

## FACTSHEET: Legal Coercion, Drug Treatment and Recidivism

In 2003 the Center for Court Innovation published an evaluation of 11 New York drug courts (Rempel et al., 2003).<sup>1</sup> The study focused on operations between 1995 and 2001. The multi-site evaluation included multiple research questions; data availability and measures varied considerably across drug courts and not all sites had data to address each question. Data were available to examine the effects on drug court program completion and recidivism on legal coercion in three courts. That is, in the only study of its kind, researchers studied the effect on drug court program outcomes of facing a long (greater than 1 year) prison sentence.

In the study of recidivism and legal coercion in the three courts, the authors conclude:

*With respect to recidivism, in no court is charge severity (felony/misdemeanor) [statistically] significantly related to post-intake recidivism (p. 111).*

The authors further state in their discussion of recidivism findings:

Brooklyn ... it is notable that misdemeanor offending – prior misdemeanor convictions and a misdemeanor rather than a felony plea/conviction on the current case – were associated with greater recidivism [but the findings were not statistically significant] (p. 172).

Syracuse ...the results do not indicate that there is any differential impact [on recidivism] of the drug court on participants facing felony versus misdemeanor charges; that is, participants perform about equally well who enter on drug felony and drug misdemeanor charges (p. 235).

Suffolk ...the results indicate disparate impacts for defendants facing misdemeanor versus felony drug charges, with the drug court showing greater success in serving misdemeanants [but this finding was not statistically significant] (p. 213).<sup>2</sup>

Prior to the publication of the 11-court report, Rempel and Destefano (2002) published an article about the effect of legal coercion on treatment engagement and retention (not recidivism) in the Brooklyn Treatment Court.<sup>3</sup> Treatment retention was defined as at least 90 days of treatment participation and engagement was defined as completing four consecutive months of drug-free and sanction-less participation. It is important to note that 90 days of treatment was only phase 1 of a 3-phase treatment program. The researchers found that “[m]ultivariate analyses revealed that the level of legal coercion, measured by expected incarceration time in the event of program failure, strongly predicted both [treatment] retention and engagement” (p. 87).

Overall, the findings from the New York drug court studies are mixed regarding legal coercion. Participants facing the “felony hammer” in the Brooklyn and Syracuse courts were more likely to complete the program but this was not the case for the Suffolk court. Recidivism (rearrest/reconviction) were unaffected by legal coercion across the three courts.

These disparate findings reveal the limitations of single, non-experimental studies compared to meta-analytic studies and expert panel reviews of research evidence. The inconsistent findings demonstrate the need for more research before actionable conclusions can be derived. The inconclusive evidence provided by the 2003 study underscores the necessity of prioritizing evidence from repeated clinical trials, meta-analyses and expert panel reviews. In fact, positive finding from the earlier (2002) Brooklyn study which looked at phase 1 program completion and time in treatment found that these were NOT an indicator of reduced recidivism, in contrast to findings from the larger literature according to the National Institute on Drug Abuse (NIDA).<sup>4</sup>

Studies with a high standard of evidence such as meta-analytic research and expert panel reviews inform the debate concerning drug abuse interventions in two ways. First, research has produced clear and convincing evidence that substance abuse treatment, even for involuntary clients, works to reduce drug use and crime. Second, our enhanced understanding of the science of addiction helps explain why the threat or experience of prison has little impact on chronic abusers because the repeated use of addictive drugs eventually changes how the brain functions.<sup>5</sup>

<sup>1</sup> Center for Court Innovation (Rempel, Fox-Kralstein, Cissner, Cohen, Labriola, Farole, Bader and Magnani). October 2003. *The New Your State Adult Drug Court Evaluation*. 520 Eighth Avenue, New York, New York.

<sup>2</sup> In the 11-court report, the Suffolk Court had a particularly high treatment retention rate of 63%; only three courts exceeded 60% (p. 89).

<sup>3</sup> Michael Rempel and Christine Depies Destefano (2002). Predictors of Engagement in Court Mandated Treatment. *Journal of Offender Rehabilitation*, 33:4, 87-124.

<sup>4</sup> National Institute on Drug Abuse. *The Science of Addiction*, at <http://www.drugabuse.gov/publications/science-addiction/treatment-recovery>.

<sup>5</sup> Ibid.