

# **RACIAL DIFFERENCES IN DRUG COURT REFERRAL, ADMISSION, AND GRADUATION RATES: *USING THE EQUITY & INCLUSION ASSESSMENT TOOL (EIAT)***

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# DISCLOSURE STATEMENTS

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- The authors have no conflict of interest to disclose.

# AGENDA

- ✓ Introduction to the Equity & Inclusion Assessment Tool (EIAT)
- ✓ Pilot Study Findings
- ✓ Possible Explanations for the Findings and Promising Corrective Measures
- ✓ Next Steps . . .

# NADCP BEST PRACTICE STANDARDS

- ✓ Duty to avoid disparities in access, services, and impacts *regardless of intent*
- ✓ *Affirmative obligation to know* whether disparities exist
- ✓ *Take corrective actions* unless doing so would demonstrably threaten public safety or program effectiveness
- ✓ *Evaluate success of the corrective actions* and adjust until disparities eliminated

# NDCI PRACTITIONER TOOL KITS

- ✓ Methods for diagnosing disparities (e.g., EIAT)
- ✓ Methods for recruitment and social marketing
- ✓ Culturally proficient curricula (e.g., HEAT)
- ✓ Gauging participant and stakeholder perceptions, misperceptions, and recommendations

# EQUITY AND INCLUSION ASSESSMENT TOOL (EIAT)

- Developed by NCSC in partnership with the National Association of Drug Court Professionals (NADCP)
- Need for tool to diagnose inequities in drug courts
  - Race
  - Ethnicity
  - Assigned Sex at Birth
  - Gender Identity
  - Sexual Orientation
  - Age
- Download the tool and user guide:  
<https://www.ndci.org/resource/training/equity/>

# SPECIFICATIONS

1. Target key ***decision points*** as the focus for analysis.
2. Use ***referral cohorts*** to create groups for analysis.
3. Calculate ***transition probabilities*** to assess equity within those groups.

For any demographic characteristic of interest included in the EIAT, assess the probability of an individual progressing through key processing points

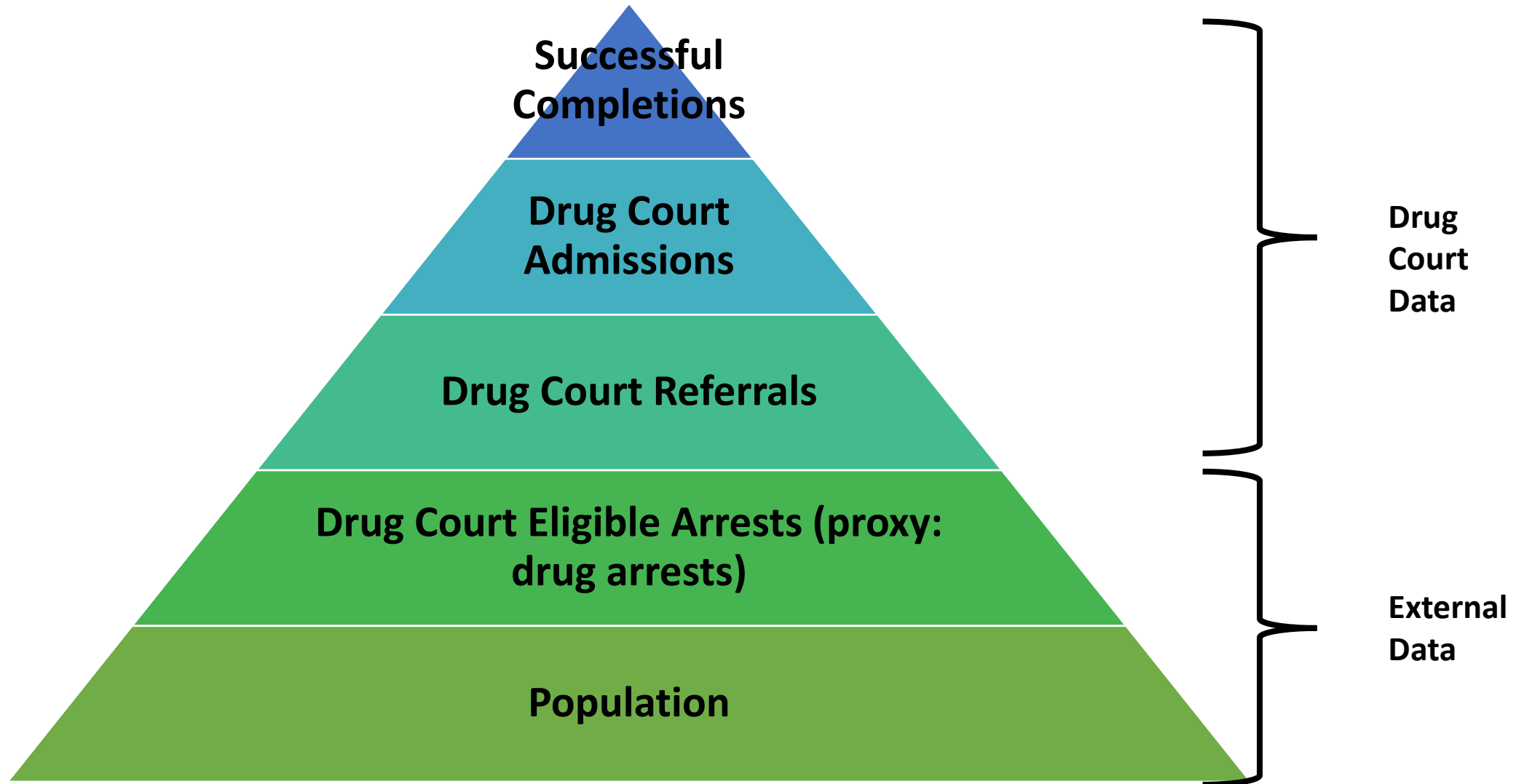
# EIAT REQUIRES ADDITIONAL DATA

Drug Courts need to collect additional data on the following to get the most from the EIAT:

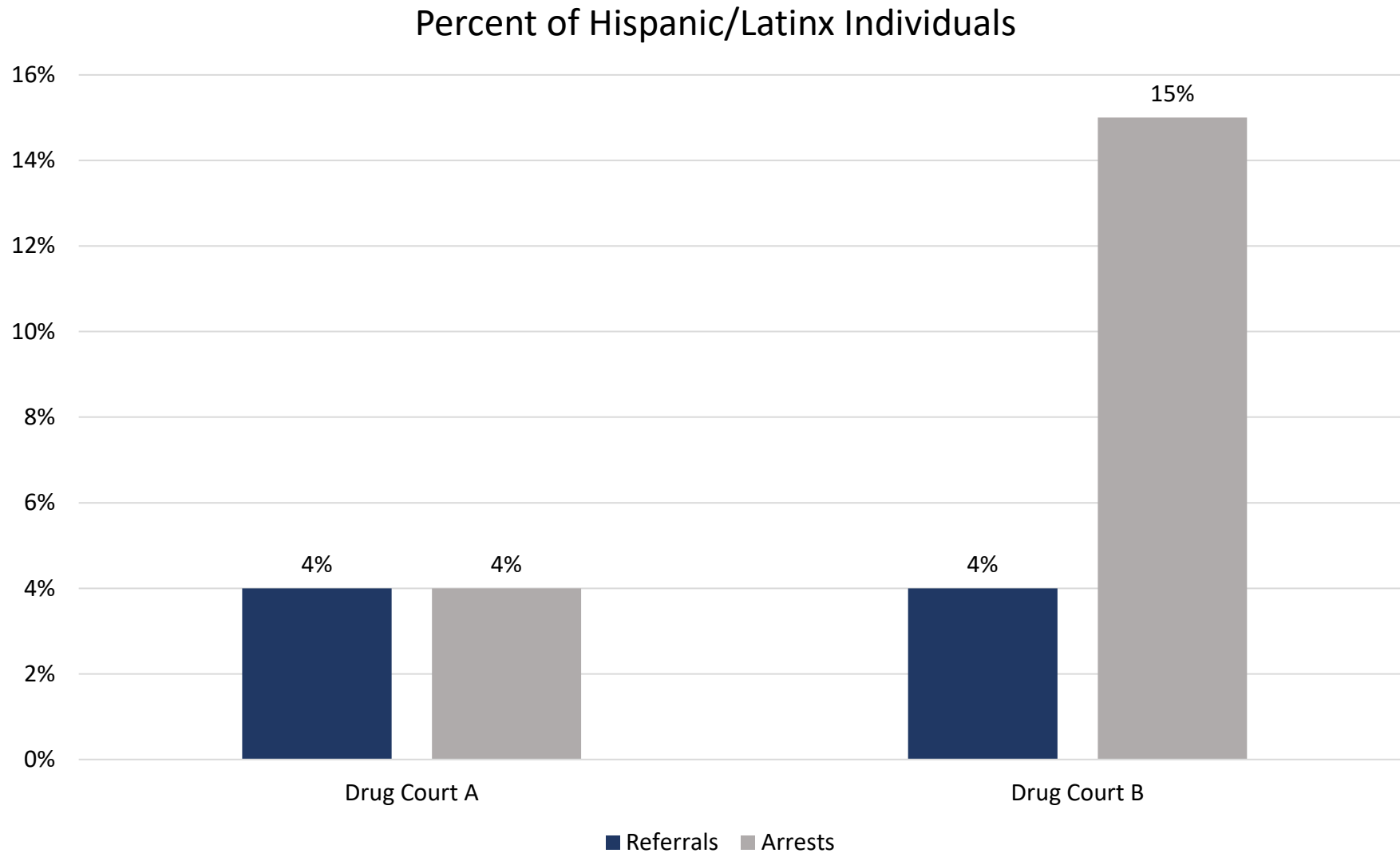
1. Adult Population (*Census*)
2. Local Drug Arrests (*SAC or UCR*)
3. Referrals to drug court
  - a) Date of referral
  - b) Reason not admitted or not completed

All disaggregated by race, ethnicity, gender, and age

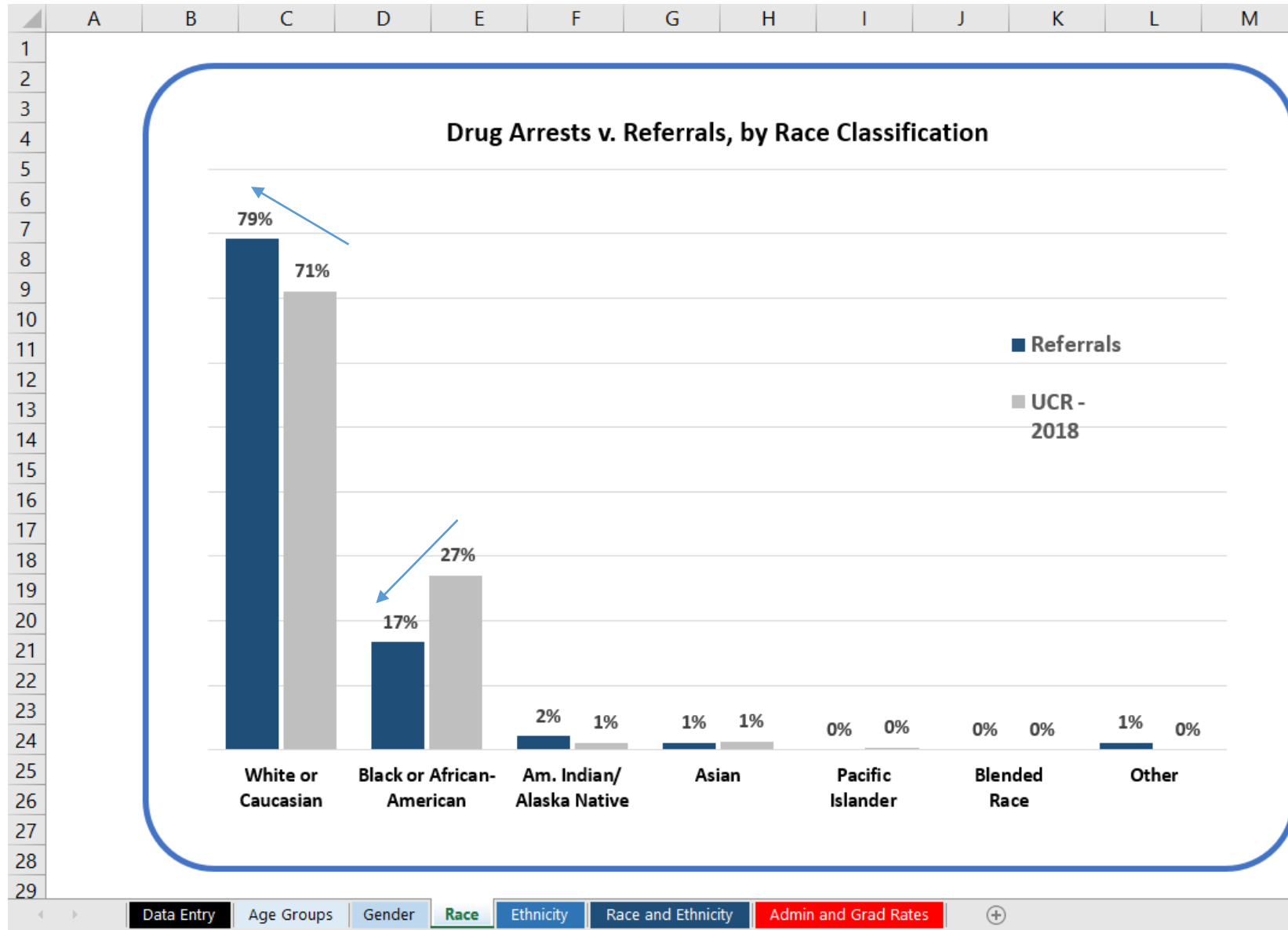
# DECISION POINTS



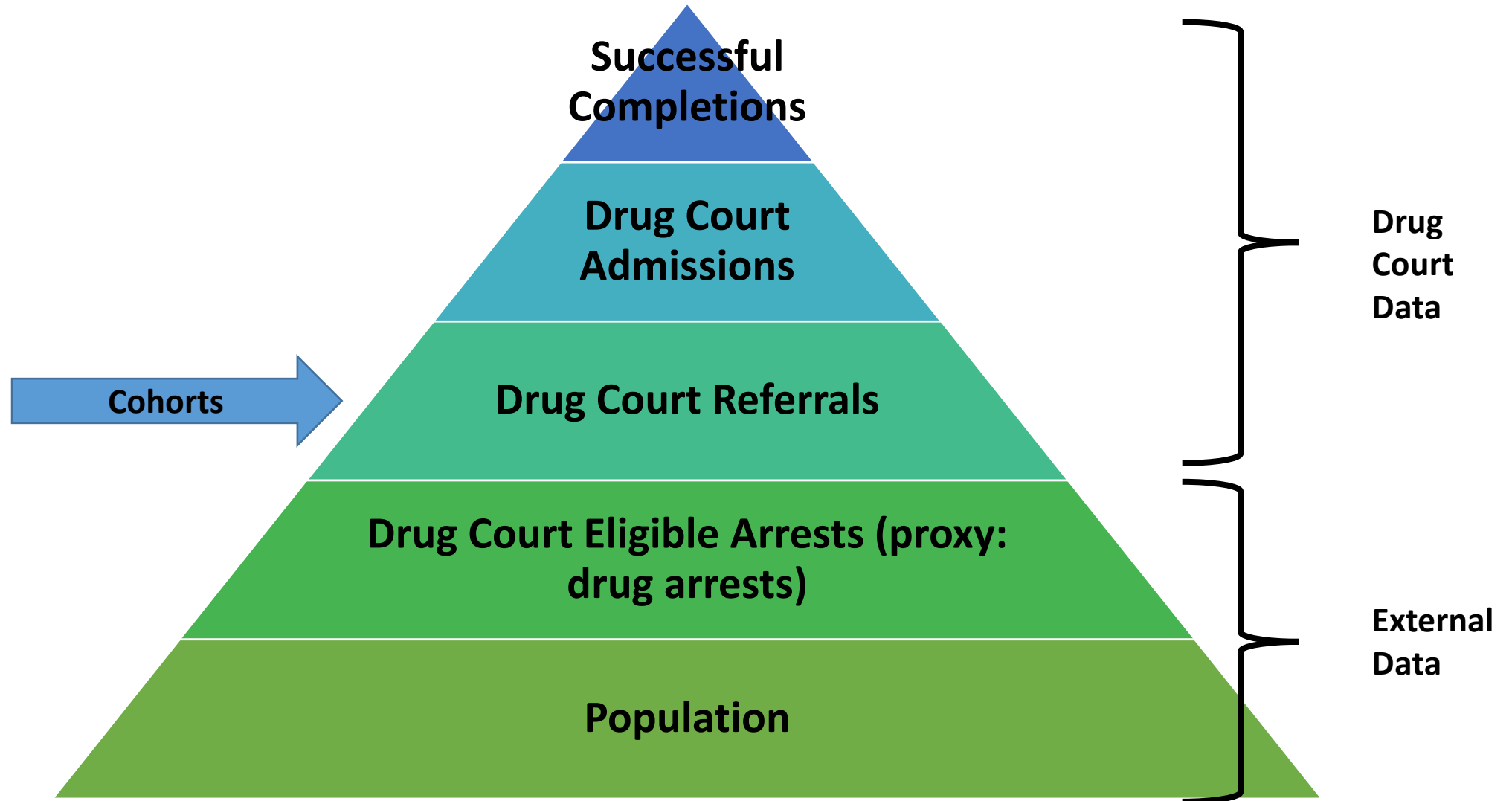
# ASSESSING DATA IN CONTEXT



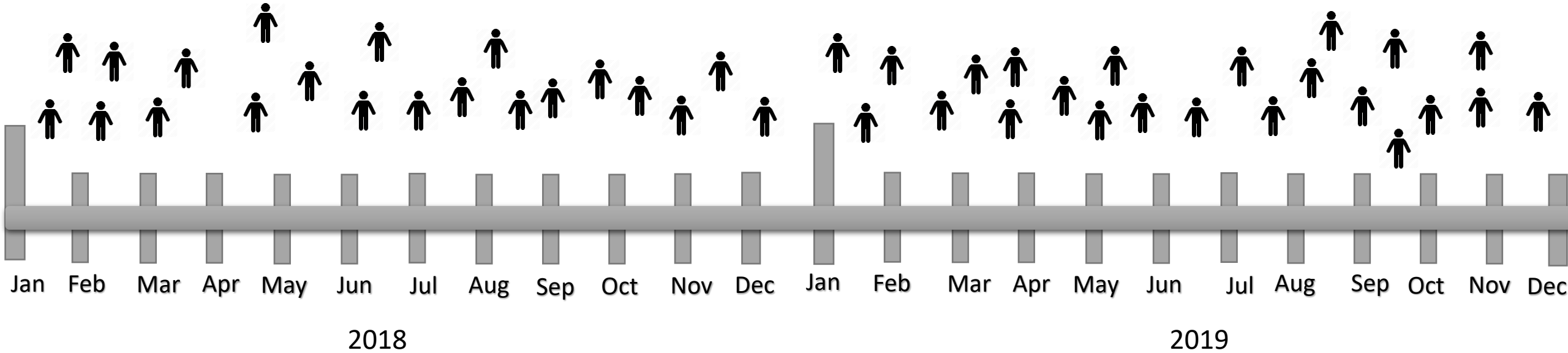
# EXAMPLE EIAT CHART: ARRESTS AND REFERRALS



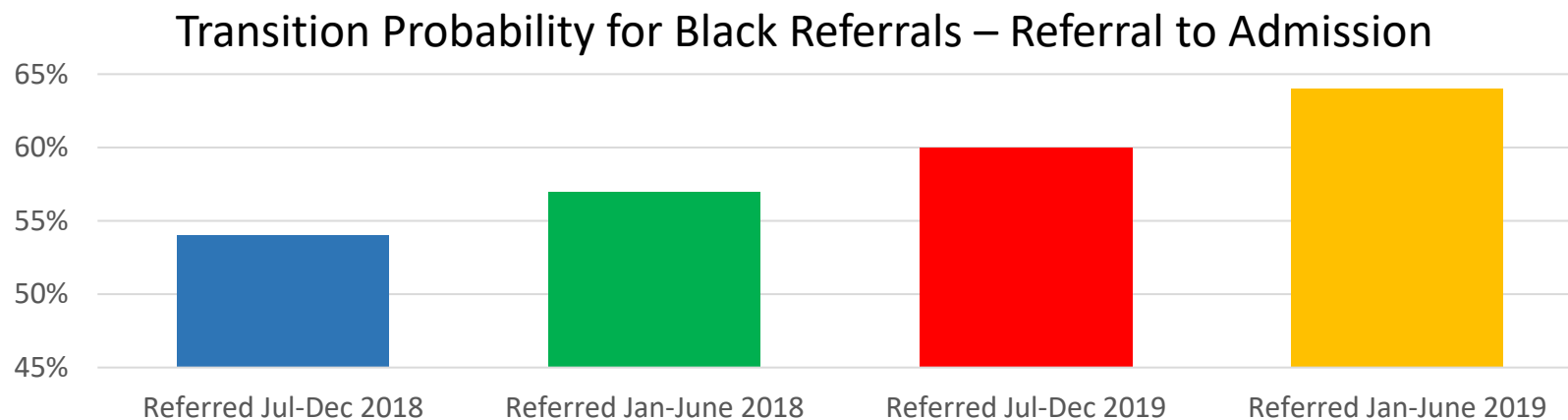
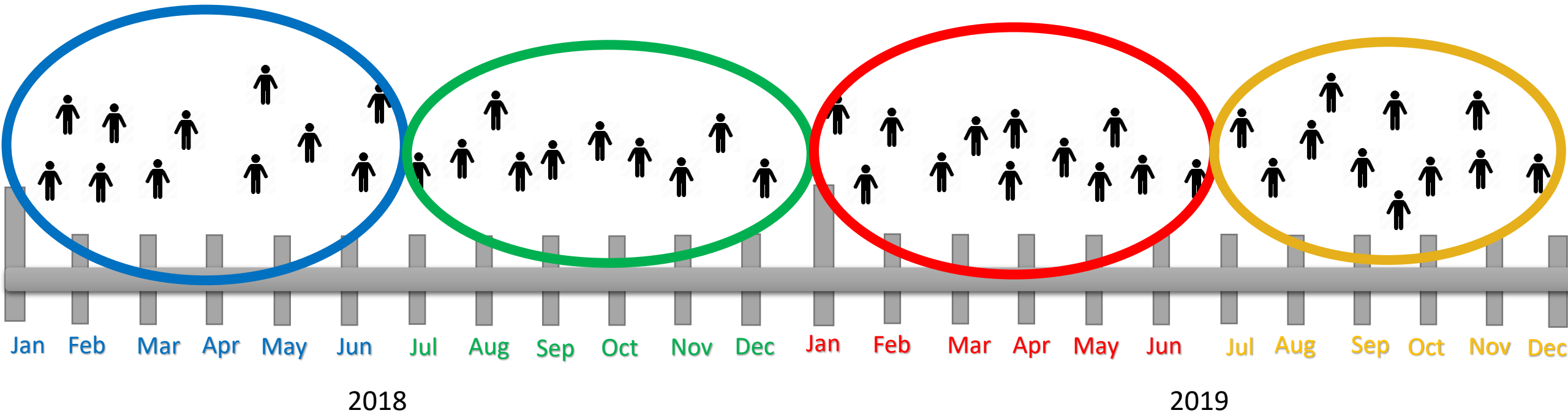
# DECISION POINTS



# REFERRAL COHORTS



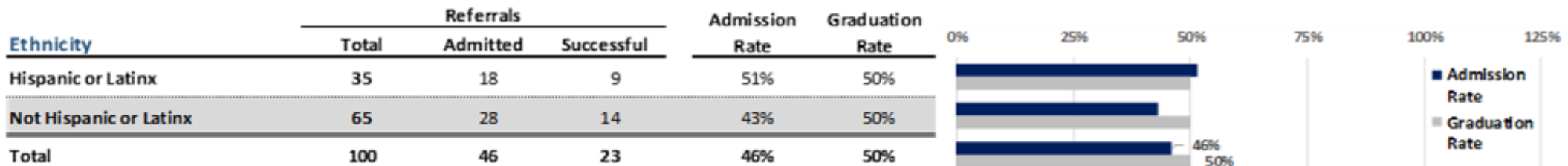
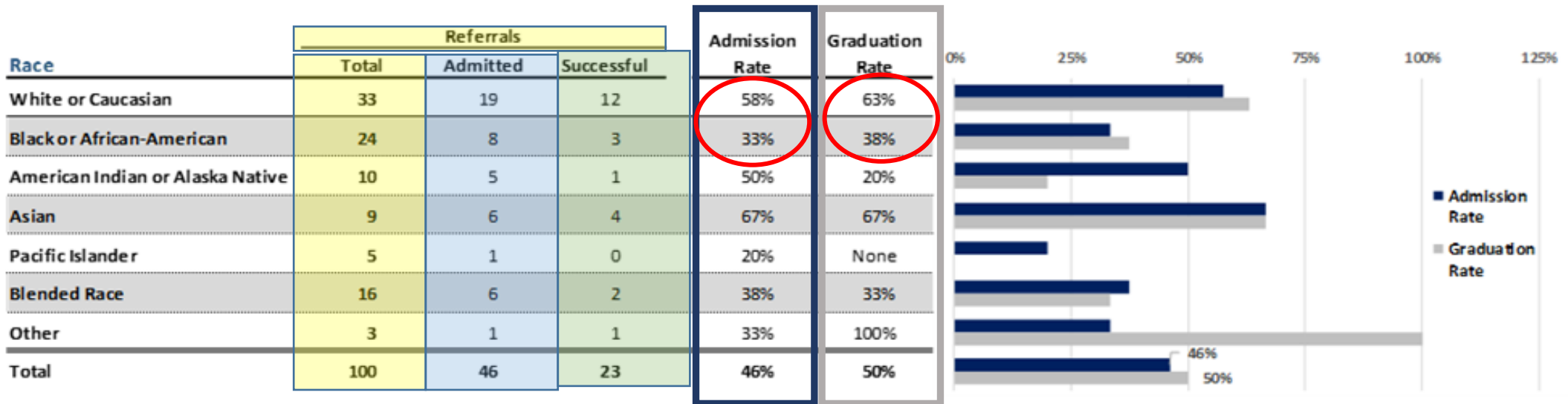
# REFERRAL COHORTS



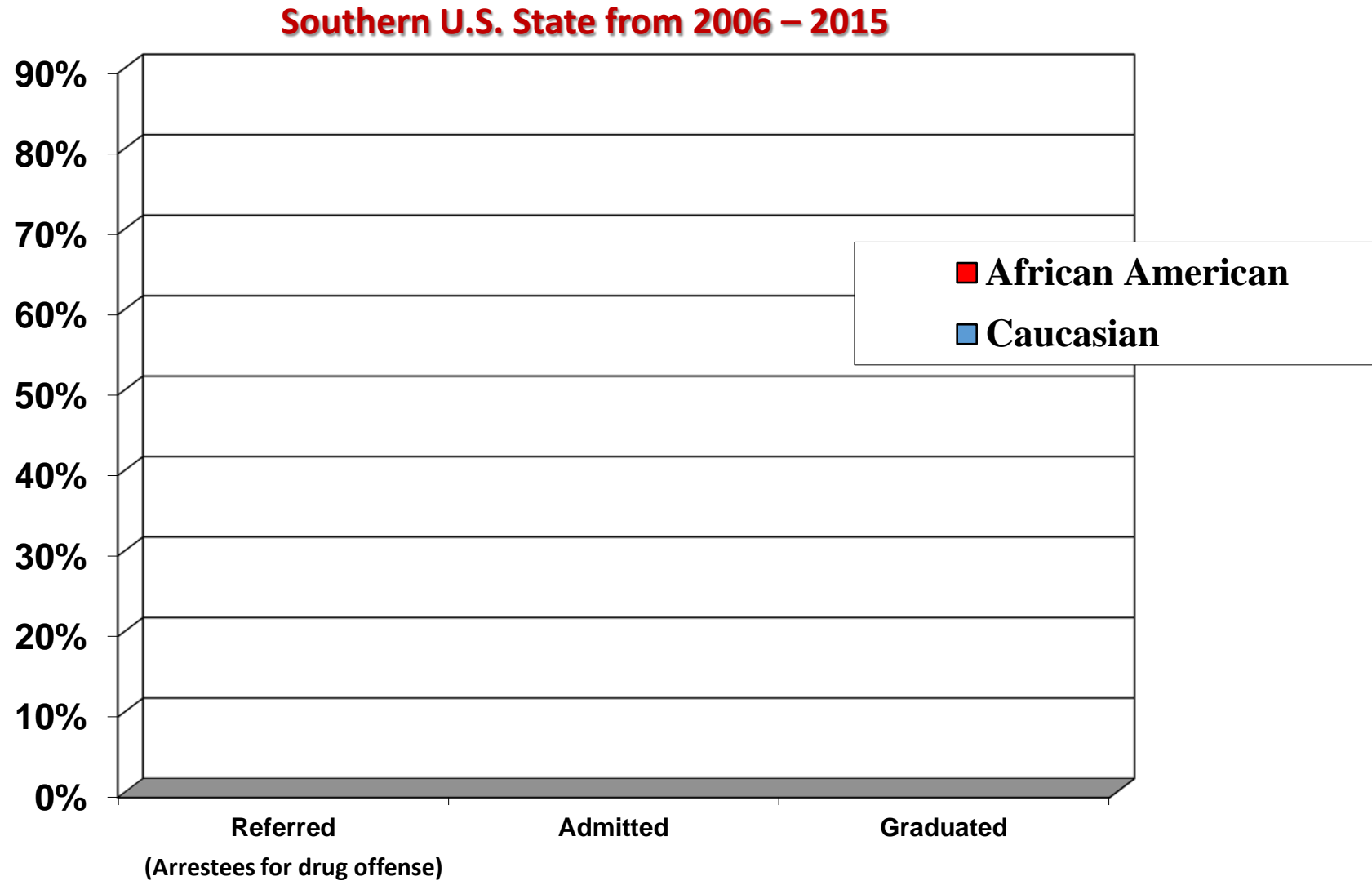
# TRANSITION PROBABILITIES

**Figure 4: Example of Interpreting Differences in Admission and Successful Completion Rates**

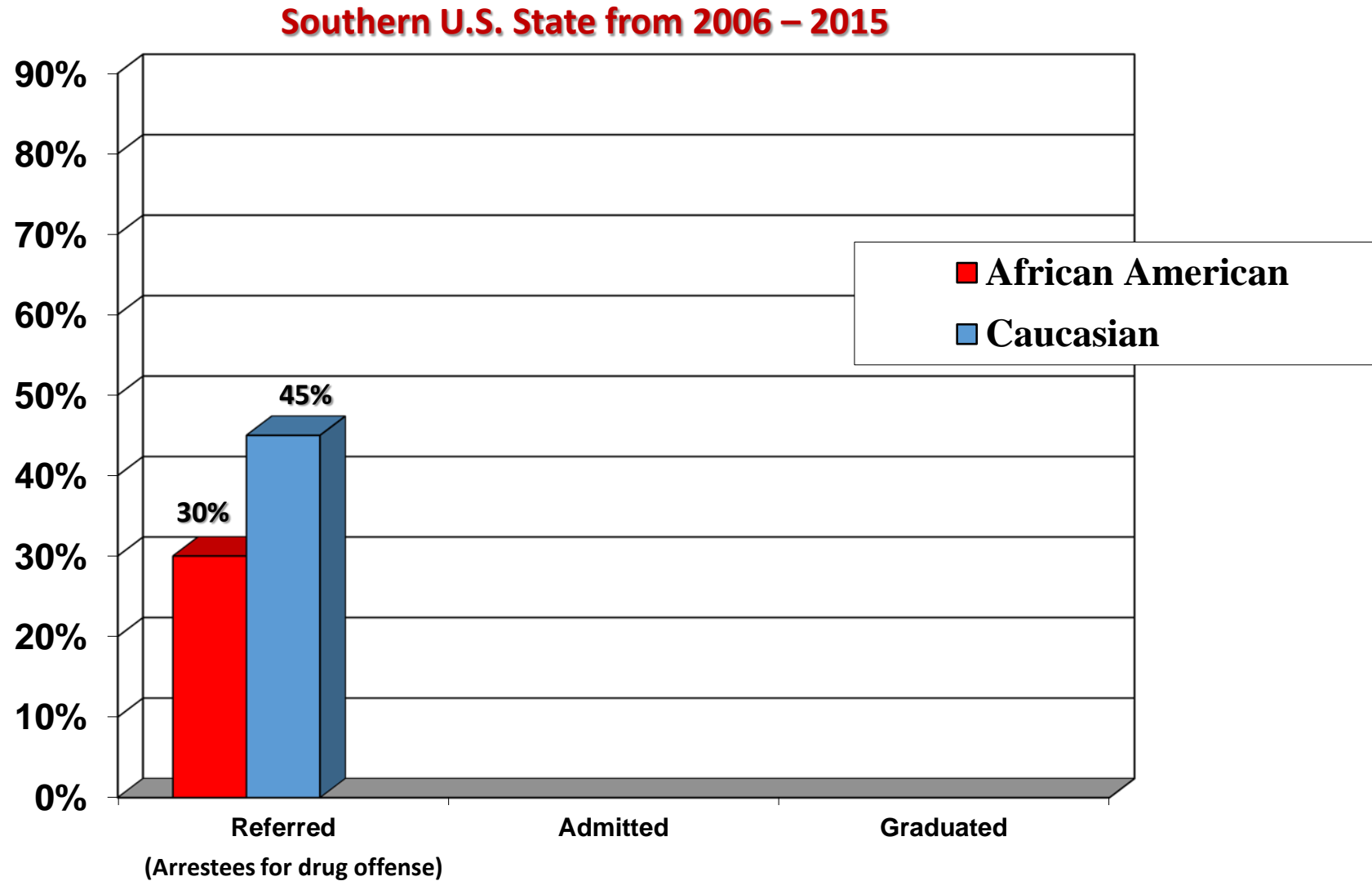
**Admission and Graduation Rates - Page 1 of 2**



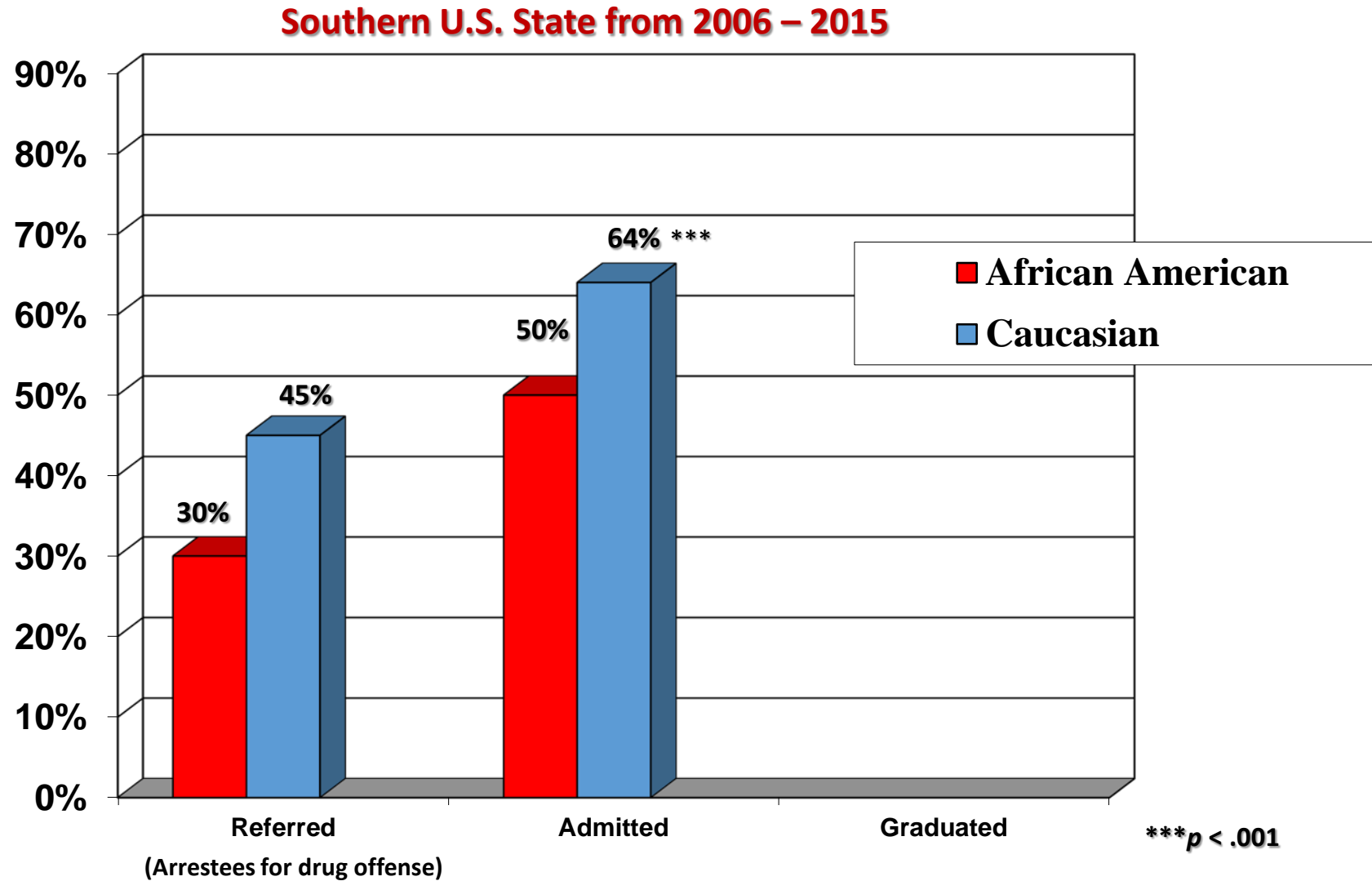
# CASCADING DISPARITIES



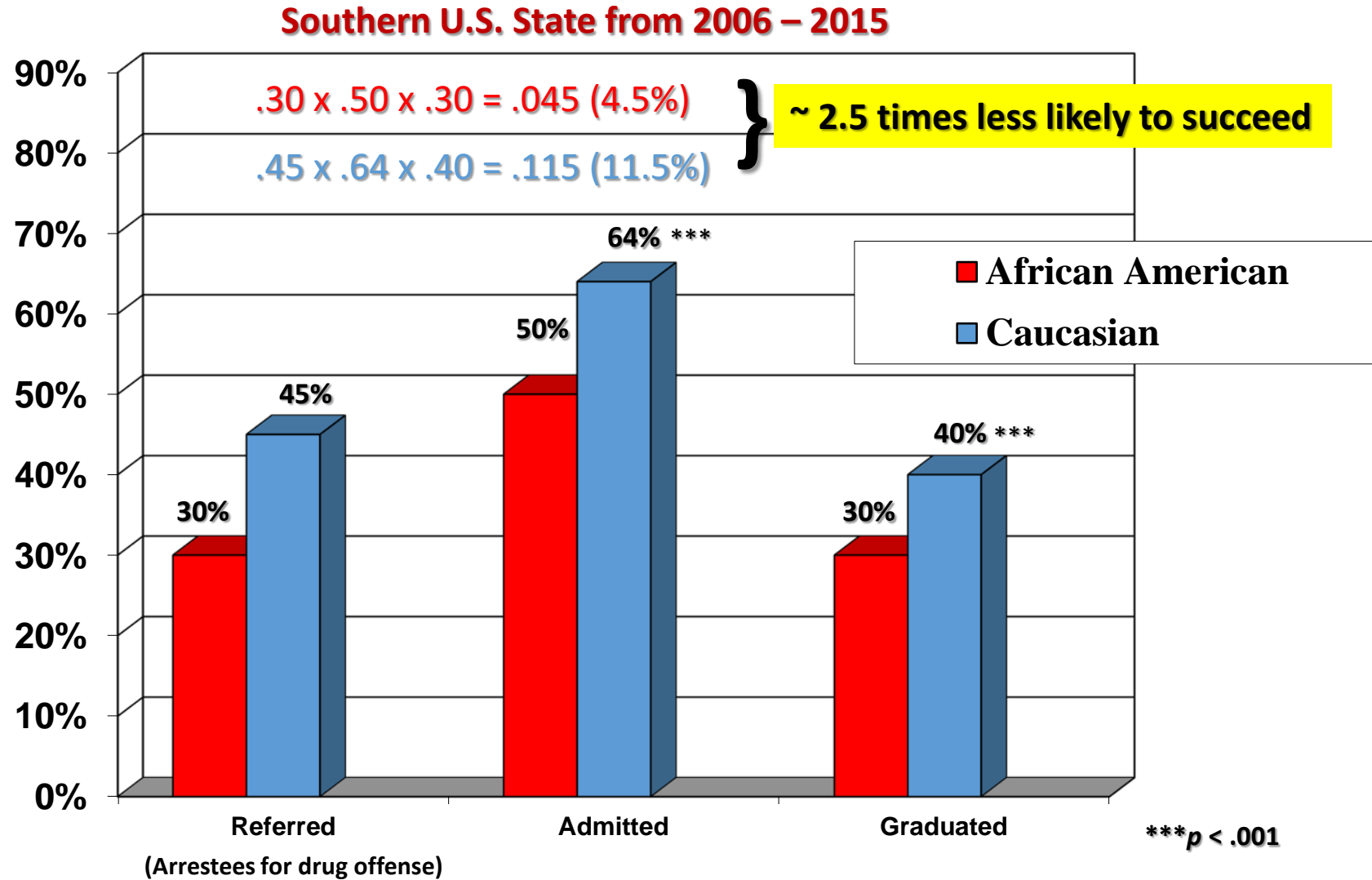
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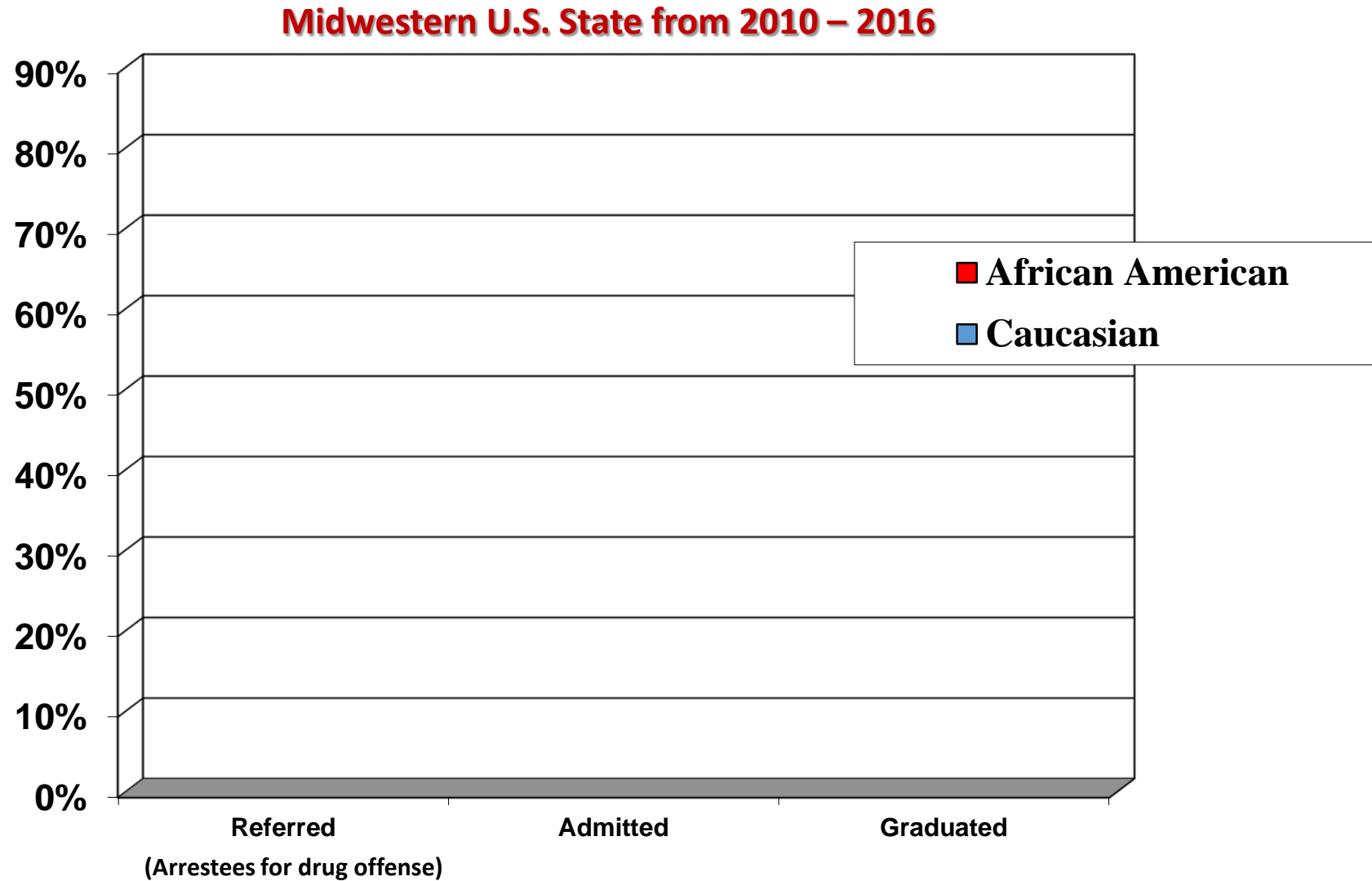
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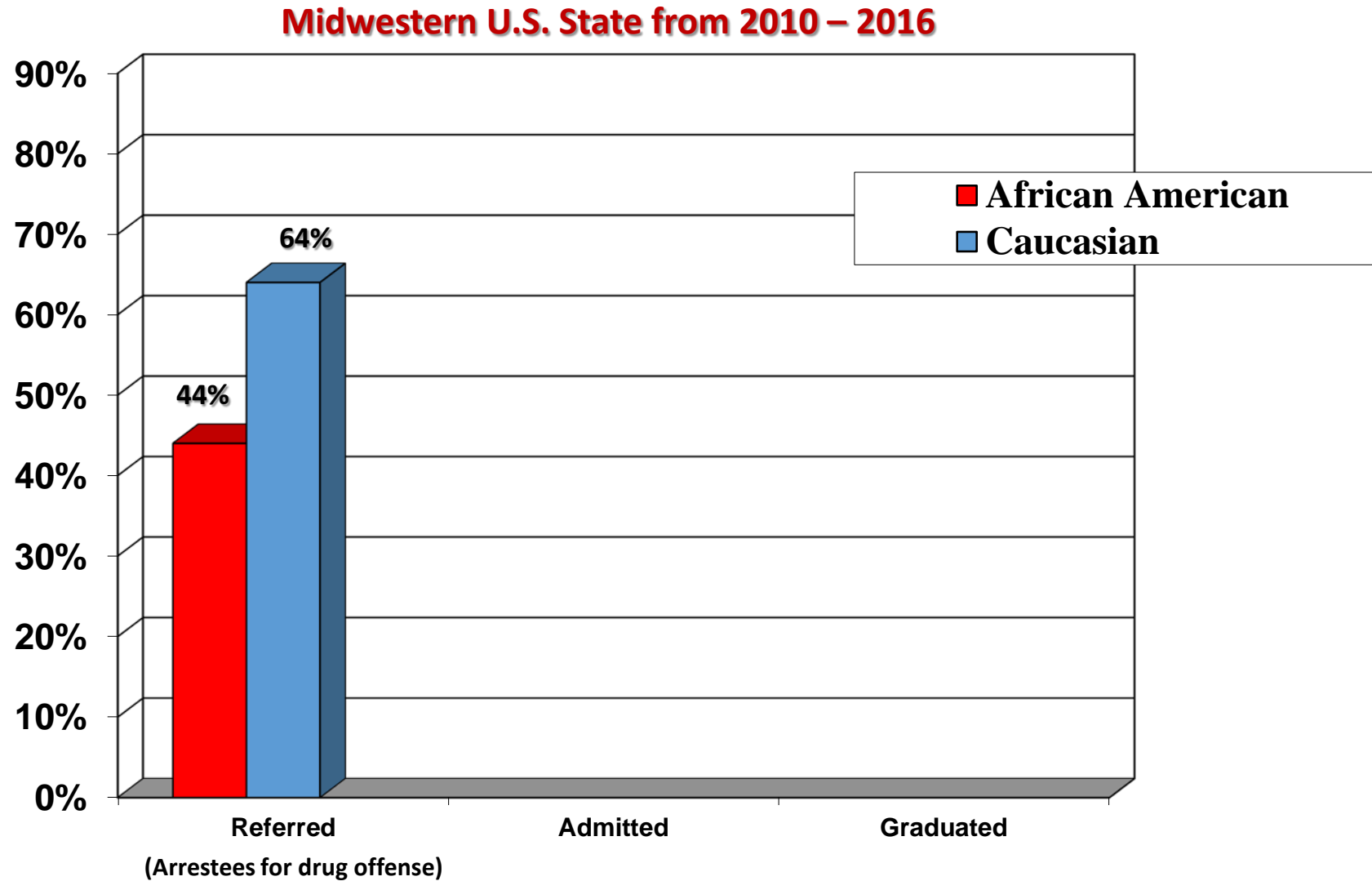
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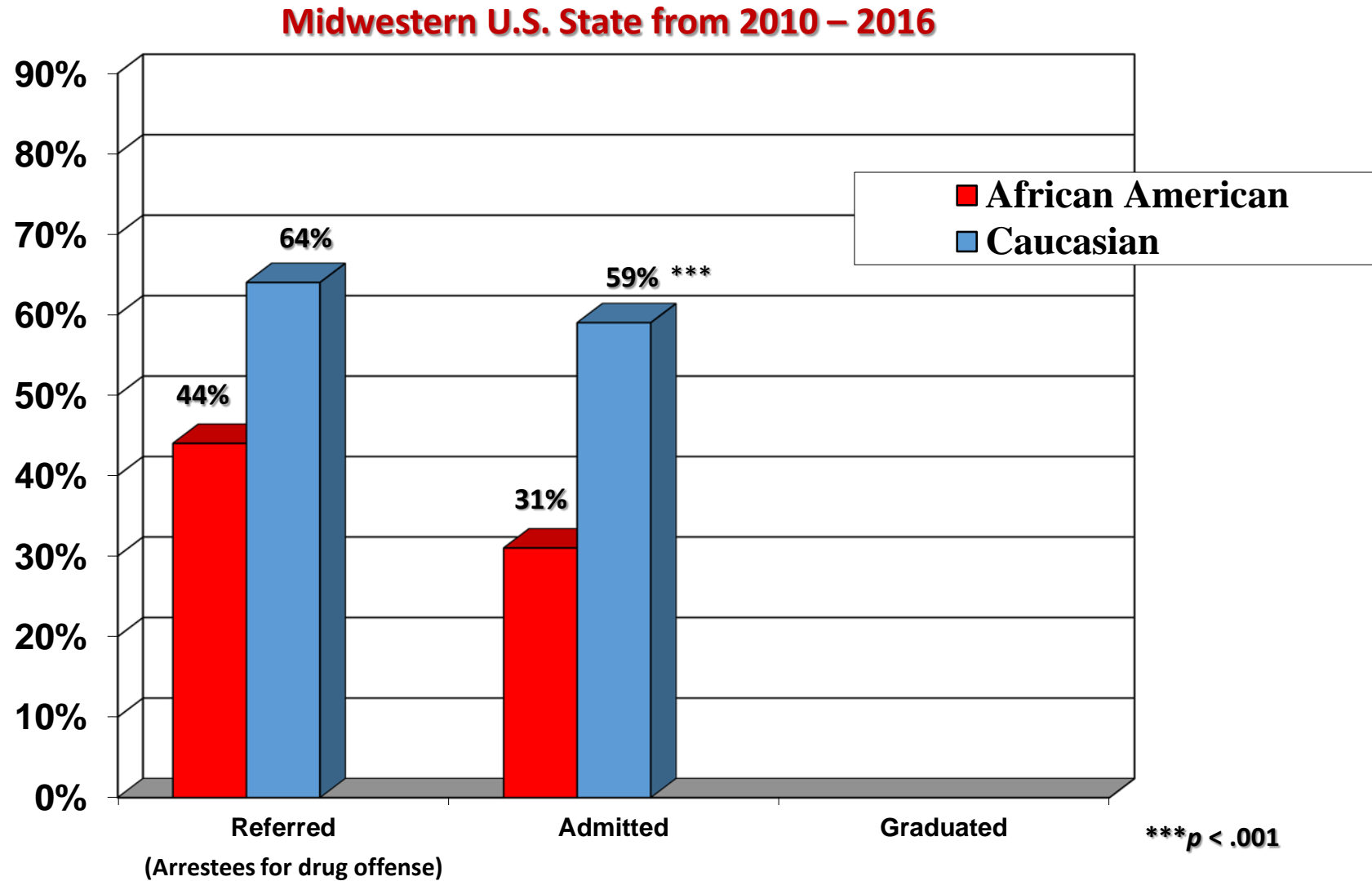
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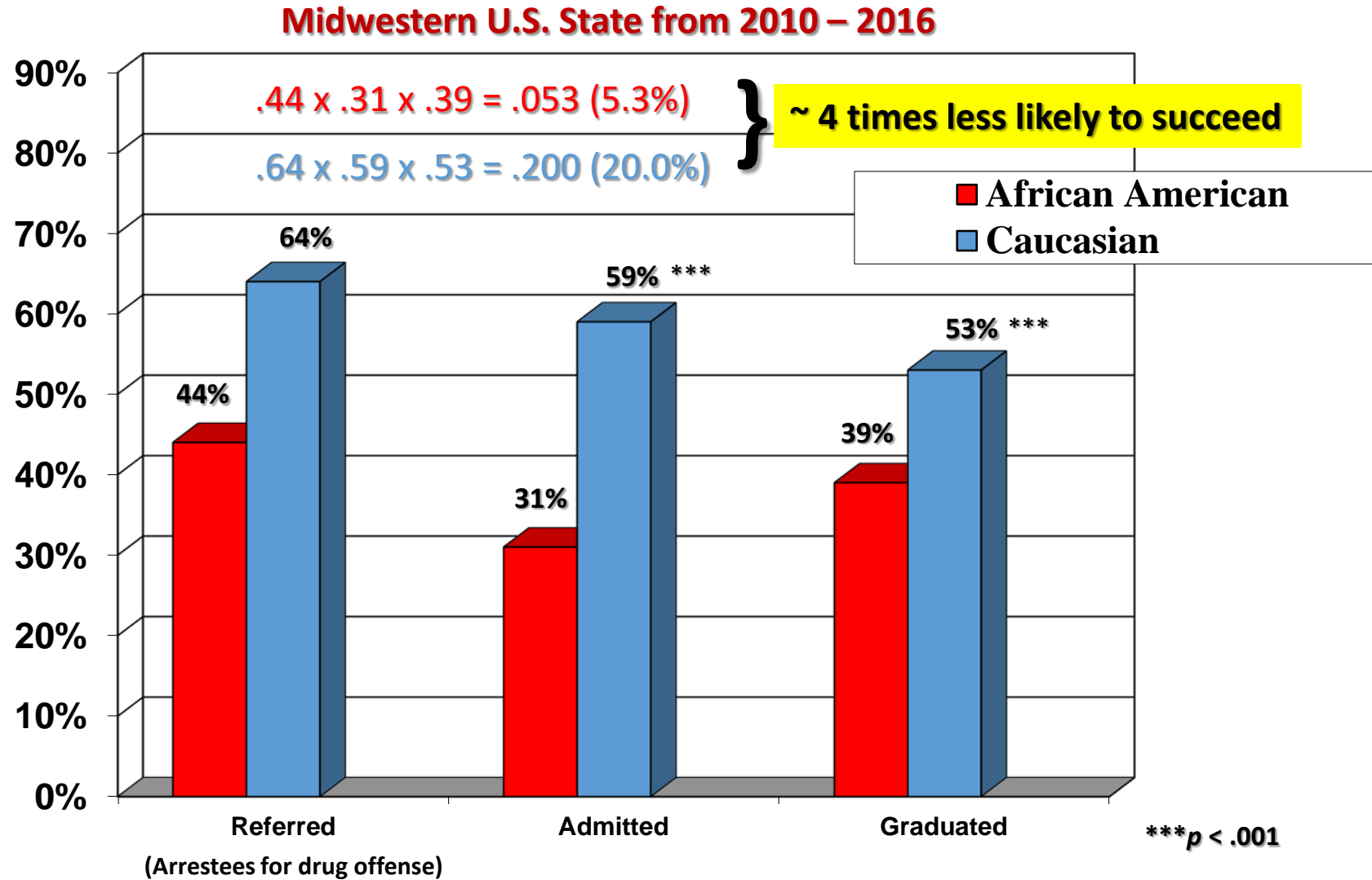
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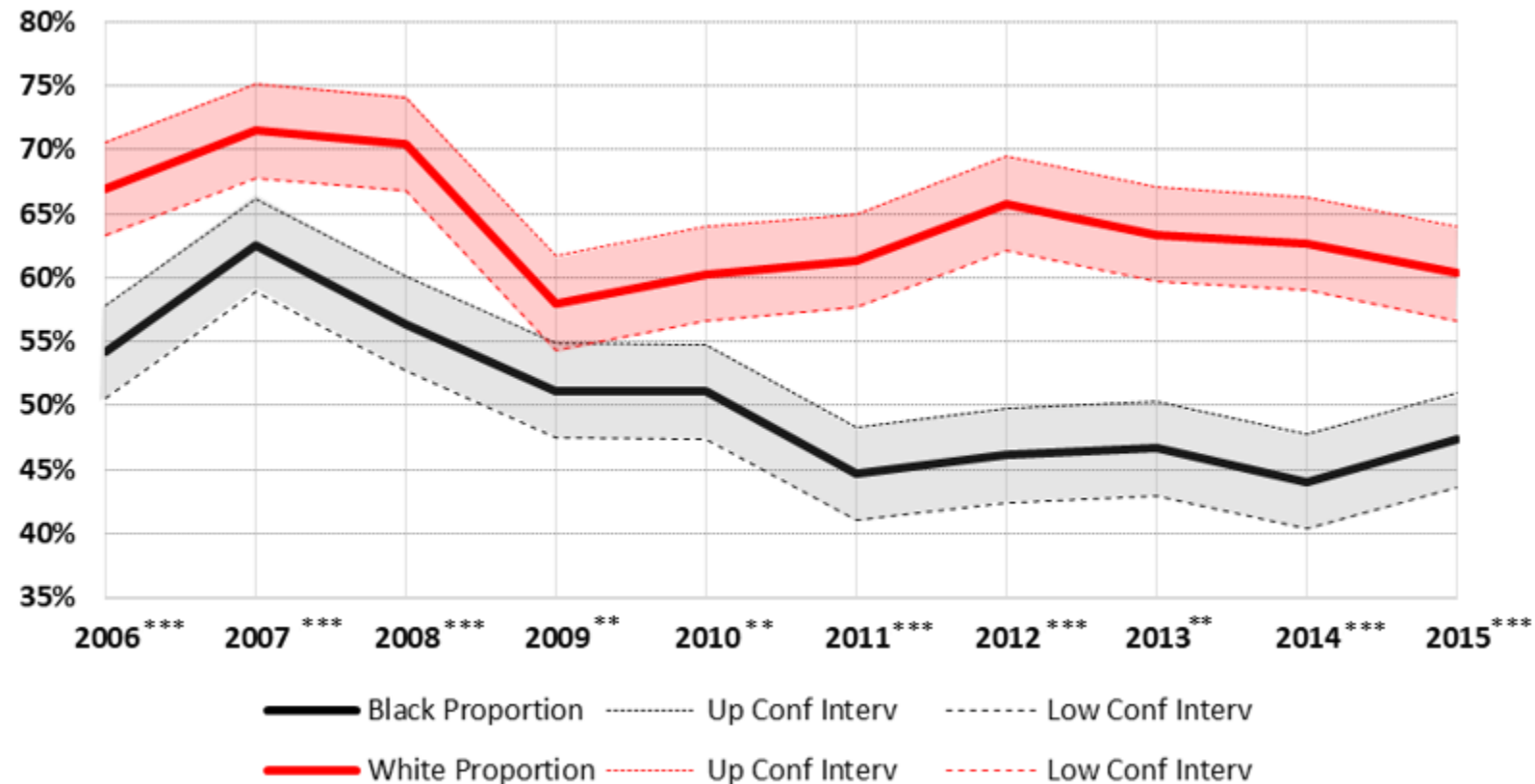


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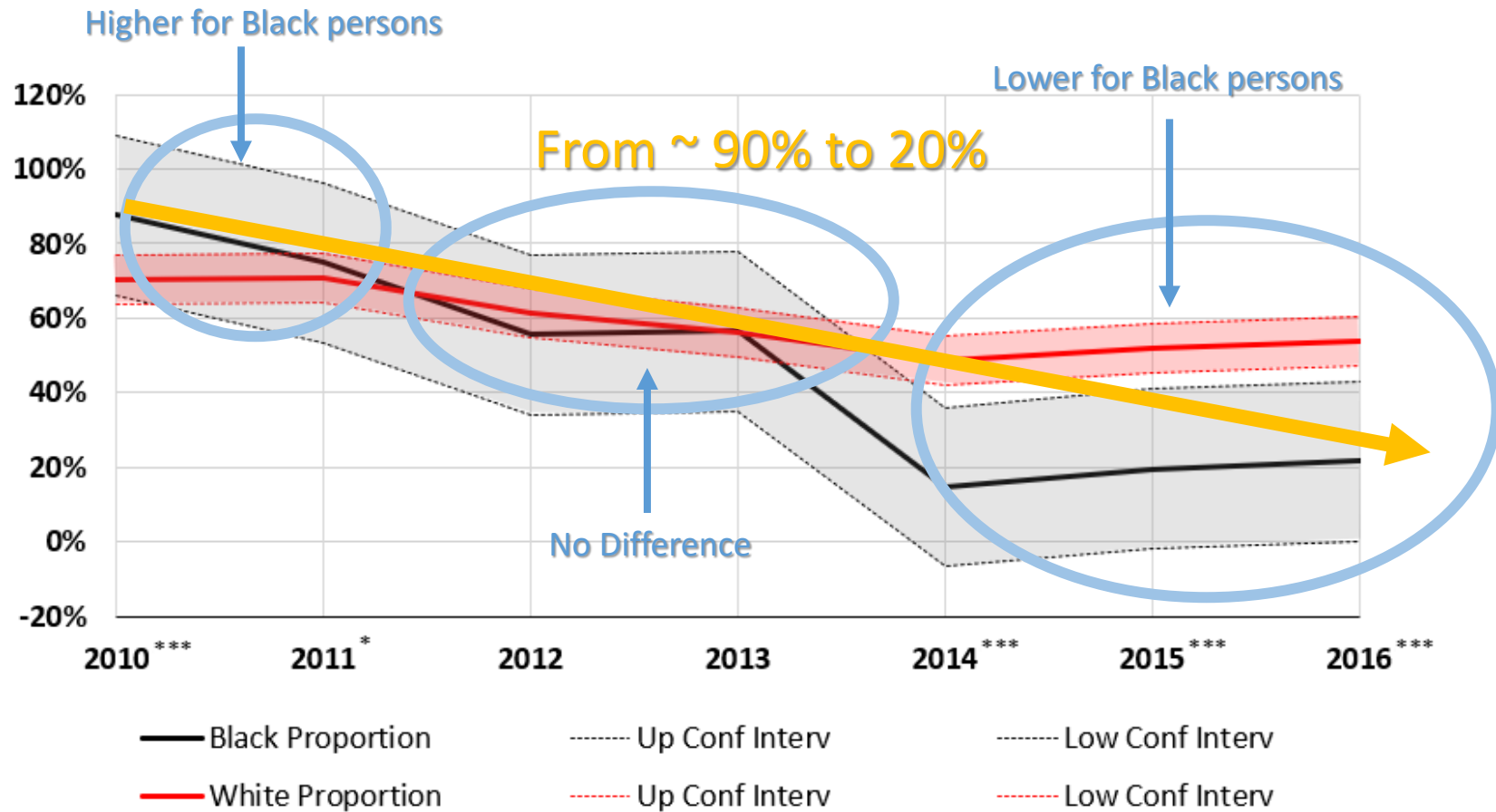
# PERCENT OF REFERRALS ADMITTED TO DRUG COURT IN A SOUTHERN STATE BY RACE AND YEAR

Consistently lower for Black persons



Note. \* $p < .05$ . \*\* $p < .01$ . \*\*\* $p < .001$ .

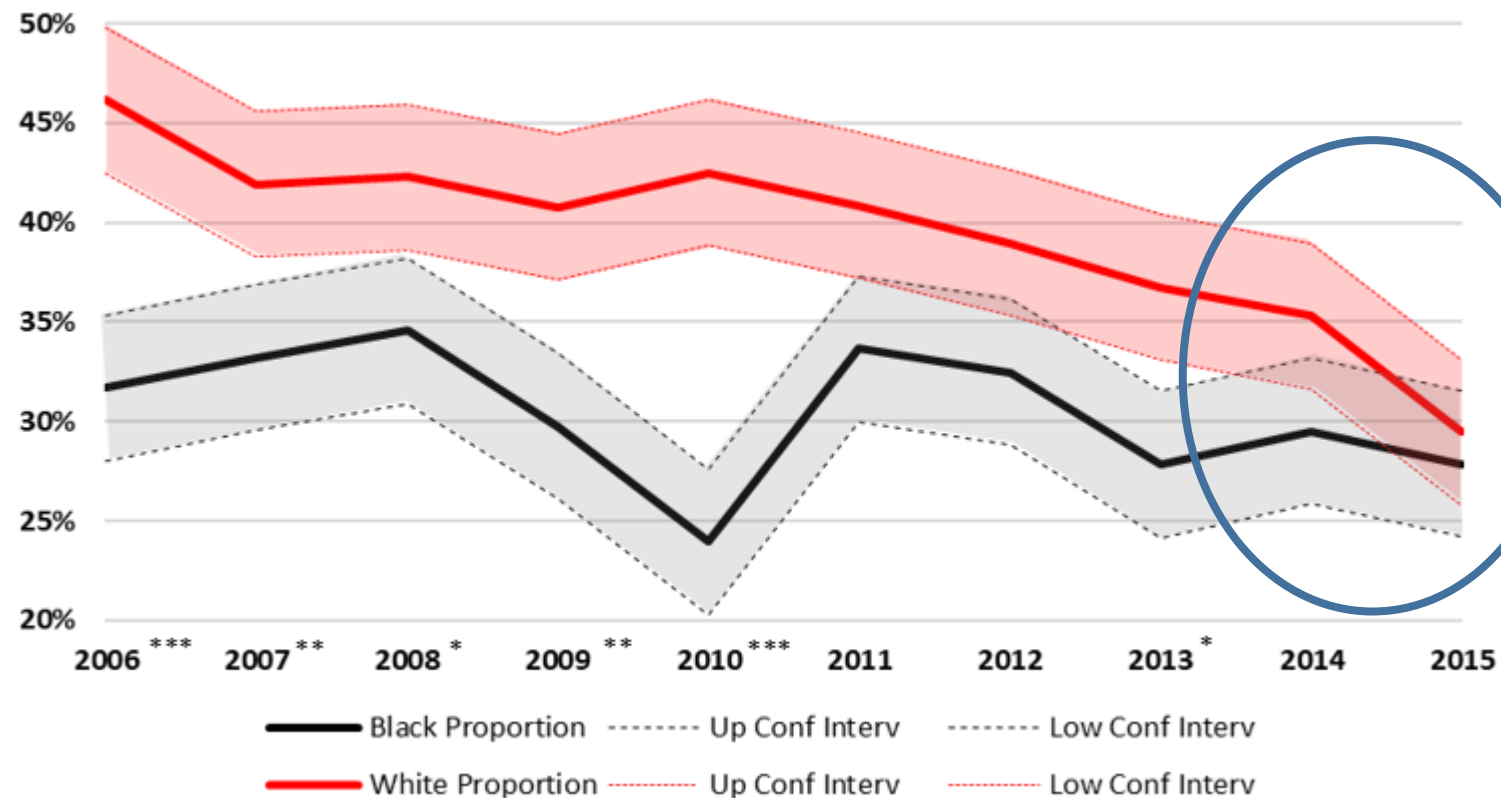
# PERCENT OF REFERRALS ADMITTED TO DRUG COURT IN A MIDWESTERN STATE BY RACE AND YEAR



Note. \* $p < .05$ . \*\* $p < .01$ . \*\*\* $p < .001$ .

# PERCENT OF ADMISSIONS SUCCESSFULLY COMPLETING DRUG COURT IN A SOUTHERN STATE BY RACE AND YEAR

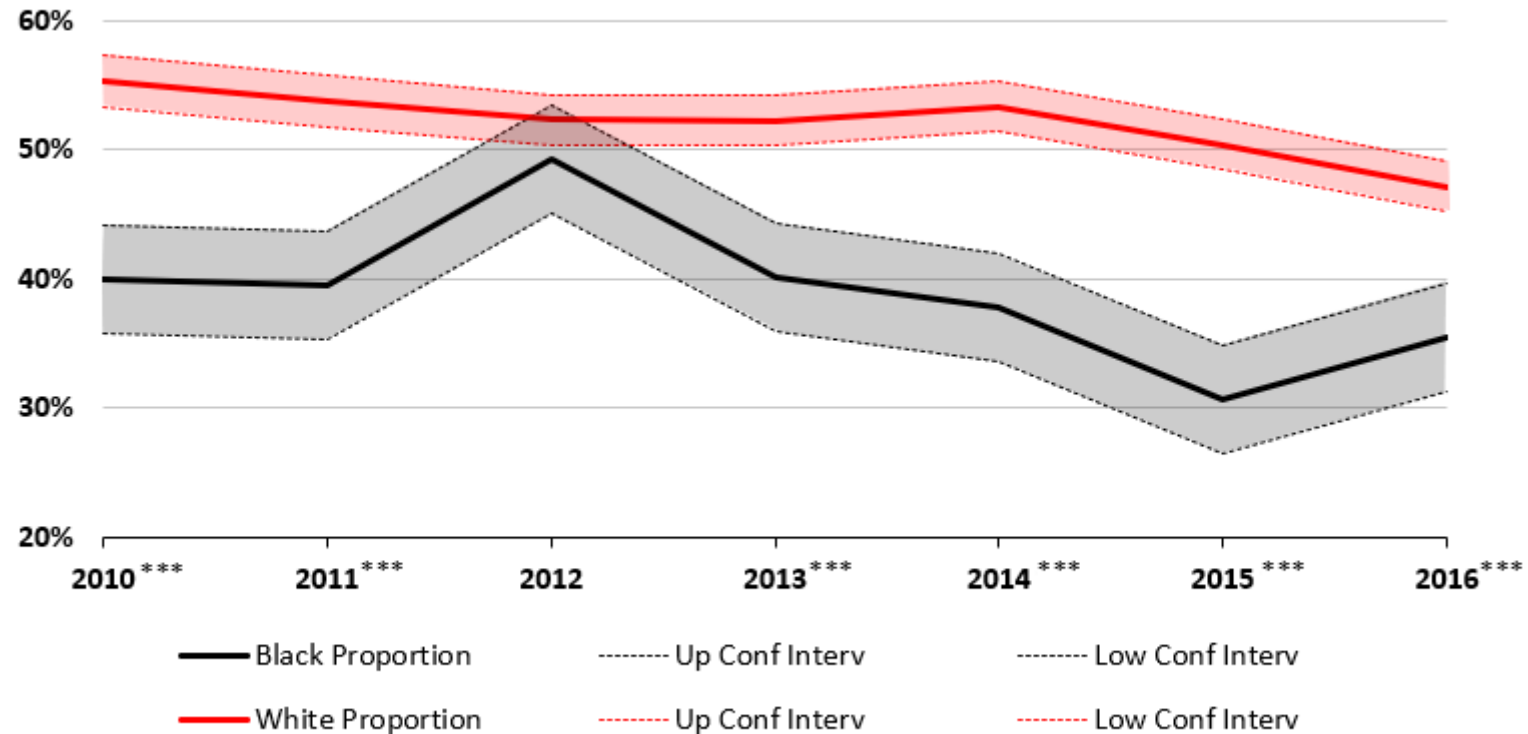
Converged in 2014 due to poorer outcomes for White persons



Note. \* $p < .05$ . \*\* $p < .01$ . \*\*\* $p < .001$ .

# PERCENT OF ADMISSIONS SUCCESSFULLY COMPLETING DRUG COURT IN A MIDWESTERN STATE BY RACE AND YEAR

Consistently lower for Black persons (except 2012)



Note. \* $p < .05$ . \*\* $p < .01$ . \*\*\* $p < .001$ .

# POSSIBLE REASONS FOR REFERRAL DISPARITIES

- Disqualifying charges (e.g., violence, drug dealing) that are not evidence-based (Carey et al., 2012; Cissner et al., 2013, 2015; Marlowe et al., 2008; Rossman et al., 2011; Saum & Hiller, 2008; Saum et al., 2001)
- Timeliness of drug court option (excessive pretrial detention)
- Untrusted source re. drug court option (e.g., prosecutor)
- Tone of drug court description (stigmatizing terms, emphasis on rules and consequences) (Janku, 2017)
- Defense counsel ignorance or resistance

# POSSIBLE SOLUTIONS TO REFERRAL DISPARITIES

- Eliminate non-evidence-based exclusion criteria (NADCP, 2013)
- Timely outreach to defendants, defense counsel and other officials (e.g., flyers and brochures at courthouse and pretrial detention emphasizing drug court benefits)
- Outreach by case workers and clinicians trained in social-marketing and motivational strategies
- Non-stigmatizing language
- Peer mentors or recovery support specialists with lived experience

# POSSIBLE REASONS FOR ADMISSION DISPARITIES

- Suitability determinations — motivation and recovery attitude not dispositive (Belenko et al., 2011; Cosden et al., 2006; Kirk, 2012; Rossman et al., 2011)
- Implicit bias or faulty assumptions about likelihood of success (especially prosecutors) (Janku, 2017)
- Clinical eligibility assessments not validated suitably for persons of color or women (e.g., Burlew et al., 2011; Carle, 2009; Perez & Wish, 2011; Wu et al., 2010)
- Under-reporting of clinical symptoms to criminal justice authorities, especially among young Black and Latinx men (e.g., Covington et al., 2011; Waters et al., 2018)

# POSSIBLE SOLUTIONS TO ADMISSION DISPARITIES

- Base targeting criteria on empirical evidence of safety and effectiveness and eliminate suitability determinations (NADCP, 2013)
- Use risk and need tools validated for candidates' cultures; if such tools do not exist, survey candidates about clarity and relevance of tools being used and validate with current candidates or participants (NADCP, 2013)
- Train assessors on effective interviewing and rapport-building strategies and use assessors with similar cultural backgrounds and gender identity to candidates

# POSSIBLE REASONS FOR GRADUATION DISPARITIES

- Cultural incongruity between participants and staff (e.g., Breitenbucher et al., 2018; Ho et al., 2018)
- Difficulty establishing cross-race therapeutic alliance (Connor, 2020)
- Perceived differences in procedural fairness (Atkin-Plunk et al., 2017)
- Failure to address greater needs for employment, educational, financial, trauma-informed, and mental health services (e.g., Cresswell & Deschenes, 2001; Dannerbeck et al., 2006; DeVall & Lanier, 2012; Gallagher & Nordberg, 2016; Howard, 2016; McKean & Warren-Gordon, 2011)
- Low priority or valuing of culturally proficient services (e.g., Ely & Thomas, 2001; Guerrero, 2010; Guerrero & Andrews, 2011)

# POSSIBLE SOLUTIONS TO GRADUATION DISPARITIES

- Include community-of-origin representatives on treatment court team and locate services within neighborhood (Breitenbucher et al., 2018; Ho et al., 2018)
- Offer family counseling (in-home outreach if possible), employment, and educational services
- Offer individualized or same-gender, group-based mental health and trauma-informed services
- Deliver culturally-proficient services incorporating cultural issues as core ingredient (e.g., HEAT) (Beckerman & Fontana, 2001; Marlowe et al., 2018; Vito & Tewksbury, 1998)
- Deliver evidence-based services focusing on problematic cannabis or stimulant use but not necessarily dependence (e.g., Dennis et al., 2004; Marinelli-Casey, et al., 2008)

# NEXT STEPS

- ✓ Treatment courts should collect reliable data on race, ethnicity, gender identity, and sexual orientation
- ✓ Evaluate reasons for disparities
- ✓ Provide training and technical assistance to help courts address these reasons
- ✓ Evaluate effects of training and technical assistance