SEVEN DEADLY SINS SERIES

Juvenile Drug Court Practices that Can Lead to Poor Outcomes

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When talking to several juvenile drug court (JDC) teams about specific qualities and characteristics of JDC team members, a common response is that the team members truly care about the youth. This is consistent with the general JDC mission, which is to care about JDC youth and their well-being. In fact, caring about youth is fundamental to virtually every JDC. However, the ways JDCs can show that they care about the youth varies dramatically across juvenile drug court programs and sometimes among team members. In the Juvenile Drug Courts: Strategies in Practice Monograph, the second strategy (of the proposed 16 Strategies), teamwork, emphasizes the need to develop a mission under which the juvenile drug court team operates. This mission provides a standard for each team member to work from and acts as a framework for creating program components, policies, interventions, and team members’ roles and responsibilities. Although the term mission is often used, this can refer to a court’s vision or to specific goals set by each JDC team according to their self-defined purpose and needs of the youth in their community.

JDC mission statements are developed and created to unify all JDC practices and team members according to an explicitly outlined purpose for that particular court and community. Thus, when JDCs deviate from their mission statement or when JDC team members begin operating under their own individual missions, JDCs can become ineffective and policies/practices can be potentially detrimental to the youth. Several outcomes of this can include: disengaged team members, competing interests among team members, polarized opinions of team members, JDC teams operating independent of judges, policy and program contradictions and inconsistencies, unpredictability and uncertainty in program components, and the neglect of youth and youths’ families (among other things). In these cases, if identifiable, it would behoove JDC teams to revisit both their JDC mission statement and their program structure. Typically courts have policy and procedures manuals that include their mission statement, which can help team members re-address the purpose of their positions and the JDC overall.

**If your court is not operating under a unified mission, your court might be committing one of the 7 deadly sins!**

**SHORT-TERM SOLUTION**

Designate part or all of a JDC team meeting to reviewing the JDC mission and goals for both the youth and the court. This will help team members re-align their personal practices with the goals of the overall JDC program.

**LONG-TERM SOLUTION**

Re-structure any and all components of the JDC program under the guidance of the JDC mission. It might first be wise to review the mission and make sure it still applies to the current context of the juvenile drug court program (e.g., some JDCs have recently developed co-occurring disorders policies/programs and the mission should be re-defined to account for these changes). This can include re-defining team members’ roles and responsibilities, approaches to incentives and sanctions, the incorporation of new or different treatment, and the inclusion of youths’ family.
Many of the practices observed in juvenile justice and in juvenile drug courts (JDCs) are adapted or directly inserted from the adult criminal justice system. These practices rely heavily on control and do little to engage youth in the process of their own change. However, juvenile justice research and reform efforts have gradually dismantled that type of thinking and many professionals working with justice-involved youth and families have begun thinking of engagement first!

This is especially important for JDC professionals because the premise of JDC is based initially on a therapeutic model. Many of the control and supervision strategies that can be found in traditional probation or adapted from the adult model crept into practices used when working with youth with substance use issues. But, they just don’t fit! For example, JDC programs’ Phase One requirements are often extremely strict and require youth to meet significantly high standards before advancing to Phase Two (e.g., house arrest or detention until a youth is clean or until they advance to Phase Two).

Many JDCs want to see 100% abstinence or guarantee 100% attendance in treatment and/or school during Phase One. In this case, the courts’ first instinct is to assert total control over the youth before considering engagement and letting the youth assist with identifying priorities, setting attainable goals, and developing plans regarding how to reach those goals. Unfortunately, the type of control put in place on the front end of the program leads to:

- Quick failures, rather than successes
- Extended stays in Phase One
- The loss of leverage by the team because they have used two sanctions that should be used as their “hammer.”

Stop It! This is one of the 7 Deadly Sins!

JDCs that do this are misusing resources and setting youth up for failure, as well as lengthening the time youth are spending on probation. JDC teams should structure Phase One to include orientation goals where much of the responsibility is on the team to conduct assessments, develop integrated case plans, refer to services, and to familiarize the youth with the JDC programs and practices.

**SHORT-TERM SOLUTION**

Agree, as a team, that this type of control should not be a part of the JDC program. One way to ensure that the team does not focus on control is to develop a checklist for Phase One:

- I met with my probation officer and completed a youth assessment. Date: ______________________
- My probation officer helped me develop a case plan with school, family, and community related goals, and I have a copy of my case plan. Date: ______________________
- I met with the treatment provider to complete an assessment about my substance use and needs. Date: ______________________
- My treatment provider helped me develop a treatment plan with goals to work through during the next phases. Date: ______________________

**LONG-TERM SOLUTION**

Revisit the entire phase structure and insert checklists and/or objective measurements to define progress that promotes engagement rather than control. These fixes will ensure that the team is measuring actual progress by the youth and that the progress being made is focused on engagement rather than control.
Selecting the right youth for your juvenile drug court can be challenging. Research and practice have debated about the appropriate JDC target population for years. However, recently practice and research have begun to converge around an ideal target population of youth who are at high risk of reoffending and in high need, both for substance abuse treatment and other services. In other words, these are youth who cannot be successful in substance abuse treatment without the influence of the court, but who also cannot be successful in completing their terms of probation without getting substance abuse treatment. This can lead JDCs to take in youth who do not necessarily fit the profile. This over-inclusion is often driven by the thought that anything is better than nothing. Unfortunately, this is simply not true, and it can damage both the young people who are lower risk, with fewer needs, and the integrity of the JDC itself. Other juvenile drug courts struggle because their funding is tied to the number of youth enrolled in the program. For them, they have to meet their capacity. Unfortunately, in most cases their capacity number was selected arbitrarily and may not be realistic for their communities. In both of these cases, it is vitally important for the ongoing success of individual JDCs, and for the JDC field as a whole, that they stop widening the net and instead concentrate their efforts on the youth who need the intensity of services that 9 – 12 months in a juvenile drug court provides.

If a JDC program utilizes an anything is better than nothing mentality when approaching targeting and eligibility, they might be committing one of the 7 deadly sins.

**SHORT-TERM SOLUTION**

The JDC Steering Committee should meet and ask these questions:

- Are the youth high risk/high need?
- Are we using validated legal and clinical screening and assessment tools to determine risk/need?
- How many of our youth currently in the program fit this profile?
- What will happen to the JDC if we stop taking youth who are lower risk with fewer needs?

Depending on the answers to the questions above, the team should make a plan to:

- Implement validated legal and clinical screening and assessment tools to determine risk/need.
- Review the data from their community to get a better idea of a realistic number of youth for the JDC.
- Take necessary steps to discuss with funding agencies the purpose of the juvenile drug court and the right youth for the program.

**LONG-TERM SOLUTION**

The JDC team should use their positions as leaders in their communities to advocate for the creation of a continuum of care that provides services for youth at all risk and need levels.
Most Juvenile Drug Courts (JDCs) understand that their mission is to use therapeutic jurisprudence to reduce substance use and other criminal behavior by providing youth with healing services and supervision. They offer treatment, support services, prosocial activities, incentives, and frequent drug testing to bring about positive changes in a youth’s behavior.

However, when it comes to the court hearing, some JDCs lose their focus on being therapeutic. Instead they emphasize jurisprudence and legal process. In doing so, they miss opportunities for making meaningful connections with youth and families.

Many JDC hearings start with calling a youth’s case number for the record. This is followed by each legal team member – prosecutor, probation officer, and/or defense attorney – remarking on the youth’s behavior and any legal or compliance issues that have arisen. Eventually, the judge speaks directly to the youth and family members and asks how things have gone since the last hearing. The judge gives praise for progress and identifies the issue before the court – a sanction concerning a dirty drug test or an incentive for program compliance. The hearing is concluded when the judge issues orders and sets the next hearing date. The hearing lasts 3-5 minutes and then the next youth’s case is called. Youth participants and their family members sit through an hour’s worth of hearings, all involving a similar process to the one described above. After the very last hearing, the judge adjourns court.

Focusing court time on so much process and reporting (without a specific and intended purpose) instead of on youth and family engagement can be considered one of the 7 deadly sins.

What would be a more therapeutic and engaging approach to court hearings? What would help participants feel that they matter and give them hope that they can achieve good outcomes with something they have failed at in the past?

**SHORT-TERM SOLUTION**

Judges should use court time for their interaction with participants. Research indicates that a judge’s relationship with JDC participants is important to positive outcomes. Court time is the only time judges have to see youth and caregivers and hear from them directly. Judges can summarize for the youth and family what was discussed at a case staffing and may note if there were any differences in perspectives among team members. But primarily, the judge should focus on speaking with the youth and family and asking questions that engage the family in conversation rather than in providing yes or no responses.

JDCs should promote a positive and respectful atmosphere from the moment participants walk into the courtroom. The judge’s first words at the start of a court session should include a welcome and an appreciation for everyone’s efforts to be in court. To benefit participants and promote their sense of inclusion, the judge should identify who the professionals in the room are and explain the purpose of the hearing. The judge should also convey the message that families are part of the team. Positive reinforcement (such as group applause) during the hearing in response to desired behavior that youth and caregivers have engaged in (e.g., attending all appointments, completing school assignments) should be given. And the judge’s last words should include thanking participants for coming and wishing them well.

**LONG-TERM SOLUTION**

Implement procedures for using the Rocket Docket and a fishbowl drawing as program-wide incentives to reinforce behavior.

Implement procedures for using interactive exercises like the Youth Progress Report to help prepare youth and caregivers to engage with the judge during the hearing about things that matter to them.
Currently, many juvenile drug courts rely heavily on consecutive number of clean days as one measure of success for youth. Indeed, this consecutive number often becomes the main focus for JDC teams when determining if the youth can advance in their phase or even graduate from the program. The fact of the matter is there are many measures of success that are far better at determining success in the program – progress on attainable goals, treatment attendance and engagement, building life skills, increased family or school connectedness, etc.

To make matters worse, many JDC teams “reset the clock when a youth has a positive urine analysis (UA). For example, a JDC might require JDC youth to be clean for 60 consecutive days before being eligible to advance to the next phase. However, at day number 40, the youth might test positive for alcohol or marijuana. In many cases, the team would set the clock back to day one for that youth or even send them back a phase.

The problem with this practice is that it ignores all of the youth’s success for the last 40 days. This setback also overlooks progress in other areas of the program and serves to lengthen the time in each phase.

Stop it! This is one of the 7 Deadly Sins!

**SHORT-TERM SOLUTION**

Instead of resetting the clock, simply suspend time for the youth until they provide the team with a negative drug test. So, on day 40 the young person provided a positive drug test and on day 45 provided a negative drug test...they now have 41 days clean.

**LONG-TERM SOLUTION**

JDC teams should broaden their definition of success for the youth and base that success on progress made on goals and activities set forth in their integrated case plans. It is important to understand the reasons why JDCs drug test at all, which is not to catch them doing something wrong. We drug test so we can understand their substance use in order to effectively insert a treatment response to keep the youth safe and moving toward healthy life choices.
Juvenile drug courts (JDCs) conduct drug tests. That is what they do. If they are doing it right, they drug test two to three times per week, randomly. What is not clear is how JDCs respond to the results of the drug tests. If JDCs are conducting two to three drug tests per week, they also need to respond to those results just as often.

Some JDCs are very punitive and have graduated sanction grids that look similar to this:
- 1st positive drug test = house arrest
- 2nd positive drug test = one day detention
- 3rd positive drug test = three days detention
- 4th positive drug test = MORE detention time

Some JDCs go the complete opposite direction and simply ask the youth to work harder next week. Almost all teams DO NOT have immediate reinforcements (incentives) in place to respond effectively to negative urine analyses (UAs), which is an issue if it is the behavior JDC teams most want to see.

To make matters worse, both approaches are often inconsistent and change when youth are honest, when the team thinks the youth has a valid excuse, or when the team feels that the kid just needs a break. Without adequate ways to monitor and track responses, this system gets even fuzzier for the team, youth, and families.

Stop it! This is one of the 7 Deadly Sins!

**SHORT-TERM SOLUTION**

If the team’s graduated sanction grid consists of detention time for dirty UAs, the team should make a commitment to develop a more therapeutic approach/response. The team can simply make a decision not to detain kids when they have a dirty UA. Once that decision is made, the team will be forced to find alternative responses. Remember that JDCs conduct drug tests to understand youth substance use and insert treatment. If youth find themselves in detention after every use, it basically becomes dead time, when the youth is not benefiting from the program.

**LONG-TERM SOLUTION**

The team should develop a structured continuum of responses based on contingency management and incorporate the use of a Most Valued Privilege to ensure that responses to positive AND negative UAs are consistent, immediate, and fair. To find out more about how to develop this continuum, click here.
My mother told me on more than one occasion that the road to Hell is paved with good intentions. And we have all heard about what happens when one assumes things. Unfortunately, many of the decisions made by juvenile drug court professionals are smothered with good intentions based on assumptions backed only by tradition, personal beliefs, what others have said, and other unreliable sources.

The decisions made by juvenile drug courts are too important and far reaching to be left to subjective experiences, misinformation, and half-baked truths—no matter how well intentioned. Think about the decisions juvenile drug court professionals make every day—who is accepted and who is rejected; what kind of treatment youth receive; who is deprived of liberty and detained and who remains free in the community; when are incentives offered and when are sanctions applied; and ultimately who succeeds and who fails.

It does not have to be this way. There are too many sources of reliable and valid data on which JDC professionals can base their decisions. The science of risk and needs assessment is strong, and JDC professionals can have confidence in the data generated by these instruments and make decisions accordingly. There is also a great deal of information on evidence-based practices (e.g., structured case planning, motivational interviewing, drug testing strategies) that helps JDC professionals to identify, prioritize, systematically address the specific risks and needs of JDC participants, and carefully monitor and manage progress. The rapid proliferation of evidence-based programs, practices, and interventions for delinquent youth and those using alcohol and drugs takes the guess work out of placing the right kid in the right program at the right time.

To avoid taking the wrong road and making poor—or even harmful—decisions for JDC-involved youth, JDC professionals must avail themselves of the full range of tools, strategies, and other resources available to gather the valid and reliable data necessary to make accurate, effective, and correct decisions about the risks, needs, and appropriate responses for youth, including official court records, social histories, risk and needs screening and assessment instruments, results of clinical assessments, and, yes, professional judgement based on experience, education, and training. To assure JDC-involved youth achieve the desired results and expected benefits of the JDC experience, JDC professionals must strive to match the youth with effective programs and interventions that best match the risks and needs of participants as well as their ability to respond to selected programming.

Finally, JDC professionals should not trust assessments of JDC performance and success to mere intentions and hopeful assumptions. Assessments of JDC performance and individual success must be based on empirically based measures of short- and long-term success, including successful completion of treatment programs, law-abiding behavior, family support, social connectedness, and freedom from alcohol and drug use. Simply to assume success is to commit one of the deadliest sins.

**SHORT-TERM SOLUTION**

Identify data sources already used in your JDC and look at the data. Figure out what the data is telling you. This can often lead to key insights into JDC practices that teams would have never figured out if they had not decided to stop and look at their data. This can also help JDCs identify aspects of the program that might be good candidates for implementing evidence-based practices.

**LONG-TERM SOLUTION**

Develop and maintain regular assessments of the JDC and its practices as they relate to outcome measures for JDC youth. This might include hiring or contracting an evaluator, and this might also require team members to collect data in ways in which it was not previously collected. Then, and arguably the most critical aspect of the process, JDCs should look at their data frequently to track JDC practices and youth outcomes in order to identify and implement evidence-based changes when the data suggest so. This is the process of making data-driven decisions and can help steer a court into progress and beneficial outcomes for youth and out of stale status quo practices and potentially negative decisions for youth.