

San Joaquin DUI Monitoring Court Process and Outcome Evaluation *Final Report*



Submitted to:

**San Joaquin County
Collaborative Courts and the
California Office of Traffic Safety**

Submitted by:

**NPC Research
Portland, Oregon**

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Submitted By

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EXECUTIVE SUMMARY

Background

For the past 20 years in the United States, there has been a trend toward guiding nonviolent drug and alcohol offenders into treatment rather than incarceration. The original drug court model links the resources of the criminal system and substance treatment programs to increase treatment participation and decrease criminal recidivism. Drug treatment courts are one of the fastest growing programs designed to reduce drug abuse and criminality in nonviolent offenders in the nation. The first drug court was implemented in Miami, Florida, in 1989. As of December 2010, there were 2,633 drug courts including 1,881 adult and juvenile drug courts, 343 family courts, and 409 other types of drug courts in all 50 states, the District of Columbia, Guam, Puerto Rico and the Virgin Islands (NDCI, 2011).

In a 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. These include 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. Generally, there is a high level of supervision and a standardized treatment program for all the participants within a particular court (including phases that each participant must pass through by meeting certain goals). Supervision and treatment may also include regular and frequent drug testing.

More recently, over the past 10 years, the drug court model has been expanded to include other populations (e.g., juveniles) and other systems (e.g., child welfare and mental health). The model has also been used with a special focus on specific types of offenders (e.g., DWI offenders).

DWI courts specifically target repeat driving-while-intoxicated (DWI) offenders with the main goal of protecting public safety. Benefits to society take the form of reductions in crime and future DWIs, resulting in reduced costs to taxpayers and increased public safety. DWI courts, specifically, have been shown to be effective in reducing recidivism (both of DWIs and other crimes) and in reducing taxpayer costs due to positive outcomes for DWI court participants, including fewer re-arrests, less time in jail and less time in prison (Carey, Fuller, Kissick, Taylor, & Zold-Kilbourn, 2008).

In 2008, San Joaquin County implemented a system change where all repeat DUI offenders in the largest judicial district (mainly the City of Stockton) are required to participate in a DUI Monitoring Court program. Because this program was designed to treat all repeat DUI offenders, and because the drug court model is designed to treat high-risk/high-need offenders (in particular, drug- or alcohol-dependent individuals) the San Joaquin DUI Monitoring Court (SJDMC) does not follow all tenants of the drug court model for all participants. Many of the repeat DUI offenders in this program are not dependent on alcohol or other drugs and do not need the high level of supervision and treatment that would be appropriate for high-risk/high-need offenders. For this reason, there are two tracks to the San Joaquin DUI Monitoring Court. Track 1 is the “monitoring track” where participants are required to come to court infrequently to report on progress in completing the terms of their probation, including DMV requirements to qualify to get their license returned. Track 2 is for those participants who demonstrate that they are unable to comply with Track 1 re-

quirements and are assessed as needing drug and alcohol treatment. Track 2 follows a drug court model more closely. The SJDMC program is described in detail in Chapter 1 of this report.

In late 2011, NPC Research was contracted by the San Joaquin County Court to conduct a process and outcome evaluation of the SJDMC. Located in Portland, Oregon, NPC Research has conducted research and program evaluation for over 20 years. NPC Research has conducted process, outcome and cost evaluations of drug courts nationally and has performed best practices research examining drug court practices related to significant reductions in recidivism and higher cost savings. Having completed over 125 drug court evaluations (including adult, DWI, juvenile drug court, reentry and family treatment drug courts), NPC is one of the most experienced firms in this area of evaluation research.

For the evaluation of the SJDMC, the court was interested in learning about the effectiveness of this program in reducing DUI recidivism and protecting public safety and, if it proved to be effective, wanted a detailed process evaluation that would allow other interested jurisdictions to follow the model in implementing a similar program. Chapter 1 of this report describes the process evaluation methods and provides a detailed description of the program. Chapter 2 presents the methods and results of the outcome evaluation. The process evaluation was also designed to provide the SJDMC program with suggestions for process improvement. Chapter 3 compares the SJDMC practices with the research-based drug court best practices and provides recommendations for enhancing Track 2 of the program. A summary of the results of the outcome and best practices evaluation is provided below.

Outcome Methods and Results

All SJDMC participants since program implementation and a comparison group of the population of repeat DUI offenders convicted of a DUI in 2006 (2 years before the program was implemented) were tracked in DMV data for recidivism events including new DUI convictions and traffic accidents for 18 months after their “index DUI.” (The *Index DUI* is defined as the conviction that led to participation in the SJDMC, or in the case of the comparison group, the DUI conviction that would have led to participation in the SJDMC if it had existed in 2006.)

There were two key policy questions of interest for the recidivism analysis. 1) Does participation in SJDMC reduce the number of new DUI convictions and 2) Does participation in SJDMC reduce the number of traffic accidents in the repeat DUI population? The results for these two questions are summarized below. Additional questions of interest, including the incidence of license reinstatement, are described in the main report.

RESEARCH QUESTION #1: WHAT IS THE IMPACT OF PARTICIPATION IN THE DUI MONITORING COURT ON RECIDIVISM (NUMBER OF NEW DUI CONVICTIONS) COMPARED TO TRADITIONAL COURT PROCESSING?

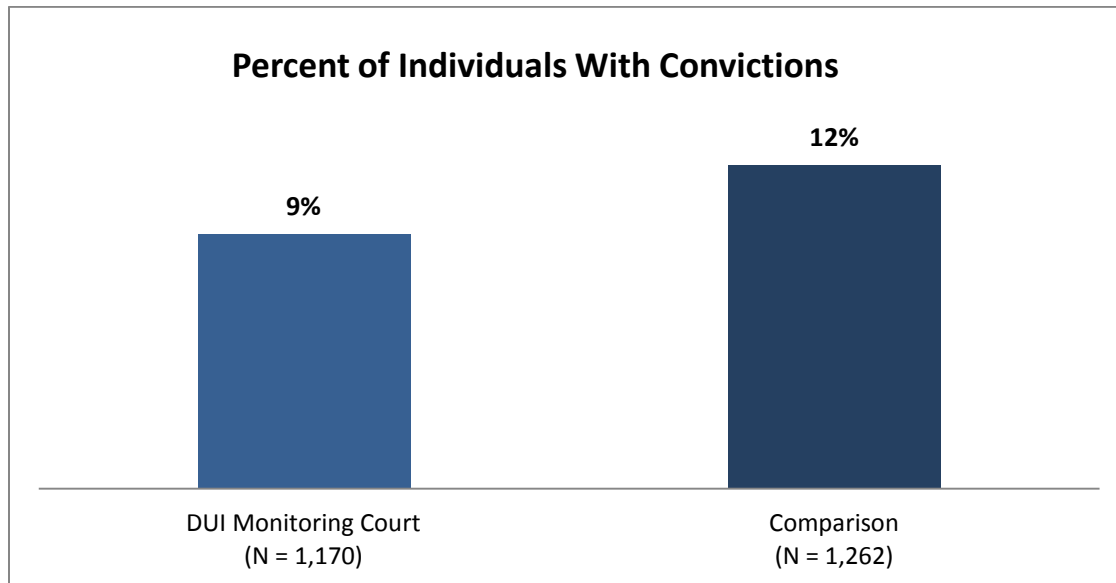
Does participation in DUI Monitoring Court lead to a lower recidivism rate (the percent of participants who are re-convicted) compared to traditional court?

YES. Fewer SJDMC participants were rearrested in the 18 months after their eligible DUI than those on traditional probation.

Figure 1 shows that a greater percentage of comparison group offenders were re-arrested than were SJDMC participants. Of the comparison group, 12% of the offenders were re-arrested

within 18 months after their index arrest, compared to 9% of the DUI Monitoring Court participants. Although not statistically significant, the difference is large enough to warrant consideration ($p = .058$).

Figure 1. Percent of Individuals With New DUI Convictions 18 Months After Index DUI Conviction Date



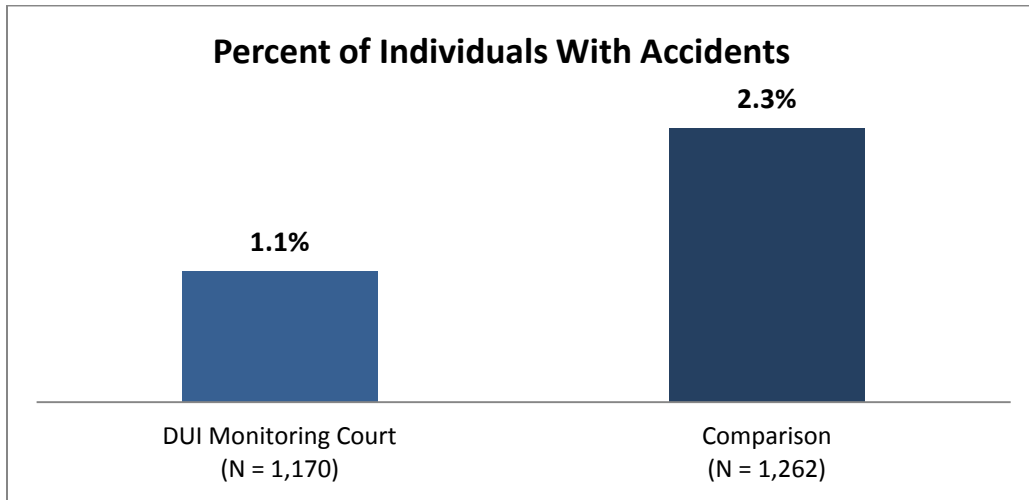
$p = .058$

Does participation in DUI Court lead to a lower accident rate (percent of people who get in alcohol- or drug-involved accidents) compared to traditional court?

YES. Less than half as many SJDMC participants were in accidents compared to those on traditional probation.

Figure 2 shows that persons in the comparison group had a significantly greater rate of alcohol- or drug-involved accidents 18 months after their index arrest than did persons participating in DUI Monitoring Court. Of the comparison group members, 2.3% had an involved accident 18 months after their index arrest, compared to 1.1% of the DUI Monitoring Court participants ($p < .05$). Although these numbers are small, they represent events that can have serious social and financial costs, and thus are important to reduce to as small a number as possible. Note that multiplying the average number of accidents by the number of individuals in the sample results in a total of 32 accidents for those on traditional probation compared to just 14 for those in the DUI Monitoring Court.

**Figure 2. Percent of Accidents Associated With Drinking or Using Drugs
18 Months After Index DUI Conviction Date**



$p < .05$

In sum, results showed that in the 18 months following their index DUI and subsequent entry into the SJDMC program, DUI Monitoring Court Participants:

- Had significantly fewer new DUI convictions,
- Had significantly fewer accidents, including those related to drug and alcohol consumption and those resulting in injury
- Were significantly more likely to comply with court, probation and DMV requirements
- Were significantly more likely to regain their driver’s licenses.

BEST PRACTICES SUMMARY

Track 2 individuals are participants who have already demonstrated non-compliance with program requirements and have been assessed as drug or alcohol dependent. The drug court model is specifically designed for high-risk drug dependent individuals like those in Track 2. Aligning the Track 2 program more closely with the drug court model, and particularly the research-based best practices, may have a profound and positive effect on Track 2 participant outcomes. Although the Track 2 program is already implementing some best practices, there are additional drug court best practices that could be added to improve the process. The results of the SJDMC best practices assessment are summarized briefly below. This summary includes commendations on best practices currently in place as well as recommendations for the implementation of some additional practices as funding allows.

Commendations

The SJDMC program for Track 2 participants is performing many of the research-based best practices for drug courts. The practices being successfully performed by the SJDMC include:

- Regular use and reporting of program statistics
- Engaging in a process and outcome evaluation

- Having a judge that is assigned indefinitely to the program and who spends the appropriate length of time with participants during court appearances
- Use of appropriate length of time in jail for participant sanctions (less than one week)
- Having a program length of at least 12 months
- Requiring participants to be clean for 120 days before successfully exiting the program
- Identifying eligible participants and getting them into the program swiftly
- Including representatives from a range of collaborating agencies on the SJDMC team

Recommendations

Although the SJDMC program is following many best practices, there are further best practices that can be implemented to enhance Track 2 of the program. These include:

- Continue to work toward having a prosecutor and a representative from law enforcement on the team
- Continue to work toward obtaining funding for treatment and then identify a central provider to oversee treatment
- Implement a more rigorous drug testing protocol, including random urine drug tests at least twice per week with a turnaround of less than 48 hours on the results
- Develop written guidelines for team response to participant behavior and give a copy of the guidelines to each team member (The SJDMC has already begun this process.)
- Explore ways to decrease the burden of fees on SJDMC participants through community service or other options that will allow participants to give back to the community that they have harmed while still successfully completing the program
- Reconvene an advisory committee for the program to expand understanding of and community support for the program

Overall, the SJDMC has implemented an effective and innovative program that follows many of the best practices from the latest research on drug and alcohol involved offenders. In sum, the San Joaquin DUI Monitoring Court model shows substantial promise for increasing public safety in reducing drunk driving and traffic accidents, the second largest cause of accidental death in the nation (Warner, Chen, Makuc, Anderson, & Miniño, 2011).¹

¹ Poisoning is now the leading cause of death from injuries in the United States and nearly 9 out of 10 poisoning deaths are caused by drugs.

INTRODUCTION AND BACKGROUND

For the past 20 years in the United States, there has been a trend toward guiding nonviolent drug and alcohol offenders into treatment rather than incarceration. The original drug court model links the resources of the criminal system and substance treatment programs to increase treatment participation and decrease criminal recidivism. Drug treatment courts are one of the fastest growing programs designed to reduce drug abuse and criminality in nonviolent offenders in the nation. The first drug court was implemented in Miami, Florida, in 1989. As of December 2010, there were 2,633 drug courts including 1,881 adult and juvenile drug courts, 343 family courts, and 409 other types of drug courts in all 50 states, the District of Columbia, Guam, Puerto Rico and the Virgin Islands (NDCI, 2011).

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The rationale of the drug court model is supported by a vast reservoir of research literature (Marlowe, 2010). There is evidence that treating substance abuse leads to a reduction in criminal behavior as well as reduced use of the health care system. The National Treatment Improvement Evaluation Study (Substance Abuse and Mental Health Services Administration, 1994) found significant declines in criminal activity comparing the 12 months prior to treatment and the 12 months subsequent to treatment. These findings included considerable drops in the self-reported behavior of selling drugs, supporting oneself through illegal activity, shoplifting, and criminal arrests. In a study using administrative data in the state of Oregon, Finigan (1996) also found significant reduction in police-report arrests for those who completed treatment.

Drug courts have been shown to be effective in reducing recidivism (GAO, 2005; Gottfredson, Kearley, Najaka, & Rocha, 2007) and in reducing taxpayer costs due to positive outcomes for drug court participants (including fewer re-arrests, less time in jail and less time in prison) (Carey & Finigan, 2004; Carey, Finigan, Waller, Lucas, & Crumpton, 2005). Bhati and colleagues found a 221% return on the investment in drug courts (Bhati, Roman, & Chalfin, 2008). Some drug courts have even been shown to cost less to operate than processing offenders through business-as-usual (Carey & Finigan, 2004; Carey et al., 2005).

More recently, over the past 10 years, the drug court model has been expanded to include other populations (e.g., juveniles) and other systems (e.g., child welfare and mental health). The model has also been used with a special focus on specific types of offenders (e.g., DWI offenders).

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For the evaluation of the SJDMC, the court was interested in learning about the effectiveness of this program in reducing DUI recidivism and protecting public safety and, if it proved to be effective, wanted a detailed process evaluation that would allow other interested jurisdictions to follow the model in implementing a similar program. Chapter 1 of this report describes the process evaluation methods and provides a detailed description of the program. Chapter 2 presents the methods and results of the outcome evaluation. The process evaluation was also designed to provide the SJDMC program with suggestions for process improvement. Chapter 3 compares the SJDMC practices with the research-based drug court best practices and provides recommendations for enhancing Track 2 of the program.

CHAPTER 1: PROCESS EVALUATION

Process Evaluation Methods

A process evaluation considers a program's policies and procedures and examines whether the program is meeting its goals and objectives. Process evaluations generally determine whether programs have been implemented as intended and are delivering planned services to target populations. To do this the evaluator must have criteria or standards to apply to the program being studied. In the case of drug treatment courts, some nationally recognized guidelines have been established and have been used to assess drug court program processes. These standards were established by the National Association of Drug Court Professionals' (1997) the "10 Key Components of Drug Courts" and from the National Center for DWI Courts' (2005) the "10 Guiding Principles of DWI Courts." Good process evaluation should provide useful information about program functioning in ways that can contribute to program improvement. The main benefit of a process evaluation is improving program practices with the intention of increasing program effectiveness for its participants. Program improvement leads to better outcomes and, in turn, increased cost-effectiveness and cost-savings. In addition, a good process evaluation will provide a description of the program with enough detail that other jurisdictions can duplicate the process if they wish to start their own programs following the model of the program under study. This was one of the key intended purposes of the evaluation of the San Joaquin DUI Monitoring Court.

ELECTRONIC PROGRAM ASSESSMENT

An electronic survey was used to gather program process information from the SJDUI program as the first step in creating a description of the program. This survey, which provides a consistent method for collecting structure and process information from drug courts, was developed based on three main sources: NPC's extensive experience with drug courts; the American University Drug Court Survey, a published paper by Longshore et al. (2001), which lays out a conceptual framework for drug courts; and the 10 Key Components established by the National Association of Drug Court Professionals (1997). The electronic assessment covers a number of areas, particularly areas related to the 10 Key Components and the 10 DWI Guiding Principles—including eligibility guidelines, specific drug court program processes (e.g., phases, treatment providers, urinalyses, fee structure, rewards/sanctions), graduation, aftercare, termination, identification of drug court team members and their roles, and a description of drug court participants (e.g., general demographics, drugs of use). The use of an electronic assessment allowed NPC to begin building an understanding of the program, as well as to collect information that supported a thorough review of the data collected by the site.

SITE VISITS

NPC evaluation staff members conducted a site visit to the SJDUI Court program. The site visit included observation of DUI Court sessions for both Track 1 and Track 2 participants and a DUI Court staffing meeting, as well as interviews with key DUI Court staff. Two focus groups were performed with current Track 1 and Track 2 DUI Court participants. These observations, interviews, and focus groups provided information about the structure, procedures, and routines used in the DUI Court.

KEY STAKEHOLDER INTERVIEWS

Key stakeholder interviews, conducted in person and by telephone, were a critical component of the DUI Court process study. NPC staff conducted detailed interviews with individuals involved in the administration of the DUI Court—including the judge, DUI Monitoring Court coordinator, caseworkers, attorneys, data administrator and the treatment provider who attends staffing and court sessions.

The interviews were conducted using NPC’s Drug Court Typology Interview Guide,² which was developed from the same sources as the electronic assessment and provides a consistent method for collecting structure and process information from drug courts. In the interest of making the evaluation reflect local circumstances, the guide was modified to fit the purposes of this evaluation and the DUI Monitoring Court. The information gathered through the use of this guide assisted the evaluation team in focusing on the day-to-day operations as well as the most important and unique characteristics of the San Joaquin DUI monitoring court program.

FOCUS GROUPS

NPC staff conducted two focus groups with current program participants, one with Track 1 participants and one with Track 2 participants. The focus groups provided participants with an opportunity to share their experiences and perceptions regarding the DUI Court process and allowed NPC to understand the program from the perspectives of those who are the focus of the program and who actually experience the process directly. The focus group for Track 1 participants consisted of 12 participants—10 men and 2 women. The participants in this group varied in their time in the program from 2 days to 15 months. The focus group for Track 2 had 13 participants—10 men and 3 women. The length of stay in the program for these participants ranged from 1 month to 15 months.

DOCUMENT REVIEW

In order to better understand the operations and practices of the DUI Court, the evaluation team reviewed program documents including the DUI Court Program Education and Treatment Center Information folder and other documents provided to the participants to orient them to the program.

REVIEW OF PROGRAM DATA

The SJDMC provided NPC with an excel spreadsheet of all participants who had entered the program since inception. This included demographic information such as age, gender, ethnicity, and marital status as well as employment status and source of income. The data also included program entry and exit date, and information on whether the participant was in Track 1 or Track 2. These data are described further in the outcome evaluation methods presented in the outcome section of this document.

² The Typology Guide was originally developed by NPC Research under a grant from the Bureau of Justice Assistance and the Administrative Office of the Courts of the State of California. A copy of this guide can be found at the NPC Research Web site at [www.nperesearch.com/Files/NPC_Research_Drug_Court_Typology_Interview_Guide_\(copyrighted\).pdf](http://www.nperesearch.com/Files/NPC_Research_Drug_Court_Typology_Interview_Guide_(copyrighted).pdf)

San Joaquin County DUI Monitoring Court Process Description

Following is the SJDMC process description. This includes some brief information about San Joaquin County for context and then provides a detailed description of the program process including DUI Court implementation, case management, team members and program requirements.

SAN JOAQUIN COUNTY

San Joaquin County, composed of 1,391 square miles, is located in central California. The City of Stockton is the county seat. As of the 2010 Census, this county had a population of 685,306 with 77% of the population over the age of 18. The racial composition of the county was 39% Hispanic/Latino, 36% non-Hispanic Caucasian, 14% Asian, 8% Black and less than 2% from other races. The median household income in 2006-2010 was \$54,341, with approximately 16% of individuals living below the federal poverty level (U.S. Census).

Prior to the program implementation, drug-dependent DUI offenders were seldom being referred to treatment and offenders were not being held accountable for completing their sentences. Instead, many of them returned to illegal activity and eventually re-offending, giving San Joaquin County one of the highest recidivism rates per capita in California. In response to the number of non-compliant DUI offenders—or offenders repeatedly cycling through the system—the San Joaquin County DUI Monitoring Court (SJDMC) program was implemented in January 2008.

SAN JOAQUIN COUNTY DUI COURT OVERVIEW

The SJDMC is a mandatory program that targets repeat DUI offenders with the goal of enabling participants to both fulfill their sentencing obligations and achieve rehabilitation through treatment as prescribed by the court. Through these efforts, the program intends to reduce recidivism and increase public safety.

“It is nice having a case manager to talk to. Before this you just talk to a public defender, but now we have someone to answer all our questions and tell us what we need to do, and help us figure out how to do it.” — Track 1 Participant

There are two tracks in the SJDMC program: Track 1, the accountability track, and Track 2, the treatment track. In April 2011, a designated case manager with pertinent background (e.g., counseling licensed), was assigned to Track 2. Track 1 participants attend court hearings at 1 month, 6 months and 1 year and must be compliant for 1 year. Track 2 participants attend court weekly and must be compliant for the time they are assigned to treat-

ment and can be transferred back to Track 1 if treatment is completed. All offenders are enrolled into Track 1, except in some rare instances, such as an offender having a very high BAC, receiving his/her 3rd or 4th DUI offense, being involved in a collision or injury, or a combination thereof where the need for additional supervision and treatment clearly presents itself in the assessment. If participants do not make progress in Track 1, they will be required to attend court hearings more frequently. If participants continue to struggle with program requirements, they will be assessed by the probation officer or a case manager and put into Track 2 and treatment if treatment is indicated by the assessment. After participants make satisfactory progress in Track 2,

they may be transferred back to Track 1. With continued progress, the participant may successfully complete the SJDMC program after a minimum of 1 year

IMPLEMENTATION OF THE SAN JOAQUIN DUI COURT

The San Joaquin DUI Monitoring Court program was implemented in January 2008 to increase accountability for repeat DUI offenders and reduce recidivism among this higher risk group with the goal of increasing public safety and the quality of life for all citizens. Before the SJDMC program was implemented, individuals with multiple DUI offenses were sentenced to jail terms with no ignition interlock device (IID), accountability for their other requirements, or treatment if needed. Currently, all repeat offenders in the Stockton Judicial District, San Joaquin County's largest district), are ordered to participate in the DUI Court program. The program was a collaborative effort designed by a group that included the court, the San Joaquin County District Attorney's Office, the Office of the Public Defender, DUI defense attorneys, San Joaquin County Probation Department, San Joaquin County DUI program providers, and Mothers Against Drunk Driving (MADD). In October 2007, the courts received a 2-year grant in the amount of \$722,000 awarded by the California Office of Traffic Safety with support from the National Health & Traffic Safety Administration (NHTSA) to develop and implement this program. They recently received a second grant from the California Office of Traffic Safety, in the amount of \$533,000 to help support the program through September 2012.

PARTICIPANT POPULATION AND PROGRAM CAPACITY

As of July 2012, there were 2,167 repeat DUI offenders that entered the SJDMC since its inception. The program has 721 currently active participants. Of the 2,167 participants, 1,055 completed the program and 391 were discharged unsuccessfully because they absconded, were transferred to another county, were deceased, or had been deported. The average age of these participants is about 46 years, and approximately 15% are female. Over 51% of program participants are Hispanic, 21% are Caucasian, and 15% are African American. Other than alcohol, about 35% of SJDMC participants use marijuana, 35% use methamphetamines, and the remaining use heroin, prescription drugs and cocaine. It is estimated that 75% of the SJDMC participants are poly-substance users.

DUI COURT GOALS

The SJDMC Program Guide explains that its primary objectives are to assist offenders in their efforts to fill sentencing obligations and to reduce their likelihood of re-offending. Specifically, through assessment, treatment and accountability measures, DUI offenders will better be able to meet any other mandates of the court and re-offend less, thereby reducing alcohol-related offenses, injuries and deaths.

"This is the first time I've ever been in a court ordered program that I actually got something out of it. Before, it was a 'fine, jail, your done.' This program is constant monitoring."

— Track 2 Participant

ELIGIBILITY CRITERIA

To be eligible for DUI Court, an individual must be convicted of his or her second or greater DUI and the case must be filed in the Stockton Judicial District. The program accepts offenders with violence charges and drug sale charges. However, offenders may be transferred from DUI Court if they are assessed as having co-occurring disorders and the mental health court would be more appropriate.

All SJDMC participants have been referred by a judge upon conviction. In some cases, the judge may hand down orders that do not include some of the typical DUI Court program requirements (such as acquiring an ignition interlock device for their car). Because the program is mandatory for multiple offenders, eligibility criteria are not written. The only way repeat DUI offenders would not be required to enroll into the program is if they were sent to prison.

DUI COURT PROGRAM SCREENING AND ASSESSMENT

Most repeat DUI offenders are ordered to complete an 18-month program. However, if a defendant's Blood Alcohol Content (BAC) is under .10, a "wet reckless" disposition may be plea bargained by counsel and the offender will have to complete a 9-month DUI Court program, including installation of an IID or alternative alcohol monitoring and \$1077 in lieu of incarceration. Most offenders have a BAC between .10 and .19 and are enrolled in the 18 month program. These participants usually spend 10 to 120 days on a misdemeanor case, or up to a year on a felony case in jail, have to have an IID installed or alternative alcohol monitoring for a year and pay \$2,726 in lieu of incarceration. All participants are required to complete the statutorily mandated 18-month DUI education program.

Participants are not typically assessed for risk or need. The SJDMC does not (as a regular practice) perform a mental health assessment. However, case managers may request an assessment if they suspect mental health issues. A full substance abuse assessment is conducted with each Track 2 participant to determine level of care. One of the case managers is trained to administer the ASI and the ASAM.

According to staff, the average length of time between the offense and DUI Court *referral*, which usually occurs when the individual admits the offense at arraignment, is about 15 to 30 days following the arrest. The time between referral and entry into the program ranges from 0 to 7 days. No formal orientation process is in place. However, a case manager meets with each of the clients shortly after the arraignment hearing, conducts an intake, has them review a contract and speaks with them about program expectations.

INCENTIVES FOR OFFENDERS TO COMPLETE THE DUI COURT PROGRAM

Incentives for participants to complete the SJDMC program include praise from the judge, less frequent court appearances, reduction in treatment level, avoiding jail time, obtaining a restricted driver's license that had been suspended or revoked by the DMV, and receiving substance abuse treatment. Team members reported that there is some effort to have felony charges reduced upon successful program completion and/or have the charge completely removed. Conviction can be expunged upon the completion of probation. However, this may be on an individual basis and not program wide.

DUI COURT PROGRAM STRUCTURE

The SJDMC does not use a phase structure. Repeat offenders in the Stockton Judicial District are placed into either the Accountability Track (1) or the Treatment Track (2). Both tracks take a minimum of 12 months to complete. Participants in Track 1 are not formally referred for substance abuse treatment. Most Track 1 and Track 2 participants are required to attend the Drunk Driver Education (DDE) 18-month program and have an IID installed in their vehicle or have alternative alcohol monitoring. The IID is required in order to obtain a restricted license and costs \$100 to have installed plus a \$70 to \$100 monthly fee. Participants are required to keep the IID on their car for 1 year or longer. If a participant does not own or operate a car, in lieu of the IID installation, they must be monitored with a transdermal alcohol monitoring bracelet or daily (breathalyzer) monitoring. The transdermal alcohol monitoring bracelet fee starts at \$13 a day and decreases over time. However, participants are often given discounts based on their ability to pay. In-home monitoring costs \$6 to \$8 per day.

The DDE programs vary but generally consist of:

- 12 hours of education about legal, medical and social problems associated with alcohol abuse
- 52 hours of group sessions to share, identify and resolve drug/alcohol related problems
- 26 face-to-face interviews with a program counselor
- 6 reentry group sessions about topics such as reentry activities, self-help groups, employment, family and relapse prevention

These services may vary slightly depending on which agency is administering the program. At this time of this evaluation, there are five agencies that offer DDE programs locally: Service First of Northern California, El Concilio, Alcohol Recovery Center, Valley Community Counseling, and the Safety Council. If participants cannot pay for the DDE program and they don't have a job, they will be ordered to participate in support group meetings 3 times per week or attend the Alcohol & Drug Alternatives Program (ADAP) until they can pay the DDE program registration fee. ADAP is free and provides supervision and education. If a participant cannot afford to pay for monitoring (i.e., transdermal alcohol monitoring) he or she may be placed under the supervision of a Probation Officer for alcohol or drug monitoring or ordered to go to ADAP 5 days a week, 8 hours a day.

Most substance abuse treatment for SJDMC Track 2 participants is administered through a variety of treatment providers (11+). The DUI Court does not contract directly with any treatment providers, nor do they have funding to pay for treatment. The majority of drug court clients go through intensive outpatient treatment (IOP) or outpatient treatment (OP) that is either provided at no cost, or that can be paid for those participants with insurance. Some participants need residential treatment. The program uses providers that do not charge participants or that take participant insurance. There are often extended waits for residential treatment beds. Gender-specific treatment, mental health counseling and psychiatric services are offered to participants who are assessed as needing these services. Participants who speak Spanish, but little English, are paired with a Spanish-speaking court compliance manager. Some participants are required to attend self-help meetings (AA/NA). Ancillary services that are offered to participants include job training, employment assistance, health education, family counseling, education assistance, housing assistance and health and dental care.

DUI Court hearings where participants' progress is reviewed are set for each participant in Track 1 at 1 month, 6 months and 1 year following entry into the program. At these hearings, clients must demonstrate to the court that they are following program rules, have the IID installed, and are in compliance with their conditions of probation. If a Track 1 participant violates the conditions of probation, they will generally be required to attend court and supervision meetings more frequently. If they continue to be non-compliant due to drug use issues, they are assessed to determine the level of care needed and referred to treatment if indicated by an assessment. Once they are assessed as needing drug treatment, they are transferred to Track 2. If a participant has problems meeting requirements, the judge may use a variety of strategies including modifying their probation from informal to formal. They are put on the Probation Officer's caseload and are charged probation supervision fees.

"Sometimes they put people into jail who are intoxicated but they don't usually put non-intoxicated people in jail. Now, I'm not nervous to go to court."

— Track 1 Participant

Most SJDMC participants are required to enroll in an 18-month Drunk Driving Education (DDE) program. Six different education topics are covered in DDE groups weekly. If a client misses more than 10 DDE classes, they are terminated from groups. The last 6 months of the longer DDE program is spent attending one self-help (e.g., AA, CA, NA) per month. Once a participant finishes all required DDE courses, they are given a certificate of completion, which they must send to the DMV. Once this is done, they can re-obtain their driver's license. According to team members, the DDE programs, which are operated by several agencies, cost an average of \$1,300 per year. Because this cost may not be feasible for some participants, they have the alternative to attend three support group meetings per week until they are able to pay for and enroll in the DDE program.

DUI Court participants are typically given the option to enroll in an Alternative Work Program (AWP) in lieu of the jail time for their repeat DUI offense. Acceptance into AWP is upon approval of the Sheriff's Office. One day of working in the AWP program is equal to 2 days of a jail term. The AWP is run by the San Joaquin County Sheriff and has an enrollment fee of \$75 and a daily fee of \$10. It allows individuals to serve sentences by working on public property and roads. While enrolled in the AWP, participants may be required to wear (and pay for) a transdermal monitoring bracelet. Participants that cannot afford the AWP fee must serve their time in jail. Team members report that this sometimes interrupts the client's treatment program.

CASE MANAGEMENT

Track 1 participants generally see their Case Manager 3 times during the program (at entry, 6 months and 1 year, when they come in for DUI Court hearings). If they are having problems, they may schedule more frequent visits (up to weekly visits). Court compliance managers (CCMs) work with clients on a case-by-case basis. Some Track 1 CCMs look for "red flags" by checking the jail Web site and speaking to family members. If there are problems, the participant may be referred to more frequent court sessions, or possibly the DUI Track 2 calendar. If the problem is alcohol-related the court orders will include an 'abstain from alcohol' clause, which is monitored through random testing. The CCMs also have access to transdermal monitoring bracelets if needed. If a participant is not behaving in accordance with the alcohol clause, they will be violated and enrolled into treatment services. Their CCM will recommend to the judge that they are transferred to Track 2.

Focus Group Feedback: Focus group participants spoke positively about their case managers and felt they had appropriate expectations. One participant explained, “Case workers will tell you how to get around and where you can go to get help. But they can’t do it for you, and they’ll tell you that.” Another participant was grateful for his case manager and the program’s monitoring, even though he fought against the program’s structure initially. “I thought [my case worker] was the devil. He was on top of everything. He just quit buying my excuses and I finally realized I had to quit running. They put me in places that would take me for free, but I ran away. Then I finally settled down. As long as there was a loop hole, I was climbing through it, until I had no other choice. Alcoholics are not going to quit on their own. You have to be forced to do it. If they didn’t force me with this bracelet, I would still be drinking.”

AFTERCARE

The SJDMC does not have any formal aftercare requirements. However, court compliance managers and treatment providers inform participants that they may come by anytime after program completion.

TREATMENT OVERVIEW

Currently, the SJDMC does not have funding to cover treatment. However, they are seeking a grant from San Joaquin Behavioral Health to assist their participants in paying for treatment. Compliance court managers work with various treatment providers throughout the county. They do their best to refer clients to low- or no-cost treatment. In some cases, jail is used as a place to detox when other formal detox options are not available.

Treatment providers communicate with Track 2 court compliance managers weekly, according to one team member. CCMs ask treatment providers to provide them with a written progress report a week before a participant’s court date. If a client is terminated from treatment or takes a leave of absence, the CCM will be notified. If a client tests positive for drugs, the treatment provider will phone the court compliance manager immediately. If a participant requires residential treatment, the CCMs have a contact person who will pick up the clients and take them to residential treatment.

Service First and Kaiser Permanente were listed as examples of treatment providers who work with the CCMs. Service First offers outpatient treatment and recently opened its own Drunk Driving Education program. Other treatment providers used by the CCMs include Valley Community Counseling, Alcohol and Drug Alternative Program and His Way Recovery.

THE DUI COURT TEAM

The SJDMC is composed of a team of key stakeholders that includes the judge, collaborative courts coordinator, defense attorneys, court compliance managers, probation case manager and community service providers.

Judge

Judge Richard Vlavianos has been the SJDMC DUI Court judge since its implementation. (Prior to its implementation in 2008, DUI offenders would serve a jail sentence with no accountability or treatment program.) There are back-up judges available when needed. The judge is part of the DUI Court team. He attends team meetings where participant progress is discussed and where his role is to facilitate the discussion and bring the team to consensus on issues that arise. In the court hearings he speaks directly to the participants about their progress or lack thereof and delivers incentives and sanctions.

The judge...“I love him. He wants you to be clean. He’s passionate. He’s the best circuit judge out here. He wants you to change. He’s a program judge. It’s too bad other judges can’t be like him.”

— Track 2 Participant

Collaborative Courts Coordinator

The current collaborative courts coordinator works for the Superior Court of California and oversees seven other San Joaquin County problem-solving courts. She has been with SJDMC since it began. She supervises the compliance court managers and is in charge of hiring new compliance court managers.

Court Compliance Managers

The DUI Court has five court compliance managers (CCM), one of whom works part-time. There are two CCMs who work with Track 2 participants and, combined, they manage a caseload of about 60-80 participants. The other three CCMs work with Track 1 clients and can have caseloads ranging from 150 to 240 participants. Track 1 participants are not required to have face-to-face meetings with their CCM. However, they may request referral to services or other information. CCMs are assigned at arraignment and take participants on a rotating basis.

“It helped to have someone listen who understands that it’s hard to go through. Case managers help guide you through it, tell you what you should do and don’t screw up.”

— Track 1 Participant

One CCM characterized his/her job as case management and monitoring. CCMs make sure the participants are following the judge’s orders, including installation and use of the IID, participation in the Alternative Work Program (AWP) and completion of the DDE program. Once a participant completes and pays for the DDE program, the DMV will let him/her know when they are eligible to get their license back. CCMs reported that they help clients jump through DMV hoops after DDE program completion.

Treatment Providers

The SJDMC does not currently contract with any treatment providers. Pacific Valley Recovery Center attends the team meetings for Track 2 participants. That individual works closely with the team and attends court hearings. Other treatment providers that work with the court include Alcohol and Drug Alternative Program, Valley Community Counseling and His Way Recovery. There is no formal treatment referral process in place, but the court compliance managers stay in close contact with treatment providers who work with their clients. The team hopes to secure funding that would help participants pay for treatment services.

Probation

The program's probation officer performs case management with Track 2 non-compliant participants primarily, but she also has a small number of Track 1 clients who are non-compliant, and some individuals who have no other means of alcohol monitoring. When a DUI program participant is referred to her caseload, she performs an assessment used by the probation department (i.e., STRONG). The assessment measures needs and protective factors. Her caseload tends to be about 40 clients. She conducts home visits and performs random UAs for clients (once or twice) while they are on her caseload. She conducts all breathalyzers done in court. The probation officer attends all SJDMC team meetings and court hearings. She can send clients to aggression retention therapy, moral reconnection therapy or recommend other treatment.

Law Enforcement

The Stockton Police Department performs "sting" operations to ensure that participants aren't driving on a suspended license. They visit both the participant's home and his/her place of employment. SJDMC team members report that there has been a significant drop in the number of participants who drive on a suspended license since the DUI program was implemented. The Stockton Police also assist the SJDMC by performing warrant sweeps to bring in defendants who fail to appear for their DUI arraignment. These defendants are arrested by the Police, booked into the county jail and transported to the court by the Sheriff.

Defense Counsel

Offenders have counsel available during their arraignment hearings. Track 2 participants may also receive representation from a Humphreys College, certified law student under the supervision of an attorney who is a professor at the law school, especially in cases where a sanction is expected or the situation merits explanation. Defense counsel is not generally present with Track 1 participants. The DUI Court defense counsel are members of the DUI Court team and attend team meetings to discuss Track 2 participants' progress and responses to participant behavior. They began working with SJDMC in January 2011. Prior to that, there were no defense attorneys and the public defender's office declined participation in the DUI program due to budgetary issues.

Prosecutor

There is no Prosecutor representation on the DUI Court team. The judge reports that the case managers and/or Probation represent the state's interests and he often expresses a concern for public safety when sanctioning participants. Prosecuting attorneys are present at the arraignment hearing and participate in the court proceedings through sentencing, according to team members. They are not part of the DUI team and do not attend monitoring meetings.

Community Partners

Both a representative of alcohol and drug monitoring agencies, and a representative from a treatment provider attend the team meetings for Track 2 participants as well as the court hearings. The judge sometimes asks them questions during the hearing. The representative from alcohol and drug monitoring agencies meets with program participants when they download information from their monitoring unit. Humphreys College has been involved with the SJDMC for a year. The SJDMC is contracted with El Concilio—Council for the Spanish Speaking—to provide DUI Awareness Outreach oriented to the Hispanic Community. In January 2012, the SJDMC population was 54% Hispanic.

DUI COURT TEAM TRAINING

The SJDMC judge, the collaborative courts coordinator, and Track 2 compliance court managers regularly attend national drug court conferences along with the coordinator Helen Ellis and Judge Vlavianos. Drs. David Love and David Mee Lee have provided training on Assessments, Co-Occurring Disorders, Treatment Planning, Addressing Denial and Resistance, Case Management, and Cognitive Behavioral Training.

DUI COURT TEAM MEETINGS

Team meetings where participant progress is discussed and decisions are made around team responses to participant behavior are held weekly for Track 2 participants only, just before the Track 2 court hearing. The SJDMC team members who attend team meetings include the judge, Humphreys College Laurence Drivon School of Law (Humphreys Law School) attorneys and students, the probation case manager, the monitoring representative, treatment provider representative and the Track 2 court compliance manager(s). Others have attended team meetings on occasion, such as the collaborative courts coordinator and community partners, including substance abuse treatment providers. The team members are given a list of participants who will appear on the day's docket. The compliance court manager and probation case manager start by updating the team about the progress of the participant in question. Anyone else who has information about the participant, shares it with the team. Everyone contributes to discussions and comes to a consensus about responses to participant behavior, with the judge having the ultimate say.

DUI COURT HEARINGS

DUI Court hearings are held once every 6 months for Track 1 participants and once per week for Track 2 participants. The Track 1 court session lasts approximately 2 to 2.5 hours. The judge, court compliance managers, probation case manager, defense counsel and community providers attend court hearings. The collaborative courts manager sometimes attends the hearings. At the Track 1 hearing observed during the site visit, there were approximately 75 participants present, 3 excused and 8 no shows. Track 1 participants attend if it is their first, 6-month, or graduation hearing, or if they have been brought in due to non-compliance. The Track 2 court hearing lasted 65 minutes. There were 22 participants in attendance plus 4 that had unexcused absences and 2 that were excused.

"It would really help people out if there were more judges like Judge V. They should just set court over when he can't be there."

— Track 2 Participant

At each court session, the judge calls participants who are completing the program first. He steps off the bench to offer his congratulations, a certificate and a handshake. Next, the judge lists the "A team" members and asks them to stand while the court applauds them. These are participants who are meeting all of their requirements and making outstanding progress in the program. "A Team" participants are called before the remaining participants, one by one, and can leave after their breathalyzer test. The judge shakes their hands and speaks with them at the gate. All cases where defendants are in custody or likely to be remanded are called next from the bench. For the remaining participants, the judge comes back off the bench, shakes their hand and receives the report from the case manager. For the Track 1 monitoring calendar, the judge calls all cases except the graduates from the bench. The judge speaks directly to participants and respectfully al-

lows them to answer his questions. He is thoughtful and supportive as he covers different things with the participant. For many of the reviews, the judge explains to the participant what s/he should do next. For example, the judge may order the participant to attend self-help group meetings until s/he can pay for the DDE program classes. This is not a sanction, but a program requirement. Sanctions are also handed down and all participants are called by the probation case manager to take a breathalyzer test. Participants may leave the courtroom once they have had their review, presented any required documentation (e.g., self-help group attendance) and taken their breathalyzer test. During Track 1 court session, the judge spoke with most participants for less than 2 minutes. However, in the Track 2 court session, the judge spoke with each participant for just under 3 minutes and had a more detailed discussion about their progress on program requirements with each one.

“In the beginning, I didn’t care about talking to the judge because I wasn’t an alcoholic and felt they didn’t understand my situation since I was drinking at home. Then I opened up and realized I was hurting my family.”
 — Track 2 Participant

Family Involvement

Families are not formally part of the SJDMC program, but they do sometimes show up to hearings to support participants.

DRUG TESTING

According to CCMs, participants in treatment may be tested (9-panel) randomly once per month. CCMs will use a continuous testing drug patch in instances where needed. Treatment providers will also test if they suspect use. However, there are no formal program requirements for drug testing while a participant is in treatment. The probation officer typically administers breathalyzers at court hearing for every participant. She also performs UAs for clients on her caseload, once or twice, until they are transferred back to the court compliance manager’s caseload. According to team members there is no testing on the weekends. Participants are responsible for paying for their urinalyses or drug testing patch, though the court purchases some urine test kits with grant funds. Participants do not pay for court testing, though they usually pay for urinalyses at the treatment program.

DUI COURT FEES

The SJDMC does not charge participant fees. However, most of the requirements that participants need to meet in order to successfully complete the program do involve a fee. Participants in both tracks must have an interlock ignition device (IID) installed on their cars within 90 days of entering the program. Installation costs \$100 and there is a \$70-\$100 monthly fee. If the offender does not have a car, s/he must use a transdermal monitoring bracelet, In-Home Monitor, or Soberlink device, which costs up to \$13 per day. The Alcohol Drug Monitoring representative does work with clients who cannot afford the fee and sometimes charges nothing. Participants in both tracks are required to take the statutorily mandated DDE program courses in order to obtain their driver’s license. If the courses are completed, the participant may receive a certification of court completion but will not receive a certificate of completion for the statutorily mandated classes until the program fee is paid. Fees for the DDE programs typically run about \$1,300. The

DUI Court allows participants who can't afford the statutorily mandated classes to attend self-help groups until they can afford the classes.

Focus Group Feedback: Many focus group participants expressed frustration over the fees that were mandated to progress through the court program. One participant said, "The biggest barriers are money and not being able to drive." Another said, "The more money we pay, the more we get depressed, the more likely we are to drink." Another participant described his situation: "What I don't understand is that they make it hard for you to get back on your feet. Right now I'm taking AWP and have six weeks on my monitor. The monitor is \$1000 a month before your class...plus I have to pay AWP. I start at AWP at 6 a.m. and then go to my regular job. I admit I put myself here, but if you want people to get rehabilitated, you need to back off on the money." A participant suggested, "It would be nice if we could do community service to pay our fines. Some way so you feel like you are moving forward." There were a few participants, however, who did not share these sentiments. One person said, "I wouldn't have stopped drinking if I didn't have that bracelet on..." many participants agreed with this idea. He continued, "I needed the structure that this program gave me, but it takes two years to get through the AWP. I'm a changed person now. If AWP could say, instead of paying \$600 per month pay \$200 per month, so I have enough money to pay the classes. The money is what stresses everyone out. It's really hard to do what you are supposed to do when you have to find the money to do it." And finally, a participant disagreed, saying that, "I would be dead without this court. How many times have I got in the car drunk and endangered people's lives? I don't think we should whine about paying the fees. We could have killed somebody. Its attempted murder every time we get in the car drunk."

INCENTIVES, SANCTIONS AND TREATMENT RESPONSES

Incentives tend to be standardized and include a verbal and/or physical pat on the back. The judge also shakes hands with participants who have successfully completed the program or who are doing exceptionally well. Track 2 participants can be sent back to the less intensive Track 1 monitoring when they are doing well. If the participants are put on the probation officer's more intensive supervision, an incentive is to get transferred back down to the court compliance manager.

"This is my 2nd DUI and I didn't have any intention of quitting. I started getting in trouble for little things and they put me in the program. I knew I had gone too far with my drinking. I've been going to AA...if you go with the intention of wanting to change they are helpful." — Track 2 Participant

Sanctions used in the SJDMC are generally standardized and include increased support meetings, more frequent court appearances and/or being put on the probation officer's caseload. Jail is rarely used as a sanction and is reserved for participants who drive illegally or receive a new offense. Shock incarceration

is used in extreme cases, where a participant has missed multiple hearings and must be transported to court by a police officer, for example. When a participant does go to jail, the length of incarceration is up to 3 days. A team member explained that one participant was sanctioned to jail for 3 days but ended up staying only an hour. Team members understand that jail sentences will likely be reduced by jail staff due to overcrowding.

In response to participant behaviors, compliance court managers have discretion and can put participants on the docket at any time. Track 1 participants are on low supervision, however; clients' progress and challenges are reported by the program CCM when they touch base with

their assigned participants. Track 2 participants are typically brought in the same week that problems occur.

If a Track 1 participant is attending self-help groups in lieu of the education program, s/he generally appears in court monthly. If they have not been attending self-help groups they are brought back more frequently and jail may be used as a sanction if compliance cannot be achieved through other means. With DDE programs, any non-compliance generally surfaces at the 6-month hearing. The CCM will make a note in the client’s file asking the judge to admonish him/her. In this case, the judge typically recommends that they be sanctioned to attend self-help groups daily and report to court more frequently. The CCM may recommend that his/her client be transferred to Track 2. If a participant doesn’t get his/her IID, s/he is ordered to have in-home, Soberlink, or transdermal monitoring (SCRAMx). If they can’t afford any of these monitoring options, then they are required to go on probation monitoring (home visits, etc.).

Focus Group Feedback: Focus group participants expressed differing opinions about self-help groups. One participant said he “shouldn’t be court ordered to do AA. It should be voluntary. Voluntary AA people get mad that the court ordered people are there. They want you to be there because you want to be there. I can see that.” Other participants found it helpful and even changed their opinion about self help after they started attending groups.

Note: The court cannot order individuals to attend “AA” because it’s a faith-based organization, but the court orders “outside support meetings” of the participant’s choice.

TERMINATION/UNSUCCESSFUL COMPLETION

The judge makes every effort to guide participants through the program and beyond the challenges they face. He is committed to seeing them complete successfully and wants to give them every opportunity to do this. Thus, unless participants are remanded to jail, no one is terminated from the program until they are finished with the requirements. Some participants have been in the program for 3 years or more. Participants that stay in the program long term say that this is due to the inability to pay for the statutorily mandated requirements.

GRADUATION

To be successfully released from the SJDMC Track 1, participants must complete all track requirements. Further, they must have completed or be enrolled in a DDE program. Requirements are similar for Track 2 participants to finish the program, but also include treatment completion. Alternatively, Track 2 clients who are doing well may be referred back to Track 1, continue with their programming and eventually be released as successful while on Track 1. There are no additional requirements, such as employment, education or housing, to successfully complete the program.

“The program is intended to take you out of your comfort zone and put you into a structured routine. I’d be a fool to go back to drinking again after everything I’ve been through in this program.”
— Track 2 Participant

Participants who are recommended (by their case manager) for successful completion are called to the bench at the beginning of every court hearing. The judge steps down to congratulate them, hand them a certificate and shake their hand. The participant is then excused after taking his/her final breathalyzer test.

DRUG COURT OVERSIGHT COMMITTEE AND OTHER MEETINGS

The SJDMC had an implementation steering committee, but does not currently have a steering committee or an advisory board.

DATA COLLECTED BY THE DRUG COURT FOR TRACKING AND EVALUATION PURPOSES

The SJDMC office coordinator collects and enters data about each participant into an Access database. Information in this database includes the participant's date of birth, race, gender, charge date, program entry and exit dates, exit status, etc. The office coordinator provides reports on program statistics, such as the number of clients who are active, in compliance, out of compliance, inactive, completed and in custody. She also generates recidivism rate charts and graphs based on data from the DMV.

COMMUNITY PARTNERS

Court compliance managers are responsible for connecting clients to needed services. Community partners who attend the court hearings include Pacific Valley Recovery Center and Camtech Monitoring (provides SCRAMx bracelet and other monitoring devices). Humphreys Law School has also partnered with SJDMC and brings certified law students and attorneys to court hearings and team meetings. Track 2 CCMs sometimes refer clients to WorkNet for employment services and Delta College for their GED, if interested. The DUI Court team members have also developed relationships with His Way Recovery (sober living homes), Salvation Army Adult Recovery Centers, Valley Community Counseling, Veterans Affairs and Service First. According to team members, Valley Community Counseling and Service First participate in a twice-annual program meeting. There are five Drunk Driving Education programs in San Joaquin County. SJDMC court compliance managers have information on each one, to help participants choose.

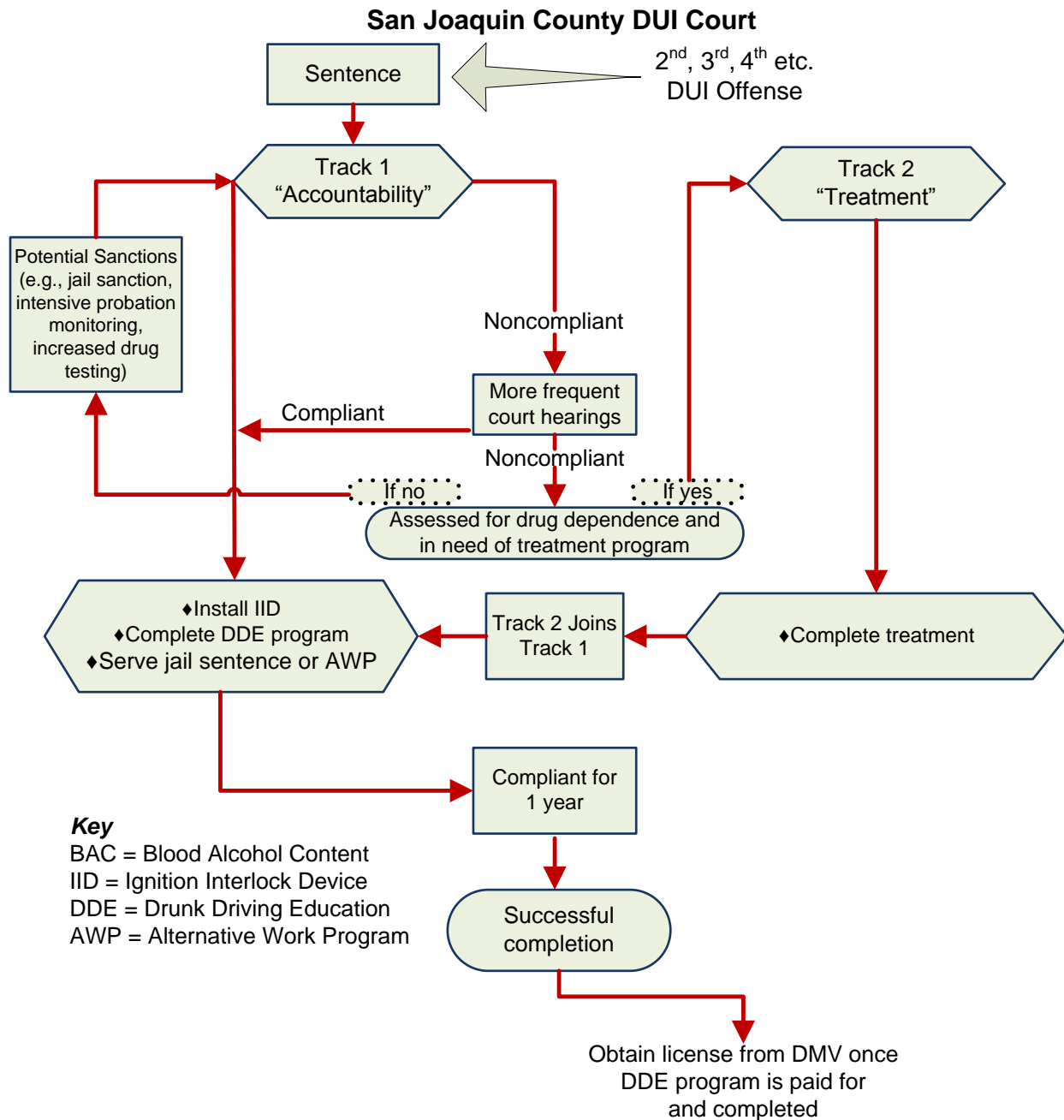
"The structure of the program really worked for me. My 2nd DUI was in Stanislaus and they don't have a program so nothing really happened. Then my third was here, and this program made me stop. I've been 6 months sober now. I needed the structure and the help to stop."
— Track 2 Participant

DUI COURT FUNDING

The SJDMC was implemented through grant funding from the California Office of Traffic Safety, with support from the National Highway Transportation Safety Administration (NHTSA). They recently received a second grant from the NHTSA, in the amount of \$533,000 to help sustain the program through September 2012. The program is currently seeking funding to help pay for increased services to participants.

On the following page is a flowchart, or diagram that illustrates the SJDMC program process in terms of participant flow through the SJDMC system.

SJDMC Flow Chart



CHAPTER 2: OUTCOME EVALUATION

Outcome Evaluation Methods

SAMPLE SELECTION

DUI Monitoring Court Participants. The San Joaquin County DUI Monitoring Court was implemented in January 2008. Beginning in 2008, all individuals with a new DUI conviction in the Stockton Judicial District who had at least one previous DUI conviction within the last 10 years were required to participate in the DUI Monitoring Court. The entire population of SJDMC participants that entered the program since its implementation in 2008 were included in the study analysis.

Comparison Group. Because SJDMC participants include the entire population of individuals convicted of a DUI in Stockton with at least one previous DUI conviction in the last 10 years, the comparison group chosen as the best match for the participants was the population of individuals convicted of a DUI in the City of Stockton with at least one previous DUI conviction in the last 10 years from the time period 2 years before the DUI Monitoring Court was implemented (i.e., in 2006).

These samples are described in more detail later in this section and in the results section of this report.

DATA COLLECTION AND SOURCES

DUI Monitoring Court Database

An Excel spreadsheet is kept by the SJDMC program on participant demographics as well as program start and end dates, status in the program, and case numbers and charges for the DUI that led to participation in the program. This data allowed us to confirm who was participating in the program and to describe the program participant population in more detail.

Criminal Justice Information System (CJIS)

CJIS is a database that combines data from the Sheriff, probation and the courts. The CJIS database provided us with all individuals with a second or greater DUI charge during the 2 years prior to the implementation of the SJDMC program. The data were provided electronically from the court using a query

Department of Motor Vehicles (DMV)

The DMV keeps data on dates of DUI convictions (misdemeanor and felony), accidents (including accidents involving drugs or alcohol), dates of license reinstatement, failures to appear and driving history. Based on a specified DUI conviction date for each individual in our sample, the DMV was able to query driving history (e.g., prior DUI convictions, prior accidents) and recidivism events (e.g., new DUI convictions, accidents, etc.) up to the present.

ANALYSIS DESIGN

Three approaches were conducted for analysis of the San Joaquin DUI Monitoring Court data. All three approaches include only persons whose *index DUI* occurred in Stockton. The *Index*

DUI is defined as the conviction that led to participation in the SJDMC, or in the case of the comparison group, the DUI conviction that would have led to participation in the SJDMC if it had existed in 2006.

Approach 1: This approach selects persons who have an index DUI in 2006 and who also have an index DUI in 2008 that led to their participation in the SJDMC. The 18-month outcomes for the 2006 time period before the SJDMC was implemented were compared to 18-month outcomes after the 2008 program implementation. This is a pre-post design on the same individuals. The analyses were conducted using independent samples t-tests to examine differences on cumulative outcomes 18 months after the DUI reference date. This approach measures whether a person with multiple DUI convictions did better after receiving the program than the same people did without the program. The benefit of this approach is that the two groups are perfectly matched in that they are the same people. The drawback is that the results could be due to previous experience with court system, increased age, and increased readiness to change.

Approach 2: This approach selects persons who have a DUI index date in 2006 and who do *not* subsequently appear in the DUI Monitoring Court after 2008 (i.e., the comparison group) and compares them with persons who have a DUI index date in 2008 or later (i.e., the program group). The analyses were conducted using a univariate analysis of covariance (ANCOVA) to examine differences on cumulative outcomes 18 months after the DUI reference date while controlling for the number of DUIs in the prior 10 years, age at DUI reference date, and gender. This approach measures whether people with DUIs in the time period after DUI Court was implemented did better than similar people with DUIs before DUI Court was implemented. The benefit of this approach is that, since it controls for prior number of DUI incidents, it compares people with similar past experience with court system. The drawback is that it removes from the comparison sample anyone who had DUIs in San Joaquin County after 2008, which may bias the outcomes in the favor of the comparison group.

Approach 3: This approach compares all persons who have a DUI index date in Stockton in 2006 (i.e., the comparison group) with all persons who have a DUI reference date in 2008 or later (i.e., the program group). Thus, Approach 3 combines the comparison group members and participants from Approaches 1 and 2. This approach measures whether all offenders who received their second or greater DUI in the time period before the implementation of DUI Court did better than people who received their second or greater DUI after the implementation of the program (i.e., the analyses examine whether the implementation of DUI Monitoring Court impacted the population of repeat DUI offenders). The analyses were conducted using a univariate analysis of covariance (ANCOVA) to examine differences on cumulative outcomes 18 months after the DUI reference date while controlling for all demographics available in the data—the number of DUIs in the prior 10 years, age at DUI reference date, and gender.

Approaches 1 and 2 showed almost identical results. For this reason, and because Approach 3 includes the entire population of multiple DUI offenders in the selected time periods, the study team selected Approach 3 for the analyses presented in this report. Note that the means presented in these results have been adjusted after controlling for the covariates as described above.

DEMOGRAPHICS OF PROGRAM AND COMPARISON SAMPLES

Table 1 presents demographic characteristics for offenders who were sentenced to traditional probation prior to implementation of the DUI Monitoring Court (the comparison group) and for offenders who were sentenced to participation in the DUI Monitoring Court once it was established. The two groups were similar in gender distribution (about 70% male). However, on average DUI Court participants were older (36.6 years vs. 33.8 years of age), had more prior misdemeanor DUIs (1.19 vs. 1.09), and had more prior felony DUIs (0.01 vs. 0.00). As noted above, these differences were controlled for in the analyses.

Table 1. Participant and Comparison Group Demographic and Court-Related Data

San Joaquin County	DUI Court N = 1,861	Comparison N = 1,525	Significant?
Gender	73% Male 15% Female 12% Unknown	68% Male 14% Female 17% Unknown	No
Average Age at Drug Court Entry	36.6	33.8	Yes***
Average Number of Previous Misdemeanor DUIs	1.19	1.09	Yes***
Average Number of Previous Felony DUIs	0.01	0.00	Yes**

**Yes = ($p < .01$)

***Yes = ($p < .001$)

Due to more detailed data kept by the program, additional information was available on the SJDMC participants than on the comparison group, including demographics for Track 1 and Track 2 participants. Table 2 describes the population of DUI offenders that have entered the SJDMC since its inception, and illustrates the differences between the two tracks of participants. Track 2 participants are significantly more likely to be black, and significantly less likely to be Hispanic. Track 2 participants also have significantly more felony and misdemeanor DUIs. Although not significant, the numbers show that Track 2 participants are more likely to be male and single, and less likely to be employed. These findings, particularly the more extensive DUI history, are consistent with participants who have already demonstrated non-compliance with program requirements and who are assessed as drug dependent.

Table 2. Track 1 and Track 2 Demographic and Court-Related Data

San Joaquin County	Track 1 N = 1,058	Track 2 N = 153	Significant?
Gender	71.7% Male 15.0% Female 13.2% Unknown	76.5% Male 14.4% Female 9.2% Unknown	No
Employment status	54.0% Employed 46.0% Not employed	45.2% Employed 54.8 % Not employed	No†
Ethnicity	13.2% African American 5.6% Asian 21.6% Caucasian 55.8% Hispanic 0.7% Native American 1.6% Other 1.6% Pacific Islander	19.6% African American 3.3% Asian 30.1% Caucasian 43.8% Hispanic 0.7% Native American 2.6% Other 0.0% Pacific Islander	Yes**
Marital status	56.2% Single 28.6% Married 15.2% Not married	61.7% Single 28.1% Married 10.2% Not married	No
Highest education	36.9% No HS or did not complete 32.9% HS or GED 30.2% College or more	38.6% No HS or did not complete 33.3% HS or GED 28.0% College or more	No
Average Age at Drug Court Entry	36.6	36.6	No
Average Number of Previous Misdemeanor DUIs	1.17	1.34	Yes**
Average Number of Previous Felony DUIs	.00	.03	Yes***

† p = .064

**Yes = (p < .01)

***Yes = (p < .001)

Outcome Results

This section presents the outcome results of the analysis of data from the San Joaquin County DUI Monitoring Court program based on five research questions. These questions concern the differing rates of program success and recidivism (new DUI convictions) experienced by the program participants and the comparison group as described in the methods section above.

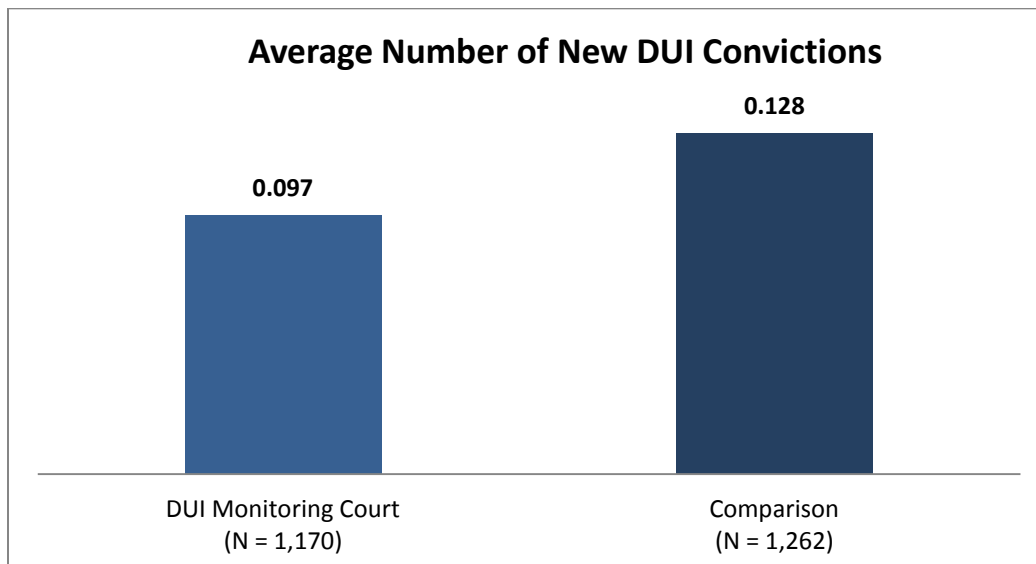
RESEARCH QUESTION #1: WHAT IS THE IMPACT OF PARTICIPATION IN THE DUI MONITORING COURT ON RECIDIVISM (NUMBER OF NEW DUI CONVICTIONS) COMPARED TO TRADITIONAL COURT PROCESSING?

1a. Does participation in the DUI Monitoring Court reduce recidivism (the number of new DUI convictions)?

YES. SJDMC participants were significantly less likely to have a new DUI conviction than DUI offenders on traditional probation.

When the number of new DUI convictions that occurred within 18 months of the date of index arrest was calculated, the comparison group had significantly more new DUI convictions than SJDMC participants ($p < .05$), (see Figure 1a).

**Figure 1a. Average Number of Alcohol and Drug Convictions
18 Months After Index DUI Conviction Date**



$p < .05$

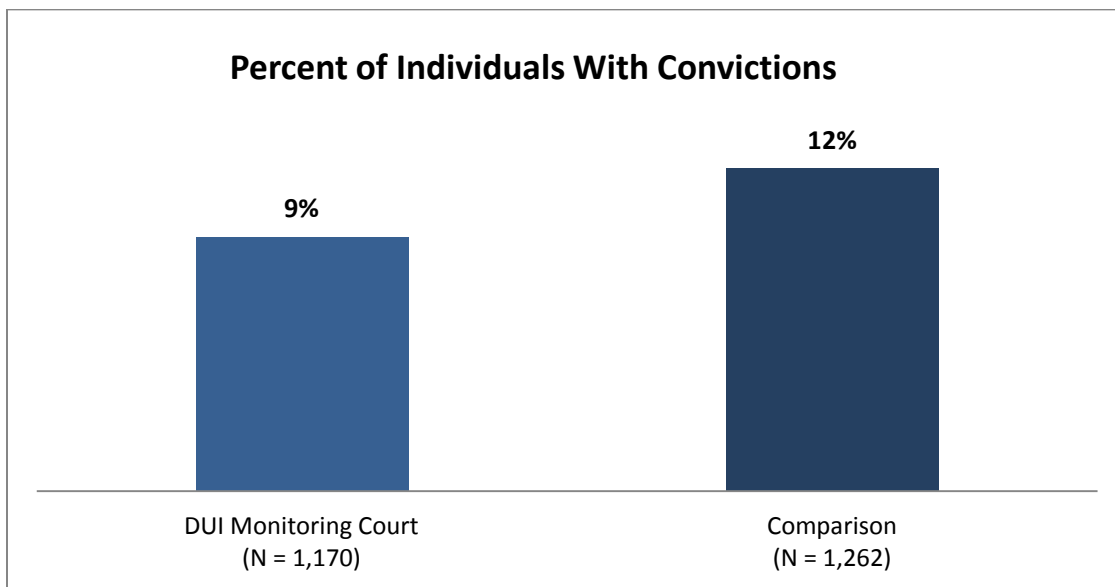
This comparison shows that offenders on traditional probation were re-convicted for a new DUI about 32% more often in the 18 months after their index arrest than those who participated in the DUI Monitoring Court.

1b. Does participation in DUI Monitoring Court lead to a lower recidivism rate (the percent of participants who are re-convicted) compared to traditional court?

YES. Fewer SJDMC participants were rearrested in the 18 months after their eligible DUI than those on traditional probation.

Figure 1b shows that a greater percentage of comparison group offenders were re-arrested than were SJDMC participants. Of the comparison group, 12% of the offenders were re-arrested within 18 months after their index arrest, compared to 9% of the DUI Monitoring Court participants. Although not statistically significant, the difference is large enough to warrant consideration ($p = .058$).

Figure 1b. Percent of Individuals with New DUI Convictions 18 Months after Index DUI Conviction Date



$p = .058$

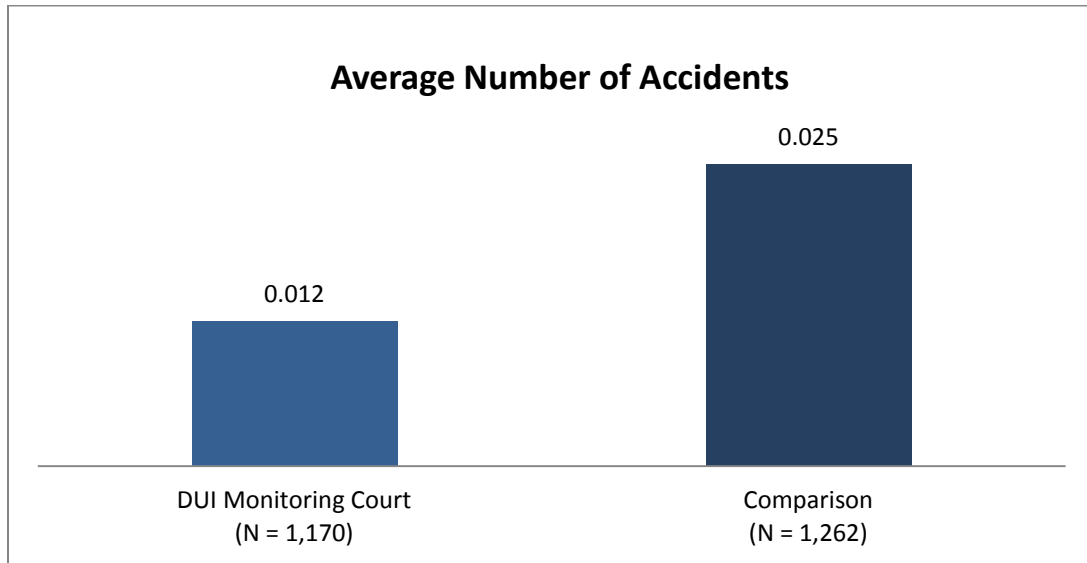
RESEARCH QUESTION #2. DOES PARTICIPATION IN DUI MONITORING COURT LEAD TO FEWER TRAFFIC ACCIDENTS?

2a. Does Participation In DUI Monitoring Court lead to fewer alcohol- or drug-involved accidents compared to the traditional court and probation process?

YES. SJDMC participants had half as many alcohol- or drug-involved accidents than those on traditional probation.

Figure 2a shows that persons in the comparison group had significantly more alcohol- or drug-involved accidents 18 months after their index arrest than did persons participating in DUI Monitoring Court. The average number of alcohol- or drug-related accidents was 0.025 for the comparison group, and 0.012 for the program group ($p < .05$). Although these numbers are small, they represent events that can have serious social and financial costs, and thus are important to reduce to as small a number as possible. Note that multiplying the average number of accidents by the number of individuals in the sample results in a total of 32 accidents for those on traditional probation compared to just 14 for those in the DUI Monitoring Court.

Figure 2a. Average Number of Accidents Associated With Had Been Drinking or Using Drugs 18 Months After Index DUI Conviction Date



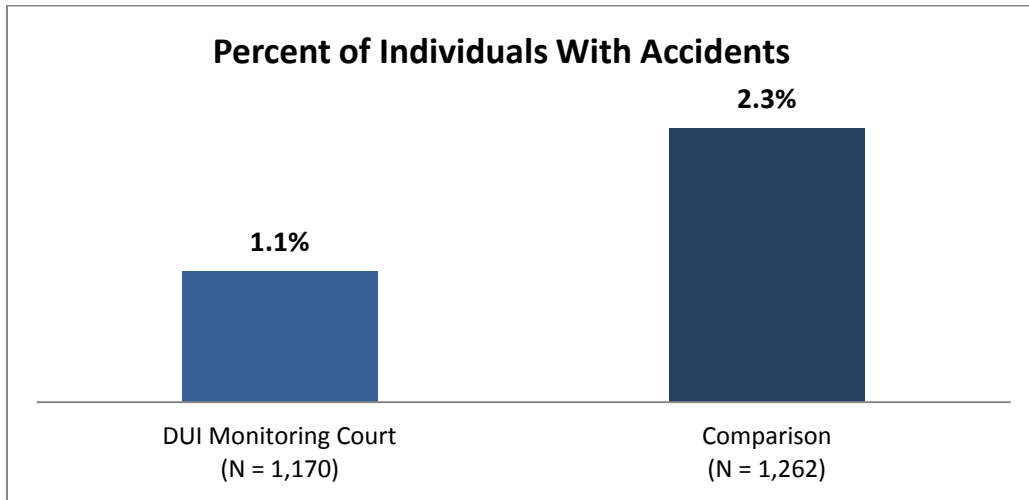
$p < .05$

2b. Does participation in DUI Court lead to a lower accident rate (percent of people who get in alcohol- or drug-involved accidents) compared to traditional court?

YES. Less than half as many SJDMC participants were in accidents compared to those on traditional probation.

Figure 2b shows that persons in the comparison group had a significantly greater rate of alcohol- or drug-involved accidents 18 months after their index arrest than did persons participating in DUI Monitoring Court. Of the comparison group members, 2.3% had an involved accident 18 months after their index arrest, compared to 1.1% of the DUI Monitoring Court participants ($p < .05$). Again, although these numbers are small, they represent events that can have serious social and financial costs and thus are important to reduce to as small a rate as possible.

Figure 2b. Percent of Accidents Associated With Had Been Drinking or Using Drugs 18 Months After Index DUI Conviction Date



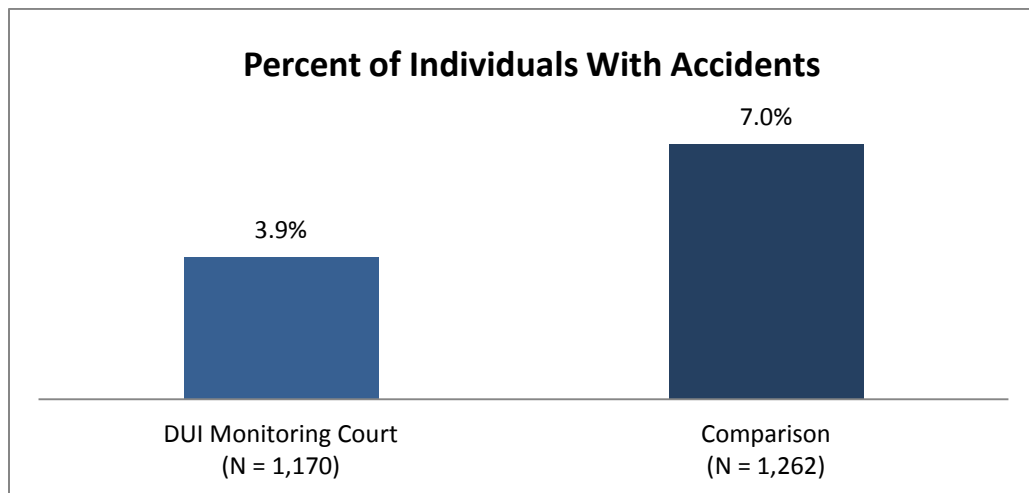
$p < .05$

2c. Does participation in DUI Court lead to a lower rate of accidents, in general (regardless of if they are alcohol related), compared to traditional court (the percent of participants who have an involved accident)?

YES. SJDMC participants were significantly less likely to get in accidents compared to those on traditional probation.

Figure 2c shows that persons in the comparison group had a significantly greater rate of accidents, in total, 18 months after their index arrest than did persons participating in DUI Monitoring Court. Of the comparison group members, 7.0% had an accident 18 months after their index arrest, compared to 3.9% of the DUI Monitoring Court participants ($p < .01$).

Figure 2c. Percent of Individuals With Accidents (Total) 18 Months After Index DUI Conviction Date



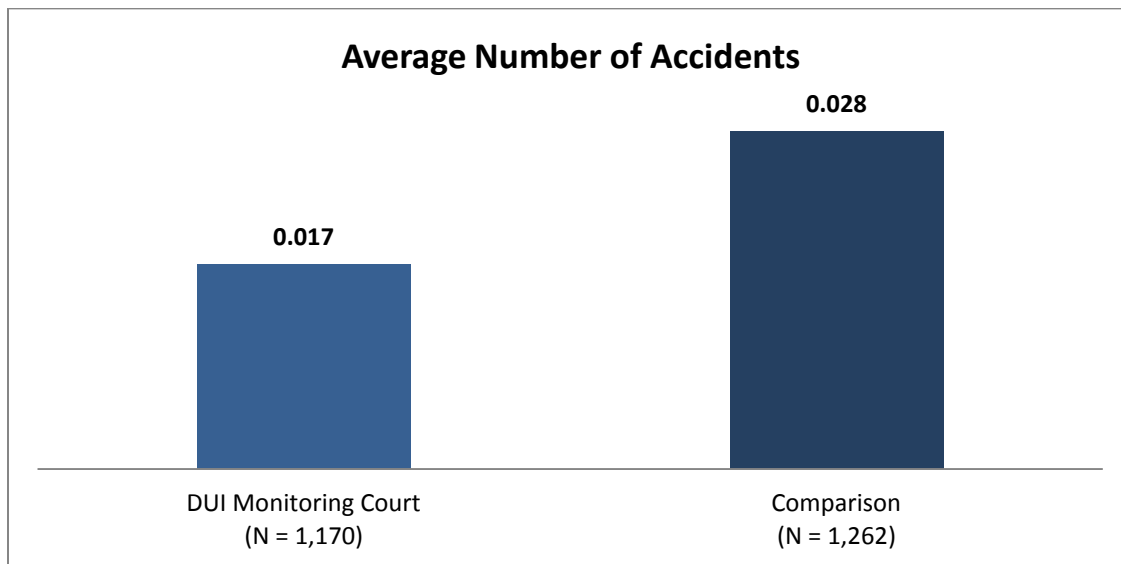
$p < .01$

2d. Does participation in DUI Court lead to fewer accidents with injury compared to traditional court?

YES. SJDMC participants had fewer accidents with injury compared to those on traditional probation.

Figure 2d shows that persons in the comparison group had more accidents with injury 18 months after their index arrest than did persons participating in DUI Monitoring Court. The average number of accidents was 0.028 for the comparison group, and 0.017 for the program group. Although not statistically significant, the difference is large enough to warrant consideration ($p = .076$) as accidents with injuries represent an even higher cost to citizens and a larger threat to public safety.

Figure 2d. Average Number of Accidents With Injury 18 Months After Index DUI Conviction Date



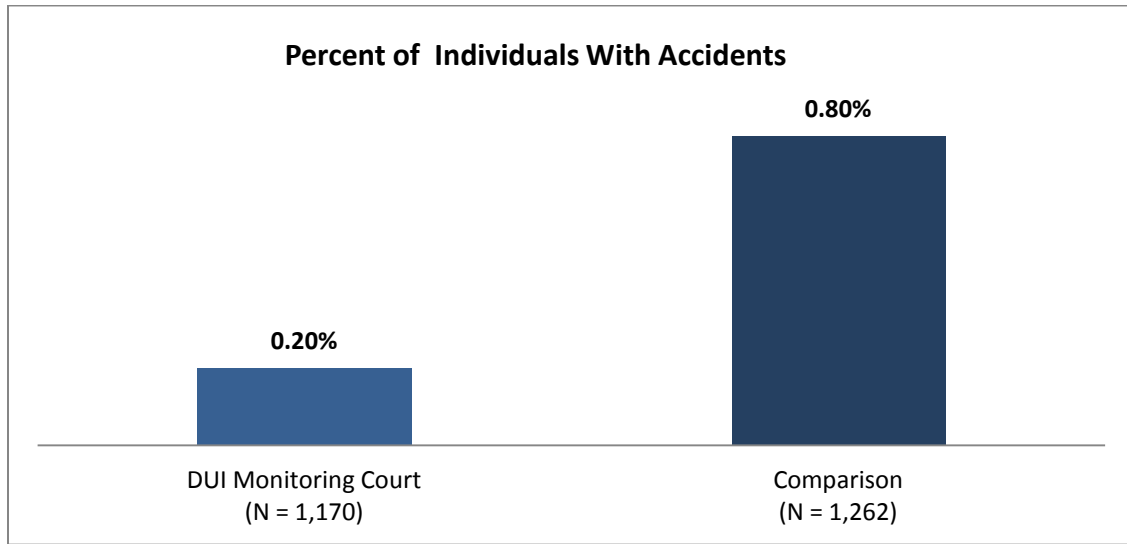
$p = .076$

2e. Does participation in DUI Court lead to a lower rate of accidents associated with DUI conviction compared to traditional court (the percent of participants who have an accident associated with conviction)?

YES. Fewer SJDMC were in accidents associated with a new DUI conviction than those on traditional probation.

Figure 2e shows that persons in the comparison group had a greater rate of accidents associated with DUI conviction 18 months after their index arrest than did persons participating in DUI Monitoring Court. Of the comparison group members, 0.8% had an accident 18 months after their index arrest, compared to 0.2% of the DUI Monitoring Court participants. Although not statistically significant, the difference is large enough to warrant consideration ($p = .060$).

Figure 2e. Percent of Individuals with Accidents Associated With DUI Conviction 18 Months After Index DUI Conviction Date



p = .060

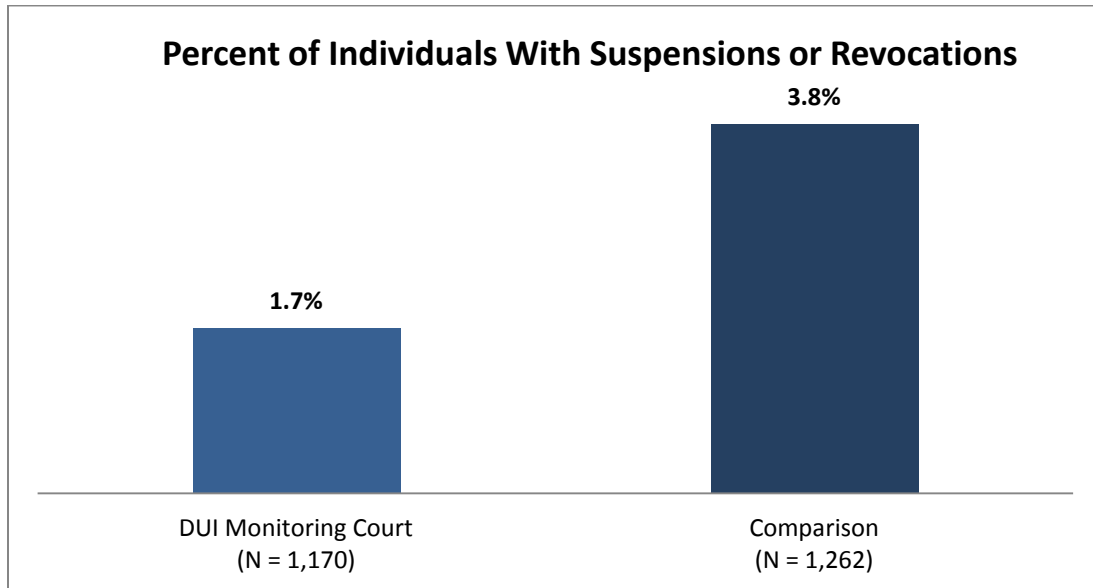
RESEARCH QUESTION #3. DOES PARTICIPATION IN DUI COURT LEAD TO A LOWER RATE OF DRIVERS LICENSE SUSPENSIONS OR REVOCATIONS?

Does participation in DUI Court lead to a lower rate of driver’s license suspensions or revocations compared to traditional court (the percent of participants who have their license suspended or revoked)?

YES. Fewer SJDMC participants had their driver’s license suspended or revoked in the 18 months following their index DUI than those in the comparison group.

Figure 3 shows that persons in the comparison group had a significantly greater rate of driver’s license suspensions or revocations 18 months after their index arrest than did persons participating in DUI Monitoring Court. Of the comparison group members, 3.8% had their license suspended or revoked, compared to 1.7% of the DUI Monitoring Court participants (p < .01). Again, although these numbers are small, they represent events that can have serious social and financial costs and thus are important to reduce to as small a rate as possible.

Figure 3. Percent of Suspensions or Revocations Due to Noncompliance With the DUI Program 18 Months After Index DUI



$p < .01$

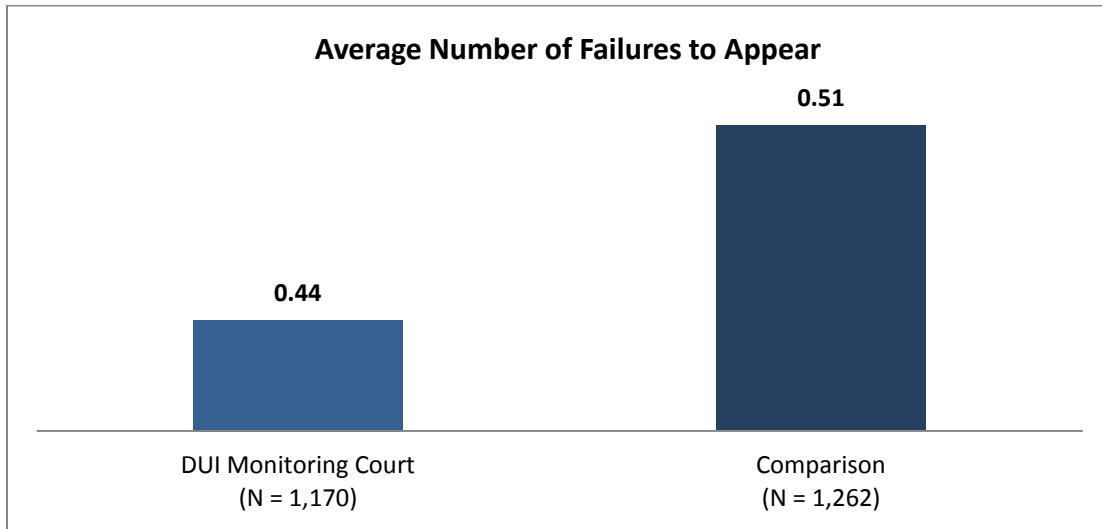
RESEARCH QUESTION #4. DOES PARTICIPATION IN DUI COURT LEAD TO GREATER COMPLIANCE WITH THE REQUIREMENTS OF THE COURT AND THE CONDITIONS OF PROBATION?

4a. Does Participation in DUI Monitoring Court reduce instances of failure to appear compared to traditional court?

YES. Individuals in the traditional court/probation system were more likely to fail to appear in court than participants in the SJDMC program.

Figure 4a shows that persons in the comparison group had more instances of failure to appear 18 months after their index arrest than did persons participating in DUI Monitoring Court. The average number of instances was 0.509 for the comparison group, and 0.440 for the program group ($p < .05$).

Figure 4a. Average Number of Failures to Appear After Index DUI Conviction Date



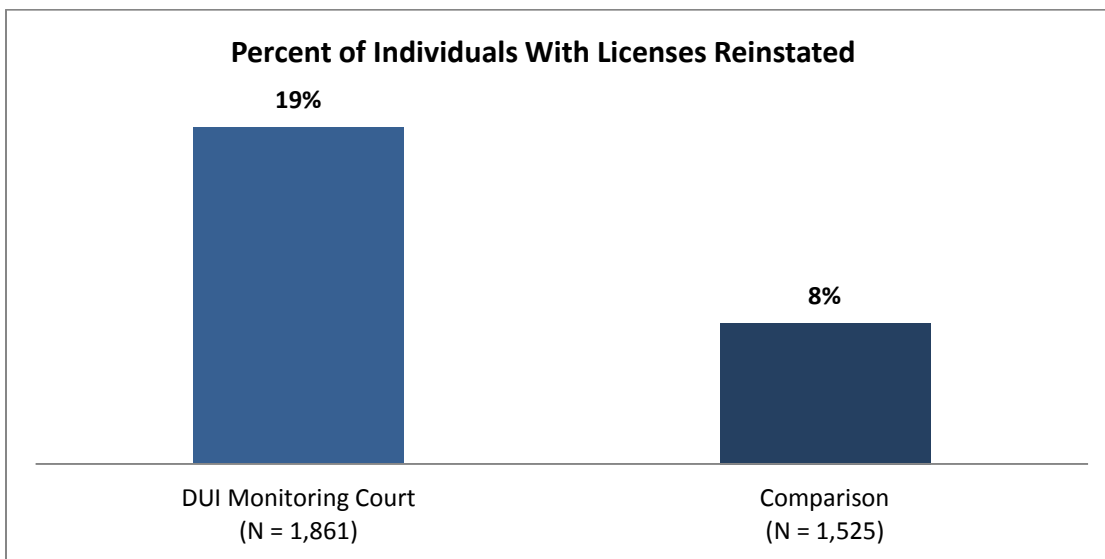
p < .05

4b. Does participation in DUI Court lead to increased rate of license reinstatement (the percent of people whose license is reinstated) compared to traditional court?

YES. More than twice as many SJDMC participants got their license reinstated than the comparison group (individuals in the traditional court and probation system).

Figure 4b shows that persons in the comparison group had fewer instances of having their license reinstated than did persons participating in DUI Monitoring Court. Of the comparison group members, 8% had their license reinstated, compared to 19% of the DUI Monitoring Court participants.

Figure 4b. Percent of Individuals Whose License Was Reinstated



p < .001

RESEARCH QUESTION #5: ARE THERE PARTICIPANT CHARACTERISTICS THAT PREDICT RECIDIVISM (RE-ARRESTED VS. NOT RE-ARRESTED)?

Table 3 details demographic and court-related data comparing participants who are re-arrested and who are not re-arrested, as defined by whether or not they were re-arrested for misdemeanor DUI in the 18 months after their index arrest.³ As may be seen in the table, those who were not re-arrested were more likely to be female, and to be older, than those who were re-arrested. Although not statistically significant, those who were not re-arrested on average had slightly fewer DUI and alcohol reckless convictions in the 10 years prior to their index arrest.

Table 3. Track 1 and Track 2 Demographic and Court-Related Data

San Joaquin County	Not re-arrested N = 2,559	Re-arrested N = 277	Significant?
Gender	81.9 % Male 18.1 % Female	89.2 % Male 10.8 % Female	Yes**
Average Age at DUI Court Entry	35.3	33.7	Yes*
Average Number of 10-year Prior DUIs and Alcohol Reckless Convictions	1.63	1.73	o†
Average Number of 2-year Prior Misdemeanor DUIs Convictions	1.13	1.16	No
Average Number of 2-year Prior Felony DUIs Convictions	0.0	0.0	No

† Trend ($p = .074$)

*Yes = ($p < .05$)

**Yes = ($p < .01$)

³ Comparisons using categorical variables were made using chi-square analysis. Comparisons using continuous variables were made using analysis of variance (ANOVA).

OUTCOME EVALUATION SUMMARY

This outcome evaluation measured whether all offenders who received their second or greater DUI in the time period before the implementation of DUI Court did better than people who received their second or greater DUI after the implementation of the program. That is, whether the implementation of DUI Monitoring Court impacted the population of repeat DUI offenders. The analysis included 1,170 DUI Monitoring Court participants and 2,262 comparison individuals who experienced the traditional court and probation system, before the implementation of the SJDMC program.

Results showed that in the 18 months following their index DUI and subsequent entry into the SJDMC program, DUI Monitoring Court Participants:

- Had significantly fewer new DUI convictions
- Had significantly fewer accidents, including those related to drug and alcohol consumption and those resulting in injury
- Were significantly more likely to comply with court, probation, and DMV requirements
- Were significantly more likely to regain their driver's license

The San Joaquin DUI Monitoring Court model shows substantial promise for increasing public safety in reducing drunk driving and automobile accidents, the second largest cause of accidental death in the nation (Warner, Chen, Makuc, Anderson, & Miniño, 2011).⁴

⁴ Poisoning is now the leading cause of death from injuries in the United States and nearly 9 out of 10 poisoning deaths are caused by drugs.

CHAPTER 3: BEST PRACTICES REVIEW

BACKGROUND

All people who enter the DUI monitoring program are automatically given *Track 1* status and are required to follow the conditions of their probation and to show up in court 3 times over the course of a year to demonstrate that they are following these conditions. Persons who have trouble adhering to the requirements of the program are assessed for drug and alcohol dependence. If they are assessed as dependent, the judge places them into *Track 2* status, where they get substance use treatment, more court sessions and meetings with their case manager, and more frequent drug tests.

Table 4 provides recidivism results of persons in the two tracks. These results show rates (percent of persons) for different types of recidivism events. Because the two tracks include persons with different characteristics, no statistical comparison is made between the two groups. In addition, because it is not possible to determine which individuals in the comparison group would have been assessed as eligible for Track 2 and in need of treatment it was not appropriate to compare outcomes for Track 2 to the comparison individuals.

Table 4. Track 1 and Track 2 Recidivism Data 18 Months After Index DUI Conviction Date (Percent of Persons)

San Joaquin County	Track 1 N = 993	Track 2 N = 136
Percent of persons with misdemeanor DUIs	6.3	25.7
Percent of persons with alcohol or drug major convictions	7.3	29.4
Percent of persons with accidents associated with alcohol or drug use	0.8	2.9
Percent of persons with Drivers license suspensions or revocations	1.2	1.5
Percent of persons with any accident	3.2	5.9
Percent of persons with an injury accident associated with a DUI or reckless conviction	0.2	0.7
Percent of persons whose license was reinstated (N = 1058, 153)	24.8	10.5

Table 4 shows that Track 2 participants are 4 times more likely to be reconvicted for a new DUI, and 3.5 times more likely to be in an accident that involves drug or alcohol use. Track 2 participants are also 3 times as likely to have an accident with an injury and half as likely to have their license reinstated. Given that Track 2 individuals are participants who have already demonstrated

non-compliance with program requirements and have been assessed as drug or alcohol dependent, it is unsurprising that outcomes for Track 2 participants are worse than participants in Track 1. However, it is possible that Track 2 outcomes could be improved, approaching Track 1 participant outcomes, if the program is able to find the resources to enhance their Track 2 process. Although the Track 2 program is already implementing some best practices, there are additional drug court best practices that could be added to improve the process. The drug court model is specifically designed for high-risk, drug-dependent individuals like those in Track 2. Aligning the Track 2 program more closely with the drug court model, and particularly the research-based best practices, may have a profound and positive effect on Track 2 participant outcomes.

Following is a list of research-based drug court best practices with a discussion of SJDMC practices and recommendations for Track 2 program enhancements.

DRUG COURT BEST PRACTICES

The specific research on best practices referenced in this review includes a study of 69 adult drug courts (16,317 drug court participants and 16,402 comparison group members) across the United States (Carey et al., 2012). All 69 drug courts had detailed process, outcome and cost evaluations performed by NPC Research. Analyses were performed to determine which practices performed by these drug courts were significantly related to the most positive outcomes, specifically, reductions in recidivism and reductions in cost (or increases in cost savings). In addition, previous research on best practices is also referenced in this report including a study in 18 drug courts (Carey, Finigan, & Pukstas, 2008) and studies of adult, family and juvenile courts in Oregon, California, and Maryland (Carey, Marchand, & Waller, 2006; Carey, Waller, & Weller, 2011; Carey & Waller, 2011; Mackin et al., 2009). For the purposes of this report, 20 practices were selected from this research as being relevant to the San Joaquin DUI Monitoring Court program. The majority of these practices have also been shown in other research to be related to better outcomes for drug court participants and/or drug-dependent individuals (e.g., Marlowe, Festinger, Lee, Dugosh, & Benasutti, 2006; Schaffer, 2006; Carey, Finigan, & Pukstas, 2008; Rempel & Zweig, 2011).

SJDMC BEST PRACTICES RESULTS AND RECOMMENDATIONS

The purpose of the best practices review is to provide information to the SJDMC that will help them enhance Track 2 of the program so that it more closely follows the drug court model, which is appropriate for treating offenders that have demonstrated difficulty complying with low level supervision and drug or alcohol dependence. The results of the SJDMC best practices assessment are presented below. The best practice is listed with the accompanying research followed by a description of the relevant SJDMC process. Commendations and recommendations for the SJDMC program are included under each best practice. Following these best practices may help Track 2 participant outcomes to look more like Track 1 participant outcomes (as presented in Table 4).

Best Practice

All Core Team members attend staffing meetings and court sessions.

Drug courts where all six core team members (the judge, prosecutor, defense attorney, probation, coordinator, and treatment) attend staffing meetings had 50% greater reductions in recidivism and 20% higher cost savings.

Programs where all core team members attended court sessions (the judge, attorneys, treatment, probation and coordinator) had 35% greater reductions in recidivism and 36% higher cost savings.

- The San Joaquin DUI Monitoring Court (SJDMC) holds team staffing meetings weekly for Track 2 participants. The judge, Humphreys Law School attorneys and students, the probation case manager, the monitoring representative, a treatment representative and the Track 2 court compliance manager(s) attend these meetings regularly. Others have attended team meetings on occasion, such as the collaborative courts coordinator and community partners, including other substance abuse treatment providers.
- The judge, court compliance managers, probation case manager, defense counsel and community providers, including a treatment representative, attend court hearings. The collaborative courts manager sometimes attends the hearings.

Commendation: The SJDMC team includes representatives from a range of collaborating agencies which may contribute to more positive outcomes for participants, according to research. The SJDMC demonstrates a commitment to developing and maintaining an integrated DUI Monitoring Court team and working toward the best-practice guidelines for achieving success in this component.

Commendation: In addition, in circumstances where no public defender was available to be on the team, the program has shown considerable ingenuity in obtaining defense counsel for participants through a private attorney, who is also a law professor, and his students. This also provides the opportunity for law students to learn how problem-solving courts work, as well as seeing firsthand the benefits of this model.

Commendation: The SJDMC judge encourages and admonishes participants based on reports from each individual's court compliance manager. The probation case manager may also report on individual progress and administers breathalyzers at each court session. The Humphreys Law School defense counsel interact with select clients and explain any extenuating circumstances to the court. If a participant is in treatment, the treatment representative may report on his/her progress. Each team member who attends the SJDMC court sessions adds an important perspective and can improve outcomes by adhering to this best practice.

Recommendation: In the drug court model, a law enforcement representative and a prosecuting attorney are integral team members. The SJDMC team should continue to work toward obtaining a prosecutor and law enforcement representative to participate. Research has shown that drug courts that have law enforcement attend staffings and court sessions had 88% greater reductions in recidivism and 64% higher cost savings.

Regarding attorneys, it is important to remember, especially for those programs that don't have both attorneys participating fully, that the goal of problem-solving courts is to change behavior by coercing treatment, while protecting both participant rights and public safety. Punishment takes place at the initial sentencing. After punishment, the focus of the court shifts to the application of science and research to produce a clean, healthy citizen where there was once an addicted criminal, while protecting the constitution and the constitutional rights of the client.

The role of the defense counsel continues to be advocacy as long as it does not interrupt the behavior modification principles of timely response to participant behavior. Advocacy takes different forms and occurs at different times, but it is equally powerful and critical in the drug court

setting regardless of whether the program is pre-adjudication or post-adjudication. Drug courts are not due process shortcuts; they are the courts and counsel using their power and skills to facilitate treatment within constitutional bounds while monitoring the safety of the public and the client participant. Drug court clients are seen more frequently, supervised more closely, and monitored more stringently than other offenders. Thus they have more violations of program rules and probation. Counsel must be there to rapidly address the legal issues, settle the violations, and move the case back to treatment and program case plans.

The role of the prosecution is still to protect public safety, including that of the client. Prosecutors have tremendous power. It can be used to facilitate the goals of the court. The power can be used to praise, engage, and encourage participants in the court. Prosecutors can be excellent participants in reinforcing incentives, or in instilling hope on “bad days.” Sometimes a simple “I am glad to see you,” makes a difference when it comes from such an unusual source.

Prosecution and defense attorneys should not engage in activities with the court without the other attorney being present. Having prepared counsel on both sides present in court allows for contemporaneous resolution, court response, and return to treatment. Working together, attorneys can facilitate the goals of the court and simultaneously protect the client and the constitution.

Best Practice

Law enforcement is a member of the drug court team.

Drug court programs where law enforcement was a member of the team had 87% greater reductions in recidivism and 44% higher cost savings (Carey et al., 2012).

- The Stockton Police assist the SJDMC by performing warrant sweeps to bring in defendants who fail to appear for their DWI arraignment. They also perform “sting” operations to ensure that participants aren’t driving on a suspended license. They visit both the participant’s home and his/her place of employment. However, there is not a law enforcement representative on the SJDMC team.

Recommendation: As recommended above, while it is commendable that the SJDMC team has a good working relationship with the Stockton Police, the program could be further improved by the addition of a law enforcement representative on the team, in particular in attendance at staffing meetings and court sessions. The role of this representative could be to support probation and parole officers in conducting home visits to check on program compliance of participants. They can also learn to recognize participants on the street and can provide an extra level of *positive* supervision. To the extent possible, the team should make certain that local and state law enforcement understand their participation with SJDMC as a cost-effective way to deal with repeat offenders who have substance abuse problems. Additionally, the program should be seen as an avenue for addressing quality of life issues and preserving public safety. Research in this area has shown that greater law enforcement involvement significantly increases graduation rates, reduces recidivism and increases cost savings.

Best Practice

There are 50 days or less between participant arrest and program entry.

Drug courts that had 50 days or less between arrest and program entry had 63% greater reductions in recidivism.

- According to staff, the average length of time between the offense and DWI court *referral*, which usually occurs when the individual admits the offense at arraignment, is approximately 15 to 30 days following the arrest. The time between referral and entry into the program ranges from 0 to 7 days. Overall, the data from CJIS also shows that the average time from the DUI incident to program entry is well under 50 days.

Commendation: The SJDMC’s time from arrest to drug court entry is approximately 30 days. According to research (Carey et al., 2012), the optimal length of time from arrest to drug court entry is no more than 50 days. The SJDMC is commended for this practice since prompt program placement has been shown to lead to reductions in recidivism. The program should monitor the referral process and continue to keep the time from arrest to program entry as short as possible.

Best Practice

Program caseload (number of individuals actually participating at any one time) is less than 125.

Drug courts with one judge and with caseloads of 125 participants or less had 5 times greater reductions in recidivism and 35% greater cost savings.

- Since the purpose of the DUI Monitoring Court is to take all repeat DUI offenders in the population, it is not possible to keep their total program caseload lower than 125. The typical active program caseload is approximately 600 individuals. However, it is Track 2 that is the focus of the drug court model, and that track typically has much fewer than 100 active individuals at one time.

The best practice on a program caseload of less than 125 should not be taken as a mandate that programs cannot “go to scale” and serve the entire eligible population. The number 125 should be considered a “trigger” for larger programs to look at their other practices and ensure they are able to handle a greater number of participants. When drug courts with more than 125 were compared to those with fewer than 125, results showed that the larger courts tended to do drug tests less frequently, were less likely to have all team members attend staffings and court sessions, tended to provide less treatment, had status review hearings less frequently and the judge spent less time per participant during court hearings. So, the key is not really that programs must not be greater than 125 to be a good drug court, it’s that larger programs need to maintain standards on all the other best practices in order to keep the quality of the services strong.

The SJDMC has five court compliance managers (CCM); one of whom works part time. There are two CCMs who work with Track 2 participants—those who most closely resemble drug court participants in risks and needs. Combined, Track 2 CCMs manage a caseload of about 60-80 participants.

Commendation: The program is commended for maintaining adequate staff resources to provide intensive monitoring and case management for Track 2 participants.

Best Practice

The drug court works with two or fewer treatment agencies.

Programs that work with two or fewer treatment agencies had 74% greater reductions in recidivism than those that work with greater numbers of treatment agencies.

- Most substance abuse treatment for SJDMC Track 2 participants is administered through a variety of treatment providers (11+). The court does not contract directly with any treatment providers, nor do they have funding to pay for treatment. The program uses providers that do not charge participants or that take participant insurance. There are often extended waits for residential treatment beds. The SJDMC has applied for funding through the San Joaquin Behavioral Health to assist their participants in paying for treatment. Compliance court managers work with various treatment providers throughout the county.

Recommendation: Since research has demonstrated that drug courts with one or two treatment providers or a single central agency coordinating treatment results in more positive participant outcomes, it is recommended that the program work to find funding so that they have the ability to choose treatment providers and to select one treatment agency to oversee treatment across agencies.

Commendation: Given the lack of funding for treatment, the SJDMC is commended for having a representative from the Pacific Valley Recovery Center on the team. They are also commended for seeking grant funding to make sure that participants obtain necessary treatment.

Best Practice

The minimum length of the drug court program is 12 months or more.

Drug court programs that were designed to last 12 months or longer had 57% greater reductions in recidivism than programs lasting shorter durations.

- Repeat DUI offenders in the Stockton Judicial District are placed into either the SJDMC Accountability Track (1) or the Treatment Track (2). Both tracks take a minimum of 12 months to complete. Participants in Track 1 are not formally referred for substance abuse treatment. According to focus group participants, time in program was typically more than 12 months. In some cases, it had been several years.

Commendation: Best practices research shows that drug court programs that required at least 12 months for participants to complete had significantly better outcomes (reductions in recidivism) than programs that lasted less than 12 months (Carey et al., 2012). It is important for participants to have enough time in the program to complete treatment, stabilize, and get connected to a recovery network in the community.

Best Practice

In the first phase of drug court, drug tests are collected at least 2 times per week.

Drug courts that test at least 2 times per week had 61% higher cost savings. Further, using an ankle or tether ensures even more frequent testing, and having an ignition interlock device (IID) ensures testing when it is most important for public safety.

- The probation officer typically administers breathalyzers at court hearings for every participant. Participants may leave once the results have been reported to the court. The pro-

bation officer also performs UAs for clients on her caseload, once or twice, until they are transferred back to the court compliance manager's caseload. The case managers have access to transdermal monitoring bracelet results if needed. However, the court does not typically conduct testing for substances other than alcohol. According to team members there is no testing on the weekends.

Recommendation: Although it is important that the SJDMC continue consistently administering breathalyzer tests to participants at their court hearing, which offer immediate results, there are no formal program requirements for drug testing while a participant is in Track 2 or on the probation officers caseload. Research shows that drug courts that test at least 2 times per week have significantly better outcomes (Carey, Finigan, & Pukstas, 2008). We recommend that the SJDMC conduct regular random drug testing of its Track 2 participants at least twice per week, particularly in the first months of Track 2 participation, and use urine drug testing methods as well as breathalyzers. The SJDMC should also test for substances other than alcohol. Although there is a common belief that some instant tests are less accurate than lab tests, there are instant tests that are extremely accurate and they provide immediate results, and can be found at a very low cost. In addition, there are options for on-site analysis equipment at reasonable prices that can provide extremely accurate and instant results.

Best Practice

Participants are expected to have greater than 90 days clean (negative drug tests) before graduation.

This practice is linked to 50% greater increases in cost savings and 164% greater reductions in recidivism.

- The program currently has a formal policy in place of at least 120 days clean before the participant can graduate.

Commendation: Research has shown that the longer clients are required to be clean before graduation, the longer they stay clean and the more positive their outcomes (both in terms of lowered recidivism and lower costs) (Carey et al., 2005; 2012). The SJDMC is commended for implementing a policy of at least 120 days clean before participants can successfully exit from the program. We recommend following the previous recommendation of more frequent drug testing to confirm that the participant is not using.

Best Practice

Sanctions are imposed immediately after non-compliant behavior. (e.g., Drug court will impose sanctions in advance of a client's regularly scheduled court hearing.)

Drug court programs following this practice had 100% higher cost savings than programs that waited to impose sanctions (Carey et al., 2012).

- Sanctions used in the SJDMC are generally standardized and include increased support meetings, more frequent court appearances and/or being put on the probation officer's caseload. In response to participant behaviors, compliance court managers have discretion and can put participants on the docket at any time. Track 2 participants are typically brought in the same week that problems occur.

Commendation: For Track 2 participants, the SJDMC compliance court managers can have participants put on the docket at their discretion, the program is commended for following this best practice.

Recommendation: The program should implement formal guidelines as to what merits putting a participant on a docket s/he is not regularly scheduled for. Make certain that all Track 2 participants are made aware of this policy and are given frequent reminders. Sanctions are considered swift if the participant is notified of the sanction immediately, even if the actual sanction isn't imposed for a few days or it is suspended (to give the participant a chance to fully comply with all requirements in the hopes that the sanction will be withdrawn).

Best Practice

Drug court team members are given a copy of the guidelines for sanctions.

Drug court programs that had written guidelines for sanctions and provided these guidelines to the team had 55% greater reductions in recidivism and 72% higher cost savings than programs that did not.

- The SJDMC does not have written guidelines for sanctions that are given to team members.

Recommendation: The team should develop and write up guidelines on the use of sanctions and rewards and give a printed copy to each team member. Drug courts that have written guidelines for sanctions and rewards and that provide these guidelines to the team have double the graduation rate compared to drug courts that do not have written guidelines (Carey, Finigan & Pukstas, 2008; Carey, Waller, & Weller, 2011). These guidelines should be considered a starting point for team discussion of rewards and sanctions during staffings and not hard and fast rules. The guidelines assist the team in maintaining consistency across participants so that, when appropriate, similar behaviors results in similar sanctions. The guidelines also serve as a reminder of the various reward and sanction options available to the team so that the team does not fall into habits of using the same type of sanctions (e.g., jail) so frequently that they become ineffective.

Best Practice

In order to graduate participants must have paid all court-ordered fines and fees (e.g., fines, restitution).

Drug courts that require payment of fees before graduation had 48% greater reductions in recidivism.

- The SJDMC does not charge participant fees. However, most of the requirements that participants need to meet in order to successfully complete the program do involve fees. Participants in both tracks must have an interlock ignition device (IID) installed on their cars within 90 days of entering the program. Installation costs \$100 and there is a \$70-\$100 monthly fee. If the offender does not have a car, s/he must use a transdermal monitoring bracelet, In-Home Monitor, or Soberlink device, which costs up to \$13 per day. The Alcohol Drug Monitoring representative does work with clients who cannot afford the fee and sometimes charges nothing. Both tracks are required to take the statutorily mandated DDE program courses in order to obtain their driver's license. Fees for the DDE programs typically run about \$1,300. The DUI Court allows participants who can't afford the statutorily mandated classes to attend self-help groups until they can afford the classes.

Recommendation: Although research has consistently demonstrated that drug courts that require participants to pay fees have higher graduation rates and lower recidivism than drug courts that require no fees (Carey, et al. 2005; Carey, Pukstas & Finigan, 2008; Carey & Perkins, 2008; Carey, Waller, & Weller, 2011), the size of those fees need to be such that it is feasible for participants to successfully pay them. The SJDMC participants felt the fees imposed as part of the SJDMC program were excessive and posed a barrier to progressing through the program to graduation. The program is encouraged to seek out more avenues for fees to be “worked off” through community service or good behavior.

Best Practice

The typical length of jail sanctions is 2 weeks or less.

Drug courts that use smaller amounts of jail time (2 weeks or less consecutive days in jail) had 59% greater reductions in recidivism and 45% greater increases in cost savings.

- SJDMC participants are typically given the option to enroll in and pay for an Alternative Work Program (AWP) in lieu of the jail time for their repeat DWI offense. Furthermore, jail is rarely used as a sanction and is reserved for participants who drive illegally or receive a new offense. Shock incarceration is used in extreme cases, where a participant has missed multiple hearings and must be transported to court by a police officer, for example. When a participant does go to jail, the length of incarceration is up to 3 days. A team member explained that one participant was sanctioned to jail for 3 days but ended up staying only an hour. Team members understand that jail sentences will likely be reduced by jail staff due to overcrowding.

Commendation: The SJDMC is commended for having an alternative to jail available to participants pre-programming. Although the program has jail as an available sanction, it is rarely used. Team members report that when it is used, participants are often released within hours due to overcrowding. The program is commended for following this best practice and encouraged to keep jail time to a minimum.

Best Practice

Drug court judges spend an average of 3 minutes or greater per participant during status review hearings.

Programs with judges who spent an average of at least 3 minutes with each participant had 153% greater reductions in recidivism and 36% greater cost savings than programs with judges who spent less time.

- In the Track 2 court session, the judge was observed speaking with participants for just under 3 minutes, where he discussed program progress and recognized the participant for making adequate progress or discussed potential consequences for unsatisfactory performance.

Commendation: Overall, the SJDMC is doing an excellent job of following this best practice. The judge spends time talking with each participant about how they are doing, discussing the requirements of the program for that participant, and working with the participant to find ways for him/her to accomplish these requirements. The participants in the focus group were uniformly appreciative of the judge and many stated that it was their relationship with the judge that convinced them to turn their lives around.

Best Practice

The judge's term is indefinite.

Programs where the judge is assigned to the program indefinitely show 35% greater reductions in recidivism.

- Judge Richard Vlavianos is the founding judge and has been with the SJDMC program since its implementation in 2008. He does not plan to make this a rotating position, though there are backup judges that can fill in for him when he is away.

Commendation: The current SJDMC judge has been presiding over the court for almost 5 years as of the writing of this report. Experience and longevity are correlated with more positive participant outcomes and cost savings according to research where judges have served for 2 years or more. The SJDMC is commended for adhering to this best practice.

Best Practice

The results of program evaluations have led to modifications in drug court operations.

Utilizing the feedback from outside evaluations to modify program practices is linked to 85% greater reductions in recidivism and 100% greater increases in cost savings.

- The SJDMC has just completed a formal program evaluation.

Commendation: The SJDMC is commended for finding funding and investing resources into this process and outcome evaluation. SJDMC staff members are encouraged to discuss the findings from this evaluation as a team, both to enjoy the recognition of its accomplishments, and to identify areas of potential program adjustment and improvement. The use of evaluation findings by the program to make modifications in drug court operations has been shown to save drug courts money. In addition, the evaluation results can be very beneficial to the program if they are looking to apply for grants to fund additional positions, etc., or for local funders/agencies to help them access resources. These results can document needs as well as show how well the program has done in some areas.

Best Practice

Self review of program data and/or regular reporting of program statistics have led to modifications in drug court operations.

Drug court programs that regularly monitor their own data and modify their program practices as a result show 105% greater reductions in recidivism and 131% greater increases in cost savings.

- The SJDMC office coordinator provides reports on program statistics, such as the number of clients who are active, in compliance, out of compliance, inactive, completed and in custody. She also generates recidivism rate charts and graphs based on data from the DMV. The Court Management Analyst assembles reports for the SJDMC, looking at county-wide aggregate data for DWIs.

Commendation: The SJDMC team should continue to accumulate and analyze data about the court participants and use it for program reviews and planning, such as to inform the team about the types of participants who are most and least successful in the program. The team is commended for its data collection measures and its use of participant and aggregate data to make

program adjustments. The judge is also commended for keeping abreast of current research developments on problem-solving courts.

Best Practice

The drug court has a steering or advisory committee that includes community members.

Drug Court programs with an advisory committee that included community members had 56% higher cost savings than drug court without an advisory committee.

- The SJDMC had an implementation steering committee, but does not currently have a steering committee or an advisory board.

Recommendation: The program should consider re-implementing a policy or steering committee made up of SJDMC team members and representatives from other community agencies, representatives of the business community and other interested groups. Not only could this result in expanded understanding of and community support for the program, it may result in additional services and facilities for the program.

BEST PRACTICES SUMMARY

Commendations

The SJDMC program for Track 2 participants is performing many of the research-based best practices for drug courts. The practices being successfully performed by the SJDMC include:

- Regular use and reporting of program statistics
- Engaging in a process and outcome evaluation
- Having a judge that is assigned indefinitely to the program and who spends the appropriate length of time with participants during court appearances
- Use of appropriate length of time in jail for participant sanctions (less than 1 week)
- Having a program length of at least 12 months
- Identifying eligible participants and getting them into the program swiftly
- Including representatives from a range of collaborating agencies on the SJDMC team

Recommendations

Although the SJDMC program is following many best practices, there are further best practices that can be implemented to enhance Track 2 of the program. These include:

- Continue to work toward having a prosecutor and a representative from law enforcement on the team.
- Continue to work toward obtaining funding for treatment and then identify a central provider to oversee treatment.
- Implement a more rigorous drug testing protocol, including random urine drug tests at least twice per week with a turnaround of less than 48 hours on the results.

- Develop written guidelines for team response to participant behavior and give a copy of the guidelines to each team member. The SJDMC has already begun this process.
- Explore ways to decrease the burden of fees on SJDMC participants through community service or other options that will allow participants to give back to the community that they have harmed while still successfully completing the program.
- Reconvene an advisory committee for the program to expand understanding of and community support for the program.

REFERENCES

- Bhati, A. S., Roman, J. K., & Chalfin, A. (2008). *To treat or not to treat: Evidence on the prospects of expanding treatment to drug-involved offenders*. Washington, DC: Urban Institute, Justice Policy Center.
- Carey, S. M., & 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., & Pukstas, K. (2008). *Exploring the Key Components of Drug Courts: A Comparative Study of 18 Adult Drug Courts on Practices, Outcomes and Costs*. Submitted to the U. S. Department of Justice, National Institute of Justice, May 2008. NIJ Contract 2005M114.
- Carey, S. M., Finigan, M. W., Waller, M. S., Lucas, L. M., & Crumpton, D. (2005). *California drug courts: A methodology for determining costs and benefits, 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.
- Carey, S. M., Fuller, B., E., Kissick, K., Taylor, E., & Zold-Kilbourn, P. (2008). Michigan DUI Courts Outcome Evaluation, final report. Submitted to Michigan Supreme Court.
- Carey, S. M., Mackin, J. R., & Finigan, M. W. (2012). What Works? The 10 Key Components of Drug Courts: Research Based Best Practices. *Drug Court Review*, 8(1), 6-42.
- Carey, S. M., Marchand, G., & Waller, M. S. (2006). Clackamas County Juvenile Drug Court Enhancement Cost Evaluation Final Report. Submitted to OJDDP. Full text of report can be found at www.npcresearch.com.
- Carey, S. M., & Perkins, T. (2008). *Methamphetamine Users in Missouri Drug Courts: Program Elements Associated with Success*, Final Report. Submitted to the Missouri Office of the State Court Administrator, November 2008.
- Carey, S. M., & Waller, M. S. (2011). *Oregon Drug Courts: Statewide Costs and Promising Practices*. Submitted to the Oregon Criminal Justice Commission and the U.S.D.O.J. Bureau of Justice Assistance, December 2010.
- Carey S. M., Waller, M. S., & Weller, J. M. (2011). *California Drug Court Cost Study: Phase III: Statewide Costs and Promising Practices, final report*. To be submitted to the California Administrative Office of the Courts.
- Finigan, M. W. (1996). *Societal Outcomes and Cost Savings of Drug and Alcohol Treatment in the State of Oregon*. Submitted to the Office of Alcohol and Drug Abuse Programs.
- Gottfredson, D. C., Kearley, B. W., Najaka, S. S., & Rocha, C. M. (2007). How Drug Treatment Courts Work: An Analysis of Mediators. *Journal of Research in Crime and Delinquency*, 44(1): 3-35.
- Government Accounting Office (GAO) (2005). "Adult Drug Courts: Evidence indicates recidivism reductions and mixed results for other outcomes." February 2005 Report. Available at <http://www.gao.gov/new.items/d05219.pdf>

- Longshore, D. L., Turner, S., Wenzel, S. L., Morral, A. R., Harrell, A., McBride, D., Deschenes, E., & Iguchi, M. Y. (2001). Drug courts: A conceptual framework. *Journal of Drug Issues*, 31(1), Winter 2001, 7-26.
- Mackin, J. R., Carey, S. M., Finigan, M. W., Lucas, L. M., Lambarth, C. H., Waller, M. S., Herrera Allen, T., Weller, J. M., & Linhares, B. (2009). *Maryland Problem-Solving Courts Evaluation, Phase III: Integration of Results from Process, Outcome, and Cost Studies Conducted 2007-2009*. A report to the Maryland Judiciary, Office of Problem-Solving Courts. Portland, OR: NPC Research.
- Marlowe, D. B., Festinger, D. S., Lee, P. A., Dugosh, K. L., & Benasutti, K. M. (2006). Matching Judicial Supervision to Client Risk Status in Drug Court. *Crime and Delinquency*, 52(1), 52-76.
- Marlowe, D. (2010). *Research update on juvenile drug treatment courts*. Alexandria, VA: National Association of Drug Court Professionals. Retrieved from <http://www.ndci.org/research> on May 3, 2011.
- National Association of Drug Court Professionals Drug Court Standards Committee (1997). *Defining drug courts: The key components*. U.S. Department of Justice, Office of Justice Programs, Drug Court Programs Office.
- NCDC (2005). National Center for DWI Courts: 10 Guiding Principles of DWI Courts. <http://www.dwicourts.org/learn/about-dwi-courts/-guiding-principles>
- Rempel, M., & Zweig, R. (2011, July). *Findings and implications of NIJ's Multisite Adult Drug Court Evaluation (MADCE)*. Presented at the National Association of Drug Court Professionals 17th Annual Training Conference, Washington, DC.
- SAMHSA/CSAT Treatment Improvement Protocols (1994). TIP 8: Intensive outpatient treatment for alcohol and other drug abuse. Retrieved October 23, 2006, from <http://www.ncbi.nlm.nih.gov/books/bv.fcgi?rid=hstat5.section.2875>
- Shaffer, D. K. (2006). Reconsidering drug court effectiveness: A meta-analytic review [Doctoral Dissertation]. Las Vegas: Dept. of Criminal Justice, University of Nevada.