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The Impact of a Mature Drug Court Over 10 Years of Operation: Recidivism and Costs

FINAL REPORT

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ABSTRACT

This study examined the impact of a single drug court on the total population of drug court-eligible offenders over a 10-year period in Portland, Oregon. This drug court, the Multnomah County Drug Court in Portland, Oregon, is the second oldest in the United States. The Program was originally designed to be a pre-plea offer to individuals arrested on drug charges. The program began accepting probationers and parolees (as well as pre-plea clients) in 1995 and became a completely post-plea program in 2000. This study covers the period from program start in 1991 through 2001.

The entire population of offenders, identified as eligible for drug court by the Multnomah County District Attorney's Office over a 10-year period, from 1991 to 2001, was identified and tracked through a variety of administrative data systems. Approximately 11,000 cases were identified; 6,500 participated in the Drug Court program during that period and 4,600 had their case processed outside the drug court model. Because the program changed from pre-plea to post-plea over time, the population of drug court participants used in these analyses contains a mix of both pre- and post-conviction offenders. Data on intermediate and long-term outcomes were gathered on each offender, with a particular emphasis on criminal recidivism (re-arrest) as a primary outcomes measure. The outcome data were drawn in late 2005 and early 2006, allowing a minimum of 5 years of follow-up on all cohorts and more than 10 years on many cohorts. Data on costs were gathered using a modified Transactional Cost Analysis Approach to allow us to conduct a cost-benefit analysis. Costs were calculated in terms of investment costs (transactions associated with the drug court-eligible case), outcome costs (transactions that occurred after participants entered the program, not associated with the drug court-eligible case) and total costs per participant.

The analysis of the data focused on both the overall impact of the drug court on the target population over time, variations over time on that impact, and external and internal conditions that influenced these outcomes. A cost analysis was conducted to assess the overall investment of taxpayer money in the court compared to its benefits.

Results included significantly reduced recidivism for drug court participants up to 14 years after drug court entry compared to eligible offenders that did not participate. Drug court judges that worked longer with the drug court had better participant outcomes. Judges that rotated through the drug court twice had better participant outcomes the second time than the first. Investment costs in the drug court program were $1,392 less than the investment costs of business-as-usual. Savings (benefits) due to reduced recidivism for drug court participants totaled more than $79 million over the 10-year period.

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EXECUTIVE SUMMARY

Background and Purpose

This study was designed to look at the operations and outcomes of a single drug court in Multnomah County (Portland, Oregon) over a 10-year period of court operations through examining the entire population of drug court-eligible offenders over that period. By examining the entire population, rather than sampling, we hoped to describe for policymakers the effects of drug court on the system as it operated during that decade. By examining operations and outcomes, we hoped to add to our knowledge about external and internal changes and how they affect drug court success or failure.

The Multnomah County Drug Court in Portland, Oregon, is the second oldest drug court in the United States. Multnomah County instituted their drug court, named the STOP (Sanctions Treatment Opportunity Progress) Program, in August 1991 at the instigation of Judge Harl Haas, using a Byrne grant and local city funds. The program was originally designed to be a pre-plea offer to individuals arrested on drug charges. It began accepting probationers and parolees (as well as pre-plea clients) in 1995 and became a completely post-plea program in 2000. This study covers the period from program start in 1991 through 2001.

Method

The entire population of offenders, identified as eligible for drug court by the Multnomah County District Attorney's Office over a 10-year period, from 1991 to 2001, was identified and tracked through a variety of administrative data systems. Approximately 11,000 cases were identified; 6,500 participated in the Drug Court program during that period and 4,600 had their case processed outside the drug court model. Because the program changed from pre-plea to post-plea over time, the population of drug court participants used in these analyses contains a mix of both pre- and post-conviction offenders. Data on intermediate and long-term outcomes were gathered on each offender, with a particular emphasis on criminal recidivism (re-arrest) as a primary outcomes measure. The outcome data were drawn in late 2005 and early 2006, allowing a minimum of 5 years of follow-up on all cohorts and over 10 years on many cohorts. (For some individuals, over 14 years of follow-up data were available). Data on internal measures of Drug Court participation, internal changes in the Drug Court over the years and external changes in the criminal justice, court and substance abuse treatment systems were also gathered for the same period.

Data on costs were gathered using a modified Transactional Cost Analysis Approach to allow us to conduct a cost-benefit analysis. Costs were calculated from a previous study on this program that involved intensive tracking of 155 individuals that entered the Multnomah County Court System on drug court-eligible charges. Costs were calculated in terms of investment costs (transactions associated with the drug court-eligible case), outcome costs (transactions that occurred after participants entered the program, not associated with the drug court-eligible case) and total costs per participant.

The unit costs for these analyses were based on the unit costs per transaction calculated in a previous study of this Drug Court (Carey and Finigan, 2003) and were updated to reflect 2006-2007 fiscal year dollars. Analyses were performed controlling for differences in age, ethnicity, gender, time at risk and number of arrests in the two-years prior to the Drug Court eligible arrest. Drug of choice was not available for the comparison group. Recidivism was defined as re-arrests after Drug Court entry, not new convictions.

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Results

The results were focused around answering some specific policy questions:

POLICY QUESTION # 1. WHAT IS THE OVERALL IMPACT OF THE MULTNOMAH COUNTY DRUG COURT ON CRIMINAL RECIDIVISM?

Overall, for the entire population of eligible offenders, the Drug Court significantly reduced the incidence and frequency of criminal recidivism for participants compared to offenders who did not participate. Including all offenders who were eligible for the Drug Court during the total 10-year period, over 5 years from the Drug Court petition hearing, the incidence of re-arrest was reduced by nearly 30%.

The Drug Court reduces the incidence of drug crimes substantially for up to 14 years after the petition hearing. The effect is statistically significant after controlling for age, gender, race, and 2 years of prior criminal history for all but year 14, where the number of cases available for the analysis drops to only 317.

POLICY QUESTION # 2: DOES THE DRUG COURT SHOW CONSISTENT LEVELS OF SUCCESS IN REDUCING RE-ARRESTS EACH YEAR OF THE 10-YEAR PERIOD?

The Multnomah County Drug Court, while overall demonstrating a positive effect over the 10-year period, had better years and worse years. Specifically it had two "rough periods." The first was the first 2 years of the program when there were either no positive results (1991) or small gains (1992). The second period is 1996, which demonstrates no success and, interestingly, is the year the Drug Court temporarily moved to a location outside the courthouse (and experienced other disruptions as well). There are two points that this emphasizes. First, the early implementation period of a drug court is not the best period to choose to examine the court's effectiveness. In addition, it should be remembered that this drug court was the second in the nation and in 1991-1992 no one knew how to operate a successful drug court (e.g., there were no "10 key components"). The second point that these data illustrate is that care should be taken about assessing the performance of a drug court based only on a single cohort year.

POLICY QUESTION #3: DO INTERNAL OR EXTERNAL CHANGES AFFECTING POLICIES AND PROCEDURES OF THE COURT AFFECT ITS SUCCESS OR FAILURE?

A number of external changes from 1991 to 2001 that might have had an influence on court operations and outcomes were identified. These external changes were categorized as follows: criminal justice system changes, changes in the Multnomah County substance abuse treatment system, and changes in the Oregon managed care system. With one exception, these changes appeared to have no statistically significant impact on subsequent recidivism for this population (drug court and comparison group). The effect of group membership (drug court or comparison group) remained statistically significant in the model. We can therefore conclude that these external changes were likely not the source of the found positive effects of drug court.

There was one exception to the above conclusion. The introduction of a Central Intake System under the federally funded Target Cities Project in 1993, and its closure in 1998, are significantly and substantially related to subsequent recidivism. The effect of Central Intake was predominantly with the comparison group. This makes sense in that Central Intake's purpose was to get more and better treatment to those offenders that were "slipping through the cracks in the system" and therefore would have impacted the comparison group more and the Drug Court group less. This has interesting implications. It would suggest that during the period of Target Cities

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Central Intake (1993-1998), the Drug Court effect is somewhat understated because the comparison group is also receiving benefits from Central Intake. This also illustrates the importance of understanding factors that may have affected the comparison group, as well as the program group, in this kind of study.

Internal changes in drug court policies and procedures were also examined, including changes in eligibility criteria (pre- vs. post-plea), changes in funding, and changes in Drug Court Program policies around insurance and managed care. These were entered into the logistic regression model to see if the changes had an impact on the recidivism (arrest/no arrest) of the drug court group when age, race, gender, and prior arrest history are also in the model. The results showed that none of these changes appears to be associated with any change in re-arrests in the Drug Court group. This, of course, does not mean they had no indirect impact, merely that they show no gross direct impact.

In addition, several instrumental variables relative to success in the drug court program were examined for their effect on subsequent recidivism. A negative effect was found for the use of sanctions. Specifically, the use of jail sanctions was related to higher recidivism. Positive effects were found for a higher number of days in substance abuse treatment and for several judicial factors. *Higher days in treatment* was significantly related to lower recidivism. Judicial factors are discussed in response to Policy Question # 4.

POLICY QUESTION # 4: DO CHANGES IN JUDICIAL LEADERSHIP AFFECT THE SUCCESS OF THE DRUG COURT?

There were four sub-questions addressed within Policy Question #4.

4a: Do judges differ in their success in reducing re-arrests?

While all judges showed reductions in re-arrests, some judges showed greater reductions than others. The reductions in re-arrests ranged from 4% to a substantial 42%, demonstrating clear differences. This suggests that drug court results may vary depending on the judge involved.

4b: Do eras where multiple judges are conducting Drug Court do worse than eras in which only a single judge is operating the Program?

There were no differences between eras of a single court judge and multiple judges, although the period of multiple judges was relatively short. Also, the STOP Program may not be a good test of this. In the multiple judge eras, there was always a single pre-dominant judge who had “help” from a variety of other judges, and many of the judges who “helped” were former STOP Program judges and had learned from previous experience. This is a very different situation from a setting where different judges are simply rotated through drug court on a regular (e.g., yearly) basis.

4c: Did the Drug Court improve its success rate over time? Did later judges do better than the earlier judges?

The early drug court judges did not have as positive outcomes (on average) as judges who came later. It is likely that judicial procedures and practices improved over time. The Multnomah County Drug Court was the second drug court in existence nationally. In many ways it helped invent standard drug court procedures. These data suggest that over time the Drug Court learned from experience and improved its success rate. One way it worked to improve its success rate was to create procedures for passing knowledge learned from experience from one judge to the next. The Program noticed a difference in the quality of the judges’ work when each Drug Court judge began a more formal process of teaching the drug court model to the incoming judge.

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Policy Question # 4d: Do judges improve with experience? Did judges who had multiple eras improve their success rate in the second era?

Of great interest is the finding that judges who had more than one rotation through the Drug Court had better results their second time on the Drug Court bench. This implies that judges learn from their experience on the bench and that having the same judge continue to preside over a drug court over time will result in better outcomes. Given that one of these judges had several years between his two eras, this also implies that a "pool" of judges who have experience in drug court could be rotated through a drug court on a regular basis, allowing the program to benefit from the judges' experience while also allowing the judges to preside over traditional court cases on alternate years.

POLICY QUESTION #5: DID THE MULTNOMAH COUNTY DRUG COURT SAVE TAXPAYER RESOURCES COMPARED TO THE COSTS OF TRADITIONAL COURT PROCESSING?

Consistent with the previous findings from the single cohort study (Carey and Finigan, 2003), the data from over 10 years of operation show that the Multnomah County Drug Court actually costs less to operate than the cost of "business as usual." The investment cost per participant for the STOP Program was $5,168 while the cost per offender for "business as usual" was $6,560, a difference of $1,392. These data suggest that the finding in 2003 was not simply relevant to the specific time period. Overall, this means that, independent of avoided system costs accruing from positive outcomes, the Drug Court's operation itself saved the taxpayer more than $9 million over the 10-year period. Sources of this investment cost savings include treatment and probation services.

In terms of outcome cost savings (i.e., avoided costs) to the taxpayer accruing from positive results for Drug Court participants, there are cost savings in outcomes across every transaction. The largest benefit is due to less use of jail days by Program participants followed by less use of prison beds. The total outcome cost savings over a 5-year period from the petition hearing is $6,744 per participant, and $12,218 when victimization costs are included.
The outcome cost savings, when multiplied by the number of people who entered the Multnomah County Drug Court's STOP Program from 1991 through 2001, result in a total system savings of more than $79 million (or $7.9 million per year).

These positive outcomes were counted for just 5 years after the petition hearing date in order to include all 6,502 participants who entered the program during the 10-year period. As described earlier, the lower recidivism for the Drug Court participants continues up to 14 years after the petition hearing. This means that the cost savings will continue to accumulate for these participants for many years after the 5-year end point used in these cost calculations. If these savings continue to accrue at $7.9 million per year, the cost savings after 14 years could be as high as $111 million. Note that these numbers are outcome costs (savings) only and do not include the investment cost savings presented earlier.

The opportunity to conduct a longitudinal study on a single drug court and to examine its effect on the entire target population does not happen often. Gaining permission to access data and coordinating the data collection is an immense task. Yet, this has offered some insight into the long-term operation of drug courts that is extremely useful for both for researchers and policymakers. This paper presents the result of just some of the analyses that are possible for this unique set of data. Future work could continue to explore other possible analyses and answer other important policy questions, such as cost differences between pre-plea and post-plea cohorts.

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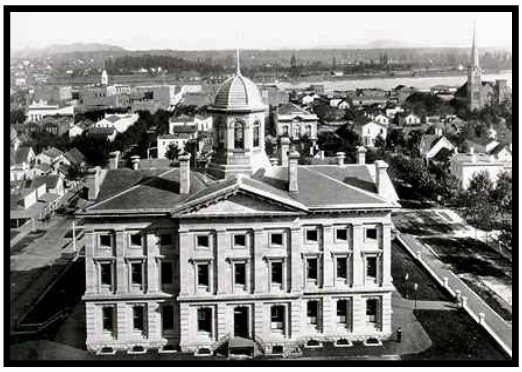
INTRODUCTION



In 2005, NPC Research (NPC) secured a contract from the National Institute of Justice (NIJ) to examine over 10 years of history of the operation of the second oldest drug court in the United States, the Multnomah County Drug Court in Portland, Oregon. Although NPC had performed cost studies of this drug court's STOP (Sanction Treatment Opportunity Progress) Program[1] twice in the past (in 1996 and 2003), this was a unique opportunity since it is seldom possible to examine the long-term operations of the drug court model in a single location. It was also unique in that there was access to data on the entire population of offenders in Multnomah County that are the traditional targets of the drug court model. This allowed us to examine the overall system impact of the STOP Program on that population.

Few comprehensive studies of the long-term benefits of drug courts have been conducted. All studies to date, including the two previously conducted in this site (Carey & Finigan, 2003; Finigan, 1996), have been based on samples of drug court clients. Non-representative sampling is an ever-present hazard to inference because drug courts are affected by large, shifting confounding factors including changes in eligibility criteria and changes in the offender population over time. This study was conducted with the entire drug court-eligible population over a 10-year period in a system that processes on the order of 1,000 clients (or greater) each year, about 50 percent of whom participated in drug court and the rest who experienced traditional court processing ("business as usual"). This creates the opportunity for a highly dependable case study.

The following tasks were accomplished under this contract NPC:

- Collected and examined criminal justice, treatment, and other data on 11,102 cases that met eligibility requirements to be in drug court and either participated in drug court or were traditionally adjudicated.
- Analyzed the overall impact of the drug court model on criminal recidivism (re-arrests) when pre-existing differences between the two groups were controlled.
- Examined changes in judges, protocols and procedures in the drug court and their impact on subsequent recidivism.
- Developed cost and cost-benefit estimates for the impact of the drug court during this 10-year period from 1991 to 2001. (These costs were based on data collected in the previous 2003 study, which included intensive tracking of 155 drug court-eligible offenders over a 30-month period.)

This report is organized into four main sections. The first section is a statement and discussion of the problem. The second section discusses our research strategy. The third section details our research methodology. The fourth section presents our results including a discussion of the implications of these results for policymakers.

[1] Referred to in this paper as "the STOP Program" or "the Program."

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Statement and Discussion of Issues In Research on Drug Courts

The following section discusses the link between substance abuse and crime, drug courts as a response to this problem, the economic consequences of drug abuse, issues in an analysis of the effects of drug courts, project goals and key policy questions to be addressed by this research, and, finally, the importance of this research to policymakers, providers, and researchers.

THE LINK BETWEEN SUBSTANCE ABUSE AND CRIME

Underlying this project is the notion that "treatment works" for people with drug abuse problems. In other words, the provision of drug abuse treatment services can have an impact on an individual's behavior where the behavior of interest includes criminal activity and substance use.

There is a well-researched link between substance abuse and criminal behavior. In 1999, the ADAM program found that the percentage of adult male arrestees testing positive for an illicit drug at the time of arrest ranged from 50% in San Antonio, Texas, to 77% in Atlanta, Georgia (ONDCP, 2003). The combined impact of criminal activity and substance abuse is also well documented. Summary statistics gathered in 1996 from the Department of Justice suggest that nationally 36% of adult offenders were under the influence of alcohol *at the time of their offense* (Greenfeld, 1998). BJS reported in 2002 that 68% of jail inmates reported symptoms in the year before their admission to jail that met substance dependence or abuse criteria (Karberg & James, 2002).

Furthermore, there is evidence that treating substance abuse leads to a reduction in criminal behavior. For individuals receiving substance abuse treatment, the National Treatment Improvement Evaluation Study (NTIES, 1997) found significant declines in criminal activity between the 12 months prior to treatment and the 12 months subsequent to treatment. Those declines included:

- Self-reported incidence of selling drugs by 78 percent,
- Shoplifting by almost 82 percent,
- Supporting oneself largely through illegal activity by more than 48 percent, and
- Arrests for any crime by 64 percent.

Gerstein et al. (1994) found positive effects of drug and alcohol treatment on self-reported subsequent criminal activity in a statewide sample in California. In a study using administrative data, comparing those who completed treatment with a comparison group of those eligible but not receiving treatment in Oregon, Finigan (1996) also found significant reduction in police-report arrests for those who completed treatment.

DRUG COURTS AS A RESPONSE TO THIS PROBLEM

The prevalence of offenders with substance abuse issues in the criminal justice system was the primary impetus for the formulation of drug courts specifically designed to handle offenders who committed crimes while under the influence of drugs or alcohol. Drug courts represent a "combined systems" approach to treating offenders. Rather than the court system handing off an offender to the correction system and/or the treatment system and seeing the offender again only when the offender returned to the system as a re-offender, drug courts create a combined team effort involving resources from the district attorney's office, the public defender's office, probation and treatment providers, all under the leadership of a judge. This combined systems ap-

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proach has the potential to provide greater efficiency as well as heightened accountability for the offender. On the other hand, it creates complexity in understanding both the costs of the program and the avoided costs that may accrue from the impact of the program.

A relatively large number of impact studies have been conducted examining the outcomes of the drug court model (see reviews—GAO, 2005; Belenko, 1998, 2001, 2005). The quality of the research and the validity of the conclusions have varied depending on research design issues. First and foremost is the issue of comparison groups in quasi-experimental designs. Impact studies must be able to compare outcome results of drug court program participants to a valid comparison group that can represent the conditions of "business as usual" that would occur without a drug court. The major problem with comparison groups is the potential that some selection bias has been introduced in the development of these groups that will bias the comparison. For example, some drug courts have wanted to compare their graduates with those that enrolled in drug court but were terminated before completion. This clearly introduces a selection bias since those who graduated by definition represent those who succeeded at drug court and those terminated represent a group that failed. The graduates and those that were terminated belong to the same group (i.e., drug court participants). There is no comparison group. It is of little value to learn that "succeeders succeed, and failures fail" (Goldkamp, personal communication, 2002).

Most of the better research designs have used some sort of "business as usual" comparison group that is similar in fundamental characteristics to those who receive the program (e.g., Carey & Finigan, 2003; Carey et al., 2005). While unable to completely remove selection bias, this design is nonetheless particularly useful to policymakers trying to make decisions about alternative models. Belenko (1998) suggests examples of comparison groups used in valid drug court designs, including the following:

- Similar drug offenders, adjudicated before the drug court began;
- Drug court-eligible offenders who were referred to drug courts but did not enroll; and
- Matched samples of drug court offenders assigned to probation.

Although selection bias (such as motivational issues[2]) cannot be completely ruled out in these samples, matching these groups to a drug court sample (e.g., on criminal history, demographics) can produce a reasonable comparison for the policymaker between "business as usual" and drug court.

A few studies (e.g., Gottfredson, Najaka, & Kearly, 2003) have been able to conduct random assignment into treatment and control conditions. Although this approach provides the best ability to rule out potential selection bias (including motivational issues) in the development of a comparison group, it is not entirely free from problems. Random assignment is an artificial condition placed on a system and not truly a "business as usual" comparison. Also, assignment to groups early in the drug court referral process may result in mis-assignment.[3] However, Gottfredson's study using random assignment did find positive effects of the drug court program similar to

[2] Some researchers have questioned whether individuals who are eligible for drug court but choose not to go are less motivated to change their drug habits than those who choose drug court. Others have argued that the coercive nature of drug court brings non-motivated offenders into a program where they then gain motivation (e.g., Harrell, 2003).
[3] Gottfredson's (2003) well-controlled assignment conditions nonetheless experienced some mis-assignment as 9% of the treatment group did not participate in drug court, and 7% of the comparison group was enrolled in drug court. Random assignment is a difficult condition to maintain in real system settings.

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those using the comparison group methods outlined by Belenko, lending credibility to positive effects found in these research designs.

In one of Belenko's early drug court research reviews (1998), he suggested that the research findings are consistent with the following:

1. Drug courts are successful in engaging and retaining offenders in treatment.
2. Drug courts provide more comprehensive supervision of offenders.
3. Drug use is reduced for offenders who participate in drug court.
4. Criminal recidivism is reduced for offenders.
5. Drug courts can generate cost savings.
6. Drug courts can successfully bridge the gap between multiple publicly funded systems.

More recent research supports these conclusions. A recent drug court review by the General Accounting Office (GAO, 2005) concluded that drug courts can be effective in reducing recidivism and in reducing taxpayer costs due to positive outcomes for drug court participants. Some drug courts have even been shown to cost less to operate than processing offenders through business-as-usual (Carey & Finigan, 2003; Carey et al., 2005). The majority of research indicates that retention and completion of treatment programs have a positive effect in reducing drug use and criminal behavior (Belenko, 2001).

THE ECONOMIC CONSEQUENCES OF SUBSTANCE ABUSE

The economic consequences to society of drug and alcohol abuse have long been detailed. From a health perspective, untreated substance abusers produce tangible costs to health systems from both the health complications of substance use as well as increased accidents that result from the use of alcohol and drugs. In addition, substance abuse leads to other negative social behaviors that have cost consequences to other systems, such as the criminal justice system. French (1995) described an array of tangible and intangible costs of substance abuse. This underscores the fundamental reasoning of a cost-benefit approach to substance abuse treatment: untreated substance abuse is very costly to the individual, the individual's family and friends, and to taxpayers who must, in one way or another, fund the consequences of the negative social behaviors that result from substance abuse. Policymakers and practitioners need cost-benefit information because substance abuse treatment and the courts' increasing involvement in the treatment system (e.g., drug court) are perceived as expensive to implement, and data are needed to demonstrate that such treatment reduces costs in the long run.

Costs are defined here as taxpayer-funded resources (e.g., court time, treatment sessions) required to produce a program intervention. Benefits are avoided taxpayer-funded resources that accrue from positive program outcomes. Cost-benefit analysis is sometimes confused with cost effectiveness analysis. Cost effectiveness analysis compares the relative cost of several programs to achieve some given outcome. It is easier to accomplish than cost-benefit analysis since it does not require that the outcomes of the programs be expressed in economic terms. Cost-benefit analysis places economic value both on the cost of a program and its outcomes, which allows the calculation of a cost-benefit ratio—or the amount of the return on taxpayer investment.

Much of the literature on cost and cost-benefit research has been focused on assessing the impact of substance abuse treatment alone. This is somewhat easier, since the costs are incurred primarily in one system (the treatment system). However, with the advent of drug courts in the last few

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years there is a growing need to identify cost-benefit approaches that can be applied to drug courts with all the complexities involved in a combined systems model involving collaboration between multiple systems and agencies.

Issues in an Analysis of the Effects of Drug Courts

The purpose of this section is to describe some of the issues that arise in determining costs in drug courts. These issues require decisions to be made by the researcher that affect the research design. We will discuss some of these issues and the strategies we have adopted in our research design in order to address them. These issues are as follows:

- Sampling Issues
- Looking Inside the "Black Box"
- Use of Client Self-Report Data
- Recipient of the Cost or Benefit
- Opportunity Resources
- Linkage Between Publicly Funded Systems: The Transaction Cost Approach
- Continuum of Treatment

Sampling Issues

Most drug court evaluations have examined a specific court during a limited time period of its operation (usually 1 or 2 years). In the early period of the drug court movement, this was inevitable since drug courts were new and 1 or 2 years was often representative of the court's history. But as drug courts have matured, this approach raises questions about the representative nature of the time periods chosen. There has been some concern that the early years of implementation, with its attendant challenges, may not be representative of the court's long-term operations. Also, if drug courts' effectiveness is influenced by changes in procedures, policies and structures, then some time periods of change may not be as representative of their operations as times of stability. A researcher always runs the risk of choosing periods of study (often because the funder wants it done within a certain time frame) that are not very representative of stable court operations. Only by looking at the operations of a mature drug court over time can we actually capture a full picture of a court's effectiveness.

Another sampling issue is the perennial one of sample size and power. Often drug court evaluations do not do a power analysis to suggest the sample size needed for effect sizes that might be somewhat modest. It should be recognized that in a court system that processes hundreds or thousands of clients a year, even small effect sizes may be substantive. Too often drug court evaluation has rested on small (50-75 cases) or modest (100-250 cases) sample sizes, mainly because most drug courts do not have the capacity to process larger numbers of offenders, without examining closely the likelihood that these small sizes will detect anything but large effects.

The current study allows us to look at the entire target population in Multnomah County, both those in the STOP Program and those following traditional court processing, over 10 years of

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court operations.[4] In addition, the Multnomah County STOP Court has one of the largest capacities of any drug court in the country, at times processing up to 1,000 participants in one year.

Looking "Inside the Black Box"

Goldkamp et al. (2001), in an excellent exploratory analysis of the Portland (Multnomah County) and Las Vegas courts, argued that researchers needed to spend more time around the question of how drug courts work. Their study was the first to take a longitudinal look at the operations of drug court, examining the Portland court over a multiyear period (1991 to 1997). They followed a sample of drug court cases (about 75 per year) and two comparison groups: one that attended the initial defender orientation but did not enter drug court and a second group that skipped the defender orientation and simply did not enter drug court. Their study, which in many ways was a precursor to this study, examined both the ways that the drug court results changed over time and some factors that influenced those changes.[5] They examined follow-up periods of up to 3 years for the 1991 to 1994 period, up 2 years for the 1995 and 1996 period, and 1 year for the 1997 cases. Our study follows this general approach, but uses the whole population (about 11,000 cases) for a period from 1991 to 2001. The outcome data were drawn in late 2005 and early 2006, allowing a minimum of 5 years of follow-up on all cohorts and more than 10 years on many cohorts.

They found an overall positive, though uneven effect in Portland, with some years having better results than others. They argued that both drug court treatment functions and defendant characteristics may heavily influence the question of whether the courts "work" and under what conditions. Using their preliminary study to guide us, but using a much larger data set, more time periods, much longer follow-up periods, and adding a cost analysis, we undertook to examine factors influencing the changes in Multnomah County Drug Court over a 10-year period of time.[6]

Use of Client Self-Report Data

Some drug court research has relied on self-reported data to assess services utilized in substance abuse treatment and also to assess subsequent cost outcomes such as arrests and incarcerations. Analysis based on the National Treatment Improvement Evaluation Study (1997) and the California Drug and Alcohol Treatment Assessment (CALDATA) study (Gerstein et al., 1994) are examples. While there are clear advantages to the extensive data that can be collected with a self-report instrument, it is difficult to use such data to address the system impact of the drug court or the actual costs spent by local treatment and criminal justice systems. In addition, there are troublesome issues such as the respondent's telescoping of time periods, memory issues, misperceiving police contacts as arrests, and providing "socially desirable" answers.

The approach taken in this study is not to rely on client self-report for data but instead to use information from administrative databases, budgets, staff interviews and direct tracking of clients.

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[4] We have information on offenders who were eligible for the program over an 11 ½-year period and have collected data on them that spans 14 ½ years. However, from a practical point of view we could provide a full analysis (including their prior history) on about 10 years of court operations.

[5] We did not follow suit in dividing our comparison group into these two groups. We were interested in testing the whole population of targeted offenders over the 10-year period, divided between those who went to drug court and those who did not. We felt this had more relevance to policymakers, rather than a comparison of drug court to a subset of the alternative. In other words, we felt that a finding that drug court had better results over one of these groups rather than the other would have less policy relevance than a finding that drug court had positive result as compared to the alternative of no drug court.

[6] A more detailed comparison of the two studies is outside the scope of this report and would require more information about some of the Goldkamp et al. procedures.

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Recipient of the Cost or Benefit

The concept of cost-benefit begs the question, "benefit or cost to whom?" Some recipients of benefits and costs may be of less interest to policymakers in the public realm. Koenig et al. (2000) contrast an approach focused on benefits to society as a whole and an approach that focuses on benefits to the non-treated population (i.e., taxpayers). The "society as a whole" approach, for instance, would look at food stamps, welfare receipt, or even robbery as transfer of income without net gain or loss.[7] This approach considers a broad array of monetary as well as "quality-of-life" costs and benefits, but involves daunting measurement challenges. The "cost to the taxpayer" approach focuses on the expenditures of taxpayer dollars and looks at costs solely from the point of view of the taxpaying public. In this approach, food stamps, welfare receipt, and robbery all have obvious costs to the taxpaying public.

The "cost to the taxpayer" approach was used in this research. It focused on the expenditure of economic resources in the publicly funded arena. Although it might be of interest to examine the increase in income for clients of substance abuse treatment, the interests of this analysis focused on the expenditure of costs within the public budgets of the treatment, court, and correctional systems.[8]

Opportunity Resources

Many policymakers have failed to see any declines in actual budgets as a result of the linkage between criminal justice and substance abuse treatment. For instance, while substance abuse treatment and drug courts have been linked to a reduction in re-arrests in the criminal justice system, many police and jail budgets remain unchanged, and jails remain full.

The approach used in this analysis viewed publicly funded costs as opportunity costs. The concept of opportunity cost from the economic literature suggests that system resources are available to be used in other contexts if they are not spent on a particular transaction. For example, if drug court reduces the number of times that a client is subsequently incarcerated, the local sheriff may see no change in his or her budget, but an opportunity cost (resource) will be available to the sheriff in the form of a jail bed that can now be filled by another person. The term "opportunity resources" may be preferable to describe these resources, because it implies that costs saved are less in dollars than in budgeted resources (people's time, jail bed space, residential beds) that can be used in another manner to better fulfill the mission of the public-budget-spending agency. With this understanding in mind, the "cost savings" described later in this document should be viewed as "opportunity resources" rather than literal dollars saved.

Linkage Between Publicly Funded Systems: The Transaction Cost Approach

Cost-benefit researchers have looked at avoided costs in various publicly funded systems, considering each system separately. Little effort has been made to understand the cost implications of the linkages among systems. Specifically, the substance abuse treatment system is often intertwined with the court and correctional systems. The proliferation of drug courts, day reporting

[7] This is true in a strictly economic sense, not a normative sense. Transfers involve costs but provide positive benefits to recipients (and to society in general); conversely, robbery involves transfer of resources but with a negative normative valuation.

[8] We have made one exception to this focus on costs that come from the use of taxpayer-financed government agencies. Because crime has a direct cost to taxpayers through victimization, we have also chosen to include victimization costs.

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centers, in-jail treatment, and pre-treatment programs is an indication that the court and correctional systems have made the need for substance abuse treatment part of their mission.

Belenko (1998) suggests that cost research modeled on the approach used by Finigan (1996) would provide useful information on the costs and benefits of drug court. This approach, greatly refined by Crumpton (2001) and Carey & Finigan (2003), has formed the basis for the NPC Transactional and Institutional Cost Analysis (TICA) approach utilized in this current research and described in greater detail later in this report.

The TICA approach used in this research examined the provision of opportunity resources by publicly funded agencies as a set of transactions. That is, each time a client has a contact with the system, a transaction occurs and resources change hands. The approach also follows some trends in the literature of organization theory that suggest that organizations can be best understood as contributing their resources to sets of transactions (Martinez & Dacin, 1999; Moe, 1984). This transaction cost analysis assumes that clients make contact with multiple systems and use resources from all those systems. In order to understand the costs that are spent and to place economic value on the complexity of reduced costs that accrue due to the benefits of a program, one must focus on the interaction of multiple systems. In particular, the focus in this study is on the treatment system, the court system, and the corrections system. This approach is described in more detail in the Research Design and Methodology section.

Key Policy Questions

There are five key policy questions this research is designed to answer:

1. What is the overall impact of the Drug Court on criminal recidivism? Specifically, for the cases eligible for Drug Court from 1991 to 2001, did participation in the Program reduce criminal recidivism compared to the alternative of traditional processing and adjudication (“business as usual”)?
2. Does the Drug Court show consistent levels of success in reducing re-arrests each year of the 10-year period?
3. Do internal or external changes affecting policies and procedures of the Drug Court affect its success or failure?
4. Do changes in judicial leadership affect the success of the Drug Court?
5. Did the Drug Court save taxpayer resources compared to the costs of traditional court processing?

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DRUG COURT BACKGROUND

As described in the introduction, the Multnomah County Drug Court in Portland, Oregon, is the second oldest drug court in the United States. Although NPC had performed cost studies of this drug court's STOP (Sanction Treatment Opportunity Progress) Program[9] twice in the past (in 1996 and 2003), this was a unique opportunity since it offered access to data on the entire population of offenders in Multnomah County that are the traditional targets of the drug court model. This allowed us to examine the overall system impact of the STOP Program on that population. Following is a summary description of the STOP Program. A more detailed description can be found in Appendix A.

Summary Description of the Multnomah County Drug Court's STOP Program

The Multnomah County Drug Court's STOP Program was among the pioneer drug courts to be established in the United States. Multnomah County instituted the STOP Program in August 1991, at the instigation of Judge Harl Haas, using a Byrne grant and local city funds. The Program was originally designed to be a pre-plea offer to individuals arrested on drug charges. The program began accepting probationers and parolees (as well as pre-plea clients) in 1995 and became a completely post-plea program in 2000. Therefore, this program has contained a mix of mostly pre-conviction and some post-conviction offenders. Upon successful completion of this intensive program, charges were dropped and a defendant can apply to have them removed from his or her criminal history record.

The STOP Program's team members include the judge, treatment coordinator, the public defender, the public defender's legal assistant, and the district attorney.

The Multnomah County District Attorney's Office is responsible for determining client eligibility for the Program. The STOP Program is offered to people charged with Possession of Controlled Substance (PCS) charges as well as other drug-related charges such as tampering with drug records (e.g., forging prescriptions for pharmaceutical drugs). STOP participants may have more than one charge when they enter the Program but any prior convictions on violent charges exclude offenders from participating.

The public defender provides an orientation on the STOP Program and offers the program to eligible participants. Clients must attend a "petition hearing" for drug court where they either declare their intention to participate in the STOP Program or decline participation. Those who accept the Program work towards having their charges dropped by attending prescribed treatment services, appearing at drug court sessions and paying STOP Program fees.

The current treatment agency, InAct, has been the sole treatment provider for the STOP Court since 1992 (aside from occasional referrals by InAct to inpatient and methadone treatment). InAct provides case management for all participants, including those who receive treatment elsewhere. There are three phases of treatment, starting with more frequent treatment sessions in Phase I (group sessions a minimum of three times per week and individual sessions once per month) and ending with less frequent sessions in Phase III (group sessions a minimum of once per week and individual sessions still once per month). Drug tests (urinalyses) are performed by

[9] Referred to in this paper as "the STOP Program" or "the Program."

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the treatment provider and occur randomly at least once per week. Aftercare is available to all participants who have graduated. After graduation, a client is eligible to attend as many group counseling sessions as desired, may meet with his or her individual counselor, attend educational classes provided at InAct, and remains eligible for mental and physical health services provided by InAct.

Because of the large number of clients in the STOP Program, drug court sessions are held daily in Multnomah County. Representative from the Public Defender's Office, the District Attorney's Office, and InAct attend the drug court sessions. The frequency of court sessions for clients is based on the treatment phase they are currently completing and on how well they are complying with the program. In general, client attendance at court sessions ranges from a minimum of once per month to once every 2 months, and on rare occasions, can be as frequent as daily. During court appearances the judge checks on the client's progress, both from the client's perspective and the treatment provider's. The treatment liaison provides information to the judge on the client's progress from the counselors at InAct. The district attorney makes note of subsequent arrests and brings these data to the courtroom. The judge offers encouragement and rewards to clients who are complying with the treatment regime. The judge also imposes sanctions for clients who are non-compliant (e.g., not attending treatment, have a positive drug test, etc.), and checks on the completion of previously imposed sanctions and the status of their fee payment.

The STOP Program requires 365 days in treatment to graduate. In addition, clients need six consecutive clean urinalysis tests and a recommendation from their individual counselor to complete the Program. Termination occurs at the recommendation of the team members to the judge, although the judge makes the final decision. Reasons for termination include chronic non-compliance with program requirements and arrests during program participation for violent charges.

The number of active clients in the STOP Program has ranged from approximately 500 to more than 1,200 in a given year. Between 1991 and 2001, the drug court graduated an average of just over 40% of its clients (2,625 out of a total of 6,502), though in some years this percentage has risen higher than 50%. The STOP Program participants' most common primary drug of choice was amphetamines (32%) followed by marijuana (19%) and cocaine (17%). However, alcohol was the most common secondary drug of choice (26%) followed by marijuana (25%) and cocaine (20%).

Summary Description of the Multnomah County Traditional Court Process

One element of this study is to compare STOP Program participants with those who were eligible for the STOP Program but did not participate. These individuals go through traditional court processing. In Multnomah County, this processing includes having their case heard by a Grand Jury, and hearings at a variety of court appearances.

Defendants who have declined the STOP Program have their cases heard by the Grand Jury. At a Grand Jury proceeding, the State calls witnesses and presents evidence to convince jurors of sufficient evidence against a defendant to bring formal charges against them. Neither the defendant nor their lawyer is present at these proceedings. The Grand Jury decides whether the district attorney can proceed with the case.

If the Grand Jury decides the case can proceed, at the request of the defense attorney, a Plea Hearing can be scheduled. At a Plea Hearing, defendants enter a plea of "guilty" or "no contest"

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to the charges brought against them by the State. Before hearing the plea, the judge will explain a defendant's right to a jury trial and that he or she is waiving that right by choosing to plead to the charges. The judge reads the charges and asks the defendant for a plea. After the plea has been entered, the judge determines the sentence.

For cases where the defendant has entered a plea of "not guilty," the judge will schedule a Trial date. The Trial consists of the State and defense attorney's presenting their cases before a jury. After hearing the case, the jury decides on a verdict of guilt or innocence. The judge, in accordance with the law, sentences a defendant that is found guilty. Defendants found guilty will usually receive sentences that include both jail and probation time. Defendants who are acquitted (found innocent) have their cases dismissed.

During the time period of this study, defendants were generally sentenced to 30 days in jail, a drug-free zone exclusion, and 18 months of probation. Multnomah County Community Justice provides probation supervision. Supervision by a probation officer includes monitoring defendants in the community and ensuring defendants follow through with the conditions of probations set forth by the judge at the time of sentencing. Supervision by probation includes recommendations for treatment based on an alcohol and drug assessment that takes place when a defendant begins probation. However, since these are nonviolent offenders, they are most commonly on a very low level of supervision that does not require regular meetings with a probation officer.

A more detailed description of the Multnomah County Drug Court (STOP Program), as well as a description of the traditional "business as usual" court process, can be found in Appendix A. In addition, detailed information on each type of court hearing in the drug court and traditional court process, as well as the time per participant for each hearing, can be found in the Appendices of the final report for the previous study (Carey and Finigan, 2003).

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Research Design and Methodology

This study was unique in that it provided the opportunity to examine the long-term operations of the drug court model in a specific location. It was also unique in that we had access to data on the entire population of offenders in Multnomah County that are the traditional targets of the drug court model. This allowed us to examine the overall system impact of the Drug Court on that population.

Some of the methods used in this study, particularly around the collection of administrative data sets, are similar to the methods and data sources used in the previous study performed in 2003 (Carey & Finigan, 2003). Some of the data gathered on specific costs and resources in the previous study were used again in this study, where appropriate.

Administrative Data Collection

The administrative data gathered for this study came from several sources: (1) the public defender's drug court database; (2) the InAct (the STOP Court's treatment provider) database; (3) a data warehouse (DSS-J: Decision Support System-Justice) that combines data from the Portland Police database (PPDS), the Multnomah County Sheriff's database (SWIS), and the District Attorney's (DA)database; (4) the Oregon State Police's database (LEDS) of statewide arrests; (5) the Department of Correction's (DOC) statewide database of prison, probation, parole, and post-prison supervision information; (6) the Oregon Judicial Information Network (OJIN); and (7) a statewide treatment database (CPMS).

All data were provided electronically. The data collected for each individual included demographics (most databases); drug court eligibility information (DA, public defender, and InAct); criminal history including arrests and charges (PPDS, LEDS); drug court hearing dates, drug court treatment dates and types, urinalyses dates and results (InAct database); jail entry and exit dates (SWIS); prison, probation, parole, and post-prison supervision start and end dates (DOC); and non-drug court treatment start and end dates (CPMS).

There were challenges in getting and working with the data. Nearly 600 people—primarily graduates—needed to be looked up by hand in the criminal justice data warehouse because the case numbers for the drug court-eligible events were not found. Since one of the perks of graduation is being allowed to have the case purged, it was suspected this was a special group of motivated people. Just over half of the 600 people were found in the hand search, which provided additional identifiers that could be used to find those people in other data systems. Another challenge was the richness and complexity of the data. While the richness was excellent for the study, it also necessitated much care in joining, cleaning, and testing the data. In addition, there were some issues with the expected order of events within and across data from each source that needed to be resolved and could generally be traced back to data entry errors.

Categorizing the charges into victimization crimes (person, and property) and drug crimes as well as categorizing lesser crimes was a large task. Several data sources provided charge information (DSS-J Prosecution, DSS-J Arrests, DSS-J Bookings, and the State Police/LEDS). Since each source usually listed charges in slightly different ways, the categorization needed to be done for each source's list of charges rather than doing it for a single set of charges and applying the categorization to all sets. Each set had approximately 500 distinct charges to categorize.

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Despite these challenges, county and state agencies provided an enormous amount of high-quality data, allowing a unique and detailed examination of the complex system of drug court and traditional case processing. Following is a brief description of each data set used in this study.

InAct

InAct has been the treatment provider for the Multnomah County Drug Court since 1992 (one year after the drug court began operations). Within the first year, InAct began collecting consistent and high-quality data for use in case management and evaluation. This treatment provider has been a true partner in the creation and maintenance of this drug court and is one of the rare agencies that truly understands the importance of collecting detailed and reliable data.

The InAct database contained: demographics, dates of individual and group counseling sessions, acupuncture, and urinalysis tests; dates of court hearings that clients were expected to attend (as opposed to hearings that were rescheduled before they took place) and whether the client attended; status upon exit from the program; and a wealth of other information. This is far more information than was provided by other drug courts encountered and evaluated by NPC. It is pleasantly surprising considering the paucity of models to draw from at the time the database was created and considering the STOP Court was the second drug court created in the United States. The limitations of the dataset are minor. Information on treatment was added in 1993, meaning it was not available in an electronic format before that date.

This database was also important because it contained information on cases that had been purged from the state and local criminal justice systems (graduates can have their case information expunged from their records). Without these data, information on many graduates—including the existence of those cases—would have been missing from the analyses.

Department of Corrections (DOC)

The DOC was provided with a list of identifiers for the offenders in this analysis. The electronic administrative data returned from the DOC contained information on how the DOC had matched each person to their data, demographics, and service data including the start and end dates and level of supervision for probation, parole, and post-prison supervision. The challenges of working with these data were typical and minor—mostly there appeared to be clerical/keystroke errors and occasional missing data.

Client Process Monitoring System (CPMS)

CPMS is a statewide alcohol and drug treatment database. The data were extracted from two different data systems, one with older data and one with newer data. One of the challenges was identifying variables each had in common (the variable names were similar but not always identical) and putting them into compatible data formats so the two datasets could be combined. The two datasets had some cases in common—same client, same provider, same treatment, and same start date—but the newer dataset contained information on activity for those cases that occurred after the agency switched to the new data system. These overlapping cases were identified and the older version of the case data removed.

Decision Support System-Justice (DSS-J)

DSS-J is a data warehouse containing data from the local police, the local sheriff, the district attorney, and the courts. People are assigned an ID number that identifies them in each of the

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source systems. DSS-J personnel provided arrest, booking, and prosecution data in separate tables.

Arrests. Arrest dates and charges were used to calculate recidivism. Information was available only on arrests made by the Portland Police, the Multnomah County Sheriff's Office, and the Fairview Police (another city within Multnomah County). Details on arrests made by other police departments within Multnomah County were obtained from the Oregon State Police's Law Enforcement Data System.

Bookings. All booking and release dates and the charges were available, allowing the calculation of days spent in jail. Associated DA and court case numbers—when there was a case being prosecuted—were available for most of the bookings, enabling costs directly associated with the drug court-eligible cases to be separated from outcome costs.

Prosecution. Prosecution data included information on the charges for each case prosecuted, arrest ID number, arresting agency, charge and case dispositions, and key dates in the case cycle.

Public Defender

Public defender data contained DA and court case numbers for all cases originally deemed eligible for drug court, the charges, the date the client petitioned for the program, and case status at the end of contact with the drug court. There were more than 12,200 cases in the time period examined. Just over 1,100 cases were later deemed ineligible for the program and were removed from the analyses.

Law Enforcement Data System (LEDS)

LEDS is a statewide repository for felony arrests and was used to find arrests that occurred elsewhere in Oregon outside of Multnomah County as well as arrests in Multnomah County but in cities that do not contribute to DSS-J. Arrests that were duplicates of arrests found in DSS-J were identified and removed. Arrests where the most serious charge is a misdemeanor are not required to be reported to the State Police, so the actual number of arrests a person had may be underrepresented in this database. However, the majority of these misdemeanor arrests could be gathered from the Portland Police and Sheriff data.

Oregon Judicial Information System (OJIN)

This is a case tracking system that stores Oregon State Court case information from multiple sources in a single database. It lists all events related to a case, including all hearings scheduled. Unfortunately it was not possible to differentiate between hearings that were rescheduled before the hearing date and hearings that actually took place (which is important for determining costs), but it was still valuable for demographics, key case dates, and case findings.

Cost Methods

Transactional and Institutional Cost Analysis

This cost-benefit study relied upon a Transactional and Institutional Cost Analysis (TICA) approach developed by NPC Research primarily during the 2003 study of the STOP Court (Carey & Finigan, 2003). This methodological approach combines process and outcome evaluations with organizational, institutional and cost analyses. (See Crumpton, Carey, & Finigan, 2004, for a full description of the theoretical and practical basis for this approach).

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The TICA approach views an individual's interaction with publicly funded agencies as a set of transactions in which the individual utilizes resources contributed from multiple agencies. Transactions are those points within a system where resources are consumed and/or change hands. In the case of drug courts, when a drug court participant appears in court or has a drug test, resources such as judge time, public defender time, court facilities, and urine cups are used. Court appearances and drug tests are transactions.

In addition, the TICA approach recognizes that these transactions take place within multiple organizations and institutions that work together to create the program of interest. These organizations and institutions contribute to the cost of each transaction that occurs for program participants. TICA is an intuitively appropriate approach to conducting costs assessment in an environment such as a drug court, which involves complex interactions among multiple taxpayer-funded organizations.

COST PROTOCOLS / TRANSACTIONAL AND INSTITUTIONAL COST ANALYSIS

The basic steps of NPC's TICA methodology are listed below. The protocols involved in these steps include administrative data collection protocols and key informant interviews.

- Step 1: Determine drug court and non-drug court flow/process (how clients move through the system).
- Step 2: Identify the transactions that occur within this flow (where clients interact with the system).
- Step 3: Identify the agencies involved in each transaction (e.g., court, treatment, police).
- Step 4: Determine the resources used by each agency for each transaction (e.g., judge time, attorney time, overhead).
- Step 5: Determine the cost of the resources used by each agency for each transaction (e.g., cost of judge's time per hour or per drug court session, etc.).
- Step 6: Calculate cost results (e.g., cost per transaction, total cost of the program per participant).

Step 1: Determine Drug Court and Non-Drug Court Flow / Process

There were three general methods for collecting drug court and non-drug court ("business as usual" or traditional) process information: Web site and document review, key informant interviews, and direct observation during intensive participant tracking.

Key Informant Interviews. Key informants from each of the agencies involved in the STOP Drug Court were interviewed about drug court processes. These key informants included the drug court judges, public defenders, district attorneys, legal assistants, treatment providers, Sheriff staff, and Probation staff (although the Sheriff staff and Probation staff are not highly involved in the STOP Court). They were asked to describe, in detail, the flow of drug court participants through their drug court processes, and in particular, the involvement of their agencies with individual participants. Key informants were also asked to describe the non-drug court process in the same manner.

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A Typology Interview Guide[10] was designed by NPC Research to provide a consistent protocol for collecting structure and process information from multiple drug courts. The information gathered through this guide helped the evaluation team focus on important and unique characteristics of the STOP Court.

The topics for this Typology Interview Guide were chosen from four main sources: the evaluation team's extensive practical experience with drug courts, the American University Drug Court Survey (Cooper, 2000), a paper by Longshore et al. (2001) describing a conceptual framework for drug courts, and the 10 key components of drug courts developed by the National Drug Court Institute (1997). The typology interview covers numerous areas including specific drug court characteristics, structure, processes, and organization. In particular, the guide explores several characteristics that may be considered "promising practices" of a drug court model. By noting how they vary with the success of drug court programs, the study explores how these practices may impact participant outcomes and costs.

The topics in the Typology Interview Guide include:

- Eligibility Guidelines
- Drug Court Program Process (e.g., phases, treatment providers, urinalyses, fee structure)
- Graduation
- Aftercare
- Termination
- Non-Drug Court Process
- Drug Court Judge
- Drug Court Coordinator
- Drug Court Team/Sessions
- History/Timeline
- Drug Court Demographics and Other Statistics

The interview information was used to create drug court and "business as usual" process descriptions and flowcharts. These descriptions were used to determine the transactions that occur within the drug court and non-drug court processes and to provide clues as to where to look for administrative data sets and where to find other kinds of necessary data.

Observations While Tracking an Intensive Sample. In the study of the STOP Drug Court performed in 2003, a small sample (n = 155) of drug court participants and non-drug court comparison offenders (who were eligible for drug court but did not attend) were tracked closely by NPC staff. All 155 individuals were followed to each of their contacts with the treatment and criminal justice systems (e.g., court hearings, meetings with the public defender, treatment sessions). The NPC staff members carried stopwatches and timed each of these contacts to capture an accurate measure of the system resources used. The main purpose of this smaller sample was to gather detailed data that could then be applied to the larger sample to determine the costs and benefits

[10] A copyrighted version of the Typology Interview Guide can be found online at http://www.npcresearch.com/Files/NPC_Research_Drug_Court_Typology_Interview_Guide_(copyrighted).pdf and in Appendix B.

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associated with the STOP Drug Court. These data were also used in this long-term analysis of the entire population eligible for the STOP Drug Court from 1991 through 2001.

Further details on this sample and the intensive tracking can be found in the 2003 report "A Detailed Cost Analysis in a Mature Drug Court Setting: Cost-Benefit Evaluation of the Multnomah County Drug Court" (Carey & Finigan, 2003).

Step 2: Identify the Transactions That Occur Within This Flow

Transactions Related to the Drug Court-Eligible Case. The detailed description (developed during Step 1) of the criminal justice system process for cases that were eligible for drug court (the *drug court-eligible case*) were examined to identify points at which the drug court participants and comparison group members interacted with the system (see Table 1).

Although every drug court operation differs in its details, there are three primary transactional areas that are consistently present among drug courts: court sessions, drug tests, and treatment activities. Within each of these areas there are several points at which drug court participants interact with the system, resulting in the consumption of resources (e.g., agency staff time, facilities) that may impact the taxpayer.

The transactions included for drug court participants take into account those that occur outside of the drug court program, as long as they are the result of the drug court-eligible case that led the offender to participate in drug court. For example, the case that resulted in drug court generally starts with an arrest—and often at least a few days in jail—before the offender is identified as eligible for drug court. The arrest and jail time are transactions that occur within the overall system that leads to drug court participation and therefore are parts of the system process (along with their associated costs) for drug court participants. These same transactions occur in the traditional court system. The two groups diverge at the point where the drug court participants enroll in the drug court program. Including all transactions associated with the case allows a more complete picture of the consequences to the system of choosing the drug court route versus the traditional route.

Outcome Transactions. The transactions related to the drug court-eligible case described above are considered "up-front" costs, or investment costs,[11] of the drug court process and of the criminal justice system process without drug court. These are all transactions that can occur due to the drug court-eligible charge. Both of these processes lead to outcomes that are measured in terms of further transactions within the criminal justice system.

The same types of outcome transactions are possible for both the drug court participants and non-drug court participants. Transactions that occur *after* the drug court-eligible arrest (except those due to the eligible arrest) are considered outcome transactions.

Note: Not all offenders engage in every possible transaction. For example, the majority of drug court participants do not receive jail as a sanction. Also, the process can vary depending on attorney advice, defendant choice, defendant criminal history, and type of case. For instance, according to both our data and key stakeholders, most offenders will choose to plea and take the district attorney's offer rather than go to trial. However, all transactions are experienced by at least some offenders.

[11] Although the term "investment cost" can be defined as a cost outlay made after conscious deliberation, we are defining investment costs as described above, the system resources used in processing the drug court eligible case.

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The key transactions identified for the drug court-eligible case and with outcomes are listed in Table 1.

Table 1. Investment and Outcome Transactions for Drug Court, Traditional Court and Outcome Processes for Both Groups

Drug Court	Comparison "Business-as-Usual"	Outcomes: Both Drug Court and Comparison
Arrest Booking 1st Arraignment Public Defender Orientation InAct Treatment Orientation STOP Court Hearings (drug court hearings) Physical exam at InAct treatment agency Alcohol, drug and mental health assessment at InAct treatment agency Individual and group treatment sessions Urinalyses Jail as a sanction Exit Interview Graduation Hearing for New Dates Stipulated Facts Trial Review Hearing Jail Time (for those terminated after a stipulated facts trial) Probation Time (for those terminated after a stipulated facts trial)	Arrest Booking 1st Arraignment Public Defender Orientation InAct Treatment Orientation Court Hearings o Grand Jury o STOP court hearing o 2nd Arraignment o Custody Hearing o Hearing for New Dates o Assignment Call Hearing o Drug Call Hearing o Plea o Sentencing o Motion to Suppress Hearing o Trial o Substitution of Counsel Hearing o Probation Violation Hearing o Clean Court Hearing Jail Time Probation Time Treatment	Arrests Bookings Court Hearings o 1st Arraignment o Grand Jury o 2nd Arraignment o Hearing for New Dates o Assignment Call; Drug Call o Plea o Sentencing o Motion to Suppress o Trial o Substitution of Counsel o Probation Violation o Clean Court o Community Court o Pre-plea o Pre-trial Conference o Further Proceedings Jail Time Probation Time Prison Time Parole Time Post-Prison Supervision Time Victimizations o Property Crimes o Person (Violent) Crimes

Once the transactions within the process were identified, in order to learn where system resources were being used, it was necessary to determine which agencies were involved with each transaction.

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Step 3: Identify the Agencies Involved in Each Transaction

The agencies involved with each transaction were identified through interviews and observations (e.g., observations of court sessions). The interview questions were included in the Typology Interview Guide described in Step 1. Key agency staff members known to be involved in the processes under consideration were asked which additional agencies were involved in each transaction. Observations of some transactions, such as drug court sessions and group treatment sessions, allowed first-hand knowledge of the staff directly involved in these transactions. This knowledge was used to prompt responses from key informants during interviews and to verify the information gained from these interviews.

Step 4: Determine the Resources Used by Each Agency for Each Transaction

Data on the resources used for each transaction include the amount of time used in the transaction itself, the time used in preparing for that transaction, the time used in tasks that occur in consequence of the transaction, as well as the number of times each transaction occurs for each participant. For example, the public defender will spend time preparing for a court session, spend time at the session itself, and then will spend time after a session writing up case notes and performing other activities as a consequence of the session. This information was gathered through observation and key stakeholder interviews.

In addition, court appearances generally occur several times for a single client. Other resources used for transactions, besides agency staff time, include materials used during a transaction, such as paper or, in the case of urinalyses, urine cups.

There are two main types of resource utilization data that together measure the resources being used for each type of transaction. There is the frequency of each transaction (e.g., how many drug court hearings occur for each drug court participant) and the duration of a transaction (e.g., the length of time used to complete a single drug court hearing per individual participant).

These utilization data were collected in several ways: intensive tracking (following individuals from court sessions to orientations, etc., as described above), chart reviews of treatment files, and administrative data. Individual-level utilization data (data on the number of transactions for each participant) were collected from the administrative databases described earlier in this report. Further description of the collection of this type of data can be found in the 2003 report (Carey & Finigan, 2003).

Step 5: Identify Costs Associated With Activities Performed by Agencies

The sources for the identification of costs include budgets, interviews, and calculations performed by agency staff, as well as information from previous studies. In the majority of cases, the cost of these activities was gathered in three forms: (1) the hourly direct cost (generally labor cost, such as staff salaries, including benefits) associated with the agency staff involved in each transaction; (2) support cost (usually as a percentage of direct cost) in the form of the agency or department overhead; and (3) jurisdictional overhead cost (also as a percentage of direct cost). The direct cost was combined with the support and overhead costs to generate total per hour, per activity, and per transaction costs. The information used to generate the cost data was verified by key operating and financial management personnel involved with the drug court and non-drug court processes.

In some cases, this sort of calculation had already been performed by the agency involved and they were able to give us the fully loaded cost of a transaction. In these cases, we examined their calculations and, if they had included all applicable costs, we accepted such cost factors in lieu of

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our own calculations. This was true for prison days and for some group and individual treatment sessions.

There was one transaction for which we used information gathered from a previous study—the cost of victimizations. The victimization costs were calculated from National Institute of Justice's *Victim Costs and Consequences: A New Look (1996).*[12] The costs were updated to fiscal year 2006 dollars.

Step 6: Calculate Cost Results

The costs calculated for this study include the following four cost results:

1. Cost per transaction
2. Investment and outcome costs for the drug court and "business as usual" court process
3. The difference in cost between the drug court and comparison group
4. Total cost savings ("opportunity resources")

These calculations are described in more detail in the cost results below.

[12] The costs for victimizations were based on the National Institute of Justice's *Victim Costs and Consequences: A New Look (1996).* This study documents estimates of costs and consequences of personal crimes and documents losses per criminal victimization, including attempts, in a number of categories, including fatal crimes, child abuse, rape and sexual assault, other assaults, robbery, drunk driving, arson, larceny, burglary, and motor vehicle theft. The reported costs include lost productivity, medical care, mental health care, police and fire services, victim services, property loss and damage, and quality of life. In our study, arrest charges were categorized as violent or property crimes, and costs from the victimization study were averaged for rape and sexual assault, other assaults, and robbery and attempted robbery to create an estimated cost for violent crimes, arson, larceny and attempted larceny, burglary and attempted burglary, and motor vehicle theft for an estimated property crime cost. All costs were updated to fiscal year 2006 dollars using the consumer price index (CPI) for Portland, Oregon.

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RESULTS

This section contains the results as they relate to the policy questions this study was designed to answer.

Description of the Drug Court-Eligible Population

There were a total of 11,102 individuals in the final dataset. Individuals were assigned to the final drug court group if they had at least one treatment session at the Program's treatment agency. Individuals with no drug court treatment sessions were assigned to the non-drug court (comparison) group.

Table 2 provides a description of the population eligible for Multnomah County Drug Court's STOP Program from 1991 through 2001. There were 6,502 cases in the drug court group and 4,600 cases in the non-drug court group.

Table 2. Demographics and Criminal History of the Eligible Population 1991-2001

Demographics	Drug Court participants (N=6,502)	Non-Drug Court participants (N=4,600)
Age	32.8 years	32.7 years
Gender	74% male	73% male
Drug of Choice	Amphetamines 32% Marijuana = 19% Cocaine = 17% Heroin = 14% Alcohol = 14%	Not available
Ethnicity/Race *	70% White (non-Hispanic)	64% White (non-Hispanic)
	19% African American	22% African American
	9% Hispanic	11% Hispanic
# of Prior Arrests * (In 24-month period prior to the drug court-eligible arrest)	1.4	2.2

* statistically significant ($p < .05$)

Over half (about 58%) of those eligible for Drug Court entered the Drug Court program rather than Criminal Court. About 43% of the total drug court group graduated from the Program. The General Accounting Office (GAO) review of drug court studies (GAO, 2005) found participants were on average between 30 and 35 years of age. The average age in this study was about 33. The GAO found about 70% men. In this study, there were just over 74% men. The GAO found great differences in reported racial distributions, with some predominantly White, some pre-

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dominantly African American, and some evenly distributed among White, African American and other. In this study, both groups were mostly White (non-Hispanic), and nearly a fifth were African American. The Multnomah County Drug Court appears fairly typical of drug courts in general in demographics. The most common drug of choice for participants was amphetamines (32%) followed by marijuana (19%). Unfortunately, these data were not available for the comparison group.

Selection Bias

One potential source of selection bias that could not be controlled for was the possibility of differences in motivation between the two groups. As discussed earlier in the review of the literature, this is the bane of most quasi-experimental designs used in outcome studies of drug courts, particularly those collecting retrospective data. In the case of retrospective data collection, it is not possible to determine whether those who actually participated in a drug court program were more motivated to change their drug habits than those who received traditional court processing. It is also not possible to determine the myriad reasons offenders may have for choosing either drug court or traditional court processing. However, interviews with key informants, such as the public defender, as well as information gathered from interviews with participants in other drug court research (Carey & Finigan, 2003; Carey, Weller, & Heiser, 2003; Carey et al., 2005) suggest that the reasons offenders choose for or against participating in drug court are not generally related to motivational issues. Many offenders choose drug court because the alternative is extended incarceration and/or court fees. Other offenders refuse drug court because they live too far away, or they have children and would be unable to afford childcare, or their defense attorney advises them that the case against them is weak and could be dismissed. Harrell (2003) has underscored the coercive elements in drug courts but also suggests that they are not unlike the coercive elements that operate from family and friends to entice individuals to enter treatment in non-drug court settings. In the end, motivation to change may not be as important a factor in choosing a drug court option as other legal and personal factors. If that is true, it is less of a concern as a selection bias.

Nevertheless, it is not possible to rule out motivation issues without true random assignment at the time eligibility is determined. However, Gottfredson et al.'s recent (2003) randomized design study provides outcome results similar to those in this study. Although there are substantial differences between their prospective randomized trial and our retrospective archival data analysis using a quasi-experimental design, that fact that two studies suggest the same positive trend for drug courts is heartening. Put another way, if the randomized trial results had shown a different trend, we might have increased concerns about the data from a quasi-experimental approach, suggesting that positive results are simply a function of motivational selection bias. Finally, in terms of the cost issues, the end result of importance to policymakers in this type of cost analysis is to describe the actual cost of those who participate in drug court and the actual cost of those who go through traditional court processing when statistically significant outcomes can be found. The cost of the offenders in this study to Multnomah County is the actual cost to the system for drug court and traditional court processing.

A second source of selection bias concerns the lack of availability of drug of choice for the comparison group. It is possible there were differences between the two groups on this important factor for which we were unable to control.

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ANSWERS TO POLICY QUESTIONS

The following results are organized around the policy questions discussed in Section 1. Each policy question is listed, and then the results are presented along with a discussion of those results.

POLICY QUESTION # 1: WHAT IS THE OVERALL IMPACT OF THE MULTNOMAH COUNTY DRUG COURT ON CRIMINAL RECIDIVISM?

Specifically, for the cases eligible for Drug Court from 1991 to 2001, did participation in the STOP Program reduce criminal recidivism compared to the alternative of traditional processing and adjudication ("business as usual")?

Overall Impact on Recidivism

In order to test the hypothesis of difference in recidivism between the drug court and comparison groups, we had to make several decisions in our analysis strategy. The first was to decide whether statistical strategies based on sampling designs were even appropriate. Because we had captured the entire target population in Multnomah County for over a 10-year time period, we had not actually sampled. This raised the question of whether tests of sampling error were even appropriate. The mean number of re-arrests for each group was their actual mean number of re-arrests.[13] However, what this study could not control for was selection bias. Significant differences were found for race (treatment group had more Hispanics) and prior arrests (comparison group had higher prior arrests) that led us to be concerned about selection bias. Also, age and gender were significantly correlated with our outcome measure. In order to consider the effects of potentially confounding factors and their interactions, a multivariate General Linear Model (GLM) was developed to determine how well arrest rate could be predicted. In addition to Drug Court versus Criminal Court, the principal factors are prior criminal history, age, gender, and race. Using arrests during the 2 years previous to the drug court-eligible arrest as a control for prior history, Table 3 shows the result of a model incorporating age, gender, race, and drug court/non-drug court group. Recidivism after 5 years in the program is given because it is an outcome time period available for all offenders included in the study population from 1991 to 2001 (that is, those who entered the program most recently, in 2001, have a maximum of 5 years of outcome data available).

[13] Data were gathered for up to 14 years after the petition hearing date. However, data for the longer periods of time were available only for those in the earliest years. All analyses of recidivism controlled for time at risk (not incarcerated).

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Table 3. GLM Model of Overall Impact of the Drug Court on 5-year Recidivism for Eligible Population 1991-2001

Source	Type III sum of squares	df	Mean square	F	Sig.
Corrected Model	143006.068	13	11000.467	275.477	.000
Intercept	14290.494	1	14290.494	357.867	.000
AGE	2624.383	1	2624.383	65.721	.000
PRIOR ARRESTS	101876.444	1	101876.444	2551.223	.000
GENDER	62.763	1	62.763	1.572	.210
RACE	5167.615	2	2583.808	64.705	.000
GROUP (Drug Court vs. Comparison)	303.560	1	303.560	7.602	.006
GENDER * RACE	520.463	2	260.231	6.517	.001
GENDER * GROUP	39.449	1	39.449	.988	.320
RACE * GROUP	115.280	2	57.640	1.443	.236
GENDER * RACE * GROUP	19.608	2	9.804	.246	.782
Error	376043.319	9417	39.932		
Total	755585.000	9431			
Corrected Total	519049.388	9430			

Dependent Variable: Number of Arrests in the 5 years after pivotal arrest

R Squared = .276 (Adjusted R Squared = .275)

Table 3 shows that age, race, prior arrests, and Drug Court (group) are statistically significant factors in predicting the arrests in the 5 years following an arrest leading to Drug Court. Not surprisingly, the number of prior arrests is, by far, the strongest single predictor. Gender is not a significant predictor. The two-way interaction of gender and race is a statistically significant but weak factor. Interactions between gender with Drug Court and race with Drug Court are not significant predictors. The three-way interaction of gender, race, and Drug Court is not statistically significant. Participation in Drug Court is a significant predictor. The corrected model is a dependable and strong predictor of the outcomes of drug court.

Issues With the Race Data

Examining the interaction between gender and race in the data produces some interesting discoveries that called into question the quality of the data on race. The first discovery was that the interaction effect of gender and race was in part a function of the unusually low re-arrests among Hispanic males. This raised the concern that many in this group had INS (Immigration and Naturalization Service) holds and that their low recidivism rate resulted from their deportation and/or their movement to other parts of the country.

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The second discovery concerned the source of the race data. Our main source of information on race for both drug court and comparison was Decision Support System-Justice (DSS-J) data. However, we also had a source of information on each individual's race for a sub-sample of the population that came from their treatment intake forms and was largely a self-identified choice of racial category. In contrast, the DSS-J data largely come from police reports where collecting the race data is not for census purposes but to identify a person in a "running down a street" situation. Since we had both sources of data for the individuals in the drug court (treatment) group, we could compare the level of agreement between the datasets. Unfortunately, we discovered that, particularly for those not White or African American, there was little consistent agreement. Therefore, where race is used in our analyses, it was recoded into three categories: White (non-Hispanic); African American, and "Other." There were 68% of the offenders in the study who were White (non-Hispanic), 20% who were African American, and 12% who were classified as "Other" (mostly Hispanics, Asians and Native Americans). When this was done, the significant effects of race in all models were that male African Americans had a higher arrest rate than female African Americans and both had a higher arrest rate than White (non-Hispanics) and "Others." The exact reason for this is beyond the scope of this study.[14]

Figure 1. Mean 5-Year Recidivism Over 10 Years of Drug Court Operation

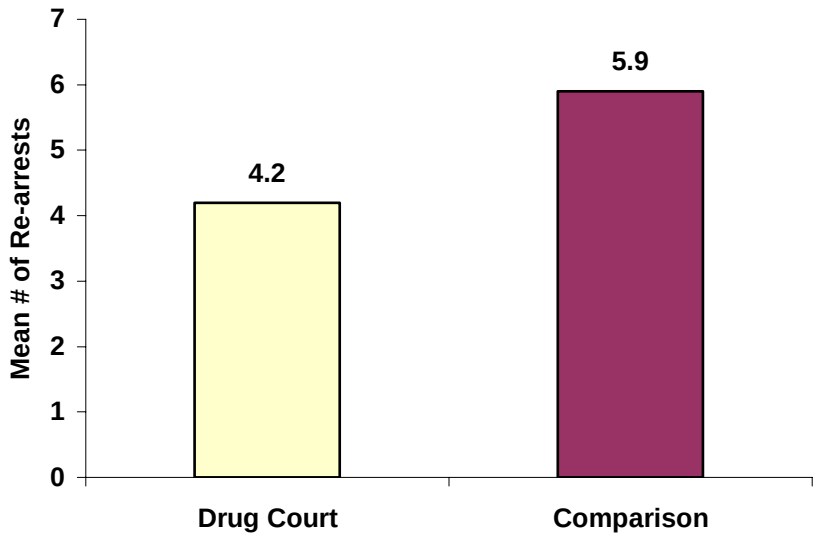

Figure 1 includes all offenders who were eligible for the Drug Court during the total 10-year period, over 5 years from the Drug Court petition hearing. This figure shows that the STOP Program reduced the incidence of re-arrest by nearly 30%. The model also holds for arrests up to 7 years after the pivotal arrest. (After that, the number of individuals with arrest data for the full time period declines dramatically.) This model provides clear support that drug court does reduce criminal recidivism.

Drug Crimes

Since the rationale for drug courts is to reduce substance abuse, an effective court should reduce the incidents of drug-related re-arrests. Table 4 suggests that this is the case.

[14] Drug Court significantly lowered the subsequent re-arrests of both male and female African-Americans but their re-arrests remained higher than other race/ethnicity groups.

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Table 4. Drug Related Re-Arrests by Year for Drug Court and Comparison Group 1991-2001

Years from petition hearing	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Comparison Mean # of drug re-arrests	.68	1.05	1.36	1.63	1.83	2.09	2.28	2.39	2.57	2.81	3.07	3.52	4.09	4.31
Drug Court Mean # of drug re-arrests	.50	.79	1.05	1.27	1.46	1.68	1.81	1.98	2.13	2.26	2.47	2.73	3.07	3.26
% reduction in drug arrests*	26%	25%	23%	22%	20%	20%	21%	17%	17%	19%	20%	22%	25%	24%
N	10987	10986	10830	10134	9346	8616	7294	6074	4861	3883	2785	2044	1218	317

*all significant p< .05 using the GLM model except at year 14

The Drug Court appears to reduce the incidence of drug crimes substantially for up to 14 years after the petition hearing. The effect is statistically significant after controlling for age, gender, race and 2 years of prior criminal history for all but year 14 where the number of cases available for the analysis drops to only 317. It also should be noted that the later years reflect the tracking of the earliest drug court cohorts who received their drug court experience during the rocky beginnings of the court. To the degree that later cohorts do better, a long-term tracking of the later cohorts might show even better results.

The most important part of these data is the relative consistency over the years. There has been some concern that the drug court effect on recidivism is short term and that over time the effect disappears. This does not seem to be the case with drug-related re-arrests.

Overall Impact on Odds of Being Re-Arrested

While we have chosen to use a General Linear Model because of our desire to capture the actual number of re-arrests (which are needed for our cost model), we are cognizant of the fact that much of the criminal justice literature prefers to assess a simpler measure: whether the person was ever re-arrested at all. This is a binary measure; each client was either re-arrested at least once or not at all. The reasons for this preference are varied but a central reason is that a few offenders have a large number of re-arrests, and this fact tends to distort the averages and can produce misleading models. To ensure that our GLM model is not distorted, we also ran a logistic regression on the same data using the binary measure of re-arrest or not (in the 5 years following the petition hearing) as the dependent variable. The results are shown in Table 5.

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Table 5. Logistical Regression Using Binary Measure of Re-arrest in 5 Years for Drug Court-Eligible Population from 1991-2001

	B	S.E.	Wald	df	Sig.	Exp(B)
AGE	-.015	.003	34.896	1	.000	.985
PRIOR ARRESTS (2 yrs)	.487	.020	597.274	1	.000	1.628
GENDER	-.016	.051	.102	1	.750	.984
RACE			39.615	2	.000	
RACE – White	-.034	.070	.233	1	.629	.967
RACE – African American	.368	.088	17.618	1	.000	1.444
GROUP (Drug Court vs. Comparison)	-.154	.046	11.138	1	.001	.857
Constant	.991	.109	82.916	1	.000	2.693

The model is very similar to the GLM. Prior arrests are a statistically significant and powerful predictor of subsequent arrest. Race is significant but only for African Americans. Age is significant but with only a small influence. Finally, Drug Court membership is a significant and substantive predictor of less recidivism (odds ratio of .857). Coded in the reverse, the odds ratio is 1.17, meaning there is a 17% greater chance of recidivism by not going to Drug Court. This model continues to be a successful predictor of re-arrest from 1 to 5 years after the petition hearing. After 5 years, the number of time periods that can be included in the analysis diminished substantially, and the data are dominated by the earliest periods.

Policy Question # 2: Does the Drug Court Show Consistent Levels of Success in Reducing Re-arrests Each Year of the 10-year Period?

Most previous drug court research has had to struggle with two significant sampling limitations. They have generally sampled a relatively short period of time in which to assess the court (usually one or 2 years of its operational history) and have had to sample among the drug court and comparison samples rather than assess the entire population. This has opened up two potential sources of error in assessing large mature courts. The first is that the researcher may pick a time in the court's history that is not representative of its actual mature operation. The period may be too early in its implementation or during a period of change or crisis or, conversely, when it is receiving an unusual number of resources or during the term of an unusually effective judge. The results then may demonstrate failure when other periods would show success or, conversely, would appear to show a successful court when most other periods chosen would not demonstrate success. The second issue is that choosing a sample in a large court context always introduces a certain amount of sample error. If the sample is large enough to have adequate power and the effect size is reasonable, this is not a problem. Yet, if sample size is small and the effects during the period are not huge, then researchers may conclude that there are no statistically significant effects when real effects do occur.

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Because we have captured the entire target population in Multnomah County during a 10-year period, we have a unique opportunity to examine the influence of these two issues. We can see whether limiting the analysis to some periods would have produced misleading results and whether sampling error connected to small sample sizes might lead to erroneous conclusions.

Table 6. Mean Number of Re-Arrests in the 5-Year Period From Petition Hearing Year

Mean arrests	Year of petition hearing									
	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000
Comparison	5.3	5.8	4.9	5.0	5.2	5.5	6.3	7.9	6.8	5.4
Drug Court Participants	5.3	4.7	3.4	4.1	4.2	5.2	4.5	4.4	5.4	3.4
% Improvement	0%	18%	31%	18%	19%	5%	28%	45%	21%	37%
Significance	NS	NS	sig	sig	sig	NS	NS	sig	sig	sig
N	317	903	828	742	1100	981	1212	1220	1335	722

Note: We used the petition hearing date to define the cohort years because in Multnomah County it was a real date experienced by both the drug court and comparison groups that defined which group they would enter.

Sig = Statistically Significant; NS = Not Significant

Table 6 demonstrates that this drug court, while overall demonstrating a positive effect over the 10-year period, has clearly better years and worse years. Specifically it had two "rough periods." The first is the first 2 years of the program in which there were either no positive results (1991) or small gains (1992). The second period is 1996, which demonstrates no success. There are two points that this emphasizes. The first is that the early implementation period of a drug court is not the best period to choose to examine the court's effectiveness. It should be remembered, though, that this court was the second in the nation, and in 1991-1992 no one knew how to operate a successful drug court (e.g., there were no "10 key components"). The other point that these data illustrate is that care should be taken about assessing the performance of a drug court based only on a single cohort year.

Table 6 also highlights some issues connected with sampling design. Using our GLM model, we find that some periods would not reach acceptable levels of significance using a sample the size of the existing target population. In other cases real differences would probably be masked if smaller samples had been used. This suggests that the field should use caution in accepting a finding of no effect when considerations of power and sample size are not sufficiently addressed.

POLICY QUESTION #3: DO INTERNAL OR EXTERNAL CHANGES EFFECTING POLICIES AND PROCEDURES OF THE COURT AFFECT ITS SUCCESS OR FAILURE?

It is vital that the drug court field of practice understand what promotes or inhibits success. This current study spans a time period long enough to be able to examine some of the internal and external changes in court operations and their influence on recidivism.

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External Changes

We identified a number of external changes from 1991 to 2001 that might have had an influence on court operations and outcomes. These external changes were categorized as follows: criminal justice system changes, changes in the Multnomah County substance abuse treatment system, and changes in the Oregon managed health care system. Table 7 lists these changes. We coded each change into a series of binary variables: an individual's drug court participation either took place during a period impacted by these changes or it did not. We were then able to enter these into our overall model using a logistic regression approach to determine if any of these changes had an effect on an individual participant's odds of being re-arrested.

Table 7. External Factors Affecting the Multnomah County Drug Court's STOP Program

Year	Criminal justice community milestones	Oregon Managed Care (OHP and Medicaid) milestones	Multnomah County Substance Abuse TX (SATX) system milestones and reactions to managed care events
1991			
1992 **1993**	• Ordinance for Drug Free Zones is passed • Drug Free Zone ordinance modified to include arrest for possession		• Residential beds set aside for drug court clients • Portland (Oregon) Target Cities Project start date • State begins more careful monitoring of patient care (-1996)
1994	• Drug Free Zones modified, one zone eliminated, zone size limits eliminated, and attempt crimes added • President Clinton signs the Violent Crime Control and Law Enforcement Act of 1994	• The Health Care Financing Administration provided Medicaid waiver Oregon Health Plan (OHP) begins	• In Jail Intervention Program (IJIP) begins

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Year	Criminal justice community milestones	Oregon Managed Care (OHP and Medicaid) milestones	Multnomah County Substance Abuse TX (SATX) system milestones and reactions to managed care events
1995		• Managed care instituted, OHP now covers individuals 100% below poverty. Outpatient SATX phased into basic health benefits for OHP • (approx. 13 insurance companies providing coverage to OHP recipients)	• Portland Target Cities Project Central Intake begins (-1998)* • Oregon adopts benchmark diagnosis and level of care recommendations. • Capitated chemical dependency benefit added
1996	• Measure 11 passes (structured sanctions) • Measure 50 passes (limiting property tax increases to 3%, reducing county funds)	• Five Oregon health plans separated SATX from physical health care	• Methadone program restructured
1997	• Senate Bill 1145 • Portland Police Bureau trains Crisis Intervention Team (CIT) officers		• Criminal Justice Diversion Program begins (-2001) • Relationship of MH and SA becoming more important
1998		• 85% Medicaid clients are enrolled in fully capitated health plans	• County redistribution of MH funding • Portland Target Cities Project ends*
1999			• Oregon Office of Alcohol & Drug Abuse Programs initiates "Track B"
2000			• Oregon increases residential bed reimbursement rate for providers

With one exception (described below), these changes appeared to have no statistically significant impact on subsequent recidivism for this population (either drug court or comparison group). However, the effect of group membership (drug court or comparison group) remained statistically significant in the model. We can therefore conclude that these external changes were likely not the source of the found positive effects of drug court.

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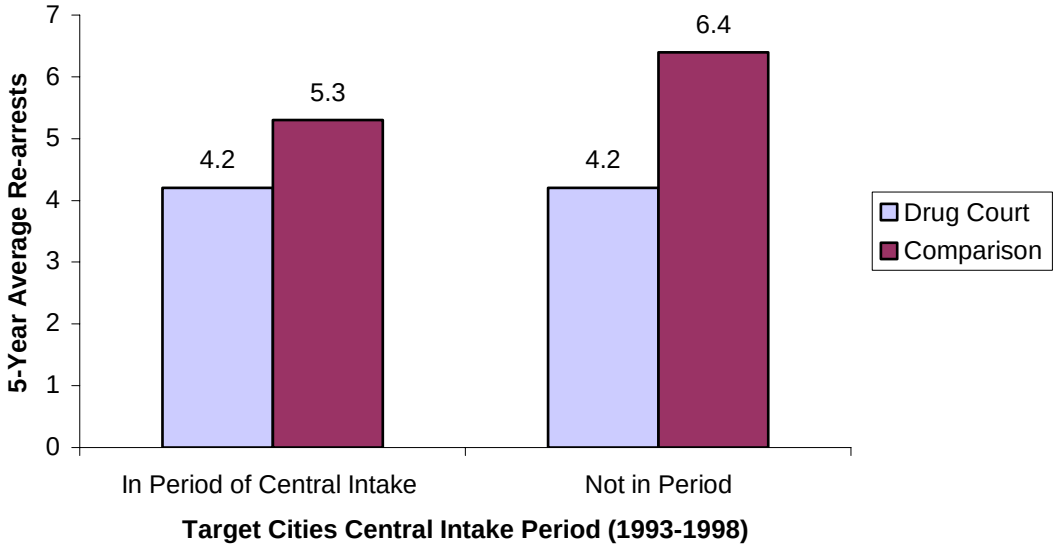
There was one intriguing exception to the above conclusion. The introduction of the Central Intake System under the federally funded Target Cities Project in 1993 and its closure in 1998 is significantly and substantially related to subsequent recidivism. Target Cities Central Intake was an attempt to provide a centralized intake experience that would be better organized, more prone to matching offender with appropriate treatment, and hopefully with increased amounts of offender treatment. The lead author of this report (Finigan) was part of the federal evaluation team on this cross-site effort. Overall, data based on self-reported interviews using the ASI had mixed results, but data using administrative records in Portland showed positive effects (Finigan & Wolf-Branigin, 2006). Figure 2 illustrates the results for 5-year recidivism, although the trend is the same for all recidivism time periods.

Figure 2. Recidivism in Relation to Target Cities Project (Mean Re-Arrests over 5 Years)



This figure illustrates two things. This first is that the drug court effect remained positive within each period. The second is that the effect of Central Intake was entirely with the comparison group. This makes sense in that Central Intake's purpose was to get more and better treatment to those offenders that were "slipping through the cracks in the system" and would therefore have impacted the comparison group more and the drug court group less. This has an interesting implication. It would suggest that during the period of Target Cities Central Intake (1993-1998), the drug court effect is somewhat understated, since the comparison group is also receiving benefits from Central Intake. A true measure of the impact of the drug court as compared to traditional "business as usual" may have been in the periods in which Central Intake did not operate.

There is a second interesting implication. A review of the recidivism data showed that one source of the apparent positive drug court effect was that in the later periods the comparison group recidivism worsened. This led one colleague to speculate that this might be due to greater "creaming" on the part of the Drug Court (accepting more of the most promising offenders into the STOP Program and leaving the comparison group with the more hard core offenders). Yet, these data suggest an alternative explanation for the worsening comparison group recidivism. They

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suggest that Central Intake may have had a positive effect on the comparison group during its existence and that its closing returned these offenders to a situation in which their non-drug court substance abuse treatment was more limited and disorganized and therefore their recidivism more typical of their behavior under the conditions of "business as usual."

Internal Changes

Ever since Goldkamp's landmark study (Goldkamp et al., 2001), there has been great interest in looking "inside the black box" of drug court. Looking at a single drug court over a 10-year period has the advantage of examining how some internal changes and other inter drug court practices affect outcomes. Following Goldkamp, we identified some instrumental drug court treatment variables that could likely affect outcomes: the total number of days in the program, the total number of days in substance abuse treatment sessions, the total number of hearings attended, the presence or absence of sanctions, and a series of judge characteristics discussed in the next section. In addition, we also examined a series of policy and procedural changes that occurred over the 10 years of our analysis. These are listed in Table 8.

Table 8. The History of Substance Abuse Treatment Including the Multnomah County Drug Court's STOP Program

Year	Multnomah County Drug Court milestones
1991	• STOP Program began, Byrne Grant and local city funds utilized to start drug court • Eligibility criteria for participants: PCSI or PCS II charge, with "personal use" quantities, new to the program, no evidence of dealing, criminal history is irrelevant, no holds from other jurisdictions (available for TX), no gang association, no other felony or class A misdemeanors, or DUII pending or associated with this charge
1992	• First treatment provider contract terminates. InAct, Inc., begins service as new treatment provider • Eligibility changes: Offenders on parole or probation excluded
1993	• Drug Court has 746 graduated/active cases since inception (78% of participants)
1994	• Multnomah County awarded crime bill $ for drug court • Drug Court leadership develops clinical procedures for treating clients arrested for/suspected of dealing drugs
1995	• InAct begins efforts to obtain contracts with managed care insurance companies under OHP • Eligibility criteria are modified: probationers and parolees now eligible • USDOJ awards $512,055 Enhancement grant

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Year	Multnomah County Drug Court milestones
1996	• DA expands Drug Court eligibility criteria. Previous failures are eligible, new charges can become convictions, with no custody units, and participant remains in program, quantity restrictions expanded • Policies are modified, more restrictive time limits for completion of Phase I, for payment of fees, and for treatment • Referee Lawrence replaces Judge Robinson, court moves to the Justice Center • InAct begins enhancements Counseling and health services departments created, MIS, integrated MH and SA TX offered • Probationer/parolees excluded
1997	• DA Expedited Plea (X-Plea) program for drug cases begins • Docket expands to 5 days/week
1998	• Judge Haas returns, drug court returns to the Courthouse
1999	
2000	• Formally consider STOP Program post plea. • New representative from the Public Defender's Office begins • New special courts are emerging: domestic violence courts, property crimes with PCS courts, and mental health courts
2001	• Eligibility expands: PCS I, II, attempt PCS I, II, Tampering with drug records charges, no other associated or pending charges permitted, no current participants, no DUI, no other holds

The internal changes were categorized in the same way as the external changes discussed above. These were then entered into the logistic regression model to see if these changes had an impact on the recidivism (arrest/no arrest) of the drug court group when age, race, gender, and prior arrest history are also in the model. The results showed no significant effects for any of the internal change variables. In other words none of these changes appears to be associated with any change in re-arrests in the drug court group. This, of course does not mean that we are sure they had no impact in indirect ways, merely that they show no gross direct impact.

Internal Instrumental Drug Court Variables

Sanctions. Goldkamp found a significant negative effect for the use of jail as a sanction (Goldkamp et al., 2001, p.54). Those with sanctions had a higher re-arrest rate. The current study also found the same result over the 10-year period, although with a smaller substantive difference. That is, the result was statistically significant but with a small effect size. This small effect size may be related to our use of administrative data that contained only information on whether the participant was sanctioned, but not how many days, while Goldkamp et al., whose smaller sample size allowed for access to paper records, probably had a more detailed data set on the issue of sanctions. Yet, it is important for policymakers to realize that both studies demonstrated a significant effect of sanctions but in a negative direction. Those with more sanctions had higher rates of re-arrests. At least in Portland, this suggests that (even if the participants receiving sanctions have character-

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istics predictive of re-arrest) the use of sanctions, particularly jail sanctions, which consume jail resources, does not lead to offsetting reductions in subsequent recidivism.

Days in treatment. Days actually in substance abuse treatment is an important instrumental variable for any logic model of drug court. The logic of drug court is that its impact will make substance abuse treatment occur more often, longer and with greater effect when under the judge's scrutiny. A finding that those with more days in treatment have no better outcomes than those with less would call into question the logic of drug court. For this study, as with Goldkamp et al. (2001) and Carey & Finigan (2003), greater days in treatment is associated with significantly lower subsequent recidivism.

Judge characteristics. The judge is a critical component of drug court. Judge characteristics have a significant effect on outcomes. Goldkamp et al. suggests this as well. Because of the importance of this topic, the results of this analysis are described in its own section under Policy Question # 4.

POLICY QUESTION # 4: DO CHANGES IN JUDICIAL LEADERSHIP AFFECT THE SUCCESS OF THE DRUG COURT?

There were five judges who took a primary leadership role during the 10-year period. (A sixth judge overlapped into the period but had too few clients in the period to be counted). Of these five judges, two had multiple eras (i.e., had rotated through the drug court more than once).[15] There were therefore a total of seven distinct judge eras during the 10-year period. We were interested in four sub-questions:

POLICY QUESTION # 4A: DO JUDGES DIFFER IN THEIR SUCCESS IN REDUCING RE-ARRESTS?

Table 9. Mean Number of Re-Arrests for a 3-Year Period After the Drug Court Petition Hearing for Comparison and Drug Court Participants for Each Judge Era

Judge era	1A	2	3A	3B	1B	4	5
Comparison Mean	3.5401	3.578	3.7311	4.568	5.8592	4.4908	4.7521
Drug Court Mean	3.2572	2.609	3.5737	3.2734	3.4138	3.144	3.1363
Difference	0.2829	0.969	0.1574	1.2946	2.4454	1.3468	1.6158
% Improvement	8%	27%	4%	28%	42%	30%	34%
Significance*	NS	Sig.	NS	Sig.	Sig.	Sig.	Sig.
Comparison N	724	737	424	786	691	909	223
Drug Court N	1007	1041	769	867	829	1104	543

Note: In each case a general linear model approach is taken controlling for age, prior criminal history and gender
*Sig = Statistically Significant; NS = Not Significant

Table 9 exhibits that, at 3 years after the pivotal arrest, all judges show reductions in re-arrests. The reductions range from a mere 4% to a substantial 42%, demonstrating clear differences. Of

[15] One judge had two non-contiguous eras, another had one continuous era followed by an era in which the judge was on the bench a little more than half the time.

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the seven judge eras, two reach statistical significance beyond the .01 level and four beyond the .05 level. However, it should be remembered that these numbers represent the entire population of eligible offenders during these eras, not a sample, and therefore the differences are true differences and not possible artifacts due to sampling error.

Table 10. Mean Number of Re-Arrests for a 5-Year Period After the Drug Court Petition Hearing for Drug Court and Comparison Groups for Each Judge Era

Judge era	1A	2	3A	3B	1B	4
Comparison Mean	5.215	5.162	5.5118	6.3926	8.2126	5.4157
Drug Court Mean	4.701	3.8665	5.0338	4.4937	4.918	4.2309
Difference	0.514	1.2955	0.478	1.8989	3.2946	1.1848
% Improvement	10%	25%	9%	30%	40%	22%
Significance*	NS	**Sig.**	NS	**Sig.**	**Sig.**	**Sig.**
Comparison N	724	737	424	786	691	909
Drug Court N	1007	1041	769	867	829	1104

Note: By extending the analysis to 5 years, the fifth judge era becomes too recent for a full set of data.

*Sig = Statistically Significant; NS = Not Significant

Table 10 suggests that this variation continues at 5 years from the pivotal arrest (it is similar at 7 years as well). The trend remains as far out as it is possible to look.

Policy Question # 4b: Do Eras Where Multiple Judges are Conducting Drug Court Do Worse Than Eras in Which Only a Single Judge is Operating?

From some prior research in California (Carey et al., 2005), we suspected that multiple judges in a short time period are associated with a lack of success in reducing re-arrest. Table 11 suggests this was not the case in the Multnomah County Drug Court.

Table 11. Mean Number of Re-Arrests for a 3-Year Period After the Drug Court Petition Hearing for Single Judge Eras Versus Multiple Judge Eras

Judge era	Single	Multiple
Comparison Mean	3.9867	4.861
Drug Court Mean	3.0357	3.4387
Difference	0.951	1.4223
% Improvement	24%	29%
Significance	0.0001	0.010
Comparison N	724	737
Drug Court N	1007	1041
Total	1731	1778

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Both single judge eras and multiple judge eras seem to be successful and at similar rates. However, the STOP Program may not be a good test of this. In the multiple judge eras, there always was a single pre-dominant judge who had "help" from a variety of other judges and many of the judges who "helped" were former Drug Court judges and had learned from previous experience. This is a very different situation from a setting where different judges are simply rotated through drug court on a regular (e.g., yearly) basis. Also, it should be noted that this is one site and only a limited number of judges. However, it is intriguing and should be pursued in further research.

POLICY QUESTION # 4C: DID THE DRUG COURT IMPROVE ITS SUCCESS RATE OVER TIME? DID LATER JUDGES DO BETTER THAN THE EARLIER JUDGES?

It is interesting to examine whether the Drug Court improved over time. In spite of changing staff, did the Drug Court as a whole learn from experience and improve its practice as it matured? An analysis comparing re-arrests 5 years out from the petition hearing in the first three judge eras versus the last three judge eras is presented in Table 12.

Table 12. Mean Number of Re-Arrests for a 5-Year Period After the Drug Court Petition Hearing for First Three Judge Eras Versus Last Three Judge Eras

Judge era: first three judge eras vs. last three eras	First	Last
Comparison Mean	5.2468	6.7125
Drug Court Mean	4.514	4.4913
Difference	0.7328	2.2212
% Improvement	14%	33%
Significance	0.006	0.003
Comparison N	1896	2094
Drug Court N	2829	2579
Total	4725	4673

Table 12 shows that the success rate doubled in the last three eras. The Multnomah County Drug Court was the second drug court in existence. In many ways it helped invent standard drug court procedures. These data suggest that over time the Drug Court learned from experience and improved its success rate. One way that it worked to improve its success rate was to create procedures for passing knowledge learned from experience from one judge to the next. The Program noticed a difference in the quality of the judges' work when each Drug Court judge began a more formal process of teaching the drug court model to the incoming judge.

POLICY QUESTION # 4D: DO JUDGES IMPROVE WITH EXPERIENCE? DID JUDGES WHO HAD MULTIPLE ERAS IMPROVE THEIR SUCCESS RATE IN THE SECOND ERA?

Some courts have regular rotations of drug court judges so that different judges (often new to the drug court model) are assigned to preside over the drug court program on a yearly or bi-yearly (every 2 years) basis. There has been some evidence (e.g., Carey et al., 2005) that changing

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judges more often than every 2 years is detrimental to successful drug court outcomes. The main question is: How important is experience for the drug court judge in impacting outcomes? Table 13 displays the results of an analysis comparing the first and second year for four judges who presided over drug court for more than one year. One judge presided for one year, then several years later, presided for a second year. The other judges presided during two consecutive years.

Table 13. Mean Number of Re-Arrests for a 5-Year Period After the Petition Hearing for Judges with Multiple Eras

Judge Era	First period	Second period
Comparison Mean	5.16	6.75
Drug Court Mean	4.27	4.40
% Improvement	17%	35%
Comparison N	2028	2281
Drug Court N	2887	2997
Total	4915	5278

Of great interest is the finding that judges who had more than one rotation through drug court had better results their second time on the drug court bench. This implies that judges learn from their experience on the bench and that having the same judge continue to preside over a drug court over time will result in better outcomes. Given that one of these judges had several years between his two eras, this also implies that a "pool" of judges who have experience in drug court could be rotated through a drug court on a regular basis, allowing the program to benefit from the judges' experience while also allowing the judges to preside over traditional court cases on alternate years.

POLICY QUESTION #5: DID THE MULTNOMAH COUNTY DRUG COURT SAVE TAXPAYER RESOURCES COMPARED TO THE COSTS OF TRADITIONAL COURT PROCESSING?

Cost Calculations

The costs calculated for this study include the following four cost results:

a. Cost per transaction

b. Costs to the system for drug court participants and the business-as-usual comparison group members from the time of the drug court-eligible arrest through 5 years post drug court entry

c. The difference in cost between the drug court and comparison group

d. Total cost savings

All costs were updated to fiscal year 2006 dollars. Although the majority of participants spent their time in Drug Court prior to 2006, the use of 2006 dollars allows us to calculate what it would cost *today* (in present value dollars) to operate the Drug Court in the manner it was operated in previous years. In addition, although the judges have changed and some of the other players (such as the district attorney and public defender assigned to the program) have changed over

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time, the single treatment provider agency has remained consistent since 1992 (with the same director) and the Drug Court has not changed its basic operations (e.g., frequency of court hearings, frequency of required treatment sessions, frequency of drug tests) for many years.

a. Cost per transaction. The costs incurred by each agency in terms of direct costs (staff time and materials) and indirect costs (support costs and overhead calculated as percentages of the direct costs) involved in transactional cost areas were combined to create costs for each agency for every transaction. The costs for each agency were then added together to get total cost per transaction. For instance, in the case of the cost of drug court sessions, the per hour cost for courts, law enforcement agencies, the District Attorney's Office, the Public Defender's Office, treatment agencies, and probation agencies were combined to generate total per hour cost for ***drug court sessions***. Using the average number of minutes used per participant for a single drug court hearing, this cost *per minute* was then translated into the cost for a single ***drug court hearing*** per participant. (Note: Drug court sessions should be differentiated from drug court hearings. A drug court session is the entire session, involving multiple drug court participants. A drug court hearing is the court appearance of a single drug court participant.) This cost per hearing was then multiplied by the number of hearings for each participant to get the overall cost of drug court hearings per participant.

Non-drug court *court* hearings were calculated similarly, using the times gathered through intensive tracking of the smaller sample for those who did not participate in Drug Court. This time was extrapolated onto the administrative data gathered on the Drug Court population.

Costs were calculated based on budgets and other financial information from fiscal year 2003-2004. The exceptions to this are victimization costs (NIJ, 1996) the source of which was described above. All costs were adjusted, as necessary, to fiscal year 2006 dollars using the consumer price index (CPI) for the relevant geographical area for Portland, Oregon. A zero discount rate was used, as any change in cost figures due to the discount rate would be negligible.

b. Costs to the system for the drug court and business-as-usual groups from the time of the drug court-eligible arrest through 5 years post drug court entry. Both Drug Court participants and the comparison individuals had a case that was drug court-eligible according to the eligibility guidelines for the STOP Program. This case was used as the index case for transactions that occurred both prior and subsequent to Drug Court or traditional court processing. As described above, any transactions that could be associated with this case were included in the calculations of the costs to the system. The costs for all transactions associated with this case (investment costs), and any transactions that occurred for 5 years after the petition hearing for entry into Drug Court (outcome costs) were summed to determine the total cost per participant. This provides the total cost to the system of choosing to process an offender through Drug Court versus processing an offender through business-as-usual.

The choice to include the costs associated with the original arrest and charge that led to drug court eligibility would seem at first to be unusual. After all, the interest is to examine what effect drug court had on subsequent recidivism. However, our perspective is to provide the policymaker with the total costs over 5 years of the decision to pursue the original charged arrest through a drug court approach, as opposed to an alternative business-as-usual approach. This must, therefore, include the cost spent on the original charged arrest as it is pursued through each route. Drug courts may save taxpayer money (or spend more money) just on the way the original arrest is handled, as well as subsequent recidivism. All of these costs need to be captured.

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The 5-year time period was chosen because it was the longest time period commonly available on all the participants in this study. The participants included in this analysis entered the STOP Program between 1991 and 2001. Those who entered in the most recent cohort, in 2001, at most had 5 years of outcome data available through 2006.

The total costs are also broken down separately as investment costs (costs associated with the drug court-eligible case) and outcome costs (costs for all transactions not related to the drug court-eligible case) from the time of drug court entry, or an equivalent date for the comparison group, through 5 years after entry.

The cost per individual in both the drug court group and the comparison group were averaged to get the mean cost per individual for each group. This number can then be multiplied by the number of participants in the drug court population to get the total cost to the system for the STOP Program.

c. The difference in cost between the drug court and comparison group. The average cost for each transaction per drug court participant can be subtracted from the average transaction cost per business-as-usual offender to determine the difference in cost between the two groups. If this number is positive, this translates into benefits, or savings ("opportunity resources"), associated with drug court participation for each transaction.

d. Total cost savings ("Opportunity Resources"). Once the average costs per participant for the drug court-eligible case and the outcomes were calculated, any cost savings could be determined by taking the difference between the two groups. The term "savings" is used in this section to mean "opportunity resources" as described earlier in this document. It should be noted that in most cases, the savings described in this section do not imply actual dollars that can be returned to the taxpayer, but that the resources (such as staff time or jail bed days) that were intended for one purpose are now available to be used for another purpose.

To determine the total cost savings, the drug court-eligible case costs and outcome costs for each group were added to obtain the total cost to the system *per offender* for those who participated in the STOP Program and those who did not. The total cost per drug court participant was subtracted from the total costs per offender in the comparison group. A positive number represents cost savings. This per-participant number is then multiplied by the number of offenders who entered the STOP Program to determine the total cost-benefits to the system. This difference in total costs is truly the bottom line for the cost to the system of drug court participants versus the cost of non-drug court participants.

INVESTMENT COSTS

Drug Court: What are the Total Criminal Justice System Costs Invested in Drug Court, not Just for Graduates, but for all Participants?

Table 14 displays the criminal justice system costs invested per drug court participant by transaction. The results reported in this table are investment costs associated with all those who entered the STOP Program from the time of the initial drug possession arrest through to the resolution of that case. This includes jail, probation, and treatment time for participants who withdrew or were terminated from Drug Court and then underwent a stipulated facts trial. This also includes individuals who had as little treatment as a single group session.

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Table 14. Criminal Justice System Costs Invested in Drug Court per Participant

Drug Court participant transactions (Mean number)	Mean number of transactions	Unit cost per transaction	Mean investment cost per participant (n = 6,502)
Arrest	1 arrest	$202.96/arrest	$203
Booking	1 booking	$299.15/booking	$299
Drug Court (DC) hearings	15 hearings	$51.22/hearing	$768
DC Treatment	253 days	$6.84/day	$1,731
Non-DC treatment post termination	14 days	$19.34/day	$271
Jail time post termination and sanctions	9 days	$112.99/day	$1,017
Probation post termination	213 days	$4.13/day	$880
Total cost per DC participant			**$5,168**

Table 14 demonstrates that, consistent with the common drug court goal of getting offenders into treatment, the largest investment costs in the STOP Program are due to treatment. Although, considering the cost per day of Drug Court treatment ($6.84 per day) compared to the cost of non-drug court treatment ($19.34 per day), Drug Court treatment is clearly the less expensive option. The cost per day of non-drug court treatment is an average cost across several modes of treatment, including residential. The higher cost of non-drug court treatment compared with drug court treatment is partially due to the higher cost of residential treatment but is also due to some economy of scale with the Drug Court treatment provider seeing an average of 400 new clients per year. There is one main treatment provider (InAct) that is contracted directly with the court and sees the vast majority of the STOP Program participants. The direct contract facilitates the treatment provider in having a clear understanding of the needs of the court and the special circumstances of the STOP Program participants, which increases the efficiency of the program. In addition, the treatment experience of people in drug court is markedly different than the experience in a non-drug court setting because of the involvement of the judge and case manager, as well as the drug testing. All team members are communicating about the participants involvement in treatment and responding with rewards or sanctions to this involvement.[16] In spite of this, the economies of scale involved in having a single treatment provider serve hundreds of drug court participants still lead to a lower per day cost.

The next largest investment cost is from the relatively small amount of jail days due to Drug Court sanctions (although the STOP Program tends to use these rarely) and due to those who terminated unsuccessfully from the Program and then served their time in jail for the original charge. Clearly, jail is an expensive option for dealing with drug offenders.

[16] For more detailed information on the STOP Program's practices and procedures, please see Appendix A.

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Traditional Court ("Business as Usual"): What are the Investment Costs in Drug Court Over and Above the Costs Invested in the Business-as-Usual Process?

In order to answer this question, it is necessary to first determine the costs per participant for the business-as-usual process. These numbers can then be subtracted from the costs due to Drug Court to arrive at the costs of Drug Court over and above the business-as-usual process.

Table 15. Investment Costs for the Traditional Court (Business-as-Usual) Process

Non-Drug Court traditional court transactions	Mean number of transactions	Unit cost per transaction	Mean investment cost per offender (n=4,600)
Arrest	1	$202.96	$202.96
Booking	1	$299.15	$299.15
Court time (1475.01 seconds)	24.6	$29.04	$714.38
Treatment	142	$19.34	$2,746.28
Jail time	11	$112.99	$1,242.89
Probation time	328	$4.13	$1,354.64
Total cost per non-DC participant			**$6,560.30**

Court time costs include the court (judge, judicial assistant, court reporter, etc.), the District Attorney, the public defender, corrections (when an offender is in custody), and the Sheriff (bailiff). This court time is that which was determined by the use of stopwatches as part of the 2003 study (as described in the methods section of this document). Non-drug court treatment use was estimated based on data from the 2003 study.[17]

Although the business-as-usual process is generally thought of as one that does not involve treatment, this is erroneous. For many offenders, treatment is a condition of their probation. As Table 15 demonstrates, like the cost of Drug Court, the largest cost for the traditional court process is treatment. Although the number of days in treatment is fewer for the comparison group than the drug court group, the cost of treatment is higher.

After the cost of treatment, the next largest investment in the non-drug court process is due to time on probation closely followed by the costs of jail. Again, jail is an expensive option when dealing with drug offenders and, as the outcome results will show (below), an apparently ineffective option as well.

Table 16 demonstrates the difference in investment between drug court and non-drug court participants. In this table, a positive number in the difference column indicates that the drug court process costs less than the non-drug court process.

[17] Due to a poor match rate between the study population and the statewide treatment dataset, it was necessary to estimate non-drug court-related treatment use for both investment and outcomes based on a combination of the new dataset and the treatment data gathered in 2003 (for which there was a much higher match rate).

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Table 16. Difference in Investment Cost for Drug Court and Business-as-Usual Process per Transaction

Transactions	Investment cost per DC participant (n = 6,502)	Investment cost per non-DC offender (n = 4,600)	Cost difference (benefit)[18]
Arrest (1)	$203	$203	$0
Booking (1)	$299	$299	$0
Court time	$768	$714	-$54
Treatment*	$2,001	$2,746	$745
Jail time*	$1,017	$1,243	$226
Probation time*	$880	$1,355	$475
Total cost	**$5,168**	**$6,560**	**$1,392**

*These cost differences are significant at $p < .05$.

Consistent with the findings from 2003, the data from over 10 years of operation show that the Multnomah County Drug Court actually costs less to operate than the cost of "business as usual."

Also consistent with the results found for the smaller sample in the 2003 study, the average cost for business-as-usual court processing ($714) is only about $50 less per offender than the average cost of drug court sessions ($768). This is most likely due to drug court sessions being generally quite short in duration, and to less preparation time required for the attorneys and the judge for each court appearance.

Keep in mind that the STOP Program was designed as a pre-plea court. Although it changed to post-plea in 2000, participants still do not go through the full traditional court process and are not convicted before entering the Program. However, even when the court was pre-plea, participants had to stipulate to the facts in the police report and, upon unsuccessful termination, had to participate in an expedited stipulated facts trial and were convicted and sentenced to any probation and jail time they would have received if they had not gone to Drug Court. The pre/post-plea (*pre-conviction)* model is an enormous cost savings for the drug court system as there is little court time spent on the traditional process before drug court entry and there is little probation involvement for active drug court participants. Post-conviction programs generally process drug court participants through the full business-as-usual process including sentencing before program entry, losing any benefit on the investment side to entering an offender in the drug court system. This is a strong argument for the use of a pre-conviction model in drug courts. In addition, the pre-conviction model generally results in offenders entering the program and getting into treatment much sooner than if they must go through the full business-as-usual process, which is an important component in the efficacy of the drug court model.

As presented in Table 16, the per-participant investment benefit is $1,392, regardless of whether the participant graduates from the program. If this number is multiplied by the number of indi-

[18] What we term "Cost Difference (Benefit)" is also often called "cost averted" or "cost avoided."

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viduals who entered the program between 1991 and 2001 (6,502), we find that the STOP Program has saved the criminal justice system more than $9 million in case processing costs alone.

Cost per person for traditional court minus the cost of drug court processing:

$6,560 - $5,168 = $1,392

Cost savings for 10 years of drug court operation:

$1,392 * 6,502 = $9,050,784

It is generally assumed that, due to the expense of treatment and multiple court sessions, the drug court process will cost more than the non-drug court process. However, as this demonstrates, this is not always the case. In addition, previous cost studies performed in California on nine drug court sites also found cost savings in the drug court process at one site (Carey et al., 2005). Interestingly, this site is post-conviction and the savings appear to be due to an expedited court process if the offender is interested in drug court.

Outcome Costs

What are the Costs or Savings Associated With Outcomes for Drug Court and "Business as Usual" Participants?

In order to establish the costs, it is necessary to determine the outcomes in terms of each transaction for both groups. Table 17 presents the average number, or amount of time spent, per offender by the drug court and comparison group for each transaction not associated with the drug court-eligible arrest for 5 years after the drug court petition hearing. There was a significant difference ($p < .01$) between the two groups on every transaction except for days in treatment.[19]

Table 17. Average Number of Transactions for Each Group After the Eligible Arrest

Outcome transactions (mean number)	Drug Court participant outcomes (n = 6,502)	Non-Drug Court outcomes (n = 4,600)
Arrests*	4.2	5.9
Bookings*	2	2.9
Court time (in minutes)*	19.6	27.6
Jail time (days)*	46	75
Treatment (days)	72	92
Probation time (days)*	529	661
Prison time (days)*	80	105

* These outcomes were significantly different between the two groups ($p<.01$).

[19] It is difficult to determine the validity of the lack of significance for days of treatment since, as described earlier, these numbers are estimates based on the current data combined with the detailed data from the 2003 study.

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As Table 17 demonstrates, the drug court participant group experienced fewer transactions in every area. Drug court participants had significantly fewer re-arrests and bookings. If the number of re-arrests and bookings after drug court is taken as a reasonable indication of criminality, it appears that public safety is safeguarded more by the drug court process than by traditional court processing. In addition, less criminal activity results in less time in court, jail, and prison and less time on probation, which in turn results in lower costs.

The drug court group also had less treatment after leaving the STOP Program. It is difficult to interpret the full implications of this finding. The most logical (and positive) explanation is that drug court participants (particularly graduates) used less treatment after leaving the program because they were doing well and felt no need for further assistance with their addiction.

Table 17 provides the costs per participant associated with each transaction for both the drug court and the non-drug court group. This table also presents the difference in costs between each group per individual and for all participants who entered the Program during the years from 1991 through 2001. Further, this table includes the costs for victimizations including person (violence) and property related charges.[20] Arrests were coded based on whether there were associated person or property charges. Some arrests had both a person and a property charge. In these cases, both the person and the property charge were counted as separate victimization costs.

Table 18 reveals that there are cost savings in outcomes for drug court participants across every transaction. The largest benefit is due to less use of jail days by drug court participants followed by less use of prison beds. The total outcome cost savings is nearly $7,000 for each drug court participant, and more than $12,000 when victimization costs are included.[21] These savings, when multiplied by the number of people who entered the Multnomah County Drug Court's STOP Program from 1991 through 2001, results in a total system savings due to positive outcomes of more than $79.4 million (or $7.9 million per year). Note that these positive outcomes were counted for just 5 years after the petition hearing date in order to include all 6,502 participants who entered the program during the 10-year period of the participant population. As described earlier in this report, the lower recidivism for drug court participants continues through 14 years after the petition hearing. This means that these cost savings will continue to accumulate for these participants for many years after the 5-year end point used in these cost calculations. If these participants continue to accrue at $7.9 million per year, the cost savings after 14 years

[20] The victimization costs in this paper are reported as a point of interest for those who consider victimizations a cost that occurs to taxpaying citizens and therefore a cost that should be included in a "cost to the taxpayer" approach. These victimization costs are based on the National Victimization Survey. The National Institute of Justice's *Victim Costs and Consequences: A New Look documents estimates of costs and consequences of personal crimes* (1996) documents losses per criminal victimization, including attempts, in a number of categories, including fatal crimes, child abuse, rape and sexual assault, other assaults, robbery, drunk driving, arson, larceny, burglary, and motor vehicle theft. The reported costs include lost productivity, medical care, mental health care, police and fire services, victim services, property loss and damage, and quality of life. In our study, arrest charges were categorized as person (violent) or property crimes, and therefore costs from the victimization study were averaged for rape and sexual assault, other assaults, and robbery and attempted robbery to create an estimated cost for violent crimes; and arson, larceny and attempted larceny, burglary and attempted burglary, and motor vehicle theft were averaged for an estimated property crime cost.

[21] Although victimizations are included in outcomes, other outcome costs are displayed separately from victimization costs for two reasons: 1. Victimization costs are often considered "societal" costs rather than system costs so some readers may want to look at these costs separately, and 2. The cost of a single victimization is extremely high and therefore even a small number of victimization can make up a large proportion of the total costs, which may lead to a misleading interpretation of these costs.

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could be as high as $111 million. Please note that these numbers are outcome costs (savings) only and do not include the investment costs presented earlier.

Table 18. Outcome Costs and Savings for 5 Years from Petition Hearing

Outcome transactions	Drug Court Participant outcome costs (per participant)	Non-Drug Court outcome costs (per participant)	Difference in cost (per participant)	Drug Court outcome savings over 10 years (n = 6,502)
Arrests*	$852	$1,197	$345	$2,243,398
Bookings*	$598	$868	$269	$1,750,566
Court time*	$569	$802	$232	$1,510,545
Jail time*	$5,198	$8,474	$3,277	$21,305,168
Treatment	$1,392	$1,779	$387	$2,514,974
Probation time*	$2,185	$2,730	$545	$3,544,630
Prison time*	$5,402	$7,091	$1,688	$10,977,002
Total outcome costs without victimizations	**$16,197**	**$22,941**	**$6,744**	**$43,846,283**
Victimization (person) *	$11,716	$13,913	$2,197	$14,283,464
Victimization (property) *	$10,624	$13,901	$3,278	$21,310,825
Total outcome costs plus victimizations	**$38,537**	**$50,755**	**$12,218**	**$79,440,571**

*These cost differences are significant at $p < .01$.

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Table 19 presents the investment and outcome costs by graduate and provides the costs for all participants for ease of comparison.

Table 19. Outcome and Investment Costs per Participant for Graduates and All Participants

	Total outcome costs without victimizations	Total outcome costs including victimizations	Investment costs
Graduates	$6,014	$19,661	$4,417
All participants	$16,197	$38,537	$5,168

The outcome costs for the two groups are substantially different. As demonstrated in the outcome section, the STOP Program graduates recidivate significantly less often than other participants (and the comparison group), which results in lower outcome costs. In addition, the investment cost for the drug court-eligible case is also less for graduates, though not dramatically different. While the average number of days in drug court treatment was substantially more for graduates than the average for all participants (406 versus 253 days respectively), graduates had less time in jail (1 versus 9 days) and less time on probation (0 versus 213 days) which brought the cost of the eligible case for graduates down.

COST BENEFIT RATIO

What is the Return on the Taxpayer Dollar?

The cost-benefit ratio provides the amount of return on every dollar spent. Table 20 presents the program investment, the total savings due to lower investment and lower outcomes costs, and the cost-benefit ratio for the Drug Court's STOP Program. This includes the data from all program participants entering from 1991 to 2001.

Table 20. Investment, Benefits and Cost-Benefit Ratio

	Investment Costs	Total Investment and Outcome Savings (Benefit)	Cost-Benefit Ratio
All Participants	$16,197	($13,92 + $12,218) = $13,610	1: 2.63

For every dollar invested in the STOP Program (for all participants, regardless of graduation status), the criminal justice system experiences a return of $2.63. This is a return of 263% on the dollar. If other taxpayer dollars were included (such as health care costs, social services costs, taxes paid by employed participants) the return would likely be even higher. The original Finigan (1996) cost study of the Multnomah County Drug Court included both health care and social services costs and resulted in a cost-benefit ratio of 1:10. Unfortunately, the implementation of the Health Insurance Portability and Privacy Act (HIPAA) since the time of the 1996 study has made

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access to health care and social services data extremely difficult, time consuming and expensive—and therefore beyond the limits of the current study.

TOTAL COSTS

What are the Total Costs to the System (Including Investment and Outcome Costs) for Drug Court and Traditional Court?

Table 20 presents the total cost per person (investment and outcome costs combined) for the drug court participants and the comparison group from the date of the eligible arrest to 5 years after the drug court petition hearing date. This table also provides the total difference in cost (or cost savings) for drug court participants versus the comparison group. As noted earlier, this difference in total costs is truly the bottom line for the cost to the system of following the drug court route versus the traditional, or business-as-usual, court route.

Table 21. Total Difference in Cost (or Savings) per Participant Over 5 Years From Petition Hearing: Drug Court Participants Subtracted From Comparison Group

Comparison Group Transactions	Drug Court Participants	Comparison	Cost Difference (Savings)
Arrests	$1,055	$1,400	$345
Bookings	$897	$1,167	$269
Court time	$1,337	$1,516	$178
Treatment	$3,393	$4,525	$1,132
Jail days	$6,214	$9,717	$3,503
Probation	$3,064	$4,085	$1,020
Prison days	$5,402	$7,091	$1,688
Total costs	**$21,365**	**$29,501**	**$8,136**
Victimization (property charges)	$11,716	$13,913	$2,197
Victimization (person charges)	$10,624	$13,901	$3,278
Total costs including victimizations	**$43,705**	**$57,315**	**$13,609**
Total program savings over 10 years of operation (n = 6,502)			**$88,491,446**

Table 21 demonstrates that (aside from victimization costs) the system spends the largest amount of taxpayer dollars on incarceration (jail and prison) and, interestingly, the next largest amount on treatment. Note that in spite of the higher jail costs (i.e., greater number of days in jail) for the comparison group, incarceration did not lead to less recidivism (see the cost of arrests in the two groups) or greater public safety (see the cost of victimizations).

The total cost of treatment (investment plus outcome-related treatment) is about 25% higher for the comparison group than the for the drug court group. This higher cost for the comparison

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group is a function of the higher per day cost of non-drug court related treatment rather than indicating that the comparison group received more treatment. The actual number of days in treatment for the drug court group is higher than the number of days for the comparison group (339 days versus 234 days, respectively) but the majority of the treatment received by the drug court participants occurred while they were in the program at a lower cost per day.

These treatment costs do demonstrate the positive findings that there are offenders participating in, and using taxpayer funds for, treatment even without drug court intervention. Yet, this more expensive treatment does not appear to lead to the same benefits as the treatment that occurs in the drug court setting.

The costs presented in the above tables include offenders that participated in drug court over 10 years from 1991 through 2001 and cover a time period of 5 years from the time of the petition hearing for drug court entry. This includes all participants, not just graduates. Over a 5-year period, drug court participants save the taxpayers over $14,000 per participant. If this analysis had been performed on a time period longer than 5 years, the recidivism outcomes for both groups show that drug court participants would continue to accrue even greater cost savings.[22]

Using the per participant savings of $13,609 and multiplying it by the number of offenders who participated in drug court over 10 years of operation (n = 5,602) resulted in a taxpayer benefit of more than **$88 million** due to drug court participation.

Limitations to the Study

The main limitation of this study is its reliance on administrative and operational databases. The researchers and the database administrators used crosschecks among the databases to minimize errors and omissions. Establishing the correct identity of individuals (that is, the correspondence of records across different databases) was a major task. We could not eliminate or check on errors in arrest data, the dependent variable. However, it is unlikely there were sufficient, systematic errors to eliminate the effect size of participation in the Multnomah County Drug Court. Demographic data, primarily race, seem to include a number of errors. Or perhaps a better description is that the purpose for collecting race data was different depending on whether the data were being used to provide culturally appropriate treatment versus used to identify an individual “running down the street,” which led to discrepancies in race identification. Either way, the fact that any errors are not compounded by sampling uncertainty (because the study included the entire population of drug court-eligible offenders) lends some additional confidence to the results.

Another limitation is that this study was performed in a single drug court. It is possible that these results cannot be generalized to other drug courts. For example, since this program is primarily pre-conviction, these results may not be representative of post-conviction programs.

Finally, because data on motivation level were not available on this population and data on drug of choice were not available for the comparison group, there could be some differences in these important factors between the program participants and the comparison group members for which we were not able to control.

[22] It was not possible to extend this time period greater than 5 years as the participants who entered in later years did not have greater than 5 years of outcome data.

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SUMMARY / CONCLUSION

This research has relevance to both drug court researchers and policymakers. By examining an entire target population within a single county over a 10-year period, drug court researchers can examine some of the internal and external dynamics that effect outcomes in a drug court setting over time. For policymakers, this research provides a unique look at the impact of a mature drug court on the target population of offenders over an extended period.

The results are organized around answering specific policy questions:

Policy Question # 1. What is the overall impact of the Multnomah County Drug Court on criminal recidivism?

Overall the drug court reduced the incidence and frequency of criminal recidivism as compared to those who did not enter drug court over the entire population for out to 5 years. (The maximum we had available for the entire population). These results are consistent with some of the individual year studies (Finigan, 1998; Carey & Finigan, 2003) and consistent with the overall findings of the multi-year study of Goldkamp et al., 2001. These conclusions hold true when subsequent arrests are measured as a rate of recidivism (arrest/no arrest) or as the actual number of arrests. Of course, the major caveat for this work (also true of the other cited studies) is that there was no random assignment to conditions, therefore some unmeasured (and perhaps unmeasurable) differences between those who entered drug court and those that did not, might explain these results.

The Drug Court also appears to reduce the incidence of drug crimes substantially for up to 14 years after the petition hearing. This is impressive because some have speculated that the effect of the drug court might only be short term. The effect is statistically significant after controlling for age, gender, race, and for 2 years of prior criminal history for all but year 14 where the number of cases available for the analysis drops to only 317. It also should be noted that the later years reflect the tracking of the earliest drug court cohorts who received their drug court experience during the rocky beginnings of the court. To the degree that later cohorts do better, a long-term tracking of the later cohorts might show even better results.

Policy Question # 2: Does the Drug Court show consistent levels of success in reducing re-arrests each year of the 10-year period?

The Multnomah County Drug Court, while overall demonstrating a positive effect over the 10-year period, had better years and worse years. Specifically it had two “rough periods.” The first was the first two years of the program in during which there was either no positive results (1991) or small gains (1992). The second period was 1996, which demonstrates no statistically significant overall success. This year (1996) was also the year the Program moved temporarily to a location outside of the courthouse.

There are two points that this emphasizes. The first is that the early implementation period of a drug court is not the best period to choose to examine the court’s effectiveness. Researchers should be cautious in evaluating drug court programs at the very beginning of their operations. It should be remembered, though, that this court was the second in the nation and in 1991-1992 no one knew how to operate a successful drug court (e.g., there were no “10 key components”). The other point that these data illustrate is that care should be taken about assessing the performance of a drug court based only on a single cohort year. Some of the variety in outcome results on

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drug court evaluations may partly be explained by the fact that the researchers may have hit a bad year for an otherwise effective court or conversely have found an unusually effective year in an otherwise unpromising court.

Policy Question #3: Do internal or external changes effecting policies and procedures of the court affect its success or failure?

We identified a number of external changes from 1991 to 2001 that might have had an influence on court operations and outcomes. These external changes were categorized as follows: criminal justice system changes, changes in the Multnomah County substance abuse treatment system and changes in the Oregon managed care system. With a single exception, these changes appeared to have no statistically significant impact on subsequent recidivism for this population (drug court and comparison group). The effect of group membership (drug court or comparison group) remained statistically significant in the model. We can therefore conclude that these external changes were likely not the source of the found positive effects of drug court.

There was one exception to the above conclusion. The introduction of the Central Intake System under the federally funded Target Cities Project in 1993 and its closure in 1998 are significantly and substantially related to subsequent recidivism. The effect of Central Intake was predominantly with the comparison group. This makes sense in that Central Intake's purpose was to get more and better treatment to those offenders that were "slipping through the cracks in the system" and would have therefore have impacted the comparison group more and the drug court group less. This has interesting implications. It would suggest that during the period of Target Cities Central Intake (1993-1998), the drug court effect is somewhat understated, since the comparison group is also receiving benefits from Central Intake. A true measure of the impact of the drug court as compared to traditional business as usual may have been in the periods in which Central Intake did not operate.

The internal changes in drug court policies and procedures were also examined, such as changes in eligibility criteria (including the change from pre- to post-plea) and changes in insurance procedures. These were then entered into the logistic regression model to see if these changes had an impact on the recidivism (arrest/no arrest) of the drug court group when age, race, gender, and prior arrest history are also in the model. The results showed no significant effects for any of the internal change variables. In other words none of these changes appear to be associated with any change in re-arrests in the drug court group.

In addition, several instrumental variables relative to success in the drug court program were examined for their effect on subsequent recidivism. Positive effects were found for a higher number of days in substance abuse treatment and for several judicial factors discussed below. A negative effect was found for the use of sanctions. The positive effect for those receiving increased treatment days is a positive affirmation of the drug court logic model. If increased treatment produced no impact on re-arrest, then the rationale for drug court might be suspect. The negative effect of sanctions needs to be explored in more detail (we were only able to tell if a sanction hearing was held, not the sentence imposed), but it weakens the argument that increased sanction will have positive long-term effects.

Policy Question # 4: Do changes in judicial leadership affect the success of the Drug Court?

Judges did differ in their success rates in terms of reducing recidivism, suggesting that drug court results may vary depending on the judge involved. There were no differences between eras of a single court judge and multiple judges, although the period of multiple judges was relatively

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short. Also, the STOP Program may not be a good test of this. In the multiple judge eras, there always was a single pre-dominant judge who had "help" from a variety of other judges and many of the judges who "helped" were former Drug Court judges and had learned from previous experience. This is a very different situation from a setting where different judges are simply rotated through drug court on a regular (e.g., yearly) basis.

Later drug court judges had more positive outcomes than earlier judges (on average). One reason for this may have been that a resource for the comparison group (The Target Cities Central Intake Unit) ended, increasing the negative outcomes for the comparison group. Yet, it is also likely that judicial procedures and practices improved over time. The Multnomah County Drug Court was the second drug court in existence. In many ways it helped invent standard drug court procedures. These data suggest that over time the Drug Court learned from experience and improved its success rate. One way that it worked to improve its success rate was to create procedures for passing knowledge learned from experience from one judge to the next. The Program noticed a difference in the quality of the judges' work when each Drug Court judge began a more formal process of teaching the drug court model to the incoming judge.

Of great interest is the finding that judges who had more than one rotation through drug court had better results their second time on the drug court bench. This implies that judges learn from their experience on the bench and that having the same judge continue to preside over a drug court over time will result in better outcomes. Given that one of these judges had several years between his two eras, this also implies that a "pool" of judges who have experience in drug court could be rotated through a drug court on a regular basis, allowing the program to benefit from the judges' experience while also allowing the judges to preside over traditional court cases on alternate years.

Policy Question #5: Did the Multnomah County Drug Court save taxpayer resources compared to the costs of traditional court processing?

Consistent with the findings from the study conducted by the authors in Portland in 2003, the data from over 10 years of operation shows that the Multnomah County Drug Court actually costs less (by **$1,392** per participant) to operate than the cost of "business as usual." Also consistent with the results found for the smaller sample in the 2003 study, the average cost for business-as-usual court hearings ($714) is only about $50 less per offender than the average cost of drug court sessions ($768). This is most likely due to drug court sessions being generally quite short in duration, and to less preparation time required for the attorneys and the judge for each court appearance. These data suggest that the finding in 2003 was not simply relevant to that specific time period.

Overall, this means that the court's operation itself (not including avoided costs due to positive outcomes) saved the taxpayer more than **$9 million** over the 10-year period.

In terms of avoided costs to the taxpayer accruing from positive results for the Drug Court, there are cost savings in outcomes for drug court participants across every transaction. The largest benefit is due to less use of jail days by drug court participants followed by less use of prison beds. The total outcome cost savings is nearly **$7,000** for each drug court participant, and more than **$12,000** when victimization costs are included.

These savings, when multiplied by the number of people who entered the Multnomah County Drug Court's STOP Program from 1991 through 2001, result in a total system savings due positive outcomes of over **$79 million** (or $7.9 million per year). Note that these positive outcomes

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were counted for just 5 years after the petition hearing date in order to include all 6,502 participants who entered the program during the 10-year period.

As described earlier in this report, the lower recidivism for drug court participants continues through up to 14 years after the petition hearing. This means that the cost savings will continue to accumulate for these participants for many years after the 5-year end point used in these cost calculations. If these participants continue to accrue at $7.9 million per year, the cost savings after 14 years could be as high as **$111 million**. Note that these numbers are outcome costs (savings) only and do not include the investment costs presented earlier.

The opportunity to conduct a longitudinal study on a single drug court and to examine its effect on the entire target population does not happen often. Gaining permission to access data and coordinating the data collection is an immense task. Yet, this has offered some insight into the long-term operation of drug courts that is extremely useful for both for researchers and policymakers. This paper presented the result of just some of the analyses that are possible for this unique set of data. Future work could continue to explore possible analyses and answer other important policy questions.

The results of this study demonstrate that the Multnomah County Drug Court has a significant impact on recidivism over time, reducing recidivism by up to 44% for time periods over 10 years past the time an offender entered the STOP Program. This study also demonstrated that different judges do have an impact on the success rate for drug court participants and that judges with more experience have better participant recidivism outcomes. The operation of the STOP Program in the Multnomah County Drug Court has a significant impact on system costs, saving the taxpayers more than $88 million during a 10-year period due to lower investment costs and decreased recidivism for drug court participants.

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APPENDIX A: DESCRIPTION OF DRUG COURT AND NON-DRUG COURT PROCESSING

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What Do We Know About the STOP Drug Court Program?

History and Overview

Multnomah County instituted its drug court program in August 1991 using a Byrne grant and local city funds. Judge Harl Haas; Jim Hennings, Metropolitan Public Defenders; Norma Jaeger, Multnomah County Behavioral Health (A & D); and Tamara Holden, Adult Community Justice, were instrumental in devising the first Oregon drug court. Haas visited the Dade County, Florida, drug court, which was 1 year old at the time, and saw that churches and the local county paid for treatment for those arrested on drug charges. He learned more about this drug court model and decided to establish a similar specialized court in Multnomah County. He negotiated with the Multnomah County District Attorney and the leader of the local Public Defender's Office. The STOP (Sanction Treatment Opportunity Progress) Program was among the pioneer drug courts to be established in the United States. The STOP Program was designed to be a pre-plea offer to individuals arrested on drug charges. Upon successful completion of this intensive program, charges are dropped, and a defendant can apply to have them removed from his or her criminal history record.

Conditions of eligibility have included no evidence of distributing illegal drugs, no holds in other jurisdictions, no gang associations, no other felony or class A misdemeanors, and no driving under the influence of intoxicants (DUII) associated with this charge. Participants were given one chance; if they tried the STOP Program and failed they would not be invited to participate a second time if arrested again. Eligibility for the Program has changed over the years to include or prevent new participants based on funding availability and treatment provider capacity. For example, in 1992, the STOP Program closed the invitation to those defendants currently on probation or parole, but in July 1995, those defendants were once again eligible. Most likely as a result of a $500,000 USDOJ award the previous fall, eligibility changed again in the Spring of 1996 to include those who had not successfully completed the Program.

A single drug treatment provider supplied outpatient treatment to participants when the STOP Program began in 1991 and the Program was open to individuals charged with possession of a controlled substance (PCS). However, due to some questions about the quality of treatment, that treatment provider was dismissed, and in July 1992 the current provider (InAct) took over as the sole treatment provider.

STOP Program Participants

The STOP Program is offered to people charged with Possession of Controlled Substance, Possession of More Than an Ounce of Marijuana and Tampering with Drug Records (forging prescriptions for pharmaceutical drugs). All of these charges fall under Oregon Revised Statute #475. The STOP Program was pre-plea for the first 10 years of operation. That is, participants did not have to plead to the charge or charges for which they were accused. Upon agreement to participate in the STOP Program, clients must formally acknowledge that they have waived their right to a trial by jury and have agreed to the facts stipulated in the police report. Instead, upon self-termination (repeated failures to appear) or termination (treatment non-compliance) clients receive a stipulated facts trial. This alternative consists of the Drug Court judge reading the police report and determining guilt or innocence without the benefit of a jury or witnesses.

Between 1991 and 2001, the Drug Court graduated an average of just over 40% of its clients (2,625 out of a total of 6,502), though this percentage has risen higher than 50% in some years.

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The number of active clients in the STOP Program has ranged from approximately 500 to over 1,200 in a given year. Budget cuts in some years have led the DA's Office to temporarily stop prosecuting simple drug possession clients so that population was no longer being sent to the Drug Court in those years.

STOP Program Enrollment

Defendants will be informed by the public defender at their arraignment if they are eligible for the STOP Program. These defendants are court-ordered to attend an orientation at the Metropolitan Public Defender's Office at 8 a.m. the following morning. Following their orientation and after the public defender has confirmed their eligibility, clients must appear at the Drug Court that day to declare their intentions.

Eligibility Screening

Eligibility criteria have changed over time due to changes in funding, space availability at the treatment agency and politics. The Program is offered to participants based on: arrest charge, criminal history, probation status, additional charges, status at other jurisdictions (holds or retainers) and previous participation in the Program. As in all criminal justice areas, discretionary power can be exerted by the District Attorney or the judge in determining who is eligible. The Multnomah County District Attorney's Office is responsible for determining client eligibility for the Program.

Participation has been denied based on prior convictions, prior STOP Program participation, and probation/parole status. Convictions of a violent offense make a client ineligible. Major violent offenses such as Assault I and Armed Robbery are the types of crimes for which a client would be denied entry to the STOP Program. Simple Assault and charges of this nature do not usually prevent a client from entering the STOP Program. STOP participants may have more than one charge when they enter the Program. A client may have two PCS charges or a Criminal Trespass or Theft charge as well as the Possession charge.

Public Defender Orientation

The Metropolitan Public Defender's STOP Program orientation begins with a 45-minute description of the Program. The legal assistant in charge of the STOP Program presents this orientation. Curriculum for the session describes the benefits of the STOP Program, including: treatment functions, acupuncture, drug testing, and dismissal of charges upon completion of program. The sanctions participants could receive for non-compliance are also covered. These include jail time, the stipulated facts trial, "sit" sanctions, detoxification programs, inpatient treatment, and forest work camp. The legal assistant provides a clear picture of what a year in the STOP program will be like. The participants then meet individually with their attorney to discuss their case. The attorney reviews the police report and gives the client advice on accepting the Program or taking the case to trial. The client ultimately has the final decision and must appear in STOP Court at 1:30 p.m. that afternoon to pronounce their intentions.

First Drug Court Appearance

All clients offered the STOP Program must appear before the judge at the STOP Court the day following their arraignment. If a client declines the STOP Program they will be assigned a new non-drug court attorney from the Public Defender's Office, if necessary, and their next court date will be set out to a future date on the "Call Docket." A client that decides to enter the Program is told to report to InAct, the treatment provider, the following morning at 9 a.m. The client is

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given a 2-week "set-over." The 2-week set-over is a 14-day trial period that provides a chance for the client to see if the STOP Program is suitable for them.

InAct Orientation

The admissions staff at InAct conducts the orientation. The potential clients participate in a 1-hour group orientation. The admission staff describes what a year in the STOP Program will entail. Clients then have individual meetings with an admissions staff member to complete the intake paperwork and create their treatment schedule. The admission counselor assigns the client to a group for group counseling and to an individual counselor. The counselor also schedules acupuncture treatments, the intake assessment with their new counselor, and a date for a physical examination with the InAct naturopathic doctor. The admission counselor also discusses insurance options with the client. If a client has private insurance he or she will self-pay for treatment. Participants with no insurance are assigned an Oregon Health Plan (OHP) appointment.

Declaration Day

After 2 weeks of participating in the Program, clients appear in STOP Court and declare their intentions. If they are staying in the Program, they will continue with treatment and future court appearances will be scheduled (typically 1 month from the declaration day). Clients do not have to plead to the charge for which they are entering. If a client declines the Program, his or her case will be set back on the trial docket and will be heard by a non-drug court judge. A client declining the Program will be given a new lawyer at Metropolitan Public Defenders if necessary and have his or her case set on the Trial Docket.

The STOP Program (Drug Court)

Clients who accept the Program will be working towards having their charges dropped by attending prescribed treatment services, appearing at the Drug Court, and paying STOP Program fees. InAct provides treatment for most clients. Resources are made available to clients such as Oregon Health Plan enrollment services and connections with community resources.

Court Appearances

Clients appear before the judge based on the treatment phase they are currently completing. During court appearances the judge checks in with the client's progress, both from the client's perspective and the treatment provider's. The treatment liaison provides information to the judge on the client's progress from the counselors at InAct. The District Attorney makes note of subsequent arrests and brings these data to the courtroom. The judge offers encouragement and rewards to clients who are complying with the treatment regime. The judge also imposes sanctions and checks on the completion of previously imposed sanctions and the status of their fee payment. Bench warrants are issued and lifted based on a client's appearing in court as scheduled.

Warrants

Most appearances require a defendant's presence in the courtroom. If a defendant fails to appear in the courtroom, a bench warrant will be issued for his or her arrest by the judge. If the defendant is stopped by law enforcement for any reason and has a warrant, he or she is taken into custody and held at Multnomah County Detention Center until the warrant is processed. Clients remain in custody until they can appear at the Drug Court, usually the next business day.

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Sanctions

Sanctions are used in the STOP Program as tools to help enforce the rules and to assist clients in their completion of the Program. Sanctions are employed as punishments as well as motivation for participants. Individual judges have their own style of imposing sanctions. An important motivational tool used by the Drug Court judges is the "impose but suspend" rule. This is accomplished by the judge imposing a certain sanction, but suspending it until the client's next court date. This is often used when a client is doing poorly in the Program. At the following court date, if the client is doing better or completed specific tasks required by the judge, the sanction is not imposed. The judge may leave the sanction in "impose but suspend" status for the following court date. This approach can be described as "the ball is in your court" approach. If a client at the following court date has not performed up to expectations, the judge imposes the promised sanction. Sanctions can only be imposed by the judge, with or without recommendations from the treatment counselors. Sanctions are often graduated; that is, they steadily increase with the severity of the non-compliant behavior. The court always follows through with its threat of sanctions and imposes them swiftly after they are ordered. Sanctions are consistently imposed across individuals for similar noncompliant behavior or actions. The types of sanctions used by the Multnomah County Drug Court's STOP Program include sit sanctions, forest work camp, jail sanctions and community service.

Sit Sanction. A sit sanction is usually the first sanction that is handed down by the court when a client begins to fail to comply with treatment and court orders. A client that receives a sit sanction is required to sit in court and observe the day's proceedings. Sit sanctions usually last for 2 days but can be as long as a week. Clients receiving a sit sanction are often required by their counselor to write an essay describing their observations in the court room, what they learned from the sit sanction, and how it can be applied to their recovery.

Forest Work Camp. Forest work camp is more severe than a sit sanction. Forest work camp is in a wooded area about an hour outside of Portland where people are sent to do conservation work. Participants can be sentenced to 2 to 3 weeks at the camp for violating the Program rules. A client sanctioned to forest work camp will also attend treatment while at the camp. Groups and counseling sessions are conducted at the camp. Forest work camp removes clients from their current problems and gives them the opportunity to reflect on their issues. It is used as a sanction, but clients have mentioned anecdotally that it helped to turn them around. Participants have been sentenced to forest work camp for as little as week and as long as a month.

Jail Sanction. The jail may be used as a sanction in several ways. Occasionally a judge will impose a jail sanction as an immediate detoxification. Participants are given a chance to locate a detoxification facility on their own. If they are unable or unwilling, the judge sentences them to a 5-7 day "jail detox." Jail is occasionally used as a motivational tool as well. The judge may give a client a 1-day jail sanction for every treatment function missed; suspend the sanction until next court date and see how the client performs. For example, if the client attends all treatment sessions, no jail days are ordered. However, if a client misses three group counseling sessions and one urinalysis (UA) test, the client might receive 4 days in jail at his or her next court appearance. The judge may impose 1 day of jail for each positive urinalysis test. Jail is also used to hold participants in custody while they are waiting for a residential bed. This is usually on the advice of the client's personal counselor. A client in custody waiting for a residential bed could remain in jail as long as 6 months due to the lack of available treatment facilities. Counselors caution clients that waiting in custody for a residential bed is imminent when they are unable to avoid substance use; this sanction is never a surprise. In spite of all the possible ways to use jail

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as a sanction, this sanction is imposed rarely. On our intensively tracked clients, an average of 0.4 jail days were imposed.

Community Service. Community service is used as an alternative to forest work camp for female clients (there are no forest work camp facilities for women), but may also be imposed on men. The judge will assign 8 hours of community service for each positive urinalysis test and/or each treatment function missed. The client is always warned that a full day of community service will be forthcoming if they are unable to comply with treatment requirements.

Rewards

A client is succeeding in the Program when he or she is making an effort toward—or is free from—drugs, according to urinalysis tests and good attendance at the treatment provider. Clients can be rewarded in several ways. A "quick list" of individuals who are doing well or making a commendable effort is compiled by the treatment liaison. Clients on the quick list are called first on the docket. Being called first can mean the difference between sitting in court for 10 minutes and sitting in court for 4 hours. Another reward is the 6-week set-over. Participants performing well earn the right to appear in court every 6 weeks instead of every 4.

Program Fees

A $400 fee is required to be paid before a dismissal disorder will be signed by the judge. Clients can graduate if they have paid at least half. Participants failing to pay the $400 fee in a month of entering treatment are charged an additional $50 in interest. No pre-determined monthly installment is expected; however, the judge makes monthly inquiries about each client's fees. Once entering the Program a client is bound to pay the fee regardless of his or her outcome. A client who is terminated from the Program is still responsible for the fees. The judge has discretionary power on imposing an individual's Program fees and may waive all or a partial amount. Participants receiving Social Security Income and those facing economic hardships may have their fees waived.

STOP Program Treatment Options

InAct, the only contracted treatment provider for the STOP Program, provides case management for all participants, including those who receive treatment elsewhere. Clients may receive treatment elsewhere if they require residential services, methadone treatment for heroin abuse, or live outside Multnomah County and prefer to attend counseling sessions in their community. For most clients, treatment involves attending counseling sessions, submitting to drug testing, and acupuncture treatments at InAct. Successful clients complete three phases of treatment.

Drug Court Treatment Phases

The STOP Program has three phases that vary in length by client need. For example, a client can move rapidly through Phases I and II and spend the majority of his or her time in Phase III.

One of the requirements for graduation is that clients must have spent 365 days in the Program. A client has what is called a "STOP clock." The STOP clock is the amount of treatment days a client has in the program. If a client absconds and is placed in bench warrant status by the judge, their STOP clock is stopped. For example, if a client is in bench warrant status for 45 days his or her time in the program is extended by 45 days to make up those days in treatment. Days away in bench warrant status are not counted toward treatment time. When a client returns to the Program from bench warrant status, his or her STOP clock starts again.

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During Phase I, a client is expected to attend three group counseling sessions and three acupuncture treatments per week. The client will also have at least one monthly meeting with his or her personal counselor and a minimum of one court appearance per month.

Phase II program requirements are often adjusted based on client needs. Clients in Phase II typically attend two group counseling sessions per week. Clients may stop attending acupuncture treatment if their counselor determines it is no longer necessary. During this phase, the client may also be put on “one-on-one” status. One-on-one status is weekly individual sessions with their counselor. In Phase II, the client will have at least one court appearance every 6 weeks.

Phase III includes one group counseling session per week and one individual counseling session per month. The judge and InAct staff work together to determine the number and frequency of court appearances. Clients complying with Program requirements may be given a 6-week set-over or monthly set-over. Participants performing poorly may be ordered to appear in court weekly or bimonthly. People who are in danger of relapse, harming themselves or who are waiting for space availability at a detoxification program or inpatient treatment may be given daily court appearances. The judge and court team are able to provide structure and incentives to stay clean until assistance in the form of inpatient treatment or detoxification is available.

Urinalysis

InAct performs the STOP Program urinalysis drug testing. All clients are randomly tested at least once a week. Clients are assigned a number upon entry into the Program and are responsible for calling the “UA line” (a phone number) each day to see if their number has been chosen. Numbers may be called more than once a week. A client having trouble staying clean or suspected of dishonesty may be randomly tested up to three times a week. Clients treating at the methadone clinic or in a residential center are also required to have weekly random urinalysis testing at their treatment center. Clients in jeopardy of missing a drug test may also have an off-site certified lab perform a urinalysis if they are unable to get to InAct. The results must be sent to InAct for verification.

Aftercare

Aftercare is not a requirement for the STOP Program. One year of Aftercare is available to all participants who have graduated. Aftercare programs are designed based on client needs. After graduation, clients are eligible to attend as many group counseling sessions as desired, may meet with their individual counselor, attend educational classes provided at InAct, and remain eligible for mental and physical health services provided by InAct. Although strongly encouraged, participants are not required to participate in aftercare activities. In recent years, the 1-year limitation has been lifted.

Client Outcomes

The goal of the Program is to keep clients engaged until they have completed the graduation requirements. The Program seeks to graduate as many clients as possible. Clients are introduced to a drug-free existence. Ideally at graduation, clients have jobs or career prospects, have started or are into looking into GED classes or college coursework, have adequate housing and are working on family issues. Termination from the Program is a last resort. The Program philosophy is to support clients and give them as many opportunities to succeed as possible, as it may be the last chance for some to get off drugs. Even if clients are using substances while participating in the Program, the STOP Program will continue to work with them if they are attending treatment and court sessions. Often the judge will say, “You’re a drug addict, we know you might use, but you

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must at least fill the chairs." Participants are far more inclined than the Program to give up. Self-terminations are far more common than Program-staff-initiated terminations.

Self-Termination

Self-termination can happen at any time during the Program. Clients choose to end their participation in the Program for many reasons. Anecdotally, the most frequent reasons include: choosing not to go to jail to wait for a space at a residential treatment center, time commitment issues, or the client is just not interested in the Program anymore. Historically (and during the time of our sample), a client who terminated received a stipulated facts trial, was usually convicted of the charges, and was sentenced to 30 days in jail and 18 months on probation. As of June 2001, STOP clients plead guilty to their charges when they choose to participate in the Program and are sentenced at their termination to 10 days in jail and 18 months on probation and are also sent to the alternative drug court (Clean Court).

Termination

The District Attorney and the treatment provider recommend terminations to the judge, who ultimately has the final decision. Clients charged with a violent crime during the Program are automatically terminated. Terminations occur for a number of reasons. Clients who repeatedly abscond from the Program may be terminated. Clients who tamper with their urine samples for drug tests may be terminated. Clients who constantly use drugs may be terminated. Clients who are unable to engage in treatment for extended periods of time may face termination. Termination is used as a last resort in the STOP Program. Participants are given many chances before they are terminated. Clients are warned in advance of a possible termination and given alternatives before it actually happens. Terminations rarely happen if a client is engaged in treatment. After the judge has exhausted all other sanctions, he or she will order a 90-day "up or out." An "up or out" is the participant's last chance. The client has 90 days to graduate the program or face termination. This gives the client one last opportunity to comply with Program.

Graduation

The Program requires 365 days in treatment to graduate. In addition, clients need six consecutive clean urinalysis tests and a recommendation from their individual counselor to complete the Program. Graduates complete an exit interview two days before the formal graduation. The exit interview is private discussion between client, judge, public defender, and the District Attorney. Clients are asked to share thoughts and feelings on the Program, make suggestions for program improvement and highlight the most helpful aspects of the Program, especially what helped them avoid drugs. Graduation is held at the Drug Court during a regular court session. Graduations begin the proceedings for that day and last for about an hour. Graduation is used to inspire other Program participants. At graduation, clients receive a certificate of Program completion, gift certificate for a local restaurant, and their booking photo from their original arrest. The treatment provider, judge, District Attorney, and public defender give speeches to the graduates. The judge then allows each graduate to speak. Friends and family members of the graduates and InAct staff are also given an opportunity to speak. The District Attorney then requests all charges be dropped against the defendants, and the judge finalizes the order.

The STOP Program Drug Court Team

The drug court team acts a cohesive unit to help each client complete the Program. Unlike standard court proceedings, there are no adversarial relationships between team members. The public defender and District Attorney have the same goal in this courtroom—to help each client stop

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using substances and remove the pending felony from his or her record. Each team member's role is vital to the success of the participants. The team members include the judge, treatment coordinator, the public defender, the public defender's legal assistant, and the District Attorney. The team meets daily.

Drug Court Team Meetings

The drug court team meets informally everyday to share information on participants. The treatment coordinator informs the team of clients who are at risk of failing to comply with treatment, clients who are doing poorly, or clients who are having a relapse. They also discuss any special circumstances arising for a client. These informal meetings provide a forum to discuss at-risk participants before the court proceedings begin. This ensures that everyone is on the same page before the court session begins. The drug court team also has monthly formal operations meetings to determine new policies and resolve questions and concerns of the team members.

Judge

The judge plays a unique and very important role in the STOP Program. The judge is the only team member who can impose sanctions, terminate a client from the Program, or order a client to attend either a detoxification program or residential treatment. The judge uses judicial discretionary power where necessary. The treatment coordinator and District Attorney can only recommend sanctions for the judge to consider. Clients look to the judge for guidance as they struggle with their recovery and for praise when deserved. The judge's compliments or criticisms are quite significant to some participants. The participants are held accountable for their actions by the judge.

Most judges for the STOP Program have an understanding of substance abuse issues and strive to be compassionate to the clients as they work on their recovery. Participants have serious issues in their lives and their addictions must be taken into account. The judge uses his own attitudes to assist clients in complying with Program requirements. He knows there is a time for harshness and a time for understanding. The judge understands this is not a one-chance program. Each client is given time and patience to turn his or her addiction around.

Treatment Coordinator/Court Liaison

The main function of the treatment coordinator is to provide a link between the treatment counselors and the court. The treatment coordinator discusses each client on the docket with each personal counselor before attending the team meeting. The treatment coordinator speaks in court for each client's personal counselor. This connection provides a direct account of the client's progress. The treatment coordinator makes recommendations on sanctions and rewards to the judge. The treatment coordinator in the STOP Program is also a certified substance abuse treatment counselor and is able to offer participants guidance in their recovery.

The current treatment coordinator has a great understanding of the drug court and treatment. He has persuaded participants from terminating the STOP Program on numerous occasions. His role in court as acting counselor is invaluable. Participants turn to him for guidance in the court on a wide range of issues. The treatment coordinator always has an open ear for his participants.

Public Defender

The public defender's role in drug court is different than regular court. While mindful of clients' interests, the public defender understands that a client's best interest may be jail time. Sanctions and the judge's ability to determine when to use them are part of the Program's curriculum. The

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public defender rarely objects to sanctions imposed by the judge. Working as part of the team, the public defender understands that sometimes protecting participants from sanctions would undermine the court's intentions. There is one occurrence that the public defender will defend his participants vehemently, and this is termination. The public defender will do his best and make his best argument to stop his participants from being terminated from the Program. A client faced with termination will have the public defender doing everything in his power to stop his client from being terminated. The public defender also makes recommendations to the court about participants. The public defender may recommend certain sanctions that he believes would be beneficial to his client's efforts to stay clean.

Public Defender's Legal Assistant

The legal assistant for the public defender plays a vital role between the client and the STOP Program. She introduces the Program to the participants and instructs clients in how to work within the criminal justice system as they complete the Program. She offers information on how to rescind a bench warrant, schedule their community service hours and add their name to the docket for court appearances if needed beyond their scheduled drug court date. She is responsible for the daily monitoring of participants and their current situations and reporting this information to the court. If a client is unable to attend a court appearance, the legal assistant is the client's contact person. The legal assistant for the STOP Program organizes, maintains, and updates participants' files. The participants rely on the assistant as they navigate the Program.

District Attorney

The District Attorney represents the interest of the State during STOP Court proceedings. S/he makes recommendations to the judge on sanctions and terminations. The District Attorney is focused on the success of all participants but is also ensuring the integrity of the Program and will sometimes suggest termination as a reminder to the client to take their participation seriously. The recommendation is often a bluff to remind the client of the potential felony conviction if they fail to comply with Program requirements.

Program Challenges and Successes

The current average graduation rate of 47% is probably the greatest reward for the STOP Program team. This drug court was the second drug court to be developed and has been replicated nationwide. Drug court teams from across the country come to observe the Multnomah County Drug Court's STOP Program for educational purposes and to ask for guidance on how to run a successful drug court program. The largest challenge faced by the team is administering the program without enough or consistent funding.

Other successes include:

- Good collaboration among team members
- Frequent and highly structured court and treatment session
- A system of graduated sanctions
- A holistic view of treatment
- Listening to participants and taking a genuine interest in them as people
- Helping participants with tangible successes such as obtaining a GED

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- Having dedicated team members who devote their time and energies to a program that they really believe in

Challenges include:

- The availability of consistent funding
- The Program is often at or near capacity (More funding is needed to treat all eligible participants. InAct is working with the most clients in its history with the smallest amount of staff.)
- Inpatient services are needed and InAct would like to be able to provide these services, but lacks the funding to do so
- The large numbers of clients needing treatment
- How to handle participants in bench warrant status for long periods of time
- Educating judges about substance abuse treatment

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Description of Non-Drug Court Processing

One element of the NIJ-funded cost study is to compare drug court clients with those who were eligible for the STOP Program but did not participate. These individuals go through traditional court processing. In Multnomah County, this processing includes having their case heard by a Grand Jury, and hearings at a variety of court appearances that could include Assignment Call, Drug Call, Motion to Suppress Hearings, Pre-Plea Hearings, Plea Hearings, and Trials; Defendants are expected to attend most hearings. If they fail to appear, a warrant will be issued for their arrest.

Warrants

Most appearances require a defendant's presence in the courtroom. If a defendant fails to appear in the courtroom, a bench warrant will be issued for his or her arrest by the judge. Indictment warrants are issued for defendants whose charges have been dismissed pending further evidence but are then indicted based on the presence of additional substantiation. If the defendant is stopped by law enforcement for any reason and has a warrant, he or she will be taken into custody and held at Multnomah County Detention Center until the warrant is processed. Defendants remain in custody until a hearing can be scheduled and takes place (usually the next business day). The hearing serves to assign a new court date returning the case to active status and addresses release.

"Set-Overs"

Set-overs are requests made of the judge to schedule a court appearance for a date in the future. Defense attorneys and the State are both allowed a fixed number of set-overs. For example, the defense may request a set-over if more time is needed to interview witnesses or to further investigate the charges. The State may request a set-over if a police officer scheduled to be questioned as a witness is not available or if a key witness cannot be located. The judge allows the first few set-overs without much explanation, but will request an explanation after recurring instances of requests for set-overs, and may deny the request.

First STOP Court Appearance

If clients decide to commit to the 2-week trial period in the STOP Program, their case is set over at this first appearance. The 2-week period is intended for clients to see if the STOP Program is appropriate for them. Clients who decide to decline the STOP Program are assigned a new attorney and their case is added to the Assignment Call Docket for a future court date.

Grand Jury

Defendants who have declined the STOP Program have their cases heard by the Grand Jury. At a Grand Jury proceeding, the State calls witnesses and presents evidence to convince jurors of sufficient evidence against a defendant to bring formal charges against them. Neither the defendant nor his or her lawyer is present at these proceedings. The Grand Jury decides whether the District Attorney can proceed with the case. Three dispositions are possible: "true-bill," "no complaint," or "cannot proceed." A defendant's case will be "true billed" if the defendant is indicted and the DA can proceed with charging the defendant. "No complaint" denotes that the case is dismissed, and the defendant will not be charged. The case will receive a "cannot proceed" disposition when an indictment is not being pursued at that time, but the case is left open and the State may charge the defendant for up to 3 years. Grand Jury results are reported before the start of Arraignments

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the following day in court. The District Attorney reads the Grand Jury Report. If a case has been dismissed (3 years) the defendant is free to go; if a case has been indicted, the defendant is required to schedule another arraignment date with his or her attorney. At this arraignment an Assignment Call date is set.

Assignment Call

When defendants are indicted by the Grand Jury, their cases are set out for Assignment Call. Defendants are required to attend this appearance. Assignment Call is essentially a status check; the State and the defense attorney inform the judge of the status of the case and either ask for a set-over or to be scheduled for Drug Call. In most cases, Drug Call is scheduled for a date four to six after Assignment Call.

Drug Call

Drug Call is also a status check hearing. Defendant attendance is required. At Drug Call, the defense attorney and the State report their readiness for the case to proceed or make requests for set-overs. Drug Call is an opportunity for the defense attorney and the State to announce their intentions for the case. A case may be resolved with a plea made by the defendant or scheduled for a trial. If the case is determined to be ready for a plea, the judge will then send the case to another judge's courtroom for the plea to take place that same day. If a case is ready for trial, the judge will send the case to another judge's courtroom for a trial to start within a few days. A case at Drug Call can also be set for a Motion to Suppress proceeding.

Motion to Suppress Hearings

A Motion to Suppress proceeding is requested by the defense attorney in an effort to suppress evidence being presented by the State. If the defense proves to the judge that the evidence should be suppressed, the state will often dismiss the case. Most Motion to Suppress proceedings involve the defense attorney attempting to prove that narcotics found on his or her client were obtained through an illegal search and seizure. During a Motion to Suppress Hearing, police officers will often testify on how they obtained evidence. The State and defense are provided time to present their cases, call witnesses, and cross-examine each other's witnesses. There is no jury present at a Motion to Suppress Hearing. The judge examines the testimony given and decides on the legality of the obtaining of evidence. If the judge rules in favor of the State and the motion is denied, the case will be sent back to Drug Call to be scheduled for a Trial or Plea Hearing. If the judge rules in favor of the defense, the evidence will be excluded from the case. The State has two choices: to return to Drug Call to have the case heard without the evidence or to dismiss the case. Typically, the State dismisses the case.

Plea Hearings

At the request of the defense attorney, a Plea Hearing can be scheduled at Assignment Call, Drug Call, or before a Trial. At a Plea Hearing, defendants enter a plea of "guilty" or "no contest" to the charges brought against them by the State. Before hearing the plea, the judge will explain a defendant's right to a jury trial and that he or she is waiving that right by choosing to plead to the charges. The judge reads the charges and asks the defendant for a plea. After the plea has been entered, the judge determines the sentence. Usually the State recommends sentencing based on the agreement made previously between the defense attorney and the District Attorney's Office. Judges typically follow the State's recommendations, but may choose not to.

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Trial

For cases where the defendant has entered a plea of “not guilty” or has lost a Motion to Suppress Hearing, the judge will schedule a Trial date at Drug Call. The Trial consists of the State and defense attorneys’ presenting their cases before a jury. After hearing the case, the jury decides on a verdict of guilt or innocence. The judge, in accordance with the law, sentences a defendant that is found guilty. Defendants found guilty will usually receive sentences that include both jail and probation time. Defendants who are acquitted (found innocent) have their cases dismissed.

Sentencing

In the recent past, defendants were generally sentenced to 30 days in jail, a drug-free zone exclusion, and 18 months of probation. Jail time is assigned with a “turn self in” date or the defendant is taken into custody at the Hearing. Conditions of probation can include: a drug evaluation, successful completion of treatment, random drug testing, obey all laws, submit person/residence/vehicle/property to search by probation officer, maintain full-time employment or school, community service work, driver’s license suspension and no firearms. Due to current budget cuts (February 2003), the DA’s Office cannot prosecute simple drug possession charges at this time; therefore, no adjudication or sentencing is occurring in these cases.

Probation

Probation sentences for PCS charges are usually 18 months long. Multnomah County Community Justice provides probation supervision. Supervision by a probation officer includes monitoring defendants in the community and ensuring defendants follow through with the conditions of probations set forth by the judge at the time of sentencing. Supervision by probation includes recommendations for treatment based on an alcohol and drug assessment that takes place when a defendant begins probation. Treatment may include attendance at 12-step programs, inpatient treatment, and random drug testing. If the defendant fails to follow the conditions of probation, the probation officer has the authority to file a Violation of Probation with the court, which usually results in a hearing, and the defendant could be taken into custody.

Probation Violation Hearing

Defendants who violate probation will be ordered to attend a Probation Violation Hearing. A lawyer will represent defendants at the hearing. A representative from the probation department recommends a sanction. The decision made by the judge may be to continue the defendant’s probation with or without a sanction (for example, community service or treatment) or to revoke probation, which may earn a defendant up to 6 months in jail.

Successful Completion of Probation

Defendants who comply with the terms of probation for 18 months have their probation terminated. They have no further obligations to their probation officer or the courts. A record of this charge, indictment, verdict, and time served will remain on the person’s criminal record.

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APPENDIX B: ADULT DRUG COURT TYPOLOGY INTERVIEW GUIDE

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Adult Drug Court Typology Interview Guide[23]

Time period of sample _____

Respondent Information (*please check accuracy and spelling*)

1. Interview Date: _____
2. Drug Court Site: _____
3. Respondent's Name: _____ NPC ID #_____
4. Respondent's Title: _____
5. Respondent's Organization: _____

(Get the precise designation- including categories such as: division, bureau, unit, etc.)

6. Respondent's email: _____
7. Respondent's direct telephone number _____

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CONTACT LOG

DATE	RESULT

Background

8. When was this drug court implemented? **(T1)**

9. When did you become involved in the drug court program? **(T22-T30, Contacts Database)**

10. Were you involved with the implementation of this drug court? If so, would you please describe the implementation process? *Who was involved?* (**T1)**

<u>Role</u> *(***Activities and Time Spent***)*

One of the main purposes of this study is to determine more accurate costs for Drug Court-related activities. To determine these costs we need to learn about any activities you pursue for the Drug Court program and your estimate of how much time you spend performing those activities.

1. What is your role (or what do you do) in this Drug Court program (or at your agency)? *(Probe: briefly describe your activities, e.g., attending sessions, team meetings, writing progress reports, case management, counseling, phone calls, prep time, coordinating services, supervising employees, etc.).* **(T22-T30, Cost Table, Contacts Database)**

2. *(For Public Defender and State's/District Attorney*) How is your role in drug court different from your role in non-drug court processes? Do you feel that the traditional mission as the (defense/prosecutor) has been upheld in your role in the drug court? (Traditional role for DA: getting restitution and justice fulfilled for victims) (Traditional role

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for PD: protecting the rights of defendants and seeing that they get due process in the system)**(T27, T28)**

3. What services does your agency provide to Drug Court clients and/or to the general public? **(T11, T20-T30)**

4. How many hours in an average week do you spend on Drug Court activities? How many hours per week is spent on other NON-Drug Court activities? *(Probe: About how much of your FTE is spent on drug court?)* (*The hours should total up to 40 hours for the average week, unless the person works part-time* **(T22-T30, Cost Table)**

5. If you had to divide up the time you spend on Drug Court activities into the following categories, how many hours in an average week do you think you would put into each category? *(Your best estimates are fine.)*

   -DRUG COURT *(attending court sessions, attending team meetings & planning meetings, preparing for court, and doing progress reports on participants)*

   -CASE MANAGEMENT *(meeting with clients and making referrals, phone calls, answering questions, determining appropriate treatment, home visits, monitoring progress, contacting treatment providers, screenings and evaluations, assessments)*

   -TREATMENT SESSIONS *(preparing for and conducting individual or group treatment sessions)*

   -DRUG TESTS *(administering UAs and other drug tests)*

   -COORDINATION AND/OR SUPERVISION *(writing grants, data management, doing reports for the state, supervising employees, program development, doing the budget, billings and invoices, coordinating the courts, trainings)*

6. Who else does drug court activities in your organization? What do they do? Can you estimate how much time they spend on it? *(Some of these people will be interviewed separately to determine their time spent. Would you recommend I speak to them directly about their drug court activities, or can you tell me about what they do?)* **(T22-T30, Cost Table)**

7. What kind of training have you received related to drug courts? Have you attended classes, workshops, or conferences? If yes, how often have/do you attend(ed)? **(T31)**

Drug Court Goals

8. What are the main goals of your drug court? **(T15)**

9. What do you think would be good measures for whether you have reached the goals? **(T15)**

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Eligibility

(If you have created a flow chart refer to Pre-Drug Court Flow Chart) Will you please take me through the details from when someone is arrested up to the time they enter the drug court? (Below questions might be answered) *Probe: Can you describe the step-by-step process for determining eligibility?*

10. Is the program pre-plea or post-plea *(Note: post-plea includes post-conviction. Also include any further explanation from respondent)* When in the adjudication process does this decision/referral occur? **(T3)**

11. Describe the case referral process. *(How are eligible participants identified?)* Who does the initial screening? *(DA, PD, Probation Pre-trail services?)* **(T6)**

12. What assessments are performed in determining eligibility? Is there a clinical substance abuse assessment conducted before entry? What screening instrument is used? Is there a mental health assessment conducted in the process of determining eligibility? Is mental health treatment a component of drug court or are mental health cases excluded *(What is the assessment tool called? Is it a risk/needs assessment? What are the criteria? What is the cut-off score? Who completes this assessment? How, if at all, is participant eligibility affected by the results?)* **(Ask for copies) (T6)**

13. Can you describe the eligibility criteria? *(Only nonviolent offense? Limit on number or prior convictions?).* **(T6)**

14. Which charges are targeted for entry? *(Misdemeanors, felonies, or both? Possession, trafficking, under the influence, property offenses, etc.? Are non-drug offenses allowed in drug court? Violent charges?)* **(T6)**

15. What are the criteria that would exclude someone from drug court? *(e.g., types of offenses, mental health issues)* **(T6)**

16. Who is responsible for final determination about program entry? *(DA, PD, Judge?)* **(T6)**

17. Do you think that everyone who is eligible (based on their criminal history or other criteria) is always referred to drug court? What are the circumstances under which you would not refer someone who is technically eligible? **(T6)**

18. Are there ever exceptions to the eligibility restrictions? *(Are some people allowed in that don't exactly fit the requirements or that have one or more disqualifying factors*?) How are those clinical/professional judgments made/handled? **(T6)**

19. How is drug court offered to each potential participant? *(Is there an official letter from the District Attorney, are the offenders just asked in open court, etc.)* Are participants asked if they are willing to enter drug court? How often do people refuse and what reasons do people give for refusing? What is the alternative to drug court? What are the incentives to decide in favor of drug court? **(T6,T7)**

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20. Has the eligibility determination process changed *(since implementation)*? If yes, what was it at the time of our sample? **(T6)**

21. What is the length of time between arrest (or incident that triggers referral) and referral to drug court? **(T4)**

22. What is the length of time between referral to drug court and entry into the drug court program? **(T4)**

Drug Court Participants

23. Can you describe your drug court participants? *(What are the most commonly used drugs by your drug court participants? Are your participants experimental or beyond experimental, or a mix?)* **(T5)**

Drug Court Program Capacity and Enrollment

(If the Coordinator does not know these numbers off hand ask for copies of recent reports or statistics that could be mailed to you that would give us this information.)

24. What is the annual program capacity? *(How many are in the program at one time? How long do people stay in the program, on average? How many new participants each year?)* **(T2)**

25. What is the total number enrolled (ever) to date? As of what date? **(T2)**

26. What is the number of graduates to date? As of what date? **(T2)**

27. What is the number of active participants? How do you define active? *(If the definition includes youth not participating, probe number not actively participating.)* **(T2)**

28. What is the number of unsuccessful terminations to date? As of what date? **(T2)**

29. What is the primary drug of choice for drug court participants? *(Percentages of: Marijuana, Crack or Cocaine, Heroin, Methamphetamines, Poly Drug, Alcohol, Other)* **(T5)**
30. Do you have any statistics or reports on your participants? If so, can we have copies? **(T2)**

Drug Court Judge

31. How is the judge (*how were you*) assigned to drug court? *(Voluntary? Rotating assignment?)* Is the length of time presiding over the drug court limited? What is the limit? If rotating assignment, how does the rotation work? **(T23)**

32. Is there only one drug court judge? If only one judge, does he/she (*do you*) hear other cases in addition to drug court? If there is more than one judge, how many are there and what are their roles and responsibilities? **(T23)**

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33. What are the judge's other roles and responsibilities? **(T23)**

34. Have there been other drug court judges before *("you" or "the current judge")*? If so, who was the drug court judge *(at the time of our sample*)? **(T23)**

35. Does the judge spend time on drug court activities beyond the time officially allocated for it? If yes, how much time and for what activities? **(T22)**

36. How does the judge interact with participants in court? **(T22)**

Drug Court Coordinator/Judge

37. How is your Drug Court funded now and in the past? Have you ever written a grant proposal for drug court funding? **(T24)**

38. Have you had to fill out paperwork or surveys on statistics or costs for your drug court? **(T43)**

39. What kind of information have you needed for grant proposals/paperwork/surveys? **(T40)**

40. Do you have an evaluation and monitoring aspect to the drug court program *(Have you had process or outcome evaluations performed on your drug court?)* If so, what type of information was collected, summarized, and/or analyzed? **(Ask for a copy) (T40)**

41. What kind of cost information would be useful for you to have? **(T43, Cost Table)**

Drug Court Team

(Note: Most of these questions will be asked either in the initial phone calls or directly to the person who belongs to each role)

42. Is there a drug court coordinator for this drug court? If not, who is responsible for operations? How many drug courts is the coordinator responsible for? By what agency is the coordinator employed? Who supervises the coordinator? **(T24)**

43. Is there a drug court team? Who is part of it? *(Prompt: Are there others who you feel are key to the drug court process who are not on the team?)* **(T18)**

44. Does the team meet outside of drug court hearings? *(Prompt: How often and for what purpose? Who attends regularly and who attends as needed? Do they talk mainly about policy issues or participant progress?)* **(T19, Cost Table)**

45. How much do you interact with staff from the other agencies involved in drug court? *(Prompt: What activities do you do together? Team meetings? Do you communicate outside of team meetings?)* **(T19-T20)**

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46. Who attends drug court sessions? *(Prompt: Please include everybody in the courtroom, and whether they attend regularly or as needed. Specify their agency and position)* **(T21, Cost Table)**

47. When are drug court sessions held and how long are they? How many clients typically attend one session? About how much time do you think is spent per participant in a typical drug court session? **(T21, Cost Table)**

48. Are the bailiff/court security positions paid for by the court or by the Sheriff's Department? **[21, Cost Table]**

49. How are Drug Court policy decisions generally made *(e.g. by the team, judge)*? **(T19)**

50. How are decisions about responses to participants' behaviors made *(e.g. by the team, judge)*? **(T20, T34/T35 if applicable)**

51. What is the role of the judge? *(Duties both outside & during drug court sessions?)* **(T22)**

52. What is the role of the coordinator? *(Duties both outside & during drug court sessions?)* **(T24)**

53. What is the role of law enforcement? *(Duties, level of involvement?)* Which agencies are involved? *(sheriff, state policy, city police, school-based*) What meetings do they attend? Do they attend staffings? What do they do differently with drug court vs. non-drug court cases? Do they do home visits? If so, how often and how long do they take? Are home visits required as part of the program? **(T29)**

54. Are home visits done for all drug court participants? Who does them? What percentage of participants get home visits? How many home visits does the average drug court participant receive during his or her time in drug court? **(T11, T22-T30, Cost Table)**

55. What is the role of the Probation Department? *(Duties, level of involvement?)* What do they do differently with drug court vs. non-drug court cases? Do they do home visits? If so, how often, how long do they take, and who is involved? **(T26)**

56. Do you have active warrants *(in which law enforcement goes out to pick someone up)* or do you have open bench warrants *(in which a participant is picked up when stopped for something else)*? How/where are they recorded? How often does that occur? How much time is spent per warrant? **(T29, Cost Table)**

57. What is the role of the Public Defender or other defense counsel? *(Level of involvement, etc. Do they attend staffings? Court sessions?)* What proportion of cases are served by public defenders? **(T27)**

58. What is the role of the State's/District Attorney? *(Level of involvement, etc. Do they attend staffings? Court sessions?)* **(T28)**

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59. *(For Public Defender and State's/District Attorney*) How do the Public Defender and State's (District's) Attorney interact inside and outside of court sessions? *(Are their roles in drug court different than what they would be in a regular court case?)* If there is a co-operative relationship between the Public Defender and the District's Attorney do you feel like you are still able to up hold the traditional role of PD and DA? **(T20)**

60. Who provides primary case management and coordination of treatment and rehabilitation services? *(Probation, treatment services, drug court staff?)* **(T25)**

61. Does the drug court team receive any training or continuing education regarding drug court? (Which team members?) (How often?)**(T31)**

62. How well do you feel the agencies involved in DC work together? (*Give examples. Do the agencies integrate any services? Have partnerships developed between key agencies and with local community organizations? Is there cooperation and communication among team members?)* **(T12,T20)**

63. What kind of relationships or connections do you have with community agencies in relation to drug court? **(T12)**

Drug Court Process/Phases

64. Does your program have phases? If so, how many and how long do they last? **(T16)**

65. What are the requirements for each phase? *(Include number of number of court appearances, UA's, group and individual sessions, and the number of hours in each group and individual session)* **(T16)**

66. Are there any specific requirements or criteria to move from one phase to the next phase? **(T17)**

67. Are requirements written? (Do you have a copy you can give to us?) If so, are the written requirements shared with participants?

68. Have the phases or the process changed *(since implementation)*? **(T16, T17)**

69. What kinds of services, besides drug and alcohol treatment, are offered to drug court participants? **(T11)**

Treatment

70. Does your agency provide treatment directly to drug court clients*? (as compared to referrals, administrative oversight, etc.)* Are the treatment providers directly contracted with the court? **(T8, T9, T11, Cost Table)**

71. How many treatment providers are involved with drug court? Do you have the names and contact information for these providers? **(T8, Cost Table, Contacts Database)**

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72. Is there a central intake to treatment? **(T8)**

73. *(If more than one treatment provider)* How is it decided which clients go to which treatment provider? **(T8)**

74. What assessments are performed on drug court clients? *(Please describe these tools. What are they called? Can we get a copy of the tool? Who completes this assessment? Who reviews it? How, if at all, is the treatment plan affected by the results?)* **(T8)**

75. What specific treatment services does each one offer? *(Individual and group counseling, residential treatment, case management, acupuncture, mental health services)* How long does each session typically last and how many participants attend each session? **(T11, Cost Table)**

76. What other services are offered? (*Parenting classes, GED, anger management, life skills training, job training, physical health services, AIDS education , cognitive restructuring etc.)* **(T11, T12, Cost Table)**

77. How many counselors at each provider are directly involved with drug court participants? **(T8)**

78. Who else at the treatment agencies are directly involved in drug court? **(T8)**

79. How many drug court clients does the treatment provider *(do the treatment providers)* serve? Who is required to report to court staff on treatment progress/compliance? Who performs case management for Drug Court clients? **(T14, Cost Table)**

80. What type of information does the treatment provider share with the court and how is it shared? *(Prompts: progress reports, reports of missed treatment sessions, groups attended, UAs)* Is this information useful? Is it shared in advance of drug court session? **(T14)**

81. Are participants encouraged or required to attend other treatment support groups? *(12-step or other self-help programs)* **(T13)**

82. Do the treatment providers serve non-drug court drug offender cases? How often, and how is this coordinated with probation?

83. What is the primary philosophy or treatment model used? *(At each agency. Prompt: strict boot camp, strengths based social work?)* Does it vary? (e.g., by counselor, by client characteristics) **(T10)**

84. Are you (is the treatment agency) involved in drug testing (UAs)? If yes, please describe the testing and process. (Who pays? How is it funded?) **(T33)**

85. Which agency/agencies are responsible for UA's? Who pays? How is it funded? **(T33, Cost Table)**

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86. What funds are used to pay treatment providers for services for Drug Court clients? *(Specific agency, Drug Court funds, private insurance, Medicaid, or other state/county/federal funds)* How much is covered by each funding source? Which agency is the keeper of these funds? *(In which agency's budget are such funds allocated?)* **[Cost Table]**

87. Are the providers paid per client or service, or are they paid with a blanket, fixed-cost contract? **[Cost Table]**

88. Have the treatment providers and/or the services they provide changed since implementation? *(We need to find out which providers were operating at the time of our sample and find out information for them. Who was providing treatment during the time of our sample)?* **(T11)**

Probation

89. Does your agency provide treatment directly to drug court clients*? (as compared to referrals, administrative oversight, etc.)* **(T26)**

Drug Testing

90. What is the urinalysis and other drug testing process? *(Frequency per participant, what types of tests are given, who is responsible, who coordinates them, who administers them, and how are they conducted—observed or not?)* **(T33)**

91. Are drug tests assigned randomly? If not, how are they assigned? **(T33)**

92. Who performs the analysis? *(For UA's and any other tests they use.)* If contracted with a tech. company, what is the billable cost per UA? **(T33, Cost Table)**

93. *(If not contracted out)* How much do you pay for each type of drug test? *(What are the materials involved, how much of each are used per drug test, and what is the cost per unit?)* **(T33, Cost Table)**

94. Do clients pay for the full cost of their drug tests? Do they pay for some of the cost of their drug tests? What percentage would you estimate? **(T39, Cost Table)**

95. Has the drug testing process changed since the drug court was implemented? **(T33)**

Fee Structure

96. Is there a fee required of drug court participants? If yes, how much is the fee? Is it on a sliding scale? If so, what is the scale, and how is the client's eligibility determined? What percentage of participants would you estimate pay the entire fee? **(T39, Cost Table)**

97. Is full payment required for graduation? Is payment reduced if the participant successfully completes the program? **(T36, T39, Cost Table)**

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98. Who collects the fees? Where does the money go? What is the money used for? **(T39, Cost Table)**

99. Has the fee structure changed over time? If yes, when and how? *(Was it the same at the time of our sample?)* **(T39, Cost Table)**

Rewards/Sanctions

100. What is considered good behavior? **(T34)**

101. What kinds of rewards are given for good behavior? (Applause, physical rewards such as key chains or movie tickets, less frequent court appearances) How often do you use rewards? Are rewards given as consistently as sanctions? Do you feel that you use rewards more or less often than sanctions? **(T34)**

102. Does the drug court team work together to determine sanctions and rewards? Does your drug court have any new or creative/different sanctions or rewards? **(T34, T35)**

103. Has the reward/sanction process changed (since implementation)? **(T34, T35)**

104. What behaviors are considered non-compliant? (Failure to appear at court or treatment sessions, positive UAs, subsequent criminal referrals) **(T35)**

105. What kinds of sanctions are imposed as a result? (Bench warrants, writing papers, sit sanctions, community service, residential treatment, more frequent UAs or court appearances, detention, etc.) **(T35)**

106. Are sanctions graduated? How frequently are sanctions given? (Rare or quite common?) What is the process for determining sanctions? **(T35)**

107. How consistently are sanctions imposed for similar non-compliance behaviors? Are all offenders treated alike? If not, what characteristics affect decisions regarding sanctions (e.g., risk level, number of offenses)? How are the sanctions administered? **(T35)**

108. How swiftly/quickly are sanctions imposed after non-compliant behavior? (Immediately? At the next court session?) **(T35)**

109. Who imposes the sanctions? (The Judge only? Probation officer? Treatment provider? Anyone else?) **(T35)**

Failure

110. What would prompt removing an offender from participation in the drug court program? (Note: some drug courts call graduation “successful termination” and failure “unsuccessful termination” Prompts: New arrest for drug possession or trafficking? Arrest for violent offense? Arrest for other non-violent offenses? Nonparticipation or non-compliance with treatment or court orders? Failure to appear? Dirty UAs? Other?) **(T38)**

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111. If a participant is terminated/does not complete drug court, what happens next? (Standard court process, stipulated facts trial, or another part because they have already pled guilty?) **(T38)**

112. Has the termination process changed (since implementation)? If yes, when and how? **(T38)**

Graduation

113. What are the incentives to complete the drug court program? (Charges dismissed, guilty pleas stricken, probation in lieu of incarceration, probation shortened, felony reduced to misdemeanor, other incentives?) (T7)

114. What are the requirements for graduation? (Number of days clean, payment of fines and drug court fees, employment, suitable housing, GED, other requirements) (T36)

115. Please describe the drug court graduation and the graduation activities. **(T36)**

116. How often is a graduation ceremony held? **(T36)**

117. What funds are used to pay for the graduation ceremony? **(T36)**

118. Does graduation from drug court mean an end of probation? **(T36)**

119. In your experience, do you think certain types of program participation have different graduation rates? (For example, first timers versus repeat felons, type of addiction, a particular age group, etc.) **(T36)**

120. Has the graduation process changed over time? If yes, when and how? (What was it like at the time of our sample?) If yes, do you know what factors have affected the graduation rate? **(T36)**

Aftercare

121. Is there an aftercare program for the drug court? Is it mandated? Does aftercare occur before or after graduation? **(T37)**

122. What are the requirements of the aftercare program and what services are offered? **(T37)**

123. What agency administers aftercare? Is it an in-house or contractual activity? If it is a contractual program, how is the contractor compensated? (e.g., per client per period of time, lump sum per period of time, per service consumed, etc.) **(T37, Cost Table)**

124. Who is involved with aftercare activities? What are those activities? How much time do they spend on each of those activities? (Time per client?) **(T37, Cost Table)**

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125. How long does it last? **(T16, T37)**

126. What happens upon completion? (Incentives to complete?) **(T7)**

127. Has the aftercare program changed since the program was implemented? (What was it like at the time of our sample?) **(T37)**

Regular (non drug court) court process

(Ask State's/District Attorney, PD, Judge, Probation):

128. Are you (or your agency) involved with non-drug court activities? **(Regular Process Table)**

129. Do you attend court for non-drug court cases? What kinds of cases? How often? **(Regular Process Table)**

130. What is your role for these kinds of cases? *(What activities are you involved in?)* **(Regular Process Table)**

131. (If you've created a flow chart refer to Business As Usual Flow Chart) In order to understand what happens to the comparison group, please describe the general court process and options for a person who is arrested on a drug court-eligible charge, but not involved in drug court. Please go through the whole process starting with the arrest and ending with the different types of sentencing. In particular, explore the flow and who is involved. (Probe: Are offenders placed on probation? Do they usually complete probation requirements, or can they be released from probation early?) **(Regular Process Table)**

132. Who appears at a typical regular court (non-drug court) hearing? (Name the position of everyone in the courtroom who would appear for an average, typical case, as well as their corresponding agency. Probe: Public Defender, State's/District Attorney, treatment providers, Court Clerks, Court Reporter, Judge, Bailiff, etc.) **(Regular Process Table, Cost Table)**

133. Is treatment ever a condition of the offender's sentence? (e.g., as a condition of probation) How often? What is the probation process in these instances? What is the treatment process in these instances? **(Regular Process Table)**

134. Do you know who or what agency performs the UA testing for non-drug court offenders? What agency handles treatment for cases not involved in drug court? **(Regular Process Table)**

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Other IMPORTANT Questions (Ask these of every interviewee!)

135. What do you feel are some notable or unique characteristics of your drug court? (Character of court, reputation) **(T42, any other relevant section)**

136. What do you think are the most promising practices of this drug court?) **(T42, any other relevant section)**

137. Are there any changes you would like to see happen that you think would improve the program or make it more effective? **(T42, any other relevant section)**

138. Are there any issues (idiosyncratic problems) that you have found at your particular part of the drug court process?) Do you face any challenges while performing your job? **(T42, any other relevant section)**

139. We need to find a group of individuals who would be eligible for drug court, but have not participated. If you were attempting to find this kind of group, how would you go about it?) **(T43)**

Ending the Interview

Is there anything else that you'd like to add about all the questions I've asked you? Is there anything that you think I've missed?

Thank the respondent for their time and ask if they have any questions for you. Ask if they would be willing to be contacted should you have any follow-up or clarifying questions for them. If they agree, ask if they prefer to be called or emailed.