Providing Effective Family-Based Treatment Services for Justice Involved Individuals

Speakers

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Family-Centered Treatment

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http://womenandchildren.treatment.org/documents/Family_Treatment_Paper508V.pdf

History: The Relational Theory of Emotional Development & the Psychology of Women

- **1976 Jean Baker Miller - Identified women's strong drive for affiliation as being valuable and a strength upon which to build.**

- **Women's sense of self organized around making and maintaining affiliations.**

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Self-In-Relation Theory

- **Self In Relation-- Stresses emotional development through connections**
- **Connections fundamental to psychological growth and healing**
- **Healthy connections are growth enhancing**
- **Psychological problems stem from a disconnection or violation in relationships.**

Research on Women

- **The use of substances, the treatment experience and relapse are impacted by relationships, especially with children and significant others.**

- **For women there is a relationship between improved maternal functioning and their prognosis and the prognosis for the children.**

Women & Children's Programs Outcomes

Significant drops in substance use

Improved employability

Higher family reunification

Improved parenting

Less criminality

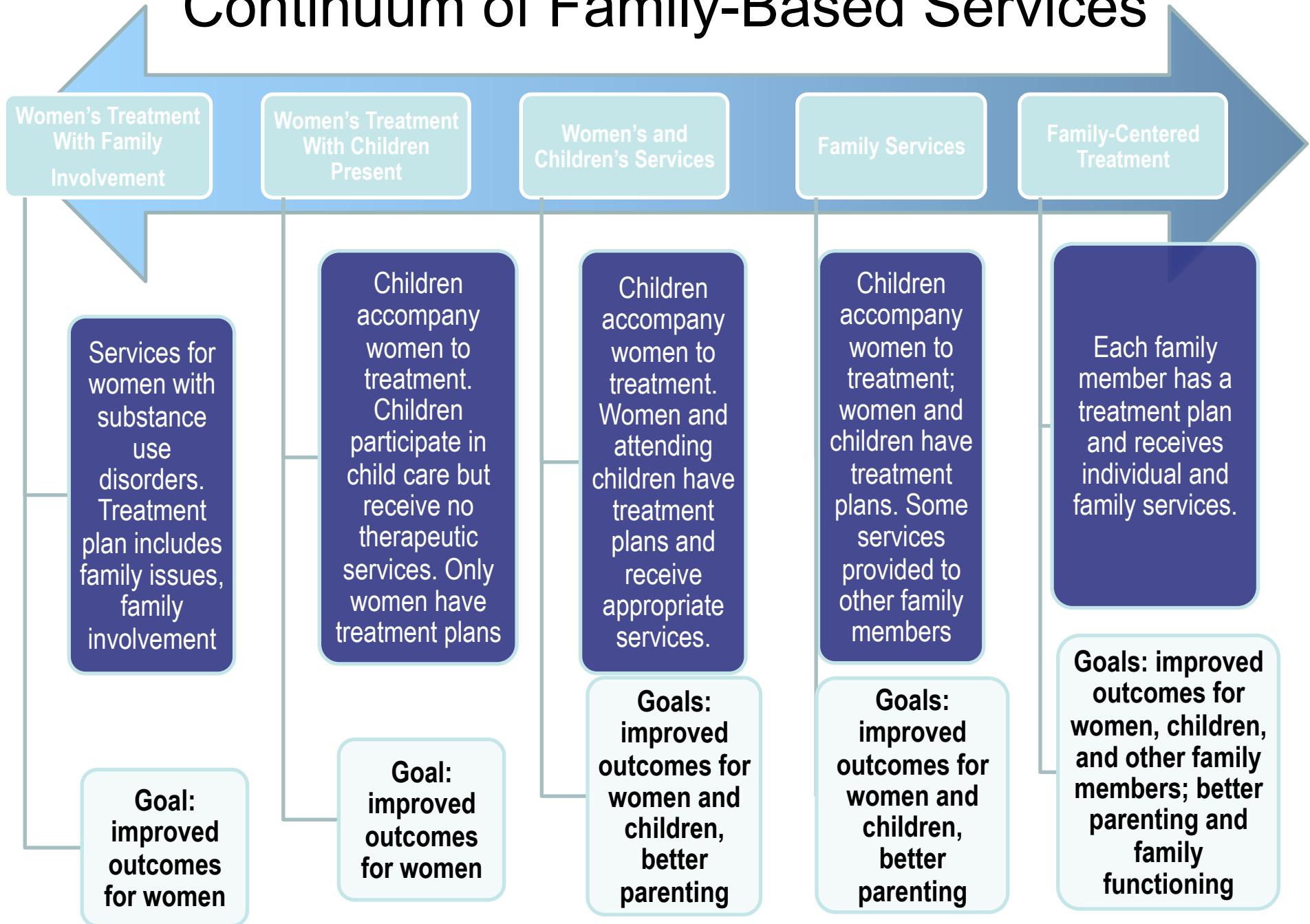Less psychological distress

Longer lengths of stay

Less depression

Higher self-esteem of mothers

Improved scores on measures of parental stress

Improved emotional and behavioral functioning for children

Improved parenting attitudes

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Continuum of Family-Based Services

Women's Treatment With Family Involvement	Women's Treatment With Children Present	Women's and Children's Services	Family Services	Family-Centered Treatment

Services for women with substance use disorders. Treatment plan includes family issues, family involvement

Children accompany women to treatment. Children participate in child care but receive no therapeutic services. Only women have treatment plans

Children accompany women to treatment. Women and attending children have treatment plans and receive appropriate services.

Children accompany women to treatment; women and children have treatment plans. Some services provided to other family members

Each family member has a treatment plan and receives individual and family services.

Goal: improved outcomes for women

Goal: improved outcomes for women

Goals: improved outcomes for women and children, better parenting

Goals: improved outcomes for women and children, better parenting

Goals: improved outcomes for women, children, and other family members; better parenting and family functioning

Making It Happen

- **Family-Centered models require an administrative willingness and capacity.**

- **Its not just adding additional components and providing staff training – necessary but not sufficient.**

- **It involves theoretical, administrative, policy, structural and funding changes.**

Making It Happen

- **Agencies that provide this model are more complex in their policies and procedures, staffing patterns, facilities, equipment, evaluation, and funding sources.**

- **It involves a multi-disciplinary team of both internal and external staff.**

- **Requires coordination across systems.**

Two Major Components

- **Philosophy**
  - **What is treatment?**
  - **What beliefs about human behavior and change that drives the interpersonal and organizational style (the culture of the agency)?**
  - **Who is the client?**

- **Services**
  - **What are we going to provide?**

Philosophy

- **What is treatment?**
  - **What are you treating?**
    - Focus on the substance and amount?
    - Focus on the neurobiology
    - Focus on the behavioral and its consequences?
    - Focus on social and psychological consequences?
    - Focus on social roles and relationships?
    - Focus on the etiology?
- **What is the context?**
  - **Gender**
  - **Culture**

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Philosophy:
What is the Theoretical Approach – What helps people change?

- **The methods used to interact with the people served, each other and the people in other systems.**

- **How are you going to "be" each other?**

- **Are the approaches trauma informed and co-occurring capable?**

Family Treatment Model Defining a Culture of Healing

- **Focus is not a "Tradition of Toughness" with a strict behavioral model**
- **Not a focus on rules, control, consequences**
- **The client is not seen as the problem when a difficulty occurs**

- **Culture of compassion**
- **Not Control but collaboration**
- **It's a partnership – when there's difficulties it's a team problem**

Family Treatment Model
The Culture

- **Problems / Symptoms are inter-related responses to overwhelming feelings and viewed as adaptations to trauma-and other feelings and thoughts.**

- **Individuals and families are the active experts and partner with providers**

- **Interest is in what happened to that person/ family not what is wrong with the person/family**

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Family Treatment Model
The Culture

- **Provide the maximum level of choice, autonomy, self-determination, dignity, respect**

- **Skill building**

- **Be reflective- if a service fails, view the service as not a fit for the presented needs**

- **The entire environment in which a person experiences services is an opportunity to heal, not just formal therapeutic sessions**

Who is the Client?

- Is it the person in treatment?
- Are other families members served for the purpose of supporting the person formally in treatment?
- Are other family members served for their own individual growth?
- Who pays for the work with the family?
- What skill sets are needed?

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Core Services

Trauma Informed
SA Ed. Tx & Relapse
Prevention
by gender

Case
Management

Infant Mental Health

Child Care

Children's Services
Assessments, Tx, Health &
Dental Care, Prevention,
Social & Education Services

Parenting & Parent
Child Relation Tx

Voc/Ed

Basic Skills

Family Engagement
Education, Referral
Parenting, Treatment
Social Services

Family Reunification Svc
Supervised Visitation

Mental Health &
Trauma Tx

Pre-natal Care

Medical & Dental Care
Social Services

Medication Assistance

Continuing Care

Mental Health
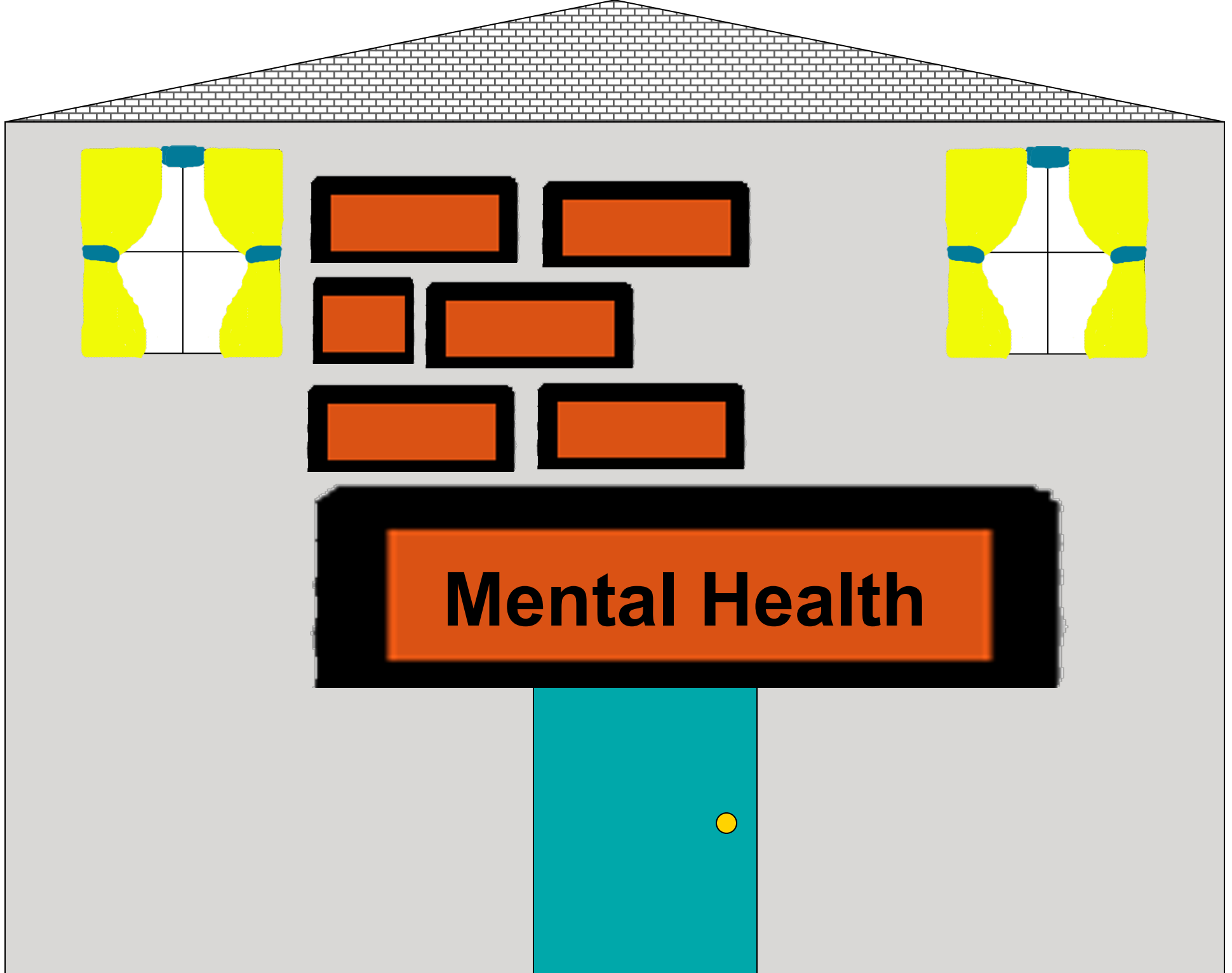
Housing
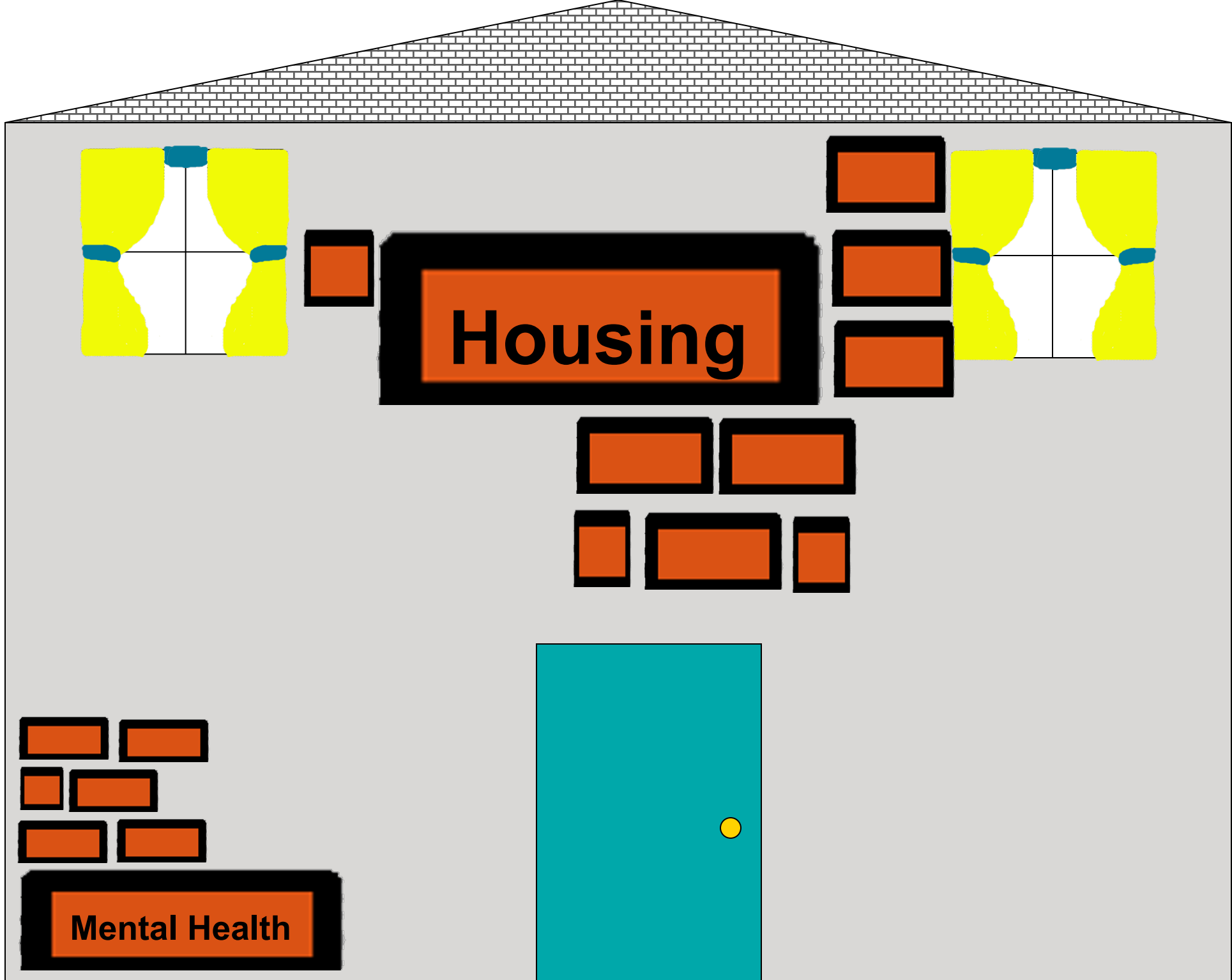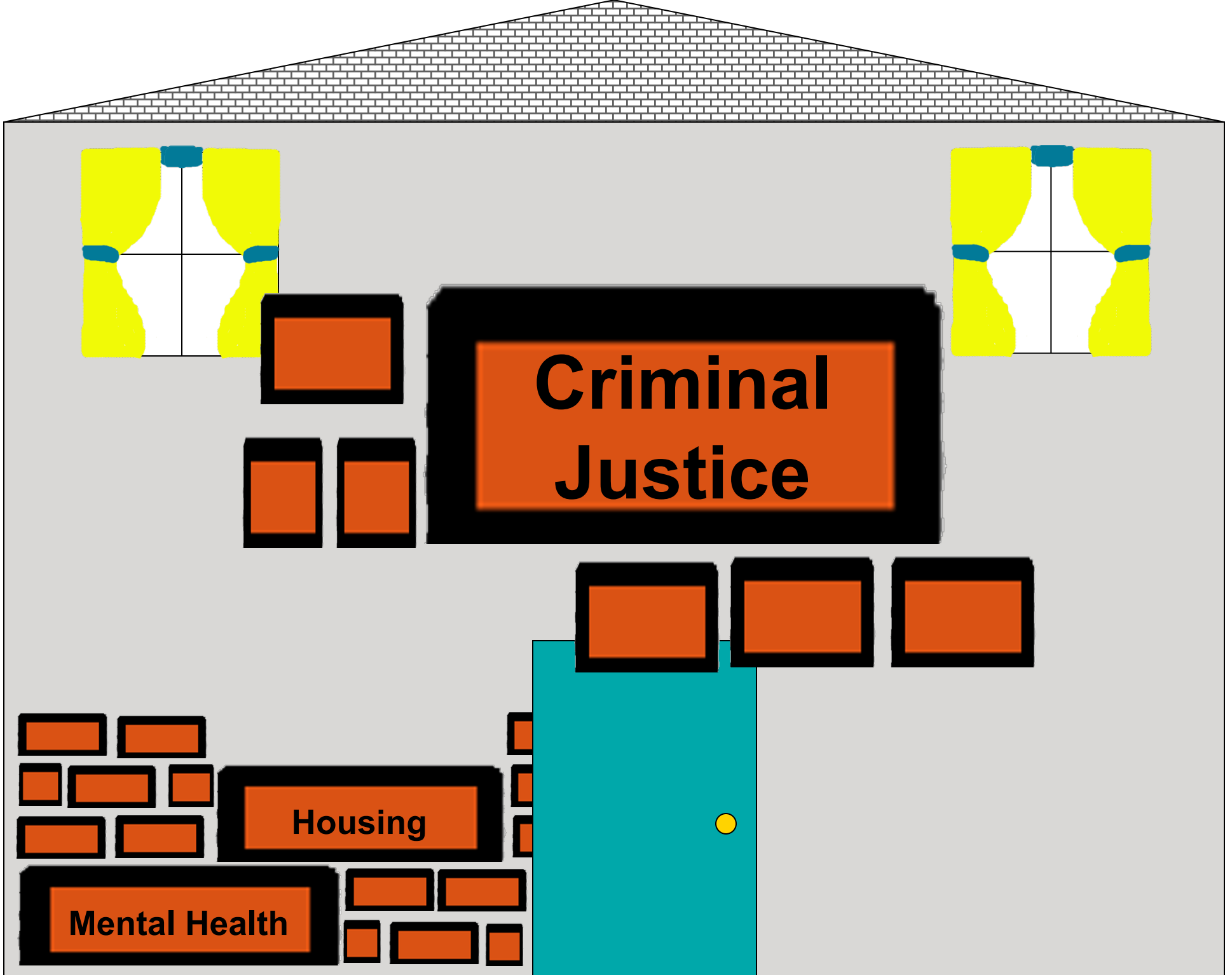
Mental Health

Criminal Justice
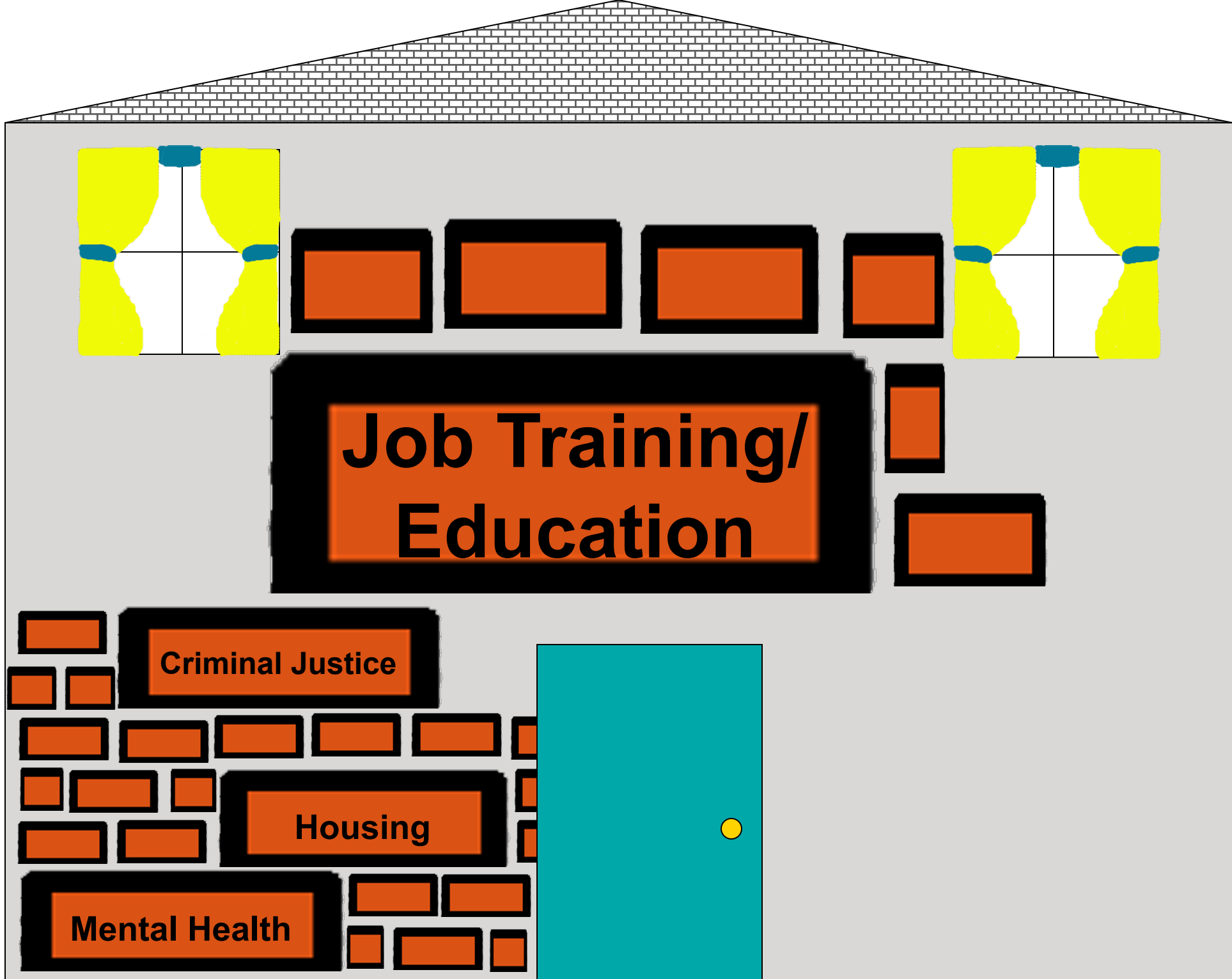
Housing

Mental Health

Job Training/Education

Criminal Justice

Housing

Mental Health

Community Recovery Services

Job Training/ Education

Criminal Justice

Housing

Mental Health

Community Rec...

Legal System

Job Training/ Education

Criminal Justice

Housing

Mental Health

Primary Health

Dental Health

TANF

Le...

...
Recovery Services

Job Training/
Education

Criminal Justice

Social
Services

Housing

Mental Health

Primary Health

Dental Health

Child Welfare

TANF

Legal System

Community

Job Training/
Education

Criminal

Early Childhood Prg,
OT,PT, Speech

Housing

Mental Health

Child Care

Primary Health

Dental Health

Child Welfare

TANF

Legal System

Community Recovery Services

Early Childhood OT, PT, Speech
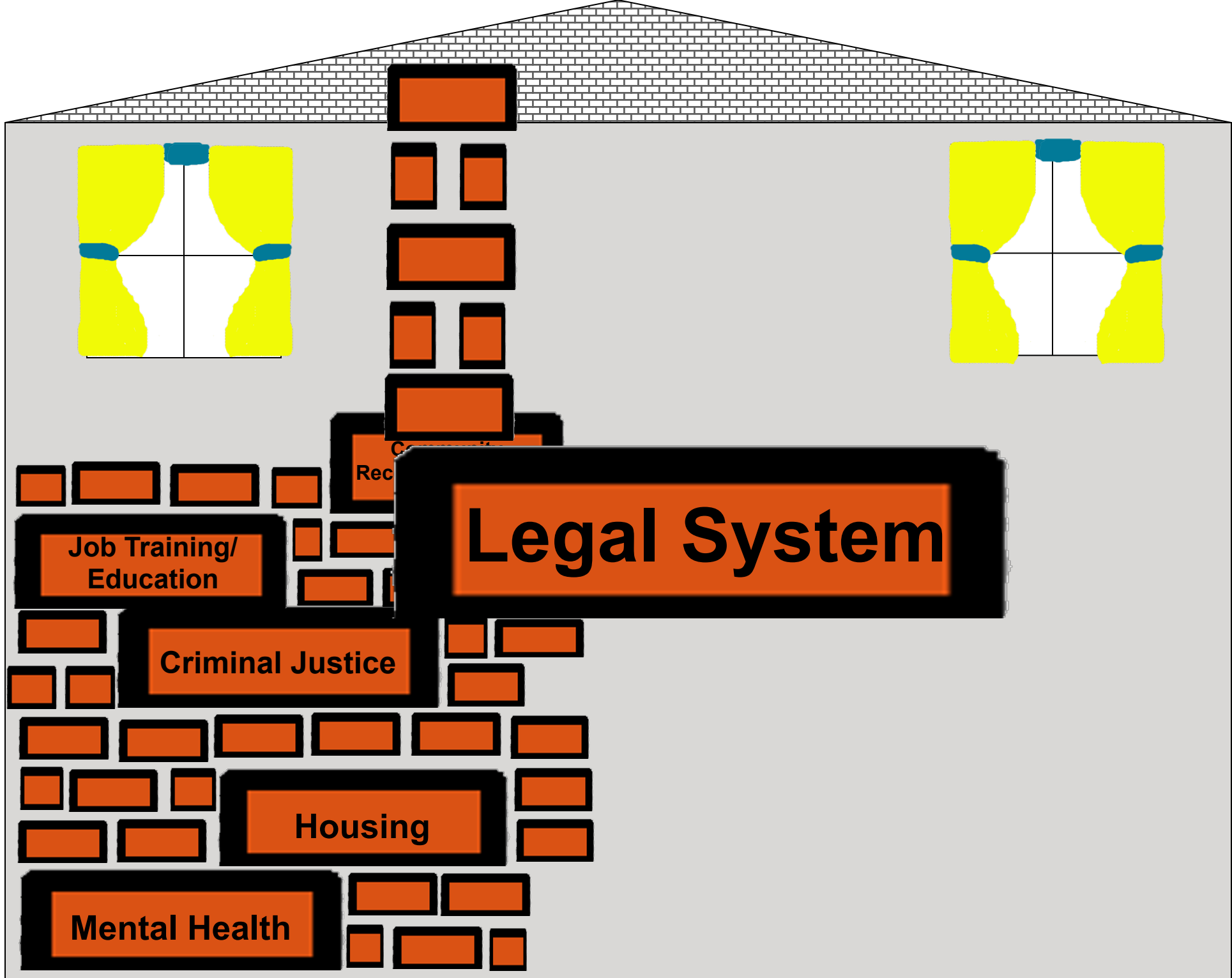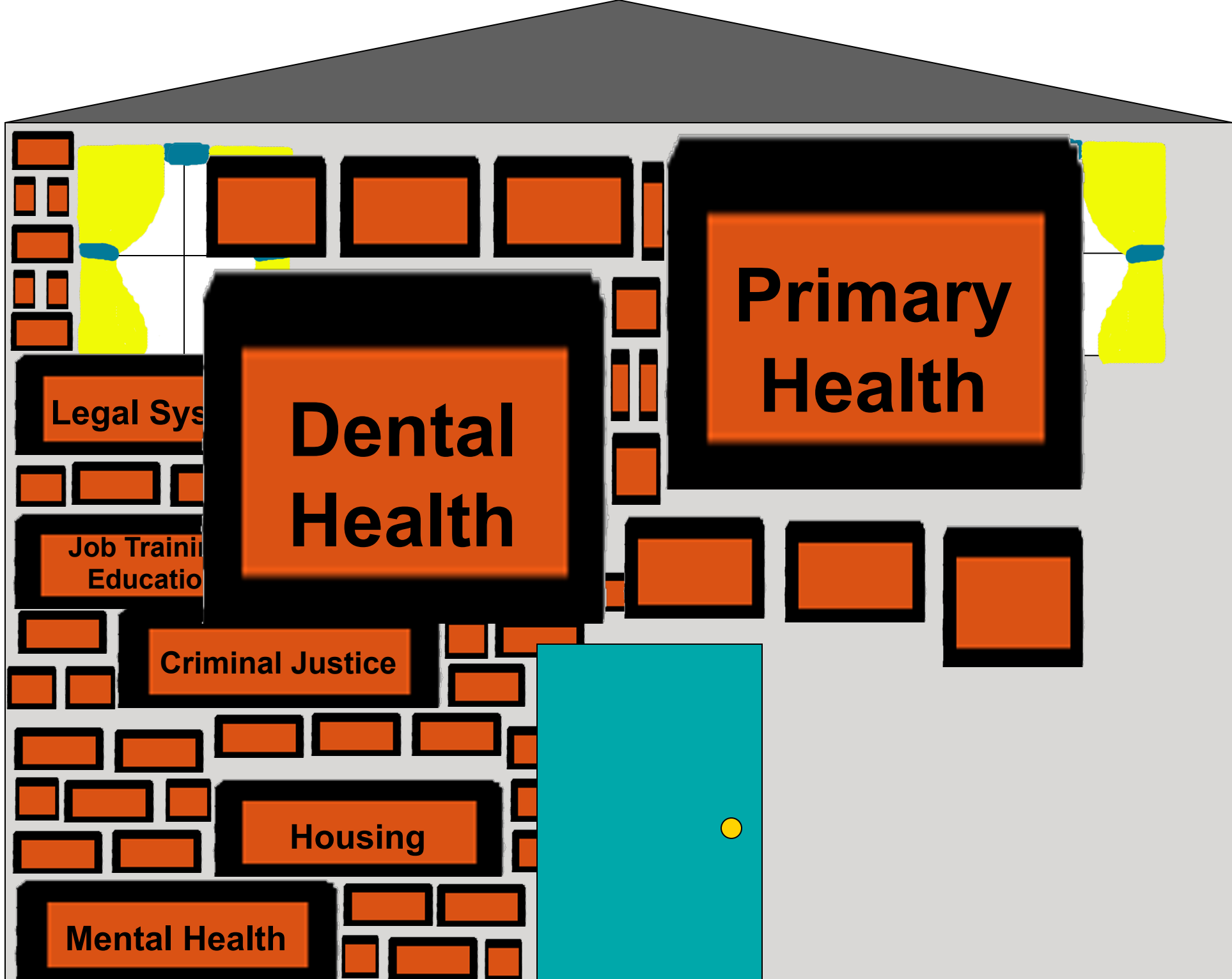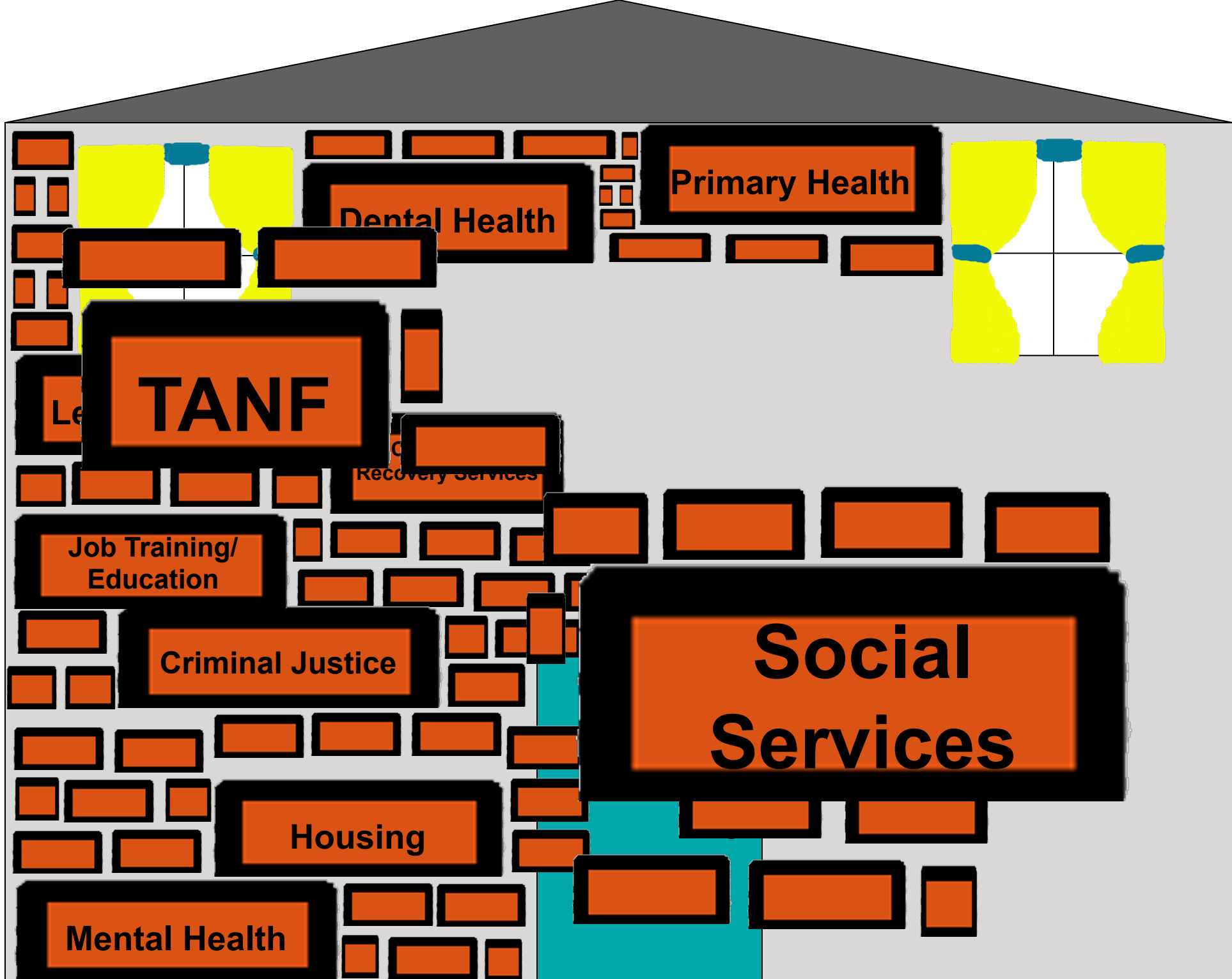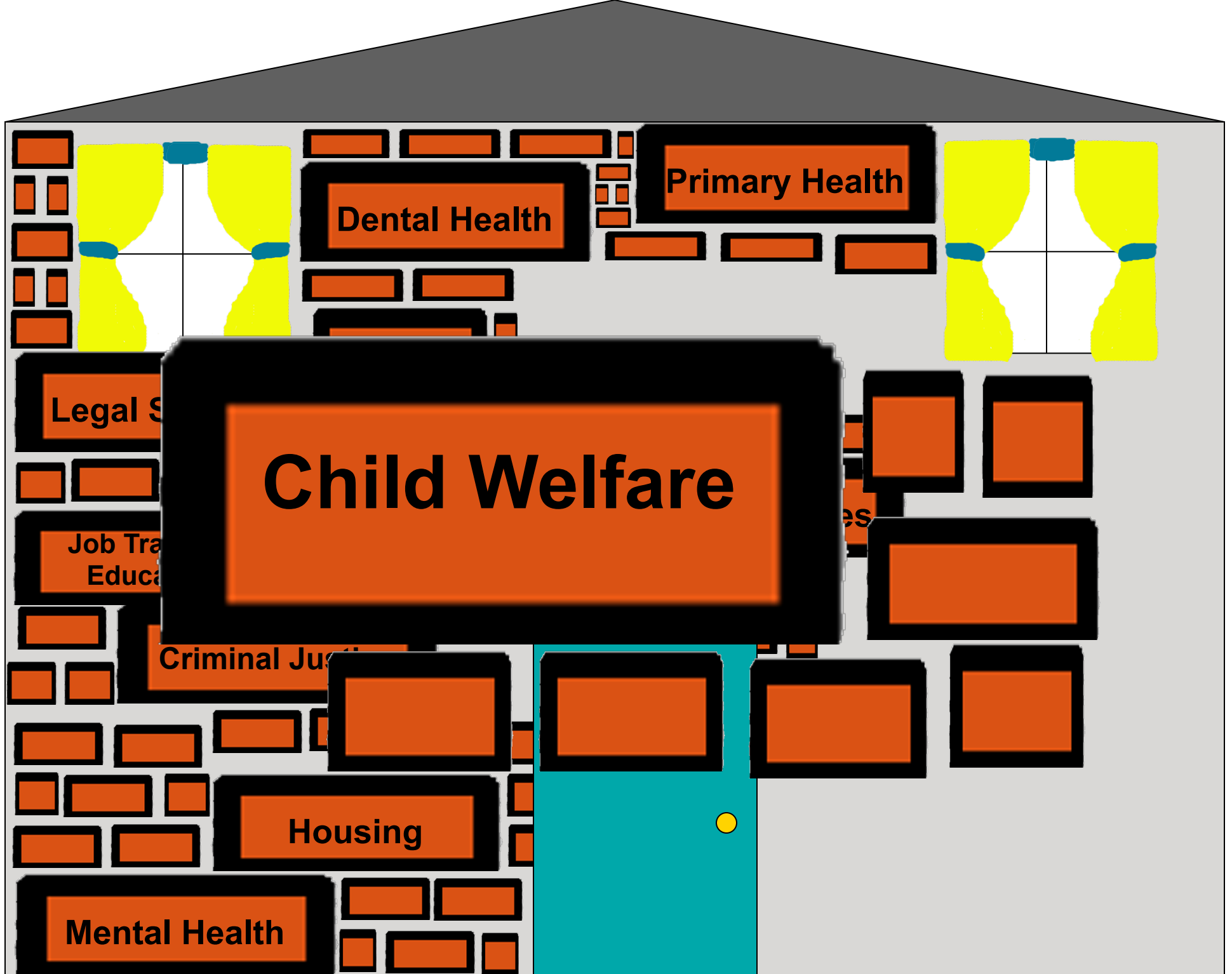
Social Services

Job Training/ Education

Schools

Criminal Justice
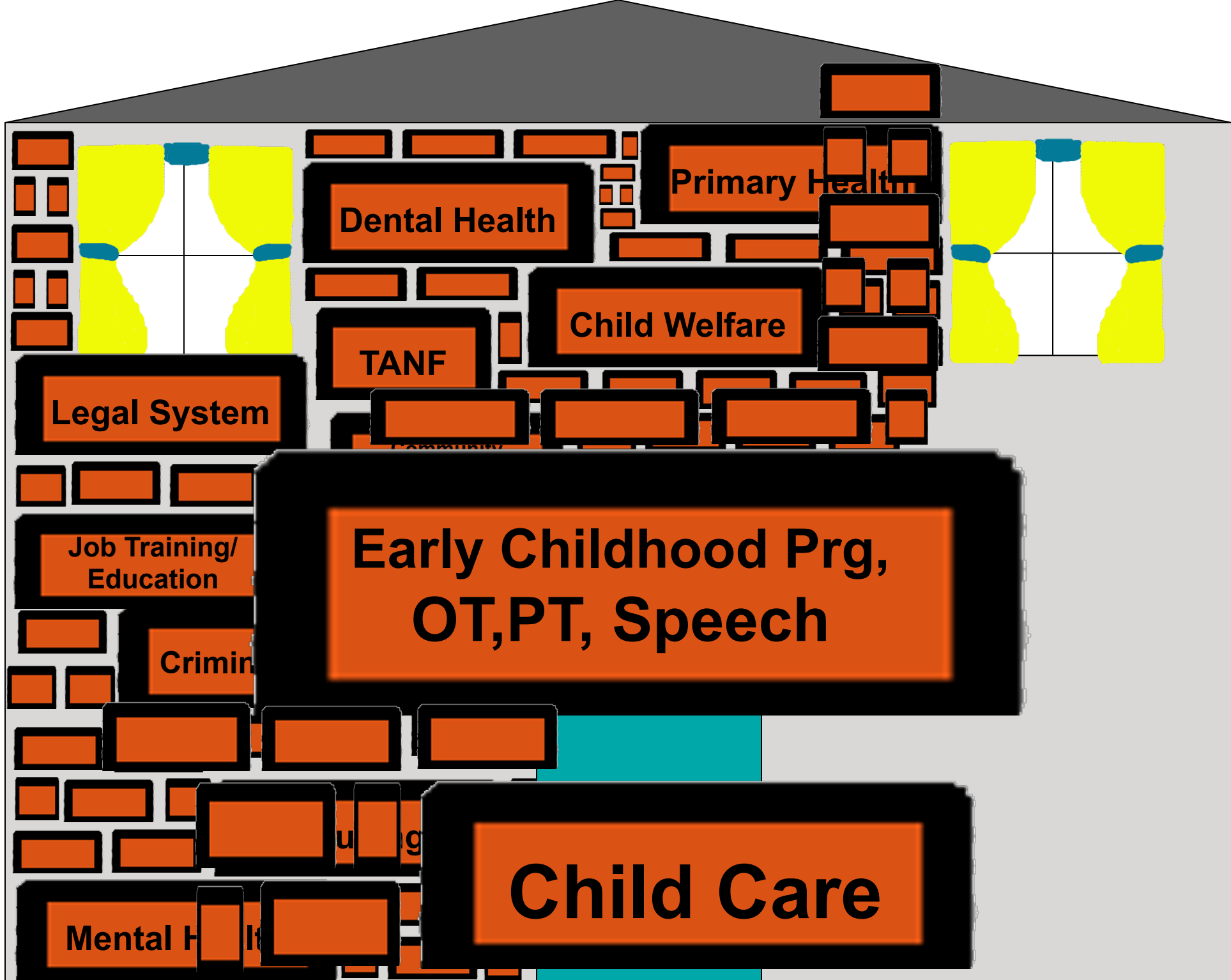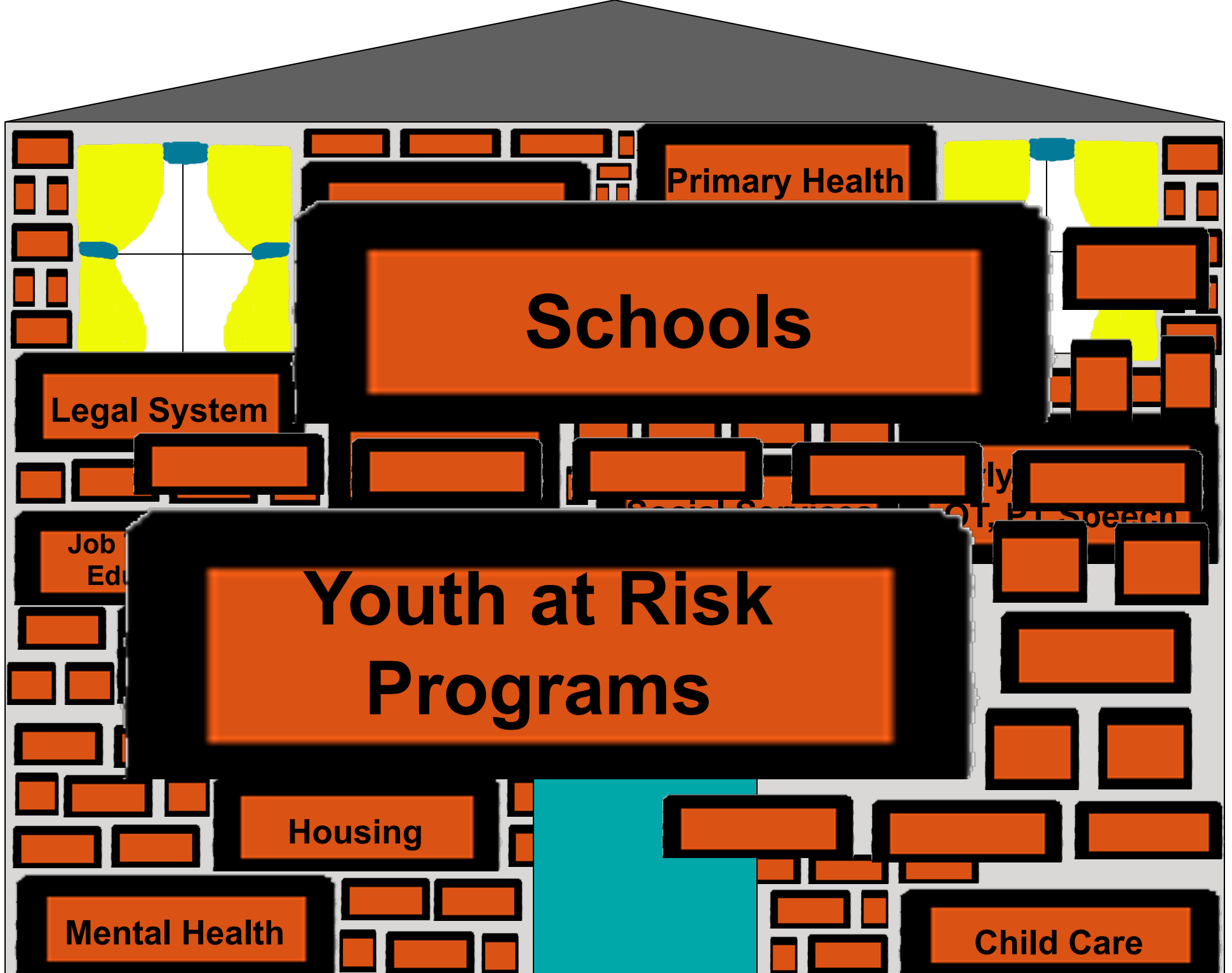
Youth at Risk Programs

Housing

Mental Health
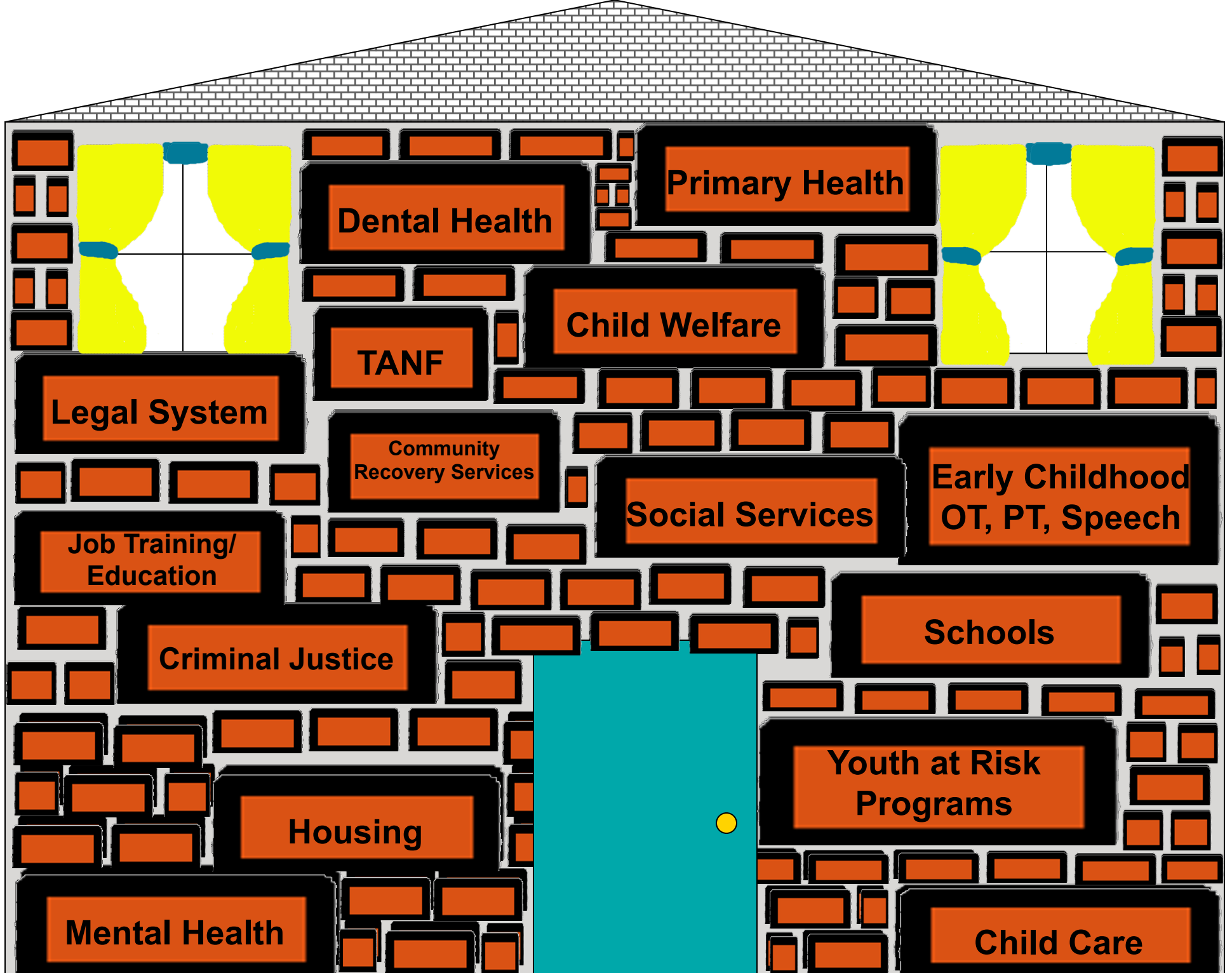
Child Care

Clinical Team

- **Case managers AODA Counselors**
- **MSW-AODA/MH**
- **Child Care Staff**
- **Child & Family Therapists**
- **Art Therapist**
- **Parenting Specialists**

- **Child & Adult Trauma Specialists**
- **Child & family Facilitators/Assts Living Support Staff**
- **Living Skills Specialist**
- **Vocational/Ed**
- **Maternal Health Nurse**
- **Psychiatrist**
- **Peer Specialists**

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Building an Internal Team

- **Team of many disciplines must operate as one**

- **Must share a common philosophy about the organizational and interpersonal style that is accepted practice for each family**

- **Staff that has expertise and primary responsibility for the adults and those that have expertise and primary responsibility for the children - must become aligned**

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Building an Internal Team

- **Need staff that**
  - **are willing to be team players**
  - **can be very flexible, creative – and do not need to be told what to do**
- **Each person needs to make it a priority to know how everyone else is working with the family**

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Take the Time to Build the Team

Conflict is inevitable!

- Cross training
- Spend time in other discipline
- Provide supervision that is family-focused
  - Address the staff emotional attachment to the children
- Staffings
- Logs
- Communication

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Building the External Team

- **Families are likely to be involved in multiple systems**
- **Each has their own goals, timelines, language, expectations**
- **Coordination and communication is vital**
- **Get buy-in for an integrated process from the top management**
- **Offer to train – all systems have concerns about substance abuse.**
  - **It's a win – win situation for everyone when the family succeeds in treatment.**

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The Commitment – Complex Nature of the Task

- **Not just the just the expected substance abuse and mental health issues**
- **Shift from a focus on the individual to a focus on his/her many roles in relationship to others as a father/ mother, family member, employee, community member**

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The Commitment – Complex Nature of the Task

Commit to addressing any and everything that arises in the families' life – regardless of what you are being paid to do

MEDICAL SERVICES

- Referral & Coordination for:
  - Pre and Post-Natal Care
  - Medical and Dental Care
  - Emergency and Hospital Care
- Health and Reproductive Education
- HIV/AIDS Education
- Nutrition Classes
- Medication Monitoring

AODA TREATMENT

- Counseling
  - Individual
  - Group
  - Family
  - Couples
- Relapse Prevention
- Continuing Care
  - Case Management
  - AODA Treatment
  - Alumni Participation
- AODA Education
  - Chemical Dependency
  - Post-Acute Withdrawal
  - Depression & Chemical Use
  - Personality Dev. & Relationships
  - Prenatal/Post Partum
  - The Substance-Exposed Child
  - Family Dynamics
  - 12 Step
  - Spirituality

MENTAL HEALTH & TRAUMA SERVICES

- Trauma Identification & Coping
- Psychiatric Evaluations
- Psychological Testing
- Medication Monitoring
- Anger Management
- Mental Health Therapy and Referral
- Relationships and Domestic Violence Groups

BASIC LIVING SKILLS

- Basic Living Skills
- Food and Clothing
- Cooking
- Cleaning
- Self-Care
- Health (HIV/AIDS, Hep C)
- Reproduction
- Relationships
- Household Management
- Budgeting
- Community Resources

Meta House Intensive Case Management

HOUSING TRANSPORTATION AND BASIC NEEDS

- Transportation
- Safe, affordable housing
- Meta Housing – Transitional Permanent
- Shelter Care Plus Housing
- Next Step Program
- Community Housing
- Food
- Clothing
- Household Items and Furniture

FAMILY & COMMUNITY RESOURCES

- Family Engagement, Education, Recreation, Support, Referral
- Parenting for fathers
- Youth Treatment & Prevention
- Nurturing Program for fathers
- Housing-Meta & CoC
- Faith Community
- Recovery Groups
- Sober Leisure Organizations
- Parenting Support Groups
- Community Pre & After School Programs
- Community-Based Health Clinics
- Neighborhood Public Forums

CHILD RELATED SERVICES

- Serve children living with mother and children placed out of home
- Integration of entire Child Welfare Plan
- Plan of Care for Child
- Coordination of Care with all systems involved with child
- Parenting/Child Development Classes
- Milieu parenting services
- Child assessment, evaluation, referral
- Birth to Three Services
- Play Therapy/Mother child relationship treatment
- On-Site Child Care
- Court Appearances
- Supervised Visitation
- Family Leisure Activities
- Reunification Assistance

VOCATIONAL/EDUCATIONAL

- Incorporation of TANF Employment Plan
- Reading Level and Skill Testing
- Literacy Tutoring
- GED/HSED Assistance
- Vocational Assessments
- Soft Skills Vocational Training
- Transitional and Permanent Employment
- Job Retention Services
- Transitional Employment

Adapting Family-Centered Treatment
Principles for Justice Involved Individuals

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Los Angeles, CA

Adapting Family-Centered Treatment

The Family-Centered Treatment (FCT) Model has proven to be very successful in engaging and retaining substance abusing women in treatment - resulting in positive outcomes for the whole family - with completion and success rates well above the national average… sometimes as high as 80%.

This success is built upon the recognition that the family is the true "client" and relationships are the key factor that needs to be addressed in treatment.

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Adapting Family-Centered Treatment

FCT principles can be applied to all treatment settings… regardless of whether or not your program or intervention is in-custody or community based… and regardless of whether or not your program focuses on mothers or fathers as the "primary client."

However, applying FCT to work with Justice Involved individuals, requires specific adaptations of the model in order to increase the likelihood of achieving the same results.
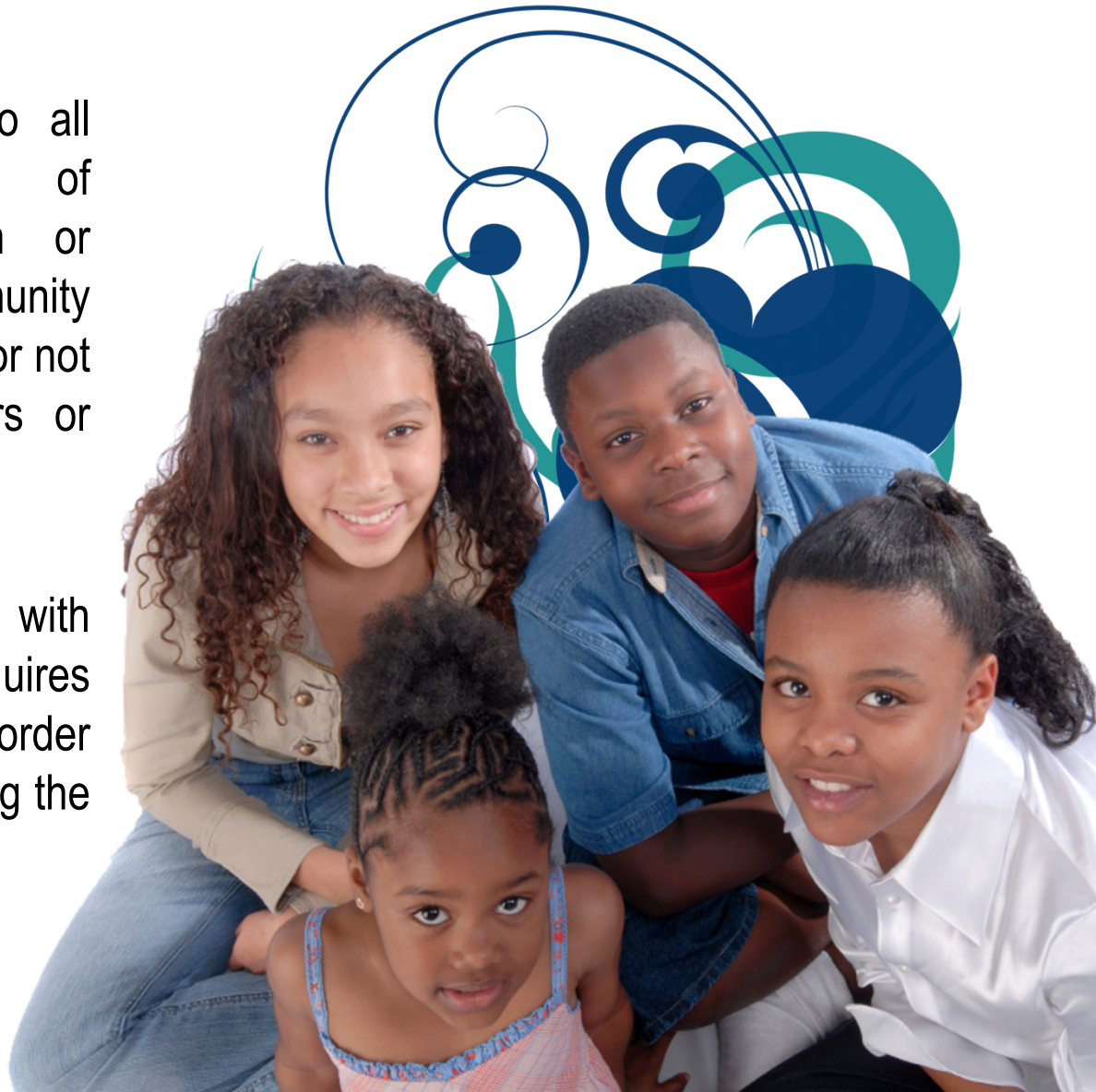
Adapting Family-Centered Treatment

The first steps in making those changes are:

- Recognizing that there are issues and needs specific to this population.

- Having administrative willingness and capacity to alter policy, programming, staffing and/or funding to address these changes.

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Adapting Family-Centered Treatment

During this webinar:

• Review issues specific to justice involved individuals and identify critical concerns and needs.

• Identify modifications necessary to service delivery that require "Administrative Willingness and Capacity to Change" in three areas:

    A. Outreach and Engagement

    B. Programming

    C. Partnerships

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Adapting Family-Centered Treatment
Issues Specific to Justice Involved Individuals

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Adapting Family-Centered Treatment
Issues Specific to Justice Involved Individuals

Four primary categories of Issues:
1. Culture
2. Disconnections
3. Multi-System Demands
4. Moving On

While these issues impact all individuals with substance abuse disorders, there are unique factors in each of these areas that need to be addressed for this population.

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CULTURE

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Issues Specific to Justice Involved Individuals

Culture

Everyone who enters treatment brings their own individual cultures into the setting… as well as the "culture of addiction."

Justice Involved Individuals also bring in the "Culture of Criminal Justice Involvement."

Two key factors with this culture are:

1. Trust
2. Control

Culture

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Issues Specific to Justice Involved Individuals

Culture

1.Trust

Trust is a major factor that needs to be addressed with this population of individuals… they are more likely than others to have been in situations where they could not trust those around them to be relied upon to assist or support positive change….and "distrust" becomes normative. Developing trust will be a major adjustment that takes time and considerable effort.

The FCT model's success is built upon the establishment of relationships between program participants, staff and partners. Establishing a trusting relationship will be key to success and therefore a critical factor in service delivery.

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Issues Specific to Justice Involved Individuals

Culture

2.Control

Control is another critical factor that is a part of the "Criminal Justice Culture." Individuals that are justice involved have been impacted by "External Control" of their decision making. Whether or not they are in-custody, they have been or are in situations where they have external entities making life decisions for them. They have had to respond to rules and regulations that can result in significant consequences if they are not followed, therefore they have generally developed limitations in their ability to have "Internal Control" of their decisions.

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Issues Specific to Justice Involved Individuals

Culture

2.Control (Cont'd)

The FCT model is based upon individuals' making their own decisions. It is a collaborative model not a behavioral model. Program participants are not told what to do but encouraged to make life decisions for themselves. For Justice Involved Individuals this transition can be a difficult one to make, therefore programming needs to account for and assist with this transition.

Culture

Adapting Family-Centered Treatment
Issues Specific to Justice Involved Individuals

Modifications Needed to Address Cultural Issues

1. Outreach and Engagement

- **Early and Often:** to build the relationship, develop trust and encourage decision making

- **Dedicated Staff:** that can focus on building relationships and connections

- **Staff with Similar Histories**: to role model the ability to make positive changes

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Adapting Family-Centered Treatment
Issues Specific to Justice Involved Individuals

Modifications Needed to Address Cultural Issues

2. Programming

• **Groups and Curriculums:** that address building trust and decision making, altering the external control mindset.

• **Social Activities and Events:** encouraging relationship building between staff and participants, participants and peers.

• **Client Councils and Leadership Activities:** to enhance independent decision making and ability to "own" the program.

• **Lower Staff to Client ratios:** to enhance the development of relationships.

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Issues Specific to Justice Involved Individuals

Modifications Needed to Address Cultural Issues

3.Partnering

•**"Authentic Partnership":** between criminal justice and treatment: to model the development of trust and relationship building.

•**Activities and Events:** that incorporate both partners and participants to enhance the transition into treatment.

•**Easy System Access**: to allow participants to be introduced to treatment as early as possible including co-location of staff.

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Issues Specific to Justice Involved Individuals

DISCONNECTIONS

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Issues Specific to Justice Involved Individuals

Disconnections

Substance abusing individuals often have experienced separation from their families and friends as a consequence of their lifestyle. However, Justice Involved Individuals have tended to suffer more severe "disconnections", as well as actual physical separation from their support systems. This can include being incarcerated in institutions far from their families and having restricted or "no touch" visitation regulations.

When the child welfare system is involved, it also can mean not being able to know where your children are located once you are incarcerated… and having no ability to find out.

Disconnections

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Issues Specific to Justice Involved Individuals

Disconnections (Cont'd)

The FCT model is based upon relationships, with the family as the central focus of the model. For Justice Involved Individuals, this can mean re-establishing "connections" which may have been severed for long periods of time due to incarceration or lifestyle. The effort to assist with building or re-building these relationships needs to be incorporated into your service delivery to enhance the opportunity for the family to recover.

Disconnections

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Adapting Family-Centered Treatment
Issues Specific to Justice Involved Individuals

Modifications Needed to Address Disconnection Issues

1.Outreach and Engagement

•**Early and Often:** Begin working with the family as soon as possible, prior to participant entering treatment. If participant is in-custody, initiate or increase visitation with family. If children in foster care, arrange visitation through child welfare.

•**Dedicated Staff:** that have expertise in working with family.

Disconnections

Adapting Family-Centered Treatment
Issues Specific to Justice Involved Individuals

Modifications Needed to Address Disconnection Issues

2. Programming

•**Flexibility:** Offer services when families are available including evenings and weekends, eliminate restrictions on age/number of family members enrolled, enhance visitation regulations, offer family services/visitation daily.

•**Groups and Curriculums:** that address issues related to family. Specific groups for children so they can express their feelings around their separation from parents.

Disconnections

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Issues Specific to Justice Involved Individuals

Modifications Needed to Address Disconnection Issues

2. Programming (Cont'd)

• **Mental Health Services:** for children and family members individually, as well as family therapy and Multi-Family Group.

• **Family Activities and Events:** offered regularly as part of treatment schedule, encouraging relationship building and providing opportunities to learn how to have fun together.

Disconnections

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Issues Specific to Justice Involved Individuals
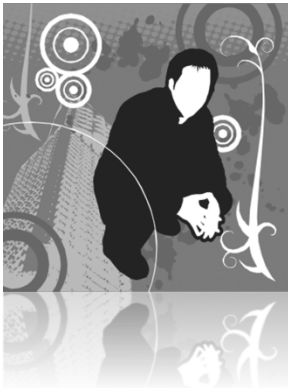
Modifications Needed to Address Disconnection Issues

3.Partnering

•**"Authentic Partnerships":** between child welfare, criminal justice and treatment, mutual agreement on goals and underlying philosophy to enhance reunification efforts, allow for visitation.

•**Integration of services:** Developing joint plans that focus on assisting with re-connecting the support system for participant; co-location of staff from other systems (mental health); assistance with increasing visitation efforts; supporting activities and events that incorporate family.

Disconnections

Disconnections

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Issues Specific to Justice Involved Individuals

Modifications Needed to Address Disconnection Issues

3. Partnering (Cont'd)

•**Easy System Access:** to allow participants to have visitation from children and family, to initiate reunification efforts as soon as possible including co-location of child welfare staff.

Disconnections

Disconnections

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Issues Specific to Justice Involved Individuals

MULTI-SYSTEM DEMANDS

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Issues Specific to Justice Involved Individuals

Multi-System Demands

Individuals with substance abuse disorders are generally involved with multiple systems that place demands on them to accomplish specific activities. It is common to have involvement with child welfare and public social services with requirements to complete parenting or participate in welfare to work activities. When an individual is involved with the Justice System, however, these multi-system demands often have more "lethal" consequences if they are not met….including returning to incarceration or losing basic privileges of visitation.
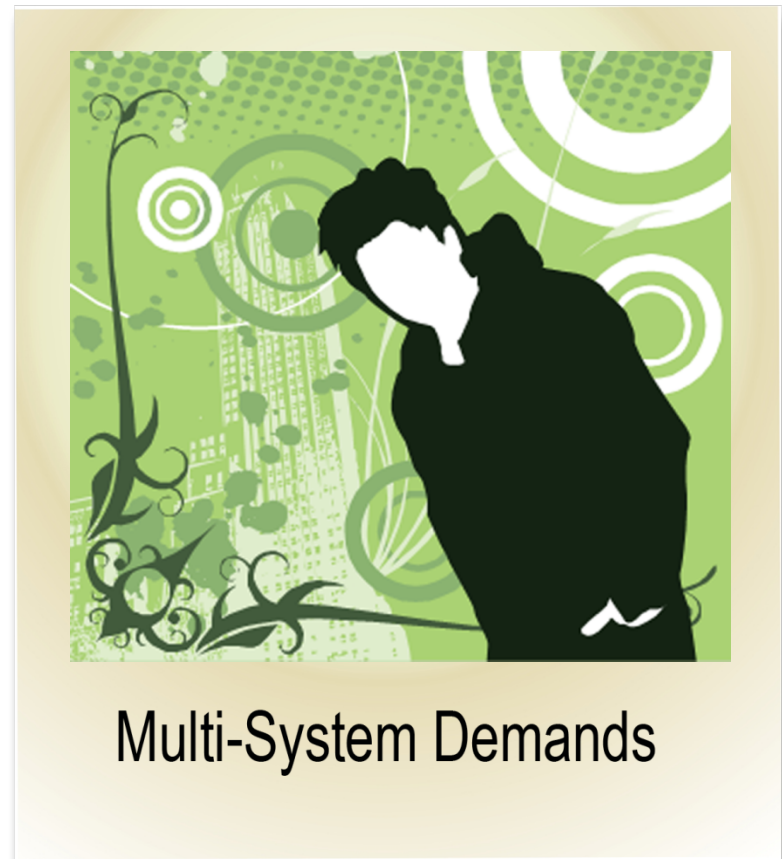
Multi-System Demands

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Issues Specific to Justice Involved Individuals

Modifications Needed to Address Multi-System Demand Issues

1.Outreach and Engagement

•**Ask Early:** Identification of all systems that the individual is involved with at initial contact. Specific listing of all requirements from each.

•**Negotiate and Barter:** Begin working with each system to negotiate "demands", assist individual with addressing as many requirements as possible prior to entering treatment.

Multi-System Demands

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Issues Specific to Justice Involved Individuals

Modifications Needed to Address Multi-System Demand Issues

2.Programming

•**Flexibility:** to enable participants to address the demands made by other systems, altering treatment schedule, evening and weekend services, arranging for transportation or child care to get to outside required appointments.

•**Modification:** of services offered on-site to address the needs of other systems….i.e. ensuring groups meet the specifications for the court for anger management or parenting.

Multi-System Demands

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Issues Specific to Justice Involved Individuals

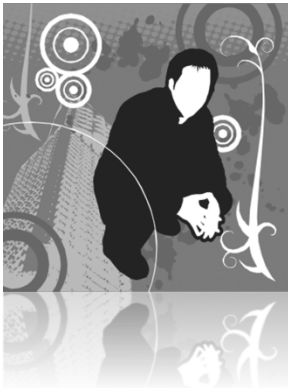### Modifications Needed to Address Multi-System Demand Issues

3.Partnering

•**"Authentic Partnerships":** between all systems involved with individual, mutual agreement on goals and underlying philosophy to assist with negotiation of requirements from each system.

•**Integration of services:** Developing joint plans, multidisciplinary and interagency case conferences, specific liaison with other systems, co-location of staff.

•**Engage Legal Services:** Offer referral to or provide legal services to assist with multi-system issues, include review of what is necessary to expunge records, ensure participants know their

Multi-System Demands

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Issues Specific to Justice Involved Individuals

MOVING ON

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Adapting Family-Centered Treatment
Issues Specific to Justice Involved Individuals

Moving On

Completing treatment and returning to the community is generally a difficult task. For Justice Involved Individuals this task is even more onerous – with your criminal history becoming a major impediment to "moving on." These barriers include access to public assistance, low-income housing and employment. The inability to overcome these barriers can cause an individual to return to a criminal lifestyle…feeling as if there are no other options available to support themselves and their families.

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Adapting Family-Centered Treatment
Issues Specific to Justice Involved Individuals

Moving On (Cont'd)

The FCT model focuses on empowering the individual to accomplish the goals they have established and believe in their ability to support their families and become productive citizens. For Justice Involved Individuals, the barriers in accessing resources and employment make this task difficult. Participants will need continued encouragement as they tackle these challenges and the program will need to incorporate potential solutions to the known barriers they face.

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Adapting Family-Centered Treatment
Issues Specific to Justice Involved Individuals

Modifications Needed to Address Moving On Issues

1.Outreach and Engagement

•**Ask Early:** Identify the barriers that the individual will have to address at initial contact. Find out about full criminal history, previous evictions or other potential challenges they will be facing.

•**Identify:** Detail the educational history, work experience, skills, and interests so that a plan can be made to begin working on building upon these strengths in treatment.

•**Dedicated Staff:** If possible, provide dedicated staff to assist participants with overcoming these barriers, particularly around employment and housing.

Moving On

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Adapting Family-Centered Treatment
Issues Specific to Justice Involved Individuals

Modifications Needed to Address Moving On Issues

2.Programming

•**Educational and Vocational Component:** Ensure that a strong educational and vocational component is provided by you or your partners in the program. Add requirements to obtain a high school diploma and computer training and incorporate into the program schedule. Offer or link to certificate training or educational programs where criminal histories are not a barrier for employment.

Moving On

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Issues Specific to Justice Involved Individuals

Modifications Needed to Address Moving On Issues

2. Programming (Cont'd)

•**Work Readiness and Job Placement:** Maintain a work readiness program that includes volunteer and intern positions to acquire skills. Offer job coaching, job clubs, study groups to support the decision to work or go to school.

•**Support:** Offer support groups, aftercare, counseling and other activities that will allow individuals to voice their struggles, even after the completion of treatment.

•**Legal Services:** Make sure participants can access legal services to remove whatever barriers they can (outstanding warrants, tickets), as well as learn what will be necessary to have their record expunged.

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3.Partnering

•**Partnerships with "non-traditional" partners:** develop strong relationships with colleges and training programs that provide opportunities for careers that will support families and not be impacted by a criminal history *(fiberoptics, green technology)*. Identify employers who will hire individuals with a felony history and provide them with incentives *(volunteers, job support, free advertising)*. Identify housing providers that offer accessible and affordable housing *(offer case management)*.

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3.Partnering (Cont'd)

•**Integration of services:** As much as possible, integrate all services on-site and incorporate into the program schedule.

•**Advocate:** work with your legal partner to not only assist individuals, but to advocate for change, as happened in June, 2011 with the lift of the ban for accessing public housing.

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Adapting Family-Centered Treatment
Resources

Fathers Successfully Returning Home Curriculum
National Fatherhood Initiative (NFI)
http://www.aca.org/
Author: Ken Gosnell

**Supportive Education for Children of Addicted Parents:
Children's Program Kit (with DVD)**
SAMHSA Website: Free of Charge

**A New Direction: Cognitive Behavioral Treatment
Curriculum/Criminal and Addictive Thinking**
Hazelden

**SAMHSA TIP 30: Continuity of Offender Treatment From
Substance Abuse Disorders from Institution to Community**
SAMHSA Website: Free of charge

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Question and Answer Session

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