

Juvenile Drug Treatment Court Guidelines Frequently Asked Questions

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Questions

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|---|----|
| What are the Juvenile Drug Treatment Court Guidelines? | 2 |
| What are the purpose and goals of the JDTC initiative? | 2 |
| What is the significance of adding the “T” for Juvenile Drug <i>Treatment</i> Court Guidelines? | 2 |
| Does this mean all juvenile drug courts should just be called juvenile drug treatment courts? | 3 |
| Does the evidence suggest that JDTCs are effective? | 3 |
| How are the guidelines being developed? | 3 |
| Are the JDTC Guidelines just an update of the “ <i>Strategies in Practice</i> ”? | 4 |
| Why was it important to synthesize the current research comprehensively to develop the JDTC Guidelines? | 4 |
| Are the JDTC Guidelines “evidence-based”? | 5 |
| Why “guidelines”? Are the “guidelines” a program model? | 5 |
| How is the developmental perspective in juvenile justice incorporated? | 5 |
| How is family engagement included? | 6 |
| Should violent offenders be excluded from participation in JDTCs? | 6 |
| How is eligibility addressed by the JDTC Guidelines? | 6 |
| How will the JDTC Guidelines be integrated in the ongoing work OJJDP does on juvenile drug courts? | 7 |
| Who is involved in this initiative? | 7 |
| References | 11 |

What are the Juvenile Drug Treatment Court Guidelines?

A juvenile drug treatment court (JDTC) is a court calendar or docket that provides specialized treatment and services for youth with substance use disorder or co-occurring mental health disorders who have come in contact with the juvenile court.

The Office of Juvenile Justice and Delinquency Prevention (OJJDP) awarded American Institutes for Research (AIR) a cooperative agreement to establish guidelines for JDTCs, offering a more uniform approach to providing treatment and services based on current research in adolescent development, substance use treatment, youth interventions, family engagement, juvenile courts, and juvenile drug courts (JDCs).

What are the purpose and goals of the JDTC initiative?

Youth experiencing substance use disorder is a serious and widespread problem in the United States. Substance use disorder often co-occurs with mental health disorders and can negatively impact adolescent development. Effectively addressing the needs of such youth is a challenge frequently faced by juvenile courts.

The new JDTC Guidelines will provide juvenile courts with an evidence-based, treatment-oriented approach that emphasizes family engagement and addresses the substance use and often co-occurring mental health disorders experienced by the youth. The guidelines are grounded in research and also are consistent with the developmental perspective in juvenile justice.

A central goal of this initiative is to translate the available research evidence into a set of research-informed guidelines to further improve practice that emphasizes tailored and targeted services to a specific population. With its focus on research, the initiative will also assist the field in understanding the breadth, rigor, and limitations of what is known so far.

Operating JDTCs will find the guidelines useful for developing strategies for reform of the current practices to bring them in line with evidence-based practices. New JDTCs will find the guidelines helpful in designing their JDTC model and practices.

What is the significance of adding the “T” for Juvenile Drug *Treatment* Court Guidelines?

We use the term “juvenile drug treatment courts” instead of “juvenile drug courts” to address the important role treatment as a core component or element can play in a JDC program. The JDC approach, established in the 1990s, was pioneering in providing intervention, treatment, and structure for youth involved in substance use and delinquency. It aims to treat substance use disorder as a public health issue, not just a juvenile justice issue.

At the same time, a body of evidence has been growing about the role treatment can and should play in JDCs. This research about treatment also underscores the need to identify the correct target population that is likely to benefit from a treatment-oriented approach in courts.

Although evaluations of JDCs have yielded mixed evidence to date, some key success has been demonstrated when evidence-based practices are effectively used. Two evaluations involving randomization and featuring high methodological rigor demonstrated that evidence-based treatment made the JDC more effective (Henggeler et al., 2006; Dakof et al., 2015). In addition, the largest quasi-experiment to date demonstrated evidence-based treatment with JDC does as well as or better than evidence-based treatment alone in a matched cohort of justice-involved youth (Ives et al., 2010).

Does this mean all juvenile drug courts should just be called juvenile drug treatment courts?

The JDTC approach addressed in the guidelines represents a unique, treatment-oriented approach that requires strong community partnerships and enhances these partners' capacity to engage youth with substance use disorders in the treatment, mental health, and social support services that can help them recover from their addiction and lead healthier lives—both mentally and physically.

Consequently, we use the term “juvenile drug court” when referring to the historical, broad implementation of this type of approach, even though we do recognize that many courts emphasized the treatment approach well before the establishment of the JDTC Guidelines. We are intentional in using the term “juvenile drug treatment court” when specifically discussing courts aligned with the JDTC Guidelines.

Does the evidence suggest that JDTCs are effective?

Whether or not JDTCs “work” is a complex question. First, because “juvenile drug courts” are a type of practice or approach with many interrelated components and historically not a single established and evidence-based “model” to follow, wide variation has existed in implementation and practice. Second, few methodologically rigorous evaluation studies have been conducted on the impact of these courts, so much of what we think we know we actually cannot be confident about. This project attempts to address these two issues, first by establishing research-informed guidelines and second by rigorously evaluating the impact of courts following these guidelines.

How are the guidelines being developed?

There are two phases of the project with related but different goals. In Phase 1, the guidelines were developed. During Phase 2, testing, and (if appropriate) the guidelines will be revised.

Phase 1: In this phase the focus was on the development of research-informed guidelines. The research team engaged in 18 months of research activities to inform the guidelines. These activities included:

- Systematic reviews of research on the effectiveness and implementation of JDCs, adolescent substance use treatment programs, and the implementation of adolescent-focused, evidence-based programs in the fields of juvenile justice, education, health, and

child welfare (Campie and Sokolsky, 2016; Tanner-Smith et al., 2015a; Tanner-Smith et al., 2015b; Wilson et al., 2016)

- Listening sessions with JDC professionals to identify issues related to screening, eligibility, assessment, treatment, family collaboration and outcome monitoring; and to obtain input and feedback on preliminary research results from the literature reviews (Rubin et al., 2016)
- A systematic scan of policies and practices of current JDCs nationwide (Choo et al., 2016)

Phase 2: Once the JDTC Guidelines are published we will conduct a series of studies to evaluate them as they are used in the field. The research team at AIR is currently designing evaluation goals and strategies for planning and conducting the studies. The objective is to conduct research, but it is phrased generally as “testing” because it is not necessarily a single evaluation or study, but more likely a series of studies.

Are the JDTC Guidelines just an update of the “*Strategies in Practice*”?

Despite the rich body of practice guidance developed to support the implementation of the *Strategies in Practice* (the 16 Strategies—Bureau of Justice Assistance, 2003), there was no comprehensive set of research-based guidelines to inform the structure and work of the JDTCs. The JDTC Guidelines respond to that need by providing guidance based on high-quality syntheses of research on and applicable to JDTCs. During the research phase of the new guidelines development initiative, the 16 strategies were reviewed in light of research on and evaluations of JDTCs published since the strategies were first released. Developing and then testing the guidelines in the field also establishes them as dynamic and likely to be revised with new research findings.

Why was it important to synthesize the current research comprehensively to develop the JDTC Guidelines?

Whether or not JDTCs “work” is a complex question because “juvenile drug courts” are a type of practice or approach with many interrelated components and no established evidence-based “model” to follow.

We know it is hard to generalize about all JDCs, as a theoretical approach and practice, based on any single evaluation or even multisite evaluations. As an initial step to lay the foundation for the development of these guidelines, we conducted a meta-analysis to synthesize the existing research evidence on JDCs. We synthesized results from 46 randomized and well-controlled, quasi-experimental, evaluation studies that reported on the effects of JDCs versus traditional court processing. Some evaluations and researchers concluded there was net widening, increased recidivism, and other negative outcomes (i.e., they “do not work”). Other studies demonstrated reductions in drug use and future offending as well as cost savings. These findings, however, are only found in the case of specific courts and pertain specifically to the practices and programs used in specific locations.

Because of this complexity, the best way to synthesize the research and overall “effect” of this type of practice is through a meta-analysis, which was the first step in this project. The results indicated that, overall, JDCs were not found to be categorically more or less effective than traditional court processing for reducing recidivism or drug use. The great variability in effects across the various studies, nonetheless, suggests that effective drug courts may exist. Yet, no distinctive characteristics of the more effective courts could be identified from the descriptive information provided in the generally low-quality research studies examined. The lack of high-quality JDC evaluations located in the systematic review highlights the need for more rigorous evaluations of JDCs in the field.

Other systematic reviews of substance use, youth intervention, juvenile court, and JDC research literature conducted by the research team at the start of this initiative, though, provided a research base from which a set of guidelines could be developed.

Are the JDTC Guidelines “evidence-based”?

The new JDTC Guidelines will provide juvenile courts with an evidence-based, treatment-oriented approach that emphasizes family engagement and addresses the substance use, and often co-occurring mental health, disorders experienced by the youth.

The JDTC Guidelines include three types of information: 1. Conceptual Framework and the Objectives of JDTCs; 2. JDTC Guideline Statements; and 3. Supporting Information. We consider the Guideline Statements to be evidence-based, and include corresponding explanations of the systematic synthesis of the rigorous empirical research behind the statement.

Why “guidelines”? Are the “guidelines” a program model?

The JDTC Guidelines are not a specific program model. Instead, they establish more general practices that JDTCs should follow. To inform practices, we include specific program examples that correspond with the Guideline Statements.

How is the developmental perspective in juvenile justice incorporated?

We would be remiss in developing new JDTC Guidelines without paying special attention to the developmental perspective for juvenile justice interventions. Over the past decade, the juvenile justice system has been witness to significant and impactful reforms, most of which are based in applying an adolescent development lens to all programs, services, practices, and policies. Indeed, we need to only look at the U.S. Supreme Court and its recent decisions to see that science and research are influencing practice changes within our juvenile court systems. Juvenile crime continues to remain low (since a peak in mid-1990s), and courts continue to focus on “right-sizing” the system once again.

There are seven hallmarks to the developmental perspective in juvenile justice (National Research Council, 2014), and the JDTC Guidelines have been constructed so that they are consistent with those hallmarks. For instance, it is important that JDTCs are serving only those

youth that meet the eligibility criteria—whenever it is appropriate, youth should be diverted from the juvenile court process altogether. The response of the JDTC should be individualized for each participant, based on assessment from validated risk and needs instruments. JDTC participants should be detained only when it is absolutely necessary for public safety reasons, and this has implications for the use of detention as a sanction. JDTCs need to pay careful attention to whether their practices result in disparate treatment for any groups of youth, and it is critical that youth experience JDTCs as being fair. Finally, family engagement needs to be a major priority for JDTCs.

How is family engagement included?

Because youth are still developing the cognitive, social, and emotional skills that shape their decision-making and behavior, it is critical that the JDTC process take into account the critical context within which adolescent development is occurring. Such development is influenced significantly by the community, peers, and the family. The research that informs the development of the JDTC Guidelines makes clear that the involvement of the family is important—the family can play a critical collaborative role with the JDTC if effectively engaged, yet can be a barrier to the successful completion of the program when not effectively and productively engaged in the JDTC process. The JDTC Guidelines reflect a vision that effective JDTCs will recognize and build upon the strengths, values, and diversity of families and honor and support families before, during, and after their children participate in the JDTC.

Should violent offenders be excluded from participation in JDTCs?

JDCs funded by the U.S. Department of Justice are required to target nonviolent offenders. The term “violent offender” means a juvenile who has been convicted of, or adjudicated delinquent for, a felony-level offense that (1) has, as an element, the use, attempted use, or threatened use of physical force against the person or property of another or the possession or use of a firearm or (2) by its nature, involves a substantial risk that physical force against the person or property of another may be used in the course of committing the offense [42 USC 3797u-2(b)].

How is eligibility addressed by the JDTC Guidelines?

JDTCs should focus on effectively addressing substance use and criminogenic needs of youth in contact with the court system to decrease future offending and substance use and to increase positive outcomes. In addition, JDTCs should ensure equitable treatment of all youth. Consequently, JDTCs should serve only those youth who meet the eligibility criteria. Research evidence and implementation and practice considerations indicate the following eligibility criteria:

- Youth with a substance use disorder
- Youth aged 14 or older
- Youth who are at moderate-to-high risk for reoffending

Youth who do not meet all of these criteria should be diverted from the JDTC process and directed into community-based alternatives. Formal processing in juvenile justice programs is associated with a higher likelihood for future offending and future system involvement, and involvement with higher risk peers also has been shown to enhance the antisocial activities of lower risk youth.

How will the JDTC Guidelines be integrated in the ongoing work OJJDP does on juvenile drug courts?

OJJDP currently has a number of ongoing JDC efforts that predate the JDTC Guidelines. These efforts also vary in purpose and vary in stages of development and expected close date. We expect that OJJDP will work toward aligning all this work with the JDTC Guidelines once they are released, but the timeline and extent of that alignment will vary.

Who is involved in this initiative?

OJJDP conceived of and is providing leadership for the initiative, which is being carried out by a research team at AIR. AIR has engaged a number of partners for a Core Research Team. During Phase 1 of this initiative, the Core Research Team had the responsibility for conducting a number of systematic reviews of research, policies, and practices. These efforts created a base of research-informed knowledge from which the JDTC Guidelines were developed. Throughout the process, the Core Research Team worked closely with a group of Core OJJDP Staff that offered expert review and guidance on all activities and materials developed.

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A Panel of Experts and Federal Partners was assembled to advise the development of the JDTC Guidelines. The membership of the panel was designed to reflect the makeup of a JDTC team (judge, prosecutor, defender, treatment provider, parent, and young adult) plus a researcher. The panel came together for a working group meeting in October 2015 and helped provide input for guidelines development process.

The expert panelists participated in the development of the practice guidelines in the following ways:

- The Core Research Team prepared a synthesis of the key findings from its reviews to form the basis for the development of the guidelines. A small subgroup from the expert panel was assembled to inform the process for the development of a first draft of the guidelines.
- The first draft of the guidelines was shared with the entire expert panel for review and comment.
- A communications team engaged a subgroup from the expert panel to inform the development of how best to communicate guidelines with the field.

- AIR followed up with many of the expert panelists to continue to explore ways that their individual and professional networks could be engaged to provide input and reaction on the guidelines.
- AIR followed up with individual expert panelists, as appropriate, for more focused requests relating to the evidence compiled in preparation for the development of guidelines.
- AIR will engage the panelists to serve as Ambassadors for getting feedback on the guidelines, and endorsing and disseminating the guidelines.

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