

Federal Probation

Implementing Community Service: The Referral Process *Probation Division, Administrative Office of the United States Courts*

Strategies for Working With Special-Needs Probationers *Ellen C. Wertlieb
Martin A. Greenberg*

Do Correctional Industries Adversely Impact the Private Sector? *Robert C. Grieser*

of State Correctional Officials Crowding: Causes, Court Orders, and Solutions *Fred Holbert
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Orientation of Prison Guards: Support Rehabilitation? *Francis T. Cullen
Faith E. Lutze
Bruce G. Link
Nancy Travis Wolfe*

and Correctional Privatization: on the 19th Century Experience and for Modern Corrections *Alexis M. Durham III*

Alcoholics' Reformatory: An Example of Failed Institutional Reform *Beverly A. Smith*

Substance Abuse Program: A Private Court Probationers and Parolees *Giuseppe P. Vito*

and Juvenile Female Offenders *Helen R. Bergmann*

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This Issue in Brief

Implementing Community Service: The Referral Process.—A community service sentence can serve many purposes—to deter, punish, or rehabilitate, while at the same time assuring that an offender receives a publicly discernable penalty. With increased interest in community service, many questions and issues have arisen regarding its use. This article, an excerpt from the monograph, *Community Service: A Guide for Sentencing and Implementation*, concentrates on the practical aspects of operating a community service program. Among the issues addressed are how to select appropriate agencies to receive community service; how to prepare the offender for community service; how to follow up after the offender is placed with an organization; and how to evaluate the success of a community service program. The information is especially directed to Federal probation officers but will also serve as a guide for other criminal justice and corrections professionals involved in sentencing and sentence implementation.

Strategies for Working With Special-Needs Probationers.—Authors Ellen C. Wertlieb and Martin A. Greenberg discuss the results of a survey of what alternatives to incarceration probation officers use with their disabled clients. Findings indicate a great deal of disparity regarding the approaches used within and across probation jurisdictions. All probation officers agreed, however, that they needed additional training to better serve their special-needs clients. The article concludes with some suggested strategies for improving service-delivery to probationers with disabilities.

Do Correctional Industries Adversely Impact the Private Sector?—Correctional industries have been the subject of much attention and often unfavorable publicity over the past several years. Complaints have gotten stronger in recent months as prison industries nationally are seeking to expand to keep pace with rapidly rising prison populations. Author Robert C. Grieser responds to those com-

plaints by addressing some of the numerous myths about prison industries that exist on the part of many in the private sector. The author also suggests ways in which the private sector and prison industries can work together to the benefit of both.

The Perspective of State Correctional Officials on Prison Overcrowding: Causes, Court Orders, and Solutions.—Overcrowding continues to be a major problem facing prison administrators

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The Kentucky Substance Abuse Program: A Private Program to Treat Probationers and Parolees*

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Introduction

DURING THE 1980's, the war on crime has become the war on drugs (Inciardi, 1986; Wisotsky, 1986). Substance abuse is held responsible for the increase in the crime rate. Education, interdiction, and abstinence are offered as possible solutions to the drug problem while treatment is overlooked as a primary strategy. In the same manner, drug abuse, not alcoholism, is stressed as the key policy issue. A recent example demonstrates that other strategies should be considered. On July 1, 1986, the Kentucky Corrections Cabinet established a contractual relationship with Kentucky Substance Abuse Programs Inc. (KSAP) to provide group counseling sessions for drug/alcohol abusing probationers and parolees in three areas of the state (Covington, Lexington, and Louisville). This article focuses upon the recidivism rates and other results generated during the first year of KSAP operations. Can treatment cut recidivism rates and prevent a return to prison?

Linkages Between Substance Abuse and Crime

Current studies examining the relationship between substance abuse (both drugs and alcohol) and criminal behavior provide dramatic evidence of the need for specialized treatment programs for offenders. Research demonstrates that offenders with ac-

tive drug or alcohol abuse problems are likely to continue their criminal behavior.

A survey of state prisoners in 1979 provides ample evidence of the extent of substance abuse in the offender population. Almost one-third of all state prisoners stated that they were under the influence of drugs and alcohol at the time of their current offense (Bureau of Justice Statistics, 1983a and 1983b). Marijuana was the most common drug used by inmates while heroin, cocaine, amphetamines, barbiturates, and hallucinogens (LSD and PCP) were used by one-third of the inmates. Almost half of the inmates reported that they drank an average of an ounce of ethanol or more daily. Habitual offenders and persons convicted of assault, burglary, and rape were more likely to be very heavy drinkers than other prisoners. The reports concluded that the inmates demonstrated "an excessive pre-prison involvement with alcohol on the part of a great many inmates" and that "illegal drug use is about as pervasive among inmates as alcohol" (Bureau of Justice Statistics, 1983a: 2; 1983b: 5).

Innes reported that the pattern of drug abuse in the inmate population had become even more severe by 1986. Thirty-five percent of the inmates admitted that they were under the influence of drugs at the time of their offense. Forty-three percent of the inmates stated that they were using illegal drugs daily or almost daily before their arrest.

In addition, Gropper (1985) summarized research which demonstrates that offenders with a substance abuse problem account for a high volume of crime. He reported that drug abusing offenders commit a high percentage of the reported violent crimes (i.e., robbery—75 percent) and that drug addicts commit more crimes while they are addicted—some four to six times higher than when they are not abusing narcotics. Similarly, in his analysis of this relationship, Inciardi (1986: 169-170) concluded that "narcotics use freezes its users into patterns of criminality that are more acute, dynamic, violent, unremitting and enduring than those of other drug-using offenders."

This pattern is even more pronounced among ha-

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bitual offenders. A survey by Langan and Greenfield (1983) indicated that prisoners with the most severe prior criminal histories reported a substantial involvement with drugs (especially heroin) and that, regardless of the severity of their criminal career, all of the inmates in the study had a serious problem with alcohol. The majority of the inmates reported that they were drinking at the time of their current offense and that they were involved with alcohol abuse programs in the past.

Also, research attempting to predict the success of offenders while on probation or parole supervision has consistently identified substance abuse as one of the key indicators of risk. Petersilia and Turner (1987: 158) summarized a compilation of sentencing and parole board decision-making guidelines and determined that drug and alcohol use was a factor in the majority of parole release decisions. For example, the Salient Factor Scoring system developed by the Federal Bureau of Prisons to act as a mechanism to guide parole board deliberations (Hoffman, 1983) included heroin/opiate dependence as a demonstrated predictor of recidivism. A similar scale developed specifically for use with probationers (Eaglin and Lombard, 1981) identified substance abuse as a factor which enhances the probability of recidivism. Baird (1981) has also outlined the elements of the "Wisconsin Model" of supervision. This model assigns both risk and need scores to offenders to determine levels of supervision. A variation of this model is presently in use in Kentucky. Alcohol and drug usage problems are items on both the risk prediction and needs assessment scales.

Indeed, Kentucky is no exception to this pattern. A report on offenders incarcerated under the persistent felony offender law (PFO) gives some indication of the extent of the substance abuse problem among the Kentucky inmate population. Wilson and Vito (1986) determined that an assessment of inmate backgrounds revealed that the majority of the PFO's "occasionally or frequently" abused drugs and alcohol. This pattern was as clear in the comparison group (a random sample of the prison population excluding the PFO's).

In sum, from a treatment perspective, these data indicate the extent of substance abuse among the incarcerated population, the relationship between substance abuse and the probability of recidivism, and the obvious need for some type of program to address this problem.

Several authors have recommended that future development of correctional treatment programs

should focus upon private sector provision of services. For example, Marshall and Vito (1982: 38) stated that the use of private contractors could provide several advantages, including:

1. It would give the probation department some measure of financial control over the services provided by others to clients. If the department contracts for services and these services are not delivered, finances can be withdrawn or withheld.
2. Control of the purse strings will give probation departments a voice in terms of the type, manner and, most importantly, the quality of services provided by social service agencies for the probationers.
3. This type of financial control could prevent what some officers consider "Social Service Rip-Offs" of their clients: The services are not delivered by the agency in question and the probation department is prevented from taking action by a sea of bureaucratic red tape.

Similarly, Cullen (1986) has offered a number of potential benefits of private sector treatment contracts including: 1) greater effectiveness, 2) ability to contract for a broad range of services, 3) specification of performance or outcome standards to assess contract renewal contingent upon satisfactory levels of service delivery (i.e., percentage of inmate participation in programs, the degree of success and recidivism rates), and 4) more effective use of current funds.

Throughout the course of this analysis, comparisons are made to an evaluation of a program for alcoholic probationers conducted by Latessa (1988). This program is in Lucas County (Ohio—STOP: Sobriety Through Other People). The program provides in-house alcoholic treatment to probationers and their families. Probationers in the program are referred to a number of different services and were also under intensive supervision. A total of 102 alcohol treatment cases and a matched comparison group of 101 cases were studied. Although this program was unlike KSAP (not private), the clients of both programs are comparable.

These conclusions provide a backdrop to the assessment of the implementation issues surrounding KSAP. The establishment and development of the Kentucky Substance Abuse Program is a recognition of the extensive need for such services within the offender population and an attempt to provide these services through a service contract with a private vendor.

History of the Kentucky Substance Abuse Program

According to the original KSAP grant proposal, this program responded to an apparent need among the probation and parole clientele. The program grew from modest beginnings as a volunteer program based in Louisville (Fourth Supervisory District) headed by Sam Eyle in conjunction with Officer Gilbert Hetlich. The small informal group soon grew from 6 clients to over 100. Eventually, a personal services contract was awarded and KSAP was expanded to operate in the Seventh (Covington) and Ninth (Lexington) Supervisory Districts.

KSAP is designed to address a number of common problems:

1. Provide meaningful feedback to the officer concerning the performance of clients involved in the program. Such immediate feedback is not typically offered by private or public substance abuse programs and officers are often frustrated over the lack of information.
2. Provide substance abuse counseling services in the form of "self-help" sessions to help clients deal with the problems caused by substance abuse. Through group interaction and discussion with the group leader, the common problems of probationers and parolees are shared in the hope that possible solutions can be found.
3. Provide a meaningful service to officers as well. KSAP gives officers the opportunity to make referrals to the program and, in effect, to maintain program "ownership." The officers are supplied with data concerning the performance of their clients and the opportunity to utilize the program as an alternative to revocation in handling substance abuse problems.

In short, KSAP is another supervision tool. KSAP provides services to clients with substance abuse problems, gives officers some measure of control over program operations, and offers a program which is directly accountable to the Corrections Cabinet for the effective provision of services.

Simultaneously, KSAP does not threaten existing referral sources for clients with substance abuse problems. The main advantage between KSAP and other programs was that the officer has access to all information concerning program performance. This information is often denied to officers on the basis of client confidentiality. Here, the officer refers clients to the program and determines when a client is ex-

cused from attendance at a KSAP meeting. In this manner, the officer controls the provision of services to the offender through KSAP.

Program Goals

According to the original service contract, the primary goal of KSAP is to increase public protection through the successful treatment of offenders with substance abuse problems. The following objectives served as vehicles for goal attainment:

- A. Referral of selected offenders with a demonstrated substance abuse problem.
- B. Participation in and completion of this structured program will be considered a mandatory condition of the offender's supervision.
- C. Program staff will provide the referring probation and parole officer with weekly reports regarding the offender's attendance, participation, and progress within the program.
- D. The effectiveness of the Substance Abuse Program will be evaluated by an objective, independent party.

A process evaluation of KSAP was completed following the first 6 months of program operations and reached the following conclusions:

- The process evaluation indicates that KSAP is firmly established.
- Attendance rates are at an acceptable level, the information system is in place, and the opinions of all individuals involved with the program are high.

Therefore, KSAP was implemented in an acceptable fashion. This article focuses on recidivism rates within KSAP after its first year of operation.

Methodology

The evaluation of KSAP featured a quasi-experimental design. During the summer of 1986, probation and parole officers in each of the offices served by the program were asked to screen their caseloads for clients with drug and/or alcohol problems. The officers were then asked to make referrals to KSAP from this list. The list then served as the source to construct a matched comparison group. Subjects were selected for the comparison group at random and in proportion to the number of cases which that officer had placed in KSAP. Therefore, the members of the comparison group were matched with those referred to KSAP in terms of their substance abuse problem.

We then selected all referrals to KSAP during the first 3 months of operation (July through September 1986). This timeframe provided at least 6 months of followup time after completion of KSAP (for those clients who completed the program). Data were collected on each member of the comparison and experimental (KSAP) groups. The information included basic demographic data on each case, the initial risk/needs assessment form data, and, finally, recidivism information through July 1, 1987. All information originated in the case files maintained by officers in each location.

In effect, we will focus on the performance of three groups:

1. Clients who completed KSAP ("graduates"),
2. Clients who did not complete the program ("exits"), and
3. Members of the matched comparison group.

Such comparisons give a more accurate assessment of program effectiveness in that persons who complete a program represent the extent of its effectiveness. Specific attention must be given to the effectiveness of the service delivery within the program (see Vito, 1982). Program completion ("KSAP graduation") is the measure of service delivery.

The use of a quasi-experimental design made it necessary to compare the three groups on their demographic and criminal history attributes. If differences exist, they could confound the validity and accuracy of the research results. In this case, such comparisons can also yield some information about project operations, for example: "What type of client is referred to KSAP?" and "What variables distinguish those who completed the program from those who did not?" The data for these analyses consisted of all the variables on the "KSAP Referral Form" and items from the initial risk/needs assessment. The chi-square statistic determined if significant differences were present between the three groups. Tests between average scores were conducted using a t test.

Comparisons Between the Clients Referred to KSAP and the Members of the Comparison Group

Table 1 presents the significant differences between the KSAP referees and the comparison group. Across the three offices, there were a total of four differences between the comparison group and the clients referred to KSAP. First, in the Louisville office, a greater proportion of the KSAP referees had either alcohol problems or were cross-addicted. Sec-

ond, clients in KSAP were more likely to have had been in treatment previously. This pattern was also present in the Covington office. This finding is consistent with other research on substance abusing offenders. For example, Innes (1988: 1) reported that 30 percent of the state prison inmates from the 1986 survey stated that they had participated in a drug treatment program at some time—12 percent more than once. Furthermore, the 1979 survey concerning alcohol abuse revealed that four-fifths of the drinking inmates had never been in an alcohol treatment program (Bureau of Justice Statistics, 1983a: 3).

On the initial needs assessment, the Louisville clients referred to KSAP were more likely to have a "serious" alcohol abuse problem. On the risk assessment scale, clients referred to KSAP had a higher average total risk score than the comparison group members. They also had an average number of prior alcohol arrests which was several times higher than

TABLE 1. SIGNIFICANT DIFFERENCES BETWEEN CLIENTS REFERRED TO KSAP AND MEMBERS OF THE COMPARISON GROUP

Variable	KSAP		Comparison Group	
	N	Pct.	N	Pct.
I. LOUISVILLE OFFICE¹				
<i>Substance Abuse Problem:</i>				
Alcohol	85	(47.5)	65	(37.6)
Drug	32	(17.9)	77	(44.5)
Cross-Addicted	62	(34.6)	31	(17.9)
<i>Previous Treatment?:</i>				
Yes	98	(58.7)	53	(34.2)
No	69	(41.3)	102	(65.8)
<i>Alcohol Abuse (Initial Needs Assessment):</i>				
No Problem	42	(26.9)	79	(51.6)
Occasional	45	(28.8)	45	(29.4)
Serious	69	(44.2)	29	(19.0)
Test of Means		Score	Score	
(Average Values)				
Total Risk Score		19.31	17.18	
Prior Alcohol Arrests		4.99	1.66	
II. LEXINGTON OFFICE²				
Test of Means		Score	Score	
(Average Values)				
Prior Alcohol Arrests		4.88	1.71	
III. COVINGTON OFFICE³				
<i>Previous Treatment?:</i>				
Yes	22	(73.3)	4	(18.2)
No	8	(26.7)	18	(81.8)

¹N of KSAP = 179; N of Comparison Group = 174.

²N of KSAP = 35; N of Comparison Group = 32.

³N of KSAP = 33; N of Comparison Group = 24.

the comparison group as did KSAP referees in the Lexington office.

These results are similar to those reported by Latessa (1988). He discovered that the treatment group had a greater percentage of offenders classified as high risk, with more severe alcohol problems, significantly more prior arrests for crimes against persons, and who were more likely to be under the influence of drugs or alcohol at the time of their present offense.

These findings reveal two basic points. First, they indicate that, in terms of comparing outcomes such as recidivism rates, the KSAP group is unlike the comparison group. In fact, given the variables which account for the differences between the two groups, the KSAP group can be expected to have higher recidivism rates than the comparison group. They represent a "high risk" group as indicated by their average total risk score and their alcohol abuse record.

Second, remember that the comparison group consists of a random sample of cases who were eligible for but not initially enrolled in KSAP. Viewed in this fashion, the differences presented between these two groups indicate factors related to the decision to send a client to KSAP. It appears that the officers refer clients with severe alcohol problems, with previous alcohol-related criminal arrests, previous involvement in treatment programs, and greater probability of recidivism. In sum, the officers referred clients with major problems to KSAP.

Taken together, the average KSAP client represents a significant challenge to the program in treating a severe substance abuse problem and preventing future criminal behavior. Given the similarities with the Latessa (1988: 31) data, the substance abusing offender represents a general supervision problem—"a group that is more difficult to treat with traditional probation strategies."

Comparisons Between the Clients Who Completed KSAP and the Clients Who Failed to Complete KSAP

The second set of comparisons involves the KSAP clients from the Louisville office who completed the program ("graduates") and those who did not ("exits"). This comparison is not only necessary for methodological reasons but it may also reveal the variables significantly related to program completion. No differences were present among the groups in the Lexington and Covington offices.

Table 2 presents the results of the analysis. There

were three significant differences within the KSAP clientele. First, as evidenced by the initial risk assessment, KSAP graduates had a better employment rate than the KSAP exits. It may be that unemployment is a problem which should be specifically addressed in the program. Here again, the Bureau of Justice Statistics surveys (1983a: 2; 1983b: 4) reveal evidence of a connection between employment and abstinence. Concerning drug abuse, inmates who had been employed during the month prior to their crime were less likely than the unemployed to have ever used heroin or cocaine. However, in terms of alcohol abuse, the connection is less clear. In fact, employed persons were more likely to be daily drinkers than unemployed persons.

TABLE 2. SIGNIFICANT DEMOGRAPHIC DIFFERENCES BETWEEN CLIENTS WHO GRADUATED* FROM AND CLIENTS WHO EXITED** FROM THE KENTUCKY SUBSTANCE ABUSE PROGRAM (LOUISVILLE OFFICE)

Variable	KSAP Graduates		KSAP Exits	
	N	Pct.	N	Pct.
Time Employed in the Last 12 Months (Initial Risk Assessment):				
60% or More	48	(57.1)	26	(37.7)
40%-59%	17	(20.2)	16	(23.2)
Under 40%	19	(22.6)	27	(39.1)
Test of Means		Score		Score
(Average Values)				
Prior Alcohol Arrests		6.31		3.59

*Number of KSAP Graduates = 92

**Number of KSAP Exits = 87

Second, in their average number of previous alcohol arrests, the KSAP graduates had a more severe prior record than those who failed to complete the program. This finding indicates that KSAP is reaching those clients with the most severe alcohol problems and that the program is succeeding with the "worst" cases.

Comparisons Between the Clients Who Completed KSAP and the Members of the Comparison Group

Finally, we compare the attributes of the KSAP graduates and the members of the comparison group to determine if a valid comparison of their recidivism rates can be attempted. Here again, only cases from the Louisville office demonstrated any significant differences.

Table 3 presents a total of eight significant differences between the KSAP graduates and the comparison group members. In sum, the data reveal that KSAP graduates were more likely to: be alcoholics and cross-addicted, have been involved with treatment in the past, engage in serious and severe alcohol abuse, have a past assaultive conviction, have a higher average total risk score, and have a higher average number of both prior alcohol and drug arrests.

TABLE 3. SIGNIFICANT DIFFERENCES BETWEEN CLIENTS WHO GRADUATED FROM THE KENTUCKY SUBSTANCE ABUSE PROGRAM* AND MEMBERS OF THE COMPARISON GROUP** IN THE LOUISVILLE OFFICE

Variable	KSAP Graduates		Comparison Group	
	N	Pct.	N	Pct.
<i>Substance Abuse Problem:</i>				
Alcohol	39	(42.4)	65	(37.6)
Drug	16	(17.4)	77	(44.5)
Cross-Addicted	37	(40.2)	31	(17.9)
<i>Previous Treatment?:</i>				
Yes	52	(60.5)	53	(34.2)
No	34	(39.5)	102	(65.8)
<i>Alcohol Usage Problems (Initial Risk Assessment):</i>				
None	21	(25.0)	63	(41.4)
Occasional	22	(26.2)	49	(32.2)
Serious Abuse	41	(48.8)	40	(26.3)
<i>Past Assaultive Conviction?:</i>				
Yes	32	(38.6)	34	(22.4)
No	51	(61.4)	118	(77.6)
<i>Alcohol Abuse (Initial Needs Assessment):</i>				
No Problem	23	(27.4)	79	(51.6)
Occasional	22	(26.2)	45	(29.4)
Serious	39	(46.4)	29	(19.0)
Test of Means				
	Score		Score	
(Average Values)				
Total Risk Score	18.65		17.18	
Prior Alcohol Arrests	6.31		1.66	
Prior Drug Arrests	2.04		1.67	

*Number of KSAP Graduates = 92

**Number of Members of the Comparison Group = 174

Remember, there were five differences listed in table 1 between all KSAP clients and the comparison group. When the clients who failed to complete KSAP are excluded from this comparison, those five differences remained and three new ones appeared (alcohol usage problems, past assaultive conviction, and average number of prior drug arrests). In other words, with regard to the comparison group, the KSAP graduates represent an even higher risk group with more severe substance abuse problems. From a methodological point of view, these groups are cer-

tainly not comparable and a higher recidivism rate among the KSAP graduates is expected.

Recidivism Rates of KSAP Graduates versus KSAP Exits

In correctional program evaluation, recidivism rates are commonly considered "the bottom line." Yet, when rates are compared, it is important to consider two questions: How is "recidivism" operationally defined (measured) and what is the length of the followup period? Here, the longest followup period was approximately 6 months following program completion or 1 year in all. Recidivism was measured in a number of different ways (arrest, conviction, and incarceration) with breakdowns according to type of charge (felony, misdemeanor, or technical violation). Given the small sizes of our various groups, no attempt could be made (statistically) to control for the previously revealed between group differences. Therefore, it must be kept in mind that the KSAP graduates represent a higher risk group than either the KSAP exits or the members of the comparison group.

Table 4 presents a comparison of recidivism rates between the KSAP graduates, KSAP exits, and the comparison group members (for all three offices). The KSAP graduates had a significantly lower arrest, conviction, and incarceration rate for a new felony than either the KSAP exits or the members of the comparison group. In fact, none of the KSAP graduates were convicted or incarcerated for a new felony. Among those cases incarcerated on a technical violation, the KSAP graduates still had the lowest rate (3.6 percent).

With regard to misdemeanors, the KSAP graduates had a significantly higher rate of arrest and conviction but not incarceration (jail). Given the severe substance abuse problem present in this group, this finding is not unexpected. Further analysis revealed that the KSAP graduates misdemeanants were likely to abuse alcohol but at a lower rate than the KSAP exits (74.3 percent versus 86.7 percent). Again, these findings are similar to those reported by Latessa (1988). He discovered that the alcohol treatment group had fewer misdemeanor and felony arrests but more misdemeanor convictions and technical violations (which is common among intensive supervision cases) than the comparison group.

The "bottom line" is that KSAP graduates present less of a problem with future felonies but more of a problem with misdemeanor offenses than the KSAP exits. The program was successful in providing ser-

vices to substance abusing offenders and preventing a return to prison.

TABLE 4. RECIDIVISM RATE COMPARISONS OF CLIENTS WHO GRADUATED* FROM AND CLIENTS WHO EXITED** FROM THE KENTUCKY SUBSTANCE ABUSE PROGRAM (ALL OFFICES) AND MEMBERS OF THE COMPARISON GROUP***

Recidivism Rate	KSAP Graduates		KSAP Exits		Comparison Group	
	N	Pct.	N	Pct.	N	Pct.
<i>Felony Arrest:</i>						
Yes	5	(3.6)	13	(12.0)	11	(4.8)
No	134	(96.4)	95	(88.0)	219	(95.2)
<i>Felony Conviction:</i>						
Yes	1	(0.8)	12	(11.1)	1	(0.4)
No	133	(99.2)	96	(88.9)	229	(99.6)
<i>Felony Incarceration:</i>						
Yes	0	(0.0)	12	(11.1)	0	(0.0)
No	139	(100)	96	(88.9)	230	(100)
<i>Prison Reincarceration: (As a result of a felony or violation)</i>						
Yes	5	(3.6)	38	(35.2)	19	(8.3)
No	134	(96.4)	70	(64.8)	211	(91.7)
<i>Misdemeanor Arrest:</i>						
Yes	40	(28.8)	22	(20.3)	26	(11.3)
No	99	(71.2)	86	(79.7)	204	(88.7)
<i>Misdemeanor Conviction:</i>						
Yes	29	(20.9)	20	(18.5)	18	(7.8)
No	110	(79.1)	88	(81.5)	212	(92.2)
<i>Misdemeanor Incarceration (Jail):</i>						
Yes	6	(4.3)	6	(5.6)	8	(3.5)
No	133	(95.7)	102	(94.4)	222	(96.5)

*Number of KSAP Graduates = 139

**Number of KSAP Exits = 108

***Size of Comparison Group = 230

Conclusions

Before we make any broad generalizations, we must consider possible explanations for these findings other than program performance. First, there is the finding that the KSAP group as a whole and the KSAP graduates in particular are a greater risk group in terms of their substance abuse history and their probability of recidivism. Here, problems with "regression to the mean" are readily apparent. In other words, the KSAP group is so bad in terms of these attributes, they almost had to improve (Vito, Latessa, and Wilson, 1988: 110). Second, it is also possible that the KSAP group is more amenable to treatment in that they "hit bottom" and were ripe

for change (Orsagh and Marsden, 1985). These two interpretations are certainly possible but it is also clear that the officers were not "skimming" in terms of their referrals to the program and that they did not remove clients from KSAP who were especially difficult to handle.

It is clear that KSAP is serving its "target population"—offenders with a severe substance abuse problem who are on probation or parole. In fact, the clients who complete the program have even more severe substance abuse problems (as indicated by their prior record and risk/needs evaluation form) than those who do not. The program is achieving significant results with clients who have failed in treatment before.

KSAP graduates had a significantly lower prison incarceration rate, despite their personal attributes which identify them as a greater potential risk than either the KSAP exits or the members of the comparison group. Third, KSAP graduates do have problems with misdemeanor arrests and convictions for alcohol-related charges following the end of the program. This indicates that the KSAP group is in need of followup treatment.¹

The experience of the Kentucky Substance Abuse Program also illustrates that it is possible for private programs to offer supplementary and specialized services to probationers and parolees without usurping or negating the authority of officers. It is especially important to take note of a program which generates positive results, working with such a difficult population (see Gendreau and Ross, 1987; Van Voorhis, 1987). Treatment, not only of drug abusing offenders but also alcoholics, must be a part of the attempt to counter the effects of substance abuse upon the nation.

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¹In response to this finding, KSAP developed such a program for its graduates.

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