

**STATE OF DELAWARE**  
**JUSTICE OF THE PEACE TRUANCY COURT**  
*Therapeutic, Strengths-Based, Trauma-Informed*

**ANNUAL REPORT**  
**JULY 2016 - JUNE 2017**

*“Education is all a matter of  
building bridges.”*

*- Ralph Ellison*



## **Mission**

It is the mission of the Justice of the Peace Truancy Court to serve the people of Delaware by supporting and collaborating with school districts in their early intervention efforts to address the obstacles to regular attendance for a critically at-risk segment of the state's population.

## **The Truancy Court Model**

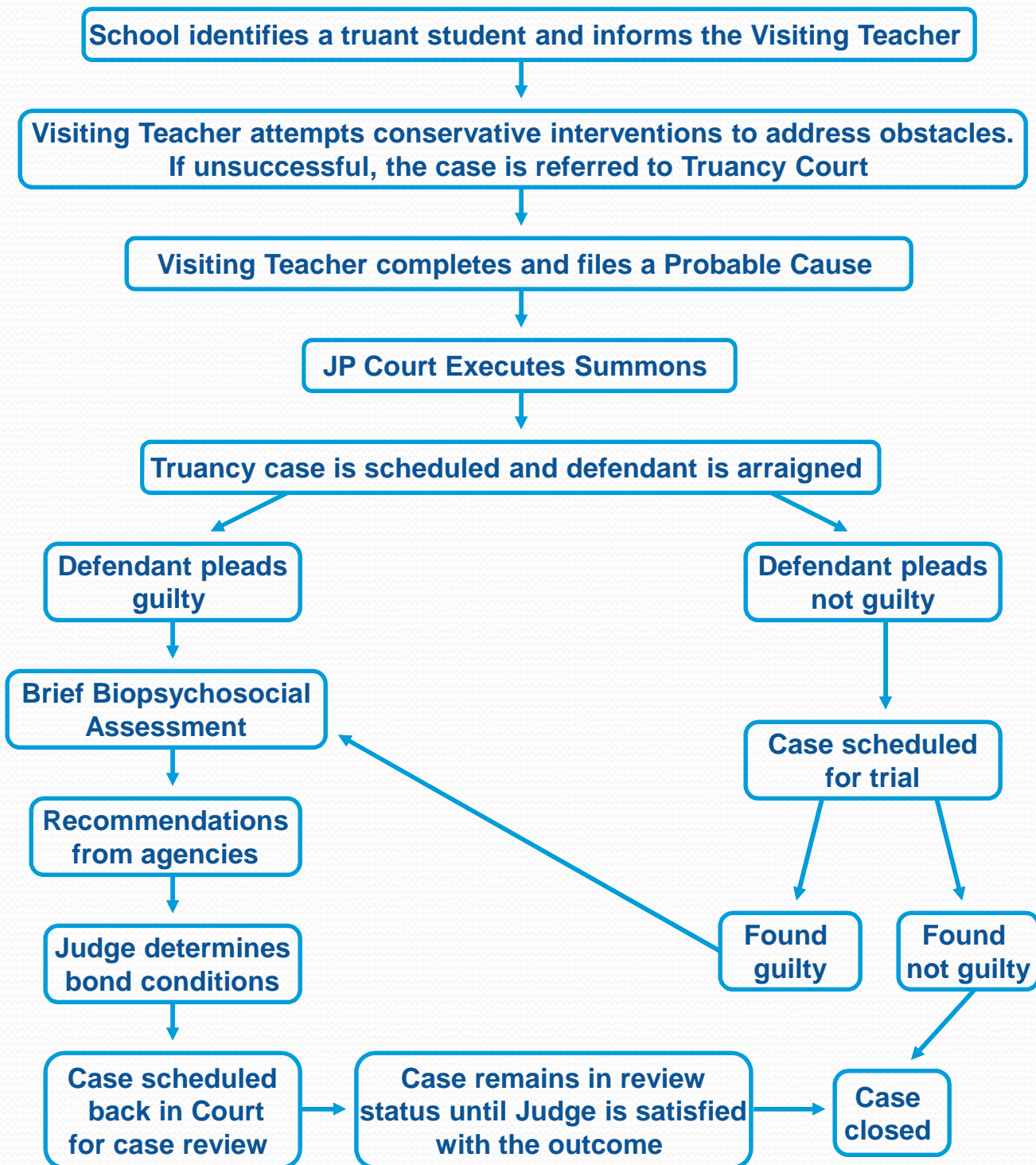
Truancy Court provides the authoritative presence, community resources, and collaborative planning for those students and families requiring intervention beyond the district level. Outreach efforts are aimed at addressing attendance problems and achieving compliance with Delaware's attendance laws. Truancy historically has been a reliable predictor of juvenile delinquency and often is a signal of personal and/or family issues that have gone without appropriate interventions. Some of these issues include homelessness, mental illness, substance abuse, child abuse/neglect, unmet educational needs, and limited access to healthcare.

Delaware's Truancy Court serves as the hub for the support services necessary to address these issues, thereby increasing the likelihood of consistent school attendance. Truancy Court is innovative in its remedial, non-punitive approach to improving school attendance, as opposed to the more discipline-based measures of enforcing the law and mandating change seen in traditional court settings.

This comprehensive, wraparound approach to addressing truancy has proved to be an effective intervention strategy when cases reach the judicial level. We collaborate with multiple agencies in our ongoing efforts to address the multi-domain student and family obstacles negatively impacting attendance and academic achievement.



## How a Case Enters Truancy Court



## **A Recipe for Success – Truancy Court Best Practices**

Specific to the therapeutic nature of the process and pursuant to recommendations of the National Center for School Engagement regarding truancy intervention programs, Truancy Court continues to utilize the following best practices:

### Collaboration

- ❖ We collaborate with multiple agencies in our ongoing efforts to address multi-domain student and family obstacles negatively impacting student attendance and academic achievement.
  
- ❖ Our partners include:
  - Local school districts
  - Department of Education
  - Division of Youth Rehabilitative Services
  - Division of Prevention and Behavioral Health Services
  - Division of Family Services
  - Office of the Attorney General
  - Office of the Public Defender
  - Private providers
  - Community agencies

### Family Involvement

- ❖ We partner closely with parent/guardians and students in the development of case intervention plans.
  
- ❖ Parents are encouraged to be active members of the intervention team. As much as possible, parents are asked to drive the implementation of the plan to address their children's attendance problems.



## Comprehensive Approach

- ❖ We employ a comprehensive, wraparound approach to addressing truancy.
- ❖ We utilize a broad continuum of behavioral health and other community-based services to address student and family dysfunction across multiple life domains.
- ❖ Our program is therapeutic and problem-solving in theory and practice, embracing a strengths-based approach to student and family interventions. Student and family strengths are identified and serve as the foundation for goal-directed solutions.

## Use of Incentives and Sanctions

- ❖ Judges collaborate with Visiting Teachers, parents, and students to identify creative incentives based on students' interests. Examples include allowing participation in enjoyable recreational activities, lifting restrictive conditions, and allowing increased independence and a role in decision-making.
- ❖ Multiple sanctions are available, as needed, including curfews, GPS monitoring, pre-adjudicatory services, and criminal contempt. GPS provides crucial community monitoring and data on which future interventions are based.

## A Supportive Context

- ❖ Truancy Court exists as part of a larger system committed to reducing truancy and dropouts. It is but a step in the overall intervention process, one supported by local districts, the Department of Education, and multiple state agencies.
- ❖ As part of the process, we've supported and been an agent for systemic change, including code change requiring earlier intervention at the district level.



## The Visiting Teachers

Visiting Teachers are the district representatives responsible for filing truancy charges with Truancy Court. Over the past four years, there have been 4,986 cases filed with the Court. The Visiting Teachers are not only responsible for filing failure to send/attend charges, but also for the ongoing monitoring of attendance and academic performance of each case until closure with Truancy Court. The Visiting Teachers attend arraignments and all subsequent case reviews, serving as the primary source of information for the Judges.

In addition, their close monitoring between case reviews allows for swift intervention, should a case deteriorate and require more immediate action by the Court. If Truancy Court is better viewed as a fluid reaction of events, then the Visiting Teachers are the catalysts, precipitating the energy for positive change. Their work, however, begins long before truancy charges are filed with the Court. The filing of charges against a parent and/or student represents the more aggressive intervention in addressing truancy. Prior to this step, the Visiting Teachers utilize more conservative, but no less vital, measures in an effort to engage parents and students.

These strategies can include face-to-face meetings with parents, students, and school staff (in the home or school), agenda books, attendance contracts, tutoring, transportation assistance, after-school programming, and reviews of special education components.

In summary, the Visiting Teachers use their diverse experiences in education, counseling, social work, and administration to comprehensively assess cases and identify not only the obstacles to regular attendance, but also the solutions. It is only after their considerable efforts have proved insufficient that they go the Truancy Court route. It is important to recognize their substantial outreach efforts on behalf of Delaware's students.



## **The Truancy Court Judges and Case Management Staff**

A review of the Truancy Court landscape set against the backdrop of an annual report would be incomplete without mentioning the roles of the Judges and Truancy Court staff. The Judges' training, experience, and diverse backgrounds provide for innovative interventions, uniquely nurturing yet authoritative guidance, and insights necessary for serving a wide range of student profiles, from the fifth grader with 10 unexcused absences to the 15 year old on probation, whose days out of school far outnumber those attended.

Truancy Court's case management staff support treatment planning and service implementation, from obtaining signatures on consent forms to making referrals to providing key follow-up in between hearings to maximize the chances for success. Truancy case managers are the primary contacts for Visiting Teachers, parents, and providers.

## **Truancy Court Resources**

The Truancy Court intervention process is founded on the idea of customizing a case plan for each student/family. Resources for these plans can range from behavioral health services to tutoring to food and utilities assistance. Information for such supports can be found in the Truancy Court Bench Book, which is available at each of the three Truancy Court locations. The Bench Book is an essential tool for Judges and case management staff. It is regularly reviewed and updated to include a well-organized and comprehensive list of resources and evaluative tools across multiple intervention areas. Included are behavioral health providers, substance abuse treatment protocol, career exploration and educational support tools, human services resource guides, and biopsychosocial and referral forms.



## Trauma and Barriers to Service

It is important to recognize not only the trauma experienced by some of our Truancy Court clients, but also the barriers to crucial services. The barriers alone can be traumatic experiences. They include, but are not limited to, the following (Edmund & Bland, 2011):

Fear of being judged: Many families are reluctant to seek assistance due to embarrassment, past negative experiences, or judgments by service providers that they are lazy or lack the initiative to make positive changes in their lives.

Fear of being denied services: Families receiving public assistance often are reluctant to reveal the presence of domestic violence for fear of termination of their benefits. This would include revealing such information in a courtroom setting.

Inability to pay for services: Despite the fact that many community-based support services and advocacy programs are offered free-of-charge, other expenses (including transportation and childcare) can be obstacles to accessing needed resources.

Lack of an adequate safety plan: Poverty compromises the ability to ensure the safety of oneself and family members. If this core need cannot be met, implementing a sequence of intervention services will be difficult, if not impossible.

## Poverty's Impact

Poverty is but one of many obstacles Truancy Court families may face. According to research by the Southern Education Foundation, the majority (51%) of U.S. public school students are now from low-income families. Eligibility for the federal lunch program was the basis for determining low-income status. While such eligibility is not a precise indicator of poverty, it does demonstrate a disturbing trend.



Poverty is a reliable predictor of a host of obstacles to which more privileged students and families are not exposed.

Poverty is a major red flag indicating an increased probability of trauma. It can present a substantial challenge to those trying to access services, escape violence, or change their social/financial/family dynamics. The majority of families we see in Truancy Court are of low-income status.

Among our adult truancy defendants, women are much more likely to be charged than men. And women are more likely to suffer from poverty than men. Speaking to how interwoven poverty and violence can be, multiple studies have demonstrated that more than 50% of women receiving public assistance have been victims of physical abuse during their adult lives, and many more were physically and/or sexually abused as children (Edmund & Bland, 2011).

A Michigan study (Satyanathan & Pollack, n.d.) found that roughly 70% of domestic violence victims did not report the abuse to their TANF workers. The same study discovered that among those that did report the abuse, approximately 75% did not receive appropriate benefits/supports.

## **Empowering and Supporting Families**

Truancy Court's efforts to empower families and provide comprehensive support are rooted in the following:

- ❖ Customizing intervention plans to meet individual needs, paying particular attention to past/current trauma and family strengths.

- ❖ Encouraging parents and students to be active members of the intervention team. As much as possible and with the assurance of a support network, we ask parents to drive the implementation of the case plan.
- ❖ Ensuring that partnerships with families are characterized by respect, dignity, compassion, understanding, listening, and validation.
- ❖ Ensuring a safe environment where sensitive information can be disclosed.
- ❖ Identifying creative incentives based on students' interests. Examples include encouraging/allowing participation in enjoyable recreational activities, lifting restrictive conditions, and fostering increased independence and a role in decision-making.
- ❖ Ensuring that sanctions (when necessary) have therapeutic value, are goal-directed, and consider the importance of minimizing the risk of re-traumatization.
- ❖ Utilizing Visiting Teachers as a bridge between case reviews, entrusting them with key monitoring and case management activities, and clearly delineating the expectations of the Court.
- ❖ Informally screening for untreated medical conditions and encouraging follow-up. This includes referring for Medicaid. Applications are available in the Bench Books. Families coping with poverty often delay treatment and/or unnecessarily suffer with their conditions.

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*“Children are barometers of the chaos that exists within their lives.”*

*– Asa Don Brown*

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## **Tools for Truancy Judges**

Beyond both formal and informal continuing education opportunities on the topic of trauma-informed care, the truancy judges have been equipped with a variety of tools and resources designed to be sensitive to the trauma histories of students and their families. Examples of such include the “Bench Cards for the Trauma-Informed Judge” from the National Child Traumatic Stress Network.


While the entirety of these documents is not applicable to the Truancy Court process, given some of the child protective references, the bulk of the information is quite useful. The first card serves as a guide for the information gathering process. The second is a sample addendum designed to support court-ordered assessments.

In addition, the judges have been provided with a checklist of district interventions, which includes questions intended to generate a profile of student/family functioning. Although limited in scope, relative to the comprehensive biopsychosocial form in the Bench Book, it provides a more user-friendly way of collecting important background information on a truancy case. It can be a helpful guide at arraignment and during subsequent hearings, with the understanding that it could be difficult to collect all relevant background information during the first meeting with a family.

## **Behavioral Health Case Planning**

The enmeshment of addiction and mental illness can present considerable obstacles for clients active with Truancy Court. Several case examples speak more specifically to the challenges of ensuring a positive connection with dual-diagnosis treatment. Many client profiles demonstrate how trauma can catalyze a vicious chain of events, including self-medication, abuse of oneself and others, deteriorating mental health, misdiagnosis, and detrimental assumptions.





The harsh realities of some of our clients' histories call for patience, compassion, and perseverance. Although judges and case managers are not addictions, mental health, or trauma-response specialists, their roles are critical in providing brief interventions as a “bridge” to more intensive services. At the Truancy Court level, we can begin building that “bridge” by utilizing motivational interviewing practices to foster positive engagement during our hearings and ancillary contact with defendants, their families, and providers.


Such practices would include reassuring a client and/or family (again directly or through nonverbal indicators) of a safe environment, which includes the confidentiality of the information they share. While part of our charge is necessarily enforcement-based, our relationships with clients and community partners can be characterized as family-focused and collaborative, notable for therapeutic accountability in case planning and decision-making.

These trauma-informed approaches emphasize empowerment, respect, and recognition of clients' distinct histories. This recognition is not limited only to one's trauma history. Noting a person's strengths can be a powerful motivator, validating one's contributions across multiple life domains and helping to minimize the risk of re-traumatization.

### **Spotlight on an Overlooked Issue: Sleep Disturbance in Juveniles**

Whether it is from parent or student reports, we often hear about sleep problems as a contributing factor in truancy cases. Sometimes that appears to be a convenient excuse (perhaps deflecting from another issue), but there are those cases where a sleep study may be the appropriate course of action. Determining which students might benefit from such a referral can be challenging.





Historically, psychologists and physicians have estimated that as much as 30% of children and adolescents may be dealing with a sleep disorder. Symptoms vary, so it's important to be aware of parent/student reports of the following symptoms (Dawson, 2004):

- ❖ Breathing difficulty while sleeping
- ❖ Combativeness/refusal at bedtime
- ❖ Insomnia
- ❖ Sleepwalking
- ❖ Night terrors
- ❖ Odd sleep patterns or behaviors
- ❖ Sleepy/groggy during the day
- ❖ Bedwetting

Further compounding the problem is the impact of trauma on sleep. Not surprisingly, research by the American Academy of Sleep Medicine has demonstrated that witnessing violence decreases quality and amount of sleep. And victims of violent acts are affected even more.

The amount of sleep children require differs by age range. The following guidelines are according to the Centers for Disease Control and Prevention:

- ❖ Preschool-aged children: 11-12 hours per day

- ❖ School-aged children: 10+ hours per day
- ❖ Teens: 9-10 hours per day

Truancy judges have been equipped with handouts containing tips for improving sleep quality for children and adolescents/young adults.

Beyond the obvious impacts on school attendance, academic achievement, and overall health, research has established a link between poor/insufficient sleep and an increased risk of substance abuse among teens. The following link provides a great article on the topic.

<http://www.medicalnewstoday.com/releases/288191.php>

Regarding insurance coverage for sleep assessments, Medicaid Customer Relations informed the Court that sleep medicine/sleep study services can be covered if the patient is referred by the primary care physician (PCP). The service requires pre-authorization by one of the two Medicaid managed care organizations (MCOs). Multiple criteria must be met before the PCP will refer, and the MCO will conduct a thorough review to determine medical necessity. Some PCPs refer children to a pediatric neurologist for evaluation.

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*“The conflict between the will to deny horrible events and the will to proclaim them aloud is the central dialectic of psychological trauma.”*

*- Judith Lewis Herman*

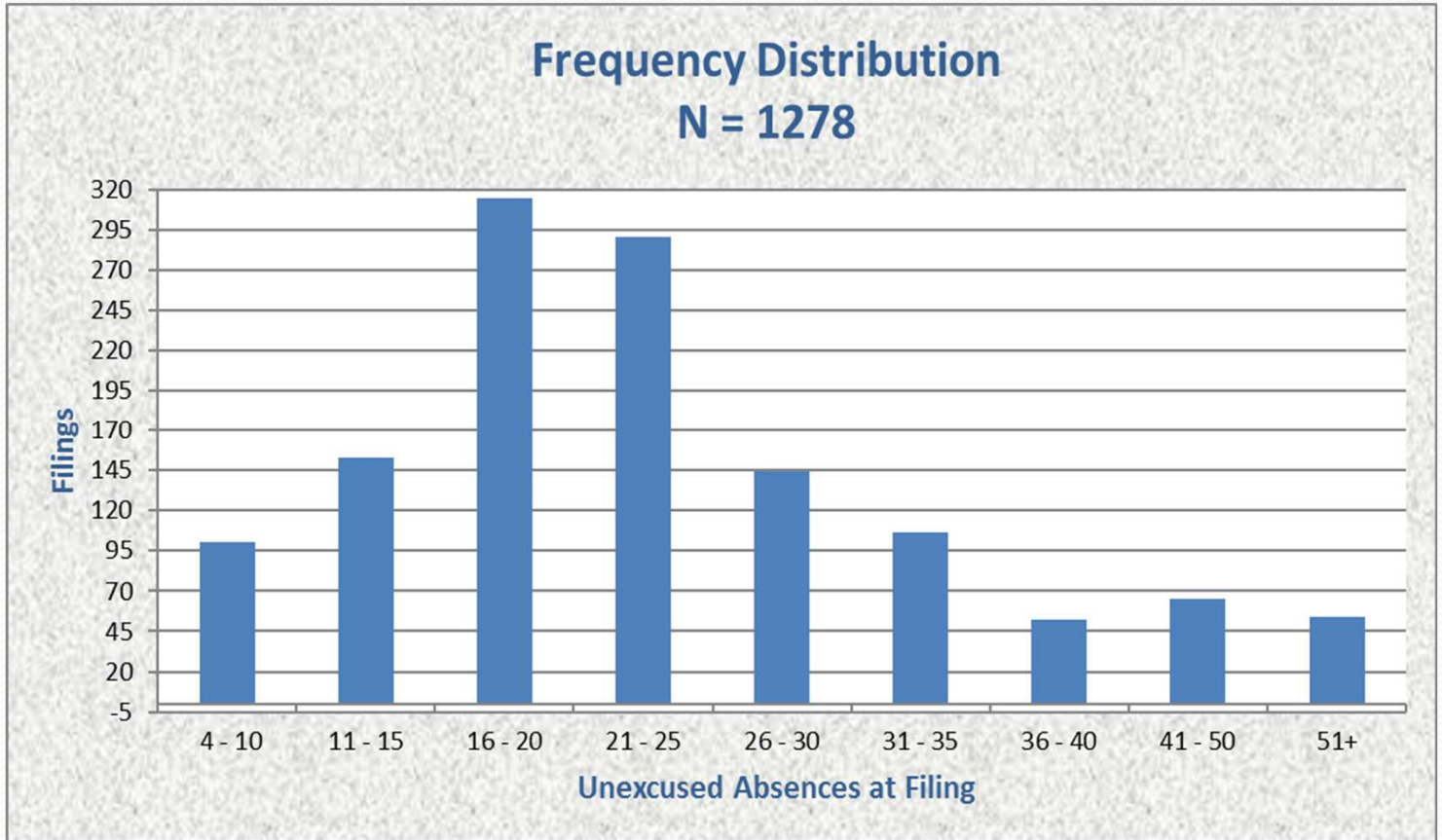
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## Statistical Markers for 2016-2017

### Filings

- 1278 new filings, compared to 1265 for 2015-2016.
- Statewide filing rate: 0.9%
  - The filing rate is shown as a percentage of total statewide enrollment.
  - Enrollment for the 2016-2017 school year: 137,217.
- Among all districts, Christina had the most filings at 243.
  - This represents the most cases Christina SD has ever filed in one school year.
  - Capital's filing rate: 2.6%, highest in the state.
- Lake Forest had the second highest filing rate at 2.1%.
- Smyrna had the lowest filing rate at 0.05%. Laurel was second lowest at 0.1%.
- Unexcused absences across 1278 filings:
  - Mean: 24.3 (2015-2016: 24.7)
  - Median: 22
  - Range: 86 (H - 90, L - 4)
  - SD: 12.7



- Mean age at filing: 13
  - This is consistent with the previous six-year average (13).
  
- Mean grade at filing: 6.4
  - This is consistent with the previous six-year average (6.4).



## Cross Comparison of Truancy Case Filings

<b>NEW CASTLE COUNTY</b>	<b>2011-12</b>	<b>2012-13</b>	<b>2013-14</b>	<b>2014-15</b>	<b>2015-16</b>	<b>2016-17</b>
Appoquinimink	30	32	30	38	33	21
Brandywine	135	136	141	233	190	165
Christina	124	156	124	131	115	243
Colonial	109	99	160	82	96	85
Red Clay	101	109	94	102	189	114
NCC Vo-Tech	1	1	1	1	7	6
Charter Schools	42	44	46	32	43	61
<i>TOTAL</i>	<i>542</i>	<i>577</i>	<i>596</i>	<i>619</i>	<i>673</i>	<i>695</i>
<b>KENT COUNTY</b>	<b>2011-12</b>	<b>2012-13</b>	<b>2013-14</b>	<b>2014-15</b>	<b>2015-16</b>	<b>2016-17</b>
Capital	98	71	62	206	208	168
Caesar Rodney	151	74	87	119	122	121
Lake Forest	49	40	65	75	86	80
Smyrna	15	27	20	14	3	3
Poly Tech	0	0	0	8	24	3
Charter Schools	13	26	2	11	27	10
<i>TOTAL</i>	<i>326</i>	<i>238</i>	<i>236</i>	<i>433</i>	<i>470</i>	<i>385</i>
<b>SUSSEX COUNTY</b>	<b>2011-12</b>	<b>2012-13</b>	<b>2013-14</b>	<b>2014-15</b>	<b>2015-16</b>	<b>2016-17</b>
Charter	3	2	0	0	1	0
Cape Henlopen	62	24	79	46	29	44
Delmar	18	25	33	17	16	19
Indian River	235	92	66	48	76	57
Laurel	60	35	15	31	15	2
Milford	22	17	17	18	18	16
Seaford	11	19	23	30	55	39
Woodbridge	26	17	18	18	12	21
<i>TOTAL</i>	<i>437</i>	<i>231</i>	<i>251</i>	<i>208</i>	<i>222</i>	<i>198</i>
<b>GRAND TOTAL</b>	<b>1305</b>	<b>1046</b>	<b>1083</b>	<b>1260</b>	<b>1365</b>	<b>1278</b>

## Dispositions

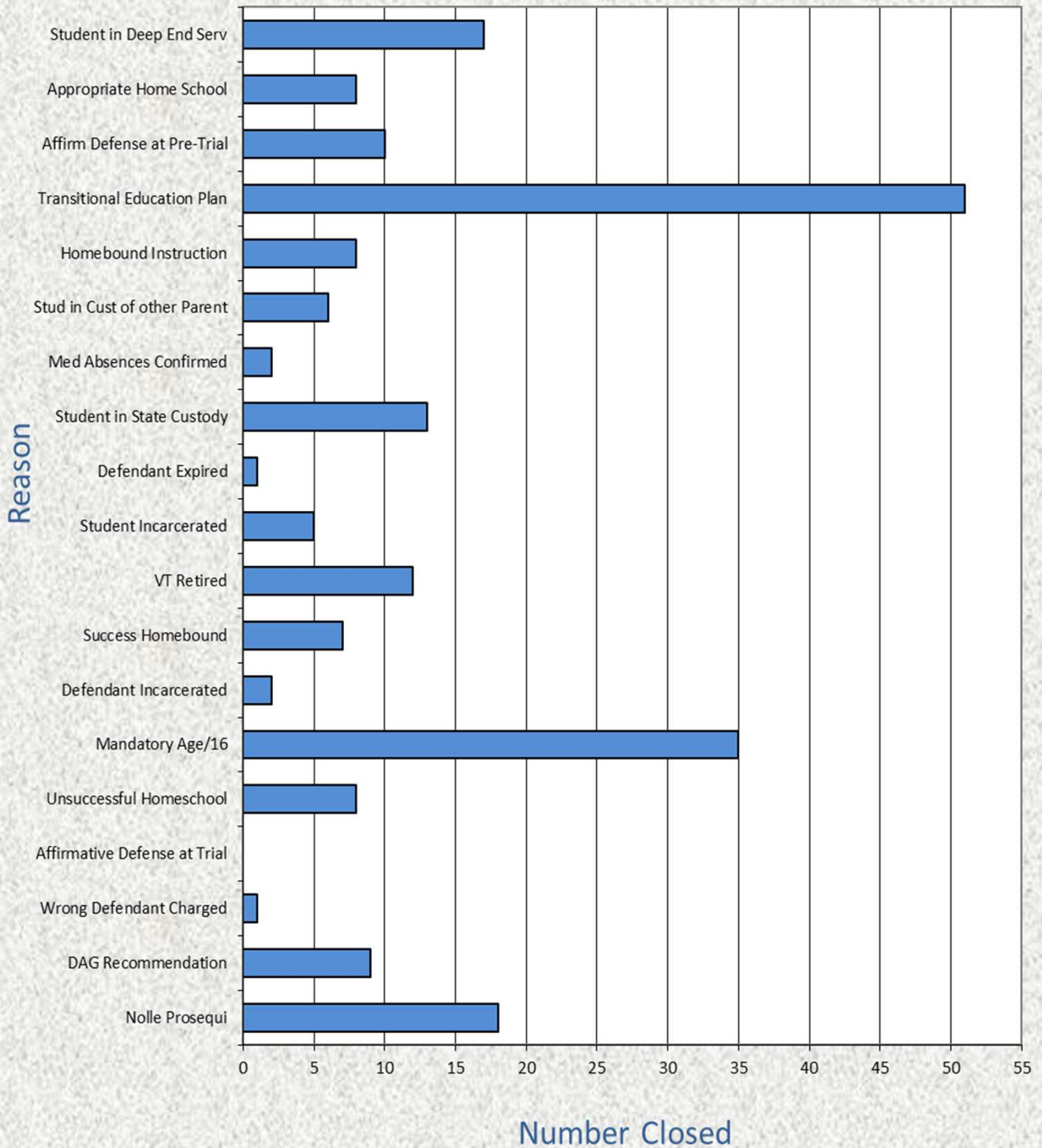
- 1155 cases were closed during the 2016-2017 school year.
  - This represents a decrease from 2015-2016 (1415).
- 38.4% achieved compliance with Truancy Court.
  - This represents a decrease from the previous four-year average (41%).
- 4.4% were closed as non-compliant, unsuccessful outcome.
  - This represents a decrease from the previous year (7.1%).
- 117 cases were closed via Visiting Teacher dismissal, representing 10% of all cases closed.
  - This is nearly identical to 2015-2016 (9.8%).
- 108 cases were closed due to defendants' relocating out of state, representing 9.3% of all cases closed.
  - As a percentage of dispositions, this is an increase from 2015-2016 (7%).
- 184 cases were closed due to defendants' relocating in Delaware, representing 16% of all cases closed.
  - As a percentage of dispositions, this is a 5.3% increase from 2015-2016.
- 38 cases were closed due to a lack of prosecution, down from 100 last year.

**The remaining 213 cases were closed across 18 other disposition codes, as shown in the following graph.**



## Truancy Cases Closed 2016-2017

N = 213



## Determining Case Dispositions

As indicated above, we closely track filings by district, unexcused absences at filing, average grade at filing, and average age at filing. This, along with detailed demographic data allows us to provide constructive feedback to the districts and the Department of Education. However, that paints only part of Truancy Court's statistical picture. The remainder is viewed in the form of case outcomes.

The primary consideration in determining "compliance – successful outcome" is the degree of improvement in attendance. As a general rule, students achieving "compliance" with the Court will have demonstrated an 80% - 90%, or greater, reduction in the rate of unexcused absences, when compared with the attendance record at filing.

A secondary consideration in determining "compliance" is a student's academic performance. Insofar as a student's academic achievement can be linked to his/her attendance, performance in this area can be considered as part of the overall determination of case success.

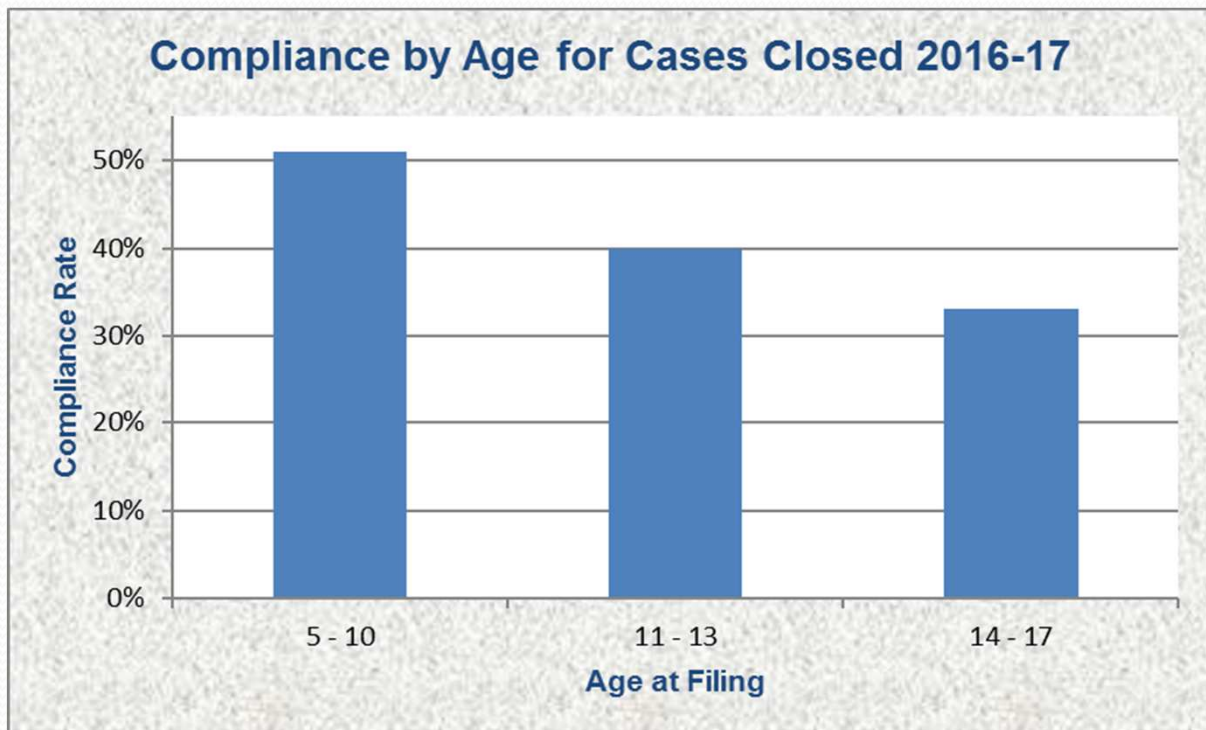
While seeing a student return to school and achieve "compliance" with the Court is the ultimate goal, there are other outcomes that can be positive in nature. These include "appropriate home school plan" and "successful homebound" dispositions. Outcomes like these are not considered as part of the Court's compliance rate, but they are noteworthy relative to the many final disposition possibilities.

Historically, the Court has made extensive efforts to be as specific as possible when it comes to identifying the reason for final disposition on a case. This aids in program evaluation, judicial feedback, and interdepartmental collaboration/communication.



## Early Intervention and Successful Outcomes

As the following graph demonstrates, younger students are more likely to achieve success with Truancy Court. Early intervention, coupled with a trauma-informed, system-of-care approach has been shown to improve outcomes across a full range of environments, from schools to Courts to communities.



The above compliance rates are consistent with the previous five-year trend.

## Interpreting Compliance Rates and Dispositions

It is important to consider the above-referenced compliance rates relative to the status of truant students and families once they reach Truancy Court. With a statewide filing rate of 0.9% out of 137,217 students (for 2016-2017), the Justice of the Peace Court receives the most challenging cases, those where school-based interventions have failed or resulted in only minimal improvement. With that in mind, the 38.4% compliance rate for 2016-2017 is all the more significant.

More than 60% of defendants in Truancy Court are active with behavioral health treatment. Many of the defendants the Court sees have co-occurring mental health and substance abuse issues. The topic of psychiatric comorbidity becomes more relevant when considering its impact on treatment compliance, especially regarding substance abuse treatment. While parents are sometimes referred for substance abuse treatment, the majority of such referrals are juveniles. A co-occurring mental illness often increases the likelihood of relapse, an obstacle to success requiring careful consideration, calculated planning, and patience.

Behavioral health dysfunction is but one obstacle among many possible presenting symptoms of families appearing in Truancy Court. Other issues include but are not limited to:

- ❖ Chronic health conditions and illness (e.g., asthma, ADHD).
- ❖ Alienation from people of authority.
- ❖ Little or no interest in education or available academic curricula.
- ❖ Poor academic performance.
- ❖ Perceived lack of parental commitment to education.
- ❖ Insufficient parental supervision.
- ❖ Lack of age-appropriate rewards/reinforcers and/or consequences.
- ❖ Taking on responsibilities usually reserved for adults.
- ❖ Fear of violence in the community or in the school setting, including bullying.
- ❖ Educator indifference.
- ❖ Learning disabilities/special education needs.
- ❖ Teen pregnancy.
- ❖ Lack of school connectedness.
- ❖ Domestic violence.
- ❖ Poverty/lack socioeconomic resources.
- ❖ Specific trauma, family history of trauma.



While there are many variables and risk factors associated with truancy and dropout, they can be divided into two categories, *status variables* and *alterable variables* (Lehr, Johnson, Bremer, Cosio, & Thompson, 2004). *Status variables* are static, and *alterable variables* are those areas more open to community, school, and family interventions. Examples of both types can be seen below. Given the relative impact of each, the Court’s success is contingent on our ability to “bridge” the gap between need and intervention. Despite the myriad of possible impediments, Truancy Court is able to effectively offer individualized attention to families, customize case plans, and serve as a viable, proven intervention strategy for Delaware’s school districts.

<b>Status Variables</b>	<b>Alterable Variables</b>
Age	Grades
Gender	Disruptive behavior
Socioeconomic background	Absenteeism
Ethnicity	School policies
Native language	School climate
Region	Parenting
Mobility	Sense of belonging
Ability	Attitudes toward school
Disability	Educational support in the home
Parental employment	Retention
School size and type	Stressful life events
Family structure	

(National Dropout Prevention Center, 2005 from Lehr, Johnson, Bremer, Cosio, & Thompson, 2004)

## A Case Example

A parent appeared in Truancy Court for arraignment for failure to send her child to school. The child was under 12 years of age. The language line was used, as the defendant could speak very little English. The child and older sibling were also present.


Mother presented to the Judge the following history for her family:

*Mother had been in the United States for a few years and was divorced. The divorce was the culmination of a series of domestic violence events perpetrated by the ex-husband against mother and the two children. One child suffered significant medical problems as a result of the attacks, and mother was seriously assaulted on numerous occasions. As a result, mother suffered from depression and presented with occasional suicidal ideation. The Visiting Teacher, who was present in the courtroom, also voiced concern regarding mother's suicidal tendencies. Mother was doing her best to support the family on minimal child support payments and money she earned cleaning houses. Medical bills from the long history of trauma totaled over \$20,000.*

As part of the case intervention plan, the Judge made family counseling part of the bond conditions.

Mother was very concerned about not having any medical coverage for herself and one of the children (as a result of each being born in another country). Mother further indicated that she was able to obtain medical coverage for her other child, who was born in the United States.





The Judge asked the truancy case manager to follow mother to the local State Service Center (SSC) after the hearing to assist in investigating the availability of any additional benefits.

Upon arriving at the SSC, mother, the children, and the truancy case manager met with a DHSS supervisor/case worker. After the truancy case manager relayed the family's presenting issues and explained the gap in services, the case worker made several calls. She made arrangements for mother to apply to the Community Healthcare Access Program (CHAP), which provides access to primary care doctors and medical specialists, and helps with access to other health resources - including prescription programs and laboratory and radiology services.

After assisting with the CHAP application, the DHSS case worker facilitated the scheduling of an appointment at Peoples Place for an intake assessment and family counseling.

Upon learning of the domestic violence history, the case worker referred mother to the Victims' Compensation Assistance Program (VCAP). This allowed mother to apply for relief to cover some of the financial burden resulting from the domestic violence she and her children suffered.

Further review of mother's case revealed possible eligibility for additional food stamp benefits. A separate appointment was made for mother to return to the SSC to complete any necessary applications/paperwork.

While this is a unique case, it is indicative of the family-focused, individualized, wraparound planning and intervention defendants receive while active with Truancy Court.

# Thank You

Among the countless interactions between students and families, Visiting Teachers, Judges, truancy case managers, behavioral health providers, and community partners, it is easy to forget the people behind the scenes. Those individuals who provide the community outreach, maintain safety in the courtrooms, and process the paperwork for thousands of case events are as vital to the system as any of the aforementioned components. They set the example and a standard of teamwork from which all of us could learn. Without them, the system would surely come to a halt. It is important to recognize these dedicated, Judicial Case Processors, Supervisors, Security Officers, Constables, and Court Managers for their immeasurable contributions.



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