DRUG COURT: REDUCING RECIDIVISM THROUGH A THERAPEUTIC COURT MILIEU Kimberly O'Young* Executive Summary

Traditional responses from the criminal justice and mental health systems attempt to address drug addiction using their own approaches and resources, while giving limited consideration to other models. This lack of integration among the different approaches is a major flaw in their designs and accounts for their limited success in stopping the cycle of substance abuse.

Marin County Adult Drug Court is an exemplary model of an integrated therapeutic team approach that unites multiple systems from different disciplines to work cooperatively, share information, and make collective decisions about the best way to support offenders. Marin County Adult Drug Court unites the strengths and resources of court authority, law enforcement, probation, social work, treatment programs, and mental health within a collective team whose purpose is to promote the goal of recovery and whose mission and role is to provide a uniform voice of support. Marin County Adult Drug Court's therapeutic court milieu is able to:

- Transform the court from a processing center into the actual treatment itself;
- Replace adversarial litigation with interdisciplinary cooperation toward a common goal;
- Successfully utilize sanctions and incentives to motivate compliant behavior; and
- Utilize parallel processes to model desirable community cooperation and accountability through the cooperative coordination of the Drug Court Team members.

The result is an effective and comprehensive, integrated model that combines the best intervention strategies from multiple disciplines to a complementary partnership designed to stem drug use and abuse.

This paper analyzes the success of the therapeutic court milieu and examines its possible applications as a model intervention for substance affected families in Juvenile Dependency Court.

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INTRODUCTION

Communities have long struggled with how to effectively treat substance abuse among the chronic population of drug-abusing individuals whose addiction behaviors bring them to the attention of the criminal justice system. Court-imposed sanctions, including fines, probation, incarceration, and a variety of treatment models have failed to meaningfully reduce the rate of recidivism among substance abusers. The interventions, often costly and timeconsuming, are unable to stem the addictive behaviors and often appear to serve as little more than revolving doors. Why do these interventions fail and what can be done to make them more effective?

TRADITIONAL RESPONSE MODELS

Society's traditional response to substance abuse is a bifurcated system with criminal justice as one branch and drug treatment as another branch. Although the two models share a common goal of stopping substance abuse, they tend to be separate processes that have little or no cross-over and sometimes stand in opposition to one another.

In the criminal justice system, drug offenders cycle through a predictable pattern: arrest, prosecution, conviction, incarceration, and release. Months, weeks, or even days later, the cycle repeats. The court system's strength is its ability to dole out sanctions to modify behavior and encourage compliance. Its weakness is its failure to address the underlying factors that contribute to chemical dependence. The adversarial nature of the court litigation process encourages denial of drug use and is often diametrically opposed to the central tenet in recovery in which offenders must acknowledge having a drug problem.

Treatment centers are also limited in their effectiveness. Treatment services, when recommended or ordered by the court, often occur long after sentencing. Treatment on demand is not always an option, as programs may be full or have long waiting lists.

The focus on rehabilitation and the life circumstances reinforcing chemical dependence are strengths of the drug treatment model. However, programs lack the compulsory force of the court system and have few incentives to offer participants to complete the programs.

The major flaw of the traditional bifurcated response to substance abuse is the two systems' lack of coordination. Each system has unique capabilities and resources to address substance abuse. However, the effectiveness of each model is limited by its own constraints. The challenge is to create a comprehensive system that does the following:

- Combines the best strategies of each model in a complementary partnership;
- Successfully addresses all the factors sustaining drug use; and
- Delivers sanctions and rehabilitative services in a coordinated effort.

MARIN COUNTY ADULT DRUG COURT – A COLLABORATIVE MODEL

In the late 1980s, communities began exploring the concept of using community-based, team-oriented approaches to deal with societal ills, including substance abuse. One such community was Marin County in California, whose Health and Human Services Department began grappling with the limitations of the available substance abuse response models and exploring alternatives more than a decade ago. In 2002, after five years of research and planning, and with funding from state, federal, and county government, Marin County established the Adult Drug Court.

This innovative approach to drug treatment is a voluntary, court-supervised, post-plea program for nonviolent offenders with drug-addiction charges and related theft crimes. This drug diversion model features a specialized team approach that transforms the court process into a comprehensive therapeutic jurisprudence. Court is no longer the vehicle through which to recommend or order treatment but is incorporated into the actual treatment and becomes the treatment itself.

Marin County Adult Drug Court (MCADC) does away with the segmentation of services and disconnection between the court and treatment. Representatives from different disciplines are brought together as a team headed by a Superior Court Judge. In Marin County, the drug court team consists of the following members:

- Superior Court Judge
- Deputy District Attorney
- Deputy Public Defender
- Deputy Probation Officer
- Counselor from Intensive Outpatient Treatment Program

- Assessment Specialist/Family Counselor
- Case Manager
- Drug Court Coordinator
- Police Officer

The team works cooperatively to deliver a unified message of support to MCADC participants. Information sharing and team decision-making replace the usual adversarial relationship between defense counsel and prosecuting attorneys. The team meets weekly to discuss each participant and together determines the following:

- Who is admitted to MCADC?
- What services are needed?
- What should be the response to participant progress (or lack thereof)?
- When is the participant ready for graduation; and
- When is termination from MCADC warranted.

The distinctions among the traditional individual domains of the court, law enforcement, and treatment center fade, giving way to a coordinated effort among all providers and all disciplines involved to do everything within their power to promote the participant's recovery.

Throughout every step of the program, the MCADC team is present and involved with the participants. Individual team members take lead responsibility according to their unique areas of expertise to oversee various aspects of the intervention process. All team members engage in open communication about participants' challenges and progress. Together they develop strategies to best support each participant.

The public defender may discover that a participant has remedial reading skills, prompting the caseworker to require that the participant attend a literacy course. The MCADC coordinator may remind the group that the participant needs part-time work. The police officer may provide the participant with a job referral he heard about while on patrol and may also inform the team about stressors in the participant's neighborhood that may have an impact on him. The counselor may address the stressors in the next individual session.

THE THERAPEUTIC COURT MILIEU

Much of the success of MCADC's impact on participants can be attributed to the drug court's unique therapeutic court milieu. One of the most impressive aspects of the MCADC team is the absence of turf wars among its members and the cooperative spirit engendered. Comprehensive, on-going crosstraining for all members of the team, including the judge, is critical. Equally important is the careful selection of team members who appreciate the expertise and unique roles of the other team members.

The Superior Court Judge is charged with leading the MCADC team. This individual's approach and interactive style are crucial to set the tone of MCADC for the team and the participants.

Marin County's Adult Drug Court Judge is the Honorable Terrence Boren, who commands his court with quiet dignity and a gentle but firm authority. The result is a therapeutic milieu that resembles a family atmosphere with the judge as the parental figure. Each week, participants are required to appear before the judge in front of their peer participants and the MCADC team. Judge Boren asks the participant to honestly answer a set series of questions designed to be an accounting of the past week's treatment progress. The presence of the other participants and the MCADC team is to serve as positive support for the participant being questioned. The other participants are like siblings and the MCADC team like the aunts and uncles whose role is to hold the participant accountable for his or her behavior. The team and other participants also help ensure that appropriate sanctions, penalties and rewards are administered with reliable justice.

Judge Boren relies not on authoritarian fright tactics but on establishing clear expectations and immediate sanctions to penalize non-compliant behavior, acknowledge progress, and reward efforts that go beyond expectations. The Judge has at his disposal a series of graduated sanctions that he metes out in a predictable manner to fit the infraction. Among the sanctions he uses are:

- Admonishments
- Essays
- Verbal explanation to other participants regarding one's behavior and plan of action to change behavior in the future
- Attendance at additional self-help meetings or groups
- Community service
- Fines
- Restrictions
- Jail time

Marin County Adult Drug Court also has the ability to offer powerful incentives including:

- Reducing terms of probation or incarceration
- Lowering program fees
- Dismissal of drug charges upon completion of the program

The MCADC team also determines when participants are deserving of applause or verbal recognition and compliment by the Judge. Other incentives used to motivate and reinforce desirable behaviors include gift certificates to various restaurants and tickets to events. The most highly coveted incentives are descriptive lapel pins that serve as ready reminders of participants' progress in recovery and reintegration into society as productive and contributing citizens.

Another key player on the MCADC team is the drug court coordinator. In Marin County, the position is well defined by the man who occupies it, Mr. Ron Johnny. Mr. Johnny is himself a retired drug court judge and a former police officer, whose passion for MCADC and belief in the intervention are evident in his commitment to participants and the way he handles his responsibilities. Mr. Johnny is part case manager, social worker, counselor, and police officer who recognizes the value of his own role and conduct to teach participants responsibility and accountability toward themselves and others.

Participants know that they can rely on Mr. Johnny. He is literally on call 24 hours per day, and has answered counseling calls from as far away as Arizona. Participants know that Mr. Johnny will "go the distance" for them, even literally picking up a participant in Oakland when one called for help.

Mr. Johnny is a role model and mentor for participants. He is the one reliable person they know who will talk them through or walk them through a tough situation but still hold them accountable for their behavior. Like a concerned uncle or big brother, Mr. Johnny may make an impromptu visit to checkup on a participant rumored to be non-compliant with MCADC rules. Likewise, he has also been known to find funds to fix a participant's teeth or to get participants suitable new clothing to boost their self-esteem and help them gain employment.

PROGRAM DESIGN

Marin County Adult Drug Court is designed as a rigorous four-phase program that takes approximately 15 months to complete and includes graduation and aftercare services. Phase 1 begins by requiring the participant to make regular weekly court appearances before a Superior Court Judge as part of the treatment process.

In addition, participants in Phase 1 must submit to the following:

- Evaluations of the participant's literacy, general medical health, mental health and substance abuse;
- 3-hour group counseling sessions (3 times per week);
- 1-hour individual counseling sessions (2 times per month);

They must also agree to:

- Obtain a self-help sponsor;
- Attend at least 3 self-help meetings per week;
- Submit to urinalysis on demand (3 tests per week minimum);
- Enroll in a GED program if not a high school graduate or do not have a GED;
- Obtain employment within 14 days or enroll in an educational/vocational program half-time; and
- Meet with a case manager twice per month.

Each participant's course of intervention is tailored to the individual's needs. However, a single core intensive outpatient treatment program serves all of the participants. This ensures uniformity and equity of the treatment, thereby promoting community among the participants as opposed to competition and divisiveness. Advancement to Phase 2 and subsequent phases includes successful completion of the previous phase requirements as well as no positive urinalysis results for a specified number of consecutive days. Progression to subsequent phases is also accompanied by the addition of family counseling and other services designed to address the holistic needs of the individual. Required court appearances are reduced as the participant progresses in recovery and increasingly integrates recovery lessons into his or her life.

EMPIRICAL DATA

The overall success of MCADC is apparent in the empirical data. A Marin County Fact Sheet, dated January 26, 2005, lists results from the first 34 months since MCADC's inception in March 2002. Results are measured in the number of graduates, drug recidivism since graduation, employment rate, prison rates suspended, and infants born to participants drug-free.

Graduation Rate	42.59%
Rate of Drug Recidivism Among Graduates**	1 = 4.3%
Prison Sentences Suspended	1,095 Days = 3 Years
Jail Sentences Suspended	4,328 Days = 11.85 Years
Supervised Probation Suspended	25,195 Days = 5 Years
Unemployed to Employed While in Program	100%
% Remaining Employed After Program Completion	90.4%
# Drug Free Infants Born to All Participants/Grads	4
# Drug-Affected Infants Born to All Participants/Grads	0

GRADUATE RESULTS* (N=24)

*Participants agree to participate in post-program evaluations for no less than a year.

**Data from Marin County Adult Drug Court Fact Sheet dated 1/26/05; results measured from 2/02 through 1/26/05.

LESSONS LEARNED AND IMPLICATIONS

Marin County Adult Drug Court's therapeutic court milieu succeeds in addressing substance abuse where traditional intervention models have failed by:

- Merging the capabilities and resources of diverse interventions into a single comprehensive system
- Creating allies out of traditional adversaries and fostering a commitment toward a common goal
- Modeling cooperation and accountability among MCADC team members and participants

- Establishing clear expectations and immediate consequences for participants
- Creating an atmosphere of predictable and reliable positive recovery support

This type of intensive collaboration and therapeutic milieu may not only be the key to divert drug offenders from the criminal justice system but may also be a promising strategy to treat the numerous drug-effected families who repeatedly cycle through the child welfare system. Community collaboration is the central theme in the current movement for child welfare redesign. San Francisco Family and Children's Services would do well to study MCADC and its possible implications for redesigning child welfare. As county welfare, probation, law enforcement, private treatment centers and other public services struggle and vie against each other for funding, the time is ripe to creatively combine resources and utilize them in a coordinated and cooperative effort to better serve mutual clients.

The holistic approach of the therapeutic-court milieu is ideal for the families involved in Juvenile Dependency Court who often have multiple issues, including poverty, homelessness, encounters with law enforcement, domestic violence, parenting skills deficits, physical and mental health concerns, special needs and learning problems, in addition to their substance abuse concerns.

The challenge of recovery is tough enough. Dependency litigation takes an unnecessary additional toll on parents and children who are already dealing with the crisis of the family's substance abuse. Litigation is expensive and often lasts months, leaving the children the greatest victims in limbo while services are determined. How powerful would be an intervention that replaced the adversary of the dependency court process with a unified multi-disciplinary team who worked cooperatively for the family and with the family to get the supports needed for recovery.

OBSTACLES TO REPLICATING MODEL IN JUVENILE DEPENDENCY COURT

Integrating the therapeutic court milieu approach with juvenile dependency proceedings is a worthwhile goal, but not one without challenges. A major obstacle for San Francisco Family and Children's Services is the Unified Family Court's existing reluctance to participate in the state mandated Redesign Project, making unlikely its embrace of MCADC's team model and divestment of some of its authority. Full participatory investment in the team process is vital to establishing an effective therapeutic community-court partnership.

Another issue requiring careful consideration is the vital role of the drug court coordinator. In MCADC, Mr. Johnny offers a rare and difficult-to-replicate blend of expertise, experience, scheduling flexibility, and commitment of his own time to the program and its participants. He is literally available around the clock and his dedication to drug court ideals shows in the benefits to the participants. San Francisco may need to be creative in posting this role not as a single position but as several shift assignments similar to hospital or emergency personnel.

RECOMMENDATIONS FOR IMPLEMENTATION

The therapeutic court milieu approach, as exemplified by MCADC, is an innovative and timely model that could very well change child welfare. Steps to explore the feasibility of a Juvenile Dependency Drug Court should be incorporated into San Francisco's current System Improvement Plan (SIP) to address redesign goals. Steps should include the following:

- The existing Substance Abuse Redesign Committee (SARC) should review existing drug courts, both locally and across state jurisdictions.
- SARC should conduct a comprehensive analysis of the strengths and weaknesses of the programs, particularly Santa Clara's Dependency Drug Court, and family drug courts outside California.
- Committee participants must be recruited from probation, law enforcement, family resource centers, income eligibility programs, and other organizations whose mutual clients would be impacted and who may have a vested interest in participating in the development of a Juvenile Dependency Drug Court.
- Regular meetings must be convened to develop a draft plan.
- A Family Court liaison must be identified to participate in the research and assist in gaining the support of the Unified Family Court.
- Creative sources must be explored for seed money/funding from state, federal government, and private foundations, for research, planning and pilot programming.
- The possibility of shared funding from agencies and donation of in-kind services must be examined.

• Creative use of court and family-oriented incentives to motivate client participation should be explored. Incentives could include court dismissal or change of language in the Welfare and Institution Code (W&I) counts against a parent, free passes to clean and sober family-themed events, housing priority, or pins or patches signifying program progress.

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