

Criminal Justice Interventions for Drug-Involved Offenders



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Agenda



- Q: What can we do about the increasing numbers of drug-involved offenders?
- Scope of the problem
- Historical responses to drug-involved offenders
- Current approaches

Overview



- What We Know
 - Mass incarceration mostly of . . .
 - Drug-involved &/or mentally ill offenders
 - Historical responses to drug-involved offenders . . .
 - Have not worked
- Potential Solution
 - Diversion!
 - Drug courts
 - Pre-arrest diversion

Mass Incarceration



- Total Correctional Population
 - 2.3 million incarcerated
 - 5 million on probation/parole
- 3.1% of adults are under correctional supervision
- Individuals with drug problems &/or mental health problems are hugely over-represented

Scope of the Problem: Drug Use & Offending



- High rates of drug-involved criminal offenders
 - 80/40/20
 - Arrestees (67%), probationers (68%), parolees (80%), & juvenile arrestees (30%)
- Strong relationship between drug use & crime
 - 50+% of violent crimes
 - 66% of domestic violence
 - 60-80% of substantiated child abuse/neglect
 - 50-75% of theft/property offenses

Scope of the Problem: Drug Use & Offending



- Drug offenses & drug involvement
 - 51% of federal inmates & 18% of state inmates charged with drug offense
 - 40% of drug-involved offenders meet criteria for substance use disorder
 - < 33% participate in treatment while incarcerated

Scope of the Problem: Mental Illness & Offending



- **Prison Inmates**
 - 56% of state prisoners & 45% of federal prisoners have mental health disorders
 - 10% have serious mental health disorders
- **Jail Inmates**
 - 64% have mental health disorders
 - 16% have serious mental health disorders

Scope of the Problem: Mental Illness & Offending



- Largest mental health facilities in the U.S.
 - Riker's Island
 - Cook County Jail
 - Los Angeles County Jail
- Higher arrests
- More serious charges
- Longer sentences
- More infractions
- Higher rates of victimization

Mental Illness & Drug Use



- Drug Use: Risk factor for offending
- Mental Illness: Weak predictor of offending, with limited exceptions
- Drug Use + Mental Illness: Strong risk factor for offending

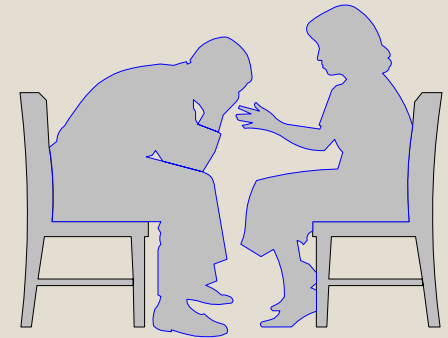
Historical Response



Public Safety
(Punishment)



Public Health
(Treatment)



Public Safety Model



What if we put them in prison?

- 85% relapse within 1 year of release
- 95% relapse within 3 years of release
- Within 3 years of release –
 - 68% re-arrested
 - 47% reconvicted
 - 44% return to prison

What if we treat them in prison?

- Small effect on criminal recidivism (10% point drop)
- No effect on drug use

Public Safety Model



What about intermediate sanctions?

- Slight Effect
 - Restitution
- No Effect
 - Boot Camp
 - House Arrest
- “Worse” Effect
 - Scared Straight
 - Intensive Supervised Probation

Public Health Model



What if we treat drug users?

Attrition

- 50-67% don't show for intake
- 40-80% drop out within 3 months
- 90% drop out within 12 months
- 70% of probationers & parolees drop out within 2-6 months

Effectiveness

- 50% of people who receive treatment remain abstinent 1 year after treatment

Summary thus far . . .



- Prison by itself doesn't work
- Treatment in prison doesn't last
- Intermediate sanctions don't work . . . & sometimes make things worse
- Treatment referrals don't take . . . & treatment produces mixed results

Integrated Public Health/Public Safety Model



Drug Courts



- Separate criminal court dockets
- Non-violent drug offenders
- Judicially supervised
 - drug treatment & case management
 - urine drug screens
 - judicial status hearings
 - sanctions & rewards
- Several months to 2 years
- Completion results in nolle prosequere
- Expunged arrest record

Drug Courts



- Nearly 3000 drug courts
- Exported: Australia, Bermuda, Brazil, Canada, Cayman Islands, England, Ireland, Jamaica, New Zealand, & Wales
- Other Problem-Solving Courts
 - Mental health courts
 - Family dependency treatment courts
 - Community courts
 - Domestic violence courts
 - Vets courts
 - DWI/DUI courts
 - Gun courts
 - Prostitute courts
- Therapeutic Jurisprudence

Do Drug Courts Work?



- Drug courts are the most effective intervention for drug-involved offenders in reducing drug use & recidivism
- 60% complete at least 1 year of treatment
- Drug courts reduce crime 45% more than other interventions
- 75% of graduates remain arrest free for at least 2 years after graduation
- Significant long-term reductions in crime
- Cost effective

Do Drug Courts Work?



- **Methamphetamine Users**
 - Increase treatment program graduation rates by nearly 80%
 - Quadruple length of abstinence
 - Reduce methamphetamine use by more than 50% compared to outpatient treatment

- **Family Drug Courts**
 - Parents are twice as likely to complete treatment
 - Children spend less time in out-of-home placements
 - Family re-unification rates are 50% higher

Do Drug Courts Work?



- **Juvenile Drug Courts**
 - Lower recidivism rate vs. standard probation
 - Lower rates of drug use & delinquency compared to juveniles in family court
 - Cost savings of \$1000 to \$5000 per juvenile over 2-yr period
- **Avoiding secure detention of low-risk juveniles is important**

Is it time for a paradigm shift?



- Some treatments work for some types of drug use for some individuals some of the time under some conditions

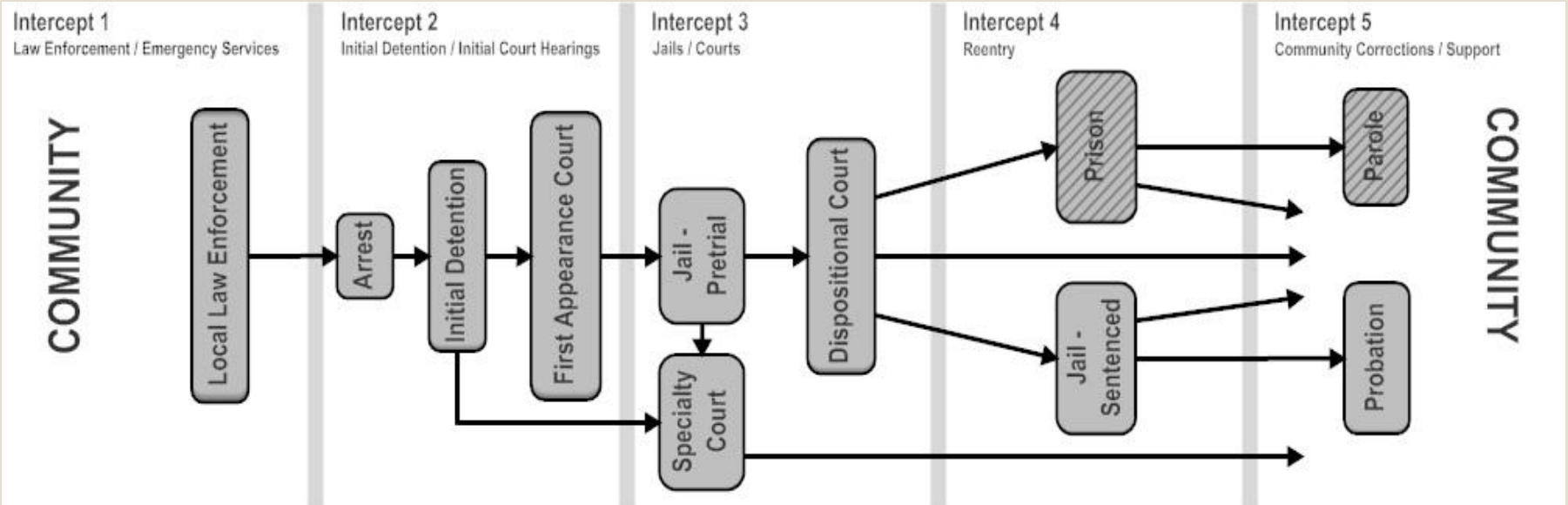
- Drug use is a chronic relapsing condition

Pre-arrest Diversion



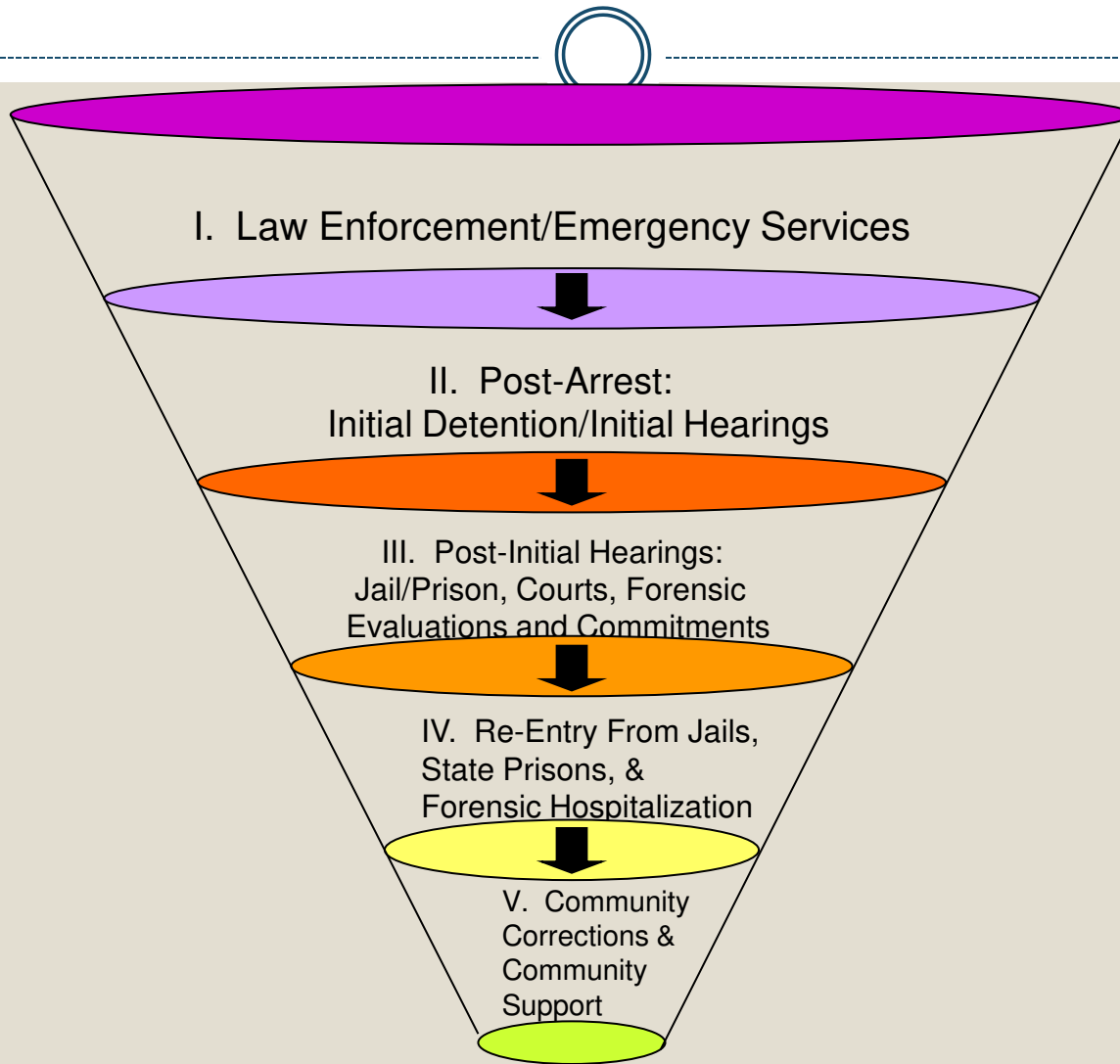
- Sequential Intercept Model (Griffin & Munetz, 2006)
 - Five points at which standard criminal justice process of arrest, conviction, & incarceration can be interrupted
 - (1) Pre-arrest: law enforcement & emergency services
 - (2) Post-arrest: initial detention or initial hearing & pre-trial services
 - (3) Post-initial hearings: jails/prisons, courts, forensic evaluations, & commitments
 - (4) Re-entry from jails, prisons, & forensic hospitals
 - (5) Community corrections/support

Sequential Intercept Model



The Sequential Intercept Model (National GAINS Center, 2009)

Sequential Intercept Model



Pre-arrest Diversion



- Ultimate intercept?
- Before someone enters the criminal justice system
- Offenses & offenders
 - Reduce offenses from misdemeanors to summary citations
 - Divert subsets of offenders into appropriate treatment
- Why do this?
 - Reduce jail/prison over-crowding
 - Less expensive
 - It works

Pre-arrest Diversion



Specialized Police Responding (Crisis Intervention Training [CIT])

- Train police officers & dispatchers on mental illness & drug use, community behavioral health services, & crisis intervention techniques
- Goals: decrease response times, provide better care to those in crisis, & increase police officer safety
- CIT officers report feeling better prepared to handle crises, use of less physical force in crisis situations, & more likely to divert individuals into treatment

PA Mental Health & Justice Center of Excellence



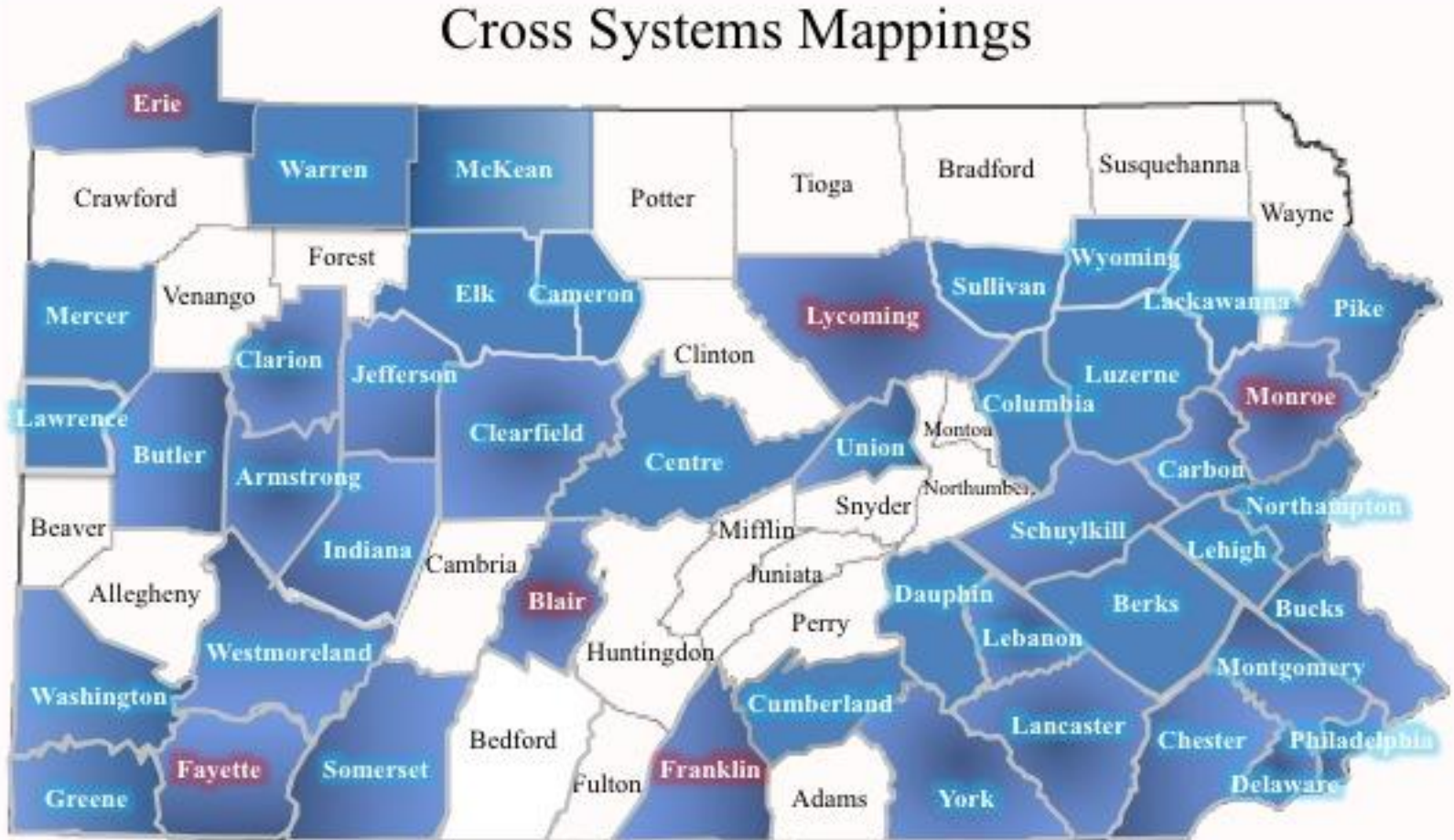
- Funded in 2009 by PA Commission on Crime & Delinquency & PA Office of Mental Health & Substance Abuse Services
- Drexel Dept. of Psychology & Univ. of Pittsburgh's Western Psychiatric Institute and Clinic
- Goal: reduce justice-involvement for people with mental illness &/or substance use disorders
- Prevent those with mental illness &/or substance use disorders from entering or penetrating deeper into criminal justice system

PA Mental Health & Justice Center of Excellence



- Intercept 1: specialized responding & crisis intervention
- Intercept 2: post-arrest diversion programs
- Intercept 3: problem-solving courts
- Intercept 4: community reentry
- Intercept 5: development of specialized probation/parole, housing initiatives, treatment opportunities, etc.
- Conducted cross-systems mapping in 45 PA counties

Cross Systems Mappings



Key:

Counties Mapped (45)

Follow-Up TA Mapping (6)

PA CoE: Cross-Systems Mappings



- Problem: Same people in multiple systems –
 - Mental health
 - Substance abuse
 - Criminal justice
 - Social services
- Expensive
- Potential Answer: Cross-systems coordination

Objective: Cross-Systems Collaboration



GOAL FOR SERVICES:

- A** ccessible
- C** omprehensive
- T** rauma-informed
- I** ntegrated
- O** ptions
- N** etworked

Mapping Goals



- Nurture cross-system collaboration
- Map the local system
- Inventory current resources, gaps, & opportunities
- Agree on priorities
- Build an action plan

Cross-Systems Mappings: Day 1



Creating a Local Cross-Systems Map (1.5-day process)

- ◆ Bring together key stakeholders from various systems
- ◆ Visually depict how people drug disorders or mental illness or both flow through criminal justice system
- ◆ Local map is created using Sequential Intercept Model
- ◆ Identify opportunities & resources for diverting people & linking them to treatment
- ◆ Summarize gaps in services

Cross-Systems Mappings: Day 1



- Examine process in specific locality to identify ways to intercept people with drug disorders &/or mental illness
 - Prompt access to treatment
 - Opportunities for diversion
 - Timely movement through criminal justice system
 - Linkage to community resources
- Priorities for Change
 - Provide examples of successful systems integration, promising programs, & emergent collaborations
 - Determine areas where immediate steps will promote cohesive & integrated approach to service delivery
 - Develop local set of priorities for change

Cross-Systems Mappings: Day 2



Facilitated Action Planning

- ◆ Half-day activity immediately following Cross-Systems Mapping Workshop
- ◆ Key stakeholders make specific plans for taking action
- ◆ Addresses identified gaps in service & priorities established during Day 1
- ◆ Address gaps through attainable, low-cost, prioritized action steps

Cross-Systems Mappings: Day 2



Local Action Plan

- ◆ Address local problems that are impeding criminal justice, diversion, & service delivery
- ◆ Review best practices that address the identified problems
- ◆ Establish action steps & identify staff to pursue next steps
→ accountability!

Cross-Systems Mappings



Final Report

- First cross-systems picture
- Wide distribution
- County-specific narrative for each of the 5 intercepts
- Describe gaps & opportunities
- Describe action plan & responsible parties
- Support for future funding applications → key is sustainability
- Reference/resource materials included

Summary



- High rates of drug-involved offenders
- Incarceration doesn't work & is expensive
- Diversion effectively reduces relapse & recidivism
- Diversion is cost-effective & does not put the community at any increased risk

Thank You!



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