

Family Matters: Transitioning to a Family-Centered Approach for *ALL* Treatment Courts

Wisconsin Treatment Court Virtual Training

Tuesday, May 16, 2023

Alexis Balkey, MPA, Program Director | Arielle Andrews, Program Associate

Center for Children and Family Futures



Our Mission

Center For Children and Family Futures (CCFF) strives to prevent child abuse and neglect while improving safety, permanency, well-being and recovery outcomes with equity for all children, parents and families affected by trauma, substance use and mental health disorders.

Acknowledgment



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OJJDP's Three Priorities

- ✓ Treat Children As Children
- ✓ Serve Children at Home, With Their Families, in Their Communities
- ✓ Open Up Opportunities for System-Involved Youth

OJJDP's Mission

OJJDP provides national leadership, coordination, and resources to prevent and respond to youth delinquency and victimization. The Office helps states, localities, and Tribes develop effective and equitable juvenile justice systems that create safer communities and empower youth to lead productive lives.

To find out more about OJJDP, visit: www.ojp.ojjdp.gov



Learning Objectives

- Gain a greater understanding of the effect of substance use on the family, and the importance of addressing the family's needs as a critical part of a participant's recovery
- Learn how cross-systems collaboration, communication, and community partnerships are critical in serving the complex needs of children and families in your treatment court
- Highlight key lessons, take-aways, and challenges from treatment court programs at different points in transition to a family-centered approach

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



Why Is This Important?

There are an estimated **21.6 million** children (16.2%) under the age of 18 who are living with a parent who misuses substances.

Ghertner, R. (2022). National and State Estimates of Children with Parents Using Substances, 2015-2019. Washington, DC:US Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. Accessed December 13, 2022 from <https://aspe.hhs.gov/reports/children-living-parents-using-substances>)

50-70% of participants in three adult drug courts studied have at least one minor child.

Lipari, R.N. and Van Horn, S.L. Children living with parents who have a substance use disorder. The CBHSQ Report: August 24, 2017. Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration, Rockville, MD.

Transitioning to a Family Centered Approach: Best Practices and Lessons (Learned from Three Adult Drug Courts, 2017)

Break the Cycle





Poll Question



Who Do We Mean When We Say “Family”?

- Multiple generations and households
- Immediate or nuclear family members (e.g., children and other parent)
- Extended family members (e.g., aunts, uncles, cousins, stepparents, grandparents)
- Individuals who play a significant role but are not related by blood or marriage
- Resource families and other supports

Every Person Defines “**Family**” Differently

Participants Do Not Exist in Isolation

Substance Use Disorder (SUD) is a disease that affects all relationships in the family unit

Participants are parents, grandparents, spouses, children, siblings, aunts/uncles

Treat the Family – Heal Relationships
Break the Cycle

CROSS-OVER YOUTH



92 PERCENT

of crossover youth are first involved in the child welfare system.⁵

40 PERCENT

of crossover youth are female, which is disproportionately high compared with the general juvenile justice population.⁷



47 PERCENT

GREATER RISK

Maltreated youth are at a higher risk for becoming involved in delinquency than youth from the general population.⁶



56 PERCENT

of crossover youth are African-American, which is disproportionately high compared to their peers from other racial groups.⁸



83 PERCENT

of crossover youth have challenges with mental health or substance abuse.⁹

CROSSOVER YOUTH BY THE NUMBERS

JUVENILE JUSTICE

- An estimated 2.1 million youth under the age of 18 are arrested in the US each year.
- More than 31 million youth were under juvenile court jurisdiction in 2017.
- Within 12 months, the average rate of re-arrest after a delinquent offense was 55%.

CHILD WELFARE

- 3.5 million children received a CPS response in 2017 – a 10% increase from 2013.
- After a decade of decreasing the number of children in out-of-home care, that trend began to reverse in 2012-2013.

(Administration on Children, Youth and Families, 2019; Casey Family Programs, 2022; Hockenberry & Puzzanchera, 2019; Puzzanchera & Adams, 2011; Snyder & Sickmund, 2006)



Difficulties with attachment can stem from early experiences of abrupt or repeated separation from a parent/caregiver, or frequent changes in caregivers early in life

- incarceration
- substance use disorder
- frequent inpatient treatment episodes or hospitalizations
- deployments
- foster care
- adoption
- deportation

Family-Centered Approach



Recognizes that addiction is a **brain disease** that affects the entire **family**, and that recovery and well-being occurs **in the context of the family**



Provides a comprehensive array of clinical treatment and related support services that meet the needs of **each member in the family**, not only the individual requesting care



Extends well beyond the substance use disorder (SUD) treatment system, the child welfare system, the courts, and mental health services, and includes **all other agencies and individuals** that interact with and serve families

Numbers

Needs

Networks

3Ns

What Can You Do to Be
More Family-Centered?

Take the Next Steps



NUMBERS

Understanding the Challenge





Poll Question

KEY STRATEGY | NUMBERS

**Start identifying parents
with children**

*You cannot change what you
cannot (or do not) count.*



Treatment Courts and Families

- Traditional Adult Drug Courts (ADC) focus their service delivery efforts primarily on the individual. However, many ADC participants have children and families.
- Number of Children of Veterans in Wisconsin: Approximately 282,000.
- Approximately 40% of Veteran Treatment Court clients have children; more than 1/3 have custody.
- Nationwide, approximately 8.7 million children live with one or more parents who are dependent on alcohol or need treatment for illicit drug abuse.

Sources: National Association of Drug Court Professionals. (2015). Adult drug court best practice standards: Volume II. Alexandria, VA: Author. Retrieved from http://www.ndcrc.org/sites/default/files/adult_drug_court_best_practice_standards_volume_ii.pdf

U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Office of Applied Studies. (2009). The NSDUH report: Children living with substance-dependent or substance-abusing parents: 2002 to 2007. Rockville, MD: Author.



The Judge can:

- Ask clients if they have children
- Ask about other family relationships, such as non-custodial parents (identity, location and quality of relationship)
- Ask questions about family status at first progress hearing



The Team can:

- Reconsider how caseloads are being counted - # of families
- Shift from case managing adults or juveniles to case managing families
- Ask questions about family structure
- Strategize on how to get entire family into treatment
- Ensure that court information systems including tracking of family members
- Coordinate with other agencies serving family members

Take the Next Steps:

Numbers

- Ask about other family relationships, such as non-custodial parents (identity, location and quality of relationship)
- Ask questions about family status at intake
- Ensure you are asking questions about family structure
- Strategize on how to get entire family into treatment
- Ensure information systems include tracking of family members

Take the Next Steps:

Numbers

Veteran Families

- **Do not ask:** Are you a veteran? Yes or No
- **Do ask:** Have you or a member of your family ever served in the military regardless of discharge? Do you have children?
- A key barrier to service members and veterans seeking care from civilian providers is that they don't feel understood by those providers.
- We need to educate providers about the importance and impact of asking about military service and experience when families come in for services and support. When providers ask these questions, conversations will open that will lead to better access to care.



Poll Question



NEEDS

**What Can You Do to Become
More Family-Centered?**



KEY STRATEGY | NEEDS

Assess and link participant and family members to appropriate services to meet identified needs

KEY STRATEGY | NEEDS

Provide services that support family members' needs and the parent-child relationship.

Montana Pilot: Family Issues & Recovery

- **52.7%** had concerns regarding one or more of their **children's social and emotional well-being**
- **47.2%** had concerns regarding **medical problems or issues** with one or more of their children
- **40.0%** had concerns about one or more of their **children's behavior**
- **17.8%** had significant concerns about their spouse's or significant other's **mental health**

Collaborating with Ongoing Child Welfare Involvement

Does your treatment court team know –

- Child welfare history as parent and as child?
- Current custody and placement status of children?
- Screening and assessment results already conducted?
- Services in place/mandated through child welfare case plan?
- Parenting time schedule and plan?
- Court dates, multidisciplinary team staffing dates?
- Permanency goal and return home plan?

The Costs of Focusing on Parent Recovery Only - What Happens to Children?

- They are children who arrive at kindergarten not ready for school
- They are in special education caseloads
- They are disproportionately in foster care and are less likely to return home

**They become our clients
in 5-10-20 years.**

- They are in juvenile justice caseloads
- They are in residential treatment programs
- They develop their own substance use disorders

Family Centered Treatment \neq Residential Treatment

INDIVIDUAL

Parent - substance use, employment, health or mental health status

Child - developmental progress, educational performance, improved resiliency

Other family members - substance use, employment, health or mental health status



SYSTEM - SOCIETAL

Community - cost savings and increased tax base from improved employment, cost savings from reduced criminal recidivism, improved prenatal and birth outcomes, reduced school problems, future health costs

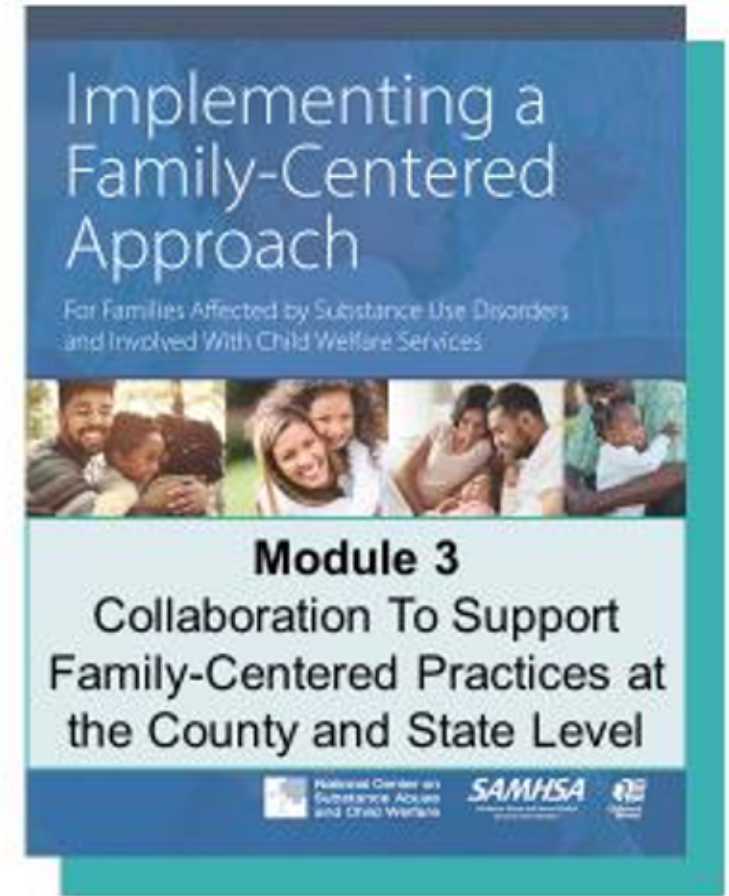
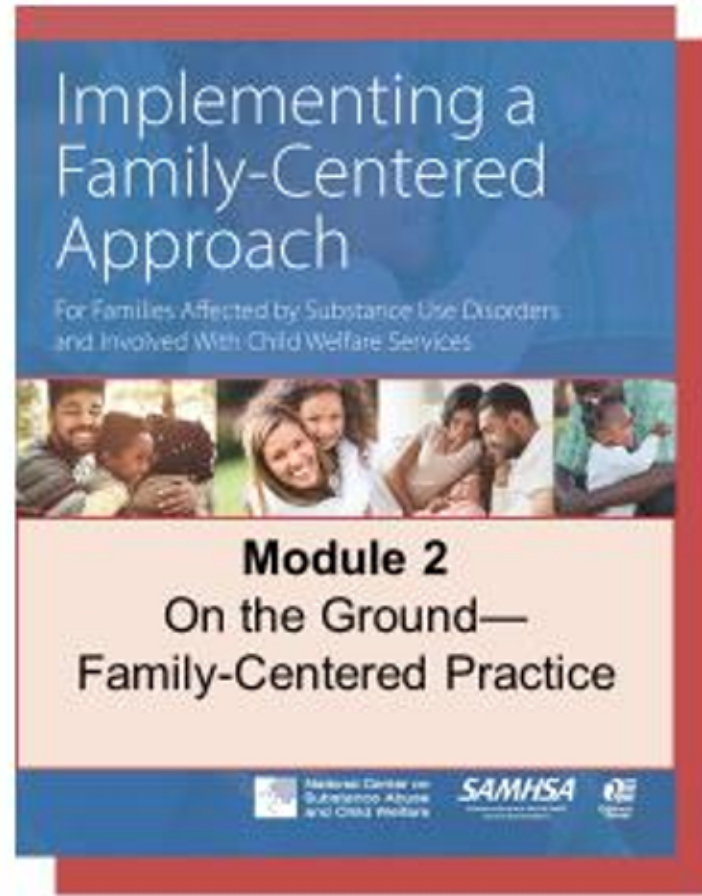
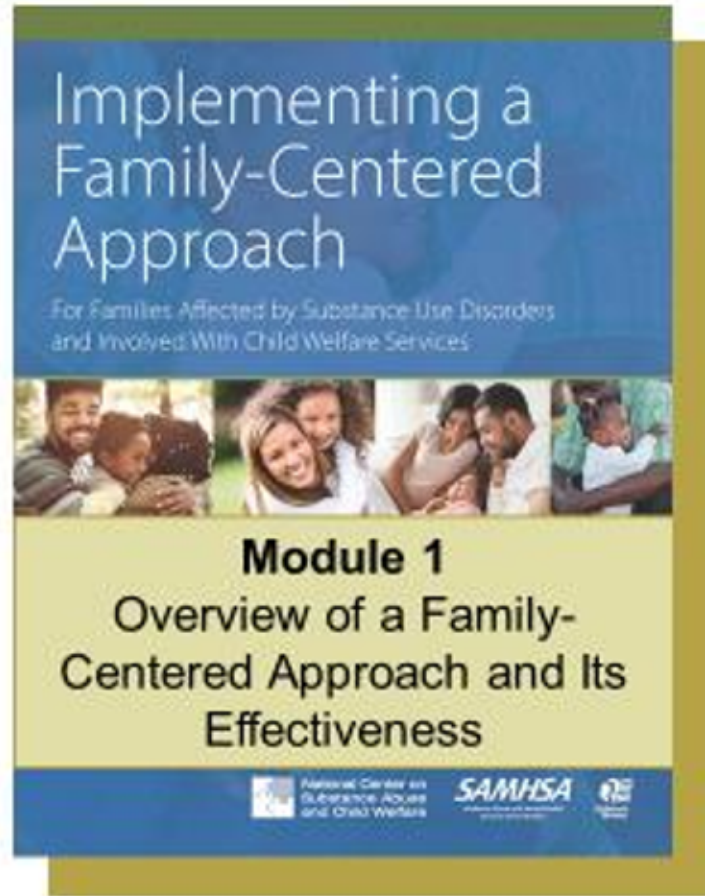
RELATIONAL

Whole families - family stability, reduced violence, healthy communication and parenting improvement

Between family members - parent-child relationship, attachment, relationship satisfaction, reunification

Werner, D., Young, N. K., Dennis, K., & Amatetti, S. (2007). Family-centered treatment for women with substance use disorders: History, key elements and challenges. *Substance Abuse and Mental Health Services Administration Department of Health and Human Services*.

Family-Centered Approach Modules



<https://ncsacw.samhsa.gov/topics/family-centered-approach/fca-modules.aspx>

Parent-Child: Key Service Components

**Developmental &
behavioral
screenings and
assessments**

**Quality and
frequent parenting
time (visitation)**

**Early and ongoing
peer recovery
support**

**Parent-child
relationship-based
interventions**

**Parent
Education**

**Treatment for
trauma**

**Community and
auxiliary support**

Connecting Families to Parenting Program


- Knowledge of parenting skills and basic understanding of child development has been identified as **a key protective factor** against abuse and neglect

(Geeraert, 2004; Lundahl, 2006; & Macleod and Nelson, 2000)

- The underlying theory of parent training is that (a) **parenting skills can improve** with training, (b) child outcomes can be improved, and (c) the risk of child abuse and neglect can be reduced

(Johnson, Stone, Lou, Ling, Claassen, & Austin, 2008)

When Should We Offer Parent Education?

- 
- EARLY!—Participation in parenting programs can enhance parent motivation and engagement
 - Affirms their primary role and identity as a parent
 - Focus on their most important need
 - Increase self-confidence and equip with needed skills
 - Consider any concerns regarding cognitive functioning
 - There is no time to lose when it comes to parent-child bond

Serving Families Saves Money

Adult Drug Courts that provided parenting classes had **65% greater reductions** in criminal recidivism and **52% greater cost savings** than Drug Courts that did not provide parenting classes.

Source: Carey, S.M., Mackin, J.R., & Finigan, M.W. (2012). What works? The 10 key components of Drug Court: Research-based best practices. Drug Court Review.



Parenting Programs Specific to Families Affected by Substance Use Disorders

- **Celebrating Families!** - <http://www.celebratingfamilies.net/>
- **Strengthening Families** - <http://www.strengtheningfamiliesprogram.org/>
- **Nurturing Program for Families in Substance Abuse Treatment and Recovery** - <http://www.healthrecovery.org/publications/detail.php?p=28>

Please visit:

- **California Evidence-Based Clearinghouse** - www.cebc4cw.org
- **SAMHSA's Evidence-Based Resource Center** - www.samhsa.gov/ebp-resource-center

Evidence Based Practices that Support Attachment and the Parent-Child Relationship

- **Circle of Security -**
<https://www.circleofsecurityinternational.com/>
- **Child Parent Psychotherapy -**
<http://childparentpsychotherapy.com/>
- **Attachment and Biobehavioral Catch-Up -**
<http://www.abcintervention.org/>

PROGRAMS FOR ADOLESCENTS AND FAMILIES AFFECTED BY SUBSTANCE USE DISORDERS

- **Family Acceptance Project-** <https://familyproject.sfsu.edu/training>
- **Seeking Safety (adolescent version)-**
- <https://www.cebc4cw.org/program/seeking-safety-for-adolescents/>
- **Adolescent Community Reinforcement Approach-**
<https://youth.gov/content/adolescent-community-reinforcement-approach>
- **Across Ages -** <https://www.cebc4cw.org/program/across-ages/>
- **Thriving with Teens -** <https://pepparent.org/classes-programs/parenting-teens/thriving-with-teens/>
- **NAMI Basics -** <https://www.nami.org/Videos/NAMI-Basics-OnDemand>



Cultural diversity can influence understanding of and reception to supportive services and family engagement.

Supporting the family's culture and traditions may also contribute to the parents' engagement with interventions and services.

Numbers

Take the Next Steps: Needs

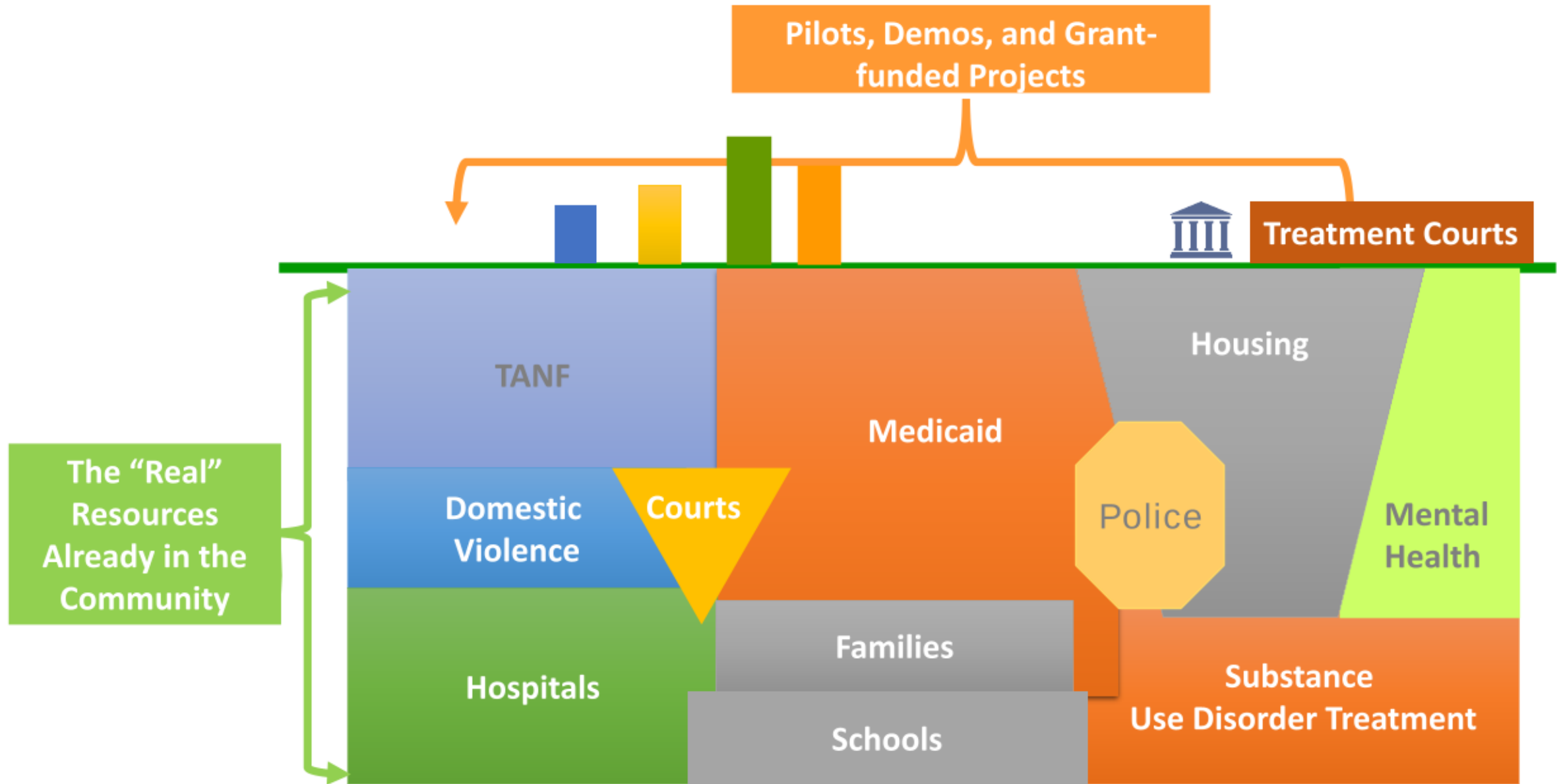
- Are child's/youth's medical, developmental, behavioral, and emotional needs assessed?
- How will you ask clients if their children have received appropriate screenings and assessments?
- Has child and family been assessed for trauma? Relationship issues?
- Did child/youth receive appropriate interventions or services for the identified needs?
- How are strengths identified and leveraged?

Roadmap to Collaboration and Getting Needs Met

NETWORKS



Using the Resources Already in Your Community



KEY STRATEGY | NETWORKS

Community Mapping

Mapping the community's existing resources identifies the client-level service gaps, program overlap, and opportunities to leverage available resources, particularly for shared clients.



Why Community Map?

- Build and sustain state and local interagency collaboration and systems linkages
- Interagency collaborative funding and cost-sharing avenues
- Build understanding among stakeholders about existing and potential services resources, and supports
- Improve capacities of co-existing systems to streamline or realign resources to serve all youth
- Reduce the fragmentation, duplication, and gaps in services, supports, and resources commonly occurring across youth-serving entities
- Identify opportunities to improve a system's overall performance by strengthening weak connections or filling gaps in the system

Numbers

Needs

Take the Next Steps:

Networks

- Do you refer to and follow-up with outside agencies with children's services?
- Are child and family-serving agencies on your collaborative team?
- Are you mobilizing and linking to new resources from other agencies that already serve children and families?
- Have you developed formal relationships and information sharing protocols?

Importance of State and Local Leadership

1

Recognize and prioritize family-centered treatment as more effective than adult-only treatment

2

Conduct a needs assessments for family-centered services and identify any gap in services

3

Review available funding opportunities for family-centered treatment



Q&A | Discussion



Poll Question

Big Steps Small Steps

Just
Keep
Moving





Resources

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Additional Resource

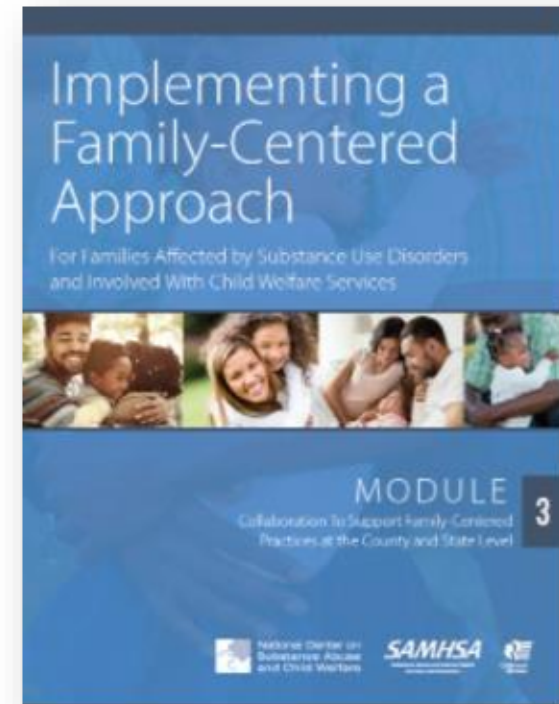
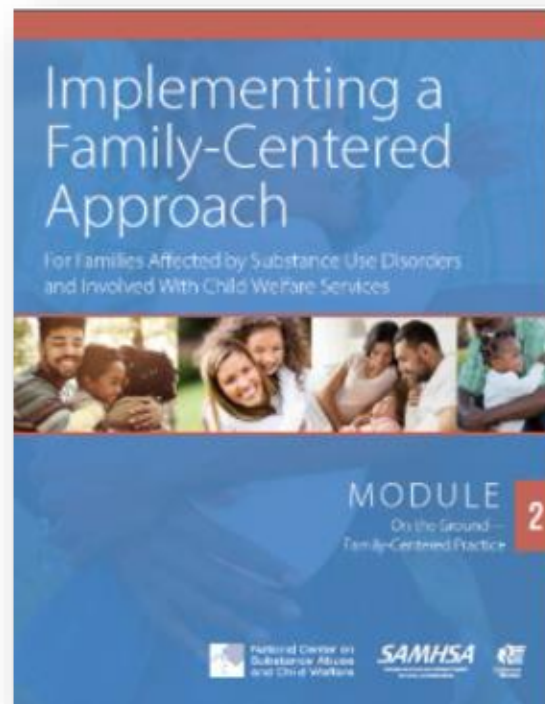
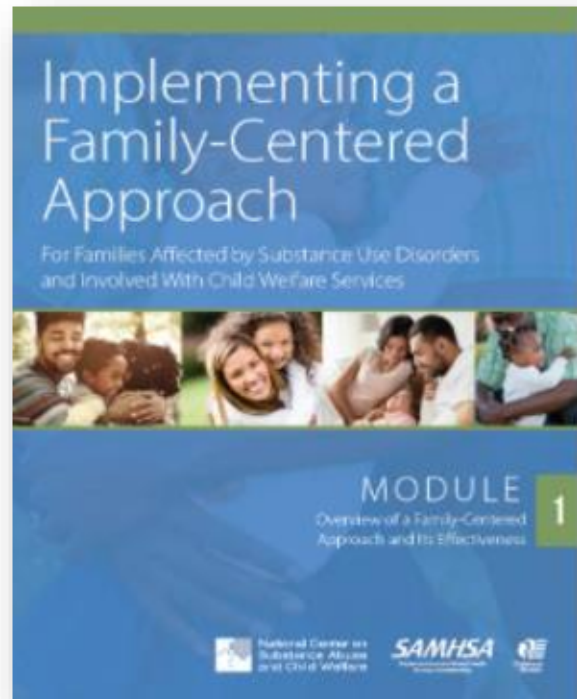
3Ns Handout – Taking Next Steps Towards a Family-Centered Approach

Numbers Needs Networks

Explore further with your Team about possible next steps you can take to move practice.



Family Centered Approach Modules



<https://ncsacw.acf.hhs.gov/topics/family-centered-approach/fca-modules.aspx>

Virtual Meeting Evaluation

Please take a moment to complete our evaluation.

The link is available in the chat box. We will also email you the link after this event.

Thank you!





WISCONSIN
COURT SYSTEM

Heather Kierzek, *Evidence-Based Program Manager*
Director of State Courts – Office of Court Operations

Email: Heather.Kierzek@wicourts.gov



Training & Resources Hub

Scan the QR code or follow this link:

<https://www.wicourts.gov/courts/programs/problemsolving/resources.htm>



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Strengthening Partnerships, Improving Family Outcomes

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CONTACT US:

Center for Children and Family Futures

Family Treatment Court Training and Technical Assistance Program

www.cffutures.org

FTC@cffutures.org



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