

Baltimore City Juvenile Drug Court Process Evaluation



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of Maryland
Annapolis, Maryland**

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**NPC Research
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Baltimore City Juvenile Drug Court Process Evaluation

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Human services research designed to promote effective decision-making by policymakers at the national, state and community levels

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EXECUTIVE SUMMARY

Drug treatment courts are one of the fastest growing programs designed to reduce drug abuse and criminality in non-violent offenders in the United States. The first drug court was implemented in Florida in 1989. As of 2006, there were at least 1,597 adult and juvenile drug courts operating in all 50 states, the District of Columbia, Northern Marina Islands, Puerto Rico, and Guam (BJA, 2006).

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

Baltimore City's Juvenile Drug Court (BCJDC) was a product of a 1997 federal grant from the Office of Juvenile Justice and Delinquency Prevention (OJJDP) for early delinquency prevention by providing drug treatment court for child welfare mothers. The BCJDC program subsequently obtained a \$300,000 federal grant, also from OJJDP, for the Juvenile Drug Court program. The program was implemented in 1998.

In 2001, NPC Research (NPC), under contract through the Administrative Office of the Courts of the State of Maryland, began cost studies of adult drug courts in Baltimore City and Anne Arundel County, Maryland. These studies were completed in 2003. Subsequently, NPC Research was hired to perform evaluations on 4 adult and 10 juvenile drug courts in Maryland, one of which is the BCJDC. This report contains the process evaluation for the BCJDC.

Information was acquired for this process evaluation from several sources, including observations of court sessions and team meetings during site visits, key informant

interviews, focus groups, and the Drug Court's files and database. The methods used to gather this information from each source are described in detail in the main report.

The BCJDC program was originally designed to serve 200 participants. Due to a lack of treatment capacity (some addictions treatment counselor positions were never filled), it is currently serving about 40 participants on a regular basis, with another 40 participants "on-role" (still considered a participant but not active, as they may be in a placement facility or they have absconded and there is a warrant out for them, etc.). Overall, the goals of the BCJDC are to offer timely, community-based treatment to juvenile offenders with substance abuse problems, to promote abstinence and education, and to strengthen the youth and family so that the young person becomes self-sufficient and lives a productive life without drugs.

Process Results

Using the Ten Key Components of Drug Courts (as described by the National Association of Drug Court Professionals in 1997) and the 16 juvenile drug court strategies (described by the National Drug Court Institute in 2003) as a framework, NPC examined the practices of the BCJDC program.

The Baltimore City Juvenile Drug Court fulfills many of the 10 key components and 16 strategies through its current policies and structure. The program integrates substance abuse treatment and juvenile justice system case processing; uses a non-adversarial approach between the Office of the Public Defender and the State's Attorney's Office; identifies youth and places them in drug court quickly; provides access to a continuum of treatment services; conducts frequent, random drug tests; has a variety of sanctions and rewards to encourage compliant behav-

ior; and maintains ongoing judicial interaction with participants.

There are several areas in which the BCJDC should and can make program improvements. Communication between existing partners about the roles and responsibilities of each agency, how the program's activities are expected to contribute to desired outcomes, and common service definitions would increase program quality and enhance understanding of the program across stakeholders. Data systems development and data quality need to be improved. Suggestions include establishing (and training staff on) common definitions and data entry procedures, and using an integrated management information system. These and other activities will also contribute to strengthening the relationships among staff at the partner agencies, which will enhance program functioning and staff satisfaction.

Interpretation of the findings of this process evaluation is provided in an analytic framework that distinguishes among community, agency, and program level issues. Understanding the needs of the Baltimore City community and the impacts of a youth's environment on her/his behavior is crucial to establishing a program that best serves the population. Bringing the partner agencies to the table and reconciling misunderstandings and role confusion will also enhance program quality. Finally, establishing consistent operational guidelines will provide an efficient and effective structure for service delivery.

The Action Plan suggested for the BCJDC includes the following primary activities:

- Comprehensive, research-based community needs assessment, including identification of the scope of the need for a juvenile drug court in Baltimore City
- Strategic planning involving the Drug Court team and other partner agencies
- Discussion and negotiation of roles and responsibilities reflecting agency commitments to the Drug Court program
- Logic model development
- Review of program model and activities, and how they meet the needs of participants
- Establishment of a set of essential data elements for program monitoring and evaluation and a data system for housing this information

As the reader considers the suggested Action Plan, it should be noted that important elements of the Plan involve the Baltimore City Juvenile Drug Court returning to the original design concepts of the program. It should also be noted that BCJDC leadership is currently (October 2006) pursuing proactive steps to deal with problems identified by NPC's researchers. The program's leadership should look to the report's recommendations to assist them in focusing and guiding their efforts to improve the program such that it better meets the needs of Baltimore City's young people.

BACKGROUND

In the past 17 years, one of the most dramatic developments in the movement to reduce substance abuse among the U.S. criminal justice population has been the spread of drug courts across the country. The first drug court was implemented in Florida in 1989. There are now at least 1,597 adult and juvenile drug courts operating in all 50 states, the District of Columbia, Northern Marina Islands, Puerto Rico, and Guam (BJA, 2006).

The purpose of drug courts is to guide offenders identified as drug-addicted into treatment that will reduce drug dependence and improve the quality of life for them and their families. In the typical drug court program, participants are closely supervised by a judge who is supported by a team of agency representatives that operates outside of their traditional adversarial roles. The team typically includes a drug court coordinator, addictions treatment providers, district/state's attorneys, public defenders, law enforcement officers, and parole and probation officers who work together to provide needed services to drug court participants.

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, 2003; Crumpton, Brekhus, Weller,

& Finigan, 2004; Carey, Finigan, Waller, Lucas, & Crumpton, 2005). Some drug courts have even been shown to cost less to operate than processing offenders through business-as-usual (Carey & Finigan, 2003; Carey, et al., 2005).

In 2001, NPC Research (NPC), under contract through the Administrative Office of the Courts of the State of Maryland, began cost studies of adult drug courts in Baltimore City and Anne Arundel County, Maryland. These studies were completed in 2003. Subsequently, NPC Research was hired to perform evaluations on 4 adult and 10 juvenile drug courts in Maryland, one of which is Baltimore City's Juvenile Drug Court (BCJDC).

This report contains the process evaluation for the BCJDC performed by NPC. The first section of this report is a description of the methods used to perform the process evaluation, including site visits and key informant interviews. The second section of this report contains the process evaluation, including a detailed description of the drug court process. Following the process overview is a section examining the procedures and systems in the BCJDC within the framework of the Ten Key Components of Drug Courts (NDCI, 1997) and 16 strategies for juvenile drug courts (NDCI, 2003).

METHODS

Information was acquired for this process evaluation from several sources, including observations of court sessions and team meetings during site visits, key informant interviews, focus groups, and the drug court's files and database. The methods used to gather this information from each source are described below.

Once this information was gathered, a detailed process description was written and sent to the Baltimore City Juvenile Drug Court for feedback and corrections. The BCJDC process was then evaluated using the Ten Key Components of Drug Courts integrated with 16 juvenile drug court strategies, as a framework to determine the extent to which the BCJDC is utilizing the current best practices of the field related to drug court implementation.

Site Visits

NPC's evaluation staff traveled to Baltimore City on three occasions to meet BCJDC team members, observe pre-court team meetings, observe drug court sessions, and interview key drug court staff.¹ In addition, focus groups were facilitated by NPC with current drug court participants and with parents. These observations, interviews, and focus groups provided the evaluation staff with first-hand knowledge of program structure, procedures, and routines used in the drug court.

Key Informant Interviews

Key informant interviews were a critical component of the BCJDC process study. NPC staff interviewed 11 individuals involved in the Drug Court, including the Drug Court Coordinator, Drug Court Judges (past

and present), the Assistant Public Defender, the Assistant State's Attorney, treatment counselors, Department of Juvenile Services (DJS) staff, and Probation staff.

NPC has designed a Drug Court Typology Interview Guide,² 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 the guide assisted the evaluation team in focusing on the more important and unique characteristics of the Baltimore City Juvenile Drug Court.

For the process interviews, key individuals involved with BCJDC were asked many of the questions in the Typology Guide during site visits and through follow-up telephone calls. This served three purposes:

1. It allowed us to spread the interview questions out over several individuals and over time, minimizing the length of the interview at any one point in time.
2. It provided us with an opportunity to connect with key players throughout the duration of the evaluation, maximizing our opportunities to obtain information.
3. It allowed us to keep track of any changes that occurred in the drug court process from the beginning of the project to the end.

Focus Groups

In May 2006, NPC conducted a focus group with six participants in the Juvenile Drug Court. Three parents participated in a focus

¹ However, most interviews were conducted by telephone (see Key Informant Interviews section).

² Under a grant from the Bureau of Justice Assistance and the Administrative Office of the Courts of the State of California. See appendix for typology description.

group during July 2006. The focus groups allowed the participants and parents to share their experiences and express their perceptions about the drug court process with the evaluation staff. Focus group participants were asked what they liked and did not like about the BCJDC program, what supported their success and what made it difficult to succeed, whether they were treated fairly, and what were their suggestions for improvement.

Document Review

To better understand the overall operation and detailed practices of the Drug Court, the evaluation team reviewed the Baltimore City Juvenile Drug Court's Policy and Procedures Manual and paper files on 123 Drug Court participants from January 1, 2003, through December 31, 2004.

BALTIMORE CITY JUVENILE DRUG COURT PROCESS DESCRIPTION

The following information was gathered from interviews, focus groups, the Baltimore City Juvenile Drug Court's Policy and Procedures Manual, and from the research team's observations of the BCJDC. The majority of the information was gathered from one-on-one key stakeholder interviews. The evaluators have attempted to represent the information in the way it was provided by the Drug Court staff.

Implementation

Baltimore City's Juvenile Drug Court was a product of a 1997 federal grant from the Office of Juvenile Justice and Delinquency Prevention (OJJDP) for early delinquency prevention by providing drug treatment court for child welfare mothers. However, when program staff realized that the OJJDP required criminal sanctions for participant non-compliance, they returned the funding, as they disagreed with this approach.

Baltimore City Juvenile Drug Court subsequently obtained a \$300,000 federal grant, also from OJJDP, for the Juvenile Drug Court program. The program was implemented in 1998, following a planning year in which relevant program-related information was gathered. During that year, the staff received National Drug Court training, and discussions occurred that resulted in a plan and the framework for the Juvenile Drug Court.

After failing to use more than \$15,000 of its funding within three years of operation, the BCJDC program was asked to return the balance. The Department of Juvenile Services (DJS) has since provided funding for the Drug Court. DJS had also been responsible for distributing funds from the \$300,000 federal grant.

Capacity and Enrollment

The BCJDC program was originally designed to serve 200 participants. Due to a lack of treatment capacity (some addictions treatment counselor positions were never filled), it is currently serving about 40 participants on a regular basis, with another 40 participants "on-role" (still considered a participant but not active as they may be in a placement facility or they have absconded and there is a warrant out for them, etc.). The program was closed to new clients beginning in November 2004 because of the lack of Addictions Counselors. Although there are eight available treatment counselor positions, only three slots were filled as of July 2005, when NPC first visited the Drug Court. The number of counselors decreased to one by the time of NPC's May 2006 visit.

Subsequently, DJS Behavioral Health and Baltimore City administrators decided that it would be in the best interests of Drug Court clients if addictions services were contracted to an outside vendor who was familiar with the nuances of running an addictions program and would have more flexibility and a quicker hiring process to help address employee turnover issues.

After a lengthy search, a new vendor for treatment counselors, Harambee Treatment Center (University of Maryland), was selected, and five counselors were hired in July 2006, and an additional counselor to be hired in September and another in November 2006, for a total of seven treatment counselors. This will support a program capacity at 175. By October 2006, 90 new participants are predicted to be part of BCJDC.

As of June 2006, 460 participants had enrolled in the BCJDC Program, about 88 participants had graduated (4 were girls), and

285 participants were terminated from the program. **Note:** the number of individuals considered terminated from this program includes those who completed the program, those whose cases were transferred to other jurisdictions, and individuals who had died.

Although the Drug Court was originally created to serve males only, females were accommodated by the program starting in 2002. From the time the program began accepting females, there has been a consistent, though small, number of female participants (about one to three at any given time, though none at the time of this evaluation's interviews). Most of the Juvenile Drug Court participants in Baltimore City are African American.

The primary drug of choice for individuals entering the BCJDC program is marijuana, followed by alcohol. The two most common drugs of choice for adults in Baltimore City are heroin and cocaine, which is interesting in that it suggests the challenging context in which the youth who are in drug court live. It also suggests that the youth have not yet reached the level of drug use found among adults in their community, further indicating that an intervention such as drug court may be critical in helping at-risk young people avoid a more dangerous career of drug abuse. Occasionally, individuals enrolled in the program are using other drugs (including "hard" drugs). Most of the participants fall into the "experimental" user category, although many of them have been arrested for selling drugs.

Many of BCJDC's participants come from single-parent families with more than one sibling. Often, individual participants are the only sources of income for their families. Unfortunately, frequently the only jobs available to them pay minimum wage, which does not cover the costs of living for multiple individuals. As a result, many of these young people sell drugs to put food on the table or even to pay for parent drug habits. Related to this grim fact, it has been reported that a

number of the BCJDC's participants' parents are either currently using drugs or are in jail at the time of their child's participation in the program.

Drug Court Goals

Overall, the goals of the BCJDC are to offer timely, community-based treatment to juvenile offenders with substance abuse problems, to promote abstinence and education, and to strengthen the youth and family so that the young person becomes self-sufficient and lives a productive life without drugs. These goals are supported by program activities that include providing:

- Timely intervention with youth and their parents/guardians.
- Structure to participants through intensive case management and substance abuse services.
- A supportive environment for participants to achieve and maintain abstinence.
- Consistent supervision to encourage involvement in pro-social activities and healthy living.
- A system of rewards and recognition for accomplishments.

The program's vision is to see every youth served by the Baltimore City Juvenile Drug Court discontinue his or her drug and delinquent activity and become a productive member of society.

BCJDC Program Eligibility

Individuals entering BCJDC must meet the following criteria:

- Have a current eligible drug-related criminal charge (either misdemeanor or felony). In most cases this charge is related to controlled dangerous substances (using, selling/distribution, burglary).
- Have no history of violent crimes.

- Be a resident of Baltimore City, Maryland.
- Be between 14 and 17 ½ (ideally 15-17) years of age.
- Screening shows the candidate to be a substance abuser or chemically dependent.
- Be amenable to treatment (acknowledging drug addiction).
- Have a parent or legal guardian who is willing to comply with conditions of the Juvenile Drug Court Program.
- Have no serious mental illness. (Some youths on medication are accepted, but it depends on the type of illness the medication treats, e.g., schizophrenia versus Attention Deficit Disorder.)

For the first two years of the program (1998-2000), the BCJDC was not able to accept dual diagnosis clients. The program was eventually able to accept these individuals to a limited degree, as long as the substance-related diagnosis was the primary diagnosis.

The step-by-step process for a person entering the BCJDC begins with a juvenile being identified as a potential participant by the State's Attorney's Office, Office of the Public Defender, one of the Masters or Judges, or a Probation Officer. At one time in the program's history (but no longer), there was a staff member in the State's Attorney's Office whose job it was to actively search juvenile court files to identify possible Drug Court participants; this was the primary source of referrals.) The Drug Court Probation-Case Manager (P-CM) Supervisor is contacted to find out whether the youth meets the initial criteria for entry. The P-CM conducts a preliminary investigation by searching the DJS automated case management and information system database (ASSIST) and the court's database (QUEST) for arrest-related information about the candidate participant. If the P-CM determines that the individual meets the

criteria for the Drug Court program, the case is put on the Drug Court docket.

The following steps take place prior to a potential participant being accepted into the Juvenile Drug Court:

1. Once a charge is initially brought, the individual must go before a Master to determine whether or not the facts are sustained (there is enough evidence to say s/he committed the alleged offense). If so, then the case is reset to come before a Judge.
2. The State's Attorney's Office, Office of the Public Defender, one of the Masters or Judges, or a PO identifies an individual who they think could be appropriate for the Drug Court program, and notifies the Juvenile Drug Court Coordinator of the same.
3. The Juvenile Drug Court Coordinator distributes the candidate's demographic and arrest information to the Supervisor of the Case Managers (S-CM), the State's Attorney and the Attorney from the Office of the Public Defender. The Supervisor-CM conducts a preliminary investigation by looking into the ASSIST database for information on that individual.
4. If the S-CM finds that the records show the youth would be appropriate for the program, he notifies the Drug Court Coordinator of such.
5. Provided the Assistant State's Attorney and the Assistant Public Defender have no objection to the youth as a candidate, the youth is put on the Drug Court Docket for a future date. On that court date, the client and his/her parent/guardian are interviewed by the Social Worker working with the Office of the Public Defender.
6. The prospective client is administered the Substance Abuse Subtle Screen Inventory

- (SASSI) by the Juvenile Drug Court Coordinator, who also scores the SASSI.
7. The Family Interventionist administers and scores the Massachusetts Youth Screening Instrument-2 (MAYSI-2) (a mental health screening tool) and provides results to the Juvenile Drug Court Coordinator.
 8. Results from the above two screening instruments determine whether an American Society of Addictions Medicine (ASAM) assessment should be administered by the Addictions Counselor to further assess addiction-related needs. All prospective Drug Court participants receive this assessment.
 9. When all assessments have been completed, the Juvenile Drug Court Coordinator will notify the Assistant Public Defender (APD) of the results.
 10. Arrangements will be made with the young person and parent/guardian to return to court at a specified time, usually that same day, to speak with the APD about the youth's options.
 11. After receiving a court order, the Case Manager (who is assigned by the Probation Supervisor) will conduct an extensive social history on the prospective participant. With the parent/guardian present, a representative from either the State's Attorney's Office, Office of the Public Defender, a currently assigned Probation Officer, or someone from the P-CM's office will describe the Drug Court program to the youth and parent/guardian (both privately and in court, where there is a record), including all of the requirements of the program (intensive probation, reporting to court, various counseling sessions, meetings with probation, UAs). The prospective participant and parent/guardian are also informed about the graduated sanctions that can be levied.
 12. The youth is offered the opportunity to participate in the Drug Court program.
 13. If the prospective participant and parent/guardian agree to participate in the program, they are then brought into court to appear before the presiding Juvenile Drug Court Judge. During this hearing, the candidate is required to admit to one or more delinquent acts, and then must agree to the transfer of his/her current probation on these charges to the Drug Court program. If the young person wants to plead not guilty, he/she is not eligible for Drug Court.
 14. The Judge makes the final decision regarding admission to the program. Just prior to entry into Drug Court, the Judge will assure that the individual is aware of all the program requirements.
 15. The participant is officially accepted into the Juvenile Drug Court Program
 16. The participant is placed on indefinite probation (until s/he either completes the Drug Court program or fails), with the following conditions:
 The youth shall:
 - Report to and follow directions of the Juvenile Counselor (Case Manager).
 - Work or attend school regularly as directed by the Juvenile Counselor (Case Manager).
 - Get permission from the Juvenile Counselor (Case Manager) to change home address; change job; leave Maryland; own, and to possess, use, or have under their control a dangerous weapon or firearm (this has never come up, but is included to be in compliance with state law); obey all laws.
 - Notify the Juvenile Counselor (Case Manager) at once if arrested.

- Permit the Juvenile Counselor (Case Manager) to visit her/his home.
- Appear in court when notified to do so.
- Not illegally possess, use or sell any controlled dangerous substance or paraphernalia.
- Participate fully in individual and group counseling (including AA/NA groups), when required to attend.

Most individuals accept the offer of admission to the Drug Court—only about 5% refuse. Refusal rates were higher in the past, but individuals being referred to the program currently have more extensive criminal histories and have fewer alternatives to commitment than were available to some of the earlier participants. Therefore, individuals currently being referred to the program are seen by staff as more appropriate (as eligibility and program requirements became better understood over time) and are more likely to accept admission compared to past prospective youth. Individuals on existing probation at the time of Drug Court entry have their probation transferred to the Drug Court.

The length of time between arrest and referral to Drug Court is usually one or two weeks, depending on the length of time it takes to schedule and complete testing. Most of the individuals entering the program are already on standard probation. The time from referral to entry into Drug Court may be anywhere from 1 to 30 days, depending on whether a case is pending in court. If the individual does go to court on an open charge, there is a possibility that Drug Court may be suggested as an option. Further, if a prospective participant is in court for a violation of an open charge that is pending, and one of the Counselors or Probation Officers suggests Drug Court, it could be heard on that same day. The case could then be transferred to the Drug Court Judge. In some cases, the BCJDC can conduct “emergency arraign-

ments,” which result in the young person coming to court the day after being arrested. In fact, in a few select cases, the individual may be referred to the program and assessed on the same day.

Incentives for Offenders to Enter (and Complete) the BCJDC Program

BCJDC is a post-plea program, which means that the youth admits to the charge(s) before participating in the Drug Court program. Incentives for program entry and graduation for offenders include:

- If the individual has other charges pending and has agreed to participate in Drug Court, then those charges may be postponed or reset. The charges can be wrapped into the Drug Court plea. Successful program completion means that these charges are removed from the individual’s record.
- If the participant completes Drug Court and has done well in aftercare, remaining in compliance with the conditions of his/her probation for two months after graduation, the court will enter a non-delinquency finding for all charges. This ruling applies to all charges for which the participant is on probation to the Juvenile Drug Court program.

If a participant does not graduate from the program, that person will be sentenced on the charge for which he/she entered a guilty plea (thus saving trial and court time).

Drug Court Program Phases

The BCJDC program has three phases designed to last 90 days each.

PHASE I REQUIREMENTS

Drug Court participants in Phase I are required to:

- Attend treatment every weekday. They attend group treatment sessions 5 days a week (different groups are held daily), and they see their Probation Officer every day. Sometimes participants are also ordered to attend AA groups and must show evidence that they attended.
- Attend a minimum of one individual counseling session per week with a Juvenile Counselor (Case Manager).
- Attend orientation (once individuals are accepted into the program, they are scheduled within 48 hours to meet with a Case Manager and an Addictions Counselor to go over the rules again with the young person and a parent/guardian who signs the paperwork).
- Attend a minimum of one individual counseling session per week with an Addictions Counselor.
- Attend additional groups, including “Step Group” and “Relapse Group,” as needed.
- Begin a cognitive behavioral program called Moral Reconnection Therapy. This program involves various activities that require participants to think about circumstances in their lives, the steps they have taken to get there, and the steps that are needed to make healthy/positive changes. Participants move through each component of the program after presenting on that component in front of their peer group; the peers make the final determination regarding moving forward in the program.
- Submit to urinalysis or breathalyzer tests a minimum of twice a week.
- Attend school daily or enroll in an educational program (vocational program, GED preparation course, etc.) if they have not been attending school or do not have a GED.
- Gain and maintain legal employment if they have a GED and are not enrolled in a college or trade program.
- Adhere to curfew checks (14 & 15 years: 8:30 Sunday-Thursday, 9:00 Friday & Saturday; 16 & 17 years: 9:00 Sunday-Thursday, 10:00 Friday & Saturday; 18+: determined on a case by case basis).
- Comply with reasonable home rules (e.g., adhering to curfew, listening to and accepting direction from parents, doing assigned chores, participating in family activities).
- Appear in court (on time and appropriately dressed) for regular case reviews once every 30 days.

PHASE II REQUIREMENTS

Drug Court participants in Phase II are required to:

- Attend treatment every weekday.
- Continue to participate in individual and group counseling, though the number of meetings they are required to attend per week decreases to four times per week.
- Attend court reviews monthly.
- Comply with curfew (same as for Phase I).

PHASE III REQUIREMENTS

Probation is less restrictive during Phase III. Curfew may be extended by one (1) hour, and required hours of contact with the Juvenile and Addictions Counselors are decreased.

Drug Court participants in Phase III are required to:

- Attend counseling 2 to 3 days per week.
- Prepare for transition out of the Juvenile Drug Court Program.

- Attend court reviews monthly or bi-monthly.

If participant behavior regresses (i.e., s/he stops following some or all of the program's rules), an intervention may occur that could result in an increase in contact hours or groups; graduated sanctions may be imposed; and/or emergency court reviews may occur. Despite poor behavior, the participants never go backwards in changing phases, but they cannot move forward until they have successfully completed a phase.

Requirements to Change Phase

Juvenile Drug Court participants may move from one phase to the next after they have met all of the requirements of a phase. The time spent in each phase varies according to how quickly requirements are completed. At minimum, participants are required to attend a court session every 30 days, whether participating satisfactorily in the program or not. After 90 days, or attending a total of three court dates, participants may be moved to the next phase, as long as there have been no problems (such as new charges, positive urine screens, missed treatment sessions, etc.). Time in a particular phase may be extended 30 days if the participant receives a sanction. Although the program is designed for 9 months (if a participant follows all of the rules), most young people stay in the program between 12 and 18 months.

Criteria for Graduation

In order to graduate from BCJDC, participants are required to:

- Progress through each phase in a minimum of 90 consecutive days.
- Abstain from all illegal substances as confirmed by urinalysis and/or breathalyzer for 90 consecutive days.
- Submit to all requests for a drug test for 90 consecutive days.
- Be employed by a Department of Juvenile Services-approved employer or be enrolled in an approved educational program.
- Fulfill goals of the master treatment plan (see Treatment Overview, below).
- Be available for home, school, or employment visits.
- Not violate any program rules for 60 days.

Supervisors from DJS meet with the Judge, Assistant State's Attorney, Assistant Public Defender, and the Juvenile Drug Court Coordinator to determine whether participants meet the criteria for graduation. A separate meeting (as needed) is held that includes the entire team to discuss the potential graduation. The team makes the final decision about graduation.

Aftercare

The BCJDC attempts to follow Drug Court graduates for a minimum of 3 months (for graduates) and up to 6 months after program completion (for those coming back to aftercare after having been in long-term placement). At graduation, these individuals are given a date, 2 months in the future, at which time they are required to return to Drug Court. Provided that they maintain clean urinalyses, have not received any more charges, and have reported to DJS as required for urine tests, the Judge then has the authority to expunge/dismiss charges related to Drug Court participation. However, if individuals relapse following completion of the program, they are referred to either an inpatient or outpatient program. During this time, the Drug Court will continue to support their educational and employment-related progress. These individuals will also graduate from the program; however, their records will not be expunged.

During aftercare, participants receive individual therapy, but not group therapy. If the

graduates are taking medication or have psychiatric/mental health needs, the Drug Court continues to offer support, as though s/he were still in the program. They are referred to a community-based service provider. After-care services are tailored to meet individual needs. Counselors will contact post-program participants in aftercare on a weekly basis, and continue to offer support. After completing the Drug Court program, they may continue on regular (not Drug Court) probation (based on his/her behavior). In that case, the original assigned Drug Court Case Managers, Probation Officers assigned to the Drug Court unit, will continue to follow up even though Drug Court is no longer involved.

Treatment Overview

In the BCJDC, the Addictions/Treatment Counselors work together as a team in the same office where central intake for the Drug Court takes place. The Drug Court program is a certified outpatient program through the Maryland Department of Health and Mental Hygiene [DHMH]. The DHMH audits records, assessments, services, etc., for accuracy and timeliness.

BCJDC participants contribute to the development of master treatment plans that include all participant requirements, from substance abuse counseling to education-related requirements. The plans also include short- and long-term goals and objectives. Individual treatment plans are reviewed and updated at least once every 90 days.

Every participant has two counselors: One dealing with delinquency and the other with treatment. Participants in the BCJDC are required to attend group counseling with the Addictions Counselors, in addition to individual counseling with the Case Managers (Probation Officers). If it is determined that participants need inpatient treatment, those services are provided through a contract with Mountain Manor, a residential treatment program. If outpatient mental health services are

needed, they are arranged through the Department of Juvenile Services (DJS) or the DHMH.

Addictions staff conducts group sessions twice a week (a psycho-educational group and a process group), and individual counselors meet with BCJDC participants at least once a week. Program participants see their Case Managers almost every day at the Drug Court office. Case Manager/Probation Officers conduct therapy groups once a week called Moral Reconciliation Therapy (MRT). MRT is a cognitive behavioral therapy-based program. All program participants are required to go through all of the chapters in the book, *Juvenile MRT: How to Escape your Prison*, by Dr. Gregory L. Little and Dr. Kenneth D. Robinson, in order to complete the program. After completing each chapter, participants make presentations to their peers, after which the peers decide (by voting) whether participants should advance to the next chapter. There are also weekly NA and AA meetings, which some participants are required to attend, if recommended by the Drug Court Team.

If they are Phase I or Phase II, participants in the program are required to report to DJS every day, from 4 to 6 p.m. From 4:00-4:30 participants who have been randomly selected receive urinalyses and breathalyzer tests. Staff members collect samples on-site. Then, from 4:30 to 5:30, counseling staff members facilitate therapeutic groups (process, psycho-education). Individual therapy is provided five days per week. Monday through Friday, clinical services are also provided by “Family Interventionists,” who are available to families experiencing major psychosocial stressors and family disengagement. These clinicians provide structural family counseling, ongoing clinical hours, and referrals for outside mental health services. In addition, Case Managers are available in the office (before 4 p.m.) to speak with participants on an as-needed basis. During school months, from 4:30 to 5:30 partici-

pants in Phase I are in MRT (which must be completed before participants can move to Phase II). During this time slot Phase II participants are in a psycho-education or other group. Since the participants are not in school, during the summer these activities take place earlier in the day.

BCJDC searched for a new treatment vendor for quite some time. When the first Request for Proposals that was issued by Baltimore Substance Abuse Systems, Inc., who were brought in by DJS to help with the process, did not produce a viable provider, a second RFP was issued, and a new vendor, University of Maryland, Harambee Treatment Center, was selected. Counseling staff from this vendor who are working directly with the Drug Court clients are being incorporated into (and funded by) DJS. These new staff members include five Addictions Counselors who were on board as of July 18, 2006, with two more to be added as by November 2006. Each of the counselors may see up to 25 individuals. The new vendor replaces the Clinical Supervisor and seven of the Drug Court's Addictions Counselor positions.

Other Drug Court Services

BCJDC participants may be offered grief counseling groups or anger management counseling groups in addition to the standard set of counseling services. Life-skills training is also available to participants who would benefit from that particular intervention. All participants have access to those services.

BCJDC participants also receive employment assistance. The program strives to ensure that all participants are in certified academic or vocational programs (for those with special education needs that would not be able to achieve a GED). Academic placements are based on education-based assessments. Participants doing well in the program may also receive driver's education class support, educational assessment referrals (through DJS

psychologists), and referrals to community college.

Team Meetings

The BCJDC Steering Committee, which includes the Judge; Assistant Public Defender; Assistant State's Attorney; Family Interventionist; Clinical Supervisor; Case Manager Supervisor; Assistant Director, Area 1, DJS; State's Attorney Team Captain; Office of the Public Defender Supervisor; and Drug Court Coordinator, meets every 30 to 45 days. This Committee discusses the direction of the program and explores components of drug court that members of the committee would like to enhance or change.

The BCJDC Team includes the Judge, Assistant State's Attorney, Assistant Public Defender, and DJS representatives (Addictions Counselors and Supervising Probation Officers). It meets monthly to discuss current concerns, issues and procedures. As a result of these meetings, many changes have occurred in the program since its inception. These include screening process modifications, and revisions of incentives, recruitment, and sanctions. The team also sets graduation dates at these meetings.

Policy decisions are made jointly through Steering Committee meetings or team meetings with input (on occasion) from the Drug Treatment Court Commission of Maryland.

Provider and Team Communication with Court

Case Managers and Addictions Counselors present cases in BCJDC sessions on Tuesdays and Thursdays. The presiding Judge, Juvenile Drug Court Coordinator, Assistant Public Defender, and Assistant State's Attorney are present during court sessions. Chambers conferences take place prior to Drug Court sessions. During these conferences substantive issues concerning participants on the docket are discussed. Treatment information may also be exchanged during team

meetings. Communication between the Judge and the Addictions Counselors and Case Managers continues during the Drug Court sessions (see below).

Drug Court Sessions

As indicated in the preceding paragraph, BCJDC sessions are held twice per week. About 10 cases are addressed in each court session, although with the more recent low numbers of counselors and Drug Court participants, Drug Court sessions have had fewer participants. During this period some sessions have been cancelled due to the low number of participants. The presiding Judge, Juvenile Drug Court Coordinator, Assistant Public Defender, Assistant State's Attorney, Juvenile Counselor, Addictions Counselor, Case Managers, and Supervisors from the Department of Juvenile Services are all in attendance. The Judge does not make decisions on the status of cases under review until he is in court.

During a typical BCJDC session, DJS Addictions Counselors for participants report to the Judge regarding participant status. Information from Addictions Counselors is confidential, but they may say whether participants are reporting as required or attending treatment sessions. Addictions Counselors do not disclose personal information (e.g., past abuse) that came up during treatments sessions. Counselors report in general terms rather than provide details attributable to individual participants. Based on these reports, the Judge may either decide to continue the probation (without intervention) or impose situation-appropriate (i.e., graduated) sanctions. During BCJDC sessions, the Judge may encourage or acknowledge positive changes. Applause among BCJDC session attendees may occur when participants are doing well. Participants are scored by both the Case Managers and the Addictions Counselors on how well they are doing. The combined accumulation of points can be 0-10, and that becomes part of the progress report that is submitted to the Judge, Attorneys, and Drug Court Coordinator.

Family Involvement

Participant families are integral parts of the BCJDC program. If parents are not available, stable grandparents or other extended family members may be involved. Parents/guardians/custodians are required to attend BCJDC sessions with participants. They must be present every time the participants appear in court. BCJDC policy states that the Judge will speak to all parents/guardians/custodians when they attend court sessions. Parents/guardians/custodians are also offered opportunities to be heard.

For the most part, parents attend BCJDC sessions. If they do not, the Judge can issue warrants, although that rarely happens. If participant progress in the program is impeded by failure of parents/guardians/custodians to meet their program commitments, the Judge may order an "Order Controlling Conduct" (OCC). The OCC requires that parents/guardians/custodians comply with conditions imposed by BCJDC.

Participating in their child's Drug Court experience may present difficulties for parents/guardians/custodians who have jobs and/or other children at home who must be cared for. The program recognizes these challenges. For instance, the protocol for determining eligibility in the program (assessments, etc.) takes place in one day.

After assessments have been completed, some families are referred for family counseling. Addictions staff members also meet with the parents/guardians/custodians. If it is discovered that substance abuse treatment is indicated for parents/guardians/custodians, staff members will try to persuade them to receive help at whatever level of treatment is needed. If there is resistance to seeking treatment on the part of the parents/guardians/custodians, the issue will be brought to the attention of the Judge, who may order parents/guardians/custodians to participate in substance abuse treatment.

Every weekday, clinical services are available for families who are experiencing high levels of psychosocial stressors and family disengagement. Clinicians provide structural family counseling, ongoing clinical hours, and referrals for outside mental health services. Case managers conduct thorough family social histories to identify problems and potential solutions. As indicated above, parents/guardians/custodians often have substance abuse issues as well as financial, legal, and housing challenges.

About 20-25% of participants in BCJDC and their families are involved with the “Family Preservation Initiative.” This program involves social workers coming to participant homes, assessing family needs (e.g., financial, mental health, education, furniture), and offering help with meeting those needs. Funding for this assistance is provided by DJS. The primary reason for referral of families to this program is a concern that participants are at risk of removal from home. This service is available to all young people in the community (not just Drug Court). Approximately 60% of participant families take advantage of these services.

The Drug Court Team

Judge. Judge David W. Young, the founding Judge for BCJDC, returned to this assignment on March 1, 2006, replacing Judge Clifton J. Gordy. Judge Gordy served March 1, 2005, through February 28, 2006. Prior to Judge Gordy’s service, Judge Audrey J. S. Carrion served March 1, 2001, through November 30, 2003; and Judge Edward R. K. Hargadon served November 2003 through February 28, 2005. Judge Young will be the Juvenile Drug Court Judge until February 28, 2009.

As of the date of this report, Judge Young spends two half days each week in Drug Court. The BCJDC Judge’s role includes presiding over the BCJDC sessions, participating in Team and Steering Committee meet-

ings, and supervising program administration to ensure that the cases presented flow smoothly. The Juvenile Court Judge makes the ultimate decision regarding admission into BCJDC.

Baltimore City Juvenile Court is a component of the Circuit Court for Baltimore City. It has three Juvenile Court Judges. One has primary responsibility for delinquency cases, another for child welfare cases, and the third for termination of parental rights cases and adoptions. The Judge who is responsible for delinquency usually presides over the Drug Court.

Juvenile Drug Court Coordinator. The current Juvenile Drug Court Coordinator for BCJDC has been an employee of the Maryland Administrative Office of the Courts since 2004. (Prior to 2004, the Coordinator was employed by DJS.) She arranges meetings (Drug Court Team meetings, Steering Committee meetings, meetings with Goodwill Industries and any other meetings requested by the Judge), participates in speaking engagements, and maintains a database that tracks program participants. The Drug Court Coordinator provides statistical information, such as the number of active participants, to the BCJDC Steering Committee. In addition, she procures gift certificates for the incentive program (described below), and revises program protocol/the Drug Court Manual and distributes it to staff.

Prior to the assignment of the current Juvenile Drug Court Coordinator in May 2002, there was one other Coordinator who had held that position from the inception of the program. There was a 6-month gap between Coordinators during which staff (addictions staff, case managers, or whoever else was available) filled in for that position, with some limited data entry being done by one of the Addictions Counselors.

Case Managers/Probation Officers. Case Managers work one-on-one with individuals who have been referred to BCJDC. One-on-

one relationships are intended to ensure that participants are held accountable for their behaviors when sanctioned, assure that they do well in the community and in school, and are abiding by curfew. Case Managers visit the participant homes and schools, and will visit participants who are in placement every 30 days. Case Managers report to the Drug Court Judge regarding participant progress every 30 days. If participants are placed out of state, Case Managers and other staff members will continue to receive progress reports from the placement agency.

Case Managers also facilitate cognitive-behavioral groups (MRT, as described above). Generally, they see participants more often than they would in non-Drug Court DJS case management work. BCJDC Case Managers are also more involved with families and provide other forms of support that diverge from DJS case management norms. These including working with families to acquire social services and other support they may need. Case Managers are also involved in aftercare support. This means that graduates, since they are still under the supervision of DJS, will check in with them.

Assistant Public Defender. The Assistant Public Defender (“APD”) acts as defense attorney for the BCJDC participants. This position is part of the Office of the Public Defender, a Maryland State agency. Prior to BCJDC participation, individuals may have private attorneys, or they may retain private representation if they have new charges. The challenge for the APD related to Drug Court is to be aware of his/her role as a team member in the program while also representing the legal interest of the represented juveniles.

From the beginning of a child’s participation in the program, the APD advises him/her on whether it is to his/her benefit to be involved in the program. To this end, the APD explains what BCJDC participation entails (including a description of possible sanctions for non-compliant behaviors). The APD han-

dles on average 10 client cases per court day (although this number has been lower since the beginning of 2006). In addition to the Drug Court duties described above, the Assistant Public Defender participates in Judge’s chamber conferences and bench conferences, is involved in Team and Steering Committee meetings, and represents clients in non-program court settings and follows them if they go to detention.

Social Worker. The Office of the Public Defender employs a Social Worker who helps in advocating for Drug Court participants in the courtroom. The Social Worker also provides support outside of the courtroom. This includes communicating with Case Managers and family members. The Social Worker’s role also includes screening candidate individuals to make sure they are appropriate for the program from the standpoint of the Office of the Public Defender. The Social Worker explains to the clients and family the role of the Public Defender in the program—and what the family’s role will be, as well as the roles of the other agencies and their representatives.

The Social Worker ensures that the BCJDC participants keep their appointments, will do home/school visits, and works directly with Case Managers/POs to support participants. He/she also works to ensure that participants follow BCJDC rules and that their Case Managers/Probation Officers are providing all the services they can to support program success.

Assistant State’s Attorney. The Assistant State’s Attorney assigned to BCJDC (“ASA”) is employed by the State’s Attorney’s Office, an agency of Baltimore City government. The ASA retains the role as prosecutor in the program. His/her agency represents the prosecutorial interest of the State to assure that participants follow through with the program and respond appropriately to any new charges. The State’s Attorney’s Office prosecutes new cases and

enforces the rules of probation. The ASA also attends monthly BCJDC sessions for participants, maintains personal contact with them and their counselors, and makes recommendations to the court. The ASA also helps to screen prospective participants and recommends them to BCJDC. His/her time is split between BCJDC and adult court.

As prosecutor, the ASA takes a different approach when dealing with BCJDC clients as compared to regular juvenile court. He/she views the BCJDC as a “behavior modification program,” with a goal of changing behavior through counseling and intervention, rather than through punitive responses to negative behavior. In Baltimore City, there is one ASA assigned specifically to BCJDC. This individual is expected to work closely with the APD assigned to BCJDC on a regular basis on all cases. As a result of this arrangement, the adversarial process is held in abeyance in BCJDC.

Law Enforcement. Law enforcement agencies have very little involvement in the BCJDC. Law enforcement’s main role is to make arrests. In most cases Baltimore City Police Department arrests individuals who eventually become participants in the Drug Court. If there are re-offenses, law enforcement will file charges and detain individuals on those charges. These individuals will be brought before the Judge with the APD and the ASA present. The Judge will decide what to do next. Officers do not attend those or any other BCJDC sessions.

Drug Court Team Training

Prior to the implementation of BCJDC in 1998, some members of the Drug Court Team attended a national training provided by the National Association of Drug Court Professionals (“NADCP”). This training gave prospective agency participants in the program a better understanding of their roles in working with Drug Court. The current Juvenile Drug Court Coordinator of BCJDC

has attended a national drug court conference and maintains Addictions Counselor certification. One of the treatment providers received continuing education in addictions and relapse prevention, training in substances that induce mental health problems, assessment and diagnoses, and MH disorders. The P-CM Supervisor has taken most of the same courses that the addictions staff has taken for certification, and attended numerous courses in cognitive behavior therapy, completing substance abuse assessments, the 12-steps to recovery, psychopharmacology of substance abuse, motivational therapy, and many more. He has also taken courses in delinquency, gang training and family counseling, and attended national drug court conferences. Due to lack of funding, the Case Manager currently receives all of his training within DJS. These internal trainings occur year-round. The Social Worker attends numerous in-state and out-of-state trainings and seminars.

Drug Court Fees

BCJDC participants are charged no fees by the program.

Drug Testing

DJS staff members administer random urinalyses and breathalyzer tests to BCJDC participants on a twice-weekly basis. Although the drug testing is random, all participants know that they will be tested at least once during the week while in Phase I, bimonthly in Phase II, and randomly (but less frequently) in Phase III. Although participants know they will be tested each week, they do not know when and they do not know how many times (e.g., they could receive three or more UAs). DJS determines random assignment. The participants are tested in the Drug Court treatment office, and the collected samples are sent out to a lab contracted by DJS. Samples can also be taken on the spot if participants report to DJS looking as though they are under the influence. Generally, on-the-spot testing will only provide immediate

results for a limited number of panels. When tests are sent to the lab, a wider variety of substances are assessed.

Rewards and Sanctions

REWARDS

BCJDC provides a variety of rewards for participants who consistently comply with program requirements. These rewards range from material rewards, such as gift certificates, to encouragement and social recognition, such as standing ovations during BCDJC sessions. If participants remain clean, they may have opportunities to travel outside of the city with BCDJC participant groups. For instance, several Drug Court participants were recently taken on a day-trip to New York City to see a play and eat dinner at the Hard Rock Café. Another group went on a tour of colleges in the Baltimore City area.

For every 30 days clean, participants receive \$25, usually in the form of gift certificates for stores such as Wal-Mart and Foot Locker. BCJDC currently has a grant from the Administrative Office of the Courts that pays for the incentives. In some cases, rewards might include paying for driver's education classes or GED tests. Participants are also taken to Orioles baseball games, Ravens football games, and Wizard basketball games, and participate in other special activities (such as trips to Six Flags or picnic outings). Other rewards may include reduction in the frequency of attendance at DJS case management meetings or reduction in the frequency of participation in group sessions. Rewards are recommended by Case Managers. Such recommendations go to the Case Manager Supervisor, who ensures that rewards are commensurate with what the program has been doing, and that there is an equitable distribution of rewards among participants.

SANCTIONS

On occasion, some types of participant non-compliance are discussed by the team and corrected without the application of sanctions. For example, the team may decide to informally counsel/warn participants of the consequences of continuing unacceptable behaviors. If non-compliant behaviors continue, then participants may be sanctioned. The first few sanctions can be administered by the Case Manager or the Addictions Counselor, who report imposing lower-level sanctions (such as writing an essay, performing community service, or attending an additional individual counseling session) to the Judge at the next court session. Staff members may also come to pre-court meetings and recommend sanctions. The Judge will decide whether sanctions are reasonable, particularly if they involve weekend detention in locked facilities—sanctions that only the Judge can impose.

Typically, sanctions include:

- Writing essays (can be imposed by Treatment Counselor during any phase).
- Community service hours (Case Managers may impose with the agency signing off).
- Attending extra NA meetings (one per week).
- Community detention, house arrest.
- Community detention with electronic monitors.
- 3-day detention (the participant is locked up for 3 days).
- 7-day detention sanction.
- 14-day detention sanction.
- 30-day detention sanction.

At the 11th and final sanction, when the program has tried a variety of approaches to get participants to change unacceptable behav-

iors and has been unsuccessful, Violations of Probation are filed and, if facts sustained, disposition occurs and participants are considered for commitment to DJS for appropriate services. Participants may then be considered for termination from the Juvenile Drug Court.

Usually, by the time program participants are in Phase III, they are no longer required to go to 5 self-help treatment (NA) group meetings a week (the requirement is reduced to 1 or 2 meetings). However, if the Judge suspects that participants are not complying with the requirements of BCJDC, non-compliant individuals may be required to attend group meetings more often.

Unsuccessful Completion (Termination)

BCJDC participants may be dropped from the Drug Court program for the following reasons:

- Weapons charges.
- Other serious or criminal delinquent or criminal charges.
- Violation of the Community Detention (“CD”) program (for example, cutting off anklet and going AWOL or frequenting unacceptable locations). CD staff may issue warrants for arrest. Violations, if consistent with continued negative behavior (e.g., continued running away while on CD), can lead to termination. CD staff will eventually refuse to take participants if this occurs. CD makes a report to the Judge on every participant.
- If participants turn 18 while in the program and have new charges as adults, depending on the result of adult proceedings.
- If serious mental health issues are discovered. In such cases participants may be treated at more appropriate facilities. The BCJDC remains responsible for

these individuals, but they do not remain directly involved in the program.

- If participants are recalcitrant (unwilling to comply with the expectations of the Drug Court) after significant periods of time (usually several months).

If recalcitrant, participants usually end up in placement (a locked facility) for 3 to 18 months. During that time, they are on inactive status with BCJDC (they do not receive treatment or attend sessions). If individuals are in placement for shorter periods of time (e.g., 30 days), they are sent back to BCJDC when the placement period ends, allowing them to pick up where they left off in the program. If participants are in placement for a full 6 months, they often can return to participate in the BCJDC aftercare program. If participants are in placement for a year or more, they may also return to aftercare.

It is rare for participants to be dropped from the program due to accumulation of 11 sanctions. However, receiving sanctions generally extends the length of time participants are in the program.

Participants may only be dropped from BCJDC by court orders that rescind their participation. Recommendations for this action require aftercare plans, which must be presented to and approved by the court. Aftercare plans may require residential placement or transfer to other programs offering community-based supervision.

Data Collected by the Drug Court for Tracking and Evaluation Purposes

At the beginning of BCJDC, few data were collected or statistics calculated on Drug Court participants. However, in all cases, the court is able to show how many individuals have come into the program and how many completed successfully (or not). The Coordinator maintains this information. It is also found in the court file/court order. Informa-

tion is included regarding what the order means for participants (e.g., they cannot leave the state, have to report to DJS for group, have to be in school, etc). DJS keeps information about Drug Court participants in the agency's ASSIST database. The court uses QUEST, which has information about charges or complaints against a respondent. QUEST also collects demographics, information about identification of participant parents, and telephone numbers.

The BCJDC Coordinator keeps records in a Lotus database called Approach. In addition

to participant name, date of birth, and QUEST ID, the Approach database has information about whether participants graduated, were unsuccessful in the program, whether sanctions were imposed, and participant phase status.

The Coordinator uses an evaluation instrument to contact families 6 months and 1 year after graduation. Although this method has been used for 2 years, limited information has been gathered to date.

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

This section lists the Ten Key Components of Drug Courts as described by the National Association of Drug Court Professionals (NADCP, 1997) and, incorporated into these Ten Components, the 16 juvenile drug court strategies, described by the National Drug Court Institute in 2003 (NDCI, 2003).³ Also listed are the research questions developed by NPC Research for evaluation purposes, which were designed to determine whether and how well the Drug Court demonstrates each key component. Each question is followed by a discussion of the practices of this Drug Court in relation to the key component of interest. Some questions require a comparison to other drug courts. In these cases, results from the National Drug Court Survey performed by Caroline Cooper at American University (2000) are used as a benchmark.

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.

This key component focuses on creating a drug court team that integrates substance abuse treatment services with juvenile justice system processing and supervision. The BCJDC operates with a team model fitting with this key component. Regular team members include the Judge, treatment providers, and State's Attorney's office. These groups seem to work well together. Treatment is a key component of the program and treatment representatives are present at Drug Court team meetings. Partners are invited to share feedback and participate in the Drug Court meetings. One key collaborative partnership under development involves a grant with Goodwill Industries to provide internship opportunities to Juvenile Drug Court participants.

However, clarifying the details of program operation and agency roles could enhance the relationship among team members. Team members do not have consistent, common understandings of the definitions of data elements and program terms, such as "active" status and when a participant has successfully completed the program. They lack a shared understanding of goals and reasons for program decisions. For example, many of the staff reported that they believe that the Department of Juvenile Service's restriction against hiring staff with records of drug use or criminal history unnecessarily limits the treatment component of the Drug Court and means the program cannot hire staff who would be most knowledgeable and able to relate to the Drug Court participants. However, these restrictions are not just specific to DJS (other state agencies also have them)

³ NPC felt that both the Ten 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, 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.

and may be less restrictive than those interviewed believed them to be.

Some team members view other team members as not committed to or engaged with the program. Broadening the team to include other key system and community stakeholders could strengthen it. Inclusion of representatives from the Baltimore City Public School System may contribute to program success.

The program has attempted a co-location model, with Case Managers and Addictions Counselors housed in the same building. Unfortunately the cultural differences (accountability focused vs. needs focused) between these groups of professionals have inhibited integration of services. Co-location has also complicated service delivery by these groups seeking to meet with program participants during the same time slots.

Suggestions/recommendations:

- Look for additional stakeholders (e.g., representatives from the school system) to add to the team to broaden the support base for the program. Work to engage community partners who can provide programmatic, financial and other forms of support to the program.
- Make sure that all stakeholders and partners have an awareness of community needs for the Juvenile Drug Court and their roles in meeting the needs, including whom the focus of services is and should be.
- Ensure all stakeholders and partners have a common vision and common understanding of program goals and resource allocation/commitments.
- Include all key stakeholders in planning and implementation of program changes.
- Consider in-house drug testing, or other less expensive drug testing strategies.

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.

The BCJDC seems to be doing well in this area. Those interviewed reported that the staff from the Office of the Public Defender and State's Attorney work well together, with the adversarial process held in abeyance in the BCJDC. The State's Attorney's office works with the treatment agency and has effective relationships with counselors. The Public Defender and State's Attorney agencies contribute to the program through screening and referring possible participants as well as working with participants to determine if Drug Court is a good fit for them. These agencies communicate regularly on cases.

The conflicts described by key stakeholders during the interviews related to other partners, and not to the relationship between the Office of Public Defender and State's Attorney's Office.

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.

Key stakeholders agree that the community needs this type of a program and that the juvenile justice involved youth in Baltimore City are high need and at high risk to re-offend. There seems to be general agreement about the target population. However, there is some belief that the lack of available services limits the population that the program is currently serving (primarily males, fewer numbers than the program was originally conceived to serve). The program offers comprehensive screening and assessment for youth in identifying mental health and other needs and/or issues. Key stakeholders reported that there is quick entry into Drug Court from referral, that referrals come from varied sources (Office of Public Defender, State’s Attorney’s Office, Masters, Judges, and Probation Officer), and that the program has a Policy and Procedures Manual listing requirements for entry into Drug Court and other information.

The major challenge for the BCJDC in this area has been the low numbers of participants. This problem has been attributed to a lack of treatment counselors and not to a problem with recruitment or identification of prospective participants. The program has never been at capacity (stated as 200 youth), and it is generally believed that the community need may be much greater than the current services that are being provided.

Suggestions/recommendations:

- Identify the specific needs in the community that can be met by a juvenile drug court and then work together to establish a program and services that meet that need. Program capacity should to be an

explicit goal. Strategic planning for the program should be pursued on a cooperative basis among agency stakeholders to address obstacles to increasing program capacity.

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

Respondents described a variety of services that are available for Drug Court participants, including MRT, individual therapy, anger management, grief counseling, life skills training, driver's education, limited family therapy, referrals to mental health services, access to limited inpatient treatment, and continued support through the aftercare program. The Drug Court is a certified outpatient treatment setting. The Office of the Public Defender's Social Worker was commended for providing advocacy and role modeling. The program focuses on developing educational and vocational skills: participants must be attending an educational or vocational program or working.

The program also maintains linkages with the Family Preservation Initiative (through the Maryland State Department of Human Resources), which provides the services of a Social Worker in the home. In addition, the Judge has the authority to issue warrants to parents who do not attend the required Drug Court sessions with their children.

Many key stakeholders, including participants, discussed challenges the participants and their families have in meeting what they see as the unrealistic expectations of the program. Phase I is particularly challenging. During this phase participants are expected to attend treatment every weekday and see their Probation Officers every day. These demands create frustration and scheduling conflicts between team members (Probation and Treatment staff overlap and struggle with

opportunities to meet with the youth on their caseloads), and set all but the most functional and dedicated youth and families up for failure. In addition, although the program focuses on educational and vocational goals, participants are unable to work during Phase I. This eliminates an important incentive for some youth and places additional burden on families who rely on the youth's income.

Working parents/guardians/custodians also have difficulty attending court sessions when they need to be at work. Some parents reported that the program was a financial burden. Parents requested more flexible court times—in particular to have the sessions available at different times of the day or on different days of the week.

Young people who participated in the focus group reported that juveniles and adults were in the same group session at one treatment setting. If true, this practice is not consistent with culturally and developmentally specific services, and is not tailored to the needs of adolescents. Additionally, services are primarily focused on males. If the program plans to include females, work needs to be done to provide gender-specific services.

Respondents suggested several additional resources that could augment the program. These include a mentoring component (e.g., Big Brothers/Big Sisters) and additional educational and family services.

Suggestions/recommendations:

- Review program requirements and goals. Is the dosage and intensity (frequency of required contacts) contributing to positive or negative outcomes? If high frequency of contacts is determined to be necessary, the program should consider how to accomplish those contacts with decreased burden on youth and families. For example, staff could conduct community, school, or home visits, or make some of the contacts by phone.

- As part of the program model review, link activities to goals and objectives (e.g., create a logic model with the Drug Court team). Consider adding creative, concrete, and educational activities to demonstrate what participants have learned and their progress through the Drug Court phases (for example, ask youth to research a topic they are interested in and write a paper on it). Strength-based practice encourages the development of community connections and engagement in pro-social activities (for example, ask participants to volunteer with local organizations and report on their experience in their groups).
- As part of the program model review, investigate whether caseload weighting would be possible and practical for the Drug Court. Participants in Phase I, for example, likely require more staff time to monitor than participants in the aftercare program. Developing a consistent system for identifying program participants at different levels of intensity requires group discussion and effort, but may more accurately reflect the demands on staff.
- Develop alternative placements and independent living tracks for youth who are unable to return home or for whom returning home would greatly jeopardize their ability to stay drug and crime free. Examples include group home settings or shared living environments. However, these strategies would need to be paired with concrete activities to identify and engage positive, supportive adults to provide support to the youth.
- Prioritize efforts to expand family therapy services, as these were seen as very helpful and greatly needed.
- Continue to work on developing relationships with the State Department of Edu-

cation and Baltimore City Public School System and other educational resources.

- Schedule training or technical assistance for program staff in strength-based, family-centered, and gender-specific services.
- Engage agencies that can (or do) provide services to BCJDC participants as stakeholders to create more buy-in for the program. For example, the program may want to engage—and define the role of—Baltimore Substance Abuse Systems as a stakeholder in the BCJDC.

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

Research Question: Compared to other drug courts, does this court test frequently?

Juvenile Strategy #14: Drug testing

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

The BCJDC conducts random, observed drug tests, both urine and breathalyzer. Those interviewed felt that testing should happen more frequently, though a truly random procedure may minimize the need for greater frequency.

Suggestions/recommendations:

- Update the Policies and Procedures Manual to reflect desired practices, after program services and activities are reviewed. Assign this task to a subgroup based on role definitions that occur related to Key Component #1.

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

Research Question: Do program staff work together as a team to determine sanctions and rewards? Are there standard or specific sanctions and rewards for particular behav-

iors? 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.

The BCJDC uses a variety of rewards and sanctions, using informal approaches to non-compliance initially, and responding with up to 11 graduated sanctions as needed. The primary incentive to enter and complete Drug Court is a non-delinquency finding on all charges for which participant is on probation. However, as discussed earlier, the program needs to review its program model and activities to ensure that unreasonable program expectations are not being misinterpreted as intentional non-compliance.

Suggestions/recommendations:

- Implementation of a strength-based assessment process could help staff identify incentives unique to adolescents or to individual youth, which may be more powerful than any currently in use. For example, earning the privilege to participate in a recreational activity, receiving the attention/time of a valued adult, participating in volunteer/arts/sports, etc., activities, may all be incentives and rewards that could create engagement and commitment to be successful in this program.

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

Research Question: Compared to other drug courts, does this court's participants have frequent contact with the judge? What is the nature of this contact?

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.

The BCJDC will benefit from the ongoing involvement of Judge Young (originating and current Judge), who will be presiding over the Drug Court until February 2009. This level of consistency means that participants will be able to develop a relationship with this judge, enhancing their potential for success. Low enrollment has hindered the operation of the Drug Court, for example, by leading to the cancellation of some Drug Court sessions.

Suggestions/recommendations:

- As part of the program model review, carefully consider the frequency of court reviews, to encourage consistency, rapid response to non-compliance, and ample opportunities for the Judge to note positives and praise youth who are working hard and/or making progress.

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.

The BCJDC is operational, and many stakeholders felt that the program activities support the program's goals. Information on Drug Court participants is maintained by the Coordinator, by DJS staff in ASSIST, and by the court in QUEST. However, it appears that while data definitions and policies/procedures exist, there is a need for extensive discussions, staff training, and staff supervision to ensure consistency in definitions, data entry, and reporting. Missing data, inaccuracies, and inconsistencies are common and hinder the ability of this evaluation team, as well as the Drug Court team itself, to utilize program data. The BCJDC has no integrated management information system, which means that different stakeholders are looking at different sets of numbers for their interpretations of what is happening at the program level.

Suggestions/recommendations:

- Determine essential data elements (NPC has a list that can be provided to the program) and consistent data definitions; then ensure staff members are trained on them. Implement regular supervision of all staff members who enter data, to answer questions and to assess consistency and accuracy. Assign someone the role of data manager or data quality specialist, and create tools (such as monitoring reports) to ensure this role can be adopted successfully and efficiently.
- Utilize the Drug Court team, steering committee, or other group to review summary reports and other program data. This process will ensure communication is occurring about program findings and interpretations, and that misinterpretations of data and findings will be identified and corrected.
- Make sure that appropriate data are being collected to answer the key research questions of interest to the program and to key stakeholders.

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?

All program staff and team members need to have an understanding of their roles and how to fulfill their roles. As a result, continuous training is key to the success of the Drug Court program. Team members received NADCP training prior to implementation of the Drug Court, and have since attended conferences. However, with the recent complete turnover of counseling staff, it is unknown whether new counseling staff members have had drug court training or experience with this population.

Suggestions/recommendations:

- Establish a training policy and training log. Create a list of minimum training requirements for Drug Court staff, some generic to drug courts overall, and some specific to the person's role, if applicable. Require all Drug Court team members to record when they received various trainings.

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: Compared to other drug courts, 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.

Respondents discussed a range of agencies and community partners with links to the

BCJDC or its participants, including the Department of Health and Mental Hygiene, Baltimore Mental Health Systems, psychologists, educational programs and teachers, the Department of Social Services, substance abuse treatment programs, the Family Preservation Initiative, the Department of Education, Baltimore City Community College, and the Choice Program (monitors school attendance and makes referrals to GED programs). Program participants reported receiving educational support and job training through participation in the BCJDC.

Suggestions/recommendations:

- The program could benefit from explicit efforts to identify new community partners and strengthen relationships and increase communication with the agencies listed above.
- Add a youth advocate position to conduct home visits (in-person curfew checks, school attendance checks, random observed UAs, etc.) and to help assist participants and their families to access any services available in their community.
- Ask the Department of Education to provide training for probation/case management staff on special education eligibility and the placement process, so they can become better advocates.

A FUTURE COURSE FOR THE BALTIMORE CITY JUVENILE DRUG COURT: 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 clients that frequently have serious substance abuse treatment needs. Juvenile drug courts add the challenges involved in working with youth, and the additional stakeholders of parents/guardians/custodians, schools, and recreational resources. Adolescents are also a generally underemployed group and face more obstacles than adults in linking to the legitimate economy.

The challenges and strengths found in the BCJDC 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 to connect the recommendations in the prior section to the action plan that follows.

Community Level

Juvenile justice involved youth with substance abuse issues must be seen within an ecological context; that is, within the environment that contributes to their attitudes and behaviors, risks and protective factors. This environment includes their neighborhoods, families, and schools. We must understand the various social, economic and cultural factors that affect them.

Social service and criminal/juvenile justice systems respond to community needs. However, to be most effective, they need to clearly understand those needs. They need to analyze and agree on the problem to be

solved, what the contributing factors are, who is most affected, and what strategies are likely to be most successful at addressing the problem. An analysis of need will begin to define what programs and services should look like, what stakeholders exist, and what role each will play.

Agency Level

Once a need is clearly defined and the stakeholders identified, the next step is to organize and apply resources to meet the need. 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 the common goals.

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. The services that are brought together, or created, in this manner can make more efficient use of public funds. They will also be most likely to have a positive impact on the issues being addressed. Organizational and procedural decisions can then be made, tested, and refined, to arrive at a flow of services and set of daily operations that work best for the community.

ACTION PLAN FOR PROGRAM IMPROVEMENT

In this section, we offer suggestions for program improvement that we hope will support the development and success of the BCJDC. According to the three areas of change discussed in the previous section, we propose the following activities. NPC is available to provide support in the form of training, technical assistance, strategic planning, and facilitation to help BCJDC reach its program improvement goals.

Community Level

The first step in fully understanding any problem is to conduct a comprehensive needs assessment. Needs assessments help provide an illustration of the context of the problem, including community, agency, and youth and family characteristics. They help separate myth from reality and assumptions from confirmation.

A needs assessment helps bring community partners to the table, clarify perceptions and issues of multiple stakeholders, and build common understanding and support of the needs being identified. It can deepen community ownership of the resulting programs and enhance connections with youth in need.

Baltimore City has many potential stakeholders and partners who have not yet been engaged in the BCJDC program or whose participation might be enhanced. It would be worthwhile to investigate the roles they could be willing and interested in playing. The following list is a non-exhaustive set of potential partners:

- The City of Baltimore
- Goodwill Industries and other organizations that provide employment training and support
- The business community
- The faith community

- Public schools
- Private schools
- Arts community
- Other nonprofit organizations

By undertaking a research-based process, Baltimore City Juvenile Drug Court could be on the front line of creatively and effectively addressing what are nationally known as serious community issues: juvenile crime and substance abuse. NPC can provide this service as well as assist in the facilitation of community and agency dialogues translating the findings of the needs assessment into strategies for addressing emergent needs.

The process that takes place after a needs assessment is different in every community and the details of resulting strategies may be unique. For example, the community may be willing to support diversion or early intervention programs for certain groups of juvenile offenders, partners may decide to create a community advisory board that provides guidance, policy recommendations, advocacy, and annual review of the progress of the program and participating youth.

The needs assessment should include discussions that result in answers to the following questions:

- What is the scope of the problem?
- Who is affected?
- What programs/services are needed to support young people in our community/neighborhoods?
- How does a juvenile drug court fit into the continuum of care for high risk/high need children/adolescents in Baltimore City?
- What is the level of need for a juvenile drug court? How big does the program

capacity need to be to meet the need?
 What ancillary services need to be in place to support the drug court's core services?

Agency Level

Once a thorough community needs assessment has been completed, relevant criminal justice, social service and other agencies should be engaged to develop responses to identified needs. The needs assessment will identify gaps in service as well as creative strategies for meeting community needs, and community partners who may be willing to provide support for social service and juvenile justice agencies. These community partnerships can add valuable resources to enhance existing services.

Discussions need to occur with current stakeholders and with new sets of stakeholders to answer the following questions:

- Who are the participating agencies?
- What is the role of each agency in the problem/need and in the possible solutions? What is the role of each agency in juvenile drug court?
- What resources do they have to offer?
- What stakes do they have? How do the service needs identified at the community relate to agency missions? What costs do the identified needs create for them? What incentives or potential resource savings could be identified by solving the problem or finding community partners to participate?
- Is the current structure of the drug court and commitments to the drug court meeting the identified needs? If not, how can the program or services be structured to better meet the needs?

This level 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 an ongoing relationship with the resulting program and with the other participating agencies and key stakeholders. The importance of building inter-agency personal understandings cannot be overemphasized.

Program Level

From the activities at the community and agency levels should flow essential program elements and services. The program level is where implementation occurs and where structures, policies and procedures can be put in place that reflect the 10 key components of drug courts and 16 strategies of juvenile drug courts and which fit best in the local context. For example, discussions and activities at the program level will likely include the following topics:

- Administration and operational roles: Do we have a coordinator, drug court team, policy board, steering committee, etc.?
- Defining roles
- Staff hiring and training
- Staff supervision
- Data management
- State requirements or expectations
- Reporting

NPC can help facilitate planning and implementation sessions as well as provide technical assistance on the 10 key components and 16 strategies and address challenges identified in the process evaluation. We can provide support and guidance regarding essential data elements to collect and how to maintain databases and use local data. BCJDC will need to understand its parallel roles as:

- A community program,
- Part of a local continuum of care (with local stakeholders), and
- As a part of a statewide initiative (with state level stakeholders).

The first step in this process at the program level should be logic model development with the drug court team/stakeholder group. This activity will help all team members come to a common understanding of the program's target population, overarching goals, objectives, and activities to achieve those objectives. The group will then generate a list of resources, both existing and desired, and the partner agencies/organizations, both ex-

isting and desired. The role and responsibilities of each person and agency must be discussed and defined.

Communication strategies must be created and tested, so that all team members and partners know how to access information and find answers to their questions. Assigning someone, such as the coordinator, the role of liaison and communications hub is useful, as is investing in a listserv and/or a Web site containing local drug court resources and links to national groups and materials. A decision-making and advisory structure must be developed, so that lines of authority are clear and a system is in place for offering suggestions and praise, and airing grievances.

SUMMARY AND CONCLUSIONS

The Baltimore City Juvenile Drug Court fulfills many of the 10 key components and 16 strategies through its current policies and structure. The program integrates substance abuse treatment and juvenile justice system case processing; uses a non-adversarial approach between the Office of the Public Defender and the State's Attorney's Office; identifies youth and places them in drug court quickly; provides access to a continuum of treatment services; conducts frequent, random drug tests; has a variety of sanctions and rewards to encourage compliant behavior; and maintains ongoing judicial interaction with participants.

There are several areas in which the BCJDC should and can make program improvements. Communication between existing partners about the roles and responsibilities of each agency, how the program's activities are expected to contribute to desired outcomes, and common service definitions would increase program quality and enhance understanding of the program across stakeholders. Data systems development and data quality need to be improved. Suggestions include establishing (and training staff on) common definitions and data entry procedures, and using an integrated management information system. These and other activities will also contribute to strengthening the relationships among staff at the partner agencies, which will enhance program functioning and staff satisfaction.

Interpretation of the findings of this process evaluation is provided in an analytic frame-

work that distinguishes between community, agency, and program level issues. Understanding the needs of the Baltimore community and the impacts of a youth's environment on her/his behavior is crucial to establishing a program that best serves the population. Bringing the partner agencies to the table and reconciling misunderstandings and role confusion will also enhance program quality. Finally, establishing consistent operational guidelines will provide an efficient and effective structure for service delivery.

The Action Plan suggested for the BCJDC includes the following primary activities:

- Comprehensive, research-based community needs assessment, including identification of the scope of the need for a juvenile drug court in Baltimore City
- Strategic planning involving drug court team and other partner agencies
- Discussion and negotiation of roles and responsibilities reflecting agency commitments to the drug court program
- Logic model development
- Review of program model and activities, and how they meet the needs of participants
- Establishment of a set of essential data elements for program monitoring and evaluation and a data system for housing this information

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**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, re-wards/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 www.npcresearch.com.

APPENDIX B: FOCUS GROUP RESULTS SUMMARY

Focus Group Results Summary

As described in the methodology, focus groups were conducted with current BCJDC participants in May 2006 and with parents in July 2006. Six Black male Drug Court participants attended the current participant focus group. Four of the participants were in Phase I, and the other two were in Phase II. One person had been in the program for one year, one person for two years, and four persons were in the program less than one year.

Of the 50 parents who were invited to participate in the focus group, three attended: two mothers and one father. All attendees were parents of sons in BCJDC.

The main topics for questions asked at the focus groups included what the participants liked about the Drug Court Program, what they disliked, what parts of the Program they felt supported their success and what parts made it more difficult to succeed, whether they were treated fairly, and finally, any suggestions they had for improving the Drug Court Program.

What they liked:

Participants:

- It's a reason to be clean.
- Structure.
- I wanted to go back to school, and they helped me get my GED.
- They have job training.
- If you graduate, your record is clear.
- [counselor] is "aiiight."

Parents:

- This year he [my son] has done a turnaround. He hasn't used since he has been in the program. All of his UAs have been clean. But he took the sessions as a joke at first, and didn't come in as he is supposed to. Now he is coming and participating and opening up to me and to his counselors.
- They don't let up. Some counselors in different settings say, "That is all." But they stick with them to the end. That is all of them. So I know what is going on. They let the parent in on it, too.
- They call me, too. They make regular calls.
- [counselor] is excellent.

What they disliked:

Participants:

- Going to court every month.
- Coming in [to DJS] every day (one comes in twice a week).
- Sanctions for every little thing (e.g., missing a day of school).
- Now we got to go to school every day.

Parents:

- Sometimes these children are detained downstairs [detention], and there are other psychological problems going on that are not being met.

What supported your/your son's success in Drug Court?

Participants:

- You've got someone who wants you to do right, and they say it.
- Some of them care.
- My counselor's cool.
- The family lady helped me out. She come to our house to help families get together.
- The Judge told her I need to write what I want to be in two years, and she helped me do that.
- With that program, they help you see your goals.
- They paid for me to go to driving school.

Parents:

- Next week [counselor] will be closed for him, but she gave me a directory of services where if my insurance won't cover it, there is a scale of fees. That was good of her, because some could have said, "That is the end; now he's done."
- My son has had a lot of problems with grief. We had death after death after death. [counselor] helped with that a lot.
- [counselor] was excellent because she was real open and he would open up to her and it was confidential. She wouldn't tell me.

What made it difficult to succeed:

(What they felt was least helpful, or was a barrier, in completing the Program)

Participants:

- People don't help nothing.
- Because I am here, I can't get a job [participants in Phase I aren't allowed to work].
- They don't let you know all of this before you come in. They make it seem real easy.
- They have adults and juveniles in the same group session [at Echo House].

Parents:

- The penal system isn't designed to help individuals. It is revenue for the state.
- A lot of these [young people] are angry, especially about their home setting, and if it isn't corrected, they become angry adults and can go out and harm people. [this parent wanted counseling for her son & others when in detention].
- They have unresolved issues.
- Stop running us down here all the time! We can't take off from our job all the time...
- It's a financial burden for the family.
- Sometimes they start court in the morning and the docket is filled and they come back in the evening. It is scheduled according to how many the State's Attorney can see to re-set, but not our schedule.

Were they treated fairly?

Participants:

- You don't know if they will send you home or not [from court]. Your PO tell you you're doing good, and when you get to court the Judge says [something different].
- In 2 years, I went AWOL 4 times because they're lying.

Parents:

- The officers which are part of it are deceitful and beat the children up...Even if they *are* selling drugs, the Special Unit Task Force is taking their money.
- The law is a step away from being a criminal. Half of them are living on the county and with newly built homes. Some are working part time. If you are going to be right, be right all across the board. This is going on all over.
- A lot of people are bipolar or schizophrenic and they [police] approach them the wrong way.

Suggestions for improvement:

Participants:

- It should be 5 months, and then you are out.
- They try to help you get on the right track, but it's too hard.

Parents:

- [when in detention] there should be some kind of counseling, not necessarily licensed.
- They should have someone talking to them about what is going on.
- More counseling; more family sessions.
- Sometimes they complete the program, but they need to go longer. It took a while for these children to develop, and it won't disappear in a year. It may take longer.
- If they could schedule court in the afternoon, not just in the morning.
- Or on the day I am off. I am off on Monday.