



Administrative Office of the Courts

Arkansas' Drug Court

**A Description and Evaluation of the
6th Judicial District S.T.E.P. (Supervised
Treatment and Education Program)
Court: A Diversion-Treatment Program
for Substance Abusers**

Principal Evaluators

A.J. Zolten, Ph.D.

R. Kevin Rowell, Ph.D.

Editor

James D. Gingerich

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Foreward

The Sixth Judicial District S.T.E.P. (Supervised Treatment and Education Program) Court, located in Little Rock, Pulaski County, Arkansas, became fully operational in June, 1994 after almost two years of planning. The court is a pre-trial diversion/treatment program for non-violent, drug-addicted adult offenders. It represents a unique collaboration between Arkansas' justice, treatment and public health communities.

The first chapters of this publication provide a general overview and description of the development and current policies and procedures of the S.T.E.P. Court. They were prepared by the editor with the assistance of Mr. Roger Fitzgibbons, a law student at the University of Arkansas at Little Rock. Assistance was also provided by the Honorable Jack L. Lessenberry, former S.T.E.P. Court Judge, Mr. Terrell Rose, S.T.E.P. Project Director, and Mr. Tezell Portis, former S.T.E.P. Treatment Director. The evaluation section was authored by Dr. A.J. Zolten and Dr. R. Kevin Rowell of the Department of Psychology and Counseling at the University of Central Arkansas, who conducted the initial evaluation of the program with the support of a grant from the State Justice Institute.

J.D. Gingerich, Editor
March, 1996

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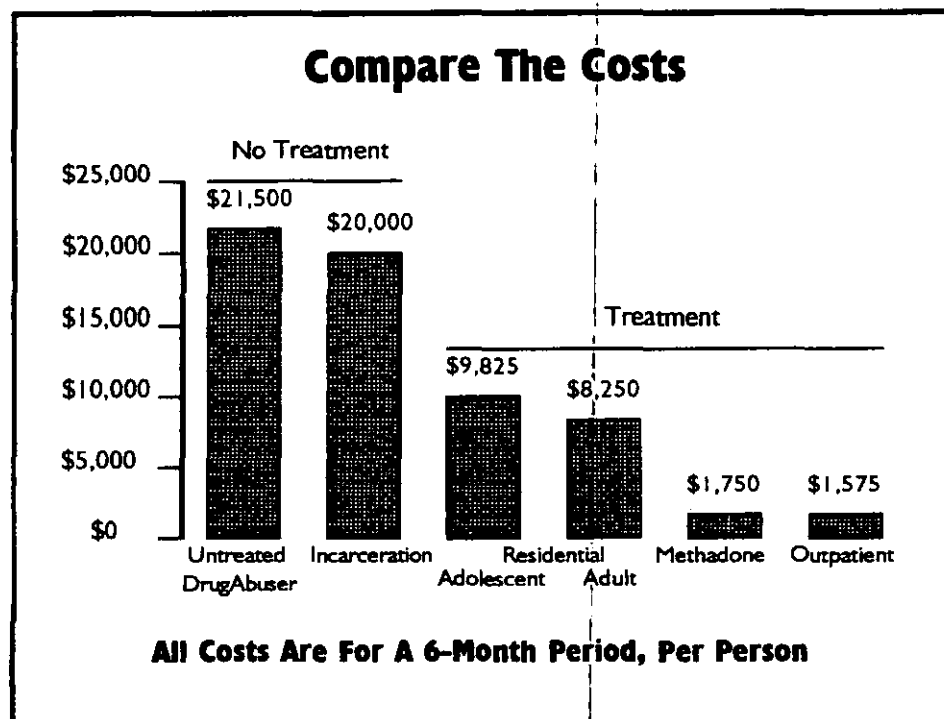
Overview

The use and abuse of drugs is a long-standing problem in Arkansas which touches all aspects of our society. While our state courts have always dealt to some extent with drug and drug-related cases, recent growth in criminal caseloads attributable to drug abuse have begun to overwhelm the system. Arkansas trial judges report that cases involving drugs - either when the charge is drug related, the defendant was under the influence of drugs while committing a non-drug offense, or the defendant committed a crime to support a drug habit - make up some 75% of the criminal caseload.

In an effort to deal with this nationwide problem, states have tried a number of approaches to handling drug-related cases. One of the most recent methods is the establishment of "drug courts." While the programs vary widely, all share a premise that drug abuse is more than just a criminal justice problem and involve a partnership between the courts, treatment, and public health communities.

In many ways the Sixth Judicial District S.T.E.P. Court is similar to drug courts in operation in other parts of the country. The extensive planning process and site visits prior to the establishment of the S.T.E.P. Court allowed the Arkansas planners to draw from the experiences of other states and communities in establishing a program which was appropriate for Arkansas.

While the policies and procedures of the court, central intake unit, and treatment program are explained in detail herein, in general, the S.T.E.P. Court is a pre-trial diversion program for non-violent adult offenders. The defendant arrives in S.T.E.P. after an initial appearance in municipal court, usually on the day of or the day after his or her arrest. Upon arriving at S.T.E.P., the defendant completes an assessment in the Central Intake Unit, is given a health examination, appears before the judge and, if accepted into the program, has an initial meeting with a primary treatment counselor. The speed of this process is possible because of one of the uniqueness of S.T.E.P. -- all of the program is located under one roof. A client is literally walked from the intake office down the hall to the treatment office and further down the hall to the court. This "one-stop shopping" prohibits clients from getting lost in the process.



A second uniqueness of S.T.E.P. is the existence of the Central Intake Unit. One problem identified early on in the planning process was that state treatment providers seemed to provide only "one size fits all" programs and always seemed to recommend their own programs for all offenders. The centralized assessment allows for an independent evaluation of each client and a recommendation on the type and level of treatment required.

A third uniqueness of S.T.E.P. is the inclusion of the public health sector in the program. All clients receive a complete physical examination, including special testing for TB, HIV, hepatitis, and other sexually transmitted diseases. Clients are referred for appropriate public health services.

Central Arkansas is benefitting greatly from the existence of the S.T.E.P. Court. The court system benefits by having an additional disposition alternative. A large number of cases are also diverted from the regular criminal justice process, relieving the workload of judges, prosecutors, public defenders, law enforcement, corrections officials, and other related personnel. The treatment community benefits by having available the active participation and influence of the court to facilitate the successful treatment of clients. The public health community benefits by having access to a high risk population which is otherwise very difficult to reach. And the general public benefits in several ways. If treatment is successful, a client who is highly at risk to become a repeat offender is transformed into a productive citizen. From a purely economical standpoint, the minimal costs associated with treatment services, as compared

to incarceration, makes it a better choice even if treatment proves unsuccessful.

- **States enjoy a \$4.00 return for each \$1.00 invested in alcohol or drug treatment.**
- **Outpatient treatment of substance abusers costs citizens *one-tenth* the cost of incarcerating substance abusers.**
- **For each AIDS case diverted by getting the person into substance abuse treatment and out of the disease pool, a potential \$75,000 in lifetime medical costs are saved.**
- **For every dollar spent for a substance abuse treatment service, \$11.54 is saved in social costs.**

Developmental History

In November of 1991, the state of Arkansas selected a team to attend the National Substance Abuse Conference in Washington, D.C.. Members of the team included State Senator Mike Beebe, Chief Justice Jack Holt, Circuit Judge John Plegge, Juvenile Judge Joyce Warren, Mr. Robert Shepherd, the State Drug Czar, Ms. Ruth Kaplan, a professor of social work, Mr. Bobby McDaniel, a criminal defense attorney, and Mr. J.D. Gingerich, Director of the Administrative Office of the Courts. A fairly detailed work plan was developed by the team as a result of the conference.

The most important result of the plan was the development and completion of the Arkansas Drug Conference which took place in August of 1992.

Teams of judges, prosecutors, defense attorneys, probation officers and treatment providers from almost all of the state's judicial districts participated in the conference. An outstanding program of national and local presenters dealt with issues related to the disposition of drug cases and the treatment of drug abusing offenders. As a result of that conference, teams from each judicial district developed a local action plan, designed to meet the particular needs of each jurisdiction. These plans included such things as the development of educational programs and community corrections programs. Plans from the Sixth Judicial District called for the establishment of a "Drug Court" based upon a diversion-treatment model.

Because of the personal interest of the Chief Justice of the Arkansas Supreme Court, a meeting of state officials was called, including Governor Jim Guy Tucker and the directors of the state's Department of Health, Department of Human Services, and Administrative Office of the Courts. A major planning process was initiated with substantial assistance from the Center for Substance Abuse Treatment of the U.S. Department of Health and Human Services. A broad spectrum of federal, state, local and private agencies and individuals were included in the process which, in addition to strengthening the planning process, allowed for several diverse sources of funding to be obtained to initiate the program.

Chief Justice Holt appointed Circuit Judge Jack L. Lessenberry to act as judge for the new court in 1993. Judge Lessenberry oversaw the planning process and accepted the first referrals in to the program in June, 1994. The court became fully operational in September, 1994.



On April 20, 1993, Chief Justice Jack Holt, Jr. was joined by the Governor and other state and federal officials to announce the development of the S.T.E.P. Court.

Funding

Technical assistance funds which were received from the Center for Substance Abuse Treatment of the U.S. Department of Health and Human Services provided consultants to come to the state to work with the court and treatment communities and allowed Arkansas officials to travel to several sites to review drug courts in other states. The National Center for State Courts provided the technical assistance to provide and develop a software program to link the court and treatment information systems. The State Justice Institute provided a grant to fund a complete evaluation of the program. The Arkansas Coordinating Council provided Drug Law Enforcement Program funds from the U.S. Department of Justice for the cost of the facility and the cost of drug screening. They also funded the salary of one employee for both the Sixth Judicial District prosecuting attorney and public defender. The former Arkansas Adult Probation Commission provided a case manager position to act as a liaison between the court and the treatment providers and to oversee the progress of all clients. The Arkansas Department of Health provided funds for the contract for treatment services and the salary of the project director, health nurse, and two licensed substance abuse counselors to staff the Central Intake Unit. Pulaski County agreed to provide the necessary services of the clerk and bailiff. The Pulaski County Sheriff agreed to set aside jail space to be used as a sanction for non-compliance in the program. The Administrative Office of the Courts provided furniture and

computer hardware, and administrative, clerical and research support for the program. A grant from the Arkansas Bar Foundation assisted in furnishing the courtroom, and provided exterior signs and a flagpole for the building.

APPENDIX

Pulaski, Perry counties' drug court to sentence offenders to treatment

BY BOBBI RIDLEHOOVER
Democrat-Gazette Health Writer

Pulaski and Perry counties will have a fully operational drug court by the end of the year to place nonviolent offenders in substance abuse programs instead of prison, Jack Holt Jr., chief justice of the state Supreme Court, said Tuesday.

"This focuses on an issue we know is driving the crime rate," said Joe M. Hill, director of the state Alcohol and Drug Abuse Prevention Division.

Holt said drug charges are involved in 15 to 25 percent of felony cases filed in Arkansas.

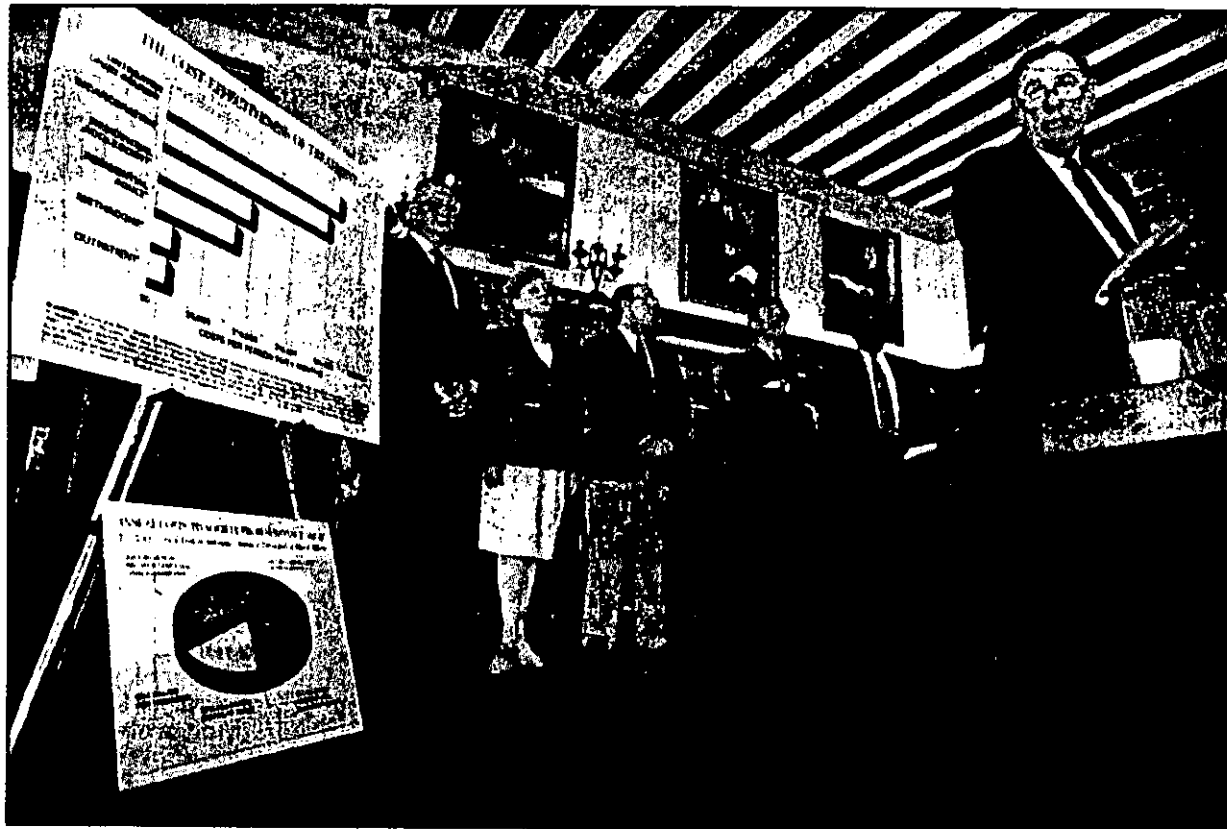
But informal questioning of Arkansas judges shows they believe that 75 percent of all criminal cases in the state are drug-related, the chief justice said.

Many of the details about how the drug court will actually function have not been worked out, Holt said.

Once the court is operating, though, "offenders who find themselves before the criminal justice system will have an opportunity to go into a drug diversion program," he said.

One aim of the program is to improve public health by stemming the spread of tuberculosis virus, or HIV, the virus that causes AIDS, acquired immunodeficiency syndrome.

People who enter drug treatment to avoid trial in a criminal court will be required to take TB tests and tests for HIV and other sexually transmitted diseases, said J.D. Gingerich, director of the administrative office of the state courts.



Arkansas Democrat-Gazette/Scott Carpenter

DRUG COURT — State Supreme Court Chief Justice Jack Holt Jr. speaks to the media in the Governor's Conference Room at the State Capitol on Tuesday about a new drug court. With Holt are (from left) Thomas Henderson, executive director of the National Center for State

Substance abuse, such as the use of intravenous drugs, methamphetamine and crack cocaine, is related to the spread of HIV and other sexually transmitted diseases, Hill said.

Alcohol abuse is still the No. 1 drug problem in Arkansas, but the new court will focus on illegal drugs, Hill said. A program

to deal with alcohol abuse already is in place, he said.

Hill said a methadone program at the University of Arkansas for Medical Sciences will help provide treatment options. Methadone is a synthetic painkiller used as a substitute for illegal narcotics.

Gingerich said defendants

Courts; Roberta Messallé, a senior adviser with the state Department of Human Services in Maryland; John Miles, an assistant chief with the Centers for Disease Control and Prevention in Georgia; Gov. Jim Guy Tucker; and Joe Hill, director of the state's drug prevention program.

may accept or reject going to the drug court. Rejecting the option means their case goes to criminal court, while accepting it means they waive their right to a speedy trial, he said.

Holt called the treatment program "rigid," saying, "If they don't cut the mustard, it's back

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• Continued from Page 1B

to the court for trial."

Typically, first-time offenders are now placed on probation, Gingerich said. By their fourth offense, they usually go to prison, he said.

That means "they go down with a substance abuse problem and come back with a substance abuse problem," Gingerich said.

But treatment of the drug problem that often lands them in prison is cheaper than keeping them in prison for a year, he said.

Holt appointed former Pulaski County Circuit Judge Jack L. Lessenberry as judge for the drug court. Lessenberry, 62, was one of three 6th Judicial District circuit judges who had to give up their elected seats Dec. 31, 1992, before the end of their terms in a settlement to a federal voting-rights lawsuit.

He has since been serving as an at-large judge and presided Tuesday over a capital murder trial in Little Rock.

Lessenberry was first elected to the bench in 1984.

In a news conference Tuesday at the state Capitol, Holt and others said the amount of money provided for the new drug court hasn't been decided on.

They have been given a \$25,000 federal grant, and three federal agencies participating in the program are expected to contribute up to \$200,000 in in-kind services, like programs to teach local officials how to diagnose addictive disorders and make recommendations for treatment.

Hill has control over block grant money given to his division, which may be used for some treatment costs.

EDITORIALS

The drugged society

Court of last resort

The new drug court in the works for Pulaski County could be regarded as a Court of Last Resort. Maybe not for the multitude of addicts who flock to it, but for the rest of us.

Why shouldn't we hitch our hopes to this fresh approach in the war against drugs? All else seems to have failed. Pitiably. A coordinated effort to root out and control addiction makes better sense than to go on blindly punishing it.

If only a relatively few addicts are salvaged, the effort will have been worthwhile. Especially since many of the judges who preside over criminal trials believe that three out of every four crimes are somehow related to illegal drugs. If they're right, this new court could reduce crime in general.

Not only that, the state could gain more control over the spread of tuberculosis and the AIDS virus. Tests for both would be required of those the court refers to treatment and rehabilitation programs.

No one argues that the new drug court will be a panacea for the drug problem. There isn't one. Certainly not the penitentiary. Prisons can't be built fast enough to hold offenders who already have been convicted. That most drug offenders never see the in-

side of a prison until after their third conviction is ample proof that treating the drug plague as a strictly legal problem won't work. Nor will anything else in the government's arsenal until the official mentality changes. It will have to include not just arrest and conviction but the kind of treatment, rehabilitation, and prevention that work.

Lamenting the problem in El Dorado the other day, a prosecutor talked about the futility of the drug war. As soon as the police clear out a bunch of dealers, he said, another crops up to take over their territory.

If only the drug problem were as high on Bill Clinton's agenda as taxes. As laid out in the president's proposed budget, fighting the drug war will amount to little more than a continuation of the futile policies pursued over the past 12 years. Law enforcement will continue to get the lion's share of the money available — 64 percent — while prevention and treatment will have to make do with the other 36 percent. There may be a new commander in the war against drugs, but nothing else seems to have changed.

All the while, cocaine is becoming more and more today's drug of choice. Crack is on its way up the social ladder from the streets. Heroin is making a comeback, and there's a ready market for the other staples one might find in any addict's shopping cart.

With the drug problem escalating and federal money short, Pulaski County is fortunate to get the new drug court — so long as paying for it doesn't become the county's responsibility when the federal grant runs out.

The new court will be funded with a \$25,000 grant and \$200,000 in services from federal agencies. The state already is paying the salary of the judge, Jack Lessenberry. He was among three judges who had to give up their seats because of a federal voting-rights lawsuit. The judge will have his hands full soon enough. Just as society does.



Briefs

'Unique' drug court in LR to open on 2nd Street

A novel program designed to provide drug treatment to addicts within a few days of their arrests for non-violent crimes — rather than after their convictions months later — could begin in the first week of June.

The opening of the so-called drug court has been delayed since the first of the year for several reasons. First, tenants in one building the court would occupy expressed concerns about safety. After negotiations for that lease broke off, officials found space at 715 West Second Street, which once housed *Construction News*, a trade magazine. During renovation, workers discovered tile that contained asbestos, Jack Lessenberry, the court's judge, said May 10.

Office equipment and furniture and telephone service should be placed in the building over the next several days. Meanwhile, the state Health Department, which is assisting the court, is hiring counselors and other employees for the program.

"It's a unique program in that it has the state Health Department giving physical and psychological treatment assessments," Lessenberry said. "We'll know whether an addict has communicable diseases and any psychological problems and be able to treat

their needs. It's the first court in the United States to have this partnership with judicial and executive agencies."

The court's operation is funded by the Arkansas Supreme Court, whose chief justice, Jack Holt, has made the court a sort of pet project.

The idea behind the program, which is modeled after similar ones in Austin, Texas and Miami, is to provide treatment to addicts almost immediately after their arrests for drug charges. While most addicts convicted of drug charges are required to undergo substance abuse treatment programs, they often go months without treatment while their cases come to trial. It is believed by Lessenberry and other organizers of the court that addicts might better respond to earlier treatment.

Though details remain to be worked out, the defendants eligible for the court likely will be those charged with drug possession and who have no history of violent crime.

Drug court to offer suspects a pound of cure

BY OLIVIER UYTTEBROUCK
Democrat-Gazette Police Reporter

As many as 800 drug convicts will have access to swifter, more intensive treatment when a new drug court opens next month in Little Rock, program organizers said last week.

Beyond treating drug abusers, the court will screen participants for infectious diseases such as hepatitis B, tuberculosis, AIDS and sexually transmitted diseases — elements that organizers say make the program unique and a potential model for cities across the country.

"This is the first time there has been a marriage of medical and court matters," said Pulaski County Circuit Court Judge Jack Lessenberry, who will preside over the new court, called the Supervised Training and Education Program, or STEP.

Lessenberry estimates the court's caseload will range from 500 to 800 cases a year.

Accused felons also charged with first-offense drug possession and paraphernalia crimes will be eligible to enter STEP, he said. Those cases will be referred to the court from municipal courts throughout Pulaski and Perry counties.

The STEP court is an alternative to circuit court for people accused of felony drug crimes. As such, the court's focus is different from that of circuit courts, which are in the business of punishing criminals, not treating drug addiction, Lessenberry said.

By contrast, STEP's mission is to offer drug criminals intensive treatment within days of arrest.

"The sooner treatment is available, the greater the chances of success," Lessenberry said. The court will try to grab people when they "hit bottom" by landing in jail, he said. "It gets people at a time when they're probably thinking about all the problems they've caused for loved ones and themselves."

Currently, drug suspects may go for months without treatment as their cases wind through circuit court. Cases typically take nine months to come to trial.

But in STEP court, treatment begins the first day a defendant appears in court, Lessenberry said. And counselors are housed in the same building to prevent people relapsing or getting lost in the system.

A large number of crimes, from burglary to homicide, are attributed to drugs. Little Rock

police Lt. John Martin said Friday. "If we don't do something about the drug problem, I think they'll account for a lot larger percentage of our crimes."

The advent of crack cocaine amplified the drug-crime connection, Martin said. Crack produces an intense, momentary high that demands more and more money as a user becomes more addicted and needs more of the drug, he said.

"It's very addictive," Martin said. "It's just a real quick high — a sudden rush some people

think they can't live without."

Little Rock's burglary rate increased 40 percent in the first quarter this year over 1993. Detectives attribute much of the rise to career burglars feeding drug habits that cost as much as \$400 a day. A jail space shortage in the county aggravates the problem.

STEP court is a voluntary program. Participants who fail to live up to its rigors will be routed back to circuit court.

The program will counsel convicts individually and in groups and try exotic techniques such as acupuncture — the use of needles to massage nerve endings, an idea imported from the Far East — to wean drug addicts.

Federal block grants will cover the program's estimated \$800,000 annual cost. The money is administered by the state Department of Health and the Law Enforcement and Prosecution Fund established by the state Legislature and derived from court costs, said Joe Hill, director of the Health Department's Bureau of Alcohol and Drug Abuse.

This week, construction workers remodeled a one-story building at 715 W. Second St., leased by STEP as a courtroom and intake center.

STEP originally planned to set up shop in the Arkansas Bar Association building at 400 W. Markham St., but lawyers objected. The court encountered further delays when workers found asbestos tiles that required removal in the West Second Street building.



Arkansas Democrat-Gazette/Steve Keesee

ALMOST READY — Judge Jack Lessenberry visits his nearly completed courtroom, which will be used exclusively for drug cases.

Drug court founder visits Pulaski copy as first cases near

BY JIM BROOKS
Democrat-Gazette Staff Writer

The judge in the nation's first "drug-treatment court" came to Little Rock on Friday and was given a tour of a Pulaski County court modeled after his own.

D a d e County, Fla., Circuit Court Judge Stanley Goldstein said at least 2,000 drug users have completed the program and are living drug-free lives since his court opened in 1989.



Goldstein

"The first decision we made was that what we had been doing for the last 30 or 40 years hadn't been working, so let's change everything," he said.

"We got away from the old business. Lawyers come in with their clients, but basically they are shocked because I talk with the clients," Goldstein said. "I talk directly to the defendant because I want to get a feel for these people."

"An awful lot of people used to get lost between the courthouse and probation," he said. "And then you would lose that many again between probation and sending

them off someplace for treatment."

The program at first dealt only with first-time drug offenders, but now hardened felons are referred to his court, Goldstein said.

"We now have hard-core addicts coming in who have been in and out of jail probably as many times as they've been in and out of a restaurant," he said.

"They are there for one reason and one reason only: They really want treatment."

Jack Lessenberry, Pulaski County circuit judge at large, said his 6th Judicial District's Substance Treatment and Education Program (STEP) court should hear its first case next week.

The STEP court will meet three days a week, Lessenberry said. Defendants will be referred from other courts in the county, he said.

"We hope we have our first client over here Wednesday," he said.

"The defendant initiates things by filing the motion. It's a voluntary thing."

Goldstein said that Little Rock's size — Dade County, with nearly 2 million residents, is more than 10 times larger — doesn't mean the drug court will be underused.

"Cocaine is everywhere," he said.

Critics of America's War on Drugs have long rapped it as a farce, a multibillion-dollar way to enrich law enforcement agencies or win politicians a few thousand votes while providing little or no help to defendants whose crimes could often be linked to their addictions to drugs and alcohol.

More often than not, rehabilitation was left to publicly supported nonprofit programs, which were saddled with long waiting lists, or to expensive, private ones available only to those with the means to pay for their care.

Gradually, though, amid projections by the Justice Department that drug offenders would fill two-thirds of the nation's prison and jail cells by 1995, the criminal justice system came around to the idea of offering alternative sentences for drug users. In Arkansas the past few years, judges on a case-by-case basis began suspending the sentences of some offenders as long as they were in treatment. But until June 29, no formal system existed in the state to route drug offenders into treatment programs rather than criminal court.

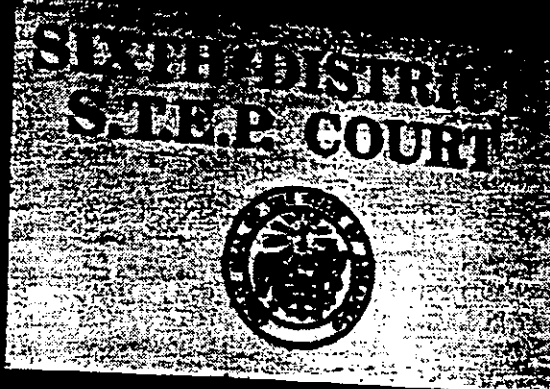
Known informally as Drug Court, the new system's official name is STEP Court — an acronym for Supervised Treatment and Education Program — and its mission is rather paradoxical: The court is being used to keep people charged with felony drug crimes out of court.

Its aim is twofold — to rehabilitate addicts charged for the first time with nonviolent crimes involving felony drug possession, and to remove from already-clogged criminal courts the time and expense of prosecuting those cases. Those accepted in the program pay \$5 a week or perform community service work for their treatment.

And, so far, the court, though still in its infancy, has received rave reviews from criminal justice officials and drug-law violators alike.

"Every time I walk in there, I get the feeling everyone's interested in me as a human being, a person who's still got good things ahead of them if I can just get cleaned up," Lisa, 28, a heroine junkie, said shortly before she was to take part in a counseling session in STEP Court. "I've stayed clean for the most part, but when I haven't they've stayed with me."

Omar F. Greene III, a lawyer in private practice who also has worked as a public defender and a deputy prosecutor, has had one client accepted into STEP Court — a college student who tried to buy drugs from an undercover officer. "You've got three people there, not including the counselors, whose hearts are really in the program," he said, referring to STEP Court Judge Jack Lessenberry, Public Defender Tammy Harris and Deputy Prosecutor Rob McDonald.



Users' Court



After years of a punitive drug war, the state finally tries rehabilitation

By Stephen Steed



Stephen Steed

Judge Jack Lessenberry, a former Pulaski Circuit judge, helped design the STEP Court program. "The people in this program are not in circuit court," he said. "They're not filing motions. They're not taking up the time of judges or police officers having to testify in court. They're not swamping process servers."

Greene recalled that, as a prosecutor, he once sent a man to prison for 10 or 12 years for having a crack pipe. "That's the way the system works. That was my job." Still, Greene said he "felt at times like we were filling the prisons up with a bunch of drug users. [Juries and judges] were giving these whopper sentences for selling or delivering drugs, but a lot of them were just addicts selling what was really small quantities of drugs."

STEP Court, he said, "is one of the best ideas I've heard of in a long time in the criminal justice system. We do need to be rehabilitating people rather than just punishing them."

The court accepted its first client in late June after several months of study, debate and negotiations among a half-dozen or so agencies and departments that play a vital

role in its operation and funding.

With an annual operating budget of about \$250,000, STEP Court had, as of mid-November, about 90 clients. It plans to take up to 416 a year. The court has about 20 employees, some of whom, including a social worker and an acupuncturist, work part-time.

Only those charged with felony drug possession — but not those charged with possession with intent to sell or distribute — are eligible for the program. Those whose drug problems are linked to other crimes — say, for mugging someone for the money to support a drug habit — also are not eligible for the program, although there's hope in expanding both the court's mission and the class of offenders. STEP Court also is now eligible for federal funding — through the crime bill signed this fall by President

Clinton — and similar courts have been authorized by the state legislature. Officials in some of the state's other counties with high populations, such as Jefferson, Sebastian and Washington counties, already have contacted Pulaski County officials for information.

In addition to getting help for their addictions, a client in STEP Court has this incentive: upon completing the program, the drug charge is dismissed. A defendant eligible for the program might have a hard time in deciding to enter it. By nearly all accounts, a first-time offender likely would get probation in circuit court, while the STEP Court program takes many clients 14 to 15 months to complete.

In the end, the choice boils down to this: does the defendant have a substance-abuse problem he wants to kick and is he willing to spend the time and effort required to get clean; or is he confident enough to think that, if he goes through circuit court and gets probation, he won't get popped by the law again?

Lessenberry, a Pulaski Circuit judge from 1984 until the Sixth Judicial District was reapportioned in 1992, played a leading role in STEP Court's formation by the state Division of Alcohol and Drug Abuse.

"It's real easy for legislators to go back home and boast about how they raised minimum sentences and provided minimum mandatory sentences," Lessenberry said. "And, quite honestly, I'm one of those who might tend to agree with them. But when you start using more and more of your resources to merely warehouse more people you start to realize there's got to be a better way."

"The numbers we're dealing with are fairly insignificant, but the people in this program are not in circuit court. They're not filing motions. They're not taking up the time of judges or police officers having to testify in court. They're not swamping process servers. Hopefully, they're in here getting clean and finding employment. It's hard to place a monetary value on a family that stays together because a spouse is clean and working."

Judge's demeanor is a mix of praise and criticism

With 17 people on the docket — three of whom were no-shows — November 17 was an unusually busy day for STEP Court. (The norm is eight or nine cases, three days a week.)

The first case called was something of an oddity: the young female client, clad in an orange jailhouse jumpsuit and accompanied by a Pulaski County sheriff's deputy, had been in jail for the past three weeks. Lessenberry had kept the woman in jail as a sort of safekeeping measure, to help her stay off the streets, and off drugs, until a place in a residential treatment facility could be found for her.

Lessenberry ordered her release from jail — for which the woman thanked him profusely — and commented to others in the courtroom, "I just wish we could get her into a good place where she'd be cared for, where she'd get good housing and good food." For the time being, the woman would stay at the Salvation Army and check in with counselors in STEP Court.

Her court appearance ending on a good note, the woman had the temerity to ask the judge to expedite her release: "They have a habit of taking all day to turn someone loose."

Lessenberry chuckled and shook his head. "I have a hard enough time running this court without taking over the jail."

The judge's good graces and levity ended two cases later, with his tongue-lashing of a woman who, a few days earlier, had come to STEP Court drunk.

"You don't have much respect for me, do you?" Lessenberry asked.

"I didn't say that," the woman replied, rather insolently.

"I don't want you to have a drink before you come see me. You hear that?" Lessenberry said. "Your report shows you're uncooperative, that you've missed appointments and that you've had no communication with your [counseling] group."

"You're worth something," he continued. "You can do well, but you can't do it with the attitude you have."

Lessenberry told the woman he would decide December 15 whether to drop her from STEP Court — at which point criminal charges against her would be reinstated in circuit court. "If she's clean [between now and December 15] she's okay," he told the prosecutor and the woman's public defender before returning his attention to the woman. "But if you're not, you won't have to mess with us anymore. But, I tell you, if you come in to circuit court drunk, you're going to jail. I'll tell you that right now."

"We want you to come here. We want to help you. But you can't come in here drunk. I'm too old to change my ways. You have a right to expect me to be fair, and I have a right to expect you to stay sober and cooperative."

Lessenberry's anger dissipated almost as quickly as it arose. (He later told a courtroom visitor that he called the woman's case early, to make his stern points known to other clients in the courtroom.)

"Mr. Brown, I probably scared you to death talking to [her] like that. I didn't mean to," he told the next client before him. That client, who had been charged with attempting to possess a controlled substance, told the court he had a previous felony conviction in Georgia — a record not known by Lessenberry, the public defender or the prosecutor.

Pending a check into the conviction, Lessenberry said the man should be allowed to enter STEP Court. "He's been very forthright," he said. "How long have you lived in Little Rock?"

"All my life. I just got into trouble in Georgia."

"Well, stay out of Georgia. Our football team gets in trouble down there, too,"

Lessenberry said. "Mr. Brown, come up here. I want to shake your hand and welcome you to the program. I hope things go well with you."

Another client, one of several in the third and final stage of the program, had backslid a bit — he confessed to having gotten drunk recently. Lessenberry urged him, "Try a little harder. Just try to have a little better control. As long as you work at it, we'll get along fine."

Lessenberry said he tries to be as patient as possible with people not faring well in the program. Sometimes, it seems to take an awful lot to be booted from the program. One young man, in his 20s, had rarely shown up for either his drug screenings or counseling sessions, Lessenberry noted. "I put you last on the docket because I wanted you to hear how good these people are doing," he said. "You can do well, but you're not."

He encouraged the man to attend "because if you don't, you won't get anywhere." Lessenberry praised the man for holding a job, but added, "It's important to work, but in the long run, this is the most important part of your life right now."

The client seemed barely fazed by the chiding. "They tell me I'm a crack head, but I'm not," he said.

Court powers help, but real change is still up to clients

I hate to use 'impressed,' but it's a really good feeling to see the improvements by people when they're off whatever they've been on," said Tammy Harris, a public defender who represents STEP Court clients. "I think there's a big need for this, and I wish we could get more people the treatment they need."

Harris, who is in her fourth year as a public defender, said STEP Court has made little change in the way she does her job. "My job is still to represent them, although the procedures might be a little different here. Sometimes my job is just to let them know there's someone there who care about them."

The normal adversarial role between the defense and the prosecution is somewhat diminished in STEP Court, she said, adding, "Our main goal is to get the client help." Harris, however, said she might at times argue with the prosecutor whether to drop a client from the program. Noting the case of the woman lectured by Lessenberry for showing up drunk, Harris said she'll likely urge the judge to retain the woman. "I know she made the judge angry, but I also know they have to hit bottom before they can actually get help. I'm not sure she's there yet."

Most of STEP Court's clients come directly from municipal court, where all charges, whether they are felonies or misdemeanors, are first filed. Felony charges are later transferred to circuit court, but it might

be weeks or months before disposition of those cases begins. And many of those cases, after months of lingering in the courts, are often closed, just days before trial, with a plea bargain.

STEP Court is organized in three phases:

- Stage 1, which lasts three to four weeks, primarily involves detoxification, early assessment of the client's needs, urine tests at least three times a week and frequent court appearances.

- Stage 2, which generally lasts two to three months, provides group and individual counseling, along with drug tests and acupuncture treatments.

- Stage 3, which continues for another eight or nine months, concentrates on literacy, education and job-search assistance, as well as periodic drug tests and court appearances.

Of the 90 or so clients in mid-November, about 10 percent had graduated to the third stage and 20 percent were in the second stage, said Terrell Rose, the administrator of STEP Court.

Most clients, he said, are black males 18 to 25 years old, with the oldest being 70. About 15 percent are 40 and older. Most are addicted to crack, he said, and about half have alcohol-abuse problems.

About one-third of the clients have chosen acupuncture as part of their treatment plan, he said, and about 10 percent have sexually transmitted diseases — diseases that public health nurses would never have known about without the court. One-third to one-half of the clients have jobs, he said.

"Early on in the program, folks will have a tendency to relapse and basically test the system to see what they can get away with," Rose said. "When they see we mean business, some might drop out. Others who could be eligible might see we're a lot more rigorous than probation. They might want to go on to circuit court, but they won't be guaranteed they'll just get probation." Rose estimated that the 400 or so clients the court could eventually take might be only half the number eligible.

About 30 programs similar to STEP Court now operate in the United States, but none of those is set up like Pulaski County's, Rose said. "The courtroom, the needs assessment, the public health work, the treatment — all that's done in the same building. We think this will help more people go all the way through the program. A person who has to go all the way across town for treatment — or maybe just a few blocks — might be tempted to go down that alley and take a hit on a pipe or whatever."

Before he became a lawyer, Deputy Prosecuting Attorney Rob McDonald, STEP Court's prosecutor, worked as a substance-abuse counselor in a similar diversion program, Treatment Alternatives to Street Crimes (TASC), which was closed in the early 1980s when its federal funding was cut.

"In STEP Court, I'm still basically a prosecutor. That role hasn't changed, but I think it's important to be a prosecutor who's also worked in substance-abuse counseling."

The program, being so young, is hard to assess, he said. "But I have seen people come into the program really whacked out, and they come back for their next court date a completely different person. They're obviously off the drugs. They look better physically. They're able to communicate with the court better.

"One good thing is that the power of the court stays with them. Sometimes people who have addictions need to have that added incentive to get clean again and to turn their lives around. You're not asking them to do something that's easy. But once they get started, they start feeling better, they have more money and they're not looking over their shoulder as much. They become more the factor that's driving them than the sanctions. In the end, they're the ones who make the changes." ♦

6th Judicial District "S.T.E.P. Court" a new approach to an old problem

Rob McDonald, deputy prosecuting attorney, Sixth Judicial District

America's courts are becoming increasingly clogged with drug cases and many of our jails and prisons are overflowing with drug offenders. Between 1980 and 1989, drug arrests in the United States increased 134 percent while the number of total arrests increased only 37 percent. Arkansas is no exception to this crisis—drug arrests have increased dramatically here also. To combat this growing problem, Arkansas is taking a bold new approach and has established the S.T.E.P. Court in Pulaski County.

The first of its kind in Arkansas, and one of approximately 30 similar courts across the country, the S.T.E.P. (Supervised Treatment and Education Program) Court is an innovative, court-operated, pre-trial diversion program for non-violent, drug abusing offenders that is focused on the "user" — not the "seller" of drugs. The program expands on the concept of diversion to provide approximately one year of treatment and case management services including individual and group drug abuse counseling, acupuncture, and educational and vocational services with strict

monitoring through frequent urine tests and court appearances. S.T.E.P. Court is unique in that, unlike other similar courts at this time, it provides a complete physical examination and special testing for TB, HIV and other communicable diseases along with appropriate treatment if indicated. Defendants that successfully complete the program will have no further prosecution of the charges that brought them to S.T.E.P. Court. Defendants that are terminated or that leave voluntarily from the program will be returned to the traditional criminal justice system for trial.

This new alternative to prosecution can provide defendants with the treatment and support services that can stop the cycle of recidivism that brings many offenders back to court again and again. To get into S.T.E.P. Court, a defendant must first be initially screened for eligibility by a Municipal Court Deputy Prosecuting Attorney and, if eligible, he must file a motion to be transferred from Municipal Court to S.T.E.P. Court. If the Municipal Judge grants the motion to transfer, the defendant will receive a S.T.E.P. court date, in most cases, the next day. Then, if accepted into

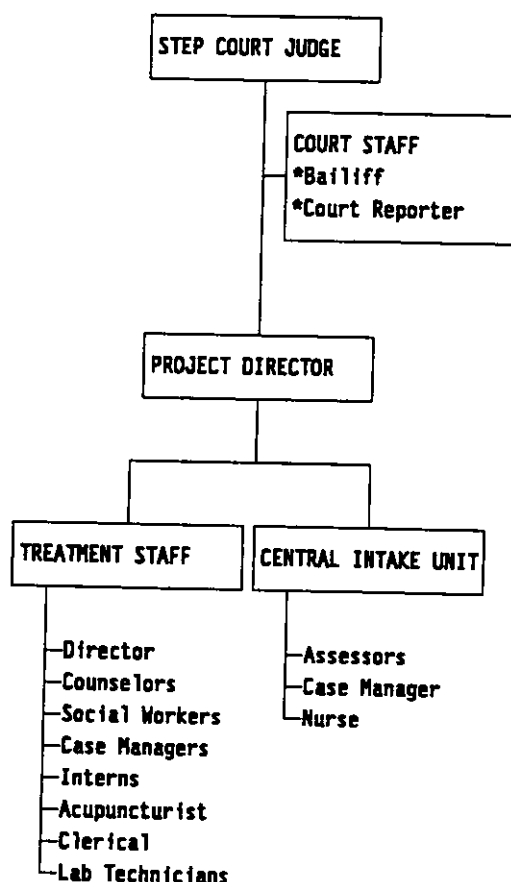
the S.T.E.P. Program, a defendant will immediately be given a full assessment of his treatment needs and will be placed into treatment accordingly. He will then proceed through the program's phases of treatment, graduation and after care.

The S.T.E.P. Court will provide major benefits to Pulaski County by relieving court dockets, freeing up bed space in jails, diverting low-level offenders from the state correctional system and providing more effective treatment of drug abusing offenders. It will also provide public health agencies access to a very high risk group of persons to which they would not ordinarily have access and sanctions through the court to treatment programs making it more likely that defendants in S.T.E.P. will take their commitment to treatment seriously.

Editor's Note: For more information regarding Pulaski County's S.T.E.P. Court, you may contact the author of this article, Rob McDonald, Deputy Prosecuting Attorney, at the Prosecuting Attorney's Office, 122 South Broadway, Little Rock, AR 72201. Mr. McDonald can also be reached by telephone at 340-8067 (Little Rock).

S.T.E.P. Court Staffing

The initial staffing plan and first year budgets for S.T.E.P. were based upon a projected caseload of eight referrals per week and a maximum client population of four hundred persons. The staff is divided into three units, consisting of the court, the central intake unit, and the treatment staff.



JUDICIAL STAFF

There are three employees within the judicial section. The judge is a regular general jurisdiction judge assigned to the position by the Chief Justice of the Arkansas Supreme Court. The official court reporter also acts as the docket coordinator for the court. The bailiff, a county employee, is part time and is available when the court is in session.

CENTRAL INTAKE UNIT STAFF

The Central Intake Unit (CIU) is staffed by employees of the Arkansas State Health Department. They include the Project Director, two Assessors, a Case Manager, and the Public Health Nurse. The position of Project Director requires a bachelors's degree in human resource management. In addition, a strong background in chemical dependency treatment is required. The assessor positions require a bachelor's degree in some human resource field, such as counseling or sociology. The assessors must also have at least three (3) years of relevant experience in a treatment related environment. The Public Health Nurse must be a Registered Nurse who is capable of performing all of the necessary drug screening and medical tests.

TREATMENT STAFF

The members of the treatment staff of the S.T.E.P. Court are employees of the Twenty-Four Hour Center, which was the recipient of the state contract to provide all treatment services for the

S.T.E.P. Court. Members of the treatment staff include the Program Director, Office Manager, Secretary, Primary Counselor, Social Worker, Case Managers, Acupuncturist, Counselors, and a Lab Technician. The Program Director must be a certified substance abuse counselor with four years of counseling experience in the area of substance abuse or chemical dependency. In addition, the Program Director must have at least two years of experience in a supervisory capacity. The Primary Counselor is also required to be a certified substance abuse counselor. Individual counselors are professionals who are usually in the latter stages of their substance abuse training. Preferential hiring treatment is given to those who have at least 1 year of experience in a treatment environment. The Acupuncturist must have undergone at least 70 hours of training in order to administer the acupuncture treatment that is available to clients involved in the program. A licensed Certified Social Worker supervises a group of four case managers. The case managers are generally graduate students in one of several social science programs.

Program Evaluation

In order for the S.T.E.P. Court to be as effective as possible, it was determined at the earliest planning stage that an outside and independent evaluation should be an integral part of the program. A grant, funded by the State Justice Institute, was secured to accomplish this task.

The selection of the program evaluators was conducted by a bid process. The evaluation team selected is based at the University of Central Arkansas in Conway, Arkansas. A.J. Zolten, Ph.D., is a research/clinical psychologist who specializes in chemical dependency and recovery. R. Kevin Roell, Ph.D, is a psychologist with a strong background in counseling. They were selected early in the planning process and were involved in many decisions about the program design. They also participated in the development of the automation system so that the data elements collected could support the evaluation process.

Their initial evaluation is found in Part II of this publication.

Automation System

One of the major goals identified in the planning process of the S.T.E.P. Court was to develop a cross-disciplinary automation system to allow for the full sharing of data between participating agencies. Technical assistance during the planning phase from the National Center for State Courts was used to review and evaluate systems in other states.

After this evaluation, it was determined that development of a separate program was most appropriate. Under the direction and with the assistance of the Arkansas Department of Health, a separate PC network, running off of the Department's mainframe system, was implemented and a program written which includes data elements and reporting screens for the court, prosecutor, public

defender, assessment unit, public health nurse, and treatment providers. All of the information about a client (except some public health data which is protected by state and federal law) is entered into the system and is freely available to all other agencies.

The analysis of the drug screens, which is done by a laboratory off-site, is imputed immediately into the system and transmitted via modem, so that it is available to treatment and to the court on the same day.

Target Population

Because of a finite pool of money from which to provide treatment services and some initial concern by the local prosecutor about the appropriate handling of offenders, a very specific group of offenders was targeted for admission into the S.T.E.P. Court program. Because of research showing that recovery is most effective in the earlier stages of dependency and in order to balance the desire for effective treatment with the need to protect the community from violent or dangerous criminals, the target population was limited to include only those charged with possession of a controlled substance, excluding Class Y and A felonies, and possession of drug paraphernalia (A.C.A. §5-64-401 and 403).

While a violation of either of these two statutes make an offender initially eligible for admission into the S.T.E.P. Court, the offender must also show that he or she:

- 1) is not currently on probation, suspended imposition of sentence or parole;
- 2) has not previously been convicted of a violent offense
[A violent offense is defined as an offense which has as an element the use or threat of physical force];
- 3) has not previously been convicted of a weapons offense or of any offense while armed with a deadly weapon;
- 4) has no evidence of gang membership or affiliation;
- 5) is not charged as a juvenile;
- 6) has no holds or detainers from other jurisdictions;

- 7) has not previously participated in the S.T.E.P. Court program; and
- 8) has no other pending charges.

To be considered for participation in the program, the defendant must file the Motion of Defendant to Transfer to S.T.E.P. Program at the time of his or her appearance in one of the seven referring municipal courts. At that time, a preliminary evaluation of the defendant's eligibility for participation is conducted.

Before approving the Order to Transfer the Defendant to S.T.E.P. Court, the municipal court advises the defendant of the basic requirements of the program and confirms the defendant's understanding of the waiver of his or her right to a speedy trial, jury trial, and a probable cause hearing.

Upon receiving the Transfer Order from the municipal court and the report of the S.T.E.P. Assessment Unit, the S.T.E.P. Court judge conducts an initial hearing and may enter an order accepting the transfer. This order places additional requirements upon the defendant, including the defendant's agreement to

- 1) participate in all programs and activities assigned by the S.T.E.P. Court, assessment, and treatment programs;
- 2) consent to release of confidential information to be shared by the court, defense, and prosecution; and
- 3) pay a participation fee of \$5 per week or perform community service as directed by the court.

Bond

Once the Order Accepting Transfer is entered by the court, the defendant may be released from custody, conditioned upon executing bond. As a condition of being released on bond, the defendant agrees to:

- 1) comply with all the terms and conditions set forth by the S.T.E.P. program administrator;
- 2) follow all of the requirements of the S.T.E.P. Court such as submitting to drug screens, counseling, and regular court appearances;
- 3) refrain from engaging in drug use during the term of the program;
- 4) refrain from violating any criminal laws of the State of Arkansas during the term of the program;
- 5) sign a consent for release of confidential information; and
- 6) keep the court informed of any change of address or employment.

Stipulation Agreement

During the first ninety days of the program, the defendant is allowed to voluntarily leave the program or may be removed from the program by the court. In such an event, the case is returned to the normal criminal justice process with the

defendant having retained all of his or her rights, with the exception of the defendant's waiver of speedy trial.

After completion of ninety days, a hearing is set before the S.T.E.P. Court judge and the defendant must, on the record, enter into a stipulation agreement. Elements of the agreement include a stipulation that the contents of the police report of the defendant's arrest and the State Crime Lab report of the analysis of the substance(s) involved are true. Further, the defendant must waive the right to confront and examine witnesses and the right to a jury trial. The practical effect of the stipulation agreement is a summary trial and plea of guilty. Such a trial takes place if the defendant withdraws or is terminated from the program after ninety days. This case is scheduled as a separate proceeding and heard by the S.T.E.P. Court judge.

The existence of the stipulation process is a result of a compromise between prosecution and defense which took place during the initial planning for the court. The prosecutor originally sought a post-trial, alternative sentencing type program, while the public defender sought a pure pre-trial diversion. The stipulation, entered only after a defendant has remained in the program for ninety days, allowed both parties to achieve their main objectives. Fears that such a requirement would deter persons from entering the program have not materialized.

Dismissal of Charges

The criminal charges pending against the defendant are held in abeyance until the date of the termination of the defendant's treatment program. Successful program completion will result in action by the Prosecuting Attorney to dismiss all charges which gave rise to the defendant's appearance and participation in the S.T.E.P. Court.

Role of Prosecution and Defense

The American judicial system is structured around the adversarial relationship between the parties in litigation. This is an excellent way to promote adequate representation of all parties. However, when treatment is the goal, as it is with the S.T.E.P. Court program, cooperation and trust are absolutely necessary. In the S.T.E.P. Court, therefore, there is a close relationship between the prosecution and defense. The defense attorney has a duty to be a zealous advocate for the client. If the client is exhibiting signs of chemical dependency, then the best thing for that person may be treatment. The Prosecuting Attorney has a duty to protect the community. Reducing recidivism and providing the community with a law abiding citizen is an excellent way to forward the goals of the Prosecuting Attorney. It is in the interest of both the Prosecuting Attorney and the Public Defender to work together in getting the eligible client into the S.T.E.P. Court program and to successfully complete it.

All persons who are arrested appear before one of the county's municipal courts for an initial appearance. At this time they will either have private counsel or be assigned a public defender. The defendant's counsel will be the first person who will have the opportunity to provide information about the S.T.E.P. Court program. Often, the Public Defender will conduct a daily search of the "jail list" and of the docket of the municipal court. This is done in order to find any persons who have been arrested that might be eligible for admission into the S.T.E.P. Court. If it is discovered that the offender has been arrested for a targeted offense, then a search is done with the local law enforcement agency to see if the offender has a prior criminal record that would bar his or her admission. A check with the circuit court is also completed to see if the person is on parole or probation. After the initial background check and consultation with the defendant, the defense attorney and the prosecuting attorney will confer in order to determine if an agreement that the defendant is eligible for admission into the S.T.E.P. Court program can be reached.

Once the defense attorney and the prosecuting attorney agree that there is a good probability that the defendant is eligible for the S.T.E.P. Court program, the defense attorney will file a Motion of Defendant to Transfer to the S.T.E.P. Court. Generally, the municipal judge will agree with the attorneys, and will approve the motion by signing the Motion of Defendant to Transfer to S.T.E.P. Program. A court date for the first

appearance in S.T.E.P. Court (usually on the same or following day) is then assigned.

During the period between the defendant's appearance at the municipal court and the first appearance before the S.T.E.P. Court, the prosecuting attorney performs a series of background checks for the purpose of determining the defendant's eligibility. The initial determination of eligibility made by the municipal court is only preliminary and must be confirmed by the S.T.E.P. Court judge. In order to determine the eligibility of the defendant, a complete and thorough background check must be done. The prosecutor utilizes several resources, including the National Crime Information Center, the Arkansas Crime Information Center, the Little Rock Public Safety Criminal Information Computer System, several miscellaneous verifications (parole and probation officers), and the Pulaski County Prosecuting Attorney's Office Gang Membership Database.

The Prosecuting Attorney as well as the defense attorney are both present at the first appearance of the defendant before the S.T.E.P. Court. At this appearance, the judge asks the Prosecuting Attorney for a determination of the eligibility of the client. This determination will not be a surprise to any of the parties present since this information is freely exchanged between the prosecution and the defense. If the Prosecuting Attorney has come to the conclusion that the defendant is not eligible, the court asks for response from the defense. Because the guidelines for admission are so straightforward, it is unlikely for a response to be effective, unless there are

persuasive extenuating circumstances that are not reflected in the Prosecuting Attorney's research sources. One area in which the court has granted some latitude is where there is a question about the exact amount of the drugs in the defendant's possession. This amount may be determinative of whether the defendant is charged with the crime of possession with intent to deliver or simple possession. In such cases, the prosecuting attorney and defense attorney will confer and the court may quite possibly admit the person into the S.T.E.P. Court. However, it must be noted that a recommendation against admission by the prosecuting attorney is usually followed since the prosecutor has the ultimate legal authority to file the charge directly in the circuit court.

Persons admitted to the S.T.E.P. Court are required to sign a Consent for Limited Release of Confidential Information. The confidential information includes the reports and findings of the Central Assessment Unit, laboratory results of drug screens, and the reports of attendance and progress generated by the treatment provider. This information is available to both the prosecution and defense as they monitor the defendant's progress. (It is important to note here, that the only medical information available to the attorneys is the evaluation of mental condition. This is only for purposes of determining if mental treatment is or should be a prerequisite to entrance into to the S.T.E.P. Court Program. All other information acquired during the physical examination by the public health nurse remains confidential).

All defendants appear before the court each thirty days in order to monitor progress. The defendant's primary counselor accompanies the defendant, along with the defense and prosecution.

APPENDIX

IN THE MUNICIPAL COURT OF _____, ARKANSAS

_____ DIVISION

STATE OF ARKANSAS

PLAINTIFF

VS.

NO. _____

DEFENDANT

MOTION OF DEFENDANT TO TRANSFER TO S.T.E.P. PROGRAM

Comes the defendant before the Court and states the following:

1. I have been arrested and charged with the offense(s) listed below which carry the following punishment(s):

OFFENSE	MISD/ FELONY	CLASS	IMPRISONMENT	FINE	PRESUMPTIVE SENTENCE
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

2. I request transfer to the Supervised Treatment and Education Program (S.T.E.P). I understand that S.T.E.P. is a treatment program which may last up to a year and upon the successful completion of the S.T.E.P. requirements and sanctions there will be no further prosecution of the above listed charge(s) against me. My bond while in S.T.E.P. is conditioned upon meeting all of the requirements of the S.T.E.P. Court Program.

3. I am not awaiting trial for a felony, a crime of violence or weapon(s) possession. I have never had a conviction expunged. I am not on probation, parole or a suspended imposition of sentence. I am not a member of any "street gang".

4. I have been advised of my right to have a probable cause hearing and a trial within one year of my arrest. I hereby waive these rights and agree that the time I spend in S.T.E.P. will not be counted toward my time to have a speedy trial. I also hereby agree to stipulate to the results of any crime laboratory tests conducted pursuant to my arrest on the above charges.

5. Should this matter proceed to trial, I understand I am normally entitled to a jury trial and to have witnesses called by the prosecution, cross-examined by my lawyer. Understanding this, I hereby agree within 90 days of my acceptance into the S.T.E.P. treatment program, to enter into a stipulation agreement concerning the facts of my arrest, as contained in such police reports as are attached. I understand the stipulation agreement and the police reports will be used as evidence against me concerning my charge(s). I also hereby give up my right to a jury trial, understanding that my case will be tried by a judge instead.

6. I understand that should I voluntarily terminate the treatment program within 90 days of my first appearance in the S.T.E.P. treatment program, or be terminated by the Court within this period of time, all waivers and stipulations entered herein, with the exception of the waiver of my right to a speedy trial, will be considered void and such rights aforementioned will be restored. These rights will only be restored if termination occurs within this 90 day period.

7. I understand that any additional violations of the criminal laws of the State of Arkansas may subject me to discharge from the program.

8. While in S.T.E.P., I am to pay \$5.00 a week or an equivalent of community service toward the cost of my treatment for a total of \$260.00 a year.

Defendant's Signature

Defense Attorney

Date: _____
No. 87654

Bar Number _____

IN THE MUNICIPAL COURT OF _____, ARKANSAS
CRIMINAL DIVISION

STATE OF ARKANSAS

PLAINTIFF

VS.

NO. _____

DEFENDANT

TRANSFER ORDER TO S.T.E.P. COURT PROGRAM

On this _____ day of _____ comes the above captioned cause on motion of the defendant to participate in the Supervised Treatment and Education Program (S.T.E.P.). Based upon the Motion filed by the defendant herein and other matters before the Court, the Court doth find:

1. Defendant has been fully advised of his constitutional rights to a speedy trial, jury trial and a probable cause hearing and has entered a knowing and intelligent waiver to each of these rights.

2. Defendant has been fully advised of the right to confront and cross examine witnesses and understands that within 90 days of acceptance, he/she will knowingly and intelligently waive this right by agreeing to enter into a stipulation agreement, with police report(s) attached, which will be used against the Defendant in lieu of testimony should this case(s) go to trial. The Defendant also agrees to stipulate to the results of any crime laboratory tests conducted pursuant to the Defendant's arrest on the charges pending. Should the Defendant fail to satisfactorily complete the S.T.E.P. Court program, the Defendant agrees these reports will be admissible in the trial of Defendant unless the Defendant is terminated either voluntarily or involuntarily within 90 days of acceptance by the S.T.E.P. Court program. In the event of termination within 90 days of acceptance, all waivers and stipulations agreed to will be considered void and all rights will be restored with the exception of the defendant's waiver of speedy trial. These rights will only be restored if termination occurs within this 90 day period.

3. Defendant understands all the terms and conditions set forth in his Motion to Transfer to S.T.E.P. Court Program and said motion is incorporated herein by reference.

4. Satisfactory participation in the S.T.E.P. Court Program is hereby made a condition of defendant's bail.

5. The Defendant is hereby ordered to appear before the S.T.E.P. Court Program at 715 W. 2nd Street, Little Rock, Arkansas, on:

- () Tuesday, _____, 199_.
- () Wednesday, _____, 199_.
- () Thursday, _____, 199_.
- () Other _____, 199_.

IT IS SO ORDERED.

Municipal Judge

No. 87655

Date

IN THE CIRCUIT COURT OF PULASKI COUNTY, ARKANSAS
S.T.E.P. DIVISION

STATE OF ARKANSAS

PLAINTIFF

VS.

NO. _____

DEFENDANT

ORDER ACCEPTING TRANSFER

On this day the defendant appeared with _____ and acknowledged signing the motion to transfer and that its contents are true. It appearing that the defendant understands and meets the requirements of S.T.E.P., the transfer is accepted. The court finds:

1. The defendant will be benefited by S.T.E.P.
2. The right to speedy trial is delayed so long as the defendant is in S.T.E.P. The waiver of jury trial and stipulation to the introduction of the arrest and crime lab reports have been reviewed and will be confirmed on the date shown below.
3. The bond is conditioned upon good behavior, participation and appearance at all times for court, assessment and treatment.
4. A consent for release of confidential information to the judge, defense attorney and prosecutor has been executed.
5. S.T.E.P. is a three-phase program of one year during which the defendant is to pay \$5.00 a week or perform community service.
6. The defendant may leave S.T.E.P. upon written notice. The court may for good cause remove the defendant from S.T.E.P., or suspend or revoke bond.
7. Upon the successful completion of S.T.E.P., the charge against the defendant will not be prosecuted.

NEXT COURT REPORT DATE _____ 1:30 p.m.

STIPULATION DATE _____ 1:30 p.m.

IT IS SO ORDERED.

DEFENDANT

CIRCUIT JUDGE

ATTORNEY

DATE

IN THE S.T.E.P. COURT OF PULASKI COUNTY, ARKANSAS

STATE OF ARKANSAS

PLAINTIFF

VS.

NO. ST 95-_____

DEFENDANT

BOND

Because of transfer to this court, the defendant is to be released from jail on the charge(s) shown by the docket number(s) of the named court upon fulfilling the conditions marked.

TRANSFERRING COURT

NUMBER

CHARGE

By signing this bond the defendant agrees to not violate any law, to meet the conditions of this bond, to appear before this court as required, and to keep this court informed in writing of any change of address or employment.

The defendant further agrees to cooperate and actively participate, to meet all appointments with assessment and treatment personnel of S.T.E.P., and to sign a consent for limited release of confidential information.

KIND OF BOND

_____ Personal Recognizance _____ Unsecured Bond of \$ _____

_____ Cash Deposit of 10% of \$ _____

_____ Cash, Secured or Surety of \$ _____

SPECIAL CONDITIONS

_____ Guaranteed by _____

_____ Travel restricted to _____

_____ OTHER _____

I UNDERSTAND THAT FAILURE TO APPEAR AT SUCH TIMES DIRECTED MAY RESULT IN FORFEITURE OF BOND, THE ISSUANCE OF A WARRANT FOR MY ARREST, ASSESSMENT OF COURT COSTS AND THE FILING OF ADDITIONAL CHARGES AGAINST ME.

DEFENDANT'S SIGNATURE

I/We guarantee the payment of the above bond in the event that the defendant fails to appear, otherwise this guarantee is to be void.

GUARANTOR

GUARANTOR

APPROVED: _____
CIRCUIT JUDGE

DATE

IN THE CIRCUIT COURT OF PULASKI COUNTY, ARKANSAS
S.T.E.P. DIVISION

STATE OF ARKANSAS

PLAINTIFF

VS.

NO.

DEFENDANT

STIPULATION AGREEMENT

Come now the above-styled parties to enter into a stipulation agreement pursuant to the Motion of Defendant to Transfer to S.T.E.P. Program executed by the defendant and filed _____, 19____, pursuant to the municipal court's Transfer Order filed _____, 19____, and pursuant to formal acceptance of the defendant into the S.T.E.P. Program by this court's Order Accepting Transfer filed _____, 19____, which set a stipulation date of _____, 199____,

AND, the State of Arkansas appearing by, and being represented by Deputy Prosecuting Attorney, _____, and the defendant appearing in person and being represented by his attorney, _____, the parties do hereby enter into the following Stipulation Agreement:

1. The Defendant agrees that the facts recited in the police and State Crime Lab reports attached to this agreement may be used as evidence in a court of law without the necessity of testimony by the law enforcement officers or crime lab personnel generating those reports (or those witnesses within the chain of evidence relating to those reports) being required and the Defendant waives any legal rights he may have to confront those witnesses in a court of law should this matter proceed to trial due to the defendant's failure to successfully complete the S.T.E.P. Program; and

2. The Defendant further agrees, and understands that the above-mentioned report(s) initially resulted in the defendant being charged by the _____ (agency name) with the crime(s) or charges of

(1) _____,

(2) _____, (3) _____,

but that the Prosecuting Attorney may later charge the defendant with the same or different charges flowing from the report(s) should defendant fail to successfully complete the S.T.E.P. Program, and that regardless of what charges may be brought based upon the report(s), this will not affect the defendant's stipulation in Paragraph #1 above; and

3. The Defendant also agrees to hereby waive his right to a jury trial and understands that his case will be tried by a judge should he fail to successfully complete the S.T.E.P. Program.

WHEREFORE, based upon the Prosecuting Attorney's willingness to allow the defendant to enter into the S.T.E.P. Program on this basis and upon the defendant's agreement to waive certain legal rights as referenced above in this Stipulation Agreement and in the previous Motion of Defendant to Transfer to S.T.E.P. Program, the Municipal Court Transfer Order and the S.T.E.P. Court Order Accepting Transfer as referenced above, the parties do hereby agree to and enter into this Stipulation Agreement this _____ day of _____, 19 ____.

Defendant's Signature

Defense Attorney

Deputy Prosecuting Attorney

NAME (PLEASE PRINT)

ST 95-_____

DOB

CONSENT FOR LIMITED RELEASE
OF CONFIDENTIAL INFORMATION

I am advised by this consent that a person entering a drug or alcohol treatment program is entitled by federal law, 42 CFR Part 2, to have that information kept confidential. Such information may be disclosed to others who have a need within the criminal justice system where the treatment is a condition of the disposition of a criminal charge or release from custody.

In order to follow my treatment and as a condition of bond, I authorize assessment and treatment persons of S.T.E.P. and others to whom I am referred for treatment or diagnosis to report all information of treatment needs, attendance, attitude and drug screens to: Judge
Court Manager
Prosecuting Attorney
My Lawyer

Nothing I say regarding any criminal charge can be disclosed, but if I try to commit a crime or commit a crime while in S.T.E.P., that is not protected.

This consent ends when I leave S.T.E.P. whether by completion, withdrawal or removal for cause.

WITNESS

SIGNATURE

DATE

SIGNATURE OF PARENT OR GUARDIAN
IF A MINOR

State of Arkansas
79th General Assembly
Second Extraordinary Session, 1994
By: Senators Everett and Snyder

Call Item No.44

SENATE BILL 48

For An Act To Be Entitled
"AN ACT TO PROVIDE AUTHORITY FOR THE ESTABLISHMENT OF
PRETRIAL OR POST TRIAL TREATMENT, INTERVENTION AND
DIVERSION PROGRAMS; AND FOR OTHER PURPOSES."

Subtitle
"TO PROVIDE AUTHORITY FOR THE
ESTABLISHMENT OF PRETRIAL OR POST TRIAL
TREATMENT, INTERVENTION AND DIVERSION PROGRAMS."

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF ARKANSAS:

SECTION 1. Any judicial district, with the agreement of the parties, may establish a program whereby a defendant may be transferred to a pretrial or post trial treatment program for drug abuse provided:

(a) The treatment program is at least one year in length and meets the minimum standards of treatment promulgated by the Bureau of Alcohol and Drug Abuse Prevention of the Arkansas Department of Health;

(b) The charge or charges against the defendant carries a punishment which may be suspended;

(c) The defendant waived his rights to a speedy trial and such other rights as agreed to by the parties and executed a consent for limited release of confidential information regarding treatment permitting the judge, prosecutor and defense attorney access to information relating to attendance, attitude, participation and results of drug screens;

(d) The defendant is eighteen (18) years of age or older. This provision may be waived with the consent of the prosecuting attorney.

SECTION 2. All provisions of this act of a general and permanent nature are amendatory to the Arkansas Code of 1987 Annotated and the Arkansas Code Revision Commission shall incorporate the same in the Code.

SECTION 3. If any provision of this act or the application thereof to any person or circumstances is held invalid, such invalidity shall not affect other provisions or applications of the act which can be given effect without the invalid provision or application, and to this end the provisions of this act are declared to be severable.

SECTION 4. All laws and parts of laws in conflict with this act are hereby repealed.

/s/ Everett and Snyder

APPROVED Jim Guy Tucker GOVERNOR
8/25/94

ARKANSAS CODE OF 1987 ANNOTATED

TITLE 5. CRIMINAL OFFENSES

SUBTITLE 6. OFFENSES AGAINST PUBLIC HEALTH, SAFETY, OR WELFARE

CHAPTER 64. CONTROLLED SUBSTANCES

SUBCHAPTER 4. UNIFORM CONTROLLED SUBSTANCES ACT --

PROHIBITIONS AND PENALTIES

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Current through Act 70 of the 1994 Second Extraordinary Session
5-64-401 Criminal penalties.

(a) Except as authorized by subchapters 1-6 of this chapter, it is unlawful for any person to manufacture, deliver, or possess with intent to manufacture or deliver a controlled substance.

(1) Any person who violates this subsection with respect to:.....

(ii) Any other controlled substance classified in Schedules I, II, or III which by aggregate weight, including adulterants or diluents, is less than twenty-eight grams (28 g.), is guilty of a felony and shall be imprisoned for not less than five (5) years nor more than twenty (20) years and shall be fined an amount not to exceed fifteen thousand dollars (\$15,000). For all purposes, other than disposition, this offense is a Class B felony. Any other controlled substance classified in Schedules I, II, or III which by aggregate weight, including adulterants or diluents, is twenty-eight grams (28 g.) or more but less than four hundred grams (400 g.), is guilty of a felony and shall be imprisoned for not less than ten (10) years nor more than forty (40) years, or life, and shall be fined an amount not to exceed fifty thousand dollars (\$50,000). For all purposes other than disposition, this offense is a Class B felony. Any other controlled substance classified in Schedules I, II, or III which by aggregate weight, including adulterants or diluents, is four hundred grams (400 g.) or more, is guilty of a felony and shall be imprisoned for not less than fifteen (15) years nor more than forty (40) years, or life, and shall be fined an amount not exceeding one hundred thousand dollars (\$100,000). For all purposes other than disposition, this offense is a Class B felony.

(iii) A substance classified in Schedules IV or V which by aggregate weight, including adulterants or diluents, is less than two hundred grams (200 g.), is guilty of a felony and shall be imprisoned for not less than three (3) years nor more than ten (10) years and shall be fined an amount not exceeding ten thousand dollars (\$10,000). For all purposes other than disposition, this offense is a Class C felony. A substance classified in Schedules IV or V which by aggregate weight, including adulterants or diluents, is two hundred grams (200 g.) or more but less than four hundred grams (400 g.), is guilty of a felony and shall be imprisoned for not less than ten (10) years nor more than forty (40) years, or life, and shall be fined an amount not exceeding fifty thousand dollars (\$50,000). For all purposes other than disposition, this offense is a Class C felony. A substance classified in Schedules IV or V which by aggregate weight, including adulterants or diluents, is four hundred

grams (400 g.) or more, is guilty of a felony and shall be imprisoned for not less than fifteen (15) years nor more than forty (40) years, or life, and shall be fined an amount not exceeding one hundred thousand dollars (\$100,000). For all purposes other than disposition, this offense is a Class C felony.

(iv) A controlled substance classified in Schedule VI shall be guilty of a felony and be:

(a) Imprisoned no less than four (4) nor more than ten (10) years and/or fined no more than twenty-five thousand dollars (\$25,000) if the quantity of the substance is less than ten pounds (10 lbs.) and for all purposes other than disposition, this offense is a Class C felony; or

(b) Imprisoned for no less than five (5) years nor more than twenty (20) years and/or fined no less than fifteen thousand dollars (\$15,000) nor more than fifty thousand dollars (\$50,000) if the quantity of such substance is ten pounds (10 lbs.) or more but less than one hundred pounds (100 lbs.) and for all purposes other than disposition, this offense is a Class B felony; or

(c) Imprisoned for no less than six (6) years nor more than thirty (30) years and/or fined no less than fifteen thousand dollars (\$15,000) nor more than one hundred thousand dollars (\$100,000) if the quantity of the substance is one hundred pounds (100 lbs.) or more and for all purposes other than disposition, this offense is a Class A felony. (b) Except as authorized by subchapters 1-6 of this chapter, it is unlawful for any person to create, deliver, or possess with intent to deliver, a counterfeit substance. For purposes of this subsection, possession of one hundred (100) dosage units of any one (1) counterfeit substance or possession of two hundred (200) dosage units of counterfeit substances regardless of the type shall create a rebuttable presumption that such person possesses such counterfeit substance with intent to deliver in violation of subsections (a) and (b) of this section.

(1) Any person who violates this subsection with respect to:

(i) A counterfeit substance purporting to be a controlled substance classified in Schedule I or II, which is a narcotic drug, is guilty of a Class B felony;

(ii) Any other counterfeit substance purporting to be a controlled substance classified in Schedules I, II, or III, is guilty of a Class C felony;

(iii) A counterfeit substance purporting to be a controlled substance classified in Schedule IV, is guilty of a Class C felony;

(iv) A counterfeit substance purporting to be a controlled substance classified in Schedule V, is guilty of a Class C felony;

(v) A counterfeit substance purporting to be a controlled substance which is not classified as a scheduled controlled substance, is guilty of a Class D felony.

(c) It is unlawful for any person to possess a controlled substance or counterfeit substance unless the substance was obtained directly from, or pursuant to, a valid prescription or order of a practitioner while acting in the course of his professional practice, or except as otherwise authorized by this chapter. Any person convicted of a first offense for violation of this subsection is guilty of a Class A misdemeanor. Provided any person who is convicted of a second offense for a violation of this subsection is guilty of a Class D felony. Provided, any person who is convicted of a third or subsequent offense for violation of this subsection shall be guilty of a Class C felony. Provided, however, any person who unlawfully possesses a controlled substance listed under Schedules I or II of subchapters 1-6 of this chapter shall be guilty of a Class C felony.

(d) Rebuttable Presumption. Possession by any person of a quantity of any controlled substance including the mixture or substance listed in this subsection in excess of the quantity limit set out herein shall create a rebuttable presumption that such person possesses such controlled substance with intent to deliver in violation of subsections (a) and (b) of this section. Provided, however, the presumption provided for herein may be overcome by the submission of evidence sufficient to create a reasonable doubt that the person charged possessed a controlled substance with intent to deliver in violation of subsections (a) and (b) of this section.

Heroin -- 100 milligrams

Opium -- 3 grams

Morphine -- 300 milligrams

Cocaine -- 1 gram

Codeine -- 300 milligrams

Pethidine -- 300 milligrams

Hydromorphone Hydrochloride -- 16 milligrams

Methadone -- 100 milligrams

Marijuana -- 1 oz.

Hashish -- 6 grams

Lysergic Acid Diethylamide (LSD) -- 100 micrograms

For controlled substances other than those listed above:

Depressant Drug -- 20 hypnotic dosage units

Stimulant Drug -- 200 milligrams

Hallucinogenic Drug -- 10 dosage units.

(e) Immunity. No civil or criminal liability shall be imposed by virtue of subchapters 1-6 of this chapter on any practitioner who manufactures, distributes, or possesses a counterfeit substance for use by a registered practitioner in the course of professional practice or research, or for use as a placebo by a registered practitioner in the course of professional practice or research.

ARKANSAS CODE OF 1987 ANNOTATED
TITLE 5. CRIMINAL OFFENSES
SUBTITLE 6. OFFENSES AGAINST PUBLIC HEALTH, SAFETY, OR WELFARE
CHAPTER 64. CONTROLLED SUBSTANCES
SUBCHAPTER 4. UNIFORM CONTROLLED SUBSTANCES ACT --

PROHIBITIONS AND PENALTIES

Copyright(c) 1987-1994 by The State of Arkansas. All rights reserved.
Current through Act 70 of the 1994 Second Extraordinary Session
5-64-403 Fraud -- Drug paraphernalia -- Criminal penalties.

(a) It is unlawful for any person knowingly or intentionally:

(1) To distribute as a registrant a controlled substance classified in Schedules I or II, except pursuant to an order form as required by s 5-64-307;

(2) To acquire or obtain possession of a controlled substance by misrepresentation, fraud, forgery, deception, subterfuge, or theft;

(3) To furnish false or fraudulent material information in, or omit any material information from, any application, report, or other document required to be kept or filed under subchapters 1-6 of this chapter, or any record required to be kept by subchapters 1-6 of this chapter; or

(4) To make, distribute, or possess any punch, die, plate, stone, or other thing designed to print, imprint, or reproduce the trademark, trade name, or other identifying mark, imprint, or device of another or any likeness of any of the foregoing upon any drug or container or labeling thereof so as to render the drug a counterfeit substance.

(5) (i) To agree, consent, or in any manner offer to unlawfully sell, furnish, transport, administer, or give any controlled substance to any person, or to arrange for any of the above, and then to substitute a non-controlled substance in lieu of the controlled substance bargained for.

(ii) The proffer of a controlled substance shall create a rebuttable presumption of intent to deliver which does not require additional showing of specific intent to substitute a noncontrolled substance.

(b) (1) Any person who violates any provision of subdivisions (a)(1) -- (4) of this section is guilty of a Class C felony.

(2) Any person who violates subdivision (a)(5) of this section with respect to:

(i) A noncontrolled substance represented to be a controlled substance classified in Schedules I or II, which is a narcotic drug, is guilty of a Class B felony;

(ii) Any other noncontrolled substance represented to be a controlled substance classified in Schedules I, II, or III, is guilty of a Class C felony;

(iii) A noncontrolled substance represented to be a controlled substance classified in Schedule IV, is guilty of a Class C felony;

(iv) A noncontrolled substance represented to be a controlled substance classified in Schedule V, is guilty of a Class C felony;

(v) A noncontrolled substance represented to be a controlled substance classified in Schedule VI, is guilty of a Class D felony.

(c) (1) It is unlawful for any person to use, or to possess with intent to use, drug paraphernalia to plant, propagate, cultivate, grow, harvest, manufacture, compound, convert, produce, process, prepare, test, analyze, pack, repack, store, contain, conceal, inject, ingest, inhale, or otherwise introduce into the human body a controlled substance in violation of subchapters 1-6 of this chapter. Any person who violates this section is guilty of a Class C felony.

(2) It is unlawful for any person to deliver, possess with intent to deliver, or manufacture with intent to deliver, drug paraphernalia, knowing, or under circumstances where one reasonably should know, that it will be used to plant, propagate, cultivate, grow, harvest, manufacture, compound, convert, produce, process, prepare, test, analyze, pack, repack, store, contain, conceal, inject, ingest, inhale, or otherwise introduce into the human body a controlled substance in violation of subchapters 1-6 of this chapter. Any person who violates this section is guilty of a Class C felony.

(3) Any person eighteen (18) years of age or over who violates subdivision (c)(2) of this section immediately preceding by delivering drug paraphernalia to a person under eighteen (18) years of age who is at least three (3) years his junior is guilty of a Class B felony.

(4) It is unlawful for any person to place in any newspaper, magazine, handbill, or other publication any advertisement knowing, or under circumstances where one reasonably should know, that the purpose of the advertisement, in whole or in part, is to promote the sale of counterfeit substances or of objects designed or intended for use as drug paraphernalia. Any person who violates this section is guilty of a class C felony.

Overview

All clients are referred for screening and assessment by the Central Intake Unit. After assessment, a recommendation is made regarding the client's eligibility for the S.T.E.P Court.

Clients are assigned to one of the following three categories:

1. Individuals who do not appear to have a substance abuse problem, or who are not motivated to participate in treatment services;
2. Individuals who have a moderate substance abuse problem, and who need less intensive treatment services (e.g. drug education); or
3. Individuals who have a serious substance abuse problem, and who need more intensive treatment services.

Although all clients will appear before the S.T.E.P. Court judge, individuals in the first category above are not recommended for services through the court. Individuals in the latter two categories are recommended to the judge for assignment to one of two treatment tracks. Individuals in the second category are recommended for Track 1, which consists of less intensive drug court treatment services (drug education or other ancillary services). Individuals in the third category are recommended for placement in Track 2, consisting of intensive drug treatment services.

Screening

Screening is conducted for all clients referred to the Central Intake Unit. Both a substance abuse screening and a health screening are completed. The health screening includes tests to identify the presence of HIV, other sexually communicable diseases, Hepatitis B, Tuberculosis, and other disabling conditions that might affect the client's involvement in the S.T.E.P. Court. Clients testing positive on the initial health screening will receive a full health screening for the identified medical disorder.

The substance abuse screening consists of three components:

1. Administration of four items adapted from the Addiction Severity Index (ASI);
2. Client self-administration of the Alcohol Dependence Scale (ADS); and
3. Client self-administration of the Drug Abuse Screening Test (DAST-20).

The total duration of time required for CIU screening is estimated at 22 minutes.

The interviewer provides a brief orientation to each of the screening activities and explains that this information will describe the history of substance abuse and will be used in developing a plan of services to help the client. Scores from the ADS and DAST-20 are entered by the CIU interviewer on the Substance Abuse Screening Form.

Following the initial substance abuse screening, a decision

is made by CIU staff to refer the client for substance abuse assessment. Clients are referred for an assessment if they report one or more days of alcohol/drug problems in the past 30 days, or one or more days of major drug use or alcohol intoxication during this period. Referral for assessment is also made if the individual has received alcohol or drug treatment during the past year, or if the individual rates the importance of substance abuse treatment as a "2" (moderately) or higher.

The screening interviewer indicates on the Substance Abuse Screening Form any other special considerations that would indicate the need for referral for assessment (e.g. client exhibits withdrawal symptoms, has alcohol on breath). Clients who do not meet criteria on the basis of responses to ASI items or scores from the ADS or DAST-20 may be referred for a full assessment if special considerations are indicated by the interviewer.

Assessment

Clients referred for substance abuse assessment are individually administered the full Addiction Severity Index (ASI). A brief orientation is provided to the ASI, describing the several content areas that will be surveyed, and the purpose of the assessment interview. The ASI is administered in a private office or interview room. The interviewer enters information obtained from the ASI directly to the court automation system as the interview is being conducted.

Composite scores provide an estimate of problem severity, based on respondent scores on several critical items from each content area of the ASI. These scores range from 0-1, with higher scores indicating relatively greater problem severity.

Completed Substance Abuse Screening Forms and Substance Abuse Assessment Forms are compiled along with other relevant intake, and forwarded to the S.T.E.P. Court judge. All clients screened at the CIU are referred for an appointment in the S.T.E.P. Court.

All information derived from the screening and assessment is available to the court at such time as a decision is made for acceptance in to the program. In addition, the information is used by the treatment personnel at the initial staffing and development of the client's treatment program.

APPENDIX

STATISTICAL DATA

Name of Client: _____

Docket Number: _____

Sex: ___ Male ___ Female

Race: _____

Income: _____ Amount ___ Monthly ___ Yearly

Marital Status: ___ Divorced ___ Single ___ Married ___ Widowed

Number of Dependents: _____

Educational Level: ___ Grade School ___ High School ___ College ___ Grad School

Charge Number: _____, Class: _____ Statute Number: _____

Court of Transfer: _____ Division: _____ Judge: _____

Date of Birth: _____

Date of Assessment: _____

Results: Completed Program: _____ Discharged from Program: _____

Comments:

Locator Sheet

ADDRESS CLIENT EXPECTS TO RETURN TO:

Street, Apt. #

City, State, Zip Code

Area Code, Phone #

OTHERS LIVING AT THAT ADDRESS:

NAME:

RELATIONSHIP:

OTHER CONTACTS:

INCLUDE PARENTS, MATE, SIBLINGS, CHILDREN, CLOSE FRIENDS

Name

Relationship

Works during day

Street, Apt. #

City, State, Zip Code

Area Code, Phone #

Name

Relationship

Works during day

Street, Apt. #

City, State, Zip Code

Area Code, Phone #

Name

Relationship

Works during d.

Street, Apt. #

City, State, Zip Code

Area Code, Phone #

**** WHAT IS THE BEST TIME TO CONTACT YOU? (Day, time)

REFERRALS FOR DAY-CARE SERVICES

Client's Name: _____

Address: _____ Zip Code: _____

Telephone Number: _____

Names of dependent children:

1. _____ Age: _____

2. _____ Age: _____

3. _____ Age: _____

4. _____ Age: _____

5. _____ Age: _____

If day-care services are needed, what day(s) of the week and what time of day will the services be needed. (Please be specific.)

Day of the week:

Time of day

Monday _____ am/pm

Tuesday _____

Wednesday _____

Thursday _____

Friday _____

Saturday _____

Client Disclosure Form

According to Federal law, 42 CFR Section 2.31, Subpart C Disclosure with patients consent prohibits any client information from being revealed to outside callers by S.T.E.P. Court employees.

Please list below any friends, relatives, or other family members who may need to contact you while attending S.T.E.P. Court. Also, be sure to furnish the name(s) of those persons who will be providing transportation for you.

Name: _____

Address: _____

Phone Number: _____

Friend or Relative: _____

I understand that this disclosure form will remain in effect and cannot be revoked by me, until there has been a formal and effective termination from the Supervised Treatment and Education Program (S.T.E.P.).

Client

Date

Phase I

Upon acceptance into treatment, a collaborative staffing takes place which includes the primary counselor, a case manager, and a member of the Central Intake Unit. They meet to compile all information about the client and prepare their recommendation for the treatment plan which they will conjointly formulate when they meet with the client and significant others. At the first meeting with the client, all phases of treatment are explained. Because participation in outside support groups is required, AA/NA/CA/Al-Anon/Al-Ateen schedules are provided with directions for the client to attend a minimum of five meetings per week. When appropriate, referrals are made to relevant collaborating agencies (e.g., Legal Aid, HIV Consortium, Little Rock Community Medical Health Center, Dorcus House, Children and Family Services for Child Care, etc.). Numerous agencies are under contact with the S.T.E.P. Court and referral agreements have been established. Where there is an indication of more severe emotional disorders, a consultant from the Mental Health Center will assess, evaluate, and refer. The social work clinical interns, supervised by the licensed clinical social worker, are actively involved in this process.

When a client is referred to Phase I, he/she will be involved in the following activities for a minimum of three weeks:

<u>Staff Providing Service</u>	<u>Service</u>	<u>Session/Wk.hrs.</u>
Primary Counselor	Individual Counseling	2 X WK. - 1
	Group (Substance Abuse)	2 X WK. - 1.5
	Staffings	
Case Manager (Co-Counselor)	Individual CM/Referral	As Needed
	Family Counseling	1 X WK. - 1.5
	Group (General Health)	1 X WK. - 1.5
	Staffings	each week
Vocational Counselor	Staffings	each week
Certified Acupuncturist	Acupuncture	Optional

Acupuncture is available to clients during Phase I and Phase II. This procedure is used to assist in reducing drug cravings, mitigate long term withdrawal symptoms, and ease anxiety.

Approximately 35% of clients elect to utilize this component of treatment. Continued administration of acupuncture into Phase III of treatment will be considered on an individual basis. A certified acupuncturist administers all acupuncture treatment.

Random drug screenings are taken daily by one of the two drug screening technologists (one female, and one male). One random sample is submitted for testing weekly.

Bus tokens are furnished, when needed, to provide transportation. This offer continues throughout the duration of treatment.

The client will join his or her treatment team, the Program Director and Phase II Case Manager during the final Phase I staffing. Feedback is provided in regard to observed involvement in treatment as well as drug screening results and support group

attendance. If there are two negative screenings and the treatment team believes this result to be therapeutically appropriate, the client will be recommended for Phase II. One of the counselors will attend a hearing before the S.T.E.P. Court judge with the client and provide a written report. In the event drug screenings are positive, requirements for treatment participation will increase at the discretion of the treatment team. If the client continues to be resistant to investment in treatment and continues to have positive screenings, this information will be provided to the court for further direction. Graduated or other sanctions are available and may be employed by the court for serious infractions.

Phase II

When a client is referred to Phase II he/she will be involved in the following activities for a minimum of twelve weeks:

<u>Staff Providing Service</u>	<u>Service</u>	<u>Session/WK.hrs.</u>
Primary Counselor	Individual Counseling	2 X WK. - 1
	Group (Substance Abuse)	1 X WK. - 1.5
	Staffings	1 X MONTH
Case Manager (Co-Counselor)	Individual CM/Referral	As Needed
		Minimum 1 X Mo.
	Family Counseling	1 X WK. - 1.5
	Group (General Health)	1 X WK. - 1.5
	Life Skills Group	1 X WK. - 1.5
	Staffings	1 X MONTH
Vocational Counselor	Staffings	1 X MONTH
Certified Acupuncturist	Acupuncture	Optional

Whereas Phase I focuses primarily on education, breaking through denial, and providing a foundation for the treatment process, Phase II combines counseling and continuing education. This supports the client in progressively utilizing his or her own inner resources. There is a gradual evolution from a directive to a non-directive approach. This allows the S.T.E.P. Court to reduce the dependence of the client on the system for support. Phase II begins laying the groundwork for this process.

In the event that any of the weekly, random drug screenings are positive, the client and significant others will be called in for a meeting, in order to confront this situation. After input from all involved, individualized sanctions, determined by the treatment team, will be established for each client. Focus of sanctions will be on increased participation in services provided and support groups. After two successive positive screenings, the client will be referred back into Phase I to participate in all groups while continuing individual sessions with his or her relapse counselor.

During Phase II a vocational counselor begins to prepare the client for future education/employment to integrate into the treatment plan, as well as introducing and referring to appropriate other resources within the system.

Weekly social and athletic activities are provided for all clients in each phase of treatment. Phase II participants are required to participate a minimum of one time each month. These activities include picnics, playing volleyball, and visiting museums.

Phase III

When a client is referred to Phase III, he/she will be involved in the following activities for a minimum of nine months:

<u>Staff Providing Service</u>	<u>Service</u>	<u>Session/WK.Hrs.</u>
Primary Counselor/ Case Manager	Family Counseling	1 X 3 mo. - 1.5
	Relapse Prevention	1 X mo. - 1.5
	Life Skills Group	1 X WK. - 1.5
	Individual Counseling	1 X 3 mo. - 1
Vocational Counselor	A specialized program is designed by the vocational counselor with emphasis on such areas as resume preparation, interviews, job placement and retention skills training, etc.. Each client participates in 16 - 20 hours of group counseling and 1 - 2 hours of individual counseling.	
Certified Acupuncturist	Acupuncture	Optional

As each client progresses through Phase III, more emphasis is placed on vocational involvement and integration back into society. Ideally, a location separate from the S.T.E.P. Court facility will eventually be utilized.

Phase IV

After the treatment team deems it appropriate to refer the client into Phase IV (upon graduation from the treatment program) the final staffing will be scheduled. All will take part in the formulation of realistic aftercare goals. The case manager will combine relevant information from all collaborating agencies and present an evaluation of progress made toward established goals of treatment. The primary counselor, case manager, and vocational counselor, will then co-facilitate the establishment of mid and long range life goals, and the methods for goal attainment and enter into a contract with the client which specifies the number of support group meetings he/she shall attend per week. The family and/or significant others are encouraged to fully participate. The contract contains an agreement between the client and family members as to what course of action will be taken in the event abstinence is not maintained. The aftercare plan is reviewed either by phone or mail six months after graduation.

A graduation ceremony is scheduled soon after the Phase III staffing. The client's success is celebrated with each participant sharing something of significance about or with the client. A certificate of graduation is also presented. In addition, this ceremony serves as an opportunity to introduce the client to participation into the Phase IV Alumni Group.

AN EVALUATION OF ARKANSAS' DIVERSION-TREATMENT
PROGRAM FOR SUBSTANCE ABUSERS

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&

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RATIONALE FOR DRUG DIVERSION TREATMENT PROGRAMS

The impact of drug related crime and resulting criminal caseloads has been well documented across the United States during the decade of the 1980's. Federal, state and local courts, jails and prisons have witnessed rapidly increasing demands for time, space, and cost in processing drug offenders. Notionally, both the number of drug arrests and the percentage of all arrestees have increased substantially since 1985, creating enormous management and policy problems for state and federal prisons. Data from the National Institute of Justice's Drug Use Forecasting program have indicated the high rates of drug use among arrestees, with positive drug screen rates ranging from 30 to 78 percent (excluding marijuana). These rates are even higher when marijuana use is also included in the statistics.

Among the policy responses to the impacts of drug offenders have been the development of alternatives to typical adjudicative processes including the expansion of prison and jail based drug treatment, the development of boot camps, intermediate sanctions including intensive supervision probation, and the development of drug treatment

diversion programs. Considering the high cost of incarceration and the high recidivism rate of released inmates, it is reasonable to postulate that these alternatives may provide a cost effective alternative to imprisonment.

Drug diversion treatment programs offer a unique opportunity for the drug offender, as well as providing substantial relief to the judicial system. Drug offenders enrolled in diversion treatment programs benefit from the opportunity of receiving needed treatment, the opportunity to have charges expunged upon completion of treatment, and the opportunity to gain access to a variety of services through the treatment program including vocational counseling, family therapy, social services, nutritional services, and/or psychological interventions depending on the specific treatment program. Specific benefits are realized by the judicial system as well. The court system benefits by having a dispositional alternative, relieving the workload of judges, prosecutors, public defenders, law enforcement, and corrections officials.

Other benefits of drug diversion treatment programs have been recognized as well. Because of the unique marriage of court and treatment programs, clients who participate in diversion treatment programs experience the unique influence

of the active participation of the court to facilitate their successful completion of treatment.

INTRODUCTION AND OVERVIEW OF THE SIXTH JUDICIAL DISTRICT

S.T.E.P. COURT PROGRAM

The Sixth Judicial District S.T.E.P (Supervised Treatment and Education Program) Court, located in Pulaski county, Arkansas began service in June, 1994 after two years of planning, and is the first of its kind in the state of Arkansas. Modeled after treatment-diversion courts on other states (most notably the drug court in Miami, Florida) the S.T.E.P. court of Arkansas was designed to include aspects of a treatment model for drug offenders who are considered good risks for positive treatment outcomes, and also designed with organization innovations including a Central Intake Unit (CIU), and public health assessment and intervention program as part of the comprehensive treatment services provided to the drug offender-client.

The decision to develop a treatment-diversion program for drug offenders in the Sixth Judicial District of Arkansas has been the result of developing legislative policy at both the state and federal levels. At the federal level, funds were received from the Center for Substance Abuse Treatment (CSAT), the National Center for State Courts

(NCSC), the State Justice Institute (SJI), and the U.S. Dept of Justice. At the state level, assistance was provided from the former Arkansas Adult Probation Commission, Arkansas Department of Health, the Arkansas Administrative Office of the Courts, Pulaski County and the Pulaski County Sheriff's office.

The development of the S.T.E.P. court required input from a broad spectrum of individuals as well. Beginning with considerable interest and initiation of then Arkansas Chief Justice Jack Holt, initial work on the development of the S.T.E.P. court included Arkansas Governor Jim Guy Tucker, Circuit Judge John Plegge, State Senator Mike Beebe, Juvenile Judge Joyce Warren, State Drug Czar Robert Shepherd, Social Work professor Ruth Warren, criminal defense attorney Bobby McDaniel, and Director of the Administrative Office of the Courts J.D. Gingerich. As the plan for the S.T.E.P. court developed, other important contributors were included into the process including officials from the Arkansas Bureau of Alcohol and Drug Abuse Prevention (BADAP), the Arkansas Department of Health, public defenders' and prosecuting attorneys' offices within the Sixth judicial District, and area law enforcement agencies. All of these individuals and the agencies represented became essential in both the development of the

S.T.E.P. court program and in the operation of the program from both a referral, treatment, and outcome perspective.

The S.T.E.P. court was designed to target a specific subpopulation of drug offenders. Because research suggests that recovery from drug dependence/abuse is most effective in the earlier stages of dependency/abuse, and in order to balance the desire for effective treatment with the need to protect the community from violent or dangerous criminals, the target population was initially limited to include only those offenders who had been charged with possession of a controlled substance, excluding Class Y and A felonies, and possession of drug paraphernalia. While violation of either of these two statutes provided initial eligibility for admission into the S.T.E.P. court, other stipulations were initially identified including:

- 1) The offender could not be on probation for a prior felony, on parole, or have a previous suspended sentence.
- 2) The offender had not been previously convicted of a violent offense.
- 3) The offender had not been previously convicted of a weapons offense or any offense while armed with a deadly weapon.
- 4) No evidence of gang membership was present.

- 5) The offender was not charged as a juvenile.
- 6) The offender had no holds or detainers from other jurisdictions.
- 7) The offender had not previously participated in the S.T.E.P. court program.
- 8) The offender had no other pending charges.

An important innovation of the current S.T.E.P. court has been the development of the Central Intake Unit (CIU) as an initial screening unit for all potential participants. Located within the court and treatment facilities, the CIU was designed to maximize the efficiency in the referral-assessment-treatment process, and minimize the risk of participant attrition and noncompliance with court instructions. This "one-stop shopping" approach was designed to prevent clients from getting lost in the process.

The CIU typically receives referrals directly from the court on the day of the drug offender's hearing. The CIU staff then provide a comprehensive screening and assessment of each client, including a substance abuse screening (intake counselor administered selected items Addiction Severity Index, client self-administered Alcohol Dependence Scale and Drug Abuse Screening Test), a health screening, including screening for HIV, other sexually transmitted

diseases, Hepatitis B, Tuberculosis, and other disabling conditions that might interfere with the client's involvement in the S.T.E.P. court. An initial decision by the screening interviewer is then made regarding the fit of the potential client to the program. Prospective clients are subsequently fully assessed while inappropriate clients are referred back to the court of origin.

The full assessment conducted by the CIU includes an in depth interview included a full Addiction Severity Index survey administered by the CIU staff person, orientation to the S.T.E.P. court system, and an appointment is set for the client in the S.T.E.P. court if it is determined that the client is eligible to participate in the program.

DESCRIPTION OF THE TREATMENT PROGRAM

On December 3, 1993, the Arkansas Bureau of Alcohol and Drug Abuse Prevention (BADAP) advertised a notice of funding and Request For Proposal for agencies interested in providing treatment services for the S.T.E.P. court. In February 1994, a contract was granted to the 24 Hour Center of Little Rock, a nonprofit substance abuse treatment agency. The Center began providing services to the S.T.E.P. court in June, 1994 with the admission of the first client.

The S.T.E.P. court treatment was designed to follow a

four phase outline. During phase 1, typically lasting three weeks, an initial treatment plan is initiated including an intensive short-term program of individual substance abuse, family, and group counseling, frequent drug screening, attendance to court hearing(s) by the client's case manager, and intensive case staffing by the treatment team. Clients are then referred to phase 2 as determined by the treatment team. This phase is designed to last 12 weeks. Work in this phase includes continued individual, group and family counseling, continued random drug screenings, the implementation of life skills training, social and athletic activities, and continued staffing by the treatment team. Phase 3 is designed to last 9 months. During this phase, individual and family counseling occurs quarterly, drug screening monthly, life skills training monthly, relapse prevention monthly and other services provided as directed by the treatment team. Phase 4 is considered an aftercare phase after the client graduates from the step program and includes arrangements for monitoring attendance to support groups, and arrangements for peer support among graduates of the program. In addition to these phases, all clients enrolled in the first three phases of treatment are required to attend Alcoholics Anonymous/Narcotics Anonymous/Cocaine Anonymous meetings on a weekly basis.

CHARACTERISTICS OF THE CLIENT POPULATION

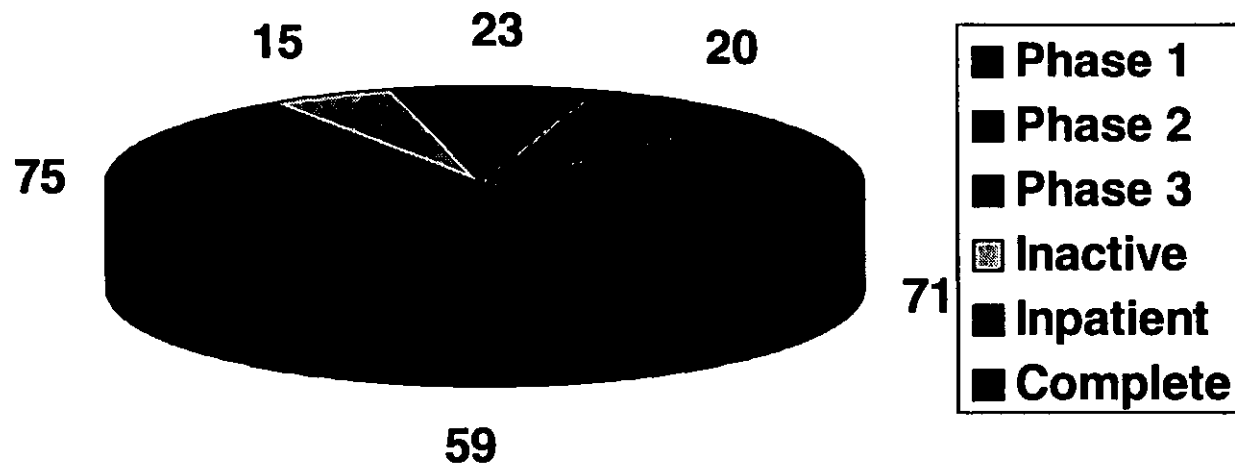
At the time of the present evaluation, The S.T.E.P. court had been in operation for 17 months, from June, 1994 through November, 1995. During that time, 452 clients had been referred to the CIU for screening and evaluation. Of those 452 potential clients, 205 clients were actively enrolled in treatment, 15 client cases were inactive, 23 clients had been referred to residential drug treatment by the treatment team, 174 clients had been referred back to circuit court, 8 clients had been remanded to municipal court, one client had expired (died), the status of 6 clients was unknown, and 20 clients had graduated the treatment program. **Figure 1** depicts the client status of the population analyzed in the present evaluation.

Clients referred to the CIU represented a wide geographic cachement, including 58 different zip code home addresses. Of these, the majority of referrals (252 or 55.7%) were for clients residing within the Little Rock city limits. 49 clients (10.8%) resided in South Pulaski County, 46 clients (10.2%) resided within the North Little Rock city limits, 22 clients (4.8%) were from the

Fig. 1

Client Enrollment in 11/95

- Phase 1=71, Phase 2=59, Phase 3=75
Inactive=15, Inpatient=23, Complete=20

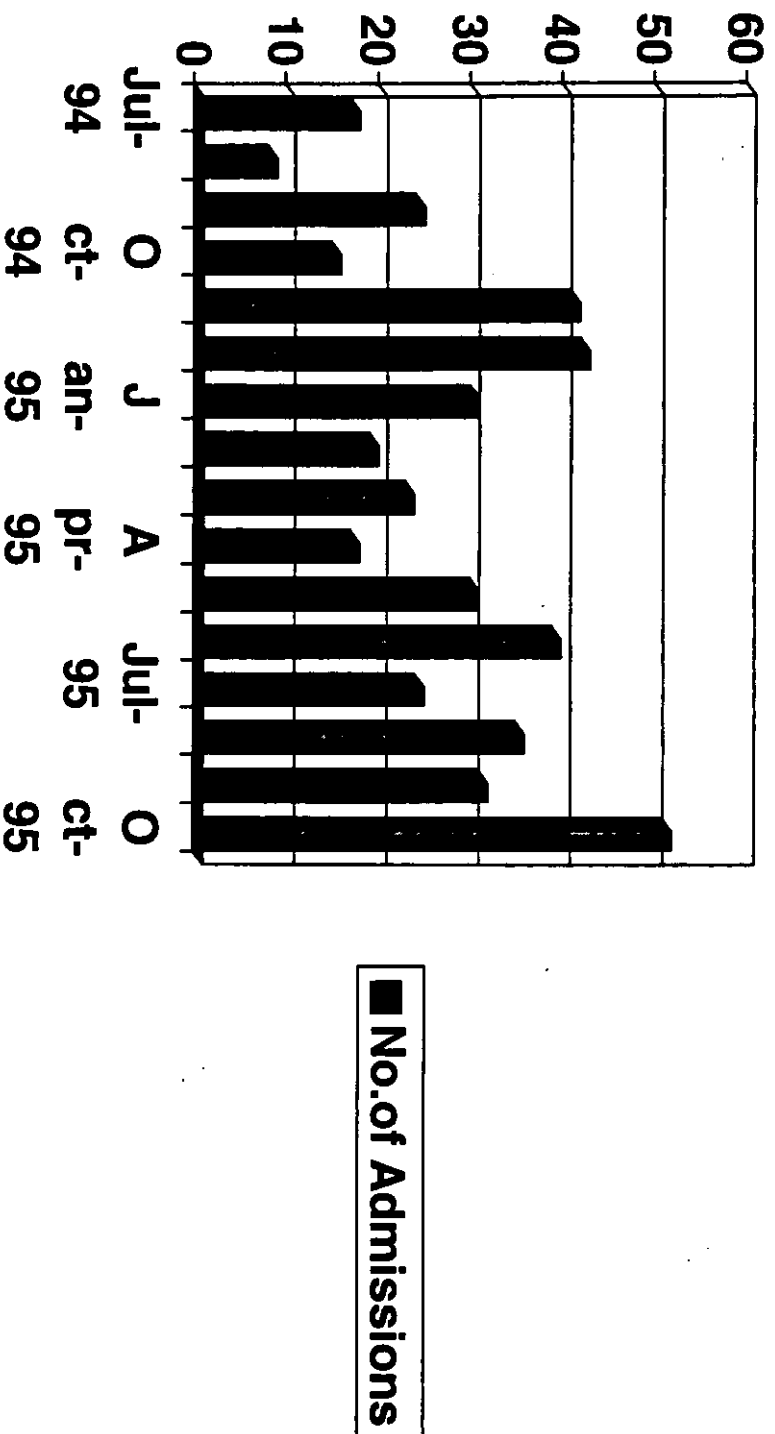


Sherwood/Jacksonville area, 12 clients (2.6%) were from Maumelle, and the remaining 71 clients (15.7%) provided home addresses from outlying areas (two were out of state).

The client referral base consisted primarily of caucasian and African Americans, although one client referred was Hispanic. At the time of the evaluation, 255 (56.4%) African American had been referred to the CIU, compared with 185 (40.9%) caucasian offenders. Of the African American offenders, 174 were male and 81 were female. Of the caucasian offenders, 119 were male while 66 were female. The race of 11 (2.4%) of the clients was not provided.

Referrals to the CIU varied from month to month ranging from a low of 8 referrals for the month of August, 1994 to a high of 51 referrals for the month of September, 1995. The average number of referrals for the evaluation period was 26.2 per month and monthly referrals are depicted in **Figure 2**. A significant increase in the average monthly referrals (from 16 per month to 31.8 per month) were noted after October, 1994 when the S.T.E.P. court produced and distributed brochures to specific target populations including the public defenders office, jailhouses, courthouses and other relevant sites.

Fig. 2 Admission Rate by Month



Mean age and standard deviations of clients by race and sex are depicted in **Figure 3**. A review of this figure reveals that referred clients represented a broad range of ages, and that these ranges did not differ significantly by race of sex. A slight trend was noted, however, in that African American clients tended to be slightly older, when compared to caucasian clients.

The marital status of clients by race and sex are depicted in **Figure 4**. Of the 255 African American clients, 168 (65.9%) were single, 59 (23.1%) were married, 6 (2.4%) were divorced, and 22 (8.6%) reported no status. Of the 185 White clients, 110 (59.5%) were single, 55 (29.7%) were married, 11 (6.0%) were divorced, 1 (.5%) was widowed, and 8 (4.3%) reported no status. The one Hispanic client was single. Chi-square test of independence was not statistically significant; therefore, marital status between African Americans and Whites was not substantially different.

Clients were referred to the S.T.E.P. court for a variety of offenses. Considerable variability in the number of counts charged to each client was observed with a mean number of charges observed to be 1.75 counts per client. The distribution of number of charges are depicted in **Figure 5**. The following table (**Table 1**) summarizes the type(s),

Fig. 3
Age by Race and Sex

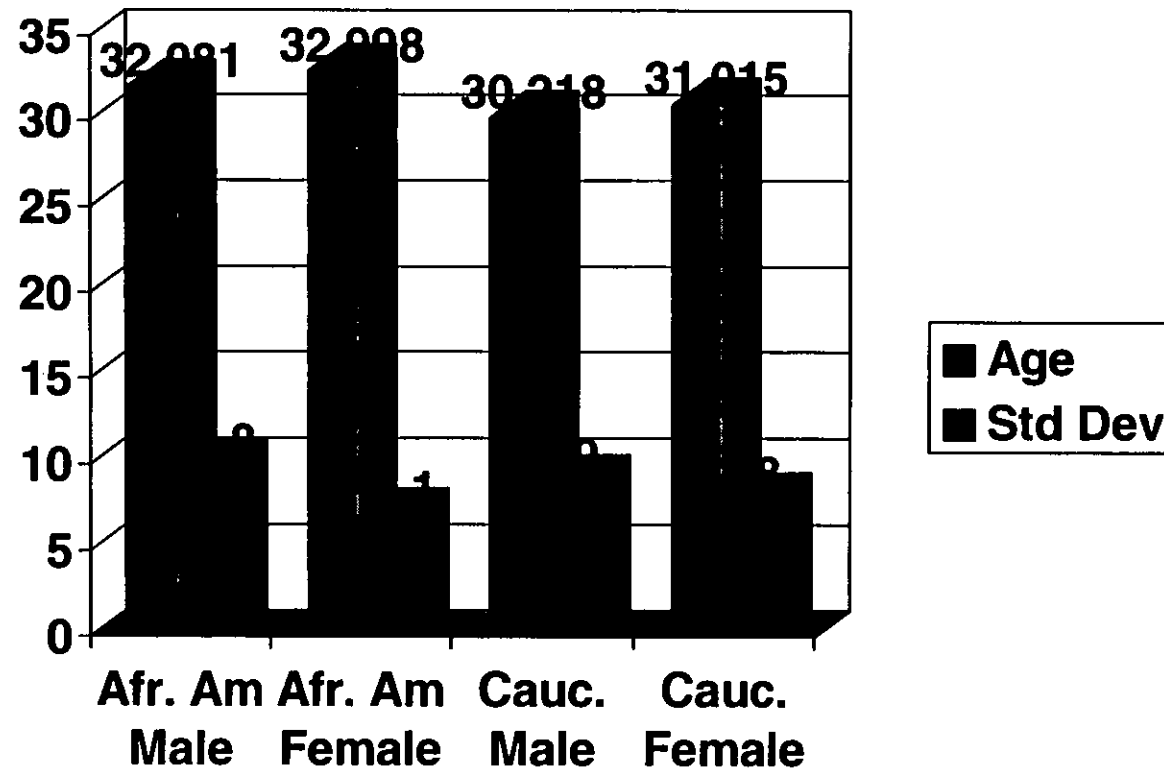
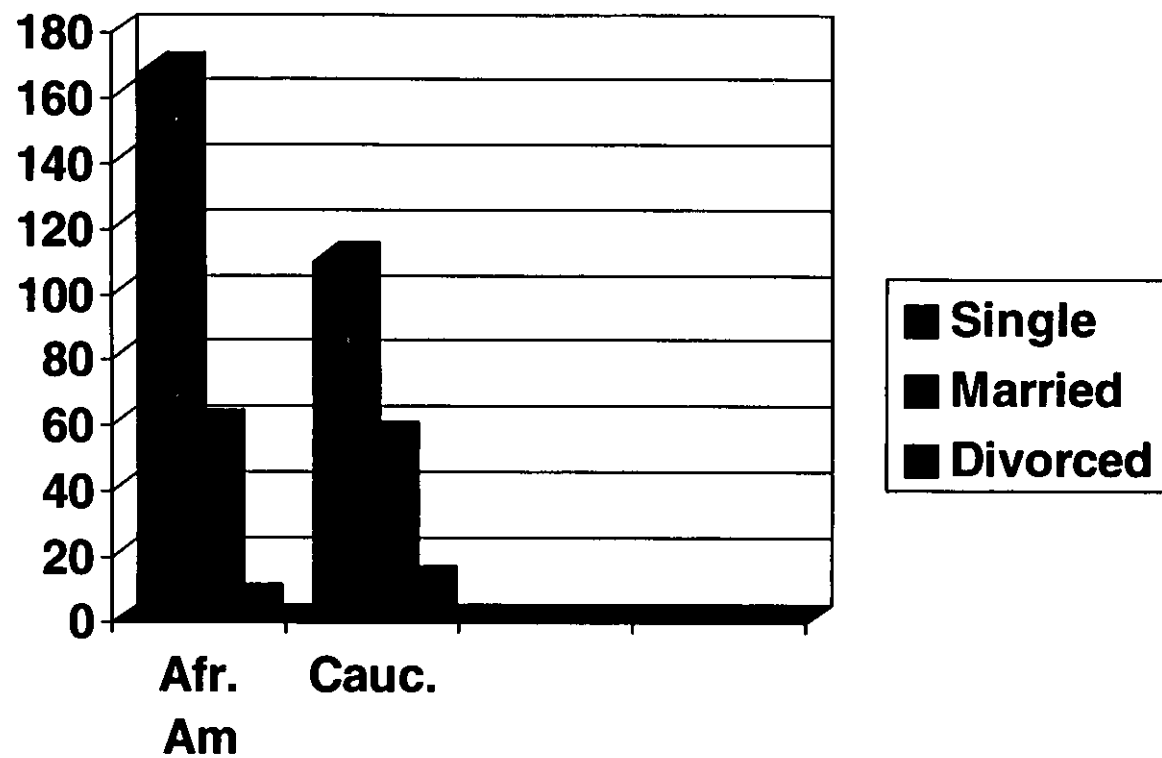


Fig. 4
Marital Status by Race



frequencies, and percentages of offenses observed for the evaluated client population:

Table 1

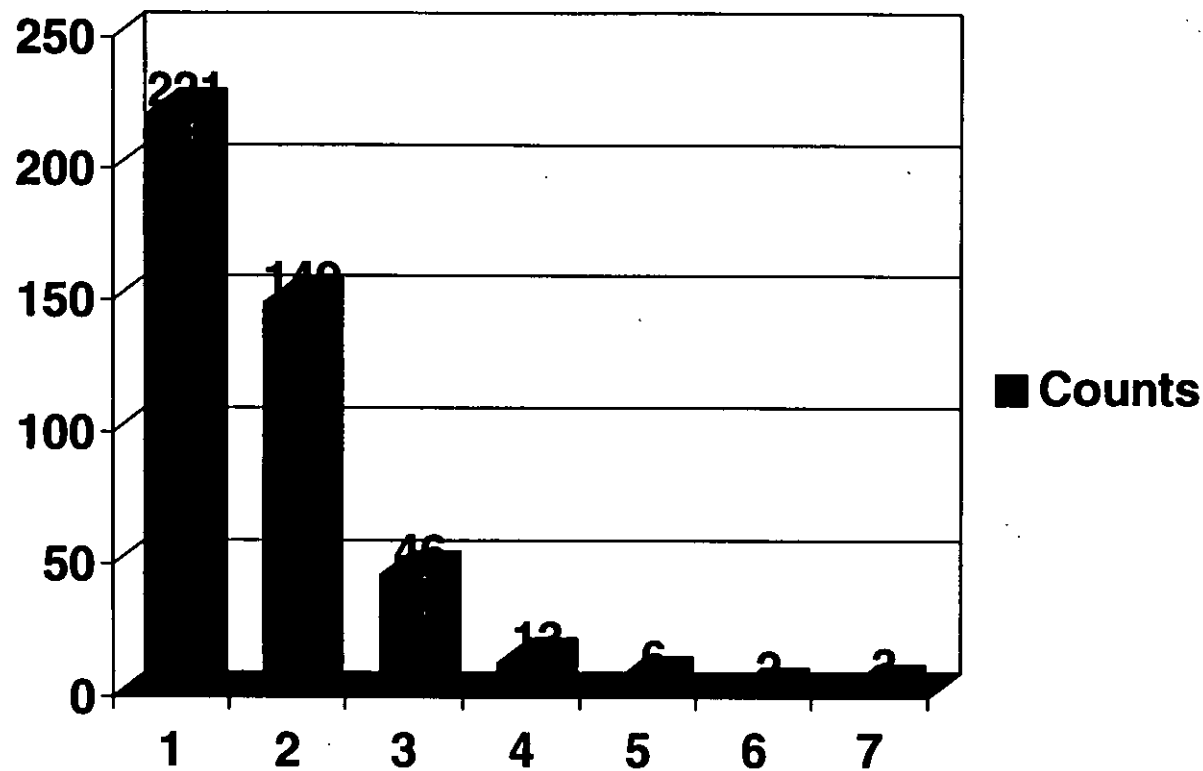
Type of Offense, Frequency, Percent and Cumulative Percent of Clients Referred for Evaluation by the S.T.E.P. Court

<u>Type of offense</u>	<u>Freq.</u>	<u>Perc.</u>	<u>Cum. Perc.</u>
A Felony	1	0.2%	0.2%
A Felony, A Misd.	1	0.2%	0.4%
A Misd.	25	5.5%	5.9%
A Misd., C Misd.	10	2.2%	8.1%
B Felony	1	0.2%	8.3%
C Felony	242	53.5%	61.9%
Mult. Charges C ¹	109	24.1%	86.0%
C Misd.	3	0.7%	86.7%
D Felony	46	10.2%	96.9%
Mult. Charges D ²	4	0.9%	97.8%
Y Felony	2	0.4%	98.2%
Charge Unknown	9	1.8%	100%

¹Multiple charges with a C Felony primary charge.

²Multiple charges with a D Felony primary charge.

Fig. 5
Number of Charges Filed for
Each Client upon Admission



ANALYSES OF THE TREATMENT PROGRAM

S.T.E.P. court clients were interviewed at various points during the treatment process in order to collect client information independently from information collected from the treatment program itself. A representative sample of 26 clients were interviewed. When asked about the positive aspects of the treatment program, several common aspects of the program were identified including legal aspects, personal aspects, and treatment aspects. Many of the interviewees noted that the most important advantage of participating in the S.T.E.P. treatment was the opportunity to have their records expunged. Another common opinion was that the diversion of their case was appropriate because it was felt that the clients were not "real" criminals, allowing the courts to spend time pursuing other offenders.

The treatment program was noted to generate many personal advantages. These included the feeling that clients were able to work out their problems for the first time. Clients often noted that although their drug use history was extensive, they had never been enrolled in a drug treatment program before being enrolled in the S.T.E.P. court. The

opportunity to gain the understanding that other people had similar problems and experiences was also a common sentiment. Several clients noted that the treatment provided an opportunity to understand the relationship between their feelings, their thinking and their drug use, while others noted that their drug problems were caused by underlying personal problems that they were able to work on.

The clients frequently noted that the treatment counselors themselves were an essential part of the positive aspects of their treatment. Treatment counselors were characterized as available, accessible, concerned, and respectful of the clients and their personal problems. Many of the clients noted that the counselors were personally involved, that the counselors were focused on the success of the clients, and that the counselors often had personal experiences with drug abuse problems themselves.

Clients noted several problems that interfered with optimal treatment response including programmatic and treatment issues. Many clients noted that the treatment staff did not appear to differentiate between clients who were committed to treatment and those who were not committed. These complaints included the lack of sanctions enforcement and the apparent use of alcohol by some of the clients without an appropriate staff response to this type

of substance abuse. Clients also noted that the treatment schedule was too rigid, particularly for those participants who worked full-time. Several clients who had graduated to phase 3 of their treatment noted that this phase was not structured enough and led to stagnation and relapse.

Clients also noted that various aspects of the treatment were not helpful. Vocational education classes and groups were commonly noted to be useless by some of the clients. Another common complaint about the treatment was that it was not individualized enough, or that not enough time was allocated to the discussion of personal issues.

DRUG SCREEN DATA

Data from 1836 drug screens were analyzed to reveal the frequencies and percent positive rates for the clients enrolled in treatment at the time of the evaluation. Drug screens were assigned serial positions to compare drug screens representing equivalent time in treatment across all subjects. A comparison of 1st, 12th, and 25th drug screens, roughly corresponding to phases 1, 2, and 3, for each of the five drugs tested is depicted in **Figure 6**. This graph demonstrates the decline in percent positive screens during mid treatment, but an increase in percent positivity for clients reaching the latter stages of treatment. A summary of this data is depicted in **Table 2**.

Fig. 6
Comparison of percent positive
drug screens

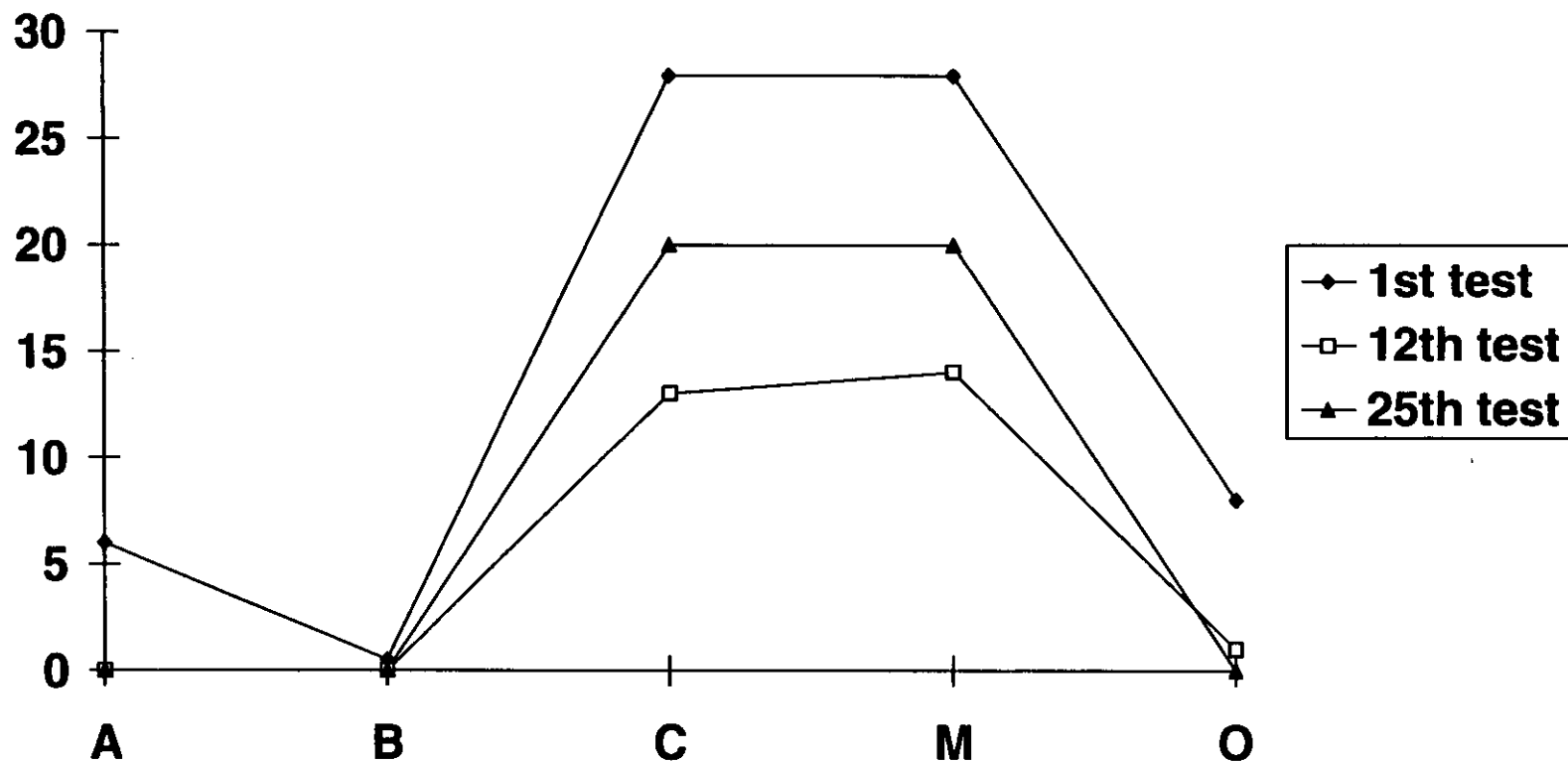


Table 2

Frequencies and Percent Positive Rates for Drugs Screened:
Serial Urinalyses 1 through 25

<u>Scr#(n)</u>	<u>Amphet</u> <u>Freq %</u>		<u>Barbit</u> <u>Freq %</u>		<u>Cocaine</u> <u>Freq %</u>		<u>Marij</u> <u>Freq %</u>		<u>Opiate</u> <u>Freq %</u>	
1 (202)	13	6	1	0.5	57	28	53	26	8	4
2 (168)	9	6	2	1	40	24	46	27	7	4
3 (143)	4	3	2	1	31	22	34	24	5	3
4 (135)	4	3	1	1	34	25	35	26	4	3
5 (127)	4	3	1	1	24	19	29	23	2	2
6 (117)	3	3	0	0	23	20	29	25	3	3
7 (111)	3	3	0	0	19	17	23	21	2	2
8 (101)	2	2	0	0	18	18	22	22	3	3
9 (92)	3	3	0	0	12	13	15	16	3	3
10 (81)	2	2	0	0	15	19	14	17	0	0
11 (76)	2	3	0	0	8	11	13	17	0	0
12 (68)	1	1	0	0	9	13	14	21	1	1
13 (59)	1	2	1	2	11	19	12	20	2	3
14 (53)	1	2	0	0	11	21	11	21	0	0
15 (48)	0	0	1	2	9	19	7	15	0	0
16 (42)	1	2	1	2	4	10	9	21	0	0
17 (38)	0	0	1	3	5	13	7	18	0	0
18 (33)	3	9	0	0	2	6	5	15	0	0
19 (23)	1	4	0	0	5	22	4	17	0	0
20 (21)	1	5	0	0	6	29	3	14	0	0
21 (19)	1	5	0	0	3	16	1	5	0	0
22 (17)	1	6	0	0	2	12	2	12	0	0
23 (14)	1	7	0	0	2	14	2	14	0	0
24 (10)	1	10	0	0	3	30	2	20	0	0
25 (10)	1	10	0	0	2	20	2	20	0	0

To further clarify these trends in drug screen positive rates, the urinalysis data was grouped by frequency of use to compare low frequency used drugs (amphetamines, barbiturates, and opiates) and high frequency drugs (cocaine and marijuana). The relative percent positivity of these groups are depicted in **Figure 7** and **Figure 8** respectively.

Fig. 7
Drug Screen Positive Rates:
Low Use Drugs

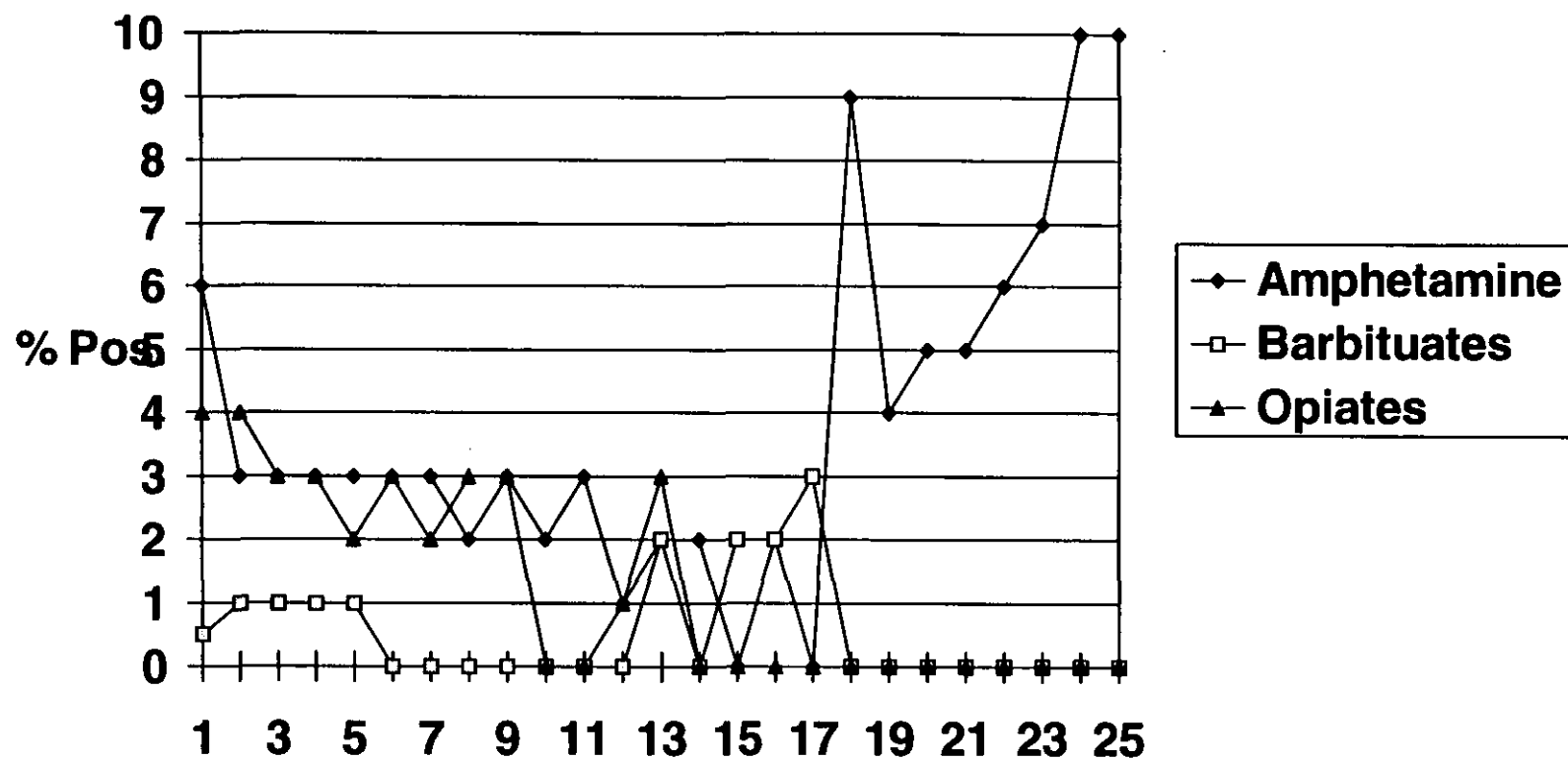
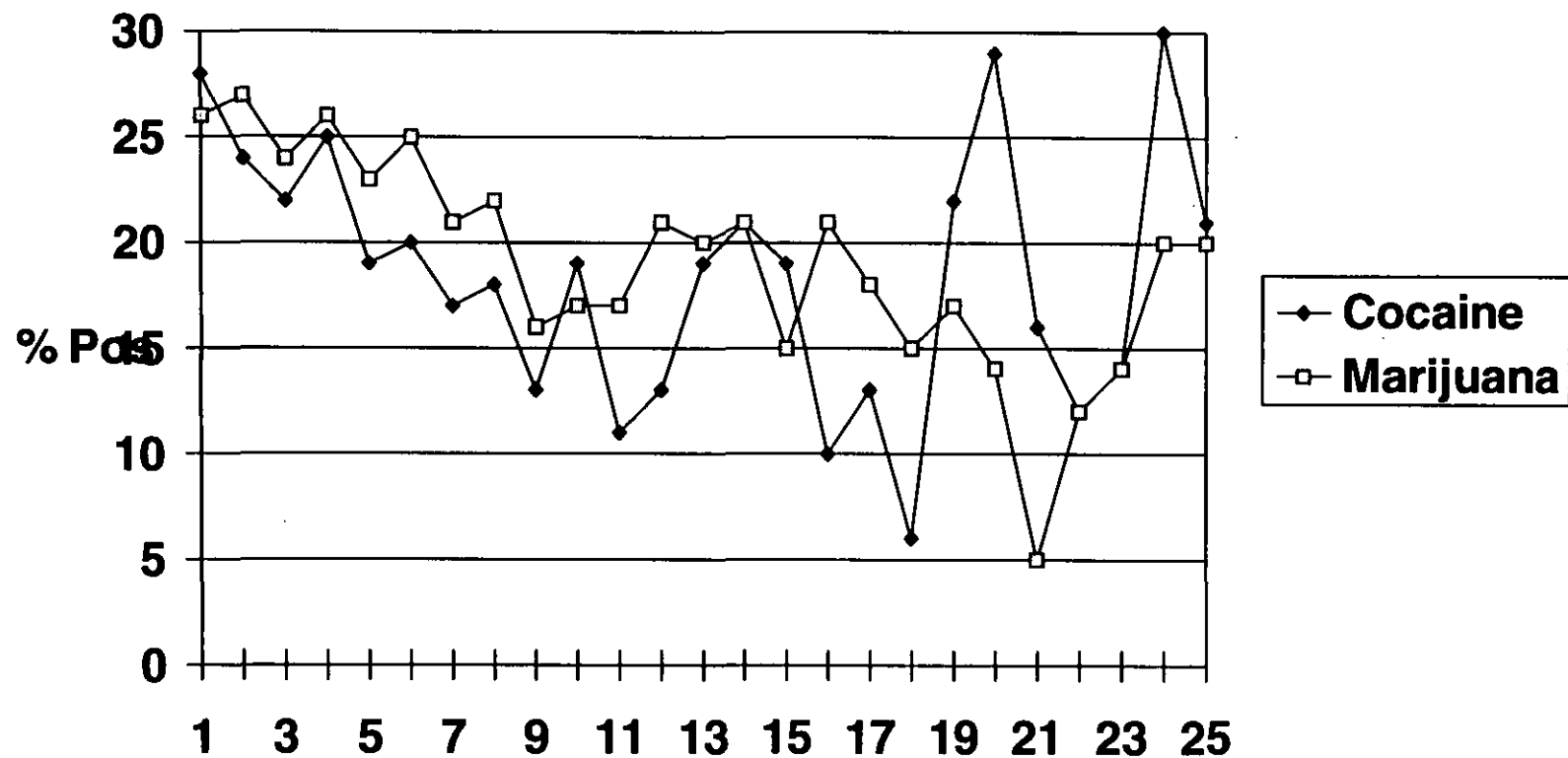


Fig. 8
Percent Positive Drug Screen:
High Use Drugs



STATISTICAL ANALYSES

In order to determine the characteristics of successful outcome (treatment completed) versus unsuccessful outcome (returned to circuit court), only those clients with known disposition were included in the following analyses. From the original sample of 452 clients, 203 were designated as having completed treatment (n=20, 10.0%) or as having been referred to circuit court for sentencing (n=183, 90%). The one Hispanic client referred to circuit court was not included in the analyses because his ethnicity would be considered as an outlier in the data. Given that such a small proportion of clients actually completed treatment, these results should be interpreted cautiously and are to be used only in providing a basis for treatment recommendations. Inferences regarding demographic and treatment variables are speculative only.

Demographic Variables

The demographic characteristics of the 202 clients with known disposition were as follows. There were 122 (60.4%) African Americans, 69 (34.2%) Whites, and 11 (5.4%) unspecified ethnicity. Average age for African Americans was 31.6 years (sd=8.32) whereas average age for Whites was 28.5 years (sd=7.70). By gender, 126 (62.4%) were male, 65 (32.2%) were female, and 11 (5.4%) were unspecified.

Of the 122 African American clients, 74 (60.6%) were single,

30 (24.6%) were married, 2 (1.6%) were divorced, and 16 (13.2%) were unspecified. Of the 69 White clients, 40 (58.0%) were single, 18 (26.1%) were married, 4 (5.8%) were divorced, and 7 (10.1%) were unspecified. Chi-square analysis revealed that African Americans and Whites did not differ significantly according to marital status.

Variables of Affecting Treatment Status

Three basic analyses were conducted to determine which, if any, demographic variables predicted successful or unsuccessful outcome. First, chi-square analyses were conducted to determine if membership in categories of ethnicity, gender, marital status, and type of offense were associated with clients' outcome in the program. Second, a linear multiple regression was conducted to determine if ethnicity, gender, marital status, type of offense, age, and number of counts were significantly correlated with the length of time a client remained in the program. Finally, a logistic regression was conducted to determine which combination of the above mentioned variables best predicted either completion of treatment or return to circuit court.

Chi-Square Analyses (Table 3). Separate chi-square tests of independence were conducted on Ethnicity, Gender, Ethnicity-Gender, Marital Status, and Type of Offense, with Frequency of Outcome Status used to measure association.

Table 3

Frequency and Chi-Square Analysis of Demographic Variables
by Outcome.

Category		Frequency*		X ²	p
		TC	FCC		
Ethnicity	Afr.Amer.	7	114	7.95	.005
	White	13	56		
Gender	Female	4	16	1.22	.270
	Male	16	111		
Ethnicity	AA, F	1	38	10.13	.018
	X AA, M	6	76		
Gender	W, F	3	22		
	W, M	10	34		
Marital	Single	13	102	.17	.917
	Married	6	42		
	Divorced	1	5		
Offense	Felony	19	158	1.37	.242
	Misdemean	1	24		

* TC = treatment completed (successful)

FCC = returned to circuit court (unsuccessful)

The results of the chi-square analyses are as follows:

1. Results of Ethnicity X Outcome indicated that outcome status differed significantly between African Americans and Whites, therefore African Americans were less likely to complete the program than were Whites.

2. Results of Gender X Outcome were not statistically significant, thus women were no more likely to complete the program than were men.

3. Results of Gender-Ethnicity X Outcome indicated that outcome status differed significantly among the four groups. White males were more likely to complete treatment than were White females and African American males and females.

4. Marital status was not significantly associated with outcome according to the Marital Status X Outcome analysis. Single clients were no more likely to complete treatment than were married or divorced clients.

5. Results of the Offense Type X Outcome was not statistically significant, thus indicating that clients with felonies were no more likely than clients with misdemeanors to complete the program. It should be noted, however, that only 1 out of 25 clients with misdemeanor offenses (without felony offense) successfully completed treatment, whereas the other 24 did not complete treatment.

Linear Regression Analysis (Table 4).

A linear regression model was built to determine if the number of months a client remained in the program was influenced by such variables as age, number of counts at arrest, type of offense (misdemeanor or felony), the percent of positive marijuana and cocaine screens, gender, ethnicity, and marital status.

Table 4

Linear Regression in Predicting Length of Stay in Treatment
with Best Predictors entered into the Model

Variable	B	p
Constant	8.375	.000
Counts	-0.872	.071
Cocaine Pos.	-1.867	.156

When each variable was entered into the model separately, only the number of counts and the percent of positive cocaine screens were significantly correlated with the length of time spent in the program. The fact that the coefficients (B) were negative indicated that counts and positive cocaine screens were inversely related to length of time in the program. That is, as the number of counts and/or the number of positive cocaine screens increased, the length of time spent in the program decreased. However, when the amount of variance is viewed, that is, the amount of variation in length of time spent in treatment that can be accounted for by variation in the number of counts and cocaine positive screens, only approximately 7% of the variance is explained, thereby leaving 93% of the variation in length of stay unexplained.

When all of the variables are entered into the model, the

magnitude of explained variance increased to approximately 11%; however, the number of counts and percent of positive cocaine screens were no longer significant, probably because they were somewhat correlated with one or more of the other predictors.

Logistic Regression Analysis (Table 5).

In order to estimate which demographic and treatment variables predict either completion of treatment or return to circuit court, a logistic regression analysis was conducted. The variables used in this prediction were gender X ethnicity (African American female, White female, etc.), age, marital status, counts, type of offense, and the ratio of positives (presence of drug) to total number of screens for marijuana and cocaine. These two drugs were used since they were by far the most prevalent source of positive drug screens. The frequencies of the other drugs were too small to provide any predictive value in the model. In addition, clients having an missing data on the predictor variables were dropped in order to maximize the accuracy of the model. This resulted in a drop from 202 clients with known outcomes to 91 clients without missing data. All 20 (22.0%) clients who completed treatment were retained which left 71 (88.0%) clients who were returned to circuit court. In the analysis, each variable was entered as a single predictor, and those which were statistically significant were kept for entry into the final model.

Table 5

Logistic Regression in Predicting Outcome Status.

Variable	B	Wald	p	R ²
Gender X Race				
Afr.Amer. female	2.65	5.35	.021	.040
Afr.Amer. male	1.66	6.49	.011	.054
White female	1.04	1.59	.207	.000
Marijuana Pos.	1.58	2.93	.087	.011
Offense Type	1.49	1.73	.189	.000

Classification Rates of the Model.

Predicted by Model			
	Completed Treatment	Return to Court	Percent Correct
Completed Treatment	8*	12	40.00%
Actual			
Return to Court	5	66*	92.96%
		Overall	81.32%

* Indicates "hit"

Results of the regression indicated that the variables accounting for most of the predictive accuracy were African American males,

African American females, and the presence of marijuana in drug screens. In other words, the presence of these three variables indicated a high likelihood that the client would drop out of the program. In terms of predictive accuracy, the model correctly classified 8 of 20 (40%) clients who completed the program, and correctly identified 66 of 71 (93%) clients who were returned to circuit court; therefore, overall the model accurately identified 74 of 91 clients (81.3%).

Two cautionary statements should be noted. First, this model was developed only on 91 of 202 clients with known outcomes, and of these 91, only 20 successfully completed the program; therefore, the unbalanced ration of completions to drop out will skew the data so that the model better predicts failure. Second, although the model appeared to have a fairly high degree of accuracy, it only accounted for about 10% of the variance, which means that there are other latent factors that have a substantial influence on successful or unsuccessful outcome.

Brief Summary of Analyses

Based on the above chi-square and regression analyses, some general findings should be mentioned:

1. A consistent finding in both the chi-square tests and the logistic regression analysis was that African American males and females are more likely than Whites to return to circuit court rather than to complete the program. This difference is not

substantial in terms of likelihood or probability, but is consistent nonetheless. The reason why this occurred is unclear. Perhaps other unanalyzed factors that are inherently different between the groups have significant contribution in the model. These could be such variables as socioeconomic status, occupational status, relationship with treatment staff and counselors, or environmental differences.

2. Although not statistically significant in the chi-square test, 24 of 25 clients with misdemeanor charges only (no felony charges) were returned to circuit court. The reason is perhaps that the implications of having a misdemeanor on one's record may not outweigh the rigors of remaining in treatment for a year or more. The social stigma and sanctions of a misdemeanor are not as great as that of a felony charge.

3. The number of positive drug screens for marijuana was a significant predictor of returning to circuit court in the logistic regression model, while cocaine was significant in predicting the length of stay in the program in the linear regression model. Based on these findings, a conservative statement would be that the continued use of these two drugs is associated with a high likelihood of failure.

4. The fewer the number of counts at arrest was at best a fair predictor of longer stay in the program. Perhaps the number of counts at arrest are indicative of the severity of substance abuse.

Counterintuitively, it would seem that because the severity of the penalty increases as the number of counts increase, the client would view the option of entering the STEP program more favorably and would be more likely to stay than someone with less potential penalty; however, this did not appear in the results.

RECOMMENDATIONS

The following recommendations are based upon the analysis of the data and the interviews with clients. Again, because the data are incomplete, especially with such limited number of successful cases, we caution that these analyses should be viewed conservatively and are to be used only for recommendations to the program.

1. The presence of multiple positive drug screens for marijuana and cocaine were associated with failure in the program. Stricter sanctions or closer supervision of clients with positive screens during Phase 1 in effect cause these clients to drop from the program early before they have adequately come to terms with the extent and pervasiveness of their drug dependency problems.
2. The increase in percent positive drug screens for cocaine and marijuana for clients when phase 2 and phase 3 are compared suggests limited effectiveness of phase 3 as a maintenance phase of drug abstinence. It is noted that treatment focus on relapse prevention does not occur until phase 3. It is recommended that relapse prevention work begin much earlier in treatment.

3. Failure to abstain from drug use during phase 3 should result in demotion to phase 2 treatment. Subsequent positive drug screens should result in sanctions including the possibility that the client is dropped from the program.

4. The unmonitored use of alcohol as a drug by the clients is problematic. It is recommended that the Treatment program obtain a breathalyzer or some other alcohol monitoring device to screen clients for alcohol intoxication when they attend on site treatment.

5. Ethnicity appeared to be an influential variable in outcome in two different analyses, albeit that these data are not complete, especially for clients successfully completing the program. The fact that ethnicity appeared to be a predictor of outcome, particularly that African American clients tended to drop out more than Whites, could be attributed to other demographic variables that were not provided. In particular, could socioeconomic status, occupational status, level of family involvement, or educational attainment have accounted for the difference in the two groups? Further evaluations would need to include more comprehensive demographic data such as specified above.

6. A second, perhaps unrelated association of ethnicity with outcome could be related to client-counselor dynamics. Are there underlying issues between clients and counselors of same ethnicity versus clients and counselors of different ethnicity? This has been shown to have some negative impact on successful outcome in other counseling contexts, and there is no reason to assume that it would differ in this setting.

7. Given that 24 of 25 clients with misdemeanors only did not complete the program, these clients are probably not appropriate for the STEP program. In all likelihood, the penalty and resulting social stigma/implications of having a misdemeanor on record do not outweigh the rigors required to complete the program and have one's record expunged. An alternative may be to provide a less stringent treatment option for misdemeanor offenders.

8. Another limitation of the evaluation was due to inconsistencies and omissions in the data that was collected by the CIU and treatment staff. In particular the format provided by the MIS utilized text entry for the majority of data allowing treatment staff to enter information in less than optimally consistent ways. For example, arrest data was often confusing, incomplete, and arbitrary in nature. Although the MIS was designed to allow ease of access and tracking of clients without complex analyses, this

type of data format is not as efficient for more detailed statistical analyses. Consideration should be given to modifying the MIS to allow more sophisticated data analysis for future evaluations.

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