FINAL REPORT

PROCESS EVALUATION OF THE
THIRD JUDICIAL DISTRICT ADULT DRUG COURT PROGRAMS IN
LAS CRUCES, NEW MEXICO:

For The New Mexico Administrative Office of the Courts
and the Third Judicial District Court

Prepared by the
Institute for Social Research, University of New Mexico

Paul Guerin, Ph.D.
Robert Hyde, M.A.
Lindsey Smith B.A.
Laurel Carrier J.D.

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EXECUTIVE SUMMARY

The Institute for Social Research (ISR) at the University of New Mexico was contracted by the Administrative Office of the Courts (AOC) from November 1, 1998 to October 31, 2000, to conduct a process evaluation of the Third Judicial District Adult Drug Court programs.

Specifically, the scope of work included:

- Provide a process evaluation by examining the established goals of the programs and determining how clearly these goals are defined;

- Collaborate with the drug court in designing data collection instruments that collect information that is useful for the court and evaluation. To the extent possible, ensure the court is collecting the minimum dataset information that the other courts participating in the minimum dataset collect;

- Collect all relevant and available information for all clients assessed, intaked and that receive services. This will be done in order to provide intermediate outcomes for the court. This will include determining what type of client is successful in the drug court program;

- The evaluation will design an outcome study that will be used to determine long-term outcomes to determine whether or not the drug court program is effective in reducing criminal behavior, reducing illicit substance use and increases in indicators of social stability.

Tasks completed to perform this evaluation include:

- A compilation of surveys sent to all drug courts within the Third Judicial District requesting information specific to each court. The surveys for this court were not returned. Thus, important information to document the process of the program was missing.

- A review of the existing literature regarding drug courts, which included literature that focused on studying the impact and success of drug courts.

- Creation and implementation of an automated record keeping system for the drug court programs. The database created in Microsoft Access is being used by drug court staff. Initially, data was not entered accurately and consistently into this database, but with the addition of a data entry clerk and the implementation of Microsoft Access training, this problem has been corrected.

- The collection of client information, within the various time frames of each court, that is maintained by the drug court staff and which was data entered into the client management database.
• The collection of client misdemeanor and felony criminal arrest histories from each court. This information was not made available to us in time for this report.

• A qualitative analysis of observations made by evaluation staff.

Findings:

• 193 clients have been in the Third Judicial District Adult Drug Court from November 1, 1998 to October 31, 2000.

• 86% of the clients were male.

• More than 77% of the clients were Hispanic, 10.4% were Anglo, 2.1% were Native American and 1.6% were Black.

• At intake, almost 39% of the clients were single/never married and 36.2% were married/remarried.

• Almost 33% of the clients had a high school diploma or GED at intake.

• More than 45% of the clients had a referring offense of DWI.

• Upon entry into the program, more than 60% of clients were employed at intake

Recommendations:

• We recommend increased coordination and cooperation among the different partners involved in each individual drug court program. Each court has a varying level of coordination and participation among the members who typically make up drug court teams. This includes holding regular drug court meetings where all members of the drug court team are present and actively participate.

• It is imperative that the four courts in this jurisdiction more completely collaborate to ensure consistency among the courts and drug court programs regarding how they function.

• We recommend drug court administrators regularly and routinely review drug court program goals in order to measure progress towards the goals. Because drug courts are not static and they evolve over time it is important to monitor the courts as they evolve. A periodic critique of each program insures the delivery of quality services.

• We recommend each drug court create a method to track clients progress in the program and advancement through phases of the program. The ability to do this varies by program. It may be best to use a point system which adds and subtracts points based upon client participation. Once these guidelines are established, they should be adhered to for all participants.
• We recommend that drug court staff periodically review the "Key Components" set out by the federal DCPO to insure adherence to nationally recognized drug court standards and procedures.

• We recommend that standardization of sanctions for noncompliance be adopted by all the courts in the district. Program participants learn which judges are perceived to be more lenient and which judges are perceived to be more punitive. Thus, clients tend to appear before the judge they believe will administer the least severe sanctions.

• We recommend an increased focus on additional research that focuses on client outcomes. This is necessary in order to examine the effectiveness of specific drug courts and drug courts in general. It is important to compare drug court program clients with other matched offenders who do not become program participants. Currently, we know very little about how effective drug courts are in reducing recidivism (measured by re-arrest and time to re-arrest). While some anecdotal evidence exists, this is not definitive.
CHAPTER 1: INTRODUCTION

Introduction

This report is being submitted by the Center for Applied Research and Analysis (CARA), Institute for Social Research (ISR), at the University of New Mexico (UNM) in order to satisfy the requirements of our contract with the Administrative Office of the Courts (AOC) for the project period November 1, 1998 to October 31, 2000. This report focuses on our process evaluation of the four adult courts supported by the funds provided by the federal Drug Court Program Office (DCPO). These funds were awarded in September 1997 to the Third Judicial District through the New Mexico Administrative Office of the Courts (AOC) under the DCPO's Drug Court Implementation Grant program. Implementation Grant program funds support the development of program designs and implementation of cost effective drug court programs that provide for pretrial, probation, or other supervised release. Four courts are included within the Third Judicial District:

- Las Cruces District Court which serves adult felons.
- Las Cruces Municipal Court which serves adult misdemeanants.
- Magistrate Court of Dona Ana County which serves adult misdemeanants.
- Mesilla Municipal Court which serves adult misdemeanants.

Our evaluation focused on the development of the programs design and the implementation of the different drug courts within the Third Judicial District. Additionally, we provided an outcome evaluation design that is similar to others currently underway in New Mexico. The contract contained the following scope of work:

- Provide a process evaluation by examining the established goals of the programs and determining how clearly these goals are defined;
- Collaborate with the drug court in designing data collection instruments that collect information that is useful for the court and evaluation. To the extent possible, ensure the court is collecting the minimum dataset information that the other courts participating in the minimum dataset collect;
- Collect all relevant and available information for all clients assessed, admitted and that received services. This will be done in order to provide intermediate outcomes for the court. This will include determining what type of client is successful in the drug court program;
- The evaluation will design an outcome study that will be used to determine long-term outcomes to determine whether or not the drug court program is effective in reducing criminal behavior, reducing illicit substance use and increases in indicators of social stability.

Toward this end a number of tasks were completed. A complete discussion of these tasks is included in a later chapter. Briefly, tasks completed included; the use of a drug court survey; the design and use of hard copy data collection forms by drug court staff; the design and implementation of an automated client management database, in which all paper data collection
forms are supposed to be entered and observation of regular drug court meetings and court sessions.

Report Organization

The report is organized using a particular format. First, we include a project description that briefly describes the complete project. Second, a review of relevant literature is included. This provides general information about the development of drug courts in the United States, their relevance, the goals and objectives of drug courts, their current status, and relevant research and findings. Third, we include a methodology section that includes information on our evaluation plan, design, data sources, types of data, and data analysis methods. Fourth, we present a descriptive analysis of the Third Judicial District Drug Court program using information from the client management database and our observations. Finally, we provide a chapter with conclusions and recommendations based upon our findings.
CHAPTER 2: PROJECT DESCRIPTION

Introduction

The Institute for Social Research (ISR) at the University of New Mexico has been contracted to conduct a process evaluation. The focus of this contract is on process rather than outcomes or results obtained. This emphasis on process occurs for a number of reasons. First, the drug courts remain in a developmental and implementation stage. Second, the length of the contract and the available resources do not allow for an outcome study. Third, and most important, it is necessary to complete and document the process of these drug courts in order to measure outcomes. This evaluation contract is designed to help complete and document this process. While the focus of this contract and research is on process, some emphasis has been placed on designing an outcome and impact study for the future.

A focus on process is a focus on how something happens rather than on the outcomes or results obtained. Programs vary in their emphasis on process. Process evaluations are aimed at understanding the internal dynamics of how a program, organization, or relationship operates. Process data permits judgement to be made about the extent to which the program or organization is operating the way it is supposed to be operating. It also reveals areas in which relationships can be improved as well as highlighting strengths of the program that should be preserved. Process descriptions are also useful in permitting people not intimately involved in a program, for example, external funding sources, public officials, external agencies, to understand how a program operates. This permits such external persons to make more intelligent decisions about the program. Finally, process evaluations are particularly useful for dissemination and replication of model interventions where a program has served as a demonstration project or is considered to be a model worthy of replications (Patton, 1986).

It is important to know the extent to which a program is effective after it is fully implemented, but it is also important to learn how the program was actually implemented. Where outcomes are evaluated without knowledge of implementation, the results seldom provide a direction for action because the decisions made lack information about what produced the observed outcomes. Unless one knows that a program is operating according to design, there may be little reason to expect it to produce the desired outcomes (Patton, 1986). ISR is prepared to complete the design and to begin the implementation of an outcome and impact study for the drug courts once the programs are completely implemented.

These drug courts have arisen in response to the increasing number of drug and alcohol related arrests in New Mexico. One of the most common responses to this growing problem has been the creation of special drug courts. Overall, drug courts are a relatively new approach used by state and local governments to address drug and alcohol related crime. These courts monitor the treatment and behavior of drug and alcohol-using defendants. The drug courts are designed to provide community-based treatment and supervision to selected offenders who are identified as having substance abuse issues and could benefit from drug education and treatment. The AOC selected the Institute for Social Research at the University of New Mexico to conduct evaluations of the drug courts.
The ISR is contracted to provide this process evaluation by examining the established goals of the programs and determining how clearly these goals are defined. In order to accomplish this, a questionnaire was sent out to the drug court program staff in October 1997. The questionnaire asked for basic information on the program, eligibility criteria, incentives and sanctions, court processes, information dissemination, program supervision, urinalysis and drug testing, program fees, treatment information, program funding, and community involvement. This information allows the ISR to determine how the program goals are defined and how they are carried out within each drug court. This survey, despite several requests, was never completed and returned. A second survey was also never completed. The lack of this completed survey limits our evaluation of the program to our observations of the four courts which comprise this program, our site visits of the program, informal discussions with drug court staff, especially treatment program staff and to a lesser extent the drug court coordinator, and our review of client level data.

The ISR is also contracted to examine the variables collected by the drug court program staff and recommend appropriate modifications to the current data collection process while aiding in the creation of an automated record keeping system. The design and operation of the drug courts are being monitored by ISR evaluation staff through the examination of the client-tracking and information keeping systems used by the court. A Microsoft Access database was created, initially for New Mexico’s Second Judicial District Drug Court, and has been modified for this drug court. As a result of an examination of the variables collected by program staff, the ISR evaluation staff will include in this report recommendations aimed at improving the data collection process as well as the quality of the data collected.

The ISR is contracted to analyze client information utilizing data collected from the drug court programs. The ISR is contracted to provide a descriptive analysis concerning what types of clients the program has served. This analysis will be designed to assist the drug court administrators in determining what sort of clients were referred to the program and whether these individuals are appropriate in terms of eligibility criteria. This will also illustrate what type of client is successful and can benefit from the drug court program. By conducting an analysis of the data extracted from the Microsoft Access database, the ISR staff will provide information back to the drug court administrators so that they may have a clear understanding of the type of clients they serve.

Finally, we have spent a limited amount of time designing an outcome study. Time has been spent reviewing our current plan, which is being implemented elsewhere in New Mexico, to determine its feasibility in the Third Judicial District. Some time has also been spent on how best to collect a comparison group.

Complicating the evaluation was the fact it was necessary to try to document the processes of four separate courts serving different populations of offenders. This included misdemeanants and felons. This was further complicated by each court's different administrative structure and court policies and procedures. Felony courts and misdemeanor courts by their nature are very different. Further, each court had a different judge and other court staff and varied understandings what defined a drug court and how a drug court should function. While
differences such as those mentioned above existed, important similarities should have served to mitigate these differences. For example, a single drug court coordinator was used for the four courts and a single Policy and Procedures Manual was created. These complicating factors are discussed in greater detail later. The significance of these complicating factors on the evaluation and more importantly on the operation of the Third Judicial District program cannot be underestimated.
CHAPTER 3: LITERATURE REVIEW

Introduction

Beginning in the mid-1980's, the number of drug-related crimes in the United States soared. (Drug Strategies, 1999). During this period, drug abuse became a common trait among offenders in the criminal justice system, and it remains so today. Due to high demands on the probation system resulting from its supervision of violent offenders and others posing dangerous threats to the community, low-level drug offenders received significantly less supervision and their criminal behavior continued. This cycling of drug offenders through the courts and back into the communities only compounded the problem; it created a cycle of crime among drug abusers, who became repeat offenders in an already overwhelmed criminal justice system.

In response to the upward trend in drug abuse and related crimes, the United States began its “War on Drugs,” which emphasized a policy of imposing severe mandatory sentences for drug offenders (Drug Strategies, 1999). As a result of this strategy, prisons around the country quickly filled to capacity, with drug offenders accounting for 72 percent of this increase in the federal prisons between 1990 and 1996. These efforts did little to reduce the demand for drugs.

By the mid-1990s, the courts became overloaded with drug cases, and it became apparent that the traditional system for dealing with drug offenders was ineffectively dealing with drug abuse. Some jurisdictions developed systems to expedite the processing of drug cases, however these models rarely, if ever, mandated substance abuse treatment for drug offenders. In fact, these systems merely accelerated the revolving door for drug offenders and failed to address the problems of habitual drug users (Drug Strategies, 1999). By the late 1980s, jurisdictions began seeking alternative methods of dealing with drug offenders.

In 1989, in response to the need for an alternative to the traditional method of processing drug crimes, Dade County, Florida created and implemented the first drug court program. The goal of the program was to reduce the costs of incarceration, drug abuse and recidivism. (Drug Strategies, 1999). In 1990 the Oakland Drug Court was created and, by the end of 1992, drug courts had been established in Las Vegas, Nevada; Portland, Oregon; and Fort Lauderdale, Florida. Currently, there are approximately 508 drug courts in operation and 281 additional courts in the planning stage. (American University Web Page, 2000).

Drug Court Characteristics

a. Drug Court Eligibility

While the first drug court programs developed focused primarily on individuals with minor drug offenses, the population of offenders presently served varies widely among jurisdictions. Although drug court programs that receive funding by the 1994 Crime Act are limited to serving only nonviolent offenders, many drug courts that are funded by state or local governments accept some violent offenders into their programs. (Gebelein, 2000).
Drug treatment courts typically use one of two approaches to the processing of drug cases (GAO, 1995). In the first approach, deferred prosecution, the offender waives his/her right to a speedy trial and is placed in a drug treatment program. Upon the defendant's satisfactory completion of the program, the case is dismissed and the defendant avoids a possible felony conviction. In the second approach, post adjudication, the defendant who has already been convicted of a drug charge is placed in the drug court program and his/her sentence is deferred until the defendant undergoes treatment and either completes or withdraws from the program. In the post-conviction setting, the defendant has increased incentive to do well in the program because any progress toward rehabilitation is considered by the judge when determining the sentence. This post-conviction approach is utilized by drug courts in New Mexico.

b. Treatment Services

Unlike drug court programs that merely seek to expedite the processing of drug offense cases, treatment drug courts seek to change the behavior of drug-using defendant using court-monitored and mandated substance abuse treatment. Thus a large emphasis is placed on the treatment component of drug courts, where participants spend a significant amount of time. In addition to the diverse structures and methods employed by the drug court judge and her staff, treatment providers employ a variety of treatment modalities in the delivery of services, often broken into the distinct phases of detoxification, stabilization, and aftercare. (Vito, 1998). The type of services provided typically include, though are not limited to, random drug testing, attendance of AA/NA meetings, participation in individual and group treatment sessions and, if desired by the participant, participation in acupuncture and meditation sessions. (Vito, 1998). Frequently, drug treatment services are accompanied by referrals for other ancillary services, such vocational training and assistance in seeking employment. (Peters, 2000). Indeed, most drug court programs require that participants seek employment and remain employed during the course of the program, remain current on financial obligations, such as drug court fees and child support payments, and complete a number of community service hours. (Drug Court Clearinghouse and Technical Assistance Project, 1998). Thus, the drug court program does not merely focus on substance abuse issues, but attends to other important aspects of its participants' lives.

c. Role of the Judge and Other Drug Court Staff

The drug court judge is the central figure in the drug court team. (Drug Courts Program Office, 1997). Using his/her authority, the judge is able to quickly sanction missed court appearances or treatment sessions, or positive drug tests. By the same token, however, the judge will also recognize accomplishments by the participants and encourage participants to continue their compliance with the program.

Key Components of Drug Courts

Although drug courts will inevitably vary in structure, eligibility criteria, and treatment services provided, the Drug Court Programs Office (DCPO) has identified ten key components upon which every drug court should be premised, regardless of the methods by which the drug courts
choose to facilitate these goals. These key components provide a useful framework for developing drug courts and they are used by the Department of Justice in reviewing drug court funding applications. (Goldkamp, 2000). The key components are listed below, followed by a brief explanation of each.

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

Drug courts seek to stop (1) drug and alcohol abuse and (2) the criminal conduct associated with such abuse. In order to accomplish this mission, programs must create a team approach, which will combine the coordinated efforts of those officials in the criminal justice system including judges, defense counsel, prosecutors, probation offices and other corrections personnel, law enforcement, and pretrial services offices, and those outside of the system including treatment service providers, program evaluators, and other local service providers. (Drug Court Program Office, 1997). In addition, drug court programs should integrate individuals and organizations that provide vocational skills, education, and housing assistance, which may encourage defendants to participate in drug court and receive the substance abuse treatment necessary in order to bring about a positive life change.

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

The prosecutor and defense counsel must also work together as a team in order to facilitate the defendant’s treatment in the drug court program and foster a non-adversarial environment in which the defendant will be better able complete the drug court program successfully. This team approach, though contrary to the traditional role of prosecutors and defense attorneys, is crucial to the defendant’s success in the program. Both sides must focus on the recovery of the defendant rather than on the merits of the underlying case. The primary responsibility of the prosecutor is to ensure that each defendant is appropriate for the program and does not pose a threat to the community in which he/she lives. The prosecutor should stay informed of the participant’s behavior in the program and ensure that he/she remains compliant with the requirements of the program. The defense attorney must encourage his client’s full participation in the program while ensuring that the defendant’s due process rights are protected. Prosecutors and defense counsel should actively participate in drafting screening, eligibility, and case-processing policies and procedures in order to protect the due process rights of the defendants and the safety of the public.

When a participant fails to comply with a program requirement, the prosecutor and defense counsel should play a significant role in formulating an appropriate response to such noncompliance.

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

Because the period immediately following an arrest can be traumatic for the defendant, the criminal justice system is in a unique position to encourage recent arrestees to enrol in the drug
court program. A recent arrest leaves little room for denial by the drug- or alcohol-abusing individual and provides a window of opportunity for the introduction of the drug court program. Prompt judicial action following arrest allows the system to take advantage of the crisis nature of the arrest and booking process (DCPO, 1997).

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

Drug and alcohol abuse problems stem from a variety of cultural and social experiences. Thus, to be effective, it is important that treatment of alcohol and drug use is not limited to traditional substance abuse services, but includes support services from primary and mental health care providers and other social services as well. Although drug courts are primarily concerned with drug and alcohol abuse and related criminal conduct, consideration must also be given to ancillary problems, such as mental illness, medical problems, the prevention and treatment of HIV and sexually transmitted diseases, homelessness, educational needs, unemployment, and intra familial problems, including domestic violence, and problems stemming from previous physical or sexual abuse. (DCPO, 1997). In addition to designing the treatment program to address these issues, such programs should also be appropriate with respect to the ethnicity, age, gender, and other individual characteristics of its participants. Unless drug courts take care to account for and address these problems, a defendant’s ability to comply with program requirements and successfully complete the program will be impaired.

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

Frequent testing for the use of drugs or alcohol is essential in order to monitor a defendant’s compliance and progress in the program. Objective and economical drug testing tools are available that provide quick and reliable results, enabling drug court personnel to detect recent drug use and issue swift sanctions for such use. Moreover, the use of frequent and timely drug testing fosters frankness and honesty among the parties.

6. **A coordinated drug strategy governs drug court responses to participants’ compliance.**

It should be recognized that, although abstinence and public safety are the two primary goals of drug courts, participants will inevitably produce positive drug tests, particularly during the initial phase of the program. Because drug and alcohol abuse is developed over time and in response to variety of factors, it is unlikely that participants will be able to completely quit using drugs or alcohol immediately upon their enrollment in the drug court program. Indeed, it is even common for participants who have abstained from the use of drugs and alcohol to produce positive tests from time-to-time. Although the tendency to relapse should be recognized by drug court treatment providers and personnel, it should not be condoned, and appropriate sanctions should be imposed for continued use. Furthermore, these sanctions should increase in severity as the use of drugs or alcohol continues.
While drug court personnel must impose swift and certain sanctions for noncompliance, it is equally important that incremental progress in the program is recognized by the drug court judge and other personnel in order to encourage participants throughout the program phases. Praise from the drug court judge for continued abstinence and for regular and full participation in treatment services, and small ceremonies for the purpose of recognizing those who successfully complete a phase of the program provide inspiration to participants to continue in the program.

A coordinated strategy that includes a continuum of responses to drug and alcohol use and other noncompliant behaviors will provide a common operating plan for all of the players on the drug court team, including the treatment provider, drug court personnel, and the drug court judge. A series of complementary responses to noncompliance and compliance should be developed by the treatment providers and criminal justice officials and should be designed to encourage compliance. In addition, these responses should be reduced to writing and provided to all participants at the outset of the program in order to avoid any uncertainty concerning their application.

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

This key component focuses on the role of the drug court judge. The drug court program provides the judge with a unique opportunity to step outside of his/her traditional role. The judge is the drug court team leader and is viewed as the link between the criminal justice system and treatment providers. Unlike the traditional role of the judge, the drug court judge maintains a close, supervisory relationship with participants in the program. This more active role increases the likelihood of success in the program and encourages law-abiding behavior. The judge’s continued supervision of each participant also conveys to participants that someone in authority cares about them and is constantly monitoring their behavior.

The special role of the drug court judge requires him/her to develop new expertise in the area of substance abuse treatment. In addition to acquiring knowledge concerning the treatment of drug and alcohol abuse, the judge must also be prepared to provide participants with individual encouragement while maintaining the ability to discourage and punish noncompliant behavior.

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

Effective drug court programs are the result of comprehensive planning, clearly articulated goals, and ability to remain flexible in order to make modifications as they are needed to improve the program. To assist in meaningful evaluation, program goals should be stated in concrete and measurable terms, which will enable program officials to provide accountability to funding agencies. Each drug court program should have an efficient data collection system that will enable program personnel to manage and track client data concerning the daily activities of each participant. A system that adequately collects this information will provide the data necessary to evaluate the quality of the services and enable evaluators to produce longitudinal studies of the program. The management information system should be shaped by the goals of
clearly defined goals will determine appropriate monitoring questions and suggest ways of obtaining the information needed to answer these questions.

Evaluation of drug court programs should examine the processes of the program as well as program outcomes. A process evaluation examines the progress in attaining operational and administrative goals. For example, a process evaluation seeks to ascertain the extent to which treatment services have been implemented as planned. Information revealed by the process evaluation assist drug court officials in making needed adjustments early in the implementation stage. Outcome evaluation assesses the extent to which the program is achieving its long-term goals, such as reducing criminal recidivism. Because outcome evaluation seeks to assess the impact of the drug court program compared to traditional methods of dealing with drug- and alcohol-using offenders, the design of an effective outcome evaluation will include a method for obtaining a comparison group that was not exposed to the drug court program.

The importance of a carefully designed evaluation component in drug court programs cannot be overstated. Studies of the drug court program are useful to program administrators as well as to funding agencies and policymakers and play a significant role in making decisions as to whether a program should be continued or expanded.

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

Regular education and training should be provided not only to drug court administrators and personnel, but to those in the criminal justice system whose contact with the drug court program is indirect. The purpose of this on-going training and education is to impart an understanding of the goals and objectives and policies and procedures of drug court. In addition, periodic training and education maintains a high level of professionalism and fosters solid relationships between criminal justice personnel and treatment providers (DCPO, 1997).

Interdisciplinary education provides criminal justice officials with information on substance abuse and exposes them to issues that exist concerning the treatment of drug and alcohol abusing individuals. It provides criminal justice professionals with an understanding of the different approaches to substance abuse treatment. Likewise, treatment professionals are educated on issues in the criminal justice system and on the operation of the courts.

During the planning and initial implementation stages of drug courts, drug court staff should consider visiting existing drug courts so that they may observe its operations. Once the drug court program has become operational, an educational curricula might include topics such as (1) the goals and philosophy of drug courts, (2) the nature of substance abuse treatment, (3) the dynamics of abstinence and techniques for preventing relapse, (4) responses to relapse and other forms of non-compliance, (5) legal requirements of the drug court program and an overview of the local criminal justice system’s policies, procedures, and terminology, (6) standards for drug testing, (7) sensitivity to racial, cultural, ethnic, gender, and sexual orientation as they relate to the operation of drug courts, (8) interrelationships of co-occurring conditions such as alcohol and substance abuse and mental illness, and (9) federal, state, and local confidentiality requirements,
particularly with respect to juvenile defendants.

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

It is especially important for drug courts to form coalitions with other organizations in the community, including private treatment providers and other service organizations, as well as with public criminal justice agencies. The formation of these coalitions serves two important purposes. Such coalitions broaden the continuum of services available to drug court participants and provide awareness to the community concerning drug courts.

Drug Court Typology

As noted above, drug court programs vary widely from jurisdiction to jurisdiction. They may, however, be broken down into eight structural dimensions, creating a “typology” that describes most drug court programs. (Goldkamp, 2000).

1. Target Problem. Although drug courts generally focus on defendants who abuse drugs and alcohol, and attempt to eliminate their use of these substances in order to reduce recidivism, many vary in the specific substance abuse related problem they target. For instance, some programs may focus on the reduction of drug-related crime in a particular area of their jurisdiction, while others may focus primarily on the relationship between substance abuse and coexisting problems including domestic violence, mental health issues, homelessness and the prevention or treatment of diseases such as HIV. (Goldkamp, 2000). For example, Las Cruces’ Municipal Court’s drug court program focuses on those defendants charged with DWI offenses.

2. Target Population. Drug courts vary in structure based on the target population of the court. Clearly some version of substance abuse related crime problem impels a jurisdiction to establish a drug court program. Beyond this, however, drug court programs vary widely in the nature of the population they target. Drug courts commonly make decisions as to the type of offender they will target: drug defendants, other defendants, juveniles, female defendants, defendants who abuse alcohol, those involved in domestic violence, or those who have committed probation or parole violations; as well as the degree of difficulty they will target. Recognizing the problem in quantifying the degree of difficulty, Goldkamp noted, “a court focusing on marijuana and alcohol-abusing probationers may be dealing with a less difficult treatment population than one enrolling homeless, long-term heroin addicts.” (Goldkamp, 2000). Despite these quantification problems, the degree of difficulty associated with the chosen target population of the drug courts will continue to set them apart.

3. Procedures for reaching the target population. The third way in which drug courts will differ is the process by which they reach and enroll individuals within their clearly-defined populations. The mechanisms they have in place in order to screen in those from the population they wish to target is crucial to the success of the program. If not carefully thought out and Implemented, some courts may actually screen out many individuals belonging to the population
they intended to serve. (Goldkamp, 2000).

4. Drug court processing and procedures. As noted above, the premise of drug courts requires the judges, prosecutors, defense attorneys, and others in the criminal justice system to step out of their traditional roles and work as a team in a non-adversary manner. However, drug courts will vary in the stage at which the drug court attempts to intervene and the formal methods and procedures in place to enroll qualifying offenders.

5. Treatment Services. All drug courts provide and indeed require participation in treatment for substance abuse. Perhaps one of the most notable differences among various drug courts is the frequency and nature of the treatment services and supplemental services, such as acupuncture, housing and health services, provided to the participants. The duration of treatment and the type of treatment provider also vary significantly.

6. Response to compliance and noncompliance. Drug court programs provide sanctions for noncompliance, such as missed treatment sessions and positive drug screens as well as incentives to encourage and reward progress and compliance with program rules ad requirements. In addition to differences in the nature and duration of the various sanctions and incentives provided by drug courts, it appears that there are also differences in the programs’ overall philosophies regarding participant behavior.

7. Productivity. Productivity in drug court programs varies from program to program. Productivity is measured by the volume of cases managed, the nature of the court workload, the degree of difficulty of the participants’ substance abuse problems, and the utilization and costs of resources needed to operate effectively, the rate of successful completions, the rate of relapse and re-arrest during the program, and relapse and recidivism following the program.

8. System-wide support. Finally, while some degree of system-wide support is common to all drug courts, the extent of the support for drug courts by other system actors and branches of government varies significantly. The depth of the support by important system actors and by other branches of the government varies significantly. The depth of the support by important system actors and by other branches of the government are likely to impact the effectiveness of drug courts. Sources of present funding and future funding are considered in assessing the degree of system support for a particular drug court program. (Goldkamp, 2000).

This typology combined with the key components discussed previously provide a framework for determining “when a drug court is not really a drug court . . .” (Goldkamp, 2000), and provide common structural ingredients useful in organizing impact studies.

Impact of Drug Courts

Overall, preliminary assessments of drug courts around the country reveal favorable outcomes. According to a 1998 report of the Drug Court Programs Office, drug use among drug court participants is significantly lower than that of defendants outside of the program. Likewise, substantially lower rates of recidivism among drug court participants have been observed, with
current studies indicating recidivism rates ranging between 5% and 28%, depending upon the
degree of difficulty associated with the targeted population. For drug court graduates, rates of
recidivism have been as low as 4%. Moreover, despite their rigorous requirements, drug courts
enjoy a high participant retention rate. For instance, data from 200 drug courts indicate an
average retention rate of more than 70%, which is significantly higher than the rate of retention
for traditional programs that deal with substance-abusing criminal defendants. (DCPO, 1998).
Those drug court participants terminated for non-compliance nevertheless appear to reduce their
drug use and are often able to succeed in subsequent treatment programs. (DCPO, 1998).

In addition to their apparent success in reducing drug use and recidivism rates for drug-abusing
defendants, drug courts have proven beneficial in several other areas. First, drug courts have
proven to be more cost-effective than traditional forms of criminal justice intervention. (DCPO,
1998). In addition to the low average cost of treatment services, drug courts have saved an
estimated $5,000 per defendant in jail bed days and made these beds available for more serious
offenders. Additional savings have been realized by reductions in police overtime and costs
associated with producing other witnesses and in reduced grand jury expenses, all of which
would have been borne by the system if these cases had been processed by the traditional court
system. The welfare system has also saved in public assistance money, as many drug court
participants who previously relied on public assistance become employed and self-supporting.

Drug courts have benefitted many families and children. For many drug court participants who
are parents, substance abuse has contributed to their loss of custody of their minor children.
Those who have not already lost custody are in danger of losing their children because of their
drug use. The drug court program has helped many of these individuals regain custody of their
children after their successful completion of the program. Indeed, a recent Department of Justice
News Release reported that more than 3,500 parents have regained custody of their children
because of their participation in drug court. Drug courts also reported that more than 500 drug-
free babies were born to female participants, which has reduced the costs associated with the
medical and social services that are needed to care for drug-addicted infants. Families and
children also benefit from family counseling provided by many drug court programs and from
assistance with housing and other necessities. (DCPO, 1998). In addition, 4,500 parents owing
child support have become current on this very important obligation following their participation
in drug court.

Other reported benefits derived from drug courts include more efficient allocation of criminal
justice resources, enhanced credibility of the law enforcement function, and a more effective
response for law enforcement to substance abuse. (DCPO, 1998).

**Criticism of Drug Courts**

Despite their apparent success drug courts have been met with some degree of criticism. For
example, using Braithwaite’s theory of reintegrative shaming as an interpretive framework,
researchers studying the Las Vegas drug court, which is based largely on the Miami drug court,
found that both long and short term recidivism rates among drug court participants was 10%
higher than a sample of non drug court defendants. (Miethe, Lu, and Reese, 2000).
According to Braithwaite (1989), shaming may be classified into two types: reintegrative and stigmatizing. Reintegrative shaming is characterized by openly-expressed disapproval by community members to deviant behavior followed by acceptance of the rehabilitated offender back into the community. The primary elements of reintegrative shaming include (1) disapproval while maintaining respect, (2) ceremonies to certify deviance terminated by ceremonies to decertify deviance, (3) disapproval of the evil of the deed without labeling the person as evil, and (4) not allowing deviance to become a master status trait. (Meithe, et al., 2000).

Conversely, stigmatizing shaming results in the labeling of the offender, not merely the behavior, with little consideration given to delabeling the reformed offender in order to signify forgiveness and facilitate the offender’s reintegration. Methods of social control that result in this condition result in outcasts for whom deviance becomes a master status and, consequently, commit further deviance. (Miethe, et al., 2000).
CHAPTER 4: METHODOLOGY

Introduction

During the initial funding cycle, there were two primary goals set forth by ISR project staff: first, to conduct a process evaluation by examining the different drug court program's established goals, design, and structure and assess its intermediate impact upon participating clients, and second, to establish a framework that could be used in the future to conduct an outcome evaluation and evaluate the different program's long-term success. This chapter describes our methodology.

Prior to data collection a number of meetings were held among ISR staff to finalize the research design and methodology. During the course of the funding period it was necessary to make revisions and adjustments to our research design and methodology due to changes in the research environment. These changes, which were unforeseen, included extensive problems in implementing an automated client management database for the court, designing and implementing hard copy data collection forms which are patterned after the database and collecting some of the data necessary for the evaluation. Perhaps more importantly the structure of the Third Judicial District drug court program impacted the evaluation. The inclusion of four distinct drug courts in one funded program complicated the evaluation. These changes limited us in implementing all of our proposed activities and meeting our proposed goal of completing a process evaluation. Another limitation, for which we controlled, concerned the geographical location of the drug court site. The Third Judicial District Court is located in the southern part of the state and is three hours by car from the Institute which limited our ability to readily interact with program staff when issues arose. To correct for this we hired a full time staff person who lives in Las Cruces. This individual was trained to conduct all aspects of the evaluation and was the primary contact with the drug court sites. During the course of the contract we made several trips to visit the site and program staff. This staff person was directly supervised by senior Institute staff.

Of particular importance to the evaluation was our decision very early on to conduct a single process evaluation of the four courts which comprise the Third Judicial District Court Drug Court. In retrospect this decision was flawed. While flawed it would not have been possible to easily rectify. The decision was made based upon the fact all four courts are part of the larger program, they were part of the same funding, a single policy and procedures manual existed, a single drug court coordinator coordinated the program, and the data was centrally located at the treatment provider. At the outset we had no reason to believe a combined evaluation was not the most practical method. In fact, the original Third Judicial District Drug Court program design was a single, seamless program which incorporated the four courts. Additionally, the funding was limited making a split research design unreasonable.

Drug Court Survey

One of the first tasks was a single program survey of the four drug courts which was to be completed by the Drug Court Coordinator. In this survey we included a number of different
subject areas:

- Program Information
- Eligibility Criteria
- Program Coordination
- Incentives and Sanctions
- Court Processes
- Supervision
- Information Dissemination
- Program Fees
- Treatment Information
- Rehabilitation and Aftercare
- Program Funding
- Community Involvement

This information was to be used to provide a general description of all the pertinent aspects of the program. This information is useful in describing the design and general operation of the drug courts at the time the survey is completed. Because drug courts are not static and change the information collected at the time the survey is completed may not remain current. For this reason we routinely attempt to update existing information with information from subsequent surveys. Additionally, we combine this information with other sources including, routine observations and discussions with program staff. However, the survey requesting updated information was not completed by drug court staff in time for this report.

**Client Management Database**

In order to fulfill our research goals and best serve the drug court program, we consulted with program staff in revising the automated Microsoft Access client management database that was originally designed to be used by the Second Judicial District Court. Discussions centered around the importance of standardizing data collection processes which would help stabilize and standardize drug court processes. We have discovered through other evaluations of drug court programs in NM that programs often do not collect consistent and reliable information. Consistent and reliable information is very useful in not only measuring client progress but also in documenting program outcomes. It was decided by program staff to not use the system we designed in favor of using their current system. We disagreed with this decision. During this time we collected evaluation information manually from drug court files which were located at the treatment provider. After a period of time and being dissatisfied with their current automated system we revised the client management system for their use. They are now using the ISR designed client management database which has been revised for their program. In order to facilitate the use of the database we assisted the program in back entering client information. This unforeseen job took up a moderate amount of the available budget for the evaluation.

**Client Management Database Forms**

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The paper forms and the database are designed to collect various types of information, which completely document individuals from screening through discharge from drug court. Four main forms have been designed to collect information pertaining to a drug court client during the participation in the drug court program.

The screening form is designed to gather information pertaining to the eligibility of an individual for the drug court program. The form is the first one to be completed when an individual has their first contact with drug court staff. Based on the information pertaining to the individual’s substance abuse and criminal history the screening individual should be able to determine whether or not the client meets minimum eligibility requirements in order to participate in the drug court program. In addition, the form allows the drug court to document basic information on every person who interviews as a potential drug court participant. The information is collected whether or not they actually become a program participant.

The purpose of the intake form is to collect information regarding each drug court participant that will aid in providing supervision and treatment. The form collects information such as home address and phone numbers, place of employment, substance abuse information, and information pertaining to the criminal case itself. The form also collects demographic information including: age, ethnicity, gender, educational level, and marital status allowing drug court staff to describe the drug court population and to provide statistics related to these demographics.

The activity form is used to document each event or activity that takes place between participants and drug court staff. These activities include client-probation officer contacts, hearings before the drug court judge, treatment activities, UA’s, and phone contacts.

The exit form is the last form to be completed on program participants. The primary purpose of the exit form is to document the final disposition of each client. The form is completed when clients leave the program. This form must be completed whether or not the participant successfully completes the program.

*Addiction Severity Index*

The ASI is designed as a relatively brief, semi-structured interview and is not recommended or designed to be self-administered. The ASI is a treatment/research instrument and is designed to provide important information about aspects of a patient’s life which may contribute to their substance abuse syndrome. The instrument can also be used for research purposes since it can provide a description of their condition before and after the intervention procedure. Each program, as part of its regular routine, administers the ASI. Clients who were admitted into one of the programs prior to the use of the ASI do not have this information available. The ASI collects extensive information in seven problem areas: medical, employment/support, alcohol, drug, legal, family/social, and psychiatric. The ASI also has a general information section which collects basic demographic information. The ASI is designed to be administered by technical staff and it is not necessary to have clinical staff administer the instrument.
In our original discussions with drug court program staff, we recommended that the ASI be used not only at intake but at discharge and/or at other points in the treatment cycle. This was recommended because of the fact the instrument can be used to measure changes overtime in the seven problem areas. It is not necessary to re-administer the complete ASI at follow-up points. Rather, composite scores have been developed from combinations of items in each problem area that are capable of showing change and that offer the most internally consistent estimate of problem status. **The ASI was not administered to clients on a consistent basis and the re-administration of the instrument has just recently been implemented.**

**Criminal Histories**

We also attempted to collect criminal histories on all program participants in order to more completely describe the participants in the drug court programs. However, this information was not made available to us. This information would have been useful in seeing if participants meet eligibility criteria and in profiling program participants.

**Observation**

In order to better understand the drug court programs, we have attended various regularly held meetings at different sites. These meetings have included drug court advisory meetings and drug court sessions. In addition, we have been in regular contact with all of the programs throughout the project. We have implemented a new technique to conduct qualitative observations that will be used in upcoming evaluations. ISR staff has already attended several comprehensive training sessions and will use these techniques in future evaluations.

**Consent and Locators**

We also designed and implemented a participant consent form and a participant locator form. The consent form is based upon other forms we have used in similar research projects and has been approved by the University of New Mexico’s Institutional Review Board. The consent form allows us access to clients for interviews, notifies them of their rights, informs them of the purpose of the study, and notifies them they will receive payment for their participation. The original instruments were designed using guidelines from the Center for Substance Abuse Treatment’s (CSAT) “Staying in Touch: A Fieldwork Manual of Tracking Procedures for Locating Substance Abusers for Follow-Up Studies”. This form also collects locational information on participants including, names, phone numbers, and addresses of significant others.

**Data Collection**

Using the sources noted above we have collected all available data. Data collection has occurred on two levels. First, we have collected data on all clients. All of the necessary data to complete a process outcome has not been available for all program participants for a variety of reasons. Because the forms were implemented after the programs began the data is available only on a subset of the population. Also, the quality of the data varies by drug court over time, and by
type of data and form. This will also be discussed later in the report. Second, we have collected data at the program level. This has primarily occurred through the use of our observations. Client level data and program level data can be compared to better document the implementation of the program and complete the process evaluation.

All of this information was collected with the goal of conducting a process evaluation of the drug court program’s established goals, design, and structure and to assess its intermediate impact upon participating inmates.

Data Analyses

Data analyses focus on discussing the participants in the drug court program. This is done using frequencies. Because of large amounts of missing data it was not possible to adequately perform any type of analysis. In addition, a brief qualitative discussion of the drug court program is provided. The ability to adequately complete this discussion was limited because we did not receive a completed drug court survey and so had to rely on our observations, the policy and procedures manual, and our discussions with drug court staff.

Outcome Design

It was also our intention and a part of our methodology to prepare for an outcome study. Towards this end we constructed the consent and locator forms. These forms were to help us gain the consent and necessary locational information to follow program participants once they leave the drug court program. We had also designed follow-up forms based upon the ASI which allows us to gather data that would be comparable to baseline information collected at intake and discharge. Our outcome evaluation methodology has been re-designed and it will consist of a quasi-experimental outcome study using historical information. This decision was made as a result of experiences we have had in other courts identifying a comparison group.
CHAPTER 5: CLIENT LEVEL ANALYSIS OF THE THIRD JUDICIAL DISTRICT ADULT DRUG COURT

Introduction

What follows is a description of the Third Judicial District Adult Drug Court clients. The data for this analysis comes from data collected from the automated client management database and client files. Some information is available on 193 individuals who received services during the study period November 1, 1998 to October 31, 2000. Large amounts of data was missing from the database making it impractical to provide descriptive information on a number of pertinent variables. Tables are not provided for referring substance abuse problem, primary substance, years of use, age at first use, number of prior DWIs, months in program and average length of stay, and program disposition.

Without adequate client level information to analyze what type of individuals enter and progress through the program to graduation and to profile successful and unsuccessful clients we cannot adequately evaluate the implementation of the program. While this is true it is possible to provide limited information which describes those who became clients in the program. We can also use the lack of client information to help inform us regarding the programs stage of implementation.

<table>
<thead>
<tr>
<th>Table 5.1 - Gender</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
</tr>
<tr>
<td>Male</td>
</tr>
<tr>
<td>Female</td>
</tr>
<tr>
<td>Missing</td>
</tr>
</tbody>
</table>

Almost 90% of clients were male.
Table 5.2 - Ethnicity

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anglo</td>
<td>20</td>
<td>10.4</td>
</tr>
<tr>
<td>Hispanic</td>
<td>149</td>
<td>77.2</td>
</tr>
<tr>
<td>African American</td>
<td>3</td>
<td>1.6</td>
</tr>
<tr>
<td>Native American</td>
<td>4</td>
<td>2.1</td>
</tr>
<tr>
<td>Asian / Pacific Islander</td>
<td>3</td>
<td>1.6</td>
</tr>
<tr>
<td>Other</td>
<td>4</td>
<td>2.1</td>
</tr>
<tr>
<td>Missing</td>
<td>10</td>
<td>5.2</td>
</tr>
</tbody>
</table>

Missing - 10

More than 77% of the clients were Hispanic and just over 10% were Anglo. Very few clients in this program were African American or Native American.

Table 5.3 - Marital Status

<table>
<thead>
<tr>
<th>Marital Status</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Married</td>
<td>68</td>
<td>35.2</td>
</tr>
<tr>
<td>Remarried</td>
<td>2</td>
<td>1.0</td>
</tr>
<tr>
<td>Widowed</td>
<td>27</td>
<td>14.0</td>
</tr>
<tr>
<td>Separated</td>
<td>3</td>
<td>1.6</td>
</tr>
<tr>
<td>Divorced</td>
<td>9</td>
<td>4.7</td>
</tr>
<tr>
<td>Never married</td>
<td>74</td>
<td>38.3</td>
</tr>
<tr>
<td>Missing</td>
<td>10</td>
<td>5.2</td>
</tr>
</tbody>
</table>

Missing - 10

More than 38% of the clients reported being never married, while just over 35% said they were married at intake.
## Table 5.4 - Education

<table>
<thead>
<tr>
<th>Education</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Education</td>
<td></td>
<td></td>
</tr>
<tr>
<td>First Grade - Fifth Grade</td>
<td>10</td>
<td>6.1</td>
</tr>
<tr>
<td>Sixth Grade - Eighth Grade</td>
<td>14</td>
<td>7.3</td>
</tr>
<tr>
<td>Freshman</td>
<td>8</td>
<td>4.1</td>
</tr>
<tr>
<td>Sophomore</td>
<td>18</td>
<td>9.3</td>
</tr>
<tr>
<td>Junior</td>
<td>23</td>
<td>11.9</td>
</tr>
<tr>
<td>High school grad or GED</td>
<td>63</td>
<td>32.6</td>
</tr>
<tr>
<td>Some College</td>
<td>27</td>
<td>14.1</td>
</tr>
<tr>
<td>Bachelor’s Degree</td>
<td>5</td>
<td>2.6</td>
</tr>
<tr>
<td>Some Graduate School</td>
<td>3</td>
<td>1.6</td>
</tr>
<tr>
<td>Missing</td>
<td>22</td>
<td>11.4</td>
</tr>
</tbody>
</table>

Missing - 22

More than 32% report having a high school diploma or equivalent.

## Table 5.5 - Employment

<table>
<thead>
<tr>
<th>Employment</th>
<th>Frequency</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employed</td>
<td>117</td>
<td>60.6</td>
</tr>
<tr>
<td>Unemployed</td>
<td>31</td>
<td>16.1</td>
</tr>
<tr>
<td>Missing</td>
<td>45</td>
<td>23.3</td>
</tr>
</tbody>
</table>

Missing - 45

More than 60% were employed at intake.
More than 82% of all urinalysis (UA) tests were negative, resulting in a positive UA rate of 17.3%.
CHAPTER 6: PROGRAM LEVEL DESCRIPTION OF THE THIRD JUDICIAL DISTRICT DRUG COURT

Introduction

This chapter, using information from the policies and procedures manual, and discussions with drug court staff and team members, provides a program level process evaluation of the program. The following information, combined with the client level data, completes the process evaluation and forms the basis for the recommendations. A review of the policies and procedures manual was used to identify the different programs goals, objectives and structure. Observational notes were used to determine how clearly the goals were defined and how the program’s different drug courts operate. As noted earlier a completed drug court survey was not available.

Goals and Objectives

The Third Judicial District Adult Drug Court, located in Las Cruces, began operating in March of 1995. The drug court is a four phase, one year program that is designed to serve adult DWI and drug offenders. The Third Judicial District Drug Court is a post-adjudication program. The primary goals of the program include a “focus on sobriety and accountability.” (Policies and Procedures Manual for the Third Judicial District Drug Court, 1999). The program also seeks to “aid offenders in breaking their cycle of drug and alcohol abuse.” (Policies and Procedures Manual for the Third Judicial District Drug Court, 1999). The courts target population is individuals with current, non-violent DWI or drug related offenses.

Program Information

The Third Judicial District Court, the Magistrate Court of Dona Ana County, and the Municipal Courts of Las Cruces and Mesilla work together with law enforcement, prosecutors, defense attorneys, probation officers and treatment specialists to provide offenders with the appropriate treatment. A Drug Court Advisory Committee has been established to periodically review the policies and procedures of the court. The committee consists of drug court judges, representatives from the District Attorney’s office, the Public Defenders office, the probation office, the treatment provider, law enforcement and the drug court coordinator. These individuals are supposed to meet at least every six weeks to review court procedures and policies to ensure defendants’ due process rights are protected throughout the entirety of the program.

Program Components and Structure

The Third Judicial District Drug Court in which participants move from a highly supervised treatment program in phase one to a less intensive treatment program in phase four. The client must complete all phase requirements in order to move into the next phase. During phase one, individuals are required to attend group therapy three times per week and attend two AA/NA meetings per week. This phase also includes psychological testing, psychological evaluation, medical lectures, and educational groups. Phase two focuses primarily on behavior modification. Participants attend educational groups and therapy each week. Clients continue to
be required to attend at least two AA/NA meetings per week and are also required to attend one of two required Victim Impact Panels. Additionally, a variety of community agencies to address issues such as sexually transmitted diseases, educational issues, housing opportunities, and vocational pursuits. Phase three primarily focuses on individual issues and the integration on sobriety into one's life. Participants attend one individual and one group therapy session per week. Individuals are expected to attend at least three AA/NA meetings per week. The final phase of the program focuses on community reintegration. This phase requires participants to attend one individual counseling session a month and one group therapy session a month (specifically geared for individuals in phase IV). Lastly, clients are expected to continue attending three AA/NA meetings a month. Upon completion of the program requirements, with the review of the judge and the drug court team, participants graduate from the program and receive a certificate of completion indicating they have successfully completed all the necessary program requirements.

Eligibility Criteria

According to the Policies and Procedures Manual all offenders with current, nonviolent offenses may be referred to the program and are evaluated for appropriateness. These individuals are evaluated and assessed by the treatment provider who makes a determination on whether or not the individual is appropriate for the program. If the individual is eligible for the program, the treatment provider notifies the individual in writing and schedules him/her for an orientation. Individuals with violent criminal histories or histories of sexual assault are not eligible for the drug court program.

Incentives and Sanctions

Sanctions are imposed on a case by case basis. Infractions that prompt the use of sanctions include positive drug screens, failure to attend AA/NA, failure to provide a UA, failure to pay fees, failure to participate, missing counseling sessions and subsequent convictions. The TJDC team employs a wide variety of sanctions which include any one or a combination of the following:

- jail time
- withholding phase advancement
- required relapse prevention counseling
- fines
- issue a noncompliance report
- termination from program

Any participant not complying with the all the conditions of the drug court program is subject to sanctions. Although the entire drug court team will discuss appropriate sanctions for clients, the final decision lies with the drug court judge.

When individuals comply with program requirements the judge will be informed so these individuals will receive proper encouragement. Incentives include reduction in fines as well as
certificates and gifts for phase advancement.

Court Processes

After an individual is deemed eligible for the drug court program, he/she attends an orientation session and then appears before the judge during the regularly scheduled drug court session.

Drug court sessions are monthly on the following days:

- **Magistrate Court**: 4th Wednesday and Thursday of the month
- **Municipal Court**: 1st Wednesday and Thursday of the month
- **Mesilla Municipal Court**: 2nd Tuesday of each month
- **District Court**: 1st Thursday of each month

Clients are required to attend a drug court review at least once each month. Pre-drug court meetings are held before each session. At this meeting each participant’s weekly activities and record of compliance are discussed. If requirements are not met for some reason, it is here that decisions are made as to the appropriate sanctions for the individuals noncompliance.

Supervision

Meetings are held monthly to discuss participants’ progress and drug court sessions are held immediately after the drug court meeting adjourns. All the drug court participants gather to report to the judge their activities since their last appearance in court. The judge publicly acknowledges both achievements and failures in the program. If sanctions are necessary due to a client’s noncompliance they are administered at this time. Additionally, supervision is given by the probation officers who have contact with all participants at home and work.

Drug Testing

Progress in the drug court is measured by the clients’ ability to complete monthly program requirements, achieve negative urinalysis results and avoid subsequent criminal activity.

Treatment Information

Participants’ in the program receive a continuum of alcohol, drug and other related treatment services. Treatment component modalities include individual and group sessions. Treatment programs are offered in both English and Spanish and families are encouraged to attend. Phase I serves as an introduction to AA/NA for the clients. This phase also includes group therapy, medical lectures and educational groups. Phase II primarily focuses on behavior modification. During this phase, clients’ discuss issues such as anger management, relapse prevention, spirituality, setting goals, values and personal responsibility. Phase III deals with individual issues. During this phase, clients’ work on effectively integrating recovery and sobriety into their personal life styles. Phase IV is the final stage in the program and it focuses on reintegrating clients’ into the community. Throughout all four phases individuals participate in
group therapy sessions, individual counseling and AA/NA meetings.
CHAPTER 7: CONCLUSION AND RECOMMENDATIONS

Conclusion

Having provided a process evaluation by examining the established goals of the program, we were better able to determine how clearly these goals were defined. Conducting an evaluation in this district was challenging due to the fact that there are four separate courts within the Third Judicial District Adult Drug Court. It was difficult to determine if the four different courts had adopted similar philosophies and were operating in a similar fashion regarding incentives, sanctions, phase advancement, and so on. All of the courts work off of just one policy/procedures manual and the manual does not account for the various differences within each court. It has become apparent through our observations that there are differences in how these four courts operate. Some of the courts have sent some or all of their clients to a different treatment provider and treatment information has not been available from Southwest Counseling. ISR has received treatment data for all clients that have been involved with Counseling and Recovery Inc. It has been difficult to determine if all drug court clients have received similar treatment services. It has been our experience through our observations that the various courts within the Third Judicial District Adult Drug Court do not completely follow/implement all of the 10 key components provided by the Drug Courts Program Office. There were numerous occasions when we observed inequitable sanctions for noncompliance. We understand that because there had not been a full time drug court coordinator, these issues were not addressed promptly. We have met with the new coordinator and she has already taken steps to correct many of the issues raised in this report.

Recommendations

The recommendations listed below are supported by the National Association of Drug Court Professionals and the Drug Court Programs Office through nationwide drug court research. Based on this, we recommend the following;

- We recommend increased coordination and cooperation among the different partners involved in the four drug courts in the Third Judicial District. Each court has a varying level of coordination and participation among the members who typically make up drug court teams. This includes holding regular drug court meetings where all members of the drug court teams are present and actively participate.

- We recommend that standardization of sanctions for noncompliance be adopted by all the courts in the district. Program participants learn which judges are perceived to be more lenient and which judges are perceived to be more punitive. Thus, clients tend to appear before the judge they believe will administer the least severe sanctions.

- We recommend drug court administrators regularly and routinely review drug court program goals in order to measure progress towards the goals. Because drug courts are not static and they evolve over time it is important to monitor the courts as they evolve. A periodic critique of each program insures the delivery of quality services.
We recommend each drug court create a method to track clients progress in the program and advancement through phases of the program. The ability to do this varies by program. It may be best to use a point system which adds and subtracts points based upon client participation. Once these guidelines are established, they should be adhered to for all participants.

We recommend that drug court staff periodically review the “Key Components” set out by the federal DCPO to insure adherence to nationally recognized drug court standards and procedures. Further, each court should set up a library containing drug court literature and routinely update their library. This activity could be coordinated by the NMADCP.

We recommend an increased focus on additional research that focuses on client outcomes. This is necessary in order to examine the effectiveness of specific drug courts and drug courts in general. It is important to compare drug court program clients with other matched offenders who do not become program participants. Currently, we know very little about how effective drug courts are in reducing recidivism (measured by re-arrest and time to re-arrest). While some anecdotal evidence exists this is not definitive.
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