SUCCESS IN DRUG COURT: THE OFFENDERS' PERSPECTIVE

Clete Snell Dr.
University of Houston - Downtown, snellc@uhd.edu
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Acknowledgements
The author would like to acknowledge the staff and participants of the Harris County STAR Drug Court for their cooperation with this study. The author would also like to acknowledge the helpful reviews from a previous version of this article.
Introduction

Although much research has been conducted concerning the effectiveness of drug courts, no studies have examined the impact of these programs from the perspective of the participants. Therefore, an exploratory study has been conducted among drug court participants, with a focus on identifying factors leading to success in the program. Prior research on drug court effectiveness is reviewed, followed by a description of the Harris County STAR (Success Through Addiction Recovery) Drug Court. The Methods section describes the sources of the data. Qualitative data were collected through a series of focus groups, and the results seem to suggest that the drug court program successfully interrupted years of addiction and contacts with the criminal justice system for many participants. Criminal history data confirmed that participants with longer and more extensive criminal histories were more likely to graduate from the program and less likely to be re-arrested for drug and nondrug charges than were many participants with shorter criminal histories and fewer prior charges. These results have important implications for drug courts and other treatment programs.

The Effectiveness of Drug Courts

Since the pioneering approach originally developed in Miami Dade County in 1989, the drug court movement has grown to include more than 2800 adult, juvenile, and hybrid versions (National Institute of Justice, 2015). However, the growth of a program does not mean that it is successful in accomplishing its goals. Programs need to be evaluated and have external validity to other sites. According to the
National Association of Drug Court Professionals, more research has been published on the effects of adult drug courts than on those of virtually all other criminal justice programs combined (Marlowe, 2012).

Prior research indicates that drug court participants fare better than their counterparts in terms of rates of re-arrest (Goldkamp, White, & Robinson, 2002). A study by Stevens, Trace, and Bewley-Taylor (2005) cites an 83% reduction in the incarceration rate of drug court graduates in California. Nearly half of all participants found jobs, and 80% of those who were homeless found suitable housing while under the supervision of a California drug court (Deschenes, Ireland, & Kleinpeter, 2009). Research consistently finds that drug treatment retention is a strong predictor of long-term positive outcomes. Therapeutic group counseling has improved recovery outcomes—particularly counseling that focuses on social skills, assertion skills, and coping abilities. In addition, educational and vocational achievements increase the likelihood of drug court graduation.

Critics of drug courts have argued that any reduction of recidivism or relapse among drug-abusing offenders may not be greater than that achieved with conventional interventions, such as incarceration, parole, and probation (Franco, 2010). However, the National Association of Drug Court Professionals found that 75% of drug court graduates remained arrest-free 2 years after graduation (Langan & Cuniff, 1992). A 2005 U.S. Government Accountability Office (GAO) study used meta-analytical techniques to assess whether drug courts were effective at reducing recidivism and substance abuse relapse among drug offenders. Overall, the GAO assessment found that drug court programs lead to statistically significant reductions
in recidivism among participants for felony offenses and drug offenses (both misdemeanors and felonies) (U.S. Government Accountability Office, 2005). Reductions in recidivism were greater and more enduring among participants than among comparison groups. The GAO study found that post-program reductions in recidivism continued to be greater for drug court participants than for comparison groups, and that these reductions endured even after the participants had successfully completed a drug court program. And finally, post-program rates of recidivism were lower among program graduates than among dropouts (Franco, 2010).

Five different meta-analyses of drug court programs have found reductions in crime rates ranging from 8% to 26%, with an average reduction between 10% and 15% (Wilson, Mitchell, & MacKenzie, 2006; Latimer, Morton-Bourgon, & Chretien, 2006; Aos, Miller, & Drake, 2006; Lowencamp, Holsinger, & Latessa, 2005; Shaffer, 2006). These figures reflect averages and mask the tremendous variation in the performance of individual drug courts.

One of the primary goals of a drug court is to reduce the endless cycle of drug offender contact with the criminal justice system for drug-related offenses. A meta-analysis of 50 studies representing 55 evaluations suggested that drug offenders participating in a drug court are less likely to re-offend than are similar offenders sentenced to traditional correctional options (Wilson et al., 2006).

Another study examined the impact of a single drug court on the total population of drug court-eligible offenders over a 10-year period in Portland, Oregon. The drug court reduced the incidence and frequency of criminal recidivism among
participants in comparison with offenders who did not participate. When all offenders who were eligible for the drug court during the entire 10-year period were included, over the 5 years from the drug court petition hearing, the incidence of re-arrest was reduced by nearly 30%. The drug court reduced the incidence of drug crimes substantially for up to 14 years after the petition hearing. The effect was statistically significant after control for age, gender, race, and 2 years of prior criminal history (Finnigan, Carey, & Cox, 2007).

A study funded by the National Institute of Justice was designed to develop a general estimate of recidivism among a nationally representative sample of drug courts. The study found that within 1 year after graduation, 16.4% of drug court graduates had been arrested and charged with a serious offense. Within 2 years, the percentage had increased to 27.5%. In addition to estimating the probability that any drug court graduate would be re-arrested, the study estimated the number of serious offenses committed by drug court graduates. The average number of serious crimes per person in the first year after drug court graduation was 0.23, and the average number of serious crimes per person in the first 2 years after graduation was 0.50 (Roman, Townsend, & Singh Bhati, 2003).

In an effort to develop empirically grounded screening devices for drug courts, Mitchell and MacKenzie (2006) found that prior recidivism, criminal behavior before drug use, and prior drug treatment were significantly related to drug court failure. Drug courts have been thought to target first-time offenders, but these offenders are less likely to receive prison sentences, so that drug courts are less appealing to them. In many drug courts, the participants have had extensive
contacts with the criminal justice system. Miller and Shutt (2001) found that successful interventions with this group have great potential to reduce the costs associated with arrests and incarceration (Belenko, 1999).

Offenders enmeshed in drug use and drug culture especially have a negative impact on crime desistance processes. In a longitudinal study of previously institutionalized youth, drug use was found to exert unique effects on desistance processes, and social networks are particularly important in explaining the difficulty encountered in ending the offending related to drug addiction (Schroeder, Giordano, & Cernkovich, 2007). Despite the potential for drug courts to create a unique desistance process for offenders with long histories of addiction and contacts with the criminal justice system, little research has been conducted on the impact of drug courts on persistent offending, and no research has examined the offender's perspective on why the drug court process may be effective.

The Harris County Drug Court

The STAR Drug Court program is composed of four post-plea dockets, and all participants are placed on deferred adjudication. The target population of STAR consists of drug-dependent felony offenders. STAR does not accept referrals with prior convictions or current charges involving violent crimes, sex offenses, or the manufacture or distribution of drugs.

Once accepted into one of the STAR dockets, a client participates in a minimum 52-week treatment program. The treatment providers are nonprofit and for-profit agencies licensed by the state of Texas to provide substance abuse treatment.
STAR contracts with thirteen providers, including two gender-specific residential facilities and three outpatient facilities. The treatment providers use an integrated cognitive behavioral change approach, which assumes that social learning processes play an important role in the development and continuation of substance abuse and dependence. Additionally, the program addresses other issues that have been barriers to long-term sobriety by offering medical and mental health care, educational/vocational training, anger management, transportation, and housing.

STAR is a three-phase program. Each phase requires the successful completion of a variety of activities. The entire program lasts a minimum of 12 months. Phases can be longer in individual cases of noncompliance with the program requirements and failed drug tests. The court rewards progression through the phases; each successive phase requires less frequent attendance to assigned program meetings, urinalyses, and court dates. These rewards are built-in incentives to encourage successful progression through the program. All phases include the following: substance abuse treatment; regular court appearances with judicial interaction; innovative case management, including field visits; drug testing; and 12-step or other approved support group meetings.

Phase 1 is the orientation and treatment phase. In this rigorous initiation phase, client progress and compliance are closely monitored. Participants must submit to random drug tests, appear in court once a week, attend at least 1 hour of individual counseling per month, and attend a minimum of 12 hours of group counseling per week. Additionally, participants must attend at least two 12-step programs or pre-approved support groups per week, select a community sponsor
and a family member willing to participate in a support group, and develop a goals
and strategies plan with a case manager.

Phase 2 is the quality-of-life phase. The individualized treatment plan
developed in phase 1 is reviewed on a monthly basis in order to make any
necessary revisions to reflect ongoing reassessment of the client’s problems, needs,
and responses to treatment. Group counseling is reduced to 5 hours per week, but
participants must attend at least three 12-step programs or other support groups per
week. Court appearances are reduced to every other week. The client must continue
to submit to random drug tests. Additionally, participants update their goals and
strategies plan and attend any additional non-substance abuse treatment groups
deemed necessary by the drug court.

Phase 3 is the re-entry to the community phase. This final stage is devoted to
planning for successful re-entry into the community. Court appearances are reduced
to once a month. Random drug tests are less frequent. Participants continue to
participate in at least three 12-step programs per week, but group counseling is
reduced to 2 hours per week. Aftercare plans are discussed with treatment
providers, and participants create educational and employment goals in this phase
with the aid of general educational development (GED) preparation, participation at
local universities, and various career services. Graduation from the program is
accomplished when the client has successfully fulfilled all the terms of the program,
including successful discharge from treatment. To graduate, a client must have
remained sober for the final 6 months of the program and have attained employment
and/or educational status that supports sobriety and law-abiding behavior.
In the aftercare phase, an aftercare plan is finalized that addresses the changing needs of the client. The average duration of aftercare is between 12 and 24 months. Some treatment providers offer a free continuum of counseling and group services for at least 6 months after program completion, and some providers offer services indefinitely. Clients can also choose from among 2000 pre-approved support groups in the Houston area. Case managers arrange for ongoing peer group and alumni association development, thereby expanding the support network and links to positive peer role models available for clients.

The drug court team includes a judge, a prosecutor, a defense attorney, case managers (community supervision officers), and program administrators. The judge talks to each participant at status hearings and makes final decisions regarding the use of sanctions or incentives and phase promotion or demotion after input from other team members. The judge also promotes the program in the community. The prosecutor represents the interests of community safety. Prosecutors have a strong voice in accepting or rejecting referrals to the program. They also provide input on removal from the program for new law violations or repeated noncompliance with program requirements. The defense attorney counsels participants on their rights once in the program and advocates for their interests if they violate program rules. Defense attorneys investigate all allegations of new offenses or program violations and bring their findings back to the team. The case managers are community supervision officers. They coordinate services for clients and help develop treatment and re-entry plans. They also conduct home visits at least once a month and meet with participants regularly. Team members discuss the clients who are scheduled to
appear before the judge, evaluate their progress, and determine appropriate rewards, sanctions, or additional services needed.

Methods

Overview

An exploratory study of the factors related to successful outcomes among drug court participants was the result of observations of a Harris County STAR Drug Court process and outcomes evaluation. Focus groups of drug court participants were conducted for the purpose of obtaining participants' views on particular program characteristics and to make recommendations for program improvement. The focus groups often evolved into discussions about how involvement in the program has positively impacted participants' lives. All four focus groups included participants who described frequent prior involvement in the criminal justice system over many years. Most drug court participants had gone through substance abuse treatment programs or had been sentenced to traditional probation in the past. These prior attempts toward recovery had failed. The STAR program participants shed light on some of the unique qualities of drug courts that may be effective in interrupting years of addiction and involvement in the criminal justice system. Additional program and criminal history data were analyzed to examine whether program success, in terms of participants’ graduation from the drug court and number of new arrests while in the program or after graduation, was related to the length and frequency of involvement with the criminal justice system. Criminal history data came from the
Justice Information Management System (JIMS), maintained by the Harris County District Courts.

Study Population
As part of an overall evaluation of the Harris County STAR Drug Court, 8 years of criminal history data (2003–2011) were analyzed to examine the extent of new arrests among program participants. As part of the eligibility requirements, participants either had to have prior convictions or arrests for drug possession or drug-related offenses, or had to be first-time offenders with a documented history of drug dependency. The STAR program excluded offenders with current or previous charges for sex offenses, violent felony offenses, and drug distribution offenses. These broad eligibility requirements resulted in a large variation in criminal histories, ranging from no prior criminal history to 28 years of contact with the criminal justice system. The vast majority of STAR clients have an extensive drug use history that has led to their involvement in the criminal justice system. Approximately 71% of clients had a prior drug conviction, and 31% of clients had five or more prior drug possession arrests. Approximately 31% of clients began their primary drug use before the age of 18. About two-thirds of STAR clients (66%) stated that cocaine was their primary drug choice, and 73% admitted to daily drug use before entering STAR.

Although the study is limited by a study population located in just one county, the STAR Drug Court in Harris County comprises four dockets that include participants with a wide variety of types of drug addiction and a large range of drug
abuse histories. About 60% of the participants were female, 46% were African American, 28% were Hispanic, and 26% were Caucasian. More than half (53%) were 35 years of age or younger.

Drug Court Client Focus Groups

Focus groups were conducted with a random sample of drug court clients from each phase of the program (phase 4 consists of aftercare for program graduates). A total of 28 clients participated in the four focus group sessions. There were a total of 30 questions for each focus group. The sessions were recorded and transcribed. Some of the questions were altered according to the phase of the group, but all focus group sessions included questions concerning satisfaction with the treatment services and ancillary services provided by STAR, the quality of interactions with the STAR team, the impact of rewards and sanctions on compliance with program requirements, and recommendations to improve the program.

Program and Criminal History Data

Data for this study were obtained from Harris County District Courts administrative databases. Criminal history data were gathered from the JIMS, which maintains records of misdemeanor and felony arrests for which charges have been filed with the courts for Harris County. An important limitation of this evaluation is that arrests from jurisdictions outside Harris County are not included. The JIMS criminal history data were merged with the STAR Drug Court administrative data. This data source includes demographics, referral sources, drug use history, drug test results,
progress in the drug court (i.e., phase promotions, graduation, sanctions, rewards, and program termination), and reasons for program termination. The sample of 485 drug court participants included graduates and those terminated from the program. It did not include current participants. The sample was split into four groups based on the length of time between initial contact with the criminal justice system and the latest arrest: group 1 (0–5 years, n = 135); group 2 (6–9 years, n = 103); group 3 (10–16 years, n = 126); and group 4 (16 years or more, n = 114). In all groups, participants who had gaps between contacts with the criminal justice system of 3 years or longer were eliminated from the analysis. The purpose of this step was to ensure a better conceptual representation of continual contact with the criminal justice system. A total of seven participants were eliminated when these criteria were used. The average number of prior arrests for group 1 was 4.8. Group 2 had an average of 8.7 prior arrests, group 3 an average of 10.2 prior arrests, and group 4 an average of 13.2 prior arrests. The progression in the average number of prior arrests is an indication of continual involvement in the criminal justice system over time. The analysis addressed the following questions:

1. Is the level of involvement with the criminal justice system related to graduation from the drug court?
2. Is the level of involvement with the criminal justice system related to new drug arrests after program entry?
3. Is the level of involvement with the criminal justice system related to new nondrug arrests after program entry?
Definitions and Analysis Plan

As previously mentioned, prior involvement in the criminal justice system was measured in length of time in years between the first arrest and the arrest leading to referral to the drug court, with no gaps of 3 years or more between arrests. Traffic offenses were excluded from the analysis. Graduation was measured as a dichotomous variable (yes or no) and included all participants who successfully completed the first three phases of the STAR program. Nongraduates were participants who were terminated from the STAR program or voluntarily decided to leave. New drug crime arrests were measured as a ratio level variable and included all felony and misdemeanor arrests for drug crimes, excluding drug manufacture or distribution, that occurred after entry in the STAR program. New nondrug crime arrests were measured as a ratio level variable and included all felony and misdemeanor arrests for nondrug crimes, excluding traffic offenses, that occurred after entry in the STAR program. Question 1, concerning prior involvement in the criminal justice system, was addressed by using a cross-tabulation and chi-squared test. Questions 2 and 3, concerning new arrests, were addressed with independent samples t tests.

Results

Focus Group Results

A number of themes emerged from the focus group sessions as possible explanations for why STAR Drug Court participants were successful in their recovery from addiction and new drug-related arrests. These themes included being ready for
a change, an individualized approach to treatment, greater accountability, and rewards. Each of these themes is elaborated on in further detail.

Ready for a Change

Many participants initially chose to enter drug court because the alternative was a lengthy stay in jail or prison. Deferred adjudication of a lengthy jail or prison sentence is the carrot that initially attracts most defendants to drug court or to any other specialty court. However, drug court participants recognized that they had to be receptive to treatment.

*Phase 3 Participant 1:* “I chose STAR Court first of all because I didn’t want to go back to jail” [other participants nod in agreement]. “When I found out all that they offered, I thought well maybe this will work for me. My option was prison or drug court. I was seeking treatment anyway, but I got caught. Drug court was a blessing.”

*Phase 2 Participant 1:* “Without me knowing that I’m going to jail in the beginning without all of that stuff I would have left the rehab in a week, I wouldn’t be going to meetings, I wouldn’t be doing any of that and now I have gotten to the point where I like going to meetings and I have a lot of friends in AA. But it was the initiative to get me started.”

Many drug court participants discover that the demands of the program are much more than what they had initially thought. It is in this first phase of the program that many participants drop out of drug court and accept the initial jail or prison sentence.
Phase 1 Participant 1: “Drug court is really, really strict and in a lot of cases hard. I’m really running to get everything done. A lot of us were seeking to get help anyway. Because if it were down to prison or drug court, I would take prison … in terms of the time, I could do 2 years instead of 4 of this … uh I was looking for something different and putting me in prison was not going to help.”

It became clear that many participants were ready to make a change in their lives. Many had long histories of drug dependence and contacts with the criminal justice system. The offer of drug court became the impetus for a change that many were ready to make.

Phase 2 Participant 2: “I was tired of doing time and I wasn’t getting any help. I’m a 26-year drug addict, and I wanted to get some help for myself. I needed someone to teach me how to be responsible and accountable. I started as a child using drugs. It was a learned behavior. I was around it from the time I was young and that was all I knew.”

Phase 2 Participant 3: “My court-appointed counselor was saying it’s STAR Court and it’s treatment and I thought to myself … well what do I have to lose? I’m getting tired of … you know … living like this and I’ve tried to do it on my own … and so with the guidelines that he was able to give me about it and the things I had … I looked at it like this … well … you know, I can do 6 months, get back out and continue the same
behavior or I can do 4 years’ probation and get better structure in my life.”

Aftercare Participant 1: “I was at the end of the road. They were going to give me 25 years” [in prison]. “I had given up and uh … and STAR Court was like a godsend. I was like … I can’t believe it c’mon man, you’re gonna offer me this and I have 14 felonies and I’m a dope addict. So I guess, they chose me that’s why I love STAR Court … and I didn’t think I could do it … but they did. Imagine that.”

One of the more powerful reinforcements in drug court is peer reinforcement. The drug court process, from accepting a deferred sentence to graduation, takes place in front of other drug court participants. In many cases, drug addicts form a community on the street that is transferred into the drug court program. Peers that have been through the program talk to incoming participants about the demands of the program and the rewards that come with sobriety. Fellow participants offer credibility to the program for those entering drug courts that cannot be duplicated by the team.

Aftercare Participant 2: “When I found out all that they offered, I thought well maybe this will work for me. What also sold me was when I was in the courtroom before I signed up for it and they turned us around … we were wearing orange … and we could see the other members that were in STAR court that were wearing plain clothes and they all waved and smiled … and it was a trip. I knew they were drug addicts as hard-core as me because some of them I had known over
the years. I was saying to myself … you know man … this is wild. They were waving at me and saying join. Now I get to watch the people come in wearing orange now and I wave at them now.”

**Individualized Treatment**

When asked what services had been most helpful, some participants cited specific drug treatment centers, others mentioned housing and employment services, and several participants mentioned the structure and accountability provided by the drug court program. The STAR Drug Court contracts with 13 different treatment providers. There was no specific treatment program or approach that worked with everyone. One of the important elements of STAR is finding the right fit between the participant and treatment provider.

*Phase 1 Participant 2:* “The group counseling has been good in terms of focusing on the different issues in my life that have been in turmoil.”

*Phase 1 Participant 3:* “For me, this is the third time I have been in treatment, and I never learned anything like I learned in this treatment center” [Volunteers of America]. “It’s an incredible program” [several other participants nod their heads in agreement].

*Phase 1 Participant 4:* “I am with Pathway in Lamar, Texas. I have to give the counselors credit. Those are the best counselors I have ever dealt with. What drug court did for me afterwards was housing. Because I smoked myself under the bridge, and trying to stay sober under the bridge is almost impossible. When they sent me to Pathway … I knew about drugs but I never knew about the post-traumatic
syndrome. But … drug court helped me with housing, and once I was stable, I was able to get off the streets. So … when I do find a job I can stand on my own two feet. The next step for me is to find a job.”

*Phase 2 Participant 4:* “I went to the WHO” [Women Helping Ourselves] “and they implemented Harmony Life … which is in the prison systems … but what I got the most out of was the Living for Reliance, which basically brought in energy exercises and meditation practices as an outlet for people who are not necessarily spiritual and not necessarily religious. It’s the only thing that has kept me sober.”

One important difference between drug courts and traditional community supervision is that drug court staff members acknowledge and accept that relapses are a part of the process toward recovery. Many participants have several positive drug tests over the duration of the program. Positive drug tests for someone on traditional probation often results in revocation. Positive drug tests in drug court generally lead to sanctions, such as a weekend in jail, and a move to a different treatment provider.

*Phase 1 Participant 5:* “Yeah … the judge is tough. I’ve seen her” [the judge] “send them to jail therapy and back to treatment. She will give them several chances. You know, they don’t want us to fail.”

*Phase 2 Participant 5:* “They don’t condemn you after the first mess-up because they know you’re an addict. So … if you want it … they’re going to help you with the way the program is designed. All you have to do is be accountable for the things you have to do today, and that’s
all it’s about … and staying sober … and that’s not asking for much. I mean the dope man asks for more than that” [others laugh].

**Accountability**

Most drug court participants recognize the crucial role of random drug tests in maintaining their sobriety, especially in the first phase of the program.

*Phase 3 Participant 2:* “If I didn’t have to UA” [urinalysis] “three times a week when I first started, I don’t know if I actually would have smoked some more crack. I take it back … I would have likely smoked some more crack … to be gut-level honest. I got to the point where I was digging it … I didn’t mind if I UA’d after a few months.”

Traditional probation also requires drug testing, but drug court requires more frequent drug testing, which makes it difficult to get around. In fact, participants frequently stated there was no way to get around the drug tests. This level of accountability and supervision was critical to prevent relapses and allow the treatment programs to have an impact. It also allowed participants to recognize what their lives could become with sobriety.

*Phase 1 Participant 4:* “The way they set up the random urine analysis. You know you’re gonna have to give it and there’s no way around it.

With other types of probation you may not have to pee for months. You know that there are things you can do to get it out of your system. I have 2 weeks to get high, and then I can stop. You know that you’re
not fully committed to your sobriety. But, with STAR Drug Court you’re
gonna be sober or you’re gonna be out.”

*Phase 1 Participant 2:* “You can’t do nothing to cheat the drug tests,
and I mean nothing! They tell you and have you sign a form that if they
find drugs in your system … and they will find it in your system if it’s
there … you will be reprimanded … and you will.”

*Phase 2 Participant 3:* “We have to UA … so whether you have it in
your heart and mind to stay sober … you have it in your heart and
mind to stay free” [laughter and applause by all in the room].

**Rewards**

STAR Drug Court provides a range of rewards for sobriety and program compliance.
Participants receive chips after various periods of sobriety. They also move up in
phases and watch participants go through emotional graduation ceremonies during
which they receive hugs from judges and discuss the changes in their lives in front of
their peers and families. For some participants, these public acknowledgments of
their success, especially from judges, are more powerful than tangible rewards.

*Phase 1 Participant 1:* “For me, it’s the fact that you have somebody on
your side. She” [our judge] “cares about everybody. All of the drug
court judges really care about us and give us praise for our hard work
and everything that we do … and I mean, that’s all we ever want is for
someone to care about us.”
Phase 1 Participant 2: “The way I grew up, nobody told us we were doing good … so for someone to tell us that they are recognizing the progress we are making … it feels good.”

Seeing others succeed in the program is a tremendous reinforcement for many participants. Drug court participants frequently bond with each other and become very close. They get to participate in each other’s success. In other cases, participants cited that watching the success of participants they once knew from the streets provided much-needed inspiration.

Phase 2 Participant 2: “I don’t know … for me I guess it’s about seeing other people succeed. I like it when I see my friends going to their next color and doing well and getting jobs and um … it really means a lot … I guess … to see people who have become a part of my life succeed … and enrolling in school and doing things that nobody really thought they would ever be able to do, or even live to do, and that’s like miracles that God presents for me to witness in my life so that’s what’s important to me.”

Phase 2 Participant 4: “It inspires me when I see other people succeed. When I see other people that were out on the streets with me and doing dope and I come in here and I see them clean. I hadn’t seen them in a while, and it’s because they’re doing something with their lives today and it inspires me because I know if they can do it I’m damn sure can do it.”
Several participants acknowledged that participating in drug court has been a life-changing phenomenon. It interrupted addictions and criminal histories that had continued unabated for many years.

*Phase 3 Participant 3:* “Well, I was 30 years in the life … 30 years doing crack cocaine … and I’m fixing to graduate, so just look at that.”

*Phase 1 Participant 4:* “For me, the drug court was a miracle coming true because I have a bunch of felonies … a bunch of convictions … and I have been guilty on every one. To actually get a chance at life … that was the miracle. I’m glad to be part of it and hope it never stops. I want it to be there for other people who need help.”

*Phase 2 Participant 4:* “I’ve been 9 months clean going on 10 and thank God because it’s not been easy but it’s worth it, you know. It’s worth it. I would say today I would not trade my worst day sober for my best day when I was getting high. I mean … I have peace … I don’t have to look over my back … and I don’t wake up every day saying oh my God I have to go commit a felony to get high. You know I can be at peace today and I’m living life. I’m actually living life. I haven’t reached all my goals but I can see a pathway now.”

*Phase 1 Participant 2:* “For myself, this is the first time I have been sober in 21 years. So I mean … that’s quite an accomplishment and I have been to prison, I have been to treatment, I have been everywhere, and this is the first time that I actually look forward to my future.”
Phase 2 Participant 1: “They’re allowing me to take this chance to transition my life instead of sending me to jail. After 24 years of drugging, you have to understand this is a big step for me. By not just putting me in treatment and saying … okay … dry out … but also stepping in and giving me the ability to focus on my recovery after treatment … and then working me step by step back into society as a citizen … not a drug head.”

The effects of years of addiction and constant contacts with the criminal justice system meant the loss of support of family members for most drug court participants. Many participants had been out of contact with their families for years. The impact was especially devastating to many women who had lost custody of children because of their addictions. The STAR program has helped participants re-establish contact with parents, siblings, and children. Many participants have family members who attend court sessions regularly and participate in graduation ceremonies.

Phase 3 Participant 4: “I’m not willing to surrender my sobriety date. I’m not willing to treat myself bad anymore. I’m not willing to settle for second best. I deserve these things and I’m building my self-esteem up and I’m feeling better … I’m building my family relationships back up. I love it.”

Phase 2 Participant 3: “It has helped me a lot. It makes me strive to do better … to stay on the right path … re-establish some relationships with my family that were broken. I’m just grateful to them.”
Phase 3 Participant 4: “STAR Court has given me my family back. It has also made me employable.”

Criminal History and Program Success

A cross-tabulation of drug court graduation and prior involvement in the criminal justice system is presented in Table 1. An inverse relationship was found between involvement in the criminal justice system and successful completion of drug court. Participants with more than 16 years of criminal history were most likely to graduate (56.1%), followed by participants with a 10- to 16-year history of involvement (50.8%). Participants with a criminal history of 5 years or less (48.9%) and 6 to 9 years (48.5%) were less likely to complete drug court.

The data for mean drug arrests after program entry by prior involvement in the criminal justice system are presented in Table 2. There was not a significant difference in mean drug arrests within 1, 2, and 3 years of referral to the Harris County STAR Drug Court. Those with a criminal history of 5 years or less were least likely to be re-arrested for a drug charge, as would be expected. Participants with a 6- to 9-year criminal history were the most likely to have been arrested for a new drug charge. The 6- to 9-year group had the highest level of new drug arrests within 2 and 3 years after referral to the program, and this group had the highest overall level of new drug offenses. Participants with 16 or more years of criminal history were less likely than participants in the 6- to 9-year group to commit new drug
offenses, and about equally as likely as the 10- to 16-year group to be arrested on new drug charges. Overall, participants with a lengthy and persistent criminal history had levels of new drug offenses comparable with those of participants with less involvement in the criminal justice system.

[INSERT TABLE 3 ABOUT HERE]

The data for mean nondrug arrests after program entry by prior involvement in the criminal justice system are presented in Table 3. Again, there was not a significant difference in mean nondrug arrests within 1, 2, and 3 years of referral to the Harris County STAR Drug Court. Participants with a 6- to 9-year criminal history were the most likely to have been arrested for a new nondrug charge. The 6- to 9-year group had the highest level of new nondrug arrests within 1, 2, and 3 years of referral to the program, and this group had the highest overall level of new nondrug offenses. Participants with 16 or more years of criminal history were less likely than participants with less prior involvement in the criminal justice system to commit a new nondrug crime within 1, 2, and 3 years. Overall, the levels of new nondrug offenses of participants with a lengthy criminal history were lower than or comparable with those of participants with less history.

Discussion

Although many studies have evaluated drug courts, none have examined their success from the perspective of the participant. Despite the goal of many drug courts to reduce the continual cycling of drug offenders through the criminal justice system, few studies have compared success, in terms of graduation and number of
new arrests, between persistent offenders and those with less involvement in the criminal justice system. The findings from this study counter those of a study by Saum, Scarpitti, and Robbins (2001). They found that clients who had a higher total number of pre-drug court charges were less likely to graduate. That study included violent offenders in the drug court program. It found that drug court participants with greater involvement in the criminal justice system in terms of length of involvement and number of prior charges were most likely to graduate from the program and least likely to be arrested on new nondrug charges. In other words, in terms of graduation and number of nondrug offenses, the Harris County STAR Drug Court is about as successful, or more successful, in the treatment and monitoring of persistent offenders with a 17- to 28-year history of offending and an average of 13 prior arrests as it is in the treatment and monitoring of offenders with less than 6 years of criminal history and an average of 5 prior arrests.

The results of this study indicate that a long criminal history is not related to increased drug or nondrug arrests after participation in a drug court. If this study is reflective of a general trend among drug courts, it may have tremendous implications for court systems that manage drug offenders. In fact, to the extent that program resources are limited, drug court administrators should consider targeting persistent offenders as an opportunity to reduce the fiscal cost to the criminal justice system. Advocates should attempt to recognize justice-involved drug addicts who may be ready for a transition and urge them to participate in drug court programs.

The results of the focus groups provide some context in explaining the success of the drug court for chronic offenders. Many participants chose drug court
to avoid state jail or prison sentences. Some view this as a coercive approach to treatment. However, it is clear that without the threat of incarceration, many would not choose treatment through drug court. Drug court demands a considerable commitment in the initial phases, and the demands of the program lead many to consider quitting and accepting their initial jail or prison sentence. The encouragement of the drug court team and peers provides the impetus that participants need to continue.

Some drug courts contract with a single treatment provider. The STAR Court contracts with 13 different providers. A one-size-fits-all approach may be more efficient, but a variety of treatment resources provides more options to the drug court team if an approach is not working.

Relapse under traditional probation often results in revocation. Drug courts recognize that participants are going to relapse. Participants recognize that the drug court team is not trying to set them up for failure with its close monitoring. The team wants them to succeed. The judges volunteer their time to lead the court and demand only the same level of commitment from participants.

Accountability through frequent random drug tests is viewed as critical to helping participants maintain sobriety, especially in the early phases of the program. Participants believe that it is impossible to cheat the tests, and they often see others receive “jail therapy” when a test result comes back positive.

Although drug court provides tangible rewards for compliance, such as sobriety chips, public recognition, phase promotions, and graduation, it is the intrinsic rewards that seem to be the most motivating and meaningful to drug court
participants. Many have successfully abandoned decades of addiction and contacts with the criminal justice system. Success in drug court has led to the re-integration of families that were separated for years.

An important limitation of this study is that the arrest data were limited to Harris County, Texas. It would have also been preferable to get the perspective of drug court participants who did not graduate from the program. Understanding why many offenders relapse into drug use and offending is as important as understanding why they are successful at breaking away.

Conclusion
Most drug court evaluations examine program effectiveness without considering the perspective of the offenders regarding why these programs may be effective for long-time addicts. Drug court participants suggest that the threat of jail or prison is the initial nudge they need to give treatment another chance, accountability through drug testing and court monitoring keeps them honest during the process, and graduation and a new lease on life provide the incentives not to relapse. Policy makers tend to view success in drug court in terms of reducing jail populations or reducing other costs associated with arresting and processing offenders. Although these are strong reasons to pursue drug courts, what is often overlooked is the human cost of drug addiction to addicts and their families. Success for the drug court participant means looking forward to a new life.
Table 1. *Drug Court Graduation by Prior Involvement in the Criminal Justice System*

<table>
<thead>
<tr>
<th>Graduated</th>
<th>0–5 y</th>
<th>6–9 y</th>
<th>10–16 y</th>
<th>&gt;16 y</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>48.9% (66)</td>
<td>48.5% (50)</td>
<td>50.8% (64)</td>
<td>56.1% (64)</td>
<td>51.0% (244)</td>
</tr>
<tr>
<td>No</td>
<td>51.1% (69)</td>
<td>48.5% (53)</td>
<td>49.2% (62)</td>
<td>43.9% (50)</td>
<td>49.0% (234)</td>
</tr>
</tbody>
</table>

χ² = 1.69, d.f. = 3, p = 0.638.
Table 2. *Drug Court Participant Drug Arrests After Program Entry by Prior Involvement in the Criminal Justice System*

<table>
<thead>
<tr>
<th>Prior Involvement in the Criminal Justice System</th>
<th>Mean drug arrests after program entry</th>
<th>0–5 y</th>
<th>6–9 y</th>
<th>10–16 y</th>
<th>&gt;16 y</th>
<th>t value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Within 1 y</td>
<td></td>
<td>0.06</td>
<td>0.11</td>
<td>0.07</td>
<td>0.11</td>
<td>0.71</td>
</tr>
<tr>
<td>Within 2 y</td>
<td></td>
<td>0.12</td>
<td>0.20</td>
<td>0.19</td>
<td>0.15</td>
<td>0.95</td>
</tr>
<tr>
<td>Within 3 y</td>
<td></td>
<td>0.22</td>
<td>0.36</td>
<td>0.25</td>
<td>0.25</td>
<td>1.05</td>
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</tbody>
</table>
Table 3. *Drug Court Participant Nondrug Arrests After Program Entry by Prior Involvement in the Criminal Justice System*

<table>
<thead>
<tr>
<th>Mean nondrug arrests after program entry</th>
<th>Prior Involvement in the Criminal Justice System</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>0–5 y</td>
</tr>
<tr>
<td>Within 1 y</td>
<td>0.16</td>
</tr>
<tr>
<td>Within 2 y</td>
<td>0.30</td>
</tr>
<tr>
<td>Within 3 y</td>
<td>0.41</td>
</tr>
</tbody>
</table>

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References


