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SOME POLICE EXECUTIVES' PERCEPTIONS OF
DRUG TREATMENT DIVERSION PROGRAMS AS ALTERNATIVES
TO INCARCERATION FOR FIRST TIME OFFENDERS

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ACQUISITIONS

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INTRODUCTION

Since the 1960s, the relationship between treatment providers and the criminal justice system has vacillated between partnership in the best of times and antagonism in the worst of times. Today, in the midst of a crack cocaine epidemic, increasing attention has been focused on the links between illicit drug use and criminal activity. Current criminal justice policy reflects renewed interest in combining drug treatment approaches with sanctions for drug-involved offenders (Visher, 1990).

Drug-involved offenders have overwhelmed the criminal justice system- jails and prisons are overcrowded; court dockets are backlogged. Criminal justice sanctions alone are not effectively reducing drug use and the criminality of drug-involved offenders. Criminal justice professionals agree that options other than traditional incarceration or probation are needed. Drug treatment, imposed by the criminal justice system and backed up with the threat of sanctions, appears to be the most promising alternative.

Joint efforts by the treatment and criminal justice systems are the most likely to be effective in reducing drug use and related criminality- a vital crime control strategy for the foreseeable future. Incorporating drug treatment in the sanctions imposed on drug-involved offenders is an alternative to pursue in the challenge to reduce drug demand and drug-related criminal behavior.

MEASURING SUPPORT FOR DRUG TREATMENT DIVERSION PROGRAMS

The St. Petersburg Police Department was interested in gauging the support for drug treatment diversion programs among police executives. The Planning and Research Unit designed a short survey, which was administered to the chiefs of police of agencies that are of comparable size to the St. Petersburg Police Department.

The survey sample was generated by identifying municipal police departments in the U.S. with total sworn personnel ranging from 250 - 1,000. (The St. Petersburg Police Department has approximately 500 sworn personnel.) A total of 116 comparable agencies were identified and included in the sample. The police chiefs of those agencies were mailed surveys. A total of 63 surveys were returned, a response rate of 54%.

The objectives of the survey were: (1) to measure the level of support among police executives for drug treatment diversion programs; (2) to measure perceptions of the impact that successful treatment of drug-involved offenders would have upon criminal activity; (3) to define the population felt to be most appropriate for placement into drug treatment diversion programs; (4) to explore the benefits of treatment for drug users compared to incarceration; and (5) to identify key issues to be considered in the development of drug treatment diversion programs.

FINDINGS

Support for the development of drug treatment diversion programs as alternatives to incarceration for drug-involved offenders was overwhelming. Eight of every ten (81.0%) respondents indicated that they were in favor of such programs (see Table 1).

The most frequently mentioned reason why such programs were favored was that they offered the best chance to truly help drug-involved offenders, particularly first-time offenders. Of the 51 respondents who indicated they favored drug treatment diversion programs as an option for handling drug-involved offenders, 26 specifically mentioned the benefit of being able to help these offenders.

Support for community-based treatment of addicts remains controversial. Research on the effectiveness of the social policy approach, i.e. coercing addicts apprehended for criminal activities into treatment, has yielded conflicting results.

Some studies have concluded that minimal improvement can be expected from a client forced into treatment by the criminal justice system (Bullington, et al., 1978; Klein, 1979; Newman, 1983).

However, research has also indicated that few addicts enter treatment without some kind of external motivation. Legal coercion is as justified as any other motivation for inducing addicts

to enter treatment. Some studies showed that criminal justice system consequences for failure to meet treatment program conditions led to more socially acceptable behavior than treatment alone produced (Allen, 1959; Cohen, 1979; Orsagh & Marsden, 1985; Salmon & Salmon, 1983).

Persons entering treatment under legal pressure do as well or better than other clients after discharge. Criminal justice referral to treatment can be particularly effective because these persons tend to stay in treatment longer than those who enter treatment voluntarily. The length of time in treatment is a critical factor in posttreatment outcomes. Treatment must continue for at least several months, optimally for 1-2 years, to achieve substantial reductions in drug use and criminality. Postrelease supervision or an aftercare program is an integral component of drug treatment and is essential for substantial behavior change (Anglin, et al., 1989).

The findings discussed above apply only to coerced treatment, as opposed to mandated. Coerced clients do have an ultimate choice about accepting treatment, no matter how aversive. They could have allowed the alternative sanctions (usually incarceration) to have been imposed. Coercive, rather than mandated, approaches are by far the rule in the criminal justice system. A greater linkage between community treatment programs and the criminal justice system may provide a system by which both "carrot" and "stick" incentives could be used to achieve maximal and persistent social

benefits (Speckart & Anglin, 1986).

In addition to providing treatment that may lead to recovery, diverting drug users would also ease the burden on an overloaded criminal justice system, thereby enabling law enforcement, corrections, legal and judicial professionals to focus more time and energy on the prosecution and imprisonment of more serious offenders. Additionally, jail and prison space would be freed to accommodate housing violent offenders. Twenty-three (23) survey respondents indicated that easing the burden on the criminal justice system and freeing jail space were their primary reasons for supporting diversion programs.

Twelve (12) respondents commented that recidivism rates have clearly shown that incarceration has not been effective in deterring repeat offenses. Some respondents explained that, if anything, younger, first-time offenders, when jailed with recidivists and hard-core drug addicts, find a support system for their own criminal and drug-related activities. These respondents also made the point that first-time offenders should not be institutionalized with repeat offenders, if there is to be any chance at all of turning them around to again be productive members of their communities. Treatment offers a viable alternative to incarceration, which, in the minds of these respondents, at least provides the potential for reducing repeat offenses by drug-involved offenders who are still capable of being diverted from a life of crime and addiction.

Five (5) respondents specifically mentioned that the potential for decreasing future arrests and criminal activity was their primary reason for favoring drug treatment diversion programs.

The cost effectiveness of drug treatment diversion programs as compared to incarceration was mentioned as the primary reason why diversion was favored by seven (7) respondents. Diversion programs are felt to be less costly than incarceration, especially over the long term.

One person indicated that his support of diversion programs was based on the perception that compulsory treatment is much more difficult on the offender than prison time, and therefore constituted more effective "punishment", along with better results.

Twelve (12) respondents indicated that they were not in favor of drug treatment diversion programs as alternatives to incarceration for the drug-involved offender. However, in giving their reasons why they were not, eight (8) of those respondents qualified their lack of support by explaining that they considered diversion appropriate only for those offenders arrested for minor possession charges or that the decision to divert an offender be reviewed on a case-by-case basis. Only four (4) respondents actually indicated that they would not support diversion programs under any circumstances.

Nearly half of the respondents (47.6%) felt that the successful completion of mandatory drug treatment programs by drug-involved

offenders would reduce crime rates to a large or very large degree within their jurisdictions. An additional 41% of the respondents felt crime would be reduced somewhat. 11% of the respondents felt that crime would only be reduced to a slight or very slight degree (see Table 1).

Research shows that there is a strong link between drug abuse and criminal activity. A survey of 13,700 state prison inmates found that 35% admitted using drugs at the time of their crime and 43% reported using drugs on a daily or a near daily basis within one month prior to committing the crime that led to their incarceration (Innes, 1986). Another study showed nearly three-quarters of male arrestees in 11 U.S. cities, who voluntarily submitted urine samples, tested positive for drugs (Wish, 1988). Research conducted in San Diego County showed that over three-quarters of all arrestees booked into the county's seven jails, regardless of the charge, were under the influence of at least one drug at the time of admission (Pennell & Curtis, 1988).

All types of drug treatment have shown progress in reducing drug use and related criminal behavior. Nurco, et al., (1988) reported that drug treatment program participants who committed crimes infrequently before their addiction either committed no crimes after release from treatment or committed crimes less frequently. Another study found that drug-involved offenders in drug treatment committed fewer crimes and used drugs less often than offenders not in treatment. Study findings also revealed that about

two-thirds of persons who reported criminal activity before treatment, and who remained in treatment for at least three months, had ceased criminal activity in the year after treatment (Hubbard, et al., 1989).

When asked which offenders should be eligible for selection into drug treatment diversion programs, the largest percentage of the respondents (42.9%) opted for ALL first-time drug-involved offenders (regardless of the nature of their offense). One-third (33.3%) of the respondents said ONLY first-time offenders arrested for drug possession should be eligible for treatment (see Table 1).

Clearly, the population targeted by the majority of the respondents for diversion programs is first-time offenders, with just over three-quarters of the respondents (76.2%) identifying this group as most appropriate for placement into drug treatment diversion programs.

Research has shown that young offenders with less serious drug abuse problems and no prior treatment history were particularly found to benefit from early intervention and treatment initiated by the criminal justice system (Hubbard, et al., 1989).

A small percentage (7.9%) of the respondents felt that repeat drug-involved offenders should also be eligible for treatment. Two respondents felt that ALL drug-involved offenders should be placed into treatment (see Table 1).

Another small percentage (9.5%) of the respondents indicated under the "Other" response choice that they favored treatment for first-time offenders who were arrested ONLY for minor drug possession charges, who had no prior history of violence or other more serious criminal offenses or felt each offender's need for drug treatment should be evaluated on a case-by-case basis.

Two respondents indicated that they were not in favor of ANY offenders receiving drug treatment and were against any kind of diversion program for drug-involved offenders.

Respondents were asked to identify those issues that they felt were relevant to the development of a drug treatment diversion program. Issues identified most frequently were: (1) enforced criminal sanctions for those who fail to complete treatment or comply with program rules; (2) funding; (3) accountability, both on the part of program administrators and participants for a meaningful commitment to the program; (4) ongoing monitoring of program participants for drug use, criminal activity and performance in treatment components; (5) defining criteria for who can and cannot be selected for treatment; (6) coordinating the support for and participation in the program among all players within the criminal justice system; (7) evaluation of the program, along with long-term follow-up of participants; (8) community acceptance; (9) guidelines for program content and length; (10) professional expertise of program staff; and (11) the location and availability of facilities to house the program.

Other issues that were mentioned included: provisions for the participation of indigent offenders; restitution for victims, when appropriate; complete assessment of the nature of the offenders' drug problem(s); credibility; and, the impact diverted offenders may have on assisting with intelligence on drug distribution and suppliers.

Finally, respondents were asked to list the benefits of drug treatment diversion programs compared to incarceration for drug-involved offenders. One response was mentioned far more frequently than any other- 53 of the 63 respondents mentioned this- the chance that treatment has to help the offender change his/her lifestyle and become a viable, contributing member of the community, and therefore deter, reduce or prevent future drug use and its related criminal activity. Helping the drug-involved offender "kick" his/her drug habit benefits the community as a whole, by returning to it a healthy citizen in exchange for an addict who was embarking on a life of crime.

Drug treatment diversion programs are felt to be less costly than incarceration and offer the chance of far more positive results. The perception that diversion programs were more cost effective than incarceration was mentioned as a benefit by 25 respondents.

Treatment also helps alleviate the burden on the criminal justice system, which has been overwhelmed by drug-involved offenders, and frees jail or prison space. This was a benefit listed by 25 respondents. More resources are thus made available, allowing law

enforcement professionals and other players in the criminal justice system to focus their efforts on more serious, habitual offenders, including perpetrators of more serious drug violations, getting them into prison and off the streets.

The opportunity to successfully treat drug-involved offenders is felt to deter future crime. This was listed as a benefit of treatment diversion programs by 17 respondents.

Other benefits of treatment for drug-involved offenders compared to incarceration included: allowing offenders to pay their debt to society without the stigma of having done time in prison; and, the opportunity to tap into and utilize existing community support systems- such as family, employers, church and other organizational affiliations- that have traditionally strengthened social controls and, hence, positively impact responsible individual behavior.

CONCLUSION

There is strong support among police chiefs of mid-sized agencies in every area of the country for the development of drug treatment programs into which first-time offenders can be diverted in lieu of incarceration.

Respondents clearly stated that incarceration is not an effective deterrent to future crime or drug use. If anything, exposing first-time offenders to recidivists or hard-core addicts virtually insures that they, too, will become repeat offenders.

Respondents felt that the successful completion of drug treatment programs by drug-involved offenders would lead to at least some reduction of criminal activity in their areas.

Critical issues most frequently identified by the respondents include: (1) development of strict sanctions for failure to comply with program conditions or to successfully complete the program; (2) funding; (3) accountability; (4) careful definition of criteria for selecting treatment participants; (5) outpatient aftercare and continued monitoring of clients during and upon completion of the program; (6) coordinating support for and participation in programs by all components of the criminal justice system; (7) program evaluation; (8) community acceptance; (9) guidelines for the content and length of the program; and (10) the availability of appropriate professional staff.

The overwhelming benefit of drug treatment diversion programs as compared to incarceration was the opportunity to truly help drug-involved offenders, giving them back a meaningful life and giving a productive citizen back to society.

The overall benefits to society and the prevention of future drug use and related criminal activity make treatment programs more cost effective than incarceration. Many respondents felt that program participants should bear some if not all of the cost of their treatment, but indigent offenders should not be excluded from treatment if they had no ability to pay.

The solution to the drug problem lies in a three-pronged approach that emphasizes education (prevention), demand reduction (treatment programs) and enforcement (tough, meaningful criminal sanctions). The criminal justice system must focus on building partnerships between law enforcement agencies, treatment providers, educators, prosecutors and judges through which a comprehensive strategy can be developed that addresses the drug problem from each of the three approaches previously mentioned. Enforcement alone is not an effective strategy in dealing with drug-related crime. Drug-related crime is a multidimensional problem and, therefore, demands a multidimensional solution.

TABLE 1: FREQUENCY DISTRIBUTION

Favor diverting first-time drug-involved offenders into compulsory, residential drug treatment programs:

	N.	Percent
Yes	51	81.0%
No	12	19.0%

To what degree treating drug-involved offenders would lead to a reduction in criminal activities:

	N.	Percent
To a very large degree	12	19.0%
To a large degree	18	28.6%
Somewhat	26	41.3%
To a slight degree	6	9.5%
To a very slight degree	1	1.6%

Who should be placed into drug treatment diversion programs:

	N.	Percent
1st-time offenders, for drug possession	21	33.3%
ALL 1st-time offenders who use drugs	27	42.9%
Repeat offenders, for drug possession	1	1.6%
ALL repeat offenders who use drugs	4	6.3%
ALL of the above groups	2	3.2%
None, not in favor of diversion programs	2	3.2%
Other	6	9.5%

(NOTE: Other survey questions were open-ended.)

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