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Clackamas County Juvenile Drug Court Outcome Evaluation

Final Report



Submitted to:

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Executive Summary

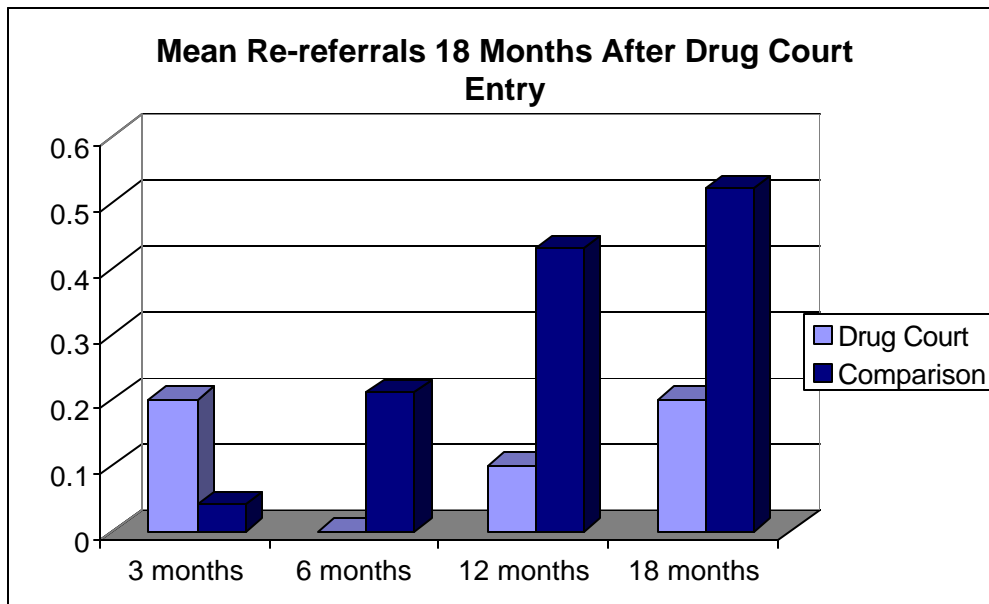
In November 2001, the Clackamas County Juvenile Drug Court (CCJDC) began operations. An implementation grant from the DCPO in September 2001 provided funds for evaluation, and NPC Research was subsequently hired to perform a process and outcome study of the Drug Court. The process evaluation was completed in July 2003. The executive summary for the process evaluation report can be found in Appendix A of this document.

This report contains the CCJDC outcome evaluation performed by NPC Research. Because the CCJDC is relatively small and was implemented recently, the entire population of drug court participants (except for those who had started less than 6 months before the time of outcome data collection) was used in these analyses. The drug court participant outcomes were compared to outcomes for a matched group of offenders who were eligible for drug court during a time period before the CCJDC program was implemented. Also examined were changes in outcomes over time (such as drug use) within the population of drug court participants.

Following is the list of research questions asked in this evaluation and the outcome results for these questions.¹

Research question #1: Does participation in drug court, compared to traditional court processing, reduce the number of re-referrals for participants?

Figure 1:

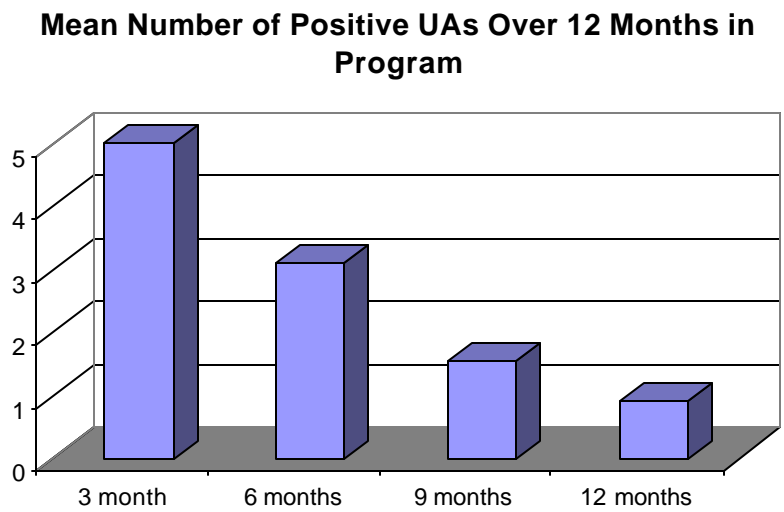


¹ Because the sample sizes were quite small (31 drug court participants and 29 comparison group members) most analyses did not have enough power to produce statistical significance. With the small number of Drug Court participants and the recent implementation of the program, most of the outcomes examined occurred while the participants were still in the program and the results must be considered in terms of apparent trends rather than in terms of statistical significance. As the program grows and expands over time, further evaluation can examine a greater sample size and outcomes that occurred after program completion, providing verification of these results.

The figure above demonstrates that, aside from the first three months in the program, Drug Court participants are re-referred much less often than individuals who did not participate in the Program. In the first three months, Drug Court participants are re-referred more than twice as often as the comparison group members. One explanation for this is that juveniles who enter a strict program will feel somewhat rebellious and need to test the limits at the beginning. This phenomenon has been demonstrated in other programs for high-risk youth (Mackin, 2003).² In order to keep the “testing limits” effect from influencing the later program outcomes, the rest of the recidivism results (at 6, 12 and 18 months) were presented with the first 3 months recidivism removed. Overall, this figure shows a clear positive trend for Drug Court participants.

Research question #2: Does participation in drug court reduce levels of substance abuse?

Figure 2:



Drug Court participants who had at least 12 months in the program (graduates, current participants and unsuccessfully terminated) were included in this analysis. Figure 2, above, displays the mean number of positive UA per participant in 3-month increments from entry to 12 months into the program. This figure shows a clear decrease in positive UAs over time in the program indicating that drug use is decreasing.

Research question #3: How successful is the program in bringing program participants to completion and graduation within the expected time frame?

The average time from program entry to graduation in this yearlong program is 14 months. It is very common for drug court participants to take longer than the intended duration of the program (Cooper, 2000³). Fourteen months is actually relatively close to the intended 12 months for the CCJDC program. Further, the 12-month time limit is actually a minimum for the program, so it is the program’s expectation that the actual time might be somewhat longer.

² Quote from the Juvenile Crime Prevention Final Report (July, 2003). This report can be found at <http://www.ocjc.state.or.us/JCP/JCPEvalFinalReport0703.pdf>.

³ American University Web site

Another measure of the success of treatment programs in bringing participants along in treatment is retention rate. In this sample of CCJDC participants, the program demonstrates a retention rate of just over 50% (16 graduated or currently participating, and 15 terminated). This is better than most standard (non-criminal justice related) treatment programs (Cooper, 1997) and retention may increase as this relatively new program fine-tunes its process.

Research Question #4: How has the program impacted the participants and their families?

This question was measured through individual phone interviews with the youths and parents in the CCJDC Program. Parents and youths felt that the Drug Court Team listened to them and that their opinions were valued. They gave examples of how the Drug Court Team had adjusted program process in response to parent and youth feedback in order to help the youths and their families to succeed.

The vast majority of those interviewed believed that their family relationships had changed for the better. “We are now more honest with each other. We communicate more and laugh more.”

All those interviewed reported that it was a combination of Program features that was responsible for the change in their family relationships. They cited the whole Team as being important in the positive impact the program had on their families. Parents and youths gave examples of several Program features that they felt were particularly effective including the Youth Therapist, the Family Therapist, the drug testing, their relationship with the Judge and the accountability expected by the Program.

Research Question #5: What participant characteristics predict successful outcomes? What are the commonalities of clients terminated from the program? How do those terminated from the programs differ from those who have graduated?

Correlations between the characteristics of those who graduated and those who terminated were run with graduation status and with number of re-referrals. The main characteristics that were correlated with graduation status and re-referrals were age and drug of choice. Youth who were older at the time of entry were more likely to graduate. Youth who used methamphetamine as their primary drug and alcohol as their secondary drug were less likely to graduate and more likely to be re-referred.

To further investigate the differences between those who graduated versus those who terminated, t-tests were run on several participant characteristics. There was no noteworthy difference in gender or number of prior referrals for those who graduated versus those who terminated. The length of time spent in the program was greater for those who terminated than those who graduated, illustrating the common tendency of drug courts to be reluctant to “give up” on any participant. Pragmatically, investing a large amount of resources into those who will eventually terminate is an expensive course of action. The CCJDC may consider introducing stricter policies regarding how long they are willing to continue working with those participants who are struggling or the Program may choose to enhance and adjust the services provided to participants in order to increase the chances of success. The CCJDC has received an enhancement grant from BJA and is in the process of enhancing its services.

Overall, the main predictors of success (i.e., graduation and fewer re-referrals) appeared to be greater age, a greater degree of readiness-to-change, and (unsurprisingly) a smaller percentage of positive UAs (under 11%). Conversely, the main predictors of termination appear to be lower age, a lesser

degree of readiness-to-change, a high percentage of positive UAs (over 11%), use of multiple drugs, and methamphetamine as the primary drug of choice with alcohol as the secondary drug of choice.

Conclusion

Taken as a whole, the outcome results for the CCJDC appear to be quite positive. The number of re-referrals for those who participated in the program, whether they graduated or not, was lower than that for the comparison group. The mean number of positive urinalyses over time provided evidence that participant drug use was, indeed, decreasing over time spent in the program. Parents and youth felt that the Drug Court Team listened to them and that their opinions were valued. The vast majority believed that their family relationships (and their lives) had changed for the better.

As illustrated by the results of Research Questions #5, no single program can work for every individual. As this Drug Court is interested in expanding, it is recommended that the CCJDC Team continue to watch the characteristics of both those who graduate and those who terminate as the program matures. If the characteristics described above (or others discovered over time) are truly predictive, the Team can use this information to both determine a youth's appropriateness for the Program and to seek out specific services that can be added to the program to address specific participant issues (such as multiple drug use) that appear to lead to unsuccessful termination.

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Introduction

Background

Clackamas County is part of the tri-county metropolitan area surrounding the city of Portland, Oregon. It continues to be one of the fastest growing counties in Oregon. The Clackamas County Circuit Court is the second busiest court in the state and it has supported a growing caseload in recent years. The Clackamas County Sheriff estimates that 70% of all those arrested in the county are abusing alcohol and/or drugs at the time of arrest. During a three-year period in the mid-1990s, the sheriff reported a 38% increase in drug-related cases. According to Clackamas County Juvenile Department statistics, 80% of all youths on their caseloads are active substance abusers. These statistics led the county to begin planning a juvenile drug court. In January 2001, the Drug Court Program Office (DCPO) awarded Clackamas County a drug court planning grant.

In November 2001, the Clackamas County Juvenile Drug Court (CCJDC) began operations. Although the funds to hire an evaluator were not available when the drug court was first being implemented, the county had drug court planning staff attend drug court sessions in other counties and attend workshops on drug court evaluation in order to prepare for future studies. Arrangements were also made to collect client data in a drug court database, the Oregon Drug Court Case Management System (ODCMS), which is used in several counties in Oregon. In September 2001, Clackamas County received a drug court implementation grant from the DCPO. This grant provided funds for evaluation, and NPC Research was hired to perform a process and outcome study of the Clackamas County Juvenile Drug Court.

This report contains the CCJDC outcome evaluation performed by NPC Research. The drug court participant outcomes were compared to outcomes for a matched group of offenders who were eligible for drug court during a time period before the CCJDC program was implemented. The first section of this report is a brief summary of the CCJDC program process (An executive summary of the process evaluation can be found in Appendix A). Following the process summary is a description of the methods used to perform the outcome evaluation—including sample selection, data collection and analysis. Section 3 provides the results of the outcome analyses and an interpretation of these results. A summary of the results with overall conclusions can be found at the end of this report.

CCJDC Process Summary

The Clackamas County Juvenile Drug Court Team agreed that their Drug Court has three main goals: 1) Reduce recidivism; 2) Reduce drug and alcohol use; and 3) Increase family functioning. These goals are to be attained through changing client perceptions of drug use and changing family systems.

The total number of intended participants, as stated in the original grant proposal, was estimated as 140, including family members. Forty-three youths were to be served by the program over the two-year period. By the end of April 2003, 35 youths (30 males and 5 females) had entered the Juvenile Drug Court.

The target population for the Clackamas County Juvenile Drug Court is 14-17 year old males and females who are arrested for criminal offenses, excluding violent (person felony) crimes. Although the original grant called for youths to be eligible up to age 18, this was changed because 18 year olds are not eligible for many of the services available to those under 18. Juveniles are referred to Drug Court through the Juvenile Department, their attorney, or by the Judge. Youths entering the program are required to make an admission to either a new charge or a probation violation. Youths are not required to have a drug-related charge to enter the program (The referral process will be described in more detail in the section on sample selection).

If the youth comes into Drug Court on an existing charge, then that charge is dismissed upon successful completion of Drug Court. If the youth comes into Drug Court on a probation violation, the probation violation is dismissed upon successful completion of Drug Court, but the initial charge is not dismissed.

There are four phases plus Aftercare in the Clackamas County Juvenile Drug Court program. The program is a minimum of one year, with each phase consisting of specified treatment objectives, and therapeutic and rehabilitative activities. In general, Phases 1 and 2 are more educational while Phases 3 and 4 are more about processing in regard to homes, relationships, and sobriety. The Drug Court Team considers the final three months of the program Aftercare, although the participants do not graduate before completing the Aftercare portion of the program. The purpose of the Aftercare Phase is to release youths and families from dependence on the program and give youths and families an opportunity to practice what they have learned in the first four phases of treatment.

The CCJDC uses a single treatment provider model. Clackamas County Mental Health is the only treatment provider for the CCJDC. The treatment approach varies to best meet the needs of the client. Most treatment approaches are based on holistic, systemic, strengths-based, motivational, cognitive behavior, and family-centered theories.

Drug Court takes place once a week, on Tuesday, and lasts for approximately an hour and a half. All parent(s)/guardian(s) and youths are required to stay for the entire session. Approximately 15 parents and 12 youths attend each session. Drug Court staff members who attend court include the Judge, Drug Court Coordinator, Case Manager, Treatment Provider, Family Therapist, Prosecutor, Defense Counsel, Mental Health or Juvenile Department Supervisor, a Deputy from the Sheriff's Department, and the Recreational Group Facilitator. Frequency of attendance for participants depends on their phase requirements.

The Drug Court performs drug tests (urinalyses) on a random basis. The Drug Court Case Manager keeps a monthly calendar with the urinalyses (UA) collection from each youth randomly dispersed by day. On the weekend, the youths call in on a UA phone line through the Juvenile Reception Center. Youths whose names are on the recording must come in to the department for their UA at the designated time.

Rewards are given to Clackamas County Drug Court participants for individual progress, consistent compliance with Drug Court requirements, and for reduction in use. During the Tuesday meeting, Team members suggest giving rewards to those participants they feel are doing well and deserve recognition. Material rewards were given more frequently when Drug Court first started, but when the Team realized rewards did not need to be material to hold value, they began giving more personal recognition along with smaller material rewards.

The Drug Court Team uses a variety of sanctions. In the early phases, the Team determines which sanctions to impose, but in the later phases the Judge looks for more parental responses to the youth's actions. The goal is for the family to gain back control and begin to hold their child accountable through appropriate responses. Sanctions are individualized and are chosen to suit the youth's specific situation, although there are some standard sanctions for specific behaviors. The standard sanctions are graduated and often start with community service and end with termination.

Unsuccessful termination from the program results from serious non-compliance or a continued lack of progress in the program. Any combination of the following factors occurring over an extended period of time could lead to a termination: new serious crimes, serious or violent behavior, continued drug use, not attending groups or court, running away for a week or more, chronic failure to cooperate with treatment or home rules, and if foster care and/or inpatient treatment have been tried without success. Termination is based on the youth's individual circumstances and needs, as well as on what prior resources have been tried.

The first graduation for the Clackamas County Juvenile Drug Court took place in February 2003, with six graduates. In addition to completing each phase of the program, other specific graduation requirements include: testing negative and maintaining abstinence from drugs during all of the Aftercare Phase (90 days); involvement in or completion of an academic or vocational training program and, if appropriate, the obtainment of consistent employment. In addition, participants must demonstrate an understanding of the personal problems involved in drug abuse, criminal behavior, and relapse prevention and must obtain approval to graduate from Drug Court Team.

The process evaluation final report performed by NPC Research was submitted to the Bureau of Justice Assistance in July 2003. It contains a detailed process description, a presentation of the results of client focus groups, and an evaluation of the CCJDC process in regards to the Ten Key Components of Drug Courts (developed by the NADCP in 1997). The executive summary for this report can be found in Appendix A.

Outcome Evaluation Methodology

Study Design

The research strategy used by NPC Research for this outcome evaluation was to identify a sample of participants who entered Drug Court and a matched historical comparison sample of individuals who were eligible for Drug Court but who received traditional court processing before the CCJDC program was implemented. Because this drug court is both small and relatively new (beginning late in 2001), the Drug Court sample consisted of the entire Drug Court participant population except for those who had entered the Drug Court less than 6 months from the time of the outcome data collection. Both groups were examined through existing administrative databases from the date of the initial contact with the Drug Court program (or the equivalent) through November 2003. In a small number of cases, this allowed for follow-up for close to two years post-drug court.

The evaluation team utilized data sources on criminal activity (described below) to determine whether Drug Court participants and the comparison group differed in re-referrals. Also examined were the effectiveness of the program in reducing client drug use as well as whether there were any

clear predictors (such as demographics, prior criminal history, readiness-to-change, number of relapses, number of treatment sessions attended) of unsuccessful termination, graduation, or reduced recidivism.

This outcome evaluation was designed to answer the following research questions:

1. Does participation in drug court, compared to traditional court processing, reduce the number of re-referrals for participants?
2. Does participation in drug court reduce levels of substance abuse?
3. How successful is the program in bringing participants to completion and graduation within the expected time frame?
4. How has the program impacted the participants and their families?
5. What participant characteristics predict successful outcomes? What are the commonalities of clients terminated from the program? How do those terminated from the programs differ from those who have graduated?

Data Collection

The data collected for this outcome evaluation was gathered from several sources. Most of the data consisted of administrative databases, described below. Some data (such as some treatment and drug testing information) had not been entered into a database and therefore were gathered from paper files.

Oregon Drug Court Case Management System (ODCMS)

The Oregon Drug Court Case Management System (ODCMS) was developed by the Oregon Judicial Department, State Justice Institute and was considered fully operational in April 2003. The CCJDC was involved in the pilot testing of this system from early 2002 through 2003. The database allows drug courts to record information on client demographics, drug court hearings, drug testing, treatment providers, substance abuse and criminal history, case notes, outcomes, and follow-up information. The ODCMS data was a primary source of drug court utilization data for the evaluation. However, due to the recent development of the ODCMS, some of the information on clients who began the program before the pilot testing of the database was not entered. The data from these individuals were gathered from paper files at Clackamas County Mental Health (CCMH) or from the CCMH database.

Juvenile Justice Information System (JJIS)

The Juvenile Justice Information System (JJIS) is a statewide integrated electronic information system designed, developed, and implemented to support a continuum of services and shared responsibility among all members of the juvenile justice community. In a collaborative partnership between the Oregon Youth Authority (OYA) and Oregon's county juvenile departments, JJIS is administered by the State of Oregon through OYA.

The JJIS system includes a wealth of information about youth in the juvenile justice system in Oregon, including criminal histories (allegations, referrals, ORS codes, severity codes, etc.), demographics, risk assessment scores, conditions of probation, services received, and decisions made about each allegation.

The Clackamas County Mental Health (CCMH) Data System

CCMH keeps its clinical records in a system called Anasazi. CCMH staff pulls reports from "Client Data for Windows" which is part of the Anasazi system. Billing, documentation of services, and client information are included in this database. Paper charts are adjunct to the computer file in Anasazi, but some of the information in paper charts is not in Anasazi, such as UA/patch lab results, release of information forms (ROI's), and information from other providers.

Participant and Family Interviews

In order to answer the research question "How has the program impacted the participants and their families?" Drug Court participants and the parent or guardian active in the program were interviewed regarding family communication and dynamics. The specific questions asked in these interviews are given along with the results later in this report.

Sample Selection

Drug Court Participants

The Drug Court participant sample consisted of all those who entered the Juvenile Drug Court since its implementation, except for those who entered less than 6 months previous to the date of the evaluation data collection, as it was determined that there was not enough time for any meaningful outcome data to accumulate. This provided a total of 31 participants in the Drug Court sample. The primary drug of choice for CCJDC program participants is marijuana (63%), followed by methamphetamine (23%). The majority of secondary drug use is alcohol (62%). The Drug Court participant sample, along with the comparison group, is described further in Tables 1 and 2, below.

Comparison Group

To select the comparison group, a list of juveniles referred to the Clackamas County Juvenile Department (in the year prior to Drug Court implementation) on the most common Drug Court charges (drug and theft offenses) was generated from the Juvenile Justice Information System (JJIS). Probation Counselors at the Juvenile Department were asked to examine the files of the juveniles they were familiar with and to mark those they would have referred to the Juvenile Drug Court if the Drug Court program had existed at that time. The resulting group was then matched to the Drug Court participant group on age, gender, ethnicity and prior criminal history - including total number of prior referrals, number of prior drug referrals, and number of prior violent referrals. The final matched sample consisted of 29 comparison individuals.

Table 1, below, shows the matching variables and the mean numbers for each variable. All t statistics were non-significant, indicating the groups were not significantly different on the variables tested. Table 2 presents the demographics for each sample. As demonstrated in the tables, both samples are primarily male with an average age of 16 years. Both samples are also primarily white with each group having a very small number of non-white, minority members (2 in the Drug Court participant sample and 3 in the comparison sample). Although the 2 minority members in the Drug Court sample are different ethnicities from the 3 in the comparison group, the small number was judged to be non-significant in the possible effect on the results. The mean number of referrals prior to Drug Court entry is slightly higher for the Drug Court sample, but not significantly so.

Table 1: Drug Court and Comparison Group Matching Variables

	N Drug Court /Comparison	Mean Drug Court	Mean Comparison
Gender	31/29	1.16	1.14
Ethnicity	31/29	1.10	1.38
Age at time of DC referral	31/29	16.12	15.99
Number of referrals prior to DC referral	31/29	4.03	3.41
Number of drug related referrals prior to DC referral	31/29	1.26	1.0
Number of violence related referrals prior to DC referral	31/29	.58	.35

Table 2: Drug Court and Comparison Group Demographics

	Mean age at time of referral	Ethnicity	Gender
Drug Court Group N=31	16 years <i>(range=14.43 to 17.90)</i>	94% White 6% Non-White (1 African-American 1 Hispanic)	83.9% Male 16.1% Female
Comparison Group N=29	16 years <i>(range=11.84 to 17.90)</i>	90% White 10% Non-White (2 Pacific Islanders 1 Asian)	86.2% Male 13.8% Female

Results

The results of the CCJDC data analyses are presented below, in order of the research questions described earlier in this report. The small sample size meant that most analyses did not have enough power to produce valid statistical significance. Therefore, most of the data related to each of the research questions were examined in a more qualitative manner. With the small number of Drug Court participants and the recent implementation of the program, most of the outcomes examined occurred while the participants were still in the program and the results must be considered in terms of apparent trends rather than in terms of statistical significance. As the program grows and expands over time, further evaluation can examine a greater sample size and outcomes that occurred after program completion, providing verification of these results.

Research question #1: Recidivism.

Does participation in drug court, compared to traditional court processing, reduce the number of re-referrals for participants?

As explained above, the recent implementation of the program and small sample size requires that most outcomes occurred for Drug Court participants while the participants were still in the program. The following recidivism results are presented in two sets. The first set of recidivism results are on all Drug Court participants who had at least one year of recidivism data available from the time of entry into Drug Court, which means that the only recidivism that occurred post program would be for those individuals who terminated from the program less than a year from their start dates. The second set of results includes only those individuals who had at least 18 months of recidivism information available from the date that they entered the program so that a small amount of recidivism information could be presented post program for both graduates and those that terminated unsuccessfully.

Table 3 presents the mean number of re-referrals⁴ for Juvenile Drug Court participants and a comparison group that had at least one year of recidivism data available after their Drug Court program start date or its equivalent in the case of the comparison group⁵. The comparison group in this analysis was matched specifically to the Drug Court participants who had at least one year of information available in the same manner as described earlier. There were 23 Drug Court participants and 25 comparison group members in this analysis.

Table 3: Mean Number of Re-Referrals For Individuals with 12 Months of Recidivism Data

Time Period	Mean Number of Re-Referrals	
	Drug Court Sample (n=23)	Comparison Sample (n=25)
3 months from drug court entry	.17	.07
6 months from drug court entry (with first 3 months removed)	.17	.18
12 months from drug court entry (with first 3 months removed)	.35	.46

Table 4 presents the mean number of re-referrals for Drug Court participants who had at least 18 months of recidivism data available after Drug Court entry. Again, the comparison group was matched to the drug Court sample in the same manner as described above, in the sample selection section of this report. By 18 months, all Drug Court participants would have had at least 3 months of data post program, either after termination or after graduation.

⁴ Re-referrals are defined as incidents of juvenile criminal behavior officially reported to the court and recorded in Juvenile Justice Information System (JJIS).

⁵ A start-date was calculated for the comparison group as follows. The average amount of time between the date of the referral/arrest that led to drug court and the drug court start date was added to the referral/arrest date that would have led to drug court in the comparison group.

Table 4: Mean Number of Re-Referrals For Individuals with 18 Months of Recidivism Data

Time Period	Mean Number of Re-Referrals	
	Drug Court Sample (n=10)	Comparison Sample (n=23)
3 months from drug court entry	.20	.04
6 months from drug court entry (with first 3 months removed)	.00	.21
12 months from drug court entry (with first 3 months removed)*	.10	.43
18 months from drug court entry (with first 3 months removed)	.20	.52

Both Tables 3 and 4 show that in the first 3 months after Drug Court entry, Drug Court participants are re-referred more than twice as often as the comparison group members. One explanation for this is that juveniles who enter a strict program will feel somewhat rebellious and need to test the limits at the beginning. This phenomenon has been demonstrated in other programs for high-risk youth. For example, the Juvenile Crime Prevention Program (JCP) Evaluation (Mackin, 2003⁶) found that re-referrals for participants in JCP programs happened most commonly within the first few months after the program start date.

“When new criminal referrals occur, they are likely to happen fairly soon after a youth’s enrollment date. Seventy-four percent (74%) of youth offenders who have a post enrollment criminal referral have their first new offense within the first 6 months after enrollment (and 41% have their first new offense in the first 3 months). This suggests that it takes at least a few months before an intervention with high-risk youth can be expected to have an impact on future criminal behavior.”

In order to keep the “testing limits” effect from influencing the later program outcomes, the rest of the recidivism results (at 6, 12 and 18 months) were presented with the first 3 months recidivism removed. Tables 3 and 4 illustrate that, as further time for outcomes occurs, the difference in referrals between Drug Court participants and the comparison group grows, with the comparison group at 18 months being re-referred more than twice as often as participants in Drug Court.

Of the 6 Drug Court participants who have graduated from the program, none have been re-referred since leaving the program. Of the 15 Drug Court participants who terminated unsuccessfully, 3 have been re-referred after leaving the program. This is a 0% recidivism rate for graduates and a 20% recidivism rate for those terminated. The comparison group had 6 out of 28 individuals re-referred after an equivalent “end” date⁷. This is a recidivism rate of 21%, similar to that of those terminated from the program.

The overall number of re-arrests and the number of individuals re-arrested is very small. Therefore, none of the above results are statistically significant. However, the trends appear to show a positive

⁶ Quote from the Juvenile Crime Prevention Final Report (July, 2003). This report can be found at <http://www.ocjc.state.or.us/JCP/JCPEvalFinalReport0703.pdf>.

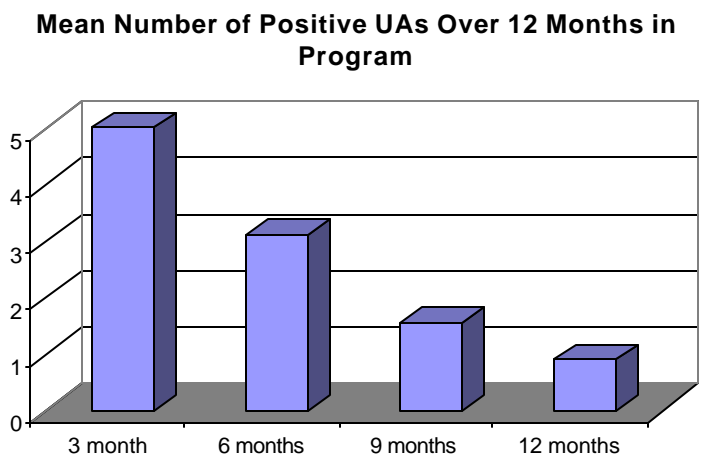
⁷ An end date was calculated using the average amount of time drug court participants (both those who graduated and those who terminated) spent in the program and adding this amount of time to the comparison group “start” date.

effect for those who participated in the CCJDC program. Future evaluation on a larger sample, as the program grows, will be able to determine the validity of these findings.

Research question #2: Reducing Substance Abuse.

Does participation in drug court reduce levels of substance abuse?

The dates of positive urinalyses (UAs) for the Drug Court group were obtained from the treatment provider. Mean numbers of UAs were calculated for each three-month block from the date of program entry for all participants who were in the program for at least one year (n=11). The number of positive UAs at the beginning of a participant's time in drug court was substantially higher than at later times, indicating that the levels of substance abuse had indeed been reduced. The means for each of these time periods is reported below in Figure 1.



Although it is somewhat suspect to use the number of positive UAs over time as an indicator of reduced level of substance abuse (because a reduction in positive UAs is required for continued enrollment in the program), all individuals with at least 12 months in the program were included in this analysis, so graduates, current participants, and those that were terminated are represented. In addition, correlations were run and number of positive UAs was not correlated with program status (termination or graduation). This indicates that program status (i.e., successful participation) was not the only factor in this demonstrated reduction in substance abuse.

It is interesting to note that the number of positive UAs was significantly and positively correlated with the number of prior drug-related referrals, number of court dates, and number of treatment sessions. This is to be expected as a common response in drug court to positive UAs is to increase the number of court dates and treatment sessions. This information, combined with the fact that the number of positive UAs was not correlated with program status (graduation vs. termination), implies that the program response to drug use is successful in guiding participants to reduce use so that they are able to graduate. That is, it is not necessary for participants to have already reduced use at the start of the program in order to graduate.

Research question #3: Program Completion.

How successful is the program in bringing program participants to completion and graduation within the expected time frame?

Table 6 provides program duration statistics for the Drug Court sample. The average time from program entry to graduation in this yearlong program is 14 months. It is very common for drug court participants to take longer than the intended duration of the program (Cooper, 2000⁸). Most drug courts have 12-month programs, though more recently, some have extended their programs to 18 months. NPC Research has found in its experience with 9 drug courts in California, 5 drug courts in Oregon, and 3 in Maryland that many drug courts with 12-month programs have an average time to graduation of 18 months. Fourteen months is actually relatively close to the intended 12 months for the CCJDC program. Further, the 12-month time limit is actually a minimum for the program, so it is expected that the actual time might be somewhat longer.

Table 6: Program Duration Statistics for Drug Court Sample

Drug Court Sample – N=31	Mean length of time in months
Time spent in program—overall group	10.4
Time in program until graduation (successful completion, <i>n</i> =6 graduates)	14.03 (range=12.66 to 15.99)
Time in program until termination (unsuccessful completion, <i>n</i> =15 terminated)	8.09 (range=.69 to 19.56)
Time in program of currently active (<i>n</i> =10 currently active)*	11.67 (range= 7.69 to 19.04)
Time in Phase 1 (<i>n</i> =25)	3.1
Time in Phase 2 (<i>n</i> =18)	2.7
Time in Phase 3 (<i>n</i> =14)	3.25
Time in Phase 4 (<i>n</i> =7)	3.29
Time in Phase 5 “Aftercare” (<i>n</i> =7)	3.22

* This sample contains only those currently active who entered the program 6 months or more before the time of the evaluation data collection, so that there would be at least 6 months of data available to the evaluator.

The data in Table 6 shows that the average amount of time in each phase is approximately 3 months. Individuals appear to be moving through the program at a consistent pace.

Another measure of the success of treatment programs in bringing participants along in treatment is retention rate. In this sample of CCJDC participants, the program demonstrates a retention rate of just over 50% (16 graduated or currently participating, and 15 terminated). This is better than most

⁸ American University Web site

standard (non-criminal justice related) treatment programs (Cooper, 1997) and retention may increase as this relatively new program fine-tunes its process.

Research Question #4: Family Impact.

How has the program impacted the participants and their families?

This question was measured through individual phone interviews with the youths and parents in the CCJDC Program. Those interviewed were asked whether the program provided useful information to the parents about substance use and parenting resources, whether the youths and parents felt the Drug Court Team listened to them and valued their opinions, whether the youth and parent felt that their relationship had changed due to the Drug Court Program and if so, what parts of the Program were effective in making those changes.

Eighteen individuals agreed to take part in the interviews⁹, 9 parents and 9 youths. Six of the youths were male and three female. Two youths had been terminated unsuccessfully, three were graduates and four were current participants of the program. Of those who had been terminated one had been in the program 12 months and one 18 months; the graduates ranged from 14 to 18 months; and current participants' time in the program ranged from 3 months to 10 months. The answers to the interview questions are provided below.

Does the team provide you with useful information about both substance use/abuse and parenting resources? (This question was asked only of the parents.)

Eight of the nine parents agreed that the CCJDC Program provided useful information about drug use and parenting. Specific pieces of information they found most useful were the “drug of the month,” and the support group that provided information on addiction. Some parents were interested in getting more information on where they could get more parent counseling.

“The support group is great and the drug of the month is helpful in knowing what drugs do to people’s bodies.”

There was one parent who felt that the information provided was not helpful. This was a parent of a youth who had been terminated from the program and was dissatisfied with the program overall. Unfortunately, this parent was not always clear on what areas of the Program were problematic and needed improvement.

The parents were asked to rate the information provided from “not useful at all” to “very useful.” Eight of the nine parents reported that the information was “very useful” and one parent (the one described in the previous paragraph) reported that it was “not useful at all.”

Do you feel that the Drug Court Program Judge and Team listens to what you have to say?

All 18 interviewees (100%) reported that the Drug Court Judge and Team listened to them. Sixteen of the 18 believed that the team valued their opinions and some mentioned that the Team sought out their opinions.

⁹ No participant refused to be interviewed, though current phone numbers were not available for some of those who had been terminated from the program and some of those terminated did not return the interviewer’s call.

Parent- “The team values my opinion. Sometimes you don’t understand what they are doing, but in the end it all makes sense.”

Parent- “They provide feedback forms to the parents. The team will pass along info about your child that might be helpful. They are very good about confidential issues. They pass solutions and thoughts from the parents to the team to think about.”

Youth- “They always listen and are there for me when I need them.”

The youths interviewed felt that the Team listened and valued their opinions more when they were doing well in the program and less when they were not doing well.

“They listen more so when I am doing well, but they always listen.”

“The Team listens but sometimes they don’t because they know we are messing up. They know when not to listen because we are messing up.”

Both parents and youth gave examples of how the CCJDC Program had been adjusted by the Team to accommodate a family’s particular needs. This demonstrates that the Program does indeed listen and value the opinions of the participating families.

Parent- “When we moved homes they were very understanding. They reorganized my son’s schedule. They reorganized how we had to conform to the DC program so my son could succeed after we moved.”

Parent- “When things are going bad in the home the team listens. An example of the team valuing our opinion is when the weekend UAs were taking a lot of the families’ time. The team took into consideration our concerns and made weekend UAs easier on the families.”

Youth- “The team listens to your problems. The team moved me up when I talked about being moved up. If you present your case in a mature manner they will listen.”

The two interviewees who did not believe that the Team valued their opinions were the same parent and youth described above who had been terminated from the program. The parent stated that the Team did not take her feelings into account and the youth said that the Team did not “understand the commitment Drug Court was.” (It is interesting to note that the other youth who had been terminated from the program and his parent were as positive about the program as those who were currently participating and those who had graduated.)

In general, it was clearly reported by parents and youth that the CCJDC Team listens and values the opinions of program participants.

Do you feel that your relationship with your [son/daughter/parent, etc.] has changed since you began Drug Court? If so, how?

A large majority, 16 of the 18 individuals interviewed, believed that their family relationships had changed for the better due to their participation in drug court. The two who did not believe that their relationship was better were the parent and youth described above who were unhappy with the

Program. They felt that their relationship had been made worse because the Program was too demanding of their time.

Overall, the answers to this question were quite similar between parents and youth. Any differences tended to be that of degree. In some cases, the youth appeared to feel more positive about the change than the parents.

Youth- "Yes, our relationship has gotten better. We talk more and don't fight as much."

Parent (of above youth)- "It goes back and forth. It seems to be getting better. We have better communication."

Youth- "Drug Court has had a positive effect on my relationship with my mom. We have better communication and spend more time together."

Parent (of above youth)- "I feel maybe it is a little better, but I'm not sure. We do not fight as much."

The parents and youth were asked to describe *how* their family relationship had changed. Thirteen of the 18 described the change as "getting along better." Nine specifically reported better communication, 7 reported spending more time together and 6 mentioned less fighting and less frustration with each other.

"The relationship with my dad has gotten much better. We're like friends and now we do things together."

"My mom trusts me more."

"We can live in the same house now and we actually like each other."

"We are now more honest with each other. We communicate more and laugh more."

What parts of Drug Court have helped make that change?

All parents and youth reported more than one aspect of the program as being effective in making a change in their family relationship and in their lives in general. All described it as a combination of services that was helpful. Five of the 18 interviewed mentioned specifically that it was the whole program and the whole Team that made the difference. The following list presents specific features of the CCJDC Program that came up repeatedly in the interviews as the most effective aspects of the program. The number in parentheses is the number of individuals who mentioned this Program feature.

- Youth Therapist (9)
- Program structure and accountability (7)
- UAs (7)
- The Family Counseling (6)
- Relationship with the Judge (5)

The youth were more likely to mention the Juvenile Therapist while the parents were more likely to mention the family counseling and accountability.

In summary, overall it appears that the program is providing useful information to parents and that the parents are happy with the quality of the information. Parents and youth felt that the Drug Court

Team listened to them and that their opinions were valued. The vast majority believed that their family relationships had changed for the better and that it was a combination of Program features that was responsible for that change.

Nearly all of the parents and youth interviewed were extremely positive about the CCJDC Program and its effect on their families. Although one family who had been terminated was negative about the program, from the information provided by this family, it is clear that the family was not benefiting from the program and the Drug Court Team's decision to terminate was appropriate.

Research Question #5: Predictions of Success.

What participant characteristics predict successful outcomes? What are the commonalities of clients terminated from the program? How do those terminated from the programs differ from those who have graduated?

At the time of the data collection for this evaluation, 6 individuals had graduated and 15 had terminated unsuccessfully. This is a very small sample for running any meaningful statistical analyses. Nevertheless, the analyses were performed in order to uncover any trends of interest.

To investigate what factors predict successful outcomes of participation in drug court, a univariate ANCOVA was run with status (graduate versus terminated) and number of re-referrals after drug court entry as the measures of success (dependent variables), and gender, age at time of Drug Court entry, degree of readiness-to-change, percentage of positive UAs, primary and secondary drug of choice, total number of referrals prior to Drug Court entry, and number of drug-related referrals prior to drug court entry as the possible predictive (independent) variables. None of the variables was significant in predicting either status or number of re-referrals, most likely due to the small sample size. However, an examination of simple correlations between these variables uncovered some interesting (though mostly non-statistically significant) results.

Age at the time of Drug Court entry was positively correlated (.181) with graduation. That is, the older the youth were at the time of entry, the more likely they were to graduate. Age was also more strongly, and negatively, correlated with termination (-.339), such that the younger the youth were at drug court entry, the more likely they were to terminate. Further, age was negatively and significantly correlated with re-referrals after drug court entry (-.582, $p=.007$). The older the youth, the less likely they were to be re-referred after entering drug court. This correlation is commonly known in the criminal justice system with older individuals less likely to continue offending. A possible positive, though perhaps overly optimistic, interpretation of these results is that, as the Drug Court youth get older, they also become wiser¹⁰.

Another interesting correlation was that between degree of readiness-to-change, or "readiness-for-treatment" (as assessed by the Juvenile Therapist), and graduation, termination, and re-referrals. The greater the readiness-to-change, the more likely the youth was to graduate (.239), the less likely they were to terminate (-.283), and the less likely they were to re-offend (-.127). Although these

¹⁰ Another possible explanation for these results is that the older youth would eventually no longer have data in the juvenile justice database and, instead, would have any re-offenses recorded in the adult criminal justice system. However, since the large majority of "outcome" time for this evaluation occurred while the youths were under 18 (and still in the program for those who were drug court participants) this is an unlikely explanation. Future evaluations of this Drug Court, with longer outcome time periods, should include both the juvenile justice and adult justice data systems.

correlations were not significant, this is a positive indication that the Juvenile Therapist is assessing these youth's readiness-to-change correctly.

Unsurprisingly, the percentage of positive UAs (out of the total number of UAs given) was fairly strongly correlated with graduation (-.263) and termination (.432). The more positive UAs, the more likely the youth were to terminate and the less likely they were to graduate. Further investigation into the correlation between percentage of positive UAs and status, which approached significance, revealed that while those who graduated had a higher mean number of UAs, the mean percentage of those UAs that were positive was considerably lower for the graduates than for those terminated. These statistics are presented in Table 7 below.

Table 7: Mean Number of Percentage of Positive Urinalyses

Status	Mean # UAs given	Mean Percentage of UAs that were positive	Range
Graduated	74	8%	3%-11%
Terminated	55	31%	0%-100%

Finally, there was a small correlation (.119) between drug of choice and status (graduate vs. terminated). Further analysis of these two variables produced the following information provided in Table 8.

Table 8: Drug of Choice for Graduated and Terminated Participants

<i>Primary Drug of Choice (n=30)</i>	<i>By Groups</i>		
	<i>Overall</i>	<i>Grads</i>	<i>Termed</i>
Marijuana*	63.3%	66.7%	64.3%
Methamphetamine	23.3%	16.7%	28.6%
Alcohol	6.7%	16.7%	7.1%
Opiates	3.3%		
Benzodiazepines	3.3%		
<i>Secondary Drug (n=29)</i>			
Alcohol	62.1%	50.0%	71.4%
Marijuana	24.1%	33.3%	14.3%
Methamphetamine	6.9%	16.7%	
Hallucinogen	3.4%		7.1%
Amphetamine	3.4%		7.1%

The most significant and interesting information contained in the above table is the percentage of those who use methamphetamine in those who terminated versus those who graduated. Those terminated had a much higher percentage of "meth" users. Also of interest was the percentage of those terminated who used alcohol as a secondary drug. Those terminated were much more likely to use alcohol as a secondary drug and "meth" as a primary drug than those who graduated. It appears that the use of methamphetamine and alcohol together is a poor combination for achieving success in Drug Court.

To investigate further the characteristics of those who graduated versus those who terminated, t-tests were run on the same set of variables listed above. Because many of the variables are highly correlated with length of participation, only those participants who had at least a year in the program were used for this analysis in order to detect any true differences unrelated to length of participation. As with the previous analyses, the t-tests produced no significant results, but an examination of the difference in the means between graduates and terminated participants provides a few interesting possibilities. Table 9 presents these means.

Table 9: Means of Characteristics of Graduated vs. Terminated

Category	Means Graduated (n=6)	Means Terminated (n=15)
Gender	1.17	1.0
Age at time of DC referral	16.43	16.15
Length of time in program	14.01	15.04
Number of referrals prior to DC entry	3.17	3.0
Number of positive UAs	5.50	21.2
Degree of readiness to participate in treatment	1.80	1.4
Number of drugs at issue	2.67	3.4
Number of drug court dates	30.50	32.80
Number of treatment sessions	119.17	141.0

There are several points of interest in the above table. First, there is no noteworthy difference in gender or number of prior referrals for those who graduated versus those who terminated. And, although there was a small correlation between age of entry into Drug Court and status, the difference in mean age between graduate and terminated appears to be quite small.

The length of time spent in the program is actually longer for those who terminated than for those who graduated. This demonstrates the common tendency of drug courts to continue to work with participants in hopes of eventually making a difference, even when the participants are not adhering to the program process. Investing a large amount of resources into those who will eventually

terminate is an expensive course of action. The CCJDC may consider introducing stricter policies regarding how long they are willing to continue working with those participants who are struggling. Conversely, another option is to enhance and adjust the services provided to participants in order to increase the chances of success. The CCJDC has received an enhancement grant from BJA and is in the process of enhancing its services.

As discussed earlier, the mean degree of readiness-to-change was greater in those who graduated than in those who terminated. As would be expected if readiness-to-change is measured accurately, those who are more ready to change their lives are more likely to succeed in the CCJDC program.

The mean number of drugs used by graduates is less than the mean number used by those terminated. This makes intuitive sense in that the more drugs used by a participant, the more difficulty a participant may have in stopping use.

Finally, the number of drug court sessions and treatment sessions is greater in those who terminated than in those who graduated. This is explained by the CCJDC process, as the more problems participants have in adhering to the program (e.g., positive UAs, not showing up for treatment), the more treatment sessions and Drug Court appearances are required.

In summary, the main predictors of success (i.e., graduation and fewer re-referrals) appear to be greater age, a greater degree of readiness-to-change, and of course, a smaller percentage of positive UAs (under 11%). Conversely, the main predictors of termination appear to be lower age, a lesser degree of readiness-to-change, a high percentage of positive UAs (over 11%), use of multiple drugs, and methamphetamine as the primary drug of choice with alcohol as the secondary drug of choice.

Summary/Conclusion

The characteristics of those who graduated and those terminated were examined in order to determine if there were certain participant characteristics that could be predictive of success (or termination). Graduates tended to be older and more ready for change while those terminated tended to be younger, less ready for change, to use multiple drugs and were more likely to use methamphetamines and alcohol. It is recommended that the CCJDC Team continue to watch these trends as the program matures so that, if these characteristics (or others discovered over time) are truly predictive, 1. The Team can use these to determine a youth's appropriateness for the Program and 2. The Team can seek out specific services that can be added to the program to address the characteristics (such as multiple drug use) that appear to lead to unsuccessful termination.

Although the sample size is small, taken as a whole, the outcome results for the CCJDC appear to be quite positive. The number of re-referrals for those who participated in the program, whether they graduated or not, was lower than that for the comparison group. The mean number of positive urinalyses over time provided evidence that participant drug use was, indeed, decreasing over time spent in the program. The average length of time spent in the program for graduates was approximately 14 months. As the intended length of the program is a minimum of 12 months, this demonstrates the program's ability to bring participants through the program to graduation in a timely manner. Youth and parents involved in the CCJDC program reported that the program is providing useful information and that they are happy with the quality of the information. Parents and youth felt that the Drug Court Team listened to them and that their opinions were valued. The

vast majority believed that their family relationships had changed for the better. Parents and youth said they communicate better, spend more time together and argue less. Both youth and parents believed that it was a combination of Program features that were responsible for that change.

As mentioned repeatedly, the main concern in this outcome study is that, because the CCJDC program is young and still growing, the sample for this first outcome evaluation was, of necessity, small. For this reason, the results of the analyses described in this report should be taken with caution. However, the overall trend in outcomes for the CCJDC is consistently positive. The CCJDC program appears to be impacting its youth and families in the intended manner. Further outcome evaluation as the program continues to grow (e.g., through the enhancement grant received from BJA) will allow for a larger sample size and the ability to verify the positive preliminary results achieved in the current evaluation.

**Appendix A:
CCJDC Process Evaluation
Executive Summary**

CCJDC Process Evaluation: Executive Summary

In November 2001, the Clackamas County Juvenile Drug Court (CCJDC) began operations. An implementation grant from the DCPO in September 2001 provided funds for evaluation, and NPC Research was subsequently hired to perform a process and outcome study of the Drug Court. This report contains the process evaluation for the CCJDC performed by NPC Research. The Ten Key Components of Drug Courts (developed by the NADCP in 1997) were used as a framework for the evaluation, and this Court was evaluated on its ability to demonstrate these key components. The chief results are as follows:

Ten Key Components of Drug Courts

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

An integrated Drug Court Team, with communication as its central feature, is the CCJDC's biggest strength and possibly the greatest reason why this Drug Court is operating effectively and efficiently. The Team communicates regularly in a variety of ways, and seeks out new ideas for ways to keep this Court running smoothly and for ways to improve Court practices. Each member of the Team appears to be invested in making the Drug Court work for its participants.

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

Both the Prosecution and Defense Counsel believe that the mission of each has not been compromised by Drug Court. One change in both their roles is the non-adversarial team effort that goes into decision-making for each client. Their roles, however, remain essentially the same: the Public Defender's role is still to advocate for the participants, and the District Attorney's role is still to ensure that public safety is protected.

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

The time from referral to entry in Drug Court is approximately two weeks. This is a reasonably prompt time period for a youth to begin receiving services. In addition, the youth and his or her family receive significant contact from the Court throughout that two week period in the form of assessments and discussions with the Drug Court staff about the Drug Court Program and about the willingness of the family to commit to the program.

Component 4. Drug courts provide a continuum of alcohol, drug, and other related treatment and rehabilitation services.

The Drug Court Program has four phases and Aftercare, each of which targets a different stage in the youth's treatment. Diverse specialized treatment services are available to the extent that funding will allow. Each participant attends individual counseling, group counseling, and family counseling.

In addition, participants are given frequent UAs to monitor drug use, are involved in activities giving them life skills such as jobs and education, and have the opportunity to participate in community services and other activities.

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

Based on results from the American University National Drug Court Survey (Cooper, 2000), the number of urinalyses (UAs) given in this Court is comparable to the large majority of drug courts nationally. However, not all UA collections are fully viewed, and participants and staff believe that the youths often have an idea of the timing of their next drug test. The Drug Court Team has also utilized other forms of drug testing, such as a saliva swab and a drug detection patch. An adulterant test strip is also used when youths are suspected of tampering with the sample. The Team is currently discussing the option of using a Breathalyzer to detect alcohol use.

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

Sanctions and rewards for this Court are comparable to what most other drug courts are doing nationally (Cooper, 2000). This Drug Court works together as a team to determine sanctions and rewards with the Judge's approval. Sanctions and rewards are often individualized and are chosen to suit the youth's specific situation. The Drug Court does not have written guidelines for sanctions and rewards. However, the Team has agreed upon some graduated standard sanctions that generally start with community service and end with termination. The Team works hard to make sure responses to participants' compliance are consistent, while trying to be creative with rewards and sanctions to meet a particular need.

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

In the CCJDC Program, parents and participants are required to be in Court on a consistent basis, where they have regular contact with the Judge. The frequency of court appearances for each participant is comparable to the majority of drug courts nationwide (Cooper, 2000). The Judge is involved in all decision-making regarding each participant. She goes to great lengths to get to know and help all participants and their family members. Because of the Judge's consistency and care for each participant, she is well trusted and inspires participants to make her proud of them.

Component 8. Monitoring and evaluation measure the achievement of program goals and gauge their effectiveness.

Evaluation and monitoring are a high priority for this Drug Court Program. This Court has participated extensively in the pilot of the Oregon Drug Court Management System, a statewide drug court database that is still being refined, and has ensured that evaluator feedback was included in this process. NPC was invited to observe Court sessions, Team meetings and quarterly retreats. The Team has proved itself to be committed to an accurate evaluation and has done so through a high degree of organization and integration of the team members. In addition, this Court demonstrates a high degree of self-monitoring. They openly discuss issues as they arise and focus on ways to adjust the program to address these issues.

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

Education on Drug Court planning, implementation and operation is a high priority for this Drug Court. The Drug Court Team members have attended drug court trainings and do so on a regular basis. In addition, the Drug Court Coordinator, Case Manager, Treatment Provider, and Judge all attend local trainings whenever they are available and observe other drug courts in order to learn new ideas and bring them back for discussion with the Team.

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

The CCJDC has developed partnerships with several community agencies and organizations, including Mental Health, the Oregon Youth Authority, C-TEC (an educational/employment agency), and the local Chamber of Commerce. The Coordinator spends a great deal of time forging relationships locally and statewide. She is involved with various committees and attends Drug Court-related meetings frequently. The Coordinator also solicits local resources for incentives and donations. The CCJDC is continually working towards creating relationships with community members.

Recommendations

The CCJDC is unusual in the quality of its process and operations. There was very little in the way of changes or improvements for the evaluator to recommend. This is mainly due to the self-monitoring and self-correction regularly performed by the Juvenile Drug Court Team. Following are the few recommendations resulting from this evaluation:

Observe all UAs: Although observing all UAs would necessitate spending a greater amount of time and resources, the value of observed UAs in the participants' recovery may be worth the time and money spent.

Consider other methods for assigning UA collection times: Because some participants and staff believe that participants can often predict when they will need to report for a UA, the Drug Court may want to consider different methods for assigning their UA collection times. One way is to assign participants numbers or colors that come up randomly.

Consider community service as just a requirement, rather than a sanction: Although the CCJDC uses community service as both a sanction and a requirement, it is possible that community service might serve better as just a requirement, instead of a sanction so that participants will not associate service to their community as a punishment. Other courts have made a certain number of hours of community service a requirement for graduation and have allowed the participant to choose a type of community service they would enjoy.

Provide a written list of sanctions: As some participants expressed the belief that the Drug Court Team is sometimes inequitable in their assignment of sanctions, it may be useful to give participants a written list of possible sanctions for various common offenses and include an explanation saying that the sanctions listed are just possibilities, not the rule, and that sanctions are assigned on an individual basis.

Conclusion

Overall, the CCJDC demonstrates the Ten Key Components of Drug Court in an exemplary fashion. The Drug Court Program is well organized due, in large part, to a well-organized Drug Court Coordinator. The Court's greatest strength is its highly integrated Drug Court Team.

The one key component that was demonstrated satisfactorily, but not in an exemplary fashion, was the UA process. The Drug Court Team needs to determine a way to consistently view the UA collections and to truly randomize the UA collection times. An additional issue for this Drug Court, as it is for Drug Courts nationally, is a lack of funding. The CCJDC would like to provide further services to their participants, as well as accept offenders that require more time and attention, but has not been able to do so at this point. The Drug Court Team, and particularly the Coordinator, is working on obtaining funding. This Court is also examining ways to become self-supporting.

In addition to the exceptional quality of the CCJDC Team, strengths of this Drug Court include the commitment to continuing education of the Team members, the high priority the Team places on evaluation and self-monitoring, and the strong leadership of the Judge combined with the Judge's ability to demonstrate her care and honest concern for the Drug Court participants and their families.