

Advancing justice by giving African Americans a voice in drug court: Program evaluation through a culturally-informed lens

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Presentation Objectives

- ① Objective 1: Synthesize the history of racial inequality in criminal justice and the role of drug courts in reducing disparities in outcomes.
- ② Objective 2: Compare and contrast African American participants' experiences in drug court to assess the factors that may contribute to disparities in graduation rates.
- ③ Objective 3: Comprehend how qualitative research methods can be incorporated into program evaluations to develop an in-depth understanding of drug court from the lived experiences of African Americans.



Defining Drug Courts: The Key Components

(National Association of Drug Court Professionals, 2004)

1. Drug courts integrate alcohol and other drug treatment services with the justice system case processing
2. Using a nonadversarial approach, prosecution and defense counsel promote public safety while protecting participants' due process rights
3. Eligible participants are identified early and promptly placed in the drug court program
4. Drug courts provide access to a continuum of alcohol, drug, and other related treatment and rehabilitation services
5. Abstinence is monitored by frequent alcohol and other drug testing



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6. A coordinated strategy governs drug court responses to participants' compliance
7. Ongoing judicial interaction with each drug court participant is essential
8. Monitoring and evaluation measure the achievement of program goals and gauge effectiveness
9. Continuing interdisciplinary education promotes effective drug court planning, implementation, and operation
10. Forging partnerships among drug courts, public agencies, and community-based organizations generates local support and enhances drug court program effectiveness



Literature Review

- ⊙ Drug courts appear to effectively reduce criminal recidivism (Gallagher et al., 2014; Gallagher et al., 2015); however, some studies suggest that racial disparities exist in drug court outcomes (Gallagher, 2013a; Gallagher, 2013b).
- ⊙ Gallagher (2013a) analyzed records of 376 drug court participants in urban Texas and found that 65% of white participants graduated compared to 52% of Hispanic and only 45% of African American participants.
- ⊙ Dannerbeck et al. (2006) analyzed data from 10 Missouri drug courts. They extracted data from the records of 657 participants from 10 courts to test hypotheses related to racial disparities in drug court outcomes. They found a significant difference in drug court outcomes; specifically, 55% of white participants and only 28% of African Americans graduated the program.



Justification for this Study

- ⦿ Drug court literature consists predominately of program evaluations using quantitative methods to predict graduation and recidivism outcomes. Studies using qualitative methods to evaluate drug courts are less common, and there are only a few studies (Gallagher, 2013b; Gallagher & Nordberg, 2016) that have used qualitative methods to explore the factors that may contribute to racial disparities in drug court outcomes.
- ⦿ This study contributes to the drug court literature by using qualitative methods to compare and contrast the lived experiences of African American participants for the purpose of offering insight into the factors that may contribute to racial disparities in drug court outcomes.



Methodology

- ⦿ What are the factors that may contribute to African Americans graduating from drug court at a lower rate than their Caucasian counterparts?
- ⦿ Phenomenology is recommended when you have a research sample with similar characteristics, such as being African American and a drug court participant (Padgett, 2008).
- ⦿ This study is a qualitative meta-synthesis of previous work that collected data on African Americans' views on drug court. Qualitative meta-synthesis is an approach to combine, analyze, and summarize findings from multiple qualitative studies in order to provide in-depth answers to research questions (Major & Savin-Baden, 2010).



Methodology

- ⊙ Data collected from African American drug court participants in four studies were combined and a new analysis was completed.
- ⊙ First, in 2011, African American participants ($n = 14$) in the Tarrant County (Fort Worth), Texas, drug court participated in individual interviews (Gallagher, 2013b).
- ⊙ Second, in 2013, African American participants ($n = 16$) in the St. Joseph County (South Bend), Indiana, drug court participated in individual interviews (Gallagher & Nordberg, 2016).



Methodology

- ⊙ Third, in 2015, African American participants ($n = 9$) in the St. Joseph County (South Bend), Indiana, drug court completed the *Drug Court Participant Satisfaction Survey* (Gallagher, Nordberg, & Lefebvre, 2017).
- ⊙ Fourth, in 2016, African American participants ($n = 31$) in the Gary City, Indiana, drug court completed the *Drug Court Participant Satisfaction Survey* (Gallagher & Wahler, in press).
- ⊙ The total sample size for this qualitative meta-synthesis was 70.



Findings

- ◎ Many African Americans had favorable views toward key components of the drug court model. Specifically, they felt that submitting frequent and random drug screens and having frequent contact with the judge supported them in graduating.
- ◎ Conversely, most African Americans had unfavorable views toward their counselors and the quality of treatment they received for their substance use disorders; felt they were not receiving individualized treatment, particularly treatment for mental health symptoms; and felt that drug court did not support them in developing sustainable, career-oriented employment.



Key Components 5 and 7 Support African Americans in Graduating

- ◎ The drug tests in drug court are really good because they deter you from getting high, even using alcohol. They have this new test called an EtG [ethyl glucuronide] that can detect alcohol for a few days, not just a couple hours. The beginning of drug court was tough because I still had cravings, but I got tested at least twice a week and the days were random, so that deterred me from using. After a while, I wasn't having that many cravings and it got easier.



Key Components 5 and 7 Support African Americans in Graduating

- ◎ The judge is what motivates me to graduate; she really cares about me and my children. This is not what I expected from a judge. I did not expect for her to get to know me on a personal level. I look forward to seeing her each week and sharing all the good stuff I am doing with my life now. She is so caring and kind, and people like me who are suffering from addictions need someone like her to motivate us and tell us that we can do it because she did it herself.



An Uneasy Relationship Exists Between African Americans and Treatment Providers

- ⊙ I have no respect for the counselors because they judge us and label us *addicts*. One of the counselors even told me that he would not move me to the next phase of treatment until I admit I am an *addict* and in denial or something like that. I see the word *addict* as a derogatory term, and I will not subject myself to their judgments and labels.



An Uneasy Relationship Exists Between African Americans and Treatment Providers

- ⊙ I relapsed once while in drug court, but the judge didn't know about it because they didn't pick it up on the drop [urine drug screen], but it wasn't something I wanted to do, so I discussed it in group. Our counselors always talk about being honest, and honesty is the key to recovery and nonsense like that. So I went to group, was honest about my relapse, and then the counselor called my case manager, snitched on me, and I went to jail. Honesty is not part of my recovery, and I can speak for all of us: all we do is lie to the counselors and tell them what they want to hear because no one wants to go to jail.



An Uneasy Relationship Exists Between African Americans and Treatment Providers

- ⊙ I feel that I won't graduate drug court because I am not receiving good treatment. I have a really serious addiction to heroin. I think about it all the time and constantly obsess about using, but I don't want to get high in my heart, but my mind does. If I do relapse, I have no one to talk with it about, not even the therapists, because if I tell them, they will tell drug court and I will go on sanctions. It's a real shame because we need a safe place to talk about the challenges we are experiencing, and a safe place to treat our addictions, but this court doesn't have that.



An Uneasy Relationship Exists Between African Americans and Treatment Providers

- ⊙ The drug court can be improved by sending us to treatment centers that treat us with respect and actually care about us. I tell you, the counselors are more strict than the judge. They threaten us and give us ultimatums, and if we don't do what they say, they will tell our PO [probation officer] and we go to jail for a weekend or have to do community service. See, the counselors tell us to participate in group, and if we don't, they say they will tell the court we are noncompliant. They make us restart the IOP [intensive outpatient program] if we relapse, without ever giving us a chance to explain why we relapsed. If we miss a 12-step meeting, even because we were working, they threaten to tell the drug court we are noncompliant.

Ψ Treatment is more of a stress for me than help.

Individualized and Mental Health Needs of African Americans are not Being Met

- ◎ Most of my childhood I was abused by my father and I smoked weed at the time to cope with it. The weed like numbed the feelings and made me less angry. Then I started drinking all the time and things got really bad in my life. I'd like to discuss the trauma with someone, but the counselors say I have to do group therapy and to bring it up there. I do not feel comfortable sharing how my dad hit me and my mom and my brothers with a group of people I don't know. It's a private matter that I would like to discuss privately with a counselor, but they said no.



Individualized and Mental Health Needs of African Americans are not Being Met

- ⦿ I have depression and that is why I get high. Even at my assessment, the counselor said I had symptoms of depression and she would work with me on treating it while I was also attending the addiction groups. She met with me one time and told me to talk with my doctor about an antidepressant and to read some handouts on depression. That's it, one time she met with me individually to treat my depression, and what am I going to do, complain? I can't complain; all the drug court would make me do is go to another agency for treatment and I'd have to start this whole process over again. Or worse, they would dismiss me and tell me my depression will get better the more I don't use. I was depressed before I got hooked on cocaine, so I know recovery alone will not stop my depression.



Individualized and Mental Health Needs of African Americans are not Being Met

- ⊙ This court makes us go to AA [Alcoholics Anonymous] meetings each week, which takes up a large chunk of time, and to be honest, I don't find them helpful. I see how they are helpful, just not for me. Attending my church each week, praying, and spending time with my family is my recovery support system, but the drug court says I can't use my church in place of a meeting. AA is not the way I was raised. In my culture, we rely on family for support, not other people who are court ordered to these meetings and don't even want to be there. If you want to help more people graduate, the court needs to allow us to pick our support systems, as compared to them picking it for us.



Support is Needed to Create Sustainable Employment for African Americans

- ⊙ Ever since I graduated high school, I have never had a real career. I just worked jobs here and there, and many I lost because I was getting high. Now that I am a mom and clean, I want to go to cosmetology school here in town. If I have a career, I will feel better about myself, I will be able to support my son, and put some structure and accountability into my weeks. This will support my recovery, but I can't do school now with all the drug court things. It's just too much. I asked if I could do less [12-step] meetings so I had more time to go to school, but the judge denied my request.



Support is Needed to Create Sustainable Employment for African Americans

- ◎ They say I need a job to graduate drug court, so I am going to find any type of job. I don't even care if I have to pick up trash or flip burgers. I'll do what they want me to do so I can get out of this program. If they really wanted to help us, though, they would teach us a job skill, like welding at the community college, I always wanted to do that, and it pays really good. This is what happens, we pick up any miserable job just so we can graduate, then as soon as we graduate, we quit. Then, back to the same old shit of trying to make a real living, and for me, that usually involves crime. If you want me to graduate and stay out of the system, I think it'd be best to help me learn a skill that will last and encourage me to find a career.



African Americans are Underrepresented in Some Drug Courts (Gallagher, 2013b)

- ⊙ As a black man, I want to do good and be a good man. It's hard being a black man in today's society. I am the only black dude at work and in my area. It's tough; I would like to make friends with other black kids in drug court but I don't see too many of them.
- ⊙ There are not many African Americans in the program. You need a bigger pool of African Americans because black people help other black people, sometimes we can relate better than other people who aren't black.



African Americans are Underrepresented in Some Drug Courts (Gallagher, 2013b)

- ◎ When I walk into court, all I see is white people and a few Hispanics. I like to see other black people. Black people like to see other black people. I sometimes talk with the black guys who are always on sanctions and I told them stop making excuses, do the fucking program. We like being and hearing from other black people; have me be a mentor for the other black kids. I know their culture, I know where they are from, I've been there. Have a one-on-one. I understand, I know their language, I've been there, I understand what they're saying.



Limitations

- ⊙ Social desirability bias.
- ⊙ Findings cannot be generalized beyond the research sample; each drug court operates differently.
- ⊙ The satisfaction surveys prevented the researcher from asking probing questions and developing rapport, which are key components of qualitative research.
- ⊙ Data were only collected from African Americans, preventing a comparative and contrastive analysis of lived experiences in drug court among the different races and ethnicities that drugs courts serve.
- ⊙ This qualitative meta-synthesis was limited to the four studies mentioned.



Program Evaluation

- ◎ In 2010, the National Association of Drug Court Professionals (NADCP) Board of Directors released a statement titled *The equivalent treatment of racial and ethnic minority participants in drug courts* (NADCP Board of Directors, 2010).
- ◎ First, drug courts need to evaluate their programs to assess for the factors that may lead to an underrepresentation of minority participants in their programs and the factors that may contribute to lower graduation rates for minority participants.
- ◎ Second, drug courts need to offer participants evidence-based, culturally competent interventions, which includes training for the drug court team on how to implement best practices for minority participants.



Stakeholders Screening Treatment Providers

- ⦿ First, African Americans preferred to use natural recovery support systems, as compared to mandated support groups, such as 12-step programs. It is recommended that treatment providers do not mandate attendance at 12-step programs, such as Alcoholics Anonymous (AA) and Narcotics Anonymous (NA).
- ⦿ Second, African Americans felt that their mental health needs were not adequately addressed in treatment; therefore, it is recommended that drug courts refer participants only to treatment providers who have expertise in treating a range of diagnoses, not just substance use disorders, and that agencies have a psychiatrist either on staff or available to consult with.



Stakeholders Screening Treatment Providers

- ◎ Third, stakeholders should require treatment providers to provide evidence to the drug court that their counselors are licensed or certified to provide dual-diagnosis treatment, as well as provide evidence that they have been trained to deliver evidence-based interventions.



Stakeholders Screening Treatment Providers

- ◎ Fourth, it is recommended that drug courts refer participants only to treatment providers who offer a variety of clinical services, including individual counseling. Not only should treatment providers offer individual counseling, it should be the norm that drug court participants are commonly referred to this modality of treatment. Hardin and Kushner (2008) perhaps state it best: “Group counseling has not been shown to be effective and yet group counseling is a staple of most addiction programs. Programs that offer only group counseling and not individual counseling should be considered carefully prior to referral” (p. 19).



Employers as Part of the Drug Court Team

- ◎ It is recommended that drug courts incorporate employers into the drug court team, especially employers that can assist participants in developing sustainable employment skills.
- ◎ Some participants may already have vocational skills, and so collaborating with employers that can assist them in finding jobs is a priority. For participants that do not have sustainable employment skills, however, it would be advantageous for the drug court to also invite representatives from local community colleges, universities, and vocational schools to be part of the drug court team.



Thank you!

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Presenter Biography

Dr. John R. Gallagher, PhD, LSW, LCAC, earned his doctorate in social work from the University of Texas at Arlington and is an Associate Professor at Indiana University School of Social Work. He is a Licensed Social Worker (LSW) and Licensed Clinical Addiction Counselor (LCAC) and has worked at the Berks County, Pennsylvania, dual-diagnosis drug court; Tarrant County, Texas, drug court; and St. Joseph County, Indiana, drug court. Additionally, his research agenda is related to exploring the factors that may contribute to racial and gender disparities in drug court outcomes, predicting graduation and recidivism outcomes in drug courts, and exploring how medication-assisted treatments (MATs) are used in drug courts. Dr. Gallagher has been the lead researcher in numerous journal articles related to problem-solving courts, and his work has been cited in the NADCP *Adult Drug Court Best Practice Standards*.



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