Integrating Juvenile Drug Court and Reclaiming Futures: Outcomes & Policy Implications

Overview

This brief presents the outcomes and policy implications of the four-year National Cross-Site Evaluation of Juvenile Drug Courts and Reclaiming Futures. As part of an effort by the U.S. Department of Justice's Office of Juvenile Justice and Delinquency Prevention (OJJDP) and the Substance Abuse and Mental Health Services Administration's (SAMHSA) Center for Substance Abuse Treatment (CSAT), five juvenile drug court (JDC) sites received grants to enhance their capacity to serve substance-involved youth through the integration and implementation of the Juvenile Drug Courts: Strategies in Practice (JDC: SIP) and Reclaiming Futures (RF). These grants resulted in JDC/RF programs at each site. The National Cross-Site Evaluation of Juvenile Drug Courts and Reclaiming Futures evaluated the implementation, process, and outcomes of these JDC/RF programs.

To inform policymakers and program managers that are seeking to improve their JDC program or create a JDC/RF program, this brief highlights the outcomes and policy recommendations stemming from the National Cross-Site Evaluation. These recommendations might also have broader implications for other substance use treatment programs that serve adolescents. Policy recommendations are presented in the box on page one and described in more detail throughout this brief.

JDC: SIP & RF

The Bureau of Justice Assistance (BJA), the National Council of Juvenile and Family Court Judges (NCJFCJ), and OJJDP created JDC: SIP, outlining 16 strategies to serve as a framework for planning, implementing, and operating a JDC. JDC: SIP is focused on providing appropriate, individualized substance use treatment to adolescents involved in the justice system. Modeled after Defining Drug Courts: The Key Components, which was developed for adult drug courts, the JDC: SIP recognizes

Policy & Program Recommendations

JDC and JDC/RF Recommendations

- **Implement JDC and JDC/RF programs to realize net savings for society and improve substance use and criminal activity outcomes.**
- **Use JDC and JDC/RF programs to serve youth with high levels of clinical problems and/or criminal activity.**
  - Revise JDC and JDC/RF program inclusion criteria to focus on high-crime and high-clinical-problem youth.
  - Use standardized, valid clinical tools to screen youth for program eligibility and assess their service needs.
- **Support the treatment network/community in the JDC area.**

Program Component Recommendations

- **Implement gender-appropriate treatment.**
- **Implement culturally-responsive policies.**
- **Provide prosocial activities.**
- **Implement mentoring programs**.
- **Select and employ program components that effectively serve your target population.**
  - When working with high-crime youth, use frequent, random, and supervised drug testing.
  - Programs targeting high-crime youth should emphasize gender-appropriate treatment.
  - Coordinate with the school system, particularly if serving high-crime youth.

that juveniles are developmentally different from adults and includes specific strategies that incorporate age-relevant practices.

RF is a systems change approach to juvenile justice, developed by the Robert Wood Johnson Foundation. RF is focused on increasing and improving adolescent substance use treatment as well as improving the way that communities intervene with youth. RF aims to drive changes within communities and foster collaboration within the existing frameworks to deliver effective treatment, rather than creating new programs. Local leaders at each JDC use the RF six-step model to provide youth in their local juvenile justice system with "more treatment, better treatment, and beyond treatment." RF emphasizes a coordinated, individualized response and community-directed engagement.

Outcomes

To understand the JDC/RF programs within their proper context, the National Cross-Site Evaluation examined JDC/RF programs, non-RF JDC programs, and intensive outpatient programs (IOPs) serving adolescents. As a result, the evaluation was able to assess outcomes specific to (1) JDC/RF programs, (2) JDC programs in general, and (3) program components (e.g., gender-appropriate treatment) applicable to adolescent substance use treatment programs beyond JDCs. In addition, the evaluation conducted a cost-savings analysis, which estimated the monetary value of reductions in criminal activity and other outcomes.

JDC/RF Program Outcomes

The National Cross-Site Evaluation compared JDC/RF programs with non-JDC/RF programs (other JDC programs and IOPs), while controlling statistically for differences across program in the characteristics of program clients (e.g., gender and substance problems) at intake into the program. The evaluation found that, relative to JDC youth, JDC/RF youth reported receiving more substance use services, continuing care, and mental health services, and having more contact with the justice system in the year after admission. In addition, JDC/RF youth were more likely than not to be actively enrolled in and receiving treatment, though this varied by JDC/RF program. The evaluation determined that:

- **JDC/RF programs have a desirable impact on crime-related outcomes (self-reported total number of crimes and recency and frequency of illegal activity), as compared to similar non-JDC/RF programs, particularly among high-crime youth**. JDC/RF programs resulted in reduced number of crimes self-reported at 6 months post-program intake relative to program intake. The evaluation also found reduced recency and frequency of illegal activity at 6 months post-intake among clients who had relatively high criminality (self-reported criminal and illegal activity) at program intake. In addition, for these high-crime youth, JDC/RF programs resulted in greater reductions from program intake to 6 months post-intake in number of crimes and illegal activity than JDC programs and IOPs. Thus, JDC/RF programs are particularly effective for youth with relatively more criminal activity at program intake.
- **JDC/RF programs produce $84,569 in net societal benefit per youth**. JDC/RF programs provided significantly more behavioral health services than non-RF JDC programs, incurring additional costs. However, these costs were offset by the savings generated from reduced mental health problems, criminal activity, and days missed from school in the year following intake to JDC/RF programs relative to the year prior to intake. As a result, the economic benefits of JDC/RF programs greatly outweigh program costs, making it a cost-saving intervention for juvenile offenders with substance use disorders.
- **JDC/RF programs achieved more cost savings with clients with more (4+) clinical problems**. Clients with four or more clinical problems (e.g., substance use disorder, mood disorder, and conduct disorder) at intake had an average savings of $232,190 per youth compared to those with four or fewer problems, who had an average savings of $18,209. These findings indicate that JDC/RF programs achieve more cost savings with youth who have more clinical problems.

- **Participation in a JDC/RF program is associated with increased use of outpatient substance use services and community supervision**. Relative to youth in JDCs that do not implement RF, youth in JDC/RF programs were more likely to use outpatient substance use services and community supervision.

- **JDC/RF programs implemented within an integrated system, involving interagency coordination, were more effective at meeting substance use treatment needs relative to JDC/RF programs implemented within a less integrated system**. Integrated systems may help provide youth with access to the full continuum of substance use treatment services. Creating an integrated system through interagency collaboration and avoiding agency "silos" is likely related to successfully serving the substance use treatment needs of JDC youth.

- **JDC/RF programs in communities with access to targeted treatment, or treatment appropriate for the program clients (e.g., developmentally and gender-appropriate), were more effective at serving client's substance use treatment needs than JDC/RF programs in communities without access to targeted treatment.** Access to targeted treatment is likely related to successfully serving the substance use treatment needs of JDC youth.

- **JDC/RF programs that more fully implemented community engagement, collaborative partnerships, educational linkages, and community transition were more successful at reducing substance use with heavy substance users than programs that implemented those program components to a lesser extent**. These four components of the integrated JDC/RF approach were explicitly associated with positive substance use outcomes for heavy substance users.

JDC Program Outcomes

The National Cross-Site Evaluation examined outcomes for select JDC programs that do not implement RF as well as the five JDC/RF programs specifically included in the evaluation, while controlling statistically for differences across program in the characteristics of program clients (e.g., gender and substance problems) at intake into the program. This analysis demonstrates that JDC programs yield many positive outcomes, even without the inclusion of RF. Results from the evaluation include:

- **Among heavy substance users, JDC programs have a desirable impact on substance use outcomes (i.e., self-reported days of substance use), as compared to similar IOPs**. Overall, JDC programs resulted in reduced days of substance use compared to program intake among all clients. Furthermore, when compared to IOPs, JDC programs resulted in greater reductions in days of substance use for youth who were using substances more often (i.e., reported relatively more days of substance use) at intake. This finding is particularly important because it demonstrates that JDCs are effective with a population that traditionally has greater clinical needs.

- **JDC programs produce sizable cost savings, particularly due to reduced crime costs**. Regardless of whether a JDC program implemented RF, economic benefits more than offset JDC program costs, particularly due to a reduction in crime costs. Total savings per youth was $77,558 for JDC programs that did not implement RF and $122,857 per youth for JDC/RF programs.

- **Participation in JDC programs is associated with reduced substance use, emotional problems, family problems, school/work problems, and crime.** Youth who participate in a JDC program experience a number of positive outcomes across clinical, family/social, education/employment, and criminal areas. This finding shows that JDC programs have substantial success with improving youth outcomes.

Critical Components of Juvenile Substance Use Treatment Programs, Including JDC and JDC/RF Programs

In addition to broader conclusions regarding the effectiveness and economic impact of JDC and JDC/RF programs, the National Cross-Site Evaluation provides extensive insight into the critical components of JDC programs as well as juvenile substance use treatment programs more generally. Critical program components are those that are related to improved substance use or criminal behavior outcomes among program clients, regardless of whether their program was

JDC/RF, JDC, or IOP. Ultimately, the evaluation identified eight critical program components that have implications for a host of juvenile substance use treatment and juvenile justice programs, including JDC programs:

- **Having a defined target population and eligibility criteria is particularly effective at reducing substance use among heavy substance users**.
- **Using policies and procedures that are responsive to cultural differences results in better substance use outcomes among all clients**.
- **Providing prosocial activities is associated with better substance use outcomes among all clients compared to not providing such activities.**
- **Coordinating with the school system is particularly effective at reducing client criminal activity among high-crime youth**.
- **Providing mentoring programs is associated with better criminal activity outcomes among high-crime clients compared to not providing such programming.**
- **Using sanctions to modify non-compliance is particularly effective at reducing client criminal activity among high-crime youth**.
- **Frequent drug testing is particularly effective at reducing client criminal activity among high-crime youth**.
- **Gender-appropriate treatment had a desirable effect on both criminal activity and substance abuse outcomes but was particularly effective at improving outcomes for high-crime youth and heavy substance users**.

Policy and Program Recommendations

The recommendations presented in this brief stem from process and outcome findings from the National Cross-Site Evaluation. As part of the evaluation, the research team considered how the findings inform policy and practice. This section presents the policy and program recommendations, first offering recommendations that are specific to JDC and JDC/RF programs and then presenting broader recommendations that have implications for all programs serving the substance-using juvenile justice population.

JDC and JDC/RF Recommendations

JDC and JDC/RF programs are a highly intensive (and resource intensive) programs that should target youth with high levels of criminal activity and/or clinical problems, including substance use disorders. The National Cross-Site Evaluation shows that JDC/RF is both **more effective** and **generates more cost savings** when employed with this population. Ultimately, while JDC and JDC/RF programs are small, expensive programs, they both pose a useful policy solution for a population with high clinical need and criminality. The following recommendations can help guide the implementation or improvement of a JDC or JDC/RF program.

- **Implement JDC and JDC/RF programs to realize net savings for society and improve substance use and criminal activity outcomes.** In large part because JDC programs were successful at reducing criminal activity among youth, the evaluation found that JDC programs produce economic benefits to society that greatly exceed program costs. In addition to the economic benefits, JDC programs were also associated with a host of positive outcomes across social, clinical, and criminal areas. These results indicate that JDC programs are cost-saving interventions for juvenile offenders with substance use disorders and criminal involvement, regardless of whether the programs implement RF. However, because JDC/RF programs produce greater net societal benefit per youth than JDC programs, jurisdictions might want to consider incorporating RF into new or existing JDC programs.

- **Use JDC and JDC/RF programs to serve youth with high levels of clinical problems and/or criminal activity**. Data from the evaluation show that JDC programs are more successful than IOPs at improving substance use outcomes among youth who were using more substances at intake. In addition, JDC/RF programs are more effective with youth who have high levels of criminal activity and clinical problems (including substance use). This is particularly important because JDC programs can effectively and efficiently improve outcomes for this high clinical need and high-crime juvenile population. Because the evaluation found positive outcomes for both types of JDC programs, all JDC programs should target these types of youth for enrollment. Jurisdictions without a JDC program might wish to consider implementing one, and jurisdictions with a JDC program in place should exercise care when determining which youth are candidates for their program. In addition, because JDC/RF was more effective with high-crime youth than JDC programs that did not implement RF, jurisdictions that serve or expect to serve such youth might wish to consider implementing RF. To better serve youth with high levels of clinical problems or criminal activity, JDC programs might want to:
    - **Revise JDC and JDC/RF program inclusion criteria to focus on high-crime and high-clinical-problem youth.** In addition to findings that demonstrate success with this population, placing an emphasis on having a defined target population and eligibility criteria was particularly important with high-need youth. Also, because JDC/RF programs experienced both better results and increased cost savings when youth were retained in treatment as needed, JDC programs might wish to target their outreach, recruitment, engagement, and retention efforts towards this high-need population.
    - **Use standardized, valid clinical tools to screen youth for program eligibility and assess their service needs.** To operationalize recommendations regarding high crime or heavy-substance-using youth, JDC programs should use clinically based, valid, and standardized screening and assessment tools. These tools can help programs identify youth who meet their program inclusion criteria and determine their clients' specific service needs.
- **Support the treatment network/community in the JDC area.** Programs operating within more integrated treatment systems were more successful than their counterparts. Similarly, programs implemented in communities with adequate access to targeted treatment were more effective at serving client's substance use treatment needs than their counterparts. Taken together, these results indicate that JDC programs might achieve better outcomes if they can ensure that their clients receive needed care within an integrated treatment system that tailors treatment to client needs. These findings emphasize the need for JDC programs to work within their communities to improve the network of juvenile-serving substance use services.

Program Component Recommendations

Because the National Cross-Site Evaluation examined JDC/RF programs, JDC programs, and IOPs as part of an effort to determine the effects of the integrated JDC/RF model, several evaluation results point to policy recommendations that apply not only to JDC and JDC/RF programs, but to a much wider set of programs that seek to address substance use among juveniles. The evaluation's examination of critical program components provides perhaps the most straightforward set of recommendations for juvenile substance use treatment programs, including JDC programs, seeking to improve their performance. By examining the relationship between specific program components and client characteristics, the evaluation team offers several policy recommendations that might help to better serve substance-using youth in the juvenile justice system.

- **Implement gender-appropriate treatment**. Using gender-appropriate treatment was associated with desirable outcomes for substance use and criminal activity. As a result, programs serving the substance using juvenile justice population should implement gender-appropriate treatment regardless of whether they are implementing an IOP, a JDC program, or a JDC/RF program. In addition, gender-appropriate approaches apply equally to males and

females. While gender appropriate treatment within juvenile justice populations is often discussed as ensuring that programs implement a female-focused component, numerous promising approaches also cater specifically to adolescent males.

- **Implement culturally-responsive policies**. Because using policies and procedures that are responsive to cultural differences was associated with positive outcomes for substance use regardless of other factors, policymakers should implement those policies broadly across IOPs, JDC programs, and JDC/RF programs. While cultural competence might sometimes be seen as distinct from clinical outcomes, these findings demonstrate that culturally responsive policies can, in fact, yield better outcomes than the alternative and merit careful attention from policymakers and program managers.

- **Provide prosocial activities.** Prosocial activities were associated with reduced substance use across IOPs, JDC programs, and JDC/RF programs. Though the incorporation of prosocial activities is a component of the integrated JDC/RF approach, providing prosocial activities for youth can be effective across multiple types of programs that are not explicitly implementing RF.

- **Implement mentoring programs**. Mentoring programs were associated with a reduction in the number of crimes regardless of whether they were utilized in JDC/RF programs, JDC programs, or IOPs. Programs serving this target population should implement mentoring programs to achieve better outcomes. For more information on mentoring programs see OJJDP's webpage on mentoring resources: http://www.ojjdp.gov/programs/mentoring.html.

- **Select and employ program components that effectively serve your target population**. Certain program components or approaches are more successful with certain populations. Specifically, frequent drug testing, gender-responsive treatment, and coordination with the school system were all more effective with high-crime youth. This information allows policymakers and program managers to match their program to their population. For example, JDC programs serving a high-need population might want to use different strategies than programs serving less severe youth. To match program components with a target population consider the following:

  o **Use standardized, valid clinical tools to screen youth for program eligibility and assess treatment & service needs.** To determine the specific characteristics of their clients, programs should use standardized, valid clinical screening and assessment tools. Screening tools will help programs identify and enroll youth who meet their inclusion criteria, and assessment tools will help programs identify their clients' characteristics and service needs. Programs can use information from these tools to select program components that effectively serve their target population (e.g., by using those programs to identify and select high-crime youth and target their services appropriately).

  o **When working with high-crime youth, use frequent, random, and supervised drug testing**. More drug testing appeared to yield positive outcomes for criminal activity among high-crime youth. This finding indicates that programs serving high-crime youth should test those youth more frequently. However, the evaluation also found that more frequent testing might not be associated with desirable outcomes for youth with lower levels of criminal involvement. As a result, programs serving these lower crime youth might wish to use less stringent testing protocols. Finally, programs serving youth with varying levels of criminal activity might wish to use different testing frequencies for these distinct populations, possibly by utilizing different program "tracks." This is of particular importance to JDCs, which might wish to modify their programs based on the other outcomes of this evaluation.

  o **Programs targeting high-crime youth should emphasize gender-appropriate treatment**. While gender-appropriate treatment had positive effects in all cases, that effect was most pronounced with high-crime youth, which suggests that JDC programs, JDC/RF programs, and other substance use treatment programs that target such youth should prioritize gender-appropriate treatment. Policymakers seeking to target their JDC programs towards these high-crime youth might want to ensure that their JDC programs can provide gender-appropriate treatment.

o **Coordinate with the school system, particularly if serving high-crime youth**. While coordination with the school system was generally associated with positive outcomes for criminal activity, school system coordination was particularly successful with high-crime youth—such as those youth traditionally targeted in JDC and JDC/RF programs. Programs targeting those youth should prioritize school system coordination, and policymakers should ensure that their JDC programs have a mechanism through which to communicate with the local schools.

About the National Cross-Site Evaluation of Juvenile Drug Courts and Reclaiming Futures

The purpose of the National Cross-Site Evaluation of Juvenile Drug Courts and Reclaiming Futures (JDC/RF) was to conduct an independent evaluation of the combined effects of the JDC: SIP and the RF models to identify the factors, elements, and services that perform best with respect to outcomes and cost-effectiveness. The evaluation was led by the University of Arizona, Southwest Institute for Research on Women (SIROW) in partnership with Chestnut Health Systems and Carnevale Associates, LLC.

The *FINAL PROJECT REPORT* of the National Cross-Site evaluation, which provides additional details regarding the project methods, analyses and findings: Will be available after February 22, 2016 at http://sirow.arizona.edu/sites/sirow.arizona.edu/files/National_Cross_Site_Evaluation_JDCRF_Final_Report.pdf or by contacting Monica Davis, Evaluation Coordinator, at (520) 295-9339 ext. 211 or midavis@email.arizona.edu.

Additional reports, presentations, and information about the National Cross-Site evaluation: Are available at http://sirow.arizona.edu/JDCRF or by contacting Monica Davis, Evaluation Coordinator, at (520) 295-9339 ext. 211 or midavis@email.arizona.edu.