Problem-solving courts arose from the adult drug court model established by Miami-Dade County in 1989. In this uniquely collaborative model, defendants with addiction to substances participate in a substance abuse treatment regimen that involves a drug court team and community providers. Approximately 40 percent of the now nearly 4,000 problem-solving courts across the country are adult drug courts, but an increasing number of specialized dockets focus on opioids, veterans, DUI/DWI, mental health, reentry, co-occurring disorders, homelessness, tribal healing to wellness, and family treatment.

Judge Charles McGee in Reno, Nevada; Judge John Parnham in Pensacola, Florida; and Judge Nicolette Pach in Suffolk County, New York, were the first judges to adapt the adult drug court model to the family court bench. The animating principle of the family treatment court model is to serve “the best interest of the child,” with the objective of family reunification or maintenance whenever possible, or termination of parental rights if necessary, and parental recovery as a goal in all cases. Such courts are also referred to as family dependency treatment courts, family drug courts, dependency drug courts, and family wellness courts, all of which fall under the umbrella of family treatment court.

Jane Pfeifer, program director at the national Children and Family Futures (CFF), which co-authored the Family Treatment Court Best Practice Standards, observes: “For two decades, CFF has provided family-centered training and technical assistance to family treatment courts. All address parental substance use; many also address parental and family members’ mental health and even primary health care. Of all the designations, ‘family treatment court’ perhaps best captures the breadth of issues that these courts now address through family-centered services and supports. Recovery doesn’t happen in a vacuum. It happens within the context of family—whether the family of origin, the extended family, or the family of community.”

Robyn Ellis, accompanied by her grandmother and daughter, delivering her FDTC graduation speech in 2014.
Jessica Pearce, senior site manager at the National Council of Juvenile and Family Court Judges, which encourages judges to develop family treatment courts, strongly agrees: “Family treatment courts create a constellation of supports, enhancing natural connections between parents and children and with each other, but also with the larger extended family, who may provide kinship care and other support. When people are seeking change, relationships are a big part of that effort.”

**Milwaukee County’s Family Drug Treatment Court**

Holistic family treatment is one hallmark of a successful family treatment court. Robyn Ellis, recovery community coordinator at Meta House, a substance use disorder (SUD) treatment provider for women, recognizes another: meeting people where they are. She speaks with the authority and conviction born of firsthand experience with Milwaukee County’s Family Drug Treatment Court (FDTC), first as a participant and now as a team member. She considers her 2014 FDTC graduation, witnessed by her recently reunited family, one of the best moments of her life.

“I started using at age 11, with my mom,” Robyn explains. “I abused alcohol, Adderall, and cocaine through my teen years. When my parents died within a year of one another, I added prescribed painkillers, benzodiazepines, and methadone to numb the pain. I put myself and my daughter in all kinds of danger, including seven car accidents in 18 months. I lost custody of my daughter right before her fourth birthday, in 2013. I am so grateful that someone immediately connected me to the FDTC. I often wonder what would have happened without that. It helped me get my daughter back, but more importantly helped me get me back. I never expected to be so fully supported, no matter how I showed up, no matter what I said.”

**Responding to the Need**

Judge Laura Crivello, presiding judge of treatment courts in Milwaukee County’s children’s courts, credits the FDTC’s success to “the team we’ve assembled, all working to support the participant.” A multidisciplinary team (see Figure 1) is a key provision, with another the role of the judicial officer, whose “rapport with participants is among the most important components of the family treatment court.”

Upon assuming the FDTC bench, Judge Crivello, a former gang prosecutor, was told that judicial involvement would greatly impact the ultimate success of the participants in the program, which has proven true.

“I am astounded by the difference weekly contact with participants makes,” she says. “I’ve observed that, through this relationship-building, participants learn to trust the team. From day one, we talk about

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**Figure 1: Multidisciplinary Team**

Leader: Judicial officer (typically a judge)

Suggested team members:
- Family treatment court coordinator
- Child protective services personnel
- Legal representation
- Substance use disorder treatment providers
- Parent(s) and child(ren)
- Supportive relative caregivers and/or foster parents
- Court-appointed special advocates
- Mental health therapists
- Child development and parenting providers
- Providers of health, educational, vocational, recovery, and reunifications support, law enforcement, probation, and other services

Source: Family Treatment Court Best Practice Standards
honesty and transparency, which can only occur in an environment where participants feel safe. Unlike adult drug courts, we do not use sanctions; we do provide resources and opportunities to keep participants on a healthy track.”

Participants are further assured by confidentiality agreements—another critical piece of FDTC operation. Rebecca Foley Cramer, FDTC coordinator, notes, “Everyone in the room signs a confidentiality agreement. Nothing a parent, case manager, or any team member says in an FDTC meeting will be used in a different type of case, unless it’s a mandatory reporting situation. Participants know that the team meetings are not an opportunity for gathering evidence.”

Two thirds of individuals in jail have had or currently have an SUD, and individuals exiting incarceration with an untreated opioid use disorder are more at risk for recidivism. Children living with a parent who has an SUD are more often abused and neglected, placed in out-of-home care in substantiated cases of abuse and neglect, and stay longer in that care than other children. More than half of Milwaukee County FDTC participants are living with heroin/opiate use disorders, and some have open criminal cases or involvement with other courts or multiple systems.

Positive Outcomes

A meta-analysis on the impacts of family treatment courts on child welfare outcomes found that families who participated in them were twice as likely to be reunified than those who participated in more conventional services. Likewise, Milwaukee County court data on child welfare outcomes indicate that participants in the FDTC have a higher rate of family reunification than nonparticipants (41 percent versus 28 percent).

Of those individuals who have been introduced to Milwaukee County’s FDTC and meet eligibility criteria, approximately 30 percent participate in the four-phase program. Participants often find continuation of the program past Phase Three difficult for a variety of reasons, such as job conflicts or time constraints. Consequently, not all participants graduate, but many are successfully reunified as participants maintain their recovery work and improve their parenting skills. Other family treatment courts nationwide have realized up to $13,000 in savings per family, achieved primarily by reducing time spent in child welfare systems (reduced foster care) and community corrections (less time on probation or in jail). The University of Wisconsin will conduct a mixed-methods evaluation of the FDTC after two more years of program operation to illuminate how and why Milwaukee County’s program is succeeding.

Robyn is an example of its success. As one of 12 FDTC graduates who earned peer mentorship certification, she subsequently earned an associate degree and is currently pursuing her bachelor’s degree in social work. “When I started my journey, I was told that I would never get my daughter back until I was off of [prescribed] methadone. This tough-love approach was so different than what I was asked when I connected with FDTC: ‘What happened to you?’ I was never asked any form of the judgmental question, ‘What’s wrong with you?’ This seemingly simple

“The Family Drug Treatment Court provides a voluntary, life-changing experience to members of our community who are at the most difficult point in their lives: having their children detained. I have seen it transform lives and believe wholeheartedly in the ideology and process.”

—Judge Laura A. Crivello
Milwaukee County Circuit Court Judge
change in language was profound to me. Now that I work in the field, I recognize it as a trauma-responsive strategy. I’m bringing what I learned from my time with FDTC to others who are standing where I stood eight years ago. I want to give back.”

**Endnotes**

1 Also referred to as collaborative justice courts.


7 Milwaukee County Family Drug Treatment Court, 2021, Participant Database.


10 Disqualifiers for FDTC participation include significant cognitive delay or mental health issue, long-term incarceration, perpetration of domestic violence with a restraining order by the other parent of a child, sexual abuse of a child, and nonresidency in Milwaukee County.

For More Information

- On Milwaukee County’s FDTC, contact Rebecca Foley Cramer at rebecca.foley@wicourts.gov.
- On CFF, including an upcoming series being developed in collaboration with Casey Family Programs to inform child welfare and other key stakeholders about the family treatment court model, contact Jane Pfeifer at jpfeifer@cffutures.org.
- On NCJFCJ, contact Jessica Pearce at jpearce@ncjfcj.org.
- On COSSAP technical assistance, go to the COSSAP Resource Center at https://www.cossapresources.org.

Resources

Agencies and Associations

- Children and Family Futures (CFF)
- National Association of Drug Court Professionals (NADCP)
- National Center for State Courts (NCSC)
- National Council of Juvenile and Family Court Judges (NCJFCJ)
- National Center on Substance Abuse and Child Welfare (NCSACW)
- National Drug Court Institute (NDCI)
- National Drug Court Resource Center (NDCRC)

Publications

- Drug Courts (2020), by the U.S. Department of Justice, Office of Justice Programs (OJJDP)
- Family Treatment Court Best Practice Standards (2019), by CFF and NADCP
- Family Treatment Court Planning Guide (2018), by NDCI and CFF
- The Use of Peers and Recovery Specialists in Child Welfare Settings (2018), by NCSACW
- National Strategic Plan for Family Drug Courts (2017), by CFF
- Transitioning to a Family Centered Approach: Best Practices and Lessons Learned from Three Adult Drug Courts (2017), by NDCI and CFF
- Literature Review: Family Drug Courts (2016), by OJJDP
- Painting the Current Picture: A National Report on Drug Courts and Other Problem-Solving Courts in the United States (2016), by NDCI
- Adult Drug Courts and Medication-Assisted Treatment for Opioid Dependence (2014), by the Substance Abuse and Mental Health Services Administration

Other Resources

- Funding of Drug Courts, OJJDP
- Treatment Court Count Map, NDCRC
- National Family Drug Court Training and Technical Assistance Program, CFF
  - Family Drug Court Online Tutorials

Visit the COSSAP Resource Center at www.cossapresources.org

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