



Drug Court Partnership

A Collaboration of

**The Judicial Council of California and The
California Department of Alcohol and Drug Programs**

Drug Court Partnership Act of 1998 Chapter 1007, Statutes 1998 Technical Report

Prepared by

**The California Department of Alcohol and Drug Programs and
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EXECUTIVE SUMMARY

Background

The first structured drug court began in Dade County, Florida in 1989. During the 1990s drug courts emerged to provide a meaningful alternative to incarceration in jail and prison for substance-abusing offenders. Subsequent drug courts developed as a result of a nationwide grassroots effort led by the courts. In California, the first drug court began in 1993 in Oakland. Currently, California has more than 146 drug courts, and 50 of the 58 counties contain at least one.¹

In a drug court, the judge heads a team effort that focuses on sobriety and accountability as primary goals. Drug courts include such elements as early identification and placement in treatment; access to a continuum of drug treatment and rehabilitative services; a non-adversarial approach; and regular and ongoing judicial monitoring. Drug courts in California have been strong partners with treatment programs since their inception. To enhance and support the drug court movement in California, the Drug Court Partnership (DCP) Act of 1998 (SB 1587 (Alpert) Chapter 1007, Statutes of 1998) established the DCP Program. There are 34 counties operating the DCP Program pursuant to this Act.

Purpose

The purpose of this report is to present the results of the DCP evaluation, in which the 34 DCP partnership counties provided aggregate data about drug court participants to the California Office of Alcohol and Drug Programs.

Characteristics of Drug Court Participants upon Entry

During the reporting period (January 2000 - September 2001) 7,082 participants entered drug courts in 34 California Counties. Participants were predominantly long-term substance abusers who had low educational achievement and high unemployment.

- Over 70% of drug court participants had used drugs for five or more years, with 40% using drugs for more than ten years, prior to entering drug court.
- One-half (52%) had a high school diploma or its equivalent, and very few (13%) had any college education.
- Sixty-two percent were unemployed.
- On average each participant had been arrested twice and had one incident of conviction and incarceration in the two years prior to entering drug court.

Rates of Arrest, Conviction, and Incarceration

Considering data limitations, findings related to arrest, conviction and incarceration suggest that positive outcomes of drug court were most evident among program graduates.

- Participants completing drug courts had lower rearrest rates in the two years following program entry, compared to those who did not complete drug courts.

¹ Administrative Office of the Courts, January, 2002.

- Participants completing drug courts also had lower rates of conviction and incarceration in the two years following program entry, compared to those who did not complete drug courts.

Participants who successfully completed drug court

A substantial number of participants (2,892) completed the program during the study period. Among those who completed the program:

- Seventy percent were employed when they completed drug court.
- Eleven percent obtained a General Education Diploma or high school diploma while involved in drug court; 8% obtained a vocational certificate; and 1% completed college.
- Twelve percent had transitioned from homelessness and gained housing.
- Twenty percent obtained driver's licenses and auto insurance.
- Twenty-eight percent retained or regained custody of their children; 7% gained child visitation rights; and 8% became current in their child-support payments.
- Thirty-one percent were reunited with their families.

Cost Avoidance and Cost Offset

The evaluation also assessed cost avoidance in terms of incarceration costs, and cost offset in terms of participants' payment of fees and fines. As reported by counties:

- A total of 425,014 jail days were avoided, with an averted cost of approximately \$26 million.
- A total of 227,894 prison days were avoided, with an averted cost of approximately \$16 million.
- Participants who completed paid almost \$1 million in fees and fines imposed by the court.

In addition to other federal, state and local funds, the DCP Program allocated \$14 million dollars to support California Drug Courts. Using county data, we estimated a cost offset and avoidance of approximately \$43 million.

BACKGROUND

History of Drug Courts

In the past two decades, US jail and prison systems have experienced unparalleled growth, with much of this growth attributable to drug-related crime. From 1980 to 1997 the number of persons incarcerated in State prisons for violent offenses doubled, the number incarcerated for nonviolent offenses tripled, and the number incarcerated for drug offenses increased almost eleven-fold (1040%).² A majority of these increases occurred during the 1990s.

Early efforts to address drug issues in court systems were undertaken between the 1950s and 1970s, when a few courts dedicated themselves to addressing drug cases. Incarceration alternatives, such as diversion programs and treatment as a condition of probation, were designed to meet the needs of the growing and more diverse offender population. However, these programs had limited supervision, varied in approach and structure, and did not seem to stem the growth in jail and prison populations.

Drug courts were a new approach and represented a significant departure from traditional court practice. Drug courts are a specially designed court calendar, the purposes of which are to achieve a reduction in recidivism and substance abuse among offenders and to increase their likelihood of successful return to the community through early, judicially supervised treatment, mandatory periodic drug testing, and use of appropriate sanctions and other continuous rehabilitation services. Drug courts transform the roles of both criminal justice practitioners and alcohol and other drugs treatment providers. The judge heads a team effort that focuses on sobriety and accountability as primary goals.³ Because the judge works to keep participants engaged in treatment, treatment providers can effectively focus on developing a therapeutic relationship with the participant. In turn, treatment providers keep the court informed of each participant's progress, so that rewards and sanctions can be provided.

The first structured drug court began in Dade County, Florida, in 1989. Several early drug courts were developed on the model of the Miami Drug Court in Dade County, and their experiences were described in *Defining Drug Courts: Key Components*.⁴ The ten key components are: early identification and placement in treatment; access to a continuum of drug treatment and rehabilitative services; a non-adversarial approach; regular and ongoing judicial monitoring and interaction with participants; defendants' increased accountability through a series of graduated sanctions and rewards; frequent mandatory drug testing; a coordinated response to participants' compliance; and a

² Beatty, P, Holman, B, and Shiraldi, V. (2000) Poor Prescription: The Costs of Imprisoning Drug Offenders in the United States. Washington D.C.: The Justice Policy Institute. Data was obtained from Justice Department's Bureau of Justice Statistics, California Department of Corrections, National Corrections Reporting Program.

³ Belenko, S. (1998). Research on drug courts: A critical review. The National Center on Addiction and Substance Abuse (CASA) at Columbia University.

⁴ Drug Courts Program Office, *supra* note 1

partnership between treatment providers, probation, law enforcement, the courts, and community-based organizations.

Subsequent drug courts emerged as a result of a judicially led nationwide grassroots effort.⁵ The movement has been supported by a federal Drug Court Programs Office (DCPO), which promulgated practice standards, in addition to dedicated professional associations such as the National Association of Drug Court Professionals (NADCP) and training institutes like the National Drug Court Institute (NDCI). There are currently over 700 drug courts operating in all 50 states, and an additional 400 are being planned.⁶ The majority of drug courts serves adults and uses the post-plea or post-adjudication approach.

The first California drug court began in 1993 in Oakland. California currently has more than 146 drug courts, and 50 of the 58 counties contain at least one.⁷ Over 30 California counties have more than one drug court; the Superior Court of Los Angeles County has 11 adult drug courts.⁸ There are approximately 91 adult drug courts, 34 juvenile drug courts, 21 dependency drug courts, and 7 family treatment drug courts.⁹ Although all drug courts are based on the original “ten key components,” courts vary in approach in terms of program length, design, use of single or multiple treatment providers, and degree of probation involvement. They also vary in the populations they serve (such as adults, juveniles, families, and the mentally ill).

Drug Court Partnership Act of 1998

Legislative Mandate

To enhance and support the drug court movement, the State of California established the DCP Program through the DCP Act of 1998 (SB 1587 (Alpert) Chapter 1007, Statutes of 1998).¹⁰

The Act states:

... the DCP shall be administered by the Department of Alcohol and Drug Programs for the purpose of demonstrating the cost-effectiveness of drug courts operating pursuant to Sections 1000 to 1000.4, inclusive, of the Penal Code, and for any defendant who has entered a plea of guilty and is on active probation. The department shall design and implement the program with the concurrence of the Judicial Council.

⁵ Belenko, S. (Summer, 1998). *Research on Drug Courts: A Critical Review*. National Drug Court Institute Review, 1(1), 1-42.

⁶ National Drug Court Institute, 2001

⁷ Administrative Office of the Courts, January, 2002.

⁸ Substance Abuse Research Consortium (SARC) presentation, Tajima, Guydish, et al 2001.

⁹ Administrative Office of the Courts, January 2002.

¹⁰ Section 11970 of the Health and Safety Code

The Act also states:

... The Department, in collaboration with the Judicial Council, shall create an evaluation design for the DCP that will assess the effectiveness of the program.

In response to these requirements, the Department of Alcohol and Drug Programs (ADP) and the Judicial Council undertook the evaluation to assess the effectiveness of the DCP Program. The first legislative report (*Interim Report on DCP Act of 1998*) was submitted March 2000. This final report discusses the program's cost effectiveness. In addition to the data directly demonstrating the effectiveness of drug courts, other types of data, such as demographics, were also collected.

Partnership Entities

Under the terms of the DCP Act, ADP and the Judicial Council have defined roles and responsibilities in the administration of drug courts. ADP, the state administrative agency for California's substance abuse treatment system, provides support, guidance, and a funding mechanism for the treatment system supporting the drug courts. The Judicial Council, as the policy making body for California's judicial system, provides administrative support, standards, and guidance for the State's drug court programs through the Administrative Office of the Courts (AOC).

ADP and the Judicial Council formed the DCP Program Executive Steering Committee (the steering committee) to advise them on the development and implementation of the program and the evaluation. The steering committee is co-chaired by representatives from the Judicial Council and ADP. Members of the steering committee are listed in Appendix A. ADP and the Judicial Council convene the steering committee as needed to discuss policy and other issues pertaining to the DCP Program. Steering committee meetings are open to the public.

Program Funding

The DCP Act contained a special appropriation of funds for 1998. In the following three fiscal years (1999-00, 2000-01, 2001-02) DCP Program funding was appropriated through the Budget Act. The DCP Act provides for annual administrative costs of up to 5% of the total appropriation.

Program Development and Implementation

Under the terms of the DCP Act, ADP and the Judicial Council worked together to:

- Establish minimum standards for use of drug court funds;
- Establish procedures for awarding grants;
- Award grants that provide funding for up to four years;
- Report to the Legislature on the program's implementation and progress through an interim report;
- Identify outcome measures to assist in determining the cost-effectiveness of the program;

- Design and implement an evaluation that would assess the effectiveness of the DCP Program; and
- Report to the Legislature on the DCP Program's effectiveness through this final report.

Grant Award Process

ADP and the Judicial Council jointly developed a request for applications (RFA) utilizing the guiding principles recommended by the steering committee. The RFA required all grantees to provide a local in-kind or cash match of 10% for each of the first and second years and a 20% match for each of the third and fourth years. An interdisciplinary team representing ADP, the Judicial Council, and an out-of-state judicial branch observer reviewed grant applications. The applications were ranked according to their ability to meet the approved criteria.

Distribution of Funds

In May 1999, ADP and the Judicial Council awarded a total of \$4 million for the first year of four-year grants to the 18 top-ranking counties. In fiscal year 1999-2000, an additional \$8 million was appropriated for the program, enabling ADP and the Judicial Council to award an additional \$4 million for the first year of four-year grants to the remaining 16 counties that applied for funding. These awards were made in July 1999. (See Appendix E for a listing of the 34 grantees)

Funds were distributed by means of a proportionate methodology that made grants to counties on the basis of their size (\$400,000 to large counties and \$125,000 to small and medium counties). The DCP Program grantees exemplify collaboration between the AOD treatment community and the criminal justice organizations. The drug court partners may include, but are not limited to the following: County AOD administrator, presiding judge, defense attorney, prosecutor, probation officer, and treatment providers. Through these grants the DCP Program was projected to serve approximately 2,755 drug court participants annually.

Once the grants were awarded to all 34 grantees, a \$300,284 balance of DCP funds from fiscal year 1999-00 remained. The steering committee determined that the terms of the DCP Act required that this remaining balance be distributed to the 34 grantees. To apply for the unexpended funds, counties were required to submit a four-year plan containing a written justification, an expenditure plan, and an identification of the county match. ADP fully allocated each year's appropriation to the 34 grantees.

METHODS

Outcome Measures

The DCP Act required the development of outcome measures, which included, but were not limited to, the following:

- The annual number of misdemeanor and felony convictions of persons participating in the program for a minimum of two years after entry into the program.
- The annual numbers of admissions to county jail and state prison of persons participating in the program for a minimum of two years after entry into the program.
- Other outcome measures identified by ADP and the Judicial Council that will assist in determining the cost-effectiveness of the program.

The Steering Committee recommended that in addition to the legislatively mandated outcome measures the following outcome measures be established:

- The drug court participant re-arrest rate at 2 years prior to entry into the drug court program.*
- The drug court participant re-arrest rate at one year after entry into the drug court program.*
- The drug court participant re-arrest rate at two years after entry into the drug court program.*

Other additional outcome measures included medical, psychiatric, employment/financial, alcohol and drug use, family and social status, and legal information. Demographic data were also collected.

The steering committee established the DCP Evaluation Workgroup to develop the data collection tool. The Roster of Members of the Workgroup is included in Appendix B. The workgroup reviewed the data elements of instruments used in various other program evaluations, including the Addiction Severity Index Lite (ASI-Lite), the Drug Evaluation Network Study (DENS), the California Treatment Outcome Project (CalTOP), and the California Alcohol and Drug Data System (CADDs), in an effort to build on other data collection efforts under way and to minimize data collection and reporting duties of drug court programs and counties. The instruments and systems are described in Appendix C.

* Not including traffic violations other than driving under the influence, reckless driving, and willful evasion of a police officer.

Evaluation Design and Data Collection Procedures

ADP and the Administrative Office of the Courts (AOC; the staff agency to the Judicial Council), in consultation with the workgroup, determined data collection methods.

The workgroup agreed on the use of aggregate data collected on a quarterly basis. The resulting quarterly reporting system was designed to collect information on all new admissions to drug courts during the quarter, all active or continuing drug court participants, and those exiting during the quarter (either through successful completion or failure to complete the drug court program). Follow-up data (arrests, convictions, and incarcerations) were reported for the first and second years after entering drug court.

The quarterly reporting form was designed to address the major outcome measures mandated in the Act, as well as additional measures recommended by the steering committee, Judicial Council, and the Workgroup. Data elements include demographics, drug-free births, and jail/prison days saved. Appendix D contains a table of data elements.

The evaluation used aggregate data and focused on analyzing the program on a state rather than individual level. The criminal justice outcomes are based on the data reported by 17 counties. Outcomes related to participants who completed drug court were based on data reported by 28 counties. These counties were selected as a cross section of all the counties that were funded. The evaluation of the DCP Program was designed to develop the most accurate determination of cost-effectiveness and other outcomes using the aggregate data collected at the county level.

Phases in Developing the Evaluation

The data collection tool was field tested for three quarters in 1999. During this time, the 34 DCP Program grantees were asked to use the reporting form. At the end of 1999, counties were asked to provide feedback and suggestions concerning their experience with the reporting form. Additional suggestions for revision were solicited from the Judicial Council and three independent consultants. Based on feedback received from these sources, the data collection tool was revised.

A number of data elements were reorganized based on the availability of data to the grantees. Questions vital to the evaluation were retained in the main reporting form. Some items related to additional accomplishments of completing participants and legal information, arrest and convictions, were organized by type of crime and were moved to a supplemental data collection tool. Data collection using the revised and final reporting form started in January 2000.

Quality Assurance

ADP undertook several steps to ensure collection of data high in quality and consistency. Technical assistance was provided to the counties, all reports received were reviewed for errors, and the counties resubmitted corrected data.

Site visits were conducted as a quality-check measure and to support the grantees in data reporting. State staff visited 21 counties to learn about local differences in drug court operation and data collection capabilities, update county profiles, and offer onsite technical assistance when needed.

Limitations

Interpretation of the arrest, conviction, and incarceration figures from the 17 counties is hampered for a number of reasons.

- Data was collected in aggregate form
- There is no actual baseline against which to compare data against many participants started drug court prior to start of the data collection
- Graduated and terminated participants are not a discrete subset of the new participants, and not all counties reported data for all quarters
- The mean values reported in criminal justice outcomes are derived from aggregate data. Therefore, the number of actual arrests per person per time is not known, so that standard deviations could not be calculated and statistical comparisons could not be performed
- Because data were collected in aggregate form it is unknown whether graduated and terminated participants may have had different criminal justice histories at baseline
- Complete criminal justice data are available for 17 counties only (not including major metropolitan areas as Los Angeles, San Francisco, San Diego, Alameda, and Santa Clara) making any generalizations and conclusions difficult.

Specifically, some research has shown that those who graduate from drug court also had less severe criminal justice history when they entered the program.¹¹

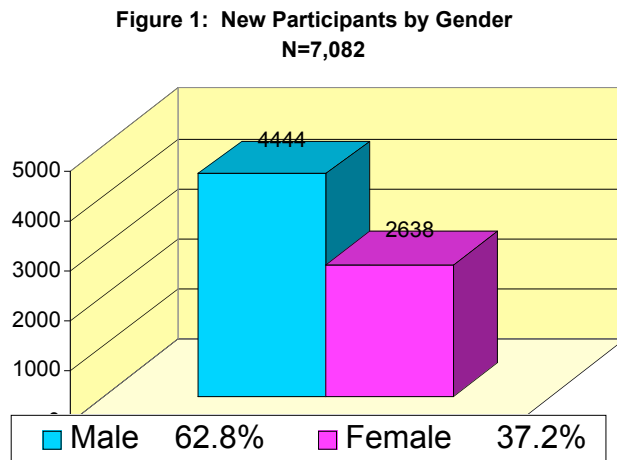
¹¹ Cosden, M., Crothers, L., & Peerson, S. *Superior Court of California, County of Ventura Drug Court: Summary Findings February 10, 1999.* University of California, Santa Barbara, Graduate School of Education.

RESULTS

DCCP evaluation data and reporting them to ADP was an enormous challenge for most of the participating counties. A number of counties could only submit partial reports. Therefore, the dataset will be reported and analyzed in different subsets. Thirty-three of 34 counties, which were granted the funds, were able to submit at least demographic/descriptive data. A subset of 28 counties submitted cost-related data, and 17 counties submitted 100% of the required data.¹² Thus, the results of this study should be interpreted with caution.

Characteristics of Participants at the Time of Admission

For the reporting period from January 1, 2000 through September 30, 2001 (7 reporting quarters), 33 reporting counties provided demographic information about new entrants into Drug Court. During this time period, data were reported to 7,082 incoming drug court participants. Not all counties reported for all quarters and quarters for which there were missing data are shown in Appendix F.



For the 7,082 new Drug Court participants, 63% were male and 37% were female (Figure 1).

¹² The 17 counties included: Contra Costa, Fresno, Humboldt, Kern, Mendocino, Merced, Nevada, Orange, Plumas, Riverside, Sacramento, San Bernardino, San Joaquin, San Louis Obispo, Santa Barbara, Sutter, and Ventura.

These drug courts served mainly participants over the age of 25 (77%). Specifically, 23% of participants were 18-24 years old, 37% were 25-35, and 40% were 36 and older (Figure 2).

Figure 2: New Participants by Age Group
N=7,082

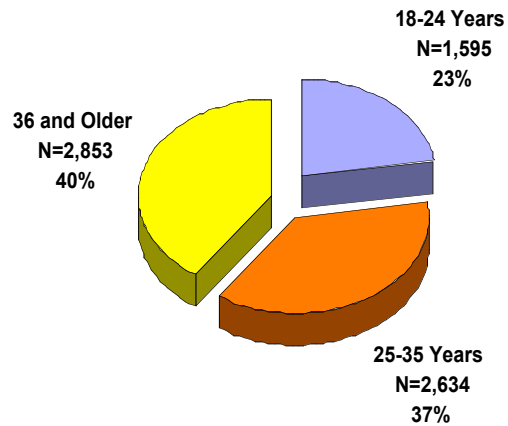
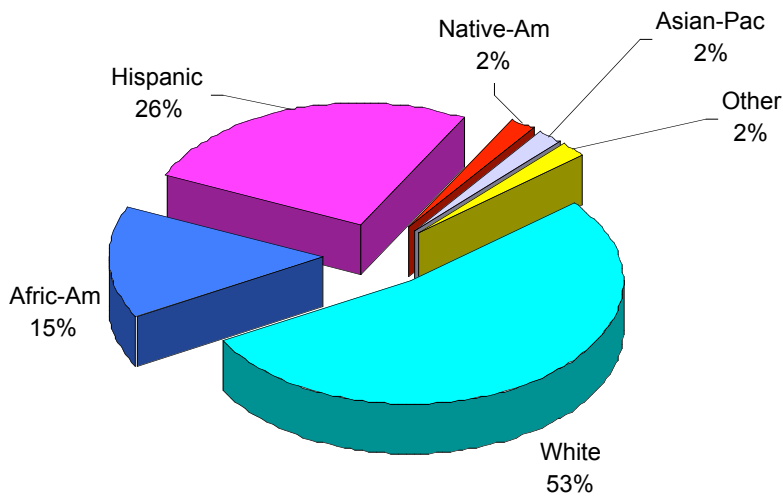


Figure 3: New Participants by Race/Ethnicity
N=7,082



Just over half of participants were white (53%), nearly a quarter (26%) were of Hispanic descent, 15% were African-American, and 2% each were Native American, Asian-Pacific Islander, and of other ethnicity.

Comparison of Drug Court Participants to Other Populations.---Gender and ethnicity for DCPD participants are shown in Table 1, compared with the same information for statewide treatment, and arrest populations. Statewide treatment data were drawn from the California Alcohol and Drug Data System (CADDSS), and is shown for all admissions and for those admissions reporting any prior arrest. Statewide arrest data were drawn from the California Department of Justice Crime and Delinquency 2000 data report (<http://ag.ca.gov/ag/index.htm>).

The DCPD participants were similar, in terms of gender and ethnicity, to the statewide treatment population reported into CADDSS, and for CADDSS participants having some history of arrest. DCPD participants were different from the population arrested for drug-related charges, and different from the California prison population. The DCPD population included larger proportions of women, and smaller proportions of Hispanic and Black participants, than did statewide arrest populations.

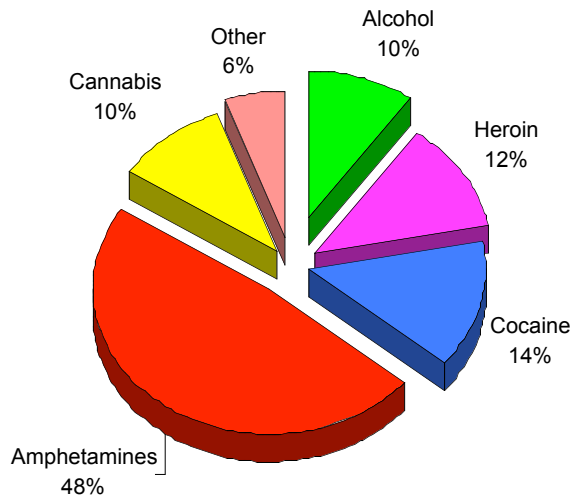
Table 1. Gender and Ethnicity of DCPD Participants and Treatment and Arrest Populations

	DCPD New Participants N=7,082	CADDSS 1/00-9/01 N=183,091	CADDSS Arrested Clients 1/00-9/01 N=86,324	Statewide Drug-related Arrests 2000 N=152,769	Statewide Drug-related Dispositions 1999 N=94,125
Race/Ethnicity:					
Caucasian	53%	49%	47%	40%	36%
Hispanic	26%	28%	29%	33%	31%
African/Am	15%	19%	19%	23%	25%
Other	6%	4%	5%	4%	3%
Unknown					5%
Gender:					
Male	63%	63%	66%	82%	79%
Female	37%	37%	34%	18%	21%

Among Drug Court participants, 82% were unmarried and the remainder were married. Over half (61.5%) were unemployed when entering Drug Court, 25% were employed full-time, and 11.4% were working part-time.

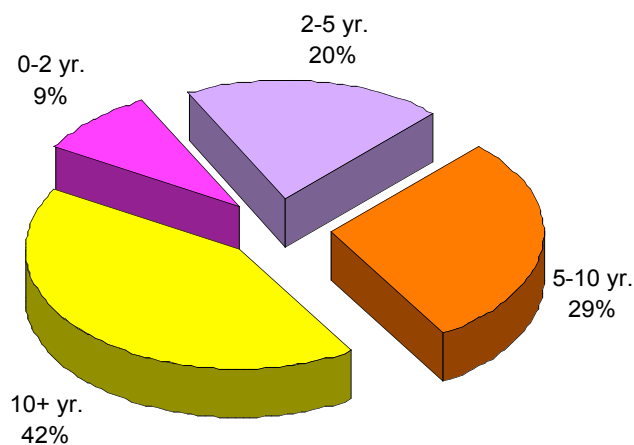
Of the 7,082 new participants, 39% had completed High school or equivalent education, 10% had attended some college, and 3% were college graduates. An additional 6% had completed specialized vocational training.

Figure 4: Type of Drug Primarily Used by New Participants
N=7,082



About half of the new participants (48%) reported amphetamines as their primary drug of abuse, 14% reported cocaine, 12% reported heroin, 10% each reported cannabis and alcohol, and 6% reported some other drug (Figure 4).

Figure 5: Length of Drug Use, New Participants
N=7,082



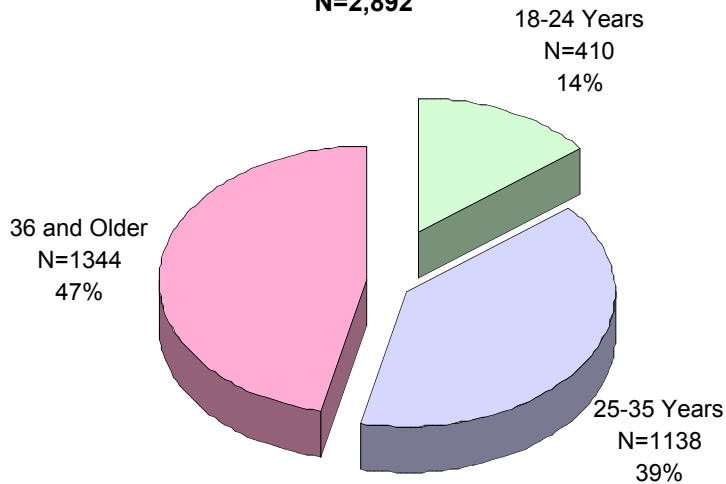
Many participants (42%) reported a history of drug use greater than 10 years, 29% reported using 5-10 years, and 29% reported using less than 5 years (Figure 5).

About one-third (32%) of participants had previously received some form of alcohol or other drug treatment (excluding detoxification). Within one year preceding their start in Drug Court, 11.7% had been hospitalized for medical treatment, and 4.2% had received mental health treatment.

Characteristics of Participants who Successfully Completed the Program

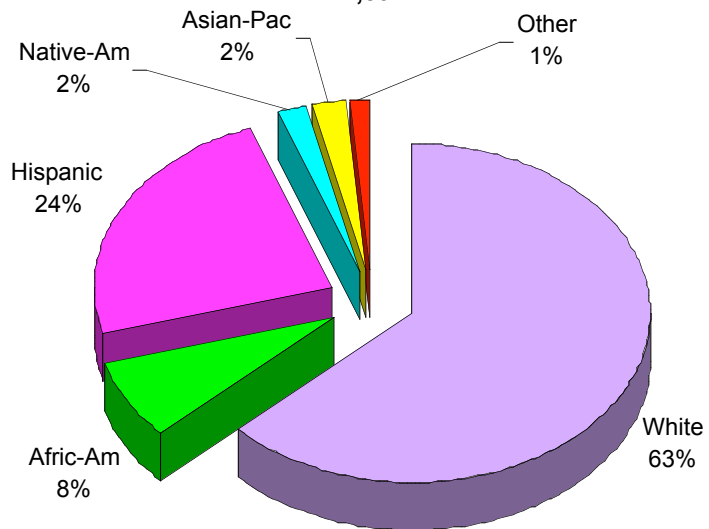
For the reporting period (January, 2000 - September 2001), 33 counties provided demographic information about Drug Court graduates. During this time period, data were reported for 2,892 graduates. While these cases graduated during the study period, many were already in Drug Court when the study began. Consequently, these 2,892 graduates are not a discrete subset of the 7,082 entrants.

**Figure 6: Graduates by Age
N=2,892**



For the 2,892 Drug Court graduates, 1,786 (62%) were male and 1106 (38%) were female. Among graduates, 14% were 18-24 years old, 39% were 25-35, and 47% were 36 and older (Figure 6).

**Figure 7: Grads by Ethnicity
N=2,892**



Nearly two-thirds of graduates (63%) were white, 24% were of Hispanic descent, 8% were African-American, and 2% each were Native American, Asian-Pacific Islander, and 1% of other ethnicity (Figure 7).

Among Drug Court graduates, nearly 59% were employed full time at the time of graduation, 11% were employed part-time, and 28% were unemployed. The high rate of employment among graduates is consistent with requirements of some Drug Courts that participants must be employed or in school in order to graduate.

The educational achievements reported for graduates while participating in Drug Court. Among graduates, 11% had obtained a GED or high school diploma, 8% had completed a vocational certificate, 7% had attended college, and less than 1% completed college.

The quarterly reporting form included several questions specific to accomplishments of Drug Court graduates. For the 2,892 graduates, 373 (12.9%) were homeless when entering the program and gained housing by the time of graduation. While in the Drug Court, 575 graduates gained a driver's license and auto insurance. Family related accomplishments for this group included retaining custody of children for 625 graduates, and gaining custody of children for 180 graduates. Counties reported that 890 graduates were reunited with their family, 196 gained family visitation rights, and 227 were current in their child support. In addition, 395,093 drug tests were performed on participants, of which 96% were negative. In terms of program fees, a total of \$1,287,162 was imposed on graduates. At the time of graduation, 1,810 graduates were current in their fees, and a total of \$951,618 had been collected against these fees.

Criminal Justice History and Outcomes

DCPP counties were asked to report aggregate number of arrests, convictions, and incarcerations of new participants for one year and two years prior to entry into the Drug Court. Participating counties were also asked to report aggregate arrests, convictions, and incarcerations for graduated and terminated participants, for one and two years after starting the Drug Court. This reporting requirement was challenging for many of the DCPP counties. By the cutoff for this report a total of 17 counties had reported detailed criminal justice information, so that mean number of arrests, convictions, and incarcerations, before and after drug court, could be calculated.

The following tables (Tables 2, 3, 4) report arrest, conviction, and incarceration data for drug court participants for the periods of one year and two years before and after admission to the drug court. These data are reported separately for new drug court participants (Table 2), those who graduated from drug court (Table 3), and those who terminated drug court participation during the reporting period (Table 4). These tables rely on data provided by the counties. A limitation, which prevents direct comparison across these tables, is that the tables do not report data for the same group of participants. The data collection procedures were not structured to collect information for new entrants to the drug court only. They were structured to collect data on any participants who were already enrolled in the drug court when DCPP funding began. Drug courts that were already operating at the time they first received DCPP funds reported data for all drug court participants who were served using DCPP funding. As a result, the people who

graduated or terminated during the observation period (Tables 3, 4) are not necessarily the same people who entered drug court during the time period (Table 2).

Table 2 reports number of arrests, convictions, and incarcerations for participants entering drug courts during the study period, in the 17 counties reporting complete criminal justice data (N=3,435). The table includes information for one and two years prior to entry into the drug court, and provides total and mean values for arrests, convictions, and incarcerations for this sample. Table 2 shows that total arrests for this sample during one year prior to drug court were 4,600, giving a mean arrest per person of 1.34. Total convictions for this sample, in one-year prior, were 2,165, giving 0.63 mean convictions per person. The information for two years prior to drug court entry, in the last line of the table, is inclusive of data for one-year prior. The total number of arrests for this sample during 2 years prior to drug court entry was 6,888 (mean = 2.01), and the total number of convictions was 3,497 (mean = 1.02). The total number of jail and prison admissions during 1 year prior was 3,313 (mean = .96), and during 2 years was 4,799 (mean = 1.4).¹³

(Table 2): New Participants’ Arrests, Convictions, and Admission to Jail and Prison (Prior Entering Drug Court)^γ

N=3435	Arrests		Convictions		Incarcerations			
	Arrests	Average	Convictions	Average	Jail	Average	Prison	Average
1 Year Prior	4600	1.34	2165	0.63	3288	0.96	25	0.01
2 Years prior	6888	2.01	3497	1.02	4746	1.38	53	0.02

Table 3 reports arrest, conviction and incarceration information for graduate participants who reached their one year (N=627) or two year (N=936) post-admission anniversary during the study period. These data are restricted to the 17 counties reporting complete criminal justice information. Total number of arrests among 627 graduates reaching their 1 year anniversary was 129, for an average of 0.21 arrests person. Total convictions in this group at 1 year were 62, for an average of 0.10 convictions per person. Total number of incarcerations in jail or prison was 96, for an average of 0.15 per person. The same information for the graduate group reaching their 2 year post-admission anniversary (N=936) can be seen below in Table 3.

¹³ Incarceration rates appear to be higher than conviction rates, due to the possibility of multiple incarcerations for the same conviction

^γ Includes the following counties: Contra Costa, Fresno, Humboldt, Kern, Mendocino, Merced, Nevada, Orange, Plumas, Riverside, Sacramento, San Bernardino, San Joaquin, San Louis Obispo, Santa Barbara, Sutter, and Ventura.

**(Table 3): Graduates' Arrests, Convictions, and Admission to Jail and Prison
(After Entering Drug Court)†**

	Arrests		Convictions		Incarcerations			
	Arrests	Average	Convictions	Average	Jail	Average	Prison	Average
1 Year after entry N= 627	129	0.21	62	0.10	93	0.15	3	0.00
2 Years after entry N= 936	289	0.31	212	0.23	216	0.23	13	0.01

Table 4 reports arrest, conviction and incarceration information for terminated participants who reached their one year (N=1,269) or two year (N=1,060) post-admission anniversary during the study period. Terminated participants are those who either left the drug court voluntarily, or were terminated from the drug court due to non-compliance or other reasons, before completing the program. These data are restricted to the 17 counties reporting complete criminal justice information. Total number of arrests among 1,269 terminated participants reaching their one-year anniversary was 1,807, for an average of 1.42 arrests person. Total convictions in this group at one-year was 1,198, for an average of .94 convictions per person. Total number of incarcerations in jail or prison was 1,495, for an average of 1.17 per person. The same information for the terminated group reaching their 2-year post-admission anniversary (N=1060) can be seen in Table 4.

**(Table 4): Terminated Participants' Arrests, Convictions, and Admission to Jail and Prison
(After Entering Drug Court)†**

	Arrests		Convictions		Incarcerations			
	Arrests	Average	Convictions	Average	Jail	Average	Prison	Average
1 Year after entry N= 1,269	1,807	1.42	1,198	0.94	1,375	1.08	120	0.09
2 Years after entry N= 1,060	1,724	1.63	1,372	1.29	1,196	1.13	106	0.10

Considering the data limitations, a review of data across the tables suggests that positive outcomes of drug court are most evident among program graduates. For example, the average arrests per person one year before entering drug court was 1.34 (Table 2), and the average arrests per person one year after entering drug court in the terminated group was 1.42 (Table 4). During one year after entering drug court, the average arrests per person among graduates was 0.21 (Table 3). This general pattern is also seen for convictions and incarcerations, where means were lower for graduates.

† Includes the following counties: Contra Costa, Fresno, Humboldt, Kern, Mendocino, Merced, Nevada, Orange, Plumas, Riverside, Sacramento, San Bernardino, San Joaquin, San Louis Obispo, Santa Barbara, Sutter, and Ventura.

Cost Avoidance and Cost-Offset of Drug Court

Participating DCP Counties were asked to report four cost measures using aggregate data. For all drug court participants, counties were asked to report number of drug-free births occurring each quarter. For drug court graduates only, counties were asked to report: a) jail days averted and local jail daily cost, b) prison days averted and, c) program fees collected. Jail and prison days averted refer to those incarceration days that would have been served had the participant not completed drug court. Thirty-three counties reported information for drug-free births, and 32 counties reported data for graduates (jail and prison days averted, and fees collected).

Averted hospital costs for drug free births were calculated for babies born to female drug court participants. The proportion of drug-free births was used to estimate averted costs associated with the drug court intervention. Counties reported a total of 138 births during the study period, of which 132 were drug-free.

Behnke et al. (1997) estimated additional hospital costs of \$3,996.00 per drug-exposed infant. Joyce et al. (1995) estimated additional hospital costs of \$7,731.00 per drug-exposed infant. To estimate averted costs that may be associated drug free births, we used the lower figure as a conservative measure. Among drug court participants, 4.3% of all births were drug exposed, and 95.7% were drug free. We used these proportions to estimate averted costs associated with the drug court intervention. If 4.3% of the drug free births (n=132) would have been born drug exposed in the absence of drug court, the averted costs would be $6 \times \$3,996 = \$23,976$. This represents a minimum estimate of averted costs associated with drug free births. To develop a maximum estimate of averted costs associated with drug free births, we took the midpoint of the difference between the observed rates of 4.3% drug exposed and 95.7% drug free. This gives an estimate that 46% of the 132 drug-free births (n=61) may have been born drug exposed in the absence of the drug court. Multiplying $61 \times \$3,996$ gives \$243,756 as a maximum estimate of averted costs associated with drug free births among drug court participants. This estimate is based only on additional hospital costs associated with longer hospital stays reported for drug-exposed infants. It does not include other health and social costs that may be associated with drug-exposed births or substance abusing parents, such as foster care placement, physical and mental healthcare, and special education.

To estimate jail costs averted, we multiplied reported jail days saved by the cost per day reported in the individual county \$34.50 in Kern County to \$110.00 in San Luis Obispo County.¹⁴ Using these calculations for 2,892 graduates, 425,014 jail days were averted for an estimated savings of \$26,449,561.

To estimate prison costs per day, we divided the annual cost per inmate (\$25,607)¹⁵ by 365, giving a daily prison cost of \$70.16. We multiplied the reported prison days saved (227,894) by cost per prison day (\$70.16) for an estimated savings of \$15, 989,043*.

¹⁴ County jail cost savings were calculated for each individual county and then totaled.

¹⁵ Cost per inmate provided California Department of Corrections

Drug court program fees collected from graduates return to the county, and represent a source of cost-offset. Counties reported that \$951,618 was collected in program fees from graduates.

Overall, participating counties reported that drug courts averted or offset 43.6 million in prison and jail costs (42.4 million), in hospital costs for drug exposed infants (\$243,000), and in collection of program fees (1 million).

During the same time, the DCCP funding supporting California drug courts was 14 million¹⁶, support from the federal Office of Justice Programs (OJP) was 5.6 million¹⁷, and support from the California Administrative Office of the Courts (AOC) was 1.5 million¹⁸.

*Approximately half of prison days saved were reported in two counties. In Santa Barbara County, persons who failed drug court were subsequently sentenced to prison based on all charges and this resulted in higher estimated prison days averted. In the second county, Shasta, participants/graduates in the program had serious felony charges which would have also resulted in prison sentences.

¹⁶ Based on projected funding for 7 quarter 1/00-9/01

¹⁷ Based on awards granted by Office of Justice Programs (OJP) from 9/00 to 8/30/01 to California Drug Courts Statewide. OJP FY2000 support was \$4.5 million, and for FY 2001 was \$2.1 million. The \$5.6 million represents the FY2000 amount plus a partial FY2001 amount corresponding to the reporting period.

¹⁸ Based on awards granted by California Administrative Office of the Courts for the year 2000 only.

CONCLUSIONS

- 48% participants who exited the program successfully completed¹⁹. This is consistent with a review of California drug court evaluation reports, which found that drug courts may be expected to graduate from 19% to 54% of participants.²⁰
- DCP participants were similar, in terms of gender and ethnicity, to the statewide treatment population, however, they differed from statewide arrest and conviction populations.
- The DCP Program served a population that has relatively low educational achievement, high unemployment, and lengthy drug abuse histories.
- The graduate population was similar to the new participant population in terms of gender, but not in terms of ethnicity.
- Gains in employment, housing and education were achieved by graduates
- For participants leaving drug court,²¹ the average number of arrests per person during 2 years after admission was lower among graduates than among those who did not complete the program. Other California evaluation studies have reported an approximate 10% reduction in arrests among drug court participants compared to non-participants, suggesting that drug courts may have smaller benefits for those who do not complete the program.²¹
- The 14 million DCP Program funds and other funds leveraged to support California drug courts was accompanied by a cost offset or avoidance of 43.6 million.
- Drug use during program participation was very low.

RECOMMENDATIONS FOR RESEARCH

- Statewide, demographic characteristics of drug court participants were similar to those of the drug treatment population, but different from those of the arrest, conviction, and incarceration populations. Further research is needed to explore whether arrest and charging practices may systematically limit drug court eligibility for some ethnic groups. Systematic data collection is needed to assess screening and eligibility practices for systematic bias.
- In this study, counties reported more detailed information for drug court entrants and graduates, but not for those terminating the program prior to graduation. Information about this termination group, such as demographic characteristics and reasons for termination, could be used to assess whether drug courts are differentially effective with some groups, and could support efforts to increase

¹⁹ This is based on participants who exited the program only, i.e. graduates and terminated participants. The number of graduated and terminated participants does not add up to the total number of new participants because some participants are still enrolled in the drug courts. In addition, the number of new participants does not include those who were already in the program at the start of data collection (January 1, 2000).

²⁰ Guydish, J., Wolfe, E., Tajima, B., & Woods, W. (2001). Drug court effectiveness: A review of California evaluation reports, 1995-1999. *Journal Psychoactive Drugs*, Volume 33(4).

²¹ This analysis refers to participants in 17 counties where complete criminal justice data were reported (n=1,945)

program effectiveness. For example, are methamphetamine users more likely than narcotics users to complete drug court programs?

- During the study period, drug courts performed 395,093 drug tests among program participants. Of these tests, 96% were negative. While drug testing is a powerful tool consistent with established drug court practices, county data reported in this study suggest that 25 tests were performed to find each positive result. Research is needed to assess what frequency of testing is most cost-effective in supporting positive drug court outcomes.
- According to a report by the California Society of Addiction Medicine, California drug courts serve only 3-5% of eligible drug-involved offenders.²² While this could suggest limited treatment availability, or limitations related to screening or case management limitations, it seems a greater number of drug-involved offenders may also gain from expanded access to drug court. California may benefit from pilot projects exploring expanded drug court eligibility to serve a broader range of drug-involved offenders.
- As reported by DCP programs, costs averted and cost offsets were greater than the sum of state and federal funds invested in drug courts. However, we did not assess the full range of costs and savings that may be associated with drug courts. Detailed analyses of costs and savings would enable more precise estimates of financial benefits of drug court programs.
- The DCP program evaluation provided time and resources for statewide aggregate data collection. The aggregate data provides a snapshot of a moving target, limiting what may be concluded from the data. Another way to assess effectiveness would be to collect individual level data, providing more detail and tracking on a smaller sample of individuals in various counties over a long-term period.

²² CSAM News Fall 2000, Vol. 27, No.2

APPENDICES:

Appendix A: Executive Steering Committee Members

EXECUTIVE STEERING COMMITTEE		
Member	Representing	Agency
Honorable Stephen Manley Co-Chair	Judicial Council	Santa Clara Superior Court
Del Sayles-Owen Co-Chair	California Department of Alcohol and Drug Programs (ADP)	ADP
Carl Sparks	Local Law Enforcement	Kern County Sheriff
Joseph Guldish	Research & Evaluation	University of California San Francisco, Institute for Health Policy Studies
Maureen Bauman	County Alcohol and Drug Programs Administrators Association of California	Placer County Health & Human Services, Adult System of Care
Rubin Lopez	California State Association of Counties (CSAC)	CSAC
Dan Carson	Legislative Analyst's Office	Legislative Analyst 's Office
<u>Ex-Officio Members</u>		
Catherine Camp	Senate Budget & Fiscal Review Subcommittee #3	California State Senate
David Panush	Assistant Fiscal Policy Advisor	California State Senate

Liaisons to the Executive Steering committee:

Nancy Taylor, Administrative Office of the Courts
 Laura S. Choate, Department of Alcohol and Drug Programs

Appendix B: DCP Program Evaluation Workgroup Members

Member	Representing	Agency
Ralph Lopez	County Alcohol and Drug Service	San Diego Alcohol and Drug Services
Wayne Sugita	County Alcohol and Drug Service	Los Angeles Alcohol and Drug Services
Cindy Biddle	County Health Services	Glenn County Health Services
Joe Gudysh	Institute for Health Policy Studies	University of California San Francisco
Monica Driggers	Judicial Council	Administrative Office of the Courts
Cathy Senderling	State Senate Budget Committee	California State Senate
Maureen Bauman	County Alcohol and Drug Services	Placer County Adult System of Care
Maureen Hernandez	County Alcohol and Drug Services	Placer County Adult System of Care
David Panush	Assistant Fiscal Policy Advisor	California State Senate
Laura Choate	Office of Drug Court Programs	California Department of Alcohol and Drug Programs
Penny Tafoya	Information Management Systems Department	California Department of Alcohol and Drug Programs
Antonia Taylor	Office of Drug Court Programs	California Department of Alcohol and Drug Programs
Samantha Cannon	Office of Applied Research and Analysis	California Department of Alcohol and Drug Programs
Susan Nisenbaum	Office of Applied Research and Analysis	California Department of Alcohol and Drug Programs
Betsy Sheldon	Office of Applied Research and Analysis	California Department of Alcohol and Drug Programs
Mahnaz Dashti	Office of Applied Research and Analysis	California Department of Alcohol and Drug Programs

Appendix C: Alcohol and Other Drugs Data Collection Instruments/Systems

1. **Addiction Severity Index (ASI Lite)** - the Addiction Severity Index (ASI) is a semi-structured instrument used in a face to face patient interview conducted by a clinician, researcher, or trained technician. It was developed by A. Thomas McLellan, Ph.D. and colleagues at the University of Pennsylvania in 1980. The ASI Lite is a shortened version of the standard Fifth Edition ASI. The ASI Lite was developed in early 1997, in response to numerous requests from the substance abuse field.
2. **California Alcohol and Drug Data System (CADDSS)** – the California Alcohol and Drug Data System (CADDSS) was developed by the Department of Alcohol and Drug Programs and implemented in July 1991. CADDSS is a centralized AOD data collection system. Data collected through CADDSS identifies the types of direct AOD services provided and describes the population receiving those services. In conjunction with state and county fiscal systems, CADDSS accounts for public funds administered by ADP used to support these services in California. National, state and local government agencies and the private sector access this information for planning, research and policy development.
3. **California Treatment Outcome Project (CalTOP)** - CalTOP is part of a national study, the Treatment Outcomes and Performance Pilot Enhancement Studies (TOPPSII), involving 19 states that will monitor the outcomes of alcohol and other drug treatments. The purpose of CalTOP is to develop and implement an outcome monitoring system for the statewide alcohol and other drug system of care and to enhance the related management information system. These systems will increase program accountability while supporting improved delivery of services to address the individual needs of clients.
4. **Drug Evaluation Network Study (DENS)** - DENS is a national electronic treatment tracking project sponsored by the White House Office of National Drug Control Policy (ONDCP). The goal of the project is to provide practical and current clinical and administrative information on patients entering into substance abuse treatment throughout the nation. Ultimately this system will include alcohol and drug treatment programs representatively sampled from all the nation’s major metropolitan areas.

Appendix D: Table of Data Elements in Quarterly Reporting Form

Participant Status	Active Drug Court Participants		Non-active Court Drug Participants	
	New	Continuing/Active	Failed to Complete	Completed
Data Elements				
Demo-graphics				
Legal History				
Alcohol and Drug Info.				
Medical Info.				
Bench Warrant				
Drug Test Info				
Drug-Free Births				
Follow-up (1 year & 2 years after admission)				
Legal/ Criminal Justice				
Formerly Homeless				
Retention <30 Days				
Jail/Prison Days Saved				
Custody/ Reunification Issues				
Child Support Payments				
Gained Driver's License, Insurance				

Appendix E: Counties Funded by DCP Program

Alameda
Butte
Contra Costa
Fresno
Glenn
Humboldt
Kern
Los Angeles
Madera
Mendocino
Merced
Napa
Nevada
Orange
Placer
Plumas
Riverside
Sacramento
San Bernardino
San Diego
San Francisco
San Joaquin
San Luis Obispo
San Mateo
Santa Barbara
Santa Clara
Santa Cruz
Shasta
Sonoma
Stanislaus
Sutter
Tuolumne
Ventura
Yolo

APPENDIX F: Tables

All Counties

Table 1
Age Group of New Participants by Race/ Ethnicity

Age group	Total	White	African-American	Hispanic	Nativ-Ame.	Asian/Pacific-Islander	Other
18-24 Y. old	1,595	775	144	562	45	34	35
25-35 Y. old	2,634	1,425	297	760	46	56	50
36 and older	2,853	1,555	609	549	41	46	53
All Ages	7,082	3,755	1,050	1,871	132	136	138

Table 2
New Participants' Marital, Education, and Employment Status

Marital Status	Number	Percent
Married	1,263	17.8
Single	5,823	82.2
Education Completed	Number	Percent
HS/GED	2,746	39.0
Vocational Certif.	446	6.3
Attended College	700	9.9
Completed College	212	3.0
Employment Status	Number	Percent
Full time	1,800	25.4
Part time	805	11.4
Unemployed	4,357	61.5

Table 3
Type and Length of Drug Use,
And Medical Treatment

Type of Drug Use	Number	Percent
Alcohol	684	9.7
Heroin	863	12.2
Cocaine	998	14.1
Amphetamines	3,393	47.9
Canabis	732	10.3
Other	393	5.5
Length of Drug Use	Number	Percent
Less than 2 years	636	9.0
2- less than 5 years.	1,344	19.0
More than 5- 10 years	1,979	27.9
11 or more years	2,890	40.8
Medical Information	Number	Percent
Hospitalized in past 12 Mo.	831	11.7
Mental TX in past 12 Mo.	297	4.2
AOD TX prior to DC program	2,282	32.2

Table 4
Drug Tests and Child Births While in the Program

Drug Tests	Number	Percent
Administered	395,093	100
Positive	17,215	4.4
Negative	377,884	95.6
Births	Number	Percent
Births	138	100
Drug-free births	132	95.7