



Department of Justice

STATEMENT FOR THE RECORD OF

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DIRECTOR
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BEFORE THE

**COMMITTEE ON THE JUDICIARY
UNITED STATES SENATE**

ENTITLED

**“DRUG AND VETERANS TREATMENT COURTS: SEEKING COST-EFFECTIVE
SOLUTIONS FOR PROTECTING PUBLIC SAFETY AND REDUCING RECIDIVISM”**

JULY 19, 2011

**Statement for the Record
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Office of Justice Programs
U.S. Department of Justice**

**Subcommittee on Crime and Terrorism
Committee on the Judiciary
United States Senate**

**“Drug and Veterans Treatment Courts: Seeking Cost-Effective Solutions for Protecting
Public Safety and Reducing Recidivism”
July 19, 2011**

Chairman Whitehouse, Ranking Member Kyl, and distinguished members of the Subcommittee, thank you for this opportunity to submit a statement for the record addressing the importance of drug and veterans treatment courts and the Office of Justice Programs' (OJP) Bureau of Justice Assistance's (BJA) role in implementing these courts.

I am Denise E. O'Donnell, the Director of BJA. Prior to my confirmation, I served as the New York State Deputy Secretary for Public Safety, overseeing 11 homeland security and criminal justice agencies. I was on the Conviction Integrity Advisory Panel for the Manhattan District Attorney's Office; the Criminal Justice Council of the New York City Bar Association; and the Criminal Justice Section of the New York State Bar Association, and I honorably served as the United States Attorney for the Western District of New York.

As you know, BJA provides leadership and services in grant administration and criminal justice policy development to support state, local, and tribal justice strategies to achieve safer communities. To accomplish our mission, BJA utilizes and highlights strategic and sustainable approaches to address crime, using methods that incorporate evidence-based prevention and intervention strategies and support our partners in the field.

Across the nation, especially during these difficult budgetary times, we have a responsibility to utilize taxpayer dollars wisely and to support programs that are backed by evidence of effectiveness. This Administration is committed to investing in evidence-based programming, investigating promising practices, and making science a priority. Drug courts are a great example of this smart-on-crime approach. Backed by rigorous research and evaluations, these courts, when implemented correctly, can promote public safety and provide significant cost savings.

I would like to thank the Subcommittee for holding this important hearing this week, as the National Association of Drug Court Professionals (NADCP) is hosting their 17th Annual Drug Courts Training Conference in the Washington D.C. area. NADCP has been an important partner to BJA on the training, implementation, and expansion of drug courts nationwide.

Drug Courts

Drug courts are specialized courts that target criminal defendants and offenders, juvenile delinquents and status offenders, and parents with pending child welfare cases who have alcohol and other drug dependency problems. Research shows drug courts help reduce recidivism and substance abuse among offenders, and increase offenders' likelihood of successful rehabilitation through early, continuous, and intense judicially supervised treatment, mandatory periodic drug testing, community supervision, sanctions and incentives, and other recovery support services.

The first drug court was established in Miami, Florida, in 1989, with the goal of reducing substance abuse and criminal behavior while also freeing the court and corrections systems to handle other cases. Since then, BJA has awarded millions of dollars to fund drug courts nationwide. As of December 2005, more than 1,500 drug courts were operational across our nation, and today, there are over 2,500 drug courts operating in all 50 states, the District of Columbia, the Northern Mariana Islands, Puerto Rico, Guam, and in nearly 90 tribal locations.

Drug courts offer an important evidence-based tool to hold substance-abusing offenders accountable, while providing the rehabilitation treatments that they need. Thanks in large part to the research and maturity of drug court programming over the last 20 years, we possess the information and understand the components needed to implement and operate a successful drug court.

Recently OJP's National Institute of Justice (NIJ) funded an unprecedented drug court evaluation called the Multisite Adult Drug Court Evaluation.¹ This evaluation consisted of a 5-year longitudinal evaluation of adult treatment drug court programs. The evaluation sampled nearly 1,800 drug court and non-drug-court probationers from 29 rural, suburban, and urban jurisdictions across the nation. The findings from this and other studies are clear: when appropriately implemented, drug courts can reduce recidivism, decrease the chances of future drug use, and promote positive cost-saving outcomes. In short, they are a wise investment.

Various factors can affect the success of a drug court program. These include proper assessment tool and the allocation of treatment resources, as well as other variable influences such as drug use trends and staff turnover. NIJ's Multisite Adult Drug Court Evaluation found that judges are instrumental to program success, and that positive interaction between the judge and program participants was essential to the program's success. According to the study, the more status hearings, praise, and respectful interactions between the judge and the participant, the more likely participants were to experience positive attitudes and better outcomes. Research also shows that drug courts targeting serious, high-risk offenders with a strong need for treatment yield the most effective interventions and maximize return on investment.

NIJ's Multisite Adult Drug Court Evaluation also revealed that drug courts achieve long-term savings by decreasing the number of future victims, re-arrests, and incarcerations. In fact,

¹ See www.nij.gov/nij/topics/courts/drug-courts/madce.htm for more information on NIJ's Multisite Adult Drug Court Evaluation.

drug courts saved an average of \$5,680 per participant, returning a net benefit of \$2 for every \$1 of cost.

Using this information, BJA has translated this research into practice through the Adult Drug Court Discretionary Grant Program. This grant program provides training, financial assistance, and related programmatic guidance and leadership to state, local, and tribal governments interested in planning, establishing, and enhancing drug courts. Through the drug court grant program, communities are able to leverage the power of the criminal justice system to reduce recidivism and substance abuse among nonviolent offenders and to increase the likelihood of successful rehabilitation. This is accomplished by applying early, continuous, and intensive judicially-supervised treatment, mandatory drug testing, and appropriate sanctions and other recovery support services. In Fiscal Year (FY) 2011, BJA revised the solicitation to prioritize funding to jurisdictions proposing to incorporate program design features recognized as effective by the NIJ Multisite Adult Drug Court Evaluation.

Through the Adult Drug Court Discretionary Grant Program, BJA awards funds based on three categories: implementation, enhancement, and statewide. Implementation grants are available to jurisdictions that have completed a substantial portion of the drug court planning stage and are ready to begin the process. Enhancement grants are made available to jurisdictions with a fully operational (at least 1 year) adult drug court, for which funding is used to expand the court's offering to target populations and enhance the court's operations, treatment services, and/or offender services. Statewide grants are available to improve, enhance, or expand drug court services statewide by encouraging adherence to evidence-based design features. In FY 2010, BJA awarded 78 drug court grants totaling nearly \$21 million.

BJA's tiered system of awarding grants adds to the efficiency of the drug court model by encouraging interested jurisdictions to apply for funds and providing them with the flexibility needed to ensure that they develop their drug court according to best practices. The system also allows BJA to provide training and technical assistance to jurisdictions in an effort to advance their use of evidence-based practices and to increase the program's chances for overall success.

Additionally, last fiscal year, BJA collaborated with the U.S. Department of Health and Human Services' Substance Abuse and Mental Health Services Administration's (SAMHSA), Center for Substance Abuse Treatment to issue the first-ever joint drug court solicitation. Together, BJA and SAMHSA awarded more than \$7 million to enhance court services, coordination, and substance abuse treatment capacity of adult drug courts. This new initiative effectively merged resources, developing comprehensive strategies for enhancing drug court capacity and allowing jurisdictions to compete for access to both criminal justice and substance abuse treatment funds with one application. As a result of its success, this joint program was continued this fiscal year.

BJA also developed the National Drug Court Resource Center, a one-stop shop providing research, training, webinars, and funding opportunities for drug court professionals. Through this virtual resource center, practitioners learn about and request training on 21 BJA-approved drug court curricula to improve practitioner skills and drug court team functioning and to address specific subject matter questions, such as special populations. Most recently, BJA funded the

development, pilot, and expansion of a veterans' treatment court planning initiative through the center.

Veterans Treatment Courts

Drug courts are part of the larger universe of problem-solving courts, and these problem-solving principles can be used in new and innovative ways to create mental health courts and reentry courts. Most recently, these principles have been applied to a new type of court, known as the Veteran Treatment Court.

According to the U.S. Department of Veterans Affairs (VA), there are more than 22.7 million veterans nationwide. Since September 11, 2001, more than 2 million service members have been deployed to Iraq or Afghanistan. According to SAMHSA, 1.8 million veterans met the criteria for having a substance abuse disorder in 2006. Similarly, the Bureau of Justice Statistics (BJS) reports that 60 percent of the 140,000 veterans in federal and state prisons struggle with a substance use disorder.²

In response to a growing number of veterans appearing before the court on charges stemming from substance abuse and/or mental health disorders, the Honorable Robert Russell, the presiding judge of the Buffalo Drug Court and Mental Health Court, helped establish the nation's first Veterans Treatment Court in 2008, offering a path of sobriety, recovery, and stability to the program participants. Today, there are 74 Veterans Treatment Courts nationwide.

Veterans Treatment Courts are a hybrid of drug and mental health courts, using the drug court model to serve veterans struggling with addiction, mental illness, and/or co-occurring disorders including post-traumatic stress disorder and traumatic brain injuries. The courts employ a coordinated response with traditional partners of drug and mental health courts, the VA, and volunteer veteran mentors.

BJA, as is the U.S. Department of Justice, is committed to partnering with the VA to ensure our veterans have the support they need during their recovery efforts. In June 2011, Attorney General Holder and Assistant Attorney General Robinson travelled to Providence, Rhode Island, to learn about a Veterans Drug Court pilot project, currently funded by SAMHSA.

Collaborating with the VA and SAMSHA, BJA is helping to expand Veterans Treatment Courts by providing funds to NADCP to assist jurisdictions in the planning and operation of these courts. Working with NADCP, we developed the Veterans Treatment Court Planning Initiative, a comprehensive 5-day team training consisting of plenary sessions, team breakout discussions, and a visit to a Veterans Treatment Mentor Court to observe case discussions and status hearings. This training is the first in the nation to focus exclusively on Veterans Treatment Courts.

² Margaret E. Noonan and Christopher J. Mumola, 2007, *Veterans in State and Federal Prison, 2004*, Washington, DC: U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics. Available: <http://bjs.ojp.usdoj.gov/content/pub/pdf/vsfp04.pdf>

Additionally, beginning in FY 2010, priorities for the adult drug court grant program included building the capacity of existing drug courts to increase participation rates among high-risk/high-need populations and meeting the needs of special populations, including returning veterans.

Conclusion

According to BJS, an estimated 22.5 percent of the 1.8 million convicted inmates in state or federal prison or local jails in 2009 were convicted of a drug offense (per 1-day count)³. The high cost of imprisonment and jail maintenance continues to threaten state and municipal budgets. In the past 20 years, state spending on corrections has grown at a faster rate than nearly any other state budget item. The United States now spends more than \$68 billion on federal, state, and local corrections. This continuously high spending on corrections is unsustainable. The Administration, the Department of Justice, and BJA want to ensure a strategic, effective, and sustainable approach that incorporates evidence of effectiveness into its corrections programming efforts.

Drug courts are a scientific-based criminal justice intervention strategy, and BJA is committed to supporting these and other evidence-based approaches that increase public safety and reduce recidivism. This Administration is supportive of treatment courts and in his FY 2012 budget proposal, the President included a total of \$101 million for drug, mental health and problem solving courts administered through BJA and SAMHSA. BJA plans to administer its funding through a consolidated program which will allow more flexibility to fund innovative projects and to help state, local, and tribal governments develop and implement evidence-based problem-solving court strategies.

Mr. Chairman, Ranking Member Kyl, and Members of the Subcommittee, this concludes my statement for the record. Thank you for the opportunity to do so. I look forward to continuing to work with you on these important issues.

³ Estimate provided by BJS based on unpublished data.