





FAMILY CENTERED APPROACHES TO PROGRAM PARTICIPANTS

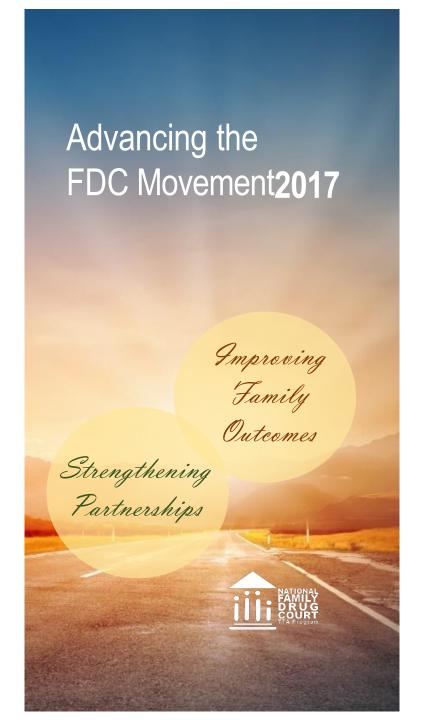
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&
Child and Family Futures

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Learning Objectives

- Gain a greater understanding of the effects of substance use on children, and the importance of addressing the needs of children and the parent-child relationship as a critical part of family recovery
- Learn how cross-systems collaboration, communication, and community partnerships are critical in serving the complex needs of children and families in your drug court
- Highlight key lessons, take-aways, and challenges from case studies conducted with three adult drug court programs at different points in transition in serving children and families



THE BOTTOM LINE

Consequences for participants' behavior are predictable, fair, consistent, and administered in accordance with evidence -based principles of effective behavior modification.



THE BACKGROUND

- ✓ Based on scientific theories and research that dates back to the beginning of the 20th century
- Behavior Modification via Operant Conditioning
- Our response (or lack of response) to participant behavior will make the behavior more or less likely to reoccur
- Contemporary studies applying behavioral learning science to criminal justice populations, including Drug Courts, have led to researched-based principles for success



THE BASICS



Drug Court Practitioner FACT SICEL

September, 2012

Behavior Modification 101 for Drug Courts: Making the Most of Incentives and Sanctions

By Douglas B. Marlowe, JU, PhD Chief of Science, Policy & Law, National Association of Drug Court Professionals

rug Courts improve outcomes for drug-abusing offenders by combining evidencebased substance abuse treatment with strict behavioral accountability. Participants are carefully monitored for substance use and related behaviors and receive escalating incentives for accomplishments and sanctions for infractions. The nearly unanimous perception of both participants and staff members is that the positive effects of Drug Courts are largely attributable to the application of these behavioral contingencies Courts are largely actributable to the application of these behavioral contingencies (Lindquist, Krebs, & Lattimore, 2006; Goldkamp, White, & Robinson, 2002; Farole &

Scientific research over several decades reveals the most effective ways to administer behavior modification programs. Drug Courts that learn these lessons of science reap benefits several times over through better outcomes and greater cost-effectiveness (Rossman & Zweig, 2012). Those that follow nonscientific beliefs or fall back on old habits are not very effective and waste precious resources. Every Drug Court team should stay abreast of the research on effective behavior modification and periodically review court policies and procedures to ensure they are consistent with science-based practices.

The Carrot and the Stick

Some criminal justice professionals may resist the notion of rewarding offenders for doing what they are already legally required to do. These professionals may believe that treatment should be its own reward or that avoiding a criminal charge should be incentive enough. Other professionals may feel ambivalent about administering

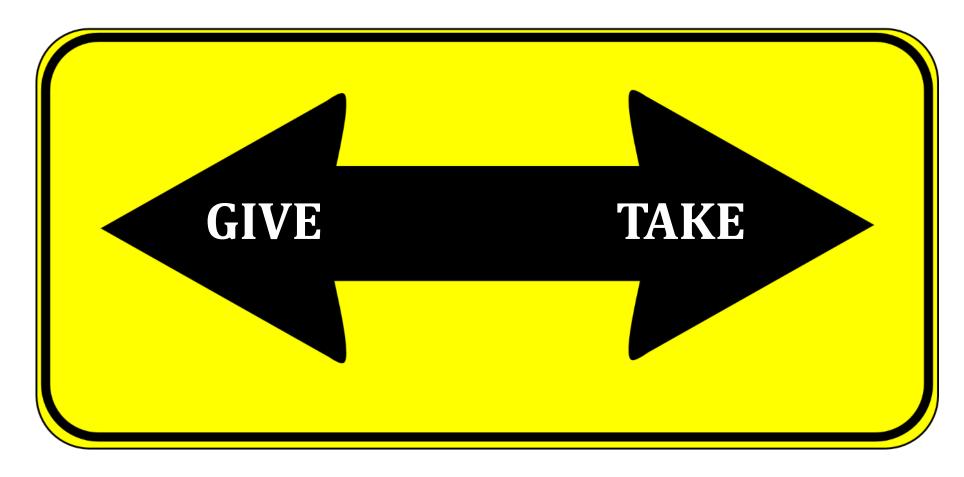
Punishment to their clients. They may view their punsament to their chemics, they may be role as providing treatment and rehabilitation, not

Such sentiments can lead some Drug Court teams to rely too heavily on either incentives or sanctions rather than providing a proper balance of each. Rewards and sanctions serve different, but complementary, functions. Rewards are used to increase desirable behaviors, such as going to work

THE RESPONSE CATEGORIES









INCENTIVES

Positive Reinforcement

Negative Reinforcement

SANCTIONS

Punishment

Response Cost

THERAPEUTIC ADJUSTMENTS

Enhancements

Reductions



Core Messages

Don't forget the children - treatment is about families

Some participants are adolescents themselves

Recovery for both parent and child occurs in the context of family





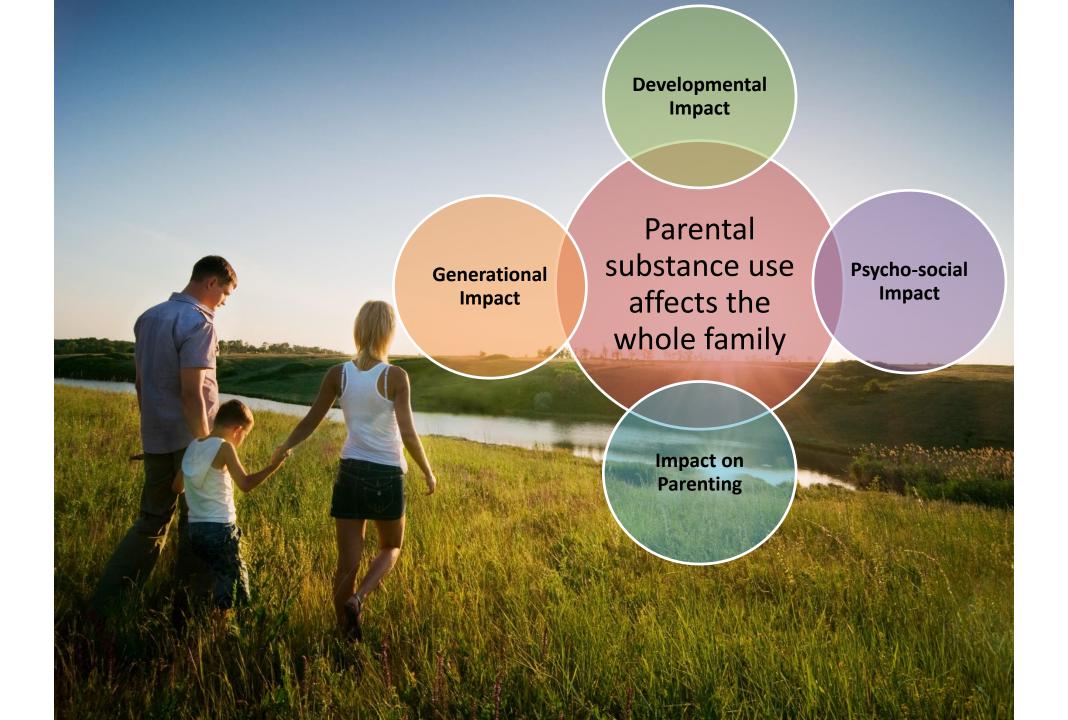
49-70% of participants in three adult drug courts recently studied have at least one minor child

Did You Know?

Raising the Bar – All Drug Courts are Family Courts



- Collaborative Courts hold parents responsible for their recovery and their parenting
- But to function effectively, courts must also **hold the system** accountable for responding to the needs of children
- If treatment has a family dimension, collaborative courts must raise the bar on their capacity to serve families







THE STANDARD



- Opportunity to be Heard
- Equivalent Consequences
- Professional Demeanor
- Progressive Sanctions
- Licit Addictive or Intoxicating Substances

- Therapeutic Adjustments
- Incentivizing Productivity
- Phase Promotion
- Jail Sanctions
- ✓ Termination
- Consequences of Graduation & Termination

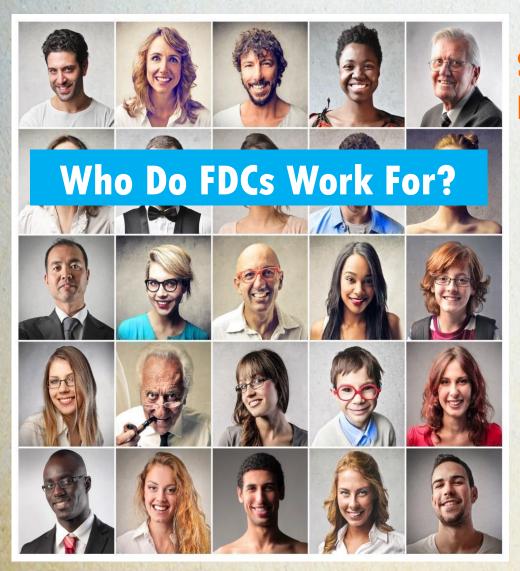


PROGRESSIVE SANCTIONS

- Drug Courts have a range of sanctions of varying magnitudes that may be administered in response to infractions
- For goals that are especially difficult for participants to accomplish (i.e., distal goals), sanctions increase gradually and progressively in magnitude
- For goals that are somewhat easier to achieve (i.e., proximal goals), higher magnitude sanctions may be administered after only a few infractions







Studies Show Equivalent or Better Outcomes:

- Co-occurring mental health problems
- Unemployed
- Less than a high school education
- Criminal history
- Inadequate housing
- Risk for domestic violence
- Methamphetamine, crack cocaine, or alcohol
- Previous child welfare involvement

Important Practices of FTCs

- System of identifying families
- Timely access to assessment and treatment services
- Increased management of recovery services and compliance with treatment
- Improved family-centered services and parent-child relationships
- Increased judicial oversight
- Systematic response for participants contingency management
- Collaborative non-adversarial approach grounded in efficient communication across service systems and court

What is Recovery?

SAMHSA's Working Definition

Recovery is a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential.



Access to evidence-based substance use disorder treatment and recovery support services are important building blocks to recovery.

Four Major Dimensions

<u>Health</u>

Overcoming or managing one's disease(s) or symptoms and making informed, healthy choices that support physical and emotional well-being

Home

Maintaining a stable and safe place to live

Purpose

Conducting meaningful daily activities, such as a job, school or volunteerism, and having the independence of income, and resources to participate in society

Community

Having relationships and social networks that provide support, friendship, love, and hope

We know more about

The Affect of Recovery Support on Successful Reunification

- Recovery Support Specialists
- Evidence-Based Treatment
- Family-Centered Services
- Evidence-Based Parenting
- Parenting Time
- Reunification Groups
- Ongoing Support

Titles and Models

- Peer Mentor
- Peer Specialist
- Peer Providers
- Parent Partner

Experiential Knowledge, Expertise

- Recovery Support Specialist
- Substance Abuse Specialist
- Recovery Coach
- Recovery Specialist
- Parent Recovery Specialist

Experiential Knowledge, Expertise + Specialized Trainings

YOU NEED TO ASK:

What does our program and community need?



Why is This Important?

Addiction is a brain disorder

The longer time in treatment, the greater probability of a successful outcome

Purpose of sanctions and incentives is to keep participants engaged in treatment

Setting Range of Responses

Consistent for individuals similarly situated (phase, length of sobriety time)

Avoid singular responses, which fail to account for other progress

Aim for "flexible certainty"

Proximal vs. Distal Responses

- Timing is everything; delay is the enemy
- Intervening behaviors may mix up the message
- Brain research supports
 behavioral observation;
 dopamine reward system
 responds better to immediacy



- Relapse is not the same as treatment failure
- Relapse is not an isolated event, but rather a process
- Relapse presents a therapeutic opportunity
- Re-engagement after relapse
- Relapse Prevention/Recovery
 Planning: plan and strategies
- Client relapse leads to collaborative intervention to reengage client in treatment and reassess child safety
- Relapse vs. lapse

Rethinking Relapse



Model for Responding to Behavior

Target behaviors for each phase of treatment

Evaluate Progress

Set clear expectations for each target behavior

Response Model

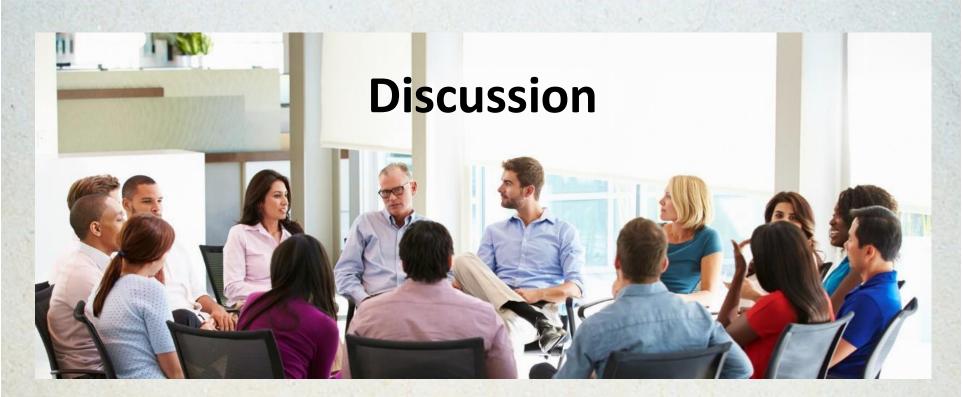
Respond to behaviors

Set requirements for advancement based on behavioral change

Responses to Behavior as an Engagement and Retention Principle

- Treatment dropout is one of the major problems encountered by treatment programs; therefore, motivational techniques through appropriate responses to behavior can keep patients engaged and improve outcomes
- Good outcomes are contingent on adequate treatment length.

http://www.drugabuse.gov



- How do your responses to compliant and noncompliant behavior take into consideration participants' children?
- What could you do to strengthen the consideration of children when imposing an incentive or consequence?

Responses to Behavior

Safety

 A protective response if a parent's behavior puts the child at risk

Therapeutic

 A response designed to achieve a specific clinical result for parent in treatment

Motivational

 Designed to teach the parent how to engage in desirable behavior and achieve a stable lifestyle

Role of the FTC Team in Responding to Participant Behavior



- Target behaviors for each phase of treatment
- Set clear expectations for each target behavior
- Reports to judge; includes progress and highlights successes



What is the effect

of parental substance use disorders on children?



Effect on the Child

Sources of Trauma in the Child Welfare Population



- Neglect
- Physical abuse
- Sexual abuse
- Placement history

Source: E. Telford, Children's Research Triangle, 2012

Childhood Trauma

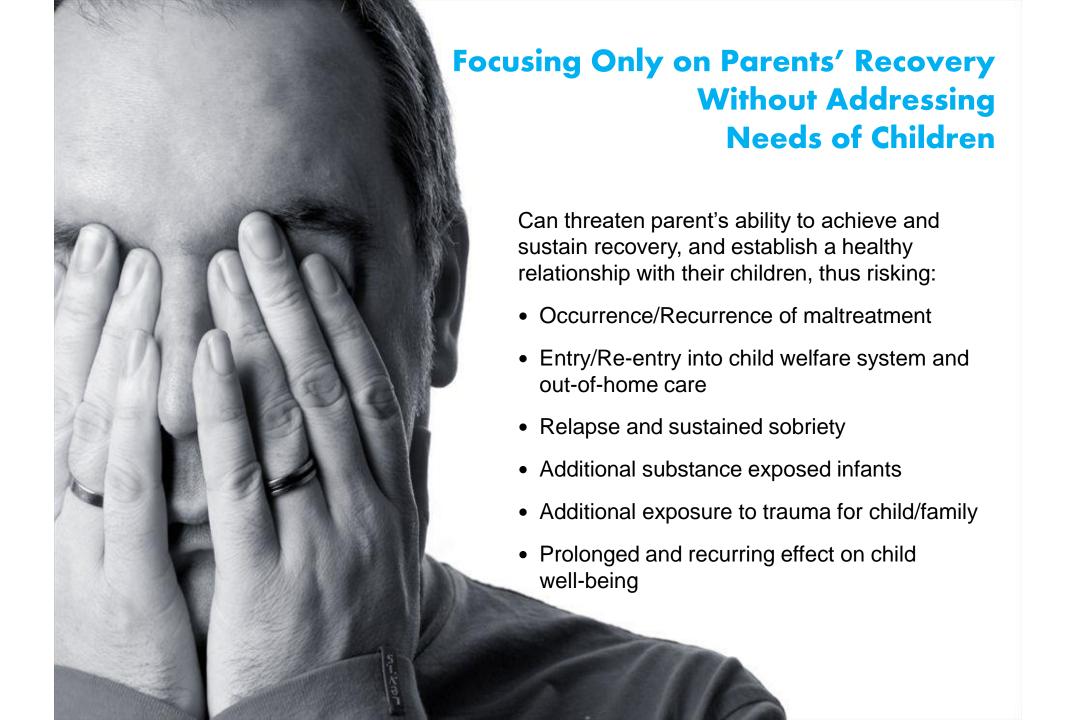
Trauma disrupts all aspects of normal development

especially during infancy and early childhood, including:

- Brain development
- Cognitive growth and learning
- Emotional self-regulation
- Attachment to caregivers and social-emotional development
- Trauma predisposes children to subsequent psychiatric difficulties







Parenting in Adult Drug Courts

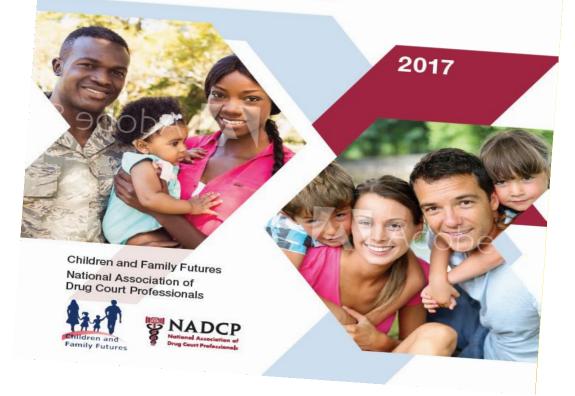


Adult Drug Courts that provided parenting classes had 65% greater reductions in criminal recidivism and 52% greater cost savings than Drug Courts that did not provide parenting classes.

Source: Carey, S.M., Mackin, J.R., & Finigan, M.W. (2012). What works? The 10 key components of Drug Court: Research-based best practices. Drug Court Review.

TRANSITIONING TO A FAMILY CENTERED APPROACH:

Best Practices and Lessons Learned from Three Adult Drug Courts



Transitioning to a Family
Centered Approach:
Best Practices and
Lessons Learned from
Three Adult Drugs Courts