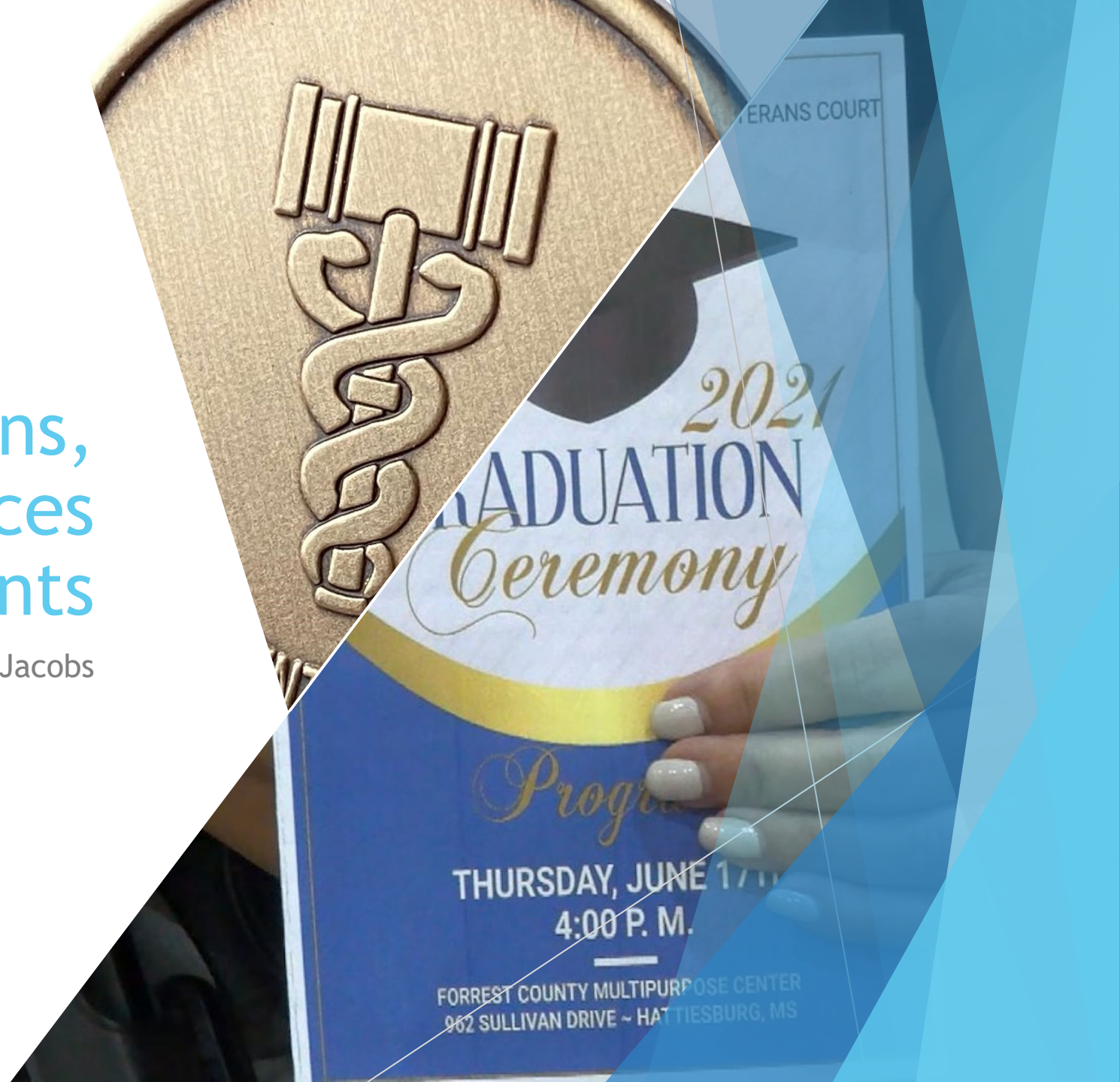


Incentives, Sanctions, And Services Adjustments

Developed by Cliff Jacobs



Disclosure

This project was supported by Award #15PBJA-23-GK-02440-DGCT from the Bureau of Justice Assistance. The Bureau of Justice Assistance is a component of the Department of Justice's Office of Justice Programs, which also includes the Bureau of Justice Statistics, the National Institute of Justice, the Office of Juvenile Justice and Delinquency Prevention, the Office for Victims of Crime, and the SMART Office.

Points of view or opinions in this document are those of the author and do not necessarily represent the official position or policies of the U.S. Department of Justice.

Additionally, points of view or opinions in this document are those of the author and do not necessarily represent the official position or policies of the National Center for State Courts (NCSC).

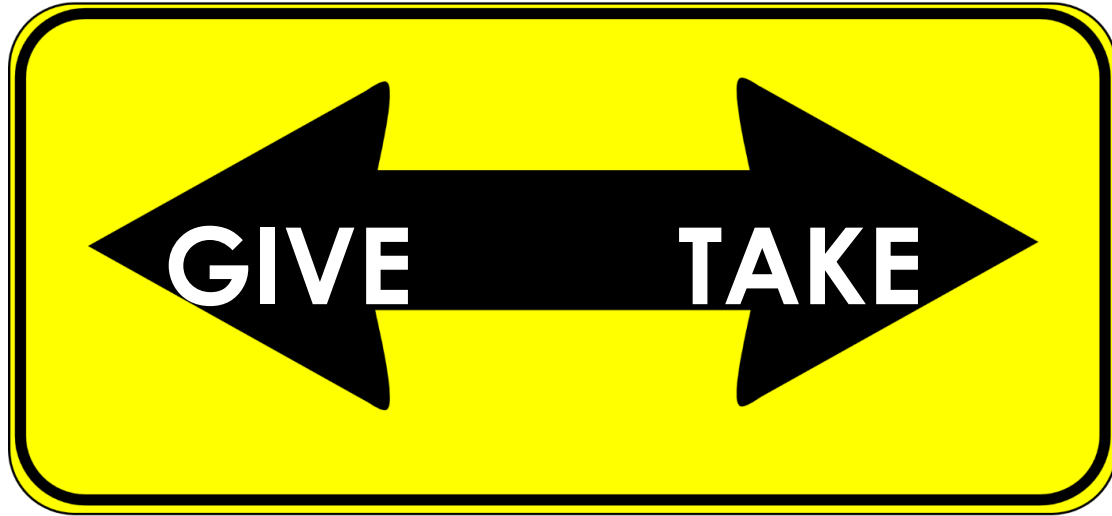
Learning Objectives

- 1). Behavior modification is a process that looks different for each participant.
- 2). Proximal and distal. Is demand too high? Have we set participants up for success or failure?
- 3). Effectiveness of the multidisciplinary team.



What Does History Tell Us?

- A response or lack of response to a participant's behavior will make the behavior more or less likely to reoccur
- Applying behavioral learning science to criminal justice populations that include treatment courts has led to researched-based principles for success
- Behavior Modification the timeliness in which a response has occurred will either make the participant's behavior more or less likely to occur



- Incentives = participants want
- Sanctions = participants do not want
- Services = participants need



THERE IS NO ONE WAY

INCENTIVES

Positive Reinforcement

Negative Reinforcement

SANCTIONS

Punishment

Response Cost

THERAPEUTIC ADJUSTMENTS

Initiate or Increase

Remove, Reduce, Replace

We All Have Goals

Proximal: goals participants can achieve in the short term and sustain for a reasonable time

Distal: goals that are too difficult for participants to achieve currently and which require service adjustments

Managed: goals that have been achieved and managed for a reasonable time

Clinical Stability

- Not experiencing symptoms that interfere with attending and benefiting from counseling.
- No persistent or severe cravings, withdrawal symptoms, anhedonia, impulsivity/stress reactivity, acute mental health symptoms, or cognitive impairment.

Psychosocial Stability

A participant is psychosocially stable when they have achieved:

- Secure housing
- Reliably attend appointments
- No longer experiencing clinical symptoms that may interfere with the ability to attend or benefit from interventions
- Developed an effective therapeutic or working alliance

Early Remission from SUD

At least 90 days of clinical stability

Until participants are in early remission...

...drug and alcohol testing should not be reduced.

...service adjustments are delivered as a response to use.

- **Early remission is achieved by the end of the fourth phase of treatment court.**

Incentives

- Participants receive copious amounts of incentives
- Minimum 4:1 ratio
- As much emphasis on incentivizing productive behaviors as on responding to infractions
- Phase progression and graduation should include evidence that participant is engaged in productive activities likely to support recovery and reduced recidivism

Incentives



- Realistic and achievable
- Desirable to participant
- Tangible and intangible
- Opportunity for reward

Sanctions

Proximal, distal, or managed goal infraction?

PROXIMAL: Goals participants can achieve in the short term and sustain for a reasonable time

DISTAL: Goals that are too difficult for participants to achieve currently and which require service adjustment

MANAGED: Goals that have been managed and achieved for a reasonable time

Sanctions

Proximal goal infractions:

- • Begin with low magnitude response (**Verbal Warning**)

Move to moderate magnitude response:

- Courtroom observations
- Instructive community service (**Meaningful, What are they getting out of this service**)
- Travel/association restrictions
- Electronic surveillance

Sanctions

If unsuccessful in deterring proximal infractions, ask if the goal is actually achievable?

Solution: Reevaluation for unrecognized barrier

If the goal is proximal after reevaluation, then a higher magnitude sanction is appropriate:

- Team roundtable
- Day Reporting
- Home detention
- Jail - no more than 3-6 days

Sanctions

Distal goal infractions:

Service adjustments, not sanctions, until...

- Early remission from compulsive SUD or mental health disorder

AND

- Developed coping skills and resources to achieve the goal

Remember!!!!

Early Remission: at least 90 days without clinical symptoms that may interfere with the participant's ability to attend sessions, benefit from the interventions, and avoid substance use (i.e. clinical stability). Such symptoms may include withdrawal, persistent substance cravings, anhedonia, cognitive impairment, and acute mental health symptoms like depression or anxiety.



Sanctions

- Jail used as a rare exception:
- Necessary to protect public safety or a participant from imminent and serious self-harm
- No less restrictive alternative is available

Sanctions

Managed Goal Infractions

Recurrence, regression, setbacks

What happened and how do we get them back on track

Common reasons:

- Insufficient preparation
- Pink cloud (riding a wave of bliss and emotion, is this REAL)
- Symptom recurrence
- Testing the limits

Sanctions (Challenges and Side Effects)

Learned helplessness: (facing negativity over and over, uncontrollable situation- stops trying to change their circumstance)

Ceiling effects

Not being taught what to do

Goldilocks effect: It's just right. Desirable outcomes come from an optimal balance.

Demoralization

Perfectionism

Abstinence violation effect: Someone who has achieved abstinence and falls off the wagon.

Phase Promotion

- Predicated on achievement of defined behavioral objectives
- Sanctions for infraction or behavior previously deemed to be distal may become more stringent
- Incentives for positive behavior may decrease
- Treatment, supervision, and court requirements may decrease
- Drug testing frequency remains constant until only after all other requirements have decreased and team determines that those reductions have not triggered recurrence

Phase Demotion

No phase demotion because:

- Demoralization
- Abstinence violation effect

What do we do:

- Understand what happened
- Develop a plan with the participant
- Can have a service adjustment that may include additional supervision and/or treatment adjustment

Service Adjustments

Service Adjustments are NOT presented as Sanctions

- Supervision adjustments
- Increasing, or decreasing court status hearings
- Sessions with community service officers
- Adjusting drug/alcohol testing
- Field visits

Service Adjustments

Psychosocial Stability

- Stable housing
- Reliable attendance
 - Attending more than 90% for at least one month
- Therapeutic alliance AND
- Validated instruments

Remember!!!!

PSYCHOSOCIAL STABILITY: When participants have

- secure housing,
- can reliably attend treatment court appointments,
- are no longer experiencing clinical symptoms that may interfere with their ability to attend or benefit from Interventions (i.e., clinical stability), and
- have developed an effective therapeutic or working alliance with at least one treatment court team member.

Service Adjustments

Psychosocial Stability

Clinical Stability: No longer experiencing...

Persistent cravings

Withdrawal

Anhedonia

Executive dysfunction

Acute mental health symptoms/cognitive impairments

Service Adjustments

Treatment Adjustments

- Clinical evaluation to identify symptoms interfering with achievement of distal goals
- Non-clinically trained team members should not impose, deny, or alter treatment plans
- Until participants have achieved early remission, treatment adjustments, not sanctions, are utilized

Service Adjustments

Treatment adjustments may include:

- Increasing frequency of sessions, level of care, supervision, monitoring, type of treatment
- Initiating Medication for Addiction Treatment (MAT) if recommending by a qualified medical practitioner
- Implementing harm reduction strategies
- Having participants report daily to treatment
- Developing a specialized counseling group

Service Adjustments

Learning Assignments:

Not delivered as a sanction

May include:

- Activity log
- CBT assignment
- Essay assignment
- Life skills assignment

An illustration featuring a hand reaching out from behind vertical prison bars. The hand is light-skinned and appears to be holding onto the bars. The background is dark and moody, with a large, stylized figure of a person in a dark suit or uniform, possibly a police officer or guard, standing behind the bars. The figure is rendered in a dark, almost black, color with some highlights. The overall composition is layered, with the hand in the foreground, the bars in the middle ground, and the figure in the background. The right side of the image has a blue, geometric, abstract overlay.

Preventative Detention

Proper Use

- Imposed judiciously and sparingly
- Only for proximal goal infractions
- Only after numerous lesser sanctions have been attempted and failed, unless immediate public safety risk exists
- Definite in duration and typically last no more than 3-6 days
- Access to counsel and a hearing when facing jail

Improper Use

Not used during first 30-60 days

Not for treatment

Minimal gains from jail/prison treatment

No MAT available

No preventive detention

Must have clear/convincing evidence of imminent risk and no
less restrictive alternative is available

Caution: Jail Sanctions

High need individuals are vulnerable to severe negative side effects from a jail environment

- Interruption of treatment and support
- Interactions with high-risk peers
- Stress reactions
- Habituation to highest magnitude sanction
- Ceiling effect

Do not incarcerate for use

Among women incarcerated in local jails, the average annual mortality rate due to drug/alcohol intoxication was nearly twice that of their male counterparts. The median length of stay in jail before death from alcohol or drug intoxication was just one day.









Strategic Plan

Documents your core values and purpose, your long-term strategic vision and your top priorities for 3 years, 1 year, and next quarter.

A close-up photograph of a hand holding a blue pen, writing on a white notepad. The notepad has some faint, illegible handwriting on it. The background is a solid blue color with some geometric shapes.

Put It Down In Writing!!!!

Putting your sustainability plan in writing will focus efforts on the task. The TEAM can set and achieve goals, as well as develop new and realistic goals. Written documentation is a roadmap to track progress and identify barriers along the way to success.

- What needs to happen prior to program implementation
- Developing a Steering Committee and who to include
- Developing a relationship with the media





Media Involvement

- Utilize media platforms.
- Develop a relationship with your local media early. If you are an operational Treatment court, it is NEVER too late !!!
- The media can be your biggest supporter

Data & Evaluation

All team members recognize the importance of having an evaluation plan. This is a shared responsibility (who, when, what, where, and why?). An evaluation plan contains clear, measurable goals.



Tips for Sustainability

- 1). Community. Let the community know what you are doing. Market your program to the community.
- 2). Educate: Take every opportunity to education family, community, peers, colleagues about your program. Develop educational programs or forums.
- 3). Materials: Posters, brochures. Anything that will catch a person's eye. This is an opportunity to educate a larger demographic.

St. Louis Drug Court

KEY TO YOUR **FREEDOM**

Free from ...

Felony Charge • Prison • Life of Crime
Street Violence • Losing Your Kids
Lack of Education • Unemployment
Drug Dealers • Death by Overdose

Tell your lawyer ...

Ask the Judge
to Screen for Drug Court

*Drug Court is the **Key to Your Freedom***

www.stlcitycircuitcourt.com
314-992-0858 for recorded information

Considerations

- ✓ Develop a Funding Plan: Monetary vs. Non-Monetary resources. There is great value in both.
- ✓ Strategic Planning: What to incorporate into the plan.
- ✓ Review Annually



Remain Committed

Sustainability leads to Institutionalization

Uh-oh: What do we do now



- What is your plan if or when something goes wrong?
- Are preparations in place to respond to programs or issues?



Funding



Federal Monetary Resources

Bureau of Justice Assistance (BJA)

- Justice Assistance Grants (JAG)
- Drug Court Discretionary Grants (Planning and Implementation, and Enhancement.)

Housing of Urban Development

Department of Labor

A photograph of the U.S. Capitol building in Washington, D.C., showing its iconic dome and classical architecture. An American flag is visible on a tall pole to the right of the building. The sky is a clear, deep blue.

Federal Monetary Resources

Substance Abuse and Mental Health Services Administration(SAMHSA)

- Grants to expand substance abuse treatment capacity in Adult Treatment Drug Courts (SAMHSA: Treatment Drug Courts)
- Grants to expand substance abuse treatment capacity in Adult Tribal Healing to Wellness Courts and Juvenile Drug Courts (SAMHSA: Treatment Drug Courts)

Federal Monetary Resources

FAST ACT (DWI Courts)

Impaired Driving counter measures section 405(d): National Priority Safety Programs. NHTSA Administers over \$500 million in grant programs annually.



State Level Funding

State Funding

State Highway Safety Offices. NHTSA appropriates money to states to implement and enhance DWI Courts.

Direct legislative appropriation. For court administration & treatment (i.e., Oklahoma provides \$18 million per year in dedicated funding from general budget).

Dedicated court fund. 2% surcharge on gross sale of beverage alcohol (i.e., Idaho projects \$1.5 million per year)

Local Funding



- County Funding
- Municipal or City Funding
- Criminal Justice Authorities
- Foundations



What are Grants

- 1). Grants are short-term
- 2). Grants are competitive
- 3). Grants are not entitlement
- 4). Grants are not guaranteed

Partnerships

Collaborate: On grants or funding requests with other agencies. They may write and administer the grant.

Service Referral Networks: Refer clients to government agencies (job training, vocational training, childcare assistance, etc.)

Community Social Services Agencies: Refer clients to medical care, dental care, food and housing services.



Elevator Pitch



Events & Donations



Community Connection

Create Steering Committee to formalize linkages and offer continuing oversight

Conduct treatment court education programs

Community Connection

Create community service projects that are of value to your participants.



Community Connection

Set up projects and invite the media. Get your treatment court's name out there in a positive light.

VETERANS DRESS FOR SUCCESS

WHEN

**Monday November 7, 2016
1pm - 5pm**

WHERE

Spencer Road Branch Library
427 Spencer Rd, St Peters, MO 63376
Come around to the second level where it says
Community Commons

THIS IS A FREE EVENT!

Come pick out some dress clothes

SERVING THOSE WHO SERVED

**ALL VETERANS
OR ACTIVE
MILITARY**

MUST PRESENT A FORM OF IDENTIFICATION

- VA Card
- DD Form 2
- Driver's license or ID w/
veteran designation

OR

- A photo ID w/DD214
- A photo ID w/ proof of
membership to VFW,
DAV or American

SPONSORED BY



Fundraising

To be clear, ***WE ARE NOT***
suggesting that judges ignore
their judicial canons of ethics
regarding solicitation of funds or
donations

Community Mapping

Treatment Court

- Law Enforcement/Probation

- Recreational/Libraries

- Mental Health Services

- Family Therapy

- Government Agencies/Officials

- Social Services

- Community Foundations

- Faith Community

- Schools/Colleges/Universities

- Service Organizations

- Housing/Transportation

- Arts

- Health

- Employment/Job Training

- Mentoring Programs

- Residents


- Literacy Programs

- Treatment

- Businesses


- Community-Based Organizations

Rural Community Toolbox

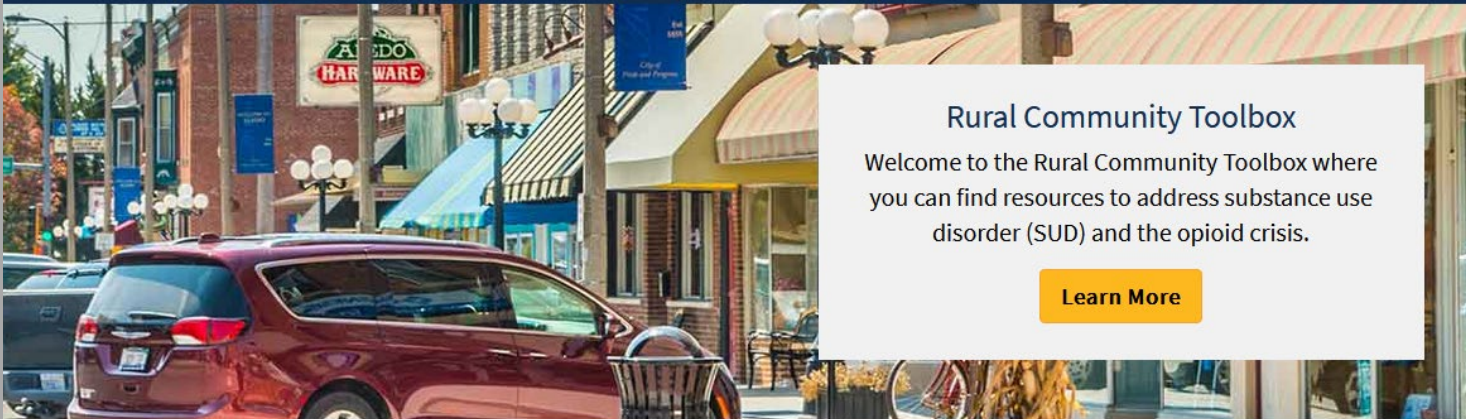


Rural Community Toolbox:
FUNDING & TOOLS TO BUILD HEALTHY DRUG-FREE RURAL COMMUNITIES

ABOUT THIS SITE | CONTACT

Search 

STARTING POINTS | FUNDING | TREATMENT & SERVICES | INFORMATION RESOURCES | EXPERT HELP & TRAINING | COMMUNITY ASSESSMENT | RURAL COMMUNITY ACTION GUIDE



Rural Community Toolbox

Welcome to the Rural Community Toolbox where you can find resources to address substance use disorder (SUD) and the opioid crisis.

[Learn More](#)

Federal resources that can help rural communities become strong, healthy, prosperous, and resilient places to live and work.

I am looking for

Select an Option ▼

Takeaway

- ▶ **Make a plan and a back-up plan.**
- ▶ **Be creative; imagine the unimaginable.**
- ▶ **Remember, money is not the only resource.**

Brag: Publicize your Treatment Court



Ask for what you need



Borrow: Copy great ideas



Cliff Jacobs

jacobs_cliff@yahoo.com



Resources

- ▶ Adult Drug Court Best Practices Standards, Volume II. Standard X Monitoring and Evaluation. (2015). National Association of Drug Court Professionals, Alexandria, VA. Available at https://allrise.org/wpcontent/uploads/2023/12/Adult-Drug-Court-Best-Practice-Standards-Volume-2_Standards-VII-X_TextRevision-December-2018.pdf
- ▶ Adult Treatment Court Best Practice Standards: Definitive Guidance for Treatment Court Practitioners. Standard VI Complementary Services & Recovery Capital (2023). All Rise, Alexandria, VA. Available online at https://allrise.org/wp-content/uploads/2023/12/All-Rise-Adult-Treatment-Court-Best-PracticeStandards-2nd-Ed.-I-VI_final.pdf
- ▶ Monograph Series: Ensuring Sustainability for Drug Courts: An Overview of Funding Strategies (2008). National Association of Drug Court Professionals, Alexandria, VA. Available at <https://allrise.org/publications/ensuring-sustainability-for-drug-courts-an-overview-of-funding-strategies/>