

What's Behind the Curtain?

New Research in Juvenile Drug Court Practices

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What are we talking about today?

- Is there evidence that juvenile drug courts can be effective?
- What are best practices in drug courts and how do these align with what we see in juvenile drug court operations?
- What are current juvenile drug court practices in operational drug courts?
- How do TA requests to NCJFCJ align with JDC practice needs?



Are juvenile drug courts effective?

Yes! **But not always....**

Depends on how (and if)
the program is implementing the model



Are juvenile drug courts effective?

Mixed Results:

- Latessa in 2013 – reported a variety of outcomes across 9 programs but concluded in the summary that JDCs don't work
- Meta-Analysis:
 - Null-findings for both Wilson et al. (2006); Shaffer (2006)
 - Small effect size – Mitchell et al. (2012)

Are juvenile drug courts effective?

Measured effectiveness with reduced recidivism and reduced substance use

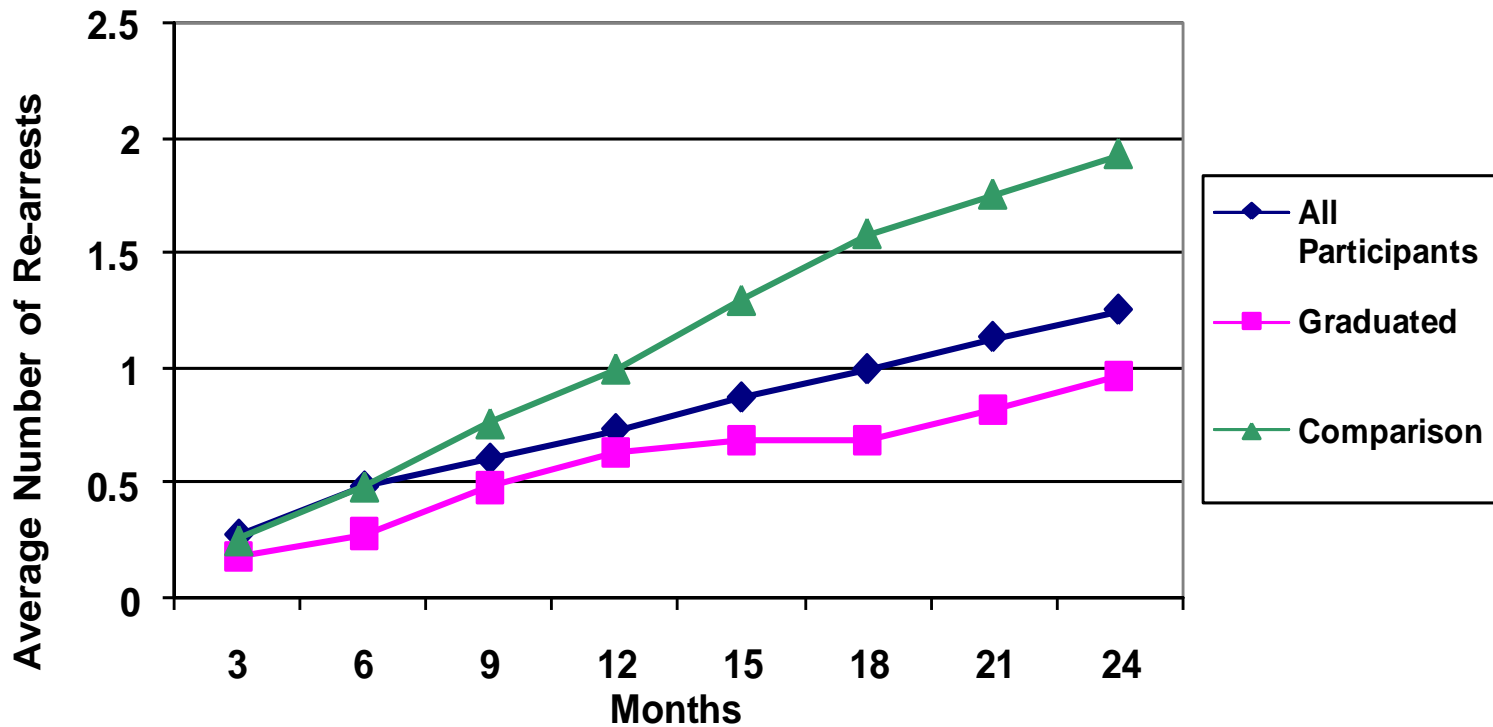
- **Recidivism/Rearrests**
 - Juvenile
 - Adult
- **Substance use**
 - Drug tests
 - Drug arrests

Do juvenile drug courts reduce recidivism?

Clackamas, OR

YES. Juvenile Arrests

Average Number of Re-Arrests Over 24 months



Do juvenile drug courts reduce recidivism into the adult system?

Clackamas: Adult and Juvenile arrests

- 2 years from drug court entry
 - Graduates 29%
 - All Participants 44%
 - Comparison 82%

90% reduction in new arrests

Savings Across Programs

Savings Per JDC Participant over 2 years

- Clackamas County Oregon = \$9,070
- Baltimore County Maryland = \$8,762
- Harford County Maryland = \$5,702
- St. Mary's County Maryland = \$2,962
- Anne Arundel Maryland = **-\$172**
- Oakland County Michigan = NA



Best Practices



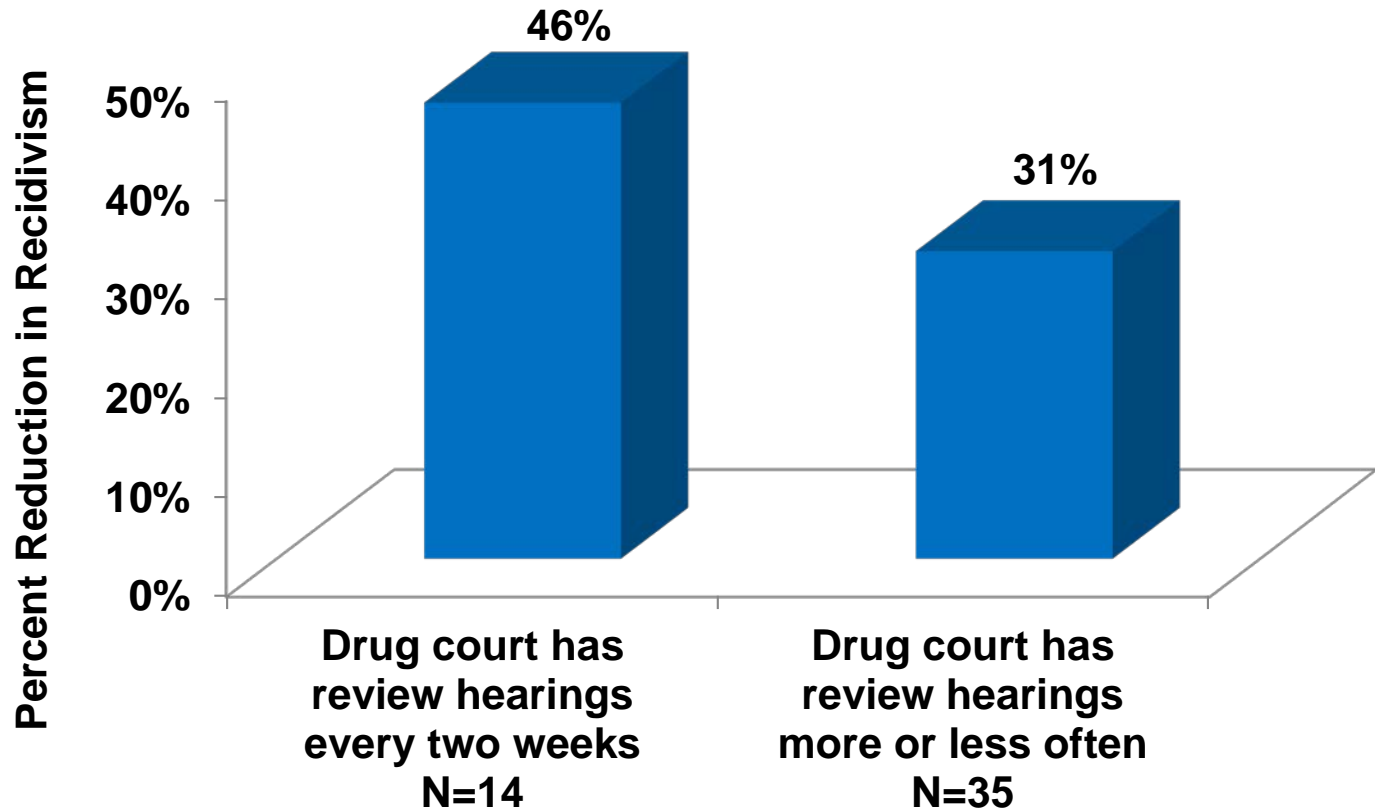
Taking a Closer Look

	CC	BC	HC	SMC	AA
Savings	\$9,070	\$8,762	\$5,702	\$2,962	-172

Taking a Closer Look

	CC	BC	HC	SMC	AA
Savings	\$9,070	\$8,762	\$5,702	\$2,962	-172
Court Sessions	2 weeks	2 weeks	3 weeks	4 weeks	1 week

Drug Courts That Held Status Hearings Every 2 Weeks During Phase 1 Had 50% Greater Reductions in Recidivism



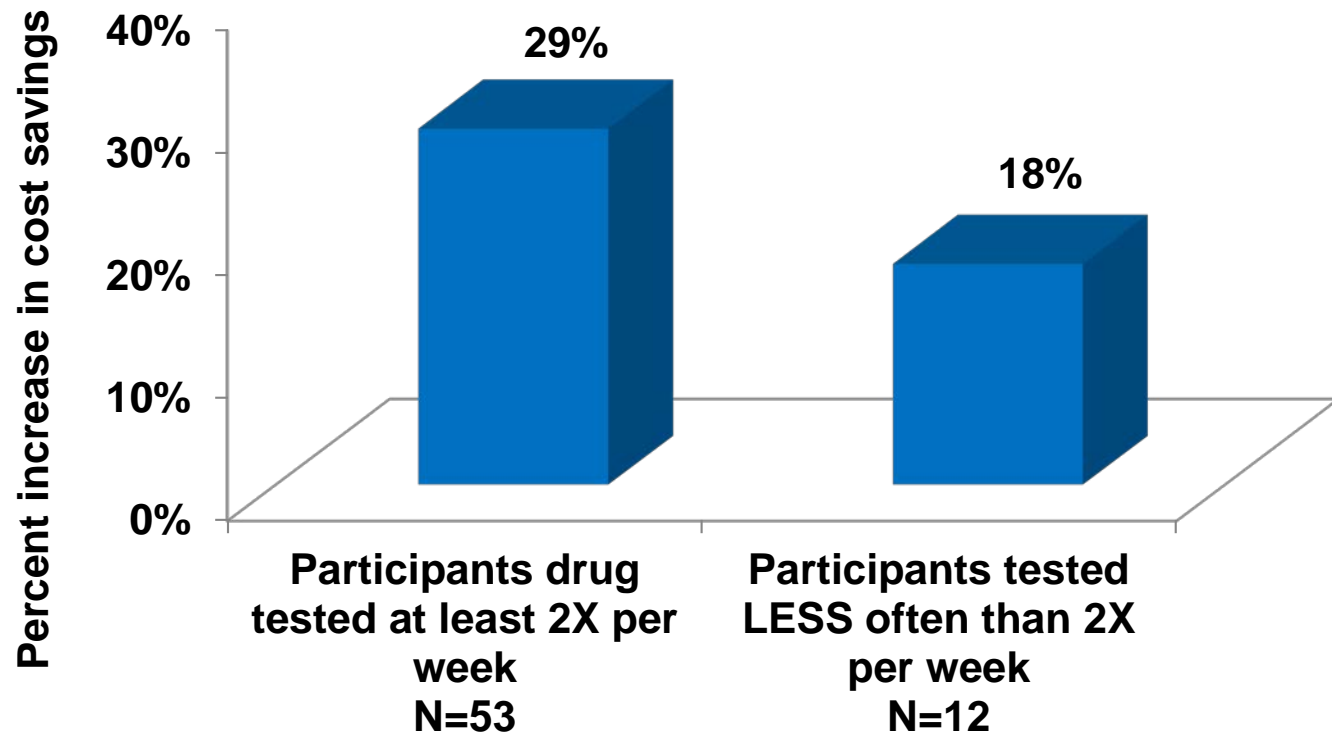
Adult

Note: Difference is significant

Taking a Closer Look

	CC	BC	HC	SMC	AA
Savings	\$9,070	\$8,762	\$5,702	\$2,962	-172
Court Sessions	2 weeks	2 weeks	3 weeks	4 weeks	1 week
Drug Tests	2/week	3/mo	2/week	3/mo	Self pay

Drug Courts Where Drug Tests are Collected at Least Two Times per Week In the First Phase had a 61% Higher Cost Savings

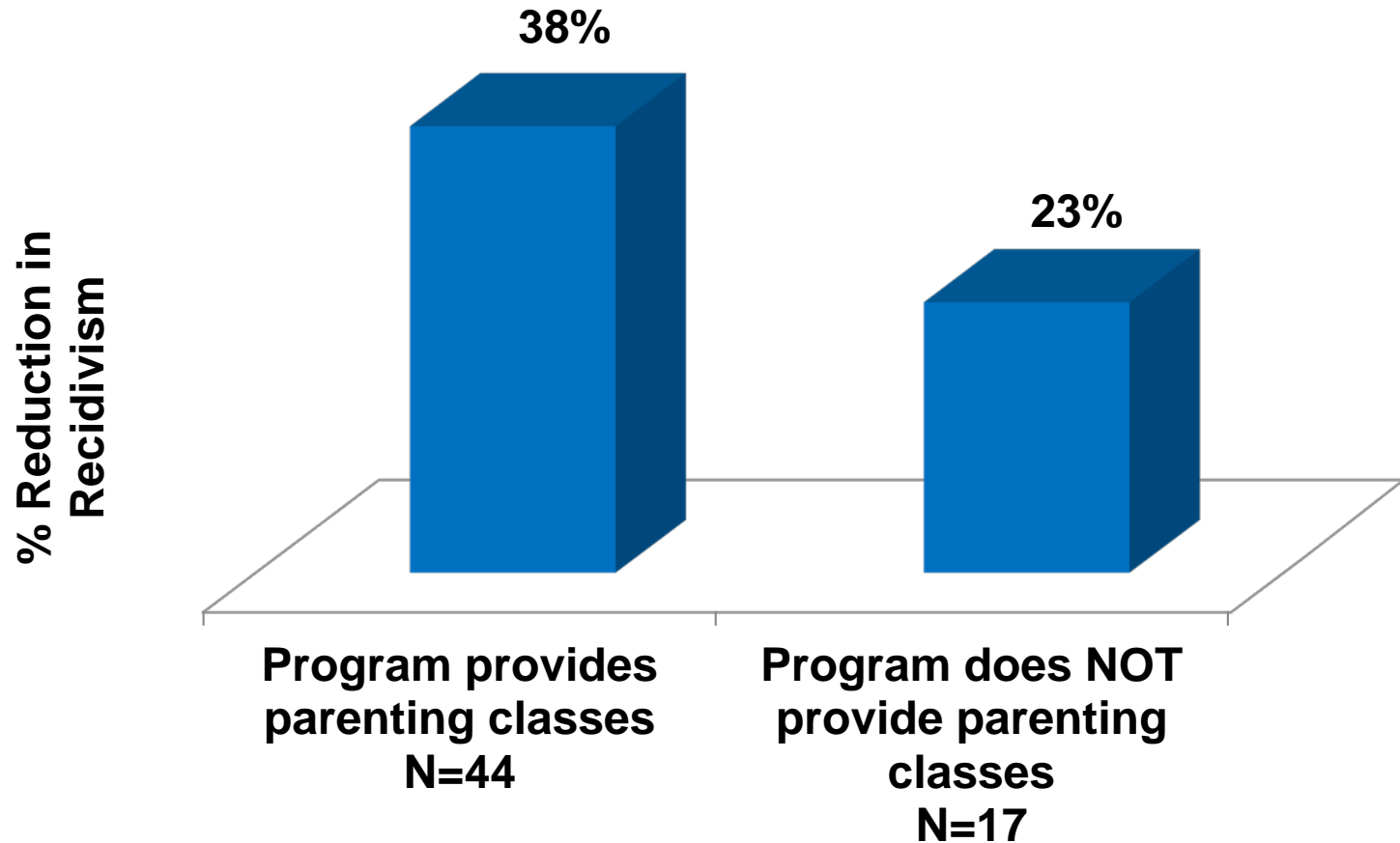


Adult

Taking a Closer Look

	CC	BC	HC	SMC	AA
Savings	\$9,070	\$8,762	\$5,702	\$2,962	-172
Court Sessions	2 weeks	2 weeks	3 weeks	4 weeks	1 week
Drug Tests	2/week	3/mo	2/week	3/mo	Self pay
Family Counseling	Yes	Yes	No	No	Self pay
Parenting	Yes	No	No	No	No

Drug courts that offer parenting classes had 68% greater reductions in recidivism and 52% greater cost savings

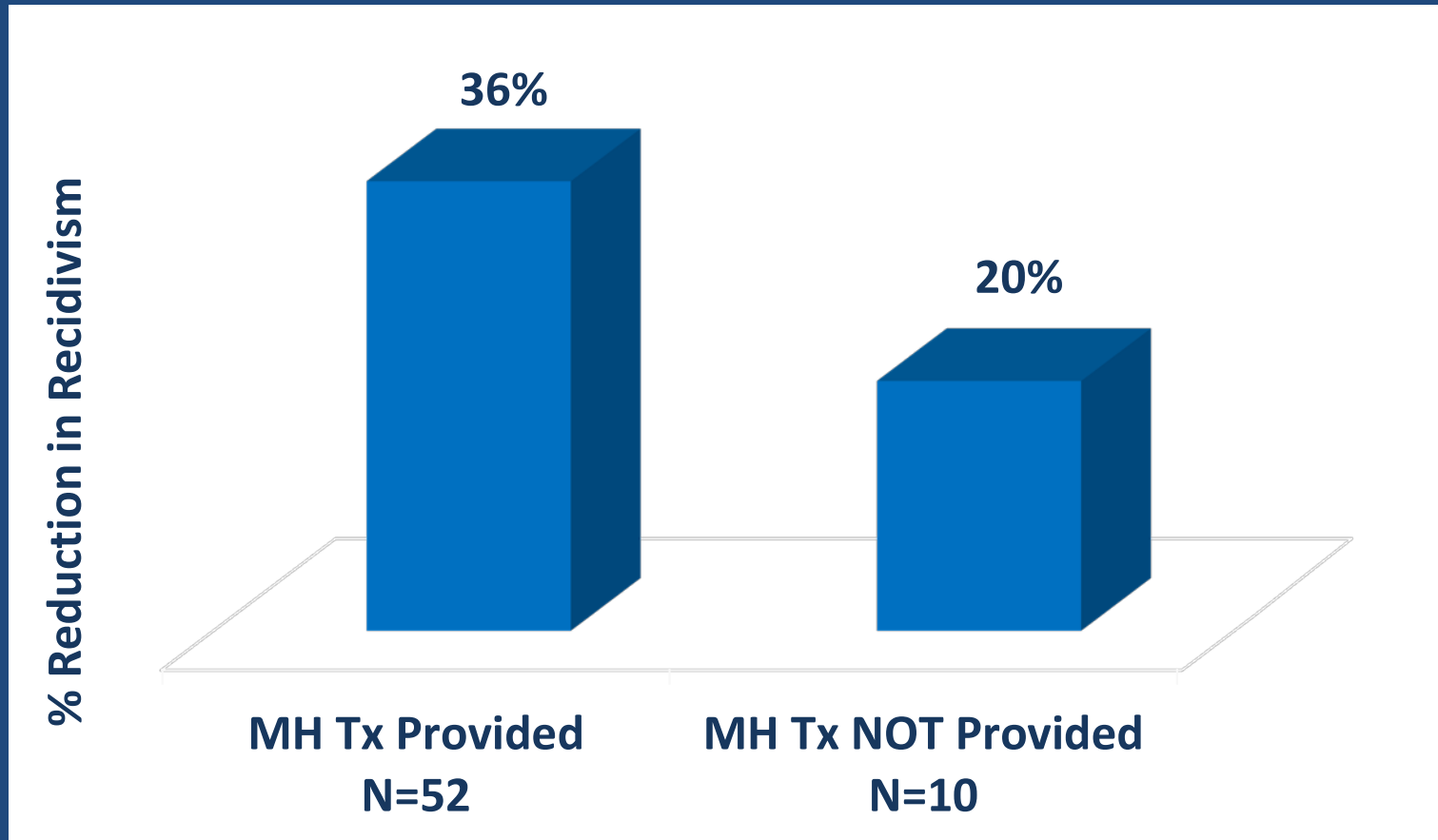


✓ True in adult, family, juvenile

Taking a Closer Look

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Drug Tests	2/week	3/mo	2/week	3/mo	Self pay
Family Counseling	Yes	Yes	No	No	Self pay
Parenting	Yes	No	No	No	No
Treatment	Youth and parent	Youth Gender Specific + MH	Youth + MH	Youth	Self pay

Drug courts that offer mental health treatment had 80% greater reductions in recidivism



Adult

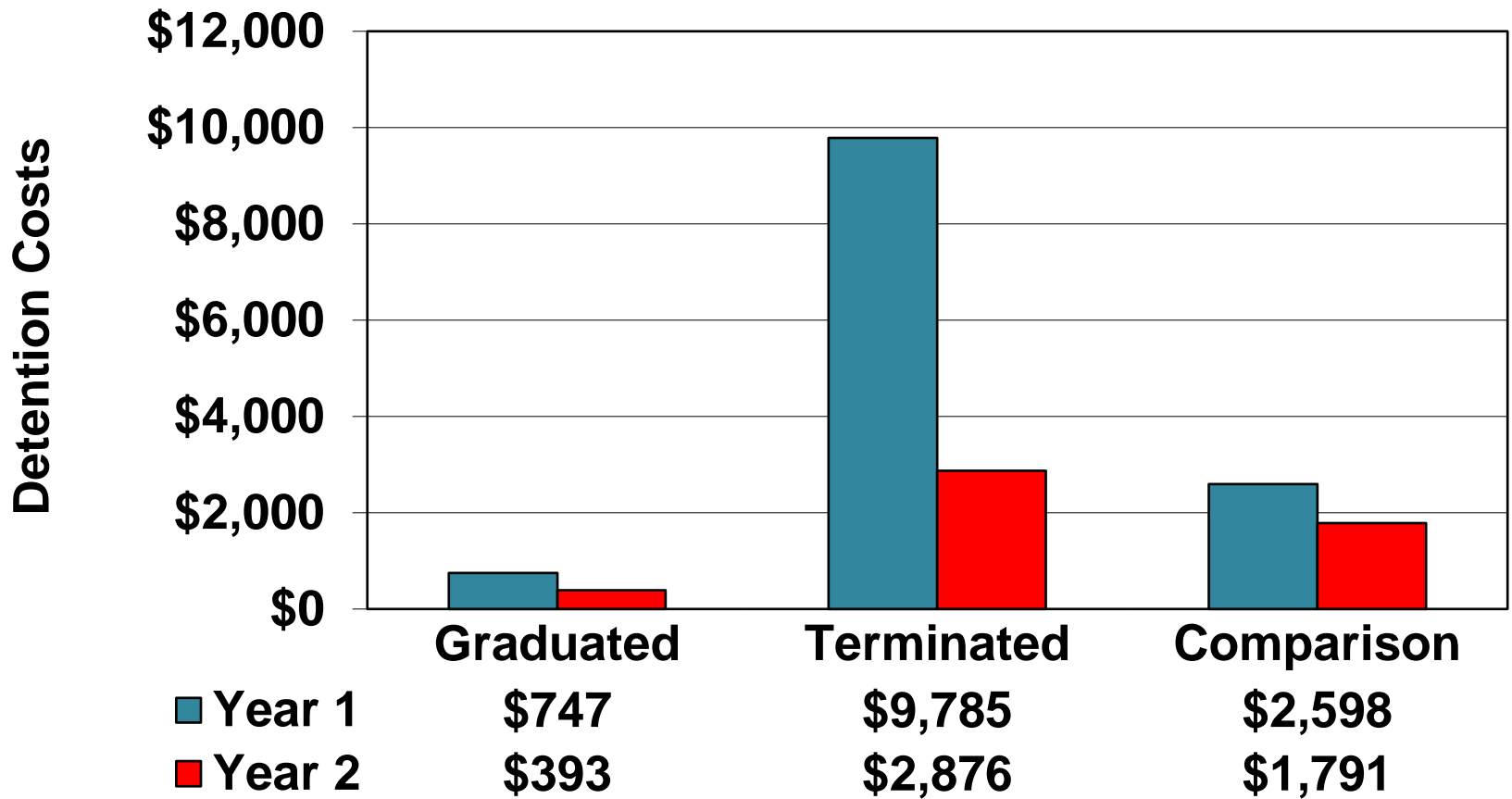
A closer look at the use of detention

**Detention costs were very high in most of
the juvenile programs**



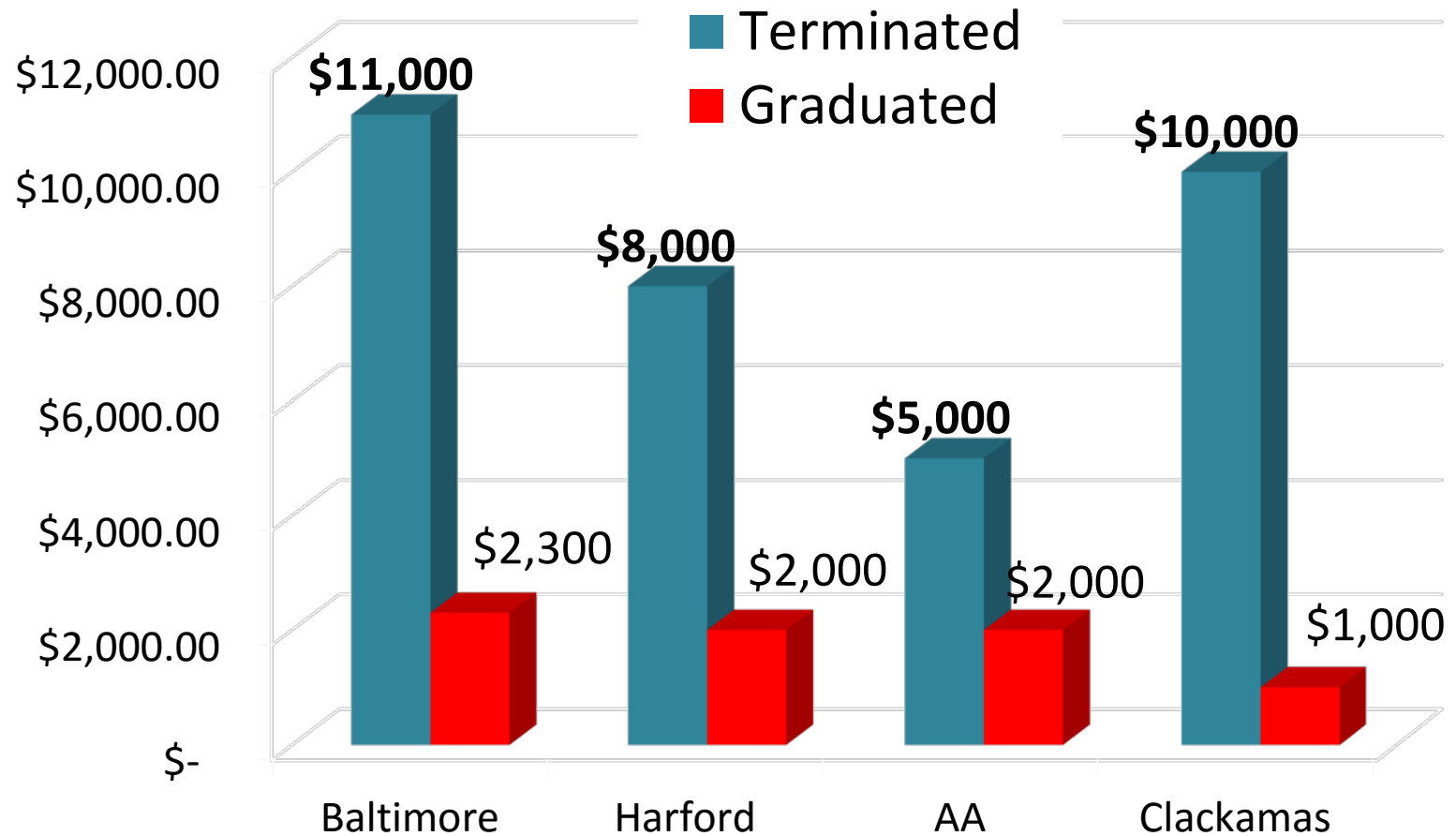
A closer look at the use of detention

Clackamas Detention Costs Averaged per Youth

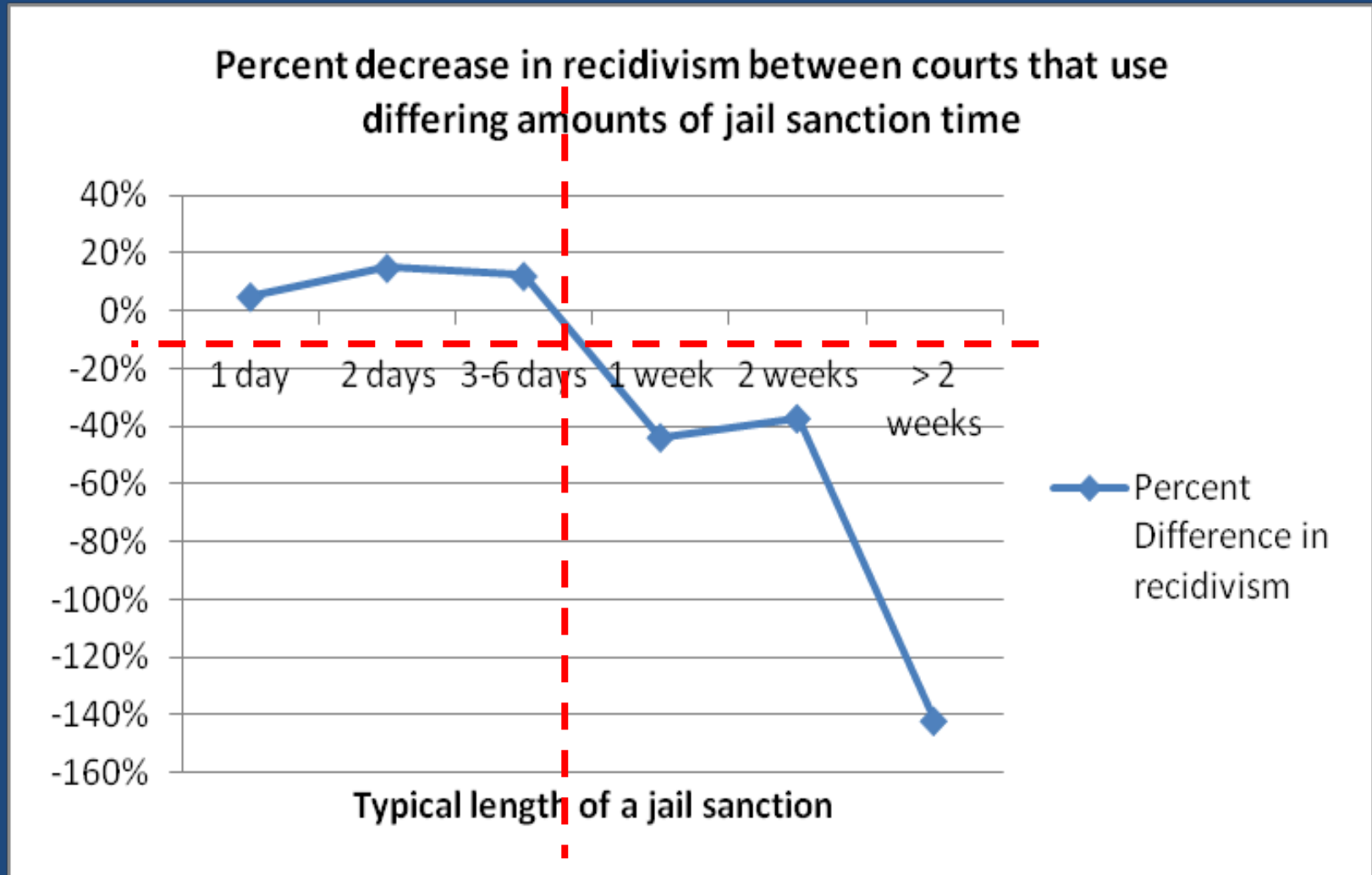


A closer look at the use of detention

Detention Costs per Youth Across Programs



Courts that use jail greater than 6 days have worse (higher) recidivism



Adult

Key Message

In spite of mixed results from juvenile drug court studies – juvenile drug courts can be effective

Juvenile drug courts need more quality studies, especially in best practices, so the model can be implemented more consistently



New Research

- Performed online assessments in 66 juvenile drug courts
- Follow-up: Process evaluation, NDCI training, phone calls
- Questions are phrased so there is no “right answer” – just describing their practices
- Determine whether they are following best practices based on analysis of their answers.



New Research

- Analyzed practices to determine if any were related to increased graduation rates
- Problems with the use of graduation as an outcome
 - Discretionary
 - Requirements vary widely (wildly) across sites



New Research

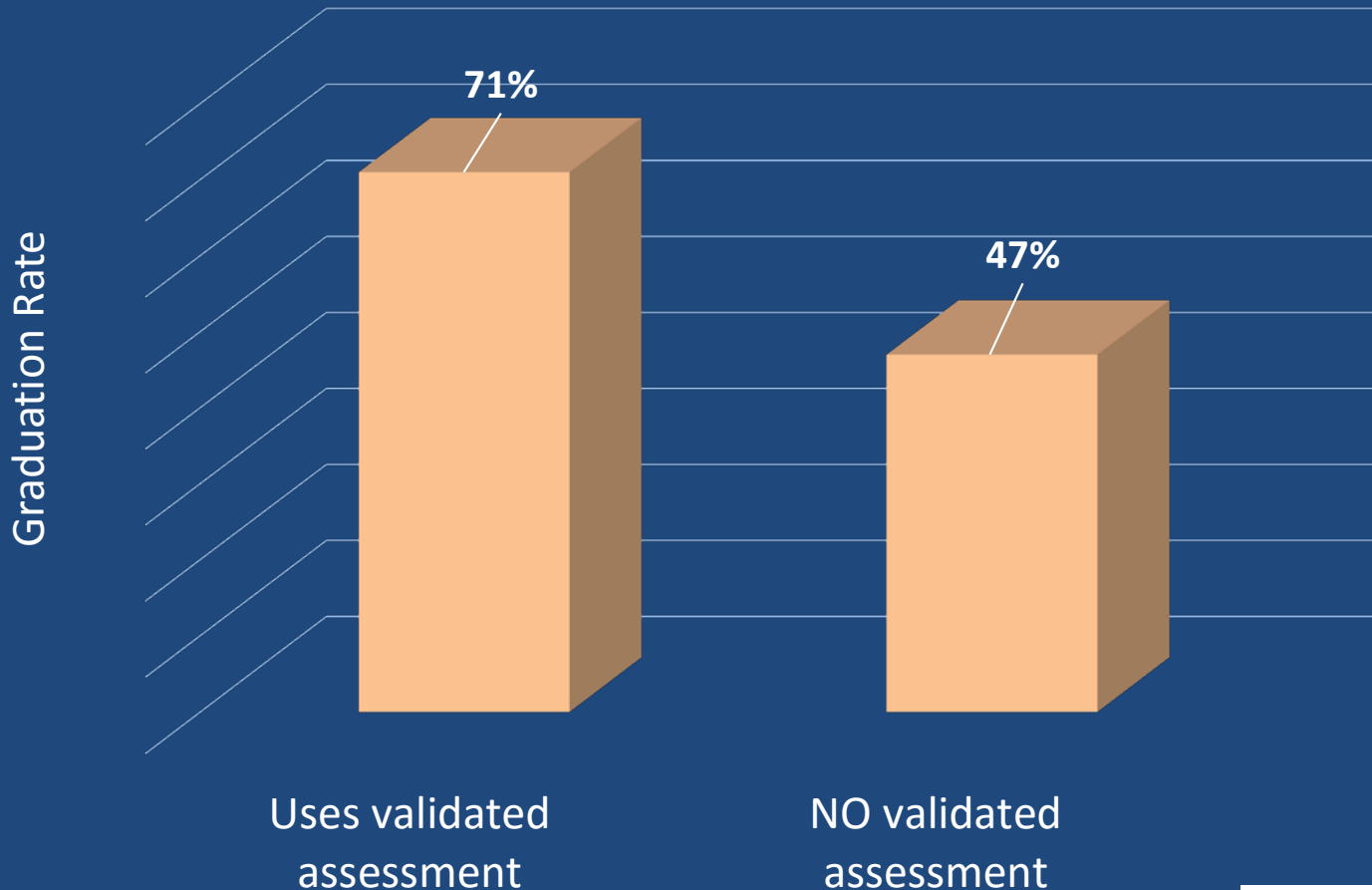
Graduation requirements for the 66 JDCs:

- 90% required a minimum number of days clean (Average was a little over 90. Ranged from 30 to 365)
- 90% required a minimum number of consecutive clean drug tests (Ranging from 12 to 128)
- 82% required participants to be in school
- 82% required completion of community service
- 69% required a written relapse prevention plan
- 54% required court ordered fines and fees paid
- 47% required a sober housing environment



New Research

Programs that used a validated, standardized assessment to determine level/type of services had 51% higher graduation rates



New Research

JDC Practices Related to Significantly Higher Graduation Rates

- Program assesses participants to determine whether they are high need (substance dependent, addicted, have moderate to severe substance use disorder)
- The alcohol and drug treatment provider is contracted directly with the court
- One agency provides treatment to the majority of the drug court participants
- Case managers make home visits
- A school representative is on the steering committee



New Research

JDC Practices Related to Significantly Higher Graduation Rates

- Treatment providers attend and communicate with the court during court hearings
- Treatment providers communicate through emails between staffings
- Treatment provider had training in the use of incentives and sanctions
- Treatment coordinator had training in the use of incentives and sanctions
- Prosecutor and defense attorney have received training in the drug court model



New Research

JDC Practices Related to Significantly Higher Graduation Rates

- The drug court offers parenting classes
- The drug court has residential treatment available
- The drug court offers anger management classes
- Participants know (and are given a written list) of what behaviors lead to rewards
- Sanctions are imposed at the first court session after the non-compliant behavior



New Research

JDC Practices Related to Significantly Higher Graduation Rates

- An aftercare program for participants is available after graduation
- An outside evaluator has measured whether the program is being implemented as intended
- An outside evaluator measured whether the program is achieving its intended outcomes
- The results of program evaluations have led to modifications in drug court operations



New Research

JDC Practices Related to Significantly Higher Graduation Rates

- Drug court uses detention/jail sanction for missed treatment sessions **
 - Youth need TX; it is not effective to use detention for long term behavior change, (it's temporary change and, in fact, it has a criminogenic effect). If detained, not getting needed services.

NOTE: Following had NO impact on graduation rate (Ineffective to punish people for being sick.)

- Detention or jail is used as a sanction for positive drug screens
- Detention or jail is used as a sanction for continued use
- Detention or jail is used as a sanction for other non-compliance

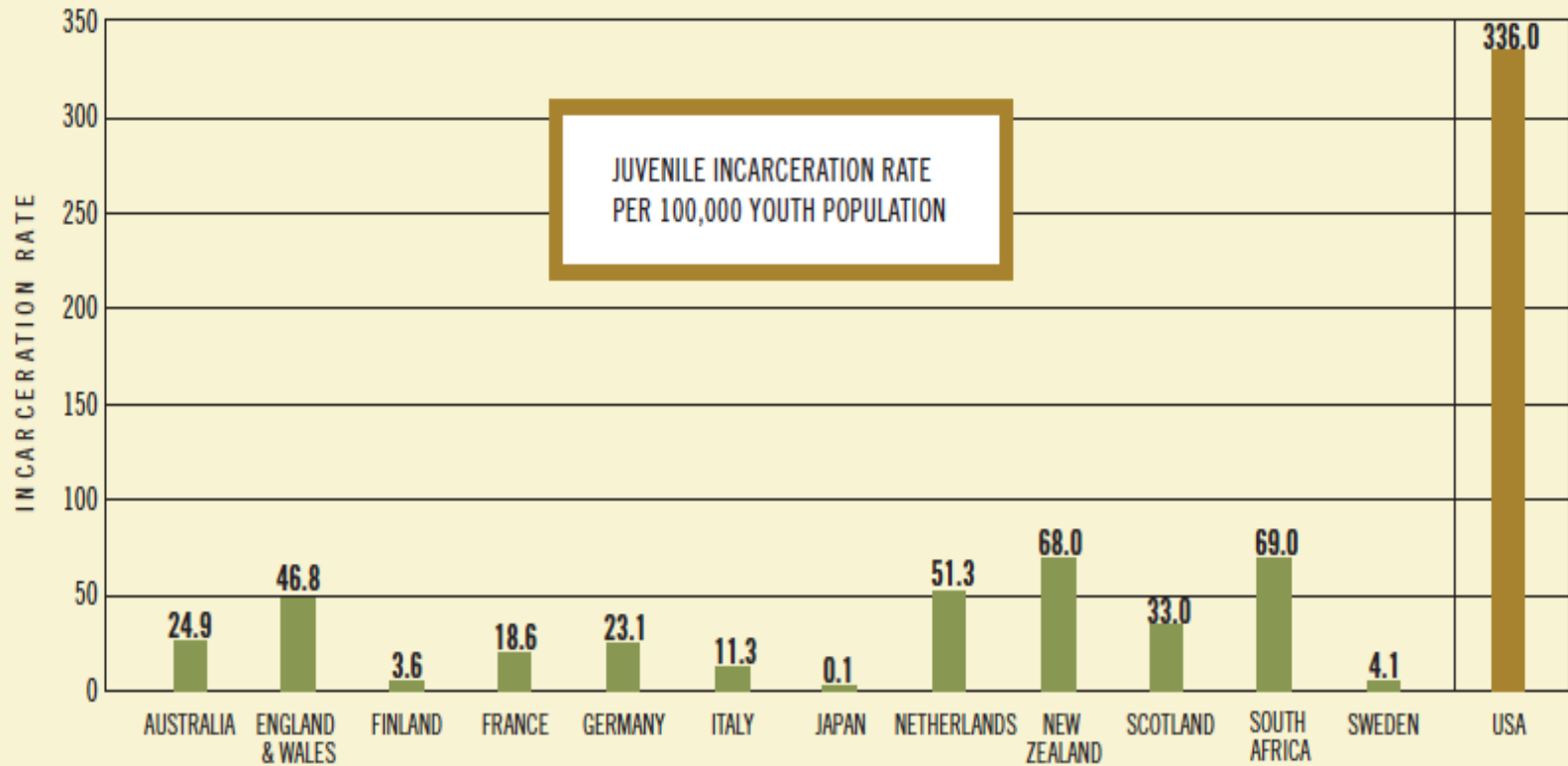


Proper Use of Detention

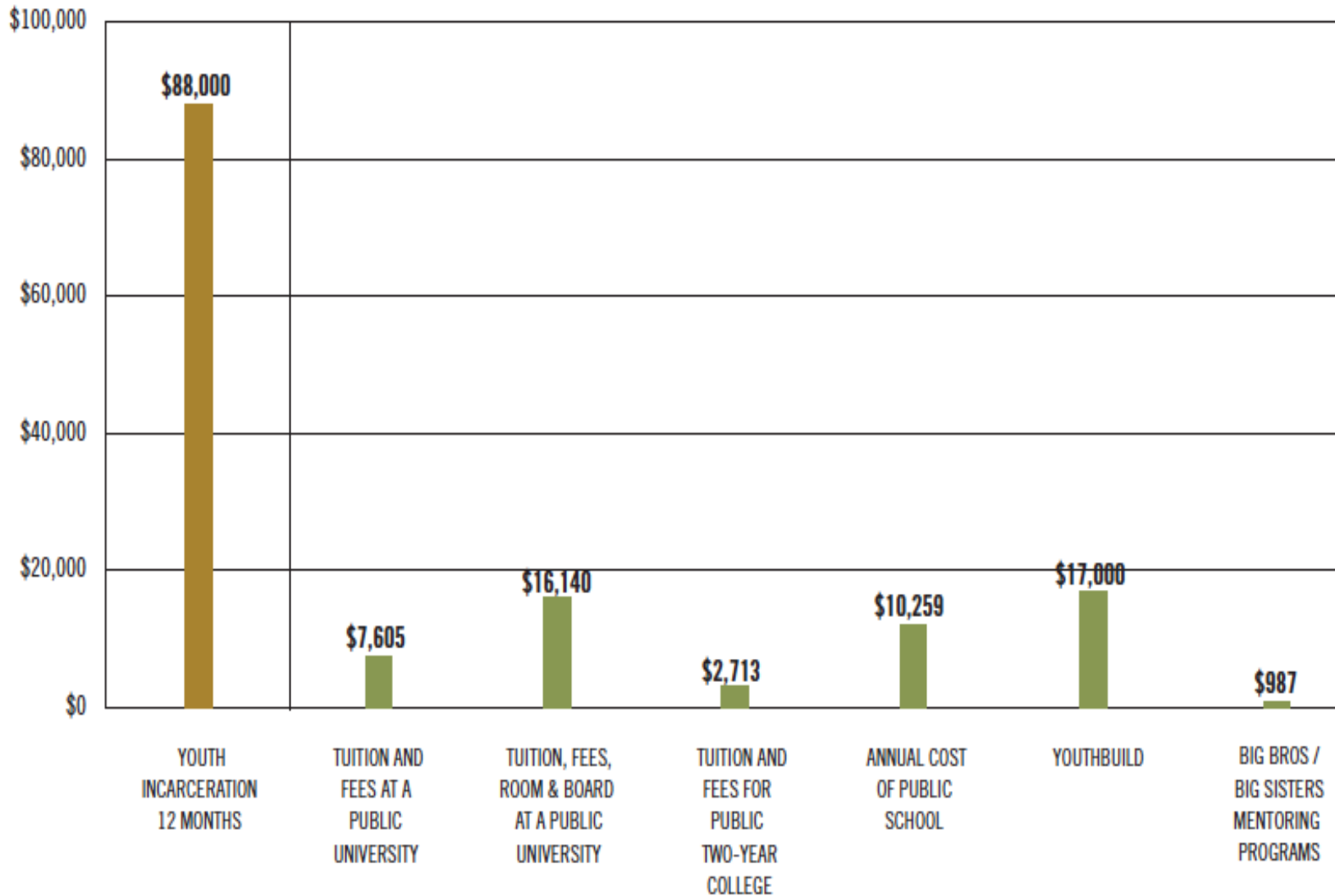


FIGURE 1

YOUTH INCARCERATION RATE: UNITED STATES VS. OTHER NATIONS



Source: Hazel, Neal, *Cross-National Comparison of Youth Justice*, London: Youth Justice Board, 2008.



Detention Research:

- To Summarize:
 - Detention can slow or interrupt the natural aging out of delinquency
 - There is no correlation between increasing amounts of time spent in detention and future reductions in recidivism.
 - Formally detained youth have reduced success in the employment market and will earn significantly less in their life time
 - 40% of incarcerated youth have learning disabilities and cannot successfully navigate their way back into school
 - Detention has a negative impact on the mental health of youth – especially those that enter with mental health conditions
- Source: The Dangers of Detention: Justice Policy Institute



Evidenced-based Strategies for Working with Youth:

- **ASSESSMENT** : Use normed and validated screening & assessment tools to determine youth risk and needs.
- **TREATMENT**: Apply risk-need-responsivity (RNR) principles when matching youth to interventions.
 - Target High-Risk, High Need offenders (chronic)
 - Strengthen the family. Where no functional unit must establish a family surrogate to nurture the child.
- **DETERRENCE**: Impose certain and fair and consequences in response to noncompliance.
- **PROCEDURAL JUSTICE** Establish fair and consistent procedures and treat youth respectfully.
- **COLLABORATION** : Obtain the buy-in and participation of multiple criminal justice agencies, including both top-level officials and line staff.

- Source: Mike Rempel “Evidenced-based Strategies for Working with Offenders,” (April 2014), www.courtinnovation.org/sites/default/files/documents/Evid%20Based%20Strategies.pdf.
- Howell, Lipsey & Wilson (2014) *A Handbook for Evidence-Based Juvenile Justice Systems*



Who is this?...

- Forgetful
- Impulsive
- Risk-taker
- Reckless
- Displays poor judgment
- Cant tell you what s/he wants in life
- Isn't ready for bed until midnight – at best
- Moody & hard to engage
- Enjoys the shock factor
- Sneaky
- Disheveled
- Experimental and experiential



Five Critical Components of Procedural Justice

- **Voice:** Youth has an opportunity to be heard.
- **Respect:** Person is treated with dignity and respect
- **Trust/Neutrality:** Youth perceives decision makers as neutral and competent and their decisions as unbiased and accurate.
- **Understanding:** Youth understands decisions including the reasons for those decisions
- **Helpfulness:** Person perceives that decision makers have a genuine interest in their needs and personal situation.

- This is not a child brain, or undeveloped adult brain. It is a biologically unique brain characterized by the ability to change and grow.
- Adolescence begins at puberty (biological function) and ends with a social definition of adulthood.
- Mismatch between limbic system (emotion) and prefrontal cortex:
 - Prone to risk taking
 - Novelty seeking
 - Social interaction with peers
 - Biology encourages separation of the young adolescent from family in order to explore and recreate
 - Found in all social mammals
 - “What most determines teen behavior, then, is not so much the late development of executive functioning, or the early onset of emotional behavior, but the mismatch of timing between the two.” Jay Geidd, 2015



New Research

What national ADC best practices are JDCs NOT doing?

- Law enforcement is part of the team – 40%
- Drug court offers a full continuum of substance abuse tx – 9%
- The drug court offers health care – 36%
- The drug court offers dental care – 30%
- Program uses validated, standardized assessment to determine level/type of services. – 57%



New Research

What national ADC best practices are JDCs NOT doing?

- The results of program evaluations have led to modifications in drug court operations – 45%
- All new hires to the drug court complete a formal training or orientation – 20%
- All members of drug court team are trained in drug court model – 17%
- All members of the drug court team receive ongoing cultural competency training – 6%
- The drug court has a steering committee or policy group – 54%



New Research

What national ADC best practices are JDC's NOT doing....

And how well do these match up with the TA JDCs are requesting and receiving?





Training & Technical Assistance (TTA) for Juvenile Drug Courts

National Council of Juvenile and
Family Court Judges



JDC Bingo

Right Kid, Right Time

What Juvenile Drug Courts Actually Do: A Report on the Practices
of 62 Juvenile Drug Courts – A4 Room: 206B



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Case Management

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JDC Bingo

Train as a Team

What Juvenile Drug Courts Actually Do: A Report on the Practices
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4:1 Ratio

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The 16 Strategies

JUVENILE DRUG COURTS: STRATEGIES IN PRACTICE

1. **Collaborative Planning:** Engage all stakeholders in creating an interdisciplinary, coordinated, and systemic approach to working with youth and their families.
2. **Teamwork:** Develop and maintain an interdisciplinary, nonadversarial work team.
3. **Clearly Defined Target Population and Eligibility Criteria:** Define a target population and eligibility criteria that are aligned with the program's goals and objectives.
4. **Judicial Involvement and Supervision:** Schedule frequent judicial reviews and be sensitive to the effect that court proceedings can have on youth and their families.
5. **Monitoring and Evaluation:** Establish a system for program monitoring and evaluation to maintain quality of service, assess program impact, and contribute to knowledge in the field.
6. **Community Partnerships:** Build partnerships with community organizations to expand the range of opportunities available to youth and their families.
7. **Comprehensive Treatment Planning:** Tailor interventions to the complex and varied needs of youth and their families.
8. **Developmentally Appropriate Services:** Tailor treatment to the developmental needs of adolescents.
9. **Gender-Appropriate Services:** Design treatment to address the unique needs of each gender.
10. **Cultural Competence:** Create policies and procedures that are responsive to cultural differences and train personnel to be culturally competent.
11. **Focus on Strengths:** Maintain a focus on the strengths of youth and their families during program planning and in every interaction between the court and those it serves.
12. **Family Engagement:** Recognize and engage the family as a valued partner in all components of the program.
13. **Educational Linkages:** Coordinate with the school system to ensure that each participant enrolls in and attends an educational program that is appropriate to his or her needs.
14. **Drug Testing:** Design drug testing to be frequent, random, and observed. Document testing policies and procedures in writing.
15. **Goal-Oriented Incentives and Sanctions:** Respond to compliance and noncompliance with incentives and sanctions that are designed to reinforce or modify the behavior of youth and their families.
16. **Confidentiality:** Establish a confidentiality policy and procedures that guard the privacy of the youth while allowing the drug court team to access key information.



The monograph was prepared by the National Drug Court Institute and the National Council of Juvenile and Family Court Judges with funding from the Bureau of Justice Assistance, Office of Justice Programs, U.S. Department of Justice.

In 2003, NCJFCJ and the OJJDP created the *16 Strategies*

-to help JDCs incorporate specific practices into the drug court program so as

-to better meet the developmental needs and challenges of youth participant

Juvenile Drug Court *16 Strategies*

1. Collaborative planning
2. Teamwork
3. Clearly defined target population and eligibility criteria
4. Judicial involvement and supervision
5. Monitoring and evaluation
6. Community partnerships
7. Comprehensive treatment planning
8. Developmentally appropriate services



Juvenile Drug Court *16 Strategies* cont'd

- 9. Gender appropriate services
- 10. Cultural competence
- 11. Focus on strengths
- 12. Family engagement
- 13. Educational linkages
- 14. Drug testing
- 15. Goal-oriented incentives and sanctions
- 16. Confidentiality



Types of TTA Available from NCJFCJ

- Statewide Training
- Training Insert
- Demonstration Project Participation – Learning Collaborative
- Office-Based Training
- On-Site Targeted TTA Visit
- Publications: <http://www.ncjfcj.org/our-work/juvenile-drugcourts>
- Webinars: <http://www.ncjfcj.org/educational-opportunities/recorded-webcasts>
- On-Line Learning Platform: <http://www.drugcourtonline.org>



What is On-Site TTA?

- A hands-on approach to receiving information or training to address challenges that the JDC team requesting the on-site TTA is facing
- OJJDP-grant funded
- Site visit content is determined collaboratively by NCJFCJ trainers and the JDC team requesting the TTA
- On-site visits are a two-day process. A typical on-site TA agenda:

Day One:

Team member interviews (conducted by trainer/facilitator)

Pre-court staffing observation

Court session observation

Day Two:

All-day (9:00 - 4:00 p.m.) facilitated strategic planning meeting for operational team members; usually takes place off-site at a location secured by the jurisdiction receiving TTA.



Requests for On-Site TTA 2009–2016

- *From 2009 until present day, NCJFCJ has received 46 requests for On-Site Training & Technical Assistance.*
- *By the end of 2015, 33 site visits were conducted.*
- *In 2016, NCJFCJ has funding to offer 12 site visits.*



Training Needs of Juvenile Drug Courts

Juvenile Drug Courts requesting on-site TTA identified the need for training on the following topics :

• Program evaluation	46.3%	(19)
• Incentives and sanctions	43.9%	(18)
• Treatment planning	36.6%	(15)
• Evidence-based practices	34.1%	(14)
• Teamwork	29.3%	(12)
• Family engagement	29.3%	(12)
• Eligibility criteria	24.4%	(10)



Circumstances Prompting TTA Requests

Juvenile Drug Courts requesting on-site TTA identified the following circumstances as prompting their request for TTA:

• Improve program	61.5%	(16)
• Team turnover	53.8%	(14)
• Increase training	46.2%	(12)
• Improve youth outcomes	38.5%	(10)
• Treatment	15.4%	(4)
• Funding	7.7%	(2)

Current Program Challenges

Juvenile Drug Courts requesting on-site TTA identified the following as current program challenges:

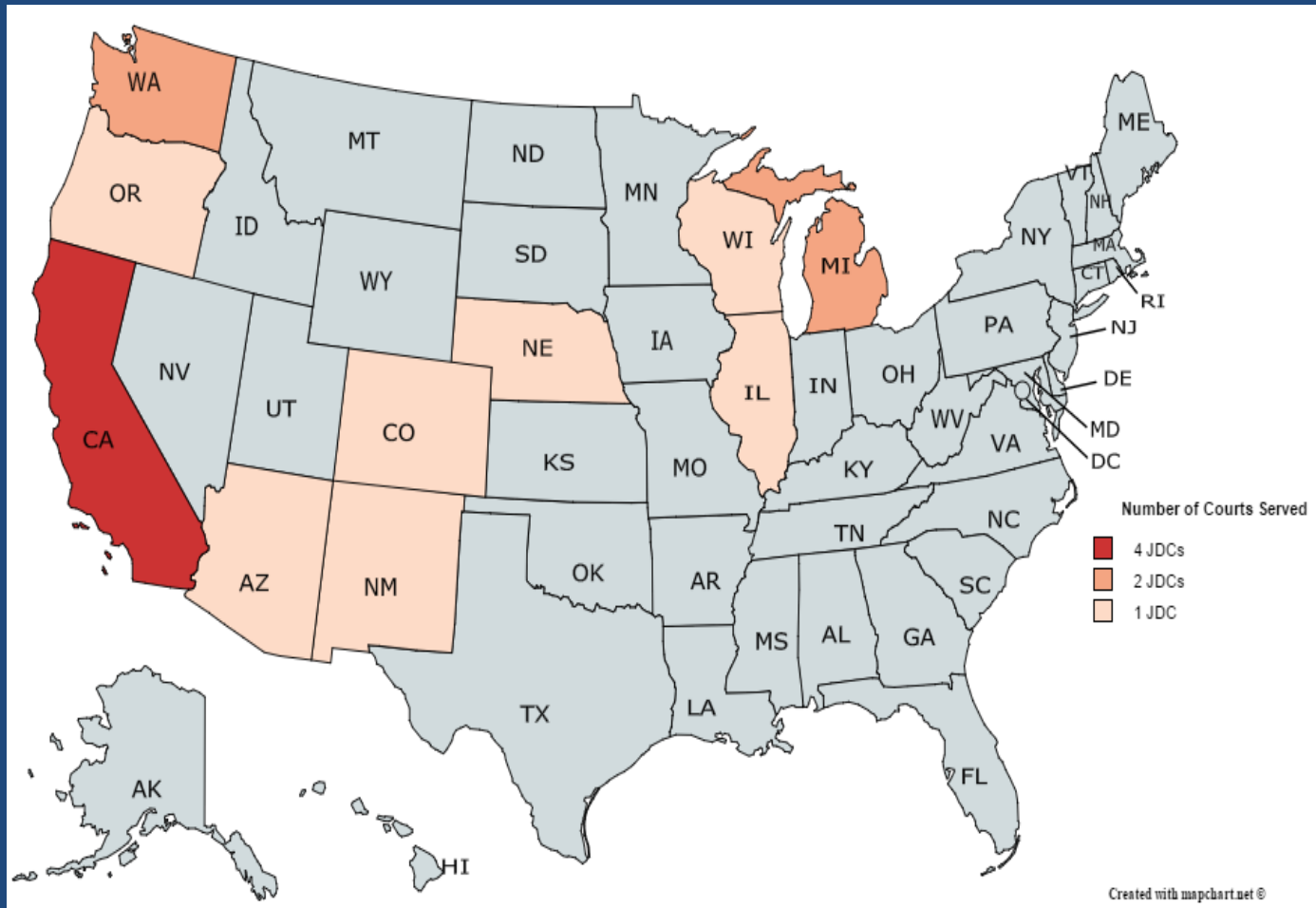
• Training	81.0%	(17)
• Youth success	33.3%	(7)
• Referrals capacity	28.6%	(6)
• Funding	28.6%	(6)
• Teamwork	23.8%	(5)
• Treatment	19.0%	(4)

On-Site Training & Technical Assistance Overview 2014–2015

NCJFCJ conducted 15 On-Site Technical Assistance visits with Juvenile Drug Courts across the country.

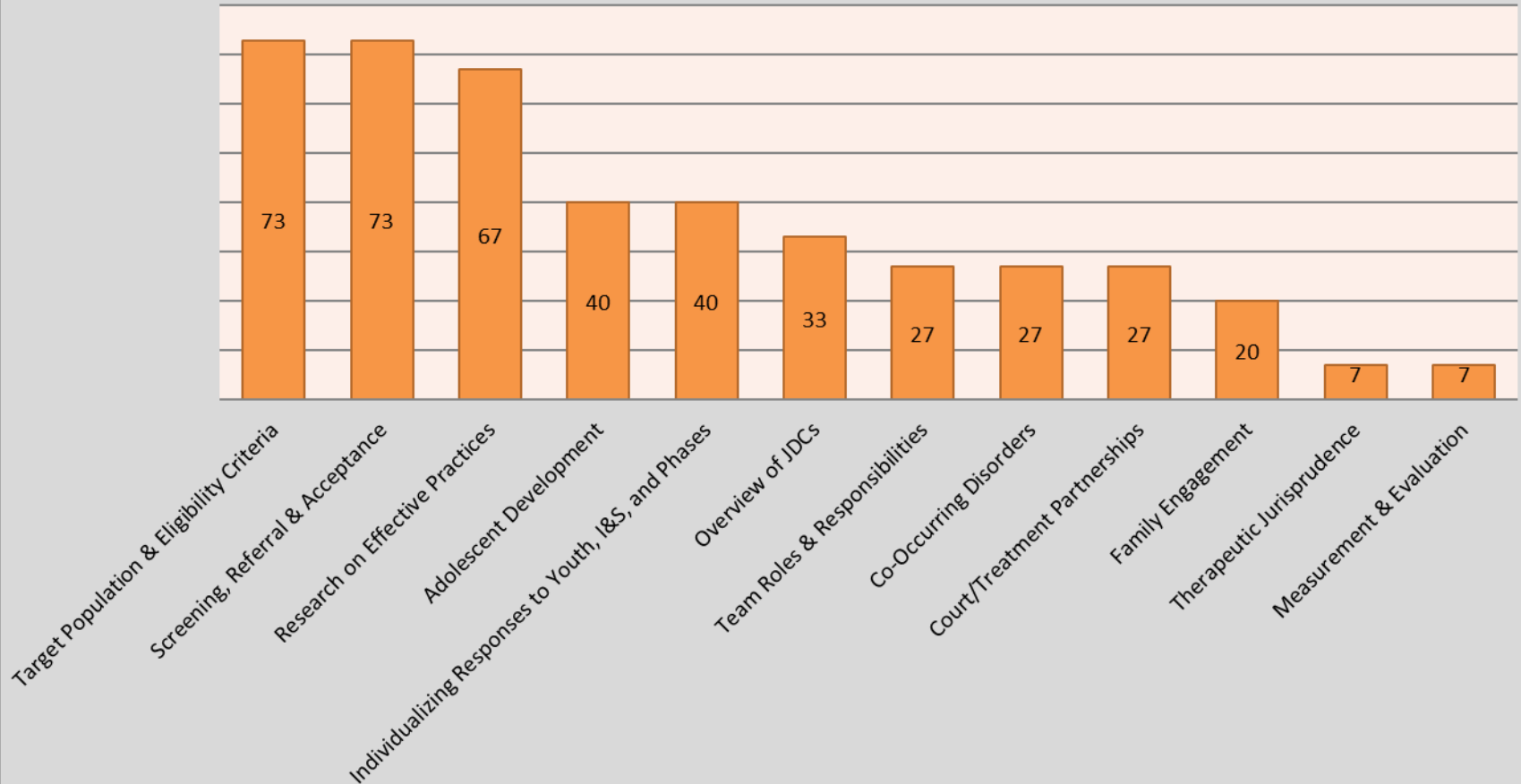


Geographical Representation of Jurisdictions Receiving On-Site TTA



Retreat Topics

Percentage of Jurisdictions (N=15)



Action Plans

- *Thirteen of the 15 JDC teams receiving On-Site TTA developed action plans during their TA retreat.*
- *The number of topics for which teams developed plans ranged from 2 to 6, with the average being 4.*

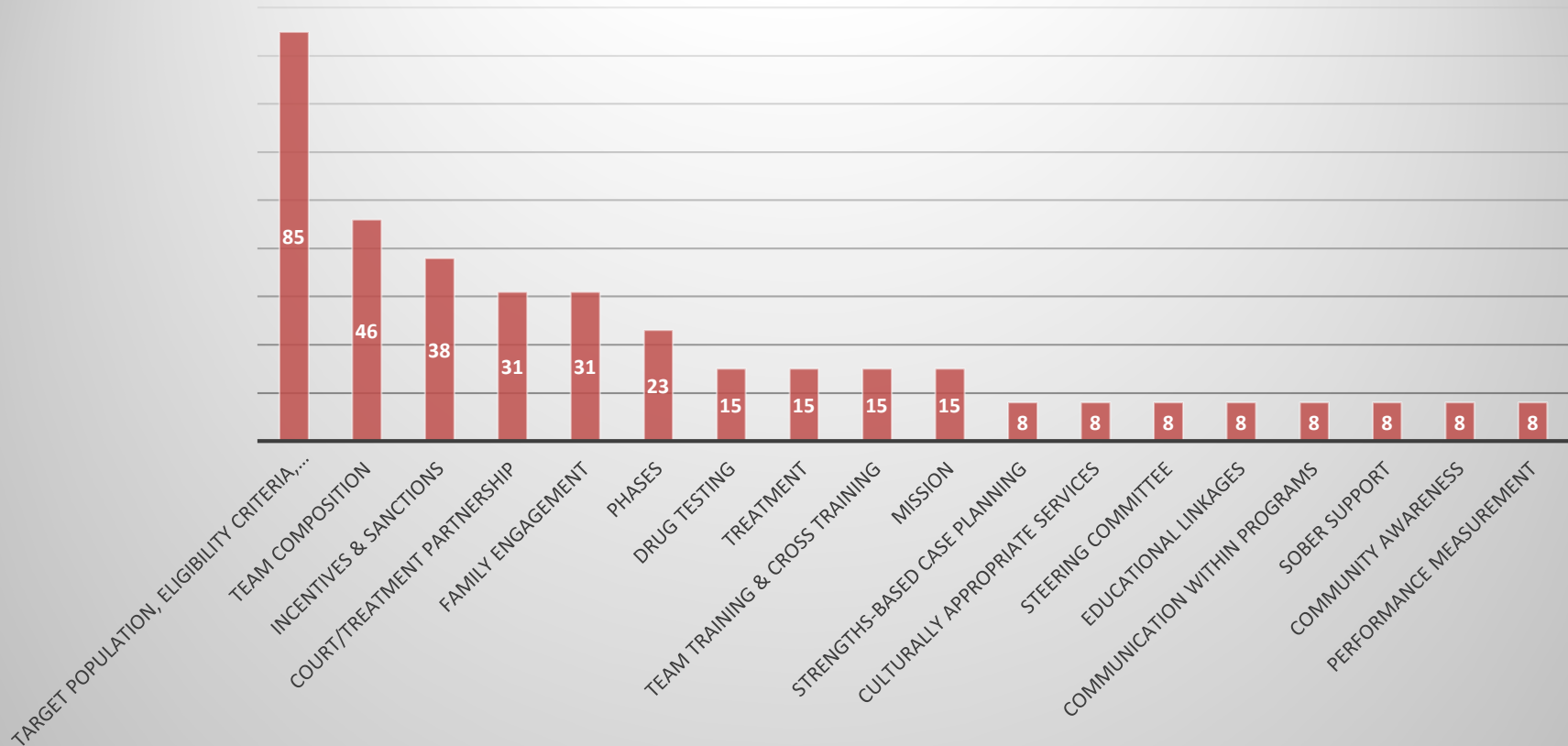
Action Planning Template

PRIORITY	TASK	LEAD PERSON	RESOURCES OR INFORMATION NEEDED	TARGET COMPLETION DATE



Action Plan Topics

Action Plan Topics Across 13 Jurisdictions Receiving On-Site TA



Top 5 Action Plan Topics

- 85% of the jurisdictions created action plan items on **Targeting Population, Eligibility Criteria, and Screening, Referral and Acceptance.**
- 46% of the jurisdictions created action plan items on **Team Composition.**
- 38% of the jurisdictions created action plan items on **Incentives and Sanctions.**
- 31% of the jurisdictions created action plan items on **Court/Treatment Partnership.**
- 31% of the jurisdictions created action plan items on **Family Engagement.**



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