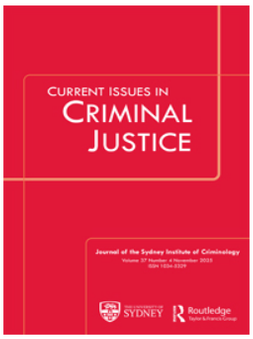

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# 'A second chance at life': broadening views of success in drug courts

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**ABSTRACT**

A focus on recidivism in drug court evaluation can lead to the presumption that if a program does not significantly reduce recidivism, there is no reason for it to continue. However, this view obscures the many other contributions drug courts can make to improving health, social, and criminal justice outcomes. Adding qualitative data to the predominantly quantitative literature on drug court outcomes, we draw on the evaluation of the pilot Drug and Alcohol Sentencing List in the Australian Capital Territory, to present participant and practitioner perspectives on success. In doing so, we argue that clients do not necessarily need to 'pass' a drug court program to derive benefits. We suggest that evaluations of drug courts should go beyond recidivism measures, to include broader indicators of well-being and social integration, such as physical and mental health, employment, education, and family and community relationships.

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Drug courts; policy success; program evaluation; recidivism; therapeutic jurisprudence.

## Introduction

Across the public sector, innovation brings the need for evaluation. In criminal justice, this mostly takes the form of recidivism studies.[1] This makes sense, as governments face an imperative to reduce crime. However, recidivism studies have far outstripped any other way of measuring program success (Cunneen & Luke, 2007; Klingele, 2019). This trend reflects a larger late-modern embrace of measurable performance outcomes. When assessing the impact of a particular intervention, there is a tendency to rely on quantitative data that can be consistently collected and ideally replicated across multiple studies, such as arrest or return-to-prison data.

Drug courts emerged in the United States in the 1980s and have since expanded globally to countries such as New Zealand, Canada, the United Kingdom, and Australia. They are founded on notions of therapeutic jurisprudence, which involves a collaborative,

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[1]Recidivism can be measured in a range of ways, e.g. arrest, conviction, return to custody. Analysis of 50 countries reveals that the most commonly reported outcome is the 2-year reconviction rate (Yukhnenko et al., 2020).

non-adversarial, 'solution-focused' approach, focused on participants' needs, and aims to improve future outcomes, rather than punishing past behaviours (King, 2006; Moore et al., 2023). Previous research on drug courts has generally been quantitative and focussed on recidivism. In this article, we suggest that qualitative research can offer useful insights into drug court effectiveness, particularly in relation to outcomes other than recidivism. More expansively, we argue for recognition of a broader view of success when evaluating 'solution-focused' (or 'problem-solving') courts.

This article draws on data from the evaluation of the Australian Capital Territory (ACT) Drug and Alcohol Sentencing List (DASL), introduced in 2019. Members of the research team were contracted to assist with developing the program and conducting a process and outcome evaluation. Responding to calls from narrative and qualitative criminology (Presser & Sandberg, 2015; Weaver et al., 2023) and therapeutic jurisprudence (Dancig-Rosenberg & Gal, 2024), we sought to extend our focus from recidivism. We therefore adopted a qualitative approach (see generally Maruna, 2015), embracing a range of indicators of 'success' related to desistance, wellbeing, and social integration (see e.g., Best, 2019; McNeill et al., 2012).

## Background and context

Drug courts aim to address substance use issues that underpin participants' offending behaviour, as well as wider criminogenic factors that may also contribute to offending (e.g., housing, education, employment, family, social relationships, and life skills). They vary in target population and program design, but all adopt a non-adversarial approach and typically involve the following elements (see National Institute of Justice, 2020):

(1) participant screening and risk assessment;
(2) regular judicial monitoring of participant progress via development of a therapeutic relationship with the participant;
(3) formal monitoring, in the form of drug testing and supervision by a case-worker;
(4) graduated incentives and sanctions; and
(5) treatment services.

While their supporters are many, critics argue that drug courts individualise the problem of drug-related harm and unduly responsibilise participants. Furthermore, they can lead to violations of due process, due to the collaborative governance model, and increased surveillance, coercion and punishment (Gal & Dancig-Rosenberg, 2020; Quirouette et al., 2016).

### *Views of success in drug courts*

As with broader criminal justice evaluation, Clarke (2020, p. 23) noted that recidivism remains the 'quintessential marker' of success in the drug court literature. Decades of evidence show that drug courts have a positive effect on recidivism (Logan & Link, 2019; Marlowe, 2022; Rossman et al., 2011), although the size of the effect varies, with outcomes sometimes described as statistically significant but 'modest' (Latessa & Reitler, 2015; Weatherburn et al., 2008).

Unfortunately, though, the literature has consistently noted limited attention paid to other potential markers of success. For example, Wittouck et al.'s (2013) systematic review of drug courts and recovery noted a dominant focus on substance use and offending and a commensurate 'lack of attention and interest for other drug-related life domains [e.g., employment and housing] and [quality of life] of substance users' (p. 10). Trood et al. (2021) found similarly few studies with robust wellbeing measures in their systematic review and meta-analysis of outcomes in problem-solving court interventions that employed judicial supervision. A review of Australian drug court evaluations found just two studies measuring health and social impacts (Hughes & Shanahan, 2019). In the US, the most recent *Adult Treatment Court Best Practice Standards* note that treatment court evaluations:

> often pay insufficient attention to other important aspects of participants' welfare, such as improvements in their emotional and medical health, employment, education, life satisfaction, and development of recovery capital to sustain their long-term adaptive functioning. (All Rise, 2024, p. 224)

Although recidivism dominates drug court literature, a growing corpus of quantitative studies now examine broader outcomes in solution-focused courts. These include overdose deaths (Lindenfeld et al., 2022), healthcare utilisation (Montgomery et al., 2024; Rezansoff et al., 2015), family conflict and unification (Green & Rempel, 2012; Wittouck et al., 2013), and access to employment, education and financial services (Rossman et al., 2011). The new *Best Practice Standards* (All Rise, 2024) recommend tracking key performance indicators related to whether participants attained 'recovery capital' (e.g., vocational training, employment, financial assistance, or supportive family relationships) or experienced reductions in their psychosocial problems.

However, beyond such measures, qualitative data can help advance a nuanced understanding of how desistance processes occur, through exploration of people's narratives (Rocque & Posick, 2021). They can also alert evaluators to unexpected program effects and shed light on what program participants consider important in rehabilitation programming and outcomes. Increasingly, we recognise that understanding desistance requires us to privilege the voices of people who work in and especially those who are impacted by criminal justice systems (Maruna, 2017).

Qualitative research has largely focused on the process and therapeutic jurisprudence elements of drug courts and what might improve completion rates, but has also examined positive outcomes for non-completers (Francis & Abel, 2014; Francis & Reynolds, 2015), compared experiences and outcomes for completers compared to non-completers (Fulkerson et al., 2013), and investigated outcomes 10 years post-completion (McCoy, 2009). Two recent articles from Dancig-Rosenberg and Gal (2023; 2024) focussed on qualitative views of success in Israeli community courts. Their interviews with court participants underscored the importance of several factors for success and rehabilitation: inner motivation (which was aided by respectful and fair treatment from program staff), supportive family members, and community involvement. Changes brought about by the court process improved and altered participants' self-image, daily functioning and skills, relationships, health, employment, and hope for the future. Participants' attitudes toward state authorities and their overall worldviews also improved. These findings 'highlight[ed] the program's potential to create a comprehensive and profound

transformation in participants' perceptions and behaviors' (2023, p. 286). Importantly, in their research with professional staff, Dancig-Rosenberg and Gal introduced the notion of 'glimmers of success':

> … for program participants, successful program completion was only part of the overall picture … almost all participants experienced glimmers of success along the way, which presumably had a long-term influence on them, even if they failed to complete the program or completed it but recidivated later. (2024, p. 59)

Examples of 'glimmers of success' included feeling seen and heard by officials, experiencing empathy from the judge, having a successful job interview, feeling a sense of belonging after participating in activities, or participating in vocational training. These examples 'echo theories that point out the importance that individuals assign to experiencing a positive process rather than focusing only on the legal outcomes' (2024, p. 59). However, changes of this nature cannot be captured through traditional evaluation measures such as recidivism and program completion. Our research therefore extends this growing evidence base and adds much-needed qualitative data to the largely quantitative literature on Australian drug courts (Clarke, 2020).

## The ACT Drug and Alcohol Sentencing List

In mid-2019, the ACT Government introduced legislation to allow the Supreme Court to sentence substance-dependent defendants to a Drug and Alcohol Treatment Order (DATO). DATOs aim to:

- facilitate rehabilitation by providing a judicially-supervised, therapeutically-oriented and integrated treatment regime;
- reduce participants' dependency on alcohol and other drugs (AOD);
- reduce the health risks associated with their AOD;
- assist with their integration into the community; and
- promote community safety, by reducing participants' criminal activity caused by AOD dependence (*Crimes (Sentencing) Act 2005* (ACT), s.80O).

DASL includes the key elements common to drug courts in Australia and worldwide, such as judicial oversight, supervision, drug testing, substance use treatment, and sanctions and incentives (see e.g., Clarke, 2020; Hughes & Shanahan, 2019). Participants sign a behavioural contract, are assigned a case manager, and progress through three phases tailored to different stages of the recovery process. The first phase is designed to be intense, with several therapeutic and drug testing appointments per week. The program diminishes in intensity as participants demonstrate compliance and progress in their recovery, giving them a chance to show more autonomy and begin work or study. If participants do not comply with their behavioural contract or incur fresh criminal charges, their DATO can be cancelled, requiring them to serve the deferred custodial sentence. However, DASL differs also from other Australian drug courts in several ways:

- it includes people dependent on alcohol, whereas most Australian models only include illicit drugs;

- it operates in the Supreme Court and is available for sentences of between one and four years' imprisonment. In most other Australian jurisdictions, drug courts operate in the lower and intermediate courts, generally with a maximum term of two years;
- it serves a smaller caseload than other jurisdictions (maximum of 35 at the time of evaluation; this expanded to 42 in late 2023). This is due both to the ACT's smaller population and the program's operation within the Supreme Court;
- it includes people convicted of violent offences (although not serious violent or sexual offences). This due to both its operation within the Supreme Court and evidence that drug courts are not necessarily contraindicated for those who have committed violent offences (Rossman et al., 2011); and
- the health service plays a leading role in case management, with the support of the corrections agency. Elsewhere, the court or correctional agencies manage supervision and compliance, with the support of a health team.

The inclusion of people who have committed violent offences, as well as the more generally serious nature of the offences inherent in DASL's Supreme Court placement, makes DASL an interesting case study for considering success. In particular, DASL's design means it serves people who would have received relatively lengthy sentences if not for drug court participation, thus reducing the potential for 'net-widening' (i.e., putting people who would not otherwise have been incarcerated at risk of serving prison time). Evaluation data (Rossner et al., 2022) showed that the first 56 participants had an average sentence length of 2.9 years and 55% received sentences of 3–4 years. Unpublished case analyses also revealed that most of the cohort had significant and lengthy histories of drug use and, while some were relatively new to serious offending, most had substantial offending histories.

## Methods

The data reported here were collected during the two-stage process and outcome evaluation. The evaluation had a developmental focus, meaning it was intended to inform ongoing program improvement, as well as assessing early outcomes. The research received ethics approval from the Australian National University (Protocol 2019/918), which was endorsed by the relevant health and corrections agencies (for more details, see Rossner et al. [2022]).

This paper draws on 44 semi-structured interviews with 39 people involved in DASL: 10 clients/participants and 29 professional stakeholders. To gain interviewees' perspectives over time, we interviewed five of them twice. Consistent with the evaluation's developmental aim, interviewers probed for both positive and negative feedback about many aspects of program implementation, operation, experiences and outcomes (see indicative interview schedules at Appendix 1).

### *Professional stakeholder interviews*

Most professional interviewees were members of the treatment order team, which provides direct support to the program and participants (including program coordinators, case managers, therapists, mental health workers, and corrections and police officers). We also interviewed the three judges involved in DASL during the relevant period and representatives from service providers involved in relevant interventions. The interview schedule varied

slightly, depending on the interviewee's involvement with DASL, but considered issues around implementation (e.g., 'What is working well in DASL (for both staff and participants)? What could be improved or should change?') and impact (e.g., 'Have you seen any positive impacts of the program yet? Have you seen any examples of negative impacts?'). Stakeholder interviews are designated with S and a number, e.g., S15 (where relevant, .2 indicates a follow-up interview).

### *Client/participant interviews*

We interviewed six of the eight people who had graduated from the program by the end of March 2022, two in the middle/late stages of the program, and two whose DATOs had been cancelled and were in prison at the time of interview. We originally intended to complete more client interviews, but experienced COVID-19 disruptions during data collection. The interview schedule varied somewhat, based on the participant's program stage. The questions were focussed on the referral process, assessment, treatment, engagement with corrections, court, thoughts or hopes about the future, and general positive or negative comments about the program. In the findings section, client interviewees are designated with C and a number, e.g., C09. Where possible, we privilege participants' voices over those of professional stakeholders; service user perspectives are relatively rarely heard in criminal justice research and they can provide unique perspectives on value creation.

Interviews were conducted in person at the court or a convenient location, or by video-conference/telephone during high COVID-19 risk periods. Interviewees provided written consent to participate in the research. Interviews were audio-recorded, transcribed, and analysed thematically in NVivo14. As described above, the full dataset covered many aspects of the program's implementation, operations and outcomes, but this paper focuses on the wide range of reported benefits. We separated benefits into topic themes, such as 'reduced AOD use', 'wellbeing', 'family relationships' or 'seeds/glimmers' (i.e., small changes that may in time reap larger benefits). Drawing on literature showing that positive service experiences can be a factor in transforming participants' motivation from extrinsic (e.g., avoiding jail) to intrinsic (e.g., desiring change) (Gallagher & Nordberg, 2024), we also looked for indications that participants were engaging positively with services both inside and beyond the program. Lastly, following Francis and Abel (2014), we considered impacts for non-completers.

We also draw on a client survey, which was conducted at court in early 2022 and included questions on participants' satisfaction and experience with different elements of DASL, with space for open-ended comments. There were 30 participants in the program at the time. Of these, seven were not attending court and could not be surveyed easily. Twenty of the remaining 23 participants (87%) returned a survey. The survey data are used to supplement and provide further context to the qualitative analysis and should not be considered a representative sample.

## Findings

The evaluation ran from December 2019 to March 2022. By March 2022, there had been eight graduations, three completions (people who finished their orders, but

not all program stages), and 15 cancellations. Thirty clients were still active in the program. The evaluation team received aggregated information from ACT Policing, including participants' new charges over the 12-month period before DASL, during their DATO, and (where relevant) after their DATO. Due to the low participant numbers and lack of control or comparison group, statistical outcome data should be regarded as provisional. However, policing data indicated an overall reduction of 61% in fresh charges incurred during the program, compared to each participant's baseline over the previous 12 months. Half of the participants did not re-offend during their order. Those partway through the program at the time data collection ended showed an 87% reduction in the number of charges since program commencement. None of the eight graduates had returned to court since graduation (for full details, see Rossner et al. (2022)).

Regarding economic indicators, our preliminary economic assessment (Rossner et al., 2022) estimated that the cost of prison time avoided through DASL was slightly higher than the costs of running the program, although this did not take into account other potential financial benefits (e.g., reduced burdens on other systems, through improved socioeconomic outcomes for participants). A more comprehensive cost-benefit analysis (KPMG, 2024) subsequently indicated that program costs were higher than avoided costs in the first three years, due to the initial costs of program establishment, but lower than avoided costs in the fourth and fifth year of the program (KPMG, 2024).

Therefore, DASL had early indications of positive outcomes on traditional metrics of success (i.e., recidivism and cost reduction). The interviews revealed some criticisms of the program, which we summarise briefly below (see Rossner et al. (2022) for detailed criticism). However, there were also promising indications regarding broader notions of success, such as reduced AOD use, wellbeing, community, education and employment, skills, engagement with services, and hope for the future.

### *Criticisms and negative impacts*

Stakeholder criticisms of the program overwhelmingly centred around implementation and resourcing issues, particularly staffing challenges, AOD program availability in a small jurisdiction like the ACT, and the potential for the lack of suitable housing to undermine program outcomes. Interviewers specifically probed for negative impacts of DASL on participants and about half said they could not think of any. Some noted that the program was challenging for participants and a small number mentioned that this intensity could be overwhelming. Of those who mentioned negative impacts, these were mostly about people who had had their orders cancelled. For example:

> S01: We had two women cancelled early on. I wouldn't say it was a fairly negative experience, but I think their experience in the whole thing just further added to already negative views on the support service system.

> S14: I've had a couple of clients where I thought that they actually would have been better off [pleading guilty in the lower court instead of referral to Supreme Court for DASL]. Because they've gone onto a drug and alcohol treatment order thinking it's a good way to get out of [prison]. They haven't really been committed to it, and then they end up having their order cancelled.

Similarly, the two clients who were in prison after DATO cancellation largely had positive things to say about DASL. They attributed their failure to not being ready and mixing with the wrong people in residential rehab. For example:

> C09: I thought I was ready to do it, but wasn't. I reckon if I was ready to do it it would be good. But I just think I'm ready, but I just used it to get out [of prison], I guess.

These quotes speak to the challenges in appropriately targeting drug court programs and assessing potential clients' suitability, which we will return to in the discussion. Clients also mentioned the intensity of the program and some felt its demands could be conflicting, particularly early on, but largely felt the intensity and commitments were in service of a good outcome. Two described problems with the behavioural contract, namely points and sanctions being inconsistently applied between participants, which could be demotivating. This was also an implementation problem described by professional stakeholders.

We now turn to some of the reported benefits or positive impacts.

### *Reduced AOD use*

Interviews reinforced the prevalence of drugs in the ACT prison, underscoring that the alternative of a custodial sentence would not have prevented ongoing substance use:

> C01: So in jail, the wings are full of drugs. Everyone's a drug addict. It's easier to get drugs in jail than it is on the street, I promise you.

> C04: If it wasn't for the drug court, I'd probably still – well, I'd be in jail anyway. And probably using drugs in jail.

For some participants, DASL was the first time since they had started using drugs that they had achieved this length of sobriety:

> C04: I haven't given no dirty urines or nothing. I've been clean for 14 months now, so that's the longest I've ever been clean in my life.

> S25: It's a joy when someone says 'first time I've been sober since I was 16' … my client said the other day 'I've been in and out of prison for my kids' birthdays, and I can be, not just present, but sober'. Isn't that a win? The delight on his face.

Sobriety benefits could also extend to other family members, which is difficult to capture in administrative metrics, but can have significant impacts:

> S25: I've got one client whose spouse has stopped using. Now the [children have] got two parents sober in the house from methamphetamine.

### *Health and wellbeing*

The interviews revealed both physical and mental wellbeing benefits from DASL participation. C07 described going back to the gym as 'therapeutical' for the intense early stages of the program:

> And then started getting involved in that every day again, started looking at my health, and just started … doing things I wouldn't normally do. I just didn't want to be the same as I used to be.

Case manager S05 noticed improvements in health behaviour across the board:

> … all my clients definitely are actively engaging in looking after themselves. They're all going to the gym, they're regularly going to the GP if something's wrong, whereas that never would have happened [before] … I think that that care about themselves is a real positive that I'm noticing.

One participant had accessed reproductive healthcare, another physiotherapy, while a third had received dental care. As a health worker explained, this had beneficial implications for his recovery:

> S16: … pain is a huge contributor to relapse. So, for him to get his teeth fixed and go through that is going to serve him well in recovery.

Clients and stakeholders also described the wellbeing benefits from program participation. For example, C03 described how good it felt to have the 'job' of working on herself and C01 expressed the joy of being pushed to improve and succeeding. They added:

> C03: I loved it. I really enjoyed it. I think I knew it was my opportunity just to stay clean, stay focused, and that's exactly what I did.

> C01: I feel like I'm on drugs all the time now, because I feel so good. Drugs don't make you feel like this, but that's what they should make you feel like … maybe that's a shitty way of explaining things, but I was just trying to say that I feel really good all the time, from these people pushing me in certain directions and being super positive. And then you're super positive because of this.

Ultimately, the DASL experience enabled many participants to be proud of their work and experience 'hope for the future', feeling like they'd been given 'a second chance at life' (C06). Others reflected similar sentiments:

> C01: I just thought my life was going to be fucked forever. And it's not. And I might be able to do some really, really, really great things after this is done.

> C05.2: I feel like I'm giving it my best shot. And I've got good things to come ahead of me.

> C07: And anyone that knew me from before jail, even from just getting out of jail, they'd say I've grown so much. And I can see that myself, because I know where I was before.

### *Family and community*

Many interviewees from both cohorts spoke of the family benefits. C05 described getting back in touch with his estranged family and how 'they definitely can see a change in me'. C04 had regained partial custody of his young daughter and formed a much better relationship with her. For C06, the family and relationship benefits were transformative:

> I suppose it's being a normal member of society, where I can just enjoy the small things, like spending time with my kids, gaining back the respect from my family, rebuilding the connections. Having genuine friendships with people, instead of it being based around crime and drug use and sex and money. I know it's a whole new lease on life for me. I honestly thought that that stuff was out of reach.

C07 reported experiencing 'more love for my partner', adding:

> She's really happy. Because she's seen me – like, she was there for when I went to jail, come out of jail, in the middle of my addiction, and coming clean. She's always seen the good in me, even though I never saw the good in myself. And now that I can see the good in myself, she's happy that I found it.

Professional stakeholders also commented on the implications of improved family relationships:

> S05: Family and social relationships more positive, which then obviously has a positive impact on that child's life, or those people's lives as well. I'm thinking about one person who's got a little girl who obviously has a very present dad now, whereas before he was in active use and that would have been very messy.

At least two participants had regained custody of their children from state care. The DASL team had formed productive relationships with the child protection agency and engaged their staff in the treatment process. One client reported in the survey: 'Without [DASL], I would be in jail, without custody of my kids. I now live a great healthy life with my kids'. A stakeholder reflected:

> S10: If the program achieved nothing else, assuming that that's sustainable, the cost saved by keeping [X] out of prison and those children out of care, and the trajectory that they might otherwise have experienced, both emotionally and socially, but [also] financially, would pay for everything that's happened so far.

Beyond family, some participants had formed friendships and supportive relationships with one another. Progress could also be observed in clients breaking off negative associations, which is considered an important milestone in the desistance process and is challenging in a relatively small city like Canberra. C05.2 noted that he'd 'stopped hanging out with people that I was hanging out with, because basically they would do drugs, or do stupid things'.

### *Education and employment*

Like most drug courts, DASL's structure starts with high intensity and diminishes over time, to allow participants to take more responsibility and provide the opportunity for pro-social growth. Although some clients were frustrated by being unable to work during the earlier months of the program and found that the onerous schedule got in the way of potential employment, most understood why it was structured in this way. Clients and stakeholders reported positive experiences with employment, education and volunteering later in the program, with S13.2 reporting that most graduates had secured employment. One client (C03) reported bringing baked goods to court as a result of her cookery course, while another (C07) planned to balance his current employment with a personal training qualification.

### *Skill development*

Interviewees also discussed the social, emotional, and life skills acquired through the program. At the most rudimentary level, this could be the development of basic life and organisational skills (e.g., increasing ability to keep or reschedule appointments). On a more complex level, clients learned skills to resist drugs, ask for help, deal with difficult situations, and resolve conflicts:

C03: I've learned coping mechanisms. Not just in helping me when I have an urge or a craving, but when I have an anxious feeling. It helps with any stressful situations.

S25: The golden boy, I call him, yes, really good conflict resolution skills now, with his partner. Not just that, he's learned how to self-reflect every Friday and misses it when he can't do it.

### *Positive experiences with services*

Participating in DASL can also represent an opportunity to engage positively with services. As professional stakeholders emphasised, many clients have not been able to do this previously, having only experienced punitive interactions with services and bureaucracy. The client survey showed high satisfaction with the program overall. Most were 'completely' or 'somewhat' satisfied with the treatment services, corrections and especially the judge (Figure 1).

One judge explained their approach to ensuring a positive interaction with the court:

S12: These were individuals, the individuals mattered and the program mattered. And the team and I were committed to each individual, and to the program, and to the success of the program. And it only works [when] their commitment is about your commitment and the commitment of the team. And it's a virtuous circle in that way.

A community corrections team member observed this cycle in action:

S01: I think also seeing the positive impact of the way some of these people interact with our service, and with how some of them are really traumatised, and they've had really terrible experiences in the criminal justice system, and going to court's always been a really stressful situation. But for some of them now, going to court is actually getting some affirmation that they're progressing and that experience had changed. And we're seeing that with the way people present, you come into court smiling, you can see that they're getting something from it.

This is how a participant described the difference in court experiences and sense of engagement he experienced with DASL check-ins:

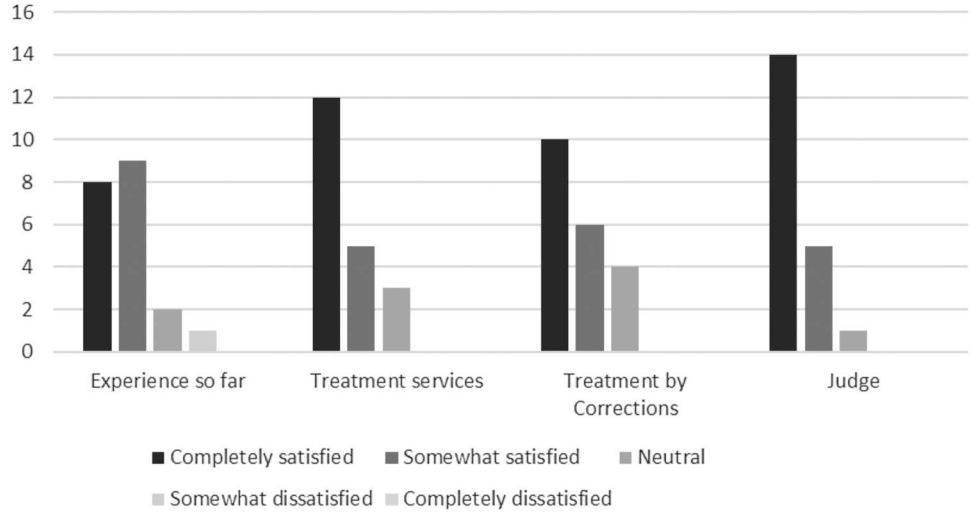


**Figure 1.** Participant satisfaction with program ($n = 20$).

> C02: Coming to this court … for me, it's a positive thing. Every clean urine is a tick … When you go to [normal] court, you sit in there, the judge is talking to a lawyer, the [prosecutor] is talking to the judge, you just sit there, and whatever happens, happens. With this court, you're expected to come in and talk to the judge, whether it's good or bad, you talk to the judge. And they work through those things with you.

S01 further reflected on positive police engagement, which can help shape someone's life into the future. One client who was on the Child Sex Offender Register had experienced difficult yearly interactions with police, but was now able to have some positive interactions. This was likely to prove useful, as 'he's got to keep doing that for the next 20 years' (S01). Two others had had their orders cancelled, but a stakeholder still observed progress in their use of services:

> S03: … not only did they have a period of reduced drug use, but they seemed to engage with health services a little bit. They were willing to talk to the police sometimes when things were going badly for them. So I do hope that the benefits that they got while they were on the order could help them with their lives longer term.

A case manager also noticed a change in participants' views of police and help-seeking behaviour:

> S05: … sort of seeing [police] as having a positive role in society, as opposed to the worst possible people around. Asking for help, I think, is a huge thing for them … they call me if something's going on and they need a bit of advice or support, rather than just ignoring it until it goes away.

### *Progress for 'unsuccessful' participants*

Stakeholders emphasised the substantial, sometimes unprecedented, progress made by some clients who had their orders cancelled or finished their DATOs without progressing through all the stages – in other words, those who 'failed' the program, according to traditional notions of drug court success. For example, many stakeholders were inspired by the progress of one client, who had been a heavy lifelong drug user. He was still and would likely remain in Phase 1, due to his ongoing cannabis use:

> S04: … he's probably never going to leave Phase 1, but you know what? I think he's been one of the biggest successes of the program. From where he's come from, he was using heroin, meth, cannabis daily, regularly offending and ending up back in custody, whereas now we're almost a year on, he's not using meth anymore, he's not using heroin anymore … the most he's using is a bit of cannabis now on the weekends.

Other team members reflected on a client whose order had been cancelled:

> S16: No way was that a fail. That was a success. That woman had a period of recovery she'd never had in her life. You can always reflect on that. Even if you're in jail, you can always go, 'gee, that time that I had recovery was good. I might not have been able to keep it, but I know that that time was good for me'.

> S12: [She] may be back in [prison], but she made such progress too … And maybe the next time, she builds on that foundation.

In this way, stakeholder views of success were aligned with broader harm reduction trends and Australia's National Drug Strategy approach (Australian Department of

Health, 2017). As discussed further below, this suggests that success should not require abstinence, but instead recognise clients' meaningful changes.

## Discussion

In this article, we have presented a multi-perspective dataset, allowing for an expanded view of what might be considered 'success' in drug courts. Although the weight of evidence concludes that drug courts are successful interventions according to recidivism metrics (Marlowe, 2022), there are reasons to avoid relying solely on this account of success. First, wellbeing and social integration outcomes are worthy ends in themselves and are seen as important by those most affected (see e.g., Heidemann et al., 2016). Second, a recidivism focus leaves drug courts that are evaluated as insufficiently reducing recidivism vulnerable to program cancellation, when they may be producing other positive outcomes.

In our research, early indications suggested reduced recidivism and lower costs compared to incarceration. However, the cohort size was low, due to COVID-19 delays and the small size of the jurisdiction, meaning a robust statistical evaluation was not possible. Qualitative data helped contribute a fuller picture of the early effects of the program, including a range of promising outcomes that would be difficult to capture using traditional quantitative administrative metrics.

Both clients and stakeholders criticised some aspects of DASL; professional stakeholders in particular identified problems with implementation and resourcing (Rossner et al., 2022). Nevertheless, all saw value in the program, and even the two former clients who were incarcerated because their orders had been cancelled had positive things to say. In fact, they had already recommended the program to others in the prison. Interviewees reported improvement in diverse areas such as health and wellbeing, family relationships, life skills, and employment and education, which are factors the desistance literature notes can be key to long-term rehabilitation (Best, 2019; McNeill et al., 2012). Allowing for the caveat of small numbers, the client survey showed satisfaction with the program and interactions with the treatment team, especially the judge. Stakeholders felt that the program's processes, such as clients having a voice, a combination of high expectations and encouragement, and taking a holistic view of the client, contributed to the positive outcomes. This is consistent with findings from Gallagher and Nordberg (2024), whose qualitative meta-synthesis of participants' drug court experiences argued that the principle of 'dignity and respect' in drug court implementation was important for encouraging intrinsic motivation in participants. Stakeholders also reflected on likely cost reductions in areas such as child protection, due to family reunification. Many interviewees summed up the life-changing effects of the program, using phrases such as 'it's given me hope for the future' (C06) and 'I'm getting chills just thinking about [how far I've come]' (C03).

### *Glimmers, seeds and program non-completion*

Our qualitative data also shed light on progress for non-completers; professional stakeholders spoke persuasively about the benefits for clients whose orders had been cancelled or who would finish the program without progressing through all the phases. Some even

argued that the program's biggest success stories included these kinds of clients. Taking a longer-term or systemic view, literature shows that 'recovery' from drug dependence and addressing the associated drug/crime nexus is an ongoing process that may take years or decades (Best et al., 2017; Turnbull, 2020). Accordingly, stakeholder views of success encompassed 'small wins' and non-linear trajectories, rather than individuals' complete cessation of drug use or offending. Similarly, Francis and Abel (2014) interviewed non-completing drug court participants and found they reported increased insight into their behaviours, feelings of self-efficacy, better and more constructive relationships, and positive lifestyle changes. Francis and Reynolds (2015) found moderate self-reported harm reduction effects for non-completing participants. Fulkerson et al. (2013) also found that a substantial proportion of both completers and non-completers derived self-reported benefits from program participation in areas such as repairing family relationships and making amends to the community. Such outcomes can be positive for broader circles of people affected by problem-solving courts (Dancig-Rosenberg & Gal, 2023).

Relatedly, qualitative methods allowed us glimpses of the 'glimmers' of success described by Dancig-Rosenberg and Gal (2024). For example, some clients were beginning to access services, ask for help from treatment team members, attend official appointments, and interact positively with representatives of state and criminal justice agencies for the first time. Substantial reduction in harmful substance use behaviours or unprecedented periods of abstinence provided interludes of improved health and wellness, and fodder for reflection to build on in future rehabilitation efforts. Such seeds may take years to sprout, but can ultimately form the foundation of participants' pro-social participation in society (Francis & Abel, 2014). Importantly, positive indications of this nature cannot be captured through standard quantitative measures, making qualitative contributions such as we have provided here an important part of understanding the impact of drug courts.

This issue also needs to be considered in the context of broader moves towards drug decriminalisation. Notably, in late 2023 (see e.g., Roy, 2023), the ACT became the first jurisdiction in Australia to decriminalise possession of small quantities of all drugs. Although the legislation underpinning DASL is framed in terms of reducing (not eliminating) participants' AOD dependency, DASL participants are subject to a 'Behavioural contract protocol' (ACT Supreme Court, n.d.), which cites 'Sustained abstinence' as an example of positive conduct that may warrant an incentive, while 'Ongoing unauthorised drug or alcohol use' is an example of a negative behaviour that could give rise to a sanction. In light of our findings and the altered policy landscape, it may be time to revisit the extent to which DASL is predicated on an abstinence-focussed model.

### *Implications for evaluating the performance of drug courts*

Broader indicators of success can be part of a more holistic picture of evaluating alternatives to prison. Extensive literature has demonstrated the criminogenic and unhelpfully punitive nature of incarceration (e.g., Cid, 2009; Travis et al., 2014), including for drug-related offending (e.g., Turnbull, 2020). Our client interviewees supported previous research findings (e.g., O'Hagan & Hardwick, 2017) that drugs are readily available in prison, as well as reporting very limited opportunity to access AOD treatment services. In addition, hypermasculine, hostile and aggressive social climates can counteract the

therapeutic effects of prison programs (Day, 2020). Therefore, we argue that a drug court need not demonstrate *substantial improvements* in cost indicators or recidivism, to be preferable to the current alternative of incarceration. If evaluation can demonstrate that:

- the costs of implementing a drug court are no higher than the counterfactual (e.g., incarceration for the sentence duration);
- recidivism is no higher than the counterfactual; and
- there is any improvement on broader metrics, including those relying on self-report (such as wellbeing, health, housing, employment/education, return of children from state care)

then the program can arguably be deemed 'successful'. In other words, success can be said to rest on recidivism and costs to the taxpayer being no higher than the alternative and/or improvement in some facet of participants' lives or reduction of other burdens on government resources. Conversely, we might say a court has not been successful if implementation costs are higher than the counterfactual, recidivism is increased compared to the counterfactual, and participants show no improvement on broader wellbeing or social integration metrics.

At the same time, evaluations must ensure that drug courts are appropriately targeted at those most in need of their services, ensuring that they do not cherry-pick clients who were likely to desist on their own – or overburden those who are not in a position to capitalise on the services provided. This will help to ensure that resources are being spent on those most likely to experience the largest transformation and that these programs do not incur the risk of net-widening. As we have argued elsewhere (Bartels et al., 2025), process evaluations assessing performance relative to the 10 Key Components for Drug Courts can help guard against these risks.

While this paper contributes important qualitative data to a largely quantitative drug court evidence base (particularly in Australia), it is important to reiterate that we were unable to interview as many drug court participants as intended, due to challenges with data collection during COVID-19. The 10 participants provided useful insights (especially when triangulated with the 29 professional stakeholders), but future qualitative research should capture more end-user perspectives. We also emphasise that our analysis in this paper is not intended to be a rigorous evaluation of this particular court, but more an illustration of the types of 'value' that should be routinely considered in evaluations of drug courts.

## Conclusion

This paper has argued for a redefinition of success in drug courts – and, inferentially, other therapeutic courts – by considering a range of social, health, and personal development measures, alongside traditional measures like recidivism. Our findings from the DASL evaluation reveal that even those participants who do not 'complete' the program in a conventional sense can experience significant personal gains. These benefits, which may include improved family relationships, better physical and mental health, and greater social integration, suggest that drug court 'success' should not be solely equated with abstinence or non-offending.

In light of this, we suggest that policy frameworks evolve to accommodate more multi-faceted conceptions of success. Furthermore, such policy adjustments should aim to sustain and enhance funding for drug courts, enabling these programs to operate not merely as mechanisms of diversion, but as platforms for holistic rehabilitation.

To achieve this, evaluations should consider adopting mixed-methods strategies that capture both quantitative outcomes and qualitative (including self-reported) life improvements and recognise participants' complex and non-linear desistance journeys. Instruments that measure social reintegration, health status, and community engagement should be further developed and included in regular assessments. Additionally, fostering a dialogue between court participants, professionals, and policymakers can provide deeper insights into the practical needs and successes of drug court initiatives, leading to more effective and compassionate criminal justice policies.

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