

## Juvenile Drug Courts: Where Have We Been? Where Should We Be Going?

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### National Council of Juvenile and Family Court Judges\*

To mark the fifth anniversary of the implementation of the first juvenile drug court, representatives from ten of the older juvenile drug court programs<sup>2</sup> assembled at American University in November 1999 to review their respective experiences, discuss issues and needs that had emerged during the course of program implementation, and identify common issues now meriting priority attention. The meeting was conducted jointly by the OJP Drug Court Clearinghouse and Technical Assistance Project at American University and the National Council of Juvenile and Family Court Judges, under the auspices

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<sup>2</sup>Programs represented were: Pima County (Tucson), Arizona; Santa Clara Co. (San Jose), California; Tulare Co., (Visalia), California; Duval Co. (Jacksonville), Florida; Monroe Co. (Key West), Florida; Escambia Co., (Pensacola), Florida; St. Mary Parish (Franklin), Louisiana; Baltimore, Maryland; Missoula, Montana; and Camden, New Jersey.

of the Drug Courts Program Office of the U.S. Department of Justice. All of the programs represented had undergone various modifications since inception and were still in the process of refining their respective approaches. The following report summarizes the principal issues discussed at the session.

### I. What Have We Learned?

Without a doubt, the initial experience of juvenile drug courts has reinforced the perceptions of judicial system leaders who developed these programs regarding the complexity of factors that surround adolescent substance abuse and the urgent need for the juvenile justice system to devise a more holistic and intensive approach to address them. It has also brought to light a number of special issues that need to be addressed in order to fully realize the potential of the juvenile drug court concept and which were not readily apparent at the start. While most juvenile drug court practitioners agree that the underlying adult drug court concepts embodied in the *Key Components* are vital to juvenile drug courts as well, most also note that a number of additional elements — still to be fully defined — are also critical to their effectiveness.

In terms of the premises upon which juvenile drug courts have been grounded -- e.g., the need for more coordinated, continuous, and holistic management of cases involving adolescent substance abuse, virtually all juvenile drug court practitioners agree that the juvenile drug court is clearly more effective in addressing the needs of substance-involved adolescents than the traditional juvenile justice process. It is proving significantly more capable of:

- C identifying and comprehensively responding to the individual needs of each juvenile participant;
- C promoting much greater access to and coordination of available social, medical, mental health, substance abuse and other community services;

- C providing far greater supervision of juveniles in the community who are under the court's jurisdiction; and
- C building upon the "strengths" of the participating youth and their families — as well as taking into account their shortcomings — in the development of a support structure to promote their capacity to lead drug-free and crime-free lives.

Like its adult counterpart, the juvenile drug court also offers the judge a far more effective and satisfying role in the management of cases, often involving complex and long-standing family dysfunction, that have traditionally lingered or been recycled on the court dockets for months, and often years.

Most jurisdictions which have implemented juvenile drug courts have previously established adult drug court programs. While officials involved with the implementation of the juvenile drug courts were aware that the juvenile drug court could not simply be modeled after its adult counterpart, a *true* understanding of the reality of what is entailed in developing an effective juvenile drug court program is emerging for most programs only out of experience and experimentation.

What new insights have been learned to date? What challenges still need to be addressed? While the *final* model for a juvenile drug court is still evolving, the experience of juvenile drug courts during this initial implementation period has underscored the critical importance of the following program elements.

**The entire program design and services must be geared to *adolescents***

The juveniles in these programs are not "little adults". Cognitively, teenagers *do* think differently from adults. Actual biochemical distinctions exist between the adolescent and adult brain. It is these distinctions that prompt teenagers to take more risks than adults, including the risks involved in securing and using chemical substances. Adolescent brains generate twice as much energy and activity as adult brains, and the emotional experiences of adolescents are generally twice as vivid.

These distinctions between adolescents and adults are important considerations when developing benchmarks for treatment of adolescent substance abuse. Even considerate and loving adults have difficulty comprehending the ordeals of adolescence. Typical adult responses to a teenager shattered by a broken relationship, for example, with platitudes like

"You'll get over it", or "There are plenty of fish in the sea", are hardly appropriate responses to an adolescent who is feeling a loss far more deeply than an adult would. Rather than advice like "Pain builds characters", adolescents in pain need help developing the emotional skills that will enable them to cope. These coping skills do not come naturally; they need to be taught. For this reason, it is important that practitioners use early treatment assessments as opportunities to identify areas where a juvenile can build, or build upon, personal strengths. Simplistic as it might sound, those working with juveniles in a juvenile drug court program must therefore learn - - or relearn -- how an adolescent thinks and the cognitive framework within which an adolescent is approaching his/her participation in a drug court program.

**Assessments of participants must be comprehensive and on-going in order to identify the range of substance abuse, physical health, mental health, family and personal needs of each juvenile that are presented at the time of program entry and/or subsequently emerge during the course of program participation**

Youth entering juvenile drug courts present a wide range of complex needs and problems, many of which are not readily apparent at the time of program entry. Assessments must therefore be comprehensive and continually updated. Programs report, for example, a significant frequency of children who have been physically or emotionally abused; who are taking prescribed medications for behavioral problems; who have below-level literacy skills and academic achievement; and/or whose immediate family members are involved with substances and with the criminal justice system. Many juvenile drug court participants are also dually diagnosed — e.g., have co-occurring mental disorders in addition to their substance use. Often the nature and extent of their mental health problems do not become apparent until participants have been in the program for some time and/or have ceased their use of drugs. The life of an adolescent can also change significantly over a few months time in terms of his/her developmental, emotional, psychological, physical and/or family situation. It is not uncommon for a youth to enter the drug court as a *child*, only to also become a *parent* during the period of program participation.

**Treatment services need to be adolescent-oriented, individualized and geared to the special situation and needs of each adolescent participant and his/her family**

Even the best adult treatment model is unlikely to be effective in treating adolescents. The differences between adults and adolescents, whether physical, psychological or emotional, are too great. The approach too, will vary from adolescent to adolescent, depending on a variety of factors relating to the situation of the individual child and his/her developmental status. At a minimum, effective adolescent treatment services must:

- C be educationally appropriate to the reading level, educational level and experience of the participant, who will frequently present deficiencies in academic achievement;
- C focus on the concerns of the participating youth, which are varied and include many topics not related to their substance abuse;
- C address health issues presented by the participating youth, including those relating to physical and mental health issues and sexually transmitted diseases;
- C incorporate restorative justice/community based concepts which view the youth as part of the community and promote the youth's sense of accountability to the community as well as to his/her family;
- C raise the participant's awareness of why he/she is in the drug court and why he/she is struggling to overcome drug use;
- C provide information which is credible and culturally relevant;
- C be geared to changing the juvenile's attitudes and values;
- C provide a short and long term strategy for becoming drug free which the juvenile can pursue, including an opportunity to satisfy emotional, social, educational, and vocational needs;
- C provide a strong support structure which includes both family support and peer reinforcement; and
- C provide for a continuum of services that can be accessed if and as needed

**Programs need to provide incentives which motivate youth to change — even when these “incentives” are imposed as sanctions**

Recognizing that most youth who participate in a juvenile drug court program, enter the program with very low self esteem and little, if any, vision for the future, juvenile drug court judges and others involved with these programs are discovering the importance of capitalizing on opportunities to

provide *incentives* to motivate youth to change. Even when sanctions for noncompliant behavior are imposed, it is important that these sanctions be structured, to the extent possible, as strategies for *motivating* the participant to comply with program requirements and reinforcing constructive behavior rather than simply *punishing* for noncompliance. Participating youth need to recognize that positive developments are/will be occurring in their lives *because* they aren't using drugs. Tokens of accomplishment, praise from the drug court judge, temporary relaxation of a program requirement, such as a curfew or status hearing attendance, take on a very special meaning to a youth who, despite his/her outward demeanor, may not see much worth to his/her life.

Most juvenile drug court practitioners are therefore increasingly taking the view that even *sanctions* need to have a motivational quality. It is becoming apparent for many programs, for example, that detention is generally not motivating for youth and, in many instances, may even be a “badge of honor”. In some instances, it may actually cause further harm to an already troubled youth. Juvenile drug courts therefore need to develop a range of incentives which, even if imposed as sanctions (writing assignments, book reports, for example), can provide an opportunity for a youth's development and achievement. Many programs are also developing sanctions, such as community service requirements, which are community based and draw on restorative justice principles.

**Strengthening the family support structure is critical**

While working with families of substance abusers is important in almost every situation, it is particularly critical for juveniles. Most programs have come to recognize that, despite the best efforts of service providers to assist a juvenile in becoming drug free, their work will likely be futile unless the family — the environment in which the youth must function daily -- is meaningfully involved with and actively participating in the program. This realization is generated, in large part, from the recognition that juvenile drug abuse and delinquent behavior are often symptomatic of a youth's personal, family, social and peer problems which must ultimately be addressed if the youth is to be able to cease his/her drug use.

Like others involved with the juvenile drug court program, family members, too, must learn to understand the developmental status of the adolescent participant, the “logic” of his/her behavior, and

strategies and techniques for dealing with him/her in a positive, constructive manner. Assisting parents in developing parenting skills that *support* the youth's efforts at becoming drug free is a complex process which the drug court needs to nurture and reinforce to increase the likelihood of the youth having in place a family support structure after the period of drug court participation is completed.

It is recognized that dealing with families of substance abusing youth presents complex issues, particularly in regard to the frequency with which the substance abuse of an adolescent is indicative of a multi-generational pattern of substance abuse within his/her family and the varying degrees of psycho-social impacts which this substance abuse has had. Although the court may have authority to compel parental participation through statutory and/or contempt powers, the consensus of juvenile drug court practitioners is that *persuasion* is the preferred means for constructively involving parents and/or other family members in this process.

Development of the family service component of juvenile drug courts is now receiving considerable attention (See Section II below) and, in most cases, represents a significant departure from the initial design of most programs. The approach is building upon a "resiliency" model, capitalizing on family strengths, and designed to assist families in providing a support system for the juvenile during and after the period of drug court participation. "Family" must necessarily be defined broadly, taking into account the individuals whom the youth identifies as his/her "family" and adults who have played — or can play — a supportive parental role, whether they are "parents", older siblings, other relatives or other adult figures in the youth's life. Where there are truly no adults who can serve in a positive role as "family", a "family" for the youth needs to be created or supplemented -- through mentors, support groups, volunteers (i.e., "volunteer grandparents"), and others. These family services need to be provided concurrently with efforts to help the youth develop coping skills that will enable him/her to refrain from drug use even if all of the family's problems are not resolved.

**Programs need to promote the involvement of youth in school and other activities that capitalize on their strengths, increase their sense of belonging in the community, and provide a wholesome support system.**

Most youth who come enter a juvenile drug court are

not enrolled in school and are already isolated from the mainstream adolescent community. Assuring that each participant is enrolled in school has been a priority for almost all juvenile drug court programs. Increasingly, a school representative is joining the juvenile drug court "team".

If participating youth are also associating with peers who are also engaged in drug use and/or criminal activity, they will need to sever those ties if they are to succeed in the drug court. While group therapy sessions may provide some comraderie for participants, they will need to become part of a more "mainstream" social network that can overcome their isolation, satisfy their need for belonging, and support a drug-free lifestyle.

Most juvenile drug courts have also found that, while the 12-step model is extremely effective in providing a support system for *adult* substance users, it has not had similar success with juveniles. Most adolescents do not see themselves as "addicts" and, with their minute-to-minute thinking, have not yet developed the view of the future upon which successful AA/NA participation is premised. Juvenile drug court programs have therefore needed to find substitute community support networks for participants that can function for youth much as AA/NA programs do for adults.

**Programs must provide participants with opportunities for skill-building and competency development**

Many youth involved with substances and with juvenile drug courts, in particular, have very low self-confidence and little self-esteem -- factors frequently related to their substance use. During the course of program participation, many exhibit special talents in a variety of areas — art, music, creative writing, athletics, computers, for example — which they have never themselves recognized nor developed. Activities aimed to promote skill-building and competency development and which capitalize on and promote development of the *strengths* of a youth are vital to giving him/her a reason to be drug free and to sustain him/her as an adult. Most juvenile drug court programs are therefore developing an extensive array of experiential activities, such as art therapy, creative writing, athletic programs, computer training, modified "outward bound" programs, as well as vocational and job-readiness training and placement.

**All team members need to develop a shared belief system and adhere to**

### **common program goals and policies.**

The multi-disciplinary nature of juvenile drug court programs and the variety of agencies involved in providing juvenile and family services make it imperative that the representatives of these various participating agencies agree on the overall goals of the program and the goals and objectives for their respective services. Their shared belief system becomes the framework for the delivery of all program services and should include such issues as: “who is the client?” who is responsible for the client?” “what are the client’s needs?” “how do we meet them?” “what is improvement?” How do we measure success?” “How do we move a youth from risk to hope? to promise?”

### **Training, retraining and cross-training is critical for all involved in the program and at all levels**

Despite the degree of academic training and prior experience of those involved with juvenile drug courts, these programs represent a radical departure from traditional practice of the disciplines involved. The need for practical training and cross-training of practitioners working with the juvenile drug court at all levels cannot be overstressed. Training topics should include addiction; pharmacology; recovery (as it applies to youth, compared with adults); adolescent development and the impact of adolescent developmental concepts on program design and communication; and cross-training on the roles and disciplines represented among the agencies comprising the drug court team.

## **II. Challenges Now Being Addressed**

The insights garnered during the initial phase of juvenile drug court experience have provided perspective as to what appears to work and what does not. While these insights do not provide easy answers regarding the specific program elements effective juvenile drug courts need to develop, they provide a useful framework for further experimentation. Within that framework, juvenile drug courts are now addressing the following common issues:

### **Developing meaningful program goals and measures of program “success”**

Despite the wide range of impacts achieved, adult drug courts have had a fairly focused primary purpose: reduce drug use and recidivism. If the adult

program achieves these goals, the program is considered successful. However, because the youth participating in juvenile drug courts are at such a vulnerable developmental stage, most agree that juvenile drug courts must seek additional goals beyond those of reducing drug use and recidivism if they are to truly break the cycle of addiction and criminal activity. Unless the youth become involved in activities that hold long-term promise of sustaining their efforts to be drug free, many practitioners are concerned that their effort to stop using drugs while in the drug court program will not be sustained in the long run.

What measures should a juvenile drug court program realistically seek to achieve in terms of behavioral change in participants? The following are those most commonly suggested:

- C reduction in the use of alcohol and other drugs<sup>3</sup>
- C reduction in further criminal activity
- C improved academic performance, including graduation, attainment of a GED, enrollment in college, and/or enrollment in vocational training
- C obtaining/retaining a job
- C development of indicia of a healthy “lifestyle”
- C association with a peer group whose activities and interests appear to reduce the likelihood of further drug and criminal justice system involvement
- C meaningful participation in a school activity, hobby, or other constructive activity.
- C development of skills and competencies
- C strengthening of the family system to promote long term support of the youth’s efforts to become drug free
- C improved capability to manage stress
- C increased involvement with community activities; and
- C improved relationships with family members

### **Determining how to reach the youth who need the services of a juvenile drug court**

There is a great sense that juvenile drug courts are only touching “the tip of the iceberg”. In part, the limitations of existing programs are due to resource shortages, both for general treatment and support

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<sup>3</sup> A number of programs also preclude tobacco use.

services and for addressing the diversity of special needs presented by youth who are otherwise eligible for program participation. In part they also call into question the eligibility and screening procedures that programs are using and the cultural relevancy of the services that are being provided. Many juvenile drug courts are now analyzing the demographic and other characteristics of the youth who are entering their justice systems and comparing these characteristics with those of the participants who are entering and remaining in the juvenile drug court. To the extent significant differences emerge in any one category, these differences are triggering re-examination of program policies, procedures and services.

### Getting the “family” involved

As noted earlier, the experience of juvenile drug court programs has highlighted the need to focus on the family and environment of the juvenile. Regardless of skill and training of service providers, it has become increasingly apparent that the programs cannot effectively deal with a youth’s substance use and other behavioral problems without focusing on the family environment in which the youth functions. Almost all programs, however, have experienced frustration in getting families involved, even with the recognition that “family” must be defined liberally. The direction in which many programs are therefore now moving is to provide family services in the home -- e.g., “family focused” services.

The underlying philosophy of family focused services is to empower the family to address the needs of the juvenile as well as resolve the family’s own problems related to those needs. Recognizing that families may be defensive, resentful and distrustful of the court and the justice system, the court needs to stress to the family that these services are designed to *support* the family and that the court and family are working together to help the child. Requirements need to be simple and expectations attainable.

The goals of most family intervention services being developed by juvenile drug courts to date are to:

- C obtain an accurate picture of the family dynamics that may bear on a youth’s behavior and which might not surface in a group setting or in court;
- C identify the strengths of the family and the youth which can provide a foundation and framework for developing a support structure for the youth; and
- C develop a strategy to empower the family to

deal supportively with the youth during the period of the Court’s involvement and afterward.

Although the family services components being developed by juvenile drug courts differ, they share common elements:

- C provision of a family case worker, or therapist, to work with the entire family in the home several times each week for several months to help establish the changes in relationships and support necessary for the juvenile to meet the goals of the juvenile drug court program;
- C time and effort expended by the caseworker to identify --through *conversation*, rather than interrogation -- the strengths and values within the juvenile’s family and environment that can be built upon to support the youth’s participation in the juvenile drug court program. Who are the influential members in the youth’s life? What are the youth’s interests? aspirations? What factors in the child’s history need to be taken into account in dealing with his/her current needs? What “resiliency factors” are present in the youth and the family that can be capitalized on?
- C empowerment of the family/parents/relatives, primarily through:
  - C fostering the development of parenting skills and, particularly, skills in parenting an adolescent;
  - C provision of drug/alcohol treatment for the juvenile, as needed
  - C strengthening family relationships so as to improve the youth’s behavior within the family structure

Practitioners well recognize that there will always be problems with which many families will be unable to deal and that, regardless of the effectiveness of the family support system, the program must also help the juvenile develop his/her own coping skills to sustain him/her in the long run. Nevertheless, it is increasingly apparent that the family must be considered a primary resource for the juvenile drug court program because the family and the dynamics within the family frame the environment in which the youth must function.

### Determining how to motivate youth

Regardless of the nature of services provided and incentives offered, the bottom line for most programs has been: how to motivate youth to want to change their behavior? to look beyond the moment to where they might be in six months or a year, let alone a lifetime? To get beyond the values of their current peers for whom the goals of the drug court may likely be in total opposition to their present lifestyle? There are no easy answers.. Most programs are experimenting with a variety of strategies, some formal and some informal, many of which are discussed in this report. In the long run, creating a stable environment which promotes trust, credibility, and respect, together with the confluence of intangible factors that comprise optimum *timing*, are, at this point, considered key.

### **Developing Effective Treatment Strategies and Content** (for both juveniles and families)

Juvenile drug court judges, in particular, have expressed the need to become informed consumers of treatment services for juveniles and families. What are the critical elements of programs and services they should look for? What are the “deliverables” these services should provide? While the characteristics listed earlier provide a framework for reviewing treatment services, what practical examples have been developed that illustrate their effective application?

### **Adapting Drug Testing Protocols to Juvenile Drug Court Participants**

Drug testing is the cornerstone of drug court programs. Adult drug testing has been practiced for several decades in a number of settings. Drug testing of juveniles, however, is relatively new and must address a number of special issues relating to both their adolescent developmental and legal status. Most adolescents have a highly developed sense of privacy and perception of their bodily image. Many juvenile drug court participants have also been sexually or physically abused. Juvenile drug testing protocols and staff need to take these perceptions into account. Most programs recognize that, like any medical procedure, the testing process needs to be explained to the participants at the outset. What setting is appropriate to conduct the testing that both protects the youth’s privacy as well as the staff from potential allegations of abuse?

### **Dealing with Dually Diagnosed Participants**

As has been the adult drug court experience, juvenile drug courts are finding that a significant percentage of participants have co-occurring mental health problems. Adequately addressing the needs of these youth presents special challenges for juvenile drug courts. What type of services are needed and who will provide them? Expanded community resources are also needed to conduct adequate participant assessments of potential mental health needs and to provide follow up services to address them.

### **Addressing the role of gang involvement in criteria for program eligibility**

Since their inception, juvenile drug courts have not shared uniform policies regarding the role a participant’s gang involvement should play in determining program eligibility. This situation continues. Most programs, however, are looking toward the nature of the gang involvement rather than simply making a decision based on whether or not a potential participant has had gang ties.

### **Determining how to address peer pressures**

Peer ties for an adolescent are extremely strong — in many ways much stronger than for the adult drug court participant. Simply telling an adolescent that he or she must find new friends who don’t use drugs and who share the goals of the drug court has very limited effect. Nurturing the youth’s involvement in constructive activities and with individuals who can reinforce positive values requires substantial efforts on the part of drug court practitioners, continuous reinforcement, and patience.

### **Identifying community support services that can be accessed as needed**

The juvenile drug court is requiring an even broader range of community support services than adult programs. Linkages with the educational systems, mentors, agencies that provide family services, volunteers who can serve as surrogate parents — are but a few of the special services juvenile drug courts need to be able to access on a regular --- and often limited notice — basis.

### **Assessing the merits of pre-plea vs. post-plea programs**

While adult programs appear to function well as both *pretrial* and *post adjudication* programs, most

juvenile drug courts are recognizing that they lack adequate authority to supervise and sanction noncompliant behavior unless they function as post-adjudication programs. Without the entry of a plea of involvement up front, most juveniles are able to “opt out” of a juvenile drug court program at will, thereby submitting themselves to whatever sanction might be applicable to the charge bringing them into the program in the first place. In most instances, the applicable sanctions are minimal and often far more palatable to an adolescent than the rigid “in your face” requirements of the juvenile drug court.

#### **Determining the optimum length for program participation**

The adult drug court model has generally required 12-15 months of participation. Many juvenile drug courts started out with that required timeframe as well. But is that too long a period in a youth’s life? Should the required period of participation be, for example, half that period? Should program services be structured in terms of dealing with acute issues and then following up with less intensive aftercare services?

#### **Developing aftercare and alumni activities**

Initially, some practitioners viewed alumni activities as an area that would command little interest from participants. This view, however, has not been corroborated by experience. Developing active alumni associations and aftercare services appears to be as significant an activity for juvenile drug courts as it has been for their adult counterparts. The structure the program has provided for the lives of many of the participants appears to have provided a surrogate or complementary family for many of the participants which they do not want to lose upon graduation.

#### **Promoting cultural competency throughout all program components**

Recognizing the importance of defining “culture” in terms that include, but also go beyond, race and ethnicity, what are the earmarks of a *culturally competent* program? What indicia might suggest the need for improvements in this area? Are special issues presented for drug courts in rural areas vs. urban in terms of the exposure of youth to street violence? economic and/or social isolation? What training do those involved with these program need? Are juvenile drug courts attracting and engaging African American and Hispanic youth, particularly

males who currently comprise such a significant proportion of the population under criminal justice supervision? Are changes in policies, procedures, services, staff training, for example, needed in this regard?

#### **Interdisciplinary Team Building and Dealing with the Practical Implications of “Collaboration”**

Juvenile drug court programs entail the working together of a myriad of legal, justice system, social service, educational, substance abuse, public health and other agencies. Coordination of these various services and service delivery processes is particularly critical to prevent both fractured and/or redundant service provision. Despite the best efforts at collaboration, frequently territorial issues are also encountered. Who, then, sets priorities in terms of services that need to be delivered, particularly when the services needed for juvenile drug court participants and their families may be competing with the service needs of other clients in these agencies’ caseloads?

As in the adult drug court model, there is also the continuing need for team building -- sustaining the commitment of those who’ve already been involved with the program and getting buy-in from new individuals who come on line and into power.

#### **Institutionalizing the juvenile drug court and dealing with changing local political situations**

Like their adult counterparts, juvenile drug courts are addressing “institutionalization” issues from a variety of perspectives: developing acceptance from the court as a whole; obtaining funding sources to sustain them; developing the interagency collaborations to support them; and developing management information to provide evaluative reporting. Changes in local political situations, whether within the justice system or beyond, can still make these programs vulnerable.

### **III. Agenda for the Future**

In addition to their common substantive characteristics, the hallmarks of juvenile drug courts have been *flexibility; innovation; and ongoing reassessment and fine-tuning*. The issues currently being addressed, outlined above, will undoubtedly yield additional insights regarding what works and what doesn’t. Given the momentum already

established for the development of juvenile drug courts, their evolution over the next few years will likely significantly expand upon the experience and expertise developed to date.

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