

# 5 Ways

## Juvenile and Family Court Judges Can Use Public Health Data and Resources to Address Substance Use Disorders

Juvenile and family court judges are leaders and conveners in their communities. Judges need information (data) to accomplish varied activities in their roles – from making individual-level decisions about evidence-based services to convening stakeholder groups that are able to affect change in their jurisdictions. Juvenile and family court judges use data about their jurisdiction, such as rates on permanency, victimization, substance use disorders (SUDs), and overdoses. However, judges may lack guidance regarding how their data compares to other national public health data. This added layer of analysis and comparison can be useful to judges in their roles as leaders and conveners, especially when addressing substance use in their communities. Below are five ways judges can use national data and resources to improve policy and practice. The list below is not exhaustive; instead, it serves as a starting point for judges to better use the data and resources available.

### 01

#### Understanding the scope of the problem

We know that the rates of SUDs for individuals involved in the criminal justice system are more than four times that of the general population.<sup>1</sup> Knowing this, judges should use their ability to convene stakeholders to fully understand the impact of substance use on their communities by strategically leading reviews of available public health data. This process can help stakeholder groups identify the scope of the problem that directly affects their work. The following public health data may be useful:

- Access the [County Health Rankings and Roadmaps – Drug Overdose Deaths](#)<sup>2</sup> to understand the increased need on a local level.
- Access information about the [Underlying Cause of Death](#)<sup>3</sup> to understand national mortality and population data, based on death certificates for U.S. residents. The data includes a single

underlying cause of death and demographic area.

- Access the [Treatment Episode Data Set \(TEDS\)](#)<sup>4</sup> to help identify the local burden on treatment agencies. TEDS includes records for annual substance use treatment admissions and contains a significant proportion of admissions that constitute a burden on public funds
- Access data reported to the [Adoption and Foster Care Analysis and Reporting System](#)<sup>5</sup> and the [National Child Abuse and Neglect Data System](#)<sup>6</sup> to understand the overall reports that include substance use indicators.

Consider collaborating with a local university to gather and analyze data from publicly available data sets to identify how substance use affects the community.

**02**

## Ensuring equitable access to services vs. more restrictions

Judges may have to make decisions about young victims of child abuse and neglect when families are struggling with SUDs. It is incumbent upon judges to ensure that their decisions regarding referral to services, continued visitation, detainment, etc. are equitable. For example, judges should use court level data to understand who gets treatment or services versus who spends time in jail, or who has continued access to their children versus who has more restrictions on visitation. Judges should work with court staff to:

- Collect data on disposition decisions from child abuse and neglect hearings.
- Sort the data by demographics and compare the decisions made for cases where SUDs are identified.
- Collaborate with State Court Improvement projects that may already collect court-level data.
- Work with other stakeholders in your jurisdiction to identify policy changes that lead to improved equity, if inequities are found.

**03**

## Convening ongoing training for stakeholders

Judges can use their ability to convene local treatment providers, law enforcement, hospital administrators, or public health offices to ensure that court personnel is trained. This is especially true for interventions that might be perceived as controversial. Two critical evidence-based practices can save lives and improve outcomes for people with SUDs: 1) medication-assisted treatment (MAT) to treat symptoms associated with withdrawal and 2) naloxone to prevent overdose deaths. However, because MAT is often stigmatized, individuals are sometimes prohibited from receiving MAT by the court system. Besides, communities can be reluctant to implement the widespread use

of naloxone due to misinformation. Use publicly available resources to provide current and reliable information at training events:

- Disseminate [SAMHSA's Medication-Assisted Treatment](#)<sup>7</sup> resources to dispel misinformation related to MAT.
- Access a national [MAT Advocacy Toolkit](#)<sup>8</sup> to provide training related to legal issues associated with denying access to MAT.
- Utilize NCJFCJ's [Resolution Regarding Access to Medication-Assisted Treatment for Adolescents and Adults](#)<sup>9</sup> to gain buy-in from judicial stakeholders.

**04**

## Encouraging accurate data collection

As a judge, consider collaborating with multiple stakeholder agencies to ensure consistent data collection, sharing, and reporting. Several national data sets have codebooks to assist with the consistent collection:

- Review information related to reporting data to national databases:
  - [Adoption and Foster Care Analysis and Reporting System](#) – reporting requirements, due dates, and uses.<sup>10</sup>
  - [National Child Abuse and Neglect Data System](#) – reporting requirements, due dates, and uses.<sup>11</sup>
  - [Overdose Detection Mapping Application Program](#) – PDF instructions for the application program.<sup>12</sup>

Reporting data to these national systems can ensure that federal funders have the necessary information to make adequate funding decisions.

**05**

## Developing local resources

Consider convening a community taskforce with varied stakeholder (e.g., child welfare, juvenile justice, medical professionals, SUD treatment providers, law enforcement, etc.) to understand how youth and families with SUDs encounter public

systems and receive services. For example:

- Use the [Data Collection Across the Sequential Intercept Model \(SIM\): Essential Measures Manual](#)<sup>13</sup> as a resource to assist in understanding data and its critical intercepts better. This process can improve outcomes for people with mental health or substance use disorders who are involved with the juvenile and family justice system.
  - Use the [Opioid Treatment Program Directory](#)<sup>14</sup> to find certified treatment agencies that treat opioid use disorder.
- Search for funding and resource development opportunities from the Office of Justice Programs via the [Comprehensive Opioid, Stimulant, and Substance Abuse Program](#).<sup>15</sup>

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## Endnotes

- 1 National Institutes of Health. *Addiction and the Criminal Justice System*. Retrieved on July 11, 2019, from National Institutes of Health: <https://report.nih.gov/NIHfactsheets/ViewFactsheet.aspx?csid=22>.
- 2 Robert Wood Johnson Foundation. County Health Rankings and Roadmaps: Drug Overdose Deaths – <https://www.countyhealthrankings.org/explore-health-rankings/measures-data-sources/county-health-rankings-model/health-factors/health-behaviors/alcohol-drug-use/drug-overdose-deaths>.
- 3 Centers for Disease Control and Prevention: About Underlying Cause of Death, 1999-2017 – [https://wonder.cdc.gov/controller/datarequest/D76;j-sessionid=185A0CC19A98C672FF-98D28A9F876D3E?stage=results&action=sort&direction=MEASURE\\_DESCEND&measure=D76.M1](https://wonder.cdc.gov/controller/datarequest/D76;j-sessionid=185A0CC19A98C672FF-98D28A9F876D3E?stage=results&action=sort&direction=MEASURE_DESCEND&measure=D76.M1).
- 4 SAMHSA. Treatment Episode Data Set (TEDS) – <https://www.dasis.samhsa.gov/webt/information.htm>.
- 5 Children’s Bureau: An Office of the Administration for Children and Families. Adoption and Foster Care Analysis and Reporting System (AFCARS) – <https://www.acf.hhs.gov/cb/research-data-technology/reporting-systems/afcars>.
- 6 Children’s Bureau: An Office of the Administration for Children and Families. National Child Abuse and Neglect (NCANDS) Data System – <https://www.acf.hhs.gov/cb/research-data-technology/reporting-systems/ncands>.
- 7 Substance Abuse and Mental Health Services Administration. Medication-Assisted treatment – <https://www.samhsa.gov/medication-assisted-treatment>.
- 8 Legal Action Center. MAT Advocacy Toolkit – <https://lac.org/mat-advocacy/>.
- 9 National Council of Juvenile and Family Court Judges. Resolution Regarding Access to Medication-Assisted Treatment for Adolescents and Adults – <https://www.ncjfcj.org/publications/mat-resolution-infographic/>.
- 10 *Supra* note 5 – <https://www.acf.hhs.gov/cb/resource/about-afcars>.
- 11 *Supra* note 6 – <https://www.acf.hhs.gov/cb/resource/about-ncands>.
- 12 The Overdoes Detection Mapping Application Program (ODMAP) is a free online platform

to support reporting of suspected fatal and nonfatal overdoses. Launched in 2017 by the Washington/Baltimore High Intensity Drug Trafficking Area – <http://www.odmap.org/>.

to states, local government, and Indian tribal governments to develop and implement efforts to identify, respond to, treat, and support those impacted by illicit opioids, stimulants and other drugs of abuse – <https://bj.a.ojp.gov/program/cossap/overview>.

- 13 SAMHSA. Data Collection Across the Sequential Intercept Model (SIM): Essential Measures Manual – <https://store.samhsa.gov/product/Data-Collection-Across-the-Sequential-Intercept-Model-SIM-Essential-Measures/PEP19-SIM-DATA>.
- 14 SAMHSA. Opioid Treatment Program Directory – <https://dpt2.samhsa.gov/treatment/>.
- 15 The Comprehensive Opioid Stimulant and Substance Abuse Program's purpose is to provide financial and technical assistance

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