

The Hon. Tina Nadeau Chief justice of NH's Superior Courts Talks about Drug Courts

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PORTSMOUTH — The Hon. Tina Nadeau, chief justice of the New Hampshire Superior Courts, began her talk about drug court Saturday morning with a quote from one of her favorite judges in Texas.

“He said, ‘We need to stop incarcerating the people that piss us off and incarcerate the people that scare us’,” she said. “I think that’s what we need to start doing here and there is an opportunity to do that with drug court.”

Nadeau was one of Saturday’s speakers during the second day of the New Hampshire Medical Society’s annual Scientific Conference titled, “The Many Faces of Addiction.” Society President Dr. Lukas Kolm brought experts to the three-day conference aimed at slowing the drug addiction epidemic gripping the state.

Nadeau presented the scenario of a 35-year-old woman addicted to heroin and cocaine, who had 56 convictions with 15 periods of incarceration. “Without drug court, a first-time offender has probably committed 100 crimes before he or she

got taken in for their first drug offense,” she said. “They are usually let out on probation and commit more crimes.”

A second offense would usually mean three months of incarceration, followed by probation. A third offense would mean 12 months of incarceration and a fourth offense would mean serving two to four years in state prison. “If jail time changed addicts’ behavior, the jails would be empty,” she said. “We cannot use jails as treatment centers.”

Nadeau said New Hampshire has the highest rate of addiction in the country and the lowest treatment rate. “Heroin rewires a person’s brain,” she said. “We need to treat them. Smoking is a risky choice, but we don’t close the hospital doors to people with lung cancer.”

She said the profiteers and dealers are the ones who belong in jail.

The drug court model means the state pays about \$8,000 a year for treatment as opposed to \$30,000 for incarceration. “How does drug court work?” Nadeau said. “First there is a team approach with the judge, prosecutor, treatment provider, defense attorney and law enforcement.”

Drug court is for high-risk and high-need addicts. The addict enters a plea and is obligated to appear in court weekly; be in treatment three hours a day for three days a week; attend daily self-help meetings and have random drug testing twice a week. In addition, the person reports regularly to probation and has random home visits. During later phases of the program, the person is required to get a job, a GED, pay restitution and finally graduate from the program.

“It works,” Nadeau said. “In Texas, drug courts opened in 2007. The state had paid \$2 billion for prison time as opposed to \$241 million on drug court.” She said, as a result, several prisons have closed and there was a 39 percent reduction in parole violations.

There are six drug courts in New Hampshire, but Nadeau said there should be 11, with a statewide coordinating office.

“Medicaid expansion has been good and all offenders qualify,” she said.

After Nadeau’s talk, Rep. Tom Sherman, D-Rye, told a packed room he was one of three medical voices in the state Legislature. “On Nov. 18, we are holding a special session,” he said. “We are compiling a package of reform that includes drug courts and asking that possession of fentanyl has the same penalties as heroin.”

Sherman said Medicaid expansion is crucial in implementing addiction programs. “It will go away the end of next year unless it’s reauthorized,” he said. “A large number of programs are on hold waiting to see if this happens.”

He said while the state Senate is on board with the Medicaid expansion, 70 to 80 Republicans in the House need to be convinced. “This is critical for our patients,” he said. “Talk with your representatives and senators. Your voice counts.”

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