African American Participants’ Views on Racial Disparities in Drug Court Outcomes

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This qualitative study with 14 African American participants of a Texas drug court explored the factors that might contribute to racial disparities in drug court outcomes. The findings suggest that the factors that might contribute to racial disparities in outcomes include African American participants’ (a) beliefs that drug court sanctions were not implemented in a culturally sensitive manner; (b) dissatisfaction with being mandated to attend Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) meetings; (c) perceptions that they were not offered enough resources to gain and maintain employment; (d) views that they were not receiving individualized treatment; and (e) beliefs that they can relate better to other African American clients and staff members. Implications for policy advocacy, future research, and social work practice are discussed.

KEYWORDS  African American, drug court, forensic social work, program evaluation, qualitative research, racial disparities

Drug courts were developed to address the increasing number of criminal arrests associated with substance abuse by offering treatment as an alternative to incarceration for those with a history of substance abuse. The drug court model promotes a nonadversarial, strengths-based approach to reducing criminal recidivism, a view that fits well within the philosophy of social work. Unfortunately, it is important for social workers to note that equal outcomes do not exist among different ethnic and racial groups in some of
the drug courts. This article discusses the development and nature of drug courts, provides a review of the literature related to racial disparities in drug court outcomes, presents the findings from a qualitative study that explored the factors that might contribute to racial disparities in drug court outcomes, and discusses implications for social policy advocacy, future social science research, and social work practice.

UNDERSTANDING DRUG COURTS

The first drug court began in 1989 in Dade County (Miami), Florida, in response to the proliferation of criminal arrests associated with substance abuse. There are currently 2,663 drug courts and 1,219 other specialized problem-solving courts operating throughout the United States and U.S. territories (National Association of Drug Court Professionals, 2013). Over the past decade, the drug court model has evolved from providing services to an arrestee population with a history of substance abuse to more specialized courts such as juvenile drug courts, family drug courts, mental health drug courts, and veteran drug courts. All of the different types of specialized courts operate under the same philosophy of the original drug court model; however, they focus primarily on other issues, such as mental health symptoms or family issues, as compared to substance abuse.

The overall goal of drug courts is to reduce criminal recidivism. Drug courts offer a unique judicial process that differs greatly from the traditional court model. Drug courts are designed to treat and supervise nonviolent, criminal offenders who have a history of substance abuse. The treatment and supervision is offered while the participants reside in the community. A multidisciplinary judicial team uses a nonadversarial approach, as compared to a punitive approach, to monitor participants’ progress throughout the program. The drug court team typically consists of the judge, program manager, case managers, defense attorneys, district attorneys, probation officers, sheriffs, and substance abuse treatment providers. Based on the availability within each jurisdiction, drug courts can offer a range of services, including substance abuse and mental health treatment, educational and vocational training, parenting and financial management classes, and HIV/AIDS education.

RACIAL DISPARITIES IN DRUG COURT OUTCOMES

The drug court literature has suggested that drug courts are effective at reducing criminal recidivism; however, drug courts do not appear to be equally as effective across the various racial groups they serve. Specifically, studies suggest that White drug court participants are more likely than Hispanics and
African Americans to have successful outcomes related to graduation and avoiding recidivation (Brewster, 2001; Dannerbeck, Harris, Sundet, & Lloyd, 2006; Gray & Saum, 2005; Hartley & Phillips, 2001; Krebs, Lindquist, Koets, & Lattimore, 2007; Listwan, Sundt, Holsinger, & Latessa, 2003; Sechrest & Shicor, 2001; Taxman & Bouffard, 2005). Dannerbeck et al. (2006), for example, found that 55% of White but only 28% of African American drug court participants graduated from the program. In a California drug court, Sechrest and Shicor (2001) found that, whereas 68.9% of White drug court participants graduated, only 42.1% of Hispanic and 31.6% of African American drug court participants graduated. Although there is a growing body of literature that suggests that racial disparities exist in drug court outcomes, it is important to mention that these findings are not universal. Hohman (2000), for example, found that race was not a statistically significant predictor of drug court success. Furthermore, the evaluation of the Jefferson County, Kentucky drug court program found that African American drug court participants were more likely to graduate from the program than White participants (Vito & Tewksbury, 1998).

The literature has suggested that drug of choice might be a factor that contributes to minority participants being less likely than White participants to have successful drug court outcomes. African Americans might be more likely than other ethnic or racial groups to use cocaine, including crack cocaine, and several studies have found that drug court participants who reported cocaine as their drug of choice were less likely to complete the program as compared to participants who identified other drugs of choice (Brewster, 2001; Dannerbeck et al., 2006; Hartley & Phillips, 2001; Hickert, Boyle, & Tollefson, 2009; Mullany & Peat, 2008; Taxman & Bouffard, 2005). Brewster (2001) mentioned that African Americans might have been less successful in the Chester County, Pennsylvania, drug court because African American drug court participants were more likely than Whites to identify cocaine as their drug of choice (47% vs. 23%). Additionally, Dannerbeck et al. (2006) found that the odds of graduating the drug court program were significantly reduced for participants who were African American and identified cocaine as their drug of choice.

Moreover, Bouffard and Taxman (2004) and Taxman and Bouffard (2005) suggested that drug court participants were not always receiving substance abuse treatments that were consistent with evidence-based practices. For example, despite the evidence that cognitive behavioral interventions are effective at reducing drug use with drug court participants (McLellan, 2008), Taxman and Bouffard (2005) found that only one of the four substance abuse treatment providers they evaluated offered a formalized treatment curriculum that included cognitive behavioral therapy. Perhaps a lack of quality treatment could be another factor that contributes to racial disparities in drug court outcomes. Recent research has noted that when evidence-based interventions, such as motivational interviewing and motivational incentives,
were offered to African Americans whose drug of choice was crack cocaine, two thirds of the patients experienced a reduction or elimination of drug use (Pulliam, 2012). Also, Sanders and Powell (2012) offered suggestions to improve the quality of substance abuse treatment offered to African Americans. African Americans, for example, might be more likely than other ethnic groups to involve their church in the recovery process, and it would be advantageous for clinicians to incorporate church-based drug ministries into the treatment process, or perhaps a patient’s minister or other religious leader (Sanders & Powell, 2012).

The drug court literature consists primarily of program evaluations using quantitative methods to predict graduation and recidivism outcomes. Studies using qualitative methods to evaluate drug courts are less common, and no studies were located that used qualitative methods to explore the factors that might contribute to racial disparities in drug court outcomes. Quantitative methods have documented the problem of racial disparities in outcomes, and the use of qualitative methods might help move the literature forward by “uncovering” the factors that influence drug court outcomes. The benefits of qualitative research are not fully seen in the drug court literature. Padgett (2008) recommended collecting qualitative data during program evaluations because this method provides a comprehensive understanding of the phenomena being studied. Padgett stated, “Relying solely on quantitative methods risks losing an understanding of what is happening below the surface. It also places enormous trust in quantitative measures of sensitive, fluctuating, and elusive phenomena” (p. 41). This article contributes to the drug court literature by using qualitative research methods to explore the factors that might contribute to racial disparities in drug court outcomes.

This study has one research question: How do African American participants in the D.I.R.E.C.T. drug court program view this program in what they regard as the most helpful aspects of the program, the challenges they face in participating in the program, and how the program can be improved?

THE D.I.R.E.C.T. PROGRAM

The Drug Impact Rehabilitation Enhanced Comprehensive Treatment (D.I.R.E.C.T.) program is an adult drug court located in Fort Worth, Texas. The drug court has been operating since 1994. The Commissioners Court of Tarrant County, Texas, approved the creation of the drug court as a way to provide an alternative to incarceration for nonviolent criminal offenders who have a history of substance abuse. The mission of the drug court is “to impact the drug offender’s cycle of substance abuse and criminal behavior by providing a comprehensive program that provides a continuum of treatment, rehabilitative programs, and sanctions in a manner that will induce a substance-free lifestyle and reduce recidivism.”
The D.I.R.E.C.T. program provides services to males and females, 17 years of age and older, who have been arrested for a misdemeanor or felony that is related to substance abuse. Once an individual is arrested, he or she can apply for the drug court. The most common criminal offense transferred into the drug court is possession of a controlled substance. To a lesser extent, the drug court also accepts criminal cases related to theft and fraud when there is evidence that the criminal violation was associated with substance abuse. The majority of participants are on pretrial release, which is a criminal justice program that allows participants to reside in the community while their pending criminal case is being processed. Once a participant graduates from the D.I.R.E.C.T. program, his or her criminal case is dismissed. The length of the program ranges from 6 to 24 months based on whether the criminal offense is a misdemeanor or felony and a participant’s progress on meeting his or her individualized goals.

METHOD

Qualitative Research Design and Sampling

This study used the method of individual interviews to collect qualitative data from African American participants who were currently enrolled in the D.I.R.E.C.T. program. The research commenced with approval from the University of Texas at Arlington’s Institutional Review Board. Prior to participation in any phase of the research, all potential research participants were informed that participation in the research was voluntary and they could withdraw at any time. It was also emphasized that failure to participate in the research would have no adverse consequence on their participation in the D.I.R.E.C.T. program. Written informed consent was received from all research participants. Social desirability bias was controlled for by collecting the qualitative data through individual interviews as compared to focus groups.

Based on the most recent evaluation of the D.I.R.E.C.T. program (Hoefer & Woody, 2009) indicating that African American participants graduated the program less frequently than other ethnic and racial groups, a goal of this study was to collect data on the views held by African Americans. Specifically, Hoefer and Woody (2009) found that 68% of White participants and 69% of Hispanic participants graduated the program, whereas the graduation rate for African American participants was only 33%. Furthermore, African Americans were more likely to recidivate than White and Hispanic participants, as termination from the D.I.R.E.C.T. program emerged as a significant predictor of recidivating (Hoefer & Woody, 2009). All current participants of the D.I.R.E.C.T. program who identified themselves as African American and met the other inclusion criteria, which included the ability to understand and speak English and being in the D.I.R.E.C.T. program for a
TABLE 1 Individual Interview Questions

1. What aspects of the D.I.R.E.C.T. program are most helpful to you?
2. How can the D.I.R.E.C.T. program be more helpful to you?
3. What challenges are you facing to participating in the D.I.R.E.C.T. program?
4. How could the D.I.R.E.C.T. program be improved?

minimum of 30 days, were invited for an individual interview. The rationale for being in the program for at least 30 days was based on the fact that answering the individual interview questions required some knowledge of the D.I.R.E.C.T. program, such as the use of random drug screens, attendance at 12-step meetings, and participation in drug court sessions.

Research participants were recruited when they reported to the D.I.R.E.C.T. program’s office for their scheduled case management sessions. The collection of qualitative data continued until the researcher had attempted to recruit all D.I.R.E.C.T. participants who met the inclusion criteria. During the individual interviews, the researcher took notes on participants’ responses to the four open-ended questions noted in Table 1. The participants were asked four broad questions related to drug court effectiveness, and probing questions were used to encourage specific examples, especially when the responses related to racial disparities in outcomes.

Qualitative Data Analysis Plan
The qualitative data analysis involved a combination of phenomenological and grounded theory perspectives. The goal of phenomenological analysis is to capture the lived experiences of participants, with an understanding that the sharing of lived experiences can provide in-depth answers to the research question (Padgett, 2008). Furthermore, phenomenological analysis allows for data to be collected not only on participants’ experiences, but also the environments of the experiences (Padgett, 2008). Grounded theory is an inductive approach to understanding a phenomenon (Rubin & Babbie, 2008). Characteristics common to grounded theory include (a) beginning with data collection as compared to a theory or hypothesis; (b) collection of data in the participants’ natural setting; (c) using open-ended questions and promoting rapport building; and (d) data are continuously compared to confirm, enhance, or modify findings (Rubin & Babbie, 2008).

D.I.R.E.C.T. program restrictions prevented the researcher from audio recording the individual interviews; therefore, the data that were analyzed were the notes the researcher took during the individual interviews. The data analysis followed a four-step process, as suggested by Padgett (2008) and Rubin and Babbie (2008). First, the analysis began with open coding to identify the key points conveyed by the research participants. Second, axial coding procedures were used to group data, identify codes, and develop a
conceptual framework for the findings. Third, the codes were displayed on a matrix, and codes with similar data were grouped as themes. Throughout the coding process, memo writing was used to document the meaning of codes, note theoretical thoughts about the data, and assist with the overall organization of the data (Padgett, 2008; Rubin & Babbie, 2008). Fourth, direct quotes from the research participants were used to conceptualize the themes.

During the process of data collection and analysis, several strategies were used to increase the rigor of the qualitative findings. These included triangulation, member checking, and peer debriefing. Triangulation was obtained by analyzing the data through two theoretical perspectives: grounded theory and phenomenological analysis. The analysis began with grounded theory to develop a general, inductive understanding of the data. From this analysis, several codes emerged from the data. The data were then analyzed through a phenomenological perspective to identify codes that were focused specifically on the lived experiences of African American drug court participants. The codes from the grounded theory and phenomenological analyses were cross-checked, and consistent codes were grouped together and identified as themes. Member checking is the process of going back to research participants to verify the preliminary findings (Padgett, 2008). Because D.I.R.E.C.T. participants are in the program for up to 24 months, it was possible for the researcher to “member check” participants who were still in the program. Research participants who were selected for member checking were recruited in the same manner as they were for the individual interviews. Last, because facilitating qualitative research can impact the cognitive and emotional health of the researcher, peer debriefing is recommended to assist the researcher in processing his or her experiences with the research (Padgett, 2008). The peer debriefing technique used in this study was frequent consultation with colleagues who have expertise in qualitative research.

FINDINGS

The individual interviews commenced on September 9, 2011 and were completed on November 3, 2011. The response rate was 100.00%; 14 D.I.R.E.C.T. participants met the inclusion criteria and all 14 volunteered to participate in an individual interview. The length of each individual interview ranged from approximately 20 to 65 min. Member checking was used during the data analysis process to confirm the responses given by research participants and to verify the preliminary themes that emerged from the data. Four (28.57%) of the 14 research participants were recruited for member checking and all four participated in the process. The member checking sessions ranged from approximately 5 to 15 min.
Qualitative Findings

The qualitative analysis resulted in several major themes being extracted from the data. The themes that emerged from the data are presented in reference to each question asked of the participants.

**WHAT ASPECTS OF THE D.I.R.E.C.T. PROGRAM ARE MOST HELPFUL TO YOU?**

Two major themes emerged in the individual interviews with the participants: supportive drug court team and random drug testing system.

**Supportive drug court team.** The participants felt that the drug court team was supportive of them throughout the program and wanted to see them graduate and do well. One participant discussed his initial ambivalence about the program and how his view of the program changed once he noticed that the drug court team wanted to support him. The participant stated, “Everything you ask of us is reasonable. At first I didn’t do well because I thought you were against me, but now I know you’re here to help me. Everything benefits you if you want to do it.” The participants felt that every member of the drug court team was supportive, as indicated by one participant sharing, “The whole staff is supportive and caring, from the receptionist, to the case managers, to even the UA tech.” Although the entire drug court team was viewed as supportive, the drug court judge and case managers were most frequently noted as being helpful. A participant commented, “My case manager works with me, she does not give up on me when I mess up. The Judge is always telling me I can be a better man.” Another participant shared:

One day I was mad about something and my case manager looked at me and I could tell she cared, it was real, it was beyond doing her job. I forget what I was on sanctions for, but she cared, nothing counterfeit about it. It’s not always business, she’s real with me.

Last, a participant discussed his experiences with the drug court judge:

I see the judge weekly. At first it wasn’t helpful because I was being stubborn and thought I was being picked on, but it made me realize that I didn’t want to go to jail and that the judge cared about me.

**Random drug testing system.** The participants viewed the random drug testing system as the most significant deterrence to using drugs or alcohol while in the D.I.R.E.C.T. program. A newer participant who had been in the program for a little more than 30 days stated:

The drug testing is the most helpful aspect of the program; it keeps you on your toes. I haven’t been clean and sober for 2 years and now I am,
so the drug testing works. You’ll find ways to beat the drug testing if you have set days, the random system works.

Another participant, who had been in the program for approximately 11 months, shared, “Reporting two times a week and not knowing when you are going to drug test stops me from using. If I have an urge, I still don’t use because I know I may get picked for a drug test.” Finally, a participant commented on the importance of sending all drug tests to the lab, as compared to the drug tests that are completed at the D.I.R.E.C.T. office.

Some people don’t get their drug tests sent to the lab, all drug tests should go to the lab... randomly lab a drug test once a week, the in-house drug tests are easy to beat but I fear the lab.

HOW CAN THE D.I.R.E.C.T. PROGRAM BE MORE HELPFUL TO YOU?

Two major themes emerged in the individual interviews with the participants: individualized treatment and resources for employment.

Individualized treatment. Some of the participants felt that the program could be more helpful to them by getting to know them and their histories in more detail, and tailoring program requirements to their individualized needs. A 42-year-old man who was in the program for 35 days stated:

I wish the program saw participants as individuals and did not lump everyone’s background together. There are some ways to motivate individuals and other ways to not motivate individuals. The case managers need more discretion; they need “wiggle room” to develop case plans more specific to the client.

A 21-year-old male participant shared, “Sometimes I violate, but I think the staff could hear what was going on in my life before they give me a sanction.”

Finally, a participant shared:

Don’t judge people right away. Be a little more sensitive to people’s stories. So many people lie to you but sometimes you got to give people the benefit of the doubt. Work with people a little bit more. Be open to believe someone before you doubt them. I want to share my story, but you are not always open.

Resources for employment. The most common topic discussed in regard to how the program could be more helpful was related to employment. The participants felt that although the program requires employment, not enough resources are offered to assist them in finding and maintaining a job. One participant commented, “Don’t require AA [Alcoholics Anonymous] and NA
[Narcotics Anonymous] meetings, a job is more helpful than hearing about people’s drug problems. A job provides me structure.” Other participants shared that the program could be more helpful by helping them learn how to “manage a job and do all the requirements of the program” and by offering referrals to employers “that hire people with a felony arrest.”

What challenges are you facing to participating in the D.I.R.E.C.T. program?

Resiliency emerged as a major theme in the individual interviews with the participants.

Resiliency. When asked about the challenges they are facing to participating in the program, very few participants shared any challenges. For the few that did share a challenge, the most common was related to not having transportation to drug tests, drug court, and AA and NA meetings. Interestingly, when asked the question, nearly all of the participants took the opportunity to describe their own personal level of resiliency, as compared to identifying challenges they were experiencing. Additionally, the participants associated their motivation to do well in the program with persons in their life, such as parents, children, and significant others. One participant, for example, stated:

I make my own challenges and I refuse to make the program harder than it is. I want to be the first man in my family to achieve something. If I can’t be a police officer, I will do something else. I want to make my grandparents proud. I want to do something positive.

Another participant shared:

There are no challenges, you put yourself in this position, you are responsible for doing what is required of you. I live an hour-and-a-half away but I will ride my bike to do a UA (drug test). I am not going to jail. No matter what, I am going to do the program. I refuse to be in shackles, that’s embarrassing.

Participants also commonly responded to this question by self-disclosing a family history of substance abuse and then sharing how they were going to be successful in the program. A female participant disclosed:

My parents were not great role models; they were into drugs and guns. I grew up in the projects where there was nothing but drugs and guns; we slept on the ground at night because of gunfire. As Black people, we tend to adapt to our culture. I will not adapt. I will change for my children. I will rise above it. My kids are my motivation. I need to be a better person for them.
Another participant shared:

I am strong. I won’t get high. All I know is drugs. My uncle used crack, my mom used coke, my whole family smokes pot. I am strong. I won’t get high. I love my girl; she wants a man so I don’t want to run the streets anymore. Before my daddy died, he said he wants me to get my G.E.D. so I am going to get it.

Furthermore, a participant disclosed:

My mom had a heroin addiction. My father’s been to the penitentiary. I don’t think I’ve ever spent a day with my dad outside of jail. My mom took me to the penitentiary three times; that hurts as a kid. I’m the only male in my family who has not been to the penitentiary. Everyone in my family has gone to the penitentiary, but I am going to be different, I am going to complete the program.

It was common for participants to identify a person in their life that motivated them to be resilient, and for the following participant, the person was his case manager in the D.I.R.E.C.T. program. He stated:

Where I’m from, growing up without a mom or dad, I thought it would be a handicap for me, but I see others go through it so I knew I could do it. I didn’t have many friends or close people to me, but I know I can do it. My grandma raised me; it was tough but we made it. I wonder if my life would be different if my mom was here. Sometimes I use drugs because I get sad I had no parents. I view my case manager as my family now; it has blossomed into that.

Last, resiliency is also noted in the comment, “Where I grew up, in my neighborhood, no one does drug court. They just say put me in jail. I will be different. I will graduate.”

**How could the D.I.R.E.C.T. program be improved?**

Three major themes emerged in the individual interviews with the participants: dissatisfaction with AA and NA meetings, lack of representation of African American participants, and cultural insensitivity.

**Dissatisfaction with AA and NA meetings.** Of the many requirements that the D.I.R.E.C.T. program has, the majority of participants verbalized dissatisfaction with being mandated to attend AA and NA meetings. Most participants were dissatisfied because they felt they were not benefiting from these meetings, and others felt that the format of the meetings was not consistent with their culture. In regard to being dissatisfied with AA and NA meetings, a 21-year-old participant stated, “Three times a week is too much,
once a week would be better. I don't think I need them, I'm not an addict. I go because I have to go but I won't go after the program.” Another participant shared similar ideas: “If you look at yourself as an addict, AA and NA meetings are for you. I'm not an addict so those meetings don't work for me. I am not talking about my problems with people I don't know.”

In regard to AA and NA meetings not being consistent with their culture, a participant shared, “I don’t talk at all at meetings. My secrets are my secrets. We are guarded with our feelings, we don’t talk about things like family members dying or getting high around people you don’t know, it’s not cool.” Another participant disclosed, “I don’t share my business in front of people I don’t know. If you want to get to know me, talk to me on an individual level.” Furthermore, an 18-year-old male participant shared:

I go to meetings to go but I don’t need them. I need a support system but it won’t be with people I don’t know. My girlfriend and sister are my support system; they understand me and tell me to do the right thing.

One participant specifically expressed a conflict between AA and NA meetings and his culture. The participant stated:

In my culture, you don’t talk about your personal problems in public. At these AA and NA meetings these people are talking about how they were abused as a child and how they tried to kill themselves. I can’t relate. I have problems but I don’t share them there, I share them with my family.

Although a majority of participants expressed dissatisfaction with AA and NA meetings, it is important to mention that some participants viewed the meetings as positive. One participant shared, “Going to AA and NA meetings is helpful. When you find a home group you basically find a family, people that want to help you. It helps me give back and role model recovery.” Another participant offered mixed feelings, as he stated:

AA and NA meetings work because I need to be around people who are trying to do good. That’s better than being around people who are trying to get high. At times though, I don’t like the meetings because I am the youngest person there and sometimes I can’t relate.

Lack of representation of African Americans. Participants felt that the D.I.R.E.C.T. program could be improved by increasing the number of African American participants. One participant, for example, shared that he would like to develop friendships with other African American participants; however, the limited number of African American participants in the program has been a barrier to developing these relationships. The participant stated:
As a Black man, I want to do good and be a good man. It’s hard being a Black man in today’s society. I am the only Black dude at work and in my area. It’s tough; I would like to make friends with other Black kids in drug court but I don’t see too many of them.

Another participant shared that increasing the number of African American participants in the program would benefit him because he can relate to them better:

There are not many African Americans in the program. You need a bigger pool of African Americans because Black people help other Black people, sometimes we can relate better than other people who aren't Black.

Another participant discussed the lack of representation of African American staff, she stated, “You don’t have a lot of African American staff, until recently. Being Black we relate better to someone else of the same color.” Another participant shared, “Employ more Black people, seeing Black staff makes it easier to talk to. We hang around Black people so we like to see Black people.”

Possible explanations were discussed for why African Americans are underrepresented in the program. A participant stated, “When I was in jail, many African Americans were there hearing about the program and saying they don’t want it because it’s too hard. A lot of Black kids I know want the easy way out, like deferred adjudication.” Another participant shared a similar thought: “In my neighborhood no one does drug court, they just say put me in jail.”

The underrepresentation of African Americans seems to be noticed primarily when participants are in court. One participant, based on his experiences in court, suggested a mentoring program for African American participants. The rationale for the mentoring program is highlighted in his comment:

When I walk into court, all I see is White people and a few Hispanics. I like to see other Black people. Black people like to see other Black people. I sometimes talk with the Black guys who are always on sanctions and I told them stop making excuses, do the fucking program. We like being and hearing from other Black people; have me be a mentor for the other Black kids. I know their culture, I know where they are from, I’ve been there. Have a one-on-one. I understand, I know their language, I’ve been there, I understand what they’re saying.

Last, D.I.R.E.C.T. participants are invited to have their family members attend court. One participant shared his observation of the underrepresentation of African American family members in court: “All family members in court are White or Hispanic. I never see Black family members in court.”
Cultural insensitivity. Participants were dissatisfied with how sanctions were handled in court. Specifically, they felt that African American participants were treated differently when they were on sanctions in court, as compared to Caucasian and Hispanic participants. Interestingly, participants discussed that when African American participants were on sanctions, it was common in court for the audience and drug court staff to laugh:

It’s like because I’m the Black kid I am supposed to be in trouble. When I go in front of the judge, the people, even staff, laugh. I am standing there pissed off because I am trying to change but I get no support from the people that are supposed to help me. I don’t feel part of the program when they laugh.

Another participant, who was in the program for only 33 days, stated, “When you laugh at the Black kids in front of the judge, they get mad and say to themselves, ‘Fuck you, I am going out and getting high.’” A female participant shared her experiences, discussing that she observed laughter in court following a young African American male reporting that he had used drugs since a young age. She stated:

The laughter in court was disrespectful, it needs to change. I remember the time they laughed at that one young Black guy. They laughed at the one guy because he had been using drugs since 12 years old; that humiliated him. The court needs to be serious, it’s disrespectful to laugh.

Last, a 21-year-old male participant shared an experience when he was on sanctions and people in the court laughed at him:

They take everyone else’s problems serious but they laugh when I go up there (on sanctions). I get defensive when they laugh; it’s hard to say what you want to say, I’d rather say nothing. We have a Black judge, but at the same time, when we go up there, when Black people go up to see the judge, they seem to laugh. It’s like funny when the person is in front of the judge. I feel like we don’t get that respect. The case manager doesn’t stick up for us. It’s like we’re being judged on not as well as we’re doing, but as bad as we’re doing.

DISCUSSION

Based on the qualitative findings, factors that might contribute to racial disparities in D.I.R.E.C.T. program graduation rates include African American participants’ (a) beliefs that drug court sanctions were not implemented in a culturally sensitive manner; (b) dissatisfaction with being mandated to attend
African American Participants and Drug Court Outcomes

AA and NA meetings, and belief that the format of AA and NA is not consistent with their culture; (c) perceptions that they were not offered enough resources to gain and maintain employment; (d) views that they were not receiving individualized treatment; and (e) beliefs that they can relate better to individuals from their same ethnicity; however, they did not have ample opportunities to develop these relationships because African Americans are underrepresented in the D.I.R.E.C.T. program.

The D.I.R.E.C.T. program manager confirmed that African Americans are underrepresented in the drug court, as indicated by African Americans representing almost 40% of the Tarrant County, Texas, jail population, but only 10% of the drug court population (C. Velazquez, personal communication, June 2, 2011). A possible explanation found for why African Americans are underrepresented in the D.I.R.E.C.T. program is that African Americans might be more likely to accept deferred adjudication or jail as compared to drug court. This explanation is consistent with the findings from an Orange County, California, drug court where minority participants were more likely than nonminority participants to view prison as a less severe outcome than criminal justice programs like drug court (Cresswell & Deschenes, 2001). Prison might not be as taboo in the African American culture as it is for others. Additionally, the likelihood that drug courts are more expensive than incarceration could also deter many African Americans from pursuing drug courts. Cresswell and Deschenes (2001) stated, “It is possible that minority participants do not fear the temporary loss of freedom but are threatened by the costs and consequences of drug treatment” (p. 277).

The most unexpected topic to emerge from this study is the theme of cultural insensitivity. Cultural insensitivity is conceptualized as African American participants reporting that they were treated differently than White and Hispanic participants in court when on sanctions. The differential treatment was described as the drug court team and court audience laughing at African American participants when they were in court and discussing their sanction. This finding should not be ignored. It is important that the D.I.R.E.C.T. program implement an ongoing evaluation of this issue to assess whether the cases of laughter in court were isolated events or an ongoing problem.

African Americans might be more likely than other ethnic or racial groups to use cocaine, including crack cocaine, and previous research has suggested that the use of cocaine decreases the likelihood of successful drug court outcomes (Brewster, 2001; Dannerbeck et al., 2006; Hartley & Phillips, 2001; Hickert et al., 2009; Mullany & Peat, 2008; Taxman & Bouffard, 2005). In this study, no themes emerged from the data related to drug of choice, perhaps because the participants were not asked questions specific to drug of choice. Future qualitative research might want to explore drug court participants’ perceptions of the impact that drug of choice has on outcomes. Consistent with previous research (Bouffard & Taxman, 2004; Taxman &
Bouffard, 2005), findings from this study suggest that racial disparities might exist in drug court outcomes because participants might not be receiving evidence-based treatment, or, as described by African American participants in this study, treatment that is individualized and consistent with their culture. Last, the findings from this study are surprising, similar to those of the Wolfer (2006) qualitative study, where drug court graduates where asked about the strengths and weaknesses of a Pennsylvania drug court program. In both studies, participants shared that the random drug testing system was one of the most helpful aspects of the program. In the Pennsylvania drug court, differential treatment by team members when sanctions were imposed was viewed as a program weakness (Wolfer, 2006). Although this study did not find the types of sanctions imposed to be viewed as unfair or inconsistent, research participants did feel that African American participants were treated unfairly and not taken seriously when they were on sanctions, as indicated by laughter in the courtroom when the sanction was being discussed.

Study Limitations

The five findings identified as possible factors that might contribute to racial disparities in D.I.R.E.C.T. program graduation rates need to be interpreted with caution. These findings are limited to the views held by 14 African American participants, and the method of this research prevents the qualitative findings from being generalized beyond the research sample. Because the topic of racial disparities has not been explored previously through qualitative methods, only additional research will assist in developing a more comprehensive understanding of this phenomenon. Also, additional research will be helpful in identifying whether other drug courts experience similar problems shared by the participants in this study.

An inclusion criterion for participation in the research is that participants must have been in the D.I.R.E.C.T. program for a minimum of 30 days. A limitation with this inclusion criterion is that data were not collected from D.I.R.E.C.T. participants who were new to the program. Drug court participants who are new to the program might offer a unique perspective on their initial views of drug court. Perhaps the first 30 days in drug court is a critical time frame during which participants begin to formulate their views toward the program, and these views could impact their ongoing participation and motivation in the program. Furthermore, the views of African American participants who were terminated from drug court within the first 30 days were not collected in this study. Participants who were terminated within the first month of the drug court might have been able to offer insight into the immediate challenges they faced to completing the program.

Another limitation is that the individual interviews were facilitated with current participants of the D.I.R.E.C.T. program, and these participants might have been more likely to answer the questions in a manner that would be
viewed favorably by others. Social desirability bias was controlled for by informing participants prior to the individual interviews that participation in the research was voluntary and confidential, and failure to participate would have no adverse consequence on their participation in the D.I.R.E.C.T. program. This research also attempted to minimize the risk for social desirability bias by collecting the qualitative data through individual interviews as compared to focus groups. Research participants might have been more selective in what they chose to share in a focus group because they have had prior associations with the other members of the focus group, especially in regard to sensitive topics like racial disparities in drug court outcomes. Individual interviews eliminate this concern by providing a research environment where peers are not present. An additional rationale for the use of individual interviews is that this qualitative method has been used in other research to successfully explore and develop a thorough understanding of sensitive topics. Sallmann (2010), for example, used individual interviews to study the stigma associated with women who have a history of prostitution and substance abuse, and Rowntree (2010) interviewed survivors of sexual violence to learn about their understanding of sexual violence and its prevention.

Implications for Practice and Social Policy

A major contribution of this research is that qualitative methods were used successfully to explore the factors that might contribute to racial disparities in drug court outcomes. Through the use of individual interviews, African American participants were given a “voice” related to their experiences in drug court. The findings from this study offer a beginning knowledge base on why racial disparities might exist in graduation outcomes, findings that have implications for social work practice, policy, and research.

In this study, African American participants in the D.I.R.E.C.T. program felt that the drug court could be more helpful by referring them to employers that hire individuals with a felony arrest and by assisting them in managing employment with the demands of drug court. Previous research has suggested that employment is a significant predictor of successful drug court outcomes (Dannerbeck et al., 2006; Goldkamp, 1994; Hartley & Phillips, 2001; Logan, Williams, Leukefeld, & Minton, 2000; Mullany & Peat, 2008; Peters & Murrin, 2000). Based on these findings, it is recommended that social workers who work with drug courts familiarize themselves with resources within their community that promote employment. Drug courts operate with a multidisciplinary judicial team, which is designed to meet the many needs of participants. It would be advantageous to invite potential employers to become part of the multidisciplinary judicial team, as these employers might be more likely to assist participants in finding employment that does not conflict with the demands of drug court.
Furthermore, the majority of African American participants felt that they were not benefiting from being mandated to attend AA and NA meetings because the format of these meetings was not consistent with their culture. Individualizing referrals based on clients’ preferences might be an effective way to provide culturally appropriate services. Additionally, findings from this study suggest that racial disparities could exist in D.I.R.E.C.T. program outcomes because African Americans are underrepresented in the drug court. Drug courts, like the D.I.R.E.C.T. program, that have an underrepresentation of African Americans, might want to consider creating an alumni group in which former African American graduates could mentor current participants. An alumni group could be mutually beneficial to current participants and graduates. Current African American participants would be offered another avenue for support, and graduates could role model the behaviors that resulted in their completion of drug court.

The success of drug courts is being noticed by policymakers, and states are beginning to mandate drug courts throughout their counties. Texas, for example, has established a law that requires counties with a population of 200,000 to develop drug courts (Texas State Legislature, 2007). Despite the evidence that treatment engagement, motivation, and retention can be improved by providing culturally competent, evidence-based interventions (Beckerman & Fontana, 2002; Lutze & van Wormer, 2007), the Texas law does not discuss the cultural diversity of drug court participants or mandate the use of evidence-based interventions in the treatment of substance abuse (Gallagher, 2012). Advocacy for inclusion of such policies is needed. Assuring that drug courts are offering culturally competent, evidence-based interventions might result in equal graduation and recidivism outcomes among the different ethnicities that drug courts serve.

Implications for Future Research

Finigan (2009) recommended that studies move beyond documenting the problem of racial disparities in drug court outcomes, and begin to explore solutions to improve outcomes for minority participants. The major implication that this study has for social work research is that qualitative methods were successfully used to learn about African American participants’ views of the D.I.R.E.C.T. program. The qualitative findings provide insight into possible factors that might contribute to racial disparities in program outcomes, as well as solutions that might improve outcomes for minority participants.

Future research should collect qualitative data from other ethnic groups to learn about their perceptions of drug court effectiveness. For example, future qualitative research can explore satisfaction with AA and NA meetings among individuals from other ethnic groups and compare their views with those of African American participants in this study. Furthermore, this research only used individual interviews to collect qualitative data. Using
focus groups or direct observation in combination with individual interviews will allow for the interchange of ideas among research participants and a method to compare findings.

Additionally, this study collected qualitative data at a single point in time. It is recommended that future research collect qualitative data from participants at multiple points during their participation in drug court. This might provide additional data and themes, as well as a method to gain knowledge on how participants’ views toward drug court changes throughout the program. Learning about changes in participants’ views toward drug court effectiveness could offer insight into what interventions are needed during certain phases of the program.

REFERENCES


