Impact of Community-Panel Juvenile Drug Court Judges in Woodbury County, Iowa

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ABSTRACT: Like most drug courts, the Woodbury County, Iowa program is based on therapeutic jurisprudence (TJ) and social bonds theory. It also relies on and trains community volunteers who serve as judges and work directly with clients. The article outlines the requirements for juveniles and community-based judges who are accepted into and remain in the drug court program. Woodbury County's overall success rate is higher than the national average. The difference between this drug court and others is the use of community members. Furthermore, the article combines leadership theories in volunteer organizations to explain how the judges work together, each panel's success rate over a two-year period, and their practical application of TJ and social bonds theory to clients' lives.

Introduction

Federal, state, and local governments have grappled with problems caused by alcohol and drug abuse throughout American history. Communities have attempted to balance dealing with the social and legal problems caused by drug and alcohol addiction with the need to protect every citizens' rights while honoring their values and beliefs about substance abuse. They have faced increasing social and financial costs caused by substance abusing individuals. (Banks & Gottfredson, 2004). In an attempt to address these needs and curb expenses, local American governments and their bureaucratic agencies implemented drug court programs that combine law enforcement measures with support programs for convicted juvenile and adult substance abusers.

For juveniles, drug courts are designed to be the "last stop" before adult court or long-term commitments to state juvenile facilities. Several scholarly journals, federal agencies, and state governments have published various documents on the financial or communal efficacy of drug court programs program (Belenko 1998a, 1998b; Breckinridge, et al. 2000; Gottfredson, et al. 2005; ONDCP Drug Policy Information Clearinghouse 1998; Shanahan, et al., 2004; Spohn 2001; Stanford and Arrigo 2005; U.S. Department of Justice 1997, 2002; U.S. Government Accounting Office 2005; Wilhelm & Turner 2002). While this situation allows local governments to create a drug court that reflects their values, these drug courts are overwhelmingly limited to individual, judge-based, juvenile programs and are not generalizable to other courts (U.S. Department of Justice, 2002).

Woodbury County, Iowa is a community that created one of the first community-panel drug courts, requiring that juvenile offenders answered to community volunteers rather than a judge. The community-panel drug court has reported one of the lowest recidivism rates in the United States. This is the first published article on the impact these community-panel judges had upon their juvenile clients and the organization.

This paper begins with a theoretical discussion of drug court programs and followed by an analysis of its mission statement, goals, and structure of the juvenile justice system leading to a drug court assignment. A discussion on the selection and training of community-panel judges follows with an analysis of its goals and phases. The final section discusses volunteer groups' leadership style and how these community judges tie theoretical jurisprudence and social bonds theory with the organization's mission and goals. This section includes a brief discussion on the impact these theories and practices have on the client's success and recidivism. Preceding research on the judges' leadership styles and impact on clients is a section which compares the organization's impact on the court's success rate.

Theoretical Foundations Of American Drug Courts

Like most drug court programs in America, the Woodbury County program operates on the principles of therapeutic jurisprudence (TJ) and social bonds theory. Created by Prochaska and DiClemente in 1982, therapeutic jurisprudence is a multi-component theory rooted in law, psychology, psychiatry, criminology, criminal justice, public health, and philosophy (Prochaska & DiClemente 1982; Wexler 1996). TJ is designed to support a more pro-social and mainstream lifestyle through a multidisciplinary approach as defined by the program's legal and organizational boundaries. Legal representativesprosecutors, defense lawyers, judges, probation officers, treatment, and education providers-act as legal and behavioral change agents under this theory. If these legal actions are entrenched within the correctional system, TJ incorporates change within the client's psyche by combining cognitive dissonance and self-efficacy with decisional balance. The client has the chance to alter existing beliefs, accomplish self-established goals, as well as evaluate advantages and disadvantages of a situation (Prochaska & DiClemente 1984; DiClemente, Prochaska, & Gibertini, 1985). A client's participation in a structured environment, like a drug court setting, encourages verbal processing and personal actions which ingrains itself into the client's psyche. This cognitive change within the client is the foundation of therapeutic jurisprudence and creates an ethic of care.

Social bonds theory lies within the ethic of care that therapeutic jurisprudence provides. This theory focuses upon four psychological and sociological actions that promote socialization and conformity, particularly among juveniles: attachments, commitment, involvement, and belief. The stronger the bonds between these feelings, the less likely a person will be delinquent. The more attached these juveniles are to the parents or guardians, school, and community, the less likely they are to commit crimes and jeopardize those relationships. The stronger their commitment to and involvement in prosocial activities and commonly held ethics, the less likely a juvenile will commit crime. Likewise, an inverse situation may cause juveniles to act inappropriately and commit crime resulting in imprisonment. Regardless of the connection youth feel to a community, a society's value system must be accepting of both the offender and vice versa (Adler, Laufer, & Mueller, 2004). The components of both theories hinge upon the drug court-sentenced juvenile's ability to identify with the panel and the assigned probation officer.

Whether a community implements a judge-based and community-panel drug court, the program allows its juvenile clients to form attachments with their panel members and probation officers. The judge and community panel encourage these teenagers to establish permanent employment, participate in school activities, or obtain higher educational goals. Through the application of social bonds theory, the panel members assist the juvenile practice pro-social behaviors while accepting the community's belief system. As a factor of TJ, the client internalizes thought patterns about themselves and the world around them.

However, the approaches between both drug court programs differ at this point. Judge-based programs utilize one person who sits in judgment of a client's actions. He or she tends to speak with a judge for a few moments and works much more closely with their probation officer. Under a community-panel model, the clients meet and work closely with their probation officers as well at the three or four volunteer judges. They spend a minimum of 15 minutes per month per client, far more than single judges. The juvenile has the opportunity to bond with more than one panel member. This bond may encourage pro-social activities more quickly because the client answers to volunteers with different experiences. These experiences can assist the client in developing personal opportunities and insights into recovery from substance abuse to educational assistance. The exchange reinforces TJ and social bonds theory by building attachments while decreasing anti-social behavior among clients, particularly juveniles.

Mission Statement and Organizational Goals

Most drug court programs share a similar mission statement. Woodbury County's community-panel program makes the following commitment to its clients:

To demonstrate an innovative, comprehensive, and integrated approach to substance abuse treatment among offending juveniles and adults by coupling the coercive power of the court with substance abuse services" (Gendreau & Andrews, 2001; Niles, G., personal communication, 5 May, 2008)

The program's goals derive from its theoretical base and its mission statement. These goals include increasing the effectiveness of substance abuse treatment among offenders and timely case processing. Effective treatment for juvenile offenders is obtained by coordinating all related aspects of the justice system with social services such as substance abuse treatment providers, community service organizations, institutions of higher learning, and potential employers. This coordination is designed to reduce substance abuse and related crimes among the population. The cases are expedited by reducing the duration of incarceration to alleviate juvenile detention and court docket overcrowding (Gendreau & Andrews, 2001).

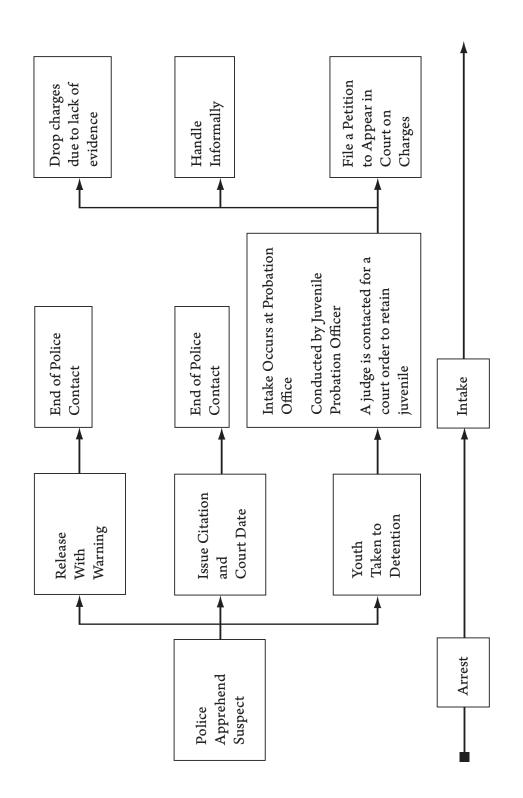


Figure 1. Juvenile Drug Court Process – Step 1

The mission statement and operational goals reflect the spirit of legal and theoretical underpinnings of any drug court program, and at the same time allows each of them to implement a program that reflects the community's values and beliefs. Albeit broad, they guide the requirements and expectations the court places upon both its clients and its judicial volunteers.

Criteria for Juvenile Acceptance into Drug Court

Figure 1 demonstrates how an arrestee can be assigned to drug court and work with community volunteers after being arrested for committing a non-violent misdemeanor or felony while under the influence of a mood-altering substance. In smaller communities like Woodbury County, Iowa, the arresting or detention officers usually know if the offender has a nonviolent, criminal history at the time of arrest. If the arrestee is under age 18, a judge is contacted to determine if the child should be detained in juvenile hall or released to a parent or guardian.

Occurring within 72 hours of the arrest, the juvenile meets with a judge, their legal representative, a lawyer from the district attorney's office, a probation officer, and their parent or guardian to determine drug court eligibility. This group determines whether to send someone to drug court by examining the client's criminal history and substance abuse experiences. The probation officer administers and scores the Substance Abuse Subtle Screening Inventory (SASSI) prior to the group meeting. SASSI is a psychological screening tool used to measure a person's dependence upon alcohol or drugs and is the tool used to diagnose the potential participant's dependence level on mood-altering substances. The client cannot alter their response based upon their gender, ethnicity, occupational, or marital status, age, disability, or level of education (Lazowski, Miller, Boye, & Miller, 1998; SASSI 1997). Other supplemental psychological tests have been used to corroborate SASSI's findings, such as Level of Services Inventory, Jesness, or Offender Profile Index. Based upon a potential client's history, test scores, and the review team's decision, a non-violent offender who has a moderate-to-high risk of continued substance abuse is more likely to be offered the option to participate in a drug court program than persons with a lower SASSI score or a violent past.

If an underlying substance abuse issue is determined, the client is referred to the drug court program. An interview with a drug court probation officer and local treatment provider are shortly scheduled to determine the required level of support for the juvenile. The probation officer meets with the Woodbury County Attorney's Office, the client's legal representative, parents or guardians, and all other persons who are relevant to the situation. If all parties agree, the juvenile client enters drug court. The potential client signs a contract committing him- or herself to the program and they are randomly assigned to a "home panel," a group of three or four trained community volunteers who work with clients throughout their involvement in the program. Once these three criteria are met, six overarching goals must be accomplished prior to a juvenile's drug court graduation.

Goals and Phases within the Drug Court Process

These six overarching goals must be accomplished by the juvenile prior to graduation: 1) obtaining and maintaining employment, or remain in school or university; 2) completing all court-ordered community-service obligations; 3) paying all fines and court costs; 4) providing proof of attendance to one's treatment provide and 12-step programs; 5) maintaining continuous contact with one's probation officer or their representative; and 6) providing evidence of continuous sobriety at the point of graduation through random urinalyses. Clients are expected to achieve these goals in four separate phrases.

Once a client achieves the primary objectives of each phase, the adolescent is expected to apply for and receive the court's permission to be promoted to the next phase. During Phase I, the panel's primary goal is client stabilization. The panel members and clients spend between three and five months meeting with the juvenile client during this phase. It allows the volunteer panel members to establish trust between the client, the probation officer, and all service providers with whom the juvenile works. The client is expected to provide proof of attending 12-step meetings, treatment sessions, and attending school. Other expectations include: 1) attending all assigned drug court hearings; 2) submitting urine samples for random alcohol and drug testing; 3) testing free of mood-altering substances; 4) being respectful in all relationships; and 5) obeying all laws and probationary terms. The panel members also provide short-term tutoring and academic advising to juvenile client during their monthly reports. During this phase, the panel members and clients learn about and discuss similar interests and passions. The panelists attempt to link these shared interests to the client's recovery by encouraging him or her to continue them unintoxicated.

As depicted in Figure 3, the panel members establish the four tenets of social bond theory by developing a rapport with the client during the first two to three months

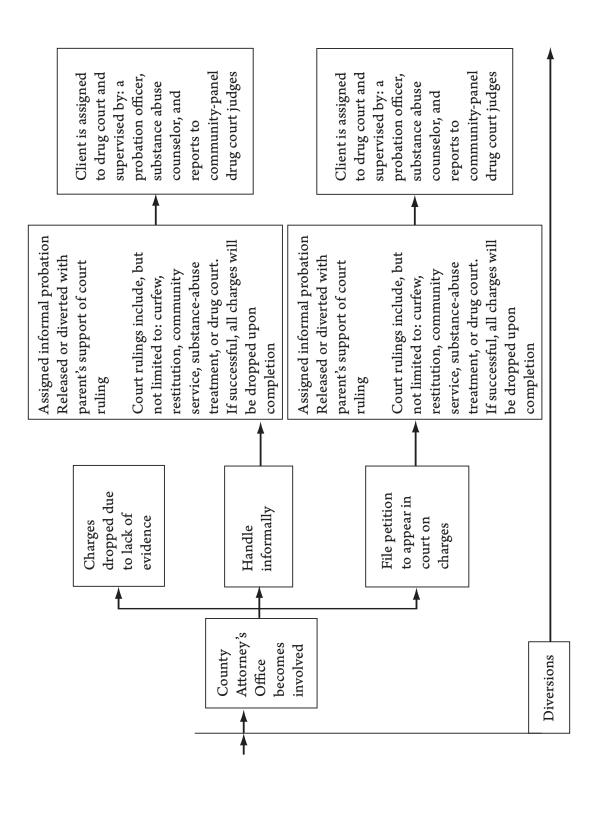
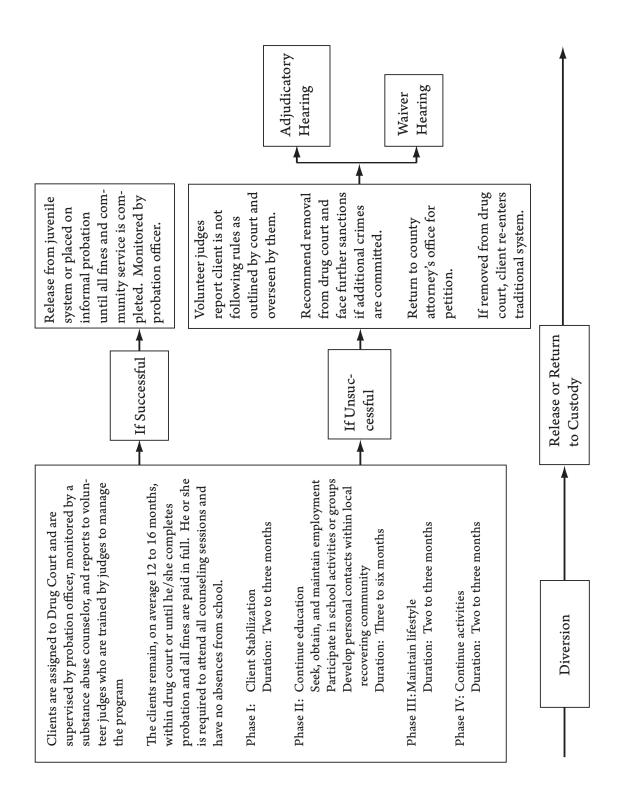


Figure 2. Juvenile Drug Court Process – Step 2



of their involvement. Juveniles are expected to "complete a comprehensive substance abuse evaluation and comply with drug court recommendations" and "terminate all relationships with drug-using associates and provide the drug court with a 'bad friends' list" (Third Judicial District 1999, p. 1). If a client recidivates, he or she is more likely to return to old behaviors during this bridge period between Phase I and Phase II.

Upon receiving the court's approval, the client advances to Phase II. This phase is commonly referred to as the acceptance phase of the community-panel drug court program. The clients are expected to be earnest in seeking stable employment or to continue educational requirements as well as seek relationships that are more meaningful with family members, friends and co-workers, teammates, teachers, or employers. They are required to follow their treatment plan which usually includes attending 12-step meetings, having a sponsor from Alcoholics Anonymous or Narcotics Anonymous, and reporting their progress to the panel. While enrolled in this phase, the teenagers are held more accountable for their actions and often seek the panel members' advice before dealing with a difficult situation. This is the longest and most work-intensive phase for clients, averaging between six to nine months. Clients are not promoted to Phase III until these goals are met.

Phase III is a maintenance phase for both the client and the judges. If successful, the client meets monthly with the panel members for an often jovial meeting between the client and all providers. The judges are working well together and they are more likely to share about relevant experiences they have in common with their clients. This is an approach that usually allows everyone to feel more comfortable and provides the client the opportunity to see that the lives of other mainstreamed persons is similar to their now "clean and sober" one. The client's see the new lifestyle is easier than the drug-using subculture, one to which the client belonged one year earlier.

At the fourth, and final, phase, the client is prepared for graduation as the need for a more structured environment is not deemed necessary. The client meets with the judges on average, about two to three months prior to a semi-formal graduation ceremony where family, friends, judges, and the probation officer have a small celebration (Niles, G., personal communication, February 28, 2005, 5 May, 2008). Upon completion, the client's records reflect their actions and charges are dropped. Their records can be sealed at the client's request. If all requirements are met, the client graduates from the drug court when Phase 4 is completed (See Figure 4). If the client is unsuccessful in drug court, he or she will face more challenging situations.

Regardless of the phase in which he or she is enrolled, overachieving clients receive rewards or incentives from the judges in the form of verbal praise, fine or community service hour reduction, coupons to local cinema or non-alcohol serving restaurants, and early promotion to the next phase. Intrinsic and extrinsic rewards are given more frequently during Phase II when the client is in the midst of the acceptance of their addiction to a drug or drugs of choice.

There are situations where the client is dismissed from the program. Early dismissal occurs when the client has overriding mental issues that cannot be controlled through medication or counseling and usually result in the client's inability to follow simple requirements. Also, the juvenile may be dismissed if he or she cannot make healthy life choices or their family inhibits the juvenile's ability to change their reaction to a stressful situation.

Unsuccessful adolescents are referred back to the sentencing judge to face additional sanctions. The client is referred to the supervising judge if he or she is re-arrested for crimes against another person, continued intoxication, or other serious misdemeanor or felony crimes. If the client's behavior does not improve, the judges can impose sanctions or incentives that are proportional to the client's actions. These sanctions include, but not limited to: 1) verbal admonishment; 2) increased number of community services; 3) placement in detention for up to 72 hours or until the client can be seen by a judge; or 4) removal from the program and a return to original sentence. If the client is not allowed to re-enter drug court, he or she will be transferred to a regular probation officer and face more serious legal challenges. These challenges can include, but are not limited to: admission into a long-term residential substance abuse treatment facility, transfer to the Iowa State Training School, or transfer to adult probation. However, a juvenile who is placed in foster care or a local treatment facility is usually not removed from the program; instead their participation is suspended until the client can be stabilized and returned to the program. If the client is transferred to the state training school, he or she may be allowed to return to the program upon completion. In most cases, the client does not return to the program because he or she will be enrolled in the program until age 18. At this point, the juvenile is transferred to adult probation for any supervisory requirements.

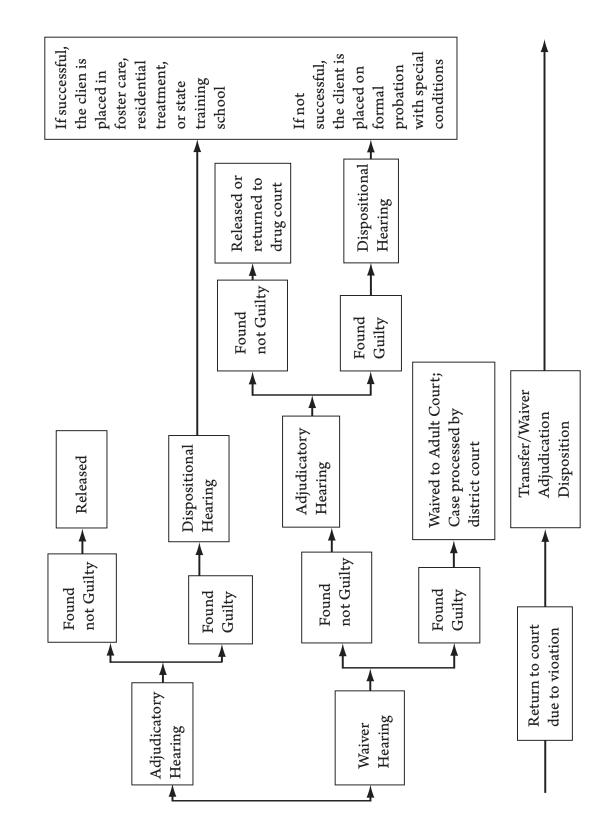


Figure 4. Juvenile Drug Court Process – Step 4

Organizational Impact on Success Rates

Woodbury County's drug court program is oldest of eight community panel-based programs in the United States. The other seven are less than three years old and are scattered throughout rural communities located in western Iowa. There are no known studies comparing the success rates between this form and other judge-based, juvenile drug court models. However, a comparison of individual reports shows this program may be more successful than judge based ones. The community-panel approach is the only variable that differentiates it from other American drug court programs.

A five-year follow-up study was conducted in 2005 and 2006 on the overall success rates of community-panel programs among 130 juveniles post-graduation (Vick & Lamb-Keating, 2007). The Internal Review Board at West Texas A&M University approved the research and a Certificate of Confidentiality was obtained from the U.S. Department of Health and Human Services. After both organizations approved the project, each client who participated in drug court as a juvenile, but was now an adult, was contacted by letter notifying them of the research project. Removing their names from all records, the former clients were informed that all unsealed juvenile records would be reviewed. Their names would be made available to the researchers on a separate sheet of paper so the researchers could check for any adult criminal activity within the State of Iowa and surrounding states. If they were not listed on any Internet database provided by these governments, the clients would be considered as rehabilitated. If the clients did not want to be part of the research, they were given contact information via their individualized letters and local radio and television announcements. Twenty-five percent of former drug court clients contacted their former juvenile probation officers or the researchers inquiring about the project. While they refused to be interviewed in person by one of the researchers, they were not opposed to anyone searching the Iowa Courts Online website to verify if they had been convicted of any crime post-drug court release.

Most clients were Caucasian males between 15 and 17 years of age when sentenced to drug court. Approximately 65% of the juveniles lived with one parent. In most cases, the client's parents were divorced, deceased, or never married and lived with their mothers and had at least one other sibling in the household. The juveniles lived in high-crime areas. Most were high school sophomores or juniors; yet, they were part-time students who held part-time jobs. Their primary drugs of choice were marijuana and alcohol. The average age of first drug use was thirteen and showed no symptoms of underlying mental or physical disorders other than an addiction.

Follow-up data showed 53.5% of all graduates received no citation or conviction past their graduation date. Only 26.7% of former drug court clients were arrested on alcohol or drug related charges. They were more likely to commit these crimes either immediately upon release or at 30, 60, 90 days, six months or one year post-release. The crimes seemed to have been committed at approximately the same time the former client received a chip or key tag from a 12-step program. The remaining 19.8% of clients were arrested and convicted on non-substance abuse, non-violent crimes. The national recidivism rate among judge-based, juvenile drug courts is estimated at 30.8%, a 22.5% increase over the national average (Roman, Townsend, & Bhati, 2003).

The only known variable that distinguishes this program from similar ones is the community-panel approach. Since there are only two other community-panel based programs in the United States, comparative studies are not possible at this time. Preliminary results show this approach may be more successful than judge-based programs. There may be other communities who are interested in implementing this model within a new or existing drug court but have questions about: 1) the impact these volunteers have on court structure, 2) how to select and train volunteers; and 3) how to monitor panel member interaction. The following section answers these questions by combining therapeutic jurisprudence and social bonds theory with leadership styles.

Impact of Volunteers on the Drug Court Clients and its Structure

Volunteer groups have varying organizational forms and are staffed by persons who share common goals, values, and beliefs (Fairholm, 2002). Most volunteer groups recruit volunteers who are sympathetic to their cause and provide a smooth transition between the entrance and end of an event. Because an application process and criminal background checks are required for final approval, the community-panel drug court program requires greater commitment from the volunteer. While this does not diminish the ease of participation, the volunteers' individual and collective commitment is essential for implementation and execution of these theoretical methods to be successful for the at-risk youth (Hughes & Wilson, 2003).

To maintain consistency among the judges' approach to assist substance-abusing youth avoid their former sub-

cultural activities, the volunteers are expected to meet certain requirements. First, these volunteers must be willing to donate three to four hours monthly to work with the clients. Secondly, they must commit to work with two to three other community members on a panel and work as a team with each of these adolescents. This section begins with a discussion on the history of and requirements for a community member to serve as a judge.

Criteria for Judges' Acceptance to Drug Court

The court system needed to recruit approximately 30 citizens who could serve on one of nine panels. The community advisors and judicial officials agreed to advertise for them in the local newspaper, the *Sioux City Journal*, in order to solicit interested persons. Since they are not required to have legal backgrounds, they must be willing to work closely with a judge and the client. Application forms were available from Juvenile Probation Services located in downtown Sioux City. Within one day of the announcement, the office received 87 completed applications (G. Niles, personal communication, February 28, 2005, [5 May, 2008]).

This unexpected, but welcomed level of support, forced the community leaders who spearheaded the movement and judicial employees to review and select judges from these applications; however, they also feared that anyone not selected would drop their support for the program. The applicants were ranked based upon professional backgrounds and their knowledge of substance abuse. They often lacked legal knowledge but had the intellectual fortitude and academic ability to work with offenders. In many cases, these professionals were recovering alcoholics and addicts who not only understood their client's plight but also their schemes and excuses. Those persons who were not selected were placed on a waiting list. As persons left the program or new panels were added, the courts had a list of community volunteers who were approved to serve.

Training Volunteers for Community-Panel Drug Courts

Once chosen, these community judges began a brief but intensive training with formal judges and probation officers on the following subjects: addiction; the organizational structure of the community-panel drug court program; the role and responsibilities of community judges; and the interaction between judicial, educational, and treatment providers in the area. Once completed, the panel members were assigned and began to meet with clients throughout their time in drug court. Furthermore, they were required to attend continuing training classes each quarter. Because these clients need consistency, volunteers who cannot participate for one quarter will be contacted by an official of the court and asked to support the program or resign.

Each month, the panel members meet with probation officers over dinner. The officers report the adolescent's monthly progress in treatment, school, extracurricular activities, work, attendance at 12-step meetings, and the like. The client's progression or digression is reported to a formal judge who oversees the entire project and executes the recommendations of the community panel. Based upon the client's progress, they make recommendations to encourage pro-social behaviors that are carried out by these systems.

Therapeutic jurisprudence and social bonds theory are applied when intrinsic or extrinsic rewards are provided to the juvenile by the volunteers. In most cases, the panel members learn during Phase I about the juvenile's interests and passions. They encourage the client to link their interests to recovery from their addiction. Examples include bringing examples of their art, literature, or music to court. The panel members assist them in finding tutoring or academic advising.

However, these rewards are usually given when the juvenile has performed exceptionally well or very poorly. If the client is performing well, the panel may recommend a reduction in community service hours, a short extension on their curfew hours, or traveling with student groups or family members to an out-of-town event. Often, the adolescent is asked to meet with a judge who will see their progress as well as that of the program. If the juvenile is not performing well, he or she will not be allowed to advance to another phase. Other options may include: increasing community service hours, reporting more frequently to one's probation officer, going for review before a judge, or being removed from drug court. While each panel follows drug court's policies and procedures, their approach to providing rewards, punishment, and the overall management style differs greatly.

Interaction between Judges and Leadership Impact

This section combines drug court's organizational impact with its values and vision, the cornerstones of leadership theory. These leadership theories and managerial patterns allow the community-panel judges and their juvenile clients to accomplish higher success rates, especially when they are compared to national results. The courts are particularly interested in the: 1) emerging patterns of interaction between the volunteer judges and clients; 2) development of a language between the judges and clients; and 3) existence of behavioral patterns between the individuals and other members of the group (Fairholm, 2002).

These three processes are important in linking therapeutic jurisprudence, social bonds theory, the community-panel drug court program, and the volunteer judges who work within it. Observing the judges' interactions links the mission statement and organizational goals to the practical application of the program's theoretical foundation. The leadership styles among these panels and volunteer judges demonstrates how these persons combine legitimized, hierarchical, judicial structure with personal power and influence between panel members and clients.

Methodology

The most appropriate technique for data collection was the participant-observer technique. This data collection method allowed for the leadership styles to develop and emerge within the group without formal interviews or direct interaction. The research team did not take an active role within the hearing without invitation or approval from a panel member. This is the primary control variable that is most difficult to maintain (Mason, 1996, p. 64; Lofland & Lofland, 1995, p. 18–22).

In an effort to balance the researcher's observation of the judges and participation in the program, the researcher provided factual information that would assist the panel or the client in making more informed decisions about the issue at hand. The researcher periodically served as an onsite court reporter for each of the panels from October, 2004, to October, 2006. One met with them during their briefings over dinner, prior to court hearings, as well as the volunteer judges' interactions with the clients. During the meetings, notes were taken on group interactions, and quantitative data were collected on the outcomes of the panel's clients post-graduation.

Results

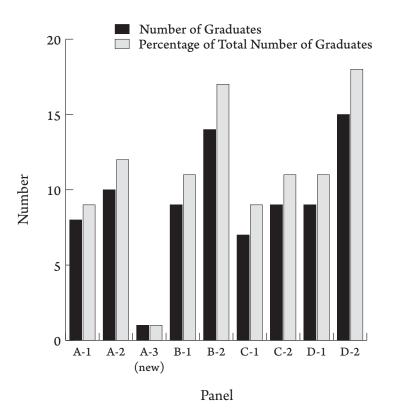
Over time, the panel members developed personal as well as professional friendships with their cohort. Two primary concerns dominated each of the panel's discussions at their monthly meetings. First, they were concerned about the legal or administrative issues surrounding clients who were in Phase I and II of their drug court stay. The volunteer judges were concerned there was a lack of coordinated effort between some of the agencies. Agency coordination is essential for therapeutic jurisprudence to work within a client's life. Other times, they were concerned the client still operated in a "black or white" mindset, meaning they still thought in extremes and were unable to moderate behaviors. Left unchanged, the client may think or act in ways that could prevent him or her from accepting prosocial norms; as a result, the panel members feared without strong application of these theories and organizational goals, the client could return to the substance-abusing subculture.

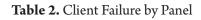
Fairholm's research (2002, p. 4–5) of the interaction between ecclesiastical groups can be applied toward the communication styles of other volunteer organizations. Five broad coding categories were used to define their verbal interactions: 1) concepts like group values, purpose, and direction with each client; 2) positive or negative tone, use of command and persuasive arguments; 3) presence of congenial conversation; 4) use of nonverbal communication techniques; and 5) the presence of an informal group leader and how this power was exerted within the group (p. 5). In majority of hearings, the panel members agreed with other volunteers over major client concerns. However, their use of nonverbal communication and presence of a congenial conversation or persuasive argument were the most commonly used forms that communicated an informal leadership style that linked their work to drug court's mission, goals, and theoretical philosophy of therapeutic jurisprudence and social bonds.

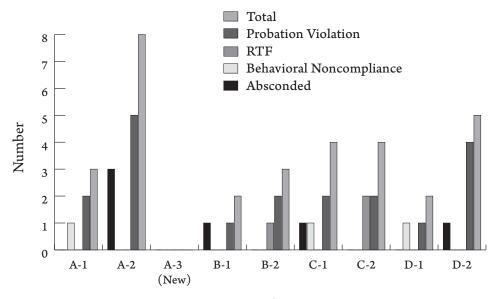
All 30 members used different forms of nonverbal cues to convey their thoughts about a client's behavior during the probation officer's briefing or in court. The most common of these were: nodding of the head, shuffling in the seat, leaning over the table towards the client, pushing one's chair closer to or further away from another panel member to influence decision making. These nonverbal cues were used to influence other judges or the clients. Furthermore, the volunteer judges would pass written notes to each other, whisper, or talk under one's breath at times. This happened when one of the judges was concerned about the client's health or if they suspected the client was intoxicated at a hearing. However, the leadership within each of the panels changed as the client's needs shifted.

The longer-serving judges or those who were recovering from their own addictions had a form of institutional memory that caused some judges and clients to refer to them for information. Some of these judges were part of the community group who initiated the drug court program. They appeared to have a sense of ownership with the program and their position within it; therefore, they held higher expectations for compliance among the juveniles who were involved in the program. Yet these ex-

Table 1. Success Rates by Panel









periences and community-wide connections assisted the client to more readily connect with mainstream society. Based on the client's body language, word usage, or sentence phrasing, these judges would determine if the juvenile client was sincere about remaining "clean and sober," or if they viewed the program as one that will keep them out of detention. In the end, these judges combined their institutional memory with their personal drug-using and recovering experiences to assist these juvenile clients obtain and maintain sobriety.

Panel Outcomes on Clients

The juveniles tended to bond with all of the judges between the three to five months of their drug court involvement; otherwise, they usually consumed alcohol and/or drugs and were removed from drug court. However, this attachment occurred with different people for different reasons.

The client's racial, gender, or sexual orientation appeared to have no major impact on one's overall drug court success. Some panels had slightly higher success rates with females or racial minorities (See Chart 1). Panels C-2, B-1, and D-2 appeared to have a slightly higher success rate when compared to other groups. Panel C-2 is the only panel that reported having a higher number of female than male graduates. Numerically, Panels B-2, B-1, D-2, and A-2 were more successful with persons who were a race other than Caucasian; however, there was no statistical significance.

In some cases, the juveniles related to those who were closer to their own age. While in others, they were more comfortable with someone who was much older. For example, if the adolescent was interested in attending college, he or she tended to bond with those who worked in their field of interest. Juveniles who required more medical attention attached themselves to those persons who worked in a medical field. If the client did bond with someone on their panel, they were more likely to listen to and work more closely with a volunteer panel member who was a member of a 12-step program like Alcoholics Anonymous, Narcotics Anonymous, or Alanon. As a result, the bond that formed between the judges and the adolescent shifted from one panel member to another, depending on the client's needs.

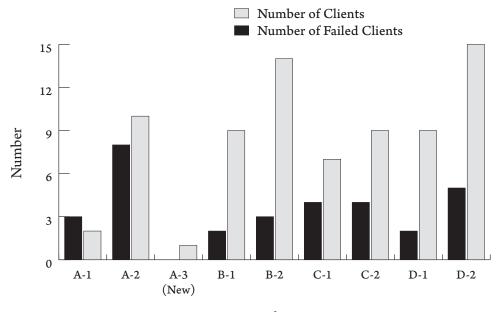


Table 3. Failed Drug Court Clients

Panel

There were some situations where these therapeutic or leadership theories did not work with the clients. It appears these situations occured within each panel regardless of their application of TJ, social bonds theory, and their leadership styles. While there were some panels who graduated a higher number of clients, the client failure rate was not significantly different for eight groups. Otherwise, training and reporting techniques, and attendance requirements for each panel were consistently followed throughout the life of the project. Furthermore, their success rates were below or equal to the national average of judge-based, drug court programs.

As discussed these clients were more likely to leave the program within the first three to five months after admission. Most of them committed one of the following four crimes or actions that led to their removal: absconded from area, behavioral noncompliance, sent to the Residential Treatment Facility (RTF) located within Woodbury County's correctional system, or committed a probation violation. Panels A-2 had the highest failure rates. There are several variables that may explain this phenomenon.

First, their clients were randomly assigned and may have been less likely to comply regardless of their assignment. Secondly, the clients ran away or violated probation prior to advancement to Phase II; therefore, they may not have bonded with these judges prior to these occurrences. They were more likely to run away or violate their probation prior to bonding with the judges. The panel composition was similar to all of its counterparts.

Conclusion

Americans have struggled with substance abuse throughout our existence. Based upon their beliefs and values, communities have responded to these problems with criminalization of a substance to absolute legalization. Drug courts are the most recent, and one of the most successful, responses to this social concern.

Woodbury County, Iowa, created the first community-panel drug court in the United States. The program's founders created, implemented, trained, and monitored an entire process that would allow juvenile drug and alcohol offenders a "last stop" to rehabilitation. To relieve judges' caseloads and reduce incarceration costs, the judicial system gained support by seeking and using citizens to serve as panel judges. As a result, the program has obtained one of the lowest recidivism rates in the United States. This was achieved by combining therapeutic jurisprudence and social bonds with leadership theories. These were reflected in the mission statement, goals, and drug court process for adolescents who were given the option to participate in it. Two other Iowa drug court programs were created using the Woodbury County model as their guide. Other drug court programs throughout the country may consider such options. By doing so, research into the drug court phenomenon would expand and allow for greater generalization and application.

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