



FONTANA DRUG COURT Progress and Preliminary Evaluation Report

Reporting period:
July 2003 to December 2003
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Introduction and Background

According to the U.S. Department of Justice (1997), if nonviolent, substance-abusing offenders are going to ever change their behavior, the criminal justice system has to catch their attention. In an effort to do this, the Federal government began seven years ago to fund Drug Courts across the country as a way to rehabilitate addicted offenders through the criminal justice system. One such Drug Court was established in Fontana, a city in San Bernardino County, California, with funding from the U.S. Department of Justice. As part of the grant requirements, San Bernardino County must provide an evaluation of the Drug Courts and the impact on the clients who participate in the program. The County has contracted with Claremont Graduate University to evaluate the effectiveness of the Fontana Drug Court (FDC) over the granting period. This report summarizes evaluation findings and progress from the period of July 2003 to December 2003.

Drug Courts are a mechanism for providing long-term court supervised treatment to nonviolent offenders with drug problems, and a review of both published and unpublished evaluations of the drug courts suggests that they are effective in treating drug problems and preventing recidivism among participants (Blenko, 2001). According to the Office of Justice Programs (1997) drug courts offer a choice for individuals whose criminal justice involvement stems from alcohol and other drug problems – participation in treatment. The Drug Court combines intensive judicial supervision, mandatory drug testing, escalating sanctions, and treatment to assist substance-abusing offenders to break the cycle of addiction, and includes participation from a judge, prosecutors, defense attorneys, probation officers, and drug treatment specialists.

The Drug Court provides a court supervised, comprehensive alcohol and drug treatment system for nonviolent offenders in Fontana, California. As part of the Drug Court treatment, participants engage in a five phase, highly structured outpatient program lasting a minimum of one year with a six-month continuing care component. Each phase takes thirteen weeks, and focuses on detoxification, recovery education, stabilization, cognitive skills/reasoning, relapse prevention, parenting, anger management, vocational counseling, residential care (if needed), gender specific groups, and continuing care and transition. Additionally, this Drug Court has been implemented based on the ten key components of a drug court.

A screening process conducted by the Judge, District Attorney, Public Defender, treatment staff, and Probation Officer will determine eligibility of Drug Court clients. Clients will be selected on a case-by-case basis depending on space (60 clients at any given time), appropriateness for program, and likelihood of success in the treatment program. Clients will be adult men and women who have been convicted of a drug felony or misdemeanor charges, and priority will be given to pregnant women, and to parents. Participants are not compensated for participating in Drug Court -- it is considered to be a preferred alternative to the jail sentence most would receive. Participants pay a \$15/week fee to take part in Drug Court program.

For clients to be admitted into the Drug Court program, they must acknowledge the drug addiction, or evidence can be shown through a prior drug record. Individuals with current charges of petty theft, probation violation, commercial burglary, and check fraud may be eligible if addiction issues are evident. Clients cannot have a history of violence, acute mental illness or a current gang affiliation, and sexual or violent offenders are not eligible for the Drug Court.

Current Report

This report for the Fontana Drug Court will summarize progress and preliminary evaluation findings from July 2003 to December 2003. The first section will outline program goals and progress toward those goals, and the last section will summarize progress and accomplishments in all program and evaluation areas.

1. Program Goals and Progress:

Goal: To implement a model program that provides comprehensive treatment services to 200 Fontana drug and alcohol drug court clients over three years.

Progress: The Fontana Drug Court Team (FDCT) continues to target long-term addicts that are most in need of an intensive level of treatment, have no prior violent criminal or sex offense history, have a current drug or drug-driven offense, and are not currently affiliated with gangs. The Fontana Drug Court began reviewing cases in December of 2002, and accepted their first client on December 16th, 2002.

As of December 31, 2003, the Fontana Drug Court has screened a total of 144 potential clients, and to date, have 21 active clients in treatment. A total of forty-two clients have been accepted into Drug Court since December 2002, however, 11 clients have become inactive for the reasons such as being transferred into a nearby Drug Court, absconding, being sent to prison, or being transferred into a different treatment program, and 10 have been discharged from the program. Eighty clients have been screened and determined not to be eligible for Drug Court, for reasons including past gang activity, history of violent behavior, manufacturing, Proposition 36 eligibility and prior weapons charges. Appendix A provides a summary of all referral statistics and a demographic breakdown of the clients who have been screened.

The Drug Court program is made up of a series of Phases (see table below), with the completion of Phase 4 resulting in a graduation from Drug Court and the beginning of aftercare. A graduation May 2004 is being planned, as two clients are currently in Phase 4, which lasts 13 weeks. Table 2 outlines the number of clients currently in each Phase.

Table 1: Program Phases

<u>Phase I</u>	<u>Phase II</u>	<u>Phase III</u>	<u>Phase IV</u>	<u>Phase V</u>
<p><u>LENGTH 13 WEEKS</u></p> <ul style="list-style-type: none"> Attendance at the structured program activities daily Monday through Friday. Average group length 1.5hrs Regular attendance at 12 Step meetings or other recovery conducive group Urinalysis testing (3 X per week minimum) Recreation/ Fellowship Weekly court appearances Assessment, Physical, individual counseling \$15 weekly fee 	<p><u>Length 13 Weeks</u></p> <ul style="list-style-type: none"> Attendance at the structured program activities (4 X per week) Vocational educational counseling Drug testing (2-3 X per week) Continued attendance in 12 Step meetings or other recovery conducive groups (3 X per week). Recreation and fellowship Weekly or bi-weekly court appearances Individual counseling Special focus groups \$15 weekly fee 	<p><u>Length 13 Weeks</u></p> <ul style="list-style-type: none"> Attendance at structured program activities (3 X per week). Drug testing on random basis (minimum 2x's a week). Continual attendance at 12 Step meetings or other recovery conducive groups (3 X per week). Recreation/ fellowship. Stable living arrangements. Greater emphasis on educational/vocational plans. Court appearance every 3-5 weeks \$15 weekly fee 	<p><u>Length 13 Weeks</u></p> <ul style="list-style-type: none"> Attendance at the structured program activities (twice per week). Drug testing on a random basis. (Minimum 1 X week) Recreation and fellowship. Continued attendance at 12 Step meetings or other recovery conducive group (3 X per week). Court appearances every 4 – 6 weeks \$15 weekly fee Employment or education enrollment 	<p><u>Length 6 Months</u></p> <ul style="list-style-type: none"> Continuing care groups every other week \$15 fee for every session Random Drug Testing Continued AA/NA attendance Employment, school or vocational training Continued probation supervision for 6 month post graduation

Table 2: Clients in each Phase

	Frequency and Percentages	
N = 21	N	%
Phase 1	10	47.5%
Phase 2	7	33.3%
Phase 3	2	9.6%
Phase 4	2	9.6%

The Fontana Drug Court is working hard to target participants most in need of treatment, that are eligible, and who will benefit from treatment. Below is a breakdown of the demographics and history of the clients who have entered Drug Court to date. (Note: these data include participants not currently active in the Drug Court program).

Table 3. Client Demographic Information

N = 42	Frequency and Percentages	
Gender	N	%
Male	27	64.3%
Female	15	35.7%
Ethnicity	N	%
White	18	42.9%
Black/African American	12	28.6%
Hispanic/Latino	11	26.2%
American Indian	1	2.4%
Education at Intake (Degree)		
No degree	22	52.4%
GED	4	9.5%
High school diploma	11	26.2%
Associate's degree	3	7.1%
Bachelor's degree	1	2.4%
Missing	1	2.4%
Employment Status at Intake		
Employed Full Time (35+ hours/week)	2	4.8%
Employed Part Time (< 35 hours/week)	1	2.3%
Unemployed (Looking for work)	26	61.9%
Unemployed (Not looking for work)	2	4.8%
Not in Labor Force	6	14.3%
Disabled	2	4.8%
Other employment	1	2.3%
Missing	2	4.8%
Public Assistance		
Yes	9	21.4%
No	33	78.6%

Housing Situation at Intake		
Own/Rent House or Apartment	9	21.4%
Sober living	1	2.4%
Staying with Friend or Relative	18	42.8%
Jail	13	31.0%
Missing	1	2.4%
Age		
Range	21 to 52 years old	
Mean	35.36	
Standard Deviation	8.49	

Treatment and Addiction History

The Fontana Drug Court (FDC) continues to meet its objectives of giving all clients an ASI (Addiction Severity Index; See Appendix C for the ASI scores of the clients) assessment, a treatment plan, and a level of care determination. Additionally, all clients participate in group therapy sessions and are randomly drug tested a minimum of three times a week. The treatment provider, Mental Health Systems, Inc., adopted a new curriculum during this reporting period, which is viewed as an improvement from the previous curriculum as it is geared toward both addictive and criminal behaviors and cognition.

Table 4 includes a breakdown of client's treatment history and drug problems. Twenty-four clients (57.1%) reported having some type of treatment for drug or alcohol problems in the past, with 16 (38.0%) reporting one episode, five (11.9%) reporting two episodes, and one client (2.4%) reporting three episodes, and 42.9% reporting no prior treatment episodes. As expected, all clients reported at least one problem drug (100%), with 66.7% (N=28) reporting a problem with two drugs, and 33.3% (N=14) reporting a problem with three drugs. Similar to the last reporting period, the majority of clients have reported Amphetamines/Methamphetamine (Amp/Meth) as their first problem drug (71.4%), followed by cocaine (16.6%), cannabinoids (4.8%), and lastly, alcohol (2.4%), a new category this period (4.8% was missing data). Smoking was reported as the most frequent route of admission for the first problem drug (83.2%), followed by oral (2.4%) with injection and inhalation/snorting admission tying as the least frequent (4.8% for both; 4.8% is missing data). Clients reported an average of 11.5 years of problem drug use with the first problem drug, with a range of 1 to 30 years of problem use. The average age of first use is 21.6 years old, with clients reporting a range of first use from 13- to 40years old. Statistics on the client's second and third problem drugs are reported in the table below.

Table 4. Treatment History and Drug Problem Statistics

Had treatment in the past?	N	%
Yes	24	57.1%
No	18	42.9%
Number of Drug Problems		
Number with Two Problem Drug Addictions	28	66.7%
Number with Three Problem Drug Addictions	14	33.3%
<u>First Problem Drug</u>		
	N = 42	
Amp / Meth	30	71.4%
Cocaine	7	16.6%
Cannabinoids	2	4.8%
Alcohol	1	2.4%
Missing	2	4.8%
Route of Admission		
Smoking	35	83.2%
Oral	1	2.4%
Inhalation/Snort	2	4.8%
Injection	2	4.8%
Missing	2	4.8%
Years of Problem Use		
Range	1 to 30 years	
Mean	11.5 years	
Standard Deviation	6.8	
Age of First Use		
Range	13 to 40 years old	
Mean	21.6 years old	
Standard Deviation	7.52	

<u>Second Problem Drug*</u>	N = 28	
Alcohol	17	47.2%
Cannabinoids	16	44.5 %
Cocaine	3	8.3%
Route of Admission		
Oral	17	47.2%
Smoking	18	50.0%
Injection	1	2.8%
Years of Problem Use		
Range	1 to 45 years	
Mean	16.86	
Standard Deviation	9.41	
Age of First Use		
Range	5 to 23 years old	
Mean	15.43	
Standard Deviation	3.82	
<u>Third Problem Drug*</u>	N = 14	
Alcohol	7	50.0%
Cannabinoids	5	35.7%
Amp/Meth	1	7.1%
Cocaine	1	7.1%
Route of Admission		
Oral	6	42.9%
Smoking	7	50.0%
Missing	1	7.1%
Years of Problem Use		
Range	6 to 21 years	
Mean	14.07	
Standard Deviation	5.39	

Age of First Use	
Range	13 to 25 years old
Mean	15.43
Standard Deviation	3.82

*Percentages are based on only those who reported 2 or 3 problem drugs.

Goal: To reduce recidivism and substance abuse among clients through the outpatient drug court program.

Progress: Since the beginning of the program, the Drug Court has administered a total of 1,351 drug tests, 1,231 of which have been negative (91.1%), and 120 of which were positive (8.9%). This is an increase in negative tests from last reporting period, where 85.6% of the tests came back clean, and is a good indication of the progress the team is making in reducing substance abuse among their clients. In total, 26 out of the 42 clients (61.9%) who have been active in Drug Court have tested dirty at least once during the program. As another indication of progress toward this goal, the Drug Court clients have accumulated 5,657 clean and sober days at the time of this report, the equivalent of 15.5 years.

At this time, no clients have completed the program and thus no criminal recidivism data are available. Presently, no clients have been arrested while in the program.

Goal: Improve Family/Social functioning within the community by improving level of employment, involvement in the community and family involved clean and sober activities.

Progress: Improving client's employment situation is of great importance to the FDCT, and the program's objective is to increase employment rates by 50% upon graduation as compared to admission into the program. Client progress towards securing work is closely monitored by the team, and is addressed with each client every week in court by the Judge. Treatment in particular works closely with clients to identify and secure employment. A staff member works closely with clients on issues of employment and education, and has developed and compiled a curriculum for clients surrounding these issues, has developed relationships with community resources (i.e. local employers, adult schools, colleges, libraries), and conducts daily job/education groups using the curriculum. Additionally, the staff member continues to meet with clients once a week to discuss their progress/issues with their job/education processes, and monitors these processes with job search logs, attendance sheets, paycheck stubs, and verification of employment. Clients also are involved in role-playing activities to assist them in the process of interviewing for jobs, and they receive tips on how to conduct themselves during the interviews, for example, how to dress appropriately.

Treatment has made great progress in finding leads for jobs, and currently 17 clients have secured some type of employment during the program. As outlined in the demographic table, only three clients had part- or full-time employment when they entered the program. The FDCT continues to be successful in improving their client's levels of employment, along with their readiness to successfully search and interview for different positions.

Increasing client’s participation in community and family activities is also an important outcome for the Drug Court. During this reporting period, clients, many of their children, and treatment staff volunteered at a local Salvation Army where they hung clothes and completed other service work. Additionally, clients and their families took part in a Recovery Happens Walk and Celebration which included featured speakers, activities, vendor displays, and live music, all in an effort to celebrate the people in their communities who have been successful in recovering their lives from chemical dependency. Lastly, clients, treatment staff, and the client’s children were involved in a day where clients made sobriety data Christmas ornaments that decorated the treatment office over the holiday period, and the treatment facility has continued to have recreational nights for clients and their family members to watch movies.

In an effort to track changes in community and family activities, a measure is administered to clients at intake and at program graduation to assess their levels of community involvement before the Program and after. The Drug Court has an objective of increasing the level of community involvement through community service, attendance at community functions and/or school functions by 30% as compared to community involvement upon entry into program. To date, the majority of clients have reported very low levels of involvement (between 0 and 5 times per year) in school, community, community service and family activities at intake (80.8%, 77.0%, 80.8%, and 42.3%, respectively), and as mentioned, this involvement is expected to grow as a result of their treatment. It is anticipated that the next report will include both pre- and post-measures on this instrument. Below is a summary of the community involvement data that has been collected thus far, which includes only intake data.

Table 5. Community Involvement

N = 26	None	1-5 times per year	6 –10 times per year	11-20 times per year	Over 20 times per year	Missing Data
Involvement in School Activities (e.g. parent/teacher conferences, volunteering in classroom, school plays)	10 (38.5%)	11 (42.3%)	2 (7.7%)	0	3 (11.5%)	0
Involvement in Community Events (e.g. festivals, parades, community forums)	8 (30.7%)	12 (46.2%)	2 (7.7%)	2 (7.7%)	2 (7.7%)	0
Participation in Community Service (e.g. volunteering, mentoring, neighborhood watch)	15 (57.7%)	6 (23.1%)	1 (3.8%)	1 (3.8%)	2 (7.7%)	1 (3.8%)
Participation in Family Activities (e.g. picnics, attending church together, movies)	5 (19.2%)	6 (23.1%)	6 (23.1%)	0	9 (34.6%)	0

Goal: To develop a strategy that will identify needed resources, which will institutionalize the Fontana Drug Court program as a permanent fixture within the San Bernardino Drug Court System.

Progress: To date, the FDCT has been working at the development of relationships with community organizations such as the Chamber of Commerce and Kiwanis's Club. The FDCT also plans to increase the resources they have and to become more active and known in the community, an area that they are continuing to focus and build on. To help in this effort, a public forum is being planned for May, which will introduce the program to community members, local agencies, and members of the press. An open house at the treatment center is also being planned for the next quarter. Lastly, fundraising efforts are also being planned for the near future, and will be included in next reporting period.

Goal: To implement an effective MIS program that will measure recidivism and substance abuse and provide the necessary data to the evaluator regarding those clients who participate in the Fontana Drug Court Program.

Progress: The PHASES data collection system was implemented early on in the program and collects the majority of data on client demographics, recidivism, and substance use. Treatment staff has been successful in entering all client data, and exporting the data to the evaluator when requested.

Goal: To establish coordination among the entities that will be involved in treatment component and evaluation component in order to effectively evaluate the Fontana Drug Court Program.

Progress: As reported last period, the FDCT has continued to meet monthly to discuss all treatment and evaluation issues. (These meetings involve the judge, a representative from the police department, district attorney, public defender, probation, treatment, the Treatment Court Administrator, and the evaluator. A smaller group meets weekly for court and case conferencing). The Team has had input on measures that will be implemented in the evaluation, and have been given opportunities to give feedback on them. This report is circulated to the entire team, and is used to inform the work they are conducting.

Goal: To provide an evaluation of the Fontana Drug Court Program to the community, and the county stakeholders. This evaluation will be used to secure long-term funding and lead to institutionalization of the Fontana Drug Court Program.

Progress: All evaluation data and results will be shared with stakeholders, the community, and other relevant parties. This data will be used in the FDCT's strategy to secure additional funding.

Evaluation Progress

The process and outcome evaluation is making significant progress. The treatment provider continues to collect and enter all of the client data, and there have been no obstacles to collecting the information needed to conduct this evaluation. The team also continues to identify clients who will be part of the comparison group once this phase in the program is reached, and probation has been diligent in collecting demographic and other information that will be needed to track the comparison clients.

Other Noteworthy Activities and Events:

- The Drug Court Coordinator has continued to search for new funding opportunities with SAMSHA and other relevant granting agencies.
- Hon. Douglas Elwell has taken over as the Fontana Drug Court judge during this past reporting period. Judge Elwell has been involved with the Drug Courts since 1996 in Redlands, CA, and has been involved with various trainings and conferences related to the Drug Court, and thus brings with him ample knowledge and experience. Judge Elwell is a much-welcomed addition to the team, and is clearly well respected by both his colleagues and the clients.
- The treatment provider is currently going through the process of Medi-Cal certification, which will allow clients who qualify to have their treatment expenses covered.

Conclusion

This report highlights the accomplishments, evaluation findings, and progress of the Fontana Drug Court for the period of July 2003 to December 2003. This report is requirement of the granter, however it also provides an opportunity for the DCT to reflect on its progress to date. Through the use of such findings, the Drug Court program will be continually improved upon, which benefits not only the clients who are overcoming drug addiction, but also their families, friends, and the communities that they live in.

**Appendix A:
Referral and Screening Statistics for Fontana Drug Court**

Total of clients have been screened:

Out of the 144:

- 80 have been found not eligible for drug court
 - Reasons for ineligibility:
 - History or active gang membership
 - History of or current violent behavior
 - Manufacturing
 - Firearms
 - Eligible for prop 36
- 60 were found eligible for drug court
 - 48 of the 60 accepted drug court
 - 10 of the 60 found eligible did not accept
 - 1 out of the 60 opted out
 - 1 out of the 60 had missing data
- 4 did not have eligibility information

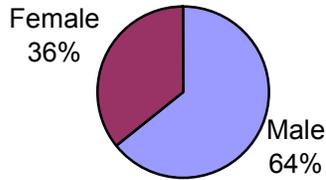
Demographics of Referrals*

N = 144	Frequency and Percentages
Gender	
Male	98 (68.1%)
Female	35 (24.3%)
Not reported	11 (7.6%)
Ethnicity	
White	37 (25.7%)
Black/African American	47 (32.6%)
Hispanic/Latino	38 (26.4%)
American Indian	1 (0.7%)
Not reported	21 (14.6)
Age	
Range	19 to 61 years old
Mean	34.48
Standard Deviation	9.63
Not reported	24

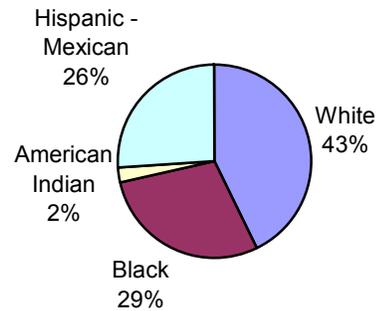
*Includes clients who are active clients in Drug Court.

Appendix B: Client Demographic Graphs

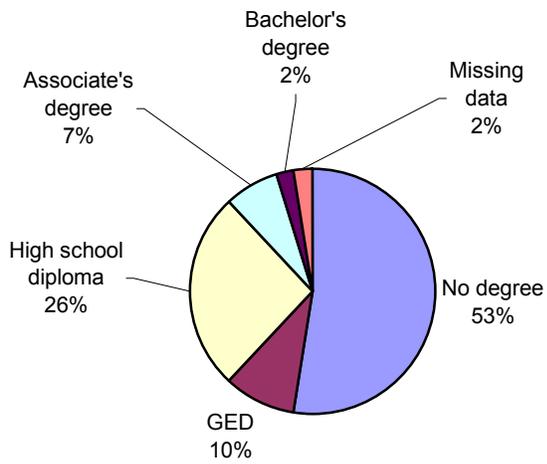
Gender



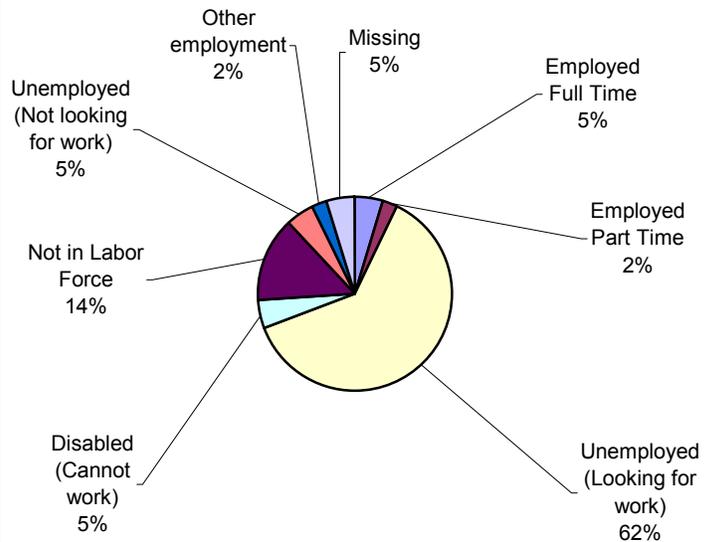
Ethnicity



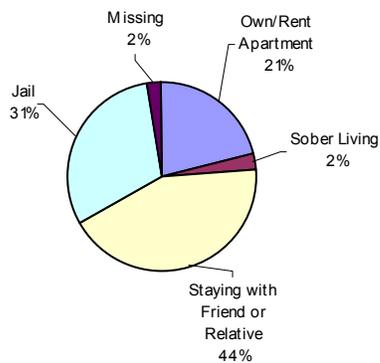
Education at Intake



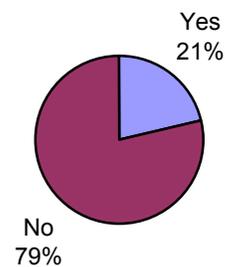
Employment at Intake



Housing Situation at Intake



Public Assistance



Appendix C: Client ASI Scores

N = 31

PROBLEMS:	Medical	Job/ Education	Alcohol	Drugs	Legal	Family/ Social Relationships	Psychiatric Status
Range	0 – 5	0 - 6	0 - 7	4 – 7	3 – 7	0 – 7	0 - 7
Mean	1.42	3.61	5.23	6.42	5.00	4.06	2.13
S.D.	2.03	1.82	2.46	0.89	1.00	1.50	2.06

ASI Score Range:

- 0–1 No real problem, treatment not indicated
- 2–3 Slight problem, treatment probably not necessary
- 4–5 Moderate problem, some treatment indicated
- 6–7 Considerable problem, treatment necessary
- 8–9 Extreme problem, treatment absolutely necessary

References

Blenko, S. (2001). Research on Drug Courts: A critical review, 2001 Update. The National Center on Addiction and Substance Abuse at Columbia University, New York, NY.

United States Department of Justice (1997). Defining Drug Courts: The key components, Office of Justice Programs, Washington, D. C.