

Guam Adult Drug Court Process Evaluation

FINAL REPORT



Submitted by:

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*Research designed to promote effective decision-making by policymakers
at the national, state and community levels*

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EXECUTIVE SUMMARY

In the past fifteen 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 well over 1,000 drug courts operating in all 50 states, the District of Columbia, Puerto Rico, and Guam. 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 offenders and their families.

Guam's drug court movement began in the mid-1990s with the emergence of the "ice" (crystal methamphetamine) epidemic. Guam began planning a drug court and was awarded a program-planning grant in 1998.

The planning grant allowed key participants to attend trainings and to receive technical assistance. A team was established to review the overburdened criminal justice system, conduct research on drug courts, and determine the benefits of developing and implementing a drug court on Guam. The team's success at planning was realized with the award of a Drug Court Implementation Grant in 2002. Due to two major typhoons, implementation of the Adult Drug Court was delayed. In August 2003, Guam held its first Adult Drug Court session.

In 2004, NPC Research was hired to perform process and outcome evaluations of the Guam Adult Drug Court. This report includes the process evaluation performed by NPC using the Ten Key Components of Drug Courts (developed by the NADCP in 1997) as a framework. The Guam Adult Drug 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.

This is a key strength of the GADC, due in a large part to a strong Coordinator. The GADC Team communicates regularly both inside and outside of Team meetings. The Case Managers are familiar with each other's caseloads and can assist smoothly with the other Case Manager's participants when the other is not available. The Guam Adult Drug Court integrates drug and alcohol treatment services with justice system case processing. The Court has hired its own treatment Counselors and has its own Court Psychologist who does the clinical assessments. The Drug Court Team includes members from several different agencies who all work positively together. Team members are encouraged to share information about each client and voice their opinions about possible actions before the final decision is made. Observations show that the Team has good communication and cooperation, both of which allow the Court to act swiftly when problems arise.

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

The Attorney General's Office and Public Defender's Office believe that that the individual mission of each has not been compromised by their participation in

Drug Court. Instead of being adversaries, they use a collaborative and cooperative team approach when working with Drug Court clients. They share the common goal of reducing the drug dependence and criminal activities of the participants.

Attorneys from both agencies feel that public safety has been protected and, in fact, that public safety is more protected by the client participating in the GADC Program than in traditional probation. Both believe that the clients' rights have been protected and that the Public Defenders involved with the GADC Program continue to advocate for what is best for their clients.

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

The traditional Court process in Guam was quite lengthy; from the arrest to the chance to plea took 3 months to a year (some were in custody, some made bail, some released). However, with the implementation of the GADC, the load of offenders on the traditional Court system has been reduced and the time it takes to get to the plea is shortened to just over one month for most drug offenders. Most of those eligible for the GADC are identified within 72 hours of arrest.

According to the participant data provided by the GADC from the ADCIS, the time from referral to official entry into the GADC Program is reasonably short. At least half the participants begin the Program within 14 days (two weeks) and most the common number of participants begin the Program within 9 days. This is a substantial reduction in response time from the traditional process before ADC implementation.

The target population for the GADC when it was first implemented was first-time offenders. GADC Team members

believed that this meant their participants would be those with less serious addiction, but they found that their first wave of participants were "hard-core" long-time users. Over time the population has changed and more recently the majority of new participants have been recreational users. However, overall the GADC is serving the population they intended.

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

The GADC excels in this area. Diverse specialized treatment services are available to a high degree in this Program. Services offered to Drug Court clients (along with drug and alcohol group and individual treatment sessions) include education, employment, vocational training, detoxification, housing, transportation, and mentoring programs.

Other services include education assistance, grief counseling, and family therapy. Drug Court clients receive help in writing resumes and also receive referrals for food stamps, welfare services, homeless shelters, mental health services, medical and dental services, anger management, obtaining a GED, and parenting classes. Additionally, there is a recreational therapy program of 4 hours per month (one Saturday per month) for participants in Phases II-IV.

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. During Phase I, clients receive at least two UAs per week. Phases II and III require a minimum of one UA per week,

and Phase IV requires at least two UAs per month. During all phases, the Judge has discretion to increase the drug testing beyond the weekly minimum. Members of the Drug Court Team may also request that a UA be administered if use is suspected. The GADC participants reported that the UA and breath test schedule was very effective in discouraging drug and alcohol use.

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

The GADC is doing quite well in its use of sanctions and rewards and is working on improving the reward package. The GADC has a handbook for participants with a plan for an incentive program to increase desirable behaviors in participants as well as clearly written guidelines that list appropriate sanctions for each level of infraction (or inaction).

The Drug Court Team discusses and decides on sanctions as a group, with the Judge making the final decision on the appropriate sanction. The Probation Officer and Case Managers may give some sanctions immediately for various infractions (e.g., unexcused absence at a treatment session) without the prior consent of the Team.

In comparison to courts nationally, the GADC's sanctions appear to be quite similar although the GADC strategies are more coordinated, particularly in terms of clearly written guidelines, than in most courts.

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

Nationally, the American University Drug Court Survey reported that most drug court programs require weekly contact with the Judge in Phase I, contact every two weeks in Phase II, and monthly

contact in Phase III. So the amount of contact decreases for each advancement in phase. Although most drug courts followed the above model, a good percentage had less court contact (e.g., every two weeks in Phase I, monthly in Phases II and III.)

In the GADC Program, participants are required to be in Court exactly as reported in most drug court programs nationally. Drug Court sessions are required once per week in Phase I, once every two weeks in Phase II and once per month in Phase III. In Phase IV they are required to attend Court on a schedule specified for each participant individually by the Judge.

The participants in the GADC Program have a very positive relationship with the Judge. They feel that the Judge treats them as human beings, is fair and cares about each of them as individuals. Many clients want the Judge to be proud of them and therefore find the Judge to be a strong motivating factor for avoiding use.

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

The Adult Drug Court staff was very supportive of this evaluation. They made themselves available for interviews, responded to follow-up questions and welcomed the evaluation staff into their meetings. The Coordinator responded quickly to evaluation staff requests, helped set up the site visit and focus groups and facilitated communication between the evaluators and the Drug Court Team.

In addition, although the GADC was not fully operational until August 2003, the Drug Court Team independently had a consultant from the National Drug Court Institute, come out in January 2003.

Robin Wright, from NDCI, examined the GADC Program plans and provided feedback and recommendations for improvement. It was evident that they had taken this feedback seriously and had made changes based on those recommendations.

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

The thorough research performed and training received by the key stakeholders before setting up the Drug Court as well as NDCI monitoring by the Drug Court Team to improve the process has paid off in the high quality of this Program and the professionalism of the individuals that make up the GADC Team. In addition, many GADC Team members have performed their own reading and research into their roles in the drug court process.

Education on Drug Court planning, implementation and operation is a high priority for this Drug Court. Team members have expressed the wish to have trainings every 3 months on things like people skills, specific participant issues and how to deal with them, and improvements that could be made in their process.

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

This is yet another area in which the GADC Program excels, in part because of the strong cultural and family ties on the island. As described earlier, the Guam Adult Drug Court has built relationships with many agencies in the community that provide other services to Drug Court participants, such as DISID (Division of Integrated Services for Individuals w/ Disabilities) and MIP (Medical Indige-

nous Program). The Department of Public Health & Social Services assists with public assistance, HIV testing, and medical insurance needs. The Drug Court also works with the Guam Housing and Urban Renewal Authority (GHURA) to assist clients with housing. In addition, Drug Court has services that help participants become employable and find work.

Comments and Observations and Notable Practices

- Information gained from focus groups with Drug Court participants, including participants who failed out of the Program, provides evidence that the GADC is already succeeding in many of their goals including holding clients accountable for their actions, client self-reliance, giving clients hope, assisting clients in becoming employable and in completing their education, as well as providing intensive treatment and supervision for offenders who need this kind of support.
- Deferred pleas and diversion from jail into treatment programs for methamphetamine use are not allowed on Guam. However, methamphetamine use is the largest drug problem on Guam and is one of the main reasons for starting the Guam Adult Drug Court. In order to allow meth users to have the benefit of Drug Court and in order to begin a focused program to treat this major problem, the AG allowed offenders who were otherwise eligible for Drug Court to be charged with using a “amphetamine based substance.” This is a demonstration of the flexibility and creativity of the Drug Court Team members that allows this Program to work and work well.
- Looking up and checking in physically with graduates post graduation

is a drug court practice unique to Guam. The size of the island as well as the culture that leads to close-knit communities makes the ability to provide this type of strong support for graduates a viable option for this Program.

- Many drug court programs have problems with providers who do not consistently provide the necessary treatment information to the drug court judge and team and/or do not provide it in a timely manner. The GADC practice of contracting Treatment Counselors directly with the Court is an excellent solution to this common problem. The GADC can specify the reporting of information in a timely manner as a part of the contracts.
- The flexibility in how and when the GADC Team uses jail time allows the Team to continue to reinforce participants' positive behavior (maintaining a job) without losing the ability to sanction the negative behavior.
- The Drug Court Team had high respect for the Coordinator. The Coordinator was described as the glove and the Team as the hand.
- The GADC practice of having the option of converting participant fees to community service hours is extremely practical with this offender population. Even those who have jobs generally don't make much money, so it can be difficult for them to find the cash for large fees. Community service has the added benefits of emphasizing giving back to the community and becoming a contributing citizen that paying fees doesn't have.
- Probation Officer and Case Manager independence in providing immediate sanctions is a notable practice in this

Court. An immediate consequence for an individual's actions follows good Behavior Modification principles and behavior modification is the main goal of any drug court.

Recommendations

Although the GADC is performing extremely well, has several positive and notable practices, and is demonstrating the 10 Key Components in a commendable fashion, there are always ways that any process can be improved. Following are some recommendations for enhancing the GADC Program.

Provide the GADC with appropriate quarters where they can conduct private conversations and private treatment sessions with participants. At the time of the NPC evaluation team's site visit to Guam, the GADC Program was operating in a small space within the Judicial Center Annex. It was necessary to conduct one-on-one appointments between Case Managers and Drug Court participants in a non-private space well within hearing of other staff as well as other participants. Although HIPAA and other privacy laws require treatment sessions to be private, the thin walls of the room for group sessions allowed staff outside of the Drug Court Team to overhear sensitive conversations between Drug Court participants and their treatment providers. There is some talk of moving the Drug Court Program back into the Judicial Center Annex once again. This is not recommended and would be detrimental to Drug Court operations.

Modify drug testing procedures. It is strongly recommended that the drug testing process be modified and/or that Drug Court participants be tested separately from the general offender population as all participants expressed a great deal of

unhappiness at how they were treated during sample collection. The sample collectors should be trained in appropriate communication skills and professionalism. Alternatively, the drug testing for participants could be contracted out to a private testing agency.

Emphasize the importance of rewards as well as sanctions. Although the role of the Judge as an authority figure and as the one who hands out sanctions is vital to the drug court process, it is important to remember that for the participants, supportive interactions such as praise and other rewards coming from this authority figure can also be powerful motivators.

Institute some new rewards that require little or no funding. Possible rewards that are being used in other drug courts include calling those participants who are doing well first during drug court sessions and letting them leave early, conducting a fishbowl drawing of all those who are doing well, or giving candy. (**Note:** Since the time of the evaluators' visit, the GADC Team has already implemented one new reward — hearing all the clients due for incentives at the top of the court calendar.)

Continue efforts to recruit a Police representative for the GADC Team. It can be extremely useful to have Police represented on the Drug Court Team. They can learn to recognize participants on the street and can provide an extra level of positive supervision.

Clarify the length of time required for participants to be clean before graduation. There appeared to be some uncertainty among the Drug Court Team members about the number of clean tests and the length of time required for participants to be clean before they could graduate. It is important for this to be clarified and a clear policy be put in place and followed. Research has shown that the longer clients are required to be clean before graduation, the more positive their outcomes.

Prioritize making the ADCMIS functional. The GADC is developing an MIS that can be used to track participants for case management and for evaluation. It is important that the MIS be practical and functional for the Drug Court staff as well as usable for evaluation. The GADC should prioritize spending the time and resources needed to make this system user-friendly so that the data will be there when it is needed in the future.

Summary/Conclusion

The Guam Adult Drug Court demonstrates the Ten Key Components of Drug Courts in an exemplary fashion. The Program is well organized due, in a large part, to a well-organized Drug Court Coordinator as well as a thoughtful and dedicated Team. It was reported that the Ten Key Components were used in designing and implementing the Drug Court Program and it is evident that this is the case.

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BACKGROUND

In the past fifteen 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 well over 1,000 drug courts operating in all 50 states, the District of Columbia, Puerto Rico, and Guam. 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 offenders 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 operate outside of their traditional adversarial roles including addiction treatment providers, district 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 and Finigan, 2003; Carey et al., 2005). Some drug courts have even been shown to cost less to operate than processing offenders through business-as-usual (Carey and Finigan, 2003; Carey et al., 2005).

Guam's drug court movement began in the mid-1990s with the emergence of the "ice" (crystal methamphetamine) epidemic. Nationwide, there was an unprecedented increase in drug-related offenses, particularly with crack cocaine, that significantly impacted the criminal justice system. Following national statistics, Guam's increase of drug offenders rose to staggering numbers, thus impacting an already over-burdened justice

system that was unprepared for this occurrence.

In response to the epidemic, Guam legislators took an immediate stance on arrests related to crystal methamphetamine, creating one of the most restrictive and punitive statutes. A pro-arrest policy, mandatory sentencing guidelines, and mandatory confinement procedures were immediately instituted under Public Law 24-149, which was enacted March 25, 1998. There were no deferred plea considerations, nor were there considerations made relative to the amount of drugs offenders possessed at the time of arrest.

The judiciary initiated a specialized court docket to deal with the influx of offenders; developed alternative sentencing programs in the early 1980s that focused on anger and stress management, crime prevention, and alcohol treatment; created a Drug Unit within the Probation Services Division in December 2002 to deal specifically with drug offenders on probationary or pre-trial status; developed policies for mandatory urinalysis testing and reporting procedures; established drug educational programs for adults in March 1999 (Drug Education Program); and developed therapeutic drug programs for juveniles in October 2001 (Great Teens Program).

The Department of Mental Health & Substance Abuse, the only agency on Guam with a treatment facility at the time, also established programs for individuals with substance abuse issues. In March 1999 the Department of Corrections established a Residential Substance Abuse Treatment program within the correctional facility for incarcerated individuals. Such programs have



changed over time for numerous reasons, including a high employee attrition rate.

Despite government-wide efforts to contain the drug epidemic, there was no significant decrease in drug-related arrests, unsuccessful efforts to rehabilitate drug offenders already in the system, and no significant decrease in recidivism among released offenders. These futile results led judges, prosecutors, defense attorneys and representatives from the justice system to re-visit the idea of establishing a drug court.

According to the 2000 census, Guam had a population of 154,805 with a high proportion of Chamorro (37%) and Asian (32.5%). Guam's population increased by 21,653 over the previous census in 1990. This represented a 16 percent increase in 10 years. Over 23% of Guam's population lived below the poverty line and nearly 25% of the population had not completed high school. The Department of Education, now GPSS, the Guam Public School System, has in the past several years decreased the quality of education due to teacher & funding shortages. Surprisingly, the reports out this past year indicated students' test scores were in line with National standards.

An examination of statistics from the Guam Uniform Crime Report shows relatively high numbers of substance abuse arrests for adults, despite extremely limited law enforcement activities targeting drug crimes. In 1998, there were 418 drug-related arrests and 70% involved methamphetamine. The race/ethnicity of the arrestee population was approximately 60% Chamorro, 30% Filipino, and 10% Caucasian. With these statistics in mind, Guam began planning a drug court and was awarded a program-planning grant in 1998.

The planning grant allowed key participants to attend trainings and to receive technical assistance. A team was established to review the overburdened criminal justice system,

conduct research on drug courts, and determine the benefits of developing and implementing a drug court on Guam. It was decided that the Adult Drug Court would be a program primarily for first-time drug offenders who have substance abuse issues. (Second time offenders are accepted as long as their first case is closed and they have not attended the GADC program before.) The team's success at planning was realized with the award of a FY 2002 Drug Court Implementation Grant, 2002-DC-BX-0072.

Due to two major typhoons, implementation of the Adult Drug Court was delayed. In August 2003, Guam held its first Adult Drug Court session. Arrangements were made to collect client data in a drug court database, the Adult Drug Court Information System (ADCIS). The implementation grant also provided funds for evaluation and NPC Research was hired to perform a process and outcome study of the Guam Adult Drug Court (GADC).

This report contains the process evaluation for the GADC performed by NPC Research. (The outcome evaluation will be completed in December 2006.) The Ten Key Components of Drug Courts (developed by the NADCP in 1997) were used as a framework for the evaluation. The first section of this report is a description of the methods used to perform this process evaluation including the protocols used to obtain information on the Drug Court process, such as site visits, key stakeholder interviews, focus groups, document reviews and an examination of the Drug Court database. The second section of this report contains the results of the process evaluation including a detailed description of the Drug Court process and the information gained from the focus groups conducted with the Drug Court participants.

METHODS

Information was acquired for the 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 database. This information will be used to answer specific evaluation questions related to the Ten Key Components of Drug Courts. 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 Guam Drug Court for feedback and corrections. The Guam Drug Court process will be evaluated using the Ten Key Components of Drug Courts as a framework to determine the extent to which these key components were being demonstrated.

Site Visits

NPC Research evaluation staff traveled to Guam to observe the Adult Drug Court sessions and Drug Court Team meetings and to interview key Drug Court staff. These observations and interviews gave the evaluation staff first-hand knowledge of the structure, procedures, and routines of the Drug Court as well as allowing an observer's view of Team interactions to help evaluate the cohesiveness and integration of the Drug Court Team members.

Key Informant Interviews

Key informant interviews were a critical component of the process study. NPC staff interviewed 19 individuals involved in the Drug Court, including the Drug Court Coordinator, the Drug Court Judge and the alternate Drug Court Judge (the Juvenile Drug Court Judge), the Attorney General, the Public Defender, the Case Managers, the Treatment Counselors, Probation, as well as other individuals who were involved in the Drug

Court. NPC Research, under a grant from the Bureau of Justice Assistance and the Ad-



ministrative Office of the Courts of the State of California, designed a Drug Court Typology Interview Guide to provide a consistent method for collecting structure and process information from drug courts. This guide was modified to fit the purposes of this evaluation, including adding questions related to how the Guam Drug Court operated in terms of the Ten Key Components of Drug Courts (NADCP, 1997). The information gathered through this guide helped the evaluation team focus on important and unique characteristics of the Guam Adult Drug Court.

The topics for this 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), describing a conceptual framework for drug courts. The typology interview covers a large number of areas – including specific drug court characteristics, structure, processes, and organization – that contribute to an understanding of the overall drug court typology. Topics in the Typology Interview Guide include eligibility guidelines, the drug court program process (e.g., phases, treatment providers, urinalyses, fee structure, rewards/sanctions), graduation, aftercare, termination, the non-drug court process, the drug court team and roles, and drug court demographics and other statistics.

Key people involved with the Guam Drug Court were asked many of the questions in the Typology Interview Guide during site visits and through multiple follow-up phone calls. This serves three purposes: 1. It allows

us to spread the interview questions out over time, minimizing the length of the interview at any one point in time, 2. It provides us with an opportunity to connect with key players throughout the duration of the evaluation, maximizing our opportunities to obtain information, and 3. It allows us to keep track of any changes that occur in the Drug Court process from the beginning of the project to the end.

Focus Groups and Participant Interviews

NPC Research conducted two focus groups at the Guam Adult Drug Court, one with men and one with women. Both current Drug Court participants and graduates were included in these groups. The focus groups gave the participants an opportunity to share their experiences and express their perceptions about the Drug Court process with the evaluation staff. In addition, NPC Research interviewed two of the three participants who had been terminated from the Program.

Document Review

The evaluation team reviewed documentation from the Drug Court Program that would further the team's understanding of the Drug Court history, operations, and practices. These documents included intake and assessment forms, exit interview forms, the Drug Court Handbook, Program grant proposals, policy manuals, and meeting minutes.

Administrative Data Analysis

The Adult Drug Court Information System (ADCIS) was primarily developed by a

counselor at Client Services and Family Counseling, Judiciary of Guam, using the Buffalo System as a template. The database was still in the pilot stages during this evaluation, with revisions being made to the data fields and data being entered from paper files and other data sources during the early part of 2005. This most recent version is still being tested and modified. The database allows the GADC to record information on client demographics, Drug Court hearings, drug testing, treatment dates and service types, sanctions/rewards, case notes, and follow-up information. While this database will be used primarily for the outcome evaluation, it also provided valuable information for the process evaluation, including participant demographics and information on the length of time between arrest, referral, and Program admission.

The Judiciary of Guam (the Superior and Supreme Courts) has a database (the AS400) in use for over twelve years that contains data on offenders for court case tracking purposes. In January 2005, the Judiciary of Guam began using a new management information system (MIS) that contains the ADCIS, the AS400, and other databases from other agencies including Probation. This MIS has data on demographics, number of dependents, citizenship, dwelling description, arrest date, date of Magistrate hearing, conviction date, sentencing date, Probation status and dates, case history, case number, charges and charge code descriptions, dates of employment, occupation, education level, employment status, jail confinement (dates and name of facility). This database provided further information on GADC participants and will be a primary source for data necessary for the outcome evaluation on Drug Court participants and the comparison group.

RESULTS

The results presented in this report include a detailed process description of the Guam Adult Drug Court's current operations, a description and discussion of the focus group results, and an evaluation of the Drug Court process in terms of the Ten Key Components. Points of interest, issues, or successes experienced by the Drug Court are highlighted within the text as either "comments" or "observations." **Comments** contain information gathered directly from interviews with Drug Court staff or from participants, while **observations** contain information from evaluator observations of Drug Court processes. Recommendations are provided as appropriate to address issues or to suggest further improvements to the Adult Drug Court Program.

Guam Drug Court Process Description and Evaluation Remarks

The following information was gathered from interviews, Drug Court documents (such as the policy manual and implementation grant proposal) and observations of the Guam Adult Drug Court. The majority of the information was gathered from the interviews and, as much as possible, the evaluators have attempted to represent the information in the same words in which it was given.

OVERVIEW

The Guam Adult Drug Court first opened its doors to clients in August 2003. It began operations under the auspices of the Superior Court but has more recently been moved to Probation. The GADC has several unique practices such as retaining treatment counselors as contract employees of the Superior Court. The Court also employs its own Court Psychologist, who assists the GADC with clinical assessments and treatment advice.

These practices and other creative drug court operations are discussed further in this report.

IMPLEMENTATION

The idea for the Guam Adult Drug Court began in 1996 after the Mental Health



Judge Alberto Lamorena III

Department began to be overrun with serving drug-addicted clients. Presiding Judge Alberto Lamorena was working with drug and DUI cases and began to think about ways to stop the revolving door process. Judge Lamorena heard about drug courts in talking with judges in other jurisdictions and put together a team to look into the concept, including drug court grant possibilities. This team included Judge Lamorena, Superior Court Deputy Director Robert Cruz, Court Psychologist Dr. James Kiffer, and the Court's Special Projects Coordinator Jacqueline Zahnen. Some of the team went to a drug court training in California in 1996, but the team decided that implementing a drug court at that time was impractical and they didn't feel they had nearly enough first-time offenders without any history of violence on Guam to make a drug court worthwhile. But later on (with the emergence of the crystal methamphetamine epidemic) they realized that they could easily fill a drug court program with people who were waiting to get into Mental Health Department drug treatment. It was also helpful that Guam secured a grant to set up the Guam Juvenile Drug Court during this time (a full year before the Adult Drug Court). Presiding Judge Lamorena decided to go ahead with a drug court for adults and had Robert Cruz (the Superior Court Deputy Director) and Jackie Zahnen (the Court's Special Projects

Coordinator) look for federal funding for specialty courts and apply for a planning grant. Although the first application was turned down, the second application for a planning grant was successful. The Presiding Judge, the Superior Court Deputy Director, and Dr. Kiffer (the Court Psychologist) began attending conferences and trainings in 1998.

In June 2002, Guam received an implementation grant for an adult drug court. Unfortunately, implementation was delayed due to two super-typhoons that hit the island back-to-back which shut most of the island down for months. Once the Court was able to begin relatively normal operation, implementation of the Guam Adult Drug Court began.

Robert Cruz was involved with the logistical work in getting the GADC set up. He secured the lease, got the equipment (including computers), and made sure the GADC got administrative help. Dr. Kiffer was involved in the grant application and the drug court trainings. He provided input on how to set up treatment as well as the Drug Court in general. Jackie Zahnen acted as the Drug Court Coordinator during the development of the Program until other staff could be hired. She held this position through the hiring of a new Coordinator and Case Managers. The first Coordinator was in the position for a few months and then Lisa Baza was hired for the position in April 2003. Ms. Baza and the two Case Managers (Paul Mafnas and Dorianne Walker) did the organization and implementation of the Drug Court before clients arrived for the first Drug Court session in August 2003.

Although the Adult Drug Court began operation within the auspices of the Superior Court, it has since been transferred to Probation. This move to Probation included a

physical move of some Drug Court Team members and operations from the Pacific News Building into a small space in the Judicial Center Annex.

Comment: There was some feeling that having the Adult Drug Court Program under Probation rather than the Court (General Administration) was not in the best interest of the Program. There was concern that Drug Court participants would be treated more like general probationers rather than being treated following the policies and procedures of the Drug Court Program, particularly its emphasis on rehabilitation rather than punishment.

Observation: It is unusual to have a Court function, such as a specialty court like the Drug Court Program, operate outside the administration of the Court. Since one of the key components of drug court programs (NDCI, 1997) is a high level of supervision of program participants by a judge, it is important for the Court to maintain the ability to direct Drug Court operations.

Locating the Drug Court Program in the Judicial Center Annex leads to a lack of privacy for treatment and case management. This is not recommended and is detrimental to Drug Court operations.

Observation: At the time of the NPC evaluation team's site visit to Guam, the GADC Program was operating in a small space within the Judicial Center Annex. The Drug Court Case Managers shared a space with the Management Secretary, which meant that one-on-one

appointments between Case Managers and Drug Court participants were conducted in a non-private space well within hearing of other staff as well as other participants. In addition, the room set aside for group treatment sessions was small and had thin walls. Group sessions were crowded, and although these sessions are supposed to be private, according to HIPAA and other privacy laws, the thin walls allowed staff outside of the Drug Court Team to overhear sensitive conversations between Drug Court participants and their treatment providers.

Since the NPC evaluation team's visit to Guam, the GADC Team was moved into the newer Judicial Center. This space has been a great improvement and allows appropriate privacy for the Team and Drug Court Program participants.

Recommendation: Moving the Drug Court Program back into the Judicial Center Annex leads to a lack of privacy for treatment and case management. This is not recommended and is detrimental to Drug Court operations.

CAPACITY AND ENROLLMENT

The Drug Court is currently close to capacity with 75 active participants. As of June 2005, from the time of its inception in August 2003, 100 participants have enrolled in the Guam Adult Drug Court Program. Twenty participants have graduated and five have been terminated. The vast majority of the participants are male (72% male, 28% female). Over 76% of those enrolled are Chamorro, Guam's native population. The remaining 24% is made up of small numbers of Filipinos (7), Caucasians (2), and Koreans (3) as well as individuals from nearby islands including Palau, Chuuk and Saipan. About half of the participants are single, 30% are married and 20% are separated or divorced. Nearly half of the participants have one or more dependants (the number of dependants ranged from 1 to 8, with three-quarters of those with children having 3 or more). Considering the "ice" epidemic in Guam, it is unsurprising that the primary drug of choice is methamphetamine (particularly when a shipment comes on island), and then alcohol and marijuana. Most of the first participants were "hard-core users," but the more recent participants are mostly recreational users.

Comment: Due to recent cutbacks in manpower for the Guam Police and the Attorney General's Office, fewer drug offenders have been arrested and charged, which resulted in fewer offenders referred to the GADC Program. It is expected that this will not con-

tinue to be a problem and referrals will increase in the future.

DRUG COURT GOALS

Overall, the goals of the Guam Adult Drug Court are to help participants become clean and sober, improve their lives, and reduce their involvement with the criminal justice system.

The Drug Court Team members also provided specific goals in relation to the overall goals of Drug Court. These sub-goals are to:

- Hold clients accountable for their actions
- Offer Drug Court to clients immediately after arrest
- Give 1st time offenders a chance to get treatment and get their charges dropped
- Give people a chance to rectify a mistake without ruining the rest of their lives
- Give clients immediate rewards which will give them hope (especially meth addicts who have lost their sense of normal pleasure)
- Increase employability of clients and their ability to hold a job
- Help clients have a better family life
- Help clients obtain an education
- Reduce recidivism
- Help clients recover to a point where a person can function in the community
- Get clients involved in the community with a lifestyle that doesn't involve drugs
- Help clients feel that they are part of the community
- Have the clients contribute to and reintegrate into society as productive law-abiding citizens
- Get clients' family situations in order and have them buy into the whole regular lifestyle (having a house, being stable,

and living a drug free lifestyle so their kids will have a stable life and will grow up to be stable)

- Help people become self-reliant
- Provide treatment and services for people who spent too long on treatment waiting lists
- Provide intensive court monitoring and treatment for drug offenders

Observation: Information gained from focus groups with Drug Court participants, including participants who failed out of the Program, provides evidence that the GADC is already succeeding in many of its goals. In particular, participants stated they were responsible for what had happened to them, responsible for following through with treatment, and responsible for whether they succeed or fail in the Program. Participants talked about how they were working to get their family life in order and how they were going to school or had gotten a good job. Finally, the participants talked about how much they appreciated the opportunity to participate in this Program, and appreciated the support they got from the Drug Court Team. This helped them to feel that it was truly possible to get their lives straightened out and live without drugs.

GADC PROGRAM ELIGIBILITY

Eligible charges include (but are not limited to) felony possession and use of a controlled substance and/or felony driving under the influence, as long as there is no history of violent crime or substantial drug sales and there is a demonstrated drug use problem. Informants are not accepted into the Program. After screening for eligibility and suitability, participants may be admitted into Drug Court prior to entering a plea upon execution of the appropriate Drug Court waivers and contracts.

Clients entering the Guam Adult Drug Court must meet the following criteria:

- Be at least 18 years of age
- Be a legal resident of the United States
- Have no prior felony convictions of a violent and/or sexual nature
- Have no pending felony charges of violent and/or sex crimes
- Have no evidence of substantial drug dealing as defined by the Guam Code Annotated
- Have means of transportation to the Drug Court Program and recommended activities
- Show a measure of motivation for change

The potential participant's level of substance abuse must also be such that treatment and education will substantially benefit the participant and the community's safety. However, the Drug Court Team rarely refuses entry to anyone, even if the person can't speak English (translators are provided for limited English speaking clients, at the expense of the Judiciary), although there is a screening to make sure the Program is right for each participant. Potential clients are turned away only if they refuse the Program.

The step-by-step process for a person entering Drug Court begins with an arrest. Most potential participants are held on \$5,000 cash bail and are held in jail for 10 days. After the arrest, a Police Officer contacts the on-call Prosecutor at the Attorney General Office to pre-screen potential clients based on the charges and criminal history. Potential clients are identified, confined, and brought before the Court within 48 hours for a Magistrate Hearing. Sometimes Probation or Public Defender representatives will check with Pre-trial Services and notice that a new arrestee appears to be eligible and will bring that person to the attention of the Drug Court Team. In those cases, a screening is set up and brought to the Attorney General (AG) in order to speed the process. Within the 48-hour period after the arrest, a Prosecutor at the AG

Office legally screens the defendant by reviewing the rap sheet on the police report, the AG's criminal history index cards, and the Court and AG's criminal history databases. During this review, the AG determines whether the defendant is eligible for participation in the Program (whether the defendant is charged with an eligible offense and meets the legal criteria). At the Magistrate Hearing the Judge appoints a Defense Counsel to represent the defendant and sets a date for a preliminary hearing within 10 days. During this time, the Defense Attorney examines the legal issues and explains the GADC Program to the defendant as an alternative to criminal prosecution.

If the AG, Defense Counsel, and the potential client wish to seek admission to the GADC Program, the Defense Counsel refers the defendant to the Program. The Judge then orders the defendant to undergo a clinical screening by the Case Manager in conjunction with Client Services and Family Counseling (CSFS), with the results forwarded to the Judge before the Arraignment appearance within 10 days. The purpose of the clinical screening is to determine the appropriateness for treatment and the client's readiness and willingness to enter and complete the Program. Although this screening is performed to determine suitability, the Team has rarely turned anyone away because of unsuitability.

If the defendant is found appropriate for the GADC and is still interested in the Program, the Prosecutor or Defense Counsel make a motion to admit the defendant. Upon approval of the Court, the Judge orders a clinical assessment and the defendant is admitted into the Program after the deferred plea is signed. The participant then receives orientation from the Judge and the Coordinator or Case Manager.

Information gained from focus groups with Drug Court participants, including participants who failed out of the Program, provides evidence that the GADC is already succeeding in many of its goals.

Following acceptance into the Program and Probation processing, each participant signs a treatment contract, a waiver of liability, an acknowledgement of the rules, and consent forms for the release of information. Participants are given a Drug Court Handbook with the rules and procedures that they must follow. The Judge enters an order containing the terms and conditions of the deferred plea. The new participant undergoes the clinical assessment, and evaluations for chemical dependency and mental status. The results are reviewed to determine what services are required and treatment begins.

Comment: Some of those interviewed expressed concern that the Attorney General Office was not referring offenders to Drug Court in a timely enough manner and that some people who were not qualified for Drug Court were referred anyway. However, this is most likely due to understaffing at the AG Office as well as a lack of readily available criminal history information (including delays in receiving the police report). Staff also noted that the AG Office was generally supportive of Drug Court and willing to be flexible in trying new things in an innovative program like the GADC.

The goal of the Guam Adult Drug Court is to get people into treatment as soon as possible after arrest. Because of this, the length of time from arrest to entrance into the Drug Court Program is intended to be 12 working days (with a Magistrate Hearing before the Judge within 2 days and an Arraignment within 10 days), but in practice it often takes longer. Most eligible clients are offered Drug Court immediately, but more recently Program entry can take up to several weeks due to several factors, including the delay in conducting a legal screening. The Attorney General Office has a lack of manpower due to

budget cutbacks and currently has just two drug prosecutors assigned to handle all drug-related offenses, including those of the GADC.

Observation: Deferred pleas and diversion from jail into treatment programs for methamphetamine use are not allowed on Guam. However, methamphetamine use is the largest drug problem on Guam and is one of the main reasons for starting the Guam Adult Drug Court. In order to allow meth users to have the benefit of Drug Court and in order to begin a focused program to treat this major problem, the AG allowed offenders who were otherwise eligible for Drug Court to be charged with using a “amphetamine based substance.” This charge was eligible for diversion to a treatment program so the individuals who most strongly needed the treatment offered by Drug Court could obtain it. This is another demonstration of the flexibility and creativity of the Drug Court Team members that allows this Program to work well.

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

The GADC is a deferred-plea Program. Upon successful completion, the charges that led to participation in Drug Court are dismissed and the record is expunged. Further incentives for Program entry and graduation for offenders include:

- 2 years probation instead of the maximum 5 years associated with felonious charges
- The possibility of becoming clean and sober
- A better chance to obtain work due to the felony being taken off the offender’s record
- \$4,500 of the \$5,020 Court fee can be translated into community service hours

- Community service credit is given on participants’ fines at 25 hours per month (\$128) for those participants doing exceptionally well in the Program
- Certificates and accolades for sobriety, phase promotions, and Program success
- Vocational & educational assistance, counseling, etc.
- Establishing networks with people in recovery and people who are clean & sober

DRUG COURT PROGRAM PHASES

The GADC Program has four phases and is approximately 12 months in length (excluding 6 months of aftercare). Each phase has treatment and probation requirements. The amount of time in each phase is somewhat flexible depending upon when each client satisfies the phase requirements.

Phase I (Educational Phase) – 4 to 6 weeks:

Phase Goals

- Produce a clearly documented plan of Clinical Service Delivery
- Complete a comprehensive assessment
- Produce clearly defined needs statement for ancillary services
- Develop clear and realistic short-term treatment goals

Requirements

- Submit to orientation and health screening
- Assessment by a Ph.D. Psychologist and the Case Manager
- Development of a master treatment plan
- Attend Drug Court hearings once per week
- Attend two Educational Groups per week

- Attend three Self-help group meetings per week
- Attend Individual and Family counseling in accordance with treatment plan
- Meet with Case Manager once per week minimum
- Stay current with fee payment and/or community service hours
- Call in for urinalyses tests
- Take an average of two random urinalyses per week
- Follow general and special conditions of probation

Phase II (Initiate Treatment) – 10 to 12 weeks:

Phase Goals

- Use proven therapy techniques to achieve identified short-term goals
- To achieve behavioral changes
- Reestablish responsibility for behavior and life
- Teach and establish communication and coping skills
- Identify, address, and educate the participant on relapse prevention techniques

Requirements

- 4 Hours of Recreational Therapy a month
- Attend Clinical Groups once per week
- Attend Family Counseling sessions as needed
- Attend Drug Court hearings once every 2 weeks
- Meet with Case Manager once per week
- Attend three Self-help group meetings per week
- Attend Individual and Family counseling as needed

- Individual counseling in accordance with the treatment plan
- Stay current with fee payment and/or community service hours
- Call in for urinalyses tests
- Take an average of one random urinalysis per week (or as directed by Judge)
- Follow general and special conditions of probation

Phase III (Skill Application) – 10 to 12 weeks:

Phase Goals

- Assess participant's ability to generalize learned behaviors into home, work, and community
- Comprehensive assessment of vocational needs of the participant
- Establish clearly developed long-term goals
- Begin to transition the focus of control to the participant
- Slowly reduce intensity and duration of direct treatment services

Requirements

- 4 hours of Recreational Therapy a month
- Attend Clinical Groups once per week
- Attend Family Counseling sessions as needed
- Attend Drug Court hearing once per month
- Meet with Case Manager once per week
- Attend two Self-help group meetings per week
- Attend Individual and Family counseling as needed
- Attend Individual counseling as needed
- Stay current with fee payment and/or community service hours

- Call in for urinalyses tests
- Take an average of one random urinalysis per week (or as directed by Judge)
- Follow general and special conditions of probation

Phase IV (Aftercare and Transition) – 26 weeks:

Phase Goals

- Support participant in continued use of skills developed during treatment process
- Achieve previously developed long-term goals
- Reduce and eventually terminate treatment services to the participant
- Participant will actively participate in developing an aftercare plan

Requirements

- Schedule Home Visits once per month (or as needed) by Case Manager
- Random visits from Probation Officer twice per month
- Weekly monitoring of employment by Case Manager
- Attend two Clinical Group sessions per month
- Attend Drug Court hearing periodically, as set by Judge
- Individual sessions as needed
- Attend the Recreational Therapy Groups and Psycho-educational Groups once per month
- Attend one Self-help group meeting per week
- Stay current with fee payment and/or community service hours
- Call in for urinalyses tests

- Take an average of two random urinalyses per month (or as directed by Judge)
- Follow general and special conditions of probation

Aftercare: The Guam Adult Drug Court considers Phase IV the Aftercare Phase, although it occurs before graduation from the Program. Upon completion of 27 weeks of treatment, the aftercare component is effectuated. Aftercare continues in intensity up until 36 weeks of treatment. Thereafter, maintenance care (6, 12, and 18 months post graduation) is practiced. This post-graduation maintenance involves looking up graduates and assessing their recovery, living conditions, lifestyle, and mental and physical health. Should intervention be necessary, referrals and appointments are set utilizing community-based resources. The first graduates were up for their 6-month interview in July 2005.

Observation: Looking up and checking in physically with graduates post graduation is a drug court practice unique to Guam. The size of the island as well as the culture that leads to close-knit communities makes the ability to provide this type of strong support for graduates a viable option for this Program.

REQUIREMENTS TO CHANGE PHASE

Clients may change from one phase to the next when they have met all the requirements of a particular phase. The time spent in each phase varies according to how quickly those requirements are completed.

Criteria to Move from Phase I to Phase II:

- 5 Clean Drug Tests
- 20 Group Sessions (including Self-help meetings)
- 4 Weeks in Phase I
- 6 Meetings with Case Manager

- Recommendation of Adult Drug Court Judge
- Recommendation of the Case Manager
- Recommendation of Therapist
- Updated Treatment Plan

Criteria to move from Phase II to Phase III:

- 10 Clean Drug Tests
- 40 Group Sessions (including Self-Help meetings)
- 10 Weeks in Phase II
- 10 hours of Recreational Therapy meetings
- 10 Meetings with Case Manager
- Recommendation of Adult Drug Court Judge
- Recommendation of Case Manager
- Recommendation of Therapist
- Updated Treatment Plan

Criteria to move from Phase III to Phase IV:

- 10 Clean Drug Tests
- 30 Group Sessions (including Self-help meetings)
- 10 Weeks in Phase III
- 10 hours of Recreational Therapy meetings
- Recommendation of Adult Drug Court Judge
- Recommendation of Case Manager
- Recommendation of Therapist
- Updated Treatment Plan

TREATMENT OVERVIEW

After clients enter the GADC Program, a clinical assessment is performed at Client Services and Family Counseling. The Court

Psychologist conducts a clinical interview, a mental status examination, and the Minnesota Multiphasic Personality Inventory-2 (MMPI-2) on all Drug Court clients in order to weed out serious pathologies. The Psychologist gives the assessment and treatment recommendations to the Drug Court Coordinator. The clients' drug use and dependency are assessed using the Substance Abuse Subtle Screening Inventory (SASSI) tool. A version of the Addiction Severity Index (ASI) and the WRAT (Writing and Reading Aptitude Test) are administered by the Case Managers at the time of intake (full-length instruments are too long to be practical), as well as screenings for communicable diseases. A specific readiness-for-treatment scale is not used. The intake summary includes demographic information and background info, as well as a summary of the assessment results. The Psychologist and Case Manager review the results to determine the services required by each client (including education, employment, mental health, vocational training, detoxification, housing, transportation, and mentoring programs) and the appropriate referrals are then made.

The traditional Court process for drug offenders continues to involve the use of Mental Health Counselors (from the main public outpatient treatment agency on the island). However, as the treatment process at this mental health agency was already established, the Adult Drug Court did not have much control over how and when the treatment was administered and the Counselors did not have accountability to the Court. For these reasons, the Drug Court Team chose to contract with private outpatient Treatment Counselors to work directly for the Court part-time. The GADC currently has 3 part-time contract therapists to provide group and family counseling. The licensed individual therapist recently relocated to Florida and her position is presently unfilled. CSFC (Client Services and Family Counseling) has provided individual counseling services to those

Drug Court participants who have a dual-diagnosis.

The Phase I educational groups are co-ed and conducted by the GADC Case Managers, Coordinator, and a Treatment Counselor. Beginning in Phase II the Treatment Counselors facilitate gender-specific group sessions of up to 10 clients each, lasting through Phase IV. In general, the female Counselor sees female participants and the male Counselor sees male participants. The Treatment Counselors do both group and individual treatment sessions, although one Treatment Counselor position is usually designated for the individual sessions. Treatment sessions are conducted at Client Services and Family Counseling or at the Drug Court offices. Very recently (May 2005), the GADC moved to a new building and have transitioned all treatment sessions to the designated treatment rooms. Groups are conducted in English, but sometimes Chamorro is used (especially if someone doesn't speak English very well). Some clients are from neighboring islands but can usually speak English or Chamorro. Anything said in Chamorro is translated so that the rest of the group knows what's going on.

When ready to move into Phase II, a client is placed into a group that has already been established or, if there are enough participants moving from Phase I to Phase II, an entirely new group is formed (and whichever Counselor has the time is assigned to facilitate that group). Groups are mixed (consisting of clients in Phases II and III or clients in Phases III and IV, etc.). Counselors track attendance with sign-in sheets that the Case Managers then enter into the Drug Court database. The Guam Adult Drug Court tries to have clients move through the Program together as a

group, but due to different rates of progress clients sometimes fall out of the group or get placed into a new group.

The Counselor can recommend that a client move to another group if it seems more appropriate. Dual-diagnoses or serious mental health issues can be referred to individual counseling. If a Counselor is having issues with a client, he or she can bring it up with the Case Manager. The initial assessment results and Psychologist assessments are included in the client's file, which the Counselors are able to

Looking up and checking in physically with graduates post graduation is an adult drug court practice unique to Guam. The size of the island as well as the culture that leads to close-knit communities makes the ability to provide this type of strong support for graduates a viable option for this Program.

view as needed.

Observation: Many drug court programs have problems with providers who do not consistently provide the necessary treatment information to the drug court judge and team and/or do not provide it in a timely manner. Contracting Treatment Counselors directly with the Court is an excellent solution to this common problem. The GADC can specify the reporting of information in a timely manner as a part of the contracts. In addition, these individuals are a part of the Drug Court Team and can understand the necessity for the type of information needed by the Court as well as the appropriate timing.

Detoxification is usually completed prior to Drug Court entry at the Department of Corrections detention facility, but some participants are sent there after Program entry if they need to detoxify. There are few options for residential treatment on Guam. The Department of Corrections can provide the highest level of treatment with a 6-month Residential Substance Abuse Treatment (RSAT) program. The Department of Mental Health and Substance Abuse has an outpatient day treatment program that accepts eligible referrals from the Adult Drug Court,

and the Salvation Army Lighthouse Recovery program is used for residential treatment (for men only). Oasis is a new program that provides residential treatment for homeless women.

The treatment model used by the Drug Court treatment providers is adopted from a social cognitive-behavioral approach, with cultural competency at the forefront of treatment. The Team uses a strengths-based multi-agency approach in ensuring participant compliance with the treatment program. The materials and information used in the therapeutic process are culturally sensitive to Guam's multi-cultural background and especially the island's predominant cultural group, the Chamorros. In Chamorro culture, it is inappropriate to seek help. "Your problems are your own and you don't bring shame to your family." These issues are addressed by the Counselors in talk therapy, exercises, workbooks, journal entries, and informational handouts.

Comment: There are many cultural factors that affect the treatment process. For example, in traditional Chamorro culture children and young adults were expected to respect their elders. Women were taught to avert their eyes. Young or female Chamorros should not tell old or male Chamorros what to do. The island is also small enough that the treatment providers often have family ties with their clients or know their clients personally.

Observation: It is clearly important that the Drug Court Team and treatment providers consider cultural relevancy. Observation of the Drug Court combined with interviews with Drug Court staff and participants showed that the strong family influence on Guam is acknowledged and used in the GADC treatment process, along with relapse prevention, education, and processing

groups. For example, unlike many drug court programs, in the GADC, clients are *not* encouraged to end their relationship w/ friends or family that also use drugs since it is not practical in this culture and on Guam. Instead, they are told to make smart choices and to choose not to put themselves at risk— to avoid family members or friends in situations when they are likely to use.

Contracting Treatment Counselors directly with the Court is an excellent and creative solution to communication problems between treatment providers and the Judge, which are common to drug courts.

Comment: There was some feeling by the Counselors and the majority of the participants that longer group sessions (1 ½ hours instead of 1 hour) would be beneficial. It is often necessary to cut the discussion short, particularly after watching an educational video, because of the need to wrap up the session in order to be done on time.

Comment/Observation: Participants with children would benefit from having childcare available during treatment sessions. One Team member suggested coupons for baby-sitting as a possible reward.

Recommendation: It is recommended that the GADC explore the possibility of finding some community members willing to volunteer or, if the GADC finds the funding for tangible rewards, spend some of that funding on child care coupons.

Each Drug Court client is required to attend either Alcoholics Anonymous (AA), Narcotics Anonymous (NA), or other self-help groups. The number of meetings a client is required to attend depends on the phase as well as Counselor and Case Manager recommendations. Participants are required to turn in proof of their attendance at self-help meetings.

Comment/Observation: A measure of Program success could include attendance at self-help meetings towards the end of the Program. It is believed that clients who are doing the best are those that attend self-help the most. If the GADC tracks the number and dates of self-help meetings then it would be possible to test the importance of self-help meetings by looking at graduation status, the rapidity of participants getting to graduation, and recidivism for those who attend more self-help meetings relative to those who attend the minimum amount.

The Drug Court Team works well together and interacts with one another very positively.

partment of Public Works, the various mayors' offices, and non-profit organizations (American Cancer Society, American Red Cross) provide many options for participants to complete their community service hours.

Additionally, there is a recreational therapy program of 4 hours per month (one Saturday per month) for participants in Phases 2-4. The therapy program has access to a gym and its facilities to play volleyball, softball, and

basketball or the clients go on beach walks and have barbeques. Art and music therapy are also incorporated on days when the weather does not permit outdoor activities.

OTHER DRUG COURT SERVICES

The Guam Adult Drug Court has built relationships with many agencies in the community that provide other services to Drug Court clients, such as DISID (Division of Integrated Services for Individuals w/ Disabilities) and MIP (Medical Indigenous Program). The Department of Public Health & Social Services assists with public assistance, HIV testing, and medical insurance needs. The Drug Court also works with the Guam Housing and Urban Renewal Authority (GHURA) to assist clients with housing. In addition, Drug Court has services that help participants become employable and find work. The Agency for Human Resource Development (AHRD) and the One-Stop Career Center assess job skills and train or arrange for employment skills training. Pacific Human Resources Services assists in linking participants with temporary jobs.

Other services include education assistance, grief counseling, family therapy, and alcohol & drug counseling. Drug Court clients receive help in writing resumes and also receive referrals for food stamps, welfare services, homeless shelters, mental health services, medical and dental services, anger management, obtaining a GED, and parenting classes. Parks and Recreation, the De-

TEAM MEETINGS

The Judge, Coordinator, Case Managers, Court Psychologist, Probation Officer, and the Attorney General and Public Defender representatives meet every Friday at 2:00pm (before Drug Court sessions) to discuss client progress. They make decisions on sanctions and rewards that will be imposed in Court as well as sanctions that have already been imposed by Probation or the Case Managers. Treatment Counselors attend the meeting if they choose or if they are requested to attend.

The Drug Court Treatment Team meets every other Thursday to set the calendar, discuss each participant scheduled to appear at the Drug Court sessions, and prepare orders before Court. The Treatment Team talks about each scheduled participant's progress and decides whether the participant should be recommended for promotion or sanctioning. The Treatment Team also discusses any issues that participants may be having and any options that would solve the clients' various issues (housing, jobs, treatment, etc.). The Team members who attend these meetings include the Coordinator, the Court Psychologist, the Case Managers, and the Treatment Counselors. The Case Managers report on their clients to the rest of the Treatment

Team, and then the Counselors give their input and discuss their concerns. The Coordinator runs the meeting, but there is an open discussion and everyone is able to give input on clients and their sanctions, rewards, and promotions. Team members don't write reports, but share information about the clients verbally (i.e., if a client did not show up to a treatment session, the Counselor tells the appropriate Case Manager about it). This information is then added to the Drug Court database (ADCIS).

Observation: Evaluation staff observed that the Drug Court Team works well together and interacts with one another very positively during staffing meetings. Although they discussed each participant's progress seriously and thoughtfully, there was also a good amount of smiling, joking and laughter during the meetings. When Team members disagreed on a point, they discussed their views openly and listened respectfully to the opposing view.

Observation: Although the Team recommended jail as a sanction for several participants, they were always sensitive to each participant's job situation. By being flexible in when the jail sanctions were served (e.g., on weekends), the Team made sure that the jail time would not cause a participant to lose his or her job. This flexibility in how and when they use jail time allows the Team to continue to reinforce participants' positive behavior (maintaining a job) without losing the ability to sanction the negative behavior.

In addition, there is a Drug Court Stakeholder Meeting held monthly to talk about policy issues and to make policy decisions for the Drug Court. The Judge runs the meeting, which is attended by the Coordinator, the Court Psychologist, the Case Managers, the Probation Officer and Supervising Probation Officer, the Deputy Director of the Court, the MIS Chief, and the Attorney General and Public Defender representatives.

PROVIDER AND TEAM COMMUNICATION WITH COURT

Clients sign a consent form at the beginning of the Program that allows treatment information to be shared with the Court and the Drug Court Team. Treatment Counselors share information about their clients verbally during Treatment Team meetings every other week. If there is information that is more urgent, such as participants missed treatment meetings, the Counselors will call the Case Managers without waiting for the regular meetings. Case Managers write progress reports (treatment progress, employment, home visits, attitude, relapse issues) and use them to report to the rest of the Drug Court Team at the Drug Court meetings and sessions. The Probation Officer keeps track of UA history, community service hours, and the payment of fines. The Probation Officer discusses any compliance or UA result issues during Drug Court sessions or Drug Court Team meetings. Information on compliance and treatment status can be shared with the Court on an as-needed basis.

DRUG COURT SESSIONS

Guam Adult Drug Court sessions are held every Friday afternoon and generally last about one hour. Judge Lamorena presides over the sessions, although the Juvenile Drug Court Judge will occasionally sit in when Judge Lamorena is away. The number of clients varies at each session between 15 and 45 but is generally around 25 or 30. Clients usually attend Court alone, but a few spouses attend the sessions. The Judge calls up all participants in a specific phase group (or phase promotion group) simultaneously, but then speaks to each in the group individually (so participants receive individual attention from the Judge, but also experience the benefit of group support). The Case Managers and Probation Officer report on the client's status and then the Judge asks each client a few questions, and encourages them. If a client doesn't appear in Court

and doesn't call in, the Probation Officer requests a bench warrant. Most of the clients spend a minute or two in front of the Judge, with the sanctioned participants taking between 5-10 minutes each.

The Judge begins Drug Court with promotions to the next phase. Promoted participants are applauded and given certificates, and the Judge shakes their hand and gives them encouragement. Once the Judge has finished speaking to each of the promoted participants, they are excused from the Drug Court session. Phase IV participants are then called up, followed by Phase III, Phase II, Phase I, new participants, and finally participants who are being sanctioned. Participants stay in the courtroom until the Judge excuses them (usually after each person in that particular phase has been spoken to). The sanctioned participants have to stay for the entire session. The Team is sensitive to clients' employment situations and how sanctions would affect their jobs as well as their progress in the Program, but they also try to be consistent with sanctions and impose them immediately.

The Drug Court Team members who attend Court sessions are the Judge, the Coordinator, the Court Psychologist, the Case Managers, the Probation Officer, the Supervising Probation Officer, the Attorney General and Public Defender representatives, and the Alternate Public Defender (if one of their clients is attending Court that day). Private defense attorneys (if the participant doesn't use the Public Defender or Alternate Public Defender), a Marshal (for court security), and a Court Clerk also attend Drug Court sessions. The Treatment Counselors do not regularly attend Drug Court sessions, but they do talk to other members of the Treatment Team regularly.

THE DRUG COURT TEAM

Judge. The Adult Drug Court Judge is also the Presiding Judge of the Superior Court of Guam. The Drug Court Judge position does not rotate, but the Juvenile Drug Court Judge can fill in for the Adult Drug Court Judge if he is not available. In general, the Judge is the central figure for the Program. The Judge supervises and reinforces treatment by reviewing reports from the Drug Court Team, provides support and praise to clients,

as well as incentives and sanctions to encourage success. In addition, the Judge carries out public relations work and outreach (e.g., informational talks) in the community.

The specific tasks listed for the Judge are to preside over the Court sessions, chair Drug Court Team and Stakeholder meetings, deal with violations, provide assistance with future planning, screen applicants, make referrals to Drug Court, provide leadership, work with clients, and give out sanctions. The Judge's role was described as psychologically like that of a client's parent because the clients usually want to please him. He's the authority figure who can punish the clients and the Counselors are the support system.

Comment: The role of the Judge is important in the treatment process because he has so much influence on clients as well as providing the authority for the Drug Court staff to do their work. The Judge is primarily seen as the authority figure and is the one who punishes the participants (particularly since the Counselors don't want that role). The Judge also congratulates and provides incentives for participants who are doing well.

Recommendation: Although the role of the Judge as an authority figure and as the one who hands out sanctions is vital to the drug court process, it is important to remember that for the participants, supportive interac-

It is important to remember that for the participants, supportive interactions such as praise and other rewards coming from the authority of the Judge can be powerful motivators.

tions such as praise and other rewards coming from this authority figure can be powerful motivators.

Drug Court Coordinator. The Drug Court Coordinator is the point of contact for the Drug Court Team, which means that she is in constant contact with Team members outside of Court, and provides the various agencies with information about the Drug Court and its clients. The Coordinator's role is to coordinate the Team, perform clerking duties and internal evaluations, monitor data in the Adult Drug Court Information System (ADCIS), write Drug Court protocols, search for and write grants, oversee the Treatment Counselors and Case Managers, fill in for the Case Managers when necessary, prepare budgets, connect clients with services, direct the clients' community service projects, and do public relations work in the community. She also conducts screenings after a referral, checks clients' criminal history, interviews the clients, makes recommendations to the Team about the clients, ensures that grant requirements are being met, and generates reports. In addition, the Coordinator organizes graduations and Stakeholder Committee meetings.

Comment: The Drug Court Team had high respect for the Coordinator. Having a Coordinator with both a counseling and probation background is a large benefit to the Program because she can understand the different aspects of each person's job and can communicate well with all the Team members, helping the Team work well together. The Coordinator was described as the glove and the Team as the hand. In addition she was greatly appreciated by the Team for taking care of the "political work" so they can focus on their Drug Court duties.

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Treatment Counselors. The Court contracts its own Counselors. All outpatient treatment is conducted in-house. Contracted individual and group Counselors develop their own treatment curriculum and program in consultation with the GADC Team and the GADC treatment manual. A Court-contracted Psychologist is available for referrals for dual diagnosis or when individualized services for clients are deemed necessary. There are currently two Counselors on staff who work with Drug Court clients, one generally for the men and one generally for the women.

The Treatment Counselors provide and monitor treatment, give status reports to the Court, attend Treatment Team meetings and other Drug Court-related meetings as needed, perform individual counseling, provide non-judgmental support to clients, conduct process groups, and facilitate dialogue between the group members. The Treatment Counselors' role is to engage participants in treatment, provide education about how drugs affect them physically, socially and mentally, facilitate groups, and help clients become connected with other agencies or services (family counseling, domestic violence counseling, etc.). The Counselors help the clients learn about substance abuse and guide them in their work on relationships, relapse prevention, and recovery.

The Court Psychologist also plays a role in Drug Court. He attends Treatment Team meetings to talk about individual cases and Stakeholder meetings to give input on policy issues. He consults for any problems the Case Managers or Counselors are having with participants and researches and answers any Counselor or Case Manager question. The Court Psychologist also provides the Treatment Team with information on what should be covered in group sessions.

Observation: The Guam Superior Court engaged in a rare practice by hiring a psychologist as a Court employee in 1991. The Court was having trouble getting offender psychological evaluations in a timely manner, so the Presiding Judge hired a psychologist to work directly for the Court in order to make the process more efficient. Because the psychologist works for the Court, he is independent of the defense and the prosecution and can give his opinion as an expert witness or in evaluations of competence can stand trial impartially.

Probation. The Probation Department conducts all urinalysis (UA) drug testing for the Drug Court Program and provides supervision and monitoring of Drug Court clients in the community. The role of the Probation Officer is to attend all Team meetings and Drug Court sessions, supervise the drug testing and scheduling, monitor community service (if the fine is converted to community service hours), report positive UAs or failure to call in for a scheduled UA, and prepare violation reports (unless there is an automatic Drug Court sanction).

Drug Court clients are required to meet with the Probation Officer on a regular basis. The Probation Officer also performs periodic monitoring of the Drug Court client and his/her family, weekly monitoring of the client's employer and performance, tracking of clients that don't call in for the drug testing schedule or fail to appear for a test, and is involved in the assessment of the clients' behaviors and progress during Drug Court sessions.

Observation: The Probation Officer reports on clients at the staffing meetings. He appeared to be quite knowledgeable about Drug Court clients, including their employment status, living situation and family. This Probation Officer is quite active in the Drug Court Program. He has recommended a new sanction of one day in jail for participants who fail to call in on schedule for their UAs,

particularly if they have a pattern of not calling in on Mondays (since they are more likely to use over a weekend). He has also found a way to perform home visits more efficiently and without needing a backup by having participants come outside of their houses or by visiting them at their jobs.

Case Managers. The Case Managers are the clients' main liaisons to the rest of the Drug Court Team. Case Managers make referrals and monitor all services that are needed by clients in accordance with their treatment plan. Each Case Manager is assigned about 40 clients per year. The Case Managers are assigned their own caseloads, but they are familiar enough with each other's caseloads to take over if one of them is out of the office. Due to changes in the system on Guam, the Case Managers will soon be made Probation Officers. Although their duties won't change, they will begin to conduct home visits alone and will have a license to carry a weapon.

The Drug Court activities of the Case Managers include attending every Drug Court session and Treatment Team Meeting, working directly with participants on a regular basis, documenting every contact with clients in the database, conducting home visits, conducting group sessions for Phase I, doing data entry in the drug court database, case management, screening for suitability, referring clients out for other assistance, helping clients with resumes, meeting with each client at least once a week, checking up on clients with phone calls and visits, making sure the clients are complying with the treatment program and Court directives, monitoring clients' jobs and community service, monitoring treatment session attendance, and networking and finding community partners for clients' community service projects.

Observation: The Case Managers have a high caseload for the amount of services they provide, particularly if they will have Probation duties added as well. If the GADC con-

tinues to expand as intended it will be necessary to hire another Case Manager.

Observation: The Case Managers work very hard and are clearly dedicated to the Program and its participants. They are respected by the other Drug Court staff and by the participants they serve.

Public Defender & Alternate Public Defender. The role of the Public Defender is to provide legal advice, ensure that the rights of the clients are protected, advocate at staffing for the clients, and refer clients to Drug Court. The Public Defender is the attorney for approximately 90% of Drug Court clients (10% have their own private attorney). All Deputy Public Defenders are trained in Drug Court eligibility requirements and can handle each step of the process for their cases. The role of the Public Defender in Drug Court is different than in business-as-usual cases. It is a non-adversarial role (for example, if the Public Defender knows that a client needs treatment, she recommends Drug Court).

The Public Defender (or a Deputy Public Defender) attends every Team meeting, Drug Court session, and Stakeholder Meeting. The Drug Court activities of the Public Defender representative include going to the jail and talking to newly arrested potential Drug Court participants, assisting with status reports and providing useful legal information to the rest of the Drug Court Team, assisting with eligibility determinations, doing the petitions, and taking notes at Drug Court Sessions and other meetings. The Public Defender also assists participants in other ways, such as helping them to get their driver's license back and negotiating with other agencies on their behalf.

Comment: The other Drug Court Team members expressed appreciation for having a

Public Defender representative attend staffings and Drug Court sessions. It is very efficient to have them at the meetings to answer questions. Legal issues with clients can also be taken care of immediately.

Attorney General. The Attorney General's (AG) main role in Drug Court is to identify and refer potential Drug Court participants and to ensure that public safety is protected. The role of the AG in Drug Court is different than in business-as-usual cases as Drug Court is more therapeutic than punitive in nature

and they have a non-adversarial role with the Defense Attorney.

The AG representative handles all types of drug cases. He is a member of the Drug Court Team and attends all Drug Court sessions and Stakeholder Committee meetings. His activities include attending

the arraignment, conducting the initial eligibility determination, checking the offender's criminal history (via police report rap sheets, AG index cards, and the Court's database), preparing the declaration and complaint, preparing the deferred plea and screening form, monitoring the client's situation, taking notes on the Drug Court session proceedings, holding the clients accountable, and ensuring that clients follow through with what they need to do.

Comment: The role of the AG assigned to the Guam Adult Drug Court was expressed as the opportunity to allow therapy a chance to succeed and to assist as many offenders as possible in getting into the Program. The AG does not generally attend the Drug Court staffings. Other Team Members felt it would be helpful to have the AG attend staffings as it would increase efficiency in getting things done during the meetings rather than later.

It can be extremely useful to have Police represented on the Drug Court Team. They can learn to recognize participants on the street and can provide an extra level of positive supervision.

Law Enforcement. The Police Department has been invited to attend Drug Court sessions and meetings, but as of yet no representative has attended. The Juvenile Drug Court Judge has had many meetings with law enforcement to try to get them involved and has been successful in getting verbal support for Drug Court.

Recommendation: It can be extremely useful to have Police represented on the Drug Court Team. They can learn to recognize participants on the street and can provide an extra level of positive supervision. The GADC should continue their efforts to recruit a Police representative.

“The Team is very good at sharing what they have learned at trainings and what they have read with each other.”

self well. The Team is very good at sharing what they have learned at trainings and what they have read with each other.

Recommendation: Continuing education is important, especially when there is staff turnover and new Team members are hired.

At the time the evaluators visited the GADC, there was still some funding left in the grant to pay for travel to trainings. The GADC Team should consider requesting a drug court trainer from the National Drug Court Institute (NDCI) to hold continuing

education trainings on Guam for all Team members. Perhaps some of the grant funds could be used to assist with travel costs.

Recommendation: Some Team members expressed an interest in regular trainings, perhaps every three months on different topics. One model for doing this would be to assign each Team member a topic to research and present to the rest of the Team (perhaps on their own role). If this was done quarterly and all Team members were involved, each one would need to present less than once per year.

DRUG COURT TEAM TRAINING

Members of the Guam Adult Drug Court Team have attended Drug Court training conferences and workshops, and have visited other Drug Courts to learn about options for Drug Court organization and processes. However, the options have been limited due to monetary and distance constraints. The Case Managers have attended the National Drug Court Institute Coordinator Training, and the Coordinator has attended a national Drug Court conference. The Treatment Counselors and representatives from the Public Defender have attended Drug Court conferences and trainings as well. The Judge and Court Psychologist have attended trainings and observed mentor courts as well.

Comment/Observation: Many of the GADC Team members have had some training on drug court although not all. Some have received training in roles different than their own (which can be useful in understanding the bigger picture). Many Team members have read about the drug court model independently. It is clear that the Drug Court Coordinator has researched drug court practices extensively and has educated her-

DRUG COURT FEES

Guam law sets the fee for methamphetamine-related offenses at \$5,000 and the Court imposes an additional \$40 fee, totaling \$5,040. The Adult Drug Court requires that each Drug Court client pay a treatment fee of \$500. The \$500 is included in the \$5,040 fine. Clients cannot graduate without paying the \$540. The rest (\$4,500) can be converted to community service hours. Upon successful completion of treatment, required community service hours are reduced by 150 hours (about \$900). Terminated clients do not have to pay the total fee, but upon termination whatever has already been paid is not returned. Terminated clients are referred to tra-

ditional court or the Department of Corrections, the fines they have paid carry over to that case as it is the same amount. There are no Probation fees.

Observation: Having the option of converting fees to community service hours is extremely practical with this offender population. Even those who have jobs generally don't make much money, so it can be difficult for them to find the money for large fees. Community service has the added benefits of emphasizing giving back to the community and becoming a contributing citizen that paying fees doesn't have. There are several options for community service that participants can engage in that are different than the stereotypical service of picking up trash along the highway. For Example, the Drug Court works with the Parks Service, which has plenty of work for community service hours. Participants can also suggest other types of work assisting in the community that can make up community service hours.

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offender population.**

DRUG TESTING

The Probation Services Division administers urinalyses (UA) drug testing for the Drug Court Program. Drug testing is administered on a random basis with established minimum number of UAs per week, according to which phase the participant is in. UA testing is done throughout the week, and on Saturdays during Recreational Therapy, if necessary. A computerized program randomly selects the participants and the days to administer the UA, but the client's history is also checked to make sure it is random.

Clients must call in to Probation every Monday, Wednesday, and Friday to see if they are designated to test. If they are selected to test, the participants must go to the Probation Department within 2 hours and provide a urine

sample. The collection of urine for UAs is fully viewed by an observer of the same gender as the participant. The urinalysis is done instantly with a dipstick, involving a 2-screen panel test for methamphetamine and marijuana, but Probation has the option of doing a 5-panel test if there is reason to suspect that the participant is using other drugs. Failure to provide a sample is considered a stall and is treated as a positive test. Participants check-in with a Probation Officer and have the opportunity to voluntarily admit to using drugs. If the participant admits to using, he or she is required to sign a written affidavit stating that fact. Participants have up to 3 hours from the time of check-in to provide a minimum amount of urine for the sample, and may be given 8 ounces of water at 45-minute intervals (up to 3 times) to help the process. If a client tests positive, he or she automatically gets tested every Monday, Wednesday, and Friday. It can go up to 5 days a week in extreme cases, but in general it is too expensive to do more testing than 2 times a week. If a participant fails to appear for a test a warrant is issued.

During Phase I, clients receive at least two UAs per week. Phases II and III require a minimum of one UA per week, and Phase IV requires at least two UAs per month. During all phases, the Judge has discretion to increase the drug testing beyond the weekly minimum. Members of the Drug Court Team may also request that a UA be administered if use is suspected.

All UA results are recorded in the Adult Drug Court Information System (ADCIS). If the UA instant result is positive and the client denies use, then the sample is sent to a lab for confirmation. The Judge can also request a confirmatory test. The participant pays an \$80 fee if the test still comes back positive, but does not have to pay if it turns out to be negative. If the results are confirmed posi-

tive, the client will receive a sanction for the positive UA.

For clients with alcohol issues, GADC performs random Breathalyzer tests. Tests may also be administered when there is reasonable suspicion of alcohol use by a client.

Comment/Observation: Some of the Drug Court Team members suspected that the participants had figured out the UA system and could predict when their UAs would occur. However, when asked by the evaluators if they could predict when they would be tested, participants said that they had not figured out a pattern.

Comment: It was suggested the participants who are clearly having trouble staying clean should be tested five days a week. Some of the cost for these tests could be ameliorated by having the participants submit samples all five days but randomly testing only one or two of the five.

Comment: All of the participants expressed unhappiness with the drug testing process (see participant comments in the focus group results later in this document). The participants felt that there was a stigma in going to the area where the drug tests are performed and felt that they were treated very differently there than how they were treated by the Drug Court Team. They felt that those performing the testing believed that they were “lowlifes” and the “dregs of society” and treated them accordingly.

Recommendation: It is strongly recommended that the drug testing process be modified and/or that Drug Court participants be tested separately from the general offender population. The sample collectors should be trained in appropriate communication skills and professionalism. Alternatively, the drug testing for participants could be contracted out to a private testing agency.

It is strongly recommended that the drug testing process be modified and/or that Drug Court participants be tested separately from the general offender population.

It has long been known (and there is a large body of research that shows) that the expectations of others, particularly authority figures, can have a strong influence on the behavior of those they supervise (e.g., Merton, 1948).¹ For example, teachers that believe they are working with talented and gifted students will find that many of their students become talented and gifted, even if the students were average before working with this teacher (Rosenthal and Jacobson, 1968). The

opposite is also true. If a teacher expects students to behave badly, their expectations are likely to be fulfilled. Drug Court principles are founded on the idea that if drug-addicted offenders are given support and treatment for their drug addiction, they will

recover and become contributing members of society. This includes treating offenders with dignity and showing them that the authority figures in their lives expect them to do well. Treating the participants as if they are expected to continue to be criminals undermines the work of the GADC.

REWARDS AND SANCTIONS

Rewards

The Guam Adult Drug Court has a plan for an incentive program to increase desirable behaviors in participants. Clients may receive rewards for attending treatment, being on time, attending 6 consecutive treatment groups or 8 consecutive Self-help meetings, being engaged in treatment as reported by the Counselor, early progression in phases, being supportive of new participants, showing leadership in the Recreational Therapy program, having 2 months of clean UAs, enrolling in or completing an adult education class,

¹ See definition of self-fulfilling prophecy at <http://www.encyclopedia.com/html/s1/selffulfi.asp>.

having a good employer report, and completing homework 5 times consecutively.

Unfortunately, the GADC does not have the resources to give the participants the tangible rewards listed in the Drug Court Handbook at this time, and the Drug Court Team members are not allowed to solicit for coupons or donations. Rewards currently in use include applause in court, praise, decreased status hearing requirements, decreased homework, decreased drug testing, decreased Self-help meeting requirements, and moving through phases more quickly. If a client is doing exceptionally well, he or she can get 25 hours of community service (worth \$128) per month credited towards the fine payment. Participants can also get community service hours when engaging in recreational therapy as there is some service done to the village property used in the recreation process such as picking up trash and straightening up the area. The biggest reward is praise from the Judge and having the Judge shake the clients' hands.

Tangible rewards that the Drug Court Team would like to give clients include movie tickets, bus passes, child care coupons, free meal coupons, water park coupons, medallions, educational scholarships, and recreational or cultural passes/classes. The Drug Court clients have also come up with their own incentives, including potlucks, barbecues, sporting activities, holiday activities, birthday cakes and celebrations.

Recommendation: Several members of the Drug Court Team discussed a plan to form a non-profit to help with Drug Court funding, including paying for the rewards for the adults. It is recommended that they continue to work toward this goal. The Judge is supposed to nominate people for the non-profit's board of directors and put people's names in the document that has been prepared for the Chamber of Commerce so they can get mov-

ing on getting tangible rewards. In addition, if members of the Chamber of Commerce could be enticed to come to a graduation and could be given materials showing the benefits of the GADC (particularly the benefits in relation to returning adults to the workforce), it is possible they could find some funding, even if it is just a small amount, to help pay for rewards or other Drug Court services, such as a life-skills class similar to that provided for juveniles.

The Case Managers work very hard and are clearly dedicated to the Program and its participants.

Recommendation: Institute some new rewards that require little or no funding. Possible rewards that are being used in other drug courts include calling those participants who are doing well first during drug court sessions and letting them leave early, conducting a fishbowl drawing of all those who are doing well, or giving candy (such as a candy bar or M&Ms) to those being promoted. The fishbowl drawing is rewarding to participants in many ways. It allows the drug court to call out the names of all those in the bowl who are doing well so that the participants have the reward of recognition. Since only the participant whose name is drawn will get the tangible reward, this cuts down on cost. Finally, having their name in the bowl becomes added motivation for the participants to do well.

Comment: Since the time of the evaluators' visit, the GADC Team implemented a new reward — hearing all the clients due for incentives at the top of the court calendar. As there is an extremely long calendar, those who are doing well and get heard first receive a real incentive in being able to get done sooner.

Recommendation: Remove the section in the participant handbook on rewards so that participants do not expect rewards that do not occur and therefore become mistrustful of what they read in the handbook. That section can be replaced if funds are found for rewards, or that section can be re-written to include rewards, such as those recommended

above, that are practical for the GADC to provide.

Sanctions

The Drug Court Team discusses and decides on sanctions as a group, with the Judge making the final decision on the appropriate sanction. The Probation Officer and Case Managers may give some sanctions immediately for various infractions (e.g., unexcused absence at a treatment session) without the prior consent of the Team. Generally, the sanctions imposed are discussed at the Team staffing meeting prior to Drug Court sessions. Sanctions are graduated and are imposed immediately or as soon as is practicable.

There are sanction guidelines in the Drug Court handbook that list appropriate sanctions for each level of infraction (or inaction). Possible sanctions include:

- Community service hours
- Increased status hearings, drug testing, or Self-help/Group meetings
- Written reports
- Jail time
- Attending sentencing hearings in Court
- Meeting with Case Manager, Probation Officer, or Attorney to review consequences
- Recycling back to a previous phase
- Home visits
- Reassessment

Sanctions are given for not attending or being late for treatment sessions or drug tests, not doing homework, not paying fees, not calling in to see if a UA is scheduled, positive drug tests, failure to meet with the Case Manager or Probation Officer, absence from a Drug Court session, tampering with a UA, denying a dirty UA, dishonesty, not following through with the treatment plan, not checking in, missing an appointment, using

drugs, and committing a new crime. The sanctions in the Drug Court Handbook are followed in general, but the Team is somewhat flexible as necessary to fit a particular participant's situation. For example, when a client who was given the most severe sanction asked to serve her 30 days in jail on the weekends so she could be home for her kids during the rest of the week, the Court granted this request and she served 30 weekends. (Although this doubles her actual time in jail, the participant requested to serve 30 full weekends to help prevent her regular weekend drug use.)

Recommendation: There was a concern that rewards and sanctions were not given out consistently. Although it is important to consider participant circumstances, it is also important to follow through on a sanction or a reward if the participant has been told it is going to occur. This promotes trust between the participant and the Team, particularly the Judge.

Comment: The Team expressed a preference to have the majority of decisions about rewards and sanctions happen during staffings rather than in the courtroom in front of the participants. In particular, the Case Managers did not feel comfortable giving their recommendations for sanctions in Court.

UNSUCCESSFUL TERMINATION

If a participant is terminated from the Program, a guilty plea is entered and the case is set for sentencing. Most terminated participants are given the sentence they would have been given if they had not attended Drug Court. They are placed on 5 years of regular probation and they must still pay their \$5,020 in Court fees, submit to drug testing, and complete treatment. The following infractions (or inaction) may be considered grounds for termination from the Program:

- Arrest for new charges

- Any violence or threat of violence toward staff or other participants
- Excessive positive drug tests (over 5)
- No contact with Drug Court staff for 10 working days without a reasonable excuse
- Request for removal via participant's attorney
- Second forged Self-help sheet
- Recycled in a Phase over 3 times
- Non-attendance at Self-help or groups for 10 working days
- Attend 20 meetings with Case Manager (including Home Visits)
- Recommendation of the Adult Drug Court Judge
- Recommendation of the Case Manager
- Recommendation of the Therapist
- Updated Treatment Plan

Drug Court clients must also get their GED or be employable in order to graduate (clients don't have to be actually employed at graduation, but need to be actively looking for work, volunteering, or continuing their education). Special situations are taken into consideration.

When a participant is charged with a new violation after being accepted into the Drug Court Program, whether the offense is a felony or a misdemeanor, immediate termination from the Program may occur. The participant will only be allowed to re-enter the Program if the charges are dropped or if the participant is found not guilty. The Guam Adult Drug Court Handbook has written guidelines for possible sanctions and clients are made aware of what may result in termination from the Program.

GRADUATION

Requirements for graduation from the Guam Adult Drug Court are:

- Completion of \$5,020 fee payment to Court (\$4,500 of which can be converted to community service hours)
- Completion of community service hours
- 12 clean drug tests in Phase IV (there is no set amount of time that a client has to be clean in order to graduate)
- Attend 38 Group sessions (including Self-help meetings)
- 20 weeks in Phase IV
- Attend 12 Recreational Therapy sessions

Recommendation: There appeared to be some uncertainty among the Drug Court Team members about the number of clean tests and the length of time required for participants to be clean before they could graduate. It is important for this to be clarified and a clear policy be put in place and followed. Research has shown that the longer clients are required to be clean before graduation, the more positive their outcomes (both in terms of lowered recidivism and lower costs) (Carey, et al., 2005).

Graduations happen as needed, and occur about twice a year (there have been two to this point), with the ceremony date determined by the Judge. Graduation ceremonies are held in the atrium of the Judicial Center, with the Judge presiding over the event and family and community members invited to attend (although most family members don't attend due to the stigma of addiction in the Chamorro culture). The Case Manager and Treatment Counselor certify to the Judge that each graduate has successfully completed the Program and the Attorney General makes motions for dismissal and expungement of their felony charges. The Judge signs the orders and the graduates are introduced. Select graduates and community members give commencement speeches. Clients are presented with a certificate of completion, a lei,

and a latte stone (a wooden replica of a stone on which traditional Chamorro houses were built, which is meant to symbolize strength and durability).

Recommendation: The GADC Team should continue to invite community members, staff from other agencies (particularly agency heads), as well as Supreme and Superior Court staff, to Drug Court graduations. Graduations can provide powerful testimony for the effectiveness of drug courts. It is important to educate those not familiar with drug courts in how the drug court model works and its effectiveness. The more support the Drug Court has in the community, the easier it will be to find funding.

DATA COLLECTED BY THE DRUG COURT FOR TRACKING AND EVALUATION PURPOSES

The GADC’s database (the Adult Drug Court Information System, or ADCIS) was created by a Client Services and Family Counseling employee in Access and was based on the format of other drug court databases from across the U.S. (especially the Buffalo Drug Court’s database). The Case Managers are responsible for entering data on clients into the database. It stores demographics, court sessions, sanctions/rewards, treatment data, urinalysis data, and other relevant client information.

Although the database was still being revised in early 2005 (some data fields were redundant, some fields were altered, and some useful fields that did not exist were being added) and data was still being transferred from paper files and other databases, data on each Drug Court hearing, drug test, and treatment session are entered into the database. The database also keeps track of whether clients are employed at the beginning and end of

Drug Court. A graduate exit survey given at graduation and 6 months after graduation collects information about sobriety, employment, re-arrests, services, education, and other relevant information.

Recommendation: The GADC is developing an MIS that can be used to track participants for case management and for evaluation. It is important that the MIS be practical and usable for the Drug Court staff. Examination of this MIS by the evaluators showed that there were many unnecessary fields and a few important fields that did not exist. The GADC should prioritize spending the time and resources needed to make this system user-friendly so that the data will be there when it is needed in the future.

Recommendation: Helpful data that can be collected by the Drug Court Team include both measures of participant success as well as information that will tell them where they can improve. The exit interviews and follow-up tracking already planned and performed by the Drug Court Team can be used to demonstrate the success of the Program, particularly in terms of employment and improvements in family functioning. It is recommended that they also do an exit interview with terminated participants (when possible) in order to help understand what occurred that resulted in termination and if there are any improvements that might be made to prevent participant termination in the future.

DRUG COURT FUNDING

The Guam Adult Drug Court was initially funded by an implementation grant from the Bureau of Justice Assistance through March 2006. The grant has since been extended due to delays in implementation resulting from typhoon damage. This grant provided (and in some cases is still providing) funds for the

The GADC should prioritize spending the time and resources needed to make ADCMIS user-friendly so that the data will be there when it is needed.

Drug Court Coordinator, Case Managers, and treatment as well as some administrative help, travel, equipment, supplies, etc. Local matching funds were also provided. The Drug Court has obtained approval to extend the grant period as there are some remaining implementation grant funds left for treatment and trainings/travel. However, the Guam Legislature now provides the majority of the funding for the Program. Nevertheless, as in many other drug courts, funding is a challenge for the GADC due to budgetary cuts island-wide. The Attorney General, Probation, Police, and many other public agencies are underfunded. Cuts in funding for drug and alcohol treatment have also been particularly difficult for the Drug Court. Due to these issues, the Drug Court is currently examining grant opportunities and other funding sources. The Court fee of \$5,020 (\$4,500 of which is usually converted to community service hours) that each client is required to pay also helps to defray some of the operating costs.

Recommendation: The GADC is one of the few adult drug courts in the U.S. that has been successfully funded with local funds by the legislature. The GADC should continue to collect information such as cost-benefit results and descriptions of the positive outcomes for successful participants that can be used to promote Drug Court with the legislature and other funding sources in the community such as the Chamber of Commerce.

Participant Focus Group Results

As described in the methodology, focus groups were conducted with GADC current participants and graduates. Three women and eight men attended the focus groups. The focus groups included two graduates and nine current participants with varying amounts of time in the Program, although the majority

had been in Drug Court for at least 3-6 months. Two participants were in Phase IV of the Program, four were in Phase III, three were in Phase II and one was in Phase I. The Drug Court Coordinator also located two out of the three former participants who had been unsuccessfully terminated from the Program. Individual interviews with the terminated participants were held separately from the focus groups.

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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 felt their due process rights were protected and finally, any suggestions they had for improving the Drug Court Program.

What they liked:

- *The Judge.* The participants all spoke positively about the GADC Judge. They felt that their interaction with him was a positive experience and that pleasing him motivated them to stay clean.

“The Judge is pretty fair. He’s there to help you. He has the courtroom clap for you. It makes you feel good.”

“The Judge is great. I like him. He may be hard, but he’s good. He knows our background.”

“The Judge knows when you’re wrong. He says he’s heard it before. It’s good to be honest with him. He tells you what you need to do.”

“The Judge keeps us in line. He remembers me and the one-on-one is great. He knows how much I’ve done. He said he was proud of me and that was big.”

“I feel like he really wants us to succeed. If we are screwing up, you can see his disappointment. He wants this Program

to work. I want to do good and for him to know that I'm doing good."

"If you relapse, he tells you that you tripped up and he needs to sanction you, but he encourages you to get back with the program. He doesn't make you feel like you screwed up. He comes down to your level. He still has to spank you, but fair is fair."

- *The Team.* The participants felt that the Drug Court Team members really try to accommodate their problems.

"They help you with anything. They make sure you have an understanding of what's happening."

"I'm glad to see that they recognize that it's a disease and give me a chance to correct my mistake. They recognize that everyone makes mistakes at some point."

- *Treatment groups.* The participants reported that most treatment groups were helpful, particularly the Self-help meetings. They also liked and respected the Treatment Counselors. Meeting at group and talking about their situation, admitting that they have faults were good experiences. They learned from the Self-Help meetings that other people's problems relate to theirs.

"Group treatment sessions are helpful because you can talk about things. It loosens you up. It feels good to talk about things. The classes are helpful in teaching you things."

"The treatment was good for me. Being able to talk to the Counselor. I was able to open up to my Case Manager."

"We got to know each other real well, and give each other support. If you make a mistake you get support."

- *Case Managers.* The participants felt that the Case Managers really cared about them and showed a personal interest in each client.

"They're great. They're nice and listen to what you have to say. They are honest with you. I've never had a problem with them."

"If you're falling behind, they remind you what you need to do. They keep you in line. They ask you, not tell you, because it's up to you to get through the Program."

"The Judge keeps us in line. He remembers me and the one-on-one is great. He knows how much I've done. He said he was proud of me and that was big."

- *Recreation therapy.* The participants enjoy the recreation therapy. They smiled while speaking about the recreation.

It gave them a chance to be with the other participants and the Team in a more relaxed atmosphere.

"The recreation therapy was flexible for me. I went right after work. The barbeque afterwards was great."

"We have recreation therapy twice a month, and the Drug Court Team brings food, but we all chip in and bring a dish."

"The recreation therapy was hard for me due to physical problems, but my body needed it."

"The recreation therapy was fun for me. It was fun to get out. You realize who your friends are."

- *The Coordinator.* All the participants spoke of the GADC Coordinator with respect and appreciation.

"Everyone agrees that the Coordinator is very helpful. She can help you out with anything. She's compassionate and firm at the same time."

- The ability to transform the court fees into community service.

“You can do special projects to get 3-1 community service hours. That’s a great bonus.”

What they disliked:

The participants had much less to say on what they disliked about the Program. They were extremely loyal to the Program and some said, at first, that they didn’t dislike anything about it. However, after some probing from the evaluators the participants could name some dislikes.

- *Drug tests at Probation.* The participants without exception agreed that the drug testing process at Probation was unpleasant and degrading.

“UAs are a big problem. There’s no consistency. You have to wait for a long time all the time. UAs should only take 15 minutes, but they often take an hour.”

“Probation tells you to be ready to pee when you come in for your UA, but you end up standing around for hours and hours and it’s not good for your health.”

“They get too technical about you not having enough pee. If it’s not acceptable, they dump it and you have to wait around until you can pee again.”

“I’m afraid of not getting my pee up to the line and it being thrown out.”

- *The requirement load.* Although the participants complained somewhat about the many requirements for the GADC Program, especially in Phase I, they also admitted that it was good for them to get focused on their recovery.

“I didn’t like that I was so busy. I had to put family and personal stuff aside for the Program.”

“Time commitments. Having to call in all the time, having to be places. It’s hard to put everything into one day. I don’t like running back and forth to get to treatment and meetings.”

“Sometimes there are too many court appearances. I sit through all of the sessions for an hour or more and it only takes me a few seconds to be done.”

“It made me mad, but by Phase II it got lighter and I figured out why it was set up that way.”

“It was hard and I didn’t know where to begin, but setting a daily schedule was helpful. I learned to be responsible.”

- *When the Judge misses Court sessions.* The participants were somewhat unhappy when Drug Court sessions were cancelled, particularly if they were expecting some positive support from the Judge or if they had something to confess. However, if they expected a sanction they were pleased with the reprieve. The relationship the participants have with the Judge is important to them. They all agreed that they preferred to have a session cancelled than to have a substitute judge that did not know them.

“I’m sad we have another judge tomorrow, but I’ll give her a chance.”

“When Drug Court sessions are canceled, it’s hard.”

“I’d rather have the Drug Court session be canceled than have a new judge.”

What worked:

(What the participants felt was most helpful for their success in the Program)

- *The Drug Court model.* Several participants reported that they had been through

The participants without exception agreed that the drug testing process at Probation was unpleasant and degrading.

“The Program changed my life.”

treatment before and were unsuccessful until the treatment was combined with the Drug Court Program.

“The system is working for me.”

“The strict Phase I requirements helped me out a lot. If you follow the rules, it’ll work for you.”

“The Program works. It’s the combination of everything that works. The support groups work and the sessions work. Knowing that I have to give a UA works.”

“The Program changed my life. I relapsed a few times. I didn’t take it too serious at first, but then I was incarcerated and it hit me. I realized I had a problem. Before, I said everything else was a problem. Once I took the Program seriously, I changed.”

“I’ve been through Mental Health, but this is the first program that got me clean.”

- The drug tests.

“UAs are pretty effective in preventing use. Most everyone would use if they weren’t tested. You can’t really predict when you’ll be tested. They’re pretty good at scrambling the dates.”

“The UA tests were helpful. I never failed except the one time I drank. I tried my best to do good.”

- *The sanctions.* Jail was reported to be a particularly effective sanction.

“The jail sanction was effective for me. I’d rather be clean and outside than locked up.”

“The second incarceration was what made me realize I need to change. Once I changed, everything turned out great.”

“I’ve been through Mental Health, but this is the first program that got me clean.”

“The jail sanction was effective for me. I’d rather be clean and outside than locked up.”

- Treatment and education about the effects of drugs.

“For me, watching the physiological effects of drugs really had an effect.”

“Learned about drugs and their effects. Learned about alcohol, too. I like the Program. It taught me what is wrong, and how it’s causing problems in my family.”

“Treatment was the most helpful part of the Program.”

“Everyone in the Program had the same problems, so I wasn’t ashamed. I learned about drugs and the effects of drugs on my life and my family. Everything was good. It helped me. It was all for my own good.”

“The Self-help is what really helped me out. I met a lot of addict friends and I can relate to them. I know they all understand what I went through.”

- *The Case Managers.* Most participants agreed that the Case Managers were instrumental to their success.

“If it wasn’t for my Case Manager, I wouldn’t have made it. It was hard for me to talk to my family members.”

- *Job training and employment opportunities.* The biggest issue for all of them was having job opportunities so they could support themselves once they get out of the Program.

“Job training and the ability to tell a potential employer that you have been rehabilitated are very important.”

“I have to try not to be bored once I’m out, because that’s when the triggers happen. If I don’t have a job, I’ll at least

need to have some activities to keep me busy.”

“Education opportunities and scholarships would be great.”

What Didn't Work:

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

- *Lack of transportation.*

“Transportation issue is the #1 problem for a lot of people. But when we wanted drugs, we always managed to find a way to get where we needed to go to get the drugs.”

- *Drug testing at Probation.* As described in the section above on dislikes, participants felt that the way they were treated at Probation was disrespectful and made what they were trying to do in the Program more difficult.

“Probation doesn't respect you. Having to wait for so long isn't good. It's painful sometimes. It's not proper.”

“They call your name so loud when it's your turn. They are very unprofessional at times. I feel like we're in the jungle or something.”

“They access our number through our social security number. When they call us to drug test, they call out our number and say my personal information so loud that everyone can hear my address, social security number, everything. That's not right. If someone has a positive test, they don't keep it to themselves. They talk about it to the other Probation Officers, and then it gets out and soon enough everyone knows. They shouldn't talk so loud. They should be there to help us.”

“If it wasn't for my Case Manager, I wouldn't have made it.”

“The Program is helpful, but the problem is me.”

“People that keep getting positive UAs and getting sanctions are treated the worst. They mock and tease and criticize those people.”

“Probation looks at us like criminals. They are rude to us. We're human. Approach us and tell us we're next, instead of yelling and letting even people upstairs hear it.”

- *Participants own resistance to change.* As described earlier in this report, most participants took responsibility for their own failures. Everyone strongly agreed with the following quote.

“What doesn't work is not being willing to do the Program. It's up to the individual to do well. You can do anything once you set your mind to it. So once you set your mind to following the Program, it's easy.”

“The Program is helpful, but the problem is me.”

Were their due process rights protected?

- All of the clients felt that it was a privilege to be in the Drug Court Program and they all agreed that their rights were protected.

Suggestions for improvement:

- *Have more Case Managers and Treatment Providers with experience.* The participants felt it was important for Counselors and Case Managers to have a good understanding of addiction and the recovery process. (The experience will, of course, come with time.) They also felt it was easier to speak with and establish a rapport with Counselors who had gone through recovery themselves.

“It would be helpful if the Case Manager had more experience in drug use, so you don’t feel like they are better than you. Not that I’m suggesting that they go and try it!”

“People that have been through what I’ve been through. People that have felt my high. People that made it through and are clean. Former addicts should be Counselors.”

- *Have the Case Managers do the drug testing.* Most participants liked the idea of having the Case Managers, or someone else on the Drug Court Team perform the drug testing.

“Probation needs to shape up, they’re holding us back for too long with the UA waiting.”

“The Case Managers could do the drug testing now that they will soon be Probation Officers.”

“It wouldn’t be hard for them to do, but they may not like doing it.”

“The Case Managers and clients become close, so it might be easier for the Case Managers to do it.”

“Drug Court should have their own people to give us UAs. Probation takes the people that have been on probation for longer first for the UAs, so you get treated bad.”

“Shift the UAs to the Drug Court so they’ll go smoother. Or at least have them [Probation] be more respectful.”

- *More incentives.* Participants felt that they would be more motivated if they had more rewards to look forward to. They didn’t like having a page in the handbook that described rewards that they were not going to get.

“It’s a miracle that I can admit my addiction to others. I have no fear now.”

“They’re helping us to be better people.”

“Incentives would help. They are in the handbook, but we never saw any of them. It would’ve pushed me through faster.”

“Don’t say you’re going to have it and then not have it. Take out that piece of paper.”

- *Make the group sessions longer.* The majority of participants agreed that they would get more out of longer (1 ½ to 2 hours) group treatment sessions.

“It took ½ hour just to figure out what we’d be talking about.”

“The length of the sessions should be longer so we can watch films and still have time to go over them.”

Other information and quotes of interest:

“The effects of drugs that they teach you are real. It’s a good feeling to look someone in the eye and not be paranoid.”

“It’s a miracle that I can admit my addiction to others. I have no fear now.”

“I really like this Program. My financial situation is better and I’ve given up smoking.”

“Nothing that I wanted to happen happened. The rules were stronger than me, so I decided to make the Program work.”

“I’m very grateful I got selected into the Program. The expungement of my record is huge.”

From terminated participants: “Drug Court helped me to get clean. I learned a lot about the effects of drugs. It’s a good Program. The activities were good. You

learn to help yourself and the community. I failed to do what’s best for me. All this work I did and the Drug Court Team did and it’s like what they did didn’t matter. I let me and them down. They’re helping us to be better

people. They do a good job. I failed. I'm not mad that I got kicked out. It's my fault. If I didn't ignore the rules, I would've graduated with flying colors."

10 Key Components' Results

This section lists the Ten Key Components of Drug Courts as described by the National Association of Drug Court Professionals (NADCP, 1997). Also listed are the research questions developed for this evaluation, which were designed to determine whether and how well each key component was demonstrated by this Drug Court. Each question is followed by a discussion of the practices of the Guam Adult 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 Carolyn Cooper at American University (2000) are used as a benchmark.

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?

This is a key strength of the GADC, due in a large part to a strong Coordinator. The GADC Team communicates regularly both inside and outside of Team meetings. The Case Managers are familiar with each other's caseloads and can assist smoothly with the other Case Manager's participants when the other is not available. (This has occurred for both Case Managers when one was on maternity leave and then the other was recovering from a motorcycle accident.) The Coordinator also knows each of the participants and can help when both Case Managers are busy.

The addition of the current Coordinator was a large help in making the integration of the Team happen. Other Team members de-

scribed how stressful the work was before she started and how much better work became when she came on board.

The Case Managers have very different styles when working with participants but the Team feels that the two styles complement each other and they respect each other's strengths. It was clear to the evaluators that the Team members clearly respect one another and are supportive of each other.

Team members particularly emphasized how much they welcomed the assistance and support of the Public Defender Office and appreciated the efficiency that occurred from having a representative from the Public Defender at Team meetings. Team members also appreciated the flexibility of the Assistant Attorney General and his support in getting drug offenders into the Program. When the Court began contracting directly with the Treatment Counselors, their role also became integrated with the rest of the Team. The Counselors communicate regularly with the Case Managers and the Coordinator at the Treatment Team Meetings and will call if they have concerns about participants in between meetings.

The Team works together to come to a consensus on Drug Court policies as well as other routine decisions, such as sanctions and rewards for each participant. Although the Team does not always agree on what the best decision may be, members are always willing to discuss different ideas and sometimes will agree to disagree, while supporting whatever decision was chosen in the end. Having the Team members involved in decision-making fosters a strong sense of teamwork and helps each member feel that he or she is a valued part of the Team. In addition, this frequent communication and input from Team members allows the Court to act swiftly when problems arise.

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

Research Question: Are the Public Defender Office and the Attorney General Office satisfied that the mission of each has not been compromised by Drug Court?

Both the prosecution and defense counsel believe that the mission of each has not been compromised by Drug Court, although both agree that their roles have changed. The Assistant Attorney General feels that his role in the drug court process is to allow as many drug offenders as possible a chance to receive treatment and turn their lives around while the Public Defender’s role is to provide legal advice, ensure that the rights of the clients are protected, advocate at staffing for the clients, and also refer as many clients as possible to Drug Court treatment.

Attorneys from both agencies feel that public safety has been protected and, in fact, that public safety is more protected by the client participating in the GADC Program than in traditional probation. Both believe that the clients’ rights have been protected and that the Public Defenders involved with the GADC Program continue to advocate for what is best for their clients.

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

Research Questions: How early are eligible clients being identified and how quickly are clients being referred to and accepted into drug court? Are the eligibility requirements being implemented successfully? Is the original target population being served?

Cases can be referred to the GADC from the Judge, Attorney General, the Public De-

fender, and Probation. Most clients are currently referred through the Attorney General and Public Defender soon after the offender is arrested.

The traditional Court process was quite lengthy; from the arrest to the chance to plea took 3 months to a year (some were in custody, some made bail, some released). However, with the implementation of the GADC, the load of offenders on the traditional Court system has been reduced and the time it takes to get to the plea is shortened to just over one month for most drug offenders. Most of those eligible for the GADC are identified within 72 hours of arrest.

According to the participant data provided by the GADC from the ADCIS, the time from referral to official entry into the GADC Program is reasonably short. The median number of days between referral and Program entry is 14, which mean at least half the participants begin the Program within 14 days (two weeks). The mode is nine days, which means that drug offenders referred to the Adult Drug Court are most commonly starting the Program in just over a week from referral.

There is some concern that the Assistant Attorney General is not completely clear on the eligibility requirements, but any offenders who are not eligible can be weeded out later by the Public Defender and other members of the GADC Team.

The target population for the GADC when it was first implemented was first-time offenders. GADC Team members believed that this meant their participants would be those with less serious addiction, but they found that their first wave of participants were “hard-core” long-time users. Over time the population has changed and more recently the majority of new participants have been recreational users. However, overall the GADC is serving the population they intended. Many Team members would like to expand the eligibility criteria to include more than just

first-time offenders. Many Programs, when first introducing the drug court model, have concerns about public safety and therefore begin with first-time offenders and then as the Program matures successfully bring on offenders with more extensive criminal records.

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

Research Question: Are diverse specialized treatment services available?

The GADC excels in this area. Diverse specialized treatment services are available to a high degree in this Program. Services offered to Drug Court clients (along with drug and alcohol group and individual treatment sessions) include education, employment, vocational training, detoxification, housing, transportation, and mentoring programs.

Other services include education assistance, grief counseling, and family therapy. Drug Court clients receive help in writing resumes and also receive referrals for food stamps, welfare services, homeless shelters, mental health services, medical and dental services, anger management, obtaining a GED, and parenting classes. Additionally, there is a recreational therapy program of 4 hours per month (one Saturday per month) for participants in Phases II-IV. The therapy program has access to a gym and its facilities to play volleyball, softball, and basketball, or the clients go on beach walks and have barbecues. Art and music therapy are also incorporated on days when the weather does not permit outdoor activities.

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

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

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. During Phase I, clients receive at least two UAs per week. Phases II and III require a minimum of one UA per week, and Phase IV requires at least two UAs per month. During all phases, the Judge has discretion to increase the drug testing beyond the weekly minimum. Members of the Drug Court Team may also request that a UA be administered if use is suspected.

The UAs are given randomly and are fully viewed. (A computerized program randomly selects the participants and the days to administer the UA.) The GADC uses an instant dipstick for its UAs. This has the benefit of an instant result, which has a stronger impact on the client, although the dipsticks have a higher false positive rate than regular lab testing. The GADC manages the false positive issue by allowing clients to contest the results. If a UA instant result is positive and the client denies use, then the sample is sent to a lab for confirmation. The client pays the fee for the confirmation test if the results are positive. If the results are confirmed positive, the client will receive a sanction for the positive UA.

For clients with alcohol issues, trained officers from the Guam Police Department or the Probation Services Division perform random Breathalyzer tests. Tests may also be administered when there is reasonable suspicion of alcohol use by a client.

The GADC participants reported that the UA and breath test schedule was very effective in discouraging drug and alcohol use.

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

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

The GADC is doing quite well in its use of sanctions and rewards and is working on improving the reward package. The GADC has a handbook for participants with a plan for an incentive program to increase desirable behaviors in participants as well as clearly written guidelines that list appropriate sanctions for each level of infraction (or inaction).

The Drug Court Team discusses and decides on sanctions as a group, with the Judge making the final decision on the appropriate sanction. The Probation Officer and Case Managers may give some sanctions immediately for various infractions (e.g., unexcused absence at a treatment session) without the prior consent of the Team. Generally, the sanctions imposed are discussed at the Team staffing meeting prior to Drug Court sessions. Sanctions are graduated and are imposed immediately or as soon as is practicable.

Probation Officer and Case Manager independence in providing immediate sanctions is a notable practice in this Court. An immediate consequence for an individual's actions follows good Behavior Modification principles and behavior modification is the main goal of any drug court.

Nationally, the most common process is for the judge to make the final decision regarding sanctions or rewards – based on input from the team. All drug courts surveyed said they had established guidelines for their

sanction and reward policies, and over half (64%) said the guidelines were written. Most courts increased the frequency or intensity of treatment (e.g., moved participant from outpatient to inpatient), increased the frequency of UAs, and increased the frequency of court hearings. Also, more than half the courts used one to three days of jail as a sanction for relapse; a large percentage used four to seven days of jail.

In comparison to courts nationally, the GADC's sanctions appear to be quite similar although the GADC strategies are more coordinated, particularly in terms of clearly written guidelines, than in most courts.

Possible GADC Program sanctions include community service hours, increased status hearings, drug testing, or Self-help/group meetings, written reports, jail time, attending sentencing hearings in court, meeting with Case Manager, Probation Officer, or Attorney to review consequences, recycling back to a previous phase, home visits and reassessment.

The most common rewards for good participant progress in drug courts nationally were praise from the judge at court hearings, promotion to next phase, reduced frequency of court hearings, praise from other drug court participants, special tokens or gifts, and decreased frequency of UAs. A small percentage of courts allowed people to graduate early, and a small percentage had parties, gift certificates or reduced drug court program fees.

Although the GADC Team is concerned that they are not providing enough incentives, rewards for the GADC Program are comparable to what most other drug courts are doing and some rewards are in fact more creative (such as free community service hours) than those used in other drug courts. Rewards currently in use at the GADC include applause in court, praise, decreases status hearing requirements, decreased homework, decreased drug testing, decreased Self-help

meeting requirements, and moving through phases more quickly. If a client is doing exceptionally well, he or she can get 25 hours of community service (worth \$128) per month credited towards the fine payment. The biggest reward is praise from the Judge and having the Judge shake the clients' hands. The Drug Court clients have also come up with their own incentives, including potlucks, barbecues, sporting activities, holiday activities, birthday cakes and celebrations.

The main concern expressed by the Drug Court Team and participants was that the handbook described rewards that did not exist. The handbook should be changed to reflect the rewards the GADC is using. As recommended earlier, further rewards that require little or no funding such as a fishbowl drawing and small amounts of candy could be implemented and included in the handbook.

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

Research Questions: Compared to other drug courts, do participants at this court have frequent contact with the judge? What is the nature of this contact?

Nationally, the American University Drug Court Survey reported that most drug court programs require weekly contact with the Judge in Phase I, contact every two weeks in Phase II, and monthly contact in Phase III. So the amount of contact decreases for each advancement in phase. Although most drug courts followed the above model, a good percentage had less court contact (e.g., every two weeks in Phase I, monthly in Phases II and III.)

In the GADC Program, participants are required to be in Court exactly as reported in most drug court programs nationally. Drug Court sessions are required once per week in

Phase I, once every two weeks in Phase II and once per month in Phase III. In Phase IV they are required to attend Court on a schedule specified for each participant individually by the Judge.

The Judge is involved in all decision-making regarding each participant. He attends the staffing meetings before each Court session and relies upon the professional input of Team members before making decisions to be brought up for the participant in Court.

The participants in the GADC Program have a very positive relationship with the Judge. They feel that the Judge treats them as human beings, is fair and cares about each of them as individuals. Many clients want the Judge to be proud of them and therefore find the Judge to be a strong motivating factor for avoiding use. Participants report:

“He picks up the conversation from the last time we had a Drug Court session. He remembers and reminds you what you said.”

“He doesn't get mad, he puts it as a joke. He knows what words to use with you, so you don't feel embarrassed or anything.”

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

Research Question: Is evaluation and monitoring occurring in this Program?

Although the GADC was not fully operational until August 2003, in January 2003 the Drug Court Team independently had a consultant from the National Drug Court Institute, Robin Wright, examine the GADC Program plans and provide feedback and recommendations for improvement. It is evident that they had taken this feedback seriously and had made changes based on those recommendations. For example, Ms. Wright recommended that they clearly state the Pro-

gram goals and the goals and activities associated with each phase of the Program. The current manual has goals and activities very clearly stated. In addition, it was recommended that to improve Team communication that they have regular Team meetings. In NPC's observation of the GADC we saw regular Team meetings and an obvious mutual respect and camaraderie between the Drug Court Team members.

NPC Research evaluation staff began the main work for the process evaluation with a site visit in February 2005. This evaluation involved interviews with the GADC staff (generally more than one per individual), review of agency documents and observation of Court staffing meetings and Court sessions. The GADC Team was very supportive of this evaluation. They made themselves available for the interviews, responded to multiple follow-up questions and welcomed the evaluation staff into their meetings. The Coordinator responded quickly to evaluation staff requests, helped set up the site visit and focus groups and facilitated communication between the evaluators and the GADC Team. In addition, the Coordinator, at the request of the evaluator, provided feedback on the first draft of the GADC process description in order to correct any misunderstandings or erroneous information.

This Court also performs self-monitoring. The GADC Coordinator is collecting information on Program costs in order to perform her own cost-benefit evaluation of the Program. The Program also planned from the start to perform intake and exit interviews, as well as follow-up interviews at regular intervals after graduation in order to track participant outcomes.

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?

The thorough research performed and training received by the key stakeholders before setting up the Drug Court as well as NDCI monitoring by the Drug Court Team to improve the process has paid off in the high quality of this Program and the professionalism of the individuals that make up the GADC Team. In addition, many GADC Team members have performed their own reading and research into their roles in the drug court process.

Education on Drug Court planning, implementation and operation is a high priority for this Drug Court. Team members have expressed the wish to have trainings every 3 months on things like people skills, specific participant issues and how to deal with them, and improvements that could be made in their process.

Most Drug Court Team members have attended Drug Court trainings at either the National Association of Drug Court Professionals training conference or National Drug Court Institute Trainings or both. Team members have been sent to the mainland U.S. for trainings whenever possible. They would like someone from NDCI to come to Guam to train all their current Team members.

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

Research Question: Compared to other drug courts, has this Court developed effective partnerships across the community?

Responses to Carolyn Cooper's National Survey showed that most drug courts are working closely with community groups to provide support services for their drug court participants. Examples of community members that drug courts are connected with include: AA/NA groups, medical providers, local education systems, employment services, faith communities, and chambers of commerce.

This is yet another area in which the GADC Program excels, in part because of the strong cultural and family ties on the island. As described earlier, the Guam Adult Drug Court has built relationships with many agencies in the community that provide other services to Drug Court participants, such as DISID (Division of Integrated Services for Individuals w/ Disabilities) and MIP (Medical Indigent Program). The Department of Public Health & Social Services assists with public assistance, HIV testing, and medical insurance needs. The Drug Court also works with the Guam Housing and Urban Renewal Authority (GHURA) to assist clients with housing. In addition, Drug Court has services that help participants become employable and find work. The Agency for Human Resource Development (AHRD) and the One-Stop Career Center assess job skills and train or arrange for employment skills training. Pacific

Human Resources Services assists in linking participants with temporary jobs.

The GADC may want to also turn their attention to gaining further support from the agencies that have representatives on the GADC Team. Many drug courts experience a lack of support from other staff members in their own agencies. For example, many judges and other Court staff who have not observed a drug court session or a drug court graduation and who do not understand the drug court model are skeptical about the effectiveness of drug courts or do not recognize the existence of drug court at all.

A one-page fact sheet with information on drug court benefits and successes in other places as well as successes of the GADC itself might be helpful for engaging the interest of those outside the program. Continued invitations to members of the Supreme Court to graduations when there is a good speaker planned (including a Drug Court participant speaker) may also be helpful in gaining support.

The GADC is continually working towards creating relationships with community members. This is particularly important in times of decreased funding as community members can provide donations of time and materials to maintain Program operations.

The GADC has accomplished the rare feat of obtaining funding from the legislature and therefore is no longer completely reliant on grant funds. There was some struggle to get the legislature to support the GADC and concern about the sustainability of the Program but now most Team members feel that there is enough support in the legislature and community to keep the GADC going.

SUMMARY/CONCLUSION

Overall, the Guam Adult Drug Court demonstrates the Ten Key Components of Drug Court in a commendable fashion. The Drug Court Program is well organized due, in large part, to a well-organized Drug Court Coordinator as well as thoughtful and dedicated Case Managers. It was reported by GADC staff that the Ten Key Components were used in designing and implementing the Guam Adult Drug Court Program and it is evident that this is the case.

One of the Court's greatest strengths is its highly integrated Drug Court Team. The Drug Court Team members communicate frequently and well. They demonstrate respect and support for one another. In addition, this Drug Court has a large number of positive community relationships and a large amount of community support.

As is the case with the majority of drug courts, the one key component that could be improved upon involved the use of rewards. Although the GADC used similar rewards to most drug courts, the number of sanctions used outweighs the use of rewards. Also, the more tangible rewards are lacking due in

large part to a lack of funding for this part of the Program. Some suggestions were given for low-cost and no-cost rewards such as calling up participants who are doing well before the Judge first (which has already been implemented) and instituting a fishbowl drawing so that those who are doing well are recognized by having their names included in the drawing while only one will actually receive a material reward.

In addition to the quality of the Drug Court Team, strengths of this Drug Court include the strong commitment to education of the Team members (a large contributor toward a common understanding of purpose and process, which leads to a smoothly running Drug Court), the creativity and flexibility of the GADC Team and the positive relationship between the participants and the Judge. The participants were positive about all the Team members and particularly appreciated the dedication of the Case Managers and the Drug Court Coordinator as well as the fairness of the Judge and his knowledge about their lives.

REFERENCES

- Carey, S.M., and Finigan, M.W. (2004). A Detailed Cost Analysis in a Mature Drug Court Setting: A Cost-Benefit Evaluation of the Multnomah County Drug Court. *Journal of Contemporary Criminal Justice*. 20(3) 292-338.
- Carey, S.M., Finigan, M.W., Waller, M., Lucas, L., and Crumpton, D. (2005). California Drug Courts: A Methodology for Determining Costs and Avoided Costs, Phase II: Testing the Methodology, Final Report. Submitted to the California Administrative Office of the Courts November 2004. Submitted to the USDOJ Bureau of Justice Assistance in May 2005.
- Cooper, C. (2000) American University Web site:<http://spa.american.edu/justice/publications/execsum.pdf>
- Merton, R. K. (1948). The self-fulfilling prophecy. *Antioch Review*, 8, 193-210.
- Rosenthal, R., and Jacobson, L. (1968). "Pygmalion in the Classroom." New York: Holt, Rinehart & Winston.