Addiction Court Support: Evaluation Report

**Prepared for Stonehenge Therapeutic Community**

Individuals who experience addiction/mental health challenges and who are involved with the criminal justice system frequently experience a cycle of release and return in which they are released with bail conditions, have trouble meeting these conditions, experience ongoing instability and crisis, get re-arrested and returned to jail. They experience challenges navigating the justice system, including understanding their bail conditions and overcoming barriers in order to be able to meet them. Furthermore, they are often disconnected from the services for which they are eligible and that could assist them in getting the treatment and supports they need.[[1]](#footnote-1), [[2]](#footnote-2) Studies have shown that connecting these individuals to support and treatment programs can break the cycle of release and return to jail. [[3]](#footnote-3)

The Addictions Court Support (ACS) program was designed to create a direct link between the addiction treatment and justice systems. It was intended to make support available to substance-involved individuals who are in conflict with the law at key points in time when motivation to make or maintain change is likely to be high: at bail court, and upon preparation for release from incarceration. The program focused on providing motivational counselling interventions and connections to needed services, as well as supporting individuals to navigate the court system and successfully meet their bail conditions.

The program involved one outreach worker employed by Stonehenge Therapeutic Community. Intended outcomes for participants in this program were:

* Increased connections to addiction treatment, community supports and services
* Decreased interactions with police
* Healthier and safer choices regarding substance use

In addition to these outcomes, the program was also intended to add value to the justice system by improving relationships between justice and addiction services and providing education and support to police, probation and parole, attorneys and the court in their work with individuals dealing with addiction issues.

The program was piloted by Stonehenge Therapeutic Community in 2016/2017 and funding for the program ended in March of 2017. During that time, the outreach worker connected with 150 individuals.

This report presents evaluation findings for the ACS program.

# Evaluation Overview

An outcomes evaluation of the ACS program was completed as the program was coming to an end. Key evaluation questions included:

1. To what extent were program outcomes achieved?
2. What difference did the program make for individuals connected to the outreach worker?
3. What value did the program add from the perspective of key stakeholders?
4. What opportunities are there for program development?

To answer these questions, the following evaluation methods were employed:

* **Output Tracking.** The outreach worker kept track of the number of individuals connected to the program and the number of referrals made in the course of their work with the program
* **Key informant interviews.** Five key informant interviews were completed by telephone with: the police, probation and parole, defense and crown attorneys, and the court. Each interview took about 30 minutes, during which the impact of ACS on each individual’s work and their community was discussed. Strengths and areas of growth for the program were also explored.
* **Survey.** 25 surveys were completed by people who connected with the ACS worker. The survey asked about support received, outcomes, and what more they needed.

# Evaluation Findings

Overall, the evaluation demonstrated the value of the ACS program. All key informants praised the program, noting the ACS outreach worker made a significant contribution in terms of connecting individuals to addiction treatment and other services, providing practical supports to individuals, and being a stabilizing influence in their lives. Survey respondents all reported experiencing positive outcomes.

## Referrals and Connections

ACS was highly effective in establishing and maintaining partnerships with local agencies, and over the year made 142 referrals for individuals with addiction/mental health challenges. **About half of the individuals served by the program reported that this was their first contact with addiction/mental health and social services.** This unexpected outcome suggests that the ACS program played an important role not only in system navigation, but also in introducing people to the support options available to them in several domains prior to the need for high costs addiction and mental health crisis interventions.

The figure below shows the number of referrals made by type of support needed. Most of the referrals facilitated access to addiction treatment and therapies.

**Number of referrals made by type of support needed**

Correspondingly, survey results showed that:

* 92% of respondents got connected to supports and treatment for substance use
* 60% got connected to mental health supports
* 50% got connected to housing supports

**Percent of survey respondents to report getting connected to supports and services**

In addition to these supports, survey respondents further reported ACS has helped them: (*in descending order of frequency)*

* Manage, reduce and in one case stop their drug use
* Set and keep appointments
* Get their life in order and/or get organized
* Get housing

Many survey respondents further commented that the program helped them improve their quality of life in some way, including staying positive, making plans for the future and helping them to make improvements in their lives. A few further noted they were thankful to have the space to talk to someone regularly.

## Outcomes

All of the individuals surveyed reported positive outcomes through their connection with the ACS program. Support from the outreach worker and the connections made to other community services helped them make safer and healthier choices regarding their substance use, work towards their personal change goals, have fewer interactions with police, and meet their bail conditions. A number also reported having a better understanding of the court process.

Of those that reported having fewer interactions with police, many of these (86%) reported **no new interactions with police** since getting connected to the program

When asked what they would have done without the program, survey respondents reported: *(in descending order of frequency).*

* They would still be using drugs/using a lot more drugs.
* They would be in jail / have additional charges
* They would be dead
* They would still be looking for help and community supports
* They would not have gotten treatment
* They would be homeless
* They would feel alone, lost and like a failure

## Contribution of the Program to the Justice System

Key informants identified a number of ways the ACS program and the outreach worker added value and made a contribution to justice system and to the broader system of services and supports. As a connector and navigator, the ACS program was seen to fill gaps and address needs that, in their roles as police, attorneys, and probation and parole officers, they were not able to address.

Overall, key informants valued the ACS program for:

### → Having the capacity to respond to the complex needs of clients and connecting them to the right supports

Key informants identified a number of issues faced by their clients that they cannot address through their work. These issues were identified as creating disruption and instability that lead to greater challenges and repeated engagement with the justice system. These issues included:

* **Trauma**. Key informants characterized the clients they referred to ACS as victims of trauma, noting that many of the people they see have had very negative and neglectful upbringings, which involve sexual, physical and emotional abuse, low self-worth and lengths of time spent in foster care. Two key informants noted that clients have had their children apprehended.
* **Housing**. Lack of stable housing was named most frequently as the biggest issue that clients face. It was noted that there are not many housing options in the community, and those that are available were characterized as unwelcoming and rough.
* **Mental health**. Key informants also shared their belief that a high number of their clients had mental health issues, in addition to living with addictions.
* **Poverty.** Key informants said that most clients they refer to ACS live with low income. While they see their higher-income clients easily accessing private treatment programs on their own, lower-income clients need significant support accessing the treatment system.

Key informants emphasized that because of these issues, their clients need significant support navigating and accessing a range of services such as therapy, counseling, and health services, including dental and optometry. They saw the system as too complex for their clients to navigate on their own. One noted that eligibility criteria can be difficult to negotiate and that without the ACS outreach worker, their clients would not likely get connected to any programs.

### → Helping their clients meet bail conditions

Key informants recognized that the ACS program helped their clients meet bail conditions, believing also that the ACS outreach worker helped to create accountability for those who have been recently released. Key informants further recognized the range of direct support provided by the ACS worker in everything from getting people to a bus station to helping them access housing. One key informant suggested there is a significant cost savings in breaking the cycle of release and return to jail.

### →Complementing other programs and the work of the justice system

Key informants noted their jobs were harder without the ACS program. They explained they didn’t have time to find out about different treatment programs and make connections and were often uncertain about making referrals to programs not knowing if it was the right program, if their client was eligible or if there was a waiting list. Key informants believed the program decreased their workload because ACS worker took on a connecting role as well as a role getting their clients to appointments and helping them understand bail conditions. They also reported that the ACS program complements Drug Treatment Court, which currently does not have sufficient capacity to meet the need in the community.

### → Addressing stigma

Some key informants believed that the ACS program contributes to how people with addiction are treated at the community level. They saw the program as encouraging a health-centred approach to addiction rather than treating it solely as a criminal issue. One noted the ACS program encouraged a more a rehabilitative justice system.

However, there was mixed feedback about whether the program reduces stigma about addictions and mental health as not all key informants saw it had this impact.

## Program Strengths

Key informants identified the strengths of the program as:

* The immediacy, flexibility and mobility of the outreach worker, who met with individuals right after their release from jail, and who could meet at locations and at times that worked best for clients (such as drop-ins and immediately before they need to go to an appointment)
* The outreach working being uniquely positioned in small nimble agency, not part of the justice system and not part of a large organization
* The worker going above and beyond in making the program accessible and removing barriers that clients might face.
* Not having complicated eligibility criteria, which are frequently a barrier to other programs
* Its focus on addiction and understanding of the addiction and mental health system, where the outreach worker was recognized for her wealth of knowledge
* Having connections to other agencies and services, enabling referrals to the right supports.

## Suggestions for Program Development

Were the program to gain new funding, key informants noted a few opportunities for consideration, including:

* Expanding the program with additional workers to meet the need in the community
* Exploring the issue of impaired drivers and potential to assist repeat offenders
* Exploring the role of ACS in sentencing and pre-conviction to support diversion
* Working more closely with the crown attorney
* Responding to changing trends in substance use in the community

# Summary

Overall the ACS program demonstrated positive outcomes for clients and made a valued contribution in connecting the addiction treatment and justice systems. ACS also played an important role in both system navigation and in introducing people to available support options. At the same time, key stakeholders and individuals supported in the program recognized there was limited capacity in local treatment programs and in supports services. Individuals themselves asked for ongoing support with recovery, housing, transportation, income supports and finding employment.

1. Farrow, T. (2014). What is access to justice? *Osgoode Hall Law Journal*, 51(3): 957-988. [↑](#footnote-ref-1)
2. Centre for Addiction and Mental Health (CAMH). (2013). Mental health and criminal justice policy framework. &Centre for Addiction and Mental Health (CAMH). (2015). Breaking the cycle of addictions for offenders. Centre for Addiction and Mental Health. [↑](#footnote-ref-2)
3. Ibid. [↑](#footnote-ref-3)