Review of the Adult Drug Court Program
in the Twenty-Second Circuit Court,
St. Louis, Missouri, to Improve
Retention of Young African-American
Male Participants

Phase I: Review of Treatment Services

TECHNICAL ASSISTANCE REPORT

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Review of the Adult Drug Court Program
in the Twenty-Second Circuit Court,
St. Louis, Missouri, to Improve
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Male Participants

Phase I: Review of Treatment Services

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I. Introduction

On June 30, 1999, Jeffrey Kushner, Drug Court Administrator for the Twenty-Second Judicial Circuit Drug Court in St. Louis, Missouri, requested technical assistance from the OJP Drug Court Clearinghouse and Technical Assistance Project (DCCTAP) at American University to help the program improve the retention of young African-American male drug court participants. The DCCTAP deferred providing technical assistance in response to Mr. Kushner's request until after its conduct of a statewide cultural diversity training workshop for officials involved with drug court programs in Ohio and addressing similar retention issues, in the event that training program and the experience and materials generated would be useful to St. Louis. Mr. Kushner was invited but, due to a scheduling conflict, was unable to attend the Ohio workshop.

In November, DCCTAP staff began to plan with Mr. Kushner the provision of specific technical assistance services to St. Louis. It was agreed that the technical assistance should be divided into multiple phases, with the first phase focusing on reviewing program operations and services, with a view to more specifically defining problems and issues to address during subsequent phases of technical assistance and training, including cultural diversity training and service needs and other areas of program practices that could be improved.

Darryl Turpin, Drug Court Field Coordinator for the Administrative Office of the Kentucky Courts, was assigned by the DCCTAP to conduct the first phase of technical assistance. Mr. Turpin, former Drug Court Coordinator for the Louisville, Kentucky Adult and Juvenile Drug Courts, has provided technical assistance services to numerous other drug court programs and was a member of the faculty for the Ohio training workshop.

On January 14-15, 2000, Mr. Turpin conducted a site visit to St. Louis at which time he reviewed the treatment component of the St. Louis Drug Court program. During the course of this visit he met with the following individuals:
Mr. Turpin also met with the other seven diversion managers as a group and with several program clients, some of whom were in the pre-treatment phase and some in path II. He also observed a therapy group at the pre-treatment program and reviewed court reports produced by the diversion managers for the drug court.
II. Overview of the St. Louis Adult Drug Court

A. Introduction

The St. Louis Adult Drug Court began operation in April 7, 1997. Commissioner Peebles has been the drug court commissioner since January 1999. The Drug Court treatment program includes drug testing, individual and group counseling, as well as regular attendance at twelve-step meetings. Treatment is provided through the combined efforts of the Greater St. Louis Treatment Network of Providers, which is made up of eight different service providers. Services provided include: detoxification, intensive outpatient treatment, outpatient treatment, and residential treatment.

The St. Louis Drug Court is a “voluntary” program. Agreement to participate in the program results in a diversion of the criminal case from the normal criminal docket, with completion of the program resulting in the ultimate dismissal of the charges that brought the client to drug court.

B. Program Enrollment

At the time of the site visit, a total of 755 individuals had been enrolled in the program, with 288 admitted during 1999. Approximately 88% of program participants have been male, with 85% of program participants African American. Currently, there are approximately 270 clients participating in the program, 38 (14.5%) of whom are African American males between the ages of 18 and 22 without a high school diploma. Since the program began operation, the unsuccessful termination rate for these young African American males has been over 90%. Data is not available on the retention rate for African American males with a high school diploma.

C. Program Staff

The Drug Court Team includes: the Commissioner, an Assistant Circuit Attorney (prosecutor), an Assistant Public Defender, the Drug Court Administrator, a Treatment Liaison, and the Diversion Managers. The Diversion Managers are probation officers hired specifically for the drug court program. The Commissioner, assistant prosecutor, assistant public defender, and Drug Court Administrator, are all assigned to the drug court program on a full time basis as are the seven Diversion Managers and their supervisor.

D. Eligibility and Screening

Initial client screening is conducted by the pretrial Bond Commissioner. All felony offenders not charged with violent charges and with some indication of a substance abuse problem are referred to the Drug Court. The prosecutor reviews the defendant's criminal history. Offenders who have more than three prior felony convictions or have a conviction for or a history of violent crimes they are not eligible for the program. As part of the screening process, defendants undergo a treatment assessment by a treatment professional and a urine analysis test is administered. This assessment and testing is conducted to determine the extent of any substance abuse problems. The defendant is then referred to the public defender. The public defender explains the drug court program to the defendant.

The screening process usually occurs on Monday for offenders who have been arrested the previous week. The Thursday following the interview process, the Drug Court team staffs the defendants who are deemed to be eligible for the program. Following this staffing, a Drug Court Orientation hearing is held and eligible defendants are placed in the program. Treatment services begin within 48 hours of the initial referral to the Drug Court program.

E. Program Phases

The program is made up of three phases/paths and lasts a minimum of one year. Path I is the
pre-treatment component which lasts six weeks. Pre-treatment includes: orientation, drug/alcohol education, an introduction to AA/NA meetings, attendance at AA/NA meetings (twice weekly), random urine drug screens, weekly contact with a diversion manager, and a hearing with the commissioner every two weeks. All clients are placed initially on this path except for women who are assessed to be in need of gender specific treatment. These women are placed in programs which provide specific services for this population.

While in Path I, clients continue to be assessed on an ongoing basis, using such factors as UA test results, age, background, primary drug of abuse, whether the client is appropriate for methadone treatment, or in need of medical or social model detox. In order to graduate from Path I the client must have had two “good weeks”, e.g., clean urine tests, attendance and participation in treatment groups, attendance at self help group meetings and have obtained a twelve-step sponsor.

Upon completion of Path I, the client enters Path II, which lasts a minimum of four months. Path II treatment consists of judicial contact every two weeks, outpatient group counseling (approximately twice weekly), individual counseling, AA/NA meetings (twice weekly), random urine drug screens, initial relapse prevention planning, and obtaining/maintaining employment and/or involvement in an academic program.

Upon completion of Path II, the client enters Path III, which is an after-care component that lasts a minimum of 6 months. Path III treatment includes group counseling (once weekly), AA/NA meetings (twice weekly), random urine drug screens, relapse prevention, maintaining employment and/or involvement in an academic program, monthly contact with the Diversion Manager, and monthly court appearances. Upon completion of Path III, the client is eligible to be considered for graduation. Graduation requirements include: a minimum of twelve weeks without any major sanctions, completion of treatment tasks, payment of drug court fees (minimum $250), and employment or enrollment in a formal education or training program.

III. Observations

A. Program Strengths

1. Strong Community Support
   The St. Louis Drug Court is strongly supported by both the legal community and the treatment community.

2. Drug Court Clients' Access a Continuum of Treatment Services
   The treatment community servicing the drug court consists of eight treatment providers who give drug court clients top priority for all services on the treatment continuum. Depending on the individual treatment needs of the client, drug court staff can access treatment services directly by telephone.

3. Ongoing Assessment Process Matching Clients to Treatment Services
   The Drug Court clients are matched to treatment services through an ongoing assessment process, based upon client needs, and appropriateness of treatment services. As noted earlier, there are also treatment facilities for women that specialize in gender specific issues.

4. A High Rate of Young African-American Males Accepted By the Program
   A high rate of young African-American males are referred and accepted into the drug court program. As noted earlier, eight-five percent of the clients in the program are African-American. Eighty-eight percent of the clients are men.
5. **Program Utilizes a Bifurcated Systems of Responses and Sanctions for Relapse and Noncompliant Behavior**

The Drug Court uses a bifurcated system of responses to client relapse and non-compliant behavior. The program responds to new drug use with therapeutic responses ranging from a journal assignment to increased frequency or intensity of treatment to placement in residential treatment. Sanctions for non-compliant behavior, such as missing UA tests, range from community service to spending time in jail.

6. **The Drug Court Team is Receptive to New Ideas to Improve Program Performance**

The Drug Court team appears receptive and flexible when presented with suggestions for improvement and eager to make the program as effective as possible.

**B. Areas for Improvement:**

1. **Information Used at Drug Court Sessions Tends to Focus on Non-compliant Client Behavior with Little Reporting of Positive Accomplishments**

   The Drug Court sessions tended to focus on what clients were doing wrong, and neglected to focus on any positive aspects or changes occurring in client lives. This focus may be due to the way drug court reports are structured and written by the Diversion Managers in their effort to report the degree of participant compliance with drug court program conditions but the omissions regarding participant accomplishments results in the Commissioner being deprived of valuable positive information with which to engage and encourage program participants. Focusing only on non-compliant, negative information also reinforces the perception on the part of the clients that they are not making affirmative progress in the program.

*Review of the Adult Drug Court Program in the Twenty-Second Circuit Court, St. Louis, Missouri, to Improve Retention of Young African-American Participant. Phase 1: Review of Treatment Services. OJP Drug Court Clearinghouse and Technical Assistance Project. American University. March 2000.*
2. **Range of Available Therapeutic Interventions Appears Limited**

The provider network appears to provide only "traditional" treatment. The program would probably benefit by developing therapeutic techniques to address the needs of the younger clients, who might still be functioning developmentally at an adolescent level. The addition of therapeutic techniques to address the needs African-Americans, i.e., provide an Afro-centric treatment milieu, should lead to improved program outcomes.

3. **Treatment Programming May Not Be Intensive Enough for Certain Clients in the Program**

Path II outpatient treatment which consists of twice weekly outpatient group counseling, individual counseling, and twice weekly AA/NA meetings, does not appear to be intensive enough to meet the nature of the needs of the younger clients in the program. Many of the younger African American males in the program are not necessarily motivated to engage in treatment interventions at this point of their lives due to their current lifestyle and drug use patterns. As a result, a greater frequency of treatment contacts is needed to engage and retain these clients in treatment. The Path II treatment design should include at least six hours of group counseling per week -- preferably done over a 5-6 day a week schedule and not less than four treatment contacts per week. The group treatment should still be supplemented by individual counseling and 12-step meetings.

4. **The Frequency of Drug Testing May Not Be Sufficient**

The program uses a urine drug screen regimen that requires clients to "drop" urine samples randomly six days a week (no testing is done on Sundays). But the frequency is such that, on the average, clients are only tested 1.3 times per week while in Paths I and II and even less while in Path III. In order improve program effectiveness, urine drug screens should be increased to at least

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twice weekly on a random basis, especially while in Paths I and II.

5. **Role of the Diversion Managers Involved with the Drug Court Program Appears Unclear**

Presumably as a result of training and professional experience as probation officers, with non-drug court clients, the Diversion Managers tend to focus on observing and reporting non-compliant behaviors as opposed to developing creative interventions to assist and involve the clients in the drug court program. Client strengths and positive progress in treatment appear to go unrecognized. There also appears to be a lack of consistency among the Diversion Managers. At the time of the site visit, their roles and responsibilities appeared unclear and undefined. They also seemed to be doing the same job in very different ways. Several Diversion Managers reported feeling that their opinions were not respected by other members of the drug court and that they did not feel like team members. Some of this frustration may be resulting from differences in the way clients are supervised and non-compliant behavior is responded to under the drug court model when compared with traditional probation practices. Clarifying the roles of the probation officers operating in the drug court model should result in improved and more consistent case management practices, higher program retention rates, and reduced job frustration and turnover.

6. **Lack of Process for Clients to Report and Discuss Program Concerns**

There did not appear to be a standard, written process or other mechanism by which clients could present and discuss concerns they may have with the program or the appropriateness of behavior of program staff. Several drug court staff members and clients reported, for example, that certain staff addressed clients inappropriately, i.e., name calling and yelling.

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7. The Facility Where the Pre-treatment Program is Located May be Interfering With the Treatment Process

The pre-treatment program is currently located in a community facility which apparently also provides programming unrelated to the pretreatment program. The space where pre-treatment groups are conducted was disorganized, not clean and located in an environment which did not reflect a healthy drug free lifestyle. The facility was dirty, but more critically, persons “hanging out” at the facility appeared to be involved in a drug/criminal lifestyle. The presence of these individuals at the same facility could interfere with the treatment progress of clients in the program.
IV. Recommendations

**Recommendation One:** The lack of consistency in roles and responsibilities of Diversion Managers should be addressed. The expectations and responsibilities of the Diversion Managers should be clearly defined. The Diversion Managers could benefit from additional training on the drug court model and how their roles and professional responsibilities differ from those of the traditional probation officer.

**Recommendation Two:** When applying for the position of Diversion Manager, future applicants should be made aware of the specific and often different case management practices needed in a successful drug court program. The Drug Court team should develop a new job description for the Diversion Manager position, clearly stating the roles, duties and expectations of the Diversion Managers and suggest applicant scoring criteria to be used in the selection and hiring process for new Diversion Managers for the program.

**Recommendation Three:** The drug court team, especially the Diversion Managers, could benefit from strength-based competencies training. By using strength-based assessment tools and learning to write progress reports which incorporate strength-based concepts, they could provide the Judge with more balanced and positive information about program clients to use during court sessions with the clients.

**Recommendation Four:** The Diversion Managers should develop creative intervention strategies for engaging young African-American males in the drug court program, expanding upon the traditional role of observing and reporting non-compliant behavior.

**Recommendation Five:** The current traditional treatment modalities of the Provider Network need to be enhanced with the development and implementation of a specialized therapeutic track for young African-American males. Establishment of this track should improve program retention rates for this population. This track should be culturally relevant and developmentally appropriate for the population and incorporate lifeskills, literacy and employment skills training. The St. Louis Drug Court team could benefit from specialized technical assistance in the development of this curriculum to ensure specific goals and objectives are met.

**Recommendation Six:** The drug court team and staff connected with the drug court should be provided with cultural competency and sensitivity training in order to improve the effectiveness of the program in engaging young African-American males provide. This training

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could be accomplished with a two-day workshop.

**Recommendation Seven:** The program should develop a standard, written process or other mechanism by which clients can discuss concerns they have with the program and/or program staff.

**Recommendation Eight:** The frequency of outpatient treatment services should be intensified, especially for clients in Path II. The treatment design should include at least six hours of group counseling per week -- preferably done over a 5-6 day a week schedule with not less than four treatment contacts per week. The group treatment should continue to be supplemented by individual counseling and twelve step meetings.

**Recommendation Nine:** The frequency of urine drug screens should be increased. Currently, the testing frequency averages only 1.3 tests per week for clients in Paths I and II and even less for those in Path III. In order improve program effectiveness, urine drug screens should be increased to at least twice weekly on a random basis, especially in Paths I and II.

**Recommendation Ten:** The program should explore the possibility of relocating the pre-treatment phase of the program into an environment that is clean and away from persons who are not in the program and who may be interfering with program participants achieving a drug free lifestyle.

**Recommendation Eleven:** Team building activities for all individuals involved with the drug court should occur on an on-going basis, paying particular attention to the current need to more closely involve the diversion managers with the rest of the team.
V. Summary

The Twenty-Second Circuit Court Adult Drug Court Program in St. Louis appears to be a well-established program enjoying the strong support of both legal and treatment communities. The program has a continuum of treatment options to which Drug Court staff have ready access for clients in the program. Clients are matched to treatment services through an ongoing assessment process, based upon client needs and appropriateness of treatment services. Specific treatment programming for women in the program is provided that specializes in gender-specific issues. The program utilizes a number of therapeutic interventions in response to continued drug usage and other graduated sanctions for non-compliant behavior.

The program collects information systematically and uses this information to improve program performance. It was through the analysis of this information that it became apparent that program retention rates for young African-American male clients was very low.

The recommendations presented in this report is designed to strengthen the drug court program, generally and in respect to its retention of young African American male clients. Several recommendations focus on improving program case-management, while others concentrate on improving the quality of treatment. One recommendation, not unlike in concept to the gender specific treatment services currently available for women in the program, is for the creation of specific, specialized therapeutic services for young African-American males which is

culturally relevant and developmentally appropriate for these young participants.

It should be noted that many drug court programs in the country are experiencing similar retention difficulties with young males generally, as well as young African American males in particular. Special programming as well as a fullscale review of program policies and procedures, such as the St. Louis Drug Court is now undertaking, can go a long way toward improving success with these young people. The Twenty-Second Circuit Court Adult Drug Court Program team should be commended for its recognition of this critical need and its willingness to seek ways to improve program practices to address it.