

Drug Treatment and Education Fund

Legislative Report

Fiscal Year 1997-1998



Arizona Supreme Court

Administrative Office of the Courts

Adult Services Division

March 1999

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This document has been prepared pursuant to the A.R.S. § 13-901.02 requirement that the Administrative Office of the Courts (AOC) prepare a report on the cost savings realized from the diversion of persons from prison to probation. In so doing, it characterizes the Arizona Drug Treatment and Education Fund (DTEF) and shows the effectiveness of the DTEF program in providing substance abuse treatment to probationers in Arizona. The report contains information on the allocation of funds, the Arizona Justice Model, the DTEF Report Card, and cost savings from the program. A more comprehensive report is also available from the Adult Services Division of the Administrative Office of the Courts. The comprehensive report has been forwarded to each public library as required by A.R.S. § 13-901.02.

Drug Treatment and Education Fund (DTEF)

The voters of Arizona approved Proposition 200 in the November, 1996 general election. This Proposition, formally known as the Drug Medicalization, Prevention and Control Act of 1996, became effective on December 7, 1996. One purpose of the act was to expand drug treatment and education services for drug offenders and to utilize probation for non-violent drug offenders. It established the Drug Treatment and Education Fund administered by the AOC. The goal of the DTEF is to reduce criminal activity by substance abusing offenders and thereby increase community safety.

The DTEF is funded from a percentage of the revenue from luxury taxes on liquors. Fifty percent of the money deposited into the fund is distributed by the Supreme Court to Superior Court probation departments to cover the costs of placing probationers in drug education and treatment programs. The remaining fifty percent (50%) is transferred to the Arizona Parents Commission on Drug Education and Prevention for programs that increase and enhance parental involvement and increase education about the serious risks and public health problems caused by the abuse of alcohol or controlled substances.

As required by the statute, a formula was developed and adopted by the Supreme Court to allocate a portion of the fund to the fifteen local probation departments. The formula was based upon each county's at risk population, the number of arrests for possession and sale of drugs, and the number of first time drug possession convictions in Fiscal Year 1996. A composite index was obtained from these factors that determined the percentage of the fund to be allocated to each county probation department. The following table displays the Fiscal Year 1998 allocation schedule for the DTEF.

Table 1. DTEF Allocation Schedule FY 1997-98.

COUNTY	At Risk Population Above 18	%	Arrests for Drug Possession or Sale	%	First Time Drug Possession	%	Composite Index Factor	Composite Index Allocation
Apache	37,802	1.20%	96	0.48%	37	0.83%	0.84%	\$25,211
Cochise	80,962	2.58%	227	1.14%	135	3.04%	2.25%	\$67,648
Coconino	79,266	2.52%	637	3.21%	157	3.54%	3.09%	\$85,100
Gila	32,784	1.04%	114	0.57%	60	1.35%	0.99%	\$27,730
Graham	22,077	0.70%	68	0.34%	30	0.68%	0.57%	\$17,218
Greenlee	5,548	0.18%	27	0.14%	30	0.68%	0.33%	\$9,892
La Paz	13,013	0.41%	2	0.01%	32	0.72%	0.38%	\$11,458
Maricopa	1,830,253	58.23	11,228	56.60	2,400	54.13%	56.32%	\$1,665,248
Mohave	102,671	3.27%	562	2.83%	112	2.53%	2.88%	\$86,000
Navajo	52,443	1.67%	319	1.61%	112	2.53%	1.93%	\$58,025
Pima	572,232	18.21	4,898	24.69	800	18.04%	20.31%	\$629,548
Pinal	100,120	3.19%	436	2.20%	153	3.45%	2.94%	\$88,338
Santa Cruz	22,082	0.70%	90	0.45%	60	1.35%	0.84%	\$25,100
Yavapai	103,116	3.28%	834	4.20%	149	3.36%	3.62%	\$218,451
Yuma	88,617	2.82%	301	1.52%	167	3.77%	2.70%	\$85,684
TOTALS	3,142,986	100%	19,839	100%	4,434	100%	100%	\$3,100,651

Technically, local probation programs funded through DTEF began operations in January of 1997. The implementation process began with each probation department submitting a plan to the Administrative Office of the Courts detailing how the allocated DTEF funds would be used to comply with the treatment requirements of the act. As part of that process, a screening/assessment system was developed and implemented statewide that assists staff in determining each probationer's level of substance abuse, the nature of their particular problem, and the appropriate treatment placement. The data from the screening/assessment process is automated on the Probation Information Management System and has been used to monitor probationer progress in treatment placements, reoffending and other outcomes detailed in this report.

Fiscal Year 1998 was the first year for DTEF, and the county-based probation programs were not fully operational until after the second quarter. This delay was due to the need for a Request for Proposal process to contract for services from private providers. Most contracts were not awarded until September, 1997. Over the course of the first year of operation, training and consultation occurred, programs underwent implementation and refinement, and new client identification and assessment processes and data collection and reporting processes were implemented.

The Arizona Justice Model

The Arizona Justice Model is designed to address the concurrent problems of substance use and criminal conduct of probationers. The requirements of this combined focus have led to a research based "shift in philosophy" that has modified more traditional substance abuse treatment models by incorporating cognitive-behavioral and social learning approaches that result in more effective treatment for substance abusing offenders (best practices).

The Arizona Justice Model is developing a cooperative relationship between the treatment provider and probation systems through collaborative planning and information sharing. The most important element in this process is the focus on the "front end" of the system by screening and assessing the substance abusing offender to determine the degree and severity of the offender's problem. Treatment intervention is prescribed based upon the offender's need, derived through an assessment protocol, and services are offered to the offender with the most appropriate provider.

The defining strength of the Arizona Justice Model is the incorporation of a continuum of "best practice" services as opposed to the reliance on a singular program intervention. The designed continuum of care service delivery system is comprised of: Substance Abuse Education Programming for low-risk offenders, Standard and Intensive Outpatient Programming for medium-low risk to medium-high risk offenders, and Day-Treatment, Short Term and Long Term Residential for high risk offenders. A pre-treatment Motivational Enhancement component is prescribed for offenders who are assessed as not yet ready to benefit from a treatment intervention. This service delivery continuum is based on the assessment and matching process that is critical in the effort to maximize positive client outcomes and the effective use of funding, time, and resources.

The DTEF Hypothesis

The Arizona Justice Model for drug treatment and education is expressed most concisely in the following DTEF hypothesis.

If...

substance abusing offenders can be accurately and effectively assessed as to their Risk/Need level and degree of substance abuse problem; and

substance abusing offenders can be matched with the intervention that most effectively recognizes their special population cognitive therapeutic needs

Then....

substance abusing offenders' criminogenic needs and substance abusing behaviors can be reduced and/or eliminated;

substance abusing offenders' quality of life will improve through recovery;

substance abusing offenders will be less likely to commit future offenses and community safety will be increased; and

jails/prisons will be primarily reserved for violent and chronic offenders.

Performance Results

As part of the DTEF implementation process, and in order to track the performance of DTEF funded programs and probationers, data has been collected and provided by each local department on every probationer treated for substance abuse problems with DTEF resources. A summary of statewide information is presented below and in the statewide DTEF Report Card. The Report Card on page 9 contains information arranged topically in several sections. The first is a brief narrative describing the DTEF program. This is followed by sections containing information on the number of adults served, and profiles of clients on demographic, risk and needs, and placement characteristics. At the bottom, the program outcomes section profiles the clients served in terms of percent receiving recommended placements, treatment completions, the degree to which clients were drug free and made a payment toward the cost of their treatment, and the cost savings associated with the fund.

Adults Served. As shown in the Report Card, 2,622 probationers began participation in DTEF funded substance abuse treatment during Fiscal Year 1998. Of these, 21% were mandatorily sentenced as prescribed by the Drug Medicalization, Prevention and Control Act of 1996. The remaining probationers qualified for DTEF treatment services based upon need, as provided in statute.

Demographic Characteristics. The probationers served were predominantly within the age range of 21 to 40 (74.2%) and predominantly male (74%). Anglos were the largest ethnic representation at 59.9% followed by Hispanics at 24.6%. All other ethnic groups were represented at less than 15.5%. In addition, data shows 80.3% to be currently unmarried, 46.1% unemployed, and 27% had prior drug/alcohol treatment. Of those with prior drug/alcohol treatment, 60% had been in residential treatment (16.3% of sample). Over 50% are multi-drug users.

Risk/Needs Assessment. The Arizona Risk and Needs Assessment Instruments were used to obtain data on risk for reoffending and on the level of client need. The Adult Substance Use Survey (ASUS) and Offender Screening Assessment Profile (OSAP) were used to obtain data on levels of substance abuse and suggested treatment placements.

The distribution of probationers into levels of risk, needs, and substance abuse are presented. The percent of probationers at levels of each of these are similar, with approximately 16% high in risk, need and substance abuse. Approximately 53% are at medium levels in all three, and approximately 31% are at low levels in all of the three.

The analysis of ASUS and OSAP data instruments showed that the scales used were reliable, and provided support for the validity of those instruments by comparing the scales to an existing probation sample from Colorado and a sample of Community Punishment Program (CPP) probationers from Maricopa County. The Arizona DTEF sample was more severe in substance abuse involvement and more severely impacted than the Colorado sample, but less than the Maricopa County CPP sample. The Colorado sample had less restrictive criteria than the Arizona sample while the Maricopa County CPP sample was comprised of more severe substance abusers. Based on these results, normative profiles have been developed for Arizona and will be implemented in the summer of 1999.

Placements. This section presents the percent of probationers receiving each of six treatment modalities ranging from alcohol and drug abuse education to residential long term treatment. By far the most frequently used treatment modality was outpatient therapy (73.9%). Education and intensive outpatient were used 9.7% and 8.9% for the probationers respectively. Very few probationers were treated in more intensive placements such as intensive outpatient, day treatment, or short or long term residential programs.

Program Outcomes. This section contains some striking information. Noticeably, 98.2% received the type of treatment recommended by the ASUS and OSAP. This indicates that with the presence of DTEF resources, programs were available to meet the identified needs for substance abuse treatment, with indications of good outcomes as discussed below. Of the 932 probationers completing a treatment program, 61.1% completed that program successfully. That is, they complied with treatment program requirements, were not transferred to another placement, and did not abscond, reoffend or have a petition to revoke filed. It is likely that those unsuccessful in placements were referred for another subsequent

placement. Also, successful placements were of longer duration, averaging 94.1 days compared to about 74 days for unsuccessful placements. It should be noted that Fiscal Year 1998 data are just beginning to establish baselines for these types of outcomes and others. For example, more information will be available in Fiscal Year 1999 to further define treatment success rates for those probationers who were transferred to a different placement.

A majority of urinalyses completed to check compliance with probation conditions prohibiting substance use were negative (76.3%). This indicates a high level of compliance. However, better data will be available next year when the tracking and recording of urinalysis results becomes a more rigorous part of the DTEF data collection system.

Another measure where the baseline is just being established and where data collection can be improved is the 77.1% of probationers who made at least one payment towards the cost of their treatment. Although this reflects a majority of probationers, this measure also can be improved by facilitating better reporting between providers and the local probation departments. More information should be available next year.

Data for measures related to recidivism were also collected using the DTEF monthly report form. However, these data are not reported for Fiscal Year 1998. Not enough time has elapsed since program inception for the collection of data to accurately reflect recidivism rates.

County Report Cards. Individual county statistics can vary widely, depending on the numbers of probationers, and their demographics, severity of problems, and treatment needs. When looking at county report cards, other aspects of each county that are not reflected in this report should be considered. For example, whether the county is predominately rural, suburban or urban and the level of unemployment can affect the accessibility of treatment resources. For these reasons, each county can present a profile unique to that county. Selected county level data has been discussed below to illustrate these county differences, relationships in the data, and the stories the data might tell.

Clients Served. As would have been expected, Maricopa and Pima counties, the most populous Arizona counties, served more clients than the other counties. These two counties accounted for a combined 78.9% of all clients served, 63.3% and 15.6% respectively. The next highest county was Yavapai at 207, 7.9% of all DTEF clients served.

Numbers alone, however, do not tell the whole story. Lower numbers don't indicate that there is less need in counties with smaller populations. For example, looking at what percentage of those county populations were served adds more to the picture. The statewide rate of DTEF clients served per 1000 adult population was .83, less than one person per 1000. For Maricopa, this rate was .91 and for Pima the rate was .71. For Yavapai, the rate was 2.01 per 1000. This could mean that there is relatively more need for substance abuse services in Yavapai, or it could mean that the program was implemented sooner, or there may be any number of other explanations. In comparison to Yavapai, its neighbor, Mohave County, has approximately the same size population, but in serving 27 clients; the rate per

1000 was the second lowest of all counties at .26. A number of explanations for this could be studied by looking at the county report card and other information in the report such as the allocation table.

Demographic Characteristics. Graham had the highest rate of female clients served at 50% and Santa Cruz the lowest at 4.5%. Mohave served a higher percent of Anglo Americans at 96% whereas Santa Cruz was the lowest at 9.1%. Mohave tends to serve older clients since only 33.3% were in the 18 to 30 age range. At the other end, 68.9% of Coconino's clients were in the 18 to 30 age range. These rates help to lay the foundation for understanding the DTEF program in each county.

Risk and Needs. Graham has a higher percentage of clients at high or medium risk for reoffending at 95.9%. Maricopa, on the other hand, has 51.6% of their clients at high or medium risk for reoffending. Cochise and Yavapai have the highest percentages of clients with high or medium levels of substance abuse at 85.4% and 84.5% respectively. In contrast, all of Graham county's clients were rated by them as having low levels of substance abuse.

Placements. Placement data for Navajo and Greenlee show the highest use of residential services to meet the treatment needs of their clients. Excluding La Paz, these two counties served the lowest numbers of clients. Because the numbers of clients served in these counties are low, interpreting a comparison of the placement pattern and the risk/needs profiles of their clients may be premature. However, and even though they rated the placements used as those that were recommended, the high use of residential treatment does suggest reviewing the availability of appropriate alternative resources to match client needs.

Cochise used the next highest level of residential placements at 48.3%. This may be more in line with the high to medium levels of risk for reoffending, needs and substance abuse. Maricopa used the lowest percent of residential services at less than one percent. Due to the high percent of clients at low levels of risk and overall needs, Maricopa, with a broader range of resources, may have approached the treatment of their high and medium level substance abuse clients differently than counties who may not have the same range of resources.

Program Outcomes. At this point in the report card, a great deal of groundwork for the county story has been laid. Outcome information serves to complete this first year of the story including characterizing the success of the fund. For example, successful completion percents range from a high in Cochise of 92.9% to a low in Graham and Navajo of 40% and 33.3% respectively. Overall, the rate of successful completion of treatment was 61.1%.

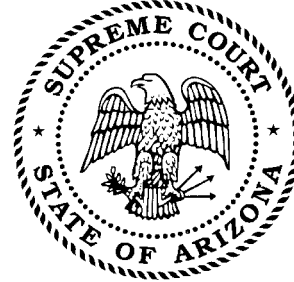
Areas that have been identified as needing attention relate to the reporting of urinalysis and payment data. The overall rates of being drug free and making a payment were 77.5% and 77.1% respectively. However, some counties did not report these data. This is an area where improvement can be made, and efforts to address these issues are underway.

One of the most positive outcomes has been the cost savings with over \$2.5 million saved statewide. The cost saving reported for each county is directly dependent on the numbers of

Prop 200 clients served. Like the county stories that will continue to be written, the outcomes such as cost savings will be refined to more directly reflect what is happening in each county program.

Fiscal Year 98 DTEF Report Card

Arizona



Program Narrative:

The Drug Treatment and Education Fund was established in January of 1997 to expand services for drug offenders and to utilize probation for non-violent drug offenders. Counties have been serving drug offenders statewide through both county operated programs and DTEF funded contract services. This fund has increased the ability of counties to effectively supervise probationers by identifying and meeting their needs for substance abuse services.

Expenditure: \$2,183,553

Adults Served

Served Mandatorily sentenced Prop 200 Prison diversions

Demographic Characteristics

Age18-20:	<input type="text" value="8.6%"/>	Females	<input type="text" value="59.9%"/>	Anglo
Age21-30:	<input type="text" value="39.1%"/>	<input type="text" value="26.0%"/>	<input type="text" value="9.2%"/>	Black
Age31-40:	<input type="text" value="35.1%"/>	Males:	<input type="text" value="24.6%"/>	Hispanic
Age41-50:	<input type="text" value="14.3%"/>	<input type="text" value="74.0%"/>	<input type="text" value="4.6%"/>	Native American
Age51+:	<input type="text" value="2.8%"/>		<input type="text" value="1.7%"/>	Other

Risk/Needs Assessments

Risk of Reoffending		Need for Services		Substance Abuse	
High	<input type="text" value="14.9%"/>	High	<input type="text" value="16.6%"/>	High	<input type="text" value="17.5%"/>
Med	<input type="text" value="55.3%"/>	Med	<input type="text" value="49.3%"/>	Med	<input type="text" value="53.4%"/>
Low	<input type="text" value="29.8%"/>	Low	<input type="text" value="34.2%"/>	Low	<input type="text" value="29.1%"/>

Placements

Drug Education	<input type="text" value="9.7%"/>	Day Treatment	<input type="text" value="0.2%"/>
Outpatient	<input type="text" value="73.9%"/>	Residential Short Term	<input type="text" value="3.4%"/>
Intensive Outpatient	<input type="text" value="8.9%"/>	Residential Long Term	<input type="text" value="3.4%"/>

Program Outcomes

Placed Where Recommended	Completions Number	Completions Percent	Completions Successful
<input type="text" value="98.2%"/>	<input type="text" value="932"/>	<input type="text" value="35.5%"/>	<input type="text" value="61.1%"/>
Successes, Ave Days in Trt.	Drug Free	Made Payment	Cost Savings
<input type="text" value="94.1"/>	<input type="text" value="77.5%"/>	<input type="text" value="77.1%"/>	<input type="text" value="\$2,563,062"/>

Cost Savings

One of the suppositions for creating the DTEF program was that it would provide an effective intervention and result in cost savings to the State. As presented in the Arizona Justice Model, a thorough and accurate assessment of probationers' severity levels and needs for substance abuse treatment leads to improved treatment through appropriate placements, and results in better outcomes for the probationer, the probation system, and the State of Arizona. One of those favorable outcomes is cost savings. By providing substance abuse services in the community rather than in prison it was expected to produce cost savings.

Estimates of cost savings for Fiscal Year 1998, the implementation year of DTEF, are presented in Table 2 below. The detail for calculating the cost savings is presented on the following page, while the underlying assumptions and starting points used in computing the Fiscal Year 1998 cost savings are presented here. See the Fiscal Year 1999 cost savings section for related assumptions.

- ▶ The diversion of probationers' into DTEF instead of prison occurs evenly throughout the year.
- ▶ Diversions from prison in the probationers' first year would average 6 months (182.5 days) per diverted probationer.
- ▶ The probationers would have been assigned to intensive and standard probation at approximately the same rates as occurs in the total probation population; 9% intensive and 91% standard.

Table 2 shows the cost savings associated with the DTEF program. Approximately 21% of the adults served by the DTEF program were sentenced as prescribed by the Drug Medicalization, Prevention and Control Act of 1996. This resulted in 551 prison diversions in the first year of operation.

Table 2. Cost Savings for Fiscal Year 1998

Results	Actual Prison Diversions
Probationers	551
Total Prison Savings	\$5,053,014
Probation Costs	\$306,399
DTEF Expenditure	\$2,183,553
Net Fiscal Year 98 Cost Savings	\$2,563,062

For the diversion estimate, total prison savings were computed. Costs that offset those savings

were computed and subtracted to obtain the net Fiscal Year 1998 cost savings as a result of DTEF. Based on this estimate, the cost saving was \$2.5 million dollars for Fiscal Year 1998.

Cost Savings Calculations. The following steps were taken in estimating the cost savings. The first step in calculating cost savings was to apply the percent of actual prison diversions, 21% times the total adults, 2,622, served with DTEF monies.

The number of diverted probationers (551) was multiplied times the Fiscal Year daily prison rate of \$50.25 which was then multiplied times the average days diverted. The assumption was that probationers would be diverted from prison an average of six months (182.5 days). These steps provided the total prison costs that would have been incurred had these offenders not been placed on probation. This is shown in Table 2 as \$5,053,014.

Then the total prison savings were reduced by the cost of providing supervision and DTEF services. The costs of supervision (\$306,399) for Fiscal Year 1998 were \$16.06 per day per probationer for intensive and \$1.76 per day per probationer for standard.

Finally, to obtain the net Fiscal Year 1998 cost savings, the probation costs and the DTEF expenditures were subtracted from the prison savings. The resulting net savings are \$2,563,062.

First Year Accomplishments

- 1. Developed and adopted a DTEF allocation formula for local adult probation departments from the revenues generated by the luxury taxes on liquors.**
- 2. Implemented and validated a statewide Arizona probation substance abuse assessment system.**
- 3. Increased substance abuse treatment capacity in every Arizona county.**
- 4. Provided services to over 2,600 more substance abusing probationers than Fiscal Year 1997.**
- 5. Approximately three out of five probationers placed in drug treatment successfully completed it in less than 95 days.**
- 6. Three out of four probationers placed in drug treatment remained drug free and paid at least one co-pay to offset the cost of their treatment.**
- 7. Implemented a statewide DTEF management information system with report card and performance measures.**
- 8. The program diverted 551 adults from state prison at a savings of \$2.5 million.**

The Future

Fiscal Year 1999, will provide an opportunity for program stability and a better examination period to obtain information on program and probationers performance. For example, enough time will have passed to determine a one year recidivism rate for Fiscal Year 1998 probationers. This will provide evidence of the effectiveness of the DTEF in reducing crime and helping to ensure the safety of the public. Also, another year of experience with the program will provide more reliable estimates of cost savings.

The Drug Medicalization, Prevention and Control Act of 1996 has allowed the judicial branch to build an effective probation model to treat and supervise substance abusing offenders. The foundation of the model has been built upon research based approaches as to “what works” in substance abuse treatment of a probation population. It has required close collaboration between State, County, and private stakeholders, a collaboration that has served to facilitate program implementation, problem solving and refinements. All of these factors are resulting in safer communities and more substance abusing probationers in recovery.