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On Good Authority

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On Good Authority is a periodic briefing on trends and issues in criminal justice. This report was written by staff Research Supervisor Tracy Hahn. It is a summary of a program evaluation of the Madison County Assessment and Treatment Alternative Court conducted by Mark Godley, Ph.D., and Michael Dennis, Ph.D., of Lighthouse Institute, Chestnut Health Systems. Copies of the evaluation are available from the Authority's Research and Analysis Unit.

The **Illinois Criminal Justice Information Authority** is a state agency dedicated to improving the administration of criminal justice in Illinois. The basic functions of the Authority are criminal justice research, federal and state grants administration, and information systems development and support.

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Drug court provides treatment alternative to incarceration

The Madison County Assessment and Treatment Alternative Court, or drug court, came into existence with a strong sense of urgency. Fueled by a 437 percent increase in the number of arrests for drug violations between 1988 and 1992, and a 50 percent increase in drug-related felonies filed between 1993 and 1994, the drug court was an effort to divert offenders into treatment as an alternative to trial and potential incarceration. Funded locally, the program is supported by committed judicial leadership and a host of willing stakeholders and collaborators, including the state's attorney, probation department, public defender, mental health board, county board, Treatment Alternatives for Safe Communities, and a local drug treatment provider.

A two-year evaluation of the drug court was funded by the Illinois Criminal Justice Information Authority through federal Anti-Drug Abuse Act funds. Funding for this evaluation began in March 1996, and most data collection was completed in May 1998. This *On Good Authority* is a summary of evaluation findings from the first two years of drug court operations and includes both quantitative and qualitative data regarding the implementation and effectiveness of the drug court.

Background

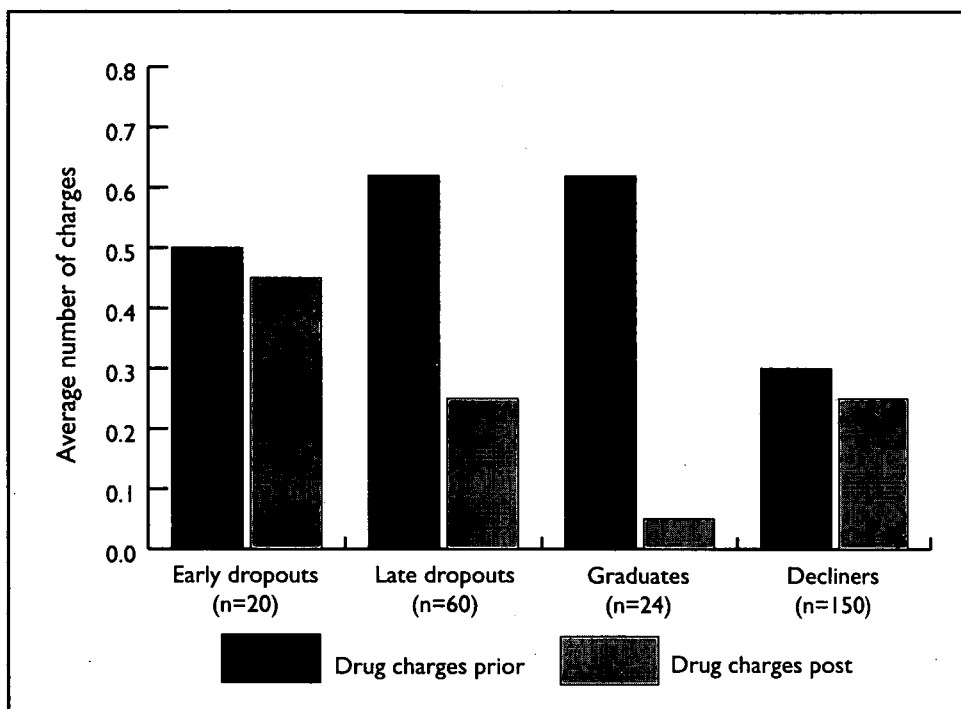
The original target population for the drug court included offenders who were

arrested on felony charges and had been diagnosed with alcohol or drug dependence that could be treated on an outpatient basis. Offenders with past violent crime or weapons convictions, subclinical alcohol or drug problems, or who were under the age of 17, were excluded. Offenders on methadone maintenance, an opiate treatment program, also were excluded. The state's attorney formally dismisses the offender's drug charges if the program is successfully completed, providing an incentive for offenders to participate in the program. This allows the drug court client to avoid a criminal record and promptly receive treatment for drug or alcohol abuse.

A key element of the drug court is employment for clients. Stakeholders generally believed that employment opportunities were available in the area and that drug court clients were employable. However, many available job opportunities did not pay a living wage. To address this, the drug court treatment program included a vocational component to assist clients in finding better jobs or entering GED high school equivalency programs. Transportation to drug court treatment programs and childcare during treatment sessions were provided to assist low-income clients in maintaining program attendance.

Clients who agree to enter treatment but fail to show up create a major obstacle for many drug court programs. The Madison County program closely monitored attendance and continues to

Figure 1
Drug charges 12 months prior to and 12 months after
entering or declining treatment



make changes to improve it. Initially, clients are scheduled for three to five intensive outpatient sessions per week, with each session lasting three or four hours. Progression through the program is based on the participant's response to treatment, with the first phase typically lasting one to three months. Clients then graduate to Phase 2, in which they attend two or three one-hour sessions per week, usually for 8 to 12 months. During Phase 3 clients come to treatment every other week for a one- to two-hour session while maintaining employment, attending school, or training. While some clients progressed through the phases in a timely manner, others were unemployed or unable to pass urine screens for illegal substances and spent more time in the early phase. Clients left the program in one of three ways: graduation, voluntary withdrawal, or termination by the court.

Evaluation findings

The use of steering committee meetings to handle issues concerning operating procedures was sustained throughout the study period and served as an effective problem-solving mechanism for the

stakeholder agencies. The evaluation team attended these meetings and was encouraged by the stakeholders' willingness to pay attention to management information reports and use the data to promote program improvement. This was most evident in the issue of client recruitment. After several management information reports documented low enrollment figures, the steering committee agreed to start a second track of clients as a method to encourage offenders to utilize drug court services. Track II clients are offenders who have violated the terms of their probation and face probation revocation. Since the court was dealing with offenders who had already been sentenced, adding this track simplified things for court personnel by eliminating the need for screening by offense type and an offense history check, as well as eliminating the need for immediate assessment. Explicit criteria were not set for clients on this track. Participation was determined on a case-by-case basis.

While Track II did not improve overall recruitment, it showed positive results could be achieved by offenders

with intensive criminal justice involvement. Moreover, it offset reductions in Track I enrollment that occurred toward the end of the evaluation study. By the end of 1997, nearly two years after recruitment for the drug court, 198 participants were enrolled in Track I and Track II. Of these, 104 entered in 1996 and 94 entered in 1997. Of those entering in 1997, 52 were Track I clients and 42 were Track II. The lack of enrollment, combined with the work load of drug court and treatment staff, may indicate that increased staff is needed to effectively enroll and handle significantly more than 100 participants per year.

Participants were being prosecuted for Class 3 and 4 drug possession (64 percent), forgery (8.5 percent), Class 3 and 4 theft (8 percent), retail theft (7 percent), and other charges (12.5 percent). In terms of substance use, 44 percent of the clients met the criteria for cocaine dependence; 31 percent with cannabis dependence; 27 percent with alcohol dependence; 2.4 percent with cannabis abuse; 2 percent with alcohol abuse; 1.2 percent with cocaine abuse; and 9.6 percent with other substance use disorders. The majority of clients were male (65 percent), white (62 percent), ages 18 to 35 (69 percent), single (64 percent), living on a non-salary income (70 percent), and residents of Madison County (83 percent). Overall, the clients appear to be consistent with the program's target population.

In calculating rates of program completion and retention, the rate of completion is the total number of graduates as a percentage of the total number of clients admitted to the program, less those that are still enrolled in the program. The retention rate is the number of graduates and those still enrolled in the program as a percentage of the total number of clients admitted to the program. The retention rate is used as an indicator of the extent to which a program retains its participants.

Track I had a completion rate of 22 percent with a retention rate of 46 percent. While Track II produced no graduates upon the completion of data

Figure 2
Total arrests 12 months prior to and 12 months after
entering or declining treatment

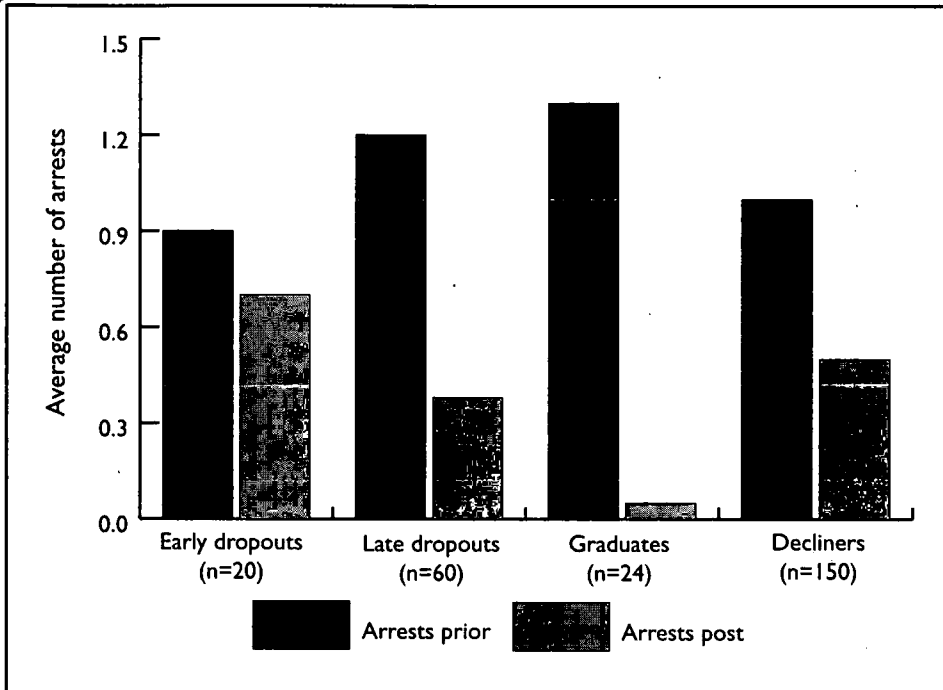
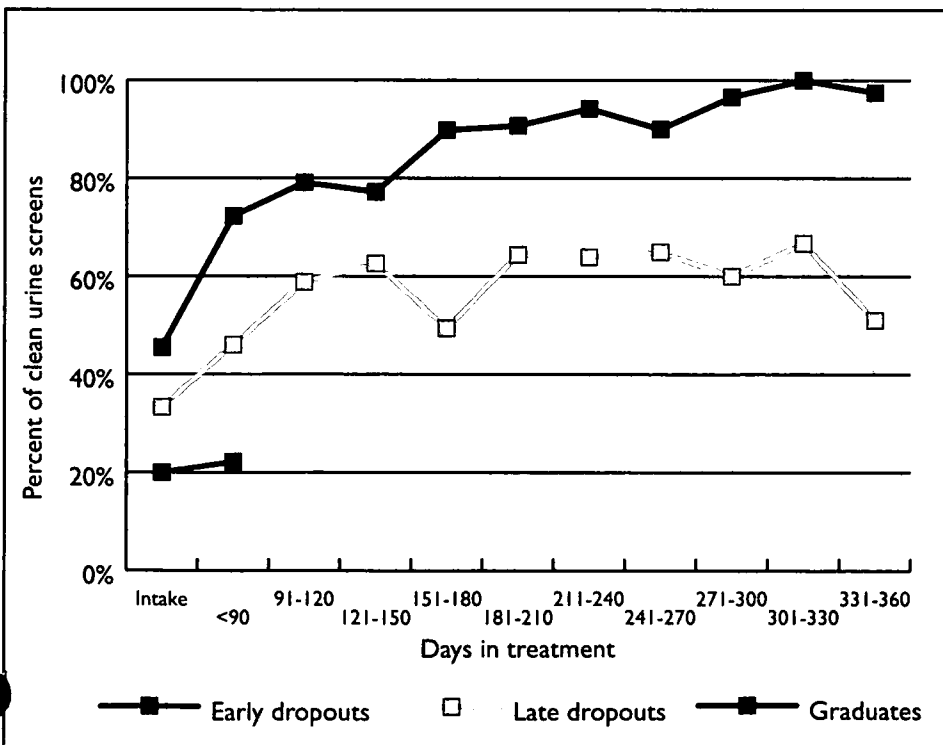


Figure 3
Percentage of clean urine screens by time in treatment
March 1996 - February 1998



collection, the retention rate was 82 percent. Track II clients were not permitted to voluntarily withdraw, which may have played a role in retention rate differences between the two tracks. Nearly a third of Track I clients withdrew from the program.

With respect to effectiveness, the project clearly succeeded with program graduates. Substantial progress also was noted with Track II participants and late dropouts in Track I. Clients who dropped out early showed little or no progress. The evaluation looked at recidivism of four cohorts: early dropouts (offenders who dropped out or were terminated prior to 90 days); late dropouts (participants who stayed longer than 90 days but did not graduate); graduates (clients who successfully completed the program); and decliners (offenders who qualified but refused to participate). An analysis focusing solely on drug charges was conducted to look at the average number of drug charges per offender one year prior to the program and one year after enrollment or declination. Drug charge recidivism decreased nearly 94 percent among graduates (Figure 1). Drug charges among late dropouts decreased 60 percent. Drug charges among early dropouts decreased by 10 percent.

Early dropouts showed virtually no change in overall criminal arrests over time. Late dropouts decreased from 1.2 arrests to about 0.5 arrests per individual, an improvement of 52 percent. Drug court graduates decreased from 1.3 arrests to less than 0.1 per individual, a 92 percent improvement (Figure 2).

Random urine tests are required four or five times per client per month during the first two phases, unless they are in detoxification, residential treatment, jail, or another controlled environment. Figure 3 details the test results by three cohort groups. Of these groups, both the graduates and late dropouts showed decreased drug use as drug court program participants. During the first 90-day period, substantial differences were noted between the three groups, with early dropouts having clean urine tests only 20 percent of the

time. Nearly all of the graduates were drug free one year after program completion, while approximately one-half of the tests for late dropouts were negative for drug use. These results demonstrate the success of drug court graduates and further validate the efforts of the drug court judge and staff.

During the course of their participation in the drug court, 44 percent of clients who were previously unemployed found employment as a result of the drug court vocational emphasis. Employment rates improved substantially for both the late dropout group and graduates. The late dropout group improved from a 16 percent rate of employment to 40 percent, while the employment rate of early dropouts decreased from 25 percent to 5 percent. Graduates were either employed or in school when they left the program.

Recommendations

Areas requiring additional attention and study include improving retention and

graduation rates. Because Track II clients are prevented from dropping out without consequences, their dropout rate is significantly less than the dropout rate by Track I clients. It is recommended that drug court staff increase their effort to reduce early dropout rates of Track I clients.

Approaches to be considered include invoking graduated sanctions within the first 90 days for noncompliance including jail time, swifter referral to inpatient treatment after repeated instances of a positive urine test, and other judicial methods to promote compliance.

Individualization of case management and treatment is useful and should target young African-American male participants, as statistics show they are more likely to drop out earlier. In addition, staff should examine whether additional case management and treatment capacity are necessary to maintain and increase enrollment.

Conclusion

The two-year evaluation of the drug court showed the project followed a pattern of implementation characterized by stakeholder commitment to the goals of helping participants discontinue drug use and criminal activity and become employed, productive members of society. Throughout the two-year study, stakeholder commitment remained high as they focused on producing better interagency coordination and problem solving strategies geared toward improving drug court operations and services to its clients. Criminal recidivism was significantly reduced and the number of participants who became drug-free and employed significantly increased. The program merits commendation for its commitment to improving the lives of its participants and making Madison County a safer community. ♦

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