the DPO enforces the terms and conditions ordered by the court, monitors the probationer's progress in treatment, and initiates appropriate corrective action if the conditions are violated.

If a child is under the jurisdiction of the Los Angeles County Superior Court Dependency Court, the DPO works cooperatively with the Children's Social Worker (CSW) from the Los Angeles County Department of Children and Family Services assigned to the case to ensure the child's safety and welfare. The DPO's assessment of the offender's response to court-ordered treatment may have a significant influence in determining the outcome of a child's placement.

ADULT FIELD SERVICES BUREAU

The Adult Field Services Bureau (AFSB)



consists of the Pretrial Services Division (PTS), Adult Investigations, Adult Supervision and Special Services functions conducted at nineteen field offices and more than 19 additional branch offices in court locations. Pretrial Services Division completes approximately 88,095 eligibility assessments/reports a year. Adult Investigations conducts approximately 72,000 investigations per year and AFSB has under its supervision approximately 62,000 adult probationers, resulting in 92,000 supervision reports per year. Within PTS, Investigations, Supervision and Special Services, there are a variety of service levels and specialized programs. AFSB consists of 88 Investigator Aides, 59 Investigators, and 546 Deputy Probation Officers, who receive support from administrative and clerical staff. Reserve Deputy Probation Officers, Retired Deputy Probation Officers, Student Professional Workers, Student Workers, and volunteers work within AFSB to enhance our services.

With an investigative staff of 220 Deputy Probation Officers, AFSB conducts approximately 72,000 investigations per year utilizing the latest in computer technology, including the use of an information management system and video interviewing of defendants in custody. Of these investigations, approximately 5,300 are misdemeanor cases and the remainder are felony cases.

ADULT – SPECIALIZED SUPERVISION PROGRAMS

The Adult Field Services Bureau operates several specialized caseloads addressing specific populations, needs and/or risk factors. The following specialized caseloads address child abuse in some capacity: Child Threat, Pre-Natal/Post-Natal Substance Abuse Recognition, Domestic Violence, Family Caseloads, High Risk Offenders, Domestic

Violence and Child Abuse Monitoring Unit, and the Medi-Cal Administrative Activities. The pilot projects and programs under planning and development that address child abuse are the Gender Based Supervision and Sex Offender Caseloads. The descriptions of these programs are listed below.

CHILD THREAT

Any case in which there is a reason to believe that the adult defendant's behavior poses a threat to a child because of a history of violence, drug abuse, sexual molestation, or cruel treatment, regardless of official charges or condition of probation, may be assigned to a Child Threat caseload to promote the safety of the child and the family. In the event that the number of Child Threat defendants exceeds the total that can be accommodated by the Child Threat DPOs, probationers posing the highest risk to victims and potential victims are given priority for specialized supervision.

The DPO conducts at least one home visit per month in every case in which the victim or other child under the age of 18 resides in the probationer's home. To provide ongoing assessments, all children in the home are routinely seen and may also be interviewed. Probationers must report to the DPO face-to-face. Indications of mistreatment of the victim or other child(ren) results in a referral to the court for further investigation or other appropriate action.

Department policy mandates service standards and caseload size for the Child Threat program. Each case requires a supervision plan, approved by the DPO's supervisor, which provides close monitoring of the probationer's compliance with the orders of the court. The plan is intended to ensure the



safety of victims and potential victims. Child Threat cases may require coordination with the Department of Children and Family Services (DCFS), the court, and/or treatment providers.

PRE-NATAL/POST-NATAL SUBSTANCE RECOGNITION

The Department created a specialized anti-narcotic testing unit in 1990 to address increasing community concerns regarding substance abuse by pregnant and parenting women. The caseload is comprised of pre-natal and recent post-partum substance-abusing women. The program provides intense supervision by enforcing court orders that include narcotics testing and referrals to appropriate community resource programs. Goals of the program include reducing substance abuse, improving the health of pregnant women and their infants, and changing lifestyles that contribute to drug problems.

DOMESTIC VIOLENCE

Domestic Violence caseloads provide specialized and intensive supervision for defendants who have victimized an adult family member, spouse, former spouse, or cohabitant and who have been ordered to participate in an approved 52-week Batterers' Treatment Program.

FAMILY CASELOADS

Adult Family caseloads provide intensive supervision to adult probationers by addressing their needs and risk factors. The goal is to ensure stability with the probationer and the household, so that the probationer can successfully complete probation. The risk of the children being removed from the home and placed into foster care is reduced or eliminated.

HIGH RISK OFFENDERS

These caseloads target offenders who pose a greater risk to the community and require a higher degree of supervision and monitoring. The High Risk Offender DPO supervises complex cases involving habitual and potentially dangerous offenders who may be resistant to services and are likely to violate the conditions of probation.

DOMESTIC VIOLENCE AND CHILD ABUSE MONITORING UNIT

The Domestic Violence and Child Abuse Monitoring Unit provides oversight for programs certified to provide domestic violence and child abuse counseling to ensure that they deliver effective services to probationers and their families and provide the court with timely reports regarding an individual's progress in counseling or lack thereof. Pursuant to PC1203.097 programs providing domestic violence counseling are certified and monitored for compliance with established guidelines for program content and delivery of services to probationers and victims. Additionally, pursuant to PC273.1 programs providing child abuse counseling are monitored for compliance with established guidelines for program content related to breaking the cycle of family violence.

MEDI-CAL ADMINISTRATIVE ACTIVITIES

Medi-Cal Administrative Activities is the "marketing of Medi-Cal and Healthy Families/ Medi-Cal for Children" through the outreach efforts of probation staff. By performing outreach activities for defendants/probationers, their families, and other interested parties such as victims the Department will be able to serve persons in need of medical/mental health services. One of the critical elements



of MAA is the ability to present information that describes what the Medi-Cal and Healthy Families/Medi-Cal for Children programs are, provide eligibility determination information, and make available the location or phone number where eligibility can be determined.

GENDER BASED SUPERVISION

The Adult Services Bureau is proposing the creation of Female Gender-Specific caseloads in order to identify and address the unique needs and issues presented by female probationers. Some of these issues include academic and employment success, childcare concerns, victimization, transportation issues, high risk behaviors, and self-esteem issues. The problems inherent in each case will be identified and handled in order to prevent their recurrence and to maintain stability in the life of the female probationer and other family members, as well as, to ensure the successful completion of probation.

SEX OFFENDER CASELOADS

The Adult Service Bureau is planning the establishment of caseloads for the intensive supervision of probationers with a PC290 requirement. The caseloads will consist entirely of adult defendants with a legal requirement to register as a sex offender in the state of California.

JUVENILE FIELD SERVICES BUREAU

The Juvenile Field Services Bureau (JFSB) provides investigation and supervision services to juvenile offenders and their families throughout the County of Los Angeles. These identified services/programs support the Department's mission to promote and enhance public safety, ensure victims' rights

and facilitate positive behavior change of juvenile probationers. Additionally, staff assigned to these programs serve as an arm of the Juvenile Superior Court and recommend appropriate dispositions while preserving and enhancing the family unit, whenever possible. Additionally, Retired Deputy Probation Officers, Reserve Deputy Probation Officers, college and university Interns, Student Professional Workers, Student Workers, and VISTO volunteers work within JFSB to enhance our provision of services. The JFSB consists of staff assigned to 17 field offices and includes the following specialized programs: Community-Based Supervision, Drug Court, Dual Supervision, Juvenile Mental Health Court – Special Needs Court, Pregnant and Parenting Teens Program, and Teen Court. The description of these programs are listed below.

COMMUNITY-BASED SUPERVISION

Deputy Probation Officers supervise juveniles placed on community-based probation supervision. DPOs are assigned to designated communities and work with minors, families, schools and other relevant resources to build on minor/family strengths, evaluate and make efforts to minimize risks and monitor compliance with court orders. The case management services provided include conducting assessments, orientation meetings, regular contact, service referrals, monitoring compliance with program participation, documenting violations, writing court reports, etc.

DRUG COURT

Juvenile Drug Court is designed to provide an alternative to current juvenile justice proceedings by providing an integrated system of treatment for youth and parents to reduce substance abuse and criminal behavior by



program participants and to assist youth in becoming productive members of the community, thus promoting public safety.

The Juvenile Drug Court Program is a comprehensive treatment program for non-violent minors. This voluntary program is comprised of minors in the pre-post adjudicated stages and high risk probationers and includes regular court appearances before a designated Drug Court Judge and intensive supervision by the Probation Department and Treatment Provider. Drug testing, individual group counseling and family counseling are furnished by the Juvenile Drug Court Treatment Provider. Juvenile Drug Court Teams consist of the Judge, District Attorney, Public Defender, DPO, School Liaison, and Treatment Provider.

DUAL SUPERVISION

Welfare and Institutions Code (WIC) Section 241.1 (a) provides that whenever a minor appears to come within the description of both Section 300 and Section 601 or 602, the child protective services department and the probation department shall determine which status will best serve the interests of the minor and the protection of society pursuant to a jointly developed written protocol. A specialized investigation is conducted involving probation, the Department of Children and Family Services (DCFS), the Department of Mental Health, and dependency attorneys to determine the appropriate plan for services and treatment for the minor. The court may deem a minor suitable for supervision under both the Probation Department and DCFS.

The juvenile Dual Supervision Case Management Program supervises minors under legal jurisdiction of the Department of Children and Family Services (DCFS), through Dependency Court who are placed on

probation. Minors receive case supervision from both DCFS and Probation. DCFS is the lead agency responsible for planning and treatment and Probation monitors compliance with conditions of probation.

Probation Dual Supervision DPOs team with DCFS staff to provide enhanced communication, supervision and monitoring of dual supervision youth. Probation reviews new cases, consults with the DCFS Children's Social Worker (CSW) to coordinate services, provide case management, including making field visits, gathering casework or related information, enforcing conditions of probation, consulting with the CSW relative to multi-disciplinary planning to meet the minor's needs, and preparing reports for court.

JUVENILE MENTAL HEALTH COURT – SPECIAL NEEDS COURT

Juvenile Mental Health Court – Special Needs Court is designated to initiate a comprehensive, judicially monitored program of individualized mental health treatment and rehabilitation services for minors who suffer from diagnosed mental illness (Axis I), organic brain impairment or developmental disabilities.

PREGNANT AND PARENTING TEENS PROGRAM

Due to the need for female gender specific services, the Department has created a pilot program of Pregnant and Parenting Teens caseloads (Kenyon Juvenile Justice Center and San Gabriel Valley Area Office) that will address particular issues and problems affecting pregnant and/or parenting female juvenile offenders who are currently on probation. It is the Department's expectation that by offering an array of gender spe-



cific services, the identified number of female minors will be provided specific means to access positive gender identity and successfully complete their conditions of probation.

TEEN COURT

Teen Court offers an alternative sanction in the form of a diversion program for first time juvenile offenders in lieu of delinquency proceedings. The court consists of a volunteer judicial officer, a court coordinator (either a DPO or a Reserve DPO) and a jury composed of six peers. Probation collaborates with the court, other law enforcement agencies, schools, attorneys, and community-based organizations in this program.

JUVENILE SPECIAL SERVICES BUREAU

The Juvenile Special Services Bureau provides protection and safety to the community by serving as an arm of the Superior Court. Juvenile probation officers provide investigation and supervision services for juvenile offenders on court-ordered probation or in specialized programs. In addition, they recommend appropriate dispositions for juvenile offenders while preserving and enhancing the family unit, whenever possible.

The Juvenile Special Services Bureau consists of programs which include the 601 Intake Program, Specialized Gang Suppression Program, School Crime Suppression Program, Gang Alternative Prevention Program, Camp Community Transition Program, Community Law Enforcement and Recovery Program, Drug Enforcement Agency Task Force Probation/LAPD Crash Ride-Along, and the Specialized Warrant Intervention Program. The descriptions of these programs are listed below.

601 INTAKE PROGRAM

Intake Deputy Probation Officers (DPOs) are assigned to eight geographic areas that overlap existing field service area office boundaries. These are static positions with no workload yardstick. Intake DPOs are responsible for responding to referrals for minors exhibiting behavior problems such as incorrigibility, truancy, running away, and other pre-delinquent conduct. Referrals may be initiated by parents, schools, Probation, public, private or community agencies.

Assessments will be made to determine the appropriate case needs and services to be provided. It is a goal of the program to connect families to resources that prevent the need for court action and removal of the minor from home. These may include crisis intervention, referrals to outside agencies, e.g., Schools, Community Based Organizations, Police, Department of Children and Family Services, referrals to OPS for supervision under 236 WIC or 654 WIC or filing a 601a WIC petition for incorrigibility.

SPECIALIZED GANG SUPPRESSION PROGRAM

The Specialized Gang Suppression Program provides intensive supervision of gang identified probationers and aims to protect the community by closely monitoring a probationer's compliance with the terms and conditions of probation.

SCHOOL CRIME SUPPRESSION PROGRAM

The School Crime Suppression Program (SCSP) provides services to delinquent minors and/or students on probation that require intensive supervision. SCSP officers are based on campuses around Los Angeles County, providing probationers with opportunities to



succeed in a school environment. Services include: in-person probationer contacts, school attendance monitoring, juvenile and parental referral services, probation violation monitoring and reporting, and program development by partnering with schools and/or community-based organizations to enhance opportunities for minors to reduce school violence.

GANG ALTERNATIVE PREVENTION PROGRAM

The Gang Alternative Prevention Program concentrates on pre-delinquent and marginal gang youth who live in neighborhoods characterized by a high crime rate, violent gang activity and heavy drug use.

CAMP COMMUNITY TRANSITION PROGRAM

The Community Camp Transition Program provides aftercare services beginning a few weeks prior to a minor's release from a probation camp to the community. Minors are intensively supervised to insure prompt school enrollment, community service, and participation in selected community-based organization programs. Transitional plans include an emphasis on family participation.

COMMUNITY LAW ENFORCEMENT AND RECOVERY PROGRAM

The Community Law Enforcement and Recovery Program (CLEAR) targets the gangs in Los Angeles County utilizing a collaboration of agencies that involves the Los Angeles Police Department, Los Angeles County Sheriff's, District Attorney and Probation Department. CLEAR DPOs participate in special operations to reduce the level of gang activity in targeted areas. They participate in sweeps, searches

and seizures and ride-alongs enforcing the terms and conditions of probation.

DRUG ENFORCEMENT AGENCY TASK FORCE

Drug Enforcement Agency Task Force allows the Department to work in a multi-agency task force to combat drug sales and trafficking.

PROBATION/LAPD CRASH RIDE-ALONG

Deputy Probation Officers ride-along with LAPD CRASH units serving the South Bureau. Officers are equipped with a laptop computer for remote access to automated probation systems. DPOs also enforce the terms and conditions of probation as they observe probationers in the community who are in violation of their conditions. Supervision is designed to provide gang-suppression by enhanced monitoring of high-risk cases.

SPECIALIZED WARRANT INTERVENTION FUGITIVE TEAM

The Specialized Warrant Intervention Fugitive Team (SWIFT) devotes the majority of time working with the Sheriff's Department and other agencies to identify, locate, and arrest minors who have absconded from probation. Given the high-risk nature of warrant service, this activity is not attempted without police backup. DPOs also enforce the terms and conditions of probation as they observe probationers in the community who are in violation of their conditions. Supervision is designed to provide gang-suppression through enhanced monitoring of high-risk probation cases. SWIFT presently serves the Valinda Corridor and Basset area but will expand as resources become available.



RESIDENTIAL TREATMENT SERVICES BUREAU

Camp Community Placement provides intensive intervention in a residential treatment setting. Upon commitment by the court, a minor receives health, educational and family assessments that allow treatment tailored to meet their individual needs. The goal of the program is to reunify the minor with their family, to reintegrate the minor into the community, and to assist the minor in achieving a productive crime free life. These Probation camps service approximately 2,200 minors per day.

The camps provide structured work experience, vocational training, education, specialized tutoring, athletic activities and various types of social enrichment. Each camp provides enhanced components tailored to its population and purpose. The fundamental objective of the Residential Treatment Service experience is to aid in reducing the incidence and impact of crime in the community. This is accomplished by providing each minor with a residential treatment experience geared toward developing effective life skills.

The camps provide a valuable and cost effective intermediate sanction alternative between probation in the community and incarceration in the California Department of Corrections and Rehabilitation, Division of Juvenile Justice (DJJ), formerly the California Youth Authority.

PLACEMENT SERVICES BUREAU

The Placement Services Bureau encompasses Central and Regional Placement, Emancipation Services, and Placement Quality Assurance. Each unit plays a vital role in the lives of minors with a Suitable Placement order. Most Suitable Placement minors are removed from their homes and placed in an environment

which best addresses their needs. Minors can be placed in out-of-home care ranging from Group Homes and Psychiatric Hospitals to care with Relatives and Non-Relatives.

REGIONAL PLACEMENT

Suitable Placement provides a dispositional option for the Juvenile Court for minors whose delinquent behavior may be explained by a contributory family environment and/or emotional/psychiatric problems. Most Suitable Placement minors are removed from their homes and placed in a safe environment such as a group home, psychiatric hospital, etc.. Deputy Probation Officers (DPO) work with the minor and the family to identify needed services and prepare case plans to assist them with accessing the services. Through monitoring the minor's progress, the DPO is able to determine what long term living arrangement would be in the best interest of the minor and develop/implement a plan (permanency plan) to return the minor to a safe and stable environment (reunification with their parents/guardians, emancipation, placement in a relative/non-relative home or long term foster care).

CENTRAL PLACEMENT

Central Placement provides support for the Regional Placement program and consists of the following: 1) Consultant Unit: Consultants are responsible for monitoring group homes to insure compliance with their County contract, their program statement and Title 22. Consultants investigate all serious incidents that occur in the group home and conduct relative/guardian Home Assessments; 2) Resource Control Unit: Resource Control is responsible for the placement of all new Suitable Placement minors and for finding appropriate facilities for all re-placements.



The Suitable Placement AWOL Recovery Team investigates and apprehends AWOL minors and minors with active warrants; 3) Mental Health Unit: Mental Health provides consultants who are part of the Collaborative Assessment, Rehabilitation and Education (CARE) unit which provides assessment and treatment for minors with serious mental health issues while in Juvenile Hall pending placement; and 4) Probation Processing Unit (PPU): Upon placement, PPU collects and processes documents for submission to the Department of Children and Family Services (DCFS) to insure compliance with Title IV E and the funding of group home services for placement minors.

PLACEMENT QUALITY ASSURANCE PROGRAM

Placement Quality Assurance DPOs conduct case reviews on suitable placement cases, focusing on compliance with mandated Foster Care Services (Title IV-E, AB 575, SB 933 and Division 31). Quality Assurance DPOs assess cases to determine if probation youth and their families have received mandated services. QA/DPOs assess compliance to mandates and standards by reviewing written records, files and reports. Program monitoring results are utilized for policy development, staff training and system improvement.

SYSTEM OF CARE

The System of Care (SOC) program provides strength-based, family-centered care to high-end children (e.g. children with multiple, complex and enduring mental health and behavioral needs) in family settings. Children are placed and/or maintained in a permanent family. Families are able to care for their children with community-based

services and supports. Institutional (e.g. group home, juvenile camp) care is avoided and/or length of stay is reduced. Each client has an individualized child and family team to organize, implement and oversee a uniquely tailored Plan of Care for the enrolled child and family. Both formal and informal community resources are used to meet the children's needs. SOC serves children under the jurisdiction of the Department of Children Family Services, Department of Mental Health, and the Probation Department. Support and advocacy are central to the program.

START TAKING ACTIONS RESPONSIBLY TODAY

The Start Taking Actions Responsibly (START) is an inter-agency program, which services dependent wards (section 300 WIC) that are at risk of crossing over into the delinquency system. The program employs comprehensive multi-agency assessment and intensive case management services to referred dependent children and adolescents who are at risk of becoming delinquent. The goals of the program include stabilizing their behavior; maintaining them in their placement, school and community; preventing their entry into the juvenile justice system; and empowering them to become productive adults.

STATUS OFFENDER DETENTION ALTERNATIVES (SODA)/PLACEMENT ALTERNATIVE TO DETENTION (PAD)

The Status Offender Detention Alternative (SODA) was initially conceived in 1975 by the Department as a pilot project to experiment with the non-secure detention of status offenders. Currently, the department utilizes four (4) foster homes that are used when offenders are referred by police agencies, the juvenile court, and deputy probation officers



for temporary shelter. The minors are placed in SODA pending either return home, completion of the court process, or until they are placed in a more permanent placement such as a group home or foster home.

Placement Alternative to Detention (PAD) provides non-secure detention in licensed foster homes for minors whose primary reason for detention is the lack of a parent, guardian or responsible relative able or willing to provide proper and effective care and control. Minors with non-serious offenses, no previous runaway attempts and little delinquent activity are candidates for PAD.

EMANCIPATION PROGRAM

The Emancipation Program provides services to current and former foster care youth between the ages of 14 and 21. Training and services are provided to prepare and assist emancipating youth to live successfully on their own. Services include assessing the needs of each youth and identifying the type of skills training required, providing counseling, vocational training, career development, housing assistance, job training and placement, mentoring and conducting education services provided through a grant and other public and private partnerships.

FAMILY PRESERVATION

The Family Preservation Program is an integrated, comprehensive collaborative (in conjunction Mental Health and Department of Children and Family Services) approach to providing services to families which enhance child safety while strengthening and preserving families who are experiencing problems in family functioning characterized by child abuse, neglect, school truancy, incorrigibility and law violations. The program's goal is

to assure the physical, emotional, social, educational, cultural and spiritual development of children in a safe nurturing environment. This approach also reduces out of home placement. Probation supervision is enhanced by day treatment and in-home services provided by community-based organizations.

WRAPAROUND

The Wraparound approach provides an alternative to youth who may be placed in long term foster care. The approach is a family-centered, strength-based, needs-driven, and individualized service planning and implementation process. This model represents a fundamental change in the way services are designed and delivered. Wraparound is value-based and involves an unconditional commitment to create services on a "one child at a time" basis to support normalized and inclusive options for children and youth with complex and enduring needs as well as to support their families. At its core is a set of essential principles that support the provision of highly individualized services, on an unconditional basis to children and their families. Partnering with the Probation Department is the Department of Children and Family Services, Department of Public Social Services, Mental Health, Health Services, Los Angeles County Office of Education, Los Angeles Unified School District, and contract providers.

PLACEMENT QUALITY ASSURANCE AND PERMANENCY PLANNING

The Placement Quality Assurance and Permanency Planning (PQA/PP) Unit assists the Placement deputies with locating family members and initiating and completing adoptions and legal guardianships for probation youth.



The PQA/PP Unit reviews all cases for permanency planning beginning at the time the minor was removed from his/her home. Each Reviewer/Permanency Planner identifies those probation youth who are at risk of remaining in foster care and who are unlikely to reunify with their parents. After searching for and identifying a relative/non-relative interested in becoming a permanent option for the youth, legal guardianship and adoption are explored with the potential caregiver. If they are in favor of either or both options, the Permanency Planner works with DCFS and County Counsel and completes extensive documents and reports to ensure that the proper procedures are implemented to bring the case to a permanent placement outcome.

Additionally, cases are reviewed at each judicial review. These reviews assist in identifying those probation youth who have been in the system 12 or more months and have a permanency plan of Long-Term Foster Care. Information gathered at the 6-month judicial review assists in identifying probation youth whose likelihood of reunifying with their parents is minimal to none. Permanency planning and family finding efforts will begin as soon as these youths are identified. Making referrals to the Department's Independent Living Program's Mentoring Program to link probation youth to a lifetime connection is a key element of permanency planning for those youth that have no willing or able relatives that can become a permanent option for them.

TITLE IV-E WAIVER PROPOSED PROGRAMS FAMILY FINDING PROGRAM

The PQA/PP Unit accepts referrals from the court or the Placement Officer of record to assist with cases where any of the following situations occur: parents' whereabouts

are unknown, returning home to parents is not an option for a variety of reasons and family members need to be located, there is an identified person (relative or non-relative) who desires to adopt or become the legal guardian of the probation youth. The goal is to link each probation youth with a lifetime connection prior to leaving the probation system. The Department's Mentoring Program will play a significant role for those youth who have no relatives available.

KINSHIP SUPPORT GROUP PROGRAM

The PQA/PP Unit has partnered with DCFS' Kinship Education, Preparation and Support (KEPS) Program to identify resources and services available to probation caregivers. The KEPS program is a no-cost training program for formal kinship care providers in Los Angeles County. A pilot program is being developed to duplicate the education and support aspect of KEPS in Probation's Placement Department. This new program will provide relative caregivers the necessary knowledge, skills and support to continue caring for probation youth.

FAMILY PRESERVATION OVERSIGHT SCREENING AND MONITORING UNIT

This unit handles the referral process for Family Preservation Services for the entire Juvenile Field Services Bureau. It ensures the Family Preservation referrals are made and Probation allocations are fully utilized.

FOSTER HOME RECRUITMENT UNIT

The PQA/PP Unit, along with the Placement Unit, County Counsel, Delinquency Court, DCFS, and Alliance For Children's Rights, completed two legal guardianships and one adoption in 2005/2006. With these historical



events came the realization that recruitment for foster homes for probation youth is essential to the work of permanency planning. A pilot program is being developed to partner with DCFS to begin recruitment for foster families and other families that offer support to probation youth.

MENTORING

As part of the Los Angeles County Mentoring Project, the Department currently has six group homes serving probation youth who are participating in the Mentoring Program. At those six homes, the Department has youth participating in relationship mentoring (one on one) as well as in group mentoring programs. The programs are operating with part time personnel and are in stages of development.

NEW INITIATIVE: EVIDENCE BASED PRACTICES

Consistent with the Department's mission to enhance public safety, ensure victim's rights and effect positive probationer behavioral change, the Department is committed to implementing Evidence Based Practices (EBP). Nationwide, jurisdictions are beginning to implement EBP in the area of community corrections. EBP requires adherence to practices, which are supported by empirical research. This model is currently being supported and promoted by the National Institute of Corrections (NIC), the nation's largest training and technical assistance provider for state and local correctional agencies.

The Department's Quality Assurance Services Bureau (QASB) has the responsibility to review all newly proposed and existing programs for fidelity with applicable performance-based standards and evidence-based policies and practices. The QASB

monitors programs, services, and functions against established metrics, EBP, and national baselines. It is involved with the on-going vetting of new programs, department wide, and the review and audit of existing programs, services, and functions. Program evaluation provides evidence of how the organization is progressing toward the accomplishment of its objectives.

Recognizing the value of research and having the commitment to provide the best service delivery, the Probation Department's efforts to ensure its programs are consistent with Evidence Based Practices works towards its vision to rebuild lives and provide for healthier and safer communities.

SELECTIVE FINDINGS

- The number of Adult Referrals in all categories, except for physical abuse, declined from 2003 to 2007 (Figures 2 and 2A).
- The number of Juvenile Referrals in all categories increased from 2003 to 2007 (Figures 14 and 14A).

SOURCE OF DATA

The data presented in this report is gathered from the Juvenile Automated Index (JAI) and the Department's Adult Probation System (APS). Most figures reflect a comparison between the reporting year (2007) with the previous year (2006). Figures 2, 2A, 14, and 14A present a comparison of referrals for the various categories of abuse over a five-year period (2003 to 2007).



Figure 1

2007 DATA ADULT CASES CHILD ABUSE REFERRALS

PERCENTAGE OF CHANGE	2006		2007	TYPE OF ABUSE/NEGLECT
50.0% decrease	4	to	2	Caretaker Absence
9.1% increase	11	to	12	Exploitation
58.3% decrease	12	to	5	General Neglect
133.3% increase	3	to	7	Physical Abuse
38.5% decrease	13	to	8	Severe Neglect
1.3% decrease	628	to	620	Sexual Abuse Referrals
2.5% decrease	671	to	654	Overall from 2006 to 2007

Figure 2

**2007 DATA ADULT CASES
PROBATION DEPARTMENT ADULT REFERRALS
JANUARY 1 – DECEMBER 31 YEARLY**

LOS ANGELES COUNTY	2003	2004	2005	2006	2007
Caretaker Absence	4	4	3	4	2
Exploitation	24	20	19	11	12
General Neglect	27	16	13	12	5
Physical Abuse	2	6	1	3	7
Severe Neglect	20	13	18	13	8
Sexual Abuse	744	752	578	628	620
Overall Totals	821	811	632	671	654

Figure 2a

2007 DATA ADULT CASES ADULT REFERRAL DATA BY YEAR AND TYPE

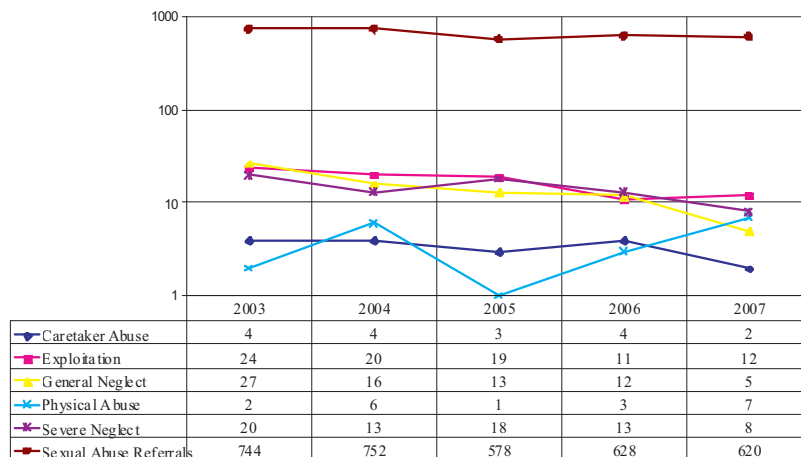




Figure 3

2007 DATA ADULT CASES
Child Abuse Referrals of Offenders by Age

PERCENTAGE OF CHANGE	2006		2007	AGE OF ADULT OFFENDER
19.0% decrease	42	to	34	under age 20
3.4% decrease	89	to	86	20-24
12.5% increase	96	to	84	25-29
16.9% decrease	77	to	90	30-34
6.7% increase	104	to	97	35-39
6.7% increase	89	to	83	40-44
15.3% no change	59	to	68	45-49
2.6% increase	115	to	112	50 and over

Figure 4

2007 DATA ADULT CASES
Child Abuse Caseloads by Area Office

PERCENTAGE OF CHANGE	2006		2007	Area Office
39.7% decrease	136	to	82	Antelope Valley
48.4% decrease	192	to	99	Centinela
51.5% decrease	262	to	127	Crenshaw
69.2% decrease	104	to	32	East Los Angeles
31.6% decrease	158	to	108	East San Fernando Valley
61.4% decrease	215	to	83	Firestone
37.7% decrease	106	to	66	Foothill
56.3% decrease	96	to	42	Harbor
49.5% decrease	194	to	98	Long Beach
44.2% decrease	147	to	82	Pomona Valley
45.8% decrease	168	to	91	Rio Hondo
50.7% decrease	146	to	72	San Gabriel Valley
21.2% decrease	66	to	52	Santa Monica
53.1% decrease	145	to	68	South Central
52.5% decrease	59	to	28	Valencia

Figure 5

2007 DATA ADULT CASES
Child Abuse Referrals of Adult Offenders by Ethnicity

PERCENTAGE OF CHANGE	2006		2007	ETHNICITY
7.0% decrease	107	to	93	African Americans
100.0 % decrease	0	to	0	American Indians
33.3 % increase	12	to	7	Asian/Pacific Islanders
7.2 % increase	432	to	462	Latinos
11.1 % increase	100	to	76	White
42.9% increase	20	to	16	Other ethnicity



Figure 6

**2007 DATA ADULT CASES
ADULT CHILD ABUSE OFFENSE REFERRALS
By Age and Ethnicity**

	UNDER 20	20-24	25-29	30-34	35-39	40-44	45-49	50-50+	TOTAL
African American	7	8	13	17	13	15	12	8	93
American Indian	0	0	0	0	0	0	0	0	0
Asian/Pacific Islander	0	0	0	0	2	1	0	4	7
Latino	25	65	61	67	75	50	44	75	462
White	1	11	6	5	5	13	12	23	76
Other	1	2	4	1	2	4	0	2	16
TOTAL	34	86	84	90	97	83	68	112	654
PERCENT	5.2%	13.1%	12.8%	13.8%	14.8%	12.7%	10.4%	17.1%	100.0%

Figure 7

**2007 DATA ADULT CASES
ADULT CHILD ABUSE OFFENSE REFERRALS RECEIVED IN 2006 AND 2007
By Area Office and Gender**

AREA OFFICE	MALE	FEMALE	MALE	FEMALE
Antelope Valley	37	3	34	1
Central Adult Investigation	139	22	165	4
East Los Angeles	3	0	7	0
East San Fernando Valley	66	1	83	4
Firestone	0	0	0	0
Foothill	46	2	39	1
Harbor	34	0	34	0
Long Beach	57	0	49	1
Pomona Valley	48	2	58	0
Rio Hondo	51	5	68	2
San Gabriel Valley	29	1	6	0
Santa Monica	40	1	23	1
South Central	40	3	71	1
Valencia	1	0	2	0
Other	1	0	0	0
TOTAL	592	40	693	15

East San Fernando Valley Area Office covers Santa Clarita. Figure 7 reflects the number of adult defendants, by area office and gender, referred to the Probation Department for investigation of child abuse offenses during 2007.



Figure 8

**2007 DATA ADULT AND JUNVEILE CASES
CHILD ABUSE OFFENSE REFERRALS**

OFFENSE TYPE	ADULT	PERCENT	JUVENILE	PERCENT	TOTAL
Caretaker Absence	2	0.3%	0	0.0%	2
Exploitation	12	1.8%	7	0.9%	19
General Neglect	5	0.8%	8	1.1%	13
Physical Abuse	7	1.1%	236	31.6%	243
Severe Neglect	8	1.2%	25	3.3%	33
Sexual Abuse	620	94.8%	471	63.1%	1091
TOTAL	654	100.0%	747	100%	1401
PERCENT	46.7%		53.5%		100%

Figure 9

**2007 DATA ADULT CASES
ADULT CHILD OFFENSE SUPERVISION CASES ACTIVE AS OF DECEMBER 2007
By Age and Ethnicity**

	UNDER 20	20-24	25-29	30-34	35-39	40-44	45-49	50-50+	TOTAL
African American	1	24	30	30	27	33	33	79	257
American Indian	0	0	0	0	0	0	0	0	0
Asian/ Pacific Islander	0	2	2	0	6	2	4	10	26
Latino	5	65	55	90	61	56	61	113	506
White	1	20	34	31	28	36	40	111	301
289Other	1	5	5	6	6	7	7	6	43
TOTAL	8	116	126	157	128	134	145	319	1133
PERCENT	0.7%	10.2%	11.1%	13.9%	11.3%	11.8%	12.8%	28.2%	100.0%

Figure 9 reflects the number of adult cases, by age and ethnicity, supervised by the Probation Department for child abuse offenses in 2007

Figure 10

**2007 DATA ADULT CASES
ADULT CHILD OFFENSE SUPERVISION CASES ACTIVE AS OF DECEMBER 2007
By Ethnicity**

ETHNICITY	TOTAL	PERCENT
African American	257	22.7%
American Indian	0	0.0%
Asian/Pacific Islander	26	2.3%
Latino	506	44.7%
White	301	26.6%
Other	43	3.8%
TOTAL	1133	100.0%



Figure 11

**2007 DATA ADULT CASES
ADULT CHILD THREAT (C/T) WORKLOAD PER AREA OFFICE AS OF DECEMBER 2007
Number of Defendants on C/T Caseloads**

AREA OFFICE	2003	2004	2005	2006	2007
Alhambra	0	0	0	0	0
Antelope Valley	143	145	152	136	82
Centinela	212	211	72	192	99
Crenshaw	313	332	147	262	127
East Los Angeles	152	127	92	104	32
East San Fernando Valley	240	222	88	158	108
Firestone	205	227	143	215	83
Foothill	122	116	120	106	66
Harbor	104	113	49	96	42
Long Beach	218	214	85	194	98
Pomona Valley	221	210	90	147	82
Rio Hondo	144	148	59	168	91
San Gabriel Valley	129	139	55	146	72
Santa Monica	124	138	126	66	52
South Central	143	144	57	145	68
Valencia	58	56	61	59	28
TOTALS	2528	2542	1396	2194	1130

The Alhambra Area Office is an investigative office and does not provide supervision services.

Figure 11a

**2007 DATA ADULT CASES CHILD THREAT (C/T) WORKLOAD REFERRALS
ANTELOPE VALLEY AREA OFFICE**

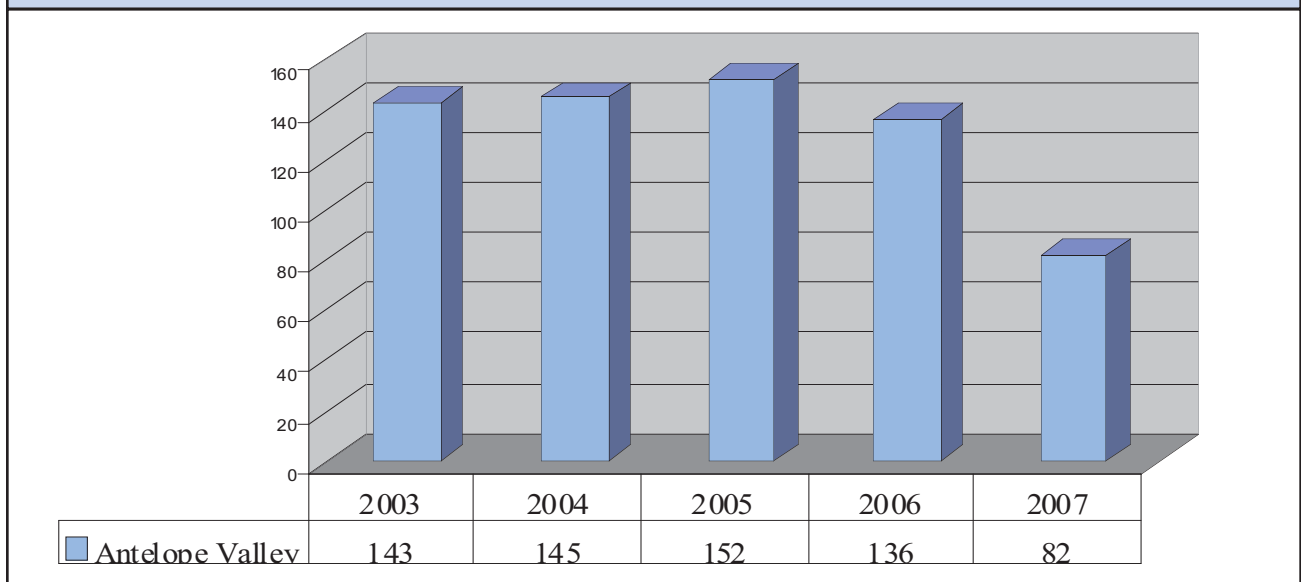




Figure 11b

**2007 DATA ADULT CASES CHILD THREAT (C/T) WORKLOAD REFERRALS
CENTINELA AREA OFFICE**

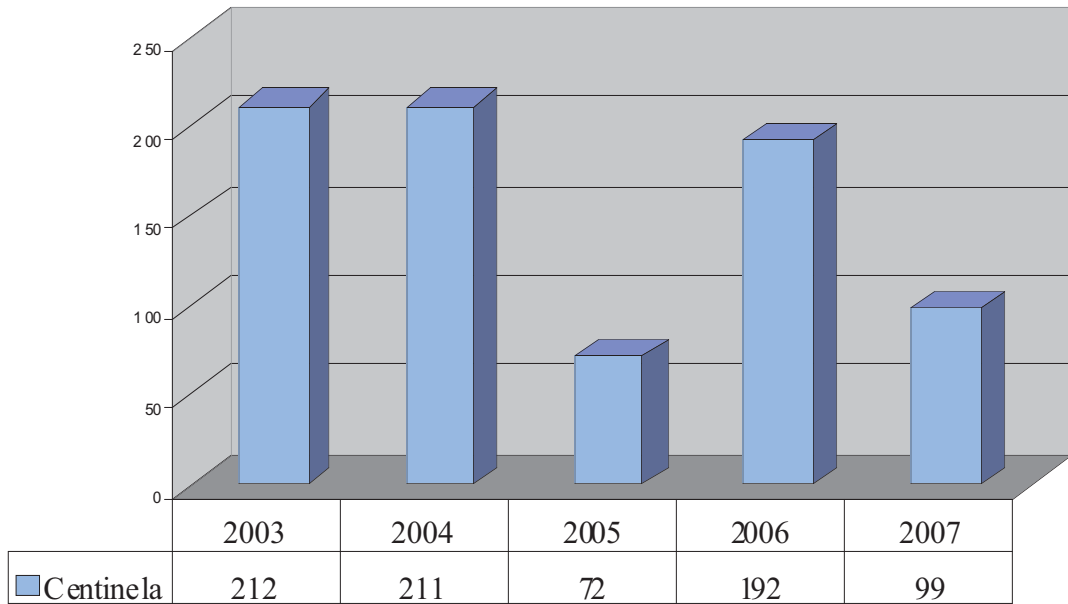


Figure 11c

**2007 DATA ADULT CASES CHILD THREAT (C/T) WORKLOAD REFERRALS
CRENSHAW AREA OFFICE**

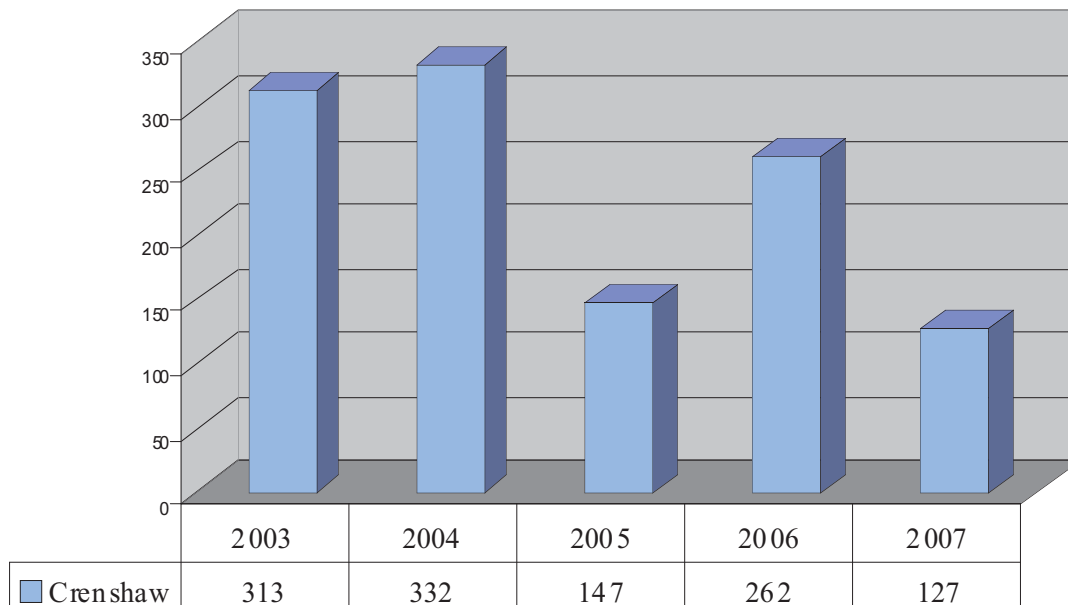




Figure 11d

**2007 DATA ADULT CASES CHILD THREAT (C/T) WORKLOAD REFERRALS
EAST LOS ANGELES AREA OFFICE**

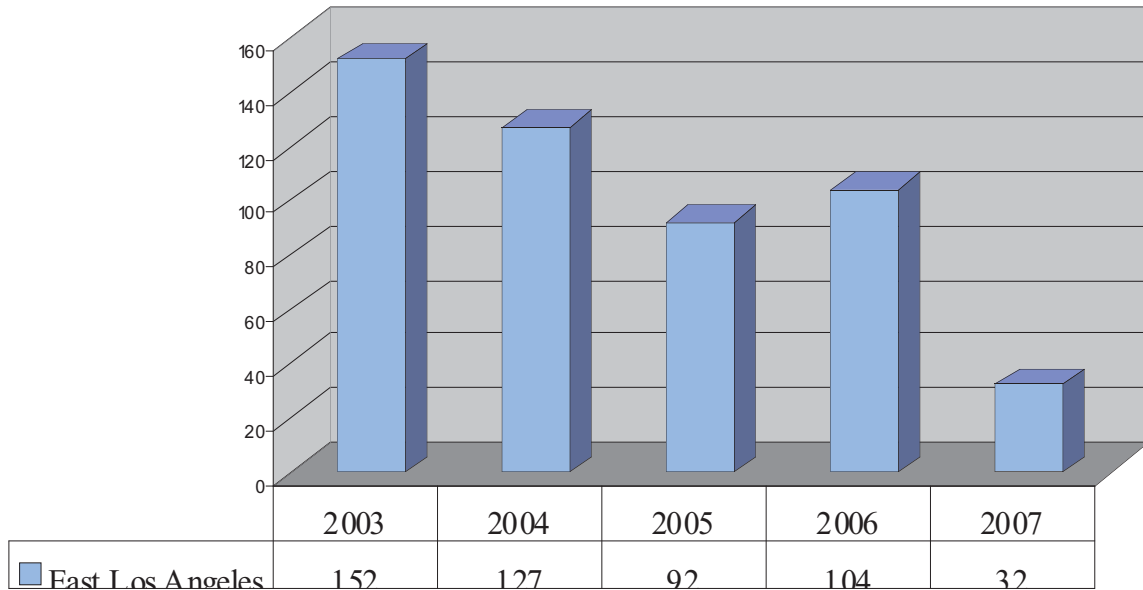


Figure 11e

**2007 DATA ADULT CASES CHILD THREAT (C/T) WORKLOAD REFERRALS
EAST SAN FERNANDO VALLEY**

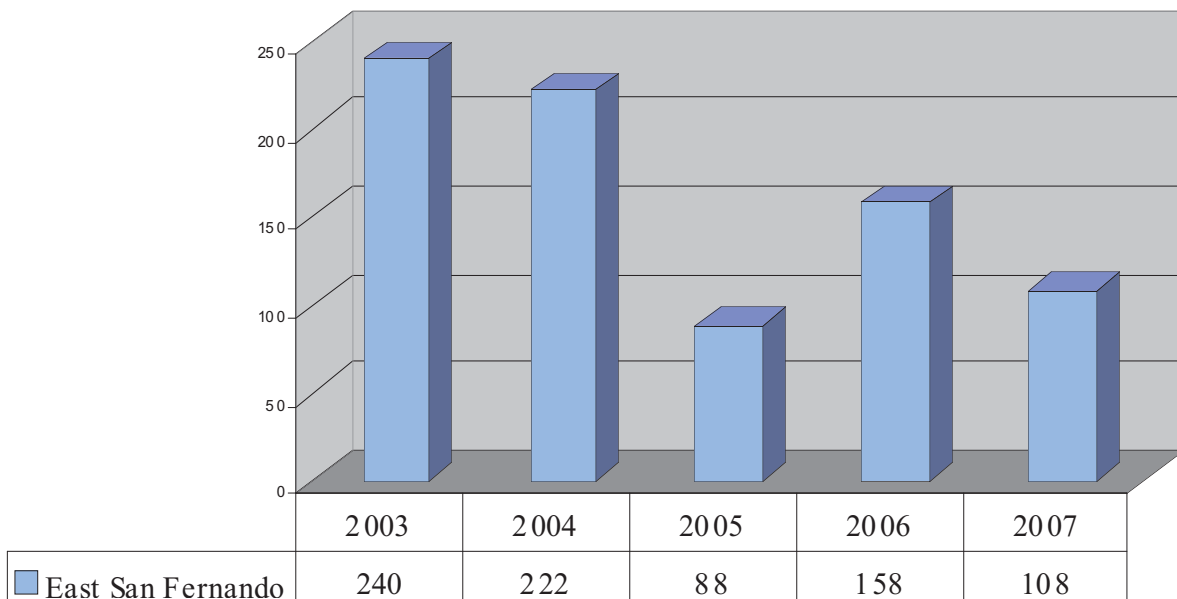




Figure 11f

**2007 DATA ADULT CASES CHILD THREAT (C/T) WORKLOAD REFERRALS
FIRESTONE AREA OFFICE**

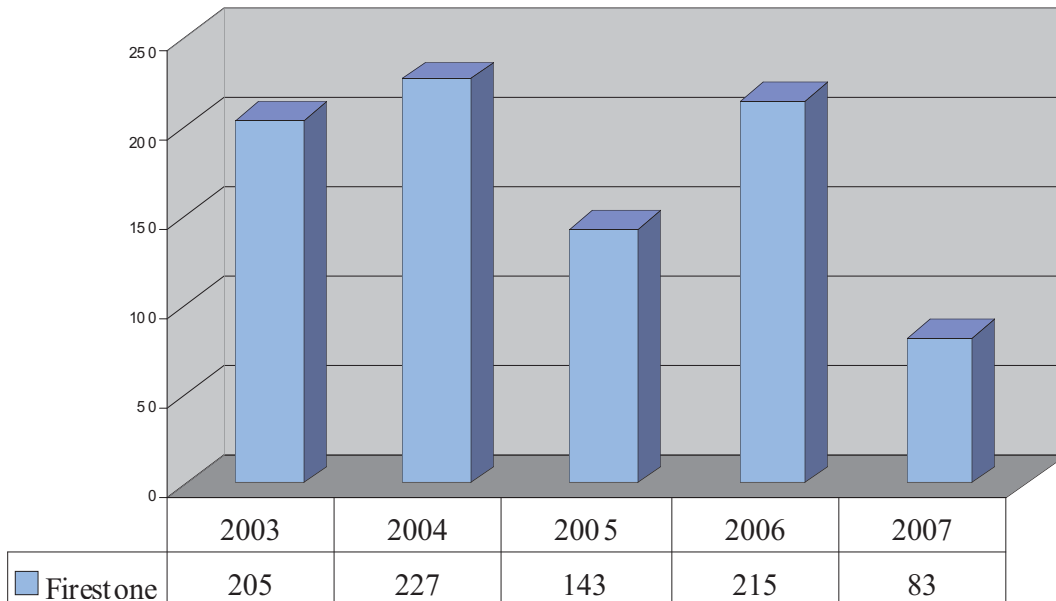


Figure 11g

**2007 DATA ADULT CASES CHILD THREAT (C/T) WORKLOAD REFERRALS
FOOTHILL AREA OFFICE**

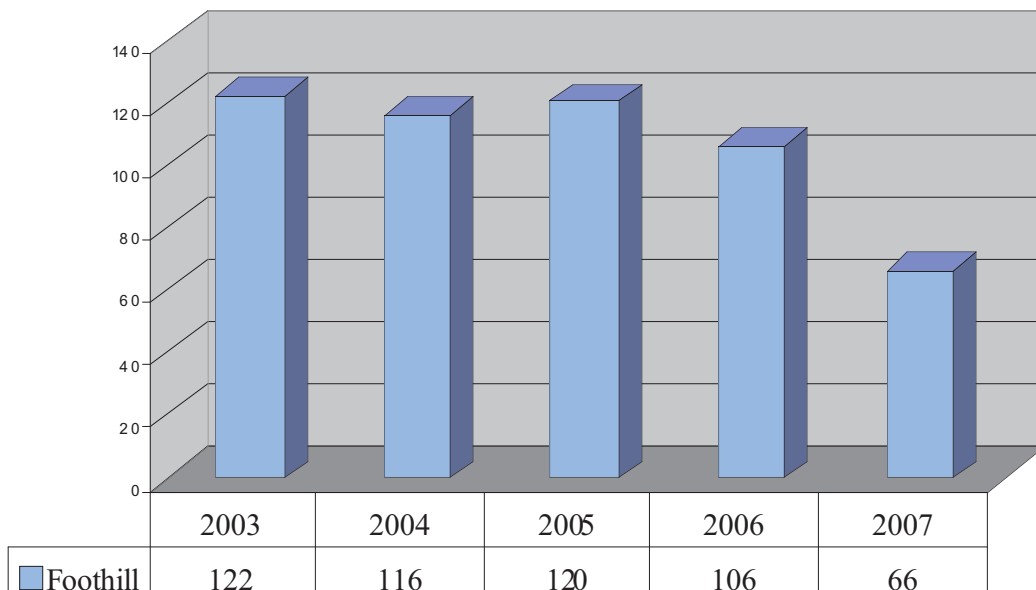




Figure 11h

**2007 DATA ADULT CASES CHILD THREAT (C/T) WORKLOAD REFERRALS
HARBOR AREA OFFICE**

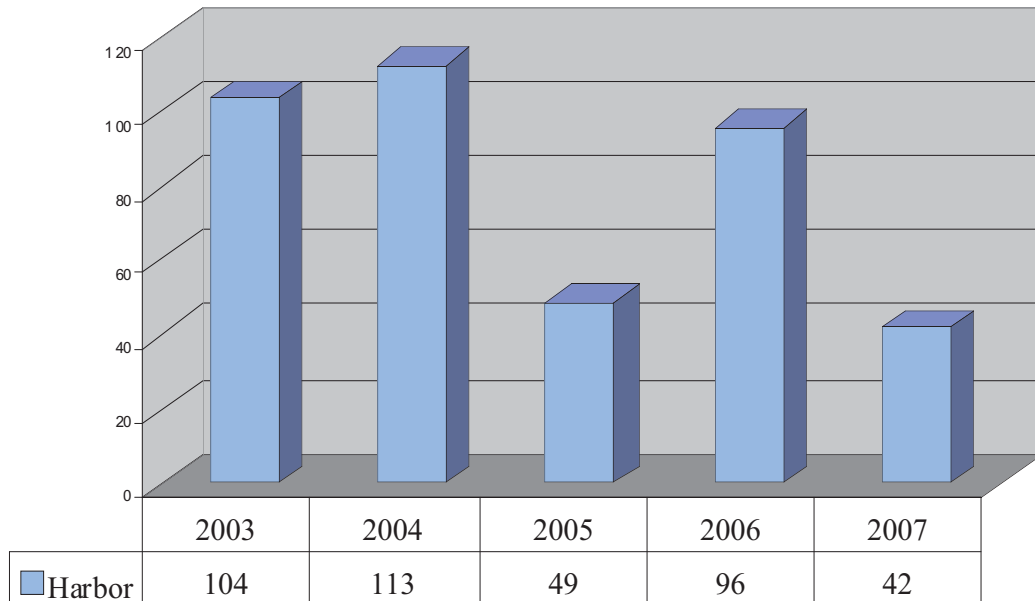


Figure 11i

**2007 DATA ADULT CASES CHILD THREAT (C/T) WORKLOAD REFERRALS
LONG BEACH AREA OFFICE**

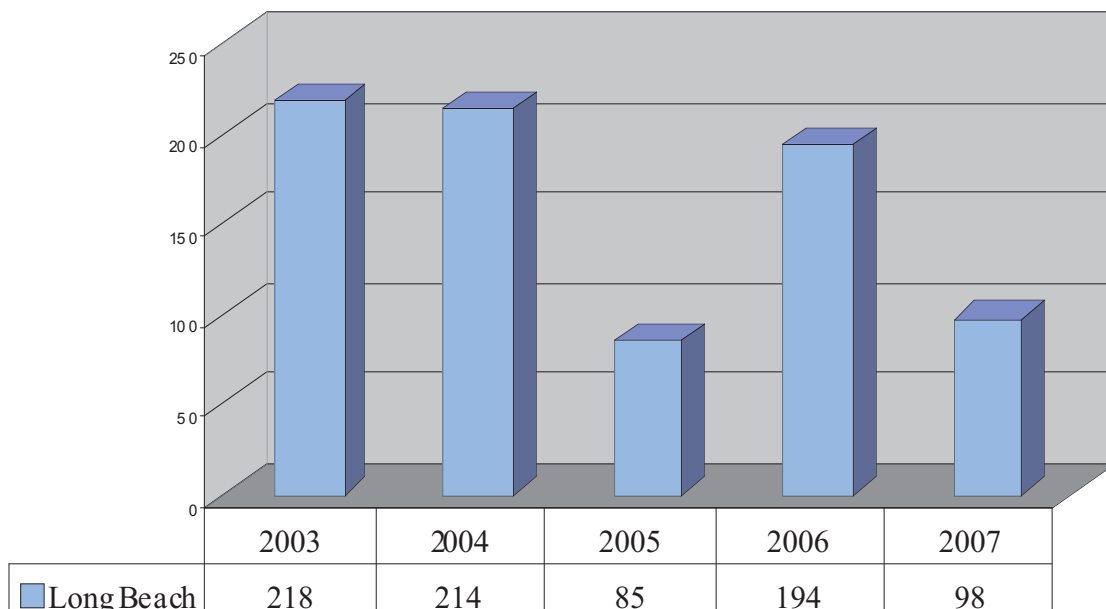




Figure 11j

**2007 DATA ADULT CASES CHILD THREAT (C/T) WORKLOAD REFERRALS
POMONA VALLEY AREA OFFICE**

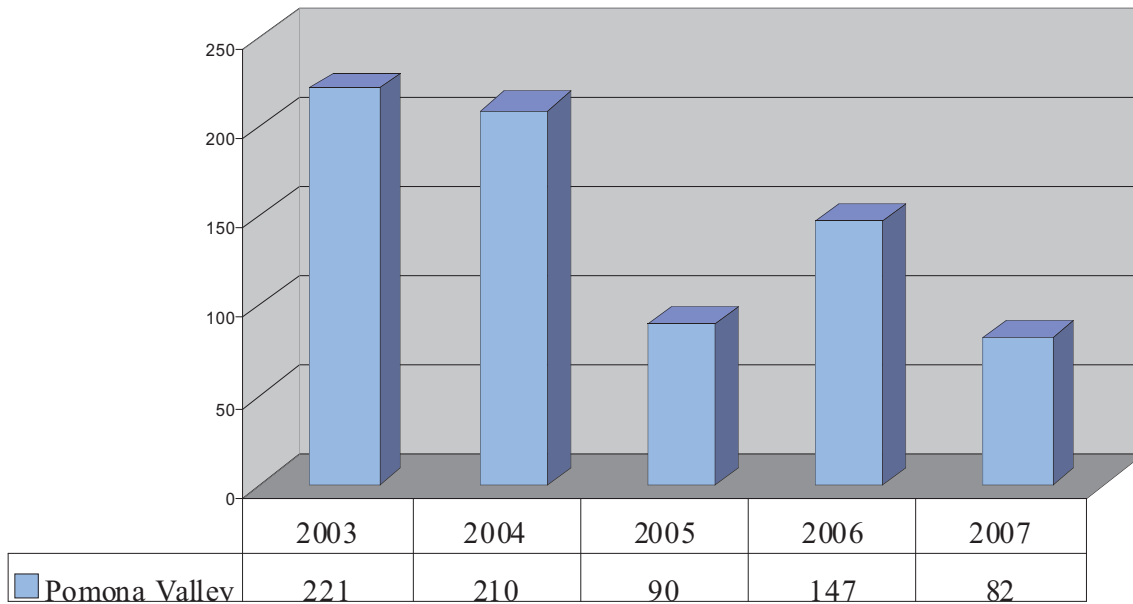


Figure 11k

**2007 DATA ADULT CASES CHILD THREAT (C/T) WORKLOAD REFERRALS
RIO HONDO AREA OFFICE**

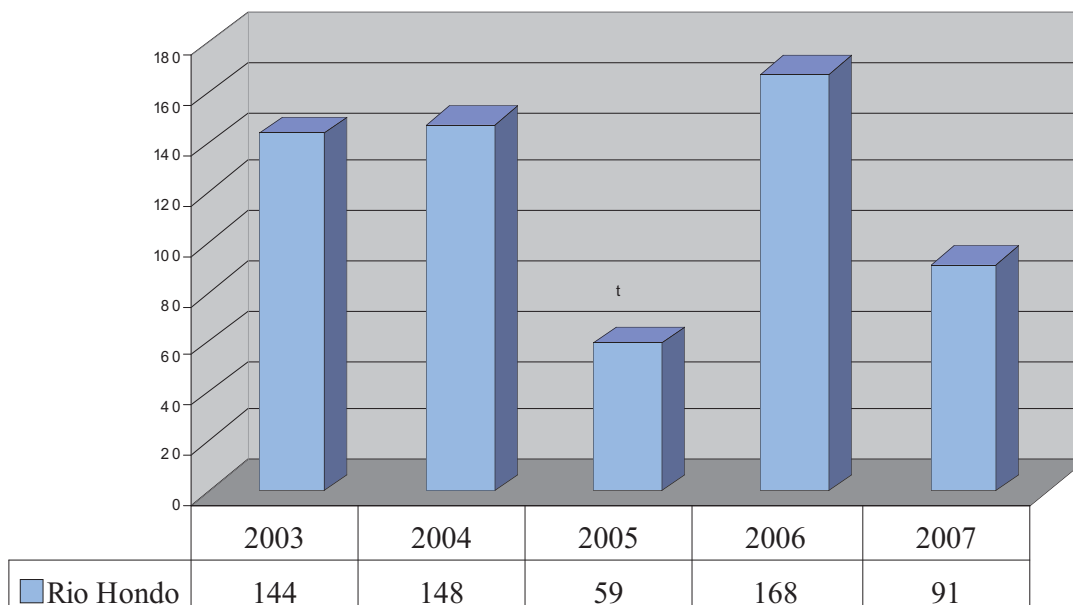




Figure 11l

**2007 DATA ADULT CASES CHILD THREAT (C/T) WORKLOAD REFERRALS
SAN GABRIEL AREA OFFICE**

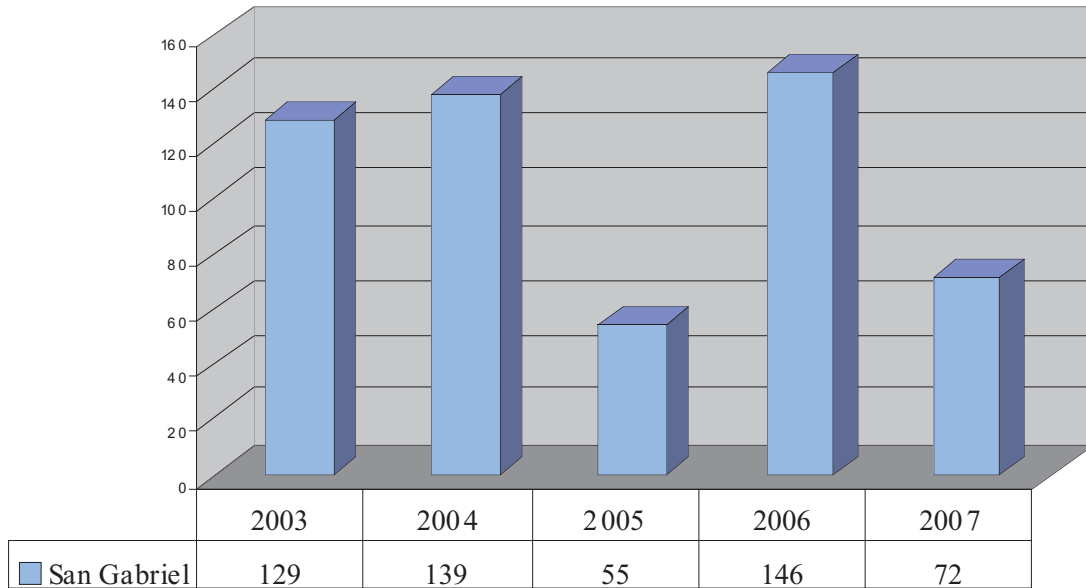


Figure 11m

**2007 DATA ADULT CASES CHILD THREAT (C/T) WORKLOAD REFERRALS
SANTA MONICA AREA OFFICE**

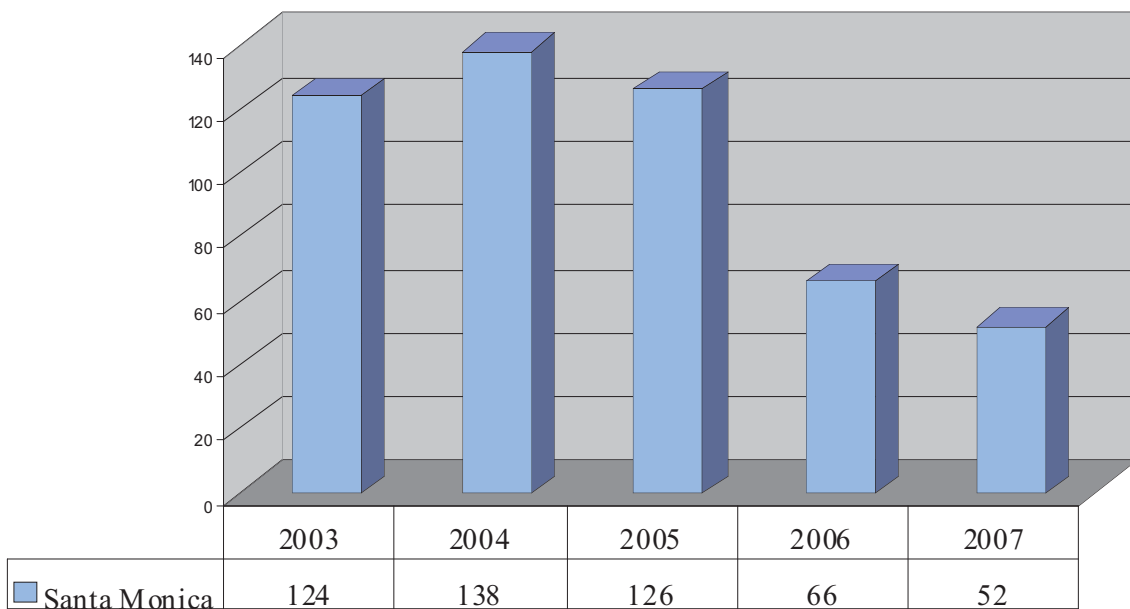




Figure 11n

**2007 DATA ADULT CASES CHILD THREAT (C/T) WORKLOAD REFERRALS
SOUTH CENTRAL AREA OFFICE**

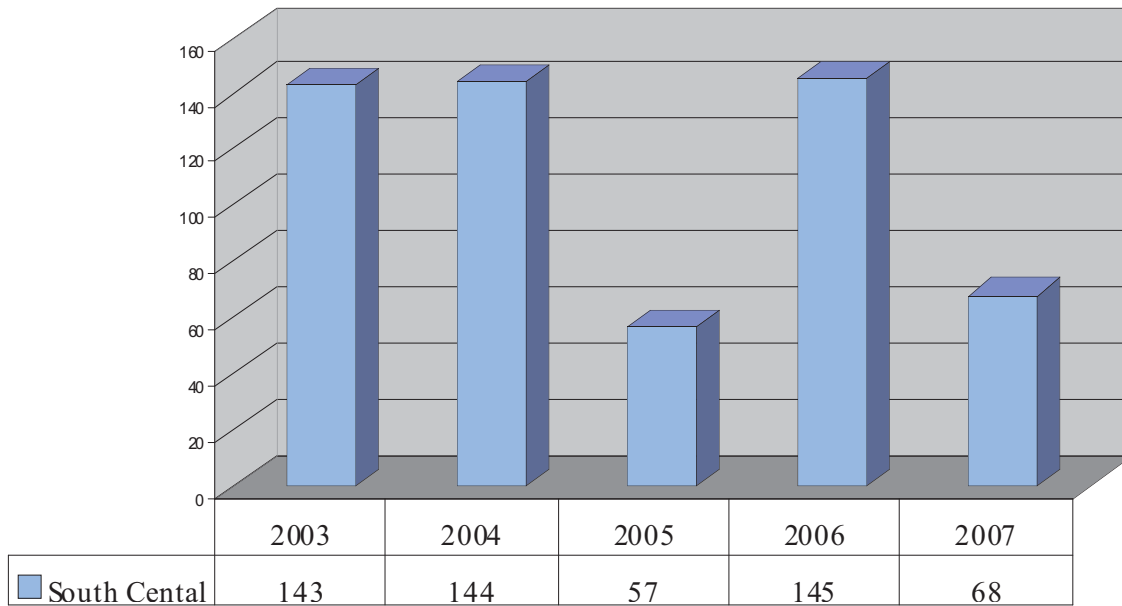


Figure 11o

**2007 DATA ADULT CASES CHILD THREAT (C/T) WORKLOAD REFERRALS
VALENCIA AREA OFFICE**

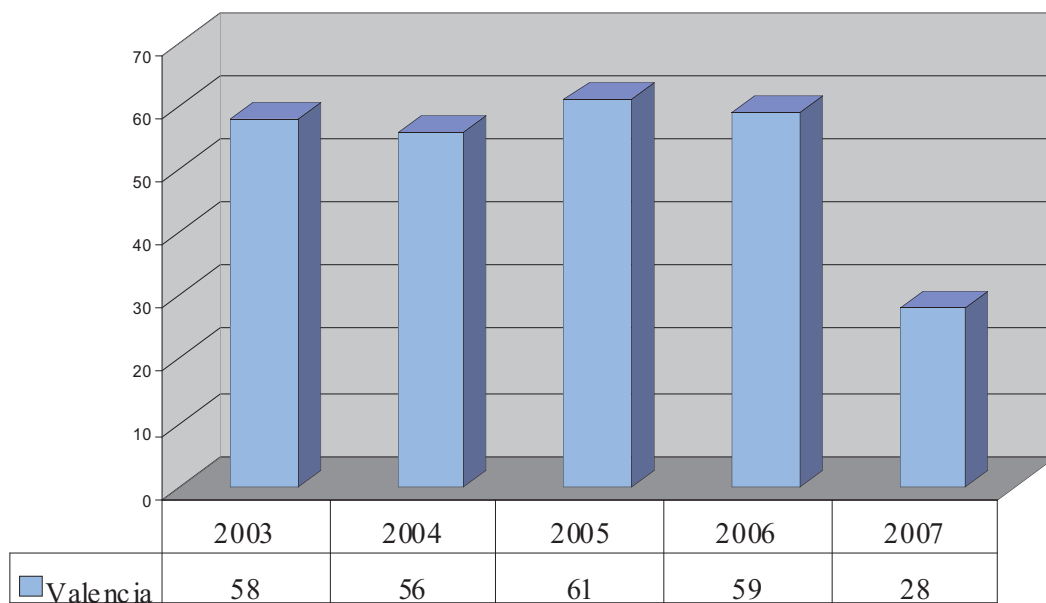




Figure 12

**2007 DATA ADULT AND JUVENILE CASES
CHILD ABUSE OFFENSE GRANTS OF PROBATION BY AREA OFFICE
Adult and Juvenile**

AREA OFFICE	ADULTS	JUVENILES	TOTAL
Transition to Area Office	0	12	12
Alhambra	20	0	29
Antelope Valley	4	5	9
Central Adult Investigation	9	0	9
Centinela	9	7	16
Crenshaw	15	5	20
East Los Angeles	4	7	11
East San Fernando Valley	15	0	15
Eastlake Intake Detention Control	0	0	0
Firestone	9	3	12
Foothill	9	3	12
Harbor	1	1	2
Kenyon JJC	0	8	8
Long Beach	5	13	18
Northeast Juvenile Justice Center	0	1	1
Pomona Valley	13	1	14
Rio Hondo	13	4	17
Riverview	2	0	2
San Gabriel Valley	4	11	15
Santa Monica	6	1	7
South Central	15	3	18
Sylmar	0	0	0
Valencia	1	0	1
Van Nuys	0	27	27
TOTALS	154	112	266
PERCENT	57.9%	42.1%	100.0%

Of the 654 Child Abuse referrals received by the Adult Bureau in 2007, 154 (23.5%) resulted in a court ordered grant of formal probation. The adult defendants not placed on formal probation may have been sentenced to state prison, county jail, placed on informal probation to the court, found not guilty or had their cases dismissed.

Of the 747 Juvenile Child Abuse offense referrals received by the Juvenile Bureau in 2007, 112 (15.0%) offenses resulted in a disposition of probation supervision. Juveniles not placed on probation may have been sentenced to the California Department of Corrections & Rehabilitation, Division of Juvenile Justice (DJJ), found Unfit (referred to adult criminal court), sentenced to Camp Community Placement, had their cases rejected by the District Attorney, transferred out of county, or closed.



Figure 13

**2007 DATA JUVENILE CASES
JUVENILE CHILD ABUSE REFERRALS**

PERCENTAGE OF CHANGE	2006		2007	TYPE OF ABUSE/NEGLECT
0.0% no change	0	to	0	Caretaker
700.0% increase	0	to	7	Exploitation
27.3% decrease	11	to	8	General Neglect
68.6% increase	140	to	236	Physical Abuse
31.6% increase	19	to	25	Severe Neglect
47.2% increase	320	to	471	Sexual Abuse
52.4% increase	490	to	747	Overall from 2006 to 2007

Figure 14

**2007 DATA JUVENILE CASES
PROBATION DEPARTMENT JUVENILE REFERRALS
JANUARY 1 – DECEMBER 31 YEARLY**

LOS ANGELES COUNTY	2003	2004	2005	2006	2007
Caretaker Absence	4	4	3	4	2
Exploitation	24	20	19	11	12
General Neglect	27	16	13	12	5
Physical Abuse	2	6	1	3	7
Severe Neglect	20	13	18	13	8
Sexual Abuse	744	752	578	628	620
Overall Totals	821	811	632	671	654

Figure 14a

**2007 DATA JUVENILE CASES
JUVENILE REFERRAL DATA BY YEAR AND TYPE**

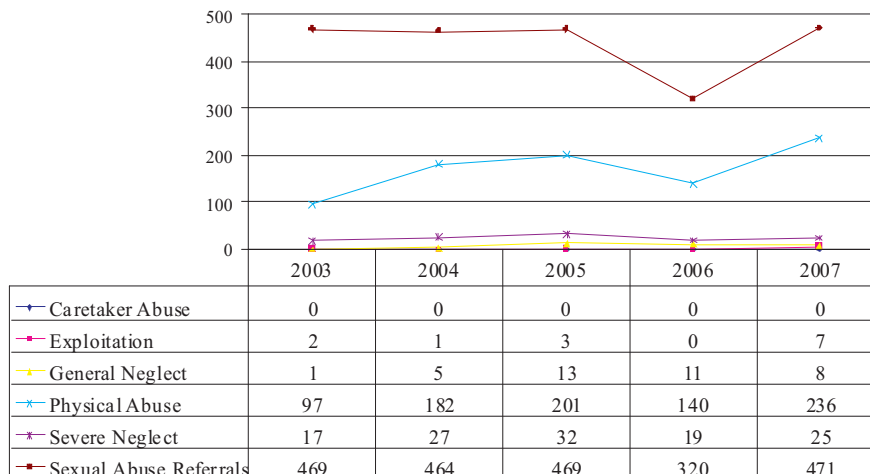




Figure 15

**2007 DATA JUVENILE CASES
JUVENILE CHILD ABUSE REFERRALS OF OFFENDERS BY AGE**

PERCENTAGE OF CHANGE	2006		2007	AGE OF JUVENILES
46.0% increase	124	to	181	under 11 years old
50.0% decrease	26	to	13	11 years old
366.7% increase	6	to	28	12 years old
64.3% increase	28	to	46	13 years old
67.6% increase	34	to	57	14 years old
45.3 % increase	64	to	93	15 years old
51.3 % increase	80	to	121	16 years old
82.7% increase	75	to	137	17 years old
34.0% increase	53	to	71	18 years old

Figure 16

**2007 DATA JUVENILE CASES
JUVENILE CHILD ABUSE REFERRALS BY ETHNICITY**

PERCENTAGE OF CHANGE	2006		2007	ETHNICITY
71.2% increase	125	to	214	African American
0.0% no increase	0	to	0	American Indian
88.9% increase	9	to	1	Asian/Pacific Islander
35.8% increase	316	to	429	Latino
152.9% increase	34	to	86	White
183.3% increase	6	to	17	Other ethnicity



Figure 17

**2007 DATA JUVENILE CASES
JUVENILE CHILD ABUSE REFERRALS RECEIVED IN 2006 AND 2007
By Area Office and Gender**

AREA OFFICE	2006		2007	
	MALE	FEMALE	MALE	FEMALE
Transitions to Area Office	33	0	68	3
Antelope Valley	15	4	30	1
Centinela	46	3	60	4
Crenshaw	63	6	71	2
East Los Angeles	23	3	31	5
Firestone	27	1	17	1
Foothill	9	3	16	6
Harbor	12	0	24	0
Intake Detention Control	0	0	0	0
Kenyon Juvenile Justice Ctr	22	2	37	1
Long Beach	19	0	43	2
N. East Juvenile Justice Ctr	14	1	41	5
Pomona Valley	23	2	38	4
Rio Hondo	23	0	25	5
San Gabriel Valely	30	3	61	3
Santa Monica	14	0	12	0
South Central	47	2	63	5
Sylmar	1	0	0	0
Valencia	1	0	5	0
Van Nuys	38	0	58	0
TOTALS	460	30	700	47

Figure 17 reflects the number of juveniles, by area office and gender, referred to the Probation Department for investigation of child abuse offenses during 2007. Transitions to Area Office primarily reflect referrals from probation camps.



Figure 18

**2007 DATA JUVENILE CASES
JUVENILE CHILD ABUSE OFFENSE REFERRALS
By Age and Ethnicity**

	UNDER 11	11	12	13	14	15	16	17	18	TOTAL
African American	40	4	10	18	19	25	35	37	26	214
American Indian	0	0	1	0	0	0	0	0	0	0
Asian/Pacific Islander	0	0	1	0	0	0	0	0	0	1
Latino	106	6	14	22	26	57	75	90	33	429
White	26	3	1	6	1	10	11	9	9	86
Other	9	0	2	0	1	1	0	1	3	17
TOTAL	181	19	28	46	57	93	121	137	71	747
PERCENT	24.2%	1.7%	3.7%	6.2%	7.6%	12.4%	16.2%	18.3%	9.5%	100.0%

Figure 19

**2007 DATA JUVENILE CASES
JUVENILE CHILD ABUSE OFFENSE REFERRALS**

OFFENSE TYPE	ADULT	PERCENT	JUVENILE	PERCENT	TOTAL
Caretaker Abuse	2	0.6%	0	0.0%	2
Exploitation	12	1.6%	7	0.0%	19
General Neglect	5	1.8%	8	2.2%	13
Physical Abuse	7	0.4%	236	28.6%	243
Severe Neglect	8	1.9%	25	3.9%	33
Sexual Abuse	620	93.6%	471	65.3%	1091
TOTAL	654	100.0%	747	100.0%	1,401
PERCENT	46.7%		53.3%		



Figure 20

**2007 DATA JUVENILE CASES
JUVENILE CHILD ABUSE OFFENSE SUPERVISION CASES**

	UNDER 11	11	12	13	14	15	16	17	18	TOTAL
African American	0	2	0	8	2	5	4	11	0	32
American Indian	0	0	0	0	0	0	0	0	0	0
Asian/Pacific Islander	0	0	0	0	0	0	0	0	0	0
Latino	0	4	4	3	8	15	15	13	5	67
White	0	0	4	1	1	2	1	4	3	12
Other	0	0	0	0	1	0	0	0	0	1
TOTAL	0	6	4	13	12	22	20	28	8	112
PERCENT	0.0%	5.4%	3.6%	10.7%	10.7%	19.6%	17.9%	25.0%	7.1%	100.0%

Figure 20 reflects the number of juvenile cases, by age and ethnicity, supervised by the Probation Department for child abuse offenses in 2007

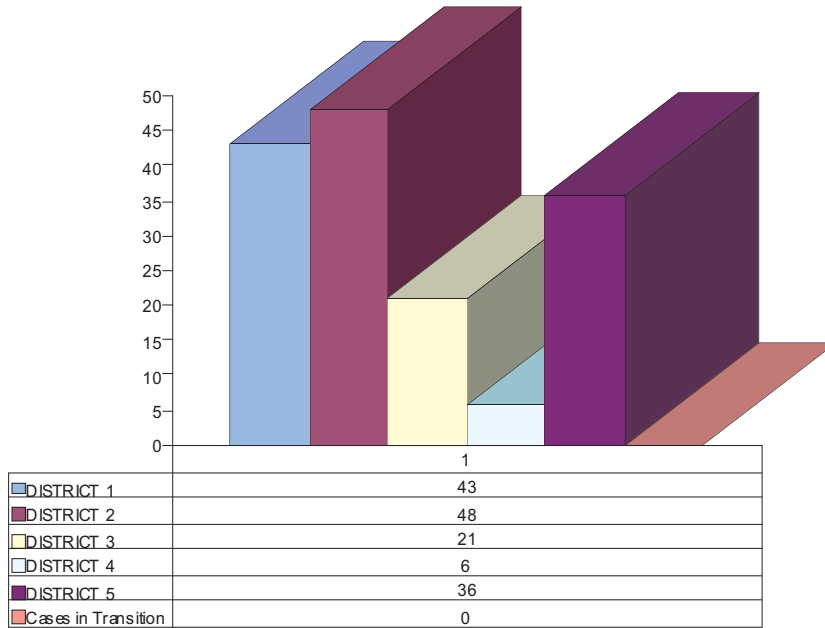
Figure 21

**2007 DATA JUVENILE CASES
ETHNICITY OF JUVENILES UNDER SUPERVISION
FOR CHILD ABUSE OFFENSES**

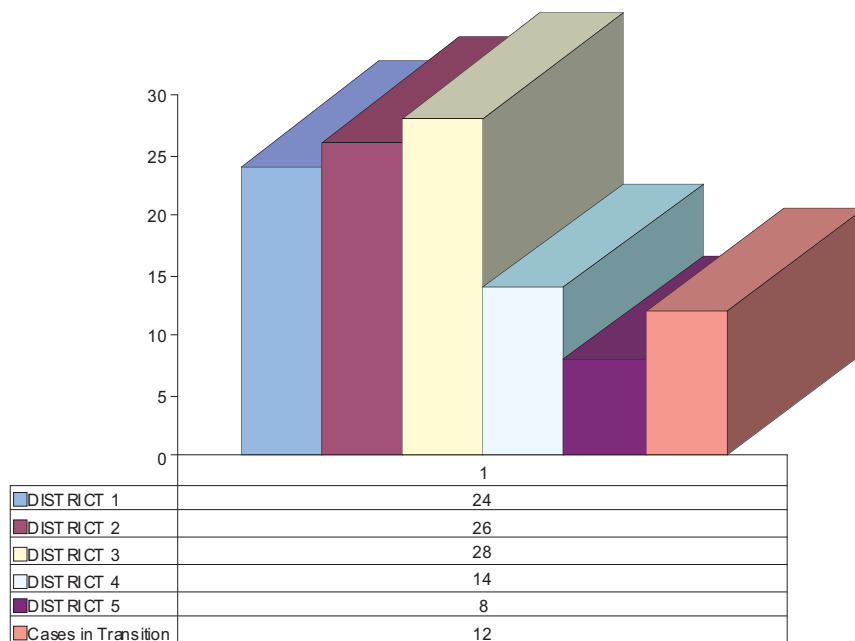
ETHNICITY	TOTAL	PERCENT
African American	32	28.6%
American Indian	0	0.0%
Asian/Pacific Islander	0	0.0%
Latino	67	59.8%
White	12	10.7%
Other	1	0.9%
Unknown	0	0.0%
TOTAL	112	100.0%



2007 DATA JUVENILE CASES Adult Grants of Probation by Supervisorial District



2007 DATA JUVENILE CASES Juvenile Grants of Probation by Supervisorial District





GLOSSARY OF TERMS

Adjudication – a judicial decision or sentence; to settle by judicial procedure; for juveniles – a juvenile court process focused on whether the allegations or charges facing a juvenile are true

Adult – a person 18 years of age or older

Bench Officer – a judicial hearing officer (appointed or elected) such as a judge, commissioner, referee, arbitrator, or umpire, presiding in a court of law and authorized by law to hear and decide on the disposition of cases

California Youth Authority (CYA) – the most severe sanction available to the juvenile court among a range of dispositional outcomes; it is a state run confinement facility for juveniles who have committed extremely serious or repeat offenses and/or have failed county-level programs, and require settings at the state level; CYA facilities are maintained as correctional schools and are scattered throughout the state

Camp Community Placement – available to the juvenile court at a disposition hearing; a minor is placed in one of 19 secure or non-secure structured residential camp settings run by the Probation Department throughout the County (see Residential Treatment Program)

Caseload – the total number of adult/juvenile clients or cases on probation, assigned to an adult or juvenile Deputy Probation Officer; caseload size and level of service is determined by Department policy

Child Abuse (or Neglect) – physical injury inflicted by other than accidental means upon a child by another person; includes sexual abuse, willful cruelty or unjustifiable punishment or injury or severe neglect

Child Threat (CTH) Caseload – a specialized caseload supervised by a CTH Deputy Probation Officer consisting of adults on formal probation for child abuse offenses or where there is reason to believe that defendant's (violent, drug abusing or child molesting) behavior may pose a threat to a child; Department service standards require close monitoring of a defendant's compliance with court orders to ensure both the child's and parents' safety

Compliance – refers to the offender following, abiding by, and acting in accordance with the orders and instructions of the court as part of his/her effort to cooperate in his/her own rehabilitation while on probation (qualified liberty) given as a statutory act of clemency

Conditions of Probation – the portion of the court ordered sentencing option, which imposes obligations on the offender; may include restitution, fines, community service, restrictions on association, etc.

Controlled Substance – a drug, substance, or immediate precursor, which is listed in any schedule in Health and Safety Code Sections 11054, 11055, 11057, or 11058.

Court Orders – list of terms and conditions to be followed by the probationer, or any instructions given by the court



Crime – an act or omission in violation of local, state or federal law forbidding or commanding it, and made punishable in a legal proceeding brought by a state or the US government

DA Case Reject – a District Attorney dispositional decision to reject the juvenile petition request (to file a formal complaint for court intervention) from the referral source (usually an arresting agency) by way of Probation due to lack of legal sufficiency (i.e., insufficient evidence)

Defendant – an Adult subject of a case, accused/convicted of a crime, before a criminal court of law

Disposition – the resolution of a case by the court, including the dismissal of a case, the acquittal of a defendant, the granting of probation or deferred entry of judgment, or overturning of a convicted defendant

Diversion – the suspension of prosecution of “eligible” youthful, first time offenders in which a criminal court determines the offender suitable for diverting out of further criminal proceedings and directs the defendant to seek and participate in community-based education, treatment or rehabilitation programs prior to and without being convicted, while under the supervision of the Probation Department; program success dismisses the complaint, while failure causes resumption of criminal proceedings

Deputy Probation Officer (DPO) – a peace officer who performs full case investigation functions and monitors probationer’s compliance with court orders, keeping the courts apprised of

probationer’s progress by providing reports as mandated

Drug Abuse – the excessive use of substances (pharmaceutical drugs, alcohol, narcotics, cocaine, generally opiates, stimulants, depressants, hallucinogens) having an addictive-sustaining liability, without medical justification

Formal Probation – the suspension of the imposition of a sentence by the court and the conditional and revocable release of an offender into the community, in lieu of incarceration, under the formal supervision of a DPO to ensure compliance with conditions and instructions of the court; non-compliance may result in formal probation being revoked

High Risk – a classification referring to potentially dangerous, recidivist probationers who are very likely to violate conditions of probation and pose a potentially high level of peril to victims, witnesses and their families or close relatives; usually require in-person contacts and monitoring participation in treatment programs

Informal Probation –

- **Juvenile** – a six-month probation supervision program for minors opted by the DPO following case intake investigation of a referral, or ordered by the juvenile court without adjudication or declaration of wardship; it is a lesser sanction and avoids formal hearings, conserving the time of the DPO, court staff and parents and is seen as less damaging to a minor’s record
- **Adult** - a period of probation wherein



an individual is under the supervision of the Court as opposed to the Probation Officer. The period of probation may vary

Investigation – the process of investigating the factors of the offense(s) committed by a minor/adult, his/her social and criminal history, gathering offender, victim and other interested party input, and analyzing the relevant circumstances, culminating in the submission of recommendations to the court regarding sanctions and rehabilitative treatment options

Judgment – law given by court or other competent tribunal and entered in its dockets, minutes of record

Juvenile – a person who has not attained his/her 18th birthday

Juvenile Court – Superior Court which has jurisdiction over delinquent and dependent children

Minor – a person under the age of 18

Narcotic Testing – the process whereby a probationer must submit, by court order, to a drug test as directed, to detect and deter controlled substance abuse

Pre-Sentence Report – a written report made to the adult court by the DPO and used as a vehicle to communicate a defendant's situation and the DPO's recommendations regarding sentencing and treatment options to the judge prior to sentencing; becomes the official position of the court.

Probation Department Probation Grant – the act of bestowing and placing offenders (adults convicted of a crime and juveniles with allegations sustained at adjudication) on formal probation by a court of law and charging Probation with their supervisory care to ensure the fulfillment of certain conditions of behavior

Probation Violation – when the orders of the court are not followed or the probationer is re-arrested and charged with a new offense

Probationer – minor or adult under the direct supervision of a Deputy Probation Officer, usually with instructions to periodically report in as directed

Referral – the complaint against the juvenile from law enforcement, parents or school requesting Probation intervention into the case, or a criminal court order directing Probation to perform a thorough investigation of a defendant's case following conviction, and present findings and recommendations in the form of a pre-sentence report

Residential Treatment Program – this program is also referred to as the Camp Community Placement program. It provides intensive intervention in a residential setting over an average stay of 20 weeks. The Camp Community Placement program is an intermediate sanction alternative to probation in the community and incarceration in the California Youth Authority.

Sanction – that part of law which is designed to secure enforcement by imposing a penalty for its violation



Sentence – the penalty imposed by the court upon a convicted defendant in a criminal judicial proceeding or upon a delinquent juvenile with allegations found true in juvenile court; penalties imposed may include fines, community service, restitution or other punishment, terms of probation, county jail or prison for the defendant, or residential camp placement or CYA commitment for a juvenile

Victim – an entity or person injured or threatened with physical injury, or that directly suffers a measurable loss as a consequence of the criminal activities of an offender, or a “derivative” victim, such as the parent/guardian, who suffers some loss as a consequence of injury to the closely related primary victim, by reason of a crime committed by an offender

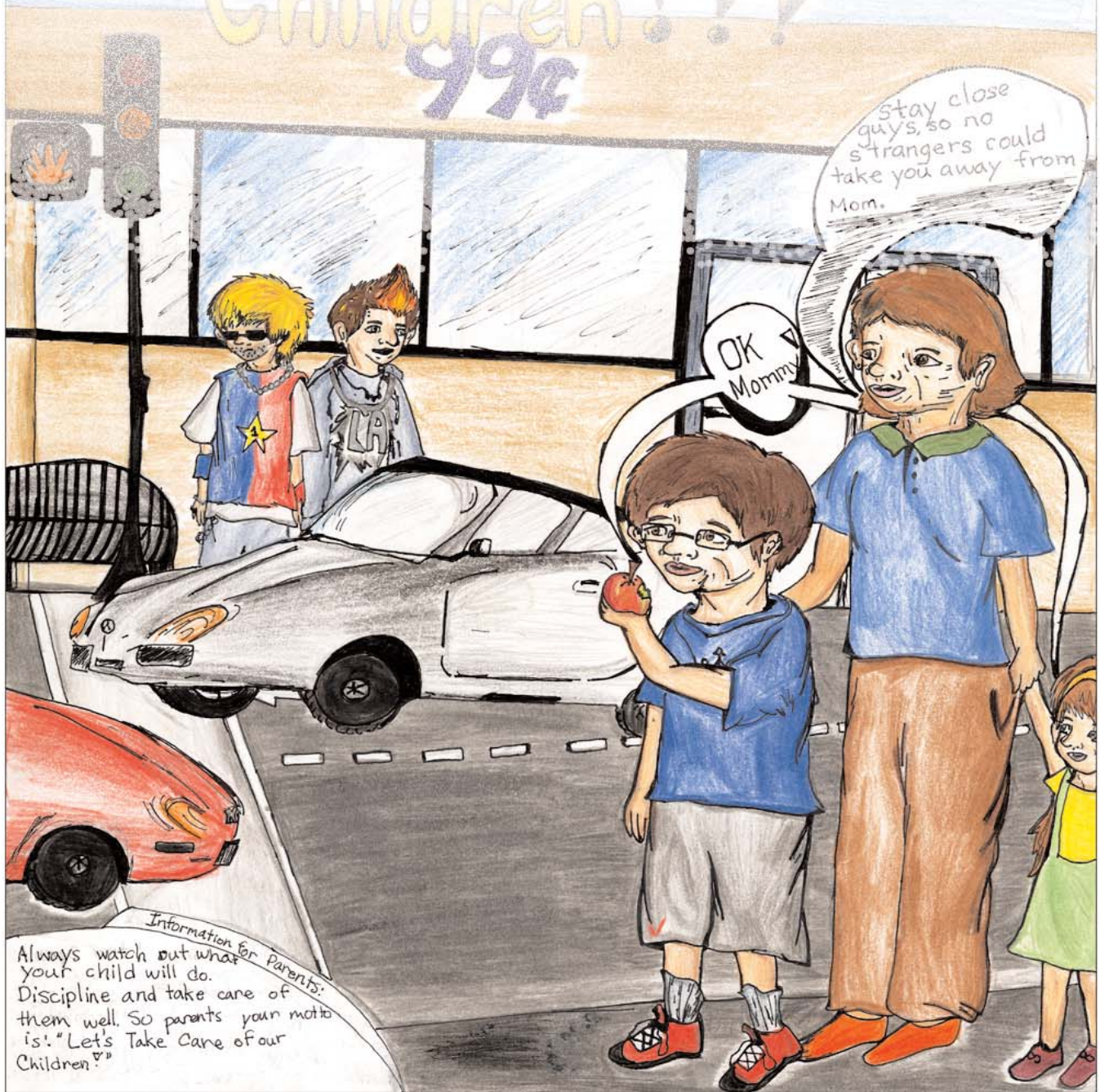
Substance Abuse (see Drug Abuse) – the non-medical use of a substance for any of the following reasons: psychic effect, dependence, or suicide attempt/gesture. For purposes of this glossary, non-medical use means:

- use of prescription drugs in a manner inconsistent with accepted medical practice
- use of over-the-counter drugs contrary to approved labeling; or
- use of any substance (heroin/morphine, marijuana/hashish, peyote, glue, aerosols, etc.) for psychic effect, dependence, or suicide

Trace – an amount of substance found in a newborn or parent that is insufficient to cause a parent to return to court on a probation violation, but is enough to authorize removal of a child from parental control

Unfit – a finding by a juvenile fitness hearing court that a minor was found to be unfit for juvenile court proceedings, and that the case will be transferred to adult court for the filing of a complaint; juvenile in effect will be treated as an adult

LOS ANGELES DEPARTMENT OF JUSTICE AGENCY REPORT





CHILD PROTECTION PROGRAM FACT SHEET

The California Department of Justice (DOJ), a member of the Inter-Agency Council on Child Abuse and Neglect (ICAN) Data/Information Sharing Committee, provides the following information for the 2007 ICAN Data Analysis Report.

CHILD ABUSE CENTRAL INDEX FACT SHEET

The DOJ is mandated to maintain an index of all California reports of child abuse and severe neglect pursuant to Penal Code section 11170. The index, named the Child Abuse Central Index (CACI), was created by the Legislature in 1965.

Child protection agencies, defined in the Child Abuse and Neglect Reporting Act (CANRA, Article 2.5 of the Penal Code), are required to report to the DOJ investigated incidents of child abuse and severe neglect that have been determined not to be unfounded.

The DOJ Child Protection Program receives, stores and maintains this information in the CACI. The CACI currently contains approximately 780,000 reports of child abuse, and responds to more than 300,000 requests for a child abuse search per year.

The DOJ provides the CACI information upon request to citizens, child protection agencies and authorized regulatory agencies. The CACI functions as a pointer system, merely confirming the existence of a CACI record and provides direction to the requesting agency on where the investigative file is maintained. It is the obligation of the requestor to obtain the original investigative report from the reporting agency and for drawing independent conclusions regarding the quality of the evidence disclosed and its

sufficiency for making decisions regarding employment, licensing or placement of a child.

More information about the CACI is available on the Attorney General's Website: www.ag.ca.gov/childabuse.

SERVICES PROVIDED BY THE DOJ THROUGH THE CACI

- The CACI serves as an investigatory tool to child welfare and law enforcement agencies investigating child abuse and severe neglect allegations by providing information regarding child abuse reports previously submitted to the CACI involving the same suspect(s).
- All incoming child abuse summary reports are checked against the CACI to identify prior reports of child abuse involving the listed suspects.
- Applicants for child care facility and foster care home licensing or employment, adoption, guardianship or other child placement and peace officer employment are checked against the CACI to identify prior reports of child abuse. The Department of Justice (DOJ) notifies the agencies involved when a match occurs.
- The DOJ notifies licensing agencies when a new child abuse summary report is received and matched to a person that has been licensed to have custodial or supervisory authority over a child or children.
- The DOJ provides information on an expedited basis to investigators on suspects involved in current child abuse investigations who were involved in prior incidents of child abuse.



- The DOJ provides information on an expedited basis to child welfare agencies for emergency child placement purposes.
- The DOJ conducts statewide training specific to child abuse and severe neglect reporting requirements and practices.

CACI HIGHLIGHTS

- Access to the Child Abuse Central Index (CACI) was expanded to include out-of-state foster and adoption agencies pursuant to the Adam Walsh Child Protection and Safety Act of 2006.
- Access to the CACI was expanded to include pre-affiliation background checks for Court Appointed Special Advocates (CASA).

2007 CACI Data

During calendar year 2007, California's reporting agencies submitted a total of 20,967 reports to the CACI (See Figure 1). Figure 1 depicts the total number of Child Abuse Summary Reports submitted to the CACI by county and by type of abuse.

Thirty-two (32) of the total submissions reported the death of the victim.

Physical abuse is the most prevalent type of abuse noted in the reports submitted to the CACI.

Overall, the reports of child abuse submitted to the CACI for the categories of physical abuse, mental abuse, neglect and sexual abuse decreased from 25,674 to 20,967 (18%) during the last five years (See Figure 2). Figure 2 depicts a comparison of CACI submissions statewide and shows a slight decline (less than 3%) in statewide reporting

between 2006 and 2007. The DOJ is working with stakeholder groups around the state and with the Department of Social Services to make business process modifications to improve state and local reporting.

Los Angeles County submitted 5,354 reports to the CACI, which represents approximately 26% of the state's total. Of these, 2,591 (48%) reported physical abuse, 894 (17%) reported mental abuse, 120 (2%) reported severe neglect, and 1,749 (33%) reported sexual abuse. There were nine submissions from Los Angeles County agencies that reported the death of the victim.

CACI TRAINING

The Department of Justice (DOJ) provides training on the completion of the Child Abuse Summary Report Form (8583) and answers questions pertaining to the reporting of child abuse information pursuant to the Child Abuse and Neglect Reporting Act (Penal Code Sections 11164-11174.3). Training workshops are conducted statewide to various law enforcement, child protection and local professional investigative agencies at the request of those agencies.

FOR INQUIRIES:

California Department of Justice

Child Protection Program

P.O. Box 903387

Sacramento, CA 94203-3870

Phone: (916) 227-3285

Fax: (916) 227-3253

E-mail: CPPCAL.BCIA@doj.ca.gov

Web site: www.ag.ca.gov/childabuse



Figure 1

**2008 CHILD ABUSE SUMMARY REPORTS
ENTERED IN THE AUTOMATED CHILD ABUSE SYSTEM (ACAS)
FOR THE PERIOD OF JANUARY 1 – DECEMBER 31, 2007**

COUNTY	TOTAL	PHYSICAL	MENTAL	NEGLECT	SEXUAL	DEATHS
Alameda	276	178	15	15	68	0
Alpine	0	0	0	0	0	0
Amador	0	0	0	0	0	0
Butte	228	102	56	24	46	0
Calaveras	50	27	20	1	2	0
Colusa	1	0	0	0	1	0
Contra Costa	356	190	68	30	68	0
Del Norte	20	9	2	7	2	0
El Dorado	32	12	7	3	10	0
Fresno	322	135	90	13	84	0
Glenn	44	23	9	3	9	0
Humboldt	144	70	51	4	19	0
Imperial	89	30	47	6	6	0
Inyo	56	27	26	0	3	0
Kern	748	357	232	34	125	1
Kings	197	154	7	3	33	0
Lake	14	13	0	0	1	0
Lassen	30	13	4	1	12	0
Los Angeles	5,354	2,591	894	120	1,749	9
Madera	159	79	36	12	32	0
Marin	127	43	57	10	17	0
Mariposa	8	4	3	0	1	0
Mendocino	91	45	32	6	8	0
Merced	165	77	38	25	25	0
Modoc	26	12	7	1	6	0
Mono	5	2	2	1	0	0
Monterey	238	132	69	13	24	0
Napa	11	5	0	0	6	0
Nevada	23	14	7	1	1	0
Orange	3,048	1,489	181	209	1,169	5
Placer	158	56	71	6	25	0
Plumas	32	12	6	9	5	0
Riverside	1,263	596	367	97	203	4
Sacramento	506	288	66	34	118	1
San Benito	72	46	16	6	4	1
San Bernardino	960	451	152	91	266	2



Figure 1 (Cont.)

**2008 CHILD ABUSE SUMMARY REPORTS
ENTERED IN THE AUTOMATED CHILD ABUSE SYSTEM (ACAS)
FOR THE PERIOD OF JANUARY 1 – DECEMBER 31, 2007**

COUNTY	TOTAL	PHYSICAL	MENTAL	NEGLECT	SEXUAL	DEATHS
San Diego	3,106	1,010	1,612	84	400	1
San Francisco	203	132	46	4	21	2
San Joaquin	436	214	150	6	66	0
San Luis Obispo	71	21	12	8	30	0
San Mateo	219	126	51	13	29	0
Santa Barbara	371	137	143	42	49	0
Santa Clara	449	179	48	13	209	1
Santa Cruz	136	58	53	6	19	0
Shasta	45	17	1	19	8	1
Sierra	1	1	0	0	0	0
Siskiyou	29	13	3	1	12	0
Solano	178	114	22	7	35	0
Sonoma	177	96	23	17	41	0
Stanislaus	153	57	6	7	83	2
Sutter	25	13	12	0	0	0
Tehama	4	1	0	1	2	0
Trinity	11	7	3	1	0	0
Tulare	109	44	1	2	62	0
Tuolumne	58	28	23	2	5	0
Ventura	234	91	76	18	49	2
Yolo	71	34	10	5	22	0
Yuba	28	26	1	0	1	0
TOTALS*	20,967	9,701	4,934	1,041	5,291	*32

*Note: Child deaths are counted within the abuse type

Figure 2

**FIVE – YEAR COMPARISON OF CACI SUBMISSIONS STATEWIDE
JANUARY 1 – DECEMBER 31 YEARLY**

Types of Abuse/Year	2003	2004	2005	2006	2007
Physical	12,827	11,070	11,263	10,381	9,701
Sexual	6,513	5,857	6,540	5,496	5,291
Neglect/Mental	6,334	5,726	5,493	5,715	5,975
Totals	25,674	22,653	23,296	21,562	20,967



GLOSSARY

CACI – Child Abuse Central Index.

CANRA – Child Abuse and Neglect Reporting Act as specified in Penal Code sections 11164 et seq.

Reporting Agency – Defined by Penal Code section 11165.9 as a police or sheriff department, a county probation department (if designated by the county to receive mandated reports), or a county welfare department.

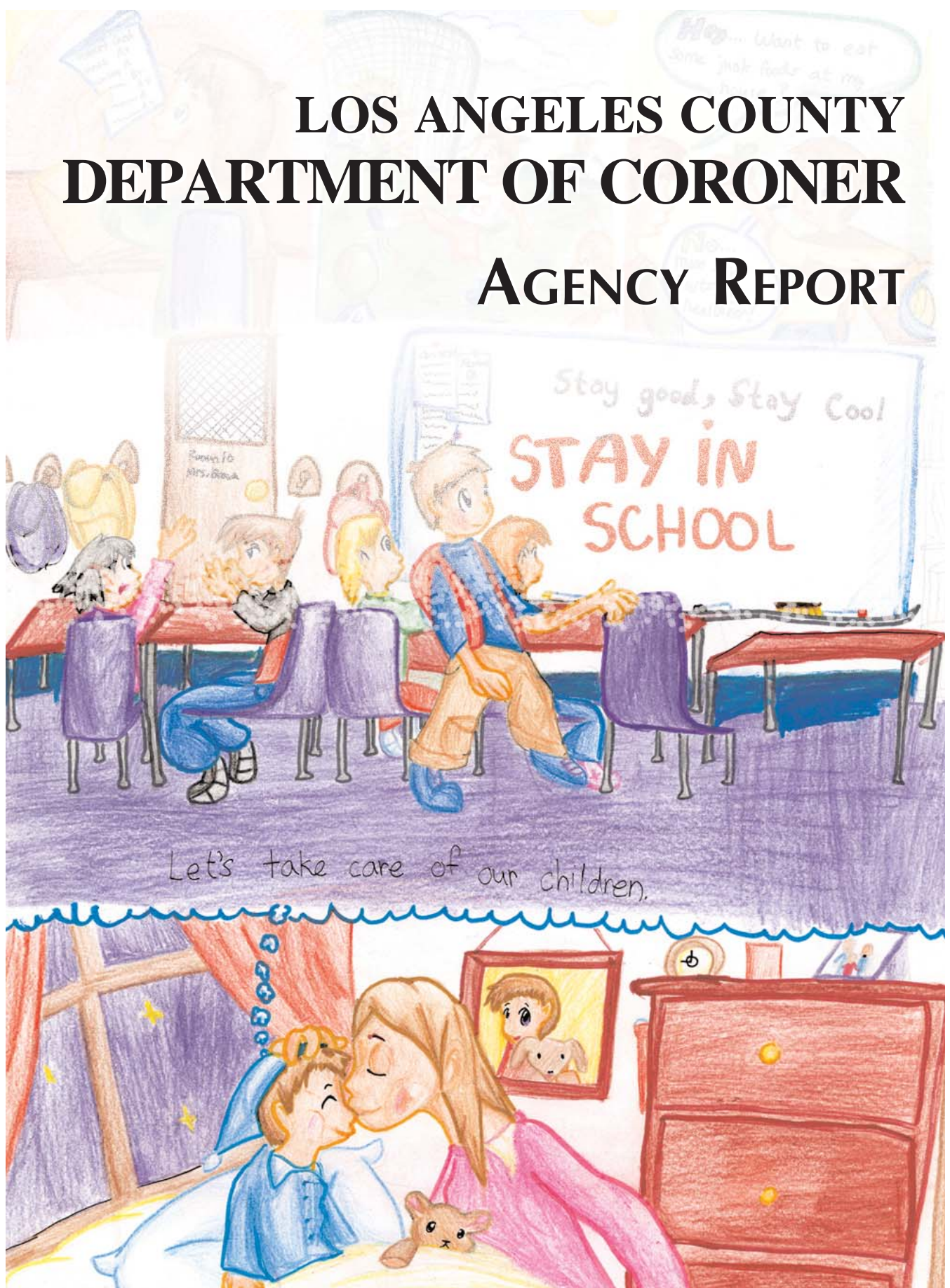
Investigated Reports – The activities of an agency in response to a report of known or suspected child abuse. For purposes of reporting information to the Child Abuse Central Index, the activities shall include, at minimum: assessing the nature and seriousness of the known or suspected abuse, conducting interviews of the victim(s) and any known suspect(s) and witness(es), gathering and preserving evidence, determining whether the incident is substantiated, inconclusive, or unfounded, and preparing a report that will be retained in the files of the investigating agency.

Inconclusive – Defined in Penal Code section 11165.12(c). This category was originally termed “unsubstantiated report” and was renamed by Chapter 842 of the Statutes of 1997 and became effective January 1, 1998. Inconclusive, as defined, is a report that is determined by the investigator who conducted the investigation not to be unfounded, but the findings are inconclusive, and there is insufficient evidence to determine whether child abuse or neglect as defined in Penal Code section 11165.6 has occurred.

Substantiated – Defined in Penal Code section 11165.12(b). An investigator has determined based upon evidence that makes it more likely than not that child abuse or neglect, as defined, occurred. This definition was amended by Chapter 842 of the Statutes of 2004 and became effective January 1, 2005.

LOS ANGELES COUNTY DEPARTMENT OF CORONER

AGENCY REPORT



Let's take care of our children.



DEPARTMENT OF CORONER

The Department of Coroner is mandated by law to “inquire into and determine the circumstances, manner, and cause of all violent, sudden, or unusual deaths; unattended deaths;” and deaths where “the deceased has not been attended by a physician in the 20 days before death.” (California Government Code Section 27491)

As of December 1990, the Department of Coroner is administered by a non-physician director who is responsible for all non-physician operations, and a Chief Medical Examiner-Coroner who is responsible for setting standards for the entire department and carrying out statutorily mandated Coroner functions.

The department is divided into the following Bureaus and Divisions: Forensic Medicine, Forensic Laboratories, Operations, Administrative Services, and Public Services.

FORENSIC MEDICINE BUREAU

The Forensic Medicine Bureau’s full-time permanent staff consists of board-certified forensic pathologists who are responsible for the professional medical investigation and determination of the cause and mode of each death handled by the department. Our physicians are experts in the evaluation of sudden or unexpected natural deaths and unnatural deaths such as deaths from firearms, sharp and blunt force trauma, etc. Physicians are frequently called to court to testify on cause of death and their medical findings and interpretations, particularly in homicide cases. In addition, the division has consultants in forensic neuropathology, archeology, odontology, anthropology, anesthesiology, pediatrics, surgery, ophthalmologic pathology, pulmonary pathology, pediatric forensic pathology, cardiac pathology, emergency room medicine, psychiatry, psychology and

radiology to assist the deputy medical examiners in evaluating their cases.

FORENSIC SCIENCE LABORATORIES BUREAU

The Forensic Science Laboratories Bureau is responsible for the identification, collection, preservation, and analysis of physical and medical evidence associated with Coroner’s cases. Its mission is to conduct a comprehensive scientific investigation into the cause and manner of any death within the Coroner’s jurisdiction through the chemical and instrumental analysis of physical and medical evidence.

The Forensic Science Laboratory is fully accredited by the prestigious American Society of Crime Laboratory Directors, and our Forensic Blood Alcohol testing program is licensed by the State of California.

HISTOLOGY LABORATORY

The histology laboratory facilitates the preparation of gross tissue specimens for microscopic examination by the medical staff. This includes hematoxylin and eosin stains, special stains, and immunohistochemical stains. Through the microscopic examination of tissue, our forensic pathologists can determine the age and degree of injury, diagnose disease including cancers, evaluate cellular variation in tissue, and identify the presence of bacteria, medical disorders, and toxins such as asbestos.

TOXICOLOGY LABORATORY

The toxicology lab uses state of the art equipment and methods to conduct chemical and instrumental analyses on post-mortem specimens to determine the extent that drugs may have contributed to the cause and manner of death. The laboratory’s experienced forensic toxicologists offer expert drug interpretation, which assists the medical examiners in



answering questions like what drug was taken? How much and when was the drug taken? Did the drug contribute to the cause and/or manner of death? Was the drug use consistent with therapeutic administration, or was it an abuse? If the death is due to a drug overdose, was it intentional or accidental?

SCANNING ELECTRON MICROSCOPY LABORATORY

The Scanning Electron Microscopy (SEM) laboratory conducts gunshot residue (GSR) analyses and tool mark evaluations. Using a scanning electron microscope equipped with an energy dispersive x-ray detector, GSR analysis is used to determine whether an individual may have fired a weapon. This laboratory also performs GSR analyses for many law enforcement agencies throughout California.

Tool mark analysis involves the evaluation of trauma to biological material, especially bone and cartilage, as to the type of instrument that might have produced the trauma. This not only helps our pathologists understand the circumstances of a death, but also aids the law enforcement agency in their criminal investigation.

OPERATIONS BUREAU

This bureau is responsible for the 24-hour day, 7-day week operations of many direct services provided by the department. The Operations Bureau oversees Investigations, Forensic Photography and Support, and the Forensic Services Division. In addition, the bureau is responsible for disaster and community services, fleet management, public information and other ancillary programs such as regional offices and the Youthful Drunk Driver Visitation Program (YDDVP).

Coroner Investigators are also responsible for testimony in court and deposition on Coroner cases along with preparation of investigative reports for use in the determination of cause and manner of death.

Under state law, all Coroner Investigators are sworn peace officers. The Coroner Investigator must meet the same stringent hiring standards as any other California law enforcement agency. The Department of Coroner is a California Peace Officer Standards and Training (P.O.S.T.) certified agency.

The department participates in a state-mandated program to examine dental records of known missing persons to aid in the identification of John and Jane Does and in a state-mandated program to investigate certain nursing home deaths to determine whether a death may be certified as natural by a private physician or handled as a Coroner's case.

YOUTHFUL DRUNK DRIVER VISITATION PROGRAM (YDDVP)

The Department of Coroner has presented the YDDVP program since 1989 as an alternative sentence option that can be considered by a judicial officer. The program is designed to present to the participants the consequences of certain behavior in a manner that has an impact and is also educational. The program is currently offered up to 12 times per month and includes classes presented in Spanish.

ADMINISTRATIVE SERVICES BUREAU

The Administrative Services Bureau is responsible for all departmental financial operations, departmental budget preparation, fiscal reports, personnel, payroll, litigation, procurement, accounting, revenue collection, marketing, volunteer services, affirmative



action, contracts and grants, internal control certification, workfare program, facilities management, information technology, and other related functions.

PUBLIC SERVICES DIVISION

This division is responsible for Coroner case file management, revenue collection (document sales, decedent billing, etc.), and interaction with the public both telephonically and at the front lobby reception area. In addition to providing information and copies of autopsy reports, Public Services staff offers many services to the public. These services include preparation of "Proof of Death" letters to verify that a death is being investigated by the Coroner and "Port of Entry" letters to confirm that a decedent had no communicable disease, necessary for the decedent's admission into a foreign country after death.

CALIFORNIA GOVERNMENT CODE, SECTION 27491

It shall be the duty of the Coroner to inquire into and determine the circumstances, manner, and cause of all violent, sudden, or unusual deaths; unattended deaths; deaths wherein the deceased has not been attended by a physician in the 20 days before death; deaths related to or following known or suspected self-induced or criminal abortion; known or suspected homicide, suicide, or accidental poisoning; deaths known or suspected as resulting in whole or in part from or related to accident or injury either old or recent; deaths due to drowning, fire, hanging, gunshot, stabbing, cutting, exposure, starvation, acute alcoholism, drug addiction, strangulation, aspiration, or where the suspected cause of death is sudden infant death syndrome; death in whole or in part

occasioned by criminal means; deaths associated with a known or alleged rape or crime against nature; deaths in prison or while under sentence; deaths known or suspected as due to contagious disease and constituting a public hazard; deaths from occupational diseases or occupational hazards; deaths of patients in state mental hospitals serving the mentally disabled and operated by the State Department of Mental Health; deaths of patients in state hospitals serving the developmentally disabled and operated by the State Department of Developmental Services; deaths under such circumstances as to afford a reasonable ground to suspect that the death was caused by the criminal act of another; and any deaths reported by physicians or other persons having knowledge of death for inquiry by coroner.

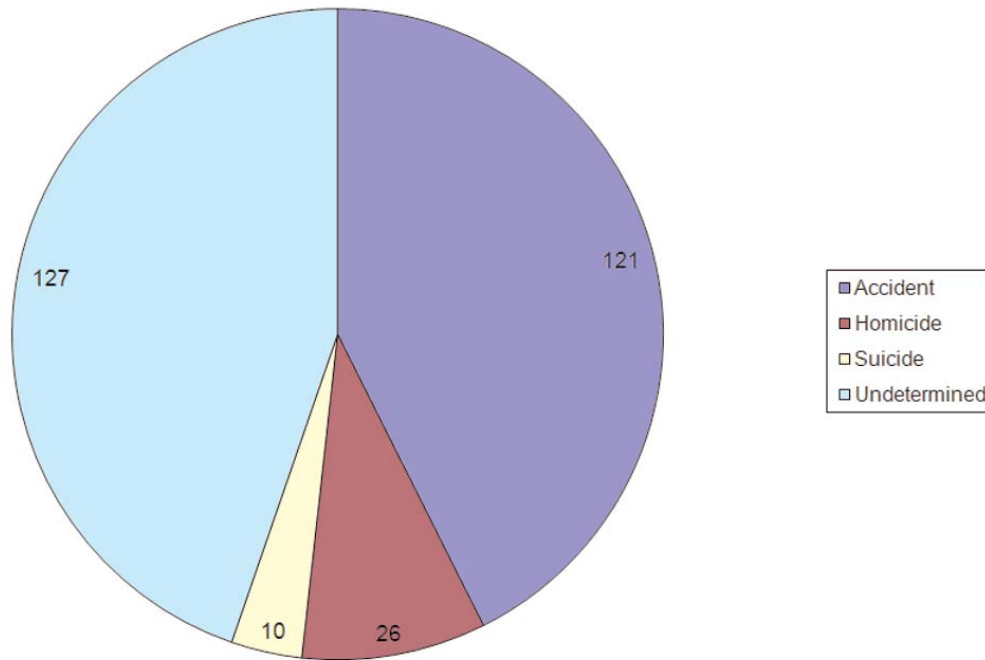
STATISTICAL SUMMARY

In calendar year 2007, after a review of the cases based on the ICAN-established criteria, of the total child deaths reported, 284 were referred to the Inter-Agency Council on Child Abuse and Neglect for tracking and follow-up. In calendar 2006, the total child deaths referred to the Inter-Agency Council on Child Abuse and Neglect for tracking and follow-up was 305, a decrease of 21 cases.

The Coroner refers to ICAN all non-natural deaths where the decedent was under 18 years of age. If the mode of death is homicide, only those cases where the death is caused by a parent, caregiver, or other family member are referred to ICAN.



**DEPARTMENT OF CORONER
284 Reportable ICAN Cases**



**DEPARTMENT OF CORONER
Selected Findings**

BY CAUSE OF DEATH	2006	2007	DIFFERENCE
Abandoned newborn	2	2	0
Children run over in driveway accident	2	5	3
Bathtub drowning	0	2	2
Falling television sets	0	2	2
Traffic Accident age less than or equal to 5 years	15	7	-8
a) Not properly secured in the vehicle	5	3	-2
b) Properly secured in the vehicle	3	3	0
Swimming pool drowning, age less than 5 years	4	7	3



Figure 1

DEPARTMENT OF CORONER 2007 DEATH STATISTICS

Case Comparison by Mode of Death and Gender

Total ICAN cases: 284

BY MODE OF DEATH	2006 TOTAL CASES	2006 % OF TOTAL	2007 TOTAL CASES	2007 % OF TOTAL	TOTAL DIFFERENCE
Accident	143	47%	121	43%	-22
Homicide	34	11%	26	9%	-8
Suicide	14	5%	10	3%	-4
Undetermined	114	37%	127	45%	13
TOTAL	305	100%	284	100%	-21

BY GENDER	2006 TOTAL CASES	2006 % OF TOTAL	2007 TOTAL CASES	2007 % OF TOTAL	TOTAL DIFFERENCE
Female	113	37.05%	106	37.32%	-7
Male	190	62.30%	177	62.33%	-13
Undetermined	22	0.66%	1	0.35%	-1
TOTAL	305	100.00%	284	100.00%	-21



Figure 2

DEPARTMENT OF CORONER 2007 DEATH STATISTICS
Case Comparison by Ethnicity and Age
Total ICAN cases: 284

BY ETHNICITY	TOTAL CASES	% OF TOTAL
Asian	10	3.5%
American Indian	1	0.40%
Black	50	17.60%
Cambodian	1	0.40%
Caucasian	47	16.50%
Chinese	2	0.70%
Filipino	4	1.40%
Hispanic/Latin American	158	55.60%
Korean	2	0.70%
Middle Eastern	3	1.00%
Pacific Islander	1	0.40%
Samoan	1	0.40%
Vietnamese	1	0.40%
Unknown	3	1.00%
TOTAL	284	100%
DEATH BY AGE	TOTAL CASES	% OF TOTAL
Stillborn	26	9.20%
1 day - 31 days	16	5.60%
1 - 5 months	69	24.20%
6 months - 1 year	43	15.00%
2 years	15	5.30%
3 years	6	2.10%
4 years	5	1.80%
5 years	5	1.80%
6 years	3	1.00%
7 years	4	1.50%
8 years	6	2.10%
9 years	4	1.50%
10 years	7	2.50%
11 years	2	0.70%
12 years	8	2.80%
13 years	4	1.50%
14 years	7	2.50%
15 years	9	3.10%
16 years	18	6.30%
17 years	27	9.50%
TOTAL	284	100%



Figure 3

DEPARTMENT OF CORONER 2007 DEATH STATISTICS

By Gender, by Ethnicity, by Age

Total Accident Cases: 121

ACCIDENT BY GENDER	TOTAL CASES	% OF TOTAL
Female	35	29%
Male	85	70%
Undetermined	1	1%
TOTAL	121	100%
ACCIDENT BY ETHNICITY	TOTAL CASES	% OF TOTAL
Asian	5	4%
Black	14	12%
Caucasian	21	17%
Chinese	1	1%
Filipino	1	1%
Hispanic/Latin American	75	62%
Middle Eastern	2	2%
Vietnamese	1	1%
Unknown	1	1%
TOTAL	121	100%
ACCIDENT BY AGE	TOTAL CASES	% OF TOTAL
Stillborn – 1 day	13	11%
1 day - 30 days	4	3%
1 months - 5 months	2	2%
6 months - 1 year	15	12%
2 years	7	6%
3 years	4	3%
4 years	2	2%
5 years	4	3%
6 years	2	2%
7 years	3	2%
8 years	4	3%
10 years	6	5%
11 years	1	1%
12 years	7	6%
13 years	3	2%
14 years	4	3%
15 years	6	5%
16 years	13	11%
17 years	21	17%
TOTAL	121	100%



Figure 4

**DEPARTMENT OF CORONER 2007 DEATH STATISTICS
MODE OF DEATH: ACCIDENT
By Cause of Death Total Accident Cases: 121**

BY CAUSE OF DEATH	TOTAL	% OF TOTAL
Vehicular		
Vehicle vs. pedestrian	26	21%
Train vs. pedestrian	1	1%
Bicycle v. vehicle	4	3%
Motor scooter vs. vehicle	1	1%
Vehicle vs. vehicle	14	12%
Vehicle vs. train	1	1%
Vehicle vs. fixed object	10	8%
Overtuned auto	3	2%
Pickup vs fixed object	1	1%
Overtuned Pickup	1	1%
Aircraft	1	1%
Fall	3	2%
Struck by Falling Object	2	2%
Handgun Discharge	1	1%
DROWNING		
Swimming Pool	9	7%
Lake	1	1%
Bucket	1	1%
Bathtub	1	1%
Hanging	4	3%
Choking	1	1%
Fire	4	3%
Heat Stroke	1	1%
DRUG ABUSE		
Intrauterine exposure	14	12%
Self-administered	8	7%
Therapeutic misadventure	8	7%
TOTAL	121	100%



Figure 5

**DEPARTMENT OF CORONER 2007 DEATH STATISTICS
MODE OF DEATH: HOMICIDE
By Gender, by Ethnicity, by Age Total Homicide Cases: 26**

HOMICIDES BY GENDER	TOTAL CASES	% OF TOTAL
Female	13	50%
Male	13	50%
TOTAL	26	100%
HOMICIDES BY ETHNICITY	TOTAL CASES	% OF TOTAL
Asian	2	8%
Black	5	19%
Caucasian	4	15%
Hispanic/Latin American	14	54%
Pacific Islander	1	4%
TOTAL	26	100%
HOMICIDES BY AGE	TOTAL CASES	% OF TOTAL
Stillborn - 1 day	5	19%
1 day - 30 days	1	4%
1 - 5 months	5	19%
6 months - 1 year	2	8%
2 years	6	23%
3 years	1	4%
4 years	2	8%
6 years	1	4%
7 years	1	4%
8 years	1	4%
9 years	1	4%
TOTAL	26	100%



Figure 6

**DEPARTMENT OF CORONER 2007 DEATH STATISTICS
MODE OF DEATH: HOMICIDE
By Cause of Death Total Homicide Cases: 26**

BY CAUSE OF DEATH	TOTAL CASES	% OF TOTAL
Suffocation/maternal hanging	5	19%
Unattended in bathtub	1	4%
Gunshot wound	5	19%
Stabbing	2	8%
Battered child	7	27%
Starvation	1	4%
Failure to restrain child in vehicle	3	12%
Abandoned infant	2	8%
TOTAL	26	100%

Figure 7

**DEPARTMENT OF CORONER 2007 DEATH STATISTICS
MODE OF DEATH: SUICIDES BY GENDER, BY ETHNICITY, BY AGE,
By Cause of Death Total Suicide Cases: 10**

SUICIDE BY GENDER	TOTAL CASES	% of TOTAL
Female	2	2%
Male	8	8%
Total	10	100%
SUICIDE BY ETHNICITY	TOTAL CASES	% of TOTAL
Black	1	10%
Caucasian	3	30%
Hispanic/Latin American	5	50%
Philipino	1	10%
TOTAL	10	100%
SUICIDE BY AGE	TOTAL CASES	% of TOTAL
11 years old	1	10%
14 years old	2	20%
15 years old	2	20%
16 years old	3	30%
17 years old	2	20%
TOTAL	13	100%
SUICIDE BY CAUSE OF DEATH	TOTAL CASES	% of TOTAL
Overdose	1	10%
Gunshot wound	2	20%
Hanging	6	60%
Power Drill	1	10%
TOTAL	10	100%



Figure 8

DEPARTMENT OF CORONER 2007 DEATH STATISTICS
MODE OF DEATH: UNDETERMINED BY GENDER, BY ETHNICITY, BY AGE
Total Undetermined Cases: 127

BY GENDER	TOTAL CASES	% of TOTAL
Female	56	44%
Male	71	56%
TOTAL	127	100%
BY ETHNICITY	TOTAL CASES	% of TOTAL
Asian	2	2%
American Indian	1	1%
Black	31	24%
Caucasian	21	17%
Cambodian	1	1%
Chinese	1	1%
Filipino	2	2%
Hispanic/Latin American	64	50%
Korean	2	2%
Middle Eastern	1	1%
Samoan	1	1%
TOTAL	127	100%
BY AGE	TOTAL CASES	% of TOTAL
Stillborn - 1 day	12	9%
1 day - 30 days	11	9%
1 - 5 months	61	48%
6 months - 1 year	26	20%
2 year	2	2%
3 year	1	1%
4 year	1	1%
5 year	1	1%
8 year	1	1%
9 year	1	1%
10 year	1	1%
12 year	1	1%
14 year	1	1%
15 year	1	1%
16 year	2	2%
17 year	4	3%
TOTAL	127	100%



Figure 9

**DEPARTMENT OF CORONER 2007 DEATH STATISTICS
MODE OF DEATH: UNDETERMINED
Total Undetermined Cases: 127**

BY CAUSE OF DEATH	TOTAL CASES	% of TOTAL
Bathtub Drowning	1	1%
Infections	8	6%
Pulmonary Embolus	1	1%
Heroin	1	1%
Maternal drug use	6	5%
Blunt trauma	2	2%
Complications of delivery	3	2%
Unsafe sleep surface	3	2%
Cosleeping	35	28%
Non-prescribed sedatives	1	1%
Unexplained injuries	23	18%
Unknown cause	43	34%
TOTAL	127	100%



GLOSSARY OF TERMS

Accident – Death due to an unforeseen injury, or, in children, a lapse in the usual protection.

Autopsy – Post mortem (after death) examination of a body including the internal organs and structures, including dissection to determine cause of death or the nature of the pathologic change.

Death – For legal and medical purposes: a person is dead who has sustained either:

- (a) Irreversible cessation of circulatory and respiratory functions, or
- (b) Irreversible cessation of all functions of the entire brain

Decedent – A person who is dead.

Homicide – Death at the hands of another. The legal system rather than the Coroner determines whether a homicide is legal, justified, intentional, or malicious. In children and the elderly, neglect (failure to protect) is classified as homicide.

Mode – Classification of death based on the conditions that cause death and the circumstances under which the conditions occur. The Coroner classifies all deaths using one of the following five modes: accident, homicide, natural, suicide, or undetermined.

Natural – Death due solely to disease and/or the aging process.

Suicide – The intentional taking of one's own life.

Undetermined – Cases in which the Coroner is unable to assign a specific manner of death (natural, accident, suicide, homicide).

These cases often involve either insufficient information or conflicting information that affects the Coroner's ability to make a final determination. The Coroner may designate a death as undetermined as a signal to law enforcement that the case warrants a more in-depth investigation to try to answer some of the questions surrounding the death.

The Coroner also modes a death as undetermined when the autopsy findings do not establish any cause of death and one of the following is present:

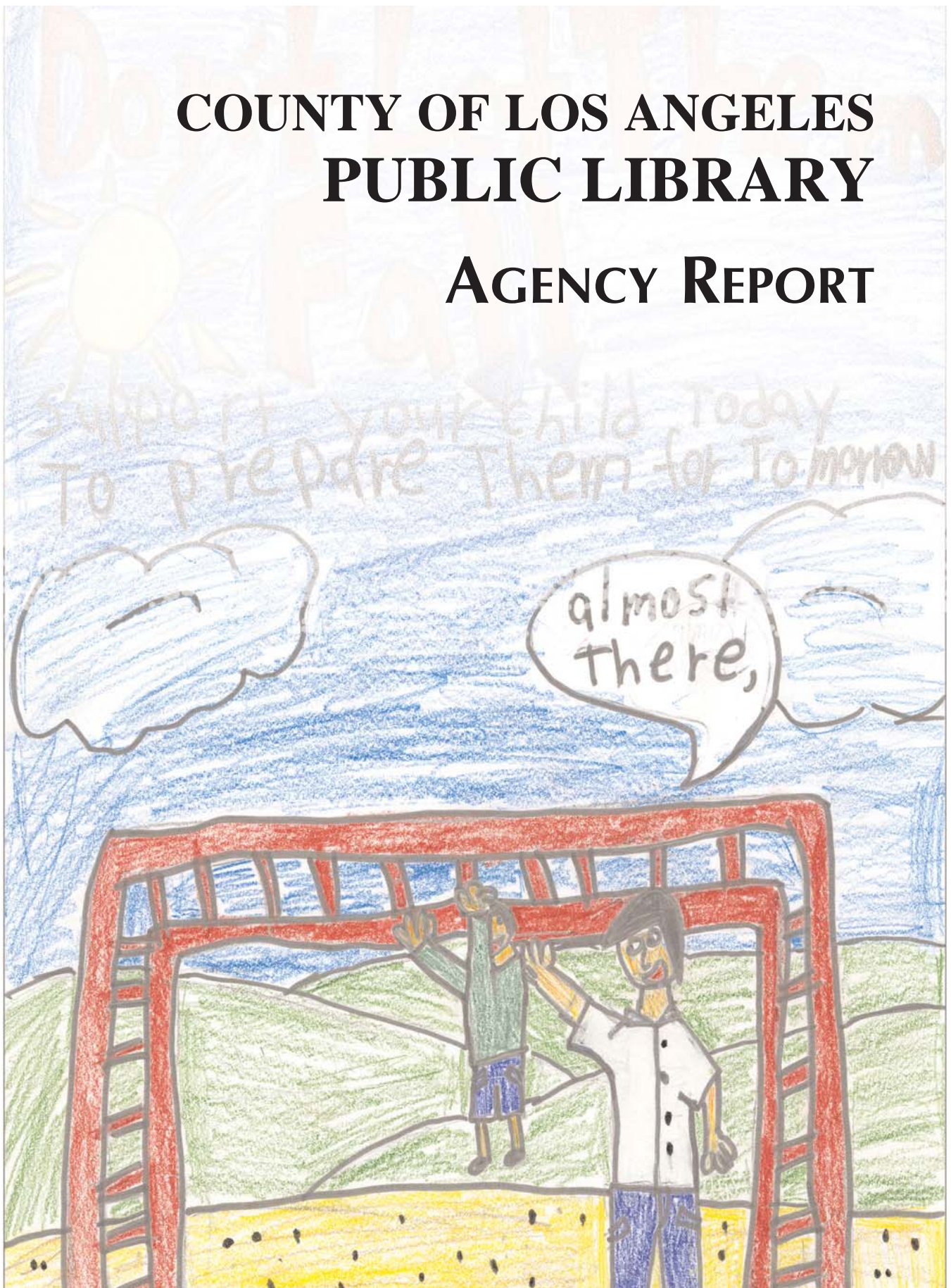
1. Unsafe sleep surface
2. Co-sleeping with adult
3. Absent or inadequate scene investigation
4. Non-prescribed sedative drugs detected
5. Injuries present
6. Poor nutrition/abnormal development
7. Prior unexplained sibling death
8. History of domestic violence
9. Definite blood in the nose or airway

COUNTY OF LOS ANGELES PUBLIC LIBRARY

AGENCY REPORT

Support your child today
to prepare them for tomorrow

almost
there,





**COUNTY OF LOS ANGELES
PUBLIC LIBRARY**

ICAN DATA ANALYSIS REPORT 2007 - 2008

**NO-FAULT LIBRARY CARD FOR
FOSTER CHILDREN**

The County of Los Angeles Public Library reaches out to children in at-risk populations. While some foster children in Los Angeles County have caregivers who take on the financial responsibility necessary in securing a library card for their foster children, many of them are reluctant to take on that responsibility. In the event of a change in placement, the child may use the card irresponsibly and the original caregiver may be responsible for subsequent library fines or charges for lost library materials.

Since October 2002, the Public Library and the Department of Children and Family Services (DCFS) have worked together to provide a “no-fault” library card for foster children. DCFS is responsible for any fines or overdue materials and fees for lost materials checked out by foster children enrolled in the program. Currently, more than 1300 children have received library cards through this program.

In 2007, the Library engaged in outreach activities to promote the no-fault library card. Outreach included booths at DCFS Christmas events and fund-raisers. Library staff provided information at several DCFS conferences, education meetings and foster parent events. DCFS promoted the library card and the Library’s on-line tutoring program to the children and families through their website. There were 212 children who received the no-fault library card in Fiscal Year (FY) 2007-08.

LIBRARY CARDS FOR PROBATION YOUTH

During FY 2007-08 the Public Library continued its partnership with the Probation Department. Each youth received a library card after incarceration at a Juvenile Hall or probation camp. During FY 2007-08, more than 5,000 library cards were issued. More than 100 deputy probation officers have participated in library orientations. Many school based probation officers are regularly bringing their clients to County Libraries to learn about and use library books and resources. The Library and Probation Department are exploring on how to expand their partnership.

LIVE HOMEWORK HELP

The County of Los Angeles Public Library offers a free on-line Live Homework Help program. The website is www.librarytutor.org. It is available in English and Spanish from 1:00 pm – midnight every day. Free tutoring sessions with a qualified tutor are available on-line in English, Math, Science and Social Studies. All that a student needs is access to the Internet and a County of Los Angeles Public Library card. In FY 07–08, more than 55,000 students used the service .

EARLY CHILDHOOD PROGRAMS

FAMILY PLACE

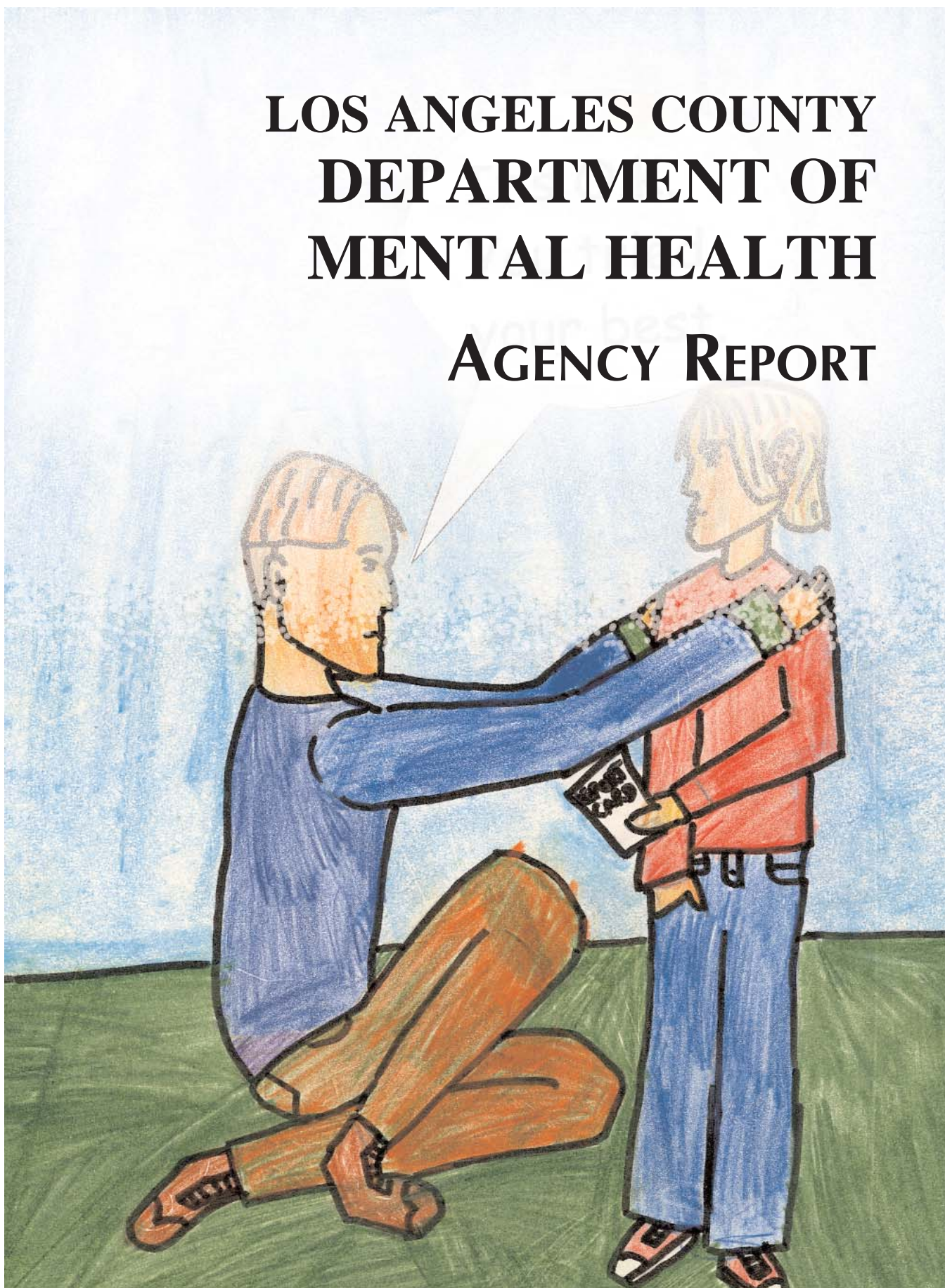
Family Place is designed to assist families to strengthen their knowledge about and support for their children’s early childhood development and learning. The Public Library provides appealing spaces for parents and children to learn together. The Libraries provide parent/child workshops where parents are introduced to community resources that can assist



them by answering questions and dealing with issues of child rearing. In 2007 - 2008, the County Library expanded the program from 19 sites to 25. Almost 11,000 children and caregivers were reached through the library programs and parent training.

**LOS ANGELES COUNTY
DEPARTMENT OF
MENTAL HEALTH**

AGENCY REPORT





DEPARTMENT OF MENTAL HEALTH CHILDREN'S SYSTEM OF CARE

The Department of Mental Health (DMH) administers, develops, coordinates, monitors and evaluates a continuum of mental health services for children within the Children's System of Care (CSOC).

THE MISSION OF THE CSOC

To enable children with emotional disorders to develop their ability to function in their families, school, and community.

To enable children with emotional and behavioral disorders, Department of Children and Family Services (DCFS) involved children, and children at risk of out of home placement to remain at home, succeed in school, and avoid involvement with the juvenile justice system.

HOW THE CSOC FULFILLS ITS MISSION

The CSOC maintains a planning structure regarding the direction of service development, following a system of care plan for Children and Families, established through the DMH planning process, as a guide for system of care development.

- Manages a diverse continuum of programs that provide mental health care for children and families.
- Promotes the expansion of services through innovative projects, interagency agreements, blended funding, and grant proposals to support new programs.
- Collaborates with the other public agencies, particularly the Department of Health Services (DHS), the Department of Children and Family Services (DCFS), the Probation Department, the County Office of Education (LACOE), and school districts, (e.g., LAUSD).
- Promotes the development of county

and statewide mental health policy and legislation to advance the well-being of children and families.

WHOM THE CSOC SERVES

The CSOC serves children who have a DSM-IV Axis I diagnosis and have symptoms or behaviors that cause impairment in functioning that can be ameliorated with treatment.

The priority target population that the Short-Doyle/Medi-Cal community mental health providers serve are children with a DSM-IV Axis I diagnosis that has or will, without treatment, manifest in psychotic, suicidal or violent behavior, or long-term impairment of functioning in home, community or school.

THE CSOC TREATMENT NETWORK

The CSOC provides mental health services through 20% directly-operated and 80% contracted service providers. The CSOC network links a range of programs, including long-term and acute psychiatric hospitals, outpatient clinics, specialized outpatient services, day treatment, case management, and outreach programs throughout the county.

CLIENTS AND PROGRAMS RELATED TO CHILD ABUSE AND NEGLECT

This report presents the characteristics of child and adolescent clients who are victims of, or are at risk of child abuse and neglect and are receiving psychological services in relevant programs provided by DMH.

The programs to be presented include those that provide psychological care for abused or neglected children and adolescents and their families. In addition, the report covers other programs for children and adolescents who are at risk for abuse or neglect.

The report will review the following



programs: Family Preservation; Family Reunification; Child Abuse Prevention Program; Interagency Delinquency Prevention Program; Juvenile Court Mental Health Services; Juvenile Halls; Dorothy Kirby Center; Challenger Memorial Youth Center and its associated Juvenile Justice Camps; D-Rate Assessment Unit; Level 14 Group Homes; and Community Treatment Facilities.

FAMILY PRESERVATION PROGRAM

Family Preservation (FP) is a collaborative effort between DMH, DCFS, Probation, and the community to reduce out-of-home placement and the length of stay in foster care, and shorten the time to achieve permanency for children at risk of abuse, neglect and delinquent behavior. The program's model is a community-based collaborative approach that focuses on preserving families experiencing challenges related to child abuse, neglect, and/or child exploitation by providing a range of services that promote empowerment and self-sufficiency. These support services are designed to keep children and their families together. DCFS allocates funds to DMH for the FP mental health services and DMH, in turn, contracts for services from local private mental health agencies. Early and Periodic Screening, Diagnosis and Treatment (EPSDT) funds also support this program. FP programs provide mental health services in every Service Planning Area (SPA).

Blended funding also drives Eden, an innovative program offering both mental health and substance abuse services at SHIELDS for Families for a maximum of 35 FP families residing in South Central Los Angeles. This co-occurring disorders program requires 9-15 months to complete its substance-abuse component and then to transition into a maintenance intervention if needed. About half of its funding is provided by DMH. Its

remaining resources are a mixture of DCFS, Alcohol and Drug Program Administration, Federal Healthy Start, and First-5 LA dollars. During FY 06-07, this program provided services for 44 families, with 14 successfully completing the substance-abuse component.

When a family is referred to FP, a Multi-agency Case Planning Conference (MCPC) is convened at the appropriate Community Family Preservation Network (CFPN). A SPA-based Family Preservation Specialist (FPS) represents DMH at the MCPC and assists in the screening of children, youth and families suitable for Family Preservation mental health services. Where appropriate, the FPS assists with the preparation of a mental health referral. The FPS reports to a DMH District Chief or geographic area manager of a specific community so that the FP mental health component is integrated with other mental health services. The FPS monitors the referrals from the DCFS Family Preservation Lead Agency to the DMH Family Preservation Providers.

Mental health services are one of many services offered by the FP program. The mental health component is provided as a linkage service to meet the needs of families that are identified at, or prior to, the Multi-agency Case Planning Conference Meeting that occurs at the Family Preservation community agency. The linkage to mental health services through DMH, which focuses on improving the functioning of the most seriously or chronically emotionally disturbed children, youth and adults, has been a successful strategy that allows for an integrated treatment approach providing therapeutic interventions that improve child and family functioning by developing effective parental coping skills that reduce the risk of child abuse, neglect, and delinquent behaviors.

Mental health services offered include: psychological testing; assessment and evalu-



ation; individual, group and family therapy/rehabilitation; collateral services; medication support; crisis intervention; and targeted case management provided in the child's community, school, and home.

During FY 06-07, there were 1,059 clients served by 21 DMH agencies offering services to FP clients. Figures 1, 2, and 3 describe the gender, age and ethnicity of the FP clients. The largest percentage of the FP clients were referred by DCFS, with smaller proportions of clients referred by Probation and School Districts that are both Special Education Plan (SEP) eligible and non-SEP eligible (Figure 4).

Figure 1
FAMILY PRESERVATION PROGRAM
Gender

Gender	Count	Percent
Male	530	50.0%
Female	529	50.0%
TOTAL	1,059	100.0%

Figure 2
FAMILY PRESERVATION PROGRAM
Age

Age (Group)	Count	Percent
0-5	65	6.1%
6-11	417	39.4%
12-17	528	49.9%
18-20	49	4.6%
TOTAL	1,059	100.0%

Figure 3
FAMILY PRESERVATION PROGRAM
Ethnicity

Ethnicity	Count	Percent
Caucasian	83	7.8%
African American	237	22.4%
Hispanic	679	64.1%
American Native	3	0.3%
Asian/ Pacific Islander	5	0.5%
Other	17	1.6%
Unknown	35	3.3%
TOTAL	1,059	100.0%

Figure 4
FAMILY PRESERVATION PROGRAM
Responsible Agency

Agency	Count	Percent
DCFS	356	33.6%
Probation	27	2.5%
DCFS and School Dist	18	1.7%
Probation and School District	5	0.5%
School District (SEP Eligible)	11	1.0%
School District (Non-SEP Eligible)	5	0.5%
No Data	637	60.2%
TOTAL	1,059	100.0%

The diagnoses for FP child and adolescent clients are presented in Figures 5 and 6. Their most frequent primary admission diagnoses were Adjustment/Conduct Disorder/ ADHD and Major Depression. A primary or secondary diagnosis of Child Abuse and Neglect was given to 27 clients (2.6%). Figure 7 indicates that 33 clients (3.2%) were identified as substance users. Marijuana and polysubstance use were most frequently reported, followed by amphetamines and alcohol.

Figure 5
FAMILY PRESERVATION PROGRAM
Primary DSM Diagnosis

Diagnosis	Count	Percent
Drug Induced Disorders or Dependence	0	0.0%
Disorders Due to Medical Condition	0	0.0%
Schizophrenia/Psychosis	6	0.6%
Bipolar Disorders	15	1.4%
Major Depression	224	21.2%
Anxiety Disorders	221	20.9%
Other Diagnoses	209	19.7%
Adjustment/Conduct Disorder/ADHD	289	27.3%
Child Abuse and Neglect	7	0.7%
No Diagnosis or Diagnosis Deferred	88	8.3%
TOTAL	1,059	100.0%



Figure 6
FAMILY PRESERVATION PROGRAM
Secondary DSM Diagnosis

Diagnosis	Count	Percent
Drug induced Disorders or Dependence	12	1.1%
Disorders Due to Medical Condition	0	0.0%
Schizophrenia/Psychosis	1	0.1%
Bipolar Disorders	5	0.5%
Major Depression	13	1.2%
Anxiety Disorders	15	1.4%
Other Diagnoses	83	7.8%
Adjustment/Conduct Disorder/ADHD	25	2.4%
Child Abuse and Neglect	20	1.9%
No Diagnosis or Diagnosis Deferred	885	83.6%
TOTAL	1,059	100.0%

Figure 7
FAMILY PRESERVATION PROGRAM
Admit Substance Abuse

Substance Abuse	Count	Percent
Alcohol	2	0.2%
Amphetamines	4	0.4%
Marijuana	14	1.3%
Cocaine	0	0.0%
Hallucinogens	1	0.1%
Inhalants	1	0.1%
Sedatives and Opioids	1	0.1%
Polysubstance Abuse	10	0.9%
No Substance Abuse	808	76.3%
Undetermined	218	20.6%
TOTAL	1,059	100.0%

REUNIFICATION OF MISSING CHILDREN PROGRAM

The Reunification of Missing Children programs are part of the Reunification of Missing Children Task Force chaired by Find the Children, a non-profit corporation dedicated to the recovery of missing children, and the Inter-Agency Council on Child Abuse and Neglect (ICAN). Task force members include LAPD, LASD, DCFS, County Counsel, FBI, US Secret Service, Mexican Consulate, and the D.A.'s Office. Find the Children works closely with the National Center for Missing and Exploited Children. It refers children and parents to the reunification programs in response to requests received from DCFS, Probation, the Department of Justice, the State Department, the FBI, local law enforcement agencies, and the Family Court judge.

Community outreach is used by the Family Reunification program to provide services to families with reunification issues. Outreach clients in need of mental health treatment and their families are provided with information about mental health resources near their residence. Families referred to the Family Reunification program receive family therapy, child therapy or group therapy and combinations of these interventions, as well as parenting classes. Outreach families who are not referred for mental health treatment do not present an Axis I diagnosis nor meet the medical necessity criteria for admission into DMH. They do, nonetheless, receive interventions such as social skills training and parenting classes.

Three of the DMH-contracted mental health providers, Didi Hirsch Community Mental Health Center (Didi Hirsch CMHC), Prototypes I-CAN and Los Angeles Child Guidance Center, provide culturally sensitive,



multidisciplinary crisis-oriented consultation, assessment and treatment immediately following the recovery of a child who has been abducted, often by a non-custodial parent. In FY 06-07, treatment was provided at Didi Hirsch by one MSW and two Marriage and Family Therapists. At Prototypes I-CAN, services were provided by a psychiatrist, a clinical psychologist, a social worker, a mental health rehabilitation specialist and supervised student clinicians. The reunification program's staff at Los Angeles Child Guidance Clinic consisted of an MSW, a PsyD and two family advocates with a Bachelor's degree in a related mental health field. The program's goal is to assist in the process of reunification with the left-behind parent(s), to help determine appropriate placement, and to address any related trauma. The referral source for all reunification cases is the Find the Children Agency.

Didi Hirsch's Family Reunification program, a joint program of Didi Hirsch CMHC, Find the Children, and ICAN, served five cases during FY 06-07. It is located in Mar Vista in SPA 5 although referrals may be received from any service area. The cases are treated with reunification counseling aimed at reuniting family members. There are two types of referral: one for one-time intervention and the other for brief counseling lasting up to six sessions. The one-time intervention is a conjoint effort with DCFS. The treatment goal is to facilitate the reunification process. The reunification intervention is held at DCFS or at Didi Hirsch, as needed. The intervention lasts for a day during which program staff interviews the involved parties and coaches the adults in their appropriate responses for reunification with the child. A therapist and DCFS worker monitor reunification visits. After the day-long intervention, a report is made to DCFS, so it may be used in court as needed.

The other type of referral to the Didi Hirsch

program is for brief reunification counseling. In this type of referral, the reunification has already occurred. The treatment goal is to facilitate and explore the events that led to the reunification in order to help the family to stabilize. After the six sessions, treatment may end if support and family functioning is established. If more services are needed, Didi Hirsch may provide additional interventions under its Child Alert Program, or the clients may be referred out to a geographically appropriate agency. The Child Alert Program, part of the Reunification of Missing Children Task Force, offers specialized mental health services for children and families affected by physical, sexual or emotional abuse or neglect. The latter program seeks to prevent further abuse through family support and community education. When there is no open chart due to a client's inability to travel to the Didi Hirsch site, linkage and consultation is offered.

Prototypes I-CAN is a non-profit community based mental health clinic offering a range of outpatient mental health services to children, adolescents, and adults who live in SPA 3. Within its outpatient clinic, services are provided to children and adolescents who have been abducted and then returned to the "left behind parent." In FY 06-07, two clients were served by its Reunification program. Upon referral, Prototypes I-CAN contacts the identified client and offers individual and/or family services. Clients received 84% of these services in Spanish. The services models vary with the need of the client and may include play therapy, parenting, and/or family therapy.

Los Angeles Child Guidance Clinic offers community mental health services to children, youth and families residing in SPA 2. The Clinic's collaboration with Find the Children began in 2006. In FY 06-07 one child was served by the program. Children are referred to the Clinic's outpatient services by Find the



Children at the time of a child’s recovery. Each child is then assigned a treatment team consisting of a therapist and a family advocate to provide an array of services, and may include a psychiatrist when necessary. The therapist completes a thorough psychosocial assessment, utilizing the DMH child initial assessment. The team provides trauma-sensitive individual and/or family therapy, targeted case management, individual rehabilitation and medication evaluation and treatment. The treatment team conceptualizes trauma as disrupting attachment and the development of emotional regulation. The therapeutic work is focused on enhancing family and community relationships. Therapists use play therapy, cognitive-behavioral and art interventions as well as traditional therapy to assist the client and family process the abduction as well as the recovery and reunification. Family advocates assist the clients with skill building and work closely with parents to establish appropriate structure in the home.

During FY 06-07, 8 clients were served by the Family Reunification programs of Didi Hirsch CMHC, Prototypes I-CAN and LA Child Guidance Clinic. Figures 8-14 present relevant characteristics for those Reunification program clients who were served in these two clinic settings. The community outreach clients served by the Family Reunification Program are not tracked in the DMH Integrated System (IS) and, therefore, not included in Figures 8-14.

Figures 8, 9, 10, and 11 show the gender, age, race/ethnicity, and agency of primary responsibility of the 9 Family Reunification clinic clients. DCFS provided the largest number of referrals.

Figure 8

FAMILY REUNIFICATION PROGRAM

Gender	Count	Percent
Male	6	75.0%
Female	2	25.0%
TOTAL	8	100%

Figure 9

FAMILY REUNIFICATION

Age (Group)	Count	Percent
0-5	1	12.5%
6-11	3	37.5%
12-17	3	37.5%
18-20	1	12.5%
TOTAL	8	100.0%

Figure 10

FAMILY REUNIFICATION

Ethnicity	Count	Percent
Caucasian	1	12.5%
African American	1	12.5%
Hispanic	4	50.0%
American Native	0	0.0%
Asian/ Pacific Islander	2	25.0%
Other	0	0.0%
Unkown	0	0.0%
TOTAL	8	100.0%

Figure 11

FAMILY REUNIFICATION

Agency	Count	Percent
DCFS	6	75.0%
Probation	0	0.0%
DCFS and School Dist	0	0.0%
Probation and School District	0	0.0%
School District (SEP Eligible)	0	0.0%
School District (Non-SEP Eligible)	0	0.0%
Department of Justice	0	0.0%
Law Enforcement	0	0.0%
No Data	2	25.0%
TOTAL	8	100.0%



Diagnostic information is presented in Figures 12 and 13. Anxiety Disorders, and Other Diagnoses were the most common primary admission diagnoses for Family Reunification clients. Figure 14 documents the apparent absence of substance use in this population.

Figure 12

**FAMILY REUNIFICATION PROGRAM
Primary DSM Diagnosis**

Diagnosis	Count	Percent
Drug Induced Disorders or Dependence	0	0.0%
Disorders Due to Medical Condition	0	0.0%
Schizophrenia/Psychosis	0	0.0%
Bipolar Disorders	0	0.0%
Major Depression	1	12.5%
Anxiety Disorders	3	37.5%
Other Diagnoses	3	37.5%
Adjustment/Conduct Disorder/ADHD	1	12.5%
Child Abuse and Neglect	0	0.0%
No Diagnosis or Diagnosis Deferred	0	0.0%
TOTAL	8	100.0%

Figure 13

**FAMILY REUNIFICATION PROGRAM
Secondary DSM Diagnosis**

Diagnosis	Count	Percent
Drug induced Disorders or Dependence	0	0.0%
Disorders Due to Medical Condition	0	0.0%
Schizophrenia/Psychosis	0	0.0%
Bipolar Disorders	0	0.0%
Major Depression	0	0.0%
Anxiety Disorders	0	0.0%
Other Diagnoses	0	0.0%
Adjustment/Conduct Disorder/ADHD	0	0.0%
Child Abuse and Neglect	0	0.0%
No Diagnosis or Diagnosis Deferred	8	100.0%
TOTAL	8	100.0%

Figure 14

**FAMILY REUNIFICATION PROGRAM
Admit Substance Abuse**

Substance Abuse	Count	Percent
Alcohol	0	0.0%
Amphetamines	0	0.0%
Marijuana	0	0.0%
Cocaine	0	0.0%
Hallucinogens	0	0.0%
Inhalants	0	0.0%
Sedatives and Opioids	0	0.0%
Polysubstance Abuse	0	0.0%
No Substance Abuse	8	100.0%
TOTAL	8	100.0%

Child Abuse Prevention, Intervention and Treatment (CAPIT) Program (AB 1733/2994)

Since 1984, the CAPIT Program has been providing early intervention/prevention services to victims of child abuse and/or neglect, their families, and those who are at high risk for abuse and/or neglect. The population that it serves includes both children who still reside with their parents/caregivers, as well as those who have been removed from their home. The CAPIT program derives from two legislative initiatives: AB 1733 and AB 2994 (Statutes of 1982). The program is codified in the California Welfare and Institutions Code section 18960.

AB 2994 establishes a County Children’s Trust Fund for the purpose of funding child abuse and neglect prevention, intervention and treatment programs operated by private, non-profit organizations, which requires that \$4 of any \$7 fee for a certified copy of a birth



certificate be used for prevention services. Most recent legislation (SB 750) enables counties to add \$3 to this surcharge.

AB 1733 authorizes state funding for child abuse prevention and intervention services offered by public and private nonprofit agencies. AB 1733 requires a multidisciplinary council to provide recommendations to the Board of Supervisors on funding priorities and processes.

In Los Angeles County, the designated council is the Inter-Agency Council on Child Abuse and Neglect (ICAN). To develop funding guidelines, ICAN convenes an AD Hoc AB 1733/AB 2994 Planning Committee with representatives from DCFS, DMH, DPSS, DHS, Dependency Court Legal Services and Probation to conduct a needs assessment for each funding cycle. The committee evaluates information gathered by the needs assessment survey to determine high need geographic areas for developing the funding guidelines and priorities. These recommended funding guidelines are then submitted to the Board of Supervisors for approval. DCFS monitors the agencies providing CAPIT services and their contracts. ICAN acts as the liaison to the Board of Supervisors to reach decisions on distributing funds among the programs. ICAN also acts as an information resource for agencies during the contract period.

Los Angeles County uses various methods to monitor the CAPIT program. Conducting site visits and random program audits, monthly fiscal and program reviews, and providing technical assistance have proven to be effective tools for monitoring contract compliance. These activities also provide an opportunity for ongoing examination of the program's effectiveness and ability to achieve its goals. CAPIT program providers meet quarterly. These meetings provide a forum for networking, receiving technical assistance, problem

solving, strategizing at the community level and sharing resources.

CAPIT seeks to identify and provide services to isolated families, particularly those with children five years and younger. These services are delivered to children who are victims of crime or abuse and to at-risk children. The target population also consists of families with substance abuse problems, infants and preschool age children at risk of abuse, children exposed to domestic violence, children with serious emotional problems who are not eligible for Medi-Cal, and pregnant and parenting adolescents and their children.

The CAPIT program provides high-quality in-home services, including counseling and crisis response, as well as individual/family/group counseling in the clinic, case management services, parenting education, support groups, and 24-hour telephone availability for its clients. Since the children served are often suffering from unresolved loss, play therapy and family therapy are used to address attachment problems. Parent-Child Interaction Therapy (PCIT) is a structured behavioral technique used to enhance attachment while assisting the caregiver in managing their children. Therapies that facilitate communication about memories linked to traumatic events are used to alleviate Post-traumatic Stress Disorder (PTSD) symptoms often characteristic of abused clients. Group therapy is particularly helpful in addressing shame, guilt, and stigma experienced by abused children and is often helpful in reducing delinquent or sexually reactive behaviors in these children.

CAPIT services are provided on a short-term basis with the goal, where possible, of encouraging family maintenance and preventing the need for out-of-home placement. Additionally, services are targeted to facilitate



early family reunification, when appropriate, after out-of-home placement has occurred. Another goal of the CAPIT Program is the prevention of child abuse at the earliest possible stage by improving the family's ability to cope with daily stressors through education and support. The program objective is to increase child abuse services to existing non Medi-Cal-eligible child abuse clients, and to maximize revenue for child abuse services through Federal Title XIX Medi-Cal funds. Therefore, DCFS has allocated funding to DMH to draw down Medi-Cal funds, thus expanding the availability of these specific services to county residents.

As part of the CAPIT contracts, each contract provider agency surveys clients using a client satisfaction questionnaire developed by DCFS. The survey captures the level of client satisfaction with the type of services received, the length of time of each client with each agency, and the source of referral.

During FY 06-07, there were seven CAPIT providers specializing in treating child victims of abuse or neglect who have converted their DCFS contracts to DMH contracts. These are non-profit agencies with demonstrated effectiveness in providing child abuse prevention and intervention services. The agencies, providing CAPIT services in SPAs 1-5, were: Pacific Clinics, Children's Bureau, Child and Family Guidance, St. John's, Didi Hirsch, Community Family Guidance, and Santa Clarita Child and Family Development Center. The majority of families served by CAPIT are referred by CSWs from DCFS. Other families are referred by community organizations or are self-referred.

The CAPIT providers provided mental health services to 1,089 children in FY 06-07.

Figures 15, 16 and 17 present gender, age and ethnicity for the CAPIT participants. Figure 18 shows that the largest number of clients with an identified Agency of Primary Responsibility (APR) were referred by a School District.

Figure 15

**CHILD ABUSE EARLY INTERVENTION/
PREVENTION PROGRAM**

Gender

Gender	Count	Percent
Male	569	52.2%
Female	520	47.8%
TOTAL	1,089	100.0%

Figure 16

**CHILD ABUSE EARLY INTERVENTION/
PREVENTION PROGRAM**

Age

Age (Group)	Count	Percent
0-5	107	9.8%
6-11	496	45.5%
12-17	450	41.3%
18-20	36	3.3%
TOTAL	1,089	100.0%

Figure 17

**CHILD ABUSE EARLY INTERVEN-
TION/ PREVENTION PROGRAM**

Ethnicity

Ethnicity	Count	Percent
Caucasian	155	14.2%
African American	142	13.0%
Hispanic	714	65.6%
American Native	2	0.2%
Asian/ Pacific Islander	20	1.8%
Other	22	2.0%
Unknown	34	3.1%
TOTAL	1,089	100.0%



Figure 18
CHILD ABUSE EARLY INTERVENTION/ PREVENTION PROGRAM
Responsible Agency

Agency	Count	Percent
DCFS	265	24.3%
Probation	10	0.9%
DCFS and School Dist	13	1.2%
Probation and School District	3	0.3%
School District (SEP Eligible)	25	2.3%
School District (Non-SEP Eligible)	16	1.5%
No Data	757	69.5%
TOTAL	1,089	100.0%

Diagnostic information is displayed in Figures 19 and 20. The most prevalent primary admission diagnoses for CAPIT were Major Depression, Adjustment/Conduct Disorder/ADHD, and Anxiety Disorders. Also, 17 clients received a primary admission DSM IV diagnosis of Child Abuse and Neglect, and 70 clients received this as their secondary admission diagnosis. Figure 21 shows that there were 25 substance-using clients (2.3%) and that marijuana use was most frequently reported, followed by alcohol, polysubstance use and amphetamines.

Figure 19
CHILD ABUSE EARLY INTERVENTION/ PREVENTION PROGRAM
Primary DSM Diagnosis

Diagnosis	Count	Percent
Drug Induced Disorders or Dependence	1	0.1%
Disorders Due to Medical Condition	0	0.0%
Schizophrenia/Psychosis	5	0.5%
Bipolar Disorders	21	1.9%
Major Depression	236	21.7%
Anxiety Disorders	203	18.6%
Other Diagnoses	35	3.2%
Adjustment/Conduct Disorder/ADHD	223	20.5%
Child Abuse and Neglect	17	1.6%
No Diagnosis or Diagnosis Deferred	348	32.0%
TOTAL	1,089	100.0%

Figure 20
CHILD ABUSE EARLY INTERVENTION/ PREVENTION PROGRAM
Secondary DSM Diagnosis

Diagnosis	Count	Percent
Drug induced Disorders or Dependence	5	0.5%
Disorders Due to Medical Condition	0	0.0%
Schizophrenia/Psychosis	0	0.0%
Bipolar Disorders	4	0.4%
Major Depression	30	2.8%
Anxiety Disorders	39	3.6%
Other Diagnoses	62	5.7%
Adjustment/Conduct Disorder/ADHD	65	6.0%
Child Abuse and Neglect	70	6.4%
No Diagnosis or Diagnosis Deferred	814	74.7%
TOTAL	1,089	100.0%

Figure 21
CHILD ABUSE EARLY INTERVENTION/ PREVENTION PROGRAM
Admit Substance Abuse

Substance Abuse	Count	Percent
Alcohol	9	0.8%
Amphetamines	2	0.2%
Marijuana	11	1.0%
Cocaine	0	0.0%
Hallucinogens	0	0.0%
Inhalants	0	0.0%
Sedatives and Opioids	0	0.0%
Polysubstance Abuse	3	0.3%
No Substance Abuse	1,032	94.8%
Undetermined	32	2.9%
TOTAL	1,089	100.0%



INTERAGENCY DELINQUENCY PREVENTION PROGRAM

The Interagency Delinquency Prevention Program (IDPP) replaced the Start Taking Action Responsibly (START) program during FY 06-07. The START program was fully operational until March 15, 2007, at which time referrals were no longer accepted into the program. Existing START caseloads were gradually phased out over the next few months. Beginning April 15, 2007, referrals were accepted into the IDPP, a programmatic redesign of START. Both programs are described below.

The START program was implemented in March 1998 as a result of recommendations from the Children's Commission 300/600 Task Force convened by the Los Angeles County Board of Supervisors to address the growing concern regarding dependent youth who exhibit pre-delinquent and/or delinquent behaviors. The START program was staffed by professionals from DCFS, DMH, Probation and LAUSD. DCFS was the lead agency, although START was managed as an interagency coalition. The program also collaborated with community groups and service providers, child advocates, and other agencies such as the District Attorney, Dependency and Delinquency courts, and local law enforcement.

The START program employed a service delivery model and partnership approach to providing intensive and specialized assessment and case management services focused on preventing dependent youth from entering the juvenile justice system through the reduction or elimination of delinquent behavior. The vision of the program was to identify and address the unique needs of dependent/delinquent youth through a multi-disciplinary, multi-agency team and a supportive community environment that would guide and empower

these youth to reach their full potential and become productive adults.

There were five START units. These units were located in Pasadena/SPA 3 (START-East), Los Angeles/SPA 4 (START-West), Torrance/SPA 8 (START-South), Compton/SPA 6 (START-Compton), and Santa Clarita/SPA 2 (START-North). Each site was available to any Los Angeles County youth who met the criteria of the program. The START program served youth who were Dependents (WIC § 300) of the Court, but the program would also serve children under dual supervision by the Dependency and the Delinquency (WIC § 600) systems. The START program did not serve children under the sole supervision of the Delinquency system. That a child was, or had been, on probation was not an absolute requirement for START services. The program provided a multidisciplinary assessment by unit staff, followed by intensive case management to implement a case plan. Most referrals came from DCFS Social Workers. Other referrals originated from clients' lawyers or were Court-ordered. All clients had to have a qualifying mental health disorder, usually one of the Disruptive Behavior Disorders, and an associated functional impairment. Although not a specific referral criteria, school problems were usually present as well.

Each START unit consisted of a Senior Community Mental Health Psychologist, one or two Clinical Psychologist IIs, a clerical position (DMH), a Supervising Children's Social Worker and one or more Children's Social Workers (DCFS), a Deputy Probation Officer (Probation) and an Educational Liaison (LAUSD).

Each member of the START team was assigned specific functions. The DCFS CSWs ensured maintenance of placements and addressed all DCFS-related issues. The



psychologists provided case management, consultation, assessment, and some direct therapy. The educational liaison visited the schools, guided the choice of school program, obtained attendance records and grade reports, ensured that an Individualized Education Plan (IEP) was established when a child required special education services, requested tutoring and assisted in designing behavioral plans and after-school activities. For children who were on informal probation, the Probation Officer monitored compliance with conditions of probation, maintained contact with the Probation Officer of record, and assisted the START team during crises such as when the minor was arrested, detained in Juvenile Hall, or exhibited increased behavior problems. The START referral form outlined criteria for program admission and the documentation that needed to accompany the referral – court reports, status reports, psychological evaluations, and so forth. Following the initial assessment and development of the case plan, the START Unit staff members provided ongoing consultation and services as well as direct follow-up with the youth as needed to prevent movement into the delinquency system.

While the START program had proven effective in some instances, several evaluative studies raised questions about the program’s outcomes. In addition, the program was criticized on other counts, including the relatively small number of clients served and the lack of countywide service availability. The objective of redesigning the program was to remedy these shortcomings and better integrate the program into newer and developing DCFS and DMH initiatives for the purpose of maximizing resource utilization.

Like its predecessor START, the IDPP is a multi-agency and multi-disciplinary delinquen-

cy-prevention program serving dependency or dual-supervision youth. The IDPP units are located within the same DCFS regional offices and staffed by the same disciplines as START, with the exception that DCFS Social Workers are no longer part of the core team. The staff members of the IDPP perform similar functions as their START predecessors, although the length of service is shorter and there is a greater emphasis on referral to collateral programs and services (e.g., Wraparound, Full Service Partnerships, and Intensive In-Home Mental Health Services). The primary source of referrals remains DCFS Social Workers, although with the IDPP, referrals occur most often through the Team Decision Making (TDM) process. An additional feature of the IDPP is the expansion of program coverage to DCFS regional offices in geographic proximity to the teams' "home" locations; for example, the Pasadena office is now accepting referrals from the Glendora and Pomona offices. In addition, the program now features a systemic procedure using the Child and Adolescent Needs and Strengths (CANS) assessment tool to track client outcomes and service satisfaction at intervals of one-month, six-months, one-year, and two-years post-discharge.

During FY 06-07, the IDPP program served 343 clients. Figures 22, 23, 24, and 25 describe their gender, age, race/ethnicity and Agency of Primary Responsibility. DCFS was the main referring agency for this program, followed by Probation.

Figure 22

INTERAGENCY DELINQUENCY PREVENTION PROGRAM		
Gender	Count	Percent
Male	213	62.1%
Female	130	37.9%
TOTAL	343	100.0%



Figure 23

INTERAGENCY DELINQUENCY PREVENTION PROGRAM		
Age (Group)	Count	Percent
0-5	31	9.0%
6-11	54	15.7%
12-17	233	67.9%
18-20	25	7.3%
TOTAL	343	100.0%

Figure 24

INTERAGENCY DELINQUENCY PREVENTION PROGRAM		
Ethnicity	Count	Percent
Caucasian	19	5.5%
African American	191	55.7%
Hispanic	119	34.7%
American Native	3	0.9%
Asian/ Pacific Islander	1	0.3%
Other	3	0.9%
Unknown	7	2.0%
TOTAL	343	100.0%

Figure 25

INTERAGENCY DELINQUENCY PREVENTION PROGRAM		
Agency	Count	Percent
DCFS	258	75.2%
Probation	22	6.4%
DCFS and School Dist	22	6.4%
Probation and School District	0	0.0%
School District (SEP Eligible)	2	0.6%
School District (Non-SEP Eligible)	0	0.0%
No Data	39	11.4%
TOTAL	343	100.0%

The psychiatric diagnoses for the IDPP clients are displayed in Figures 26 and 27. The most prevalent primary admission diagnoses were Adjustment/Conduct Disorder/ADHD, Major Depression and Anxiety Disorders. There were thirteen clients with a primary or secondary diagnosis of Child Abuse and Neglect.

Thirty two IDPP clients (9.3%) had reported substance use. Marijuana was reported for 81% of the substance using clients. Smaller percentages were observed for polysubstance use, alcohol and amphetamines.

Figure 26

INTERAGENCY DELINQUENCY PREVENTION PROGRAM		
Diagnosis	Count	Percent
Drug Induced Disorders or Dependence	0	0.0%
Disorders Due to Medical Condition	1	0.3%
Schizophrenia/Psychosis	2	0.6%
Bipolar Disorders	13	3.8%
Major Depression	67	19.5%
Anxiety Disorders	37	10.8%
Other Diagnoses	30	8.7%
Adjustment/Conduct Disorder/ADHD	145	42.3%
Child Abuse and Neglect	2	0.6%
No Diagnosis or Diagnosis Deferred	46	13.4%
TOTAL	343	100.0%

Figure 27

INTERAGENCY DELINQUENCY PREVENTION PROGRAM		
Diagnosis	Count	Percent
Drug induced Disorders or Dependence	5	1.5%
Disorders Due to Medical Condition	0	0.0%
Schizophrenia/Psychosis	1	0.3%
Bipolar Disorders	1	0.3%
Major Depression	6	1.7%
Anxiety Disorders	7	2.0%
Other Diagnoses	3	0.9%
Adjustment/Conduct Disorder/ADHD	27	7.9%
Child Abuse and Neglect	11	3.2%
No Diagnosis or Diagnosis Deferred	282	82.2%
TOTAL	343	100.0%



Figure 28

INTERAGENCY DELINQUENCY PREVENTION PROGRAM

Substance Abuse	Count	Percent
Alcohol	2	0.6%
Amphetamines	1	0.3%
Marijuana	26	7.6%
Cocaine	0	0.0%
Hallucinogens	0	0.0%
Inhalants	0	0.0%
Sedatives and Opioids	0	0.0%
Polysubstance Abuse	3	0.9%
No Substance Abuse	98	28.6%
Undetermined	213	62.1%
TOTAL	343	100.0%

JUVENILE COURT MENTAL HEALTH SERVICES (JCMHS)

JCMHS continues to be involved in the disposition of delinquency cases for children who are charged with an offense while under the supervision of DCFS and the Dependency Court. Under WIC § 241.1 and the applicable Juvenile Court protocol, a joint report is prepared for the court by DCFS and Probation, with help from JCMHS in those cases where there is a significant mental health history. In FY 06-07, JCMHS screened about 100 WIC § 241.1 referrals per month and wrote reports on approximately 40 per month. Funding for this service is through Early and Periodic Screening, Diagnosis, and Treatment (EPSDT).

JCMHS was involved in the Juvenile Court planning for implementation of AB 129, which allows for the joint jurisdiction of both Delinquency and Dependency Courts in the adjudication of certain juvenile cases.

As a result, a pilot project was developed among DCFS, Probation, and DMH involving the Pasadena Juvenile Court. The project began in May, 2007, and is providing joint decision making through a multi-disciplinary team in the selected cases. It is housed at Edelman Children's Court, and the DMH representative is a member of JCMHS.

JCMHS continues to provide mental health liaison services to all of the juvenile courts, responding to requests and referrals from the bench officers, attorneys and child advocates on a broad range of topics related to public mental health services for children and families.

Mental Health Review of Psychotropic Medication for Court Wards and Dependents

JCMHS has continued to monitor the authorizations for the administration of psychotropic medication to children under court jurisdiction. During FY 06-07, JCMHS reviewed all the requests for such authorization in order to facilitate and optimize communication of relevant clinical information between physicians and judges. Of these, about 70% were received from DCFS for dependent children and 30% for delinquent children under the jurisdiction of Juvenile Court. More than 90% of these requests were approved. JCMHS continues to participate in the Court-sponsored Psychotropic Medication Committee and is involved in the ongoing effort to update and improve the authorization form and protocol, which was deployed in January, 2006. JCMHS regularly participated in the training and orientation of newly appointed bench officers, with a special emphasis on psychotropic medication. JCMHS continues to use the Psychotropic Medication Authorization (PMA) System to initiate some PMAs, chiefly from the Juvenile Halls, as well as to record most other PMA forms sent



to the Court. Clerical staff are working on the backlog of forms to be entered, in order to develop a more comprehensive database of medication forms.

Clinical Forensic Psychiatry Training

JCMHS continues its program of clinical forensic psychiatry training for second-year UCLA child psychiatry fellows. Each of the fellows spends two months with the program, during which time they complete at least one formal psychiatric evaluation and report, as well as other activities which familiarize them with Juvenile Court operations and public sector child psychiatry.

Juvenile Hall Mental Health Units

Each year, approximately 18,000 children and adolescents enter the Los Angeles County juvenile justice system through the county's three juvenile halls. Many of these youth exhibit a variety of mental health and substance abuse problems that require treatment. A study conducted jointly by DMH and the UCLA Health Services Research Program in 2000 found that over 40% of the newly admitted youth in the county's juvenile halls were in need of mental health services.

Children in need of treatment in the juvenile halls are admitted to an in-house program designed and implemented by an interagency collaboration of DMH, Probation, DHS and LACOE. The Mental Health Unit (MHU) at each of the three juvenile halls (Barry J. Nidorf in SPA 2, Central in SPA 4 and Los Padrinos in SPA 7) is similar in its setting, approach to screening and treatment, and the structure of its professional staff. Each MHU provides screening and assessment, crisis evaluation and intervention, psychiatric evaluation and treatment, short-term psychotherapy, and specialty services for

transitional age youth, gay/lesbian/transgender youth, developmentally disabled youth and youth requiring assistance with independent living skills. Clinical interventions focus on stabilizing the client's symptoms and distress, as well as planning aftercare and linkages to services after release. Youth who require a higher level of care are referred to the CARE unit for more intensive treatment, or they may be hospitalized if necessary.

The mental health staff of the juvenile halls consists of Psychiatrists (8), Senior Community Mental Health Psychologists (3), Clinical Psychologists (17), Supervising Psychiatric Social Workers (6), Psychiatric Social Workers (27), Mental Health Counselor Registered Nurses (3), Medical Case Workers (2), Recreation Therapists (2), Psychiatric Technicians (1), and Community Workers (1). Including clerical and administrative support staff, there are collectively more than 100 mental health staff in the three MHUs. There are also 12 community-based contract agencies providing care at satellite clinics serving the juvenile halls and assisting in linking the youth to services in the community.

In order to identify youth in need of mental health services who are entering the county juvenile halls, DMH attempts to screen all newly admitted minors. Overall, DMH screened 93% of new juvenile hall admissions, including 24% who were assessed during FY 06-07. The Massachusetts Youth Screening Inventory (MAYSI-2), developed specifically for this population, is used to conduct the screening. A computer reads the MAYSI-2 questions to the youth. Those minors with screening scores above the pre-selected cut-off points on this instrument receive a structured interview, the DMH Short-Form Assessment, to determine their need for further assessment and service.



Youth who are not identified by the MAYSI-2 as needing mental health intervention may nonetheless be evaluated further and/or be referred for treatment based on the clinical judgment of the mental health professional. Further assessment using more in-depth clinical interviewing, psychological testing, consultation, and review of available DMH or Probation mental health history records are provided to those youth with more complex or enduring problems to assist in planning treatment.

In FY 06-07, 12,685 youth were screened. The numbers screened for Barry J. Nidorf, Central Juvenile Hall and Los Padrinos Juvenile Hall were: 3,539, 4,136, and 5,010, respectively. Of these newly admitted youths, 3,044 required a full assessment.

JCMHS uses the Brief Symptom Inventory (BSI) to track changes in clients' subjective distress over time in order to measure stabilization of a youth's mental health symptoms.

Attributes of Clients of the Juvenile Hall Mental Health Units

The average length of stay for youth in the Juvenile Hall MHUs is 16-21 days. Length of stay has a bimodal distribution, with a very short stay for some youth (i.e., 3-5 days) and others with more serious problems staying for months. Client's ages range from 12 to 19. The average age is 16-17.

In FY 06-07, screening followed by mental health treatment was provided to 4,192 Barry Nidorf Juvenile Hall clients, 5,424 Los Padrinos Juvenile Hall clients, and 4,171 Central Juvenile Hall clients.

At Central Juvenile Hall, there are two Collaborative Assessment Rehabilitation and Education (CARE) units that take youth who meet the admission criteria from all three

halls. These units have been open since 2002-03, and each houses 12 male or 12 female multi-problem youth. Youth must consent to participate in the program, and cannot be on enhanced supervision or be defined as aggressive. An interdepartmental team of Probation, LACOE and DMH staff determine admission and discharge of youth for the CARE units.

In the summer of 2007, the Enhanced Supervision Unit for girls opened at Central Juvenile Hall. This unit was designed to meet the treatment needs of multi-problem female mentally-ill youth, including aggressive youth. The program has enhanced mental health and probation staffing.

The closure of MacLaren and other facilities providing higher levels of care for adolescents continues to impact the juvenile halls as increasing numbers of youth cross over from the dependency to the delinquency system. The increase in the number of multi-problem youth with serious mental health needs has necessitated the opening of both the CARE and Enhanced Supervision units to attempt to meet the needs of these youth.

For the three juvenile halls combined, there were 12,079 unduplicated MHU clients who received mental health screening, assessment or treatment during FY 06-07. Figures 29, 30 and 31 summarize their gender, age and ethnicity. The large majority of the clients were Probation referrals, with smaller proportions referred by DCFS or from a

Figure 29

JUVENILE HALL CLUSTER (Barry Nidorf, Central, Los Padrinos) Gender		
Gender	Count	Percent
Male	9,958	82.4%
Female	2,118	17.5%
Unknown	3	0.02%
TOTAL	12,079	100.0%



Figure 30

JUVENILE HALL CLUSTER
(Barry Nidorf, Central, Los Padrinos)
Age

Age (Group)	Count	Percent
0-5	9	0.07%
6-11	26	0.2%
12-17	9,298	77.0%
18-20	2,746	22.7%
TOTAL	12,079	100.0%

Figure 31

JUVENILE HALL CLUSTER
(Barry Nidorf, Central, Los Padrinos)
Ethnicity

Ethnicity	Count	Percent
Caucasian	836	6.9%
African American	3,470	28.7%
Hispanic	6,124	50.7%
American Native	29	0.2%
Asian/ Pacific Islander	157	1.3%
Other	396	3.3%
Unknown	1,067	8.8%
TOTAL	12,079	100.0%

Figure 32

JUVENILE HALL CLUSTER
(Barry Nidorf, Central, Los Padrinos)
Responsible Agency

Agency	Count	Percent
DCFS	510	4.2%
Probation	8,200	67.9%
DCFS and School Dist	83	0.7%
Probation and School District	1,377	11.4%
School District (SEP Eligible)	224	1.9%
School District (Non-SEP Eligible)	73	0.6%
No Data	1,612	13.3%
TOTAL	12,079	100.0%

school (Figure 32).

Figure 33 indicates that, for the Juvenile Hall cluster, the most prevalent primary DSM diagnoses were Adjustment/Conduct Disorder/ADHD, Major Depression, and Drug-Induced Disorders or Dependence, with smaller frequencies of Anxiety Disorders and Bipolar Disorders. There were 1,273 clients (10.5%) with a primary DSM diagnosis of Drug-Induced Disorders or Dependence. Combining primary and secondary admission diagnoses (Figure 34) indicated that there were 35 clients diagnosed with Child Abuse and Neglect.

Substance use was an issue reported for 1,115 (9.2%) of the clients served at the three Juvenile Hall MHUs (Figure 35). Polysubstance use and marijuana use were most frequently reported, with smaller percentages reported using amphetamines, alcohol, or cocaine.

Figure 33

JUVENILE HALL CLUSTER
(Barry Nidorf, Central, Los Padrinos)
Primary DSM Diagnosis

Primary DSM Diagnosis	Count	Percent
Drug Induced Disorders or Dependence	1,273	10.5%
Disorders Due to Medical Condition	5	0.0%
Schizophrenia/Psychosis	81	0.7%
Bipolar Disorders	719	6.0%
Major Depression	1,612	13.3%
Anxiety Disorders	937	7.8%
Other Diagnoses	1,885	15.6%
Adjustment/Conduct Disorder/ADHD	3,269	27.1%
Child Abuse and Neglect	18	0.1%
No Diagnosis or Diagnosis Deferred	2,280	18.9%
TOTAL	12,079	100.0%



Figure 34

JUVENILE HALL CLUSTER
(Barry Nidorf, Central, Los Padrinos)
Secondary DSM Diagnosis

Diagnosis	Count	Percent
Drug induced Disorders or Dependence	605	5.0%
Disorders Due to Medical Condition	0	0.0%
Schizophrenia/Psychosis	14	0.1%
Bipolar Disorders	55	0.5%
Major Depression	156	1.3%
Anxiety Disorders	99	0.8%
Other Diagnoses	131	1.1%
Adjustment/Conduct Disorder/ADHD	794	6.6%
Child Abuse and Neglect	17	0.1%
No Diagnosis or Diagnosis Deferred	10,208	84.5%
TOTAL	12,079	100.0%

Figure 35

JUVENILE HALL CLUSTER
(Barry Nidorf, Central, Los Padrinos)
Admit Substance Abuse

Substance Abuse	Count	Percent
Alcohol	80	0.7%
Amphetamines	94	0.8%
Marijuana	609	5.0%
Cocaine	7	0.1%
Hallucinogens	2	0.0%
Inhalants	5	0.0%
Sedatives and Opioids	2	0.0%
Polysubstance Abuse	316	2.6%
No Substance Abuse	3,759	31.1%
Undetermined	7,205	59.6%
TOTAL	12,079	100.0%

DOROTHY KIRBY CENTER

Dorothy Kirby Center (DKC) is a Probation residential treatment facility located in SPA 1 and providing services to clients from the entire county. Its Mental Health Unit consists of an intensive day treatment program within the boundaries of a secure residential placement facility directly operated by the Probation Department. The MHU functions under a Memorandum of Understanding between DMH and Probation. It is staffed by a psychologist, two LCSWs, one Rehabilitation Technician and four clerical staff. During FY 06-07, an average of 100 children were treated by the MHU each month.

Kirby’s MHU is a secure (locked) residential treatment center serving adolescents between the ages of 14-17. All referred youth at Kirby receive a mental health screening consisting of an interview with the youth in juvenile hall and a review of relevant records. The screeners go to the juvenile halls to screen referrals. One hundred percent of these were assessed after screening. Approximately forty percent of those assessed receive mental health services. The MHU serves up to 140 adolescents and receives an average of 40 referrals from the juvenile courts each month. Its clients ages range from 12-17 years, with an average age of sixteen. All clients are wards of the Juvenile Court, having had criminal petitions brought against them and sustained; in addition most have extensive criminal arrest records. All have DSM IV diagnoses and functional impairment that qualify them for Medi-Cal reimbursement. At least 80% are deeply gang-involved, and the overwhelming majority originate from severely dysfunctional homes. Approximately 45% have had prior involvement with DCFs. All referrals to the mental health unit are made by a judge or a probation officer.



During FY 06-07, the Kirby MHU served 451 youths. Their average treatment duration was 8-10 months. The intensive day treatment program at DKC consists of a daily four- and-one-half-hour program comprised of four portions:

1. A special focus group: Themes dealt with in this group include anger management, substance abuse, sexual abuse survivors, self-esteem, self-soothing and self-expression.
2. Recreation therapy: This group is run by a certified recreation therapist and teaches teamwork, impulse control, skill acquisition methods, and goal-oriented behavior.
3. Process group: This group uses traditional group therapy techniques to deal with interpersonal and intrapsychic issues within the group context.
4. Social skills training: This group teaches basic social living skills and interpersonal communication skills.

In addition, clients receive daily group treatment, weekly individual treatment, and bi-weekly family treatment.

Figures 36, 37, and 38 present gender, age and ethnicity for the 451 FY 06-07 clients at the Kirby MHU. Most clients were Probation referrals, followed by referrals from Probation and Education (Figure 39).

Figure 36

DOROTHY KIRBY CENTER		
Gender		
Gender	Count	Percent
Male	305	67.6%
Female	146	32.4%
TOTAL	451	100.0%

Figure 37

DOROTHY KIRBY CENTER		
Age		
Age (Group)	Count	Percent
0-5	0	0.0%
6-11	0	0.0%
12-17	373	82.7%
18-20	78	17.3%
TOTAL	451	100.0%

Figure 38

DOROTHY KIRBY CENTER		
Ethnicity		
Ethnicity	Count	Percent
Caucasian	40	8.9%
African American	188	41.7%
Hispanic	197	43.7%
American Native	3	0.7%
Asian/ Pacific Islander	4	0.9%
Other	9	2.0%
Unknown	10	2.2%
TOTAL	451	100.0%

Figure 39

DOROTHY KIRBY CENTER		
Responsible Agency		
Responsible Agency	Count	Percent
DCFS	33	7.3%
Probation	319	70.7%
DCFS and School Dist	4	0.9%
Probation and School District	29	6.4%
School District (SEP Eligible)	9	2.0%
School District (Non-SEP Eligible)	3	0.7%
No Data	54	12.0%
TOTAL	451	100.0%

Figure 40 shows that the most common primary admission diagnoses at the Kirby MHU were Bipolar Disorders, Adjustment/Conduct Disorder/ADHD, Major Depression, and Anxiety Disorders, with a smaller proportion with Schizophrenia/Psychosis. Figure 40 indicates that .7% had a primary or a secondary diagnosis of Drug-Induced Disorders or Dependence.



Substance use was an issue for 42.1% of the Kirby Mental Health Clients, with marijuana reported most frequently, followed by amphetamines, polysubstances, alcohol, and cocaine (Figure 42).

Figure 40

DOROTHY KIRBY CENTER
Primary DSM Diagnosis

Diagnosis	Count	Percent
Drug Induced Disorders or Dependence	3	0.7%
Disorders Due to Medical Condition	0	0.0%
Schizophrenia/Psychosis	10	2.2%
Bipolar Disorders	147	32.6%
Major Depression	102	22.6%
Anxiety Disorders	34	7.5%
Other Diagnoses	4	0.9%
Adjustment/Conduct Disorder/ADHD	142	31.5%
Child Abuse and Neglect	0	0.0%
No Diagnosis or Diagnosis Deferred	9	2.0%
TOTAL	451	100.0%

Figure 41

DOROTHY KIRBY CENTER
Secondary DSM Diagnosis

Diagnosis	Count	Percent
Drug induced Disorders or Dependence	0	0.0%
Disorders Due to Medical Condition	0	0.0%
Schizophrenia/Psychosis	0	0.0%
Bipolar Disorders	0	0.0%
Major Depression	0	0.0%
Anxiety Disorders	0	0.0%
Other Diagnoses	1	0.2%
Adjustment/Conduct Disorders/ADHD	0	0.0%
Child Abuse and Neglect	0	0.0%
No Diagnosis or Diagnosis Deferred	451	99.8%
TOTAL	451	100.0%

Figure 42

DOROTHY KIRBY CENTER
Admit Substance Abuse

Substance Abuse	Count	Percent
Alcohol	22	4.9%
Amphetamines	42	9.3%
Marijuana	96	21.3%
Cocaine	4	0.9%
Hallucinogens	1	0.2%
Inhalants	0	0.0%
Sedatives and Opioids	0	0.0%
Polysubstance Abuse	25	5.5%
No Substance Abuse	261	57.9%
Undetermined	0	0.0%
TOTAL	451	100.0%

JUVENILE JUSTICE CAMPS

DMH operates Mental Health Units (MHU) at Juvenile Justice Camps throughout Los Angeles County. Challenger Memorial Youth Center is a multi-camp facility which provides treatment services to six of eighteen juvenile probation camps (Smith, McNair, Scobee, Resnik, Onizuka and Jarvis). It is located in Lancaster (SPA 1). This facility has capacity for 800 residents and is the primary juvenile camp facility at the time of this report where psychotropic medications are administered. The facility is also unique in having a psychiatrist on duty in conjunction with 24-hour nursing. Challenger's camps also provide psychotherapy to minors with psychological problems. Mental Health services for the Challenger camp minors include individual, family, group, collateral and case management/aftercare services. During FY 06-07, the Challenger MHU multidisciplinary treatment team consisted of one Clinical Program Manager, one Supervising Social Worker, one Clinical Psychologist,



one Mental Health Counselor, and four support personnel. In addition, it has an aftercare treatment team consisting of a Mental Health Coordinator and Parent Advocate. These staff coordinate service delivery, provide treatment interventions, and also link the minor to services in the community upon the minor's release from Challenger's camps. They also act as liaisons and advocates for minors with other County departments and private collaborative programs. Towards the end of 2006, it should also be noted that Probation began to rollout "Camp Redesign" (a change in the way it provides services, using an evidence based treatment model).

Referrals are made using a form that is completed to request Challenger mental health services. The form is completed by Probation, Health, Education, Mental Health, Juvenile Court Social Workers, Parents and Guardians. In addition, the juvenile halls send "transfer summaries" on minors who are in need of follow up or mental health services. All referrals are "triaged" (reviewed and distributed for services) by administrative staff at Challenger or by the assigned Clinician at outlying camps. Triage priority consists of three levels: 1) Crisis or medication follow up (Challenger only for medication) from the Juvenile Halls. 2) Urgent cases such as depression, self-referrals by minors, and clients who receive an Axis I diagnosis (i.e. fighting, defiant behavior, sleep issues unrelated to mental health symptoms). 3) Cases that are less serious and may not show problems associated with an Axis I diagnosis and/or cases that do not meet DMH criteria. Minors in Level 1 are seen within 24 hours. Level 2 minors are seen as soon as possible (within 2 weeks). Level 3 minors are given the least urgent priority to receive services according to symptoms, and are treated when a therapist becomes available.

Throughout the County, there are 12 so-called "outlying" Probation Camps that also provide mental health services. Each of these has a capacity for approximately 110-120 residents. Camps Munz and Mendenhall are located in Castaic and are the closest in distance to Camp Challenger. There is no Special Handling Unit at these camps so minor in need of special care are taken to Challenger. Mental Health is provided at Challenger for these minors by appointment and starting in mid 2007 a clinician has gone to the camp weekly or bi-weekly to see minors at the camp. The numbers of clients treated in Challenger camps are included in this report.

During the Fiscal Year 06-07 7,981 minors arrived at Challenger for residence there during that year. The average number of minors per month who occupied Probation beds (this number is duplicated because those clients who stay are recounted from month to month) was 665 (again this includes numbers of Munz/Mendenhall). This number is an increase from 6,211 during the previous fiscal year. The average camp stay lasts six months.

Mental health treated a total of 3,245 minors during FY 06-07 and on a monthly basis provided services to 295 clients (this number is also duplicated). On a monthly basis mental health treated approximately 44% per month during FY 06-07. This was an increase from the previous fiscal year of 2,168 totals and a monthly average of 218 and in FY 05-06 mental health treated approximately 42% monthly. There were the same number of mental health staff as in the prior Fiscal Year.

The camp began a rollout of "Camp Redesign" which involved training, multi-disciplinary meetings, consultations and cross training of staff (both Probation and



DMH) in the beginning of 2007. Even though the numbers receiving treatment did not decrease, the new camp rollout did take time away from direct services provided at Camp Challenger. It is an “all out” effort of collaborative partners to change the way services and treatment are provided camp-wide utilizing Evidence Based Programming. This type of milieu is not like what one would see in an out-patient clinic, nor are we able to use numbers to demonstrate the work DMH staff do on a daily basis with collaborative partners to change the system in this manner.

During FY 06-07, female clients were all moved to Santa Clarita (SPA 2) to the Camp Scott/Scudder site. In January 2007, after this move, Camp Scudder began administering psychotropic medication. Meetings began for the redesign at these two camps and actual trainings started in May 2007. Again direct service numbers were impacted by multi-agency meetings and treatment, cross training and training related to Evidence Based Programming in which all mental health staff were involved. In FY 06-07, minors occupying Probation beds was approximately 1,320 with a monthly average of 110 girls in camp. Mental Health treated a yearly total of 895 minors for FY 06-07 with an average of 81 girls per month. The treated group was 74% of the population of that camp. This was an increase from 615 minors for FY 05-06 and an average of 62 girls monthly. The camp was staffed with one Supervising Clinical Social Worker, a Clinical Psychologist, 2 Clinical Social Workers and a full time contract clinician, a full-time parent advocate, a full-time substance abuse counselor and a part-time clinician from a variety of contract agencies.

Munz and Mendenhall in the Castaic area (SPA 2), was staffed by an LCSW from Challenger as needed and a Psychologist one day every other week.

Camps Holton and Routh are in the San Fernando area (SPA 2), staffed by one full time and one part time Clinical Psychologists(at Holton) and one full time contract clinician (at Routh). Camps Rockey, Paige, and Afferbaugh are in the San Dimas area (SPA 3), staffed by a Psychiatric Technician and two part-time contract agency clinicians. Camps Gonzales, Miller, and Kilpatrick are in the Malibu area (SPA 5), staffed by a Clinical Psychologist. At eight of these other juvenile justice camps, where the minors do not require psychotropic medications, the staff provide therapeutic interventions on-site. Information collected on clients at all of the outlying camps and Challenger utilize the same IS client-data reporting unit number.

In FY 06-07, a total yearly number of 1,627 minors with an average monthly number of 148 unduplicated clients received psychotropic medications at the six primary Challenger camps and the girls camp (Scudder). This shows an increase in medication numbers from a monthly average of 130 in FY 05-06. The decrease of the use of psychotropic medication in our program over this period has a large impact on the numbers of minors that require but never acquire psychiatric treatment. It is extremely difficult to find doctors who want to work in this program let alone in this area of the county (the Antelope Valley).

The statistics for the remaining eight camps will be calculated together for the sake of numbers. Individual numbers may be obtained from the Open Case Counts for FY 06-07 attached to this report. These camps consist of Gonzales, Kilpatrick, Miller (the Gonzales Hub Site); Afferbaugh, Paige, Rockey (the Rockey Hub Site); and Holton, Routh (the Holton Hub Site.) Together they housed approximately 8,904 minors in Probation beds for FY 06-07. The average of monthly counts of minors in probation beds



in these camps was 742. Each camp has a capacity of between 110-120 minors. Again these are all boys' camps. Mental health served approximately 2,574 minors during FY 06-07 with a monthly average of 234 minors. These camps were not yet influenced by Camp Redesign nor did the number of staff working in these programs increase from the past fiscal year. The number of minors treated for FY 05-06 did increase from 1906 and the monthly total of 190 minors. There are factors that influence direct service numbers that need to be taken into consideration such as drive time from one camp to another, consultation not related to open cases, cross training between collaborative partners, etc.

Several of the camps have specialized programs for children with suitable abilities and interest. Camp Rockey has an Arts Care program. Miller and Kilpatrick offer a sports program for boys and Scott includes a girl's sports program. Scott also provides intensive assessment of its clients during their first 72 hours to a week, collecting client information from all relevant public agencies. Camp Routh is a fire camp which focuses on this specialty.

At the six Challenger camps, and at Gonzales, Rockey, Holton and Scott, a Special Handling Unit (SHU) provides safe, temporary housing for a child in crisis who may be a danger to self or others. The SHUs are structured to allow continuous monitoring by Probation staff to avoid possible injury of the youth. At these camps, minors who are in the SHU due to mental health issues must be cleared by mental health staff to return to their camp living environment and normal activities.

A mental health Aftercare Unit for the entire camp system is staffed by a Mental Health Coordinator and a Community Worker. This unit is dedicated to providing aftercare/follow-up services and to developing resources to assist clients after the completion of treatment.

This unit not only works closely with the client clinician but also with the Probation Case Manager assigned to the case.

The average number of monthly unduplicated referrals received at the Camp Challenger in FY 06-07 by mental health was 98. The average number of children treated each month in the entire program was 529, not including single service contacts.

For the entire camp, the estimated yearly count of minors occupying beds is 17,719. Of these, 5,819 (32.8%) received mental health treatment in FY 06-07.

The Challenger camp and the other camps provided mental health services to 2,073 children/adolescents in FY 06-07. This is more than one third of the 5000 children and youths at the camps. Figures 43, 44 and 45 describe their gender, age and ethnicity. Most had Probation as their referring agency, with additional referrals from Probation and Education, DCFS, DCFS and Education, and Education (Figure 46).

Figure 43

CHALLENGER YOUTH CENTER/ JUVENILE JUSTICE CAMPS		
Gender		
Gender	Count	Percent
Male	1,651	79.7%
Female	421	20.3%
Unknown	1	0.0%
TOTAL	2,073	100.0%

Figure 44

CHALLENGER YOUTH CENTER/ JUVENILE JUSTICE CAMPS		
Age (Group)		
Age (Group)	Count	Percent
0-5	1	0.0%
6-11	2	0.1%
12-17	1,339	64.6%
18-20	731	35.3%
TOTAL	2,073	100.0%



Figure 45
**CHALLENGER YOUTH CENTER/
JUVENILE JUSTICE CAMPS**
Ethnicity

Ethnicity	Count	Percent
Caucasian	120	5.8%
African American	820	39.6%
Hispanic	949	45.8%
American Native	5	0.2%
Asian/ Pacific Islander	27	1.3%
Other	37	1.8%
Unknown	115	5.5%
TOTAL	2,073	100.0%

Figure 46
**CHALLENGER YOUTH CENTER/
JUVENILE JUSTICE CAMPS**
Responsible Agency

Agency	Count	Percent
DCFS	72	3.5%
Probation	1,491	71.9%
DCFS and School Dist	22	1.1%
Probation and School District	175	8.4%
School District (SEP Eligible)	20	1.0%
School District (Non-SEP Eligible)	12	0.6%
No Data	281	13.6%
TOTAL	2,073	100.0%

The most common primary admission diagnoses for the juvenile justice camp clients were Adjustment/Conduct Disorder/ADHD and Major Depression, with smaller proportions diagnosed with Anxiety Disorders, Bipolar Disorders, Drug Induced Disorders or Dependence, and Schizophrenia/Psychosis (Figure 47).

For the 19% of clients with reported substance use, marijuana was most common, followed by polysubstance use, amphetamines, and alcohol.

Figure 47
**CHALLENGER YOUTH CENTER/
JUVENILE JUSTICE CAMPS**
Primary DSM Diagnosis

Diagnosis	Count	Percent
Drug Induced Disorders or Dependence	42	2.0%
Disorders Due to Medical Condition	0	0.0%
Schizophrenia/Psychosis	20	1.0%
Bipolar Disorders	190	9.2%
Major Depression	602	29.0%
Anxiety Disorders	240	11.6%
Other Diagnoses	284	13.7%
Adjustment/Conduct Disorder/ADHD	682	32.9%
Child Abuse and Neglect	0	0.0%
No Diagnosis or Diagnosis Deferred	13	0.6%
TOTAL	2,073	100.0%

Figure 48
**CHALLENGER YOUTH CENTER/
JUVENILE JUSTICE CAMPS**
Secondary DSM Diagnosis

Diagnosis	Count	Percent
Drug induced Disorders or Dependence	292	14.1%
Disorders Due to Medical Condition	0	0.0%
Schizophrenia/Psychosis	1	0.0%
Bipolar Disorders	12	0.6%
Major Depression	18	0.9%
Anxiety Disorders	16	0.8%
Other Diagnoses	28	1.4%
Adjustment/Conduct Disorder/ADHD	92	4.4%
Child Abuse and Neglect	0	0.0%
No Diagnosis or Diagnosis Deferred	1,614	77.9%
TOTAL	2,073	100.0%



Figure 49

**CHALLENGER YOUTH CENTER/
JUVENILE JUSTICE CAMPS
Admit Substance Abuse**

Admit Substance Abuse	Count	Percent
Alcohol	21	1.0%
Amphetamines	39	1.9%
Marijuana	217	10.5%
Cocaine	1	0.0%
Hallucinogens	3	0.1%
Inhalants	0	0.0%
Sedatives and Opioids	0	0.0%
Polysubstance Abuse	112	5.4%
No Substance Abuse	314	15.1%
Undetermined	1,366	65.9%
TOTAL	2,073	100.0%

**D-RATE ASSESSMENT/CASE MANAGEMENT
UNIT**

DCFS “Schedule D” Foster Care provides family environments for children with serious psychological dysfunction who are at high risk of requiring more restrictive and higher-cost placements. D-Rate foster parents receive specialized training for parenting a psychologically dysfunctional child and their home must satisfy D-Rate certification requirements. The D-rate foster parents receive supplemental compensation because of the additional responsibilities involved in caring for emotionally disturbed children. The D-Rate Assessment Program is a collaborative effort between DCFS and Department of Mental Health (DMH). DMH supervises clinical assessors who evaluate D-Rate children in foster homes at admission. DCFS and DMH staff re-assess the D-Rate children every 6 months thereafter. These assessments help to determine the appropriateness of the placement of these

children in D-Rate-approved foster homes.

When a child is placed in a D-Rate foster home, a DCFS caseworker evaluates the child and then, if appropriate, refers the case to the DCFS D-Rate Unit to assess the child’s eligibility for D-Rate services. The request is reviewed by the DCFS D-Rate Unit and referred to the DMH D-Rate Unit when it is appropriate for further assessment. A DMH-contracted licensed clinician is then assigned to the case and carries out an in-depth assessment of the child by interviewing the child and caregiver, usually in the caregiver’s home, which may be located in any of the SPAs. D-Rate assessments are also conducted in out-of-county homes when necessary, also by DMH-contracted assessors.

Within three weeks of the assignment date, the assessor completes a clinical assessment including findings regarding whether the client meets D-Rate criteria (based on DCFS D-Rate criteria.) The assessor submits the report and the clinical chart to the D-Rate Assessment/Case Management Unit.

Approximately 120 DCFS children are evaluated in this manner each month. The completed assessment and recommendations are reviewed by the assigned DMH D-Rate Medical Case Worker and the DMH D-Rate Unit Supervisor and returned to the DCFS D-Rate Unit with recommendations regarding whether the client appears to meet D-Rate criteria and additional mental health and other social services that may be helpful to improve the client’s level of functioning and alleviate mental health symptoms. The DCFS D-Rate Unit makes the final determination of the suitability of D-Rate placements.

During FY 06-07, 1,154 D-Rate assessments were carried out by DMH-contracted clinicians. The DMH D-Rate Unit Medical Case Workers followed up on 100% of the assessed cases



to ensure linkage to appropriate mental health services. Approximately 90% of the assessed cases were linked with LA County contracted agencies, and the remaining cases were linked with non-county-contracted agencies. In addition to the services provided for these initial referrals, the DMH D-Rate Unit Medical Case Workers follow up on approximately 450 “recertification” D-Rate cases monthly. These cases are followed up on by the Medical Case Worker to ensure necessary and appropriate linkage to mental health services has been followed up on the for the client.

RATE CERTIFICATION LEVEL (RCL) 14 GROUP HOMES

DMH funds mental health day treatment for severely emotionally disturbed children placed in RCL 14 Group Homes by DCFS, Probation, and Mental Health. Criteria for placement at the RCL 14 level of care include substantial functional impairment resulting from a mental disorder; past or anticipated persistent symptoms or out of home placement; severe behavioral/treatment history including psychotropic medication or substance abuse, DSM Axis I diagnosis during the past year; plus a Suitable Placement Order or an Individualized Education Plan (IEP). DCFS contracts with and funds the group homes. DMH certifies that the RCL 14 group homes and the children placed there meet the State-defined RCL 14 mental health criteria. There are 155 RCL 14 beds, 125 of which are designated for males and 30 for females. The following service providers offer RCL 14 facilities: H. V. Group Home (SPA 8), Olive Crest (SPA 7), Pennacle Foundation (SPAs 6 and 7), San Gabriel Children’s Center (SPA 3), and Hathaway-Sycamores (SPA 3). In FY 06-07, 71 males and 26 females were newly certified

at RCL 14 and DMH provided services to 249 minors in RCL-14 group homes. The sources of referral for these new RCL 14 certifications were approximately 46% from DCFS, 16% from DMH, and 38% from Probation. The purpose of these treatment programs is to provide stability for children in a group home setting in order to nurture their growth and development and to allow them to succeed in an educational setting.

COMMUNITY TREATMENT FACILITY (CTF)

The CTF is a relatively new State licensing category for residential placement of minors developed during the past four years. It is a higher level of care than RCL 14 and was created as an alternative to the State Hospital. There are two CTFs with a total of 64 beds. Star View (SPA 8) offers 40 beds, 12 of which are designated for males and 28 for females. Vista del Mar (SPA 4) has 24 CTF beds for males. The criteria for placement at the CTF level of care include all of the criteria for RCL 14 placement plus an inability to be served in a less restrictive setting, as evidenced by unsuccessful placements in open settings, denials of admission from RCL 14 Group Homes; high-risk aggressive, self-destructive, or substance use behaviors; and the motivation to benefit from treatment in a more restrictive treatment setting. In FY 06-07, 34 males and 22 females were newly certified at the CTF level of care and DMH provided services to 120 CTF clients. The sources of referral for new CTF certifications were 70% from DCFS, 20% from Probation, and 10% from DMH.



SELECTED FINDINGS

DEPARTMENT OF MENTAL HEALTH

- During FY 2006-07, The Family Preservation (FP) program treated 1,059 clients. Family Reunification served eight outpatients. Rate Classification Level-14 (RCL-14) facilities treated 249 and Community Treatment Facilities (CTF) treated 120. The Child Abuse Prevention, Intervention and Treatment (CAPIT) program was offered to 1,089 individuals. Interagency Delinquency Prevention (IDP) services were given to 343. The three Juvenile Hall Mental Health Units (JMHU) served 12,079. Dorothy Kirby Center provided mental health services to 451. At Challenger Memorial Youth Center and the Juvenile Justice Camps, 2,073 children/youth received mental health services. A total of 17,471 children and adolescents, potentially at-risk for child abuse or neglect, were served by these mental health treatment programs.
- Clients receiving mental health services in the IDP program, CAPIT, Family Preservation, and Family Reunification programs were 14% of the clients at the programs considered. Of these, 25% were identified as DCFS referrals.
- Clients treated in RCL-14 or Community Treatment Facilities were 2% of the clients considered. DCFS referrals constituted 46% of the RCL-14 referrals and 70% of the CTF referrals.
- Clients in the Mental Health Units of the three juvenile halls made up 69% of the clients considered. Of these, 4% were identified as DCFS referrals.
- Clients in the Mental Health Units at the Challenger Youth Center/ Juvenile Justice Camps and Dorothy Kirby Youth Center were 14% of the clients at the programs reviewed. Of these, 5% were identified as DCFS referred.
- Clients in Mental Health Units of the Youth Centers were distributed as follows: 82% in Challenger Youth Center/Juvenile Justice Camps, and 18% in Dorothy Kirby Center.
- The CAPIT program served 87 clients receiving a DSM diagnosis of Child Abuse and Neglect (CAN). This is the largest number diagnosed with CAN in any of the programs considered and is 53% of the clients with CAN in the programs considered. During FY 05-06, CAPIT treated 57% of clients diagnosed with CAN in these treatment programs.
- The FP Program served 27 clients diagnosed with CAN. This is 16% of the 162 clients diagnosed with CAN in the programs considered, a decrease of 3% from FY 05-06, and establishes the FP program with the third largest concentration of clients diagnosed with CAN.
- The Juvenile Hall Mental Health Units served 35 clients diagnosed with CAN. This is 22%, the second largest concentration of clients with CAN in the programs considered. In FY 05-06, the frequency of clients with CAN diagnosed at the juvenile hall mental health units was 19% of the programs considered.
- The IDP program served 13 children diagnosed with CAN during FY 06-07. This is consistent with the finding in FY 05-06 that less than 1% of the



children with CAN were served by this program as well as by the mental health units of Challenger Youth Center and its associated juvenile justice camps, and by the mental health unit of Dorothy Kirby Center.

- The most frequent DSM diagnoses for clients in the treatment programs considered are Adjustment/Conduct Disorder/ADHD and Major Depression. Adjustment/Conduct Disorder/ADHD was the most frequent diagnosis received by clients in the FP, IDP, Juvenile Hall mental health programs, and at Challenger, with Major Depression a frequent diagnosis at these programs. Major Depression was the most frequent diagnosis received by clients in the CAPIT program. At Dorothy Kirby, Bipolar Disorder was most frequent, followed by Adjustment/Conduct Disorder/ADHD.
- Among substance using clients, marijuana was most frequently reported, followed in frequency by polysubstance use.



GLOSSARY OF CHILDREN'S MENTAL HEALTH TERMS

This glossary contains terms used frequently when dealing with the mental health needs of children. The list is alphabetical. Words highlighted by italics have their own separate definitions. The term *service or services* is used frequently in this glossary. The reader may wish to look up *service* before reading the other definitions.

Assessment – A professional review of a child's and family's needs that is done when they first seek services. The assessment of the child includes a review of physical and mental health, school performance, family situation, and behavior in the community. The assessment identifies the strengths of the child and family. Together, the treatment provider and family decide what kind of treatment and supports, if any, are needed.

Case Manager – An individual who organizes and coordinates services and supports for children with mental health problems and their families. (Alternate terms: service coordinator, advocate, and facilitator)

Case Management – A service that helps people arrange appropriate and available services and supports. As needed, a case manager coordinates mental health, social work, education, health, vocational, transportation, advocacy, respite, and recreational services. The case manager makes sure that the child's and family's changing needs are met. (This definition does not apply to managed care.)

Children and Adolescents at Risk for Mental Health Problems – Children at higher risk for developing mental health problems when certain factors occur in their lives or environ-

ment. Some of these factors are physical abuse, emotional abuse or neglect, harmful stress, discrimination, poverty, loss of loved one, frequent moving, alcohol and other drug use, trauma, and exposure to violence.

Continuum of Care – A term that implies a progression of services that a child would move through, probably one at a time. The more up-to-date idea is one of comprehensive services. (See system of care and wraparound services.)

Coordinated Services – Child-serving organizations, along with the family, talk with each other and agree upon a plan of care that meets the child's needs. These organizations can include mental health, education, juvenile justice, and child welfare. Case management is necessary to coordinate services (See wraparound services).

Cultural Competence – Help that is sensitive and responsive to cultural differences. Service providers are aware of the impact of their own culture and possess skills that help them provide services that are culturally appropriate in responding to people's unique cultural differences, such as race and ethnicity, national origin, religion, age, gender, sexual orientation, or physical disability. They adapt their skills to fit a family's values and customs.

Day Treatment – A non-residential, intensive and structured clinical program provided for children and adolescents who are at imminent risk of failing in the public school setting as a result of their behavior related to a mental illness and who have impaired family functioning. The primary foci of Day Treatment are to address academic and behavioral needs of the individual, family, and/or foster family.



DSM-IV (Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition) – An official manual of mental health problems developed by the American Psychiatric Association. This reference book is used by psychiatrists, psychologists, social workers, and other health and mental health care providers to understand and diagnose a mental health problem. Insurance companies and health care providers also use the terms and explanations in this book when they discuss mental health problems.

Emergency and Crisis Services – A group of services that are available 24 hours a day, 7 days a week, to help during a mental health emergency. When a child is thinking about suicide, these services could save his or her life. Examples: telephone crisis hotlines, crisis counseling, crisis residential treatment services, crisis outreach teams, and crisis respite care.

Evidence Based Practice – An intervention whose beneficial treatment outcomes for the mental health and psychological functioning of clients has been established by controlled clinical research studies.

Family Support Services – Help designed to keep the family together and to cope with mental health problems that affect them. These services may include consumer information workshops, in-home supports, family therapy, parent training, and respite care.

Inpatient Hospitalization – Mental health treatment in a hospital setting 24 hours a day. The purpose of inpatient hospitalization is: (1) short-term treatment in cases where a child is in crisis and possibly a danger to self or others, and (2) diagnosis and treatment

when the patient cannot be evaluated or treated appropriately in an outpatient setting.

Managed Care – A way to supervise the delivery of health care services. Managed care may specify the providers that the insured family can see. It may also limit the number of visits and kinds of services that will be covered.

Mental Health – Mental health refers to how a person thinks, feels, and acts when faced with life's situations. It is how people look at themselves, their lives, and the other people in their lives; evaluate the challenges and the problems; and explore choices. This includes handling stress, relating to other people, and making decisions.

Mental Health Problems – There are several recognized problems. These problems affect one's thoughts, body, feelings, and behavior. They vary from, mild to severe. Some of the more common disorders are known as depression, bipolar disorder (manic-depressive illness), attention deficit hyperactivity disorder, anxiety disorders, eating disorders, schizophrenia, and conduct disorder.

Plan of Care – A treatment plan designed for each child or family. The treatment provider develops the plan with the family. The plan identifies the child's and family's strengths and needs. It establishes goals and details the appropriate treatment, and services likely to meet his or her special needs.

Residential Treatment Centers – Facilities that provide treatment 24 hours a day and can usually serve more than 12 young people at a time. Children with serious



emotional disturbances receive constant supervision and care. Treatment may include individual, group, and family therapy; behavior therapy; special education; recreation therapy; and medical services. Residential treatment is usually more long-term than inpatient hospitalization. Centers are also known as therapeutic group homes.

Respite Care – A service that provides a break for parents who have a child with a serious emotional disturbance. Some parents may need this help every week. It can be provided in the home or in another location. Trained parents or counselors take care of the child for a brief period of time. This gives families relief from the strain of taking care of a child with a serious emotional disturbance.

SEP Eligible – Refers to a Special Education Pupil (SEP) who is assessed as needing special education and related services and whose behavior impacts the pupil's academic and social functioning.

Serious Emotional Disturbance – Diagnosable disorders in children and adolescents that severely disrupt daily functioning in the home, school, or community. Some of these disorders are depression, attention-deficit/hyperactivity, anxiety, conduct, and eating disorders. Serious emotional disturbances affect 1 in 20 young people.

Service – A type of support or clinical intervention designed to address the specific mental health needs of a child and his or her family. A service could be received once or repeated over a course of time as determined by the child, family, and service provider.

Short-Doyle Medi-Cal – State-funded program that provides reimbursement for county mental health services to Medi-Cal eligible and indigent individuals.

System of Care – A method of delivering mental health services that helps children and adolescents with mental health problems and their families get the full range of services in or near their homes and communities. These services must be tailored to each individual child's physical, emotional, social, and educational needs. In systems of care, local organizations work in teams to provide these services.

Therapeutic Foster Care – A home where a child with a serious emotional disturbance lives with trained foster parents with access to other support services. These foster parents receive special support from organizations that provide crisis intervention, psychiatric, psychological, and social work services. The intended length of this care is usually from 6 to 12 months.

Therapeutic Group Homes – Community-based, home-like settings that provide intensive treatment services to a small number of young people (usually 5 to 10 persons). These young people work on issues that require 24-hour-per-day supervision. The home should have many connections within an interagency system of care. Psychiatric services offered in this setting try to avoid hospital placement and to help the young person move toward a less restrictive living situation.

Transitional Services – Services that help children leave the system that provides help



for children and move into adulthood and the adult service system. Help includes mental health care, independent living services, supported housing, vocational services, and a range of other support services.

Wraparound Services – A "full-service" approach to developing help that meets the mental health needs of individual children and their families. Children and families may need a range of community support services to fully benefit from traditional mental health services such as family therapy and special education.

**LOS ANGELES
CITY ATTORNEY'S OFFICE
AGENCY REPORT**



**FOR THE
CHILDREN!!!**



ICAN DATA REPORT FOR 2007 LOS ANGELES CITY ATTORNEY'S OFFICE

INTRODUCTION

With more than 500 lawyers and 1,000 employees overall, the Los Angeles City Attorney's Office is among the largest government legal offices in the country. Second in size only to New York City in terms of municipal practices, it is the third largest government law office in California, following the state Attorney General's Office and the Los Angeles County District Attorney's Office.

City Attorney Rocky Delgadillo is the chief prosecutor for the City of Los Angeles with jurisdiction to prosecute all misdemeanor criminal offenses and infractions. He is also the chief legal advisor and general counsel to the Mayor and the City Council, as well as all boards, departments, and officers in the City of Los Angeles.

The Office of the City Attorney strives to:

- Improve the quality of life and public safety in the City's neighborhoods through prosecution of criminal behavior and increased crime prevention.
- Save taxpayer dollars by representing the City of Los Angeles, its departments and employees in civil litigation and transactions.
- Provide the highest quality legal advice and guidance possible to the City of Los Angeles.

OVERVIEW OF THE CITY ATTORNEY'S OFFICE

The Los Angeles City Attorney's Office consists of three core legal branches: civil liability management, municipal counsel, and criminal and special litigation.

The City Attorney is Los Angeles' chief prosecutor, representing the People of the

State of California in all criminal misdemeanor cases. With seven divisions spanning the City, the Office prosecutes criminal activity ranging from vehicular crimes, property crimes to child abuse, and exploitation to code violations.

The Los Angeles City Attorney's Office is responsible for prosecuting misdemeanor offenses in the City of Los Angeles. The initial step in this process consists of a filing decision by a deputy city attorney, who reviews police reports received for filing consideration. The City Attorney's Office receives these reports either directly from a law enforcement agency, administrative agency, or a referral from the District Attorney's Office.

The deputy city attorney decides whether to file a criminal complaint against an individual and prosecute the case through the judicial system, whether to refer the case to the City Attorney Hearing Program or whether to reject the case. The cases are prosecuted by a deputy city attorney at one of the eight branch locations or specialized units.

Upon disposition of a case by plea or conviction, the defendant is sentenced by the court. However, sentence advocacy is an important role for a prosecutor as part of the criminal justice system. A defendant may be sentenced to jail, fine, or probation and may be ordered to make restitution to the victim. Conditions of probation may include appropriate counseling, keep away orders, force and violence conditions, attendance to anger-management classes, submission to an alcohol program, or other terms of probation that would prevent recidivism.

The Office achieves superior results partly because of its attorneys' familiarity with the communities they serve and the strong working relationships they have developed with all levels of the Los Angeles Police Department.



In 2007, on average, the seven branch offices together review 125,000 cases and file 81,000 cases. As a result of this commitment and effort, Los Angeles neighborhoods are safer places to live and work.

CHILD PROTECTION PROGRAMS

Every day, the Office of the City Attorney confronts the serious problems of child abuse, neglect, and exploitation. Efforts are multifaceted, including specialized vertical prosecution, providing support to victims, truancy and gang prevention programs, legislative sponsorship, law enforcement training, and community education.

CHILD ABUSE PROSECUTION SECTION

The City Attorney's office handles all physical, sexual and emotional child abuse and neglect matters primarily through its specialized Child Abuse Prosecution Section, which uses experienced prosecutors to handle all cases of violence against children. This section is supported by the Victim Advocacy Program, which uses skilled and dedicated advocates who work with the prosecutors to provide support to child victims, witnesses and their families. Each individual case is assigned from the outset to a team made up of the prosecutor, victim advocate and an investigator who work together for the entire duration of that criminal case from beginning to end. Their combined efforts ensure better conviction rates and stricter sentencing, while providing needed resources and aid to victims of child abuse.

The efforts of the Office go beyond prosecution. The Office of the City Attorney provides additional support for child victims and witnesses in cases brought by the Office through the Victim-Witness Assistance Program.

CRIME PREVENTION AND YOUTH PROTECTION DIVISION

The Crime Prevention and Youth Protection Division is responsible for a wide variety of children and youth related programs and projects such as Operation Bright Future, which is designed to build and implement programs and policy for the overall betterment of our community and its children, youth, and families.

OPERATION BRIGHT FUTURE

Our increasingly complicated and competitive global environment makes a superior education more important than ever. For our children to succeed, find their place in the world and contribute to society, they must succeed in school.

For too many children in Los Angeles, a lack of role models, financial and family pressures, and gangs get in the way of an education. Drop out rates, both nationally and locally, are intolerably high.

In 2002, the Office of the City Attorney sought to address this problem when it partnered with the Los Angeles Unified School District (LAUSD) to start a unique and powerful program called Operation Bright Future (OBF).

OBF strikes at the heart of dropout rates with a simple but powerful tool to fight truancy and absenteeism among students: parents. City Attorney staff educate parents about their legal responsibility to ensure that their children attend class regularly. Another positive side-effect of OBF is an increase in state funding for LAUSD, since funding levels by the State are based on school attendance.

OBF started in 20 LAUSD middle schools and over its first two years of operation has focused primarily on 6th graders and served just over 30,000 families. During the 2004-2005



school year, at the request of the School District, OBF was expanded to include 7th and 8th grade students at several Los Angeles City schools.

During the first three years of OBF, there were approximately 11,600 kids who were chronically truant. After intervention by the Office of the City Attorney, 90 percent of those chronic truants had significantly improved their school attendance.

Since its inception, OBF has proved to be a highly successful anti-gang, anti-truancy program that holds parents accountable for their children's attendance at school. Truancy is widely identified as a precursor to gang involvement and criminal activity. As such, OBF fights crime by investing in our young people, by empowering parents and by giving families the resources they need to make better choices for their children's future. Parent education, coupled with the threat of prosecution, is a powerful tool.

In 2007, OBF was operating in 37 middle schools (6th, 7th and 8th grades) throughout the City of Los Angeles. Therefore, OBF has a presence in well over 50 percent of all middle schools within the City limits. In a few short years, working at these schools, we have increased the District's apportionment funding by over \$1 million due to increased attendance.

OBF's positive impact on the future of our youth cannot be overstated. Eliminating chronic truancy is a lynchpin to keeping young people out of gangs and to providing them with the education and tools they need to succeed in life and to contribute to the future of our great city. An additional important benefit is increased apportionment funding for LAUSD, based on higher attendance rates that can be reinvested into the education system.

In its first five years, OBF sent letters to 127,000 families to explain parents' legal responsibility to ensure their children's regular school attendance. Of these families, 27,000

chronic truants were identified. After a face-to-face meeting with prosecutors in a parent assembly, the number of students referred for further intervention dwindled to 2,800 students. After this group of students and their parents were sent to City Attorney Hearings, only 112 families' required further intervention through the School Attendance Review Board (SARB) process. To date criminal charges against parents have been filed in only 17 cases.

During the 2006 – 2007 school year, at the 37 LAUSD middle schools in the city where OBF was in effect, students had a 5.47 percent higher increase in their attendance in the fall and a 1.48 percent increase over other students in the spring. During the same period, student attendance among non-OBF students dropped 2.28 percent in the fall and dropped 1.37 percent in the spring. While over 7,325 chronic truants were identified at the beginning of the 2006-2007 school year, after OBF was implemented, the parents of only three chronic students ultimately had to face prosecution.

ELEMENTARY SCHOOL EXPANSION

In late 2007, OBF expanded the model to include the 5th grade in selected elementary schools that feed into a number of current OBF Middle Schools. This expands the effectiveness of the program by adding two OBF Community Resource Specialists (CRS). The CRS, in conjunction with elementary school administrators and Pupil Service Attendance Counselors implemented a modified version of OBF, provides truancy prevention curriculums geared toward 5th graders, and works closely with the siblings of OBF middle school truants to reverse the patterns of truancy.

The purpose of expanding OBF through Community Resource Specialists is to: 1) prevent truancy early through education, awareness,



and intervention at the elementary school level by providing a law enforcement/prosecutor presence; 2) help LAUSD elementary school assist students and families having issues leading to truancy, gangs, and dropout rates; and 3) bridge the gap between elementary school and middle school through the sustained involvement of CRS.

THE PROBLEM OF TRUANCY IN LOS ANGELES

In the Los Angeles Unified School District, an average of 50,000 students are absent from school each day (20,000 elementary school and 30,000 secondary school students). While some of these absences are for valid reasons, many are unexcused. While some students skip school without their parents' knowledge, other parents often do not require their children to attend school. Under California law, a student is truant when they have three or more unexcused absences from school during a school year. LAUSD attendance records show that some students miss 50 or more days of school in a single school year.

Truancy directly impacts our community and our quality of life in several ways including increases in gang membership and juvenile crime, lower academic achievement, the increased victimization of children, and the loss of hundreds of thousands of dollars for our schools.

- Truancy is a precursor to gang membership. A youth is three times more likely to join a gang when he/she has low school attachment, low academic achievement, or learning disabilities. Studies show that youth who have delinquent peers are more likely to join a gang. According to one veteran gang prosecutor, he has never met a gang member that wasn't first a truant.
- Truancy is a stepping stone to delinquent

and criminal activity. Forty-four percent of juvenile crime takes place during school hours. Police agencies report that increasing daytime crime is a result of increased truancy.

- Truancy impacts a child's success at school. Missing school causes a child to fall further behind, resulting in lower academic achievement. Truants lose not only their opportunity for an education, but also their future earning capacity. There is also a link between truancy and incarceration; among incarcerated inmates, 82 percent dropped out of school.
- Truancy leads to the victimization of youth. According to a veteran LAPD crime analysis officer, when you put juveniles back in school you not only protect the community, you also protect the juvenile. Juveniles comprise twenty-one percent of the victims of crimes committed during school hours. Juveniles out of school are subject to sexual assault, drug dealers and gang activity.
- Truancy has fiscal ramifications. LAUSD is funded based on its students' attendance. Truancy costs the school district hundreds of thousands of dollars in federal and state funding due to lower daily attendance rates. Businesses have to pay the attendant costs of truancy, such as removing graffiti and increasing security for crimes like vandalism and shoplifting. Furthermore, taxpayers must bear the increased cost for criminals and welfare recipients who do not have the education and skills to support themselves.

ANNUAL SUCCESS RATES

From its inception in fall 2002, OBF has had



phenomenal success in combating truancy. The success of OBF is evaluated each year in the following three ways:

1. Numbers of Students in Each Level of the Program

The first evaluation method is to track the number of chronic truants OBF works with each year, and then, as the program progresses, the number of OBF families that are referred by LAUSD for continued intervention. In its first five years, OBF sent letters to approximately 127,000 families to explain parents' legal responsibility to ensure their children's regular school attendance. Of these families, almost 27,000 chronic truants were identified. After a face-to-face meeting with prosecutors in a parent assembly, the number of students referred for further intervention dwindled to 2,800. After this group of students and their parents were sent to City Attorney Hearings and parenting classes, only 112 families required further intervention through the SARB process. Of those 112, to date 17 criminal cases have been filed.

2. Change in the Attendance Rates of OBF Students

The second evaluation method is to compare the change in attendance rates of OBF students against students at the school that are not in the OBF program. The City Attorney's Office reviews the attendance records each year at each of our OBF schools and compares the attendance rate change of the students selected for OBF with the attendance rate change of the school's remaining students. We calculate the attendance rate change for each group from the first day of school through the date of the first OBF intervention (the parent assembly) and then from the date after the parent assembly to the end of the school year. Each year the attendance rate of the OBF students

increased while the attendance rate for the remaining school population decreased. Specifically:

- For the first three years of the program, OBF students increased their attendance each year by over 5 percent after intervention by the program. Specifically, for the 2002-2003 school year, OBF student attendance increased 5.9 percent, for 2003-2004 the increase was 5.1 percent, and for 2004-2005 the increase was 5.2 percent.
- Due to a change in LAUSD's attendance computer system during the 2005-2006 school year, we were unable to calculate the impact of OBF on attendance rates for that year.
- For the 2006-2007 school year, our method of analysis changed. The program is now in 30 schools, and each school has two parent assemblies, one in the fall and one in the spring. This system of two annual parent assemblies allows us to reach a far greater number of truants each year. During this school year, the attendance increase was 5.47 percent for the fall and 1.48 percent for the spring semester.

For each assembly, parents of students with five or more unexcused absences are invited. Those students with five or more unexcused absences in the fall, about 1/3 of our total students, have a much lower historical attendance rate pattern than those who accumulate five or more unexcused absences by the spring.

Our calculations to date indicate that those students whose parents attended the fall parent assembly showed a 6.3 percent increase in attendance over the school year. The OBF students whose parents attended the assembly in the spring exhibited a 2.7 percent attendance increase. These results are



preliminary as we await further information from the District.

3. Apportionment Dollars-Revenue Impact

The third evaluation method is to calculate the revenue gain for the School District as a result of OBF’s increase in student attendance. State apportionment dollars are the most significant source of funding for LAUSD, paying approximately \$27 to \$30 for every student for each day he or she attends school. OBF added over \$1 million in apportionment funding to our school district while operating in only a portion of the middle schools working primarily with sixth grade students.

School Year	Number of OBF Schools	Total Additional Apportionment Dollars
2002-2003	20	\$ 216,802
2003-2004	20	\$ 237,091
2004-2005	20	\$ 310,700
2006-2007	30	\$ 496,447

Because we were unable to calculate the attendance statistics for the 2005-2006 school year, we were unable to calculate the additional apportionment dollars generated by OBF. However, that school year we increased from 20 schools, serving over 5,300 truants per year, to 30 schools, serving over 8,500 truants. That is a 62 percent increase in the truant population served annually. We conservatively estimate based on our statistics from the prior years that the additional apportionment dollars for the 2005-2006 school year were between \$400,000-\$500,000.

LONG TERM EFFECTS

OBF started in the 2002-2003 school year, serving the families of sixth grade students

only. Those students are now in the 11th grade. One example of the program’s impact is the story of a student by the name of Jorge Aguilar, who was among the first group of students targeted by OBF.

Prior to Jorge’s participation in OBF, he had over 300 absences from kindergarten through the fifth grade. Due to his attendance problems, in the sixth grade, he was enrolled with the OBF program at Adams Middle School. After he and his mother met with an OBF prosecutor, he had no further unexcused absences from school that school year. Jorge is now in 11th grade at Santee High School. As of the beginning of the school year, his attendance was 57 days attended out of 58 days possible.

In April 2007, we evaluated the graduation rate of Adams Middle School eighth grade students who were chronic truants served by OBF when they were in 6th grade. We found that 71 percent of those prior chronic truants graduated to high school with good attendance and passing grades.

SAFE SCHOOL ZONES

Working in Partnership with the Los Angeles Unified School District, the Los Angeles City Attorney’s office administers a program designed to monitor and potentially remove criminals convicted of firearm offenses living near schools. When children are unable to study because their minds are focused on outside danger at schools, then we have failed them. By designating the areas around our schools as ‘Safe School Zones’, we send a powerful message to the community that we will not tolerate crime in and around our schools and we serve notice to those who elect to disturb one of the most precious places in a child’s world.

Working closely with members of the Los Angeles Unified School District, the Los Angeles Police Department and the Los



Angeles School Police Department at the Safe Schools Collaborative, the City Attorney's Office uses California Penal Code Section 626 to designate schools, bus stops and all area within 1,000 feet from the school a violence-free zone.

Only enrolled students or those with official school business will be allowed on school grounds. Principals, school police, local law enforcement and security may require any individual whose presence or acts interfere with the conduct of education to leave immediately or be arrested.

Adopting provisions of the Penal Code section and designating "Safety Zones" around schools establishes specific, progressive penalties for violent offenders with a prior criminal record. The first violation of violating the "Safe School Zone" carries a maximum penalty of six months in jail and/or a \$500 fine. Second offenses carry a mandatory minimum of 10 days in jail and two or more offenses carry a mandatory minimum sentence of 90 days in jail.

Each school in the Los Angeles Unified School District implemented a Safe School plan by posting information designating a list of boundaries, bus stops and other public property within the "Safe School Zone". The office continues the process of training law enforcement including School District Police Officers in the law regarding Safe School Zones.

LOS ANGELES STRATEGY AGAINST VIOLENT ENVIRONMENTS NEAR SCHOOLS

Los Angeles Strategy Against Violent Environment Near Schools (LA SAVES) began as an offshoot of the Safe School Zones initiative partnering with the Los Angeles Police Department, Los Angeles County Probation Office, LAUSD School Police, California Department of Corrections and Rehabilitation, the Department of Children and Family Services and the City Attorney's Gang and

Gun Violence Unit to work together in identifying and pursuing armed offenders and those who have been convicted of offenses involving firearms currently living in the neighborhoods around schools.

The LA SAVES team conducts regular inspections around schools in order to remove dangerous convicted criminals who fail to show up to hearings and probation meetings, or are found to have other legal or conviction problems. School grounds should always be a safe haven for our children. These initiatives give us the tools to effectively prosecute those who would threaten our children's safety and cast violence into their days.

MARKHAM MIDDLE SCHOOL BLUEPRINT

Markham Middle School, located in the Watts area of South Los Angeles, has long been plagued by crime, gang violence, and conflict. Seven criminal street gangs claim turf around the school and are responsible for frequent flare-ups of gang violence. Ninety percent of the students at Markham live in one of four federally funded housing developments near the school. Crime, violence, and fear weaken the school's ability to effectively educate students and the students' ability to learn. Markham is considered one of the most troubled schools in Los Angeles.

In early 2007, the Los Angeles City Attorney's Office decided to step in and help put Markham back on the right track based on our clear responsibility to ensure that our children feel safe in and around our schools so that they can focus on learning. Although the roles of schools and law enforcement agencies differ, there are some significant areas of commonality. First, both schools and law enforcement agencies are responsible for the safety and well-being of students. Second, schools represent the natural centers of our communities. For law enforcement, working within the schools is a logical



extension of our responsibility for public safety in the broader community. Third, both schools and law enforcement agencies can play an important role in helping youth become productive, law-abiding residents of our City.

With these complimentary roles in mind, the team set out to work with the School District and Markham's principal to implement strategies aimed at reversing conditions that produce and perpetuate an unsafe school environment. At the outset, a criminal prosecutor was assigned to Markham as a School Safety Specialist, dedicated full time to the task of making Markham a safer place for students.

From the beginning, we also understood that school safety requires broad-based effort by the entire community, including educators, students, parents, law enforcement agencies, businesses, and community-based organizations. As such, we began this endeavor by listening to the diverse stakeholders at Markham. The information we gathered formed the basis of our collaboration and informed the decisions we made.

Since February 2007, our strong partnership with the school and the District, our investment of expertise, time and resources, and our dedication to Markham, have produced substantial results. Today, according to the LAPD and school police, the Markham campus is significantly safer than at any other time in recent memory.

LAPD BOOT CAMP PARTNERSHIP

Los Angeles Police Department's (LAPD) Juvenile Impact Program (JIP) Partnership targets at risk juveniles and their families by using a two tier approach – the first aimed at the risk juvenile and the second at the parents. LAPD officers conducting a regimented, military style (boot camp) for juveniles by using LAPD instructors designated

as drill instructors. These instructors help instill discipline, self-esteem and respect for others through an intense physical training program.

The second tier approach is a parenting component where professional counselors give parents tools on how to deal with incorrigibly children and overall parenting skills. Parents are mandated to be with their students throughout the 11 week program which includes presentations by the City Attorney's Office Operation Bright Future (OBF) staff.

The ongoing partnership between JIP and OBF ensures that students who are part of the programs are productive law abiding citizens. JIP officers participate in City Attorney OBF hearings when appropriate and when parents ask for help with their incorrigible students. City Attorney OBF staff participates in the parenting component of JIP by conducting parent presentations and delineating the legal responsibilities and consequences of truancy.

JUVENILE JUSTICE THINK TANK

Juvenile Justice Think Tank and representatives from several agencies collaborate monthly on methods to decrease the problems leading to students having a failed school experience and juveniles becoming part of the criminal justice system.

ANNUAL TRUANCY SYMPOSIUM

Truancy Symposium and several government agencies meet every month to plan an annual truancy symposium which addresses the best practices to combat truancy and its many consequences. OBF and the other committee members determine the speakers, topics, and assessment tools for the symposium.



TRUANCY SWEEPS

The Los Angeles City Attorney's Office Crime Prevention staff collaborates with Los Angeles Police Department (LAPD), Los Angeles Unified School District (LAUSD) Police, Los Angeles County Probation, Department of Children and Family Services (DCFS) and local community and faith based organizations to conduct an inter-agency coordinated neighborhood sweep to pickup students who are truant from school. Students picked up by law enforcement are brought to a central location where they are interviewed by school personnel, school probation officers and DCFS who notify the parents or guardians of the students and direct them where to pick up their child. Once the parent or guardian arrives at the location, Operation Bright Future attorney staff conducts hearings with the student and parents to determine why the student is truant and formulate resource referral and a school attendance plan.

SCHOOL BASED TRAINING FOR MANDATED REPORTER'S OF CHILD ABUSE

Crime Prevention and Youth Protection staff conducts periodic training for school and medical personnel who are mandated reporters of child abuse. Instruction includes laws relating to mandated reporting, how and when to report, what constitutes physical, sexual and emotional child abuse and the ramification of a failure to report.

INTERNET SAFETY PROGRAM

Crime Prevention and Youth Protection staff is available to all public and private schools for presentation of Internet Safety programs. Interactive presentations include Internet Safety for middle and high school

students, parents and school staff, Internet Predators and Megan's law, cyber bullying presentations and computer safety instruction.

HEALTH CARE SUMMIT ON CHILD ABUSE REPORTING

On May 20, 2008, the City Attorney held a Summit on Healthcare Based Child Abuse Reporting. The goal for this unique Summit was to convene professionals with a role in protecting children to share best practices for reducing the incidence and effects of child abuse. Participants will include representatives from medical, social welfare, paramedics, law enforcement and prosecutorial agencies.

The topics for the Summit related to the child abuse identification, classification, reporting, investigation and prosecution. Following back-to-back expert panel presentations, attendees had the opportunity to listen and learn from one another during a working group session focused on changing policies which may impede best practices in healthcare based child abuse reporting. Thereafter, the Los Angeles City Attorney's Office prepared a follow up report summarizing the Summit's findings and outlining recommendations for best practices.

Physical, emotional, and sexual child abuse and neglect continues to be an epidemic throughout Los Angeles. For those who survive, the personal and societal effects are staggering. The potential to protect another child from further abuse through your involvement in this Summit cannot be underestimated.

CHILD ABUSE SCREENING CARD

A component of the outreach intended for the Health Care Summit on Child Abuse Reporting will be a laminated card to be distributed to all Health Care professionals



attending the Summit to be used as a guide and resource when presented with possible child abuse in a health care setting. The card includes the following information in an easily usable format including a color coded ruler along the side of the laminated card:

REPORT ANY REASONABLE SUSPICION OF ABUSE OR NEGLECT

A mandated reporter must immediately, or as soon as practicably possible, report by telephone a known or suspected incidence of child abuse (Pen. Code § 11166(a)) to the police or sheriff’s department, county probation department, or county welfare department. Child Protection Hotline (800) 540-4000

PHYSICAL ABUSE: a physical injury, which is inflicted by other than accidental means, on a child by another person. Child abuse also means any act or omission, willful cruelty or unjustifiable punishment of a child, or unlawful corporal punishment or injury. Child abuse does not mean a mutual affray between minors.

Physical Indicators: clusters or unusual patterns of bruises; bruises on infants; multiple bruises in various stages of healing, marks that resemble objects, such as belt buckles, handprints; burns caused by an iron, cigarette; immersion burns, fractures of long bones caused by twisting and pulling, intestinal injuries.

Behavioral Indicators: inconsistent or improbable explanations for causes of injuries, bruises, abrasions, or lesions; excessive, passive complaint or fearful behavior; avoids being touched; frightened to go home; anxious and withdrawn

SEXUAL ABUSE: conduct involving rape, statutory rape, rape in concert, incest, sodomy, lewd or lascivious acts upon a child, oral

copulation, penetration of a genital or anal opening by a foreign object or child molestation.

Physical Indicators: wariness of physical contact; pain, swelling, or itching of the genital areas; torn, stained, or bloody underclothing, difficulty walking or sitting.

Behavioral Indicators: victim’s disclosure of sexual abuse; promiscuity in behavior and language; compulsive masturbation; aggressive sexual behavior sexually acting out with peers.

NEGLECT: the negligent treatment or the maltreatment of a child by a person responsible for the child’s welfare under circumstances indicating harm or threatened harm to the child’s health or welfare. The term includes both acts and omissions on the part of the responsible person.

Physical Indicators: consistently hungry, dirty, and/or sleepy; inappropriately dressed, poor hygiene, unattended medical/dental problems, constant lice.

Behavior Indicators: antisocial, disruptive behavior, infrequent school attendance, reporting no caretaker at home, assumes adult responsibilities, lies and steals.

EMOTIONAL ABUSE: emotional abuse is NOT a mandated report; it is a discretionary report.

VERIZON GRANT FAMILY VIOLENCE CASE MANAGEMENT SYSTEM

The Office of the City Attorney applied for and received a \$100,000 technology grant from Verizon Wireless Foundation to fund a wireless case management system for family violence, child abuse and youth related programs in the office. The grant allowed for the creation of a new case management system to track and monitor all child related cases in the office. The grant



also funded laptop computers and other technology that facilitated the access of City Attorney staff to closely monitor active cases, track witnesses and attain outside resources while in court or out in the field.

LEGISLATION

The Office of the City Attorney strives to improve the quality of life for all Angelinos. While ground breaking programs and initiatives are a major component of that effort, the Office's ability to help implement, change, and interpret new laws is vital to making Los Angeles a cleaner, safer, enriched city from children and families.

These efforts have made us active on the legislative front on the local, regional, state, and federal levels. The Office has been instrumental in drafting or lending its support to a variety of ordinances, codes, bills, and laws that help make Los Angeles stronger and children safer. From identifying and closing loopholes in existing laws to taking an innovative, affirmative approach to solving the problems that challenge the City, our legislative efforts are a key part of our arsenal, including but not limited to the following:

1. AB 1868 (Koretz) "The Neighborhood Protection Act of 2002" Red light and narcotics abatement legislation aimed at keeping neighborhoods safer for children and families.
2. AB 2499 (Frommer) Domestic Violence and Child Sexual Assault Victim Protection Act.
3. AB 319 (Frommer) Juvenile gun bill expands existing law prohibiting juveniles convicted of specified offenses from owning or possessing any firearm until the age of 30 including offenses involving the carrying of

concealed or loaded firearms, including firearms in vehicles.

Of particular note is SB 1666 (Calderon) Safe School Zones (pending in Assembly). This bill amends Penal Code section 626 to expand the Safe School Zones from 1,000 feet around any public school to 1,500 feet around any public or private school. It provides that any person convicted of certain enumerated crimes or the terms of a civil gang injunction, in addition and consecutive to the punishment proscribed for the crime, shall be punished by an additional fine or jail time. Additionally, this bill would extend the prohibition of registered sex offenders to include loitering within the safe school zone or a public park, playground, or youth center.

SB 1666 will expand the area around public and private schools designated as Safe School Zones. It will allow law enforcement, school officials and prosecutors to more effectively protect the sanctity of our schools and interface with other office programs such as LA SAVES and the School Safety Prosecutor program.

Crimes which are already identified in existing law will now have enhanced penalties so that these laws are more likely to prevent, deter and effectively punish crimes committed in school neighborhoods.

SAFE NEIGHBORHOODS DIVISION

Neighborhood Prosecutors are now stationed in each of the 19 police divisions across the City of Los Angeles, bringing both prosecutors and civil attorneys closest to where they are needed.

At the same time, the Office of the City Attorney has developed or expanded its partnership with city, county, regional, state and federal offices as well as the non-profit community by forming task forces to attack slum housing, refurbish nuisance properties



for low-income housing, curb prostitution, stop elder abuse, and alleviate a host of other problems that plague far too many communities.

The City Attorney's Gang Unit has had a particularly active four years, rolling out civil gang injunctions on 17 criminal street gangs and bringing the citywide total to 26 injunctions covering 36 gangs. These injunctions, which serve as restraining orders on gang members, have had a demonstrable affect on reducing street-level crime in the 60 square miles they cover thus protecting children, youth and families across the city.

In many cases, our attorneys work proactively to achieve solutions for residents and improve the physical condition of our neighborhoods before crimes occur.

Whether by filing criminal charges or reaching out to property owners and businesses to inform them of their responsibilities as required by law, the City Attorney's Office seeks solutions that best protect the health and welfare of all the city's residents and families.

SCHOOL SAFETY PROSECUTOR PROGRAM

The School Safety Prosecutor Program (SSP) implements and maintains comprehensive crime reduction strategies to ensure a crime free and safe environment in the immediate geographic area surrounding the principal high school, as well as the recreational areas frequented by students of the principal high school. It is a program directed by the Los Angeles City Attorney's Office and is comprised of prosecuting attorneys whose jurisdiction covers misdemeanor crimes committed by persons over the age of 18 in the City of Los Angeles.

The initial schools in SSP, as chosen by the City Attorney's Office, the Los Angeles School Police, and the Los Angeles Police Department were Arleta High School, Panorama High School, Roosevelt High

School, Fremont High School, Crenshaw High School and Venice High School. The program was recently expanded to include Hollywood, Westchester, University, Hamilton, Sylmar, Birmingham, Van Nuys, Jefferson, Lincoln and Franklin High Schools.

SSP focus on crimes and quality of life issues within the safe school zone, the 1000' perimeter surrounding the high school, followed by its feeder elementary and middle schools. School Safety Prosecutors identify and address crime-related issues including nuisance crimes, problem properties, environmental hazards, truancy, tobacco and alcohol sales, theft, and school-adjacent tenants engaged in drug, gang or other violent activity. In addition, the prosecutors coordinate with the LA SAVES team to monitor registered sex offenders in the areas surrounding neighborhood schools.

The SSP works as a part of the Safe Neighborhoods Division of the Los Angeles City Attorney's Office and partners with the assigned neighborhood prosecutor, gang neighborhood prosecutor, and nuisance abatement prosecutor to strategically target crime and nuisance properties in their respective areas of jurisdiction.

The objective of the Neighborhood Prosecutor Program is to improve the quality of life in the many diverse communities in the City of Los Angeles. A proactive approach to resolving problems is utilized by establishing working partnerships with law enforcement and the community. This program is designed to prioritize and address quality of life crimes involving social disorder and physical decay, ranging from street prostitution, drug activity, trespassing, zoning violations, and acts of vandalism, to trash, graffiti, illegal dumping, code violations, and visual blight.

The Citywide Nuisance Abatement Program is a multi-agency real property abatement task force comprised of personnel from the City



Attorney's Office, LAPD, the Department of Building and Safety, and the Planning Department. The primary goal of CNAP is to curtail narcotics, gang, and vice related nuisance activities associated with occupied and vacant nuisance properties. All available remedies, civil and criminal, are utilized.

The Duties of the School Safety Prosecutors Include:

- Vertical prosecution of quality-of-life crimes prioritized by the school, the neighboring community and law enforcement, with specific focus on drug and gang related offenses, street prostitution, thefts, assaults, vandalism, code violations, and sales of tobacco and drug paraphernalia within 1000 feet of schools and along school corridors;
- Working with nuisance abatement prosecutors to abate nuisance activity at problem properties and evict school-adjacent tenants engaged in drug, gang, or other violent activity;
- Coordinating with the LA SAVES (Los Angeles Strategy Against Violent Environments Near Schools) team to effectuate the arrests of wanted felons on probation or parole in the areas around the target school, in cooperation with the City Attorney Gun Unit, LAPD, LA School Police, State Parole Board, and County Probation;
- Coordinating with LAPD REACT (Registration and Enforcement Compliance Team) officers to monitor Registered Sex Offenders in the neighborhoods adjacent to the target school;
- Coordinating efforts with our Crime Prevention and Youth Protection Division, Gang Unit, and Family Violence Unit;
- Implementing multi-agency responses

with the Department of Building and Safety, Housing Department, Planning Department, and other regulatory agencies;

- Working with the assigned Neighborhood Prosecutors and management regarding neighborhood issues and prosecution strategies for the assigned LAPD Division;
- Developing and implementing creative strategies and responses, including legislation, to deter crime.
- Conducting surveys to identify school and community safety concerns;
- Collecting baseline data, including census information, crime statistics, truancy rates, and identification of parolees, probationers, and registered sex offenders residing within the safe school zone;
- Participating in the School Safety Collaboratives comprised by representatives from the high school, LAPD, LA School Police, the surrounding neighborhood, the local Council Office, and other requisite agencies and community-based organizations;
- Working with local school administrators, teachers, students and their parents, neighborhood councils, residents, business owners, the City Council, and law enforcement to focus resources on chronic offenders and problem offenses and coordinate both traditional and non-prosecutorial responses;
- Participating in school and community meetings, including evenings and weekends;

SPECIFIC ACCOMPLISHMENTS OF SCHOOL SAFETY PROSECUTORS:

CRENSHAW HIGH SCHOOL

BLACK RIDERS: SSP vertically prosecuted



a member of a militant, quasi-gang who was aggressively panhandling Crenshaw High School students and patrons of a local business. The defendant was sentenced to 270 days in County Jail, placed on 24 months Summary Probation, and ordered by the Court to Stay Away from the Crenshaw Corridor.

GANG REGISTRATION AND PROBATION COMPLIANCE CHECK TASK FORCE: SSP coordinate efforts with LAPD and Probation to conduct gang registration and probation compliance checks around the School.

SEXUAL PREDATOR REGISTRATION CHECK: SSP works with LAPD to conduct Sexual Offender Registrants compliance operations around the School.

BLIGHT VIDEO: SSP is working with LAUSD and CD 8 to create a video on measures to address and eliminate the blighted conditions in the area around Crenshaw and have students take responsibility for their neighborhoods.

SAFE PASSAGE - BIKE PATROL: SSP is working with the Urban League, Community Build and TEEAMWORKS (Gang Intervention Group) to establish a bike patrol to provide safe passage for students.

DAYS OF DIALOGUE: SSP and LAPD conduct classroom sessions to educate students on the legal system and provide positive interactions with law enforcement. The SSP also uses this opportunity to educate students that what they lightly call a "pocket check" in which students take cell phones, iPods, and other property or money from the person of other students is in fact a serious felony offense – robbery.

NARCOTICS LOCATIONS: SSP works with LAPD Narcotics and Gang Units to problem solve narcotics locations around the school. To date, four properties have been referred to the City Attorney's Citywide Nuisance Abatement Program.

FREMONT HIGH SCHOOL

NARCOTICS REGISTRATION COMPLIANCE CHECKS: SSP worked closely with LAPD in this enforcement effort in the area surrounding Fremont. In the initial sweep alone, fifteen defendants were charged and vertically prosecuted by the School Safety Prosecutor with violating California Health & Safety Code 11594 (failure to register as controlled substance offender).

LEWD CONDUCT: SSP vertically prosecuted a defendant who exposed his genitals to a Fremont student.

GRAFFITI TASK FORCE: Used undercover youths under age 18 to purchase spray paint. The purpose of the task force was to stem spray paint sales to would be taggers/gang members.

ALCOHOL SALES TO MINORS TASK FORCE: This Task Force utilized 18 year old undercover youths to purchase alcohol from local liquor stores. Two clerks have been prosecuted for B& P 25658(a).

MARIJUANA POSSESSION: Numerous possession of marijuana cases are generated from the Fremont area. Marijuana sales are used to fund gang activity, with Florencia 13 gang members identified as suppliers. SSP vertically prosecutes the misdemeanor marijuana cases.

ROOSEVELT HIGH SCHOOL

SCHOOL SAFETY COLLABORATIVE: SSP is on the board of the School Safety Collaborative established in January of 2008 at Roosevelt High School. LAUSD is requiring all High Schools to develop a Safety Collaborative in an effort to create a coordinated effort to address school safety through participation of diverse agencies. The goal is to provide a safe learning environment for the students by having a



variety of stakeholders vested in school. These entities serve to provide input, resources and suggest approaches to prevent violence and target the unique dangers threatening the safety and academic efforts of Roosevelt students.

DRINKING IN PUBLIC: SSP has a 100% conviction rate on these types of cases originating in the area around Roosevelt. She was also able to further deter crime by getting a majority of the criminals sentenced to serve county jail time and also persuaded the judge in each case to order a stay away from the neighborhood around Roosevelt High School

ILLEGAL VENDING: SSP works with CD 14 and LAPD to combat illegal vending near the schools. Rampant illegal vending has given gangs the opportunity to tax vendors in the area, resulting in many victims that gang members know are reluctant to report crime.

YOUTH CPAB: SSP works closely with LAPD to involve students in the area in this new program with law enforcement. The program is intended to promote alternative pro-active solutions to crime and promote community-based problem solving at the same time.

ALL SPANISH PARENT ROUNDTABLE: SSP created a program where parents of students could meet monthly for courses and resources. SSP personally addresses the parent group in Spanish to discuss issues students are facing in the area. Parents often tell SSP of the quality of life crimes occurring in the area. The impact of this program is to produce quicker response to crimes occurring near schools that impact students.

TEEN COURT: SSP works with the Mayor's Gang Reduction Program using real cases and student jurors. The Teen Court helps students realize the consequences of their actions.

GANG GRAFFITI: SSP works closely with LAPD in identifying and prosecuting graffiti around schools. SSP has prosecuted two defendants for allowing aerosol spray cans to be accessible to the public, which is a violation of Los Angeles Municipal Code section 47.11. These prosecutions have an impact on reducing crime by minimizing the ability of minors to purchase spray paint with the goal of reducing gang graffiti and tagging in the area.

PROBLEM GANG MEMBER/NARCOTICS LOCATIONS: SSP works with LAPD on various problem locations. SSP refers out issues from these locations to LADBS, Street Services, CNAP, and other enforcement agencies that can assist in stemming problems at the locations.

ARLETA AND PANORAMA HIGH SCHOOLS

WEED & SEED GRANT: SSP is co-chairing this project with Casa Esperanza on a community-based multi-agency approach to law enforcement, gang prevention and neighborhood restoration. The Weed and Seed strategy brings together federal, state and local law enforcement, social service providers, prosecutors, business owners and residents under the shared goal of weeding out crime and gangs while seeding in social services and economic development.

NUISANCE ACTIVITY AT LOCAL STORE: Narcotics activity, lewd conduct, illegal dumping, and hazardous illegal car window tinting were occurring in the back parking lot at the Walgreen store located just a few blocks from Arleta High School and Beachy Elementary School. Most of the activity was occurring in the store's rear parking lot behind a cinder block wall, blocking the illegal activity from view. SSP held a case conference with the corporate managers and LAPD. Walgreens removed the cinder block



wall, and the criminal activity ceased. SSP additionally filed criminal charges for zoning violations pertaining to the illegal use of private property.

SCHOOL SAFETY COLLABORATIVE: SSP works in collaboration to create partnerships with government and community organizations to improve safety in the area surrounding the school. My collaborative for Panorama just started, they've only had one meeting. Arleta does not have one yet.

LIGHTING CONDITIONS AROUND PANORAMA HIGH & ARLETA HIGH: SSP worked with the Bureau of Street Lighting to increase necessary lighting around schools.

Illegal Sale of Imitation Firearms: After receiving numerous complaints from school administrators and community members regarding sales of prohibited merchandise from ice cream truck vendors, SSP coordinated efforts with the Los Angeles Police Department, LA Department of Public Works - Bureau of Street Services Investigation, LA Housing Department, and the LA School Police to address the problem. SSP secured five convictions against ice cream truck vendors for engaging in the prohibited sale of various items, including imitation firearms and laser pointers, within 500 feet of schools.

LA SAVES: SSP worked with LA SAVES to locate and remove as many dangerous individuals around schools as possible. LA SAVES is a task force comprised by LA County Probation, LA City Attorney, LAPD, Department of Children and Family Services, California Department of Corrections and Rehabilitation, Adult and Juvenile Parole Divisions, and LA School Police Department. The SSP task force operation resulted in arrests for 2 parole violations, 1 probation violation, and 2 possessions of drug paraphernalia cases. A two-year old child

was also removed due to narcotics-related activity by her parents.

YOUTH CPAB: SSP works closely with LAPD to involve area students in this new law enforcement program. Students from several high schools, including Arleta High School, attend the monthly meeting at either the LAPD-Foothill Police Station or a neighboring high school. This interactive meeting provides students with the opportunity to share information and promote proactive solutions to crimes most affecting the youth.

VENICE HIGH SCHOOL

Multi-Agency Truancy Model: The school safety prosecutor coordinated Operation Stay in School (OSIS) with LAPD and LASP, a multi-agency truancy operation which targeted the areas around Venice High School, as well as popular truancy spots like Venice Beach and the Santa Monica Pier. The school safety prosecutor worked in conjunction with LAPD- Pacific Division and Los Angeles School Police to coordinate enforcement. A command center was set up at the local park and housed representatives from numerous agencies who provided both on site counseling and offered services to both the students and their parents.

TEEN COURT: SSP works with local agencies using real cases and student jurors. Helps students realize the consequences of their actions

TRAFFIC SAFETY ISSUES: SSP worked with DOT and LAUSD to resolve the issue of speeding vehicles on a street adjacent to the school.

TEEN COURT

As part of the City Attorney's office Neighborhood Prosecutor program, locally



assigned prosecutors work closely with LAUSD personnel, Los Angeles County Juvenile Probation officers, and the Los Angeles County Superior Court to handle actual juvenile criminal offenses in a courtroom setting as an alternative to the juvenile appearing in regular juvenile court. Once a juvenile defendant agrees to have his case heard before the Teen Court, a sitting Los Angeles Superior Court Judge presides over the proceedings. The juvenile defendant must bring a parent or guardian to the proceedings which are held at a school site other than the juvenile's home school.

The students participating in Teen Court act as jurors on the case and are allowed to ask questions of the defendant and his guardian.

After the case is presented by both sides, the students deliberate under the guidance of the neighborhood prosecutor or another volunteer attorney as to the guilt or innocence of the juvenile and what sentence they think the defendant should receive. If the judge agrees with the "jury", the defendant is sentenced to the Teen Court's recommendations and must adhere to the terms and conditions or face a violation of his Teen Court probationary conditions.

This program originated at Venice High School and has proved to be a very successful Peer Mediation effort to the benefit of all students involved.

XTREME TEENS

One of the contributing factors toward the allure of gangs is the absence of safe and affordable after school and weekend activities for youth. In response to this problem, the City Attorney's office created Friday Night Extreme Teens. In collaboration with the Department of Recreation and Parks, the Los

Angeles Police Department, community service faith based organizations, this very successful program has been implemented at two San Fernando Valley parks and a third program will be launched in the coming weeks. Lanark, Van Nuys and Sylmar Recreation Centers are all located in neighborhoods that have been identified by LAPD as being hot spots for gang activity. The free coed program is open to neighborhood teens, between the ages of twelve and sixteen. The program is administered by park staff and there is a regular police presence to ensure that all participants are safe. Activities include participation in a sports activity, followed by food and an after game activity, such as a dance or motivational speaker. Funding comes through existing department resources, with assistance from the neighborhood councils. Food is served by local organizations whose members are committed to support these programs throughout the year. Youth are busy at the park nearly every Friday night all year long, from 6 p.m. until 9:30 p.m., with adult mentors, in a safe environment and statistics have shown that crime has been reduced. With the two programs already in existence, more than 250 youth have been served.

SPECIAL ENFORCEMENT DIVISION

The Special Trials Unit prosecutes child sexual abuse and exploitation cases. Special Trials works with local, county, state and federal law enforcement agencies as a direct filing resource, for referrals from other prosecutorial agencies and as a partner in task force operations. The Special Trials Unit has primary responsibility for filing review and prosecution of all misdemeanor and wobbler offenses involving the below categories of child sexual abuse and exploitation:



CHILD PORNOGRAPHY

This category includes all cases where there is any questionable recorded image/video of a minor. It includes photos, digital images on a camera or video recorder, and computer images. It included all images depicting children engaged in sexual conduct or showing a child's (clothed or unclothed) genital, pubic or rectal areas. Child pornography can include clothed images of minors, even where the genitals are not visible or discernible through the clothing.

Child Exploitation through Technology. This category of crimes includes all offenses involving children and the use of any photographic or video device, computer, telephone or the internet.

Sex Crimes in an Institutional Setting. All sexually-oriented offenses committed against minors in any institutional or structured setting (e.g., hospitals, schools, camps, religious organizations, etc.). These include all incidents involving sexually-oriented attention towards a minor (whether or not there is physical contact), usually in the context of a sexual battery or child molestation. Such offenses arise out of the institutional or professional relationship between the suspect and the victim (as opposed to a relationship based on family or domestic relationship). These offenses typically include crimes committed by: (1) a person having a professional relationship with the victim such as a health care provider or a teacher; (2) a person having a business/work relationship with the victim such as a supervisor or employer; (3) a person having a special trust relationship with the victim such as a scout leader or a little league coach; and (4) persons who, because of their legal status or employment, hold positions of responsibility with the victim such as a camp counselor, a child daycare employee, and an official conducting a driving test or supervising a licensing examination.

HEARINGS

The Los Angeles City Attorney's Hearing Program offers an innovative approach to handling matters where a crime has occurred. The Office recognizes that prosecution may be inappropriate in some circumstances. In child abuse and neglect matters, cases are assigned to hearing officers who review the facts. They educate participants as to what constitutes child abuse, admonish respondents about the consequences of their behavior and make referrals to a variety of services, including parenting, drug and alcohol treatment and anger management programs. Contact between hearing officers and program participants may prevent subsequent offenses against children.

In 2007, there were 879 child abuse and neglect matters referred to the City Attorney Hearings program after review by an attorney for filing consideration. Of the 879 hearings, 625 were resolved; 4 were recommended for filing; 246 were under submission for further review by an attorney; and 4 were under submission for further compliance.

VICTIM ASSISTANCE PROGRAM

The Los Angeles Office of the City Attorney Victim Assistance Program is a State grant-funded program that assists victims of crime through the provision of State mandated services pursuant to Penal Code section 13835.5. These services include: crisis intervention, court support, resource and referrals, and assisting victims to file for the State of California Victims of Crime Compensation Application. The program is funded by the State of California Restitution Fund, which is comprised of fines and penalty assessments imposed on convicted criminals.

The program assists victims of all types of crime, including robbery/assault; drunk



driving; hit and run; sexual assault; domestic violence; child physical, and sexual abuse; elder abuse; hate crimes; aggravated assault. Additionally, the program also assists family members of homicide victims.

In 2007, there were 6,310 new victims referred to the program. Of the 6,310, there were 415 assisted child victims.

STATISTICS

In 2006, the Los Angeles City Attorney's filed 696 cases that involved ICAN-related offenses. In 2007, this Office reviewed 1,660 such cases, a 138 percent increase. Among the 2007 ICAN-related cases, the Office filed 243, rejected 545 and referred 872 to hearings.

In 2006, 549 ICAN-related cases reached a disposition. In 2007, 159 such cases reached disposition. Of the 159 cases, 136 resulted in guilty pleas, 18 were dismissed, 2 resulted in guilty verdicts and 3 ended in verdicts of not guilty.

BREAKDOWN OF ICAN-RELATED CHARGES

The following information provides a breakdown of ICAN-related charges and data involving child abuse prosecutions and cases referred to the Los Angeles City Attorney Office's Hearing Program.

SEXUAL ABUSE

In 2007, the Office reviewed 291 sexual abuse cases involving Penal Code sections 261.5 (unlawful sexual intercourse with a minor); 288a (b) (oral copulation of minor under 18); 288.2 (harmful matter sent with intent of seduction of minor); and 647.6 (annoying or molesting child under 18). Of the 291 cases, 82 were filed; 97 were referred to hearing; and 112 were rejected. Of those filed, there was a disposition of 64 sexual

abuse cases. Included in the disposition of the sexual abuse cases, 57 resulted in guilty pleas, 5 were dismissed; 1 resulted in a guilty verdict; and 1 ended in a verdict of not guilty.

EXPLOITATION

In 2007, the Office reviewed 19 exploitation cases involving Penal Code sections 311.11 and 311.11(a) (possession or control of matter depicting minor engaging or simulating sexual conduct). Of the 19 cases, 12 were filed; and 7 were rejected. There was a disposition of 3 exploitation cases which resulted in guilty pleas.

PHYSICAL ABUSE

In 2007, the Office reviewed 645 physical abuse cases involving Penal Code section 273d (a) (corporal punishment or injury of child). Of the 645 cases, 86 were filed, 365 were referred to hearing and 194 were rejected. There was a disposition of 80 physical abuse cases. Of the 80 cases, 72 resulted in guilty pleas; 6 were dismissed; and 2 ended in verdicts of not guilty.

SEVERE NEGLECT

In 2007, the Office reviewed 593 severe neglect cases involving Penal Code sections 273a(a) (willful harm or injury to child), 273a(b) (willful harm or injury to child) and 278 (noncustodial persons; detainment or concealment of child from legal custodian). Of the 593 cases, 43 were filed; 381 were referred to hearing; and 169 were rejected. There was a disposition of 49 severe neglect cases. Of the 49 cases, 37 resulted in guilty pleas; 10 were dismissed; 1 resulted in a guilty verdict; and 1 ended in a verdict of not guilty.

GENERAL NEGLECT

In 2007, the Office reviewed 61 general neglect cases involving Penal Code section



272 (contributing to the delinquency of persons under 18). Of the 61 cases, 16 were filed; 29 were referred to hearing; and 16 were rejected. There was a disposition of 11 general neglect cases. Of the 11 cases, 10 resulted in guilty pleas and 1 was dismissed.

SIGNIFICANT FINDINGS

In 2007, there were 1,660 reviewed cases which resulted in an increase of 964 cases from last year. Also, in 2007 there were 159 ICAN-related cases that reached a disposition – a decrease of 390 disposition cases. This decrease between 2006 and 2007 in ICAN-related cases that reached disposition, reflect an increase in the quantity and quality of the various crime prevention programs that target children, sponsored by the Los Angeles City Attorney’s Office.

CONCLUSION

The strength of Los Angeles lies in its diversity. This community is shaped by its cultures, history, geography and unique architectural mix.

From the San Fernando Valley over the Hollywood Hills, from East Los Angeles to the Venice Boardwalk, and from the Harbor through downtown, the City of Los Angeles is made up of remarkably distinct pieces. Each neighborhood has its own rhythm, sources of pride and concerns.

The primary goal of the Office of the City Attorney is to provide the neighborhoods, children and families of Los Angeles a safer place to live and to improve the quality of life for the City’s residents at home, at school, at work, and at play. Great efforts are made each year to see that goal met and to ensure that the children have a safe and bright future.

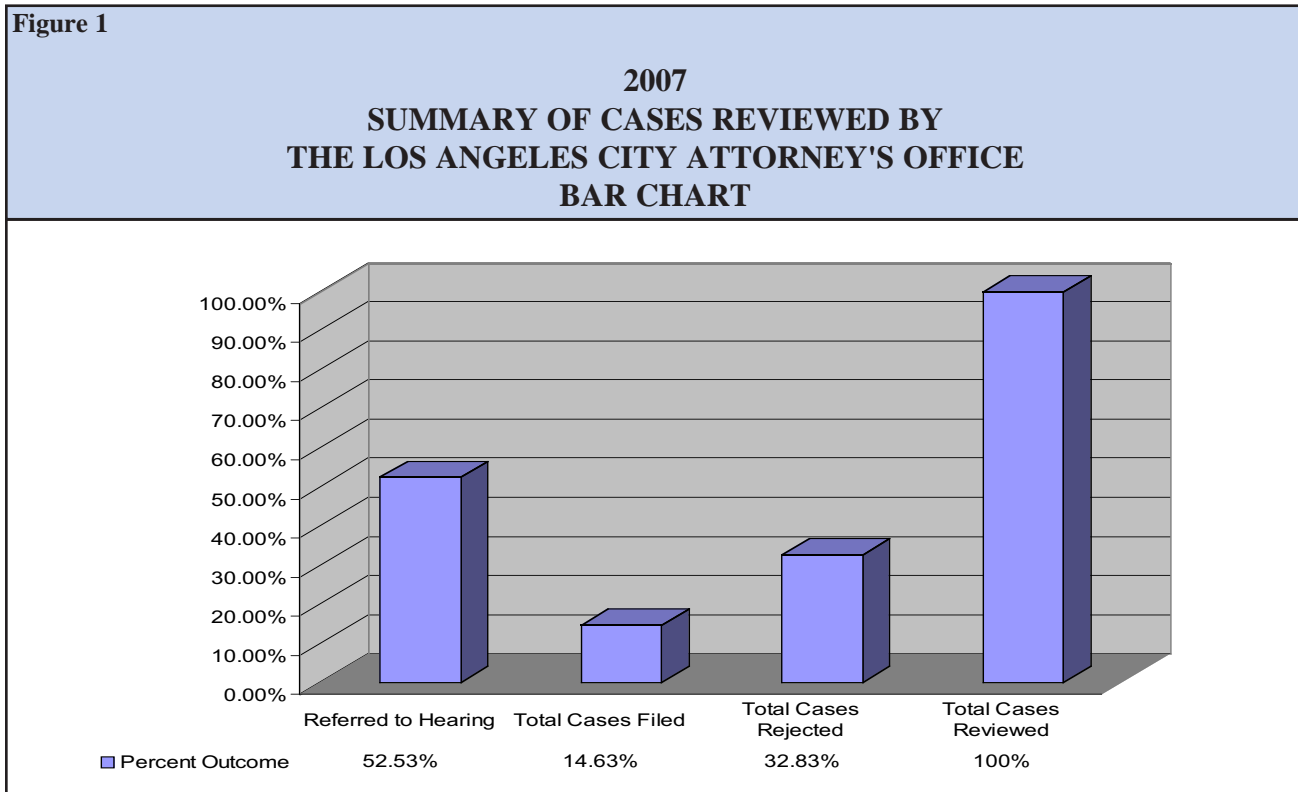




Figure 2

2007
SUMMARY OF CASES REVIEWED BY
THE LOS ANGELES CITY ATTORNEY'S OFFICE
PIE CHART

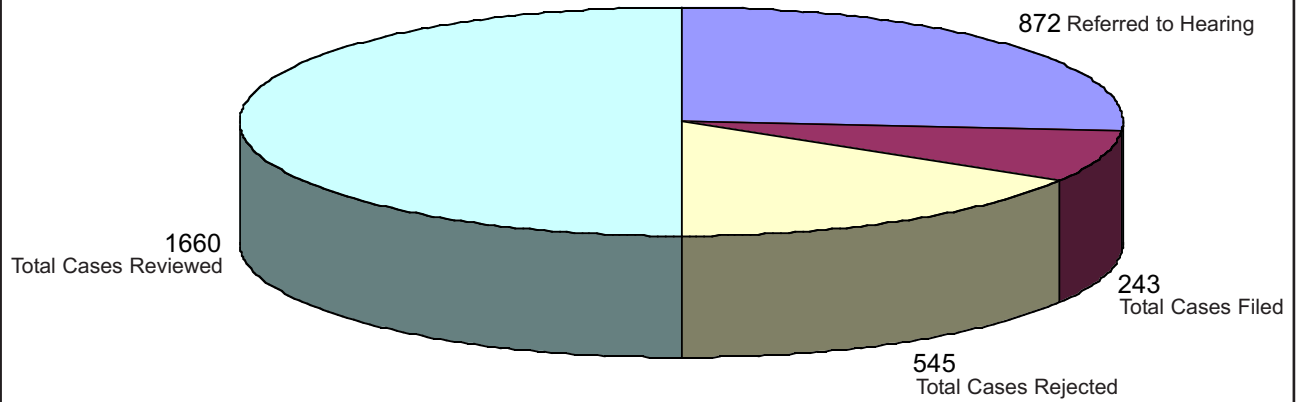


Figure 3

2007
SUMMARY OF SEXUAL ABUSE CASES REVIEWED BY
THE LOS ANGELES CITY ATTORNEY'S OFFICE

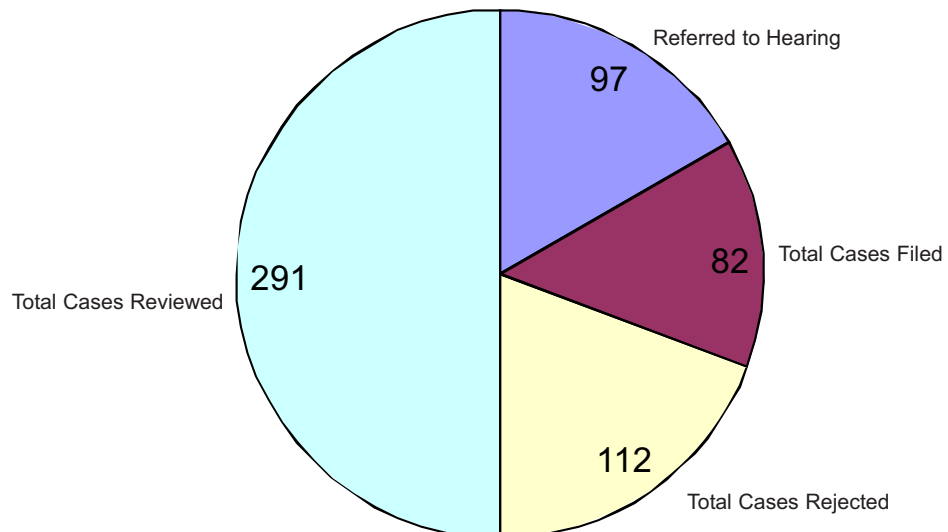




Figure 4

2007
SUMMARY OF EXPLOITATION CASES REVIEWED BY
THE LOS ANGELES CITY ATTORNEY'S OFFICE

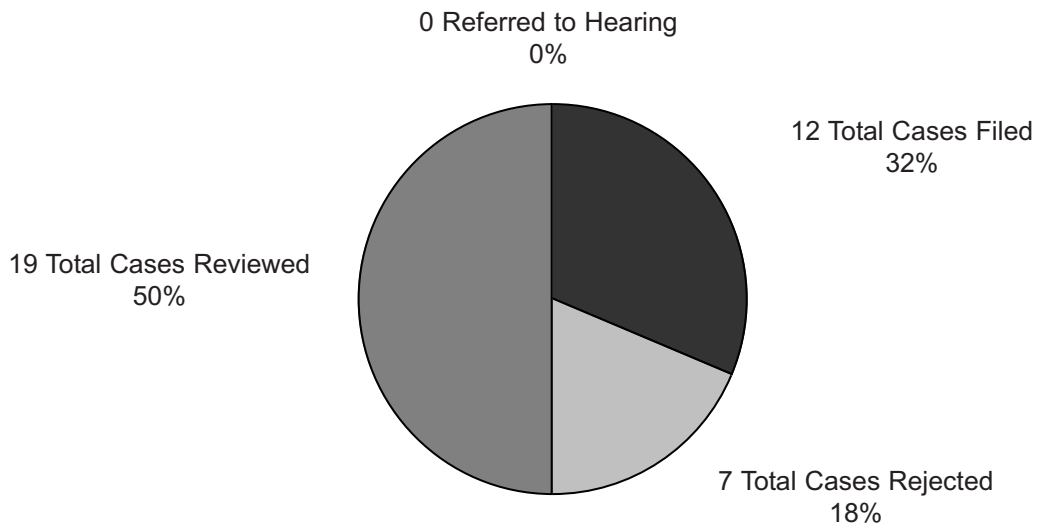
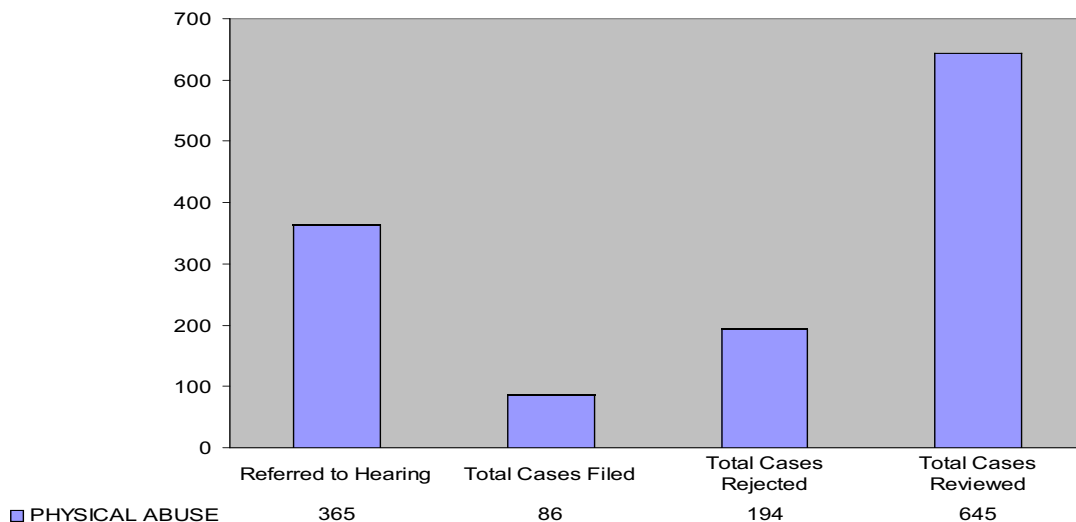


Figure 5

2007
SUMMARY OF PHYSICAL ABUSE CASES REVIEWED BY
THE LOS ANGELES CITY ATTORNEY'S OFFICE



**THE CHILD ADVOCATES OFFICE
CASA OF LOS ANGELES
AGENCY REPORT**





CASA OF LOS ANGELES

CASA of Los Angeles, also known as the Child Advocates Office, is a special volunteer program of the Superior Court. CASA stands for Court Appointed Special Advocate. The mission of the program is to improve the lives of children in the foster care system. CASA volunteers do this, one child at a time, by making sure these children receive the support and help to which they are entitled. Toward this end, CASA of Los Angeles recruits, trains, and supervises community volunteers who are appointed by Dependency Court judges to the cases of specific children to independently investigate the circumstances of the child's life, monitor compliance with court orders, facilitate the provision of court-ordered services, and advocate for the best interests of the child in court and in the community.

ABOUT THE CASA PROGRAM

CASA of Los Angeles is a member of the National Court Appointed Special Advocate Association, which sets standards for all CASA programs. There are CASA programs in all 50 states, Washington, D.C., and the U.S. Virgin Islands. Each state sets standards for its programs. In California, the legal rights and responsibilities of CASA programs and CASA volunteers are outlined primarily in Welfare & Institutions Code sections 100 through 109, and may be found in other sections of the Welfare & Institutions Code and in rule 5.655 of the California Rules of Court. The Judicial Council has oversight responsibility for monitoring California CASA programs for compliance with state standards. There are currently 39 programs representing 41 of California's 58 counties. CASA of Los Angeles was founded in 1978

by the Superior Court of Los Angeles County and is one of the oldest CASA programs in the United States.

CASA volunteers are supported in their work by qualified professional staff that includes an Executive Director, Assistant Director, 13 Program Supervisors, a Recruitment/ Training Coordinator, and five Program Assistants. The program's main office is located at Edelman Children's Court in Monterey Park; a satellite office is located at McCourtney Juvenile Justice Center in Lancaster.

CASA of Los Angeles is a program designed to bring to the court a community perspective about the needs of children. It is also a program dedicated from its inception to permanence for children. Welfare and Institutions Code section 104 specifically charges the CASA volunteer with:

- making an independent investigation of the circumstances surrounding a case, including interviewing and observing the child and other appropriate individuals, and reviewing appropriate records and reports;
- reporting the results of the investigation to the court; and
- following the directions and orders of the court and providing any other information specifically requested by the court.

Welfare & Institutions Code section 107 authorizes a CASA volunteer, upon presentation of his or her Court Appointment Order, to inspect and copy any records related to the child held by any agency, hospital, school, organization, division or department of the state, or any physician,



surgeon, nurse, other health care provider, psychologist, psychiatrist, police department, or mental health clinic, without the consent of the child or the child's parents.

While CASA volunteers work closely with other advocates for the children, such as attorneys and social workers, CASA investigations and reports to the court are independent and separate. CASA volunteers gather information from many sources, and are required to take an oath of confidentiality and may share information only with the court and parties to the case.

CASA volunteers are not permitted to provide direct services to the children for whom they are appointed, without authorization from the court. While it is not the role of a CASA volunteer to provide services that the Department of Children and Family Services is charged with providing, exceptions may be made when a child's situation sorely needs immediate action. A CASA may, therefore, request authorization from the court when a task involves such services as assessing a potential placement, transporting a child for an evaluation, or for court-ordered sibling visits, etc.

Cases of specific children are referred directly to the CASA program by Dependency Court judicial officers, often at the request of a child's attorney or social worker. All referrals for a CASA volunteer must be formally submitted on a referral form signed by the judicial officer hearing the case.

CASA volunteers are not assigned to be mentors for children, although, depending on the age and situation of the child, a CASA volunteer may fill such a role in the course of performing his or her advocacy duties.

Children served by CASA volunteers range in age from birth to 21 years of age, some of whom may have emotional, medical, or developmental disabilities. CASA volunteers are not appointed for a child when the program determines that appropriate services are being provided for the child, nor are they appointed to children in the Delinquency Court.

A CASA volunteer remains on a case until the advocacy issues have been resolved for the child. Cases may last from a few months to several years. Prospective volunteers are asked to make an initial commitment of one year to the program, however, approximately 95% of volunteers go beyond the one-year commitment, and many remain with the program for five years or longer.

TRAINING AND SUPERVISION

Prospective CASA volunteers are screened by means of a written application, criminal records background check, in-depth personal interviews by supervisory staff, and, if accepted for training, by observation of their participation throughout the training sessions. Those accepted for training are required to successfully complete 36 hours of in-class training before being sworn in as officers of the court by the Presiding Judge of Juvenile Court. The training curriculum includes:

- the effects of trauma on the developing child,
- the dynamics of abusive families,
- the Dependency Court process and laws,
- the social services and child welfare systems,
- mental health and educational advocacy,
- cultural awareness,



- roles and responsibilities of a CASA, and
- CASA court report writing.

CASA volunteers are also required to complete 12 hours of continuing education annually.

After completing training, the CASA volunteer is assigned to a case of a child or sibling group under the supervision of a professional Program Supervisor, who provides guidance, support and expertise to the CASA volunteer throughout the CASA volunteer's appointment. Program Supervisors maintain frequent contact with CASA volunteers under their supervision, and review and approve all court reports and any case related correspondence prepared by the CASA volunteer.

ADDITIONAL SERVICES

CASA serves children and youth with a variety of needs including developmental disabilities, severe emotional disturbances, and/or histories of psychiatric hospitalizations. Effective advocacy requires knowledge of the organic and non-organic challenges facing this vulnerable population, as well as the complex procedures involved in securing services and placements from the Department of Mental Health and/or Regional Centers. CASA of Los Angeles prepares volunteers for this work by providing specialized training and supervision.

CASAs are often involved in Educational Advocacy on behalf of their CASA child, and many CASAs have been appointed by the court as the Responsible Adult for Educational Purposes, also known as surrogate parents for educational purposes. These CASAs attend

the child's school meetings, monitor progress, initiate and participate in Individualized Educational Plans (IEPs), and work to ensure a child's educational needs are being met.

While the major focus of CASA of Los Angeles is its CASA program, some CASA volunteers help children as Children's Court Assistants (CCA). CCA volunteers explain the Court process, in age-appropriate language, to children waiting to go to Court for the first time. They speak with children in the Shelter Care Activity Area at Edelman Children's Court prior to their hearings, escort them to and from the courtrooms, and are available to assist any child who may need emotional support before or after a hearing. Their overall goal is to ease children's anxieties and be responsive to their needs when they attend Court hearings. In CY 2007, CCA volunteers donated 4,037 hours assisting 6,938 children attending hearings at the Children's Court.

FUNDING

CASA of Los Angeles is funded by a public/private partnership. It is a special program of the Juvenile Division of the California Superior Court of Los Angeles County and also receives funding from a private sector partner, Friends of CASA, a 501(c)(3) non-profit charitable organization. This partnership has been in effect since 1983. Over the years, contributions to Friends of CASA have allowed the CASA program to grow in order to meet the increasing number of children in foster care who need a CASA volunteer. Friends of CASA is located in the CASA of Los Angeles office at Edelman Children's Court in Monterey Park.



ABOUT THE CHILDREN

CASA of Los Angeles collects demographic information only on children specifically assigned a CASA volunteer by the court. CASA volunteers served 520 children in this capacity in CY 2007. (This number does not include the number of children served monthly by Children’s Court Assistant volunteers who assist groups of children on a day-to-day basis at the Children’s Court.)

Figure 1
AGE OF CHILDREN APPOINTED A CASA DURING 2007

AGE	TOTAL	PERCENTAGE
0-5	53	10%
6-11	170	33%
12-17	273	53%
18+	24	5%
TOTAL	520	100%

Figure 2
GENDER OF CHILDREN APPOINTED A CASA DURING 2007

GENDER	TOTAL	PERCENTAGE
Female	233	45%
Male	287	55%
TOTAL	520	100%

Figure 3
ETHNICITY OF CHILDREN APPOINTED A CASA DURING 2007

ETHNICITY	TOTAL	PERCENTAGE
African American	226	43%
Asian/Pacific Islander	13	3%
Hispanic/Latino	98	19%
Multi-Racial	83	16%
Native American	4	1%
Other	12	2%
White/Non-Lartino	84	16%
TOTAL	520	100%

Figure 4
CHILD STATUS AT THE TIME CASA RELIEVED FROM CASE DURING 2007

REASON	TOTAL	PERCENTAGE
602 Adjudication	2	1%
Adoption	17	12%
Aging Out	11	8%
Guardianship - Kin	10	7%
Guardianship - Non kin	3	2%
Long Term Foster Care - Kin	6	4%
Long Term Foster Care - Non kin	21	15%
Other	28	20%
Reunification	41	29%
TOTAL	139	100%

ABOUT THE VOLUNTEERS

During CY 2007, 353 volunteers served with the CASA of Los Angeles program. The volunteers are responsible adults who must be at least 21 years of age, have the time flexibility to attend training, court hearings, case conferences, treatment team meetings and school conferences, and be able to maintain frequent face-to-face visits with the children to whom they are appointed.

Prospective volunteers are fingerprinted and must clear a criminal records background check. They must also be willing to drive, show proof of auto insurance coverage, and have a valid California driver’s license.



Figure 5

**AGE OF CASA VOLUNTEERS
DURING 2007**

AGE	TOTAL	PERCENTAGE
21-29	21	6%
30-39	39	11%
40-49	67	19%
50-59	73	21%
60+	153	43%
TOTAL	353	100%

Figure 8

**EMPLOYMENT STATUS OF
CASA VOLUNTEERS DURING 2007**

STATUS	TOTAL	PERCENTAGE
Full-Time	117	33%
Part-Time	48	14%
Retired	106	30%
Self-Employed	11	3%
Student	1	0%
Other	70	20%
TOTAL	353	100%

Figure 6

**GENDER OF CASA VOLUNTEERS
DURING 2007**

GENDER	TOTAL	PERCENTAGE
Female	289	84%
Male	64	18%
TOTAL	353	100%

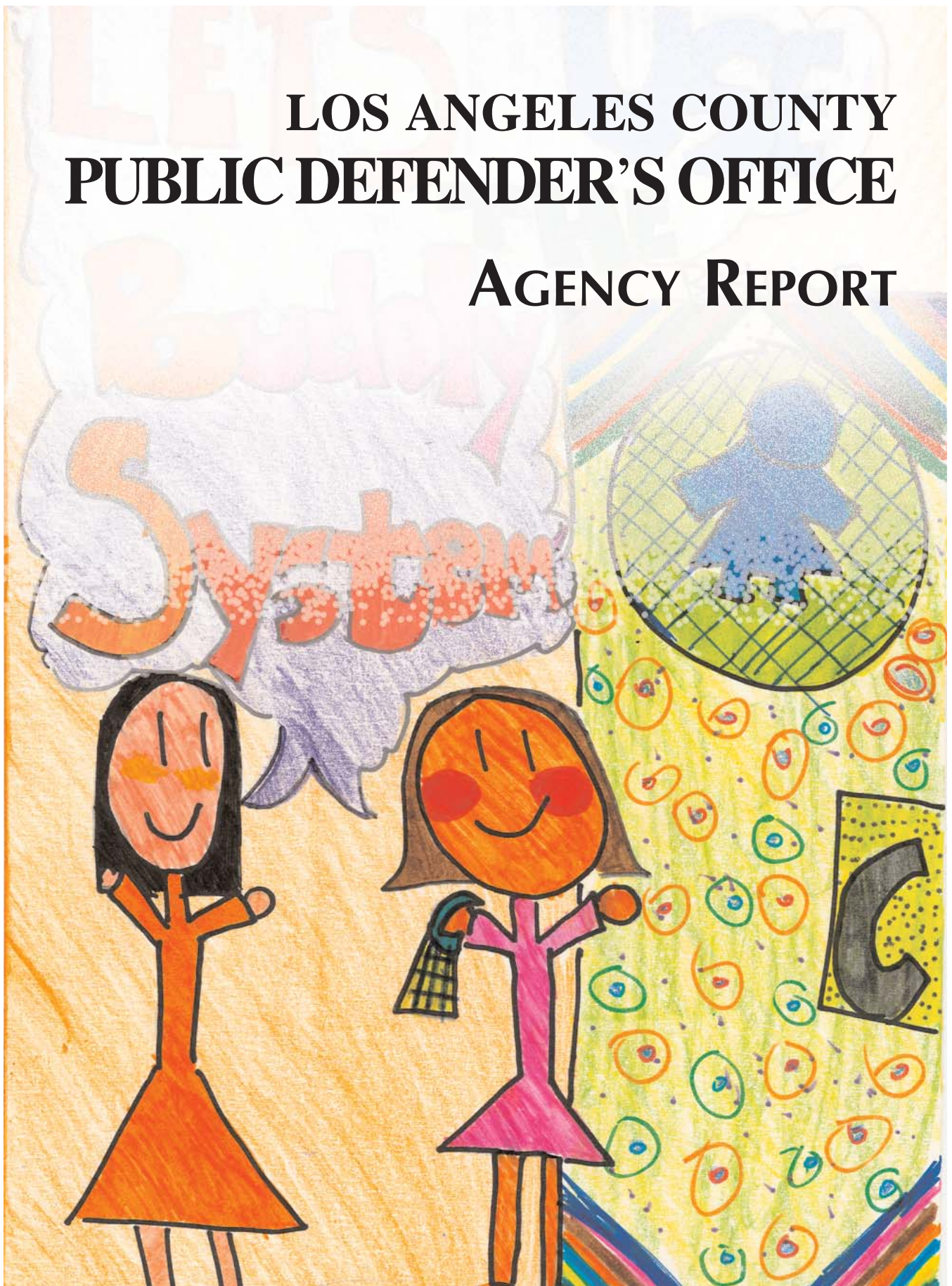
Figure 7

**ETHNICITY OF CASA VOLUNTEERS
DURING 2007**

ETHNICITY	TOTAL	PERCENTAGE
African American	46	13%
Asian/Pacific Islander	12	3%
Hispanic/Latino	27	8%
Multi Racial	24	7%
Other	38	11%
White/Non-Latino	206	58%
TOTAL	353	100%

LOS ANGELES COUNTY PUBLIC DEFENDER'S OFFICE

AGENCY REPORT





THE OFFICE OF THE PUBLIC DEFENDER

The Office of the Public Defender provides legal representation in the courts of Los Angeles County to indigent persons charged with criminal offenses. Established in 1914, the Los Angeles County Public Defender's Office is both the oldest and the largest full service local governmental defender in the United States, with offices in 39 separate locations throughout the County. Currently, under the administration of Chief Public Defender, Michael P. Judge, the Public Defender employs over 1,100 staff members, comprised of approximately 730 budgeted Deputy Public Defender positions as well as 34 additional managing attorneys, supported by paralegals, psychiatric social workers, investigators, secretaries and clerical staff. The Public Defender represents clients:

- 1) charged in felony and misdemeanor offenses;
- 2) charged in juvenile delinquency cases;
- 3) charged in sexually violent predator cases;
- 4) facing mental health commitments;
- 5) facing civil contempt matters;
- 6) in pre-judgment appeals and writs; and
- 7) in post-conviction matters including areas of police misconduct and intimate partner battering and its effects.

In fiscal year 2007-2008, the Public Defender represented clients in approximately 150,000 felony-related proceedings; 345,000 misdemeanor-related proceedings; and 63,000 juvenile clients in juvenile delinquency proceedings.

While continuing to provide the highest quality legal representation to clients in a cost effective manner, the Office of the Public Defender also devotes its resources to facilitate

broad justice system improvements for all of its clients. This includes programs and initiatives designed to produce positive lifestyle outcomes for children, their families, and the communities in which they reside. The Public Defender actively participates, often in a leadership role, in numerous criminal justice inter-agency committees and projects designed to focus on the issues faced by communities at risk. Such inter-agency collaborations craft creative solutions to effectively resolve those issues in a manner that addresses the root causes of criminal behavior. The Public Defender recognizes that effective advocacy can only occur in the context of understanding the unique needs of the individual client, including the developmental, educational, psychological, and sociological history of each individual represented.

SPECIAL PROJECTS OF THE PUBLIC DEFENDER

WOMEN'S RE-ENTRY COURT

Many women cycle daily through the doors of the Los Angeles County criminal justice system, the county jails and state prisons and then back into the community without the appropriate services to address the underlying issues that brought them into the system in the first place. The complex needs of women – surviving sexual and physical abuse, domestic violence, severe trauma, and chronic addiction, have been well documented. Many of these women enter the criminal justice system and over sixty percent face drug and property crimes. This rapid influx of women into the criminal justice system has resulted in an increased demand for appropriate evidence-based, gender responsive programs for women in lieu of incarceration and/or upon parole. These programs are designed to break the cycle of substance abuse and crime and to



positively impact the children of women offenders who are at high risk of continuing the intergenerational patterns of drug abuse, criminal behaviors, and neglectful parenting. The pathways to crime for women are different than for men: a majority of women offenders have mental health problems and four in ten were physically or sexually abused before age 18; 64% of women imprisoned in California are mothers and nearly one-third have children under the age of six; half were living with their children in the month prior to their arrest. (Petersilia, J. (2006). *Understanding California Corrections: A Policy Research Program Report*. California Policy Research Center, 1-88.) Few initiatives have focused specifically on treatment and services for women offenders.

The Public Defender's Office has played a leadership role from concept to implementation of the Women's Re-entry Court (WRC). This first in California, second in the country prison alternative pilot, combines individually designed wraparound services in a residential facility with intensive judicial supervision, for women parolees with or without children, who face a subsequent felony charge and an imminent state prison commitment. The WRC is part of a long-term strategy to enhance public safety by addressing and treating underlying substance abuse and mental health issues, providing education, job preparation and housing stability while promoting individual accountability, to promote the successful return of formerly incarcerated individuals back into local communities.

The primary objective of the WRC prison alternative pilot is to develop and implement an early assessment of mental health and substance abuse problems among women parolees in Los Angeles County who are under the jurisdiction of the Superior Court because they are facing a new non-violent,

non-serious felony charge; or are otherwise simultaneously on parole and probation. The WRC pilot is voluntary, and only candidates facing an imminent state prison commitment are considered for the program. The WRC prison alternative pilot consists of six months of residential treatment at Prototypes Women's Center in Pomona followed by six months of Prototypes outpatient services. The Re-entry Court judge oversees this plan by monitoring the women's progress and ordering them back to court for monthly progress reports.

The WRC prison alternative pilot represents a multi-agency collaborative effort of the Los Angeles County Countywide Criminal Justice Coordinating Committee (CCJCC), Department of Public Health, Alcohol and Drug Program Administration, Los Angeles Superior Court, Los Angeles County Public Defender, District Attorney, Probation, Sheriff, Department of Mental Health, California Department of Corrections and Rehabilitation (CDCR), PROTOTYPES, Goodwill Southern California, UCLA Integrated Substance Abuse Programs (UCLA ISAP), and the USC Annenberg Institute for Justice and Journalism. Funding from a CDCR Intergovernmental Partnership Grant (IPG) funding covers 25 women parolees per year (75 total), who subsequently face new non-violent, non-serious felony charges in Los Angeles County. The CDCR IGP funding was released January 2007, and formal operations commenced in May 2007 for a two-and-a-half year period.

The 25 WRC women participants are chosen annually over the course of each year by members of the WRC Team, including representatives from the Public Defender, District Attorney, Probation, CDCR Division of Adult Parole; and upon approval of the Honorable Michael Tynan, who presides over the WRC and utilizes a Drug Court model approach, combining intensive supervision,



mandatory drug testing, positive reinforcement, appropriate sanctions, and court-supervised treatment to address the issues of addiction and criminal activity. The WRC also accepts women probationers facing an imminent state prison commitment, if other funding streams can accommodate the participant on a first-come, first-served basis.

Following acceptance into the WRC, service provider Prototypes conducts an in-depth needs based assessment and designs specific and appropriate wrap-around services including the following: women-focused, evidence based substance abuse treatment, mental health care, health and wellness education, education and employment training/ placement, legal services, mentorship programs, financial management support, child support and family reunification services, domestic violence education and domestic violence/ trauma counseling, transportation and child care, and caseworker support. Women may bring up to two children eight years old and younger with them into the residential treatment program. Child development specialists work directly with these children, thereby positively impacting the next generation.

UCLA ISAP is currently conducting the evaluation, the results of which are not yet available. However, project statistics demonstrate the following: since formal operations began in May 2007 through June 30, 2008, 88 women have entered the program; of the 88, only 8 (or 9%) have been terminated from the program and sent to prison. One hundred percent of those who entered the program have received substance abuse treatment, job development/ placement services and most receive group therapy for co-occurring disorders. Two women have graduated. In addition, four women have a total of six children in the program and five are pregnant and will deliver at Prototypes.

Eight women have successfully reunited with their children and six are currently working toward reunification. Cost savings will be determined by the evaluation, however, to date, the acceptance of 88 women into the program has saved 155 years of state prison custody time and saving the \$46,000 a year to incarcerate a person in state prison.

PROJECT S.T.A.R. (STRIVING TOGETHER TO ACHIEVE RECOVERY)

In 2007, the Los Angeles County Domestic Violence Council created the Incarcerated Survivor Defendant Task Force, to address the needs of an underserved community of domestic violence victims/survivors, namely those who find themselves charged with and convicted of crimes often times related to substance abuse and mental health disorders. The Public Defender's representative on the Domestic Violence Council chairs the Incarcerated Survivors Task Force.

In May 1991, the Los Angeles County Commission for Women, along with representatives from the Public Defender's Office, Superior Court, Sheriff's Department, Los Angeles Police Department, District Attorney's Office, Probation Department, Immigration and Naturalization Service, and community service providers conducted a survey and identified a correlation between the number of women engaged in prostitution who were also survivors of domestic abuse and/or child abuse. The study further found that the overwhelming number were mothers of dependent children, most of whom were either in foster care or supported by some other County program. Most of those women repeated their criminal behavior with non-serious or non-violent felonies. In its Year 2000 report, the Commission recommended diverting eligible and suitable women out of the criminal justice system and into appropriate



wraparound services in order to stop the cycle of violence for incarcerated survivors of domestic violence who had current charges or past convictions for prostitution. However, no programs were implemented due to a lack of funding.

The Incarcerated Survivors Task Force worked on a collaborative basis for over a year to create a program designed as a prison alternative for women arrested on a new felony who have recently been victims of intimate partners battering and who have a background, either charged, uncharged, or self-reported, in prostitution. On behalf of the Incarcerated Survivors Task Force, PROTOTYPES applied for and received a five-year federal grant from the Substance Abuse and Mental Health Services Administration (SAMHSA) to fund Project S.T.A.R. (Striving Together to Achieve Recovery). With key involvement from the Public Defender, Project S.T.A.R. represents an innovative collaboration with PROTOTYPES S.T.A.R. House and representatives from many county agencies and domestic violence service providers.

Most of the women served by Project S.T.A.R. are facing non-violent, non-serious felony charges and incarcerated at the time of referral by the Los Angeles County Public Defender's Office, and are motivated to accept treatment and services from PROTOTYPES as a prison alternative. The program is voluntary. Project S.T.A.R. participants often present with co-occurring disorders, of substance abuse along with at least one mental health disorder. Participants may bring up to two children up to the age of 8 into the residential program.

Project S.T.A.R. provides eligible domestic violence survivors with sex work histories with early assessment of trauma, substance abuse and mental health disorders and appropriate residential treatment and wraparound services. Women admitted to the program reside, along

with their children, at PROTOTYPES S.T.A.R. House for six months while participating in treatment for substance abuse, mental health and/or domestic violence issues including parenting. The residential treatment component incorporates children's/family strengthening services with a special emphasis on family reunification and collaboration with DCFS where appropriate.

This project addresses the following emphasis areas:

- Legal and criminal justice issues relating to family violence
- Substance abuse and family violence
- New approaches to intervention, prevention, and treatment for all aspects of family violence
- Other topics related to aspects of family violence and child abuse and neglect

The Project S.T.A.R. Steering Committee, an active advisory board is committed to promoting the successful reintegration of all program participants and works collaboratively across disciplines within the criminal justice system to ensure a seamless process of referral, screening and intake. The Steering Committee consists of representatives from the Public Defender, Domestic Violence Council, Prototypes DV Programs, District Attorney, Probation Department, Sheriff's Department, Department of Mental Health, Harriet Buhai Center for family law, DCFS, and Friends Outside in LA County. The Measurement Group will be conducting an evaluation of the pilot which may become a best practice model that can be replicated.

From the beginning of formal operations in March 2008 to June 30, 2008, nine women have been accepted into Project S.T.A.R. Eight others were referred to the project.



LOS ANGELES COUNTY PERINATAL MENTAL HEALTH TASK FORCE

Approximately fifteen percent of all women will experience mood disorders related to pregnancy or following the birth of a child. In 2005, 150,377 live births occurred in Los Angeles County facilities (Source: California Department of Health Services, Center for Health Statistics, 2008). Based on national statistics, perinatal mood disorders affect approximately fifteen percent of all women, regardless of race, ethnicity, culture or socio-economic status. Over 22,000 women in Los Angeles County alone experience clinical perinatal mood disorders each year. Compromised mental health of the mother negatively affects the entire family. Left untreated, these mood disorders experienced by pregnant and new mothers will affect the long-term development of babies, toddlers, the family and can lead to chronic depression in the mother. The best way to insure that babies and children thrive is to focus attention on maternal mental health.

Since February 2007, the Public Defender's Office has played a leadership role in forming and chairing the Los Angeles County Perinatal Mental Health Task Force which seeks to establish collaborative, community-driven approaches to improving policies and practices that address maternal mental health and reduce the prevalence and severity of prenatal and postpartum depression in Los Angeles County. The Perinatal Mental Health Task Force is a network of over 30 individuals representing more than 15 public and private agencies involved in outreach, screening, and treatment services for prenatal and postpartum depression and other mood disorders, along with community leaders, research partners, and advocates for mothers, infants, and families.

Task Force members include representatives from the Public Defender; Postpartum Support

International (PSI); Department of Public Health, Maternal Child Adolescent Health Programs, Department of Mental Health, Prenatal to Five Program; Zero to Three; LA Best Babies Network; First 5 LA; Perinatal Advisory Council/Leadership Advocacy Consultation (PAC/LAC); LA Care; Jewish Family Service Center; Didi Hirsch Community Mental Health Centers; Health Services Research Center, Semel Institute, UCLA School of Medicine; UCLA Neuropsychiatric Institute; UCLA School of Public Affairs; USC Clinical Faculty; Breastfeeding Task Force of Greater Los Angeles; Partners for Quality/Program for Infant Toddler Care; PHFE-WIC program; LAUSD Mental Health Services; and Tarzana Treatment Center.

Since its inception, the Perinatal Mental Health Task Force has influenced screening practices in health systems and public health programs, contributed to increased trainings and offerings on perinatal mood disorders for health care providers, helped shape the planning process for the Mental Health Services Act's Prevention and Early Intervention initiative (MHSA/PEI), and has jointly planned with Los Angeles Best Babies Network a 5-year policy initiative to address perinatal mood disorders with funding awarded by First 5 LA.

The Perinatal Mental Health Task Force works together with PSI, which is a Task Force partner and a nationwide volunteer organization that assists consumers suffering from perinatal mood disorders, trains health providers, and advocates for responsive public policies. The Perinatal Task Force is striving to identify gaps and unmet needs, to mobilize and align resources, to implement systematic and coordinated approaches and to disseminate knowledge and findings that are aimed at:

- Raising awareness and removing stigmas associated with perinatal mood disorders



- Providing access to screening, effective treatment, and coordinated care for perinatal mood disorders
- Training health professionals and improving clinical practice
- Supporting affected individuals and their families
- Improving the coordination and functioning of systems of care
- Addressing the unique needs of underserved and vulnerable populations with a particular focus on Medi-Cal recipients and low income women as well as high risk populations including mothers affected by criminal court involvement, substance abuse, domestic violence, and cultural dislocation. The Task Force recognizes that perinatal mood disorders occur with greater frequency in the population of women and girls who are substance abusers and domestic violence survivors. This population is often involved in the criminal justice system and less likely to access pre-natal as well as postpartum services in general.
- Establishing responsive and effective policies to address and integrate services addressing perinatal mood disorders.

**HABEAS ADVISORY PROJECT
ASSISTING INCARCERATED SURVIVORS OF
DOMESTIC VIOLENCE**

The Public Defender is an active member of the California Habeas Project Advisory Committee. The California Habeas Project is a statewide collaboration implementing a unique California law (Penal Code §1473.5) which allows incarcerated survivors of intimate partner battering to challenge their convictions in court if expert evidence on battering and its effects was not received in evidence during

the original trial proceedings. The Public Defender represents a number of clients in this regard. The Habeas Project also partners with volunteer legal teams to assist eligible abuse survivors to petition the court for a new trial or reduced sentence based upon evidence that should have been considered at their trial or during plea negotiations. Collaborating organizations of the Habeas Project include the California Women's Law Center, the University of Southern California Law School's Post-Conviction Justice Project, the Los Angeles County Public Defender's Office, Legal Services for Prisoner's with Children, and Free Battered Women. The Los Angeles County Public Defender's Office is the only governmental agency partner of the Habeas Project.

Since the habeas corpus law (Penal Code §1473.5) was enacted, approximately thirty women survivors of domestic violence have been released from state prison through successful habeas petitions, parole proceedings, or other legal avenues pursued by attorneys assigned through the Habeas Project. 11 domestic violence victims' petitions have been granted under PC § 1473.5. In 10 cases, the domestic violence victim has been released from prison. In the 11th case, the prisoner was granted a new trial and her conviction was reduced from 1st degree murder to 2nd degree murder.

The Public Defender also staffs Domestic Violence Courts in Long Beach and Rio Hondo which focus on ensuring treatment and accountability in misdemeanor cases involving domestic violence in order to break the cycle of violence.

CO-OCCURRING DISORDERS COURT

In addition, the Public Defender was a key collaborative partner in the creation of the Co-Occurring Disorders Court ("CODC").



Public Defender representatives have attended Mental Health Services Act Delegate's Meetings since early 2005 and were instrumental in voicing the need for such a court. The Public Defender is represented on the CODC Standing Committee. The mission of the Los Angeles County CODC Program is to provide both mental health and substance abuse treatment to the non-violent mentally ill defendant who recognizes his/her problem and voluntarily chooses to enter into a contract with a court-supervised co-occurring disorders treatment program. They are expected to participate in all phases of treatment with the hope of improving his/her quality of life, clinical functioning and possibly further benefitting by the reduction and/or dismissal of criminal charges.

Co-Occurring Courts represent a non-traditional approach to criminal offenders who are addicted to drugs and suffer from mental illness. Rather than focusing only on the crimes they commit and the punishments they receive, Co-Occurring Courts also attempt to address some of their underlying problems. The Los Angeles County CODC, which held its first session in April 2007, is built upon a unique partnership between the criminal justice system, drug treatment community and the mental health community which structures treatment intervention around the authority and personal involvement of a single CODC Judge. CODCs are also dependent upon the creation of a non-adversarial courtroom atmosphere where a single bench officer and a dedicated team of court officers and staff work together toward the common goals of breaking the cycle of drug abuse, criminal behavior and promoting the stabilization and functioning of mental health symptoms.

The Public Defender screens clients for legal criteria eligibility and represents approximately 90 percent of all participants while the Department of Mental Health screens

for the clinical criteria. Since formal operations launched in April 2007 through fiscal year 2007-08, 289 candidates have been screened for CODC; and 48 have enrolled and approximately 30 are participating in CODC with an additional ten clients pending enrollment. CODC has maintained an approximate 62% retention rate. A number of candidates who do not participate in CODC are reconnected to programs with which they were previously affiliated. CODC is a voluntary program, and some participants request to be returned to Proposition 36 court.

HOMELESS ALTERNATIVE TO LIVING ON THE STREETS ("HALO")

During fiscal year 2006-2007, the Public Defender and Los Angeles City Attorney began collaborating to address the significant percentage of misdemeanor clients who are arrested in the downtown skid row area and arraigned at the Bauchet Street Arraignment Court with the goal of diverting these individuals out of the criminal justice system. These clients face charges connected to drug and alcohol addiction, mental illness, developmental disability, homelessness, abuse or trauma. Through the collaboration, the City Attorney's Office offers pre-plea or post-plea diversion on a case-by-case basis when the individual arrested in the skid row area is charged with a misdemeanor crime that is connected to mental illness, developmental disability or trauma and who is determined by the Public Defender's attorneys and social workers to be suitable for wraparound services that focus on reentry. Such candidates include individuals facing new charges (pre-plea diversion candidates) as well as individuals facing probation violations with or without new charges attached. During fiscal year 2007-08, approximately 50 Public Defender



clients were approved for HALO participation by the City Attorney.

Together with specially assigned Deputy Public Defenders, two Public Defender licensed clinical social workers assigned to Central misdemeanor trials and Bauchet Street arraignment identify and screen new clients. These clients face new misdemeanor charges connected to homelessness, substance abuse, mental illness, disabilities, abuse or past trauma, or are on Proposition 36 probation, or other misdemeanor/felony probation. Screenings include individual needs assessments conducted by the licensed clinical social workers incorporating the client's prior arrest and conviction record as well as prior mental health history.

When appropriate clients are deemed eligible and suitable for participation in the pilot project, the City Attorney and the Public Defender jointly contact the relevant bench officer, prosecutor as well as parole and probation officer where relevant to ensure that the individual remains on Proposition 36 probation. Public Defender social workers and designated Deputy Public Defenders collaborate with community based organizations, law enforcement and other governmental agencies such as the Department of Mental Health to assist in connecting eligible clients to supportive services on an expedited basis and for those in custody upon release, including mental health treatment, substance abuse treatment, affordable housing, educational opportunities, and other transitional services. This includes training such as literacy labs, cognitive skills development, life skills and job skills; family reunification services and vocational training and support.

Other involved agencies include the Los Angeles Police Department; Los Angeles County Sheriff's Department; Los Angeles

County Department of Mental Health; Mayor's Office; City of Los Angeles and Business Improvement District.

PUBLIC INTEGRITY ASSURANCE SECTION AND INNOCENCE PROJECT

The Public Integrity Assurance Section (PIAS Unit) of the Public Defender's Office focuses on the investigation and litigation of wrongful convictions primarily resulting from police misconduct. PIAS Unit attorneys also handle post-conviction cases of former clients in conjunction with the Habeas Project described above. In the wake of the Rampart scandal, PIAS was instrumental in preparing numerous post-sentencing motions which included petitions for writs of habeas corpus and motions to vacate based on police misconduct and wrongful conviction of innocent clients many of which were granted. The Innocence Project seeks to exonerate factually innocent clients who were convicted, especially where DNA evidence plays a role in their exoneration.

HOMELESS COURT

Homeless Court is a collaborative project between the Public Defender, District Attorney, Los Angeles County Superior Court, Los Angeles City Attorney, and Public Counsel. Homeless Court is a mechanism whereby formerly homeless participants who complete a requisite program designed to address the issues contributing to their homelessness are able to secure dismissal of outstanding 'quality of life' infraction and misdemeanor warrants. The purpose of this court is to avoid incarceration for old outstanding matters that might interfere with or erase the progress the participant has made. During fiscal year 2007-08, Homeless Court received funding from the Board of Supervisors and is now



staffed by dedicated personnel from Public Counsel and the Los Angeles Superior Court Clerk's Office. Transportation, housing and food vouchers have been added to this program to provide more holistic services for the participants.

DRUG TREATMENT COURTS AND PROPOSITION 36 TREATMENT COURTS

The Public Defender was also a leader in creating Drug Court in 1994. Drug Court is a collaborative program involving the Superior Court, Public Defender, District Attorney and drug treatment providers to allow drug offenders with minimal criminal records to participate in a closely supervised drug treatment program instead of jail. Because of the tremendous success of this program that began in downtown Los Angeles, fourteen adult Drug Courts and three Juvenile Drug Courts now operate in Los Angeles County. Additionally, in 1998, a second collaborative effort resulted in the creation of the Sentenced Offender's Drug Court, a highly successful program involving more intensive and jail based therapeutic treatment as an alternative to prison for drug addicted offenders including parolees subsequently charged with new crimes.

Proposition 36 Courts are the result of the statewide initiative mandating treatment for eligible drug offenders. The Public Defender has taken a leadership role in promoting this treatment opportunity in the most effective manner. Through collaboration with community partners such as Volunteers of America and with cooperation from the Sheriff's Department and the Superior Court, the Public Defender created a transportation project to deliver in-custody clients directly to treatment. The Public Defender has also successfully lobbied for an on-site Assessment Center in the busy downtown court, brought Social Services directly to the courtroom, and partnered with

Public Counsel to address clients' civil legal issues often connected to homelessness.

WESTFIELD CUSTOMER SERVICE LEARNING CENTER PROJECT

The Los Angeles NAACP, Westfield Corporation and National Retail Federation (NRF) partner to help young people, primarily in the 18-25 year age group to obtain jobs in the retail and service industries, through the Customer Service Learning Center, located at the Fox Hills Mall in Culver City, California. The Customer Service Learning Center is the twentieth center of its kind in the United States and the only NRF Foundation affiliated Skills Center in Southern California. Nationwide, there are 21 Skills Centers, and over 9,000 potential retail employees have found jobs through Skills Center placements. More than 680 companies in the retail and service industries nationwide have participated in the programs. The Public Defender's Office piloted a collaborative venture in July 2006 to identify appropriate candidates among the Department's clientele for participation in the Customer Service Learning Center program.

The Customer Service Learning Center offers a three month, twelve session training program. Upon completion of the program, participants earn a certificate of completion and an opportunity to pass NRF certification. A network of employers give consideration to applicants who have earned the certificate of completion including Fox Hills Mall employers, hotels in the LAX area, employers located at the Bridge at the Howard Hughes Center, businesses in the Crenshaw district including the Coliseum Center and Baldwin Plaza as well as Borders bookstore and CVS pharmacies.

The goal of this collaborative venture is to significantly increase employment opportunities for Public Defender clients who complete the Customer Service Learning



Center program and earn a certificate. Understanding that prior convictions often present barriers to employment, Westfield has agreed to screen for potential employers who will be the most receptive to working with formerly incarcerated individuals. The Department is involved not only in conducting initial screenings of potential program candidates, but also in monitoring the employment progress of clients who complete the program. Since the inception of the Public Defender's pilot program in July 2006, 28 clients have participated in the training program, and 13 have graduated overall, with ten graduating in fiscal year 2007-2008.

THE JUVENILE JUSTICE SYSTEM

Within the Juvenile Justice system, the Office of the Public Defender continues to be proactive and successful not only in providing quality representation addressing the liberty interests of children charged in juvenile delinquency proceedings, but also by accomplishing a broader agenda to better the lives of the children and their families who become subject to the juvenile court system. The Los Angeles County Public Defender's Juvenile Division represents over 63,000 juvenile clients in juvenile delinquency proceedings each year. Many children enter the Juvenile Justice system with serious, long standing, and unaddressed educational and psychosocial problems that significantly contribute to their troublesome behavior. The underlying issues are mental health and substance abuse problems, cognitive learning disabilities, developmental disabilities, and the results of sexual abuse, physical abuse and neglect.

According to the National Center for Mental Health and Juvenile Justice, the prevalence of mental disorders among youth in the juvenile justice system is two to three

times higher than among youth in the general population. Some studies suggest the rate of such disabling conditions among incarcerated children might be as high as 70 percent. (Otto, R. et al., (1992) Prevalence of Mental Disorders Among Youth in the Criminal Justice System.) According to the Juvenile Court Judges of California, 50 percent of all children in the juvenile delinquency system have undetected learning disabilities. Learning disabilities affect cognitive systems related to perception, attention, language, and the symbolization abilities required to learn to read and/or carry out mathematical calculations in an automatic manner. Clearly, youth with disabilities are over represented in the Juvenile Justice system. One study from the National Center on Education, Disability and Juvenile Justice noted that the prevalence of youth with disabilities is three to five times greater in juvenile corrections than in public school populations.

Accordingly, many children in the Juvenile Justice System including many of those detained in juvenile halls and camps suffer from significant learning, developmental, emotional and behavioral disabilities that impede their ability to fully benefit from mainstream educational services. Many of these children are covered by state and federal special education laws that mandate a continuum of educational program options for special education students. For example, AB 490 effective January 1, 2004, seeks to ensure educational rights and stability for foster youth. Through AB 490, the Legislature declared its intent to ensure that all pupils in foster care and those who are homeless as defined by the federal McKinney-Vento Homeless Assistance Act (42 U.S.C. Sec. 11301et seq.) have a meaningful opportunity to meet the same rigorous state pupil academic achievement standards to which all pupils are held. Similar to the approach already



utilized by the Public Defender, AB 490 places high emphasis on promoting educational advancement and stability by holding specific agencies accountable to maintain stable school placements and to ensure that each pupil is placed in the least restrictive educational programs and has access to the academic resources, services, extracurricular and enrichment activities that are available to all pupils.

Unfortunately, many of these disabilities are not diagnosed until these children appear in the Juvenile Justice system, and even then, all too often the juvenile delinquency system focuses only on the specific behavior or circumstances that bring delinquent children to the attention of law enforcement and the courts. For any number of reasons, the system failed to pay sufficient attention to the serious underlying issues that often lead children into juvenile court charged with criminal or status offenses. A November 2004 White Paper prepared by FIGHT CRIME: INVEST IN KIDS California, a bipartisan, anti-crime organization of over 300 California sheriffs, police chiefs, district attorneys, and victims of violence noted that at least 80% of youthful offenders have a mental disorder and that at least 20% of youthful offenders suffer from serious disorders such as schizophrenia, major depression, and bipolar disorder; furthermore, over 50% of youthful offenders have dual diagnoses (i.e., more than one mental disorder, including learning and substance disorders).

JUVENILE ALTERNATIVE DEFENSE EFFORT

Pursuant to the direction of Public Defender Michael P. Judge beginning in 1999, the Public Defender's office initiated an innovative and comprehensive plan known as the Juvenile Alternative Defense Effort (JADE). JADE is designed to bring

critically needed services to the children in juvenile delinquency courts and consists of two components: the Client Assessment Recommendation Evaluation (CARE) Project and the Post Disposition Program.

The holistic advocacy approach already embodied by and practiced in the Public Defender's Office was recognized through the adoption of Rule 1479 of the California Rules of Court on July 1, 2004. Rule 1479 suggests guidelines for all juvenile court defense attorneys to follow for effective advocacy that acknowledges the dual role which the Public Defender's Office had adopted: one of defending against charges filed in the petition and determining whether the child is appropriately in the juvenile delinquency court as well as advocating on behalf of the child to ensure that the child receives appropriate care, treatment, and guidance especially in the areas of education and mental health.

CARE PROJECT – PREDISPOSITION COMPONENT

2008 CALIFORNIA COUNCIL ON MENTALLY ILL OFFENDERS (COMIO) "BEST PRACTICES" AWARD

The California Council on Mentally Ill Offenders (COMIO) was created by the Legislature in 2001 "to investigate and promote cost-effective approaches to meeting the long-term needs of adults and juveniles with mental disorders who are likely to become offenders or who have a history of offending". According to COMIO Chairperson and CDCR Secretary James E. Tilton, "The Council's 2008 Best Practices awards are an excellent example of how we can appreciate and recognize the 'best of the best' approaches throughout California in effectively serving the needs of the mentally ill offender.



Practitioners at the state and local levels can learn much from these exemplary programs and seek to replicate them". In 2008, five COMIO Best Practices Awards were presented to adult and juvenile programs statewide. The Public Defender's CARE Project was the only non-mental health court program and one of only two juvenile programs to receive an award.

Since its inception in 1999, the Juvenile Division of the Public Defender's Office has implemented its CARE Project which focuses on early intervention with children in delinquency court by addressing the cluster of underlying causes of delinquent behavior such as mental illness, mental retardation, developmental disabilities, learning disabilities, emotional disturbances and trauma. It is a child advocacy model that is non-traditional in its vision and approach. The CARE Project provides a model continuum of legal representation that incorporates attention to the unaddressed psychosocial and educational needs of children in the Juvenile Justice system while also emphasizing early intervention and accountability of both the child involved and the agencies collectively responsible for safeguarding the child's interests.

Currently through the CARE Project, Los Angeles County Deputy Public Defenders collaborate with a multi-disciplinary team of psychiatric social workers, mental health professionals, resource attorneys and other clinicians from the earliest stage of the juvenile delinquency proceedings through disposition. Currently the Public Defender CARE Project employs sixteen psychiatric social workers and seven resource attorneys. The psychiatric social workers prepare an assessment of a juvenile client to determine the child's special needs whether developmental, emotional, or psychological. Based on the assessment, an effective and individualized treatment plan is

created to address the issues that put youth at risk for delinquent behavior and aims to significantly reduce the likelihood of recidivism. The psychiatric social workers also provide consultation services which include early intervention to identify needed services as well as client support during the court process, advocacy with school systems and recommendations for disposition plans in difficult cases.

The Public Defender resource attorneys advocate on behalf of juvenile clients to assure accountability by various outside agencies that are obligated to provide services to address the child's educational and mental health needs. In reviewing school and mental health records and appearing at administrative hearings before schools and the regional centers, the attorneys work to ensure that children receive appropriate special education services in the school districts and that the Regional Center system accepts eligible clients and provides needed services to the children. The success rate in obtaining services previously denied both by schools and the Regional Center system has been very high. In fiscal year 2007-2008, the Public Defender's Office provided Regional Center assistance to 122 children through the CARE Project.

The Public Defender's office recognizes that traditional representation for these clients similar to that normally provided to adult clients is no safeguard against recidivism if other resources are not channeled toward those children to assist them in dealing with the many other challenges and obstacles they face outside of the courtroom; hence, the advocacy of Public Defender staff on behalf of children in the Juvenile Justice system is not viewed purely in a legal context. The Public Defender adheres to the philosophy that effective child advocacy must encompass



a holistic approach individually tailored to the particular needs of each unique client.

Under the pre-disposition component of the Public Defender CARE Project with funding from the Juvenile Accountability Block Grant (JABG), two supervising psychiatric social workers, fourteen psychiatric social workers, and seven resource attorneys operate in ten juvenile branch offices of the Public Defender. Deputy Public Defenders refer cases to the CARE Project. Referrals are for either Extended Services or Brief Services. Brief services are those which can be completed on the same day the request for services was made. Extended services extend beyond the date of the request for services. The referrals involve a variety of consultation services including: 1) psychosocial and educational assessments; 2) early intervention to identify requisite services; 3) referrals to community resources which include substance abuse services (such as Alcoholics Anonymous-AA, Narcotics Anonymous-NA, after school activities such as the YMCA and parenting classes); 4) inter-agency advocacy that triggers Department of Mental Health, Regional Center and special education assistance; 5) client and family support during the court process; and 6) recommendations to the court for disposition plans and conditions of probation in difficult cases.

Psychosocial assessments often help Deputy Public Defenders to determine whether the child represents a risk to the community and constitute the basis for effective treatment plans likely to reduce re-offending by addressing the issues that otherwise would put the child at risk for further delinquent behavior. The psychiatric social workers interview the juvenile clients along with their family members and other involved parties such as school counselors, team coaches, social workers working in dependency courts,

foster parents and therapists. At the discretion of the Deputy Public Defenders, CARE Project psychiatric social workers prepare reports for the Deputy Public Defenders to present to the court. The information developed by the psychiatric social workers plays a key role in assisting the Deputy Public Defenders to individualize and humanize the perception of each child by busy bench officers who otherwise would not have the advantage of in-depth evaluations and insight about each child and awareness of services available to implement an effective treatment plan. Consequently, more appropriate services are rendered to children and families to reduce recidivism while continuing to hold minors accountable.

Additionally, seven Deputy Public Defenders serve as resource attorneys. These attorneys enhance the CARE Project's advocacy in the areas of special education and mental health for children who otherwise would not receive necessary mental health and educational services mandated by state and federal law. CARE Project resource attorneys ensure that children with educational difficulties have current Individual Education Plans (IEPs) which identify special education needs and define specific services to be provided. In addition, they facilitate special program referrals to agencies such as the Regional Center system which provides services for children with developmental disabilities. Resource attorneys also garner Department of Mental Health entitlements for their juvenile clients and provide consultation for other Deputy Public Defenders on complicated cases involving children coming from the dependency court system.

By referring clients for evaluation, identification and intervention at the pre-trial stage, the Public Defender's Office focuses on abating the behaviors that prompted the



filing of the juvenile petition in these cases. By beginning to design disposition plans at an early stage, members of the CARE Project team are able to provide the court with a better assessment of the minor's needs, present reasonable recommendations for appropriate conditions of probation and identify resources that will assist the minor and his/her family to responsibly satisfy the conditions of probation. This approach enables the court to make orders that will foster accountability by both the minor and the system.

Since the 1999 inception of the pre-adjudication component of the Public Defender CARE Project through June 2008, 12,137 children have received project services. In fiscal year 2007-08, 7,915 services were provided to 1,295 new clients. Additionally, in fiscal year 2007-08, the Public Defender provided special education assistance to 769 clients and DMH assistance to 419 clients. On average, each child served received approximately six services from the Project. The referrals involved a variety of consultation services including psychosocial and educational assessments, early intervention to identify services, referrals to community resources (such as 12-step programs for alcohol and substance base, and after school activities such as the YMCA and parenting classes), crisis intervention referrals during the court process, and recommendations for disposition plans and conditions of probation in difficult cases. A significant number of these dispositions were for placements that provided treatment for a problem identified in the assessment process or the minor was permitted to remain in the home while receiving treatment services in the community. Many of these children are wards of both the delinquency and dependency court systems and are themselves victims of abuse and neglect.

The current beneficiaries of the integrated components of these programs are the children, together with their families and

communities, who receive services from attorneys, psychiatric social workers, resource attorneys and others. For example, children with special education needs are represented by Public Defender resource attorneys and psychiatric social workers at school district hearings, including IEP meetings. Advocacy by the Public Defender's Office on behalf of children entering the Juvenile Justice system has reaped tremendous benefits for children with disabilities and has provided them with a necessary continuum of educational program options in the school system that are mandated by state and federal law. Children and their families also benefit from referrals to appropriate mental health residential and outpatient treatment programs, Regional Center services for children with developmental and cognitive disabilities and referrals to other public and private service agencies.

Overall, for fiscal year 2007-08, the Los Angeles County Juvenile Courts adopted 82% of the Public Defender disposition recommendations where CARE extended services were provided. Judicial officers have stated that the evaluations are invaluable in making the courts better equipped to identify those youth with emotional or developmental issues.

POST DISPOSITION PROGRAM

Through the Post Disposition Program, the Public Defender's Office provides assistance to children who were sent to juvenile probation camp by court order. It is the only program to address complicated issues presented by these children after the court has ordered them to a camp program they can not successfully complete because of issues not previously identified. It targets those children whose needs for services are not being met by juvenile camp programs, but could be more fully and properly



addressed in a suitable placement setting or other structured program in the community.

The target camp population for the Public Defender Post Disposition Program includes, but is not limited to:

- (1) children with apparent or suspected learning or developmental disabilities whose special needs cannot be accommodated in a juvenile camp program;
- (2) children with mental health issues including the need for psycho-tropic medication;
- (3) children whose age and level of maturity are not compatible with the camp population or programming;
- (4) children with physical disabilities that prevent full participation in camp programs; and
- (5) children about to emancipate from the camp program.

In this component, psychiatric social workers employed by the Public Defender work in cooperation with the Los Angeles County Probation Department to identify and reevaluate children who were committed to juvenile probation camp but whose educational and mental health needs would be better met through a less restrictive alternative. The psychiatric social workers assess the child and make an alternative recommendation for placement. Deputy Public Defenders then present the alternative plan to the Juvenile Court. Often, the Post Disposition Program is the first to address issues involving neglect, abuse, abandonment, gang affiliation, education deficits, school failure, the absence of special education services and entitlements, mental health issues and developmental disabilities.

The Public Defender Post Disposition Program likewise continues to maintain a

consistent rate of success in convincing Juvenile Court judges throughout the ten Los Angeles County Juvenile Court locations that in appropriate cases children in juvenile camps should be removed and placed in an environment more conducive to receiving necessary treatment and services otherwise not available in the camp setting. When returned to court for presentation of the alternative plan by the Deputy Public Defender and the psychiatric social worker, the Juvenile Courts granted over ninety-five percent of these motions, finding a change of circumstance in the discovery of otherwise unnoticed mental, emotional, or educational needs.

Consequently, the overwhelming majority of the Public Defender proposed alternative dispositions have been granted to remove the child from camp and place the child in an alternative setting that better addresses the child's individual needs. Of the 1,162 total cases handled by the Post Disposition Program since the program's inception in November 1999 through June 2008, the Post Disposition Program has enjoyed a ninety-seven percent (97%) success rate in convincing courts to pursue less restrictive alternative dispositions, and judges continued camp placement in only three percent (3%) of the referrals. Of the children released from camp placement, approximately sixty-eight percent (68%) were suitably placed and twenty nine percent (29%) were placed home with court conditions, and approximately three percent (3%) were placed in a mental health hospital.

Alternative dispositions involved one of the following situations:

- A less restrictive setting whereby the minor was either suitably placed in a girls' or boys' group home or the minor was sent home to his/her family with specific conditions of probation including counseling;



- The camp order remained in full force and effect; however, the minor was released home on a Court Furlough with specific conditions of probation;
- The minor was released from Camp and was placed in the Regional Center system for mental health/educational issues;
- The minor was placed in a mental health facility.

The Public Defender’s Office continues to collaborate with the Probation Department in identifying children who qualify for placement in a less restrictive setting and has succeeded in returning children to the community with appropriate treatment and support in the overwhelming majority of cases. In the vast majority of cases, the Deputy Public Defenders through collaboration with Probation have convinced courts to change dispositions by removing children from the community camp placement setting into more appropriate alternative placements.

PROJECT YOUTH EMBRACE

PROJECT YOUTH EMBRACE is an innovative new collaborative made up of the Los Angeles County Public Defender, PROTOTYPES, Homeboy Industries, Probation Department, and DJJ Parole (TEAM), designed to provide comprehensive reentry services for juvenile offenders returning from custody or out of home placement. The project offers a continuum of assessment, treatment and wrap-around services that commence when the child is still in custody and continues during and following release culminating as needed in housing placement and aftercare in the community.

The project is being funded by CDCR for a two-year grant period (7/1/07 through 6/30/09). Formal implementation began in July 2007.

The goals of PROJECT YOUTH EMBRACE are to improve outcomes and recidivism reduction for children in the juvenile delinquency system by effectively implementing and delivering a rehabilitative program based on evidence-based efforts.

The project serves children ages 16 to 25 who are male and female parolees under the jurisdiction of the Division of Juvenile Justice (DJJ), including those still in commitment or local offenders under supervision of the Probation Department. Public Defender juvenile clients at greatest risk to re-offend are prioritized. Services are on-site at DJJ institutions and probation camps (while in custody) and at three major services sites of PROTOTYPES and Homeboy Industries.

Children are clinically assessed including specialized assessments to determine the child’s placement in specific program elements (i.e. education, mental health and substance abuse treatment needs). An individualized written plan is formulated by the client and the TEAM and includes treatment goals, specific objectives and activities related to these goals, as well as time frames for achievement. Assessments are conducted at the time of referral (90 to 180 days of the youth’s release) and a reassessment is conducted within 60-90 days of the youth’s release to determine what progress has been made while in the institution.

Community reentry services are guided by an updated treatment plan that reflects the child’s living situation after release (housing, family support) as well as treatment and service needs. The youth is a case manager at one of the service sites who monitors and revises the plan to reflect the client’s progress and changing needs, and keeps the youth linked to needed services and resources.

Services provided include: mental health and substance treatment (intensive outpatient



and/or residential treatment settings) motivational enhancement intervention, individual group and family counseling, peer support groups, substance abuse counseling, life skills training, employment assistance and other services guided by the treatment plan.

Job training and employment assistance provided by Homeboy Industries includes comprehensive services ranging from employability assessments and job readiness supports to placement in occupations including the organizations' own small businesses. Job developers work with local employers searching out available jobs and talking with employers about the unique challenges and rewards of hiring reentry youth. Job developers work one-on-one with clients developing their resumes, honing their interviewing skills and finding promising employment matches. An on-site educational curriculum provides classes in math, computer, and G.E.D. preparation and other skills important to securing and maintaining employment. Tattoo removal services are offered to gang members with visible tattoos that inhibit their ability to secure employment.

The project offers a curriculum of life skills education with classes in parenting, personal development, basic finances and budgeting and household management. Health education is a part of the life skills curriculum and covers such relevant subject areas as HIV/AIDS, nutrition, personal hygiene, and community health resources. Transportation services are arranged to and from the treatment site and to and from ancillary services for clients who do not have their own transportation. Residential housing and other housing assistance are also provided.

The Project Youth Embrace targets were 100 camp and 200 DJJ cases for the first year, which covered fiscal year 2007-08.

The Public Defender referred 103 camp girls and 193 DJJ cases (10 girls, the rest boys (the target for girls was 10) as of June 30, 2008. These figures were accomplished despite the fact that screening began only in August 2007 and access to any DJJ facility became fully operational only as early as October 2007.

THE DJJ UNIT

The passage of SB 459, effective January 1, 2004 (Chapter 4, Statutes of 2003), gave the Juvenile Court continuing jurisdiction over minors sent to the Division of Juvenile Justice (DJJ). SB 459 was a legislative attempt to ensure that courts take an active role in supervising minors who are committed to DJJ by mandating the following:

- 1) Juvenile Courts are now required to set a maximum term of confinement (Welfare and Institutions Code §731);
- 2) DJJ is required to set an initial parole consideration date within 60 days of the commitment of a ward Welfare and Institutions Code §1731.8); and
- 3) DJJ must prepare a treatment plan for each ward, provide these reports to the Juvenile Court and to the Probation Department, and provide written periodic reviews at least annually (Welfare and Institutions Code §1766).

The Public Defender now has the duty to monitor treatment provided at DJJ. Three experienced Deputy Public Defender resource attorneys have been assigned to the Department's DJJ unit created in the summer of 2005.

The Public Defender DJJ Unit serves approximately 100 clients currently housed at DJJ institutions throughout the state. All clients are visited by their Public Defender DJJ Unit attorneys. They also may reach their



lawyer by telephone. The attorneys have developed working relationships with the clients' DJJ counselors, as well as with other staff at the institutions. They work to obtain their clients' prior mental health and education records, and they also review DJJ documents in order to assess current services.

Advocacy within the institution may bring a change in the services provided to the client. The attorneys have participated in obtaining special education services for their clients inside DJJ and have attended IEP meetings on behalf of their institutionalized clients. They have ensured that clients were transferred to facilities where specialized counseling was available, thus enabling the clients to receive services necessary for them to successfully reintegrate into the community upon parole.

Public Defender DJJ Unit attorneys also research and prepare motions pursuant to WIC §731, requesting that the judge set a determinate term for the sentence. WIC §731, which states that minors may not be held in physical confinement for a period longer than the maximum adult sentence, has been amended. The additional language now states that "[a] minor committed to... the Youth Authority also may not be held in physical confinement for a period of time in excess of the maximum term of physical confinement set by the court based upon the facts and circumstances of the matter or matters which brought or continued the minor under the jurisdiction of the juvenile court, which may not exceed the maximum period of adult confinement as determined pursuant to this section."

The lawyers also pursue relief pursuant to WIC §779, which gives the Juvenile Court discretion to remove clients from DJJ institutions in cases where appropriate services are not being provided. While current law allowed

the Juvenile Court to modify or set aside a DJJ commitment, WIC §779 has been amended to state that "[t]his section does not limit the authority of the court to change, modify, or set aside an order of commitment after a noticed hearing and upon a showing of good cause that the Youth Authority is unable to, or failing to provide treatment consistent with section 734." Courts have granted these motions after holding hearings and finding that DJJ services were inadequate. A number of clients have been moved from DJJ Youth Correctional Facilities to local suitable placements where their special needs can be addressed.

JUVENILE MENTAL HEALTH COURT

The Office of the Public Defender also continues to be actively involved in Juvenile Mental Health Court (JMHC). JMHC which began operating in October 2001, is a comprehensive judicially monitored program for juvenile offenders with diagnosed mental health disorders or learning disabilities and whose crimes demonstrate a link to the disorder or disability. A collaborative inter-agency team consisting of a judge, prosecutor, defense attorney, Department of Mental Health psychologist and a Los Angeles County Office of Education liaison develops an individualized case plan for each eligible child referred to JMHC. The plan includes home, family, therapeutic, educational and adult transition services. A Deputy Public Defender with the assistance of psychiatric social workers advocates on behalf of the child to secure mental health services from all available community resources.

The Deputy Public Defender works with the family, local mental health organizations, school districts, the Regional Center system, the Probation Department and DCFS to obtain for the child every benefit to which he or she



is legally entitled. Implementation of the plan is monitored intensively on an ongoing basis for two years or as long as the minor remains on probation. One goal of JMHC is to reduce recidivism in the mentally ill population. Since its inception in October 2001, JMHC has accepted 292 children, and the Public Defender represented 279 of those children. In fiscal year 2007-08, the JMHC program accepted 55 new cases, with 36 of those children being represented by the Public Defender.

JMHC also acts as a referral court for all minors found to be incompetent in Los Angeles County, and is the only Delinquency Court in California that specifically accepts children who have been found incompetent by the referring court.

JUVENILE DRUG TREATMENT COURT

Juvenile Drug Treatment Court attempts to resolve underlying problems of drug and alcohol abuse and is built upon a unique partnership between the juvenile justice community and drug treatment advocates. The courtroom atmosphere is non-adversarial, with a dedicated team of court officers and staff, including Deputy Public Defenders who strive together to break the cycle of drug abuse. The Los Angeles County Juvenile Drug Treatment Court Programs are supervised, comprehensive treatment programs for non-violent children. The programs are comprised of children in both pre-adjudication and post-adjudication stages as well as high risk probationers who are sometimes placed in a 26-week residential facility.

Children participate in the program voluntarily. In the pre-adjudication program referred to as Drug Court Lite, charges are suspended during the child's participation while children in the post-adjudication program admit charges in the petition prior

to participation. Most children participating in the pre-adjudication program are charged with committing offenses involving possession of narcotics or being under the influence of drugs and/or alcohol. Children are generally eligible to participate in the post-adjudication program so long as they have no prior sustained or current petitions for sex offenses, crimes of violence or possession, or use of a firearm. The requirements are waived on occasion to allow some otherwise ineligible children to participate in Juvenile Drug Treatment Court when the interests of justice are served.

Upon a finding of eligibility and suitability, the Juvenile Drug Treatment Court judge provisionally accepts the child into the Juvenile Drug Court Treatment Program. After the child is accepted into the Program, Deputy Public Defenders continue representation throughout the child's participation in Drug Court. Successful completion and graduation will result in the dismissal of charges in the pre-adjudication program and the termination of probation in the post-adjudication program. Failure or dismissal from the program will result in the reinstatement of criminal (delinquency) charges and subsequent prosecution on the pre-adjudicated charges or continuation on probation on the post-adjudication charges. Success in the Juvenile Drug Court Treatment Programs is not solely measured by the number of graduates from the program, but rather whether the Drug Treatment Court curriculum favorably impacted the children to the extent that they are now considered drug-free.

Juvenile Drug Court Treatment providers direct participating children through a 52-week curriculum which includes drug treatment, drug testing, frequent court appearances and individual as well as group counseling. The programs are divided into three phases: 1) phase one focuses on stabilization, orientation



and assessment, 2) phase two emphasizes intensive treatment, and 3) phase three focuses on transition back to the community.

A counselor or probation officer also assists with obtaining education and skills assessments. Referrals for vocational training or job placement services are also provided. Participants are required to attend school on a regular basis with enrollment in Independent Studies allowed only with the court's approval. The child's parents and family members are encouraged to participate in appropriate treatment sessions. Deputy Public Defenders receive training regarding addiction, treatment, and related issues which constitute an ongoing part of the therapeutic environment fostered in the Juvenile Drug Treatment Court.

There are currently three Juvenile Drug Treatment Courts operating in juvenile court locations; Sylmar in operation since 1998; Eastlake which began operations in 2001; and Inglewood which began operations in April 2004. Both Eastlake and Sylmar have pre-adjudication as well as post-adjudication Juvenile Drug Treatment Courts in place. Inglewood's Juvenile Drug Treatment Court is pre-adjudication only. For fiscal year 2007-08:

- Sylmar Court accepted 66 new Drug Court participants, 14 Drug Court Lite participants and graduated 28 participants;
- Eastlake Court accepted 53 Drug Court participants, 70 Drug Court Lite participants and graduated 10 participants from Drug Court and 9 from Drug Court Lite, respectively.
- Inglewood Court accepted 12 new participants and had 18 graduates. Note that participants must reside in the Centinela Probation Area to qualify.

**LOS ANGELES COUNTY
OFFICE OF EDUCATION
AGENCY REPORT**



**Don't Leave
Your Kids
Alone**



LOS ANGELES COUNTY OFFICE OF EDUCATION

Seventy-eight of the 81 school districts in Los Angeles County reported suspected child abuse data for 2007-2008. Reported child abuse was broken down into four categories: General Neglect abuse; Physical abuse; Sexual abuse; and Emotional abuse. In order to compare child abuse data across districts, incidence rates were calculated by weighing the numbers of reported cases per 1,000 enrolled students in each district. Current year enrollment data was obtained from the California Basic Educational Data System (CBEDS) (www.cde.ca.gov) and 2007-2008 enrollment figures furnished by the school districts.

SUMMARY

Figure 1 displays incidence rates by abuse and district type for 2007-2008. Physical abuse had the highest number of suspected cases and emotional abuse had the lowest. Elementary school districts had the highest total suspected case incidence rate (3.82), followed by Unified school

districts (2.36). Elementary school district incidence rates were the highest across all abuse types, ranging from 20% to 57% higher than the next highest incidence rates.

Current year district data is reported in more detail in Figures 2 through 5 below.

TREND ANALYSES

Los Angeles County school district suspected child abuse data from 2003 to 2007 were analyzed for trends.

Overall, Los Angeles County school districts showed decreases in the number of incidences per 1000 in the Sexual and Physical abuse types. In the General Neglect abuse type, there was a decrease in the unified school districts; there was an increase in the high school category; and the elementary school category was the same. In the Emotional abuse type, there was an increase in the elementary school districts, but there was a decrease in the high school and unified school districts.

Figure 1

2007 – 2008 NUMBER OF CASES												
District Type	Number of Districts	Total Enrollment	Sexual Assault, # suspected cases	Physical Abuse, # suspected cases	General Neglect, # suspected cases	Emotional Abuse, # suspected cases	Total Cases	Sexual Assault, inci- dences / 1000	Physical Abuse, incidences / 1000	General Neglect, incidences / 1000	Emotional Abuse, incidences / 1000	Total Cases, incidences / 1000
ELEMENTARY	28	170,725	52	389	133	76	650	0.3	2.28	0.78	0.44	3.82
HIGH	5	115,645	18	124	39	22	203	0.15	1.07	0.33	0.19	1.76
UNIFIED	45	783,500	187	1,203	293	138	1,821	0.24	1.56	0.37	0.17	2.36
TOTAL	78	1,069,870	257	1,716	465	236	2,674	0.24	1.62	0.43	0.22	2.53



Figure 2

2006 – 2008 CHILD ABUSE DATA
Number of Reported Cases of Suspected Sexual Assault by School District

School District	Children's Center	Head Start	Elementary School	Junior High
ABC Unified	0	0	6	1
Acton-Agua Dulce Unified	0	0	0	0
Alhambra Unified	0	0	5	0
Antelope Valley Joint Union High	0	0	0	0
Arcadia Unified	0	0	0	1
Azusa Unified	0	0	3	0
Baldwin Park Unified	0	0	1	0
Bassett Unified	0	0	1	3
Bellflower Unified	0	0	6	1
Beverly Hills Unified	0	0	0	0
Bonita Unified	0	0	0	0
Burbank Unified	0	0	3	2
Castaic Union	0	0	1	0
Centinel Valley Union High	0	0	0	0
Charter Oak Unified	0	0	0	0
Claremont Unified	0	0	2	2
Covina-Valley Unified	0	0	2	7
Culver City Unified	0	0	0	0
Downey Unified	0	1	5	4
Duarte Unified	0	1	4	4
East Whittier City	0	0	1	3
Eastside Union	0	0	1	0
El Monte City	0	1	3	1
El Monte Union High	0	0	0	0
El Rancho Unified	0	0	0	0
El Segundo Unified	0	0	0	0
Garvey	0	0	1	1
Glendale Unified	0	0	3	1
Glendora Unified	0	0	1	0
Gorman	0	0	0	0
Hacienda La Puente Unified	1	1	3	0
Hawthorne	0	0	1	1
Hermosa Beach City	0	0	0	0
Hughes-Elizabeth Lakes Union	0	0	1	0
Inglewood Unified	0	0	0	0
Keppel Union	0	0	1	0
La Canada Unified	0	0	0	0
Lancaster	0	0	6	0
Las Virgenes Unified	0	0	0	0



Figure 2 (Cont.)

2006 – 2008 CHILD ABUSE DATA					
Number of Reported Cases of Suspected Sexual Assault by School District					
School District	High School	Special Education	Other Site	Total Cases	Incidence per 1000
ABC Unified	1	0	0	8	0
Acton-Agua Dulce Unified	0	0	0	0	0
Alhambra Unified	2	0	0	7	0
Antelope Valley Joint Union High	4	0	0	4	0
Arcadia Unified	2	0	0	3	0
Azusa Unified	0	0	0	3	0
Baldwin Park Unified	0	0	0	1	0
Bassett Unified	0	0	0	4	0
Bellflower Unified	2	0	0	9	0
Beverly Hills Unified	1	0	0	1	0
Bonita Unified	0	0	0	0	0
Burbank Unified	2	0	0	7	0
Castaic Union	0	0	0	1	0
Centinela Valley Union High	9	0	0	9	0
Charter Oak Unified	0	0	0	0	0
Claremont Unified	0	0	2	6	0
Covina-Valley Unified	1	0	0	10	0
Culver City Unified	1	0	0	1	0
Downey Unified	7	0	0	17	0
Duarte Unified	0	0	0	9	0
East Whittier City	0	0	0	4	0
Eastside Union	0	0	0	1	0
El Monte City	0	0	0	5	0
El Monte Union High	3	0	0	3	0
El Rancho Unified	0	0	0	0	0
El Segundo Unified	0	0	0	0	0
Garvey	0	0	0	2	0
Glendale Unified	1	0	0	5	0
Glendora Unified	0	0	0	1	0
Gorman	0	0	0	0	0
Hacienda La Puente Unified	2	0	0	7	0
Hawthorne	0	0	0	2	0
Hermosa Beach City	0	0	0	0	0
Hughes-Elizabeth Lakes Union	0	0	0	1	0
Inglewood Unified	1	0	0	1	0
Keppel Union	0	0	0	1	0
La Canada Unified	0	0	0	0	0
Lancaster	0	0	0	6	0
Las Virgenes Unified	2	0	0	2	0



Figure 2 (Cont.)

2006 – 2008 CHILD ABUSE DATA
Number of Reported Cases of Suspected Sexual Assault by School District

School District	Children's Center	Head Start	Elementary School	Junior High
Lawndale	0	0	1	0
Lennox	0	0	2	0
Little Lake City	0	0	0	2
Long Beach Unified	0	2	7	0
LACOE	0	0	0	0
Los Nietos	0	0	0	0
Lowell Joint	0	0	0	1
Lynwood Unified	0	0	3	1
Manhattan Beach Unified	0	0	1	0
Monrovia Unified	0	0	1	0
Montebello Unified	0	0	5	11
Mountain View	0	0	1	0
Newhall	0	0	0	0
Norwalk-La Mirada Unified	0	3	1	1
Palmdale	0	0	2	1
Palos Verdes Peninsula Unified	0	0	0	0
Paramount Unified	0	0	1	0
Pasadena Unified	0	0	1	1
Pomona Unified	0	0	0	0
Redondo Beach Unified	0	0	0	1
Rosemead	0	0	3	0
Rowland Unified	0	0	3	1
San Gabriel Unified	0	0	2	0
San Marino Unified	0	0	0	0
Santa Monica-Malibu Unified	0	0	1	0
Saugus Union	0	0	6	0
South Pasadena Unified	0	0	0	0
South Whittier	0	0	2	0
Sulphur Springs Union	0	0	3	0
Temple City Unified	0	0	1	0
Torrance Unified	0	0	1	0
Valle Lindo	0	0	0	0
West Covina Unified	0	0	2	0
Westside Union	0	0	1	0
Whittier City	0	0	1	1
Whittier Union High	0	0	0	0
William S. Hart Union High	0	0	0	3
Wilsona	0	0	2	0
Wiseburn	0	0	0	0



Figure 2 (Cont.)

2006 – 2008 CHILD ABUSE DATA					
Number of Reported Cases of Suspected Sexual Assault by School District					
School District	High School	Special Education	Other Site	Total Cases	Incidence per 1000
Lawndale	0	0	0	1	0
Lennox	0	0	0	2	0
Little Lake City	0	0	0	2	0
Long Beach Unified	3	0	0	12	0
LACOE	0	0	0	0	0
Los Nietos	0	0	0	0	0
Lowell Joint	0	0	0	1	0
Lynwood Unified	0	0	0	4	0
Manhattan Beach Unified	3	0	0	4	0
Monrovia Unified	0	0	1	1	0
Montebello Unified	6	0	0	22	0
Mountain View	0	0	0	1	0
Newhall	0	0	0	0	0
Norwalk-La Mirada Unified	3	0	0	8	0
Palmdale	0	0	0	3	0
Palos Verdes Peninsula Unified	0	0	0	0	0
Paramount Unified	3	0	0	4	0
Pasadena Unified	0	0	0	2	0
Pomona Unified	0	0	0	0	0
Redondo Beach Unified	0	0	0	1	0
Rosemead	0	0	0	3	0
Rowland Unified	2	0	0	6	0
San Gabriel Unified	7	0	0	9	0
San Marino Unified	0	0	0	0	0
Santa Monica-Malibu Unified	3	0	0	4	0
Saugus Union	0	0	0	6	0
South Pasadena Unified	0	0	0	0	0
South Whittier	0	0	0	2	0
Sulphur Springs Union	0	0	0	3	0
Temple City Unified	1	0	0	2	0
Torrance Unified	1	0	0	2	0
Valle Lindo	0	0	0	0	0
West Covina Unified	2	0	0	4	0
Westside Union	0	0	0	1	0
Whittier City	0	0	0	2	0
Whittier Union High	2	0	0	2	0
William S. Hart Union High	0	0	0	3	0
Wilsona	0	0	0	2	0
Wiseburn	0	0	0	0	0



Figure 3

2006 – 2008 CHILD ABUSE DATA
Number of Reported Cases of Suspected Physical Abuse by School District

School District	Children's Center	Head Start	Elementary School	Junior High
ABC Unified	0	0	21	1
Acton-Agua Dulce Unified	0	0	0	0
Alhambra Unified	0	0	96	0
Antelope Valley Joint Union High	0	0	0	0
Arcadia Unified	0	0	8	2
Azusa Unified	0	0	5	4
Baldwin Park Unified	0	5	6	0
Bassett Unified	0	0	6	2
Bellflower Unified	0	0	43	0
Beverly Hills Unified	0	0	4	2
Bonita Unified	0	0	9	4
Burbank Unified	4	0	34	13
Castaic Union	0	0	2	1
Centinela Valley Union High	0	0	0	0
Charter Oak Unified	0	0	7	0
Claremont Unified	0	0	5	8
Covina-Valley Unified	0	0	12	7
Culver City Unified	0	0	5	3
Downey Unified	0	0	35	17
Duarte Unified	0	0	11	4
East Whittier City	0	0	28	12
Eastside Union	0	0	12	4
El Monte City	1	5	12	4
El Monte Union High	0	0	0	0
El Rancho Unified	0	0	0	0
El Segundo Unified	0	0	0	4
Garvey	0	1	1	2
Glendale Unified	2	0	17	3
Glendora Unified	0	0	1	0
Gorman	0	0	0	0
Hacienda La Puente Unified	0	6	15	25
Hawthorne	0	0	20	11
Hermosa Beach City	0	0	3	1
Hughes-Elizabeth Lakes Union	0	0	1	0
Inglewood Unified	0	0	24	0
Keppel Union	0	0	8	1
La Canada Unified	0	0	1	1
Lancaster	0	2	24	17
Las Virgenes Unified	0	0	2	0



Figure 3 (Cont.)

2006 – 2008 CHILD ABUSE DATA					
Number of Reported Cases of Suspected Physical Abuse by School District					
School District	High School	Special Education	Other Site	Total Cases	Incidence per 1000
ABC Unified	11	0	0	33	0
Acton-Agua Dulce Unified	1	0	0	1	0
Alhambra Unified	25	0	0	121	0
Antelope Valley Joint Union High	60	0	0	60	0
Arcadia Unified	19	0	0	29	0
Azusa Unified	0	0	0	9	0
Baldwin Park Unified	0	0	0	11	0
Bassett Unified	0	0	0	8	0
Bellflower Unified	9	0	1	53	0
Beverly Hills Unified	5	0	0	11	0
Bonita Unified	0	0	0	13	0
Burbank Unified	11	0	0	62	0
Castaic Union	0	0	0	3	0
Centinela Valley Union High	8	0	0	8	0
Charter Oak Unified	0	0	0	7	0
Claremont Unified	2	0	1	16	0
Covina-Valley Unified	13	0	0	32	0
Culver City Unified	5	0	0	13	0
Downey Unified	25	0	0	77	0
Duarte Unified	1	0	0	16	0
East Whittier City	0	0	0	40	0
Eastside Union	0	0	0	16	0
El Monte City	0	0	0	22	0
El Monte Union High	14	0	0	14	0
El Rancho Unified	0	0	0	0	0
El Segundo Unified	1	0	0	5	0
Garvey	0	0	0	4	0
Glendale Unified	0	0	0	22	0
Glendora Unified	0	0	0	1	0
Gorman	0	0	0	0	0
Hacienda La Puente Unified	1	0	0	47	0
Hawthorne	0	0	0	31	0
Hermosa Beach City	0	0	0	4	0
Hughes-Elizabeth Lakes Union	0	0	0	1	0
Inglewood Unified	7	0	0	31	0
Keppel Union	0	0	0	9	0
La Canada Unified	1	0	0	3	0
Lancaster	0	0	0	43	0
Las Virgenes Unified	7	0	0	9	0



Figure 3 (Cont.)

2006 – 2008 CHILD ABUSE DATA
Number of Reported Cases of Suspected Physical Abuse by School District

School District	Children's Center	Head Start	Elementary School	Junior High
Lawndale	0	0	19	10
Lennox	0	1	19	0
Little Lake City	0	0	0	10
Long Beach Unified	0	2	33	13
LACOE	0	0	0	0
Los Nietos	0	0	2	1
Lowell Joint	0	0	4	4
Lynwood Unified	0	0	21	8
Manhattan Beach Unified	0	0	0	0
Monrovia Unified	0	0	9	6
Montebello Unified	0	1	23	29
Mountain View	0	0	9	0
Newhall	0	0	16	0
Norwalk-La Mirada Unified	0	7	16	10
Palmdale	0	0	6	1
Palos Verdes Peninsula Unified	0	0	0	0
Paramount Unified	0	2	27	0
Pasadena Unified	0	0	11	2
Pomona Unified	0	7	45	21
Redondo Beach Unified	0	0	2	12
Rosemead	0	1	11	1
Rowland Unified	0	0	31	5
San Gabriel Unified	0	0	12	6
San Marino Unified	0	0	0	0
Santa Monica-Malibu Unified	0	0	13	11
Saugus Union	0	0	26	0
South Pasadena Unified	0	0	1	2
South Whittier	0	0	5	0
Sulphur Springs Union	0	0	19	0
Temple City Unified	0	0	9	0
Torrance Unified	0	0	7	3
Valle Lindo	0	0	6	0
West Covina Unified	0	0	14	9
Westside Union	0	0	2	0
Whittier City	0	0	12	10
Whittier Union High	0	0	0	0
William S. Hart Union High	0	0	0	28
Wilsona	0	0	5	1
Wiseburn	0	0	10	5



Figure 3 (Cont.)

2006 – 2008 CHILD ABUSE DATA					
Number of Reported Cases of Suspected Physical Abuse by School District					
School District	High School	Special Education	Other Site	Total Cases	Incidence per 1000
Lawndale	0	0	0	29	0
Lennox	0	0	0	20	0
Little Lake City	0	0	0	10	0
Long Beach Unified	6	0	0	54	0
LACOE	1	0	0	1	0
Los Nietos	0	0	0	3	0
Lowell Joint	0	0	0	8	0
Lynwood Unified	1	0	0	30	0
Manhattan Beach Unified	9	0	0	9	0
Monrovia Unified	1	0	1	17	0
Montebello Unified	9	0	0	62	0
Mountain View	0	0	0	9	0
Newhall	0	0	0	16	0
Norwalk-La Mirada Unified	6	0	0	39	0
Palmdale	0	0	0	7	0
Palos Verdes Peninsula Unified	19	0	0	19	0
Paramount Unified	19	0	0	48	0
Pasadena Unified	0	0	0	13	0
Pomona Unified	12	0	0	85	0
Redondo Beach Unified	0	0	0	14	0
Rosemead	0	0	0	13	0
Rowland Unified	8	0	0	44	0
San Gabriel Unified	16	0	0	34	0
San Marino Unified	0	0	0	0	0
Santa Monica-Malibu Unified	15	0	0	39	0
Saugus Union	0	0	0	26	0
South Pasadena Unified	3	0	0	6	0
South Whittier	0	0	0	5	0
Sulphur Springs Union	0	0	0	19	0
Temple City Unified	3	0	0	12	0
Torrance Unified	7	0	0	17	0
Valle Lindo	0	0	0	6	0
West Covina Unified	7	0	0	30	0
Westside Union	0	0	0	2	0
Whittier City	0	0	0	22	0
Whittier Union High	10	0	0	10	0
William S. Hart Union High	4	0	0	32	0
Wilsona	0	0	0	6	0
Wiseburn	0	0	0	15	0



Figure 4

2006 – 2008 CHILD ABUSE DATA
Number of Reported Cases of Suspected General Neglect by School District

School District	Children's Center	Head Start	Elementary School	Junior High
ABC Unified	0	0	7	0
Acton-Agua Dulce Unified	0	0	1	0
Alhambra Unified	0	0	13	0
Antelope Valley Joint Union High	0	0	0	0
Arcadia Unified	0	0	2	0
Azusa Unified	0	0	4	0
Baldwin Park Unified	1	2	2	1
Bassett Unified	0	0	4	1
Bellflower Unified	0	0	5	0
Beverly Hills Unified	0	0	0	1
Bonita Unified	0	0	5	4
Burbank Unified	0	0	3	0
Castaic Union	0	0	1	0
Centinela Valley Union High	0	0	0	0
Charter Oak Unified	0	0	0	0
Claremont Unified	0	0	1	1
Covina-Valley Unified	1	0	11	1
Culver City Unified	0	0	2	0
Downey Unified	0	0	8	5
Duarte Unified	0	0	6	0
East Whittier City	0	0	9	4
Eastside Union	0	0	3	2
El Monte City	1	0	6	2
El Monte Union High	0	0	0	0
El Rancho Unified	0	0	0	0
El Segundo Unified	0	0	1	0
Garvey	0	1	0	0
Glendale Unified	0	0	4	1
Glendora Unified	0	0	1	0
Gorman	0	0	2	0
Hacienda La Puente Unified	0	0	7	8
Hawthorne	0	0	5	2
Hermosa Beach City	0	0	1	1
Hughes-Elizabeth Lakes Union	0	0	0	0
Inglewood Unified	0	0	3	0
Keppel Union	0	0	5	0
La Canada Unified	0	0	2	0
Lancaster	0	1	9	2
Las Virgenes Unified	0	0	2	0



Figure 4 (Cont.)

2006 – 2008 CHILD ABUSE DATA
Number of Reported Cases of Suspected General Neglect by School District

School District	High School	Special Education	Other Site	Total Cases	Incidence per 1000
ABC Unified	3	0	0	10	0
Acton-Agua Dulce Unified	0	0	0	1	0
Alhambra Unified	4	1	0	18	0
Antelope Valley Joint Union High	20	0	0	20	0
Arcadia Unified	0	0	0	2	0
Azusa Unified	0	0	0	4	0
Baldwin Park Unified	0	0	0	6	0
Bassett Unified	0	0	0	5	0
Bellflower Unified	1	0	0	6	0
Beverly Hills Unified	0	0	0	1	0
Bonita Unified	0	0	0	9	0
Burbank Unified	0	0	0	3	0
Castaic Union	0	0	0	1	0
Centinela Valley Union High	4	0	0	4	0
Charter Oak Unified	0	0	0	0	0
Claremont Unified	0	0	2	4	0
Covina-Valley Unified	3	0	0	16	0
Culver City Unified	0	0	0	2	0
Downey Unified	9	1	0	23	0
Duarte Unified	1	0	0	7	0
East Whittier City	0	0	0	13	0
Eastside Union	0	0	0	5	0
El Monte City	0	0	0	9	0
El Monte Union High	5	0	0	5	0
El Rancho Unified	0	0	0	0	0
El Segundo Unified	0	0	0	1	0
Garvey	0	0	0	1	0
Glendale Unified	0	0	0	5	0
Glendora Unified	0	0	0	1	0
Gorman	0	0	0	2	0
Hacienda La Puente Unified	0	0	0	15	0
Hawthorne	0	0	0	7	0
Hermosa Beach City	0	0	0	2	0
Hughes-Elizabeth Lakes Union	0	0	0	0	0
Inglewood Unified	0	0	0	3	0
Keppel Union	0	0	0	5	0
La Canada Unified	0	0	0	2	0
Lancaster	0	0	0	12	0
Las Virgenes Unified	1	0	0	3	0



Figure 4 (Cont.)

2006 – 2008 CHILD ABUSE DATA
Number of Reported Cases of Suspected General Neglect by School District

School District	Children's Center	Head Start	Elementary School	Junior High
Lawndale	0	0	8	4
Lennox	0	1	10	0
Little Lake City	0	0	0	1
Long Beach Unified	0	3	13	5
LACOE	0	0	0	0
Los Nietos	0	0	8	0
Lowell Joint	0	0	1	1
Lynwood Unified	0	0	4	3
Manhattan Beach Unified	0	0	0	0
Monrovia Unified	0	0	5	0
Montebello Unified	0	0	5	6
Mountain View	0	0	0	1
Newhall	0	0	10	0
Norwalk-La Mirada Unified	0	0	8	2
Palmdale	0	0	1	0
Palos Verdes Peninsula Unified	0	0	0	0
Paramount Unified	0	0	21	0
Pasadena Unified	0	0	5	2
Pomona Unified	0	0	0	0
Redondo Beach Unified	0	0	2	2
Rosemead	0	0	4	0
Rowland Unified	0	0	5	1
San Gabriel Unified	0	0	5	2
San Marino Unified	0	0	0	0
Santa Monica-Malibu Unified	0	0	11	5
Saugus Union	0	0	8	0
South Pasadena Unified	0	0	1	2
South Whittier	0	0	4	1
Sulphur Springs Union	0	0	2	0
Temple City Unified	0	0	3	0
Torrance Unified	0	0	0	0
Valle Lindo	0	0	1	0
West Covina Unified	0	0	7	3
Westside Union	0	0	1	0
Whittier City	0	0	4	0
Whittier Union High	0	0	0	0
William S. Hart Union High	0	0	0	4
Wilsona	0	0	2	0
Wiseburn	0	0	2	1



Figure 4(Cont.)

2006 – 2008 CHILD ABUSE DATA
Number of Reported Cases of Suspected General Neglect by School District

School District	High School	Special Education	Other Site	Total Cases	Incidence per 1000
Lawndale	0	0	0	12	0
Lennox	0	0	0	11	0
Little Lake City	0	0	0	1	0
Long Beach Unified	2	0	0	23	0
LACOE	0	0	0	0	0
Los Nietos	0	0	0	8	0
Lowell Joint	0	0	0	2	0
Lynwood Unified	1	0	0	8	0
Manhattan Beach Unified	0	0	0	0	0
Monrovia Unified	0	0	0	5	0
Montebello Unified	0	0	0	11	0
Mountain View	0	0	0	1	0
Newhall	0	0	0	10	0
Norwalk-La Mirada Unified	1	0	0	11	0
Palmdale	0	0	0	1	0
Palos Verdes Peninsula Unified	0	0	0	0	0
Paramount Unified	4	0	0	25	0
Pasadena Unified	1	0	0	8	0
Pomona Unified	0	0	0	0	0
Redondo Beach Unified	1	0	0	5	0
Rosemead	0	0	0	4	0
Rowland Unified	2	0	0	8	0
San Gabriel Unified	3	0	0	10	0
San Marino Unified	0	0	0	0	0
Santa Monica-Malibu Unified	3	0	0	19	0
Saugus Union	0	0	0	8	0
South Pasadena Unified	0	0	0	3	0
South Whittier	0	0	0	5	0
Sulphur Springs Union	0	0	0	2	0
Temple City Unified	1	0	0	4	0
Torrance Unified	1	0	0	1	0
Valle Lindo	0	0	0	1	0
West Covina Unified	3	0	0	13	0
Westside Union	0	0	0	1	0
Whittier City	0	0	0	4	0
Whittier Union High	5	0	0	5	0
William S. Hart Union High	1	0	0	5	0
Wilsona	0	0	0	2	0
Wiseburn	0	0	0	3	0



Figure 5

2006 – 2008 CHILD ABUSE DATA
Number of Reported Cases of Suspected Emotional Abuse by School District

School District	Children's Center	Head Start	Elementary School	Junior High
ABC Unified	0	0	0	0
Acton-Agua Dulce Unified	0	0	0	0
Alhambra Unified	0	0	3	0
Antelope Valley Joint Union High	0	0	0	0
Arcadia Unified	0	0	0	0
Azusa Unified	0	0	1	0
Baldwin Park Unified	0	1	0	0
Bassett Unified	0	0	1	0
Bellflower Unified	0	0	7	0
Beverly Hills Unified	0	0	0	0
Bonita Unified	0	0	0	0
Burbank Unified	0	0	3	0
Castaic Union	0	0	2	0
Centinela Valley Union High	0	0	0	0
Charter Oak Unified	0	0	0	0
Claremont Unified	0	0	1	0
Covina-Valley Unified	1	0	3	1
Culver City Unified	0	0	2	2
Downey Unified	0	0	7	2
Duarte Unified	0	0	1	0
East Whittier City	0	0	8	7
Eastside Union	0	0	1	0
El Monte City	0	5	0	1
El Monte Union High	0	0	0	0
El Rancho Unified	0	0	0	0
El Segundo Unified	0	0	0	1
Garvey	0	0	2	0
Glendale Unified	0	0	3	0
Glendora Unified	0	0	1	0
Gorman	0	0	0	0
Hacienda La Puente Unified	0	0	1	4
Hawthorne	0	0	5	1
Hermosa Beach City	0	0	0	1
Hughes-Elizabeth Lakes Union	0	0	0	1
Inglewood Unified	0	0	3	0
Keppel Union	0	0	4	0
La Canada Unified	0	0	0	0
Lancaster	0	0	3	4
Las Virgenes Unified	0	0	0	0



Figure 5 (Cont.)

2006 – 2008 CHILD ABUSE DATA					
Number of Reported Cases of Suspected Emotional Abuse by School District					
School District	High School	Special Education	Other Site	Total Cases	Incidence per 1000
ABC Unified	0	0	0	0	0
Acton-Agua Dulce Unified	0	0	0	0	0
Alhambra Unified	3	0	0	6	0
Antelope Valley Joint Union High	12	0	0	12	0
Arcadia Unified	1	0	0	1	0
Azusa Unified	0	0	0	1	0
Baldwin Park Unified	0	0	0	1	0
Bassett Unified	0	0	0	1	0
Bellflower Unified	0	0	0	7	0
Beverly Hills Unified	5	0	0	5	0
Bonita Unified	0	0	1	1	0
Burbank Unified	2	0	0	5	0
Castaic Union	0	0	0	2	0
Centinela Valley Union High	1	0	0	1	0
Charter Oak Unified	0	0	0	0	0
Claremont Unified	0	0	0	1	0
Covina-Valley Unified	0	0	0	5	0
Culver City Unified	4	0	0	8	0
Downey Unified	9	0	0	18	0
Duarte Unified	0	0	0	1	0
East Whittier City	0	0	0	15	0
Eastside Union	0	0	0	1	0
El Monte City	0	0	1	7	0
El Monte Union High	3	0	0	3	0
El Rancho Unified	0	0	0	0	0
El Segundo Unified	1	0	0	2	0
Garvey	0	0	0	2	0
Glendale Unified	0	0	0	3	0
Glendora Unified	0	0	0	1	0
Gorman	0	0	0	0	0
Hacienda La Puente Unified	1	0	0	6	0
Hawthorne	0	0	0	6	0
Hermosa Beach City	0	0	0	1	0
Hughes-Elizabeth Lakes Union	0	0	0	1	0
Inglewood Unified	0	0	0	3	0
Keppel Union	0	0	0	4	0
La Canada Unified	0	0	0	0	0
Lancaster	0	0	0	7	0
Las Virgenes Unified	1	0	0	1	0



Figure 5 (Cont.)

2006 – 2008 CHILD ABUSE DATA
Number of Reported Cases of Suspected Emotional Abuse by School District

School District	Children's Center	Head Start	Elementary School	Junior High
Lawndale	0	0	2	0
Lennox	0	0	1	2
Little Lake City	0	0	0	0
Long Beach Unified	1	0	2	2
LACOE	0	0	0	0
Los Nietos	0	0	0	0
Lowell Joint	0	0	0	0
Lynwood Unified	0	0	0	0
Manhattan Beach Unified	0	0	0	0
Monrovia Unified	0	0	2	0
Montebello Unified	0	0	1	4
Mountain View	0	0	0	0
Newhall	0	0	2	0
Norwalk-La Mirada Unified	0	3	2	0
Palmdale	0	0	3	0
Palos Verdes Peninsula Unified	0	0	0	0
Paramount Unified	0	0	6	0
Pasadena Unified	0	0	1	0
Pomona Unified	0	0	0	0
Redondo Beach Unified	0	0	0	1
Rosemead	0	0	0	0
Rowland Unified	0	0	2	0
San Gabriel Unified	0	0	2	0
San Marino Unified	0	0	0	0
Santa Monica-Malibu Unified	0	0	6	4
Saugus Union	0	0	7	0
South Pasadena Unified	0	0	0	0
South Whittier	0	0	0	1
Sulphur Springs Union	0	0	1	0
Temple City Unified	0	0	3	0
Torrance Unified	0	0	1	0
Valle Lindo	0	0	0	0
West Covina Unified	0	0	0	0
Westside Union	0	0	0	0
Whittier City	0	0	4	3
Whittier Union High	0	0	0	0
William S. Hart Union High	0	0	0	2
Wilsona	0	0	2	0
Wiseburn	0	0	2	0



Figure 5 (Cont.)

2006 – 2008 CHILD ABUSE DATA					
Number of Reported Cases of Suspected Emotional Abuse by School District					
School District	High School	Special Education	Other Site	Total Cases	Incidence per 1000
Lawndale	0	0	0	2	0
Lennox	0	0	0	3	0
Little Lake City	0	0	0	0	0
Long Beach Unified	2	0	0	7	0
LACOE	0	0	0	0	0
Los Nietos	0	0	0	0	0
Lowell Joint	0	0	0	0	0
Lynwood Unified	0	0	0	0	0
Manhattan Beach Unified	4	0	0	4	0
Monrovia Unified	0	0	0	2	0
Montebello Unified	1	0	0	6	0
Mountain View	0	0	0	0	0
Newhall	0	0	0	2	0
Norwalk-La Mirada Unified	1	0	0	6	0
Palmdale	0	0	0	3	0
Palos Verdes Peninsula Unified	1	0	0	1	0
Paramount Unified	0	0	0	6	0
Pasadena Unified	1	0	0	2	0
Pomona Unified	0	0	0	0	0
Redondo Beach Unified	0	0	0	1	0
Rosemead	0	0	0	0	0
Rowland Unified	1	0	0	3	0
San Gabriel Unified	3	0	0	5	0
San Marino Unified	0	0	0	0	0
Santa Monica-Malibu Unified	2	0	0	12	0
Saugus Union	0	0	0	7	0
South Pasadena Unified	1	0	0	1	0
South Whittier	0	0	0	1	0
Sulphur Springs Union	0	0	0	1	0
Temple City Unified	1	0	0	4	0
Torrance Unified	0	0	0	1	0
Valle Lindo	0	0	0	0	0
West Covina Unified	0	0	0	0	0
Westside Union	0	0	0	0	0
Whittier City	0	0	0	7	0
Whittier Union High	1	0	0	1	0
William S. Hart Union High	3	0	0	5	0
Wilsona	0	0	0	2	0
Wiseburn	0	0	0	2	0



Figure 6

2006 – 2008 CHILD ABUSE DATA
Total District Enrollment

School District	Elementary	High School	Unified	Total Enrollment
ABC Unified	0	0	21,365	21,365
Acton-Agua Dulce Unified	0	0	1,909	1,909
Alhambra Unified	0	0	19,339	19,339
Antelope Valley Joint Union High	0	30,610	0	30,610
Arcadia Unified	0	0	9,785	9,785
Azusa Unified	0	0	16,541	16,541
Baldwin Park Unified	0	0	32,586	32,586
Bassett Unified	0	0	5,392	5,392
Bellflower Unified	0	0	14,846	14,846
Beverly Hills Unified	0	0	11,235	11,235
Bonita Unified	0	0	10,238	10,238
Burbank Unified	0	0	15,313	15,313
Castaic Union	3,500	0	0	3,500
Centinel Valley Union High	0	7,875	0	7,875
Charter Oak Unified	0	0	6,498	6,498
Claremont Unified	0	0	12,289	12,289
Covina-Valley Unified	0	0	14,911	14,911
Culver City Unified	0	0	8,501	8,501
Downey Unified	0	0	22,146	22,146
Duarte Unified	0	0	4,597	4,597
East Whittier City	8,845	0	0	8,845
Eastside Union	3,270	0	0	3,270
El Monte City	10,624	0	0	10,624
El Monte Union High	0	31,255	0	31,255
El Rancho Unified	0	0	11,495	11,495
El Segundo Unified	0	0	3,227	3,227
Garvey	6,093	0	0	6,093
Glendale Unified	0	0	26,942	26,942
Glendora Unified	0	0	7,437	7,437
Gorman	2,049	0	0	2,049
Hacienda La Puente Unified	0	0	25,015	25,015
Hawthorne	9,275	0	0	9,275
Hermosa Beach City	1,073	0	0	1,073
Hughes-Elizabeth Lakes Union	370	0	0	370
Inglewood Unified	0	0	14,342	14,342
Keppel Union	3,178	0	0	3,178
La Canada Unified	0	0	4,269	4,269
Lancaster	16,407	0	0	16,407
Las Virgenes Unified	0	0	11,850	11,850
Lawndale	5,791	0	0	5,791



Figure 6 (Cont.)

**2006 – 2008 CHILD ABUSE DATA
Total District Enrollment**

School District	Elementary	High School	Unified	Total Enrollment
Lennox	6,479	0	0	6,479
Little Lake City	5,029	0	0	5,029
Long Beach Unified	0	0	99,408	99,408
LACOE	0	0	0	0
Los Nietos	2,250	0	0	2,250
Lowell Joint	3,121	0	0	3,121
Lynwood Unified	0	0	21,742	21,742
Manhattan Beach Unified	0	0	6,916	6,916
Monrovia Unified	0	0	12,234	12,234
Montebello Unified	0	0	74,978	74,978
Mountain View	9,877	0	0	9,877
Newhall	7,007	0	0	7,007
Norwalk-La Mirada Unified	0	0	24,335	24,335
Palmdale	22,767	0	0	22,767
Palos Verdes Peninsula Unified	0	0	12,034	12,034
Paramount Unified	0	0	22,039	22,039
Pasadena Unified	0	0	22,012	22,012
Pomona Unified	0	0	38,658	38,658
Redondo Beach Unified	0	0	25,830	25,830
Rosemead	3,174	0	0	3,174
Rowland Unified	0	0	22,548	22,548
San Gabriel Unified	0	0	5,526	5,526
San Marino Unified	0	0	3,220	3,220
Santa Monica-Malibu Unified	0	0	12,342	12,342
Saugus Union	10,458	0	0	10,458
South Pasadena Unified	0	0	4,193	4,193
South Whittier	3,864	0	0	3,864
Sulphur Springs Union	5,805	0	0	5,805
Temple City Unified	0	0	7,201	7,201
Torrance Unified	0	0	24,783	24,783
Valle Lindo	1,250	0	0	1,250
West Covina Unified	0	0	11,433	11,433
Westside Union	8,055	0	0	8,055
Whittier City	6,891	0	0	6,891
Whittier Union High	0	23,068	0	23,068
William S. Hart Union High	0	22,837	0	22,837
Wilsona	2,023	0	0	2,023
Wiseburn	2,200	0	0	2,200
TOTAL	170,725	115,645	783,500	1,069,870

APPENDICES

451 Categories of Abuse

453 Data/Information Sharing Committee Biographies



CATEGORIES OF ABUSE

A significant accomplishment of the Los Angeles Inter-Agency Council on Child Abuse and Neglect Data/Information Sharing Subcommittee in the 1980's was to provide Los Angeles area agencies with a common definition of child abuse to serve as a reporting guideline. One purpose of this effort was to achieve compatibility with reporting guidelines used by the State of California. Additionally, it was hoped that a common definition would enhance our ability to better measure the extent of our progress and our problems, independent of the boundaries of particular organizations. As you read the reports in this document you will see that this hope is certainly being realized.

Since their inception, the definitions have increasingly been applied by ICAN agencies with each annual report that has been published. This year's Data Analysis Report is no exception. This year, more than half of the reporting agencies have been able to apply them to their reports in one way or another.

The Data/Information Sharing Sub-committee hopes that as operational automated systems are implemented and enhanced by ICAN agencies, these classifications will be considered and more fully institutionalized. We believe that over time, their use will enable the agencies to achieve a more unified and effective focus on the issues.

The eight reporting categories are defined as follows:

PHYSICAL ABUSE

A physical injury which is inflicted by other than accidental means on a child by another person. Physical abuse includes deliberate acts of cruelty, unjustifiable punishment, and violence towards the child

such as striking, throwing, biting, burning, cutting, twisting limbs.

SEXUAL ABUSE

Any sexual activity between a child and an adult or person five years older than the child. This includes exhibitionism, lewd and threatening talk, fondling, and any form of intercourse.

SEVERE NEGLECT

The child's welfare has been risked or endangered or has been ignored to the degree that the child has failed to thrive, has been physically harmed or there is a very high probability that acts or omissions by the caregiver would lead to physical harm. This includes children who are malnourished, medically diagnosed nonorganic failure to thrive, or prenatally exposed to alcohol or other drugs.

GENERAL NEGLECT

The person responsible for the child's welfare has failed to provide adequate food, shelter, clothing, supervision, and/or medical or dental care. This category includes latchkey children when they are unable to properly care for themselves due to their age or level of maturity.

EMOTIONAL ABUSE

Emotional abuse means willful cruelty or unjustifiable inappropriate punishment of a child to the extent that the child suffers physical trauma and intense personal/public humiliation.



EXPLOITATION

Exploitation exists when a child is made to act in a way that is inconsistent with his/her age, skill level, or maturity. This includes sexual exploitation in the realm of child pornography and child prostitution. In addition, exploitation can be economic, forcing the child to enter the job market prematurely or inappropriately; or it can be social with the child expected to perform in the caretaker role, or it can be through technology through use of a computer, telephone, or the nexternet.

CARETAKER ABSENCE/INCAPACITY

This refers to situations when the child is suffering either physically or emotionally, from the absence of the caretaker. This includes abandoned children, children left alone for prolonged periods of time without provision for their care, as well as children who lack proper parental care due to their parents' incapacity, whether physical or emotional.



DATA/INFORMATION SHARING COMMITTEE



BIOGRAPHIES

Victoria Lewis Adams Committee Chairperson

Victoria Lewis Adams serves as the Head Deputy of the Family Violence Division of the Los Angeles County District Attorney's Office where she oversees the prosecution of specially assigned family violence cases that include domestic violence homicides, child homicides, domestic abuse, spousal rapes and child abuse charges. She also serves as the Chairperson of the Los Angeles County Domestic Violence Council and the Domestic Violence Death Review Team. She is co-chairperson of ICAN's Operations Committee and a member of Child Death Review. Ms. Adams has been a deputy district attorney for 23 years. Ms. Adams received a Juris Doctor degree from UCLA School of Law in 1983 and a Bachelor of Arts degree in General Humanities with an emphasis in English and Philosophy from Santa Clara University in 1980.

Sarita Carden

Sarita is a Supervisor at the Child Advocates Office/CASA of Los Angeles. During her 14 years as a child advocate, she served as a CASA volunteer before joining the staff of CASA of Los Angeles in 2000. As a CASA Supervisor she provides training, supervision, support, and expertise to CASA volunteers appointed by a judge to gather information, write reports, and make recommendations to the court in the best interests of abused, neglected, and abandoned children. She has a M.A. in Human Development.

Christopher D. Chapman, MA

Chris is a Programmer Analyst with the Los Angeles County Internal Services Department, Information Technology Service. Christopher has been with the County's Internal Services Department since January 1999, where he supports the ICAN Office and other County Departments with over 15 years of experience in Desktop Publishing, Graphic Design and Internet



Development. Chris received a Masters Degree in Organizational Management along with two other degrees, one in Visual Design and the other in Business Management.

Lisa Cheng

Lisa has seven years of experience in Desktop Publishing and custom printing and over ten years of experience in Graphic Design. She has been with Los Angeles County since November 2002. Lisa has worked in the Internal Services Department and has designed the ICAN Report since January 2007.

Ana Maria Correa

Ana Maria Correa is the Division Manager for the Social Services Systems Division (SSSD) of the Los Angeles County Internal Services Department, Information Technology Service (ISD/ITS). SSSD supports four County Departments: Child Support Services (CSSD), Children and Family Services (DCFS), Community and Senior Services (DCSS), and Public Social Services (DPSS). Ana Maria has a Bachelor of Science in B. A. with over 32 years of County service. Prior to this assignment, Ana Maria was the ISD/eCAPS Project Manager, working closely with the Auditor Controller and the CGI-AMS Project Managers on the implementation of Phase I eCAPS, the Countywide Accounting and Purchasing System that now processes the County's vendor payments; i.e. DCFS Foster Care payments. As the SSSD Division Manager, Ana Maria is responsible for providing workflow analysis, front-line supervision, project management, and technical expertise, support and maintenance of critical mainframe legacy applications while creating customer-friendly client tracking

systems by using new technologies. She joined the ICAN Data/Information Sharing Committee in 2005.

Brian L. Cosgrove

Brian Cosgrove is the Information Technology Manager of the Forensic Data Information Systems Division of the LA County Coroner. He is responsible to ensure that the Coroner is in alignment with the Countywide Strategic Plan for eGovernment. Mr. Cosgrove is an employee of the Internal Services Department, Information Technology Service, Information Systems Support Division. He earned a Bachelor of Science degree in Computer/Information Systems from DeVry Institute of Technology. Mr. Cosgrove has over 17 years of IT experience including infrastructure support, programming and analysis, technical leadership, front-line supervision, and project management.

Sandra DeVos, MSW, LCSW

Sandra is a Program Administrator for ICAN. She has primary responsibility for the Data/Information Sharing Committee and the Infants at Risk Committee. She also is responsible for the Child Death Review Team Report. Sandra also provides staff assistance to the Annual "Nexus" Domestic Violence Conference. Prior to joining ICAN, Sandra worked for the Los Angeles County Department of Children and Family Services (DCFS) for a period of twenty-nine years. The last several years while at DCFS, Sandra was a field instructor for one of the DCFS-IUC CSULA MSW intern units. While in this position, Sandra also provided clinical supervision to staff for their clinical license hours working toward an LCSW. Throughout her tenure with DCFS, Sandra has



been involved with staff training, program development and participated in various task forces and work groups. Saundra is a Licensed Clinical Social Worker.

Ruben Egoyan

Ruben is an Administrative Assistant II in the Information and Statistical Services Section of the Department of Public Social Services. He has been working with the Department since April 2001. He is responsible for reviewing and analyzing monthly statistical reports. Ruben is also a member of the User Acceptance Testing team for the Department's newly developed and implemented Data Warehouse. Ruben has a Bachelor of Science degree in engineering and a Master of Public Administration degree from California State University, Northridge. This is Ruben's second year as a member of the ICAN Data/Information Sharing Committee.

Marian M. Eldahaby

Marian is a Research Analyst II with Maternal, Child, and Adolescent Health Programs under the Los Angeles County Department of Public Health. In addition to her contributions to the ICAN Data Sharing report, Marian is also a co-coordinator of the Los Angeles Mommy and Baby (LAMB) and Los Angeles Health Overview of a Pregnancy Event (LA HOPE) survey projects. She earned her B.A. in Psychology and Social Behavior from the University of California, Irvine.

Jessica Gama

Jessica is the Ombudsman for the Los Angeles County Probation Department. In this capacity, she is vested with the responsibility to assist members of the community in

general and probationers in particular with departmental issues of fair treatment and equity. Jessica has worked in the following areas: substance abuse, domestic violence, juvenile justice, child welfare, administrative investigations and contracts development. Her interest and advocacy in mental health issues lead to her Board appointment to the Los Angeles County Mental Health Commission in 1993, representing the First District. Jessica earned a Bachelor of Art's degree from U.C. Berkeley with a double major in sociology and mass communications. She also earned a masters degree from the University of Chicago in the field of social work.

Sergeant Peter Hahn

Sergeant Peter Hahn is a detective with the Los Angeles Sheriff's Department assigned to the Special Victims Bureau (SVB). He has been a deputy sheriff for twenty-two years and has worked at four different patrol stations serving sixteen contract cites ranging from the inner-city to the San Gabriel Mountains. Sergeant Hahn has worked as a child abuse investigator and supervisor for the past two years and oversees a team of six detectives. Among other projects he is the Sheriff's Department representative for the Family and Children's Index System (FCI), the Centralized Case Management Work Group, and ICAN Data/Information Sharing Committee. Sergeant Hahn graduated from the Virginia Military Institute with a degree in Economics

John E. Langstaff, M.S.

John is a Children's Services Administrator II with the Department of Children and Family Services (DCFS) Bureau of Information



Services. In his 20 years with Los Angeles County, John has been a Children's Social Worker, worked for the DCFS Policy and Public Inquiry sections, and was a developer and manager of the DCFS Out-Stationed Training Program. In addition, John was a Program Analyst at ICAN for almost three years, working on the Data/Information Sharing Subcommittee, the Child Death Review Team, The National Center on Child Fatality Review, and various other projects. John earned a Bachelor's Degree in psychology from Whittier College and a Master of Science Degree in psychology from California State University, Los Angeles.

Dionne Lyman-Chapman

Dionne is a Senior Programmer Analyst with the Los Angeles County Internal Services Department, Information Technology Service. Dionne Lyman has been with the County's Internal Services Department since September 2001. She supports ICAN and various County Departments with over 15 years of experience Graphic Design and Web Development. Dionne earned a Bachelor of Arts in Illustration with a minor in Graphic Design from California State University, Long Beach.

Penny Markey

Penny is the Coordinator of Youth Services for the County of Los Angeles Public Library. She is responsible for developing library collections, programs and services for children from birth to age 18 and their parents and caregivers. In that capacity she has developed numerous programs for children and families including: Begin at the Beginning With Books, an early childhood literacy program targeting pre-natal moms

and their new babies; Home run readers, a reading motivation for school-age children in partnership with the Los Angeles Dodgers and Pacific Bell and a community service volunteer program to provide teens with workforce readiness skills. Penny has served as adjunct professor in the School of Education and Information Science at UCLA.

Thomas Nguyen

Thomas is a Children's Services Administrator I in the Statistics Section of the Department of Children and Family Services. He has been with the department since 1988 and has been involved with the ICAN Data/Information Sharing statistical report since 1991. Mr. Nguyen graduated from Hope College, Holland, Michigan with a Bachelor of Arts degree in Business Administration and minor in Computer Science and Spanish.

Nina Prays

Nina Prays is the Section Manager for the Community and Senior Services Section within the Social Services Systems Division of ISD. Nina Prays has a Masters Degree in English as a Second Language and over 25 years in Information Technology experience. Prior to this assignment, Nina was a Principal Developer Analyst with Justice Systems. Among other projects she was also involved with the Family and Children Index System (FCI), also servicing the needs of the ICAN Data/Information Sharing Committee. This is Nina's first year as a member of the ICAN Data/Information Sharing Committee.



Kimberly Wong

Kimberly Wong is the legislative and criminal justice policy advisor for the Los Angeles County Public Defender's Office. As a deputy public defender of 10 years, she has conducted numerous felony and misdemeanor trials as well as juvenile adjudications. Through the Public Defender's Public Integrity Assurance Section, Ms. Wong drafted motions and writs for clients in post-conviction cases involving police misconduct.

Ms. Wong also assists incarcerated domestic violence survivors in seeking post-conviction relief. In the Public Defender's office, Kimberly was actively involved in developing in-house seminars for about 1000 employees on topics of race bias and gender bias. She is a member of the Habeas Project Advisory Committee, whose goal is to expand access to justice for survivors of domestic violence.

David Zippin, Ph.D.

David Zippin is Chief Research Analyst with the Child and Family Programs Administration of the Los Angeles County Department of Mental Health. He is involved with the development, implementation and analysis of children's treatment outcome instruments, as well as tracking clients in intensive treatment programs. He received his Ph.D. from University of Iowa specializing in Social Psychology and Research Methods. He also completed a two-year NIMH postdoctoral training program in mental health program evaluation in the School of Public Health at UCLA, and a one-year USPHS postdoctoral fellowship in pediatrics at Harbor/UCLA Medical Center.

