

Treating Offenders with Drug Problems: Integrating Public Health and Public Safety – January 2007

A Research Update from the National Institute on Drug Abuse

Extent of Problem

The connection between drug abuse and crime for adults and juveniles is well known. As seen in Figure 1, the number of adults involved in the criminal justice system has soared to 6.9 million. Many offenders convicted of drug-related crimes have substance abuse problems.

Approximately half of State and Federal prison, as well as local jail, inmates meet standard diagnostic criteria (DSM-IV) for alcohol/drug dependence or abuse. Yet data indicate that only 13% of those needing drug abuse treatment receive it while incarcerated, meaning that many of the 650,000 inmates released back into the community annually have not received needed treatment services.

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.

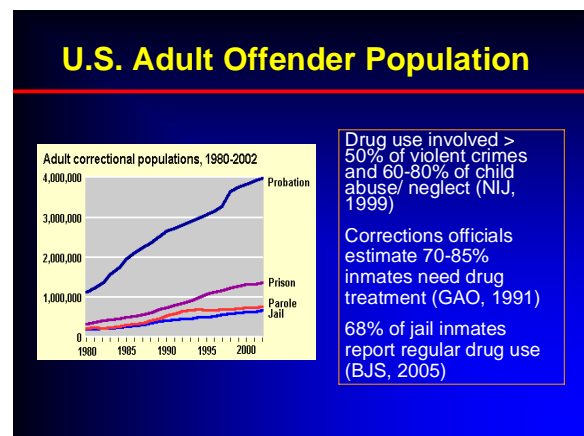


Figure 1

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 (CJDATS). CJDATS 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. CJDATS is the result of numerous collaborative relationships between NIDA and other agencies including:

- National Institute on Alcohol Abuse and Alcoholism,
- National Institute of Mental Health,
- 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 2006, NIDA spent \$6.8 million to support research at 10 CJDATS 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. These include: 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 that 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 prosocial 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, health care, and crime, including incarceration. Adding an aftercare component to in- and out-of-prison treatment programs results in the greatest cost savings.

Treatment is Effective and Cost-Effective!

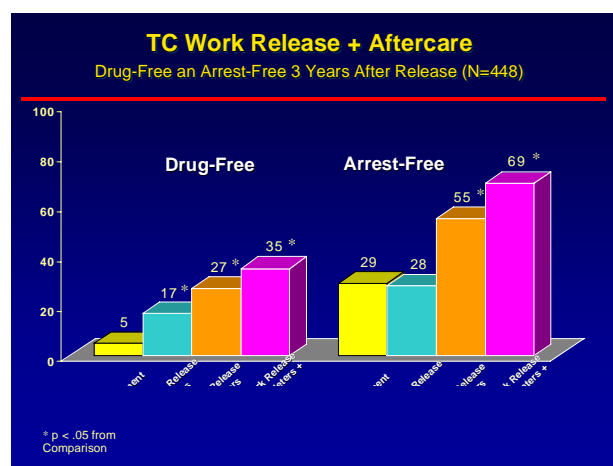


Figure 2

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 provides 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 having 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:

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