



# Introduction

- Juvenile drug courts (JDCs) are specific dockets for juvenile offenders with substance use disorders. The number of JDCs in the U.S. has increased 53% in the last 15 years, with recent analyses reporting 409 JDCs in 2015 (National Institute of Justice).
- However, data on the effectiveness of JDCs suggests only modest effect sizes and slight reductions in recidivism among program participants (Latimer et al., 2006).
- Factors that have previously been related to the development of delinquency and treatment effectiveness for delinquent youths include parental psychopathology and parenting behaviors (Hoeve et al., 2009; Piquero et al., 2016), though the associations between these factors and JDC outcomes is not well-studied.
- Additionally, research on JDCs has rarely involved data collected directly from participants rather than records (Alarid et al., 2012).
- Therefore, the aim of this study was to examine relations among parent psychopathology, parenting, and JDC compliance. It was hypothesized that parental criminality, parental mental health problems, and poor parenting practices would relate to youth compliance with JDC.

# **Methods**

# Sample

- 14 parent-child dyads
- Youths were 14-17 years of age (M = 16.5 years) and all were male
- Most (93%) parents were female.
- The sample was 64% African American, 36% White.

### Measures

- **Demographics & background** Youth and parent report of personal and family demographics, parental legal history
- Alabama Parenting Questionnaire (Frick, 1991) Parental report of positive and negative parenting practices
- APA DSM 5 Cross-Cutting Symptom Measure (APA, 2013) Parents self-report of own mental health symptoms
- Parental Attitudes toward Deviance (Huizinga, Esbensen, Weiher, 1991) Youth report of parental attitudes toward various behaviors
- Official JDC records were obtained to determine compliance with JDC conditions

# **Parent Factors Associated with Poor Compliance among** Juvenile Drug Court Participants Nora E. Charles<sup>1</sup>, Arielle H. Sheftall<sup>2</sup>, Stacy R. Ryan<sup>3</sup>, and Paula Floyd<sup>1</sup>

examined

**Data Analysis Procedure** 

### Results

### Table 1. Correlations between parent factors and JDC compliance

Parent Factors		% Positive Drug Tests	Court Sanctions	Court Rewards	
APQ					
Involvement	.15	.00	05	.25	
Positive Parenting	.05	01	21	.24	
Poor Monitoring	.24	.33	.12	14	
Inconsistent Discipline	.26	12	.17	02	
Corporal Punishment	.27	.65*	.11	45	
Parental attitudes toward deviance	.31	.43	.50	61*	

# **Descriptive data**

- An average of 16 months of JDC records were available for participants
- It youths have completed JDC since they enrolled in the study
- A majority of youths had both positive and negative indicators of compliance in their files, with all participants testing positive for drugs at least once while in JDC.
- Having a parent with a criminal history was associated with having a higher percentage of positive drug tests and fewer rewards for compliance
- Parent mental health symptoms were not directly related to compliance, but parental mental health symptoms were associated with more inconsistent discipline (r = 0.58) and poorer monitoring (r = 0.36).

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JDC compliance variables collected from JDC records were

 Comparisons were made between parent self-report measures and JDC compliance variables using bivariate correlations, ttests, and nonparametric tests, as appropriate.

# Table 2. JDC co

# Compliance

Completion Successfu Unsucces Fined by co Other cour New deten Positive dr Rewarded

- behaviors.



ompliance data collected from program files				
ce variables	N (%)			
n status (n = 11)				
ul	7 (64%)			
ssful	4 (36%)			
ourt	9 (64%)			
rt sanctions	10 (71%)			
ntion admission	10 (71%)			
ug test	14 (100%)			
for compliance	9 (64%)			

# Discussion

Although a majority of youths who have completed JDC did so successfully, there were high rates of non-compliance in this sample.

Results indicate that parent history of criminality, youth perceptions about parent attitudes regarding delinquency and substance use, and parenting behaviors were all related to youth compliance with JDC.

Although few comparisons were statistically significant, this is likely due to the small sample size as several observed correlation coefficients are in the moderate to large ranges. Statistically significant associations may be revealed once the sample for this ongoing project is larger

Parent mental health symptoms were not directly related to compliance, however they were positively associated with parenting

# Implications

JDC is an opportunity for troubled youth to make a transition to a more positive lifestyle, and it is important that we understand factors that may interfere with this goal.

Results from this study provide guidance about the types of interventions (e.g., family or parenting interventions) that could maximize youths' success in JDC.

Accordingly, we have begun providing clinical services at this JDC and we are incorporating a family assessment and brief intervention.