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Malheur County Adult Drug Court (S.A.F.E. Court) Outcome Evaluation

Final Report



Submitted by

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Introduction

Background

Malheur County is one of Oregon's poorest counties. According to 1997 census figures, 19.6% of the county's adult population lived below the poverty line, along with 26.0% of its children, the highest that year in Oregon. The median household income in 1997 was \$28,204. According to the 2000 census, Malheur County has a population of 31,200 with a high proportion of Hispanics. While the overall population is about 30% Hispanic, Hispanics, primarily males, account for around one half of all arrests for alcohol-related traffic offenses.

An examination of case statistics from the District Attorney's Office shows increased numbers of substance abuse prosecutions, despite extremely limited law enforcement activities targeting drug crimes. In 1999, there were 158 felony prosecutions for substance abuse violations, but in 2000 the number was 308, with no increase in enforcement activity to account for the difference. The vast majority of these cases involved methamphetamine. In addition, Malheur County has consistently had one of the highest rates of impaired driving arrests in Oregon for the past 30 years, and a high rate of alcohol-related crashes, including crashes resulting in death or serious injuries. In 1999, there were 376 prosecutions for Driving Under the Influence (DUI), and 286 in 2000. There has also been a marked increase in the number of people arrested for impaired driving due to use of controlled substances, particularly methamphetamine, either alone or in combination with alcohol. With these statistics in mind, Malheur County began planning a drug court and was awarded a program-planning grant in 1998.

The planning grant allowed key participants to attend trainings and planning sessions, and to receive technical assistance to determine the need for a drug court program in Malheur County, as well as the form that the program should take. The Malheur County Adult Drug Court, which is called the S.A.F.E. ("Stop Addiction For Ever") Court, is an adult post-adjudication program for repeat offenders who have substance abuse problems. The S.A.F.E. Court is gender specific. There are two concurrently running programs, one for women and one for men, respectively headed by a female and male judge. By providing a gender-based program to offenders, the county hopes to increase successful participation and completion of long-term treatment. Further, the county intends to enhance program services so that it can offer a comprehensive and culturally sensitive drug court program for a larger number of participants, particularly the large Hispanic population.

On January 18, 2001, Malheur County held its first S.A.F.E. Court session. Arrangements were made to collect client data in a drug court database, the Oregon Drug Court Case Management System (DCMS), which is used in several counties in Oregon. In September of 2001, Malheur County received a drug court implementation grant from the Drug Court Program Office (DCPO) at the National Institute of Justice. This grant provided funds for evaluation and NPC Research was hired to perform process and outcome studies of the Malheur County S.A.F.E. Court.

This report contains the results of the S.A.F.E. Court outcome evaluation performed by NPC Research. This study followed a pre-post program design due to difficulties in finding an appropriate comparison group. Two years of participant recidivism (re-arrest) results are compared to arrests for the same participants two years prior to drug court entry. In addition, participant and

program characteristics are examined in relation to program status (graduated versus terminated) and re-arrests after program entry. The first section of this report is a brief summary of the S.A.F.E. Court program process (An executive summary of the process evaluation can be found in Appendix A). Following the process summary is a description of the methods used to perform the outcome evaluation— including sample selection, data collection and analysis. The final section provides the results of the outcome analyses and a discussion of these results. A summary of the results with overall conclusions can be found at the end of this report.

Malheur County S.A.F.E. Court Process Summary

Annual capacity of the Drug Court is 35 participants total, including both men and women. The main goals of the Malheur County S.A.F.E. Court are to help participants become clean and sober, improve their lives, and reduce their involvement with the criminal justice system. The S.A.F.E. Court is a post-plea program. Incentives for graduation for clients who enter the program through probation violations are early termination of probation or receiving bench probation, and the possibility of becoming clean and sober. Charges are not dismissed upon graduation, but there is the possibility that jail time or some fines may be reduced. People who are out on conditional discharge may have some charges dismissed.

Offenders with either felony or misdemeanor crimes may be accepted into Malheur County's S.A.F.E. Court. The main offenses targeted are possession charges, second and third DUII charges (in Oregon), and theft charges related to alcohol and drugs. Drug Court clients can be referred by the Judge, District Attorney, Defense Attorney, Treatment Providers, Probation Department or the Jail. Most participants are referred from Probation.

There are six phases in the Malheur County Drug Court Program. All phases have both Treatment and Probation requirements. Phase II has additional requirements from the Training and Employment Consortium. Job contacts then become a requirement of Probation. Both Treatment and Probation requirements have attached fees. Participants pay for their drug tests (urinalyses and breathalyzers), for their Probation supervision (a monthly supervision fee), and for their treatment sessions. Each drug test and treatment session must be paid for at the time it occurs. Failure to pay results in sanctions. Phases V and VI are considered Aftercare Phases, although they occur before graduation from the Program.

At one time there were two outpatient treatment providers for the S.A.F.E. Court, Lifeways and Brady and Associates. However, the Drug Court has changed recently to a single treatment provider model and uses just Lifeways for S.A.F.E. Court outpatient treatment. Some participants may be mandated to inpatient treatment. These participants go to the Alcohol Recovery Center (ARC), an inpatient facility for alcohol and drug addiction.

All Drug Court participants must attend either Alcoholics Anonymous (AA), Narcotics Anonymous (NA) or self-help groups through the faith-based community. Attendance requirements vary but average approximately three meetings weekly. In addition, it is required that participants have a sponsor.

Drug Court services include job training and job placement assistance, education and housing assistance, the Head Start Program, batterers treatment, domestic violence shelter, victims' groups, child abuse groups, grief counseling, family therapy, alcohol & drug counseling, and vocational rehabilitation. Drug Court participants receive referrals for mental health, medical, and dental services. Classes offered include HIV, Hepatitis C, anger management, GED, and parenting education.

Drug Court sessions are held every Tuesday and generally last about one hour. Men and women clients attend court on alternate weeks. The Drug Court Team members who attend court sessions are the two Judges (every other week), the head of Community Corrections, the Probation Officers, Defense Attorney, District Attorney, Drug Court Coordinator, Employment Supervisor, Police Liaison, the Treatment Counselors and their Supervisors (from both Lifeways) and a representative from the Department of Health Services. Participants who are in-patients at ARC check in at the drug court session by telephone. Also, if the month has five Tuesdays, the fifth Tuesday is used for all participants (both men and women) who are doing poorly in the Program.

During Phases I and II, clients receive two urinalyses (UAs) per week. Phase III requires one UA a week, and Phase IV requires one UA every other week. In Phases V and VI, the UAs increase to twice a week until graduation (The purpose of this increase is to monitor the clients closely in these last two phases as their Treatment and Probation contacts decrease). Clients are given coupons for ten free UAs at the beginning of the Program and testing is free during the last two phases.

Drug Court participants receive rewards for attending treatment, fully complying with the treatment plan, being employed, going to work, having a good attitude, staying clean, paying fines, having stability in life, doing the best they can in all areas, continued abstinence, going to all classes, having clean UAs, receiving education, and for progressing in treatment. Rewards include applause, praise, pool passes, gift certificates for haircuts, candy bars, change in phase including certificates for completing a phase, free pizza, free UAs, key chains and moving through phases more quickly. The Team decides rewards at the staffing meetings with the Judge's approval.

Sanctions are graduated and imposed swiftly. Sanctions are given for not paying UA fees, tampering with UAs, denying a dirty UA, not cooperating with job service, dishonesty, using profanity, not working, being disruptive in treatment or job search, failure to report for treatment or job search, not following through with the treatment plan, not checking in, missing an appointment, using, and committing a new crime. Sanctions may include work crew, days in jail, attending day treatment at Lifeways, and increasing the frequency of UAs and breathalyzers.

If clients receive six sanctions in a month, they are put on "strict compliance." If the participant has a violation while on strict compliance or if they abscond for longer than 60 days, they will most likely be terminated. Continual use or dealing can also cause termination. New crimes may lead to termination but are looked at on a case-by-case basis. If a participant is terminated, they are required to attend a probation violation hearing, at which time the Judge imposes the sentence. Some clients go to jail while others may go back to regular probation.

In order to graduate, a S.A.F.E. Court participant must have one year of treatment, a job for a minimum of six months, Drug Court fees paid, no new charges in the last six months, eight hours of community service, clean and sober for six months, peer facilitated and run self-help groups, pass all phases of the Drug Court Program, have a sponsor, overall stability in life, a letter of reference to read at graduation, exit interview, supervision fees current and a payment plan with treatment. Graduations happen as needed, and occur about once every other month.

The process evaluation final report performed by NPC Research contains a detailed process description, a presentation of the results of client focus groups and an evaluation of the S.A.F.E. Court process in regard to the Ten Key Components of Drug Courts (developed by the NADCP in 1997). The executive summary for this report can be found in Appendix A.

Outcome Evaluation Methodology

Study Design

The research strategy used by NPC Research for this outcome evaluation was to identify a program group sample of participants who entered Drug Court and compare their behaviors in the two years prior to entering S.A.F.E. Court to the time period (eighteen months to two years) following their entry into the program (a pre-post study design). The goal of this design is to determine whether participation in S.A.F.E. Court was influential in changing behavior patterns established prior to S.A.F.E. Court entry. A traditional matched comparison group of offenders eligible for S.A.F.E. Court but who did not participate was not used for this evaluation because it was not feasible to obtain the data necessary to choose an appropriate comparison sample from existing Malheur criminal justice databases.

Because this Drug Court is both small and relatively new (beginning full operation in January 2001), the Drug Court sample consisted of the entire S.A.F.E. Court participant population (except for those who had entered the Drug Court less than 6 months from the time of the outcome data collection). The participants were examined through existing administrative databases from the date of the initial contact with the Drug Court program through September 2004. For those participants who entered the program soon after implementation, this allowed follow-up for 24 months post drug court entry. The evaluation team utilized the data sources on criminal activity and treatment utilization, described below, to determine whether S.A.F.E. Court participants' arrest histories differed prior to and following entry into the program. Also examined were the effectiveness of the program in reducing client drug use as well as whether there were any clear predictors (such as demographics, prior criminal history, and readiness for treatment) of final program status (graduation versus termination) or of reduced recidivism. When applicable, these variables were statistically compared "before" and "after" the intervention point (S.A.F.E. Court entry) for the group as a whole and then, because the S.A.F.E. Court program is gender specific, by each gender group.

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

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

Data Collection

The data collected for this outcome evaluation were gathered from several sources. Most of the data were pulled from the administrative databases described below. Some data (such as some treatment and drug testing information) had not been entered into the Drug Court case management system and therefore were provided by the treatment agency from their internal database.

Oregon Drug Court Case Management System (ODCMS)

The Oregon Drug Court Case Management System (ODCMS) was developed by the Oregon Judicial Department, State Justice Institute and was considered fully operational in April of 2003. The database allows drug courts to record information on client demographics, drug court hearings, drug testing, treatment providers, substance abuse and criminal history, case notes, outcomes, and follow-up information. The ODCMS data was a primary source of drug court utilization data for the evaluation. However, due to the recent development of the ODCMS, some of the information on clients who began the program before the pilot testing of the database was not entered. In addition, some information was not entered because staff found it difficult to pull back out for client management, so it was considered an inefficient use of staff time to enter it. Data that were not entered into ODCMS were provided for the evaluation by the treatment provider.

Oregon Judicial Information System (OJIN)

This is a case tracking system that stores Oregon State Court case information from multiple sources into a single database. Courthouses throughout the state are electronically tied together into a statewide network. OJIN contains data regarding an individual's arrest charges, case status (i.e., whether it is in warrant status, probation violation status, or active), court dates, times and locations, motions and orders filed, sentences, case history from when it was filed until disposition, attorney names, and demographic information on the defendants. There is an OJIN terminal at NPC Research and trained staff available to use it. OJIN data allows the evaluation team to gather in-depth information on each sample participant's criminal history and criminal record since entering Drug Court.

Data from Treatment Provider

Lifeways, the main Treatment Provider, provided the evaluation team with a paper copy of an excel spreadsheet containing summary information for each participant on the number of group and individual treatment sessions, the number of drug tests conducted by Lifeways, and the readiness-for treatment score as determined at the initial assessment.

Sample Selection

Drug Court Participants

The Drug Court participant sample consists of all those who entered the Malheur County Adult Drug Court since its implementation, except for those who entered less than 6 months previous to the date of the evaluation data collection as it was determined that there was not enough time for any meaningful outcome data to accumulate. This provided a total of 125 participants in the Drug

Court sample (77 males and 48 females). The primary drug of choice for all S.A.F.E. Court program participants was methamphetamine (51%), followed by alcohol (38%). The most common secondary drug of choice was marijuana (37%) and methamphetamine (37%). The Drug Court participant sample is described further in Tables 1 and 2, below.

Table 1: Overall Drug Court Demographics

	Mean Drug Court
Gender	61% Male
Ethnicity	66% White 31% Hispanic
Mean age at time of DC entry	29.41
Mean number of arrests 2 years prior to DC entry	.49
Mean number of drug related arrests 2 yrs prior to DC entry	.19

Table 2: Male and Female Drug Court Demographics

	Mean age at time of referral	Ethnicity	Primary Drug of Choice
Males N = 77	30.88 years (range=18 to 67)	69% White 31% Non-White (1 African-American 22 Hispanic 1 Native-American)	Alcohol 60% Methamphetamines 29%
Females N = 48	27.03 years (range=18 to 45)	60 % White 40 % Non-White (17 Hispanic 2 Native-American)	Methamphetamines 85% Marijuana 6%

Results

The results of the S.A.F.E. Court data analyses are presented below in the order of the research questions described earlier in this report. The relatively small sample size (particularly for those analyses involving only those who completed the program and for those analyses that were performed within one gender) means that most analyses did not have enough power to produce valid statistical significance. Therefore, most of the results were examined in a more qualitative manner. The data must be considered in terms of apparent trends rather than in terms of statistical significance. As the program grows and expands over time, further evaluation can examine a greater sample size, providing verification of these results.

Research question #1: Recidivism.

Does participation in drug court reduce the number of re-referrals for participants?

Figure 1: Average Number of Re-arrests for S.A.F.E. Court Participants

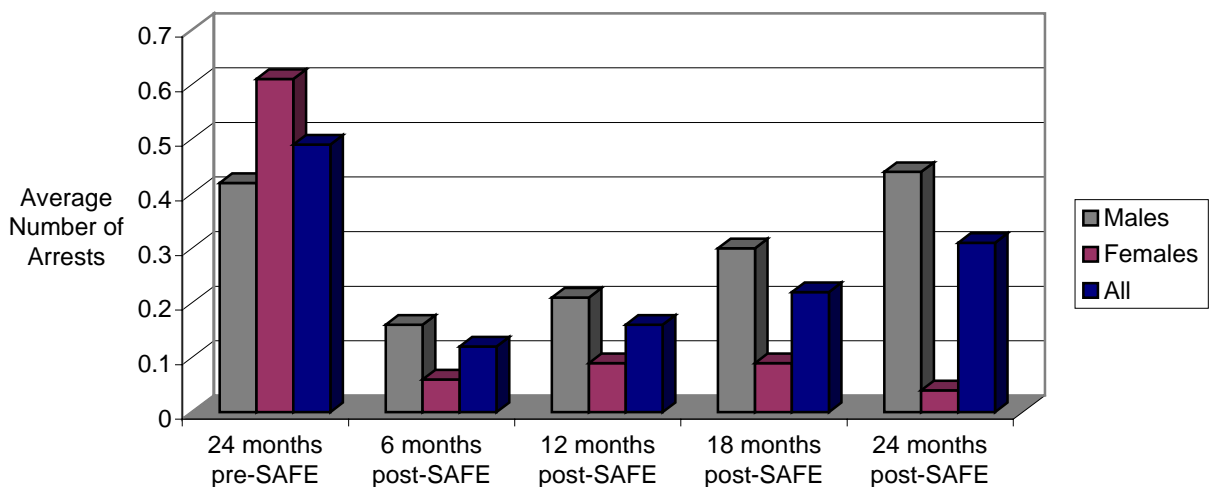


Figure 1 contains the recidivism patterns for the 24 month period prior to S.A.F.E. Court entry and then cumulative arrests at 6, 12, 18, and 24 months following entry into S.A.F.E. Court. The sample consists of all participants who entered S.A.F.E. Court, including active, graduated, and terminated Drug Court participants (n = 125). The sample means for the male (n = 77) and female (n = 48) participants are also depicted. It should be noted that due to attrition, the sample size decreases over time as insufficient time has elapsed (for some participants) to determine recidivism beyond 6 months. It should also be noted that the overall number of re-arrests and the number of individuals re-arrested out of the 125 participants is very small, an average of less than one-half of one arrest per participant .

Overall, it appears that participation in S.A.F.E. Court is beneficial to participants and to the criminal justice system. The average number of re-arrests for males and females combined in the 24 month period following entry into the program is less than the corresponding period prior to their

entry into the program. That is, S.A.F.E. Court participants are re-arrested less often after entering the program. This difference is statistically significant at 6, 12, and 18 months. There does appear to be different arrest patterns for males and females. Interestingly, females have, on average, more arrests prior to S.A.F.E. Court than the males. Yet they were re-arrested far fewer times after entry into the program, maintaining a significant mean difference at 24 months ($p < .05$). In contrast, males recidivate at a greater rate than the females. At 24 months after Drug Court entry, the average number of re-arrests for males is slightly greater than the average for males pre-S.A.F.E. Court (the difference is non-significant). These gender differences are further explored later in this report as the male and female groups are analyzed according to their status (graduate, terminated, active) (See figures 2 and 3).

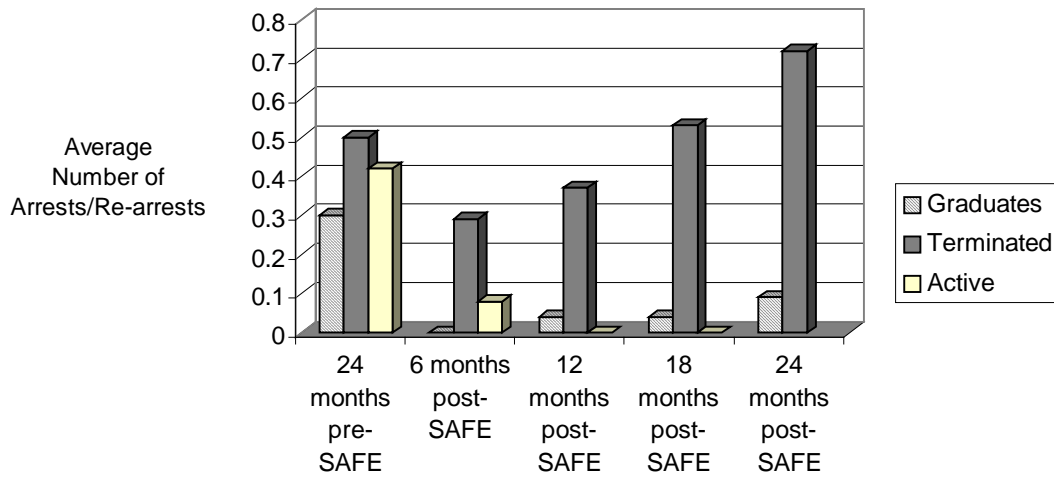
Another way to examine recidivism is to look at the percentage of drug court participants and comparison group members that recidivate at some point following their entry into drug court (this includes all 125 S.A.F.E. Court participants). On the whole, 16% of participants were re-arrested in the two years following drug court entry— 19% of the men and 10% of the women (compared to 100% in the two years prior to drug court entry). **This recidivism rate, which is for all S.A.F.E. Court participants regardless of completion status, is similar to that quoted for drug court graduates nationally** (Roman, J., Townsend, W. and Bhati, A.S., 2003). In sum, participation in S.A.F.E. Court appears to reduce re-engagement in the criminal justice system substantially.

Male Recidivism by Program Completion Status

Figure 2 provides a detailed picture of recidivism for male S.A.F.E. Court participants by completion status (graduated, terminated and active participants). There are several points of interest in this figure. First, graduates tended to have fewer arrests prior to program entry than did the current active participants or terminated participants. This could indicate that participants who eventually successfully complete the program are those who come to Drug Court with a mild criminal history. Next, the terminated participants appear to be responsible for the majority of the recidivism for the male group. While this is unfortunate, it should be kept in mind that the sample size for these analyses are very small and over 66% of the terminated males did not recidivate at all during this time period.

In keeping with the overall positive trend, graduates and active participants evidenced extremely low rates of re-arrests, indicating that participation in S.A.F.E. Court, particularly ongoing participation, helps lower recidivism. Additionally, a point of interest in Figure 2 is that the active participants had virtually no re-arrests at any point in the 18 months they have been involved with Drug Court. Contrary to the myth that Drug Court risk public safety by diverting offenders from incarceration back into the community, Drug Court appears to ensure public safety over traditional court processing. As the program grows and more participants complete the program, the validity of these findings can be determined.

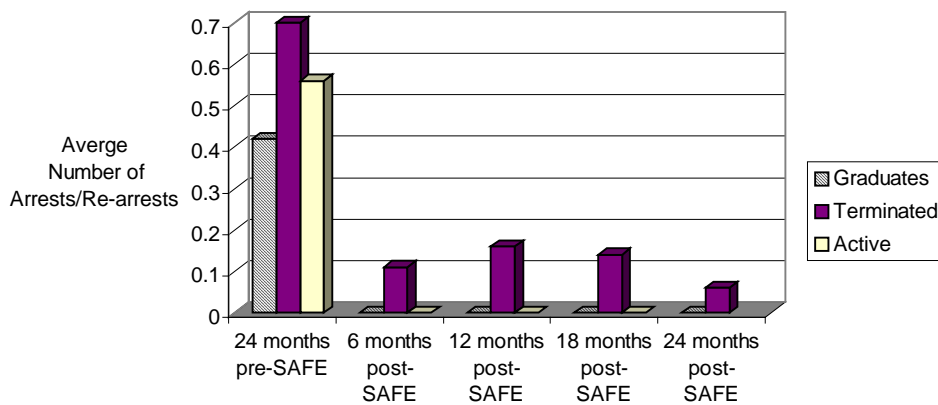
Figure 2: Re-Arrests for Males for the 3 Drug Court Groups



Female Recidivism by Program Completion Status

Females tended to have low recidivism rates regardless of status. All of the re-arrests for females were attributed to 5 terminated participants. Females who were graduates or active participants at the time of data collection had no re-arrests. Without a comparison group, it is difficult to know if this finding is the result of “being female” or if there is something about the S.A.F.E. Court program that is highly effective in reducing recidivism in females. Future evaluations with a comparison group and larger sample may be able to detect specific program effects that could contribute to this finding.

Figure 3: Re-Arrests for Females for the 3 Drug Court Groups



Research question #2: Reducing Substance Abuse.

Does participation in drug court reduce levels of substance abuse?

UA results

The dates of positive urinalyses (UAs) for the Drug Court group were obtained from the ODCMS database. It appears that data on UAs were incomplete prior to August of 2002 (most likely due to the experimental status during the pilot of the ODCMS database through 2003), therefore only participants who started the program after that date are included in this analysis. Of these 55 participants, 34 were missing complete UA data for the 9-month period following Drug Court entry and were excluded from the sample. Of the remaining 19 participants, the ratio of male (n=11) to female (n=8) was fairly even. This is a very small number compared to the overall sample, therefore these UA analyses should be viewed as exploratory and indicative of possible trends only.

The average number of positive UAs was calculated for each three-month block from the date of program entry for all participants who were in the program for at least 9 months. Although it is somewhat suspect to use the number of positive UAs over time as an indicator of reduced level of substance abuse (because a reduction in positive UAs is required for continued enrollment in the program), all individuals with at least 9 months in the program were included in this analysis, so graduates, current participants, and those that were terminated are represented. The means for each of these time periods is reported below in Figure 4.

Figure 4: Mean Number of Positive UAs Over 9 Months in Program

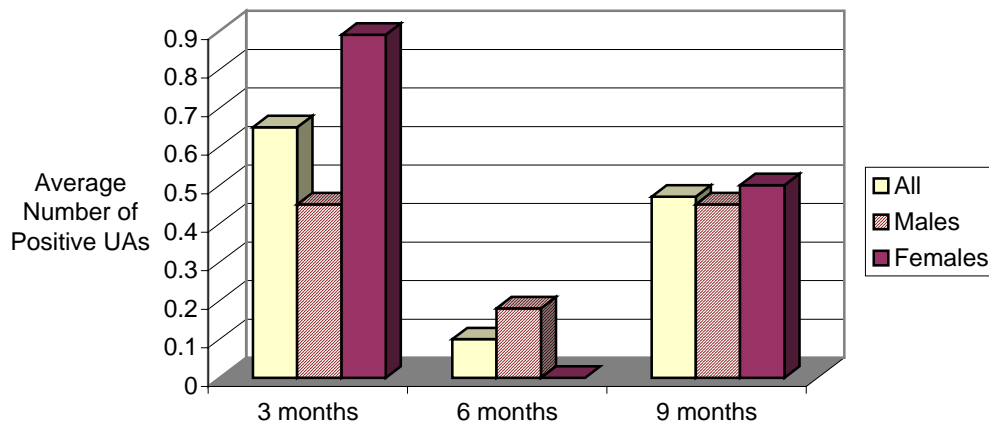


Figure 4 shows that the number of positive UAs at the beginning of the participants' tenure, overall and for gender groups, was higher than at the 6 and 9-month marker (except for males at 9 months), indicating that the levels of substance abuse had indeed been reduced. The apparent increase at 9 months is likely an artifact due to the small sample size and number of UAs. The maximum of average positive UAs for the 6 and 9-month periods does not exceed 2 for either males or females.

Another way to examine whether there is a reduction in drug use is to look at the percent of positive UAs to total UAs during Drug Court participation. However, this information may not present an accurate picture due to the decreasing number of UAs given to participants over the course of their Drug Court tenure. A single positive result has a greater impact on the percentage if only one or two UAs are given during a time period as opposed to the impact of a positive UA on 30 UAs. In addition, the possibility of incomplete data on dates of UAs with negative results also affects the accuracy of this analysis; therefore this analysis was not performed. As the S.A.F.E. Court progresses in its use of ODCMS to carefully track UA results and as the S.A.F.E. Court program grows, further analyses may reveal more reliable patterns of substance use gleaned from drug testing.

Drug-Related Recidivism

An additional approach to examining the influence of Drug Court participation on substance abuse is through the number of re-arrests for drug related crimes. It should be noted that the number of drug related re-arrests is only a fraction of the re-arrests total, thus precluding the achievement of statistically significant results. However, these data can provide meaningful insight into recidivism patterns that may be related to substance use.

These analyses were performed using the entire S.A.F.E. Court sample (n = 125) as described in question 1. Again, due to attrition, the sample size decreases as the time from S.A.F.E. Court entry increases. Therefore, although the average numbers are cumulative, it may appear that the cumulative numbers actually decrease due to the loss of some participants who do not have data for that time period.

Figure 5: Drug Related Re-Arrests for the Overall Group and by Gender

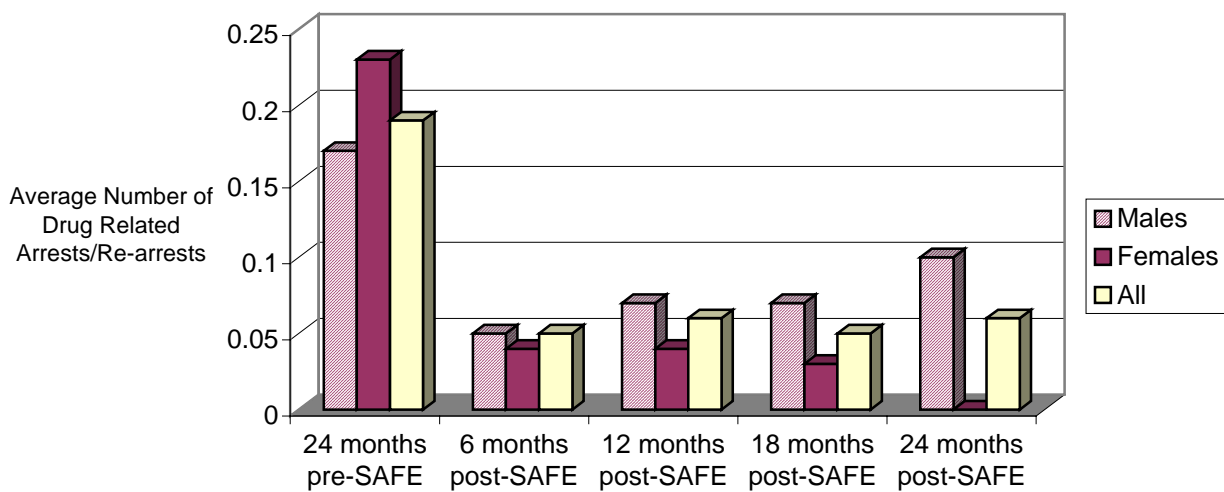


Figure 5 details the drug related re-arrests by gender and for the overall group. Overall, there was a significant reduction in drug related re-arrests from the pre-S.A.F.E. Court period to 24 months following program entry. Generally, although males were re-arrested for drug related crimes more

often than females, both genders had fewer drug-related re-arrests after entering the S.A.F.E. Court program. Females demonstrated the most drastic and significant reduction in drug related re-arrests. Taken together, these results indicate that participation in the S.A.F.E program achieves the goal of reducing substance use as can be inferred by a reduction in drug-related recidivism.

Male Drug Related Recidivism by Program Completion Status

Figure 6: Drug Related Re-Arrests for Male S.A.F.E. Court Participants

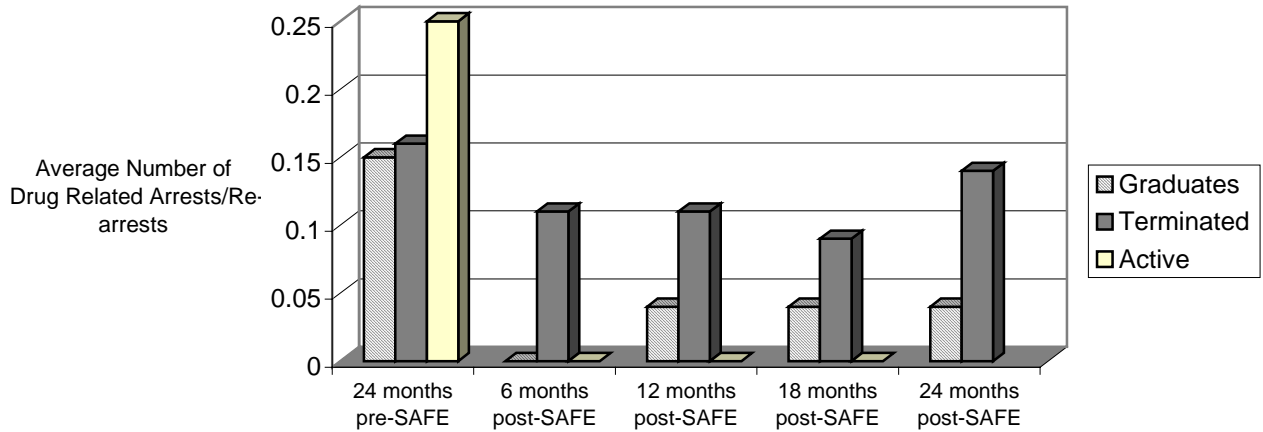


Figure 6 clearly shows that the male S.A.F.E. Court participants had far fewer drug-related brushes with the criminal justice system in the 24 months following their entry into the program than the 24 months preceding their start date. Keeping in mind that while the overall number of drug-related re-arrests was small, the participants who were terminated account for most of the drug-related re-arrests for the Drug Court group. Future evaluation on a larger sample, as the program grows and more participants complete the program, would be able to determine the validity of these findings as well as the overall re-arrest findings.

Figure 7: Drug Related Re-Arrests for Female S.A.F.E. Court Participants

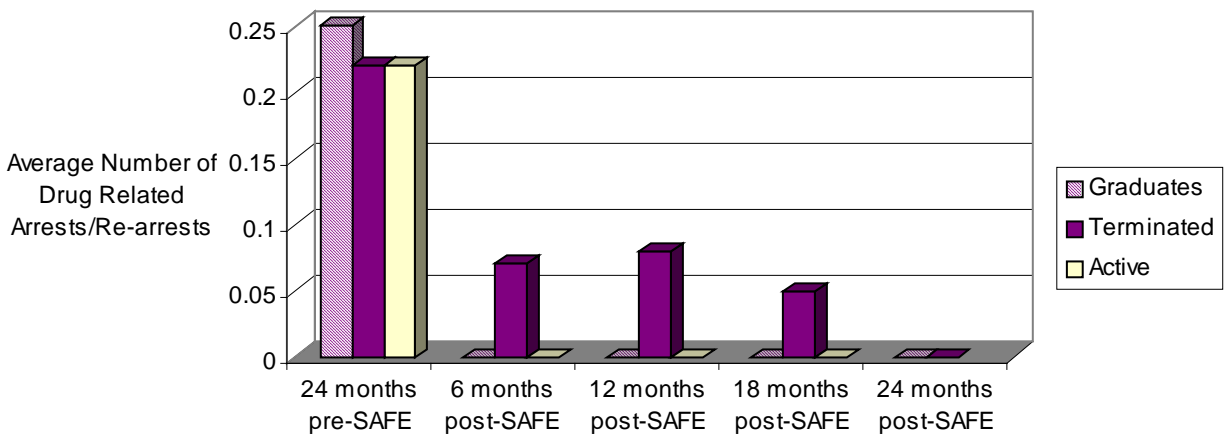


Figure 7, above, depicts the female drug-related arrests for pre-S.A.F.E. Court /post-S.A.F.E. Court time periods. The results are not surprising, given the minute number of total re-arrests (and by extension drug-related re-arrests) of the female participants. Clearly, female participants benefited from the supervision and treatment of S.A.F.E. Court. If a reduction in drug-related recidivism is indeed a proxy for reduction in substance use, females, particularly those active in the program and graduates, have substantially reduced or stopped their drug use. Though the terminated group appears to have a slightly higher number of drug-related re-arrests, the average is still much reduced from the time period prior to their involvement with S.A.F.E. Court.

In sum, the UA data and the drug-related recidivism data depict a slightly different picture of substance use. This could be due to the incompleteness of the UA data. Alternatively, it is possible that participants may continue to use drugs (as evidence by dirty UAs), but they are not committing crimes (or not being detected in the execution of these crimes) that would place them in contact with the criminal justice system. As more complete data are collected on a larger group of S.A.F.E. Court participants, future evaluations will be better able to determine the true patterns of substance use.

Research question #3: Program Completion.

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

Table 3 provides program duration statistics for the Drug Court sample. The average time from program entry to graduation in this program is just under 15 months. The expected length of time for participants to complete the S.A.F.E. Court Program is approximately 12 months. It is very common for drug court participants to take longer than the intended duration of the program (Cooper, 2000).¹ Most drug courts have 12-month programs, though more recently some have extended their programs to 18 months. NPC Research has found in its experience with 9 drug courts in California, 5 drug courts in Oregon, and 3 drug courts in Maryland that many drug courts with

¹ American University Web site
S.A.F.E. Court Outcome Evaluation

12-month programs have an average time to graduation of 18 months. Therefore, the S.A.F.E. Court Program is similar in timing to most drug courts and is on a reasonable schedule in bringing its graduates to completion in their expected time frame.

Table 3: Participant Length of Time Spent in S.A.F.E. Court Program

	Mean length of time in months
Time spent in program—overall group	9.60 (range=.60 to 21.60)
Time between DC arrest and DC entry	17.76 (median=15.12; range=.24 to 62.40)
Time in program until graduation (successful completion, <i>n</i> =39)	14.34 (range=11.64 to 21.60)
Time in program until termination (unsuccessful completion, <i>n</i> =65)	7.20 (range=.60 to 18.96)
Time in program of currently active (<i>n</i> =21)	8.38 (range=1.56 to 18.24)

Table 4 demonstrates the average lengths of time spent in the S.A.F.E. Court program for men and women. It appears that males and females move through the program in relatively equal time frames, which are representative of the numbers for the group as a whole.

Table 4: Participant Length of Time Spent in S.A.F.E. Court Program by Gender

	Mean length of time in months	
	Males	Females
Time spent in program	9.84 (range=.06 to 21.60)	9.36 (range=.96 to 18.96)
Time between DC arrest and DC entry	15.48 (median=13.56; range=.24 to 48.36)	21.36 (median=17.88; range=1.32 to 62.4)
Time in program until graduation (successful completion)	<i>n</i> = 27 14.4 (range=11.64 to 21.60)	<i>n</i> = 12 14.16 (range=11.88 to 18.36)
Time in program until termination (unsuccessful completion)	<i>n</i> = 38 7.32 (range=.60 to 18.84)	<i>n</i> = 27 6.96 (range=.96 to 18.96)
Time in program of currently active	<i>n</i> = 12 7.32 (range=1.56 to 15.48)	<i>N</i> = 9 9.84 (range = 5.64 to 18.24)

It should be noted that on average, there appears to be approximately 18 months between an individual’s Drug Court arrest and their actual entry into the program. This most likely due to the majority of participants who are referred from Probation rather than through the “fast track” to the S.A.F.E. Court program from the District Attorney’s Office. Of the sample used for these analyses, 43% entered the program within a year of their arrest. Because the arrest date of the case associated with participants’ introduction to Drug Court were used for these calculations, this should not be used as an indication of the program’s speed in bringing offenders quickly from referral to program entry. The length of time from referral to drug court entry is ranges from one to six weeks.

Another measure of the success of treatment programs in bringing participants along in treatment is retention rate. In this sample of S.A.F.E. Court participants, the program demonstrates a retention rate of 48% (60 graduated or currently participating, and 65 terminated or withdrew). Within the male participants there was a 51% retention rate whereas females demonstrated a 44% retention rate. Although the retention rate for women is lower than that for men, using the number of re-arrests as an indication, the women still appear to benefit from the program regardless of graduation status. In spite of the difference, the retention rate for both men and women in the S.A.F.E. Court Program is better than most standard (non-criminal justice related) treatment programs (Cooper, 1997) and retention may increase as this relatively new program fine-tunes its process.

Research Question #4: Predictions of Success.

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

At the time of the data collection for this evaluation, 39 individuals had graduated and 65 had terminated unsuccessfully. Of the females, 12 had graduated and 27 had been terminated. For males, 27 had graduated and 38 had been terminated. It is important to note that this is a relatively small sample for running any significant statistical analyses, particularly when these numbers are further divided into groups of men and women. Additionally, for some analyses, the sample size will decrease further if participants are missing data on the variables of interest. However, it is useful to perform these analyses in order to uncover any trends of interest.

Predictions of Status at Exit (Graduation or Termination)

The graduated versus terminated participants were examined (through chi-square tests and Analyses of Variance) to determine how they differed on key factors such as marital status, prior treatment, primary and secondary drugs of choice, readiness for treatment scores, number of arrests prior to drug court entry, years of education, treatment sessions, and age at the time of drug court entry. These analyses were conducted for all discharged S.A.F.E. Court participants and were then conducted separately for males and females.

All Completed S.A.F.E. Court Participants

Completion status (graduated versus terminated) was not correlated with age, marital status, race, or years of education. This implies that the program is able to equitably serve clients with a range of demographic characteristics, particularly a broad range of ages and individuals with varying education. There was a small, positive correlation between sex and status showing that females are slightly more likely than males to be terminated from the program. Of those graduated from the program, nearly 69% are males.

Graduates were more likely to report alcohol as their primary drug of choice (48%) than any other drug. The S.A.F.E. Court Program clearly successfully addresses alcohol abusers, particularly with the assistance of the inpatient facility that specializes in treating alcohol addictions. However, just over 60% of the terminated clients were methamphetamine users as opposed to 41% of the graduates. Research indicates that addiction to methamphetamine may cause more long-term

physical damage than most other drugs (NIDA, 2000).² This implies more difficulty in treating and overcoming methamphetamine addiction. If the trends suggested by these data hold up over time, more specialized or intensive services may be needed to help methamphetamine users successfully complete the S.A.F.E. Court Program. The challenge of treating methamphetamine users is shared by other drug courts recently evaluated in Oregon as well as other states (e.g., see outcome reports by Carey, 2003 and Carey and Marchand, 2004 at www.npcresearch.com), which exemplifies the continually increasing problems of methamphetamine addiction nationally (see websites on methamphetamine addiction referenced earlier in this report).

An interesting (though non-significant) difference between graduated and terminated participants was found in whether they reported having received treatment of some kind prior to their entry into Drug Court. Around 31% of graduates reported receiving prior treatment as compared to 19% of terminated participants. This indicates that prior treatment episodes can have a positive effect on future treatment, increasing the likelihood of future success.

There was a significant difference ($p < .05$) between those graduated and those terminated on initial readiness for treatment scores. On average, graduates had higher scores (indicating higher readiness for treatment) at drug court entry than terminated participants. This suggests that the instrument used to determine readiness for treatment does appear to be measuring what it is intended to measure.

In sum, it appears that individuals who do not use methamphetamines, who have been exposed to some sort of treatment prior to their S.A.F.E. Court experience and who exhibit a stronger willingness to change at their initial assessment are more likely to successfully complete the S.A.F.E. Court program. This provides some information for the S.A.F.E. Court in determining what kind of participants might be expected to do well in their program (e.g., some drug courts prefer not to accept individuals with multiple prior treatment episodes into their program. However, these results show that prior treatment may assist participants in succeeding in the Drug Court Program). In addition, these results indicate areas where the S.A.F.E. Court may need to intensify or enhance their program in order to improve treatment for methamphetamine users, or possibly to design ways that might help participants improve their attitudes around readiness for treatment.

To illustrate the differences between the two groups, Table 5 presents the means on the variables of interest. As with previous analyses, the number of participants in each group may vary slightly from the overall number based on whether data are missing.

² For more information on the affects of methamphetamine use see the following websites:

http://www.drugabuse.gov/NIDA_Notes/NNVol15N4/Methamphetamine.html

<http://www.drugabuse.gov/Infobox/methamphetamine.html>

Table 5: Participant Characteristics for Graduated vs. Terminated

Category	Graduated (n=39)	Terminated (n=65)
Gender	31% Female 69% Male	42% Female 58% Male
Drug of Choice	49% Alcohol 41% Meth	28% Alcohol 60% Meth
Mean age at time of DC referral	30.01	28.30
Mean number of arrests in two years prior to DC entry	.33	.58
Mean number of drug related arrests in two years prior to DC entry	.18	.18
Mean degree of readiness to participate in treatment	1.70	1.34
Mean number of group treatment sessions	74.11	37.13
Mean number of individual treatment sessions	20.94	9.83

Table 5 demonstrates that there is relatively little difference between graduates and those terminated in terms of age and number of prior arrests. Table 5 also demonstrates that males are more likely to graduate than females (although as described earlier, females are less likely to recidivate whether they graduate or not) and that graduates were more likely to score high on the readiness for treatment scale. Further, and unsurprisingly, graduates attend more group and individual treatment sessions (approximately twice as many) than those terminated.

Male Participants and Program Completion Status

Table 6 presents the group averages on several variables of interest for male and female participants who have been discharged from the program. According to correlations, the trends for the males are much like those of the group as a whole (see Table 5), particularly for demographic characteristics and treatment variables.

Specifically, for men, the readiness for treatment score indicated that males who were more ready to change at their initial assessment tended to have a greater likelihood of successfully completing the program. Also, males who had some prior experience with treatment were more likely to graduate. As mentioned previously, these results indicate that men who were more open to the idea of treatment and willing to change, who may have had some previous experience with treatment, and who attended more treatment sessions were more likely to graduate from the S.A.F.E. Court program.

Overall, males reported only three drugs as their primary drug of choice: marijuana, alcohol, and methamphetamine. Of these, 70% of graduates reported that alcohol was their primary drug of choice as compared to 50% of terminated participants. In contrast, 41% of terminated participants reported methamphetamines as their primary drug of choice compared to only 18% of graduates. This indicates that males may find more support for abstaining from alcohol use or perhaps treatment is more effective for alcohol abuse. This makes sense in that the majority of inpatient treatment provided to participants is for males with alcohol addiction.

Finally, men who were arrested more prior to S.A.F.E. Court entry were more likely to terminate from the program. However, there was almost no difference in the number of *drug-related* arrests prior to drug court entry for graduates versus terminated participants.

Table 6: Participant Characteristics for Graduated vs Terminated by Gender

Category	Males		Females	
	Graduated (n=27)	Terminated (n=38)	Graduated (n=12)	Terminated (n=27)
Drug of choice	70% Alc 19% Meth	50% Alc 41% Meth	0% Alc 92% Meth	0% Alc 85% Meth
Mean age at time of DC referral	31.20	29.88	27.34	26.06
Mean number of arrests in two years prior to DC entry	.30	.50	.42	.70
Mean number of drug related arrests in two years prior to DC entry	.15	.16	.25	.22
Mean degree of readiness to participate in treatment	1.77	1.45	1.55	1.17
Mean number of group treatment sessions	65.27	37.46	97.10	36.61
Mean number of individual treatment sessions	19.69	10.36	24.20	9.00

Female Participants and Program Completion Status

Table 6 includes information about the characteristics of the female program participants as well. Similar to the males, the female group trends reflect those of the overall group, particularly for demographics. However, females were slightly more likely to be terminated than males, which may be related to the greater amount of methamphetamine use.

Males and females had quite different primary drug choice patterns. Nearly 86% of females were methamphetamine users as compared to 31% of males. Only one female who had completed the program used alcohol (though there are 2 current participants who report alcohol as their primary drug of choice). Moreover, of all the female methamphetamine users, 68% were terminated. In light of recent research suggesting that methamphetamine use is particularly physically damaging to users and as such, may be more difficult to recover from, S.A.F.E. Court providers may find it beneficial to further tailor female participants’ treatment to the special challenges presented by this type of drug use.

Similar to the overall findings, the readiness for treatment score for females was moderately correlated with completion status so that higher readiness for treatment scores are related to graduation. Prior treatment was more weakly related to completion status for females than males, but prior treatment still predicts graduation for women. The relationship between number of

treatment sessions and successful completion was very strong for females. The number of group treatment sessions was highly and significantly related to successful completion of S.A.F.E. Court ($p < .01$) as are individual treatment sessions ($p < .01$). In other words, **the more treatment sessions attended, the more likely the participant is to graduate, regardless of the amount of time spent in the program.** This strong correlation for women is an indication of the result shown in Table 6 that **female graduates attended more treatment sessions during the course of their program than male graduates.** (Further, as described above, female graduates are less likely to be re-arrested than male graduates.)

Predictors of Reduced Recidivism

The characteristics of program participants (age, gender, ethnicity, marital status, readiness for treatment, number of treatment sessions, prior arrests, and prior treatment) were examined in relation to re-arrests after program completion (using correlations, regressions, and Univariate Analyses of Variance). Only participants who had data for 18 months post S.A.F.E. Court entry were used for these analyses ($n=95$; 60 males, 35 females). These numbers include graduates, terminated, and active participants. It should be noted that the overall number of re-arrests is very small.

All discharged participants

The analyses indicated that age and ethnicity were not significantly related to either re-arrests or drug-related re-arrests. Gender was significantly related to re-arrests (as presented earlier). Gender differences will be discussed further below. There were also other interesting relationships between other participant characteristics and recidivism.

Unsurprisingly, the number of prior arrests was positively related (although not significantly), to the number of arrests in the 18 months following S.A.F.E. Court entry. Moreover, a higher number of prior arrests (of all types) was significantly related to a higher number of *drug-related* subsequent arrests, indicating that participants who were arrested more often prior to Drug Court were much more likely to be arrested for a drug-related offense after starting the program. However, it should be noted that the number of re-arrests after drug court entry for the drug court participants as a group, regardless of whether they graduated or were terminated, was still lower than the number in the two years prior to program participation.

The number of drug court treatment sessions was significantly related to the number of re-arrests. A higher number of group and individual treatment sessions was associated with a lower number of re-arrests. The readiness for treatment scores were also significantly related to the number of re-arrests with a higher score on the readiness for treatment scale associated with fewer re-arrests. Those individuals who are more ready to change and who attend more treatment sessions are less prone to get re-arrested. This may indicate that treatment is an effective suppressor of recidivism and that the relationship found between more treatment sessions and graduation is most likely not just an artifact of increased length of time in the program.

Characteristics of Male Participants Related to Recidivism

Lower rates of recidivism for the males in S.A.F.E. Court were significantly related to readiness for treatment scores. Those men who indicated they were more ready for treatment were less likely to be re-arrested after program entry. Although it was not significant, **a greater number of treatment sessions was also correlated with fewer re-arrests**, indicating that participation in treatment may have an impact on future arrests.

The number of prior arrests for men coming to S.A.F.E. Court in relation to their arrests after starting the program is a compelling trend. Despite the evidence that men came into the program with an average of fewer arrests than women, men tend to be re-arrested more often than women after starting the program. These data show that perhaps it is the few men with a greater prior criminal history who tend to re-engage in crime, particularly drug-related criminal activities. Further, the relationship between prior arrests and future *drug-related* arrests were stronger for men than the general sample (.41, $p < .01$). This could indicate that perhaps men who come to the program with a more criminal prior history have a more severe drug problem and require more intense treatment than those with a less criminal prior arrest history. Future evaluations should investigate this link more closely.

Finally, though not significant, the data suggest that drug of choice might predict future arrests. Methamphetamine users had a higher incidence of re-arrests (an average of .47 re-arrests) than alcohol users (an average of .28 re-arrests) or marijuana users (no re-arrests). Once again, this illustrates the grave problem of methamphetamine use for society as well as for the user.

Female participants

Female participants were rarely re-arrested following their entry into S.A.F.E. Court regardless of whether or not they graduated, despite their higher average of arrests prior to program entry. Only 3 females (out of the 35 with data available for these analyses) were re-arrested in the 18-month period following drug court entry. With so few re-arrests, it is not possible to predict re-arrests in females with any kind of valid results. However, there was a significant correlation between number of drug court treatment sessions and re-arrests, with **more treatment sessions associated with fewer re-arrests**. Future evaluations with a larger group of females (and by extension, a possible greater number of re-arrests) may be able to verify this trend and allow analyses designed to identify other predictors of recidivism for female drug court participants.

Summary/Conclusion

The S.A.F.E. Court Program in Malheur County is a post-plea program with an annual capacity of 35 participants. The S.A.F.E. Drug Court is unique in that it is a gender-specific program with a female Judge and female treatment providers for the women participants and a male Judge and treatment provider for the men. At the time of this study, 125 participants had entered the drug court program (77 males and 48 females).

In order to examine participant recidivism, a pre-post design was used for this evaluation due to the difficulty in locating the data needed to identify an appropriate comparison group of individuals who were eligible for the program but did not attend. The number of arrests in the two years prior to drug court entry were compared to the number of re-arrests in the two years post program entry. Overall, S.A.F.E. Court participants were significantly less likely to be re-arrested after drug court entry. Although the number of participants with complete arrest data over two years is too small to create statistical significance when men and women are analyzed separately, analyses were performed in order to examine trends. Females, in particular, had an extremely low rate of recidivism, much lower than the men, even though women had a greater number of arrests than the men prior to drug court entry. Only 3 women out of 35³ were re-arrested in the two years post entry, regardless of completion status. Males were also re-arrested less often after entering the program, although the average number of re-arrests increased over time to levels similar to that prior to drug court entry. This is due to a small number of men who were re-arrested quite often. **Overall, 16% of all those who entered the S.A.F.E. Court Program were re-arrested, regardless of graduation status— 19% of the men and 10% of the women. These percentages are similar to those found for graduates nationally.** In general, the trends suggest that the S.A.F.E. Court Program has been effective in reducing re-arrests for offenders with drug addiction.

The effect of drug court on reducing substance use was examined by analyzing the number of positive UAs over time and the number of drug related re-arrests post S.A.F.E. Court entry. The mean number of positive UAs decreased somewhat over time, indicating a trend toward less use (although the UA data appeared incomplete— so these results should be taken with some caution). However, the number of drug related re-arrests for both men and women was *substantially* reduced following drug court entry, providing stronger evidence that the S.A.F.E. Court Program was effective in reducing substance abuse in its participants, regardless of program completion status.

The characteristics of those who graduated and those terminated were examined in order to determine if there were certain participant characteristics that could be predictive of success (or termination). There were not a large number of demographic characteristics that strongly predicted exit status. Age, marital status, race, and years of education were not correlated with status at exit. This implies that the program is able to equitably serve clients with a range of demographic characteristics, particularly a broad range of ages, differing ethnicities and individuals with varying education. However, drug of choice did appear to affect status at program exit. Those who reported alcohol as their primary drug of choice were more likely to graduate, while those who reported methamphetamine were more likely to terminate before program completion. This is most likely due to the combination of a men's inpatient treatment facility available for treating alcohol

³ There were 35 women who had 24 months of outcome data available
S.A.F.E. Court Outcome Evaluation

addiction as well as, conversely, the large amount of organic damage due to methamphetamine use. Interestingly, no women reported alcohol as their primary drug of choice.

Graduates tended to have fewer arrests prior to Drug Court entry, were slightly more likely to be male, were less likely to use methamphetamine, were more likely to have had treatment prior to drug court entry and were more likely to score high on the readiness for treatment scale (i.e., as might be expected, graduates were apparently more ready for change). Those terminated were more likely to use methamphetamine, less likely to use alcohol or marijuana, attended fewer treatment sessions and scored lower on readiness-for-treatment. Similar results were found when examining these characteristics in relation to recidivism. **In particular, a greater number of treatment sessions was related to fewer re-arrests. Interestingly, women attended a greater number of treatment sessions on average than men and had lower recidivism than men.** It is recommended that the S.A.F.E. Court Team continue to watch these trends, and look for other trends, as the program matures so that, 1. The Team can use participant characteristics to determine an offender's appropriateness for the Program and 2. The Team can seek out specific services that can be added to the program to address the issues that appear to lead to unsuccessful termination.

One concern in this outcome study was that because the S.A.F.E. Court program is relatively young and still growing, the sample for this first outcome evaluation was, of necessity, small—particularly when analyzing gender-specific data. In addition, there is some question on whether the recidivism results could be attributed directly to the program because there was no non-drug court comparison group. For this reason, the results of the analyses described in this report should be taken with some caution. However, the overall trend in outcomes for the Malheur County S.A.F.E. Court is very positive. The S.A.F.E. Court Program appears to be impacting its participants in the intended manner. Further examination of outcome data as the program continues to grow will allow for a larger sample size and the ability to verify the positive preliminary results achieved in the current evaluation.

Appendix A: Malheur County S.A.F.E.
Court Process Evaluation
Executive Summary

2003

Malheur County S.A.F.E. Court Process Evaluation

Executive Summary

The Malheur County Adult Drug Court, also known as the S.A.F.E. (Stop Addiction For Ever) Court, held its first court session on January 18, 2001. The S.A.F.E. Court is unique in that it is a gender-specific Drug Court with a male Judge, Treatment Therapist and Probation Officer for the men and a corresponding female Judge, Therapist and Probation Officer for the women.

Before implementation of the S.A.F.E. Court, the Malheur Court received a planning grant from the Drug Courts Program Office (DCPO) in 1999, which they utilized for drug court trainings and planning meetings with several justice system and other community players. Following receipt of an implementation grant from the DCPO in September 2001, NPC Research was hired to perform a process and outcome study of the S.A.F.E. 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 Malheur County S.A.F.E. 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.

The ability to integrate alcohol and other drug treatment services with justice system case processing is one of this Drug Court's biggest strengths. The S.A.F.E. Court Team includes members from many different agencies, all working positively together. Team members are encouraged to share information about each client and voice their opinions about possible actions before coming to a consensus on the final decisions. 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 Prosecution and Defense Counsel 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 cooperative, team approach when working with Drug Court clients. While providing a united front in the courtroom, the District Attorney continues to represent the best interest of the state, and the Defense Attorney continues to advocate for the clients in staffing. Public safety and clients' rights continue to be protected, as well.

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

Similar to many drug courts, the S.A.F.E. Court process has been challenged in its efforts to identify eligible participants early and to promptly place them in the program. Although it varies, the length of time from arrest to entrance into Drug Court is generally quite long— up to six weeks, due partially to a backlog created by a statewide budget crisis. There is also some concern that the District Attorney’s Office is not completely aware of the S.A.F.E. Court eligibility criteria and therefore is not referring as many participants as possible. However, most of the issues influencing length of time from arrest to entry into S.A.F.E. Court are outside the control of the S.A.F.E. Court. However, the length of time from referral to entrance into the program is under the control of the S.A.F.E. Court, and is much shorter (as short as one week).

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

The S.A.F.E. Court excels in the area of providing alcohol, drug, and other related treatment and rehabilitation services. Along with drug and alcohol treatment, clients are offered a variety of services, such as mental health treatment, employment training, educational programs, domestic violence, and parenting. They are also given mental health, medical, and dental referrals.

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

Based on the results from the American University National Drug Court Survey (Cooper, 2000), the number of urinalyses (UAs) given in this Drug Court is comparable to the large majority of drug courts nationally. The S.A.F.E. Court's two to three UAs a week during the first two phases and one to two UAs a week in later phases is typical of drug courts nationally. However, the S.A.F.E. Court is above the national average for number of UAs in the last two phases, due to the Team’s desire to measure continued abstinence as supervision decreases. S.A.F.E. Court clients who are alcohol abusers receive regular breathalyzer tests on the same schedule as the UA testing.

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

The S.A.F.E. Court Team is exemplary in having a coordinated strategy around participants' compliance. The Team works together to determine sanctions (based on their written guidelines) and rewards, with the Judge making the final decision. The Probation Officer and Treatment Therapist may give immediate sanctions for certain violations, an excellent example of swift sanctions. This is followed by notification of the Judge and the Team and discussion of the violation and sanction at the next staff meeting.

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

S.A.F.E. Court participants are required to be in court every two weeks, regardless of phase level, which means that they have very regular contact with their Judge. Participants who are in residential care check in with their Judge by speakerphone during Drug Court sessions. The Judges are involved in all decision-making for each participant.

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

The S.A.F.E. Court staff was very supportive of this evaluation. They made themselves available for 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 site visits and focus groups and facilitated communication between the evaluators and the S.A.F.E. Court Team. The S.A.F.E. Court also performs good self-monitoring and makes adjustments to process and policy as warranted.

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

Education on Drug Court planning, implementation and operation is a high priority for this Drug Court. All Drug Court Team members attend drug court trainings on a regular basis, and several have observed other drug courts as well. New information is brought back and discussed with the Team.

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

The S.A.F.E. Court has strong relationships with a large number of community agencies, most of which have provided staff to be part of the S.A.F.E. Court Team. For example, the Employment and Training Consortium aids clients in finding employment, a requirement of the S.A.F.E. Court. The Court also has strong ties with the Department of Human Services (DHS), Adult and Family Services (AFS), and the Department of Housing and Urban Development (HUD), among many other agencies. The S.A.F.E. Court continually works toward creating positive relationships with community members.

Comments and Observations

- ▶ One of the notable features of this Drug Court is that clients in residential care participate in Drug Court by phone, thus allowing them to continue in the S.A.F.E. Court program and maintain their relationship with the Court.
- ▶ Another notable practice is participation in the Community Corrections' website (not public), which allows Police Officers to keep up-to-date on Drug Court clients and monitor them closely in the community.
- ▶ Women clients who participated in the focus group were extremely positive about S.A.F.E. Court and had difficulty finding anything negative to say about the Program or Program staff. They did report that they felt the cost of the program was too high.
- ▶ Men clients who participated in the focus group were more than a little concerned about the costs of the program.

- ▶ Allowing Probation Officers and Treatment Therapists to provide immediate sanctions (following specific guidelines) is a laudable practice of this Court. This provides immediate consequences that help modify behavior.
- ▶ The clients have very positive relationships with the two Judges. They want the Judges to be proud of them, a strong motivating factor for avoiding use.

Recommendations

Explore the option of becoming self-sustaining: With the instability of funding due to the budget crisis in Oregon, the S.A.F.E. Court might wish to consider becoming self-sustaining as a way to ensure the stability of the Drug Court.

Monitor gender attitudes: In some ways it appears that the gender-specific treatment leads to some polarization in attitudes toward the two genders, resulting in some gender stereotyping. In addition, separating the participants into two groups leads naturally to group identities and competition between the two groups. It is recommended that the Team examine the tendency to have disparate attitudes toward the two genders and guard against having this influence their decisions and actions.

Try monthly fees: Most participants were unhappy with the cost of the S.A.F.E. Court. It is possible that this is partially due to the frequency of payments per week. Monthly treatment fees (or fees every other week) and an opportunity to buy a month's worth of UA coupons in advance may reduce the salience of this issue for participants while retaining the point that the participants are receiving a valuable service.

Consider decreasing the number of court appearances as a reward: Clients of S.A.F.E. Court often have difficulty traveling to Vale to for S.A.F.E. Court sessions. For that reason, decreasing the number of court appearances may be a particularly effective reward for S.A.F.E. Court clients who are doing well in the Program.

Summary/Conclusion

The Malheur County S.A.F.E. 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. It was reported that the Ten Key Components were used in designing and implementing the S.A.F.E. Court Program and it is evident that this is the case.

The one Key Component that was less strong than the others was the early identification and prompt placement of eligible clients in the S.A.F.E. Court Program, both of which may be improved after examination by the S.A.F.E. Court Team members.

The Malheur County S.A.F.E. Court Program is well organized, has a highly integrated and diverse Team, and an unusually large number of positive community relationships and support. In addition, the S.A.F.E. Court has several unique and notable practices, such as their gender-specific services. Notable strengths include a strong commitment to education and the ability of both Judges' to show their care and concern for S.A.F.E. Court clients.