PERSON-CENTERED STRATEGIES FOR TREATMENT COURT PRACTITIONERS

Center for Court Innovation

TLPI Workshop
October 27, 2021

OVERVIEW

- Context & Scope
- Applying person-centered strategies
  - ✓ Relational strategies
  - ✓ Programmatic strategies
- Polls, discussion, and Q&A

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WHO WE ARE:

Center for Court Innovation

The Center for Court Innovation works to achieve justice and equity; create safe, healthy, and thriving communities; and ultimately transform justice systems.

We do this in 3 ways:
- **Operating programs**
- **Research & Policy**
- **Technical assistance**

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CONTEXT & SCOPE

Person-centered practices, in relation to:

- drug court practices
- the overdose crisis
- equity and inclusion
- addressing trauma
- applying the evidence

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RECOMMENDATIONS

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RELATIONAL STRATEGIES shape the **therapeutic alliances** the court develops with its participants. Strong alliances lead to participants feeling valued, respected, and empowered by the court. These alliances are also needed to overcome the legal and medical mistrust that results from intergenerational mistreatment.

Strong alliances also promote open and honest conversations, necessary for proactive safety planning around overdose and other risks. Participants who feel judged, unheard, or fearful of punishment, are less likely to disclose the risks they may be facing, including those not specific to drug use.

RECOMMENDATIONS

PROGRAMMATIC STRATEGIES refer to the **formalized policies, protocols, and memorandas of understanding (MOUs)** that govern drug court and its partner agency practices. These have the potential to affect the quality of care, risk of overdose, and likelihood of future legal system involvement.

Treatment courts should review program documents to ensure all protocols are evidence-based with respect to reducing overdose risk and other harms.

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RELATIONAL STRATEGIES

TREATMENT PLANNING

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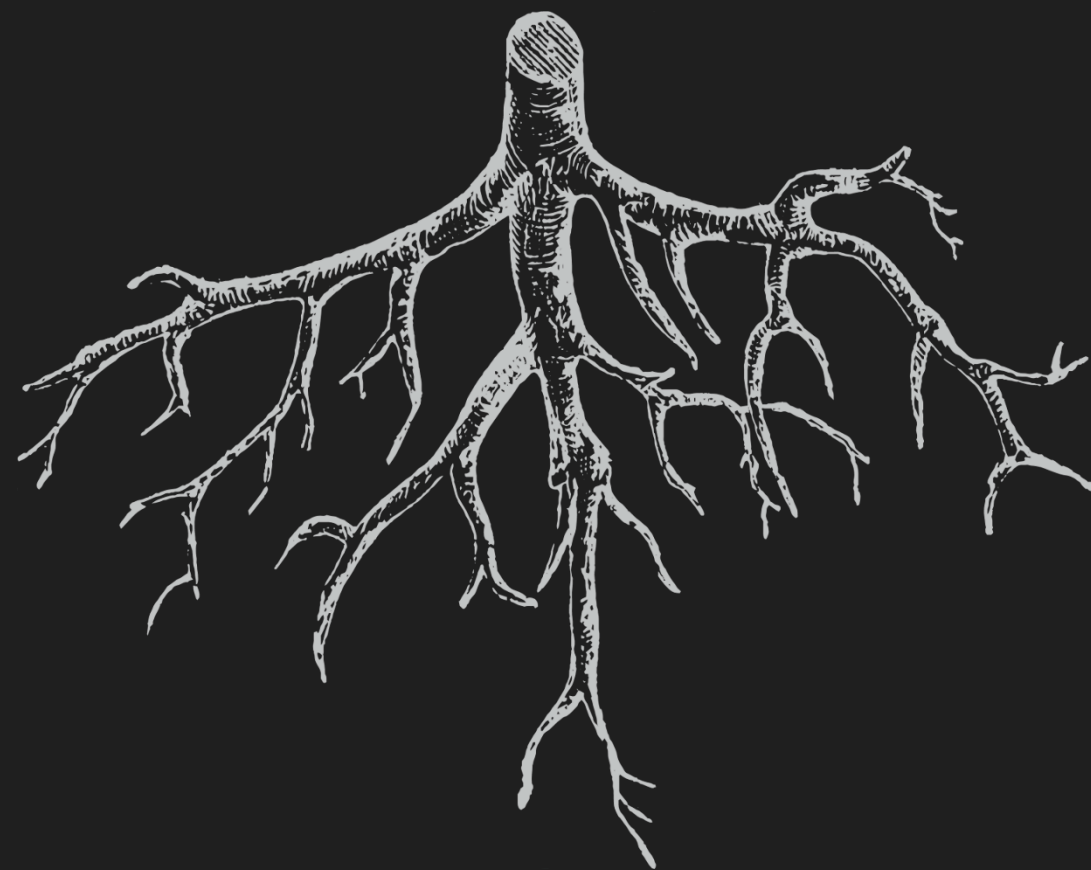
- Develop individualized treatment plans with meaningful participant input (i.e., agreed-upon treatment goals, level and type of care, and metrics of success)
- Ensure treatment plans are flexible and account for the non-linear nature of SUD recovery
- Consider overdose risk when setting the pace of treatment (i.e., too much, too soon, could increase risk)

TRAUMA-FOCUSED CARE

- Use scientific and non-judgmental language when referring to substance use, drug test results, or recovery achievements
- Recognize that "honesty" issues (e.g. deception, failure to disclose) are likely trauma responses
- Develop MOUs [memorandums of understanding] with partner agencies (treatment, housing, etc.) outlining expectations around trauma-informed care

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RESPONDING TO USE

- Provide supportive, non-judgmental, and clinical responses to recurrences of use
- Provide responses that are tailored to participants needs and situational risks and protective factors (e.g., not all instances warrant a change to the treatment plan)
- Avoid framing use in binary terms like good or bad, dirty or clean, sober or sick

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RACIAL EQUITY

- Provide team trainings on existing and historical racial disparities
- Examine court admission, retention, and graduation data through a racial equity lens
- Interrogate existing partner agency practices for cultural safety and responsivity
- Prioritize equitable access to key health determinants (housing, healthcare, employment) in a participant's treatment plan

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HEALTH EQUITY

- Recognize and center the participant's existing protective factors, skills, and survivorship
- Partner with low-barrier, non-abstinence-based, service providers (i.e., housing, vocational)
- Ensure that program compliance and progress is being measured relative to the quality and availability of services

PARTICIPANT VOICE

- Establish protocols to gather accurate and anonymous participant feedback (including from non-graduates)
- Monitor and evaluate the integration of feedback on practice and outcomes
- Establish a drug court advisory board that includes participants as well as a broad range of community members
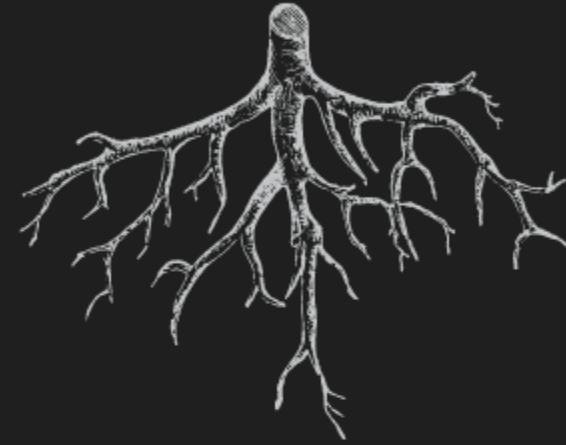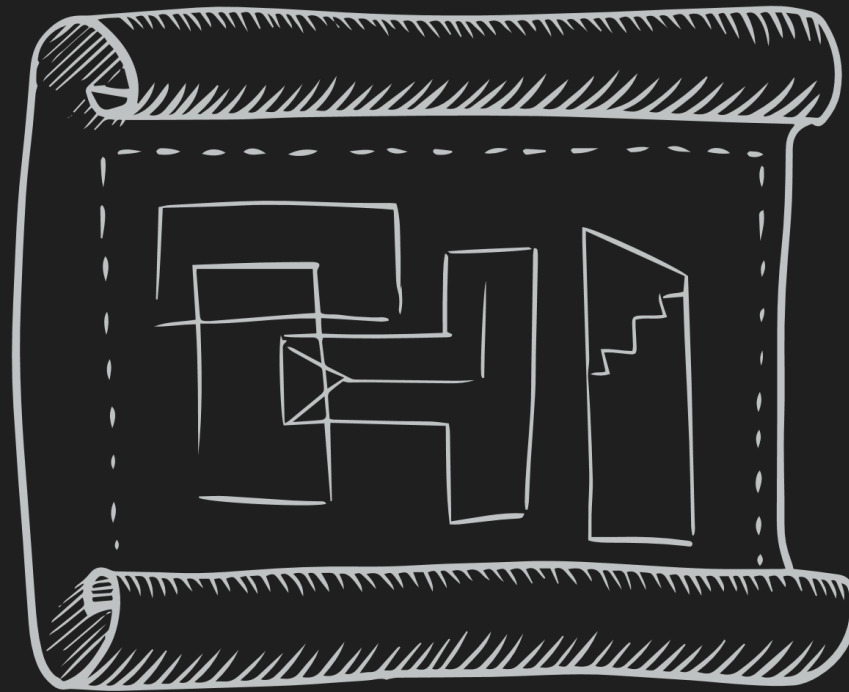
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PROGRAMMATIC STRATEGIES

USE OF JAIL

- Consider risks of incarceration (i.e., associated rates of post-release mortality, overdose, injection drug use-initiation, and suicidality) when using jail
- Examine the use of jail holds as sanction for substance use or program non-compliance
- End the use of jail holds to house participants waiting for treatment and identify therapeutic alternatives
- Collect and analyze data related to the use of jail and post-termination prison sentences

MEDICATIONS FOR OPIOID USE/MAT

- Ensure all three FDA-approved medications are equally accessible to people who want to use them
- Ensure a participant's use of MOUD/MAT is not impediment to enrollment, phase advancement, or graduation
- Partner with MOUD/MAT-affirming treatment and housing agencies
- Defer to healthcare professionals regarding dose and duration of care

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OVERDOSE PREVENTION

- Develop partnerships with local harm reduction organizations (e.g. to provide naloxone trainings)
- Implement naloxone training protocols and best practices for MOUD in justice settings for staff and participants
- Talk openly about safer using practices with participants (e.g., drug, set, setting, virus transmission)

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DRUG TESTING

- Identify and implement the less intrusive and more reliable drug testing practice available
- Measure progress holistically, limit reliance on test results
- Provide trainings on potential harms, incorporate voices of those with lived experience

FINES AND FEES

- Drug courts should not impose additional fees for program participation (including treatment)
- Admission, phase advancement, and program graduation should not be contingent on payment of fines and fees
- Drug courts should offer financial support in the form of money planning (i.e., budgeting, debt support, assistance with applying for government benefits)
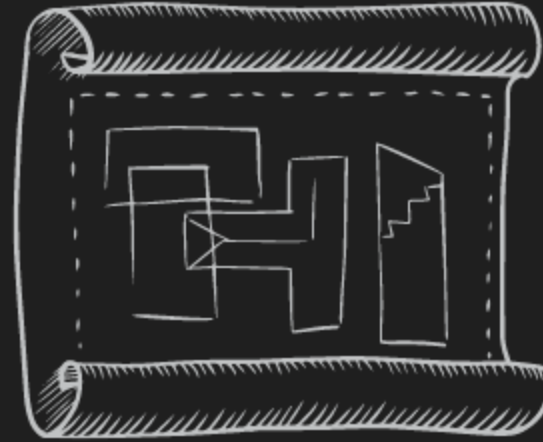
MEASURING SUCCESS

- Establish multiple pathways to program completion, including a non-abstinence tracks
- Review existing graduation criteria against drop-out and termination data
- Expand graduation criteria to include broader health/social outcomes

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PROGRAMMATIC STRATEGIES

- USE OF JAIL
- MEDICATIONS FOR OUD
- OVERDOSE PREVENTION
- DRUG TESTING
- FINES & FEES
- MEASURING SUCCESS

Q&A

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PERSON-CENTERED STRATEGIES

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THANK YOU!!

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