

How to Avoid the Top 10 Treatment Court Mistakes: What No One Taught You in Training



*Alternative Title:
View from the Road
And Mistakes I've Made*

Top Ten Treatment Court Mistakes In No Particular Order

Mistake

1

Staffing/Court Management Issues

Mistake

2

Personalizing Client Successes and Relapses

Mistake

3

Not Asking “Why Do We Do This?” enough

Top Ten Treatment Court Mistakes In No Particular Order

- Mistake 4 Not Asking the Clients what they Value when Establishing an Incentive Systems
- Mistake 5 Not Modifying Your Sanction and Incentive System Based on Proximal and Distal Goals
- Mistake 6 Making Your Sanction and Incentive System Too Complex

Top Ten Treatment Court Mistakes In No Particular Order

Mistake

7

Team Members Not Managing their “Issues”

Mistake

8

Not Managing Role Conflict/Ethics Within the Team

Mistake

9

Picking and Choosing Your “Favorite” Research and Ignoring the Rest

Top Ten Treatment Court Mistakes In No Particular Order

Mistake

10

Forgetting Why You Do This Work

Implementation Challenges

Mistake 1: Failing to Use Staffing and Court Effectively

30 second exercise:

Think of a teacher who had an impact on your life. What qualities did he or she possess. How would you describe that person?

Implementation Challenges

Mistake 1: Failing to Use Staffing and Court Effectively



The most effective programs use court to reinforce proximal goals and lessons from the week.



Staffing should be efficient – 20 to 25 cases can be staffed in an hour effectively if the team is prepared.



It is the team's job to prepare the judge to reinforce positive gains by offering good questions.

“Go to” Questions to Ask Participants in the First Month

- ✓ What has been the hardest part of the program so far?
- ✓ What are you looking forward to this week?
- ✓ Who are the important people in your life?
- ✓ What is helping you stick with the program?
- ✓ What do you enjoy doing outside of the program?
- ✓ Is there anyone in your life who helps you stay focused on your sobriety?

“Go To” Questions to Ask Participants When Sanctioning

- ✓ What did you learn from this event?
- ✓ Where do you think things started to go wrong?
- ✓ How are you feeling about what occurred?
- ✓ Why do you think you made that choice?

“Go To” Questions to Ask Participants in Higher Phases

- ✓ What is different about your life today?
- ✓ What are you working on in the program?
- ✓ What advice would you give to the new people in the program?
- ✓ What challenges are coming up for you?
- ✓ What did you fail at this week/What are you disappointed in yourself about this week and what did you learn from it?

If a participant is stumped by a question, give them a week to think about it (assign the question as homework). Not everyone is great on their feet.

Implementation Challenges

Mistake 2: Personalizing Client Successes and Relapses



Have you had a participant's **re-arrest for a new crime** really shock you?



Have you ever had a graduate you **REALLY** believed “had it together” **relapse within a day of graduation?**



Have you ever had a client die of an **overdose** or **commit suicide?**

We can't own our client's successes or setbacks.

Implementation Challenges

Mistake 2: Personalizing Client Successes and Relapses



Most treatment court professionals can instantly think of participant or two who epitomizes why working in a treatment court is so rewarding.



Being a part of a participant's transformation can be incredibly rewarding. .and also complicated when stories don't follow the perfect narrative.



As much as we say "recovery is a process" and "relapse is expected," we forget this quickly when we start seeing a client relapse.

Implementation Challenges

Mistake 2: Personalizing Client Successes and Relapses



Relapse right before graduation, the day/night of graduation or the day after is common.



Need to carefully examine how well you transition participants through the phases and what your final phase looks like.



Carefully examine the language you use with participants about change, how you talk about expectations, and whether you talk openly and authentically about struggles being part of the process.

30 Second Exercise:

Think about the a rule in your program
you don't agree with or you question.

Do you know why you have the rule?

Implementation Challenges

Mistake 3: Not Asking “Why Do We Do This?” Enough



Don't lose perspective on the relative importance of a behavior when sanctioning.



Common “hot button” issues:

- Relationships with known drug users/other participants
- Use of social media
- Being on time
- Lying

Implementation Challenges

Mistake 3: Not Asking “Why Do We Do This?” Enough



Just because you **CAN** control something in a participant’s life, doesn’t always mean you should.



Most treatment courts are very good at controlling/managing participants. Very few are good at helping participants internalize change. **Control is time limited. Internalization is permanent change.**



Be careful your program is not more focused on **making perfect treatment court participants** than helping clients live without treatment court.

Implementation Challenges

Mistake 3: Not Asking “Why Do We Do This?” Enough



TIP: If no one on the team can remember why you have a rule, or if you do something “because you always have,” it is time to talk about that rule.



Good question to ask: Would I want to read about the sanction on the front page of the newspaper?



Good question to ask: How does this rule help the participant **internalize change**? If the rule is more about “protecting” the client (especially after the first few months) or making the team’s life easier, rethink the rule.

30 Second Exercise:

If you had unlimited resources, what would your perfect incentive system look like?

Implementation Challenges

Mistake 4: Not Asking Clients What They Value



Most practitioners **instantly jump to gift cards** when they start developing their incentive system. Lots of things sound good in concept but can be misperceived by participants.



Participants value **program privileges** the most.



Have a **neutral third party** ask the participants what they would value. **DON'T** exclusively rely on surveys to identify this information.

Understanding the Perceived Value of Incentives in Community Supervision

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ABSTRACT

The use of incentives to promote offender compliance is becoming increasingly common in community supervision. Although evidence suggests that incentives can improve offender outcomes, little is known about how they can best be implemented to achieve desired results. Research in other fields demonstrates that incentive quality plays an important role in promoting behavioral change. Unfortunately, little is known about the perceived value of incentives utilized in probation and parole settings. The current study addresses this gap in the literature by examining the results of a survey administered to 200 adult probationers. Results indicated that earned compliance credits were rated most favorably, followed by a \$50 fee waiver, reduced reporting requirements, and a \$50 gift card. Recognition-based incentives received the weakest ratings. Multivariate analyses showed that individual level, as compared to offense- and supervision-level variables, had more consistent influences on perceptions of incentives.

KEYWORDS

Incentives; community corrections; offender perceptions

Table 3. Incentive ratings descriptive findings.

Incentive	Mean Rating
30 days earned compliance	86.5
15 days earned compliance	79.2
\$50 fee waiver	73.1
Reduced reporting	72.2
\$50 gift card	71.7
Travel permit	61.8
\$20 fee waiver	60.2
\$20 gift card	59.3
Curfew extension	49.0
Letter of recognition – probation officer	42.5
Letter of recognition – judge	42.5
\$5 gift card	37.6
Verbal recognition – judge	37.0
Verbal recognition – probation officer	36.6
Certificate of accomplishment	36.2
Public ceremony of accomplishment	32.2

But – one size does not fit all – females and individuals who were unemployed rated recognition higher.

30 Second Exercise:

What does a participant in your program have to do (what behaviors must be demonstrated) to move from Phase 1 to Phase 2?

What Are Your Expectations to Move to Phase 1

- ✓ Have to be drug-free (specific period of clean time?)
- ✓ Have to be employed?
- ✓ Be taking medication consistently?
- ✓ Have to tell the truth?
- ✓ Have to be on time for appointments?
- ✓ Have to not miss appointments?

Implementation Challenges

Mistake 5: Not Modifying Your Sanction and Incentive System Based on Proximal and Distal Goals



Common Issues in Phase 1: Unrealistic expectations of participants



Common Issues in Phase 1: Sanctions and incentives that do not align with realistic expectations.



Common Issues in Phase 1: Length of Phase 1 is too long

Sanctions and Incentives

Do They Vary by Phase?

Do you have the same **incentives** in every phase for:

- ✓ Being clean?
- ✓ Telling the truth?
- ✓ Showing up and being on time?
- ✓ Being employed?

Do you have the same **sanctions** in every phase for:

- ✓ Testing positive?
- ✓ Lying?
- ✓ Being late?
- ✓ Missing appointments/treatment?

Implementation Challenges

Mistake 5: Not Modifying Your Sanction and Incentive System Based on Proximal and Distal Goals



Your sanctions and incentives **should vary** based on the proximal and distal goals being addressed.



Failure to do this is either setting **too high of expectations** or **too low of expectations**.

Research tells us:

- Individualize responses based on risk and needs

BUT

- Be consistent AND fair AND transparent

AND

- Do this in a group environment

Implementation Challenges

Mistake 6: Making Your Sanction and Incentive System Too Complex



If you do not have the staff resources to consistently deploy your complex sanction and incentive system, **revise your system.**



Your clients pay meticulous attention to the fairness and equity of your system – **whatever you do, do it well.**



Your actual system – points, fishbowl, prize box, etc. – **is far less important** than the system being connected to proximal/distal goals, consistency & swiftness, incentives participants value and sanctions that are meaningful.

Implementation Challenges

Mistake 6: Making Your Sanction and Incentive System Too Complex



Don't be unintentionally punitive with your incentives:

If you give a pass for an activity as an incentive, don't withhold the activity if the participant loses the piece of paper.

30 second exercise:

Think about the person who sits to the left of you in staffing. What is their client “type”? What type of client drives them crazy?

Has your team ever had a favorite client?

Implementation Challenges

Mistake 7: Team Members Not Managing Their Issues



Favorite clients. *We all have them.* Not monitoring these issues is a recipe for a disaster.



Common Issues:

- Competition among staff/team roles
- Need for power
- Need to be loved/admired/approved of
- Desire to caretake

Implementation Challenges

Mistake 7: Team Members Not Managing Their Issues



Participants bring up issues for us – they remind us of people in our past, they remind us of people in our current life, they push buttons in us (e.g. power struggle), they have characteristics that make us sympathetic (e.g. Veterans status, pregnant, etc.), they are facing issues we may be facing in our own life (e.g. relationship issues, child raising issues), or may be making decisions about things that we have values and opinions about (e.g. abortion, divorce)

Implementation Challenges

Mistake 7: Team Members Not Managing Their Issues



We bring up issues for participants – we remind them of people in their past, we push buttons in them (e.g. power struggle), they may react to our race, gender, age, and they fear our judgment as they share intimate details about their life.

Implementation Challenges

Mistake 7: Team Members Not Managing Their Issues



The key is to be **aware of these issues** and how they impact decision-making.



Be cautious about altering rules for specific people – sometimes this is an indicator of an issue at play.

30 second exercise:

What is one thing you think the rest of your team doesn't understand about what it is like to be you (in your role) on the team?

Implementation Challenges

Mistake 8: Not Managing Role Conflict



Judges: How hard it is to say something unique and profound each week. How hard it is to share decision-making and be comfortable with team decision-making.



Prosecutors: I don't always want to put people in jail. I'm the one who has the most at risk if a participant goes out and commits a new crime.



Defense Attorneys: I sometimes think some jail time is appropriate. Balancing the ethical issues is challenging.

Implementation Challenges

Mistake 8: Not Managing Role Conflict

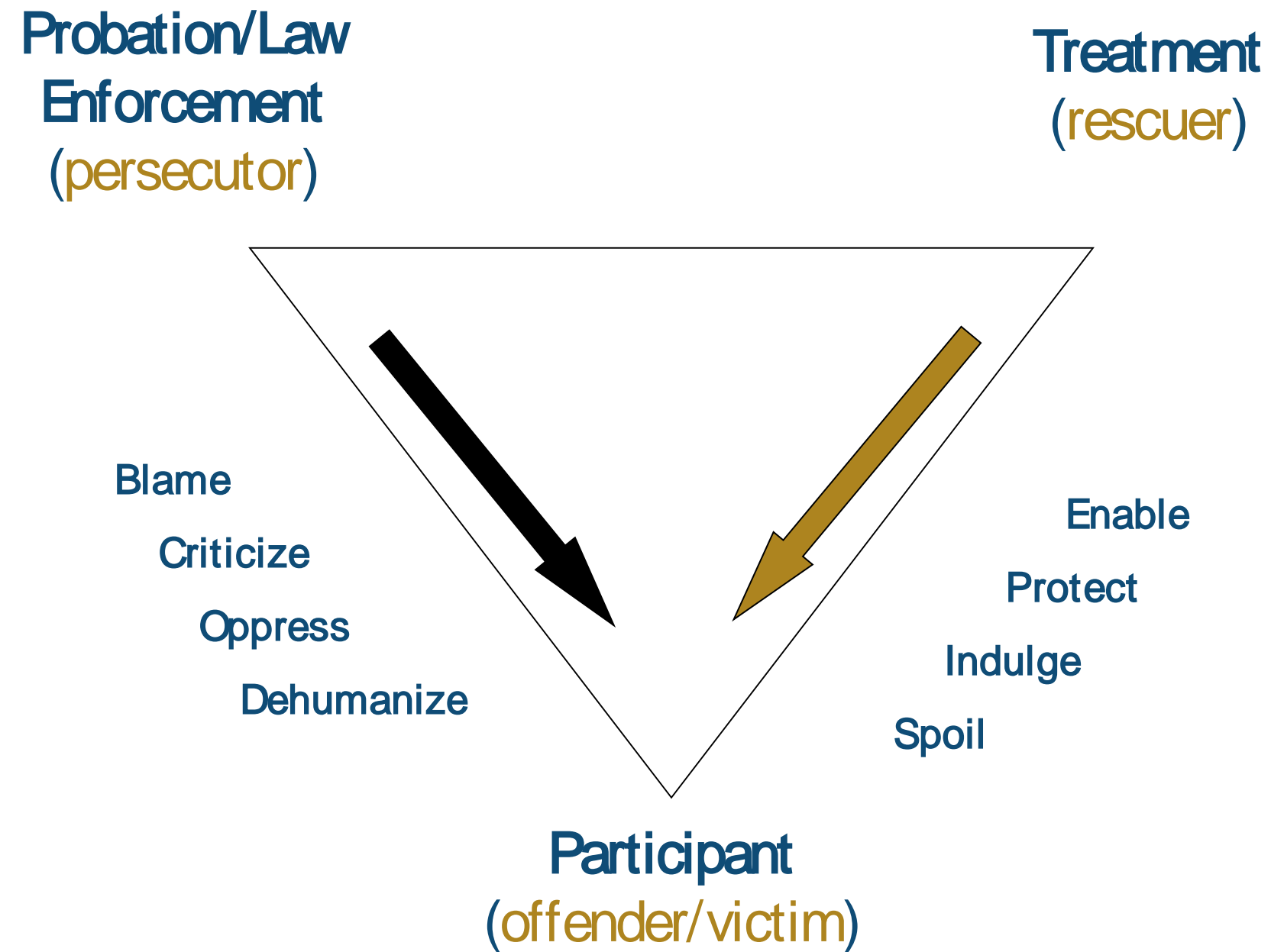


Probation/Law Enforcement: I sometimes don't understand what treatment is talking about. I really am not trying to put every client in jail.



Treatment: I sometimes don't understand what the rest of you all are talking about (legal language). I worry about what to disclose and what you all will do with that information.

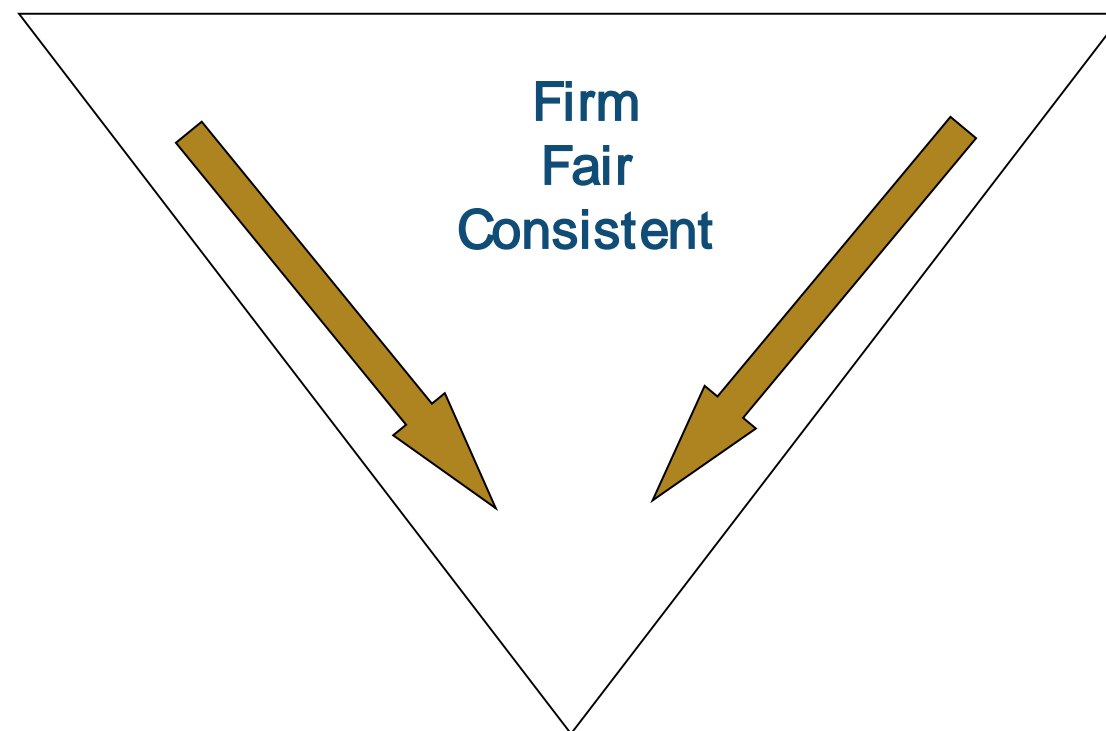
Drama Triangle



Accountability

Probation/Law
Enforcement

Treatment



Participant

Implementation Challenges

Mistake 8: Not Managing Role Conflict



Ways to manage role conflict:

- Talk about conflict openly and discuss why the conflict exists.
- Communicate frequently with one another.
- Attend training together.
- Socialize together and celebrate your achievements.
- Meet together twice a year to plan program activities – rule changes, procedure changes, etc.
- Visit other treatment courts at least once a year.

30 second exercise:

What is one piece of treatment court research you find yourself reflecting on regularly or bringing up regularly in staffing?

What is one piece of treatment court research you question?

Implementation Challenges

Mistake 9: Picking and Choosing Your “Favorite” Research and Ignoring the Rest



Comes up the most with sanctions and incentives.



Make sure you don't ignore the other 90% of the research. Stay open and curious. Challenge your beliefs and participate in research.

30 second exercise:

What did it feel like to be brand new to the treatment court? How did you feel about your work?

How do you feel about your work now?

Implementation Challenges

Mistake 10: Forgetting Why You Do This Work



Burnout is a process and becomes progressively worse if not managed.



Burnout is Characterized by:

- Lack of Enthusiasm
- Withdrawal
- Reduced Empathy
- Fatigue
- Negativity, powerlessness, hopelessness
- Lack of confidence in skills
- Maladaptive coping behaviors (including substance use) and decrease in healthy self-care.

Implementation Challenges

Mistake 10: Forgetting Why You Do This Work



Secondary Traumatization + Burnout = Compassion Fatigue
(Figley, 1995):



Symptoms of Compassion Fatigue

- Lack of energy
- Inability to ‘let go’ of client issues
- Perceive clients as fragile and needing your assistance
- Loss of enjoyment/end of self-care activities
- Loss of hope/dread working with certain clients
- Sense of inadequacy
- Obsessive or compulsive desire to help certain clients
- Thoughts and images associated with the client’s problems.

Implementation Challenges

Mistake 10: Forgetting Why You Do This Work



Phase 1 of Compassion Fatigue: The Enthusiasm Phase

- Committed, involved, available
- Sense that you are making a difference
- Willing to go the extra mile
- High enthusiasm
- Volunteer without being asked

Implementation Challenges

Mistake 10: Forgetting Why You Do This Work



Phase 2 of Compassion Fatigue: The Irritability Stage

- Begin to avoid participants
- Begin to mock co-workers and participants
- Begin to distance ourselves from friends and co-workers
- Begin to denigrate the people we serve.

Implementation Challenges

Mistake 10: Forgetting Why You Do This Work



Phase 3 of Compassion Fatigue: The Withdrawal Stage

- Enthusiasm turns sour and critical
- Participants become irritants, instead of people
- Tired all the time, don't want to talk about what we do
- We start to neglect our family, participants, coworkers and ourselves
- We try to avoid our pain and sadness

Implementation Challenges

Mistake 10: Forgetting Why You Do This Work



Phase 4 of Compassion Fatigue: The Quitting Stage

- Helplessness turns to frustration/anger
- We begin to dislike any and all people
- Others appear incompetent or ignorant to us
- We have no patience, no sense of humor, and no time for fun

Implementation Challenges

Mistake 10: Forgetting Why You Do This Work



Resilience

Researchers have found there are three (3) personality traits important to resilience:

- ✓ Commitment to balance (to self, family, work, values)
- ✓ Sense of personal control over one's life
- ✓ Ability to see change as a challenge to be mastered

Optimism also influences our responses to stress.

Implementation Challenges

Mistake 10: Forgetting Why You Do This Work



Strategies for Self-Care and Team Care:

- **Have fun together** and have rituals as a team that keep you healthy. Celebrate together. Make time for social actions.
- Unless absolutely necessary (and consider carefully what is **ABSOLUTELY** necessary), do not be available to participants at night.
- **Set realistic expectations.**
- **Encourage healthy self-care** habits – good-nutrition, sleep, exercise, vacation.
- **Fully transition when you get home** to your own life.
- **Reward efforts** and offer flexible hours.
- **Seek additional training.**

Questions?



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