



Overview of the DTCO Program 2008-2014

Characteristics and Outcomes of Clients

& Key Features of the DTCO

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Characteristics of DTCO Clients¹

Between April 1, 2008 and March 31, 2014, 160 clients participating in the Drug Treatment Court of Ottawa (DTCO) engaged in a Brief Interview for Treatment (BIT) and provided consent for the analysis of this assessment and their outcomes while in the program. 97% (155/160) of the clients participating in the DTCO spoke English as their first language, and 66% (105/160) were male. Clients ranged evenly in age from 19 to 62y.o. At admission some of our clientele were engaged in methadone treatment 16% (25/159), but very few were involved in a substance abuse treatment program 7% (11/159). Most clients did have prior experiences with treatment services 69% (110/159). Given the severity of issues facing this population it is startling that 31% (49/159) of our clients have never before participated in any form of substance abuse treatment.

Table 1: Treatment History of DTCO at Program Entry

Treatment Episodes	# of clients (n = 159)	Percentage of DTCO
None	49	31%
1	39	25%
2	31	19%
>3	40	25%

As part of the BIT that DTC counselors conduct with clients at the beginning of the program, clients were asked about their drug use habits prior to entry. The primary drugs of choice abused by DTCO clients were crack/cocaine 79.6% (109/137), followed by opiates at 20%

¹The number of responders differs for different questions in the assessment. This is because often individuals at admission into the DTCO struggle with understanding and completing an assessment. Some clients refused to or were unable to answer some of the questions asked of them. In order to provide clarity on the number of clients being represented the numbers of responders for each question are listed beside the percentage of responses.

(27/137), and only one individual indicated a different drug of choice (cannabis). Regardless of their drug of choice 86.1% (118/137) of clients had used crack within 6 months of entry into the program. Of those clients who had used crack in the six months prior to treatment, 83.9% (99/118) were doing so on a daily basis. Though crack was the primary drug being consumed, many of our clients also abused other substances; see Table 2: Monthly Drug Use of Clients Prior to Entry into DTC for more information. Clients were primarily ingesting drugs through inhalation 66% (92/139) but many admitted to regularly injecting substances 34% (47/139).

137 of the 160 clients interviewed between April 1, 2010 and March 31, 2014 were able to provide detailed self-reports on the volume and frequencies of the substances they typically used. Estimates on the average monthly spending of clients prior to admission come from these structured self-reports². The combined monthly spending of these 137 clients was \$1,209,950.00, for an estimated \$14.5 million annually. The average client in the Ottawa DTC program spent ~\$8,800 dollars on substance use every month, or an estimated \$105,600 annually. If assumed that the 137 clients who have provided information regarding their use are typical, then it is estimated that the 160 clients examined here would have consumed a combined 16.9 million dollars' worth of drugs within a single year prior to their entry into the program.

²The dollar value attributed to the various drugs comes from the National Intelligence Analysis, C. I. (2008). *Report on the Illicity Drug Situation in Canada 2008*. This publication was retrieved from the Royal Canadian Mounted Police Website: www.rcmp-grc.gc.ca on October 11, 2011. No corrections for inflation in drug prices have been applied to the quantities in this report.

Table 2: Monthly Drug Use of Clients Prior to Entry into DTC (April 1, 2008-March 31, 2014)

Drug Used	# of Clients that used in past 6 months (n=154)³	# of Clients with use data	Total Estimated Cost/Month	Average Estimated Cost/Month (per user)
Alcohol	66	34	9,224.91	271.32
Cannabis	105	83	42,734.50	514.87
Cocaine	41	32	51,746.67	1,617.08
Crack	134	118	894,665.00	7,518.19
Ecstasy	9	7	5,775.00	825.00
Opiates	60	50	207,895.00	4,157.90
Overall	N/A	137 ⁴	\$1,209,949.83	\$8,831.75

During the BIT, when clients were asked about their primary source of income, 67.5% (104/154) responded that they were receiving support from social services either through Ontario Works 47.4% (73/154), or the Ontario Disability Support Program 20.1% (31/154). However the amount of money clients were spending on their drug use, as well the charges that brought them to the DTCO, provide strong evidence that these social services were not their “primary sources” of income. A quarter of our clients 24.7% (38/154) admitted that illegal activities supplied the majority of their income. Of these clients, 26.3% (10/38) listed drug dealing as their income source, 31.6% (12/38) indicated prostitution, and the rest were involved in various other criminal activities 42.1% (16/38).

Very few of our clientele mentioned employment 5.2% (8/154) as an income source, and indeed the majority of clients had not had any form of employment for some time. 66.9%

³154 is the number of clients that were able to provide some drug use information in their BIT, even if their information was not sufficient to be used in the estimate of spending.

⁴137 is the number of clients were able to provide detailed self-reports on their top two drugs of choice.

(99/148) of clients did not work in the year prior to admission, and this number rises to 77.7% (115/148) for those which did not work within 6 months of admission. The prospects for employment in this population are impeded by the generally poor level of education clients possess. Only 47.3% (69/146) of DTCO applicants had completed high school, and only 8.2% (12/146) had any form of post-secondary certification or skills certification.

Nearly all of the DTCO clients had a criminal record prior to admission 91.8% (145/158), and 11.9% (16/135) of these applicants were also facing outstanding charges. At their times of admission to the program, 149 clients were being accused of 1558 separate charges. The majority of these being due to administration of justice offences (55.3%), followed by theft/break in related charges (19.1%), next by drug possession and trafficking charges (13.3%), and a host of various different charges made up the rest (12.2%). Further 59% of clients had at least one trafficking or possession charge when applying to the DTCO.

Housing was identified as a major barrier to treatment for 63.7% (100/157) of our clientele. These clients were either homeless and in need of a shelter placement (60/157) or were in unstable high-risk housing (40/157). Only 36.3% (57/157) of DTCO clients did not identify housing as an immediate concern and were able to begin treatment without case management support to find adequate shelter.

Half of all DTCO clients have children (79/157), but only a fraction of these of these parents enjoyed access to their children when they began the program. Results of a 2010-2011

resource allocation analysis conducted for the Department of Justice found that only 12% of parents were in contact with their children upon entry into the program. Relationship supports are minimal for most DTCO clients; though 34.4% (54/157) of clients are in romantic relationships at admission, 66.7% (36/54) of their partners are substance abusers themselves. Indeed many clients 86.6% (123/142) report that the majority of the people they associate with have substance abuse issues and further, 79.4% (112/141) of clients reported that the majority of people they associate with, prior to entry into the program, are involved in criminal activities. These peer influences can act as a deterrent to recovery as many clients experience feelings of isolation while they distance themselves from their old relationships in order to maintain new healthy behaviours.

The mental and emotional health of individuals upon entry to DTCO was quite poor, 12.3% (19/154) of clients self-reported that they had been hospitalized at some point in their lives due to the severity of their psychiatric issues. 55% (88/160) of clients reported having been diagnosed with a psychiatric condition, and 61% (54/88) of those with diagnoses had multiple mental health disorders. The most frequent conditions were depression 33% (52/160), anxiety disorders 19% (31/160), and PTSD 18% (29/160). The severity of these issues was such that 20% (32/155) of our clients reported attempting to commit suicide at some point in their lives. 32% (52/160) of clients were seeing either a mental health worker (16% or 25/160) or a psychiatrist/psychologist (26% or 42/160). Unfortunately these numbers under-represent the mental health needs of our client population and many of our undiagnosed clients would

benefit from mental health services but have never undergone any form of psychiatric assessment.

Table 3: Diagnosed Mental Health Conditions Prior to Entry (April 1, 2008-March 31, 2014)

Condition	# of Clients with Condition (n=160)⁵	% Of Clients With Condition
Depression	52	33%
Anxiety disorder	31	19%
Post-Traumatic Stress Disorder	29	18%
ADHD	26	16%
Other ⁶	23	15%
Bi-Polar	13	8%
Panic Attacks	8	5%

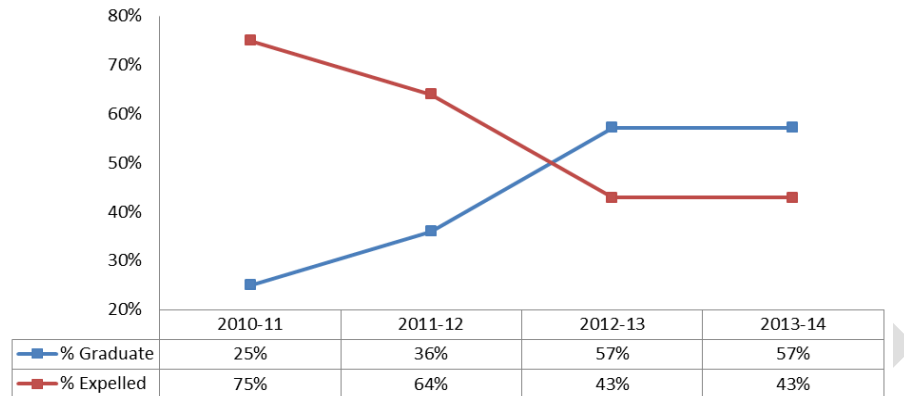
DTCO clients were released from DTC for a variety of different reasons. When analyzing the graduation rates of clients in our program, clients were assessed by the fiscal year they entered the program in and not by their exit date. This is primarily because a client needs to be in the program for at least 9 months to be eligible to graduate and thus most clients who graduate will do so in a different fiscal year than they began in. For clients who applied for the program between April 1, 2010 and March 31, 2014 and who were admitted following their 30 day assessment period, on average 47.3% graduated (44/91), and 52.7% (47/91) were expelled (one

⁵ 51 clients had no identified mental health disorders, 88 had been diagnosed with a mental health disorder and 21 clients didn't respond to the question.

⁶ The "other" category consisted of clients who did not identify their diagnosis, personality disorders, post-partum depression, agoraphobia and fetal alcohol syndrome.

additional client is currently still active in May 2015). Illustration of the graduation and expulsion rates each year can be seen below in Figure 1.

Figure 1: Change in DTCO Graduation and Expulsion Rates through Fiscal Years 2010-2014



To be considered fully admitted into the DTCO program, applicants must pass a 30 day treatment window during which they have the option of withdrawing from the program, having their guilty plea struck from their record and proceeding with the court system. When looking at all accepted applicants, not just those that were admitted into the program after 30 days, the average graduation rate becomes 36.9% (41/111) and 63.1% (70/111) expelled. Only 41.0% (112/273) of all applicants were accepted by the court team as eligible for the DTCO program.

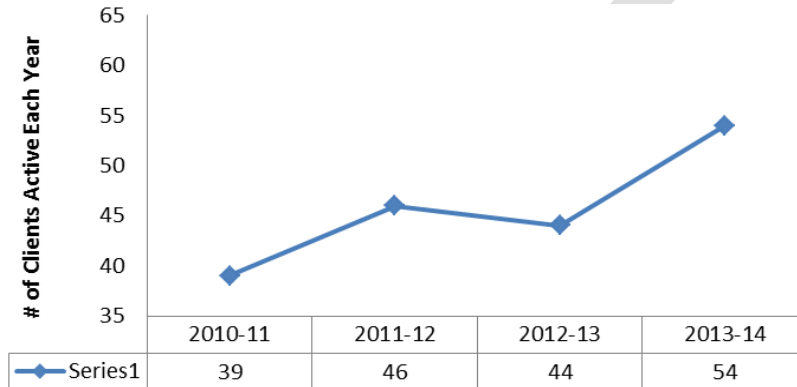
Table 4: Reasons for Discharge from the DTCO April 1, 2010 – March 31, 2014

Fiscal Year	# of Applicants	# of Accepted Applicants	# of Clients Admitted After 30 Days in Tx	# of Graduates	# of Currently Active Clients	Expelled After 30 Days
April 10-March 11	63	22	16	4	0	12
April 11-March 12	73	32	25	9	0	16
April 12-March 13	58	24	21	12	0	9
April 13-March 14	79	34	29	16	1	12
Total	273	112	91	41	1	49

In addition to the improvements in graduation rates observed between April 1, 2010 and March 31, 2014 the DTCO has also increased the number of clients being served throughout the year.

Figure 2 illustrates the increases in the numbers of clients being served each year.

Figure 2: Changes in the Number of Clients Served Each Year (2010-2014)



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Key Features of the Ottawa DTC

As reflected above, DTCO clients are high-needs, marginalized individuals. DTCO applies an Assertive Community Reinforcement Approach (ACRA) to treatment. This approach requires our counsellors to undertake extensive case management activities, particularly after initial release from custody. DTCO counsellors routinely drive and accompany clients to external appointments, interviews, assessments, etc.

All DTCO counsellors receive criminogenic training. DTCO programming is designed to focus on criminal thinking/behaviour, addiction and the relationship between them. During the first 4 months (or more) of treatment, DTCO clients attend programming at the treatment centre for approximately 6 hours per day, five days a week. DTCO clients also attend residential treatment programs as required.

Through a partnership with the John Howard Society, clients attend an employment and education readiness program that facilitates their access to education upgrading programs offered on-site at the John Howard Society or a local community college. This program supports progress to Phase II of DTCO, where clients attend work or school daily.

Ottawa DTC provides supervised transitional housing that includes private bachelor apartment units, a service offered in partnership with the John Howard Society and the Elizabeth Fry Society. These partners were specifically chosen because of their experience and expertise in the rehabilitation of offenders.

Ottawa DTC has an onsite community kitchen and has developed a partnership with the Ottawa Food Bank to supplement our own budget, providing clients with two meals per day. A

partnership with the City of Ottawa includes not only life skills coaching, designed specifically for our unique population, but also includes a weekly cooking class that permits clients to prepare and take home several meals for the week.

Through a partnership with the Somerset West Community Health Centre (SWCHC), a Nurse Practitioner attends the treatment centre each week to attend to the many acute health needs of our participants. DTCO participants also visit physicians at the SWCHC clinic to ensure a continuity of care. This unique relationship also permits us to maintain a stringent urine drug testing program with twice weekly sample collection witnessed by nursing staff and laboratory specimen analysis paid for by the Provincial government.