Introduction

Family drug courts (FDCs) are increasingly recognized as one of the most promising and effective ways to address parental substance use disorders, parenting needs and child maltreatment within the child welfare and court systems. Studies show that FDCs produce positive outcomes that include increased parental engagement and retention in substance use disorder treatment, higher rates of family reunifications, reduced time in out-of-home placements for children, less repeat child maltreatment and fewer re-entries into out-of-home care.¹

When FDCs first emerged in the mid-1990s, they focused primarily on a parent’s recovery. In the last decade, many FDCs have evolved to meet the individual needs of parents and children. However, services tend to be disconnected from one another and not sufficiently integrated and coordinated.

Moving the Field Forward

The Prevention and Family Recovery (PFR) initiative strives to advance FDCs to the next level. PFR helps build the capacity of FDCs and their partners to provide a more comprehensive family-centered approach—grounded in cross-systems collaboration and evidence-based practices—that strengthens the parent-child relationship to improve parent, child and family well-being.

In April 2014, with support from the Doris Duke Charitable Foundation and The Duke Endowment, Children and Family Futures (CFF) awarded three-year PFR grants to four established FDCs (see map) to implement and integrate evidence-based parenting programs and children’s developmental and therapeutic services into their existing FDC systems of care.² In addition to direct financial support, the grantees received intensive technical assistance, training and coaching through a dedicated Change Team, as well as issue-specific consultation from a PFR National Advisory Council of experts.

This brief provides an overview of the PFR initiative, the four PFR grantees and the families that they served.
PFR Goals

The primary goals of PFR are to:

- Expand the service array for FDC families
- Strengthen the capacity of FDCs to implement and sustain a family-centered approach
- Identify breakthrough strategies and systems changes that support a family-centered approach
- Evaluate the progress and challenges with implementing such an approach
- Disseminate lessons learned to advance the field

**PFR is about broad, sustained systems improvements. It is about transforming the way the FDC and its cross-systems collaborative partners make decisions about policies, programs and allocation of resources to better help children, parents and families who are affected by substance use disorders to achieve family recovery.**

PFR Seeks to Achieve:

- Comprehensive family-centered treatment
- Effective cross-systems collaboration
- Child safety – no repeat maltreatment
- Timely and sustained reunification
- Improved parent-child relationships and family functioning

PFR Realist Evaluation Approach

The PFR initiative is multifaceted and complex, involving geographically and culturally diverse FDCs implementing different evidence-based interventions in varying county and sociopolitical contexts. Given this complexity, PFR uses a realist evaluation approach that seeks to answer what works, for whom, how and in what circumstances. The PFR evaluation focuses on understanding evidence-based program implementation and integration in the grantees’ communities.

The realist evaluation approach is particularly useful for initiatives such as PFR that are designed to transform systems and involve multiple services and strategies that are interrelated and evolve over time. Such an approach yields a context-rich story of grantees’ individual and collective successes and challenges during the PFR initiative. The companion PFR case studies provide a more detailed story of each grantee’s PFR journey.
The four grantees were diverse in many ways, including the type of jurisdiction served, the type of lead agency for the PFR initiative, overall FDC capacity and selected PFR service enhancements. However, the four grantees were also similar in several respects. They all had broad-based and well-established cross-systems collaborative relationships when PFR began. Three of the four grantees had a parallel (versus integrated) FDC model. All of the FDC programs averaged 14 to 16 months long. See snapshot of grantees below.

### Snapshot of First Round of PFR Grantees

<table>
<thead>
<tr>
<th>Lead Agency for PFR</th>
<th>Pima</th>
<th>Robeson</th>
<th>San Francisco</th>
<th>Tompkins</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pima County Juvenile Court Center</td>
<td>Robeson Health Care Corporation</td>
<td>San Francisco Superior Court</td>
<td>Tompkins County Department of Social Services</td>
<td></td>
</tr>
<tr>
<td>Type of Lead Agency</td>
<td>Court</td>
<td>Substance Use Treatment</td>
<td>Court</td>
<td>Child Welfare</td>
</tr>
<tr>
<td>Year FDC Began</td>
<td>2001</td>
<td>2008</td>
<td>2007</td>
<td>2001</td>
</tr>
<tr>
<td>Type of Jurisdiction Served</td>
<td>Urban (pop. 1,004,516)</td>
<td>Rural (pop. 135,496)</td>
<td>Urban (pop. 825,863)</td>
<td>Rural (pop. 101,000)</td>
</tr>
<tr>
<td>FDC Model</td>
<td>Parallel</td>
<td>Parallel</td>
<td>Parallel</td>
<td>Integrated</td>
</tr>
<tr>
<td>FDC Capacity</td>
<td>75 families</td>
<td>37 families</td>
<td>50 families</td>
<td>80 families</td>
</tr>
<tr>
<td>Primary Parenting and Children’s Interventions</td>
<td>Incredible Years</td>
<td>Celebrating Families!</td>
<td>SafeCare</td>
<td>Strengthening Families Program</td>
</tr>
<tr>
<td></td>
<td>Incredible Years Dinosaur School</td>
<td>Parents as Teachers</td>
<td>Triple P – Positive Parenting Program</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Parent-Child Relationship Assessment/Therapy</td>
<td>Trauma-Focused Cognitive Behavioral Therapy</td>
<td>Child-Parent Psychotherapy/Other Therapy</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Child-Parent Psychotherapy</td>
<td>Play Therapy</td>
<td>Therapeutic Visitation</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Strengthening Families Program</td>
<td></td>
<td>Facilitated Visitation</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>Parenting Skills Workshop</td>
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</tr>
</tbody>
</table>
Brief Demographic Profile of PFR FDC Participants

As of November 30, 2016, the four grantees had served 611 parents in their FDCs and 859 children of these parents. On average, adult participants were female, White, approximately 30 years old, had a high school degree or completed some high school, and were unemployed, but not looking for work. The children were somewhat more racially and ethnically diverse. Their median age at FDC intake was 4.2 years old. However, more than three-fourths of children were ages 0 to 8 years, with nearly half being 0 to 3 years old. The majority of children were in foster or relative care at the time of FDC enrollment.

It is important to note that the demographic data varied across the four sites. Grantees’ FDC programs, specific evidence-based interventions and target populations were diverse. Yet the four sites shared the common goal of seeking to provide a more comprehensive family-centered approach to improve the lives of the families they served.

Family Functioning – Baseline Needs and Progress Made

The PFR grantees measured child and family well-being using the North Carolina Family Assessment Scale for General Services and Reunification (NCFAS G+R), a standardized tool that assesses 10 domains of family functioning. Grantees completed the assessment for each family at FDC intake and closure.

Grantees’ intake data emphasize that in addition to substance use disorder and mental health treatment, parenting programs and children’s services, FDC participants needed assistance with some basic yet significant needs, such as housing and employment. FDC participants also needed support and services to resolve other adverse family dynamics that affected their overall family functioning and well-being, such as domestic violence, other family conflict and an unhealthy relationship between parents.
Despite their multiple and complex needs, families significantly improved from FDC intake to discharge in all overall areas of family functioning. Families experienced the greatest improvements in family interactions, environment, family safety and parental capabilities.

**Improvements in Family Functioning:**
Proportion of Families for whom Overall NCFAS G+R Domain Item was Rated a Strength at FDC Intake and Closure*

*Includes all FDC discharges (successful and unsuccessful).
Expanding the PFR Initiative

With continued support from the Doris Duke Charitable Foundation and The Duke Endowment, in January 2017, the PFR initiative expanded to four new sites:

- Gila River Indian Community Family Drug Court – Sacaton, AZ
- Jefferson County Family Integrated Treatment Court – Golden, CO
- Mecklenburg County Families in Recovery to Stay Together Program – Charlotte, NC
- Milwaukee County Family Drug Treatment Court – Wauwatosa, WI

The PFR expansion provides an opportunity to replicate effective PFR practices in four new communities and build the knowledge base about innovative family-centered practices. CFF is partnering with the Tribal Law and Policy Institute to support the Tribal Family Healing at the Gila River Indian Community.

About the Prevention and Family Recovery Briefs

Prevention and Family Recovery (PFR) strives to advance the capacity of family drug courts (FDCs) and their partner agencies to provide a comprehensive family-centered approach for children, parents and families affected by parental substance use disorders and child abuse and neglect.

In April 2014, Children and Family Futures (CFF) awarded PFR grants to four FDCs to integrate evidence-based parenting and children’s interventions into their larger FDC systems of care. CFF has produced a series of briefs that highlight cross-cutting PFR lessons and experiences that the field can use to replicate effective FDC practices. A companion set of case studies tells a more in-depth story of each grantee’s PFR journey.

The series of PFR briefs includes:

- **Brief 1: Overview of the Prevention and Family Recovery Initiative**
- **Brief 2: Key Lessons for Implementing a Family-Centered Approach**
- **Brief 3: Cross-Systems Collaboration, Governance and Leadership: The FDC Trifecta (Coming July 2017)**
- **Brief 4: Evidence-Based Program Implementation within the FDC Context: Finding the Right Fit (Coming July 2017)**
- **Brief 5: Building the Evaluation and Performance Monitoring Capacity of FDCs (Coming July 2017)**

For more information about the PFR initiative, visit the PFR webpage or email us at pfr@cffutures.org.

Endnotes


2. The PFR grant period for this first round of grantees ends May 31, 2017.

3. A parallel model involves two different judges, one who conducts the dependency case proceedings and another who presides over the FDC progress reviews. In an integrated model, one judge hears both the dependency case and the drug court matter.

4. This brief was written prior to the end of grantees’ PFR project period (May 31, 2017). As such, the final numbers served will be higher. Numbers served include new parents enrolled in grantees’ FDCs after PFR implementation as well as existing FDC participants already enrolled at the time of PFR implementation who received PFR services.

5. See the case studies or grantees profiles, available on the PFR webpage, for more detailed grantee-specific information on the sites’ target populations and interventions.
About Children and Family Futures

Children and Family Futures (CFF) is a national nonprofit organization based in Lake Forest, California that focuses on the intersections among child welfare, mental health, substance use disorder treatment and court systems. CFF has over two decades of experience in practice, policy and evaluation arenas to support tribes, states, regions and communities in their efforts to improve outcomes for children and families who are affected by substance use disorders. CFF believes parents with substance use disorders should maintain hope of achieving recovery and family stability so they can care for their children. While no single system or agency working by itself can help parents achieve that goal, CFF recognizes that recovery happens within the context of the family and that professionals from a variety of agencies and systems must work together to meet the needs of families.

Children and Family Futures provides a full range of consulting, technical assistance, strategic planning, and evaluation services for substance use disorder treatment, child welfare, courts, and the communities they serve. To learn more about CFF, visit www.cffutures.org.

The mission of Children and Family Futures is to improve safety, permanency, well-being and recovery outcomes for children, parents and families affected by trauma, substance use and mental disorders.

About the Doris Duke Charitable Foundation

The mission of the Doris Duke Charitable Foundation (DDCF) is to improve the quality of people’s lives through grants supporting the performing arts, environmental conservation, medical research and child well-being, and through preservation of the cultural and environmental legacy of Doris Duke’s properties. The foundation’s Child Well-being Program aims to promote children’s healthy development and protect them from abuse and neglect. To learn more about the program, visit www.ddcf.org.

About The Duke Endowment

Since 1924, The Duke Endowment has worked to help people and strengthen communities in North Carolina and South Carolina by nurturing children, promoting health, educating minds and enriching spirits. Located in Charlotte, North Carolina, the Endowment seeks to fulfill the visionary genius and innovative legacy of James Buchanan Duke, one of the great industrialists and philanthropists of the 20th century. Since its inception, the Endowment has distributed more than $3.6 billion in grants. Now one of the largest private foundations in the Southeast, the Endowment shares a name with Duke University and Duke Energy, but they are all separate organizations. To learn more about the Endowment, visit www.dukeendowment.org.
For more information about the PFR project, contact Children and Family Futures at pfr@cffutures.org

April 2017