Colorado Probation Research in Brief

The Effect of Drug Use, Drug Treatment Participation, and Treatment Completion on Probationer Recidivism

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Summary/Conclusions

Using a sample of probationers from Illinois, the researchers reviewed files and arrest records to explore the relationship between substance abuse treatment and future recidivism. The researchers studied three specific groups to determine outcomes: probationers who needed treatment but who did not receive treatment, probationers who completed treatment, and probationers who started but did not finish treatment.

The researchers found that probationers who successfully completed substance abuse treatment were less likely than any of the other groups to be rearrested; and for those who did complete treatment and did get rearrested, they remained in the community longer before committing a new crime.

Limitations of Information

The study compared probationers who had completed a variety of treatment programs. The length, the fidelity, and the intensity of treatment were not taken into account. Also, there are a number of other variables (such as probationers' motivation, other program involvement) that could have effected the outcomes of this study.

Caveat: The information presented here is intended to summarize and inform readers of research and information relevant to probation work. It can provide a framework for carrying out the business of probation as well as suggestions for practical application of the material. While it may, in some instances, lead to further exploration and result in *future* decisions, it is not intended to prescribe policy and is not necessarily conclusive in its findings. Some of its limitations are described above.

Treatment Completion and Recidivism

The researchers selected their data from the 2000 Illinois Probation Outcome Study. The sample consisted of probationers discharged from supervision during a 30-day period in 2000. A total of 3,017 probationers were divided into three groups: those who needed substance abuse treatment but did not receive it, those who started treatment but dropped out, and those who successfully completed treatment. They compared their sample to "state-level criminal justice records" to determine recidivism rates annually, up to four years.

Some of the general findings showed that "45 percent of the sample was rearrested for any offense and 18 percent were arrested for a drug-related offense." Like many studies, they found that "probationers who were younger, male, or had a number of prior criminal convictions were most likely to recidivate." Employment was found to have a very strong effect on recidivism, as those who were employed were 32 percent less likely to be arrested for any crime and 42 percent less likely to be arrested for a drug crime.

Regarding treatment outcomes and recidivism, those who completed the entire treatment episode were the least likely to reoffend. Their recidivism rate, after four years, was 37 percent; whereas those who did not enter treatment had a rate of 53 percent. The probationers who only partially completed treatment had the worst rates: 67 percent.

In addition to lowered recidivism rates, those who completed treatment were able to remain in the community longer, after supervision, before they were rearrested. For example, their rates were 12 percent and 23 percent after the first and second years, respectively. Those who partially completed were rearrested much quicker: 33 percent and 50 percent after years one and two.

Practical Applications

- √ For unemployed substance abusers, seek out treatment programs that include a job skills component or work opportunities.
- √ During community-based treatment enrollment, work closely with the probationer to maintain or secure employment.
- √ Collaborate with treatment providers to develop a list of sanctions to use in lieu of treatment discharge.
- √ Use case planning to explore barriers to treatment compliance before making a program referral. Address barriers through collaborative goal setting.
- √ Address the probationer's readiness for change by using MI skills to move them toward change talk.
- √ Facilitate employment searches for probationers in treatment or upon release.
- √ When probationers are discharged unsuccessfully from treatment consider the possible causes: Did it involve inaccurate treatment matching? Did the program exhibit fidelity to the treatment model? Did your probationer not have the skills to participate appropriately? Be open to re-enrollment with another program, which might be a better fit.

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