



TAD is a Collaboration of The Wisconsin Department of Justice (DOJ), The Wisconsin Department of Corrections (DOC), The Wisconsin Department of Health Services (DHS), and The Director of State Courts Office (SCO)

# Treatment Alternatives and Diversion (TAD ) Program

Participant Outcome Evaluation and  
Cost-Benefit Report (2007-2013)

July 2014



University of Wisconsin  
Population Health Institute  
SCHOOL OF MEDICINE AND PUBLIC HEALTH

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This report can be downloaded from <http://uwphi.pophealth.wisc.edu/about/staff/van-stelle-kit.htm>

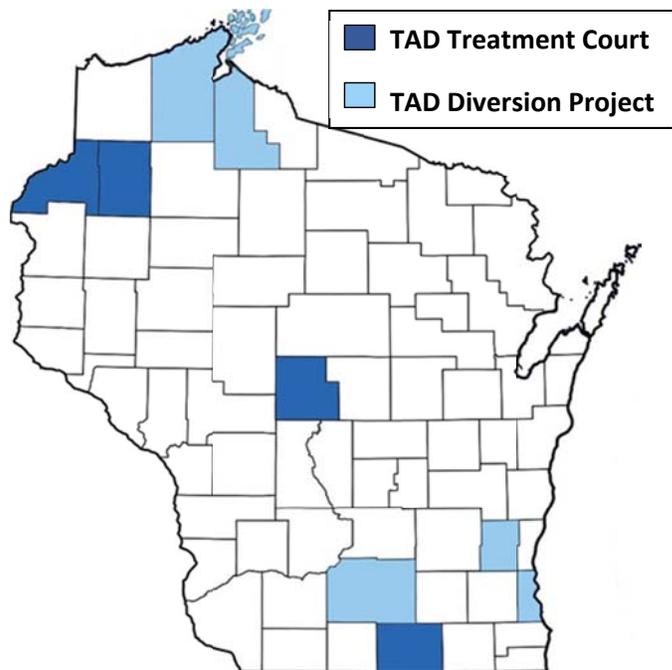
In 2005, Wisconsin Act 25 authorized “grants to counties to enable them to establish and operate programs, including suspended and deferred prosecution programs and programs based on principles of restorative justice, that provide alternatives to prosecution and incarceration for criminal offenders who abuse alcohol or other drugs.” The Treatment Alternatives and Diversion (TAD) program targets non-violent offenders with the goal of promoting public safety, reducing prison and jail populations, reducing prosecution and incarceration costs, reducing recidivism, and improving the welfare of participants. Numerous reports fully describing the TAD projects and summarizing prior TAD process and outcome evaluation efforts can be located at <http://uwphi.pophealth.wisc.edu/about/staff/van-stelle-kit.htm>.

The University of Wisconsin Population Health Institute (PHI) has conducted the evaluation of TAD since its inception and prepared this report examining the outcomes of offenders that participated in TAD projects in nine Wisconsin counties between January 1, 2007 and December 31, 2013. A companion document containing summary tables that detail all participant-level admission and discharge data separately for each TAD site is available from PHI upon request. The summary tables by site include participant-level characteristics, new offense, conviction and sentencing information from the Consolidated Court Access Program (CCAP), and state prison incarceration for TAD participants from the Department of Corrections (DOC) administrative data systems.

## Description of TAD Sites

As of December 2013, the TAD Program portfolio included projects in nine counties. In Fall 2006, grants were awarded to seven counties to begin implementation in January 2007: Rock, Dane, Milwaukee, Wood, Washington, and Burnett/Washburn (jointly with the St. Croix tribe). In Fall 2011, one additional grant was made jointly to Ashland and Bayfield counties to begin implementation in January 2012.

All nine TAD sites provide participants with evidence-based case management, substance abuse treatment, drug testing, and monitoring, but vary in program model/approach, length, treatment intensity, and target population. Four of the TAD projects are adult drug treatment courts: Burnett County (in collaboration with the St. Croix tribe), Washburn County, Wood County, and Rock County. Utilizing standard drug treatment court models, these sites serve non-violent offenders pre- and post-adjudication through the integration and collaboration of judicial, treatment, probation, social services, law enforcement, and case management services. Five of the TAD projects use diversion models: Milwaukee County, Washington County, Dane County, Ashland County, and Bayfield County.



Milwaukee County operates a pre-charging diversion and deferred prosecution project. Washington County diverts eligible offenders charged with operating while intoxicated (OWI) and offenders under community supervision by the DOC as an alternative to revocation (ATR) of supervision. Dane County operated a pre-trial bail diversion project based in arraignment court. Ashland and Bayfield Counties offers bail monitoring and deferred entry of judgment programs.

# TAD Admissions

A total of 3,093 offenders were admitted to TAD projects during the first seven years of implementation. Table 1 illustrates the diversity of TAD project models by providing a brief description of seven years of TAD admissions for each of the nine sites. TAD projects vary in size/capacity, with some admitting less than 50 offenders over seven years and one admitting almost 1,600. Some projects admit primarily younger, African American men and others admit primarily older, Caucasian women. Some projects focus on serving offenders charged with operating while intoxicated (OWI) and some projects admit mainly those charged with drug offenses. Participants' drug of choice also varied across TAD sites, with some primarily alcohol and/or marijuana, and some methamphetamine or opiates.

<b>Table 1: Brief Overview of All TAD Admissions 2007-2013 By Project Site/County (N=3,093)</b>									
	<b>Bur- nett</b>	<b>Wash- burn</b>	<b>Rock</b>	<b>Wood</b>	<b>Ash- land</b>	<b>Bay- field</b>	<b>Dane</b>	<b>Mil- waukee</b>	<b>Wash- ington</b>
<b>Model</b>	Drug Court	Drug Court	Drug Court	Drug Court	Varied Divrsn	Varied Divrsn	Bail Divrsn	Pre-Trial Divrsn	Divrsn and ATR
<b>Total # Admissions</b>	50	42	438	123	28	44	212	1,597	559
<b>Male</b>	58%	81%	75%	72%	64%	84%	67%	74%	73%
<b>Average Age</b>	36 years	29 years	28 years	27 years	31 years	36 years	30 years	29 years	32 years
<b>Race:</b>									
Caucasian	62%	93%	80%	96%	71%	48%	65%	48%	97%
African American	0	0	18	2	0	0	32	48	1
Native American	38	7	0	2	29	52	1	1	1
Other	0	0	2	0	0	0	2	3	1
<b>Offense Type:</b>									
Drug	42%	33%	76%	75%	18%	5%	47%	76%	10%
Property	10	29	17	17	21	11	29	14	7
OWI	32	17	1	0	11	43	6	0	76
Other	16	21	6	8	50	41	18	10	7
<b>Drug of Choice:</b>									
Alcohol	42%	45%	11%	2%	61%	61%	21%	12%	77%
Amphetamines	34	7	1	3	14	0	0	<1	<1
Cocaine/crack	0	5	8	7	0	0	20	15	3
Marijuana	18	36	55	68	7	14	9	44	11
Opiates	4	7	25	19	11	4	49	27	8
Other/not assessed	2	0	<1	1	7	21	1	2	<1
<i>Note. Ashland and Bayfield include admissions for CY 2012 and CY 2013 only.</i>									

Of the 3,093 TAD admissions, 653 were admitted to adult treatment courts and 2,440 were admitted to diversion projects (Table 2). While similar with regard to gender and average age, the diversion projects were more likely than treatment courts to admit African American offenders (due primarily to Milwaukee TAD). The most recent DOJ report on Wisconsin arrests showed that 71% of all arrestees in 2012 were male, nearly identical to the overall proportion of men admitted to TAD at 73% (Wisconsin Department of Justice, 2013). However, TAD projects admitted a higher proportion of African Americans (30%) during their first seven years of operation than the 20-24% rates of African American arrestees reported in DOJ Uniform Crime Report summaries for 2007-2012 available on their website. Treatment courts were significantly more likely to admit participants charged with drug crimes and diversion projects were significantly more likely to admit participants charged with operating while intoxicated (due primarily to Washington TAD which targets OWI offenders). Treatment courts were more likely to admit marijuana users and diversion projects were more likely to admit those whose drug of choice was alcohol. A larger proportion of treatment court admissions were assessed to be high criminal risk than diversion project admissions.

**Table 2: Description of TAD Admissions 2007-2013**

	<b>Treatment Courts</b>	<b>Diversion Projects</b>	<b>Overall</b>
	N = 653	N = 2,440	N = 3,093
<b>Gender:</b>			
Male	74%	73%	73%
<b>Average Age (in years)</b>	28 years	30 years	29 years *
<b>Race:</b>			
Caucasian	83%	61%	66% *
African American	12	34	30
Native American	4	3	3
Other	1	2	1
<b>Most Serious Offense at Admission</b>			
Drug-related (possession/delivery/manufacture)	71%	57%	60%
Property/fraud	17	14	14
OWI	4	19	16
Other	8	10	10
<b>Drug of Choice</b>			
Marijuana	53%	33%	37% *
Alcohol	14	29	26
Opiates	21	24	23
Cocaine/crack	7	12	11
Amphetamines	4	<1	1
None/other/not assessed	1	2	2
<b>Admitted as Alternative to Revocation (ATR) of Probation/Parole/Extended Supervision</b>	16%	8%	9% *
<b>Criminal Risk Rating at TAD Admission</b>			
High	36%	17%	22% *
Moderate	42	52	49
Low	22	31	29
<i>*difference significant at p&lt;.05 or better [more than 95% confident that the difference did not occur due to chance]</i>			

## Treatment and Monitoring Services

TAD projects provide participants with a variety of evidence-based treatment and support services, including case management, substance abuse treatment, drug testing, and monitoring. Table 3 details the treatment services received by treatment court and diversion project participants. Nearly three-quarters of all discharges received outpatient substance abuse treatment while in TAD. Treatment court participants were more likely to also receive treatment through inpatient/residential/ halfway house facilities than diversion project participants. Treatment court participants were also more likely to receive outpatient mental health treatment, employment, education, housing, and financial services.

**Table 3: Treatment and Support Services Received by All TAD Discharges 2007-2013**

	Treatment Courts	Diversion Projects	Overall
	N = 579	N = 2,316	N = 2,895
<b>Percent Received Substance Abuse...</b>			
inpatient/residential treatment	17%	11%	12%*
halfway house/group home	10	4	5*
day treatment	21	8	11*
outpatient treatment	83	67	70*
outpatient-intensive	5	4	4
outpatient-MATRIX model	10	1	3*
Support groups (AA, CA, etc.)	54	35	38*
<b>Percent Received Mental Health...</b>			
inpatient treatment	2%	<1%	1%
outpatient treatment	34	15	19*
<b>Percent Received Other Services...</b>			
employment services	47%	23%	28%*
education services	34	18	21*
housing services	26	6	10*
assistance with finances	30	4	9*

\*difference significant at  $p < .05$  or better

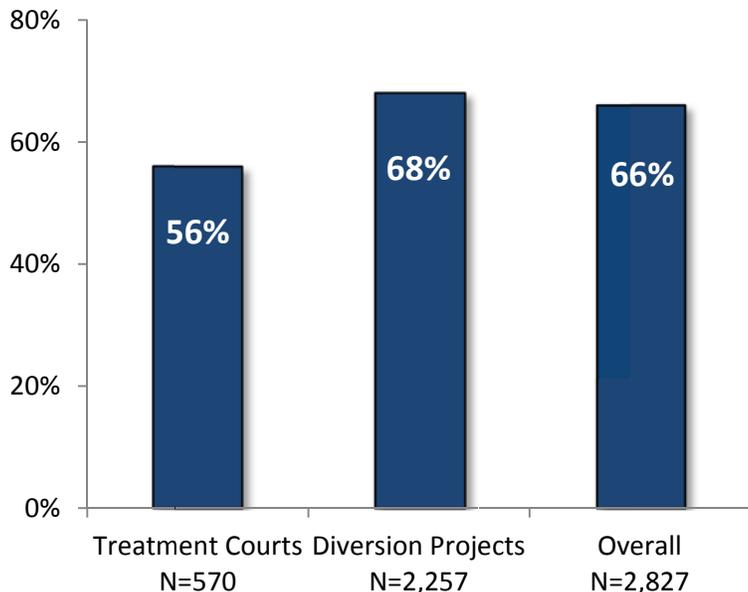
TAD projects also provided comprehensive monitoring of participants in the community through case management and treatment court status hearings/district attorney case reviews. Participants received an average of 49 case manager contacts during the course of their involvement. Treatment court participants attended an average of 22 court status hearings with the drug court judge, while diversion project participants received an average of four district attorney reviews (primarily in Milwaukee TAD).

All TAD project participants are required to submit to random urinalysis (UA) testing to monitor continued drug use. TAD treatment court discharges had an average of 70 drug tests, with about 10% of those tests confirmed positive for prohibited substances. TAD diversion project discharges had an average of 11 drug tests, with approximately 3% of the tests confirmed positive for prohibited substances. The difference between treatment courts and diversion projects in the average number of drug tests performed is a result of differences in project length, participant characteristics, and project approach/model. Treatment courts also conducted an average of 43 portable breathanalysis tests (PBT) per participant and diversion projects conducted an average of two PBT tests per participant. Less than 1% of these PBT tests were positive for alcohol use during the course of program participation.

## Completion Rates and Length of Stay

Overall, 66% of offenders discharged from TAD projects between 2007-2013 successfully completed program requirements (Figure 1).

**Figure 1: Completion Rate by Project Model**



TAD treatment courts had a completion rate of 56%, higher than the best national estimate of drug court graduation rates obtained through meta-analysis which is just below 50% (Mitchell, Wilson, Eggers, and MacKenzie, 2012). The TAD diversion completion rate of 68% is similar to the national average of 70% completion for pretrial diversion programs, ranging from 15-98% nationwide (National Association of Pretrial Services Agencies, 2009).

TAD participants were involved in project treatment and monitoring for an average of 192 days (6 months). Average length of stay varied significantly between treatment courts (11 months) and diversion projects

(5 months), and between those who completed (7 months) and those who did not (5 months).

Treatment court graduates participated for an average of 13 months and diversion project completers were involved for an average of 6 months.

## Incarceration Averted

In the first seven years of operation, the TAD program averted offenders from a total of 231,533 days of incarceration (Figure 2) for the 2,895 participants discharged between 2007-2013.

Incarceration days averted was estimated by each TAD site for each individual participant. At some sites, the Judge and District Attorney estimate what the sentence would have been for each participant if they had not entered drug court. Some diversion sites estimated the number of days averted based on the type of offense (i.e., OWI, drug, property, etc.)

**Figure 2: Number of Incarceration Days Averted Through TAD 2007-2013**



The four TAD treatment courts averted a total of 92,608 incarceration days (average per discharge = 160) and the five TAD diversion projects averted a total of 138,925 days (average days per discharge= 60). Separate examination of only successful completers revealed that treatment courts averted an average of 282 incarceration days per graduate and diversion projects averted an average of 86 incarceration days per completion.

## Criminal Justice Outcomes: Conviction, Prison Incarceration, and Recidivism

Due to the foresight of those who developed the legislation creating TAD and the legislative emphasis on the collection and use of evaluation data, the current effort also included an examination of participant criminal justice outcomes after discharge from TAD.

Outcomes data included documentation of (a) any new offense that resulted in a subsequent conviction and (b) any state prison incarceration episode between the date of TAD discharge and December 31, 2013 (data cut-off for these analyses). The PHI evaluation team manually retrieved new conviction data for each of the 3,093 offenders admitted to TAD from the Consolidated Court Access Program (CCAP) website of the Wisconsin Court System. The data abstracted from CCAP included filing, charging, offense, disposition, and sentencing data for the first criminal offense committed after TAD project discharge. To document state prison incarceration of TAD discharges, the Department of Corrections (DOC) provided PHI with prison admission data for each TAD participant. Individual matching was performed based on WI State Identification Number (SID), DOC identification number, name, and birthdate provided to DOC by the PHI evaluation team. The DOC data included prison admission date, reason for admission, and release date for each prison episode within the follow-up period.

The length of follow-up period varied for each TAD participant, with some only a few weeks post-discharge and some up to seven years post-discharge. The average follow-up interval for the discharges included in the outcomes analyses was nearly four years (45 months). The average follow-up interval was 37 months for treatment court discharges and 46 months for diversion project discharges. This variation in follow-up interval was adjusted for in the analyses examining new convictions and prison incarceration within one, two, and three years after TAD discharge (Figures 3, 4 and 5).

The sample sizes for the separate analyses of criminal justice outcomes were dependent upon whether the analysis included all discharges, or examined only those who had been discharged from TAD projects for at least one year, two years, or three years. To optimize the accuracy and validity of the criminal justice outcomes data the following were excluded from the sample of all 2,895 discharges prior to conducting the outcomes analyses to arrive at the final sample of cases for each analysis:

1. Offenders who died after TAD discharge were excluded from the outcomes analyses as manually verified for each participant by PHI staff using the Social Security Death Index website.
2. Administrative terminations from TAD projects (i.e., extradited, moved out of area, absconded prior to intake, died while in program, or found ineligible after admission) were excluded.
3. Participants currently active in TAD projects on 12/31/2013 were excluded.
4. Participants of Ashland TAD and Bayfield TAD were also excluded because these sites were added to the TAD portfolio in 2012, making them currently inappropriate for valid outcomes analysis.

Tables of results illustrate the presence of a statistical difference between groups using an asterisk (\*) to denote a difference that is significant at  $p < .05$  or better – indicating greater than 95% confidence that the difference(s) did not occur due to chance.

**Data Limitations:** There are several limitations associated with the data available to document TAD outcomes: (1) Lack of a common identifier across state agency data systems prohibits efficient matching of individual data, (2) the CCAP data system does not always contain case disposition information, (3) the incarceration data does not include incarceration outside of Wisconsin, (4) WI Department of Workforce Development employment data were not available for cost-benefit analyses, and (5) the evaluation scope does not allow for a randomized control group or assessment of offender substance use or treatment participation after TAD discharge.

## New Conviction

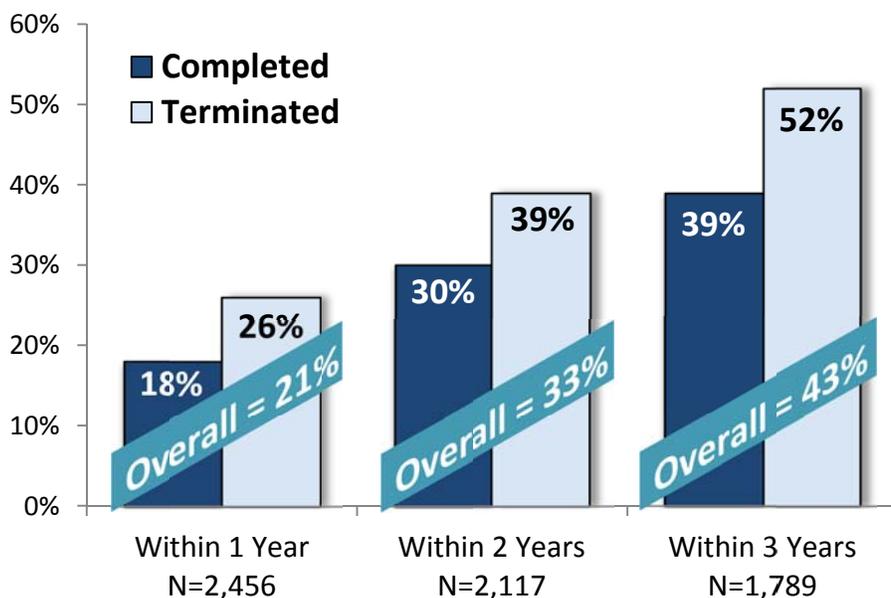
For the purposes of these analyses, new conviction is defined as the first criminal offense committed after discharge from TAD for which there was a subsequent conviction documented in the CCAP data system. The date of the offense was used to determine the first criminal offense. Any criminal offense was included, as well as operating after license revocation/suspension only for OWI offenders (other traffic offenses were not included). Cases that received an eventual disposition of “dismissed” or “deferred prosecution” were not counted as convicted of the offense, but cases without a documented disposition in CCAP were counted as convicted to provide the most conservative estimate possible.

The average number of days between TAD discharge and first criminal offense for those participants with a new conviction was 327 days (11 months). Participants who completed TAD and subsequently reoffended had a significantly longer time to first arrest (371 days) than individuals who did not successfully complete TAD projects (278 days). There were no significant differences in days to first offense by project model, gender, race, or drug of choice.

The length of follow-up period varied for each TAD participant, with some only a few weeks post-discharge and some up to seven years post-discharge by December 31, 2013. To adjust for the variation in the length of follow-up, analyses were conducted controlling for time after program discharge by examining the proportion that committed a new offense for which they were later convicted within one, two, and three years after discharge. Only those who had been discharged at least one year, two years, or three years were included in each portion of the cumulative analyses, and offenses that were committed more than three years after TAD discharge were not included.

Overall, 21% of TAD discharges committed a new offense within one year after their program discharge for which they were later convicted, 33% within two years, and 43% within three years (Figure 3).

**Figure 3: New Criminal Offense Within 1, 2, and 3 Years After TAD Discharge Which Resulted in Conviction**



These results are higher than those found during the 2007-2010 examination of TAD (Van Stelle, Goodrich, and Paltzer, 2011) which reported a 1-year conviction rate of 15%, a 2-year conviction rate of 21%, and a 3-year conviction rate of 24%. These differences can be partially attributed to both the greater number of TAD discharges who were at least three years post-discharge as well as the increased focus on admitting offenders with higher risk levels.

As the evaluation design and resources for TAD could not include an experimental control group or comparison group, the best benchmarks available against which to compare the TAD outcomes results come from other county, state, and national efforts. The current analyses include all valid discharged cases using the “intent to treat” approach which includes all participants regardless of their adherence to program requirements, regardless of the treatment they actually received, and regardless of subsequent withdrawal from treatment. Comparisons between participants that completed TAD projects and those who did not are included primarily to inform the reader. TAD participants are a broad mix of both offenders with extensive criminal justice involvement and those without significant criminal histories participating in diversion projects, so points of comparison include rates based on examinations of prison releases, treatment court participants in other states, and offenders under probation supervision in the community.

TAD completers (39%) were significantly less likely than those that did not complete (52%) to be convicted of a new offense within three years after TAD. There was no significant difference between treatment court and diversion projects in overall rates of new conviction after TAD discharge. Though not an ideal comparison to TAD due to differences in target population, a national study of 30 states reported a 3-year conviction rate of 45% for prison releases (Bureau of Justice Statistics, 2014) which is higher than the 3-year rate of 39% for TAD completers in the current study. An examination of 1-year new conviction rates for five non-TAD pretrial diversion projects in Wisconsin (Van Stelle, Goodrich, Lecoanet, Linnan, and Paltzer, 2013) revealed a 1-year new conviction rate of 18%, identical to the 1-year rate of 18% for TAD completers in the current study. This rate is also similar to a statewide evaluation of Minnesota drug courts which reported a 1-year new conviction rate of 14% (Dosal, 2012).

**Type of New Conviction After TAD:** The TAD participants convicted of a new offense within three years of TAD discharge were most likely to be convicted of a drug-related offense (28%). Others were convicted of property crimes (16%), OWI (12%), operating after license revocation/suspension (12%), or other crimes such as bail jumping, prostitution, or resisting arrest (9%). An additional 23% of those with a new conviction after TAD discharge (174 participants) were convicted of an assaultive/violent offense after TAD discharge. To provide a public safety context for this finding, these 174 participants made up only 6% of all the 2,895 TAD discharges and the majority were disorderly conduct or battery offenses. Those who completed TAD were significantly less likely to be convicted of a new drug or property crime (38%) than those who were terminated (52%). This continuum of offenses is consistent with data on 2013 Wisconsin criminal case filings that show the most common misdemeanor offenses to be battery/disorderly conduct, drug possession, and bail jumping, and the most common felony offenses to be property, drug possession, and bail jumping (WI Statewide Criminal Justice Coordinating Council, 2014).

New convictions were primarily misdemeanor offenses (51%), less than one-third were felony offenses (30%), and the remainder were local ordinance violations/forfeitures (19%). Participants who completed TAD were significantly less likely than those that did not to be convicted of a new felony offense after discharge from TAD (24% vs. 38%). These results are similar to the types of first offenses reported in a national study of prison releases (Bureau of Justice Statistics, 2014).

**Sentencing For New Conviction After TAD:** Table 4 shows that TAD completers convicted of a new offense within three years after TAD were significantly more likely to receive a non-incarceration sentence (fine, license suspension, or probation), while those terminated were more likely to receive a sentence that included jail or prison incarceration. Additionally, completers were sentenced to less incarceration and/or supervision time (3 months) than those terminated (6 months) for a new conviction that resulted in a sentence that included supervision or incarceration. There was no significant difference between TAD treatment courts and diversion projects with regard to length of incarceration or length of correctional supervision received as part of the sentence for a new conviction. However, higher criminal risk TAD participants received longer sentences (both longer terms of supervision and longer terms of incarceration) than lower risk individuals for offenses committed after TAD.

	<b>Completed</b>	<b>Terminated</b>	<b>Overall</b>
	N = 449	N = 329	N = 778
<b>Sentence for New Conviction</b>			
Fine or driver's license revoke/suspend	28%	13%	22% *
Probation + driver's license revoke/suspend	10	13	11
Jail + other non-incarceration penalties	41	50	45
Prison + extended supervision	10	16	13
Case open/no sentence available on CCAP	11	8	9
<i>* difference significant at p&lt;.05 or better</i>			

## **State Prison Incarceration**

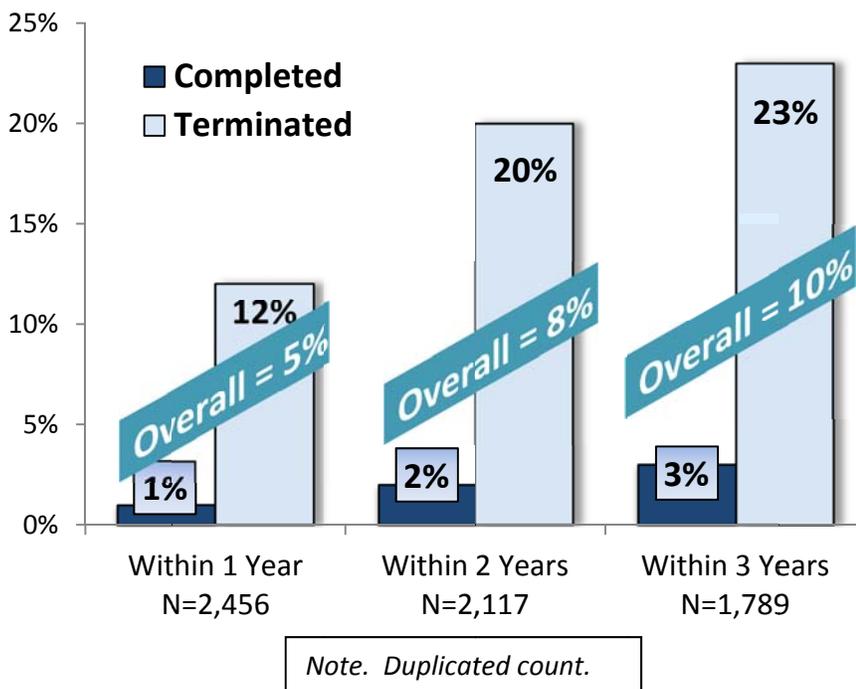
Analysis of Department of Corrections data for TAD discharges revealed that 84% were not incarcerated in state prison at any time after TAD participation by December 31, 2013 (Table 5). Only the TAD participants admitted to prison for revocation of community supervision or for a conviction that resulted in a new sentence were included in further analyses of prison incarceration. The 3% admitted for temporary probation/parole holds in Milwaukee County and the 1% admitted to prison-based treatment programs as an alternative to revocation were not included in further analyses.

	<b>Treatment Courts</b>	<b>Diversion Projects</b>	<b>Overall</b>
	N = 558	N = 2,185	N = 2,743
<b>Not Admitted to State Prison After TAD Discharge</b>	80%	85%	84%
<b>Admitted to State Prison For:</b>			
Temporary Probation/Parole Hold(s) Only	0%	4%	3%
Institutional Alternative to Revocation for Treatment Only	2	1	1
Revocation of Community Supervision (no new sentence)	6	4	4
Any New Sentence	12	6	8

The length of follow-up period varied for each TAD participant, with some only a few weeks post-discharge and some up to seven years post-discharge. To adjust for the wide variation in the length of follow-up in the participants discharged during the first seven years of TAD implementation, analyses were conducted controlling for time. Figure 4 summarizes the percent of TAD discharges that were admitted to state prison within one year, within two years, and within three years after their project discharge date. Only those who had been discharged from TAD at least one year, two years, or three years were included in each portion of the cumulative analyses, and incarceration episodes that began more than three years after TAD discharge were not included.

Overall, 90% of TAD participants were not admitted to state prison for a new offense or revocation of community supervision within three years (Figure 4). Five percent of TAD discharges were admitted to prison for a new sentence or revocation within one year after their program discharge, 8% were admitted within two years, and 10% were admitted within three years. These results are just slightly lower than those found during the previous examination of TAD discharges (Van Stelle et al., 2011).

**Figure 4: State Prison Admission For New Sentence or Revocation Within 1, 2, and 3 Years After TAD Discharge**



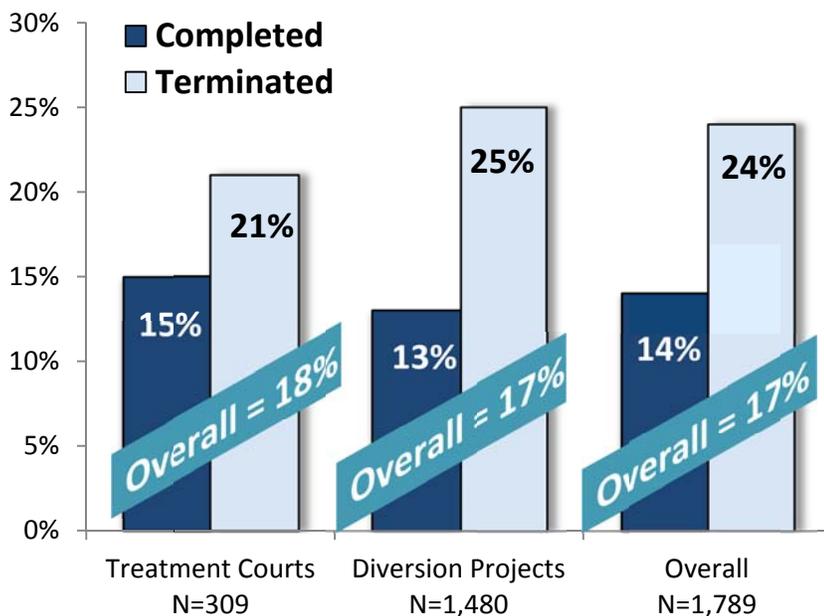
Only 3% of TAD completers were admitted to prison for a new sentence or revocation within three years of their program discharge, compared to 23% of those who did not complete TAD projects. Treatment court participants (17%) were significantly more likely than diversion project participants (9%) to be admitted to state prison for a new sentence or revocation within three years of TAD discharge. This result can most likely be attributed to differences between the two project models and target populations -- the post-plea/post-conviction nature of the treatment court sample and the fact that many of the diversion project sample are first-time or lower-level offenders.

## Three-Year Recidivism

Recidivism of TAD participants was also assessed utilizing parameters as consistent as possible with the Wisconsin Department of Corrections definition of recidivism given the differences in populations. In this context “recidivism” is defined as: A new criminal offense committed within three years that resulted in both conviction and a sentence that included probation supervision and/or state prison incarceration. Using data on offense date, case disposition, and sentencing from CCAP, the current analyses include TAD discharges with a new criminal conviction for an offense committed within three years of TAD discharge. Additionally this analysis includes only those participants three or more years post-TAD discharge at the time of data collection.

Using this definition of recidivism, Figure 5 reveals an overall three-year recidivism rate of 17% during the first seven years of TAD Program implementation. Offenders who successfully completed TAD treatment and monitoring had a significantly lower three-year rate of recidivism (14%) than those who did not successfully complete TAD projects (24%).

**Figure 5: Three-Year Recidivism -- Sentenced to Probation and/or Prison for New Offense Committed Within Three Years After TAD Discharge**



TAD projects admit a diverse group of offenders, with some similar to those under community supervision and some similar to those released from prison. This makes it difficult to estimate a good point of comparison without the resources to develop a comparison group as part of the evaluation. However, information was obtained from DOC regarding 3-year recidivism for (a) prison releases from 2007-2009, and (b) for offenders discharged from probation/parole from 1980-2004.

The average of these two recidivism rates was 25% and can provide one point of comparison for the TAD treatment court 3-year recidivism rate of 18% (Wisconsin Department of Corrections, 2007; Wisconsin Department of Corrections, 2014). The TAD diversion project three-year recidivism rate (17%) can be compared to Milwaukee County community supervision three-year recidivism rates (21%) because Milwaukee TAD participants made up the majority of the diversion project sample (Wisconsin Department of Corrections, 2006). The overall TAD three-year recidivism rate (17%) can be considered roughly comparable to a rate of 23% across the diverse offender populations in Wisconsin (average of the combined DOC rate of 25% and the Milwaukee County supervision 3-year recidivism rate of 21%).

## Special Focus

Additional analyses were conducted to examine outcomes related to distinct topics and offender populations of special interest to policymakers:

- The relationship between criminal risk level and subsequent re-offense and recidivism;
- Offenders admitted to TAD as an Alternative to Revocation (ATR) of community supervision;
- Offenders charged with operating while intoxicated (OWI);
- Female offenders admitted to TAD; and
- Offenders admitted to TAD with opiates as their drug of choice.

These Special Focus analyses include any criminal conviction or prison incarceration after TAD discharge unadjusted for variation in the length of follow-up due to the small sample sizes associated with the ATR, OWI, female, and opiate subgroups. Three-year recidivism rates are presented adjusting for follow-up interval for descriptive purposes in spite of the sample sizes.

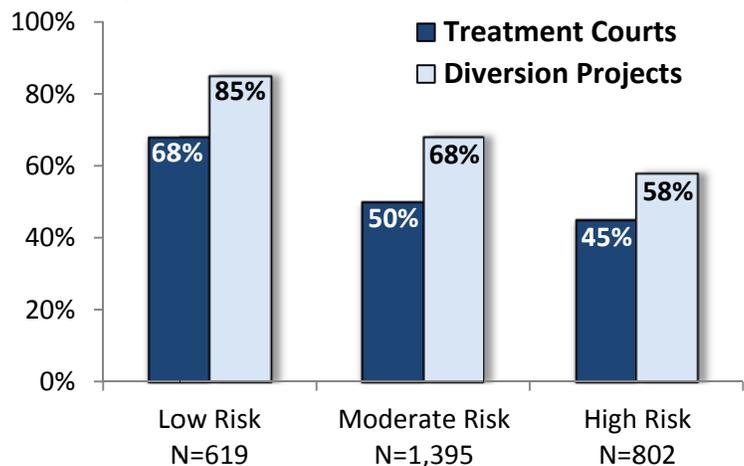
## Criminal Risk Level

One foundation of good correctional practice is the use of a validated criminal risk and needs assessment tool. Objective, research-based information has resulted in improved decision-making throughout the criminal justice system, leading to reductions in recidivism and increased public safety (Vera Institute of Justice, 2011). Assessment results can be used to determine the appropriate level of treatment and supervision to obtain optimal outcomes. Generally the higher the risk level, the more intensive the program services should be and the lower the risk level, the less intensive the services should be. Marlowe (2012) states that “Providing too much treatment or too much supervision is not merely a potential waste of scarce resources. It can increase crime or substance abuse by exposing individuals to more seriously impaired or antisocial peers, or by interfering with their engagement in productive activities such as work, school, or parenting.”

TAD projects utilize a variety of validated criminal risk assessment tools at program admission to inform case planning and treatment matching. TAD projects serve offenders of varying criminal risk levels: 29% low, 50% moderate, and 21% high risk. The finding that only about one-quarter of TAD participants are high risk can be generally attributed to (a) the 2005 WI Act 25 language related to program eligibility criteria that excludes from admission any offenders with a past or current assaultive/weapons offense who are typically higher risk, and (b) to diversity among TAD models/approaches and target populations.

Low risk participants in all TAD projects were most likely to successfully complete and high risk participants were least likely to complete (Figure 6). TAD projects effectively treat and monitor high risk offenders, with roughly one-half successfully completing program requirements.

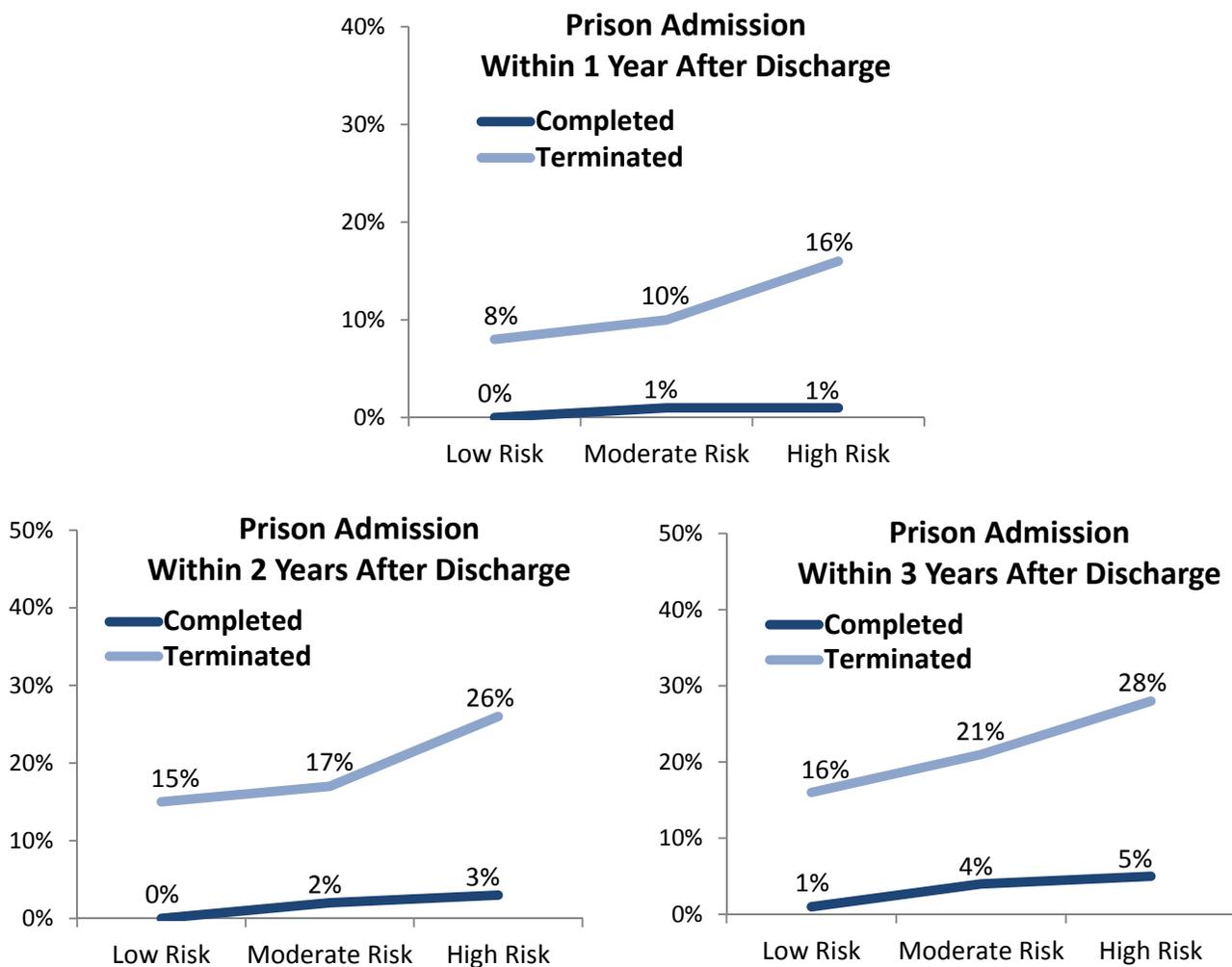
**Figure 6: TAD Completion Rate by Project Model and Level of Criminal Risk**



High risk offenders in TAD projects were most likely to be convicted of a new offense after TAD discharge. Overall, 36% of low risk participants, 43% of moderate risk participants, and 51% of high risk participants were convicted of a new offense within three years after TAD discharge. There was no significant difference between TAD treatment courts and TAD diversion projects in 3-year new conviction rates by criminal risk level. Participants of all risk levels who did not complete TAD were more likely to be convicted of a new offense after TAD discharge than TAD completers. Although not strictly comparable because it measured rearrest rather than conviction, a study of Ohio offenders under community supervision provides some context in reporting that 17% of low criminal risk, 32% of medium risk, and 58% of high risk were arrested within one year (Council of State Governments Justice Center, 2013).

Figure 7 illustrates the finding that TAD completers of every risk level were less likely to be admitted to state prison for any reason than those who were terminated, and that high risk offenders who did not complete TAD projects were the most likely to be admitted to prison within one, two, and three years after TAD discharge. Only 1% of low risk TAD completers, 4% of moderate risk TAD completers, and 5% of high risk TAD completers were admitted to prison within three years after TAD discharge.

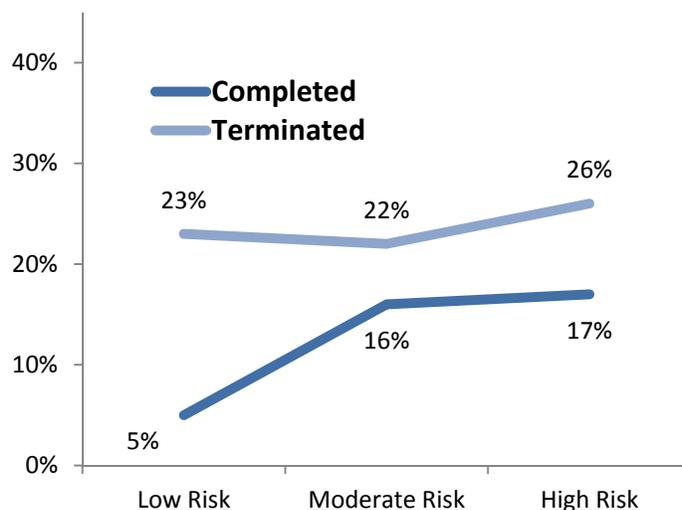
**Figure 7: Any Prison Admission After TAD Discharge by Criminal Risk Level**



Three-year recidivism rates for all TAD discharges were 10% for low criminal risk, 18% for moderate criminal risk, and 21% for high criminal risk. In this context, “recidivism” is defined as a criminal offense that results in conviction and an associated sentence that includes probation or prison. The analysis includes only those participants that were at least three years past TAD discharge and that had a recidivism event within three years after TAD discharge.

**Figure 8: 3-Year Recidivism Rate by Criminal Risk**

The 3-year recidivism rate for high risk TAD completers of 17% (Figure 8) is lower than 23%, the average recidivism rate across DOC prison releases (2007-2009) and statewide and Milwaukee County community correctional supervision populations (1980-2004). Further detail on the calculation of this comparison rate can be found in the Technical Description of Cost-Benefit Analysis attachment to this report. Low risk participants who completed TAD projects had a 3-year recidivism rate of only 5%, while low risk participants who did not complete had a much higher 3-year recidivism rate of 23%.



## **Alternative to Revocation (ATR) Participants**

Seven of the TAD projects admit offenders under community supervision by the Department of Corrections as an alternative to revocation (ATR) of their probation, parole, or extended supervision. Revocation of community supervision can result in incarceration, most often in state prison, which has an immediate impact on the prison population. Increasing the number of ATRs who receive treatment and monitoring through TAD would have a direct effect on prison population levels.

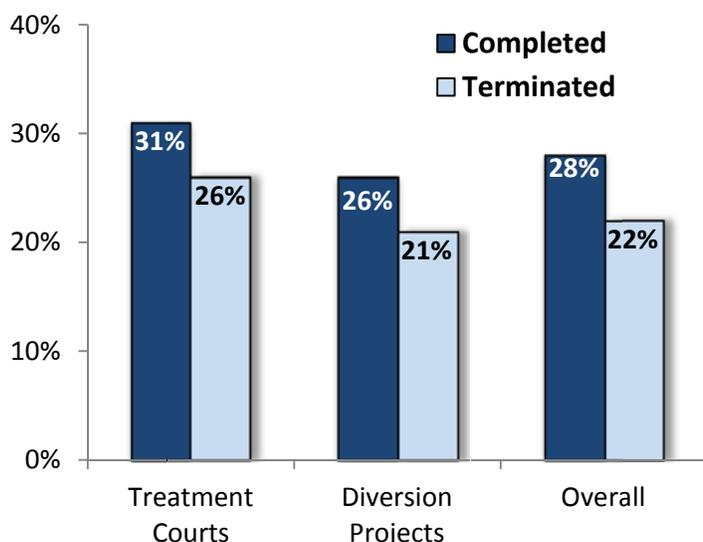
A total of 285 offenders were admitted to TAD as ATRs during the first seven years of TAD, with the largest proportion of ATR offenders (37%) entering the Washington TAD diversion project. Approximately one-half of ATR admissions successfully complete TAD projects (Table 6). ATR admissions were averted from a total of 25,239 days of prison incarceration and from 10,384 days of jail incarceration. ATR admissions have higher rates of new conviction and prison incarceration than other TAD participants, which can be attributed in part to the charging and imposition of sentences for those who do not successfully complete the requirements of their alternative to revocation. Overall, 43% of TAD ATRs were convicted of a new offense and 37% were admitted to prison at any time after TAD discharge. A study of 200 offenders on community supervision with the Wisconsin Department of Corrections found that 33% of cases committed a new offense while on supervision that was the basis for revocation (Van Stelle and Goodrich, 2009). Although the population differs somewhat from the TAD ATRs and it measured rearrest rather than conviction, a study of a New Jersey ATR program for technical violator parolees found that 43% of participants had been rearrested within one year of program discharge (White, Mellow, Englander, Ruffinengo, 2010).

<b>Table 6: Outcomes for Alternative to Revocation (ATR) Participants 2007-2013</b>			
	<b>Treatment Courts</b>	<b>Diversion Projects</b>	<b>Overall</b>
<b>Number of ATR Admissions</b>	101	184	285
<b>Percent of ATR Admissions That Completed TAD</b>	52%	45%	48%
<b>Number of Incarceration Days Averted</b>	25,375	10,248	35,623
Prison	21,406	6,415	10,384
Jail	3,969	3,833	25,239
<b>ATR Admissions Convicted of Any New Offense At Any Time After TAD Discharge</b>	49%	39%	43%
Completed TAD	51%	43%	46%
Terminated from TAD	47%	37%	40%
<b>ATR Admissions Admitted to State Prison At Any Time After TAD Discharge</b>	30%	41%	37% *
Completed TAD	11%	21%	30% *
Terminated from TAD	51%	58%	56% *

*\* difference significant at p<.05 or better Excludes Milwaukee and Ashland TAD which did not admit ATRs*

Figure 9 shows that ATRs discharged from TAD have a 3-year recidivism rate of 25% (an offense within three years of TAD discharge resulting in any sentence that included probation or prison incarceration). There was no significant difference in recidivism rates between ATRs that completed TAD and those who did not. The rates of new conviction, prison admission, and recidivism after TAD reveal a potential concern related to the current approach to treating and monitoring ATRs. While some TAD sites have cultivated successful relationships with probation/parole staff in efforts to increase their success with ATR admissions, others have discontinued admitting ATRs due to limited success in retaining them in treatment and achieving positive outcomes. Barriers to success with ATRs include (a) probation/parole referral of inappropriate/ineligible offenders to TAD projects during 2006 and 2007, (b) difficulties agreeing with probation/parole staff on responses to substance use relapse, (c) turnover among both probation/parole and TAD staff, and (d) ATR admissions are significantly more likely to be moderate/high criminal risk than other TAD participants. TAD staff indicate that consistent collaboration with community corrections is necessary for the successful involvement of ATRs in TAD projects.

**Figure 9: 3-Year Recidivism Rate for ATR Admissions (N=164)**



TAD state partners should work with TAD sites to develop approaches to improve treatment retention for ATRs and ensure implementation of evidence-based practices for this population. Increasing the effectiveness of TAD services and decreasing recidivism for this population would directly benefit Wisconsin's correctional system. Future expansion of TAD should focus on funding projects that target ATRs in partnership with DOC utilizing best practices for correctional populations.

## OWI Participants in Washington County TAD

Seven of the TAD projects admit offenders charged with operating while intoxicated (OWI), but only Washington County TAD is included in the following special analysis because they admitted 426 of the total 488 OWI participants over a seven-year period.

Washington TAD diversion project admits offenders charged with 2<sup>nd</sup> or 3<sup>rd</sup> offense OWI, providing case management using the MATRIX outpatient substance abuse treatment model. The vast majority (84%) of OWI offenders admitted to Washington TAD successfully completed program requirements (Table 7). The program has an overall average length of stay of 122 days, with an average length of stay for those who complete program requirements of 132 days and an average length of stay of 74 days for those terminated. The 410 OWI participants discharged from the program averted a total of 14,643 incarceration days, primarily county jail days.

Thirty-six percent of the Washington TAD OWI discharges were convicted of any new offense after TAD, which is comparable to the 23% of deferred prosecution and 34% of felony OWI offenders who committed new offenses reported in other studies (Washington State Institute for Public Policy, 2007; Vermont Center for Justice Research, 2009). Approximately one-third (32%) of the Washington TAD OWI participants were convicted of a new OWI offense, with no difference in re-offense rates between completers and non-completers. This rate is higher than the 8% rate of repeat OWI offenses reported in a study of Vermont felony OWI offenders (Vermont Center for Justice Research, 2009) and the rate of 7% rate for an OWI Treatment Court study conducted in nearby Waukesha, Wisconsin (Hiller, Saum, Taylor, Watson, Hayes, and Samuelson, 2009). However, only 2% of the Washington TAD OWI participants who completed were admitted to state prison at any time after discharge compared to 14% of those terminated from the program.

<b>Table 7: Outcomes for Washington County TAD Operating While Intoxicated (OWI) Participants 2007-2013</b>	
	<b>Washington TAD</b>
<b>Number of OWI Admissions</b>	426
<b>Percent of OWI Admissions That Completed TAD</b>	84%
<b>Average Number of Days in Program</b>	122 days
<b>Number of Incarceration Days Averted</b>	14,643
Jail	11,175
Prison	3,468
<b>OWI Admissions Convicted of Any New Offense At Any Time After TAD Discharge</b>	36%
Completed TAD	35%
Terminated from TAD	40%
<b>OWI Admissions Convicted of <u>New OWI</u> Offense At Any Time After Discharge</b>	32%
Completed TAD	32%
Terminated from TAD	31%
<b>OWI Admissions Admitted to State Prison At Any Time After TAD Discharge</b>	4%
Completed TAD	2%
Terminated from TAD	14%

Washington TAD OWI offenders have a 3-year recidivism rate of 6% (new offense that resulted in any sentence that included probation or prison incarceration). OWI participants that completed Washington TAD (4%) were marginally less likely than those who did not complete the program (13%) to recidivate within three years after their discharge from TAD ( $p=.07$ ).

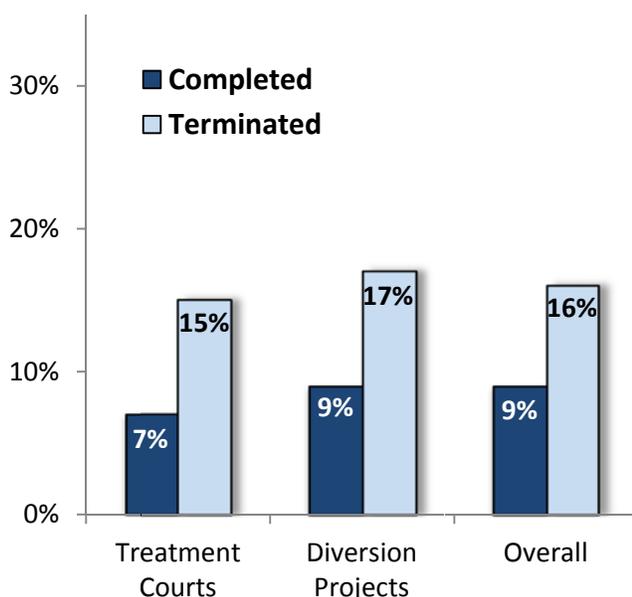
## Female TAD Participants

Nearly three-quarters of females admitted to TAD projects successfully completed (Table 8). Female participants were averted from a total of 36,565 days of prison incarceration and from 17,005 days of jail incarceration. The majority of women who completed treatment court projects (71%) were not convicted of a new offense after participation and only 2% were admitted to state prison after TAD. Eighty percent of female diversion completers were not convicted of a new offense and only 4% were admitted to state prison at any point after TAD.

	Treatment Courts	Diversion Projects	Overall
<b>Number of Female Admissions</b>	171	661	832
<b>Percent of Female Admissions That Completed TAD</b>	63%	72%	70% *
<b>Number of Incarceration Days Averted</b>	19,264	34,306	53,570 *
Jail	9,559	27,006	36,565 *
Prison	9,705	7,300	17,005 *
<b>Percent of Female Admissions Convicted of Any New Offense At Any Time After TAD Discharge</b>	30% N = 148	25% N = 584	26% N = 732
Completed TAD	29%	20%	22%
Terminated from TAD	32%	36%	35%
<b>Percent of Female Admissions Admitted to State Prison At Any Time After TAD Discharge</b>	13%	7%	8% *
Completed TAD	2%	4%	4%
Terminated from TAD	31%	16%	20% *

\* difference significant at  $p < .05$  or better

**Figure 10: 3-Year Recidivism Rate for Female Admissions (N=429)**



Female participants had a 3-year recidivism rate of 11% (any sentence that included probation or prison incarceration), and women that completed TAD (9%) were significantly less likely than those who did not complete (16%) to recidivate within three years after their discharge (Figure 10). The overall 3-year recidivism rate for TAD women of 11% is less than the 26% rate for Wisconsin female offenders (WI Department of Corrections, 2014). The overall three-year recidivism rate for TAD female participants is about four times less than the 47% rate for female offenders in Pennsylvania (Bell, Bucklen, Nakamura, Tomkiel, Santore, Russell, & Orth, 2013).

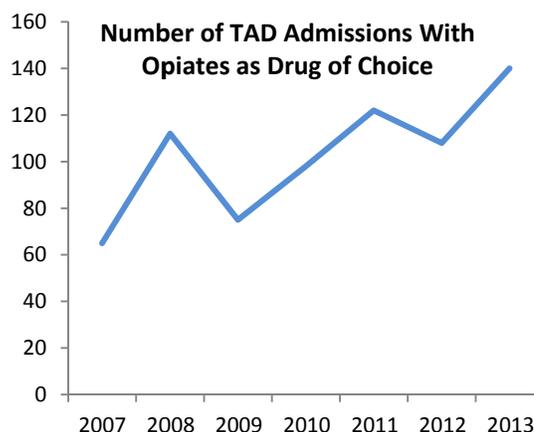
## Opiates as Drug of Choice

Wisconsin and the nation have seen an increase in the use of heroin and other opiate drugs over the past several years. Since the inception of TAD in 2006, TAD projects have also seen a commensurate increase in admissions who indicate that opiates are their drug of choice (Figure 11).

Table 9 shows that nearly two-thirds (61%) of TAD participants whose drug of choice is opiates successfully complete TAD. About one-quarter (28%) of opiate offenders were convicted of a new offense and one-fifth (20%) were admitted to state prison after TAD discharge. Opiate offenders that graduated from

TAD treatment courts were significantly less likely to be admitted to prison than those terminated from TAD, with only 2% of these treatment court graduates admitted to prison at any time after discharge.

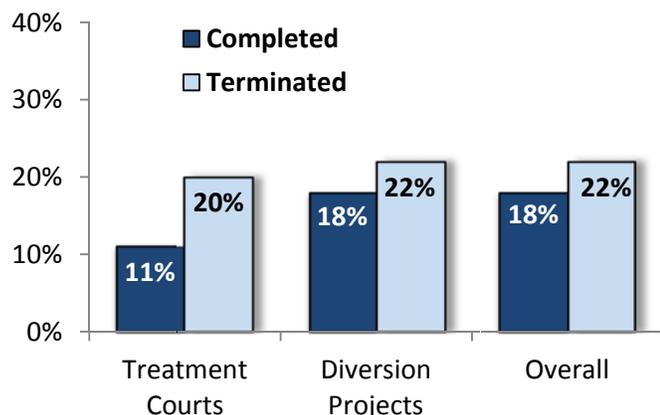
Figure 11: TAD Opiate Admissions by Year



	Treatment Courts	Diversion Projects	Overall
<b>Number of Opiate Admissions</b>	137	583	720
<b>Percent of Opiate Admissions That Completed TAD</b>	44%	65%	61% *
<b>Number of Incarceration Days Averted</b>	15,462	37,135	52,597 *
Jail	5,315	29,855	35,170
Prison	10,147	7,280	17,427 *
<b>Opiate Admissions Convicted of Any New Offense At Any Time After TAD Discharge</b>	24%	29%	28%
Completed TAD	21%	24%	24%
Terminated from TAD	25%	37%	34%*
<b>Opiate Admissions Admitted to State Prison At Any Time After TAD Discharge</b>	26%	19%	20% *
Completed TAD	2%	10%	9%
Terminated from TAD	47%	35%	37% *

\* difference significant at  $p < .05$  or better

Figure 12: 3-Year Recidivism Rate for Opiate Admissions (N=284)



Opiate admissions had an overall 3-year recidivism rate of 19% (any sentence that included probation or prison incarceration). Figure 12 shows that 11% of the treatment court graduates and 18% of the diversion project completers addicted to opiates were sentenced to probation or prison within three years after TAD discharge. No equivalent recidivism rates could be located in the literature against which to compare the recidivism rates for this specific TAD population.

## TAD Success Stories

“When I entered TAD diversion I was mentally, emotionally, physically and financially broke! I was hopeless, jobless, homeless, and helpless. I was facing major prison time and the possibility of losing my parental rights of my youngest child. I had some grieving and mental health issues and with the help of the program not only did they help me recognize it and accept it, but they helped me work on it. The program placed me in jail residential alcohol and drug treatment for 6 weeks, from there I transitioned back home and have been in counseling. I've accomplished a lot in 4 ½ years and the program built the foundation for my success. I was sentenced to 5 years probation that I successfully completed in 2 ½ years and I received my GED, I earned my Substance Abuse Counseling Certificate. I've remained gainfully employed by the same company for 4 years and at one point I even worked in the same residential facility that I completed my program in. I've maintained housing since leaving the sober living facility and I have full custody of my youngest child and am in the process of purchasing my own home.

If it had not been for the program I'd still be held captive by the things that guaranteed jail, institutionalized, or possibly death. It is a very simple program to follow. All anyone has to do is don't use no matter what, remain reachable and teachable, then their options and opportunities are limitless. The program helped build my confidence, assured me that if I put forth the effort to live better and don't use drugs/alcohol that I would no longer just exist but I could live a good, healthy and a better quality of life. Due to the foundation and support I've remained clean for 4 1/2 years!! Thanks to everyone involved in the program.”

A recent Drug Court graduate completed the program after more than 3 years. She began Drug Court with the attitude that she would manipulate the system and continue to use. She exhibited risky behaviors that resulted in an inpatient substance abuse treatment admission, and then a stay at a CBRF for added support. When she returned she continued to struggle with her addiction and relapsed. She would hang out with old friends, become emotional about personal issues, and cope in unhealthy ways and or use substances. She went through a termination hearing, but the Drug Court judge allowed her to remain in Drug Court. From this point she started to make forward progress. She was more engaged in treatment, went to more support group meetings, and was sober. Her recovery continued through involvement in mental health treatment and support groups. She got a job and maintained it for 9 months. She has an apartment and enjoys living on her own. At her graduation ceremony she thanked everyone and talked about how her attitude and outlook on life has changed for the better.

One graduate came into Drug Court with years of addiction and legal issues. He had been in and out of the criminal justice system for 18 years on drug related charges. When he started treatment and began working on his addiction and criminal thinking he started to open up and be honest. His relationship improved with his girlfriend and her children. One of his goals was to marry his girlfriend and to be a dad to her children. He was hired at a manufacturing plant and has maintained this employment. One of the important pieces of his recovery was when he started to have fun in his new life -- he started to hunt and fish again, and learned how to make maple syrup. At his graduation he shared how hard his life had been and how he wished he would have been ready for recovery much earlier in his life.

## Cost-Benefit Analysis

Cost-benefit analyses (CBAs) can provide policymakers with an additional tool to assist with decisions related to resource allocation for programs, comparing the costs and benefits of varying approaches (Roman, Dunworth, & Marsh, 2010). When evaluation results support the effectiveness of an intervention or program model, CBA can be used to monetize costs and benefits to maximize the use of scarce resources. For nearly two decades, one of the primary performance benchmarks for drug treatment courts has been the use of cost-benefit analysis to assess the economic impact of services on court costs, corrections, health care utilization, and economic productivity (NADCP, 1997).

The cost-benefit analyses conducted for the current evaluation compare the TAD Program (including both the treatment courts and diversion projects) to the “business as usual” criminal justice processing of offenders in Wisconsin. The analysis addresses the question, “For every \$1 invested into TAD treatment courts and diversion projects, how much return can be expected?” In other words, do the benefits of TAD outweigh its costs?

The current evaluation utilized cost and benefit data for seven of the TAD sites (Ashland and Bayfield TAD projects were excluded from these analyses due to their later start date of 2012). All findings are realized over a seven-year time period (2007-2013) and are expressed in 2013 dollars. The methods used for this cost-benefit analysis replicate the methods used in the 2011 TAD cost-benefit analysis (Van Stelle et al., 2011) to maintain consistency between estimates. Methods were also used to take into account the ratios of TAD discharges. Direct project cost data were extracted from project grant budgets, and the additional costs of donated criminal justice and case management staff time were estimated. Two impacts of TAD, jail/prison incarceration averted and reduced crime, were included as taxpayer benefits in the analysis. Additional important potential benefits could not be estimated for the current CBA such as increased employment and productivity, decreased substance use, decreased health care utilization, avoided foster care placements, drug-free births, and averted victimization costs (Downey & Roman, 2010; Marlowe, 2010; Broyles, Courey, Hinds, & McConnell, 2008) and were not included. The “Technical Description of Cost-Benefit Analysis” section at the end of this report provides a detailed description of the methods used to conduct the cost-benefit analyses.

## Results

The results of the updated cost-benefit analysis reveal that the TAD Program continues to be a cost-effective alternative to incarceration for Wisconsin.

### **TAD Benefits Outweigh the Costs**

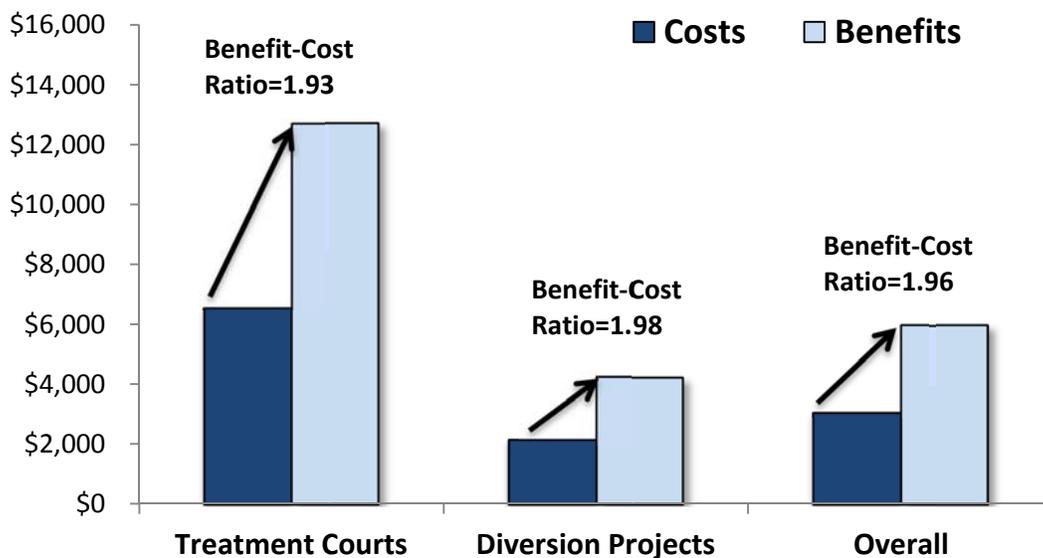
**Every \$1.00 invested in TAD yields benefits of \$1.96  
to the criminal justice system through  
averted incarceration and reduced crime.**

The overall benefits and costs for all seven TAD projects included in the analysis yielded a ratio of 1.96 (Figure 13). For the four treatment courts, the benefits and costs yielded a ratio of 1.93. For the three diversion projects included in the analysis, the benefits and costs yielded a ratio of 1.98.

Benefit-cost ratios are a relative measure of the investment’s benefits and cost. Valid analysis techniques endorse also considering “net benefits” to provide a more complete picture of the relationship between costs and benefits. Net benefits (program benefits minus program costs) provide a concrete measure of a program’s benefits and are often more informative for decision-making.

Figure 13 also reveals that the program costs and benefits result in a net benefit for each TAD discharge of \$2,912 (\$5,954 minus \$3,042). Net benefits for treatment courts were \$6,141 (\$12,713 minus \$6,572) and were \$2,090 (\$4,234 minus \$2,144) for diversion projects. TAD treatment courts had higher project costs than the diversion projects due to their longer average length of program participation, greater treatment intensity, higher rates of drug testing, and more intensive participant monitoring. Although TAD treatment courts cost more to operate, they yield potentially larger long-term benefits and result in larger net benefits to the criminal justice system than diversion projects.

**Figure 13: TAD Costs, Benefits, and Benefit-Cost Ratios**



TAD outcomes are similar to those of other alternatives to incarceration efforts nationwide (Table 10). TAD treatment court outcomes are similar to those of other adult treatment courts, although TAD courts show a smaller net benefit per participant than some others because the current analysis was not able to include some longer-term impacts included in other studies (increased employment, decreased health care utilization, and avoided crime victimization costs). TAD diversion project net benefits per participant are similar to or better than results of other examinations of judicial diversion programs. Appropriate points of comparison were difficult to find for the TAD diversion projects due to the highly varied approaches of the TAD diversion projects (pre-trial, OWI, ATR, and bail diversion).

<b>Table 10: Net Benefits and Benefit-Cost (BC) Ratios of TAD Projects Compared to Other Evaluation Research Efforts</b>		
	<b>Net Benefits Per Participant</b>	<b>BC Ratio</b>
<b>TAD Treatment Courts</b>	<b>\$6,141</b>	<b>1.93</b>
Washington State (WSIPP, 2013)	\$1,115	1.26
St. Louis (King & Pasqueralle, 2009)	\$2,600	1.33
Maryland (Crumpton et al., 2003)	\$3,791	1.36
Iowa (Iowa Department of Corrections, 2012)±	\$3,794	5.11
Kentucky (Logan, 2004)	\$5,446	2.71
National – 29 sites in 6 states (Rossman, 2011)	\$6,533	1.92
Oregon (Carey & Waller, 2011)	\$7,022	2.41
Washington State (Aos et al., 2011)	\$7,651	2.87
National (Bhati, 2008)	\$11,275	2.21
Virginia (Cheesman et al., 2012)	\$19,234	N/A
<b>TAD Diversion Projects</b>	<b>\$2,090</b>	<b>1.98</b>
District of Columbia (Downey et al., 2012)⌘	\$1,970	N/A
California (Anglin et al., 2013)	\$2,317	N/A
New York (Waller et al., 2013)	\$5,144	2.00
New York (Zarkin et al., 2005)	N/A	2.17
±Focused on community programs for higher risk offenders ⌘Used simulations to find mean net benefits		

Due to data limitations, it is important to address uncertainty in the analysis. A sensitivity analysis taking into consideration the data limitations estimated that the TAD Program would result in positive net benefits 55% of the time (see “Technical Description of Cost-Benefit Analysis”). Treatment courts would produce positive net benefits 53% of the time and diversion projects would produce positive net benefits 60% of the time.

There were significant limitations in available data for determining both the costs and benefits for this analysis. The data used for this analysis was collected from a treatment-only evaluation design and, therefore, could not control for potential differences in TAD participant characteristics when estimating effects of the program. TAD participants who choose to participate are potentially different than offenders who do not volunteer, are not eligible, or are not offered the opportunity to participate in TAD; this can make it difficult to attribute effects to the program when using state or county level data for comparison. Additionally, TAD project sites target different populations and offender risk types, and vary in services type, intensity, and treatment duration. The sites also differ in the methods used to estimate incarceration days averted, limiting the comparability of this impact. Benefits of the TAD Program were also difficult to estimate due to data restrictions regarding types of crimes averted and the impact of averted incarceration days on prison/jail fixed costs. Potential social impacts including avoided victimization costs, employment (participant income and income tax contributions), reduced health care utilization (improved health due to drug treatment and increased access to preventive services), avoided foster care placement, and drug-free births were not included in this analysis because neither data for TAD participants nor for appropriate comparison group were available. Inclusion of such impacts would increase the total benefits of TAD. See “Technical Description of Cost-Benefit Analysis” for additional information regarding the limitations of this analysis.

## A Look Ahead for TAD

### TAD Expansion

The evaluation and cost-benefit analysis results reported in the prior TAD Outcomes Report submitted to the Wisconsin legislature in December 2011 (<http://uwphi.pophealth.wisc.edu/about/staff/van-stelle-kit.htm>) were widely disseminated and utilized on the local, state, and national levels. Numerous presentations were made by PHI, OJA/DOJ, DOC, and DHS partners to the Statewide Criminal Justice Coordinating Council and its subcommittees, State Assembly Corrections Committee, individual legislators, and state agency heads. In addition, the Wisconsin Legislative Joint Committee on Finance used the cost-benefit results in their state biennial budget decision-making and the Pew Center on the States included the Wisconsin TAD model as an example of how evaluation and cost-benefit analyses are used in decision-making by policymakers in their “Results First” report released in August 2013. The TAD evaluation findings were also used extensively as part of a health impact assessment entitled “Treatment Instead of Prison” that was used in a campaign by Health Impact Partners, Inc. and the WISDOM organization to address incarceration levels in Wisconsin. Finally, the Department of Justice, in partnership with Community Advocates Inc. and the Wisconsin Counties Association, conducted a one-day symposium in August 2013 focusing on the effectiveness of TAD entitled “Treatment Alternatives and Diversion - Effective Criminal Justice Reform through Research Based Practices.” The TAD Symposium included presentations by National Institute of Corrections staff, TAD sites, state partners and agency heads, and PHI evaluation staff for a diverse audience of several hundred policymakers, legislators, and treatment and criminal justice professionals.

This collective effort by diverse, bipartisan stakeholder groups resulted in the expansion of TAD in the latest biennial state budget, increasing annual support from \$1,085,900 to \$4,085,900. 2013 Wisconsin Act 20 doubled the annual appropriation of the existing TAD Program from \$1,085,900 to \$2,085,900, and also provided an additional \$500,000 GPR under Wis. Stats. s. 20.455(2)(eg) per year specifically to fund treatment courts in counties without one. This expansion resulted in the award of 13 additional grants to fund nine general TAD projects and four treatment courts (including one Native American Indian tribe). These sites attended the annual Allsite Meeting in April 2014 to receive a general orientation, learn from staff of the existing nine sites, and discuss data reporting requirements. TAD was further expanded through subsequent legislation in April 2014 (2013 Wisconsin Act 197) to include an additional \$1.5 million to fund 14 more sites. This expansion resulted in the award of 14 additional grants for general TAD projects (including a second Native American Indian Tribe) in June 2014.

Additional efforts to expand TAD to other populations were also pursued during the past year. In January 2014, legislation was also drafted as Assembly Bill 457 to increase TAD funding by another \$750,000 annually to provide TAD projects for individuals diagnosed with a mental illness, and in April 2014 a bill was introduced (2013 Assembly Bill 918) to fund TAD veteran’s courts in the amount of \$250,000 annually. However, neither of these bills were brought to a vote during the Spring 2014 legislative session.

At the time of this report, TAD expansion has increased the number of TAD sites in Wisconsin from nine counties in December 2013 to 36 counties/tribes in June 2014, with a total portfolio of \$4.08 million.

## **Administration and Evaluation of TAD Going Forward**

The recent expansion of TAD has provided an exceptional opportunity to advance diversion in Wisconsin, but has also created challenges. The legislative appropriation funding the expansion did not include funding for administration or evaluation of the TAD Program. The latest biennial budget eliminated the funding that had been designated for evaluation and provided no funding response to either TAD expansion. DOJ is obligated under Wis. Stat. §§ 165.25 and 165.95 to administer and monitor grants to 36 counties, as well as provide evaluation reports on program progress and effectiveness. The primary challenges are two-fold: Lack of support for administrative positions/functions within DOJ and lack of support for the continued evaluation of the TAD Program.

**DOJ Administration** -- Each of the 36 county programs must be provided with extensive support, consultation, training, and monitoring, with newly funded expansion sites requiring significant additional attention during project development/start-up to assure fidelity to treatment and service models. DOJ is responsible for collaborating with the local TAD staff and advisory councils, supporting the efforts of county Criminal Justice Coordinating Councils, conducting quarterly TAD Advisory Committee meetings, reviewing quarterly program reports and administering an annual project grant review process, managing the contract and activities of the research partner, conducting an annual allsite meeting, communicating and collaborating with the TAD state agency partners, regularly briefing the State Criminal Justice Coordinating Council, and preparing reports of results for the Governor and Legislature.

**Program Evaluation** -- Program evaluation is an evidence-based practice essential to the continued success of the TAD Program. A sound evaluation design for TAD going forward should include:

- 1. Integrated Data System:** Design, develop, pilot-test, and implement a web-based data reporting system for documentation of participant-level data, drawing upon the expertise of a broad base of Wisconsin stakeholders and incorporating evidence-based practices. Coordinate the transition from the current TAD data system to a new system, including training of local staff at all sites/counties.
- 2. Ongoing Data Quality Monitoring:** Conduct monthly quality monitoring and cleaning of integrated data system data for each TAD site (currently 36 counties/tribes) to assure data integrity. Communicate results to site staff to provide feedback for program improvement.
- 3. Implementation Support for Sites:** Evaluation and technical support for program implementation, annual allsite meeting, and technical assistance to project staff.
- 4. Report on Outcomes and Cost-Benefit Analyses:** Major outcomes data collection/report, including cost-benefit analysis; collect data related to criminal recidivism and prison incarceration from state agency data systems; preparation of report and presentations of results to a variety of audiences.
- 5. Drug/Hybrid Court Performance Measures:** Collaborate with Director of State Courts Office on drug/hybrid court performance measures for integration into web-based data system.
- 6. Continued Collaboration** to include regular meetings with state agency partners, quarterly TAD Advisory Committee meetings, statewide CJCC meetings, Pew Center "Results First" project, evidence-based decision-making project, and respond to internal, external, and legislative requests for data.

The UW Population Health Institute (PHI) has been the TAD evaluation partner since 2006 and the current contract for the evaluation continues through December 31, 2014. The originating TAD language requires that a collaborative external partnership be established to evaluate TAD: "The office shall enter into one or more contracts with another person for the purpose of evaluating the grant program" (2005 WI Act 25). Continued evaluation of TAD is particularly critical during this time of

expansion to assure that projects are implemented with fidelity and properly monitored. In April 2014 the scope of services provided by PHI was modified to accommodate the increase from 9 counties to 22 counties staying within the same annual budget resource parameters for the evaluation (less than one full-time position), reducing the scope of technical assistance provided for the larger number of sites. However, no plan is currently in place for PHI to provide evaluation services or monitoring for the 14 additional counties/tribes funded during the June 2014 expansion.

The State CJCC subcommittees, TAD state partners, Effective Justice Strategies (EJS) subcommittee of PPAC, and the TAD Advisory Committee concur on the importance of data collection and evaluation for TAD. They have shown their broad-based support for continued evaluation of TAD through a series of unanimously approved motions to the State CJCC:

- A motion was made by the Evidence-Based Practices Subcommittee in April 2014 to advise the State CJCC *"...that due to the significant expansion of the Treatment Alternatives and Diversion (TAD) Program, sufficient funding is required for staffing, infrastructure and evaluation support in order to ensure fidelity to the research-based programs and allow outcomes to be appropriately measured"*.
- The TAD Advisory Committee unanimously passed the following draft motion in May 2014: *"Motion was made by the TAD Advisory Committee that immediate action be taken by the State Criminal Justice Coordinating Council and the Partner Agencies for the Treatment Alternatives and Diversion (TAD) Program, to maintain commitment to and continuation of an independent, external evaluation of the TAD projects and program and that this action occur in a timely fashion. This is required in response to the recent expansion of TAD. It is critical that the TAD expansion projects receive assistance with documentation of program activity, as well as technical support during initial project start-up to assure fidelity to evidence-based practices and TAD legislative requirements. Continued independent evaluation will also assure that the continuing TAD projects funded prior to the expansion maintain the ability to report on project activities."*
- The Effective Justice Strategies subcommittee *"motions that EJS recommends to the state CJCC and its various subcommittees to use a unified system to collect data from TAD and drug and hybrid courts into one consolidated database that is jointly owned by the partners involved"*.

Maintaining the current broadly-supported evaluation methodology and approach will assure that consistently high-quality information will remain available to policymakers for use in decision-making. It is critical that stable funding be identified to continue the blended approach for the administration and evaluation of TAD that has worked so effectively since the program's inception. This blended approach has functioned as a true collaboration, with OJA/DOJ responsible for fiscal and grant administration activities, PHI responsible for process improvement feedback to sites, data collection/analysis/report preparation, and the other state partners (DOC, DHS, and State Courts Office) providing regular input and oversight for both grant administration and evaluation issues. With the anticipated addition of internal evaluation staff at DOJ during 2014, TAD should enhance the current integrated approach to the administration and evaluation to include positions at DOJ working in partnership with PHI to develop and implement the web-based data system, as well as share joint responsibility for conducting the program evaluation. External evaluation staff will work cooperatively with DOJ internal evaluation and administrative staff to maintain the consistency, quality, and independence of the evaluation design and results that have contributed to the success of TAD thus far.

At the date of this writing, DOJ intends to add agency positions to develop agency evaluation capacity and conduct internally all program administration and evaluation of TAD going forward.

## **Proposed Revision to TAD Legislative Language Related to TAD Eligibility**

A multi-disciplinary collaboration of the Wisconsin Counties Association, the TAD Advisory Committee, and the Effective Justice Strategies subcommittee occurred during 2013 to expand the impact of the TAD Program by suggesting revisions to portions of the original TAD legislative language (LRB-2614). TAD projects were designed through 2005 Wisconsin Act 25 to target non-violent offenders where a violent offender is defined as “a person to whom one of the following applies: 1. *The person has been charged with or convicted of an offense in a pending case and, during the course of the offense, the person carried, possessed, or used a dangerous weapon, the person used force against another person, or a person died or suffered serious bodily harm.* 2. *The person has one or more prior convictions for a felony involving the use or attempted use of force against another person with the intent to cause death or serious bodily harm.*” (Section 90m. 16.964 (12)).

In addition to other suggested revisions, the suggested language proposes revision to eliminate the exclusionary criteria related to the existence of a past violent offense as defined by statute (#2 above). Elimination of this criterion could allow TAD projects to make eligibility and admission decisions based on an individual’s current level of criminal risk and need for treatment, rather than based on a past offense (no matter how long ago or how serious). This has been a concern repeatedly expressed to evaluation staff by local TAD staff over the years -- the language prohibiting them from admitting those with a past assaultive or weapons offense creates barriers to serving many offenders who would benefit from TAD treatment and monitoring (i.e., those with mental health disorders, veterans, African Americans) and limits the number of eligible project admissions. However, after the bill was drafted it was not introduced or adopted during the latest legislative session.

## **Integrated Data System Development**

During 2014, DOJ plans to develop a web-based integrated data system to facilitate collection of participant-level data from diversion projects statewide, including TAD sites. The first set of nine sites and the 13 sites funded during the first 2014 expansion will document the admission and discharge characteristics of participants using the TAD database until the new web-based system is available. After the web-based system has been developed and pilot-tested by DOJ, staff from all TAD sites will be trained, a transition date will be selected, and all of the historical data collected using the TAD database to that point will be uploaded/converted into the new data system.

## **Collaborative Approach to TAD Administration and Implementation**

A critical factor in the success of the TAD Program has been the active multi-agency partnership among state agencies to monitor project activities and encourage program change as a result of evaluation feedback. While the TAD legislation mandated this collaboration among agencies (2005 WI Act 25), key stakeholders within DOJ/OJA, DOC, and DHS have long recognized the value inherent in this partnership for their agencies, the TAD Program, and the Wisconsin criminal justice system as a whole. The addition of the Director of State Courts Office as a partner in 2013 brought another important agency to the collaboration. This multi-agency partnership, in concert with the UW Population Health Institute, has been essential to the development and success of the TAD Program and to advancing diversion throughout Wisconsin.

The TAD partners worked together to present the TAD Symposium in 2013, to advance Wisconsin's involvement in evidence-based practices and evidence-based decision-making (EBDM), to encourage valid cost-benefit analysis through partnerships with the Pew Center on the States and the Washington State Institute for Public Policy, and to develop performance measures for Wisconsin's drug/hybrid courts with the Bureau of Justice Assistance. In addition, the National Institute of Corrections and the Center for Effective Public Policy organized an EBDM symposium in January 2014 to introduce Wisconsin policymakers to a framework to increase evidence-based decision making practices in local criminal justice systems. State agency partners also actively participate in the Effective Justice Strategies subcommittee of the Planning and Policy Advisory Committee of the WI Supreme Court, the State Criminal Justice Coordinating Council and its subcommittees, and the TAD Advisory Committee.

## **TAD Advisory Committee**

The TAD Advisory Committee has been in existence since the start of TAD and has been vital to the success of TAD. The multi-disciplinary membership has provided invaluable guidance related to TAD policy and members have been vocal advocates for the expansion of the TAD model. The TAD Advisory Committee has unanimously passed motions supporting the expansion of TAD and the importance of independent evaluation of the program. The input of the Wisconsin Counties Association, the State Public Defender's Office, district attorneys, representatives of the treatment community, and law enforcement has been essential during the development of TAD. The TAD Advisory Committee should continue to meet regularly to ensure the continued success of TAD. The composition of the committee should be examined in light of the recent expansion to assure broad representation and input from key stakeholders, and invitations extended to additional agencies and individuals as appropriate.

## **Legislative Council Special Study Committee**

A Legislative Council study committee was created in 2014 with Representative Garey Bies serving as Chair and Representative Evan Goyke serving as Vice-Chair. The "Special Committee on Problem-Solving Courts, Alternatives, and Diversions" is directed to review the specialty courts currently in operation in Wisconsin, the effect they have on recidivism, and their net fiscal impact. The committee plans to examine veterans courts, drug and alcohol courts, mental health courts, and drunk driving courts in Wisconsin and nationally, and consider: (a) effectiveness of existing problem-solving courts in Wisconsin in reducing recidivism, the costs to administer these courts, and the savings realized; (b) best practices of existing problem-solving courts, both in Wisconsin and elsewhere, and potential implementation of these practices at the state level; (c) efforts to establish problem-solving courts that serve multiple counties, impediments to these efforts, and potential changes to improve regionalization of such courts; and (d) the appropriate role and structure of state-level training and coordination. The Special Study Committee will meet between June-November 2014 to gather necessary information and develop recommendations.

## Conclusion and Recommendations

**The results of the current evaluation reveal that the TAD Program successfully diverts non-violent offenders with substance abuse treatment needs from further criminal justice system involvement and reduces criminal justice system costs.** Two-thirds of TAD participants successfully completed program requirements and those who successfully completed were significantly less likely than those who did not complete to be convicted of a new criminal offense within three years (39% vs. 52%).

**TAD projects successfully divert non-violent offenders with alcohol or other drug problems from jail and prison incarceration.** In the first seven years of program operation, the TAD Program averted a total of 231,533 days of incarceration, 141,215 jail days and 90,318 prison days. TAD participation successfully impacts subsequent prison incarceration. Only 10% of TAD participants were admitted to state prison for a new offense or revocation of community supervision within three years. Only 3% of TAD completers were admitted to prison for a new sentence or revocation within three years of their program discharge, compared to 23% of those who did not complete TAD projects. Three-year recidivism rates for offenders participating in TAD treatment and monitoring are similar to or lower than available state and county-level recidivism averages.

**TAD continues to be a cost-effective alternative to incarceration in Wisconsin.** The cost-benefit analysis results revealed that every \$1.00 invested in TAD yields benefits of \$1.96 to the criminal justice system through averted incarceration and reduced crime.

**A multi-pronged effort by diverse stakeholder groups resulted in a four-fold expansion of TAD.** At the time of this report, TAD expansion had increased the number of TAD sites in Wisconsin from 9 counties to 36 counties/tribes during the six-month period between December 2013 and June 2014, with a total portfolio of \$4.08 million.

**Many critical factors have played a role in the success of the TAD Program to date.** The collaborative partnership among state agencies has been essential to monitor project implementation, provide guidance to TAD sites, and advocate for alternatives to incarceration among state policymakers. The dedicated local project staff who engage and serve TAD participants, advocate for TAD services among county stakeholders, and assure fidelity to evidence-based practices have provided the foundation for the four-fold expansion. The fundamental design of the TAD approach as one that allows counties to respond to local needs with a wide array of projects has also been part of the program's success. The active role of the TAD Advisory Committee has contributed to the successful operation of the program by providing invaluable guidance to sites regarding evidence-based practices, implementation, and program fidelity. The TAD Program has been greatly enhanced by the independent evaluation that documented project activity and outcomes, conducted ongoing data quality monitoring, and provided formative evaluation feedback to local sites and state agency partners.

Based on current evidence-based practices and the results of the TAD evaluation to date, the following recommendations have been developed to continue the success of TAD:

**1** Continue collaboration among the TAD state partners, as well as among those state partners and the local criminal justice coordinating councils, the TAD Advisory Committee, the State Criminal Justice Coordinating Council, and other groups advancing alternatives to incarceration statewide.

- 2 Continue to collaborate (a) with key Wisconsin stakeholders to implement drug court best practice standards and performance measures, (b) with the National Institute of Corrections on the Evidence Based Decision Making Initiative to ensure fidelity with best practices and to enhance the effectiveness of criminal justice processes throughout Wisconsin, and (c) with the Pew Center “Results First” Initiative to obtain technical assistance with cost-benefit analyses in accordance with best practices.
- 3 Improve TAD services for offenders admitted as an alternative to revocation of their correctional supervision through enhanced partnerships among TAD state partners and local TAD projects.
- 4 Develop and implement a plan to provide administrative support for the TAD Program in response to the recent expansion. This support should include funding to DOJ to provide technical assistance to sites during program expansion, provide ongoing technical assistance to all sites, and to ensure project implementation in accordance with grant requirements and evidence-based practices.
- 5 Develop and implement a coordinated plan for the continued evaluation of TAD in response to the recent expansion. Comprehensive evaluation of TAD will be particularly critical during program expansion to assure that projects are implemented with fidelity and aligned with evidence-based practices. Maintaining the current evaluation methodology and impartial approach will assure that consistently high-quality information will remain available to policymakers for use in decision-making.
- 6 Collaboratively develop an integrated web-based data system for the collection of participant-level data from Wisconsin projects focusing on diversion and alternatives to incarceration. The Department of Justice should solicit input from key stakeholders (including TAD site staff) during the development, pilot testing, and implementation of the system to assure fidelity to evidence-based practices. These data can then be utilized to provide program improvement feedback to local sites, for program evaluation, and for meeting the mandated statutory reporting requirements.
- 7 Modify the current TAD eligibility criteria to eliminate the exclusionary criteria related to the existence of a past violent offense as defined by statute. Elimination of this language could allow TAD projects to make admission decisions based on an individual’s current level of criminal risk and need for treatment, rather than based on their offense history. The current language prohibits TAD projects from admitting those with any past assaultive or weapons offense and limits the number of people who could ultimately benefit from TAD treatment and monitoring.
- 8 Future cost-benefit analyses should include an assessment of TAD impacts related to additional benefits such as increased employment and productivity, avoided victimization costs, decreased substance use, decreased health care utilization, avoided foster care placements, and drug-free births. TAD state partners should seek to develop a data sharing agreement with the Department of Workforce Development to obtain employment information for future cost-benefit analyses.

This report can be located online at: [uwphi.pophealth.wisc.edu/about/staff/van-stelle-kit.htm](http://uwphi.pophealth.wisc.edu/about/staff/van-stelle-kit.htm)

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## TECHNICAL DESCRIPTION OF COST-BENEFIT ANALYSIS

**Costs:** Costs were calculated per discharged participant in 2013 dollars. There was great variability among the project sites regarding the treatment duration, treatment types, consultant contracts, services offered, and target population. This variability should be taken into consideration when comparing the costs of drug courts and diversion projects.

*Project costs:* Annual TAD project funding application budgets and adjusted award amounts from 2007-2013 were used to extract costs for each project site. It was assumed that these costs represent the total opportunity costs of implementing the TAD Program compared to the “business as usual” processing and treatment costs of non-violent drug-offenders with similar motivation and risk types as TAD participants (including case management, treatment, drug testing, and county match requirements). Fees received from participants as part of the agreement to participate in TAD were counted as income to the project. Electronic monitoring costs were found to be negligible when estimated across all project sites as offenders are required to pay the cost of electronic monitoring.

*Donated staff time:* Treatment courts and diversion projects involve other criminal justice personnel not included in the project budgets. Donated staff time opportunity costs were calculated based on hourly wages obtained from the May 2013 Bureau of Labor Statistics for Wisconsin legal occupations and community and social workers and DA salaries obtained from the Wisconsin State Department of Administration for Dane, Milwaukee, and Washington counties (U.S. Department of Labor, 2013; Milwaukee Wisconsin Journal Sentinel, 2013). Average state and local government employee benefits (35.5%) were obtained from 2013 Bureau of Labor Statistics (U.S. Department of Labor, 2014). Hourly median wages plus benefits were multiplied by the average number of court hearings and review per discharge multiplied by the average length of a court hearing (15 minutes) or DA review (15 minutes) as estimated by the sites and by estimates reported by Carey & Finigan (2004). Treatment court donated wages and benefits were based on teams comprised of a substance abuse social worker, adjudicator, lawyer, judicial clerk, court reporter, and probation officer giving an average per participant per court hearing donated cost of \$70. Donated staff time for diversion projects was based on the hourly median wage and benefits of a district attorney (DA) plus benefits giving a per diversion participant per DA review donated cost of \$22.

**Benefits:** Benefits in this analysis were derived from averted taxpayer costs due to averted incarceration and to reduced crime due to TAD participation. Benefits were limited to two impacts of drug courts and diversion projects based on the data available from the TAD database and state-level comparison rates. Averted incarceration due to TAD participation resulted in the largest benefit of \$12,135 and \$3,831 per discharged participant for treatment courts and diversion project, respectively.

*Averted incarceration days due to TAD participation:* Averted incarceration days were estimated differently across the TAD sites. Some sites asked the local judge and district attorney to estimate incarceration sentences for each individual if they had not participated in TAD, while other sites provided a fixed number of days for each individual based on their specific criminal offense. The cost of a jail day for this analysis ranged from \$27-\$72 with an average of \$56 (as per sites), and the cost of a prison day was set at \$88 across all sites (Wisconsin Department of Corrections, 2014a).

*Averted costs to taxpayers due to reduced crime:* In this analysis, taxpayer benefits include averted costs for arrest, prosecution, conviction and resulting incarceration due to reduced crime. Reduced crime was calculated by comparing the three-year recidivism rate for each TAD project type to the three-year recidivism rates for Wisconsin prison releases (2007, 2008, 2009) and state and Milwaukee County correctional supervision populations from 1980-2004 (Wisconsin Department of Corrections, 2006, 2007, 2014). Other county-level data and current correctional supervision data were unable to be obtained for this analysis. TAD program three-year recidivism rates were calculated using a definition as consistent to the Wisconsin Department of Corrections definition of recidivism as possible considering the differences in target population. The DOC defines recidivism as committing a new offense resulting in a court disposition resulting in WI DOC custody or supervision three calendar years following the date of prison release. Follow-up intervals to track recidivism started when the participant was discharged from TAD and concluded at the end of the data collection period, December, 31, 2013. Nearly two-thirds (63%) of TAD discharges had a follow-up interval of at least three years. Offenders who died after TAD discharge were excluded from recidivism calculations.

TAD projects admit a diverse group of offenders with regard to criminal risk and criminal history – some more similar to those under community supervision and some more similar to those just released from prison. It is difficult to estimate a good point of comparison without the resources to develop a valid comparison group as part of the evaluation. However, summary information was obtained from DOC regarding overall 3-year recidivism for (a) prison releases, and (b) for offenders discharged from probation/parole. Reduced crime for treatment courts was estimated using a comparison rate of 25.3% based on an average between the recidivism rates for DOC prison releases (31.2%) and state community correctional supervision populations (19.4%) (Wisconsin Department of Corrections, 2007; Wisconsin Department of Corrections, 2014). Reduced crime for diversion projects was estimated by using Milwaukee County’s recidivism rate for offenders under community correctional supervision (20.6%) as a comparison due to greater similarity to the target population of the diversion projects and the large proportion of cases from Milwaukee TAD in the sample (Wisconsin Department of Corrections, 2006).

Recidivism reduction (DOC recidivism minus TAD program recidivism) was used to estimate the number of averted convictions among TAD discharged participants. Averted convictions were multiplied by the average marginal cost to arrest, prosecute, and convict an offender of crimes ranging from misdemeanors to robbery in Wisconsin (\$3,194). An average was used due to uncertainty of the type of crimes averted. The Wisconsin marginal cost (MC) to arrest, prosecute, and convict was estimated by applying the Washington State Institute for Public Policy criminal justice benefit-cost model to Wisconsin data and converting to 2013 dollars (Fredricks et al., 2010; Aos, 2010). The following calculation was used to estimate averted arrest, prosecution, and conviction costs:

$$(1) \quad \text{Averted TAD convictions} = [(DOC_{\text{recidivism rate}} - TAD_{\text{recidivism rate}}) \times (\#_{\text{TAD discharges}} - \#_{\text{deceased}})]$$

$$\text{Averted arrest, prosecution, and conviction costs per discharged participant} = \frac{[(\text{Averted TAD convictions}) \times (\text{Average } MC_{\text{arrest, prosecution, and conviction}})]}{(\text{Number of TAD Discharges})}$$

To estimate averted misdemeanors and felonies among the total averted convictions, misdemeanor three-year recidivism rates (53% for treatment courts and 51% for diversion courts) and felony three-year recidivism rates (27% for treatment courts and 31% for diversion projects) were obtained for TAD discharges from CCAP. It was assumed that similar percentages of misdemeanors and felonies were averted due to reduced crime. To estimate the averted incarceration costs per discharge due to reduced crime, it was assumed that averted misdemeanors would result in a number of averted jail days similar to the estimates of jail days averted provided by the TAD project sites. Averted felonies were assumed to avert a similar number of prison days as the TAD prison days averted. The following calculation was used to estimate averted incarceration costs due to reduced crime:

$$(2) \quad \text{Averted cost of jail per discharged participant (ACJ)} = \frac{[(\text{Averted TAD convictions}) \times (\text{Probability of misdemeanor}) \times (\text{Averted jail days}) \times (\text{Cost per jail day})]}{(\text{Number of TAD Discharges})}$$

$$(3) \quad \text{Averted cost of prison per discharged participant (ACP)} = \frac{[(\text{Averted TAD convictions}) \times (\text{Probability of felony}) \times (\text{Averted prison days}) \times (\text{Cost per prison day})]}{(\text{Number of TAD Discharges})}$$

$$(4) \quad \text{Averted incarceration costs due to reduced crime per discharged participant} = (\text{ACJ} + \text{ACP})$$

**Summary of Benefits, Costs, and Net Benefits:** Table A shows costs and benefits for TAD overall, as well as for treatment courts and diversion projects using the same methods as the 2011 TAD cost-benefit analysis. All costs and benefits were estimated per TAD participant discharged in 2013 dollars.

<b>Table A: Benefits, Costs, and Net Benefits by Project Model (Per Discharge Net Present Value, 2013 Dollars)</b>			
	<b>Treatment Court</b>	<b>Diversion</b>	<b>Overall</b>
<b>Benefits</b>			
Averted incarceration days	\$12,135	\$3,831	\$5,515
Averted costs due to reduced crime	\$ 578	\$ 403	\$ 439
<b>Total</b>	<b>\$12,713</b>	<b>\$4,234</b>	<b>\$5,954</b>
<b>Costs</b>			
Project costs	\$5,001	\$2,060	\$2,656
Donated time	\$1,571	\$ 84	\$ 386
<b>Total</b>	<b>\$6,572</b>	<b>\$2,144</b>	<b>\$3,042</b>
<b>Net Benefits (Benefits minus Costs)</b>	<b>\$6,141</b>	<b>\$2,090</b>	<b>\$2,912</b>

*Sensitivity Analysis:* A Monte Carlo sensitivity analysis was conducted to assess the impact of uncertainty surrounding the benefit and cost estimates and provides the percent positive net benefits (the proportion of simulations that result in net benefits equal to or greater than zero). Table B shows the simulation ranges and distributions that were used for the analysis. Based on 10,000 simulations, the results in Table B show that TAD overall has a probability of a positive net present value of 55%, treatment courts have a probability of 53%, and diversion projects have a probability of 60%. The mean benefit-cost ratio for TAD overall was found to be 1.06 (range=0.37-2.41), 1.07 for treatment courts (range=0.34-2.70), and 1.10 for diversion projects (range=0.37-2.51). The categories listed were allowed to vary according to their corresponding ranges and distribution types. The ranges were taken from an analysis of each project and account for the variation observed between projects and project models.

**Table B: Monte Carlo Simulation Ranges and Distributions**

Categories	Base Case	Min	Max	Distribution
<b>Project Costs</b>				
Treatment Court	\$8,000	\$4,000	\$12,000	Triangular
Diversion Project	\$2,500	\$1,500	\$3,500	Triangular
<b>Incarceration Costs</b>				
Cost of a Jail Day	\$35	\$10	\$60	Triangular
Cost of a Prison Day	\$55	\$20	\$90	Triangular
<b>Comparison Recidivism Rate</b>				
Treatment Court	0.25	0.19	0.31	Uniform
Diversion Project	0.21	0.16	0.26	Uniform
<b>Cost of a Conviction</b>	\$3,178	\$778	\$5,578	Triangular

*Limitations:* Several limitations were encountered while conducting this analysis. As with any cost-benefit analysis, data availability was a limiting factor for determining both the costs and benefits of the TAD Program. For estimating the costs of the program, TAD project budgets and estimations of donated time were used to determine costs. A potential limitation was that the program budgets used to extract project costs may not accurately reflect the true cost of the TAD Program because they were based on available funds and do not account for other donated resources and in-kind services used to implement the projects.

For estimating the benefits of the program, there was no direct comparison group for the TAD participant three-year recidivism rates. The data used for this analysis was collected from a treatment-only evaluation design and therefore could not control for potential differences in TAD participant characteristics when estimating treatment effects. Such confounding factors include participant motivation, criminal history, race/ethnicity, age, education, substance use, marital status, and environmental/social support (Logan et al., 2004). TAD participants who choose to participate are potentially different than offenders who do not volunteer, are not eligible, or are not offered the opportunity to participate in TAD; this can make it difficult to attribute effects to the program when using state or local level data for comparison.

Additionally, there is no way to fully know what types of crimes were averted due to reduced crime. To estimate incarceration costs averted due to reduced crime, it was assumed that the types of crimes averted due to TAD would have been similar to the rates of misdemeanors and felonies obtained from CCAP for TAD discharges who recidivated. Also, there was no information regarding how averted incarceration days due to the TAD Program would affect fixed costs for jails and prisons. To ensure consistency with the 2011 cost-benefit analysis and due to data limitations, average cost of prison day

and jail day were used in the analysis. However, short-run or long-run marginal costs, if estimates are available, may be more appropriate to use in future analyses depending on the impact of the program. The uncertainties of these estimates were factored into the Monte Carlo analysis.

Another limitation of the analysis was that many potential benefits were not included in this analysis due to lack of data. Potential social impacts including avoided victimization costs, employment (participant income and income tax contributions), reduced health care utilization (improved health due to drug treatment and increased access to preventive services), avoided foster care placement, and drug-free births were not included in this analysis because neither data for such TAD participants nor for appropriate comparison group were available. Inclusion of such impacts would increase the total benefits of TAD. Finally, the TAD project sites target different populations and offender risk types, and vary in services type, intensity, and treatment duration. Also, each TAD site utilized different data collection methods based on their available data sources and administrative capacity, thus increasing the uncertainty of comparing the costs and impacts between sites. Aggregate cost-benefit measures are estimated based on the assumption that these differences are negligible. Additionally, jail and prison days averted were estimated by the TAD project staff using varying methods to calculate incarceration days averted which limits the comparability of this impact. Some sites consulted with a local judge and district attorney to determine the number of incarceration days averted for each participant, while others used a fixed number of days for each participant based on their specific offense. For the purpose of this analysis, it was assumed that this variation was not significant and the incarceration days averted reported were considered accurate for each project.