

CJANALYSIS



A Review of San Diego County's Juvenile Drug Treatment Court

April 2020

Research findings from the Criminal Justice Clearinghouse

Board of Directors

The 18 cities and county government are SANDAG serving as the forum for regional decision-making. SANDAG builds consensus; plans, engineers, and builds public transit; makes strategic plans; obtains and allocates resources; and provides information on a broad range of topics pertinent to the region's quality of life.

Chair

Hon. Steve Vaus

Vice Chair

Hon. Catherine Blakespear

Executive Director

Hasan Ikhata

City of Carlsbad

Hon. Cori Schumacher, Councilmember
(A) Keith Blackburn, Mayor Pro Tem
(A) Hon. Priya Bhat-Patel, Councilmember

City of Chula Vista

Hon. Mary Salas, Mayor
(A) Hon. Steve Padilla, Councilmember
(A) Hon. John McCann, Councilmember

City of Coronado

Hon. Richard Bailey, Mayor
(A) Hon. Bill Sandke, Councilmember
(A) Hon. Mike Donovan, Councilmember

City of Del Mar

Hon. Ellie Haviland, Mayor
(A) Hon. Dwight Worden, Councilmember
(A) Hon. Dave Druker, Councilmember

City of El Cajon

Hon. Bill Wells, Mayor
(A) Hon. Steve Goble, Deputy Mayor

City of Encinitas

Hon. Catherine Blakespear, Mayor
(A) Hon. Joe Mosca, Councilmember
(A) Hon. Kellie Hinze, Councilmember

City of Escondido

Hon. Paul McNamara, Mayor
(A) Hon. Olga Diaz, Councilmember
(A) Hon. Mike Morasco, Councilmember

City of Imperial Beach

Hon. Serge Dedina, Mayor
(A) Hon. Mark West, Councilmember
(A) Hon. Paloma Aguirre, Councilmember

City of La Mesa

Hon. Bill Baber, Councilmember
(A) Hon. Kristine Alessio, Councilmember
(A) Hon. Akilah Weber, Councilmember

City of Lemon Grove

Hon. Racquel Vasquez, Mayor
(A) Hon. Jennifer Mendoza, Councilmember
(A) Hon. Jerry Jones, Councilmember

City of National City

Hon. Alejandra Sotelo-Solis, Mayor
(A) Hon. Mona Rios, Councilmember
(A) Hon. Ron Morrison, Vice Mayor

City of Oceanside

Hon. Jack Feller, Deputy Mayor
(A) Hon. Christopher Rodriguez, Councilmember
(A) Hon. Ryan Keim, Councilmember

City of Poway

Hon. Steve Vaus, Mayor
(A) Hon. John Mullin, Councilmember
(A) Hon. Caylin Frank, Councilmember

City of San Diego

Hon. Kevin Faulconer, Mayor
(A) Hon. Mark Kersey, Councilmember
(A) Hon. Vivian Moreno, Councilmember
Hon. Georgette Gomez, Council President
(A) Hon. Monica Montgomery, Councilmember
(A) Hon. Barbara Bry, Council President Pro Tem

City of San Marcos

Hon. Rebecca Jones, Mayor
(A) Hon. Sharon Jenkins, Mayor Pro Tem
(A) Hon. Maria Nunez, Councilmember

City of Santee

Hon. John Minto, Mayor
(A) Hon. Ronn Hall, Councilmember
(A) Hon. Rob McNelis, Councilmember

City of Solana Beach

Hon. David A. Zito, Councilmember
(A) Hon. Jewel Edson, Mayor
(A) Hon. Kristi Becker, Councilmember

City of Vista

Hon. Judy Ritter, Mayor
(A) Hon. Amanda Rigby, Deputy Mayor
(A) Hon. Joe Green, Councilmember

County of San Diego

Hon. Jim Desmond, Vice Chair
(A) Hon. Dianne Jacob, Supervisor
Hon. Kristin Gaspar, Supervisor
(A) Hon. Greg Cox, Chair
(A) Hon. Nathan Fletcher, Supervisor

Advisory Members

Imperial County

Hon. Jesus Eduardo Escobar, Supervisor
(A) Mark Baza, Imperial County Transportation Commission

California Department of Transportation

Toks Omishakin, Executive Director
(A) Gustavo Dallarda, Acting District 11 Director
(A) Ann Fox, Deputy Director

Metropolitan Transit System

Hon. Paloma Aguirre
(A) Hon. Bill Sandke

North County Transit District

Hon. Tony Kranz
(A) Hon. Priya Bhat-Patel
(A) Hon. Jewel Edson

U.S. Department of Defense

Joe Stuyvesant, Navy Region Southwest
Executive Director
(A) Steve Chung, Navy Region Southwest

Port of San Diego

Hon. Garry Bonelli, Commissioner
(A) Hon. Dan Malcolm, Commissioner

San Diego County Water Authority

Mel Katz, Director
(A) Gary Croucher, Vice Chair
(A) Vacant

San Diego County Regional Airport Authority

April Boling, Chair
(A) Paul Robinson

Southern California Tribal Chairmen's Association

Hon. Cody Martinez, Chairman,
Sycuan Band of the Kumeyaay Nation
Hon. Edwin "Thorpe" Romero, Chairman,
Barona Band of Mission Indians

Mexico

Hon. Carlos González Gutiérrez
Cónsul General of Mexico
(A) Hon. Mario Figueroa
Deputy Cónsul General of Mexico
(A) Hon. Natalia Figueroa, Vice Consul

As of March 5, 2020

Juvenile Drug Treatment Court In-Depth Analysis

Background

Annually San Diego Association of Governments (SANDAG) Criminal Justice Clearinghouse has completed program evaluations for the County of San Diego's Juvenile Probation department to meet federal reporting standards for Juvenile Justice Crime Prevention Act funding. One historically evaluated program is Juvenile Drug Treatment Court (JDTC). In concert with this annual program evaluation SANDAG has been completing a series of specific juvenile program reviews for San Diego County Probation. In this analysis, SANDAG evaluated JDTC by reviewing criminal justice system involvement before participating in JDTC, program activity and process measures during participation (e.g., how many sober days, program points, and duration of the program), program outcomes (e.g., successful graduation or termination of JDTC), and post-program recidivism (all youth in the sample had terminated at least 6 months before data collection).

JDTC is part of the continuum of services for youth who are wards of the court with substance abuse issues, and it is an ongoing a partnership between the Juvenile Court, Public Defender, District Attorney, Probation, and treatment providers. The purpose of this model is to use the broad array of legal tools available to the Court and Probation to connect youth who use substances to treatment with the underlying hope that the connection to services will reduce substance use and future criminal justice engagement (Wilson, Olaghere, Kimbrell, 2016).¹ In San Diego County, youth are ordered to JDTC following continued substance use despite other Probation interventions and/or commitments.

Once committed to JDTC, the youth and his/her family is referred to the partnering community-based organization (CBO) that meets with the youth and family to conduct a standardized substance use assessment and creates a service plan. During his/her time in JDTC the CBO pairs the youth with a Juvenile Recovery Specialist (JRS) who works closely with the youth and his/her family, providing trauma informed case management to connect the minor to a substance abuse treatment program in the youth's neighborhood and to also engage family in the youth's treatment. Substance abuse treatment providers report on the minor's progress to the JRS, and the JRS conducts field visits and drug testing at the schools and homes of JDTC youth. The JRS also connects to the Probation Officer and other JDTC team members. The other JDTC team members include the Probation Officer Supervisors, District Attorney, Public Defender, Judge, the JDTC Probation Officer, the JRS, and possibly treatment providers. On a weekly or bi-month basis (pending the treatment Phase), the Probation Officer, in partnership with the JRS, presents a youth progress report to the Court on community, school, and family issues. Before each JDTC formal court session, the JDTC team reviews each minor's progress, including treatment, his/her behavior in the community and at home, and reviews recommendations or orders for the next week.

Juvenile Drug Treatment Court eligibility guidelines

1. *Wards of the court between 15 and 17.9 who will have court ordered substance abuse conditions of probation.*
2. *Non-violent offender.*
3. *No documented gang membership.*
4. *Placement in home or residential setting is within reasonable transportation distance to counseling/ treatment sites.*
5. *No history of arson.*
6. *No current role as drug dealer if primary motive is monetary gain.*
7. *A minor has substance use issues as evidenced by positive test(s), failure to attend treatment, unsuccessful termination/ lack of progress in treatment or SAS Track 2.*
8. *120 available custody days.*

Source: Correspondence with Probation, November 2019

Note: These are guidelines; however, the JDTC review committee makes final enrollment decisions.

¹ Wilson, D., Olaghere, A., & Kimbrell, C. S. (2016). *Developing juvenile drug court practices on process standards: a systematic review and qualitative synthesis*. Washington, DC: Office of Juvenile Justice and Delinquency Prevention, Office of Justice Programs, U.S. Department of Justice.

The JDTC is structured as a 9-month program, comprised of three phases to support youth's engagement in treatment and compliance with Probation and the Court. Below is a brief description of the three phases.

1. Phase I: Recovery and Responsibility.
 - a. Length of phase is 0 to 90 days;
 - b. Contact is weekly with the Court, Probation Officer and the JRS;
 - c. Nine hours of drug treatment;
 - d. Random drug tests.
2. Phase II: Maintenance of Recovery and Responsibility to Others.
 - a. Length of phase is 91 to 180 days;
 - b. Contact is every other week with the Court;
 - c. Community Service;
 - d. All components of Phase I.
3. Phase III: Maintenance of Recovery and Responsibility to Self and Others.
 - a. Length of phase is 181 to 270 days;
 - b. Contact monthly with the Court;
 - c. Contact with the Probation Officer and JRS is every other week;
 - d. Completion of community services
 - e. All components of Phase II.

During these phases a youth earns points for positive actions (e.g., completing courses, school attendance) and sanctions for misconduct with an expectation of sobriety and law-abiding behavior for JDTC graduation. Youth successfully graduate from drug court after completing all three phases or they earn 230 points with a minimum of 90 days of sobriety (Correspondence with Probation, 2019). For further information on the processes and eligibility for JDTC see the appendix for point earning criteria and for the Juvenile Drug Court eligibility criteria.

Methodology

SANDAG conducted a retrospective evaluation of the JDTC cohort who exited the program between 7/1/18 and 3/31/19 (n=22). To be included in the exit cohort, the case had to have complete records, the known outcome of successful graduation or termination, and allow for at least 6 months to pass after JDTC exit to evaluate subsequent juvenile justice interactions. All data were either extracted from the Probation Case Management System (PCMS) database warehouse by Business Intelligence (Probation) for SANDAG or were manually collected from case files (both paper and electronic). The adult criminal justice databases for arrests and probation were not available for data collection for this project. Interrater reliability was established, and data collection was reviewed for quality assurance for manually collected items.

Key data collection items included:

- Demographics (e.g., age, gender, ethnicity),
- Psychological and social characteristics (e.g., school attendance, school performance, reported history of mental health diagnoses, parental mental health and substance use diagnoses, known gang affiliation, living situation, and family criminal justice involvement),
- Substance use (e.g., drug tests completed, self-reported drug use), and
- Juvenile justice contacts (e.g., referrals, sustained petitions, bookings, commitments).

Primary research questions

1. What were the characteristics of youth served by JDTC including demographics, substance use, and criminal history?
2. What was the juvenile recidivism rate (i.e., new Probation referrals, days booked, sustained petitions, and commitments) during the program and six-months following JDTC discharge?
3. Did participants' substance use decrease (as measured by negative drug tests) over time?

Limitations and assumptions

- Due to the limited census of the JDTC, the sample of JDTC participants who exited was relatively small (n=22) so generalization is limited. Also, this sample and study was retrospective and quasi-experimental with no control group; therefore, there is not a full sense of efficacy compared to those who went through the Juvenile Justice system with substance use issues and were not enrolled into JDTC.
- Recidivism was limited to juvenile justice system data, as the scope of the project utilized current data agreements which did not include adult data. As the average age at discharge was 17, it is possible recidivism data for those youth (n=8) who turned 18 during the 6-month follow-up period were missed.
- Treatment data were limited to documentation in probation files. A further study may look to request data from the treatment agencies for more robust treatment context.

What were the characteristics of youth served by JDTC including demographics, juvenile justice history, psychological and social backgrounds?

Sample demographics

Almost three-quarters (73% or 16) sampled were male, and the majority were non-White (Hispanic=50%; Black=14%; Other=14%) (Figure 1). The mean age at JDTC enrollment was 16 years old (range=15-17; $SD=0.7$) and the mean exit age was 17 (range 15-19; $SD=1.0$) (Figure 1).

Figure 1
JDTC sample demographics

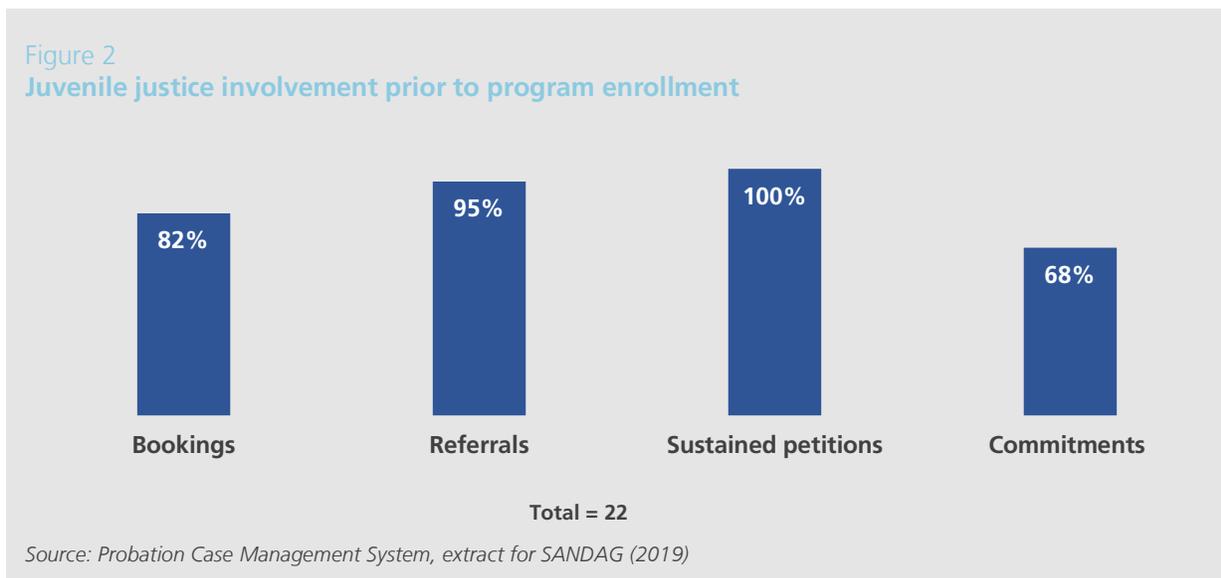


Source: Probation Case Management System, extract for SANDAG (2019)

Juvenile justice contacts prior to JDTC enrollment

As JDTC is often a response when a youth has not had success in other Probation programs,² it is not surprising the entire sample had prior juvenile justice involvement (Figure 2). The following describes the juvenile justice history for the sample of 22, this includes the instant offense to JDTC.

Figure 2
Juvenile justice involvement prior to program enrollment



Source: Probation Case Management System, extract for SANDAG (2019)

² See appendix for criteria for JDTC eligibility

Referrals to Probation: Ninety-five percent (95%) of participants had at least one prior referral³ to Probation, with each youth having 2.4 referrals on average (SD=1.9).

Bookings: Prior to JDTC, roughly 4 in 5 (82%) youth had at least one booking (with an average of 3 bookings; SD= 2.9). These bookings accounted for youth being detained an average (median) 55 days (range = 0 to 414 days).

Sustained Petitions: As the sample are all 602 wards of the court, the entire sample has had at least one sustained petition, and on average 2.1 (SD=1.3) sustained petitions. Sixty-four percent (64%) of the youth had a sustained petition for a felony charge before drug court, and the same proportion (64%) had a sustained petition for a misdemeanor charge.⁴ Thirty-six percent (36%) of the sample had drug/alcohol related sustained petitions before JDTC. It should be noted that having a sustained petition for a drug/alcohol related charge is not a JDTC eligibility requirement. Property crimes (50%) and violent crimes (41%) round out the top three charge categories for these sustained petitions.

Commitments: Before JDTC, 65% had at least one commitment with an average of 1.8 commitments per youth (SD=2.2).⁵ The top commitment types were administrative commitments (n=2 youths), Breaking Cycles (n=1 youth), STOP (n=1 youth), and overnight (n=1 youth).

Psychological and social characteristics

To learn more about the school and family histories of the youth, research staff reviewed the available (n=21) Social Studies (SS) completed by Probation Officers as part of the youths' first referral resulting in a sustained petition. The SS was written on average 10 months (SD=9 months) before entering JDTC, suggesting JDTC enrollment was a result of violating prior conditions of probation. The SS largely showed the sample of youth were entering the juvenile justice system with poor school attendance (81%), prior suspensions and/or expulsions (71%), and overall poor school performance (67%). In addition to school metrics, the SS indicated two out of five (43%) youth had at least one substantiated child welfare claim of abuse and a reported mental health diagnosis (38%). Only one in seven (14%) of the SS indicated parental history of substance abuse, which can be a predictor of youth substance use. Other measures showed nearly one in five (19%) youth had a gang affiliation, and two in five (38%) had a prior runaway incident.

Prior school engagement at a glance

- 81%
History of school attendance problems
- 71%
History of school suspension or expulsion
- 67%
History of poor school performance

³ Would anticipate this being 100%; however, this could indicate a change in PCMS ID if the youth had been on Probation more than once.

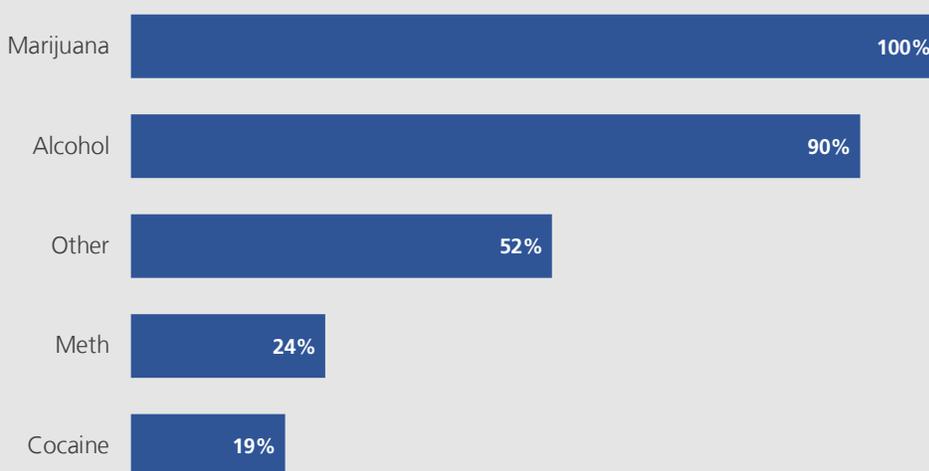
⁴ Youth may have multiple sustained petitions.

⁵ Data was only available for 20 of 22 sampled youth. The data above is based on the 20 youth with data.

Substance use history

As illicit substance use is a requirement for enrollment in JDTC, SANDAG used both self-reported substance use documented in the SS and drug tests obtained during JDTC participation to capture the chronicity of use. The SS included the self-disclosed use of alcohol, marijuana, meth, PCP, heroin, cocaine, and “other” drugs, and it included the self-reported age of first use. Not surprising for this cohort, everyone reported using at least one type of drug (100%), but also using three different types of drugs on average (mean= 2.9; $SD=1.2$). In addition, 100% (n=21) disclosed using marijuana. After marijuana, 90% reported alcohol use and around half (52%) reported “other” drug use (Figure 3). Of those youth reporting using “other” types of drugs, most reported Xanax and Acid (73% and 27% respectively). Lastly, almost one in four (24%) youth reported first using at 10 years old or younger, and the majority reported first use at 13 or 14 years old (62%).

Figure 3
Self-reported drug use before JDTC participation



Total = 21

Source: Probation Case Management System, extract for SANDAG (2019)

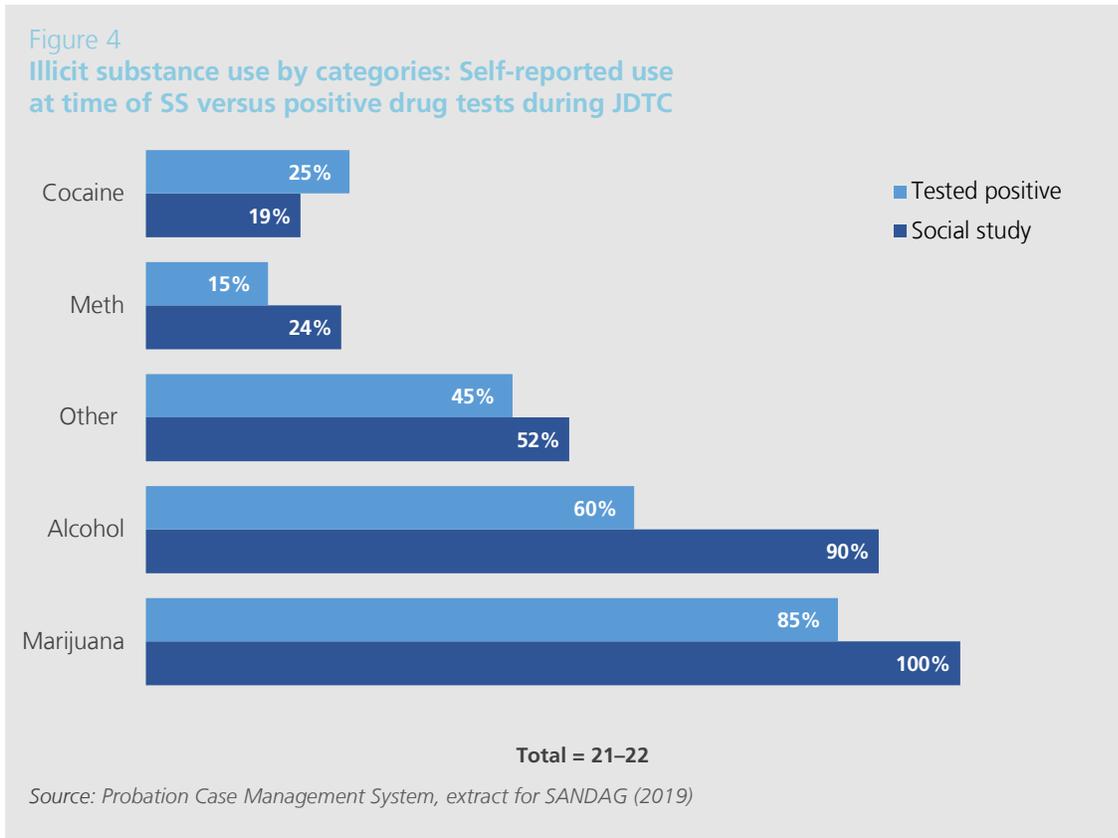
Note: Cases with missing information not included. Categories are not mutually exclusive.

Did youth substance use decrease during JDTC?

Drug test results during JDTC

Due to sealed case limitations, a reliable count of pre-JDTC drug tests was not available to be tracked over time. Specifically, drug tests available for analysis were only those which were completed by the JDTC program partner during the youth’s participation and documented in PCMS. Any drug tests administered while youth was in residential treatment (RTC) or outpatient treatment were not reliably documented in PCMS and therefore not included in the analysis for this report. For those youth with documented drug test information (n=20), each was tested on average (median) 47 times, with a range of 4 to 103 drug tests being administered to youth during JDTC participation. On average, each youth tested positive almost 3 times per 10 tests (mean=29%, $SD=25%$). There was one participant with 100% negative drug tests recorded during JDTC.

This study cannot infer if drug use decreased from before to during drug court. However, an unexpected observation was the similar directional trend between the drug tests administered during JDTC and the self-reported use documented in the SS. The value of this information is that it supports the reliability of this information in the SS, which is often conducted weeks or months before a youth is in treatment or the drug use is verified in JDTC.



Did JDTC treatment affect substance use?

As the quality and effectiveness of services has been shown to directly affect substance use outcomes for the youth, SANDAG reviewed PCMS notes to understand the treatment component of JDTC. However, limited information about treatment was available in the PCMS records, as treatment documentation was inconsistent depending on provider and treatment level. Therefore, the treatment dosage and type were not included in analysis. Treatment data directly held with the licensed treatment providers may contain the detailed notes if future research was warranted to understand treatment enrollment, curricula, engagement, and/or outcomes.

Who graduated successfully from drug court?

The JDTC cohort sample included 22 youth who exited from 7/1/18 to 3/31/19. This sample had 9 successful cases (41%) who graduated from JDTC and completed probation and 13 unsuccessful cases (59%) who were terminated from JDTC and remained on probation. Those who graduated successfully were in JDTC longer (average 432 days: \underline{SD} =131 versus 319 days: \underline{SD} =263); had more JDTC hearings (average 45 hearings: \underline{SD} = 17 versus 16 hearings: \underline{SD} =15); had more consecutive sober days (average 207: SD = 68 versus 49: \underline{SD} =36); and had more JDTC points earned (average 231: \underline{SD} =51 versus 31: \underline{SD} =51) than those who were unsuccessful. These statistics are consistent with the benchmarks for success with those who meet the 230 point and/or 90 sober day thresholds successfully graduate (Figure 5).

To supplement the court documentation, SANDAG performed statistical analyses to compare those who successfully completed JDTC and those who were terminated. The following analysis is limited by the small sample size; therefore, these results are not meant to be interpreted as a causal relationship with the outcomes, but correlations.⁶

Gender

While gender was not statistically significant in determining graduation, more females graduated successfully than male JDTC participants (67% successful female youth versus 31% successful male youth).

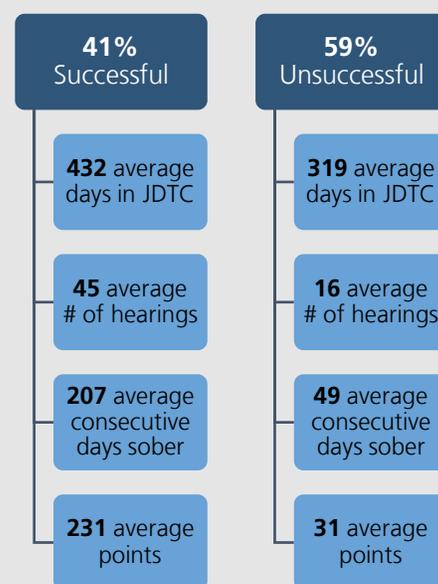
Testing positive for certain illicit substances

Analysis of the type of drug a youth tested positive for during participation was found to be associated with program success status, with those testing positive for “other” drugs (i.e., cocaine and “other” drugs) less likely to graduate successfully. Specifically, all five youth (100%) who tested positive for cocaine during JDTC and seven youth who tested positive for “other” substances did not graduate successfully.⁷ Positive drug test for marijuana and alcohol were not related to program success.

What is successful graduation?

The exit status (successful graduation or unsuccessful termination) was provided by Probation. Successful graduation occurred after meeting the benchmarks for sobriety (minimum 90 days) and JDTC points earned (230 points). Unsuccessful termination occurred when those benchmarks were not met, youth were AWOL from the program, or the JDTC committed the youth to another Probation program.

Figure 5
JDTC participation by exit status



⁶ Predictive statistics were not utilized due to the small sample size.

⁷ Significant chi-square ($p < .05$)

Prior booking days

Youth who graduated successfully had fewer booking days during all stages of JDTC overall and on average (before, during, and after) than those terminated. Prior JDTC booking days were significantly different between graduation groups with those who successfully graduated spending an average (median) of 19 days (range = 0 to 196) detained compared to 92 days detained (range = 0 to 414) for those who were terminated.⁸

Prior felony sustained petition

Having a felony sustained petition before drug court was significantly related to successful graduation. Less than one-third (29%) of youth who successfully graduated had a prior felony sustained petition compared to 92% of terminated youth having at least one.⁹

Factors related to successful graduation

- *Being female*
- *No "other" drug use or cocaine use*
- *Few prior booking days before enrollment*
- *No prior felony sustained petitions*

What was the juvenile recidivism rate during the program and six-months following JDTC discharge?

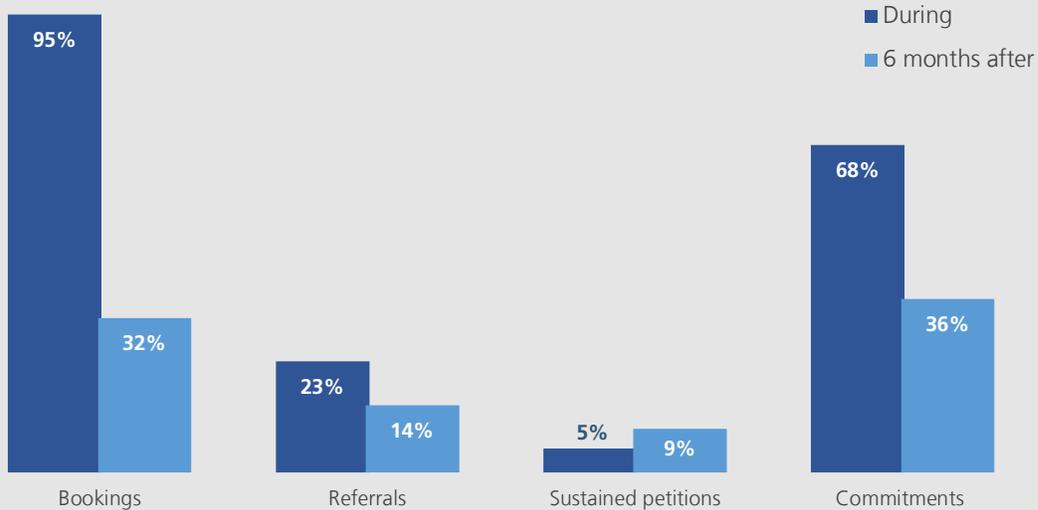
To answer the second main research question: What was the juvenile recidivism during JDTC participation and six-months following JDTC discharge? SANDAG reviewed probation referrals, sustained petitions, commitments and bookings for each youth during JDTC and within 6 months after JDTC exit. It is important to note over one-third of the sample youth (36% or 8 youth) turned 18 years old during the six-month recidivism time frame. As adult criminal data was not accessed for this study, it is unknown if any of these 18-year olds had a new adult arrests, jail booking, or guilty charge in the six months after JDTC. This reduced post-sample size further limited the types of recidivism analysis that could be conducted. Thus, descriptive analysis of contact (i.e., referral, booking, sustained petition, and/or commitment) with the system during and post are presented; however, any statistical analysis for significance was limited and therefore recidivism was examined for the entire study period (during and six-months post).

A review of recidivism during and six-months after JDTC participation showed most youth continued to have contact while involved in JDTC, and that this contact decreased post-JDTC (Figure 6). However, as noted above because over a third of the sample turned 18, post-JDTC analysis does not provide a complete picture of recidivism and it is possible more youth did recidivate than is documented in this study. What is of importance to note is the large percentage of youth whose treatment was disrupted while being detained during participation, which is likely a reflection of the sanction component of JDTC.

⁸ Significant t-test ($p < .05$)

⁹ Significant chi-square ($p < .05$)

Figure 6
 There was a slight decline in bookings, referrals, and commitments from JDTC enrollment to 6 months post-JDTC



Total = 22

Source: Probation Case Management System, extract for SANDAG (2019)

When recidivism was examined (during program participation and 6-months post), the majority of youth enrolled in JDTC had a recidivism incident either as a consequence of their participation in JDTC, or as a result of a new offense. Specifically, over one-third (36%) of youth had a new **referral** during and/or after JDTC. For those eight youth with new referrals, each averaged a little more than one referral (mean=1.4; $SD=0.5$). Because detention is used as a JDTC sanction, not every booking was due to a new charge, with the Court sentencing youth to Juvenile Hall as a sanction. As a result, almost all (96%) youth had a **booking** during JDTC and about one-third (32%) had one after participation. On average each youth had 3.6 bookings ($SD=2.8$ bookings), resulting in an average of 107 days detained ($SD=97$ days). Over one-in-ten youth (14%) had a **sustained petition** for a new referral during and/or after JDTC. For the three youth who had a sustained petition during and/or after, two were for felony level charges and one was a misdemeanor. These sustained petitions were for a property crime (n=1), a violent crime (n=1), and an “other” crime (n=1). Almost 9 in 10 (86%) had a **commitment** during and/or after JDTC. On average these youth (n=19) had three commitments during and/or after JDTC ($SD=1.8$). Thirty-seven percent (37%) of these 19 youth had a “Drug Court Commitment,” 21% committed to a “Weekend Commitment”, and 16% had an “Overnight Commitment”.¹⁰

¹⁰ Commitment types were provided directly from the PCMS extraction. SANDAG did not receive supplemental information to provide narrative for the differences in commitment types.

As noted earlier in the report, analysis was limited by the small sample size and the data available in the case files. To provide some insights into what factors might be related to recidivism, research on what is known to be predictive of recidivism guided the analysis plan and what background characteristics were selected to test for any association with recidivism. These factors included:

- Ethnicity/race;
- Gender;
- Criminal justice history (i.e., prior referrals, sustained petitions)
- Using marijuana, meth, cocaine or alcohol (i.e., substance use);
- Having prior school attendance problems, suspensions or expulsions;
- Having a prior mental health diagnosis;
- Having a prior substantiated child welfare claim;
- Having prior gang membership;
- Exit status (successful versus terminated); and
- Having prior juvenile justice history (of felony sustained petitions, prior commitments, prior bookings, and prior referrals).

Factors related to recidivism during and/or after JDTC participation

- *Male participants from JDTC were more likely to have a new probation referral*
- *Youth terminated from JDTC were more likely to have a new probation referral*
- *Youth who reported using "other" types of drugs were more likely to have a new commitment*

Of all these factors, prior use of "other" illicit substances, being male, and unsuccessful discharge were found to be significantly related to having further involvement with the juvenile justice system either during and/or six-months post JDTC.¹¹ Specifically, all youth (100%) who used "other" types of drugs (as self-reported in the SS) had a new commitment during and/or after JDTC compared to just 70% of those youth who did not reporting using "other" illicit drugs. As for gender, half (50%) of the males had a new probation referral during and/or after JDTC compared to none (0%) of the females having one during this same time period. Lastly, program exit status was significantly related to the likelihood of receiving a new probation referral during and/or after JDTC involvement. Just over one in ten (11%) successful JDTC graduates had a referral during and/or after JDTC, compared to over one-half (54%) of those participants who did not graduate successfully.¹² This association between exit status and recidivism was not associated with detentions (e.g., bookings), sustained petitions, and/or commitments both during and after JDTC.

¹¹ Both gender and "other" illicit drug use significant chi-square ($p < .05$).

¹² Significant chi-square ($p < .05$)

Summary

As part of the Juvenile Justice Task Force's annual review of Juvenile Justice Crime Prevention (JJCPA) funded programming, SANDAG was asked to provide a more intensive examination of JDTC. SANDAG reviewed all (n=22) youth who exited JDTC between 7/1/18 to 3/31/19 to increase the understanding of JDTC process and outcomes. The sample of youth were primarily male, non-white, and had a history of prior contacts with the juvenile justice system. All youth had used marijuana, alcohol, and a smaller portion of youth had also used "other" illicit drugs before enrollment (n=11). The youth either successfully graduated from drug court or were terminated. Successful graduates had on average more days enrolled, more drug court sessions, longer periods of sobriety, and more drug court points than those who were unsuccessfully terminated. In addition, those who successfully graduated were more likely to be female, not use "other" drugs, not have a prior felony sustained petition, and not have as many days booked before JDTC when compared to those who were unsuccessfully terminated. Analysis showed that overall, regardless of exit status, the youth involved in JDTC continued to have ongoing contacts with the juvenile justice system (i.e., detentions, sustain petitions, and/or commitments) both during and/or 6 months after JDTC. Ongoing juvenile justice contacts were related to the youth's gender and use of "other" illicit substances.

Lessons learned

While the sample size for this deeper review of JDTC was small, it did raise questions about the current JDTC's implementation efficaciousness and its adherence to national best practices. As background, research acknowledges the unique challenges associated with youth and substance misuse. The underdeveloped frontal lobe, the transition from parental to peer influence, and a tendency to not view substance use as harmful all contribute to increased risk of use during these teenage years (SAMHSA, 2019). This risk is even greater for youth who are more vulnerable (e.g. youth with mental health diagnosis, homeless youth, questioning youth, youth in the juvenile justice system, and youth with ADHD) as they may use substances in response to these added challenges. Understanding the complexity of adolescent substance misuse is imperative when assessing associated interventions, as well as all the factors contributing to it. This understanding provides the backdrop for the following lessons learned.

- One of the purposes of JDTC is to provide coordinated care to increase access to treatment and services for youth and families in order to reduce continued contact with the justice system. Unfortunately, because of data limitations this study was not able to measure the quality of coordination. However, the review of the available JDTC cases showed that almost all (95%) youth continued to be detained or receive new commitments while in JDTC. This frequency of contact could pose a barrier to continuity of care if the removal of a youth from his/her community interrupts his/her involvement in treatment. This is an area in need of further discussion to determine which action, sanctions or treatment, is of more value to the youth and families.
- Given the youth's continued involvement in the juvenile justice system, and the finding that nearly six out of ten (57%) were terminated unsuccessfully, a review of the implementation of the model and the fidelity to the JDTC model is suggested. Specifically, research on JDTC has shown it to be most effective when JDTC models include the following elements:

- Embraces a strength-based approach rather than a punitive one in the court process (Salvatore et al., 2010);¹³
 - Is coupled with evidence-based substance use or mental health treatment, such as Multi-systemic Therapy or other substance use treatments shown to be effective and implemented with fidelity (Henggeler, 2007)¹⁴ (Ives et al., 2010);¹⁵
 - Has a strong family treatment component to address parental influences and assure they are part of the youth treatment plan (e.g., appearances at court, parent groups) (Salvatore et al., 2010);¹⁶
 - Demonstrates awareness of and preparation for its JDTC team to respond to the cultural differences between them and the families they serve in a culturally responsive manner including, but not limited to implicit bias and cultural sensitivity training, linguistically appropriate, culturally competent assessments and treatment options (OJJDP, 2016);¹⁷ and
 - Addresses the issue of negative peer influences and works to limit those interactions; (Schaeffer, et al., 2010).¹⁸
- The data show that those youth testing positive for cocaine or “other” drugs were significantly less likely to graduate successfully compared to those only using marijuana and/or alcohol and were more likely to have juvenile justice system contacts. This result is inconsistent with national research that found JDTC to be more suited for youth who are moderate or higher risk of recidivism and have more serious substance use issues (OJJDP, 2016).¹⁹ This contradiction of findings supports further review into the protocol for engaging and treating these high-risk youth and the type of substance use disorder treatment they are receiving.
 - Because youth who only tested positive for alcohol and marijuana graduated successfully from JDTC, it raises the question if these youth may be more appropriate for a lower-level intervention that does not place them under the high level of supervision, but still provides them with the needed assessments and treatment.

¹³ Salvatore, C., Henderson, J., Hiller, M., White, E., & Samuelson, B (2010). *An Observational Study of Team Meetings and Status Hearings in a Juvenile Drug Court. Drug Courts as Compared to Adolescent Outpatient Treatment*. Drug Court Review 7 (1), 95-124.

¹⁴ Henggeler, S. (2007). *Juvenile Drug Courts Emerging Outcomes and Key Issues*. Current Opinion in Psychiatry 20:242-246.

¹⁵ Ives M., Chan, Y., Modisette, K., & Dennis, M. (2010). *Characteristics, Needs, Services, and Outcomes of Youths in Juvenile Treatment Drug Courts as Compared to Adolescent Outpatient Treatment*. Drug Court Review 7 (1), 10-57.

¹⁶ Salvatore, C. et., al., (2010). *An Observational Study of Team Meetings and Status Hearings in a Juvenile Drug Court. Drug Courts as Compared to Adolescent Outpatient Treatment*. Drug Court Review 7 (1), 95-124.

¹⁷ Office of Juvenile Justice Delinquency Program. December 2016. *Juvenile Court Drug Treatment Guidelines*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.

¹⁸ Schaeffer, C., Henggeler, S., Chapman, J., Halliday-Boykins, C., Cunningham, P., Randall, J., & Shapiro, S (2010). *Mechanisms of Effectiveness in Juvenile Drug Court: Altering Risk Processes Associated with Delinquency and Substance Abuse*. Drug Court Review 7 (1), 57-94.

¹⁹ Office of Juvenile Justice Delinquency Program. December 2016. *Juvenile Court Drug Treatment Guidelines*. Washington, DC: U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention.

- The JDTC process was often difficult to follow linearly via the court notes, screening information, and outcomes. However, conversations and follow-up questions with JDTC team members and Probation staff greatly informed the evaluation team on drug court protocol. This suggests a more formal tracking system would be valuable to easily monitor fidelity and program outcomes.
- For future JJCPA drilldowns, evaluation staff and the Probation Business Intelligence unit are looking to other data collection processes and protocols to proactively access all sealed paper and electronic records. Also, data limitations affected different record collection such as substance use treatment efficacy. Third-party data requests should be utilized to supplement PCMS data. Limitations from this study (e.g. no adult justice data, no control group, and small census) should be considered when planning future program studies.
- As noted in the official U.S. Department of Justice, Office of Juvenile Justice and Delinquency Prevention JDTC guidelines,²⁰ fidelity to the 16 guiding principles of JDTC is important for overall success of the court; therefore, another future study may be analyzing fidelity with neutral observers and subject matter experts.

²⁰ <https://ojjdp.ojp.gov/programs/juvenile-drug-treatment-court-guidelines>

Appendix A: Juvenile Drug Court Phase Point Worksheet

Date: _____

San Diego Juvenile Drug Court

Phase Point Worksheet

NAME: _____

Phase: _____

CLEAN DATE: _____

CLEAN DAYS _____

PHASE POINTS _____

Clean and Sober _____
 Treatment Attendance _____
 School Attendance _____
 Home Report _____
 Bonus Points _____

NEW PHASE POINT TOTAL: _____

POINT LEGEND			
Phase I	Phase II	Phase III	Phase IV
Clean Test – 3 pts	Clean Test – 3 pts	Clean Test – 3 pts	Clean Test – 3 pts
Treatment – 2 pts.	Treatment – 2 pts.	Treatment – 2 pts.	Treatment – 2 pts.
School – 2 pts.	School – 2 pts.	School – 2 pts.	School – 2 pts.
Home – 1 pt.	Home – 1 pt.	Home – 1 pt.	Home – 1 pt.
BONUS POINTS			
Drug Court Attendance by a Parent/Family Member = 1 pt.		Treatment Attendance by a Parent/Family Member = 1 pt.	

Appendix B: Juvenile Drug Court Eligibility Guidelines

JUVENILE DRUG COURT

Eligibility Guidelines

- 1) WIC 602 wards between the ages of 15 and 17.9 who will have court ordered substance abuse conditions of probation. *Wards outside the noted age range will be considered on a case by case basis.*
- 2) Non-violent offender. A ward with a history of violence may be considered for admittance; however, the Drug Court may first order a psychological evaluation to address the issue of violence.
- 3) A minor who has substance abuse issues as evidenced by positive test(s), failure to attend treatment, unsuccessful termination from, or lack of progress in, treatment or SAS Track 2.¹
- 4) No documentation as a gang member. Past gang affiliation without documentation is considered on a case by case basis. However, if accepted, gang conditions are to be stipulated to by all parties.
- 5) Placement in a home or residential setting that is within reasonable transportation distance to counseling/treatment sites.
- 6) No history of arson. Exceptions may be made, contingent upon the results of a psychological evaluation that specifically addresses fire-setting risk.
- 7) No drug dealers if primary motive is monetary gain rather than the minor supporting his/her own drug habit/addiction.
- 8) 120 available custody days. *Wards with less custody days will be considered on a case by case basis.*

Screening Process:

A minor is referred for a Drug Court Screening Hearing by court order. Screening hearings are held on Tuesdays at 1:30 p.m. in Department 8. The Screening Hearing date should be calendared approximately two weeks in advance to allow sufficient time for the Drug Court team to receive and review the case materials prior to the hearing.

Following the Screening Hearing, the Drug Court Officer will forward the Court Summary with the screening determination to the supervision Probation Officer. If the minor has been accepted into Drug Court, the supervision Probation Officer can then transfer the case file to the Drug Court unit at JPC (P-31), in accordance with JFS policy. If the minor is not accepted into Drug Court, he/she will be returned to the original calendar department for further hearing.

¹ Substance Abuse Services (SAS) Track 2 requires participation in a treatment program, whereas SAS Track 1 does not. Positive tests while on Track 1 typically result in a referral to Track 2.

Revised 10/02/2015