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Violent Offenders in Drug Court

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>> Version of Record - Jan 1, 2001 What is This?

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Drug courts are slowly beginning to expand their admission criteria to include more chronic and serious offenders since traditional probation and incarceration have failed to prevent drug use and crime. Drug courts have moved from providing diversion programs for first-time offenders charged with drug possession to developing tracks for more complex clients. Many of these new drug court participants have extensive criminal histories, including histories of violent crime. Drug court decision-makers thus confront the difficulty of balancing the needs of treatment versus corrections by attempting to target offenders whose criminal histories suggest that their candidacy in a drug court would not pose a risk to public safety. To date, little is known about whether drug courts are appropriate for offenders with lengthy criminal histories that often include violence. The research presented here explores correlates of drug court graduation for seriously crime-involved offenders, most of whom have a history of violence.

BACKGROUND AND PURPOSE

Even with the advent and proliferation of drug courts, the number of drug offenders inundating court systems has continued to effect delays in court processings and cause shortages in jail and prison space across the nation. Moreover, although drug courts are promising alternatives to the traditional adversarial methods of the criminal justice system (Drug Strategies, 1999), they cannot meet the needs of the many drug-using offenders who require treatment. Indeed, despite the necessity, relatively few offenders are ever given the

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opportunity to attend treatment, whether in the context of a drug court or in other types of corrections-based programs (Camp & Camp, 1997; Bureau of Justice Statistics 1999).

A major goal of many court and correctional systems, though often unrealized, has been to reduce unnecessary incarceration by providing rehabilitation for offenders. At the same time, institutional policies aim to sentence offenders to the least restrictive and least costly sanction consistent with public safety. In accordance with these aims, drug courts were designed as "judicial experiments" to both facilitate the processing of drug cases and enhance offender outcomes by tying treatment directly to the court (Drug Strategies, 1999, 8). As well, most early drug courts were created with the intention of better managing appropriate first-time offenders in the community so as to ensure prison space for repeat and violent offenders (National Association of Drug Court Professionals, 1995).

Although drug courts feature a myriad of case-processing techniques, most allow only nonviolent offenders to participate in their programs. A review of several drug court programs nationwide found that the majority target offenders who do not have "serious" records (Cooper & Trotter, 1994; Cooper, 1997). Many drug court programs are considered diversionary programs where first-time and less serious offenders are actually diverted away from the correctional system into treatment. These individuals are given what could be considered a second chance; if the conditions of the drug court program are met, their charges will be dropped.

Violent offenders, on the other hand, are often treated differently because of the way in which they are perceived by the public, legislatures, and the criminal justice system. Since correctional systems attempt to protect society from potentially dangerous individuals, persons who have committed acts of violence are often punished more severely than are nonviolent offenders and typically sentenced to lengthier periods of incarceration. At the same time, it is important to recognize that increasing numbers of serious offenders are being sentenced directly to probation instead of receiving a prison term. Indeed, nearly three times as many violent offenders are placed under community supervision as are incarcerated in prisons (Petersilia 1995). Thus, there are many violent offenders currently in a position to continue offending.

Regardless of their correctional status, violent offenders are not frequently given opportunities for diversion or to participate in drug court programs (Belenko, 1998). The Violent Crime Control and Law Enforcement Act of 1994 authorized billions of dollars for anticrime programs with specific funds allotted for the implementation of drug court programs. However, eligibility criteria limited participation in these programs to nonviolent drug-involved offenders (those not charged with or convicted of offenses involving a weapon, or where death or serious bodily injury ensued, or force was used against another person), and "first-time"

drug offenders (having no prior convictions for felony crimes of violence) (Inciardi, McBride, & Rivers, 1996). Thus, money for drug court programs targeted first-time nonviolent offenders, rather than those with any previous history of violence or those charged with more serious crimes.

An additional problem associated with drug court eligibility concerns the definitions of violence being utilized across criminal justice jurisdictions. In some states, possession of a small amount of drugs may be considered a nonviolent misdemeanor, while possession of a larger amount of drugs is termed a violent felony. Thus, drug dealing is considered a violent offense, and as such, a drug dealer would be excluded from many drug court programs. Similarly, a first-time burglar (considered a violent offender in some jurisdictions) who stole to support a drug habit may be denied treatment due to his "violent" past.

There is also the question of using an offender's current offense as the criterion for admission to a drug court treatment program. Some programs do not look at an offender's record but only the immediate offense in deciding suitability for participation. However, the current offense may not be the best indicator of an offender's criminal history (Gossweiller & Martin, 1996).

Programs also may look only at any use of drugs as the criterion for admission into a drug court program rather than assessing the extent of the drug problem and the type of drug used. In addition, it is incorrectly assumed that 1) all offenders who have committed drug crimes are also drug users and 2) that all offenders with substance abuse problems will benefit from the same types of treatment. It may be important to consider individual characteristics and behaviors of offenders in determining treatment and rehabilitation options rather than identifying only the offense severity or the presence of drugs in a urine screening.

The decision to exclude drug-involved offenders with a history of violence from federal and many state funded drug court programs has been largely politically motivated. This is consistent with the "get tough" policies and the belief in "just desserts" for criminal offenders. Why should a violent offender be given another chance or even treatment? The issue is complex, yet little research has focused on characteristics of offenders, particularly with regard to their criminal background, and their suitability for, or success in, treatment-oriented drug courts.

It can be argued that violent offenders could benefit most from substance abuse treatment. If there is an association among drugs, crime, and violence (see, for example, Goldstein, 1995; Inciardi & Saum, 1996), then is it good policy to exclude drug-involved violent offenders from treatment? If the criminal act is related to drug use, then perhaps the violence will discontinue following the treatment for addiction, in turn benefitting society. An extensive study of drug treatment in corrections by the National Center on Addiction and Substance Abuse (CASA) reached the following conclusion about violent substance abusers:

While nonviolent drug and alcohol abusers are the likeliest candidates for prompt treatment, perhaps in lieu of incarceration, the revolution in our approach to substance-involved offenders must also engage violent offenders. While substance abusers who are convicted of violent offenses, often alcohol-related, should be incarcerated, treatment of the underlying alcohol or drug problem can reduce the chance of future violent crimes. It does not make sense to ignore the substance abuse problems of the violent criminal because most of them will be released from prison at some point (CASA, 1998, 210).

The study goes on to explain that an average state inmate convicted of robbery is released from prison after 4.3 years; of aggravated assault, 3.8 years; and of drug selling, after less than two years. This study also explains that it is older, more experienced offenders (as opposed to first-time offenders) for whom successful treatment can have the greatest impact on prison populations and crime. This is primarily because first-time offenders are generally not sentenced to prison (Belenko, 1998). Thus, it may be beneficial to both the offender and to society for drug-involved offenders, including those with substantial criminal justice histories and/or histories of violence, to be given the opportunity for treatment and a chance to break the drugs-crime-violence cycle.

Drug courts have been increasingly targeting chronic recidivists and those with more serious criminal histories who can benefit from the treatment and rehabilitation services and the rigid supervision and monitoring of the drug court (Peters, 1996; Belenko, 1998, 1999). Indeed, the 1997 Drug Court Survey Report which surveyed 93 drug courts across the United States, found that only 12% of the reporting programs limit participation eligibility to defendants with no prior criminal charges (Cooper, 1997). Nevertheless, the survey found that most programs still limit criminal history to nonviolent offenses. In addition, most programs report that they continue to terminate clients from treatment if they commit a violent offense while in drug court.

Drug courts are slowly beginning to expand their admission criteria to include more chronic and/or serious offenders for several reasons, including: 1) the recognition of the apparent futility of traditional probation and/or incarceration, which have already been imposed on many of these defendants and have failed to prevent drug use and crime, and 2) policy decisions to use the limited resources available to the drug court for persons with serious addiction problems rather than those with less severe problems who might be helped through other programs (Drug Court Clearinghouse, 1996, 1999). At the same time, drug court decision-makers continue to confront the difficulty of balancing the needs of treatment versus

corrections with few guidelines to aid them. Targeting offenders whose criminal histories suggest that their candidacy in a drug court would not pose a risk to public safety but whose substance abuse problems are suitable for the type of programs available is still a major challenge (Goldkamp, 1997; Peters & Murrin, 2000).

Research focusing on these and related issues could assist programming efforts and aid in targeting offenders who could benefit most from treatment-oriented drug courts. In fact, what types of offenders are successful in drug court and, specifically, whether drug court programs are appropriate for offenders who have a history of violence are questions which have not been sufficiently addressed in the available evaluative studies of drug courts.

The analysis presented here explores characteristics of drug court clients that may predict drug court program graduation. This research is a pilot study done in preparation for a larger project that will examine the influence of drug courts in motivating treatment retention and post-treatment success among drug-involved offenders. Demographic, drug use, treatment, and criminal history variables are examined as they relate to success or failure in drug court. The analyses focus on offenders' criminal histories so that we can begin to assess the impact of the inclusion of more serious, violent, and overall more complex offenders in drug court programs. Because this is an exploratory analysis, no hypotheses were generated with regard to the expected outcomes.

METHODOLOGY

SAMPLE AND DATA COLLECTION

The data for this project are based on the first 452 clients to enter Track I of Delaware's Superior Court Drug Court between October of 1993 and March of 1997. Track I is the track for probation violators, offenders on Superior Court probation when they are arrested for a new offense, typically a drug charge. The offender generally enters a guilty plea and is sentenced to participate in the drug court program. Delaware's Treatment AccesS Center (TASC) is responsible for program placement and monitoring of the drug court clients. Offenders may be sentenced to an in-prison treatment or work-release program, or they may receive treatment from a community treatment provider. Reduced periods of incarceration or probation are offered as incentives for client participation.

The Delaware Statistical Analysis Center (SAC) and Delaware TASC provided the original data for this analysis. TASC contributed the demographic, drug use, treatment, and drug court program outcome data, and the SAC gathered the criminal history data for most of the drug court clients in the sample.² The data were updated, cleaned, merged, and coded for the present analysis by the Center for Drug and Alcohol Studies at the University of Delaware (CDAS).

MEASUREMENT OF VARIABLES

The categories of independent variables contained in the analyses include: demographics (age, gender, race/ethnicity); drug use (crack use as primary or secondary drug-of-choice); substance abuse treatment (type and length of treatment during drug court) and criminal history (before drug court charges). The dependent variable used in this analysis is drug court treatment program outcome (graduation status-success/failure).

Table 1 displays the demographic characteristics of the sample. Client age ranges from 18 to 59 years, with a mean age of 29.8. The sample is over 3/4 male: there are 97 women and 355 men drug court clients. Information on race/ethnicity was coded into one of four categories: White (n=123), African-American (n=297), Hispanic (n=27), and Other (n=5). The last two categories are combined because of small numbers. For the dummy coding, African-American is the reference group.

There is little drug court outcome research available from which to provide rationale for the inclusion of the demographic predictor variables. As well, the correctional treatment literature often has conflicting findings regarding gender and race/ethnicity on outcomes. For example, some research finds that drug-using women offenders are multi-problemed and face multiple barriers to treatment retention and success (National Institute on Drug Abuse, 1999), possibly indicating better outcomes for men. Correctional treatment results and limited research on drug court programs suggest that White clients may have greater success rates than non-White clients (Schiff & Terry, 1997). Non-White offenders may face both cultural barriers and structural problems as drug court clients. Older drug-involved offenders have been found to be more successful in correctional treatment programs, including drug court treatment programs (Cooper, 1997; Peters & Murrin, 2000). Research has documented that as offenders mature, they are less likely to continue using drugs and less likely to recidivate than are younger offenders (Hirschi & Gottfredson, 1983).

The drug use variables, primary drug-of-choice and secondary drug-of-choice, were based on the client's self-reported drug use during an intake session at TASC shortly after admission to drug court. For the primary drug variable, data were recorded for eleven different drug types or categories. Table 1 indicates that the major substances of abuse were alcohol (21%), cannabis (15%), cocaine (16%), crack (18%), and opiates (24%). A secondary drug-of-choice was self-reported by 234 clients or 52% of the total sample.

For the analyses reported here, only the use or nonuse of crack was examined. There are several reasons for the examination of crack use in this study. First, the few available national studies have indicated that crack is the primary drug-of-choice for drug court participants (Drug Court Clearinghouse 1996, 1999). Second,

the only drug court study which has examined participant outcomes by type of drug use found that crack users compared with non crack users were the most likely to have unfavorable outcomes (Schiff & Terry 1997). This finding suggests that users of crack may have the most difficulty both in successfully completing a drug court program and in remaining crime free.

Researchers have determined that crack is particularly detrimental to its users. Because the effects of this drug are short lasting, users need to continually obtain the drug so that they can maintain its effects. And, even though one dose or rock of crack may be inexpensive, repeated use is not. For example, extremely poor crack-dependent women have been found to resort to the dangerous practice of trading sex for crack as the only viable means of continually accessing the drug (Inciardi, Lockwood, & Pottieger 1993). Indeed, crack users typically use the drug until their supply is gone, often binging on crack for days. Moreover, regardless of the way in which crack is acquired, it is always an illegal exchange. This means that most users have high visibility and thus increased chances for making contact with the criminal justice system. All of these correlates of crack use suggest obstacles with regard to treatment retention and indicate an increased likelihood of recidivism for crack users.

The two treatment variables included in this analysis are type of treatment and length of treatment during drug court participation. Whether a client received therapeutic community (TC) treatment (n=78) or non TC treatment (n=374) is examined. The length of treatment variable indicates the total number of days a client was in treatment, averaging over 1 year and ranging from 8 days to over 1,000 days. The log transformation of this variable was taken because of the extreme range of the measure.

The length of time a client participates in the drug court treatment program varies. Clients who are progressing in their program are likely to complete drug court in a relatively short period, typically 9 to 12 months. Clients who are terminated early include those who are not attending treatment or status hearings or have been incarcerated for serious crimes. The largest group, however, appears to be comprised of clients who are progressing slowly through drug court. These are clients who may miss court or counseling appointments or are having a difficult time staying drug free. Drug court clients in this situation can still successfully complete the program, but they will take longer to do so than those who continue to improve throughout the program. Thus, given these varied situations, it is difficult to predict how length of time in treatment would relate to drug court outcomes.

The type of treatment a client encounters while in drug court is extremely variable across drug court programs and can vary widely even within a single drug court track. There are different treatment modalities and a variety of treatment

TABLE 1

DELAWARE DRUG COURT TREATMENT PROGRAM

DEMOGRAPHIC CHARACTERISTICS OF SAMPLE (N=452)

	Number	Percent	
Gender			
Female	97	21.5	
Male	355	78.5	
Total	452	100.0	
Race/Ethnicity			
Black	297	65.7	
White	123	27.2	
Hispanic	27	6.0	
Other	5	1.1	
Total	452	100.0	
Primary Drug of Choice			
Alcohol	97	21.5	
Cannabis	66	14.6	
Cocaine	73	16.1	
Crack	80	17.7	
Opiates	107	23.7	
Other ^a	29	6.4	
Total	452	100.0	
Secondary Drug of Choice			
Alcohol	67	14.8	
Cannabis	59	13.1	
Cocaine	45	10.0	
Crack	32	7.1	
Opiates	15	3.3	
Other ^b	16	3.5	
None	218	48.2	
Total	452	100.0	
Age (average) 29.8 (range) 18-59			

^aOther includes amphetamines, barbiturates, LSD, and PCP.

programs clients may have experienced. Assignment to a particular program (e.g., outpatient or residential) depends on several factors, not necessarily related to severity of drug problem. Factors which affect placement include availability,

^bOther includes amphetamines, barbiturates, benzodiazepines,

PCP, and methadone.

proximity, and type of sentence. For example, if a client is required to spend part of a sentence incarcerated, he or she would likely attend a treatment program located within a prison.

Treatment received at one facility may have different requirements in terms of the number, type (group or individual), and content of the counseling/education sessions. Counselors' interaction styles vary greatly, as do the relationships that may form between the counselor and the client. Moreover, because clients are assessed to determine need and thus may require different levels of treatment, their individual treatment plans can vary widely. As a result of such variety of treatment experiences, it is difficult to sufficiently examine all of the treatment modalities or programs encountered as part of drug court for the clients in this study. Thus, the treatment received within the context of some drug court programs is truly a "black box." It is likely that the treatment experience is important, yet we know very little about its true impact.

One treatment modality, therapeutic community (TC) treatment, however, can be explored for purposes of the present analyses. This is because the treatment received within the context of a TC is believed to be somewhat uniform across different locations as compared with other treatment modalities. In Delaware, all TCs are managed by the same treatment provider and follow the same therapeutic principles. As will be described below, TC treatment differs from treatment delivered in a non-TC program. This difference allows for a comparison between clients who have encountered this modality and those who have not.

TCs are a treatment modality often utilized with criminal justice populations. These programs view substance abuse as one of many disorders of the person. Moreover, they are designed to be total treatment environments that aim to rehabilitate an offender using repetition, reinforcements and punishments (De Leon 1986). As clients progress, they gain increasing responsibility, whether it be in having some control over the operation of the TC or in obtaining permission to work outside of the facility. TC staff members are often former drug users who were resocialized in TCs and serve as role models for the participants. The overall goal for TC clients is a new, drug-free lifestyle, which is established through the modification of deviant behavior and the development of prosocial values.

In Delaware, TCs are corrections-based and exist both in prison and in community settings. Ideally, an offender would progress sequentially from a prison-based program to a transitional work-release center and would continue in an aftercare program while under the supervision of probation or parole. Delaware researchers have established that offenders who receive this three-stage continuum of TC treatment have had significant reductions in both relapse and recidivism (Martin, Butzin, Saum, & Inciardi, 1999).

The focus of the offenders' criminal history is the type and number of charges they have accumulated throughout their lives until the point of drug court entry. The 452 offenders totaled almost 18,000 charges in Delaware from as early as January 1964 through the time of drug court entry (between October 1993 and March 1997). For each arrest an offender often would have more than one criminal charge associated with that incident. For example, in the case of an arrest involving the writing of bad checks, there may be one arrest and several charges (e.g., coded as one forgery arrest with 10 counts or separate charges for the incident).

The offender's charges were coded into 7 categories and are displayed in Table 2. These categories were divided into 4 major offenses (Violent, Property, Public Order, Drug) and 3 minor offenses (Traffic; Court—violation of probation, capiases, etc.; and Other—juvenile offenses, conspiracy charges, and other miscellaneous offenses). The total number of lifetime charges for each drug court participant indicates the extent of an offender's previous criminal involvement. The data indicate that this variable ranges from 1 to over 300 previous charges. A log transformation of this variable was taken due to the large variable range.

The existence or nonexistence of a particular criminal history was measured. For example, a history of violence variable measures those who had no violent offenses in the past versus those who had one or more. This classification scheme reveals that approximately 3/4 of the clients had at least one violent offense in the past and over 80% of the clients had at least one property and one drug offense (see Table 2 for all offense categories). Interestingly, over 70% of the clients had at least one charge in all 7 offense categories over their lifetimes. Of the almost 18,000 combined total charges, over 40% consisted of court (25.2%) and property (21.3%) charges. Drug charges and violent charges made up 10% and 8% of the total, respectively. The data were also coded as to the relative severity of the client offenses. It was determined that approximately 26% of the charges amassed before drug court were classified as felonies, while the remaining 74% were classified as misdemeanors. For the analyses presented here, only history of violent and history of drug charges were examined.

Program outcomes for the drug court participants were as follows: success (31%), failure (44%), neutral (14%), suspended (9%) or active (1%). Successful clients were those who met all of the necessary requirements for graduation, such as attending court status hearings and completing all treatment criteria. Failed clients may have been terminated for reasons including rearrest, treatment refusal or drug relapse. Some examples of neutral classifications were clients who died or left before completion for medical reasons, clients who were reincarcerated on a separate charge, and clients whose charges resulted in a drug court sentence that was later revoked. Most clients who received a suspended classification were those

TABLE 2
DRUG COURT CLIENTS' CRIMINAL HISTORY: NUMBER, PERCENTAGE, AND RANGE OF
LIFETIME CHARGES AND NUMBER AND PERCENTAGE OF CLIENTS WITH CHARGES (N=452)

Offense Category	Total Number of Charges for all Clients	Percentage of Total Charges	Range	Number of Clients Ever Charged ^a (%)
Violent	1383	8.0	0 to 30	339 (75.9)
Property	3873	21.3	0 to 283	368 (81.4)
Public Order	2929	16.7	0 to 37	427 (94.7)
Drug	1871	10.3	0 to 28	377 (83.4 ^{b)}
Court	4577	25.2	0 to 42	428 (94.9)
Other	1169	6.4	0 to 20	339 (75.0)
Traffic	2170	12.0	0 to 39	317 (70.4)
Total	17,972	99.9°		

^a This is the number of clients who have had at least one lifetime charge in the category. Lifetime includes all pre-drug court charges through the date of drug court admission.

for whom a capias was issued for a separate charge. In that case, participants were considered to be current clients, although they were temporarily suspended from the drug court program. The active clients were those who had not yet been discharged from drug court, thus their outcome information was not currently available. Because we are comparing clients who succeeded in drug court (n=143) versus those who failed (n=201), the neutral, suspended and active clients were excluded from the analysis.

DATA ANALYSIS

This paper uses ordinary least squares (OLS) multivariate regression to examine factors that predict drug court treatment program outcome. Logistic regression analyses were done as a secondary analyses technique to verify the OLS procedures. Logistic regression typically is used to examine the ability of a model to predict

^b Although most clients enter drug court for violating probation with a drug offense, this is not always the case.

^c Percentages do not add up to 100 due to rounding.

characteristics of a population when the dependent variable is dichotomous (e.g., success or failure in drug court). However, statisticians and researchers have determined that OLS regression may be used instead of logistic regression when there is a dichotomous dependent variable that is not extremely skewed (Knoke, 1975), such as is the case in this analysis. OLS regression was the preferred statistical approach because this type of regression is considered to be the more robust procedure and can produce standardized coefficients and predicted probabilities.

A series of separate regression models were examined. Variables were entered into the equations in steps so that relationships between groups of variables could be examined. Demographic variables were entered first, followed by the substance use and criminal history variables. Several models were run at the second and third steps due to the inclusion or exclusion of the clients' criminal history variables. The types of charges (i.e., violent, drug) and the total charges were examined in separate models. At the third and final step, substance abuse treatment variables were added. The demographic variables were retained in all models as control variables.

RESULTS

A bivariate comparison of the independent variables by drug court program outcome is presented in Table 3. The comparison reveals that there were no statistically significant differences between the gender or race of the drug court clients in rates of success or failure. Age, however, was significantly related to outcome: older clients were more often successful in drug court than were younger clients. With regard to drug-of-choice, the use of crack was associated significantly with failure.³ Clients who had participated in TC treatment were not distinguished from non-TC participants, nor did length of time in the drug court program relate statistically to outcome. Data presented on the drug court clients' criminal history indicate that successful clients have less extensive criminal histories and are less likely to have violent pasts than failed clients. There were no differences regarding history of involvement in drug crimes and outcome.

The multivariate analyses indicate that there were several statistically significant predictors of drug court outcome. Of the demographic variables, the only variable to reach statistical significance was age at drug court entry. Older drug court clients were the most likely to graduate from drug court. Gender and race were not found to be significant predictors of drug court status. Crack use emerged as a significant effect, having a negative relationship with the outcome variable. Clients who specified crack as either their first or second drug-of-choice were more likely to fail drug court compared with clients who used other substances. The treatment variables, length of stay in treatment and type of treatment, were not

TABLE 3
OUTCOMES FOR DELAWARE DRUG COURT PARTICIPANTS BY DEMOGRAPHIC CHARACTERISTICS, DRUG USE, TREATMENT, AND CRIMINAL HISTORY

Independent Variables	Cuasas	a (n=142)	Failer	(m=201)	Total (n=2.44)
variables	N Succes	s (n=143) %	N	e (n=201) %	N	(n=344) %
Gender	11	70	11	70	11	70
Male	108	75.5	162	80.6	270	78.5
Female	35	24.5	39	19.4	74	21.5
Race						
White	44	30.8	50	24.9	94	27.3
Black	88	61.5	138	68.7	226	65.7
Hispanic/Other	11	7.7	13	6.5	24	7.0
Drug Use						
Crack User*	27	18.9	60	29.9	87	25.3
Non Crack User	116	81.1	141	70.1	257	74.7
Γreatment History						
TC	29	20.3	31	15.4	60	17.4
Non-TC	114	79.3	170	84.6	284	82.6
Criminal History						
(Pre-Drug Court)						
Any Violent Charges**	97	67.8	161	80.1	258	75.0
Any Drug Charges	122	85.3	172	85.6	294	85.5
Criminal History						
(mean # charges) Total Charges*		34.7		41.6		38.7
Total Violent Charges**						
		2.4		3.3		2.9
Total Drug Charges		4.3		4.2		4.2
Age (mean years)*		30.4		28.6		29.4
Length of Stay in Tx		591		602		597
(mean days)						

^{*}p<.05 **p<.01 ***p<.001

significantly related to drug court status, although the finding that TC assignment was positively related to graduation did approach significance.

The criminal background variables were examined in separate models. Client's previous number of drug charges did not predict their success or failure in drug

court. However, clients with a greater number of lifetime charges before drug court entry and clients with a history of violence before drug court entry were more likely to have unfavorable drug court outcomes compared with clients who had fewer lifetime charges and clients who had no history of violence.

A model was run that included both the total number of charges variable and the violent charge history variable. When entered simultaneously, only the relationship

Table 4

Regression Coefficients for Model Predicting Graduation From Drug Court (Standardized Coefficients in Parentheses)

Gender (female=0, male=1)	043
Gender (Temare–0, mare–1)	(036)
Race/ethnicity	(030)
White	.054
Willie	(.049)
	(.047)
Hispanic	.042
Thopame	(.022)
	()
Age (18-59)	.009
8-()	(.142)**
	,
Crack Use (no=0, yes=1)	167
` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	(147)**
Charge History	131
- log (1.10-5.77)	(183)**
Violent Charge History (no=0, yes =1)	050
	(044)
Length of Stay in Treatment	
- log (1.95-7.51)	.025
	(.044)
TC Treatment (no=0 yes=1)	.131
TC Treatment (no=0, yes=1)	
	(.101)
N	344
Constant	.504
R Square	.091

^{*}p<.05 **p<.01 ***p<.001

between total charge history and drug court outcome remained significant. This likely indicates that the violent history variable was a proxy measure for the extent of the client's criminal history. The existence of a violent charge appears to be another measure of a lengthy criminal past. In other words, a history of violence, in and of itself, does not predict drug court outcome.

The final model predicting drug court program outcome is presented in Table 4. Clients who are older, non-crack users, and have shorter overall criminal histories are significantly more likely to graduate from drug court. This model produced an R-Square result of .091 indicating that about 9% of the variance of the dependent variable was explained by the independent variables in the final equation. Thus, there are still many factors, not examined here, that are influential on clients' drug court outcome.

DISCUSSION AND CONCLUSIONS

The analyses presented here examined factors predicting drug court program outcome. Age (older), crack use (none) and criminal history (fewer lifetime charges) related to success in drug court. The relationship between previous history of violence and drug court outcome requires further exploration.

The finding that age was positively related to drug court outcome is supported by other research in this area. Several drug court studies have found older drug court clients to have succeeded at higher rates both in terms of graduation and subsequent recidivism than their younger counterparts (Peters & Murrin, 2000; Cooper, 1998; Belenko, 1999). As is seen with the aging out effect (see Hirschi & Gottfredson, 1983), aging drug court clients may be both ready to confront their addictions and ready to terminate their criminal careers. Both of these actions would no doubt promote the successful completion of substance abuse treatment as well as the successful completion of the drug court program.

Thus far, investigations have not been conclusive as to gender outcomes in drug court programs. Most studies have examined gender of drug court clients only through bivariate comparisons. Some national descriptions of drug court clients have depicted women as more successful in drug court, while others have described men as more successful (U.S. General Accounting Office, 1997; Drug Court Clearinghouse, 1999). One of the few studies to have employed multivariate analyses found no gender differences in terms of drug court outcomes (Schiff & Terry, 1997).

Race also had no apparent effect on drug court graduation. As with gender, racial correlates of drug court program successes and failures have been inconclusive due to limited research in the area. Belenko (1999), in his review of 30 drug courts, found conflicting results relating to drug court graduation rates and

race. Schiff and Terry (1997) found that nonwhites were less likely to graduate from the Florida drug court they evaluated. However, because only first-time drug possession offenders were eligible for that program, results are not entirely comparable.

Crack users were found to be more likely to fail the drug court program than were users of other drugs. This finding is supported by other drug court research suggesting that crack users may suffer more negative effects from their addictions than do users of other drugs (Schiff & Terry, 1997). Because crack users are typically enmeshed in a drugs-crime lifestyle, they may not be as successful in treatment or drug court as are noncrack users (Gfroerer & Brodsky, 1993). It is possible that judicial discretion may play a role in these negative outcomes as well. Judges may be less lenient with crack users if they perceive them to pose a greater threat to public safety.

The client's length of treatment did not appear to relate to drug court outcome. Length of stay in treatment has been found to be an indicator of treatment outcome (Martin et al., 1999), where longer time in treatment is related to treatment success. However, duration of drug court involvement and drug court outcome is not well understood (Peters & Murrin, 2000). Indeed, length of time in treatment within the context of a drug court program may be interpreted differently than would be length of time in other types of treatment. If a drug court client is not doing well in treatment, he may be sanctioned with a longer period of treatment or assigned to a different level of treatment (i.e., from outpatient to intensive outpatient or residential treatment). A client fitting this profile would be in treatment longer than a client who is doing well in the program. Thus, length of time in treatment appears to be a very complex variable within the area of drug court outcome research.

The other treatment factor examined here, TC or non-TC treatment, also requires further examination in future drug court studies. Treatment is a critical component of drug court programs. Thus, it would be beneficial to examine offenders' treatment experiences so that we can more comprehensively assess drug court process and outcome research. TC treatment programs are often intense and may take longer to complete than other types of treatment. Moreover, those clients assigned to a TC are likely to have the most severe drug problems, which may relate to a decreased likelihood of success.

The TC variable approached significance (p=.06), which could indicate that clients participating in therapeutic community (TC) treatment fare better in drug court than do clients who did not attend a TC. Future investigations could examine how the similar treatment philosophies of both TCs and of drug court models, such as the use of rewards and punishments, may interact to successfully promote the goals of drug courts. Research has also shown that TC treatment experienced in a

continuum generates the most promising results (Martin et al., 1999). It would be advisable to examine how drug court treatment programs fit into this continuum.

Analyses revealed that the number of drug charges in the clients' criminal past had no effect on drug court outcome. This may indicate that offenders' drug use gets them in trouble with the law in a variety of ways, not limited to being charged with drug offenses. The fact that an offender commits a drug offense may not give us a good indication of his or her past or future crime involvement. And, of course, since this sample of offenders consists of all drug court clients, most have committed at least one drug charge in their lifetimes. Perhaps there is not enough variation within the sample in terms of drug charge history to provide a meaningful analysis.

Clients having a greater total number of pre-drug court charges were the most likely to have unfavorable drug court outcomes. Lengthy histories of criminal charges can relate to drug court experiences in several ways. Clients who have had long careers as criminals may continue their criminal lifestyles even during participation in drug court. The commission of new crimes while in drug court is a potential reason for termination from the program. Relatedly, the drug court judge may be less inclined to give a client another chance while in the drug court program if the client has already failed the system a number of times. Extended criminal histories may be the result of serious drug addictions that were not overcome through the treatment delivered within the context of the drug court program.

This finding coincides with research suggesting that offenders who have long criminal histories are often involved in a drugs-crime lifestyle that is difficult to break or from which to recover (Kouri, Pope, Jr., Powell, Oliva, & Campbell, 1997). Even if a client was beginning to benefit from the treatment offered in the drug court program, he or she may not have been able to secure employment due to a lengthy criminal record. This client may continue to commit crimes for personal and/or familial support, and these continuing criminal activities could result in new charges and possible dismissal from drug court.

Whether history of violence relates to drug court outcome is debatable. On one level, it appears that drug court clients who had obtained at least one violent charge before entering drug court were more likely to fail the program than those clients who had never been charged with a violent act. However, the relationship between violent history and drug court outcome disappears when controlling for total criminal history.

Subgroup analyses determined that clients with extended criminal histories are likely to have committed at least one violent charge in their lifetimes. In addition, the data indicate that violent offenders amassed significantly greater numbers of charges in their criminal histories compared with nonviolent offenders. Violent offenders were also more likely to be male, black, younger, and crack users than

were nonviolent offenders. Some of these variable were also found to be significantly and positively correlated with drug court failure.

It appears that it would be more advisable to look at the extent of offenders' charges and the type and/or seriousness of the substance abuse problem rather than whether there is any history of violence when selecting candidates for drug court. Perhaps offenders who have long histories of crime and drug use should be supervised more strictly in their drug court programs. This could include being placed in more intensive treatment programs and being required to meet more regularly with probation officers and the drug court judge for program status updates. Special drug court tracks or programs could be developed to target these more serious and repeat offenders. Although these specialized programs would be more expensive than standard diversion or other programs dealing with less serious drug and crime-involved offenders, in the long run, the savings could be great if the more problematic offenders were rehabilitated.

Because drug courts combine judicial and therapeutic methods to deal with drug-using offenders, the drug court model may be our best tool for managing the more serious offenders who may face the greatest barriers to successful outcomes. In targeting these more serious offenders, we risk being less successful in terms of treatment or drug court program outcomes (Gebelein, 2000). However, at the same time, we are challenging traditional methods and moving closer to a more realistic solution to the revolving door of justice for drug-involved offenders.

Recidivism data are currently being collected and coded on all of the clients in this study. During and after drug court arrests, charges, and incarcerations will be examined. It will be interesting to see how violent offenders fare after being discharged from drug court. This type of research will shed light on whether current drug court programs are equipped to handle the more serious offenders who are beginning to inundate our nation's drug courts. Such information could also be beneficial in planning the new Re-Entry Drug Courts which are slated to provide treatment and services for the more heavily drug and crime-involved criminal justice offenders as they are reintegrated back into the community (National Drug Court Institute, 1999).

Notes

- ¹ Track II is the diversionary track for first-time drug offenders. Clients in this track are able to retain their driver's licenses and have their drug charge revoked upon successful completion of the program.
- ² The first author also compiled criminal history data from the Delaware Criminal Justice Information System for clients who were missing this information in the original data file.
- ³ Of the other drug-of-choice variables, only the use of powder cocaine was significantly related to outcome. In opposition to the findings indicating that crack use was associated with drug court failure, the use of powder cocaine was associated with drug court graduation.

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