

# MAINE STATE LEGISLATURE

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**STATE OF MAINE  
JUDICIAL BRANCH**



**ADMINISTRATIVE OFFICE OF THE COURTS  
ADULT DRUG TREATMENT COURT**

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**REPORT TO THE JOINT STANDING COMMITTEE ON THE JUDICIARY  
125<sup>TH</sup> LEGISLATURE  
JANUARY 15, 2011**

**Executive Summary**

Maine's Adult Drug Treatment Courts (ADTC) remain active in six counties across Maine and provide rigorous accountability for offenders who have either pled or been found guilty of serious drug and alcohol-related offenses. Drug courts are an effective national and international response to the close relationship of substance abuse and crime and the profound costs associated with these crimes to individuals, the criminal justice system, and our communities at large.

- While in drug court, these participants have been required to meet with the presiding judge weekly or every other week to account for their progress as well as maintain regular contact with their case managers and probation and parole officers, if on probation. They have to work, attend school, or engage in community service, meet all their financial responsibilities, maintain stable and sober housing, very frequently undergo testing for drug and alcohol use, and participate satisfactorily in intensive treatment and self-help groups.
- Specialized treatment is provided to drug court participants to support recovery from substance abuse, develop more pro-social thoughts and behaviors, and address mental health and trauma issues.
- In calendar year 2010, there were 219 participants; 62 individuals have graduated and 39 were expelled. Since the inception of the Adult Drug Treatment Courts in 2001, 1,025

men and women have participated in these Courts. The graduation rate for the calendar year 2010 was 61.4% - higher than the national average of 48%. Graduates serve reduced sentences with no further incarceration. Expelled participants are sent directly to prison to serve substantial sentences. As of December 31, 2010, there were 113 active participants in the drug courts.

- Community outreach efforts have continued, including presentations to interested parties at workshops and seminars in Maine and nationally.
- Adult Drug Treatment Courts continue to demonstrate that drug court participants are rearrested at significantly lower rates and for less serious offenses than traditionally adjudicated offenders. One year post-graduation, adult drug court participants in Maine have a rearrest rate of 16.5% compared to the national average of 17.5%. For traditionally adjudicated offenders, the rearrest rate is 33.1%. A statewide adult drug court evaluation is currently underway with results on outcomes such as recidivism expected in 2011.
- There have been 49 women participants who have given birth to a drug-free baby. National estimates of the cost of care for drug-addicted children are approach or exceed \$1,000,000 per child through the age of 18 years old.
- Adult drug courts generate measurable cost savings to the criminal justice system through reduced incarceration and recidivism. For every \$1 spent on the adult drug courts in Maine, \$3.30 in savings to the state's criminal justice system is generated.
- Drug courts remain labor and time intensive on the part of judges and other drug court practitioners. Judges, court clerks, judicial marshals, prosecutors, and probation and parole officers continue to devote their time and energy to these Courts without any additional funding from any source.
- Funding for treatment and case management provided to drug court participants has remained flat or been reduced. During calendar year 2010, the totals were \$387,724 for treatment services, \$550,209 for case management and drug testing, \$15,000 for management information system maintenance, \$120,000 for the Judicial Branch position which includes coordination of the adult drug courts among its duties and the coordinator's statewide travel, drug court training, and supplies. All these funds are provided by the Fund for a Healthy Maine to the Office of Substance Abuse for treatment, case management, and drug testing contracts and to the Judicial Branch for the coordinator position.
- In the past two years, additional federal grants totaling \$790,974 have been obtained to update the statewide evaluation of the Adult Drug Treatment Courts, to upgrade the drug court management information system maintained by the Office of Substance Abuse, and to enhance treatment and case management services in Cumberland and Washington Counties. All of this funding is devoted to contracted services and not to Judicial Branch infrastructure.

### **Introduction to Adult Drug Treatment Courts**

Adult Drug Treatment Courts are a type of problem solving court or specialized docket and are defined as follows:

*A specially designed court calendar or docket, the purposes of which are to achieve a reduction in recidivism and substance abuse among nonviolent substance abusing offenders and to increase the offender’s likelihood of successful habilitation through early, continuous, and intense judicially supervised treatment, mandatory periodic drug testing, community supervision and use of appropriate sanctions and other habilitation services.<sup>1</sup>*

Additionally, drug courts seek an increase in personal, familial, and societal accountability of offenders, the development of prosocial attitudes and behaviors, and the promotion of healthy and safe family relationships. The Courts are intended to reduce unnecessary incarceration by promoting more effective collaboration and efficient use of resources among the Courts and criminal justice and community agencies.

Maine’s initial five Adult Drug Treatment Courts were created by statute in August of 2000 and began accepting participants into service in April of 2001. These Courts are located in Washington County, Penobscot County, Androscoggin County, Cumberland County, and York County. A sixth ADTC in Hancock County joined the state system following the provision of funding by the 123<sup>rd</sup> Legislature on July 1, 2008. This docket had previously been administered as a deferred sentencing project by the county beginning in April 2005.

**Program structure**

The structure of the six active Adult Drug Treatment Courts is summarized below:

<b>Site</b>	<b>Presiding justices and judges</b>	<b>Case management services</b>	<b>Treatment provider agencies</b>
Washington County	Hon. John V. Romei	Maine Pretrial Services	Eastport Healthcare
York County	Hon. G. Arthur Brennan	Maine Pretrial Services	Counseling Services, Inc.
Cumberland County	Hon. Jeffrey Moskowitz	Maine Pretrial Services	Catholic Charities Maine
Androscoggin County	Hon. MaryGay Kennedy	Maine Pretrial Services	Tri-County Mental Health Services
Penobscot County	Hon. William R. Anderson	Maine Pretrial Services	Wellspring
Hancock County	Hon. Kevin Cuddy	Maine Pretrial Services	Open Door Recovery Center

The ADTC dockets are administratively managed by the Diversion and Rehabilitation Coordinator under the supervision of the Director of Court Services from the Administrative

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<sup>1</sup> Bureau of Justice Assistance. *Competitive Grant Announcement: Adult Drug Treatment Court Implementation Grants*. Washington, D.C.: U.S. Department of Justice, 2003.

Office of the Courts. Operational support is also provided by court clerks and the Judicial Marshal Service.

Drug courts are labor and time intensive activities for the Judicial Branch. The Courts in Washington County, Cumberland County, and York County meet every week. The Courts in Hancock County, Penobscot County, and Androscoggin County meet every other week. For Courts meeting weekly, the time devoted by courthouse personnel averages 4 hours per week/16 hours per month for the presiding judge, 2 hours per week/8 hours per month for a court clerk, and 1.5 hours per week/6 hours per month for a deputy marshal. A courtroom is needed for 1.5 hours per week/6 hours per month. Those Courts meeting twice a month devote half this amount of time. As noted elsewhere in this report, no additional funding is provided to the Judicial Branch for drug court operations. Any expansion of these dockets would have a direct impact on the availability of judges, clerks, and deputy marshals for other types of dockets by reducing the time that could be devoted to these other dockets.

The activities of the Courts continue to be overseen by a statewide steering committee consisting of representatives of the Department of Corrections, the Office of Substance Abuse, treatment provider agencies, Maine Pretrial Services, the Co-Occurring Collaborative Serving Maine, the Office of the Attorney General, the criminal defense bar, a drug court graduate, the Administrative Office of the Courts, and a researcher from Hornby Zeller Associates. This committee is chaired by the Hon. Roland Cole, Justice of the Maine Superior Court. Justice Cole has also presided as an Adult Drug Treatment Court judge in Cumberland County and elsewhere. The steering committee meets for approximately 3 hours per calendar quarter.

### **Substance abuse treatment**

The Office of Substance Abuse continues to contract with licensed treatment provider agencies in each county having an Adult Drug Treatment Court. These agencies are required to provide *Differential Substance Abuse Treatment* (DSAT), a manualized cognitive-behavioral treatment program. Clinicians from the treatment provider agencies attend pre-court meetings to discuss participant progress as well as the status hearings.

The source of treatment and case management contract monies is the *Fund for a Healthy Maine*, MaineCare for the participants covered by this program, and self-pay. In strictly economic terms, treatment of substance abuse disorders generates clear and substantial cost savings. Data published by the Substance Abuse and Mental Health Services Administration and cited by the Maine Office of Substance Abuse indicate that for every \$100 spent on treatment, \$700 in criminal justice costs is avoided.<sup>2</sup> Additionally, the State of Washington has found that substance abuse treatment reduces the likelihood of rearrest by 16% and of felony re-convictions by 34%.<sup>3</sup> Drug courts are notable compared to other community corrections interventions in

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<sup>2</sup> Center for Substance Abuse Treatment, SAMHSA (2009). *Cost Offset of Treatment Services*.

<sup>3</sup> Drake, E.K., Aos, S., & Miller, M.G. (2009). *Evidence-Based Public Policy Options to Reduce Crime and Criminal Justice Costs: Implications in Washington State*. Victims and Offenders, 4:170-196.

that there is relatively much higher retention in treatment by drug court participants. Drug court participants may also participate in other forms of treatment, including mental health counseling, if indicated. Attendance at 12-step recovery and self-help groups is strongly encouraged.

Research on the drug courts in Maine and elsewhere has indicated that significant numbers of participants have co-occurring mental health disorders and that they typically have poorer outcomes than their peers with substance abuse disorders alone. The standard of care for these participants is integrated substance abuse and mental health treatment and is increasingly being emphasized by the drug courts. Treatment interventions to reduce criminal thinking and risk are also becoming more prevalent.

Treatment and case management enhancement grant awards have been made by the federal Bureau of Justice Assistance to Cumberland County and Washington County. The former grant totals \$197,747 for the period October 1, 2009, to September 30, 2011. The latter grant totals \$195,360 for the period July 1, 2010, to June 30, 2010.

### **Data and evaluation**

The Adult Drug Treatment Courts continue to utilize *DTxC*, a web-based data management information system for all of Maine's drug treatment courts. The Judicial Branch in partnership with the Office of Substance Abuse was awarded a two-year grant from the Bureau of Justice Assistance in August 2010 to upgrade this system to improve its ability to respond to the needs of drug court team members, administrators, and researchers. All funds awarded under this grant will be provided for software development and database management to contracted providers. This grant totals \$199,938 for the period July 1, 2010, to June 30, 2012.

In calendar year 2010, there were 219 participants; 67 individuals have graduated and 39 were expelled. Since the inception of the Adult Drug Treatment Courts in 2001, 1,025 men and women have participated in these Courts. The graduation rate for the calendar year 2010 was 61.4% - higher than the national average of 48%. Graduates serve reduced sentences with no further incarceration. Expelled participants are sent directly to prison to serve substantial sentences. As of December 31, 2010, there were 113 active participants in the drug courts.

The average participant is a single man in his late-20's and with children. More than half of the participants are on probation while in drug court and the vast majority will be on probation upon their successful completion and graduation. While individuals with substance abuse disorders tend to use multiple drugs in combination, there tend to be preferences. Of the active Adult Drug Treatment Court participants, the drugs of choice by decreasing preference were heroin and other opiates (including prescription narcotics), alcohol, cocaine, and marijuana. Regional differences have been noted in Maine with opiates more prevalent in the drug court population in Washington County and alcohol in York County. Individuals with opiate addiction shift between prescription narcotics and heroin depending on availability and cost.

The yearly average total of urinalyses is 6,062. Of these, 98.8% are negative for detecting substance use. Given that the typical drug court participant has engaged in daily use of illicit

substances for years, this result suggests that the structure and treatment of drug court are effective in reducing substance use.

A comprehensive Adult Drug Treatment Court evaluation has not been performed since August 2006, based on a data cut-off of November 30, 2004.<sup>4</sup> Until 2009, a lack of funding has prevented the Judicial Branch and its partners from commissioning continued research of this scope and sophistication although internal audits have continued. The variables most affected by this deficit are recidivism outcomes and cost analyses. Historically, Maine's retention, graduation, and recidivism rates have been quite favorable compared to the national averages for Adult Drug Treatment Courts. Using the definition of recidivism as rearrest, fewer drug court participants (16.5%) recidivated during a 12-month post-program follow-up than a comparison group of adult offenders traditionally adjudicated (33.1%). Research performed by the federal Bureau of Justice Statistics has shown that 67.5% of state prison inmates were rearrested within three years after release.<sup>5</sup> In Maine, the three-year rate of return to prison is 33%.<sup>6</sup> Adult drug court participants were less likely than the comparison group to be rearrested on felony charges and less likely to commit violent crimes.

Past evaluations in Maine indicated that cost savings have been significant in terms of reduced prison and jail bed days and adjudication costs for new crimes. Rigorous cost/benefit studies elsewhere in the nation have demonstrated cost/benefit ratios as high as \$3.36 for every \$1.00 invested in drug court participants.<sup>7</sup> Maine's outcomes have been at the upper end of this range at \$3.30. It is important to recognize that when offenders with substance abuse disorders relapse, they tend to commit crimes, which translates into profound additional costs to victims and their families.

Not included in the cost savings generated by the Adult Drug Treatment Court are the high costs associated with drug-addicted babies. Given the near daily use of substances by participants prior to admission to the drug court, the emphasis on and accountability for abstinence has resulted in the birth of 49 drug free babies. National estimates have placed the medical and other costs associated with the care of these children to approach or exceed \$1,000,000 per child in the first 18 years of life.<sup>8</sup>

Effective October 1, 2009, the Judicial Branch was awarded a two-year federal grant to evaluate process and outcome variables totaling \$197, 929. This research will cover the period

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<sup>4</sup> Ferguson, A., McCole, B., Raio, J. *A process and site-specific outcome evaluation of Maine's Adult Drug Treatment Court programs*, 2006.

<sup>5</sup> Bureau of Justice Statistics (2002). *Recidivism of Prisoners Released in 1994*.  
<http://bjs.ojp.usdoj.gov/index.cfm?ty=pbdetail&iid=1134>

<sup>6</sup> Rubin, M. (2010). *The Maine System*. Presented at the *Corrections, Community, and Reentry Symposium*, University of Southern Maine, October 15, 2010.

<sup>7</sup> The Urban Institute. *To treat or not to treat: evidence on the prospects of expanding treatment for drug-involved offenders*, 2008.

<sup>8</sup> Huddleston, C.W., Marlowe, D.B., & Casebolt, R. (2008) *Painting the Current Picture: A National Report Card on Drug Courts and Other Problem-Solving Court Programs in the United States*. National Drug Court Institute.

since the inception of the Adult Drug Treatment Courts and provide an analysis of Maine's drug courts' fidelity to the national model guiding drug courts known as the *Ten Key Components* of effective drug court operations.<sup>9</sup> A copy of these components can be found in *Appendix A*. The Judicial Branch, the Executive Branch, and the Legislature will also be provided with an analysis of cost savings and recidivism as well as other outcome variables when the evaluation results are available in the fall of 2011. The delay in measuring recidivism for participants active in the Courts for the past year is that a minimum time post-drug court of one year is needed to determine if there has been any meaningful impact of future criminal behavior.

The research conducted in the past has been performed by the University of Southern Maine and Hornby Zeller Associates, a national research and evaluation firm with an office in South Portland. The process component of the research currently being executed has largely been completed. Each Adult Drug Treatment Court has been briefed on how faithful its functioning is to the drug court model by receiving a "report card". The next step is for each site to develop an action plan to implement improvements within a reasonable time frame.

### **Collaboration and Funding**

As noted above, the steering committee and the drug treatment court teams working at each site are excellent examples of effective cross-disciplinary and interagency collaboration. The Office of Substance Abuse contracts annually with the six community treatment provider agencies noted in the graph under *Program Structure* and with Maine Pretrial Services, the case management services agency. Adult Community Corrections are involved to varying degrees in the day-to-day operations of the drug courts: providing referrals, risk assessments; drug testing, and home checks.

As noted in the section above on substance abuse treatment, the primary source of funds for services is the Fund For A Healthy Maine. During calendar year 2010, the totals were \$387,724 for treatment services, \$550,209 for case management and drug testing, \$15,000 for management information system maintenance, \$120,000 for the Judicial Branch position which includes coordination of the adult drug courts among its duties and the coordinator's statewide travel, drug court training, and supplies. However, there has never been any additional funding from any source for drug court judges, court clerks, and the judicial marshals needed to operate a drug court. Prosecutors from the district attorneys' offices and the Office of the Attorney General, probation and parole officers, and representatives of the law enforcement community do not receive additional funding to participate with these Courts. The Chief Justice has been obliged to continue a moratorium on the development of new drug courts because of the lack of judicial resources.

### **Training and education**

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<sup>9</sup> *Defining Drug Courts: The Key Components*. Office of Justice Programs, U.S. Department of Justice. 1997 (first publication)



Presentations have been made by the Diversion and Rehabilitation Coordinator and other drug court practitioners to diverse groups around Maine and nationally regarding Adult Drug Treatment Courts. Individual drug court practitioners have participated in training on a variety of topics relevant to their individual disciplines and agencies. Federal grant funds have required the attendance of a small number of drug court practitioners at the annual conference of the National Association of Drug Court Professionals. However, it is particularly challenging to excuse judges from the bench to attend training. For this reason, judicial drug court training has been limited. As the recipient of federal grants, the Judicial Branch and its partners will be able to devote a small amount of funds to training during the next two years.

## Appendix A

### **The Ten Key Components<sup>10</sup>**

**Key Component 1:** Drug Courts integrate alcohol and other drug treatment services with justice system case processing

**Key Component 2:** Using a nonadversarial approach, prosecution and defense counsel promote public safety while protecting participants' due process rights

**Key Component 3:** Eligible participants are identified early and promptly placed in the drug court program

**Key Component 4:** Drug courts provide access to a continuum of alcohol, drug and other related treatment and rehabilitation services

**Key Component 5:** Abstinence is monitored by frequent alcohol and other drug testing

**Key Component 6:** A coordinated strategy governs drug court responses to participants' compliance

**Key Component 7:** ongoing judicial interaction with each drug court participant is essential

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<sup>10</sup> *Defining Drug Courts: The Key Components*. Office of Justice Programs, U.S. Department of Justice. 1997 (first publication)

**Key Component 8:** monitoring and evaluation measure the achievement of program goals and gauge effectiveness

**Key Component 9:** Continuing interdisciplinary education promotes effective drug court planning, implementation, and operations

**Key Component 10:** Forging partnerships among drug courts, public agencies, and community-based organizations generate local support and enhances drug court effectiveness.