An Examination of Idaho’s Felony Drug Courts:
Findings and Recommendations

EXECUTIVE SUMMARY

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EXECUTIVE SUMMARY

In 2001, the Idaho Supreme Court contracted with the University of Cincinnati’s Center for Criminal Justice Research to assess the effectiveness of drug courts operating throughout the State of Idaho. Researchers at the University of Cincinnati had been working to examine the effectiveness of several different types of drug courts in Ohio (see, Johnson, Travis, Latessa, Holsinger, 1999; Latessa, Shaffer, Lowenkamp, 2002; Shaffer, Listwan, Latessa, & Lowenkamp, 2007). A similar framework was developed for use in evaluating drug courts in Idaho. The original proposal identified potential measures of effectiveness and suggested evaluation processes that would allow for long term program evaluation. When the project began, Idaho had nine operational drug courts and eight in the planning stages. As of 2007, 41 drug courts have been implemented statewide\(^1\). This report will focus on a sample of eleven adult felony drug courts.

The current study was funded by the Idaho Supreme Court and the Substance Abuse and Mental Health Services Administration (SAMHSA). The project was a collaborative effort between the University of Cincinnati and Kent State University. The funding agencies involved were interested in three areas. First, the Supreme Court requested a reassessment of the operations, policies, and needs of the felony courts under study. Second, the Supreme Court was interested in the effectiveness (e.g., recidivism rates) of the felony drug courts operating across the state. Finally, SAMHSA grant requirements required an evaluation utilizing the client needs and service data collected through the Government Performance and Report Act (GPRA) system. The current study adds to the existing literature by providing a multi-site impact study of selected felony drug courts in Idaho. The project examines effectiveness as it relates to three

\(^1\) 20 are felony drug courts, 4 DUI courts, 8 combined misdemeanor/DUI courts and 7 juvenile drug courts.
broad areas of functioning (e.g., operations, outcomes, and needs). While most published evaluations report outcomes of only one court, the current study reports outcomes of eleven drug courts across the state in an effort to fill a much needed gap in our knowledge of drug courts overall.

I. Organizational Needs

The felony drug courts selected for the outcome evaluation were surveyed to document each court’s organizational practices and needs. As such, courts were asked to provide information related to their programs including:

1. The drug court process that includes eligibility and acceptance into the program
2. The assessment procedures and tools utilized
3. The programs case management procedures that include contingencies and rewards for behavior
4. The adequacy of the systems of monitoring and services available
5. The level of support for the program by the criminal justice community
6. The adequacy and sustainability of funding
7. The level of cooperation among drug court team members.

Methodology

Sample

This section analyzes survey responses from eleven adult felony drug courts operating throughout Idaho. The survey\(^2\), developed in collaboration with staff from the Supreme Court, was disseminated to the court coordinators in March 2006. This survey was similar to the survey sent to coordinators in June 2003 (see Listwan et al., 2004); however, the second wave was

\(^2\) A copy of the survey can also be found in Appendix B
disseminated only to those felony drug courts included in the statewide outcome evaluation (detailed in the next section). The coordinator from each court was asked to consult with other team members while completing the survey. The courts under study typically completed the surveys within 60 days.

The survey covered several operational and policy related areas. First, the background characteristics of the courts are portrayed and include, but are not limited to, the start date, graduation rate, court structure, and the court coordinator characteristics. Courts were also asked to detail the drug court process including the length of time successful and unsuccessful participants remained in the program, the intermediate sanctions used, and the services offered. Second, the drug courts were asked to detail the assessment process, the eligibility and exclusionary criteria, the use of rewards and consequences, and rate the adequacy or satisfaction with those processes. The courts also provided information as to whether any negative changes occurred that jeopardized the court process, the level of support received from the team, satisfaction with the level of cooperation, and how well the team worked together. Finally, the courts were asked a number of open ended questions to allow for the opportunity to offer suggestions for improvement.

Results

What is the drug court’s process that includes eligibility and acceptance into the program, the assessment procedures and tools utilized?

- The courts under study have been in existence for differing lengths of time with the youngest beginning in August 2003 (Quad County) and the oldest beginning in October 1998 (Kootenai County).
- In total, as of March 2006, the courts under study had served over 2000 drug involved clients.
• All of the courts under study indicated that they used assessment tool(s) including the LSI-R and a variety of substance abuse screening tools. The most frequently utilized tools were the GAIN Q and I, ASAM criteria, TCU scales, SASSI, MAST, DAST, and the Socrates.

• All of the courts utilized exclusions, with the most frequently cited areas including offense history, place of residence, assessment results, and level of motivation.

What are the court’s case management procedures including contingencies and rewards for behavior?

• All of the courts indicated that they offer drug testing during the week and on weekends. The majority of the drug courts, in collaboration with probation, utilize home visits, phone checks, employer checks and electronic monitoring.

• While all of the courts indicated that they utilized a variety of sanctions and rewards that were graduated or progressively more intense, seven of the 11 courts indicated that they had established a clear outline of sanctions and rewards.

• When asked whether they relied on rewards, consequences or both more frequently, the four courts (e.g., Bannock, Bingham, Kootenai, Madison) felt they relied on both equally. Ada, Bonneville, Canyon, Quad and Twin Falls indicated that they relied on rewards more often, and Latah and Nez Perce indicated they used consequences more frequently.

• All of the courts indicated that they held graduation ceremonies and presented awards to graduates.

How did courts rate the adequacy of the systems of monitoring, the funding and the services available?

• All of the courts indicated that they felt their system of consequences were either adequate or very adequate. Similar results were found with the system of rewards.

• Seven of the courts felt the level of funding was somewhat inadequate and only one of the courts felt the level of funding was very adequate. Courts did rate the question of whether the funding was secure more highly with seven courts indicating that they felt the level of funding was somewhat to very secure.

• In regards to the treatment services available to the drug court clients, the majority of the courts felt the services were either good or very good. The results pertaining to the services offered at the county level were mixed with four of the courts rating the services as either fair or poor.
What were the levels of support for the program, the adequacy and sustainability of funding & the levels of cooperation among drug court team members?

- The majority of the courts did not experience any changes in the areas of court processes, and community support.

- Three courts indicated that funding changes and changes in the area of treatment have jeopardized the smooth functioning of the drug court program.

- All of the courts felt the judge was somewhat to very supportive of the treatment efforts provided by the court. The results were mixed with regard to the prosecutors(s), defense attorney(s) and district court. Most of the courts indicated that they felt satisfied with the level of cooperation with the probation department; however, two courts indicated they were somewhat unsatisfied. Similarly, the courts indicated they felt satisfied with the treatment provider’s cooperation; however, three courts rated this item as undecided. A few of the courts also indicated that they were somewhat unsatisfied with the level of cooperation among those agencies who offer vocational services. Finally, with one exception, all of the courts were either satisfied or very satisfied with the level of cooperation they received from the Supreme Court.

II. Statewide Outcome Evaluation Results

The multi-site outcome evaluation was designed to examine the overall effectiveness of selected participants processed through 11 felony drug courts in Idaho compared to drug involved clients receiving traditional probation services. The current study builds upon the previous evaluations and research by examining the following research questions:

1. What are the characteristics of the offenders served by the drug courts & how do they compare to those in the probation group?

2. How do the groups compare on risk and need level?

3. What is the drug use profile among drug court participants?

4. Does participation in the drug court impact the likelihood that an individual will recidivate? What other factors predict the likelihood of recidivism?

5. What are the outcomes among graduates of the drug court programs? What factors predict likelihood of graduation?

6. Do the outcomes differ by LSI-R score?
Methodology

Design and Sample

In order to estimate the impact of drug court involvement on future criminal behavior, a quasi-experimental control group design was utilized. The quasi-experimental design is a common approach with program evaluations, since random assignment is difficult to obtain in criminal justice related programs. To assess the drug court’s impact on delivery of services and outcomes, participants who received services through the drug courts were compared on a variety of measures with similar adults who were exposed to traditional probation services. The evaluation focused on 11 adult felony courts. Focusing on these courts was important for a variety of reasons. First, while there were exceptions, felony drug courts typically serve a population with greater needs and more serious outcomes which have implications for cost effectiveness. Moreover, it was important to assess whether drug courts are a viable option for higher risk clients. Finally, comparing these adults with clients served on traditional probation allows the Supreme Court to assess whether an intensive treatment based intervention leads to a greater reduction in recidivism rates.

The data used for the current study were gleaned from the ISTARS database. The drug courts were given notice that the data downloads were going to be conducted in the Spring of 2006 and they were asked to ensure that they data were updated and complete. The county-by-county XML data downloads were sent to Kent State University for analysis. The time frame used for the current study included all drug court clients accepted into the 11 courts between July

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3 There are several problems with a quasi-experimental design, which should be noted. First, there are often important differences between those offenders who participate in a drug court and those who do not. When known, significant differences are controlled for, however, offender motivation to change and other important factors cannot be accounted for. Second, one cannot assume that some members of the comparison group did not receive treatment of some type. What we do know is that they did not receive the drug court model; however, in some jurisdictions it may be that treatment services similar to those offered through drug courts were available to the probation clients.

4 District 1: Kootenai, District 2: Latah & Nez Perez, District 3: Canyon & Quad, District 4: Ada, District 5: Twin Falls, District 6: Bannock, District 7: Bingham, Bonneville, Madison/ Jefferson/Freemont
1, 2002 and June 30, 2005. The recidivism time frame began at intake and continued until June 30, 2006. The sample end date of June 20, 2005 allowed each client a minimum 12 month follow up period.

The comparison group was selected through the Idaho Department of Corrections database on drug offenders who were being served on probation. Individuals were selected by filtering those adults who were on probation in the same counties in which the drug courts were operating and who were drug involved, defined by charge; however, they were served by probation instead of the court. The same time frame was used when selecting the comparison group.

Results

What are the characteristics of the offenders served by the drug courts & how do they compare to those in the comparison groups?

- The treatment group was slightly younger and more likely to be female, Caucasian, and married. However, while these differences do exist, it should be noted that the majority in both groups were men, Caucasian, and single.

- The majority of both groups (64 and 67 percent respectively) had received a high school diploma or equivalent (GED).

How do drug court participants appear on various indicators of drug use?

- Methamphetamines were the primary drug of choice among the drug court participants included in the study

- Thirty percent of the clients indicated that they began using their primary drug of choice between the ages of 15 and 18 (average age 17). A majority of the clients (69%) indicated that they were daily drug users.

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5 Information regarding why the client might not have gone to drug court was unavailable given the probation group was collected post-hoc, that is, once their status on probation was known. Clients who may have started in drug court and then were placed on probation after being unsuccessfully terminated were excluded.
• Forty-seven percent of the clients indicated that they smoked their drug of choice, followed by 19 percent who injected the drug and 12 percent who chose to take the drug orally.

• By combining the client’s first and second drugs of choice, we see that more than 80 percent of the clients being served by the selected felony drug courts in Idaho reportedly used methamphetamines at intake.

**Does participation in the drug court affect the likelihood that an individual will recidivate? What other factors predict the likelihood of recidivism?**

• With regard to court filing, significantly fewer drug court clients received a court filing during the follow period in contrast to members of the comparison group.

• With regard to charge, we see similarity between the groups when exploring drug related offenses, however, differences did emerge with the probation violation charge.

• The multivariate analysis revealed that members of the comparison group, those who were younger, males, and those with higher LSI-R scores were more likely to fail. Importantly, group membership was still a significant predictor of outcome beyond the bivariate differences found between the drug court and comparison group with regard to demographics (e.g., age, gender, marital status).

**What are the outcomes among graduates of the drug court programs? What factors predict likelihood of graduation? What are the outcomes/predictors among non-graduates of the drug court programs?**

• At the time of this evaluation, 298 participants in the drug court sample had graduated successfully. The collective graduation rate was 54 percent.

• The recidivism rate among graduates was 19 percent compared to 51 percent among the participants who were terminated as unsuccessful and 37 percent among the comparison group.

• Fifty percent of those categorized as unsuccessfully terminated were charged with a drug related offense as compared to 38 percent of the graduates and 45 percent of the comparison group members.

**Do the outcomes differ by LSI-R score?**

• According to the multivariate model, those who were older, female, had a high school degree, and who had lower LSI-R scores were more likely to graduate successfully from the drug courts under study.
• With regard to the LSI-R results, the drug courts under study are accepting some clients in the lower and upper ranges, however, the majority of clients fall within the 14 to 41 range. Fifty-six percent of the clients fall within the recommended target population.

• Specifically, 15 percent of the clients who failed fell within the less than 14 category received a new court filing, followed by 24 percent in the 14-24 category, 31 percent in the 25-41 category, and 57 percent in the highest category of 41 and above.

• There was a significant difference in recidivism rates among clients who scored below 35 compared to those who scored above 35 on the LSI-R.

• Graduates had lower mean scores on the LSI-R and lower recidivism rates by LSI-R score.

Section III. GRPA Data Summary

The final analysis for this project included an evaluation of five felony drug courts that received additional SAMSHA funds for enhanced residential treatment services. The funds were utilized to provide residential treatment, residential case management, and offer specialized phase four aftercare services following the first thirty weeks of active outpatient treatment. In addition, the project provided funds for staff training. Each of these courts was required, by the Government Performance and Results Act (GPRA), to complete a standardized intake assessment and provide baseline evaluation data. The courts were also required to collect client data at six and 12 months post-intake. This report will summarize the GPRA data available for the five felony drug courts who received SAMSHA funds. Areas of interest include:

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6 There were eight courts that eventually received SAMSHA funds for residential treatment. However, data were available for only the five drug courts included in this part of the study.

7 The Government Performance and Results Act of 1993 was passed by Congress in order to facilitate the linkage of management and resource decisions to program performance. GPRA was also designed to allow researchers to gather information on various government programs. In 2005, GPRA was updated to streamline and standardize the data requirements for GPRA researchers and data gathers. GPRA is designed to gather information by having all agencies develop a strategic plan, in which they describe what they hope to accomplish in three to five years. Also, they were required to set performance targets and produce reports to show whether the strategic plan was reached. Finally, agencies must regularly conduct assessments of their programs and use these assessments in order to objectively gauge the performance of their programs.

8 Part of the funding for the current project was through SAMSHA to analyze the existing GPRA data.
1. *A profile of the sample population from the courts receiving residential treatment dollars*

2. *Changes in self reported drug use between intake and six and twelve month follow up periods*

3. *Changes in the amount and source of wages earned by participants over time*

4. *Changes in self ratings of overall health over time*

5. *Treatment involvement among clients*

6. *Changes in reported mental health symptoms*

7. *Outcomes among participants in the drug courts in the selected sample*

**Methodology**

**Sample**

The sample for the current section is limited to the five felony drug courts that received SAMSHA funds for residential services. The drug court sites included: Bannock, Bingham, Bonneville, Canyon, and Madison counties. The clients included in the sample for this analysis were matched with the clients sampled as part the outcome evaluation. Intake data were available for 145 felony drug court participants. Of the 145 clients, 12 month follow up data were available on 97 participants.

**Results**

*A profile of the sample population from the courts receiving residential treatment dollars*

- The sample (n=97) included only those individuals who had 12 month follow up data.

- The mean age of the participants was 30 years old and forty-four percent were male and 85 percent were Caucasian. Sixty-three percent of the clients were classified as not married, nearly 60 percent had a high school diploma or equivalent, and 35

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9 Of the 145 clients, 24% came from Bannock Co, 11% Bingham, 18% Bonneville, 36% Canyon, and 11% Madison.
percent had children. The majority of the clients fell into either the medium or medium high risk category as determined by the LSI-R. The mean score among participants was 23.

- The majority have been involved with the system in the past. Specifically, 69 percent have a prior felony arrest, 67 percent a prior drug arrest, and 44 percent misdemeanor arrest. Thirty-seven percent of the clients surveyed have prior exposure to treatment services.

**Changes in self reported drug use between intake and six and twelve month follow up periods**

- Forty-three percent of the participants cited methamphetamines as their primary drug of choice, followed by marijuana and alcohol

- The self reported rate of use decreases substantially at both six and 12 month follow up periods.

**Changes in the amount and source of wages earned by participants over time**

- Self reported wage sources within the previous 30 days shows that the differences were in the expected direction, with wages increasing and assistance on others (and illegal sources) decreasing

**Changes in self ratings of overall health over time**

- Ratings of overall health improved significantly over time.

**Treatment involvement among clients**

- The majority of the clients were involved with outpatient drug treatment during the follow up periods

**Changes in reported mental health symptoms**

- Forty percent of clients indicate that they are still having mental trouble and 37 percent with depression at the 12 month follow up period.

**Outcomes among participants in the drug courts in the selected sample**

- Termination data indicated that 67 percent of the sample graduated successfully from the drug court.

- Twenty-five percent of the clients received a court filing during the follow up period. Thirty-five percent received a court filing involving drugs, followed by 22 percent for a probation violation.
Conclusions

The results of this evaluation are very promising. First, according to a national study completed by Belenko (2001), the average graduation rate among participants was 47 percent (range 36 percent to 60 percent). The felony drug courts under study have a graduation rate similar to the national average with the majority of the courts graduating between 50 and 60 percent of their participants. Second, data entered into ISTARS continues to increase with all of the courts indicating that they have 100 percent of their current participants in the system. Third, the courts are all using the LSI-R at intake. The courts are also using a variety of substance abuse assessment tools to screen clients at intake. Finally, the courts appear to be operating as designed; in particular, they reported the existence of aftercare, monitoring activities, rewards and graduated sanctions, experienced staff, assessment processes, eligibility and exclusionary criteria, and support and cooperation among team members and the community.

In terms of outcomes, we did find a treatment effect for the drug courts under study. The drug court clients had a significantly lower recidivism rate compared to the probationers. The clients most likely to fail included those who were male, younger, had higher LSI-R scores. Moreover, the clients were likely to fail in the first year when compared to subsequent years.

It appears that graduates are a highly successful group. This is in line with the research that finds that graduates fare better than comparison group members (Peters, et al. 1999). We can speculate that those individuals who receive the full “dosage” of treatment and finish the drug court requirements are more fully impacted, at least in terms of future criminal behavior. Predictors of successful graduation included those who were older, women, those who had a high school diploma, and those with lower LSI-R scores.
The GPRA data gave us additional insight into areas of functioning. For example, clients were less likely to rely on wages rather than assistance from others by the six month and the 12 month follow up periods. The amount of wages earned also increased over time for the clients. Moreover, the participants self reported increases in overall health at the six and twelve month follow up period. While the data were mixed in regards to improvement for mental health symptoms, the participants appeared to improve overall.

**Recommendations**

Overall the drug courts under study were effective in reducing recidivism. However, areas for improvement do remain. In terms of assessment, the drug courts should be reassessing all of their participants with the LSI-R. Although the majority of courts are using the instrument, very few courts appear to be utilizing it to its full potential. As offenders progress through treatment, their risk and needs change and the LSI-R results should be an integral part of the service delivery plan. Moreover, these results should also be used in aftercare planning and relapse prevention. Without these results, we are unable to assess the full impact of the drug court intervention on risk of future offending.

We support the State’s current efforts to recommend that all of the courts adopt the same standardized drug assessment tool. The courts can utilize the tool to standardize their acceptance criteria and match the findings with treatment dosage. The combination of LSI-R and substance abuse results would give the courts a comprehensive picture of the clients’ overall risk and needs and further facilitate treatment planning. Treatment intensity or dosage should be clearly matched to the offender’s level of risk with higher risk clients receiving more intense levels of treatment.
While most of the courts reported that they used rewards and consequences, five of the eleven indicated that they did not have a clear outline of how these are tied to behaviors (both positive and negative). Drug courts have the opportunity to increase the effectiveness of treatment by using rewards and punishers in a consistent and equitable manner. The consistent application and awareness of rewards and consequences are key in teaching a client to understand how their behavior affects consequences in their environment. Behaviors that are reinforced are more likely to be repeated and behaviors followed by a negative consequence are likely to be extinguished. A clear outline of rewards and consequences that will be consistently applied to behavior is crucial step to increasing the likelihood of behavioral change.

The issue of funding was raised on several occasions by several courts. The courts expressed a need for funding for treatment services, staff, drug testing and monitoring. Each court must attempt to prioritize the needs of the court and balance that with the need of the participants. Overworked staff can be as detrimental to the effectiveness of the court as problems with service availability. Courts should also consider whether they are attempting to serve too few clients to justify the resources dedicated to the court. In contrast, other courts should examine whether they are serving too many clients. In some cases, reducing caseloads in an effort to increase quality may be seen as more beneficial than treating a large quantity of clients.

Support and cooperation among certain team members was a concern among several courts. One of the unique aspects of the drug court model is the collaboration among the drug court team. Collaboration is important given effective leadership and communication facilitates the infrastructure needed for effective programming. While it is recognized that prosecutors and defense attorney’s may disagree at certain points in the process, the drug court model demands
that everyone work together for the common good of the participant. The collaborative approach is not only useful for the participant as the system strives to rehabilitate the offender but also for the court itself. A team that does not work together frequently spends more time with administrative dilemmas and less on service delivery. This seamless approach to treatment will help ensure the program is being delivered appropriately and the offender’s needs are being met.

The courts should be mindful of the multivariate results. Much can be learned from examining the participants who fail to complete the drug court as well as the participants who are graduating successfully. Courts should analyze their retention rates and the characteristics of those who fail. On an aggregate level we can say that gender, age, and LSI-R score are important predictors of recidivism. In addition, we found women were more likely to graduate than men. In some respects this makes sense given drug court staff, as a result of the service based approach, may be better positioned to respond to certain “responsivity” needs of women such as mental illness, childcare, transportation, housing, and prior abuse. However, that does not answer why men are more likely to fail. Courts should examine the needs and issues of men and younger participants and ask whether the population is receiving the most effective combination of treatment type and dosage.

The data exploring LSI-R score and outcome indicated that drug courts should consider excluding low risk clients (under 14) unless assessed as having a substantial need in the area of substance addiction. The target population should continue to include moderate to high risk clients. Currently, the recidivism rate among drug court clients scoring above 34 on the LSI-R is nearly twice that of those scoring between 15 and 34. There are two issues here that should be considered. First, drug courts should be assigning treatment dosage and supervision strategies based on the client’s LSI-R results. We know that drug courts are not a one-size-fits-all solution
to the drug problem. Drug treatment within the drug court model should also not be a one-size-fits-all approach. Furthermore, courts should be mindful that those participants who score in the mid-thirties or above should be receiving a higher level or dosage of service. Based on these results, we can speculate that these clients may not be receiving adequate levels of treatment. There was also a statistically significant difference in mean LSI-R scores between the drug court graduates and unsuccessful drug court clients. The findings provide evidence that the courts should critically analyze their treatment protocols.

Finally, drug courts should develop quality assurance mechanisms to ensure that the providers are offering high quality services. While the survey results indicated that drug court members were generally satisfied with their treatment provider(s), the courts should continue to ensure that they providers are using evidence based approaches. The majority of the program activities, groups, and services should be directed toward reducing criminogenic needs and risk factors. While substance abuse does provide the starting point for treatment, the courts should also ensure that the providers are using effective models to address other important needs. Moreover, probation or agencies involved in the supervision of clients should be trained on the cognitive behavioral model. This model, particularly as it relates to the delivery of rewards and consequences, is very relevant to probation officers. Together, the drug court team members should continue to work as a therapeutic alliance for their clients.