



DWI/Drug Courts: Reducing Recidivism, Saving Lives

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Drug Courts: A National Phenomenon

For more than a decade, a quiet revolution has occurred within the criminal justice system. Dade County, Florida established the first drug court in the United States. Today, 1,183 drug courts can be found across the country with hundreds more in the planning stage (Huddleston, Freeman-Wilson & Boone, 2004). Although program specifics and populations vary depending upon community priorities and resources, the objective of every drug court is the same: to engage defendants charged with drug-related offenses in comprehensive, enduring programs that integrate adjudication, substance abuse treatment and close supervision.

All drug courts are part of an innovative judicial model whereby offenders are held accountable for their actions and afforded the tools they need to break the patterns of drug abuse that so damage their lives, as well as the lives of others. The major goals of drug courts have been established with the benefit of both offenders and the communities in which they live in mind. Typically, these goals are to reduce drug use and associated criminal behavior by engaging and retaining drug-involved offenders in treatment and intensive supervision; to concentrate staff expertise about drug cases into a single courtroom; to address other defendant needs; and to remove drug cases from traditional courtrooms, freeing them to adjudicate non-drug cases.

Benefits of the Drug Court Model

Today there is irrefutable evidence that drug courts are achieving what they set out to do. In a series of critical reviews published from 1998 to 2001 of over 120 evaluations of drug courts located throughout the nation, the National Center on Addiction and Substance Abuse at Columbia University determined that **“drug courts provide the most comprehensive and effective control of drug-using offenders’ criminality and drug usage while under the court’s supervision.** Drug courts provide closer, more comprehensive supervision and much more frequent drug testing and monitoring during the program than other forms of community supervision. More importantly, drug use and criminal behavior are substantially reduced while offenders are participating in drug court” (Belenko, 1998; 2001). To put it bluntly, **“we know that drug courts outperform virtually all other strategies that have been attempted for drug-involved offenders”** (Marlowe, DeMatteo, & Festinger, 2003). Perhaps the most important finding is that offenders who become part of a drug court program are succeeding upon completion. Comparisons with other groups reveal much higher retention rates and lower recidivism and drug-use rates for drug court participants both during the life of a program and after the program ends (Belenko, 1998; 2001).

The most substantial and compelling national study to date was commissioned by the National Institute of Justice and released in 2002 whereby a sample of 2,020 graduates from 95 drug courts in 1999 and 2000 were tracked to establish a benchmark national aggregate recidivism rate. The study estimates that after graduation, only 16.4 percent of drug court graduates had been arrested and charged with a serious offense after one year and 27.5 percent at the two year mark. These estimates represent the expected outcomes for those who succeed in drug court: one year after graduation, only one out of six drug court graduates would be expected to be re-arrested and charged with a serious offense. (Roman, Townsend, & Bhati, 2002). Finally, a 2000 Vera Institute of Justice report concluded that **“the body of literature on recidivism is now strong enough to conclude that completing a drug court program reduces the likelihood of future arrest.”** (Fluellen & Trone, 2000).

DWI/Drug Courts: Utilizing the Drug Court Model With Hard Core Drunk Drivers

The positive outcome for drug courts begs the question: If drug court programs can reduce recidivism among the populations they now serve, could the drug court model, applied to a wider network of offenders, have an even greater impact on crime rates? More specifically, **could the drug court model work for hardcore drunk drivers?**

To date, it has been left to the traditional courts and criminal justice system to deal with DWI cases, and it has become clear that the traditional process is not working for repeat offenders. Punishment, unaccompanied by treatment and accountability, is an ineffective deterrent for the repeat DWI offender. The outcome for the offender is continued dependence on alcohol; for the community, continued peril. A new strategy exists to fight against repeat impaired driving. Generally called **“DWI/Drug Courts,”** offenders are held at the highest level of accountability while receiving long-term, intensive treatment and compliance monitoring. There are currently 42 stand-alone DWI/Drug Courts and many more hybrid DWI/Drug Courts. Providing system oversight and system accountability, DWI/Drug Courts monitor the justice and treatment system as well as the offender.

What Are Drug Courts?

DWI/Drug Courts are distinct court systems dedicated to changing the behavior of alcohol/drug dependant offenders arrested for DWI. The goal of DWI/Drug Courts is to protect public safety by attacking the root cause of DWI: alcohol and other drug abuse. DWI/Drug Courts utilize all criminal justice stakeholders (prosecutors, defense attorneys, probation, law enforcement, and others) along with alcohol/drug treatment professionals. This group of professionals comprises a **“DWI/Drug Court Team,”** which is usually accountable to the DWI/Drug Court judge who heads the team. The DWI/Drug Court Team uses a team-oriented approach to systematically change participant behavior. This approach includes identification and referral of participants early in the legal process to a full continuum of drug/alcohol treatment and other rehabilitative services. Compliance with treatment and other court-mandated requirements is verified by frequent alcohol/drug testing, close community supervision and interaction with the judge in non-adversarial court review hearings. During these review hearings the judge employs a science-based response to participant compliance (or non-compliance) in an effort to further the team's goal to encourage pro-social, sober behaviors that will prevent DWI recidivism (Loeffler & Huddleston, 2003).

The missions, objectives and operations of a drug court that exclusively targets illicit drug abusers, a stand-alone DWI/Drug Court that targets alcohol or other substance impaired drivers,

and a hybrid DWI/Drug Court that targets a mix of DWI offenders and illicit drug abusers are nearly interchangeable. All are part and partial of the drug court model. The structure of the three types of treatment courts is also similar.

The major difference is that in the stand-alone or hybrid DWI/Drug Courts, the offenders come to the court as a direct result of an impaired driving arrest and a documented history of impaired driving. In contrast, in the more traditional drug court docket the targeted offenders are those who have engaged in non-traffic related criminal behavior (as opposed to illegal driving behavior) as a result of their use of illegal substances. Experience has shown, however, that the participants in these two treatment court environments are far more similar than different. Although wholeheartedly endorsing the use of either of the above-noted applications of the drug court model, there are several advantages to operating stand-alone DWI/Drug Courts, most notably because they allow for development of a more specialized treatment focus and a more case manageable network of relevant and supportive community resources. DWI/Drug Courts shine a spotlight on the triggers and consequences of non-responsible alcohol intake. They embrace the community of victims of DWI episodes and encourage the fair and sensitive inclusion of victim advocates in the treatment process. Most importantly perhaps, they serve as a potential unifying hub for the myriad of agencies and organizations that have been part of piecemeal attempts to plug the gaps in the drunk driver control system. DWI/Drug Courts can and should serve as a unifying venue of accountability for the repeat DWI offender. By partnering with the respective state's department of motor vehicles, Governor's highway safety commission, highway patrol, local law enforcement accident prevention squads, MADD and other accident prevention and victim support groups, DWI/Drug Courts can add teeth to the justice system's response to repeat drunk driving.

A DWI/Drug Court's coercive power is the key to admitting DWI offenders into treatment quickly and for a period of time that is long enough to make a difference. This proposition is unequivocally supported by the empirical data on substance abuse treatment programs. Data consistently show that treatment, when completed, is effective. However, most addicts and alcoholics, given a choice, will not enter a treatment program voluntarily. Those who do enter programs rarely complete them. About half drop out in the first three months, and 80 to 90 percent have left by the end of the first year. Among such dropouts, relapse within a year is the norm.

Accordingly, if treatment is to fulfill its considerable promise as a key component of DWI reduction policy, DWI offenders not only must enter treatment but must remain in treatment and complete the program. If they are to do so, most will need incentives that may be characterized as "coercive." In the context of treatment, the term coercion - used more or less interchangeably with "compulsory treatment," "mandated treatment," "involuntary treatment," "legal pressure into treatment" - refers to an array of strategies that shape behavior by responding to specific actions with external pressure and predictable consequences. Moreover, evidence shows that substance abusers who get treatment through court orders or employer mandates benefit as much as, and sometimes more than, their counterparts who enter treatment voluntarily (Satel, 1999; Huddleston, 2000).

DWI/Drug Court is the best vehicle within the criminal justice system to expedite the time interval between arrest and entry into treatment, and provide the necessary structure to ensure that a DWI offender stays in treatment long enough for treatment benefits to be realized.

Evaluation studies are vital in sustaining DWI/Drug Court programs. Courts conduct outcome evaluation studies to demonstrate the dramatic effect of DWI/Drug Courts on the community, to assess relative costs, and to maintain or seek funding.

With their rapid expansion and proven effectiveness, DWI/Drug Courts are changing the mindset of criminal justice professionals and effecting how DWI offenders are handled. Treatment with intensive supervision works with this population – and promises better long-term outcomes, through decreased recidivism.

The Ten Guiding Principles of DWI/Drug Courts

Guiding Principle #1: Target Population, Screening and Eligibility

Entry in to a DWI/Drug Court is a rapid, multi-stage process that includes a) legal screening, b) clinical screening and c) assessment. A DWI/Drug Court primarily targets offenders charged with driving under the influence of alcohol or illicit drugs and diagnosed as having a serious alcohol or illicit drug problem. Special emphasis is placed on the previously convicted DWI offender whose fear of prosecution has proven to be an ineffective deterrent to continued DWI behavior. Defining one's target population lays a blueprint for a program's eligibility screening process. A systematic DWI offender referral process ensures that potentially eligible participants are not inadvertently or inappropriately denied the opportunity for participation. One's disqualification criteria will funnel out those from the pool of potentially eligible participants who are not appropriate for the program, such as violent offenders. For those who are still potentially eligible after a review of the legal history, a clinical screening and drug test are necessary to ascertain the severity of a substance abuse problem and appropriateness for the DWI/Drug Court.

Guiding Principle #2: Clinical Assessment

Once a defendant is deemed eligible and a conviction entered, the "participant" is immediately engaged in intensive judicial/community supervision and treatment. The first step in determining the best level of treatment and care is to perform a sophisticated and objective biopsychosocial assessment. Assessment is the backbone of an effective DWI/Drug Court as it will determine a diagnosis and plan for treatment. Based on the assessment, the participant will be matched with and placed into the appropriate level of care. This is key as each defendant will have multiple, yet different issues to address. Other collateral services may be brought to bear at this time to treat co-occurring mental health issues, life skill deficits and existing health problems. The goal of the assessment is to develop a treatment plan aimed at addressing the participant's substance abuse disorder as well as all other obstacles and barriers to that end.

Guiding Principle #3: Developing the Treatment Model

When developing the treatment model, there are several factors that the DWI/Drug Court Team must consider. These factors include focusing on differences in providing adequate treatment, relying on the expertise of the treatment provider, providing cross-training for all DWI/ Drug Court Team members on substance abuse, treatment and the criminal justice system, addressing demographic differences that call for adjustments to transitional drug court treatment models, incorporating best practices, providing greater availability of ancillary intervention strategies, i.e., victim impact panels, community service at emergency rooms, addressing cross-addiction to legitimately prescribed paid medications, being aware of less availability of criminal justice incentives, utilizing 12-step programs, providing specialized cognitive restructuring groups dealing with driving, residential/in-patient resources, and jail-based treatment.

Guiding Principle #4: Supervision and Public Concern

There are unique characteristics attributable to those who drive under the influence of alcohol and other drugs. Unlike illicit drug use, the alcoholic may not have lost support of family and friends, and in many cases may still have some semblance of a functional lifestyle. Similarly, while the court involvement may be considered inconvenient or embarrassing, the alcohol use may be condoned and even expected by family or work associates. Because of this, the DWI offender is often in a greater state of denial than other addicts and therefore more resistant to the goals of the drug court team and specifically to supervision efforts. The offender who drives under the influence is however, extraordinarily dangerous, and this coupled with the quick dissipation of alcohol from one's system makes increased supervision a necessity. Public safety remains the paramount concern and therefore more frequent monitoring by the court, the probation department and treatment must occur. Because there is potential for a greater level of danger to the public, supervision must be tighter, and the response to violations must be faster and stricter. This is accomplished through technical innovation, random and frequent drug and alcohol testing, home and other field visits, office contacts and weekly judicial review.

Guiding Principle #5: Agency, Organization and Community Partnerships

While partnerships are the cornerstone of any effective collaborative program and certainly necessary within the general drug court model, they are perhaps most important in the DWI/Drug Court setting where public safety is at great risk. Partnerships fulfill two main purposes: to increase services for program population, thereby increasing the likelihood of their long-term success; and to gain the support and understanding of agencies and organizations that might otherwise be opposed to DWI/Drug Courts. Chambers of Commerce, law enforcement, victim advocacy groups, MADD, SADD, service clubs and organizations, media organizations, defense attorneys and public defenders, attorneys working throughout the legal system, insurance companies, treatment groups, 12 step programs, licensing agencies such as ABC or ABLE Commissions, Departments of Motor Vehicles, schools, colleges and universities, hospitals, medical clinics, faith-based and culturally appropriate organizations, local pharmacies, and pharmaceutical groups can assist with support or services.

Guiding Principle #6: The Role of the Judiciary

The drug court field needs more courageous judges who are committed to implementing DWI/Drug Courts wherever they are needed. The judge who endeavors to implement a DWI/Drug Court, or who is assigned the task of being the judge in an existing program, ideally will be a judge with extensive experience handling DWI cases. An experienced judge with a strong and positive reputation in the legal community will be in the best position to forge the kinds of partnerships necessary to develop and implement a successful DWI/Drug Court. The judge must also possess the leadership skills and the motivational energy necessary to produce buy-in from the various entities which have a stake in the issue of DWI. The DWI/Drug Court judge should be a person who tempers his or her judicial authority in a manner which encourages teamwork and empowers others to contribute to the team process. Differences of opinion can lead to creative solutions to problems and the judge must incubate an environment where team members are encouraged to offer input.

Guiding Principle #7: Case Management.

Case management, the series of inter-related functions that provides for a coordinated team strategy and seamless collaboration across the treatment and justice systems, is essential for an integrated and effective DWI/drug court. There are five core functions of case management in DWI/Drug Courts. They are: 1) assessment; 2) planning; 3) linking; 4) monitoring; and 5) advocacy. Although the performance of these functions is shared by various members of the

DWI/Drug Court Team, a specially designated team member serves as the person primarily responsible for coordinating the development and pursuit of participant case plans, linking participants to resources and monitoring participant and service provider performance.

Guiding Principle #8: Transportation

Perhaps the most unique aspect which differentiates DWI/Drug Court considerations from other drug courts is the issue of transportation. Clients in DWI/Drug Courts face a more complex issue, which is the suspension or revocation of their privilege to drive as a direct result of their arrest. DWI/Drug Courts must insist that the client adhere to any and all restrictions on their driving privileges and sanctions should be imposed on them for violations of those restrictions. Within the same context, however, DWI/Drug Court clients should not be allowed to use lack of transportation as an excuse for missing appointments or other program requirements. Some jurisdictions may have good accessibility to alternative means of transportation such as public transportation, taxi service, bicycle loan programs, bike trails, and so on. Some programs obtain donated bus passes or tokens and they are distributed to participants as part of their program of incentives.

Guiding Principle #9: Evaluation

Several people and groups have a vested interest in the effectiveness of the programs. They include legislatures, victims impact groups (e.g., MADD), advocacy groups, e.g. health care industry, local funding sources (county commission, local planning councils, local law enforcement); state funding sources (AOD office; governor's crime commission or equivalent); state judiciaries; media; law enforcement. Measures and evaluation are important to all of these groups. It is essential to obtain annual data, and 3-year reports. Anecdotal measures may be useful and a powerful tool to evaluate the effectiveness of the program.

Guiding Principle #10: Sustainability

Sustainability is the last and the most important guiding principle of DWI/Drug Courts. There are several ways to obtain funding for a DWI/Drug Court including direct donors (e.g., computer companies, drug companies insurance industry, auto industry), participant contributions, public funding (e.g., one-time grants, grants that flow through other organizations, endowments), state sources of funding, state legislature, promote special legislation, excise liquor taxes, state-regulated liquor outlets, other state agencies (e.g., health departments), local support: city council, county commission (Board), health, housing, law enforcement, private sources of money by forming a (501(c)3 corporation (be cautious with this method). The success of each DWI/Drug Court is based on the resources in its own community coupled with the ability to find additional resources or funding as needed.

DWI/Drug Court Outcome Statistics:

In September of 2002, The University of New Mexico's evaluation of the Bernalillo County Metropolitan Court's DWI/Drug Court Program:

- Only 36 of the 341 graduates had been rearrested for DWI since the program's inception, which reflects a recidivism rate of 10.6%

The Fredericksburg, Virginia DUI/Drug Court completed a Recidivism Rate Comparison Study in 2001 between all DUI Court referrals and a sampling of referrals without DUI Court monitoring. The study concludes that:

- graduates of DUI/Drug Court (probationers with DUI court monitoring) had an 8% recidivism rate;
- unsuccessful completion of DUI/Drug Court held a 22% recidivism rate;
- Probationers with DUI/Drug Court monitoring had a 15% recidivism rate for successful completion and 45% recidivism rate for unsuccessful completion

In December of 2003, the Kootenai County, Idaho Prosecuting Attorney's Office and the Idaho Transportation Department's Office of Highway Safety completed an analysis of the Kootenai County DUI Court, an alcohol treatment program for persons arrested for their second DUI offense within 5 years or BAC of 0.20% or higher.

- Results to date showed a 70% program success rate for the 46 graduates of the program, versus a 40% to 60% completion rate of treatment from non-court referrals.
- Upon completing the program, only 4% of the 46 graduates received another DUI.
- A comparison of the graduate group with 100 persons eligible for the program but not participating showed 14% had received a DUI.

A five-year study conducted on the Lansing, MI DUI/Drug Court demonstrates a 13% recidivism rate for graduates of the DUI/Drug Court program versus 35% for a comparison group. In addition to these statistics, Lansing's DUI/Drug Court has the highest rate of collected court fees and fines (90%) versus an average of 60% for the rest of the Michigan state DUI/drug courts.

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About the National Drug Court Institute (NDCI)

The Office of National Drug Control Policy (ONDCP), Executive Office of the President, recognized that in order to ensure the institutionalization of drug courts throughout the nation, the drug court field needed strong educational, research and scholarship initiatives. Therefore, in December 1997, ONDCP met that challenge and provided critical funding for a drug court institute. The **National Drug Court Institute (NDCI)** was created as a branch of the **National Association of Drug Court Professionals (NADCP)** and as a result, hundreds of new drug court programs have been implemented over the past several years, totaling over 1,100 nationwide. Thousands of drug court practitioners have benefited from NDCI's state-of-the-art training and technical assistance programs. In addition, NDCI publishes a semi-annual journal, a semi-annual national problem-solving court report card and numerous monographs, briefs, fact sheets and other scholarship annually.

NDCI's mission is to provide education, research and scholarship to the drug court field and other court intervention programs. With fifty-four¹ separate team-oriented drug court planning trainings, nine² comprehensive, drug court discipline-specific training programs, eight³ separate subject-matter training programs, and onsite technical assistance for adult and family drug courts, NDCI has the most sophisticated and comprehensive drug court and DWI/Drug Court assistance available.

NDCI approaches drug court practitioner training with a long-term view of addressing present and future needs of the field. This constitutes a multi-tiered training approach, providing for the linear building of drug court knowledge and skills. As training participants begin their knowledge journey, they can attend a Drug Court Planning Initiative (DCPI) supported by the Bureau of Justice Assistance (BJA), U.S. Department of Justice. DCPI is a three-part, nine-day training series designed to educate an entire team of key criminal justice stakeholders from a judicial jurisdiction how plan and implement a drug court. Once operational, team members (judges, prosecutors, defenders, administrators, probation, police, case managers, treatment specialists) require more discipline-specific knowledge and skills.

The second tier of NDCI training is the Comprehensive Drug Court Practitioner Training Series for each discipline of the drug court team. These weeklong, intensive training programs are designed to educate the drug court practitioner, with a focus on those skills specific to each respective discipline. With support from the ONDCP, NDCI created this series of curricula to provide lateral learning based in the latest science and best practices related to the field. Once practitioners complete this tier of training, they become more adept at their respective roles and prepared to return to their drug court as a drug court team member.

The third and final tier of NDCI training is topical, providing advanced theory and hands-on assistance in the development of different drug court components. To date, NDCI has created three Subject-Matter Trainings: "Regional Evaluation Trainings," "Incentives and Sanctions: Rethinking Court Responses to Client Behavior" and "Ensuring the Sustainability of Drug

¹ Fifty-Four (54) separate DCPI Workshops: DCPI-Adult (30), DCPI-Family (24)

² Nine (9) separate NDCI Comprehensive Drug Court Practitioner Training Series programs: Adult Drug Court Judges (1), Juvenile Drug Court Judges(1), Coordinators(2), Prosecutors(1), Defense Counsel(1), Treatment Providers (1), Community Supervision Officers (2)

³ Eight (8) separate Subject Matter Training Programs: Regional Research Workshops (2 annually), Court Responses to Client Behavior: Incentive and Sanctions (3 annually), Ensuring the Sustainability of Drug Courts (3 annually).

Courts.” Each training program is regional and open to any drug court practitioner or team who wishes to attend.

NDCI is proud to have as its Federal partners, the **Office of National Drug Control Policy** (ONDCP), Executive Office of the President; the **Bureau of Justice Assistance** (BJA), the Office of **Community Oriented Police Services** (COPS) and the **National Institute of Justice**, U.S. Department of Justice; the **National Highway Traffic Safety Administration** (NHTSA), U.S. Department of Transportation; and the **Center for Substance Abuse Treatment** (CSAT), U.S. Department of Health and Human Services.

About the National Association of Drug Court Professionals (NADCP)

Largely based upon the loose confederation of those original drug courts, the National Association of Drug Court Professionals (NADCP) was established in 1994 and is the premier organization involved in the development and implementation of drug courts across the nation. Its membership boasts over 5,000 judges, prosecutors, defense attorneys, treatment providers and rehabilitation experts, law enforcement personnel, educators, researchers and community leaders.

NADCP’s mission is to reduce substance abuse, crime and recidivism rates by promoting and advocating for the establishment and funding of drug courts and providing for the collection and dissemination of information, technical assistance and mutual support to association members.

In order to effectively execute its mission, NADCP recognizes that it must work with the drug court field to not only educate the public about the efficacy of drug courts but also members of United States Congress and others who hold local, state and federal public offices. To that end, NADCP launched the Congress of State Drug Court Associations in 1997 as a vehicle to empower, support and nurture leadership at the state and local levels. Comprised of two representatives from each state, including one criminal justice professional and one treatment professional, the congress educates its members on funding sources for drug courts, keeps them abreast of the latest developments in the drug court arena and helps NADCP establish national policy. Due in large part to the combined advocacy and outreach efforts of NADCP and the Congress of State Drug Court Associations, the Conference of Chief Justices and Conference of State Court Administrators passed a joint resolution in 2000, endorsing drug courts and problem-solving courts based on the drug court model. This was the first resolution of its kind.

While garnering the support of those holding public office is essential to sustaining drug courts nationwide, it is equally important to educate members of the law enforcement, probation and corrections professions. As a result of the many ill-fated attempts to stop alcohol and drug addicted offenders from going through the revolving door of crime, it became clear that the criminal justice and law enforcement fields needed to employ a new, all encompassing strategy to battle the war on drugs. Consequently, NADCP, in conjunction with the Office of Community Oriented Policing Services (COPS), U.S. Department of Justice, has developed a series of comprehensive trainings that are specifically geared toward better educating the drug court field as to the most effective ways to incorporate law enforcement agencies into the drug court.

Not only is NADCP committed to providing training to better educate the law enforcement and probation fields, but it also strives to educate the entire drug court field. Perhaps the single most effective approach NADCP has taken to educate the field is to provide two annual training conferences: the Annual Adult Drug Court Training Conference and the Annual Juvenile and Family Drug Court Conference. Together, these conferences host over 5,000 people annually.

They address the issues most relevant to drug court professionals, display an array of educational materials that are available to the field, including numerous and up-to-date NADCP publications, and are developed throughout the year with the assistance and input of practitioners throughout the country. It is because of this kind of product and activity that the national drug court conferences have been, and continue to be, overwhelming successes.

In its first eight years of operation, NADCP has consistently provided the drug court field with the tools that are necessary to appropriately address the substance-abusing offender nationwide. In the coming years, NADCP will continue its efforts to serve the drug court field by informing and educating the nation as to the importance and effectiveness of drug courts and other court-based intervention programs.

About The National Judicial College

For more than 40 years, The National Judicial College has been the premier provider of judicial education and professional development for our nation's judiciary as well as for judges from other countries. Providing judges with the tools and knowledge they need to serve fair and impartial justice is the mission of the College.

Since 1963, The National Judicial College has awarded more than 68,000 professional judicial education certificates. The College offers an average 90 courses annually with more than 2,700 judges enrolling from across the nation and around the world. The NJC is the country's leading judicial education and training institution and is located on the historic 255-acre campus of the University of Nevada, Reno.

The National Judicial College's chief objective is to improve justice through national programs of education and training directed toward judicial proficiency, competency, skills and productivity. The University of Nevada, Reno, and the College are among the first institutions to ennoble the pursuit of judicial education by creating Master's and Ph.D. of Judicial Studies degree programs. Due to its national prominence and outstanding faculty, the NJC is also a resource for media seeking insight into current judicial issues.

The NJC houses technology-enhanced classrooms, a 75,000-volume law library, a state-of-the-art model courtroom, modern seminar rooms, distance education facilities, a computer lab and the Donald W. Reynolds National Center for Courts and Media. The College also offers numerous international programs and is home to the National Tribal Judicial Center. The College has an appointed 18-member Board of Trustees and all of the faculty hours are donated. The NJC became a Nevada not-for-profit (501)(c)(3) educational corporation on January 1, 1978. Please visit the NJC website at www.judges.org.

Please Contact Us

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