Guidelines for the general development and implementation of accountability-based approaches for juvenile drug offenders are presented in this monograph. These topics are discussed: (1) the accountability approach; (2) the relevance of the accountability approach to drug offenders and its relationship to drug abuse treatment; (3) surveys of chief probation officers and court managers, focus groups of juvenile justice professionals, and interviews with directors of juvenile drug programs and community service programs; (4) findings from the survey of chief probation officers and compilation of juvenile corrections data in the areas of nature and extent of the problem, juvenile drug offender profile, and impact on the system; (5) gaps in community supervision with community-based programs for drug offenders often described as inadequate to deal with the special problems presented by the new generation of drug offenders; (6) the three themes which emerged as most lacking in community-based responses, i.e., the need for more structure, a coherent logic for sanctioning drug offenders based on harm done, and performance-based supervision; (7) values, goals, and objectives; (8) suggested pilot project design; and (9) 18 critical elements necessary for effective accountability for juvenile drug offenders. A table of accountability practices for drug offenders, a list of resources, and information on technical training assistance and program funding are included. (ABL)
Bureau of Justice Assistance

Accountability in Dispositions for Juvenile Drug Offenders

MONOGRAPH
Bureau of Justice Assistance

Accountability in Dispositions for Juvenile Drug Offenders

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Members of the expert panel, including judges, researchers, probation and parole workers, community and correctional program directors, attorneys, and others are listed below:

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Overall guidance from the Bureau of Justice Assistance (BJA) was provided by Dorothy L. Everett, Program Manager; and Don Anderson, Chief, Drug Abuse/Information System Branch.
I am pleased to present this special report monograph on reparative justice as an intermediate sanction of juvenile offenders. This monograph adds to a growing body of evidence suggesting that accountability-based approaches do more to help both the perpetrator and the victim of drug-related crime than incarceration or treatment alone.

I have long been a proponent of intermediate sanctions, especially those that encourage acceptance of personal responsibility for criminal actions and which make offenders aware of the trauma they cause their victims. Youngsters, in particular, frequently do not realize the extent of injury, physical and emotional, they inflict upon their victims and society. Because they fail to understand the larger consequences of crime and drug abuse, they are not aware that the offense is not limited to the victim. There seems to me to be a need for juveniles to equate their criminal activities with the vicious cycle of suspicion, hatred and violence that spills over into society at large. Too often, juveniles view their crimes -- especially those involving drugs -- as little more than pranks, victimless crimes, or "malicious mischief."

Accountability in Dispositions for Juvenile Drug Offenders adds a new dimension to traditional punishment-treatment concepts by assigning responsibility for criminal behavior and by requiring active, rather than passive, reparative efforts. This monograph should be of particular interest to juvenile justice and treatment professionals, social workers, as well as probation and parole officers.

If initial successes with this kind of program are indicative of future patterns, it would be a large step in the effort to reduce recidivism and of keeping young delinquents from becoming career criminals.

Sincerely,

Gerald (Jerry) P. Regier
Acting Director
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INTRODUCTION: WHAT IS AN ACCOUNTABILITY APPROACH?

In the human services, the term “accountability” has become identified with public agencies and individual professionals assuming responsibility for their actions and answering to their communities. When applied to criminal and delinquent offenders within the justice system, accountability generally means assigning personal responsibility for the consequences of criminal behavior to its perpetrators.

In juvenile justice circles in the past decade, accountability has gained wide popularity and has become the unifying concept in a number of highly successful juvenile restitution, community service, and victim-offender mediation programs. For professionals active in these programs and in the use of sanctions emphasizing victim reparation and reconciliation, the concept of accountability has come to symbolize a very specific philosophical approach and course of action. Simply put, an offender is “held accountable” when he or she is required to do something to make amends to the victim and to the community. Though still misunderstood and occasionally associated with punitive reactions requiring incarceration, accountability has become synonymous with such phrases as “payback,” “making it right,” “victim restoration and reconciliation,” and “reparative justice” among its strongest advocates in the criminal justice system.

As it has been applied in the most effective restitution, community service, and other reparative justice initiatives, the accountability approach provides the basis for a new set of objectives for the Nation’s juvenile courts. Avoiding the potential excesses inherent in both treatment and punishment, accountability attempts to strike a balance between the needs of the victim, the offender, and the community. Its logic offers a systematic yet flexible means of relating court dispositions to harm resulting from an offense, as well as an agenda for monitoring offenders and a gauge of successful performance in both community and correctional settings.

At the heart of the accountability approach are distinctive messages to victims, offenders, and the community. For victims and the community, the message of accountability is: “Your needs and concerns are a critical part of the mission of juvenile justice.” For the offender, the message is: “You are responsible for your offense and must do something for your victim to make amends.” In practice, justice professionals most committed to the approach agree on several general principles. Accountability-based sanctions and supervision may best be described as “reparative,” “fair and proportionate,” and “active.”

- **Reparative.** Drawing upon an ancient tradition of justice that long predates very recent concerns with victims’ rights and criminals’ “just deserts,” the accountability approach gives first priority to the requirement that offenders act to restore loss and repair damages resulting from their offenses. Ultimately, the goal of the justice system is to reconcile victims, offenders, and the community. This reparative or restorative goal is an end in itself. While reducing recidivism and providing rehabilitation are desirable outcomes (and may be the results of the reparative process), justice for both victims and the community is its own reward.

- **Fair and proportionate.** While compassion and concern for the individual needs of the offender and the underlying causes of the offense may receive attention, primary emphasis is placed upon the offense, its severity, and the circumstances surrounding it rather than on the personal characteristics of the offender. Fairness demands that, to the greatest extent possible, sanctions be proportionate to the degree of harm resulting from the offense(s).

- **Active.** Unlike both treatment and punitive approaches, which view the offender as a passive recipient of help (treatment) or of unpleasant consequences as a result of confinement (punishment), accountability demands the offender’s active engagement. Where punishment gives the message to offenders that something will be done “to you” and treatment gives the message that something will be done “for you,” an accountability approach asks the
offender what he or she will do to “make it right” in the eyes of the victim(s) and the community. In this view, it is the responsibility of juvenile justice professionals and the juvenile justice system to provide the monitoring and support services necessary to ensure that offenders are held accountable. This requirement often involves providing offenders with work and community service experience which ultimately increases the likelihood of their future responsible and accountable behavior.

While supervision requirements should emphasize active, behavioral objectives, true accountability must also include the offender’s cognitive awareness of harm done to victims. Upon realizing the consequences of his or her actions, the offender is then asked to act responsibly to restore the loss. Without this awareness of consequences, practices designed to hold offenders accountable to victims may be reduced to a clerical process of transferring money (as compensation, fines, or restitution) to victims or to community funds without the offenders’ or their victims’ understanding that an obligation has been fulfilled. This need for cognitive awareness as well as active reparative efforts is in part responsible for the growing popularity of victim-offender mediation and other reconciliation approaches that attempt to bring victim and offender together.
RELEVANCE TO DRUG OFFENDERS

Since drug offenses are still viewed by many as "victimless" crimes, the applicability of reparative sanctions such as restitution and community service has been less straightforward, and the use of reparative sanctions has been infrequent for this type of offense. Recently, however, judges, community groups, and citizens have grown increasingly sensitive to the significant harm done to communities and individual victims by the behavior of drug offenders—especially those involved in drug dealing or trafficking. Many people now believe that victims of drug crimes should not be denied reparation for their losses and that offenders should not be relieved of responsibility for paying back what they have taken from communities and citizens. Some criminal justice officials are searching for ways to relay to drug offenders a sense of the social consequences of their offenses and to engage them in an active process of making amends.

How is the accountability approach related to drug abuse treatment? First, accountability does not suggest that concern for the offender be abandoned in favor of punitive sanctions nor that the sole emphasis be placed on the needs of victims. What it does suggest is that concern for offenders should not diminish the obligation of the juvenile justice system to require them to redress wrongs to their victims and the community.

Second, holding offenders accountable in no way diminishes the need to respond to problems of addiction and abuse. Since the ability to make rational and responsible choices and to actively restore losses is often impaired by drug use, accountability requires that any underlying abuse problem first be addressed. There is an important link between drug abuse treatment and accountability in the conceptualizing of self-help programs such as Alcoholics Anonymous (AA) and Narcotics Anonymous (NA), which explicitly require a commitment to make amends or atone for harm done to others (including family and friends) while under the influence of drugs or alcohol. When repayment and reconciliation are viewed as vital steps in the recovery process, accountability and treatment merge.

While accountability strategies cannot replace drug abuse treatment for offenders who need it, even the most comprehensive treatment program cannot encompass all justice system objectives. Other concerns frequently mentioned by professionals in juvenile justice systems include the need for a wide range of intermediate sanctions for youth who sell or use drugs, the ineffectiveness of existing sanctions, the lack of connection between treatment requirements and court sanctions, the need for followup after residential care, and the need to reconcile the sanctions for drug offenses with the needs of victims. By providing a complement and supplement to treatment and an alternative to more expensive correctional approaches that rely strictly on confinement, the accountability approach can help address all of these concerns. Some specific benefits of the accountability approach include:

- Giving juvenile courts an increased number of intermediate disposition options in accordance with the seriousness of the offense, while providing fair and effective sanctions to protect the community.
- Instilling in drug offenders an understanding of the harm that drug sales and use can cause victims of drug offenses.
- Providing redress to individual and community victims of drug offenses.
- Enhancing recovery through an active process of making amends.
- Establishing objective performance standards based on behavioral accomplishments for the community supervision of drug offenders.
- Improving coordination between treatment services and other supervision and sanctioning requirements.
- Enhancing a balanced program of aftercare supervision for offenders leaving treatment and correctional facilities.
Even though support for the accountability approach is increasing, it is important to emphasize that no sanction or supervision model is a panacea for the juvenile drug problem. As one practitioner observed, neither accountability nor any other improvement in procedures significantly reduces the number of youth who sell drugs:

Much of the impetus for the behavior we wish to discourage is due to structural problems in society. Not just poverty, low wages, etc., but also the implicit messages we convey to children about success and the teaching we do that suggests the crime is not in the deed, but in getting caught.
PURPOSE OF THE MONOGRAPH

Although the need to develop comprehensive treatment approaches and expanded services that respond to youth with drug abuse and addiction problems is widely acknowledged, the objectives of the current project are more modest and the strategy more limited. This Monograph is not intended as a complete guide to drug treatment and does not discuss issues such as screening, routine testing, or therapeutic techniques.

The purpose of this Monograph is to provide guidelines for the general development and implementation of accountability-based approaches for juvenile drug offenders. It does not, however, provide a comprehensive discussion of accountability sanctions such as restitution and community service. Readers requiring more information are referred to two documents: the Bureau of Justice Assistance Program Brief “Restitution by Juveniles,” and the Restitution Education, Specialized Training, and Technical Assistance Program of the Office of Juvenile Justice and Delinquency Prevention, Guide to Juvenile Restitution, and to sources listed at the end of this document.
Drug abusers and sellers present a unique set of problems and raise operational questions about how reparative sanctions and accompanying supervision can be linked to drug offenses. To determine the feasibility and practical value of the accountability approach for young drug offenders, Pacific Institute for Research and Evaluation (PIRE) staff, with input from a national expert panel and a wide range of juvenile justice professionals, have designed a model program based on a national needs assessment completed in 1990.

While recent studies have documented new patterns of drug use and sales in the general youth population, relatively little is known about the characteristics of drug offenders coming through juvenile courts in the past few years. Thus, prior to designing new sanctions and approaches to supervision, project staff and advisers took a closer look at the nature and extent of the problems of juvenile drug offenders, as experienced by juvenile justice professionals. A national needs assessment was undertaken to provide detailed information on juvenile courts' response to juvenile drug offenders, the impact of drug offenders in corrections and community supervision programs, and gaps that exist in sanctions and supervision. This assessment would determine the adequacy of existing policies, assess the feasibility of accountability as an approach to drug offenders, and obtain feedback on which interventions would be most effective with this population.

To achieve these goals, researchers adopted a multifaceted approach, including a survey of chief probation officers and court managers, focus groups of juvenile justice professionals, interviews with directors of juvenile drug programs and community-based restitution and community service programs, and a compilation of juvenile corrections data from 24 States. A complete description of the results of this study and its methodology are included in a monograph entitled *Accountability in Dispositions for Juvenile Drug Offenders: A National Needs Assessment*, available from PIRE.
JUVENILE JUSTICE AND THE DRUG OFFENDER

Major findings, primarily from the national random sample of chief probation officers and the compilation of juvenile corrections data, are summarized below:

- **Nature and extent of the problem.** When asked about increases in drug offender referrals coming into their courts, a large majority of juvenile court managers (89 percent of urban and suburban jurisdictions) reported a significant rise in petitions for both drug use and sales between 1984 and 1988. In urban and suburban courts in the sample, petitions for all drug offenses rose from an estimated 9 percent of all referrals in 1984 to 16 percent in 1988; most respondents indicated that these figures drastically underestimate the true increase in drug offenders under court supervision—many of whom are petitioned for other offenses. Drug trafficking or sales appears to be of greater concern in juvenile justice than in previous years: urban jurisdictions reported an 18-percent increase in the proportion of offenders who had previous court contact for drug sales, while rural jurisdictions indicated an increase of 9 percent.

- **Juvenile drug offender profile.** Today's drug users are described as younger, more likely to be female, more likely to be black, and more often additionally involved in nondrug offenses than their counterparts 4 years ago. Changes in the profile of drug sellers between 1984 and 1988 were similar, with the added difference that sellers entering the court in recent years are more often described as gang involved, involved in violence and the use of weapons, and more economically motivated. The number of youth petitioned for sales of crack cocaine has increased since 1986 in almost 90 percent of urban jurisdictions and 35 percent of rural jurisdictions in the survey, but sales and use of a wide range of drugs were reported with substantial regional variation. An estimated 84 percent of all youth with drug sale petitions were residents of the jurisdictions in which they were processed; however, urban jurisdictions noted an increase in drug sellers who were runaways.

- **Impact on the system.** The increase in drug offenders was reported to have wide-ranging effects on the juvenile justice process, especially in urban areas. Large majorities of respondents reported more court backlogs; larger probation caseloads; detention crowding; and a rise in nondrug offenses believed to result from drug use, conflict over drug sales, or from efforts to protect profits from drug sales. Probation officials surveyed indicated wide variation by region and jurisdiction in the typical sanctions of juvenile courts to similar drug charges. Probation is the typical community supervision response, but beyond that, there appears to be little specialized programming for either drug users or sellers.

By far the most dramatic impact of drug offenders on the juvenile justice system has been in increased commitments to juvenile institutions. Commitment data obtained by the Pacific Institute from 24 States and the District of Columbia illustrate what seems to have become the typical reaction to drug offenders in recent years. Despite trends toward waiver of serious juvenile offenders to adult courts, the number of drug offenders (those with a primary charge for a drug offense) as a proportion of all commitments to juvenile institutions has nearly tripled since 1984.

Even more disturbing has been the impact of these trends on the already disproportionate incarceration of minority youth. Commitments of minority youth, especially blacks, for drug offenses have skyrocketed relative to nonminority commitments for the same offenses. From 1984 to 1989, black commitments for drug offenses increased tenfold, Hispanic commitments increased fivefold, and white commitments for drug offenses remained the same.

Overall, commitment data suggest that juvenile justice is placing increased reliance on residential facilities to solve the problems presented by drug offenders.
Several States and local jurisdictions included in the needs assessment reported "zero tolerance" policies requiring incarceration or mandatory waiver or certification to adult court for drug traffickers. Ohio, for example, now requires State commitment for drug traffickers, and Oklahoma has a certification policy for youths ages 16 to 17 found "in possession with intent to sell."

While a number of public officials have expressed growing concern with crowding and costs resulting from this response, others, including many of the judges and other juvenile justice system professionals providing feedback to us in this needs assessment, fear that judges who commit youth to residential facilities, hoping that they will receive structured treatment in a controlled environment, are being frustrated in their expectations. Although data on treatment programs within institutions are scarce, existing evidence suggests that, despite increasing lengths of stay, few resources are available in residential facilities. In one of the largest and most well-funded juvenile corrections agencies in the country, less than 1 percent of incarcerated youth are involved in a drug treatment program—though nearly 90 percent of wards are believed to have significant drug involvement.
GAPS IN COMMUNITY SUPERVISION

Although increased commitments are in part a result of greater vigilance by law enforcement and more punitive sanctioning policies, these commitments also suggest that probation and parole professionals find it more difficult to supervise a significant number of drug offenders. Scarce local resources, coupled with supervision and inappropriate or inadequate treatment approaches, may well be contributing to the increase in secure confinement of juveniles, despite evidence that little treatment takes place in institutions. Some treatment options are available to many courts; 81 percent of respondents in the survey answered "yes" when asked if their jurisdictions had access to community-based programs for drug offenders as part of their dispositions. However, these were often described as "too short term," "unfocused," or "catchall" in approach and, frequently, as inadequate to deal with the special problems presented by the new generation of drug offenders.

Even in the best circumstances, practitioners report that little followup is available as part of any aftercare or parole program. One chief probation officer from a medium-size jurisdiction in the Northeast summarized the problem and emphasized the general failure to link sanctioning, supervision, and treatment:

Too often we identify (and sanction) a drug user or dealer, yet too often we fail to treat and (then to) follow up with aftercare . . . treatment is a dream in most cases. The court acts as a classification/punishment board, and this role is easy. It's the post-courtroom work that needs to be done.

In the view of some juvenile justice professionals participating in the needs assessment, drug offenders—with the exception of those needing treatment for addiction—may not require interventions substantially different from other delinquents; better programs for all offenders were often said to be the most appropriate solution. Moreover, the use and sale of drugs are believed to be so pervasive in some jurisdictions that justice officials often have difficulty distinguishing drug-involved youth from others.

On the other hand, changes in the nature of involvement with drugs and the characteristics of drug users and sellers today were said by many to dictate new responses. The involvement of younger adolescents, for example, could require new and more sensitive approaches. (Waiver to adult court, though used in some jurisdictions, is less likely to be an option for 12- and 13-year-olds.) The growing number of minority youth involved in drug sales, at least among those being caught and processed, also has implications for community supervision. Cultural sensitivity will become an increasingly important element in programs containing large numbers and majorities of black and Hispanic youth. The reported increase in the number of female drug offenders—and associated problems of prostitution and drug-involved pregnancy—also has implications for new approaches.

More drug sellers in probation caseloads almost certainly will require different supervision from that currently employed with drug users, and ordinary treatment programs may be inappropriate. Although the actual size of the group of "pure sellers—youth whose drug sales do not primarily support personal use—is a matter of debate and varies by region, these offenders nonetheless present a major problem in some jurisdictions. Even in the case of youth who sell as well as use drugs, there is little indication that approaches have been developed that address drug-dealing behaviors. Several respondents identified important differences between drug sellers and users exemplified by the following statement from the PIRE survey:

Drug sellers are risk takers, and fear of incarceration is not a deterrent . . . many are violent, carry weapons. Unlike drug users, they are outwardly cooperative, but continue to discreetly sell drugs . . . they are manipulative. There is little family support.

Available treatment is almost always aimed at users and, as one court manager noted, "Though many sellers are users, they need specific programs developed to meet their unique needs, for example,
vocational/job training." Another said, "Drug sellers have no education, but often have skills. There is a need to channel their entrepreneurial skills into legal enterprises."

Only 10 percent of practitioners who claimed to have drug treatment programs available to their courts answered "yes" when asked whether or not special strategies were available for drug dealers. While most believe that the majority of sellers are also drug users, many commented on distinct behavioral differences between users and sellers that might necessitate a different system response. For example, economic motivation, family ties, and gang commitments were frequently mentioned as difficulties in getting drug sellers to accept conventional lifestyles. There was an overall belief that those selling drugs should be dealt with more harshly than users, but that intermediate sanctions are also needed.

While the new economic or entrepreneurial motivation in drug sales may be viewed as a crisis by some, it may also be seen as an opportunity to devise new strategies to rechannel personal initiative into conventional activities. In the view of some practitioners, drug dealers often have a clearer orientation to reality. When compared to other delinquent groups, their behavior is relatively consistent and predictable. This more rational motivation may make the logic of accountability especially pertinent. Commenting on the potential for reaching out to this group despite a general lack of positive approaches, one youth services program director observed:

Many youth "burn out" on being dealers. They want out from under the stress. There are few programs that are designed to use youth as resources. We need to spend a lot of money creating paid roles for youth who wish to change, as peer counselors, staff aides, etc. Currently, the incentives for youth to change are almost nonexistent.
COMPLICATIONS FOR SANCTIONING AND SUPERVISION

What is needed to address these concerns about increases in the number and type of juvenile drug offenders entering juvenile courts? Included among recommendations made by practitioners participating in the needs assessment were a range of proposals that could become the basis for a comprehensive community-based intervention approach. Some of these ideas are reflected in the program design and critical elements section of this document.

In considering these specific suggestions and the widely acknowledged need for additional drug abuse treatment, three consistent themes emerge about what is most lacking in community-based responses to drug offenders:

- There is a perceived need to provide more structure, as well as a clear message on the consequences of drug use and sales.

- A coherent logic for sanctioning drug offenders is needed, based on harm done.

- A performance-based supervision agenda using active steps to “make amends” is needed to link treatment, competency and skill development activities, and other sanctions in community-based programs.

Meeting these needs will require a new administrative linkage among the treatment, dispositional, and supervision components of the juvenile justice system. It will also require a new commitment to sanctions based on the concept of harm done, as well as on the needs of offenders to get help with their drug problems. Supervision might then be based on affirmative requirements for active restoration of damage and loss. Successful reparation would become a major criterion of success. Such changes in sanctioning and supervision will require a new awareness on the part of offenders, system professionals, and the community of the consequences of drug offenses for victims.
ACCOUNTABILITY PRACTICES FOR DRUG OFFENDERS

Juvenile justice practitioners surveyed in PIRE's needs assessment were enthusiastic about the idea of an accountability approach for drug offenders. When asked to rank on a scale of 1 to 5 their support for several practices consistent with an accountability approach to youth adjudicated for drug sales, a large majority of these professionals expressed strong support (4 or 5 on a 5-point scale and affirmative comments) for the following sanctions and supervision requirements:

- Confiscation of any proceeds from drug sales.
- Direct restitution payments to victims of drug sales (e.g., families of abusers, victims of drug-related violence).
- Restitution payments into funds to support drug treatment.
- Community work-service in public agencies.
- Intensive work crews.

Practitioner focus groups were also able to identify a surprising number of drug offense victims, and suggest many creative ways to make drug offenders aware of the consequences of their actions. In addition, creative ways to make amends for damage done by these offenders and the potential benefits of such reparation were also specified. Some of these ideas are already being applied in some jurisdictions, others appear feasible, still others may be applicable in more limited circumstances. Table 1, while only a partial list, illustrates the range of creative activities which could form the core of an accountability approach to juvenile drug offenders.

Table 1

<table>
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<tr>
<th>Drug Offense Victims and Offender Accountability</th>
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<td><strong>Who Are the Victims?</strong></td>
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<tr>
<td>Victims of drug-related crimes</td>
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<td>Homeowners and residents of drug trafficking neighborhoods</td>
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### Table I (continued)

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<tr>
<th>Who Are the Victims?</th>
<th>Damage or Loss to Victims</th>
<th>Sanction Type</th>
<th>Holding the Offender Accountable</th>
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<td>Crack babies and AIDS victims</td>
<td>Loss of life or shortened lifespan; long-term mental, physical, and psychological disabilities; social ostracism</td>
<td>Victim awareness activities</td>
<td>Visit AIDS and crack hospital wards; participate in crack abuse awareness education</td>
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<td></td>
<td></td>
<td>Indirect restitution</td>
<td>Pay fines or confiscate moneys from drug sales to pay for medical treatment</td>
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<td></td>
<td></td>
<td>Community service</td>
<td>Disseminate AIDS educational materials</td>
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<tr>
<td>Health care system</td>
<td>Overloaded emergency care and rehabilitation services; increased health insurance premiums; increased rate of social diseases due to prostitution and needle sharing</td>
<td>Indirect restitution</td>
<td>Pay fines or confiscate money to offset cost of drug treatment programs or care of crack babies</td>
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<tr>
<td></td>
<td></td>
<td>Community service</td>
<td>Perform service work at neighborhood clinics (e.g., lawn maintenance, prepare surgical packets)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Victim awareness activities</td>
<td>Emergency room or crack ward visits</td>
</tr>
<tr>
<td>Offender's family members</td>
<td>Increased stress, anxiety, worry, and financial loss; violence and death; poor role model for siblings; social stigma</td>
<td>Direct service</td>
<td>Assign tasks to be done for family or around the house</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Treatment focused on reconciliation</td>
<td>Require participation in family counseling</td>
</tr>
<tr>
<td>Other addicts</td>
<td>Loss of health and self-esteem, academic and employment opportunity; increased social dysfunction and isolation</td>
<td>Indirect restitution</td>
<td>Impose fines targeted to drug abuse treatment</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Community service</td>
<td>Service work in detox centers; assist with AA</td>
</tr>
<tr>
<td>Offender users</td>
<td>Loss of health and self-esteem, academic and employment opportunity; social dysfunction and isolation; potential loss of life</td>
<td>Competency development education</td>
<td>Enforced detox and abuse treatment; attend drug education programs; assist with drug education for peers; choose between paying a fine or learning to read to a certain level</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Indirect restitution</td>
<td>Pay part of own treatment program</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Victim awareness activities</td>
<td>Participate in victim sensitization program; attend funerals of youth who die from drug abuse; visit hospitals and morgues</td>
</tr>
</tbody>
</table>

continued on next page
Reflected in Table I is a much broader conception of accountability than the usual emphasis on paying monetary restitution directly to victims. While monetary restitution may be an appropriate sanction for some drug offenses, and especially "spinoff" crimes resulting from drug use or sales, other kinds of creative payback may be more generally applicable. For example, community service tied directly to the specific harm done through drug crimes was a major focus of the practitioners who identified both individual and community victims. Suggested community service sanctions such as requiring intravenous drug users or sellers to work in detox centers or cocaine sellers to help repair crack houses seemed intended to communicate to the offender the direct impact of harm caused by drug involvement.

The cognitive aspect of reparative justice was also apparent in proposed sanctions making offenders aware of their victims and providing general education about the consequences of drug use and sales. This victim awareness component, though an important part of all accountability sanctions, was viewed as even more essential in this case, given the traditional view of drug crimes as victimless. Visiting hospital wards for crack babies or AIDS patients, attending community meetings with residents of drug-infested neighborhoods, or attending classes or video presentations on victims of drug sales and abuse were a few examples of suggested victim awareness activities.

Because of difficulties noted by some project advisers in identifying and then locating victims of specific drug offenses, monetary restitution was more often mentioned as indirect, involving fines paid to general funds earmarked to support treatment or related services. Several sanctions would require offenders to help subsidize or otherwise participate in prevention efforts or both. For example, one jurisdiction levies $50 on all adjudicated drug offenders as donations to the local Drug Abuse Resistance Education (DARE) program operating in the jurisdiction’s elementary schools.

Assessing the direct harm or damage resulting from drug offenses and assigning appropriate repayment is frequently less straightforward than with other crimes. However, several project advisers suggested that it would be possible to develop matrices similar to those used to convert property loss to community service hours.
These matrices could use the number of offenses and their degree(s) of severity to gauge an appropriate reparative sanction.

Seizure of profits from drug sales or assets of convicted drug sellers as a source of funds for community restoration, individual victim paybacks, and law enforcement assistance (e.g., “buy money” for undercover narcotics officers) received wide support from practitioners participating in the needs assessment. Some also suggested more explicitly punitive sanctions such as shock incarceration and publicizing the names of dealers. Others emphasized the offender/user as a victim and suggested rehabilitative sanctions such as requiring drug education, measurable improvement in reading levels, or participation in family counseling. The need to build in positive incentives for “staying clean,” and for completing other requirements was also frequently mentioned.
VALUES, GOALS, AND OBJECTIVES

More important than any technical issues of implementation or specific program design is the need to develop a consensus about the purpose of an accountability approach and its underlying values. According to Sydney Swann of the Family Branch of the Superior Court of the District of Columbia, project director of the High Intensity Supervision Program and a long-time manager of model restitution and other programs for serious offenders, juvenile justice professionals are often too quick to develop a program in the abstract without considering critical elements of a sound approach to sanctioning, supervision, and treatment. In Swann's view, program components should be derived from basic values about how professionals should respond to young offenders charged with serious crimes. Since this response, especially to those charged with drug offenses, involves numerous intangibles and cannot be reduced to a set of rules or automatic procedures, such values set parameters for action rather than prescribe routine punishments or standard approaches to monitoring.

Following this suggestion, basic components of the proposed program are derived from values central to the accountability approach:

- Repayment of loss to both direct and indirect victims should be a major priority of all sanctions and supervision in juvenile justice.
- Drug offenders need to be made aware of the harm to victims and the community caused by their behavior and should be required to make amends for this damage.
- The juvenile justice system should provide support and opportunities for offenders to repay victims, as well as to develop personal competency through work and employment options.
- The drug abuse treatment process would be enriched by accountability logic and requirements.
- Victim reparation practices and victim awareness education should be integrated into residential and day treatment and aftercare, with successful performance and clear incentives such as early release to community supervision.

These values in turn suggest some new priorities for juvenile justice systems, and the following objectives for a pilot initiative to demonstrate the accountability approach:

- Provide juvenile justice officials with practical, intermediate sanctions for drug offenders.
- Establish an active supervision agenda and dispositional options that provide for reparation or payback to victims and the community.
- Link and integrate accountability philosophy and practice with drug treatment, competency development, and the sanctioning and supervision process.
- Improve participating offenders' responsibility, self-esteem, and respect for others.
- Provide a model program design adaptable to different jurisdictions and to different levels of system penetration.
- Provide coordination between court, probation, treatment, and correctional agencies in carrying out principles of accountability within a balanced system.
- Refocus and enhance existing services, where possible, rather than building new multifaceted programs.
DEMONSTRATING THE APPROACH: A SUGGESTED PILOT PROJECT DESIGN

In some locales the basic prerequisites for effective accountability-based responses to drug offenders are already in place. A number of jurisdictions have one or more of the following operational aspects in their probation and correctional agencies: a refined, programmatic approach to restitution and community service; a work experience and employment component structured for close work supervision in the community and with paid employment options; a drug and alcohol assessment capability; accessible drug abuse treatment programs offering residential and outpatient services directed by or under contract to the court corrections department. In these jurisdictions it would not be necessary to develop entirely new programs to demonstrate the accountability approach. Rather, restructuring existing program components or activities to better accommodate drug offenders, or refocusing treatment programs to include accountability principles, would be the most cost-effective strategy.

Such jurisdictions need encouragement from key decisionmakers, elected officials, and community groups to support the shift in philosophical emphasis; to make existing components such as work experience and victim awareness more sensitive and more relevant to drug offenders; to develop a programmatic focus on drug dealers; and to improve the coordination between drug treatment programs and the juvenile justice system. The involvement of a community task force could help explore the feasibility of implementing parts of the overall program and prepare the groundwork. Specific issues that might be addressed by a task force include ensuring adherence to local statutes, monitoring sources of earnings for monetary payments, and gaining community and justice system support for the accountability approach.

Although accountability principles call for a general approach that should be adapted to meet local needs and serve diverse populations of drug offenders, project advisers suggested a preferred target group and two possible points of intervention. Given the acknowledged need for interventions to address juvenile drug trafficking and the relevance of this behavior to an accountability approach, the target group should include drug dealers or sellers. This group would consist of young offenders who sell drugs and also use, as well as that group generally assumed to be much smaller who sell drugs but do not use—or use drugs only minimally.

The pilot project would have two primary intervention points at which youth could be screened for eligibility and selected for participation. As Figure 1 illustrates, a community-level intervention, Program A, would target probation and parole violators who have reoffended or continuously failed to meet requirements of supervision due to drug abuse, trafficking, or both. Because it is important to assure that this group of youth remains clean and sober, a very tight programmatic structure is necessary in the initial program phase. A house arrest option with intensively monitored participation in a day treatment program is the only feasible alternative to a residential component for the intensive treatment phase. This first phase of intervention should include a variety of activities focused on victim awareness, coupled with drug abuse treatment. It should also provide objective information about the impact of drugs on individuals and communities, laying the groundwork for the active payback requirements (e.g., actual restitution, community service) in Phase II. Individualized plans for competency development such as work experience, employment, and continuing education; and maintaining sobriety through participation in community self-help groups should also be developed in Phase I.

An institutional-level intervention, Program B, would select motivated drug offenders in residential facilities who have made substantial progress in their institutional programs and are within 30 to 90 days of a scheduled return to the community. The first program phase in residence should be identical to that described above for the community-based program. Phase I is immediately followed by Phase II, which involves community reintegration activities. These include restitution, community service, or both, according to individualized plans developed in Phase I, as well as regular attendance at community meetings of Alcoholics Anonymous, Narcotics Anonymous, or
Cocaine Users Anonymous; educational or job training programs; and looking for work or working.

Several examples of existing programs represent informal applications of this sequence. In Erie, Pennsylvania, the Erie Earn-It Program negotiates with a treatment facility run by Abraxis to accept drug offenders with up to 60 days remaining in the normal period of treatment who have made progress in its residential program. These youth enter a crew-type work experience and paid employment program operated by the Erie County Probation Department. These activities are supplemented by close monitoring and drug abuse counseling.

In Ventura, California, and Quincy, Massachusetts, youth on probation are closely screened and monitored for drug use and sales. Following this, offenders may be placed on house arrest and are allowed to leave home to participate in drug treatment (if available) or self-help programs, to complete community service hours, or to work at a job or paid work crew. In both Ventura and Quincy, these efforts are an informal outgrowth of high-quality restitution and community service programs and serve also as means to better monitor drug offenders.

**Figure 1. Program Model**

<table>
<thead>
<tr>
<th>Target Group:</th>
<th>Program A: Community</th>
<th>Program B: Community</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Type:</td>
<td>Probation and parole violators for drug-related infractions or offenses</td>
<td>Youthful drug offenders in institutional and residential settings</td>
</tr>
<tr>
<td></td>
<td>House arrest with day treatment</td>
<td>Residential program</td>
</tr>
</tbody>
</table>

**Phase I:**

**Intensive Treatment:**

- Establish sobriety
- Information about drugs (impact)
- Victim awareness component
- Self-esteem; peer support for sobriety
- Design individual restitution/community service program

**Phase II:**

**Intensive Supervision:**

- Look for work; instruction in employability; on-the-job training
- Employment and paid work crew
- Perform restitution and/or community service
- Community AA/NA or other peer support for sobriety
- Certificate of successful program completion
CRITICAL ELEMENTS

There are three groups of critical elements necessary for an effective accountability approach to juvenile drug offenders: **organizational** elements define the basic administrative structure required for effective implementation and integration of accountability practices into juvenile justice systems; **program** elements refer to standing service functions of juvenile justice systems required for effective general applications of the accountability approach (see 1988 Program Brief, "Restitution by Juveniles"), as well as components that provide assessment capability, information about drugs, awareness of the many victims of drug crimes, and competency development; **operational** elements include those policies and procedures that carry out accountability practices on a day-to-day basis.

These critical elements are presented with the assumption that jurisdictions will wish to proceed with a pilot initiative that first clarifies objectives and builds administrative capacity, then develops or enhances program components to incorporate accountability practices, and then adds or refines policies and procedures to apply these practices to drug offenders. Performance standards suggested for all elements should not be construed as rigid prescriptions, but as general guidelines in need of empirical examination and ongoing assessment in the context of local values and program emphasis.

Organizational Elements

**Element 1: Legal and Judicial Authority**

*Purpose:*
To ensure that accountability approaches for drug offenders are consistent with State codes and local policies and are approved by judges; to guarantee the rights of both offenders and victims at all stages of the process; and to afford maximum possible protection from liability due to accidental injury to court and project staff.

**Performance Standards:**
1. A review of State laws and codes on restitution, community service, and victim reconciliation with special attention to restrictions on drug offenders. Determine what special conditions, if any, apply to type and amounts of community and victim service restitution, type and amount of monetary restitution allowed, and how it may be computed.
2. Determination of whether legislation or local policy and court procedures requires amendments.
3. Documentation of liability status and insurance needs.

**Element 2: Support and Commitment From the Community**

*Purpose:*
To ensure that local and State juvenile justice officials, judges, prosecutors, drug treatment professionals, corrections staff, and business and community leaders understand and support the program; and to assure a commitment to public safety, legality and liability concerns, and cost-effectiveness.

**Performance Standards:**
1. Presentations on how the accountability approach will ensure public safety as well as provide victim benefits and offender development.
2. Public relations materials (brochures, videos) and marketing strategy explaining accountability approach to key system actors and community leaders.
3. Pilot program outline of general description and fact sheet or brochure.

**Element 3: Planning Process**

*Purpose:*
To assure the participation of all individuals (e.g., juvenile justice system actors, victim advocates, treatment program personnel) dealing with different aspects of the problem.
Performance Standards:
1. Program development committee or task force composed of ethnically representative group of professionals from key service provider agencies and constituencies with primary design responsibilities shared by juvenile justice supervision (probation) staff and drug treatment professionals.

2. Regular advisory committee meetings beginning 6 months before program implementation.

3. Naming an overall project coordinator to a paid staff position.

4. Designation of overall project staffing and management plan for implementation phase; and designation of specific responsibilities for probation, treatment programs, corrections, and other key entities.

5. Detailed design for pilot program describing referral process, number of cases, and target group.

6. Development of a mission statement specifying project values and objectives and identifying needed enhancements of current mission statements to include accountability practices for the target population of drug offenders.

7. Written agreements on interagency linkages (e.g., probation, and day treatment facilities, residential treatment providers, parole) designating responsibility for community reintegration and followup.

Element 4: Designation of Target Group and Structured Screening Process

Purpose:
To provide agreement between key agencies and actors on appropriate target population of drug offenders (sellers, users, etc.), ensure recruitment of serious offenders (avoid unfair selection), and clarify recruitment and referral procedures.

Performance Standards:
1. Clear statement of eligibility criteria.

2. Designation of responsibilities for screening and selection.

3. Ongoing monitoring process to ensure proper selection.

4. Procedures to ensure ethnic diversity in program selection and program retention.

Element 5: Case Management, Management Information Systems, and Program Evaluation System

Purpose:
To provide timely information on case tracking and overall pilot program progress.

Performance Standards:
1. Collect information and design standardized reports that provide the most practical information on achievement of project goals and objectives:

   - Number of individuals admitted to program and number terminated for designated time period (e.g., 1 year).

   - Service providers, types of services, identified work sites and employers, and use of staff and volunteers.

   - Rate of client compliance with treatment and reparative goals within designated time period.

2. Development of procedures for monitoring program success rates and correlates (e.g., demographics) of program failure:

   - Current and prior offense and demographic data on these individuals.

   - Progress assessment of sobriety and accountability goals in treatment.

   - Progress assessment on reparative goals, including monetary restitution paid and community service hours worked.

3. Documented procedures for regularly scheduled recordkeeping and data collection on:

   - Individual case forms, computer files, or both to be completed at intake, closure, and various progress points.

   - Impact of accountability practices on other aspects of the system (detention crowding, probation caseloads, retention of minorities in community programs).

4. Analysis of data at approved intervals to determine program effectiveness and facilitate planning.

5. Reporting schedule with written expectations for monthly or quarterly internal reports to parent agency, advisory board, and program committee and an annual report for the public.
Program Elements

Element 6: Diagnostic/Assessment Capacity

**Purpose:**
To accurately determine extent and type of drug use or abuse and determine appropriate supervision and treatment response.

**Performance Standards:**
1. Screening and assessment based on graduated assessment supervision and treatment options that reserve lengthier, more complex and time-consuming alternatives for youth with more serious, chronic drug and alcohol problems.
2. A short set of empirically derived field-tested questions to be used at the initial screening level, such as those developed by Wisconsin Correctional Services in Milwaukee (see Armstrong 1987 reference in Resources section of this document).
3. Capacity to detect high-denial drug abusers who may be charged with larceny, fraudulent check writing, and other nondrug offenses motivated by drug abuse.
4. An individual case plan or contract addressing needs and services in at least the following seven areas; alcohol use, other drug use, psychological status, medical status, family environment, legal involvement, and educational status.

Element 7: Residential or Day Drug Treatment Program Which Accepts Court Referrals

**Purpose:**
To ensure that the juvenile court jurisdiction has access to a formal treatment facility or outpatient program for abusers and to incorporate accountability logic and practice into the agenda of these programs.

**Performance Standards:**
1. Agreements to accept court-ordered drug offenders.
3. Agreements to implement and oversee Phase I requirements such as sobriety, victim awareness, and drug education (see Figure 1, page 24).

Element 8: Victim Awareness and Educational Component

**Purpose:**
To reinforce awareness in offenders and the public of the loss suffered by victims of drug offenses.

**Performance Standards:**
1. Institutional curriculum involving presentations, videos, role play, and instructional techniques addressing direct and indirect harm of drug offenses.
2. Activities designed to "show and tell" offenders the consequences of drug use and sales (e.g., hospital visits).
3. Public education on victim awareness activities.

Element 9: Formal Restitution and Community Service Program

**Purpose:**
To ensure that juvenile justice agencies have a firm base and an effective track record in accountability sanctions.

**Performance Standards:**
1. Written policy and procedures on restitution and community service.
2. Clear designation of staff responsible for reparative task (one person should be designated as restitution/community service coordinator or program director).
3. Management Information Systems and monitoring system for tracking and recording payments and community service hours, and computing aggregate measures of successful completion.
4. Community service placements related to drug abuse and sales (e.g., in detox or treatment facilities).
5. Agreements and relationships with volunteer coordinators of local service agencies as sources of relevant placement ideas.
Element 10: Employment and Other Earnings Component

**Purpose:**
To guarantee prompt payment of restitution, fines, or both where appropriate by ensuring that those without income have legitimate means of making payments.

**Performance Standards:**
1. Written strategies and options for ensuring placement of offenders and criteria for identifying which offenders will be placed in various work slots.
2. Outreach strategy to employers and potential work site providers to ensure future placements, ongoing monitoring, and communication with staff at existing job sites.
3. Written agreements for paid slots for restitution cases in private business, public agencies with subsidy, and project-supervised crew with established sources of wages (e.g., employer, subsidy fund, agency contracts).
4. Assignment of relevant job assistance duties (e.g., job preparation, employer, crew supervision) to program staff.
5. Written materials (e.g., brochures) answering employer and agency questions about liability, termination, required paperwork, etc.

Element 12: Crew Work Experience Option

**Purpose:**
To provide structured, closely supervised work experience to teach work ethic and values, engage youths in meaningful public projects, and provide transitional experience between correctional supervision and employment placement.

**Performance Standards:**
1. Designated paid and volunteer supervision staff with desire to work with, not merely monitor, youth.
2. Agreements with public and private agencies to provide meaningful work projects, tools, and other resources.
3. Link to educational credit for inschool youth, opportunities for learning from work, and allowance for youth input where possible.
4. Process for selecting projects with high visibility, recognized public value (contribute to quality of life or economic development) that provide opportunity to learn positive civic values (environmentalism, service to elderly) and that use youth as resources.

Element 11: Victim Mediation/Reconciliation Option

**Purpose:**
To provide a forum for communication between victims and offenders to establish victim harm and provide input into restitution service or other reconciliation requirements.

**Performance Standards:**
1. Face-to-face mediation sessions with direct victims (who participate on a voluntary basis) with trained mediators.
2. Face-to-face mediation sessions with surrogate victims (who participate on a voluntary basis) with trained mediators.
3. Victim panels.
4. Provision for contract between the offender and the victim specifying restitution, service, or reparative obligation.

Element 13: Guidelines for Defining and Specifying Drug Offender Victims

**Purpose:**
To provide examples and guidance in identifying direct and indirect victims of drug use and sales.

**Performance Standards:**
1. Guidelines for general conceptualization of victims of drug abuse and sales (suggested direct and indirect victims include families, communities, victims of drug-related crime, addicts, drug offenders themselves; see Table 1).
2. Procedures for locating actual victims (e.g., victim impact, family interviews) including specification of sources.
3. Incorporation of drug and drug-related offenses in victim impact statement.
4. Regular interviews with residents and merchants in neighborhoods with high rates of drug use and crime.
5. Community forums and public education materials on drug crimes and victimization.

**Element 14: Procedures for Assessing Victim and Community Harm and Developing Payback Plan**

**Purpose:**
To expand and refine current restitution and community service assessment procedures to include drug offenses, maximize fairness and uniformity in sanctioning by a more efficient assessment of harm and loss, and provide appropriate reparative requirement.

**Performance Standards:**
1. Policy about appropriate payback requirements given nature of offenses (e.g., kinds of victims and offenses that might involve monetary payment and kinds of community service most appropriate for given drug offenses).
2. Definitions of the roles of various program staff in determining loss and specifying payback and coordination between reparative sanctions and other court requirements to ensure that these do not conflict but remain fair and proportionate to the offense.
3. Guidelines for judges about setting appropriate limits for monetary restitution and amounts of community service.
4. Matrix or other device for assigning community service hours based on seriousness of drug prior offenses and nature of crime (sales to children, personal use, etc.).
5. Range of creative options for direct and indirect restoration of loss to victims and the community (see Table I).

**Element 15: Community Reentry and Followup Procedures**

**Purpose:**
To ensure completion of reparative sanctions, abstinence, and participation in treatment through incremental punishment and reward system.

**Performance Standards:**
1. Restitution plan, including payment schedule, proportion of wages to be deducted for restitution, work schedule, penalties for missed payments, and all related restitution requirements which serve as a contract between the offenders and the court and allow for offenders' input.
2. Tracking system utilizing case or computer entry log of payment and completion of community service hours.
3. Procedures for monitoring source of payment and work performance involving routine contact with employer or work site supervisor.
4. Rigid enforcement response for violations of requirements (24-hour response).
5. Random drug testing at discretion of probation or parole.
6. Relapse and program reentry policy.
7. Structured incentives for abstinence and treatment program compliance coordinated with reparative sanctions.
8. Phased requirements with graded penalties for noncompliance (e.g., step and “stepback” process) with maximum supervision in early phases, followed by increasing freedom.
9. Caseflow management procedures that permit surrender of probation violators to ensure effective and efficient enforcement without overburdening the court docket.

**Element 17: Procedures for Parental Involvement and Accountability**

**Purpose:**
To require or encourage parental cooperation and reinforcement of accountability and other treatment requirements; to hold parents legally accountable for their behavior when such behavior contributes to drug abuse or sales by their children.
Performance Standards:

1. Review of State statutes concerning parental liability and of comprehensive statutes from States that have addressed parents' accountability in drug crimes (e.g., Oregon).

2. Procedure and accepted policy for referral of offenders' parents, family members or significant others to codependency counseling (e.g., ALANON).

Element 18: Staff Training in Accountability Logic and Procedures as Applied to Drug Offenses and in Treatment and Supervision Techniques Consistent With Drug Offender Profile

Purpose:
To gain commitment of all professional staff to accountability practices and ensure consistent application of sanctions and supervision.

Performance Standards:

1. Contacts with agencies that provide training in drug treatment and accountability sanctions [many inpatient drug treatment programs offer training to court personnel without fee; training in accountability sanctions is available from the Office of Juvenile Justice and Delinquency Prevention (OJJDP) through the Restitution Education, Specialized Training, and Technical Assistance program].

2. Incorporation of accountability theory and practice into drug treatment and supervision training.

3. Curriculum on ethnic and gender diversity and cultural sensitivity in treatment and supervision practices.
Extensive literature is now available on juvenile drug offenders. The Bureau of Justice Assistance and other agencies within the Department of Justice can provide program publications and referrals to many of these sources. The resources noted below are intended as a partial list of materials for readers desiring more information on accountability sanctions. Unless otherwise noted, they may be ordered through the National Criminal Justice Reference Service by calling (800) 688-4252.

**Restitution and Community Service Training Guides**


**Other Related Publications**


The authors of this document are available to provide technical assistance in designing and implementing a pilot program on drug offenders and accountability. In addition, Pacific Institute maintains an extensive national directory of technical assistance providers, including experts in restitution and community service, legal issues, program management and evaluation, and intensive supervision and aftercare.

General training on restitution is offered through the Restitution Education, Specialized Training, and Technical Assistance (RESTTA) program of the Office of Juvenile Justice and Delinquency Prevention (OJJDP).

Contact: Peter R. Schneider
National Coordinator RESTTA Project
Pacific Institute for Research and Evaluation Air Rights Center
7315 Wisconsin Avenue #900E
Bethesda, MD 20814
(301) 951–4233
PROGRAM FUNDING

For development funds to begin a pilot program, contact your State or local office administering Drug Control System Improvement Formula Grant Program Funds. If you do not know who your administrator is, contact the Bureau of Justice Assistance; 633 Indiana Avenue NW., Washington, DC (202) 272-6838. When you inquire, if you find that your State is not funding youth programs, it is possible to apply directly to BJA for discretionary funding of priority programs in this area. A 25-percent State or local cash match is required under this program. (Some States will assist with part or all of this match.)

OJJDP formula grants may be available to fund projects of this type through the State Advisory Groups and/or the State OJJDP administrator. Call the OJJDP Formula Grants Program at (202) 307-5921 for the person to contact in your State.

Another source of possible program funding is the Office of Substance Abuse Programs, which sponsors demonstration projects in two applicable areas. Applications are accepted directly for both spring and fall funding cycles. Write to the National Clearinghouse for Alcohol and Drug Information, P.O. Box 2345, Rockville, MD 20852 or call (301) 468-2600 for an application packet. Relevant initiatives are “Demonstration Grants for the Prevention, Treatment, and Rehabilitation of Drug and Alcohol Abuse Among High-Risk Youth,” and “The Community Partnership Program.”

PIRE is a nonprofit organization with a long-standing commitment to the programmatic aspects of research and social action. For more than 15 years PIRE has created, evaluated, and supported programs aimed at preventing drug and alcohol abuse and delinquency.

Other related Institute projects that may be of interest to readers of this Monograph include:

- A Field Test of the Adolescent Assessment/Referral System (National Institute on Drug Abuse).
- An Evaluation of ACTION's Neighborhood-Based Drug Prevention Project (ACTION).
- Promising Approaches for the Prevention, Intervention, and Treatment of Illegal Drug and Alcohol Use Among Juveniles (OJJDP).
- Youth Drug and Alcohol Abuse: The Introduction of Effective Strategies Systemwide (OJJDP).
- Restitution Education, Specialized Training, and Technical Assistance Program (OJJDP).