

CADTCP *professionals*

DRUG TREATMENT COURTS HAVE SHOWN GREAT PROMISE

Mr. Justice K. Barnes. Chair
Canadian Association of Drug Treatment Court Professionals

A young woman caught in the deep depths of drug addiction and seemingly inextricably embedded in the unrelenting cycle of drug abuse, addiction and crime once wrote:

"Facing this battle is accepting the fact
I'm a cocaine addict, addicted to crack
It's nothing I'm proud of, this I swear
There's things I've done I can hardly bare
You'll sell your possessions, your life, your soul
Just for another hit, it's your goal
I still don't understand how it got this bad
I've lost any sense of worth I've ever had
I've hurt people that I love so dear
It's been going on now for over a year
Why I ever tried it I still don't know
Why is it so hard to just say no?"

It is this perpetual cycle of drug addiction and criminal behavior that Drug Treatment Courts were formed to solve. Drug Treatment Courts were established from a desire to find a way to break the link between criminal behavior and crime and in so doing, save the lives of the persons caught in the unrelenting bondage of drug addiction and crime and to do all this, without compromising the safety of the public.

The marriage of the criminal justice process and the substance abuse treatment process creates a Drug Treatment Court. The first court was born in Miami, Florida in 1989, since then, Drug Treatment Courts have sprung up all across the globe with the vast majority in the United States.

Drug Treatment Courts are relatively new in Canada. The first Drug Treatment Court was established by Judge Paul Bentley in Toronto in 1998. In 2001, the Drug Treatment Court of Vancouver was established. Since 2006, additional Drug Treatment Courts have been established in Ottawa, Oshawa, Winnipeg, Regina, Calgary and Edmonton.

We have learned some lessons from Canada's relatively short experience with Drug Treatment Courts. We have learned that Drug Treatment Courts can save lives, Drug Treatment Courts can increase public safety, help participants reduce or eliminate their drug use, reduce or eliminate criminal behavior, re unite participants with their families, become productive members of society and experience overall improvements in personal well being.just ask Peter Lyle, Paulette Walker and Pamela Spurvey who are graduates of the Toronto and Edmonton Drug Treatment Courts...just ask the many Drug Treatment Court participants who have successfully completed the Drug Treatment Court programs in Canada's eight Drug Treatment Courts.

We have also learned that successful Drug Treatment Courts do not operate in a vacuum, successful Drug Treatment Courts work in collaboration with various community services and agencies to provided specialized drug addiction, psychiatric and medical treatment, job training, housing, employment etc. It is clear that a holistic rehabilitative approach yields the best long term results.



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We have learned that to be successful, Drug Treatment Court programs must continually be flexible and innovative to ensure that their programs continue to address the needs of their targeted populations. We have also learned that effective Drug Treatment Court programs utilize Drug Treatment Court systems that are designed to obtain the best rehabilitative results without compromising public safety.

In Canada's short history with Drug Treatment Courts, we have learned that adhering to the twelve key principles of Drug Treatment Courts is an essential ingredient of a successful Drug Treatment Court program. This is one of the reasons for the formation of the Canadian Association of Drug Treatment Court Professionals (CADTCP). This non profit corporation is made of judges, lawyers, substance abuse treatment providers, law enforcement officers, academics, etc.

The CADTCP forms partnerships with governmental and non governmental organizations to provide ongoing training for Drug Treatment Court professionals and anyone interested in Drug Treatment Courts. The CADTCP provides a forum for the dissemination of technical assistance, using various media such as the CADTCP Electronic Bulletin, the CADTCP National Drug Treatment Court conferences and the CADTCP Drug Treatment Court practitioner focused workshops. The CADTCP is committed to Drug Treatment Court training.

As Canada begins the second decade of her experience with Drug Treatment Courts, the CADTCP recognizes the importance of developing effective Drug Treatment Court evaluation systems, which are preferably centered on the twelve key principles of Drug Treatment Courts. These principles are the building blocks of Drug Treatment Courts and are crucial to the success of any Drug Treatment Court.

Developing process and outcome evaluation bench marks, around the key principles of Drug Treatments Courts, is an effective way of measuring the varied and complex forms of participant successes Drug Treatment Court programs produce. Process evaluations developed in this manner will also allow various Drug Treatment Court programs to evaluate their own

processes against the crucial twelve key principles. To that end, the CADTCP seeks to establish an Academic Review Committee, a "think tank" of academics and program evaluation experts, to help it achieve this objective.

Any Drug Treatment Court practitioner, participant or graduate will attest to the fact that there are many stories of both success and heart break in the various Drug Treatment Courts across Canada. The CADTCP is committed to disseminating the "Drug Treatment Court story" and hence this CADTCP newsletter.

This edition is the very first and in the months and years to come, we invite you to send to the CADTCP, your story or comment for future issues of this newsletter. Sharing these stories helps to provide a glimpse of the inner workings of Drug Treatment Courts; such stories illustrate some of the tangible and intangible successes of Drug Treatment Courts and can provide encouragement and inspiration to those who read them as well as those who write them.

The undeniable link between drug addiction and criminal behavior is a global problem; it has negative impacts on the lives and families of the persons who are afflicted, and it compromises public safety and results in significant economic and social costs to society. The objective is to sever that link.

Drug Treatment Courts are part of a global effort to find innovative solutions to the revolving door of drug addiction and criminal behavior. The Drug Treatment Court method seeks to achieve this objective without compromising public safety. It is a difficult, challenging but exciting journey. The goal is a challenging but achievable one. Drug Treatment Courts are one of the innovative approaches that have shown tremendous promise in achieving this objective.

This poem is entitled "Breaking the chains". It was written by a graduate of the Durham Drug Treatment and Mental Health Court.

See www.cadtc.org for a complete list of the twelve key principles of Drug Treatment Courts.

To date, the Department of Justice of Canada has been the main government partner in this effort.

THE FIRST CADTCP NATIONAL EXECUTIVE DIRECTOR

On behalf of the Board of Directors of the Canadian Association of Drug Treatment Court Professionals (CADTCP), I am happy to announce that the CADTCP has appointed Mr. Doug Brady as its National Executive Director effective September 14, 2009. Mr. Brady is a member of the CADTCP Board and the Executive Director of the Edmonton Drug Treatment and Community Restoration Court. A position he will retain.

Doug Brady has over 30 years experience in the Correctional Services of Alberta. During that period he has held a number of senior management positions. Since April 2007, Mr. Brady has been the Executive Director of the Edmonton Drug Treatment and Community Restoration Court (EDTRC). His accomplishments in that position are well known to those who have closely followed the progress of the EDTRC.

CADTCP has become the main organisation in Canada committed to the education of Drug Treatment Court Professionals, the provision of Drug Treatment Court technical assistance and a commitment to assisting in the development, improvement, enhancement and sustainability of Drug Treatment Courts across Canada.

To that end, the CADTCP continues to develop the necessary structures and processes necessary to achieve these local and national objectives. The recent incorporation of the organisation and the appointment of Doug Brady as National Executive Director are all part of strategies designed to achieve these objectives.

Mr. Justice K. Barnes, Chair
Canadian Association of Drug Treatment Court Professionals

Paulette Walker knows how hard it can be to build a good life. Her struggle with a 20-year crack-cocaine habit seemed like a hopeless one, but what she is doing with that experience has become a story of redemptive empowerment: Walker has turned her addiction and the spectre of a drug trafficking charge from bane to brawn. Today, rather than being in court as a defendant, Walker earns a living working for it: One year ago, she became the Toronto Drug Treatment Court's (DTC) first and only peer support worker.

While Walker's turnaround story is breathtaking in scope, it is the memory of her darker days that she has turned into an invaluable on-the-job asset: "The heart of the peer support worker is in lived experience," says Walker, "We speak from the 'I' perspective – this is what happened to me; this is how I responded to situations. I provide insight into the thinking of an addict. I've been through a lot in that chaotic world that I can relate to."

In turn, sharing those insights has helped to build her own self-esteem: "I wanted to speak out to try to encourage others that it is possible, but that you really have to start loving yourself and building on your self-worth. Giving back to the community really helps to build anyone's self-esteem, and as a recovering addict you always have to think about what is really good for you."

With support and time, Walker ventured onto the road to recovery, facing each day anew. Still, she didn't know when she became a participant in the DTC program while still in jail that it would lead her to where she is today: "I wasn't even thinking recovery then," she says. But in going through the motions, Walker started feeling better and hopeful. The counsellors, clinicians, judges and court clerks treated her with respect and caring, which flew in the face of what she had for a long time believed she deserved: "They made me feel so important, and with how they cared I couldn't help but start caring about myself," she says.

Feeling grateful and optimistic, Walker began to look for ways to help others: "I just felt that I had to give something back," she says, so she volunteered for five years in court to do what eventually became a paid job.

It was emotionally draining to regularly talk about her past at first, but Walker found a way to make it manageable when she realized the positive impact her sharing had on clients with whom she worked: "I came into work one day and waiting for me were messages from women calling to say 'thank you,' that what a big difference I had made for them. That lifted my spirit," says Walker. "I said, 'OK, I'm going back.' I'd just modify the way I was doing it."

Walker's peer support role involves various tasks, such as facilitating groups (e.g., women's art therapy, talk therapy maintenance groups), attending court to speak with new clients, helping clients connect with social services like disability support programs and getting them to appointments. Sometimes she brings in home-cooked meals to share with clients "because I know what it's like in the first couple of months of treatment. You don't have any money, you're broke." Prior to her peer support position, Walker worked full-time as a chef in one of the cafeterias at the Centre for Addiction and Mental Health where she still works part-time.

But it is the peer support position that has confirmed Walker's mission: "I have a real purpose now," she says. "People with addiction need structure in order to be healthy and productive," says Walker. "When I became a client of the DTC, I kept hearing 'You have to be here, you have to be there' I thought, 'Fine, just tell me where I need to be' because I had lost all sense of myself and how to live a normal life. I used for 20 years, almost a lifetime. I had to be 'born again,' so to speak, in my life."

While Walker gives clients much needed support, she herself has been received wholeheartedly by DTC staff and others she works with. "My experience with them has been nothing but positive and very encouraging and empowering," says Walker. "They're happy that I'm part of the team." She hopes other mental health and addiction services will also embrace the peer support role because it benefits everyone. For Walker, it has led her to pursue dreams she never thought could become reality. "This job has uplifted me and it's making me believe that I want more," she says. That may mean furthering her education in the field of social work or pursuing another option, but at the moment Walker is dedicated to her role with the DTC. "With this job, you have to be flexible. Whatever the needs are, you just go with it," she says. "For now, it's where I want to be."

TORONTO DRUG TREATMENT COURT

Since 1998 the TDTC has been committed to providing alternatives to incarceration for Torontonians who face criminal charges related to drug addictions. This voluntary program is a joint partnership between a number of constituencies, including: CAMH – Centre for Addiction and Mental Health, the Ontario Court of Justice, Federal Dept. of Justice, Legal Aid Ontario, Ministry of the Attorney General, Ministry of Community Safety and Correctional Services, Public Prosecution Service of Canada, Toronto Bail Program and other community agencies.

Participation is available to non-violent offenders only. People with addiction issues who have been charged with possession

or trafficking of small quantities of crack, cocaine or heroin, minor property crimes or prostitution may participate in the program.

Turning lives around: the TDTC helps addicts make positive changes using a multi-tiered community based approach:

- Supervised harm reduction treatment
- Abstinence support
- Group and individual counseling
- Securing shelter and housing and connection to income assistance & vocational training.

Upon graduation participants normally receive non-custodial sentences and leave with renewed hope for a drug free life.

Today we are serving over 60 clients and have had approximately 125 successful graduates.

DURHAM DRUG TREATMENT COURT

The Durham Drug Treatment and Mental Health Court has been in operation since November of 2006. This court has the capacity to provide concurrent disorder services through our programming and partnerships, to offenders who have a substance abuse issue (with or without a mental health disorder), and a non-violent substance related charge. This court is run collaboratively through a partnership with the Oshawa Courthouse, the Crown's office, Pinewood Centre of Lakeridge Health, Durham Mental Health Services, the Ministry of Community Safety and Correctional Services, as well as various community members. We have a capacity for seven adult clients at any one time. There is also a Community Restoration

Component for youth who are charged with substance related offenses and/or have dysfunctional behaviour, and who are ineligible for a diversion program.

There is currently no cap on the number of youth clients. Potential clients are screened by the crown attorney, who then refers them to a Durham Mental Health Service worker who screens them on-site. We have pre-court meetings every Monday, from 2:00 pm to 3:30 pm, and the court session is held on Mondays from 3:30 pm. Youth occasionally will be seen on other days, and youth conferences may be called at a mutually convenient time for all interested parties. - Case Manager from Pinewood Centre – Allison Perrie-Radoslovich, 905 571-3344, ext 116, aradoslovich@lakeridgehealth.on.ca

OTTAWA DRUG TREATMENT COURT

The Ottawa Drug Treatment Court (DTCO) has been in operation since March of 2006. The DTCO treatment program is managed by the DTCO Director, who is a Program Manager at the service provider, Rideauwood Addiction and Family Services. While the Director is responsible for overseeing the program as a whole, the governance, policy and procedural decisions are managed collaboratively by the entire DTCO team. In addition to the Program Manager, the team is composed of four judges, who rotate regularly into this court, assigned federal and provincial Crowns, a paralegal, a dedicated probation officer, a Rideauwood court liaison officer and a dedicated duty counsel.

The DTCO has been enthusiastically embraced by the Ottawa community, the local police (including the chief), business and residence associations, and the social service providers. The local criminal defence bar continues to lobby for a relaxation of admission criteria, in order that more of their clients can benefit from the program. From time to time, various Ottawa media outlets have produced stories that have illustrated the value of our court program, and have highlighted some of the participants who have attained graduation.

As with any program that seeks to assist a hard-to-serve population such as ours, there has been a healthy debate about how to achieve the best results. Most of the policies and procedures confidently delineated in the first year have evolved out of our experience with real people in their own complex situations. It is through this vigorous dialogue that better solutions have ultimately been reached. Over time, respect has been forged for each member's role on the team, as an integral part of a greater whole. Without exception, every member of the ODTIC team brings passion and commitment to the task before them, ultimately to the benefit of the participants of the DTCO program.

WHAT A DIFFERENCE A DAY MAKES.....

I had spent the last 10 years in full-blown, balls to the wall addiction. Homeless for the last 4 of those, I was not even aware that I seemed to have lost the ability, or capacity, to care. I was dying a slow and ugly death.

Everything changed in July of '06. I was arrested. Again. And jailed. Again. Almost felt like going home. Again. This time, however, something happened. To this day I cannot succinctly tell you exactly what that 'something' was. Suffice it to say that my spirit was on the verge of dying. And for the first time in a great many years I paid attention. I heard my own anguish and felt my own pain. And I reached out for help.

The Ottawa Drug Treatment Court answered my call. Grabbed onto my out-stretched hand. And told me that I had better hold on tight. "This won't be easy". "Are you willing to abide by this?" "Do you think you will be able to do this?" I know. Yes, I am. Yes, I think I can.

I spent the next year learning about myself. Learning about a man, and a young boy, that I had lost touch with a very long time ago. It was not easy. It was certainly not painless. It was not always fun. It was the most life affirming, empowering and feet-planted-firmly-on-the-ground experience that I have ever had.

What the staff and treatment providers who work for the DTCO do, is not magic. There is no smoke and there are no mirrors. They did not 'make me' into the man that I am today. Instead, I was helped to find, and nurture, and really get to know, the man that I am today. Tomorrow, I will know that man a little better. I have learned to 'trust the process'. It is for this that I owe an unending debt of gratitude.

Today, my life is truly nothing short of beautiful. A little more than 3 years ago I knew that this would never be possible for me. I have never been so happy to be wrong.



Joe E.
Drug Treatment Court - Ottawa
August 08, 2006 to August 14, 2007

REGINA DRUG TREATMENT COURT



My name is Judie Birns and I am the new Manager of the Regina Drug Treatment Court (RDTC) that I have managed since June 15, 2009. The Regina Drug Treatment Court program is located in a fully dedicated, entirely renovated, and secure space. It has approximately 5,500 square feet with group meeting rooms, a cultural room, secured exam/treatment room and, a favourite with the participants, a large common room for break and meals that is fully equipped and stocked with various menu selections. Breakfast and lunch, coffee, juice and snacks, are offered daily by the Regina Qu'Appelle Health Region (RQHR) our local health region. This provides an opportunity to interact on an informal basis to share stories and frustrations as well as encourage each other.

Our program is located in downtown Regina, Saskatchewan. Within 11 blocks is the RQHR's Methadone Clinic and within 4 ½ blocks is the traditionally-styled single 'assigned' Courtroom, located in the Provincial Court. Our participants appear weekly (unless excused) before the Judge assigned to the RDTC.

Besides myself as Manager, there are 3 Addictions Counsellors, an Addictions Psychiatric Nurse, Probation Officer, Communality / Cultural Liaison, Social Worker (Financial Assistance/ Housing/ Vocational-Educational) , 2 Administrative Support, and within the Judicial/ Legal we have our Provincial Court Judge (1, with two back-ups), dedicated Court Clerk, Crown Prosecutor (with back-up), Legal Aid Defence Counsel (with back-up), and Deputy Sheriff, regularly assigned. We also have the services of a Physician who visits ½ day once weekly.

From the period of October 2006 to June 30, 2009, the program screened 198 individuals. Of those, 64 were not eligible and 134 were accepted with 121 that started the program. Ten percent have graduated so far.

Programming involves accessing local resources in area of life skills, education, employment training as well as providing 4 hours per day on site for 4 days per week. Topics cover the areas of addictions, health, criminality and traditional cultural teachings. The centre is closed Tuesday for pre-court preparation by staff who generate reports for the afternoon drug court session.

I am extremely excited to have joined the Regina Drug Treatment Court Program and to work with this diverse and challenged population to assist them in their desire to become drug free, non-offending members of society.

WINNIPEG PROGRAM DESCRIPTION



PROGRAM BACKGROUND

The WDTC is a federally funded program that started taking clients in January 2006. Staffing consists of one Manager, three Counselors, one Administration Assistant and one Case Worker. The staff utilizes a "stages of change" phase program that is applied through group and individual counseling and community contacts. Counselors assess and refer clients to community agencies while advocating on their behalf. The "Therapeutic Justice" approach requires clients to attend court weekly. In Court, they receive encouragement and incentives from the presiding judge. A system of "rewards and sanctions" encourages active participation in the process. WDTC embraces the "harm reduction" approach allowing for discretion in dealing with client problems such as missed appointments or failed urinalysis tests. A Steering Committee comprised of representatives from criminal justice and social services agencies provides guidance to the program. Program goals centre on improving client knowledge of addictions, providing information on community resources, managing their addiction and improving client life skills. The overall goal is to reduce harm due to drug use and addiction.

PROGRAM DESCRIPTION

The WDTC is a special court that diverts drug-addicted offenders away from incarceration and towards an extensive supervision and treatment program that involves the judiciary, addiction service providers and community agencies. WDTC is available to offenders charged under the CDSA (possession, possession for purposes of trafficking, trafficking) and/or certain non-violent Criminal Code offences. To be eligible, an offender must be dependent on drugs and their criminal behaviour must have been caused or motivated by their addiction. Offenders who are gang members or who used a weapon in the commission of their offence are not eligible for the WDTC. If an applicant is eligible and chooses to participate in this program, they must be willing to commit to the entire program. The program may be successfully completed within approximately 12 - 18 months. Non-compliance with treatment plans or program rules at any time during their participation could result in termination from the program. Sentencing would then proceed before a Provincial Court Judge. Upon successful completion/graduation from the WDTC program, the original charge(s) will be disposed of.

PROGRAM GOALS

WDTC staff work with participants to establish individual goals. However, the following are the program goals.

- To learn to be alcohol and drug free.
- To learn better life coping skills.
- To adjust to a drug-free lifestyle.
- To develop a non-criminal pattern of living.
- To enhance employment skills through vocational training and educational pursuits.
- To attend 12-step support groups or other similar programs approved by the court.
- To increase social skills.
- To enhance self-esteem and self-motivation.
- To learn the warning signs of relapses and develop a relapse prevention plan.
- To accept responsibility for financial obligations and learn budgeting skills.
- To develop time management skills.

MESSAGE FROM DOUG BRADY EDMONTON DRUG TREATMENT AND COMMUNITY RESTORATION COURT

My name is Doug Brady and I am the Executive Director of the Edmonton Drug Treatment and Community Restoration Court (EDTCRC). The reason for the long title is because we do more than just get participants clean and sober; we work with them to get back into the community with a supportive foundation that will keep them clean throughout their life and to give back to the community for the wrongs they have committed.

Edmonton has a great treatment team that includes the Probation case manager, Sarah Sandmaier, the Treatment case manager, Debbie O'Neil-Nugent and Tara Marchand who provides Administrative support. Our court team includes Judge Darlene Wong, Federal Crown prosecutor Linda Banks, Provincial Crown prosecutor Dave Hill, Legal Aide representative Debbie Stewart, and Para-Legal Simonette Underwood. The strength of our court lies with the abilities of our court and treatment team members and their willingness to work together for the benefit of the participant. Defence counsel has bought into this approach with the adversarial model discarded. It is truly amazing to witness diversity coming together for the common good.

NO REGRETS RUNNING GROUP

There has been a lot of talk lately of the importance of exercise and recovery. As a result, the Edmonton Drug Treatment and Community Restoration Court decided to put this to the test. Through a donation from Rob Skrypnek, we were able to outfit a number of participants who were interested in starting running and working out. The Tech Shop was also very generous in giving us a discount on running shoes and supplies so in September of 2008, we decided to embark in pursuit of a marathon. While one person jokingly said they had quit running when they came to drug court, we had several who we quite interested despite having never run before.

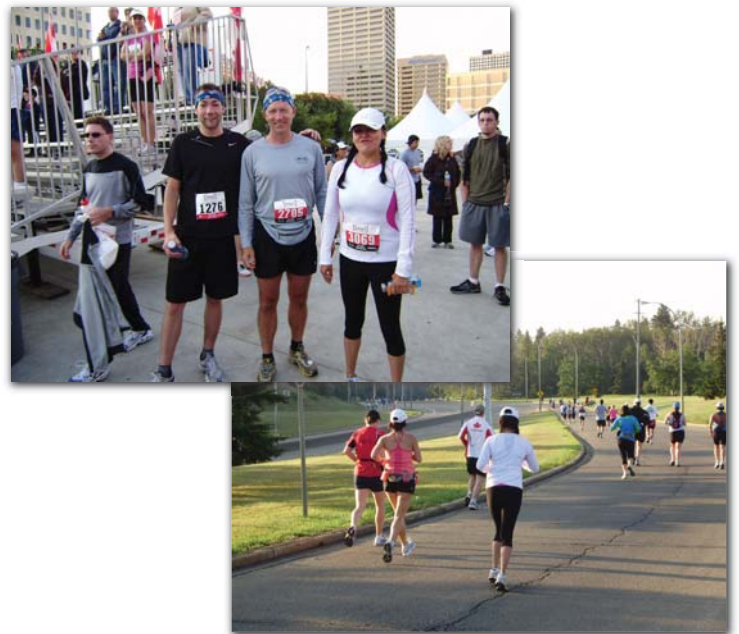
We originally tried running after court on Wednesday's in Edmonton's beautiful river valley but with court often running late, we found ourselves tripping and running into trees in the dark. We finally decided on Tuesday evening and that seemed to work for most people. With groans and running attire that included jeans, our goal would be to complete the "Edmonton Intact Marathon". With no sense on doing things small, we decided on this lofty goal.

Our first run occurred in December 2008 with two participants and one staff member completing the 5 K "Santa Shuffle". It was fairly icy but the two participants were excited about their accomplishments. The next run was the 12 k "Quarter Ass" run, a fun event put on by the race director of the Blackfoot Ultra. (We actually were the first ones to do the race as the "Half Ass" was 25 km.) Anyways, on January 3, 2009, at -42 C, one staff member and Marcella (the only participant and graduate to complete all

The EDTCRC is the only drug treatment court in Canada that refers to existing facilities for treatment and counseling. This can be problematic at times waiting for treatment beds to open up for our participants. Having said that, the partnerships we have created with Alberta Employment and Immigration, Serenity Ranch, Thorpe Treatment Centre and Poundmaker's Lodge, to name a few, have enabled us to enhance and individualize our services to the needs of our clients. Having seen the results of our efforts, these agencies are more than willing to assist us when needed.

In just its fourth year of operation, the EDTCRC has seen over 30 men and women graduate from the program. These alumni remain active in the community promoting the EDTCRC and assisting participants in the program. It is a regular occurrence to see alumni members drop into court to encourage participants and to let the judge know that they are still doing well. Their names are often seen as sponsors for present participants and they do not hesitate to contact us if there are issues to discuss.

Like other drug treatment courts across Canada, the need for additional funding and support from all levels of government continues to be a concern. With the current economic situation, governments fall short of translating their support into funding dollars. We are hoping the realization of the long range cost savings of drug treatment courts will be understood by the legislators and future funders.



the races) completed the ordeal stopping only to make sure our limbs were still connected to our body.

Moving up the ladder, Marcella and a different participant completed the "baby 25 k ultra" at the Blackfoot Ultra. This is a grueling course that has been nicknamed, "death by a 100 hills". It was a sunny hot day but both completed the course in very respectable times with one of the runners keeping up to the leaders for the first 10 k of the race.

Last, but not least, came the day to complete the “Edmonton Intact Marathon”. At this point, I want to say a word about Marcella. She is a 40 year old aboriginal person who started running in September. I remember running with her on 7 km runs and as we were running she would often say, “I have to quit smoking”. She is now approaching her two year sobriety mark, is attending school and obtaining top marks, and since December 2008, has not had a cigarette. She has now completed a marathon. Tears came to my eyes as I watched her cross the finish line with the biggest smile you have ever seen. I still remember her sitting in my office, quite giddy, so excited about being clean and now running. She persevered through many obstacles along the way but she never gave up. All of us at drug court are proud of her.



Oh, by the way, Travis, a recent participant, ran a 1:58 half marathon and he also has quit smoking.

Marathon running is very much like recovery. It is very hard at the beginning, it takes commitment and there are times when you want to give up. But as you persevere and plod along through you find out you the impossible is within your grasp. The rewards at the end and throughout the journey are worth the struggles that happen along the way. Happy trails!

Submitted by Doug Brady, Executive Director, Edmonton Drug Treatment and Community Restoration Court

EDMONTON DRUG TREATMENT COURT

On Wednesday August 12, 2009, I had the pleasure of spending the afternoon as a guest at the Edmonton Drug Treatment and Community Restoration Court. The EDTCRC, as it is known, is intended to reduce drug related crime through innovative approaches to dealing with offenders.

Watching this collaborative and restorative approach to justice was certainly fascinating.

My interest in observing the Drug Treatment Court in operation stems from my membership on the House of Commons Justice Committee.

Recently, we passed Bill C-15, which if passed by the Senate, would bring in mandatory minimum sentences for drug dealers. It does, however, provide for enhanced access for appropriate offenders to Drug Treatment Courts.

Drug Treatment Court sits every Wednesday starting at 2pm in Courtroom 267 (Provincial Court side of the Law Courts building). As a former trial lawyer, I was immediately surprised by the informal approach in which the Drug Treatment Court operates. I suspect because the Federal Crown Prosecutor, the Executive Director of the Program and Presiding Judge are almost always the same players, a certain informality and familiarity is clearly established.

Essentially, the participants in the program appear every week and provide an oral report to Judge Darlene Wong as to what activities they have been involved in during the past week (whether they were working or going to school programs and the meetings they have attended in respect to their addictions and any changes in their personal circumstances). The Executive Director then provides a report and applause is earned if the Executive Director verifies that a drug test has produced a negative (passing) result. The Crown Prosecutor then indicates any concerns that she might have regarding future steps and the participant returns to their seat. Interestingly, nobody leaves until the entire docket has completed their progress evaluation.

Following an in-camera meeting with Judge Wong and the other professional participants, I am advised that occasionally a participant is deemed no longer eligible for the program. Ultimately they are sentenced for their crime. However, based on my observations, clearly the participants in the program wish to complete their rehabilitation and avoid sanction for the crimes that have brought them before the Courts in the first place.

As a practicing lawyer who spent a great deal of time in the courts early in my legal career, I was certainly struck by the non adversarial nature of the Drug Treatment Court. Although it appears that sometimes there is more social work than law being practiced, it is difficult to argue with the successful results of the program. The vast majority of the participants, on the day that I observed court, were sticking to their programs for rehabilitation, attending meetings and either working or seeking gainful employment or educational opportunities.

Anecdotally, many participants spoke glowingly of the program and how it changed, and in some cases, saved their lives.

Initially the Federal funding for the Restorative Drug Treatment Court was for a four year period ending in 2009. It has been extended conditionally ending on March 31, 2010. This extension was to give the Federal Government more time to complete the evaluative component of the project. I will certainly add my voice on the Justice Committee to those who have been advocating for additional funding to allow this highly unique, but clearly successful, approach to justice to continue.



Brent Rathgeber,
Member of Parliament
Edmonton-St. Albert

CALGARY DRUG TREATMENT COURT

My name is Donna Dupuis and I am the Clinical Director Calgary Drug Treatment Court. The Calgary Drug Treatment Court that I joined in February 2009 had undergone many changes since its short inception. At the time of my joining it had a new Executive Director on a part-time basis and I as Clinical Director on a half time basis. We had a Drug Court Team that thankfully had some key members who had been involved with the program since it began. Thank goodness for them as their continuity helped stabilize an ever changing and growing program.

What is the role of the Clinical Director in a Drug Treatment Program you ask? There is the ideal role of the specialist and then there has been our reality. With only two (part-time) workers, I have found myself transporting men and women from Remand to their treatment facilities, doing drug screening, being at the end of a cell phone with a Treatment facility who is struggling with one of our clients, working with our police when one of our participants has gone AWOL, and on and on. There is rarely a day without some new learning on my behalf. Some days I laugh when I stand there watching someone do a urine test and I think "if only my parents could see me now". All those years of University and all those advance diplomas and here I am worried that I might read the test wrong. And then I laugh.

I have been a Clinical Social Worker with a specialty in Addictions for 32 years. My original degree was in Criminology and I obtained my Masters in Social Work at Carleton University. In my early years working in and around the corrections field I saw many young men and women incarcerated for behaviour clearly related to substance abuse. And yet there was little or no recognition of this, especially in the Youth Correctional system. Further, many of the youth I worked with came from substance abusing families and again there was no focus on family treatment. Youth "did their time" and either went on to the adult system or were returned to those same families where little or no treatment was offered. When I heard of the Calgary Drug Treatment Court's work I was hopeful that at last we could bring the legal world and the corrections world together to work with men and women. I have had the opportunity for many years to help bridge information from the addictions world and that of the mental health world. I was ready to begin to cross some new bridges.

One of the stories that has touched my heart is the story of "Alex". Alex is from an African country. He was born into war, had to



escape his country by walking for days and days without food and without family to another country where he lived for many years in a refuge camp. Without family and surviving on nothing he turned to drugs at an early age. Then came a day that he was accepted into the USA as a refuge. He arrived and within months became a daily addict living on the street of a large city, without a caring community and quickly became involved with the law due to his addiction. By some strange quirk of fate he was deported to Canada, found his way to Calgary, lived on the streets again and eventually found his way into drug court. I am happy to say that today this man has his own apartment. This is the first time he has had a home since being a very young child.

He goes to school part-time, works part-time has been drug free for almost a year and most important he sees himself as role model for others in the program. It is so delightful to hear him giving pep talks to potential participants as they sit in the docket. Most know him from the streets and Alex always stands up in court and reminds them of who he was on the streets versus the life he has today. This story is why on those days when I get so frustrated and discouraged I only have to see "Alex" and I remember why we are doing what we do.

Working with a team of up to 10 people has been energizing and challenging at times. One of the biggest challenges I have experienced is when the legal views and the treatment perspectives come into conflict. Balancing the needs for public safety and the need for individuals to have access to specialized programs often creates interesting discussions around the table. And bridges have needed to be built so that we don't polarize ourselves into the "legal side" and the "treatment side". I am happy to say that to date we have even been able to laugh when one team member crosses a bridge by recommending something that might be "out of character" for their perceived role. What a delightful experience.

This last month we have had the opportunity to hire a full time male case worker for our Drug Treatment Court. Now there is time to look at the role of the Clinical Director and begin to dream. Already the role of Clinical Director has been clearly one of advisor/consultant to the pre-court team, some of whom have very little addictions background. Acting as a consultant to our treatment programs and offering workshops to their staff is now happening. In the near future I hope to put together a program for family members who remain involved with our participants. I could go on and on about the type of services I see that would be helpful to our participants and our team but "one day at a time" has become my daily mantra.

DRUG TREATMENT COURT BETTER THAN NOTHING

Every Tuesday and Thursday a group of like-minded people get together and talk about common problems, the stress of modern life and their efforts to cope. They chat among themselves, applaud a success, shake their heads sympathetically at a failure, sometimes cry and frequently laugh. Nothing unusual about that – except that they are in Courtroom 303 of the Vancouver Criminal Courts at Main and Cordova.

This is the Drug Treatment Court of Vancouver (DTCV). It has been in operation since late 2001. It consists of a judge, "in-house" crown and defence counsel, dedicated court staff and

sheriffs, and a substantial treatment team working out of a single location in the West End. The bare numbers suggest that it has not been a smashing success: 638 have participated and 117 have "graduated".

Many opposed to drug prohibition are also opposed to drug treatment courts. They are said to validate the criminal approach to problematic substance use. Detractors say DTCs assist in perpetuating a policy that has been shown to be both harmful and doomed to failure; and they divert funding from other, voluntary treatment programs. There is no doubt that many of

the American models deserve the flack they get. The academic literature tends to focus on their coercive nature: many are not at all “voluntary” in the sense that Vancouver’s is and the penalty for failure is frequently harsh. There is also an absence of reliable studies comparing them to conventional treatment and, in particular, their cost-effectiveness. As one person involved in addiction treatment says, “That judge is one expensive probation officer”.

On that issue, while it is true that the treasury is limited, there is no reason to expect that, if there were no drug court, its annual funding would be devoted to other treatment programs. The federal government’s 2007 drug “strategy”, for example, made much of its alleged focus on treatment. The amount of money allocated to that translated to a mere ten more detox beds for all of B.C. (73% of the money went to enforcement).

As for the other concerns, there are two immutable facts to consider. The first is that there will be, for the immediate future at least, drug crimes. Much as prohibition is the worst way to deal with the health implications of drug dependence, and indeed is the basis of almost all other social ills arising from it, that is what we have and it will not be changed overnight. The corollary is that many dependent on heroin or crack will continue to face punishment for selling small amounts to get what they need. That they are given the option to deal with what they may decide is a problem they have been incapable of dealing with voluntarily can’t be casually discounted on doctrinaire grounds.

The DTCV has a simple design. An offender is charged with a “drug-related” offence - say, trafficking in crack cocaine or burglary to obtain the money to buy drugs. He knows that one way or another, whether he pleads guilty or is found guilty at trial, he will be sentenced. A street seller trafficking in small amounts of drugs to maintain his addiction is likely to receive a sentence of three to six months in jail in the regular court system. If he behaves and earns his remission points, he will be out in half that time. By contrast, if he is accepted into the DTCV program, he is looking at a long stretch of “coercive treatment” overseen by what is usually called a “therapeutic court”. That means he will make weekly appearances in court, will abide by a treatment plan (devised and executed by an integrated group of addiction, mental health, housing and other specialists) and will submit to random urinalysis. The average time spent in the program by those who have graduated has been 468 days. It’s a demanding, long grind. But it’s his to choose.

If he does, he appears in courtroom 303 and is presented with a waiver form that describes in plain English what will be required of him. After consulting with his lawyer, he signs the waiver and enters a plea of guilty to whatever charge he is facing, a precondition to participation. He then enters the nominally 30-day “assessment” period. The actual period is quite flexible, designed to get a clear idea of whether he really wants the

program and whether the program wants him. As he is being assessed, there is room for relapse. Generally, even if it’s followed by one step back, one step forward is seen as a positive sign. There’s a lot of leeway. If he is removed or withdraws at this stage, his guilty plea is struck from the record and he starts all over again in the regular court system.

Post-assessment, the offender progresses (or not), through the program, and the DTCV defence lawyer represents his interests - principally at lunch time meetings, attended by the judge, the lawyers, a person responsible for the treatment side of the program and one representing the corrections (probation) side. They all open a file and read a brief progress report. His tests have, or have not, been clean; he has, or has not, been complying with the demands of the program; there are special housing or mental health needs. The discussion about the next step is open, brisk and not very different from what would go on in the courtroom. Then on to the next file, and the twenty or so after that.

Courtroom 303 at 1:30 p.m. The place is lively, occasionally too much so and the gathering has to be asked to tone it down. A case is called. A jittery man steps up and the judge asks how he’s doing. He says, “pretty good, your honour - how are you”. She says, “Fine thanks... you’re looking pretty good”. He smiles, “Well, yeah, I feel good”. She reads from the file, “Clean tests and in compliance” - the gathering applauds - “you’re doing well. Taking it day by day seems to be working.” He looks down and says softly, “Well, it’s more like one hour at a time.” She says, “Well, keep up the good work. See you next Tuesday.” He smiles, “Thanks, your honour”, and he strides out.

Success in the program takes many forms besides graduating. A number who participate and drop out or are removed have reconnected with family; or they have had periods of clarity that have allowed them to take a realistic look at their lives; or they have received housing or mental health assistance, improving their chances of making it if they decide to try again. Most who graduate do so “with honours” - they have completed the 265 hours of treatment required and they have not failed a urine test in a very long time. But there are a few who graduate without honours: they completed the program, but still test positive from time to time. If they “fail” after the assessment period they are sentenced in the DTCV, in the same way and to the same extent they would be in regular court for the offence that started the whole thing in the first place. The reward for the graduate is that he is given the lightest sentence available: a one-day probation order.

There’s no doubt that 117 out of 638 is a modest achievement; but it is certainly better than zero out of zero.

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VANCOUVER DRUG TREATMENT COURT



The Drug Treatment Court of Vancouver (DTCV) was the second DTC in Canada, officially starting in December of 2001 as a four year pilot project funded by the federal

and provincial governments. It is now well established as the largest dedicated drug treatment court in Canada, providing eligible offenders with court supervised treatment for addiction to cocaine, crystal methamphetamine, heroin and other substances. DTCV provides service to eligible individuals charged with one or more offences prosecuted by the Provincial or the Federal Crown at the Vancouver Provincial Court.

The goal of the program is to decrease heroin, cocaine, and crystal methamphetamine use in individuals charged with offences that are motivated by drug addiction. The expected outcomes of the program include:

- Abstinence from drug use
- Reduced criminality and future contact with the Criminal Justice System
- Improvements in participants' physical, emotional, and mental well being
- Improved housing, employment, and education
- Pro-social use of time

In 2008 DTCV started formally accepting participants who posed an elevated risk for violence, including those with convictions for violent offences. The reason for this outward change was that Vancouver has one of the poorest and most densely populated addict communities in North America. Those who are addicted tend to have severe and long standing addictions, often coupled with one or more physical and/or mental health issues. Violence "on the street" is endemic and a fact of living in the area. People in the program often presented with safety concerns even though they had never been charged with assault, weapons, or robbery offences. Some posed a safety risk equivalent to or greater than those with violence in their criminal history, while at the same time having the highest needs for treatment. Given these factors, individuals are assessed for the safety risk they pose and decisions on admittance are

based on individual considerations, including their record, rather than an absolute prohibition on past violence.

DTCV is fortunate in that it has a dedicated treatment facility staffed with Addiction Counsellors, a Doctor, a Psychologist, an Addiction Nurse, Case Managers, a Financial Assistance Worker, and other Addiction Recovery Support Workers. Referrals are made to other services and resources in BC, as required and where appropriate. The therapeutic approach is based on a harm reduction philosophy and uses a Bio/Psycho/Social/Spiritual treatment Model, with cognitive behavioural therapy as a key component. The services are provided using integrated case management delivering services with a client centered approach. The Assertive Case Management model was developed for use with mental health clients. Assertive case management was introduced as a response to fragmented services in health care and the difficulty mentally ill people often have navigating that complex system. Addicted clients face similar difficulties with the medical system but have the added complexity of the justice system, and use of this model provides similar benefits to the participants. Offenders with an elevated risk for violence often face even more barriers, and this model also provides benefits to this population to access services, while maintaining safety. The focus is on interdisciplinary teams sharing caseloads to reach out to clients by providing services in the community wherever possible. This results in a holistic approach to providing services from basic needs such as housing, clothing, and food, to the more advanced therapeutic services provided by the addictions counsellors.

Benchmarks are used to gauge and monitor progress with addiction and achieving treatment goals, with four phases of treatment. Participants will usually be in the program for over a year, and to graduate require a minimum of six months from their last offence, at least three months of continued abstinence from illicit drugs, secure and stable housing, and are living their life in a positive way, by being in school, job training or working. Graduation will result in their charges being stayed or a suspended sentence with a brief probation period, depending on the nature of the charges. More importantly, they have their lives back.

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