

Please stand by for realtime captions.

We are going to wait for just a little bit to give people time to call in and join us. Thank you for joining us today. >> Will be starting in about two minutes. We are giving people time to get bogged in and settled in. -- Logged in and settled in. >> Thank you for registering to attend the juvenile courts presentation this morning.

We will get started. Hopefully you were able to join us okay.

Let's get familiar with the Adobe connect as we go to the presentation. People will be muted to avoid background sound. If you have any comments during the presentation please type those into the chat box on the bottom right. >> >> To test some of that, we would like to find out how you are participating today. On the top right, you will see a person, you can select hand raised or agreed. If you are joining us with your team in a conference room or a group, please raise your hand.

If you're joining this individually, we ask that you select the checkbox right there.

We have a platform on the side with the attendees. We can see who is checking off and when you're raising your hand if you have questions.

Let's test the chat box as well. If you're joining as a group enter the number of people that are with you in your team and the jurisdiction of where you're from.

If you are individual, type in your first and last name in the chat box so we know you are able to use the platform.

We have people from Grand Traverse. We have people attending on their own. That is great. Thank you for joining us today. >> For today's webinar, we would like to find out one thing that you would like to learn about today's training so we can address those. Please type it into the chat box as you get the chance that you would like to learn today. >> We have people typing in their learning objectives. Jessica Pearce will address those. >> We will talk some about the juvenile drug courts. We will talk in a general way. We are always available to offer more specifics.

We will definitely talk about appropriate candidate selections and what the drug court is about. How long juvenile should be in the drug court.

That's an interesting question. It varies. The average that kids spend somewhere between nine months in 18 months. I tell people to think about their terms of probation and match them up with the children that come in.

Erika, you need to call on the legality of testing juveniles. >>

Thank you for joining us and for typing in your comments and let us know who is joining us. We are going to get started. I would like to present, Jessica Pearce, to do the presentation. Let's get started. >> Hello. I am Jessica Pearce. I work for the national Council of juvenile and Family Court Judges and we are your host for this webinar.

Webinar is funded by the office of juvenile Justice and prevention. We always like to make this disclaimer .

Points or views or opinions expressed in this webinar those of the presenters and do not necessarily represent the official position or policies of OJ GDP.

We have been providing training and technical assistance to juvenile drug courts around the country off and on since 1998.

We have been able to watch how juvenile drug courts have evolved over time. One of the things we found that conceptually folks who work in juvenile drug courts understand the concept behind them. A lot of time it is the practical tools and how you actually put some of those concepts into practice that folks drug with.

How to help you to figure out to be practical and how to work with the youth and family in your community that have concurrent abuse . This is a challenging population.

Courts are targeting children of both delinquency and substance use and are the frequent flyers of the system. This means they have stuff going on in their lives that would have to help them address.

It is not an easy job to work in a juvenile drug Court.

I say I do this work since 1988. I do this work because it is important and what you do makes a difference and that you can help change the trajectory of someone's life. That is important. My job is to support you. We have a number of ways that we do that and the national Council. We have the juvenile drug Court's training and technical .

We have number of areas of focus. We have a project advisory committee. Just as you work as a team, on the national level we also work as a team because it is important for folks that come to your table to be represented as well.

Everything you are hearing today is the official juvenile drug Court should be like and operate like.

We provide training across the country. We come to a lot of state drug conferences. We also provide local training as well.

The good news is you can think of us as walking dollar signs. Our money is supposed to be spent to help you. That means if you are wondering and you want to have drug testing training, you can call me and say that you need drug testing and I can send somebody out there or we can set up a webinar just like this and get you training.

That is what our dollars are supposed to be spent for. I cannot help you hire new staff, but anything you have a question about related to drug court I can get training on.

It can be brought. If you are interested in inner Wedel -- innovative motivation . Trauma. Think broadly how you might want to have assistance for your courts as you move forward.

We are available to provide assistance up through 2018, at the moment. This is a really important thing that you know we are a resource for youth . You should think about calling on us.

We also provide technical assistance. We come out to your court, watching practice, staffing, court, and we offer suggestions and training just to your little jurisdiction -- team -- on how you can improve your practice.

It is intensive. It can really help change how you behave and practice.

The fourth thing we do is demonstration sites. This is new for us.

The -- two years ago we added our learning collaborative. The learning collaborative takes court from across the country and we asked them to experiment with this. Let them observe us and practice and see how they operate.

We asked them to make changes to their practice based on what we think is a good idea, what is best practice.

Juvenile drug courts do not have quite the wealth of research that adult court has. We are trying to do two different things.

National level is building research-based models that courts can use.

On our level we are building practice models. Research and practice comes together to provide you the best information.

That means that the demonstration site try things for us. One of the things we have been thinking about is that kids and drug courts sometimes I have a hard time meeting our expectations. The phase structure, which we copied from adult courts, might not work for kids as well as adults.

We have some courts that are trying point level system. As they move through phases they received points are just going to school, court, treatment. When they are in a sufficient amount of points, and other criteria such as sobriety, they can use those points to move to the next phase.

This makes it clear to the young people what is required and it puts them in the driver seat.

So we had these 12 courts trying out a reward system and we have watched. We measured outcomes -- not for youth but for program, they're having better graduation, fewer days in the phase.

We will be adding six new demonstration sites coming this spring. All of you are eligible to participate if you think your core would make a good guinea pig. You do get a lot of Council frequently throughout the process. We will give you lots of support.

The demonstration application will be out in March. And think about joining this as we build some research.

We try to create resources and tools for all of you. You can see in the top and you can download these from today's meeting.

The first is 16 strategies of the juvenile drug Court. It was developed in 2003 and we will talk more about that.

The 16 strategies were not enough to operationalize so we have created a lot of other resources as well. One of the best ones are the tip sheets which of the next files in the list.

I suggest you download both of those. The third file is this PowerPoint and you can download that as well.

We are going to talk about the key elements of drug court. We're going to describe a juvenile drug Court can improve response to an outcomes for court involved youth for substance abuse problems. We're going to identify the appropriate target population for JVC. >> Let's find out who is in the audience. We have about 50 people joining us and that is exciting for us at the national Council. We do want to know how you would describe yourself.

April will pull up and this will let us know who is in the audience. >> We have a full team here. We have some staffing and could run a court if we had some kids. This is a nice group to be here and we appreciate all of you taking the time.

We have another poll, we want to know about how long you have been working with juvenile drug Court. Check the box that best describes your experience here >>

Most of you are working in court. Some work in adult and juvenile or making that transition. It looks like we have a pretty good base that have been on the team and some that have been on for less than that.

Was the difference between an adult drug court and a juvenile drug Court?

I have lots of ideas about this but I want to know what you know. When you talk to adults you know a lot of stuff. I want to get your impression of the difference between adults and juvenile drug courts.

You will write your answers and chat and we will put them appear on the slide as well.

Parental involvement. Absolutely. That is the biggest challenge for us when we talk about juvenile drug Court is the parents. Should it be a family drug court were we are dealing with families -- parents and kids. It is more challenging.

Kids are not addicts. The youth that kids have is not the same level as adults. You don't have the level. Kids don't have a rock bottom yet. You don't use the same kind of approach.

Academics. We have kids that are in school. We want them to be in school and do well.

Age. And also bring developed -- development affect how kids make decisions. We have to take that into account we will have it -- interventions that don't work. >> Kids can't change persons, places, and things. They don't have the control over things we can ask adults to control. Their decision to -- making is not the same. They don't -- we want to focus on rehabilitation because they are impulsive.

Limited resources. All of our juvenile programs have weighed less money than their adult reports. We think about how much money we spend on gel versus treatment, they can make a person feel frustrated. >> Try to balance sanctioning and behavior change, focus on rehabilitation versus incarceration.

You have basically done the entire presentation just by answering this question. If you want to have more options for sanctions.

As adults we know sending them to jail for a day or two can be a really effective way to get their attention. That question incarceration gets good breeze views on the adult side.

For at -- kids, we don't want to do that. What we talk about kids and detention indicate kids that go to detect -- detention have worse outcomes here

Incumbents us on how to avoid using detention. It is not effective with youth and it does not help change behavior.

We do have an entire webinar about approaches called the three -- that is not something we're talking about today.

There are a lot of differences about juvenile and adult courts and how you work with kids. You have hit on all of them than I would have put up on the slide. >> We currently have more than 400 juvenile drug courts operating around the country. The exact number varies depending upon the year.

There are always courts closing and opening. I like to say around 400. I think the highest was 480 and the lowest in the past 10 years was for 20.

They operate in territories. We have a court in Guam and Puerto Rico. It is something that is here to stay. There is an enormous amount of congressional support for juvenile and adult drug court. There is funding and that's why I have money to help all of you.

Because adult drug courts are so popular we don't think juvenile will go away even though we don't have the basis of research. Some of our findings has been mixed. I think we should recognize the research base is limited and next. We need to go into juvenile drug courts knowing that

They can be enormously successful. Our jobs as training and technical assistance providers help you have the most successful drug court that you can. For any drug court that are lower down on the ladder of success, my job is to help pull them up to the top of the ladder of success.

Let's talk about where you are and operating your court.

Our previous question about where you were at or how long you had been in drug court, asked some of the same kind of questions but we want to ask it more directly. >> Lots if you are in currently operating courts. This presentation was designed as a starter for folks that were coming due to their drug court team.

We do have a lot of turnover in juvenile justice altogether and especially in juvenile drug Court. We wanted to have a way for new team members to get oriented to the concept.

You are in the right place.

Let's talk about the framework of juvenile drug courts. They come from the three basic principles . Problem-solving courts, incorporate the theory of therapeutic curators -- jurisprudence and focusing on the strengths of our young people.

There is a long history, going back to the beginning of juvenile courts, addressing special problems with alternative approaches.

In the last two decades we've seen the rise in drug courts and in problem-solving courts. I know one of you mentioned that you work in a mental health court, veterans court, DWI court. There is a recognition that some challenges that brink people to the court system require more in depth and specialized intervention. That is why these things happen.

Therapeutic jurisprudence is the underpinning of the drug court movement. It is about the idea that courts can be therapeutic environments. You do not have to be a therapist from the bench but you can create a therapeutic intervention that is appropriate and in court setting. Our three-pronged approach webinar talks more about that.

All drug courts, but particularly juvenile drug courts, focus on building assets within the clients that are within the courts. Juvenile

drug Court have a purpose to change behavior. It is not the purpose of the juvenile drug Court to punish behavior.

Punishes for those folks that come to the court wants and then they go away forever. They have an infraction, response, held accountable, and then they go away.

If you're going to have someone in your court for a year -- nine months, you can't have a punishment focus. That creates a negative interaction with that young person.

Think about sanctioning as a tool for behavior change not for punishment. It isn't necessarily a big thing for folks but it's something you want to keep in the back of your mind that that is what you are trying to accomplish. You want to change behavior not punish behavior.

You're trying to build assets. When we first started in this conversation, the strength-based approach was just emerging. We talk about strength of people would say why do I care about what is good about this a young person when they are here because they did something wrong.

We had to do a lot of educating. I think most folks that are working in the current drug court now are more familiar with this.

The other thing is the juvenile drug Court is built on a foundation in whichever one engages in collaborative solving problem. You are considering the broader issue on the offense and you are making an effort to build on the young persons strengths and abilities.

Wanted we start having juvenile drug courts in the first place? Sanctioning is not the same as punishment. Yes, Mark, that is something to think about.

Juvenile drug courts emerged back of the first instances of drug -- juvenile drug Court

there are debates about what we first opened our first juvenile drug Court. The most definitive answer seems to be around 1994. They did start -- based on the principle as adult court. There are people that have both concurrent abuse that need more than they are getting an a regular probation track or probation.

The idea behind drug court as a kid will not be successful on probation unless they get substance abuse treatment. But a cable not be successful in drug abuse treatment unless they have some accountability to be attending treatment.

It is that sweet spot between those two things we're talking about. Juvenile drug courts are dealing with the same issues now as when they started. Smoking, drinking, illicit drug use, among young people is high. We would like it to be lower.

Kids that do need to treatment have a hard time getting it. The first and lends substance abuse treatment were developed around the first drug court opening. Courts that started back in the 90s, there was not evidence-based adolescent substance abuse treatment.

When they started they were using adult models and they were hoping for something more specific to use. It is taken a wild for the two fields to catch up and converge. We do now have adolescent substance abuse models for substance abuse providers to use.

If you are provider and you're not sure you're using one or you maybe want to change to a different one, you can call us and we can talk about what the research is indicating as far as what works best with this population.

If your court folks and you don't know how to talk to the treatment folks and how it works, we can put you in touch with national experts in treatment and they can give you tips on how to do that.

We also know the kids that come into drug court come from family systems that have a difficult time engaging with the court system and often engaging with the treatment system as well.

This is changing every year that we are moving towards a more coordinated approach, but there is on standard probation, often times, the lack of the median seat. With the adolescent brains, a median seat really helps with making changes.

Let's talk a little bit about what challenges you are facing when working with substance abuse with youth involved with the court? Please write it in the chat. >> Coming up with sanctions other than detention or removing from the home. Lack of services a very rural areas. That is something very difficult if you want to start a drug court and -- you may not even have treatment or it only comes once a month. Figuring out how to make up for that.

Compliance with court orders coming to treatment. That is a challenge. I think treatment centers want the courts to be a big hammer for them in coming to be correct.

Transportation . I don't think I have been to juvenile drug Court that does not have transportation as an issue. In rural areas it is because services are far from where kids live. An urban area, it may take kids 1 1/2 hours. By the time that happens, they're not excited to engage in the service. >> Keeping kids in the system too long. I think that is an interesting question. I think it depends on the young person. What we want to target our kids that make sense for them. To be in the system long enough to be -- receive the services we are offering. Figuring out that sweet spot can be hard. The longer they are in the system it can damage their outcome. >>

Once you get them in a drug court, normal adolescent behavior becomes something you can sanction for. How to balance expectations is really difficult.

Resave it is a -- said -- are we focusing on marijuana use or parental drug use as well. The letters asking for the whole group, do any of you put used in the JVC for tobacco use?

I've never seen them put tobacco NJD say. We are looking at kids that are high risk and hibernate. Tobacco use is probably not an indication of both. >> Kids turning 18 in the program, testing positive for more than one drug of choice.

Yes. A lot of challenges and you have to figure out how to maximize your resources and give the kids the resources they need can be really difficult.

What is juvenile drug Court? This is the definitive definition. It is hard to describe it sometimes.

It is a docket within a juvenile court, for kids, with concurrent substance abuse handling glitzy. You want them to have both.

You need them to need oversight. The juvenile drug Court we offer regular review, weekly or biweekly and they are also in contact with the caseworkers and other folks. It really is an intensive program. I think it is even a step up from intensive probation.

You want to think about what young people benefit from that kind of setting.

The secret sauce for all problem-solving courts is this team approach. Certainly within the juvenile courts, folks have been more willing to talk across disciplines than they have in the more adult adversarial courts. It's still hard for people to reconcile the team approach and how to work together.

There is a question in the chat or what age or younger children appropriate? Some are going is 12 some as high as 15. Developmentally, and depending on their levels of use, I would say most juvenile drug courts are taking kids that the average age is 14 and 17 1/2.

The really young kids, younger than 14, it may not be developmentally appropriate to come in a juvenile drug Court because so many programs use group therapy where that can be difficult for a 12-year-old to be in the same group as a 17-year-old. That is a consideration.

And their levels of use and reasons may be significantly different if they have used at 12 and that may not be an appropriate place.

I would save most courts is 14 to 17 and half. If you see younger kids, it is important to think about who those kids are and if there are different places for them to get services.

What is the goals of the juvenile drug Court?

We want to provide an -- immediate intervention, treatment, and structure. The key thing is a median seat. We structured drug courts

for folks to come to court every week or every other week so there can be an immediate response to their behavior.

I think it is hard to connect the consequences if it does not happen within a span of a few days to the behavior that you are trying to get them to change.

In traditional court, we are scheduling hearings six weeks, eight weeks, months out, it can be hard for kids to understand the reason they are getting a disposition for months after their infraction.

They do not connect the two and they felt like it is something that is happening to them that the court is doing it to them.

Improving juvenile's level of functioning. We want young people to be sober and straight so they can learn the skills they need to be productive members of our society. The nice thing about juvenile drug Court we monitor and hold youth accountable. That gives kids a chance to be stable and function in school, at home, and in their communities.

Another goal is skill building. We think about skill building, and improve functioning, it is important to think about when we set goals around those things how we will help people achieve those in what the consequences will be when they don't achieve those goals. What we think about these things, kids being kids offenses, things that happen water in the drug court, be thoughtful how you respond.

You don't want to come out with your big hampers for things like skipping school. Going to school is a challenge and you want to address it but is not necessarily something you want to send to detention for it. Always be thoughtful of how you respond to useful behavior.

You want to help them. We are focusing on strength and building skills and becoming productive members of society.

We want them to have skill building skills, balance a checkbook, learn how to be responsible for themselves, make decisions, building healthy relationships with other healthy young people and adults for social activities and the like.

We want to help strengthen families. There are a number of ways to engage with parents and the juvenile drug Court. It is one of the most challenging aspects of the juvenile drug courts. We ask to have a three-part series on this that we recorded last fall that I would encourage you to look at  
on our website.

It gives you lots of ideas, practical ways, to engage with parents. We may offer it again so keep an eye out. It is definitely something we want folks to be focusing on.

When you look at the research on treatment, the treatments that do the very best are treatments that have a family focus.

That is because we return kids to a family system that is strengthened and it is better off than it was when they came into the juvenile justice system.

However, family treatment models are pretty expensive. Think about other ways to engage family and juvenile drug Court are appropriate.

The last thing we are talking about is promoting accountability. This is the public safety side of things. No one should approach a juvenile drug Court thinking kids will not be held accountable.

They come to court every week, there being drug tested 2 to 3 times a week, they're talking to their probation officer regular. They are held accountable. They're not necessarily punished as Mark mentioned. That is the distinction. Thinking about holding youth accountable, and how they can use restorative justice practice to make their communities whole and pay back some of the harm they have done to their family system, community, school.

That is all part of what we really want when we are thinking about our most lofty and high-minded juvenile goals.

I'm going to pause here and think about -- look at some of the things coming in on the chat.

What if a kid is Artie functioning at a high level? If you Artie have a kid functioning at a high level that may mean they don't have a high enough need for your services and it might not be appropriate.

If you have a lot of kids and juvenile court that are functioning at that level, I would think about your target population and whether you're getting the kids that really benefit from the services you have.

They offer gift cards for incentive for better grades but no one are in them.

Education and having educational goals is important. The important thing to remember in drug court as we want to have them goals, it's just hard to think about holding youth accountable for those things when those aren't the reasons they came to court in the first place.

We want to sanction for things that are conditions of probation. We want to be thoughtful of how we respond.

In our three-pronged approach, we do have ideas on how to motivate kids to do that.

It is hard when kids just don't care about school.

We have a question. How do you sanction a juvenile who is binge at inpatient treat facility in the still using?

That is hard. That is a big question that you need to talk to your treatment folks about. About why that person is still using. Whether or

not it was the appropriate inpatient facility, I think you need to talk to the young person. I think one of the things we sometimes forget about is that kids should have a voice in the process. Talking to them about why they are still using and talking to them about what they think is an appropriate sanction for continued use is really the way to go.

I know one of the responses that courts have when they get worried about kids and safety and overdoses, is to put kids in detention for their own good, keep them safer than my own use.

I understand it is scary when kids are in that position, but is important to think about what resources we off -- also have within our communities to avoid doing that.

Also to think of those resources do not exist how can we create them.

At what point do you consider terminating? I think it is important for courts to terminate sooner than they do. Most juvenile drug courts, they will let a kid fell a number of times before they had the termination

conversation because you want to help them. You recognize that have high needs and that they are at risk. You try a lot of different things.

I would suggest you start to do case file reviews a regular points when the person in the program.

At three months, six months, a year where you talk about the young person's progress to that point and talk about how likely they will be able to complete the program.

You want to make sure that people from trade are in the room, treatment progress. You should be doing frequent assessments if you can. If you can't afford to. Your reassessment at six months to say have we had any impact on the use or their functioning.

That information will give you a more objective picture is worth the young -- the child is that and help you make a better determination. >> These are really introductory what is the juvenile drug Court. We will have a series of webinars throughout the year that will answer these questions more in depth.

When juvenile drug Court started, there were no clear idea as to what it looked like. And the year 2000, the Bureau of Justice assistance and the office of juvenile Justice and juvenile delinquency, asked the national Council to get together a series of practitioners and asked them how they were doing business.

Out of that came the 16 strategies. This is been the basis of the juvenile courts up to this point. You can download this. It really gives 16 different areas that we want to focus on and juvenile drug courts.

The 16 strategies are based on the 10 components. If you are familiar with the 10 key components from the adult world, 16 strategies are familiar. We just added kid specific items.

Things like, strength, family engagement, educational linkages, developmentally appropriate services. >> It 16 strategies are too much you can boil it down to these five core concepts. The team approach and having all of the right players around the table, that is having policy and procedure manual and a participant handbook. That is all of the structure that you need to have for juvenile drug Court.

We have programming treatment designed in this is about case management and having them in the right program and getting the right services.

Target population. About having the right kit. If you don't have the right kid for our services that they will not be successful.

Monitoring and evaluation is the key to making sure you get the outcome you want. When I talked about the many case file review that is about monitoring and evaluation. That's taken a step back and looking at your program and say are we doing what we said we would do.

Is not always about hiring a valuator that collects data and spits out the back out to tell you what you're doing. It's about your team and are you doing what you said you would do.

Incentives and sanctions it would do bring those out because those are a cornerstone of behavior change. We carry the stick to help them to change their behavior.

We will talk a little about the challenges in drug courts. I have some agree and disagree polls for you .

Agree or disagree. Parents are an obstacle for success for people in the court? >> It seems that it comes up with a lot that agree with parents can be an obstacle.

Pawling, you did exactly what I would say which is sometimes are maybe. There is no definitive absolute for this question. It is the role of threes. About a third of your parents engage immediately. They're going to say oh my gosh I can't believe they have this problem and what can I do to help them get better.

A third are reluctant to but will engage eventually with the court. The last third may not ever engage. The challenge is we don't know what category the family falls into one we first meet them.

The engagement strategies need to be brought.

We have another question. Does every community need a juvenile drug Court? >> We are split pretty evenly between agree and disagree. A few more disagreed and don't tell like every community needs a drug court.

The thing to think about is do you have enough kids that need this kind of level of service. There is always a question of access for kids. If kids are in a more rural or a more poverty-stricken area, they might not have access to the same things from a more affluent rural or urban area.

Sometimes kids in poor rural areas do not get access to drug court because it's too difficult for her to exist there. Access is something to think about as to whether every community should have one.

Every community should have the opportunity and the make the determination based on their population whether it is appropriate. We are not there yet. We have many communities where a juvenile drug Court is a struggle because there are not services.

We definitely want to make sure there is equity for kids no matter where they live

Our last agree or disagree question. Some drug problems are not serious enough to a juvenile drug Court? We are getting a lot of agrees here.

The reason is important to think about juvenile drug Court as a partnership between the court and substance abuse treatment -- escort folks you should not have to know whether or not the drug problem -- have tools and screening and assessment tools that help them determine the level of care is. You can have objectivity whether they are appropriate for the program.

If we call it a problem than the qualify. But there are ways to know that without having to use any subjective criteria.

I want to go back to our core concepts and let us know we are going to be talking more in depth about two of these. Structure, target population. The other three will be covered under other webinars as we go along here

Structure. This is one of the ways that juvenile drug courts differ from regular juvenile court. Juvenile drug Court is a team approach. We ask courts when they start, to think about do they need a drug court?

I think courts that have been existing should be done every couple years of planning and revising.

I have heard -- and I have seen statistically the juvenile court participation is down across the board. Have all of you noticed? You have less kids coming into the system. Crime is down.

10 years ago there might've been a juvenile drug Court that had 20 participants. A lot of those courts are now saying they have 12 or 10. So going back insane do we still need this court and is it appropriate within our system is really a good idea. For the systems that are using something like reclaiming futures which is infusing many of these concept into the juvenile justice system altogether, it may turn out the special docket may not be necessary anymore because there is a

better continuum of care and services in their intensive juvenile probation folks can provide the same kinds of intervention that the drug court does.

I know in Allegheny, Pennsylvania, but have a substance abuse unit which probation officers are trained and innovation -- intervention motivation and treatment provider. They handle all of that within that unit. All of the kids that would be in drug court instead are assigned to this unit.

Thinking about what resources you have what may have changed in your community is really important when you think about where your drug court fits. I would suggest to all of you when you're the low man on the total poll on your team to think about this in coming back and talking with folks.

Colette has raised her hand. D have a question? >> I cannot meet your phone. Can you type your question and to chat if you have one? >> That is Pittsburgh, Pennsylvania. It is a reasonably large jurisdiction. I believe they have five J.P. owes in the unit. And three counselors they work with. Don't quote me though. >> We're actually going to take a look at it this spring because we want to know more about it because we think it is something that could be useful to other folks. If you're interested, make a note to contact me and a couple of months and I will have more information on how the program operates. >> I'm going to talk about who is on the team and briefly describe these. If your new person into the juvenile drug courts can be the most confusing thing.

We have the drug court coordinator. The coordinator was a lot of hats. They see the activities of the team, and conducts quality assurance of each team member, maintains client data, remains informed about budgetary concerns, coordinate services from all of the different folks around the table and community providers as well.

The prosecutor often serves as the gate keeper and selects the youth that will be referred to the drug program. They obtain prior criminal history, participate in team meetings, attend nonadversarial court proceedings. In juvenile drug Court we do want to have nonadversarial court proceedings. Anything that happens procedural these should happen and staff it is not the court.

Defense attorney. It is a juvenile drug Court defense attorney who informs the JVC participate about the rigors of drug court. I don't want them to sell the court to them. They many to be realistic about what is expected but if you are thinking about what is in the best interest of the child and get clean and sober is a good thing. Think about how you can help your client attend and feel good about it is an important part of that job.

You will preserve all legal rights of the Klein, advocate for fair and equal treatment during staffing. You don't do quite the same set -- level of defense in the courtroom but it is still a big piece of the

job. Purchase paid in team meetings and attend all nonadversarial court proceedings.

The treatment representative is the person that comes to drug court from the treatment provider to talk about rehabilitative therapy sessions, drug screenings, case management, monitoring, of the JVC participate. Educating the team about treatment. It can be hard for court to have every single counselor who works with the kid come to court. Sometime the treatment Representative has together everything and bring it to the table.

We love it when school is at the table. We know when school is at the table kids are more likely to be engaged in school services. No schools are a challenge. We have a whole publication about it on her website. I encourage folks to download it for ideas on how to work with the school. We also have probation officers.

Or community service. These have -- these are the folks with the biggest content. They do active monitoring of drug corporatists depends. They conduct home visits, school visits. They spend a lot of time but the young people. They are the experts on these kids and what they need and what challenges they face. They are really a valuable team member.

The judge. The judge serves a number of roles. They are the judicial officer. In some courts, the judges the coach. The teammates -- makes recommendation to the judge makes the final decision. The judge in some courts as a team member. They vote and come to consensus and they tackle the judge bites by that. He is the face of the team in the courtroom.

Often times the face of the team in the community. >> I want to ask the question what challenges are you experiencing with your team and I would like you to write down some of your ideas in chat.

As a team member, I'm guessing your defense attorney that you do not represent

individual participants. I think that's great, Mark. >> One person trying to dominate the conversation. Storming. Teams go through training, norming, storming, performing, training.

Overzealous public defender. I think it is important to remember it is hard, especially if you are a public defender prosecutor, coming to the drug court team and thinking about how you have to change your role and point of view. How to buy into the team process could be very process.

Understanding roles. This is the biggest challenge of the longevity and the sustainability of our courts. It is really easy to drift away from their original mission and those that do not buy and.

Don't agree on sanctions. That can be a big argument on how to have an approach. Again, some of our tools are to help mitigate that and have a plan so you don't have to have a debate on what sanctions will be. It is clear this happened and so this has to happen.

That is one of the things we've been trying to help teams with.

Battling negativity. Confidentiality.

We have a whole presentation on confidentiality of our series webinars. Terry, you should come back to that. It is really to have those all week conversations about our use of the drug court. I've seen so many times in small towns how you just know all the things about all of the folks.

I come from a small town. When I go home my mom always tells me about all of the people that are in drug court now. And they only have an adult drug court. Even if we try to keep the proceedings confidential, everybody finds out anyway. So thinking how to keep things confidential is a challenge.

How do you run staffing so you don't spend three hours staffing and still feel like you have enough time to talk about cases. That is a challenge that people have.

They are too short. I've never seen them be too short, I've seen them go all day and you have to bring a lunch.

We will have a webinar in the fall on staffing. Agree on things. Be more creative

You guys have a lot of stuff going on.

These are definite challenges that all courts are facing. One of the things I encourage people is if you are experiencing challenges as a team to spend time just addressing them. Too often we get caught up in the day-to-day work and having staffing and courts in getting kids to appointments and making sure we have the ducks and line. We do not talk about the health of our program. We do encourage drug court teams to do that regularly.

Were getting low on time so we will skip that question.

I want to talk about target population. When we think about juvenile drug Court, where do they fit. Again, this is one of those times where we have some research, but we don't have a definitive substance abuse used -- youth, score on the moderate range while also having high needs in the area of X, Y, and is the.

Were not quite there but I can tell you general things. We do think kids that are moderate to high risk, both [ Inaudible ] different things happen in the juvenile system. The risk and load need, that is the bottom left quadrant. Noncompliance calendars, prevention services, apps this is a proximal goal that can be reached.

About that, they don't have a high substance abuse need but they have high compliance. This is classic probation.

In the quadrant across, for kids that have high risk appetite needs, the status calendars, intensive treatment, compliance consequences, positive reinforcements.

Underneath that kids with a high treatment need but not risk of delinquency, less intensive treatment and positive reinforcement.

So where do juvenile court said. If we think about them on the continuum, both substance and criminal a genetic risk, they are the six sevens and eights.

You cannot take the nines and tens because they may need stuff that highly specialized. There are not enough kids that will score 89 and tend to make it makes sense to have an entire docket.

You don't want to take much lower than six on the criminal list and substance abuse treatment because they will not be as much as you are offering. Then you are widening the net.

You're really thinking about that sweet spot. There are lots of ways to get there but that is who we think is the appropriate target population Eric

The three keys to success. We want to match the right use, to the right program, at the right time.

The right use is based on static risk, dynamic risk, and their open and willingness to go to treatment.

We find these things out using structured decision-making tools. We want you to be using risk need tolls with kids for the legal screening and for the clinical screening because you need to do both and use appropriate tools for both.

Once you have screened, you need to assess. You need to match them to the right program. That is an evidence-based program where you match individual needs and implemented with integrity.

This is your drug court. Evidence-based services, treatment, therapeutic jurisprudence principles of the courtroom and individualizing the approach.

And at the right time. The youth is 17 1/2 I will be turning 18 they can come into your program. Sometimes, their level of care is too high. A young person is intensive outpatient treatment but the young person really needs inpatient. That is not the right time for them to come into your drug court. They need inpatient treatment if they is available.

Let's talk about more specifically the eligibility criteria. The right kid, you want another age range, chronological history, probation history, risk level and needs level. You want to have all of that. That is objective criteria and information.

What we mean by the right time. That the program link is appropriate. Your terms of probation should match. If a young person is on probation six months and you know it takes nine months to graduate from your drug court, that is not a good match because it's not the right time for the kid.

A drug use history. Many courts require kids to have had an instance of treatment before they come into drug court. They want to make sure these kids that have tried other things and have not been successful in other places.

And recent drug use.

What we mean by the right program? What services do you have available? I tell you to target those six, sevens, and eights. If you don't have intensive outpatient treatment it will not work for you. You have to think about what services you have, treatment options you have, What supervision they need.

All of these need to match up to make sure you're getting the right kids for your drug court.

What about the juvenile that fits the criteria but the parents do not?

There is much debate and little evidence about how to appropriately involve parents in drug court. We know that programs that involve parents with kids do better. Drug court asked parents to attend court, that is not always appropriate.

Sometimes drug courts say do you have any other responsible adults in your life that will come to court with you. What they find in those cases, if the young person is right and the parents are not, they try to find some surrogate adult that would serve the role that the parents would ask

If your program is using light functional family therapy, that happens in the home, if the parents refuse that you cannot take that cater to your program. It is heartbreaking when that happens.

You really do have to think about your requirements and how it matches and if you are comfortable doing that.

To Pauline's question, other jurisdictions of validated assessment as to what use is accepted? Yes.

What I would love to see happen everywhere is kids get screened, based on the screening it is indicated if there should be an assessment, and they get referred for the assessment Eric

Than the assessment happens and once it is done, the referral to drug court is made based on information based on the assessment. That would be the ideal plan.

Because it is hard to pay for an assessment without a disposition, what mostly happens is that kids get screened and they get professionally refer to drug court as a disposition so they can pay for the advancement.

Most of the time the assessment comes back that the drug court is still appropriate. If it doesn't, the kid needs an escape hatch so they can be let out the drug court because they are not an appropriate candidate.

We want everyone to be using validated screening and assessment tools. That gives you objective criteria as to who comes in your program.

What assessment tools do you use?

If you want to chime in as to what you use.

Mark, there is no tool to assess parental appropriateness. It is based on how willing they are to participate and join into the services.

If you ask a parent to attend every week and they absolutely can't or won't, then you have to think about is that the right kid to come to the program. Is there a way to get around that? Those kind of things.

Back to the question, the assessment tools. The game, for risk and need on the legal side we have folks using the PAC T, the Maisie is an assessment tool that is quite good. Kathy has a whole list.

Based on your answer of parent involvement, is it improper to pass back to force parental involvement.

I have seen courts operate without parents at all. Kids come to the program and do well. If you have parent requirements, you should be thoughtful about what the parent requirements are and how likely it is that they are able to meet those requirements. Always say you would start out with a baseline of parental involvement. Maybe the parents participate in a monthly call with somebody from the drug court team or maybe it is they come every week to court or maybe it is individualized workout plan with every parent and you say your kids are in the drug court and we want to work with you what can you do. Can you come to court every week? Can you do a call at the caseworker? Can we stop by your house and chat?

Asking those questions and where they are at for participation. I do have courts that say parent involvement is nonnegotiable. If a parent can't participate and we can find another adult and they can't take that child. It is what your team decides is how you do it.

You think that parents should be ordered to court. Some people think that appearance would've done a better job that they would be in the system. Sometimes there is an abuse or neglect petition filed on parents and drug courts. It does not happen very often though.

If you're trying to create a relationship with them where you're working towards the same goal, you want to work as nonadversarial as possible.

I've never heard of the Patty, Pauline. >> The webinar we will do in March is more in debt about this approach. This right kid, right time, right program for approach. We will talk about scores on screening and assessment tools can help us make decision on what kids are right for the program.

We want you to take a broad view of your program. We always say good, better, best. When you think about your target population and your criteria, I want you to take a look at it and decide if you fall into the good, better, or best category.

I encourage teams if you're good, I want you to move to better. Give your best I want you to think about what is exceptional.

Our last question and we are almost done, I want to end on a positive note. What is the payoff for families and organization, communities, partners, what payoff will they get if they participate in you and the juvenile drug Court? >> Better communication. For parents they really see a change in their young person and they feel like they have much better communication with them and function better as a family.

Time together. I have seen courts offer optional family activities they can come to, like a date night. They will offer food. I think it is key. The homeless, Washington team game night did not have a good turnout, but then they talk to the other families and got better and better attendance as it went along. Thinking about those things.

And awareness there are programs available to address issues. I think communities recognize their challenges for kids in their community. They don't always know there are services and programs available to help them address them. >> I think parents really want to function well. Even parents that have their own substance abuse, mental health issues, lots of other issues going on. Most parents to let their kids they just don't necessarily have as many tools or they are overwhelmed by the circumstances.

Think about how we can help them an increase in value add for their family is important.

Increased functioning for kids. We have kids that will go out and get part-time jobs and be part of their community, that benefits the community and family. It all has a ripple effect.

I think you hit on something important with your comment, Amanda. Even if you improve functioning while in the court, it is still a success even if there's not a long-term consequence.

One thing we struggle with is how to define success. Sometimes, our kids are not going to be sober, straight adults, for the rest of their

lives. And sometimes that is totally appropriate. Sometime it is a lifetime challenge for them.

So what we mean by success of how to talk about success with the families and community is really important.

You want the success to be sustained, but that is not on you that is only a person themselves.

We have some more comments in the Morgan wrap up.

To the evidence-based studies follow the juveniles for a long period of time? No. This is one of the problems with getting good outcome data for kids and in the drug courts. We do not get a lengthy outcome study. What we do know is delinquency is something that the cyst overtakes. Most crime is committed by younger people not just kids are under 18, under 25. After 25, the incident of crime rate the cyst over time and it becomes those folks that have been habitual lysed and chronic criminals at that point.

What we do know about substance abuse, it is something -- it's a disease that has an early adolescent onset. The earlier and younger kids start using, the likelier they are they will continue to use throughout their life. They will have periods of treatment, sobriety, new use, treatment, sobriety, new use. The earlier we can intervene in an cycle, the better our we are for having a long-term impact

If we can intervene with the young person search using at 12, and re-intervene at 15, then maybe there cycle of sobriety, can end at 35 with survivor -- sobriety instead of waiting until they are 55 for sobriety.

It's that sort of thing we know early intervention is better.

Do we not know if the evidence-based program work or change behavior? We do to some extent. There is research. Our pool of research for juvenile programs altogether is much shallower than the pool of research for adult programs. We have evidence about substance abuse treatments that work well with kids. Cognitive behavioral therapy, the seven challenges, functional family therapy, systemic family therapy, assertive community reinforcement approach .

Those things have evidence of support they work well with kids. It does not have a long-term outcome component to them where they followed young people into adult hood. Getting kids to respond to follow-ups after they turn 18 is really tricky because of the juvenile record and how juvenile are sealed. Sometimes it's based on general knowledge as when crime ends and substance abuse desist

I would not say we don't know anything but there are still a lot of questions and there is no silver bullet. There is no do this this way every time and you always have good outcomes. We're still waiting to get to that level.

The reclaiming future project is to integrate webinar or responsible practice in a few weeks that we will send out to all of you. It talks about how the adolescent focused and appropriate in working with young people.

Mark, I am Jessica Pearce , that is my phone number and my email. Email is probably the best way to get a hold of me. We have a whole team of folks that work of the juvenile drug Court.

If you want more services, more information, more webinars. If you have a topic you want to webinar on, send me an email and I'll put it together.

If you want training, someone to come out and look at your core to give you feedback on how you are operating, all of that is within your grasp. You just call us. You are on our list because you receive the email. He received the notification that we were doing this webinar.

We have your contact information. I would encourage everyone to follow up with that.

The three-pronged approach webinar has not been officially announced yet. You are the first to hear about it. We are excited to be providing the series to all of you. I hope you can join us for all of them pick

Eloisa has put some information in about our website.

When I in this webinar, you will get our evaluation. It will pop up in the window. I just ask everybody to take the two minutes to respond to the information about this webinar and how you liked this seminar.

Thank you for attending and I will see you next week. >>  
[Event concluded]