Enhancing Drug Court Capacity: Finding and Serving Your Target Population

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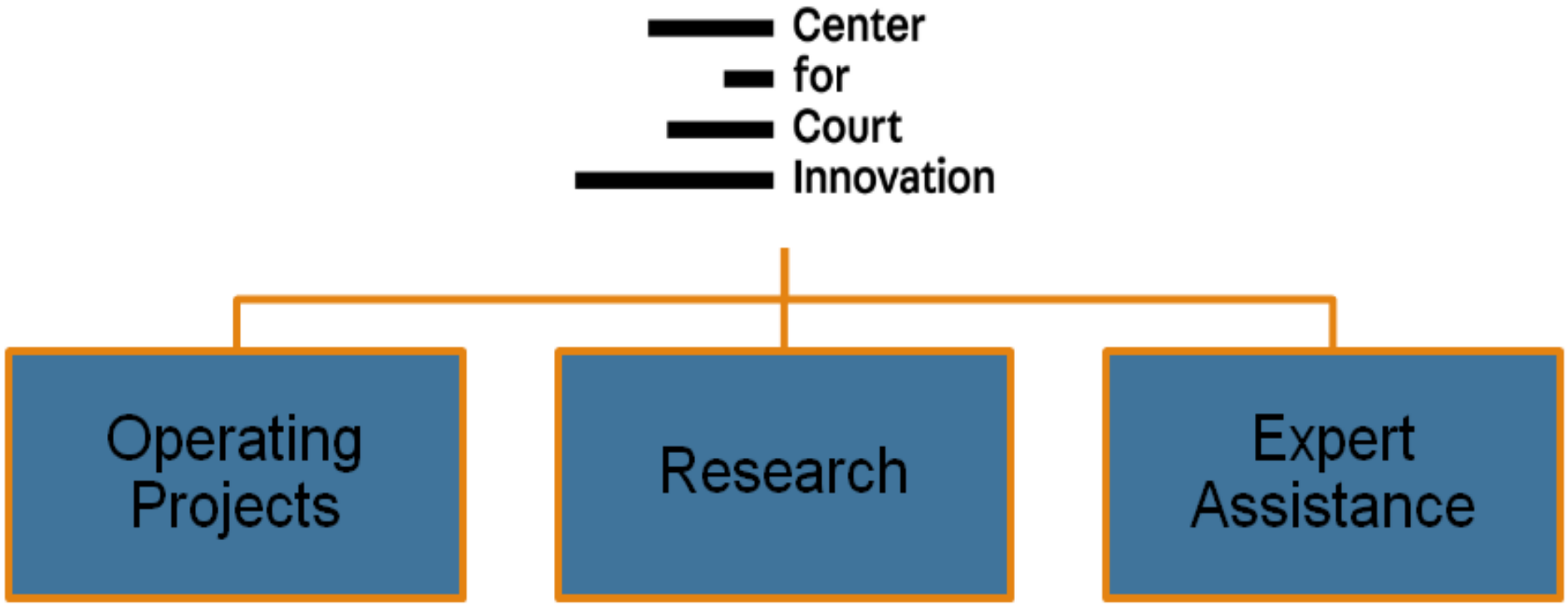


Mission

Reduce Crime

Aid Victims

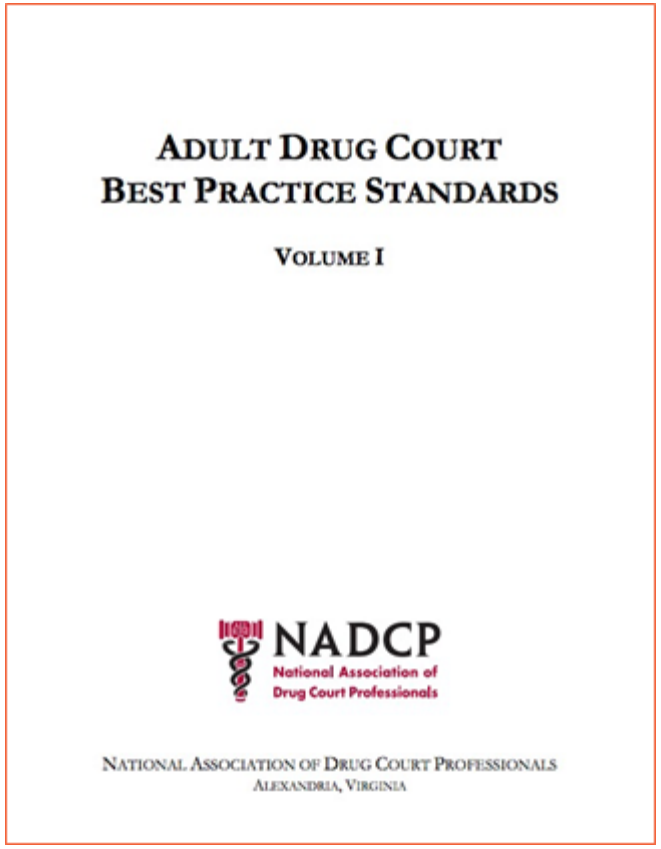
Strengthen Communities

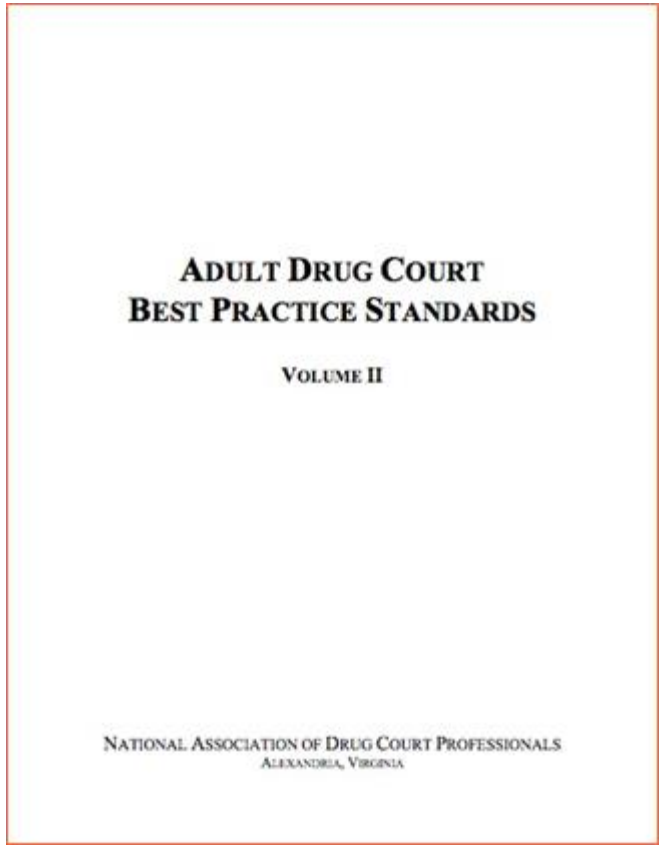
Improve Trust in the Justice System

Objectives

1. Maximizing the total number of participants
2. Defining an appropriate target population
3. Screening and referral: finding the right participants
4. Retention and Fidelity
5. Eliminating disparate access to drug court related to race, gender, and geography

Follow the Best Practice Standards





Enhancing Drug Court Capacity: Defining the Problem

"Enhancing capacity" means:

(1) ensuring that drug courts are serving as many individuals from their target population as possible, (2) while maintaining fidelity to evidence-based treatment and supervision practices.

Enhancing Drug Court Capacity
Part 1: Maximizing # of Participants

Maximizing the number of individuals served is a key goal for drug courts.

Why Build Capacity?

80% of jail and prison inmates were convicted of a drug/alcohol related offense, were intoxicated at the time of arrest, reported committing the offense to support a drug habit, or have a significant history of substance abuse.

45% of jail inmates met diagnostic criteria for drug/alcohol dependence,
23% met criteria for abuse, and
68% met criteria for either abuse or dependence.

2/3 of probationers are drug or alcohol involved.

52%-80% of males and 31%-80% of females tested positive for illicit drugs at the time of booking.

35%-70% of arrestees reported heavy alcohol binge drinking in the 30 days prior to arrest.

Serving More of Those In Need

- Reaching more offenders in need is one of the most important challenges facing drug courts.
- Drug courts serve **fewer than 10%** of eligible individuals.
- Strive to serve more eligible individuals (ideally all).

Growing Pains

- But, growth can cause major problems!
- Fidelity to the model often suffers as drug courts grow.
- Resource limitations mean that services get diluted as the number of participants increases.
- Effects on recidivism decline as drug court enrollment increases.
- Steep declines in effectiveness when enrollment exceeds 125 participants

Managing Growth

- How can drug courts grow and maintain fidelity to the model?
- Carefully assess adherence to best practices
  - Is the judge spending 3 minutes with each participant?
  - Is drug/alcohol testing happening at least 2x/week?
  - Are team members attending pre-court staffing consistently?
  - Are staff receiving ongoing training in best practices?

Restoring Fidelity

- If fidelity to the model is slipping, the court must determine how to restore adherence to best practices:
  - Hire additional staff
  - Hold court hearings more often
  - Schedule more frequent professional development opportunities for staff
  - Start a second drug court?

Enhancing Drug Court Capacity
Part 2: Defining Target Population

- Eligibility criteria must be objective and in writing.
- NO subjective criteria or personal impressions permitted. (See *Standard*, Vol. 1, page 5)
- Basic requirements: substance use disorder + substantial risk of reoffending

Defining Target Population

What is your target population?

- Legal eligibility
- Clinical eligibility
- Risk/need measures

Legal Eligibility

- Legal eligibility is a policy decision typically made by the prosecutor's office, the court, and other stakeholders. It can be changed!
- Legal eligibility policies should reflect research
- Drug courts should eliminate categorical exclusions to the extent possible

Clinical Eligibility

- Clinical eligibility should be based on the results of a comprehensive clinical assessment
- Key question: substance use disorder?
- Any other restrictions should be based on the availability of appropriate services
- Drug courts should not automatically exclude individuals with co-occurring mental health disorders or who take legally prescribed psychotropic medications.

Risk and Need

- Drug courts are most effective with high-risk/high-need individuals.
- Research is based in Risk Need Responsivity Theory.

The Three Core Principles

Risk Principle: Who to target

- Criminal behavior can be predicted
- Intervention is most effective with higher-risk individuals

Need Principle: What to target

- Assess and target "criminogenic" needs (i.e. needs that fuel criminal behavior)

Responsivity Principle: How to intervene

- Use interventions tailored to the needs, characteristics, learning styles, motivation, and cultural background of the individual.

The Risk-Need Model

Risk Factor	Common Measures
Criminal History	Prior adult and juvenile arrests; Prior adult and juvenile convictions; Prior failures-to-appear; Other currently open cases; Prior and current charge characteristics.
Demographics	Younger age; Male gender.
Antisocial Attitudes	Patterns of antisocial thinking (lack of empathy, attitudes supportive of violence, system blame).
Antisocial Personality Pattern	Impulsive behavior patterns; Lack of consequential thinking.
Criminal Peer Networks	Peers involved in drug use, criminal behavior and/or with a history of involvement in the justice system.
School or Work Deficits	Poor past performance in work or school (lack of a high school diploma; history of unemployment.
Family Dysfunction	Unmarried; Recent family or intimate relationship stress; Historical lack of connection with family or intimate partner.
Substance Abuse	Duration, frequency and mode of current substance use; History of substance abuse or addiction; Self-reported drug problems.
Leisure Activities	Isolation from pro-social peers or activities.
Residential Instability	Homelessness; Frequent changes of address.

Static

Dynamic

The Risk Principle

- The risk principle tells us that we should assess for risk and vary the intensity of intervention (treatment & supervision) by risk level.
- Higher risk: Provide more intensive intervention.
- Lower risk: Intervention can be harmful. ***Why?***
  - Interferes with work or school
  - Increases contact with higher-risk peers
  - Can stigmatize and produce psychologically damaging effects

Risk-based decision making in the courtroom

- **<u>Minimal or low risk</u>:** *Off-ramp ASAP* (e.g., pretrial release; conditional discharge). Beware of net-widening!
- **<u>Moderate-to-higher risk</u>:** *Supervision or treatment* at appropriate intensity (e.g., supervised release pretrial and alternatives to incarceration post-adjudication).
- **<u>Moderate-high or high risk for violence</u>:** Incarceration *if* unable to supervise safely (e.g., pretrial detention).

Jail Increases Risk!

- The harm of intensive intervention to lower-risk individuals is magnified when *jailing* them.
  - Jail is the most intensive and disruptive intervention of all; AND
  - The default in many jurisdictions.
- Research generally shows that incarceration increases the likelihood of re-arrest after release—but this relationship applies especially at lower risk levels.

Risk and Needs Assessments

Prognostic Risks

Criminogenic Needs	High	Low
Low	Status calendars Intensive treatment Compliance consequences Positive reinforcement Agonist medication	Noncompliance calendars Intensive treatment Treatment is proximal Positive reinforcement Agonist medication
High	Status calendars Pro-social rehabilitation Abstinence & compliance are proximal Restrictive consequences Antagonist medication	Noncompliance calendars Prevention services Abstinence is proximal

Enhancing Drug Court Capacity
Part 3: The Screening and Referral

- Ultimately, drug courts should seek to serve as many individuals from their target population as possible.
- How do they get there? Universal screening

Maximizing Identification

Principles of Universal Screening

- Universal - every case!
- Speed
- Accuracy and Efficiency
- Integration
- Centralization

Universal Screening in Practice

1. Risk-need screening before first hearing
    - Legal eligibility questions (charge, priors, etc.)
    - Risk level (high risk)
    - Needs profile (substance use disorder/high need)
    - Objective criteria/No room for discretion
2. Screening results shared with court and attorneys at first hearing
3. Defense counsel advises client, prosecutor may raise objections

Universal Screening in Practice (cont.)

4. Referral/transfer to drug court
5. Assessment(s) to confirm eligibility and inform treatment/supervision plan
6. Entry into drug court

Benefits of Universal Screening

- Seals the cracks in the justice system so no one falls through
- Promotes efficient use of resources and avoid wasting limited resources on ineligible offenders

Enhancing Drug Court Capacity
Part 4: Reducing Disparities

- Research and experience demonstrate that, too often, eligible individuals do not have equal access.
- Drug courts must make efforts to identify and address:
  - Racial, ethnic, and gender disparities
  - Geographic disparities (usually rural areas)

Reducing Racial Disparities

- Nationally, African-American, Hispanic, and Latino individuals are thought to be underrepresented in drug courts by approximately 3% to 7%, and sometimes more.
- Racial disparity results from a variety of causes:
  - Explicit bias
  - Implicit bias
  - Unintended impacts of eligibility criteria, assessment tools, or other practices

Evaluation

Efficient and Effective Evaluations to measure success

- Continued Funding
- Improved Performance

"Of all community-based dispositions for drug offenders, drug courts come closest to offering the full range of evidence-based services that are typically required for High Risk/High Need drug offenders."

Doug Marlowe, JD, PhD

Questions and Comments

Thank you!

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