



Research Summary



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THE EFFECTIVENESS OF DRUG TREATMENT COURTS

Question: Are drug treatment courts effective in reducing re-offending?

Background: Drug treatment courts were created to divert non-violent substance abusing offenders away from prisons and into community-based treatment programs. Since the inception of the first drug treatment court in 1989 in Florida, these courts have proliferated not only in the United States but also in Canada, Europe and Australia. Today, there are over 1,700 drug treatment courts around the world.

Three recent reviews of the efficacy of drug courts have found moderate benefits. However, the reliability of these findings may be affected by: (1) the quality of the evaluation and (2) the quality of the treatment provided to clients.

The quality of the evaluation can play a significant role in the interpretation of a study's results. For example, high dropout rates, an average of 45% reported by one review, can bias the findings towards positive conclusions of program effectiveness (i.e., high risk cases who never complete the treatment are removed from the evaluation leaving lower risk cases who are most likely to succeed).

The quality of treatment is another factor that can influence recidivism reduction estimates. Research has shown that treatment is most effective in reducing

re-offending when it adheres to the principles of risk, need and responsivity (RNR; see also Research Summary Vol. 2, No. 3). Higher quality treatments are those interventions that adhere to the RNR principles by matching the intensity of service to the offender's risk level, targeting risk-relevant characteristics (criminogenic needs) and employing cognitive-behavioural strategies to facilitate behavioural change.

Method: A systematic review was conducted that included all 96 studies used in the previous three reviews of the drug treatment court literature. Each study was reviewed and assessed according to evaluation and treatment quality. The quality of the study's evaluation was examined using the guidelines developed by the Collaborative Outcome Data Committee (CODC). The guidelines were developed by researchers and permit the categorization of studies into 4 groups: "rejected", "weak", "good" and "strong". Treatment quality was assessed by evaluating the program's adherence to the RNR principles.

Answer: The majority of studies (81%) fell into the "rejected" category of evaluation quality. For the remaining 25 studies, rated as "weak" or "good" (none were rated as "strong"), the results indicated that drug treatment courts reduced recidivism by approximately 8%.

When only the two studies of “good” methodological quality were considered, the reduction in re-offending was approximately 4%.

Regarding treatment quality, the results indicated that adherence to the RNR principles was also poor. Of the 25 acceptable studies, only 14 studies adhered to one or two of the RNR principles. None adhered to all three principles. Consistent with the existing literature of treatment effectiveness, when adherence to RNR principles increased, treatment effectiveness also increased (reductions in recidivism up to 31%).

This study highlights the issue that there are very few methodically-sound studies on which one can assess the effectiveness of drug courts at reducing recidivism.

Policy Implications:

1. Although reductions of 4 to 8% in recidivism were found, these findings

must be tempered by the generally poor methodologies used in evaluations of drug treatment courts and the quality of treatment.

2. To improve the effectiveness of drug treatment courts, the treatment offered should adhere to the principles of risk, need and responsivity.
3. Program evaluators and agencies that provide funding support for drug treatment programs should insure that methodologically sound evaluations are conducted in order to draw more reliable conclusions on the effectiveness of drug treatment courts.

Source: Gutierrez, L. & Bourgon, G. (2009). *Drug Treatment Courts: A Quantitative Review of Study and Treatment Quality*. User Report 2009-04. Ottawa: Public Safety Canada.

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