

Development and Implementation of Drug Court Systems

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PREFACE

Drug courts started out as single diversionary programs aimed at the less serious criminal offender involved in drug use. Over the past ten years, practitioners have modified and extended drug court programs to include post-plea drug offenders, those charged with criminal offenses based on a drug abuse problem (but not a drug charge itself), multiple DUI offenders, juveniles, and adults charged in the family drug court with drug related child neglect offenses.

This expansion in drug courts is based on the continued success and good will that existing drug court programs have produced across the nation. Programs like the San Bernardino, CA and Las Vegas, NV drug court programs expanded from as little as one hundred offenders to over 1,000 participants in a period of four years. Other jurisdictions like Denver, CO, Minneapolis, MN and the San Diego Juvenile and Family Drug Court, CA, have reorganized, reshaped and redesigned their process all at once to deal with drug using offenders through a drug court system.

The potential to expand drug courts into an exciting new area, that of re-entry drug courts, is extraordinary. In our communities, drug offenders sentenced to substantial periods in local jails are being monitored and involved in the drug court process while still in custody, and re-enter the community through the drug courts comprehensive judicial monitoring, supervision, drug testing and rehabilitation programs.

Although less prevalent, states like Nevada, Oklahoma, Florida, and Missouri, are piloting programs that will provide re-entry drug court as a means to supervise, support and ultimately reintegrate drug involved state prison inmates into their communities.

The process of developing and expanding drug court systems is still going on, and well it should. For as drug courts continue to prove themselves to be the most effective means to control both the criminality and drug usage of the drug involved offender, the argument to develop drug court systems for all drug using offenders living in our communities becomes ever more clear and inescapable.

DEVELOPMENT AND IMPLEMENTATION OF DRUG COURT SYSTEMS: INTRODUCTION

The Need for Drug Court Systems

In communities throughout the United States, drug courts are dramatically changing the way in which the criminal justice system deals with drug-using offenders. Since the first programs opened a decade ago, more than 140,000 drug-using offenders—who previously would have received relatively little or no jail sentences and minimal supervision—have entered comprehensive programs that include frequent drug testing, supervision, treatment, judicial monitoring, and court-mandated sanctions. More than 71 percent of these individuals have either successfully completed such a program or remain active participants in one.¹

Drug courts have also generated new levels of program coordination within the criminal justice system, created partnerships with community organizations, fostered collaboration between governmental agencies, inspired judicial leadership, forged innovative linkages with law enforcement, and earned the commitment and dedication of program staff. As a result of the unprecedented success of this approach, over 600 drug courts have been implemented or are in the planning process.

However notable these achievements may be, the impact of drug courts to date pales in comparison to the scope of the problem. Nationwide, 80 percent of all offenders in the criminal justice system—about 1.4 million individuals—are substance abusers,² and two-thirds of the 3 million probationers living in our communities under court supervision are involved in alcohol or drugs.³ Despite the overwhelming prevalence of substance abuse, only about 3 percent of drug-using offenders participate in drug court programs. Clearly, drug courts must reach a broader population if they are to have a substantial impact on our communities.

When drug courts were initially established, they were designed to deal primarily with less serious offenders through diversionary programs. By 1997, however, most drug courts had established probation-based and post-plea-based programs for offenders with more serious criminal histories, and drug histories that often extend back at least 15 years.⁴

There is no question that violent or predatory offenders and major drug dealers must continue to be sent directly to prison while others will spend substantial periods in local jails (in either case, they will be returning to the community in need of comprehensive controls and services). Yet these are precisely the cases for which a drug court program would be a more appropriate and effective mechanism to protect the community while helping individuals reclaim their lives, once released.

Following a comprehensive review of research, evaluations, and literature on drug courts, the National Center on Addiction and Substance Abuse (CASA) at Columbia University concluded that:

Drug courts have been more successful than other forms of community supervision in closely supervising drug offenders in the community, placing and retaining drug offenders in treatment programs, providing treatment and related services to offenders who have not received such services in the past, generating actual and practical cost savings, and substantially reducing drug use and recidivism while offenders are in the program.⁵

Clearly, there is no justification for limiting drug court programs to the least serious offender when drug courts provide the most comprehensive supervision for drug-using offenders who are living in the community, while also reducing the rate at which they return to drug use and criminal behavior.

Drug court systems offer an integrated, systematic approach to dealing with a broad range of drug-using offenders. The basic components of a drug court system are already operating in the communities across the country that have launched drug court programs in the past ten years. By augmenting existing programs, these communities can create comprehensive drug court systems that can deal with a greatly expanded population base—and ultimately, all drug-using offenders. In time,

drug court systems can serve as the foundation of an effective, jurisdiction-wide mechanism for reducing drug use and crime throughout the community.

To accomplish those goals, however, communities need a vision of what a drug court system is, an understanding of how it differs from a traditional drug court program, and the necessary resources—both financial and institutional—to support the transition to a systems approach.

DEFINING DRUG COURT SYSTEMS: MISSION STATEMENT AND KEY COMPONENTS

In March 1999, drug court professionals from six jurisdictions in the United States: Denver, CO, Minneapolis, MN, Tampa, FL, San Diego, CA, Birmingham, AL and San Bernardino, CA, that have already implemented a systemic approach to drug courts participated in a focus group on the future of drug court systems.

The operational characteristics of drug court systems can best be defined by comparing drug court systems with traditional drug court programs. A useful framework for this comparison are the ten key components of drug courts developed by the National Association of Drug Court Professionals (NADCP) Drug Court Standards Committee, with the support of the Drug Courts Program Office, Office of Justice Programs, U.S. Department of Justice.⁶

These key components describe the best practices, designs, and operations of drug courts, and have been established by the Drug Court Standards Committee as benchmarks for performance.

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

Drug court systems differ from traditional drug court programs in several ways. First, they offer the potential for many different levels and modalities of treatments. Second, because drug court systems deal with a wider range of offenders, the degree of jail or prison involvement and in-custody treatment may vary, depending on the nature of the offense and the degree of substance abuse. Finally, electronic integration of treatment services and justice system case processing is essential in order to manage the number of cases that are handled by drug court systems.

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

In drug court systems and drug court programs alike, the emphasis is on using a team approach to negotiate win-win solutions for all parties. However, because drug court systems deal with more serious offenses with greater consequences, it is more likely that counsel will take stronger positions in court. There also tend to be more legal proceedings in open court, because there is less time to staff cases in advance.

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

In drug court systems, the number of participants is significantly greater than in a traditional drug court program. In some systems, eligibility is not an issue because all offenders are required to participate. Drug court systems stress early intervention due to the more serious nature of the cases they handle. Once an offender is identified as a drug court participant, case information follows the individual through the system. The greater number of cases makes it essential to have more sophisticated information management techniques and classification systems for different levels of offenses and drug abuse.

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

Both drug court programs and drug court systems provide access to a wide array of treatment and rehabilitation services. However, drug court systems often need additional resources in order to address a broader array of problems. Because they offer a wider range of treatment options, drug court systems may be better able to address the underlying causes of addiction.

The large number of participants in a drug court system has multiple impacts. Drug court systems need more spaces in treatment programs, and they run the risk of over-using existing resources. Because of the greater volume of cases, drug court systems can leverage resources to reduce the cost of treatment per client while treating more people effectively. Investments in juvenile and family systems have a significant payback, both in terms of reducing the costs of foster care or juvenile detention and in reuniting families.

Larger systems have greater visibility and impact with government and other groups that control resources, and can foster the development of innovative approaches to treatment. Working with larger caseloads increases the experience and expertise of drug court systems staff, and can enable them to deal more effectively with relapses. However, it can also lead to a higher staff turnover rate.

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

Drug court programs and drug court systems both use frequent alcohol and other drug testing techniques and are alike in this regard. The costs per test can be reduced in drug court systems because of greater volume, but these savings may be offset by the need to perform more tests, which commence with the participant's arrest.

Drug Court Component 6:

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

The increased number of judges needed to manage a larger number of cases can lead to greater disparity in judicial responses because there is less coordination within the system. It can also lead to pressure for uniform guidelines for sanctions and can reduce the flexibility and informality for which drug courts are noted. In drug court systems that mandate the participation of all offenders, there is no end to court involvement, short of graduating from the program or being sentenced to prison.

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

Judges in drug court systems reach a larger population of offenders, but they may have less time or fewer contacts with each individual. Drug court systems need more judges and other staff, including magistrates, to reduce the risk of judicial burnout. A team system, familiar to most family and juvenile court systems, with drug court team leaders acting as master calendar judges, is a potential solution to the problem. **IMPORTANT NOTE:** (It should be remembered that no matter the number of judicial officers engaged in the system, a single judge must be responsible for, and directly involved with each participant).

Expedited cases, which are the hallmark of drug courts, should save judicial and court time throughout the system. The resources made available through these savings should be allocated directly to the drug courts.

Drug Court Component 8: Monitoring and evaluation measure the achievement of program goals and gauge effectiveness.

Quality control and review are even more important in drug court systems because of the increased number of treatment providers and the more serious nature of the cases that are handled. Consequently, more time and money need to be devoted to these activities, and information systems support is critical. Drug court systems should be monitored and evaluated by objective, third-party professionals who are experienced in conducting such research.

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

The greater number of players in drug court systems increases the need for team meetings and interdisciplinary education. Appropriate training should be provided for directors and managers of drug court systems, who are often called upon to make policy decisions. Periodic policy meetings of top agency managers are critical to effective collaboration.

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

If drug court systems are to be sustainable, there must be strong political support and additional resources, especially at the state and local level. State drug court associations can provide the needed leverage and momentum for such support, especially when systems are transitioning from dependence on federal funding.

BENEFITS OF DRUG COURT SYSTEMS

Drug court professionals from across the country identified numerous benefits to developing comprehensive drug court systems that deal with a wider range of cases and serve more clients than traditional drug court programs. One of the primary benefits cited by practitioners is that drug court systems bring collaboration and eliminate the fragmentation in how the criminal justice system deals with drug using offenders. They also provide a vehicle for judges to have a meaningful impact on a broader population of offenders. Unlike traditional drug court programs, which deal exclusively with drug offenses or rehabilitation cases, drug court systems offer a comprehensive approach to many different kinds of crime. For example, virtually all child abuse and juvenile cases have drug-related issues, and can benefit from a systems approach to address these and other problems, yet these cases would not be heard in traditional drug courts.

Drug court systems achieve an economy of scale that brings many benefits. A mature drug court system can support a greater number of providers who collectively offer more expertise and treatment modalities. They also have greater visibility and leverage on the local, state, and federal level because of their extensive client base. Consequently, drug court systems have a greater potential to attract the resources that will be required for them to be sustainable in the long run.

Another major benefit of drug court systems is that treatment and other services can be expanded to reach minority groups and at-risk populations. This is a major step toward eliminating racial and other biases within the criminal justice system, in which minorities often have less access to treatment options and are more likely to receive prison sentences.

Drug court systems create a culture of cooperation and teamwork that has an impact on other areas of the criminal justice system. Drug courts have been proven to reduce recidivism and prevent relapse, which in turn reduces jail overcrowding. The speedy disposition of cases in drug court systems can reduce or eliminate case backlogs and save judicial and court time, making resources available for other uses. By dealing with more serious offenders, drug court systems gain credibility and can more readily develop partnerships with the law enforcement community.

Finally, drug court systems are more accountable to the community for the success or failure of individual clients because of the number and range of cases they handle. Fortunately, it is easier to measure the impact of a large program in comparison to a smaller one.

CHALLENGES TO DEVELOPING DRUG COURT SYSTEMS

Moving to an expanded drug court system can cause initial confusion among institutional partners, and there may be significant resistance to change. Police, prosecutors, and others, may not understand the purpose of drug courts and may be reluctant to support a therapeutic approach for serious offenders. Traditional treatment providers and correctional systems may feel threatened by the reallocation of resources. Communities may fear that drug courts are soft on crime.

It is therefore critical to gain political support and to build credibility with all parties from the outset. This requires an ongoing process of education and dialog at the local, state, and federal level, with messages that are carefully crafted to appeal to the interests and concerns of the target audience. In some cases, this may mean emphasizing issues such as personal accountability and court supervision rather than the treatment aspects of the program. Messages aimed at community groups should focus on the fact that drug court participants would be in the community in any case and are likely to pose a greater risk if they are not in supervised treatment programs.

As a system increases in size, there is a danger that it may revert to a more traditional and impersonal mode. It can be difficult to maintain the rituals and practices that developed in smaller drug court programs, such as graduation ceremonies and family involvement.

Drug court systems must be mindful of the pressure to produce positive outcomes as they expand their services to include more challenging cases. It can be difficult to engage more serious offenders in treatment, and they may require more comprehensive treatment modalities. Moreover, they may be reluctant to participate in a drug court program that may be longer than a typical jail sentence. Drug court systems must avoid creating unrealistic expectations, and they must be prepared to remind their critics that no single institution can eliminate substance abuse and criminal behavior.

FINDING RESOURCES FOR DRUG COURT SYSTEMS

Expanding an existing drug court program to include more cases and more serious offenses, or building one from the ground up, requires significant financial resources and community support. Federal grants and other funding will only cover part of the costs and are not a long-term solution. Drug court planners must therefore focus on developing a sustainable funding stream that goes beyond initial start-up funds or one-time grants, and that can support a larger program.

To develop a viable drug court system, planners must first identify and tap community resources. It is critical to develop a long-term, systemic strategy, and to create partnerships that will generate ongoing support. Media coverage can be helpful in this process, and court leadership is essential. The ability of proactive judges to create a high profile for the drug court program should not be underestimated.

Drug courts must also become more efficient at using existing resources and identifying new sources of financial support. Every effort should be made to simplify and streamline operations in order to expedite case disposition. The resources that are made available by these improvements should then be returned to the system. Creative thinking plays a critical role in identifying new funding sources. In some jurisdictions, for example, substance abuse prevention programs are financed in part by DUI fines or a percentage of the local sales tax.

Drug court associations can provide important leverage for financial and political support at the state and national level. They can also help in drafting legislation that would create a consistent framework for drug court operations within a state or across the country.

DRUG COURT SYSTEMS IN PRACTICE: EXAMPLES FROM THE FIELD

A number of communities are leading the way in establishing successful, comprehensive drug court systems. The following discussions highlight approaches that have been taken around the country to provide drug court services to an expanded population.

Eligibility and Screening Issues

Drug court systems in various jurisdictions differ widely in terms of how they define their target population. In Denver, Colorado—which in 1994 was the first jurisdiction in the country to take a systems approach—only “pure” drug cases are assigned to the drug court, although drug testing is a condition of bond for all felony arrests. Cases that involve or include crimes such as burglary, motor vehicle theft, assault, or other offenses proceed to one of the six regular criminal courts. However, the court handles felony drug cases that encompass the full spectrum of criminal involvement, from possession of small amounts of illicit drugs by defendants with no prior felony records to large sale cases. The Denver Drug Court currently handles over 40 percent of the total felony criminal docket. Despite this case load, a recent evaluation by the Colorado Division of Criminal Justice showed that case processing time has been significantly reduced from years prior to the drug court.

A substance abuse screen is performed at the time of arrest. Offenders released on bond are subject to an immediate drug test and are tested weekly as a condition of bond until they are sentenced, or the case is dismissed. Regular drug testing continues after sentencing, as described in the following section.

The Hennepin County Drug Court in Minneapolis, Minnesota also targets all individuals arrested on felony drug charges, except for defendants who are also charged with a felony “person” crime, or those who are on felony probation at the time of the new felony drug arrest. Unlike Denver, however, the Drug Court also deals with any companion charges the individual may have. In 1998, the drug court handled 31 percent of the felony docket. Individuals undergo a chemical health assessment and drug test with immediate results within 24 hours of their arrest.

The drug court in San Bernardino County, California targets all felony and misdemeanor drug cases, including those with minor non-drug charges. However, it excludes individuals who have a prior prison record or violent background. An on-site probation officer completes assessments on individuals who have been screened by the District Attorney’s Office and found eligible for the drug court system. The probation officer reviews the defendant’s drug and/or alcohol abuse, current offense, and criminal record to confirm a non-violent history. Based on the probation officer’s assessment and discussions with defense counsel, the District Attorney’s Office submits a recommendation to the drug court judge, who has the final authority to admit the defendant into the system. There are approximately 1,200–1,500 defendants in the drug court system at any given time.

In Tampa, Florida an administrative order stipulates that all drug-related felony cases (approximately 52 percent) must be filed with the Drug Court Division of the Circuit Court. Non-drug-involved offenses can also be referred to the Drug Court Division by any of the ten other divisions. Substance abuse screening is conducted at the time of arraignment. Treatment assessment is conducted by the administrative office of the court, which has a trained staff of evaluators.

In Birmingham, Alabama, all felony offenders who are released into the community must participate in the Jefferson County Drug Court’s “Breaking the Cycle” (BTC) Program, regardless of the nature of the offense. BTC combines supervised pre-trial release with drug court-type reviews and sanctions. Offenders are required to report to Treatment Alternatives to Street Crime (TASC) within 48 hours of their release as a condition of bond. TASC case managers are responsible for conducting treatment assessments.

Case Management Approaches

Case management approaches in jurisdictions with drug court systems are as varied as the jurisdictions themselves. The following discussion highlights key features of how cases are managed in Denver, CO, Minneapolis, MN, San Bernardino, CA, Tampa, FL and Birmingham, AL.

Denver, Colorado

The Denver Drug Court operates daily, to review cases and to work with new cases filed in the court. One district court judge sentences defendants and reviews all post-sentence clients. Pre-sentence matters are handled by a magistrate. A second magistrate was added in April, 1999 to review lower risk cases and to provide additional time for the district judge to review the higher-risk cases and to hear motions.

The drug court utilizes a system of tracks and phases. The tracks correspond to the sentence status of the individual: Track 1 is a deferred judgment, Track 2 is a sentence to probation or community corrections, and Track 3 is a sentence to the Department of Corrections. Phases are distinguished by the number of drug tests the client must provide each month and how often they must report to the court for review. Phase 1 clients must submit 8-10 drug tests per month and report to drug court every 3-4 weeks, Phase 2 clients submit 4-5 drug tests per month and report to drug court every 5-6 weeks, and Phase 3 clients submit 2-3 drug tests per month and report to drug court every 6-8 weeks.

There are seven treatment levels in the system. The judge assigns clients to a treatment level at the time of sentencing, with input from the Denver Adult Probation Department, information from pre-trial drug test reports, and relevant information provided by defense counsel. Punishment and treatment are not mutually exclusive. Where a case falls along the spectrum of treatment, supervision, and punishment depends on the severity of the original offense, the defendant's criminal record, and information gained from clinical and supervision assessments.

Therapeutic tools available to the drug court range from community correction halfway houses and therapeutic communities to various outpatient settings located throughout the Denver area. A Drug Court Continuum of Care Center (CCC) helps clients find employment, develop life skills, or attend aftercare meetings while avoiding involvement with drugs, alcohol, and crime.

Clients who successfully complete all three phases graduate from the program. An internal, unscientific study conducted by the Denver Drug Court Coordinator's office found a much lower rate of recidivism among drug court graduates compared to regular probationers with similar drug offenses.

Minneapolis, Minnesota

Case management at the Hennepin County Drug Court is predicated on speedy disposition, which the court believes is a key factor in reducing recidivism. Within 24 hours of their arrest, individuals undergo a chemical health assessment and drug test with immediate results; they appear before a judge in drug court; and they are placed in inpatient or outpatient treatment, if appropriate, with transportation provided by the court. In many cases, drug court clients begin treatment the evening after their arrest.

The drug court operated with two judges for most of 1998, with a third judge added in the fourth quarter of the year. Individuals appearing in drug court are frequently granted a conditional release without bail. Conditions of release include: curfew, geographic restrictions, and participation in drug testing and treatment. Curfew compliance is checked at random by police. Clients return for a pre-trial hearing approximately one week after their preliminary appearance, with the goal of resolving the case at that time. Additional appearances may be granted to resolve legal issues, but the foremost consideration in all cases is the court's commitment to a speedy resolution. In 1998, the drug court averaged 3.1 appearances per disposition, with an average of 30 days between arrest and resolution of the case.

There are three possible dispositions for drug court cases: commitment to the state prison, placement in a diversionary program, or probation. Individuals committed to the state prison system are removed from the drug court's jurisdiction.

Probation and diversionary programs frequently include conditions such as community work service, payment of fines and/or fees, jail time, and licensed chemical dependency treatment or participation in cognitive behavioral group therapy. Individuals placed in diversionary programs are supervised by their treatment provider, who reports directly to the court. This arrangement frees up probation officers time for other cases.

Drug court clients return to court for supervision twice a month for probation cases and once a month for diversion cases during the first 90 days, and less frequently thereafter. These judicial supervision hearings enable the judge to maintain a relationship with the client, and to apply appropriate sanctions and incentives.

Monitoring and supervision services for drug court clients are provided by ten probation officers and two case management assistants, all of whom have been trained in the Moral Recognition Therapy (MRT®) model of cognitive behavioral group therapy.

Nearly half of the drug court clients receive chemical dependency treatment, primarily in outpatient programs. The court has contracts with 16 licensed treatment providers, which allows case managers to select a program that best meets the client's needs. Treatment options range from education and support to outpatient and inpatient services, with options for extended care and halfway house placements. Drug court clients also have access to acupuncture on demand, GED and adult education programs, assistance in finding affordable housing, child protection coordination, support groups, and other services to assist in rehabilitation and relapse prevention. Clients do not pay for treatment; instead, they receive a \$250 credit toward the minimum court fine of \$6,000 each time they come in.

San Bernardino County, California

Defendants who are admitted into San Bernardino County's drug court system participate in a comprehensive program of drug treatment, rehabilitation, community support, and supervision. The program includes four tracks with a variety of services and treatment settings.

The drug court program, to which the most serious offenders are referred, provides the highest level of supervision and services. Clients must attend daily treatment sessions, submit to mandatory drug testing, and appear before the judge at a weekly status hearing, where they are held accountable for compliance with the program's stringent treatment and supervision conditions. The second track is the PRIDE program, which requires clients to attend treatment sessions up to three times a week, provide random drug tests, and appear before the drug court judge on a regular basis. The third track is a Deferred Entry of Judgment agreement between the court and the defendant, which is an 18-month probationary period. During the first six months the defendant is required to show proof of participation in weekly recovery group meetings, and weekly treatment sessions. The fourth track is probation, which is conditional upon residential treatment or participation in a faith-based or other recovery group. The Probation Department provides monitoring and supervision and performs home visits to assist the drug court judge and treatment staff in assessing the client's progress.

Treatment services are operated by a private contractor, Mental Health Systems, in collaboration with the Probation Department. The one-year treatment program includes individual substance abuse counseling, drug test monitoring, educational and therapy groups, relapse prevention, and Narcotics/Alcoholics Anonymous meetings. Defendants who successfully complete the program have acquired clean/sober living skills and are prepared for reintegration into the community. Those who fail to complete the program may have their charges reinstated by the court.

The San Bernardino Drug Court also provides a "re-entry drug court function" in collaboration with a model jail-based program called "Inroads." Services provided through this program include substance abuse counseling, Alcoholics Anonymous and Narcotics Anonymous support groups, anger management, domestic violence counseling, life skills and parenting classes, basic education, literacy, and GED classes, and a variety of vocational classes. Participants who successfully complete the program receive a certificate from the judge in court and may have their jail sentences reduced before being placed in an out-of-custody drug court track.

Clients report that the drug court program is a positive experience, and they are eager to demonstrate their progress when they appear before the judge. An outcome evaluation performed in 1998 showed that 71 percent of the defendants enrolled in the drug court track completed or graduated from the program. Only 12 percent of the graduates had been rearrested.

Tampa, Florida

The drug court in Tampa also uses a system of tracks. Unlike other jurisdictions, however, the disposition of cases is determined by Florida sentencing guidelines and not by the judge. Using a score sheet developed by the state, defendants are sentenced to a diversionary program (primarily for first-time offenders), community supervision (which is automatic if the defendant qualifies for probation under sentencing guidelines), or prison. Defendants who are accepted for diversion sign a contract to participate, and their charges are dropped if they successfully complete the treatment program.

Defendants in the diversion program or community supervision are subject to frequent and random drug testing conducted by the Department of Corrections and treatment providers. The sentencing judge conducts regular case reviews to verify compliance with court orders and progress in treatment.

Birmingham, Alabama

Jefferson County's Breaking the Cycle Program (BTC) was developed by the University of Alabama as a research and demonstration project. BTC reorganized existing drug court, pretrial supervision, and TASC case management programs to promote offender abstinence and public safety by requiring all felony offenders to be drug free.

BTC stresses early intervention and requires offenders to report to TASC within 48 hours as a condition of their pretrial release. TASC case managers conduct treatment assessments, make treatment referrals, and monitor the individual's progress throughout the program. Treatment alternatives include outpatient treatment, residential treatment, detoxification programs, cognitive skills instruction, day reporting, and drug education. Referrals are also made to mental health, vocational rehabilitation, and job placement services as appropriate. Defendants pay \$20 per month for treatment and other services provided by BTC. Mandatory random drug testing is conducted throughout the duration of the program to monitor abstinence.

The expansion of the drug court system of graduated sanctions and incentives to all courts and all offenders is an essential component of BTC. Regular judicial oversight has led to the development of a number of creative sanctions and dispositions. Offenders who do not comply with program conditions receive judicial sanctions, while those who are compliant can receive early incentive-based sentencing alternatives. Defendants who successfully complete the treatment program can eliminate their conviction.

Another important component of BTC is the system-wide use of information. With the support of the National Institute of Justice and the Center for Court Innovations, the project developed a management information system to automate the assessment, offender tracking, and drug-testing functions of TASC. Authorized users at TASC, the drug court, and the Jefferson County criminal justice system can now access a system-wide database of offender compliance information in order to make informed decisions regarding pre-trial release, case tracking, and sentencing.

Preliminary results of a recent evaluation indicate that BTC's collaborative approach has been successful in implementing significant changes in the Jefferson County criminal justice process. Since its inception in September 1997, the program has served over 4,000 offenders while decreasing the time between release and intervention from 69 days to two.

Juvenile and Family Drug Court Systems

The San Diego County Juvenile Court is an example of the creative application of the drug court model to address a broader range of cases. It is perhaps the only jurisdiction in the country that has applied a systemic, comprehensive drug court approach to juvenile and family problems.

The Juvenile Court first adopted a drug court approach to expedite juvenile dependency cases. Eighty percent of the court's dependency cases involve drug abuse by one or both parents, and have drug treatment as a requirement of the reunification case plan. Traditionally, however, the availability of drug treatment was extremely limited, with waiting lists of several months. As a result, permanent placement decisions were rarely made within 18 months, as required by California law. In 1994, for example, the average length of time from initial case filing to permanent placement was 34 months. In many cases, final placement decisions could not be made because the Court was unable to provide parents with reasonable services to overcome their substance abuse problems. Children often spent years in foster care, with multiple changes of placement, further exacerbating the physical and emotional trauma they had already experienced.

To address these problems, the Court launched an innovative dependency recovery program in August 1997. The purpose of the program is to get parents in treatment as soon as possible in order to reduce the amount of time that their children spend in foster care, and to avoid permanent psychological damage to the child. To that end, the program provided for increased availability of alcohol and drug treatment, created a privately managed Substance Abuse Recovery Management System (SARMS), and implemented a Dependency Drug Court. The goal of the program is to achieve permanent placement within 12 months, as recommended by federal guidelines.

The Program targets all child abuse or neglect cases with drug-involved parents and places parents under court jurisdiction. If the social worker determines during the initial screening that drug treatment should be a component of the reunification plan, the parent is referred to SARMS and must be in treatment within 24 hours. The SARMS case manager refers the parent to treatment at the appropriate level, ranging from counseling or therapy to participation in a twelve-step program to residential treatment. Participants are drug tested once a week. SARMS monitors compliance and provides reports to the court and the social worker twice a month. A parent who fails to comply with the SARMS program may be found in contempt and sanctioned by the court. Sanctions may include up to five days in jail and/or referral to the Dependency Drug Court.

The Dependency Drug Court is a three-phase, nine-month program that was launched in September 1998. Participants are required to appear in court once a week during Phase I, once every two weeks during Phase II, and once a month during Phase III. The program combines intense court supervision, reward and praise for compliant behavior, immediate consequences for non-compliant behavior, and peer support of the other participants. If the parents successfully complete Dependency Drug Court, the likelihood of having their children returned is increased.

The adoption of a drug court model has had a dramatic impact on the outcome of dependency cases in San Diego County. As of March 1999, the SARMS program had been expanded to include all four court locations and over 500 participants, with an expected caseload of 1,200 participants by the end of 1999. The overall compliance rate in the SARMS program is 60 to 70 percent, and over 75 percent of the parents who participated in the program were reunified with their children within one year.

Based on the success of applying the drug court model to dependency cases, the court implemented a series of reforms in 1998 to improve the provision of services to juveniles in the delinquency system and to hold them accountable for their actions. These reforms were accomplished as a result of extensive collaboration between the San Diego County Board of Supervisors, the Chief Administrative Office, the Health and Human Services Agency, Juvenile Court, and the probation department. This underscores the importance of institutional collaboration in building a comprehensive drug court system and serves as a model for other communities.

The primary goals of the delinquency system reforms were: 1) to ensure that every juvenile on probation is actively supervised by a probation officer; 2) to develop an automated system that permits the exchange of information among the

Juvenile Court, the Probation Department, public schools, and local law enforcement agencies; and 3) to increase the availability of drug treatment for juveniles.

These reforms represented a dramatic change in the juvenile justice system. All juveniles placed on probation who have drug and alcohol problems are now required to attend drug treatment as a condition of their probation and are tested for drugs on a weekly basis by the treatment provider. If he or she tests positive for drugs, the treatment provider notifies the probation officer. For the first positive drug test, the probation officer has the discretion to impose a sanction. The second relapse results in up to five days in Juvenile Hall. After a third positive drug test, the juvenile is usually placed in a 21-day detoxification program, a residential treatment facility, or the drug treatment dormitory at the county's Juvenile Ranch facility. Violators may also be screened for placement in Juvenile Drug Court in lieu of custody.

The goal of the Juvenile Drug Court is to help the juvenile break his or her pattern of addiction and the negative behaviors associated with it. Its structure and operations are similar to those of the Dependency Drug Court. Intense supervision by the court, frequent drug testing, rewards and praise for compliant behavior, immediate consequences for non-compliant behavior, and peer support all help the young person remain clean and sober. Successful completion of Juvenile Drug Court may result in early termination of probation.

Regional Networks

Los Angeles County provides an example of a jurisdiction that has chosen to develop a network of individual drug courts rather than a fully integrated system. Given the size and complexity of the county—which encompasses 4,000 square miles and a population of 9.5 million people from diverse cultural backgrounds—it was felt that this approach would enable each court to better reflect the local community it served while providing an efficient mechanism to close the large gap that existed between services and needs.

The objectives of establishing a network were to share resources more efficiently among various drug courts, to establish a practical foundation upon which to institutionalize drug courts within the county's criminal justice system, and to create a larger statistical base through which to demonstrate the effectiveness of drug courts.

A small pilot drug court program was created at the Los Angeles Municipal Court to serve as a model that could be easily replicated. Nine regional drug courts were established throughout the county; two more will be added in the near future. Policies and procedures established for the pilot were disseminated to the regional courts in order to ensure that they operate according to a uniform set of standards.

The drug court program targets only those offenders who qualify for diversionary programs. Those with violent prior offenses are excluded. Eligibility and chemical assessments are conducted within 48 hours of arrest. Individuals considered eligible for the program must undergo a two-week trial period, during which they participate in daily treatment and drug testing. Individuals who successfully complete the trial period waive their rights to a speedy trial and agree to participate in a 12-month treatment program. They must be drug free to graduate from the program.

The program had between 500 and 600 graduates as of March 1999, of whom only 20 percent were rearrested for any type of offense. The county recently launched a new pilot program for sentenced offenders, and linkages are being established to the Dependency Court.

TOWARD A NATIONAL STRATEGY FOR DRUG COURT SYSTEMS

Former drug court judge and NDCI Director, Judge Jeffrey Tauber, has drafted a model statute for drug court systems across the United States. The statute proposed by Judge Tauber would include the following provisions: 8

I. Funds for Drug Testing All Arrestees and Screening of Those Determined to Have a Drug-Abuse Problem

Drug testing and immediate drug screening comprise the necessary foundation for any comprehensive drug court system. This information enables the court to make informed bail and own-recognition determinations, with appropriate conditions for continued drug testing, supervision, treatment sanctions, and judicial monitoring. Early determinations as to eligibility for different drug court tracks will accelerate the adjudication process and save court resources.

II. Funds for Drug Treatment and Rehabilitation Services in Jails and Prisons

For those receiving significant jail time before their release into the community, jail provides an important opportunity to begin the drug court process. Drug testing, education, and treatment should be provided in a separate, jail-based treatment facility for those with drug-abuse problems. Those released from custody would remain on probation status and be placed under the direct control of the drug court judge and program staff. For those who do poorly in the community phase of the drug court program, because of continued drug usage or failure to comply with other program conditions, jail sanctions offer the opportunity to work with the offender in a controlled atmosphere, thereby guaranteeing his or her undivided attention.

Those sent to prisons are in a significantly different situation from those serving jail sentences. In most states, a state prison sentence represents a substantial period of incarceration, usually measured in years. While the start-up point, length, and mode of treatment may differ depending on the circumstances, what is clear is that it is in the community's interest for the offender to be drug free and drug resistant when he or she returns to the community. To accomplish this, substantial funding is needed for proven, prison-based programs.

Upon completion of a prison sentence, the offender (whether on parole or split parole/probation status) would be treated similarly to a probationer released from jail into a drug court program. The offender would be required to complete a significant period under the control of a drug court program or a parole program based on the drug court model.

III. Funds for Expanded Supervision, Treatment, and Rehabilitation Services in the Community

The expansion of community-based services envisioned in this act, while substantial, must be viewed in perspective. Individuals who are drug-tested, supervised, and treated in the community within a comprehensive drug court system would otherwise be in one of two situations: incarcerated at a far greater cost, or ignored by the criminal justice system and allowed to continue their drug usage and criminal lifestyle in our communities.

Furthermore, initial screening and continuing evaluations should allow the program to apply the appropriate level of intervention, ranging from drug testing and education for first-time offenders to participation in rigorous treatment programs for repeat offenders or those with evidence of more serious substance abuse. This range of options would minimize resources expended. Moreover, drug courts should not require any additional resource expenditures within the criminal justice system. In fact, drug court systems should provide substantial savings to the court system, law enforcement community, and correctional establishments.

The comprehensive drug court system is an efficient, cost-effective approach for dealing with the drug-using offender. As evidenced by the drug court programs described in the previous section, cases are disposed of earlier due to immediate screening and placement in drug court tracks, which leads to commensurate reductions in judicial resources, attorneys' time,

investigative fees, and court expenses. In addition, law enforcement and corrections spend fewer resources engaged in the investigation, arrest, detention, and incarceration of drug court participants who are frequently tested and supervised.

Funds should be made available (although not necessarily under this section) for law enforcement/community policing linkages with drug court programs. Community police liaisons are proving to be among the most impressive and innovative components of drug court systems. They provide monitoring and support functions (such as delivering bench warrants or making house visits), and they deliver critical information for decision-makers regarding appropriate participant placement within a drug court system.

IV. Funds Provided Under the Act Must Be Distributed Through a Community Steering Committee

Ultimately, the comprehensive drug court system delineated here will be the responsibility of the greater community. Without community “buy-in,” commitment, and involvement in the development and implementation of the system, the program may fail when federal support is withdrawn. Requiring policy and resource decisions to be made by a community-wide steering committee will guarantee the involvement and commitment of program partners. This in turn will enable the drug court system to access existing community resources, create new linkages with community organizations, and cement itself into the community’s infrastructure.

CONCLUSION

Drug court systems have the potential to greatly expand the impact that drug courts have had on the criminal justice system in the United States. By augmenting existing drug court programs and learning from the experiences of jurisdictions that have successfully implemented a systemic approach, communities can develop comprehensive drug court systems to deal with all drug-using offenders. Components of a model drug court system would include: early drug testing and screening of arrestees, jail and prison-based treatment for those in need of incarceration, and appropriate judicial monitoring, probation supervision, drug testing, treatment, and rehabilitation services for those returned to the community under court control. Given sufficient resources and support at the local, state, and national levels, drug court systems can provide the foundation for an effective, community-based strategy to reduce drug use and crime.

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