

Evaluation of
VIRGINIA'S DRUG TREATMENT
COURT PROGRAMS
(Phase 1)



Office of the Executive Secretary
Supreme Court of Virginia

Table of Contents

Executive Summary	3
Introduction	7
The Drug Court Model	
<i>Definition and Components of Drug Treatment Courts</i>	8
<i>Role of the Judiciary in Drug Treatment Courts</i>	10
<i>How Do Drug Courts Differ from Intensive Probation or Court-Ordered Treatment</i>	10
Virginia's Drug Court Programs	
<i>Virginia's Operational Drug Treatment Courts</i>	17
Therapeutic Courts: The National Perspective	
<i>The National Perspective</i>	18
<i>Types of Therapeutic Courts</i>	19
<i>Number and Types of Problem Solving Court Programs in the U.S.</i>	22
<i>Map of Therapeutic Courts in the U.S. in 2003</i>	23
Virginia's Drug Court Management Information System	
<i>Program Goals and Measurable Objectives</i>	24
<i>Selected Management Information System Data Screens</i>	28
Statewide Evaluation of Virginia's Drug Courts	
<i>Types of Drug Court Evaluations</i>	34
<i>Summary of 2004 Descriptive and Impact Evaluations of Virginia Drug Treatment Courts</i>	37
<i>Descriptive Evaluation of Virginia's Adult Drug Court Programs</i>	40
<i>Descriptive Evaluation of Virginia's Juvenile Drug Court Programs</i>	62
<i>Descriptive Evaluation of Virginia's Family Drug Court Programs</i>	77
<i>Retention of Virginia's Drug Court Participants</i>	91
<i>Offense Severity and Chronicity of Drug Court Participants</i>	94
<i>Number of Misdemeanors and Felony Arrests Prior to Drug Court Admittance</i>	101
<i>Description of Adult Drug Court Impact Study Population</i>	104
<i>Description of Juvenile Drug Court Impact Study Population</i>	108
<i>Recidivism of Virginia's Adult Drug Court Grads and Non-Grads</i>	111
<i>Statewide Adult Drug Court Misdemeanor and Felony Recidivism Rates</i>	120
<i>Recidivism of Juvenile Drug Court Graduates and Non-Graduates</i>	121
<i>Statewide Recidivism of Juvenile Drug Court Graduates and Non-Graduates</i>	122
References	127

Executive Summary

The Office of the Executive Secretary (OES) was awarded a U.S. Department of Justice Grant (# 2002-DC-BX-0034) to conduct comprehensive statewide evaluations of Virginia's drug court programs. When the grant was awarded in 2002, there were fourteen drug treatment court programs in Virginia. Twelve additional drug treatment court programs have been implemented since that time. Of the current twenty-six operational drug treatment court programs, thirteen are Circuit Court (adult felony) programs, two adult misdemeanor (DUI and misdemeanor drug) drug courts, eight juvenile drug court programs, and three family drug court programs.

This report presents the results of two evaluation efforts: (1) a process evaluation reporting myriad facts about program policies and procedures and descriptions of Virginia's adult, juvenile, and family drug court participants, and (2) an outcome evaluation reporting drug court participant retention rates and graduate and non-graduate (terminated or withdrawn participants) recidivism rates. Also included in the outcome evaluation is an analysis of the severity and chronicity of offenses committed by participants prior to their drug court admittance. Severity and chronicity assessments were conducted to examine whether drug courts accept only "light weight" offenders or more serious and chronic offenders.

In the coming year, five other evaluations are planned to give additional information about Virginia's drug court programs: (1) a quasi-experimental impact study comparing drug court results with the outcomes of drug offenders in matched control groups; (2) qualitative staff and participant assessments of operational drug court programs; (3) a Delphi study of treatment components of Virginia's drug court programs; (4) a cost assessment study; and (5) a summative analysis of participant variables related to successful drug court outcomes.

Each type of drug addiction (alcoholism, crack addiction, narcotics addition, etc.) has different treatment protocols and different rates of success. In addition to differences in treatment needs, participant profiles vary between Virginia's drug court programs. For example, a post-dispositional program may accept only probation violators who have exhausted other sentencing alternatives and are facing lengthy incarceration. A pre-dispositional drug court may catch addicts earlier in their criminal history. Another drug court may accept homeless people or those with mental illness as well as addiction. Because of the wide variability in participant populations among Virginia's drug courts, the reader is urged to resist comparing one drug court program with another. Rather than compare

programs, it is important to ask the “big picture” questions: (1) do drug courts reduce subsequent drug-fueled crime overall?; (2) what is the longevity of program impact on sobriety and criminal offending?; (3) which program elements increase program success measures of increased retention and reduced recidivism?; and, (4) which participant profiles are most amenable to success in drug treatment courts?

Virginia drug court programs require offenders to plead guilty prior to drug court admittance. Some drug court programs are primarily pre-dispositional (facts are found sufficient for conviction, adjudication is deferred pending program outcome, and, with program graduation, admitting charges may be reduced or dismissed) while other programs are primarily post-dispositional (participant is found guilty, sentenced, and drug court success may earn reduction or dismissal of sentence). Newer drug court programs tend to follow the post-dispositional model. Of the operational adult drug court programs, two are pre-dispositional, six are post-dispositional, and seven are a combination of the pre-dispositional and post-dispositional models.

Of the 3216 Virginians admitted to adult felony drug court programs between November 1995 and December 2004, a total of 2002 have graduated or are currently enrolled in the programs. The resulting retention rate is 62.25%. Juvenile drug courts have admitted 371 youths. Of this total, 217 have graduated or are currently enrolled resulting in a retention rate of 58.49%. An additional 66 addicted parents have been admitted to Virginia’s family drug treatment court programs. Twenty-seven have graduated or are currently enrolled for a retention rate of 40.9%. Retention is an important benefit of drug court programs. Lower recidivism rates correlate with longer periods of drug treatment. Drug court participants stay in treatment longer and have higher program completion rates than other criminal justice-involved addicts who voluntarily enter substance abuse treatment. Virginia drug court participants stay a minimum of twelve months in judicially-supervised treatment programs. Research indicates that addicts who stay in treatment over a year have twice the recovery rates as those who fail to stay in treatment at least a year.

National studies indicate that recidivism rates of drug court graduates are half or less than half the recidivism rates of other addicted offenders not participating in drug courts. The 2004 Virginia drug court impact study included 2,056 adult drug court participants. Of these, 647 participants have graduated from a drug court program. Of the total number of graduates, 103 have been arrested for felony offenses after drug court graduation. This represents a statewide

felony recidivism rate of 15.9% for adult drug court graduates. There were 59 drug court graduates who had misdemeanor arrests resulting in a misdemeanor recidivism rate of 9.1%. Recidivism rates of drug court non-graduates were also examined. Non-graduates include former drug court participants who withdrew or were involuntarily terminated from drug court programs. Of the total sample of 2,056, 918 former participants are drug court non-graduates. Of these, 303 were arrested for felony offenses after leaving drug court. This results in a felony recidivism rate for non-graduates of 33.0%. There were 72 non-graduates who were arrested for subsequent misdemeanor offenses. This represents a 7.8% misdemeanor recidivism rate for non-graduates. It is apparent that adult drug court graduates have significantly lower felony recidivism than non-graduates.

As previously mentioned, the Office of the Executive Secretary plans to conduct a quasi-experimental impact study that will compare the outcomes of drug court participants with matched control groups of drug offenders in localities that do not have drug court programs. Until the planned quasi-experimental study is completed, the recidivism “measuring stick” is a study conducted by the Virginia Criminal Sentencing Commission (VCSC) in 1999. The VCSC study concluded that Virginia adult drug offenders treated in traditional ways of incarceration or probation had a 50% *felony* recidivism rate. The felony recidivism rate for drug court graduates (15.6%) is significantly lower than the felony recidivism rate of drug offenders examined in the VCSC study. Even the felony recidivism rate of drug court non-graduates (33.0%) is significantly lower than the VCSC sample. This may indicate that drug court programs have a positive impact on subsequent recidivism of drug offenders who spend some time in the programs whether they graduate or not.

The impact study of juvenile drug court participants sampled a population of 325 juveniles. The average statewide recidivism rates of juvenile drug court graduates is 12.6% (felony recidivism) and 12.6% (misdemeanor recidivism). The average statewide recidivism rates of juvenile non-graduates (those who withdrew or were expelled from the programs) is 26.9% felony recidivism and 11.9% misdemeanor recidivism. As found with the adult drug court population, there is a decided advantage in terms of lower recidivism for juvenile drug court participants if they complete the treatment program and graduate.

While national and state drug court recidivism studies indicate reduced recidivism for graduates, some believe these positive findings may be attributable to “skimming off the top” (selecting light weight offenders who would be unlikely to re-offend regardless of drug court

placement or traditional probation/incarceration placement). To determine whether Virginia's adult drug court participants were "lightweights", their arrest records prior to drug court attendance were analyzed. Results of this analysis indicate that drug court participants have extensive arrest records. Drug court participants have a total of 11,435 misdemeanor arrests and 13,972 felony arrests prior to entering Virginia's drug court programs. The average number of felony arrests per adult drug court participant is 6.8 with an additional 5.6 average misdemeanor arrests prior to drug court admittance.

An additional analysis of the severity level of arrests prior to drug court admittance indicated an average severity weight of 50.38. Severity ratings, based on the offense severity study conducted by Virginia Criminal Sentencing Commission, were assigned to each of 26,681 arrest charges in the criminal records of drug court participants. The range of severity ratings was between approximately 4 and 738. As an example, drunk in public is at the lower end of the ratings with a score of 4 and first degree, non-capital murder is at the top of the scale at 738. Scores similar to the average drug court participant scores include the following: obtain drugs by fraud (52); possession of schedule 1 or schedule 2 drugs (47); prostitution (45); and bad checks over \$200 (41). The average severity weights of participants per program ranges between 43.39 to 56.20 indicating a consistent and narrow range of severity ratings between different drug court programs in Virginia. It appears that Virginia localities are correctly targeting the population (non-violent, drug offenders) intended to participate in drug court programs and are excluding serious violent offenders. Offense severity weights in the 40+ range are commonly assigned to felony-level rather than misdemeanor-level offenses. In conclusion, the severity and chronicity assessments of prior offense records indicate the drug court participants' have multiple misdemeanor and felony offenses, an average severity rating common for felony drug offenders, and consistent ratings across local programs indicating that drug courts are accepting their intended target population of non-violent drug offenders.

Introduction

Drug treatment courts are considered to be one of the most promising strategies available to address the problem of drug-related crime. Drug treatment courts are not separate courts; they are specialized court dockets within the existing structure of Virginia's court system. They offer judicial monitoring, intensive treatment, and strict supervision of non-violent addicts in drug and drug-related criminal cases. Through these programs, the court system is attempting to: (1) reduce drug addiction and drug dependency among criminal offenders; (2) reduce recidivism; (3) increase accountability among offenders; and (4) promote more effective planning and use of resources among criminal justice system and community agencies. All drug court programs in Virginia require offenders to plead guilty prior to drug court admittance.

During its 2004 General Assembly session, the legislature adopted the Drug Treatment Court Act. In so doing, the General Assembly recognized that there is a critical need in the Commonwealth for effective treatment programs that reduce the incidence of drug use, drug addiction, family separation due to parental substance abuse, and drug-related crimes. Through the establishment of drug treatment court programs, the General Assembly expressed its commitment to enhance public safety by facilitating the creation of drug treatment courts as a means to fulfill these needs.

The Act transferred to the Supreme Court of Virginia the responsibilities for administration and supervision of drug treatment court programs. The strong support evidenced by the General Assembly in adopting this measure is echoed within the court system, both by drug treatment court judges in the trial courts and by the Supreme Court itself. The Court supports the existence of such programs as specialized dockets within the existing structure of Virginia's court system. Further, in June 2004, the Governor's Preventing Crime in Virginia's Minority Communities Task Force recommended to Governor Warner that drug treatment court programs be expanded to every judicial district and circuit throughout the state.

Under the Act, the Court is responsible for (i) providing oversight for the distribution of funds for drug treatment courts; (ii) providing technical assistance to drug treatment courts; (iii) providing training for judges who preside over drug treatment courts; (iv) providing training to the providers of administrative, case management, and treatment services to drug treatment courts; and (v) monitoring the completion of evaluations of the effectiveness and efficiency of drug treatment courts in the Commonwealth.

The evaluation project is a bifurcated effort with two evaluations completed in 2004: A process evaluation reporting myriad facts about program policies and procedures and descriptions of Virginia's adult, juvenile, and family drug court participants was completed in December 2004. An impact evaluation reporting impact measures of retention and recidivism rates. The impact evaluation also examined the severity and chronicity of offenses committed by participants prior to drug court admittance.

In the coming year, five other evaluations will be completed that will provide additional information about Virginia's drug court programs: (1) a quasi-experimental impact study comparing drug court results with the outcomes of drug offenders in matched control groups; (2) qualitative staff and participant assessments of operational drug court programs; (3) a Delphi study of treatment components of Virginia's drug court programs; (4) a cost assessment study; and (5) a formative evaluation of participant variables related to successful drug court outcomes.

This report fulfills the legislative mandate for statewide evaluation of Virginia's drug treatment courts for 2004.

The Drug Treatment Court Model

Definition and Components of Drug Treatment Courts

Drug treatment courts are specialized court calendars or dockets specifically designed to take advantage of the court's influence over ensuring the positive development in offender behavior. The outcome and goal of this special docket is the reduction in recidivism and substance abuse among nonviolent, substance abusing offenders by increasing their likelihood for successful rehabilitation through expedited, continuous, and intense judicially supervised treatment; mandatory periodic drug testing; and the use of graduated sanctions and other rehabilitation services (Drug Courts Program Office, United States Department of Justice, 2000).

Drug treatment courts are developed through multidisciplinary and interagency initiatives. Judges, Commonwealth's Attorneys, defense attorneys, treatment professionals, social services professionals, local law enforcement and jail staff, and personnel from the Department of

Corrections, Community Corrections and Pre-Trial programs are represented in this problem-solving approach.

As an alternative to traditional approaches to adult and juvenile incarceration or probation, drug offenders are placed under strict and intensive court monitoring and community probation supervision. Drug treatment courts require frequent drug testing and intensive substance abuse and mental health treatment. Job skill training, job placement, family/group counseling, and other life-skill enhancement services are frequently provided.

Drug treatment courts are not separate courts, but rather specialized, or segmented dockets. Drug treatment court judges spend approximately one to three hours per week presiding over their drug treatment court docket with the remainder of their bench time spent on a traditional caseload. Because program graduates are less likely to recidivate and experience higher rates of recovery, drug treatment courts are considered an appealing and cost-beneficial alternative to the revolving door of drugs and crime that result in escalating court dockets.

Because Virginia's drug treatment courts have been developed through the collaboration of local public and private sector officials, there are variations in policies and procedures. However, all of Virginia drug treatment courts share common characteristics, including: a) judicial supervision of intensive community-based probation and addiction treatment; b) timely identification of defendants in need of substance abuse treatment; c) expedited referral to treatment resources soon after arrest; d) regular progress hearings before the judge to monitor probation, treatment, and program compliance; e) increased defendant accountability through a series of graduated sanctions and rewards; and f) mandatory and frequent drug testing.

While eligible addicted offenders are offered the drug treatment court option, their participation is voluntary. If they elect to participate in the drug treatment court, they are agreeing to subject themselves to frequent drug testing (daily or several times a week), intensive group and individual outpatient therapy (2-3 times per week), and regular attendance at Narcotics Anonymous or Alcoholics Anonymous meetings. Participants are required to pay court costs, restitution, and, in some cases, all or a portion of their treatment costs. Additionally, they must be employed or in school full-time. Participants also must submit to intensive and interactive scrutiny by the drug treatment court judge, probation staff, treatment providers and drug treatment court staff. A participant's tenure in the drug treatment court program, which averages twelve to eighteen months, is increased when they relapse or commit procedural violations that negatively impact their satisfactory progress and completion of individual goals.

Some Virginia drug treatment court programs offer incentives designed to encourage satisfactory completion of the terms of placement, such as reduced or dismissed charges and sentences for graduation from the strenuous drug treatment court program. Even with such incentives, Virginia's drug treatment court judges and prosecutors say that many offenders often choose incarceration or probation believing them less obtrusive and restrictive than the stringent requirements of drug treatment court. If a drug treatment court participant is revoked from the drug treatment court program due to excessive relapses or other forms of program violations, the person will return to court for sentencing (pre-dispositional offenders) or have their original sentence imposed (post-dispositional offenders).

Role of the Judicial System in Drug Treatment Courts

The main purpose of drug treatment courts is to use the authority of the court to reduce crime by changing defendants' drug abusing behavior. Typically, judges preside over drug treatment court proceedings; monitor the progress of defendants through frequent status hearings; and prescribe sanctions and rewards as appropriate. Because of the strong association between drug addiction and crime, judges have a legitimate interest in dispositions that fit the crime and best protect public safety. Additionally, courts must look for long-term solutions to crowded dockets largely caused by repeat drug offenders and limited sanctions such as incarceration that have proven ineffective in changing an addict's habits. By addressing the "demand side" of drug abuse, courts further reduce the probability of the addicts' future arrest and court involvement.

Judicial oversight and regular monitoring is invaluable as it ensures offender accountability to conditions of probation and compliance with treatment. The enhancement provided by the drug court judge acts as a positive reinforcement from an authority figure and further reinforces the offender's course to recovery. There is simply greater inducement to take drug treatment seriously when the power and authority of the court is directly involved. The judiciary also provides leadership in promoting and maintaining interagency cooperation and collaboration, a vital component for the success of any drug treatment court.

How Do Drug Courts Differ From Intensive Probation or Court-Ordered Treatment?

According to a sample of Virginia drug court professionals, the interdisciplinary and interagency cooperation characteristic of drug courts represents the best model of service

integration for addicted offenders. Drug court professionals believe that lack of integration and agency accountability for provision of necessary services is a significant factor in historically low rates of addiction recovery and subsequent arrests of addicted offenders. Figures 1 and 2 exemplify differences in interagency and interdisciplinary collaboration between intensive probation and the drug court model. In general, the intensive probation model assigns all responsibility for personal contacts with probationers, record checks, community contacts (with employer, family, clinicians, community referral sources, and other significant persons or agencies) to the probation officer. State guidelines establish the minimum number of personal, home, family, and community contacts. District policies establish the minimum number of urinalysis screens. Essentially, the probation officer must contact the involved persons and agencies for information on each probationer.

In contrast, the drug court model assembles professionals (judge, clinicians, probation officers, case managers, prosecutors, public defenders (or defense attorneys), police or sheriff's deputies) who are involved with drug court participants. This professional group mutually works with the drug court participant group and meets weekly to share information about the participants' progress. In contrast to intensive probation, there is "economy of scale" with the drug court model (i.e., for purposes of illustration, we will use an average caseload of 45 and a drug court team composed of 6 to 7 drug court professionals. The drug court team distributes the workload of intensive monitoring, treatment, assessment, and case management. The team meets for two to three hours per week to discuss the progress of entire group of 45 participants and hold the drug court hearing. This contrasts with one probation officer spending several hours per week per probationer to gather information from the various professionals involved).

Two state agencies are responsible for intensive probation supervision of addicted adult offenders: the Virginia Department of Corrections (DOC) and the Virginia Department of Criminal Justice Services (DCJS). The Virginia Department of Juvenile Justices (DJJ) serves juvenile probationers. According to DCJS Community Corrections officials, there are varying local standards for intensive probation that are set by Community Criminal Justice Boards (CCJB). Local DCJS Community Corrections officials indicate that CCJB standards for intensive probation generally do not exceed DOC minimum standards. Likewise, local juvenile probation departments decide on intensive probation requirements for juvenile offenders. In general, juvenile probation emphasizes more home visits and family involvement in treatment.

For purposes of comparison, the DOC minimum standards are used to weigh drug courts against intensive probation. Information in Figure 1: Intensive Probation Model and Chart 1 (Comparison of Intensive Probation and Drug Court) employs the intensive probation model and minimum requirements outlined in DOC policy guidelines. Information gathered from DOC probation officers and DCJS Community Corrections officers is also used. Chart 2 (Comparison of Court-Ordered Treatment and Drug Court) relies on information gathered from Virginia substance abuse and mental health clinicians who treat drug court clients and other substance abuse clients.

Figure 1: Intensive Probation Model

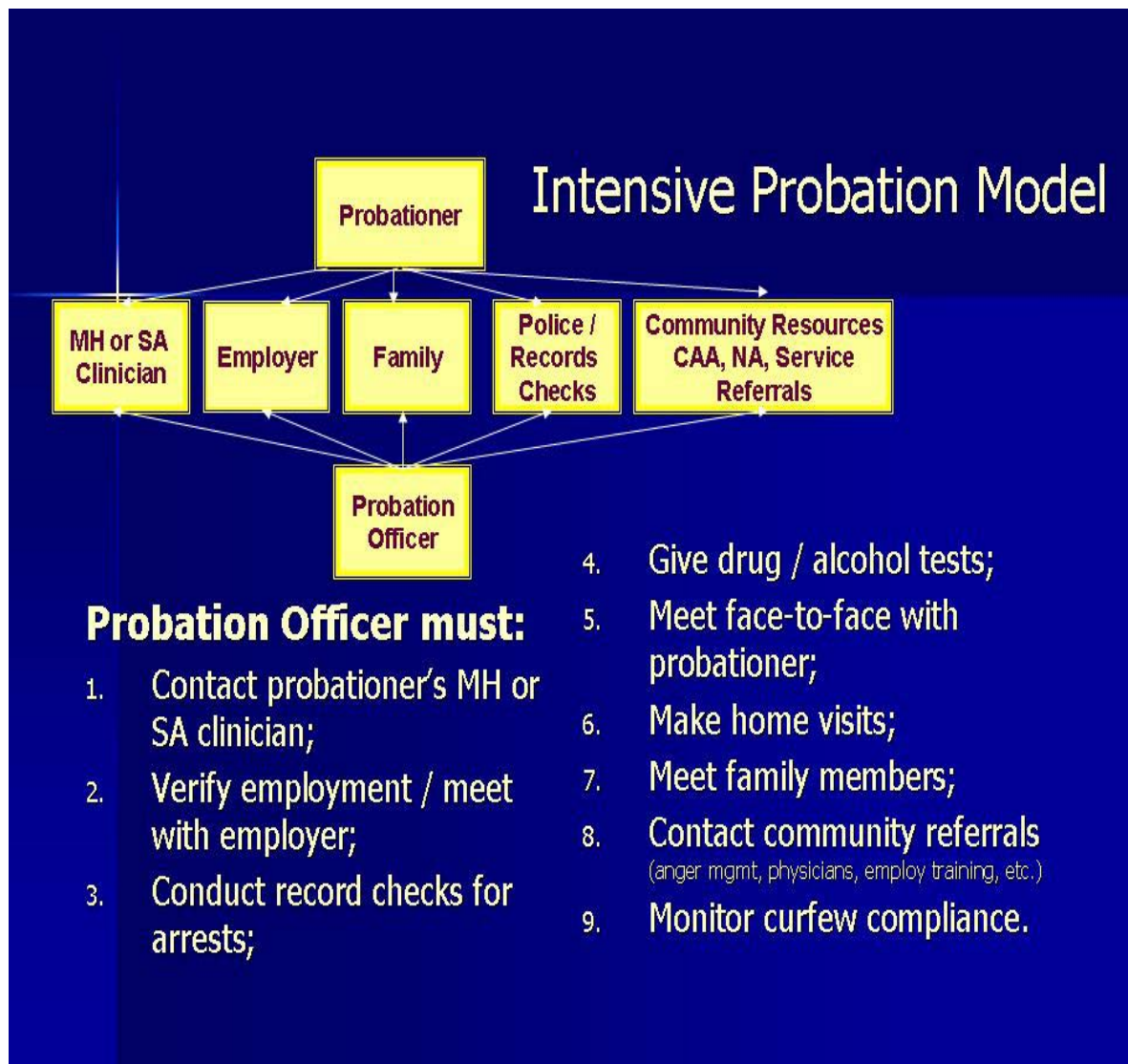


Figure 2: Drug Court Model



CHART 1: COMPARISON OF INTENSIVE PROBATION AND DRUG COURT

INTENSIVE PROBATION	DRUG COURT
Population: <i>Primarily predatory sex offenders, hate group members, violent offenders, and Detention/Diversion Center graduates</i>	Population: <i>Non-violent, drug addicted offenders arrested for drug offenses or drug-related offenses</i>
Initial Contact: <i>Within first 10 working days after probation placement (may be months after arrest)</i>	Initial Contact: <i>Within two weeks of arrest</i>
Personal Contact: <i>Face-to-face contact on a weekly basis (generally once a week)</i>	Personal Contact: <i>Face-to-face contact 3 to 5 times a week in Phase 1</i>
Home Visits: <i>Initial visit within first 30 days; follow-up - 2 home visits per month</i>	Home Visits: <i>No minimum requirements, home visits made as needed; juveniles' initial treatment sessions conducted in home; family members are involved in drug court treatment, court sessions, and social activities</i>
Drug Tests: <i>dependent on district policy; generally conducted once a week (may be more frequent depending on offender needs); may be based on color code system</i>	Drug Tests: <i>3 to 5 times per week in phase 1; random sampling methods; some drug courts conduct weekend and home drug testing as well as office testing</i>
Record Checks: <i>Required weekly to check for recent arrests</i>	Record Checks: <i>Not required but regular contact with police and sheriff deputies provides recent arrest information; record checks conducted for program evaluations</i>
Community Contacts: <i>(employer, treatment, service referrals, school, etc.) 4 contacts required per month</i>	Community Contacts: <i>Treatment contacts 3 – 5 times per week; AA/NA attendance checked weekly; service referrals – continuous and ongoing contact; employment or school checks-continuous and ongoing contact</i>
Court Contact: <i>necessary with new arrest or for probation or parole violations</i>	Court Contact: <i>once a week in Phase 1 for judicial monitoring of treatment, probation, and drug court compliance</i>
Substance Abuse Expertise: <i>Probation officer not required to have substance abuse expertise</i>	Substance Abuse Expertise: <i>Probation officer and other drug court team members receive specialized substance abuse education and often have daily contact with substance abuse clinicians who treat addicts</i>
Curfew Checks/Electronic Home Monitoring: <i>not required but may be used on a case-to-case basis</i>	Curfew Checks/Electronic Home Monitoring: <i>Regularly used for juveniles and adults (roboCuff random computer calls used in some drug courts)</i>

CHART 2: COMPARISON OF COURT-ORDERED TREATMENT AND DRUG COURT

COURT-ORDERED TREATMENT	DRUG COURT
Population: Addicted offenders with violent or non-violent offense histories; substance abuse clinicians also treat non-offenders (alcoholics who have not broken laws) and illegal drug offenders who have not yet been arrested	Population: Non-violent, drug addicted offenders who are before the court on drug or drug-related offenses
Initial Contact: Non-emergency cases seen as openings are available; local practices vary on length of time between initial client contact and first time the client is seen at the clinic	Initial Contact: Within two weeks of arrest, potential drug court candidates are assessed for substance abuse treatment eligibility
Personal Contact: Clients are generally seen weekly in group sessions and offered individual counseling on an “as needed” basis	Personal Contact: Drug court clients are in group therapy sessions 3 to 5 times a week in Phase 1; individual counseling offered regularly in Phase 1 and on an “as needed” basis in later phases
Home Visits: Generally not conducted, although family members are asked to participate in individual and family treatment sessions	Home Visits: Juveniles’ initial treatment sessions conducted in the home; family members are involved in individual and family treatment sessions
Drug Tests: drug testing and court reporting of test results may be seen as professional conflict	Drug Tests: clinicians may conduct drug tests (or other drug court staff may conduct drug tests); sharing drug test results not viewed as professional conflict
Mode of Treatment: Group and individual treatment; addicted offenders often mixed in heterogeneous groups of substance abusers	Mode of Treatment: Group and individual treatment; often drug court participants are treated in “in tact” drug court treatment groups
Court Contact: only necessary with (1) subpoena, (2) court-ordered mental health or substance abuse assessment, or (3) treatment results reports; conflict between treatment confidentiality requirements and interagency sharing of client information (result: judge often unaware of treatment compliance until non-compliance results in need for further court intervention)	Court Contact: clinicians meet weekly with drug court team to report client’s treatment progress; clinicians attend drug court hearings; confidentiality issues resolved with client waivers (judge is updated weekly on offender’s progress and compliance with treatment requirements; remediation such as in-patient treatment can be ordered on a timely basis)
Clinician’s Integrated Mental Health and Substance Abuse Expertise: Co-occurring disorders may be undetected because substance abuse clinicians may lack mental health diagnosis and treatment expertise	Clinician’s Integrated Mental Health and Substance Abuse Expertise: Clinicians aware of high incidence of co-occurring disorders among drug court participants; if clinicians lack mental health diagnosis and treatment expertise, they refer client to qualified specialists

Treatment Coercion: *Addicted offender is often not committed or compliant with treatment plan; clinicians lack “negative reinforcement” to teach consequences for sustained substance abuse*

Treatment Coercion: *Treatment-court alliance provides immediate “negative reinforcement” and consequences for sustained substance abuse*

Beyond interagency and interdisciplinary collaboration and more intensive services for drug court participants, drug court professionals report several other qualitative differences between the drug court model and intensive probation: (1) involvement of the judge gives weight and seriousness to addiction recovery; (2) drug court group cohesion gives needed support for recovery; (3) immediate court imposition of sanctions guarantees accountability for program non-compliance and cements the “cause-effect” connection between substance use and negative consequences; and (4) drug courts offer needed “wrap around” services (education, mental health, housing, job placement, etc.) that are necessary to restore addicts to productive lifestyles.

Virginia's Drug Treatment Courts

<i>Locality</i>	<i>Court</i>	<i>Court Type</i>	<i>Development Stage</i>
Roanoke City, Salem City, Roanoke County	Circuit	(1) Adult felony	Operational since 9/1995
Charlottesville, Albemarle Co.	Circuit	(2) Adult felony (3) Family	Operational since 7/1997 Operational since 7/2002
Fredericksburg, Stafford Co., Spotsylvania Co., King George Co.	Circuit J&DR Gen. District	(4) Adult felony (5) Juvenile (6) DUI	Operational since 10/1998 Operational since 11/1998 Operational since 5/1999
Richmond City	Circuit J&DR J&DR	(7) Adult felony (8) Juvenile (9) Family	Operational since 3/1998 Operational since 3/1999 Operational since 9/2002
Norfolk	Circuit	(10) Adult felony	Operational since 11/1998
Newport News	Circuit J&DR	(11) Adult felony (12) Juvenile	Operational since 11/1998 Operational since 3/2002
Portsmouth Circuit	Circuit	(13) Adult felony	Operational since 1/2001
Chesterfield Co., Colonial Heights	Circuit J&DR	(14) Adult felony (15) Juvenile	Operational since 9/ 2000 Operational since 6/2003
Hanover County	J&DR	(16) Juvenile	Operational since 5/2003
Hopewell Prince George Co.	Gen. District	(17) Adult misdemeanor	Operational since 9/2002
Henrico County	Circuit	(18) Adult felony	Operational since 1/2003
Hampton	Circuit	(19) Adult felony	Operational since 2/2003
Suffolk	Circuit	(20) Adult felony	Operational since 5/2004
Staunton	Circuit	(21) Adult felony	Operational since 5/2003
Alexandria	J&DR	(22) Family	Operational since 9/2001
Prince William Co.	J&DR	(23) Juvenile	Operational since 5/2004
Lee and Scott Co.	J&DR	(24) Juvenile	Operational since 9/2002
Fairfax County	J&DR	(25) Juvenile	Operational since 4/2003
Loudoun County	Circuit	(26) Adult felony	Operational since 5/2004

Therapeutic Courts: The National Perspective

Since the first drug treatment court program was implemented in 1989, the number of specialized problem-solving court dockets has grown at amazing rates. There are over 1,600 operational therapeutic court programs in the United States. Because of increased sobriety, cost-benefits and lowered recidivism rates, many local officials have aggressively pursued implementation and expansion of therapeutic court programs. Drug treatment court evaluations have pointed to the significant benefits of the drug treatment court model and justify the paradigm shift from the punitive, costly, and ineffective traditional ways of handling drug offenders. As reports of the success of drug treatment courts spread, other types of therapeutic court programs modeled after drug treatment courts were implemented. These drug treatment court “spin offs” integrate drug court’s ten key components: (1) integration of intensive substance abuse and other treatment services with justice system case processing; (2) a non-adversarial approach by prosecution and defense counsel while promoting public safety and participants’ due process rights; (3) early identification and prompt placement of participants in the therapeutic court program; (4) participant access to a continuum of alcohol, drug, and related treatment and rehabilitation services; (5) abstinence is monitored by frequent alcohol and other drug testing; (6) a coordinated multidisciplinary strategy governing responses to participants’ compliance; (7) frequent and ongoing judicial oversight of participant progress and compliance; (8) monitoring and evaluation to measure goal achievement and program effectiveness; (9) continuing interdisciplinary education to promote effective planning, implementation, and maintenance of therapeutic court programs; and (10) partnerships among therapeutic courts, public agencies, and community-based organizations to generate local support and enhanced therapeutic court effectiveness.

Types of Therapeutic Courts: The types of therapeutic courts measured in a national survey of therapeutic court programs include the following:

- *Adult Drug Treatment Court:* An adult Drug treatment court is a specialized court docket that handles misdemeanor or felony cases involving drug-using offenders. These court dockets incorporate comprehensive supervision, drug testing, treatment services, frequent court appearances, and immediate sanctions and incentives of Drug treatment court participants. Drug treatment courts ensure consistency in judicial decision-making and enhance the coordination of agencies and resources, thus increasing the cost effectiveness and success of treating addicted offenders.
- *Juvenile Drug Treatment Court:* A juvenile Drug treatment court focuses on juvenile delinquency (e.g., criminal) matters and status offenses (e.g., truancy) that involve substance-abusing juveniles. The program seeks to provide immediate intervention and treatment through ongoing involvement by the judge and Drug treatment court team members. The aim is to provide juvenile Drug treatment court participants with the skills that will enable them to lead productive substance-free and crime-free lives.
- *Family Drug Treatment Court:* Addicted parents charged with child abuse and neglect are eligible for family Drug treatment court program participation. Judges, attorneys, child protective service workers and treatment personnel unite with the goal of providing safe and permanent homes for children while simultaneously providing parents the necessary support and services to become drug and alcohol abstinent. Family Drug treatment courts aid parents in regaining control of their lives and enhance the possibility of family reunification within the mandatory legal time frame.
- *DWI/DUI Court:* DWI/Drug treatment courts provide intensive judicial oversight, community supervision and long-term treatment services for addicted offenders with multiple DWI convictions.
- *Reentry Drug Courts:* Reentry Drug treatment courts facilitate the reintegration of drug offenders into communities upon their release from local or state correctional facilities. The offender is involved in regular judicial monitoring, intensive treatment, community supervision, and regular drug testing. Reentry Drug treatment court participants are provided with other ancillary services needed for successful reentry into the community.
- *Tribal Courts:* Tribal courts function within a tribal justice system that incorporates and adapts the Drug treatment court concept to meet the specific needs of an individual community.

They provide an opportunity for a Native community to address the devastation of alcohol or other drug abuse by establishing more structure and a higher level of accountability for these cases through comprehensive supervision, drug testing, treatment services, immediate sanctions and incentives, and case management.

- *Campus Courts:* Campus courts are quasi-judicial and focus on students with disciplinary cases that are related to their substance abuse. Similar to traditional drug treatment courts, campus courts provide structured accountability while simultaneously rehabilitating the offender.
- *Community Courts:* Community Courts bring the court and community closer by locating the court within the community where “quality of life crimes” are committed (i.e. petty theft, turnstile jumping, vandalism, etc.). With community boards and the local police as partners, community courts have the bifurcated goal of solving the problems of defendants appearing before the court, while using the leverage of the court to encourage offenders to “give back” to the community in compensation for damage they and others have caused.
- *Mental Health Courts:* Modeled after drug treatment courts, a mental health court is a special court that focuses on people who have been charged with a crime AND have a psychiatric disability. The purpose of the court is to deal with the crime in a way that addresses the person’s mental health needs. The mental disability is the focus rather than criminal behavior. Treatment, medical care and medical supervision, case management and service referral are primary ingredients of the mental health court. The collaboration of the criminal justice and mental health systems results in identification of persons in need of medication and other mental health services. Mental health courts focus on effective solutions for mentally ill offenders who are no danger to the public, but who are clogging court dockets, jails, and prisons. The result is an improvement in the community-based delivery system for mentally ill offenders.
- *Teen Courts:* The underlying philosophy of these programs is that positive peer pressure will help youth be less likely to re-offend and that youth are more receptive to consequences handed down from their peers than to those given by adults. Youth who commit minor offenses such as petty theft, possession of alcohol, or disorderly conduct, receive consequences for their behavior not from the juvenile court system but from a "jury" of their peers in teen court. Law enforcement officers, probation officers, teachers and others may refer youth to these voluntary programs. To participate, the youth must admit to having committed the offense. In most situations, successful completion of the program means that the youth will not have a juvenile record or, in the case of a school referral, the juvenile will avoid school suspension or expulsion.

- *Domestic Violence Courts:* Domestic Violence Courts address the underlying problem(s) involved with domestic violence. Close judicial and community supervision combined with substance abuse treatment and other counseling are tools used by the court team to achieve appropriate dynamics between domestic partners (Huddleston, Freeman-Wilson, and Boone, 2004).

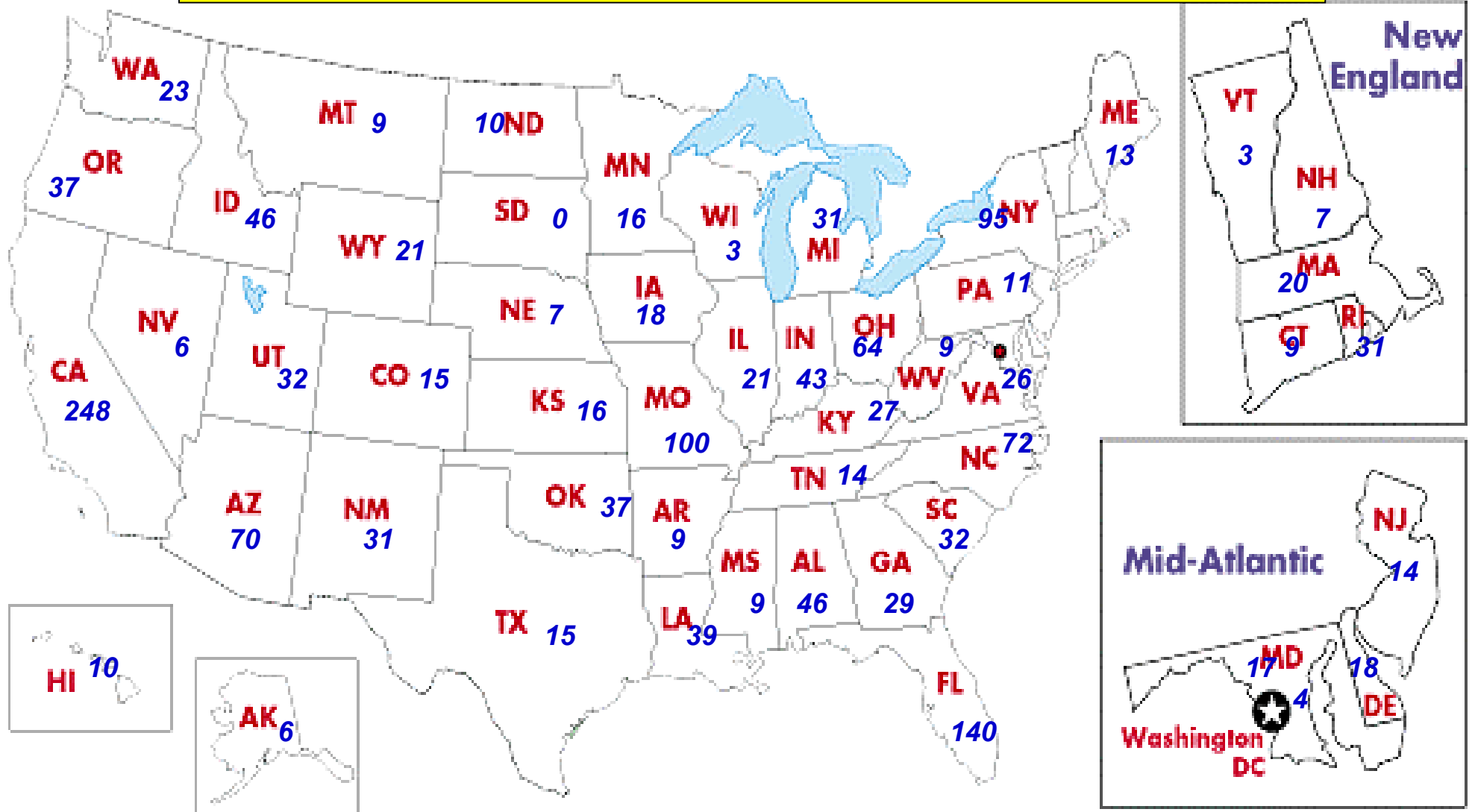
I: Number & Type of Problem Solving Court Programs in the U.S.-12/2003

	Adult DC	Juvenile DC	Family DC	DWI/DUI DC	Re-entry DC	Tribal DC	Campus DC	Reentry Ct	Comm Ct	Men Hlth Ct	Teen Ct	Dom Viol Ct	Other*	Total TherCt Programs
Alabama	15	1	1	0	0	0	0	0	0	2	2	25	0	46
Alaska	2	0	1	1	0	0	0	0	0	1	0	1	0	6
Arizona	9	10	3	2	0	0	0	0	0	1	42	2	1	70
Arkansas	9	0	0	0	0	0	0	0	0	0	0	0	0	9
California	90	32	24	3	4	0	0	0	3	16	34	30	12	248
Colorado	6	3	1	0	0	0	1	1	1	1	0	0	1	15
Conn.	0	0	0	0	0	0	0	0	2	0	0	5	2	9
Delaware	11	2	0	0	2	0	0	1	0	1	0	1	0	18
D.C.	1	0	1	0	0	0	0	0	1	0	0	0	1	4
Florida	41	25	16	0	2	0	0	0	0	0	54	0	2	140
Georgia	18	5	0	3	0	0	0	0	1	2	0	0	0	29
Hawaii	4	3	1	0	1	0	0	0	0	0	1	0	0	10
Idaho	22	7	1	2	0	0	0	0	0	1	12	1	0	46
Illinois	18	3	0	0	0	0	0	0	0	0	0	0	0	21
Indiana	12	4	0	0	1	0	0	1	1	2	22	0	0	43
Iowa	6	3	1	0	1	0	0	1	0	3	2	1	0	18
Kansas	2	1	0	0	0	0	0	0	0	0	13	0	0	16
Kentucky	18	6	1	0	0	0	0	0	0	0	0	0	2	27
Louisiana	24	14	0	0	0	0	0	1	0	0	0	0	0	39
Maine	6	6	1	0	0	0	0	0	0	0	0	0	0	13
Maryland	5	4	0	0	1	0	0	0	0	0	7	0	0	17
Mass.	17	3	0	0	0	0	0	0	0	0	0	0	0	20
Michigan	10	5	1	13	0	0	0	0	0	0	0	0	2	31
Minn.	5	3	0	0	0	0	0	0	0	1	5	2	0	16
Miss.	6	1	0	1	0	0	0	0	0	0	1	0	0	9
Missouri	42	15	6	1	13	0	0	0	0	5	17	0	1	100
Montana	1	2	4	0	0	2	0	0	0	0	0	0	0	9
Nebraska	4	2	0	1	0	0	0	0	0	0	0	0	0	7
Nevada *	4	0	1	0	0	0	0	0	0	1	0	0	0	6
N. H.	0	4	0	2	0	0	0	0	0	0	1	0	0	7
N. J.	10	4	0	0	0	0	0	0	0	0	0	0	0	14
N. M.	6	11	1	6	0	0	0	0	0	1	4	2	0	31
N. Y.	62	3	14	0	10	0	0	1	3	2	0	0	0	95
N. C.	17	5	2	2	0	0	0	0	0	1	32	5	8	72
N. D.	2	3	0	0	0	2	0	0	0	0	3	0	0	10
Ohio	26	18	11	0	2	0	0	2	0	4	0	1	0	64
Oklahoma	25	8	2	1	0	0	0	0	0	1	0	0	0	37
Oregon	17	7	4	0	0	0	0	0	1	2	0	1	5	37
Pa.	7	1	0	0	0	0	0	1	0	2	0	0	0	11
R. I.	1	4	1	0	0	0	0	2	0	0	0	1	22	31
S. C.	10	10	2	0	0	0	0	0	2	2	0	0	6	32
S. D.	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Tenn.	11	1	0	2	0	0	0	0	0	0	0	0	0	14
Texas	8	3	0	0	3	1	0	0	0	0	0	0	0	15
Utah	18	5	4	1	2	0	0	0	0	1	0	1	0	32
Vermont	1	1	1	0	0	0	0	0	0	0	0	0	0	3
Virginia	14	8	3	1	0	0	0	0	0	0	0	0	0	26
Wash.	12	4	3	0	0	3	0	0	0	1	0	0	0	23
W. Va.	0	1	0	0	0	0	0	0	0	5	3	0	0	9
Wisconsin	2	0	0	0	0	1	0	0	0	0	0	0	0	3
Wyoming	11	8	0	0	0	2	0	0	0	0	0	0	0	21
Totals	666	268	112	42	42	11	1	11	15	59	255	79	65	1629

*Other = Transfer Juvenile Offender Ct; Homeless Ct; Family Treatment Ct; Prostitution Ct; Parolee Diversion Ct; Truancy Ct; Child Support Ct; Integrated Treatment Ct

Therapeutic Courts in the United States in 2003

Source: 2003 survey of US therapeutic court programs conducted by
The National Association of Drug Court Professionals (NADCP)



Fall 2003: a total of 1626 *therapeutic court dockets* were active within the United States

Virginia's Drug Court Management Information System

Recognizing the need for evaluations to determine the impact of drug court programs, Office of the Executive Secretary (OES) staff sought federal grant funding to design, develop and implement a statewide drug court management information system. A management information system that collects reliable and consistent data on drug court participants is a prerequisite to competent and comprehensive research. OES was awarded Bureau of Justice Assistance (U.S. Department of Justice) grant funding to establish the management information system in 2000. Working with Department of Criminal Justice Services staff, OES planned the tasks needed to complete the technology project. An Information Technology Team (ITT) was selected representing adult and juvenile drug court professionals, clinicians, clerks, probation officers, technology specialists, researchers, and Department of Criminal Justice Services and Office of the Executive Secretary staff. The ITT met for a year and designed the components of the statewide management information system. Deciding first on Virginia's drug court goals, the ITT decided the data elements needed to answer whether Virginia's drug courts were meeting program goals. The advantages of the statewide management information system include (1) consistency in research data definitions; (2) collection of the same data by all drug courts across the state; (3) instant availability of information about drug court programs and participants; (4) ability to conduct sophisticated and reliable evaluations; and (5) local accessibility to drug court reports, dockets, and participant information. Virginia was the first state in the U.S. to implement a statewide drug court management information system.

The drug court management information system was based upon the goals, measurable objectives, and research questions defined by the Information Technology Team. This section presents the underlying structure of the management information system and exhibits selected screens from the management information system.

VIRGINIA DRUG COURT PROGRAM GOALS AND MEASURABLE OBJECTIVES

Goal One: Provide probation supervision, substance abuse services, judicial monitoring, intervention, and services to non-violent substance abusing offenders

Measurable Objectives

- ◆ Measure types and intensity of probation supervision
- ◆ Measure types and intensity of substance abuse services
- ◆ Measure number and types of judicial monitoring

- ◆ Measure number and types of sanctions and rewards
- ◆ Measure offender use of ancillary services

Data Questions

1. What are the characteristics of the population the program serves?
2. What are the quantity and types of probation supervision?
3. What are the quantity and types of substance abuse services?
4. What are the quantity and types of judicial monitoring?
5. What are the quantity and types of sanctions and rewards?
6. What are the quantity and types of ancillary services?
7. What is the length of time between program commencement and program successful completion or unsuccessful termination?
8. What are the retention rates of the program?
9. What are the completion rates of the program?

Goal Two: Provide timely processing of non-violent substance abusing offenders

Measurable Objectives

- ◆ Measure time between arrest and drug court screening
- ◆ Measure time between arrest and court adjudication
- ◆ Measure time between arrest and treatment referral
- ◆ Measure time between arrest and treatment commencement
- ◆ Measure time between non-compliance and sanction imposition
- ◆ Measure time between non-compliance and sanction commencement
- ◆ Measure time between commencement of treatment and successful completion or unsuccessful termination of treatment
- ◆ Measure length of time in aftercare

Goal Three: Reduce criminal behavior among non-violent substance abusing offenders

Measurable Objectives

- ◆ Measure offending behavior prior to program entry
- ◆ Measure recidivism rates while in the program
- ◆ Measure recidivism rates after program successful completion and unsuccessful termination

Data Questions

1. What are the number and types of status offenses prior to program entry?
2. What are the number and types of arrests prior to program entry?
3. What are the number and types of convictions and sentences prior to program entry?
4. What are the number and types of status offenses during program participation?
5. What are the number and types of arrests during program participation?
6. What are the number and types of convictions and sentences during program participation?
7. What are the number and types of status offenses after program successful completion or unsuccessful termination?

8. What are the number and types of arrests after program successful completion or unsuccessful termination?
9. What are the number and types of convictions and sentences after program successful completion or unsuccessful termination?

Goal Four: Reduce substance use and abuse among non-violent substance abusing offenders

Measurable Objectives

- ◆ Measure types and frequency of substance use prior to program entry
- ◆ Measure treatment readiness of program participants upon program entry
- ◆ Measure types and frequency of substance use while in the program
- ◆ Measure length of time offenders stay in treatment
- ◆ Measure intermediate progress during treatment
- ◆ Measure types and frequency of substance use after program successful completion or unsuccessful termination

Data Questions

1. What are the types and frequency of substance use prior to program entry?
2. What is the treatment readiness of offenders upon program entry?
3. What are the types and frequency of substance use during program participation?
4. What are the lengths of stay in treatment for offenders who complete or are terminated from treatment?
5. What is the intermediate progress of offenders during treatment?
6. What are the types and frequency of substance use after program successful completion or unsuccessful termination?

Goal Five: Provide more cost efficient means of handling non-violent substance abusing offenders

Measurable Objectives

- ◆ Measure cost of drug court program
- ◆ Measure comparative criminal justice costs (substance abuse treatment costs, probation options, detention, jail, correctional facilities, etc.)
- ◆ Measure offender payments of treatment costs
- ◆ Measure offender payments of criminal justice costs
- ◆ Track offender payments of financial obligations (child support, taxes, etc.)
- ◆ Measure the criminal justice costs of untreated substance abusers
- ◆ Measure the health care costs of untreated substance abusers
- ◆ Measure the social services costs of untreated substance abusers

Data Questions

1. What is the cost of the drug court program?
2. What are the costs of comparative criminal justice alternatives?
3. How much of the treatment costs are paid by the offenders while in the program?
4. How much of the court fines, court costs, restitution, and program fees are paid by the offenders while in the program?
5. How much child support, taxes, and other fees are paid by the offenders while in the program?

6. What are the criminal justice costs of untreated substance abusers?
7. What are the health care costs of untreated substance abusers?
8. What are the social services costs of untreated substance abusers?

Goal Six: Improve the life circumstances of non-violent substance abusing offenders

Measurable Objectives

- ◆ Measure academic achievements
- ◆ Measure gains in employment status
- ◆ Measure gains in pro-social family/peer association
- ◆ Measure housing situation improvements
- ◆ Measure gains in income
- ◆ Measure gains in health status
- ◆ Measure gains in financial management skills
- ◆ Measure gains in parenting skills

Data Questions

1. Have offenders improved their academic performance?
2. Have offenders improved their employment status?
3. Have offenders improved their pro-social family/peer associations?
4. Have offenders improved their housing situation?
5. Have offenders increased their income?
6. Have offenders improved their health status?
7. Have offenders improved their financial management skills?
8. Have offenders improved their parenting skills?

VIRGINIA DRUG COURT MANAGEMENT INFORMATION SYSTEM

(Selected Management Information System Data Screens)

Drug Court MIS
State of Virginia

Drug Court MIS

- Add New Participant
- Edit Active Participant
- Edit Inactive Participant
- Add / Modify / Delete Drug Court Staff
- Reports Menu
- Import Data
- Export Data
- Exit MIS

This management information system was developed under the U.S. Department of Justice grant No. 2000-DC-DX-0091 and extended the original system developed under grant No. 5J1-98-N-129.

Form View

Taskbar: Start | Drug Court MIS : Datab... | MIS Main Menu : Form | 6:36 PM

General Screen

Drug Court MIS - [IntakeForm : Form]

Case # [] Name [] General Info Update Date 1/13/2004 Case Mgmt Follow-Up Close

Juvenile	Family Drug Court	Address/Phone Record	Employment Record	Miscellaneous Client Info
<p>First Name [] SSN []</p> <p>Last Name [] Suffix []</p> <p>Middle Name []</p> <p>Alias [] Sex []</p> <p>Date of birth [] Age at Entry 0 Current Age []</p> <p>Height: [] Weight: [] Ethnicity []</p> <p>Eye Color: [] Hair Color: []</p>	<p>DC Status []</p> <p>Attorney Name []</p> <p>Attorney Phone []</p> <p>Probation Officer Name []</p> <p>Date of DC Entry []</p> <p>Discharge Date []</p>	<p>Marital Status []</p> <p>Primary Language []</p> <p>Secondary Language []</p> <p>English Literate <input type="checkbox"/> Religious Preference []</p> <p>Emergency Contact []</p> <p>Emergency Numbers []</p> <p>Highest School [] Military Service <input type="checkbox"/></p> <p>High School Grad [] Yrs Education 0 VA Eligible <input type="checkbox"/></p> <p>Length of Time in Area [] (MO-YR)</p>	<p>FBI Number []</p> <p>State (SID) Number []</p> <p>Local Number []</p> <p>Local # Jurisdiction []</p> <p>Criminal ID Notes: []</p>	<p>Assessment Results []</p>

Case Number

Taskbar: Start | Jan 2004 NewV... | Drug Court MIS ... | MIS Main Menu ... | IntakeForm : ... | 9:36 PM

Family Screen

Drug Court MIS - [IntakeForm : Form]

File Edit View Insert Format Records Tools Window Help

Case # [] Name [] General Info Update Date 1/13/2004 Case Mgmt Follow-Up Close

Juvenile Family Drug Court Address/Phone Record Employment Record Miscellaneous Client Info

General Family Health Drug History Treatment Treatment Notes Criminal History Assessment Results

Participant's Parents
Adults in Home/Sig. Relations

Name	SSN	DOB	Relationship	Contact	Address	City	St
[Empty Row]							

Related Children

Relationship	Age	Name	Sex	DOB	Contact	Custody	CPS Case	Home	AR
[Empty Row]									

Family Notes

Family Domestic Abuse

1	[]	1	[]
2	[]	2	[]
3	[]	3	[]

Neighborhood

1	[]
2	[]
3	[]

Marital Status of the Offender's Parents

Start | Jan 2004 NewW... | Drug Court MIS ... | MIS Main Menu ... | IntakeForm : ... | 9:44 PM

Health Screen

Drug Court MIS - [IntakeForm : Form]

File Edit View Insert Format Records Tools Window Help

Case # [] Name [] General Info Update Date 1/13/2004 Case Mgmt Follow-Up Close

Juvenile Family Drug Court Address/Phone Record Employment Record Miscellaneous Client Info

General Family Health Drug History Treatment Treatment Notes Criminal History Assessment Results

Insurance

Insurance Notes

Pregnant? TB Status

Previous Head Injury HIV +

Eyesight

Diagnosis []
Last Exam Date []

Hearing

Diagnosis []
Last Exam Date []

Medical Care Notes

Medications

Chronic Physical Conditions

Condition	Physicians
[Empty Row]	

Allergies

Name of participant's insurance

Start | Jan 2004 NewW... | Drug Court MIS ... | MIS Main Menu ... | IntakeForm : ... | 9:45 PM

Drug History Screen

Drug Court MIS - [IntakeForm : Form]

File Edit View Insert Format Records Tools Window Help

Case # [] Name [] General Info Update Date 1/13/2004 Case Mgmt Follow-Up Close

Juvenile Family Drug Court Address/Phone Record Employment Record Miscellaneous Client Info

General Family Health Drug History Treatment Treatment Notes Criminal History Assessment Results

Substance Use

Date	AOD	DrugStreetName	Route	Frequency	Age Began	Last Use
					0	

Drugs of choice
 1st []
 2nd []
 3rd []
 4th []
 Needle use in past year

Test type [] Other Test Results []

Value of Drugs Used Last Month \$0.00 Value of Drugs Used Last Year \$0.00

Drug History Notes

Date record was recorded

Start | Jan 2004 NewV... | Drug Court MIS ... | MIS Main Menu ... | IntakeForm : ... | 9:45 PM

Treatment Screen

Drug Court MIS - [IntakeForm : Form]

File Edit View Insert Format Records Tools Window Help

Case # [] Name [] General Info Update Date 1/13/2004 Case Mgmt Follow-Up Close

Juvenile Family Drug Court Address/Phone Record Employment Record Miscellaneous Client Info

General Family Health Drug History Treatment Treatment Notes Criminal History Assessment Results

Evaluation date 1/13/2004

MH Notes

Participant DSM

Axis	DSM Code Name	DSM Code No

Axis IV Problems

Overall GAF 1 [0] GAF 2 (to be completed at the end of Drug Court) [0]

Prim Supp Group Educational Housing Access Health Care Other Psychosocial
 Social Enviro Occupational Economic Legal Crime

Past Mental Health / Substance Abuse Care

Type [] Provider [] Phone []
 Setting [] Mode [] Months in Therapy []
 Avg. No. Session/Month [] End date [] Outcome []

Current Abuse To Client Previous Abuse To Client Suicide Violence

Emotional Physical Sexual
 Emotional Physical Sexual
 Thoughts Attempts
 No. of Attempts [0]
 Attempted By []
 Thoughts Acts No. of Acts [0]
 Types of Violence
 1 [] 2 []

Date of participant's mental health evaluation

Start | Jan 2004 NewV... | Drug Court MIS ... | MIS Main Menu ... | IntakeForm : ... | 9:46 PM

Criminal History Screen

Drug Court MIS - [IntakeForm : Form]

File Edit View Insert Format Records Tools Window Help

Case # [] Name [] General Info Update Date 1/13/2004 Case Mgmt Follow-Up Close

Juvenile Family Drug Court Address/Phone Record Employment Record Miscellaneous Client Info

General Family Health Drug History Treatment Treatment Notes Criminal History Assessment Results

Referring Court [] Presiding Judge [] Referral Date []
 Referring Judge [] Court Type []

Current/Prior Charges

Charges	VCC	VACode	Status	ArrestDate	AdjudicationDate	Adjudication

Record: 1 of 1

Other Arrests and Convictions

Charges	VCC	VACode	ArrestDate	AdjudicationDate	Adjudication	DispositionDate	Disposition	ActiveJailTime

Record: 1 of 1

Charges

Start | Jan 2004 New... | Drug Court MIS ... | MIS Main Menu ... | IntakeForm : ... | 9:48 PM

Juvenile Screen

Drug Court MIS - [IntakeForm : Form]

File Edit View Insert Format Records Tools Window Help

Case # [] Name [] General Info Update Date 1/13/2004 Case Mgmt Follow-Up Close

General Family Health Drug History Treatment Treatment Notes Criminal History Assessment Results

Juvenile Family Drug Court Address/Phone Record Employment Record Miscellaneous Client Info

School Name [] Currently In School JTS [] Job []
 Grade [] Extracurricular [] Repeated Grades 0

Previous Foster Care Custodian Name [] Custodian Relationship []
 LD Type []

Juvenile Notes

Juvenile School

Date	GPA	DAA	School Sanctions	No Sanction Days:Mo

Juvenile Relationships

Date	Peer Association	Relationship Mother	Relationship Father	Relationship Siblings

Form View

Start | Jan 2004 New... | Drug Court MIS ... | MIS Main Menu ... | IntakeForm : ... | 9:51 PM

Family Drug Court Screen

Drug Court MIS - [IntakeForm : Form]

File Edit View Insert Format Records Tools Window Help

Case # [] Name [] General Info Update Date 2/22/2004 Case Mgmt Follow-Up Close

General Family Health Drug History Treatment Treatment Notes Criminal History Assessment Results

Juvenile Family Drug Court Address/Phone Record Employment Record Miscellaneous Client Info

FDC Update Date 2/22/2004 DSS Case Manager [] Petition Type []

No. of Children 0 Parent Progress [] Foster Care Costs/mo \$0.00
 Child Health Costs/mo \$0.00
 TANF Family Support/mo \$0.00
 Parental Contribution/mo \$0.00

Court Order []

Relationship Info

Child Name	DOB	Mother Name	Father Name	Lives With	Infant Exposed
[]					

Court Info and Permanency Goal Tracking

Child Name	JDR Case No	DSS Case No	Custody Transfer	Physical Removal	Petition Date	Preliminary Hearing
[]						

Parent Visitation

Date	Child Name	Mom's Visit Frequency	Mom's Visit Duration	Dad's Visit Frequency	Dad's Visit Duration
[]					

Family Drug Court Update Date

Start | Jan 13 Mik... | C:\My Doc... | Drug Court... | MIS Main M... | IntakeFor... | 10:41 PM

Drug Court Screen

Drug Court MIS - [Case Management]

File Edit View Insert Format Records Tools Window Help

Case # 780TT-00-0110 Name John Adams General Info Update Date 1/11/2004 Intake Follow-up Close

Drug Court Court Date Drug Test Record Restitution/Fees Release Information Contacts and Notes Outcome Improvements

DCStatus: Active, In Program

Drug Testing Phase: [] Curfew []

Date of DC Entry 12/22/2000 Treatment Track []

Discharge Date []

Graduation Date []

Termination reason []

12-step sponsor []

Current 12-step requirement None

PhaseTracking Record

CurrentPhase	Phase	DateMoved	PhaseNotes
[]			

Record: 1 of 1

Record: 1 of 1 (Filtered)

Case Number [] FLTR []

Start | Jan 1... | C:\M... | Drug ... | MIS ... | Activ... | Intak... | Case ... | 10:02 PM

Court Date Screen

Drug Court MIS - [Case Management]

File Edit View Insert Format Records Tools Window Help

Case # 750TT-00-0110 Name John Adams General Info Update Date 1/11/2004 Intake Follow-up Close

Drug Court Court Date Drug Test Record Restitution/Fees Release Information Contacts and Notes Outcome Improvements

Court Fine Assessed \$0.00 Restitution Assessed \$0.00 Child Support Assessed \$0.00 Community Service Hours 0
 Court Costs Assessed \$0.00 Program Fees Assessed \$0.00 Taxes Assessed \$0.00

Start Date of Clean Time Days of Sobriety Treatment Fees

Date Appeared Bench warrant Next Court Date

Arrest/conviction since last court date

Days sentenced to jail as drug court sanction 0

Court Fine \$0.00 No. of 12-step meetings attended this month 0 No UAs 0
 Court Costs \$0.00 Positive UA Drugs present Cannabis Missed UA
 Restitution \$0.00 Comments He has no problem appearing in court. In the last three months, he has only had one positive UA. He reported two occurrences of alcohol consumption.
 Program Fees \$0.00
 Child Support/Mo \$0.00
 Taxes/Mo \$0.00
 Community Service 0

Sanctions	Date Comp. Sanction	Rewards	Types Non Compliance	Jail Days
				0

Record: 1 of 1

Record: 1 of 1 (Filtered)

Amount of total Court Fine assessed

Start Jan 1... C:\M... Drug ... MIS ... Activ... Intak... Case ... 10:03 PM

Drug Test Screen

Drug Court MIS - [Case Management]

File Edit View Insert Format Records Tools Window Help

Case # Name General Info Update Date 1/13/2004 Intake Follow-up Close

Drug Court Court Date Drug Test Record Restitution/Fees Release Information Contacts and Notes Outcome Improvements

Date of Test **DRUG TEST RECORD** Scheduled Drug Test Court Drug Test Color Code Drug Test
 Other Random Test Home Visit Test At Home

ADD NEW DRUG TEST

DRUGS TESTED FOR
 THC COC OPI AMP MAMP PCP BARB BZO MTD MDMA ETOH Other1 Other2 Other3 Other4 Other5

POSITIVE RESULTS

Drug Test Notes Staff Member Conducting Test Sample Diluted

Record: 1 of 1

Record: 1 of 1 (Filtered)

Form View

Start Jan 2004 N... Drug Court... MIS Main M... IntakeForm... Case Man... 9:58 PM

Types of Drug Court Evaluations

The Office of the Executive Secretary (OES) was awarded a U.S. Department of Justice Grant (# 2002-DC-BX-0034) to conduct comprehensive statewide evaluations of Virginia's drug court programs. The evaluation grant proposal called for seven types of evaluations : (1) a descriptive process evaluation; (2) an impact study; (3) a quasi-experimental outcome study; (4) qualitative staff and participant assessments; (5) a Delphi study of treatment components; (6) a cost assessment study; and (7) a formative evaluation of participant variables related to successful drug court outcomes.

The evaluation project is a bifurcated effort with two evaluations completed in 2004: A process evaluation reporting myriad facts about program policies and procedures and descriptions of Virginia's adult, juvenile, and family drug court participants was completed in December 2004. An impact evaluation reporting impact measures of retention and recidivism rates. The outcome evaluation also examined the severity and chronicity of offenses committed by participants prior to drug court admittance.

In the coming year, five other evaluations will be completed that will provide additional information about Virginia's drug court programs: (1) a quasi-experimental impact study comparing drug court results with the outcomes of drug offenders in matched control groups; (2) qualitative staff and participant assessments of operational drug court programs; (3) a Delphi study of treatment components of Virginia's drug court programs; (4) a cost assessment study; and (5) a formative evaluation of participant variables related to successful drug court outcomes. The seven types of evaluations are described in the following paragraphs.

(1) *Descriptive process evaluation:* Process evaluations describe program content, policies, procedures, and participant characteristics. The 2004 evaluation reported detailed information on all operational drug court programs in Virginia. Participant and program characteristics reported in the process evaluation will be used as independent variables to test relationships with program outcome.

(2) *Impact evaluation:* Impact evaluations examine the retention and recidivism rates of drug court participants. The 2004 impact evaluation reported retention and recidivism rates. Severity and chronicity of offenses committed by participants prior to drug court admittance was also examined to answer the question of whether drug court participants were serious offenders.

- (3) ***Quasi-experimental impact study:*** A quasi-experimental impact evaluation compares the outcomes of drug court participants with the outcomes of a matched group of drug offenders treated in traditional ways of probation or incarceration. The recidivism rates of drug court graduates and terminated participants will be compared with a like population (matched on gender, age, race, and criminal history) in another community that did not have a drug court program during the period studied. A primary benefit of quasi-experimental research is the enhanced confidence that positive program outcomes are a consequence of the drug court program and not attributable to individual differences of participants. Data has been collected on the experimental group (drug court participants) and data will be collected on the identified control groups during the first part of 2005.
- (4) ***Delphi study of drug court treatment:*** A Delphi study starts with general questions about treatment (i.e., what treatment modalities are used with drug court participants) and as more information is gathered from a growing number of clinicians, the answers become more detailed and focused. The final result is a comprehensive list of strategies, approaches, procedures, and policies that flesh out the dimensions of drug court treatment. Data collection has been completed on the Delphi study and analysis of the results will ensue during the first few months of 2005.
- (5) ***Cost analysis study:*** The evaluation grant called for rudimentary cost benefit analysis. A true scientific inquiry about drug court cost benefits would require several years. Cost benefit analyses are of primary concern to policy makers but have received scant attention in drug court research. Previous examinations of drug court cost benefits have primarily compared the costs of drug court intervention with incarceration costs. Researchers have completed a comprehensive literature review of drug court cost benefit studies and other addiction treatment cost benefit studies. From the accumulated information, a cost benefit research model was developed. This model will guide the 2005 drug court cost benefit evaluation.
- (6) ***Qualitative study:*** Some of the most valuable information needed for program revision comes from participants and staff. Researchers have collected both staff and client surveys which will be analyzed in 2005. The Client Survey gathered personal (psychological and family background) information about drug court participants. Program outcome is likely to be influenced by these personal client attributes. Qualitative study data will be statistically analyzed for significant association with program outcome.

(7) ***Formative Evaluation:*** Client and program-specific variables collected in the MIS system and in the Client Surveys will be used to examine the influence of participant variables and program practices on successful drug court outcomes.

Summary of 2004 Descriptive and Impact Evaluations of Virginia's Drug Treatment Courts

Each type of drug addiction (alcoholism, crack addiction, narcotics addiction, etc.) has different treatment protocols and different rates of success. In addition to differences in treatment needs, participant profiles vary between Virginia's drug court programs. For example, a post-dispositional program may accept only probation violators who have exhausted other sentencing alternatives and are facing lengthy incarceration. A pre-dispositional drug court may catch addicts earlier in their criminal history. One drug court may accept homeless people or those with mental illness as well as addiction. For this reason, the reader is urged to resist comparing one drug court program with another. Rather than compare programs that share basic elements but differ in specifics, it is important to question whether drug courts reduce subsequent drug-fueled crime; the longevity of program impact; which program elements increase program success; and which participant profiles are most amenable to drug court treatment.

All Virginia drug court programs require offenders to plead guilty prior to drug court admittance. Some drug court programs are primarily pre-dispositional (facts are found sufficient for conviction, adjudication is deferred pending program outcome, and, with program graduation, admitting charges may be reduced or dismissed) while other programs are primarily post-dispositional (participant is found guilty, sentenced, and drug court success may earn reduction or dismissal of sentence). Newer drug court programs tend to follow the post-dispositional model. In reality, most drug courts have a mixture of pre- and post-dispositional drug court participants.

Of the 3216 Virginians admitted to adult felony drug court programs between November 1995 and December 2004, a total of 2002 have graduated or are currently enrolled in the programs. The resulting retention rate is 62.25%. Juvenile drug courts have admitted 371 youths. Of this total, 217 have graduated or are currently enrolled resulting in a retention rate of 58.49%. An additional 66 addicted parents have been admitted to Virginia's family drug treatment court programs. Twenty-seven have graduated or are currently enrolled for a retention rate of 40.9%. Retention is an important benefit of drug court programs. Lower recidivism rates correlate with longer periods of drug treatment. Drug court participants stay in treatment longer and have higher program completion rates than other criminal justice-

involved addicts whom voluntarily enter substance abuse treatment. Virginia drug court participants stay a minimum of twelve months in judicially-supervised treatment programs. Research indicates that addicts who stay in treatment over a year have twice the recovery rates as those who fail to stay in treatment at least a year.

National studies indicate that recidivism rates of drug court graduates are half or less than half the recidivism rates of other addicted offenders not participating in drug courts. In the 2004 impact study of 2,056 adult drug court participants, 647 participants had graduated from a drug court program. Of the total number of graduates, 101 have been arrested for felony offenses after drug court graduation. This represents a statewide felony recidivism rate of 15.6% for adult drug court graduates. There were 59 drug court graduates who had misdemeanor arrests resulting in a misdemeanor recidivism rate of 9.1%. Recidivism rates of drug court non-graduates were also examined. Non-graduates include former drug court participants who withdrew or were involuntarily terminated from drug court programs. A total of 918 former participants are drug court non-graduates. Of these, 303 were arrested for felony offenses after leaving drug court. This results in a felony recidivism rate for non-graduates of 33.0%. There were 72 non-graduates who were arrested for subsequent misdemeanor offenses. This represents a 7.8% misdemeanor recidivism rate for non-graduates.

The impact study of juvenile drug court participants sampled a population of 325 juveniles. The average statewide recidivism rates of juvenile drug court graduates is 12.6% (felony recidivism) and 12.6% (misdemeanor recidivism). The average statewide recidivism rates of juvenile non-graduates (those who withdrew or were expelled from the programs) is 26.9% felony recidivism and 11.9% misdemeanor recidivism. As found with the adult drug court population, there is a decided advantage in terms of lower recidivism for juvenile drug court participants if they complete the treatment program and graduate.

As previously mentioned, the Office of the Executive Secretary plans to conduct a quasi-experimental impact study that will compare the outcomes of drug court participants with matched control groups of drug offenders in localities that do not have drug court programs. Until the planned quasi-experimental study is completed, the recidivism “measuring stick” is a study conducted by the Virginia Criminal Sentencing Commission (VCSC) in 1999. The VCSC study concluded that Virginia drug offenders treated in traditional ways of incarceration or probation had a 50% felony recidivism rate.

The statistical analysis also focused on previous offenses histories of adult drug court participants. While the majority of national drug court recidivism studies indicate reduced recidivism for graduates, some believe these positive findings may be attributable to “skimming off the top” (selecting light weight offenders who would be unlikely to re-offend regardless of drug court placement or traditional probation/incarceration placement). To determine whether Virginia’s adult drug court participants were “lightweights”, the total arrests prior to drug court attendance was analyzed. Results of this analysis indicate that drug court participants have extensive arrest records. Drug court participants have a total of 11,435 misdemeanors and 13,972 felonies prior to entering Virginia’s drug court programs. The average number of felony arrests per adult drug court participant is 6.8. The average number of misdemeanor arrests prior to drug court admittance is 5.6.

An additional analysis of the severity level of arrests prior to drug court admittance indicated an average severity weight of 50.38. Severity rankings, based on the offense severity study conducted by Virginia Criminal Sentencing Commission staff member Meredith Farrar-Owens, were assigned to each of 26,681 arrest charges in the criminal records of drug court participants. Offense severity weights in the 40+ range are commonly assigned to felony-level rather than misdemeanor-level offenses. While drug court participants are arrested for offenses that are generally categorized as felonies, the severity ratings are at the lower rather than higher levels of severity. Those crimes rated as most serious are predatory, violent crimes. Since drug courts accept non-violent offenders, the average severity rating of 50.38 and the range of severity ratings among the adult programs (43.39 to 56.20) is indicative of drug court’s target population: non-violent, felony drug offenders.

Description Evaluation of Virginia's Adult Drug Treatment Court Programs

Descriptive evaluations, also known as process evaluations, give detailed information about each program's policies and procedures, participant characteristics, and other details that distinguish local program idiosyncrasies. Documenting local variations is important not only to educate drug treatment court stakeholders about the range of program models and participant differences, but is also important in assessing the relationships of differing participant and program components on drug court outcomes. The descriptive evaluation of Virginia's adult drug treatment court programs asked the following questions:

1. What is the primary dispositional model in each adult drug treatment court program?
2. What are the percentages of participants who are first offenders, pre-dispositional offenders, and post-dispositional offenders in each drug treatment court?
3. When did the drug treatment court program begin, the minimum and average length of participant stay, and the program capacity?
4. How many drug treatment court participants were terminated, withdrew, died, graduated or are currently enrolled in Virginia's adult drug treatment court programs?
5. What are the demographic characteristics (age, race, and gender) of adult drug treatment court participants?
6. What are the primary drugs of choice for active drug treatment court participants?
7. What are the drug court eligibility requirements?
8. What behaviors generally result in participant termination from drug treatment court programs?
9. What are the requirements for graduation from adult drug court programs?
10. What ancillary services do adult drug treatment court programs offer?
11. What is the frequency of drug testing in each drug court program?
12. What types of sanctions are used by Virginia's adult drug treatment court programs?
13. What types of rewards are used by Virginia's adult drug treatment court programs?
14. How frequently are adult drug treatment court hearings held?
15. What fees are assessed for drug court participation?
16. What are the 2004 funding sources and amounts for Virginia's adult drug treatment courts?
17. What local agencies collaborate in providing services to Virginia's adult drug treatment courts?

Table 1: What is the primary model in each of Virginia’s adult drug treatment court programs?

DRUG COURT	Charlottes-ville	Chester-field	Fredericks-burg	Fredericks-burg DUI	Hampton	Henrico	Hopewell	Loudoun
Post-Plea	X	X	X	X	X	X	X	X
Pre-Dispositional	X	X	X		X		X	
Post-Dispositional	X	X		X	X	X	X	X
First Offenders	X				X			

DRUG COURT	Newport News	Norfolk	Portsmouth	Richmond	Roanoke	Staunton	Suffolk
Post-Plea	X	X	X	X	X	X	X
Pre-Dispositional	X			X	X	X	
Post-Dispositional	X	X	X	X		X	X
First Offenders	X			X	X	X	

All of Virginia’s adult drug treatment court programs require offenders to plead guilty to the drug or drug-related charge(s) before entering drug court programs. Therefore all are post-plea rather than diversionary programs. While most of Virginia’s adult drug courts allow first offenders into their programs, research under this evaluation documents no first offenders in the existing programs at the current time. Drug treatment courts are very rigorous and intensive with drug testing three to five times a week, therapy sessions three times a week, intensive probation, and weekly court appearances. Since first offenders may have their charge(s) dismissed, there is little incentive for them to engage in more demanding and strenuous programs. However, a few first offenders in years past have chosen drug court participation as their best alternative for recovery.

Beyond the post-plea requirement, localities vary regarding how they handle the dispositions of offenders entering drug treatment court programs. There are two basic dispositional models followed by Virginia’s adult drug treatment court programs: a pre-disposition model and a post-disposition model. During the planning stage before a drug treatment court program is implemented, judges, Commonwealth’s attorneys and other local drug court team members decide which drug treatment court model best fits their local needs.

Pre-disposition model: The offender is before the court on a drug or drug-related charge. The prosecutor requests that the court defer prosecution contingent on the following factors: (1) the defendant pleads guilty to the charge, (2) the judge concludes that facts are

sufficient to justify a finding of guilt, (3) the judge takes the plea under advisement and does not enter a judgment of guilt, and (4) the defendant voluntarily enters the drug treatment court program. If the defendant completes the program, the prosecutor may nolle prosequere the case. If the defendant does not enter the drug treatment court program or if the defendant does not complete the program, the prosecutor then proceeds with prosecution as usual.

Post-disposition model: The offender enters into a plea agreement when: (1) the offender pleads guilty to a drug or drug-related charge or to a probation/parole violation, (2) the judge accepts the guilty plea, (3) the offender is sentenced to probation or to a jail or prison term, (4) a portion or all of the incarceration/probation sentence is suspended upon the offender's voluntary agreement to enter the drug court program, (5) if the offender completes the drug treatment court program, the conviction remains but the sentence is dismissed or reduced, and (6) if the offender does not complete the program, the original sentence may be imposed.

Another variation of the post-disposition model is drug court referral as a condition of probation. Drug treatment court participation is a requirement of probation without a concomitant promise of sentence reduction or dismissal.

While drug courts generally start as either pre-dispositional or post-dispositional, over time a mixture of participants with the two types of dispositional alternatives enters a drug court program. Post-dispositional drug treatment courts that accept only probation or parole violators tend to continue with that model over time (Norfolk Circuit, Henrico Circuit, Fredericksburg DUI, Suffolk Circuit, Portsmouth Circuit, and Loudoun Circuit). Richmond Circuit started as a post-dispositional drug treatment court program and has expanded to include pre-dispositional offenders as well.

Drug treatment court professionals in pre-dispositional programs believe the promise of charge dismissal gives participants the needed incentive to endure the close scrutiny and intensity of drug treatment court programs. Some adult drug treatment court program started as pre-dispositional drug courts and now have a mixed group of pre- and post-dispositional offenders (Charlottesville Circuit, Chesterfield Circuit, Hampton Circuit, Hopewell General District, Newport News Circuit, Staunton Circuit, and Roanoke Circuit). Fredericksburg Circuit and Roanoke Circuit serve primarily pre-dispositional participants. Table 2 indicates the approximate percentages of first offenders, pre-dispositional and post-dispositional participants.

Table 2: What percentages of drug court participants are first offenders, pre-dispositional offenders, and post-dispositional offenders?

DRUG COURT	Charlottes-ville	Chester-field	Fredericks-burg	Fredericks-burg DUI	Hampton	Henrico	Hopewell	Loudoun
Pre-Dispositional	62%	99%	100%		10%		60%	
Post-Dispositional	38%	1%		100%	90%	100%	40%	100%
First Offenders								

DRUG COURT	Newport News	Norfolk	Portsmouth	Richmond	Roanoke	Staunton	Suffolk
Pre-Dispositional	30%				100%	60%	
Post-Dispositional	70%	100%	100%	100%		40%	100%
First Offenders							

Table 3: Program Information: When did the drug treatment court program begin, the minimum and average length of stay, and program capacity?

DRUG COURT	Charlottes-ville	Chester-field	Fredericks-burg	Fredericks-burg DUI	Hampton	Henrico	Hopewell	Loudoun
Program Began	7/97	9/00	10/98	5/99	2/03	1/03	9/02	6/04
Minimum Program Length	12 mo.	13 mo.	12 mo.	12 mo.	18 mo.	12 mo.	12 mo.	12 mo.
Average Program Length	13-18 mo	15 mo.	17 mo.	12.5 mo.	TBD	430days	18 mo.	TBD
Program Capacity	60	65	60	Not set	75	50	30	10

DRUG COURT	Newport News	Norfolk	Portsmouth	Richmond	Roanoke	Staunton	Suffolk
Program Began	11/98	11/98	1/01	3/98	9/95	5/03	4/04
Minimum Program Length	24 mo.	12 mo.	12 mo.	12 mo.	12 mo.	12 mo.	12 mos.
Average Program Length	26 mo.	14.5 mo.	15 mo.	18 mo.	15 mo.	12 mo.	TBD
Program Capacity	75	50	75	75-100	100	10	10

key: TBD=to be decided as the drug treatment court matures

Roanoke Circuit’s Drug Court established the first drug court program in September 1995. Between the oldest drug court and the newest adult drug court program (Loudoun Circuit Court) that started in June 2004, an additional thirteen adult drug court programs were established to serve Virginia’s addicted offenders. All adult programs have at least a year’s minimum program length, with most having an average program length in the fifteen-month to eighteen-month range. Newport News has an average program length of twenty-six months that includes a supervised aftercare program for their drug court graduates. The larger drug court programs

serve between fifty and one hundred participants at a time. These larger programs receive state or federal funding. The smaller programs are necessarily limited because they do not receive external funding. They are operating as pilot programs until they are able to obtain the resources to expand their services.

Table 4: How many drug treatment court participants were admitted, terminated, withdrew, died, graduated or are currently enrolled in adult drug treatment court programs?

DRUG COURT	<i>Charlottes-ville</i>	<i>Chester-field</i>	<i>Fredericks-burg</i>	<i>Fredericks-burg DUI</i>	<i>Hampton</i>	<i>Henrico</i>	<i>Hopewell</i>	<i>Loudoun</i>
Total Admitted	309	229	186	691	44	63	17	8
Total Graduated	116	64	82	330	*	13	1	N/A
Current Enrollment	41	55	60	173	33	35	4	6
Number Terminated	132	103	92	188	6	15	10	0
Number Withdrawn	20	5	6	0	5	0	2	2
Number Deceased	0	2	2	0	0	0	0	0
Highest 2004 participant number in dc at same time	53	62	60	285	34	45	7	6

* 9 pending graduates

DRUG COURT	<i>Newport News</i>	<i>Norfolk</i>	<i>Portsmouth</i>	<i>Richmond</i>	<i>Roanoke</i>	<i>Staunton</i>	<i>Suffolk</i>
Total Admitted	198	175	169	332	713	13	9
Total Graduated	62	42	36	94	369	3	0
Current Enrollment	53	47	59	76	130	8	5
Number Terminated	74	82	73	159	206	2	4
Number Withdrawn	8	2	0	0	6	0	0
Number Deceased	1	2	1	3	2	0	0
Highest 2004 participant number in dc at same time	62	54	53	95	133	8	5

Table 4 details the number of participants admitted to each drug court program, the number completing the programs, and the number of participants who withdrew, were terminated, or died before completing the program. Roanoke has graduated the largest number (369). Fredericksburg DUI drug court currently serves the largest number of active participants (173). Offenders voluntarily enter and choose to remain in the drug treatment court program. Of the total number of 3156 admitted to Virginia’s adult drug treatment court programs, only 47 (1.5%) have voluntarily withdrawn from the programs. This low percentage attests to the participants’ willingness to stay in this very intensive criminal justice/treatment

option. Many have failed with traditional treatment programs and view drug court as their last to chance to achieve lasting sobriety.

Table 5: What are the demographic characteristics (age, race, and gender) of adult drug treatment court participants?

DRUG COURT	Charlottes-ville	Chester-field	Fredericks-burg	Fredericks-burg DUI	Hampton	Henrico	Hopewell	Loudoun
Total Admitted	309	229	186	691	44	63	17	8
Race								
Black	188	71	62	103	34	40	1	4
White	116	156	112	574	9	22	16	4
Other	5	2	5	14	1	1	0	0
Gender								
Female	99	101	83	112	24	29	11	4
Male	210	128	96	579	20	34	6	4
Age Range	18-50+	18-63	18-52	19-73	23-62	24-55	18-55	33-48

DRUG COURT	Newport News	Norfolk	Portsmouth	Richmond	Roanoke	Staunton	Suffolk
Total Admitted	198	175	169	332	464*	13	9
Race							
Black	144	137	142	289	107	1	7
White	51	38	25	43	356	11	2
Other	3	0	2	0	1	1	0
Gender							
Female	106	70	81	119	190	6	4
Male	92	105	88	213	274	7	5
Age Range	18-60	20-25	19-55	18-65	21-50	19-55	19-40

* although Roanoke’s drug court program has admitted 713 participants, there was no management information system to record detailed participant information during the early years of the program’s operation. Therefore, the demographic profiles of Roanoke’s Circuit Drug Court participants are currently available on 464 participants.

The demographic variation in race, gender, and age of participants underscores the reality that addiction can and does affect people of different races, gender, and age groups. Racial composition varies with drug court programs in Richmond, Portsmouth, Hampton, Henrico, Suffolk, Norfolk, Charlottesville, and Newport News having more black participants. Drug courts in Roanoke, Staunton, Hopewell, Chesterfield, Fredericksburg Circuit, and Fredericksburg DUI serve more white participants. There are greater percentages of male participants in Charlottesville, Chesterfield, Fredericksburg DUI, Norfolk, Richmond, and Roanoke than female participants. Drug courts in Newport News, Portsmouth, Staunton, Suffolk, Hampton, Henrico, Hopewell, Loudoun, and

Fredericksburg Circuit have nearly equal numbers of males and females. The age range (between 18 and 73) of drug court participants underscores the reality that addiction is not limited to one age group.

Table 6: What are the primary drugs of choice for active drug treatment court participants?

DRUG COURT	Charlottes-ville	Chester-field	Fredericks-burg	Fredericks-burg DUI	Hampton	Henrico	Hopewell	Loudoun
Crack	72%	30%	16%	5%	80%	35%	75%	75%
Powdered Cocaine		12%	30%					
Heroin/Morphine	2%	35%	4%	5%	19%	47%		
Alcohol		5%	10%	70%		6%	15%	
Stimulants								
Depressants								
Hallucinogens		1%						
Marijuana	24%	8%	27%	20%	1%	8%	10%	12%
Opiates/Barbiturates			7%					12%
Prescription Narcotics	2%	7%	6%					
MDMA(Ecstasy)		1%						
Benzodiazepines						4%		
Methamphetamine								

DRUG COURT	Newport News	Norfolk	Portsmouth	Richmond	Roanoke	Staunton	Suffolk
Crack	80%	58%	24%	88%	25%	7%	20%
Powdered Cocaine			11%		10%		
Heroin/Morphine	15%	34%	54%	10%	2%		80%
Alcohol		4%		1%	27%	16%	
Stimulants					2%		
Depressants					5%		
Hallucinogens							
Marijuana	5%	4%	10%	1%	17%	16%	20%
Opiates/Barbiturates					10%		
Prescription Narcotics					40%	16%	
MDMA(Ecstasy)							
Benzodiazepines					15%		
Methamphetamine						46%	

In most cases, drug court participants are multiple drug users. For example, crack cocaine may be the addict’s favorite drug, but he may also be an alcoholic and marijuana user. Determining the offender’s drug of choice provides a rudimentary measure of changing drug use trends in a locality. Because of the differences in drugs of choice, addiction treatment must be specifically tailored to the types of drugs abused in each locality. Cocaine (both crack and powdered) continues to be the prevailing drug of choice for most drug court participants. Drug

testing does not distinguish between the powdered form of cocaine and solid or “crack” form of cocaine. Because of the comparative cheapness of crack, it is assumed that most addicts choose crack over powdered cocaine. This is not true in Fredericksburg where 30% of drug court participants choose powdered cocaine as their drug of choice.

There is a rising percentage of narcotics abuse (heroin or morphine) in Tidewater (Portsmouth, Suffolk, and Norfolk) and Central Virginia (Chesterfield County and Henrico County). Alcohol abuse continues to be a problem in Roanoke’s and Fredericksburg’s DUI drug courts. Marijuana abuse is apparent in Charlottesville Circuit, Fredericksburg Circuit and Fredericksburg DUI drug courts. Roanoke is showing significant prescription narcotic abuse. It is interesting to note that the Roanoke Drug treatment court is the only adult drug court now showing significant prescription narcotic abuse. Counties in the southwestern tip of Virginia (Lee, Scott, and Wise Counties) also report epidemics of prescription narcotic abuse.

Table 7: What are adult drug treatment court eligibility requirements?

DRUG COURT	Charlottes-ville	Chester- field	Fredericks- burg	Fredericks- burg DUI	Hampton	Henrico	Hopewell	Loudoun
Non-violent	X	X	X	*	X	X	X	X
Previous minor violence	X		X			X	X	X
Simple possession	X	X	X		X	X	X	X
Prescription fraud	X	X	X			X	X	X
Intent for accommodation	X		X			X		
Drug-related	X	X	X			X	X	X
Dual diagnosis	X	X	X		X	X		X
Literate	X	X			X			
Addict	X	X	X		X	X	X	X
City/County resident	X		X		X	X		X
Has transportation						X		
Employable						X		
Not on parole		X			X	X		X
No prior drug court			X			X		
No co-defendant in d.c.		X				X		
Cannot serve as informant		X				X		X
No family/intimate rel in dc		X				X		
No pending charges			X		X	X		X

* Fredericksburg DUI drug court bases eligibility on charges of impaired (drug or alcohol) driving charges

DRUG COURT

*Newport Norfolk Portsmouth Richmond Roanoke Staunton Suffolk
News*

<i>Non-violent</i>	X	X	X	X	X	X	X
<i>Previous minor violence</i>							
<i>Simple possession</i>	X	X	X	X	X	X	X
<i>Prescription fraud</i>	X	X	X	X	X	X	X
<i>Intent for accommodation</i>	X	X	X	X	X	X	X
<i>Drug-related</i>	X	X	X	X	X	X	X
<i>Dual diagnosis</i>	X	X	X	X	X	X	
<i>Literate</i>	X	X	X	X	X	X	X
<i>Addict</i>	X	X	X	X	X	X	X
<i>City/County resident</i>	X	X	X	X	X		X
<i>Has transportation</i>							X
<i>Employable</i>							
<i>Not on parole</i>	X						
<i>No prior drug court experience</i>						X	
<i>No co-defendant in drug court</i>							
<i>Cannot serve as informant</i>		X				X	
<i>No family/intimate relationships in d.c.</i>							
<i>No pending charges</i>	X					X	X

There are several common eligibility requirements for drug treatment court programs: participants must be non-violent offenders, be diagnosed addicts, and have drug- or drug-related offenses. Most will accept a charge of intent for accommodation when the amount of possessed drugs is very small and when the addict is selling to a friend or acquaintance for the purpose of supporting his/her own habit. No known drug dealers are admitted to Virginia's drug treatment court programs. Because written assignments are often used in drug treatment court programs, many require eligible participants to be literate. City or county residency is also required in most programs. Drug treatment court officials recognize that most eligible drug offenders also have mental health issues and therefore will accept dually diagnosed candidates on a case-to-case basis. Federally-funded drug courts could not accept drug offenders with even minor violence in their offense histories. Some drug courts that have exhausted federal funding and others that did not receive the federal funding have decided to accept offenders with minor violent offenses (such as simple assault) if these charges are several years in the past. In the early stages of drug court implementation, newer programs are often more conservative in their eligibility requirements and generally accept offenders with only drug possession charges.

Table 8: What behaviors generally result in termination from adult drug treatment court programs?

DRUG COURT	Charlottes-ville	Chester-field	Fredericks-burg	Fredericks-burg DUI	Hampton	Henrico	Hopewell	Loudoun
<i>Fixed number of sanctions*</i>	4	7	C/C		C/C	C/C	7	5+UA's
<i>New felony commission</i>	X	X	C/C			X	X	X
<i>Firearm possession</i>	X	X	X		X	X	X	X
<i>Treatment non-compliance</i>	X	X		X	X	X	X	X
<i>Perjury</i>				X				
<i>Violence</i>		X	X		X	X	X	X
<i>Two new misdemeanors</i>		X			C/C	C/C	X	
<i>Missed court appearances</i>		>30 days		X			X	
<i>Missed treatment appearances</i>		>30 days		X			X	X
<i>New jail-able misdemeanors</i>		2 or more			C/C			X
<i>Altering drug screens</i>	X	2 or more	X					3 rd time
<i>Overall poor performance</i>	X	X	X	X			X	X
<i>Absconding over 30 days</i>		X	C/C		X	X	X	>14 days

DRUG COURT	Newport News	Norfolk	Portsmouth	Richmond	Roanoke	Staunton	Suffolk
<i>Fixed number of sanctions</i>	C/C	4	C/C	C/C	C/C	C/C	C/C
<i>New felony commission</i>	X	X	X	X	X		X
<i>Firearm possession</i>	X	X	X	X	X	X	X
<i>Treatment non-compliance</i>	X	X	X	X	X	X	X
<i>Perjury</i>		X		X	X		X
<i>Violence</i>	X	X	X	X	X		X
<i>Two new misdemeanors</i>	C/C		X	X			X
<i>Missed court appearances</i>			C/C-jdg	X	X		C/C
<i>Missed treatment appearances</i>			3	X	X		C/C
<i>New jail-able misdemeanors</i>	C/C	X	2	X	X		X
<i>Altering drug screens</i>			X	X	X		X
<i>Overall poor performance</i>				X	X		X
<i>Absconding over 30 days</i>	X		X	X	X		X

Key: C/C= decision made on a case-by-case basis; C/C-jdg. = case by case decision based on judge's discretion.
 Fixed number of sanctions before automatic termination

There are different standards for deciding when a participant should be expelled from the drug treatment court program. A continual pattern of program non-compliance and relapses often leads to dismissal. Some programs have a fixed number of sanctions (ranging from four to seven sanctions) before a person is dismissed from the program. Most Virginia drug treatment court programs do not set definite sanction limits for termination, but instead consider the participant's pattern of successes and setbacks and the circumstances of the infraction before deciding to expel a participant from the program. Most programs consider commission of a

new felony, firearms possession, an act of violence, and treatment non-compliance as grounds for dismissal.

Table 9: What are the requirements for adult drug treatment court graduation?

DRUG COURT	Charlottes-ville	Chester-field	Fredericks-burg	Fredericks-burg DUI	Hampton	Henrico	Hopewell	Loudoun
# months clean	12 mo.	4 mo.	4 mo.	4 – 6 mo.	6 mo.	100 days	4 mo.	6 mo.
Complete treatment	X	X	X	X	X	X	X	X
Pay court costs	X		X	X			X	
Pay program fees	X	X	X	X		X	X	X
Obtain permanent housing	X		X			X	X	X
Stable job or school	X		X		X	GED	X	X
Complete comm. service	X	X	X		X		X	X
Pay restitution		X				X		X
Meet AA/NA requirements		X	X	X			X	X
Obtain community support						X	X	
NA/AA home group/ sponsor		X	X		X		X	X
Establish support network					X			
Complete assignments		X	X		X		X	X

DRUG COURT	Newport News	Norfolk	Portsmouth	Richmond	Roanoke	Staunton	Suffolk
# months clean	6 mo.	4 mo.	4 mo.	6 mo.	6 mo.	12 mo.	6 mo.
Complete treatment	X	X	X	X	X	X	X
Pay court costs	X	X	X	X	X	X	X
Pay program fees				X	X	X	X
Obtain permanent housing	X	X	X	X	X		X
Stable job or school	X	X	X	X	X		X
Complete community service	X		X	X	X	X	
Pay restitution				X	X		
Meet AA/NA requirements	X		X	X			
Obtain community support			X	X			
NA/AA home group and sponsor	X		X	X		X	
Establish support network	X		X	X			
Complete assignments	X		X	X		X	

Graduation from a drug treatment court program is a festive and ceremonious occasion that often signals the first recognized success in an addict’s life. The judge and drug treatment court team members as well as the participant’s family gather at the graduation ceremony to applaud the addict’s achievement. Graduation is a prized goal that helps the addict comply with program requirements and maintain their sobriety during the long and strenuous months in the drug treatment court program. All Virginia drug court programs require a minimum amount of sustained sobriety before a participant can graduate from the drug treatment court program. The time range for sustained sobriety is from one hundred days to twelve months. All drug treatment

courts require participants to successfully complete their substance abuse treatment program. Most programs require permanent housing and stable employment or school enrollment before graduation. Establishing community or NA/AA support is also important in assessing the readiness of participants to graduate from some drug court programs.

Table 10: What ancillary services do Virginia’s adult drug treatment court programs offer?

Basic drug court components include intensive drug treatment, close probation supervision, frequent drug testing, and regular appearances before the judge to report program progress. However, addicts have additional needs that must be addressed to enhance the probability of sustained sobriety. The following ancillary services are offered by Virginia adult drug court programs:

DRUG COURT	Charlottes-ville	Chester-field	Fredericks-burg	Fredericks-burg DUI	Hampton	Henrico	Hopewell	Loudoun
<i>Anger management</i>	X	X	X	X	X	X	X	X
<i>Education/GED/college</i>	X	X	X	X	X	X	X	X
<i>Financial man/assistance</i>	X	X	X	X	X	X	X	X
<i>Family counseling</i>	X	X	X	X	X	X		X
<i>Housing assistance</i>	X		X	X	X	X	X	X
<i>Survivors groups</i>			X		X			X
<i>AA/NA</i>	X	X	X	X	X	X	X	X
<i>Graduates aftercare</i>	X				X	X		N/A
<i>Mentor service</i>	X				X		X	
<i>Gender specific groups</i>	X	X	X	X	X			
<i>Co-occurring disorder mgmt.</i>		X		X		X		X
<i>Dual diagnosis groups</i>			X	X	X			X
<i>Parenting classes</i>		X		X	X		X	X
<i>Computer training</i>					X			
<i>Life skills groups</i>		X	X			X	X	X
<i>Couples counseling</i>		X	X			X		X
<i>Motivational enhancement</i>		X				X		X
<i>Acupuncture</i>		X			X	X		X
<i>Bus tickets</i>	X				X	X		X
<i>HIV/Aids education</i>	X		X		X			X
<i>Assessments</i>		X		X	X	X		X
<i>Job assistance</i>	X		X	X	X	X		X
<i>Medical assistance</i>			X		X	X		X
<i>S/A treatment</i>		X	X	X	X	X		X
<i>Long/short residential</i>		X	X	X	X	X		X
<i>Home based counseling</i>		X						
<i>Therapeutic recreation</i>					X	X		

DRUG COURT

Newport News Norfolk Portsmouth Richmond Roanoke Staunton Suffolk

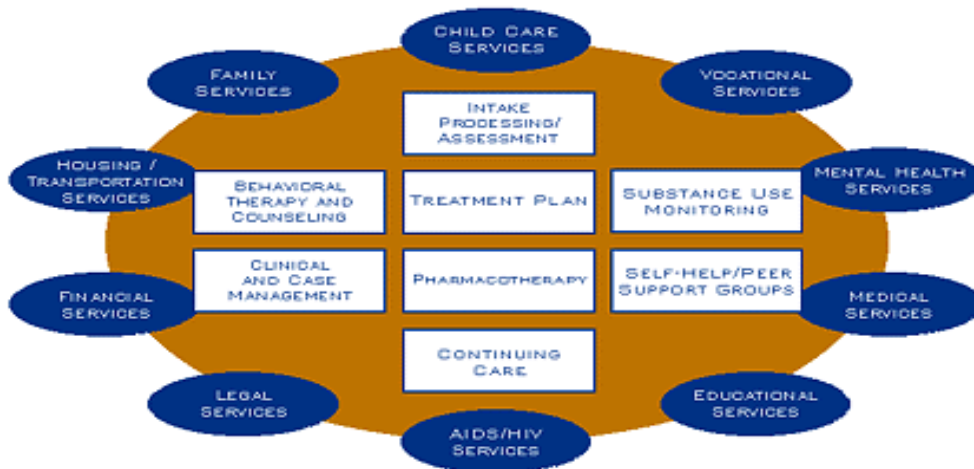
<i>Anger management</i>	X	X	X	X	X	X	X
<i>Education/GED/college</i>	X	X	X	X	X	X	
<i>Financial man/assistance</i>	X	X	X	X	X		
<i>Family counseling</i>	X		X	X	X		X
<i>Housing assistance</i>	X	X	X		X	X	
<i>Survivors groups</i>	X				X		
<i>AA/NA</i>	X	X	X	X	X	X	X
<i>Graduates aftercare</i>	X	X	X	X	X		X
<i>Mentor service</i>	X	X		X	X		
<i>Gender specific groups</i>	X	X	X	X	X		X
<i>Co-occurring disorder mgmt.</i>			X		X	X	
<i>Dual diagnosis groups</i>					X		
<i>Parenting classes</i>	X		X	X	X	X	
<i>Computer training</i>	X		X				
<i>Life skills groups</i>	X	X	X	X	X		
<i>Couples counseling</i>			X				
<i>Motivational enhancement group</i>							
<i>Acupuncture</i>	X		X	X	X		
<i>Bus tickets</i>	X		X	X	X		
<i>HIV/Aids education</i>	X	X	X	X	X		
<i>Assessments</i>	X		X	X	X		X
<i>Job assistance</i>	X	X	X	X	X		
<i>Medical assistance</i>	X			X	X		
<i>S/A treatment</i>	X		X	X	X		X
<i>Long/short residential</i>			X	X	X		X
<i>Home based counseling</i>							
<i>Therapeutic recreation</i>	X			X			

While the primary and most important focus of drug treatment court programs is treating addiction, attention to the many ancillary services needed by addicts is recognized as an essential prerequisite of successful recovery. Figure 1: *Components of Comprehensive Drug Abuse Treatment* depicts the additional services that may be needed by the recovering addict. In many cases, the addict's entire life is in shambles. They need housing and transportation services. Medical and mental health needs that have long been ignored require attention. Family counseling and childcare services may be necessary for creating a healthy home environment. Often addicts need vocational services and job search assistance. They may need education or vocational training to re-enter the job market. Financial planning and short-term financial assistance are often needed. For example, Newport News drug treatment court emphasizes

financial management skills and requires each participant to set up and regularly add to their savings account.

Additionally, many addicts have co-occurring disorders. Their social histories generally contain unusually high levels of trauma that require individual mental health services. Whether substance abuse is the cause or the symptom of larger problems is an unsettled question. Virginia’s drug treatment court programs offer a spectrum of ancillary services that attend to the total needs of the recovering addict and their family needs. Not all services listed in Figure 1 are offered by every drug treatment court program.

Figure 1: Components of Comprehensive Drug Abuse Treatment



While most drug treatment court programs generally start with basic therapeutic services for addiction treatment, ancillary services are later added. Most drug treatment court programs offer anger management classes, educational services, financial management services, housing assistance, Narcotics Anonymous or Alcoholics Anonymous (NA or AA) and family counseling. Survivors’ groups are offered in Hampton, Loudoun, Newport News, Fredericksburg, and Roanoke. Survivors’ groups focus on the emotional and psychological needs of sexual abuse survivors. Studies indicate a high percentage of female addicts are sexual abuse victims. The addiction develops as the victim copes with the trauma of sexual abuse by using drugs or alcohol. Because of the particular needs of female addicts, many adult drug courts (Charlottesville, Chesterfield, Fredericksburg Circuit and Fredericksburg DUI, Hampton, Newport News, Norfolk, Portsmouth, Richmond, Roanoke, and Suffolk) also offer gender specific groups.

The addition of graduate aftercare and/or mentor groups addresses the relapse danger evident at the end of the drug court program. Peer support and graduated lessening of structure and support is needed to replace the diminishing control and intensity of the drug court program. Roanoke Circuit’s drug court program has implemented a peer review board. Drug treatment court participants are selected to serve on a panel that reviews requests and grievances of their peers. For example, if a participant wants to appeal a high number of required probation visits, he/she may take his request to the peer review board. The board may then recommend to the drug treatment court team that the number of probation visits be reduced.

Table 11: What are the frequencies and types of drug testing?

DRUG COURT	Charlottes-ville	Chester-field	Fredericks-burg	Fredericks-burg DUI	Hampton	Henrico	Hopewell	Loudoun
Random	X	X	X	X	X	ColorCd	X	X
Frequency of Drug Screens	2-5x/wk	3x/wk	3-4x/wk	1-2x/mo.	2-3x/wk		3x/wk	3x/wk
Unit cost of drug screens	\$1.65	\$1.07	\$1.20		\$.70	\$.55	\$1.50	
% of positive screens	2-3%	1%	6.9%		2%	15%	>5%	1 st Step

DRUG COURT	Newport News	Norfolk	Portsmouth	Richmond	Roanoke	Staunton	Suffolk
Random	X	X	X	X	X	X	X
Frequency of Drug Screens*	2-3x/wk	2x/wk	2-3x/wk	3-5x/wk	color cd	2-5x/wk	2-3/xwk
Unit cost of drug screens	\$.70	\$.55	\$3.50	\$1.50	\$.55	\$1.60	\$1.62
% of positive screens	1%	1.4%	9.2%	5%	9.3%	2.5%	17%

* Reflects the most frequent drug screening in Phase 1; later phase have reduced frequencies of drug screenings

Drug addicts will find any weakness in a system that allows them to consume drugs undetected. The only way to enforce sobriety is to conduct numerous and random drug tests. When drug court participants are in the first stage of their program, they are tested a minimum of two to five times per week. All drug treatment court programs have a random schedule for drug testing. A color code system may be employed requiring participants to call in daily to learn the day’s color code. If their color is called, they must report for drug testing by the day’s end.

There are several types of drug screening tests on the market, but most Virginia drug treatment court programs choose urinalysis (UA) screens. Roanoke drug treatment court has also used hair testing to screen for drug use. Generally, the clinician or the probation officer conducts urinalysis testing. The number of positive tests for drug treatment court participants averages between 1% and 17%. Henrico and Suffolk, at 15% and 17% respectively, report a higher percentage of positive urine tests than is common in other Virginia drug courts. Portsmouth also has a higher number of positive drug tests (9.2%). This may be due to the higher percentage of narcotics addicts in these localities.

Close monitoring of specimen gathering is necessary because addicts know many ways to hide their continued drug use. The most frequent method of attempted drug test adulteration is diluting the specimen by water overloading. Other participants have tried switching urine samples or bringing a hidden sample with them. Roanoke drug court uses a laser to test the temperature of samples (elevated temperatures with fresh samples). When drug screen adulteration occurs, many drug courts assume the participant is covering for recent drug use. Under Virginia law, drug test adulteration is a misdemeanor offense. Several drug treatment courts post a warning in restrooms about the misdemeanor charge for drug test adulteration.

Table 12: What are the types of sanctions used by Virginia’s adult drug treatment court programs?

DRUG COURT	<i>Charlottes-ville</i>	<i>Chester-field</i>	<i>Fredericks-burg</i>	<i>Fredericks-burg DUI</i>	<i>Hampton</i>	<i>Henrico</i>	<i>Hopewell</i>	<i>Loudoun</i>
<i>Jail (min-max) time</i>	<i>up to 120 days</i>	<i>up to 90 days</i>	<i>up to 14 days</i>	<i>Varies</i>	<i>up to 10 days</i>	<i>1-6 weeks</i>	<i>1-14 days</i>	<i>1 day-indef.</i>
<i>Community service</i>	<i>X</i>	<i>X</i>	<i>X</i>		<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Written reports</i>	<i>X</i>	<i>X</i>	<i>X</i>		<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Return to lower stage</i>	<i>X</i>		<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Increased treatment</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Increased AA/NA</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Home electronic monitoring</i>	<i>X</i>	<i>X</i>	<i>X</i>		<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Restrict drivers license</i>				<i>X</i>				
<i>Remain in court after case</i>	<i>X</i>							
<i>Peer review</i>						<i>X</i>		
<i>Curfew</i>		<i>X</i>	<i>X</i>	<i>X</i>		<i>X</i>	<i>X</i>	<i>X</i>
<i>Increase drug testing</i>		<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>		<i>X</i>	<i>X</i>
<i>Relapse prevention plan</i>				<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Increased p.o. supervision</i>			<i>X</i>	<i>X</i>		<i>X</i>	<i>X</i>	<i>X</i>
<i>Weekend work program</i>								

DRUG COURT

Newport News *Norfolk* *Portsmouth* *Richmond* *Roanoke* *Staunton* *Suffolk*

<i>Jail (min-max) time</i>	<i>up to 10 days</i>	<i>up to 10 days</i>	<i>up to 10 days</i>	<i>up to 45 days</i>	<i>1 day-indef.</i>	<i>1 day-indef.</i>	<i>1 day-indef.</i>
<i>Community service</i>	X	X	X	X	X	X	X
<i>Written reports</i>	X	X	X	X	X	X	X
<i>Return to lower stage</i>	X	X	X	X	X	X	X
<i>Increased treatment</i>	X	X	X	X	X	X	X
<i>Increased AA/NA</i>	X	X	X	X	X	X	X
<i>Home electronic monitoring</i>	X	X		X	X		X
<i>Restrict drivers license</i>	X				X		
<i>Remain in court after case</i>	X			X			
<i>Peer review</i>	X	X			X		
<i>Curfew</i>		X	X	X	X		
<i>Increase drug testing</i>	X	X	X	X	X		X
<i>Relapse prevention plan</i>	X	X	X	X			
<i>Increased probation supervision</i>	X			X	X		X
<i>Weekend work program</i>							

A major advantage of drug treatment court programs is the ability to apply sanctions almost immediately after program non-compliance or relapse. Traditional criminal justice processing may result in an addicted offender waiting months before facing the consequences of their continued drug use or law violations. Only drug court judges have the power to enforce legal sanctions such as temporary incarceration. This power augments treatment effectiveness by coupling consequences with behaviors. Thus, sound principles of learning psychology apply: negative reinforcement when applied swiftly, surely and consistently best extinguishes habitual behaviors. Avoidance of incarceration (whether a temporary sanction or a longer term sentence) is a primary motivator for an addict to discontinue their drug use. Virginia’s drug treatment courts use the threat of jail time as a sanction in all programs. Incarceration periods used for program non-compliance or relapses range from one day to an indefinite period, with an average period of less than three weeks. Charlottesville uses incarceration for up to 120 days and Richmond will incarcerate the violator for up to 45 days.

Other drug court sanctions include community service, written reports, return to a lower program stage, increased treatment sessions or AA/NA sessions, home electronic monitoring and restricting a driver’s license. There are several “in court” sanctions such as sitting in the jury box, taking the witness stand, staying in the “bull pen” (lock up), or having to stay during the entire drug treatment court docket. One treatment sanction requires the participant take the “hot seat” in group treatment sessions. All questions and advice are then aimed at the person in the hot seat.

Table 13: What are the types of rewards used by Virginia’s adult drug treatment court programs?

DRUG COURT	Charlottes-ville	Chester-field	Fredericks-burg	Fredericks-burg DUI	Hampton	Henrico	Hopewell	Loudoun
<i>Certificates</i>	X	X	X	X	X	X	X	X
<i>Increase to higher stage</i>	X	X	X	X	X	X	X	X
<i>Tokens/medallions</i>		X	X		X	X	X	X
<i>Recreation/gift/meal vouche</i>	X	X	X		X	X	X	X
<i>Decrease treatment</i>	X	X	X	X	X	X	X	
<i>Decrease AA/NA</i>				X	X		X	
<i>Client of the month award</i>					X			
<i>Decrease court frequency</i>	X	X	X	X	X	X	X	
<i>Enter name in lottery</i>		X						
<i>Decrease Urinanalysis Tests</i>	X	X	X	X	X		X	
<i>Lift/decrease curfew</i>		X		X	X	X	X	
<i>Gift baskets</i>						X	X	
<i>Recognition from the bench</i>		X	X	X	X	X	X	X
<i>Holiday celebration</i>					X			X
<i>Annual picnic</i>		X	X		X			
<i>Field trips</i>					X			
<i>Birthday parties</i>					X			
<i>Breakfast/lunch with judge</i>		X						
<i>Leave court early</i>		X	X	X	X			

DRUG COURT	Newport News	Norfolk	Portsmouth	Richmond	Roanoke	Staunton	Suffolk
<i>Certificates</i>	X	X	X	X	X		X
<i>Increase to higher stage</i>	X	X	X	X	X	X	
<i>Tokens/medallions</i>	X	X	X	X	X	X	X
<i>Recreation/gift/meal voucher</i>	X		X	X			X
<i>Decrease treatment</i>	X	X	X	X	X	X	
<i>Decrease AA/NA</i>	X	X	X			X	
<i>Client of the month award</i>	X		X	X			
<i>Decrease court frequency</i>	X	X	X	X	X	X	X
<i>Enter name in lottery</i>							
<i>Decrease Urinanalysis tests</i>	X	X	X	X	X	X	X
<i>Lift/decrease curfew</i>			X	X			
<i>Gift baskets</i>			X	X			
<i>Recognition from the bench</i>	X		X	X	X	X	X
<i>Holiday celebration</i>	X		X	X			
<i>Annual picnic</i>	X		X	X			
<i>Field trips</i>	X		X	X			
<i>Birthday parties</i>	X		X	X			
<i>Breakfast/lunch with judge</i>			X				
<i>Leave court early</i>	X		X		X		

Perhaps more important than sanctions are the rewards given participants for program compliance and sustained sobriety. Most addicts have few accomplishments defining them as

successful in life. The encouragement and recognition of “people of importance” – the judge, prosecutor, public defender, clinicians, probation officers and others – helps drug treatment court participants to “stay the course” in recovery. Instead of continually being judged and punished, their accomplishments bring praise and rewards. Some rewards are program based – advancement to higher program levels that inherently bring more personal freedom, decreased probation visits, fewer therapy sessions, decreased drug testing, lifted curfews, and less court appearances. Rewards may be “recognition based” – a client of the month award or entering all compliant participants in a lottery and giving them the chance to win an award. Other rewards are tangible – tokens or medallions, recreation or gift vouchers. Virginia’s drug treatment courts are continually looking for resources that will allow additional rewards for positive behaviors

Table 14: How frequently are adult drug treatment court hearings held?

DRUG COURT	Charlottes-ville	Chester-field	Fredericks-burg	Fredericks-burg DUI	Hampton	Henrico	Hopewell	Loudoun
Frequency of hearings	<i>1/wk</i>	<i>1/wk</i>	<i>1/wk</i>	<i>1/wk</i>	<i>1/wk</i>	<i>1/wk</i>	<i>1/wk</i>	<i>1/wk</i>
Number of d.c. dockets	<i>1</i>	<i>1</i>	<i>1</i>	<i>2</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>

DRUG COURT	Newport News	Norfolk	Portsmouth	Richmond	Roanoke	Staunton	Suffolk
Frequency of hearings	<i>1/wk</i>	<i>1/wk</i>	<i>1/wk</i>	<i>1/wk</i>	<i>1/wk</i>	<i>1/wk</i>	<i>1/wk</i>
Number of drug court dockets	<i>2</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>2</i>	<i>1</i>	<i>1</i>

All adult programs hold weekly drug court hearings. Three localities (Roanoke, Fredericksburg DUI, and Newport News) have two separate drug court dockets meeting weekly. Participants report that regular reporting to a judge is the deciding factor in their sustained sobriety and program successes.

Table 15: What fees are assessed to adult drug treatment court participants?

DRUG COURT	Charlottes-ville	Chester-field	Fredericks-burg	Fredericks-burg DUI	Hampton	Henrico	Hopewell	Loudoun
Treatment fees	<i>Sliding</i>	<i>none</i>	<i>none</i>	<i>Sliding</i>	<i>none</i>	<i>None</i>	<i>\$860</i>	<i>Sliding</i>
Court costs	<i>varies</i>	<i>varies</i>	<i>varies</i>	<i>None</i>	<i>varies</i>		<i>Varies</i>	<i>varies</i>
Drug treatment court fees		<i>\$75</i>	<i>\$240</i>	<i>VASAP \$375</i>	<i>none</i>	<i>\$50</i>	<i>\$240</i>	<i>\$100</i>
Restitution required	<i>No</i>	<i>Yes</i>	<i>No</i>	<i>No</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>	<i>Yes</i>
Child support required	<i>No</i>	<i>Yes</i>	<i>No</i>	<i>No</i>		<i>Yes</i>	<i>Yes</i>	
DMV fees				<i>Yes</i>				
Drug screen fees required		<i>If positive</i>	<i>At times</i>	<i>Yes</i>	<i>If positive</i>	<i>If positive</i>	<i>No</i>	<i>To confirm</i>

DRUG COURT	Newport News	Norfolk	Portsmouth	Richmond	Roanoke	Staunton	Suffolk
Treatment fees	<i>none</i>	<i>none</i>	<i>none</i>	<i>None</i>	<i>\$450</i>	<i>Sliding</i>	<i>\$25/wk</i>
Court costs	<i>varies</i>	<i>\$20/mo</i>	<i>varies</i>	<i>Varies</i>	<i>varies</i>	<i>Varies</i>	<i>Varies</i>
Drug treatment court fees		<i>\$50</i>	<i>no</i>	<i>\$5</i>		<i>No</i>	<i>\$50</i>
Restitution required	<i>yes</i>	<i>no</i>	<i>If ordered</i>	<i>Yes</i>	<i>yes</i>	<i>No</i>	<i>If ordered</i>
Child support required	<i>yes</i>	<i>no</i>	<i>no</i>	<i>Yes</i>	<i>not defined</i>	<i>No</i>	<i>Yes</i>
DMV fees				<i>Yes</i>		<i>No</i>	
Drug screen fees required	<i>If positive</i>			<i>To confirm</i>		<i>No</i>	

Under § 18.2-254, a defendant charged with a drug or drug-related offense can be charged court fees for drug and alcohol assessment and treatment. Under this provision, drug treatment courts may elect to charge three types of fees: court costs, treatment fees, and drug treatment court fees. If a drug offender is convicted prior to entering the drug treatment court program, court costs are assessed. Other drug treatment court costs vary from program to program. Treatment fees are directed to treatment agencies that provide clinical services. Roanoke charges a one-time treatment fee of \$450 and Hopewell charges \$860 for treatment services.

Table 16: What are the 2004 funding sources and amounts for Virginia’s adult drug treatment courts?

	Charlottes-ville	Chesterfield	Fredericks- burg	Fredericks- burg DUI	Hampton	Henrico	Hopewell	Loudoun
Local	<i>0</i>	<i>\$ 45,000</i>	<i>0</i>	<i>User Funded</i>	<i>\$80,000</i>	<i>\$78,000</i>	<i>In kind</i>	<i>In Kind*</i>
State	<i>\$ 44,722</i>	<i>\$232,000</i>	<i>\$ 56,852</i>	<i>Through VASAP</i>	<i>0</i>	<i>0</i>	<i>0</i>	<i>In Kind*</i>
Federal	<i>\$137,778</i>	<i>\$300,000</i>	<i>\$175,148</i>	<i>Through VASAP</i>	<i>\$118,000</i>	<i>\$252,000</i>	<i>0</i>	<i>*</i>
Private	<i>0</i>	<i>0</i>	<i>0</i>	<i>Fee Paid</i>	<i>0</i>	<i>0</i>	<i>\$15,000</i>	<i>*</i>
Total	<i>\$182,500</i>	<i>\$577,000</i>	<i>\$232,000</i>	<i>In Kind & VASAP</i>	<i>\$198,000</i>	<i>\$330,000</i>	<i>\$15,000</i>	<i>In Kind*</i>

**Uses existing staff and resources for program operation*

	<i>Newport News</i>	<i>Norfolk</i>	<i>Portsmouth</i>	<i>Richmond</i>	<i>Roanoke</i>	<i>Staunton</i>	<i>Suffolk</i>
Local	\$ 68,982	\$ 44,722	\$ 44,722	\$27,000	68,982	<i>In Kind *</i>	\$4000
State	\$212,518	\$137,778	\$137,778	\$232,000	\$212,518	<i>In Kind*</i>	0
Federal	0	0	0	\$90,000	0	0	\$1000 <i>LLEBG</i>
Private	0	0	0	0	0	0	\$400
Total	\$281,500	\$182,500	\$182,500	\$349,000	\$281,500	<i>In Kind *</i>	\$5400

**Uses existing staff and resources for program operation*

Local drug court programs receive funding support from local, state, federal, and private sources. Fredericksburg’s DUI drug court receives funding support from the Virginia Alcohol Safety Action Program. Staunton and Loudoun operate their pilot drug court programs by using existing staff and contributed resources. Suffolk also relies mostly on existing staff and resources. The other drug courts have a combination of state, local, and federal monies with budgets ranging from \$182,500 to \$577,000.

Table 17: What local agencies collaborate in providing services to Virginia’s adult drug treatment courts?

	<i>Charlottes-ville</i>	<i>Chesterfield</i>	<i>Fredericks-burg</i>	<i>Fredericks-burg DUI</i>	<i>Hampton</i>	<i>Henrico</i>	<i>Hopewell</i>	<i>Loudoun</i>
CC-DOC			<i>X(C)</i>		<i>X</i>	<i>X (C)</i>		
CC-DCJS	<i>X</i>	<i>X (P)</i>				<i>X</i>		<i>X (C)</i>
CSB	<i>X</i>	<i>X (P)</i>	<i>X(P)</i>	<i>X</i>	<i>X</i>	<i>X(C)</i>	<i>X</i>	<i>X (C)</i>
In-house						<i>X(P)</i>	<i>X</i>	
Private Tx				<i>X</i>			<i>X</i>	
Police		<i>X (P)</i>					<i>X</i>	
Sheriff						<i>X(C)</i>	<i>X</i>	<i>X (C)</i>
Other				<i>VASAP</i>				

**key: CC-DOC = Community Corrections in Department of Corrections; CC-DCJS= Community Corrections in Department of Criminal Justice Services; CSB=Treatment providers employed by local Community Services Boards; In-house=Clinicians housed within Drug treatment court program building; Private TX= Private agency treatment providers; Police=Surveillance or supervision services provided by local police department; Sheriff =Supervision/treatment/or sanctions provided by local sheriff’s department; Indicate “P” for paid services and “C” for contributed services.*

	<i>Newport News</i>	<i>Norfolk</i>	<i>Portsmouth</i>	<i>Richmond</i>	<i>Roanoke</i>	<i>Staunton</i>	<i>Suffolk</i>
<i>CC-DOC</i>	<i>X (C)</i>	<i>X(C)</i>	<i>X(C)</i>	<i>X(C)</i>	<i>X</i>		<i>X (C)</i>
<i>CC-DCJS</i>							
<i>CSB</i>	<i>X (P)</i>	<i>X(P)</i>			<i>X (C)</i>		<i>X (C)</i>
<i>In-house</i>			<i>X(P)</i>	<i>X(P)</i>			
<i>Private Tx</i>					<i>X (C)</i>		
<i>Police</i>							
<i>Sheriff</i>			<i>X(C)</i>				
<i>Other</i>							<i>X (Jail)</i>

**key: CC-DOC = Community Corrections in Department of Corrections; CC-DCJS= Community Corrections in Department of Criminal Justice Services; CSB=Treatment providers employed by local Community Services Boards; In-house=Clinicians housed within Drug treatment court program building; Private TX= Private agency treatment providers; Police=Surveillance or supervision services provided by local police department; Sheriff =Supervision/treatment/or sanctions provided by local sheriff's department; "P" for paid services and "C" for contributed services.*

Adult drug treatment courts are developed through multidisciplinary and interagency initiatives between judges, Commonwealth's Attorneys, defense attorneys, treatment professionals, local law enforcement and jail staff, and personnel from the Department of Corrections, Community Corrections and Pre-Trial programs. The ongoing success of drug court programs depends on continuing collaboration between these multi-disciplinary agencies. Table 18 documents the contributions and alliances between drug courts and the following state and local agencies: Department of Corrections, Virginia Alcohol Safety Action Program, Department of Criminal Justice Services, Community Services Boards, Police Departments and Sheriff Departments.

DESCRIPTIONS OF VIRGINIA'S JUVENILE DRUG TREATMENT COURTS

Juvenile programs cannot be compared to adult drug treatment court programs for several reasons: (1) developmental levels of youth require different types of therapeutic interventions; (2) youth commonly underestimate the serious consequences of their substance abuse resulting in less commitment to treatment; and (3) their dependency on significant adults requires family therapeutic interventions.

Many drug treatment court professionals believe that juvenile substance abusers present unique and difficult treatment challenges. Because youth are generally not threatened with the prospect of years of incarceration, there is less incentive for them to remain in juvenile drug treatment court programs. The teenage drug abuser is more influenced by peer pressure than their adult counterpart. Repeated failures or suspensions in school further reinforce the failure identity of juvenile drug abusers. Because of their limited life experiences, they are not imprinted with the same urgency for addiction recovery often found with adult addicts. Juveniles often live with guardians or parents who abuse drugs or alcohol or have other significant mental health issues. Therefore, adequate treatment of juvenile offenders often requires that the entire family be treated. A family systems approach means that juvenile drug court programs are more costly than adult programs. Research indicates that many criminally-involved youth also have hidden medical issues such as fetal alcohol syndrome (FAS), untreated chronic conditions such as asthma, and serious childhood head injuries.

Virginia has eight operational juvenile drug treatment court programs, with another three jurisdictions planning drug court programs. Lack of funding has not deterred jurisdictions from planning and implementing juvenile drug treatment court programs. In Lee and Scott Counties, the urgent need for such a program led local officials to appeal to a pharmaceutical corporation for financial support. In Fairfax, Hanover, and Prince William counties, drug courts were established using existing staff and contributed services.

While advocates believe drug court programs save taxpayers significant amounts of money by breaking the cycle of criminal and drug involvement, few studies have sought to document the true nature of drug court program benefits. One measure of cost savings is the comparative cost of community-based drug court placement versus more expensive institutional incarceration. In Virginia, the average juvenile incarceration cost is \$38,646 per youth per year. Drug courts can only claim savings from avoided incarceration if the offense histories of drug

court participants are serious and chronic enough that youth would likely be committed to an institution if drug court placement were not available. A 2002 study of Richmond Juvenile Drug Court participants indicated an average number of 9.58 arrests for each participant prior to drug court entry. Of this number, each participant had an average of 3.25 felony offense arrests prior to drug court admittance. Their offense histories are comparable to juveniles committed to youth institutions. The savings from avoided incarceration of the Richmond Juvenile Drug Court youth was calculated at \$949,683.

This next section gives an overview of Virginia's operational juvenile drug treatment court programs by answering the following research questions:

1. What are the juvenile drug treatment court program models?
2. When did the juvenile drug treatment court program begin, the minimum and average length of participant stay, and the program capacity?
3. What are juvenile drug treatment court eligibility requirements?
4. How many juvenile drug treatment court participants were admitted, terminated, withdrew, died, graduated or are currently enrolled in Virginia's juvenile drug treatment court programs? What was the highest number of juvenile drug treatment court participants in 2004?
5. What are the demographic characteristics (age, race, and gender) of juvenile drug treatment court participants?
6. What are the drugs of choice for Virginia juvenile drug treatment court participants?
7. What behaviors generally result in participant termination from juvenile drug treatment court programs?
8. What are the requirements for graduation from juvenile drug treatment court programs?
9. What ancillary services do juvenile drug treatment court programs offer?
10. What is the frequency of drug testing in each juvenile drug treatment court program?
11. What are the types of sanctions used by Virginia's juvenile drug treatment court programs?
12. What are the types of rewards used by Virginia's juvenile drug treatment court programs?
13. What is the frequency of juvenile drug treatment court hearings?
14. What fees are assessed for juvenile drug treatment court participation?
15. What are the 2004 funding sources and amounts for Virginia's juvenile drug treatment courts?
16. What local agencies collaborate in providing services to Virginia's juvenile drug treatment courts?

Table 18: What are the juvenile drug treatment court models in Virginia?

	Chesterfield	Fairfax	Fredericksburg	Hanover	Lee/Scott	Newport News	Prince William	Richmond
<i>Post-Plea</i>	X	X	X		X	X		X
<i>Diversion</i>								
<i>Pre-Dispositional</i>	X		X	X			X	
<i>Post-Dispositional</i>	X	X X	X	X	X	X		X
<i>First Offenders</i>			X					

Most juvenile drug treatment court programs are post-dispositional. The post-dispositional model requires that juveniles be found not innocent of their presenting charge. Voluntary drug court admittance is offered as an alternative to another disposition. Some juvenile drug courts do not require a finding of not innocent, but rather a finding is deferred and the youth is placed in the drug court program. Upon successful program completion, the juvenile’s presenting charges may be dismissed (pre-dispositional model). The majority of juvenile drug court programs focus on repeat offenders and probation violators (post-dispositional model).

Table 19: When did the drug treatment court program begin, the minimum and average length of participant stay, and the program capacity?

	Chesterfield	Fairfax	Fredericksburg	Hanover	Lee/Scott	Newport News	Prince William	Richmond
<i>When did drug treatment court program begin?</i>	2/03	10/03	10/98	5/03	04/02	03/02	03/04	04/99
<i>Minimum program length</i>	12 mo.	12 mo.	12 mo.	5 mo.	9-12mos	12 mo.	9.5 mo.	160 days
<i>Average program length</i>	17mo.	12 mo.	16 mo.	10 mo.	12 mos.	12 mo.	TBD*	300 days
<i>Program Capacity</i>	25	10-12	20	15	28	25	12	16

*TBD= to be decided

Table 19 presents program statistics including the dates of program commencement, the minimum program length, average program length, and program capacity. Starting in October 1998, the Fredericksburg (Rappahannock Regional) juvenile drug treatment court is the oldest juvenile drug court program in Virginia. This drug court is housed in the Fredericksburg Juvenile Court and serves the counties of Stafford, King George, and Spotsylvania as well as the city of Fredericksburg. Prince William County implemented the most recent juvenile drug treatment court program in March 2004. Most juvenile drug courts have established a minimum program length of twelve months.

Table 20: What are juvenile drug treatment court eligibility requirements?

	<i>Chester- field</i>	<i>Fairfax</i>	<i>Fredericks- burg</i>	<i>Hanover</i>	<i>Lee/Scott</i>	<i>Newport News</i>	<i>Prince William</i>	<i>Richmond</i>
<i>Non-violent</i>	X		X	X	X	X	X	X
<i>Minor previous violence</i>	X	<i>Simple Assault</i>	X	X		X	X	X
<i>Simple possession</i>	X	X	X	X	X	X	X	X
<i>Prescription fraud</i>	X		X	X	X		X	
<i>Intent for Accommod.</i>	X	X	X	X	X		X	X
<i>Drug-related</i>	X	X	X	X	X	X	X	X
<i>Dual Diagnosis</i>	X	X	X	X		X	X	X
<i>Literate</i>	X	X	X	X				
<i>Addict</i>	X	X	X	X		X	X	X
<i>City/County Resident</i>	X	X	X	X	X	X	X	X
<i>Participant age range</i>	<i>14-17.5</i>	<i>14-18</i>	<i>12-18</i>	<i>12-18</i>	<i>12-17</i>	<i>12-17</i>	<i>12-17</i>	<i>12-17</i>
<i>Transportation</i>		<i>parents</i>						
<i>Employable</i>								
<i>Not on parole</i>								
<i>No prior DC experience</i>			X				X	
<i>No co-defendant in DC</i>								
<i>Not an informant</i>		X					X	
<i>No family/intimate relation in DC</i>		X						
<i>No pending charges (except traffic)</i>		<i>Depends on charge</i>	X					

A common juvenile drug court eligibility requirement is non-violent offense histories. Juveniles with minor violent offenses such as simple assault may be admitted to some drug court programs, but juveniles with serious felony charges involving person-to-person violence are excluded. Eligible juveniles also have drug or drug-related offenses. Juvenile drug treatment courts focus on drug- or drug-related offenders. Juvenile drug addiction is harder to diagnose because the youths' drug histories are neither as extensive nor longstanding as drug histories of adults. Most juvenile drug court programs will accept a charge of intent for accommodation when the amount of possessed drugs is very small and when the addict is selling to a friend or acquaintance for the purpose of supporting his/her own habit. City or county residency is also required in all juvenile drug court programs. Drug court officials recognize that many juvenile drug abusers also have mental health disorders and/or learning disabilities. Therefore, they accept dually diagnosed candidates on a case-to-case basis.

Table 21: How many juvenile drug treatment court participants were admitted, terminated, withdrew, died, graduated or are currently enrolled in the program? What was the highest number of participants in the program at one time during 2004?

	<i>Chester- field</i>	<i>Fairfax</i>	<i>Fredericks burg</i>	<i>Hanover</i>	<i>Lee/Scott</i>	<i>Newport News</i>	<i>Prince William</i>	<i>Richmond</i>
<i>Total admitted to program</i>	17	9	145	22	59	45	14	60
<i>Current enrollment</i>	12	6	15	6	11	10	10	14
<i>Number of graduates to date</i>	3	0	55	9	31	19	0	16
<i>Total terminated</i>	2	2	69	7	14	11	4	26
<i>Total Withdrawals</i>	0	1	5	0	3	5	0	4
<i>Total Deceased</i>	0	0	1	0	0	0	0	0
<i>Highest no. in program in 04</i>	17	9	20	14	15	13	10	15

Table 21 presents juvenile drug treatment court program statistics including the number of participants admitted to the program, the number of current participants, the number of graduates, and the numbers that voluntarily withdrew or were involuntarily terminated before completing the program. Fredericksburg has admitted the largest number of participants (145) with 55 graduates. Richmond’s drug court program has admitted 60 participants and has graduated 16. Lee and Scott County juvenile drug treatment court has admitted 59 participants to date. The newer drug treatment courts are growing rapidly: Newport News Juvenile Court has admitted 45 participants, Chesterfield has admitted 17 participants, and Hanover has admitted 22 participants. Juvenile offenders voluntarily enter and choose to remain in the drug treatment court program. Of the total number of 371 admitted to Virginia’s juvenile drug treatment court programs, only 18 have voluntarily withdrawn from the programs. This low number of voluntary withdrawals may signal the juveniles' willingness to stay in these intensive programs. It appears that both the youth and their family members value the treatment and assistance given in juvenile drug treatment court programs.

Table 22: What are the demographic characteristics (age, race, and gender) of Virginia’s juvenile drug treatment court participants?

	<i>Chesterfield</i>	<i>Fairfax</i>	<i>Fredericks- burg</i>	<i>Hanover</i>	<i>Lee/Scott</i>	<i>Newport News</i>	<i>Prince William</i>	<i>Richmond</i>
Total Admitted	17	9	145	22	59	45	14	60
Race								
Black	1	2	29	0	1	27	1	58
White	14	6	108	22	58	16	12	1
Other	2	1	8	0	0	2	1	1
Gender								
Female	4	1	106	5	17	8	3	1
Male	13	8	39	17	42	37	11	59
Age Range	15 - 17	15 - 17	15 - 21	12 - 18	12 - 17	14 - 17	15-18	13 - 18
Average Age	16	16	18	16.9	14	16	15.5	15

Demographic variation shows that substance abuse affects youth of different races, ages, and gender. Racial composition varies with Richmond and Newport News having more black drug treatment court participants and the remaining programs serving more white participants. Statewide, 33.5% of juvenile drug treatment court participants are black, 63.5% are white, and 3% are other races. Juvenile drug treatment court programs, more so than adult drug treatment courts, show a marked gender skew. Most juvenile drug treatment court participants are male. Statewide, 17% of juvenile drug court participants are girls and 83% are boys. Juvenile drug courts accept youth as young as age twelve. Juvenile drug court participants have an average age of 16.5.

Table 23: What are the primary drugs of choice for active juvenile drug treatment court participants?

<i>Chesterfield</i>	<i>Fairfax</i>	<i>Fredericks- burg</i>	<i>Hanover</i>	<i>Lee/Scott</i>	<i>Newport News</i>	<i>Prince William</i>	<i>Richmond</i>
Alcohol Marijuana Depressants	Marijuana Alcohol PCP Crack Hallucino- gens	Marijuana Stimulates Opiates/ Barbiturates Powdered Cocaine	Alcohol Marijuana Depressant Powdered Cocaine	Alcohol Marijuana Depressants (Benzodiaze- pines) OTC medi- cations	Alcohol Marijuana Hallucino- gens (MDMA) Tobacco	Alcohol Marijuana OTC medi- cations Tobacco	Alcohol Marijuana Prescription Narcotics Tobacco

* OTC medications = Over-the-counter cold and flu medications containing ephedrine or pseudo-ephedrine;

National research studies indicate that marijuana and alcohol are the dominant drugs of choice for youth. Virginia youth adhere to this trend with marijuana indicated as their drug of choice. Alcohol is also a prime choice for youth in all drug treatment court programs except Fredericksburg. In Fredericksburg, the second drug of choice is stimulants. There is more variety in the third drug of choice with Virginia youth also experimenting with opiates, barbiturates, PCP, crack, hallucinogens, depressants, cocaine, benzodiazepines, MDMA, narcotics, and tobacco. Powered cocaine and depressants are used by Hanover drug court participants. Lee/Scott drug court staff note an increase in shoplifting charges that involve over-the-counter (OTC) cold and flu medications containing Ephedrine or Pseudo Ephedrine. These OTC medications are taken in large quantities (as much as an entire package at one time). Juveniles report hallucinatory experiences when abusing these medications. In the Lee/Scott area, there have been two reported overdoses of OTC medications resulting in hospitalization of juveniles. The Prince William Juvenile Drug Court also reports a significant number of youth abusing over-the-counter medications.

Table 24: What behaviors generally result in termination from juvenile drug treatment court programs?

	<i>Chesterfield</i>	<i>Fairfax</i>	<i>Fredericks- burg</i>	<i>Hanover</i>	<i>Lee/Scott</i>	<i>Newport News</i>	<i>Prince William</i>	<i>Richmond</i>
<i>Exceeds number of Acceptable sanctions</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>3 strikes</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>New arrest</i>	<i>X(F)</i>	<i>X</i>	<i>C/C</i>	<i>C/C</i>	<i>1 strike</i>	<i>C/C</i>	<i>C/C</i>	<i>C/C</i>
<i>New felony conviction</i>	<i>X</i>	<i>X</i>	<i>C/C</i>	<i>C/C</i>	<i>X</i>	<i>X</i>	<i>C/C</i>	<i>C/C</i>
<i>Firearm possession</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>C/C</i>	<i>X</i>
<i>Treatment non-compliance</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Perjury</i>		<i>X</i>			<i>X</i>	<i>X</i>	<i>C/C</i>	<i>X</i>
<i>Act of violence</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>C/C</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Misdemeanor offenses</i>	<i>C/C</i>				<i>1 strike</i>		<i>C/C</i>	
<i>Missed court appearances</i>					<i>1 strike</i>			
<i>Missed treatment sessions</i>					<i>1 strike</i>			
<i>Expulsion from school</i>		<i>X</i>			<i>X</i>			
<i>Any serious crime</i>	<i>X</i>	<i>X</i>	<i>C/C</i>		<i>X</i>	<i>X</i>	<i>C/C</i>	<i>X</i>
<i>Altering screens</i>	<i>2strikes</i>	<i>X</i>	<i>X</i>		<i>1 strike</i>			
<i>Poor performance</i>		<i>X</i>			<i>1 strike</i>			
<i>Absconding for more than 30 days</i>	<i>X</i>	<i>X</i>	<i>C/C</i>		<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>

*C/C= Case by case

A continual pattern of program non-compliance and drug relapses will eventually result in a participant's termination from juvenile drug treatment court. The Lee County and Scott

County juvenile drug court program has a “three strikes” limit. The other juvenile drug treatment courts decide upon participant termination on a case-by-case basis. Possession of a firearm, a serious crime or act of violence, and treatment non-compliance are grounds for dismissal in all Virginia juvenile drug treatment court programs.

Table 25: What are the requirements for graduation from juvenile drug treatment court programs?

	<i>Chesterfield</i>	<i>Fairfax</i>	<i>Fredericks- burg</i>	<i>Hanover</i>	<i>Lee/Scott</i>	<i>Newport News</i>	<i>Prince William</i>	<i>Richmond</i>
<i># of months clean</i>	<i>4 mos</i>	<i>6 mos</i>	<i>3 mos</i>	<i>10 wks</i>	<i>9 mos</i>	<i>30-60 day</i>	<i>60 days</i>	<i>60 days</i>
<i>Complete TX program</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Pay court costs</i>			<i>X</i>	<i>X</i>			<i>X</i>	<i>X</i>
<i>Pay program fees</i>	<i>X</i>		<i>X</i>	<i>X</i>				
<i>Obtain perm. housing</i>			<i>X</i>	<i>X</i>	<i>X</i>			<i>X</i>
<i>Stable school or job</i>	<i>X</i>	<i>X</i>	<i>X</i>		<i>X</i>	<i>X</i>	<i>X</i>	
<i>Complete comm service</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Restitution</i>	<i>X</i>	<i>X</i>	<i>X</i>		<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Meet NA/AA require- Ments</i>		<i>X</i>		<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	
<i>Complete assignments</i>	<i>X</i>	<i>X</i>		<i>X</i>		<i>X</i>	<i>X</i>	<i>X</i>
<i>NA/AA home group and Sponsor</i>		<i>X</i>					<i>X</i>	
<i>Establish support network</i>	<i>X</i>	<i>X</i>						<i>X</i>
<i>No new law violations</i>		<i>X</i>						
<i>Regular attendance at drug treatment court</i>	<i>X</i>	<i>X</i>					<i>X</i>	<i>X</i>
<i>Minimum 12 months in program</i>	<i>X</i>	<i>X</i>						

Table 25 shows differences in the numbers of “clean months” required before a juvenile is eligible to graduate from drug treatment court. Clean time requirements range from thirty days to nine months. All juvenile programs require participants to complete their substance abuse treatment program and complete community service projects. Other graduation requirements include paying program fees and restitution. Some juvenile drug courts require enrollment in an educational or vocational program.

Table 26: What ancillary services do juvenile drug treatment court programs offer?

	Chesterfield	Fairfax	Fredericks- burg	Hanover	Lee/Scott	Newport News	Prince William	Richmond
<i>Anger management</i>	X	X	X	X	X	X	X	X
<i>Education/GED/college</i>	X	X	X	X	X	X	X	X
<i>Financial Management/Assis</i>	X		X	X		X		
<i>Family Counseling</i>	X	X	X	X	X	X	X	X
<i>Housing Assistance</i>						X		X
<i>Survivors Groups</i>								
<i>Vocational Training</i>	X		X		X	X		X
<i>Vocational Placement</i>	X		X		X	X		
<i>AA/NA</i>		X	X	X	X	X	X	X
<i>Graduates Aftercare</i>	X	X				X	X	
<i>Mentor Service</i>	X		X	X	X	X	X	X
<i>Adolescent support group</i>		X				X	X	X
<i>Gender specific groups</i>			X					
<i>Co-occurring Disorder management</i>	X				X		X	
<i>Dual diagnosis Groups</i>	X							
<i>Parenting Classes</i>	X		X		X	X	X	X
<i>Computer Training</i>								
<i>Life Skills</i>	X				X			X
<i>Couples Counseling</i>							X	
<i>Motivational enhancement Group</i>	X							
<i>Acupuncture</i>								
<i>Bus tickets</i>								X
<i>HIV/Aids Education</i>			X				X	
<i>Assessments</i>	X	X					X	
<i>Job Assistance</i>	X				X		X	X
<i>SA treatment</i>	X	X	X		X		X	X
<i>Long/short term residential</i>	X	X						
<i>Home based counseling</i>	X	X	X		X	X	X	X
<i>Therapeutic Recreation</i>	X		X		X			X
<i>Adolescent support group</i>	X	X				X	X	X

Ancillary services are particularly important for juvenile drug court participants. All juvenile drug courts include family counseling as a basic service. Anger management training and academic programs are also offered by all juvenile programs. Many juvenile drug courts offer mentoring programs. Juveniles are referred to Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) although juveniles complain that they often feel uncomfortable in adult-oriented AA or NA support groups. In answer to this problem, Fairfax, Prince William, Newport News and Richmond juvenile drug treatment court programs offer adolescent support groups.

Table 27: What are the frequencies and types of drug testing?

	<i>Chesterfield</i>	<i>Fairfax</i>	<i>Fredericks- burg</i>	<i>Hanover</i>	<i>Lee/Scott</i>	<i>Newport News</i>	<i>Prince William</i>	<i>Richmond</i>
<i>Random</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
Frequency of Drug Screens (x/ week)	<i>3-5x/ wk</i>	<i>2x/ wk</i>	<i>Up to 4 x week</i>	<i>1-3x/wk</i>	<i>Random, weekly</i>	<i>1-3 weekl</i>	<i>2xper wk Minimum.</i>	<i>1-3x/wk</i>
Cost of drug screens (per unit)	<i>\$6.00</i>	<i>\$6.00</i>	<i>\$1.00</i>	<i>\$10</i>	<i>\$1.75</i>	<i>\$2.00</i>	<i>0</i>	<i>\$5.25</i>
Average Percentage of Positive screens	<i>10%</i>	<i>10%</i>	<i>5%</i>	<i>5%</i>	<i><10%</i>	<i><10%</i>	<i><5%</i>	<i>15%</i>
Drug Screen Suppliers	<i>3-D</i>	<i>Varies</i>	<i>Colonial</i>	<i>Roche lab</i>	<i>Roche lab</i>	<i>Redwood Labs</i>	<i>Sure Step</i>	<i>Scientific Lab</i>
Drugs tested for	<i>THC Cocaine Opiates Amphet Alcohol PCP Benzodia</i>	<i>THC Cocaine Opiates Amphet Alcohol</i>	<i>THC Cocaine Opiates Amphet Alcohol PCP Benzodia MDMA</i>	<i>THC Cocaine Amphet Opiates Alcohol</i>	<i>THC Cocaine Morphine Amphet Methamp Benzodia Alcohol Barbitu</i>	<i>THC Cocaine Amphet Opiates Alcohol Benzodia MDMA</i>	<i>THC Cocaine Amphet PCP Opiates Alcohol Benzodia Barbit Methamp</i>	<i>THC Cocaine Amphet Opiates Alcohol</i>

key: *THC* = marijuana; *Cocaine*= powdered or crack; *Opiates*; *Amphet*=Amphetamines; *Alcohol*; *Benzodia*=Benzodiazepines; *MDMA*; *Barbit*= Barbiturates; *Methamp* = Methamphetamines; *Barbitu*= Barbiturates.

Juvenile drug courts conduct random drug testing as often as five times a week. The frequency of drug testing decreases as the juvenile moves from Phase 1 to higher phases. Drug screens routinely screen for marijuana, cocaine, opiates, amphetamines, methamphetamines, benzodiazepines, PCP, alcohol, barbiturates, and MDMA.

Table 28: What types of sanctions are used by Virginia’s juvenile drug treatment court programs?

	<i>Chesterfield</i>	<i>Fairfax</i>	<i>Fredericks- burg</i>	<i>Hanover</i>	<i>Lee/Scott</i>	<i>Newport News</i>	<i>Prince William</i>	<i>Richmond</i>
<i>Detention (maximum time)</i>	<i>Varies</i>	<i>Varies</i>	<i>2 wks</i>	<i>Varies</i>	<i>Varies</i>	<i>to 21day</i>	<i>28days</i>	<i>X</i>
<i>Adult jail (maximum time)</i>	<i>Varies</i>		<i>1 wk</i>	<i>6 months</i>		<i>to 2wks</i>		
<i>Community Service</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Written Reports</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Return to lower stage</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Increased treatment time</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Increased AA/NA</i>		<i>X</i>	<i>X</i>	<i>X</i>		<i>X</i>	<i>X</i>	<i>X</i>
<i>Home electronic monitor</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Restrict driver’s license</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Remain in court after case</i>	<i>X</i>	<i>X</i>			<i>X</i>	<i>X</i>		<i>X</i>
<i>No contact orders</i>	<i>X</i>		<i>X</i>	<i>X</i>			<i>X</i>	
<i>House Arrest</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Earlier Curfew</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Increase DrugScreens</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>		<i>X</i>	
<i>Increased Probation Supr</i>	<i>X</i>	<i>X</i>	<i>X</i>		<i>X</i>		<i>X</i>	
<i>Take away home privileges</i>	<i>X</i>	<i>X</i>	<i>X</i>		<i>X</i>		<i>X</i>	
<i>Weekend work program</i>	<i>X</i>						<i>X*</i>	<i>X</i>

** Work assignments such as Adopt a Highway; sit in on Circuit court sentencing dockets;*

Judicially applied sanctions reinforce the seriousness of drug court compliance. Certain and immediate sanctions ensure that youth make the logical connection between their choices and negative consequences. Virginia’s juvenile drug treatment courts use detention and jail time as sanctions. Incarceration may be imposed for up to six months although most programs impose shorter lengths of incarceration. Other sanctions include community service, written reports, increased AA or NA attendance, or increased treatment time. Participants may be ordered to avoid contact with previous drug using or delinquent friends. Home electronic monitoring and house arrest may be used to curb program non-compliance. Judges may restrict the juvenile’s driver’s license or order an earlier curfew. The drug court team may also recommend that a juvenile be placed in a lower program phase when relapses and continued non-compliance signal the need for longer and more intensive supervision and treatment.

Table 29: What types of rewards are used by Virginia’s juvenile drug treatment court programs?

	<i>Chesterfield</i>	<i>Fairfax</i>	<i>Fredericks- burg</i>	<i>Hanover</i>	<i>Lee/Scott</i>	<i>Newport News</i>	<i>Prince William</i>	<i>Richmond</i>
<i>Certificates</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Increase to higher phase</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Tokens/Medallions</i>	<i>X</i>		<i>X</i>		<i>X</i>	<i>X</i>		<i>X</i>
<i>Gift/meal vouchers</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Decrease Treatment time</i>		<i>X</i>			<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Decrease No. of AA/NA mt</i>					<i>X</i>			
<i>Client of the month award</i>		<i>X</i>						
<i>Decrease court frequency</i>	<i>X</i>	<i>X</i>			<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Enter name in lottery</i>	<i>X</i>							
<i>Decrease number of UAs</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>		<i>X</i>
<i>Lift/decrease curfew</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Leave court early</i>	<i>X</i>	<i>X</i>	<i>X</i>			<i>X</i>	<i>X</i>	
<i>Gift Baskets</i>							<i>X</i>	
<i>Recognition from bench</i>	<i>X</i>	<i>X</i>	<i>X</i>		<i>X</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Holiday celebration</i>	<i>X</i>		<i>X</i>		<i>X</i>			
<i>Annual Picnic</i>			<i>X</i>					
<i>Field Trips</i>	<i>X</i>		<i>X</i>					<i>X</i>
<i>Birthday parties</i>								<i>X</i>
<i>Breakfast with judge</i>								
<i>Other *</i>							<i>X</i>	

** Other includes allowances such as traveling with family and missing court appearances for special events*

Rewards are particularly important in juvenile drug treatment courts. Substance abusing youth generally have few accomplishments. Rewards offer positive reinforcement for the youth’s program compliance and sobriety. Recognition and applause during drug court hearings encourage youth to continue their recovery process. Like adult drug court hearings, youth who have done well receive praise and rewards from the judge. Some rewards are program based – advancement to higher levels that bring more personal freedom, decreased number of probation visits, fewer therapy sessions, decreased frequency of drug testing and less court appearances. Juveniles particularly prize later curfew limits. Juvenile drug treatment court programs regularly use tokens and other material rewards such as movie or meal tickets to encourage and reward the juvenile’s progress. Recognition and praise from the judge is particularly valued by juvenile drug court participants. In contrast to punishment which imprints a failure identity, rewards help redefine the youth’s self-concept. Rewards encourage youth to embrace a success identity and their ability to accomplish realistic goals.

Table 30: What is the frequency of juvenile drug treatment courts hearings?

	<i>Chesterfield</i>	<i>Fairfax</i>	<i>Fredericks- burg</i>	<i>Hanover</i>	<i>Lee/Scott</i>	<i>Newport News</i>	<i>Prince William</i>	<i>Richmond</i>
Frequency	<i>1/week</i>	<i>1/week</i>	<i>1/week</i>	<i>1/month</i>	<i>1/month</i>	<i>1/week</i>	<i>1/week</i>	<i>1/week</i>
Number of dockets	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>	<i>1</i>

Most Virginia juvenile drug treatment court dockets are held on a weekly basis. Hanover County and the Lee and Scott Counties drug treatment court dockets are held once a month. All juvenile drug courts currently have one drug treatment court docket.

Table 31: What fees are assessed for juvenile drug treatment court participation?

	<i>Chesterfield</i>	<i>Fairfax</i>	<i>Fredericks- burg</i>	<i>Hanover</i>	<i>Lee/Scott</i>	<i>Newport News</i>	<i>Prince William</i>	<i>Richmond</i>
Treatment fees	<i>Sliding Scale</i>	<i>Sliding Scale</i>	<i>None</i>	<i>\$600 – \$700</i>	<i>Sliding Scale</i>	<i>Sliding Scale</i>	<i>None</i>	<i>None</i>
Drug court fees	<i>None</i>	<i>None</i>	<i>None</i>	<i>None</i>	<i>None</i>	<i>None</i>	<i>None</i>	<i>None</i>
Program fees	<i>None</i>	<i>None</i>	<i>\$240 @ \$20/mo</i>	<i>None</i>	<i>None</i>	<i>None</i>	<i>None</i>	<i>None</i>
Restitution	<i>Yes</i>				<i>Case by Case</i>	<i>Case by Case</i>	<i>Case by Case</i>	
Drug screen fees	<i>Yes (lab fees)</i>				<i>None</i>		<i>None</i>	

Treatment fees, drug court fees, and program fees are charged in five juvenile drug treatment court jurisdictions. Fees may be on a sliding scale according to the parents’ or youth’s financial ability or there may be a set treatment or program fee. Fees help cover the costs of juvenile drug treatment court programs.

Table 32: What are the 2004 funding sources and amounts for Virginia’s juvenile drug treatment courts?

	<i>Chesterfield</i>	<i>Fairfax</i>	<i>Fredericks- burg</i>	<i>Hanover</i>	<i>Lee/Scott</i>	<i>Newport News</i>	<i>Prince William</i>	<i>Richmond</i>
Local	\$141,231 <i>in kind/cash</i>	<i>In Kind*</i>	\$6,900	<i>In Kind*</i>	\$5000 from <i>Lee/Scott .</i>	\$32,000	\$359,956	\$68,000
State	0	<i>In Kind*</i>	\$44,722	<i>In Kind*</i>	0	0	0	\$32,592
Federal	\$246,922	0	\$137,778	0	<i>Grant \$11,000</i>	<i>fed. grant exhausted</i>	0	\$100,408 <i>\$138,000</i>
Private	0	0	0	0	\$6,600 <i>\$15,000</i>	0	0	\$25,000
Total	\$388,153	<i>In Kind*</i>	\$189,400	<i>In Kind *</i>	\$42,600	\$32,000	\$359,956	\$364,000

In Kind = Drug court services and staff contributed by participating agencies; these drug court programs receive no external funding.

Only the juvenile drug treatment courts in Fredericksburg and Richmond receive state funding. Chesterfield, Richmond, Fredericksburg, and Lee/Scott County also receive federal funding. Lee/Scott and Richmond also receive private funding for their juvenile drug treatment court programs. All juvenile drug treatment court programs receive local support either in the form of cash contributions or in-kind contributions (i.e., probation, treatment, and administrative service contributions; office space; etc.). Judges, clerks, prosecutors, public defenders, and others contribute their time to drug treatment court programs without cash reimbursement.

Table 33: What local and state agencies collaborate in providing services to Virginia’s juvenile drug treatment courts?

	<i>Chesterfield</i>	<i>Fairfax</i>	<i>Fredericks- burg</i>	<i>Hanover</i>	<i>Lee/Scott</i>	<i>Newport News</i>	<i>Prince William</i>	<i>Richmond</i>
DJJ		<i>X(C)</i>	<i>X(P)</i>	<i>X(C)</i>	<i>X(C)</i>	<i>X(C)</i>	<i>X(C)</i>	<i>X(C)</i>
CSB	<i>X (P)</i>	<i>X (P)</i>	<i>X(P)</i>		<i>X(C)</i>			<i>X(P)</i>
Private TX							<i>X(P)</i>	
In house								
Other	<i>X (P) *</i>						<i>X(C)</i>	

key: DJJ= Department of Juvenile Justice (probation and other supervision services); CSB=Treatment providers employed by local Community Services Boards; Private TX= Private agency treatment providers; In house= Clinicians housed in Drug treatment court program building;

**Other = local community supervision officer. “P” = paid services; “C” = contributed services.*

Juvenile drug treatment court programs are collaborative efforts between probation, court, and treatment agencies. Drug court stakeholders often volunteer their time and services to

plan, establish, and maintain the programs. Table 33 indicates the agencies that collaborate with local drug treatment court programs and provide necessary services to juvenile drug court participants.

Virginia's Family Drug Treatment Court Programs

Family drug treatment courts serve addicted parents who come to the court's attention in the following situations: (1) hospital tests indicate illegal drug-exposed babies; (2) founded cases of child neglect or abuse; (3) child in need of services (CHINS) cases; (4) custody or temporary entrustment cases; and (5) delinquency cases. In practice, family drug court programs function the same as adult drug court programs with the exception that jurisdiction in adult drug courts is based on criminal offenses and jurisdiction in family drug courts is based on civil offenses. Like their adult felony counterparts, family drug courts offer intensive therapy, court supervision, and social services support to addicted parents. The major incentive for addicted parents to adhere to the rigorous recovery program is the promise of their children's return to their custody. Instead of probation officers providing supervision services as they do in adult drug treatment courts, Department of Social Services professionals serve case management, supervision, and other roles in family drug courts.

Family drug courts respond to the growing crisis of parental addiction. Initial studies indicate that the majority of child abuse and neglect cases resulting in child removal from the family home are due to parental or custodian substance abuse. When children are removed from the family home and placed in the foster care system, the Adoption Safe Families Act (ASFA) mandates strict time frames for family reunification. The strict statutory timeframe is generally unreasonable for addicted parents struggling to stabilize their sobriety. The collaborative efforts of court, treatment, and social services professionals in a family drug court program provides the structure and oversight that gives recovering parents needed support. At the same time, drug court staff have the opportunity to closely monitor the progress of addicted parents and their children. Early reports of family drug court effectiveness indicate that participants are more likely to achieve family reunification when involved in court-monitored programs. When family reunification does not occur, drug court professionals report that children may still be better served when their parents are involved in family drug courts. Drug court staff report cases where parents recognized early on that their recovery was very unlikely. Subsequently, they agreed that family reunification was not in the best interests of their children. The decreased time in temporary placement and expedited permanent placement was beneficial to the children.

Family drug courts also promise great financial return for the investment in these programs. At an average cost range between \$3,828 and \$5,532 per child per year, Virginia is spending up

to \$42 million dollars per year on foster care placement. Increased family reunification rates are likely to reduce the foster care cost burden shouldered by Virginia taxpayers. At the end of 2001, there were 7,596 children in foster homes in Virginia. Judges say many, if not most, of these children are in foster care due to parental substance abuse. Notwithstanding the tremendous emotional damage inflicted when children must leave their parental homes, the financial burden also weighs heavily in a time when resources are scarce. Family drug courts offer a more humane and less expensive alternative to traditional ways of handling child abuse and neglect cases.

This next section gives an overview of Virginia's operational family drug treatment court programs by answering the following research questions:

- (1) What are the target populations of the Virginia's family drug treatment courts?
- (2) What are Virginia family drug treatment court eligibility criteria?
- (3) What are the graduation requirements in Virginia's family drug treatment courts?
- (4) What ancillary services are provided in Virginia's family drug treatment courts?
- (5) What sanctions are used in Virginia's family drug treatment courts?
- (6) What are participant rewards used in Virginia's family drug treatment courts?
- (7) What are the termination rules of the Virginia family drug treatment courts?
- (8) When did the drug treatment court program begin, the minimum and average length of participant stay, and the program capacity
- (9) How many participants were admitted, terminated, withdrew, died, graduated or are currently enrolled in family drug treatment court programs?
- (10) Demographics: What is the family ethnic identity and profile of the Virginia family drug treatment court participants?
- (11) What are the drugs of choice used by the family drug treatment court participants?
- (12) What types of petitions do family drug treatment courts accept?
- (13) What permanency goals are reached?
- (14) What percentage of the infants of family drug treatment court participants are exposed to illegal drugs, tobacco or alcohol?
- (15) How have family drug treatment court participants improved their lives?
- (16) What are the 2004 funding sources and amounts for Virginia's family drug treatment courts?
- (17) What local agencies collaborate in providing services to Virginia's family drug treatment courts?

Table 34: What are the target populations of the Virginia’s family drug treatment courts?

	<i>Alexandria</i>	<i>Charlottesville</i>	<i>Richmond</i>
<i>Parents involved in abuse cases</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Involved in neglect cases</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Mothers of drug-exposed infants</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Both mothers and fathers</i>	<i>X</i>	<i>X</i>	<i>X</i>

All three family drug treatment court programs accept parents involved in abuse and neglect cases and mothers of drug-exposed infants. Both addicted mothers and fathers are accepted into Virginia’s family drug court programs.

Table 35: What are Virginia family drug treatment court eligibility criteria?

	<i>Alexandria</i>	<i>Charlottesville</i>	<i>Richmond</i>
<i>Non-violent</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Previous minor violence</i>	<i>*</i>	<i>*</i>	<i>*</i>
<i>Previous drug offenses</i>	<i>*</i>	<i>*</i>	<i>*</i>
<i>Previous intent for accommodation charge</i>	<i>*</i>		<i>*</i>
<i>Previous drug distribution</i>			<i>*</i>
<i>Dual diagnosis</i>	<i>X</i>	<i>*</i>	<i>*</i>
<i>Literate</i>	<i>Do not exclude</i>	<i>Do not exclude</i>	<i>Do not exclude</i>
<i>Addict</i>	<i>X</i>	<i>Do not exclude</i>	<i>Do not exclude</i>
<i>City/county resident</i>	<i>X</i>	<i>Do not exclude</i>	<i>X</i>
<i>Infant must be positive for substance exposure within 2 years of birth</i>			<i>X**</i>

** Not automatically excluded from eligibility ** Eligibility criteria changing in FY2005*

Like Virginia’s adult and juvenile drug court programs, family drug courts accept only non-violent offenders into their programs. Potential participants with previous minor violent offenses are not automatically excluded. Evidence of addiction including addiction history, previous drug offenses, and intent for accommodation are considered for eligibility. Generally, participants must be a city or county resident to participate in the locality’s family drug court program.

Table 36: What are the graduation requirements in Virginia’s family drug courts?

	Alexandria	Charlottesville	Richmond
# months clean	<i>1 year minimum</i>	<i>Not set</i>	<i>4 mo. Minimum</i>
Complete treatment program	X	X	X
Pay court costs			
Pay program fees		X	<i>X (if any)</i>
Permanent housing		X	X
Stable employment		X	X
Complete community service		X	<i>X (if ordered)</i>
Adequate family housing		X	X
Skills training			X
Develop an on-going recovery plan	X		X
Evidence of on-going participation with treatment and service plan	X	X	X
Completion of parenting classes		X	X

In order to graduate from a family drug treatment court program, the participant must exhibit sustained sobriety. The required number of months clean of drugs ranges from an undetermined amount of time in Charlottesville’s family drug court to a one -year minimum in Alexandria’s family drug court. All programs require their participants to complete the treatment program and develop an on-going recovery plan. Program requirements in Alexandria and Charlottesville call for evidence of on-going participation with treatment and service plans. Permanent or adequate housing, stable employment, completion of community service and payment of program fees are graduation pre-requisites in Charlottesville and Richmond.

Table 37: What ancillary services are provided in Virginia’s family drug treatment courts?

	Alexandria	Charlottesville	Richmond
Anger management	<i>refer if warranted</i>	X	X
Education/GED/college	<i>refer if warranted</i>	<i>refer if warranted</i>	<i>refer if warranted</i>
Financial man./assistance	<i>refer if warranted</i>	X	X
Family counseling	X	X	X
Housing assistance	X	X	X
Survivors groups	<i>refer if warranted</i>	<i>refer if warranted</i>	<i>refer if warranted</i>
AA/NA	X	X	X
Graduates aftercare	X	X	X
Gender specific groups		X	X
Co-occurring disorder mgmt.	X	X	X
Dual diagnosis groups	<i>refer if warranted</i>	X	X
Parenting classes	X	X	X
Computer training	X		<i>refer if warranted</i>
Life skills groups	X	X	X
Domestic violence counseling	X	X	<i>refer if warranted</i>
Stress management	X	X	

Family drug court professionals recognize that effective addiction treatment requires participant referral to ancillary services necessary to restore the addicted parents to full productivity and health. The family drug court programs in Alexandria, Charlottesville, and Richmond refer participants to agencies that assist with housing and financial management services. If participants have medical and mental health needs (i.e., co-occurring disorder treatment and management, stress management, domestic violence, etc.), the family drug courts will either address those needs with in-house staff or refer to outside agencies. Parenting classes and life skills groups are important in all Virginia family drug courts. Often addicts need vocational services and job search assistance. They may need additional education or vocational training to re-enter the job market.

Table 38: What sanctions are used in Virginia’s family drug treatment courts?

	<i>Alexandria</i>	<i>Charlottesville</i>	<i>Richmond</i>
<i>Jail (min/max) time</i>	<i>X (no min-max)</i>		<i>0-10 days</i>
<i>Community service</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Written reports</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Return to lower stage</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Increased treatment</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Increased AA/NA</i>		<i>X</i>	<i>X</i>
<i>Home electronic monitoring</i>			<i>X</i>
<i>Increased drug screening</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Weekend jail time</i>	<i>X</i>		<i>X</i>
<i>Judicial reprimand</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Attendance at self-help group</i>	<i>X</i>		<i>X</i>
<i>More case management contact</i>	<i>X</i>	<i>X</i>	<i>X</i>
<i>Increased court appearances</i>		<i>X</i>	<i>X</i>

Sanctions applied for noncompliant behaviors are similar in both the Alexandria and Richmond family treatment drug court programs. In both settings infractions may result in additional therapeutic and/or drug avoidance program participation, as well as increased punitive sanctions such as jail time, increased drug screening and, in the case of Richmond, home electronic monitoring. Sanctions imposed by the Charlottesville family drug court are decidedly less punitive in design, emphasizing only increased treatment or therapeutically-oriented activities.

Table 39: What are participant rewards used in Virginia’s family drug treatment courts?

	<i>Alexandria</i>	<i>Charlottesville</i>	<i>Richmond</i>
<i>More frequent child visitation</i>		X	X
<i>Return of children to parental home</i>		X	X
<i>Certificates</i>	X	X	X
<i>Increase to higher stage</i>	X	X	X*
<i>Tokens/medallions</i>	X	X*	X
<i>Recreation/gift/meal vouchers</i>	X	X	X
<i>Decreased treatment</i>	X	X	X
<i>Decrease AA/NA</i>	X	X	X
<i>Decrease court frequency</i>	X*	X	X
<i>Enter name in lottery</i>			
<i>Decrease Uas</i>	X	X	X*
<i>Increased program support</i>			
<i>Less restrictive child visitation</i>		X	

X* = Part of program progression

As behavior modification based interventions, all three Virginia family drug courts rely on the power of positive reinforcement to direct and energize positive behavioral change. Research findings gathered over the past twenty years verify that both bad attitudes and ingrained negative habits can be reshaped when positive reinforcement is used to redirect them in another direction. To achieve maximum effect, reinforcements must be certain and must follow soon after the desired positive new behavior is exhibited. Family drug court programs capitalize on this by rewarding participants for good performance along an ongoing continuum of treatment stages. These earned incentives include public recognition and praise, award of tokens and gift certificates, reductions in frequency of drug testing or probation reporting, and accelerated program level advancement.

Table 40: What are the termination rules of the Virginia family drug treatment courts?

	<i>Alexandria</i>	<i>Charlottesville</i>	<i>Richmond</i>
<i>Fixed # of sanctions (how many)</i>			
<i>Variable # sanctions (individual/circumstantial)</i>	X	X	X
<i>Felony offense</i>	*	*	*
<i>Firearm charge</i>	*	*	
<i>Treatment non-compliance</i>	X	X	X
<i>Lying in court</i>	*		
<i>Violent offense</i>	*		X
<i>Misdemeanor offense</i>	*		
<i>Repeated relapses (how many)</i>	C/C	C/C	C/C

* Not automatic termination; C/C = considered on a case to case basis.

Participants are terminated in all three family drug treatment court programs when treatment non-compliance or repeated infractions reach a court-specified criterion. A new felony or firearm charge may trigger termination from the Alexandria and Charlottesville programs. The decision to terminate, in such cases, as with the number of relapses allowed, is made by all three courts on a case-by-case basis.

Table 41: When did the drug treatment court program begin, the minimum and average length of participant stay, and the program capacity

	<i>Alexandria</i>	<i>Charlottesville</i>	<i>Richmond</i>
<i>When did program begin</i>	9/01	7/02	9/02
<i>Minimum program length</i>	no minimum	1 year	1 year
<i>Average program length</i>	1 year	18 months	18 months
<i>Program capacity</i>	15	15	7 (FY04) *

* With recent federal grant award, program capacity will expand to 20 – 25 participants in FY05.

The Alexandria Family Drug Court program is the oldest, starting in September 2001. The Charlottesville and Richmond programs are a year younger, having started in 2002. While Alexandria does not set a minimum program length, their average program length is one year. Both Charlottesville and Richmond require a mandatory one-year participation, with the average stay in both programs running 18 months. As a comparatively new type of court docket, all three family drug courts are relatively small. It must be noted that the Richmond program anticipates expansion to 25 participants in 2005 with receipt of the recently awarded federal grant funding. Both Richmond and Charlottesville were awarded federal grant funding in

September 2004 for their family drug court programs. This funding will allow these programs to operate and grow over the next three years.

Table 42: How many participants were admitted, terminated, withdrew, died, graduated or are currently enrolled in family drug treatment court programs?

	<i>Alexandria</i>	<i>Charlottesville</i>	<i>Richmond</i>
Total admitted	32	26**	8
Total graduated	4	2	0
Current enrollment	8	9	4
Number terminated	20	8	4
Number withdrawn	*	7	0
Number deceased	0	0	0

* Parents are court ordered into family drug treatment court and do not have option to withdraw

**Since 7/1/2002

Family drug treatment court participants enter and leave the program for a number of reasons. Due to the gravity of how drug addiction negatively affects families with children, parents in the Alexandria family drug court are court ordered into the program and are not allowed to withdraw. Of the 66 individuals entering these courts since their inception, 21 remain currently enrolled (as of December 2004), 6 have successfully completed the program and graduated, 7 have withdrawn, and 32 have been terminated.

Table 43: Demographics: What is the family ethnic identity and profile of Virginia family drug treatment court participants?

	<i>Alexandria</i>	<i>Charlottesville</i>	<i>Richmond</i>
Family Ethnic Identity			
Number black	B= 24	B= 14	B= 6
Number white	W= 7	W= 12	W=1
Number other (Hispanic, oriental, mixed, etc.)	O= 1	O= 0	O= 1
Family Profile			
No. of mothers	28	24	6
No. of fathers	5	2	2
No. of minor children	74	52	18
Age			
Average age of mothers	30	34	33
Average age of fathers	32	41	42
Age range of dependent children	Birth – 17	0 – 17	newborn-11 yr
Mean age of dependent children	13		2.5

Table 43 presents the demographic characteristics of participants in the three Virginia family drug treatment court programs. Charlottesville’s program serves approximately the same percentage of black and white parents, while Richmond and Alexandria serve more black parents. As may be expected, mothers are over-represented as family drug court participants. It may be surprising that the average age of mothers is 30 and above and the average age of fathers is higher. There are 144 dependent children affected by their parent’s involvement in family drug court programs.

Table 44: What are the drugs of choice used by the family drug treatment court participants?

	<i>Alexandria</i>	<i>Charlottesville</i>	<i>Richmond</i>
<i>Crack</i>	<i>X</i>	<i>X</i>	X (85.7%)
<i>Powdered Cocaine</i>	<i>X</i>	<i>X</i>	
<i>Heroin/Morphine</i>	<i>X</i>	<i>X</i>	X (14.3%)
<i>Alcohol</i>	<i>X</i>	<i>X</i>	X (50%)
<i>Stimulants</i>			
<i>Depressants</i>			
<i>Hallucinogens</i>	<i>X</i>		
<i>Marijuana</i>	<i>X</i>	<i>X</i>	
<i>Opiates/barbiturates</i>	<i>X</i>		
<i>Prescription narcotics</i>	<i>X</i>	<i>X</i>	
<i>MDMA (Ecstasy)</i>			
<i>Methamphetamines</i>			

Primary drug of choice varies considerably among family drug treatment court participants according to region within the Commonwealth. For example, crack, heroin, and alcohol are the three drugs most commonly reported as primary by Richmond drug court participants. The three most frequently reported drugs of choice in Charlottesville are crack, alcohol, and marijuana. Of the three regions represented, Alexandria family drug court participants report the greatest variation in drug preference with eight drugs commonly cited; crack, cocaine, heroin/morphine, alcohol, hallucinogens, marijuana, prescription narcotics, and opiates/barbiturates.

Table 45: What types of petitions do family drug treatment courts accept?

	<i>Alexandria</i>	<i>Charlottesville</i>	<i>Richmond</i>
<i>Abuse and neglect</i>	<i>X</i>	<i>X</i>	<i>X*</i>
<i>CHINS</i>	<i>X</i>	<i>X</i>	
<i>Custody</i>	<i>Case by case</i>		
<i>Delinquency</i>			
<i>Relief of custody</i>		<i>X</i>	
<i>Temporary Entrustment</i>	<i>X</i>	<i>X</i>	

**A sustained abuse/neglect petition is required for acceptance into the program*

Family drug treatment courts serve addicted parents who come to the court’s attention in a variety of following situations: (1) hospital tests indicate illegal drug-exposed babies; (2) founded cases of child neglect or abuse; (3) child in need of services (CHINS) cases; (4) custody or temporary entrustment cases; and (5) some delinquency cases. In practice, family drug court programs function the same as adult drug court programs with the exception that jurisdiction in adult drug courts is based on criminal offenses and jurisdiction in family drug courts is based on civil offenses.

Table 46: What permanency goals are reached?

	<i>Alexandria</i>	<i>Charlottesville</i>	<i>Richmond</i>
<i>Attained permanency goal</i>	<i>57</i>	<i>32</i>	<i>2</i>
<i>Returned to parents</i>	<i>3</i>	<i>18</i>	
<i>Returned to prior custodian</i>	<i>3</i>		
<i>Placement with relatives</i>	<i>17</i>	<i>6</i>	<i>1</i>
<i>Adoption</i>	<i>20</i>	<i>3</i>	<i>1</i>
<i>Permanent foster care</i>	<i>5</i>	<i>5</i>	
<i>Independent living</i>	<i>0</i>		
<i>Other living arrangement</i>	<i>0</i>		

When children are removed from the family home and placed in the foster care system, the Adoption Safe Families Act (ASFA) mandates strict time frames for family reunification. The strict statutory timeframe is difficult for recovering addicts to meet. However, with the support and close scrutiny of family drug courts, early indicators point to more likely family reunification. When family reunification does not occur, drug court professionals report that children may still be better served when their parents are involved in family drug courts. There

are reports that parents recognized early on that their recovery was very unlikely. In such cases, expedited placement of children with relatives, adoptive parents, or other permanent placements benefited children.

Table 47: How have family drug treatment court participants improved their lives?

	<i>Alexandria</i>	<i>Charlottesville</i>	<i>Richmond</i>
<i>Improved parenting skills</i>	100%	50%	86%
<i>Recognized negative impact of parental substance abuse</i>	100%	100%	100%
<i>Maintained visitation with children throughout program</i>	100%	100%	100%
<i>Maintained sobriety after first three months</i>	*	*	57%
<i>Maintained steady treatment progress</i>	65%	75%	57%
<i>Obtained or kept employment</i>		85%	43%
<i>Obtained suitable family housing</i>		25%	71%
<i>Obtained Mental Health Counseling</i>	100%	100%	100%
<i>Regularly attended AA or NA</i>	90%	90%	43%
<i>Obtained Family counseling</i>	100%	80%	14%

**Relapse more common after 10th month due to participant's apprehension of leaving structured drug treatment court environment; relapse is generally once or twice and does not signal return to addicted lifestyle*

Table 47 summarizes the opinions of the three family drug court treatment staffs regarding progress by participants toward attainment of several important program outcomes. Since these ratings are subjective, they cannot be compared across communities or court program settings. However, it is worthy to note that staff across the three programs believe that: (1) program participants better understand the negative impact their addiction has on their children; (2) parents have sought out necessary mental health counseling; (3) they have maintained sobriety and made steady progress in the family drug court programs; and (4) they have obtained needed family counseling and regularly attended Alcoholics Anonymous or Narcotics Anonymous.

Table 48: What are the 2004 funding sources and amounts for Virginia’s family drug treatment courts?

	<i>Alexandria</i>	<i>Charlottesville</i>	<i>Richmond</i>
Local	<i>In Kind (FY04)</i>	<i>In Kind (FY03 &04)</i> <i>\$50,600 (FY05)</i>	<i>In Kind (FY04)</i> <i>\$200,000 (FY05)</i>
State	<i>In Kind (FY04)</i> <i>VSA indirect funds</i>		<i>In Kind</i>
Federal		<i>In Kind (FY03 &04)</i> <i>\$111,270 (FY2005)</i>	<i>In Kind (FY04)</i> <i>\$225,000 (FY05)</i>
Private			<i>In Kind</i>
Total	<i>In Kind (FY04)</i>	<i>In Kind (FY03&04)</i> <i>\$161,870 (FY05)</i>	<i>In Kind (FY04)</i> <i>\$425,000 (FY05)</i>

* Operates on contributed personnel and services

All three Virginia family drug courts started with local contributions of funding and services. Alexandria Family Drug Court continues to operate with in-kind and indirect funding coming to the involved agencies. Richmond and Charlottesville received Bureau of Justice Assistance awards in September 2004 that will enable them to operate and grow during the next three years.

Table 49: What local agencies collaborate in providing services to Virginia’s family drug treatment courts?

	<i>Alexandria</i>	<i>Charlottesville</i>	<i>Richmond</i>
DHS/DSS	<i>X</i>	<i>X</i>	<i>X</i>
CSB	<i>X</i>	<i>X</i>	<i>X</i>
Private TX	<i>X</i>	<i>X</i>	
CASA	<i>X</i>	<i>X</i>	<i>X</i>
SCAN	<i>X</i>		<i>X</i>
Public Health System (VCU,UVA,MJH)			<i>X</i>
Public School System	<i>X</i>	<i>X</i>	<i>X</i>
City Attorney’s Office	<i>X</i>	<i>X</i>	<i>X</i>
Bar Association	<i>X</i>	<i>X</i>	<i>X</i>

*key: DHS/DSS=Division of Social Services of the Department of Human Services; CSB=Treatment providers employed by local Community Services Boards; Private TX= Private treatment agency or private treatment providers; CASA=Court Appointed Special Advocates; SCAN=Stop Child Abuse Now (private non-profit provider)

Table 49 illustrates just how holistic and integrated the drug court treatment model really is. While all drug court programs are designed around a common programmatic model, they vary

considerably in actual structure and content according to the treatment and other talents and resources unique to the community. Table 49 shows how Alexandria, Richmond, and Charlottesville have each assembled comprehensive and integrated treatment program structures with affiliated agencies in their communities – local Community Services Boards, Court Appointed Special Advocates, Stop Child Abuse Now, Division of Social Services, private treatment agencies or individual treatment providers, and juvenile court judges and their staff.

***2004 IMPACT EVALUATION OF
VIRGINIA'S DRUG TREATMENT COURTS***

Retention of Virginia's Drug Court Participants

The Drug Abuse Treatment Outcome Study (DATOS) study examined approximately 70,000 substance abuse treatment patients (Simpson et.al., 1997). Results indicated two major findings: (1) the length of time in treatment is the best predictor of treatment success, i.e., the longer the time in treatment, the greater the degree of recovery; and (2) those patients coerced by the courts and criminal justice system into treatment tended to stay longer. Lower recidivism rates correlate with longer periods of drug court treatment. Drug court participants stay in treatment longer and have much higher success rates than voluntary clients. Research indicates that addicts who stay in treatment over a year have twice the recovery rates as those who fail to stay in treatment at least a year (Simpson et. al., 1997). Therefore, it is important to examine the retention rates of Virginia drug court programs. At the same time, it is important to recognize that there are many factors affecting retention rates including the type of drug addicts (crack addicts, heroin addicts, etc.), eligibility criteria (probation violators, first offenders, etc.), the type of drug court program (pre-dispositional, post-dispositional), and the policies about program termination (individualized decisions, three strikes, etc.). Because of the variations between programs and participants, it is unwise to compare one drug court's retention rates with another. It is also important to note that the retention rates of smaller drug court programs are impacted by relatively slim enrollment variations (i.e., a larger number of terminated participants in the Roanoke's drug court will have less impact on retention than a smaller number of terminated participants in a newer and smaller drug court such as Suffolk's).

Table 54A: PROGRAM RETENTION RATES OF VIRGINIA'S ADULT DRUG TREATMENT COURTS

DRUG COURT	<i>Charlottes- ville</i>	<i>Chester- field</i>	<i>Fredericks- burg</i>	<i>Fredericks- burg DUI</i>	<i>Hampton</i>	<i>Henrico</i>	<i>Hopewell</i>	<i>Loudoun</i>
Total Admitted	309	229	246	691	44	63	17	8
Graduates	116	64	86	330	*	13	1	N/A
Active Participants	41	55	60	173	33	35	4	6
Terminated, withdrawn, deceased	152	110	100	188	11	15	12	2
Retention Rate	51%	52%	59%	73%	75%	76%	30%	75%

Table 54B: PROGRAM RETENTION RATES OF VIRGINIA’S ADULT DRUG TREATMENT COURTS

DRUG COURT	<i>Newport News</i>	<i>Norfolk</i>	<i>Portsmouth</i>	<i>Richmond</i>	<i>Roanoke</i>	<i>Staunton</i>	<i>Suffolk</i>
Total Admitted	198	175	169	332	713	13	9
Graduates	62	43	36	94	369	3	0
Active Participants	53	47	59	76	130	8	5
Terminated, withdrawn, deceased	83	85	74	162	214	2	4
Retention Rate	58%	51%	56%	51%	70%	85%	55%

Statewide Adult Drug Court Retention Rate: 62.25%

Table 55: PROGRAM RETENTION RATES OF VIRGINIA’S JUVENILE DRUG TREATMENT COURTS

	<i>Chesterfield</i>	<i>Fairfax</i>	<i>Fredericksburg</i>	<i>Hanover</i>	<i>Lee/Scott</i>	<i>Newport News</i>	<i>Prince William</i>	<i>Richmond</i>
Total admitted to the program	17	9	145	22	59	45	14	60
Active Participants	12	6	15	6	11	10	10	14
Graduates	3	0	55	9	31	19	0	16
Terminated, withdrawn, or deceased	2	3	75	7	17	16	4	30
Retention Rate	88%	67%	48%	68%	71%	64%	71%	50%

Statewide Juvenile Drug Court Retention Rate: 58.49%

Table 56: PROGRAM RETENTION RATES OF VIRGINIA’S FAMILY DRUG TREATMENT COURTS

	<i>Alexandria</i>	<i>Charlottesville</i>	<i>Richmond</i>
Total admitted	32	9	8
Graduates	4	2	0
Active Participants	8	7	4
Terminated, withdrawn, deceased	20	0	4
Retention Rate	37.5%	100%	50%

Statewide Family Drug Court Retention Rate: 51.02%

National research indicates that adult drug court retention rates are approximately 60% (participants are still in drug court treatment a year after beginning addiction treatment). The range of retention rates in Virginia’s adult drug court programs is between 30% and 85%. The statewide retention rate average of 62.27% is approximately the same as the national drug court retention rate. The range of retention rates in Virginia’s juvenile drug court programs is between

50% and 88%. The state juvenile drug court retention rate average is 67%. Virginia's family drug court programs are relatively newer and smaller than adult or juvenile drug treatment court programs. Therefore, current retention rates may not be indicative of retention of greater numbers of participants as the programs grow. Currently the range of retention rates in Virginia's family drug court programs is between 37.5% and 100% with a statewide retention rate average of 62.5%.

Because studies indicate higher recovery rates for addicts who stay in treatment at least a year, many credit high retention rates for the low recidivism rates after drug court participants leave the programs (Simpson, et. al., 1997). Virginia's drug court programs average twelve to eighteen months in duration. Compared with drug court retention, only 10 – 30% of addicts who voluntarily enter treatment remain for at least a year. Treatment retention appears to be an important element of drug court success.

Offense Severity and Chronicity of Drug Court Participants

In addition to describing drug court programs and participants, two questions were asked: (1) How serious were the offenses committed by adult drug court participants prior to entering drug court programs?, and (2) How chronic were the criminal histories of adult drug court participants prior to entering drug court programs? Chronicity (the measure of chronic criminal offending) is defined as the number of misdemeanors and felonies committed by participants before they entered the drug court program. Measuring the severity of offenses is more complicated. However, using an Offense Severity study completed by the Virginia Criminal Sentencing Commission (VCSC), such an analysis is possible. An Offense Severity study was completed by VCSC Deputy Director Meredith Farrar-Owens based on a detailed offense seriousness scale developed by the Virginia Criminal Sentencing Commission in 1998. The offense severity study asked 548 judges, prosecutors, public defenders, and private criminal defense attorneys to rate the perceived seriousness of 238 felonies and 50 misdemeanors defined in the Code of Virginia. The mean of the respondents' seriousness ratings was calculated. The resulting severity scores range from 3.6 for the misdemeanor offense of drinking in public to 738.6 for first-degree murder (Farrar-Owens, 1999).

Using the relative weights determined in the Commission's study, researchers attached severity weights to each of the offenses for which drug court participants were arrested (a total 26,861 criminal arrests by drug court participants prior to their drug court admittance). The results of the chronicity and severity studies were important in answering how criminally involved the drug court participants were prior to drug court admittance. Recidivism studies conducted in other states have consistently shown reduced recidivism for drug court graduates. Some postulate that positive recidivism results are a consequence of "skimming off the top" (selecting less serious offenders who would be unlikely to re-offend regardless of drug court placement or traditional probation/incarceration placement). The analysis of drug court participants' prior offense histories indicates extensive offending and felony-level offense severity prior to their drug court placement. Drug court participants have a total of 11,435 misdemeanors and 13,972 felonies prior to entering Virginia's drug court programs. The average number of felony arrests per adult drug court participant is 6.8. Additionally, each of the 2,056 adult drug court participants has an average 5.6 misdemeanor arrests prior to drug court admittance. Analysis of the severity level of arrests prior to drug court admittance indicated an

average severity weight of 50.38. Severity rankings, based on a Virginia Criminal Sentencing Commission study, were assigned to each of 26,681 arrest charges in the criminal records of drug court participants. Offense severity weights in the 40+ range are commonly assigned to felony-level rather than misdemeanor-level offenses. The two examinations of drug court participants' prior offense histories indicate extensive offending and felony-level offending prior to participants' drug court placement.

Table 63: Total and Average Severity of Offenses Ratings

Court Name	Total Cases	Total of Offense Severity Weights	Average Offense Severity Weights
Charlottesville CC	290	167622	50.87
Chesterfield CC	202	94671	50.28
Fredericksburg CC	197	90133	54.76
Hampton CC	28	10979	43.39
Henrico CC	35	25890	48.85
Hopewell GD	9	9778	56.20
Newport News CC	180	162599	53.56
Norfolk CC	260	200789	49.87
Portsmouth CC	142	88353	46.33
Richmond CC	297	255202	51.35
Roanoke CC	410	162599	53.56
Staunton CC	6	1091	45.48

Table 64A: Total Severity Weights of Offenses Committed Before Drug Court

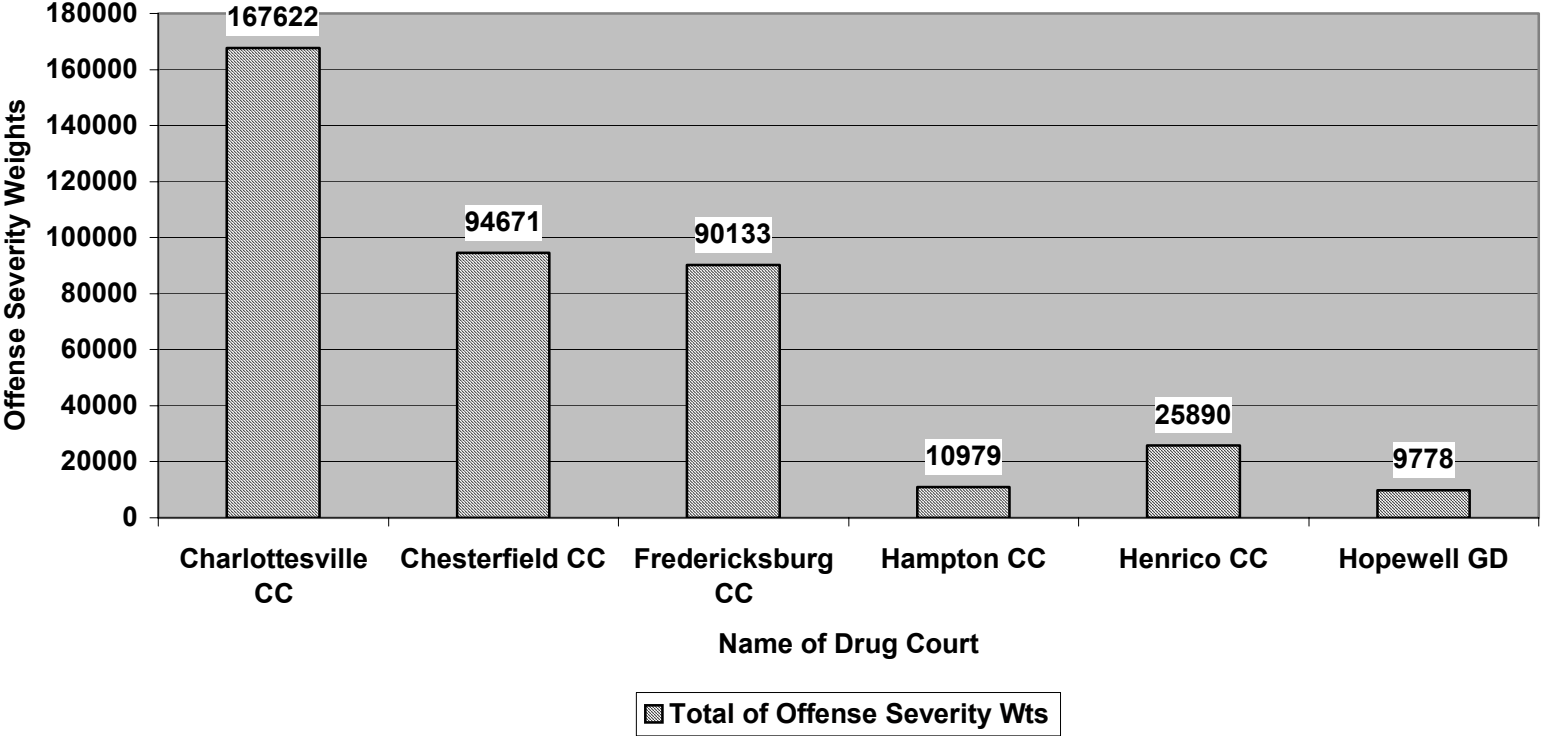


Table 64B: Total Severity Weights of Offenses Committed Before Drug Court

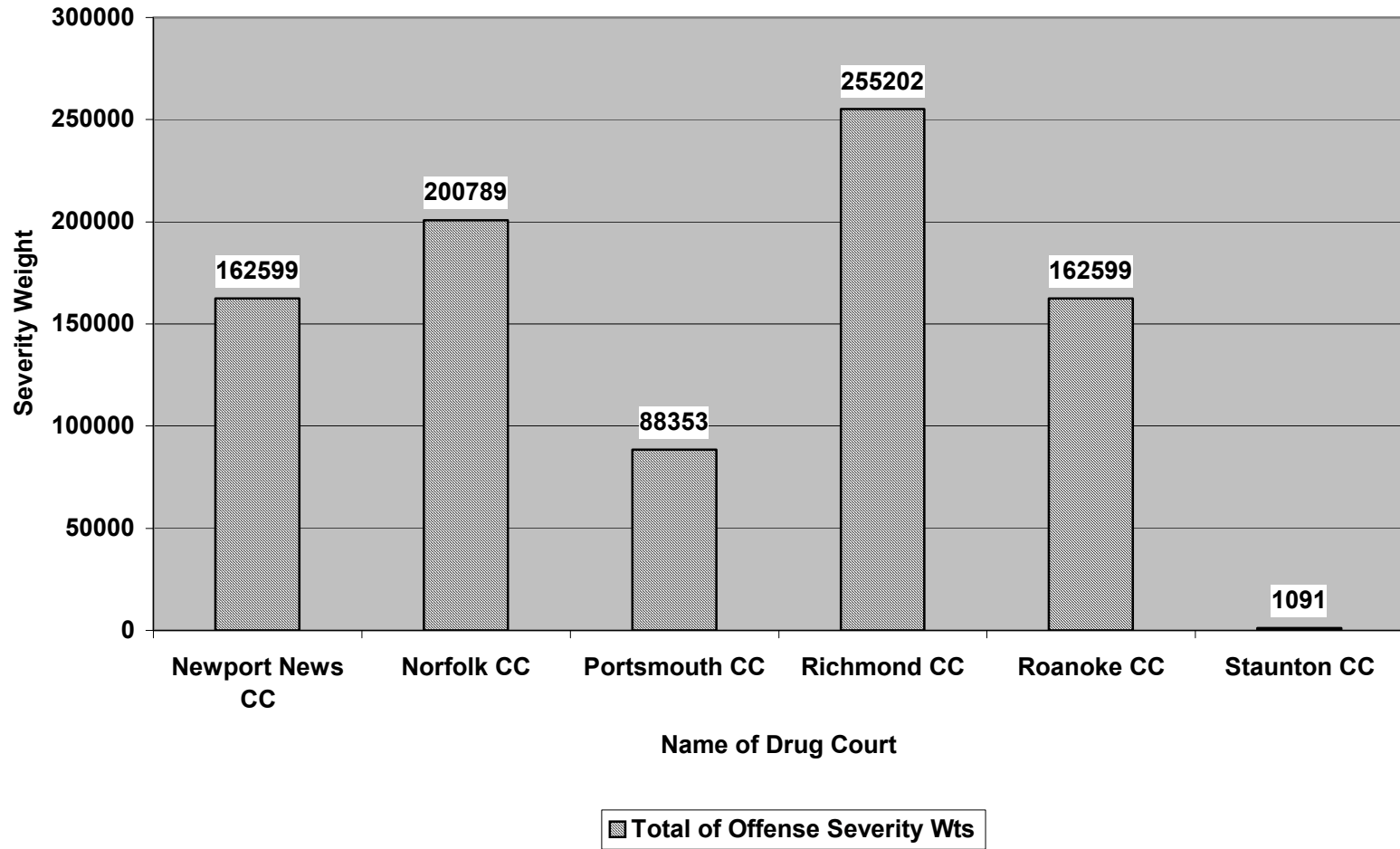


Table 65A: Average Offense Severity Weights

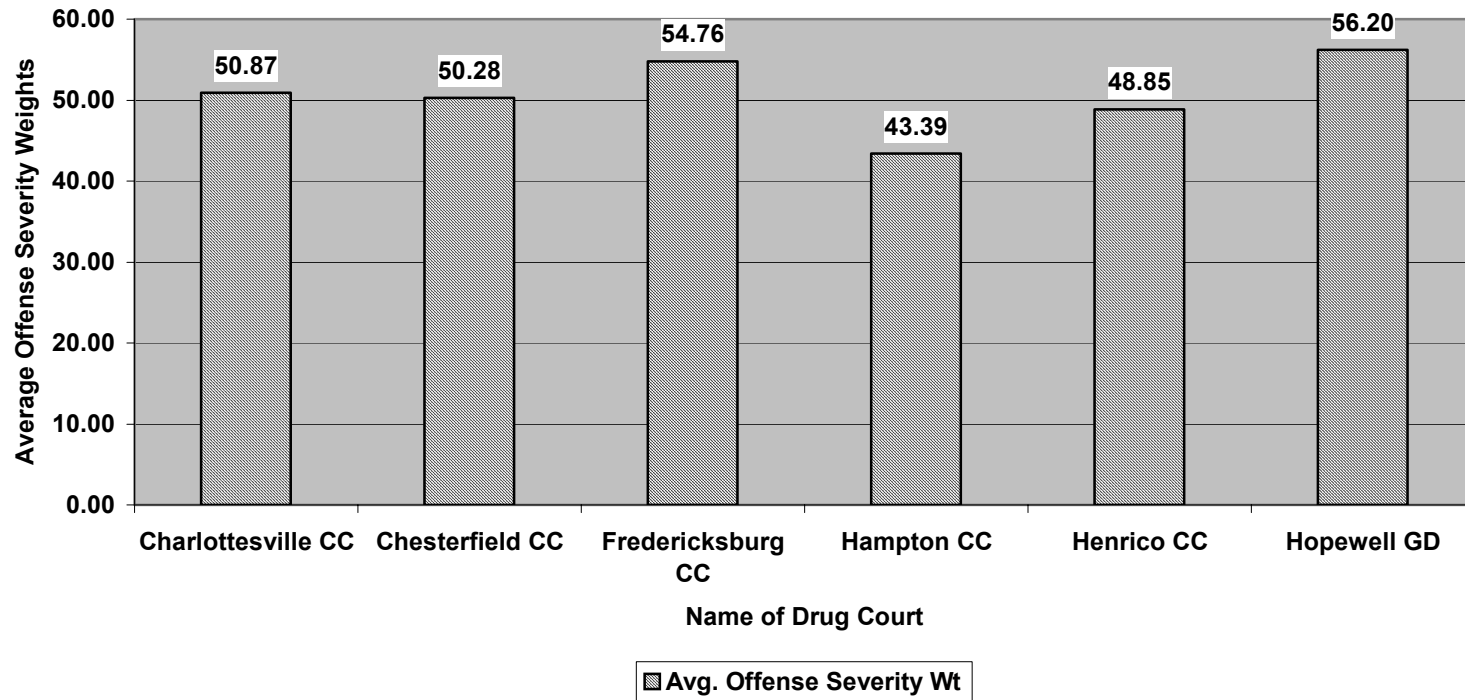
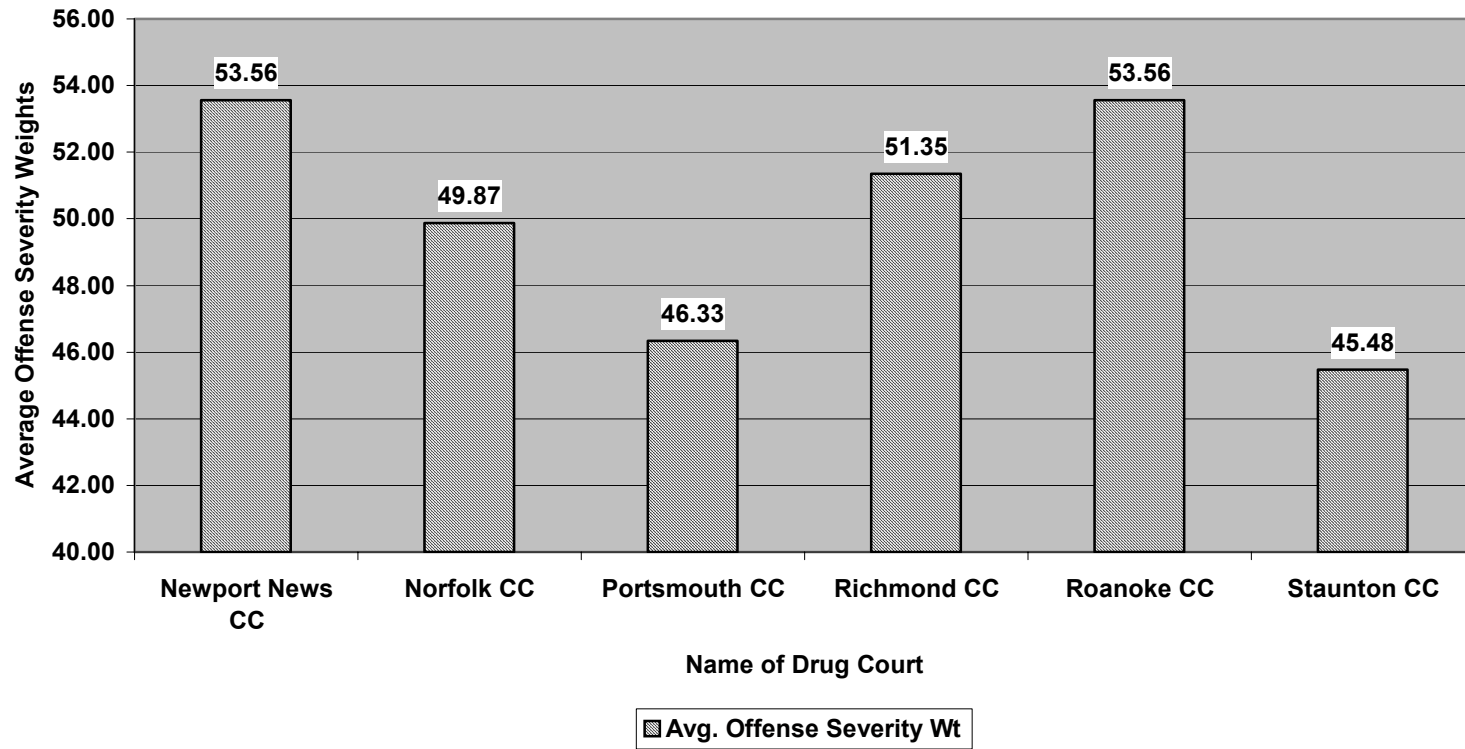


Table 65B: Average Offense Severity Weights



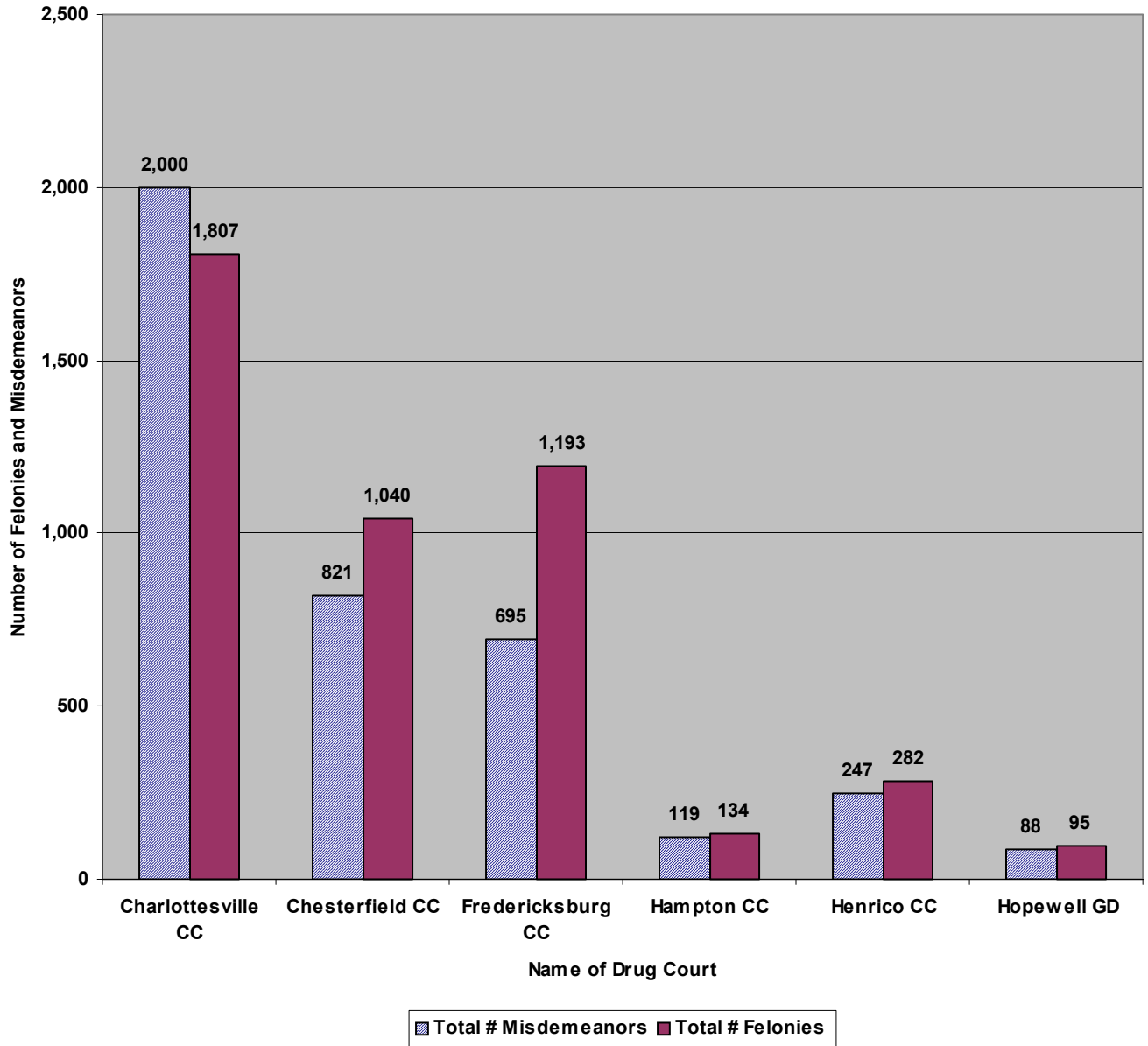
Number of Misdemeanor and Felony Arrests Prior to Drug Court Admittance

Analysis of the number of misdemeanor and felony arrests indicates that drug court participants have extensive arrest records prior to entering the drug court programs. Drug court participants have a total of 11,435 misdemeanors and 13,972 felonies. This means that the 2,056 adult drug court participants have committed an average of 6.8 felonies and an additional 5.6 misdemeanors prior to being admitted to drug court programs.

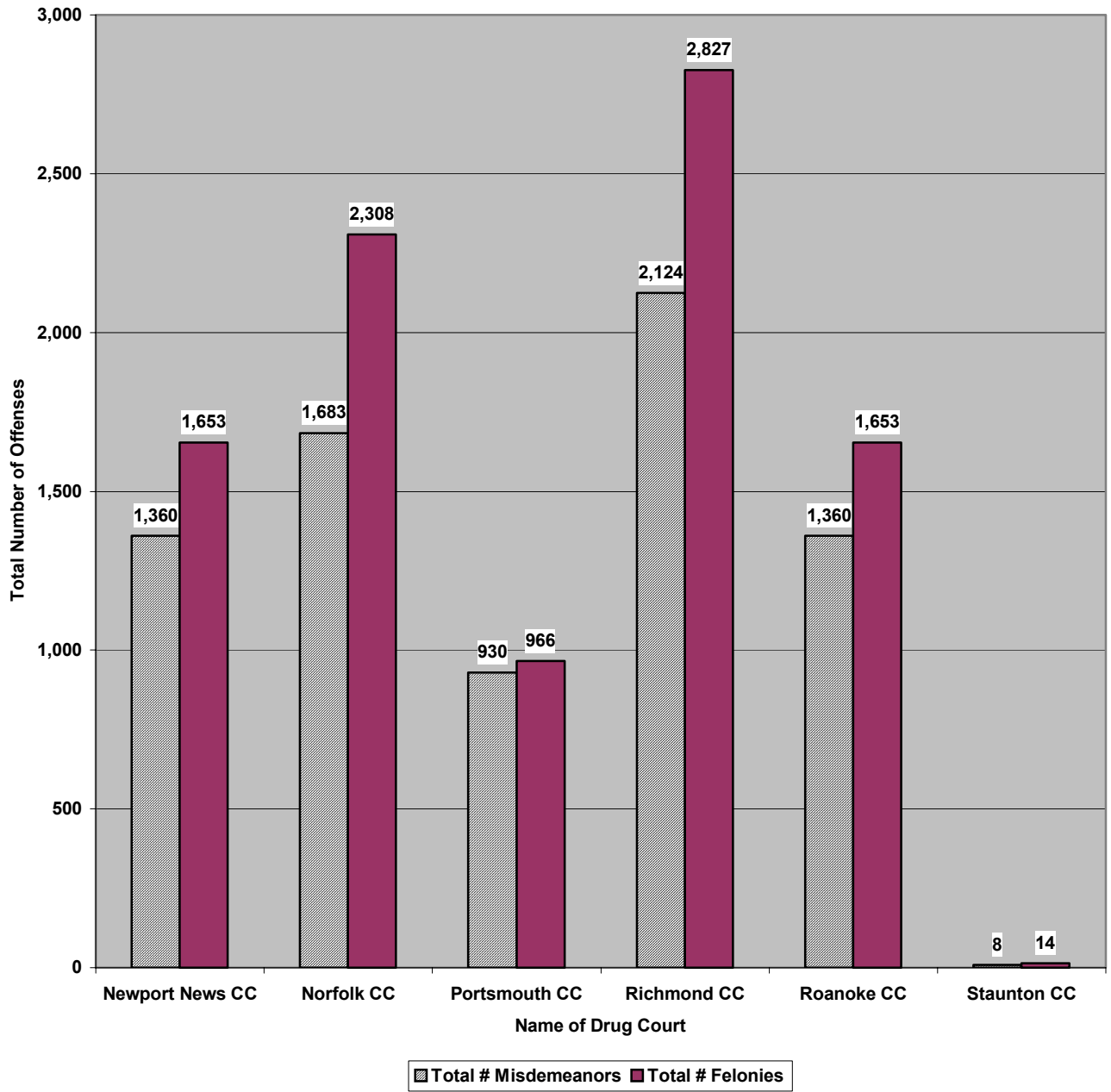
Table 66: Prior Arrests of Adult Drug Court Participants

Court Name	Total Cases	Total Number Misdemeanors	Average Number of Misdemeanors	Total Number Felonies	Average Number of Felonies
Charlottesville CC	290	2,000	6.9	1,807	6.2
Chesterfield CC	202	821	4.1	1,040	5.2
Fredericksburg CC	197	695	3.5	1,193	6.1
Hampton CC	28	119	4.3	134	4.8
Henrico CC	35	247	7.1	282	8.1
Hopewell GD	9	88	9.8	95	10.6
Newport News CC	180	1,360	7.6	1,653	9.2
Norfolk CC	260	1,683	6.5	2,308	8.9
Portsmouth CC	142	930	6.5	966	6.8
Richmond CC	297	2,124	7.2	2,827	9.5
Roanoke CC	410	1,360	3.3	1,653	4.0
Staunton CC	6	8	1.3	14	2.3
Statewide	2056	11,435	5.6	13972	6.8

**Table 67A: Misdemeanor and Felony Offenses
Committed Before Drug Court**



**Table 67B: Misdemeanor and Felony Offenses
Committed Before Drug Court**



Description of the Adult Drug Court Study Population

A total of 2,056 adult drug court participants comprised the study population for the impact evaluation. Of this total, 647 are graduates, 918 are non-graduates (terminated, withdrawn, or death), and 491 are active participants.

Table 57: Numbers and Status of Adult Drug Court Study Population

Court Name	Total Cases	Total Number Graduates	Percent Graduates	Total Non-Graduates	Percent Non-Graduates	Total Actives	Percent Actives
Charlottesville CC	290	105	36%	136	47%	49	17%
Chesterfield CC	202	49	24%	94	47%	59	29%
Fredericksburg CC	197	93	47%	94	48%	10	5%
Hampton CC	28	0	0%	6	21%	22	79%
Henrico CC	35	5	14%	8	23%	22	63%
Hopewell GD	9	0	0%	5	56%	4	44%
Newport News CC	180	51	28%	98	54%	31	17%
Norfolk CC	260	58	22%	133	51%	69	27%
Portsmouth CC	142	33	23%	73	51%	36	25%
Richmond CC	297	59	20%	155	52%	83	28%
Roanoke CC	410	194	47%	116	28%	100	24%
Staunton CC	6	0	0%	0	0%	6	100%

Table 58: Total Adult Drug Court Cases

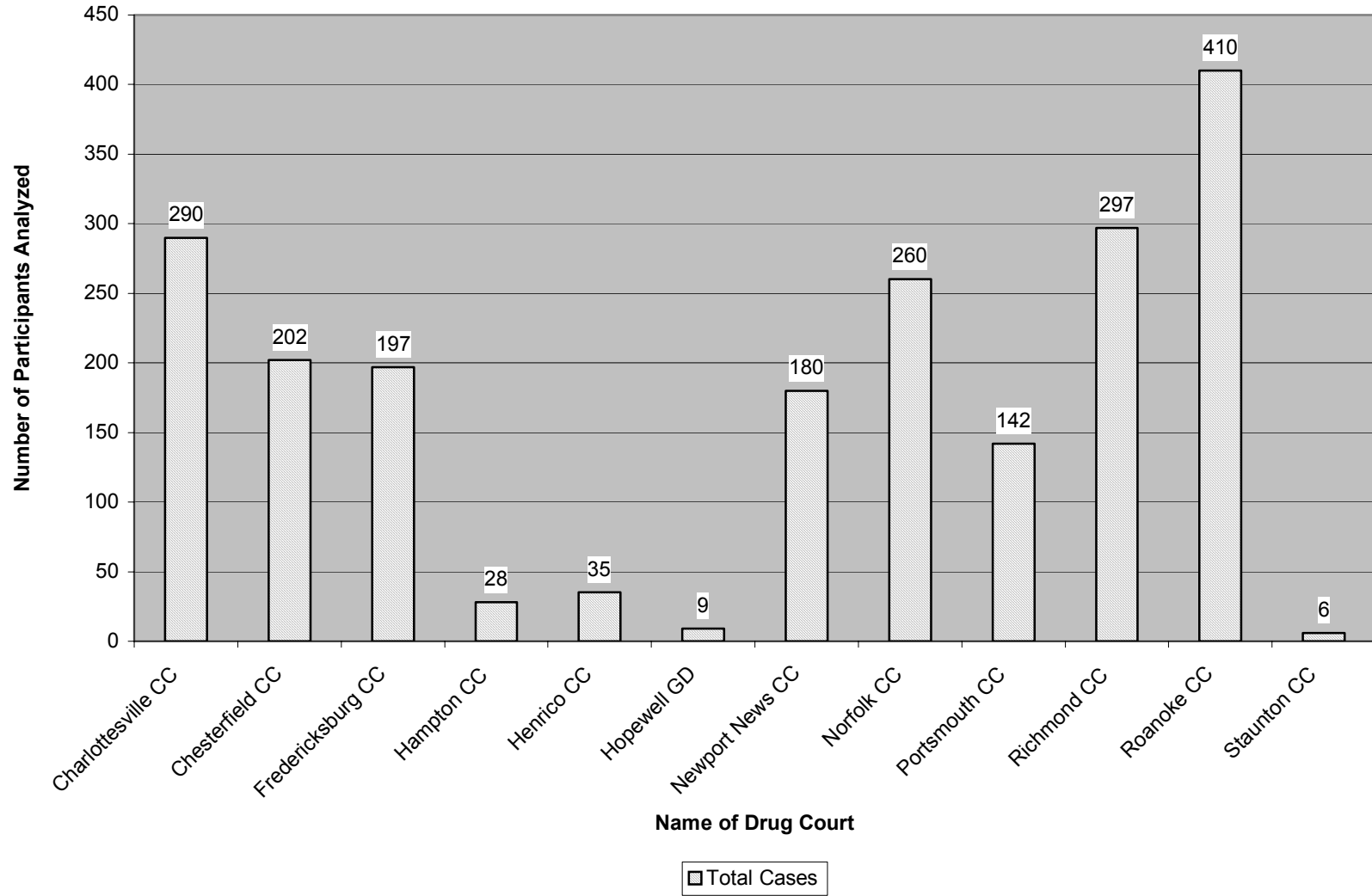


Table 59A: Description of Adult Drug Court Cases

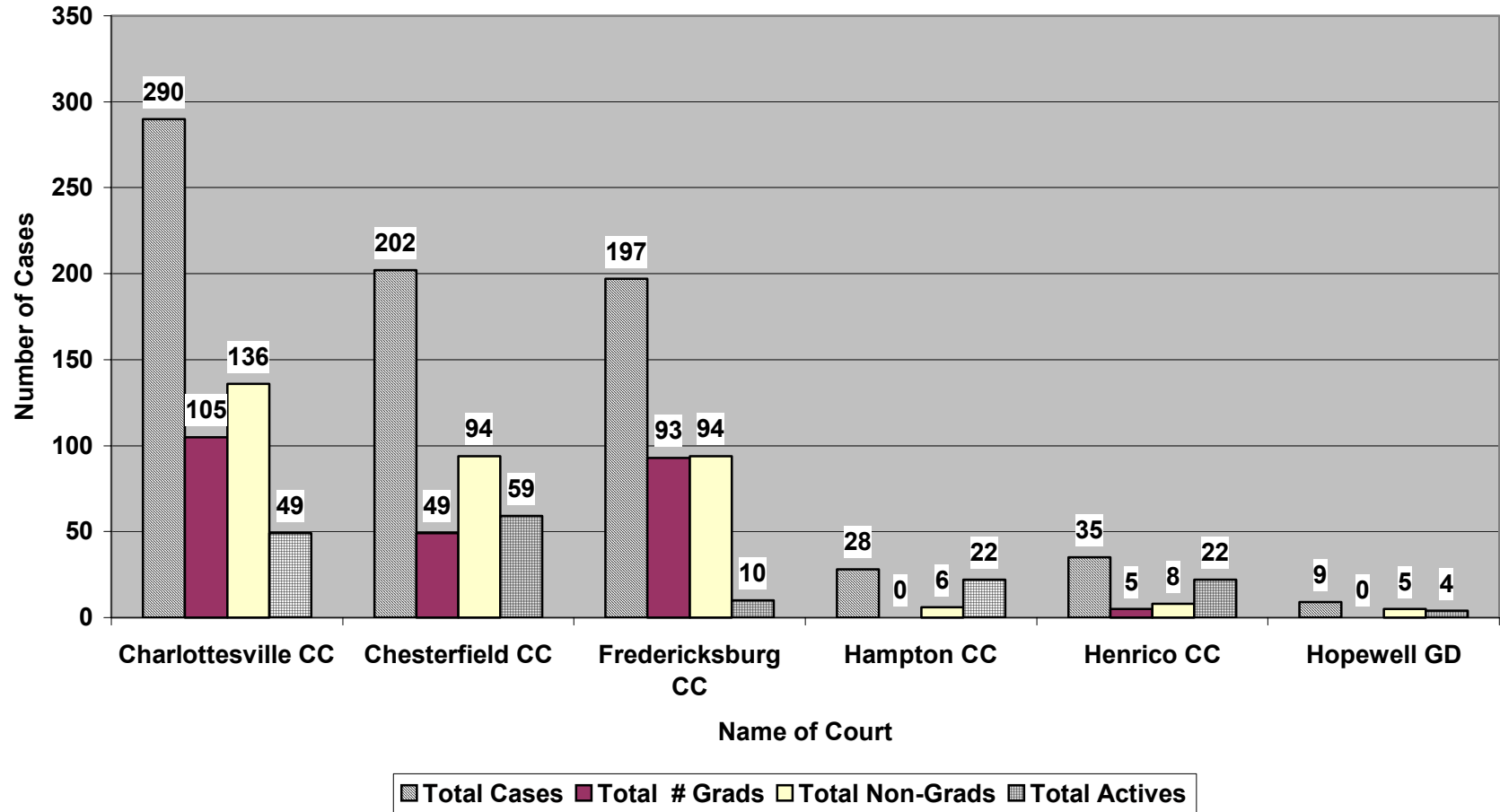


Table 59B: Description of Adult Drug Court Cases

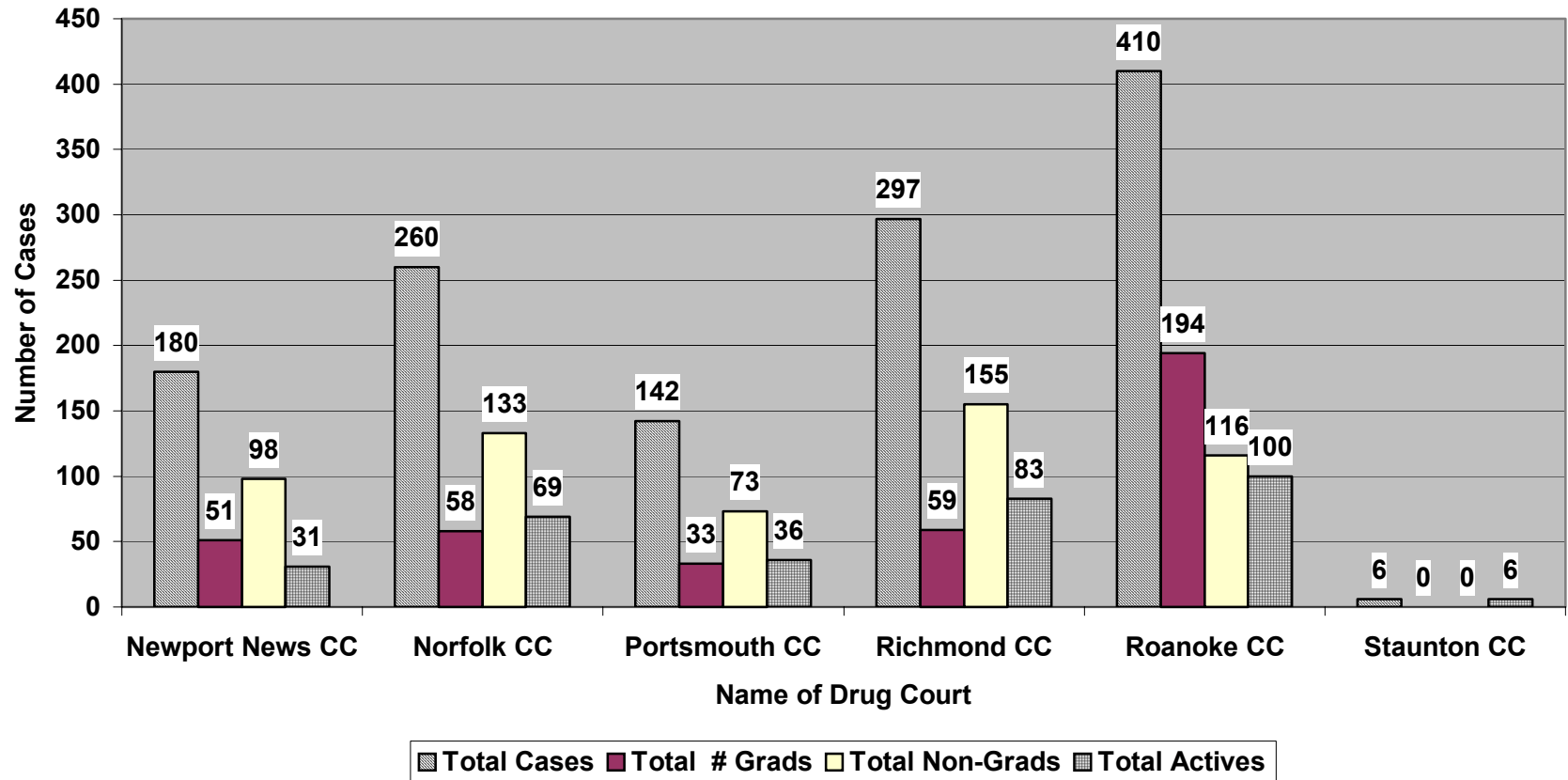
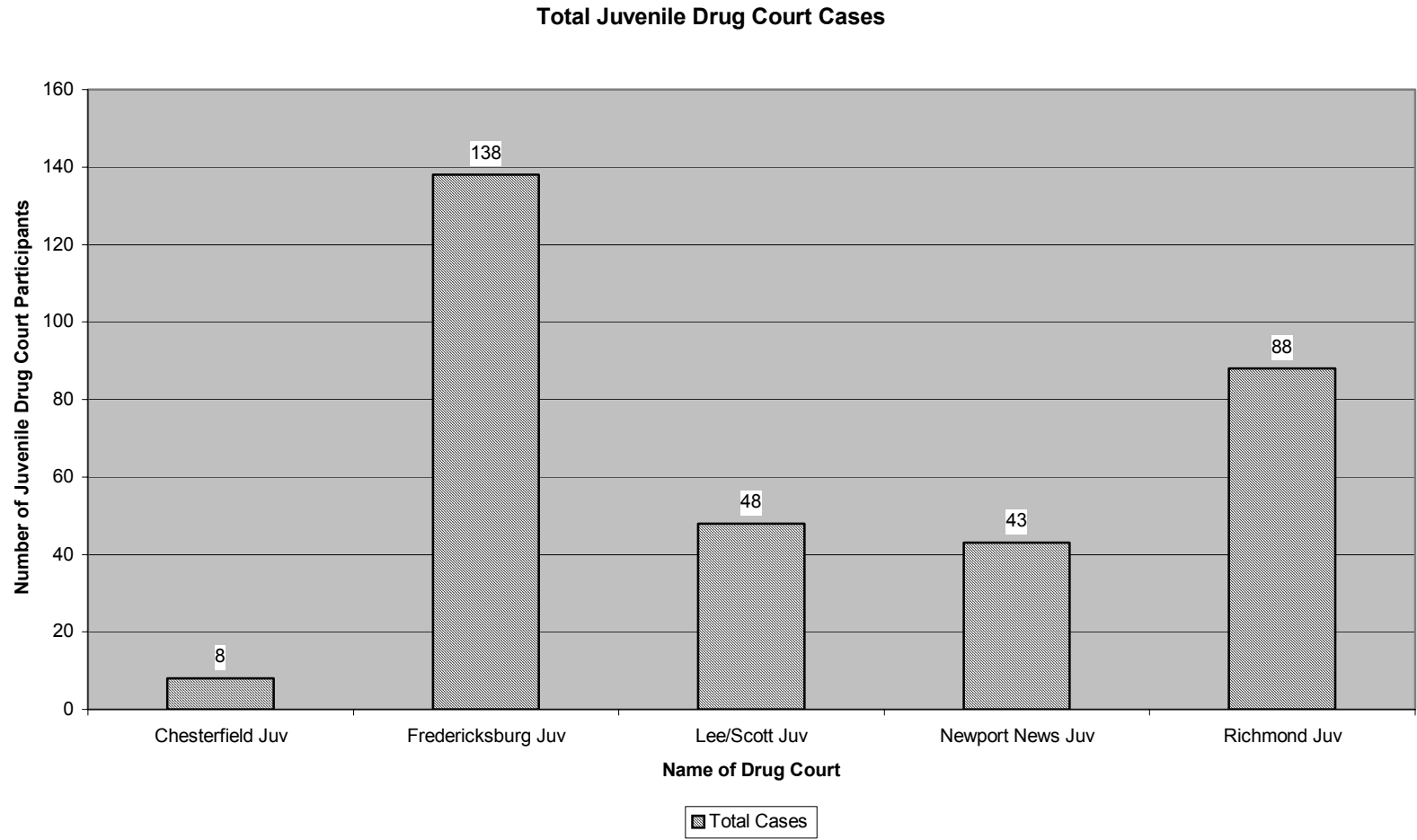


Table 60: Description of the Juvenile Drug Court Study Population

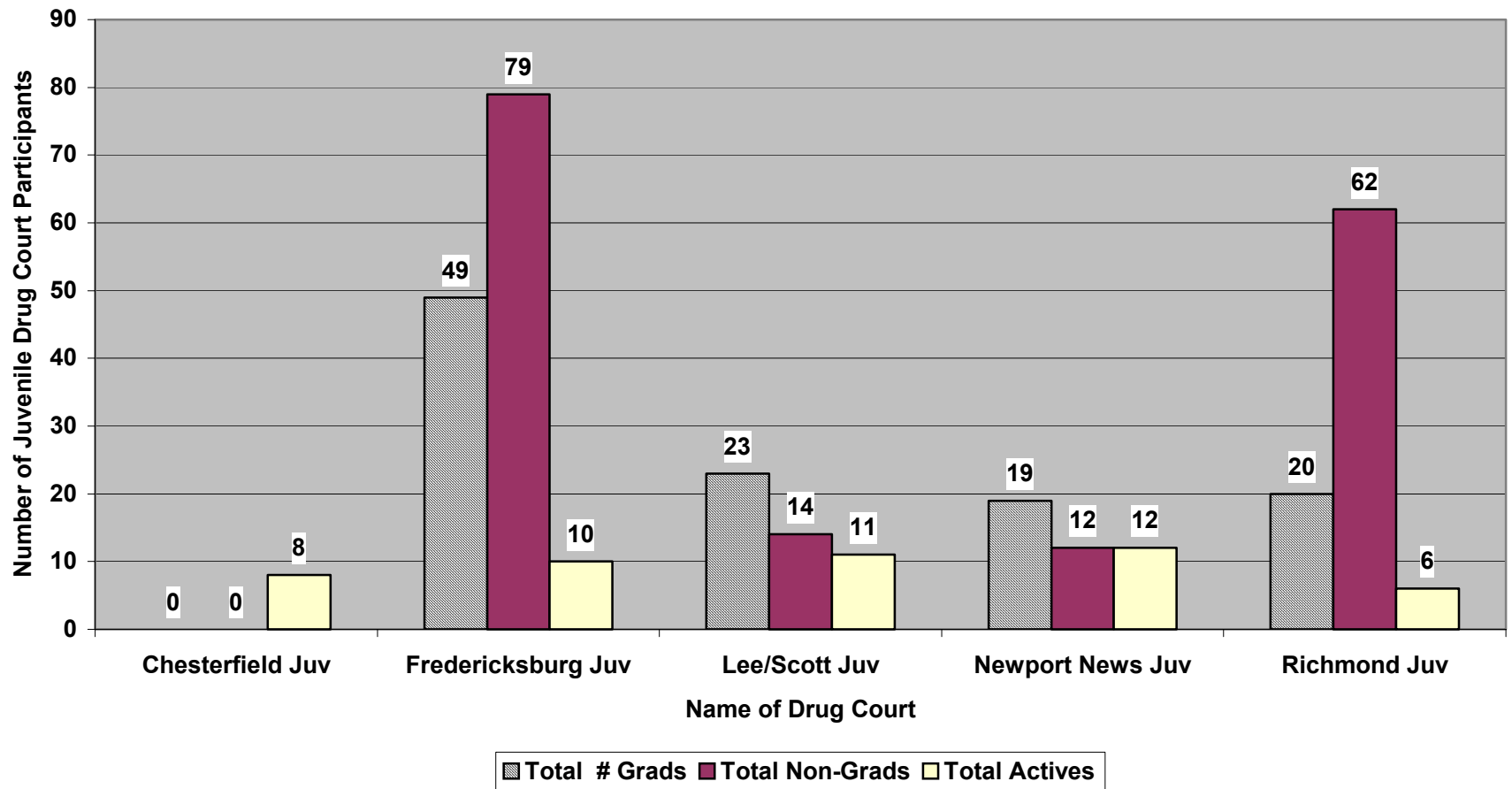
A total of 325 participants comprised the juvenile drug court study population. Of this total, 111 are graduates, 167 are non-graduates (terminated, withdrawn, or death), and 47 are active participants.

Court Name	Total Cases	Total # Grads	Percent Graduates	Total Non-Grads	Percent Non-Grads	Total Grads & Non-Grads	Total Actives	Percent Actives
Chesterfield Juvenile	8	0	0%	0	0%	0	8	100%
Fredericksburg Juvenile	138	49	36%	79	57%	128	10	7%
Lee/Scott Juvenile	48	23	48%	14	29%	37	11	23%
Newport News Juvenile	43	19	44%	12	28%	31	12	28%
Richmond Juvenile	88	20	23%	62	70%	82	6	7%

Table 61: Description of the Juvenile Drug Court Study Population



Description of Juvenile Drug Court Study Population



Recidivism of Virginia's Adult Drug Treatment Court Participants

Reduced recidivism is touted as an important outcome of drug court programs. National studies indicate that rates of drug court graduates are less than half the recidivism rates of those not graduating from drug courts. The second stage of the statewide drug court evaluation planned by the Office of the Executive Secretary in 2005 includes a quasi-experimental impact study using matched control groups of drug offenders in localities that do not have drug court programs. Only one previous Virginia drug court evaluation used a matched control group to evaluate the effectiveness of their drug court program. Until the planned quasi-experimental study is completed, the Virginia recidivism “measuring stick” is a study conducted by the Virginia Criminal Sentencing Commission (VCSC) in 1999. The VCSC study indicated that Virginia drug offenders treated in traditional ways of incarceration or probation had a 50% felony recidivism rate.

Recidivism is defined conservatively in this analysis. A drug court graduate or non-graduate is defined as a recidivist if he or she has been arrested for a criminal offense after leaving the drug court program. The recidivism measure includes both misdemeanor and felony offenses. If recidivism had been defined as subsequent convictions, the recidivism rates would be much lower. Even so, the recidivism rates of Virginia's drug court graduates are generally lower than half of the 50% felony recidivism rate found in the 1999 VCSC study.

While recidivism rates and numbers are reported for individual programs, it is not advisable to compare the outcomes in one drug court with another drug court. This is because there are wide variations in participants, eligibility and termination criteria. In addition, the types of treatment needed and the predominate drugs differ among the drug courts and different regions of Virginia. For example, the Tidewater region is dealing with rising narcotics addiction while most drug courts are dealing primarily with crack cocaine addiction. The Southwestern region of Virginia is dealing with rising prescription fraud and Oxycodon addiction. Each type of addiction has different treatment protocols and different rates of success. In addition to differences in treatment needs, Virginia's drug courts vary in the type of offenders accepted into their programs. For example, Norfolk Circuit Drug Court sees their post-dispositional program as the last chance for drug offenders when previous incarceration and probation have failed to alter the addicts' drug use and criminal offending patterns. This program also admits a

substantial percentage of homeless people. Norfolk's drug court graduates have a 27.58% felony recidivism rate. Given the extensive criminal histories and repeated probation failures of Norfolk's drug court participants, having 72.42% of drug court graduates not committing additional felony offenses after drug court completion is cause for celebration.

Comparison between dissimilar drug court programs is likened to comparing the achievements of an academically gifted classroom with the achievements of a mentally disabled classroom. While both may show significant achievement gains, they do not start at the same point and therefore cannot be compared. While recidivism is impacted by offender factors, recidivism is also impacted by program factors such as eligibility criteria and termination policies. Recidivism rates of smaller drug court programs are impacted by relatively minor variations (i.e., it would take fewer recidivist offenders to affect Staunton's recidivism rate and many more recidivist offenders to affect Roanoke's graduate recidivism rate).

The felony recidivism rate for drug court graduates is based on the number of graduates who had felony arrests after graduation from drug court. The misdemeanor recidivism rate for drug court graduates is based on the number of graduates who had misdemeanor arrests after graduation from drug court. The total number is then divided by the total number of graduates for the local drug court. The felony recidivism rate for graduates ranged from 0% to 27.58%. The misdemeanor recidivism rate for graduates ranged from 0% to 11.43%. As expected, the recidivism rate for drug court non-graduates (terminated or withdrew) is higher than the graduate recidivism rate and ranges from 0% to 50.68%. The misdemeanor recidivism rate for non-graduates ranges from 0% to 40%. Like the graduate recidivism rates, the recidivism rates of non-graduates are based on the total number of felony or misdemeanor recidivists divided by the total number of non-graduates.

Statewide there were 103 drug court graduates who had felony arrests after graduation. Out of the total number of graduates statewide (647), this represents a 15.9% felony recidivism rate. There were 59 drug court graduates who had misdemeanor arrests resulting in a misdemeanor recidivism rate of 9.1%.

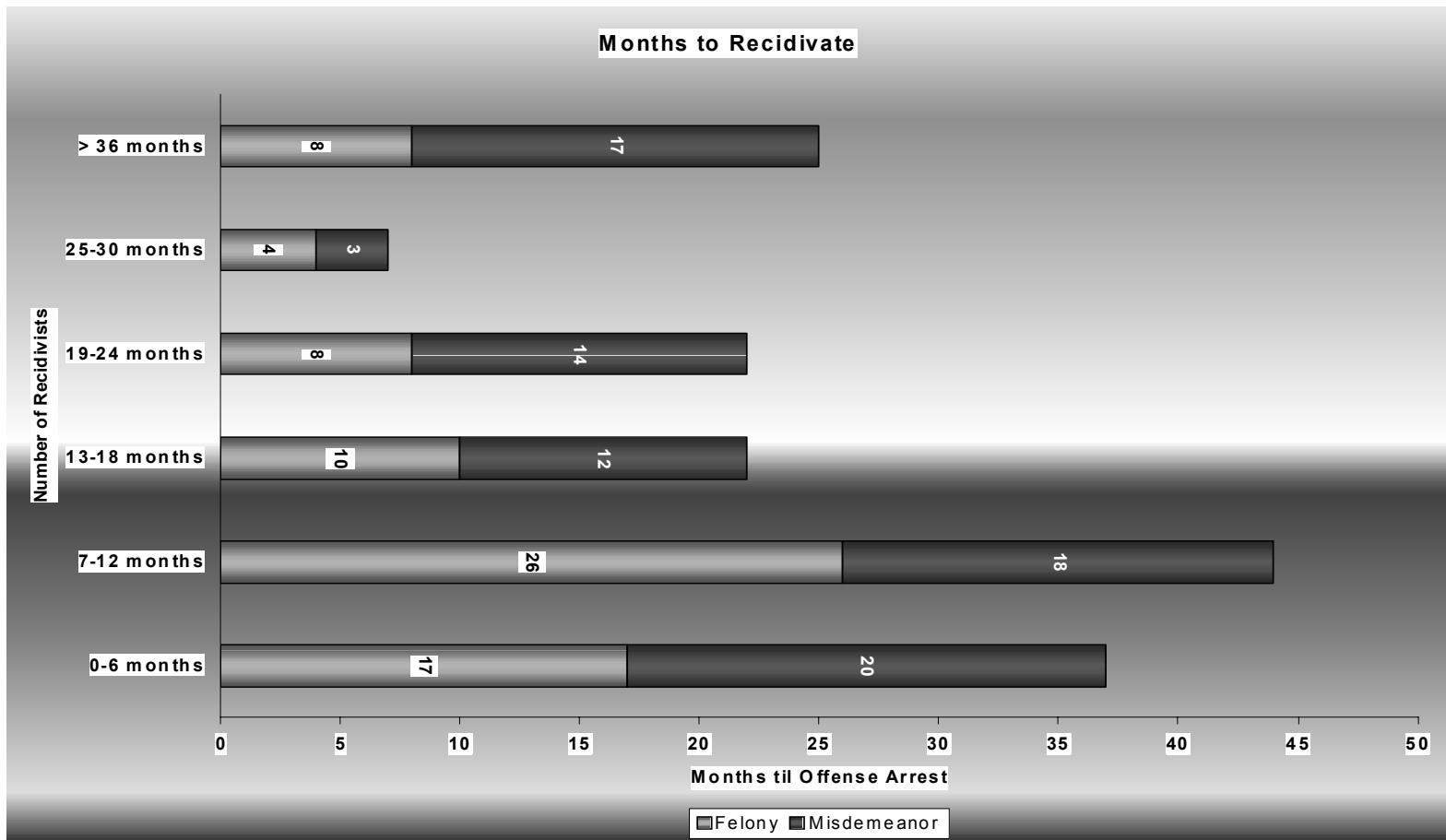
There is a total of 918 drug court non-graduates. Of these, 303 were arrested for felony offenses after leaving drug court for a felony recidivism rate of 33.0%. There were 72 non-graduates who were arrested for subsequent misdemeanor offenses. This represents a 7.8% misdemeanor recidivism rate.

Table 68: Recidivism of Adult Drug Treatment Court Graduates

Court Name	Total Number Graduates	Graduate Felony Recidivists	Graduate Felony Recidivism Rate	Graduate Misdemeanor Recidivists	Graduate Misdemeanor Recidivism Rate
Charlottesville CC	105	18	17.14	12	11.43
Chesterfield CC	49	3	6.12	2	4.08
Fredericksburg CC	93	13	13.98	10	10.75
Hampton CC	0	0	0.00	0	0.00
Henrico CC	5	0	0.00	0	0.00
Hopewell GD	0	0	0.00	0	0.00
Newport News CC	51	3	5.80	7	13.70
Norfolk CC	58	16	27.58	4	6.70
Portsmouth CC	33	3	9.09	3	9.09
Richmond CC	59	16	25.42	1	3.39
Roanoke CC	194	31	15.98	20	10.31
Staunton CC	0	0	0.00	0	0.00

Table 69: Recidivism of Adult Drug Treatment Court Non-Graduates

Court Name	Total Non-Graduates	Non-Graduate Felony Recidivists	Non-Graduate Felony Recidivism Rate	Non-Graduate Misdemeanor Recidivists	Non-Graduate Misdemeanor Recidivism Rate
Charlottesville CC	136	48	35.29	17	12.50
Chesterfield CC	94	24	25.53	6	6.38
Fredericksburg CC	94	30	31.90	11	11.70
Hampton CC	6	2	33.00	0	0.00
Henrico CC	8	0	0.00	1	12.50
Hopewell GD	5	1	20.00	2	40.00
Newport News CC	98	0	0.00	0	0.00
Norfolk CC	133	45	33.80	9	6.77
Portsmouth CC	73	37	50.68	3	4.11
Richmond CC	155	60	38.70	9	5.81
Roanoke CC	116	56	48.28	14	12.07
Staunton CC	0	0	0.00	0	0.00



Analysis of the time between graduation and the first arrest for a felony or misdemeanor offense indicates that the critical period for recidivism is in the first year. Some drug courts have recognized the vulnerability of participants going from a strictly monitored and structured drug court situation to a situation with relatively no structure or supervision. These programs have extended probation supervision or added an aftercare program after drug court graduation to address the transition need during the first year.

Table 72A: Number Adult Drug Court Non-graduate Recidivists

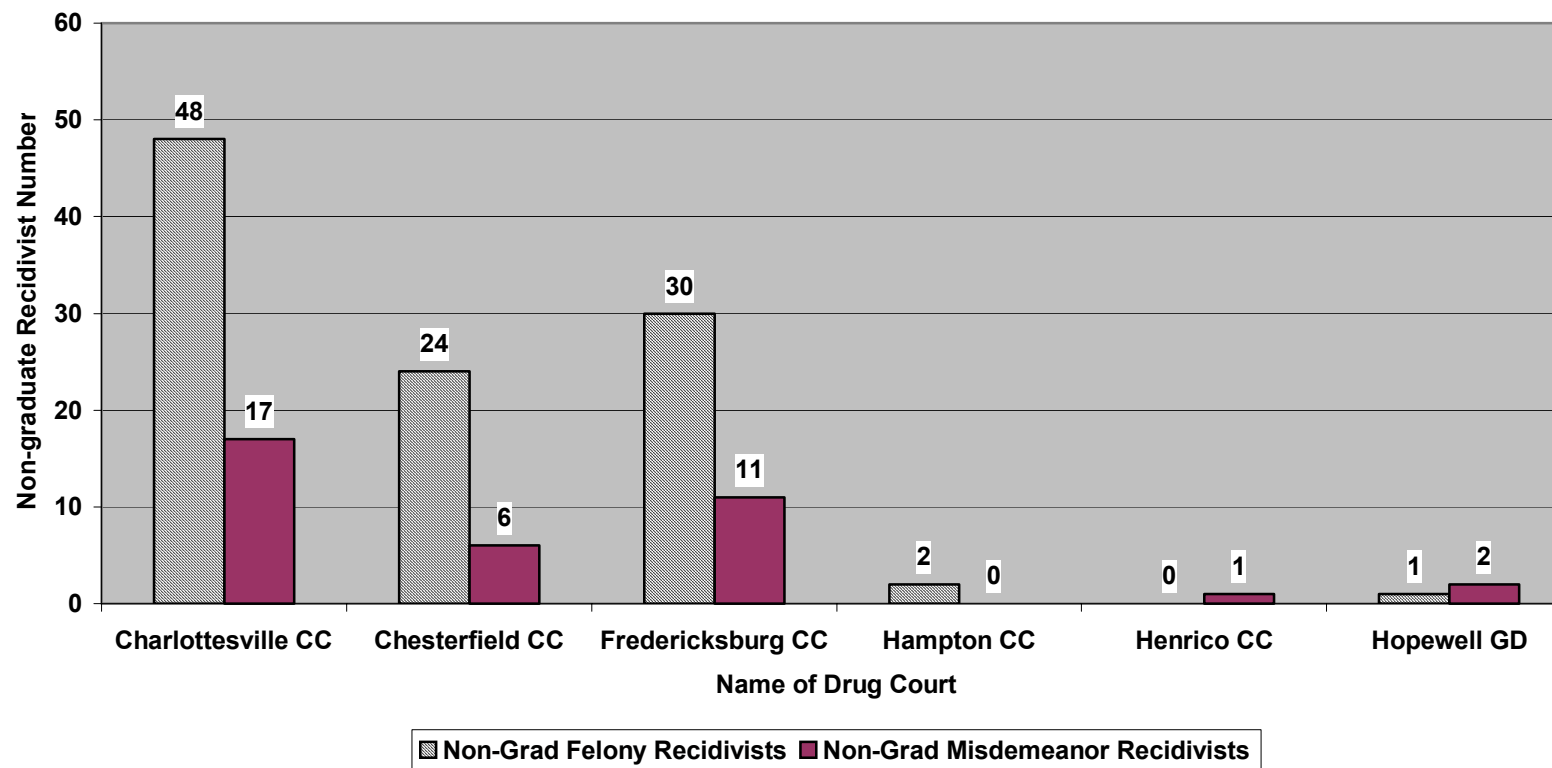


Table 72B: Number Adult Drug Court Non-Graduate Recidivists

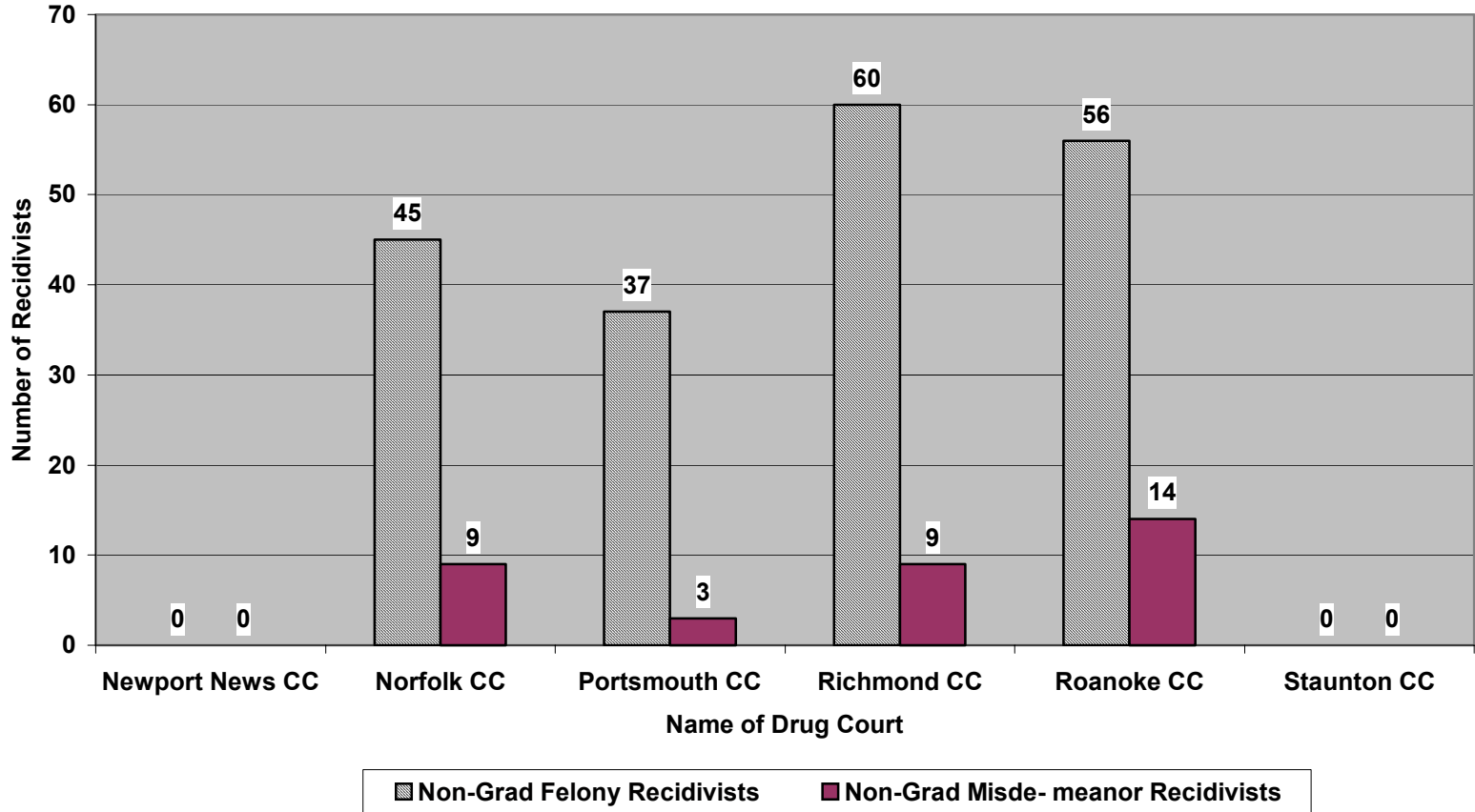


Table 73A: Recidivism Rates of Adult Drug Court Non-Graduates

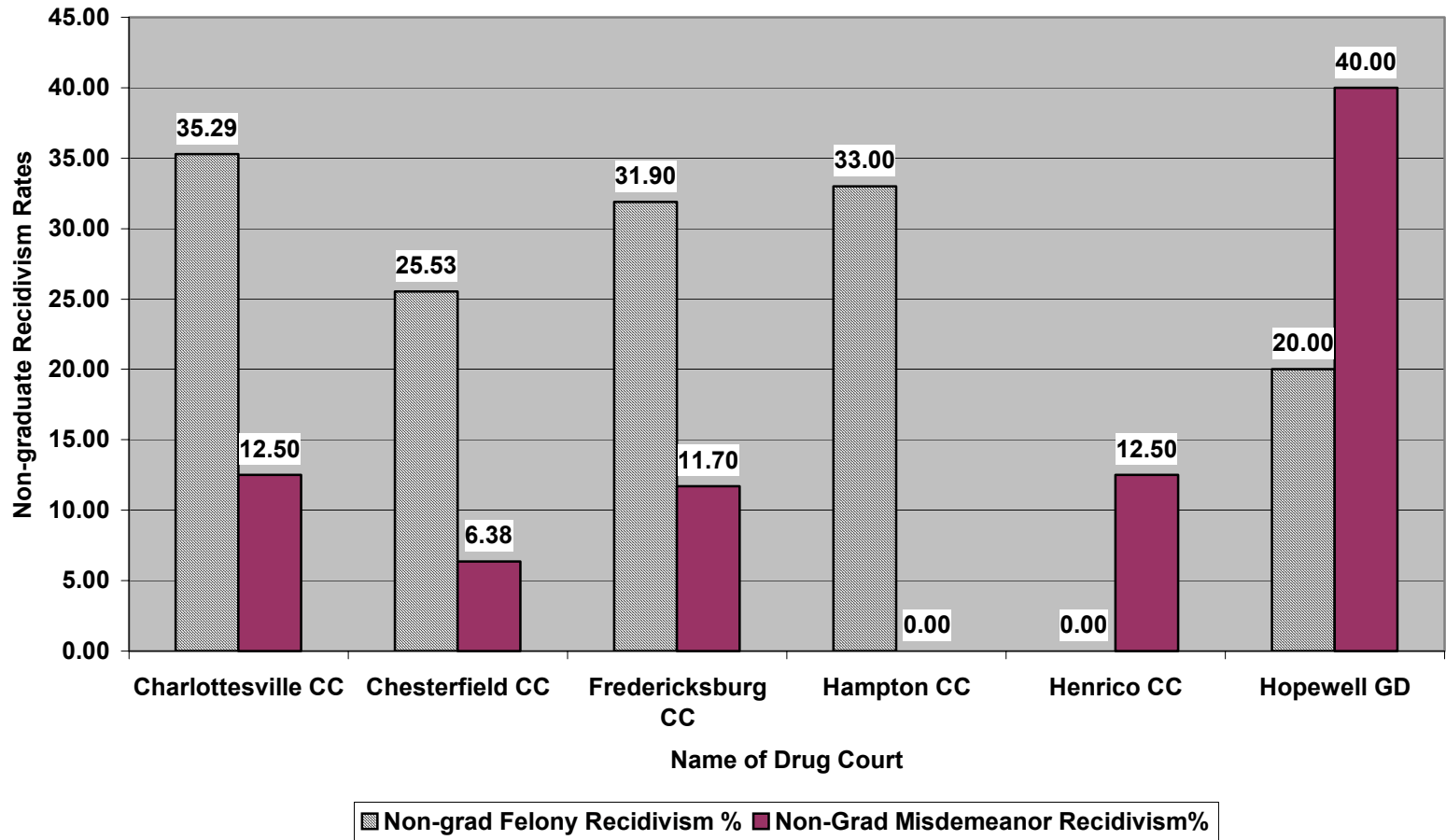


Table 73B: Recidivism Rates of Adult Drug Court Non-Graduates

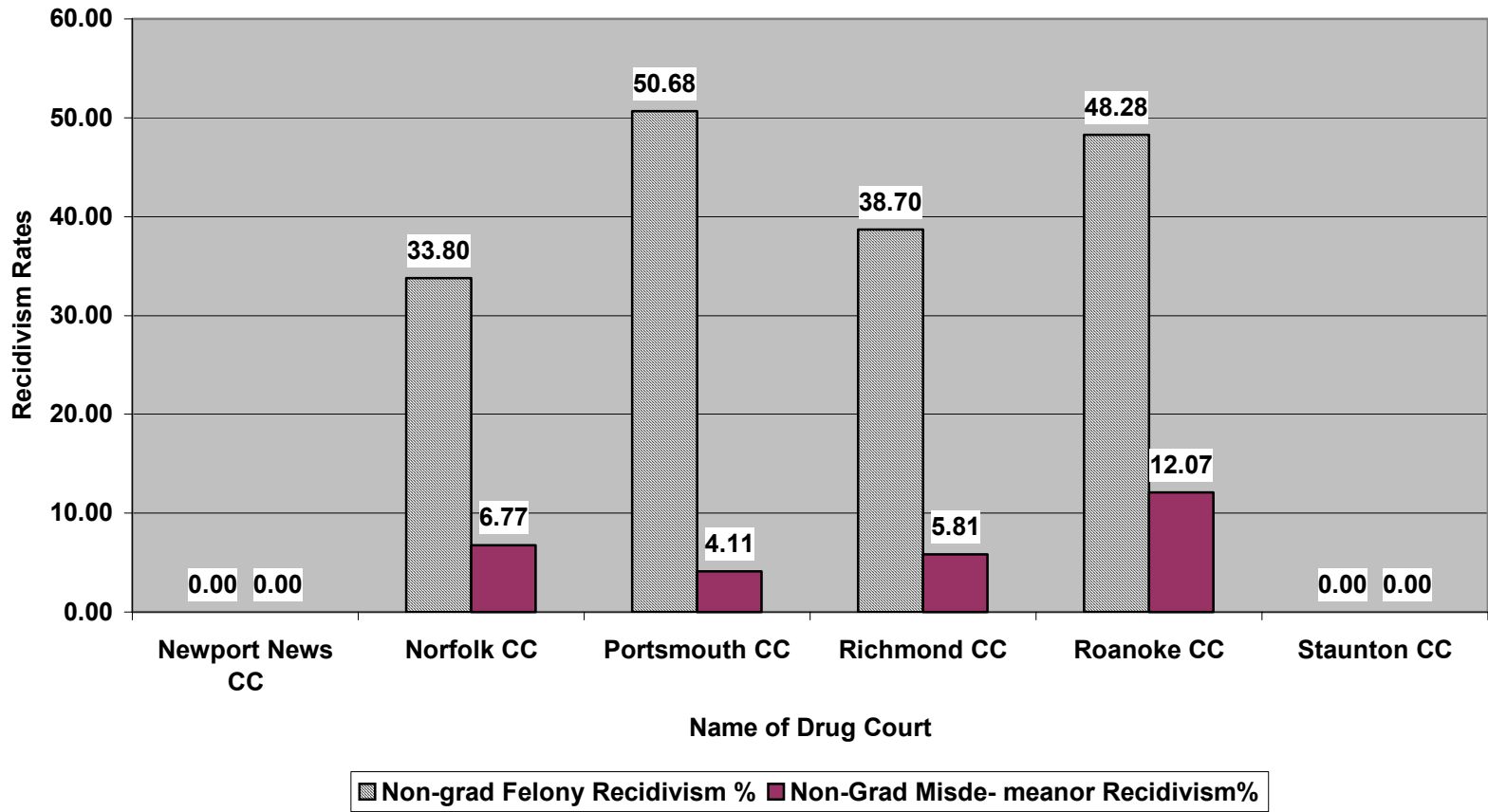


Table 74: Statewide Adult Drug Court Misdemeanor and Felony Recidivism Rates

Adult Drug Court Programs	Total # Grads	Graduates with Felony Arrests	Graduates with Misdemeanor Arrests	Total Non-Grads	Non-Graduates with Felony Arrests	Non-Graduates with Misdemeanor Arrests
	647	103	59	918	303	72
Recidivism Rate		15.9%	9.1%		33.0%	7.8%

Statewide there were 103 drug court graduates who had felony arrests after graduation. Out of the total number of drug court graduates statewide (647), this represents a 15.9% felony recidivism rate for drug court graduates. There were 59 drug court graduates who had misdemeanor arrests for a misdemeanor recidivism rate of 9.1%.

There is a statewide total of 918 drug court non-graduates. Of these, 303 were arrested for felony offenses after leaving drug court for a felony recidivism rate of 33.0%. There were 72 non-graduates who were arrested for subsequent misdemeanor offenses. This represents a 7.8% misdemeanor recidivism rate.

Recidivism of Juvenile Drug Treatment Court Graduates and Non-Graduates

There are fourteen juvenile drug court graduates in the study population who had felony arrests after graduation. This number was divided by the total number of juvenile drug court graduates (111) for a statewide felony recidivism rate of 12.6%. The graduate felony recidivism rates for local juvenile drug court programs range from 2.1% to 30%. The misdemeanor recidivism rates for juvenile drug court graduates ranged from 0% to 20.0%.

The statewide felony recidivism rate for juvenile drug court non-graduates (terminated or withdrew) is 26.9%. Local drug court felony recidivism rates for non-graduates range from 0% to 41.90%. The misdemeanor recidivism rates for juvenile non-graduates range from 0% to 20.25%.

The felony and misdemeanor recidivism rates are based on the number of graduates or non-graduates who have been arrested after drug court participation. The graduate recidivist number is divided by the total number of graduates for each program. The non-graduate recidivist number is divided by the total number of non-graduates for each program.

Table 75: Recidivism of Juvenile Drug Court Graduates

Court Name	Number of Graduates	# Graduate Felony Recidivists	% Graduate Felony Recidivists	# Graduate Misdemeanor Recidivists	% Graduate Misdemeanor Recidivists
Fredericksburg Juvenile	49	6	12.24	9	18.36
Lee/Scott Juvenile	23	1	4.34	1	4.34
Newport News Juvenile	19	1	5.26	0	0.00
Richmond Juvenile	20	6	30.00	4	20.00

Table 76: Recidivism of Juvenile Drug Court Non-Graduates

Court Name	Number Non-Graduates	# Non-Graduate Felony Recidivists	% Non-graduate Felony Recidivists	# Non-Graduate Misdemeanor Recidivists	% Non-Grad Misdemeanor Recidivism%
Fredericksburg Juvenile	79	19	24.05	16	20.25
Lee/Scott Juvenile	14	0	0.00	0	0.00
Newport News Juvenile	12	0	0.00	1	8.30
Richmond Juvenile	62	26	41.93	3	4.83

Table 77: Statewide Recidivism of Juvenile Drug Court Graduates and Non-Graduates

Juvenile Drug Court Programs	Total # Grads	Graduates with Felony Arrests	Graduates with Misdemeanor Arrests	Total Non-Grads	Non-Graduates with Felony Arrests	Non-Graduates with Misdemeanor Arrests
Number of Participants	111	14	14	167	45	20
Recidivism Rate		12.6%	12.6%		26.9%	11.9%

Fourteen juvenile drug court graduates were arrested for felony offenses after graduation. This number was divided by the total number of juvenile drug court graduates (111) for a statewide felony recidivism rate of 12.6%. An additional 14 juvenile drug court graduates were arrested for misdemeanor offenses. The statewide misdemeanor recidivism rate is 12.6%.

There are 167 juvenile drug court non-graduates. Of these, 45 are felony recidivists. This results in a non-graduate felony recidivism rate of 26.9%. There are 20 non-graduate misdemeanor recidivists. The misdemeanor recidivism rate for juvenile non-graduates is 11.9%.

Table 78: Number Juvenile Drug Court Graduate Recidivists

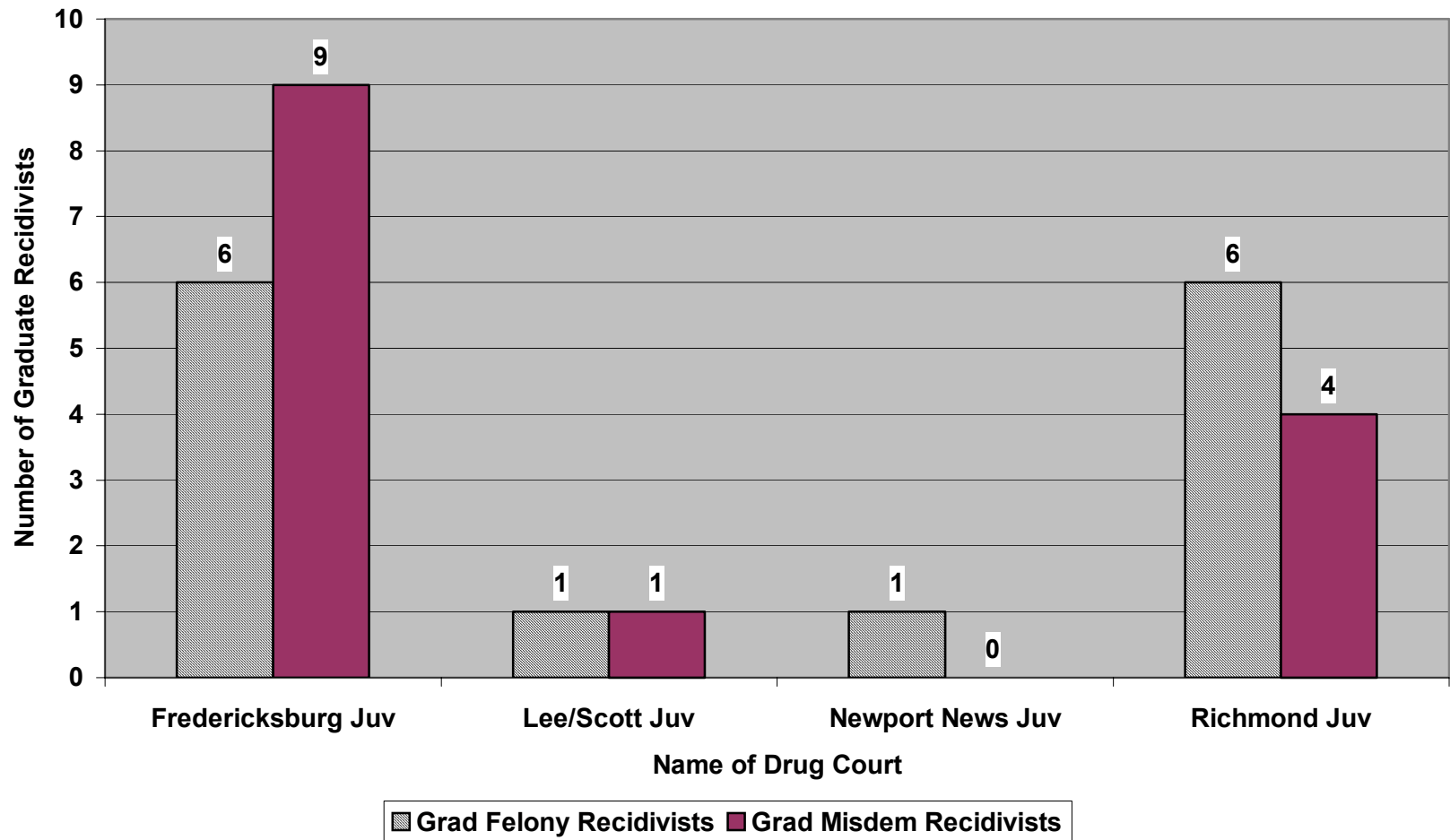


Table 79: Recidivism Rates of Juvenile Drug Court Graduates

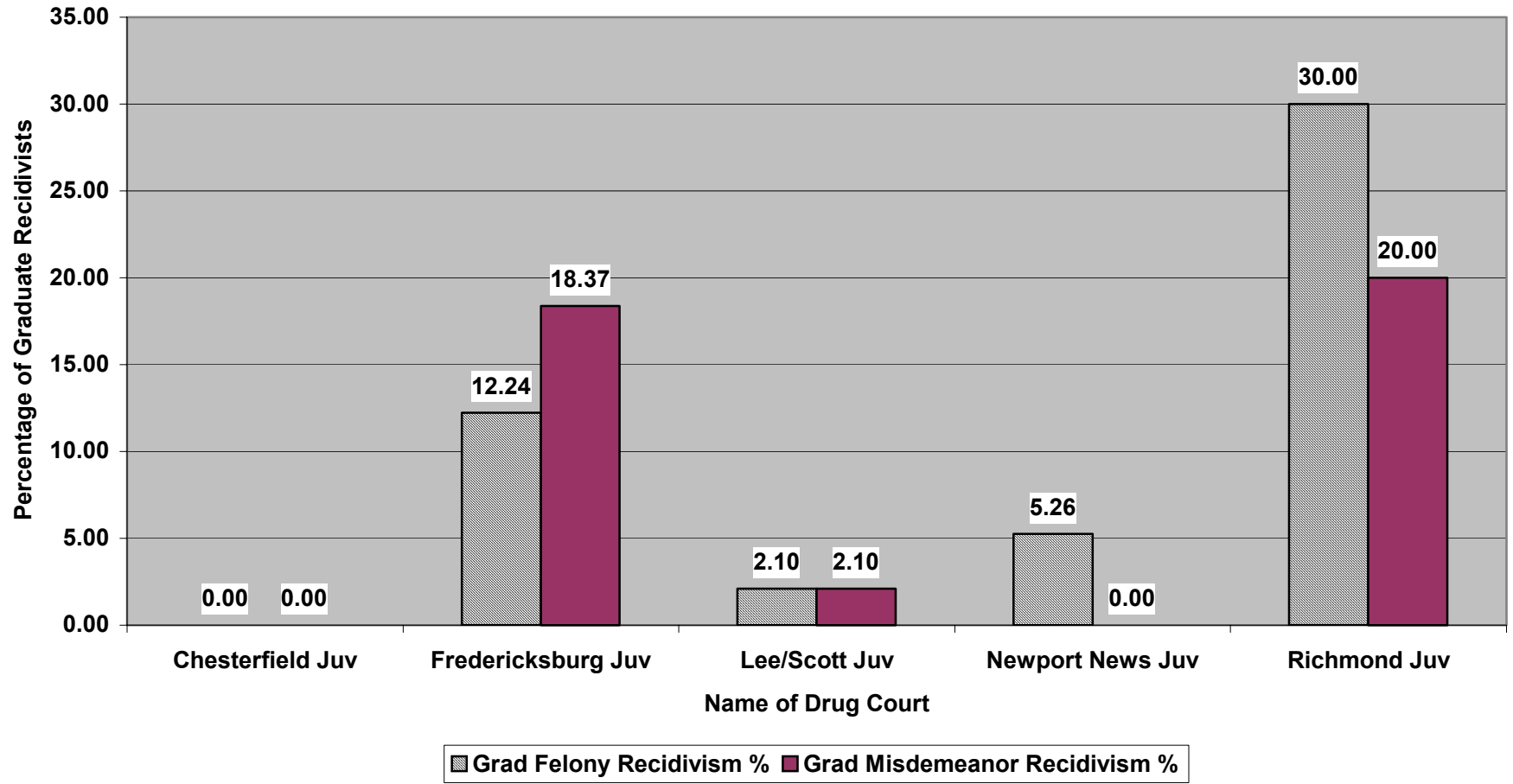


Table 80: Number Juvenile Non-Graduate Recidivists

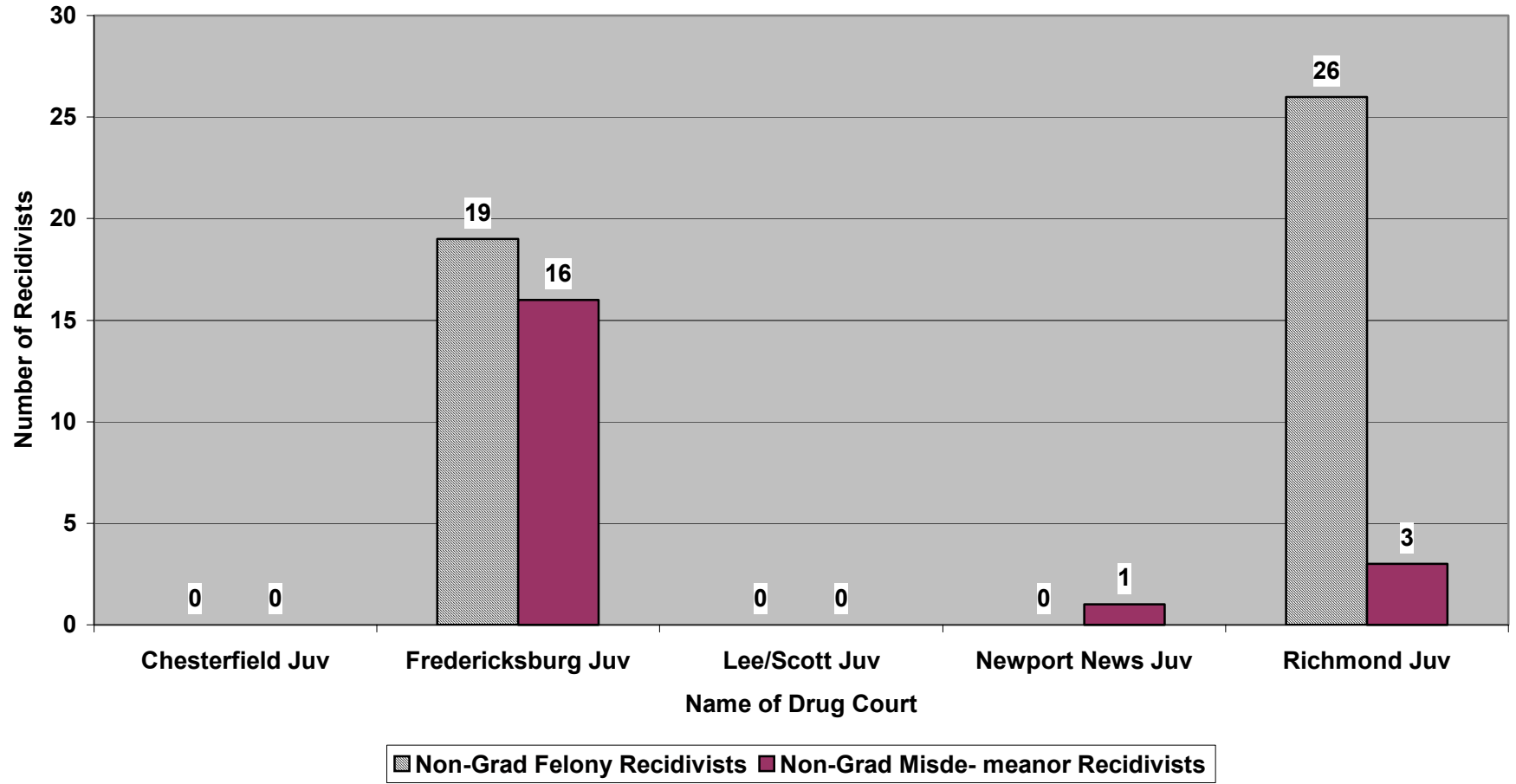
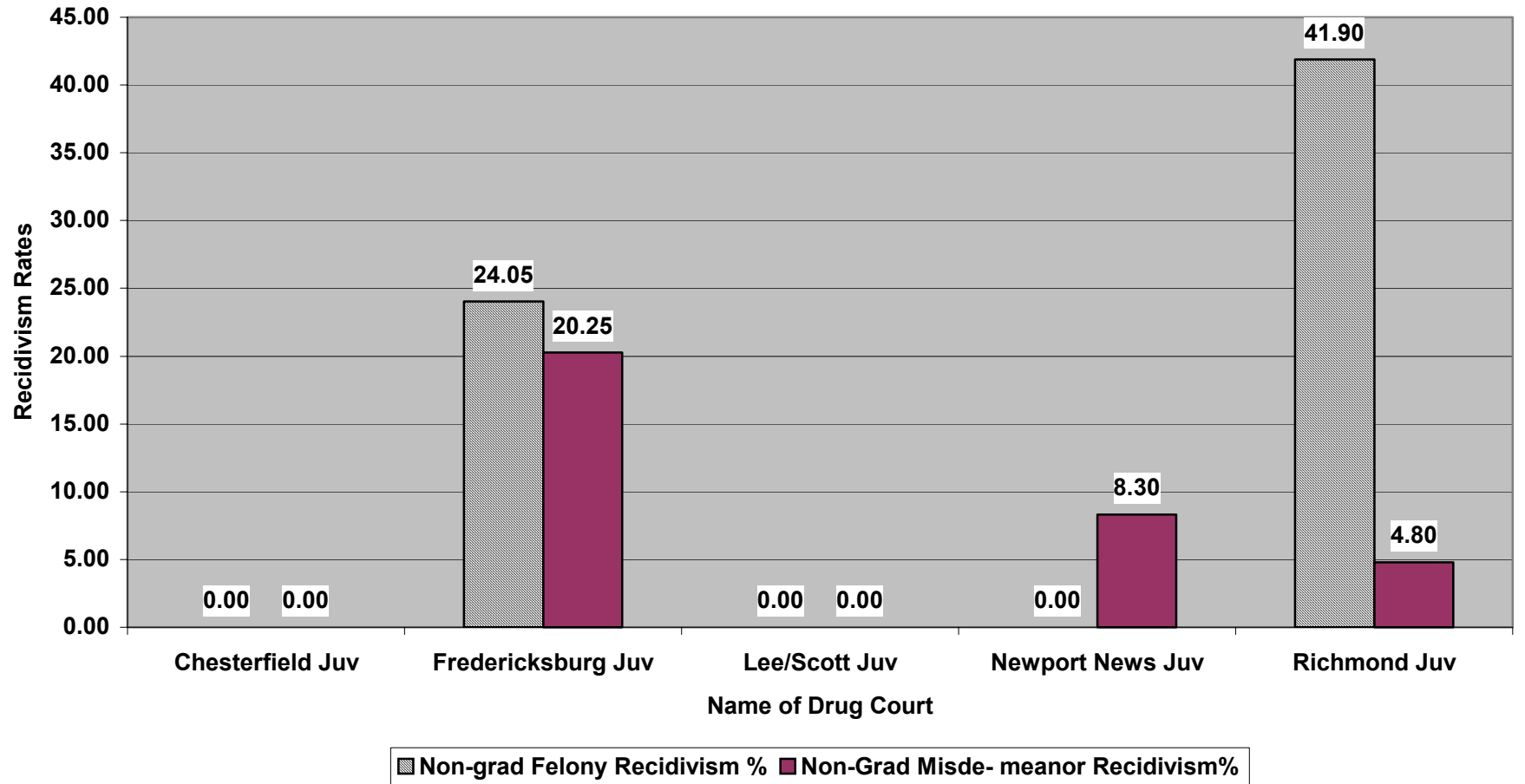


Table 81: Recidivism Rates of Juvenile Drug Court Non-Graduates



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