

Somerset County Juvenile Drug Treatment Court *Process Evaluation*



Submitted to:

Gray Barton

Executive Director
Office of Problem-Solving Courts
2011-D Commerce Park Drive
Annapolis, MD 21401

Submitted by:

NPC Research
Portland, Oregon

September 2008



4380 SW Macadam Ave., Suite 530
Portland, OR 97239
(503) 243-2436
www.npcresearch.com

Somerset County
Juvenile Drug Treatment Court
Process Evaluation

Submitted By

NPC Research

Management Team

Juliette R. Mackin, Ph.D., Study Manager

Shannon M. Carey, Ph.D., Consultant on Drug Court Research

Michael W. Finigan, Ph.D., Consultant on Drug Court Research

Research Team

Theresa L. Allen, Ph.D.

Robert Linhares, Ph.D.

Dawn James, LCSW-C, LCADC

For questions about this report or project, please contact Juliette Mackin at

(503) 243-2436 x 114 or mackin@npcresearch.com.

September 2008



Informing policy, improving programs

ACKNOWLEDGEMENTS

This report is made possible by the great efforts, support, and participation of many people and organizations. In particular, we wish to express gratitude to:

- Frank Broccolina, State of Maryland Court Administrator
- Gray Barton, Executive Director; and Jennifer Moore, Deputy Director, Maryland Office of Problem-Solving Courts
- Hon. Jamey H. Hueston, Chair of the Judicial Conference Committee on Problem-Solving Courts
- Hon. Kathleen G. Cox, Chair of the Drug Court Oversight Committee
- Master Robert Laird, Jack Paul and all team members including judicial/legal partners and treatment providers who participated in key stakeholder interviews. We appreciate their warm and welcoming attitude toward our evaluation team; and thank them for making their program completely available to us
- Somerset County Juvenile Drug Court interview and focus group participants for their candor and for providing the evaluation team with their unique perspectives on the program
- Charley Korn, NPC Research

TABLE OF CONTENTS

EXECUTIVE SUMMARY.....	I
BACKGROUND.....	1
METHODS	3
Site Visits.....	3
Participant Interviews	3
Key Stakeholder Interviews.....	3
Document Review.....	3
RESULTS	5
Somerset County Juvenile Drug Court Program Description.....	5
Somerset County, Maryland	5
Somerset County Juvenile Drug Court Overview	5
Implementation	5
Participant Population and Program Capacity	6
Drug Court Goals.....	6
Eligibility Criteria	6
Drug Court Program Screening and Entry Process.....	7
Incentives for Offenders to Enter (and Complete) the SCJDC Program	8
Drug Court Program Phases.....	8
Graduation.....	9
Treatment Overview	9
The Drug Court Team.....	10
Drug Court Team Training	11
Team Meetings.....	12
Provider and Team Communication with the Court.....	12
Drug Court Hearings.....	12
Family Involvement.....	13
Drug Testing	13
Rewards.....	14
Sanctions.....	14
Unsuccessful Program Completion (Termination).....	14
Data Collected by the Drug Court for Tracking and Evaluation Purposes.....	15
Community Liaisons.....	15
10 KEY COMPONENTS OF DRUG COURTS AND 16 JUVENILE DRUG COURT STRATEGIES.....	17
SOMERSET COUNTY JUVENILE DRUG COURT: A SYSTEMS FRAMEWORK FOR PROGRAM IMPROVEMENT	29
Community Level	29
Summary of Community-Level Recommendations	29
Agency Level.....	29
Summary of Agency-Level Recommendations	30
Program Level.....	30

Summary of Program-Level Recommendations.....	30
SUMMARY AND CONCLUSIONS.....	31
REFERENCES	33
APPENDIX A: DRUG COURT TYPOLOGY INTERVIEW GUIDE TOPICS.....	35
APPENDIX B: PARTICIPANT INTERVIEW RESULTS SUMMARY.....	39

EXECUTIVE SUMMARY

Drug treatment courts are effective programs designed to reduce drug abuse and criminality in nonviolent offenders. The first drug court was implemented in Florida in 1989. There were 2,147 drug courts as of December 2007, with drug courts operating or planned in all 50 states (including Native American Tribal Courts), the District of Columbia, Northern Mariana Islands, Puerto Rico, and Guam (NADCP 2007).

Drug courts use the authority of the juvenile justice system to offer treatment to nonviolent offenders in lieu of detention. This model of linking the resources of the juvenile justice system and substance treatment programs has proven to be effective for increasing treatment participation and for decreasing criminal recidivism.

Administrative Judge Daniel Long was key to the implementation of Somerset County's juvenile drug court program. In 2004, he approached and contracted with Somerset County school board member and independent consultant, Jack Paul, to assist in applying for federal funding to support startup efforts. Mr. Paul was hired as the program's part-time coordinator and continues to serve in that capacity today. The full team was assembled in October 2005, and included Master Robert Laird, a former assistant state's attorney. Master Laird voluntarily accepted the role as drug court master and continues to serve in that capacity today. The first participant entered the program in March 2006.

The Somerset County Juvenile Drug Court (SCJDC) enrolled 14 participants from March 2006 through June 2008. During that period, a total of 5 participants graduated and 3 were released unsuccessfully from the program. The program has a capacity goal of 10 active participants and it continues to strive to achieve that number. At the end of June

2008, the program had 6 active participants. These participants work with counselors from the Somerset County Health Department in adolescent focused group and individual therapy and may also work with their families in counseling.

Information was acquired for this process evaluation from several sources, including observations of court reviews and team meetings during site visits, key informant interviews, and focus groups comprised of program participants and parents/guardians. The methods used to gather this information from each source are described in detail in the main report.

According to its *Program Handbook*, SCJDC's program goals are to:

- Increase participation in the educational process
- Improve family relationships
- Reduce recidivism
- Visibly reduce drug, alcohol and tobacco usage

Process Results

Using the 10 Key Components of Drug Courts (as described by the National Association of Drug Court Professionals, 1997) as a framework, along with the 16 juvenile drug court strategies, described by the National Drug Court Institute (NDCI 2003), NPC examined the practices of the SCJDC program. The SCJDC fulfills many of the 10 key components and 16 juvenile strategies through its current policies and structure. It integrates alcohol and other drug treatment services with juvenile justice system case processing. The program uses frequent alcohol/drug testing to monitor abstinence, has had a continuously sitting master since its inception, and has experienced very little turnover on the drug team overall. Team members have been

creative in addressing transportation challenges and adjusting program policy in response to their own program monitoring.

There are several areas in which the SCJDC should and can make program improvements. The program should consider accepting youth who do not have a responsive authority figure willing to support their participation, in order to serve this population and increase program capacity; identify more opportunities to offer incentives to participants, especially in the first phase, to encourage their continued involvement in the program; adopt a mandatory aftercare program that will aid youth in their transition back into the community; and consider holding drug court hearings outside of school hours in order to underscore the importance of school attendance.

A summary of suggestions and recommendations that emerge from this evaluation include the following:

SUMMARY OF COMMUNITY-LEVEL RECOMMENDATIONS

Somerset County is not resource-rich; however, SCJDC has developed some vital connections to community supporters. The program is encouraged to form an advisory committee, seek increased involvement from local law enforcement and continue to maintain and develop community resources as they relate to the most common participant needs. The team should also work on meeting program goals around the recruitment of African American youth, including becoming more culturally responsive.

SUMMARY OF AGENCY-LEVEL RECOMMENDATIONS

The SCJDC should make sure that all agency representatives have received training specific to their role as well as training on the general drug court model and philosophy. The team should implement a mandatory aftercare program that offers support to the participant as s/he transitions back into the community. The case management specialists should implement full spectrum drug tests and the treatment provider should consider using instant drug tests and sending only positive results to the laboratory.

SUMMARY OF PROGRAM-LEVEL RECOMMENDATIONS

The program should consider accepting participants without a consenting parent/guardian in order to provide services to this group of youth and to increase participant population to intended capacity. Drug court hearings should be held outside of school hours and participants should be required to attend the entire hearing in order to foster group support. Team members should identify more opportunities, early in the participant's time/involvement in the program, to acknowledge progress and offer incentives, while relying less on the imposition of sanctions. The entire team should begin using the SMART database to make tracking and analysis easier as the drug court program grows. The drug court team should receive cultural competency training, which should be updated regularly. The SCJDC should implement regular policy meetings to discuss program challenges, such as finding and securing community resources, increasing participant recruitment and enhancing the involvement of law enforcement in the program.

BACKGROUND

In the last 18 years, one of the most dramatic developments in the movement to reduce substance abuse among the United States criminal justice population has been the spread of drug courts across the country. The first drug court was implemented in Florida in 1989. As of December 2007, there were 2,147 juvenile, adult and family drug courts, with drug courts operating or planned in all 50 states (including Native American Tribal Courts), the District of Columbia, Northern Mariana Islands, Puerto Rico, and Guam (NADCP 2007).

Drug courts are designed to guide offenders identified as drug-addicted into treatment that will reduce drug dependence and improve the quality of life for offenders and their families. Benefits to society take the form of reductions in crime committed by drug court participants, resulting in reduced costs to taxpayers and increased public safety.

In the typical drug court program, participants are closely supervised by a judge who is supported by a team of agency representatives who operate outside of their traditional roles. The team typically includes a drug court coordinator, addiction treatment providers, prosecuting attorneys, defense attorneys, law enforcement officers, and parole and probation officers who work together to provide needed services to drug court partic-

ipants. Prosecuting attorneys and defense attorneys hold their usual adversarial positions in abeyance to support the treatment and supervision needs of program participants. Drug court programs can be viewed as blending resources, expertise, and interests of a variety of jurisdictions and agencies.

Drug courts have been shown to be effective in reducing recidivism (GAO, 2005) and in reducing taxpayer costs due to positive outcomes for drug court participants (Carey & Finigan, 2004; Carey, Finigan, Waller, Lucas, & Crumpton, 2005). Some drug courts have even been shown to cost less to operate than processing offenders through traditional (business-as-usual) court processes (Carey & Finigan, 2004; Crumpton, Brekhus, Weller, & Finigan, 2004; Carey et al., 2005).

This report contains the process evaluation for the Somerset County Juvenile Drug Court (SCJDC), a program for juveniles 12 to 18 years old. The first section of this report is a description of the methods used to perform this process evaluation, including site visits, participant interviews and key stakeholder interviews. The second section contains the evaluation, including a detailed description of the drug court's process and recommendations based on the 10 key components of effective drug courts.

METHODS

Information for this process evaluation was acquired from several sources, including observations of court hearings and team meetings during site visits, key stakeholder interviews, participant interviews, and program documents. The methods used to gather information from each source are described below.

Site Visits

NPC staff traveled to Somerset County, Maryland, for site visits in February and July 2008. The visits included attendance at the drug court team meeting, facilitation of two focus groups with current drug court participants and parents/guardians of participants, and an observation of a drug court hearing. These observations and participant interviews provided information about the drug court's structure, procedures, and routines.

PARTICIPANT INTERVIEWS

NPC conducted participant interviews in the offices of the SCJDC in July 2008. Participant interviews were conducted with current program participants and parents/guardians of current participants. The interviews provided the participants with an opportunity to share their experiences and perceptions regarding the drug court process. See Appendix B of this report for a summary of results.

Key Stakeholder Interviews

Key stakeholder interviews, conducted by telephone, were a critical component of the SCJDC process study. NPC Research (NPC) staff interviewed nine individuals involved in the administration of the drug court, including the master, the program coordinator, the assistant public defender, and the assistant state's attorney. Other team members interviewed included the Somerset County Health Department Addictions Counselor, two case management specialists with the Department of Juvenile Services, the family services

coordinator for Somerset County Circuit Court, and the Somerset County Board of Education Learning Support Specialist.

NPC has designed a *Drug Court Typology Interview Guide*,¹ which provides a consistent method for collecting structure and process information from drug courts. In the interest of making this evaluation reflect local circumstances, this guide was modified to fit the purposes of this evaluation and this particular drug court. The information gathered through the use of this guide assisted the evaluation team in focusing on the day-to-day operations as well as the most important and unique characteristics of the SCJDC.

For the process interviews, key individuals involved with SCJDC administration were asked questions from the *Typology Interview Guide* during telephone calls at several points in time. This approach allowed us to keep track of the changes in the drug court process from the beginning to the end of the project.

Document Review

In order to better understand the operations and practices of the drug court, the evaluation team reviewed the *Somerset County Circuit Court Juvenile Drug Court Program Handbook* and the *Somerset County Juvenile Drug Court Handbook* (for participants) for program information. Information contained in these program manuals was compared to data obtained from other sources, to ensure consistency and comprehension across the program.

¹ The Typology Guide was originally developed by NPC Research under a grant from the Bureau of Justice Assistance and the Administrative Office of the Courts of the State of California. A description of the guide can be found in Appendix A, and a copy can be found on the NPC Research Web site at [www.npcresearch.com/Files/NPC_Research_Drug_Court_Typology_Interview_Guide_\(copyrighted\).pdf](http://www.npcresearch.com/Files/NPC_Research_Drug_Court_Typology_Interview_Guide_(copyrighted).pdf)

RESULTS

Somerset County Juvenile Drug Court Program Description

SOMERSET COUNTY, MARYLAND

Somerset County is a rural county located on the southernmost part of the eastern shore of Maryland, approximately 100 miles from the Baltimore/Washington metropolitan area. Crisfield and Princess Anne are the two major business and industrial centers of the county.

As of the 2006 Census estimate, Somerset County's estimated population was 25,774 with 18% under the age of 18 and a median age of 36.5. Somerset County's racial composition, according to the 2006 Census estimate, was 57% White, 41% Black or African American, 2% Latino, 1% Asian and Pacific Islander (combined), 1% multiracial, less than 1% Native American and less than 1% other races. The Census estimate also found that the median household income in the county was \$30,301 and the median family (defined as a group of two or more people who reside together and who are related by birth, marriage, or adoption) income was \$42,835. The county's unemployment rate was 5.4%, second only to Baltimore City, within the state of Maryland. The county's poverty rate is also the second highest in the state, with 19.7% of families living below the poverty level. Lastly, the main industry categories reported were 1) educational, health and social services, 2) retail trade and 3) public administration. Princess Anne, the county seat, had a population of 2,845 in 2006.²

SOMERSET COUNTY JUVENILE DRUG COURT OVERVIEW

The Somerset County Juvenile Drug Court (SCJDC), located in Princess Anne, Maryland, provides services for juvenile offenders with substance abuse problems throughout the county. The program enrolled its first participant in March 2006. A variety of local agencies comprise the drug court. The SCJDC operations team is made up of the master, the coordinator, and representatives from the Department of Juvenile Services (DJS), the State's Attorney's Office (SAO), the Office of the Public Defender (OPD), the Somerset County Health Department, Somerset County Family Services, and the Somerset County Board of Education. The program takes a multidisciplinary approach to provide comprehensive services, such as intensive court supervision, education, counseling and life skills training to qualifying juvenile-justice and substance-involved youth and their families.

IMPLEMENTATION

In 2004, Somerset County Administrative Judge Daniel Long recognized the need for a juvenile drug court program and contracted with Somerset County school board member and independent consultant, Jack Paul, to assist in applying for federal funding to support startup efforts. Later that year, Mr. Paul was hired as the program's part-time coordinator. In 2005, State's Attorney, Robert Laird was recruited as master for the program and attended three federal implementation trainings sponsored by the Bureau of Justice Assistance. The full team was assembled in October 2005 and included representatives from the State's Attorney's Office, the Office of the Public Defender, the Department of Juvenile Services, the Some-

² All demographic information obtained from the Census Bureau at www.census.gov on June 10, 2008

rset County Health Department (SCHD) and Somerset County Family Services. A learning support specialist with the board of education joined the team in Spring 2007. A representative from the Department of Social Services attends team meetings and court hearings on an “as-needed” basis. Most team members are funded to participate in the drug court program through their home agencies. The family services coordinator is funded through a grant from Maryland’s Department of Family Administration, the coordinator’s position is funded by the Maryland Office of Problem-Solving Courts, and the master’s position is funded by the county.

PARTICIPANT POPULATION AND PROGRAM CAPACITY

The SCJDC program is currently designed to serve 10 participants. Since the drug court program has been operational, it has not reached capacity and therefore has been able to accommodate all eligible participants. As of June 2008, a total of 11 individuals have enrolled in the drug court; 5 of these participants graduated, 3 were unsuccessful at completing the program and 3 more enrolled in the program after June 2008, bringing the number of currently active participants to 6.

All of the program’s current participants are male. However, one of the program graduates is female. Of all drug court participants thus far, 82% are White and 18% are Black. The average age of active participants is 17 years. The main drugs of choice for youth enrolled in the SCJDC program are marijuana, cocaine and alcohol.

DRUG COURT GOALS

The SCJDC program works to reduce substance abuse and related delinquent behavior in nonviolent adolescents through a holistic treatment/case management approach. Cur-

rently, the program has four specific goals listed in its *Program Handbook*:

- Increase participation in the educational process
- Improve family relationships
- Reduce recidivism
- Visibly reduce drug, alcohol and tobacco usage

The SCJDC staff’s goals for the program, as reported during the key stakeholder interviews, are in line with those listed in the participant handbook. Additionally, staff members expressed the goals of giving the participants the tools they need to make good decisions when they are out in the community and instilling in them a sense of empowerment from having successfully completed the program.

ELIGIBILITY CRITERIA

The SCJDC eligibility criteria are listed in the *Program Handbook*. Prospective participants who are eligible for the program must be residents of Somerset County, Maryland, and be between the ages of 12 and 18 years. In addition they must:

- Have a qualifying substance abuse diagnosis
- Be a repeat offender or have failed informal DJS supervision
- Have only nonviolent offenses with no history of violent offenses

Generally, prospective drug court participants have not responded to regular probation and outpatient treatment. Originally, the individual’s charge(s) had to be directly drug-related; now, the charge must be due to a substance abuse problem if it is not a drug charge. Charges that preclude an individual’s entry into the program are those involving sex offenses and/or involving violence. Additionally, individuals who have pre-

viously completed a drug court program are ineligible. Team members reported that they generally err on the side of inclusion when making eligibility decisions. For individuals who have not qualified for the program, it has typically been due to the lack of an adult figure willing to support the individual's participation or the commission of more serious crimes prior to enrollment but after referral.

DRUG COURT PROGRAM SCREENING AND ENTRY PROCESS

The following description explains the process that potential SCJDC participants go through before entering the program. The program is designed to serve repeat offenders and those who violate their probation. Therefore, most referrals come through DJS, but they may also come through the court system. Typically, once an individual has incurred an infraction s/he is placed on informal supervision with DJS for 90 days. If the terms of informal supervision are not met (e.g., an appointment with the health department is missed), and if there is indication of a substance abuse problem, a referral will then be sent to the drug court coordinator by DJS.

Once the coordinator receives the referral, he reviews it to make sure the youth meets the program's minimum requirements. If these requirements are met, he contacts the DJS case manager, who then sits down with the youth and his/her parent(s)/guardian to find out if s/he is interested in the program and if the youth's parent/guardian can support his/her participation. If the parent/guardian and the youth are willing to participate in the program, a consent for release of information form is signed by the parent/guardian and the youth. The next step to program entry takes place at the weekly team meeting, where a DJS Case Management Specialist and the SCHD Addictions Counselor provide background information

about the prospective participant and a team decision is made regarding program admission.

Once the individual is accepted into the program, the coordinator meets with the parent and the youth to introduce them to the program, review the participant handbook and sign the necessary paperwork. Participants must also initial the orientation cover sheet, indicating that they have reviewed each chapter of the handbook with the coordinator. The coordinator will then write up a court order, signed by the master, and give it to the participant; this document will include the date of his/her first drug court hearing. At the first drug court hearing, the master reviews the contract again and it is entered into the court records.

All youth are assessed for substance abuse issues/concerns during the initial intake appointment with DJS. Once an individual has been referred and accepted into the SCJDC program, clinicians at the Somerset County Health Department use American Society of Addiction Medicine (ASAM) criteria to determine what level of treatment is appropriate. The Adolescent Alcohol Involvement Scale (AAIS) is used to assess the psychosocial consequences of alcohol use in the youth's life. To assess family functioning, the Problem Oriented Screening Instrument for Teenagers (POSIT) is also given to participants at the SCHD. Based on these assessment tools, a treatment plan is created to address each participant's specific needs.

The time from original violation to program entry can vary greatly and depends on whether the individual has already been put on informal supervision. For youth currently on informal supervision, the length of time from original violation varies with the date of non-compliance within the 90-day supervision period. Key stakeholders reported that cases deemed "appropriate for drug court" by DJS are flagged and processed by the

SAO in an expedited manner. Referral to entry time is typically 1 to 4 weeks but can take up to 2 months. Team members reported that prospective participants may begin treatment with the Somerset County Health Department before being formally admitted into the program.

INCENTIVES FOR OFFENDERS TO ENTER (AND COMPLETE) THE SCJDC PROGRAM

The SCJDC is a post-adjudication, pre-disposition program for individuals with substance abuse problems. The program only accepts young people who have offended on multiple occasions. The youth can either volunteer to go into the program—and avoid charges and disposition upon successful completion—or s/he can choose not to participate, at which time s/he will be sent to Circuit Court Judge Long for adjudication, and may be detained in a correctional facility for a minimum of 90 days. Thus, the primary incentive to enter the SCJDC program is to avoid detention and to have charges dropped (upon successful program completion). Successful completion of the program also means an end to probation supervision. Additional incentives for offenders to enter and progress through the drug court program include support in their recovery with treatment and case management, receiving praise from the master, and getting material rewards (e.g., gift cards), as one advances from one phase to the next.

DRUG COURT PROGRAM PHASES

The SCJDC program has four phases that generally take 210 to 360 days total to complete. The length of each phase is dependent upon the participant's compliance with the drug court requirements. The shortest time in which the program has been completed thus far is 10 months or approximately 300 days.

All participants are required to be enrolled in school or a GED program, or be employed. Phase I of the program is referred to, programmatically, as “Rebirth.” It focuses on reflection of past behavior and positively changing current behaviors. This phase lasts 30 to 60 days. Participants are required to attend drug court hearings every other week and undergo a minimum of two random urinalyses each week with their case manager. They are under intensive supervision during this phase and must have eight contacts with their case manager each month; two of these must be face-to-face meetings. Participants who are not on house arrest or electronic monitoring must adhere to a 6 p.m. curfew. They must also complete 10% of their community service hours during this phase. In order to advance to Phase II, participants must have attended all of their drug court hearings and substance abuse treatment appointments and have had no positive drug tests for 30 days. The DJS Case Management Specialist monitors compliance with all phase requirements.

Phase II is referred to as the “Renewal” phase and is intended to increase self esteem and cement the idea of program completion as a possibility for participating youth. This phase lasts 90 to 120 days. During Phase II, drug court attendance is reduced to one hearing per month. Participants submit to one random urinalysis sample per week. They must also have four contacts each month with the Department of Juvenile Services Case Management Specialist, including one home visit. Curfew is at 8 p.m. and 30% (cumulative) of total community service hours must be completed in this phase. Participants are required to maintain sobriety for 3 months before advancing to Phase III. They must also be in compliance with court and treatment attendance as well as supervision meeting requirements.

Phase III is called “Restoration” and operates on the idea of increasing self-control

and supporting future orientation, in place of impulsive behavior and immediate gratification. This phase lasts 60 to 90 days. Phase III participants must attend drug court hearings once a month and must meet with their case manager twice per month. They must also submit two random urinalyses each month. Curfew is changed to 9 p.m. and all community service hours must be completed by the end of the phase. In order to advance to Phase IV, participants must be continuously abstinent from substances for a minimum of 5 months. In addition, they must complete substance abuse treatment and maintain compliance with supervision meetings and court hearing requirements.

The fourth phase of participation is referred to as “Reformation” and is based on the philosophy that “the juvenile is a citizen entitled to all the rights and privileges of citizenship.” This phase lasts 30 to 90 days, and the participant is required to attend drug court hearings on a monthly basis. Random urinalyses are conducted once a month and face-to-face contact with the DJS Case Management Specialist is also required monthly for youth in this phase. Curfew is moved to 10 p.m. and participants must write an essay about what they have learned through their participation in program sponsored prosocial activities, including an evaluation of the program. Participants must also choose and complete a volunteer project: typically this is a book essay or an essay about their future plans.

GRADUATION

In order to graduate from the SCJDC program, participants must satisfy requirements for all four phases and:

- Complete a long term sobriety plan
- Complete a volunteer project and graduation essay
- Remain continuously clean and sober for 6 months

When a participant is nearing graduation, each agency representative reports on the prospective graduate’s progress toward completion at the team meetings. When it is agreed that all program requirements are met, the team sets a date for graduation. The SCJDC program has had five graduations to date. Graduation ceremonies are held in the annex of the court house and have included guest speakers from outside of the drug court program; in fact, the Chairman of the Appropriations Committee for the State of Maryland was the guest speaker at the first graduation ceremony. The Circuit Court judge attends graduation and speaks about the participant’s progress, as reported to him by the master. Next, the master gives a speech and then family members are invited to speak. Finally, a \$100 gift card is presented to the graduate along with a certificate of completion.

TREATMENT OVERVIEW

There is one treatment provider agency associated with the SCJDC: the Somerset County Health Department Behavioral Health Program (SCHDBHP). A counselor from the SCHDBHP is assigned to serve on the SCJDC team; she conducts treatment sessions for all drug court participants under the age of 18. Once a participant turns 18, s/he must meet with an adult counselor at the health department. Drug court youth must participate in individual counseling and treatment groups that are comprised exclusively of drug court participants. In the first phase, they must attend two group sessions each week and an individual session every other week. Attendance requirements decrease as individuals advance in treatment phases.

The treatment provider is trained in the Adolescent Recovery Plan from Hazelden,

which is used in group settings. She is also trained in adolescent co-occurring disorders and motivational enhancement therapy for cannabis use. SCHDCBHP contracts with an outside agency for the provision of mental health services to SCJDC participants.

The SCJDC program does not have a formalized aftercare plan. Once a participant is ready for discharge from treatment, s/he is asked to sign a form which will allow the treatment provider to contact him/her during a 6 month period following graduation. Additionally, because Somerset County is so small, team members wear multiple hats in the community, which often results in contact with program graduates outside of the drug court program. For example, one team member is also a coach for the high school's track team.

THE DRUG COURT TEAM

Master

The current Juvenile Court Master has been with the SCJDC since its implementation. Before he became the drug court master, he served as the team's State's Attorney's Office (SAO) representative, where he had worked for over 15 years, handling all of their juvenile cases. The position of drug treatment court master is voluntary, and the duties performed are in addition to his responsibilities overseeing civil matters involving juveniles. Team members reported that, because of his background as an assistant state's attorney, the master has a clear understanding of social service issues and the constraints around resources as a result of the program being located in a smaller county.

Coordinator

The SCJDC coordinator is responsible for administration of the drug court program and has been on the team since program implementation. He compiles and disseminates

participant data and program information to the team every other week at pre-court team meetings. He administers all of the program's grants and delivers presentations to the community about the program. The coordinator attends pre-court meetings and drug court hearings. He revised the pre-implementation team's program handbook and facilitates policy meetings. In addition, he has provided transportation for program participants who have had problems getting to school or to their appointments at the health department.

Case Management Specialist

The SCJDC has two case management specialists (CMS) on the team who work for the Department of Juvenile Services. One CMS has been with the team since the program was implemented; the other joined the team in March 2007, having previously served on the police force for 15 years as an undercover narcotics officer.

Most referrals to the drug court are made through the case management specialists. Once they receive a police report, if the matter cannot be resolved at intake, the CMS may either place the youth on informal supervision or refer the case to the State's Attorney's Office.

Once the youth has been accepted into the drug court program, the CMS conducts home visits, random drug tests and additional case management activities through office visits and/or phone updates with the youth. Individual case management specialists carry a caseload of approximately 4 to 5 drug court clients and 25 to 30 non-drug court youth.

Treatment Provider

There is one addictions counselor from the Somerset Counseling Center, Behavioral Health Program serving on the SCJDC team. She began with SCJDC almost 2 years ago. This team member attends pre-court meet-

ings and drug court hearings. She conducts individual, group and family counseling for drug court participants. Program participants who have reached the age of 18 are seen by an adult counselor at the health department. All other participants are seen by the drug court addictions counselor, who reports UA results, attendance compliance at treatment meetings/sessions, as well as relevant treatment-related information (e.g., recent problematic behaviors, reported family challenges, and personal successes) for all participants during the pre-court team meetings.

Assistant Public Defender

The assistant public defender (APD) serving on the SCJDC team represents the program's participants using a non-adversarial team approach. He joined the drug court team prior to the program's implementation and attended the federal implementation trainings. The APD attends the pre-court team meetings, where he contributes to team decisions (e.g., about participants, on policy issues) and serves as an advocate for participants (most often along with the other team members). He also attends the drug court hearings. The APD ensures that juvenile drug court procedures and protocols are in the defendant's best interest.

Assistant State's Attorney

The Assistant State's Attorney (ASA) on the SCJDC team is involved in the eligibility process for potential participants; specifically, he helps determine their legal eligibility for the program. The current ASA became involved with the SCJDC shortly after the program's implementation and has been with the SAO for 30 years. Prior to his joining the team, the current master served as the team's SAO representative. As a drug court team member, the ASA regularly participates in the pre-court team meetings and the drug court hearings and, like the APD, uses a non-adversarial approach.

Learning Support Specialist

The team's learning support specialist serves as the liaison between her local district's middle and high schools and the drug court team and is employed by the Board of Education. She joined the team in Spring 2007 and continues participation throughout the year (including the summer months). As a member of the drug court team, the Somerset County Learning Support Specialist provides the rest of the team with information on all participants' school issues, including the status of youth taking GED classes. She attends pre-court meetings and reports to the team on participants' grades, attendance, received counseling support, teachers' feedback, and discipline issues.

Family Services Coordinator

The drug court team's family services coordinator (FSC) is employed by the Circuit Court and provides services to families involved in the judicial system. She began working with the SCJDC prior to the program's implementation and attended the federal implementation trainings. She currently attends staff meetings and court hearings, serving as a link to needed county resources. Among the types of resources she has secured for the program (through her agency's budget) are gift card incentives and transportation tokens for drug court participants. Transportation tokens are given to parents/guardians as a part of a wraparound services program and incentives are given out by the master during the drug court session.

DRUG COURT TEAM TRAINING

Prior to program implementation, the master, coordinator and representatives from the Public Defender's Office, the State's Attorney's Office, the Department of Juvenile Services, Family Services, and the Health Department all received the National Drug Court Institute's implementation training.

Additionally, the coordinator, treatment provider, one of the case management specialists, and the learning support specialist have all attended the Drug Court 101 training provided through the Maryland Office of Problem-Solving Courts. To support the program's transition to the new data management system, the treatment provider, coordinator and master all attended State-wide Maryland Automated Records Tracking (SMART) database training. In addition, the coordinator has attended some of the past winter symposia offered for state drug court staff and has been present at the quarterly drug court coordinator meetings.

The newest team members, one of the case management specialists and the learning support specialist, have been with the team for just over one year. The coordinator trains new members using the Program Handbook and the Participant Handbook and sends them to the state's Drug Court 101 course. In an effort to increase collaboration with other programs in the area, the drug court team recently met with the Lower Eastern Shore Drug Courts to exchange ideas and information.

TEAM MEETINGS

The pre-court meeting is held every other Wednesday at 8:30 a.m. The coordinator, master, assistant public defender, assistant state's attorney, case management specialists, learning support specialist, and addictions counselor regularly attend the pre-hearing meetings. During these meetings, each team member provides a verbal progress report of every participant. The team members make recommendations on sanctions and rewards to the master, who makes final decision.

Policy meetings are held quarterly during which the entire contents of the SCJDC Program Handbook are reviewed. Policy issues are also discussed at the team meetings as

they arise. The Somerset County Drug and Alcohol Council serves as the steering committee for the SCJDC program. Recently, the coordinator has been considering the implementation of a drug court advisory board, which would include members of the community. Members would serve as links to community resources and advocates for the program.

PROVIDER AND TEAM COMMUNICATION WITH THE COURT

Team members reported that most participant issues are discussed during the team meetings. However, if a significant issue arises, team members will contact one another outside of the team meeting to discuss a response/resolution. If the case management specialists need to communicate with the court about a participant's infraction outside of the team meeting, the relevant information will be put in writing on department letterhead and sent to team members. The family services coordinator communicates with the drug court coordinator outside of the team meeting in order to collect information for her department's quarterly reports. Team members reported that they often come into contact, informally, with one another outside of meetings; this is due to fact that Somerset County is a small community and that many of the drug court team are involved in community programs/activities.

DRUG COURT HEARINGS

The SCJDC hearings are held twice a month on Wednesdays (starting at 9 a.m.) and usually last about 60 minutes with four to eight participants in attendance. Drug court hearings take place immediately after team meetings are concluded. It was reported that the time of the drug court session conflicts with school times during the school year; however, the team makes sure that participants return to school promptly following

the hearing. Further, team members report that school staff have been supportive with regard to this scheduling arrangement.

Participants in Phase I attend drug court hearings every other week. Phase II, III and IV participants attend once per month. Team members who regularly attend the drug court hearings include the master, coordinator, assistant public defender, assistant state's attorney, case management specialist, learning support specialist and addictions counselor. The family services coordinator attends drug court hearings when she is available.

While new participants are required to stay for the entire drug court session, individuals doing well in the program are permitted to leave once they have been called up and have spoken to the master. Only participants and their family members are permitted in the courtroom during drug court reviews. During these hearings, participants sit in the gallery, while the coordinator, the assistant public defender and the assistant state's attorney are seated at a table in front of the bench. Participants, along with their parents/guardians, are called up one at a time and sit at a table facing the master. After the status of each participant is discussed, the master imposes a sanction or provides a reward (including positive verbal reinforcement) if deemed appropriate. So far, there has only been one instance in which a youth showed up without his/her parent/guardian. Although it discourages this, the court will proceed with the youth's review in the absence of his/her parent/guardian. Participants nearing program completion are occasionally called up first to serve as positive models for the other drug court participants.

FAMILY INVOLVEMENT

Regarding family involvement, team members reported a similar viewpoint: when you take on a drug court client (i.e., accept

him/her into the program) you take on the whole family. Upon program entry, participating family members, along with drug court youth, have to sign a consent form for the disclosure of confidential information. The parents/guardians are expected to attend all drug court hearings. Regarding the importance of family involvement, one team member explained, "We try to get the kid to understand that the only friends you really have in the world are your mom and dad."

Family counseling is offered by the SCHDBHP, and parenting classes and mental health counseling are offered by outside agencies. There have been no sanctions levied against non-compliant family members. However, it was reported that the master has had to admonish family member(s) in the courtroom when they do not meet the court's expectations.

DRUG TESTING

Participants' compliance with the program is assessed by urinalysis test results. The treatment provider conducts drug tests at the initial intake assessment and then every time the participant attends group counseling. Drug tests are observed by a staff member of the same gender. All test results are sent to a laboratory for confirmation; negative results generally take 48 hours, while positive results can take up to a week. The drug tests used assess for a wide range of substances, including cocaine, amphetamines, opiates, THC, PCP, benzodiazepines and alcohol. The case management specialists administer instant, random drug tests which are fully observed by someone of the same gender. The DJS tests cover THC, amphetamines, cocaine and heroin. A failed drug test results in a \$12 fee for the participant, which is payable at his/her next scheduled court hearing. There are no fees associated with the drug testing done by the treatment provider.

REWARDS

SCJDC participants receive rewards from the master for doing well in the program. Possible rewards are listed in the Program Handbook as well as the Participant Handbook. They are tailored to the individual, according to team members. Rewards are generally provided during the court hearing and have included verbal praise, gift certificates, phase advancement, a reduction of curfew hours, and a reduction of electronic monitoring time (or being taken off of monitoring all together). Most team members reported that rewards are given out more often than sanctions; however, one team member reported that the program is sanction-heavy at the beginning, but that rewards are given out more toward the middle and end of the program. Examples of good behavior include attending school consistently with no unexcused absences or completing community service requirements.

SANCTIONS

After a non-compliant act occurs, such as picking up a new charge, skipping school, or missing treatment/case management appointments, the SCJDC team will discuss the issues related to the infraction during the pre-hearing team meeting (prior to the participant's next regularly-scheduled drug court hearing). The maximum time between a non-compliant behavior and a response is 2 weeks. If the participant's behavior is considered severe, that individual may be called into court the next day. The drug court team contributes to decisions on sanctions, while the master makes the final determination.

The type of sanction that is handed down will depend on the type of non-compliant behavior exhibited. However, sanctions are generally graduated. The master exercises his discretion based on the participant's truthfulness in court. Possible sanctions include detention, (verbal) disapproval from

the bench, a stricter curfew, placement on home electronic monitoring, and a delay in movement to the next program phase.

Other than the master, only the Electronic Monitor Coordinator (EMC) has the authority to detain participants who violate their electronic monitoring conditions. The EMC, who is not part of the drug court team (but, instead, works for DJS), maintains ongoing communication with the DJS Case Management Specialists about drug court participants on electronic monitoring.

UNSUCCESSFUL PROGRAM COMPLETION (TERMINATION)

Participants' program participation may be revoked for the following reasons, but are not limited to:

- Continual non-compliance with treatment recommendations
- Failure to attend scheduled drug court hearings
- Continued non-compliance with supervision guidelines
- Arrest on a new charge that in the team's view warrants termination
- Threats of violence or demonstrating violent behaviors towards self, others or property
- Continued non-compliance with phase requirements

The SCJDC, to date, has discharged three participants (as unsuccessful) from the program. Unless they have committed a violent offense, the master and the team will work to keep a participant in the program. Once an individual has been terminated, s/he will be required to attend a disposition hearing with Circuit Court Judge Long, who will make a determination on sentencing, including the possibility of detention. If the participant was already on disposition, his/her probation could be revoked and s/he could

be placed in a correctional facility or group home.

DATA COLLECTED BY THE DRUG COURT FOR TRACKING AND EVALUATION PURPOSES

A number of the SCJDC team members have received training for the Statewide Maryland Automated Records Tracking (SMART) system. At the time of stakeholder interviews, the health department was the only agency using SMART. The coordinator keeps paper records on drug court participants and runs an annual analysis of Somerset County arrest statistics, which is then updated in the Program Handbook. In addition, he keeps track of participant progress, including periodically updating information about employment status, sanctions and rewards, school attendance, and any non-compliant behavior. Data collected by the coordinator has been used to make program-

related decisions, including changing the age requirement range, which was 14 to 17 years old, to 12 to 18 years old. It has also been used in the decision to reduce the program's capacity goal from 15 to 10 participants.

COMMUNITY LIAISONS

Team members have partnered with a number of community agencies in Somerset County in a concerted effort to provide needed services to drug court participants. Somerset County's Local Management Board has helped to obtain funding for graduation gift cards. At least one participant is working with assistance from the Goodwill Employment Program. Also, the program's treatment provider will refer participants to Maple Shade for mental health issues and parents are sometimes referred for parenting classes facilitated by Family Services.

10 KEY COMPONENTS OF DRUG COURTS AND 16 JUVENILE DRUG COURT STRATEGIES

This section of the report lists the 10 Key Components of Drug Courts as described by the National Association of Drug Court Professionals (NADCP, 1997). Following each key component are research questions developed by NPC for evaluation purposes. These questions were designed to determine whether and how well each key component is demonstrated by the drug court. Juvenile drug court strategies as described by the National Drug Court Institute and the National Council of Juvenile and Family Court Judges (NDCI and NCJFCJ, 2003),³ are included as well. Within each key component, drug courts must establish local policies and procedures to fit their local needs and contexts. There are currently few research-based benchmarks for these key components, as researchers are still in the process of establishing an evidence base for how each of these components should be implemented. However, preliminary research by NPC connects certain practices within some of these key components with positive outcomes for drug court participants. Additional work in progress will contribute to our understanding of these areas.

The key component, research question, and juvenile strategy(ies) are followed by a discussion of national research available to date that supports promising practices, and rele-

vant comparisons to other drug courts. Comparison data come from the National Drug Court Survey performed by Caroline Cooper at American University (2000), and are used for illustrative purposes. Then, the practices of this drug court in relation to the key component and strategy(ies) of interest are described, followed by recommendations pertinent to each area.

Key Component #1: Drug courts integrate alcohol and other drug treatment services with justice system case processing.

Research Question: Has an integrated drug court team emerged?

Juvenile Strategy #1: Collaborative Planning

- Engage all stakeholders in creating an interdisciplinary, coordinated, and systemic approach to working with youth and their families.

Juvenile Strategy #2: Teamwork

- Develop and maintain an interdisciplinary, non-adversarial work team.

National Research

Previous research (Carey et al., 2005) has indicated that greater representation of team members from collaborating agencies (e.g., defense attorney, treatment, prosecuting attorney) at team meetings and court sessions is correlated with positive outcomes for clients, including reduced recidivism and, consequently, reduced costs at follow-up.

Local Process

The Somerset County Juvenile Drug Court has an integrated treatment and judicial team that includes the master, the drug court

³ NPC felt that both the 10 Key Components and the 16 juvenile drug court strategies provided important perspectives on the operation of juvenile drug courts. We have retained the numbering of the juvenile strategies as they appear in the source document (NDCI and NCJFCJ, 2003), so the strategies are not numbered consecutively in this section. In addition, some juvenile strategies appear more than once, if they contribute to more than one key component.

coordinator, the public defender, the assistant state's attorney, a learning support specialist, two case managers with the Department of Juvenile Services, and a treatment provider. The treatment provider works for Somerset County Health Department (SCHD) and provides individual and group substance abuse treatment services for all drug court participants. The SCHD is the only contracted treatment provider for the program. However, SCHD may refer clients to another agency for mental health services. The drug court team does not include a local law enforcement representative.

Policy meetings, which include the entire drug court team, are intended to be held quarterly, although there was not complete agreement among team members about how frequently they actually occur. Many of the most recently held policy meetings have involved a review and revision of Program Handbook. Team members report that, sometimes, specific policy issues are discussed at the pre-hearing meetings.

Everyone on the drug court team attends the pre-hearing meeting, which is held every other week. The treatment counselor assigned to the program shares progress reports, including drug test results, with the drug court team during pre-court meetings. Regarding the team dynamic, one team member reported that the team tries, "to work on what's best for the child and communicate even when we don't agree with one another." Other stakeholders described the team as "tight-knit" and having good "team spirit."

The SCJDC team has experienced little change in its personnel since its initial implementation. Newer drug court team members are additions rather than replacements. The small amount of turnover has been due to individual career advancement opportunities.

Recommendations

- The drug court team should implement consistently scheduled policy meetings in order to discuss issues concerning the program process and challenges. For example, topics to examine/discuss could include issues around increasing participant recruitment/enrollment and inclusion of partner agencies and community organizations as program partners.
- To the extent possible, the drug court team should make certain that local law enforcement perceive drug court as a cost-effective way to deal with repeat offenders struggling with substance abuse problems, and that, in other drug court programs, the participation of law enforcement on the drug court team has been associated with improved client outcomes. Specifically, research in this area has shown that greater law enforcement involvement increases graduation rates and reduces outcome costs⁴ (Carey, Finigan, & Pukstas, 2008). Additionally, the program should be perceived as an avenue for addressing quality of life issues and preserving public safety.
- Law enforcement may also be a potential source of alternative youth programs and funding avenues. The law enforcement liaison need not be present at all drug court hearings, but frequent attendance at pre-court staff meetings would lend the program a more comprehensive perspective of activity in the community.

⁴ Outcome costs are the expenses related to the measures of participant progress, such as recidivism, jail time, etc. Successful programs result in lower outcome costs, due to reductions in new arrests and incarcerations, because they create less work for courts, law enforcement, and other agencies than individuals who have more new offenses.

Key Component #2: using a non-adversarial approach, prosecution and defense counsel promote public safety while protecting participants' due process rights.

Research Question: Are the Office of the Public Defender and the State's Attorney's Office satisfied that the mission of each has not been compromised by drug court?

Juvenile Strategy #1: Collaborative planning

- Engage all stakeholders in creating an interdisciplinary, coordinated, and systemic approach to working with youth and their families.

Juvenile Strategy #2: Teamwork

- Develop and maintain an interdisciplinary, non-adversarial work team.

National Research

Recent research by Carey, Finigan, and Pukstas, 2008, found that participation by the prosecution and defense attorneys in team meetings and at drug court sessions had a positive effect on graduation rate and on outcome costs.

In addition, allowing participants into the drug court program only post-plea was associated with lower graduation rates and higher investment costs⁵. Higher investment costs were also associated with courts that focused on felony cases only and with courts that allowed non-drug-related charges. However, courts that allowed non-drug-related charges also showed lower outcome costs. Finally, courts that imposed the original sentence instead of determining the sentence when participants are terminated

showed lower outcome costs (Carey, Finigan, & Pukstas, 2008).

Local Process

Prosecution and defense counsel are included as part of the drug court team. The public defender and state's attorney relax their normally adversarial roles in the interest of supporting the needs of participants. Key stakeholders reported that these team members seldom have disagreements about participants and, if they do, will generally resolve these matters before going to court. An observation of a team meeting indicated that team members interact respectfully and rely on the expertise of one another. However, interviews with stakeholders indicated that necessary training for counsel was not complete.

Recommendations

- It is important that all team members receive training appropriate to their role in the program and that they understand the mission and general drug court process, regardless of their level of experience in the judicial system as a whole.

Key Component #3: Eligible participants are identified early and promptly placed in the drug court program.

Research Question: Are the eligibility requirements being implemented successfully? Is the original target population being served?

Juvenile Strategy #3: Clearly defined target population and eligibility criteria

- Define a target population and eligibility criteria that are aligned with the program's goal and objectives.

National Research

Carey, Finigan, and Pukstas, 2008, found that courts that accepted pre-plea offenders and included misdemeanors as well as felonies had both lower investment and outcome

⁵Investment costs are the resources that each agency and the program overall spend to run the drug court, including program and affiliated agency staff time, costs to pay for drug testing, etc.

costs. Courts that accepted non-drug-related charges also had lower outcome costs, though their investment costs were higher.

Local Process

The SCJDC relies on the DJS Case Management Specialists to provide program referrals. Once a youth's case has been brought to the attention of DJS, the case management specialists has the option of resolving the issue at intake, putting the youth on informal supervision or referring the youth directly to drug court. Individuals who are put on informal supervision can be referred to drug court if they are non-compliant with supervision requirements. Prospective participants must have a parent/guardian who is willing to support them in the program in order to be eligible. As a post-plea program, the referral to entry process time can take anywhere from 1 week to 2 months.

The team has identified its target population as youth, 12 to 18 years of age, who have legal involvement and are in need of treatment for substance abuse. The treatment provider and state's attorney make an eligibility determination based on requirements which are clearly set forth in the *Somerset County Juvenile Drug Court Program Handbook*. In addition, the team has set a goal of reserving 50% of the program openings for African American youth. This goal is based on research done by the drug court team and is in proportion to the demographic characteristics of Somerset County's detained juveniles with drug-related charges.

Recommendations

- The program should consider accepting youth who do not have a parent/guardian willing to participate but who do fit all of the other eligibility requirements. While family involvement is ideal, youths who do not have an involved authority figure may benefit most from the

program's structure and oversight. Additionally, serving this group of youthful offenders would help to increase the program's capacity numbers.

- Drug court research has found that a referral to entry time of 20 days or less is optimal in terms of investment and outcome costs (Carey, Finigan, & Pukstas, 2008). Most SCJDC referrals fall within that elapsed time period. However, because it does take longer to get some youth into the program, the team may want to explore with DJS and judicial staff where efficiencies can be built into the process (from violation to entry into drug court). Conducting an in-depth review and analysis of case flow can identify bottlenecks or structural barriers, and points in the process where potential adjustments to procedures could facilitate quicker placement into the drug court program.
- The team should identify barriers to recruiting more African American youth into the program. It is important that team members are current with cultural responsiveness training. Recruiting staff or volunteers that are African American may help the team achieve its goals in this area.

Key Component #4: Drug courts provide access to a continuum of alcohol, drug, and other related treatment and rehabilitation service.

Research Question: Are diverse specialized treatment services available?

Juvenile Strategy #7: Comprehensive treatment planning

- Tailor interventions to the complex and varied needs of youth and their families.

Juvenile Strategy #8: Developmentally appropriate services

- Tailor treatment to the developmental needs of adolescents.

Juvenile Strategy #9: Gender-appropriate services

- Design treatment to address the unique needs of each gender.

Juvenile Strategy #10: Cultural competence

- Create policies and procedures that are responsive to cultural differences, and train personnel to be culturally competent.

Juvenile Strategy #11: Focus on strengths

- Maintain a focus on the strengths of youth and their families during program planning and in every interaction between the court and those it serves.

Juvenile Strategy #12: Family engagement

- Recognize and engage the family as a valued partner in all components of the program.

Juvenile Strategy #13: Educational linkages

- Coordinate with the school system to ensure that each participant enrolls in and attends an educational program that is appropriate to his or her needs.

National Research

Programs that have requirements around the frequency of group and individual treatment sessions (e.g., group sessions 3 times per week and individual sessions 1 time per week) have lower investment costs (Carey et al., 2005) and substantially higher graduation rates and improved outcome costs (Carey, Finigan, & Pukstas, 2008). Clear requirements of this type may make compliance with program goals easier for program participants and also may make it easier

for program staff to determine if participants have been compliant. They also ensure that participants are receiving the optimal dosage of treatment determined by the program as being associated with future success.

Clients who participate in group treatment sessions two or three times per week have better outcomes (Carey et al., 2005). Programs that require more than three treatment sessions per week may create a hardship for clients, and may lead to clients having difficulty meeting program requirements. Conversely, it appears that one or fewer sessions per week is too little service to demonstrate positive outcomes. Individual treatment sessions, used as needed, can augment group sessions and may contribute to better outcomes, even if the total number of treatment sessions in a given week exceeds three.

The American University National Drug Court Survey (Cooper, 2000) shows that most drug courts have a single provider. NPC, in a study of drug courts in California (Carey et al., 2005), found that having a single provider or an agency that oversees all the providers is correlated with more positive participant outcomes, including lower recidivism and lower costs at follow-up.

Discharge and transitional services planning is a core element of substance abuse treatment (SAMHSA/CSAT, 1994). According to Lurigio (2000), “The longer drug-abusing offenders remain in treatment and the greater the continuity of care following treatment, the greater their chance for success.”

Local Process

The treatment provider for SCJDC is the Somerset County Department of Health, Behavioral Health Services. The current therapist conducts group and individual counseling sessions with all drug court participants and has been with the team for 2 years.

Participants of the SCJDC are required to attend treatment sessions 2 times each week in the first and second phases of the program. After they have completed the second phase, participating youth must attend individual therapy at least once every 2 weeks. They are also required to attend group therapy once every 2 weeks. Treatment modalities are geared specifically toward youth and include the Hazelden Recovery Plan for adolescents. The treatment program is completed during the third phase. However, if a participant who has completed treatment has a positive drug test result, s/he will have to re-enter treatment. There is currently no relapse prevention curriculum or transition planning offered to drug court participants.

Drug court youth are clinically assessed throughout the program, with the goal of providing individualized treatment support on an ongoing basis. Parents/guardians are made aware of the degree of their child's substance abuse problem and may be asked to submit to a substance abuse assessment themselves. Family counseling for substance abuse is offered by the health department, but is not a program requirement.

Youth may be referred to anger management classes based on assessment results. Parenting and mental health referrals are made to outside community agencies when needed. Participants must also attend Moral Reconnection Therapy (MRT) and Victim Awareness, taught by the Department of Juvenile Services.

The learning support specialist has been a drug court team member since Spring 2007 and is integrated into the team effectively as a program liaison to the education community. Requirements of the program include school attendance and/or GED course participation and/or employment. One of the program's objectives includes improving high school graduation rates so that 75% of drug court participants graduate. Interviews with

participants and parents/guardians alike, indicated that school attendance and performance had improved since being in the SCJDC program. Parents/guardians also appreciated the inclusion of an education representative on the drug court team.

In order to address transportation challenges that were identified in the pre-evaluation, the program now offers transportation tokens to parents/guardians and the drug court coordinator has given some participating youth rides to and from school.

Recommendations

- A clear aftercare plan that offers support to participants as they transition back into the community should be implemented by the drug court team, including linkages to family and community supports. Each youth should have a supportive adult (family member when feasible) in her/his life and should be involved in safe recreational activities, have an educational/vocational plan, and receive other kinds of support to help them to remain drug-free.
- Because one of the program's goals is to serve a multicultural population, staff would benefit from participating in cultural competency training, and policies and practices should be reviewed to ensure that youth from all types of groups (e.g., racial/ethnic, gender, and age) are being appropriately served by the program.

Key Component #5: Abstinence is monitored by frequent alcohol and other drug testing.

Research Question: How well does this court's drug testing model conform to best practices? (i.e., frequent, comprehensive, random, and observed tests)?

Juvenile Strategy #14: Drug Testing

- Design drug testing to be frequent, random, and observed. Document testing policies and procedures should be in writing.

National Research

Research on drug courts in California (Carey et al., 2005) found that drug testing that occurs randomly, at least three times per week, is the most effective model. If testing occurs frequently (that is, three times per week or more), the random component becomes less important.

Programs that tested more frequently than three times per week did not have any better or worse outcomes than those that tested three times per week. Less frequent testing resulted in less positive outcomes. It is still unclear whether the important component of this process is taking the urine sample (having clients know they may or will be tested) or actually conducting the test, as some programs take multiple urine samples and then select only some of the samples to test. Further research will help answer this question.

Results from the American University National Drug Court Survey (Cooper, 2000) show that the number of urinalyses (UAs) given by the large majority of drug courts nationally during the first two phases is two to three per week.

Local Process

The number of urinalyses administered in the SCJDC is slightly less than the national drug court average. Drug tests are performed by the treatment provider twice weekly, while the youth is in treatment. Once s/he has completed treatment, drug tests are conducted by DJS on a random basis. All drug tests are observed. The treatment provider administers one to two UAs per week in the first two phases of the program and, typically, the case management specialist adminis-

ters one UA per week in the third and fourth phases. Drugs tested for by the treatment provider include cocaine, amphetamines, opiates, benzodiazepines, PCP, THC and alcohol. The case management specialist conducts drug tests for THC, amphetamines, cocaine and heroin.

Recommendations

- The case management specialists should implement full spectrum testing (including alcohol) to maintain integrity of the testing process and to discourage participants from changing drugs of choice to avoid detection. The team should consider testing for alcohol with a breathalyzer, which would detect alcohol use more effectively than urinalyses.
- The treatment provider should consider sending only positive results to the laboratory for confirmation as this practice would allow for a quicker response to participant behavior as well as reduce costs.
- Because many drugs stay in the system less than 3 days, the program should implement more frequent random drug testing, especially in the first two phases so that participants do not feel they can avoid detection.

Key Component #6: A coordinated strategy governs drug court responses to participants' compliance.

Research Question: Does this court work together as a team to determine sanctions and rewards? Are there standard or specific sanctions and rewards for particular behaviors? Is there a written policy on how sanctions and rewards work? How does this drug court's sanctions and rewards compare to what other drug courts are doing nationally?

Juvenile Strategy #15: Goal-oriented incentives and sanctions

- Respond to compliance and noncompliance with incentives and sanctions that are designed to reinforce or modify the behavior of youth and their families.

National Research

Nationally, experience shows that the drug court judge generally makes the final decision regarding sanctions or rewards, based on input from the drug court team. All drug courts surveyed in the American University study confirmed they had established guidelines for their sanctions and rewards policies, and nearly two-thirds (64%) reported that their guidelines were written (Cooper, 2000).

Carey, Finigan, and Pukstas, 2008, found that for a program to have positive outcomes, it is not necessary for the judge to be the sole person who provides sanctions. However, when the judge is the sole provider of sanctions, it may mean that participants are better able to predict when those sanctions might occur, which might be less stressful. Allowing team members to dispense sanctions makes it more likely that sanctions occur in a timely manner, more immediately after the non-compliant behavior. Immediacy of sanctions is related to improved graduation rates.

Local Process

Previously, drug court hearings were held one day after the pre-hearing team meetings. As of June 2008, these meetings are now held on the same day as the drug court session. During these meetings, team members discuss and generally agree upon responses to participant behavior. Ultimately, it is the master who has the final say, but he is usually in agreement with the team's decision. All team members agreed that only the master imposes sanctions. However, the DJS Electronic Monitor Supervisor may detain youth

who are non-compliant with electronic monitoring requirements. SCJDC has clearly stated guidelines on what constitutes compliant and non-compliant behavior. Information related to incentives, rewards, and sanctions is included in the *SCJDC Program Handbook* and *Participant Handbook*. Team members reported that sanctions and rewards were handed out in a consistent manner, and that consideration is given to what response would be most appropriate for each individual participant.

Recommendations

- The team should analyze program data regarding sanctions and rewards in order to confirm that rewards are handed out more often, compared to sanctions, in all program phases. Most team members felt that this was indeed the case (i.e., that rewards were handed out more often). However, if it is discovered that sanctions are handed down more often, the team should consider additional ways that the court could positively recognize compliant behavior.
- Prior evaluation research has found that when only the judge/master can impose sanctions in a program, participant anxiety is reduced and participants have a clearer sense of what to expect from the program (in terms of responses to their behavior). While this has not happened often, the team may want to consider how having an electronic monitoring supervisor (who is not on the team) provide consequences impacts the behavior-response process that the team has in place. Regarding this process, the team should ensure that an adequate communication structure is in place (between the court and electronic monitoring supervisor) so that the team receives immediate information about any sanctions that are given out by this individual.

Key Component #7: Ongoing judicial interaction with each drug court participant is essential.

Research Question: How often do this court's participants have contact with the judge/master? What is the judge/master's role in this program? Does this court impose a fixed term on the judge/master?

Juvenile Strategy #4: Judicial involvement and supervision

- Schedule frequent judicial reviews and be sensitive to the effect that court proceedings can have on youth and their families.

National Research

From its national data, the American University Drug Court Survey (Cooper, 2000) reported that most drug court programs require weekly contact with the judge in Phase I, contact every 2 weeks in Phase II, and monthly contact in Phase III. The frequency of contact decreases for each advancement in phase. Although most drug courts follow the above model, a substantial percentage reports less court contact.

Further, research in California and Oregon (Carey et al., 2005; Carey & Finigan, 2003) demonstrated that participants have the most positive outcomes if they attend at least one court session every 2 to 3 weeks in the first phase of their involvement in the program. In addition, programs where judges participated in drug court voluntarily and remained with the program at least 2 years had the most positive participant outcomes. It is recommended that drug courts not impose fixed terms on judges, as experience and longevity are correlated with cost savings (Carey et al., 2005; Finigan, Carey, & Cox, 2007). Praise and approval from the judge were named by drug court participants as motivating factors (Rempel & Cisner, 2005), and personal attention from the judge during sta-

tus hearings was rated as the most important influence of drug court, according to authors at NIJ (2006).

Local Process

Participants in Phase I attend drug court hearings every 2 weeks. After completion of Phase I, participants are required to attend drug court hearings monthly until they graduate. Hearings are held on Wednesday mornings and last approximately one hour.

The current SCJDC master has been with the program since implementation and does not have a fixed term. He was previously employed by the State's Attorney's Office working specifically on juvenile cases. His past experience working with youthful offenders has given him valuable insight into this group, and has been useful to him in his role as the drug court master. He was characterized by key stakeholders as "very supportive of the kids," and it was pointed out that he emphasizes honesty above all else when addressing participants. Similarly, focus group respondents indicated that the master was fair and tended to give participants a number of "chances."

Recommendations

- If feasible, drug court hearings should be arranged around school hours so that students are not missing any class time. This scheduling will also serve to underscore the importance of education as demonstrated by the program.
- If drug court hearings are held outside of school hours, the program should consider having participants attend the entire hearing to build support among participants and so that learning takes place by observing what happens with other participants (both those doing well and those not meeting program requirements/expectations); leaving early can be offered as an incentive to partici-

pant(s) who are doing exceedingly well in the program.

Key Component #8: Monitoring and evaluation measure the achievement of program goals and gauge effectiveness.

Research Question: Is evaluation and monitoring integral to the program?

Juvenile Strategy #5: Monitoring and evaluation

- Establish a system for program monitoring and evaluation to maintain quality of service, assess program impact, and contribute to the knowledge in the field.

Juvenile Strategy #16: Confidentiality

- Establish a confidentiality policy and procedures that guard the privacy of the youth while allowing the drug court team [and evaluators] to access key information.

National Research

Carey, Finigan, and Pukstas, 2008, found that programs with evaluation processes in place had better outcomes. Four types of evaluation processes were found to save the program money with a positive effect on outcome costs: 1) maintaining paper records that are critical to an evaluation, 2) regular reporting of program statistics led to modification of drug court operations, 3) results of program evaluations have led to modification to drug court operations, and 4) drug court has participated in more than one evaluation by an independent evaluator. Graduation rates were associated with some of the evaluation processes used. The second and third processes were associated with higher graduation rates, while the first process listed was associated with lower graduation rates.

Local Process

The SCJDC currently records participant progress manually (i.e., in hard copy form).

Information is kept in individual files and program data are compiled manually by referring back to these files. The team has used program data to adjust program capacity goals as well as eligibility criteria related to participants' age. The health department tracks information using the State of Maryland Automated Record Tracking (SMART) system.

Participants and their parents/guardians are informed of their rights to privacy before entering the drug court program. Information sharing is allowed only after both the parent/guardian and participant have signed the proper release of information forms.

Recommendations

- As enrollment grows, the drug court should implement the SMART database system in order to more efficiently track information on program participants, including their progress through the program and their use of services. The program should also ensure the data management system is available and accessible to all team members. Be sure to retain data from the current system following a transition to SMART for use in future outcome evaluation.
- Drug court staff members are encouraged to discuss the findings from this process evaluation as a team, to identify areas of potential program adjustment and improvement.

Key Component #9: Continuing interdisciplinary education promotes effective drug court planning, implementation, and operations.

Research Question: Is this program continuing to advance its training and knowledge?

National Research

The Carey, Finigan, and Pukstas, 2008, study found that drug court programs requir-

ing: all new hires to complete formal training or orientation; team members to receive training in preparation for implementation; and all drug court team members be provided with training were associated with positive outcomes costs and higher graduation rates.

It is important that all partner agency representatives understand the key components and best practices of drug courts, and that they are knowledgeable about adolescent development, behavior change, substance abuse, mental health issues and risk and protective factors related to delinquency.

Local Process

Most of the drug court team attended the federal implementation trainings prior to the program's implementation. Newer members have received Drug Court 101 training sponsored by the Maryland Office of Problem-Solving Courts. The coordinator also reports that the program handbooks are reviewed with each new team member. Several members attended SMART training; however, only the health department is currently using the system. The team has not received cultural responsiveness training aside from what was offered in the implementation trainings and at least one member of the drug court team had not received any formal drug court training.

Recommendations

- Ensure that, in addition to information about drug courts, all team members receive training specific to their role within the program, and that they understand the difference in philosophy between drug courts and traditional court processing. Also, continue to invest in ongoing training opportunities for all team members (as a refresher and for professional development).
- Ensure that the program handbook is in agreement with the participant handbook

and that both handbooks reflect the program's current policies (e.g. required clean time, mentors, targeted capacity, agreement of enrollment time with phase length and advisory committee).

- There was some discrepancy in stakeholders reports regarding the frequency of policy meetings. Regularly scheduled policy meetings should be attended by the entire team. These meetings could be used to update the program and participant handbooks, and to discuss program goals, training and evaluation recommendations.
- The team should update its knowledge and resources with regard to cultural awareness and responsiveness, to ensure that it is appropriately addressing the needs of its participant population. In order to ensure that services offered through the drug court are culturally specific/sensitive, staff members working directly with participants need to have experience with and understanding of the cultural characteristics (and culturally specific needs) of the populations being served. Additionally, cultural awareness training may facilitate the recruitment of a more diverse participant population.

Key Component #10: Forging partnerships among drug courts, public agencies, and community-based organizations generates local support and enhances drug court program effectiveness.

Research Question: Has this court developed effective partnerships across the community?

Juvenile Strategy #6: Community partnerships

- Build partnerships with community organizations to expand the range of opportunities available to youth and their families.

National Research

Responses to American University's National Drug Court Survey (Cooper, 2000) show that most drug courts are working closely with community groups to provide support services for their drug court participants. Examples of community resources with which drug courts are connected include self-help groups such as Alcoholics Anonymous and Narcotics Anonymous (adolescent-specific), medical providers, local education systems, employment services, faith communities, and Chambers of Commerce.

Local Process

The SCJDC team includes community partners that address treatment needs, education goals and family resources. In addition, the team has forged relationships with an outside mental health treatment provider, Goodwill employment services and the Local Management Board, which helps the

program secure financial support. Transportation challenges identified in the pre-evaluation have been addressed through team members offering transportation to participants and providing tokens to parent/guardians for public transportation. Finally, the coordinator is considering assembling an advisory board for SCJDC.

Recommendations

- After identifying additional participant need areas, the team should continue to identify new community partners, connections, or resources that would be interested in supporting the program, and strengthen relationships/ties with existing agency partners. Some examples of potential partners include faith based organizations, local businesses and recreational organizations/clubs. The coordinator's plan to assemble an advisory board to discuss community outreach is also encouraged.

SOMERSET COUNTY JUVENILE DRUG COURT: A SYSTEMS FRAMEWORK FOR PROGRAM IMPROVEMENT

Drug courts are complex programs designed to deal with some of the most challenging problems that communities face. Drug courts bring together multiple—traditionally adversarial—roles, and stakeholders from different systems with different training, professional language, and approaches. They take on groups of individuals that frequently have serious substance abuse treatment needs.

The challenges and strengths found in the SCJDC can be categorized into community, agency, and program-level issues. By addressing issues at the appropriate level, change is more likely to occur and be sustained. In this section of the report, we provide an analytic framework for the recommendations in the prior section.

Community Level

Individuals with substance abuse issues who are also involved in the juvenile justice system must be seen within an ecological context; that is, within the environment that has contributed to their unhealthy attitudes and behaviors. This environment includes the neighborhoods in which they live, their family members and friends, and the formal or informal economies through which they and their families support themselves. In an effort to better address the needs of these individuals, then, it is important to understand the various social, economic and cultural factors that affect them.

Social service and juvenile justice systems are designed to respond to community needs. To be most effective, it is important that these systems clearly understand the components and scope of those needs. System partners must analyze and agree on the specific problems to be solved, as well as

what the contributing factors are, who is most affected, and what strategies are likely to be most successful when addressing the problem. A formal/informal needs analysis can help to define what programs and services should look like, who the stakeholders are, and what role each will play.

SUMMARY OF COMMUNITY-LEVEL RECOMMENDATIONS

The team is encouraged to continually seek out new community partners to support the program and address participant needs. An advisory board can help in identifying creative ways to network with potential partners in the context of the county's limited resources. Likewise, increased involvement from local law enforcement in the program may offer another avenue to create links to community resources and youth programs. The drug court should also strive to meet its goal for increasing African American youth enrollment by examining its current referral process and identifying where youth from this group may be falling through the cracks (or are not being identified/referred).

Agency Level

Once community and participant needs are clearly defined and the stakeholders identified, the next step is to organize and apply resources to meet the needs. No social service agency or system can solve complicated community problems alone. Social issues—compounded by community-level factors, such as unemployment, poverty, substance abuse, and limited education—can only be effectively addressed by agencies working together to solve problems holistically. Each agency has resources of staff time and expertise to contribute. At this level, partner

agencies must come together in a common understanding of each other's roles and contributions. They must each make a commitment to their common goals.

This level of analysis is a place to be strategic, engage partners and advocates, leverage resources, establish communication systems (both with each other and with external stakeholders, including funders), and create review and feedback loop systems for program monitoring and quality improvement activities. Discussions at this level can solidify a process for establishing workable structures for programs and services, as well as identify key individuals who will have ongoing relationships with the program and with other participating agencies and key stakeholders.

SUMMARY OF AGENCY-LEVEL RECOMMENDATIONS

Drug court training is necessary for all agency representatives involved in the drug court program and training updates should be provided regularly to ensure that the team is prepared with the latest tools so that it can run the most effective program. A mandatory aftercare program that offers support to participants as they transition back into the community will help to ensure that youth continue their progress in the absence of program structure. Because alcohol is one of the most commonly used substances among participants, the case management specialists should implement a full spectrum drug test that includes the assessment of alcohol. For more efficient drug testing, the treatment provider should consider using instant drug tests, sending only positive results to the laboratory.

Program Level

Once a common understanding of need exists and partner agencies and associated resources are at the table, programs and services can be developed or adjusted as needed to ensure that the program is meeting the identified needs and utilizing public funds as efficiently and effectively as possible. Program policies and procedures should be reviewed to ensure that they create a set of daily operations that works best for the community.

SUMMARY OF PROGRAM-LEVEL RECOMMENDATIONS

Youth who do not have a parent/guardian willing to support them in the program should still be offered the opportunity to participate, as participation will allow them to experience the structure and benefits offered by the SCJDC program. The importance of education should be conveyed to participants by the program holding drug court hearings outside of school hours. Considering the small number of active participants, youth should be required to attend the whole hearing, in an effort to foster group support and provide an opportunity for peer modeling to occur. Leaving hearings early could be offered as a reward on occasion.

The program is encouraged to transition to the SMART database system to make tracking and analysis easier, especially as the drug court program grows. Ongoing training/education in cultural competency issues may help the program better address its recruitment goals regarding African American youth. Policy meetings should be held quarterly so that the team can have dedicated time for dealing with larger program issues.

SUMMARY AND CONCLUSIONS

The Somerset County Juvenile Drug Court seems to possess a thorough understanding of the 10 key components and 16 juvenile strategies and has been successful at implementing their drug court program.

Some particular findings (also included in the 10 key components summary) are:

Unique and/or Promising Practices:

- Longstanding involvement by a master who is appreciated by team members
- Analysis of program statistics leading to adjustment of policies/procedures
- Family service coordinator on the team who serves as a link to resources in the community
- Individualized sanctions and rewards
- Transportation challenges resolved with public transportation tokens and individual team member efforts
- Well integrated team that has seen little personnel turnover

Policy changes implemented by the drug court team:

- Pre-hearing meeting times changed to occur immediately prior to court hearings
- Eligible age range extended to include 12, 13 and 18 year olds
- Capacity goal changed from 15 to 10 participants

Areas that could benefit from more attention:

- Lack of mandatory aftercare treatment
- Barriers to reaching program capacity goal of 10 participants
- Creative uses of incentives early in program
- Barriers to meeting goal of enrolling African American participants to fill 50% of the program openings
- Accepting youth who do not have a willing parent/guardian

REFERENCES

- Carey, S. M., & Finigan, M. W. (2003). A detailed cost analysis in a mature drug court setting: Cost-benefit evaluation of the Multnomah County Drug Court. *Journal of Contemporary Criminal Justice*, 20(3), 292-338.
- Carey, S. M., Finigan, M. W., & Pukstas, K. (2008). *Adult drug courts: Variations in practice, outcomes and costs in eighteen programs in four states*. Submitted to the U. S. Department of Justice, National Institute of Justice, May 2007. NIJ Contract 2005M114.
- Carey, S. M., Finigan, M. W., Waller, M. S., Lucas, L. M., & Crumpton, D. (2005). *California drug courts: A methodology for determining costs and benefits, Phase II: Testing the methodology, final report*. Submitted to the California Administrative Office of the Courts, November 2004. Submitted to the USDOJ Bureau of Justice Assistance in May 2005.
- Cooper, C. (2000). *2000 drug court survey report: Program operations, services and participant perspectives*. Retrieved from <http://spa.american.edu/justice/publications/execsum.pdf>
- Crumpton, D., Brekhus, J., Weller, J. M., & Finigan, M. W. (2004a). *Cost analysis of Anne Arundel County, Maryland Drug Treatment Court*. Report to the State of Maryland Judiciary, Administrative Office of the Courts and Baltimore Substance Abuse Systems, Inc.
- Crumpton, D., Brekhus, J., Weller, J. M., & Finigan, M. W. (2004b). *Cost analysis of Baltimore City, Maryland Drug Treatment Court*. Report to the State of Maryland Judiciary, Administrative Office of the Courts and Baltimore Substance Abuse Systems, Inc.
- Finigan, M. W., Carey, S. M., & Cox, A. A. (2007). *The impact of a mature drug court over 10 years of operation: Recidivism and costs*. Submitted to the U. S. Department of Justice, National Institute of Justice, December 2006. NIJ Contract 2005M073.
- Government Accountability Office (2005). *Adult drug courts: Evidence indicates recidivism reductions and mixed results for other outcomes*. Retrieved 2006 from <http://www.gao.gov/new.items/d05219.pdf>
- Longshore, D. L., Turner, S., Wenzel, S. L., Morral, A. R., Harrell, A., McBride, D., Deschenes, E., & Iguchi, M. Y. (2001). Drug courts: A conceptual framework. *Journal of Drug Issues*, 31(1), Winter 2001, 7-26.
- Lurigio, A. J. (2000). Drug treatment availability and effectiveness. Studies of the general and criminal justice populations. *Criminal Justice and Behavior*, 27(4), 495-528.
- National Association of Drug Court Professionals (2007). *Drug Courts Today*. Retrieved 2008 from <http://www.nadcp.org/whatis/drugctstoday.html>
- National Association of Drug Court Professionals Drug Court Standards Committee (1997). *Defining drug courts: The key components*. U.S. Department of Justice, Office of Justice Programs, Drug Court Programs Office.
- Rempel, M., & Cissner, A. (2005). *The State of Drug Court Research: Moving Beyond 'Do They Work?'* New York: Center for Court Innovation.
- SAMHSA/CSAT Treatment Improvement Protocols (1994). TIP 8: Intensive outpatient treatment for alcohol and other drug abuse. Retrieved October 23, 2006, from <http://www.ncbi.nlm.nih.gov/books/bv.fcgi?rid=hstat5.section.28752>

**APPENDIX A: DRUG COURT TYPOLOGY
INTERVIEW GUIDE TOPICS**

Drug Court Typology Interview Guide Topics

The topic/subject areas in the Typology Interview Guide were chosen from three main sources: the evaluation team's extensive experience with drug courts, the American University Drug Court Survey, and a paper by Longshore et al. (2001), which lays out a conceptual framework for drug courts. The typology interview covers a number of areas—including specific drug court characteristics, structural components, processes, and organizational characteristics—that contribute to a more comprehensive understanding of the drug court being evaluated. Topics in the Typology Interview Guide also include questions related to eligibility guidelines, specific drug court program processes (e.g., phases, treatment providers, urinalyses, fee structure, rewards/sanctions), graduation, aftercare, termination, non-drug court processes (e.g., regular probation), identification of drug court team members and their roles, and a description of drug court participants (e.g., general demographics, drugs of use).

Although the typology guide is modified slightly to fit the context, process and type of each drug court (e.g., juvenile courts, adult courts), a copy of the generic drug court typology guide can be found at <http://www.npcresearch.com/materials.php> (see Drug Court Materials section).

APPENDIX B: PARTICIPANT INTERVIEW RESULTS SUMMARY

Focus Group Summary

As described in the methodology section of this report, NPC conducted participant interviews in the offices of the Somerset County Juvenile Drug Court in July 2008. Participant interviews were conducted with three current program participants and two parents/guardians of current program participants. The focus groups provided current participants and their family members with an opportunity to share their experiences and perceptions regarding the drug court process.

The topics discussed during the interviews included how participants made the decision to enroll in drug court, what respondents liked about the drug court program, what they disliked, general feelings about the program, alternatives to drug court and recommendations they have for the program.

Participant Interviews

What did you like most about the Drug Court program/What worked?

- I like the fact that I have more structure now. The structure helps me stay focused and keeps me from going back to my old ways.
- Well, I am not doing drugs anymore. So it has helped me better my life. I don't get as many questions from my family any more; they are starting to trust me. That makes me feel like I have done something good.
- I like the little incentives that we get when we do what we are suppose to do. Oh, it is also good when they tell us in court that we are doing good.
- I am doing much better in school, probably the best I have done in a lot of years, that I can remember anyway.
- I really like the fact that when I finish this program I won't have a record that follows me around. You know that can affect you getting a job and everything.

What do you dislike about the Drug Court Program?

- Well, you don't like most things about it, but you deal with it because you have to. Nobody is glad to be in Drug Court. Some of us are glad we are here though and not in jail.
- I wish we did not have to come to court so much and have to go to all of those other appointments. Man, it takes a lot out of your time.
- I don't like that when we fall back to our old ways, we have to have consequences. I mean, I know there has to be some consequences but sometime, I feel like they could just talk to us more.
- I think that most of the time, everything is fair, so we just have to do what we are suppose to and then graduate.

How were you treated by the Drug Court staff and treatment providers?

- Oh, everybody is nice, real nice. They treat you like they care about you and want to help you.
- I have not had any problems with any of them.
- Mr. Jack Paul is real nice to us. He gives us good advice and he talks to my mom and gives me compliments.
- This kind of court is way better than regular court. The judge, I mean master is real encouraging and all. We get a chance to do the right thing.
- Everybody has been real nice to me and they have helped me. I don't have all of the problems that I use to have.
- The Counselors at the program are good to. They help us a lot too.

Why did you decide to participate in Drug Court?

- This was a better choice than going to a lock down or something like that.
- Now, I am glad I am in the program. I see how it has helped me. At first, I thought it was a real pain. You are watched so closely. But once, you get on track, you really don't have to worry about it.
- My family thought that it would be a good program to help me with my problems and all. I think my mom knew that I needed the structure and that it would keep me off the streets and in the house more.
- So I could stop smoking blunts and do better in school. They have really helped me stay on track and do better in school.

Are/were there any obstacles to you successfully completing the Drug Court Program?

- No. No obstacles.
- The whole program is kind of long. It is hard to go that long without slipping up. I have had a few setbacks and I guess my own setbacks have been an obstacle. If the program was shorter, I would have finished before I had a setback.
- No problems that stopped me from doing okay.

Do you have any suggestions to improve the Drug Court Program?

- Make it a shorter time for the whole program.
- The curfew should be later from the start. I would change that definitely.
- No, no suggestions. It is okay, I guess.

Did your family participate in any way in the process?

- Mr. L (Guardian) always comes to Drug Court with me. He also goes to all of my other appointments. He really encourages me to do good and stay on track. Even when I have had problems, he still is there for me.
- Yes. My mom comes to court and everything. She reminds me of the things I have to do and makes sure I go to the appointments and all.
- My mom sometimes gives suggestions on what will help me more.
- They ask Mr. L (Guardian) what he thinks on how I am doing at home. They sometimes ask this in court. He tells them too.

*What educational support and linkages in the community have been provided.
How had Drug Court helped you with school?*

- Somebody from school is in court and tells them if we are doing good. Oh, they also tell them if we missed any days and stuff like that. Because you know that, it helps keep you motivated to go to school and try to pass. I can say, I am doing way better in school since I have been in this program.
- Yes, since I have been in drug Court, I am doing better in school.
- I am not crazy about school, but my grades are much better now and I passed.

What is the Drug Court session like?

- It is okay. Like I said before, everybody is nice and the judge (master) is kind of nice too. They just want you to do better and get ourselves together.
- I don't have no problem with coming to court. I just wish I did not have to come so much. Everybody is fair and nice.
- Court is ok, I don't have no problems with it.

What is the hardest part of Drug Court?

- I told you for me, it is too long and I feel that I will never get out. Sometimes that can be discouraging.
- Sometimes when my friends are out hanging out, and I have to be inside at home, that is hard for me. But now I know, that has helped me.
- It is not that hard if you do what you are suppose to do.

What are your own individual goals in the program?

- I want to stay on track now, with no setbacks. That way I can hurry up and get out. Then I want to graduate from school and get a job.
- Graduate from the program and keep going to school.
- I want to hurry up and graduate from the program and finish school too.

Parent/Guardian Interviews

What are your responsibilities related to drug court and how were you made aware of these responsibilities? What does the court ask of you as the parent/guardian?

- My part in this is to get him here to court and to make sure he is at all of the other meetings and things he has to go to. I also help to keep him encouraged. When we go to court, if he is asked to do something or I need to follow-up on something, I do that too.
- To encourage him and let him know that he can lead a drug free life. I have watched him grow and progress. I bring him to court and speak in court on his behalf at times. Sometimes in court, I have to verify something that he is reporting. I make sure he gets to all of his appointments and try to make sure he follows the program rules.

What do you feel are the main goals Drug Court Program? What is the purpose of the Drug Court?

- My view is that the program is here to help the children. First to get them to be clean and sober and then to teach them the consequences of using drugs and living the lifestyle that goes with it. I also feel the program has a lot of structure so it gives the kids the structure that they need. I can also see the role it plays with school; it helps keep them on track there too. It is good that they have somebody from the Education Department come to court. That way, we can stay on top of things at all times. Usually, we have to wait for report cards to find out there has been a problem. This way, if your child has missed school or has dropping grades, you know right away.

- To help each child get going down the right road and stop the drugs and alcohol. The Drug Court has a group of people from various agencies that can help your child with their various problems. It is like a group approach to help them.
- Yea, I meant to add that the structure that the program provides for the kids is really good for them.

How is your child different now compared to when he/she first started the program?

- He is more focused and willing to do things that are good for him. Like, go to school. His grades and attendance are much better now that before.
- He has made so much progress. He is so different and it is all for the better. He seems to think with a clearer head and is making better decisions on his own.
- I am glad to say that he is drug free and does not seem to have much interest in that lifestyle anymore. Now it is hard to say, if that will change when he gets out of Drug Court.
- Just doing better, all the way around. Friend choices, school, no drugs, more respectful and follows directions. He seems to be learning a lot.

What does Drug Court (staff) do that you feel is most helpful for your child? What is the best part of Drug Court?

- All of the staff seems to have an interest in my child. Jack Paul pulls everything together and makes sure that we stay aware of everything. The Counselors are good too, he really likes them. It is good that the kids seem to develop some bond with the Drug Court staff.
- I can't say enough good things about them. Everyone is very helpful and seems dedicated to these kids. No one likes to see the kids slip up, but they are very supportive.
- I think they are really good at complimenting the kids during court. They need to have their progress recognized and the whole group is good at that. Especially Jack Paul.
- I feel that the master is really fair. The kids are really given chances to turn it around. Also, they are not talked down to. This keeps them motivated at times then they need it.

What is the worst part of the Drug Court Program?

- There is really no worst part. It is helping my child. I don't have anything bad to say about it.
- I think that this has been okay. Everyone is working on behalf of the kids.

What could the program (staff) do that would help you and your family better support your child? What would you change?

- The only thing I can think of is that Somerset County is a small county and we don't have a lot of resources. I wish there were more job training programs and stuff like that. That would help some of these kids. Not just the ones in Drug Court, but the ones that have not been caught yet.
- I can't think of anything.

What do you remember about what was presented to you about the program prior to accepting admission to the program?

- The Coordinator, Jack Paul, told us all about the Drug Court. He explained how it would work and what happened in the different phases. He told us about all of the different parts like Counseling, Drug Test, Curfew and all. He told us how it would benefit for his drug history and school. Yea, it was a thorough description at the beginning.
- The requirements of the program were explained to me. The Coordinator also told us about the sanctions and incentives. I was told about the urine test and the treatment part. I knew it was going to be rigorous with the court appointments and all. There have not been any surprises at all. It is just like it was explained.

Were you made aware of your other non-Drug Court options before they made the decision to go into the Drug Court Program?

- Yes, The Coordinator and the lawyer let us know about our choices.
- Yes, the Coordinator told us.

Were you surprised by any program rules/requirements which (upon looking back) were not presented as a part of the pre-entry discussion?

- No not at all. Like I said, it has gone just like we were told it would. To include, the sanctions with his little set backs. But he has also gotten verbal strokes and rewards for doing well and making it this far.
- No. None at all.