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How can counties support caregiver involvement in juvenile justice services?

Prepared by Deborah Fabiyi, Washington State University and Project LINK staff

Caregiver involvement in juvenile justice services is considered a best practice for supporting youth.[1]

A 2017 meta-analysis of 28 studies found that family-based treatments produce modest but long-lasting reductions in antisocial behavior compared with other services.[2] Yet, **fewer than 1 in 5** justice-involved youth engage in family-based treatment programs, even when communities can offer them.[3]

What is caregiver involvement in juvenile justice?

There are different roles that caregivers can play in their youth's experience with the juvenile justice system, such as recipients, extenders, or managers of services.[4]

Recipients	Extenders	Managers of services
Caregivers' direct engagement in services; providers address barriers such as transportation, childcare, communication difficulties, and access to care	Caregivers as partners; caregivers support learning and treatment through modeling, instruction, reinforcement, and ongoing involvement	Caregivers as leaders; caregivers navigate services, coordinate care, and advocate for their child's needs

A national literature review conducted by the Office of Juvenile Justice and Delinquency Prevention[1] found several common barriers to engagement in juvenile justice services:

- Caregivers feel blamed for their child's behavior, which undermines trust in the court process.
- The punitive features of many programs can damage trust between staff and caregivers.
- Caregivers often do not understand how the juvenile justice system works.
- Transportation, scheduling, cultural, and language barriers make participation harder.

Washington Context

Washington courts have offered Functional Family Therapy (FFT) for over two decades, and the state evaluated it in 2023:

Using data on youth who started FFT between 2003 and 2017, the state found that youth who completed FFT, or progressed further through its phases, had lower recidivism than youth who started but did not finish.[5] These results should be read with caution given methodological limitations.



Still, findings point to the same lesson: **keeping families engaged through the full program matters.** Engagement strategies may help the county get more out of the FFT services it already offers.

Overall Recommendations

1. Address barriers early, and keep engaging throughout.

A systematic review of 17 randomized controlled trials[6] found that brief engagement efforts at the start of services improved early attendance when providers explicitly addressed both:

- Practical barriers, such as schedules and transportation
- Psychological barriers, such as family members' resistance and beliefs about the treatment process

The few mental health approaches that kept families engaged over the long term combined motivational interviewing, a family-systems focus, and support for family stress and coping, delivered at several points throughout treatment, not only at intake. This is especially relevant for parents who see their child's behavior as the child's problem alone.

2. Consider core components of effective engagement.

Two reviews of engagement research in children's mental health[7,8] identified common practices across effective engagement programs:

Assessment	Asking about the family's needs, goals, and concerns early.
Accessibility promotion	Making services easier to reach: flexible times, locations, or transportation.
Psychoeducation about services	Explaining what services involve and why the family's role matters.
Addressing barriers to treatment	Identifying and problem-solving obstacles with the family.
Goal setting	Agreeing on goals the family cares about, not only court requirements.

Assessment and **accessibility promotion** were each present in at least half of the programs that outperformed a comparison group in a synthesis of randomized trials.[9]

3. Define and measure engagement throughout service provision.

Engagement is more than attendance, and defining and measuring engagement can help agencies see trends and make changes to improve engagement efforts. The REACH framework tracks relationship, expectancy, attendance, clarity, and homework, which can help staff see where families are disengaging.

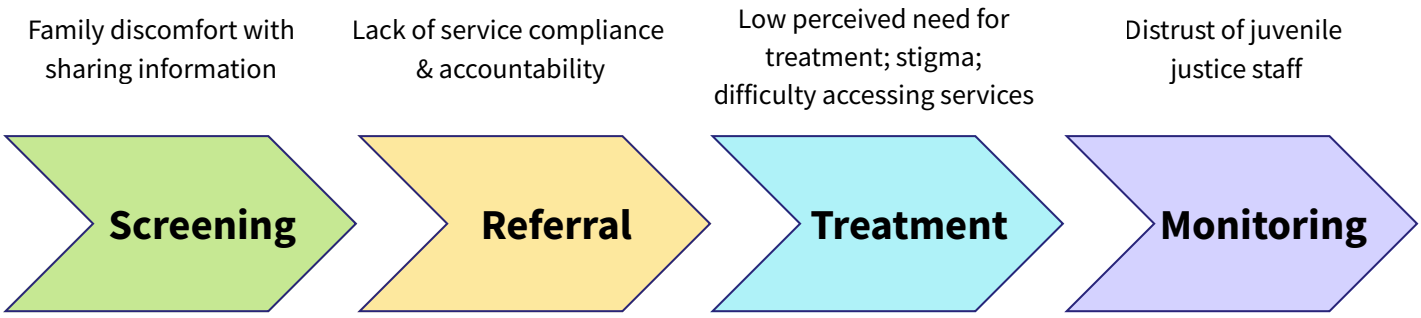
General strategies for engaging caregivers and families

A 2017 review of trauma-informed juvenile justice practices and policies highlighted youth and family engagement.[10] Findings suggested six strategies:

Train staff in family engagement and empowerment techniques	Prioritize youth and family preferences for services	Provide youth and families with access to positive social support from people of similar backgrounds (e.g., mentors, peer advocates)
Provide education/service referrals to address parent/caregiver trauma and its impact on the family system	Involve youth & families in agency planning (advisory boards, routinely collecting feedback on services)	Provide tangible resources to reduce barriers to engagement and partnering (bus pass, child care, etc.)

Findings from another study, which surveyed and interviewed Juvenile Justice service providers across the state of Georgia, found that agencies were more likely to implement family engagement strategies when leaders and staff were committed to family engagement, there were external partnerships with family-serving organizations, and the workplace culture supported innovation.[9]

A follow-up study[11] across seven states identified **barriers to family engagement** in substance use services across all stages of the process, including:



Strategies to address these barriers include: collaborative approach to screening and service decisions, increased education around services, and providing tangible supports to increase access (e.g., transportation, scheduling assistance).

Other Approaches to Engaging Caregivers

Peer-Led System Navigators

What is it? Peer navigators is a general approach to supporting system-involved families by connecting them with individuals who have lived experience navigating the system. These peer navigators provide emotional, social, and informational support to those currently involved in juvenile justice programming.

Does it work? Specific peer navigator programs including Juvenile Justice 101, the Parent Support Program, and Family Connect have shown beneficial outcomes for families but have not been studied beyond single randomized trials.[12]

Parent Activation by Probation Officers

In rural counties with few treatment providers, probation officers are often the staff with the most regular contact with families. Three approaches build on that role.

What is it? Parent activation is a set of concrete steps that healthcare providers use to engage parents and is based on social learning (i.e., direct instruction, modeling, practice opportunities, and reinforcement). It can be delivered by probation officers rather than therapists.[3]

Does it work? The LEAP trial tested parent activation delivered by probation officers across 32 rural counties in the Pacific Northwest, including Idaho and Oregon. The trial was completed in August 2026; outcome results are expected but may not yet be published.[3,13] An earlier randomized trial of a similar approach in rural communities, found that probation officers could feasibly deliver a family-based intervention, in some cases at levels comparable to trained therapists.[14]

Incentives Combined with Family Engagement

What is it? Contingency management rewards specific positive behaviors, such as attending sessions or meeting goals. When paired with family engagement strategies, it offers courts a structured, non-detention way to reinforce progress.[15]

Does it work? A randomized trial across six juvenile drug courts tested therapists delivering contingency management combined with family engagement strategies, compared with usual services.[8] A national evaluation of juvenile drug courts also recommended requiring caregiver participation, scheduling court and treatment at family-friendly times, and offering parent partners and caregiver support groups.[16]

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Methods

Findings presented in this brief come from a literature review of academic peer-reviewed studies, as well as reports from non-partisan think tanks, foundations, and county and state program websites. Given the rapid nature of this search, other relevant studies may exist. In addition, please note that we did not use formal statistical methods for summarizing results and exploring reasons for differences in findings across studies.

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