

Treating Offenders with Drug Problems: Integrating Public Health and Public Safety

Research Update from the National Institute on Drug Abuse

Extent of the Problem

The connection between drug use and crime for adults and juveniles is well known. As seen in Figure 1, the number of adults incarcerated in federal, state, and local prisons and jails has soared to 6.9 million. Many, but not all, offenders convicted of drug related crimes have substance abuse problems.

In 2002, approximately 60% of male juvenile detainees and 46% of female detainees tested positive for drug use at the time of their arrest. It has been reported that 70-85% of state inmates have substance abuse problems serious enough to warrant treatment, but only 13% received treatment while incarcerated. Approximately 650,000 inmates are released back into the community annually, often without having received drug abuse treatment, or being connected to community-based drug treatment and services.

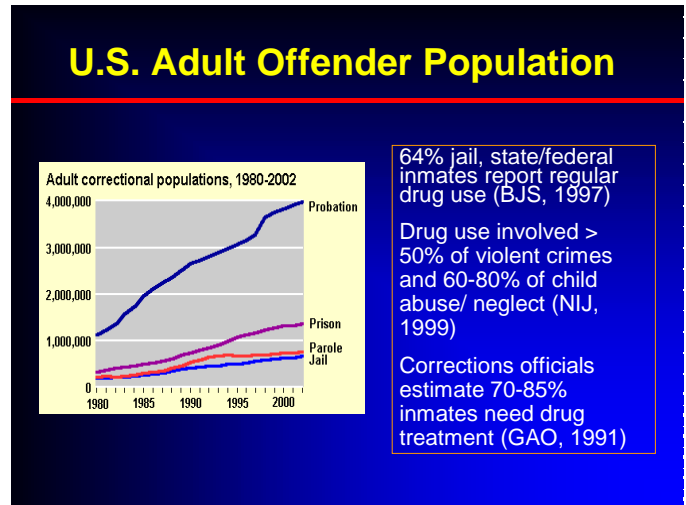


Figure 1

Left untreated, drug-abusing offenders can relapse to drug use and return to criminal behavior. This jeopardizes public health and public safety leading to re-arrest and re-incarceration, further taxing an already over-burdened criminal justice system.

NIDA's Integrated Public Health-Public Safety Response

Research demonstrates that providing treatment to individuals involved in the criminal justice system decreases future drug use and criminal behavior, while improving social functioning. Blending the functions of criminal justice supervision with drug abuse treatment and support services creates an opportunity to have an optimal impact on behavior by addressing public health concerns while maintaining public safety.

NIDA supports a robust research portfolio examining the integration of drug treatment into criminal justice settings, including Criminal Justice Drug Abuse Treatment Studies (CJ-DATS). CJ-DATS is a multi-site set of research studies designed to improve outcomes for offenders with substance use disorders by improving the integration of drug abuse treatment with other public health and public safety systems. CJ-DATS is the result of numerous collaborative relationships between NIDA and other agencies including:

- National Institute on Alcohol Abuse and Alcoholism,
- Substance Abuse and Mental Health Services Administration,
- Centers for Disease Control and Prevention,
- Bureau of Prisons,
- National Institute of Corrections,
- Bureau of Justice Assistance (BJA),
- Drug Court Program Office (BJA), and
- National Institute of Justice.

In fiscal year 2004, NIDA spent \$6.5 million to support research at 10 CJ-DATS sites across the country.

The aims of the NIDA criminal justice portfolio are to (1) develop treatment programs that are available to offenders moving throughout the criminal justice system; (2) enhance HIV and other infectious disease treatment and prevention with offenders; and (3) facilitate the transportation of new treatment models into the criminal justice system.

Treatment Can Work with Criminal Justice Populations

The criminal justice system has several opportunities and mechanisms to refer offenders with substance abuse problems to treatment. This includes conducting assessments after arrest and enforcing treatment program requirements during prosecution and sentencing phases that may include drug courts, diversion programs, pretrial release, and conditional probation with sanctions.

Different treatment approaches are being examined to integrate drug abuse treatment into criminal justice settings including: Treatment Accountability for Safer Communities (TASC), drug courts that blend judicial monitoring and sanctions with treatment, and therapeutic communities (TCs) in prison and/or community settings after release.

Aftercare is a Necessary Component of Treatment

Treatment in prison can reduce drug use and criminal behavior. Research also strongly indicates continuing treatment in the community is needed to sustain these gains. Combining prison-based treatment (e.g., TCs) with community-based treatment upon release reduces an offender's risk of recidivism, decreases substance abuse, improves prospects for employment, and increases pro-social behavior. (See Figure 2.) Case management and referral to other medical, psychological, and social services are crucial components of treatment for many offenders.

Treatment for adults and adolescents is cost-effective because it reduces costs related to drug use, associated health care, and crime-related costs including incarceration. Adding an aftercare component to in and out of prison-based treatment programs results in the greatest cost savings.

Treatment is Effective and Cost-Effective!

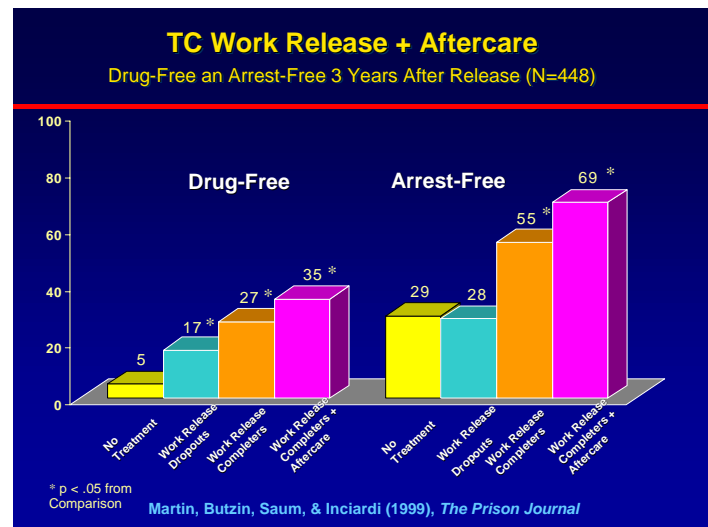


Figure 2

Addressing Public Health Problems Associated with Drug Abuse

Substance-abusing individuals in the criminal justice system have a host of complicated health problems. Involvement in the criminal justice system allows for an opportunity to diagnose and treat these health problems, including infectious diseases. Increasing participation in drug abuse treatment can decrease the spread of these diseases by reducing risky behaviors such as sharing injection equipment and unprotected sex. The prevalence of AIDS is estimated to be approximately 5 times higher among incarcerated individuals than the general population. In addition, individuals in the criminal justice system represent a significant proportion of all cases of hepatitis B and C infection and tuberculosis in the U.S.

For further information please visit NIDA on the web at www.drugabuse.gov or contact:

Geoffrey Laredo
Senior Advisor to the Director
Office of Science Policy and Communications
National Institute on Drug Abuse
301-594-6852
fax 301-443-6277
glaredo@nida.nih.gov