## 1. Program

a. State the selected evidence-based program.

In its commitment to ensure the most appropriate evidence-based interventions, Lowndes County seeks to offer Functional Family Therapy (FFT) to eligible youth and families this fiscal year. The Lowndes County Juvenile Court will partner with Evidence-Based Associates to provide FFT as a top-tier, evidence-based diversionary service for medium to high-risk youth who are at risk of commitment to the custody of DJJ.

FFT was chosen as it matches the needs of the current at-risk population and has been effective in reducing delinquency in the state. Improved family functioning, flexible meeting times, and inhome sessions have resulted in very high engagement rates among families receiving FFT.

## 2. Statement of Need/Summary

- a. Provide a clear and concise statement of need, including the following:
  - i. At-risk population = 27,186
  - ii. New instances of secure detention (RYDC) = 76
  - iii. Cases resulting in commitment to DJJ = 12
  - iv. New instances of confinement in secure juvenile correctional facilities(YDC) = 3
  - v. Adjudicated Offenses = 99
  - vi. PDRA Scores = 100
- b. Brief description of the activities requiring CJCC funds.

The Lowndes County Juvenile Court is requesting funds to serve 54 youth and families in the Functional Family Therapy (FFT) program during the FY2026 grant year. FFT consists of five major components: engagement, motivation, relational assessment, behavior change and generalization. Each of these components has its own goals, focus and intervention strategies, and techniques that target problem behaviors such as delinquency, substance abuse and violence. It is a short-term treatment strategy that is built on a foundation of respect for individuals, families and cultures that includes effective treatment strategies that pave the way for motivating individuals and families to become more adaptive and successful in their functioning. Over thirty years of rigorous research nationally, including several randomized clinical trials that have been published in peer-reviewed journals, document the success of the FFT program with a wide array of youth and families.

FFT focuses on treating youth aged 11-18 with very serious problems such as conduct disorder, violent acting-out, and substance abuse. The FFT clinical model identifies specific treatment phases that organize the intervention in a coherent manner so that clinicians maintain focus in the context of family and individual disruption. FFT belief is that the motivation of a family is to a great extent the responsibility of the therapist, not just the family. The intervention is home-based. The frequency of contacts between the therapist and the family depends on the stage of treatment, with more frequent contacts in the beginning of the intervention. Techniques and