

ENGAGE, INVOLVE, EMPOWER:

Family Engagement in Juvenile Drug Treatment Courts

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Juvenile drug treatment courts have emerged as a viable alternative to traditional justice system processing for youth with substance use disorders. While research on the treatment and recidivism outcomes of these programs indicates mixed results, it also suggests several avenues toward achieving greater success. One of these is the subject of this technical assistance brief: family engagement.

Family impacts every part of a young person's life, and a youth's substance use treatment in the juvenile justice context is no exception. Successful family involvement in a youth's juvenile drug treatment court program may play a central role in achieving a positive program outcome, but until now there has been no overarching set of recommendations on how to effectively engage families in the juvenile drug treatment court process.

This technical assistance brief provides the first comprehensive set of recommendations for successful engagement of families in the juvenile drug treatment court process based on the results of a nationwide survey of professionals with youth-serving drug treatment courts, mental health courts, and hybrid courts.

The key findings of the survey—which measured court practices and staff perceptions related to family engagement—are presented in this brief, along with essential information on substance use and addiction among young people. Finally, this brief offers a self-evaluation tool to assess a court's current practices and descriptions of two juvenile drug treatment courts that demonstrate a strong commitment to family engagement.



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VS

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of youth in the general population (Wasserman, McReynolds, Schwalbe, Keating, & Jones, 2010; Merikangas et al., 2010).

Background

Substance use among today's youth is a significant public health problem.

Substance use has many negative consequences. Among others, these include alcohol poisoning, drug overdose, risky sexual behavior, unwanted pregnancy, contraction of sexually transmitted diseases, motor vehicle accidents, homicide, suicide, poor school performance, dropout, and contact with the justice system (Mertens, Flisher, Fleming, & Weisner, 2007; Schweer, 2009; Sterling, Valkanoff, Hinman, & Weisner, 2012).

Data from the National Survey on Drug Use and Health indicates that 22.8% of people aged 12 to 20 are current (past-30-day) alcohol users, 60.6% of which are binge drinkers and 15% of which are heavy drinkers (Center for Behavioral Health Statistics and Quality, 2015). Another 17.4% of youth aged 12 to 17 report illicit drug use within the last year; 9.4% report current use, most of which represents marijuana use (7%).

Substance use is far more common among youth in the juvenile justice system than in the general population. More than half test positive at the time of their arrest, and 78% are under the influence when being charged for their offenses (Mericle, Belenko, Festinger, Fairfax-Columbo, & McCart, 2014). A substance use disorder has been identified among 34% of justice-involved youth, compared to only 11% of the general youth population (Wasserman, McReynolds, Schwalbe, Keating, & Jones, 2010; Merikangas et al., 2010).

Based on extensive research demonstrating the success of adult drug courts, the first juvenile drug treatment court was formed in 1995 to address pervasive substance use among youth in the juvenile justice system. Juvenile drug treatment courts are specialized dockets primarily serving nonviolent, moderate to heavy alcohol- or drug-using youth within the juvenile justice system. These courts provide treatment for substance use disorders, using incentives and sanctions to prevent recidivism, empower families as support systems, and promote behavior change (Office of Justice Programs Drug Court Clearinghouse and Technical Assistance Project, 1998). Involvement is voluntary and commonly lasts about a year (Mericle et al., 2014).

But unlike the research on adult drug courts, studies of juvenile drug treatment courts have found mixed outcomes. Early meta-analyses found that juvenile drug treatment courts reduce delinquency only marginally compared to juvenile probation programs (Shaffer, 2006; Wilson, Mitchell, & McKenzie, 2006). More recently, a systematic review found that juvenile drug treatment courts significantly reduced drug use but had no effect on drug-related crime and had only a small effect on general delinquency (Mitchell, Wilson, Eggers, & MacKenzie, 2012).

In 2013, the Office of Juvenile Justice and Delinquency Prevention (OJJDP) sponsored an evaluation of nine juvenile drug treatment courts across three regions. The evaluation found higher rates of new referrals and new adjudications

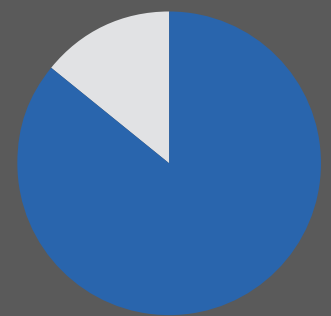
for seven of nine juvenile drug treatment court sites compared with youth on traditional probation. Only one site experienced significant reductions. In the final report, OJJDP underscored that juvenile drug treatment courts were not adhering to evidence-based practices, and that this failure is likely a major contributor to their lack of success across studies (Latessa, Sullivan, Blair, Sullivan, & Smith, 2013). This finding corroborates the conclusions of other reports.

Beyond a lack of adherence to evidence-based practices, there are other specific factors that may undermine the success of juvenile drug treatment courts. In one study of staff perspectives on juvenile drug treatment court operations, researchers found that judges and other staff most frequently cited parental factors as barriers to successful program completion (Mericle et al., 2014). Focus groups revealed lack of parental support, poor parenting skills, lack of commitment, lack of a family structure, and parental substance use and addiction as major barriers. Another study indicated that illegal drug use on the part of caregivers is a predictor of juvenile drug treatment court program failure for youth. In fact, the study found that caregiver substance use increased the risk of program failure by over nine times (Halliday-Boykins et al., 2010). The authors suggested that these caregivers are less likely to be engaged in their child's juvenile drug treatment court program and more likely to avoid appearing in their child's court hearings or treatment sessions for fear that someone will discover their own use.

Proper family or other caregiver engagement and involvement, including treatment and other services for caregivers, help to counteract these barriers and risk factors (Hills, Shufelt, & Cocozza, 2009; Marlowe, 2010; Mericle et al., 2014). One study found that the more often caregivers attended status hearings, the less often the youth were late or absent from school, missed treatment sessions, or received sanctions for behavioral infractions (Salvatore, Henderson, Hiller, White, & Samuelson, 2010). Another study found that juvenile drug treatment courts employing engagement strategies along with contingency management were significantly more effective than those that employed contingency management but not family engagement strategies (Henggeler, McCart, Cunningham, & Chapman, 2012). The programs that included family engagement strategies showed significant reductions in marijuana use and decreases in criminal behavior among marijuana-using youth participants as compared to programs that did not include family engagement.

These findings suggest that juvenile drug treatment courts should engage and involve families—broadly defined as immediate or extended family as well as others close to the youth—as partners in their child's juvenile drug treatment court program (Hills et al., 2009; Marlowe, 2010). This includes incorporating family-based treatments, parenting classes, and support groups (Mericle et al., 2014).

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86% of family members of youth in placement in the juvenile justice system surveyed by Justice for Families said they wanted to be more involved in their children's treatment (Justice for Families, 2012).

Family engagement has been defined as a collaborative relationship between agencies or systems and families that encompasses a spectrum of activity that not only includes the individual system-involved youth and their families, but also encompasses the policies, practices, and governance of the agency or system (Rozzell, 2013).

Family Engagement and Involvement

As studies of protective factors for adolescents indicate, a strong, supportive relationship with a parent or other important adult figure can have a positive impact and can serve to protect the youth against negative influences (Agudelo, 2013; DeVore & Ginsburg, 2005). Parents of youth in contact with the justice system often do want to be part of the processes and services involving their children. In a survey of family members of youth in placement in the juvenile justice system lead by Justice for Families, 86% said that they wanted to be more involved in their children's treatment (Justice for Families, 2012).

However, meaningful involvement cannot occur without engagement. Family engagement has emerged as an essential component of child-serving systems and is one of the 16 strategies set forth in *Juvenile Drug Courts: Strategies in Practice* (Bureau of Justice Assistance, 2003). Family engagement has been defined as a collaborative relationship between agencies or systems and families that encompasses a spectrum of activity that not only includes the individual system-involved youth and their families, but also encompasses the policies, practices, and governance of the agency or system (Rozzell, 2013).

Research suggests that family engagement should be implemented across the continuum of services and at all levels of the juvenile drug treatment court process. This requires a commitment from all juvenile drug treatment court staff, the judge, and service providers. Since the youth's involvement in a juvenile drug treatment court setting involves both treatment and accountability, engaging families may prove to be more challenging than in other systems, but overcoming the challenge may result in significant benefits. When families are effectively engaged, it becomes possible for them to be meaningfully involved in the youth's progress, provides a sense of empowerment, and promotes positive outcomes for the youth. This concept underscores the theme of this brief—engage, involve, empower.

Survey and Findings

The family engagement recommendations provided in this brief were informed by a national survey of juvenile drug treatment court professionals. This survey measured attitudes, perceptions, and awareness around various aspects of family engagement in juvenile drug treatment court programs, as well as current engagement practices and barriers to effective engagement. Professionals from 157 juvenile drug treatment court programs in 38 different states responded to the survey. See Table 1 for background information on these juvenile drug treatment courts. The full results of the survey will be published elsewhere.

Table 1. Descriptions of Juvenile Drug Treatment Courts That Responded to the Survey and the Youth They Serve

Characteristics of Program and Youth Served	Number or Percentage
Average number of program full-time employees	2.7
Average number of program part-time employees	1.7
Programs receiving funding from state government	48.4%
Programs receiving funding from local government	71.3%
Average number of youths enrolled by a program in a given year	19.1
Age-range of youth served	13-17.7
Average of enrolled youth charged with status offenses	18.4%
Average of enrolled youth charged with misdemeanors other than drug charges	42.5%
Average of enrolled youth charged with felonies other than drug charges	22.7%
Average of enrolled youth charged with drug charges	55.7%

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Attitudes and Perceptions

Figure 1 illustrates attitudes toward family engagement and involvement among participants. Most participants believe youth will have better outcomes if the family is engaged in their child's drug treatment court and that it is important to involve families in their child's drug treatment court. In fact, almost all participants indicated that families can be essential to their child's success in drug treatment court. Some of the responding juvenile drug treatment court professionals feel they are too short-staffed to take the time to engage families or believe staff aren't adequately trained to do it.

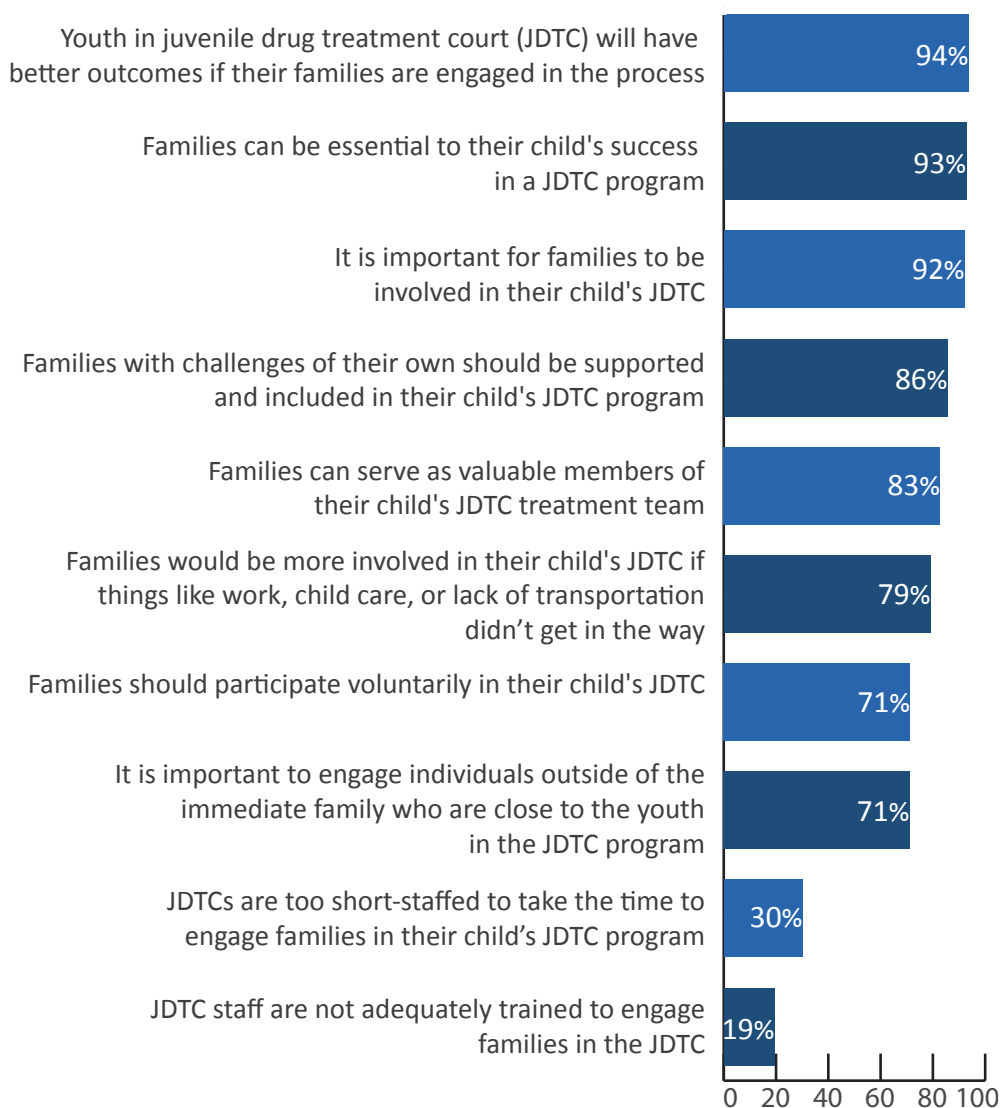


Figure 1. Attitudes and Perceptions Around Family Engagement and Percentage of Juvenile Drug Treatment Court (JDTC) Professionals That Agree With Them

Figure 2 describes respondents' perceptions of the responsibility of their juvenile drug treatment court for engaging and involving families. Almost all participants see it as the juvenile drug treatment court's role to engage families in their

Most survey participants believe that it is important to involve families in their child's drug treatment court (92%) and that the youth will have better outcomes if the family is engaged (93%).

In fact, almost all participants indicated that families can be essential to their child's success in drug treatment court (93%).

children’s juvenile drug treatment court, while far fewer feel it is the juvenile drug treatment court’s role to provide services like child care and transportation to remove external barriers to family engagement in juvenile drug treatment court.

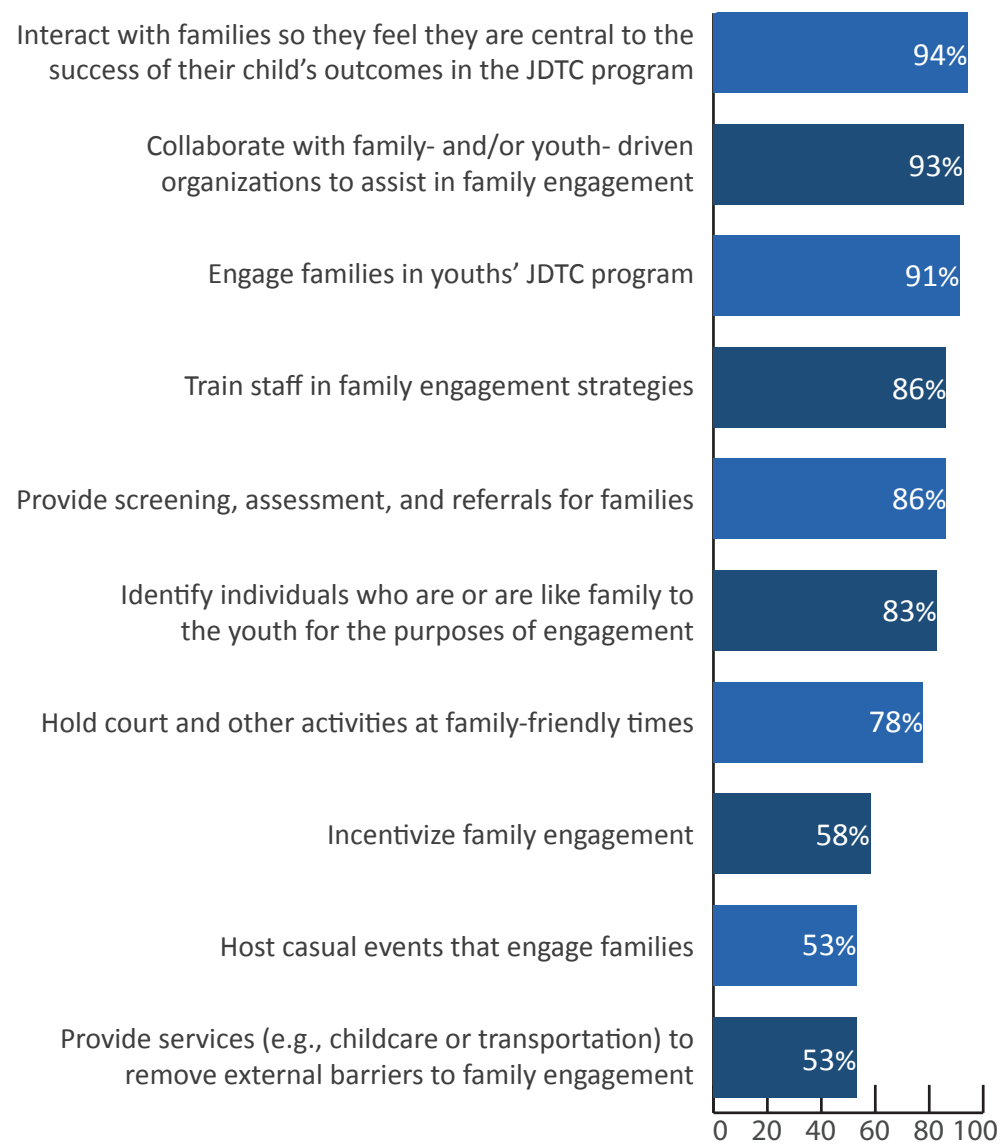


Figure 2. Steps to Engage Families in Juvenile Drug Treatment Courts (JDTCs) and Percentage of JDTC Professionals That Agree It Is Their Role to Take Them

Utilization and Perceived Impact of Engagement Strategies

When survey participants were asked to pick the top three most successful strategies for engaging families in juvenile drug treatment court, whether or not their court actually uses them, they selected providing transportation most frequently, followed by providing incentives such as gift cards or movie passes, and

When asked what they think the top three most successful strategies are for engaging families in the juvenile drug treatment court, whether or not they actually utilize them, providing transportation was selected most frequently, followed by engaging others who may not be part of the immediate family in the youth’s drug treatment court program, and then providing incentives such as gift cards or movie passes.

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Descriptive statistics revealed that those who see their juvenile drug treatment court as successful at engaging families use all engagement strategies more often. Figure 3 displays the frequency with which various family engagement strategies are used by programs whose staff perceive their juvenile drug treatment court as successful at engaging families. Strategies such as provision of incentives, deploying “parent partners,” and providing education about youth substance use are utilized more frequently by juvenile drug treatment court professionals who see their program as successfully engaging family.

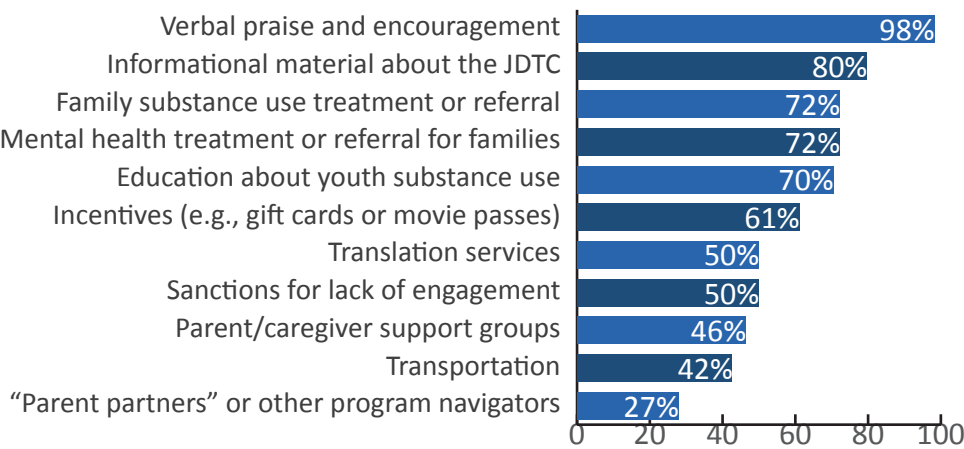


Figure 3. Rates of Strategy Usage Among Juvenile Drug Treatment Courts (JDTCs) Whose Professionals Perceive Their Program as Successful at Engaging Families

Family Engagement Recommendations and Assessment

The purpose of this brief is to promote family engagement, involvement, and empowerment, and the associated positive outcomes by addressing the lack of familiarity with family engagement strategies among juvenile drug treatment court professionals (only 34% of survey respondents expressed familiarity) and to provide juvenile drug treatment courts with a method of self-evaluation. The recommendations offered on the following pages expand on previous efforts and draw upon the results of the survey of juvenile drug treatment court professionals.

To successfully implement the recommendations and strategies described in this brief, it is essential to take stock of your efforts. To make it easier for juvenile drug treatment courts to appraise their family engagement efforts, a self-assessment tool was developed as a companion to the detailed recommendations and strategies. A simple scoring mechanism provides immediate feedback as to whether the program is “Set up for Success,” “Making Great Strides,” or “Needs Improvement” in its family engagement practices.

While a single self-assessment is no replacement for formal evaluation, this exercise can help gauge where your program’s family engagement work stands, indicate areas for improvement, and validate existing efforts. By using this tool, juvenile drug treatment courts can identify areas of strength and weakness and make changes to improve program outcomes.

1. Commit to Family Engagement and Involvement

Build family engagement, involvement, and respect into the mission, values, and governance of your juvenile drug treatment court. Support this commitment with program-wide trainings, and ensure families and youth are “at the table” at all times.

Steps for Success

- Include in the juvenile drug treatment court mission and values statement a commitment to involving family members to the greatest extent possible and respecting family members in all juvenile drug treatment court-related interactions and processes.
- Provide juvenile drug treatment court professionals and providers with interdisciplinary trainings in family-driven principles and cultural humility. Contract with family/youth and cultural organizations to provide the most relevant trainings.
- Include family and youth on all juvenile drug treatment court steering committees, task forces, governance councils, or other policy and advisory bodies. These families should be considered valued members rather than token representatives.
- Whenever possible, employ and train family and youth “partners.” These individuals will have firsthand experience as a family member of a systems-involved youth. With appropriate training, they can serve as a meaningful source of support and mentorship to families.
- Put procedures in place to respect and protect youth and family privacy. Avoid addressing sensitive issues in an open hearing. Communicate with the family and youth separately if a sensitive topic may incite an argument or make youth or family feel disrespected or shamed.
- Families should be routinely and respectfully addressed during court appearances so they understand that they are valuable allies in supporting their child’s recovery. When a youth is having difficulty achieving success in the program, engage with family members as joint problem solvers in addressing those difficulties.

2. Start Early, Engage Continuously

Early, effective, and authentic family engagement allows families to become fully involved and invested in the youth's drug treatment court experience.

Steps for Success

- Create a welcoming and pleasant environment in every way possible. A friendly and respectful attitude and greeting sets a positive tone. Look at the waiting areas and meeting spaces where a youth and family spend their time and try to experience these settings from their perspective. What would make these spaces more comfortable (e.g., positive images of families, warmer lights, a water cooler, different furniture, etc.)?
- Make sure the youth and family understand key features of the program and about the nature of adolescent substance use and co-occurring mental illness or traumatic stress disorders. Provide a program orientation that includes opportunities to ask questions. Supply family-friendly publications that clearly explain the program and system and that present information on youth behavioral health, with versions available in languages that are spoken by the youth and families your program serves.
- Whenever possible, assign a “systems navigator” for the family and youth to ensure they understand the juvenile drug treatment court process and other services that are available. (This person might have had their own experience with the juvenile drug treatment court or other “system” involvement; see Recommendation 5.) The juvenile drug treatment court may initially be intimidating to a family regardless of background or education. Helping them understand the juvenile drug treatment court process, its goals, and the ways in which those goals will be identified and achieved is crucial for effective family engagement.
- Engage in two-way communication rather than speaking only “at” a family or youth. Create a respectful process that genuinely includes family members as problem-solvers and acknowledges that families themselves are “experts” about the needs and function of their family and the court-involved youth. Include families and youth in a meaningful way at every step of the intake process, ensure expectations are clear, and directly and respectfully ask for family commitment to joint problem-solving and to the success of their child in the juvenile drug treatment court process.
- Identify and formally assess the family and youth's strengths and needs. A strengths-based assessment tool can be chosen and implemented with the help of a family-run organization or family engagement specialist.
- Whenever possible, determine whether the family and youth are involved in other systems (e.g., child welfare, special education). Where the infrastructure for cross-systems collaboration and coordination exists, ask the youth and family to provide authorizations allowing communications with appropriate persons in those systems to facilitate more efficient cross-system interactions. Discuss and address any concerns they may have about sharing information with other systems.

3. Foster Cultural Humility and Linguistic Competency

Juvenile drug treatment court staff must acquire concrete skills for communicating and working with diverse families. Integrating cultural humility and linguistic competency into your program helps create a bridge of trust between family and program.

Steps for Success

- Require interdisciplinary trainings on cultural humility and family-driven principles for all juvenile drug treatment court staff. Make these trainings available to all staff periodically, especially during periods of staff turnover. Contract with family/youth and cultural organizations to provide the trainings.
- Talk with the youth and family to identify all family members and natural supports. Consider “family” to include more than a parent or set of parents (i.e., grandparent, uncle, aunt, cousin, siblings). Identify “positive” adults and peers who are not members of the immediate family but who may be supports for the family and youth in the juvenile drug treatment court process (e.g. teachers, coaches, godparents, religious leaders). Ask the youth whom among these individuals the youth feels most comfortable relying upon to support the youth in achieving his or her goals in the juvenile drug treatment court process, and obtain permission from the youth to involve these individuals.
- Regularly acknowledge strengths that matter to the youth and family, and talk about how these strengths contribute to their successes.
- Use a variety of resources to communicate with families and youth who speak languages other than English. Know your population and be prepared to secure a translator for any language representative of your community’s population. Develop your own skills in working effectively with translators.
- Ensure that all essential documents, from orientation materials to program paperwork, are available in languages that are spoken by the youth and families your program serves.

4. Offer Individualized and Accessible Services

It is important to tailor services and treatments to the individual needs of families, including their substance use and mental health treatment needs. Services and meetings must also be accessible to families for them to participate fully.

Steps for Success

- Use the findings of a strengths-based assessment and intake process to tailor a service plan for each youth and family. Ask what works for them.
- Involve youth and families in identifying meaningful and individualized incentives and responses to the achievement of program goals.
- Help address the holistic needs of the youth and family by offering services to them or connecting them with services the juvenile drug treatment court does not offer. These may include treatment or referral to treatment for mental illness and substance use disorders for family members or information about housing, employment, or food pantries.
- Determine with the family whether they currently have or can access positive youth development assets to support their child during the period of juvenile drug treatment court involvement. These include community-based resources for leisure and recreation (e.g., sports, music, dance, art), adequate adult supervision and guidance, and meaningful volunteer, vocational or prevocational opportunities.
- Offer stipends for child care, or contract with a local day care to provide child-care services. Assist families with transportation by providing a stipend, offering bus or subway cards, or furnishing information about medi-cabs.
- Offer flexibility around who can attend hearings with the youth if the parent cannot attend due to work or other obligations. These individuals should be identified from the beginning.
- Provide families with the option of meeting in their home or at an accessible location. It may be necessary to meet families at a school, community-based organization, or community center that has a private meeting area.
- Hold hearings and other meetings at times that work with the family's schedule. Understand that many families come to the juvenile drug treatment court already having missed substantial work time due to the youth's behavior and substance use, and additional time away from work may put their job at risk. Consider the ages of the youth's siblings when scheduling a meeting, and avoid times when parents must get them to or from school.
- If possible, coordinate meetings and juvenile drug treatment court services around other service systems' meetings or appointments. When multiple systems are involved, it can become a full-time job for a family to fulfill each system's expectations of them. Arranging meetings on the same day, around the same time, and in the same location or nearby is beneficial and accommodating to the family and youth.

5. Develop Youth and Family Leadership

Ensure families and youth are “at the table” at all times, and invest in their leadership potential. This will require a shift toward a family-driven philosophy and may require a financial commitment.

Steps for Success

- Employ family and youth “partners.” These individuals have firsthand experience as a family member of a systems-involved youth or a former program participant. Invest in their family support and mentoring skills to make the most of their unique knowledge base.
- Encourage peer-to-peer support and family-to-family dialogue. Lay the groundwork for support groups, but allow families to take the lead in facilitation. Juvenile drug treatment courts may want to contract with family organizations for this. You might suggest creating phone or email trees and social media pages and groups to encourage peer-to-peer communication.
- Create a family and youth alumni program to mentor new families and youth. This can be done within the juvenile drug treatment court or a local community organization.
- Help families and youth build skills. Offer parent and advocacy trainings. Involve parents and youth who have had “lived experience” to present, lead, or co-present in these trainings.
- Create advisory roles for families and youth (see Recommendation 1), and show respect for their input by addressing it directly. Families are experts on their own experiences; treat their perspectives as the authoritative contribution to the discussion that they are.
- Provide families and youth with remuneration for their ongoing participation in juvenile drug treatment court peer support and advisory roles.

6. Get Family and Youth Feedback

Families and youth should play a central role in the juvenile drug treatment court's quality assurance and improvement process.

Steps for Success

- Include families in assessing, planning, and evaluating their family and youth needs. Obtain input from the family and youth before making major changes that will affect them.
- Routinely “check in” with the family to ensure things are going smoothly. Encourage families to voice concerns without fear of reprisal.
- Conduct regular assessment of a family's understanding of their rights and responsibilities.
- Periodically consult with families to determine their expectations of the juvenile drug treatment court, community providers, or others involved in the youth's juvenile drug treatment court process and recovery. Compare their perceptions and assessments with your own self-assessments of your roles and responsibilities. When there appears to be a significant difference between what families perceive and what juvenile drug treatment court staff or others perceive about rights, roles, responsibilities, and expectations, consider strategies to address the disparity.
- On at least an annual basis, conduct focus groups and surveys with families who have been involved with the juvenile drug treatment court program to find out whether they viewed engagement activities and other efforts as successful or unsuccessful. Give families the opportunity to state specifically what they thought worked, and what they suggest should change.

Family Engagement Practices Self-Assessment Tool

Key Measures	Score
Our court/program has a values statement or mission statement that clearly states a commitment to treating youth and families with respect. 0 = Not current practice. 1 = Yes, our values statement or mission statement clearly states a commitment to treating youth and families with compassion, empathy, supportive acceptance, and respect. 2 = Yes, our values statement or mission statement clearly states a commitment to treating youth and families with compassion, empathy, supportive acceptance, and respect, and this statement is clearly posted and visible to all staff and families.	
Staff receive training on cultural humility and family-driven principles. 0 = Not current practice. 1 = Yes, staff have received training on cultural humility and family-driven principles, but it is not annual. 2 = Yes, staff receive annual training on cultural humility and family-driven principles. 3 = Yes, staff receive annual training on cultural humility and family-driven principles, and the annual training is provided by a local family or youth-run organization.	
Youth voice is present on our court/program's steering committee or governance council. 0 = Not current practice. 1 = Yes, at least one member of our steering committee or governance council is a youth (under 25 years of age) with lived experience in the substance use or mental health treatment and juvenile justice systems. 2 = Yes, our court/program has more than one youth (under 25 years of age) with lived experience in the substance use or mental health treatment and juvenile justice systems that serves on the steering committee or governance council. 3 = Yes, our court/program has at least one member of our steering committee or governance council who is a youth (under 25 years of age) with lived experience in the substance use or mental health treatment and juvenile justice systems, and they are compensated for their participation (either as part of their job or directly by the court/program).	
Page Total:	

Key Measures	Score
Family voice is present on our court/program's steering committee or governance council. 0 = Not current practice. 1 = Yes, at least one member of our steering committee or governance council is a family member whose child experienced service system involvement with the substance use or mental health treatment and juvenile justice systems. 2 = Yes, our court/program has more than one family member whose child experienced service system involvement with the substance use or mental health treatment and juvenile justice systems that serves on the steering committee or governance council. 3 = Yes, at least one member of our steering committee or governance council is a family member whose child experienced service system involvement with the substance use or mental health treatment and juvenile justice systems, and they are compensated for their participation (either as part of their job or directly by the court/program).	
Sensitive topics are never addressed during open hearings. 0 = Not current practice. 1 = Yes, our current practice is to not discuss sensitive topics during open hearings. 2 = Yes, our current practice is to not discuss sensitive topics during open hearings, and our court/program has written policies specifically to avoid discussing sensitive issues during open hearings.	
Our court/program has taken steps to create a welcoming and pleasant environment. 0 = Not current practice. 1 = Yes, all youth and families are warmly greeted and treated with respect from the initial intake appointment to program end. 2 = Yes, all youth and families are warmly greeted and treated with respect from the initial intake appointment to program end, and our court/program has taken steps to create a space that is welcoming, safe, and projects positive messaging.	
Information is provided to youth and families during the initial intake appointment. 0 = Not current practice. 1 = Yes, youth and families are provided with information that describes the juvenile drug treatment court program process from start to finish. 2 = Yes, youth and families are provided with at least one informational publication that describes the juvenile drug treatment court program process from start to finish. 3 = Yes, youth and families are provided with at least one informational publication that describes the juvenile drug treatment court program process from start to finish, and the informational publication(s) was (or were) developed in partnership with past juvenile drug treatment court program participants, both youth and families.	
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Key Measures	Score
Families are given access to peer support services. 0 = Not current practice. 1 = Yes, families are given information about support services available in our community, but it is up to them to follow-up directly with the service. 2 = Yes, our court/program partners with a local family-run advocacy organization to provide outreach and peer support services <i>or</i> our court/program employs a family partner to provide outreach and peer support services. +1 = Our court operates a peer mentoring program so that graduates of our program, both youth and family members, can serve as peer mentors to newly enrolled youth and families.	
Program staff identify other systems in which the family and youth are involved. 0 = Not current practice, or only “by chance.” 1 = Yes, program staff systematically identify other systems in which youth and families are involved as part of the intake process. 2 = Yes, program staff systematically identify other systems in which youth and families are involved as part of the intake process, and formal agreements are in place to support information sharing between these systems.	
A strengths-based assessment tool is used to systematically assist program staff with the identification of the strengths and needs of the youth and family. 0 = Not current practice. 1 = Yes, a strengths-based assessment tool is used during the intake process. 2 = Yes, a strengths-based assessment tool is used during the intake process, and the results of this tool are used to guide the development of a service plan for each youth and family. +1 = If the tool was selected in partnership with a family-run organization or family engagement specialist.	
Our court/program ensures active participation of youth and families. 0 = Not current practice. 1 = Yes, from the initial intake interview through program completion there are opportunities for youth and families to ask questions and share self-identified strengths and needs. 2 = Yes, from the initial intake interview through program completion there are opportunities for youth and families to ask questions and share self-identified strengths and needs and staff to participate in regular trainings and workshops to develop skills that support better engagement.	
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Key Measures	Score
Youth and families are provided information about community-based services and supports not provided by the court/program. 0 = Not current practice. 1 = Yes, information about community-based services and supports (e.g., housing, employment services, food pantries, community events) is available to youth and families. 2 = Yes, information about community-based services and supports (e.g., housing, employment services, food pantries, community events) is available to youth and families, and court/program staff assist youth and families with accessing these services and supports.	
Our court/program staff maintain flexible hours to accommodate youth and family school, work, and treatment schedules. 0 = Not current practice. 1 = Yes, youth and family obligations are taken into consideration when scheduling program appointments. 2 = Yes, youth and family obligations are taken into consideration when scheduling program appointments and court/program staff coordinate with other service system meetings and appointments to minimize disruption in the youth and families' lives.	
Our court/program staff meet youth and families in accessible locations to accommodate youth and family school, work, and treatment schedules. 0 = Not current practice. 1 = Yes, court/program staff often arrange check-ins with youth and families in their homes, at school, or at community-based service provider organizations. 2 = Yes, court/program staff often arrange check-ins with youth and families in their homes, at school, or at community-based service provider organizations, and youth and families are asked what works best for them.	
Treatment providers and others delivering court-ordered services provide accessible and flexible home-based services to youth and families participating in our program. 0 = Not current practice. 1 = Home-based services are available to youth and families under certain circumstances. 2 = Home-based services are available to all youth and families.	
Translation services are available for non-native English speaking youth and families. 0 = Not current practice, our court/program is only able to serve English-speaking youth and families. 1 = Yes, our court/program is able to provide or access translation services for youth and families when English is not their native language.	
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Key Measures	Score
Youth and families are involved in assessing, planning, and evaluating their own needs. 0 = Not current practice. 1 = Yes, youth and families are involved in the initial assessment of their own needs. 2 = Yes, youth and families are involved in the initial assessment of their own needs, and staff regularly provide youth and families the opportunity to contribute to the ongoing assessment, planning, and delivery of service and treatment needs.	
Our court/program formally evaluates its family engagement efforts. 0 = Not current practice. 1 = Yes, an evaluation of family engagement has been conducted. 2 = Yes, family engagement is a focal point of our regular, ongoing evaluation of court/program activities.	
Youth and families are given information regarding their rights and responsibilities. 0 = Not current practice. 1 = Yes, youth and families are given information during intake regarding their rights and responsibilities. 2 = Yes, youth and families are given information during intake regarding their rights and responsibilities, and staff check in at least one additional time during program involvement to ensure that youth and families understand these rights and responsibilities.	
Youth and families are given the opportunity to provide feedback on the juvenile drug treatment court program. 0 = Not current practice. 1 = Yes, youth and families are welcome to provide feedback to staff on the juvenile drug treatment court program. 2 = Yes, youth and families are welcome to provide feedback to staff on the juvenile drug treatment court program, and to create an environment that welcomes feedback, youth and families are given surveys that can be completed at program exit, and/or annual focus groups are held with current and recent program exitors (both successful and unsuccessful) being invited to attend.	
Page Total:	
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Total Score	
RESULTS: 35-45 = Set up for Success 24-34 = Making Great Strides 0-23 = Needs Improvement	

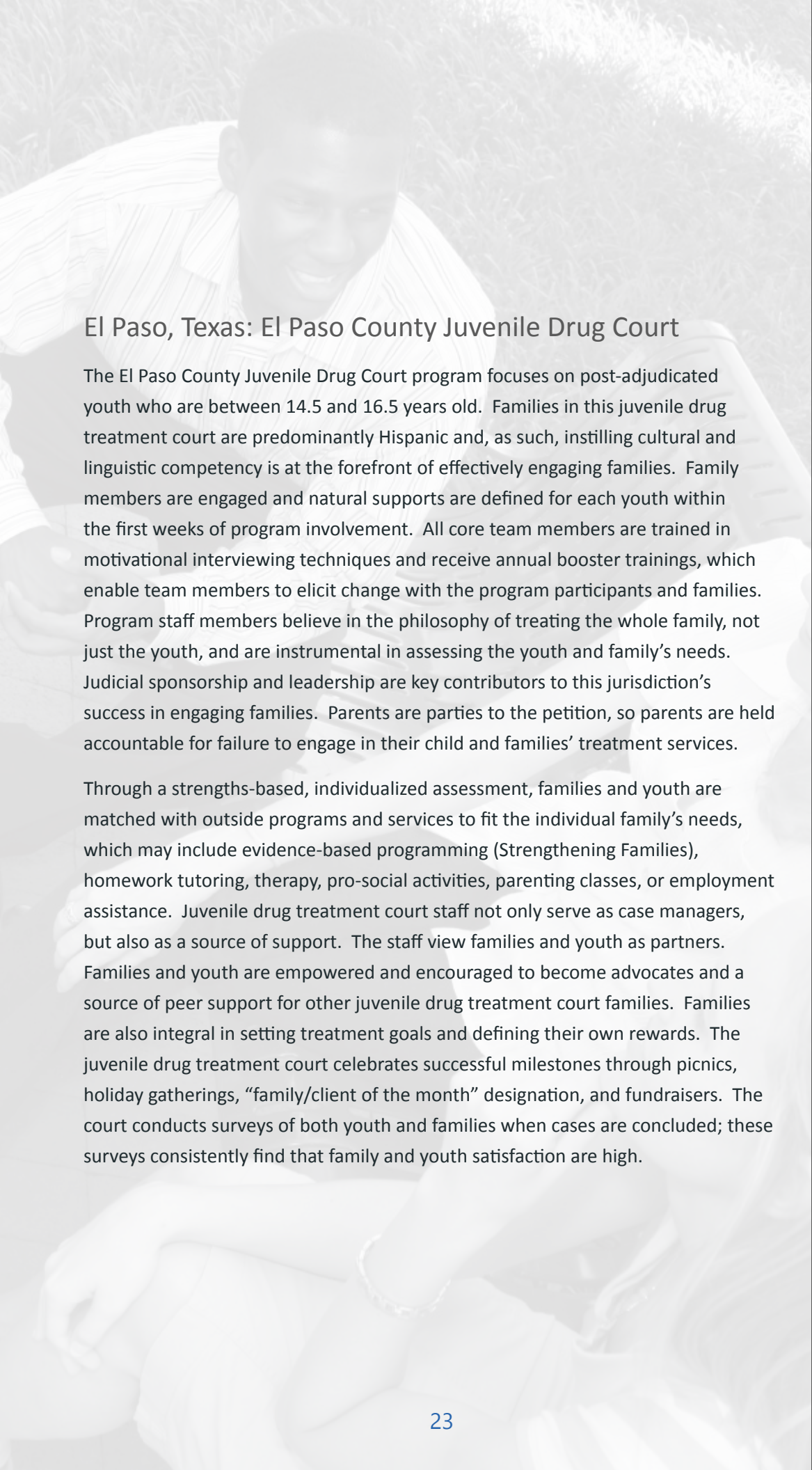
While a single self-assessment is no replacement for formal evaluation, this exercise can help gauge where your program's family engagement work stands, indicate areas for improvement, and validate existing efforts. By using this tool, juvenile drug treatment courts can identify areas of strength and weakness and make changes to improve program outcomes.

Case Examples

Summit County, Ohio: The Crossroads Program

The Crossroads Program serves youth with substance use and dependence problems in addition to other behavioral health conditions, most commonly referred to as “co-occurring disorders,” or juveniles with a sole substance dependence diagnosis. The Crossroads Program is intensive probation and lasts a minimum of one year. Each youth has a case plan, and community agencies provide services to the youth and their families, including treatment for substance use disorders and behavioral health conditions; family and individual counseling; and educational, vocational, and employment services. Drug screening is conducted regularly while the youth is in the program. Participants are required to attend regular court hearings to review progress, and sanctions are issued for program violations. Frequency of court reviews decreases as the youth progress through the program, with incentives offered for those who achieve program goals. The program also works with parents and their children to strengthen and improve the family unit through counseling.

The Crossroads Program has received a considerable amount of positive attention for its family- and youth-friendly culture. One key element of the program’s successful family engagement is their “parent partners,” who are enlisted from a local community-based child and family organization using program funding. The parent partner is the parent of a youth who has had some level of involvement with child-serving systems. Based on his or her personal experience, the parent partner is viewed as a resource for families and juvenile drug treatment court staff, and serves as a “systems navigator” to ensure families and youth understand the juvenile drug treatment court process and are knowledgeable of other systems in which they may be involved. Families may call upon the parent partner at any time during the juvenile drug treatment court process, whether to answer questions or provide peer-to-peer support. The parent partner attends meetings and court hearings with the family and youth and may serve in an advocacy role. Program staff members receive fewer complaints when the family is linked with the parent partner, and general family satisfaction is high.



El Paso, Texas: El Paso County Juvenile Drug Court

The El Paso County Juvenile Drug Court program focuses on post-adjudicated youth who are between 14.5 and 16.5 years old. Families in this juvenile drug treatment court are predominantly Hispanic and, as such, instilling cultural and linguistic competency is at the forefront of effectively engaging families. Family members are engaged and natural supports are defined for each youth within the first weeks of program involvement. All core team members are trained in motivational interviewing techniques and receive annual booster trainings, which enable team members to elicit change with the program participants and families. Program staff members believe in the philosophy of treating the whole family, not just the youth, and are instrumental in assessing the youth and family's needs. Judicial sponsorship and leadership are key contributors to this jurisdiction's success in engaging families. Parents are parties to the petition, so parents are held accountable for failure to engage in their child and families' treatment services.

Through a strengths-based, individualized assessment, families and youth are matched with outside programs and services to fit the individual family's needs, which may include evidence-based programming (Strengthening Families), homework tutoring, therapy, pro-social activities, parenting classes, or employment assistance. Juvenile drug treatment court staff not only serve as case managers, but also as a source of support. The staff view families and youth as partners. Families and youth are empowered and encouraged to become advocates and a source of peer support for other juvenile drug treatment court families. Families are also integral in setting treatment goals and defining their own rewards. The juvenile drug treatment court celebrates successful milestones through picnics, holiday gatherings, "family/client of the month" designation, and fundraisers. The court conducts surveys of both youth and families when cases are concluded; these surveys consistently find that family and youth satisfaction are high.

Resources

Campaign for Youth Justice: <http://www.campaignforyouthjustice.org>

Family Run Executive Directors Leadership Association: <http://www.fredla.org>

National Alliance on Mental Illness: <http://www.nami.org>

National Center for Mental Health and Juvenile Justice: <http://www.ncmhjj.com>

National Council of Juvenile and Family Court Judges: <http://www.ncjfcj.org>

National Federation of Families for Children's Mental Health: <http://www.ffcmh.org>

Vera's Center on Youth Justice: <https://www.vera.org/centers/center-on-youth-justice>

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