

Smarter Solutions for Crime Reduction: The Illinois Criminal Justice Information Authority Strategic Planning Initiative

PROBLEM-SOLVING COURTS

Traditional court processes are designed to determine guilt and then punish offenders who are found guilty. An offender's mental, substance abuse, and other underlying issues are often overlooked. Problem-solving courts attempt to get at the root of what may be contributing to offending behavior. Also called specialty courts, problem solving courts address specialized populations. Drug courts handle only drug-involved offenders in need of substance abuse treatment or other interventions. Mental health courts only address offenders in need of mental health treatment.

Domestic violence courts also have been created to ensure the safety and rights of victims while mandating close supervision of the offender.

Veteran's courts have been created to acknowledge the special debt owed to returning servicemen and women with substance use and psychological issues. In addition, community courts have been formed to allow individual communities to address low-level offenders who negatively impact their neighborhoods.

New models for problem-solving courts are likely to appear as local criminal justice practitioners find that certain types of offenders may benefit from the combination of case planning, sanctions, and treatment.

Characteristics of problem-solving courts

The problem-solving court model includes a judge, prosecutor, public defender, probation officer, social worker or case manager, treatment provider, and other justice system partners who work together to determine an appropriate combination of sanctions and treatment. Problem-solving courts focus on establishing or restoring offenders as contributing members of society through a balanced approach of treatment and supervision.

Similarities

While eligible populations for specialized courts vary depending on the jurisdiction, the following components remain constant:

- **Voluntary participation.** In most cases, individuals must be willing to participate in the program.
- **Dedicated resources.** Problem-solving courts are either housed in a separate facility or in a dedicated courtroom. This adds to the specialized focus of these models.
- **Clear incentives and sanctions.** To encourage compliance, problem-solving courts must offer clear incentives. Depending on the model, these incentives may be the prospect of dismissed charges, avoiding incarceration, or smaller rewards, such as movie tickets or restaurant vouchers. Sanctions are clear and consistent so that the legitimacy of the process is enhanced.
- **Non-adversarial approach.** Judges, prosecutors, and the defense are invested in assisting the offender with accepting responsibility for his or her actions and completing the program, rather than putting focusing on punishment.
- **Individualized case planning.** The courtroom workgroup (judge, prosecution, defense, other administrative staff) create an individual plan for treatment, including available incentives and sanctions, that assesses and addresses the needs of the individual and outlines a specific timeline for completion.
- **Active judiciary.** Judges in problem-solving courts become invested in the success of the offender, taking time to monitor progress, praise compliance, and sanction non-compliance.
- **Dedicated treatment provider.** Studies have shown that problem-solving courts with a

dedicated treatment provider are more likely to have positive outcomes (Wilson, Mitchell, & MacKenzie, 2006). These studies suggest that providers utilizing evidence-based treatment practices, such as a therapeutic community and cognitive-behavioral therapy, are especially effective.

- **Graduation.** Problem-solving courts incorporate graduation exercises, ranging from a certificate of completion to a ceremony in the courtroom, to establish a sense of accomplishment in the ability to see a responsibility through to its end.

Differences

Specialized populations handled within each type of problem-solving court require some unique approaches.

Drug courts

Drug court populations are limited to individuals with substance use disorders. In many cases, drug courts focus on lower-level drug offenders who show willingness to participate in treatment. Some drug courts accept individuals who commit crimes, such as burglary or theft, to sustain a drug habit.

Unique drug court components include:

- **Offenders with substance use disorders.** Some courts accept offenders with a substance use/abuse disorder generally, while others cover offenders with specific drug-related crimes.
- **Pre-plea or pre-adjudication/conviction models.** Pre-plea or pre-adjudication/conviction models identify eligible individuals prior to case processing. This approach creates an opportunity for dropped or dismissed charges upon successful program completion. Post-plea or post-adjudication/conviction models require offenders to plead guilty and waive their right to a trial. These drug courts use avoidance of

incarceration as an incentive for the offender to remain compliant with program conditions.

Mental health courts

Mental health court populations are composed of individuals who have a diagnosed mental illness, and who can consent to and follow the court's case plan. Components applicable to mental health courts include:

- **Offenders with mental illness.** Mental health courts accept individuals with serious mental illness, and usually require either an Axis I (disorders requiring clinical attention) or Axis II (personality disorders) diagnosis. Rather than base eligibility on offense type, mental health court participants have been diagnosed with a treatment need.
- **No offense type restrictions.** Unlike drug courts, mental health courts are not restricted to individuals who commit certain offenses. Although some mental health courts do not allow violent offenders or sex offenders, an increasing number of these courts are allowing individuals with mental health needs who commit violent offenses.
- **Specialized training.** Mental health court staff receives specialized training on how to safely and effectively interact with mentally ill offenders. This is a necessity for individuals working with these populations.

Veteran's courts

Veteran's court populations are composed of veterans with substance use disorders and/or mental health issues, or whose military service warrants a specialized and restorative approach to justice. Components applicable to veteran's courts include:

- **Veteran populations.** Veteran's court populations are returning soldiers who are suffering from substance use disorders and/or mental health problems and who have come into contact with the criminal justice system. These individuals are eligible based not on a specific crime or treatment need, but because of their recognized special status as veterans.

- **Hybrid model.** Because veteran’s courts often handle individuals who have co-occurring disorders (substance abuse and mental health), many veteran’s courts have adopted a model that includes components of both drug courts and mental health courts. In these cases, the emphasis is on treatment and progress.
- **Treatment not always required.** In some cases, veteran’s court participants are not in need of treatment for substance use disorders or mental illness, but require an opportunity to be re-integrated into the community. In these cases, individuals may receive essential daily life skills assistance, such as job training, group discussion sessions to discuss and process traumatic events, or other professional or communal opportunities.

Domestic violence courts

While other types of problem-solving courts follow therapeutic models designed to restore individuals as productive members of society, domestic violence courts target individuals who may not necessarily be in need of traditional treatment. The components unique to domestic violence courts include:

- **Domestic violence populations.** Domestic violence offenders are eligible for this court because of their offenses, rather than special treatment needs.
- **Victim-focused.** Domestic violence courts are unique because they are intentionally responsive to the needs of the victim. They address orders of protection, custody and marital concerns, and provide support services.
- **Accountability-oriented.** Domestic violence courts focus primarily on holding the offenders accountable. These offenders are more closely supervised, may have more strict court conditions, and still undergo criminal proceedings.
- **Integration of services.** Although other problem-solving models integrate treatment into the supervision process, some domestic violence courts integrate all facets of family

law into a single courtroom. In this model, a the same judge in the same courtroom assists victims in obtaining orders of protection, addressing custody issues, initiating divorce proceedings, and all other criminal proceedings related to the case. This helps to avoid conflicting orders from different judges.

Evidence for problem solving courts

Drug courts

Drug courts have been around since the late 1980s, and are the most studied of the problem-solving court models. Hundreds of evaluations of drug court programs have been conducted over the last 20 years. Summaries of many of these studies, or “meta-analyses,” have shown that drug court programs can improve outcomes if they follow a clear model and closely integrate treatment into the court process.

For example, a meta-analysis of 55 drug courts (Wilson, Mitchell, & MacKenzie, 2006) revealed a positive effect of the courts on recidivism. Even more compelling is the finding that the program effects do not seem to decay, or lessen over time. While a few individual studies revealed some decay of programming effects post- graduation, most studies showed re-offending over time was lower for drug court graduates than for comparison groups who went through traditional court processes.

Other meta-analyses have shown similar positive effects for drug court participation. In a study by Belenko (2001), drug court participants were consistently found to have fewer in-program arrests than comparison groups. Further, most comparison studies showed drug court participation lowered the rate of criminal recidivism.

While the literature on the effectiveness of drug courts is mostly positive, it is important to note that not every study shows positive outcomes. A small number of studies have found no relationship between drug court participation and

recidivism, and a few have found that participation resulted in higher recidivism rates. Studies showing no impact or negative impact are important to consider, but the effectiveness of drug courts has been sufficiently tested and documented.

Evidence to show that drug courts reduce costs also exists, with much of the savings coming from reduced reliance on incarceration. One of the most important factors in designing an effective drug court seems to be having a clear model. Programs that are either distinctly pre-plea or post-plea have greater chances of success than mixed or ad hoc models, where the judge chooses how each case will be handled (Wilson, Mitchell, & MacKenzie, 2006). Incentives and sanctions are also extremely important in effective drug courts. Having a clear reward (dropped charges in pre-plea and avoiding incarceration in post-plea) gives the offender a real stake in completing the program. Studies have found that the offender's perception of legal pressure and clear judicial sanctions can lead to longer stays in treatment, which is crucial to success. Another important program element is the treatment provider. More successful court programs were found to use a dedicated treatment provider (Wilson, Mitchell, & MacKenzie, 2006). Existing literature suggests that a dedicated provider is more likely to use evidence-based treatment practices, such as cognitive-behavioral therapy. A dedicated provider can foster increased integration with the court and the community component (service providers and community supervision), which is one of the goals of the drug court model.

Mental health courts

While less research is available due to their more recent emergence, existing studies on mental health courts have shown many positive and promising outcomes. A review of the literature on mental health courts showed that mental health court participants have lower recidivism rates overall than individuals with mental illness who go through traditional court processes

(Almquist & Dodd, 2009). Further, some evidence supports the claim that this positive effect continues after graduation. The results may be due to the fact that the mental health court model is generally much better at linking individuals to mental health treatment than regular courts, due to its focus on treatment. Additionally, there is some evidence to suggest that mental health courts can help lower costs to the criminal justice system both immediately and over time (Almquist & Dodd, 2009). Most of this comes from reduced system involvement by offenders who receive treatment, reduced use of incarceration, and less reliance on more expensive treatment options. While the evidence for the effects of mental health courts is promising, a lack of research exists on what types of offenders they are most effective in treating.

Domestic violence courts

Domestic violence courts also have only a small pool of research detailing their effectiveness. Some evaluations have shown that domestic violence courts have lower rates of case dismissals than traditional courts (Gover, MacDonald, & Alpert, 2003). Research has also shown that domestic violence courts are effective at linking offenders to substance abuse treatment, and that participants have lower rates of same-victim incidents than comparison groups (Gover, MacDonald, & Alpert, 2003).

A study of domestic violence courts found that participants in a rural jurisdiction had lower odds of recidivism than individuals who went through traditional courts in these areas (Gover, MacDonald, & Alpert, 2003). The author suggests that a coordinated response from law enforcement, mental health providers, and the courts can be effective in combating domestic violence. These effects may also be due to the increased integration of domestic violence courts, with a dedicated workgroup to provide vertical prosecution and case processing, and increased integration with treatment providers for both victims and offenders.

Anecdotal evidence indicates victims have increased access to services when their cases go through domestic violence courts (Gover, MacDonald, & Alpert, 2003). In addition, some courts have seen dismissals decrease, guilty pleas increase, and probation violation rates decrease (Gover, MacDonald, & Alpert, 2003).

Other problem-solving courts

Little empirical research is available on veteran's courts and community courts. Because both are relatively new, more time is needed to build a base of literature on effectiveness.

Resources for problem-solving court implementation

[National Center for State Courts](http://www.ncsc.org/)
(<http://www.ncsc.org/>)

This non-profit organization provides research, education, and consulting to help courts plan, make decisions, and implement improvements, while ensuring judicial administration that supports fair and impartial decision-making.

Drug courts

[National Association of Drug Court Professionals](http://www.nadcp.org/)
(<http://www.nadcp.org/>)

This site is useful for administrators considering implementing the drug court model in their jurisdiction. It provides basic information on the drug court model, including descriptions of active drug courts, evidence for program outcomes, and a program locator tool. The site also contains links to training resources from the National Drug Court Institute. Information is also available for administrators interested in establishing veteran's courts.

[Illinois Association of Drug Court Professionals](http://www.iadcp.org/)
(<http://www.iadcp.org/>)

This site provides information on active drug courts in Illinois. Contact information is

available for the drug court administrators of the 32 county-level drug courts. Information is also available on drug court resources, as well as applicable Illinois law, including legislation concerning funding for new drug court implementation.

Mental health courts

[Consensus Project](http://consensusproject.org/) (<http://consensusproject.org/>)

The Consensus Project is a collaboration between the Council for State Governments and the Bureau of Justice Assistance that specifically addresses criminal justice and mental health issues. The site provides information on specific issue areas, resources for implementation, and technical assistance. Resources include publications and program guides, a local program database, and a research and documentation library.

This site provides links to specific Illinois mental health court and treatment programs.

Domestic violence courts

[Center for Court Innovation](http://www.courtinnovation.org/)
(<http://www.courtinnovation.org/>)

This site provides information on domestic violence courts and other specialty courts, including information on specific programs and outcomes, demonstration projects, and expert assistance on domestic violence court questions.

[Illinois Family Violence Coordinating Councils](http://www.ifvcc.org/)
(<http://www.ifvcc.org/>)

This link explains briefly the Domestic Violence Court Systems project conducted in Illinois. The IFVCC visited domestic violence courts across the state to gather information on effective procedures and practices. Program summaries are available on Cook County and other domestic violence courts.

Fact sheets, guides, and other sources

[Defining Drug Courts: The Key Components](#)

Provides the 10 key components for an effective drug court, including proper performance measurements.

[Bureau of Justice Assistance Drug Court Grant Program](#)

Describes available federal funding opportunities for drug court implementation and enhancement.

[Improving Responses to People with Mental Illness: The Essential Elements of a Mental Health Court](#)

Provides 10 key components for establishing a mental health court aimed at improving the justice system's response to people with mental illness.

[Mental Health Courts: A Guide to Research-Informed Policy and Practice](#)

Provides a detailed guide of the design and function of mental health courts and research on mental health court outcomes. Includes brief research findings, program descriptions, and overviews of different court designs and functions.

[Bureau of Justice Assistance Mental Health Courts Program](#)

Provides information on funding sources for implementing mental health courts. It also outlines some services provided by BJA to mental health courts, including technical assistance. Related publications and other national resources also are included.

[IFVCC Domestic Violence Court System Project](#)

This document provides a summary of the Domestic Violence Court Systems Project. Compiled using interviews with domestic

violence court practitioners across the state, this report discusses the components of domestic violence courts in Illinois that lead to successful outcomes, and the challenges that these courts face.

[New York State Domestic Violence Court Fact Sheet](#)

This fact sheet provides a quick list of the components of New York's domestic violence court programs, including court program operations in New York City, and information on integrated domestic violence courts in the state.

[Specialized Domestic Violence Court Systems](#)

A brief overview of domestic violence courts and integrated domestic violence courts. Includes some links to outside resources regarding domestic violence courts.

[National Association of Drug Court Professionals Veterans Treatment Court Resources](#)

This site includes information on veteran's court approaches, literature describing active programs, and implementation guides and other resources.

[Buffalo Veteran's Court: Mentoring and Veteran's Hospital Program Policy and Procedure Manual](#)

This document contains information specific to the Buffalo, NY, veteran's court model. It includes an introduction to the Buffalo problem, and the 10 key components that the court followed in implementing a program

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This project was supported by Grant #2009-SU-B9-0055, awarded by the Bureau of Justice Assistance, Office of Justice Programs, U.S. Department of Justice. Opinions contained in this document are those of the author and do not necessarily represent the official position or policies of the U.S. Department of Justice.