

Summary

of

WA Diversion Program –
Evaluation Framework (POP/STIR/IDP)

Final Report

for the

Drug and Alcohol Office

Full report available from: <http://www.dao.health.wa.gov.au>

INTRODUCTION

This report is a summary of the *WA Diversion Program – Evaluation Framework [POP/STIR/IDP] Final Report* prepared for the Drug and Alcohol Office by the Crime Research Centre, University of Western Australia, May 2007.

The Pre-sentence Opportunity Program [POP], Indigenous Diversion Program [IDP] and Supervised Treatment Intervention Regime [STIR] are funded through the Council of Australian Governments' [COAG] Illicit Drug Diversion Initiative [IDDI] and form part of the West Australian Diversion Program. POP is available across most areas of the state, with IDP and STIR operating in regional areas.

Illicit drug use in Australia is widespread. Current estimates are that more than a third (38.1%) of Australians aged over fourteen years have used an illicit drug at least once, with more than one in six (15.3%) having used an illicit drug in the previous twelve months. The prevalence of illicit drug use among criminal offenders is considerably higher than in the general population, with estimates that more than sixty percent of incarcerated offenders regularly use illicit drugs prior to incarceration.

Significant improvements in all reported physical and mental health measures were recorded. Improvements ranged from approximately 45% to 65% of offenders reporting improvement at the end of the court diversion program for any one item [Table 2]. However, data collection has not been in use for a sufficiently long period to be able to gauge if these improvements are maintained over time following completion of the program.

Offenders reported a significant reduction in frequency of self-reported alcohol consumption, and a positive move closer to the NHMRC recommended healthy drinking guidelines. 20% of offenders were drinking daily at the start at the program, but no-one was drinking daily at program completion. More than 40% of offenders reported drinking less than once a week at the end of the program. This is a significant increase from approximately 5% at the start of the programs).

At the start of the court programs, approximately 75% of offenders reported using cannabis daily or almost daily. By the end of the program, this number had decreased to approximately 20%. Twenty percent of offenders were abstaining altogether from cannabis use at the end of the program.

At the start of the court programs, more than 75% of offenders reported using amphetamines more than once per week. By the end of the program, this number had decreased to approximately 10%. Sixty percent of offenders were abstaining from using amphetamines at the end of the program.

Where possible, data was linked across health and criminal justice systems in order to examine offending histories and post-program offending. The results of this analysis suggest that offenders referred to the three diversion programs typically have a long history of involvement with the criminal justice system with multiple previous arrests and offence charges.

For each program, those who completed the program [Table 1]:

- Were less likely to have been re-arrested (all offences and drug offences);
- Had a longer median time to first arrest;
- Were less likely to have been imprisoned post-program than those who did not complete the program; and
- Had lower re-arrest rates than were predicted by risk estimates.

Due to the small, non-representative sample used in this analysis, the results are best interpreted as providing an indication only.

The cost benefit analysis estimated the total cost of the three court diversion programs to the

COAG and the WA State Government across all sites and programs for the 2005-2006 financial year at \$3,915,705.68. This represents an investment of \$3,190.11 per client. The sensitivity analysis suggests that the cost per client in the POP and STIR programs can be significantly reduced by further increasing client numbers.

The legal analysis determined the three diversion programs are currently operating efficiently within the current legislation. No recommendations for legislative change were made.

The POP, IDP and STIR programs have now been implemented in a number of sites and are generally well regarded by most stakeholders and clients. Considerable progress has been made towards meeting best practice principles for drug diversion programs and the objectives of the three programs are well on their way to being met.

PRE SENTENCE OPPORTUNITY PROGRAM (POP)

POP provides an early intervention drug diversion program for low-level, often first time, offenders with some low-level drug use issues.

At the time of the evaluation, POP had been introduced to twelve courts in Western Australia. The program is widely seen as providing a useful addition to the array of diversion options. This is largely because it increases the potential impact of the court process on offenders. The program is perceived as optimising the possibilities of contact between treatment agencies and problematic drug users that might otherwise not seek out or become familiar with treatment services.

The program has strong supporters in both the treatment and justice sectors, but this is by no means universal. In any court, the views of the magistrate, in particular, have a strong influence on the number of referrals received. Where the magistrate is openly supportive of the program the decision to refer an offender to the program appears more likely.

The major issue facing the program appears to be increasing the number of offenders accessing the program. Related to this is the need to increase the credibility of the program particularly amongst magistrates, private defence lawyers and the Aboriginal Legal Service in order to increase the number of referrals.

INDIGENOUS DIVERSION PROGRAM (IDP)

IDP is a regional early intervention drug diversion program for Aboriginal or Torres Strait Islander people facing minor offences related to illicit drug use. As with POP and STIR, individuals charged with sexual, drug trafficking and high-level violent offences and those facing a mandatory prison sentence are ineligible.

Responses from treatment stakeholders were very positive encouraging the need for a diversionary option at the court stage and the use of residential programs. The programs success rates were perceived as significant as was the focus on the holistic approach and the role of family. Some concerns were raised regarding the legislative basis in that the realities of Aboriginal life in communities lacked significant acknowledgement. Community stakeholders identified suggested enhancement in the area of youth mental health and outreach in remote communities.

Only a small selection of clients was interviewed. All clients interviewed reported that the treatment program was very good and made a big difference to them.

SUPERVISED TREATMENT INTERVENTION PROGRAM (STIR)

STIR targets moderate-level offenders with more entrenched drug use. Along with widespread support from stakeholders there has been interest for the extension of the STIR program to individuals with alcohol (as a priority) and volatile substance use issues.*

There have been issues regarding the perceived additional workload that STIR imposes on magistrates, court staff and Community Correction Officers [CCOs]. Within the courts, there has been no official recognition of the increased workload associated with STIR for magistrates or court staff. Despite these concerns, CCOs were generally satisfied with their role in relation to the STIR program, and stressed the need for effective close working relationships to be developed with other stakeholders.

A further issue raised in relation to the STIR program was transportation issues for those offenders who live outside the regional centre. The lack of vehicle and/or driving license makes it difficult for some offenders to attend regular treatment, supervision and review sessions. Apart from transportation issues there were few problems perceived in terms of offenders who were suitable for the program not being able to access STIR.

Treatment service availability outside of the metropolitan area was described as relatively limited. This extended to facilities for those with mental health issues faced by some offenders with drug problems. This was particularly noted of offenders with more entrenched drug use and/or criminal behaviour.

Treatment stakeholders were supportive of the STIR program and expressed a high level of satisfaction with their role in the program. STIR was seen as providing a more intensive level of treatment and supervision than POP or IDP for offenders with more entrenched drug use and/or criminal histories. General support was expressed for expanding the program to include alcohol and volatile substances and extending the program to offenders with minor violent offences.*

Concern was raised over the limited treatment resources available, particularly residential treatment facilities. Comorbidities are high among drug users and the lack of access to facilities for offenders with drug issues who were also mentally ill was noted. There was some support for increasing the types of services provided to include health and other lifestyle issues. The general issue of through-care and the need for more resources to meet this need was raised.

A major concern in relation to STIR was the relatively low number of referrals and placements. Some support was expressed for expanding the program to the metropolitan area or for making the program mandatory. However, not all treatment stakeholders support these options.

Key issues include:

- The exclusion of alcohol and volatiles*;
- Access to ancillary supportive services in the area of mental health treatment;
- Access to ancillary supportive services for residential treatment facilities;
- The need for appropriate Indigenous treatment programs;
- Resourcing for Community Justice Services; and
- Urinalysis.

* The COAG IDDI Framework & Service Agreement with the Commonwealth explicitly restricts alcohol and volatile substance use.

PROGRAM COMPLIANCE & DEMOGRAPHICS

All programs had increased compliance (as measured by program expiation) over previous years with similar occurrence for client presentation at first treatment session. For those on STIR, as would be expected, these offenders are more likely to be opiate users and have an injecting history in comparison to POP and IDP. An on going concern is declining participation rates of Indigenous people in the STIR program.

OFFENDING HISTORIES, SENTENCING OUTCOMES & RECIDIVISM RATES

Results of the analysis of offending histories, sentencing outcomes and post-diversion referral recidivism were reported for a subset of court diversion clients who commenced POP, STIR or IDP prior to the 2005/2006 financial year. Due to difficulties in data collection and matching, the sample is small [135 episodes for 134 offenders] and interpreted as providing an indication only.

The results of this analysis suggest that offenders referred to the three diversion programs:

- Typically have a long history of involvement with the criminal justice system with multiple previous arrests and offence charges; and
- POP and STIR clients who completed the program were more likely to be fined or placed on a Community Based Order and less likely to be placed on an Intensive Supervision Order than those who did not complete.
- Those who completed the program were:
 - Less likely to have been re-arrested (all offences and drug offences);
 - Had a longer median time to first arrest;
 - Were less likely to have been imprisoned post-program than those who did not complete the program; and
 - Had lower re-arrest rates than were predicted by risk estimates.
- Indicated reduced likelihood of offending following the program:
 - Approximately 30% of offenders completing any of the three programs re-offended within a 12 month period after program completion. This compared to 86.9% of offenders who did not complete the program re-offending within the same time frame.

Table 1. Percentage arrested within first 6, 12, 18 and 24 months by program and outcome.

| Program & Outcome | % Arrested | | | | | | | |
|----------------------|------------|----|-----------|----|-----------|----|-----------|---|
| | 6 months | N | 12 months | N | 18 months | N | 24 months | N |
| POP | | | | | | | | |
| completed | 25.8% | 31 | 30% | 10 | 75% | 4 | 66.7% | 3 |
| non-compliance | 54.5% | 11 | 85.7% | 7 | 80% | 5 | 100% | 4 |
| STIR | | | | | | | | |
| completed | 29.7% | 37 | 30.4% | 23 | 33.3% | 12 | 33.3% | 3 |
| non-compliance | 66.7% | 18 | 75% | 12 | 60.0% | 5 | 100.0% | 1 |
| IDP | | | | | | | | |
| completed | 30.4% | 23 | 30.4% | 16 | 50% | 4 | | 0 |
| non-compliance | 81.8% | 11 | 100% | 10 | 100% | 5 | | 0 |

ESTIMATING PROGRAM EFFECTS

Data was obtained from participants in the POP program by administering two assessment tools. The SF8 and the Alcohol, Smoking and Substance Involvement Screening Test [ASSIST]. The SF8 provides a measure of physical, mental and emotional functioning. The SF8 consists of eight items with multiple choice response options [Table 2.]. It is a valid and reliable measure of health that is used widely in health research internationally.

The ASSIST was developed for the World Health Organization. Four questions from the ASSIST [version 3] were selected and modified to ask about drug use in the past 4 weeks only. These provide a measure of frequency of use; desire to use; health, social, legal or financial problems; and failure to meet expectations in the past month. These forms have not been in use for a sufficiently long period to be able to gauge if these improvements are maintained over time following completion of the program.

Drug Use

There was a significant reduction in the frequency of self-reported drug use at the time of completion of POP. In addition data obtained from clients nearing completion of their court diversion program suggests that reduction or cessation of drug use was evident and practised while in program.

Key findings including benefits experienced by clients who completed a court diversion program were:

- Reduced drug use:
 - Significant reduction in frequency of self-reported alcohol consumption, and a positive move closer to the NHMRC recommended healthy drinking guidelines. Despite 20% of offenders reported drinking daily at the start of the program, no-one reported drinking daily at program completion. 40% of offenders reported drinking less than once a week at the end of the program, a significant increase from approximately 5% at the start of the program.
 - Cannabis use was reported as a daily or almost daily occurrence for 75% of offenders at the start of program. Post program this number had decreased to approximately 20%. Furthermore, an additional 20% reported abstaining from cannabis use altogether at completion of their diversion program.
 - More than 75% of offenders reported using amphetamines more than once per week. By the end of the program this number had decreased to approximately 10%. Sixty percent of offenders reported abstaining from using amphetamines at the end of the program.

Mental and Physical Health

Changes in POP clients' mental and physical health were assessed based on comparing pre- and post scores on SF8. There was a significant increase in emotional wellbeing and a small significant increase in physical functioning between the time of first assessment and completion of the POP program.

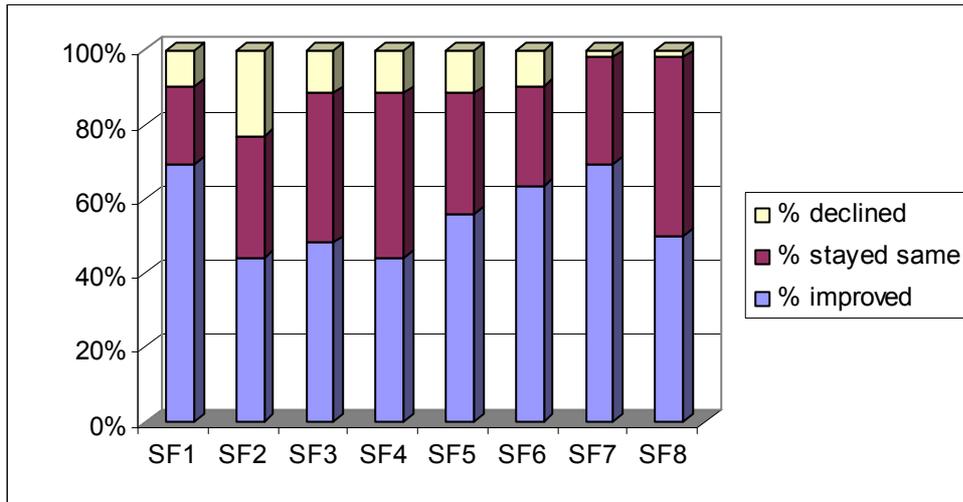
In addition, some clients interviewed nearing or upon completion of their court diversion program were asked about changes experienced since completing the program. The majority of POP and STIR clients interviewed reported improvements in physical and mental health. In addition, more than half of clients interviewed reported improvements in relationships and some reported improvements in education and employment prospects.

Key findings including benefits experienced by clients who completed a court diversion program were:

- Improvements to physical and mental health:
 - Significant improvements were reported in all areas of physical and mental health, with reported improvements ranging from 45% through to 65% at the end of the program for any one item.
- Positive developments in relationships during the program; and

Further monitoring is required to determine if these positive health and wellbeing outcomes are maintained post-program. The positive benefits experienced by clients may translate to positive benefits for the community in terms of reduced criminal activity.

Table 2. Percentage of respondents who reported improvements on the SF8 by item.



- SF 1 - Overall, how would you rate your health during the past 4 weeks?
- SF 2 - During the past 4 weeks, how much did physical health problems limit your usual physical activities (such as walking or climbing stairs)?
- SF 3 - During the past 4 weeks, how much difficulty did you have doing your daily work, both at home and away from home, because of your physical health?
- SF 4 - How much bodily pain have you had during the past 4 weeks?
- SF 5 - During the past 4 weeks, how much energy did you have?
- SF 6 - During the past 4 weeks, how much did your physical health or emotional problems limit your usual social activities with family or friends?
- SF 7 - During the past 4 weeks, how much have you been bothered by emotional problems (such as feeling anxious, depressed or irritable)?
- SF 8 - During the past 4 weeks, how much did personal or emotional problems keep you from doing your usual work, school or other daily activities?

COST BENEFIT ANALYSIS

The total cost of the three court diversion programs to the COAG IDDI and the WA State Government across all sites and programs for the 2005/2006 financial year was estimated at \$3,915,705.68 [Table 3]. This represents an investment of \$3,190.11 per client [Table 4]. The sensitivity analysis suggests that the cost per client in the POP and STIR programs can be significantly reduced by further increasing client numbers.

Table 3. Total costs and total costs/client across locations for 2005/2006.

| Agency Location | Total Episodes | COAG | DCS | DotAG | Total costs | Total cost per client |
|------------------------|-----------------------|-----------------------|---------------------|---------------------|-----------------------|------------------------------|
| Metro area | 930 | \$2,392,453.27 | \$100,132.22 | \$115,284.17 | \$2,607,869.65 | \$2,804.16 |
| Regional | 294 | \$1,132,547.03 | \$83,061.66 | \$92,227.33 | \$1,307,836.03 | \$4,448.42 |
| TOTAL | 1,224 | \$3,525,000.30 | \$183,193.88 | \$207,511.50 | \$3,915,705.68 | \$3,199.11 |

Overall, the estimated cost of the three programs to the three departments was almost \$4.0m. Of this, COAG IDDI provides 90% of the total funding and DCS and DotAG provide 5% each through additional services provided by magistrates, court staff and community corrections officers. The average cost per client approximates \$3,200.

Table 4. Total cost and cost per client by program.

| Program | Total Cost | Cost per Client |
|----------------|-----------------------|------------------------|
| POP | \$2,351,057.36 | \$2,416.30 |
| STIR | \$1,140,112.25 | \$9,048.51 |
| IDP | \$424,536.07 | \$3,396.29 |
| Total | \$3,915,705.68 | \$3,190.11 |

Effects of Increasing Client Numbers

The effect of increasing the numbers of POP clients can result in a major reduction in the cost per client:

- 10% increase in POP clients = 9% reduction in cost per client (\$2,199.21);
- 25% increase in POP clients = 20% reduction in cost per client (\$1,937.76); and
- 50% increase in POP clients = 33% reduction in cost per client (\$1,617.51).

The effect of increasing the numbers of STIR clients can result in a major reduction in the cost per client:

- 10% increase in STIR clients = 2% reduction in cost per client (\$8,488.60);
- 25% increase in STIR clients = 9% reduction in cost per client (\$7,845.69); and
- 50% increase in STIR clients = 18% reduction in cost per client (\$7,085.32).

While the percentage reduction per client is smaller for STIR than POP, the absolute amount per client is larger. It should be noted that increasing STIR clients will also result in increasing costs to DCS and DotAG.

At the time of the evaluation, the IDP program had been fully implemented in only one site, the Kimberley. An analysis of increasing numbers is inappropriate as the one IDP Project Officer was working to capacity.*

* IDP in the Kimberley has expanded to additional project officers since the evaluation. Additional locations have commenced operation since the evaluation was undertaken.

LEGAL ANALYSIS

Some of the legal and procedural issues have now been reduced in significance as a result of legislative change, though the order that was designed to accommodate the Drug Court's operations, the Pre Sentence Order (PSO), is not without its theoretical and practical problems.

The Chief Magistrate and the Deputy Chief Magistrate commented that there would be nothing that they would recommend with respect to legislative change. Furthermore, it seems likely that any attempt to 'codify' current practices in legislation would stymie the ability of magistrates to innovate and to work around any changes that may occur to funding and other arrangements.

RECOMMENDATIONS

The evaluation report includes 64 recommendations. There were 57 from stages one and two focusing on process issues which have been implemented or are in the process of implementation. There were seven further recommendations developed which focus on outcome measurement issues. These are separated into two broad areas and are examined below:

Health and Drug Outcomes

There are four recommendations relating to the improved recording of information, specifically, the use of SF8 and Assist forms; reassessment of program participants post completion; and the development of new data bases to record this information.

Criminal Justice Outcomes

There are three recommendations regarding the continued monitoring of criminal justice outcomes including the development of a unique identifier to be recorded in PICASO; amendments to PICASO; and consideration of transforming identifiers recorded in the database to date to enable a fuller evaluation of criminal justice outcomes to date.

The key challenge for the future is consolidating the programs within the existing sites. There is a need to maintain the current focus on increasing client numbers. The cost-benefit analysis demonstrates the considerable cost reduction per client that may be achievable if the numbers in programs increase. Continued monitoring and evaluation of program outcomes will be required.