

The Erie County Drug Court: Outcome Evaluation Findings

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INTRODUCTION

Drug use and related crime remains as a consistent priority among policymakers, however, the treatment of drug abusing offenders has recently changed. The shift toward rehabilitative efforts came in the 1980s with the development of the drug court model. The typical drug court model provides community-based drug treatment and increased judicial involvement. Since 1989 with the inception of first drug court Miami Florida, over 360 courts have emerged and approximately 220 more are in the planning process (National Association of Drug Court Professionals, 2000). Currently, drug courts exist in every state in the nation and have served over 140,000 individuals. The U.S. Department of Justice also placed a high priority on drug courts; since 1995, the Drug Courts Programs Office provided \$56 million in funding for development and research (Belenko, 1998). Given the degree of support and fiscal commitment, the implementation of these specialized courts will likely increase.

Recognizing the need to evaluate the efficacy of the drug court model, the Supreme Court of Ohio contracted the University of Cincinnati's, Center for Criminal Justice Research, to develop an outcome evaluation model and data collection process. The long-term objective of the Supreme Court is to utilize the evaluation model and data collection process to engage in on-going evaluations of Ohio's drug court programs. Currently, there are 34 operating drug courts in Ohio. This report represents the outcome results from the drug court in Erie County, Ohio.

EVALUATING DRUG COURTS

As with any program evaluation, assessing the operations and impacts of a drug court program is a complex process. Each drug court is planned to achieve specific

outcomes for identified types of cases or offenders. While some program impacts are common to all courts (reduced criminality, reduced substance abuse, etc.), the characteristics of participants, treatment options, monitoring activities, and sanctions vary across sites. The statewide evaluation system was designed to handle differences between the courts while also producing summary information about drug courts in general.

A drug court program can be viewed as a process designed to produce specific impacts, much like a manufacturing operation. The program has inputs (offenders and offenses, staff, resources), throughput (procedures, treatments, sanctions) and outputs (changes in recidivism and substance abuse). The drug court evaluation required the measurement of each component. The impact or effect of drug court programming can be understood against a benchmark of what would be expected had there been no court program. The outcome evaluation is designed to compare the drug court products (recidivism rates, relapse, severity of addiction) with similar measures for cases that did not participate in the drug court program. Ideally, the evaluation would enable us to attribute any observed differences to the drug court.

SITE DESCRIPTION

This report contains data from an outcome evaluation conducted on the Erie County Common Pleas Drug Court. The evaluation compared those who participated in the drug court with those designated as comparison cases to determine whether participation in the drug court was associated with differences in outcome. The Erie County Drug Court, located in Sandusky Ohio, began in April 1996. The target population included drug dependent adults charged with a non-violent drug or alcohol

related misdemeanor or felony offense. To qualify for the drug court the client had to apply through the Public Defender's Office. Background checks were then conducted and provided to the Public Defenders office, the Prosecutor's office, and the Drug Task Force. If the parties approved the applicant, the treatment agency provided an assessment of drug and alcohol dependency. The results were then given to all involved parties and a hearing with the judge was scheduled to determine whether the client should enter the program.

METHODS

Research Design

This project used a quasi-experimental matched comparison group design in order to estimate the impact of the drug court on future criminal involvement. Random assignment to groups was not feasible; however, groups were matched with regard to selected demographic characteristics (race and gender), as well as the presence of a substance abuse problem. The criteria for inclusion in the comparison group were that each participant must have (1) a reported substance abuse problem, and (2) be eligible for the drug court program. The sample includes cases screened for the program during the time period of May 1997 to August 1999. A total of 39 offenders were in the treatment group, and 48 were identified as comparison cases.

Treatment Group

Individuals who are eligible and willing to participate in court mandated drug treatment were required to attend status review hearings in front of the judge and attend four phases of chemical dependency treatment. In the first phase of treatment, participants engaged in a six to eight week intensive outpatient (IOP) program.

Programming was provided four days per week for three hours per day. The services offered include individual and group counseling, crisis intervention services, occupational therapy, activities therapy, expression therapy (art, drama, poetry, music, movement), and drug screening. The agency also provided alcohol and drug education, relapse prevention education, and individual counseling once a week. Family counseling sessions were also provided to willing family members. Phase II, called continuing care, included group and individual counseling for five hours a week for approximately twelve weeks. Phase III, also considered continuing care, offered group and individual counseling for three hours a week for eight weeks. Phase IV offered services once a week for the remainder of the program. The total amount of time between phases I to IV spanned an average of 17 months. Successful completion of the treatment program required that the client comply with all conditions set out by the court, attend court hearings, comply with treatment goals, provide clean drug and alcohol screens, attend AA/NA meetings, develop a sober support system, and not be charged with any new violations. Placement into additional services such as residential and inpatient hospitalization was determined on a case-by-case basis.

Comparison Group

The comparison group included in the present study consisted of men and women who were eligible for drug court, but for a variety of reasons did not receive drug court services. This group of clients did in fact have a drug abuse problem; however, they either refused drug treatment or were rejected by the treatment provider. Although this was not an ideal comparison group, differences between the two groups were statistically controlled.

Data Collection

As part of the Supreme Court project, the University of Cincinnati created an automated database to assist courts with data collection and provide a mechanism for reporting results. The database was installed at the Erie County Drug Court in 1997. Erie County Drug Court personnel collect and enter the data into this automated system. The data collected include: basic offender demographics, offense and disposition, prior criminal history, drug use and treatment history, current treatment needs, treatment placement and outcome, court reported violations, satisfaction with the drug court and its process, and termination status of drug court participants. Recidivism data were collected during September and October of 2000.

Analysis

This study examines the differences among the drug court participants and comparison group members along a variety of measures. In some circumstances data were not collected for the comparison group cases. When this is the case only data from the treatment group is presented. The primary dependent variable was rearrest rates for the drug court and comparison groups. Chi-square and t-tests were conducted to examine the differences between the groups, and logistic regression was used to estimate the probability of rearrest.

Limitations

There are several limitations of this study. First, the small sample size prohibited the use of treatment completion and dropout rates as a measure of outcome among the drug court population. Further, although the Erie County drug court has been in existence since 1996, the data indicated that the court has only graduated five

participants. The small number of graduates limits the analysis that could be conducted. The second major limitation concerns the comparison group. Despite efforts to match the two groups on important characteristics, the fact remains that the offenders selected for the comparison group were either not willing or not deemed appropriate by the treatment provider to participate in the drug court. As a result, comparisons between the two groups with regard to outcome must be viewed with caution. Third, the court did not collect supervision or court reported violation data on comparison group cases. As a result, we do not know what, if any treatment and supervision the comparison group received, nor do we know how well they met any requirements imposed by the court. This information would have allowed us to explore differences in outcome in more detail. Despite these limitations, we believe that the results from this study provide an accurate profile of the Erie County drug court participants as well as their outcome with regard to outcome.

RESULTS

Social demographic data were collected in an effort to describe the drug court and comparison groups, and to investigate whether differences in outcome were related to individual differences within the two samples. Moreover, knowing the population served by the drug court allows us to determine whether case outcome was influenced by any of these factors. This section profiles the two groups based on basic demographic characteristics such as age, race, gender, marital status, education level, employment status, and criminal history. This section will address the following questions:

- *What are the characteristics of the offenders served by the Erie County drug court?*
- *What if any differences exist between the drug court and comparison groups with regard to demographics, current offense, disposition, and prior history factors?*

Table 1. Frequency and percentage distribution of participants' intake information.

Characteristics	Treatment (N = 39)		Control (N = 48)	
	N	%	N	%
Race:				
White	17	44.7	22	45.8
Black	20	52.6	26	53.5
Hispanic	1	2.6	0	0.0
Gender:				
Male	28	71.8	36	73.6
Female	11	28.2	12	25.0
Age:				
18 – 22	15	38.5	17	36.2
23 – 27	8	20.5	4	8.5
28 – 32	2	5.1	6	12.8
33 – 37	5	12.8	12	25.5
38 – 42	8	20.5	3	6.4
43 and above	1	2.6	5	10.6
Mean	28.4		39.6	
Marital Status:				
Married	7	17.9	14	29.2
Not Married	32	82.1	34	70.8
Highest Grade Completed:				
Less than High School Graduate	15	38.5	21	43.8
High School Graduate	18	46.2	22	45.8
Post High School	6	15.4	5	10.4
Hours Per Week Worked:				
35 hours or more a week	11	29.7	11	22.9
15- 34 hours a week	9	24.3	5	10.4
Less than 15 hours a week	1	2.7	1	2.1
Zero hours (outside home)	16	43.2	31	64.6

Social Demographic Information

Table 1 compares the two groups race, gender, age, marital status, education level, and employment. Although some minor differences exist, none were statistically significant. With regard to race and gender, slightly more individuals in both groups were African American and male. Similarities also exist with regard to age, as the typical client in the treatment group was 28 years of age and the comparison group was 30 years of age. Individuals in the treatment group were more likely to be unmarried (82%) than the comparison group (71%). The two groups, however, were very similar with regard to education level, with about 46 percent of the treatment and comparison groups reporting a high school diploma. Finally, slightly more individuals in the comparison group were unemployed at the time they were screened for the drug court. Again, none of these differences were statistically significant, and overall the data indicate that the two groups were fairly well matched on basic social demographic characteristics.

Offense and Disposition Information

As illustrated by Table 2, the two groups were also similar with regard to charge or offense information. It appears that 42 percent of the treatment group and 41 percent of the comparison group were arrested on a drug or drug related crime. However, the treatment group was more likely to be charged with theft, and the comparison group with trafficking. It also appears that drug court participants were most likely to be sentenced to drug treatment and testing, with a few clients sentenced to ISP and restitution. The drug court staff did not collect disposition data on comparison group cases.

Prior Criminal History

Table 2 illustrates the number of prior arrests among the drug court and comparison group members. Of those with a prior record,¹ 67 percent of the treatment group and 71 percent of the comparison group reported a prior felony arrest record; however, members of the treatment group were less likely to have multiple prior felony arrests. In contrast, there is a significant difference between the two groups with regard to prior misdemeanor arrests; nearly 80 percent of the treatment group had a prior misdemeanor record compared to 48 percent of the comparison group. The treatment group members were also less likely to have a prior record that contained multiple misdemeanor offenses.

Drug & Alcohol Abuse History

A majority of the participants entering the drug court were assessed with the MAST. The data in Table 3 indicate that 95 percent of the treatment group and 52 percent of the comparison group were assessed upon intake. Participants in this study were also asked a variety of questions related to their drug and alcohol use. With regard to primary drug of choice, marijuana, crack/cocaine, and alcohol were the three most commonly cited drugs between both groups. The same trend continues for the second drug of choice, however, more individuals in the treatment group cited alcohol first followed by marijuana and then crack/cocaine. The comparison group participants preferred alcohol followed by crack/cocaine and then marijuana. The same three drugs are again listed as important in the third drug of choice, however a small group of clients in both groups also mention hallucinogens.

¹ We were unable to delineate whether an individual had no prior record or whether the data were missing. As a result, the prior record information is limited to those with a prior record.

Table 2. Frequency and percentages of participants' offense information².

Characteristics	Treatment		Control	
	N	%	N	%
	(N = 39)		(N = 48)	
Current Offense:				
Drug	17	43.6	19	41.3
Theft	10	25.6	2	4.3
Trafficking	12	30.8	23	50.0
System Violation	0	0.0	1	2.2
Domestic Violence	0	0.0	1	2.2
	$\chi = 8.632; p = .013$			
Disposition:				
Drug Testing				
Yes	36	100.0	---	---
Drug Treatment				
Yes	35	97.2	---	---
Intensive Supervision Probation				
Yes	1	3.0	---	---
Restitution				
Yes	1	3.0	---	---
Prior Felony Record:				
Yes	13	66.7	14	70.8
Number of Prior Felony Arrests:				
One	9	69.2	5	35.7
Two	1	7.7	3	21.4
Three	0	0.0	5	35.7
Four or More	3	23.1	1	7.1
Mean	2.15		2.14	
Prior Misdemeanor Record:				
Yes	31	79.5	23	48.0
Number of Prior Misdemeanor Arrests:				
One to Three	14	45.2	6	26.1
Four to Six	7	22.6	2	8.7
Seven to Nine	5	16.1	3	13.0
Ten to Twelve	1	3.2	2	8.7
Thirteen or more	4	12.9	10	43.5
Mean	5.8		11.8	
	$F = 6.625; p = .013$			

² N may not always sum to 39 and 48 due to missing data.

Table 3. Frequency and percentage distribution of participants' drug intake history.

Characteristics	Treatment N % (N = 38)		Control N % (N = 48)	
	Did Offender Receive Drug Assessment:			
Yes	37	94.9	22	52.4
No	2	5.1	20	47.6
Primary Drug of Choice:				
Alcohol	6	15.4	12	27.3
Marijuana	17	43.6	16	36.4
Crack/Cocaine	14	35.9	14	31.8
Narcotics	1	2.6	2	4.5
Depressants	1	2.6	0	0.0
Second Drug of Choice:				
Alcohol	21	61.8	10	43.5
Marijuana	8	23.5	5	21.7
Crack/Cocaine	4	11.8	8	34.8
Narcotics	1	2.9	0	0.0
Third Drug of Choice:				
Alcohol	4	26.7	2	22.2
Marijuana	5	33.3	4	44.4
Crack/Cocaine	1	6.7	2	22.2
Stimulants	1	6.7	0	0.0
Hallucinogens	3	20.0	1	11.1
Other	1	6.7	0	0.0
Age of First Alcohol Use:				
10 – 13	9	25.0	8	36.4
14 – 17	19	52.8	8	36.4
18 – 22	7	19.4	4	18.2
23 – 27	1	2.8	2	9.1
Mean	15.8		15.7	
Frequency of Alcohol Use:				
Daily	9	25.7	6	27.3
Once a week	20	57.1	14	63.6
Less than once a week	6	17.1	2	9.1

Table 3, continued. Frequency and percentage distribution of participants' drug history.

Characteristics	Treatment		Control	
	N	%	N	%
	(N = 38)		(N = 48)	
Age of First Drug Use:				
10 – 13	4	10.5	7	31.8
14 – 17	20	52.6	9	40.9
18 – 22	9	23.7	2	9.1
23 – 27	1	2.6	1	4.5
28 & over	4	10.5	3	13.6
Mean	17.9		18.2	
Frequency of Drug Use:				
Daily	22	59.5	11	50.0
Once a week	15	40.5	7	31.8
Less than a week	0	0.0	4	1.2
Family Have Chemical Dependency Problem:				
Yes	28	73.7	17	73.9
No	10	26.3	6	26.1
Has Offender Had Previous Drug Treatment:				
Yes	21	55.3	14	66.7
No	17	44.7	7	33.3
Is Offender Dual Diagnosed with Drug/Mental:				
Yes	1	2.7	3	14.3
No	36	97.3	18	85.7
Offender Referred to Drug Treatment:				
Yes	38	96.4	17	81.0
No	1	2.6	4	19.0
Treatment Setting:				
Long Term Residential	1	2.6	--	--
Intensive outpatient	33	86.8	--	--
Outpatient	1	2.6	--	--
Assessment only	3	7.9	--	--

The age of first exposure to alcohol and the frequency of current use were very similar between the two groups. The average age of first alcohol use was 16 for both the treatment and comparison group, and the majority indicated that they used alcohol once a week. Also worth noting is that 26 percent of the treatment group and 27 percent of the comparison group used alcohol daily.

Age of first exposure and frequency of drug use were also similar between the two groups. The typical client in both groups began using drugs around the age of 18, however, only 11 percent of the treatment group, compared to 32 percent of the in the comparison group started using drugs during early adolescence (10-13 years of age). Capturing the frequency of the current use allows for an accounting of the severity of the clients drug use problem. Nearly 60 percent of the treatment group and 50 percent of the comparison group used drugs on a daily basis.

Telling, however, is the number of individuals that have a family member with a chemical dependency problem. A clear majority in both groups (74 percent) have at least one family member with a chemical dependency problem. Moreover, a majority, (55% of the treatment group and 67% of the comparison group) have also previously engaged in drug treatment. In sum, it appears that the clients in both groups have a drug and alcohol treatment need, have been using since a young age, have family members with a chemical dependency problem, and have previously engaged in treatment.

Treatment Considerations

An effective outcome evaluation depends on whether the researcher knows what happened to the client while under drug court supervision. This may include documenting whether a participant moved to different phases based on progress and the

outcome of treatment. Throughput data allow us to document the drug court treatment and determine how differences in treatment are related to differences in case outcome. The purpose of this section is to identify treatment needs and retention rates. The specific questions addressed were:

- *What were the treatment needs presented by drug court participants?*
- *What was the treatment retention rates among participants as they proceeded through the treatment program?*

Treatment Needs

Logically, drug-abusing offenders have drug and alcohol problems, however, they often have other needs in the areas of housing, mental and physical health, family circumstances, employment, and education. Each drug court participant was asked to provide information relevant to each of these areas and the counselor rated whether the problem was chronic, frequent, situational, or non-existent. Figure 1 lists the areas of need in order of most severe or chronic to least. Table 4 delineates the areas of need among drug court participants³. As expected, nearly everyone indicated that they had a problem with drug abuse. Moreover, roughly half of the sample indicated that their alcohol problem could be considered chronic or frequent, whereas the other 50 percent saw their alcohol problem as situational. Of those who consider housing an important need, 38 percent felt it is occasional and only 13 percent felt housing is a frequent or chronic problem in their life. Mental health was not an area of great concern for most of the participants. The results are more mixed when it relates to family problems. Specifically, Table 4 indicates that 25 percent have chronic or continuous family problems, however, 44 percent felt it was only an occasional problem. Moreover, 31

³ Data on comparison group members were not available.

percent indicated no family problems at this time. However, 31 percent indicate they have occasional problems with their physical health. With regard to employment status, 38 percent indicate that they are in need of employment assistance at least occasionally and 25 percent indicate this is a frequent problem they experience. Finally, the vast majority, 78 percent, do not consider their educational background as a problem.

Treatment Retention Rates

The retention rate among drug courts across the nation averages 70 percent for drug court participants (Drug Court Programs Office, 1999). The Erie County Drug Court has not accepted very many cases, therefore, the data on treatment outcome was fairly limited. As indicated in the description of the treatment sample, the vast majority of participants begin treatment in the intensive outpatient phase. Data in Table 5 indicate that 87 percent of those who began treatment in the intensive outpatient phase completed this phase. Of those who did not complete treatment, 33 percent were referred to another level of care, 50 percent were considered non-compliant, and 17 percent absconded. In the second phase of treatment, 89 percent began the outpatient phase. Of those individuals, 75 percent completed treatment. Of those who did not complete treatment, 14 percent were referred to another level of care, 29 percent were considered non-compliant, and 57 percent did not finish because of “other” reasons. According to the court, this may include those individuals with a pending charge or a positive drug screen. Finally, in the third phase of treatment, 86 percent were still in outpatient. Of those individuals, 87 percent completed the third phase. Those who did not complete treatment were referred to another level of care. In sum, it appears that the drug court participants

exhibit multiple needs that should be addressed by treatment. In addition, the data indicate that the treatment agency was able to retain a majority of its clients in treatment⁴.

In-Program Behavior and Perceptions

The purpose of this section is to address behavior while in the drug court program as well as participant satisfaction with the process. In-program behavior, as measured by technical violations and satisfaction, can have a significant impact on treatment retention and behavioral change. Data were only available on drug court participants. Questions addressed in this section will include:

- *What were the court reported violation rates for the drug court participants?*
- *Among those charged with a violation, what are the sanctions given for violations?*
- *What is the level of satisfaction with the process among drug court participants?*

Court Reported Violations

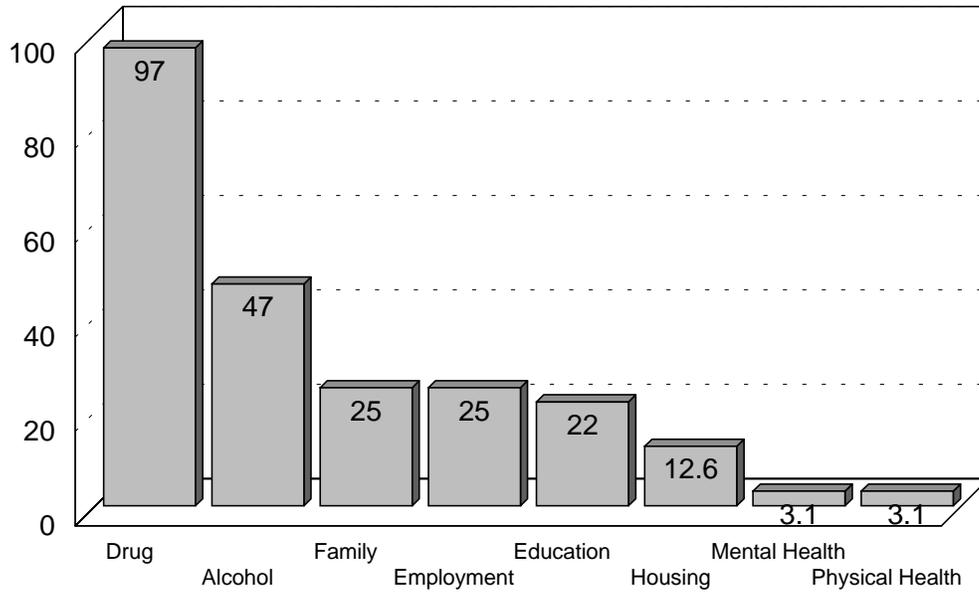
Table 6 indicates that 18 percent of the treatment group received a court violation while under the supervision of the drug court. Of those with a technical violation, 4 percent were rearrested, 2 percent failed to appear in court, 25 percent had a positive urine screen, 3 percent absconded, 37 percent were non-compliant with treatment, and 28 received a technical violation that was defined as ‘other’ by the drug court staff. Of those who violated, the mean number of violations received during this follow-up period is six.

The court chose to use a number of sanctions for those who received a court ordered violation. Table 6 shows that 29 percent were given a sanction classified as ‘other’. According to the court, this includes attending extra AA/NA meetings or writing

⁴ Missing data due to incomplete treatment records limited treatment phase status information on some

Figure 1

Percent Exhibiting Various Treatment Needs



Combines chronic and fequent disruption categories

cases. This data, although informative, should be viewed with caution.

Table 4. Frequency and percentage distribution of participants' treatment activity.

Characteristics	Treatment	
	N	%
(N = 38)		
Alcohol Abuse Need:		
Chronic, Severe disruption	13	40.6
Frequent disruption	2	6.3
Situational/Occasional problems	16	50.0
No disruption of functioning	1	3.1
Housing Need:		
Chronic, Severe disruption	2	6.3
Frequent disruption	2	6.3
Situational/Occasional problems	12	37.5
No disruption of functioning	16	50.0
Mental Health Need:		
Chronic, Severe disruption	1	3.1
Frequent disruption	0	0.0
Situational/Occasional problems	6	18.8
No disruption of functioning	25	78.1
Drug Abuse Need:		
Chronic, Severe disruption	25	78.1
Frequent disruption	6	18.8
Situational/Occasional problems	0	0.0
No disruption of functioning	1	3.1
Family Need:		
Chronic, Severe disruption	1	3.1
Frequent disruption	7	21.9
Situational/Occasional problems	14	43.8
No disruption of functioning	10	31.3
Physical Health Need:		
Chronic, Severe disruption	0	0.0
Frequent disruption	1	3.1
Situational/Occasional problems	10	31.3
No disruption of functioning	21	65.6
Employment Need:		
Chronic, Severe disruption	3	9.4
Frequent disruption	5	15.6
Situational/Occasional problems	12	37.5
No disruption of functioning	12	37.5
Education Need:		
Frequent disruption	3	9.4
Situational/Occasional problems	4	12.5
No disruption of functioning	25	78.1

Table 5. Frequency and percentage distribution of participants' treatment activity.

Characteristics	Treatment	
	N	%
<hr/>		
First Treatment Setting:		
Long Term Residential	1	3.0
Short Term Residential	0	0.0
Intensive Outpatient	31	93.9
Outpatient	1	3.0
Aftercare	0	0.0
Outcome of Placement:		
Completed phase	27	87.1
Did not complete phase	4	12.9
Reason for Not Completing Placement:		
Referred to another level of care	2	33.3
Non-compliance	3	50.0
Absconded	1	16.7
Revoked	0	0.0
Other	0	0.0
Second Treatment Setting:		
Long Term Residential	0	0.0
Short Term Residential	2	7.1
Intensive Outpatient	1	3.6
Outpatient	25	89.3
Aftercare	0	0.0
Outcome of Placement:		
Completed Phase	18	75.0
Did not Complete Phase	6	25.0
Reason for not Completing Phase:		
Referred to another level of care	1	14.3
Non-compliance	2	28.6
Absconded	0	0.0
Revoked	0	0.0
Other	4	57.1

Table 5. Frequency and percentage distribution of participants' treatment activity, continued.

Characteristics	Treatment	
	N	%
<hr/>		
Third Treatment Setting:		
Long Term Residential	0	0.0
Short Term Residential	2	9.5
Intensive Outpatient	1	4.8
Outpatient	18	85.7
Aftercare	0	0.0
Outcome of Placement:		
Completed Phase	13	86.7
Did not complete phase	2	13.3
Reason for not Completing Placement:		
Referred to another level of care	2	100.0
Non-compliance	0	0.0
Absconded	0	0.0
Revoked	0	0.0
Other	0	0.0
Fourth Treatment Setting:		
Long Term Residential	0	0.0
Short Term Residential	1	6.3
Intensive Outpatient	2	12.5
Outpatient	5	31.3
Aftercare	8	50.0
Outcome of Placement:		
Completed Phase	9	90.0
Did not Complete Phase	1	10.0
Reason for not Completing Placement:		
Referred to another level of care	0	0.0
Non-compliance	0	0.0
Absconded	0	0.0
Revoked	0	0.0
Other	2	100.0

Table 6. Frequency and percentage distribution of participants' supervision activity.

Characteristics	Treatment	
	N	%
<hr/>		
Treatment (N = 38)		
<hr/>		
Court Reported Violations:		
Yes	29	17.7
Type of Violation Reported:		
New Arrest	7	4.3
Failure to Appear	4	2.4
Positive Urine Screen	41	25.0
Absconded	5	3.0
Non-compliance with treatment	61	37.2
Other	46	28.0
Number of Violations Received:		
One to Three	10	34.5
Four to Six	9	31.0
Seven to Nine	7	24.1
Ten or more	3	10.3
Sanctions for Violations:		
Bench Warrant	7	4.3
Jail	17	10.6
Curfew	7	4.3
Community Service	12	7.5
House Arrest	17	10.6
Electronic Monitoring	8	5.0
Change in Drug Testing	12	7.5
Change in treatment intensity	35	21.7
Other	46	28.6
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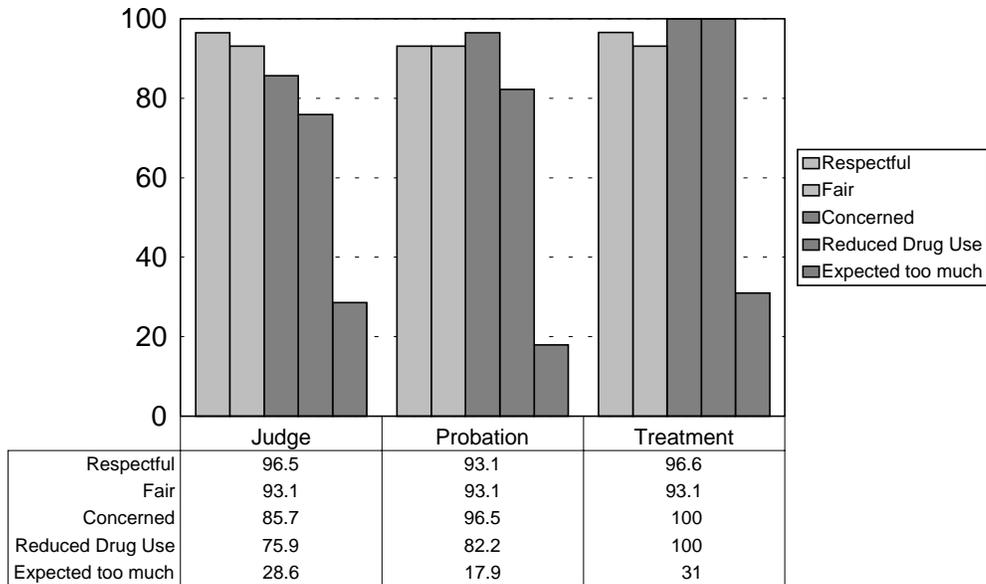
a paper related to their behavior. In addition, the court chose to increase or change the intensity of treatment (22%), place the client on house arrest (11%) or send the client to jail (11%). Other sanctions utilized less frequently included bench warrants, curfew restrictions, community service, electronic monitoring, and a change in the frequency of drug testing.

Participant Satisfaction

Drug court clients were asked to complete a self-report survey of their level of satisfaction with the drug court process, the judge, the probation staff, and the treatment staff. All drug court clients were asked to complete the 36-item survey. Figure 2 displays the overall satisfaction with each component (i.e., Judge, probation, and treatment) on a variety of indicators. The strongly agree and agree were summed to create an overall percentage satisfied with each component. On average, all of the drug court participants are generally satisfied with the drug court and its process. Table 7 indicates that a clear majority of the participants felt the judge treated them with respect, was fair, concerned, and helped them stay drug free. The majority also indicated that they did not feel the judge expected too much of them. The same trends hold for the relationship to the probation officer the treatment staff. As indicated in Figures 3 & 4, a clear majority felt that the drug court was easier than prison or jail, however, not easier than probation. The participants cited that their participation in the drug court should help them avoid drugs in the future, they were better off in general, and were personally helped through their participation in the court. Figure 5 displays the overall satisfaction with each requirement imposed during their participation in drug court. In sum, it appears that the majority of clients received violations related to their compliance with

Figure 2

Overall Agreement by Component



Response 'strongly agree' and 'agree' summed

Table 7. Frequency and percentage distribution of participants' satisfaction survey information.

Characteristic	Treatment	
	N	%
SURVEY FOR DRUG COURT CLIENTS		
The judge treated me with respect		
Strongly agree	15	51.7
Agree	13	44.8
Disagree	1	3.4
Strongly disagree	0	0.0
The judge was fair		
Strongly agree	11	37.9
Agree	16	55.2
Disagree	2	6.9
Strongly disagree	0	0.0
The judge was concerned about me		
Strongly agree	8	28.6
Agree	16	57.1
Disagree	3	10.7
Strongly disagree	1	3.6
Visits with the judge helped me to stay drug free		
Strongly agree	12	41.4
Agree	10	34.5
Disagree	5	17.2
Strongly disagree	2	6.9
The judge expected too much of me		
Strongly agree	1	3.6
Agree	7	25.0
Disagree	10	35.7
Strongly disagree	10	35.7
My probation officer treated me with respect		
Strongly agree	14	48.3
Agree	13	44.8
Disagree	2	6.9
Strongly disagree	0	0.0
My probation officer was fair		
Strongly agree	13	44.8
Agree	15	51.7
Disagree	1	3.4
Strongly disagree	0	0.0

Table 7. Frequency and percentage distribution of participants' satisfaction survey information, continued.

Characteristic	Treatment	
	N	%
My probation officer was concerned about me		
Strongly agree	13	44.8
Agree	15	51.7
Disagree	1	2.5
Strongly disagree	0	0.0
Visits with my probation officer helped me to stay drug free		
Strongly agree	11	39.3
Agree	12	42.9
Disagree	4	14.3
Strongly disagree	1	3.6
My probation officer expected too much of me		
Strongly agree	1	3.6
Agree	4	14.3
Disagree	15	53.6
Strongly disagree	8	28.6
The treatment staff treated me with respect		
Strongly agree	16	55.2
Agree	12	41.4
Disagree	1	3.4
Strongly disagree	0	0.0
The treatment staff was fair		
Strongly agree	16	55.2
Agree	11	37.9
Disagree	3	6.9
Strongly disagree	0	0.0
The treatment staff was concerned about me		
Strongly agree	17	60.7
Agree	11	39.3
Disagree	0	0.0
Strongly disagree	0	0.0
Visits with the treatment staff helped me to stay drug free		
Strongly agree	18	62.1
Agree	11	37.9
Disagree	0	0.0
Strongly disagree	0	0.0

Table 7. Frequency and percentage distribution of participants' satisfaction survey information, continued.

Characteristic	Treatment	
	N	%
The treatment staff expected too much of me		
Strongly agree	5	17.2
Agree	4	13.8
Disagree	10	34.5
Strongly disagree	10	34.5
It helped me appear in court on a regular basis		
Strongly agree	9	31.0
Agree	17	58.6
Disagree	2	6.9
Strongly disagree	1	3.4
It helped me to report to my probation officer on a regular basis		
Strongly agree	5	17.9
Agree	18	64.3
Disagree	4	14.3
Strongly disagree	1	3.6
It helped me attend treatment on a regular basis		
Strongly agree	12	41.4
Agree	15	51.7
Disagree	1	3.4
Strongly disagree	1	3.4
Drug Court was easier than jail or prison		
Strongly agree	19	67.9
Agree	8	28.6
Disagree	1	3.6
Strongly disagree	0	0.0
Drug Court was easier than regular probation		
Strongly agree	5	18.5
Agree	8	29.6
Disagree	12	44.4
Strongly disagree	2	7.4
I think that my participation in the Drug Court will help me avoid drug use in the future		
Strongly agree	20	69.0
Agree	9	31.0
Disagree	0	0.0
Strongly disagree	0	0.0

Table 7. Frequency and percentage distribution of participants' satisfaction survey information, continued.

Characteristic	Treatment	
	N	%
In general, I am better off for participating in Drug Court as opposed to other court sanctions		
Strongly agree	19	65.5
Agree	10	34.5
Disagree	0	0.0
Strongly disagree	0	0.0
I was personally helped through participation in Drug Court		
Strongly agree	14	48.3
Agree	14	48.3
Disagree	3	3.4
Strongly disagree	0	0.0
Residential Treatment		
Poor	0	0.0
Good	4	14.3
Excellent	4	14.3
Did not participate	20	71.4
Outpatient Treatment		
Poor	0	0.0
Good	11	39.3
Excellent	16	57.1
Did not participate	1	3.6
Intensive Probation Treatment		
Poor	1	3.4
Good	9	31.0
Excellent	5	17.2
Did not participate	14	48.3
Regular Probation Supervision		
Poor	1	3.6
Good	12	42.9
Excellent	8	28.6
Did not participate	7	25.0
Electronic Monitoring		
Poor	1	3.7
Good	3	11.1
Excellent	3	11.1
Did not participate	20	74.1

Table 7. Frequency and percentage distribution of participants' satisfaction survey information, continued.

Characteristic	Treatment	
	N	%
Community Service		
Poor	0	0.0
Good	3	11.5
Excellent	3	11.5
Did not participate	20	76.9
Drug Testing		
Poor	3	10.7
Good	11	39.3
Excellent	14	50.0
Did not participate	0	0.0
AA/NA		
Poor	1	3.7
Good	11	40.7
Excellent	15	55.6
Did not participate	0	0.0
Previous Trouble with the Law		
Yes	19	67.9
No	9	32.1
Previous Substance Abuse Treatment		
Yes	13	46.4
No	15	53.6

treatment, but feel very satisfied with the drug court process and the members of the drug court team.

Case Outcome & Subsequent Criminal Behavior

The main purpose of an outcome evaluation is to determine the impact of the intervention, in this case the drug court, on behavior. The commonly used measure of behavior is recidivism. Hence, the purpose of this section is to address the recidivism rates between the two groups and identify factors associated with outcome. A number of research questions are examined.

- *What were the completion rates among drug court participants?*
- *What was the rearrest rates among the experimental and comparison groups?*
- *What was the rate of time to elapse between initial arrest to rearrest among the two groups?*
- *What were the determinants or factors associated with recidivism?*

Termination Information

As indicated by Table 8, only 5 clients have successfully graduated from the program. The data indicate that those five individuals had their original charges dismissed as a result of their successful completion and one had his or her record expunged. Of those who did not successfully complete the program, five (33 percent) were termination, 1 (7 percent) absconded, and 4 (27 percent) were listed as failing for other reasons. Other reasons may include failing to comply with all sanctions or still having a pending charge or sanction.

Figure 3

Drug Court was easier than jail or prison

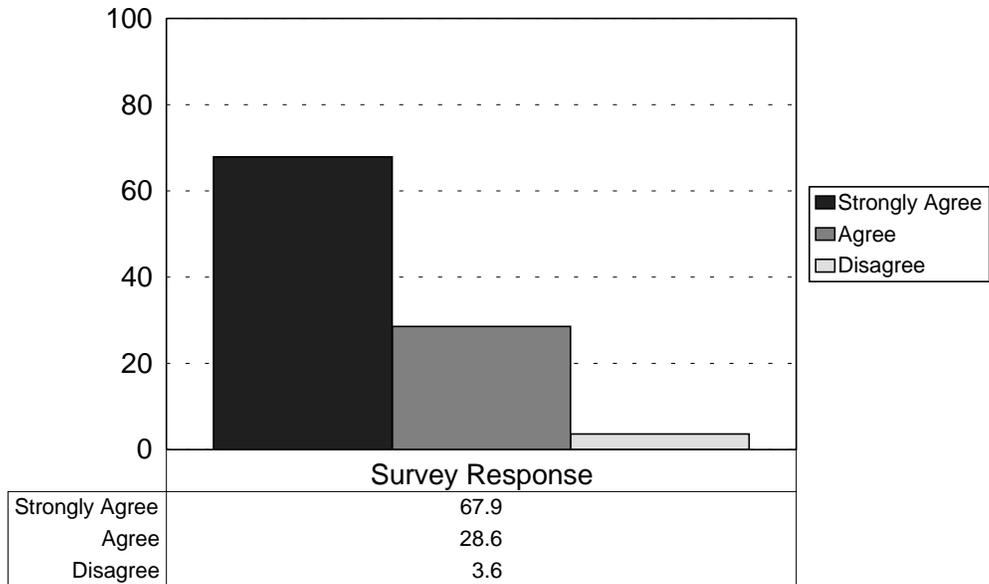


Figure 4

Drug Court was easier than regular probation

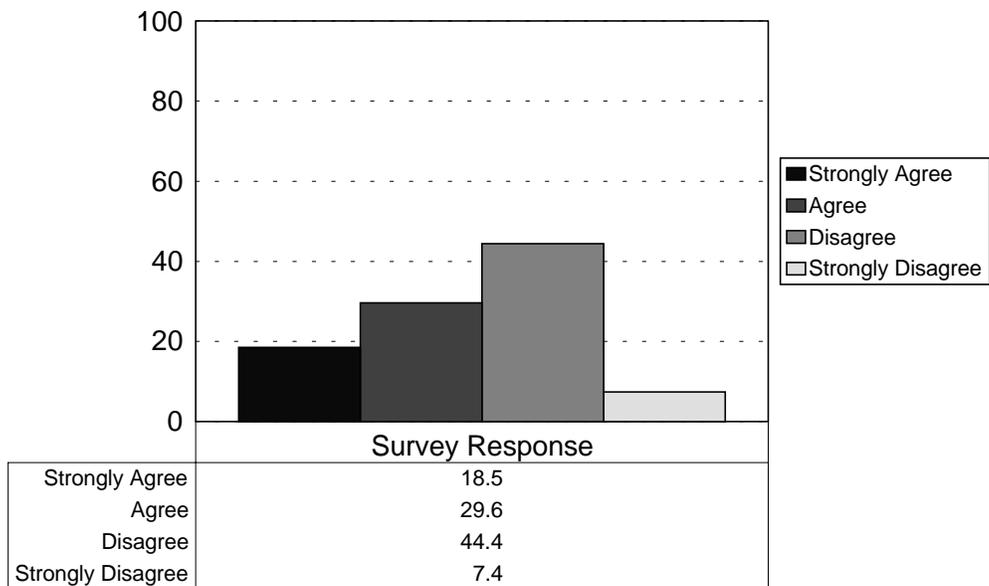
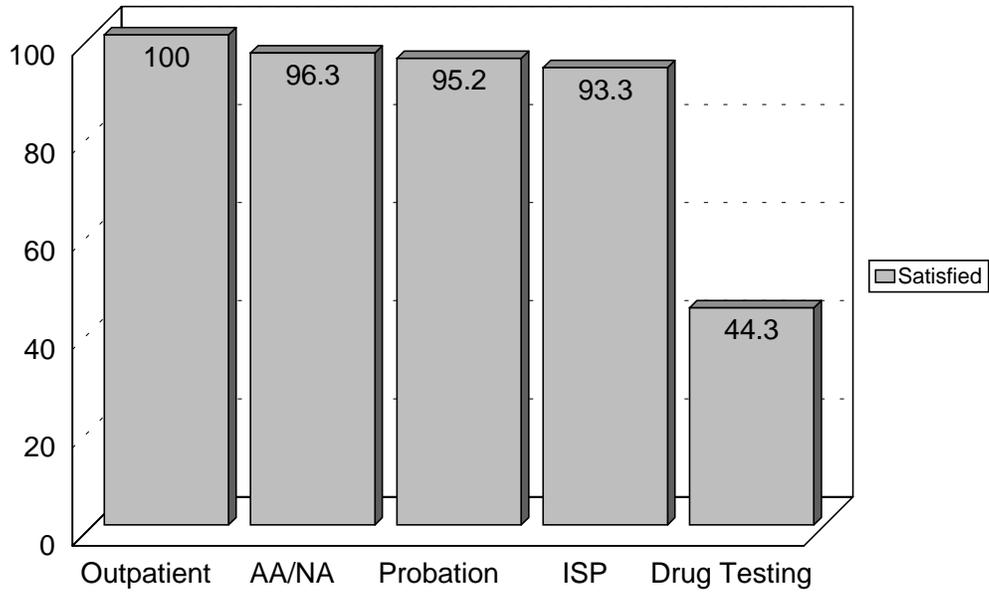


Figure 5

Percent Satisfied with Requirements



Responses 'Excellent' and 'Good' Summed

Rearrest Rates

As indicated in Table 9, there is a statistically significant difference with regard to rearrest. Specifically, 40 percent of the treatment group were rearrested during the follow-up period versus 69 percent of the comparison group. The new arrest could have been incurred while the participant was engaged in drug court services or during the follow-up period. With regard to charge, it appears that 67 percent of the treatment group and 56 percent of the comparison group members were charged with a drug related offense. The follow up data also indicate that 16 percent of the comparison group members were rearrested on an offense involving violence. Moreover, 43 percent of those rearrested in the treatment group were rearrested multiple times during the follow up period compared to 39 percent of the comparison group. Finally, of those rearrested, 83 percent of the treatment group were convicted versus 97 percent of the comparison group.

Determinants of Rearrest

In order to attempt to identify the factors associated with recidivism, a logistic regression analysis was conducted. The characteristics in the model were race, gender, marital status, group, and time at risk⁵. Time at risk was included as a control for the differing lengths of time each client was followed. The results indicated that only one variable predicted who was likely to be rearrested: group membership. Those offenders who received drug court treatment services were less likely to be rearrested. Furthermore, the characteristics of the individual were not significant in predicting who would be rearrested.

Table 8. Frequency and percentage distribution of participants' termination information.

Characteristics	Treatment	
	N	%
<hr/>		
Treatment (N = 38)		
<hr/>		
Did Offender Successfully complete Drug Court:		
Yes	5	31.3
No	11	68.8
Were Original Charges Dismissed:		
Yes	5	31.3
No	11	68.8
Was Defendant's Record Expunged:		
Yes	1	6.3
No	15	93.8
Status at Termination:		
Graduated from Drug Court	5	33.3
Terminated Unsuccessful	5	33.3
Absconded	1	6.7
Other	4	26.7

⁵ The sample size prohibited the inclusion of additional independent variables.

Table 9, continued. Frequency and percentage distribution of participants' rearrest information.

Characteristics	Treatment		Control	
	N	%	N	%
	(N = 38)		(N = 48)	
Rearrested for a New Offense:				
Yes	14	35.9	33	68.8
No	25	64.1	15	31.3
$\chi^2 = 9.350; p=.002$				
Rearrest Charge (of those rearrested):				
Drug Related	8	66.7	18	56.3
Theft	2	16.7	3	9.4
Disorderly conduct	0	0.0	1	3.1
DUI	2	16.7	0	0.0
Violence	0	0.0	5	15.6
System Violation	0	0.0	2	6.3
Other	0	0.0	3	9.4
Arrested Multiple Times:				
Yes	6	42.9	13	39.4
No	8	57.1	20	60.6
Number of Times Rearrested:				
One	8	57.1	20	60.6
Two	1	7.1	5	15.2
Three	3	21.4	5	15.2
Four	0	0.0	2	6.1
Five or more	2	14.2	1	3.0
Convicted:				
Yes	10	83.3	28	96.6
No	2	16.7	1	3.4

SUMMARY AND RECOMMENDATIONS

The findings of this evaluation can be summarized as follows:

- The drug court and comparison groups were very similar with regard to social demographic characteristics. Specifically, the typical person in both groups was African American, male, approximately 29 years of age, and not married. The groups were also similar with regard to education level and employment status.
- A majority of offenders in both groups were referred on a drug charge. However, the drug court group was more likely to be charged with theft, and the comparison group with drug trafficking.
- With regard to criminal history, a majority of both groups reported a prior felony record. There were however, several significant differences: the comparison group was more likely to have a prior record involving multiple felony and misdemeanor charges, and the drug court group was significantly more likely to have a prior misdemeanor record.
- The majority of the participants in both groups ranked marijuana as their primary drug of choice followed by alcohol. The top three drugs of choice were marijuana, crack/cocaine, and alcohol.
- The typical participant in both groups started using alcohol at 16 and drugs at 18 years of age. Moreover, participants in both groups indicate a weekly use of alcohol, but a daily use of drugs. Finally, the majority had a family member with a chemical dependency problem, and had previously engaged in treatment.
- The drug court participants exhibited a number of treatment needs. When ranked in order of importance the following treatment needs emerged: drug use, alcohol use, family difficulties, employment, education, housing, mental health, and physical health.
- The drug court was succeeding in retaining its clients. Specifically, 87 percent completed their first phase of treatment. For those who did not complete the first phase, the following reasons were offered: higher level of care needs, non-compliance, and no-shows (absconded).
- The court reported violation rates among drug court clients was fairly low. Only 18 percent of the drug court clients were charged with a court ordered violation. Those violations included: rearrest, failure to appear, positive drug screen, absconded, non-compliance with treatment, and other.
- Overall, the drug court clients were very satisfied with the drug court. The clients were satisfied with the judge, the probation staff, and the treatment staff. While they felt the drug court was more difficult than standard probation, they also

agreed that their participation in the drug court would help them in the future with their drug abuse problem

- Bivariate analyses revealed a statistically significant difference between the treatment and comparison group with regard to rearrest. The data indicate that 40 percent of the drug court treatment group were rearrested during the follow up period versus 67 percent of the comparison group. The majority of those rearrested, were charged with a drug related crime. Slightly more individuals in the treatment group, however, were rearrested multiple times during the follow-up period. The only factor predicting rearrested was whether the defendant was part of the drug court group.

Previous research by Goldkamp has concluded that the technical violation rate is higher among drug court participants. This may be because the drug court participants are being monitored more closely. While we do not have information on comparison cases, it appears that the technical violation rate among drug court participants is fairly low (18%). In addition, the retention rate in treatment was similar, even slightly above, the national average among drug court participants. In addition, the level of satisfaction among participants was also very high. Moreover, the majority did not feel the demands of the court or the treatment agency were too much to handle.

The outcome findings indicated that offenders who participated in the Erie County Drug Court were less likely to be rearrested than a comparison group of offenders who did not receive drug court services. As noted earlier, the basic social demographic characteristics were similar between the two groups. Clearly, however, there is one main difference between the groups: the drug court participants elected to engage in drug treatment while the comparison group did not. Due to this and other limitations to the study we must offer a word of caution when interpreting the results. Increasing the sample size, extending the follow-up period, and more complete data on the comparison

cases are all necessary ingredients to learning more about the effectiveness of the drug court in Erie County.

Given the popularity of the drug court model across the country as well as in Ohio, their ability to reduce drug abuse and recidivism remains a key issue. The drug court model embraces the perspective that get tough polices towards drug abuse have fallen short. By endorsing the view that treatment can be an effective tool in reducing recidivism, drug courts hold more promise than traditional policies that rely on incarceration and stricter sentences.

In order to increase the effectiveness of the Erie County Drug Court further, the following recommendations can be offered:

Recommendations

1. The court should make additional efforts find appropriate clients that could be served by the drug court. The number of participants in the Erie County Drug Court during the three-year study period is fairly low. Efforts should be made to increase the number of participants served. Furthermore, since the characteristics of the offenders were not related to outcome, it is not unreasonable to conclude that participation in treatment increased the likelihood of success. This means that the treatment provider may be rejecting some offenders who would benefit from treatment.
2. In order to engage more drug court clients, the court should have its staff trained on motivational interviewing techniques that can be used with those offenders that appear unmotivated or unwilling to participate in treatment. Some jurisdictions have even develop pre-treatment groups designed to increase the motivation and willingness of resistant offenders. The Erie County Drug Court should consider these options.
3. In addition to varying degrees of substance abuse problems, offenders will have varying degrees of other risk factors (e.g., antisocial values, antisocial peer associations, and so forth). On important element in improving the effectiveness of programs is the use of standardized risk/need assessment instruments. The Erie County Drug Court should consider the implementation of such a tool. These instruments include risk and need factors that are known correlates of criminal behavior. Furthermore, they provide a summary score that predicts the offender's likelihood of recidivism, and can be used in case

classification and treatment planning. This will allow the program staff to distinguish risk levels, and more importantly make appropriate assignment to treatment groups. For example, risk and needs can then be used when considered the intensity and duration of the program. A valid and reliable risk and needs assessment instrument will serve to provide an overall risk/need level, and will identify those offenders with substance abuse as a criminogenic need. Once these offenders have been identified a more detailed assessment of substance abuse should then be conducted in order to develop a more precise treatment plan.

4. In order to conduct a more comprehensive evaluation of the Erie County Drug Court, more detailed information on the comparison cases needs to be collected. This would include data on supervision activities, drug testing results, and services received.

APPENDIX

Logistical Regression Predicting Arrest:
Treatment versus Control

Variable	B	S.E.	Wald	df	Significance
Group*	-1.318	.518	6.474	1	.011
Race	-.214	.487	.193	1	.661
Gender	.881	.563	2.449	1	.118
Prior Misdemeanor	-.460	.579	.632	1	.427
Time to arrest	.001	.001	.968	1	.325

*p < .01