



National Institute of Justice

R e s e a r c h i n B r i e f

Jeremy Travis, Director

April 2000

Issues and Findings

Discussed in this Brief: An evaluation of the impact of two D.C. Superior Court experimental interventions on drug-involved defendants in Washington. During the experiment, all drug felony defendants were randomly assigned to one of three dockets established to expedite the handling of drug cases. One drug-case docket intervened in the standard manner. Another docket intervened through a new comprehensive treatment program. The third offered an experimental program mandating a graduated schedule of sanctions if the defendant failed compulsory drug tests.

Key issues: Researchers measured the impact of the programs on defendants' drug use, criminal activity, and social and economic functioning using court records and self-report data from a survey of defendants.

The study also examined program costs and estimated the value of benefits in the form of averted costs of victimization, arrest, prosecution, and incarceration.

Key findings: Among the impact evaluation findings are the following:

- Sanctions program participants were significantly less likely than the standard docket sample to be arrested in the year following sentencing.
- Assignment to dockets offering the experimental programs significantly reduced defendants' drug use during pretrial release. The reductions in drug use were even greater

continued...

Evaluation of the D.C. Superior Court Drug Intervention Programs

By Adele Harrell, Shannon Cavanagh, and John Roman

In 1993, the Washington, D.C., Superior Court embarked on an ambitious experiment to test court-based interventions for drug-involved defendants.¹ During the experiment, all drug felony defendants were randomly assigned to one of three dockets the court had established in 1992 to expedite the handling of drug cases. Each docket offered different services as follows:

- The standard docket continued to handle drug cases in a routine manner (which included twice-weekly drug tests and judicial monitoring), while the other two offered new intervention services in addition to drug testing and judicial monitoring.
- The treatment docket intervened with a comprehensive treatment program designed to provide drug-involved individuals with the skills, self-esteem, and community resources necessary to help them leave the criminal life.
- The sanctions docket penalized participants for failing drug tests and encouraged them to enter treatment, if needed. Failure to appear and test drug-free twice each week resulted in the swift and certain application of clearly defined penalties. Under this sanctions approach, defendants received case management and were

referred to community-based treatment, if needed or desired.

The Center for Substance Abuse Treatment and the National Institute of Justice funded an evaluation to examine the programs' impact on eligible defendants—the target group—and those who agreed to participate in the two intervention services. Key components common to all three dockets were early intervention, frequent drug testing, judicial monitoring of each defendant's progress, and a computerized system that provided judges immediate access to defendants' drug test results.

The study found reductions in drug use during pretrial release for defendants in both experimental dockets, reductions in arrests during the year after sentencing for sanctions program participants, and reductions in drug-related social problems for treatment program participants.

Supporting research

Specialized drug dockets, often in the form of drug courts, have emerged in a number of jurisdictions, supported by research indicating that:

- **Drug use is directly linked to crime.** Drug-using offenders are

Issues and Findings

continued...

when program participants were compared to the standard docket sample.

- Sanctions program participants who attended Narcotics Anonymous/Alcoholics Anonymous during the program period had a significantly lower likelihood of heroin and/or cocaine use in the year after sentencing.
- Treatment program participants reported significantly fewer drug-related social problems than standard docket participants in the year after sentencing. However, sanction docket defendants did not report similar reductions in drug-related social problems.
- Sanction program participants said agreeing in advance to the sanctions and the rules for applying penalties gave them a feeling of control.
- The twice-weekly drug tests proved to be a relatively inexpensive strategy for screening defendants for drug use in a timely manner. Using tests as a screening process enabled the intervention programs to devote their staff resources to known users.
- The significant reductions in arrests among sanctions program participants resulted in a total net benefit of \$713,570, savings of about \$2 for every \$1 in program costs.

Target audience: Federal, State, and local court administrators and judges; State and local government administrators; State and local police agencies; drug treatment programs; and researchers.

involved in high rates of criminal activity; the frequency and severity of their criminal behavior grows as their drug use increases.² Drug addicts commit as much as four to six times more crimes while using drugs than when they are not abusing narcotics, a pattern that is even more pronounced among habitual offenders.^{3, 4}

- **Higher rates of arrests, stricter laws, and more aggressive sentencing policies do not deter many drug users exposed to these penalties.** This leads to a revolving door scenario in which drug-involved offenders appear repeatedly before the courts. One study found 60 percent of opiate-dependent Federal parolees were reincarcerated within 6 months of release—virtually all for narcotics-related crimes—at an incarceration cost of more than \$27,000 per person, per year.⁵
- **Contrary to popular opinion, drug treatment is effective**—not for everyone and not all the time, but, on average, it works. The Drug Abuse Treatment Outcome Study (DATOS) showed that the percentage of regular cocaine users dropped from 66 percent in the year before treatment to 22 percent in the year after treatment among those receiving long-term residential treatment, while the percentage reporting predatory illegal activity dropped from 41 percent to 16 percent. The National Treatment Improvement Evaluation Study found 40 percent to 50 percent of regular cocaine and heroin users who spent at least 3 months in treatment were almost drug-free in the year after treatment, regardless of the treatment type. This 5-year study of more than 4,000 drug treatment clients found large and significant decreases in their alcohol and drug use, criminal activity, AIDS risk, and homelessness and increases in their

employment, income, and physical and mental health 1 year after discharge. At least three major studies indicate that clients who stayed in drug treatment for 3 months or longer reported greater reductions in drug use than those who received less treatment, regardless of treatment type.⁶

- **Criminal justice intervention with drug-involved offenders can increase participation in treatment and reduce crime.** Studies from the California Civil Addict Program, community-based methadone maintenance programs, therapeutic communities, and drug court outpatient programs found lower crime rates among offenders who received drug treatment.⁷ An American University survey of the 200 oldest drug courts found that 70 percent of those offenders who entered the programs remained active in treatment at the end of 1 year.⁸ In Dade County, Florida, drug court defendants were less likely to recidivate and had longer periods to rearrest than other felony drug defendants.⁹ Treatment combined with urinalysis and court monitoring with sanctions is more likely to be successful than treatment alone.¹⁰
- **Criminal justice intervention is a good investment of public funds.** The Honolulu Drug Court in Hawaii estimated it saved between \$677,000 and \$854,000 per year in averted prison costs for offenders who would have been incarcerated if not successfully treated.¹¹ The Multnomah County Drug Court in Oregon saved nearly \$2.5 million per year in criminal justice costs. When savings in victimization, theft reduction, public assistance, and medical costs were added, the payoff rose to a little more than \$10 million per year.¹²

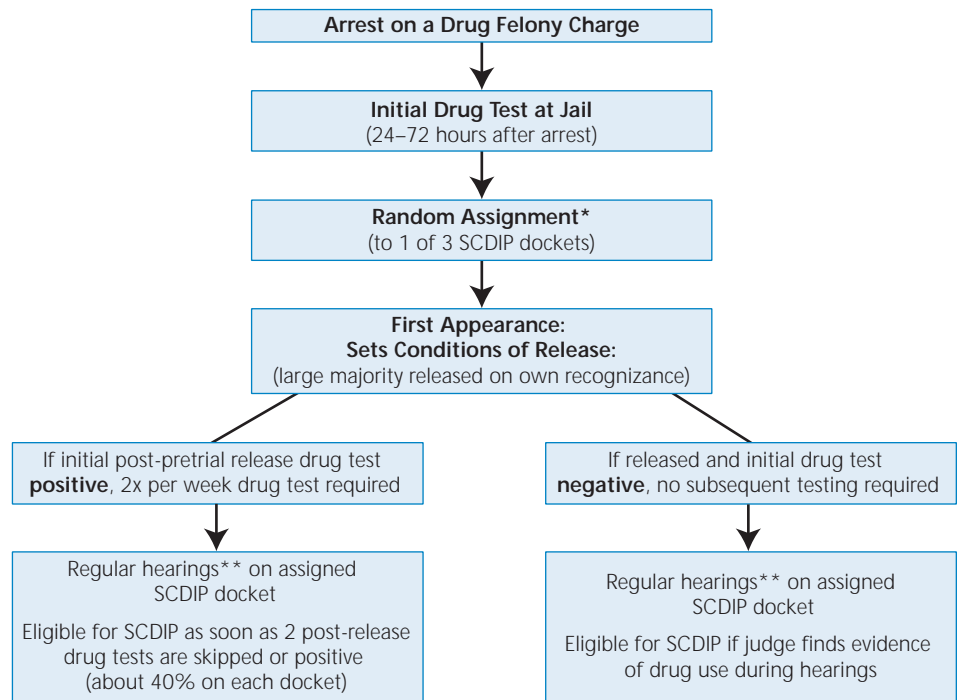
Identifying defendants for drug interventions

Defendants arrested on felony drug charges were randomly assigned to one of the three drug dockets prior to their first court appearance. Docket assignment was made prior to determining defendants' program eligibility.

On each of the three dockets, defendants were offered a plea at an early hearing. Pleas were not negotiated after the first offer. If the defendant accepted the offer, he or she remained on the docket, and the same judge handled the case throughout pretrial and sentencing. If the defendant refused to accept the plea offer, he or she was assigned to a separate trial docket. Status hearings occurred about once a month, and defendants could be identified as eligible at any one of these hearings.¹³ Case processing proceeded as usual and if and when a defendant on one of the two experimental intervention dockets (treatment or sanctions) exhibited drug problems, the intervention was offered.

Drug testing was the primary means used to identify drug-using defendants. The process is illustrated in exhibit 1. Detained arrestees were routinely tested for drugs by the Pretrial Services Agency (PSA), usually within 24 hours of arrest. Positive drug tests or reports of current drug use on a PSA intake interview resulted in mandatory twice-weekly drug testing as a condition of release. PSA staff regularly reviewed defendants' test results prior to each hearing and flagged the files of those defendants who tested positive for drugs at arrest and failed two subsequent drug tests as eligible for intervention. Drug test failures included positive tests, missed tests, and submission of tampered urine samples.¹⁴

Exhibit 1. Case identification for Superior Court Drug Intervention Program (SCDIP)



* Defendants were not allowed to transfer to another SCDIP docket.

** Plea offers were made at regular docket hearings and could occur before, after, or at the same time a defendant became eligible for SCDIP, and the program offer was not contingent upon acceptance of the plea. However, if the plea was rejected, defendants transferred out of the SCDIP dockets to a trial docket.

Drug testing took place at PSA's highly automated laboratory in the court house. The laboratory used EMIT urinalysis to test for a full screen of drugs—cocaine, marijuana, PCP, and heroin.¹⁵ The state-of-the-art technology included picture identification of defendants, supervised submission of samples with a guaranteed chain of custody, and quality control procedures managed by an onsite laboratory supervisor. Test results were automatically entered into a sophisticated computer program that had information on the defendant and the case. Judges received test results

within 30 minutes via computers at the bench in each courtroom. Judges on all three dockets frequently referred to their computers during hearings. Disputed results were confirmed by gas chromatography.

Defendants were dropped from the program if their case was dismissed or they transferred to a trial docket less than 30 days after becoming eligible (the percentage of cases going to trial was less than 5 percent and did not differ significantly by docket). A few defendants in the treatment program continued in treatment while they

appeared on the trial docket but were not included in the evaluation sample.

Exhibit 2 compares the intervention services and case handling practices of the three dockets during the demonstration program.

The standard docket

Standard case processing for drug felony defendants in D.C. Superior Court included twice-weekly drug testing and judicial monitoring of the results. Current computerized drug test information was

available at the judge’s bench at each hearing. The standard docket judges typically encouraged defendants who tested positive or missed tests to seek treatment but did not provide case management staff to assist them and did not levy sanctions for test failures. Cases of

Exhibit 2. Comparison of the three Superior Court Drug Intervention Programs (SCDIP)

	Sanctions Program (240 participants, 125 nonparticipants)	Treatment Program (140 participants, 206 nonparticipants)	Standard Docket
Intervention Content	<ul style="list-style-type: none"> • Drug tests—2x per week • Judicial monitoring • Court-imposed penalties for bad drug tests • Case manager assisted entry into community-based treatment as needed 	<ul style="list-style-type: none"> • Drug tests—3–5x per week • Judicial monitoring • Daily intensive outpatient drug treatment in court-based program • Court penalties or termination from the program for repeated violation of treatment program rules • Progression and graduation ceremonies for success 	<ul style="list-style-type: none"> • Drug tests—2x per week • Judicial monitoring • Voluntary participation in community-based treatment encouraged
Intervention Delivery to Participants	<ul style="list-style-type: none"> • Average number of days to program entry 64 • Accepted program offer 66% • Average number of days in program 132 • Average number of sanction hearings 4.7 • Number of all hearings average 12.5 • Median number of days to case disposition 251 • Total number of sanctions imposed 437 <ul style="list-style-type: none"> 3 days in jury box 182 3 days in jail 121 5–7 days in detox 82 7 days in jail 52 • Percentage who dropped out of drug testing 38% • Self-reported drug or alcohol treatment during pretrial period 82% Residential treatment (referred by program) 13% Detox 63% NA/AA 60% Outpatient 26% Methadone 17% Partial/day program 17% Other 31% 	<ul style="list-style-type: none"> • Average number of days to program entry 92 • Accepted program offer 40% • Average number of days in program 188 • Total number of progression, compliance, and graduation ceremonies 9.5 • Number of all hearings average 15.6 • Median number of days to case disposition 394 • Percentage of scheduled treatment days attended 36% • Percentage who dropped out of drug testing 50% • Self-reported drug or alcohol treatment during pretrial period 97% Residential treatment (referred by program) 8% Detox 48% NA/AA 73% Outpatient 36% Methadone 3% Partial/day program 30% Other 52% 	<ul style="list-style-type: none"> • Number of all hearings average 6.8 • Median number of days to case disposition 223 • Percentage who dropped out of drug testing 41% • Self-reported drug or alcohol treatment during pretrial period 74% Residential treatment (referred by program) 6% Detox 33% NA/AA 63% Outpatient 26% Methadone 7% Partial/day program 12% Other 25%

A Evaluation of drug courts

Although the D.C. Superior Court Drug Intervention Programs were not considered a drug court, they shared many key elements with drug courts, such as frequent urinalysis and judicial supervision. The court now runs a conventional drug court that combines the treatment and sanctions programs into a single program. To better understand drug courts in both policy and practice, the National Institute of Justice and the Drug Court Program Office have funded research into how they function and their effects upon defendant populations.

In 1997 and 1998, NIJ and DCPO jointly funded the first evaluations of four older drug court programs in Portland, Oregon; Las Vegas, Nevada; Pensacola, Florida; and Kansas City, Missouri. These sites were selected for two-phase evaluations. The first phase included a process evaluation of these programs, as well as an examination of

criminal recidivism of drug court participants. A report of the results of this research will be published in late 2000. The second phase of these grants is presently under way and is examining participant retention in treatment, changes in drug court participants' lifestyles, and cost benefits of these programs. Results for these second-phase programs will be available in 2001.

Later in 1998, in response to another solicitation, NIJ and DCPO funded a grant to examine 14 drug courts funded by DCPO in 1995 and 1996 under the Crime Act of 1994. This grant was designed for two phases of research. The first phase was to develop a framework for describing the structural components of drug court programs and should be completed late in 2000. The second phase will evaluate program impacts of these courts.

those defendants (who would have been eligible for intervention on the basis of two failed drug tests after pretrial release) reached disposition in about 7.5 months (233 days) and averaged 6.8 hearings. Many of these defendants voluntarily participated in community-based treatment programs during pretrial release, primarily Narcotics Anonymous/Alcoholics Anonymous (NA/AA) meetings. One-third reported attending detoxification services, and one-quarter reported receiving outpatient treatment. Nearly two-thirds (65 percent) were sentenced to probation, including 88 percent of those who tested drug free in the month before sentencing and 63 percent of those who tested positive or skipped drug tests in the month before sentencing.

The graduated sanctions program

Defendants eligible for the graduated sanctions program were offered a greatly increased chance of receiving probation rather than incarceration at sentencing for successful program completion. Two-thirds of the eligible defendants accepted the offer. Based on data from the postsentencing focus group, defendants' decisions to join the sanctions program appeared to be motivated by their desire to avoid incarceration. Despite concerns about the risks of sanctions, most eligible defendants and their defense attorneys were attracted by the increased likelihood the defendant would be placed on probation instead of being sentenced to incarceration.

Defendants entered the program about 2 months (64 days) after arrest. At program acceptance, participants signed contracts agreeing to submit to twice-weekly urinalysis tests and report to court for sanctioning if they tested positive, submitted a tampered sample, or skipped a test. Sanctions included 3 days in the jury box for the first infraction, 3 days in jail for the second infraction, 7 days in detoxification for the third infraction, and 7 days in jail for subsequent infractions.

The graduated sanctions program emphasized the swiftness and certainty of the sanction imposed.

- **Swiftness.** Each defendant was tested for a full screen of illegal drugs—cocaine, marijuana, PCP, and heroin. Participants were instructed to call a pretrial service officer the evening of their drug test to learn the results. If a participant tested positive, he or she was instructed to come before the judge the following day for a compliance hearing. If a participant failed to appear for the hearing, a bench warrant for arrest was issued.
- **Certainty.** Ninety-seven percent of the positive drug tests resulted in a scheduled compliance hearing. Excuses were accepted at 16 percent of the hearings. The judges adhered to the sanction plan most of the time, although a few defendants received the first sanction of 3 days in the jury box more than once, and some defendants were sent to detoxification before the third sanction, generally at their own request.

In the focus group, program participants said they agreed in advance to the sanctions and the rules for applying penalties because they felt it gave them control.

These defendants knew they could avoid penalties by not using drugs, and it was their responsibility to show the judge they were clean through drug test results. Because the sanctioning rules were simple and clearly explained in advance, defendants viewed the penalties they received as fair.

Participants were significantly more likely than standard docket eligibles to receive detoxification during the program but otherwise resembled the standard docket eligibles in their use of community-based treatment. Sixty percent of the participants reported attending NA/AA during the program, as did 63 percent of those on the standard docket.

Graduated sanctions program participation averaged about 4.5 months (132 days) and required an average of 4.7 sanction hearings per participant, imposing a total of 437 sanctions. Participants' cases remained open about 28 days longer than cases of eligible defendants on the standard docket (based on the median number of days to case disposition).

Although the overall rate of defendants receiving probation was 65 percent on the sanctions and standard dockets, those who tested clean in the month before sentencing increased their chances of probation. Of those who were clean, 95 percent of both groups received probation (some had prior criminal histories that precluded probation) compared to 56 percent who never participated, dropped out of testing, or tested positive for drugs during the month before sentencing.

The treatment program

Eligible defendants on the treatment docket were offered an intensive day treatment program and were told successful completion would greatly increase the likelihood they would be

placed on probation rather than incarcerated at sentencing. Those who accepted this offer entered treatment about 3 months (92 days) after arrest.

Less than half (40 percent) of the eligible defendants agreed to join the program. The defendants' reluctance to join the program stemmed from its requirement that they attend treatment 3 to 5 days each week. For some, this conflicted with work and child care responsibilities. Others wanted less intensive treatment.

One lesson from the high rate of nonparticipation is that multiple treatment options are needed because drug-involved defendants vary widely in the severity of their drug abuse. The court subsequently broadened the treatment options for drug-involved offenders, placing a large percentage of them in a highly focused day reporting program of several hours each week and reserving more intensive treatment for those who were more severely addicted to drugs.

The treatment program was based on 10 treatment modules that included group education, group and individual counseling, drug testing, and acupuncture. Clients moved through sequential treatment stages, which consisted of an orientation phase and a five-level intensive treatment phase toward graduation. Progression through the program was contingent upon the participants' progress toward the objectives outlined in the treatment plan. For the first year, the program met 5 days per week from 9 a.m. to 3 p.m. Subsequently, it shifted to shorter hours and 3 days per week.

Defendants' movement from one level to the next was designed as a reward for positive behavior and to acknowledge the completion of 21 days of treatment. The treatment team reviewed the defendants' progress and made recommenda-

tions for movement to the next level to the judge. The treatment staff imposed penalties for nonattendance, tardiness, and behavior problems in treatment but not for positive drug tests, which were handled by judges. Judicial admonishment and program termination were used to respond to persistent, serious problems. Progression to the next level was celebrated in a court ceremony during which the judge congratulated defendants for their success and presented small gifts to recognize their achievement of treatment goals. Treatment graduates were honored with certificates presented by the judge in courtroom ceremonies attended by friends, family members, fellow program participants, and staff from the court and treatment program.

Treatment participation averaged about 6.3 months (188 days). The program participants averaged 9.5 more hearings (progression and compliance hearings) than eligible defendants on the standard docket. Participants' cases remained open 171 days longer than defendants' cases on the standard docket due to the duration of the treatment program and a longer period before program entry.

Overall, 19 percent of the 140 participants graduated from the treatment program, and 9 percent left the program doing well (there were an additional 206 nonparticipants in the docket). The remainder were terminated as unsuccessful, absconded, or, in some cases, were transferred to other treatment programs. As was the case with the standard docket eligibles, about two-thirds of the participants, regardless of completion status, received probation.

The treatment program suffered substantial operational problems and was repeatedly forced to close due to flooding, heating problems, and poor ventilation.

District financial problems meant service components such as health screening, literacy training, and other support services could not be purchased. Participants attended a little more than one-third of the scheduled treatment days. Thus, the impact analysis does not test the effect of treatment under optimal conditions. A significant lesson for courts planning drug treatment linkages is that procedures for monitoring treatment quality need to be established.

The impact evaluation

The graduated sanctions program and the treatment program were each independently compared to the standard docket that offered only drug testing and judicial monitoring. The evaluation examined the impact of the programs on eligible defendants—the target group of defendants—and on the subset of eligible defendants who agreed to participate in the two programs, as shown in exhibit 3.

The evaluation samples consisted of all eligible defendants randomly assigned to the dockets between September 1, 1994, and January 31, 1996, and sentenced

prior to June 30, 1997.¹⁶ They included 346 eligible defendants on the treatment docket (140 treatment participants), 365 eligible defendants on the graduated sanctions docket (240 program participants), and 311 eligible defendants on the standard docket. The sample groups were mostly black (96 percent) and male (85 to 89 percent). The median age ranged from 30 to 33 years old. More than two-thirds tested positive for a stronger drug (cocaine, heroin, or both) in the first 60 days of drug testing.

Data on defendant outcomes included:

- **Drug use.** Results of twice-weekly drug tests administered during pretrial release and self-report data.
- **Criminal activity.** Records from the D.C. police and the FBI on arrests and self-report data.
- **Other outcomes.** Social and economic outcomes and postprogram use of services provided by self-report data.

The self-report data were collected from a personal survey with 482 defendants conducted by the Gallup

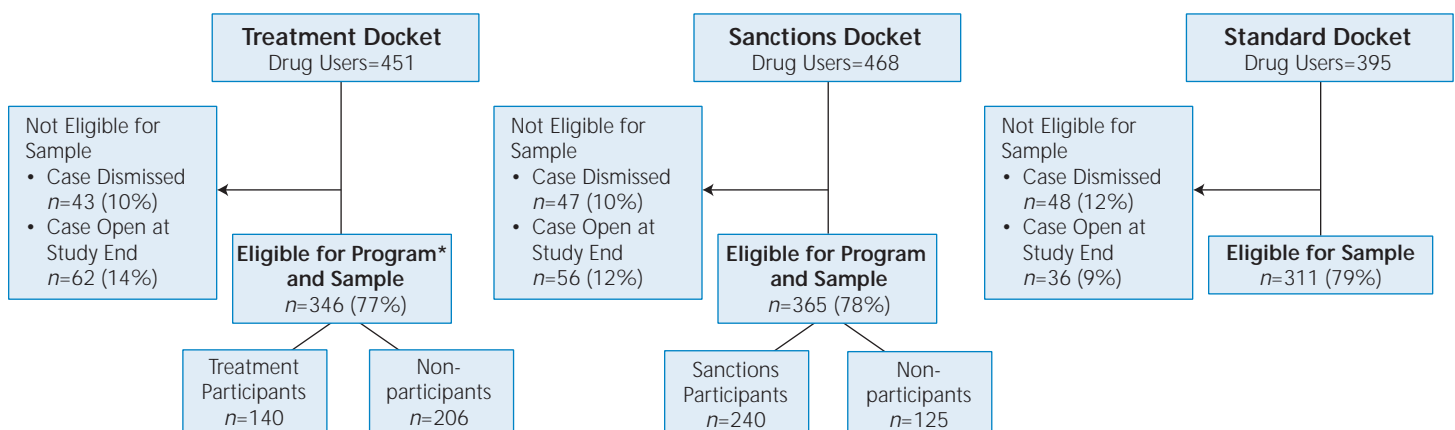
Organization 1 year after sentencing. The survey and records data were combined with court and program records on services delivered; results of focus group interviews with defendants; and process evaluation findings based on observations, interviews with program staff and judges, and review of policies, procedures, and reports.

A summary of impact evaluation findings is shown in exhibit 4. Results of the impact evaluation of reductions in criminal activity were used to estimate the benefits and returns to the programs in averted costs of crime.

Reductions in drug use

Both experimental programs significantly reduced defendants' drug use during pretrial release as compared to the standard docket. Program participants and nonparticipants on both the sanctions and treatment dockets were significantly more likely to test drug free in the month before sentencing, and a larger proportion of their tests were negative compared to the standard docket sample. The reductions in drug use were even more significant when only program participants were

Exhibit 3. Eligibility for SCDIP evaluation sample



*Court and arrest records were available for all sample members. Survey data available for sample subset.

Exhibit 4. Findings on the impact of the SCDIP graduated sanctions and treatment programs^a

	Sanctions Program Eligible Defendants (n=346)	Sanctions Program Participants (n=240)	Treatment Program Eligible Defendants (n=346)	Treatment Program Participants (n=140)
Impact During the Program Period				
Reduced Drug Use				
• Tested Drug Free in Month Before Sentencing ^b	P<0.001	P<0.001	P<0.01	P<0.01
• Percentage of Tests Dirty in Month Before Sentencing	P<0.01	P<0.001	P<0.01	P<0.01
Impact in the Year After Sentencing				
Reduced Drug Use				
• Any Self-Reported Use	NS ^c	NS (P<0.05) ^d	NS	NS
• Weekly Self-Reported Use	NS	NS	NS	NS
Reduced Criminal Activity				
• Any Arrests	NS	p<0.05	NS	NS
• Any Drug Arrests	NS	NS	NS	NS
• Any Violent Arrests	NS	NS	NS	NS
• Any Property Arrests	NS	NS	NS	NS
• Any Other Arrests	NS	NS	NS	NS
• Number of Arrests	NS	NS	NS	NS
• Number of Drug Arrests	NS	NS	NS	p<0.05
• Number of Violent Arrests	NS	NS	NS	NS
• Number of Property Arrests	NS	NS	NS	NS
• Number of Other Arrests	NS	NS	NS	NS
• Number of Arrests per Days on the Street	NS	p<0.05	NS	NS
• Any Self-Reported Offenses	NS	NS	NS	NS
• Any Self-Reported Drug Offenses	NS	NS	NS	NS
• Any Self-Reported Violent Offenses	NS	NS	NS	NS
• Any Self-Reported Property Offenses	NS	NS	NS	NS
• Any Other Self-Reported Offenses	NS	NS	NS	NS
• Number of Self-Reported Offenses	p<0.001	p<0.001	p<0.001	p<0.001
• Number of Self-Reported Drug Offenses	NS	NS	NS	p<0.001
• Number of Self-Reported Violent Offenses	NS	NS	p<0.001	p<0.001
• Number of Self-Reported Property Offenses	NS	NS	p<0.001	p<0.001
• Number of Other Self-Reported Offenses	p<0.001	p<0.001	p<0.001	p<0.001
Other Outcomes				
• Economic Gains	NS	NS	NS	NS
• Reduction in Drug-Related Problems	NS	NS	NS	p<0.05^e

a. The full report can be found on the Urban Institute Web site (www.urban.org) under the authors' names. This chart is intended to summarize the significant findings. The report presents the full models and coefficients for each finding.

b. Based on two tests per week per sample group. Defendants who dropped out of testing were counted as having two skipped tests per week.

c. NS: Not Significant.

d. Sanctions program participants who also attended NA/AA were significantly less likely to use stronger drugs in the year after sentencing.

e. Treatment program participants were significantly less likely to have an accident with a vehicle while under the influence of drugs and less likely to have arguments while under the influence of drugs in the year after sentencing.

compared to the standard docket sample (see exhibit 5).

Participants in the sanctions program and participants in the treatment programs were not significantly more likely to report use of drugs in the year after sentencing than defendants on the standard docket. However, the combination of sanctions and self-help treatment produced significant reductions in stronger drug use. Analysis of the interaction between sanctions program participation and attendance at NA/AA during the program period indicates the combination resulted in a significantly lower likelihood of heroin and/or cocaine use in the year after sentencing.

Reductions in criminal activity

Sanctions program participants were significantly less likely than the standard docket sample to be arrested in the year following sentencing (19 percent compared to 27 percent). Most of the difference was in the form of a reduced likelihood of an arrest for a drug offense. Although the sanctions program participants averaged 15 fewer days on the street in the year after sentencing, this difference in the opportunity to be arrested does not appear to be of sufficient magnitude to account for the differences in arrest rates. The estimated per-day probability of arrest among the pooled group of experimental participants was 0.0006. Adjusting for the 15 days of extra risk among the standard docket defendants would lower their arrest rate to 26 percent but would not change the significance of the difference between the groups. The lower likelihood of arrest was consistent with the finding that sanctions program participants had more days on the street prior to their first arrest after sentencing

than did the standard docket sample.

Treatment participants were not significantly less likely than standard docket defendants to be arrested in the year after sentencing, nor did they have more street days before first arrest during the year. However, they were significantly less likely to be arrested for a drug offense than those on the standard docket.

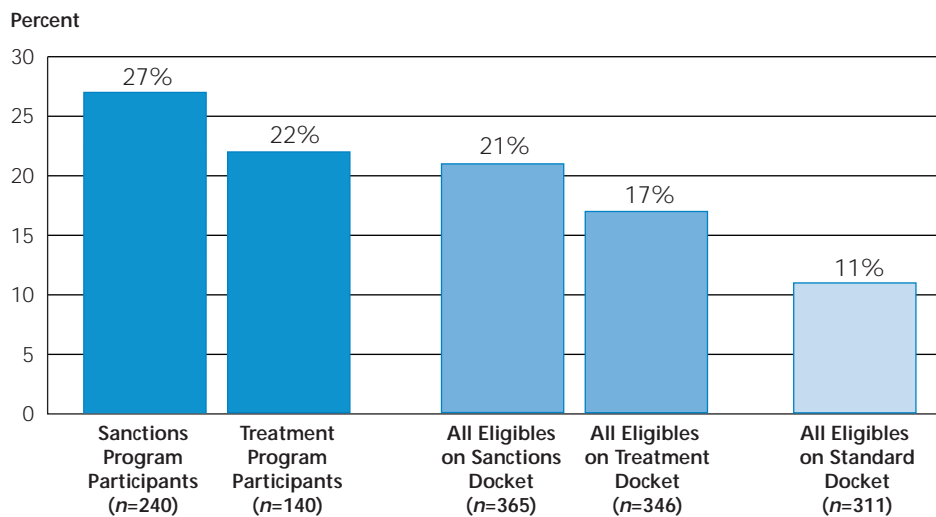
The full targeted sample of the eligible defendants on the experimental dockets did not show significant reductions in criminal activity measured by arrest records during the year after sentencing.

There were significant reductions in the number of offenses reported by participants in both the treatment and sanctions programs.¹⁷ Treatment participants reported significantly fewer offenses in all crime categories compared to the standard docket sample. Sanctions program participants reported significantly fewer offenses overall and significantly fewer crimes in the “other offense” category. These differences were also significant when all eligible defendants on

these dockets are compared to eligible defendants on the standard docket. Analysis of the validity of these estimates against their arrest records and national estimates of the probability of arrest, given an offense, tend to call into question the validity of the self-report data for the treatment participants, but not for other sample members. About 40 percent of the offenses reported by the treatment participants were associated with an official arrest record, while 5 percent or fewer of the offenses reported by the standard docket defendants and sanctions participants were associated with arrests (similar to national evidence comparing arrests to victimization survey results). This suggests the treatment participants under-reported their criminal activity.

The estimated value of reductions in arrests among sanctions program participants was \$1,493,194. These benefits included reductions in the costs to victims and the reduced costs of arrest, prosecution, and incarceration. As a result, the sanctions program realized a net benefit of \$713,570

Exhibit 5. All clean drug tests in the month before sentencing*



* From court records.

after the additional costs of program services were deducted, a return of almost \$2 for every \$1 spent.

Social and economic impacts

Treatment program participants reported fewer drug-related social problems in the year after sentencing compared to the standard docket sample. These participants were less likely to have an accident with a car or other vehicle or argue with others while under the influence of drugs. However, there were no other significant differences in social problems or economic status in the year after sentencing when participants on the two experimental dockets were compared with defendants on the standard docket.

Program costs

The costs of operating the graduated sanctions and treatment programs were calculated as the difference in costs (incremental costs) between the sanctions and standard dockets and the treatment and standard dockets. Program cost categories included expenditures paid out of project funds, including salaries, fringe benefits, supplies, contractual services, and drug testing; court expenditures, including hearings for program participants; and below-market expenditures, including the in-kind costs of detoxification and jail space for those being sanctioned.

The sanctions program cost of providing the case management, hearings, warrants, detoxification, jail space for those being sanctioned, additional drug tests, and other aspects of the program was estimated to be \$3,248 per participant (\$10.78 per day in the program). The treatment program cost of providing the treatment, hearings, additional drug tests, and supplementary services was estimated to be \$8,708 per participant (\$21.01 per day in the program).

The biggest cost item was personnel, accounting for 62 percent of the treatment program costs and 43 percent of the sanctions program costs. Court services accounted for 25 percent of the treatment program costs and 32 percent of the sanctions program costs. Because the court routinely used twice-weekly drug tests, the additional drug tests required by the programs amounted to a modest 9 percent of the treatment program costs and 7 percent of the sanction program costs. For the sanctions program, other costs such as jail space for sanctions, warrants, and detoxification amounted to 16 percent of the total.

Interpreting the findings

The findings indicate positive outcomes for participants in both of the experimental programs. However, these findings must be interpreted cautiously because program participation was voluntary and may have attracted defendants motivated to change. Although the analyses controlled for differences in the type and severity of drug use and prior criminal history, the threat of selection bias cannot be ignored.

In generalizing from the findings, it is important to note that the potential impact of the graduated sanctions and treatment programs in other jurisdictions may be underestimated. The standard docket in the D.C. Superior Court devoted much more attention to defendant drug use than many courts. Defendants who tested positive for drugs at arrest were tested twice a week during pretrial release. The judges on this docket frequently referred to drug test results on their computers and encouraged defendants who continued to use drugs to seek treatment. Because the D.C. Superior Court already had these services in place for both the treatment and control populations, any crime reduction that

resulted from these activities would not have been captured. The finding that the number of crimes committed by these drug-involved felony defendants in the year after sentencing was lower by several hundred crimes per year than reported by addicts in other studies suggests the level of supervision and services provided exercised a substantial deterrent effect on all dockets.¹⁸ Similarly, standard docket defendants' relatively high rates of voluntary participation in community-based drug treatment may have resulted from the judicial encouragement and reduced their drug use and criminal activity.

The evaluation is not a robust test of the potential of treatment given the problems encountered in implementing the program. Subsequent evaluation of a well-implemented treatment program is needed before it can be concluded that treatment in a pretrial setting has such modest effects on defendant behavior.

Jurisdictions that do not currently have a drug testing program or encourage judicial monitoring of drug use, nonetheless, can expect costs for implementing similar programs to be higher than those in Washington. The program cost estimates presented in this document account for the additional expenditures for the sanctions and treatment services (including additional drug tests) but do not include the costs of the basic testing and the very sophisticated computer system in place to support the court. For similar reasons, jurisdictions without computerized records of test results and active judicial involvement might expect to see additional significant impacts of program operation.

The impacts reported must also be considered in light of the characteristics of the eligible population targeted

for intervention, which consisted of all defendants charged with drug felonies. Unlike many drug courts that exclude defendants convicted of a violent offense or facing pending charges for a violent offense (required for Federal drug court funding), the programs were open to those individuals with long criminal histories as well as first-offenders. Unlike many drug courts, the program was not limited to addicts because eligibility for the program was based on drug test results, not individualized assessments of addiction. As a result, the program participants varied widely in the severity and duration of their drug use.

Lessons for court-based drug intervention programs

One important lesson from the sanctions program was the effectiveness of combining treatment and sanctions. Both the treatment and graduated sanctions programs reduced drug use during the period of supervision. However, the results indicate more lasting effects can be achieved by combining graduated sanctions with voluntary participation in NA/AA, as evidenced by the lower likelihood of heroin and cocaine use in the year after sentencing among the defendants receiving both.

The results also point to the importance of getting the defendants' up-front commitment to the rules. In the focus group, sanction program participants said they agreed in advance to the sanctions and the rules for applying penalties because it gave them a feeling of control and a sense they were treated fairly. These defendants knew they could avoid penalties by not using drugs, and it was their responsibility to show the judge they were clean through drug test results. This "contingency contract" between the judge and defendant clearly

differentiates these sanctions from imposed penalties using poorly understood or inconsistently enforced rules.

The twice-weekly drug tests were a relatively inexpensive strategy for screening defendants for drug use in a timely manner. The majority of those failing two drug tests did so within a month to 6 weeks of arrest. Using tests as a screening process enabled the intervention programs to devote their staff resources to conducting individualized assessments (in the treatment program) or seeking community-based treatment programs (in the sanctions program) for those defendants known to use drugs. By focusing assessments on the subset of known users, the court identified a diverse and relatively large group of drug-involved offenders.

Strong and cohesive leadership was important to the success of the programs. The judges' commitment to program implementation was one of the strengths of the experimental demonstration. Judges are reassigned annually in Washington, and the drug felony dockets were treated as one of the regular assignments. A total of nine judges—three per docket—presided during the demonstration period. Despite the expected diversity in style (some were viewed by defendants as stricter than others, some as friendlier than others), all performed effectively in these assignments, closely followed the program procedures, actively participated in monthly meetings to discuss procedures and issues, and collaboratively worked to solve problems and modify procedures as needed across the entire period of the demonstration. The judges met monthly with representatives of the U.S. Attorney's Office, public defenders, and the pretrial and probation agencies. This group has continued to meet and guide drug court interventions for the D.C. Superior Court.

Notes

1. Funds for the program were provided by the Center for Substance Abuse Treatment (CSAT) through an interagency agreement with the National Institute of Justice. This evaluation was supported by CSAT and NIJ.
2. Anglin, M. Douglas, and Thomas H. Maugh II, "Ensuring Success in Interventions with Drug-Using Offenders," *Annals AAPSS* 521 (1992): 66–90.
3. Gropper, Bernard A., *Probing the Links Between Drugs and Crime*, Research in Brief, Washington, DC: U.S. Department of Justice, National Institute of Justice, 1985, NCJ 096668.
4. Vito, Gennero F., "The Kentucky Substance Abuse Program: A Private Program to Treat Probationers and Parolees," *Federal Probation* March 1989: 65–72.
5. Metzger, D., G.E. Woody, D. Wilson, A.T. McLellan, B. Vandergrift, and C.P. O'Brien, "Naltrexone Pharmacotherapy for Opioid Dependent Federal Probationers," *Journal of Substance Abuse Treatment*, 1996.
6. U.S. General Accounting Office, *Drug Abuse: Studies Show Treatment Is Effective, but Benefits May Be Overstated*, Report No. GAO/T-HEHS98-185, Washington, DC: U.S. General Accounting Office, 1998.
7. See Anglin, M. Douglas, and Thomas H. Maugh II, "Ensuring Success in Interventions with Drug-Using Offenders," and Field, Gary, "The Effects of Intensive Treatment on Reducing the Criminal Recidivism of Addicted Offenders," *Federal Probation*, December 1989: 51–56.
8. American University, *Looking at a Decade of Drug Courts*, Washington, DC: U.S. Department of Justice, Office of Justice Programs, Drug Courts Program Office, 1998, NCJ 171140.
9. Goldkamp, John, *The Relative Risk of Implementing a Treatment-Oriented 'Drug Court': Findings from Dade County*, paper presented at the 45th annual meeting of the American Society of Criminology, Phoenix, AZ, 1994.
10. Falkin, Gary, *Coordinating Drug Treatment for Offenders: A Case Study*, a report to the National Institute of Justice, Washington DC: U.S. Department of Justice, Office of Justice Programs, National Institute of Justice, 1993.

11. Cited in Belenko, Steven, "Research on Drug Courts: A Critical Review," *National Drug Court Institute Review* 1 (1) (Summer 1998): 1-42.

12. Finigan, Michael, *An Outcome Program Evaluation of the Multnomah County S.T.O.P. Drug Diversion Program*, a paper prepared for the State Justice Institute and the Multnomah County Department of Community Corrections, West Linn, OR, 1998.

13. Defendants were not allowed to transfer to another master calendar and could not enter a program offered on another master calendar docket.

14. A few defendants (about 5 percent) were identified as eligible on the basis of information presented during a hearing because they wanted drug treatment, had a history of drug possession charges, or used drugs regularly.

15. The amphetamine screen was dropped on July 12, 1995, due to extremely low levels of use.

16. Eligible defendants were those offenders who failed two drug tests while on pretrial release and thus were targeted for intervention. Participants were that subset of the targeted

population who were offered the program and accepted participation in it.

17. The finding of significance is based on multivariate Poisson regression modeling. The parameter estimates for group differences are: treatment participants = $-.85^{***}$; sanctions participants = $-.09^{***}$.

Adele Harrell, Ph.D., is Director of the Program on Law and Behavior at the Urban Institute. At the time this evaluation was conducted, Shannon Cavanagh was a research associate at the Urban Institute; she presently is pursuing her doctorate in sociology at the University of North Carolina; and John Roman is a research associate at the Urban Institute. This research was supported by the National Institute of Justice under grant number 94-IJ-CX-K011 to the Urban Institute. Funds were provided by the Center for Substance Abuse Treatment of the Substance Abuse and Mental Health Services Administration of the U.S. Department of Health and Human Services under an interagency transfer.

18. Bureau of Justice Assistance, *Offenders, Drugs, Crime, and Treatment: Literature Review*, Washington, DC: U.S. Department of Justice, Bureau of Justice Assistance, 1990.

Findings and conclusions of the research reported here are those of the authors and do not necessarily reflect the official position or policies of the U.S. Department of Justice.

The National Institute of Justice is a component of the Office of Justice Programs, which also includes the Bureau of Justice Assistance, the Bureau of Justice Statistics, the Office of Juvenile Justice and Delinquency Prevention, and the Office for Victims of Crime.

This and other NIJ publications can be found at and downloaded from the NIJ Web site (<http://www.ojp.usdoj.gov/nij>).

NCJ 178941

U.S. Department of Justice

Office of Justice Programs

National Institute of Justice

Washington, DC 20531

Official Business

Penalty for Private Use \$300

PRESORTED STANDARD
POSTAGE & FEES PAID
DOJ/NIJ
PERMIT NO. G-91