

ALL Collaborative Courts are Family Treatment Courts: Serving the Needs of Participants and Family Members

California Association of Collaborative Courts

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CHILDREN & FAMILY FUTURES TECHNICAL ASSISTANCE & EVALUATION PROJECTS

- Casey Family
- Sacramento County Early Intervention Family Treatment Court
- Sacramento County Dependency Family Treatment Court
- Recovery Opportunities Open for Men (ROOM) for Dads
- Strong Families, Strong Children
- Prevention and Family Recovery
- National Quality Improvement Center on Family-Centered Reunification



Children and Family Futures 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.



NATIONAL CENTER ON SUBSTANCE ABUSE & CHILD WELFARE

- In-Depth Technical Assistance
 - Regional Partnership Grants
- Funded by Substance Abuse and Mental Health Services Administration and the Administration on Children, Youth, and Families, Children's Bureau*



NATIONAL FAMILY TREATMENT COURT TRAINING & TECHNICAL ASSISTANCE PROGRAM (FTCTTA)

- Office of Juvenile Justice and Delinquency Prevention FTC Grantee TTA
 - FTC TTA (Non-grantee)
- Funded by Office of Juvenile Justice and Delinquency Prevention*



NATIONAL SOBRIETY TREATMENT & RECOVERY TEAMS TRAINING AND TECHNICAL ASSISTANCE PROGRAM

Funded by Individual States and/or Local Jurisdictions





**NATIONAL
FAMILY
TREATMENT
COURT
PROGRAM**

Training and Technical Assistance





Learning Objectives

- Summarize the research linking a family-centered approach to better outcomes for adult recovery, children, and families.
- Describe what makes practice family-centered.
- Apply practical strategies that can move any treatment court further along the family-centered spectrum.

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

To download a copy:

<https://www.ndci.org/wp-content/uploads/2016/05/Transitioning-to-a-Family-Centered-Approach.pdf>

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 recently 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)



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



A close-up photograph of several hands of different skin tones holding a thick, natural-fiber rope. The hands are arranged in a circle, with each hand gripping the rope. The background is a bright, out-of-focus green and white pattern, possibly a window or a wall. The overall mood is one of unity and collective effort.

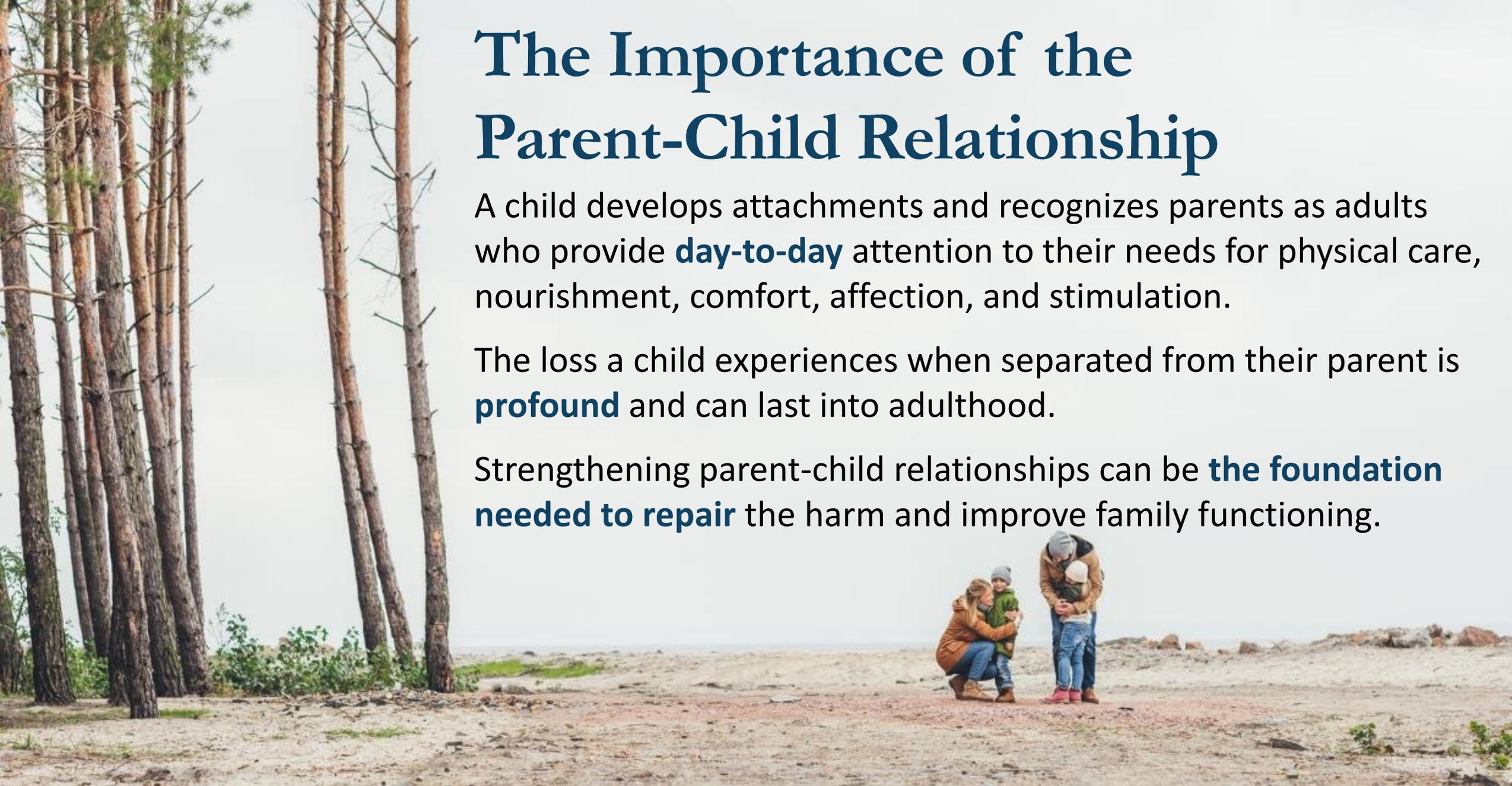
Break the Cycle

Participants Do Not Exist in Isolation

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

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

**Treat the Family – Heal Relationships
Break the Cycle**



The Importance of the Parent-Child Relationship

A child develops attachments and recognizes parents as adults who provide **day-to-day** attention to their needs for physical care, nourishment, comfort, affection, and stimulation.

The loss a child experiences when separated from their parent is **profound** and can last into adulthood.

Strengthening parent-child relationships can be **the foundation needed to repair** the harm and improve family functioning.



From Child Welfare to Juvenile Justice

A prospective study found that being abused or neglected as a child before age 12 increased the likelihood of:

- Arrest as a juvenile by **59%**
- Arrest as an adult by **28%**
- Arrest for a violent crime by **30%**

These children:

- Are **younger** at the time of their first arrest
- Committed nearly **twice** as many offenses
- Are **arrested** more frequently

Best Practice Standards

ADULT DRUG COURT BEST PRACTICE STANDARDS

VOLUME I

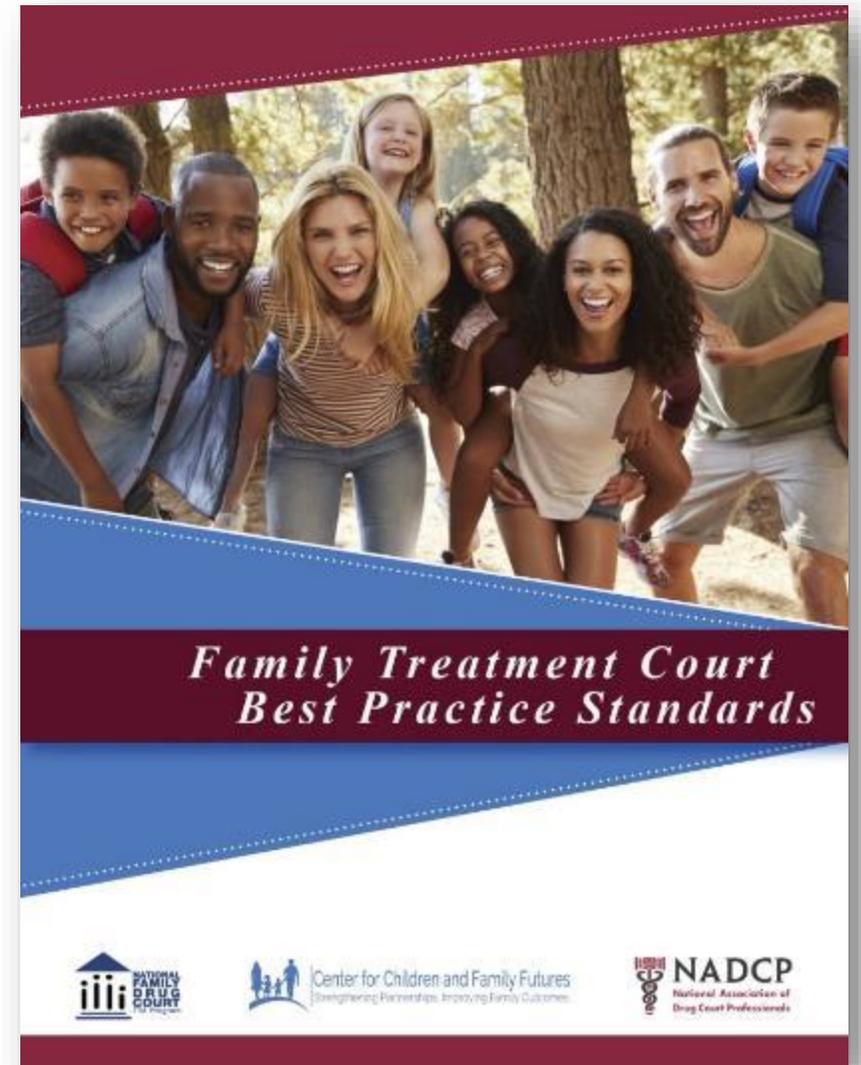


NATIONAL ASSOCIATION OF DRUG COURT PROFESSIONALS
ALEXANDRIA, VIRGINIA

ADULT DRUG COURT BEST PRACTICE STANDARDS

VOLUME II

NATIONAL ASSOCIATION OF DRUG COURT PROFESSIONALS
ALEXANDRIA, VIRGINIA



Principles of Person-Centered Treatment

- **Respectful**
- **Responsive to individual needs, preferences, and values**
- **Services are gender- and culturally responsive**
- **Treatment requires an array of professionals and an environment of mutual respect**
- **Treatment supports creation of healthy individuals and family systems**

What Is Recovery?

SAMHSA's Working Definition

Recovery is a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential.



Recovery is not treatment!

Access to evidence-based substance use disorder treatment and recovery support services are important building blocks to recovery.

Four Major Dimensions of Recovery

Health

Overcoming or managing one's disease(s) or symptoms and making informed, healthy choices that support physical and emotional well-being

Home

Maintaining a stable and safe place to live

Purpose

Conducting meaningful daily activities, such as a job, school, or volunteerism, and having the independence of income and resources to participate in society

Community

Having relationships and social networks that provide support, friendship, love, and hope

Numbers

Needs

Networks

3Ns

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

Take the Next Steps



NUMBERS

Understanding the Challenge



KEY STRATEGY | NUMBERS

*You cannot change
what you cannot
count*

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.



A photograph of a man with a full beard and a young girl in a living room. The man is kneeling on the right, looking at the girl. The girl is standing on the left, wearing a denim dress and having her hair in two braids. They are holding hands. The background shows a blue sofa, a checkered pillow, and a window with light coming through. A desk lamp is visible in the upper left.

NEEDS

What Works for Families

KEY STRATEGY | NEEDS

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

Numbers

Take the Next Steps: Needs

- Have parents, children, and other family members been assessed for trauma? Relationship issues?
- How are individual and family strengths identified and leveraged?
- How will you ask participants if their children have received appropriate screenings and assessments?
- How will you know if parents, children, and other family members receive appropriate interventions or services for the identified needs?

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**

Principles of Family-Centered Treatment

- The **participant defines “family”** and treatment identifies and responds to the effect of substance use disorders on every family member
- **Families are dynamic**, and thus treatment must be dynamic
- **Conflict within families is resolvable**, and treatment builds on family strengths to improve management, well-being, and functioning
- Treatment is **comprehensive** and inclusive of substance use disorder, clinical support services, and community supports for participants and their families
- **Cross-system coordination** is necessary to meet complex needs

Family-Centered 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

Family-Centered Approach Modules

Implementing a Family-Centered Approach

For Families Affected by Substance Use Disorders and Involved With Child Welfare Services



Module 1
Overview of a Family-Centered Approach and Its Effectiveness

National Center on Substance Abuse and Child Welfare | SAMHSA | HHS

Implementing a Family-Centered Approach

For Families Affected by Substance Use Disorders and Involved With Child Welfare Services



Module 2
On the Ground—
Family-Centered Practice

National Center on Substance Abuse and Child Welfare | SAMHSA | HHS

Implementing a Family-Centered Approach

For Families Affected by Substance Use Disorders and Involved With Child Welfare Services



Module 3
Collaboration To Support
Family-Centered Practices at
the County and State Level

National Center on Substance Abuse and Child Welfare | SAMHSA | HHS

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

**Developmental &
behavioral
screenings and
assessments**

**Quality and
frequent
parenting time**

**Early and ongoing
peer recovery
support**

Parent-Child: Key Service Components

**Parent-child
relationship-based
interventions**

Trauma

**Parent
Education**

**Community and
auxiliary support**

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>

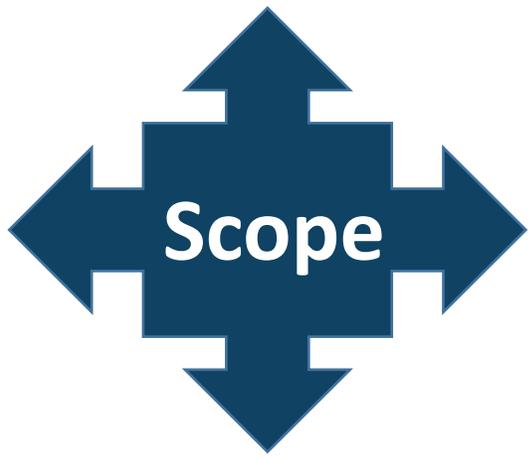
Please visit:

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

VI Complementary Treatment and Social Services

Participants receive complementary treatment and social services for **conditions that co-occur with substance abuse and are likely to interfere** with their compliance with Drug Court, increase criminal recidivism, or diminish treatment gains.

(National Association of Drug Court Professionals, Adult Drug Court Best Practice Standards)



A. Scope of Complementary Services

The Drug Court provides or refers participants for treatment and social services to address conditions that are likely to interfere with their response to substance abuse treatment or other Drug Court services (*responsivity needs*), to increase criminal recidivism (*criminogenic needs*), or to diminish long-term treatment gains (*maintenance needs*). Depending on participant needs, complementary services may include housing assistance, mental health treatment, trauma-informed services, criminal-thinking interventions, family or interpersonal counseling, vocational or educational services, and medical or dental treatment. Participants receive only those services for which they have an assessed need.

VI Complementary Treatment and Social Services

- ✓ **Clinical Case Management**
- ✓ **Housing Assistance**
- ✓ **Mental Health Treatment**
- ✓ **Trauma-Informed Services**
- ✓ **Family & Interpersonal Counseling**
- ✓ **Criminal Thinking Interventions**
- ✓ **Vocational & Educational Services**
- ✓ **Medical & Dental Treatment**
- ✓ **Prevention of High-Risk Behaviors**
- ✓ **Overdose Prevention & Reversal**

(National Association of Drug Court Professionals, Adult Drug Court Best Practice Standards)

Treatment During Pregnancy



Windows of Opportunity

- Motivation to make health related changes is enhanced during pregnancy
- Prenatal care is a touch point with the system



Benefits of Medication for Opioid Use Disorder (MOUD) During Pregnancy

- Stabilizes fetal levels of opioids reducing repeated prenatal withdrawal
- Links mothers to treatment for infectious diseases (e.g., HIV, HBV, HCV) thus reducing likelihood of transmittal to the unborn baby
- Improved long-term health outcomes for mother and the baby
- Compared to untreated pregnant women, women treated with methadone or buprenorphine had infants with: Lower risk of NAS and less severe NAS



(Brogly et al., 2014; Center for Substance Abuse Treatment, 2005; Fajemirokun-Odudey et al., 2006; Kaltenbach et al., 1998; National Consensus Development Panel, 1998; ACOG Committee Opinion No. 524)



NETWORKS

Roadmap to Collaboration



KEY STRATEGY | NETWORKS

Community Mapping

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.

A network diagram consisting of several interconnected nodes. The nodes are represented by circles of varying sizes and colors: teal, light green, and orange. The orange node is the largest and is positioned centrally, with the word "How" overlaid on it in a large, bold, black serif font. Other nodes are connected to it by thin lines, and some are connected to each other as well. The background is white with a faint grid of light gray lines.

How

Numbers

Needs

Take the Next Steps:

Networks

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



A photograph of a man with a full beard and a young girl in a living room. The man is kneeling on the right, looking at the girl. The girl is standing on the left, holding the man's hand. They are both smiling. The background shows a window with curtains, a lamp, and a blue sofa with a checkered pillow.

Q&A

Discussion

Big steps
Small steps

**Just
keep
moving**



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CENTER FOR CHILDREN AND FAMILY FUTURES
Strengthening Partnerships, Improving Family Outcomes