

Outcome Evaluation of the F.I.S.T. Drug Court Program
In the 15th Judicial District of Louisiana

June 27, 2010

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FINAL REPORT

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Introduction and Review of Relevant Literature

During the second half of the twentieth century, two opposing views of drug use and abuse began to coincide. First, the disease concept of drug abuse and addiction became commonplace, as seen in the action of Congress passing the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act in 1970. This led to the designation of monies for federal treatment programs, while simultaneously major health insurers began to include treatment plans for same in their coverage (Lemanski, 2001). As a result, the numbers of treatment facilities increased dramatically. Second, there was a simultaneous increase during this time period in the criminalization of drug use, with harsh penalties attached to drug related crimes (Andrews et al, 1990). The consequence was a growth in the criminal justice system's control over drugs, resulting in a dramatic increase of drug-related incarcerations (Lock et al., 2002).

Recognition of the futility of the effort to use entirely punitive measures, and overcrowding in correctional facilities and court systems has led to a search for viable alternatives. Into this abyss has entered the drug court treatment program. The first such program began in Miami in 1989, and by the year 2000, more than 650 drug courts were in existence across the country (Dechenes et al., 2002). A decade later, there were 2,038 fully operational drug courts in the United States and 226 that were in the planning stages, as of July 2009 (Office of National Drug Control Policy, 2010). The U.S. Department of Justice, in association with the National Association of Drug Court Professionals has defined ten key components for the establishment of drug court programs, though some variation exists from program to program. Specifically, eligibility and suitability requirements vary, as well as what types of treatment are offered. Essentially, drug courts are a compromise between punitive and treatment strategies (Dorf and Fagan, 2003). These programs combine the extensive supervision of punitive models of justice with the treatment model of drug addiction to seek a reduction in criminal recidivism and improve the life chances of participants (Belenko, 1998; Gottfredson et al., 2003). Empirical evidence has supported the view that recidivism is reduced, as well as the corresponding monetary spending on drug cases throughout the justice system (Banks et al., 2003; Gottfredson et al., 2003; Hora et al., 1999; Kalich and Evans, 2006).

The evaluation of the effectiveness of drug court programs has been necessitated by the tremendous proliferation of such programs across the United States. This paper is a follow-up report of one such program, upon the request of the program particularly due to the amount of time that has passed since program inception and also due to the implementation of a particular type of therapy into the program (moral reconnection therapy). At a time when drug court monies may be looked to for utilization in other

budgetary locations, it is especially important to know whether drug court participants fare better than non-participants who qualified for drug court but refused to participate and were instead assigned to either straight probation supervision or to a modified educational probation supervision. In only this way is it possible to really begin to address any possible savings in terms of criminal recidivism and therefore monetary and other costs. The report detailed below also examines the perceptions of drug court graduates toward the drug court program, in order to investigate the meaning and impact of the program on the lives of its participants.

The most rigorous evaluations of drug court programs compare drug offenders who enter the program to those who qualified but chose not to enter the program. Additionally, rigorous studies include those that randomly assign clients to receive drug court services. These have consistently indicated lower recidivism rates for drug court participants and graduates (Deschenes, et al., 1995; Finigan, 1998; Gottfredson et al., 1997; Peters and Murrin 2000, Wolfe et al., 2002). The two primary components of all drug court programs are intensive supervision and drug treatment. The implementation of these two components varies across jurisdictions. Intensive supervision typically combines elements such as small caseloads for probation officers and frequent court appearances and urinalysis testing. Treatment typically fuses several well documented types of drug abuse treatment programs. Very few studies have attempted to differentiate the impact of these two components on drug court participants and even fewer have specifically focused on long-term effectiveness. However, they do suggest the need for further evaluation of drug court outcomes, with particular attention to identification of predictors of those outcomes.

Background of the F.I.S.T. Drug Court Program and Parameters for this Study

The general criminal justice system in the 15th Judicial District is actually one which utilizes two types of drug courts via what is known as Tract 1 and via the F.I.S.T. (Focused Intervention Through Sanctions and Treatment) Drug Court Program. However, of the two, only the F.I.S.T. Drug Court Program is eligible to receive federal monies from the 1994 Crime Act, and it is restricted further by that Act to accept only defendants with drug-related crimes and no history of violent offenses. Tract 1 processes all other drug defendants. Thus, Tract 1 remains the traditional adversarial drug tract, with the F.I.S.T. drug court technically under that tract as a special non-adversarial court to which eligible non-violent felony offenders may be referred (if identified as eligible by the Assistant District Attorney assigned to Drug Court).

The prosecutor is obliged to prosecute only when there is proof of guilt. Consequently, prior to declaring a defendant eligible, he is to check all available information to insure the appropriateness of prosecution. Eligibility also depends upon the lack of exclusionary factors. Exclusionary criteria for entry into the program include: violent criminal history and conviction of four or more felonies. Misdemeanor offenders are usually excluded unless they aggressively seek inclusion.

Upon referral to the Drug Court by the prosecutor, potential participants are then clinically screened for suitability using the Substance Abuse Subtle Screening Inventory 3 (SASSI3), the Substance Abuse Questionnaire, and a personal interview. Clinically, exclusionary criteria for entry into the program include: mental illness that has not received clearance from a doctor indicating participation will not negatively affect the illness (for example, no schizophrenia diagnoses are accepted into the program because the clinical structure of the program has been deemed unacceptable for said diagnosis). Acute health problems are excluded on a case-by-case basis, depending on the level of function present.

If deemed suitable, the offender is referred for a consultation with the public defender or a privately retained defense attorney. After consultation with a defense attorney, if the offender is interested in participating in the drug court program, the defense attorney notifies the F.I.S.T Drug Court prosecutor, who files a Bill of Information. Some offenders choose to participate in drug court as a condition of probation (after admitting to the crime and receiving a suspended sentence), while others choose to remain in Tract 1 and go to trial, or plead guilty and receive a suspended sentence with less intensive conditions of probation. Still others opt to participate in drug court as a condition of bond, while awaiting motion hearings in Tract 1. If found guilty in Tract 1, the probationers must attend drug education classes, monthly meetings with the judge, and comply with periodic random drug screens. One year of sobriety completes the program for these individuals.

However, if the random test is positive for drugs, drug treatment is ordered (drug education has proven insufficient) and graduated sanctions are imposed. At the third positive drug screen, and pending a positive determination of both eligibility and suitability for Drug Court, probationers in Tract 1 (as of August 2002) will be given a coerced choice: participate in drug court or go to jail for one year. This choice will not be offered, however, if the defendant was offered drug court before entering Tract 1 and rejected that treatment option. Such rejection is final, and is justified by the F.I.S.T. Team on the grounds that although addiction to drugs is an illness, the choices individuals make also have consequences. The goal of such a stance is to encourage responsible decision-making; therefore, if an addict chooses against treatment, he/she must endure those consequences. Thus, at this stage in Tract 1, if the choice of entering the F.I.S.T. program has never before been offered, and if the probationer chooses jail rather than treatment, upon the fourth positive drug screen, probation is revoked, and a sentence is imposed.

If, however, the probationer chooses drug court at any point, the sanctions for continued positive drug screens increase according to the F.I.S.T drug court schedule of sanctions. Unless the individual has been rearrested for another felony or violent offense, no definitive point marks the termination of a drug court client's participation. When revocation from drug court does occur, the previously suspended sentence is reinstated, minus any reductions the probationer may have earned for compliance to program requirements up to that point.

Drug court participants who are initially offered and choose drug court must plead guilty to their crime in order to receive a suspended or deferred sentence and participate in the program as a condition of probation, the outcome of their sentence pending the successful completion of the F.I.S.T. Drug Court Program. Individuals deemed eligible and suitable can also try the F.I.S.T. Drug Court Program as a condition of bond, while awaiting the outcome of their case in Tract 1. All drug court participants have 30 days to opt out of the program and to choose adjudication via Tract 1. Incentives to remain are strong, such as dismissal of the prosecution upon satisfactory completion of the drug court program (the equivalent of an acquittal) and expungement of the charge from the participant's record. Defendants in the F.I.S.T. Drug Court Program, then, are voluntary participants, who agree to comply with a number of general and special conditions of their suspended sentence with active supervised probation and treatment.

A third option also exists for drug offenders in the 15th JDC, aside from the assignment to Drug Court or Tract 1. Individuals may be deemed both eligible and suitable but refuse to participate in drug court and receive supervised probation instead. In this case, the individual must report to the probation officer, comply with random urinalyses, and otherwise not violate the conditions of his/her probation. These individuals are on Tract 3 or "straight probation." Successful completion of probation means that probation is not revoked, nor is a sentence imposed.

Statement of Purpose

The primary goal of this evaluation is to explore the effectiveness of the F.I.S.T. Drug Court Program at reducing recidivism rates of participants when compared to non-participants of varying kinds. The universe of offenders who were deemed both eligible and suitable and who were offered the F.I.S.T. Drug Court Option is the population under examination. This examination will determine whether the outcome target has been met (the number and % of participants who achieve the outcome, in this case, lower recidivism rates) for all eligible and suitable individuals, regardless of the tract to which they belong. Tests of significant differences between the tracts will also be determined between the previously described tracts: Tract 1 completers (Prevention Plus), Tract 3 completers (Straight Probation), and Drug Court Completers. In the analyses that follow, the Drug Court population is further divided into two groups, those who completed the Program prior to the introduction of MRT (Moral Reconciliation Therapy), and those who completed the program with the MRT component in place. All analyses are controlled for time in tract and recidivism rates are calculated from time of initial arrest for which Drug Court was offered to 6 months, 6 months to 12 months, and 12 plus months. Finally, Drug Court Alumni are interviewed about their drug court experiences.

Methods

Data were obtained from several sources: F.I.S.T. Program Records, Tract 1 Program Records, the State of Louisiana Office of Probation and Parole, and F.I.S.T. Alumni interviews. Only variables available for all offenders were included in these analyses.

F.I.S.T. Program records have been maintained since program inception in 1998. As such, a list of names and identification information was available for use by the Office of Probation and Parole to locate arrest records for each individual.

For some individuals no records were found by the Office of Probation and Parole, and therefore, these individuals were excluded from the analyses due to missing information. Similarly, some participant names were on some lists and not others, or on multiple lists. In each of these cases, the participants were excluded from the analyses. All coding was double coded and entered by hand into an SPSS database in electronic format. While it is possible that some bias might be present in the resulting dataset, this is not likely, as excluded cases were statistically examined for patterns in demographics or other key variables of interest. None were identified. Descriptive statistics were performed using SPSS to produce percentages, averages, and frequencies. Additionally, tests of significance were performed using the Chi Square statistic.

In addition, qualitative interviews were obtained from 30 F.I.S.T. Alumni who were willing to be interviewed. The interviews were conducted in Spring 2010 via telephone. Not all participants who were contacted were willing to be interviewed (n=5), and not all of the phone numbers were still working and accurate numbers (n=22). However, it is important to note that this information was given voluntarily, and did not take place under the supervision of any Drug Court Personnel.

Findings

Full Sample

In the first component of this evaluation, data for 2827 persons were analyzed (see Table 1). Of these, 35% completed Tract 1, 58% completed Tract 3, and 7% completed Drug Court. The total dataset was primarily male (81%), and was closely distributed between white (54%) and nonwhite (46%). Likewise, this total dataset was overwhelmingly young (age 25 and younger = 52%).

TABLE 1. Full Sample by Tract

	Frequency	Percent
Refused DC/Completed Prevention Plus Tract 1	994	35.2
Completed Drug Court	186	6.6
Refused DC/Completed Straight Probation Tract 3	1647	58.3
TOTAL	2827	100.0

Most of the sample was not re-arrested in the first six months after the initial eligible drug court arrest (79%). However, the re-arrests were nearly 3 times as many for drug arrests as for violent or other crimes (n= 362 v. 143 v. 79). During the 6-12 months after the

initial eligible drug court arrest, again, 79% of the total sample was rearrested. Again, the pattern emerged of nearly 3 times as many drug re-arrests than violent or other crimes (n= 376 v. 138 v. 89). Thus, the pattern emerges that for all persons in the sample, during the first year after the initial eligible drug court arrest, most re-arrests were drug related.

However, these initial data are over-general and need to be examined more closely to identify the makeup of each tract within the drug offending population. Specifically, when examining the total dataset by tract, it becomes clearer that those who choose to complete drug court are slightly older than those completing Tract 1 or Tract 3 (52% are age 26 and older v. 46% and 49%, respectively). In addition, those who choose to complete drug court are much more likely to be white (64%) than those completing Tract 1 (54%) or Tract 3 (53%). Finally, those who choose to complete drug court are much more likely to include females (31%) than what is found in Tract 1 or 3 (15% v. 20%). This pattern of older, more white and more female participants may suggest that drug court is a more appealing choice for such a population to choose to complete, or to complete successfully.

Drug Court Completers V. Prevention Plus/Tract 1 Completers

In any evaluation of outcomes, it is important to evaluate the differences between groups for statistical significance. This component of the evaluation seeks to examine the differences between drug court completers and Tract 1 completers in terms of statistical significance. Recall that participants in drug court are subject to rigorous educational and therapeutic tools, while there is a small educational component in Tract 1. First, the data were analyzed for statistically significant differences in age, and the differences that were found were found not to be significant (chi square < .12). However, this changes when the data are analyzed according to race and gender (see Tables 2 & 3).

TABLE 2. Race by Tract

	Completed Tract 1	Completed Drug Court
White	537 (54%)	119 (64%)
Non-White	457 (46%)	67 (36%)
Total	994 (100%)	186 (100%)

(Chi square < .01)

In Table 2, there is clearly a significant difference between completers in Tract 1 and Drug Court completers in that Drug Court completers are significantly more likely to be white. Likewise, in Table 3, there is a significant difference between completers in Tract

1 and Drug Court completers in that Drug Court completers are significantly more likely to be female.

TABLE 3. Sex by Tract

	Completed Tract 1	Completed Drug Court
Male	848 (85%)	128 (69%)
Female	146 (15%)	58 (31%)
Total	994 (100%)	186 (100%)

(Chi square <.00)

More importantly, when examining the effectiveness of these two programs with regard to recidivism, statistically significant differences are found in re-arrest records. Specifically, when comparing Tract 1 completers to Drug Court completers in Table 4, Tract 1 completers are twice as likely to be re-arrested within the first six months than are Drug Court completers (10.9% v. 5.4%, Chi square <.02).

TABLE 4. Re-Arrests Within First 6 Months

Re-Arrest	Completed Tract 1	Completed Drug Court
No	886 (89.1%)	176 (94.6%)
Yes	108 (10.9%)	10 (5.4%)
Total	994 (100%)	186 (100%)

(Chi square <.02)

This is especially the case with drug crimes, as seen in Table 5, where Tract 1 completers are nearly 5 times more likely to recidivate a drug crime than are Drug Court completers.

TABLE 5. Drug Re-Arrests Within First 6 Months

Drug Re-Arrest	Completed Tract 1	Completed Drug Court
No	922 (92.8%)	183 (98.4%)
Yes	72 (7.2%)	3 (1.6%)
Total	994 (100%)	186 (100%)

(Chi square <.00)

Finally, when looking at long term completers of either Tract 1 or Drug Court, as seen in Table 6, where re-arrests occur at 12 plus months, those participants who complete Drug Court are significantly less likely (30% v. 52%) to be rearrested after 12 months, especially for drug crimes and violent crimes (see Tables 7 & 8) than are those participants who complete Tract 1.

TABLE 6. Re-Arrests at One Year Or More

Re-Arrest	Completed Tract 1	Completed Drug Court
No	478 (48.1%)	130 69.9%
Yes	516 (51.9%)	56 (30.1%)
Total	994 (100%)	186 (100%)

(Chi square <.00)

In Table 7, it is clearly significant that more completers of Tract 1 are re-arrested for drug crimes than are Drug Court completers (37% v. 20%) at this point in time.

TABLE 7. Drug Re-Arrests at One Year or More

Drug Re-Arrest	Completed Tract 1	Completed Drug Court
No	631 (63.5%)	148 (79.6%)
Yes	363 (36.5%)	38 (20.4%)
Total	994 (100%)	186 (100%)

(Chi square <.00)

In Table 8, it is clearly also the case that completers of Tract 1 are significantly more likely to be re-arrested for violent crimes than are Drug Court Completers at this time (25% v. 12%).

TABLE 8. Violent Re-Arrests at One Year or More

Violent Re-Arrest	Completed Tract 1	Completed Drug Court
No	748 (75.3%)	164 (88.2%)
Yes	246 (24.7%)	22 (11.8%)
Total	994 (100%)	186 (100%)

(Chi square <.00)

Drug Court Completers V. Straight Probation/Tract 3 Completers

This component of the evaluation seeks to examine the differences between drug court completers and Tract 3 completers in terms of statistical significance. Recall that participants in drug court are subject to rigorous educational and therapeutic tools, while there is no therapeutic or educational intervention in Tract 3. First, the data were analyzed for statistically significant differences in age, and the differences that were found were found not to be significant (chi square < .45). However, this changes when the data are analyzed according to race and gender (see Tables 9 & 10).

TABLE 9. Race by Tract

	Completed Tract 3	Completed Drug Court
White	868 (53%)	119 (64%)
Non-White	779 (47%)	67 (36%)
Total	1647 (100%)	186 (100%)

(Chi square < .00)

In Table 9, there is clearly a significant difference between completers in Tract 3 and Drug Court completers in that straight probationers are significantly more likely to be non-white. Likewise, in Table 10, there is a significant difference between completers in Tract 3 and Drug Court completers in that Drug Court completers are significantly more likely to be female.

TABLE 10. Sex by Tract

	Completed Tract 3	Completed Drug Court
Male	1322 (80%)	128 (69%)
Female	325 (20%)	58 (31%)
Total	1647 (100%)	186 (100%)

(Chi square <.00)

Furthermore, when examining the effectiveness of these two programs with regard to recidivism, statistically significant differences are found in re-arrest records at all levels. Specifically, when comparing Tract 3 completers to Drug Court completers in Table 11, Tract 3 completers are nearly 6 times more likely to be re-arrested within the first six months than are Drug Court completers (28.3% v. 5.4%, Chi square <.00).

TABLE 11. Re-Arrests Within First 6 Months

Re-Arrest	Completed Tract 3	Completed Drug Court
No	1181 (71.7%)	176 (94.6%)
Yes	466 (28.3%)	10 (5.4%)
Total	1647 (100%)	186 (100%)

(Chi square <.00)

This is especially the case with drug crimes, as seen in Table 12, where Tract 3 completers are nearly 8 times more likely to recidivate a drug crime than are Drug Court completers. Likewise, straight probationers are 3 times more likely to recidivate a violent crime than are Drug Court completers within this time period (see Table 13).

TABLE 12. Drug Re-Arrests Within First 6 Months

Drug Re-Arrest	Completed Tract 3	Completed Drug Court
No	1360 (82.6%)	183 (98.4%)
Yes	287 (17.4%)	3 (1.6%)
Total	1647 (100%)	186 (100%)

(Chi square <.00)

TABLE 13. Violent Re-Arrests Within First 6 Months

Violent Re-Arrest	Completed Tract 3	Completed Drug Court
No	1535 (93.2%)	182 (97.8%)
Yes	112 (6.8%)	4 (2.2%)
Total	1647 (100%)	186 (100%)

(Chi square <.01)

Likewise, straight probation completers are significantly more likely at the 6-12 month time period to recidivate, and especially to recidivate drug and violent crime when compared to completers of Drug Court (see Tables 14, 15, 16).

TABLE 14. Re-Arrests Within 6-12 Months

Re-Arrest	Completed Tract 3	Completed Drug Court
No	1195 (72.6%)	165 (88.7%)
Yes	452 (27.4%)	21 (11.3%)
Total	1647 (100%)	186 (100%)

(Chi square <.00)

TABLE 15. Drug Re-Arrests Within 6-12 Months

Drug Re-Arrest	Completed Tract 3	Completed Drug Court
No	1367 (83%)	174 (93.5%)
Yes	280 (17%)	12 (6.5%)
Total	1647 (100%)	186 (100%)

(Chi square <.00)

TABLE 16. Violent Re-Arrests Within 6-12 Months

Violent Re-Arrest	Completed Tract 3	Completed Drug Court
No	1544 (93.7%)	181 (97.3%)
Yes	103 (6.3%)	5 (2.7%)
Total	1647 (100%)	186 (100%)

(Chi square <.05)

Finally, straight probation completers on Tract 3 are also statistically more likely to re-offend after one year than are drug court completers, and they do so with both drug and violent crimes (see Tables 17,18, & 19).

TABLE 17. Re-Arrests At One Year or More

Re-Arrest	Completed Tract 3	Completed Drug Court
No	583 (35.4%)	130 (69.9%)
Yes	1064 (64.6%)	56 (30.1%)
Total	1647 (100%)	186 (100%)

(Chi square <.00)

TABLE 18. Drug Re-Arrests At One Year or More

Drug Re-Arrest	Completed Tract 3	Completed Drug Court
No	858 (52.1%)	148 (79.6%)
Yes	789 (47.9%)	38 (20.4%)
Total	1647 (100%)	186 (100%)

(Chi square <.00)

TABLE 19. Violent Re-Arrests At One Year or More

Violent Re-Arrest	Completed Tract 3	Completed Drug Court
No	1170 (71.0%)	164 (88.2%)
Yes	477 (29.0%)	22 (11.8%)
Total	1647 (100%)	186 (100%)

(Chi square <.00)

In sum, then, Drug Court completers have a better recidivism rate at all times and for all crimes, especially drug and violent crimes in comparison to both groups of eligible and suitable persons who were offered drug court during the same time period. These other groups, tracts 1 and 3, are interesting comparisons further in that the former offers some prevention education and seems to have a better rate of recidivism than does the latter which offers no prevention education and which has the worst rate of recidivism. Certainly these findings offer strong support for the continued use of drug courts and prevention education to reduce recidivism rates in the communities where they are provided.

Drug Court: Pre v. Post Moral Reconciliation Therapy

As part of this evaluation, analyses were conducted within the Drug Court Completer population by further subdividing the population into those who finished the program before Moral Reconciliation Therapy (MRT) was introduced (n=74) and those who finished the program after MRT was introduced in February 2005 (n=112). MRT is conducted via structured facilitated groups in order to overcome problems encountered in individual therapy for substance abusers, such as over-exploration of a client's past and over-discussion of their feelings at a particular time. MRT is a cognitive-behavioral group method which allows problems such as this to be avoided. Furthermore, the use of MRT as a group treatment is economical and efficiently incorporates more clients with fewer hours by the group counselor. Group sessions have always been a part of Drug Court, but the MRT group is special in that it is goal oriented and present-focused. For these reasons, analyses were conducted to determine if clients receiving MRT have a lower recidivism rate than do clients receiving more traditional drug court therapies. It is important to remember, however, that regardless of the subgroup analyses, Drug Court Completers are significantly lower in recidivism than other drug crime offenders.

For the analyses between pre-MRT and post-MRT completers, the total sample of completers (n=186) was subdivided. Each group was compared for significant differences in age, race, and sex, and no statistically important differences in the two groups were identified. Furthermore, time since completion of the program was statistically controlled (as with the above analyses). Interestingly, there are no significant differences between pre and post MRT completers at time periods less than 12 months (analyses available upon request). However, over the long term, post-MRT completers appear to respond better and to recidivate less frequently than do pre-MRT completers, especially in drug and violent crimes (see Tables 20, 21, & 22). Thus, it seems in the short term there is no MRT advantage but over a longer period of time the advantage is statistically significant.

TABLE 20. Re-Arrests At One Year or More

Re-Arrest	Completed Pre-MRT	Completed Post-MRT
No	38 (51.4%)	92 (82.1%)
Yes	36 (48.6%)	20 (17.9%)
Total	74 (100%)	112 (100%)

(Chi square <.00)

TABLE 21. Drug Re-Arrests At One Year or More

Drug Re-Arrest	Completed Pre-MRT	Completed Post-MRT
No	51 (68.9%)	97 (86.6%)
Yes	23 (31.1%)	15 (13.4%)
Total	74 (100%)	112 (100%)

(Chi square <.00)

TABLE 22. Violent Re-Arrests At One Year or More

Violent Re-Arrest	Completed Pre-MRT	Completed Post-MRT
No	59 (79.7%)	105 (93.8%)
Yes	15 (20.3%)	7 (6.2%)
Total	74 (100%)	112 (100%)

(Chi square <.00)

Qualitative Component: Drug Court Completers Perceptions of Drug Court

In this final component of the evaluation, Drug Court Completers were interviewed and asked a series of questions about their experience with drug court. Thirty interviews were obtained with detailed responses for these interviews. Each interviewee was asked the following set of open-ended questions:

1. How did you feel when you were assigned to drug court?
2. If pleased, what pleased you...
3. If disappointed, what was disappointing...
4. What was the first session like for you?
5. What do you feel worked best for you in the program?
6. Why was <blank> best for you in the program?
7. What do you feel did not work?
8. Why do you feel <blank> did not work?
9. How did you feel when you finished?
10. If you will miss the group, why?
11. If you are just glad it's over, why?
12. What benefits did you receive from this program?
13. Do you have any suggestions for changes to the program?

Below, a random representation of the comments given in the responses are presented in composite form for qualitative purposes.

Interview 1: *I felt lucky when I was assigned to drug court; my choice was drug court or jail. I was lucky to go to drug court. What worked best for me in the program was putting me in jail because I had never been in jail where I could not bond out and this time I couldn't. It's not that drug court does not work; it's that you don't want it to work. If not for drug court, I would not be clean today. Q: Do you have any suggestions for change for the program?* *Yes, I believe they should have more involvement with the people who graduate because I disagree with [the person] running the alumni program. She is a self admitting crack head and still drinks to this day, and if you go to NA they will tell you alcohol is a drug too. Everybody else, except for her, was very helpful to me.*

Interview 2: *My counselor worked best for me. He enlightened me and let me know that there was life without dope and I am grateful for that. I think it worked. I have a life. I have been clean and I am grateful I have had the same job for over two years. The day I graduated I felt good, it was the first time I had finished something in a long time. I felt accomplished. I am still active with Drug Court because I want to share with others what I learned about structure, honesty, and integrity. I have my family back in my life and God I live without drugs, life is good. I'm back in school getting my Master's. Q: Do you have any suggestions for change for the program?* *Just maybe offer the program to more people; it will benefit them. The doors should maybe be opened to repeat offenders so they may have this opportunity. The criteria should maybe be looked at.*

Interview 3: *The thing that worked best for me was the complete package. It was probably at the very beginning they left no room for failure; it was very intensive. They had all the bases covered and there was no time to go out and relapse. I don't think there was any part that was a waste of time. When I graduated, I was elated but scared but I had my support group in place so that when I left their nest I still had people who I could call on. I also still have a few friendships that were forged. There is a certain sense of being glad it is over due to the fact that it was time consuming, but it needed to be. Q: What benefits did you receive from this program?* *The program gave me the tools I needed to continue recovery. It made me confident to become a contributing part of society. There are also legal benefits and one being having my record expunged. Q: Do you have any suggestions for change in the program?* *They are out-growing the building they were in; they need more space. It's an awesome program – well worth it – it saved my life – it gave it back to me.*

Interview 4: **Q: What was the first session like for you?** *It was probably the hardest because I was miserable. I wanted to get high. I was fearful of the unknown. The first session was overwhelming. I was still loaded. I had several sanctions that were due to my use. I was still confused. But Drug Court gave me the structure to save my life. That was what worked best for me. The structure of drug court and the length of time. The different phases are really strenuous and we need the structure, we need the time because it takes all of that. What did I feel did not work? What does not work is the individual.*

*Drug court works. It's not drug court that failed me, but me that failed drug court. I have the experience of knowing today that at first the sanctions don't work and then it happens that you stop and surrender to the program. **Q: If you are glad it's over, why?** One of the reasons I'm glad it's over is because now I get to use what they taught me. I get to get back into society and make amends for the wrong I've done.*

Interview 5: *There are two types: those that need and those that want it. The ones who want it stay sober. Drug court is a long treatment that not only gives you a stable environment but it gives you guidance. There are people like me who have flaws and drug court has given me all of the tools I could ever need to keep me going. Now with this change, everybody whose life I touch is better because of my experience with drug court. I am just so grateful. I was a convicted felon looking at 60 years. Drug court gave me a chance.*

Interview 6: *What worked best for me was the MRT book was absolutely wonderful. By the time I reached the 40th meeting it started to all click for me. I got a sponsor and saw how the MRT's worked with the 12 steps. The discipline worked really good. **Q: How did you feel when you graduated?** Relieved. I felt I had learned so much. I had high respect for the counselors there. Actually I wanted to cry. I had bonded with the people there – it was kind of sad. I love group and I still make 4 meetings a week. I really would not feel right if I didn't go to at least 3 meetings a week, so I'm still working the 12 steps. **Q: What benefits did you receive from this program?** Definitely I kicked my addiction, I also quit smoking, I was given an opportunity to look at myself living life on life's terms. I just never realized how it affected my spiritual growth. **Q: Any suggestions for change to the program?** I would incorporate the 12 steps into the program. The MRTs are important but I would add the 12 steps, and the meetings are very important. Something else I would add is alternate NA and AA to the meetings and what it is that the alcohol began you on your journey to drugs.*

Interview 7: *What worked best for me was the MRT book and the involvement of the counselors. The book explains how and talks about social and moral responsibilities. The involvement of the counselors gave you someone who was not your peers to encourage you and go over things with. **Q: Any suggestions for change to the program?** In some respects I think they should have more restrictions on how they present themselves to society.*

Interview 8: *After graduation, I felt great, but a little nervous about stepping out into the world without being drug tested. Twenty five months sober, I feel good! **Q: Are you glad it's over?** Well because of the time it took you know, to leave work early and go and UA or go to a meeting. **Q: What did you learn from this program?** I learned to not depend on drugs. I learned tools about what I can do when I'm stressed out about a situation instead of using.*

Interview 9: **Q: What do you feel worked best for you in the program?** *Having a very close set of peers, because as peers it's easier for them to relate to you on the same level. What did NOT work for me was the numerous meetings because Phase 1 is 4 of*

everything a week. There is no time to do anything else. **Q: Any suggestions for change to the program?** I think they should let people choose. I went because I wanted to and others were forced and it makes it difficult going through phase 1 and 2 for those that want to be there. Everyone is grown enough to make their own decisions.

Interview 10: Everything worked – if you work the program it will work you. When I was finished I was happy but felt like I was losing a family. **Q: What benefits did you receive from the program?** I got an apartment, job, a bank account, friends, my respect, dignity, family, peers. I benefitted a lot. **Q: Any suggestions for change to the program?** If they could just not have call in everyday – not weekends – and it could give people the chance to be responsible to come back on Monday. It's too much everyday; they need to want for themselves.

Interview 11: Q: What was the first session like for you? I honestly can't tell you because I didn't want to be there. I closed my mind and one week later I got sanctioned and went to the halfway house. When I came back from the halfway house I was so ready to change until I was ready to do anything and everything they told me to do. I can't think of anything that didn't work. Probably the assignments for each phase worked best because it got deep into the way reality really was; it helped me to be a better mother and daughter. I got my GED, I held a job for almost 2 years, I became independent, I got engaged, I mended the wounds between my parents and I, I became a friend and sponsor. They gave me my life back. I was able to keep my little girl and I really feel that if not for Drug Court I would probably be dead on the side of the road.

Interview 12: I think what worked best for me was the MRT book – it made me go deep into ME and not just blaming other people but holding myself accountable. Everything worked, but especially the MRT book. **Q: How did you feel when you finished?** I was proud of my accomplishment, it was the first thing I ever accomplished in my life. It will forever be a part of my life. I wear a shirt that says DRUG COURT WORKS. **Q: What benefits did you receive from the program?** That drug court introduced me to Narcotics Anonymous. **Q: Do you have any suggestions for changes to the program?** Drug court has changed a lot and now the clients are doing different drugs and they're taking coricidin as a drug. I learned this through Narcotics Anonymous.

Interview 13: Q: What do you feel worked best for you? The meetings - they got me to interact with a bunch of people just my kind. **Q: What do you feel did not work?** Sanctions because I felt that drug court was being vengeful for my actions. I think they need to do away with the sanctions. **What benefits did you receive from this program?** Sobriety, gained new sober friends, much more clearer thinking, a new aspect on life, a greater relationship with God.

Interview 14: Q: What do you feel worked best for you? The immediate consequences if you do something wrong. **Q: What do you feel did not work?** They have stuff that they make you do like case management and gender group. It's the same thing over and over. I'm sure that with their time they can come up with more and you see the same people over and over like housing – you can learn something else. **Q: Any suggestions**

for changes to the program? *Yes, just for the upper part of the program – be more equal – don't let personal feelings get in the way they treat people.*

Interview 15: Q: How did you feel when you got assigned to Drug Court? *I was glad. I had been in jail for 8 months. It was like a ticket out of jail at first. Q: What was the first session like for you?* *It was kind of questionable; it was like how could these people really help me – I like getting high. It was something I had to do to stay free. Q: What worked best for you?* *It would have to be the rules that they gave me. I had to make 4 meetings, I had to UA, I had to attend meetings and go to the outside meetings. This was what stood out to me and what helped me because my life had no rules. I had nowhere to be. I had no structure. You see, I just lived. I would be out all night, so when I had rules then I was there you make meetings and you hear things that relate to your life and you get exercises. They did a lot of exercises that would make you think about your life. It gave me structure. I spent a year and a half in drug court, and you know I never missed one group, I wasn't glad it was over, but I was glad I had finished something because you know I didn't finish much in my life. I had accomplished something. Q: Do you have any suggestions for change to the program?* *If it's not broke, don't fix it. If my car comes with a certain type of rims, and I like it, I 'm not going to put any 20's on it.*

(Interviews 16-30 available upon request)

Conclusions and Key Findings

While different interviewees preferred different parts of the program, it seems that all agreed that drug court worked for them and changed their lives for the better. In the U.S. we house proportionately more of our population in prison than does any other country and for longer periods of time than do many countries (Tischler, 1999). Recidivism rates of inmates suggest that prison is not successful at rehabilitation, and alternatives to incarceration such as the F.I.S.T. drug court therefore seem to offer a more viable and affordable option to the thousands of dollars spent per year on housing individual prisoners. This evaluation supports a previous evaluation completed in 2005 for the F.I.S.T. program in which findings strongly suggest the success rate of the program supersedes that of other alternatives to incarceration such as Tracts 1 and 3. Furthermore, the effect is stronger over the long term when participants have been exposed to the MRT component of the program. Re-arrest rates are dramatically and statistically significantly lower for Drug Court completers than for Prevention Plus (Tract 1) or Straight Probation (Tract 3). This is especially true for drug crimes and violent crimes. While there may be some differences in the population of drug court versus these programs, these differences fail to explain the success of the program relative to the other two programs. This, along with the interviews of graduates of the program demonstrate overall positive perceptions on the part of the participants. The findings of this evaluation should clearly show that a need for continued financial support of the F.I.S.T. Drug Court Program will be money well spent.

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