Program Evaluation of the Monroe County (Bloomington), Indiana Drug Court

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Executive Summary

The findings from this program evaluation of the Monroe County (Bloomington), Indiana drug court suggest the drug court is more effective than the comparison group at reducing criminal recidivism rates for nonviolent arrestees with substance use disorders. Only 32% of drug court participants recidivated, whereas the recidivism rate for the comparison group was 57%. Additionally, drug court participants that recidivated had a longer time leading up to their arrest than recidivists from the comparison group (646 days versus 305 days). Participants from the drug court sample were more likely to recidivate if they were terminated from the program, women, and unemployed at the time deemed eligible for the program. Next, 54% of participants graduated from drug court and 46% were terminated. Participants were more likely to graduate drug court if they identified themselves as employed/student/disable/retired at the time deemed eligible for the program, did not identify heroin/other opiates as a drug of choice, and did not have a violation within the first 30 days of the program. Last, it is important to note that the Monroe County drug court program is following key components of the drug court model. For example, from 1/1/2008 to 12/31/2013, the drug court gave 10,459 incentives compared to 1,568 sanctions. Additionally, during the same time frame, participants from the drug court sample spent 1,324 days in jail, whereas participants from the comparison group were in jail for 3,091 days. The drug court also served 24 pregnant women. All the babies were reported born drug free. Overall, the findings suggest this drug court is a valuable asset to Monroe County, benefiting both the public and individuals with substance use disorders.

Program Evaluation of the Monroe County (Bloomington), Indiana Drug Court

The goal of this program evaluation of the Monroe County (Bloomington), Indiana drug court was to answer three research questions. First, what is the graduation rate for the drug court program and who is most likely to graduate from the program? Second, which population, drug court participants or those that were eligible for drug court but chose not to do the program, has a lower recidivism rate? Third, for the drug court sample, who is most likely to recidivate? To answer these research questions, data were collected from the electronic charts of drug court and the comparison group participants. The drug court sample included all participants (n = 193) who graduated or were terminated from the program between 1/1/2008 and 12/31/2013. The comparison group included all participants that were deemed eligible for drug court between 1/1/2008 and 12/31/2013 but chose not to enroll in the program (n = 166). Data were collected on the variables noted in Table 1.

Table 1
Description of Variables for the Drug Court Sample

Variable	**Coding**
Gender	Female Male
Age	Age at the time deemed eligible for drug court
Ethnicity	Other races and ethnicities White
Education	Did not have high school diploma/equivalent at the time deemed eligible for drug court Had a high school diploma/equivalent at the time deemed eligible for drug court
Employment	Unemployed at the time deemed eligible for drug court Employed/student/disabled/retired at the time deemed eligible for drug court
Married	Not married at the time deemed eligible for drug court Married at the time deemed eligible for drug court
Eligibility to admission	Total number days from eligibility to admission into drug court
Admission to treatment	Did not start substance abuse treatment before admission into drug court Started substance abuse treatment before admission into drug court
Positive drug screen	Total number of positive drug screens while in drug court (urine, saliva, and PBT)
Primary drug of choice	Heroin / Other Opiates All other drug of choice
Violation within the first 30 days	Had a violation within the first 30 days after admission to drug court Did not have a violation within the first 30 days after admission to drug court

Outcome	Terminated from drug court Graduated drug court
Recidivism	Recidivated Did not recidivate

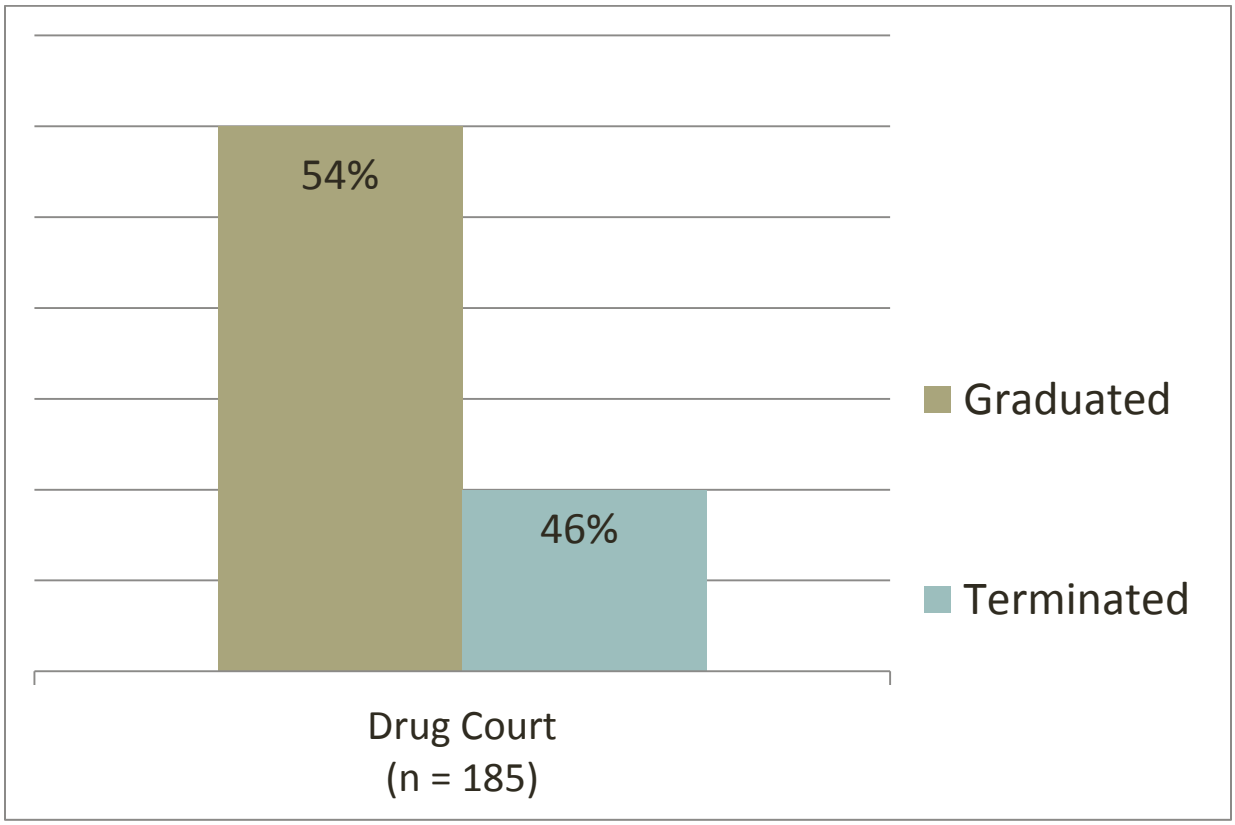
Note: Recidivism data were collected on both samples, drug court and comparison group, and recidivism was defined as any new arrest/citation/summons in Monroe County up to five years following the time of admission into (drug court sample) or opting out of (comparison group) drug court.

What is the graduation rate for the drug court program and who is most likely to graduate?

As noted in Figure 1, 54% (n = 99) of the drug court participants graduated from the program and 46% (n = 86) were terminated. This finding is similarly represented in other Indiana drug courts. An evaluation of the St. Joseph County (South Bend), Indiana drug court, for example, found that 55% of their participants graduated the program and 45% were terminated (Gallagher, 2013). To assess who is most likely to graduate drug court, the variables of Gender, Age, Ethnicity, Education, Employment, Married, Eligibility to Admission, Admission to Treatment, Positive Drug Screen, Primary Drug of Choice, and Violation within the First 30 Days were compared with the variable of Outcome (terminated from drug court/graduated from drug court). When this analysis was completed, three variables reached statistical significance. First, drug court participants that identified themselves as employed/student/disabled/retired at the time deemed eligible for drug court were more likely to graduate than participants that reported being unemployed at the time deemed eligible for drug court ($\chi^2 = 5.87$, $p < 0.05$). Participants that reported being employed/student/disabled/retired graduated the program at 61%, but those that identified themselves as unemployed only graduated at 43%. Second, drug court participants that identified drugs of choice other than

heroin/other opiates were more likely to graduate than those that identified heroin/other opiates as a drug of choice ($\chi^2 = 7.75$, $p < 0.01$). Participants that reported drugs of choice other than heroin/other opiates graduated the program at 58%, whereas the graduation rate for participants that identified heroin/other opiates as a drug of choice was only 28%. Third, drug court participants that did not have a violation within the first 30 days of admission into the program were more likely to graduate than those that had a violation within this time frame ($\chi^2 = 3.16$, $p < 0.10$). Participants that did not have a violation within the first 30 days of admission into drug court graduated at 53% and the graduation rate for those that had a violation within the first 30 days of the program was only 39%.

Figure 1
Graduation Rate for the Monroe County (Bloomington), Indiana Drug Court

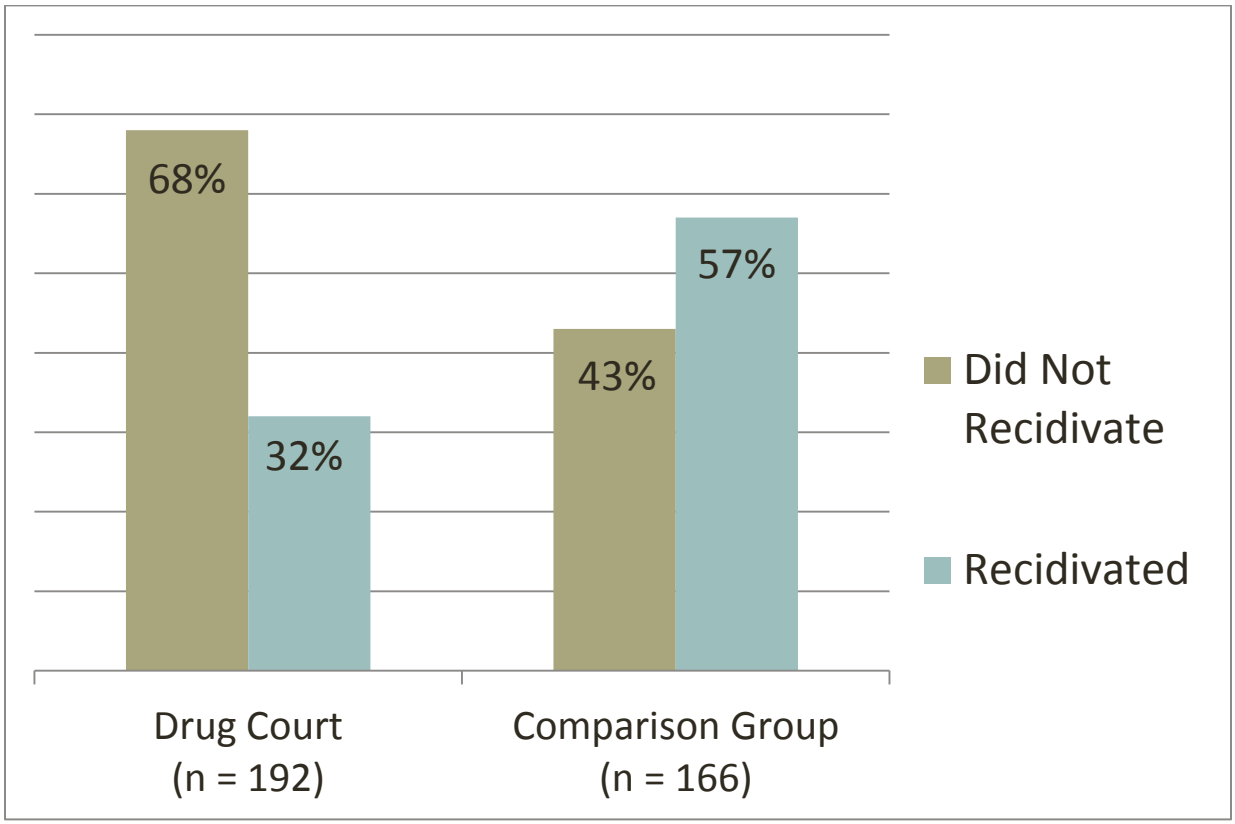


Note: There was missing data on 8 drug court participants.

Which population, drug court participants or the comparison group, has a lower recidivism rate?

There was a statistically significant difference in recidivism patterns among the drug court and comparison group ($\chi^2 = 22.49$, $p < 0.01$), meaning the difference in recidivism patterns was not due to chance, but perhaps actual change with drug court participants resulting in them being less likely to recidivate than the comparison group. As noted in Figure 2, the majority of drug court participants did not recidivate. Specifically, 68% (n = 130) of drug court participants did not recidivate and only 32% (n = 62) did recidivate. Conversely, the majority of participants from the comparison group did recidivate. Specifically, only 43% (n = 71) of the comparison group did not recidivate, whereas 57% (n = 95) were rearrested during the follow-up period. Furthermore, drug court participants that recidivated had a longer time to their arrest than recidivist from the comparison group (646 days versus 305 days).

Figure 2
Comparative Recidivism Rates for Drug Court and Comparison Group



Note: For the drug court sample, there was missing data on 1 participant.

For the drug court sample, who is most likely to recidivate?

To assess which drug court participant were most likely to recidivate, the variables of Gender, Age, Ethnicity, Education, Employment, Married, Eligibility to Admission, Admission to Treatment, Positive Drug Screen, Primary Drug of Choice, Violation within the First 30 Days, and Outcome were compared with the variable of Recidivism (recidivated / did not recidivate). When this analysis was completed, three variables reached statistical significance. First, women were more likely than men to recidivate ($\chi^2 = 5.23$, $p < 0.05$). The recidivism rate for women was 43%, whereas only 27% of male participants recidivated. Second, participants that reported being unemployed at the time deemed eligibly for drug court were more likely to recidivate than

those identified themselves as employed/student/disabled/retired ($\chi^2 = 3.19$, $p < 0.10$). Those that reported being unemployed recidivated at 39%, while those that reported being employed/student/disabled/retired recidivated at only 27%. Third, participants that were terminated from drug court were more likely to recidivate than those that graduated ($\chi^2 = 11.04$, $p < 0.01$). Those that were terminated from drug court recidivated at 42%, but graduates only recidivated at 19%.

Fidelity to the drug court model and additional benefits of the program

This section highlights additional findings related to the benefits of having a drug court in Monroe County (Bloomington), Indiana and the program's fidelity to the drug court model.

- From 1/1/2008 to 12/31/2013, the drug court served 24 pregnant women and all of the babies were born drug free.
- From 1/1/2008 to 12/31/2013, 10,459 incentives were given to drug court participants, compared to 1,568 sanctions. The three most common incentives were a voucher for a free drug screen/fish bowl ticket (n = 7,807), applause/verbal praise/handshake (n = 1,041), and move to next phase (n = 597). The three most common sanctions given were jail time/job release (n = 406), road crew (n = 400), and verbal warning (n = 167).
- From 1/1/2008 to 12/31/2013, the drug court sample spent only 1,324 days in jail, whereas the comparison group was in jail for 3,091 days.
- From 1/1/2008 to 12/31/2013, 33,916 urine drug screens were given to drug court participants and less than 2% (n = 547) were positive for illicit drugs or alcohol; however, participants from the comparison group tested positive for illicit drugs or alcohol at a rate of approximately 25%.

Recommendations

The following recommendations are intended to enhance the already effective drug court program of Monroe County (Bloomington), Indiana. First, participants that were employed, a student, on disability, or retried at the time deemed eligible for drug court were more likely to graduate the program and not recidivate within the follow-up period. This suggests employment is an important aspect of the drug court model. To enhance employment opportunities for participants, it is recommended that the drug court team invite local employers to attend drug court staff meetings to become familiar with the program, which in turn, may increase employers' interest in hiring drug court participants. Employers may be more likely to hire an individual with a felony arrest on his/her record if they know he/she is in a program that provides accountability, structure, and has demonstrated success at reducing drug use and criminal recidivism.

Women were more likely to recidivate than men. A possible explanation for this is that women were more likely than men to be unemployed at the time deemed eligible for drug court ($\chi^2 = 10.54$, $p < 0.01$); 60% of women and 35% of men were unemployed. Perhaps women may be more likely than men to stay at home and take care of children or other family responsibilities; however, this study was not able to collect those data. Employment continues to emerge as a strong factor that influences drug court outcomes. It is recommended the drug court focus its efforts on helping women seeking employment find a job and support them in overcoming the challenges of securing a job. From the time of admission into the program, it is recommended that case managers talk with women about employment opportunities, as securing and maintaining a job may decrease recidivism rates for this population.

Next, participants that identified heroin or other opiates as a drug of choice and those that had a violation within the first 30 days of admission were less likely to graduate. This is a concern because graduating the program is a strong predictor of not recidivating. First, the treatment of opiate use disorders requires specialized treatment interventions. However, recent evidence has suggested that substance abuse counselors are not always providing evidence-based interventions (Gallagher, 2013). To ensure all drug court participants are receiving the highest quality of treatment, it is recommended that key stakeholders of the Monroe County (Bloomington), Indiana drug court visit counseling agencies to ensure that they are using evidence-based interventions in the treatment of substance use disorders. Additionally, the National Association of Drug Court Professionals (NADCP, 2011) supports the use of medication assisted treatment (MAT) for opiate use disorders, such as the use of Suboxone and methadone. The NADCP recommends drug courts do not implement policies preventing all participants from receiving MAT. Rather, it suggests participants be referred to receive individualized treatment from physicians who can medically treat opiate use disorders when there is a clinical need to do so. The use of MAT is an evidence-based method that may improve graduation rates for participants with opiate use disorders. If a decision is made not to use MAT for a particular participant, it is important the judge provide a strong rationale for that ruling. Based on findings from this program evaluation, it is recommended the Monroe County (Bloomington), Indiana drug court reconsider its current policy preventing all participants from receiving MAT, as it is inconsistent with the NADCP position on the issue and it prevents some participants from receiving individualized treatment.

Last, those that had a violation within the first 30 days of admission into drug court were less likely to graduate. This seems to be consistent with pervious research (Gallagher, 2013) that

found the first 30 days of drug court to be a critical time frame that noticeably impacts outcomes. Reducing the number of violations during this time frame may improve outcomes, and a recommended way to do this is to increase the frequency of interventions, such as drug screens, case management sessions, counseling sessions, or meetings with the drug court judge. After compliance within the first 30 days, these interventions can be reduced. In summary, inviting employers to join the drug court team, helping female participants maintain employment, assuring that substance abuse counselors are utilizing evidence-based treatments, developing policies that allow medication assisted treatment (MAT) for opiate use disorders, and increasing interventions during the first 30 days of the program are recommended to improve graduation rates and decrease recidivism rates for participants of the Monroe County (Bloomington), Indiana drug court.

References

Gallagher, J. R. (2013). *Program evaluation of the St. Joseph County (South Bend), Indiana drug court*. South Bend, Indiana: Indiana University South Bend, School of Social Work.

- (For a copy of the St. Joseph County, Indiana evaluation, please email the author at johngall@iupui.edu)

National Association of Drug Court Professionals. (2011). *The availability of medically assisted treatment (MAT) for addiction in drug courts.* Retrieved from http://www.nadcp.org/learn/positions-policy-statements-and-resolutions/board-resolutions