



## Short Communication

## Predictors of program failure in a juvenile drug court program

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## HIGHLIGHTS

- YLS/CMI risk profiles predicted outcome in a juvenile drug court program.
- Forty percent of the adolescent participants successfully completed the program.
- Adolescents with negative/antisocial attitudes were more likely to not succeed.
- A history of childhood abuse was marginally associated with program failure.

## ARTICLE INFO

## Article history:

Received 11 September 2015

Received in revised form 12 March 2016

Accepted 29 March 2016

Available online 4 April 2016

## Keywords:

Drug court

Adolescents

Substance abuse

## 1. Introduction

Adolescent substance use is a major social problem associated with academic underachievement, emotional/psychiatric symptoms, family conflict, and legal difficulties (Evans et al., 2005; Kaminer & Winters, 2011). Adolescents in the juvenile justice system have a high prevalence of substance use disorders (SUD) with multiple SUDs (e.g., alcohol and marijuana) being normative (McClelland, Elkington, Teplin, & Abram, 2004).

There are several major concerns regarding adolescent treatment. First, adolescent substance abuse treatments have high dropout rates. For example, of 160 admissions to residential treatment, only 30% of male adolescents completed treatment, making program failure a substantial issue in this population (Neumann et al., 2010). Second, adolescents with co-occurring disorders (e.g., depression) have more difficulty

completing treatment than those with just SUD (White et al., 2004). Third, some studies have found that psychopathic characteristics at intake have correlated with attrition, poor participation, and less clinical improvement (e.g., O'Neill, Lidz, & Heilbrun, 2003). Among adolescents enrolled in a short-term court program for first time offenders, those with higher levels of delinquency tended to have subsequent reports of heavy drinking and negative consequences (Hunter, Miles, Pedersen, Ewing, & D'Amico, 2014).

Drug courts were designed to address low treatment completion rates, frequent relapse, and recidivism, associated with substance abuse within the correctional system. As of December 2011, there were an estimated 476 juvenile courts operating (Huddleston & Marlowe, 2011). Research suggests that juvenile drug courts can be more effective than other treatments for adolescents (Henggeler, 2007) leading to their expansion (Alarid, Montemayor, & Dannhaus, 2012). However, few studies have examined predictors of program outcome in juvenile drug courts, creating a need to better assess who benefits or fails these programs. This study examined this question, extending prior literature on using a risk assessment instrument, the Youth Level of Service/Case Management Inventory, to this setting.

## 2. Methods

## 2.1. Participants

Participants included 96 adolescents participating in a juvenile drug court located in the northwestern United States. Ages ranged from 13 to 19 ( $M = 16.4$ ,  $SD = 1.1$ ); 64.6% were male, and 85% were Caucasian. Participants primarily reported using cannabis (69%) as their drug of choice with 15% reporting alcohol and 13% methamphetamine. Average age of first use was 12.75 years ( $SD = 2.2$  years). Thirty-three percent of participants indicated daily substance use, with the remainder indicating use patterns of 3–5 times per week (31%), 1–2 times per week (25%) and 1–3 times per month (10.7%). There was a high incidence of lifetime childhood abuse (34%), and 22% of participants had been diagnosed with a psychiatric disorder.

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## 2.2. Procedure

Data were collected as part of a local program evaluation project. The juvenile court program studied was representative of such programs (Henggeler & Marlowe, 2010; Hiller et al., 2010) and involved initial assessment, collaboration with the county substance abuse provider, phase structuring, counseling, frequent drug testing, and ongoing judicial monitoring (along with sanctions/consequences and positive incentives). Participants under the jurisdiction of the juvenile court entered the program if they had a significant substance abuse problem.

A memorandum of agreement between court officials and university investigators was signed. Legal guardians of all participants were provided notice of the evaluation and provided the option of excluding an adolescent's data; none were requested. The study design for the project and consent process was approved by the University Institutional Review Board.

The evaluation design included all youth enrolled in the juvenile drug court program over approximately a three-year period. The court provided access to and data from case records within the local Juvenile Detention Center along with the state's electronic database system. All data were de-identified, compiled and entered into a database. Average time in program was 402 days ( $SD = 247.2$ ) with a range from 14 to over 1000 days. On average 84 drug tests were scheduled per adolescent; 8% were positive for substance use and 12% no shows which might be presumed positive. Eighty-five percent of participants experienced an instance of detention during their participation. Sixty percent received a new charge, the majority of which were substance-related, truancy, runaway, or theft.

## 2.3. Study measures

### 2.3.1. Demographic information

Standard demographic information included age, sex, and ethnicity.

### 2.3.2. Substance use and clinical information

Substance use history variables assess drug of choice, age of first use, etc. Clinical variables included any prior documented diagnosis of a mental health disorder, or history of trauma.

### 2.3.3. Youth Level of Service/Case Management Inventory (YLS/CMI)

The YLS/CMI was the primary risk assessment measure used by the program and was completed by probation officers at intake. The YLS/CMI is a 42-item instrument scored on eight domains of functioning: Offenses/Dispositions, Family/Parenting, Education/Employment, Peer Relations, Substance Abuse, Leisure/Recreation, Personality/Behavior, and Attitudes/Orientation. The YLS/CMI is the instrument most frequently used to assess risk among adolescents in the justice system and has been shown to have acceptable reliability (Campbell et al., 2014; Schmidt, Hoge, & Gomes, 2005). An emerging literature has demonstrated the YLS/CMI to have predictive validity, particularly in regard to recidivism, (Kingree, Phan, & Thompson, 2003; Olver, Stockdale, & Wong, 2012; Schmidt et al., 2005). YLS/CMI data were available for seventy-nine of the participants, and this instrument served as the major predictive variable for studying dropout or program failure.

### 2.3.4. Outcome measure

The primary outcome variable examined for this study was program failure. This was defined dichotomously (Y/N) as participants who did not successfully complete the program and were remanded to adult jail or Juvenile Detention. Program failure was highly related to participants failing/missing drug tests, dropping out of program, new charges, or some combination. Most graduates were abstinent for the last six months confirmed by urine analysis. Seven participants were transitioned and excused from the program by the court because of family relocation or transition into Job Corps making program failure a better measure of nonsuccess in the program per se.

## 2.4. Data analysis

Chi Square analyses examined the relationship between outcome status and demographic and clinical variables. Zero order correlations assessed the relationship of YLS/CMI domains and outcome status. Logistic regression analysis was used to examine unique predictors from the YLS/CMI variables and program failure. Since gender was unrelated to outcome, data on male and female participants were analyzed together.

## 3. Results

In regard to drug court outcomes, 39 adolescents successfully completed the drug court program (40.6%), with fifty program failures (52.2%). Seven participants were transitioned by the judge due to moving or entering Job Corps (7.3%). Neither gender nor age categories were significantly associated with outcome. Older participants were less likely to receive charges during drug court participation. Clinical data available were not significantly associated with program completion. However, having a history of childhood abuse was marginally associated with program failure,  $\chi^2(1, 84) = 3.64, p = 0.056$ .

Table 1 presents the zero order correlations between the YLS/CMI scales and program failure. Significant correlations existed between outcome and two YLS/CMI scales Offenses/Dispositions and Attitudes/Orientation. Adolescents rated as having more prior offenses and also as having more negative/antisocial attitudes were more likely to fail in the program. Further, logistic regression of the YLS/CMI risk profile on program failure resulted in a significant model accounting for approximately 22% of the variance in the criterion (Cox & Snell  $R^2$  = 0.218,  $p = 0.013$ ) (Table 2). The unique predictors for failing drug court were the YLS/CMI subscales of Substance Abuse  $\chi^2(1, 96) = 4.98, p = 0.026$ , OR = 0.533, Offenses/Dispositions  $\chi^2(1, 96) = 6.96, p = 0.008$ , OR = 1.809, and Attitudes/Orientation  $\chi^2(1, 96) = 6.31, p = 0.012$ , OR = 1.941.

## 4. Discussion

The present study expands upon the existing juvenile drug court literature by examining the utility of pre-admission YLS/CMI scores and clinical variables as predictors of program outcome. Adolescents in this rural drug court program primarily reported marijuana (69%) as their drug of choice, with average age for initiating drug use at 12.75 years. One-third of the sample reported childhood abuse and one-fifth had a psychiatric diagnosis. These data highlight the complex problems of adolescents in juvenile drug court settings.

Forty percent (40.6%) of participants successfully graduated the program, which compares favorably to prior evaluations (Hiller et al., 2010). Unfortunately, a number of participants failed to complete the program. The pre-admission YLS/CMI profile successfully accounted for 22% of the variance in program outcome; participants who were rated higher on the Offenses/Dispositions and Attitudes/Orientation domains and lower on Substance Abuse were more likely to fail the

**Table 1**  
Zero order correlations between YLS/CMI scales and program failure.

YLS/CMI scales	Program failure
1. Offenses/Dispositions	0.298**
2. Family/Parenting	0.146
3. Education/Employment	0.072
4. Peer relations	0.151
5. Substance abuse	−0.124
6. Leisure/Recreation	0.029
7. Personality/Behavior	0.085
8. Attitudes/Orientation	0.230*
Total YLS/CMI score	0.208

\*\* Correlation is significant at the 0.01 level (2-tailed).

\* Correlation is significant at the 0.05 level (2-tailed).

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