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Australian Institute of Criminology

Final Report on the North Queensland Drug Court

Jason Payne

Technical and Background Paper

No. 17

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Disclaimer

This research report does not necessarily reflect the policy position of the Australian Government.

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Executive Summary

In November 2002 Queensland's *Drug Rehabilitation (Court Diversion) Act 2000* was amended to enable the establishment of a pilot program drug court in Cairns and Townsville. The aim of the program was to target and divert into treatment, rather than prison, high-volume property or drug offenders whose offending is attributable to their drug dependency. The program consists of the Intensive Drug Rehabilitation Order (IDRO), a three-phase rehabilitation plan aimed at ensuring an offender's abstinence from drug use and crime, while improving their health, family and social connectedness.

In 2003, the Australian Institute of Criminology (AIC) completed the final outcomes evaluation of the South East Queensland Drug Court. The AIC was subsequently asked to extend its evaluation to the two northern courts. As such, this evaluation uses the quantitative data extracted from the North Queensland Drug Court database, a purpose built data capturing system for all offenders referred to the program, and offending information from centralised QPS criminal history records. The quantitative analyses are supplemented by qualitative information obtained during interviews with drug court team members and participants. The aim of the evaluation is to document the implementation, operation and outcomes of the North Queensland Drug Court pilot program for 26 months from its inception in 2002.

Referral and participation

In terms of referral and participation, 243 offenders had been referred to the pilot program for assessment as at 31 December 2004. Of these, 120 (49%) were issued with an Intensive Drug Rehabilitation Order (IDRO) while 123 (51%) were not admitted to the program.

Of those issued with an IDRO:

- 45 (38%) had been terminated and 10 (8%) had absconded;
- there were 41 active participants, the majority of whom were in phase one; and
- there were 24 graduates (20%).

In terms of offenders referred to the North Queensland Drug Court, the general profile indicates that:

- the majority were unemployed males aged in their late twenties, who were married or living in a de facto relationship;
- only 22 per cent of referred offenders were female and eight per cent identified as Aboriginal or Torres Strait Islander;
- referred offenders were most likely to have been dependent on either amphetamines or cannabis in the six months prior to referral, while only 20 per cent reported being dependent on opiates; and
- referred offenders had an average of 40 lifetime charges recorded by the police, the majority of which were for property offences. One third had been charged as a juvenile, with the average age of 20 years at first charge.

Procedural issues

Qualitative interviews with drug court team members and participants revealed a number of issues for the operation and implementation of the North Queensland Drug Court pilot program. The first was lower than expected referral rates, which has seen the North Queensland Drug Court program maintain an average current participation rate of 50, roughly 30 below the funded cap. A number of reasons have been attributed to the low referral rate, but most likely is that the referral rate is an accurate representation of

the actual number of eligible offenders being processed through the courts, and the funded cap of 80 participants was an unrealistic target given current eligibility criteria. Improving referral rates in North Queensland will be assisted through:

- modifications to the eligibility criteria, particularly in relation to the 12-month maximum prior imprisonment criteria; and
- more efficient and effective targeting of treatment and rehabilitation services to minimise termination rates.

This evaluation also noted low referral rates for Indigenous offenders. The qualitative interviews highlight a number of barriers to referral, including:

- limited dissemination of program information to local Indigenous communities and legal practitioners, including the Aboriginal Legal Aid Service;
- problems in communicating and establishing a good rapport with Indigenous offenders at the time of referral; and
- the application of eligibility criteria which inadvertently prohibit many Indigenous offenders from participating in the drug court program.

Offender assessment forms an integral component of the North Queensland Drug Court program. The first assessment begins at the time of referral, where the referring magistrate must give consideration to the offender's 'legislative eligibility'. This includes whether the offender is likely to serve a term of imprisonment. This evaluation notes a high proportion of ineligible determinations due to offenders not being likely to serve imprisonment, and suggests that greater attention and assessment is needed to prevent the referral of ineligible offenders from the magistrates' courts. This might be achieved through the ongoing education of magistrates and other legal representatives to ensure the consistent application of eligibility criteria at the referral stage.

The second stage of assessment occurs after referral but prior to program placement. The qualitative interviews indicated a need for more frequent application of psychological and mental health assessments along with better tools for assessing offender motivation and willingness to participate. Continued investment and improvement in assessment tools will help reduce terminations and improve long term drug court outcomes.

Program operation

The North Queensland Drug Court program has operated since November 2002. In this time:

- participants have, on average, taken 138 days to complete phase one, 115 days to complete phase two and 101 days to complete phase three;
- forty-seven participants (39%) had absconded at least once while on the drug court program. The average number of days to abscond was 51. The risk markers identified for absconding were having a prior history of absconding (especially in the preliminary assessment phase) and being dependent on opiates;
- the majority of participants undertook either residential or non-residential drug treatment. An average of 30 days was spent in residential treatment for the first episode;

-
- participants had a total of 2258 court appearances;
 - a total of 778 treatment team episodes were conducted;
 - a total of 5636 urinalysis tests had been completed, 18 per cent of which were positive. The majority of positive tests were for cannabis, followed by amphetamines;
 - the most frequently used sanction was imprisonment, followed by community service; and
 - rewards were given more frequently in Cairns. Overall, the most common reward was a decrease in community service.

Operational issues

There were a number of implementation issues identified during this evaluation of the North Queensland Drug Court. These issues, many of which have been overcome through the implementation of the joint practice and procedures, were noted by either drug court participants or drug court team members as problems likely to have resulted in less favourable outcomes for the drug court. In summary, these included:

- the limited provision of after-hours supervision and treatment services;
- the location of residential and non-residential treatment services within close proximity to areas frequented by drug users;
- the lack of emergency drug court accommodation for situations when drug court clients are required to vacate a residential treatment service; and
- participant relocation resulting in the displacement of offenders away from family.

A unique opportunity to interview terminated drug court participants allowed an examination of the key issues and problems faced by those who are 'unsuccessful'. The interviews revealed the importance of a stable family relationship in assisting in the rehabilitation process, and the problems associated with other psychological and emotional issues experienced by participants. This highlighted the need for an ongoing monitoring and review process whereby the assessment and case management tools used by the North Queensland Drug Court can be examined for their effectiveness and appropriateness for drug court clientele.

Regional implementation

The North Queensland Drug Court pilot program operates within the Cairns and Townsville magistrates' courts. The programs were established under the same legislation and with the same operating procedures. A single Drug Court Coordinator was responsible for overseeing the operation of both programs. Nevertheless, this evaluation noted some differences between the two courts:

- a greater number of referrals were made in Townsville (135 versus 108);
- the average number of days taken to achieve a successful referral was higher in Cairns, and the average number of pre-IDRO court appearances was higher;
- offenders referred in Townsville were younger, less likely to be married or living in a de facto relationship, less likely to be employed and more likely to have been a drug user of more than one illicit drug in the six months prior to their referral; and

-
- in Cairns, referred offenders had a larger number of prior drug charges, but were older when first apprehended and charged for any offence.

Comparative data were provided to examine the differences in both participant profile and program operation between the North Queensland and South East Queensland Drug Court pilot programs. The comparative data for South East Queensland were drawn from the 2003 final evaluation (Makkai & Veraar 2003). This comparative analysis indicates that participants in North Queensland:

- were the same age, slightly more likely to be female, and less likely to report having either suicidal thoughts or Hepatitis C;
- were more likely to have used cannabis in the six months prior to referral, but less likely to have used opiates and amphetamines, and less likely to report having previously accessed drug treatment;
- completed each phase in fewer days, with the average time to graduation 120 days less in North Queensland;
- were less likely to abscond during phase one; and
- were sanctioned at a higher rate, although being less likely to be given imprisonment as a sanction.

These differences have important implications for the development and implementation of regional drug court programs. Firstly, offender differences indicate the varying treatment and supervision needs of those who are likely to access the program. This means that supervision and treatment models may need to be adjusted/modified to accommodate these needs – and may account for the procedural differences which have developed between the courts since 2002.

Secondly, from a planning and implementation perspective, the differences between locations also raise questions about pre-implementation feasibility assessment, and whether further analysis can be undertaken prior to the establishment of a regional drug court program to ensure the most appropriate treatment and supervision model is implemented. Should the expected clientele vary by location, the establishment and funding of treatment and rehabilitation programs may also need to be adjusted to accommodate these differences.

Drug court outcomes

This evaluation was tasked with examining whether the North Queensland Drug Court pilot program has been able to reduce the offending and drug use of participants while improving their health and social function. In terms of re-offending, this evaluation finds that as at 31 December 2004:

- post-entry re-offending is significantly reduced for those who successfully complete the drug court program;
- of those successful participants who do re-offend, the time taken to re-offend is significantly longer;
- all participants recorded reductions in offending after admission to the drug court program, and the reductions were greatest amongst the graduates; and
- there is a significant termination effect, where terminated offenders re-offend sooner than both graduates and the comparison group.

Comparative analysis was used to examine differences in re-offending between the North and South East Queensland Drug Court pilot programs. These analyses suggest that:

- prior to referral and admission, participants in North Queensland were, on average, apprehended by the police more often;
- the post-entry re-offending estimates for graduates were the same in North and South East Queensland;
- the post-entry re-offending estimates for terminated participants were also the same in North and South East Queensland; and
- despite differences in the pre-referral arrest frequency, the post-entry arrest frequencies were improved in both North and South East Queensland – with graduates in North Queensland demonstrating a greater overall reduction in arrest frequency.

At this early stage, statistical analyses are complicated by small sample sizes making it difficult to conclude whether the drug court program is achieving its primary objectives. Nonetheless, the results so far indicate that the North Queensland Drug Court program has achieved comparable results to those indicated in the South East Queensland evaluation (Makkai & Veraar 2003), although further analysis is needed after a greater number of participants have been referred to and graduated from the program.

In terms of drug use and health outcomes, this evaluation finds evidence that:

- both graduates and terminates reduced the level of their drug use for the duration of their participation, as indicated by the declining number of positive drug tests;
- graduates of the drug court program reported significant improvements across the range of physical and mental health measures of the Short Form 36 Health Survey; and
- at the time of graduation, participant health status was equivalent to Queensland population norms.

No data were available from participants no longer under supervision (both graduated and terminated) in relation to drug use and health. As such, this evaluation cannot determine whether the reductions in drug use and improvements in health are sustained in the long term. The lack of systematic health and drug use data during the post-graduation/termination period has been noted in many other drug court evaluations in Australia and overseas. It is clear that further research is needed to assess the long term impact of the drug court program.

Post-graduation issues

Finally, this evaluation was supplemented with qualitative interviews with a variety of participants of the North Queensland Drug Court program. In terms of graduates:

- the drug court program was reported as a unique and worthwhile opportunity for dealing with drug use and offending;
- post-graduation offending and drug use appear linked to changes in personal and family relationships;
- drug re-use was often reported as mechanism for dealing with stressful situations; and
- other areas, such as psychological and mental health issues, may also be linked to post-graduation re-offending.

These interviews highlighted the importance of additional psychological assessment and relationship counselling services for participants on the drug court program. More research is needed to isolate and understand these factors in greater detail so that modifications can be made to improve the drug court outcomes for all participants.

Introduction

Although the use of illegal drugs has been on the political and community agenda for the last three decades, in the 1990s there was growing concern over the extent to which criminal offending, particular property crime, was due to drug dependency. The drug of most concern was heroin. In recent years, however, there has been a shift in focus to amphetamine type stimulants, which seem to predominate outside of Sydney (Schulte, Mouzos & Makkai 2005). One policy response to the emergence of drug-related crime was the establishment of a trial drug court program in South East Queensland in June 2000.

The *Queensland Drug Rehabilitation (Court Diversion) Act 2000* outlines the objectives of the drug court. These are to reduce:

- the level of drug dependency in the community;
- the level of criminal activity associated with drug dependency;
- the health risks to the community associated with drug dependency; and
- the pressure on resources in the court and prison system.

At the end of 2002 an evaluation by the Australian Institute of Criminology found that those who had completed the drug court program:

- had significantly lower levels of recidivism than those who had been terminated from the program;
- the average time to re-offending was longer than for offenders not placed on the program or those having failed to complete it; and
- the level/frequency of post-graduation offending was reduced (Makkai & Veraar 2003).

In addition, both graduates and those who were terminated from the program were significantly less likely than non-participants to have been convicted of a drug possession offence. These results are not dissimilar to those seen in the evaluation of drug courts across Australia. For example:

- the New South Wales Adult Drug Court evaluation found that graduates performed more favourably than non-participants in terms of frequency and time to re-offending (Lind et al. 2002). Moreover, the general health and well-being of drug court participants was shown to have improved (Freeman 2002);
- the New South Wales Juvenile Drug Court and the Victorian Adult Drug Court evaluations found that graduates re-offended less frequently (Social Policy Research Centre 2004; King & Hales 2004); and
- the Perth Drug Court (adult and juvenile) evaluation was unable to demonstrate any tangible reductions in re-offending, although this was mainly attributed to significant differences in the average length of time that participants spent on the drug court program (maximum six months) (Crime Research Centre 2003).

There is a general paucity of research on the extent of drug use in regional cities such as Cairns and Townsville. The available research suggests that the use and abuse of illicit drugs is likely to have equally impacted on these regional centres as it has on major cities. Drug arrest statistics, for example, show that between 1995/96 and 2000/01, the number of reported drug offences increased by 20 per cent. The total number of reported drug offences in 2000/01 was 1669 in Cairns and 1335 in Townsville (Jarred 2002).

In November 2002, the *Drug Rehabilitation (North Queensland Court Diversion Initiative) Amendment Bill 2002* amended the Act and paved the way for the establishment of a pilot program drug court in North Queensland. The program was to be divided between two locations – Cairns and Townsville. Each was to have a separate drug court team while being centrally managed by a single Drug Court Co-ordinator from the Queensland Department of Justice and Attorney General. Both courts started on 13 November 2002.

This interim report is a process and outcomes evaluation that relies on quantitative data from the North Queensland Drug Court database and qualitative data from consultations and interviews with various stakeholders and drug court participants. It is the final evaluation report by the Australian Institute of Criminology into the efficacy of the North Queensland program in achieving the objectives of the *Queensland Drug Rehabilitation (Court Diversion) Act 2000*. It focuses on describing how the North Queensland pilot program operated during the initial 26-month implementation period. To achieve this, four data sources were utilised:

- quantitative data extracted from the North Queensland Drug Court database as at 31 December 2004;
- official criminal history records extracted from the centralised QPS database;
- consultations with key North Queensland stakeholders and service providers between December 2003 and February 2005; and
- qualitative interviews with drug court participants in March 2004 and February 2005.

Drug court database

The Queensland Department of Justice and Attorney General extracted all available data as at 31 December 2004 from the North Queensland Drug Court database. In total, the AIC received 21 text-format (.txt) data files. A match and merge process was then undertaken by the AIC to convert the files into a single file for use in the statistical analysis software package Stata 8.2 (StataCorp 2003). Unlike the initial stages of the South East Queensland Drug Court evaluation, there were no significant data deficiencies. Missing data were minimal. Where they did occur, the information was in most cases attainable through further consultation with members of the drug court team.

Interviews with key informants

Statistical data analysis alone does not provide enough detail about the policies and procedures likely to have an impact on the implementation of the North Queensland Drug Court pilot program. The AIC visited the two North Queensland courts on three occasions throughout the evaluation to conduct qualitative interviews with the drug court team members, drug court participants and other key stakeholders.

A total of 61 face-to-face interviews were conducted with current or past participants of the North Queensland Drug Court program. The sample consisted mostly of current participants, however four were undergoing preliminary assessment, six had graduated and 11 had been terminated (see Table A). For current participants, most interviews were conducted at the office of the Department of Corrective Services (DCS). Terminated participants (those currently serving time in prison) were identified by the Drug Court Co-ordinator and interviews were conducted at either the Stuart Creek (Townsville) or Lotus Glen (Cairns) correctional facilities.

All participants were assured that the information they provided would not be used in a way that would identify them. The responses are therefore used as examples of problems or concerns faced by participants and are indicated by gender and phase status only.

Table A: Drug court participant interviews, by phase

Drug court phase	n	%
Preliminary assessment	4	7
Phase 1	18	30
Phase 2	11	18
Phase 3	11	18
Graduated	6	10
Terminated	11	18
Total	(61)	(100)

Source: Australian Institute of Criminology, Participant Survey 2004-2005 [computer file]

Structure of the report

The focus of this report is to describe the operation and outcomes of the North Queensland Drug Court since its inception in November 2002. It is divided into three main sections:

1. an examination of the drug court referral process;
2. an examination of the core components of the drug court program, as undertaken by offenders who are successfully granted an Intensive Drug Rehabilitation Order (IDRO); and
3. an examination of the drug court's re-offending and health outcomes.

The statistical analyses used in this report are supplemented, where appropriate, with the opinions of both key stakeholders and participants.

1 Drug Court Referrals

1.1 Program referrals

Referrals at 31 December 2004

After a person is arrested and brought before either the Cairns or Townsville magistrates' court, the presiding magistrate may refer that offender to the pilot program drug court for assessment. In doing so, the referring magistrate will complete the referral documentation (Form 1) giving consideration to whether the offender:

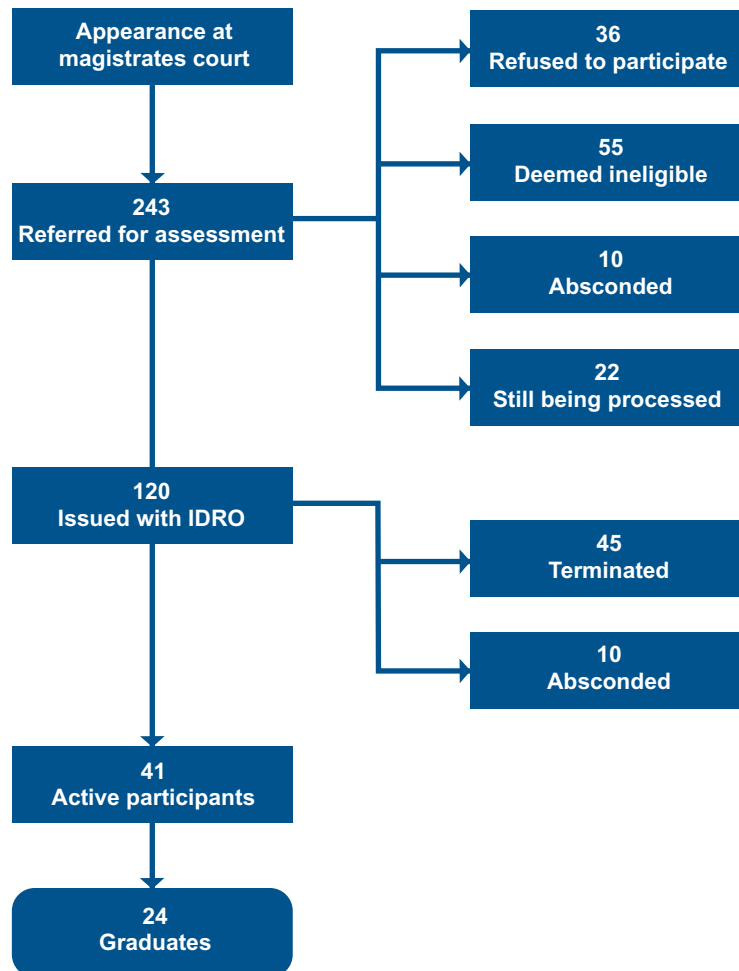
1. is likely to be imprisoned for the related offence (for less than three years);
2. resides within the relevant drug court jurisdiction;
3. has not previously served a disqualifying term of imprisonment;
4. pleads guilty or intends to plead guilty to the referring offences; and
5. has a drug problem and wishes to participate in the drug court program.

As at 31 December 2004, the North Queensland Drug Court pilot program had received 243 referrals. Of these, 120 (49%) met the criteria of the drug court program and were admitted to an Intensive Drug Rehabilitation Order (see Figure 1.1). The remaining 51 per cent of referred offenders had not been admitted to the program. Fifty-five (23%) were deemed to be ineligible, 36 (15%) refused to participate in the program, 10 (4%) absconded during the preliminary assessment phase and have subsequently had warrants issued for their arrest, and 22 (9%) were still being assessed by the drug court teams.

Of the 120 offenders (49 per cent of referrals) who were issued with an IDRO, 45 (38%) had been terminated from the program, 10 (8%) had absconded from the program and were yet to be re-apprehended by the police, 41 (34%) were actively participating and 24 had successfully completed the program and graduated. Graduates represented about 10 per cent of all offenders referred to the program, and 20 per cent of those who were eligible and issued with an IDRO.

Of the 243 referrals, 12 referral episodes were attributable to 10 offenders who had been re-referred to the drug court program for a second or third time. Eight offenders had been referred twice, and two offenders were referred three times. In total, five per cent of referral episodes were for offenders who were re-referred, resulting in 231 individual referred offenders. By court location, the majority of re-referred offenders were from the Townsville court (eight offenders) compared with Cairns (two offenders). Eight of the re-referred offenders were previously deemed ineligible, one had been previously terminated and one had graduated. The outcomes of all subsequent re-referrals were varied – six resulted in placement onto the IDRO, four were ineligible or had absconded, and two were still awaiting an assessment outcome.

Figure 1.1: Drug court assessments, participant status at 31 December 2004



Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Referral trends

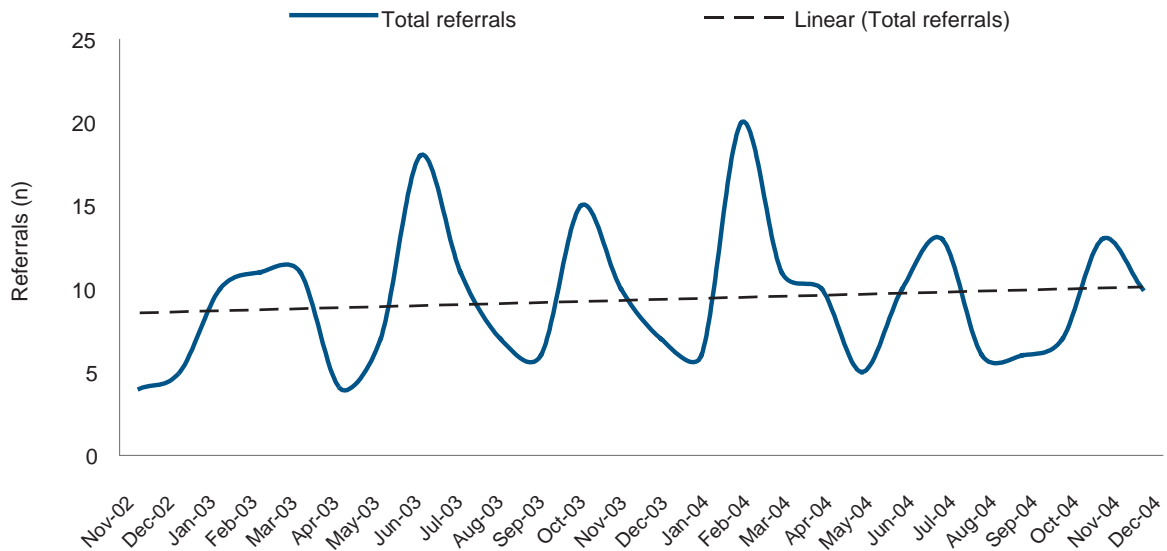
Figure 1.2 illustrates the number of referrals by month from the commencement of the program in November 2002. The highest number of monthly referrals was 20 (eight per cent of all referrals), which occurred in February 2004. The lowest number of referrals to occur in any single month was four in November 2002 and April 2003.

While the linear trend in the monthly referral data indicates a modest (but not significant) increase over the life of the pilot program, there also appears to be a quarterly effect, with referrals peaking every four to five months. Autocorrelation, a technique used to determine patterns in time series data, indicates a significant positive autocorrelation at a lag of four months ($ac=0.5365$, $p=0.0018$). This indicates that the number of referrals in any month is significantly correlated with the number of referrals occurring four months earlier – evidence of a clear quarterly trend in referral numbers. The exact nature of this trend is still unknown, but there are two possible explanations worthy of further investigation.

1. Referral bias – where some magistrates or legal practitioners are more willing to seek drug court referral than others. For example, a slump in referrals might reflect periods where magistrates who are favourable to the drug court program have been required to attend circuit court.

2. Referral availability – where similar patterns exist in the number of potential referrals appearing before either of the two magistrates' courts.

Figure 1.2: Total number of referrals, by month (number)

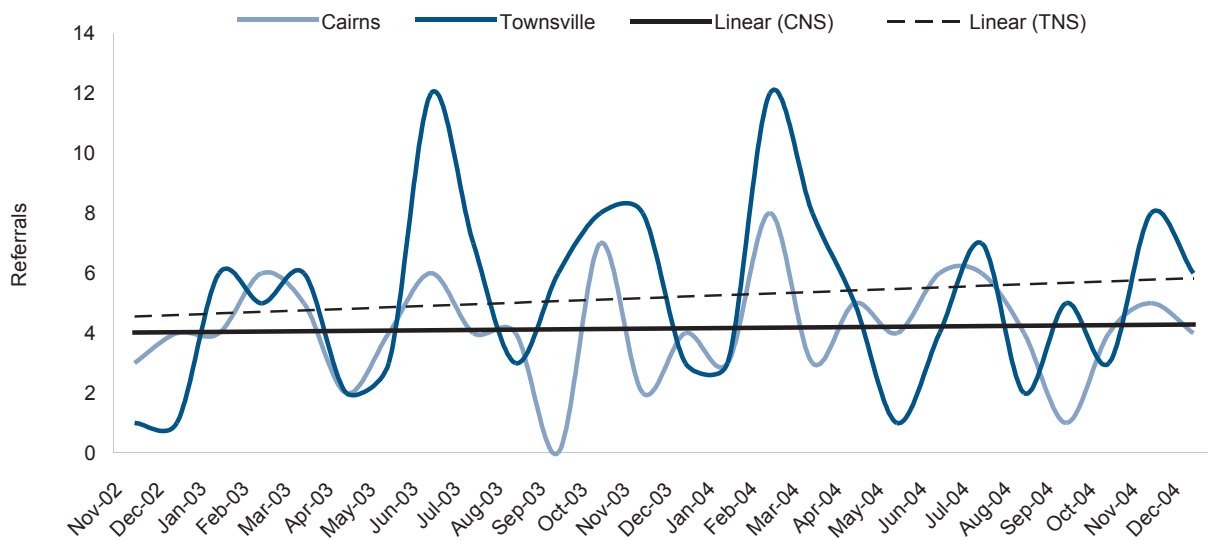


Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Figure 1.3 shows the number of monthly referrals by court. Over the life of the pilot program there were 135 drug court referrals in Townsville and 108 in Cairns. The highest number of monthly referrals was in Townsville in June 2003 and November 2004 (12 referrals). The highest number of referrals in Cairns for any month was eight in February 2004. The only month when either pilot program drug court had no referrals was September 2003.

Both courts exhibit volatility in referral rates. Across the evaluation period, Townsville reported an average of five referrals per month compared with four referrals per month in Cairns – a comparative difference of only one monthly referral. When the monthly data are plotted (see Figure 1.3) fluctuations are obvious, but the Townsville data exhibit a modest, but not significant, linear increase (linear Townsville line on Figure 1.3). This suggests that the increase in referrals in Figure 1.2 is largely due to increases in the number of referrals in Townsville.

Figure 1.3: Referrals, by court (number)



Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

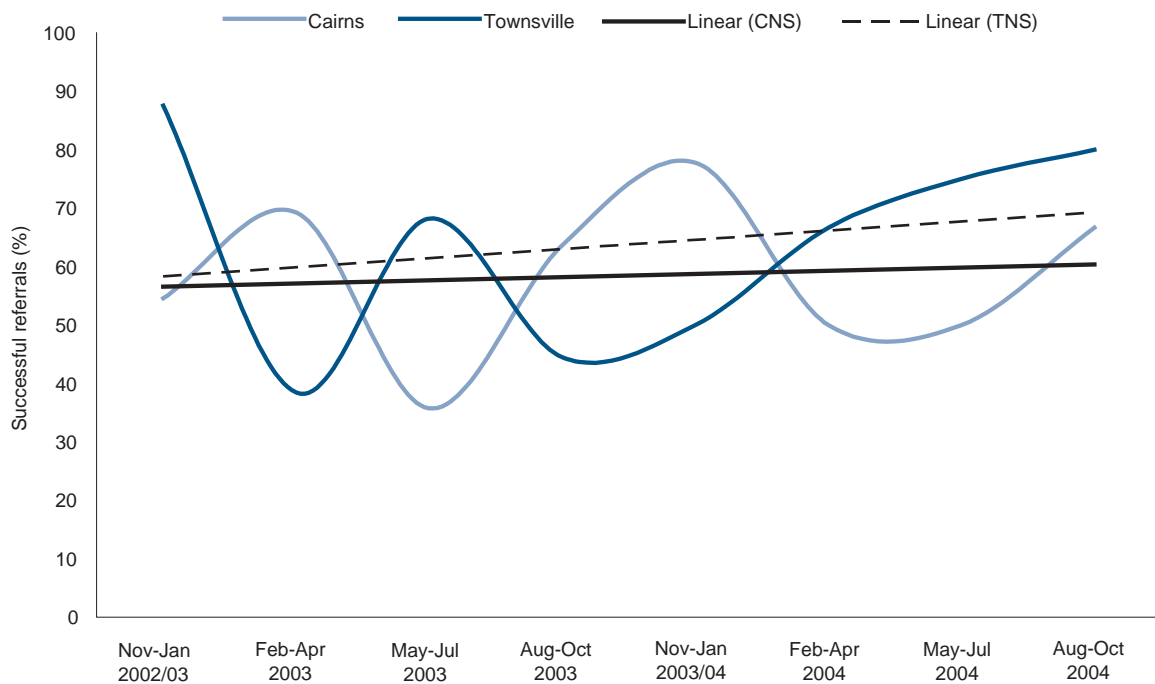
Referral outcomes

Not all offenders referred to the drug court program are granted an Intensive Drug Rehabilitation Order. The reasons an offender may be deemed ineligible are set out in requirements of eligibility as defined in the *Drug Rehabilitation (Court Diversion) Act 2000* and *Drug Rehabilitation (North Queensland Court Diversion Initiative) Amendment Bill 2002*. To be eligible, the offender must:

- be charged with a relevant offence;
- plead guilty to the referring charges;
- not be charged with, or have pending, a disqualifying offence;
- not be dealt with as a child under the *Juvenile Justice Act 1992*;
- be assessed as drug dependent, where their dependency contributed to the commission of the referring offences;
- if convicted, be likely to be sentenced to a term of imprisonment;
- reside within a postcode area prescribed by the Act;
- not have served a disqualifying term of imprisonment; and
- be willing to be assessed for suitability for rehabilitation and appear before the pilot program magistrate to be dealt with for the offence(s).

The proportion of successful referrals (the number of referrals deemed eligible as a proportion of total referrals) indicates that the North Queensland pilot program has maintained an average admission rate of about 60 per cent. By court location, the results indicate an interesting quarterly trend that rises and falls in both sites (see Figure 1.4). Moreover, the prevalence of successful admission in Cairns appears negatively correlated with that in Townsville, suggesting that as the quarterly prevalence of success rises in one location it falls in the other. Averaging the prevalence of success over each quarter yields a mean success ratio in Cairns of 58 per cent. This compares with an average of 63 per cent in Townsville.

Figure 1.4: Ratio of successful referrals, quarterly by court (per cent)



Note: Valid ratios could not be calculated for the months of November and December 2004 as some or all referrals were still to be assessed.
 Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

It is important to note that the North Queensland Drug Court pilot program was originally established and funded with a participation cap of 80 offenders, meaning that not more than 80 offenders (40 in each court location) could participate at any one time. Figure 1.5 illustrates both the monthly number of participants for the North Queensland Drug Court and the cap, which remains stable across all time periods. The number of current orders is measured at the end of each month. It is calculated as the number of newly granted Intensive Drug Rehabilitation Orders less the number of terminations and graduations. Absconded participants, unless terminated ex-parte, remain as active participants.

Clearly, at 31 December 2004, the North Queensland Drug Court pilot program had not yet reached its full capacity. The trend indicated in Figure 1.5 suggests that the number of current IDRO orders has continued to grow up to May 2004, at which time the participation rate plateaus at about 50 current orders, 30 below the maximum. From May 2004 it appears that the number of *new* participants has, on average, been equal to the number of participants leaving the program because of termination or graduation.

Figure 1.5: Current IDRO orders, per month



Note: Current orders are calculated as the cumulative number of successful participants less the cumulative number of terminated, graduated and withdrawn participants.

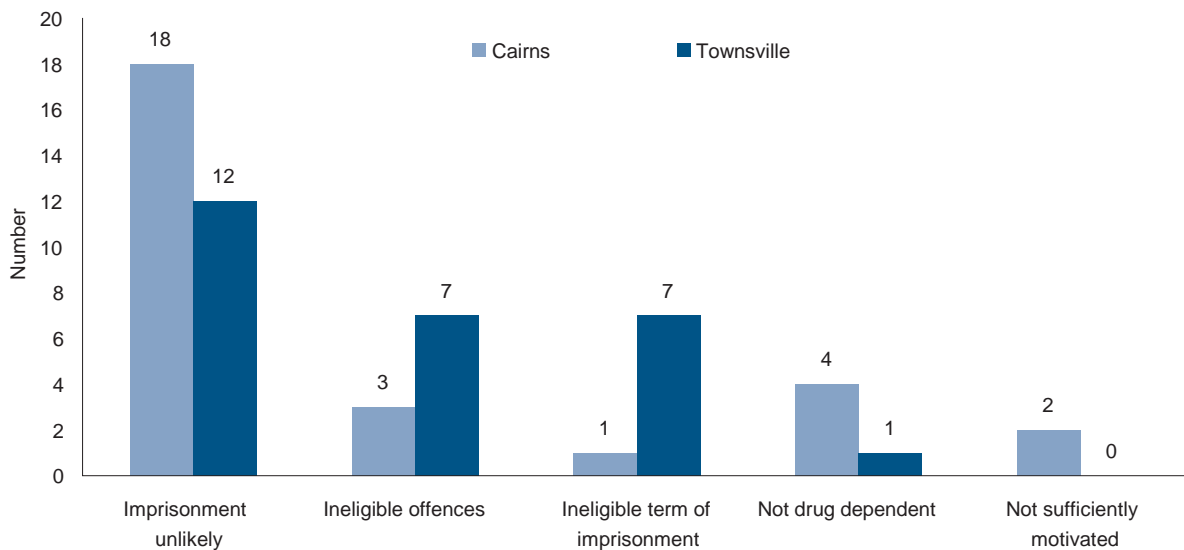
Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Recall that just over one in five ($n=55$, 23%) referred offenders were assessed as ineligible to participate, and a further 15 per cent ($n=36$) refused to participate. Of those deemed ineligible, more than half ($n=30$, 55%) were assessed by the drug court team as unlikely to serve a term of imprisonment and subsequently remitted to the magistrate’s court for sentencing (see Figure 1.6). Ten offenders (18%) were charged with offences prescribed as disqualifying, while five were assessed as ‘not drug dependent’. Only two offenders were assessed as not sufficiently motivated to participate in the drug court program.

As noted, offenders referred to the North Queensland Drug Court pilot program must not have served an ineligible term of imprisonment. The definition of an ‘ineligible term’ has changed over the life of the program; prior to September 2003, the maximum threshold for prior imprisonment was six months, but was increased to 12 months on 18 September 2003. As at the time of evaluation, eight offenders (15 per cent of all ineligible offenders) were identified as having previously served a prior period of incarceration that was above the maximum threshold for the North Queensland Drug Court. Only one of these determinations occurred prior to September 2003 when the maximum threshold was at six months.

Figure 1.6 also illustrates the variation in the ineligible determinations by court and shows that a greater proportion of offenders in Cairns (64%) were ‘unlikely to be imprisoned’ than in Townsville (44%). Alternatively, Townsville offenders were more likely to have had disqualifying offences, or to have already served an ineligible term of prior imprisonment.

Figure 1.6: Reasons for ineligibility, by court



Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

If an offender is successful in being granted an Intensive Drug Rehabilitation Order, he/she receives an initial sentence of imprisonment which, to facilitate the operation of the IDRO, is suspended for the duration of their program participation. At the completion of the IDRO (whether by termination or graduation) the suspended sentence is reviewed by the drug court magistrate and modified to reflect the offender's performance on the drug court program. The initial suspended sentence for the North Queensland Drug Court program averaged 259 days (8.6 months). The minimum suspended sentence received was 30 days (one month) and the maximum was 990 days (2.5 years). The maximum allowable suspended sentence is three years.

There was no difference in the average suspended sentence handed down in each of the court locations. However, when standardised by the number of referring offences, it appears that on average the number of imprisonment days received per referring charge was slightly higher in Cairns (37 days per charge) than in Townsville (24 days per charge). In anticipation of data presented later in this report, offenders referred to the Townsville Drug Court had, on average, a greater number of referring charges than their counterparts in Cairns, attributing to this modest difference.

Table 1.1: Suspended sentences amongst successful referrals

Suspended sentences (days)	Total (n=20)	Cairns (n=52)	Townsville (n=68)
Minimum	30	60	30
Maximum	990	913	990
Mean (median)	259 (180)	257 (180)	260 (180)
Mean sentence per charge referred (median)	29 (15)	37 (15)	24 (14)

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Referral processing

A key policy objective of the North Queensland Drug Court legislation was to minimise the length of time taken to determine eligibility. During this preliminary assessment phase, an offender will undergo a variety of assessments aimed at determining their legal eligibility (according to the drug court legislation and regulations), suitability and motivation to participate. At present, the North Queensland Drug Court preliminary assessments include, but are not limited to:

- drug use;
- mental health;
- health, including DSM IV dependency;
- SF-36 general health survey;
- preliminary Corrective Services assessment/pre-sentence report;
- living arrangements;
- education history;
- criminal history; and
- employment history.

To facilitate and expedite these assessments, the *Joint Practices and Procedures* manual states that initial health assessments should be completed within seven days of referral, and pre-sentence reports completed within 28 days. The assessments carried out by DCS should not begin until the referred offender is assessed as drug dependent. Table 1.2 shows the mean number of days from initial referral to case determination by court and determination type. Because some offenders abscond during the preliminary assessment phase, the averages presented in table 1.2 are adjusted for the time spent at large (after absconding). The results can be interpreted as the average number of active days taken to reach determination, not including days where the offender had absconded and was unavailable for assessment.

On average, offenders waited 38 days for a result on their referral to the North Queensland pilot program. By determination type, the average time varied depending on whether the offender:

- refused the program (32 days);
- was successful in gaining an Intensive Drug Rehabilitation Order (46 days); or
- was deemed ineligible (26 days).

While there was no difference in the average number of days to achieve an ineligible determination between Cairns and Townsville, other notable differences were evident. On average:

- the time to successful IDRO ruling was longer in Cairns (50 days) than in Townsville (42 days); and
- the time taken to for an offender to refuse participation in Cairns (36 days) was longer, although not significantly longer, than in Townsville (26 days).

Table 1.2: Time (available days) from initial referral to case determination, by court

Mean days to ineligible ruling	n	min/max	median	mean [^]	sd
Cairns	28	6/78	22	26	18
Townsville	27	4/74	28	26	18
Total	55	4/78	25	26	18
Mean days to refusal					
Cairns	15	9/58	25	26	14
Townsville	21	9/162	30	36	33
Total	36	9/162	26	32	27
Mean days to successful IDRO ruling*					
Cairns	52	17/154	44	50	26.4
Townsville	68	20/134	38	42	19
Total	119	17/154	39	46	23

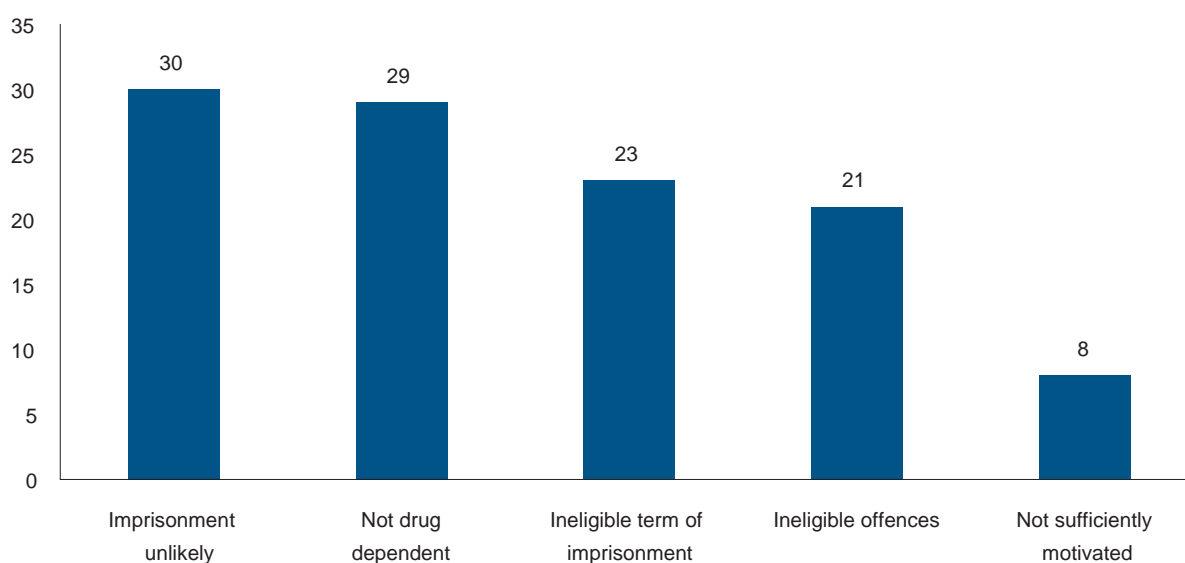
[^]Mean adjusted by subtracting the number of days at large after failing to appear.

*Statistically significant difference between means at $p < 0.05$

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

The number of days needed to reach an eligibility decision will vary depending on the number and type of assessments necessary for its determination. Further analysis (see Figure 1.7) illustrates the average number of days taken for each category of ineligible determinations. On average, it took 30 days to determine that imprisonment was unlikely, 23 days to conclude that an offender had already served an ineligible period of incarceration, and eight days to conclude that an offender was not sufficiently motivated. Given that the drug use assessment is the first to be conducted – and, according to the practice and procedures manual, should be completed within seven days of referral – it is interesting to note that the average number of days taken to determine that an offender was not drug dependent was 29. Further analysis indicates that this extended delay was most likely to occur in the Cairns Drug Court.

Figure 1.7: Average days to determination, by ineligible determination type



Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

The results of the preliminary assessments are monitored by the pilot program magistrate. Each assessment is completed and a report is compiled for the magistrate to consider when determining an offender's eligibility. An early progress review noted that offenders in the Cairns pilot program drug court were appearing before the court more often during the preliminary assessment phase than their counterparts in Townsville. This disparity was partially explained by the increased length of time spent in assessment, but also indicated that the court itself was requiring a greater number of hearings to determine eligibility. As at 31 December 2004, the disparity between Cairns and Townsville in the number of pre-IDRO court appearances remains, although reduced. Table 1.3 illustrates the descriptive statistics for the number of required pre-IDRO court appearances by court. Where the outcome was successful and the offender was placed on the drug court program, the average number of pre-IDRO court appearances was significantly higher in Cairns (four appearances) than Townsville (three appearances). Similarly, offenders in Cairns who were either deemed ineligible or refused to participate appeared on average one more time than their counterparts in Townsville.

Additional analysis was undertaken to determine whether court practices had changed since the early progress review. Although not necessarily the result of the review, improvements can be interpreted as efficiencies created as a result of experience and a change in practice and procedures. The analysis indicates that in Cairns, while the average time taken to achieve a determination remains higher than in Townsville, this average has decreased from 53 days prior to the December 2003 review to 46 days in the 12 months of 2004. Similarly, the average number of pre-IDRO court appearances has declined from five to four, indicating modest improvements in court processing.

Table 1.3: Pre-IDRO court appearances, by determination type and court				
	n	min/max	median	mean
Ineligible ruling*				
Cairns	27	1/10	3	3
Townsville	27	1/4	2	2
Total	54	1/10	2	3
Refusal to participate				
Cairns	15	1/7	2	3
Townsville	21	1/6	2	2
Total	36	1/7	2	3
Successful IDRO ruling*				
Cairns	52	2/10	4	5
Townsville	68	1/5	3	3
Total	120	1/10	3	4

*Statistically significant difference between means at $p < 0.05$

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

1.2 Profile of referrals

Demographic profile

Table 1.4 outlines the demographic characteristics of all drug court referrals by court. The majority were unemployed males aged in their late twenties, and likely to be married or living in a de facto relationship. Fewer than one in 10 referrals identified as an Aboriginal or Torres Strait Islander, and the majority were assessed as having basic or average literacy skills. This profile was generally consistent regardless

of court location – with the exception of age and marital status. Referrals to the Cairns court were an average of five years older, and more likely to be married or living in a de facto relationship than their counterparts in Townsville.

Additional analysis by gender reveals that female referrals, although representing only one fifth of the total number of referrals, were generally older, more likely to be employed, and more likely to report higher levels of educational experience and literacy. Although these differences are based on relatively small sample sizes it is important to note that cohabiting with a partner prior to entry into the program was found to significantly improve the likelihood of graduation in the South East Queensland Drug Court (Makkai & Veraar 2003, Table 16).

Table 1.4: Demographic characteristics of drug court referrals, by court

	Total		% by court	
	n	%	Cairns	Townsville
Gender				
Male	189	78	78	78
Female	54	22	22	22
(Total)	243	(100)	(100)	(100)
Age				
Age at referral (mean years)*	243	29	32	27
Marital status*				
Married/de facto	205	84	96	75
Never married	38	16	4	25
(Total)	243	(100)	(100)	(100)
Indigenous status				
Aboriginal	12	5	2	7
Torres Strait Islander	2	1	1	1
Both Aboriginal and Torres Strait Islander	7	3	4	2
Non-ATSI	222	91	94	90
(Total)	243	(100)	(100)	(100)
Employment*[^]				
Yes	20	13	18	10
No	128	87	82	90
(Total)	148	(100)	(100)	(100)
Education[^]				
Years of schooling (mean)	148	10	10	9
Skills Assessment[^]				
Illiterate	4	3	3	2
Poor basic skills	22	15	17	13
Basic skills	64	43	42	45
Average skills	57	39	37	40
Above average skills	1	1	2	0
(Total)	148	(100)	83	(100)

[^]Estimates are for offenders having completed that assessment

*Statistically significant difference at $p < 0.05$

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Health history

Not all offenders referred to the drug court program complete each of the relevant health and mental health assessments. This is for a variety of reasons, but it is most likely that the offender absconded or refused to participate in the program prior to their completion. In a small number of cases, assessments such as the SF-36 health survey had not been returned to the Alcohol Tobacco and Other Drugs (ATODS) drug court team members by the evaluation cut-off date. Table 1.6 illustrates the completion rates for each of the health assessments. With the exception of the SF-36 in Townsville, completion rates were above 80 per cent.

The SF-36 health instrument is used as the primary tool for assessing the general health of offenders during the preliminary assessment phase, as well as at graduation to each new phase. The instrument asks participants to self-report on a number of health-related indicators. The results can then be compared as the participant progresses through the program. Table 1.5 provides the self-reported health score for those offenders who completed the SF-36 during the preliminary assessment phase. They indicate that the majority of offenders rate their health as either 'good' or 'fair'. Few (n=15) considered themselves to be in excellent health, while one in five reported their health was 'very good'. There were no significant differences in the self-reported health of offenders referred to either the Cairns or Townsville drug courts.

In addition to the SF-36, ATODS conducts a general health and mental health assessment of each potential drug court participant. Selected results from both of these surveys are also provided in Table 1.5. In general, no offenders reported having AIDS or Hepatitis B, and 16 per cent reported having Hepatitis C. In terms of mental health, two per cent (n=5) reported a history of suicidal thoughts and 22 per cent reported a history of self-harm. The only significant difference between the Cairns and Townsville drug courts was for self-harm, where 32 per cent of offenders referred to the Townsville Drug Court reported a history of self-harm compared with only 10 per cent in Cairns.

Table 1.5: Health history of drug court referrals, by court

	Total		% by court	
	n	%	Cairns	Townsville
Completed preliminary assessments				
SF-36 – General health assessment*	189	78	85	72
ATODS health assessment	211	87	89	85
ATODS mental health assessment	209	86	90	83
Self reported health at referral				
Excellent	15	8	7	9
Very good	39	21	25	17
Good	73	39	38	40
Fair	49	26	24	28
Poor	12	6	7	6
(Total)	(188)	(100)	(100)	(100)
Health indicators				
Percent with AIDS	0	0	0	0
Percent with Hepatitis B	0	0	0	0
Percent with Hepatitis C	33	16	13	18
Mental health indicators				
Percent reporting suicidal thoughts	5	2	3	2
Percent reporting self harm*	46	22	10	32
Percent with personality disorder	1	<1	1	0
Percent with behaviour problems	20	10	6	13

*Statistically significant difference at $p < 0.05$

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Drug use history

To be eligible for an Intensive Drug Rehabilitation Order an offender must be dependent on illegal drugs. Moreover, their drug dependency must have contributed directly to their offending behaviour. Given this, it is particularly important that the drug court adequately and accurately assess whether offenders are dependent on illegal drugs prior to being granted an IDRO. Table 1.6 provides the drug use indicators for all referrals having completed the drug use assessment as at 31 December 2004. The assessment completion rates averaged 86 per cent.

Almost all offenders (99%) had used an illicit drug in the six months prior to referral, and 84 per cent were considered dependent on at least one illicit drug (including cannabis) based on three positive responses to the seven items of the DSM-IV dependency test. Examined by drug type and aggregated across the North Queensland Drug Courts, the following results were found:

- cannabis – 61 per cent reported recent use and 39 per cent were dependent;
- amphetamines – 55 per cent reported recent use and 38 per cent were dependent;
- opiates – 23 per cent reported recent use and 20 per cent were dependent;
- benzodiazepines – 10 per cent reported recent use and two per cent were dependent;
- methadone – four per cent reported recent use and no offenders reported dependency; and

-
- poly drug use – 43 per cent reported the recent use of more than one drug and 13 per cent were poly-dependent. The most common poly drug use combination was cannabis and amphetamine.

Additional analysis by court location reveals a number of notable differences. Offenders referred to the Townsville court were significantly more likely to report the recent use of cannabis, amphetamines and benzodiazepines than those referred to the Cairns Drug Court. Moreover, the Townsville offenders were also more likely to report poly drug use in the six months preceding their referral (65 per cent compared with 43 per cent). In terms of drug dependency, offenders referred to the Townsville Drug Court were more likely to report dependency on cannabis or amphetamines, while offenders in Cairns were more likely to report dependency on opiates.

Contemporary Australian research on illicit drugs and crime has reported a number of interesting findings about the age at illicit drug initiation and its relationship to the development of the criminal career:

- offenders are more likely to report drug use at a younger age than either injecting drug users or the general population (Johnson 2001); and
- minor offending is most likely to precede the first use of illicit drugs amongst incarcerated offenders (Makkai & Payne 2003).

The drug use assessment conducted as part of the North Queensland Drug Court program collects similar self-reported drug use data, including the age of first use across a variety of illicit drugs. These figures, presented in Table 1.6, are calculated for offenders reporting use of that drug in the last six months. It illustrates that the mean age of first use as:

- any illicit drug – 16 years;
- cannabis – 13 years;
- amphetamine – 18 years; and
- opiates – 20 years.

This profile is consistent with recent research on incarcerated offenders (Makkai & Payne 2003). However, significant differences exist between Cairns and Townsville. On average, referrals in Townsville reported commencing drug use three years earlier than their counterparts in Cairns (14 versus 17 years). This disparity was most notable for the age of first cannabis use (12 versus 14 years) and amphetamine use (17 versus 20 years).

Finally, offenders completing the drug use assessment were asked whether they had previously accessed any form of treatment for their substance abuse. The results indicate that very few (5%) of offenders had accessed drug treatment prior to their referral. There was no notable difference between the court locations (five per cent in Cairns compared with four per cent in Townsville).

Table 1.6: Self reported drug use at referral, by court

	Total		% by court	
	n	%	Cairns	Townsville
Completed drug use assessment	208	86	89	83
Used in the 6 months prior to initial assessment				
Any illicit drug	206	99	99	99
Cannabis*	127	61	43	77
Amphetamines*	115	55	41	68
Opiates (including morphine)	47	23	24	21
Benzodiazepines*	21	10	2	17
Methadone	8	4	1	6
Poly drug use (two or more)*	89	43	17	65
Drug dependency (DSM-IV)				
Any illicit drug	174	84	79	88
Cannabis	81	39	35	43
Amphetamines	79	38	32	43
Opiates (including morphine)*	41	20	26	14
Benzodiazepines	5	2	2	3
Poly dependency (two or more)	27	13	13	13
Age of initiation (mean years)^				
Any illicit drug*	–	16	17	14
Cannabis	–	13	14	12
Amphetamines*	–	18	20	17
Opiates	–	20	20	21
Accessed prior treatment for illicit drugs	10	5	5	4

*Statistically significant difference at $p < 0.05$

^Age of initiation is calculated for offenders having used that drug.

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Criminal history

The criminal offence data used in this section are based on criminal history records held by QPS. In most cases these records are produced by the police prosecutor and provided to the drug court team for assessment. They are then filed with all other relevant documentation for that referral. The criminal histories include all offences prior to the time of referral. It is important to remember that criminal history reports are only representative of the number and type of offences for which an offender has been apprehended and charged. As such, they inevitably underreport the true level of offending behaviour.

Offenders referred to the North Queensland Drug Court have extensive criminal histories. In terms of total offences, including those as juveniles, the mean number of lifetime offences among those referred to the North Queensland pilot program was 40 (see Table 1.7). The first recorded offence occurred at the mean age of 20 years. When compared by individual offence type, referred offenders reported an average of:

- eight drug offences, with the age of first drug offence at 22 years;
- 18 property offences commencing at 22 years;
- one violent offence at 22 years; and
- seven breaches against justice orders.

Comparing the age at first offence by type of offence illustrates that for all referrals to the North Queensland Drug Court, the first recorded criminal charge was most likely to be a property offence (35%) or a drug offence (30%). It was relatively rare for an offender to have commenced their criminal career with a violent charge (11%). In terms of juvenile offending, calculations based on the referred offender's date of birth and the first recorded criminal charge indicate that about one in three offenders were first charged before, or at, the age of 17 years. Analyses of criminal histories have shown that offenders with the most serious and lengthy careers are more likely to begin their offending as juveniles (Makkai & Payne 2003).

Table 1.7 also provides the comparative data for offenders referred to either the Cairns or Townsville drug courts. In terms of lifetime offending, offenders referred to the Townsville court had a greater number of lifetime charges (44 charges) than offenders referred in Cairns (36 charges). Moreover, offenders in Townsville were significantly younger (18 years) when first charged than offenders referred to the Cairns Drug Court (22 years). Other notable differences included:

- Cairns referrals had a greater number of drug charges than those in Townsville (10 charges versus six charges);
- Townsville referrals were first charged with a property offence three years earlier than those in Cairns; and
- a greater number of Townsville referrals were charged as a juvenile – although this difference was not significant.

Table 1.7: Lifetime criminal history of referrals, by court

	Total (n=243)	Cairns (n=108)	Townsville (n=135)
Lifetime offending			
Mean number of lifetime charges (min/max)*	40 (0/184)	36 (0/131)	44 (0/184)
Mean age of first charge (min/max)*	20 (5/44)	22 (8/44)	18 (5/39)
Drug offending			
Mean number of lifetime drug charges (min/max)*	8 (0/46)	10 (0/46)	6 (0/29)
Mean age of first drug charge (min/max)^*	22 (8/44)	23 (8/44)	21 (12/39)
Per cent where first charge was a drug offence^*	30	39	24
Property offending			
Mean number of lifetime property charges (min/max)*	18 (0/177)	13 (0/114)	22 (0/177)
Mean age of first property charge (min/max)^*	22 (12/46)	25 (13/46)	19 (12/40)
Per cent where first charge was a property offence^	35	29	40
Violent offending			
Mean number of lifetime violent charges (min/max)	1 (0/20)	1 (0/11)	2 (0/20)
Mean age of first violent charge (min/max)^*	22 (6/47)	24 (16/47)	20 (6/38)
Per cent where first charge was a violent offence^	11	12	10
Other offending			
Mean number of lifetime breaches (min/max)*	7 (0/27)	6 (0/22)	7 (0/27)
Per cent where drug use preceded first charge	63	60	65
Per cent charged as juvenile ⁻	33	22	41

^{*}Estimates are for offenders having committed that offence type.

⁻Juvenile is 17 years of age or younger.

^{*}Statistically significant difference between court locations at $p < 0.01$

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Lifetime offending estimates are limited in their capacity to examine the patterns of offending which immediately preceded drug court referral. To do this, however, we can examine each offender's referred offences – those which led them to appear before the drug court magistrate. Table 1.8 illustrates that offenders referred to the North Queensland Drug Court program were facing an average of 14 criminal charges. The minimum number of referring charges was one and the maximum was 92. By offence type:

- 74 per cent of offenders were referred on at least one property charge, and of those, the average number of charges was 10;
- 65 per cent were referred on at least one drug charge, and the average number of charges was four;
- 39 per cent were referred on at least one breach charge, and the average number of charges was three; and
- 16 per cent were referred on at least one violent charge, and the average number of charges was one.

Analysis by court location illustrates that offenders referred in Townsville were facing an average of 16 charges, five charges greater than offenders in Cairns (11 charges). Despite this, Cairns offenders were more likely to be facing at least one drug charge, and Townsville offenders were more likely to be facing a breach charge.

Table 1.8: Referring offences, by court

	Total (n=242)	Cairns (n=108)	Townsville (n=134)
Drug offending			
Per cent whose referring charges included a drug offence	65	71	60
Mean number of referred drug charges (min/max) [^]	4 (1/6)	3 (1/16)	4 (1/14)
Property offending			
Per cent whose referring charges included a property offence	74	70	77
Mean number of referred property charges (min/max) [^]	10 (1/66)	9 (1/56)	12 (1/66)
Violent offending			
Per cent whose referring charges included a violence offence	16	16	16
Mean number of referred violent charges (min/max) [^]	1 (1/6)	1 (1/2)	2 (1/6)
Breach offending			
Percent whose referring charges included a breach offence	39	35	42
Mean number of lifetime breaches (min/max) ^{^*}	3 (1/13)	2 (1/7)	3 (1/13)
Total charges*	14 (1/92)	11 (1/82)	16 (1/92)

[^]Estimates are for offenders having committed that offence type.

^{*}Statistically significant difference at p<0.05

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Profile of IDRO participants

So far we have examined the general assessment indicator data for all offenders referred to either the Cairns or Townsville pilot drug courts. This profile is useful in understanding the type of offenders being referred, but does not necessarily reflect the profile of participants who are successful in their referral and placed onto the drug court program. As noted, just under half of all referred offenders are granted an Intensive Drug Rehabilitation Order (IDRO). This section examines the comparative profile of three offender groups: those who were successfully granted an IDRO; those who were assessed as unsuitable; and those who refused the program or absconded.

Table 1.9 provides the comparative results across a number of interesting indicator variables. The results demonstrate that the profile of participants successfully placed onto an IDRO differs only slightly from the profile of offenders who were ineligible or those who refused. Although not statistically significant, it is worth noting that both female and Indigenous offenders are slightly under-represented amongst the profile of successful referrals. Moreover, successful referrals were more likely to have used cannabis and been a poly drug user in the last six months. In terms of offending, those who were successfully placed onto the IDRO reported a slightly higher number of lifetime property offence charges and were more likely to be referred to the drug court program for a greater number of offences. This final result is not surprising, particularly given that one of the reasons an offender may be deemed ineligible is that imprisonment was unlikely. Those with fewer offences are less likely to be facing a term of imprisonment and are therefore more likely to be ineligible.

Overall, these data indicate no significant or unexpected disparity between those offenders who were successful in their referral and those who were ineligible, or those who refused to participate in the program.

Table 1.9: Referral indicators, by referral result (per cent)

	IDRO issued (n=120)	Ineligible (n=55)	Refused/ absconded (n=46)
Demographics			
Male	80	75	78
ATSI	8	11	7
Age (mean)	29	29	29
Health (self reported)			
Excellent/very good	29	36	22
Drug use in the 6 months prior to initial assessment			
Cannabis*	71	39	50
Amphetamines	60	41	53
Opiates (including morphine)	27	18	19
Poly drug use (two or more)*	55	20	31
Lifetime Offending			
Mean lifetime charges	43	37	35
Mean lifetime drug charges	8	8	7
Mean lifetime property charges	21	15	16
Referring Charges			
Mean number of referring charges	19	6	8

*Statistically significant difference at $p < 0.01$

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Comparative analysis

To assess how the North Queensland Drug Court pilot program compares with that in the South East, we compare the relative operational statistics derived at the time of final evaluation. The South East Queensland Drug Court evaluation estimates were examined at 31 December 2002 – after 31 months of operation (Makkai & Veraar 2003). In North Queensland, the evaluation estimates are as of 31 December 2004 and are computed after 25 months of operation. The comparative results are presented in Tables 1.10 and 1.11.

In terms of drug court processing, the North Queensland Drug Court program has delivered similar outcomes to the program in the South East (see Table 1.10). Measured at the time of final evaluation (Makkai & Veraar 2003) the South East Queensland Drug Court program had seen 555 referrals. Of these, 48 per cent were issued with an IDRO and eight per cent had graduated. In North Queensland, similar results are illustrated, with 49 per cent of all referrals being successfully granted an IDRO and 10 per cent graduating. The only notable difference is that the North Queensland program had slightly lower termination rates (19 per cent compared to 21 per cent), although this result is not statistically significant.

Table 1.10: Comparative procedural outcomes, by region

	North Queensland			South East Queensland		
	n	% of total referred	% of IDRO	n	% of total referred	% of IDRO
Total referred	243	100	–	555	100	–
Refused to participate	36	15	–	97	17	–
Deemed ineligible	55	23	–	129	23	–
Absconded	10	4	–	34	6	–
Issued with IDRO	120	49	100	264	48	100
Terminated	45	19	38	114	21	43
Absconded	10	4	8	23	4	9
Active	41	17	34	83	15	31
Graduated	24	10	20	44	8	17

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]: Makkai and Veraar (2003).

In terms of participant profile, Table 1.11 illustrates that offenders successfully granted an IDRO in North Queensland were:

- the same age, but slightly more likely to be female (20 per cent versus 13 per cent);
- less likely to report having either suicidal thoughts or Hepatitis C;
- more likely to have used cannabis in the six months prior to referral;
- less likely to have used opiates and amphetamines in the six months prior to referral;
- less likely to report having previously accessed drug treatment; and
- more likely to have been dependent according to the DSM-IV.

Table 1.11: Key participant indicators, by region (per cent)

	North Queensland (n=120)	South East Queensland (n=264)
Demographics		
Male	80	87
ATSI	8	13
Age (mean)	29	28
Health history		
Per cent with Hepatitis C*	19	45
Per cent indicating suicidal*	4	15
Drug use history		
Mean age of first drug use	16	15
Per cent used cannabis in past six months	71	63
Per cent used amphetamines in past six months*	60	71
Per cent used opiates in past six months*	27	60
Per cent accessed prior treatment*	8	58
Percent DSM-IV dependent on any illicit drug*	95	75

*Statistically significant difference at $p < 0.01$

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]: Makkai and Veraar 2003.

1.3 Issues for referral

Low referral rates

Possible explanations

It was widely recognised that initial referral rates to the North Queensland Drug Court program were lower than anticipated. Similarly, in the six months preceding this evaluation the number of current orders have stabilised at about 50 participants, which is 30 below the funded capacity. The factors influencing referral rates are difficult to measure from the drug court database because the decision to refer (or seek referral) typically occurs prior to any formal contact with the drug court. Moreover, without further case flow data for each court, it is difficult to determine whether the drug court referral rates are the result of barriers to referral, or simply the by-product of a lower than expected number of potential offenders passing through the northern magistrates' courts. It is equally possible that the referral rates are an accurate representation of the total number of possible referrals, and that the funded cap of 80 active participants was too optimistic. Additional analysis is needed to examine the case flow for each of the northern courts.

The qualitative interviews with key stakeholders did, however, indicate a general consensus that the number of actual referrals being made to the drug court program is lower than the number of possible or potential referrals passing through the courts. The reasons for this are largely unknown, although a number of possible explanations have been suggested:

1. the current eligibility requirements are prohibitive for the bulk of drug dependent offenders passing through these courts;
2. magistrates in each of the northern court locations are not well informed about the drug court program and rely on the police prosecutor or defence lawyer to recommend the program;
3. the private legal profession is unwilling to request the drug court program as a sentencing option for offenders facing short sentences;
4. both the private legal profession and the legal aid office are pessimistic about the likelihood of an offender's success on the program, and view the program as too difficult;
5. offenders were unwilling to be referred because of negative reports from friends or acquaintances; and
6. the drug court program had not been widely publicised, and both offenders and legal practitioners were unaware of the program's existence.

Unfortunately, qualitative information could not be obtained from unsuccessful referrals, or those who were potentially eligible but where an application for referral was not made. It was therefore beyond the scope of this evaluation to attempt to measure attitudes and perceptions among the general community and legal fraternity. Despite this, interviews with drug court participants help to illuminate the various experiences of offenders during the referral process. The interviews found that the majority of participants first heard of the drug court program either through a friend or relative with some connection to it. This information was reported as being mostly positive. However, a small number of participants reported receiving negative information prior to their own referral. A range of comments include:

'I had a friend who was already on the program. They said that [the program] sucked, but I wanted to do it and the duty solicitor said that it was an option, but that it had to be my own choice.'

– Female, phase 3.

'My fatmate told me about the program. He was pretty positive about it. I made the decision at court when I found a brochure about [the drug court program] and so I asked my duty solicitor a bit more about it.'

– Male, phase 3.

'I was on remand when my friend in prison told me about [the drug court program]. He wasn't eligible, but said that I might have been. Legal Aid told me that I wouldn't be eligible, but then they referred me to [the drug court legal aid officer].'

– Male, phase 2.

'Someone from DCS approached me about being on the program. They asked me what offences I had committed and whether I was a drug user. They suggested I talked to my duty solicitor.'

– Male, phase 3.

'I first heard of the drug court program when I was on remand. Everyone was telling me that the program was a waste of time because 90 per cent fail. Everyone thought that the program was way too hard.'

– Male, phase 1.

For participants referred by their legal practitioner, this was most likely to have been a legal aid officer. Only a small number of offenders reported being represented by a private legal practitioner at the time of referral. Where this was the case, offenders often stated that their lawyer knew little or nothing about the drug court program. In most cases it was the offenders themselves who suggested the drug court as a possible sentencing option after having heard about it from other external sources. Most participants reported their legal representative as being positive about the drug court program. One exception was:

'I was only facing six weeks, and jail never scares me. Legal aid said that [the drug court program] won't be easy and advised me not to go on it. But I just wanted to do it for myself.'

– Male, phase 3.

Possible solutions

The stabilisation of the current order rates in the last half of 2004 suggests that the number of offenders entering the program in any month is roughly equal to the number of offenders leaving the program in that month (being terminated, or having graduated). Given this, methods aimed at increasing the participation rates should be targeted at either reducing the number of terminations or increasing the number of successful referrals. Since the North Queensland Drug Court's inception, some efforts have been made to improve referral rates.

Commencing late in June 2003, DCS and QPS began a process of case fagging in both the Cairns and Townsville magistrates' courts. The case fagging process was a proactive attempt to cross-check the weekly court register for offenders who appeared eligible for drug court referral. Where a potential referral is identified, a fag is placed on the Queensland Police Prosecutorial documentation (QP9) as an indication to the police prosecutor to consider the drug court program as a sentencing option. In addition, DCS also regularly receives a remand list from the local correctional facility which lists the names, offences and the date of next court appearance for each of the remandees currently incarcerated. The remand list is cross-checked with the police criminal history records and a fag is again placed on the QP9 if the offender appears eligible. Although there were slight procedural differences between Cairns and Townsville in the early stages of the case fagging process, these procedures have since been streamlined in both courts.

The early progress review of the North Queensland Drug Court pilot program found that the case fagging process did not result in tangible improvements in participation rates, despite modest increases in the referral rate. At the time of the earlier progress review, it appeared that the case fagging process had only served to increase the number of 'marginal' offenders whose probability of being granted an IDRO was lower than those offenders who would have otherwise been referred had case fagging not been implemented. This result has implications for increasing the administrative costs of the drug court without any notable benefit for participation rates. Unfortunately, the drug court database does not record which referrals were fagged and which were not and detailed analysis of the fagging process is thus not possible. However, in applying the case fagging process, drug court team members should give consideration to the likelihood of eligibility and acceptance, as well as the likelihood of program completion. Flagging offenders who appear eligible may artificially increase the termination rate as a greater number of unprepared or uncommitted offenders are referred and accepted onto the program. Decisions for fagging should be informed by a matrix of both policy and research.

The eligibility criteria for the North Queensland Drug Court program was commonly noted in interviews with key stakeholders. Most suggested that the maximum prior imprisonment of 12 months (or six months prior to September 2003) was prohibitive for the majority of offenders who would most benefit from the program. Again, without case flow data from each of the magistrates' courts, it is difficult to determine whether such a population actually exists. However anecdotal evidence suggests that the referral and participation rates would be significantly improved should the eligibility criteria be modified.

Finally, one of the possible explanations of the low number of referrals was that both magistrates and legal representatives were inadequately informed about the drug court program, and as a result referral to drug court was seen as a last resort option for drug dependent offenders. Some evidence from the qualitative interviews with participants suggests that while most legal representatives were willing to pursue the drug court for their client, this was often not considered until it was suggested by the client (or attending DCS officer). Efforts to improve program education and awareness among legal representatives and magistrates may help to boost referral numbers. This should coincide with the already active publicity of the drug court program to participants. Moreover, should both legal representatives and magistrates be more aware of the eligibility requirements of the drug court program, fewer unsuccessful offenders may be referred to the program.

Indigenous referrals

Although the overall referral rates to the North Queensland Drug Court were lower than expected, this evaluation notes that 21 of 243 referrals had identified as an Aboriginal or Torres Strait Islander. The qualitative interviews revealed that drug court team members generally believed that Indigenous offenders are under-referred, and subsequently under-represented, on the drug court program. Barriers to Indigenous referral were believed to occur at three stages, including:

1. limited dissemination of program information to local Indigenous communities and local Indigenous legal practitioners, including the Aboriginal Legal Aid Service;
2. problems in communicating and establishing a good rapport with Indigenous offenders at the time of referral; and
3. the application of eligibility criteria which inadvertently prohibits many Indigenous offenders from participating on the drug court program.

The first of these is the one most likely to adversely impact the referral of Indigenous offenders to the drug court pilot programs in North Queensland. Referral rates are heavily reliant on the successful promotion of the drug court as a viable sentencing option for Indigenous offenders. Some drug court team members

suggested that greater dissemination of program information should be undertaken within local Indigenous communities, as well as within the Aboriginal Legal Aid Service. Encouraging Indigenous offenders to seek referral, as well as the Aboriginal Legal Community to promote the drug court as a suitable and viable sentencing option, will help to increase the number of Indigenous offenders referred to the program.

In addition to promotion, several drug court team members noted current communication difficulties and the absence of a qualified case manager with Indigenous heritage as an additional barrier to referral. As noted earlier, an offender's willingness to participate is heavily reliant on both the information and encouragement provided by the team members during the initial referral process. Moreover, case managers from DCS have instituted an active policy of case fagging which involves identifying and talking to potential referrals in an effort to encourage them to seek the drug court as a sentencing option. Drug court team members noted that selling the program to Indigenous offenders would be enhanced if conducted by staff with experience in communicating with Indigenous peoples, and preferably someone with an Indigenous background. Team members commented that the lack of such a service might result in a sense of being overwhelmed and alienated, as Indigenous offenders don't always understand 'white-fella speak'.

Finally, increases in the referral of Indigenous offenders will not necessarily translate into subsequent increases in program participation rates. Structural barriers, the result of legislative eligibility restrictions, were noted by drug court team members as prohibitive for Indigenous offender participation. Team members indicated that Indigenous offenders are more likely to experience a number of events or circumstances that preclude them from participating, including:

1. imprisonment history – Indigenous offenders are more likely to have already served greater than the maximum 12 months imprisonment, despite a similar number of lifetime offences.
2. alcohol abuse – the primary drug of dependence for Indigenous offenders is more likely to be alcohol, a substance which is not easily accommodated among the illicit drug focused treatment regimes of the drug court;
3. violence – Indigenous offenders are more likely to have a history of violent offences, including domestic violence and assault of a police officer which can disqualify them from participation; and
4. residence – the residential requirements for the drug court program do not extend to many of the outlying Indigenous communities, and participation is conditional on location of residence. Although offenders can move into accommodation within the residential requirements of the court, an offender's reluctance to do so may hamper their willingness to seek referral.

Eligibility criteria

Drug court team members raised a number of concerns about the current eligibility requirements for the North Queensland pilot program. In relation to this evaluation, many drug court team members expressed concerns about the effect of the prior imprisonment criterion (to a maximum 12 months prior imprisonment) and its impact on referral rates. In the early developmental stages of the North Queensland Drug Court program, the tightening of the eligibility criteria was primarily designed to avoid the problems of over-referral seen during the initial implementation stages of the South East Queensland Drug Court (Makkai & Veraar unpublished). In addition, early data from graduates in South East Queensland indicated that offenders with a significant history of incarceration were less likely to comply with the conditions of their IDRO and subsequently less likely to graduate. This was because the IDRO program partially relies on the threat of future imprisonment as a motivating factor for persisting with drug rehabilitation. It was suggested that offenders with significant prior incarceration histories might be less concerned about the possibility of future imprisonment and therefore less inclined to be motivated to avoid it. Conversely, it

was commonly thought that offenders with little or no prior imprisonment history would be more motivated by the desire to avoid prison and therefore persist with drug treatment.

The reality is, however, that offenders in North Queensland with less than six to 12 months prior imprisonment are unlikely to be facing a significant head sentence for their referring offences – the head sentence being the term of imprisonment that is suspended upon being granted the IDRO. Drug court team members indicated that motivation was not solely based on the threat of imprisonment itself, but a rational comparison of the suspended sentence and the length of time required to complete the drug court program. As a result, the current legislative restrictions serve to increase the number of referred offenders facing significantly less time on a head sentence than is required to complete the 12-18 month drug court program. The average suspended sentence indicated in this evaluation was about nine months, with one offender facing as little as 30 days. This has obvious implications for offender participation and motivation, with drug court team members consistently reporting difficulties in motivating and managing those offenders whose head sentence was substantially less than the possible 12-18 months required to complete the program.

Adequacy of assessment

The qualitative interviews with drug court team members indicated a general concern about the adequacy of the current assessment regime in informing the drug court of an offender's capacity to participate. Capacity sits alongside legal eligibility as a factor used by the pilot program magistrate to determine an offender's suitability for participation. The drug court team should be satisfied that the referred offender not only meets the eligibility criteria but is *willing* and *suitable* to participate. In this light, drug court team members noted two problems:

1. the capacity to clearly and adequately explain the assessment and participation requirements to offenders with special needs, or those who are still using drugs at the time of assessment; and
2. the ability of current assessment tools to identify mental health, depression and anxiety issues faced by offenders, particularly when masked by mood altering substances.

The preliminary assessment stage should be seen as having a dual role. First, for the drug court team members to determine eligibility and obtain information from a participant that will be used for their future case management. Second, the preliminary assessment phase is also the period in which offenders gain insight into the drug court program. They will be informed about the drug court's expectations, should they choose to participate. Both of these roles are extremely important in maximising an offender's potential to become drug and crime free, and they rely heavily on the capacity of team members to obtain and provide information.

One drug court team member noted the difficulties that arise in communicating with participants who are still actively using drugs during the preliminary assessment phase. Given that the preliminary assessment phase is pre-program, offenders are expected, but not obliged, to stop using drugs. The preliminary assessments are therefore sometimes conducted while an offender is intoxicated. While the frequency of this problem is unknown, anecdotal evidence suggests that most offenders will continue to use drugs until such time as the IDRO is granted and urinalysis testing begins. The validity of the information received from an intoxicated individual must therefore be questioned. More importantly, however, is the offender's true understanding of the drug court's expectations and their capacity to willingly consent to participation when intoxicated. Suggestions have been made that consent to participate should not be obtained until such time as an offender is 'clean', and that some form of detoxification should be a requirement during the preliminary assessment phase. Others, however, have suggested that long-term, high-functioning drug users do not understand or comprehend their situation any better when suffering from drug use

withdrawal, and are not more likely than those still using drugs to make a rational and informed decision about their participation.

Moreover, drug court team members indicated that Indigenous offenders and offenders with a mental health problem were less likely to understand the full extent of their commitment to the program. Team members from across Cairns and Townsville drug courts were concerned that some offenders were not fully aware of what the team would expect from them and that these offenders found adjustment and compliance difficult. To confirm this, participants of the program were asked during a qualitative interview whether the program was 'as expected'. The results were evenly divided, with half reporting that the program was the same as they thought, and half reporting that the program was more difficult or intense than was originally explained. For example:

'I didn't realise how many programs I would have to attend and how demanding the program would be. It wasn't really explained to me in the beginning.'

– Female, phase 1.

'It was harder at first than I expected. I don't think I was really ready. My past experience with the police [authority] made me sceptical about the program.'

– Male, phase 2.

'I didn't realise how hard it would be trying to get off drugs. I don't think I was really prepared to get physically and mentally clean. Sometimes I don't think they realise how difficult addiction is.'

– Male, phase 2.

'I didn't think it would be this intensive. There are so many rules that just aren't explained to you in the beginning.'

– Male, phase 1.

The issue of consent is one which pervades all Australian drug courts, and the solution to this issue should come from further research and policy development. Nonetheless, this evaluation notes that every effort should be made to ensure that an offender fully understands what it is that they are consenting to. This will be achieved in part by ensuring that assessment officers are equipped with the skills necessary for dealing with offenders with special needs (such as an Indigenous assessment officer). Moreover, other innovative methods of explaining the drug court program to offenders with different learning styles should be considered. Visual aides, such as a video presentation or testimonials from past participants, were some of the suggestions made by team members in North Queensland.

The second concern raised by drug court team members was that the current assessment regime was unable to identify the various mental health, depression and anxiety issues faced by offenders referred to the drug court program. A psychological assessment is not conducted on each referred offender, but can be ordered by the drug court magistrate if believed to be appropriate. Psychological assessments are an optional, yet costly, tool, and are reserved for cases where an offender has an obvious psychological issue which may impede his or her capacity to undertake the drug court program. To overcome this problem, some team members have resorted to undertaking the Depression Anxiety Stress Scales (DASS), a non-prescribed assessment tool. The DASS is not a detailed psychological assessment and provides only limited insight into some of the emotional problems faced by offenders as they enter and progress through the program. Drug court team members overwhelmingly agreed that detailed psychological assessments should be conducted of *all* offenders during the preliminary assessment phase. This assessment will provide invaluable information to the drug court team about an offender's psychological needs and will help case managers adapt their case management techniques to accommodate these diverse needs.

The problem of locating appropriate assessment tools has been noted in the literature (Taxman & Bouffard 2002 and Makkai & Veraar 2003). General good practice principles would suggest that the selection and use of each assessment tool should be systematically reviewed and efforts should be made to seek additional assessments which cover any identified gaps. In terms of psychological assessments, it is difficult to determine the cost benefit between global or selective application. Suffice to say, at the time of this evaluation (December 2004) two previous graduates of the North Queensland Drug Court program had been re-referred on new charges. Upon interviewing these participants it was evident that the self-reported reasons for their re-offending were primarily related to underlying psychological and emotional issues which, according to the participants, had not been resolved during their first attempt at the drug court program. A psychological assessment may have uncovered these issues in the first instance.

Offender motivations

As noted, an offender's willingness to participate in the drug court program is driven, in part, by their motivations. Some offenders are motivated by the desire to give up drugs. That is, they have reached a point in their life where drug use no longer offers them the excitement it once did, but quitting seems an impossible task. Others are motivated by the desire to avoid prison, either because of family commitments or because they have never been to prison before. Drug court team members often stated that offenders motivated by the desire to avoid prison were less compliant than those whose participation was motivated by other factors.

Qualitative interviews with offenders revealed a variety of reasons and motivations to justify participation. In many cases, offenders also reported significant changes to motivating factors over the course of their program. This was also found in the South East Queensland evaluation. Most drug court offenders stated both the desire to avoid prison and to get off drugs as playing an equal role in their participation. Some stated their primary motivation as wanting to avoid prison, but qualified this by adding that their motivation to remain on the program has since changed to wanting to be drug free. Some examples of participant responses include:

'I've had a drug problem since I was very young. I just want a clean, drug free life.

– Female, phase 2.

'I have tried rehabilitation before and failed. The IDRO program forces me to be on the rehab and succeed.'

– Male, phase 1.

'I wanted to avoid jail. I don't want to leave my five year old daughter.'

– Female, phase 2.

'I knew I had a drug problem – I didn't want to go to prison because of it.'

– Male, phase 2.

1.4 Discussion

This section outlines the North Queensland Drug Court referral process. Results indicated that while overall referrals have increased during the duration of the pilot program, there has been a strong quarterly trend peaking every fourth month. Analysis by court suggests that both the overall increase and quarterly pattern have been driven primarily by referrals in Townsville. The underlying causes of this variation are unlikely to be driven by internal drug court process, such as case load or case fagging, but most likely to reflect patterns seen in the total number of potential referrals appearing before each of the magistrates' courts. While the process of case fagging has increased the total number of referrals, a declining rate of success means that similar increases in the rate of successful referrals have not been seen.

Offenders referred to the North Queensland pilot program were most likely to be unemployed males, with basic or poor literacy skills. They were most likely to be married, self-report average health and be addicted to cannabis or amphetamine. They rarely report prior access to treatment, but had commenced drug use at an average age of 16 years. In terms of criminal history, they had an average of 40 lifetime charges, most of which were for property offences.

Comparative analysis between Cairns and Townsville noted some differences in the type of offenders likely to be referred to the drug court program.

- offenders referred in Townsville were younger, less likely to be married or living in a de facto relationship, less likely to be employed and more likely to have been a poly drug user of more than one illicit drug in the six months prior to their referral; and
- in Cairns, referred offenders had a larger number of prior drug charges, but were older when first apprehended and charged for any offence.

Comparative data were provided to examine the differences in both participant profile and program operation between the North Queensland and South East Queensland Drug Court pilot programs. The comparative data for South East Queensland was drawn from the 2003 final evaluation (Makkai & Veraar 2003). This comparative analysis indicates that participants in North Queensland:

- were the same age, slightly more likely to be female, and less likely to report having either suicidal thoughts or Hepatitis C;
- were more likely to have used cannabis in the six months prior to referral, but less likely to have used opiates and amphetamines and less likely to report having previously accessed drug treatment;
- completed each phase in fewer days, with the average time to graduation 120 days less in North Queensland;
- were less likely to abscond during phase one; and
- were sanctioned at a higher rate, but less likely to be given imprisonment as a sanction.

Qualitative interviews with drug court team members and participants revealed a number of issues for the operation and implementation of the North Queensland Drug Court pilot program. The first was the lower than expected referral rates, which has seen the North Queensland Drug Court program maintain an average participation rate of 50 (30 below the funded cap). A number of reasons have been identified for the low referral rate, but most likely is that the referral rate is an accurate representation of the actual number of eligible offenders being processed through the courts, and the funded cap of 80 participants was an unrealistic target given current eligibility criteria. Improving referral rates in North Queensland will be assisted through:

- modifications to the eligibility criteria, particularly in relation to the 12-month maximum prior imprisonment criteria; and
- more efficient and effective targeting of the treatment and rehabilitation services to minimise termination rates.

This evaluation also noted low referral rates for Indigenous offenders. The qualitative interviews highlight a number of barriers to referral, including:

- limited dissemination of program information to local Indigenous communities and local Indigenous legal practitioners, including the Aboriginal Legal Aid Service;

-
- problems in communicating and establishing a good rapport with Indigenous offenders at the time of referral; and
 - the application of eligibility criteria which inadvertently prohibit many Indigenous offenders from participating on the drug court program.

Offender assessment forms an integral component of the North Queensland Drug Court program. It occurs at a number of stages throughout the drug court process. The first assessment begins at the time of referral, where the referring magistrate must give consideration to the offenders legislative eligibility. This includes whether the offender is likely to serve a term of imprisonment, or has previously served a disqualifying term of imprisonment. This evaluation notes a high proportion of ineligible determinations due to offenders not being likely to serve imprisonment, and suggests that greater attention and assessment is needed to prevent the referral of ineligible offenders from the magistrate's court. This might be achieved through the ongoing education of magistrates to ensure the consistent application of eligibility criteria at the referral stage.

The second stage of assessment occurs after referral but prior to program placement. The qualitative interviews indicate the need for the more frequent application of psychological and mental health assessments and better tools for assessing offender motivation and willingness to participate. Continued investment and improvement in assessment tools will help to reduce terminations and improve long term drug court outcomes.

2 Drug Court Activity

2.1 Participation indicators

This section of the evaluation focuses on the 120 offenders who, at 31 December 2004, had been successfully granted an Intensive Drug Rehabilitation Order (IDRO). These offenders are herein referred to as participants of the North Queensland pilot program.

Drug court phases

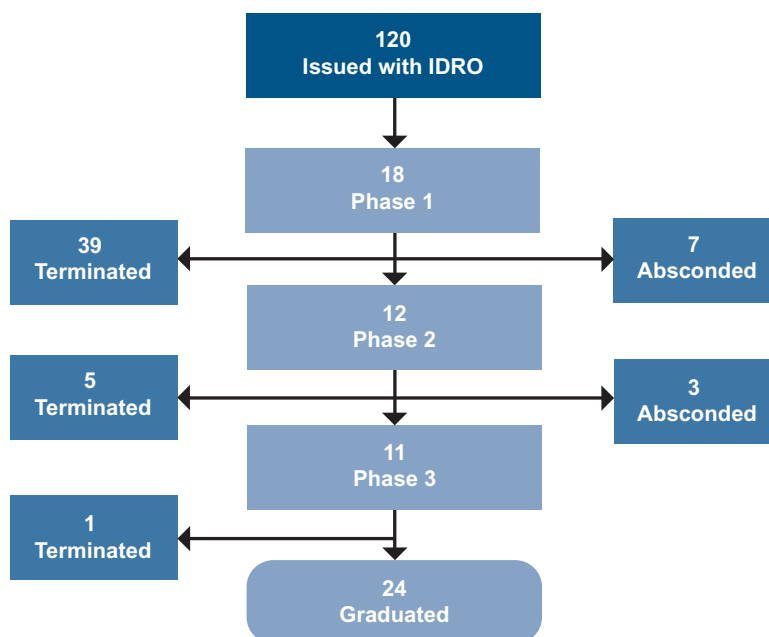
The North Queensland Drug Court program comprises three phases. Phase one is aimed at promoting drug abstinence. It requires that participants undergo a number of drug treatment and rehabilitation programs. Successful completion is reached when a participant has been illicit drug free for a period of no less than 12 weeks (84 days). Phase two is aimed at promoting stabilisation. Participants are required to satisfy the drug court team that they can remain drug and crime free. In phase three, participants are encouraged to seek education and employment opportunities while abstaining from drugs and crime. This phase is aimed at community re-integration. It is hoped that by the time of final graduation, participants will have developed the social and support networks to continue a lifestyle without drugs and crime, and without the coercion and intensive supervision of the court.

Figure 2.1 illustrates the participation status of the 120 participants of the North Queensland pilot program. As at 31 December 2004:

- 41 (34%) were actively participating in the drug court program;
- 45 (38%) had been terminated or had withdrawn voluntarily;
- 10 (8%) had absconded from the program and were yet to be apprehended; and
- 24 (20%) had successfully completed the IDRO and graduated.

Of the 41 participants who were actively participating, 18 were in phase one, 12 in phase two and 11 in phase three. Of those who had absconded or terminated from the program, the majority did so in phase one.

Figure 2.1: IDRO participant status and graduations at 31 December 2004



Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

As noted, each phase is expected to last about 12 weeks (84 days), and program completion should occur no less than 36 weeks after commencement (252 days). In North Queensland, the average time taken to complete phase one was 138 days. The shortest time was 84 days and the longest was 417 days (see Table 2.1). For phase two, completing participants (n=36) did so after an average of 115 days, while for phase three (n=24), completion averaged 101 days.

For the 24 participants who graduated from the drug court program, the average time taken to complete their entire IDRO program was 329 days. The minimum time to program completion was 247 days and the maximum was 513 days. For the 45 participants who were terminated from the North Queensland Drug Court program, the average number of days taken to be terminated was 193.

Comparisons were made between the Cairns and Townsville pilot program courts, although no significant differences were apparent in phase completion and graduation estimates. The only notable difference was that participants terminated in the Townsville pilot program drug court were terminated in less time (169 days) than were participants in Cairns (235 days).

Table 2.1: Time to completion

	n	Mean (min/max)	Median
Mean days to completion (min/max)^			
Days in phase 1	56	138 (84/417)	112
Days in phase 2	36	115 (54/285)	93
Days in phase 3	24	101 (56/156)	100
Total days to graduation	24	329 (247/513)	304
Days to termination	45	193 (28/490)	192

[^]Estimates are for participants having completed that phase

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Termination/withdrawal and absconding

About one third (n=45) of the 120 participants placed on the drug court program were no longer actively participating at 31 December 2004. Thirty-five participants had been terminated or had voluntarily withdrawn, while 10 had absconded and were yet to be apprehended by the police.

At the time of termination or final graduation, drug court participants are issued with a final sentence. In handing down the final sentence the drug court magistrate gives consideration to the participant's relative performance on the program and amends the sentence accordingly. In the case of graduated participants, the successful completion of the drug court program typically results in the reduction of the initial suspended imprisonment sentence to an order of probation or recognisance. For terminated participants, who are presumably terminating due to non-compliance or an unwillingness to participate, the initial suspended prison sentence will be invoked, less any time already spent in prison during their IDRO. If a participant has committed fresh offences whilst on the IDRO, the drug court magistrate may increase the length of imprisonment to account for these new criminal charges.

Table 2.2 illustrates the final sentences received by both graduates and terminates of the North Queensland Drug Court program. For graduates, 21 participants received an order of probation for an average of 206 days (seven months). One participant was also issued a fine in conjunction with their probation order. All terminated participants were imprisoned. The average length of the prison sentence was 119 days (four months). In addition to the prison sentence, two terminated participants were given a probation order and one was issued a fine. Finally, there were six terminated participants for whom there was no final sentence recorded on the drug court database, although the majority of these were ex-parte terminations.

The final row in Table 2.2 demonstrates the average change in the final sentence when compared with the initial suspended sentence. Recall that upon termination, the initial sentence can be amended to account for any time spent in custody (decrease in final sentence) and any additional sentence required for fresh charges (increase in final sentence). The results indicate that on average, final imprisonment sentences for terminated participants were reduced by 107 days – the maximum reduction was 449 days, although one terminated participant was subject to an additional 247 days (eight months) above the initial suspended sentence.

Table 2.2: Final sentence for graduates and terminates			
	n	Per cent	Mean days
Graduates			
Probation	21	88	206
Bond	1	4	–
Recognisance	1	4	180
Suspended prison sentence	1	4	90
Terminates			
Prison	38	84	119
Probation	2	4	270
Fine	1	2	–
Not recorded	6	13	–
Average change from suspended sentence	38	–	-187
(min/max)			(-449/247)

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Table 2.3 illustrates some of the basic demographic, drug use and offending indicators for three groups of IDRO participants:

1. participants who had terminated or withdrawn (n=45);
2. participants who had graduated (n=24); and
3. participants who were still actively participating at the time of evaluation, or had absconded (n=51).

In terms of demographics, there were few statistically significant differences between those who were terminated/withdrawn and those who had graduated. The only difference was that terminated participants were younger at the time of referral (26 years) than graduates (34 years) or those currently participating on the program (31 years). Although not statistically significant, other notable differences showed that terminated participants were more likely than graduates to be male, Indigenous, dependent on opiates and unemployed at the time of entry onto the program.

Comparison of lifetime offending histories indicates no significant differences in the average number of total lifetime charges for the active participants, those who were terminated or those who had graduated. However, a number of other interesting differences were noted:

- terminated/withdrawn participants were first charged at a younger mean age (18 years) than active participants (21 years) and participants who graduated (21 years); and
- graduates were less likely to have been charged as juvenile (17%) than those who had been terminated (38%).

Table 2.3 also provides information on whether a participant had absconded during the preliminary assessment phase and before their placement on the IDRO. Although not statistically significant, terminated participants were slightly more likely to have absconded than graduates or active participants.

Table 2.3: Summary indicators by IDRO participation status at 31 December 2004

	Terminated/ withdrawn (n=45)	Graduated (n=24)	Active participants (n=51)
Demographics			
Mean age*	26	34	31
Per cent male	80	67	86
Per cent married	82	79	80
Per cent unemployed	96	88	80
Offending history			
Mean lifetime offences	41	35	49
Mean lifetime property offences	19	14	25
Mean age of first charge	18	21	21
Per cent charged as juvenile	38	17	39
Mean number of referring charges*	24	20	14
Drug use history			
Per cent dependent on cannabis*	43	21	51
Per cent dependent on amphetamines	43	63	40
Per cent poly dependent	18	13	18
Program participation			
Per cent absconding during preliminary assessment	20	13	8
Per cent absconding during phase 1*	69	4	29

*Statistically significant difference at $p < 0.05$

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

For the purposes of comparison, active participants in Table 2.3 also include those who, at 31 December 2004, had absconded and failed to return to the drug court program for case determination. This is because absconding participants are still deemed active until such time as they are apprehended and brought back before the pilot program drug court. Alternatively, the North Queensland Drug Court legislation allows for an *ex parte* termination of participants who have absconded and failed to re-appear before the drug court within three months, in which case the offender would then be classified as a terminated participant.

While only 10 participants had absconded from the program and failed to re-appear by the census date, a much larger number of participants ($n=47$; 39 per cent of all 120 IDROs) had absconded at least once during their participation. Table 2.3 illustrates that 69 per cent of participants who had been terminated by 31 December 2004 had a prior history of absconding compared with 29 per cent of active participants and four per cent of graduates.

To further illustrate, Table 2.4 provides a summary of key indicators for all drug court participants who absconded from the program at least once, regardless of their status at the census date. On average, it took 51 days for a participant to abscond in the first instance. The minimum time was two days and the maximum was 247. The majority of participants ($n=37$, 79%) were subsequently apprehended on an arrest warrant and returned to the pilot program drug court. Their arrest usually took place after being at large for an average of 37 days. The minimum recorded time at large was two days and the maximum was 201.

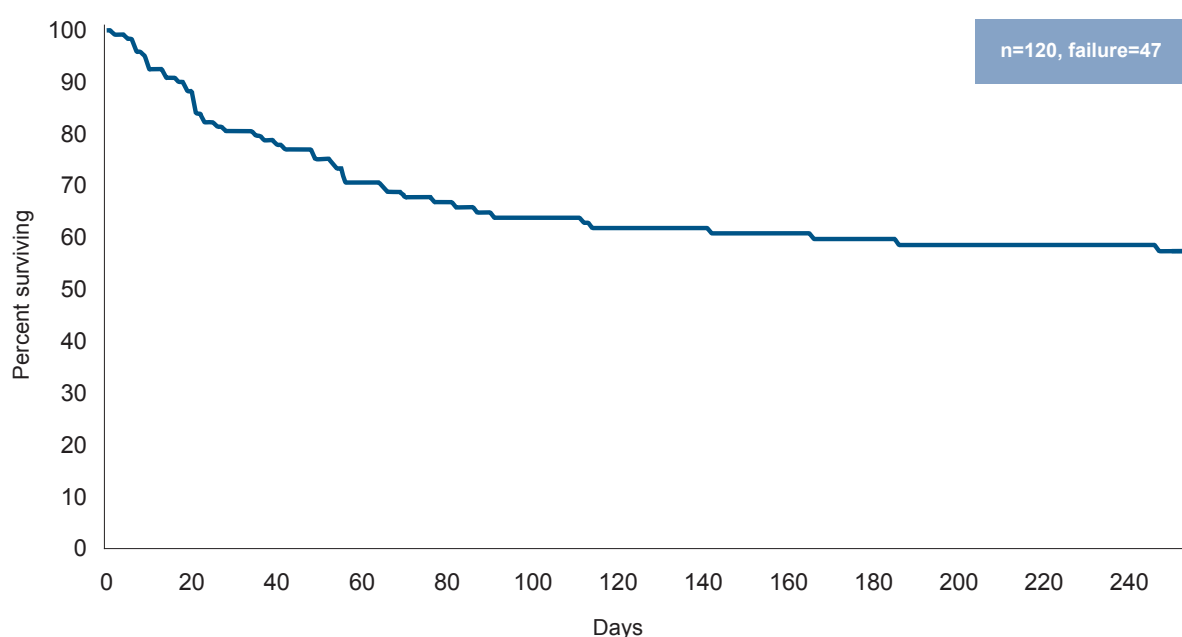
Table 2.4: Absconding indicators by phase at 31 December 2003

	Phase 1	Phase 2	Phase 3
Number entered phase	120	48	36
Number (%) absconding at least once	47 (39%)	9 (18%)	0 (0%)
Mean times failing to appear (min/max)	1 (1/4)	1 (1/2)	–
Mean days from phase entry to first failing to appear (min/max)	51 (2/247)	84 (4/294)	–
Mean days absent on first fail to appear (min/max)	37 (2/201)	47 (7/112)	–

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

These results are better understood through a survival analysis function, which graphically illustrates the rate of failure (days to first fail to appear) for each of the participants (see Figure 2.2). The Kaplan-Meier survival plot shows three distinct phases where the rate of failure was high in the first 25 days, easing but still steadily decreasing up to 80 days, and finally fattening for five outlying cases where failure occurred after 186 days and 247 days. The risk of absconding is greatest during the first 30 days of the IDRO.

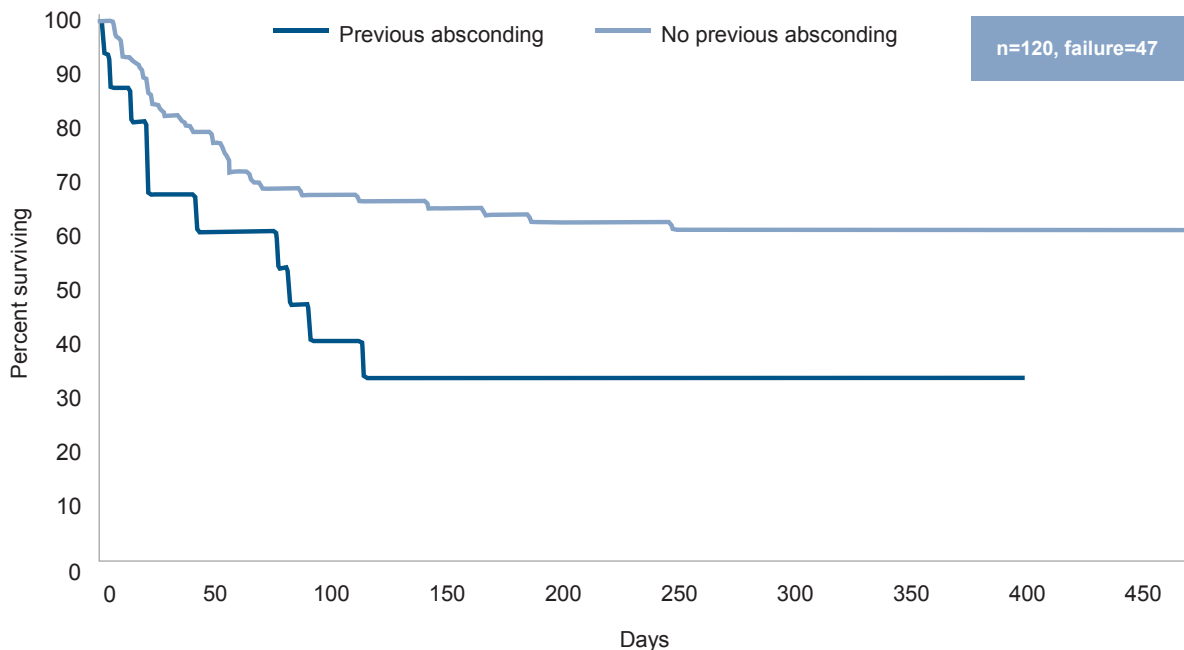
Figure 2.2: Survival analysis for days to first fail to appear



Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Survival analysis is not only used as a descriptive tool, but also to determine whether different groups of offenders are more at risk of absconding than others. Figure 2.3 illustrates the survival functions for two groups of offenders – those who had absconded during the preliminary assessment phase and those who had not. The functions illustrate a clear difference between the groups, suggesting that a previous history of absconding is a good risk marker for future absconding ($X^2= 4.76$, $p=0.0292$). Moreover, additional bi-variate survival analyses were conducted for gender, marital status and drug dependency. The results indicate that neither marital status nor gender are obvious risk markers for an increased likelihood of absconding, although participants assessed as dependent on opiates were more likely to abscond, and abscond earlier, than participants who were not ($X^2= 4.75$, $df=1$, $p=0.0293$).

Figure 2.3: Survival analysis for days to first absconding by previous absconding history



Log Rank Test of Equality: (Chi= 4.76, p=0.0292)

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

2.2 Program requirements

Drug treatment

There are two main forms of drug treatment offered as part of the North Queensland Drug Court program:

1. residential treatment – where participants are required to live in-house at the treatment centre; or
2. non-residential drug treatment – where a participant lives in the community but attends drug treatment programs through ATODS.

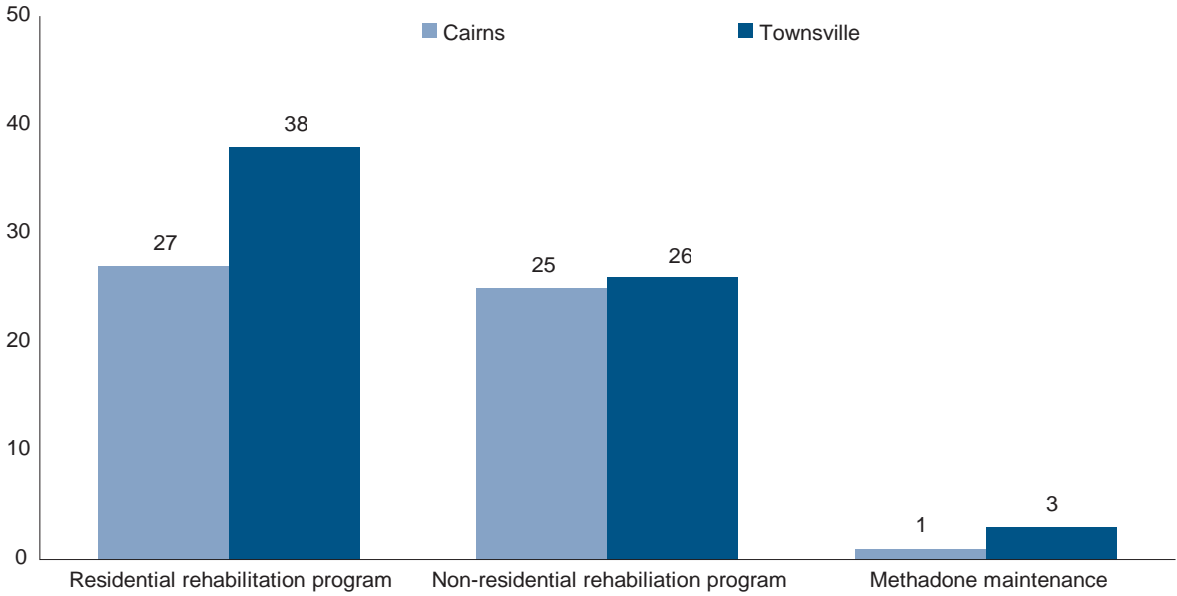
The number of IDRO participants having accessed either residential or non-residential treatment is indicated in Figure 2.4. In total, 65 participants were recorded as having been placed onto a residential treatment program at least once, and 51 participants were placed on a non-residential program. Some participants were recorded as having multiple drug treatment episodes, while others were recorded as having participated in both residential and non-residential drug treatment. The overlap indicates that:

1. 30 participants had two or more recorded episodes of residential drug treatment;
2. 34 participants had multiple episodes of non-residential drug treatment; and
3. 19 participants had undertaken both residential and non-residential treatment.

Further analysis of the drug court database indicates that 21 of the 120 IDRO participants were not recorded as having undertaken residential treatment, non-residential treatment or methadone maintenance. Many of these participants had only recently been placed on the drug court program, or had absconded in the

initial stages of their IDRO program. In some cases, participants were assessed as not requiring residential drug rehabilitation but had participated in other programs through DCS and ATODS; programs that were not coded or recorded on the drug court database as being non-residential drug treatment program.

Figure 2.4: Drug treatment, by court (number)



Source: Australian Institute of Criminology, North Queensland Drug Court database [computer file]

At the time of data extraction, just under half (47%) of all residential drug treatment participants reported multiple treatment episodes. Multiple treatment episodes can result when a participant is required to return to a residential treatment centre after absconding, being excluded for relapse, or for another rule of the facility or location. Table 2.5 provides descriptive data on the average number of days spent in residential drug treatment. Because some participants were still participating in residential treatment at 31 December 2004, the first measure is calculated only for participants who had *completed* at least one episode (n=52). The second measure calculates the average number of days taken to be re-admitted to residential treatment, should a participant have recorded a second episode of residential treatment. At 31 December 2004, the drug court database indicates that:

- the average time spent in residential treatment during the first episode was 47 days across both Cairns and Townsville; and
- the average number of days until readmission to residential treatment was 137.

Table 2.5: Residential drug treatment indicators, by court

	n	min/max	median	mean
Days in treatment – first episode[^]				
Cairns	23	1/143	29	50
Townsville	29	2/220	31	45
Total	52	1/220	30	47
Days to re-admission*				
Cairns	10	8/259	75	95
Townsville	20	0/505	68	159
Total	30	0/505	68	137

[^]Estimates do not include participants still attending treatment at 31 December 2003

*Statistically significant difference between means at $p < 0.05$

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Accommodation support

Not all offenders have appropriate accommodation for the duration of their drug court participation. During the preliminary assessment phase DCS will ascertain whether the participant's proposed residence is suitable. If not, they will recommend temporary relocation to a drug court accommodation support residence. This may occur at the commencement of the IDRO or after the participant has completed a residential drug rehabilitation program. The Drug Court Accommodation Support Program (ASP) is funded through the Queensland Department of Housing and Department of Communities.

In North Queensland, ASP is run through three local agencies, Addiction Help Agency (Cairns), Mission Australia (Townsville) and Community Rent Scheme (Townsville). At 31 December 2004, drug court statistics indicated that six participants (15 per cent of the 41 active participants) were living in supported accommodation. Three of these were in Townsville, and three in Cairns.

Court appearances

A core component of the North Queensland Drug Court pilot program is the requirement that participants appear before the drug court team at a scheduled court appearance. Initially, these appearances are conducted weekly. However, as the participant progresses in their rehabilitation, the number of required court appearances is reduced and/or supplemented with treatment team meetings (discussed later). There are a number of reasons a participant might be required to attend court. The first is for a performance review scheduled by the drug court team to review compliance with the IDRO. For all participants granted an IDRO there were 1217 court review appearances, as at 31 December 2004 (see Table 2.6).

A participant who fails to comply with their IDRO may be required to appear before the court for a special mention. This is a non-scheduled appearance that allows the court to sanction or reprimand a participant for breaching the terms of the IDRO. The North Queensland Drug Court program heard 258 special mentions. Townsville participants recorded the majority of special mention appearances ($n=185$, 72%) compared with participants in Cairns ($n=73$, 23%).

Overall, at 31 December 2004, the North Queensland Drug Court program had recorded 1928 appearances (sum of pre-IDRO, IDRO review and special mention) for participants who were admitted to an IDRO. The majority of these were in Cairns (1001 appearances) compared with Townsville (927 appearances). The fifth row of Table 2.6 provides the absolute number of court appearances, including appearances by participants who were eventually unsuccessful in their drug court referral. The total was 2258 appearances over the life of the North Queensland pilot program.

Table 2.6: Court appearances

	Total	Cairns	Townsville
Court appearances (n)			
Pre-IDRO mention	453	255	198
IDRO review	1217	673	544
Special mention	258	73	185
Total	1928	1001	927
Total (including unsuccessful referrals)	2258	1173	1085
Court appearances for successful (mean)			
Pre-IDRO mention*	4	5	3
IDRO review*	10	13	8
Special mention*	2	1	3
Total**	16	19	14
Standardised appearance rate per 180 days*	16	19	14

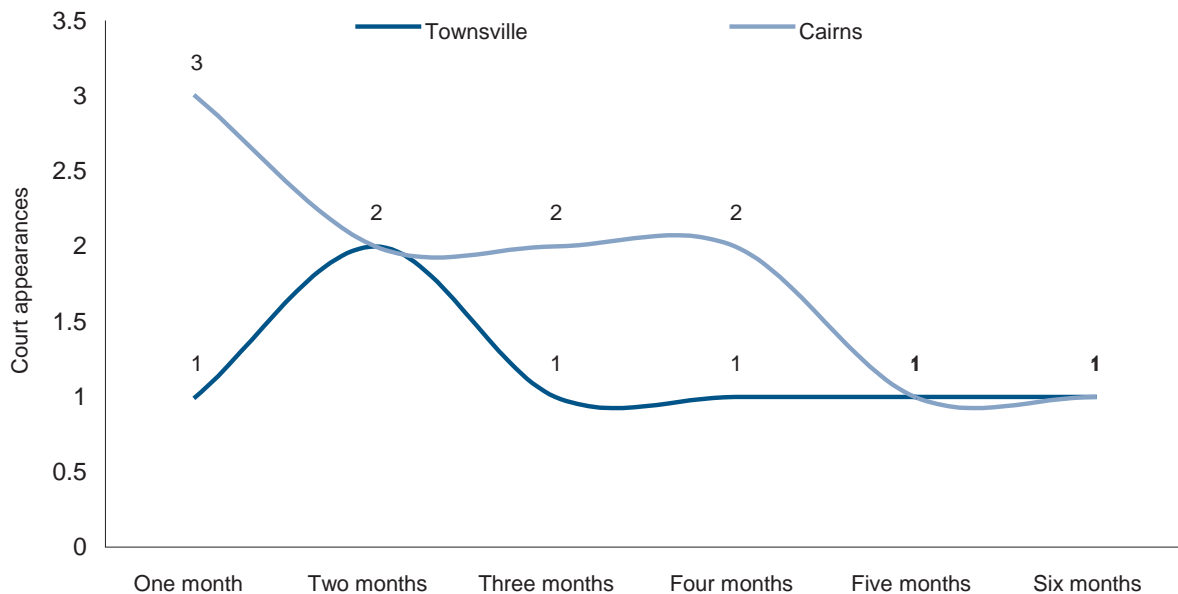
*Statistically significant at $p < 0.01$

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Table 2.6 also provides the mean number of court appearances by appearance type and court. As illustrated earlier in this report, Cairns participants appeared more often during the preliminary assessment phase than Townsville participants. This difference was statistically significant. In addition, Cairns participants reported a greater number of drug court reviews than their counterparts in Townsville. The opposite was true for special mention appearances, where Townsville participants appeared an average of three times for a special mention, compared to an average of only one appearance in Cairns.

Figure 2.5 tracks the average monthly court appearances for each of the northern courts. Estimates for the first month have been averaged across all participants having completed at least 30 days of the IDRO program. Similarly, the average number of appearances at the sixth month has been calculated for participants having completed no fewer than 180 days of the IDRO. The results indicate that Cairns participants were required to appear before the court an average of three times in the first month. This drops to twice a month in the second, third and fourth months of participation, before dropping again to once a month in the fifth and sixth months. Compare this with Townsville participants who appeared once a month on average, with the exception of the second month where they appeared twice on average.

Figure 2.5: Cumulative monthly court appearances, by court



Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Treatment team

The North Queensland Drug Court model advocates the use of a treatment team (TT) to reduce appearances in the court for participants who are compliant. The TT is defined under Schedule 5(3) of the *Drug Rehabilitation (Court Diversion) Regulation 2000* as including:

- persons acting for ATODS, Cairns or Townsville District, Queensland Health; and
- Queensland Corrective Services officers.

The same regulation states that the TT is responsible for:

- assessing a participant's compliance with their intensive drug rehabilitation order, including participation in the rehabilitation program; and
- providing support, treatment and assistance relevant to the order, as required by the participant.

The treatment team process

The Treatment Team meeting is conducted at the premises of ATODS or DCS. Attendees include two representatives from DCS and two Health representatives from ATODS. The Ozcare and Stagpole Street residential rehabilitation centre coordinators or accommodation support supervisor may also attend when their service is involved in supervising a participant. The general model is that the TT meeting commences without the drug court participant and members begin with a brief discussion of the client and their progress on the rehabilitation program. It is chaired by the DCS coordinator who acts primarily as a mediator, posing questions and comments to other members of the TT. The process is participatory, and each team member is given adequate time to present their observations and perspectives.

After detailed discussion of the participant's progress, the team members deliberate on their collective response to the participant's performance during the period of review. In some cases of non-compliance, the TT meeting will immediately refer the issue back before the drug court magistrate. The participant will be well known to all team members and the atmosphere must appear comfortable, not hostile. In those cases where the participant has co-operated with the rehabilitation order, the TT offers praise and encouragement. The participant is given the opportunity to discuss personal concerns or opinions, and is asked to take an active role in defining their personalised rehabilitation plan. The TT asks the participant what they would like to see occur over the coming weeks.

If a participant failed to comply with their IDRO, the TT asks them to explain their actions and to think of alternative behaviours that may have prevented their non-compliance. If the TT is to recommend a sanction, their reasoning is clearly explained to the participant. In some cases participants are offered the opportunity to comment on the prospective sanction. At the completion of the TT meeting, the client is thanked for their time and is allowed to leave. The group deliberates on the client's behaviour and demeanour and discusses final decisions. In the majority of cases the team reaches a consensus on the future program requirements/sanctions to be recommended. The recommendations of the TT are documented and presented to the drug court magistrate and court team at the participant's next court review.

Table 2.7 illustrates some descriptive statistics for the operation of the TT meetings, at 31 December 2004. Note that an individual entry is counted for each participant discussed during each meeting. In total, 778 TT meetings had been conducted; 357 in Cairns and 421 in Townsville.

At the time of original implementation of the North Queensland pilot, the process of the TT meetings was undefined and varied between the two courts. In Townsville, the TT had agreed that it was unnecessary and time consuming for the participant to attend and conducted most meetings in the participant's absence. In Cairns, a higher frequency of court reviews in the early period delayed implementation. When operational it was rare for the participant not to attend as attendance was a court-mandated requirement. The results in Table 2.7 are illustrative of these differences, where the majority of meetings in Cairns were conducted with the participant present (96%), while the opposite was true in Townsville. It should be noted that agreed outcomes from various North Queensland policy workshops now ensure that participants are present at all TT meetings, and steps have been taken to extend the use of the TT to South East Queensland.

Despite these early differences in method of delivery, the results suggest that the number of TT meetings held on behalf of each participant was similar in Cairns and Townsville. Moreover, there was no statistical difference in the standardised six-monthly rate of TT meetings between the two court locations.

Table 2.7: Treatment team			
	Total	Cairns	Townsville
Treatment team meetings (n)			
With participant	405	345	60
Without participant	373	12	361
Total	778	357	421
Treatment team meetings (per participant)			
Mean episodes	6	7	6
Standardised rate per 180 days	5	5	5

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Participant program involvement

Drug court participants are required to undertake a variety of programs whilst on their IDRO. For the most part, these programs are offered through DCS or ATODS. Table 2.8 reports the number of attendance episodes as recorded on the North Queensland Drug Court database, and the number of participants to which these episodes were attributable. Across both Cairns and Townsville:

- 10 participants had undertaken 35 episodes of Anger Management;
- 46 participants had undertaken 175 episodes of Life-skills;
- 25 participants had undertaken 106 episodes of Cognitive Skills; and
- 27 participants had undertaken 78 episodes of Abuse Counselling.

While some differences were seen between the courts, these differences are most likely due to the differences in program availability and recording on the database.

Table 2.8: Program participation		
	Episodes	Number of participants
Program participation		
Anger management	35	10
Life-skills	175	46
Cognitive skills	106	25
Relapse prevention	101	26
Substance abuse education	3	1
Abuse counselling	78	27

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

2.3 Compliance monitoring

Compliance with the requirements of the Intensive Drug Rehabilitation Order is strictly monitored by the drug court. Non-compliance is defined as any act or omission which contravenes an offender's undertaking to the IDRO. The formal mechanisms for monitoring compliance can be divided into three main areas:

- urinalysis – to monitor an offender's abstinence from illicit drugs;
- criminal offence monitoring – to ensure that no fresh charges are committed; and

-
- program participation – attendance at, and satisfactory participation in, each program.

Failure to comply with one or more of these requirements may result in the imposition of a sanction, and multiple episodes of non-compliance may be grounds for program termination.

Urinalysis

Urine testing is an important component of the North Queensland Drug Court pilot program. Section 24(1b) of the *Drug Rehabilitation (Court Diversion) Act 2000* sets out the requirement that participants report for drug testing to an authorised corrective services officer. The *Drug Rehabilitation (Court Diversion) Regulations 2000 Schedule 5(4)* constrains the frequency of testing to the minimum phase requirements of:

- twice weekly during phase one;
- once weekly during phase two; and
- twice fortnightly during phase three.

Interviews with drug court participants and officers from the Queensland DCS indicate that testing is often performed above the minimum requirement and additional tests can be ordered by the court. In reality, IDRO participants submit to about five random drug tests per fortnight during phase one, three tests per fortnight during phase two, and two tests per fortnight during phase three.

To facilitate the random testing process, all participants subject to an Intensive Drug Rehabilitation Order must be notified in writing that they are required to comply with the urine testing regime, including random tests, as directed by their supervising officer. Each day, unless prior exemption has been granted, the participant must be prepared to receive a telephone call between the hours of 7 am and 8 am directing them to report to their local area office for a urine test, or agree to receive a home visit from the mobile drug testing unit. Table 2.9 illustrates the total number of completed urinalysis and positive drug tests since the inception of the North Queensland Drug Court. At 31 December 2004, 5636 urine tests had been completed in North Queensland. The majority were random drug tests (86%), although these figures varied by court location.

The total number of positive drug tests was 1027 (18 per cent of all tests). By each drug type, the positive test results were:

- 706 for cannabis (13%);
- 206 for amphetamines (4%);
- 208 for benzodiazepines (4%); and
- 148 for opiates (3%).

There were no significant differences between Cairns and Townsville in the proportion of positive drug tests for any drug, or by each individual drug type.

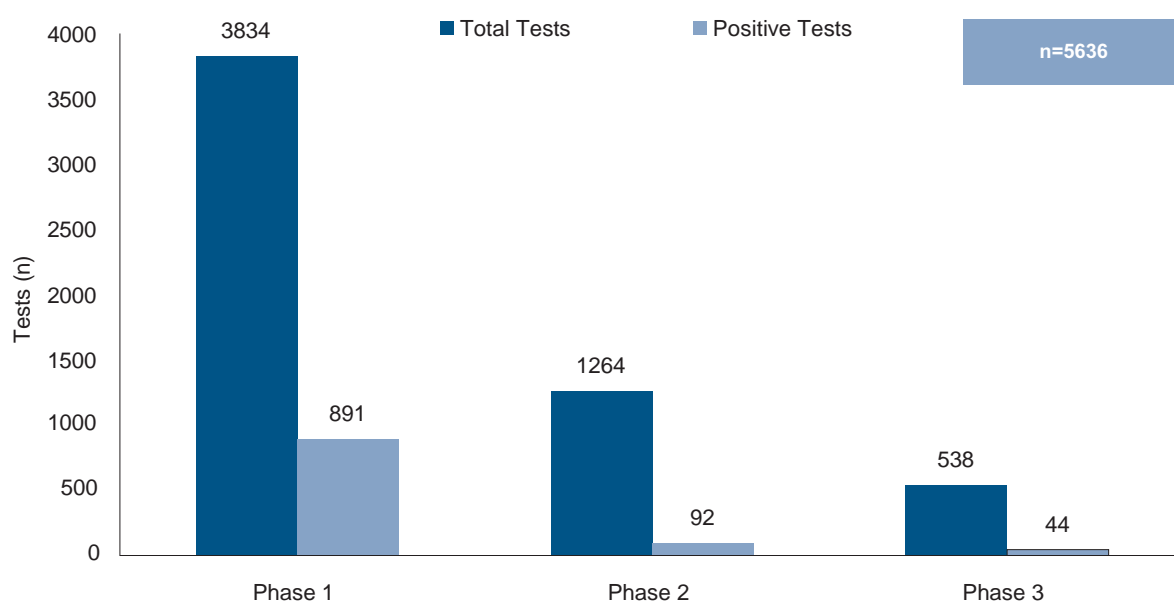
Table 2.9: Urinalysis testing at 31 December 2004

	Total	Cairns	Townsville
Urine testing (n)			
Random tests	4822	1944	2878
Screening tests	801	586	215
Confirmation tests (defendant requested)	13	5	8
Total	5636	2535	3101
Positive tests (n)			
Cannabis	706	325	381
Amphetamines	206	94	112
Opiates	148	87	61
Benzodiazepines	208	114	94
Cocaine	1	1	0
Any drug	1027	490	537
Per cent of all tests positive to any drug (%)	18	19	17

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Figure 2.6 indicates the distribution of drug tests and positive drug tests by phase as at 31 December 2004. As noted, the total number of tests administered to participants in all phases was 5636. Of these, 3834 were administered to participants in phase one, 1264 in phase two and 538 in phase three. The declining number of tests is indicative of the graduated testing regime noted earlier. In terms of positive tests, the number submitted in phase one was 891 (23 per cent of tests submitted). In phase two, the number and proportion of positive tests declines to 92 tests (7%). In phase three, 44 of the 538 tests submitted were positive to at least one illegal substance (8%). It is interesting to note that proportion of tests submitted in phase three that were positive increases by one per cent from phase two.

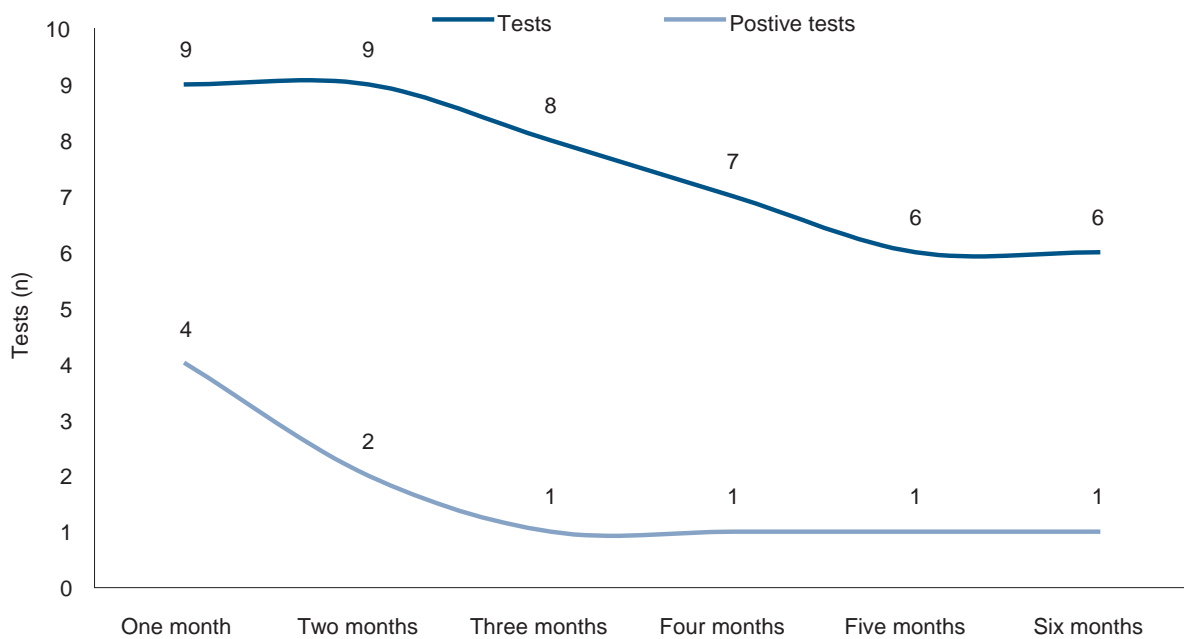
Figure 2.6: Total urinalysis testing, by phase



Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Consistent with the testing regime mentioned above, Figure 2.7 illustrates the average monthly urine tests as drug court participants progress through their IDRO. To ensure accurate comparative data, monthly averages have been computed for those IDRO participants who actively participated in the drug court program and completed the necessary time requirement for analysis. That is, the mean numbers of urine tests and positive tests in the first month are calculated for all participants who had completed at least 30 days of the IDRO program. Similarly, the mean number of tests completed in the sixth month is calculated for IDRO participants who, at 31 December 2004, had completed no fewer than 180 days of the IDRO.

Figure 2.7: Mean monthly urinalysis tests



Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Sanctions and rewards

Once the drug court team has established that a participant has breached the conditions of their IDRO, they will be required to consider an appropriate sanction. Alternatively, the drug court may offer a reward to a participant should they have demonstrated a consistent level of compliance.

There are a variety of reasons for which the drug court team may impose a sanction for non-compliance. These are illustrated in Table 2.10. In North Queensland, sanctions were most likely to be handed down by the court for a breach of order. Thirty-eight participants were sanctioned for failing to appear, 31 for failing to give a urine sample and five for new criminal charges. In full, 69 per cent of the recorded breaches were handed down in Cairns and 31 per cent were recorded in Townsville. At first these differences were thought to indicate that participants in Cairns breached the IDRO program more often, or that the Cairns drug court was more punitive in the administration of court imposed sanctions. The mean number of breaches per participant is provided in Table 2.10. It illustrates that Cairns participants had recorded significantly more breaches than those in Townsville.

Further investigation revealed that significant differences between courts may be the by-product of variations in recording, rather than actual breach patterns. This is particularly so where a participant appears for multiple breaches at the one court appearance. Differences in the way a magistrate will deal with multiple breaches may skew the data entry process and produce false differences between

the courts. Consider a participant who has committed multiple breaches appearing before two different magistrates. The first magistrate might decide to combine all breaches and impose just one sanction, so the final database record is likely to indicate one sanction and one breach. The second magistrate, however, might impose single, but less severe penalties for each individual breach, which would result in multiple breach records on the drug court database.

It is impossible to discern which cases of multiple breach were given just one sanction. However, by counting each individual appearance date as one breach episode, it is possible to adjust for the differences in the reporting and recording of multiple breaches. In doing so, the total number of breaches seen in Table 2.10 is actually the total number of episodes (single days) each participant appeared before the drug court for a breach. It suggests that despite differences in reporting and recording, participants in Cairns appeared more frequently (three breach appearances) than participants in Townsville (two breach appearances). This result was statistically significant. Moreover, by standardising the number of breach episodes to the number of days a participant was active, we can examine the daily (or in this case six-monthly) breach rate per participant. The breach rate confirms that Cairns participants were breached more often than those in the Townsville court.

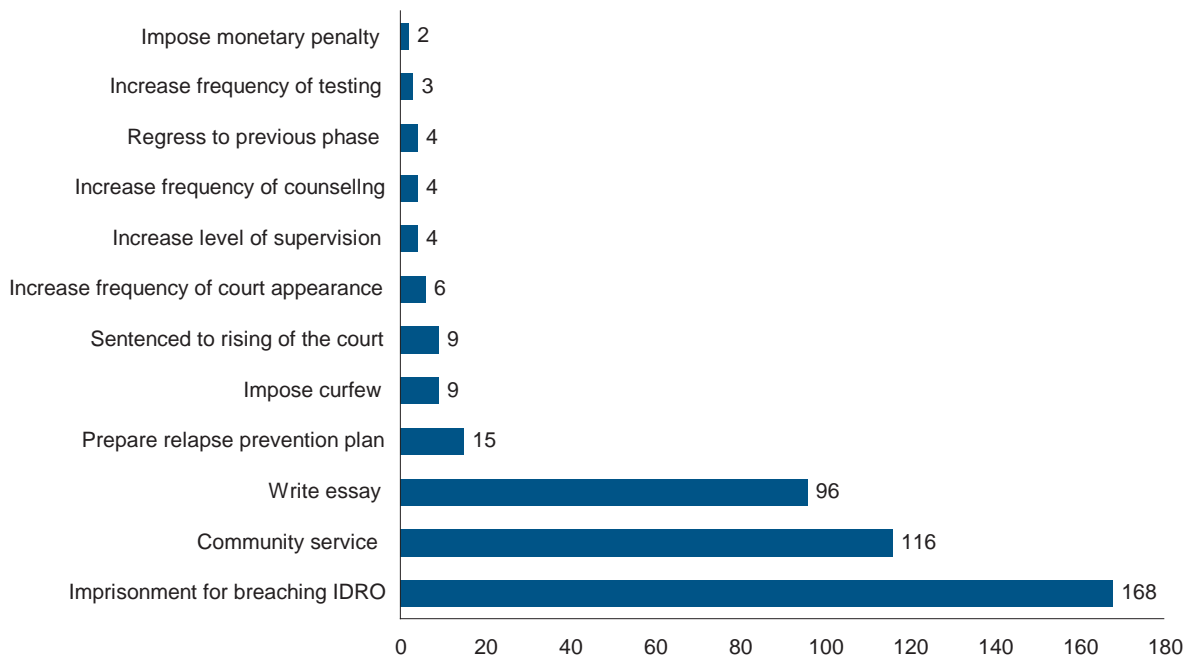
Table 2.10: Reason for participant sanctions			
	Total	Cairns	Townsville
Reason for sanction (number)			
Dishonest sample	9	4	5
New charges	5	1	4
Failure to give sample	31	27	4
Failing to appear	38	37	1
Using drugs	171	109	62
Breach of order	198	136	62
Not recorded	4	2	2
Total	456	316	140
Standardised sanction episodes per participant			
Mean sanction episodes*	2	3	2
Mean sanctions per episode*	1	2	1
Mean sanction rate [~] for 180 days on IDRO*	5	6	4

[^]A sanction episode is any day that one or more sanctions are imposed.
[~]Sanction episodes were standardised by the number of days on the IDRO to obtain a daily breach rate
 *Statistically significant at p<0.05

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Figure 2.8 illustrates the types of sanctions used in the North Queensland Drug Court and the frequency of their use. Imprisonment was used in 38 per cent of sanctions and was the most common sanction used in North Queensland. This was followed by community service, which accounts for 27 per cent of all sanctions.

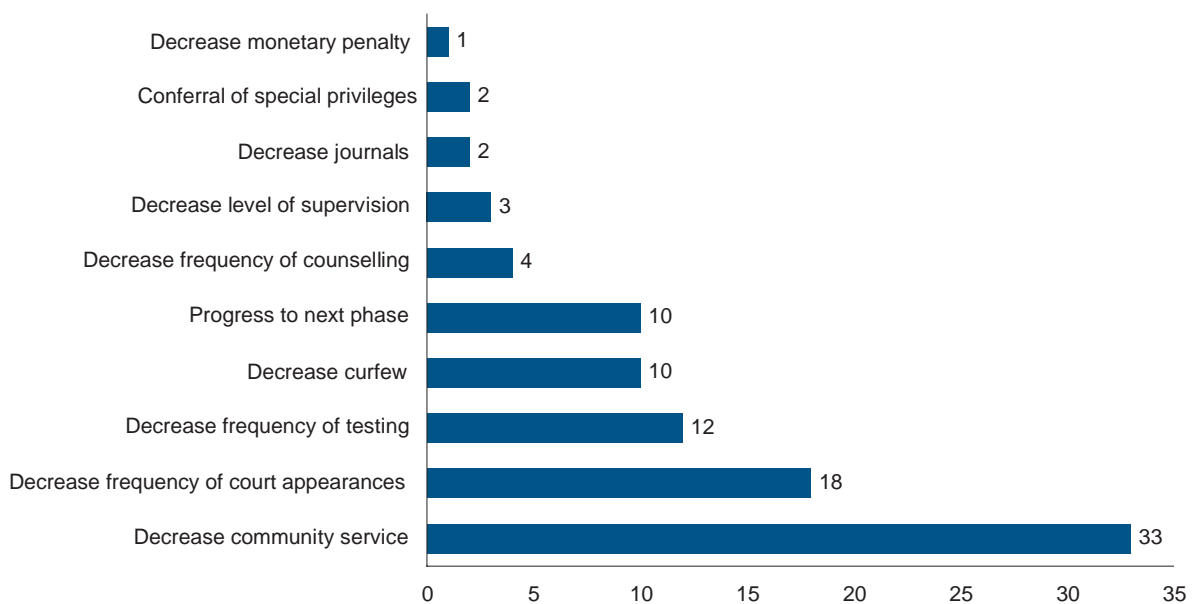
Figure 2.8: Sanctions



Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Figure 2.9 illustrates a decrease in the frequency of court appearances was the most common reward (35%), followed by a decrease in community service (19%). Further analysis indicates that participants of the Cairns drug court received court-imposed rewards more often than their counterparts in Townsville. The standardised reward rate per 180 days was 0.66 in Cairns and 0.20 in Townsville, a difference which was also statistically significant.

Figure 2.9: Rewards



Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

2.4 Comparative analysis

To understand how the North Queensland Drug Court pilot program differs from the program currently operating in South East Queensland, we compare the relative operational statistics derived at the time of final evaluation. For the South East Queensland Drug Court, the evaluation estimates were examined at 31 December 2002 after 31 months of operation. In North Queensland, the evaluation estimates are as at 31 December 2004 and are computed after 25 months of operation.

Table 2.11 illustrates the comparative differences between the North and South East Queensland pilot programs in the average time taken for participants to complete each phase. The results indicate that participants in North Queensland completed each phase in less time than their counterparts in South East Queensland, differences which were statistically significant. The time taken for graduates in the North Queensland program (n=24) to complete the program was 329 days, and was significantly less than the average of 451 days taken for graduates of the South East Queensland Drug Court (n=44). It also appears that non-compliant participants were terminated much earlier in North Queensland, though these results may be influenced by the number of days absconding participants spent at large.

In terms of absconding, there was no difference between the North and South East courts in the proportion of IDRO participants who had absconded during the preliminary assessment phase (13 per cent and 12 per cent respectively). However, participants in North Queensland were significantly less likely to have absconded during phase one.

Drug testing forms a core component of the compliance monitoring matrix. Participants who test positive to illicit drugs are likely to be sanctioned by the court. In North Queensland, 18 per cent of the 5636 tests submitted by drug court clients were positive to at least one illicit drug. This compares with only 10 per cent of submitted tests in South East Queensland. Similarly, North Queensland reported a higher proportion of positive tests to cannabis and amphetamines, and the same proportion of tests to opiates. These results are surprising, especially given that the prevalence of amphetamine and opiate use in the six months prior to referral was significantly greater in South East Queensland than in North Queensland.

Finally, the comparative data suggest that North Queensland Drug Court participants were sanctioned more frequently than participants in South East Queensland, but that imprisonment was used less often. A total of 436 sanctions were handed down in North Queensland. Standardised to obtain a sanction rate per 365 active days, this yields an average sanction rate for all participants of nine. This compares with participants in South East Queensland who, on average, were sanctioned three times in 365 active days. Despite being sanctioned more frequently, it appears that participants of the North Queensland Drug Court program were less likely to be sanctioned to imprisonment and more likely to receive community service than participants in the South East.

Table 2.11: Key program participation indicators, by region (per cent)

	North Queensland	South East Queensland
Time on program		
Mean days to complete phase one*	138	188
Mean days to complete phase two*	115	134
Mean days to complete phase three*	101	147
Mean days to complete IDRO*	329	451
Mean days to termination*	193	302
Absconding		
Per cent absconding in preliminary assessment	13	12
Per cent absconding in phase one*	39	58
Drug testing		
Total tests (n)	5636	12,916
Per cent positive to any drug*	18	10
Per cent positive to cannabis*	13	5
Per cent positive to amphetamine*	4	2
Per cent positive to opiates	2	2
Sanctions		
Total sanctions (n)	436	757
Mean sanction rate per 365 days*	9	3
Per cent Imprisonment*	38	53
Per cent Community Service*	27	18

*Statistically significant difference at $p < 0.05$

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]: Makkai and Veraar 2003.

2.5 Issues for program participation

The North Queensland Drug Court model was developed under legislation which sets out how the core components of the program should operate. Outside the legislation, however, the operation of the drug court program is driven by a joint practice and procedures manual that defines the roles and responsibilities of each drug court agency. The document is fluid, in that it can be updated as often as necessary to adapt to the new challenges faced by the court.

During the evaluation of the North Queensland pilot program, the Australian Institute of Criminology (AIC) was provided with the opportunity to canvass any technical or operational problems encountered by the court and its agencies. The AIC also conducted qualitative interviews with a number of current and past participants of the drug court program in an effort to understand how the program is operating, and what issues, if any, have significant implications for our understanding of the information and results presented in this evaluation study. The issues raised in this section have been chosen because of their value in illuminating our understanding of the drug court and its impact on participants.

Moreover, some of the issues presented here may have since been resolved through further funding or negotiation. Despite this, they remain important in understanding the development and implementation of the North Queensland Drug Court from its commencement in 2002.

Treatment and rehabilitation

Consultative interviews with treatment providers revealed a number of key issues affecting the provision of residential drug rehabilitation in North Queensland, including:

1. the provision of after-hours supervision at residential treatment facilities;
2. the location of treatment centres and their proximity to the central activity of the local drug market and drug court services;
3. the provision of alternative housing arrangements, should a participant need to be removed from a residential treatment facility;
4. the relocation of a participant who is non-compliant; and
5. the implications for abstinence-based treatment within a harm-minimisation framework.

After-hours treatment services

The first of these treatment concerns relates specifically to the provision of after-hours supervision at residential treatment centres. Up until December 2003, the funding regime of the residential treatment centres restricted the full-time employment of appropriately trained nursing staff to supervise participants after the normal hours of operation. During this time, treatment providers indicated that clients of their residential treatment service were unable to gain access to the immediate counselling and support needed during the evening hours, a necessary service for individuals coping with the unabated physical and emotional side effects of drug withdrawal. The inability to provide these services was believed to have contributed to an increase in non-compliance and offending, outcomes which would also inevitably result in greater financial cost to the program should these participants be incarcerated.

At the time of this final evaluation, further funding had been provided to enable the 24-hour provision of counselling and treatment support. In discussion, treatment providers suggested that this change has significantly reduced the level of non-compliance and drug use amongst their drug court clients.

Treatment location

Service providers in both Townsville and Cairns indicated the importance of location in the delivery of residential drug rehabilitation services. From the time of the drug court's establishment in November 2002, there have been a number of changes in the location of treatment services provided to drug court clients in North Queensland. Throughout this time, treatment providers and participants have expressed concern over a number of issues of importance to this evaluation:

- treatment services located in close proximity to local drug market activity provides unnecessary temptation for drug court clients undergoing the very difficult process of drug withdrawal;
- treatment services located in areas not serviced by public transport can have implications for participants who may not have the means to meet participation requirements because of limited access to services; and
- multiple consecutive appointments at geographically separated treatment services (both residential and non-residential) can be difficult to attend for participants, particularly those with other family commitments. Failure to attend may result in a breach or sanction.

Recent research in the United States has found that the further a client is required to travel to attend outpatient drug treatment, the less likely they were to complete the program (Beardsley, Wish, Fizzle,

O’Grady & Arria 2003). This has obvious implications for North Queensland Drug Court clients who live significant distances from the location of the program providers and have no access to transport. Moreover, drug court participants have a number of other family commitments which may inhibit their capacity to attend the necessary treatment programs. To illustrate this one participant reported:

‘I have a daughter. I have to get her ready for school, get her to school and then find my way into town. This is very difficult sometimes, particularly when my programs begin early in the morning.’
– Female, phase 2.

The importance of location to the delivery of residential and non-residential treatment programs should be considered carefully, particularly if it is likely to have a negative impact on the future success of drug court clients. Some team members have expressed concerns that insufficient analysis of site location can compound issues likely to affect the treatment and rehabilitation of some clients. If so, this would have similar cost implications as mentioned earlier.

Emergency accommodation

Should a drug court participant breach the rules of a residential rehabilitation centre they may be asked to leave by the treatment provider. In some cases, where a participant’s breach is likely to have an impact on other clients at that centre, the breaching participant will be removed from the centre immediately. Participants with no alternative thus may find themselves without adequate accommodation until such time as the drug court can organise alternatives. Breaches of this kind are most likely to occur outside normal business hours or on the weekends – times when the participant’s DCS case manager or health officer are unavailable. It was noted that on a number of occasions, participants in this precarious situation would be dropped off at the nearest shopping centre and expected to organise alternative accommodation themselves.

All drug court team members (including treatment providers) conceded that such an action is likely to place significant stress on the drug court participant – stress that is likely to lead the participant to engage in undesirable activities such as offending, absconding and drug use. All team members, including some participants, noted that the probability of re-offending and absconding was high, and that alternative mechanisms and emergency accommodation are needed to fill this gap.

Participant relocation

The issue of participant relocation is important in the North Queensland pilot program. At the time of evaluation, a number of participants had been transferred between the two regional courts. Unlike South East Queensland where non-compliant drug court participants may be transferred to any number of treatment facilities, the North Queensland Drug Court teams have limited options available to them. In Cairns, OzCare is the only residential treatment facility available. In Townsville, there are only two funded centres, OzCare and Stagpole Street. If a client in either of these locations fails to comply with their residential treatment program and the residential provider refuses to re-admit the participant, the drug court team must either terminate the participant or relocate them to the alternative North Queensland pilot program.

Most drug court team members were positive about the transfer process, although some expressed concerns about the impact of relocation on the rehabilitation of the participant. Ultimately, it requires moving a participant more than 400 kilometres from their home, a situation some believe may be counterproductive for participants with significant family ties or commitments in the city of origin. On the flipside, without the capacity to transfer clients to alternative treatment facilities, the drug court team may have no option but to terminate a participant from the program. According to most drug court team members, termination should only be considered if all other avenues have been exhausted.

Treatment philosophy and integration

Stagpole Street is one of two residential drug rehabilitation centres funded under the Townsville drug court program. This particular treatment service operates under a harm-minimisation ethos, which essentially means that clients are not always expected to abstain from drug use. Rather, they are to minimise the health and social impacts of their drug use to themselves and others. Drug court clients, however, who make up only a small fraction of Stagpole Street's active community clientele, are required by their IDRO to abstain from drug use. Frequent urinalysis is used to monitor this. Treatment operators indicated difficulties in encouraging active participation and integration of drug court clients with other community clients who are not subject to the same rules of drug abstinence.

This issue pervades not just the provision of residential treatment services at Stagpole Street, but also the non-residential programming services offered by the ATODS and DCS. Many participants of the drug court program expressed concerns about participating in group programs that involved non-drug court clients. According to these participants, this was because non-drug court clients were not judicially required to abstain from drug use and often spoke of their recent use while participating in the program. On occasion, participants reported that non-drug court clients were high while participating in the program, or had drugs in their possession for the duration of the program.

Treatment team

During the period of evaluation it became necessary to assess the benefits and pitfalls of the treatment team (TT) model. Recall that the TT process was established in North Queensland to reduce the number of formal court appearances required by a participant, and to deliver what was seen as the treatment component of the drug court in a less formal, more relaxed environment. Since the drug court's inception in November 2002, the TT process was implemented differently between the Cairns and Townsville courts. In Townsville, the TT operated in the absence of the participant, while in Cairns it was rare for the participant not to attend. Since December 2003, however, efforts have been made to realign the two courts to ensure that the drug court participant is a present and active party to the TT process. The TT meeting is seen as a way to provide the drug court client with the opportunity to:

- play an active role in the decision making process;
- discuss, without other participants present, any difficulties or problems they have encountered in their rehabilitation; and
- through adequate explanation, mitigate their actions in the case of a breach.

Although the treatment team process was designed to reduce the number of formal court appearances required of a participant, the TT process is not designed to decrease the level of formal contact required by the IDRO. It was an alternative mechanism conceived as a more effective way of managing participants without consuming a significant amount of court time. After all, drug rehabilitation is believed to occur outside court. However, reducing the number of court appearances is undertaken at a cost. Many drug court evaluations in Australia and internationally have highlighted the support and praise of the magistrate as an important and unique component to the drug court. This is also the case in North Queensland, with participants consistently reporting that although they did not like appearing before the drug court, the positive feedback from the magistrate was very important. Some participant comments included:

'One to one with the magistrate is good. It makes you feel special.'

– Female, phase 1.

'I am used to going to court and getting into trouble. But on drug court I get praised by the magistrate. That has never happened to me before.'

– Male, phase 1.

'When I graduated to phase two the magistrate came down and shook my hand. I felt like a normal person, not a drug user, not a participant, but a normal person.'

– Male, phase 2.

Nonetheless, the TT model simulates the court model in that it provides the basic components of support and praise to IDRO clients without requiring a formal appearance before the court. For this reason, participant involvement is vital. While the treatment team does not include the magistrate, most participants cited praise from the TT as equally positive and beneficial to them.

Most participants reported positive experiences from the TT process. However, some reported that the TT provided little additional benefit to their rehabilitation program, particularly in phases two or three. Two participants stated:

'I see the same people in the treatment team that I see every other day. I don't get any more out of it than what I would by having a chat with my DCS case manager.'

– Male, phase 2.

'The treatment team was great during phase one. I was trying to manage my cravings and everyone was very understanding. But, in the last two phases, there is little point in attending. There is no benefit to me.'

– Female, phase 3

On a final note, some drug court team members expressed concerns that legal representation was not provided to participants during the TT process. In court, the Drug Court Legal Aid Officer will advocate on behalf of the client on matters of sanctions and rewards. They also have the capacity to question the validity of statements made by opposing drug court team members. In the TT process, however, drug court clients are asked to comment on, and in some cases informally agree to, the decisions of the TT. While no final decisions are binding until the next court appearance, concerns have been raised about the rights and responsibilities of participants during the TT meeting.

Court appearance

The issue concerning drug court appearances has been widely debated in North Queensland. It is of particular importance because one core difference between the North Queensland Drug Court model and other national pilot programs was the notion that drug treatment and rehabilitation occurs outside the formal court process. This difference is significant as it reduces the formal contact each client has with the magistrate and drug court team, those who ultimately make decisions about the participant. From a therapeutic standpoint, many drug court team members from both cities expressed concerns that participants were required to appear too often and that a reduction in the appearance requirements would allow them to focus on their rehabilitation.

On the other hand, drug court team members in Cairns suggested that prematurely reducing the number of formal appearances might be detrimental to a participant's rehabilitation plan. The coercive nature of the court environment helps the participant maintain perspective during the initial stages of their rehabilitation – the time when participants are most vulnerable to relapse. In addition, one drug court team member expressed concerns that while the magistrate maintains the authority to sanction or reward clients, a reduction in the number of court appearances impedes the magistrate's understanding of the participant and knowledge of their progress. That is, the Australian drug court model is often seen as linking treatment with the judiciary. As part of this process the magistrate becomes involved in the lives of the participants that are appearing before his/her court. The notion of the impartial arbitrator is replaced with a caring, but authoritarian, guardian. Any decision to reduce the level of participant contact with the magistrate has implications for their understanding and familiarity with the circumstances that affect the participant. It also diminishes the capacity of the magistrate to compare the achievements and activities of each participant

with others on the program. That is, to ensure that like cases are treated alike, the magistrate must be fully abreast of each participant's circumstances and how they compare with other participants on the program. This is a tool often used by the magistrate when considering sanctions and rewards.

Drug court participants in both locations were asked about their experiences in court. As shown in the previous section, the majority of participants reported the drug court experience as favourable. Many stated that the drug court is more relaxed and comfortable than their previous contact with the court. Despite this, the majority also provided negative comments. Some examples included:

'I do not like reading out my journal to the judge. It is humiliating. I can't write very well and I am embarrassed.'

– Female, phase 2.

'They expect you to write about personal things and then tell them to everyone in the court – I just make it up.'

– Male, phase 2.

'There are people in the court that I know from when I was dealing on the street. I can't say everything I would like to say because they are there.'

– Male, phase 1.

The overwhelming majority of participants do not like journal writing. The journal is a written statement from the participant about their current drug court experiences and is presented to the magistrate. In Townsville, journals are read to the court at each court appearance. Participants may be required to answer a number of questions in relation to a recent breach, or simply be asked to comment on how they are progressing on the IDRO program. Many participants reported feeling incompetent and embarrassed when reading the journal. As a result, some reported 'making most of it up' just to please the magistrate.

In South East Queensland the journal is used as a direct means of communication between the participant and the magistrate. It is confidential and might be used to communicate grievances that the participant may not otherwise express in open court. From this perspective the writing of the journal facilitates a very important role in confidential participant communication. It recognises the right of the participant to communicate to the magistrate any areas of the IDRO program that are failing them, without the concern that such issues will be relayed back to other team members against whom the complaints may have been made.

In North Queensland the increasing use of treatment teams and the reduction of formal court appearances have diminished the opportunity for a participant to express concerns about the IDRO program. Unlike in South East Queensland, the journal no longer assures confidentiality. There is little doubt that the current use of the journal facilitates the development of important writing and oral skills, but this should not be at the expense of the participant's capacity to seek the assistance and understanding of the court in confidence.

Programming

During the consultative interviews in North Queensland, concerns were expressed that, in some cases, programs were being over-prescribed to drug court participants, and that greater emphasis is placed on the need to keep participants busy, rather than on the appropriateness of the program to the participant's needs. Over-programming has the potential to increase the level of participant frustration and lead to program burnout. Those working directly in the case management of participants, however, indicated the importance of keeping participants busy during periods where they were particularly vulnerable to relapse, birthdays and holidays, for example. Avoiding drug use relapse was considered a high priority

in the management of drug court participants.

In addition to the use of programs as time-fillers, some drug court team members expressed concerns about the lack of collaboration between key agencies in the delivery of drug court programs. That is, each key agency was believed to offer programs that were similar in content and objectives. While interviews with participants did not reveal program overlap to be detrimental, the level of similarity between programs illustrates a need to develop an integrated program schedule that avoids duplication of content. Drug court team members felt that a formal review of the range of programs delivered to participants should be undertaken. Such a review should consider whether:

- program content was suitable to drug court clientele;
- program delivery methods were appropriate; and
- client suitability had been adequately assessed, particularly where a participant has an identified mental health or learning disability.

The North Queensland Drug Court legislation provides for the inclusion of Technical and Further Education (TAFE) institutes as participating agencies. At present, TAFE is not directly involved with the drug court program except in cases where drug court clients have been granted permission to attend a TAFE program. It was suggested at various stages throughout this evaluation process that the role of TAFE be expanded to include program monitoring and review.

The overwhelming majority of North Queensland Drug Court participants were positive about the programs they had attended. In general, programs were said to be enjoyable and useful, with many participants stating that the lessons and skills learnt during their participation have been invaluable to their progress on the drug court program. Some individual comments included:

‘I had one hell of an anger problem – this [Anger Management] program has helped me to control my anger appropriately.’

– Male, phase 2.

‘The [Anger Management] program helped me to see what triggers my angry outbursts – I now know how to deal with these situations.’

– Male, phase 1.

‘The [ATODS MRT] program made me delve into my own thought processes.’

– Female, phase 2.

‘The Life-skills program was great. I had never been taught how to budget and I wasn’t very good at cooking. Since completing the program I have saved a little money and I am eating much better meals. My kids are too.’

– Female, phase 2.

‘The [ATODS MRT] program was tremendous – it sparked in me an interest to do my own research.’

– Male, phase 1.

Where participants indicated negative comments they were mostly centred on program delivery. Group size was one such example, with some participants indicating that they were less inclined to actively participate in programs conducted in large groups.

Finally, both participants and drug court team members stated that current programs are limited and that additional programs are needed to address the varying needs of clients. An example used by one team member was that some participants have significant problems in their existing marriage or de facto relationships, which are likely to impact upon a participant and their compliance with the drug court program.

Failure to assist participants with problems such as these can be detrimental to their rehabilitation plan and success on the IDRO. Incorporating additional programs and utilising the services of other qualified program providers is seen as essential in preparing drug court participants for reintegration into the community as non-drug using individuals.

Termination

As a component of this evaluation, the Australian Institute of Criminology was provided with a unique opportunity to speak with a number of those participants who had been terminated from the North Queensland Drug Court program. This was facilitated by the management and personnel of Stuart Prison (Townsville) and Lotus Glen Prison (Mareeba – Cairns), the locations where most terminated participants are sentenced. These qualitative interviews were designed to uncover some of problems and concerns encountered by participants who did not successfully complete the drug court program.

Terminated participants were asked how they felt about being terminated from the drug court program. The responses were mixed; some reported being disappointed that their time on the drug court program had ended prematurely, while others were glad to be off the program. Those who were glad overwhelmingly reported that the reason they decided to do the drug court program was that they wanted to avoid jail, and they were not committed to getting off drugs. Being terminated and sent to prison for these terminated participants was an opportunity to ‘do my time without the hassles of the drug court’. Some responses included:

‘It was a relief to be sent back to jail – because you don’t have to answer to anyone – not like the drug court. Coming back to jail didn’t worry me because jail is no deterrent for me.’

– Male, terminated.

‘I just wanted to get my time over and done with.’

– Male, terminated.

‘I couldn’t stop thinking about how my [head sentence] was only four months – it was easier just to come to prison.’

– Male, terminated.

‘I was disappointed to be terminated, but there was no alternative. They were ignoring my pleas for help and I would have gone anyway. I asked to be terminated, because I felt like no one was listening to me.’

– Male, terminated.

‘I asked to be terminated, because I have two kids ages two and six years old. I would have liked to have finished, but it was taking too long.’

– Male, terminated.

Reasons why participants may be terminated from the program vary. Some are terminated because of new charges or breaches, and others request termination. Voluntary termination does not typically occur unless a participant has a long history of breaches. The majority of terminated participants interviewed for this evaluation conceded that their termination was a fair outcome, either because they had requested it or because there was every indication that their termination was imminent and that it was just a matter of time. For most, termination itself was not a surprise but they saw an injustice in the lead-up to their termination. Some felt that despite their pleas, the court would not accommodate their individual needs. For example:

‘At the time I thought it was unfair to be terminated, but looking back now I can see that they had no choice.’

– Male, terminated.

'I wanted to move out of rehab and find my own accommodation because I wanted to live closer to my son. I didn't think that this was unreasonable. [The drug court] told me that I had to finish the rehab or I would be terminated, so I chose to terminate myself.'

– Male, terminated.

'I had speed psychosis and they weren't medicating me properly. If I was medicated I wouldn't have committed the breaches and I wouldn't have been terminated. My termination was fair because of what I did, but it could have been avoided.'

– Male, terminated.

'I didn't get as many chances as some of them on the [drug court]. I would have liked another chance, and I would have liked them to consider letting me live with my mum.'

– Male, terminated.

'Had the court allowed more flexibility with my kids and my fiancée I would have completed the program easily.'

– Male, terminated.

The overall response from terminated participants was varied, with each having a different and unique experience. However, two common themes were discovered:

1. the importance of having good, stable family relationships; and
2. the importance of understanding and dealing with emotional and psychological issues.

Almost all terminated participants cited the lack of contact with family as a reason for their termination. Similarly, greater contact with family was identified as one of the things that would have helped them to complete the program. Many cited unresolved issues at home as the major cause for additional disruption to their rehabilitation which, if managed properly, would have prevented their terminating actions. When asked how the drug court program could be improved one respondent stated:

'The [drug court] should help people adapt to a constantly changing family environment. I didn't have enough family support in the beginning.'

– Male, terminated.

Similarly, issues of anger, emotional distress and other psychological problems were noted by many of the terminated participants as personal areas that the drug court could not help them with. Terminated participants reported a sense of being overwhelmed by the drug court program. At the same time, they did not feel as though the program was helping them to overcome some of the deeper issues that they faced. One terminated participant reported that 'drugs was the least of my problems' and that the 'drug court just didn't understand that'.

The drug court program is not conceived as a holistic program that will, or can, prevent the drug use and offending for everyone who comes in contact with it. Termination policy is designed in the context that some participants will not be ready to change or that criminal activity may be caused by other factors outside the offender's drug use. This information from terminated participants provides a unique window for understanding the type of general characteristics that appear linked to non-compliance, and indicates that further discussion and development needed in identifying and dealing with are:

1. an offender's willingness to change;
2. an offender's family and social environment; and
3. an offender's psychological and emotional stress as possible causes of their drug use and offending.

2.6 Discussion

This section has examined many of the key elements integral to the provision of the North Queensland Drug Court pilot program. In summary, it has illustrated that as at 31 December 2004:

- of the 120 offenders admitted to the North Queensland Drug Court pilot program, 24 had successfully completed the requirements of their IDRO and graduated. Of the remaining participants, 45 had been terminated, ten had absconded and 41 were actively participating;
- participants who were terminated were more likely to be younger, male, unemployed, dependent on opiates, and have first been charged as a juvenile;
- forty-seven participants (39%) had absconded at least once while on the drug court program. The average number of days to abscond was 51. The risk markers identified for absconding were having a prior history of absconding (especially in the preliminary assessment phase) and being dependent on opiates;
- the majority of participants undertook either residential or non-residential drug treatment. The average number of days spent in residential treatment for the first episode was 30;
- 2258 court appearances had occurred in North Queensland;
- a total of 778 treatment team episodes were conducted. There was no difference between Cairns or Townsville in the number of treatment team meetings held, although in Cairns the treatment team meeting was most likely to be conducted with the participant present;
- a total of 5636 urinalysis tests had been completed, 18 per cent of which were positive. Participants in both courts reported reductions in the number of positive drug tests as they progressed on the drug court program; and
- the most frequently used sanction was imprisonment, followed by community service. Rewards were given more frequently in Cairns. The most utilised reward was a decrease in community service.

The comparative analysis between the North Queensland and South East Queensland Drug Court pilot programs illustrated that:

- participants in North Queensland completed each phase in fewer days, and the average time to graduation was 120 days less in North Queensland;
- participants in North Queensland were less likely to abscond during phase one;
- a greater proportion of urinalysis tests submitted in North Queensland proved positive for illicit drugs. These tests were most likely to be for cannabis; and
- North Queensland participants were sanctioned at a higher rate than participants in the South East, although the North Queensland Drug Court was less likely to use imprisonment as a sanction and more likely to have used community service.

There were a number of other implementation issues identified during this evaluation of the North Queensland Drug Court. These issues, many of which have been rectified through the implementation of the joint practice and procedures, were noted by either drug court participants or drug court team members as problems likely to have resulted in less favourable outcomes for drug court participants. In summary, these included:

- the provision of after-hours treatment services to prevent absconding or breaching;

-
- the location of residential and non-residential treatment services within the close vicinity to local drug markets;
 - the lack of emergency drug court accommodation for situations when drug court clients are required to vacate a residential treatment service; and
 - participant relocation resulting in the displacement of offenders away from family.

Finally, a unique opportunity to interview terminated drug court participants allowed an examination of the key issues and problems faced by those who are unsuccessful. The interviews revealed the importance of a stable family relationship in assisting in the rehabilitation process, and the problems associated with other psychological and emotional issues experienced by participants. This highlighted the need for an ongoing monitoring and review process whereby the assessment and case management tools used by the North Queensland Drug Court can be examined for their effectiveness and appropriateness for drug court clientele.

3 Drug Court Outcomes

The North Queensland Drug Court pilot program aims to deliver a number of important objectives. The Australian Institute of Criminology was specifically asked to examine whether the drug court program was successful in reducing:

1. the level of criminal activity associated with drug dependency;
2. the level of drug dependency in the community; and
3. the health risks to the community associated with drug dependency.

This section examines these important issues.

3.1 Reducing crime

Before examining whether the North Queensland Drug Court pilot program was successful in reducing crime, a number of important, albeit technical, elements must be established.

The data

Re-offending estimates used in this evaluation have been calculated from data extracted from QPS's centralised criminal history records. Although re-arrest measures are believed to underestimate the true frequency and volume of offending, there is a long tradition in criminology that relies on officially recorded offence data as a measure of offending (Coleman & Moynihan 1996). Despite its imperfections, official police records are the closest and most consistent measure of re-offending available to this evaluation. It is this same data that were used to measure the pre-referral criminal history in chapter one.

Typically, for each offence committed the police record will indicate;

- offence type;
- number of counts – times charged with that offence on any one day;
- offence date – the date on which the offence was committed; and
- court date – the date on which the offence was heard in court.

Using the recorded offences and relevant offence dates, it is possible to determine which of the new recorded offences were committed during or after participation on the drug court program. Moreover, the arrest dates are used to calculate the number of days between events so that we may determine how long it took for an offender/participant to be re-arrested.

Finally, as a matter of consistency, offences occurring on the same date are coded and referred to as an offence episode. Episodic measurement is used for a number of reasons, not the least of which is the possible inconsistency in how individual offences are recorded. Aggregating to an arrest episode allows us to measure the unique intervals in which a criminal transaction occurs, and controls possible bias in police recording practices.

Measuring re-offending

Recidivism is the term used to define the act of re-offending and its measurement is complicated by a number of factors, not the least of which is the availability of suitable data. For the purposes of the present study, two measures have been developed:

-
1. the time taken to re-offend; and
 2. the frequency of offending.

Note that the raw prevalence of re-offending is not included as a measure of recidivism in this study. Although prevalence rates are provided, they are reasonably uninterpretable without the consideration and application of a metric of time. Given that some participants were on the drug court program for longer than others, the opportunity to re-offend is therefore different for each participant. As such, longitudinal analytic techniques such as survival analysis are used to measure the occurrence of an event (in this case re-offending) as a function of the time an individual was available to be re-arrested.

Moreover, time to re-offending measures recognise that some drug dependent criminal offenders are significantly enmeshed in a criminal lifestyle prior to their contact with the drug court program. As such, total abstinence from offending, while ideal, is not a realistic outcome for all drug dependent offenders. Prolonging an offender's re-entry into the criminal market is, therefore, a positive outcome. Simply increasing the time it takes for an offender to re-engage in a criminal lifestyle can have significant financial and social benefits for the community.

The comparison groups

In order to determine whether drug court participants were less likely to re-offend, we must compare the re-offending results with a comparison group¹. In North Queensland, random allocation to the drug court program was not attempted nor considered as a viable option for the delivery of drug court services. Such an option would have denied access to a viable population of offenders whom the program was designed to target and benefit. Because of this there is no randomised control group with which we can compare the recidivism results. In its absence, however, we can compare the relative recidivism rates of drug court participants with the group of offenders who were referred to the drug court program but refused to participate (n=36). For the most part, these offenders were otherwise eligible to participate but chose not to. Earlier descriptive statistics indicated little difference between these refused offenders and those who agreed to participate (see section one).

While the refusal group is the only comparable group of offenders, it is important to note that by refusing to participate an offender is either sentenced by the drug court magistrate or remitted back to the normal magistrate's court for sentencing. This final sentence may not lead to a period of incarceration if the magistrate does not believe it is necessary. Despite this, the pre-referral offending rates illustrated later in this report indicate very similar offending profiles in the 12 months prior to referral for both the drug court participants and the refusal comparison group.

Note that unlike in South East Queensland, this evaluation does not have prisoner comparison group – a group of prisoners identified as similar to drug court clients, but who did not participate in the drug court program (Makkai & Veraar 2003). This was because:

- the sample of participants on the North Queensland Drug Court program was too small to facilitate any detailed comparative analysis with adequate controls; and
- the drug court program was already experiencing difficulty in achieving its quota of participants, and any attempt to identify a reasonably sized comparison would prove futile.

¹ The gold standard in evaluation is a randomised control trial whereby drug court clients are randomly selected for participation. Those not selected to participate are placed into a control group and processed through the courts in the usual way. Assuming that randomisation does not result in any bias, the outcomes of the drug court participants can be compared with the relative outcomes of the control group, and the differences therefore interpreted as resulting from the drug court's intervention.

Not having a prisoner comparison group limits our capacity to conclude that the drug court program has achieved 'real and comparable' reductions in offending. However, using a comparison group that is not comparable would also have the potential to bias the results. In this case, the probability of detecting a large enough sample of prisoners with the same characteristics was considered too low to warrant the identification of this comparison. Any attempt to widen the net would have resulted in the identification of a non-comparable comparison group and biased our interpretation of any resulting benefits. In this case, we err on the side of caution.

The follow-up period

For the purposes of measuring recidivism, recall that re-offending is calculated against a function of time. This is because each participant spent a varying amount of time on the drug court program and their re-offending rates can only be measured against the length of time in which they were observed. In the present evaluation, the follow-up period is measured as the number of days each subject was observable – for drug court participants this was the number of days between being admitted to their program and the evaluation date of 31 December 2004. For the refusal comparison group, the follow-up period is measured from the date of refusal to the evaluation date. Both the refusal date and the program commencement date represent the date at which each subject was determined by the court.

Table 3.1 illustrates the average number of observable days in the follow-up period for both the participant group and the refusal comparison group. Graduated participants were observed for an average of 503 days, terminated participants for 473 days and the refusal comparison for 352 days. The final category in Table 3.1 provides the average follow-up time for all participants of the program, including graduates, terminates and those currently participating. This group is representative of the general category of drug court participants and is consistent with Blenko (2002, p.183), who argues that 'it is important for drug treatment evaluations to analyse the outcomes for all drug treatment court clients, not just graduates'.

Note that the total number of observable days in the follow-up period is not indicative of the number of days each offender was free and able to re-offend. Some participants of the drug court program are incarcerated for varying periods of time, during which they are technically unable to engage in recidivist activities. An adjustment is needed to the follow-up period to account for the time an offender was incapacitated and unable to re-offend. To do this, the number of days spent in prison is subtracted from the total number of observable days. This results in a new estimate of the follow-up time, which is herein referred to as the number of free days each offender was able to re-offend.

To illustrate, we track two hypothetical offenders for 100 days, over which time each committed 10 new offence episodes. Without the adjustment for prison time, each offender is taken to have re-offended at a rate of 0.10 (or one offence episode every ten days). Imagine, however, that Offender A was apprehended and sentenced to 50 days imprisonment during this time, while Offender B was not. For Offender B, the offending rate remains at 0.10, while for Offender A, the 10 offences committed in the 100 observable days actually occurred within the 50 days that the offender was not in prison. The offending rate is therefore adjusted to 0.20 (or one offence episode every five free days), suggesting that Offender A's rate of recidivism is twice that of Offender B's.

Table 3.1 illustrates the average time each comparison group spent in custody during the observable follow-up period. For each group, prison time is calculated as the sum of:

- refusals – any post-refusal custody;
- graduates – any IDRO custody sanctions and any post graduation custody;
- terminated – any IDRO custody sanctions and the final sentence at termination, and any additional

post termination custody; and

- current participants – any IDRO custody sanctions.

By comparison group, the final calculations reveal the averages for each group were:

- refusal comparison – 40 days in custody resulting in 312 free days;
- graduates – four days in custody resulting in 499 free days;
- terminates – 160 days in custody resulting in 328 free days; and
- for all IDRO participants combined – 66 days in custody and 313 free days.

Table 3.1: Post-entry follow-up times by comparison groups as at 31 December 2004

	Refused (n=36)	Graduated (n=24)	Terminated (n=45)	All participants (n=120)
Post-entry (mean days)				
Days since program start (a)	352	503	473	373
Prison days since program start (b)	40	4	160	66
Free days since program start (a-b)	312	499	328	313

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Time to first offence (post-entry)

The first measure used to assess re-offending is the time to first offence. Table 3.2 provides the relative re-offending estimates for each of the comparison groups by offence type. The estimates indicate that at 31 December 2004, 48 per cent of drug court participants (all participants placed on an IDRO) had been apprehended and charged by the police for at least one episode of offending across all offence types. This compares with 53 per cent of offenders in the refusal comparison group. By offence type, the relative prevalence of post-entry offending was:

- any property offence – 21 per cent of drug court participants compared with 14 per cent of the refusal comparison;
- any violent offence (including robbery) – five per cent of drug court participants compared with zero for the refusal comparison;
- any drug offence – 14 per cent of drug court participants compared with 28 per cent of the refusal comparison; and
- any breach offence – 26 per cent of drug court participants compared with 42 per cent of the refusal comparison.

While it is possible for an offender to be apprehended by the police on a breach of bail, probation or other community corrections order, it is difficult to ascertain from the official police records whether this breach was in relation to a previously recorded offence, or whether the breach itself indicates a new offending episode. In addition, should a participant abscond from the drug court program or fail to appear as scheduled, the drug court magistrate may issue a bench warrant for their arrest. This bench warrant is the official mechanism through which police may lawfully apprehend a drug court participant without needing evidence or reasonable suspicion of fresh offending. The fail to appear does not constitute a new offence, but the recording of the bench warrant as a breach by the police will be coded as a new offence episode. The implications of this are twofold:

1. should a breach be related to a previous offence but given a different date, it will, if occurring alone on any single day, be recorded as a new episode of offending and may contribute to the double counting of offending episodes; and
2. should the police record a breach to facilitate the apprehension of a participant who has failed to appear, it will, if occurring alone on that day, also be recorded as a new episode of offending.

To overcome this possible bias, this evaluation presents two any offence episode measures in table 3.2. The first measures any day where any offence (including a breach) is recorded. The second calculates all offence episodes, less the number of episodes where a breach was the only offence recorded on that day. The resulting differences in the prevalence estimates of re-offending are significant, reducing by 14 per cent for the refusal group, 13 per cent for the graduates and eight per cent for all participants of the drug court combined.

On a final note, it is impossible to say which of these estimates is the most accurate in determining the level of actual re-offending, so we use the point estimates to conceptualise the upper and lower limits of re-offending across each comparison group.

Table 3.2: Post-entry re-offending as 31 December 2004 (per cent)				
	Refused	Graduated	Terminated	All IDRO participants
	(n=36)	(n=24)	(n=45)	(n=120)
Post-entry				
Any offence episode*	53	42	78	48
Property offence episode*	14	13	36	21
Violent offence episode*	0	0	13	5
Drug offence episode	28	17	24	14
Breach offence episode	42	33	42	26
Any offence episode (excluding breach only)*	39	29	69	40

*Statistically significant at $p < 0.01$ between refused, graduated and terminated.

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

So far the re-offending prevalence rates indicate little or no difference between the drug court participants, and the refusal comparison group – with re-offending estimated at between 40 and 50 per cent. By offence type, it appears that drug court clients were slightly more likely to have committed a property or violent offence, and less likely to have committed a drug offence.

These raw prevalence rates are provided for illustrative purposes only and are relatively meaningless unless measured against time. The longer an offender is observed, the greater the number of days in which their offending can be measured. Further, while the prevalence rates indicate that 52 per cent of drug court participants had not re-offended by 31 December 2004, it is impossible to determine whether they would have offended should the evaluation have followed them for longer.

Survival analysis is a statistical technique used to model event occurrence (in this case re-offending) from longitudinal data. The technique measures the risk of re-offending at any time point, as experienced by a randomly selected offender should they not have previously re-offended. The technique allows us to account for two important factors: that the actual survival time (time to first offence) for those who had not re-offended before 31 December 2004 is unknown; and that the follow-up times for each offender can vary (Singer & Willett 2003).

Figure 3.1 illustrates the survival function for the number of free days to first offence (any offence). The comparative curves illustrate the survival experience for the 120 IDRO participants and the refusal comparison group. The two curves can be interpreted as the proportion of each sample that will *not* have re-offended (survived) at any given time interval. A line drawn at 50 per cent helps to further quantify and understand the survival experience between the two groups. Where each survival curve crosses the 50 per cent mark, it is at that point in time (or after that number of free days) when half of the sample will have re-offended. In this case, 50 per cent of the refusal comparison group will have re-offended within 100 free days. This compares with the IDRO participants of whom 50 per cent will have re-offended between 300-350 days.

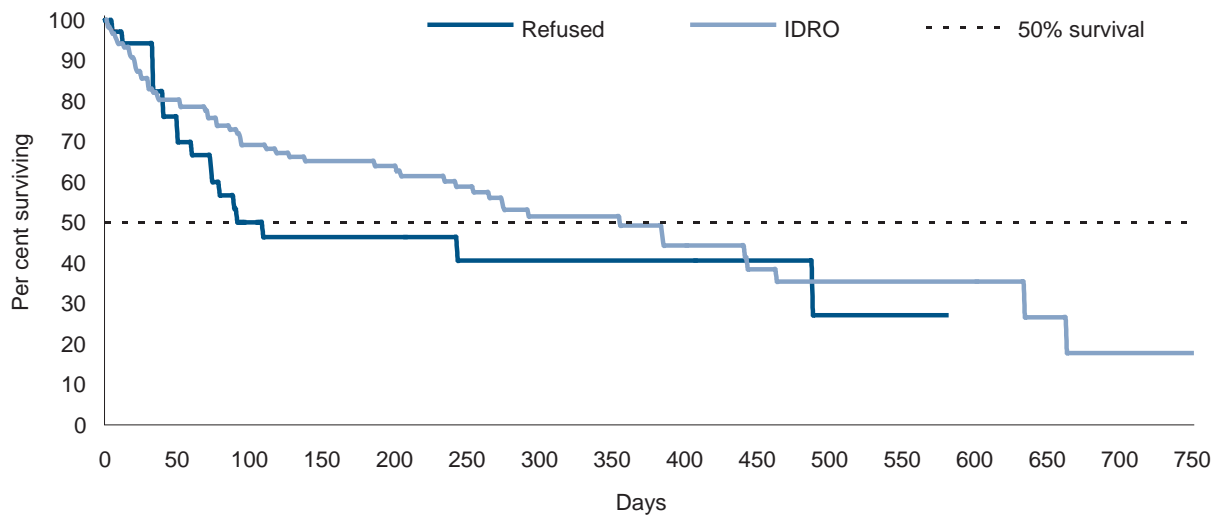
Although the survival curves appear to over-estimate the prevalence of re-offending, their values at any time point are drawn from a statistical calculation of the probability of re-offending. For example, the prevalence rates in Table 3.2 estimate the prevalence of re-offending for all IDRO participants at 42 per cent. However, the survival function estimates that after 650 days, more than 80 per cent of IDRO participants will have re-offended. At any time point, the survival function represents the estimated proportion of each group who will have survived. As we move further forward in time, the number of observable subjects decreases and our estimate becomes less reliable. Further discussion about the reliability of the survival estimates is provided later.

Tests of significance are used to determine whether the differences seen in Figure 3.1 are the result of real differences between the IDRO participants and the refusal group. The value of a statistical test (which varies between zero and one) tells us the probability that the observed differences are due to chance or error. The higher the test value (the closer it is to one), the greater the probability. Conventionally, the maximum probability level for determining a significant difference is set at $p=0.05$ (DeVaus 2002). In other words, we can only be confident that the differences observed are real differences, and that should the probability of error or chance be less than five per cent.

For the present survival analyses, two tests of significance are used – the Log-Rank Test of Equality and the Wilcoxon Statistic. Further information about the differences between these tests can be found elsewhere (Hosmer & Lemeshow 2003), but in brief, the Log-Rank test weights the survival data to the end of the survival curve while the Wilcoxon Statistic weights closer to the beginning. The Log-Rank test will, if significant at $p<0.05$, indicate that the differences in the final lifetime survival rate between the two groups are significant. Alternatively, the Wilcoxon statistic will indicate whether the initial survival experience between both groups is significantly different, despite the possibility that the final lifetime survival rate may not be. For the time to first offence data presented in Figure 3.1, both tests are insignificant, suggesting that we cannot confidently say that the survival experience of IDRO participants was better (or worse) than the refusal comparison group.

Similar survival analyses are presented in Figures 3.2 and 3.3 for both time to first property offence and time to first drug offence. In terms of property offending, similar results were indicated with no significant difference in the survival experience of IDRO participants and the refusal comparison group. For drug offending, however, there appears to be a significant short term effect, with fewer IDRO participants being re-arrested for a drug offence in the early stages of their participation on the drug court program (Wilcoxon $X^2=5.24$, $df=1$, $p=0.02$). Note that overall lifetime survival for IDRO participants is not significantly different (Log-Rank $X^2= 3.26$, $df=1$, $p=0.0629$), suggesting that the benefits of the drug court program in reducing drug related offending are short lived. This is indicated where the survival curves intersect at approximately 650 days.

Figure 3.1: Survival analysis for free days to first post-entry offence

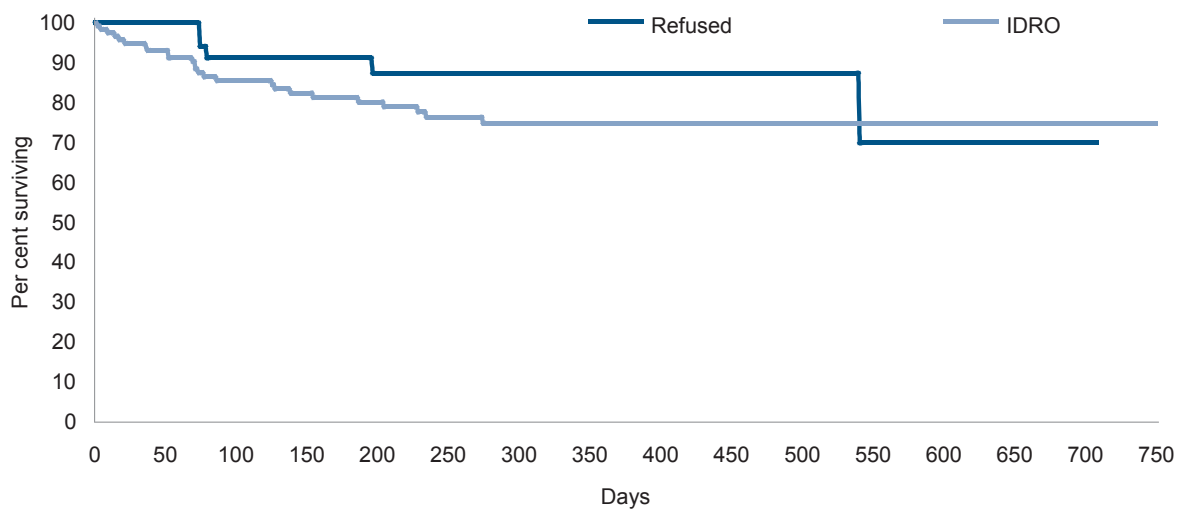


Log-rank Test of Equality: (chi=1.25, df=1, p=0.2635)

Wilcoxon Statistic: (chi=1.64, df=1, p=0.2001)

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Figure 3.2: Survival analysis for free days to first post-entry property offence

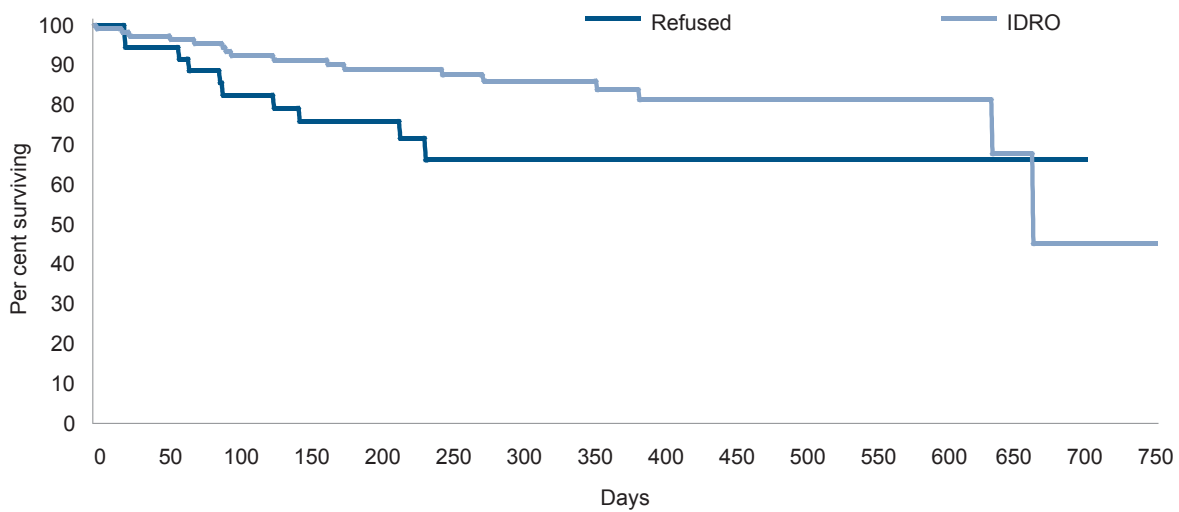


Log Rank Test of Equality: (chi=1.26, df=1, p=0.2625)

Wilcoxon Statistic: (chi=2.04, df=1, p=0.1531)

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Figure 3.3: Survival analysis for free days to first post-entry drug offence



Log Rank Test of Equality: (chi=3.26, df=1, p=0.0629)

Wilcoxon Statistic: (chi=5.24, df=1, p=0.0220)

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

So far we have examined the relative survival experience of all 120 IDRO participants placed onto the drug court program by 31 December 2004. These results have indicated that, overall, there is no discernable difference between those who participated (or were participating) and those who refused. While Blenko (2002) argues that drug court evaluations should look at the aggregate results for all program participants, it is also important to consider the relative survival experience of sub-groups of participants – namely comparisons between terminated and graduated participants. This is for a number of reasons, but most importantly both the South East Queensland and New South Wales Adult Drug Court evaluations illustrated a termination effect, where terminated participants performed less favourably than both the graduates and the comparison groups.

Analysing the comparative survival experience for graduates and terminates has received some criticism. The critics argue that the mere fact that graduates do better than terminates is self evident and does not indicate that the drug court program is effective. On the other hand, the drug court program was not designed to work for every offender, and the termination criteria are designed to remove participants whose drug use and criminal behaviour are not amenable to community based rehabilitation. The court clearly states that should a participant fail to meet the requirements of the drug court rehabilitation plan, they will be terminated and returned to prison. In this light, others argue that by aggregating the survival experience of all participants together, one might conclude that there was no program effect. However, these results are based on the combined survival experience for terminated participants for whom the drug court was never expected to succeed.

Despite these continuing debates, comparative analysis between graduates and terminates allows us to examine whether the drug court program is effective in reducing crime for those who are compliant. Recall that the bi-variate analysis (see Table 2.3) indicated very few differences between graduates and terminates on the demographic, drug use or criminal history variables. This indicates that at the time of referral there were few discernable factors which could reliably predict whether a participant would or would not be compliant. The comparative analysis helps us to quantify the impact of the program should a participant comply with the requirements of their IDRO.

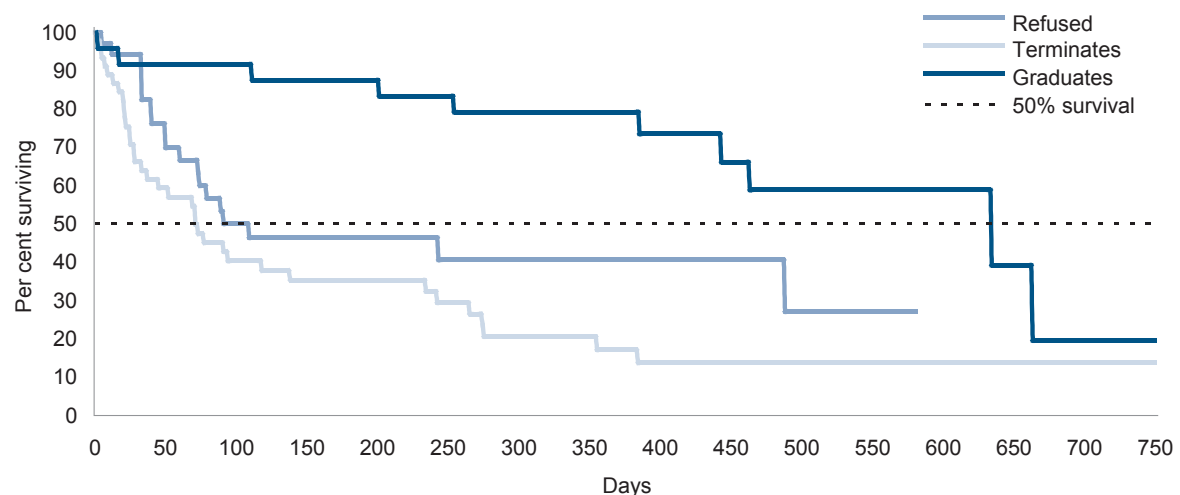
Figure 3.4 illustrates the comparative survival experience for the time to first offence (any offence). It demonstrates that graduates of the drug court program were not only less likely to have re-offended by 31 December 2004, but that they also took significantly longer to do so. By comparison group, the number of days taken for half of all offenders to re-offend (median lifetime) was:

- 634 days for graduates;
- 71 days for terminates; and
- 91 days for those who refused the drug court program.

Consistent with South East Queensland, terminated participants were more likely to re-offend, and re-offend sooner, than the graduates or the refusals (Makkai & Veraar 2003).

By offence type, the comparative survival functions illustrate that graduates of the North Queensland Drug Court program also took longer than terminates to commit their first property offence and drug offence. In terms of drug offending, the early survival experience of graduates is markedly better than both the terminated and refusal comparison groups, despite no significant difference in the long term survival probability (Log-Rank $X^2=4.57$, $df=2$, $p=0.1018$).

Figure 3.4: Survival analysis for free days to first post-entry offence

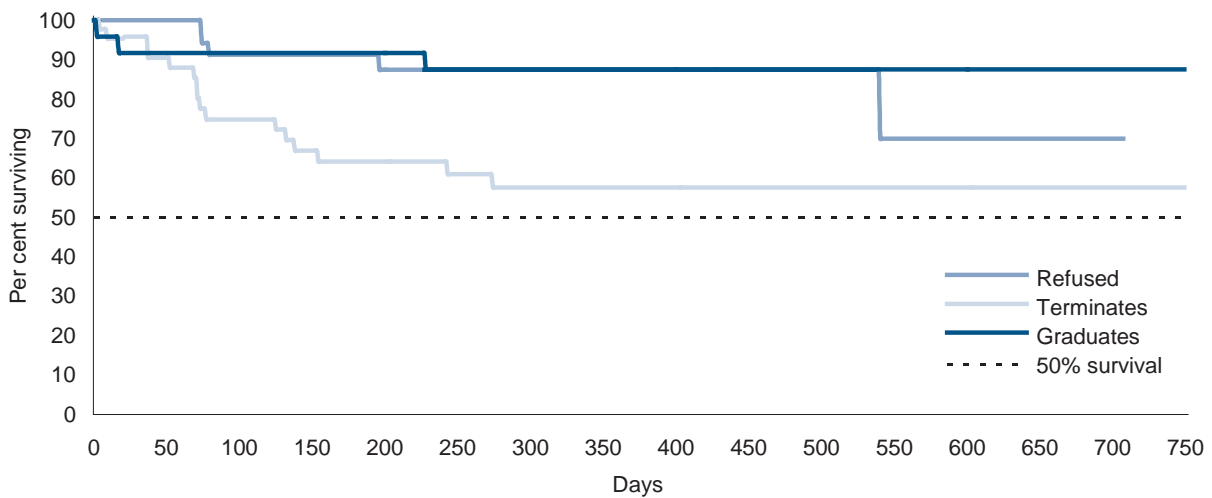


Log-rank Test of Equality: ($\chi^2=16.39$, $df=2$, $p=0.003$)

Wilcoxon Statistic: ($\chi^2=16.57$, $df=2$, $p=0.003$)

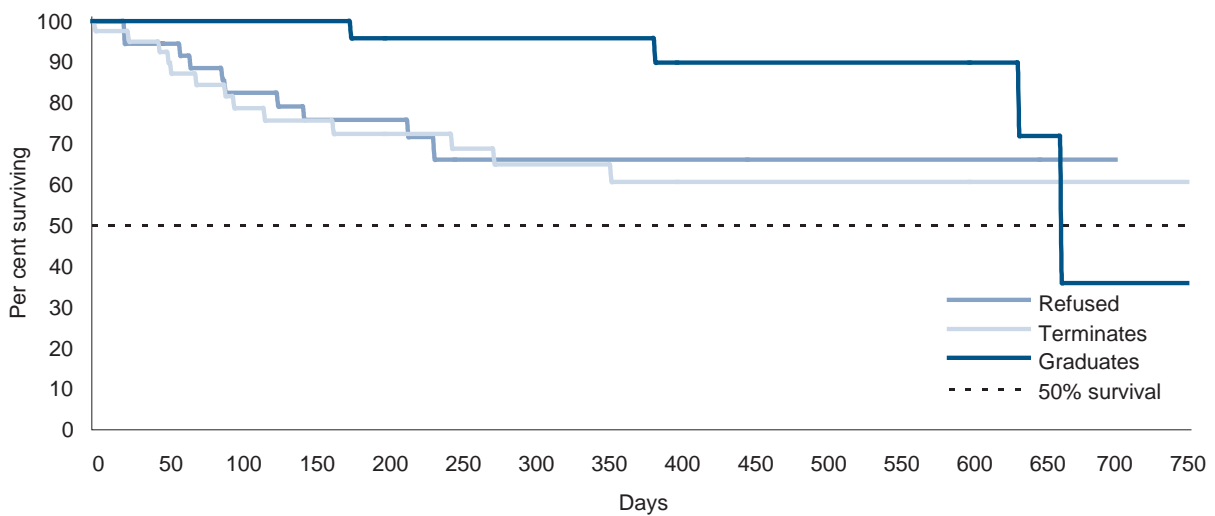
Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Figure 3.5: Survival analysis for free days to first post-entry property offence



Log-rank Test of Equality: (Chi= 16.39, df=2, p=0.003)
 Wilcoxon Statistic: (Chi= 16.57, df=2, p=0.003)
 Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Figure 3.6: Survival analysis for free days to first post-entry drug offence



Log-rank Test of Equality: (Chi= 16.39, df=2, p=0.003)
 Wilcoxon Statistic: (Chi= 16.57, df=2, p=0.003)
 Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Adjusting for covariates

The survival analysis presented thus far has assumed that the comparison groups are not biased in any way. That is, we assume that no other covariate factors have influenced the survival experience of each group, and that the actual differences in the survival functions are attributable to the offender’s participation or non-participation on the drug court program. It is easy to conceive, however, that drug court participation is not the *only* factor which may result in more favourable re-offending outcomes.

To examine this, we use a Cox Proportional Hazards Regression Model to predict whether any other offender characteristics are linked to a reduction in re-offending. More importantly, we use the regression

modelling techniques as a means to confirm that participation on the drug court program was *at least* one of these linking factors. For each of the survival functions presented in Figures 3.1 to 3.6, we posit a Cox Proportional Hazards Model with the following predictor variables:

- age at referral to the drug court (a continuous variable centred at the mean age of 29 years);
- gender (where 1 is male and 0 is female);
- court location (where 1 is Cairns and 0 is Townsville);
- prior imprisonment (where 1 is prior imprisonment and 0 is no prior imprisonment);
- prior offences (a continuous variable centred at the mean number of 40 prior offences);
- referring offences (a continuous variable centred at the mean number of 14 referring offences); and
- refusal (where 1 is for the refusal group and 0 is the IDRO group).

The regression results indicate that for the time to first offence (any offence):

- IDRO participants as a combined group were no more or less likely to re-offend than the refusal comparison group;
- by sub-group, graduates, was less likely to re-offend than terminates and refusals. Terminated participants were four times more likely to re-offend than graduates; and
- the only other predictor of an increased likelihood to re-offend (any offence) was the age of referral, with younger offenders being at greater risk.

In terms of property offending:

- there was no discernable difference between all IDRO participants and the refusal comparison group;
- by sub group, there was no difference in the survival experience between graduates and refusals, but terminated participants were four times more likely to re-offend with a property offence; and
- the only other predictor of re-offending was the number of prior lifetime offences, with the risk of re-offending increasing for offenders with a greater number of prior offences.

In terms of drug offending:

- there was no discernable difference between all IDRO participants and the refusal comparison group;
- by sub group, graduates were less likely to commit a post-entry drug offence than were terminates and refusals. Terminated participants and the refusal comparison group were four times more likely to re-offend than were graduates; and
- a number of other factors emerged as being linked to re-offending. The risk of re-offending was decreased for females, but increased for younger offenders with a history of prior imprisonment.

Time to first offence (post-exit)

The follow-up period used in this report so far has been measured from the date of IDRO commencement to 31 December 2004. This means that our measurement of re-offending has included any offence episode

which occurred during the time in which a participant was actively engaged with the drug court program. While it is expected that re-offending will be reduced during this time, it is also expected that the drug court program will deliver cumulative benefits to its participant population. In other words, the impact of the drug court in reducing re-offending is maximised at the time of successful graduation – some 300 days after program placement.

Table 3.3 illustrates the average number of days each comparison group was observable after the completion their IDRO, as well as the prison and free days calculations. Note that all time estimates for the refusal comparison group remain the same as the post-entry estimates used earlier. This is because the refusal comparison group did not enter a program. For graduates, the average number of free days was 173, while for the terminated participants it was 157.

Table 3.3: Post-exit follow-up times by comparison groups as at 31 December 2004				
	Refused (n=36)	Graduated (n=24)	Terminated (n=45)	All participants[~] (n=69)
Post-exit (mean days)				
Days since program exit (a)	352	174	279	243
Prison days since program exit (b)	40	1	122	34
Free days since program exit (a-b)	312	173	157	163

[~]Sample includes offenders having terminated or graduated (n=69).

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Table 3.4 illustrates the post-exit re-offending estimates for each of the comparison groups in this study. Twenty-nine per cent of the graduated participants had re-offended since leaving the program until 31 December 2004. The majority of these offence episodes (13%) were for drug offences. Of the terminated participants who spent at least one free day in the community, 34 per cent had recorded a fresh offence episode since terminating from their IDRO. The majority of these offence episodes were for a property offence (19%).

Survival analyses were similarly conducted for the post-exit re-offending measures. The results indicated no significant difference between the 69 IDRO participants who had exited the program and the refusal comparison group, but similar beneficial outcomes for graduates.

Table 3.4: Post-exit re-offending as at 31 December 2004 (per cent)				
	Refused (n=36)	Graduated (n=24)	Terminated (n=32)	All IDRO participants[~] (n=69)
Post-exit				
Any offence episode	53	29	34	30
Property offence episode	11	4	19	10
Violent offence episode	0	0	3	1
Drug offence episode	28	13	3	7
Breach offence episode	42	21	25	23
Any offence episode (excluding breach only)	39	17	31	20

[~]Sample includes offenders having terminated or graduated (n=69).

*Statistically significant at p<0.05 between refused, graduated and terminated.

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Offending frequency

The second measure of re-offending used in this evaluation is offending frequency, which is measured as the number of offending episodes recorded per 365 free days. In doing so, the total number of offence episodes recorded for each offender is divided by the number of free days in which they were available to re-offend. The result is a re-offending rate per one free day. Multiplied by 365 yields the estimated number of offence episodes recorded for that offender over 365 free days. Table 3.5 illustrates the pre-entry offending rates for each of the comparison groups. For all 120 IDRO participants, the average number of offence episodes per 365 free days prior to their program entry was 5.1. This compares with an average of 5.9 offending episodes for the refusal comparison group, a difference which was not statistically significant. In addition, the pre-entry offending episode rates are also provided for both the graduates (4.8) and terminates (6.6) of the drug court program. The results indicate that prior to program placement, graduates committed fewer offences on average, but this difference was not statistically significant. All in all, there was not a discernable difference in the pre-entry offending rates between graduates, terminates, and those who refused the program.

A similar calculation is used to estimate the post-entry and post-exit re-offending rates. Standardised to 365 free days, this calculation allows us to compare the relative improvement in re-offending as a result of the drug court program. Of all 120 IDRO participants, the re-offending rate per 365 free days drops from 5.1 pre-entry to 1.8 post-entry. For each of the comparison groups, the reductions were:

- graduates – from 4.8 pre-entry to 0.6 post-entry;
- terminates – from 6.6 pre-entry to 4.1 post-entry; and
- refusals – from 5.9 pre-entry to 1.6 post-entry.

Table 3.5: Offending episodes per 365 free days

	(n)	Pre-entry (for previous 24 months)	Post-entry	Post-exit ^A
All IDRO Participants	(120)	5.1	1.8	n/a
Graduated	(24)	4.8	0.6	0.4
Terminated	(45)	6.6	4.1	3.3
Refusal Comparison	(36)	5.9	1.6	1.6

^APost-exit estimates are calculated only for offenders who had spent at least one free day in the community post-exit from the IDRO program.

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

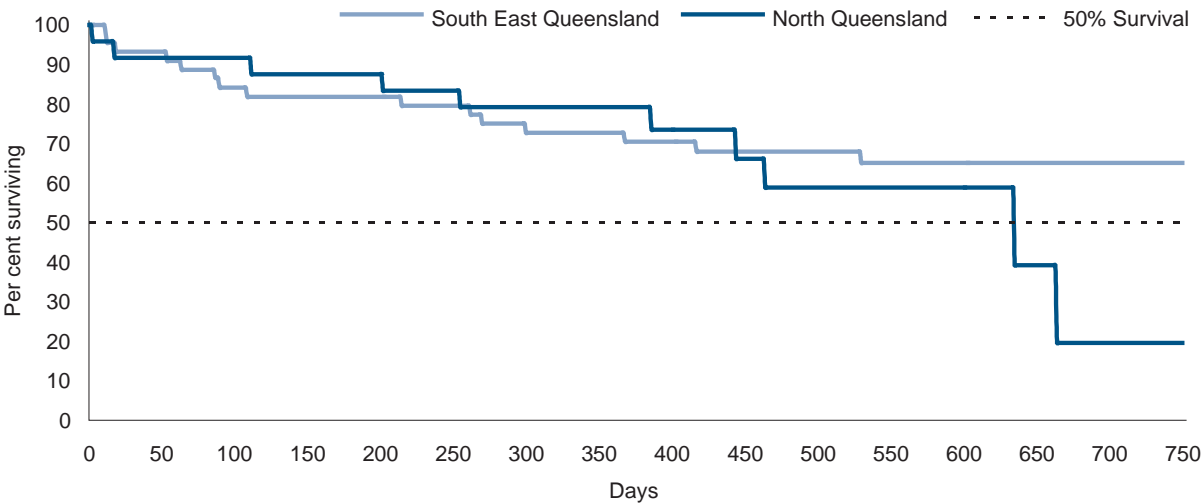
Comparative analysis

So far in this report we have included several sections to examine the differences and similarities between the North Queensland and South East Queensland drug courts. These comparisons were made using the final evaluation data from the South East Queensland evaluation (as at 31 December 2002) and the current evaluation data for North Queensland. In this section, we examine the re-offending outcomes using survival analysis to compare the survival experience of comparable offenders in each region.

In terms of re-offending, Figure 3.7 illustrates the survival experience of graduates from both the North and South East Queensland courts. It indicates that up to about 650 days, graduates of the North Queensland Drug Court program had equal probability of re-offending as did the graduates from the South East. From 650 days onwards, graduates in North Queensland experienced a marked drop in their survival rate. This result should be considered with caution, as only three graduates in North Queensland remained under observation beyond this time. The fewer the number of subjects under observation, the less confidence

we can have that the results displayed are not the result of error or chance. The tests of significance illustrate that there is no significant difference between graduates of the North Queensland Drug Court program and graduates in the South East.

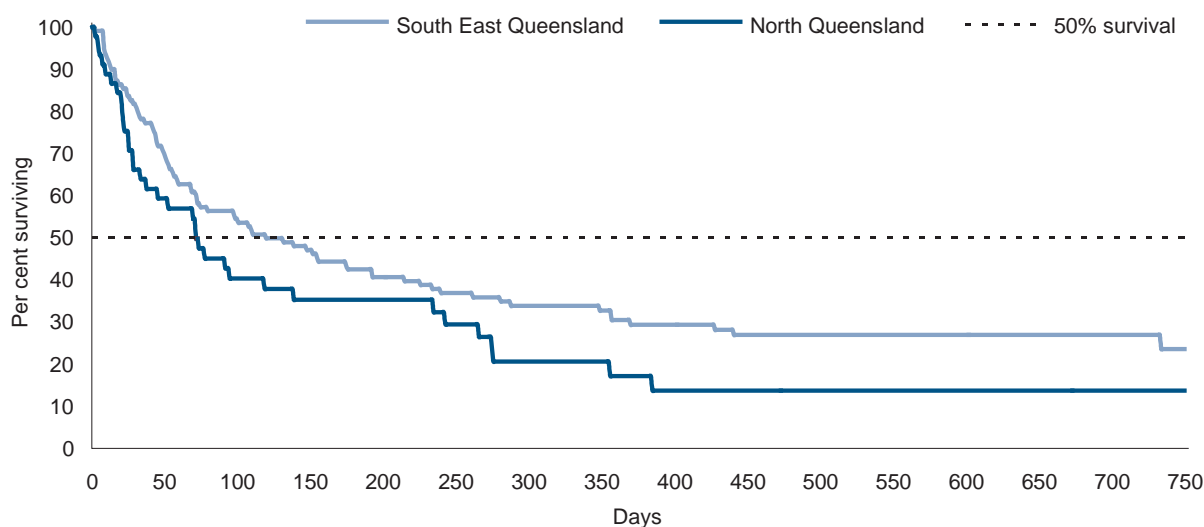
Figure 3.7: Survival analysis for free days to first post-entry offence (any offence), by region (graduates)



Log-rank Test of Equality: (chi=0.70, df=1, p=0.4022)
 Wilcoxon Statistic: (chi=0.01, df=1, p=0.9244)
 Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Figure 3.8 plots the survival functions for terminates of the North and South East drug court programs. The results indicate that at all time periods, participants terminated from the North Queensland Drug Court program experienced less favourable survival rates. Both the Log-rank and Wilcoxon tests of equality suggest that despite the observed differences between the two regions, we cannot be confident that these differences are not the result of error or chance. As such, we must conclude that the relative survival experience of terminated participants in North Queensland is equal to that of the terminated participants in South East Queensland.

Figure 3.8: Survival analysis for free days to first post-entry offence (any offence), by region (terminates)



Log-rank Test of Equality: (chi=2.89, df=1, p=0.089)

Wilcoxon Statistic: (chi=2.65, df=1, p=0.1039)

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Finally, Table 3.6 provides the comparative pre- and post-entry re-offending rates for both graduates and terminates of the North and South East Queensland drug courts. Of particular note is the obvious disparity between the courts on the average number of offence episodes recorded prior to program entry. In the North, graduates recorded an average of 4.8 offence episodes per 365 free days, while graduates in the South East recorded an average of 3.6 offence episodes. Similarly, terminated participants in the North Queensland pilot program recorded an average of 6.6 offending episodes prior to program entry, compared with 4.4 episodes for terminated participants in the South East.

In terms of post-entry offending, graduates in the North recorded a similar episode rate per 365 free days to their counterparts in South East Queensland (0.6 episodes compared to 0.5 episodes). For the terminates, the post-entry re-offending rates remained higher in North Queensland (4.1 episodes compared with 1.9 episodes). The final two rows in Table 3.6 illustrate the relative change in re-offending from pre- to post-entry. It illustrates a number of important findings:

- while graduates in North Queensland appeared to be offending more regularly prior to their IDRO, they experience a greater decline in re-offending rates (-4.2) than their counterparts in South East Queensland; (-3.1); and
- despite higher pre- and post-entry offending rates for terminated participants in North Queensland, the relative decline in re-offending (-2.5) was the same between the regions.

Table 3.6: Offending episodes per 365 free days, by region

	North Queensland	South East Queensland
Pre-entry (a)		
Graduated	4.8	3.6
Terminated	6.6	4.4
Post entry (b)		
Graduated	0.6	0.5
Terminated	4.1	1.9
Difference (b-a)		
Graduated	-4.2	-3.1
Terminated	-2.5	-2.5

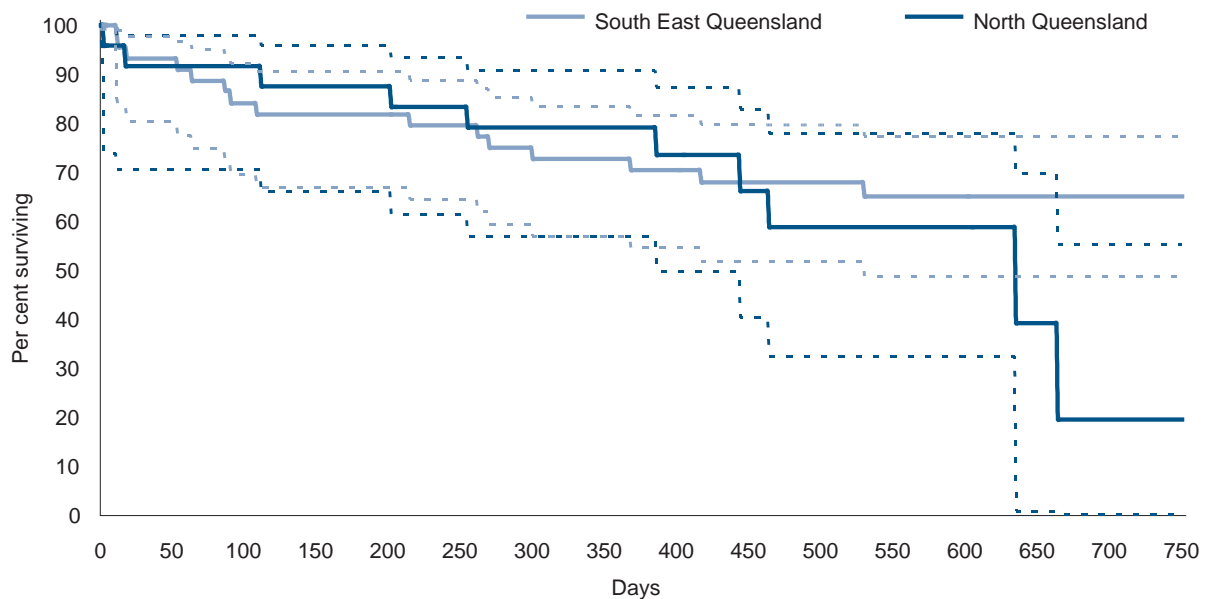
Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Issues and limitations

This discussion of the North Queensland Drug Court's capacity to effectively reduce re-offending is not complete without an examination of its limitations. First and foremost, this evaluation has relied on estimates from statistical applications derived from particularly small sample sizes. Many of the comparison groups used in this analysis consisted of fewer than 50 subjects. When measured over long intervals of time, this significantly impedes our capacity to draw substantive statistical conclusions. In survival analysis, the primary statistical technique used in this report, the probability of re-offending is calculated as the number of subjects who re-offended at any one time, proportional to the number of subjects who were observed at that time. For example, suppose that at 500 days post-entry only three graduates were observable and that one of these graduates re-offends on that day. In survival analysis, the risk of re-offending experienced by any graduate on the 500th day is estimated at 33 per cent. Compare that with risk of re-offending attributable to any one offender in a time period when one of 10 observed graduates had re-offended (equalling a 10 per cent risk of re-offending). Clearly, as the number of subjects declines the relative weighting applied to one episode of re-offending increases, but our confidence in the estimate decreases.

To illustrate this important point we provide the comparative post-entry survival functions for the North and South East Queensland graduates. This time, however, we also illustrate the computed confidence intervals for the North and South East Queensland graduates. A confidence interval can be calculated for any statistical estimation and represents the upper and lower limits of the estimate, for which we can be 95 per cent confident that the true value falls. As the number of subjects under observation declines, the distance between the upper and lower confidence intervals increases. Moreover, at times when the confidence intervals of two survival functions overlap, we cannot conclude with confidence that they are different. Note in Figure 3.9 that despite the apparent drop in the survival function for North Queensland graduates beyond 650 days, the confidence intervals between the North and South continue to overlap. This leads us to conclude that there is no significant difference in graduate re-offending between the regions. This issue of sample size presents the same types of issues for all analysis presented in this report.

Figure 3.9: Survival analysis for free days to first post-entry offence, by region (graduates)



Log-rank Test of Equality: (chi=0.70, df=1, p=0.4022)

Wilcoxon Statistic: (chi=0.01, df=1, p=0.9244)

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

Furthermore, the pre-entry offence rates between the North and South East Queensland drug courts appeared to be disparate. The inference was that participants in North Queensland were more active offenders (recording a greater number of offending episodes) than their counterparts in the South East. Given that the method of calculation was consistent in both cases, the possibility that drug court participants in the North were more active offenders prior to their referral presents some important implications for this evaluation. Should the average participant offending profile have been worse in North Queensland, we can only expect similar, if not less favourable, program outcomes when compared with those derived in the South. The fact that the North Queensland Drug Court program has delivered greater post-entry reductions in offending for graduates and the same level of reduction for terminates suggests that despite higher pre-entry prevalence rates, the North Queensland program is maintaining similar levels of effect as those illustrated in the South.

The reasons participants in the North appear to be more prolific offenders is not completely understood, although two possibilities have been suggested. First, that the probability of arrest, particularly for drug related offences, is higher in a small regional city than in a large capital city. Drug markets are less dispersed and often centrally located in areas well known to the police. Moreover, an individual's criminal activity may be more amenable to detection within a small population, and where crime is more concentrated. In any case, should offenders in North Queensland face a greater probability of detection, any measurement that examines police records of crime is subject to this bias – a bias that may artificially distort our re-offending estimations. In other words, it may not be that graduates of the North Queensland Drug Court are more likely to re-offend, but that graduates in the South East are less likely to be apprehended.

The second possible explanation is that, as a by-product of the eligibility criteria, many participants referred to the North Queensland Drug Court had not previously been in prison, or if they had, the average time already served was below six months. Moreover, the eligibility criteria stated that in order for a referred offender to be eligible for the drug court program they must be facing a term of imprisonment. Placing these criteria side by side suggests that successful referrals in North Queensland may have needed to be more serious offenders in the 12 months prior to their referral to warrant the application of imprisonment.

To illustrate, we use the example of two offenders, A and B. Offender A has spent more than one year in prison prior to their referral while Offender B has not been in prison before. To justify a term of imprisonment, Offender A needs only to commit a small number of fresh offences, while Offender B will need to demonstrate a significant and problematic offending profile consisting of multiple offences or offences of greater seriousness. It is possible that by granting access only to those offenders with less than 12 months prior imprisonment, the North Queensland Drug Court program has inadvertently increased the number of more prolific offenders being placed onto the program. If this is the case, the drug court program in North Queensland may have needed to do more to achieve the same results as demonstrated in the South East.

Finally, re-offending must be considered in relation to other program factors having the potential to result in re-offending. Throughout this report, a number of sections have been dedicated to program implementation and operational issues which should be considered when interpreting the recidivism results presented here. For instance, drug court team members highlighted a number of issues having the possibility of increasing re-offending. For example:

- limited after-hours residential treatment supervision;
- treatment centres and non-residential treatment programs being offered in and around local drug market activity; and
- limited emergency accommodation.

While it is not possible to determine from this evaluation whether any of these factors can be empirically attributed to re-offending, the possibility needs to be considered when interpreting the recidivism results for any program. Some factors amenable to further policy and program development might help to explain higher re-offending prevalence rates and shorter time to re-offending.

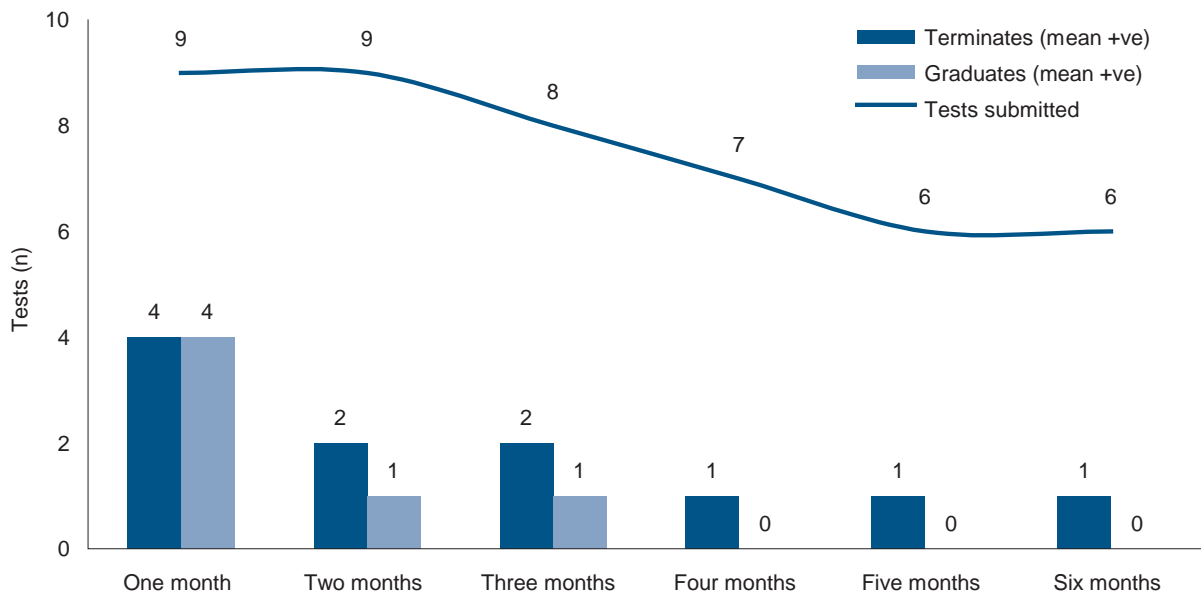
3.2 Reducing drug use

The second objective of the North Queensland Drug Court pilot program was to reduce the levels of drug use within the community. It was noted in chapter two that the number of positive drug tests submitted by participants declines in each phase. As such, this general result indicates a significant reduction in the level of drug use amongst those participants who progress through each consecutive phase. Not surprisingly, those participants who progress to final graduation submit fewer positive drug tests than those who are subsequently terminated.

Figure 3.10 illustrates both the average test positive rate and the average number of positive drug tests submitted for drug court graduates and terminations in the first six months of participation. The results indicate that for participants who graduate from the drug court program, the average number of positive drug tests declines from four in the first month to zero after four months of participation. Despite being terminated from the drug court program (presumably for non-compliance) Figure 3.10 also illustrates that the average number of positive tests submitted by terminated participants also declined (from four in the first month to one on the fourth, fifth and sixth months).

It should be noted that no information on drug use is collected for participants after termination or graduation. Therefore, it is difficult to ascertain whether these reductions in drug use are sustained after a participant leaves the program. In any case, these results indicate a decline in the average number of positive drug tests for both graduates and terminations and suggest that, at least for the duration of participation, the average levels of drug use decrease for all drug court participants.

Figure 3.10: Monthly positive drug tests, by IDRO status



Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

3.3 Improving participant health and social function

The North Queensland Drug Court pilot program was established with the aim of improving the health and social functioning of its participants. In an effort to measure health outcomes, North Queensland Drug Court participants are required to complete the 36 question Short Form Health Survey (SF-36) at the time of referral, and at each phase graduation. The survey consists of 36 questions which are scaled to population norms and collapsed into eight specified areas of general health. These are:

- physical functioning – assessing limitations in physical activity because of health problems;
- role physical – assessing limitations in usual role activities (e.g. employment) because of health problems;
- body pain – assessing the presence of pain and limitations due to pain;
- general health – assessing the self evaluation of personal health;
- vitality – assessing levels of energy or fatigue;
- social function – assessing limitations in social activities because of physical or emotional problems;
- role emotional – assessing limitation in usual role activities (e.g. employment) because of emotional problems; and
- mental health – assessing psychological distress and wellbeing.

Table 3.7 indicates the number of SF-36 surveys that were administered in North Queensland at 31 December 2004. In total, there were 286 surveys completed – the majority of which were administered to referred participants during the preliminary assessment phase. In addition, nine participants had undertaken the SF-36 in phase one, 28 participants in phase two and 19 participants in phase three.

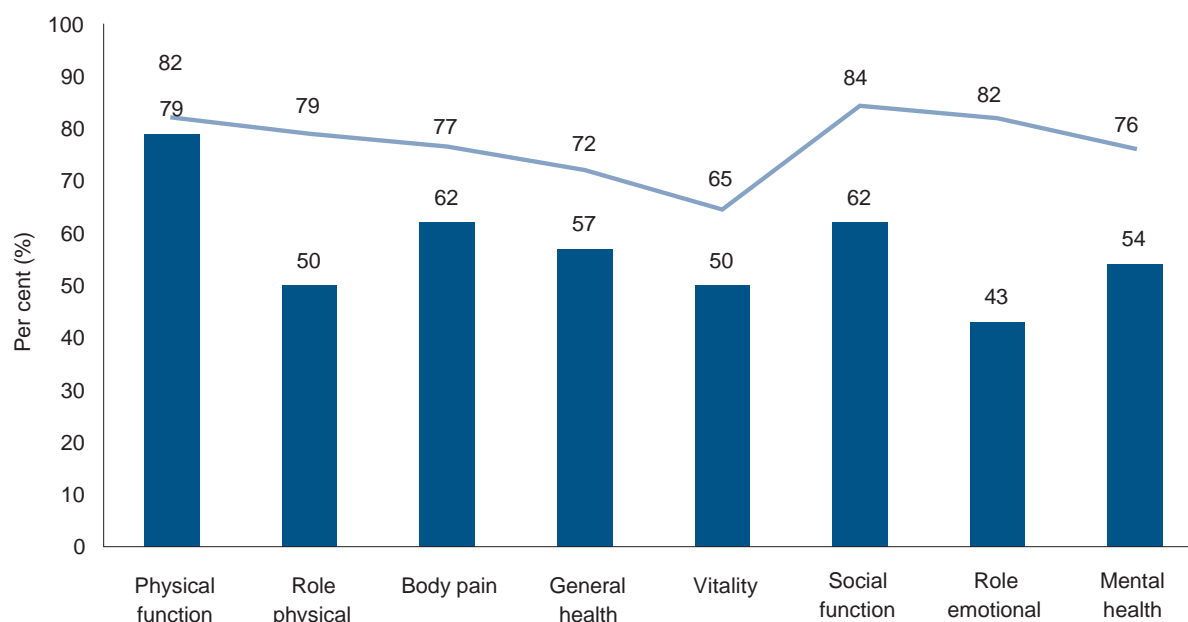
Table 3.7: SF-36 administration episodes and participant numbers (n)

	Episodes	Participants/offenders
SF36 administration		
Preliminary Assessment	217	211
Phase 1	11	9
Phase 2	32	28
Phase 3	26	19
(Total)	286	178

Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

The individual responses to the SF-36 are collapsed and transformed according to population weightings determined by the Australian Bureau of Statistics in their National Health Survey in 1995 (ABS 1995). This transformation was conducted using the SF-36 programming command developed for the statistical software package Stata (Ryan 1999). This transformation allows us to compare the general health profile of the drug court participants with the general Queensland population (see Figure 3.11). Across all eight items, participants referred to the North Queensland Drug Court program reported lower scores than the Queensland population averages. These differences ranged between three (physical functioning) and 39 (role emotional). Compared with the Queensland population averages, it appears that drug court referrals were much more likely to report that their physical and emotional health was causing problems with their work and other daily activities. They were also more likely to report issues of psychological distress.

Figure 3.11: Comparative SF-36 transformed scale statistics at preliminary assessment and Queensland population averages



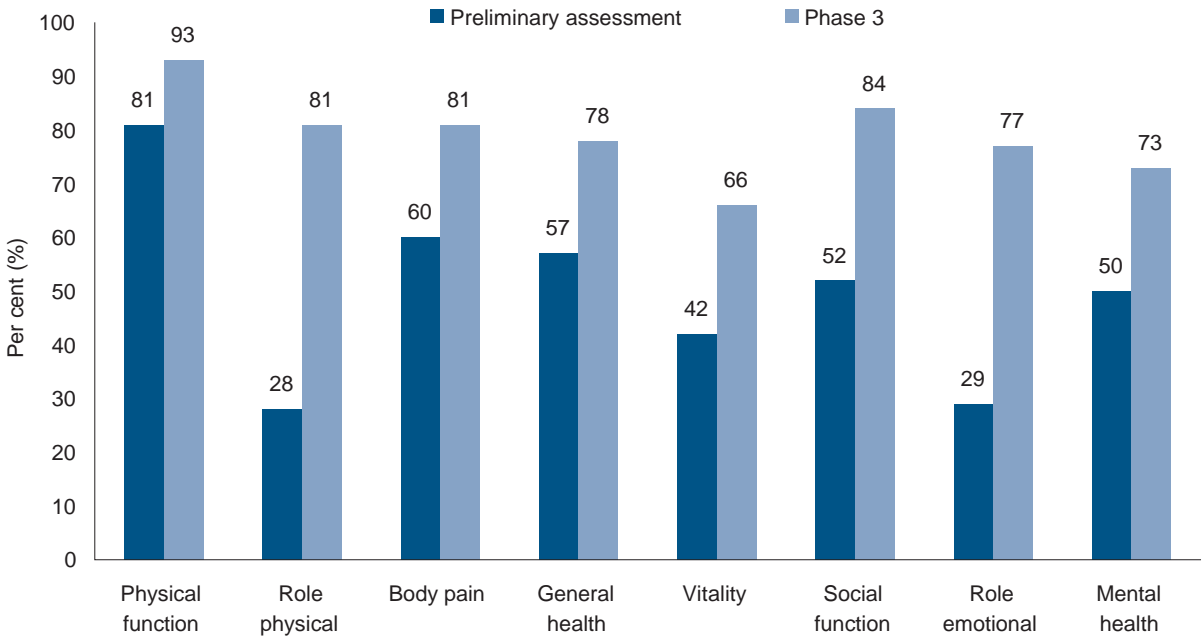
Source: Australian Institute of Criminology, North Queensland Drug Court Database [Computer File]; National Health Survey (ABS 1995)

The important question for this evaluation is whether the general health of drug court participants improves as a result of their participation. To answer this, we compare the SF-36 results for a group of 16 graduates in North Queensland at two time intervals – the preliminary assessment phase and phase three, just prior to final graduation. Note that not all 24 North Queensland Drug Court graduates are included in this analysis. This is because the remaining eight graduates did not have either a preliminary assessment result or a phase three result for the SF-36 survey.

Overall, the results indicate improvements across all eight general health areas, with the greatest improvement noted for the role physical and role emotional scales. These scales measure how an individual perceives their physical and emotional health as impacting upon their general daily activities. An improvement illustrates the drug court’s capacity to prepare participants for community re-integration – a core goal of phase three. Moreover, the phase three SF-36 results reported by these graduates are equivalent to the Queensland population averages (ABS 1995).

It is not possible to examine whether the drug court program in North Queensland also delivers improvements in the general health and wellbeing of terminated participants. This is because the administration of the SF-36 is undertaken commensurate with each phase progression, and the vast majority of terminated participants did not progress beyond phase one. The results thus far present a compelling argument that upon entry into the North Queensland Drug Court program, participants’ general health is significantly lower than for the Queensland population as a whole. Moreover, the general health of those participants who completed the program was vastly improved by the time of final graduation.

Figure 3.12: Comparative SF-36 transformed scale statistics for North Queensland Drug Court graduates



Source: Australian Institute of Criminology, North Queensland Drug Court Database [computer file]

3.4 Post graduation issues

Throughout the process of this evaluation, it was possible to interview six graduates of the North Queensland Drug Court. At the time of these interviews, half (n=3) had only recently graduated while the remaining three graduates had spent up to 12 months in the community. All graduates were overwhelmingly satisfied with the drug court program, most reporting their overall drug court experience positive and worthwhile. The graduation experience was also highlighted as being an important component of the program. One North Queensland Drug Court graduate stated that:

‘I had never really achieved anything in my life until now. My graduation [from the drug court program] gave me something to be extremely proud of.’
 – Female, graduated.

While the majority of participants reported a heightened sense of achievement at the time of graduation, some participants also reported being nervous and unsure about their life after graduation. In these cases, participants appeared concerned about how well they would cope without the daily support of the drug court program. This indicates that some participants may become highly reliant on the support and assistance of the drug court team. Some participants reported that graduation marked a difficult transition to a period of 'dealing with life by myself' and were concerned about their ability to manage themselves without the support of the drug court team. Some examples included:

'I was a little scared [to graduate]. Being told that you are graduating means that you have to deal with things on your own. There are huge expectations that [drug court graduates] will be able to cope in the real world without the help of the team. I was worried that I might not be able to – I guess I just wasn't confident in myself.'

– Female, graduated.

'I was frightened to graduate – I didn't know what I was going to do with all my spare time. I was always so busy [with the drug court], but I knew that would end when I graduated.'

– Male, graduated.

Despite some graduates' concerns about their ability to cope after graduation, all interviewees reported feeling comfortable to approach DCS or ATDOS should any post-graduation issues arise. This is a significant finding, as it demonstrates that drug court graduates develop good support networks that they can rely on, should their personal situation deteriorate.

This evaluation has so far noted significant improvements in the health of participants by using the quantitative data collected in the SF-36 health survey. These conclusions are supported through the qualitative interviews, with all graduates reporting major improvements in their mental and physical health. Graduates also reported improvements in their family and personal relationships as a result of their participation on the program. Some examples include:

'Before the program my son was scared and cagey around me. I was always on drugs and I don't think he knew what I was doing. Since I stopped using drugs, my relationship with my son has really improved. I spend much more time with my son than I ever did when I was using drugs.'

– Male, graduated.

'My eldest son is now going to school – when I was on drugs I didn't really think much about my kids.'

– Female, graduated.

'[The drug court] gave me so much more confidence. I don't think my kids actually respected me when I was on drugs, but now they do. I think they can see that I am a different, more confident person. They make me feel proud to have done this – that makes me very happy.'

– Female, graduated.

'I lost a lot of friends and family when I started using drugs. I am slowly getting them back.'

– Male, graduated.

The benefits of the drug court program in improving personal and family relationships are not universal. The experience of one graduate highlights the continuing personal issues faced by graduates beyond program completion:

'The relationship with my kids is much better, but not with my partner. He still uses drugs and thought that the drug court program was a waste of time for me. I am trying to kick him out, but he won't go.'

– Female, graduated.

A number of the long term graduates (those whose interview was conducted some time after their graduation) had re-offended or used drugs since their graduation. At the time of interview, two of these graduates were facing fresh criminal charges. When asked to explain why they had engaged in further offending the responses, while varied, illustrated a common theme – that the use of drugs and subsequent criminal offending was an unwelcome reaction to increasing levels of stress and pressure in their personal lives. All graduates reported significant personal disappointment in what they termed their failure of the drug court program. Despite having graduated, interviewees saw post-graduation drug use and offending as their inability to maintain the standards and expectations of the drug court program for the long term. While this demonstrates that the drug court was successful in teaching graduates the ideals of drug abstinence, the flipside is that with these expectations comes the pressure to succeed, which, as one graduate stated, was one of the causes for their continued use of drugs and subsequent offending. For example:

[When I started to re-use] I felt so disappointed in myself. I could see myself slipping back to my old habits, but I was so embarrassed that I didn't know what to do. I felt that I had let the [drug court team] down and I think I continued to re-use drugs because I felt so bad.'

– Female, graduated.

Finally, graduates were asked whether the drug court program might have done anything else to help them after their graduation. All graduates reported that the drug court program was a positive and worthwhile experience. Nonetheless, a number of graduates stated that since becoming drug-free several other personal and psychological issues had surfaced that were difficult to manage in the community and without the support of the drug court team. These issues highlight some of the very important underlying reasons drug-dependent persons use drugs, and that drug-use may not be the only factor contributing to offending. If drugs are used to mask other personal or psychological issues, these issues will also need to be addressed by the drug court program. This relies primarily on the drug court team's capacity to identify and assist participants in dealing with these factors, as well as the participant's honesty and willingness to disclose other information related to their personal circumstances.

In all, the interviews with graduated participants provided an opportunity to understand some of the important social and personal factors that have an impact on the life (and long term success) of a participant after graduation. While most graduates reported significant improvements in family and personal relationships as a result of their drug court participation, changes to these relationships after graduation can exert additional pressure, resulting in a return to drug use.

This information is based on the self-reported experience of only six graduates in North Queensland, and further research is needed to isolate and understand these post-graduation issues so that strategies can be developed to help overcome them.

3.5 Discussion

This section has examined the North Queensland Drug Court pilot program's achievements in reducing offending and drug use, and improving the health and social function of its participants. It commences with a word of caution – at the time of this evaluation the North Queensland Drug Court pilot program had accepted only 120 participants, of whom only 24 had successfully completed the program and graduated. The relatively small number of participants at this stage limits our capacity to draw substantive conclusions based on statistical analyses. These limitations must be first and foremost in our interpretation of the results in this section. In terms of re-offending, it is with some caution that this evaluation finds that:

- there was no significant difference in re-offending (any offence and any property offence) between the North Queensland Drug Court participants and the comparison group;

-
- drug court participants took significantly longer to commit a drug offence, although the lifetime probability was not significantly different from the comparison group;
 - graduates were significantly less likely to re-offend than those who were terminated;
 - of those graduates who did re-offend, the time taken to re-offend was significantly longer than for the terminates; and
 - the frequency of offending was reduced for both graduates and terminates – although the reduction in offending was greatest for the graduates.

Comparative analysis was used to examine differences in re-offending between the North and South East Queensland Drug Court pilot programs. These analyses suggest that:

- prior to referral and admission, participants in North Queensland were, on average, arrested at a higher frequency;
- the post-entry re-offending estimates for graduates were similar in North and South East Queensland;
- the post-entry re-offending estimates for terminated participants were also similar in North and South East Queensland; and
- despite differences in the pre-referral arrest frequency, the post-entry offence frequencies were improved in both the North and South East Queensland and graduates in North Queensland demonstrated a greater overall reduction in offending frequency.

In terms of drug use and health outcomes, this evaluation finds evidence that:

- both graduates and terminates reduced the level of their drug use for the duration of their participation, as indicated by the declining number of positive drug tests; and
- graduates of the drug court program report significant improvements across the range of physical and mental health measures of the SF-36 Health Survey.

Interviews with drug court graduates highlight that:

- the drug court program was reported as a unique and worthwhile opportunity for dealing with drug use and offending;
- post-graduation offending and drug use appears linked to changes in personal and family relationships;
- drug re-use was often reported as a mechanism for dealing with stressful situations; and
- other areas, such as psychological and mental health issues, may also be linked to post-graduation re-offending.

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