

*Top* **5** Challenges in Responding  
to Participant Behaviors in  
Family Treatment Courts  
*(and how to solve them)*



Center for Children and Family Futures  
Strengthening Partnerships, Improving Family Outcomes

# Acknowledgment

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# *Learning Objectives*

1. Describe the key guiding principles of responding to participant behavior in FTCs.
2. Discuss effective approaches to responding to participant behavior that are family-centered, problem-solving, trauma-informed, and therapeutic.
3. Apply strategies and solutions implemented by various FTCs that are effectively and thoughtfully responding to participant behavior.

A modern interior space featuring a teal wall with a grey staircase on the left. The wall is composed of large, rectangular panels. A horizontal ledge or shelf runs across the middle of the wall, and a warm, orange light emanates from behind it, creating a soft glow. The floor is a light grey color. The overall atmosphere is clean and contemporary.

*How are Family Treatment Court  
similar and how are they different?*

abstinence

graduation

safety

health and  
well-being

compliance

family functioning

# SUCCESS

adherence

case closure

lasting permanency

reunification

recovery

# *Top 5 Challenges*

Do we need them?

How can we be individualized and fair?

We can't afford them.

Use jail as a sanction?

When should we terminate?





*Just Released!*  
**Family Treatment Court  
Best Practice  
Standards**  
*Standards*  
**and Key Provisions**

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# National FDC Best Practice Standards

1. Organization and Structure
2. The Role of Judge
3. Ensuring Equity and Inclusion
4. Early Identification and Assessment
5. Timely, Quality, and Appropriate Substance Use Disorder Treatment
6. Comprehensive Case Management, Services, and Supports for Families
- 7. Therapeutic Responses to Behavior**
8. Monitoring and Evaluation



# **FTC BPS #7 - Therapeutic Responses to Behavior**

The family drug court (FDC) uses evidence-based behavior modification principles in response to participant behaviors to support parents and children and to improve individual and family functioning. The FDC recognizes the biopsychosocial and behavioral complexities of supporting participants through behavior change to achieve stable, long-term recovery and reunification. When responding to participant behavior, the FDC team considers the underlying cause of the behavior, the effect of the response on the participant's children, and the participant's engagement in treatment and supportive services.



The Adoption and Safe Families Act

# ASFA Time Clock

(PL 105-89)

Responses aim to enhance likelihood that family can be reunited before ASFA clock requires an alternative permanent plan for the child.

# *Essential Elements of Responding to Behavior*

Substance use disorders affect the functioning of the brain

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

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

# **Incentives and Sanctions to Promote Engagement**

The FDC develops a range of responses (incentives and sanctions) of varying magnitudes that it employs throughout each participant's time in the FDC. The team uses these responses **to enhance participant engagement and encourage behaviors that support sustained recovery, healthy family relationships, and long-term reunification.**

# Set a Range of Responses

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

Avoid singular  
responses, which  
fail to account  
for other  
progress

Aim for  
“flexible  
certainty”

# FDC Phases

FDC phases support behavior change and completion of child welfare and treatment case plans. **Advancement through these phases is based on achievement of realistic, clearly defined behavioral objectives or “benchmarks” associated with recovery and permanency.** The policy and procedures manual and participant handbook (described in Standard 1) clearly indicate the criteria for advancement through the phases that each participant must complete for successful discharge from the FDC. The FDC does not demote participants to earlier phases.

# Phases as an Engagement Strategy

- Leverage the phase structure to create a behavior-based, family-centered program
- Allow parents to see how their progress through the phases moves them to THEIR goal
- Creates shared goals and coordinated case plans for all partners including the family
- Focus on vital services
- Lay out steps towards reunification
- Consider an orientation phase (30 days) to reach proximal goals

# Treatment Adjustments

Adjustments in the type of treatment, level of care, and dosage are based on the clinical needs of the participant's substance use and mental, physical, social, or emotional health. **When a participant does not meet treatment expectations, child welfare case plan goals, or FDC phase requirements, the clinical treatment professionals, in consultation with members of the FDC team, implement a treatment adjustment.** Adjustments to treatment are not used as a sanction or an incentive.



# Treatment Adjustments

- Individual
- Group
- Family
- Parent-Child
- Psychiatric medication
- Medication-assisted treatment
- Gender-specific
- Culturally-centered
- Trauma-focused
- Community support meetings
- Meditation/Moving meditation

# Treatment Adjustments

- Trauma
- Depression
- Anxiety
- Cognitive function
- Fetal Alcohol Spectrum Disorder
- Developmental (adolescent or adult brain)
- Attention Deficit Disorder/Hyperactivity Disorder (ADD/ADHD)
- Serious and Persistent Mental Illness (SPMI)

# Complementary Service Modifications

The FDC identifies and seeks to overcome structural (e.g., transportation, housing, and income) and individual (e.g., learning or health disabilities) barriers when deciding how to most effectively respond to participant behaviors. **When determining what type of response is warranted, the FDC also considers whether changes to a participant's case plan, that are related to their structural or individual barriers, are needed to further support engagement and success.**

# Complementary Service Modifications

- Life management skills
- Transportation
- Housing
- Physical health
- Dental/Vision
- Housing
- Parenting
- Alarm clock
- Neighborhood
- Literacy
- Education
- Vocational/Rehabilitation
- Employment
- Social skills
- Others

# Incentives and Sanctions

The FTC develops a range of incentives and sanctions of varying magnitudes that it employs throughout the participant's time in the FTC. **The operational team administer incentives and sanctions to enhance participant engagement, encourage behaviors that support sustained recovery, healthy family relationships, and long-term reunification and hold participants accountable for expectations established by the FTC.**

# Principles of Behavior Modification

## Notice

- The FDC notifies participants in advance of the behaviors required for successful participation.

## Certainty

- The operational team reliably detects and responds consistently to all participant behaviors listed in the FDC Policy Manual.

## Timely

- The FDC responds to compliant or noncompliant behaviors as soon after the behavior as possible.

# Child and Family Focus

- Provide incentives that support family needs, parenting, and the parent-child relationship
- Court must consider impact of a response on children and family as a unit
- Accountability is focused on parent
- Parenting time should be determined solely on basis of child's safety and best interest (vs. parent sanction or reward)

**The goal of incentives and sanctions is always to increase participant engagement.**

**IT IS NOT TO PUNISH**



**Increased or decreased parenting time is never used as an incentive or sanction.**

**Parenting-time is a right,  
not a tool to reward or sanction the parent**



# *Why?*

*When behavior does not support long-term recovery and successful closure of the child welfare case...*

*Ask WHY*

**Treatment adjustments and complementary service adjustments are often the two most effective ways the FDC team can respond.**

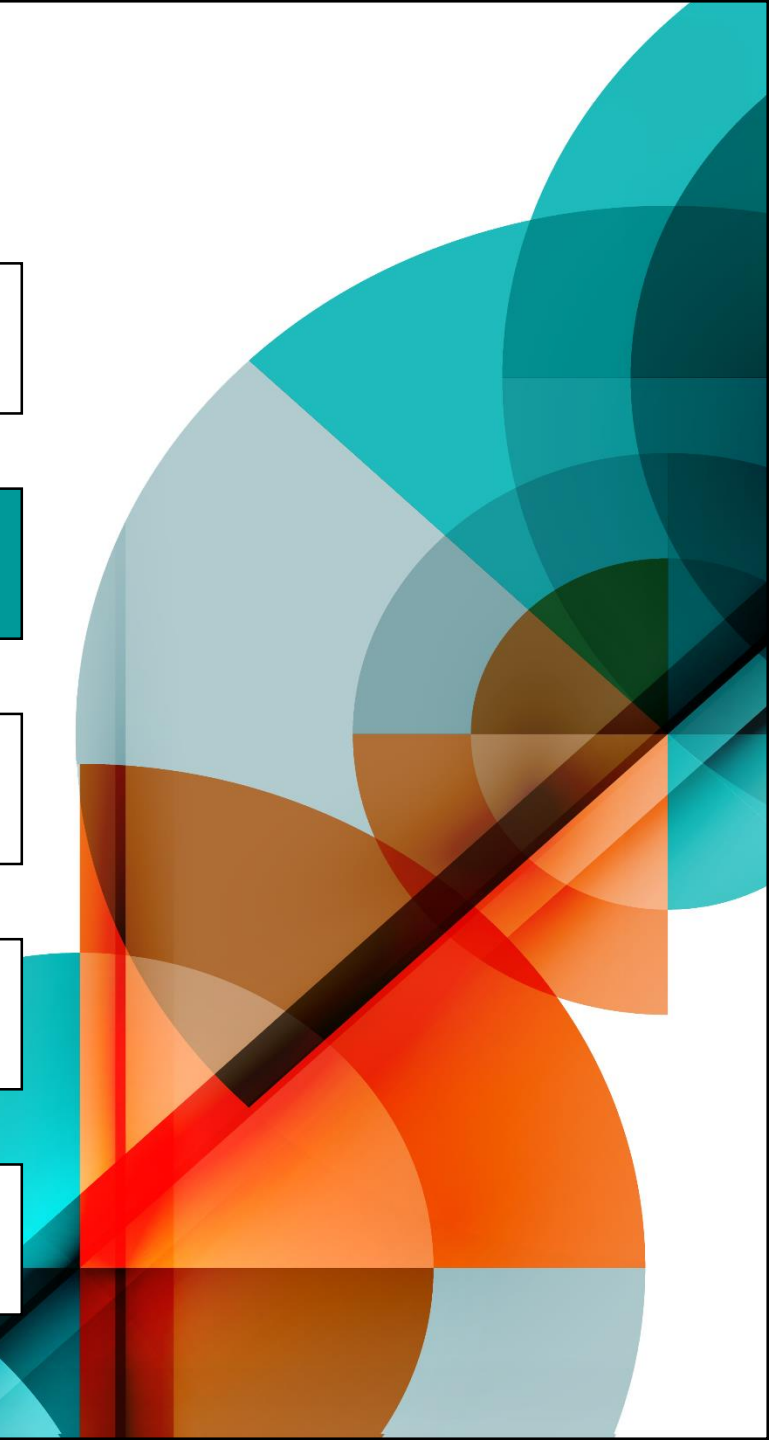
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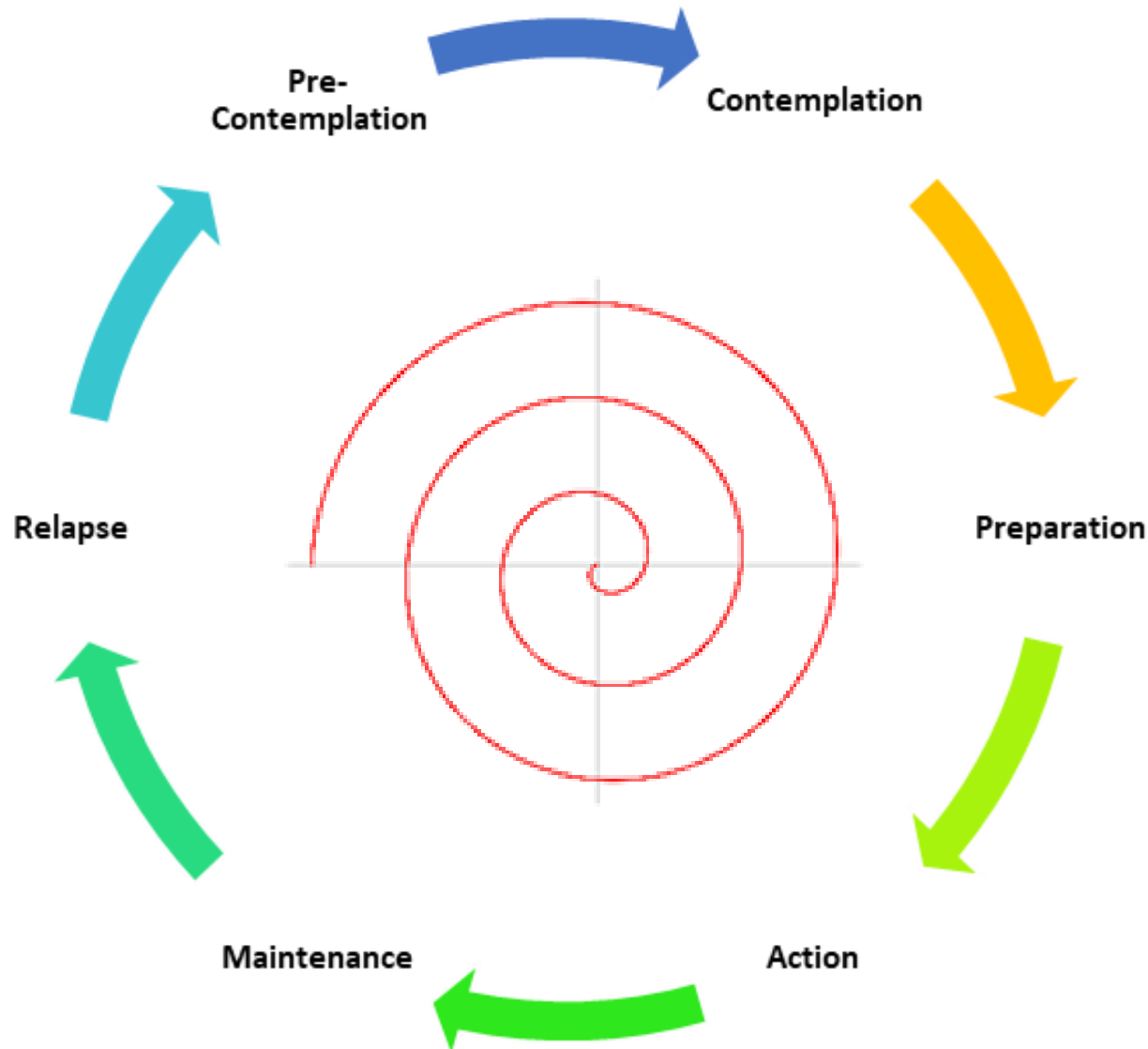
# *Top 5 Challenges*

Do we need them?

2. How can we be individualized and fair?



# Stage of Change



**Transtheoretical Model of Change**  
**Prochaska & DiClemente**

- FTC requires participants to engage in major change in almost all life domains
- Some of these changes, the participant will be ready for
- Other changes may require additional coaching

Motivational interviewing and “rolling with resistance” are effective strategies to help progress participants along the Stages of Change

# Principles of Fairness

## Equivalent

- The consequences for participants are equivalent to those received by other participants who engage in comparable conduct in similar circumstances and with similar expectations.

## Heard

- The FTC gives all participants an opportunity to express their perspectives on their behavior, disagreements about facts and other relevant issues.

## Professional

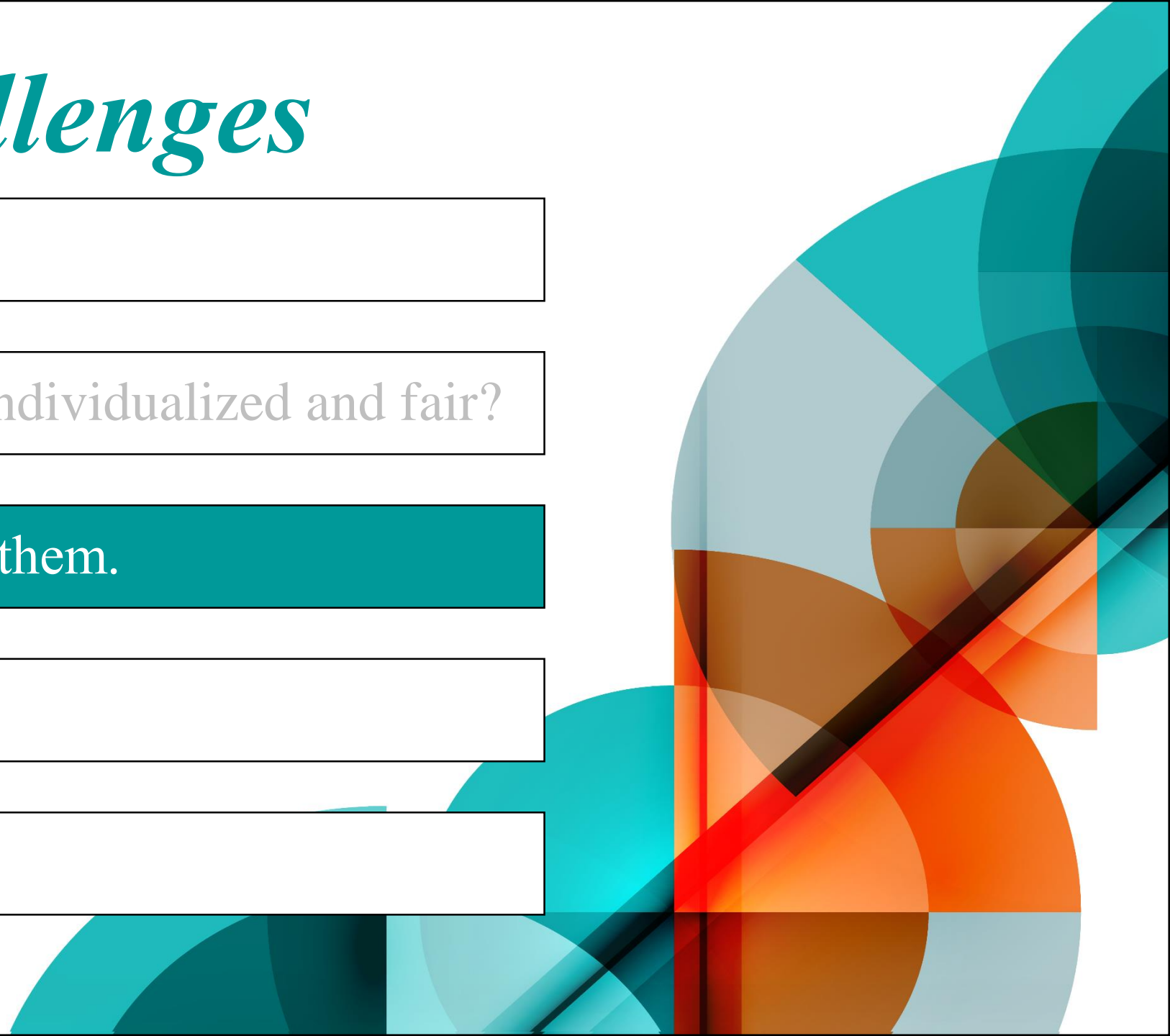
- The operational team's interactions with the participant, children, family, and other members of the participant's support system are respectful and professional.

# *Top 5 Challenges*

1. Do we need them?

2. How can we be individualized and fair?

3. We can't afford them.



- No cost incentives
- Low-cost incentives
- Consider incentives that support family needs, parenting, and the parent-child relationship.





# Zero or Minimal Cost Rewards

- Judicial acknowledgement
- Tokens
- Inspirational stones
- Ceremonies
- Reflection
- Candy with affirmation
- Letter from the team
- Family activities
- Picture with the Judge
- Key chains
- Mugs
- Special privileges
- Journals
- Coupons for services
- Children's books
- Fishbowl

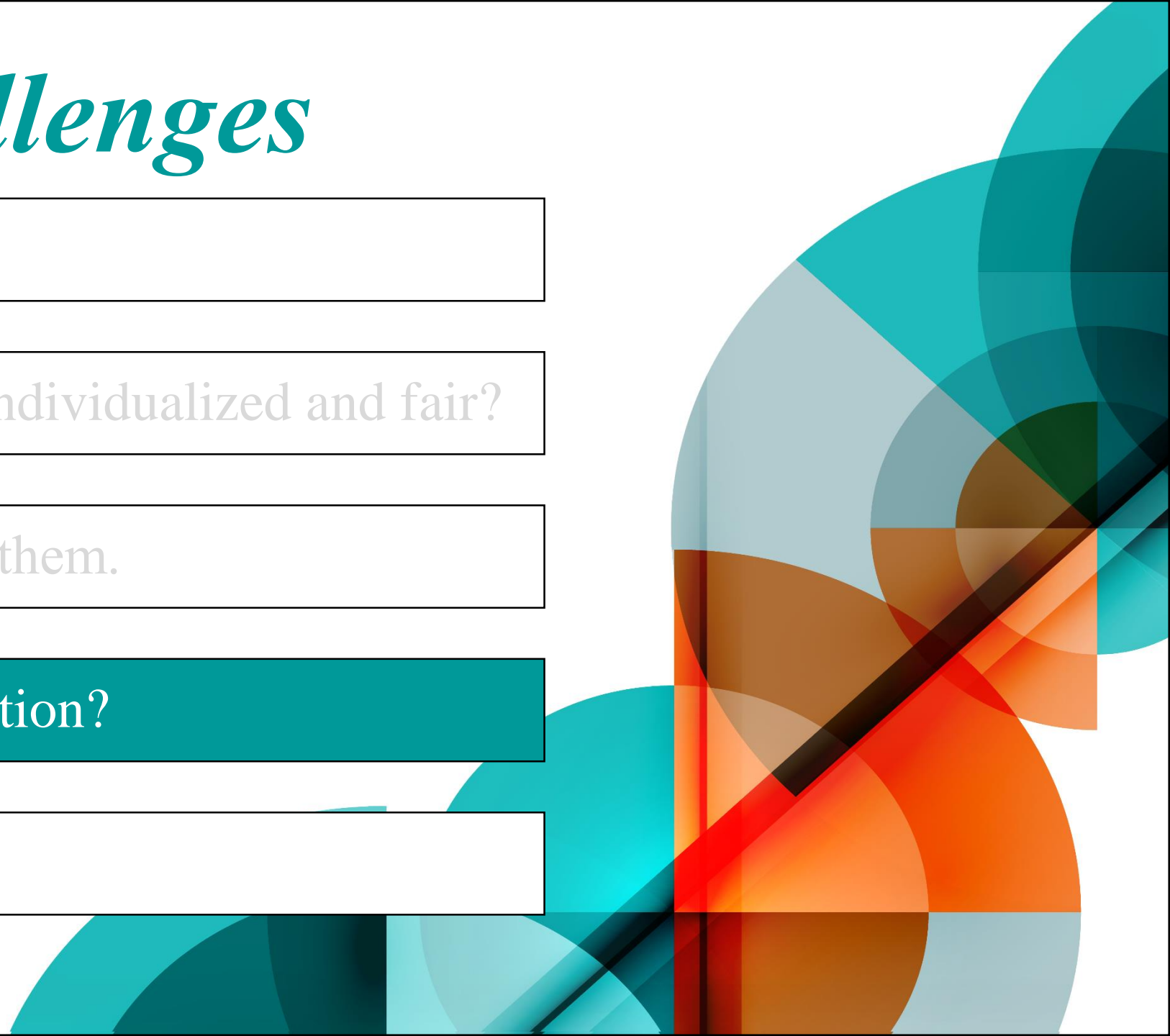
# *Top 5 Challenges*

1. Do we need them?

2. How can we be individualized and fair?

3. We can't afford them.

4. Use jail as a sanction?



# Jail as a Sanction

- Incarceration would rarely be an alternative to participation in an FDC
- Incarceration may interfere with family time and dependency court requirements
- Pursuing alternative responses that will ensure the safety of clients and resolve the need for jail



- Imposing sanctions as opposed to incentives too often can generate behaviors consistent with learned helplessness and undermine the FDC's ability to support positive behavior change (Hiroto, 1974).
- Incentives help FDC and participants focus on desired behaviors as opposed to undesired ones (Burdon, 2001; Kratcoski, 2017).
- When a drug court team responded to participant behavior with positive comments and treatment adjustments, participants were less likely to use drugs. In contrast, negative comments by the team are associated with increased numbers of positive drug test results (Senjo & Leip, 2001).

# *Top 5 Challenges*

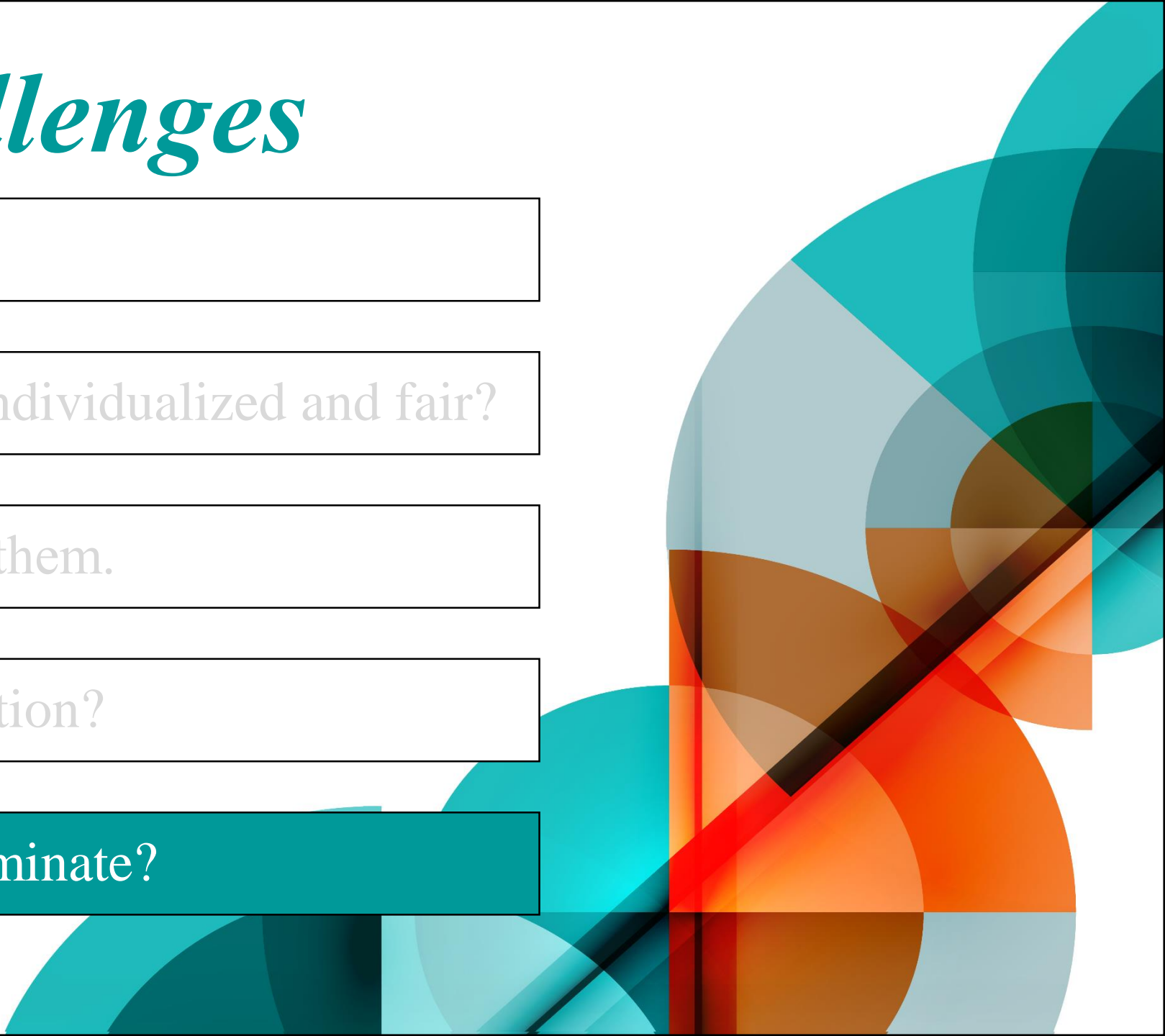
1. Do we need them?

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4. Use jail as a sanction?

5. When should we terminate?



# **FDC Discharge Decisions**

**The FDC has agreed-on and published criteria in its Participant Handbook and its Policy and Procedure manuals for successful, unsuccessful, and neutral discharges of participants. The discharge criteria provide a framework for the FDC team to determine the type of discharge for each participant.**

# FDC Discharge Decisions

## Neutral

- Participant is no longer a party to the dependency case.
- Dependency court no longer has jurisdiction over the participant.
- Participant is incapable of participating due to health or cognitive condition other than an SUD.
- The FTC cannot provide the treatment or interventions necessary for the participant's recovery.

# FTC Discharge Decisions

**Successful** - Successful discharge means that the participant has accomplished significant goals.

- Abstinence
- Recovery-oriented skills
- Reconnected with family and community members
- When possible and appropriate, reunification occurs before successful discharge
- May not always include reunification



**A participant should be discharged from the FDC only after treatment adjustments, complementary service modifications, and targeted incentives and sanctions have been applied.**

**What will happen to that parent after unsuccessful termination?**

# *Q&A and Discussion*

The background features a complex, abstract composition of overlapping circles and semi-circles. The color palette is diverse, including various shades of teal and blue, warm oranges and reds, and earthy browns. The circles are semi-transparent, creating a layered effect where colors blend and interact. The overall aesthetic is modern and geometric.



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# Family Drug Court *Orientation Materials*



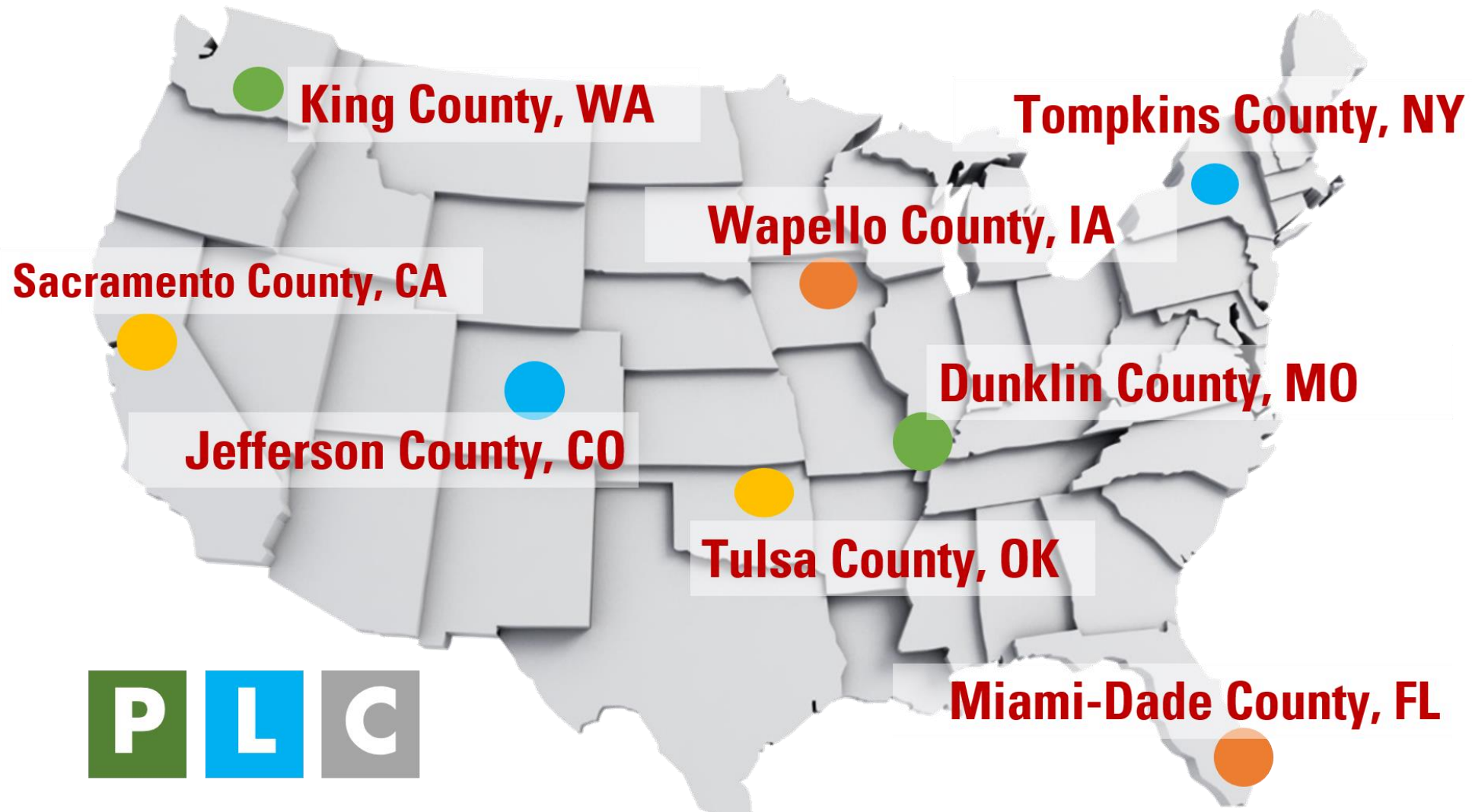
**Discipline Specific**

**Child Welfare | AOD Treatment | Judges | Attorneys**



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# Family Drug Court Learning Academy

*Top Five Challenges in  
Responding to Participant  
Behavior in Family Treatment  
Courts*

Video Presentation  
Live Café Conversation  
Team Discussion Guide  
Take Action Guide  
TA Resources



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- Five modules cover basic overview of FDC Model
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# Family Drug Court *National Strategic Plan*

## **Vision:**

*Every family in the child welfare system affected by parental/caregiver substance use disorders will have timely access to comprehensive and coordinated screening, assessment and service delivery for family's success.*

Expansion of  
FDC Reach

Ensure Quality  
Implementation

Build Evidence Base

National Strategic Plan  
For Family Drug Courts

MARCH 2017



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# TRANSITIONING TO A FAMILY CENTERED APPROACH:

Best Practices and Lessons Learned  
from Three Adult Drug Courts



Children and Family Futures  
National Drug Court Institute



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

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- Webinar Recordings
- FDC Resources
- FDC News



[www.familydrugcourts.blogspot.co](http://www.familydrugcourts.blogspot.com)

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# Discussion Guide *Understanding Treatment*



- For Child Welfare and Court Professionals
- Build stronger partnerships with treatment
- Ensure best treatment fit for families



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# Contact Information

**Alexis Balkey, Supervising Program Manager**

Center for Children and Family Futures

[abalkey@cffutures.org](mailto:abalkey@cffutures.org)

**Chelsey Herring, Program Specialist and Peer Learning Court Program Coordinator**

Center for Children and Family Futures

[cherring@cffutures.org](mailto:cherring@cffutures.org)



# Contact Information

Family Drug Court Training and  
Technical Assistance Team  
Center for Children and Family  
Futures

[fdc@cffutures.org](mailto:fdc@cffutures.org)

(714) 505-3525

[www.cffutures.org](http://www.cffutures.org)



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