



www.npcresearch.com

Marion County Adult Drug Court Outcome Evaluation

Final Report



Submitted by

NPC Research
Shannon Carey, Ph.D.
Gwen Marchand, M.S.

January 2005

Table of Contents

Introduction	1
Background.....	1
MCADC Process Summary.....	1
Outcome Evaluation Methodology	5
Study Design	5
Data Collection	5
Sample Selection.....	6
Results.....	8
Research question #1: Recidivism.....	8
Research question #2: Reducing Substance Abuse.....	10
Research question #3: Program Completion.....	13
Research Question #4: Predictions of Success.....	14
Research Question #5: Aftercare.....	17
Summary/Conclusion	17
Appendix A: MCADC Process Evaluation Executive Summary.....	19
Executive Summary.....	20
Summary/Conclusion	23

Tables and Figures

Table 1: Drug Court and Comparison Group Demographics.....	7
Table 2: Drug Court and Comparison Group Prior Arrests	7
Figure 1: Cumulative Re-Arrests for Drug Court and Comparison Group	8
Figure 2: Cumulative Re-Arrests for Drug Court Participants	9
Figure 3: Mean Number of Positive UAs Over 12 Months in Program	10
Figure 4: Percent of Positive UAs to Total UAs Over 12 Months in Program	11
Figure 5: Drug Related Re-Arrests for Drug Court and Comparison Group	11
Figure 6: Drug Related Re-Arrests for Drug Court Participants by Status and Comparison Group.....	12
Table 3: Participant Length of Time Spent in MCADC Program	13
Table 4: Percentage and Means of Participant Characteristics for Graduated vs Terminated	16

Introduction

Background

Marion County, Oregon has a population of approximately 280,000. It is rich in ethnic diversity, including a large Hispanic/Latino population, a growing Russian-American community, and is near the Grande Ronde Indian tribe. The Office of National Drug Control Policy identified Marion County as a “High Intensity Drug Trafficking Area” (HIDTA) as the county has links to major Interstate and Highway routes that contribute to the drug trafficking trade from Mexico and Central America.

The Community Corrections Division of the Marion County Sheriff’s Office reports that 64% of the offenders currently under their supervision have been convicted of alcohol and/or drug related offenses. Further, a study by Portland State University indicated that 80% of all corrections inmates had substance abuse addictions that directly contributed to their current offense. With these statistics in mind, Marion County began planning a drug court. The County was awarded a program planning grant in July of 1999.

In April of 2000, Marion County began a pilot of their Adult Drug Court. Arrangements were made to collect client data in a drug court database, the Oregon Drug Court Case Management System (ODCMS), which is used in several counties in Oregon. In September of 2001, Marion County received a drug court implementation grant from the Drug Court Program Office (DCPO) at the National Institute of Justice and transitioned from their pilot phase into full drug court operations. This grant provided funds for evaluation and NPC Research was hired to perform a process and outcome study of the Marion County Adult Drug Court (MCADC).

This report contains the MCADC outcome evaluation performed by NPC Research. The Drug Court participant outcomes were compared to outcomes for a matched group of offenders who were eligible for Drug Court during a time period one year prior to the MCADC program implementation. The first section of this report is a brief summary of the MCADC program process (An executive summary of the process evaluation can be found in Appendix A). Following the process summary is a description of the methods used to perform the outcome evaluation, including sample selection, data collection, and analysis. The next section provides the results of the outcome analyses and an interpretation of these results. A summary of the results with overall conclusions can be found at the end of this report.

MCADC Process Summary

Overall, the main goals of the MCADC are to assist as many people as possible in learning how to live a drug-free life and to reduce recidivism. The Drug Court has been described as "a simple program for complex people."

The Drug Court is both pre and post plea. Clients with more than one felony drug possession charge (including probation violations) are targeted for this Drug Court. However, few people are turned away unless they have gun and/or violent charges. The Team is also less likely to take someone

who has been through treatment many times. Referrals are made from a variety of sources, including the District Attorney, the Judge, Parole & Probation, and the Defense Attorneys.

The length of time between arrest and arraignment is about three weeks. If the client is in custody, he or she will have a Court date in 72 hours. The length of time between arraignment and starting Drug Court is usually about two weeks, but can be as long as three weeks. Clients (15-25%) coming into Drug Court from outside this process (from another Judge or Probation) take varied amounts of time to come in to Drug Court.

There are three phases in Marion County's Drug Court Program. Phase One is called "Stabilization, Orientation, and Intensive Treatment." During Phase I clients attend Drug Court once per week, attend treatment at least three times per week, meet with Probation once per week and are given urinalyses (UAs) 4 or 5 times per month. Phase II is called "Skills." During Phase II clients attend court three times a month, attend treatment two times per week, meet with Probation every other week and are tested (given UAs) 3 or 4 times per month. Phase III is called "Transition." During Phase III, clients attend court sessions twice per month, attend treatment once or twice per week, meet with Probation once per month and are tested randomly between one and two times per month. In addition, clients are required to have employment or be in school before finishing Phase III. Aftercare begins in Phase III and can continue post-graduation. Aftercare consists of a weekly group that meets to work on specific areas such as recovery, skill building, and thinking errors. All phases require regular attendance at Alcoholics Anonymous/Narcotics Anonymous meetings. Phase advancement is determined at the discretion of the Drug Court Team on the condition that the participant has met the established minimum criteria for each Phase.

The main Treatment Provider for Marion County Drug Court is Serenity Lane's Straight F.A.C.T.S. Program (Finding Alternatives to Criminal Thinking Strategies). At the time of the process evaluation, all Drug Court participants were involved with Straight F.A.C.T.S. This program targets high-risk offenders—men and women who are on parole/probation, in a diversion program or are currently housed in Marion County Corrections. Straight F.A.C.T.S.' mission is to provide treatment services to those who have challenges with criminality as well as chemical dependency.

For people with mental health issues, the Drug Court has a partnership with the Marion County Mental Health Department and HOAP (Homeless Outreach and Advocacy Program), a program devoted to clients with severe mental health problems and homelessness issues. The Therapist from HOAP shares with the Team if he notices signs of severe mental health issues that could affect their ability to comply with Drug Court requirements.

Drug Court clients are required by the Judge to attend Alcoholics Anonymous (AA), Narcotics Anonymous (NA), or any 12-step program. An AA/NA representative has regularly attended Drug Court each week to offer support and to invite people into the recovery community. As individuals who have gone through recovery, they are able to help the clients feel more comfortable and make it easier for the Drug Court clients to get connected with a local 12-step group.

The Drug Court Team is made up of the Judge; three Criminal Defense Lawyers; two representatives from the Sheriff's Office (one for jail population & sanctions and the other in charge of courthouse security); a Parole & Probation Officer; a Probation Intern; the District Attorney; a Straight F.A.C.T.S. (Serenity Lane) Treatment Therapist; the Drug Court Coordinator; a Marion County Mental Health representative; a representative from DHS (for clients with children in foster

care); a HOAP representative; and a Community Representative (formerly Community Corrections Manager). A representative from Oxford House attends Court sessions and volunteers assistance or knowledge, as needed. The Team has recently added representatives from Community Corrections (who serve as mentors for current participants) and from the faith-based community.

The Team meets for “staffing” every week before Drug Court sessions. At this meeting they assess the progress of the participants and determine if any part of their individual program needs to be changed, including determination of sanctions and rewards for participants. At weekly staffing, new prospects are discussed and staffed for acceptance into the program. At the beginning of each staffing, announcements relevant to Drug Court are made and discussion follows. This is the time for reports back to the team on the status of projects or meetings attended and presentations given by team members. The Team also meets quarterly to discuss policy issues and compliance with grant requirements. Members of the Marion County Drug Court Team attended Drug Court training conferences and workshops, and visited other Drug Courts to learn about options for Drug Court organization and processes. In addition, Judge Graves is President of the Oregon Association of Drug Court Professionals and is the Oregon delegate to the Congress of State Drug Court Associations.

The Drug Court recognizes positive behavior and uses rewards for any improvement throughout the Program, such as sharing in group when a participant wasn't active before, following through, not having any problems in the residence, etc. Initially, rewards given were not generally material incentives, but things like being applauded in Court, having the Judge say good things to the participant, and being allowed to move into less intensive treatment. An additional incentive program has been instituted that includes rewards like movie passes, dinners, and pizza coupons. If participants are clean and doing well in the program for 90 days, they are given an "angel coin" (a coin with an angel on it the clients keep as a token to commemorate their good progress).

Sanctions are given for non-compliant behaviors, such as not going to NA/AA/12-step meetings, drug use, failure to attend treatment sessions, new crimes, missing group, missing Probation Officer appointments, not following through with things that were mandated, or having positive or dilute UAs. Sanctions are graduated and include doing homework alone in the courtroom, community service, sitting in the Sheriff's courthouse holding room or in the jail or intake unit, and attending additional meetings.

Termination from Drug Court can occur as a result of extreme criminal behavior or absconding, however, the Drug Court team is reluctant to give up on participants. Grounds for termination include continuous dirty, dilute or missed UA's, unexcused absence from treatment sessions, failure to attend the required number of NA/AA /12-step meetings and new criminal activity or charges. Clients who are terminated must then face the original charge(s) in traditional criminal court. Termination may mean a felony conviction, more jail time, additional fines and fees, loss of driver's license and/or 18 months or more of supervised probation.

In order to graduate from the MCADC, a participant must have full time employment or full-time enrollment at an educational program, 180 days of continuous sobriety, an approved aftercare treatment plan in place and successful completion of both an oral and written assignment. The graduate is presented with a certificate of achievement in the presence of his/her family, friends, the Drug Court Team, and peers.

The process evaluation final report performed by NPC Research contains a detailed process description, a presentation of the results of client focus groups and an evaluation of the MCADC process in regard to the Ten Key Components of Drug Courts (developed by the NADCP in 1997). The executive summary of this report can be found in Appendix A.

The process evaluation, completed at the end of 2003, contained recommendations by the evaluator for potential improvements or enhancements to the Drug Court Program process. Since that time the MCADC Program has responded to these recommendations with modifications to their process. Following is a summary of those recommendations and the Program's responses.

- **Recommendation.** The Drug Court Team may want to look through the participant manual both to update it for any recent changes in process and to look for places that might be considered as "talking down" to a participant. The manual might benefit from a revision changing any slang to simple but professional language.

Response. The manual was reviewed since the time of the process evaluation. The language of the manual was updated and is now more professional and adult.

- **Recommendation.** It is recommended that the Team provide written guidelines (with examples of possible graduated sanctions) to the participants through inclusion in the handbook. This would give clients an idea of what to expect and provide a baseline of sanctions for the Team's use.

Response. The new handbook has a full page on consequences for non-compliance, including a list of most common sanctions.

- **Recommendation.** As lack of available funding for rewards has meant that sanctions have outnumbered rewards in this court, suggestions were given for some low or no-cost rewards that could be added to those currently available. These suggestions included calling clients who are doing well before the Judge first at Court sessions and instituting a drawing for those who are showing good Program progress.

Response. The MCADC program has been able (through contributions from team members) to get funds to provide a fishbowl drawing every week (\$10 gift certificate). Certificates are also given for a coffee drink at the Marion County Courthouse coffee bar (\$2.50 value) as a reward for participants who go "above and beyond" (extra effort, helping a fellow Drug Court participant, special accomplishment etc).

- **Recommendation.** The participants reported feeling that they were not getting the support they needed to gain and maintain a job. The Drug Court Team might consider incorporating a Team member from an employment agency/department. This kind of agency could provide resume writing and interview training and other assistance in finding a job.

Response. The MCADC received an enhancement grant in 2004. This grant included funding for an employment counselor (\$7132.32/year for 2 years). The Program hired a Vocational Rehabilitation Counselor. The new Employment Counselor is a Level II Certified Alcohol and Drug Counselor (CADCII) and a Certified Rehabilitation Counselor (CRC). She also has a Masters Degree in

Rehabilitation Counseling. Participants are uniformly positive about the assistance she is providing them.

For a more detailed description of the MCADC process and the process evaluation results see the full Marion County Adult Drug Court Process Evaluation Final Report (2003). This report can be found online at www.npcresearch.com.

Outcome Evaluation Methodology

Study Design

The research strategy used by NPC Research for this outcome evaluation was to identify a program group sample of participants who entered Drug Court and a matched historical comparison sample of individuals who were eligible for Drug Court but who received traditional court processing in the year before the MCADC program was implemented. Because this drug court is both small and relatively new (beginning full operation in September 2001), the Drug Court sample consisted of the entire Drug Court participant population (except for those who had entered the Drug Court less than 6 months from the time of the outcome data collection). Both groups were examined through existing administrative databases from the date of the initial contact with the Drug Court program (or the equivalent) through July 2004. For those participants who entered the program soon after implementation, this allowed follow-up for 24 months post drug court entry. The evaluation team utilized the data sources on criminal activity and treatment utilization, described below, to determine whether Drug Court participants and the comparison group differed in re-arrests and convictions. Also examined were the effectiveness of the program in reducing client drug use, as well as whether there were any clear predictors (such as demographics, prior criminal history, and readiness to change) of graduation versus termination from the program or of reduced recidivism.

This outcome evaluation was designed to answer the following research questions:

- 1. Does participation in drug court, compared to traditional court processing, reduce the number of re-referrals for participants?*
- 2. Does participation in drug court reduce levels of substance abuse?*
- 3. How successful is the program in bringing participants to completion and graduation within the expected time frame?*
- 4. What participant characteristics predict successful outcomes? What are the commonalities of clients terminated from the program? How do those terminated from the programs differ from those who have graduated?*
- 5. How important is aftercare to successful outcomes?*

Data Collection

The data collected for this outcome evaluation was gathered from several sources. Most of the data consisted of administrative databases, described below. Some data (such as some treatment and drug testing information) had not been entered into the drug court case management system and therefore were provided by the treatment agency from their internal database.

Oregon Drug Court Case Management System (ODCMS)

The Oregon Drug Court Case Management System (ODCMS) was developed by the Oregon Judicial Department, State Justice Institute and was considered fully operational in April of 2003. The database allows drug courts to record information on client demographics, drug court hearings, drug testing, treatment providers, substance abuse and criminal history, case notes, outcomes, and follow-up information. The ODCMS data was a primary source of drug court utilization data for the evaluation. However, due to the recent development of the ODCMS, some of the information on clients who began the program before the pilot testing of the database was not entered. In addition, some information was not entered because staff found it difficult to pull back out for client management, so it was considered an inefficient use of staff time to enter it. Data that was not entered into ODCMS were provided for the evaluation by the treatment provider.

Oregon Judicial Information System (OJIN)

This is a case tracking system that stores Oregon State Court case information from multiple sources into a single database. Courthouses throughout the state are electronically tied together into a statewide network. OJIN contains data regarding an individual's arrest charges, case status (i.e., whether it is in warrant status, probation violation status, or active), court dates, times and locations, motions and orders filed, sentences, case history from when it was filed until disposition, attorney names, and demographic information on the defendants. There is an OJIN terminal at NPC Research and trained staff available to use it. OJIN data, along with LEADS data, allows the evaluation team to gather in-depth information on each sample participant's criminal history and criminal record since entering Drug Court.

Data from Treatment Provider

Serenity Lane provided the evaluation team with an attendance spreadsheet detailing daily treatment contact (levels and hours), UA testing, and corrections support with Drug Court participants. Additionally, a summary spreadsheet contained information about the dates participants were involved in each level of treatment, the total number and number of positive UAs taken, and each participant's readiness to change score at their initial assessment. The employment and housing status at Drug Court entry and discharge were also included for each participant.

Sample Selection

Drug Court Participants

The Drug Court participant sample consists of all those who entered the Marion County Adult Drug Court since its implementation, except for those who entered less than 6 months previous to the date of the evaluation data collection, as it was determined that there was not enough time for any meaningful outcome data to accumulate. This provided a total of 62 participants in the Drug Court sample. The primary drug of choice for the MCADC program participants was methamphetamine (62%), followed by marijuana (25%). The most common secondary drug of choice was marijuana (48%) with the next most common secondary drugs being alcohol (23%) and methamphetamine (16%). The Drug Court participant sample, along with the comparison group, is described further in Tables 1 and 2, below.

Comparison Sample

To select the comparison sample, the Marion County Circuit Court generated a list of all those arrested on Drug Court eligible charges during the year prior to MCADC implementation. A “proxy” (or estimated) entry date was created for the comparison group by calculating the average amount of time between arrest and Drug Court entry for the Drug Court participants and then adding this amount of time to the drug court eligible arrest for the comparison group members. The comparison group individuals were then matched, in aggregate, to the Drug Court participants on gender, ethnicity, age and criminal history in the two years prior to Drug Court entry (including number of prior arrests of all types and number of prior drug related arrests in the two years before drug court entry). T-tests performed on these variables showed no statistically significant difference between the two groups. The final matched comparison sample consisted of 62 individuals, the same number as drug court participants.

Table 1: Drug Court and Comparison Group Demographics

	Mean age at time of referral	Ethnicity	Gender
Drug Court Group N=62	29.6 years (range=18 to 53)	84% White 16% Non-White (4 African-American 4 Hispanic, 1 Asian-American 1 Native-American)	52% Male 48% Female
Comparison Group N=62	32.0 years (range=18 to 63)	77% White 23% Non-White (2 African-American 8 Hispanic, 1 Asian-American 1 Native-American)	52% Male 48% Female

Table 1, above, presents the demographics for each sample. Table 2 shows the mean numbers for prior arrests in the drug court and comparison groups. As demonstrated in the tables, the proportion of males to females is equal for both groups. Both samples are primarily white with each group having a small number of non-white, minority members (10 in the Drug Court participant sample and 12 in the comparison sample). The average age in both samples is about 30 years. The mean number of arrests prior to Drug Court entry is slightly higher for the comparison sample, but not significantly so, and the mean number of *drug* related arrests is nearly the same for the two groups.

Table 2: Drug Court and Comparison Group Prior Arrests

	Mean Drug Court (n=62)	Mean Comparison (n=62)
Number of arrests 2 years prior to DC arrest	0.27	0.39
Number of drug related arrests 2 yrs prior to DC arrest	0.15	0.16

Results

The results of the MCADC data analyses are presented below in the order of the research questions described earlier in this report. The relatively small sample size (particularly for those analyses involving only those who completed the program) means that most analyses did not have enough power to produce valid statistical significance. Therefore, most of the results were examined in a more qualitative manner. The data must be considered in terms of apparent trends rather than in terms of statistical significance. As the program grows and expands over time, further evaluation can examine a greater sample size, providing verification of these results.

Research question #1: Recidivism.

Does participation in drug court, compared to traditional court processing, reduce the number of re-referrals for participants?

Figure 1: Cumulative Re-Arrests for Drug Court and Comparison Group

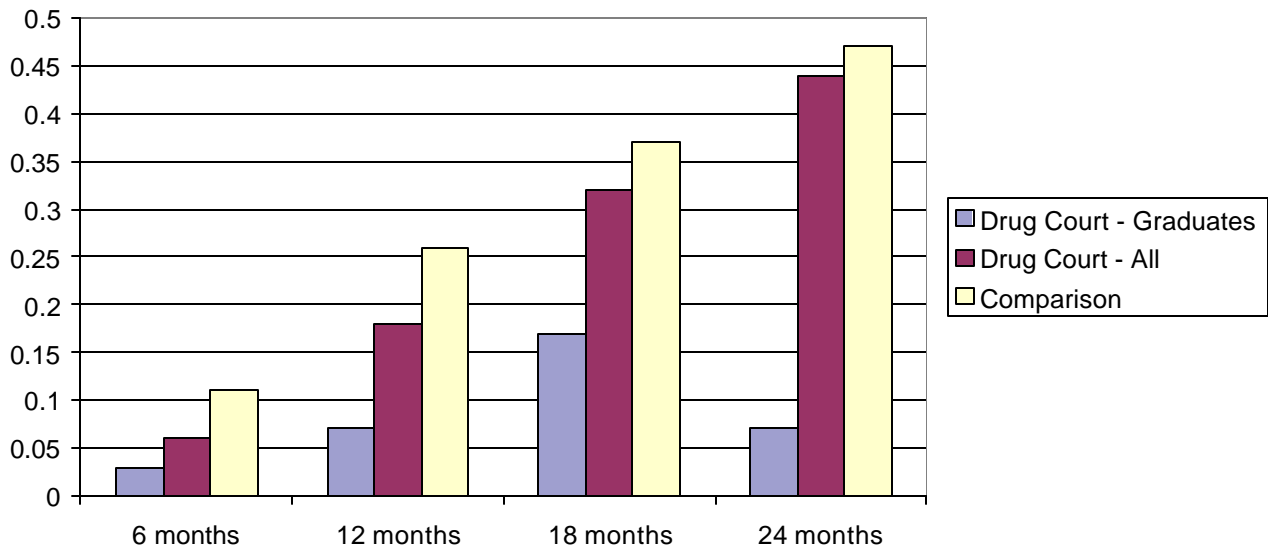
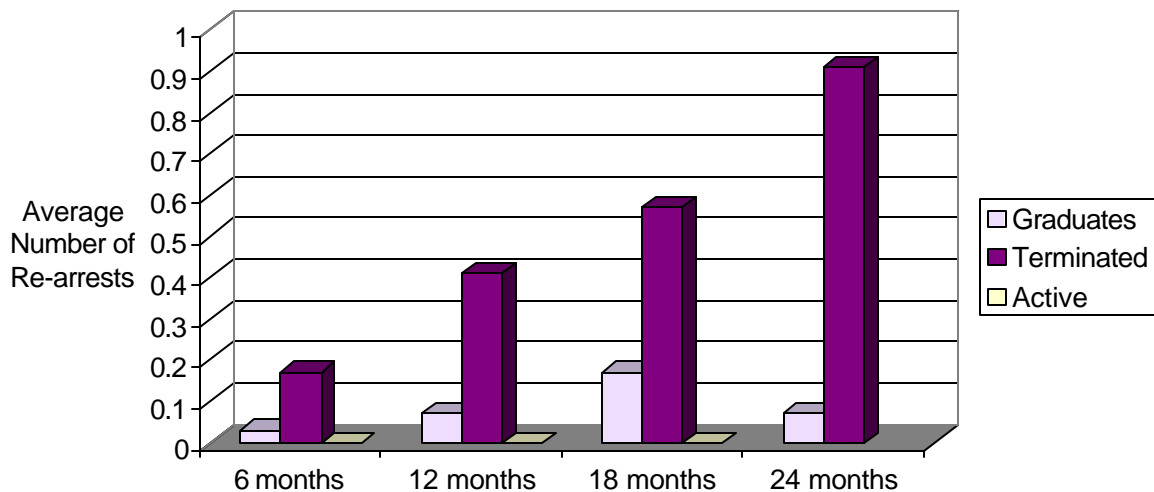


Figure 1 contains the recidivism results for the first 24 months following entry to the Drug Court program. The sample consists of active, graduated, and terminated Drug Court participants and a matched comparison group (n=62)¹. It should be noted that due to attrition (i.e., those who started the program later do not have 24 months worth of data after drug court entry), the sample size for the Drug Court group ranges from 62 participants at 6 months to 25 participants at 24 months. Also depicted in the above figure are the recidivism results for program graduates. The overall number of re-arrests and the number of individuals re-arrested is small. Therefore, none of the above results are statistically significant. In spite of this, the trend shows a positive effect for those who participated in the MCADC program. Program graduates are doing particularly well.

¹ A “start” date was calculated for the comparison group by taking the mean amount of time between the Drug Court related arrest and the Drug Court start date for Drug Court participants and adding this amount of time to the comparison group arrest date.

Another way to examine recidivism is to look at the percentage of Drug Court participants and comparison group members that recidivate at some point following their entry into Drug Court (this includes all 62 Drug Court participants and all 62 comparison group members). **In the MCADC program, 13% of all 62 participants were re-arrested at sometime within the two years after drug court entry while 27% (more than double the number) of the comparison group was re-arrested in that time period.** In sum, participation in Drug Court appears to reduce re-engagement with the criminal justice system. Again, keeping in mind the small number of participants and re-arrests, the trend indicates a positive effect for those who participate in Drug Court, whether or not they graduate.

**Figure 2: Cumulative Re-Arrests for Drug Court Participants
(Graduated, Terminated and Active)**



To add a dimension of description, the recidivism (the average number of re-arrests) of the three Drug Court groups (graduates, terminated and currently active) is compared in Figure 2. Although not statistically significant, the data indicates that participants who graduate tend to recidivate at a much lower rate than those who do not complete the program. Moreover, the difference in re-arrests for graduates and active participants compared to terminated participants appears to grow exponentially over time. The number of re-arrests in the terminated group was due to a small number of individuals who were re-arrested more than once. Therefore, this exponential growth is most likely an artifact of the small sample size and small number of re-arrests rather than a trend for terminated individuals as a group.

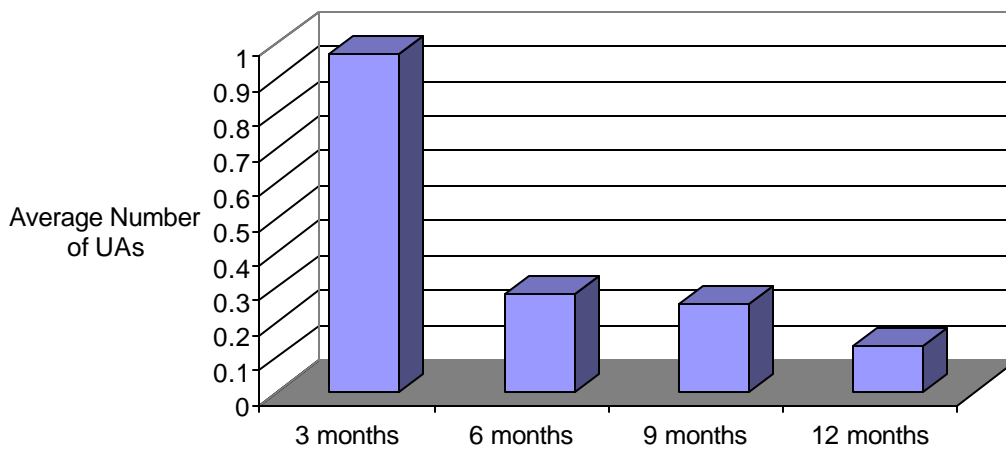
A point of interest in Figure 2 is that the active participants have not been re-arrested at any point in the 18 months they have been involved with Drug Court. Contrary to the myth that drug courts may risk public safety by diverting offenders from incarceration, the Marion County Drug Court appears to ensure public safety over traditional court processing. As the program grows and more participants complete the program, the validity of these findings can be determined.

Research question #2: Reducing Substance Abuse.

Does participation in drug court reduce levels of substance abuse?

The dates of positive urinalyses (UAs) for the Drug Court group were obtained from the ODCMS database. Mean numbers of UAs were calculated for each three-month block from the date of program entry for all participants who were in the program for at least one year (n=32). The number of positive UAs at the beginning of a participant's time in Drug Court was substantially higher than at later times, indicating that the levels of substance abuse had indeed been reduced. The means for each of these time periods is presented in Figure 3.

Figure 3: Mean Number of Positive UAs Over 12 Months in Program

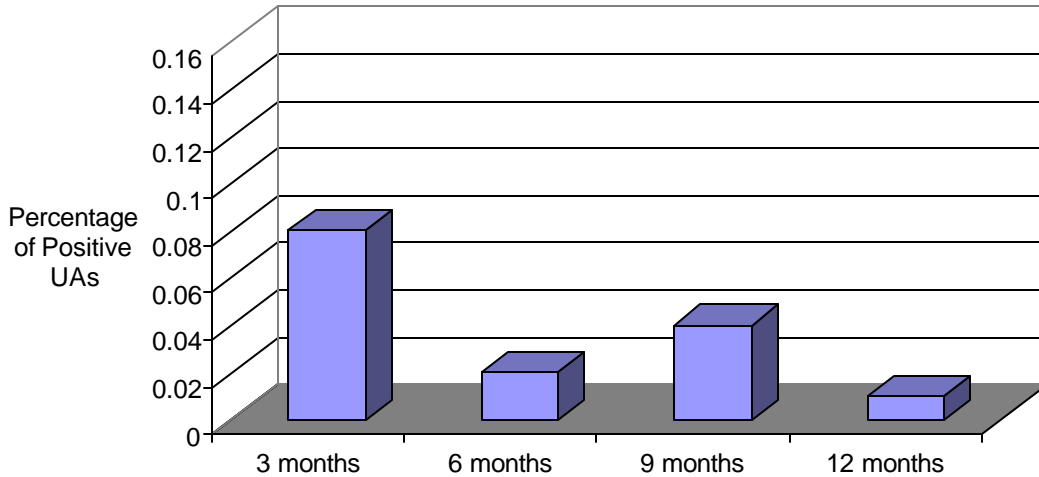


Although it is somewhat suspect to use the number of positive UAs over time as an indicator of reduced level of substance abuse (because a reduction in positive UAs is required for continued enrollment in the program), all individuals with at least 12 months in the program were included in this analysis, so graduates, current participants, and those that were terminated are represented. In addition, correlations were run and the number of positive UAs was not correlated with program status (termination or graduation). This indicates that program status (i.e., successful participation) was not the only factor in this demonstrated reduction in substance abuse.

In order to determine if the reduction in the number of positive UAs was simply a function of a reduction in the total number of drug tests given to participants in each phase, the percentage of positive UAs was also examined. Figure 4 contains information regarding the percent of positive UAs to total UAs during the first 12 months of Drug Court participation. This figure shows that within the first 3 months of Drug Court, on average, approximately 8% of UAs taken came back positive. After that initial period, the percent of positive UAs oscillates between 2% and 4%. However, the drawback to this approach is that this information may not present an accurate picture due to the decreasing number of UAs given to participants over the course of their Drug Court tenure. A single positive result has a greater impact on the percentage if the total number is only one or two UAs during a time period as opposed to the impact of a positive UA on a total of 30 UAs. However, regardless of whether positive UAs are examined as a number or a percentage, drug use

in Drug Court participants does appear to decrease after program entry. Further the percent of positive UAs is extremely small. The highest number was still less than 8%.

Figure 4: Percent of Positive UAs to Total UAs Over 12 Months in Program



Another way to examine the influence of Drug Court participation on substance abuse is through the number of re-arrests for drug related crimes. It should be noted that the number of drug related re-arrests is only a fraction of the re-arrests total, thus precluding the achievement of statistically significant results. However, these data can provide meaningful insight into recidivism patterns that may be related to substance use.

Figure 5: Drug Related Re-Arrests for Drug Court and Comparison Group (Cumulative Over Time)

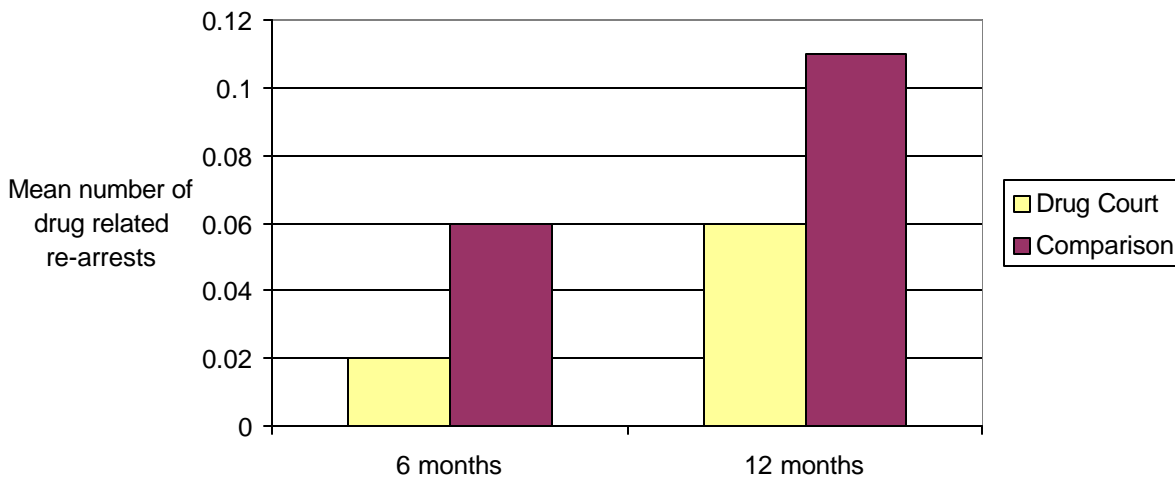


Figure 5 details the cumulative drug related re-arrests for those Drug Court participants and comparison group members who had at least 24 months of data from their Drug Court entry date.

Although not significantly different, within the first 12 months there do appear to be positive program effects for those who participated in Drug Court. Specifically, few of the re-arrests of Drug Court participants within the first 6 months were for drug related offenses and at one year, the Drug Court participants maintained a lower average of drug related arrests. The drug related re-arrests appear to be due primarily to those who terminated from the program as shown in Figure 6, below.

Figure 6: Drug Related Re-Arrests for Drug Court Participants by Status and Comparison Group (Cumulative Over Time)

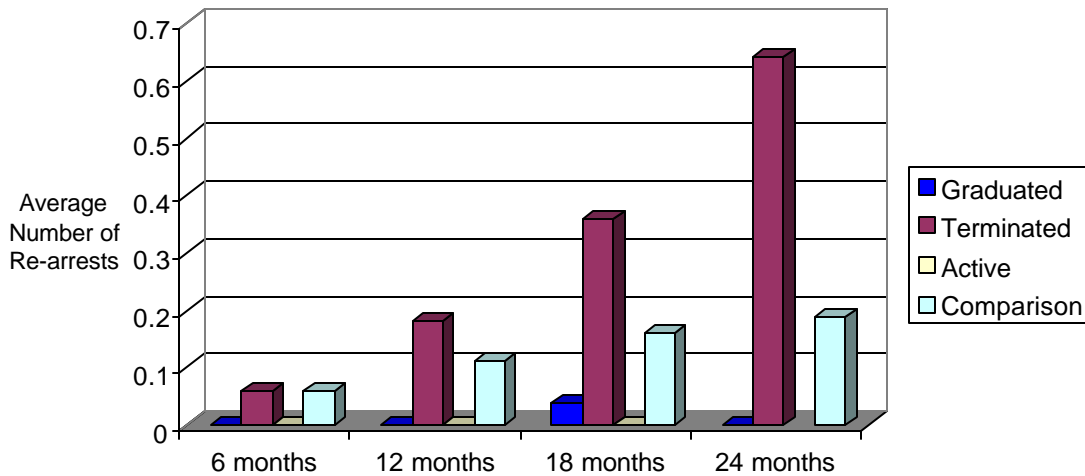


Figure 6 clearly shows that the Drug Court participants who were terminated account for nearly all of the drug related re-arrests for the Drug Court group. Almost none of the re-arrests for the graduates were drug related, whereas 57% of the re-arrests for the terminated group and 41% for the comparison group were drug related. Although the numbers look dramatic, the mean number of drug related re-arrests is extremely small for all groups, so care should be taken in interpreting these results. For example, 16% of the terminated group (3 out of 18) were responsible for all of the drug related re-arrests in that group. Future evaluation on a larger sample, as the program grows and more participants complete the program, would be able to determine the validity of these findings as well as the overall re-arrest findings described in the paragraph above.

Research question #3: Program Completion.

How successful is the program in bringing program participants to completion and graduation within the expected time frame?

Table 3 provides program duration statistics for the Drug Court sample. The average time from program entry to graduation for MCADC graduates is just under 16 months. Although it is possible to graduate from this program in 12 months, it is expected that most participants will graduate in 15 to 18 months. It is very common for drug court participants to take longer than the minimum duration of the program to graduate (Cooper, 2000).² Most drug courts have 12-month programs, though more recently, some have extended their programs to 18 months. NPC Research has found in its experience with 9 drug courts in California, 5 drug courts in Oregon, and 3 drug courts in Maryland, that many drug courts with 12-month programs have an average time to graduation of 18 months. Therefore, the MCADC program is similar in timing to most drug courts and is on schedule in bringing its graduates to completion in their expected time frame.

Table 3: Participant Length of Time Spent in MCADC Program

	Mean length of time in months
Time spent in program—both terminated and graduated	11.19 (range= .76 to 32)
Time between DC arrest and DC entry	6.61 (range = 0 to 61) Median = 2.98
Time in program until graduation (successful completion, <i>n</i> =30)	15.68 (range=10.49 to 32)
Time in program until termination (unsuccessful completion, <i>n</i> =18)	9.30 (range=1.48 to 21)
Time in program of currently active (<i>n</i> =14)	4.03 (range= .76 to 13.05)

Another measure of the success of programs in bringing participants along in treatment is retention rate. In this sample of MCADC participants, the program demonstrates a retention rate of just over 71% (44 graduated or currently participating, and 18 terminated or withdrew). This is far better than most standard (non-criminal justice related) treatment programs and better than average for drug court programs nationally (Cooper, 2000).³ Further, retention may increase as this relatively new program fine-tunes its process.

Note that the mean length of time between the arrest that led to drug court and the drug court start date is 6.61 months. This is due, for the most part, to offenders who came into the program through Probation and therefore had several months (or years) before they were referred to the program. Therefore, the mean length of time does not reflect the ability of the program to get offender from arrest to referral to entry in the program quickly. The median shows that half the people who enter the program have less than three months between their arrest date and the date they started the

² American University Website

³ Cooper, C. (2000). *Drug Court Activity Update: Summary Information*. American University Drug Court Clearinghouse and Technical Assistance Project. Drug Courts Program Office, Office of Justice Programs, U.S. Department of Justice. February, December 2000.

program. This means that generally offenders are getting referred and are entering the program relatively rapidly.

Research Question #4: Predictions of Success.

What participant characteristics predict successful outcomes? What are the commonalities of clients terminated from the program? How do those terminated from the programs differ from those who have graduated?

At the time of the data collection for this evaluation, 30 individuals had graduated and 18 had terminated unsuccessfully. This is a small sample for running any meaningful statistical analyses. Additionally, for some analyses, the sample size was further decreased if participants were missing data on the variables of interest. However, the analyses were performed in order to uncover any trends of interest.

Predictions of Status at Exit (Graduation or Termination)

To investigate how the graduated versus terminated groups differed on key factors, Crosstabs using chi-square tests of significance and Univariate Analyses of Variance (ANOVAs) were performed. The Crosstabs assessed whether graduates differed from those terminated on measures of marital status, gender, insurance type, primary and secondary drugs of choice, employment status at the start of Drug Court, and finally, housing status at Drug Court entry. The ANOVAs assessed whether graduates and terminated participants differed on measures of initial readiness to change scores, number of arrests prior to Drug Court entry, years of education, and age at the time of their Drug Court arrest.

Age at the time of Drug Court referral, marital status, race, insurance source, employment status when starting Drug Court, number of arrests prior to Drug Court entry and years of education were not correlated with status at exit. This implies that the program is able to equitably serve clients with a range of demographic characteristics, particularly a broad range of ages and individuals with varying education. However, there was a significant correlation (-.530, $p < .01$) between gender and Drug Court status. Additional analyses indicated that females were much less likely to graduate from Drug Court than males. Only 23% (7 out of 30) of the graduates were females and nearly 67% (14 out of 18) of terminated were female. This suggests that there is some aspect of Drug Court that may not be adequately serving the needs of female clients.

To explore possible explanations for the gender differences in graduation, males ($n = 27$) and females ($n = 21$) were compared on many of the personal characteristics used for the overall analyses. The results suggest that the females in this Drug Court sample may have entered the program with a higher number of life challenges than the males. A higher percentage of females than males were single or divorced when they entered the program and all of the women (vs. 75% of men) were unemployed upon Drug Court entry. Women also tended to be without housing or their housing status was unknown when they started Drug Court, whereas over two-thirds of the men had housing. Males and females also differed on their primary drug of choice. Over 80% of women were methamphetamine users compared to only 41% of the men. Research indicates that addiction to methamphetamine may cause more long-term physical damage than most other drugs

(NIDA, 2000).⁴ This implies more difficulty in treating and overcoming methamphetamine addiction. If the trends suggested by this data hold up over time, more specialized or intensive services may be needed to help women successfully complete the MCADC program. Further, there may be factors such as single parenthood and differences in the nature of employment for men and women that were not assessed for this evaluation but could contribute to understanding why women have not been as successful as men in this program.

Several interesting trends were found for variables that approached, but did not achieve, levels of statistical significance. Nearly 78% of the terminated clients were methamphetamine users as opposed to 47% of the graduates who reported methamphetamine as their primary drug of choice. There is no indication that the frequency of use (as measured by number of days per week of use) prior to Drug Court entry influenced status at exit.

Next, terminated clients were more likely to have at least one dependent child. There are several possible explanations for this relationship. Clients with dependent children may have more family issues and experience greater stress than those without children, which may in turn interfere with their progress. Alternatively, childcare issues may interfere with the ability of clients to meet the demands of the Drug Court program. This correlation was not significant and may not exist if performed on a larger Drug Court population in the future, but it may serve as an area for investigation.

As might be expected, there was a strong and positive relationship between participants' scores on the readiness-for-treatment scale (higher scores indicate greater readiness) and their status at exit. That is, the more ready participants were for treatment at their initial assessment, the more likely they were to graduate. This result was statistically significant ($F(1, 46) = 12.78, p < .001$). Although this was not unexpected, it is good to confirm that the assessment tool being used at program entry is appropriately measuring readiness for treatment.

To illustrate the differences between the two groups, Table 4 presents the percentages or means for the variables of interest. As with previous analyses, the number of participants in each group may vary slightly from the overall N based on whether data is missing.

⁴ For more information on the affects of methamphetamine use see the following websites:

http://www.drugabuse.gov/NIDA_Notes/NNV0115N4/Methamphetamine.html

<http://www.drugabuse.gov/Infobox/methamphetamine.html>

Table 4: Percentage and Means of Participant Characteristics for Graduated vs Terminated

Category	Graduated (n=30)	Terminated (n=18)
Gender	23% female	67% female
Mean age at time of DC referral	29.13	28.27
Mean years of education	11.38	11.50
Mean number of arrests in two years prior to DC entry	.27	.17
Mean number of drug related arrests two years prior to entry	.17	.11
Mean degree of readiness to participate in treatment	2.00	1.33
Mean frequency of drug use (in days/week)	5.35	5.00
Mean number of positive UAs	1.27	2.31

Predictors of Reduced Recidivism

Correlations, Regressions, and Univariate Analyses of Variance were performed to determine the nature of the relationship between characteristics of program participants and re-arrests after participants began the program. Only participants for whom at least 18 months of post Drug Court entry re-arrest data were available were used for these analyses. It should be noted that the number of re-arrests is very small (there were only 12 re-arrests and those were attributed to 7 of the 38 Drug Court participants used in these analyses). None of the correlations of re-arrests with participant characteristics were statistically significant and most non-significant correlations were probably artifacts. One interesting correlation was that the women were re-arrested more often than men. However, since most of the terminated group was women, this is likely more a function of status (terminated versus graduated) than a function of gender.

The one participant characteristic that was correlated fairly highly with re-arrests was readiness-for-treatment. Consistent with the finding that the readiness-for-treatment scale was correlated with exit status (the more ready for treatment, the more likely to graduate), readiness-for-treatment was negatively correlated with re-arrests (-.226, non-significant). That is, the more ready an individual was for treatment (on the readiness scale), the less likely he or she was to be re-arrested. Yet, there was almost no relationship between drug related re-arrests and readiness-to-change measures (-.079, non-significant). However, considering the extremely small number of drug related re-arrests in this sample, this is not surprising. The correlation between readiness-to-change and lower recidivism in conjunction with the status findings, indicates that perhaps participants who are truly prepared to change obtain broader benefits from their treatment, which results in improvements for multiple facets of their lives.

Research Question #5: Aftercare.

How important is aftercare to successful outcomes?

Although aftercare is a requirement of treatment at the MCADC, participants tend to vary widely in the amount of time spent in aftercare. The MCDAC program suggests that aftercare should last about 6 months but may be longer or shorter depending on the individual. The average number of days spent in aftercare for graduates was 136 (range from 21 to 261 days; outlier of 331 days not included). This indicates that graduates tend to spend, on average, roughly 1.5 fewer months than expected in aftercare.

Correlations between days in aftercare and the number of re-arrests for the period 12 to 18 months after starting drug court (the average length of time in the program indicates that most graduates would have graduated during this period) indicates that there is a small, negative correlation between days spent in aftercare and re-arrests, particularly for drug related re-arrests. Although graduates are rarely re-arrested, this indicates that the longer time spent in aftercare the fewer number of times the graduate is likely to be re-arrested. As more data accumulates, it will be interesting to see if this is just an anomaly or if there is a true relationship between time spent in aftercare and recidivism.

Summary/Conclusion

The characteristics of those who graduated and those terminated were examined in order to determine if there were certain participant characteristics that could be predictive of success (or termination). There were not a large number of characteristics that strongly predicted exit status. The most significant finding was that women were much more likely to terminate from the program than men. Further examination of differences between the genders showed that the female participants were more likely to have life challenges such as lack of housing and lack of employment (none of the females were employed at the time of Drug Court entry).

Graduates tended to have slightly more arrests prior to Drug Court entry, were more likely to be male, were less likely to use methamphetamines, and were more likely to score high on the readiness-for-treatment scale (i.e., as might be expected, graduates were apparently more ready for change). Those terminated were more likely to be female, were more likely to use methamphetamines, and scored lower on readiness-for-treatment. It is recommended that the MCADC Team continue to watch these trends, and look for other trends, as the program matures so that; (1) The Team can use participant characteristics to determine an offender's appropriateness for the Program and (2) The Team can seek out specific services that can be added to the program to address the issues (particularly those for women in the program) that appear to lead to unsuccessful termination.

Although the sample size is small, taken as a whole, the trends in the outcome results for the MCADC are very positive. The number of re-arrests for those who participated in the program, whether they graduated or not, was lower than that for the non-drug court comparison group. In addition, results showed that active participants were not re-arrested at any point in the 18 months they were involved with Drug Court. Contrary to the myth that drug courts may risk public safety by diverting offenders from incarceration, the Marion County Drug Court appears to ensure public safety over traditional court processing.

Other outcome measures also demonstrated positive trends. The mean number and percentage of positive urinalyses over time provided evidence that participant drug use was, indeed, decreasing over time spent in the program. The average length of time spent in the program for graduates was approximately 16 months. As the expected length of time from entry to graduation for this program is 15 to 18 months, this demonstrates the program's ability to bring participants through the program to graduation in a timely manner. Finally, the program retention rate was 71%. This is not only higher than retention rates for non-criminal justice related treatment programs, it is also higher than average for most drug court programs (Cooper, 1997).

As mentioned above, the main concern in this outcome study was that, because the MCADC program is relatively young and still growing, the sample for this first outcome evaluation was, of necessity, small. For this reason, the results of the analyses described in this report should be taken with caution. However, the overall trend in outcomes for the MCADC is very positive. The MCADC program appears to be impacting its participants in the intended manner. Further examination of outcome data as the program continues to grow will allow for a larger sample size and the ability to verify the positive preliminary results achieved in the current evaluation.

**Appendix A: MCADC Process Evaluation
Executive Summary**
2003

Marion County Adult Drug Court Process Evaluation Final Report

Executive Summary

Marion County began piloting their Adult Drug Court in April 2000. It was fully operational in September 2001, following receipt of a drug court implementation grant from the Drug Court Program Office at the National Institute of Justice. This grant also provided evaluation funds and NPC Research was hired to perform a process and outcome study of the Drug Court. This report contains the process evaluation performed by NPC using the Ten Key Components of Drug Courts (developed by the NADCP in 1997) as a framework. The Marion County Adult Drug Court was evaluated on its ability to demonstrate these key components. The chief results are as follows:

Ten Key Components of Drug Courts

Component 1. Drug courts integrate alcohol and other drug treatment services with justice system case processing.

Marion County Adult Drug Court has an unusually high degree of Team integration, which is one of its greatest strengths. Team members from many different agencies (from both the justice and treatment systems) and with different perspectives work together to arrive at a consensus on final decisions, focusing on what is best for the participants. Frequent communication and input from Team members allows the Court to act swiftly when problems arise.

Component 2. Using a non-adversarial approach, prosecution and defense counsel promote public safety while protecting participants' due process rights.

Team members, including the prosecution and defense counsel, feel comfortable stepping outside their traditional roles in order to do what is best for participants in the Marion County Drug Court. At the same time, the attorneys believe that the mission of each has not been compromised, that public safety has been protected, and that the rights of Drug Court participants have been protected.

Component 3. Eligible participants are identified early and promptly placed in the drug court program.

Marion County Drug Court has an organized way of identifying eligible drug court participants, and the Judges, the District Attorney's Office, and the Defense Attorneys are informed about those requirements. The length of time between arrest and arraignment (during which a client is referred to Drug Court) is about three weeks, followed by about two weeks between arraignment and entering Drug Court. Clients entering Drug Court from outside this process, such as through another Judge or Probation, do so at varying lengths of time. In any case, once a client is identified as being eligible for Drug Court, the process is in place to have them enter swiftly.

Component 4. Drug courts provide a continuum of alcohol, drug, and other related treatment and rehabilitation services.

Diverse, specialized treatment appears to be a strong component of the Marion County Adult Drug Court. The Treatment Provider, highly praised by participants, is unique in that the program is specially designed to treat criminality issues as well as drug and alcohol addiction.

In addition to standard guidelines and services, the Drug Court works to ensure individualized treatment by offering varied resources, such as parenting classes and mentors. Participants are well informed about the many treatment services available to them, and they are encouraged to take responsibility and seek out their own assistance.

Component 5. Abstinence is monitored by frequent alcohol and other drug testing.

Based on results from the American University National Drug Court Survey (Cooper, 2000), the number of urinalyses (UAs) given in this Court during the first two phases (two to three per week) is comparable to the majority of drug courts nationally, and the number of UAs given in their third, and last, phase is comparable to the number given in later phases by drug courts nationally. In addition, the Team works to prevent clients from drinking alcohol as an alternative to drugs by using an at-home monitoring system, the Sobrietor, with which participants take part in random alcohol tests over a specialized phone system.

Component 6. A coordinated strategy governs drug court responses to participants' compliance.

The Marion County Drug Court uses standard, graduated sanctions for non-compliant behaviors as well as creative sanctions they feel would be most effective for specific individuals. Sanctions are determined by the Team, with the Judge's approval. Rewards are given for positive behavior and for improvement throughout the program. The type of rewards given are comparable to those given by drug courts nationally, although this Drug Court provides fewer material rewards and has a lower frequency of rewards compared to sanctions than other drug courts, mostly due to a lack of resources.

Component 7. Ongoing judicial interaction with each drug court participant is essential.

There is excellent ongoing interaction between the Judge and participants in this Drug Court. The Judge sees participants once a week in Phase 1, three times a month in Phase 2, and twice a month in Phase 3. In fact, there is more contact with the Judge in this Drug Court than the national average. Participants spoke positively about the Judge and appreciated the interest he showed in them and their families.

Component 8. Monitoring and evaluation measure the achievement of program goals and gauge their effectiveness.

The Marion County Adult Drug Court was very supportive of this, their first, evaluation. The Team members made themselves available for interviews, responded quickly to requests, and helped arrange site visits and focus groups. This Court also performs good self-monitoring and is willing to make adjustments in policy and in the makeup of the Team as needed. The outcome evaluation, to

be completed in August of 2004, will measure the achievement of program goals and program effectiveness.

Component 9. Continuing interdisciplinary education promotes effective drug court planning, implementation, and operations.

Most Marion County Adult Drug Court Team members have attended drug court trainings and continue to attend trainings whenever possible. Team members have also attended multiple NADCP conferences and have observed other Drug Courts. The Judge, Coordinator and one of the Defense Attorneys are all active in the Oregon Association of Drug Court Professionals (OADCP) and the Judge is currently President of that organization and the Attorney is on the Executive Board. Information from the OADCP as well as other educational materials is brought back to the Team for discussion on a regular basis.

Component 10. Forging partnerships among drug courts, public agencies, and community-based organizations generates local support and enhances drug court effectiveness.

Forging partnerships is another area in which this Drug Court excels. They have built strong relationships with a large number of community agencies and are continually working towards creating new relationships. This Drug Court has a uniquely strong relationship with Law Enforcement and Mental Health agencies. The Judge promotes Drug Court in the community and has gained the support of key business players.

Comments and Observations

Having a 12-step representative attend Drug Court sessions is a unique and laudable practice that not only helps connect participants to the recovery community, but also may provide the perspective of a person in recovery for the Team.

There was some concern that clients with serious co-occurring disorders would use a large amount of Drug Court resources without much return. However, it was reported that with time being donated by mental health treatment agencies, clients with serious mental health issues do not have to use many of the Court's resources and have unanimously been successful in the Program.

It is commendable that Law Enforcement is such a strong member of this Drug Court Team. This involvement has not only provided the Drug Court Team with a useful perspective on their clients but has also helped change Law Enforcement's view of individuals with drug addiction.

Participants reported feeling very positive about the Drug Court Team members and the Program. In particular, they appreciated the help they received from the Drug Court Coordinator. They also appreciated that part of treatment focused on criminality and thinking errors, although they did not feel the movies shown in treatment were helpful.

Recommendations

It is recommended that the Team provide written guidelines (with examples of possible graduated sanctions) to the participants through inclusion in the handbook. This would give clients an idea of what to expect and provide a baseline of sanctions for the Team's use.

As lack of available funding for rewards has meant that sanctions have outnumbered rewards in this court, suggestions were given for some low or no-cost rewards that could be added to those currently available. These suggestions include calling clients who are doing well before the Judge first at Court sessions and instituting a drawing for those who are showing good Program progress.

The participants reported feeling that they were not getting the support they needed to gain and maintain a job. The Drug Court Team might consider incorporating a Team member from an employment agency/department. This kind of agency could provide resume writing and interview training and other assistance in finding a job.

The Drug Court Team may want to look through the participant manual both to update it for any recent changes in process and to look for places that might be considered as “talking down” to a participant. The manual might benefit from a revision changing any slang to simple but professional language.

Summary/Conclusion

Overall, the Marion County Adult Drug Court demonstrates the Ten Key Components of Drug Court in an exemplary fashion. One of the Court's greatest strengths is its highly integrated and diverse Drug Court Team. In addition, this Drug Court has large amount of positive community relationships and community support.

The one key component that was less strong involved the use of rewards, due in a large part to a lack of funding. Recommendations were made for low- and no-cost rewards. A recommendation was also made regarding the usefulness of written sanction guidelines for participants.

In addition to the quality of the Drug Court Team, strengths of this Drug Court include the strong commitment to education of the Team members and the high frequency of contact and positive relationships between the participants and the Judge.