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Effects of Family Treatment Drug Court on Reunification of Families Involved with Child Protection

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EFFECTS OF FAMILY TREATMENT DRUG COURT ON
REUNIFICATION OF FAMILIES INVOLVED WITH CHILD PROTECTION

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A Capstone Project submitted in partial fulfillment of the

requirements for the Master of Science Degree in

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CERTIFICATE OF APPROVAL

CAPSTONE PROJECT

Effects of Family Treatment Drug Court on
Reunification of Families Involved with Child Protection

This is to certify that the Capstone Project of

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Has been approved by the faculty advisor and the CE 695 – Capstone Project

Course Instructor in partial fulfillment of the requirements for the

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Abstract

It is estimated 75% of families involved with child protection whose children are removed from the home due to safety or neglect concerns are experiencing substance abuse issues (Young, Gardner, & Dennis, 1998; Brook & McDonald, 2009). In the absence of egregious harm, family reunification is the primary goal of the judicial system and child protection agency. Parents who struggle with substance use often require professional treatment and are more likely be reunified with their children upon successful completion of recommended treatment.

Family treatment drug court is a relatively new model, based on the drug court model used to address substance use for adult criminal offenders. Family treatment drug court model provides frequent drug and alcohol testing, supervised visitation with children, regular court hearings, case management, and substance abuse treatment (Cosden & Koch, 2015). With intensive, coordinated services provided in a timely manner, families are provided with interventions and supports necessary to increase the likelihood of reunification.

Keywords: Family Treatment Drug Court, Substance Use, Children, Families, Reunification, Child Protection

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Introduction

Families who are involved with child protection experience various challenges and difficulties. It is estimated 75% of families involved with child protection whose children are removed from the home due to safety or neglect concerns are experiencing substance abuse issues (Young, Gardner, & Dennis, 1998; Brook & McDonald, 2009). Furthermore, nearly one million children spend time in foster care annually (Glisson, Bailey, & Post, 2000). Family reunification is the most common goal for children placed outside of their home (U.S. Department of Health and Human Services, 2017). Parents who complete treatment for substance abuse are significantly more likely to be reunified with their children than parents who fail to complete treatment (Rockhill, Green, & Furrer, 2007). Family treatment drug courts are becoming a popular resource in serving families involved with child protection; however, due to their recent development, research and evidence base is minimal at this time (Bruns, Pullmann, Weathers, Wirschem, & Murphy, 2012).

Drug court programs have become a focus of recent research; they are promising but understudied (Marlowe, DeMatteo, & Festinger, 2003). Family treatment drug court advocates have relied heavily on research related to adult drug courts, as they have been studied extensively (Bruns et al., 2012). As outcome data becomes available through the continued use of family treatment drug courts, additional studies should be conducted to expand the research base specific to family treatment drug courts (Bruns et al., 2012). Further research is necessary to determine the effects of utilizing family treatment drug court on reunification of families involved with child protection. Based on a review of related research evidence, it is hypothesized further examination into the use of family treatment drug courts will conclude increased rates of successful reunification for families involved with child protection.

Review of Literature

The purpose of this text is to review existing research relevant to family treatment drug courts, families involved with child protection, substance use issues by caregivers, children placed out of the home, and the reunification of families involved with child protection. Research related to the effects of family treatment drug court on reunification efforts will also be discussed.

Family Treatment Drug Court

The development of family treatment drug courts centered around the adult drug court model (Cannavo, 2011). Adult drug courts have gained popularity in recent years, as criminal offenders with substance abuse issues who successfully complete drug court have decreased recidivism rates and higher rates of sobriety compared with criminal offenders with substance abuse issues who do not complete drug court (Mitchell, Wilson, Eggers, & MacKenzie, 2012). Family treatment drug courts aim to address substance abuse problems in relation to parental neglect or other safety concerns. Specialized courts are designed to help children who are victims of abuse or neglect through addressing parental substance abuse (Choi, 2012). According to Worcel, Furrer, Green, Burrus, and Finigan (2008, p. 428), “Family treatment drug courts aim to use a non-adversarial judicial setting in which parents receive clear messages about what they need to do in order to be successfully reunified with their children.” Court hearings are held frequently, often weekly, to provide judicial, child protection, and support service staff timely updates and parents timely feedback.

Family treatment drug courts vary in programming, although most utilize a team-based approach to provide wrap around services to a family involved with child protection. Specific

components of family treatment drug courts include frequent drug and alcohol testing, supervised visitation with children, regular court hearings, case management, and substance abuse treatment (Cosden & Koch, 2015). Additional interventions of family treatment drug courts include parenting education, skill building, and mental health services.

Family treatment drug courts encourage parents with substance use issues to engage in treatment and to remain in treatment while they obtain sobriety and work toward safe parenting outcomes (Choi, 2012). Participation in family treatment drug court varies from mandated, to voluntary, to application based (Edwards & Ray, 2005). The motivation for parents to participate in family treatment drug courts is family reunification. As court hearings occur regularly, with a higher frequency compared to traditional juvenile court settings, judges have more knowledge and can make better decisions regarding families involved with child protection (Green, Furrer, Worcel, Burrus, & Finigan, 2007).

Families Involved with Child Protection

For this text, focus is placed on families who are involved with child protection from whom children have been removed. Families involved with child protection, whose children have been placed outside of the home, often face multiple barriers to reunification (Rockhill et al., 2007). Whether one or more parents are present in the home, when safety concerns are present, those concerns must be addressed for reunification to occur. Safety concerns for children that lead to involvement of child protection and removal from the home include neglect of basic needs, physical abuse, emotional abuse, sexual abuse, or medical neglect (Katz, Courtney, & Novotny, 2016). Families involved with child protection who struggle with substance use issues

have an increased likelihood of neglecting their child or children's basic needs and have diminished parenting skills (Marsh, Ryan, Choi, & Testa, 2006).

Parents with Substance Use Issues

In the United States, parents struggling with substance use issues is a growing problem (Gregoire & Schultz, 2001). Additionally, substance use issues often coexist with other barriers, including mental health symptoms, domestic violence relationships, or housing challenges (Marsh et al., 2006).

Edwards and Ray (2005) explain:

Substance abuse includes abuse of street drugs, prescription drugs, over-the-counter drugs, or alcohol. Usually it is substance abuse that leads to neglect of the child, although on occasion it leads to harm of the child as, for instance, when drugs are sold in the child's home, when the fetus is exposed to drugs during pregnancy, or when the child accidentally ingests drugs. (p. 2)

Young, Boles, and Otero (2007, p. 146) state, "Substance abuse by parents is not the only problem that leads to child abuse and neglect, but ... it is a very significant problem." The need for treatment aimed at supporting parental success and family reunification is evident. Families involved with child protection, with at least one parent who is struggling with substance use issues, are significantly less likely to achieve reunification (Brook et al., 2009). When reunification occurs with at least one parent who is struggling with substance use issues, there is also a greater likelihood of a subsequent removal of a child or children from the home.

Children Placed Out of the Home

Children placed out of the home have higher developmental, educational, medical, and mental health needs in comparison to children not placed out of the home (Committee on Early Childhood, Adoption and Dependent Care, 2000). Children placed out of the home due to parental substance abuse have often experienced neglect of their basic needs, physical abuse, family dysfunction, exposure to domestic violence, or exposure to substance abuse; these adversities and stressors put these children at higher risk of experiencing developmental delays or mental health issues (Council on Foster Care, Adoption, and Kinship Care, Committee on Adolescence, & Council on Early Childhood, 2015). Children whose families successfully complete family drug courts spend less time in foster care than children whose families do not participate in family drug courts; these children are more likely to reunify with their families (Lloyd, 2015).

Reunification of Families

When it can be done safely, reunification is the most common and achieved goal for children placed outside of the home (U.S. Department of Health and Human Services, 2011). For reunification to occur, families must address the safety concerns that led to a child or children's initial removal. Case management and court oversight are provided to families as they address concerns related to child safety. The most common barrier to reunification is parental substance use, followed by child behavioral issues, parent or child mental health issues, and parents' lack of cooperation with case management and case planning.

U.S. Department of Health and Human services (2015) found 51% of children exiting foster care were reunified with their families. While this is the leading outcome, almost half of all children exiting foster care are not reunified with their families.

Related Research on the Effects of Family Treatment Drug Court on Reunification

Although research is not extensive, there have been studies on the effects of family treatment drug court on child welfare outcomes, including length of out of home placement of children, types of permanency outcomes, parents' success rates with their respective programs, and successful reunification. Green et al. (2007, p. 56) determined, "Participants in family treatment drug courts entered treatment more quickly, stayed in treatment longer, and were more likely to successfully complete treatment...more likely to be reunified with their children." Green et al. (2007) called for more research on post-reunification services for families and more studies focused on why family treatment drug courts are successful.

Worcel et al. (2008) concluded family treatment drug court participants were more likely to enter treatment, stay in treatment, spend more time in treatment, and complete treatment than non-participants. These results were consistent with conclusions of previous, similar studies. Bruns et al. (2012) found family treatment drug court participants were much more likely to enter treatment quickly, remain in treatment longer, and successfully complete treatment. Child welfare outcomes were also positive: children spent less time out of the home and were more likely to be returned to their parents' care. These findings support external validity and generalizability, as they are consistent with previous, similar study outcomes.

Child & McIntyre (2015, p. 84) stated, "It is likely that substance abuse treatment and other support services are yielding improvements that enable clients to better comply with other

court requirements—which, in turn, predict reunification.” They reported improved reunification rates upon parents’ successful completion of family treatment drug court. Child & McIntyre (2015) suggested more rigorous research studies in the future to determine what specific services included within family treatment drug courts are creating positive outcomes.

According to Cosden and Koch (2015), participants who successfully complete family treatment drug court have a 62% reunification success rate. Cosden and Koch (2015) suggest additional studies to explore other factors associated with reunification, including psychosocial problems.

Research related to the effects of family treatment drug court has occurred, although it is sparse (Gifford, Eldred, Vernerey, & Sloan, 2014). Studies on the effects of utilizing family treatment drug courts indicate specific patterns: the length of time children spend in foster care is decreased, reunification was more likely, families were less likely to have subsequent child protection involvement leading to removal, and the number of parental rights terminations decreased.

Discussion

Family treatment drug court is becoming increasingly popular in the United States (Bruns et al., 2012). A review of related research on the effectiveness of family treatment drug courts on reunification results in positive findings, suggesting family treatment drug court is an appropriate intervention for families involved with child protection. Parents who struggle with substance use issues have a decreased capacity to parent safely (Child Welfare Information Gateway, 2014). Family treatment drug court offers an opportunity for system collaboration between the judicial system, child welfare staff, and service providers. The model provides a path to quickly identify the needs of each family member, provide more timely services and feedback during out-of-home placements, and support families in their efforts to address safety concerns (Child Welfare Information Gateway, 2014).

Due to the recent emergence of family treatment drug court, ongoing research and additional studies are necessary to illuminate the potential for positive impacts. Treatment for substance use issues varies, as people need different types of supports and services to achieve successful outcomes; therefore, continued exploration into a successful family treatment drug court model will be beneficial. Additionally, research on post-reunification circumstances and service provision will be beneficial to understand the long-term success of families upon completing family treatment drug court.

Author's Note

As a child protection worker who sees parents struggling with substance use disorders daily, this topic is important to me on a personal and professional basis. I serve families who have their children removed for safety reasons and I see the strong desire of many parents and children to have successful reunification. Unfortunately, in Winona County, it is very rare for parents who struggle with substance use to be successful in regaining custody of their children. I feel a sense of responsibility and urgency to identify alternative interventions that may increase my clients' abilities to successfully reunify with their children.

As I have been reviewing this research throughout my courses at Winona State University, Winona County has concurrently considered implementing family treatment drug court as a new system approach. This has been an exciting discussion to be a part of and be able to contribute toward. I was recently invited to participate in meetings and policy discussions aimed toward developing a family treatment drug court in Winona County. I look forward to anticipated improvements in our community response to substance use and the impact it is having on children and families.

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