

Treatment Research Institute

Annual Progress Report: 2009 Formula Grant

Reporting Period

January 1, 2010 – June 30, 2010

Formula Grant Overview

The Treatment Research Institute received \$171,222 in formula funds for the grant award period January 1, 2010 through December 31, 2011. Accomplishments for the reporting period are described below.

Research Project 1: Project Title and Purpose

Assessing DUI Offenders' Needs and Risks to Improve Treatment and Supervision in Pennsylvania - Current statutes do not take into account the full range of DUI offenders' needs and risks when determining their disposition and placement. Basing initial treatment considerations on blood alcohol concentration alone may result in missed critical opportunities for providing necessary treatment to those with severe drug or alcohol problems. Following in the footsteps of the Drug Court Risk and Needs Triage (RANT), the purpose of the current project is to develop a brief assessment that incorporates a comprehensive set of evidence based markers of alcohol dependence and predictors of DUI recidivism. The assessment will address both public health and public safety considerations by helping to determine the optimal combination of treatment and/or criminal justice supervision for DUI offenders and promote evidence-based dispositions for DUI offenders.

Anticipated Duration of Project

1/1/2009 - 12/31/2011

Project Overview

Tailoring treatment and supervision to the specific needs and risks of criminal offenders have been shown to result in substantial improvements to the health of the individuals and our communities. In *Phase I* we will identify robust predictors of DUI recidivism (risk). Markers of alcohol dependence (need) will be derived from the criteria for alcohol dependence identified in the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV). During *Phase II* an expert panel will review and finalize the list of predictors of DUI recidivism and markers of alcohol dependence. The panel will include experts in criminal justice research, alcohol abuse and dependence, DUI recidivism, psychometric analysis, and those working with DUI offenders in the criminal justice system. In *Phase III* we will create a preliminary triage assessment that incorporates each of the final set of need and risk items identified by the expert panel. This web-based triage will be modeled after and use the same format as our existing RANT instrument that

is currently used in several drug courts throughout the U.S. This Phase will involve development of a tool that will: (1) be capable of administration in *less than 10 minutes* due to the large numbers of arrestees in most jurisdictions; (2) be capable of administration by *non-clinically trained probation officers* who may have limited interviewing experience; (3) be capable of generating *immediate scoring outputs* that would be available in real time to make treatment and supervision determinations and that could be easily and quickly read and understood by non-clinicians; and (4) transfer de-identified data to TRI's secure server in a highly encrypted manner. During *Phase IV* we will administer the completed triage assessment to 30 first time DUI offenders and 30 repeat DUI offenders (≥ 1 offense) to examine between group differences on each item and risk and need summary scores. Individuals who have been recently arrested and convicted of DUI offenses in Union and Snyder County, PA will be asked by the Probation Officer *at the time of their initial probation interview* if they would be interested in participating in the pilot DUI RANT. Many items will be completed by the Probation Officer through available records, while some items may need to be clarified with the participants. Finally in *Phase V* we will reconvene our expert panel via teleconference to review the psychometric and between group findings, determine suitable scoring algorithms and weighting of items, generate a list of treatment and supervisory recommendations for each quadrant (i.e., high/low risk, high/low need), and outline potential sentencing recommendations to be developed into a policy brief and a future longer-term grant proposal.

Principal Investigator

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Other Participating Researchers

Karen Dugosh, PhD – employed by Treatment Research Institute

Expected Research Outcomes and Benefits

A critical challenge for our field is to devise an evidence based system to reliably assess DUI offenders as soon as possible following the point of arrest not only to help inform their dispositions, but also to direct them to the most effective and cost-efficient treatment services. This requires simultaneous attention to offenders' clinical needs and criminogenic risks. Clinical needs are those areas of dysfunction that if adequately addressed would both improve their health and reduce the likelihood of continued criminal involvement. Criminogenic risks are characteristics of offenders that make them more likely to recidivate and more likely to pose a risk to public safety. Accurate assessment of individuals' needs and risks will help to determine the optimal level of treatment services and criminal justice supervision necessary to ensure more successful outcomes.

This project will develop and evaluate a brief assessment designed to identify need and risk factors related to DUI recidivism. The expert panel will generate specific recommendations for treatment placement and dispositions for DUI offenders as a function of their level of need and risk. Although the current project may have no direct benefit for current project participants, the triaging system developed through the project may help future DUI offenders receive an optimal combination of treatment and/or criminal justice supervision. This could have significant benefits for the Commonwealth by addressing both issues of public health and public safety.

Summary of Research Completed

The plan for this project included three goals to be completed by June 30, 2010. The descriptions of accomplishments of each of these three goals are outlined in the paragraphs below.

We have completed our first goal of conducting a systematic literature review to identify robust predictors of DUI recidivism (risk). To accomplish this we began by generating a set of clearly defined search terms, which included 32 DUI related terms and 16 recidivism-related terms. We then used these terms to conduct searches and collect abstracts using PsychInfo, PubMed, and CJ Abstracts. We reviewed all abstracts for terms resulting in less than twenty hits for redundancy and relevance. Initial inclusion required all publications to be: (1) published between 1990 and the present, (2) published in English, (3) conducted in the United States, (4) be data driven, and (5) identify predictors of recidivism. This resulted in 19 search terms relevant to DUI and 15 relevant to recidivism. The DUI relevant terms and recidivism relevant terms were then crossed and searched in all three databases. Once again, terms were eliminated when less than twenty hits were found and deemed to be irrelevant or redundant. This resulted in the retention of 14 of each type of search term. Full articles were then obtained and reviewed. A summary chart was created labeling author, title and year of publication, study design, sample size, sample type, type of analysis, predictors examined, predictors identified, and outcomes. This resulted in 54 relevant articles. We then generated an annotated bibliography to summarize the main findings from these articles.

Our second goal involved generating a set of markers of alcohol and substance abuse dependence (clinical need) and a set of predictors of DUI recidivism (risk). Needs markers were gleaned from the most pathognomic criteria for drug and alcohol dependence identified in the DSM-IV, while markers of recidivism risk were isolated from the results of our systematic literature review. The preliminary list of needs and risk indicators was then reviewed by project scientists and research staff, with indicators being eliminated or added as new scientific evidence became available. The final listing consists of markers critically evaluated for their utility and reliability as predictors of substance misuse, anti-social behavior, arrest and related criminal activity. This listing was then compared to the indicators used in our current RANT™ for relevance, consistency and continuity.

Our third goal, which included convening an expert panel to review and finalize the list of predictors of need and risk was briefly delayed due to unforeseen difficulties in coordination of members schedules; however, it is now scheduled and this delay will not significantly deter progress of the project. A 12-month no-cost extension has been requested and approved to offset

these start-up delays. To date, we have assembled an impressive five-member panel of experts in criminal justice research and practice, alcohol abuse and dependence, DUI recidivism, and psychometric analysis. All members of this expert panel have been informed about the project goals and intent and their role in informing the DUI RANT development process.

The annotated bibliography referenced above has been distributed to these experts for review and feedback on completeness and relevance. The meeting agenda has been finalized and includes a description of the current study, a demonstration of the existing RANT™, a discussion of the vision for the DUI RANT, item development for recidivism risk and clinical needs, a review of the predictors of recidivism, and finally, planning for the next meeting via conference call.