Implementing Research Based Best Practices in Your Drug and DWI Court

Shannon Carey, Ph.D.

How are DWI court participants and adult drug court participants different?

Who do these programs work for?

How do we implement evidence based practices and best practices in adult drug and DWI courts?

Overview

How are DWI offenders different from other drug offenders?

➢ DWI offenders engage in behavior that is dangerous and frequently causes serious injury or fatalities.

➢ Every day, almost 30 people in the United States die in alcohol-related vehicle crashes—that's one person every 48 minutes.

https://www.nhtsa.gov/risky-driving/drunk-driving

3

Drunk-driving crashes claim more than 10,000 lives per year.

Deaths and damages contribute to a cost of $44B per year.

# How are DWI offenders different from drug offenders?

- Drinking alcohol is not illegal, is highly prevalent, and is even encouraged in many every day activities.

- DWI offenders are more likely to be high functioning in other areas of their lives. (Many alcoholics still get up every morning and go to work and take care of their children.)

- DWI offenders don't always show up as high risk on risk assessments standardized on the typical criminal justice population.
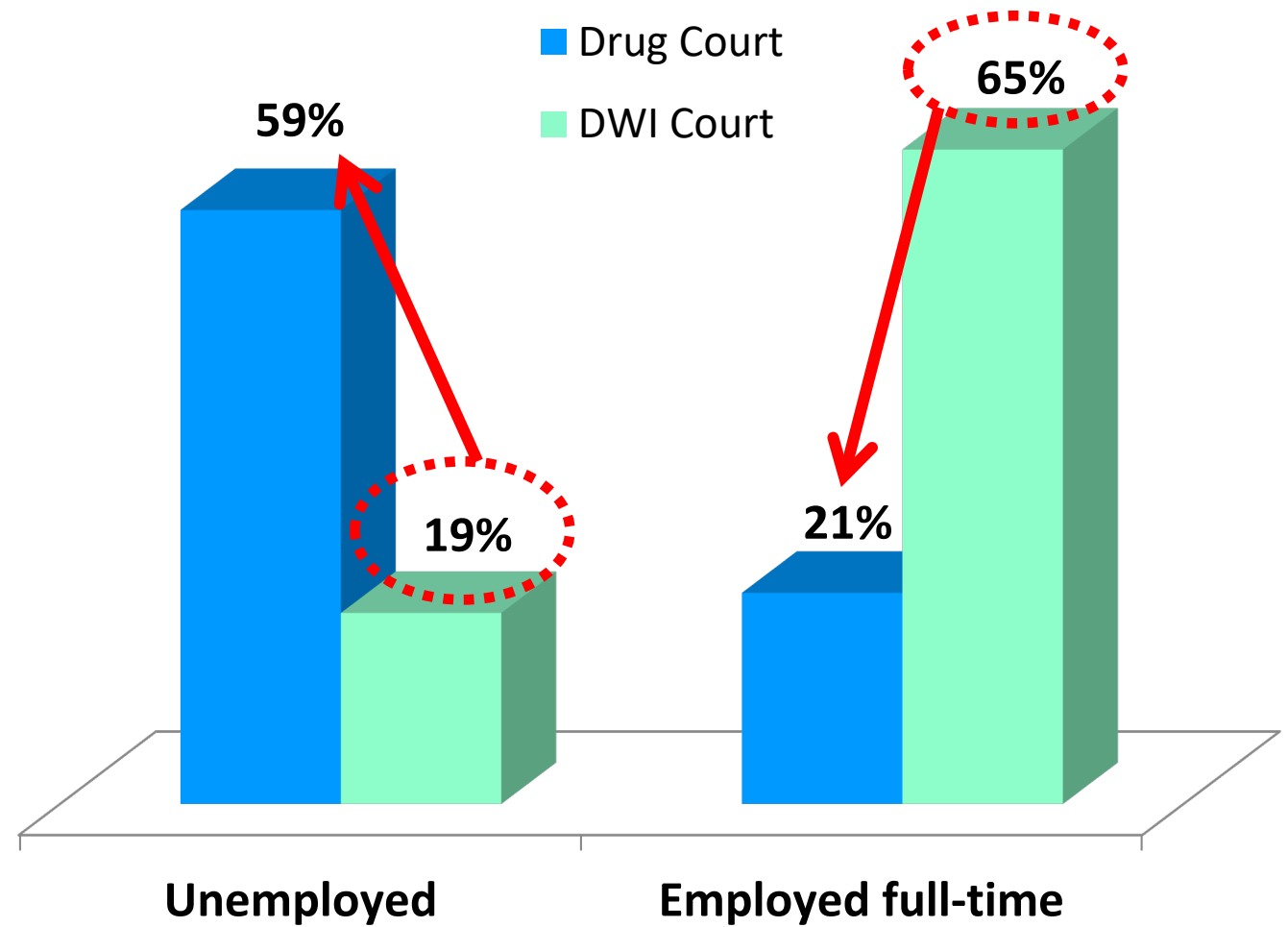
How DWI offenders different from drug offenders?

Evidence

- ❑ Statewide study in Colorado

- ❑ Compared ADC participants and DWI participants
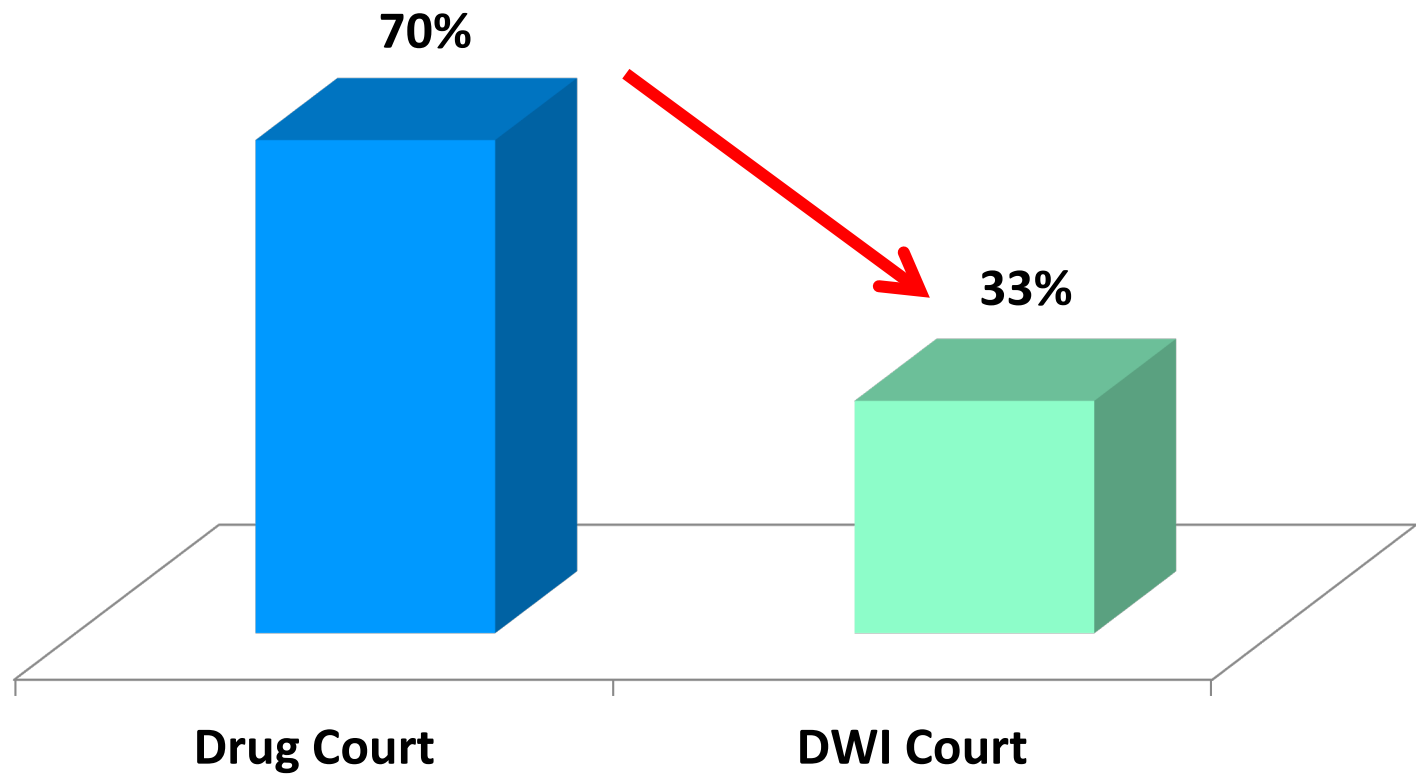
DWI offenders are more likely to have higher education

29%

15%

12%

4%

Drug Court
DWI Court

Less than 12th grade

College Graduate

Colorado Study

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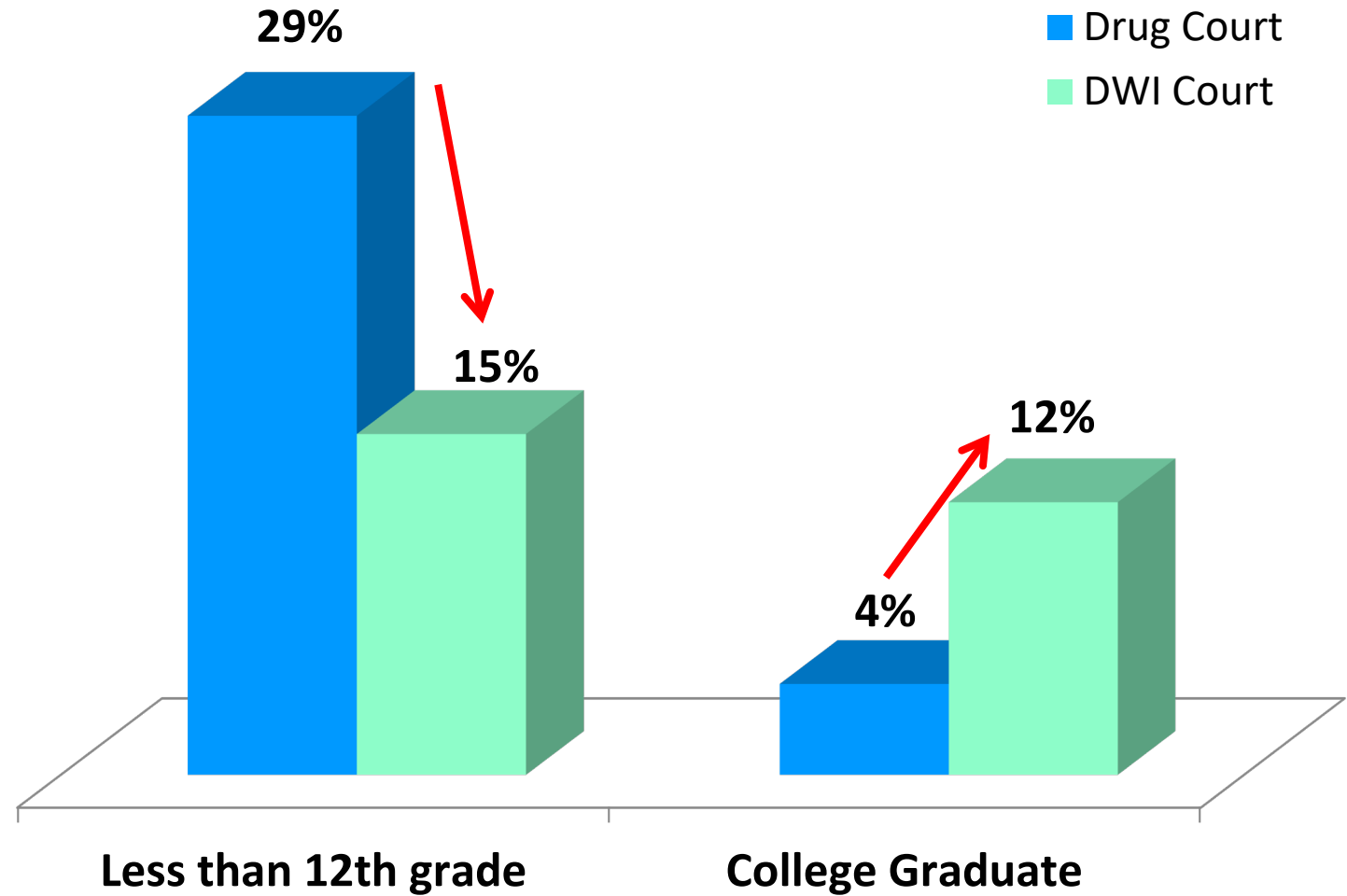
DWI offenders are less likely to score as high risk

Scored at medium to high risk (LSI)

70%

33%

Drug Court

DWI Court

Colorado Study

PREDICTORS OF RISK

Central 8

Risk Factors for new criminal arrest

1. Criminal History
2. Antisocial Attitudes
3. Antisocial Personality
4. Peer Associations
5. School/Employment
6. Substance Abuse
7. Living Situation
8. Family/Marital

Risk Factors for new DWI

1. DWI History
2. Antisocial Attitudes
3. Antisocial Personality
4. Peer Associations
5. School/Employment
6. Substance Abuse
7. Living Situation
8. Family/Marital
9. BAC Level
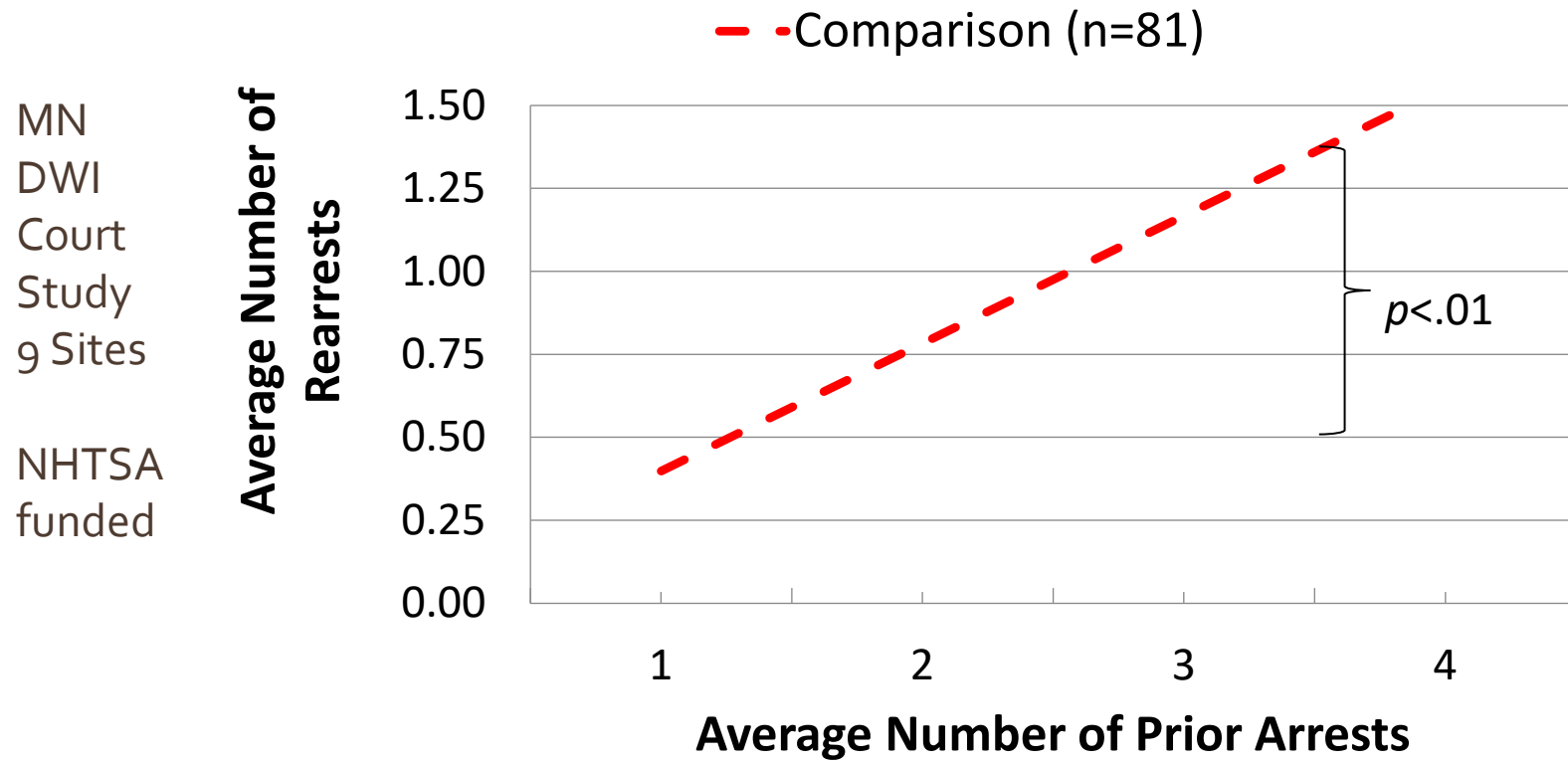10. Traffic Violations

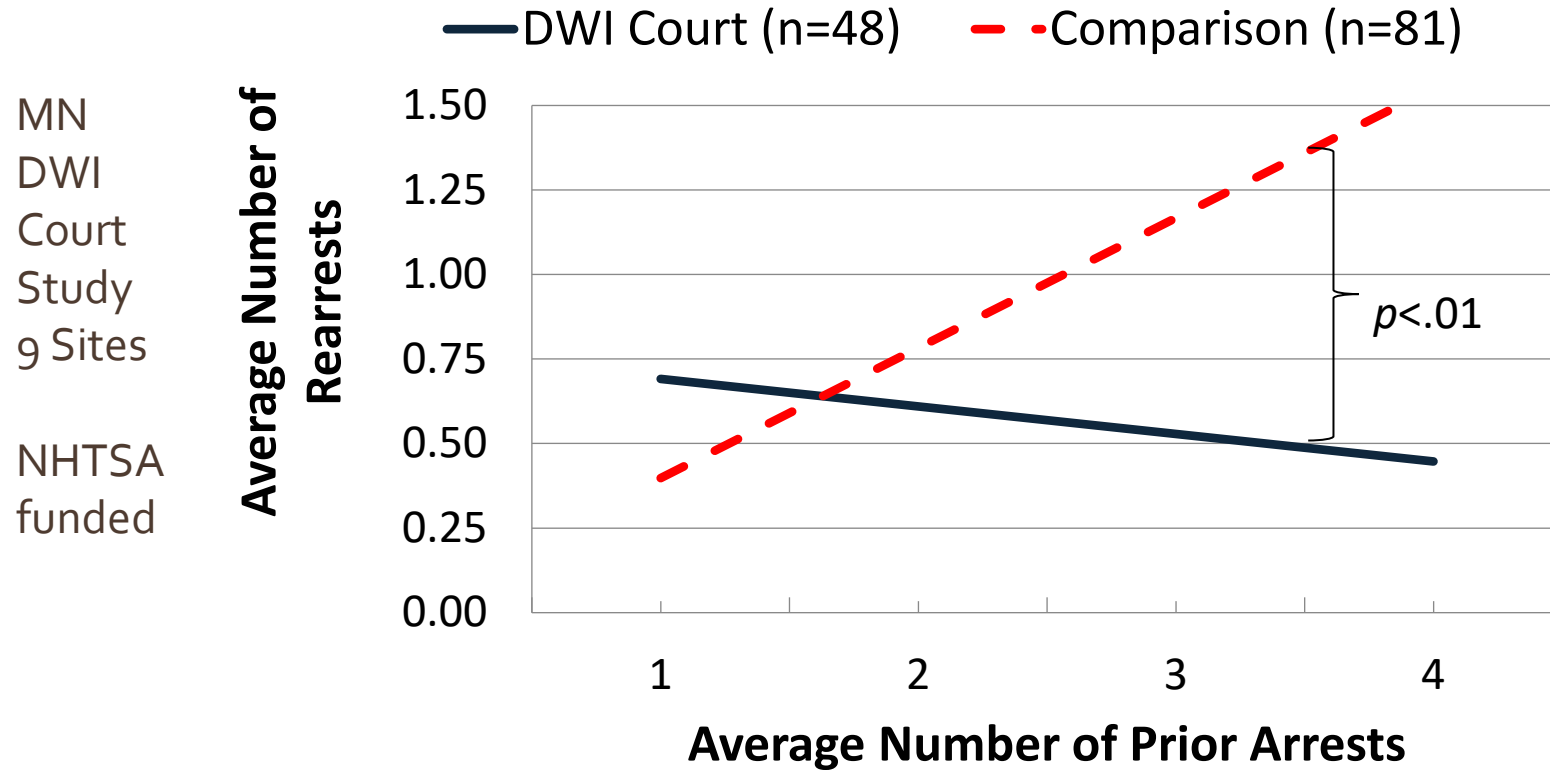Given these differences, does the drug court model still apply?

Average Number of Rearrests by Number of Prior Arrests at 2 Years

MN DWI Court Study 9 Sites

NHTSA funded

Related Sessions

Risk and Need: Implementing Multiple Tracks in Your Treatment Court
Shannon Carey, Ph.D., Hon. Peggy Davis, Hon. Richard Vlavianos
Monday: 11-12:15
Maryland A

Don't Just Wing It: Combining clinical and supervision case plans to improve outcomes in treatment courts
Dr. Shannon Carey and Dr. Brian Meyer
Tuesday: 11-12:15
Cherry Blossom Ballroom

Adult Drug Court Assessments

- RANT (screen)
- LS/CMI
- ORAS
- TCU

Traditional risk assessments: All validated and can be used to determine both risk and need

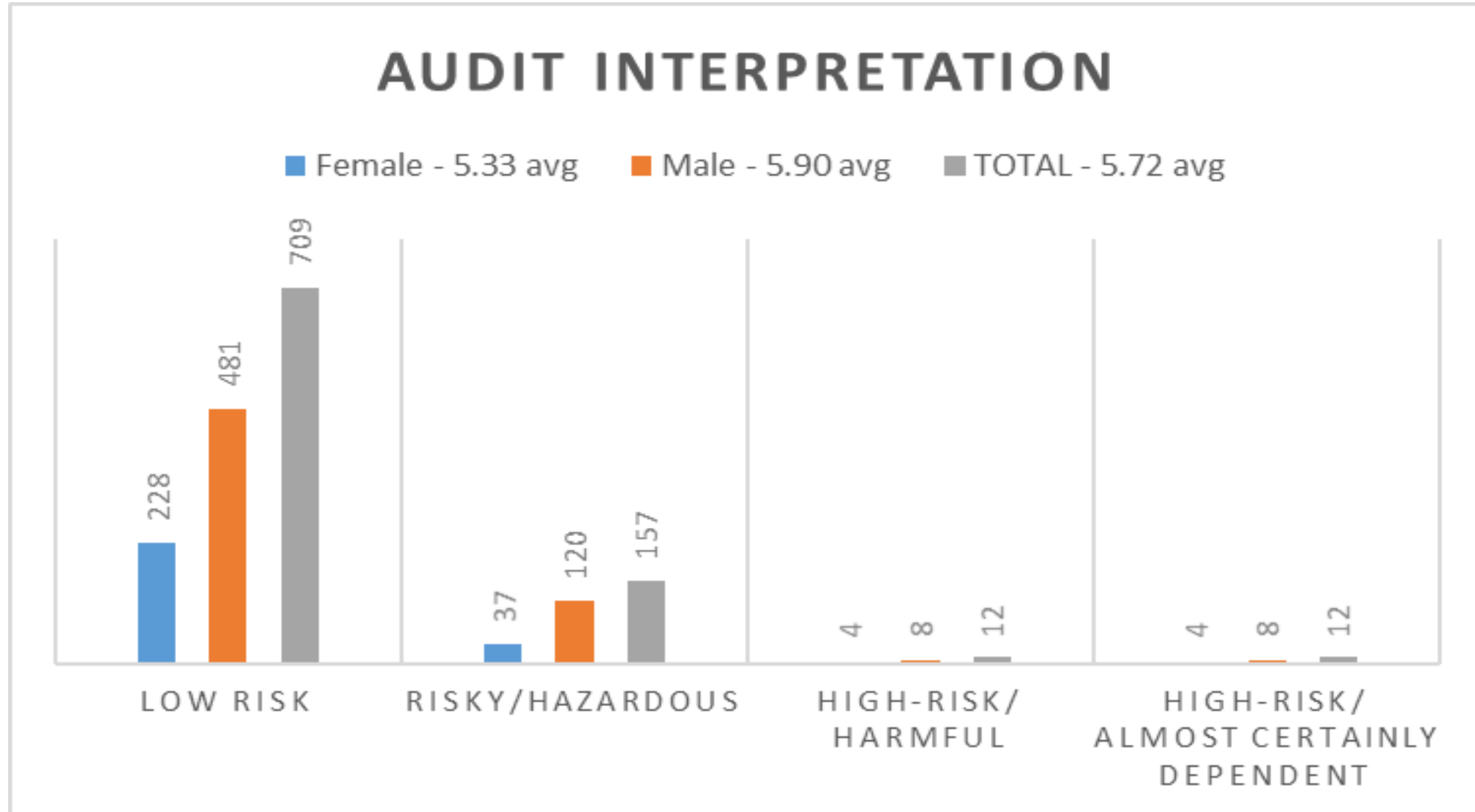http://ltgov.delaware.gov/taskforces/djrtf/DJRTF_Risk_Assessment_Memo.pdf

DWI Assessments

- CARS   https://www.responsibility.org/end-impaired-driving/initiatives/cars-dui-assessment-project/

- RIASI

- IDA

- DWI-RANT (screen)

- (SBiRT screening for ALL DWI offenders)

https://www.criminaljustice.ny.gov/opca/pdfs/2014-Risk-and-Need-Assessment-Update-8-20-14.pdf

AUDIT INTERPRETATION

■ Female - 5.33 avg   ■ Male - 5.90 avg   ■ TOTAL - 5.72 avg

	LOW RISK	RISKY/HAZARDOUS	HIGH-RISK/ HARMFUL	HIGH-RISK/ ALMOST CERTAINLY DEPENDENT
Female	228	37	4	4
Male	481	120	8	8
TOTAL	709	157	12	12

RANT STATS FOR REPEAT DWI OFFENDERS (N=1,133)

DUI RANT

- High Risk/High Need — 31%
- High Risk/Low Need — 49%
- Low Risk/High Need — 3%
- Low Risk/Low Need — 17%

RANT Stats for Repeat DWI Offenders (N=1,133)

DUI RANT

- High Risk/High Need
- High Risk/Low Need
- Low Risk/High Need
- Low Risk/Low Need

DUI RANT: 31%, 49%, 3%, 17%

RANT: 31%, 39%, 3%, 27%
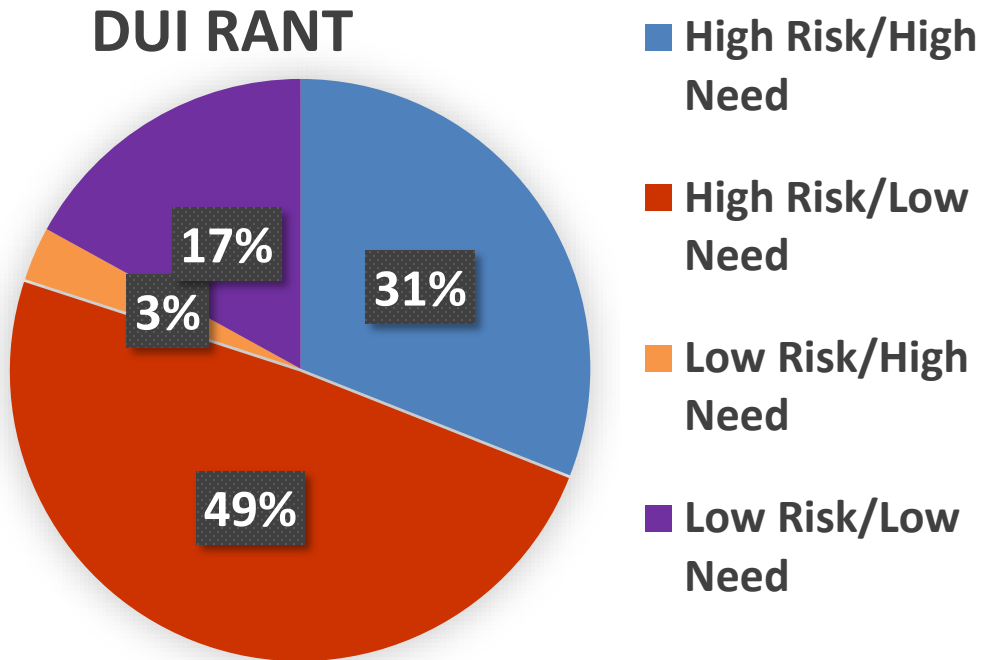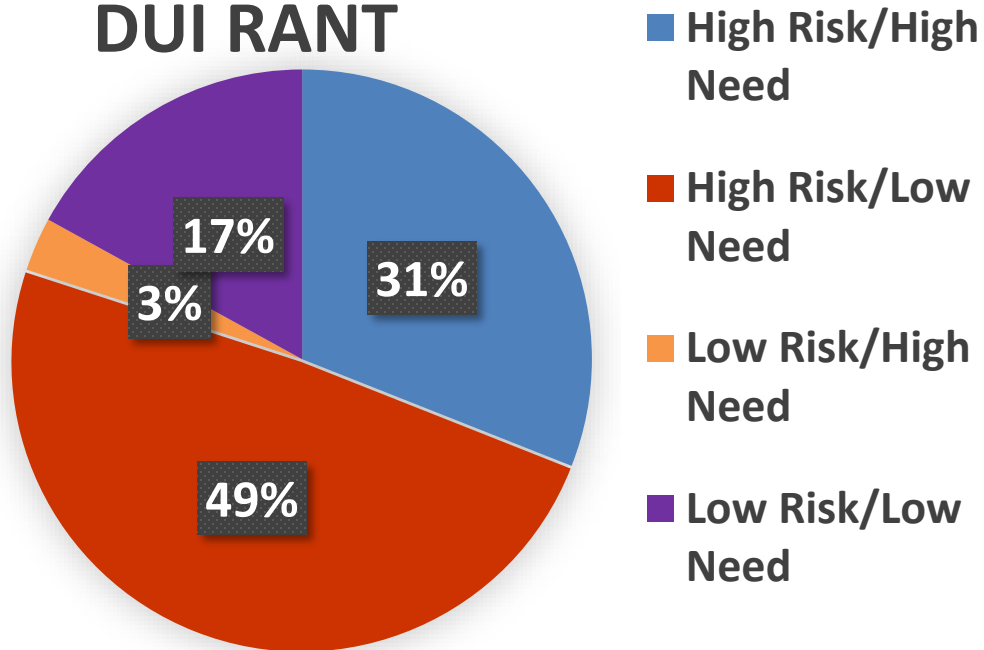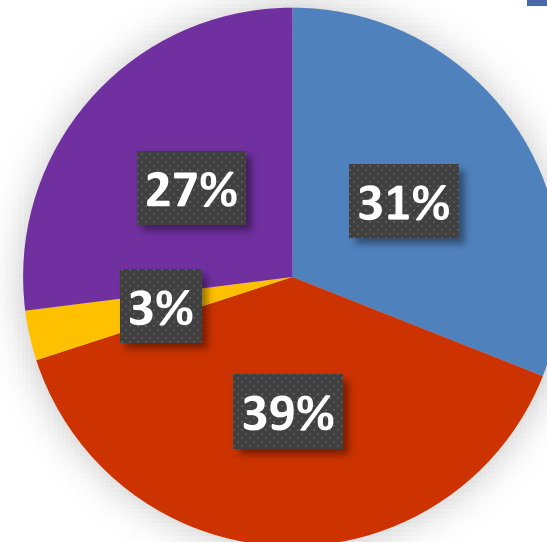
~20% of HR/LN for DUI scored LR/LN on regular assessment

What Works?

Evidence-Based Practices and Best Practices

Lessons Learned

Being at high risk for a new DWI does not necessarily mean high risk for other types of criminal recidivism

This means their supervision and other case planning may need to be different – particularly for the public safety risk

- Continuous detection for use (e.g., tether)
- Interlock on vehicles
- Unannounced home visits

MONITORING TECHNOLOGIES
- especially for alcohol

- Transdermal Monitoring (ankle bracelet)

- Ignition Interlock Device

- Remote Testing (cell phone)

- Urine Drug Testing (EtG)

- Daily Testing (24/7 program)

Create Tracks for Different Risk and Need Levels

Research: San Joaquin County DUI Court Example

All second time DUIs and higher

Track 1
(NOT HR/HR)

Court Monitoring Track

Majority HR/LN – about two-thirds of the population

- Report to Case Manager - verifies compliance
- Added probation conditions
- Alcohol/drug monitoring; Abstain clause;
- Court reviews scheduled for 1 mo; 6 mo; 1 yr
- Court appearance added with non-compliance
- Immediate response to non-compliance
- Recognition for compliance
- Continued non-compliance results in participant re-assessment and move to Track 1
- *Low need means little to no need for substance use disorder or mental health treatment*

Track 2
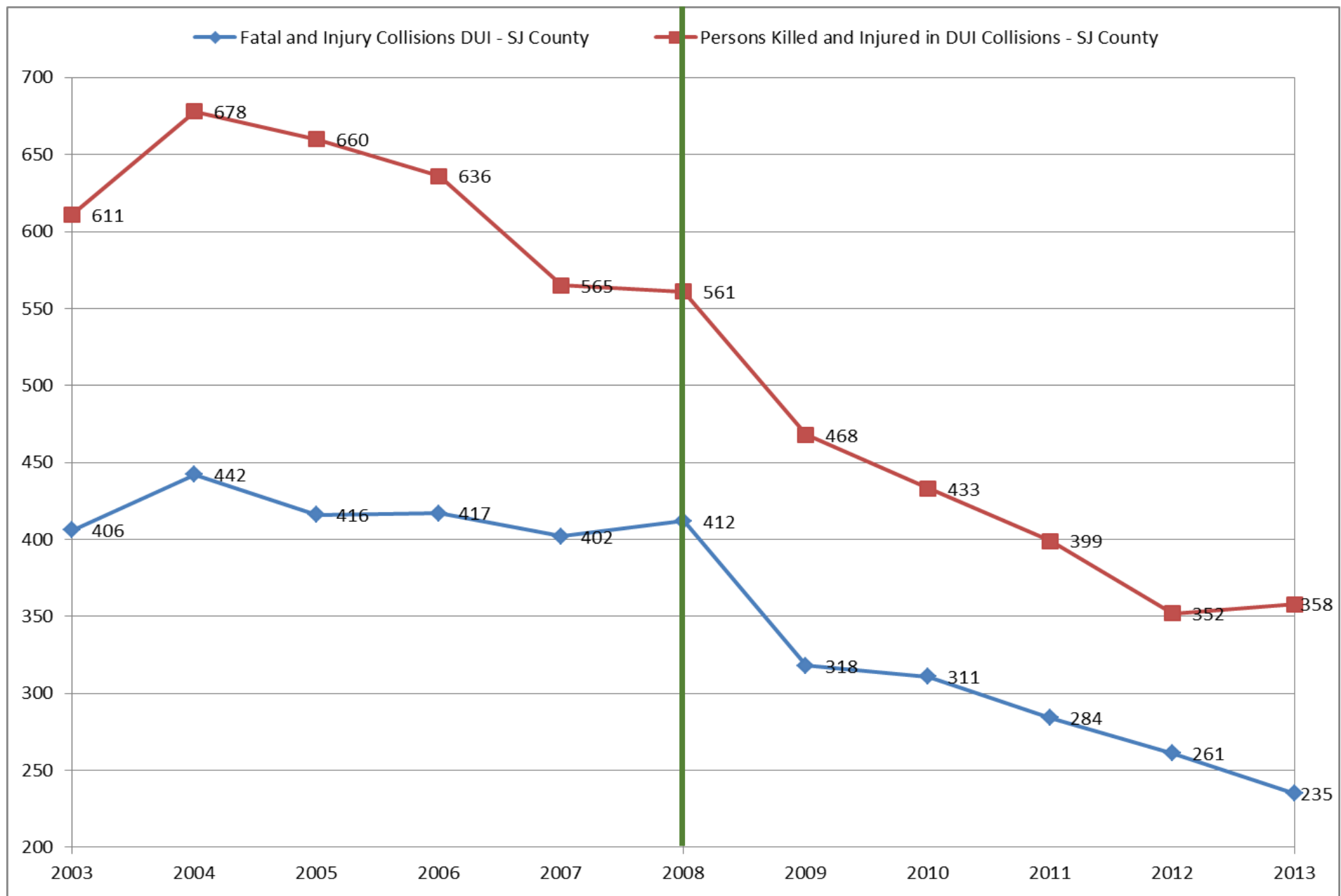## HR/HN

Traditional DUI Court Model

HR/HN – ~1/3 of repeat DUI population

- Full assessment for risks and need and appropriate placement in supervision and treatment according to assessment results

- Regular case management appointments

- Court appearances every other week

- Immediate response to non-compliance

- Recognition for compliance

San Joaquin DUI Court Results

DID IT WORK?

Legend:
- Fatal and Injury Collisions DUI - SJ County
- Persons Killed and Injured in DUI Collisions - SJ County

Persons Killed and Injured in DUI Collisions - SJ County:
- 2003: 611
- 2004: 678
- 2005: 660
- 2006: 636
- 2007: 565
- 2008: 561
- 2009: 468
- 2010: 433
- 2011: 399
- 2012: 352
- 2013: 358

Fatal and Injury Collisions DUI - SJ County:
- 2003: 406
- 2004: 442
- 2005: 416
- 2006: 417
- 2007: 402
- 2008: 412
- 2009: 318
- 2010: 311
- 2011: 284
- 2012: 261
- 2013: 235
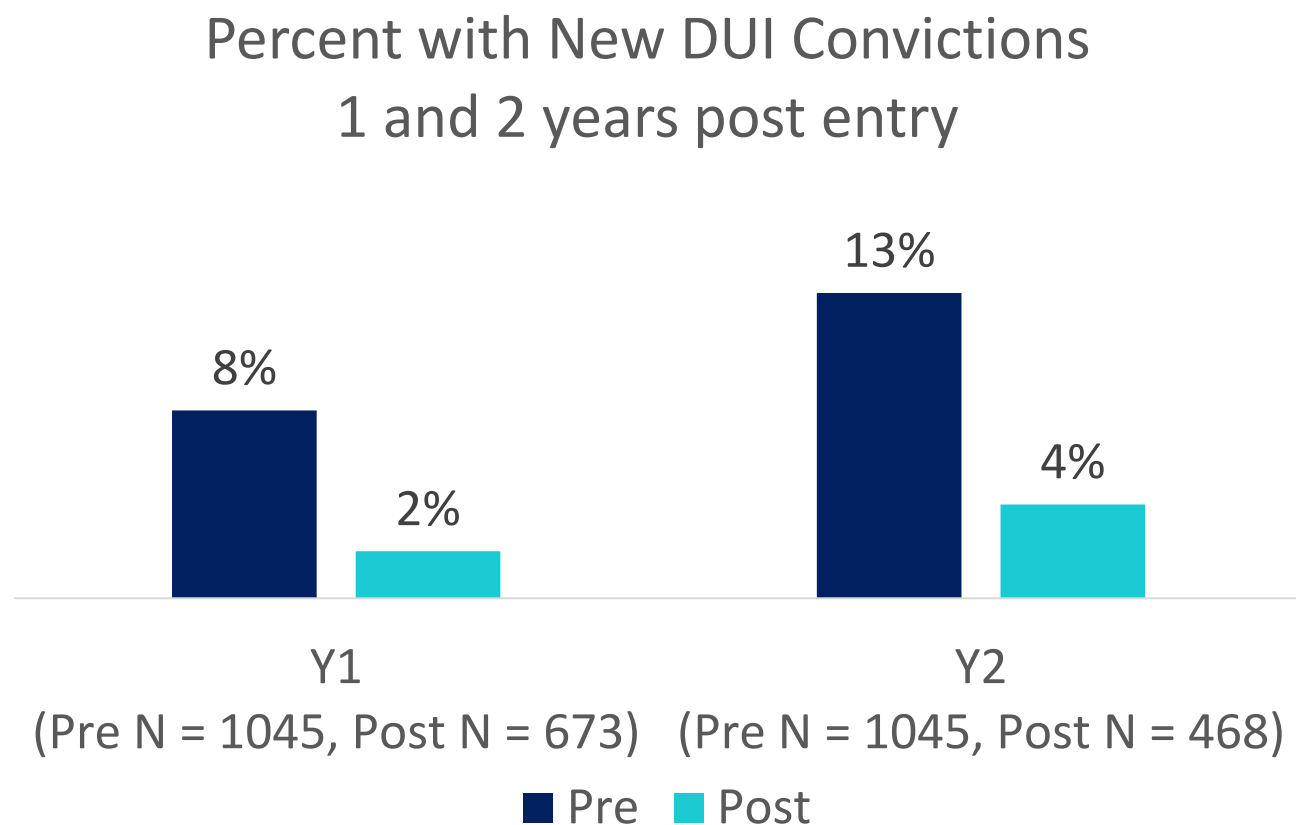
California OTS Safety Ranking
Alcohol Involved Collisions By County
1=Worst; 58=Best
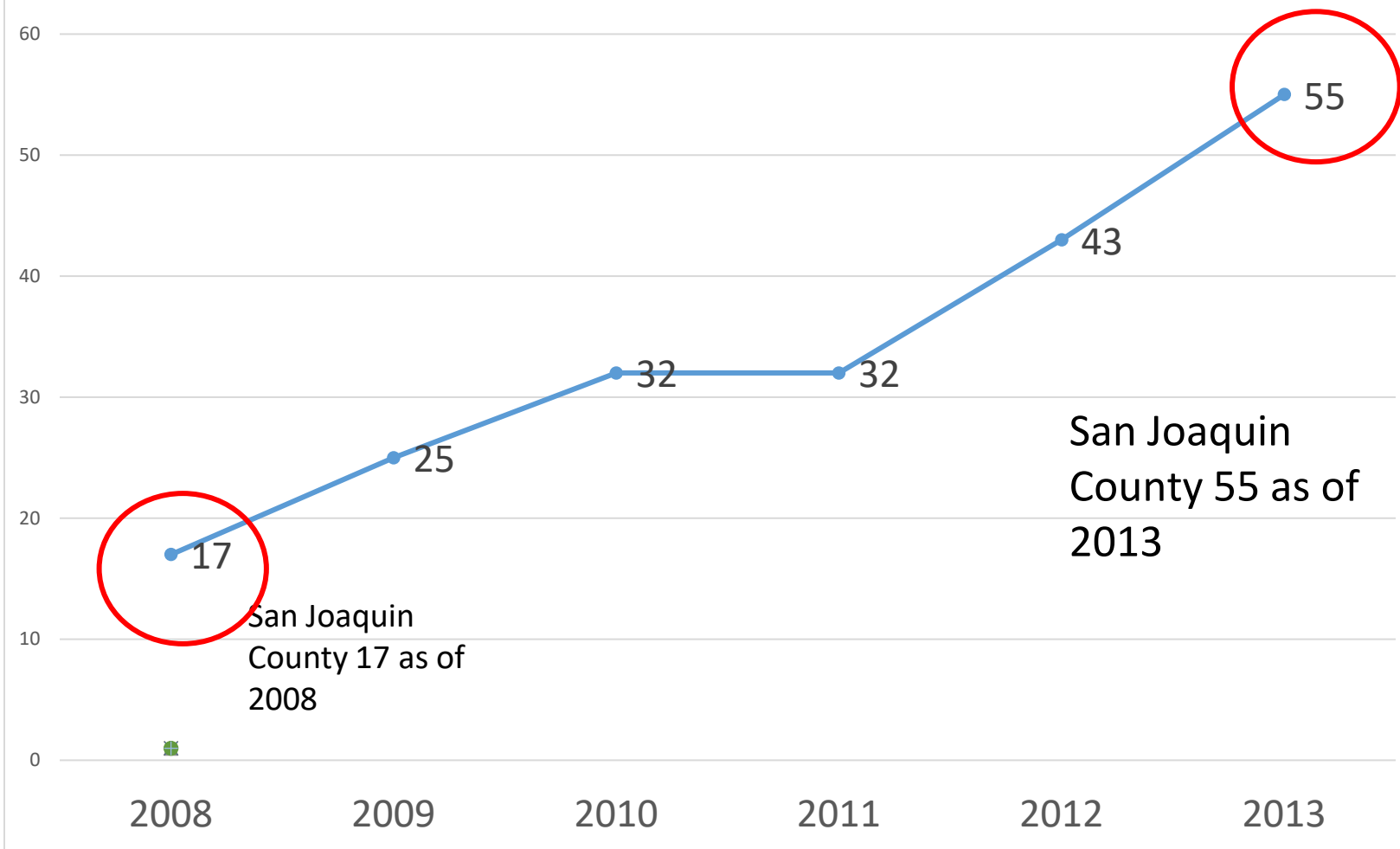
USING A VALIDATED RISK AND NEED SCREEN FOR TRACK PLACEMENT PARTICIPANTS WAS ASSOCIATED WITH REDUCED RECIDIVISM

Post-RANT participants had a substantially lower DUI conviction rate than pre-RANT participants

Percent with New DUI Convictions
1 and 2 years post entry

8%

2%

13%

4%

Y1
(Pre N = 1045, Post N = 673)

Y2
(Pre N = 1045, Post N = 468)

■ Pre ■ Post

Pre-RANT = "behavioral triage" Participants were placed into Track 1 at entry and only moved to Track 2 based on behavior indicating that they were unable to succeed with just increased monitoring

Post-RANT = Assessment driven Participants are placed into tracks based on results of the screening tool

So, how do you do this?

Practical Considerations in Creating tracks

How tracks are implemented varies based on program size and what services are available

HOW TO IMPLEMENT A MULTI-TRACK MODEL IN YOUR TREATMENT COURT

JUNE 2019

NPC RESEARCH

For questions contact:
Shannon M. Carey, Ph.D.
NPC Research
carey@npcresearch.com

Training available through the All Rise Treatment Court Institute

Alternate Court Sessions
- Different days of the week
- Different portions of the day/hour

Separate Therapy Groups
- Separate by risk level
- Separate by type of services needed
- Separate by agency
- Small programs may need to focus on individual sessions

Probation Officers/Case Managers
- Assigned to separately tracks
- And/or understand R/N differences

More on What Works

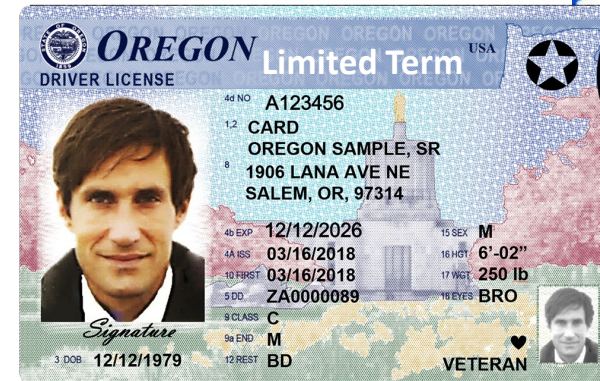**Evidence-Based Practices and
Best Practices**

Ensure Transportation Needs are Addressed

The majority of DWI court participants have their license removed for at least some portion of the time they are in the DWI Court
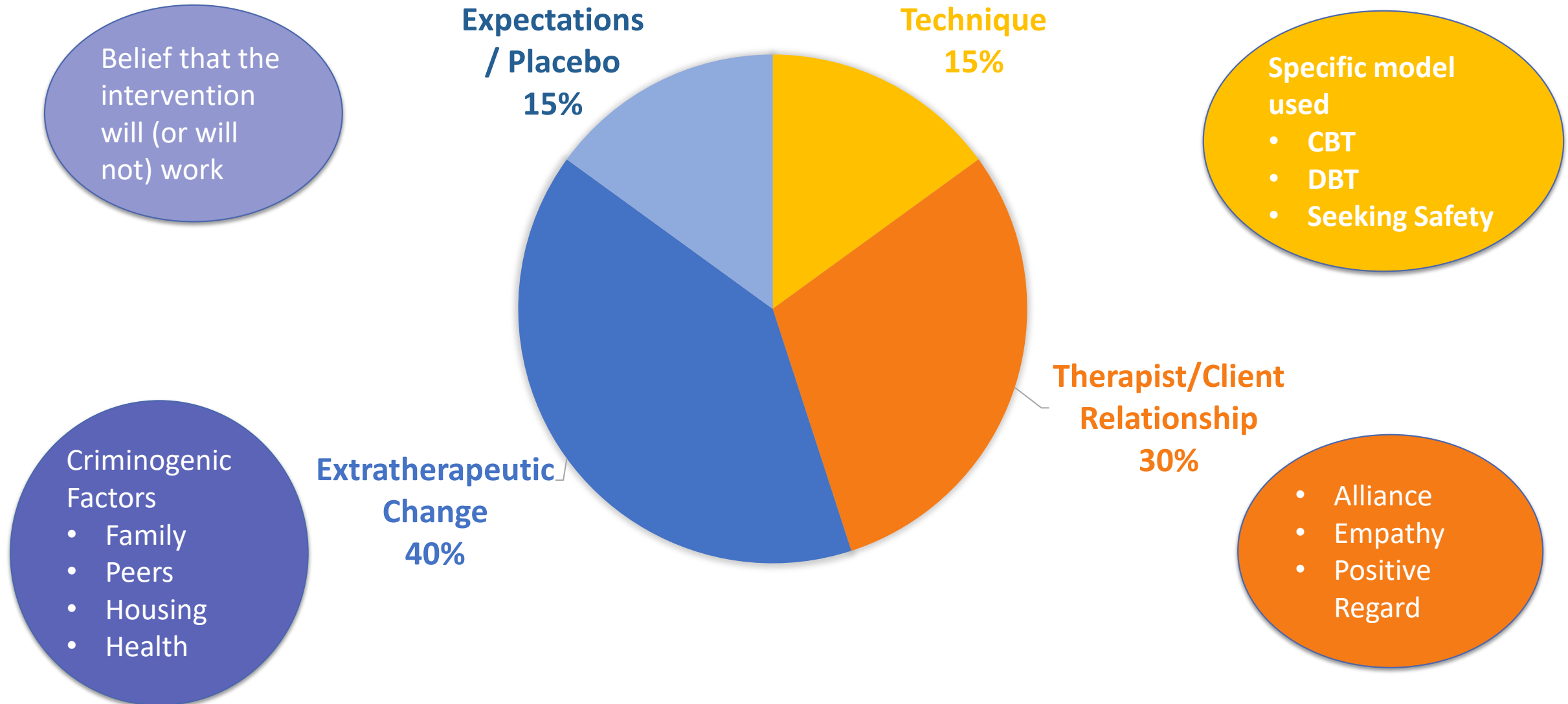
We want to address barriers to participation and to compliance with program requirements

Services include assistance with:
- License reinstatement
- Gaining a limited license for work
- Bus tickets
- Ride shares
- Bicycles
- Other creative options for transporting participants to essential activities (e.g., provide incentives to participants who can drive to give rides to others)
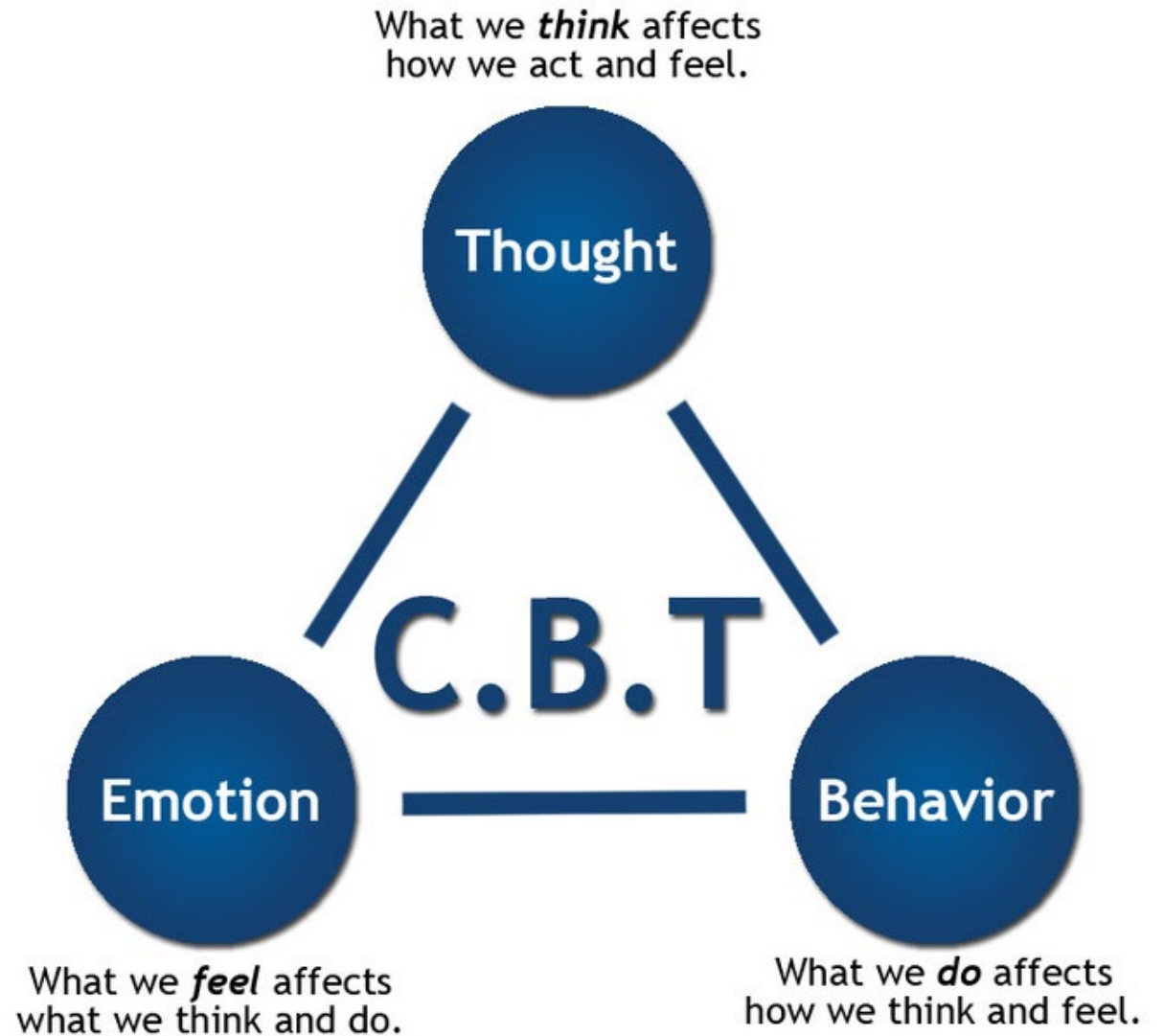
Tools for Behavior Change

S

Expectations / Placebo
15%

Technique
15%

Belief that the intervention will (or will not) work

Specific model used
- **CBT**
- **DBT**
- **Seeking Safety**

Therapist/Client Relationship
30%

Extratherapeutic Change
40%

Criminogenic Factors
- Family
- Peers
- Housing
- Health

- Alliance
- Empathy
- Positive Regard

Lambert and Barley 2001; Soto 2011

Evidence-Based Practices

Cognitive Behavioral Therapy (CBT) e.g., MRT

What we *think* affects how we act and feel.

Thought

C.B.T

Emotion

Behavior

What we *feel* affects what we think and do.

What we *do* affects how we think and feel.

Evidence-Based Practices

Cognitive Behavioral Therapy (CBT) e.g., MRT

Strong impact in treating:

- Substance use disorder,
- Personality disorders (e.g., Anti-social)
- Anxiety disorders
- Anger and aggression
- Criminal behaviors
- General stress
- Chronic pain and fatigue
- Eating disorders
- Insomnia

Yoga Research

https://www.health.harvard.edu/mind-and-mood/yoga-for-anxiety-and-depression

Good Meta-analysis of CBT (269 studies):

http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3584580/

Mind/Body Connection Activities
Ex: The Program (Duluth, MN)

Experiencing well-being amidst the difficulties of life is a program designed to support DWI court participants to experience well-being through:

- Trauma-informed yoga

- Somatic experiencing

- Breath-work

- Meditation

- Relaxation techniques

https://www.karger.com/Article/FullText/490762

Research supporting Mindfulness in SUD treatment

YARAYOGA

IMPLEMENTING HEALING CENTERED TRAUMA INFORMED YOGA AND MINDFULNESS IN TREATMENT COURTS

Honorable Judge Floerke & Kyle
Leia Heyesen, MSW, E-RYT

Evidence-Based Practices
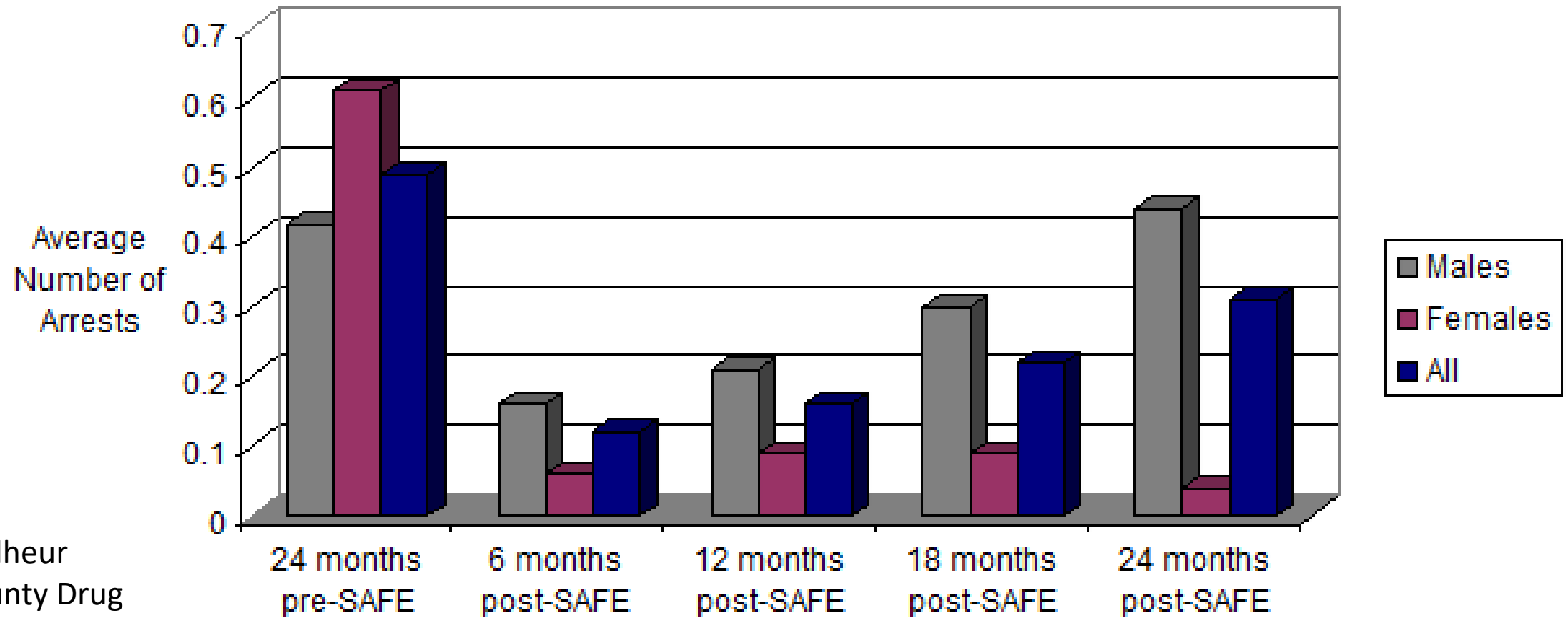
Gender Specific Services

Gender Specific Court Sessions

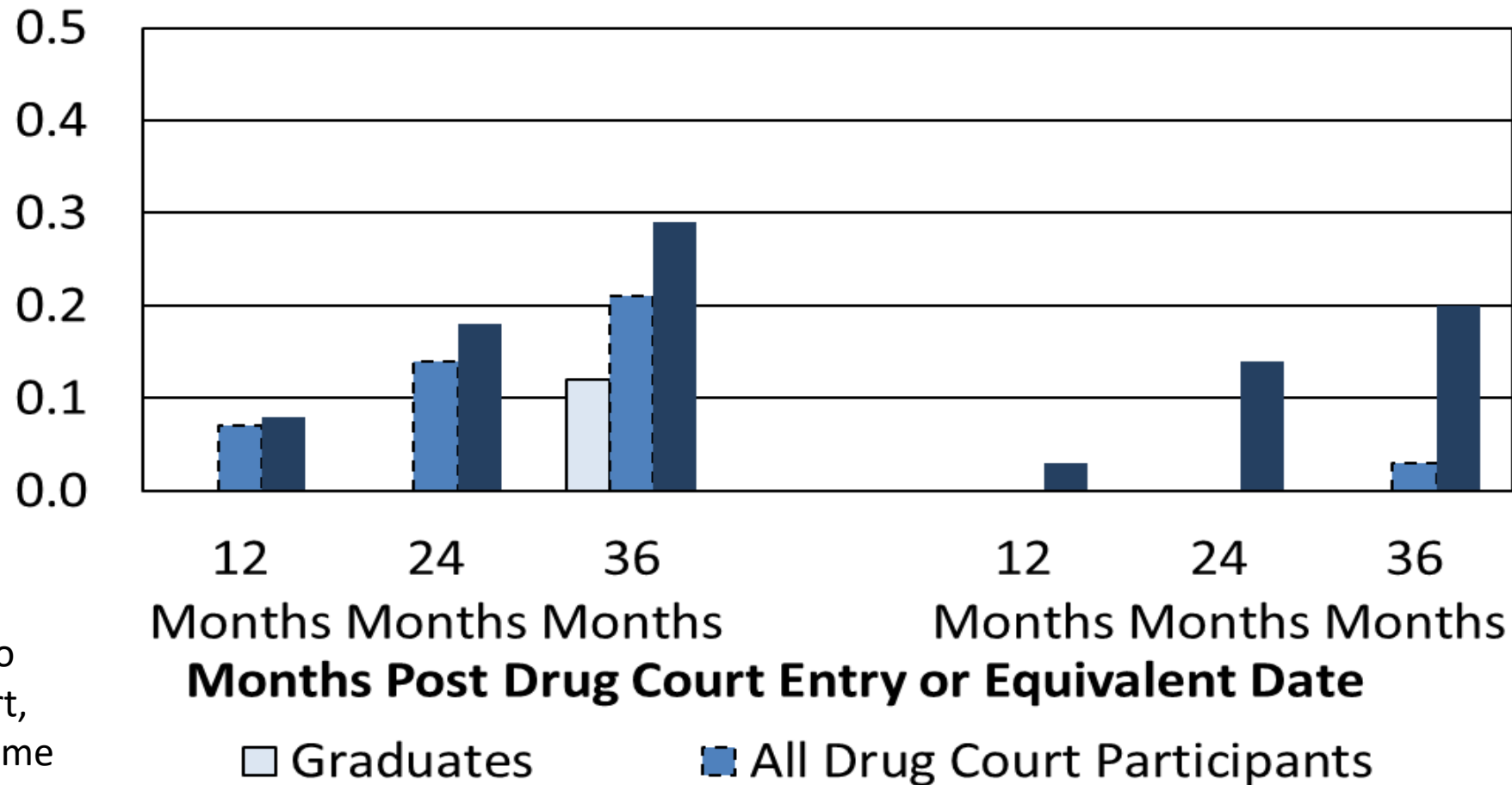The secret to Morano's long life: separating from her husband in 1938

2017: Morano was 117 years old

Average Number of Re-arrests for S.A.F.E. Court Participants

Malheur County Drug Court, OR: Outcome Evaluation

Mean Number of Drug-Related Re-Arrests at 12, 24, and 36 Months

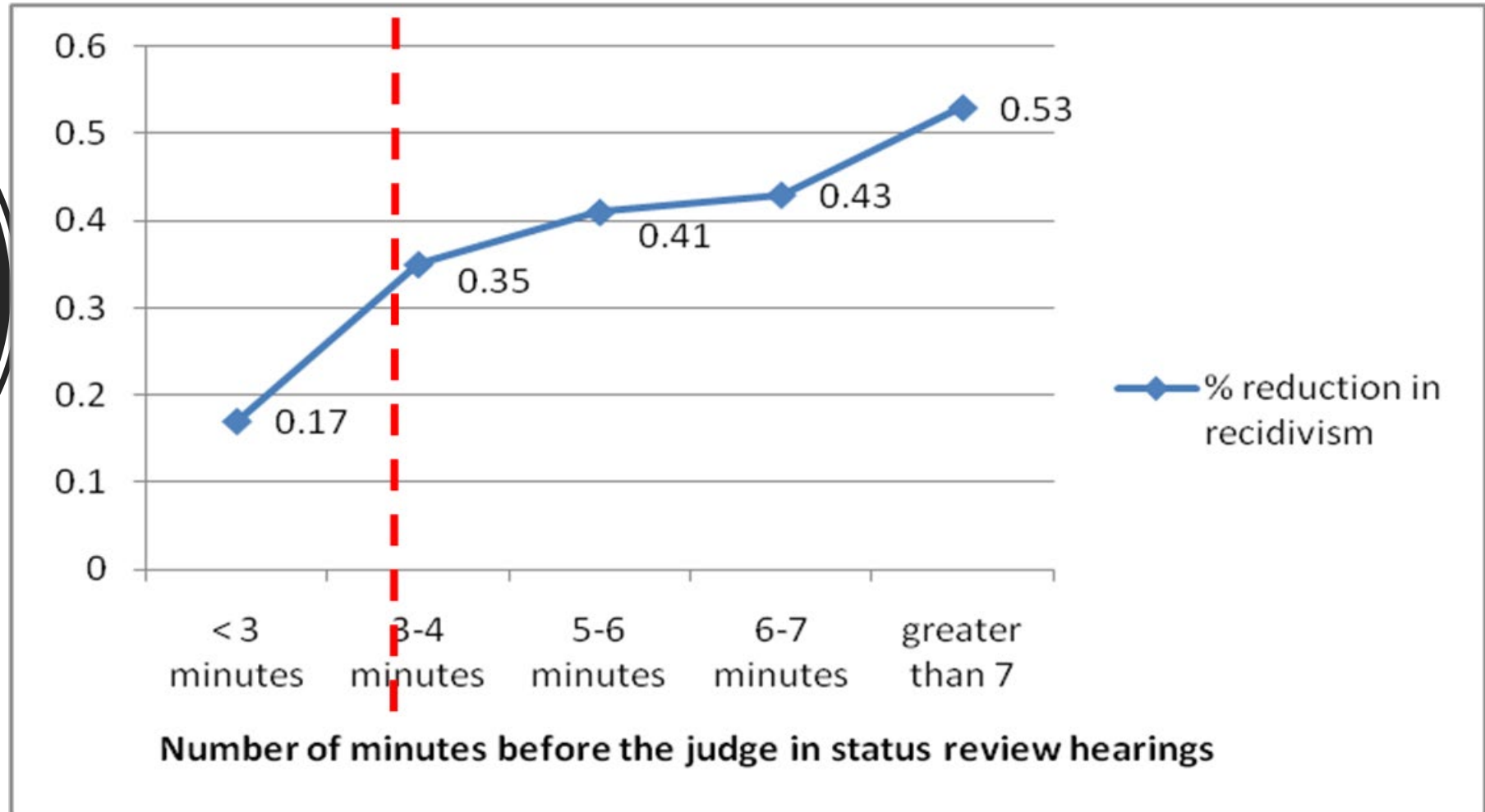Kalamazoo Drug Court, MI: Outcome Evaluation

Best Practices

Observational Learning (Social learning Theory)
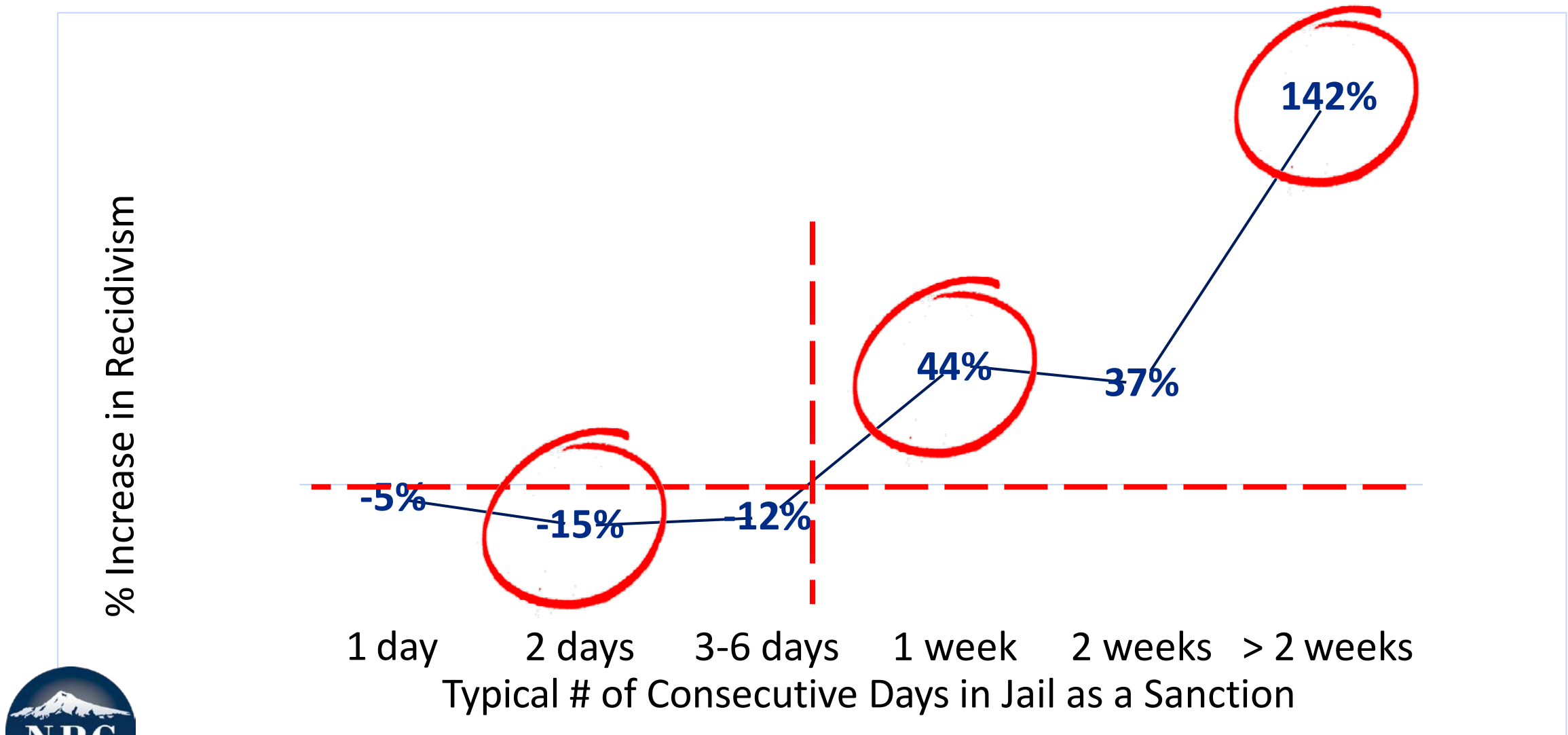
Incentives First

Spend Time with Participants in Court

Drug courts where the judge spends an average of 3 minutes or greater per participant during court hearings had 153% reductions in recidivism

Best Practices

Treatment Courts that typically user jail longer than 6 days have <u>higher</u> recidivism

% Increase in Recidivism

-5%
-15%
-12%
44%
37%
142%

1 day   2 days   3-6 days   1 week   2 weeks   > 2 weeks

Typical # of Consecutive Days in Jail as a Sanction

NPC RESEARCH

*Not the best public safety choice in the long run

Jail Considerations

1. What behavior do you want to stop? Is the behavior dangerous to others? (Or impact the safety and integrity of the court?)

2. What is the intended impact of jail? Will it stop the behavior? (Have you looked at your data?)

3. What will the impact of jail be on participant prosocial obligations (work, family, etc.)?

4. What behavior do you want the participant to do instead? Can you incentivize that? Would a therapeutic/teaching response help?

5. If you do use jail, can you be creative to reduce the negative impacts?

   - Avoid overnight
   - Avoid general population
   - Use holding cell

Include Law Enforcement on the Team

Drug courts where law enforcement attends court sessions had <u>64% higher cost savings</u>

"There is always room for change, but you have to be open to that change."
— Kathryn Budig
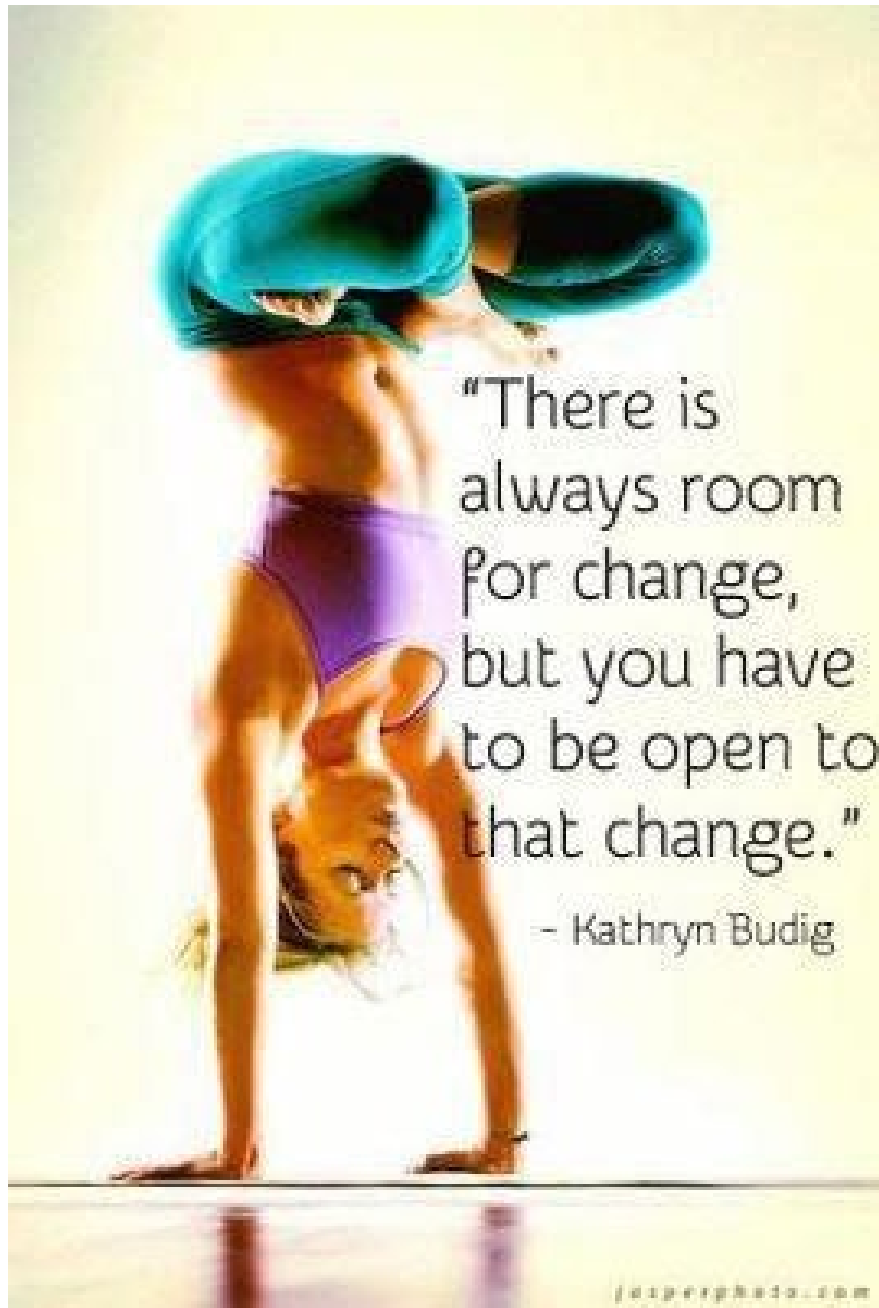
Drug courts where the results of program evaluations have led to modifications in drug court operations had 100% higher cost savings

Evaluate

Drug courts where new team members receive formal orientation and training had <u>54% lower recidivism</u>

Train All Team Members

Contact Information

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