



National Institute of Justice

Research Preview

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Drug Courts and the Role of Graduated Sanctions

Summary of a Presentation by Adele Harrell, The Urban Institute

The movement toward specialized drug courts began in the late 1980s in response to rising rates of drug-related court cases and to the inability of traditional law enforcement and justice policies to reduce the supply of and demand for illegal drugs. Since the first drug court was created in Miami, Florida, in 1989, these courts have focused on providing, through the court system, treatment to drug-involved criminal justice populations, with judges having primary authority over case handling. Evaluations of the Miami program and others have shown promising results—Miami experienced a 33-percent reduction in rearrests for drug court graduates compared with non-drug-court offenders.

Beginning in 1994, The Urban Institute has been evaluating a drug court within the Superior Court of the District of Columbia. Preliminary results of this NIJ-sponsored study reveal useful information about the effectiveness of such programs and provide guidelines for drug court design and operations.

Demonstration program for pretrial intervention

In 1993, the Superior Court of the District of Columbia received a grant from the Center for Substance Abuse Treatment to develop a pretrial intervention program aimed at drug-involved felony defendants with the goal of reducing drug use and criminal activity. The data presented in this Research Preview are based on the drug court's operations from September 1994 through January 1996. Three characteristics of the District of Columbia drug court distinguished it from others:

- The programs reached offenders at the pretrial stage rather than at adjudication.
- The programs primarily served felony defendants—two-thirds of whom had prior criminal convictions—instead of first-time and misdemeanor offenders.
- The superior court already had in place a highly automated and sophisticated drug testing system; a laboratory in the courthouse could provide results to judges 30 minutes after testing.

Key operational features of the drug court included early intervention, judicial involvement in defendants' progress, frequent drug testing, and immediate access to drug test results.

The program's interventions were based on three felony dockets, already set up to expedite drug cases, to which defendants were randomly assigned. The first involved an intensive day treatment program. The second used graduated sanctions coupled with drug testing and judicial monitoring. The third docket—involving regular drug testing and judicial monitoring—served as the control.

Defendants became eligible for intervention by failing while on pretrial release two of the twice-weekly drug tests required of those who tested positive for drugs at arrest. A failed test could mean that the defendant tested positive, missed a test, or tampered with the sample.

Day treatment docket. Of the 346 defendants on the treatment docket, 140 joined the program. They were enrolled in a 6-month program consisting of six stages, each of which was to last 1 month: orientation, stabilization, cognitive structuring, new concepts development, instructive action, and community leadership. Participants met in

the courthouse from 9 a.m. to 3 p.m. every weekday and were tested for drugs daily.

Researchers found that completion of the program took much longer than anticipated: Cases were open an average of 11 months as opposed to the 6 months estimated. The average cost per participant was \$4,500 more than the costs of court processing and pretrial supervision for control docket defendants. Treatment docket costs included funding for program operations, additional hearings held (treatment participants required more than twice as many hearings as those on the standard docket), warrants, staff, and additional services to which defendants were referred.

Sanctions docket. The sanctions program used the twice-weekly drug tests as its basis. Of the 365 defendants on the sanctions docket, 240 joined the program. Upon entering the program, participants signed a contract stating that the first time they failed a test they would spend 3 days in the jury box observing court proceedings, and after the second failed test, 3 days in jail. After the third failure, they would be sent to a detoxification program, with the fourth resulting in 7 days in jail. Each failed test while the participant was involved in the program was to receive a sanction, no matter how much time had passed between failures.

Sanctions cases were open an average of 8 months—1 month longer than the control docket; average costs were \$2,000 more than for the control docket. About 72 percent of sanctions defendants failed once and spent 3 days in the jury box, 50 percent received 3 days in jail, 34 percent were placed in a detoxification program, and 22 percent received 7 days in jail. At the end of the process, 95 percent of defendants who were drug free during the month before sentencing received probation compared with 55 percent of those who continued their drug use.

Control docket. The 311 defendants on the control docket received twice-weekly drug tests, but had no compliance hearings, case management, or special treatment efforts. Judges on the standard docket used drug-use status as a sentencing factor, but not to the same extent as those on the sanctions docket. Eighty-eight percent of defendants on the control docket who stayed drug free received probation compared with 63 percent of those still using drugs at sentencing.

Lessons learned

Treatment. Researchers found that participation in the treatment program was poor—only 41 percent of those eligible participated. Participating defendants attended only about one-third of their scheduled sessions. Nineteen percent graduated. Although some left while doing well in the program, most who did not graduate dropped out, failed the program, or left for more intensive treatment programs.

Researchers suggested that using a rigorous assessment procedure and offering a menu of treatment program options might better match treatment to clients' needs. They also felt that a strong incentive could convince defendants to participate. (In the District of Columbia drug court, an increased likelihood of receiving probation helped motivate offenders to become and remain drug free.) Finally, researchers felt treatment quality must be carefully monitored. The District of Columbia program experienced many facility-related problems—dilapidated quarters, flooding, lack of heat, poor air quality—that may have lowered participation rates.

Sanctions vs. control. According to data gathered during the month before defendants were sentenced, defendants on the sanctions docket were more than three times as likely to be found drug free when tested than those on the control docket. Sanctions participants averaged 4.0 failed drug tests compared with the standard docket participants' 5.3, a statistically significant difference.

To measure repeat criminal activity, researchers reviewed official District of Columbia arrest records for 74 percent of the sample for the first year after release from the program. After 100 days from release, 2 percent of sanctions program participants had been rearrested compared with 6 percent of control docket defendants. The rearrest rates were 3 percent and 11 percent, respectively, at day 200 and 11 percent and 17 percent, respectively, at 1 year.

On the basis of their findings, researchers concluded that the sanctions program influenced such indicators of program effectiveness as drug use and rearrest rates and identified several fundamental characteristics of successful sanctions programs: an up-front agreement demonstrating that the defendant understands the rules he or she must abide by, swiftness of sanctions after violating the rules, and certainty that the sanctions will be imposed.

This document is based on Dr. Adele Harrell's presentation to an audience of researchers and criminal justice practitioners as part of NIJ's Research in Progress Seminar Series. The study was sponsored by NIJ (grant number 94-IJ-CX-K011). Dr. Harrell is a principal research associate and program director for The Urban Institute. A 60-minute VHS videotape of the seminar, *Drug Courts and the Role of Graduated Sanctions*, is available for \$19 (\$24 in Canada and other countries). Ask for NCJ 169597. Use the order form on the next page to obtain this videotape and any of the other tapes now available in the series.

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