Indiana Drug Courts:

MONROE COUNTY DRUG TREATMENT COURT

Process, Outcome and Cost Evaluation

FINAL REPORT



Submitted to:

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Indiana Drug Court Evaluation Team

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TABLE OF CONTENTS

BACKGROUND.	EXECUTIVE SUMMARY	I
Methods 3 Site Visits 3 Key Informant Interviews 3 Focus Groups and Participant Interviews 4 Document Review 4 Results 4 Monroe County, Indiana 4 Monroe County Drug Treatment Court Overview 5 Implementation 5 Participant Population 5 Drug Court Goals 6 Eligibility Criteria 6 Drug Court Program Screening 6 Incentives for Offenders to Enter (and Complete) the MCDTC Program 7 Drug Court Program Phases 9 Treatment Overview 13 The Drug Court Team 13 Drug Court Team Training 14 Treatment Provider and Team Communication with Court 14 Team Meetings 15 Steering Committee 15 Drug Court Fees 15 Drug Court Fees 15 Drug Testing 16 Rewards 16 Sanctions 16 Termination 17 Graduation 1	BACKGROUND.	1
Site Visits 3 Key Informant Interviews 3 Focus Groups and Participant Interviews 4 Document Review 4 Monroe County, Indiana 4 Monroe County Drug Treatment Court Overview 5 Implementation 5 Participant Population 5 Drug Court Goals 6 Eligibility Criteria 6 Drug Court Program Screening 6 Incentives for Offenders to Enter (and Complete) the MCDTC Program 7 Drug Court Program Phases 9 Treatment Overview 13 The Drug Court Team 13 Drug Court Team Training 14 Treatment Provider and Team Communication with Court 14 Team Meetings 15 Steering Committee 15 Drug Court Sessions 15 Drug Court Fees 15 Drug Testing 16 Rewards 16 Sanctions 16 Termination 17 Graduation 17 Drug Court Funding 17 MCDTC 1	PROCESS EVALUATION	3
Monroe County Drug Treatment Court Overview 5 Implementation 5 Participant Population 5 Drug Court Goals 6 Eligibility Criteria 6 Drug Court Program Screening 6 Incentives for Offenders to Enter (and Complete) the MCDTC Program 7 Drug Court Program Phases 9 Treatment Overview 13 The Drug Court Team 13 Drug Court Team Training 14 Treatment Provider and Team Communication with Court 14 Team Meetings 15 Steering Committee 15 Drug Court Fees 15 Drug Court Fees 15 Drug Testing 16 Rewards 16 Sanctions 16 Termination 17 Oraduation 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 21 Key Component #6: 22 Key Component #7:<	Site Visits	3 4
Monroe County Drug Treatment Court Overview 5 Implementation 5 Participant Population 5 Drug Court Goals 6 Eligibility Criteria 6 Drug Court Program Screening 6 Incentives for Offenders to Enter (and Complete) the MCDTC Program 7 Drug Court Program Phases 9 Treatment Overview 13 The Drug Court Team 13 Drug Court Team Training 14 Treatment Provider and Team Communication with Court 14 Team Meetings 15 Steering Committee 15 Drug Court Sessions 15 Drug Court Fees 15 Drug Court Fees 15 Drug Testing 16 Rewards 16 Sanctions 16 Termination 17 Graduation 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 21		
Implementation 5 Participant Population 5 Drug Court Goals 6 Eligibility Criteria 6 Drug Court Program Screening 6 Incentives for Offenders to Enter (and Complete) the MCDTC Program 7 Drug Court Program Phases 9 Treatment Overview 13 The Drug Court Team 13 Drug Court Team Training 14 Treatment Provider and Team Communication with Court 14 Team Meetings 15 Steering Committee 15 Drug Court Sessions 15 Drug Court Fees 15 Drug Court Fees 15 Drug Testing 16 Rewards 16 Sanctions 16 Termination 17 Drug Court Funding 17 McDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #6: 22 Key Comp	Monroe County, Indiana	4
Participant Population 5 Drug Court Goals 6 Eligibility Criteria 6 Drug Court Program Screening 6 Incentives for Offenders to Enter (and Complete) the MCDTC Program 7 Drug Court Program Phases 9 Treatment Overview 13 The Drug Court Team 13 Drug Court Team Training 14 Treatment Provider and Team Communication with Court 14 Team Meetings 15 Steering Committee 15 Drug Court Sessions 15 Drug Court Fees 15 Drug Testing 16 Rewards 16 Sanctions 16 Termination 17 Graduation 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #2: 19 Key Component #3: 19 Key Component #4: 20 Key Component #6: 22 Key Component #8: 24	Monroe County Drug Treatment Court Overview	5
Participant Population 5 Drug Court Goals 6 Eligibility Criteria 6 Drug Court Program Screening 6 Incentives for Offenders to Enter (and Complete) the MCDTC Program 7 Drug Court Program Phases 9 Treatment Overview 13 The Drug Court Team 13 Drug Court Team Training 14 Treatment Provider and Team Communication with Court 14 Team Meetings 15 Steering Committee 15 Drug Court Sessions 15 Drug Court Fees 15 Drug Testing 16 Rewards 16 Sanctions 16 Termination 17 Graduation 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #2: 19 Key Component #3: 19 Key Component #4: 20 Key Component #6: 22 Key Component #8: 24	• •	
Drug Court Goals 6 Eligibility Criteria 6 Drug Court Program Screening 6 Incentives for Offenders to Enter (and Complete) the MCDTC Program 7 Drug Court Program Phases 9 Treatment Overview 13 The Drug Court Team 13 Drug Court Team Training 14 Treatment Provider and Team Communication with Court 14 Team Meetings 15 Steering Committee 15 Drug Court Sessions 15 Drug Court Fees 15 Drug Tog Testing 16 Rewards 16 Sanctions 16 Termination 17 Graduation 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #4: 20 Key Component #5: 21 Key Component #7: 23 Key Component #8: 24	1	
Eligibility Criteria	1 1	
Drug Court Program Screening 6 Incentives for Offenders to Enter (and Complete) the MCDTC Program 7 Drug Court Program Phases 9 Treatment Overview 13 The Drug Court Team 13 Drug Court Team Training 14 Treatment Provider and Team Communication with Court 14 Team Meetings 15 Steering Committee 15 Drug Court Sessions 15 Drug Court Fees 15 Drug Testing 16 Rewards 16 Sanctions 16 Termination 17 Graduation 17 Data Collected by the Drug Court for Tracking and Evaluation Purposes 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #4: 20 Key Component #6: 22 Key Component #7: 23 Key Component #8:		
Incentives for Offenders to Enter (and Complete) the MCDTC Program 7 Drug Court Program Phases 9 Treatment Overview 13 The Drug Court Team 13 Drug Court Team Training 14 Treatment Provider and Team Communication with Court 14 Team Meetings 15 Steering Committee 15 Drug Court Sessions 15 Drug Testing 16 Rewards 16 Sanctions 16 Termination 17 Graduation 17 Data Collected by the Drug Court for Tracking and Evaluation Purposes 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24		
Drug Court Program Phases. 9 Treatment Overview 13 The Drug Court Team 13 Drug Court Team Training 14 Treatment Provider and Team Communication with Court 14 Team Meetings 15 Steering Committee 15 Drug Court Sessions 15 Drug Court Fees 15 Drug Testing 16 Rewards 16 Sanctions 16 Termination 17 Graduation 17 Data Collected by the Drug Court for Tracking and Evaluation Purposes 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24		
Treatment Overview 13 The Drug Court Team 13 Drug Court Team Training 14 Treatment Provider and Team Communication with Court 14 Team Meetings 15 Steering Committee 15 Drug Court Sessions 15 Drug Court Fees 15 Drug Testing 16 Rewards 16 Sanctions 16 Termination 17 Graduation 17 Data Collected by the Drug Court for Tracking and Evaluation Purposes 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24		
The Drug Court Team Training 13 Drug Court Team Training 14 Treatment Provider and Team Communication with Court 14 Team Meetings 15 Steering Committee 15 Drug Court Sessions 15 Drug Court Fees 15 Drug Testing 16 Rewards 16 Sanctions 16 Termination 17 Graduation 17 Data Collected by the Drug Court for Tracking and Evaluation Purposes 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #4: 20 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24		
Drug Court Team Training 14 Treatment Provider and Team Communication with Court 14 Team Meetings 15 Steering Committee 15 Drug Court Sessions 15 Drug Testing 16 Rewards 16 Sanctions 16 Termination 17 Graduation 17 Data Collected by the Drug Court for Tracking and Evaluation Purposes 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #4: 20 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24		
Treatment Provider and Team Communication with Court 14 Team Meetings 15 Steering Committee 15 Drug Court Sessions 15 Drug Court Fees 15 Drug Testing 16 Rewards 16 Sanctions 16 Termination 17 Graduation 17 Data Collected by the Drug Court for Tracking and Evaluation Purposes 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #4: 20 Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24		
Team Meetings. 15 Steering Committee 15 Drug Court Sessions 15 Drug Court Fees 15 Drug Testing 16 Rewards 16 Sanctions 16 Termination 17 Graduation 17 Data Collected by the Drug Court for Tracking and Evaluation Purposes 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #4: 20 Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24		
Steering Committee 15 Drug Court Sessions 15 Drug Court Fees 15 Drug Testing 16 Rewards 16 Sanctions 16 Termination 17 Graduation 17 Data Collected by the Drug Court for Tracking and Evaluation Purposes 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #4: 20 Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24		
Drug Court Sessions 15 Drug Court Fees 15 Drug Testing 16 Rewards 16 Sanctions 16 Termination 17 Graduation 17 Data Collected by the Drug Court for Tracking and Evaluation Purposes 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #4: 20 Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24	e e e e e e e e e e e e e e e e e e e	
Drug Court Fees 15 Drug Testing 16 Rewards 16 Sanctions 16 Termination 17 Graduation 17 Data Collected by the Drug Court for Tracking and Evaluation Purposes 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #4: 20 Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24	E .	
Drug Testing 16 Rewards 16 Sanctions 16 Termination 17 Graduation 17 Data Collected by the Drug Court for Tracking and Evaluation Purposes 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #4: 20 Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24	e e e e e e e e e e e e e e e e e e e	
Rewards. 16 Sanctions 16 Termination 17 Graduation. 17 Data Collected by the Drug Court for Tracking and Evaluation Purposes 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #4: 20 Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24		
Sanctions 16 Termination 17 Graduation 17 Data Collected by the Drug Court for Tracking and Evaluation Purposes 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #4: 20 Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24		
Termination 17 Graduation 17 Data Collected by the Drug Court for Tracking and Evaluation Purposes 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #4: 20 Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24		
Graduation 17 Data Collected by the Drug Court for Tracking and Evaluation Purposes 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #4: 20 Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24		
Data Collected by the Drug Court for Tracking and Evaluation Purposes 17 Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #4: 20 Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24		
Drug Court Funding 17 MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #4: 20 Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24		
MCDTC 10 Key Components Results 17 Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #4: 20 Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24		
Key Component #1: 18 Key Component #2: 19 Key Component #3: 19 Key Component #4: 20 Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24	Diug Court Fullding	1/
Key Component #2: 19 Key Component #3: 19 Key Component #4: 20 Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24	MCDTC 10 Key Components Results	17
Key Component #3: 19 Key Component #4: 20 Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24	Key Component #1:	18
Key Component #4: 20 Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24	Key Component #2:	19
Key Component #5: 21 Key Component #6: 22 Key Component #7: 23 Key Component #8: 24	Key Component #3:	19
Key Component #6: 22 Key Component #7: 23 Key Component #8: 24	Key Component #4:	20
Key Component #7: 23 Key Component #8: 24	Key Component #5:	21
Key Component #8:	Key Component #6:	22
Key Component #8:	Key Component #7:	23
Key Component #9:	Key Component #8:	24
	Key Component #9:	25



Key Component #10:	25
Recommendations	26
OUTCOME EVALUATION	29
Outcome Evaluation Methods	29
Research Strategy	
Outcome Study Questions	
Data Collection and Sources	29
Sample Selection	30
Outcome Evaluation Results	31
Research Question #1: Program Completion	
Research Question #2: Recidivism	
Research Question #3: Reducing Substance Abuse	34
Outcome Summary	36
Cost Evaluation	37
Cost Evaluation Methodology	37
Cost Evaluation Design	
Cost Evaluation Methods	38
Cost Evaluation Results	
Drug Court and Traditional Court Processing Transactions	
Drug Court Program Costs	
Traditional Court Processing Costs	
Costs per Agency	
Outcome Costs	
Outcome Transactions	
Outcomes and Outcomes Cost Consequences Outcome Costs by Agency	
SUMMARY AND CONCLUSIONS	
References	53
APPENDIX A: PARTICIPANT FEEDBACK FROM FOCUS GROUP AND INTERVIEWS	55
APPENDIX B: MCDTC ELIGIBILITY (INCLUSION AND EXCLUSION) CRITERIA	63
APPENDIX C: INCENTIVES AND CONSEQUENCES FOR MCDTC	67
APPENDIX D: EXAMPLES OF REWARDS AND SANCTIONS USED BY OTHER DRUG COURTS	75
APPENDIX E: GLOSSARY OF DRUG COURT TERMS	79

LIST OF TABLES
Table 1. Participant and Comparison Group Characteristics
Table 2. The Six Steps of TICA
Table 3. Average Program Costs per Participant
Table 4. Average Traditional Court Processing Costs per Person
Table 5. Average Cost per Participant by Agency
Table 6. Average Number of Outcome Transactions per Drug Court and Comparison Group Member
Table 7. Criminal Justice System Outcomes Costs per Drug Court and Comparison Group Member
Table 8. Criminal Justice System Outcomes Costs by Agency per Drug Court and Comparison Group Member
LIST OF FIGURES
Figure 1. Monroe County Adult Criminal Justice System Pre-Drug Treatment Court System . 8
Figure 2. Monroe County Drug Treatment Court Process (Prior to August 2, 2006)
Figure 3. Monroe County Drug Treatment Court Process (As of August 2, 2006) 12
Figure 4. Re-Arrests Over 24 Months MCDTC and Comparison Group
Figure 5. 2-Year Recidivism Rate for MCDTC Participants and Comparison Group 34
Figure 6. Percent of Positive UDS for MCDTC Participants
Figure 7. Drug Related Re-Arrests Over 24 Months
Figure 8. Comparative Criminal Justice Outcomes Cost Consequences per Drug Court and Comparison Group Member (including drug court graduates)

EXECUTIVE SUMMARY

rug treatment courts are one of the fastest growing programs designed to reduce drug abuse and criminality in non-violent offenders in the United States. The first drug court was implemented in Miami, Florida, in 1989. As of 2007, there were more than 1700 adult and juvenile drug courts operating in all 50 states, the District of Columbia, Northern Marina Islands, Puerto Rico, and Guam (BJA, 2006).

Drug courts use the coercive authority of the criminal justice system to offer treatment to non-violent addicts in lieu of incarceration. This model of linking the resources of the criminal justice system and substance treatment programs has proven to be effective for increasing treatment participation and decreasing criminal recidivism.

Indiana's drug court movement began in 1996 with two drug courts that hoped to mirror the successes of the Court Alcohol and Drug Programs. As the number of drug courts grew in Indiana, a subcommittee was formed to consider the possibility of developing a certification program for drug courts. In 2002, the Indiana General Assembly enacted drug court legislation. By 2003, drug court rules were adopted which provided a framework for certification of drug courts operating under state statute.

The Monroe County Drug Treatment Court (MCDTC) began operations in November 1999 and was officially certified in May 2005 by the Indiana Judicial Center (IJC). The MCDTC targets non-violent, non-dealing felony offenders. It is estimated that 200 individuals, with a mean age of 33 years, have enrolled in the drug court since inception: 38% (76) graduated and 26% (52) were terminated. The primary drugs of choice are alcohol (60%), followed by benzodiazepine (8%) and marijuana (8%).

In 2006, NPC Research ("NPC"), under contract with the IJC began process, outcome and cost studies of five adult drug courts in Indiana, including the MCDTC. This report contains the process, outcome and cost evaluation results for the MCDTC program.

Information was acquired from several sources, including observations of court sessions and team meetings during site visits, key informant interviews, focus groups, drug court database, plus state and county records. The methods used to gather this information are described in detail in the main report.

This evaluation was designed to answer key policy questions that are of interest to program practitioners, policymakers and researchers:

- 1. Has the MCDTC program been implemented as intended and are they delivering planned services to the target population?
- 2. Does the MCDTC reduce recidivism?
- 3. Does the MCDTC reduce substance use?
- 4. Is there a cost-savings to the taxpayer due to drug court participation?



Question #1: Has the MCDTC been implemented as intended and are they delivering planned services to the target population?

Using the 10 Key Components of Drug Courts (NADCP, 1997) as a framework, NPC examined the practices of the MCDTC program. The MCDTC fully satisfies the 10 Key Components through its current policies and structure. We found that MCDTC:

- Integrates alcohol and other drug treatment services effectively with justice system case processing,
- Does an excellent job of using a non-adversarial approach between prosecution and defense counsel,
- Provides a very good continuum of treatment services,
- Uses frequent alcohol/drug testing to monitor abstinence,
- Has a consistent reward and sanction structure for responding to participant compliance,
- Graduates participants within MCDTC's recommended time-frame,
- Has an excellent drug court database and uses it appropriately,
- Has had a continuously sitting judge since program implementation, and
- Has developed partnerships with public and private community agencies and organizations.

The areas in which the MCDTC may wish to implement changes to enhance their services are as follows:

- MCDTC may wish to consider offering more flexibility in the program by adding an additional testing schedule to better accommodate work schedules and school start times.
- The drug court team should consider the optimal program dosage and intensity required to maximize accountability and oversight, while promoting successful participation.
- Although the MCDTC has developed partnerships with community agencies, they may
 wish to increase or strengthen these partnerships in order to better meet the needs of participants.
- The drug court should consider consistently having an independent judge sentence terminated MCDTC participants.
- The MCDTC team may want to discuss possible ways to decrease the time interval between participant identification and entry into the drug treatment court.
- The hiring of a part-time Spanish interpreter may help the MCDTC reach more of its target population.

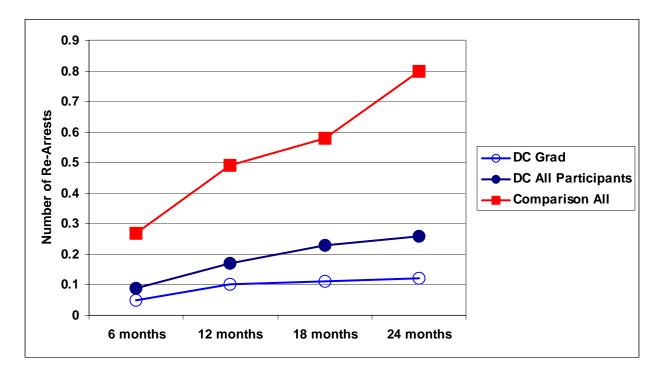
II April 2007

Question #2: Does the MCDTC reduce recidivism?

Yes. The MCDTC reduced recidivism. MCDTC participants were significantly less likely to be re-arrested than offenders who were eligible for the program but did not participate.

As Figure A illustrates, over 24 months MCDTC participants were re-arrested less often than comparison group members who were eligible for drug court but did not attend. In addition, the recidivism rate after 2 years for drug court graduates was 11%, all drug court participants 17%, and 33% for the comparison group rate. Thus, drug court participants (regardless of graduation status) were half as likely to have had any arrests in the 2-year follow-up period relative to the comparison group.

Figure A. Average Number of Re-Arrests per Person Over 24 Months for MCDTC and Comparison Group





Question #3: Does the MCDTC reduce substance use?

Yes. MCDTC participants consistently showed less drug use as measured by percent positive urine drug screens over 12 months.

Figure B illustrates the percent of positive drug tests over time for the drug court group, which includes graduates, terminated participants, and active participants. This figure shows a smaller percentage of positive drug tests for MCDTC participants following program entry. Further, the percent of positive drug tests is extremely small (3% or less) during the course of the program.

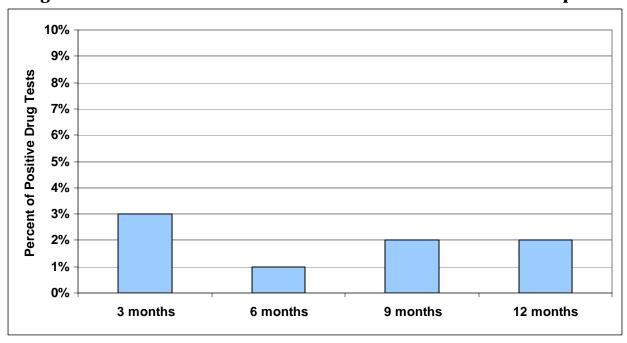


Figure B. Percent of Positive Tests Over 12 Months for All MCDTC Participants

IV April 2007

Question #4: Is there a cost-savings to the taxpayer due to MCDTC drug court participation?

Yes. Due to positive outcomes for drug court participants (including fewer re-arrests, less probation time and fewer new court cases), there were substantial avoided costs for MCDTC drug court participants.

The average cost for the MCDTC Program was \$20,067 per participant. This amount is on the highest end of the costs found nationally in other drug courts (\$4,000 to \$20,000) studied by NPC Research (Carey & Finigan, 2004; Carey et al., 2005) and is mainly due to a large amount of resources invested in drug court case management. However, the outcome cost savings indicate that participation in drug court offers a cost-benefit to the Indiana taxpayer due to a low number of subsequent re-arrests and associated incarceration and victimizations.

Over a 2-year period, the cost of MCDTC participant outcomes were \$364 per participant compared to \$7,404 per offender that did not participate in drug court. This translates to a per participant savings of \$7040. When this savings is multiplied by the estimated 200 offenders who have participated in the drug court program since implementation, the total current program cost savings (for outcomes over 24-month period from program entry) is \$1,408,000.

Costs tracked in this study were those incurred by taxpayers. Other less tangible but important savings not factored into this study include an increase in the number of drug-free babies born, a decrease in health care expenses, and drug court participants working and paying taxes. As the existence of the MCDTC continues, the savings generated by drug court participants due to decreased substance use and decreased criminal activity, can be expected to continue to accrue, repaying investment in the program and beyond. Taken together these findings indicate that the MCDTC is both beneficial to its participants and beneficial to the Indiana taxpayers.

BACKGROUND

N the last 18 years, one of the most dramatic developments in the movement to reduce substance abuse among the U.S. criminal justice population has been the spread of drug courts across the country. The first drug court was implemented in Florida in 1989. Now, there are more than 1700 adult and juvenile drug courts operating in all 50 states, the District of Columbia, Northern Marina Islands, Puerto Rico, and Guam (BJA, 2006).

Drug courts are designed to guide offenders identified as drug-addicted into treatment that will reduce drug dependence and improve the quality of life for offenders and their families. Benefits to society take the form of reductions in crime committed by drug court participants, resulting in reduced costs to taxpayers and increased public safety.

In the typical drug court program, participants are closely supervised by a judge who is supported by a team of agency representatives who operate outside their traditional roles. The team typically includes a drug court coordinator, addiction treatment providers, county attorneys, public defenders, law enforcement officers, and probation officers who work together to provide needed services to drug court participants. District attorneys and public defenders hold their usual adversarial positions in abeyance to support the treatment and supervision needs of program participants. Drug court programs can be viewed as blending resources, expertise and interests of a variety of jurisdictions and agencies.

Drug courts have been shown to be effective in reducing recidivism (GAO, 2005) and in reducing taxpayer costs due to positive outcomes for drug court participants (Carey & Finigan, 2003; Carey et al., 2005). Some drug courts have even been shown to cost less to operate than processing offenders through business-as-usual (Carey & Finigan, 2003; Crumpton et al., 2004; Carey et al., 2005).

Indiana began providing Alcohol and Drug (A&D) court services in the mid-1970s (codified under IC 12-23-14). The Indiana Judicial Center (IJC) was awarded oversight of the Court A&D programs in 1997. The success of the A&D programs laid the foundation for the subsequent evolution of Indiana drug courts. The first drug courts in Indiana began in 1996 in Gary City Court and then in Vigo County. As the number of drug courts increased, several drug courts began to seek support from the IJC similar to that provided to Court A&D Programs. In 2001, a subcommittee was formed to conduct a pilot project to examine the possibility of developing a certification program for drug courts. The pilot project was completed in 2001 and provided the subcommittee with a framework for drafting drug court legislation and drug court rules.

In 2002, the Indiana General Assembly enacted drug court legislation under IC 12-23-14.5. Adult and juvenile drug courts that seek to operate under this chapter must become certified by the IJC. In the spring of 2003, the Judicial Conference of Indiana adopted drug court rules, which provide a framework for certification of drug courts operating under the statute. In addition to certification, the Indiana Judicial Center provides training, technical assistance, and support to existing drug courts and those in the planning stages. In 2006, the Judicial Conference established the Problem-Solving Courts Committee to guide drug court and other problem-solving

¹ For more detailed information regarding the requirements for drug court certification as adopted by the Judicial Conference of Indiana, March 21, 2003, go to http://www.in.gov/judiciary/drugcourts/docs/rules.pdf.

1



court activities at the state level. As of January 2007, there are 28 operational drug courts in Indiana with an additional five in the planning stages.

In late 2005, NPC Research was selected by the IJC for a multi-site drug court evaluation. Located in Portland, Oregon, NPC Research has conducted research and program evaluation for 17 years. Its clients have included the Department of Justice (including the National Institute of Justice and the Bureau of Justice Assistance); the Substance Abuse and Mental Health Services Administration (CSAP and CSAT in particular); state court administrative offices in Oregon, California, Maryland, Michigan, and Minnesota; the Robert Wood Johnson Foundation; and many other local and state government agencies.

NPC Research has conducted process, outcome and cost evaluations of drug courts in Oregon, Arizona, California, Maryland, Michigan, Minnesota, New York, Indiana, and Guam. Having completed over 40 drug court evaluations (including adult, juvenile, DUI and family treatment drug courts), NPC is one of the most experienced firms in this area of evaluation research. NPC's final evaluation reports contain substantive findings that have affected both practices and policy through use by clients, program managers, policymakers, the research community, and the public. Additionally, NPC frequently presents at national and international criminal justice, evaluative research, and public health conferences.

NPC Research conducted process, outcome and cost evaluations of five adult drug courts in the counties of Marion, Monroe, St. Joseph, Vanderburgh, and Vigo. Process only evaluations were performed on three juvenile drug courts in Indiana: Vanderburgh, Howard and Tippecanoe. This report contains the process, outcome and cost evaluation for the Monroe County Drug Treatment Court.

PROCESS EVALUATION

he information that supports the process description was collected from staff interviews, drug court participant focus groups, observations of the MCDTC, and program documents such as the *Monroe County Drug Treatment Court Participant Information and Orientation*. The majority of the information was gathered from one-on-one key stakeholder interviews and, as much as possible, the evaluators have attempted to provide the information in the same words in which it was given.

Methods

SITE VISITS

NPC evaluation staff traveled to Bloomington, Indiana twice – once in February 2006 and again in July 2006 to observe Monroe County Drug Treatment Court sessions, team meetings, and staff operations. Two focus groups with current and former MCDTC program participants were also conducted during these site visits. These activities gave the researchers first hand knowledge of the structure, procedures, and routines of the program.

KEY INFORMANT INTERVIEWS

Key informant interviews were a critical component of the process study. NPC staff interviewed individuals involved in the drug court including the drug court coordinator, judge, prosecutor, public defender and a representative from the largest provider of drug and alcohol treatment.

NPC has designed and extensively utilized a *Drug Court Typology Interview Guide*, ⁶ which provides a consistent method for collecting structure and process information from drug courts. In the interest of making this evaluation reflect local circumstances, this guide was modified to fit the purposes of this evaluation and of this particular drug court. For the process interviews, key individuals involved with the MCDTC were asked the questions in the *Typology Interview Guide* most relevant to their roles in the program. The information gathered through the use of this guide assisted the evaluation team in understanding the day-to-day activities of the program as well as focusing on the most significant and unique characteristics of the MCDTC.

The topic/subject areas in the *Typology Interview Guide* were chosen from three main sources: the evaluation team's extensive experience with drug courts, the American University Drug Court Survey, and a paper by Longshore et al. (2001), which lays out a conceptual framework for drug courts. The typology interview covers a number of areas—including specific drug court characteristics, structural components, processes, and organizational characteristics—that contribute to a more comprehensive understanding of the drug court being evaluated. Topics in the *Typology Interview Guide* also include questions related to eligibility guidelines, specific drug court program processes (e.g., phases, treatment providers, urinalyses, fee structure, rewards/sanctions), graduation, aftercare, termination, non-drug court processes (e.g., regular pro-

⁶ The Typology Guide was originally developed by NPC Research under a grant from the Bureau of Justice Assistance and the Administrative Office of the Courts of the State of California.



bation), identification of drug court team members and their roles, and a description of drug court participants (e.g., general demographics, drugs of use). ¹

FOCUS GROUPS AND PARTICIPANT INTERVIEWS

NPC staff conducted two focus groups at the MCDTC; one with graduated and active participants (N=6) and one with terminated drug court participants (N=2). The focus groups and interviews allowed the current and former participants to share with the evaluators their experiences and perceptions about the drug court process. The full summary of the results from these focus groups are incorporated into the process discussion below and the full results can be found in Appendix A.

DOCUMENT REVIEW

The evaluation team solicited documentation from the drug court program that furthered their understanding of the program's policies and procedures. The documents reviewed included: 1) *Monroe County Drug Treatment Court Participant Information and Orientation* (program rules and agreements), 2) *The Monroe County Drug Treatment Court Policy and Procedures Manual*, 3) *Phase Movement* (program requirements); and 4) the MCDTC *Incentives and Consequences* (staff responses to participants' behavior).

Once all the process information was gathered and compiled, a description of the program process was written and sent to MCDTC for feedback and corrections.

Results

Following is the MCDTC process description. This includes a brief description of the county for context and then provides a detailed explanation of the program process including the implementation, treatment providers, team members and program phases.

The following information was gathered from interviews, documents such as the *MCDTC Policy* and *Procedures Manual*, and observations of the drug court. The majority of the information was gathered from the interviews and, as much as possible, the evaluators have attempted to provide the information in the same words in which it was given.

MONROE COUNTY, INDIANA

Monroe County is an urban county located in central Indiana. The cities in the county include Bloomington, Ellettsville, Stinesville, Unionville, Smithville, and Harrodsburg. As of the 2000 census, this county had a population of 120,563 (estimated at 107,671 in 2005), with 74% of the population over the age of 18 and a median age of 28. The racial breakdown consisted of 91% white, 3% African American, and 3% Asian with the remaining 3% made up of small percentages of other races. There were 46,898 households in 2000; 19,584 of those were married couple households and 12,156 were households with children under the age of 18. The median household income was \$33,311 and the median family income was \$51,058. The County's unemployment rate was 2.6% with 19% of individuals and 7% of families living below poverty level. The main industry category was educational services, health care, and social assistance; followed by arts, entertainment, recreation, accommodation and food services. Bloomington, the county seat, had a population of 69,291, in 2000 (estimated at 55,406 in 2005).

¹ The full typology guide can be found on the NPC Research website at www.npcresearch.com.

MONROE COUNTY DRUG TREATMENT COURT OVERVIEW

The Monroe County Drug Treatment Court (MCDTC) opened its doors in November of 1999. It was later awarded an implementation grant in 2001. The current drug court team includes the judge, coordinator, two case managers, field officer, police captain, public defender, prosecutor, and treatment providers. The MCDTC targets felony offenders with substance abuse problems. The MCDTC also accepts probation violators who are on probation for a felony case. The MCDTC programs lasts for approximately 2 years and utilizes treatment, supervision, case management, and judicial interactions to help participants lead drug and crime free lifestyles.

IMPLEMENTATION

A local substance abuse treatment provider helped begin the MCDTC implementation process by suggesting the idea to Judge Kenneth G. Todd. Judge Todd embraced the idea and he, the treatment provider, the Director of Court Alcohol and Drug Services in the Probation Department, the Prosecutor's Office, Public Defenders Office, and a part-time coordinator/case manager worked to implement the new drug court. To do so, members of the group attended three drug court training conferences. The information gathered from these trainings enabled the team to develop drug court policies and procedures.

In November 1999 the drug court was started as a pilot project serving a small number of offenders in the Monroe County Circuit Court division presided over by Judge Todd and under the oversight of the Probation Department's Court Alcohol and Drug Services. With approval from the County Council and Board of Judges, drug court staff was hired on in stages during the pilot project. Then in June 2001, the drug court received a Federal Drug Court Implementation Grant from the Department of Justice. With the implementation grant the drug court was able to hire additional staff and begin serving all eligible offenders from the six adult divisions of the Monroe Circuit Court. In May 2005, the MCDTC was officially certified by the Indiana Judicial Center.

PARTICIPANT POPULATION

Since the drug court program has been operational, the MCDTC has been able to accommodate all eligible participants. As of January 2006, it was estimated that approximately 200 individuals had enrolled in the drug court, 76 of these participants graduated and 52 did not complete the program successfully and were terminated.

The data on MCDTC participants is inconsistent before January 2003; therefore the following information includes data from the 132 participants who entered the program after that date. The vast majority of these participants were white (97%) and male (76%). Forty-eight percent of the participants are single, 22% are married or living as married, 29% are divorced or separated, and 1% widowed. The mean age is 33 years with a range of 19 to 60 years. The top three primary drugs of choice are alcohol (60%), followed by benzodiazepine (8%) and marijuana (8%). The remaining participants (24%) are split fairly evenly between cocaine, opiates and heroin.



DRUG COURT GOALS

According to the MCDTC staff, the overarching long-term goal of the MCDTC is to provide structure to those that have a significant substance abuse problem and to assist them to gain the ability to function on a daily basis in the community. The MCDTC uses recidivism rates, length of time in the program (program retention) and the graduation rate to indicate whether their goal is being met.

The goals listed in the MCDTC *Policy and Procedures Manual* are:

- 1. To reduce substance use among felony offenders.
- 2. To reduce offenders' future contact with the criminal justice system.
- 3. To promote self-sufficiency and empower offenders to become productive members of society.
- 4. To reduce case disposition time.

ELIGIBILITY CRITERIA

The MCDTC specifically targets non-violent, non-dealing felony offenders. Offenders with a misdemeanor charge pending can be accepted into the program if the underlying offense is a felony. Those that were sentenced to probation on a felony conviction and violate the conditions of that probation may also be eligible for the drug court under a petition to revoke.

The Monroe County Drug Treatment Court looks for the following to determine eligibility of offenders:

- □ No prior conviction of a violent felony
- □ Current charges do no involve dealing or distribution of illegal substances
- □ Person resides in Monroe County
- □ Person is a US citizen or has proper INS registration
- □ No outstanding warrants or pending criminal cases in other counties or states
- □ Person admits to addiction or significant abuse of mood altering substances and is willing to complete treatment
- Person has had prior unsuccessful terminations from community supervision
- □ Willing to comply with program
- □ Ability to pay for fees and treatment costs
- □ Ability to read and/or communicate in English

Appendix B contains a table with a detailed list of the eligibility (inclusion and exclusion) criteria for the MCDTC program.

DRUG COURT PROGRAM SCREENING

The following is a description of the MCDTC process for entering an offender into the program. A visual representation of this process is provided in the flow chart below. Individuals who enter the MCDTC screening process are repeat offenders or probation violators with a felony offense.

The whole process starts with the arrest, then jail booking followed by charges filed by the Prosecutor's Office. Cases are randomly assigned to Circuit Court II, III or V.

After offenders are referred to the program, the prosecutor determines legal eligibility and the coordinator performs an initial overview. Legal eligibility is determined by examining the current charges and criminal history. If they are deemed legally eligible, the potential participants attend an initial drug court hearing in order to observe and get a better understanding of what will be required of them if they decide to participate. The coordinator then meets with the potential participants to give them an orientation of the program and to ensure they can read and write English. The case manager performs an intake interview using the *Substance Abuse Assessment form*, which serves as a clinical eligibility screen. The clinical screening inquires about the potential participant's individual's physical and mental health, substance abuse, treatment, and criminal history as well as factors that contribute to their personal situation. Based on the clinical screening, the case manager will document whether or not s/he feels this person is appropriate for drug court and refer them to a treatment provider. The treatment provider then conducts a substance abuse evaluation.

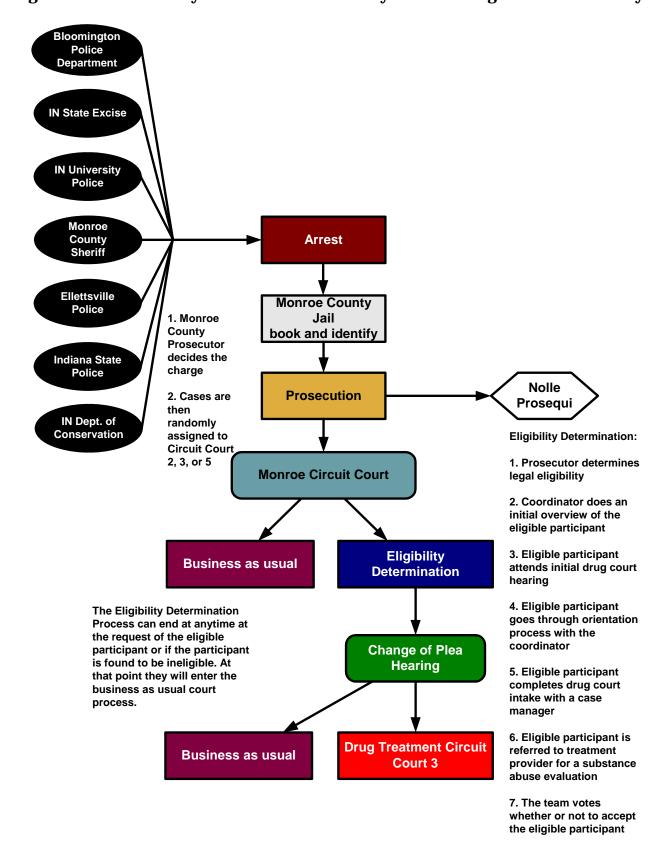
If the defendant still wants to participate, the team reviews all of the information collected during the screening process and votes on whether or not to allow them to enter drug court. The time between participants' arrest and entry into the program varies greatly due to many factors, if the case does not get delayed in the criminal justice system; it is usually around 30 days.

INCENTIVES FOR OFFENDERS TO ENTER (AND COMPLETE) THE MCDTC PROGRAM

The MCDTC is a post-plea program where the sentence is withheld until the participant is finished with drug court. For participants who are terminated or withdrawn from the program, the sentence is determined at the time of program end, not at the time of plea. In most instances, the sentence is time in jail for those individuals who are terminated and withdrawn. The MCDTC diverts participants from traditional sentencing options such as incarceration and allows them to remain a free member of the community while working on their substance abuse issues. Upon completion of the program, graduates' cases are dismissed. A strong incentive for all drug court participants is avoiding a felony conviction on their record and having the opportunity to focus on gaining control of their substance use issues and lives while living in the community.



Figure 1. Monroe County Adult Criminal Justice System Pre-Drug Treatment Court System



DRUG COURT PROGRAM PHASES

This section describes the phases of the MCDTC Program and is accompanied by two flow charts that provide a visual representation of the written description. Due to a change in phase requirements during the evaluation, there are two different descriptions and two Monroe County Drug Treatment Court Process flow charts, one prior to and one after August 2006.

Prior to August 2006, there were two phases in the program. Together Phase I and Phase II lasted approximately 2 years. Each phase was broken into two parts lasting 6 months each. As of August 2006, there are five phases totaling a minimum of 24 months in program length. Phase I lasts a maximum of 60 days, Phase II lasts between 4 and 8 months, Phase III lasts 6 to 12 months, Phase IV lasts 4 to 6 months, and Phase V is a minimum of 6 months. Non-compliant behaviors result in sanctions, which generally lengthen the time spent in each phase.

Participants in all phases randomly receive home visits and employment verifications from the MCDTC field officer to check on their compliance with the program.

Prior to August 2006

Each phase consists of individualized treatment objectives, and therapeutic and rehabilitative activities according to therapists' recommendations for each participant. Therefore, the frequency and type of treatment varies from one client to the next. Some participants enter a residential facility in the detoxification stage for 2 or 3 weeks, followed by day treatment and then intensive outpatient (IOP) treatment, others go directly into IOP. In order to move to each subsequent part or phase, participants must have completed the requirements of the phase in question and have steady employment or be pursuing a course of study.

Participants in Phase I, Part I were required to report each morning for an Alcosensor and submit to a minimum of two random urine drug screens (UDS) per week. Attendance at weekly drug court sessions, payment of fees and meeting with their case manager was also required. A verifiable place of employment and residence and compliance to a 10 p.m. curfew as well as attendance at self-help meetings was mandatory.

Phase I, Part II requirements were identical to those in Part I except for mandatory attendance at drug court sessions was reduced to every other week.

Phase II, Part I required that participants attend drug court every month, pay fees and meet with their case manager as scheduled. Participants in this phase also were required to submit to UDS and Alcosensors one to two times per week and attend self-help meetings.

Phase II, Part II, requirements were similar to Part I, except for UDS and Alcosensors were reduced to two to three per month and court attendance was required only once every other month.

After August 2006

The phase requirements changed because the judge and the team were concerned that participants were having a difficult time transitioning from the intense supervision of the program to no supervision after graduation. The new phases begin to decrease supervision over time until there is very little to no supervision in the final phase.

The new phase requirements list general treatment objectives, although treatment plans are still individualized. Phase I, "Stabilization," requires that participants complete detoxification, short term residential, a day treatment program, or inpatient treatment if deemed appropriate. Phase II,



"Treatment," requires participation in intensive outpatient treatment (IOP). Phase III, "Living Sober," requires adherence to a treatment aftercare plan. Treatment objectives, besides attendance at support group meetings and contact with sponsor, are not specified for Phase IV, "Life Plan," or Phase V, "Unsupervised."

Participants in Phase I, Stabilization, are required to report daily to the program office and comply with a curfew that is designated individually for each participant. Weekly drug court attendance and submission of two to three random drug screens per week is mandatory. Phase I participants must also obtain suitable housing and if appropriate, seek employment. In order to move to Phase II, participants must maintain sobriety for at least 30 consecutive days and be participating in IOP.

Those in Phase II, the Treatment Phase, must report daily to the program office, submit two to three drug screens per week and attend drug court weekly. Participants must also have suitable housing and employment (verifiable) or be enrolled in an approved course of study. Phase II participants are required to start making payments towards the financial obligations of the program. In order to move to Phase III, participants must maintain sobriety for at least 120 consecutive days and complete the main phase portion of IOP. Participants must also have obtained a support group sponsor and demonstrated a consistent payment schedule for program related fees.

In Phase III, the Living Sober Phase, participants are required to attend at least three support groups per week and have regular contacts with an AA sponsor. They must begin drafting a Relapse Prevention Plan, which is called a Life Plan, report to drug court biweekly, then progress to monthly court appearances, and submit to one to two random drug screens per week. If applicable, they must begin working toward obtaining a GED and obtaining a valid operator's license. Requirements to move to Phase IV include maintaining sobriety for 180 straight days and completion of Life/Relapse Prevention Plan.

Phase IV, the Life Plan Phase, requires that participants remain sober throughout, attend support group meetings and maintain contact with their sponsor. Participants must focus on their Life Plan, report to court bimonthly and submit one drug screen sample per week. If applicable, participants must obtain a GED and/or be reunified with their children. In addition, they are required to begin a community service project and maintain suitable employment or be pursuing a course of study. To move to the final phase, participants are expected to demonstrate ability to work toward Life Plan goals.

Phase V, is the Unsupervised Phase, during which participants must remain substance free, attend support group meetings and maintain contact with sponsor. Participants will be randomly required to submit to drug screens, however, there are not a minimum number of screens required. They must also stay in compliance with the drug court agreement (basic rules of the program), pay all fees associated with the program including treatment fees and utilize their Life Plan. In order to graduate from the program, participants must have completed all of the phase requirements, have 1 year of continuous sobriety, paid all fees and restitution, and be gainfully employed or pursuing a course of study.

Figure 2. Monroe County Drug Treatment Court Process (Prior to August 2, 2006)

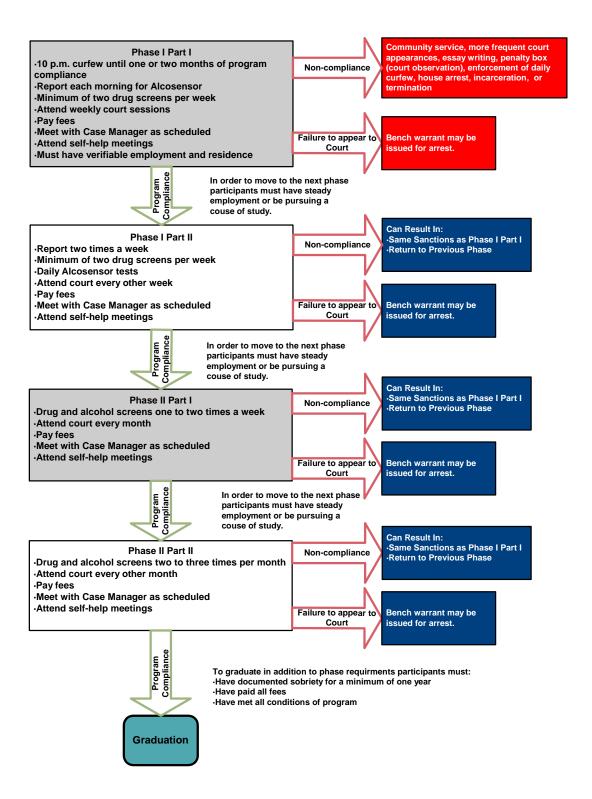
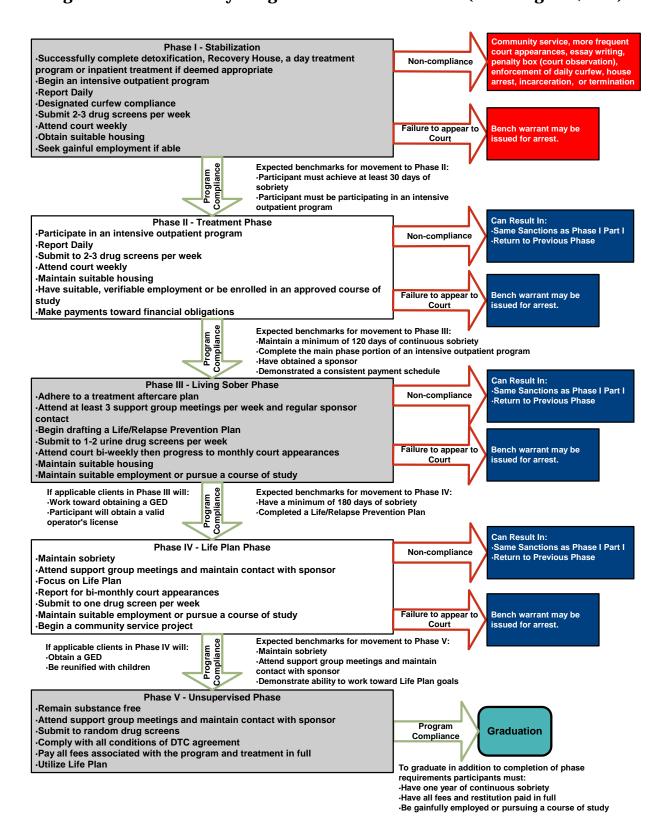




Figure 3. Monroe County Drug Treatment Court Process (As of August 2, 2006)



TREATMENT OVERVIEW

There are four treatment providers for the Monroe County Drug Treatment Court. Each participant's case manager performs their initial intake and determines which treatment provider would be most suitable. The Center for Behavioral Health (CBH), a private non-profit organization, receives an estimated 70-75% of MCDTC participants, including dual-diagnosed clients. The rest are referred to Amethyst House, Sunrise Counseling, or Elizabeth York and Associates.

CBH offers short-term residential, day treatment, and IOP treatment options for new participants. Most clients are placed in a residential detoxification program or daily treatment for the first 2-3 weeks of the program and are then moved into IOP, others begin in IOP. IOP sessions are three times per week and last between 6-12 weeks and utilize a mix of motivational and 12-Step methods. Participants then enter continuing care, which meets once per week for 24 weeks.

Most MCDTC participants attend group meetings during and after their initial treatment phases. Groups offered through the treatment providers include Living Sober, Batters Treatment, Stress Management, Cognitive Behavioral Therapy (CBT), Depression Support, Anxiety Support, Thinking for a Change, and Anger Management. Other services or referrals that drug court participants might receive include but are not limited to employment, housing, budgeting, pain management, relapse prevention, life skills, family therapy, parenting classes, domestic/sexual assault, and academic/GED/vocational.

THE DRUG COURT TEAM

Judge

The current Judge was involved in implementing the Monroe County Drug Treatment Court and has presided on the MCDTC bench since implementation. In addition to his drug court duties, he is responsible for one third of all criminal filings in Monroe County Circuit Court. The position of drug court judge is voluntary and has not rotated through other judges. The judge attends court sessions, pre-court team meetings, in-service meetings and steering committee meetings. Occasionally the judge meets with the chief probation officer to discuss issues that may arise. He also reviews drug court literature and makes presentations to various community groups.

Probation Supervisor/Director of Court Alcohol and Drug Program

The Monroe County Drug Treatment Court is part of the Court Alcohol and Drug Program, administered by the Probation Department. The probation supervisor/Court Alcohol and Drug Program Director supervises the drug court coordinator, case managers, and field officer. She is also responsible for oversight of the grants for the program.

Drug Court Coordinator

The drug court coordinator's role is to oversee the day-to-day operations of the drug court. As a voting team member, he attends the meetings, provides the agenda and leads team discussions during pre-court meetings. The coordinator attends drug court sessions, in-service meetings, and the steering committee meetings. The coordinator maintains and updates the *MCDTC Policy and Procedure Manual* and manages the drug court database. He is the point of contact for all team members including the treatment providers and when needed, he will cover for absent staff and administer UDS and Alcosenors to the participants. Prior to their entry into the program, the coordinator orients potential participants to the program rules and requirements.



Drug Court Case Managers

There are two drug court case managers that monitor program participants. They attend drug court sessions and team, in-service and steering committee meetings. These team members are responsible for the initial intake and clinical assessment for all drug court participants as well as referring participants to the appropriate treatment provider. They see participants for check-ins, perform urine drug screens and Alcosensors and complete progress reports that inform the rest of the team on participants' compliance with program requirements. The case managers also help connect participants with community resources including health and dental care, employment, housing, and education issues. Further, the drug court case managers act to generally support the participants in working through their substance abuse problems.

Public Defender

The drug court public defender's role is to provide legal advice, and to represent the interests of the participants in a non-adversarial manner. Approximately 73% of drug court participants use the public defender as their representation. As a voting team member, the public defender attends committee meetings, advisory board meetings, and in-service team meetings. In addition, he attends the drug court sessions occasionally.

Prosecutor

There is one prosecutor serving the MCDTC in a non-adversarial role. His main role is to identify, legally screen and refer potential participants to drug court. He also participates as a voting team member in weekly pre-court team meetings, steering committee meetings, and in-service meetings. Occasionally he will also attend drug court sessions.

Field Officer

The field officer works for the Probation Department and makes random visits to participants' homes, support group meetings, and places of employment, to verify that they are in compliance with the program. This role has been useful to the program in that the field officer can also verify reported residence, employment, and compliance with the program's curfew requirements.

DRUG COURT TEAM TRAINING

Members of the MCDTC staff including the coordinator and case managers are certified probation officers. They are required by the state of Indiana to receive educational hours regarding substance abuse and criminal justice every year. Team members have also attended conferences through the NADCP (National Association of Drug Court Professionals) or NDCI (National Drug Court Institute). The coordinator and case managers attend two to three conferences a year. In the past several years, most team members attended the annual NADCP conference.

TREATMENT PROVIDER AND TEAM COMMUNICATION WITH COURT

The MCDTC staff requires treatment providers to supply a written assessment and initial treatment plan for each participant. In addition, weekly written progress reports are provided from each treatment facility. The Treatment Community has a representative on the drug court team who attends the pre-court meetings and occasionally attends court sessions. If an issue arises that requires immediate attention, treatment providers and the MCDTC staff are in contact through phone and emails between court sessions.

TEAM MEETINGS

The MCDTC team meets weekly to discuss participants' issues and progress. Voting team members vote on appropriate rewards, and sanctions before each court session. The judge, deputy prosecutor, public defender, coordinator, as well as representatives from law enforcement, treatment, and the recovery community are considered voting members. Three non-voting members also attend the team meetings including the two case managers and a field officer. In addition, the MCDTC team meets for subcommittee meetings as needed and for yearly in-service meetings to discuss any issues that are not discussed during weekly team meetings due to lack of time.

STEERING COMMITTEE

The steering committee holds quarterly meetings to discuss program policies with a large group of community agencies. The committee members consist of the drug court judge, drug court coordinator, chief probation officer, court probation supervisor/Alcohol and Drug Program Director, drug court prosecutor, drug court public defender, drug court case managers, drug court field officer, Police Department Captain, Monroe County Prosecutor as well as a representatives from the Center for Behavioral Health, Amethyst House, Ivy Tech Community College, Indiana University employment services, and drug court alumni. During board meetings, programmatic changes, statistics on the program, and the alumni group are discussed. The steering committee is also working towards classifying the Monroe Drug Treatment Court under a non-profit status.

DRUG COURT SESSIONS

Drug court sessions are held on Wednesdays. There are two sessions, each serving between 15 to 20 people. Prior to August 2006, Phase I Part I would attend weekly, Phase I Part II would attend biweekly, Phase II Part I attended monthly and Phase II Part II attended bimonthly. Under the new rules, Phases I and II attend weekly, Phase III attending biweekly and moves into monthly, Phase IV attends bimonthly and Phase V participants are not required to attend. The members of the staff who attend drug court sessions include the judge, coordinator, two case managers, an hourly staff member, an intern, representatives from law enforcement, Prosecutor's Office, and treatment providers as needed. In addition, the field officer occasionally attends drug court sessions.

The courtroom is set up in a traditional manner where the judge sits on a raised bench and the rest of the drug court team sit across the room at two tables facing the bench. Participants are called up individually to sit in the witness box next to the judge on his left side. The judge speaks directly to the participants in a warm, respectful tone. All participants are queried on program compliance and for updates on their personal lives. The judge interacts with each participant for an average of three minutes. Generally, the team members speak only to address the judge's questions. When appropriate, the judge will impose sanctions or rewards that have been decided by the entire team in the team meeting prior to court.

DRUG COURT FEES

There is a \$500 program fee for drug court participants. In addition, if a participant requires a public defender, they are charged \$150. Participants pay for each drug screen as follows: \$5 for each random screen test stick, \$10 for each four-panel UDS, and \$25 for each eight-panel UDS. Payment for treatment is also the participant's responsibility. The majority of CBH's clients are



on a reduced fee. Initial evaluation is \$100 (or \$15 reduced), IOP or groups are \$10, and individual sessions are \$15. If a doctor's evaluation or a medical check is required they cost \$200 (\$20-\$25 reduced) and \$80 (\$10-\$15 reduced) respectively. The average cost of outpatient treatment in the community for MCDTC participants is \$1,000.

Participants are not required to have paid minimum payments to move between phases. However, a consistent payment plan must be established before moving past Phase II and all fees and restitution must be paid in full to graduate.

DRUG TESTING

Participants are assigned a color based on the frequency that they are to be tested. Participants on weekly testing status are red, bi-weekly status are yellow, monthly status are green, and bi-monthly status are blue. Participants must call a number daily which has a pre-recorded message (changed daily) that indicates which colors are required to report to the office in order to be screened. Participants in the first two phases of the program are required to report to the office every day, Monday through Saturday and then call a voicemail system on Sunday, which indicates whether they need to report for testing that day. When participants report to the program office for testing, they are screened for alcohol use with an Alcosensor (Portable Breathalyzer) each time and then randomly tested with a urine drug screen (UDS). The program uses a combination of test strips and a four-panel cup that screens for multiple drugs at a time (which show immediate results) and an eight-panel UDS, which is sent to AIT Laboratories for analysis. All positive samples are sent through confirmation with AIT Laboratories.

REWARDS

The Monroe County Drug Treatment Court uses applause and verbal praise often during court sessions to reward participants for good behavior. The judge congratulates participants and gives them a handshake in front of their peers. There is a board that displays participants' names. When participants move to a new phase, they are able to move their name to the next section of the board. Colors are assigned to each phase. When a participant moves to the next phase, they are also given a new color. Since colors are associated with drug testing, a reward for moving to a new phase is that the participant has to report for urine drug screens less often.

Before each drug court session, the team decides on what incentives participants should receive. To assist their decisions, the team references a list of incentives (Appendix C) matched up with types of good behavior. As participants advance in the program, certain restrictions are loosened as a reward, such as decreased case management meetings and drug screens.

SANCTIONS

Sanctions in MCDTC are called consequences. The team discusses consequences during team meetings prior to drug court sessions. Each voting team member has a say on the consequence given to each non-compliant participant. For consistency, a list of appropriate consequences for certain non-compliant behavior (Appendix C) is referenced. Consequences are graduated (become more intensive over time) and include verbal reprimands, a day in the jury box, road crew, public restitution, incarceration, moving backwards in phases, or termination.

TERMINATION

Termination from the MCDTC may result from repeated non-compliance, lack of progress, or a new felony offense. Verbal or physical harassment of staff members or other participants can also result in termination. Case managers make an initial recommendation to file a petition for termination. The team then decides whether the petition should be filed. When a petition for termination is filed, an independent judge will be brought in to hear the termination hearing. During a termination hearing, evidence is heard for and against the participant in question and the independent judge makes the final decision. When a participant is terminated from the program, Judge Todd, the drug court judge, will determine their final sentence, which is typically jail time.

GRADUATION

Monroe County Drug Treatment Court participants spend at least 24 months in the program before completion. Requirements for graduation include remaining clean and sober for at least 1 year, payment of all fees, and satisfactory completion of the drug court program. Graduation is referred to as Commencement because participants are "commencing onto a better life." Ceremonies are held on the second Wednesday of every month between drug court sessions if there is at least one graduate. The team, participants, family, friends, and occasionally community members attend the ceremony. There is usually a keynote speaker who will speak about drug court and substance abuse. The judge will also say a few words and takes time to speak to each graduate individually. Finally, each graduate is given a certificate and his or her charges are dropped.

DATA COLLECTED BY THE DRUG COURT FOR TRACKING AND EVALUATION PURPOSES

Data on drug court participants is kept in an electronic Access database. The system is used to keep data gathered during the initial intake interview, which is found in the Intake Form of the database. It includes personal information on each participant such as marital status, education, ethnicity, employment, family, health, mental health, drug of choice, drug treatment, criminal history, and recidivism. It stores clinical assessment results and indicates whether or not the person is accepted into drug court including the reason behind rejection. Program compliance, rewards and sanctions are in the drug court database. Additionally, drug court appearance dates, urine drug screen (UDS) dates, UDS results, support group attendance, and outcome status (graduated, active or terminated) are contained in the database. NPC Research was able to use a working copy of the drug court Access database for evaluation purposes.

Prior to this Access database, program data were kept in another database called Tracker. NPC collected data on participants prior to July 2003 from this database.

DRUG COURT FUNDING

As a part of the Probation Court Drug and Alcohol Program, the drug court is primarily supported and staffed through the A & D Program. The drug court is also supported through Indiana Criminal Justice Institute (ICJI) Justice Assistance Grant and drug court participant fees.

MCDTC 10 Key Components Results

The National Association of Drug Court Professionals (NADCP, 1997) has defined successful drug courts as consisting of 10 Key Components. This section lists these 10 Key Components, as



well as research questions developed by NPC for evaluation purposes. The research questions were designed to determine whether and how well each key component is demonstrated by the MCDTC. The importance of the *10 Key Components* is recognized by the IJC as they are a component of the drug court certification process. There are currently no research-based benchmarks for any of these Key Components, as researchers are still in the process of establishing an evidence base for how each of these components should be implemented. However, preliminary research by NPC connects certain practices within some of these Key Components with positive outcomes for drug court participants. Additional work in progress will contribute to our understanding of these areas.

The descriptions of each Key Component that follow include local information about the MCDTC, existing research that supports promising practices, and relevant comparisons to other drug courts. Comparison drug court data come from the *National Drug Court Survey* performed by Caroline Cooper at American University (2000), and are used for illustrative purposes.

KEY COMPONENT #1:

<u>Drug courts integrate alcohol and other drug treatment services with justice system case processing.</u>

Research Question: Has an integrated drug court team emerged?

The MCDTC team consists of the judge, the coordinator, two case managers, a field officer, the Police Department Captain, a representative from the main treatment provider (CBH), a deputy public defender and a prosecutor. An integrated drug court team is one of the MCDTC's biggest strengths and is instrumental in allowing this program to operate effectively and efficiently. The team members communicate every day through email.

Previous research (Carey et al., 2005) has indicated that greater representation of team members from collaborating agencies (e.g., prosecuting attorney, defense attorney, treatment) at team meetings and court sessions is correlated with positive outcomes for clients, including reduced recidivism and, consequently, reduced costs at follow-up.

All members of the MCDTC team attend pre-court team meetings and a retreat that generally happens yearly. The pre-court team meetings are focused on the progress of participants attending court that day, and allow the team members to have

Even the staff members who are indirectly involved with you come up to you and say, 'Hey, you're doing a good job; keep up the good work.' They know about you from the team meeting and they're very supportive. The team comes together for you.

– Drug court participant

input and make decisions on the team response to each participant's problems or successes. The substance abuse treatment providers share information with the case managers. The case managers subsequently present these findings with the team through progress reports and discussion at the pre-court team meetings.

The retreat is generally a time to discuss drug court policies and make decisions on changing practices that are not working or on implementing new practices they believe will help enhance the program (i.e., increase participant success). The team works together to come to a consensus

on drug court policies as well as other routine decisions, such as sanctions and rewards for each participant.

Having the team members involved in decision-making fosters a strong sense of teamwork and helps each member feel that they are valued members of the team. In addition, the frequent communication and input from the team members allows the court to act swiftly when problems arise.

KEY COMPONENT #2:

<u>Using a non-adversarial approach, prosecution and defense counsel promote public safety</u> while protecting participants' due process rights.

Research Question: Are the participant advocate (public defender) and the prosecutor satisfied that drug court has not compromised the mission of each?

Team members indicated that all the entities involved in this drug court are fully committed to it. The deputy public defender participating in the program retains the role of advocate, but cooperates with the other team members for what they agree to be the participant's best interest.

The prosecutor and the public defender are both looking for prospective participants that they can refer to the program. Without such intervention, it is possible that those defendants would be convicted and sent to correctional facilities. Consistent with the national drug court model, both attorneys in this program have embraced alternative, non-adversarial roles built on cooperation and communication. Both attorneys feel that they have a common goal but they can disagree safely. As one team member said, "There's not a lot of ego going on here."

KEY COMPONENT #3:

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

Research Question: What is the time between identification of eligible individuals and entry into the program? Are the eligibility requirements being implemented successfully? Is the original target population being served?

The quicker an eligible individual is placed in the program, the better, as immediate responses to behavior are most effective. Contacts with law enforcement and the criminal justice system are often viewed by offenders as an awakening and provide them an opportunity to make potentially life-changing decisions, such as entering treatment.

According to statistics supplied by the MCDTC, 87% of participants enter the program within 30 days of their referral and there is approximately 7 days between an arrest and the referral. This comes to a total of about 37 days, or 5 weeks, from arrest to program entry. Previous evaluation by NPC Research has shown that the time from arrest to program entry for the majority of drug courts is about 30 days, so the MCDTC program is consistent with other courts. However, some courts have successfully implemented a process where participants enter the program less than a week from their arrest, so it is possible to shorten this time. Five weeks from arrest to entry is pushing the limits of what should be considered as "promptly placed." The MCDTC partner agencies should monitor the time from identification to drug court entry to ensure this time period does not widen and continue to analyze where additional efficiencies may be possible. Discussions among them regarding how the timeline can be shortened may be in order.



The MCDTC specifically targets non-violent, non-dealing felony offenders. Offenders with a misdemeanor charge pending can be accepted into the program if the underlying offense is a felony. Those that were sentenced to probation on a felony conviction and violate the conditions of that probation may also be eligible for the drug court under a petition to revoke. Individuals who enter the MCDTC screening process are repeat offenders or probation violators with a felony offense. The judge, prosecutor, or defense attorney can refer the individual to MCDTC by submitting a referral to the drug court coordinator, who then passes the referral on to the rest of the drug court team. After offenders are referred to the program, the prosecutor determines legal eligibility and the coordinator performs an initial overview. Legal eligibility is determined by examining the current charges and criminal history. This process ensures that the appropriate eligible participants are being identified and that the MCDTC program is serving its intended target population.

KEY COMPONENT #4:

<u>Drug courts provide access to a continuum of alcohol, drug and other treatment and</u> rehabilitation service.

Research Question: Are diverse specialized treatment services available?

The American University National Drug Court Survey (Cooper, 2000) shows that most drug courts have a single provider. NPC research, in a study of drug courts in California (Carey et al., 2005) found that having a single provider or an agency that oversees all the providers is correlated with more positive participant outcomes, including lower recidivism and lower cost at follow-up.

Additionally, clients who participated in group-treatment sessions two to three times per week have better outcomes (Carey et al., 2005). Programs that require more than three treatment sessions per week may create hardship for clients, and may lead to clients having difficulty meeting program requirements (e.g. employment). Conversely, it appears that one or fewer sessions per week is not enough intensity to demonstrate positive outcomes. Individual treatment sessions, used as needed, can augment group sessions and may contribute to better outcomes, even if the total number of treatment sessions in a given week exceeds three.

The MCDTC program provides a wide continuum of necessary services to DC participants. Groups provided include Living Sober, Batterers Treatment, Stress Management, Cognitive Behavioral Therapy (CBT), Problem Solving Therapy (PST) Protocol, Depression Support, Anxiety Support, Thinking for a Change, and Anger Management. Other services or referrals that drug court participants might receive include but are not limited to employment, housing, budgeting, pain management, relapse prevention, life skills, family therapy, parenting classes, domestic/sexual assault, and academic/GED/vocational training.

The MCDTC works primarily with one treatment provider (CBH) to provide a continuum of services appropriate for each individual, depending upon their needs, although there are several other treatment agencies that provide services to participants. These other agencies are less well integrated into the drug court process. The frequency of treatment sessions vary due to individualized treatment plans, however, the majority of drug court participants receive treatment at CBH. For the first 2 to 3 weeks of the program, participants are enrolled in either residential detoxification or day treatment and then they are moved to an IOP program. The IOP groups meet

three times per week for 6-12 weeks, after which participants then enter continuing care on a weekly basis.

KEY COMPONENT #5:

Abstinence is monitored by frequent alcohol and other drug testing.

Research Question: Compared to other drug courts, does this court test frequently?

Research on drug courts in California (Carey et al., 2005) found that drug testing that occurs randomly, at least three times per week is the most effective model. If testing occurs more frequently (that is, three times per week or more), the random component becomes less important.

Programs that tested more frequently than three times per week did not have any better or worse outcomes than those that tested three times per week while less frequent testing resulted in less positive outcomes.

It is still unclear whether the important component of this process is taking the urine sample (having clients know they may or will be tested) or actually conducting the test, as some programs take multiple urine samples and then select only some of the samples to test. Further research will help answer this question.

The UA schedule is not flexible at all in the beginning [which is a challenge for participants with jobs].

- Drug court participant

Results from the *American University National Drug Court Survey* (Cooper, 2000) show that the number of urine drug screens (UDS) given by the large majority of drug courts nationally during the first two phases is two to three per week. The MCDTC conducts UDS consistent with the average adult drug court: at least 2 days a week during the first two phases of the program.

As with most drug courts, MCDTC drug testing is more frequent in the beginning of the program, and gradually tapers off toward the end of the program. MCDTC provides a program that

It would be good if [the drug court program] offered a day and night UA time.

- Drug court participant

is highly structured and rigorous (in terms of meetings/treatment/UDS required weekly), especially early on. While several respondents felt the structure helped them to stay clean, there were some who felt that requirements could, at times, be overwhelming and stressful.

MCDTC should consider the optimal program dosage and intensity required to maximize accountability and oversight, while promoting successful participation. It is important to

maintain the positive aspects of frequent monitoring without creating an undue burden on participants. The purpose of this program is to engage and retain individuals in treatment and help them adjust to a new lifestyle, free of drugs and criminal behavior. The program should ensure that their requirements are supportive of these goals.



KEY COMPONENT #6:

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

Research Questions: Do the partner agencies in this program work together as a team to determine sanctions and rewards? Are there standard or specific sanctions and rewards for particular behaviors? Is there a written policy on how sanctions and rewards work?

The intent of sanctions and rewards should always be to reinforce desired behavior such as abstinence, while minimizing undesirable behavior e.g., missing sessions. Sanctions and rewards

should be examined to ensure they do not interfere with the ability of participants to be successful. For example, lengthy time in jail could lead a participant to lose employment. In addition, the process for giving sanctions and rewards should be examined to ensure that the intended lesson is clear and effective. An immediate response to poor behavior is generally much more effective than a delayed response. Appendix D contains some examples of sanctions and rewards used by other drug courts evaluated by NPC. Many of these are similar to those already in use by the MCDTC program while others might provide some new and different ideas for the MCDTC team to consider.

Generally, in drug court programs, participants have clear incentives to complete the program. The most common and overarching incentive of drug court is the dismissal of the criminal charge that brought them into drug court. Often, a "suspended sentence," pending completion of the drug court

Some of the sanctions are too much; like the jail sanctions. I understand that you have to be responsible for your actions, but I think they can find other, more productive ways [to provide consequences] rather than sending the person to jail, which is overcrowded and nasty.

- Drug Court participant

program, is in place, which means that the participants with more extensive criminal histories can avoid incarceration.

A variety of rewards and sanctions (called "incentives" and "consequences" by the MCDTC team) are used with participants during the program. A complete list of incentives and conse-

They were very clear.

I knew that if I kept using, I would be terminated from the program. Let me put it this way: they always gave me enough rope to hang myself.

- Drug Court participant

quences is in Appendix C. This list is provided to MCDTC staff and is referred to regularly when responses to participants' progress are being discussed by the team. Consequences are graduated—the severity of the consequence increases with more frequent or more serious infractions. This is a recommended practice throughout criminal justice programming. Possible consequences include verbal warnings, observing court proceedings for a day, community service hours (Road Crew), home detention, or jail time. Consequences can be mitigated by participant honesty. For example, if participants admit to use before a positive drug test, the consequence will be less than if they lie about their use.

Rewards are given for clean drug tests and increase the longer a participant remains clean. Rewards are also given for continued positive progress, positive attitude changes, obtaining a valid drivers license, obtaining employment or a diploma, drug-free babies, returning of children to the

home and for successfully completing treatment and the program. Rewards include applause, verbal praise, handshakes, removal of curfew, coffee with a team member and movement of a tag on the board kept in the courtroom that indicates length of time participants have remained sober. At graduation, participants also receive a commencement certificate, their charges are dismissed and their tag is moved from the active participant board to the alumni board.

Reports regarding progress or non-compliant participant behaviors are discussed during pre-court meetings and the team comes to an agreement on sanctions and rewards. The judge speaks with the participant during court sessions and provides rewards or imposes consequences that have been decided by the team during the pre-court meeting. This process is different than many drug courts nationally, which is for the judge to make the final decision regarding rewards and sanctions based on input from the team.

KEY COMPONENT #7:

Ongoing judicial interaction with each participant is essential.

Research Question: Compared to other drug courts, does this court's participants have frequent contact with the judge? What is the nature of this contact?

Research in California and Oregon (Carey et al., 2005) demonstrated that participants have the most positive outcomes if they attend at least one court session every 2 to 3 weeks in Phase I of their involvement in the program. In addition, programs where judges participated in drug court voluntarily and remained with the program at least 2 years had the most positive participant outcomes. NPC research supports hiring judges without a time-limit, as experience and longevity is correlated with cost savings (Carey et al., 2005; Finigan, Carey, & Cox, 2006).

Nationally, the *American University Drug Court Survey* (Cooper, 2000) reported that most drug court programs require weekly contact with the judge in Phase I, contact every 2 weeks in Phase II, and monthly contact in Phase III. The amount of contact decreases for each successive phase.

Although most drug courts followed the above model, a good percentage had less court contact (e.g., every 2 weeks in Phase I, monthly in Phases II and III.). In the MCDTC, participants attend drug court under the most common model: Phase I and II participants have weekly contact with the judge

Judge Todd has been presiding over the MCDTC since its inception in 1999. Drug courts with judges who preside for at least 2 years and/or who rotate through more than once have better outcomes than drug courts with regular rotations of less than 2 years (Carey et al., 2005; Finigan, Carey, & Cox, 2006).

The judge learns about participant progress during the pre-court team meeting from drug court staff, from written reports and through discussions with the participants. This process brings When you're up there [at the bench], you're actually having a conversation, and not just telling your side of the story. You're getting a chance to prove yourself.

- MCDTC participant

each participant's situation to the judge's attention in a personal, interactive way that helps build the relationship that the judge has with each participant. In pre-court team meetings, staff may discuss the personal issues of participants in order to understand the context in which the participants' behaviors are occurring. However, participants can request that certain issues not be brought up in court and the judge honors these requests.



In court, participants sit in the witness seat to the left of the judge. Judge Todd interacts directly with the participants in a conversational style. He is warm, encouraging and respectful in his interactions. He remembers from week to week what is happening with the participants including where they work and how many children they have. Judge Todd speaks with participants personally, so participants feel that they are not just a number - that the judge genuinely cares whether they succeed or not. The judge also earns the respect of participants by holding them accountable

for their actions while rewarding them for their successes. This is in part because the judge's commendable practice of encouraging clients to determine their own sanctions and walking them through the reasoning, so that clients understand the behavior that led to the sanction as well as why they received the sanction they did.

Participants interviewed held a very positive view of Judge Todd. They appreciated his interest in helping them and their peers. They also talked positively about the judge's efforts to recognize those in the program that are doing well. They really Facing outwards [while talking with the judge] includes everybody; it feels like you're all in it together.

- MCDTC participant

felt he was working for their success. One participant said, "You can't sit there and say, 'He doesn't care about me.' He's so passionate about it, even the hard core guys I've seen go up to the bench get won over."

KEY COMPONENT #8:

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

Research Question: Is evaluation and monitoring integral to the program?

The MCDTC does well collecting the data necessary both for tracking participants and for effective evaluation of the program. The MCDTC is one of the rare programs that collect data consistently not only on court related activities but on treatment received by each participant as well.

The MCDTC have had process evaluations performed prior to the current study (Labrentz, 2004) and have used the information gained in these evaluations to help shape and enhance program practices. In addition, the team openly discusses issues as they arise and focuses on ways to adjust the program to address these issues. At their most recent retreat, based on information gained from evaluation and from observations of participant progress, the MCDTC team chose to make a change in the program phases, moving from two phases to five. One of the main goals of this change was to gradually decrease the level of supervision for participants so that participants would not experience a sudden change from high supervision to none upon graduation. The team believed that this sudden change was stressful for participants and that because of the high level of supervision throughout the program participants were not learning how to supervise themselves. The gradual decrease in supervision allows participants to practice relapse prevention techniques in a context similar to what they will experience after leaving the program.

This decision to change the phase structure shows the team's commitment to self-monitoring and enhancing the program to best meet participant needs.

KEY COMPONENT #9:

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

Research Question: Is this program continuing to advance its staff members' training and knowledge?

Training is an important element for continued certification under IJC. MCDTC team members receive ongoing training through IJC and other organizations. Members of the MCDTC team, including the coordinator and case managers are certified probation officers and are required by the state of Indiana to receive educational hours regarding substance abuse and criminal justice every year. Team members have also attended training conferences through the NADCP and NDCI.

It is evident that the judge and the team have received education around drug courts and addiction by the quality of their adherence to the 10 key components, by the discussions that occur at pre-court meetings and by the conversations the judge has with participants. For example, the judge will often talk to participants about triggers for use, warning them when they are likely to occur and providing suggestions for how to avoid them.

KEY COMPONENT #10:

<u>Forging partnerships among drug courts, public agencies, and community-based organizations generates local support and enhances drug court program effectiveness.</u>

Research Question: Compared to other drug courts, has this court developed effective partnerships across the community?

Responses to Caroline Cooper's *National Survey* showed that most drug courts are working closely with community groups to provide support services for their drug court participants. Examples of community members that drug courts are connected with include self-help groups like AA or NA, medical providers, local education systems, employment services, faith communities, and Chambers of Commerce.

In addition to having representatives on the drug court team from agencies traditionally associated with drug court programs (e.g., the prosecutor, public defender, probation case management, treatment, etc), the MCDTC program has worked to include some relevant agency partners. Representatives from various community agencies such as employment and family services have come in the program to advertise their availability. Further connections with the community would benefit the MCDTC and its participants. Having representatives from community agencies, such as employment, education, housing, and health care on the drug court team would greatly facilitate participants' access to these services as well as provide further resources to the drug court team. Once these individuals are connected with the drug court and see the work that the program does, they may be willing to donate services and can often gain some benefit themselves in being involved with the drug court.



Recommendations

Drug courts are complex programs designed to deal with some of the most challenging problems that communities face. Drug courts bring together multiple traditionally adversarial roles as well as stakeholders from different systems with different training, professional language, and approaches. They take on groups of clients that frequently have serious substance abuse treatment

The program requirements made it hard to find a job and keep a job that pays well.

- MCDTC participant

needs. Adults with substance abuse issues involved in the criminal justice system must be seen within an ecological context; that is, within the environment that has contributed to their attitudes and behaviors. This environment includes their neighborhoods, families, friends, and formal or informal economies through which they support themselves. The drug court must understand the various social, economic and cultural factors that affect them.

MCDTC has been responsive to the community needs and strives to meet the challenges presented by substance abusers. The program has done very well in implementing the 10 key components and in adjusting the program practices to meet the needs of its participants. However, there are always ways that any program can be improved. Following are some recommendations for enhancing the MCDTC program.

- Increase and strengthen program connections with the community. Participants are struggling to make payments on the fees required by the program and some participants need housing. Support from community agencies in the form of employment, education, transportation and housing would greatly facilitate the ability of participants to comply with program requirements including paying their fees as well as providing funds or support for other program services. Once these community partners become connected with the drug court and see the work that the program does, they may be willing to donate services
 - and can often gain some benefit themselves from being involved with the drug court. For example, employers hiring drug court participants get the benefit of regular drug testing at no cost and also gain workers who are actively working on turning their lives around and becoming contributing citizens.
- MCDTC may wish to consider offering flexibility in several areas of the program including drug testing and drug court sessions. For example, participants requested flexibility in the times and days of the week that drug court sessions take place, to accommodate participants

I had 3 or 4 interviews where someone said, 'Yeah, if you weren't in DC, we'd love to give you a job. Come back when you're done.'

- MCDTC participant

who have other demands on their time, including children or jobs. Many drug court programs offer early morning court sessions or evening sessions. It may be appropriate for the program to provide flexibility in its program requirements as an incentive for participants who are demonstrating positive intent to change their behavior and who are making progress toward those changes.

- The MCDTC has an independent judge hear the termination hearing, however Judge Todd determines their sentence. The team might consider having a non-drug court judge decide on the sentence for drug court participant who are terminated. In drug court programs where the judge works closely with participants, it can be difficult to determine the appropriate sentence objectively, based on the individual's original charge. This often results in terminated drug court participants receiving a much more extensive sentence than they would have received had they never attended the program.
- Because 5 weeks from arrest to entry is pushing the limits of what should be considered as "promptly placed," the MCDTC should monitor the time from identification to drug court entry to ensure this time period does not widen and analyze where additional efficiencies may be possible. Discussions among members of the drug court team regarding how the timeline can be shortened may be in order.
- The MCDTC team should consider the optimal program dosage and intensity required to maximize accountability and oversight, while promoting successful participation. It is important to maintain the positive aspects of frequent monitoring without creating an undue burden on participants.
- An eligibility requirement of the program is the ability to read and/or communicate in English. The MCDTC may want to reconsider this requirement and consider hiring a part-time Spanish interpreter in order to reach more of its target population of non-violent, non-dealing offenders.



OUTCOME EVALUATION

Outcome Evaluation Methods

RESEARCH STRATEGY

Research has demonstrated the importance of completing substance abuse treatment in the realization of desirable societal effects. These positive effects include substance abuse cessation, reduced criminal behavior and improved employment outcomes (Finigan, 1996). An initial indicator of the success of a drug court program is the rate of program participant graduation (completion of treatment). Therefore, NPC Research calculated the graduation rates for MCDTC and compared them to the national average for drug court programs as well as national average for non-criminal justice related outpatient treatment programs.

The criminal justice system outcome yardstick that most commonly is used to measure the effectiveness of drug courts is the recidivism of drug court participants after they leave drug court programs. Re-arrests are defined in this study as arrests in which charges are filed with the courts regardless of outcome. NPC Research examined the effectiveness of the MCDTC by comparing the post-program recidivism (re-arrests) of a sample of MCDTC participants with the recidivism of a sample of individuals who were eligible for drug court but chose not to attend MCDTC and had similar demographic characteristics and prior criminal records. The recidivist records of the MCDTC sample and the comparison group were examined for a maximum 24-month time period following program entry.

OUTCOME STUDY QUESTIONS

The outcome evaluation was designed to address the following study questions:

- 1. How successful is the program in bringing program participants to completion and graduation within the expected time frame?
- 2. Does participation in drug court reduce recidivism for those individuals compared to traditional court processing?
- 3. Does participation in drug court reduce levels of substance abuse?

DATA COLLECTION AND SOURCES

Information was acquired for the outcome evaluation from administrative databases. Recidivism data were gathered from 1) ProsLink, a database administered by the Indiana Prosecuting Attorney's Council (used herein with great appreciation) and 2) DoxPop, a public access system to court cases in 35 of the 92 Indiana counties, including Monroe County. The use of DoxPop was required as Monroe County Prosecutors' Office had not participated in ProsLink prior to January 2007.

ProsLink records provide arrests in which charges are filed with the courts regardless of outcome for 90 of the 92 counties in Indiana, thus allowing collection of out-of-Monroe County recidivism. DoxPop provided arrest information and jail, probation and prison days for within Monroe County and was used in conjunction with ProsLink. Previous Indiana drug court evaluations looked for recidivism within their own county. The use of ProsLink may lead to a greater estima-



tion of recidivism than found in earlier evaluations. For example, if identification of recidivism had been limited to DoxPop for this evaluation, 9% out-of-county arrests would have been located. By using ProsLink, there was a 40% increase in recidivism identified for outside Monroe County.

ProsLink provides a nearly statewide estimation of recidivism. There are some limitations of ProsLink: 1) It is limited to the 90 reporting counties, 2) it is dependent upon timely reporting and updating of status changes by the local prosecutors' offices throughout the state, 3) it only provides data on arrests in which charges are filed (not all arrests), and 4) it is limited to the state of Indiana and does not provide arrest information for the bordering states. It is not inconceivable that additional offenses may have occurred outside Indiana boundaries. Although we are likely underestimating these arrests; this is comparable for both the drug court and the comparison group and therefore not a potential source of bias.

SAMPLE SELECTION

As described above, a selection was made of a sample of individuals who had participated in drug court and a sample of individuals who had not for the comparison group.

Monroe County Drug Treatment Court Participant Sample

NPC identified a sample of drug treatment court participants who entered MCDTC from January 1, 2002, through June 2005. For the evaluation time interval, there were 132 drug court participants—62 graduates, 47 individuals terminated and 22 currently active.

Comparison Group

The Monroe County team stated that they identified all potential candidates for drug treatment court within their county. Thus, there was not an available pool of ideal comparison group candidates: individuals who were drug court eligible but had not been offered drug court participation. As an alternative, NPC chose a group of individuals who declined participation in MCDTC. A total of 144 names were identified as being individuals who were eligible for the program but had declined drug court during the study date range and had not participated in drug court at an earlier time.

For available data elements, there were no notable differences between the drug participants and those who declined drug court. Unfortunately, for drug of choice, data were not available on the comparison group. In analyses, MCDTC and the comparison group were matched on age, gender, ethnicity and criminal history including prior arrests in the past 2 years to remove differences between the groups (see Table 1). Before matching, the drug court group had slightly more arrests than the comparison group in the 24 months preceding the start of the program (1.7 versus 1.5). Thus, the drug court group was slightly more criminal than the comparison group. Both MCDTC group and decliners were followed through ProsLink and DoxPop for a period of 24 months from the date of drug court entry.

Outcome Evaluation Results

Table 1 provides the demographics for the study sample of drug court participants and the comparison group. This table shows that drug court participants included more male participants and had slightly more arrests in the 2 years prior to program start. These differences were controlled for in the subsequent analyses.

Table 1. Participant and Comparison Group Characteristics

	Drug Court N = 132	Comparison N = 144
Gender	76% male	65% male
	24% female	35% female
Ethnicity		
White	97%	94%
African American	2%	6%
Other	1%	
Average age at start	33 years	30 years
Median	32 years	27 years
Range	19-60 years	18-58 years
Drug of Choice		
Alcohol	60%	NA
Cocaine/crack	6%	IVA
Marijuana	8%	
Methamphetamine	3%	
Average number of arrests in the 2 years prior to	1.7	1.5
program entry	(range 0-8)	(range 0-7)

Note: T-tests and chi-square showed no significant difference between the two groups on the above variables (p > .05) except for gender, which was controlled for in the subsequent analyses.



RESEARCH QUESTION #1: PROGRAM COMPLETION

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

Whether a program is bringing its participants to completion in the intended time frame is measured by program graduation (completion) rate, program retention and by the amount of time participants spend in the program. Program graduation rate is the percentage of participants who graduated from the drug court program out of the total cohort of participants who had exited the program. Program retention rate is the percentage of individuals who have either graduated or are still active out of the total number who entered drug court.

National research has reported an average graduation rate of 48% for drug court programs (Belenko, 1999). NPC Research identified a graduation rate of 56% (62/110) for MCDTC; which is better than the national average. The program retention rate is 64%.

To measure whether MCDTC graduates its participants within the intended program time frame, length of time in the program was calculated from the drug court database. Drug court graduates (N=62) spent an average of 24 months in the program with a range of 3 to 50 months. As the program intended minimum length is 24 months, MCDTC is successfully graduating its participants within the expected time frame.

RESEARCH QUESTION #2: RECIDIVISM

Does participation in MCDTC reduce the rate of recidivism for participants as compared to the comparison group?

The MCDTC sample demonstrated a significantly (p < .05) lower average number of arrests over the 24 months after drug court entry and a lower rate of recidivism¹ compared to the comparison group sample. Figure 4 displays the average number of re-arrests for all drug court participants, drug court graduates, and comparison group over a 24-month period at 6-month intervals from program entry. Figure 5 displays the 2-year recidivism rate.

¹ Defined as "re-arrested at least once in a 24-month period" from drug court start or comparison group "start" date.

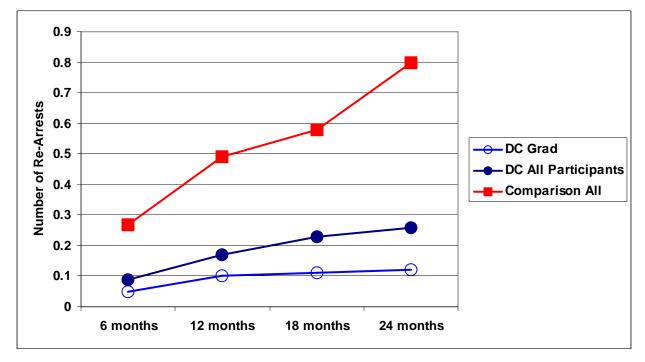


Figure 4. Re-Arrests Over 24 Months MCDTC and Comparison Group

Note: All re-arrests in a 24-month period for MCDTC participants (graduates and all participants) and comparison group for the study period 1/1/02-6/30/05 with follow-up through 6/30/06.

The MCDTC sample demonstrated a significantly lower (p < .05) average number of re-arrests over the 24 months after drug court entry (see Figure 4). The samples include all participants, (those terminated, withdrawn, and graduated). In support of a positive effect of the drug court, the average number of arrests over time for all drug court participants regardless of graduation status nearly parallels the very small gradual incline for graduates. The comparison group sample is both higher and shows a sharper incline in re-arrests over time.

Figure 5 displays the 2-year recidivism rates of all MCDTC, the MCDTC graduates, and comparison group. The 2-year recidivism rate for drug court was 17% while the rate for the comparison group was 33%. Drug court participants (regardless of graduation status) were half as likely to have had any arrests in the 2-year follow-up period relative to comparison group. Drug court graduates had an even lower recidivism rate of 11%. Although the MCDTC group had more arrests in the 2 years preceding the start of drug court as compared to the comparison group (1.7 versus 1.5), they subsequently had a lower recidivism rate after participating in drug court, regardless of graduation status. The 2-year recidivism rate of 17% for all SJCDC participants is extremely low and is the same as the national rate of 17% for drug court *graduates*.



40% 35% 33% 30% 2-Year Recidivism Rate 25% 20% 17% 15% 11% 10% 5% 0% **DC Grad DC All Participants Comparison All**

Figure 5. 2-Year Recidivism Rate for MCDTC Participants and Comparison Group

Note: Two-year recidivism rate for MCDTC participants (graduates and all participants) and comparison group for the study period 1/01/02-6/30/05 with follow-up through 6/30/06.

RESEARCH QUESTION #3: REDUCING SUBSTANCE ABUSE

Does participation in drug court reduce levels of substance abuse as measured by positive UDS and re-arrests for substance abuse related crimes?

For MCDTC, drug testing results were gathered from the drug court database and Tracker, a data management system for the Monroe County Probation Department. Drug testing data were obtained and reviewed for total number of urine drug screens (UDS) and positive test results. The goal was to determine whether there were reduced levels of substance use over time for MCDTC participants. Substance use over time was measured by percent positive UDS tests out of the total number of drug tests. As Figure 6 conveys, during the 3 months following drug court entry, the drug court participants had a very low percent (3%) of positive urine drug screens and this percentage decreased after the first 3 months. Maintaining negative UDS results is a key measure of successful participation and completion in MCDTC.

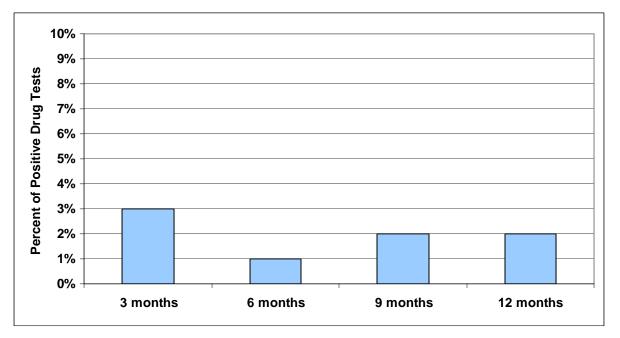


Figure 6. Percent of Positive UDS for MCDTC Participants

Note: Percent positive urine drug screens in all MCDTC participants) for the first 12 months from program start date for the study period 1/1/02-6/30/05.

Another way of measuring reduction in substance abuse is to evaluate the rate of recidivism for drug related crimes.² Over a 24-month follow-up period, the arrests of all individuals were analyzed as to whether part or all of the charges were classified as a substance abuse related crime. Figure 4 conveys that drug court participants as a whole and graduates had consistently and significantly lower (p<0.05) drug related re-arrests than the comparison group. The number of comparison group re-arrests for substance abuse related crimes had a linear increase while the drug court participants and graduates showed no increase. The number of drug-related re-arrests for drug court participants, regardless of graduation status, was extremely low (an average of .01 rearrests). Drug court graduates had no drug-related re-arrests.

² The Indiana code sections for substance abuse related crimes were identified by a county prosecutor.

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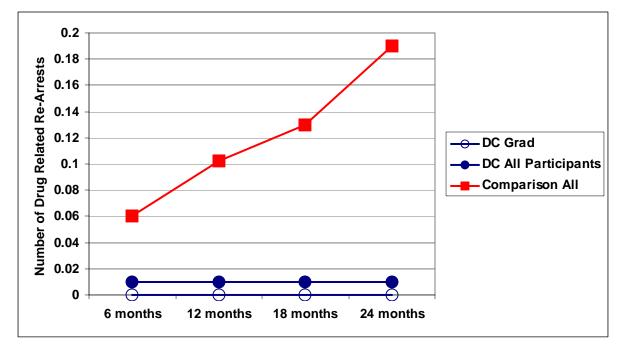


Figure 7. Drug Related Re-Arrests Over 24 Months

Note: All re-arrests for drug related charges in MCDTC participants (graduates and all participants) and comparison group for the study period 1/1/02-6/30/05 with follow-up through 6/30/06.

Outcome Summary

The outcome analyses were based on a cohort of MCDTC participants who entered the drug court program from January 1, 2002, through June 30, 2005, and a comparison group of offenders eligible but who declined participation in the MCDTC program. Although the MCDTC group had slightly more arrests than the comparison group in the 2 years preceding the start of drug court (1.7 versus 1.5), the outcome results indicated that participants in the drug court were rearrested half as often as the comparison group in the 24 months following drug court entry. This provides clear support that the MCDTC has been successful in reducing recidivism for its population of substance abusing offenders.

Overall, the drug court program also has been successful in reducing drug use among its participants as measured by positive drug screens and re-arrests for drug related crimes. The number of negative drug screens in drug court participants was corroborated by a decrease in drug-related re-arrests for all drug court participants.

COST EVALUATION

Cost Evaluation Methodology

This section of the report describes the research design and methodology used for the cost analysis of the MCDTC program. The next section presents the cost results.

COST EVALUATION DESIGN

Transaction and Institutional Cost Analysis

The cost approach utilized by NPC Research is called Transactional and Institutional Cost Analysis (TICA). The TICA approach views an individual's interaction with publicly funded agencies as a set of *transactions* in which the individual utilizes resources contributed from multiple agencies. Transactions are those points within a system where resources are consumed and/or change hands. In the case of drug courts, when a drug court participant appears in court or has a drug test, resources such as judge time, defense attorney time, court facilities, and urine cups are used. Court appearances and drug tests are transactions. In addition, the TICA approach recognizes that these transactions take place within multiple organizations and institutions that work together to create the program of interest. These organizations and institutions contribute to the cost of each transaction that occurs for program participants. TICA is an intuitively appropriate approach to conducting costs assessment in an environment such as a drug court, which involves complex interactions among multiple taxpayer-funded organizations.

Cost to the Taxpayer

In order to maximize the study's benefit to policy makers, a "cost-to-taxpayer" approach was used for this evaluation. This focus helps define which cost data should be collected (costs and avoided costs involving public funds) and which cost data should be omitted from the analyses (e.g., costs to the individual participating in the program).

The central core of the cost-to-taxpayer approach in calculating benefits (avoided costs) for drug court specifically is the fact that untreated substance abuse will cost various tax-dollar funded systems money that could be avoided or diminished if substance abuse were treated. In this approach, any cost that is the result of untreated substance abuse and that directly impacts a citizen (either through tax-related expenditures or the results of being a victim of a crime perpetrated by a substance abuser) is used in calculating the benefits of substance abuse treatment.

Opportunity Resources

Finally, NPC's cost approach looks at publicly funded costs as "opportunity resources." The concept of opportunity *cost* from the economic literature suggests that system resources are available to be used in other contexts if they are not spent on a particular transaction. The term opportunity *resource* describes these resources that are now available for different use. For example, if substance abuse treatment reduces the number of times that a client is subsequently incarcerated, the local sheriff may see no change in his or her budget, but an opportunity resource will be available to the sheriff in the form of a jail bed that can now be filled by another person.



COST EVALUATION METHODS

The cost evaluation involves calculating the costs of the program (including the complete costs of the case that led to drug court participation), the costs of "business-as-usual" (or traditional court processing) for cases that were drug court eligible, and the costs of outcomes after program entry. To determine if there are any benefits (or avoided costs) due to drug court program participation, it is necessary to determine what the participants' outcome costs would have been had they not participated in drug court. One of the best ways to do this is to compare the costs of outcomes for drug court participants to the outcome costs for similar individuals arrested on the same charges who did not participate in drug court. The costs to the criminal justice system (cost-to-taxpayer) incurred by participants in drug court were compared with the costs incurred by those who were eligible for but did not enter drug court. The comparison group in this cost evaluation is the same as that used in the preceding outcome evaluation. Costs tracked in this study were those incurred by taxpayers. Other less tangible but important savings not factored into this study include an increase in the number of drug-free babies born, a decrease in health care expenses, and drug court participants working and paying taxes.

TICA Methodology

The TICA methodology is based upon six distinct steps. Table 2 lists each of these steps and the tasks involved.

Step 1 was performed during the site visits, through analysis of court and drug court documents, and through interviews with key informants. Steps 2 and 3 were performed through observation during the site visits and by analyzing the information gathered in Step 1. Step 4 was performed through extensive interviewing of key informants, direct observation during the site visits, and by collecting administrative data from the agencies involved in drug court. Step 5 was performed through interviews with drug court and non-drug court staff and with agency finance officers. Step 6 involved calculating the cost of each transaction and multiplying this cost by the number of transactions. All the transactional costs for each individual were added to determine the overall cost per individual. This was generally reported as an average cost per individual including "investment" costs for the drug court program, and outcome/impact costs due to re-arrests, jail time and other recidivism costs. In addition, due to the nature of the TICA approach, it was also possible to calculate the cost for drug court processing for each agency.

The direct observation of the program process and the specific program transactions occurred during site visits. The key informant interviews using the *Typology Interview Guide* were also performed during the site visits (see the *Drug Court Typology Guide* on the NPC Web site—www.npcresearch.com) and through interviews via phone and email. Cost data were collected through interviews with drug court staff and budgetary officers as well as from budgets either found online or provided from agency staff.

The specific transactions used in this cost evaluation were somewhat limited due to budget constraints. The costs to the criminal justice system outside of drug court program costs consist of those due to new arrests, subsequent court cases, probation, prison, jail time served, and victimizations. Program costs include all program transactions including drug court appearances, case management, drug treatment (individual, group, intensive outpatient, day treatment and residential treatment), jail sanctions and drug tests.

Table 2. The Six Steps of TICA

	Description	Tasks
Step 1:	Determine flow/process (i.e., how clients move through the system)	Site visits/direct observations of program practice Interviews with key informants (agency and program staff) using a program typology and cost guide (See guide on www.npcresearch.com)
Step 2:	Identify the transactions that oc- cur within this flow (i.e., where clients interact with the system)	Analysis of process information gained in Step 1
Step 3:	Identify the agencies involved in each transaction (e.g., court, treatment, police)	Analysis of process information gained in Step 1 Direct observation of program transactions
Step 4:	Determine the resources used by each agency for each transaction (e.g., amount of judge time per transaction, amount of attorney time per transaction, # of transactions)	Interviews with key program informants using program typology and cost guide Direct observation of program transactions Administrative data collection of # of transactions (e.g., # of court appearances, # of treatment sessions, # of drug tests)
Step 5:	Determine the cost of the resources used by each agency for each transaction	Interviews with budget and finance officers Document review of agency budgets and other financial paperwork
Step 6:	Calculate cost results (e.g., cost per transaction, total cost of the program per participant)	Indirect support and overhead costs (as a percentage of direct costs) are added to the direct costs of each transaction to determine the cost per transaction The transaction cost is multiplied by the average number of transactions to determine the total average cost per transaction type These total average costs per transaction type are added to determine the program and outcome costs. (These calculations are described in more detail below)

Cost Evaluation Results

As described in the methodology section, the Transactional and Institutional Cost Analysis (TICA) approach was used to calculate the costs of each of the transactions that occurred while participants were engaged in the program. Transactions are those points within a system where resources are consumed and/or change hands. In the case of drug courts, when a participant appears in court or has a drug test, resources such as judge time, defense attorney time, court facilities, and urine cups are used. Program transactions calculated in this analysis included drug court appearances, case management, treatment sessions (individual, group, intensive outpatient, day



treatment, residential), drug tests and jail sanctions. The costs for this study were calculated including taxpayer costs only. All cost results provided in this report are based on fiscal year 2007 dollars.

DRUG COURT AND TRADITIONAL COURT PROCESSING TRANSACTIONS

Arrests in Monroe County are conducted by multiple law enforcement agencies, including the Bloomington Police Department and the Indiana State Police. As the most active arresting agency in Monroe County, the Bloomington Police Department was used as the basis for constructing an arrest cost model. The cost model was constructed from information provided by representatives of the Bloomington Police Department and NPC's researchers' analysis of the Bloomington Police Department 2006 operating budget. Through the application of this information it was determined that the cost of a single arrest is \$169.68.

A *drug court session*, for the majority of drug courts, is one of the most staff and resource intensive program transactions. In Monroe County, these sessions include representatives from the Circuit Court (judge, court reporter, bailiff), the Prosecutor's Office, the public defender, the Court Alcohol and Drug Program (coordinator, field officer, and 2 case managers), the Bloomington Police Department and a treatment agency. The cost of a *drug court appearance* (the time during a session when a single participant is interacting with the judge) is calculated based on the average amount of court time (in minutes) each participant uses during the court session. This incorporates the direct costs of each drug court team member present during sessions, the time team members spent preparing for or contributing to the session, the agency support costs, and the overhead costs. The average cost for a single drug court appearance is \$119.67 per participant. This cost per appearance is within the per appearance costs of other adult drug courts studied by NPC Research. For example, courts in California and Oregon have appearance costs ranging from \$97 to \$156 (Carey & Finigan, 2004; Carey et al., 2005; Carey, Marchand, & Waller, 2005).

To determine a reasonable cost model for *court cases*, NPC's researchers focused on D Felony cases. To construct the cost model for court cases we considered activities pursued by the Monroe County Circuit Court, the Monroe County Prosecutor's Office and the Monroe County Public Defender's Office. Our research also referred to the Indiana Courts weighted caseload standards, the 2006 Indiana Judicial Center Report, and the Indiana Public Defender Commission 2005 Annual report. Reliance on the Indiana Court's weighted caseload standards was of particular importance in construction of the court case cost model. The weighted caseload standard for D Felonies takes into account the full range of case disposition—from dismissal to judge or jury trials. NPC researchers found the cost of a D Felony court case to be \$473.76.

Case management is based on the amount of staff time dedicated to case management activities during a regular work week and is then translated into a total cost for case management per participant per day. All of the main agencies involved in drug court in Monroe County have a case management role. The per day cost of case management is \$7.01 per participant. Case management costs fall on the higher end of the range of costs found in other studies. For example, case management from cost analyses in California (Carey et al., 2005) varied widely—from just over \$1.00 per day to over \$11.00 per day.

¹ Case management can include home visits, meeting with participants, evaluations, phone calls, paperwork, answering questions, consulting with therapists, documentation, file maintenance, residential referrals, and providing resources and referrals for educational and employment opportunities.

Treatment sessions are provided by 4 treatment agencies (Center for Behavioral Health, Amethyst House, Sunrise Counseling, and Elizabeth York and Associates). Treatment services provided include group, individual, intensive outpatient, day treatment and residential treatment. Since this cost analysis is focused on public funds, the cost of treatment services is only the amount paid for by public funds (treatment service rates were reduced by the percentage of participants whose services were paid for with non-taxpayer funds such as private insurance, private payments or funds from non-profits). The cost per treatment session reflects—as closely as possible—the true cost to taxpayers. Since the Center for Behavioral Health is the main provider and the only one that uses taxpayer dollars to offset treatment costs, the costs of treatment sessions at CBH were used (the other treatment providers either take client payments or private insurance or both). Group treatment is \$7.62 per person per session, individual treatment is \$12.46 per session, and intensive outpatient treatment is \$10.38 per person per day. Day treatment is \$38.77 per day and *residential* is \$44.31 per day. Costs include all salary, support, and overhead costs associated with the session. It should be noted that the data on drug court treatment episodes were not available (only the percentages of drug court participants who received a certain type of treatment were available), so NPC used proxies to determine the average number of sessions or days of each treatment type. The cost per session or day of treatment was then combined with the proxy data and the percentages of participants who received that type of treatment to come up with an estimate for the cost to taxpayers of drug treatment. Due to a lack of administrative data on treatment for the comparison group, NPC was unable to use the cost per treatment session (or day). Instead, proxies for the average number of sessions participants typically attend were used along with costs per session/day to come up with minimum and maximum average costs to taxpayers for treatment at the agencies involved.

Drug tests are performed by the Probation Department. Drug court participants are charged \$5.00 per single-panel UA test, \$10.00 for a 4-panel UA test and \$25.00 for an 8-panel UA test. The fees fully cover the cost of materials, salary, support, and overhead costs associated with the test, so there is no cost to taxpayers. Participants do not pay for breathalyzer tests, as the UA fees cover the breathalyzer testing costs. Comparison group members on probation also pay drug testing fees, so there is no cost to taxpayers.

Jail booking episodes are performed by the Monroe County Sheriff's Department. The cost per booking was calculated by a representative at the Monroe County Sheriff's Department, based on information from the Correctional Center's 2006 budget and annual report. The cost of a single jail booking is \$40.57. Due to a lack of data, costs for jail bookings were not included in this analysis.

Jail days and *jail days as a sanction* are provided by the Monroe County Sheriff's Department. Jail bed days are \$50.61 per person per day. This rate was calculated using information from the Correctional Center's 2006 budget and the jail's average daily population. It includes all staff time, food, medical, and support/overhead costs.

Prison facilities in Indiana are operated by the Indiana Department of Correction. To represent the daily cost of **prison time** served by members of the drug court and comparison groups our researchers used the department's per diem cost report for its facilities. The average per diem prison cost is \$73.63. However, due to the fact that most prisoners spend an undetermined proportion of their prison sentence in their local county jail due to overcrowding in the prisons, an average of the per diem prison cost and the local county jail cost was used. The resulting cost per day of prison time is **\$62.12**.



Adult probation services in Monroe County are provided by the County's Probation Department. Through an interview with a representative of the department and analysis of the Probation Department's 2006 operating budget, NPC's researchers were able to construct a model of probation case supervision that supports the determination of *probation time* cost used in this study. We identified \$2.90 to be the probation supervision cost per day. People on felony probation pay initial and administrative fees of \$200 and then \$30 for each month they are on probation (the fee is a bit less for misdemeanor probation), so the probation supervision cost per day is therefore reduced to \$1.90.

DRUG COURT PROGRAM COSTS

Table 3 presents the average number of program transactions (drug court appearances, treatment sessions, etc.) per participant and the total cost for each type of transaction (number of transactions times the cost per transaction). The sum of these transactions is the total per participant cost of the program. These numbers include the average for drug court graduates (N=62) and for all drug court participants (N=132), regardless of completion status. It is important to include participants who terminated as well as those who graduated as all participants use program resources, whether they graduate or not.

Table 3. Average Program Costs per Participant²

Transaction	Transaction Unit Cost	Avg. # of Transactions for DC Graduates	Avg. Cost per DC Graduate	Avg. # of Transactions for all DC Participants	Avg. Cost per DC Participant
Arrest	\$169.68	1	\$170	1	\$170
Drug Court Appearances	\$119.67	60.50	\$7,240	60.62	\$7,254
Case Management	\$7.01	780.94 Days ³	\$5,474	662.83 Days	\$4,646
CBH Group Tx Sessions	\$7.62	24 (100%)4	\$183	24 (93.2%)	\$170
CBH Individual Tx Sessions	\$12.46	12 (8.1%)	\$12	12 (12.9%)	\$19
CBH IOP Sessions	\$10.38	30 (98.4%)	\$306	30 (94.7%)	\$295
CBH Day Tx	\$38.77	14 (64.5%)	\$350	14 (70.5%)	\$383
CBH Residential Tx	\$44.31	14 (6.5%)	\$40	14 (23.5%)	\$146
Jail Days as a Sanction	\$50.61	12.02	\$608	42.28	\$2,140
Jail Days	\$50.61	0	\$0	25.06	\$1,268
Prison Days	\$62.12	0	\$0	57.48	\$3,571
Probation Days	\$1.90	0	\$0	3.07	\$6
Total Drug Court			\$14,383		\$20,068

Table 3 illustrates the cost to the taxpayer of the drug court program. On average, in drug court programs studied by NPC, the program cost per participant ranged from \$4,000 to just under \$20,000 depending on the intensity of the program and the extent to which the programs used public funds for their services (Carey & Finigan, 2004; Carey et al., 2005).

The average cost per participant of the drug court program (\$20,068) is at the high end of the program costs found in other drug courts studied by NPC. As in most drug court programs, the cost of drug court appearances is the most expensive transaction for the MCDTC. This is partly due to the involvement of many agencies and the relatively high number of agency employees that attend or contribute to drug court sessions. This high involvement may increase session

² Average costs per participant have been rounded to the nearest whole dollar amount.

³ Case management is calculated by number of days in drug court, so the average number of transactions in this case is the average number of days spent in the drug court program.

⁴ Due to a lack of data on treatment dates, NPC used proxies for the average number of treatment sessions that a drug court participant typically attends and multiplied the proxies by the percentage of participants who had that particular type of treatment.



costs, but also has the benefit of more straightforward decision-making and communication amongst agencies, smoother operations, and better outcomes. A study performed in nine courts in California found that higher agency involvement in drug court programs was related to lower recidivism and lower outcome costs for drug court participants.

Case management is the next highest cost to the MCDTC. Intense case management and supervision of participants is one of the essential elements of drug courts, so this is not an uncommon finding. As described earlier, more agency involvement has been shown to be related to lower outcome costs (Carey et al., 2004).

Jail days in the form of sanctions is also a substantial program cost. The average of 42.48 days includes both graduates and participants who terminated unsuccessfully. Although jail time is a common sanction in many drug courts, it is unusual to use such a high number of days as a sanction. One reason to avoid jail sanctions is the cost associated with jail. Although short-term jail can be an effective message to participants of the results of inappropriate behavior, longer term jail can lead to other difficulties in the participants' lives (such as loss of employment), which can make successful completion of the program less likely. The costs of long-term jail (both monetarily and in added difficulty to the participants lives) may not be worth the benefits.

Prison and jail days (not as a sanction) are also significant costs of choosing to place offenders in the drug court program, although this cost is due to sentences received after termination from the MCDTC.

TRADITIONAL COURT PROCESSING COSTS

Table 4 presents the average number of traditional court processing transactions per comparison offender and the total cost for each type of transaction (number of transactions times the cost per transaction). The sum of these transactions is the total per offender cost of traditional court processing. These numbers include the average of all comparison group participants (N = 144).

Table 4. Average Traditional Court Processing Costs per Person ⁵

Transaction	Transaction Unit Cost	Avg. # of Transactions	Avg. Cost per Partici- pant
Arrest	\$169.68	1	\$170
Court Case	\$473.76	1	\$474
Treatment ⁶	NA	NA	\$311-\$1,807
Jail Days	\$50.61	68.55	\$3,469
Prison Days	\$62.12	11.64	\$723
Probation Days	\$1.90	370.87	\$705
Total ⁷			\$5,852

⁵ Average costs per participant have been rounded to the nearest whole dollar amount.

⁶ The minimum and maximum average cost of treatment (using proxy data) for all agencies that provide treatment was used.

The cost to the taxpayer of traditional court processing per person is a minimum of \$5,852. Jail days are by far the most expensive transaction, followed by prison and probation days. The investment costs in the drug court program (including both program costs and other costs related to the drug court eligible case) is \$14,216 greater than traditional court process alone. However, outcome costs show that this investment is repaid in lower recidivism and lower outcome costs for MCDTC participants.

COSTS PER AGENCY

Another useful way to examine costs is to quantify them by agency. Table 5 provides per participant costs by agency for both the drug court program and traditional court processing. Because the Court Alcohol and Drug Program has the most staff dedicated to the MCDTC, it reasonably follows that it also has the largest proportion of the cost. In contrast, the comparison group follows the traditional court process, which includes a payment of fees that covers the minimal costs of CSAP supervision, far less intensive than the supervision received by drug court participants. In contrast, probation supervision is negligible for MCDTC participants and is much larger for the comparison group.

The second largest proportion for MCDTC participants, and the largest proportion of cost for the comparison group, belongs to law enforcement. The cost to law enforcement accrues from jail and prison days, although most of this cost for MCDTC is due to sentences received by unsuccessful (terminated) participants.

Table 5. Average Cost per Participant by Agency⁸

Agency	Avg. Cost per Drug Court Participant	Avg. Cost per Tra- ditional Court Par- ticipant	Difference (Net Investment)
Circuit Court	\$1,430	\$324	\$1,106
Court Alcohol and Drug Program	\$8,467	\$0	\$8,467
Prosecutor's Office	\$434	\$83	\$351
Public Defender	\$817	\$66	\$751
Treatment Agencies	\$1,396	\$311	\$1,085
Probation	\$6	\$705	-\$699
Law Enforcement	\$7,517	\$4,362	\$3,155
Total ⁹	\$20,067	\$5,851	\$14,216

⁷ The totals in this row reflect the minimum costs for treatment.

⁸ Average agency costs per participant have been rounded to the nearest whole dollar amount.

⁹ Totals in this row may not equal the totals in the costs by transaction table due to rounding.



The investment costs in the drug court program for each agency except for Probation is higher for the MCDTC program. The total MCDTC costs (including program costs and other costs related to the drug court eligible case) is \$14,216 greater than traditional court process, so there is a significant cost to the taxpayer in the investment involved in choosing the drug court process over traditional court processing. However, savings in outcome costs presented in the next section show how positive outcomes for drug court participants can repay this investment and then continue to produce cost benefits (savings) to the criminal justice system and the taxpayer.

OUTCOME COSTS

This section describes the cost outcomes experienced by drug court and comparison group participants. The specific outcome transactions examined include re-arrests, subsequent court cases, bookings, jail time, prison and probation. Outcome costs were calculated for 2 years from the time of program entry for drug court participants and 2 years from a estimated start date for the comparison group based on the median length of time from arrest to drug court entry for the participant sample. Lower recidivism and lower costs for MCDTC participants compared to those offenders who did not participate in drug court indicate that the program can provide a return on its investment.

The outcome costs discussed below were calculated using information gathered by NPC's researchers from the Monroe County 2006 operating budget, Monroe County Circuit Court, Monroe County Sheriff's Department, Monroe County Prosecutor's Office, Monroe County Public Defender, Monroe County Probation Department, Bloomington Police Department, Indiana Judicial Center, Indiana Department of Correction and the Indiana FY 2006 As-Passed Operating Budget.

The methods of calculation were carefully considered to ensure that all direct costs, support costs and overhead costs were included as specified in the TICA methodology followed by NPC. It should be noted that, since NPC accounts for all jurisdictional and agency institutional commitments involved in the support of agency operations, the costs that appear in NPC's analysis typically will not correspond with agency operating budgets.

OUTCOME TRANSACTIONS

Following is a description of the transactions included in the outcome cost analysis. Many of these same transactions were already described in the investment costs above.

Arrests in Monroe County are conducted by multiple law enforcement agencies, including the Bloomington Police Department and the Indiana State Police. As the most active arresting agency in Monroe County, the Bloomington Police Department was used as the basis for constructing an arrest cost model. The cost model was constructed from information provided by representatives of the Bloomington Police Department and NPC's researchers' analysis of the Bloomington Police Department 2006 operating budget. Through the application of this information it was determined that the cost of a single arrest is \$169.68.

To determine a reasonable cost model for recidivist *court cases*, NPC's researchers focused on D Felony cases. To construct the cost model for court cases we considered activities pursued by the Monroe County Circuit Court, the Monroe County Prosecutor's Office and the Monroe County Public Defender's Office. Our research also referred to the Indiana Court's weighted caseload standards, the *2006 Indiana Judicial Center Report*, and the *Indiana Public Defender Commis*-

sion 2005 Annual report. Reliance on the Indiana Court's weighted caseload standards was of particular importance in construction of the court case cost model. The weighted caseload standard for D Felonies takes into account the full range of case disposition – from dismissal to judge or jury trials. NPC researchers found the cost of a D Felony court case to be \$473.76.

Jail booking episodes are performed by the Monroe County Sheriff's Department. The cost per booking was calculated by a representative at the Monroe County Sheriff's Department, based on information from the Correctional Center's 2006 budget and annual report. The cost of a single jail booking is \$40.57. Due to a lack of data, costs for jail bookings were not included in this analysis.

Jail days are provided by the Monroe County Sheriff's Department. Jail bed days are \$50.61 per person per day. This rate was calculated using information from the Correctional Center's 2006 budget and the jail's average daily population. It includes all staff time, food, medical, and support/overhead costs.

Prison facilities in Indiana are operated by the Indiana Department of Correction. To represent the daily cost of **prison time** served by members of the drug court and comparison groups our researchers used the department's per diem cost report for its facilities. The average per diem prison cost is \$73.63. However, due to the fact that most prisoners spend an undetermined proportion of their prison sentence in their local county jail due to overcrowding in the prisons, an average of the per diem prison cost and the local county jail cost was used. The resulting cost per day of prison time is \$62.12.

Adult probation services in Monroe County are provided by the County's Probation Department. Through an interview with a representative of the Department and analysis of the Probation Department's 2006 operating budget, NPC's researchers were able to construct a model of probation case supervision that supports the determination of **probation time** cost used in this study. We identified \$2.90 to be the probation supervision cost per day. People on felony probation pay initial and administrative fees of \$200 and then \$30 for each month they are on probation (the fee is a bit less for misdemeanor probation), so the probation supervision cost per day is therefore reduced to \$1.90.

Victimizations were calculated from the National Institute of Justice's *Victim Costs and Consequences: A New Look (1996).* ¹⁰ The costs were updated to fiscal year 2007 dollars. *Property crimes* are \$11,858 per event and *person crimes* are \$38,414 per event.

¹⁰ The costs for victimizations were based on the National Institute of Justice's *Victim Costs and Consequences: A New Look (1996)*. This study documents estimates of costs and consequences of personal crimes and documents losses per criminal victimization, including attempts, in a number of categories, including fatal crimes, child abuse, rape and sexual assault, other assaults, robbery, drunk driving, arson, larceny, burglary, and motor vehicle theft. The reported costs include lost productivity, medical care, mental health care, police and fire services, victim services, property loss and damage, and quality of life. In our study, arrest charges were categorized as violent or property crimes, and therefore costs from the victimization study were averaged for rape and sexual assault, other assaults, and robbery and attempted robbery to create an estimated cost for violent crimes, arson, larceny and attempted larceny, burglary and attempted burglary, and motor vehicle theft for an estimated property crime cost. All costs were updated to fiscal year 2007 dollars using the consumer price index (CPI) for the relevant geographical area.



OUTCOMES AND OUTCOMES COST CONSEQUENCES

Table 6 represents the criminal justice system experiences of the drug court group and comparison sample.

Table 6. Average Number of Outcome Transactions per Drug Court and Comparison Group Member

Transaction	Drug Court Participants (n=110)	Comparison Group (n=144)
Arrests	.26	.80
Court Cases	.26	.80
Jail days	.38	36.64
Prison days	.88	2.72
Probation days	2.16	37.32
Property Victimizations	.01	.21
Person Victimizations	.00	.06

Table 6, above, clearly shows that MCDTC participants experience far less recidivism than offenders who were eligible for the program but did not participate. MCDTC participants have substantially lower numbers across every transaction.

Table 7 represents the cost consequences associated with criminal justice system outcomes for the drug court group and comparison sample.

Table 7. Criminal Justice System Outcomes Costs per Drug Court and Comparison Group Member

Transaction	Drug Court Participants (n=110)	Comparison Group (n=144)	Difference	Percentage Difference
Arrests	\$44	\$136	-\$92	-209%
Court Cases	\$123	\$379	-\$256	-208%
Jail days	\$19	\$1,854	-\$1,835	-9,658%
Prison days	\$55	\$169	-\$114	-207%
Probation days	\$4	\$71	-\$67	-1,675%
Property Victimiza- tions	\$119	\$2,490	-\$2,371	-1,992%
Person Victimizations	\$0	\$2,305	-\$2,305	NA
Total	\$364	\$7,404	-\$7,040	-1,934%

Tables 8 and 9 reveal that the lower rate of recidivism experienced by the drug court group, when compared to the experience of the comparison group, results in extremely large cost savings throughout the local criminal justice system. If the MCDTC continues to enroll approximately 40 new participants annually, the total average cost savings of \$7,040 per drug court participant results in a yearly savings of \$281,600 multiplied by the number of new cohorts that continue to enroll in the program each year the program remains in operation. This savings continues to grow for participants every year after program entry. If savings continue at the same rate (which has been shown to occur in other studies, e.g., Finigan, Carey, & Cox, 2007) after 10 years the savings per participant will total almost \$2,816,000.

OUTCOME COSTS BY AGENCY

Of particular of interest to state and local policymakers and managers are the financial impacts on the agencies that support the criminal justice system as the result of the operation of the drug court program. Table 8 represents these financial impacts for Monroe County. It should be noted that for some local agencies—the Court and Prosecutor's Office—the state and county share cost responsibility.

Table 8. Criminal Justice System Outcomes Costs by Agency per Drug Court and Comparison Group Member

Jurisdiction/Agency	Drug Court Participants (n=110)	Comparison Group (n=144)	Difference	Percentage Difference
Circuit Court	\$84	\$259	-\$175	-208%
Prosecutor's Office	\$22	\$66	-\$44	-200%
Public Defender	\$17	\$53	-\$36	-212%
Law Enforcement Agencies	\$63	\$1,990	-\$1,927	-3,059%
Department of Correction	\$55	\$169	-\$114	-207%
Probation Department	\$4	\$71	-\$67	-1,675%
Victimizations	\$119	\$4,795	-\$4,676	-3,929%
Total ¹¹	\$364	\$7,403	-\$7,039	-1,934%

As can be seen in Table 8, substantial cost savings are realized as the result of the MCDTC. In terms of their comparative cost experiences, drug court participants are shown to cost \$7,039 or nearly 2000% less per participant than members of the comparison group. If this per participant savings is multiplied by the number of participants who have entered the program since its inception (N = 200), the total savings accrued by the MCDTC so far comes to \$1,307,800.

Table 8 demonstrates that every agency experiences avoided costs (or savings) associated with drug court participant outcomes. Similar to many of the drug court studies in which NPC has

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¹¹ Totals in this row may not equal totals in the cost per outcome transaction table due to rounding.



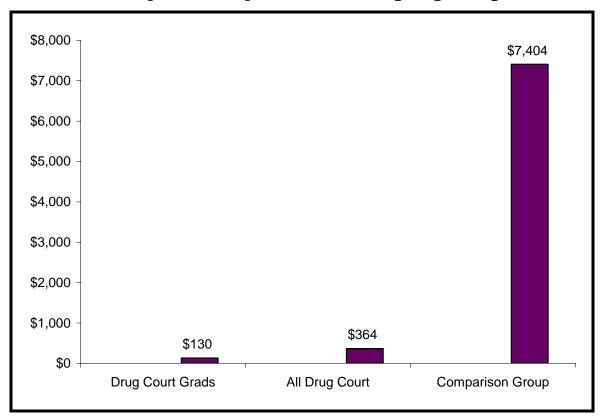
been involved, greater outcome savings associated with drug court participants accrue to some agencies than others. In the case of the MCDTC, law enforcement realizes the greatest financial benefit of all the agencies involved in the outcome experience of offenders, mainly due to less jail time for drug court participants.

The comparative criminal justice cost experiences of all drug court participants, drug court graduates and comparison group members are graphically represented in Figure 8. Due to very low rates of recidivism, drug court graduates experience the lowest outcome costs compared to all other groups. MCDTC graduates show a savings of \$234 per participant compared to all drug court participants and \$7,274 compared to comparison group participants.

Note that these outcome cost savings are those that have accrued in just the 2 years since program entry. Many of these savings are due to positive outcomes while the participant is still in the program, so savings are already being generated from the time of entry into the program.

It was not possible to cost outcomes beyond 24 months as most participants in our sample did not enter the program longer than 2 years ago. If drug court participants continue to have positive outcomes in subsequent years (as has been shown in other drug courts, e.g., Carey et al., 2005; Finigan, Carey, and Cox 2006) then these cost savings can be expected to continue to accrue over time, repaying the program investment costs and providing further savings in opportunity resources to public agencies.

Figure 8. Comparative Criminal Justice Outcomes Cost Consequences per Drug Court and Comparison Group Member (including drug court graduates)



SUMMARY AND CONCLUSIONS

he Monroe County Drug Treatment Court (MCDTC) has many characteristics that closely follow the *10 key components* of drug courts. The team is composed of partners from many different agencies. The two roles that are traditionally adversarial—prosecutors and defenders—work well, closely, and collaboratively with each other. Participants have access to a wide array of treatment and ancillary services.

As with many other drug court programs, the MCDTC works to identify and secure adequate resources to address concerns among clients. The transition from an intense program of monitoring to freedom from program oversight can be challenging for some participants. The aftercare component of a program is crucial and the MCDTC should be commended on their decision to adjust their phase structure to better address this issue.

MCDTC's ongoing professional development increases staff skills and contributes to enhanced program quality. The drug court should also continue to build on its strong community connections and support from various facets of the community, including businesses and places of worship.

The outcome results indicated that participants in the MCDTC were re-arrested half as often as the comparison group in the 24 months following drug court entry. This provides clear evidence that the MCDTC has been successful in reducing recidivism for its population of non-violent, non-dealing felony offenders.

Overall, the program has also been successful in reducing drug use among its participants. The percentage of positive drug tests declined over the course of 1 year. This decline in positive testing was corroborated by a decrease in drug-related re-arrests for the MCDTC participants. In fact, MCDTC graduates had no drug related re-arrests at all.

The average cost for the MCDTC Program was \$20,067 per participant. This amount is at the high end of the costs found in other drug courts (\$4,000 to \$20,000) studied by NPC Research (Carey & Finigan, 2004; Carey et al., 2005). However, the outcome costs indicate that participation in drug court offers a cost-benefit to the Indiana taxpayer due to a reduction in subsequent re-arrests and associated incarceration and victimizations.

Over a 2-year period, the MCDTC cost outcomes were \$364 per participant compared to \$7,404 per offender that did not participate in drug court resulting a cost savings of **\$7,040 per participant**. When this per participant savings is multiplied by the 200 offenders who have enrolled in the drug court program since implementation, the total current program cost savings (for outcomes over 24-month period from program entry) comes to **\$1,407,800**.

Costs tracked in this study were those incurred by taxpayers. Other less tangible but important savings not factored into this study include an increase in the number of drug-free babies born, a decrease in health care expenses, and drug court participants working and paying taxes. As the existence of the Program continues, the savings generated by drug court participants due to decreased substance use and decreased criminal activity can be expected to continue to accrue, repaying investment in the program and beyond. Taken altogether the findings of this evaluation provide strong evidence that the MCDTC is both beneficial to participants and beneficial to the Indiana taxpayers.



REFERENCES

- Bureau of Justice Assistance Drug Court Clearinghouse Project, Justice Programs Office, School of Public Affairs, American University (2006). *Summary of drug court activity by state and county*. Retrieved November 8, 2006, from http://spa.american.edu/justice/publications/us_drugcourts.pdf
- Carey, S. M., & Finigan, M. W. (2003). A detailed cost analysis in a mature drug court setting: Cost-benefit evaluation of the Multnomah County Drug Court. *Journal of Contemporary Criminal Justice*, 20(3), 292-338.
- Carey, S. M., Finigan, M. W., Waller, M. S., Lucas, L., & Crumpton, D. (2005). *California drug courts: A methodology for determining costs and avoided costs, Phase II: Testing the methodology, final report.* Submitted to the California Administrative Office of the Courts, November 2004. Submitted to the USDOJ Bureau of Justice Assistance in May 2005.
- Cooper, C. (2000). 2000 drug court survey report: Program operations, services and participant perspectives. Retrieved from http://spa.american.edu/justice/pubcats.php?subnumber=50; http://spa.american.edu/justice/publications/execsum.pdf
- Crumpton, D., Brekhus, J., Weller, J. M., & Finigan, M. W. (2004). *Cost analysis of Anne Arundel County, Maryland Drug Treatment Court.* Report to the State of Maryland Judiciary, Administrative Office of the Courts and Baltimore Substance Abuse Systems, Inc.
- Crumpton, D., Brekhus, J., Weller, J. M., & Finigan, M. W. (2004). *Cost analysis of Baltimore City, Maryland Drug Treatment Court.* Report to the State of Maryland Judiciary, Administrative Office of the Courts and Baltimore Substance Abuse Systems, Inc.
- Finigan, M. W. (1996). Societal Outcomes and Cost Savings of Drug and Alcohol Treatment in the State of Oregon. Portland, OR: NPC Research.
- Finigan, M. W., Carey, S. M., & Cox, A. (2006). *The Impact of a Mature Drug Court over 10 Years of Operation: Recidivism and Costs*. Submitted to the U. S. Department of Justice, National Institute of Justice, December 2006. NIJ Contract 2005M073.
- Government Accountability Office (2005). Adult drug courts: Evidence indicates recidivism reductions and mixed results for other outcomes.

 Retrieved 2006 from http://www.gao.gov/new.items/d05219.pdf
- Longshore, D. L., Turner, S., Wenzel, S. L., Morral, A. R., Harrell, A., McBride, D., Deschenes, E., & Iguchi, M. Y. (2001). Drug courts: A conceptual framework. *Journal of Drug Issues*, *31*(1), Winter 2001, 7-26.
- National Association of Drug Court Professional Drug Court Standards Committee (1997). Defining drug courts: The key components. U.S. Department of Justice, Office of Justice Programs, Drug Court Programs Office.

APPENDIX A: PARTICIPANT FEEDBACK FROM FOCUS GROUP AND INTERVIEWS

Monroe County Drug Treatment Court Focus Group Summary

As described in the process section of this report, two focus group interviews were conducted in July 2006, the first group with four active drug court participants, representing the different program (color) levels, and two graduates of the drug court. The other group consisted of two participants (a male and female) who did not complete the drug court program.

The main topics discussed during these interviews included what the participants liked about the drug court program, what they disliked, general feelings about the program (including program staff), the program's effect on personal relationships, employment and education related issues/support, advice they would give someone considering drug court, incentives for doing well, and recommendations for the program.

What they liked

Active participants/graduates:

- The structure of the program.
- There's more therapy involved at first; kind of a testing ground for each participant, to see how accountable you can be during that first stage [before they slack off a bit].
- Having to go to court every Wednesday kept me on track. Every week, if you weren't doing what you were supposed to be doing, the judge was right there to tell you that "you need to do this; you need to focus on this; take care of this..."
- The intense addictions treatment is an important part of the program.
- It's nice to see the system working for you.
- You're given a chance to make something of yourself. That makes it a great thing.
- When you're up there [at the bench], you're actually having a conversation, and not just telling your side of the story. You're getting a chance to prove yourself.
- Facing outwards [while talking with the judge] includes everybody; it feels like you're all in it together.
- On a few occasions there have been things that I didn't want brought up in court, so I would either tell my case worker or the judge beforehand. It's never been a problem and I appreciated that.
- They don't BS. They tell you directly, "Hey, this is what you have to do." They're also there for you any time you need them.

Participants not completing the program:

- [Gaining] knowledge about addiction [e.g., why you use and continue to use], which you get from the groups, IOP, and AA/NA.
- I think that drug court was a stepping stone to my sobriety.
- If I didn't have drug court and went, instead, straight to jail, I would have gone back to using when I got out. [In DC] I learned a lot; to keep myself in check and not get too comfortable [with being clean].
- DC introduced me to AA [didn't have that before the program] and I am still a part of that group. That's an important support.

What they did not like

Active participants/graduates:

- Regarding outside therapy, I know it's a struggle for some people to be totally open, because there's a fear that what they say may come back to our case workers and judge [and there will be a sanction levied].
- The intrusive part of drug court for me was when they asked, "What are you doing with the rest of your time?" I felt that it wasn't a fair question, because I was doing everything that they asked me to do. The rest of my time is my time. When you're on other types of probation, they're not all up in your business.
- Transportation challenges are probably the toughest thing for participants to deal with in the drug court program.
- The program requirements made it hard to find a job and keep a job that pays well.
- Therapy costs (are a challenge).
- Drug Screen costs add up and become a stressor.
- The UA schedule is not flexible at all in the beginning [which is a challenge for participants with jobs].
- Going to the color system [in the beginning] freaked us all out. Also, no longer being able to do nightly reporting, and not being able to call after 10 pm [when we could call before], was a difficult adjustment.

Participants not completing the program:

- It's somewhat intense and overwhelming.
- If you don't have a license, you have to figure out a way to get to everything.
- I would have benefited from one-on-one counseling [through the private provider], not groups, because I'm not one to talk in front of a bunch of people.
- Some of the sanctions are too much; like the jail sanctions. I understand that you have to be responsible for your actions, but I think they can find other, more productive ways [to provide consequences] rather than sending the person to jail, which is overcrowded and nasty.
- I think that, if they [program staff] would have given me a little bit of credit for talking to them, and not tried to change everything, but instead let me figure out what I needed to do (sure, maybe with a little help...).
- It almost felt like you signed your life away when you joined DC. We don't have any control; we do what they want us to do.

General feedback regarding the program (including DC staff)

Active participants/graduates:

- The judge can be tough, if you make him tough on you. If not, he's a great guy.
- To see the judge up there, encouraging us [where some of us have had past experiences with him sentencing us], is definitely a different experience. Now you see him up there caring about you, minus the black robe.
- To have him break down at a graduation when we've lost a past participant to an overdose, you can't not sit there and say, "He doesn't care about me." He's so passionate about it, even the hard core guys I've seen go up to the bench get won over.
- [Regarding treatment provider services] They've worked with me one-on-one, as well as in groups, to help with not only addictions but also life's problems [addressing the stress of

- dealing with life on life's terms; stressors that we're not used to dealing with because of the addiction].
- I think it's important to note that all of us come into DC with different past experience/problems.
- They [the drug court program staff] recruit most of their participants. They came to the jail and told me about the DC program, and sold me on it.
- My (private) attorney told me that I would never make it through the program (prior to signing up for the program). He said the risks were too high.
- At first I was a bit leery about it [didn't really trust drug court staff], but after I got my feet wet and got a few slaps on the wrist, I saw the benefit of the DC program.
- I still get nervous before going into court. I've been clean for over a year and I still lose sleep the night before court.
- The quality of the staff [is important]...My case worker was just amazing-as far and support and being able to be honest-because there's a big fear when you come in about telling the truth; like, if you tell the truth, you're going to get into trouble.
- You're not allowed to say "Try."
- [Prior to program entry] they told me several times, "This is much worse than probation."
- They'll stay in touch and every now and then they'll ask you to come to a graduation to support others.
- I'll tell you, if [program requirements] don't break a person down in 6 months [i.e., trying to figure out how to make it money-wise, along with the other pressures], then you're going to make it in the program.
- Even the staff members who are indirectly involved with you come up to you and say, "Hey, you're doing a good job; keep up the good work." They know about you from the team meeting and they're very supportive. The team comes together for you.

Participants not completing the program:

- [Regarding DC program rules] They were very clear. I knew that if I kept using, I would be terminated from the program.
- Let me put it this way: they always gave me enough rope to hang myself.

Employment and education related issues/support

Active participants/graduates:

- There really wasn't anything that was helpful in the area of employment assistance. I found a job on my own.
- The majority of people [in the drug court program) don't work full-time; they work part-time jobs because there's not enough full-time employment to go around in this town.
- I had 3 or 4 interviews where someone said, "Yeah, if you weren't in DC, we'd love to give you a job. Come back when you're done."
- I got fired from a job because I'm in the drug court program.
- You could ask anyone on staff about getting a GED [and where to go], but there's no one who specifically works with participants on that.
- They'll help you out with getting set up-with Ivy Tech or a particular high school- to complete your GED.

Drug court's effect on personal relationships

Active participants/graduates:

- While you're in this program, you're getting to know a lot of people and on a more personal basis than you would in any other courtroom, ever. You know almost everything about everyone in the program. It's hard to watch people that you know screw up.
- You bond [with family members and friends] better.
- You're a better person when you're straight. Being sober makes you are aware of the responsibility of taking care of your responsibilities...and being there for those people.
- [Drug court] makes you see what you've been missing all these years with regard to your family. I'm closer to my family now; it's a good feeling knowing that I'm mentally with them.
- My family is happy that I'm starting to take care of myself. Drug court took the power of choice away from me and, through staying sober and the therapy I've undergone [through the private provider]. I've gotten that power back [control over my life] ten-fold.

Incentives for doing well in the program

Active participants/graduates:

- The environment we come from is not the most trusting or caring environment. You've got to sell us on something. Just saying that you're going to get better from your addiction doesn't do it for a lot of people. So, the dropping of the charge definitely helps.
- Once you're in the program and you see how it positively affects your life, then it's not just about your charges getting dropped; it's about making your life better.

What advice would you give someone considering DC?

Active participants/graduates:

- I'd tell them that to realize it's going to be tough and you're going to have to work at it; and you may have a lot of problems when you first come in, but you won't have as many when you go out.
- If you take the time to work on yourself as a person while in this program, when you get out you're going to be 100% better. Those who don't work on themselves end up relapsing.

Participants not completing the program:

• I'd first ask them if they're ready to change [specifically, quit using].

Recommendations for the program

Active participants/graduates:

- Different programs work for different people and I believe that you should be able to have the choice [regarding treatment options]. Some people don't need as intensive a group, and some people don't want to be around certain other people either. If you're going into a DC program here in Monroe County, chances are you've had experiences with most [treatment providers] in the past. So, you should be able to make an informed decision [prior to starting treatment].
- It would be good if [the drug court program] offered a day and night UA time.

- I think that the DC should have an employment type center here. People need help with getting their resumes together, working to get into school, etc. So, they need someone on staff who can help drug court participants with employment.
- It would be good if there was a sliding scale for other costs [besides counseling].
- I would like to see a DC alumni group.

Participants not completing the program:

- I think that the drug court program needs to be more of an individual based thing. Certain people need more structure.
- I think that a licensed therapist should meet one-on-one with people, in order to do a thorough mental health/needs assessment [prior to joining DC], then pass that assessment on to the judge and program coordinator, just so they know what they're dealing with.
- What would have helped me was if they would have matched me a bit better with my primary counselor. I think that I should have been matched with a male, since it was hard to talk with my female counselor [even though I liked her].

APPENDIX B: MCDTC ELIGIBILITY (INCLUSION AND EXCLUSION) CRITERIA

The offenses that are eligible for inclusion in MCDTC are as follows:

- 1. Possession of a Controlled Substance, Class C Felony
- 2. Possession of a Controlled Substance, Class D Felony
- 3. Possession of Cocaine or Narcotic Drug, Class C Felony
- 4. Possession of Cocaine or Narcotic Drug, Class D Felony
- 5. Possession of Marijuana, Class D Felony
- 6. Possession of Paraphernalia, Class D Felony
- 7. Visiting or Maintaining a Common Nuisance, Class D Felony
- 8. Operating a Vehicle While Intoxicated, Class A Misdemeanor or D Felony
- 9. Theft, receiving stolen property, Class D Felony
- 10. (Attempting to) or Obtaining a Controlled Substance by Fraud or Deceit, Class D Felony
- 11. Forgery, Class C Felony
- 12. Burglary, Class C Felony
- 13. Prostitution, Class D Felony
- 14. Currently on probation in County

The offenses that are excluded from participation in MCDTC are as follows:

- 1. Illegal Drug Lab; Possession of Drug Precursors, Class C or D Felony
- 2. Illegal Drug Lab; Sale of Drug Precursors, D Felony
- 3. Evidence of significant dealing in instant offense or prior arrests, Class A Misdemeanor or A, B, C, or D Felony
- 4. Prior convictions for dealing in substances
- 5. Any "crime of violence: as defined by IC 35-50-1-2:
- 6. Felony Murder (not categorized)
- 7. Attempted Murder
- 8. Voluntary manslaughter, Class A or B Felony
- 9. Involuntary manslaughter, Class A Misdemeanor or D or C Felony
- 10. Reckless homicide, Class C Felony
- 11. Aggravated battery, Class A or B Misdemeanor or D or C Felony
- 12. Kidnapping, Class A Felony
- 13. Rape, Class A or B Felony
- 14. Criminal deviate conduct, Class A or B Felony
- 15. Child molest, Class A, B or C Felony
- 16. Sexual misconduct with a minor, Class A or B Felony
- 17. Robbery, Class A or B Felony
- 18. Causing death with a motor vehicle, Class B or C Felony
- 19. History of firearm violence, Class A Misdemeanor or D Felony
- 20. Prior charges filed for criminal recklessness, Class A or B Misdemeanor or D or C Felony
- 21. Open warrants
- 22. Currently on probation out of County
- 23. Currently on parole out of County
- 24. Prior charges filed for domestic violence related offenses, Class A Misdemeanor or D Felony
- 25. Prior convictions for felony battery offenses, Class A, B, C or D Felony
- 26. Criminal Gang Activity, Class D Felony
- 27. Criminal Gang Intimidation, Class C Felony
- 28. Charges Pending out of county and/or other Pending charges otherwise excluded Pr program criteria

INCENTIVES AND CONSEQUENCES

Revised March 27, 2006

INCENTIVES

The following incentives will be used for the positive progress of the participant throughout the program. Upon the participants successful completion of treatment, a six month term of negative screens, regular attendance to all appointments (treatment/court/UDS/case manager), the return of their children to the household, the obtainment of a GED, or higher education completion, and the procurement of gainful / suitable employment

Welcome to Drug Court

- Applause
- Tag membership on the board

30 days sober

- Released from Curfew
- Applause

60-90 days sober

- Applause
- Handshake
- Verbal praise
- · Voucher to skip Day Reporting for one day (must be planned in advance)

120-180 days sober/negative screens

- · Moved off of Day Reporting and to weekly hearings (red)
- Movement of tag
- Applause
- One free UDS (test stick)

8-9 months sober

- Moved to bi-weekly hearings (yellow)
- Movement of tag
- Applause

1 year sober

...

- Moved to monthly hearings (green) and Phase II
- Presentation of completion of Phase I certificate
- Movement of tag
- Applause
- Allowed to travel out of county/state overnight

18 months sober

- · Moved to bi-monthly hearing (blue)
- Movement of tag
- Applause

Maintained sobriety

- Applause
- Verbal praise
- Handshake from the Judge
- Moved off of curfew/enhanced curfew

Positive change in attitude

- Applause
- Verbal praise
- Handshake from the Judge
- · Coffee/spending time with a Team member
- Taken off of enhanced curfew

Birth of a drug free baby

- Applause
- Verbal praise
- · Handshake from the Judge

Continued positive progress

- Applause
- Verbal praise
- Handshake from the Judge
- Moved off of curfew
- Coffee/spending time with a Team member
- · Reduction in required Court appearances through a voucher system

Obtaining a valid driver's license

- Applause
- Verbal praise
- Handshake from the Judge

Obtained employment/GED/Diploma

- Applause/verbal praise
- Handshake from the Judge
- Spending time with a Team member

Return of children to the home

- Applause
- Verbal praise
- Handshake from the Judge and other Team members

Successful completion/graduation of treatment

- Applause
- Verbal praise
- Moved off of curfew
- Moved off of Day Reporting

Graduation from Drug Court

- · Gathering with family, friends, and fellow participants upon program completion
- Applause
- · Presentation of Commencement certificate
- Dismissal of charges
- Movement to the Alumni Board

CONSEQUENCES

Defendant is late to Day Reporting, but notifies staff:

- 1st incident Defendant to complete one (1) day of Road Crew.
- 2nd incident Defendant to complete two days in jail.
- 3rd incident Two weeks Job Release.
- 4th incident Jail and Drug Court Team Review.

Missed Day Reporting:

Warrant and Drug Court Team Discussion.

Missed Appointments:

- 1st incident-Defendant to spend a day observing all Court proceedings (Jury box).
- 2^{nd} incident-Defendant to complete one (1) day of Road Crew. 3^{rd} incident-Two days Road Crew.
- 4th incident-Weekend in jail.
- 5th incident-Drug Court Team review.

Missed Treatment:

- 1st incident-Defendant to complete one (1) day of road crew.
- 2nd incident-Drug Court Team Review-may require one night in the Monroe County
- 3rd incident-Drug Court Team Review-one (1) week in the Monroe County Jail or two (2) weeks of home detention.

Missed Urine Screen:

- 1st incident-observe Court room proceedings (jury box.).
- 2nd incident-one (2) days of Road Crew.
- 3rd incident-14 days Day Reporting / Treatment Review
- 4th incident-Drug Court Team Review / Treatment Review

Dilute Urine Screens:

- 1st incident Verbal Warning

- 2nd incident -Two days in Monroe County Jail 3rd incident-Two weeks Job Release 4th incident-Jail and Drug Court Team Review.

4

Tampering / Adulterating Urine Screen:

- If honest and informs staff before being caught-Team Review with possible Termination from program.
- If caught by staffBAutomatic termination from program.

Use/Substances:

1st incident:

- Defendant is honest/takes ownership of the use/violation/takes ownership of the use/violation-Review treatment.
- Defendant is dishonest/does not take ownership or has active use Warrant issued and Judicial Review and Discretion

2nd incident:

- Defendant is honest/takes ownership of the use violation-Day Reporting and curfew with a schedule to be turned into Case Manager.
- Defendant is dishonest/ does not take ownership of the use/violation-14 days in the Monroc County Jail (Job Release eligible) / Treatment Review.

3rd incident:

- Defendant is honest/takes ownership of the use/violation Two Weeks Job Release / 30 days House Arrest / Treatment Review.
- Defendant is dishonest/ does not take ownership of the use/violation-Monroe County Jail (indefinite) TEAM review.

Missed Sanctions:

- 1st incident-Double up the existing sanction.
- 2nd incident -Doubled sanction / Curfew with schedule to Case Manager / Treatment Review.
- 3rd incident-Monroe County Jail / Team Review/ completion of doubled sanctions

Missed Payments:

- 1st Incident-verbal reprimand.
- 2nd incident-Completion of Ability to Pay worksheet with Case Manager / Revised Pay Plan / Budget Class.
- 3rd incident-Home visit / Ability to Pay worksheet / Wage Assignment
- 4th incident-Drug Court Team Discussion / Review

Missed Court Hearings:

WARRANT-Drug Court Team Discussion.

Dishonesty (general/repeated)

Drug Court Team Review and Discussion.

New Offense-Felony:

Drug Court Team discussion / Warrant / Possible termination from the program.

New Offense-Misdemeanor:

- Non-substance related offense: Drug Court Team review and discussion.
- Substance related offense: Warrant / Drug Court Team review and discussion.

Curfew Violation:

- 1st incident-Curfew adjustment or curfew extended
- 2nd incident-Home Detention
- 3rd incident-Two weeks Job Release
- 4th incidentBWarrant / Team Review

Failure to notify of change in address/employment:

- 1st incident- Verbal Warning
 2nd incident- Two days in Monroe County Jail
 3rd incident-Drug Court Team Review

Driving While Suspended:

- 1st incident- Two days in Monroe County Jail
- 2nd incident- Team Review

Driving While Habitual Traffic Offender:

- 1st incident- Two weeks Job Release Program
- 2nd incident- Team Review

APPENDIX D: EXAMPLES OF REWARDS AND SANCTIONS USED BY OTHER DRUG COURTS

Drug Court Rewards and Sanctions (Ideas and Examples)

□ Scholarships to local schools.

The purpose of rewards and sanctions in drug court programs is to help shape participant behavior in the direction of drug court goals. That is, to help guide offenders away from drug use and criminal activity and toward positive behaviors, including following through on program requirements. Sanctions will assist drug court participants in what *not* to do, while rewards will help participants learn they should do. Rewards teach that it can be a pleasant experience to follow through on program requirements and in turn, to follow through on positive life activities. It is important to incorporate both rewards and sanctions, as sanctions will only demonstrate to participants what behaviors are inappropriate but will not teach participants which behaviors are appropriate.

Below are some examples of rewards and sanctions that have been used successfully in drug courts across the United States.

Reward	<u>ds</u>
No cost or low cost rewards	
	Applause and words of encouragement from drug court judge and staff
	Have judge come off the bench and shake participant's hand.
	A "Quick List." Participants who are doing well get called first during court sessions and are allowed to leave when done.
	A white board or magnetic board posted during drug court sessions where participants can put their names when they are doing well. There can be a board for each phase so when participants move from one phase to the next, they can move their names up a phase during the court session.
	Decrease frequency of program requirements as appropriate – fewer self-help (AA/NA) groups, less frequent court hearings, less frequent drug tests.
	Lottery or fishbowl drawing. Participants who are doing well have their names put in the lottery. The names of these participants are read out in court (as acknowledgement of success) and then the participant whose name is drawn receives a tangible reward (candy, tickets to movies or other appropriate events, etc.)
	Small tangible rewards such as bite size candies.
	Key chains, or other longer lasting tangible rewards to use as acknowledgements when participants move up in phase.
Higher cost (generally tangible) rewards	
	Fruit (for staff that would like to model healthy diet!)
	Candy bars
	Bus tickets when participants are doing well
	Gift certificates for local stores.

Sanctions

□ "Showing the judge's back." During a court appearance, the judge turns around in his or her chair to show his/her back to the participants. The participant must stand there waiting for the judge to finish their interaction. (This appears to be a very minor sanction but can be very effective!) "Sit sanctions." Participants are required to come to drug court hearings (on top of their own required hearings) to observe. Or participants are required to sit in regular court for drug offenders and observe how offenders are treated outside of drug court. ☐ Writing. Participants are required to write papers or paragraphs appropriate to their noncompliant behavior and problem solve on how they can avoid the non-compliant behavior in the future. ☐ Increasing frequency of drug court appearances, treatment sessions or self-help groups, (for example, 30 AA/NA meetings in 30 days or 90 AA/NA meetings in 90 days). • One day or more in jail. (Be careful, this is an expensive sanction and is not always the most effective!) □ "Impose/suspend" sentence. The judge can tell a participant who has been non-compliant that he or she will receive a certain amount of time in jail (or some other sanction) if they do not comply with the program requirements and/or satisfy any additional requirements the staff requests by the next court session. If the participant does not comply by the next session, the judge imposes the sentence. If the participant does comply by the next session, the sentence is "suspended" and held over until the next court session, at which time, if the participant continues to do well, the sentence will continue to be suspended. If the participant is noncompliant at any time, the sentence is immediately imposed. ☐ Demotion to previous phases. ☐ Community service. The best use of community service is to have an array of community service options available. If participants can fit their skills to the type of service they are providing and if they can see the positive results of their work, they will have the opportunity to learn a positive lesson on what it can mean to give back to their communities. Examples of community service that other drug courts have used are: helping to build houses for the homeless (e.g., Habitat for Humanity), delivering meals to hungry families, fixing bikes or other recycled items for charities, planting flowers or other plants, cleaning and painting in community recreation areas and parks. Cleaning up in a neighborhood where the participant had caused harm or damage in the past can be particularly meaningful to the participants.

APPENDIX E: GLOSSARY OF DRUG COURT TERMS

The definitions listed below are for the purposes of this study and are not necessarily the definitions used by the specific court described in this report.

Active: The drug court participant is currently attending drug court sessions and treatment (and has not already completed/graduated or been terminated). This includes those who are on bench warrant for failure to appear if they have not been officially terminated from the program.

Actual Expenditures: Taken from a county or agency's budget report, actual expenditures are a line in the budget that lists a particular agency's total budget spending for a previous year. The "actual" refers to the actual amount that the agency spent (not just the estimated or budgeted amount set aside).

Arrest: An arrest of an offender (drug court participant or comparison group member) by local law enforcement such as a sheriff or police officer. Each arrest has an associated cost, which goes into the investment and outcome costs. For arrest, typically a city police department serves as the activity/cost model.

Benefits: The portion of an employee's pay that is not direct salary paid to the employee. Benefits include health or other medical insurance, retirement, dental, vision, disability insurance, etc. Benefits can be obtained as either a dollar amount (per hour, month, or year) or as a percentage of the salary (for example, 33% of the hourly rate).

Booking Episode: After each arrest, an offender is booked into the law enforcement's system. Each booking episode has an associated cost, which goes into the outcome costs. Bookings are most frequently performed by sheriff's departments, but can also be performed by correction divisions, detention departments, etc. as is customary for the local circumstance.

Cohort: A cohort consists of all eligible offenders who entered a drug court program during a defined time period, regardless of their graduation status. If they opted-in but did not attend any drug court activities, they have not used any program resources and therefore are excluded from the cost evaluation. The comparison group also forms a cohort.

Drug Court Session: A drug court session is when drug court participants make their court appearance in front of the judge. Multiple participants attend each drug court session, but an individual's drug court session time is only the time that the individual spends in front of the judge (from the time their name is called until the time they are excused). For the drug court team members, the drug court session includes the entire amount of time they spend in court discussing the participants.

Drug of Choice: The specific drug that the drug court participant or comparison group individual reports as their preferred drug (and/or the drug that the participant has the most severe addiction issues with). Most drug court databases have primary drug of choice as a data field. Some comparison groups' databases also provide drug of choice or this information may be available in probation records.

Graduated: The drug court participant successfully completed all requirements of the drug court program and is no longer subject to the requirements or supervision of drug court. Some comparison groups also participate in treatment programs, such as DAPS in Vanderburgh County. These individuals will also have a graduation status.

Graduation Rate: The program graduation (completion) rate is the percentage of participants who graduated the program (graduates/total number in drug court).

Group Treatment Session: A treatment session with multiple clients and one or more counselors/therapists. This is one of the transactions for which a cost was found. Group treatment sessions

commonly last an hour or more and can cover a broad range of topics (parenting skills, anger management, processing, drug education, etc.). Alcoholics Anonymous/Narcotics Anonymous (AA/NA) sessions ARE NOT considered group treatment sessions.

Individual Treatment Session: A treatment session with one counselor/therapist and one client. This is one of the transactions for which a cost was found. Individual treatment sessions usually last about an hour and can cover a broad range of topics including mental health treatment.

Jail (as a) Sanction: Penalty consisting of jail time imposed by a judge on an offender for a violation of a court rule. In drug court, a jail sanction consists of time spent in jail by a participant in response to a violation of a drug court rule (such as testing positive for drug use, failure to attend court or treatment, etc.).

Jail Time Served: The number of days a drug court participant spent in jail after the date of drug court entry up to the current date. This includes time spent in jail while the offender was participating in drug court.

Overhead Rate (Cost): The indirect costs associated with the county's oversight and support of a particular agency (facilities management, county counsel costs, auditor costs, utilities, treasury/tax costs, internal audits, building or equipment depreciation, etc.). It is usually given as a percentage of direct costs. To get the overhead rate percentage, divide those costs that are considered overhead costs by the direct costs (salary and benefit costs).

Some city agencies such as police departments would not be listed in the county's Cost Allocation Plan, and the county would not have any oversight and support costs for such city agencies. In these cases, the city's costs to support and oversee the agency should be used. If there is no city Cost Allocation Plan, the city agency will sometimes have a combined support and overhead rate, which they may call their indirect overhead rate. The financial officer may know if this rate includes support rate items (the indirect costs associated with agency operations—the agency's management and support staff costs, IT, human resources, supplies and services, etc.).

Prison: The number of days that an offender served in prison. The Indiana Department of Corrections (IDOC) provided the number of days served and the specific prison for the DOC sentences.

Probation: Probation time served (the number of days spent on Probation) after the drug court exit date up to the present date. In the case of Probation only, we use the exit date instead of the entry date because the Probation agency costs for drug court are counted in other drug court program specific calculations.

Probation Annual Caseload: The number of cases that the entire adult probation department has in 1 year, including case-bank and other low supervision cases. As the annual caseload will go into an equation to determine the cost of probation per person per day, the caseload you ask for should be for the whole adult probation department, not just for drug court cases.

ProsLink: For 90 of 92 Indiana counties, a database containing arrests in which charges were filed with the courts regardless of outcome. ProsLink is administered by the Indiana Prosecuting Attorney's Council

Proxy: An estimate used in place of more detailed or specific data when the detailed data is not available or is too difficult (or time intensive) to collect.

Re-arrest: Each instance of arrest from the time the participant entered drug court up to the current date. This includes arrests that occur while the participant is still in drug court or the comparison group program. For this IJC project, re-arrests were defined as arrests that lead to court cases.

Recidivism: Re-arrests that led to new court cases for misdemeanor or felony arrests. In Indiana, felony cases were identified primarily in ProsLink (used with grateful permission from the Indiana Prosecuting Attorneys' Council). Misdemeanor cases were identified in CourtView (Vanderburgh County) and DoxPop (Monroe County).

Residential Treatment: Treatment in which the client lives 24 hours a day at a treatment facility while receiving drug and/or alcohol (or mental health) treatment services.

Retention Rate: the program retention rate is the percentage of individuals who have either graduated or are still active out of the total number who have entered the program active + graduates/total enrolled in drug court).

Session: One distinct instance of a certain transaction or activity, such as a group treatment session, an individual treatment session, or a drug court session. A session may include only one drug court participant (such as an individual treatment session), or it could include several participants (such as a group treatment session or drug court session).

Subsequent Court Cases: New court cases that arise from an incident (such as an arrest) that occurred after the drug court entry date. Each court case will have a separate court case number. Subsequent court cases are only those cases that occur after the participant entered drug court up to the current date. This includes new court cases that occur while the participant is still in drug court.

Support Rate (Cost): The indirect costs associated with agency operations, usually given as a percentage of direct costs. The rate includes an agency's management and support staff costs, IT (information technology), human resources, supplies and services, etc. Generally, this is nearly every agency cost except for the direct salary and benefit costs. To calculate the support rate percentage, divide those costs that are considered support costs by the direct costs (salary and benefit costs).

Terminated: The drug court participant was officially removed from participation. For purposes of analyses, this category includes those participants that withdrew or were removed from the program during a "window" or "probationary" period (usually the first 2 weeks of a program) as long as the participant had at least one treatment session or one drug court session.

Withdrawn: Drug court participants who chose to leave the program before completion/graduation and were therefore officially removed from drug court participation. This includes those who withdrew during the early "window" or "decision" period, as long as they participated in at least one treatment or one drug court session.