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**INTER-AMERICAN DRUG ABUSE
CONTROL COMMISSION
CICAD**

Secretariat for Multidimensional Security

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TREATMENT OF JUSTICE INVOLVED CLIENTS WITH SUBSTANCE USE DISORDERS

Treatment of Justice Involved Clients with Substance Use Disorders

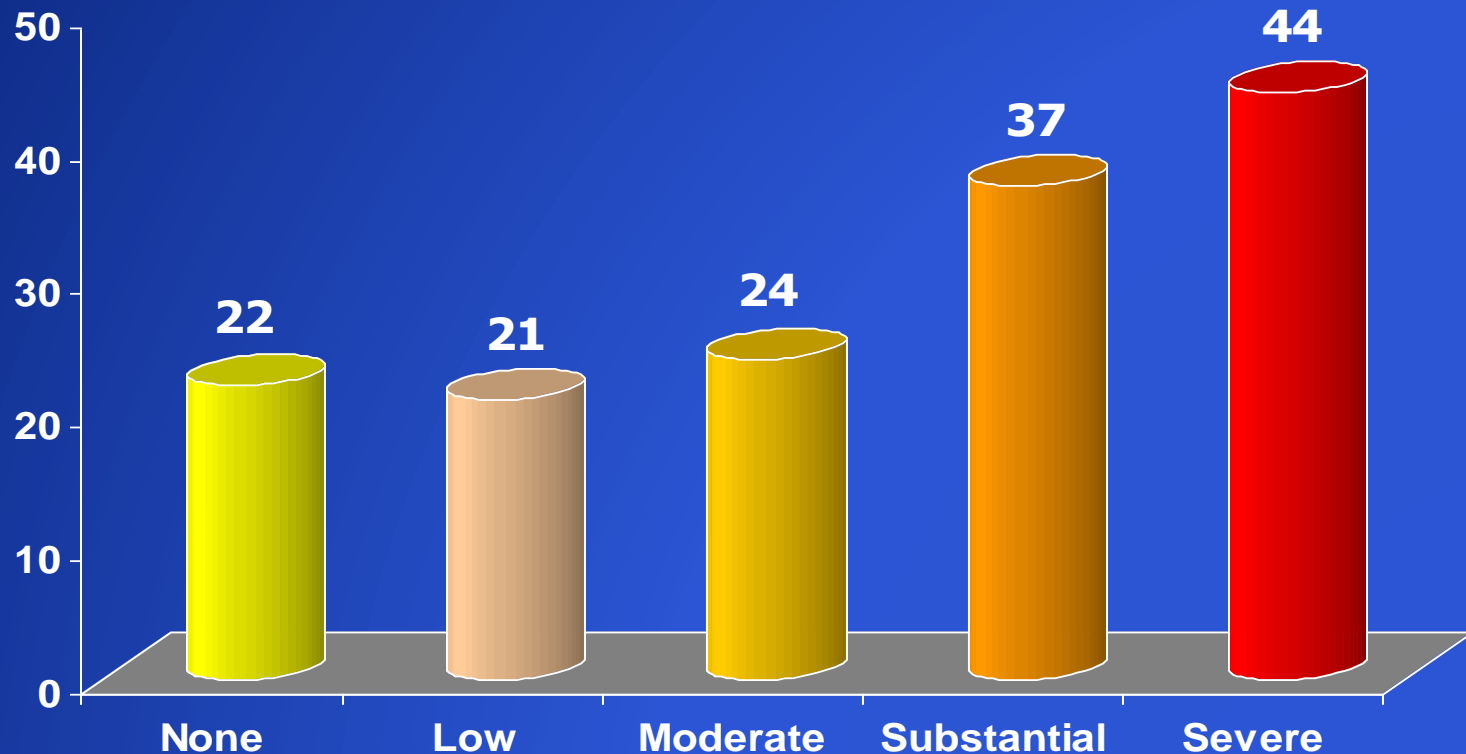


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Drug Use Severity and Incarceration

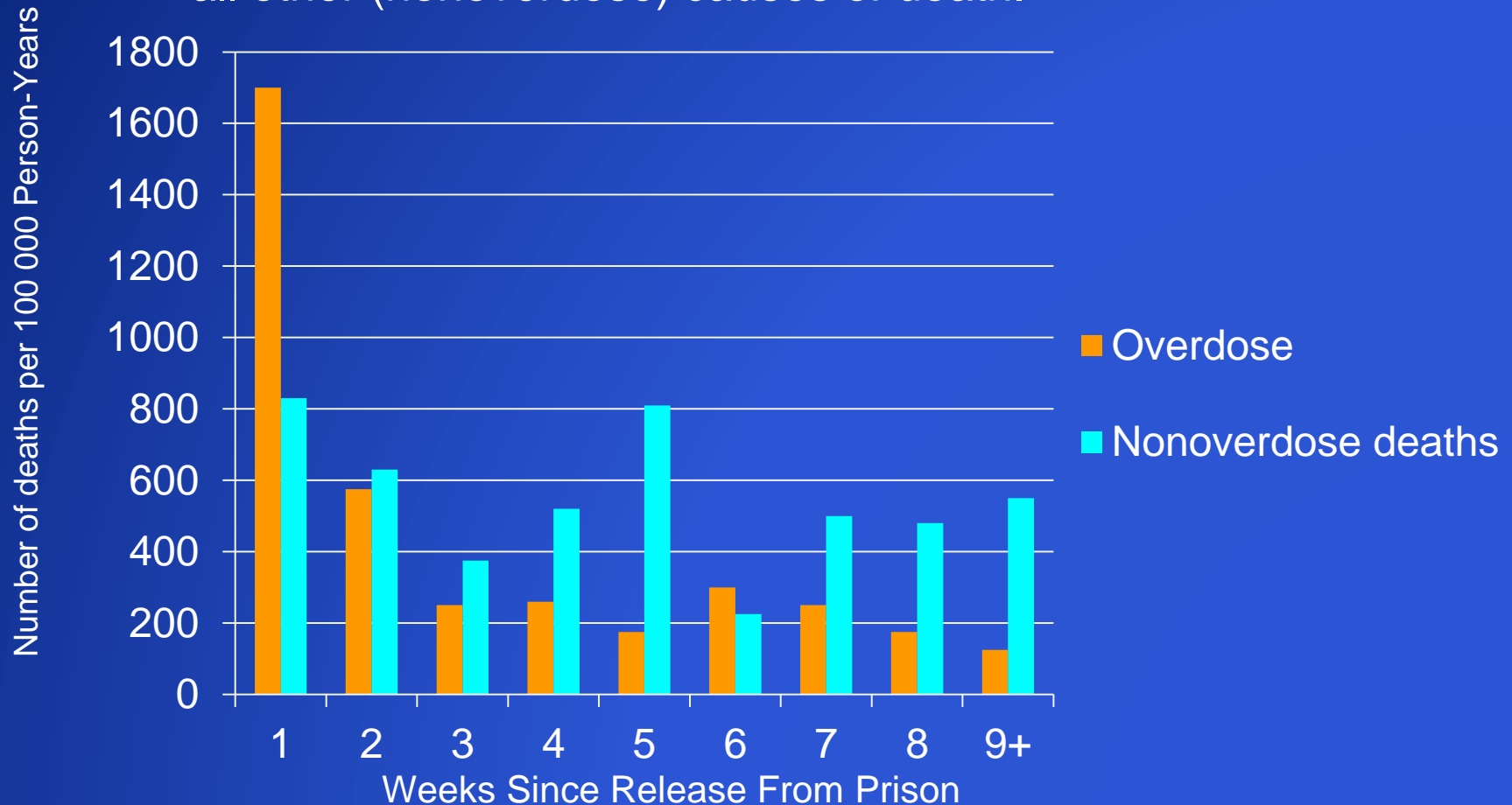
% Reincarceration
(15 Months)



Drug Use Severity

People in CJ System with Opioid Use Disorders are Dying

Mortality rate, by week since release, for overdose and all other (nonoverdose) causes of death.



What is the goal of the interventions in this group?

- The goal is not just to help them to achieve sobriety, employment, and recovery, but most importantly to protect public safety by reducing criminal recidivism.
- Creating “sober criminals” as a result of treatment intervention is NOT a good outcome.

First, let's review the science

HOWEVER
BEAUTIFUL THE
STRATEGY,
YOU SHOULD
OCCASIONALLY
LOOK AT THE
RESULTS.

Winston Churchill



What does the research tell us?



Key issue

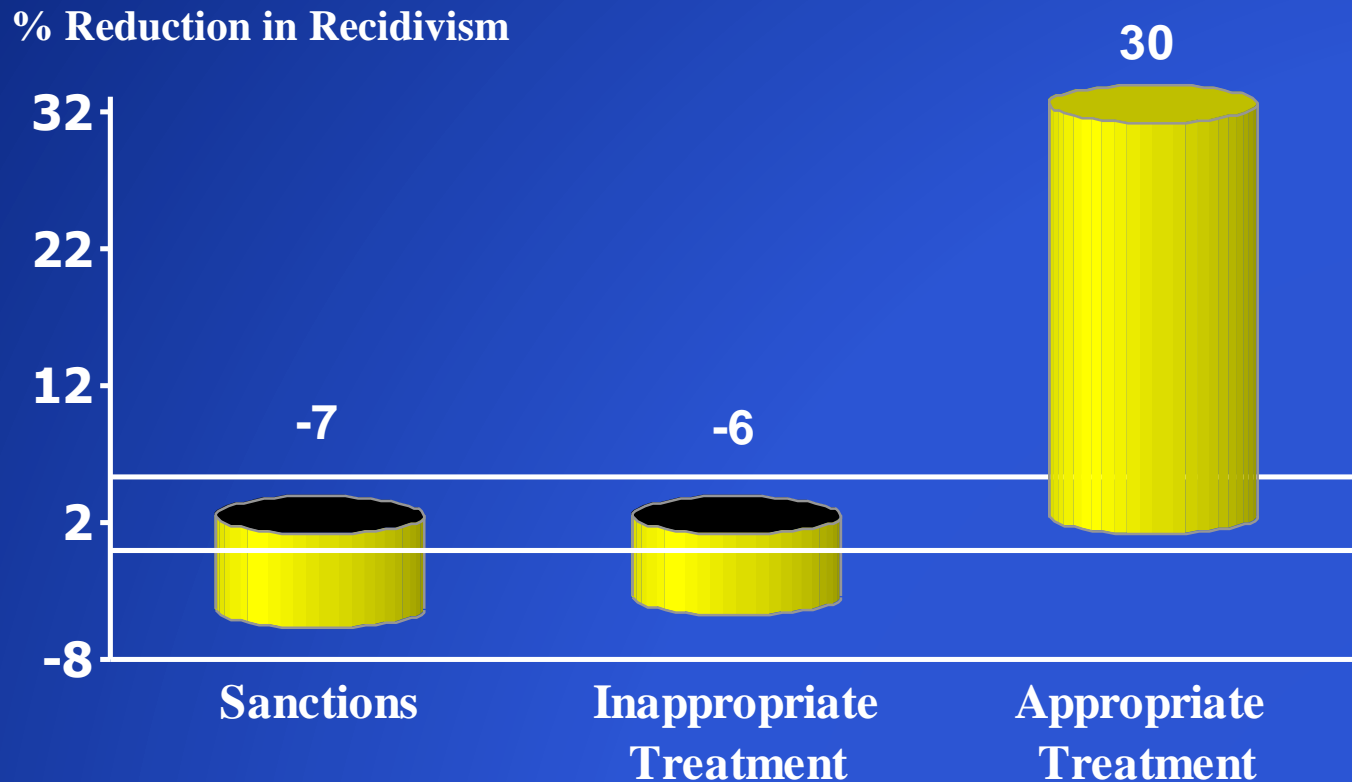
- We need to appreciate that substance use disorders are chronic and relapsing brain conditions with behavioral expression
- This is hard to deny considering the amount of evidence from genetic, neuroimaging and many other studies.

Here is what we know from science

- Not a single study of the effects of punishment (custody, mandatory arrests, increased surveillance, etc.) has found consistent evidence of reduced substance relapse rates and criminal recidivism.
- Multiple studies indicated that a large number of justice involved clients actually become more criminogenic following incarceration.

Criminal Sanctions Vs. Treatment!

(meta-analysis of 154 studies)



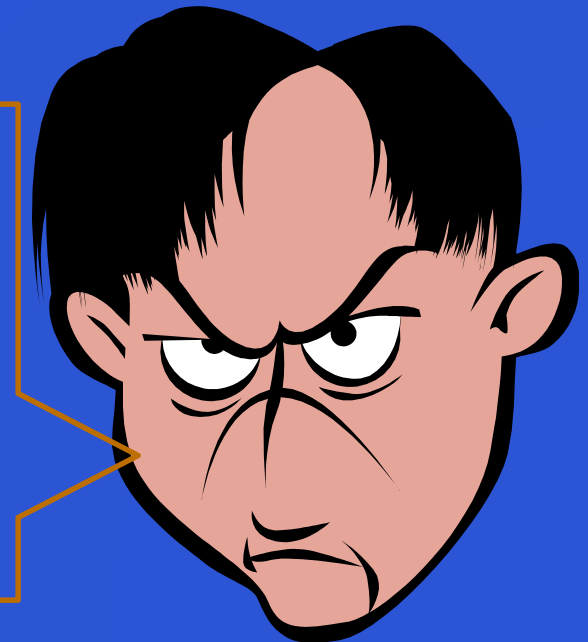
Andrews, D.A. 1994. An Overview of Treatment Effectiveness. Research and Clinical Principles, Department of Psychology, Carleton University. The N refers to the number of studies.

You can control behavior to some extent with coercion, and threat of punishment

HOWEVER

Punishment *suppress* behavior only as long as you have external control, and there will be a predictable rebound when control fades

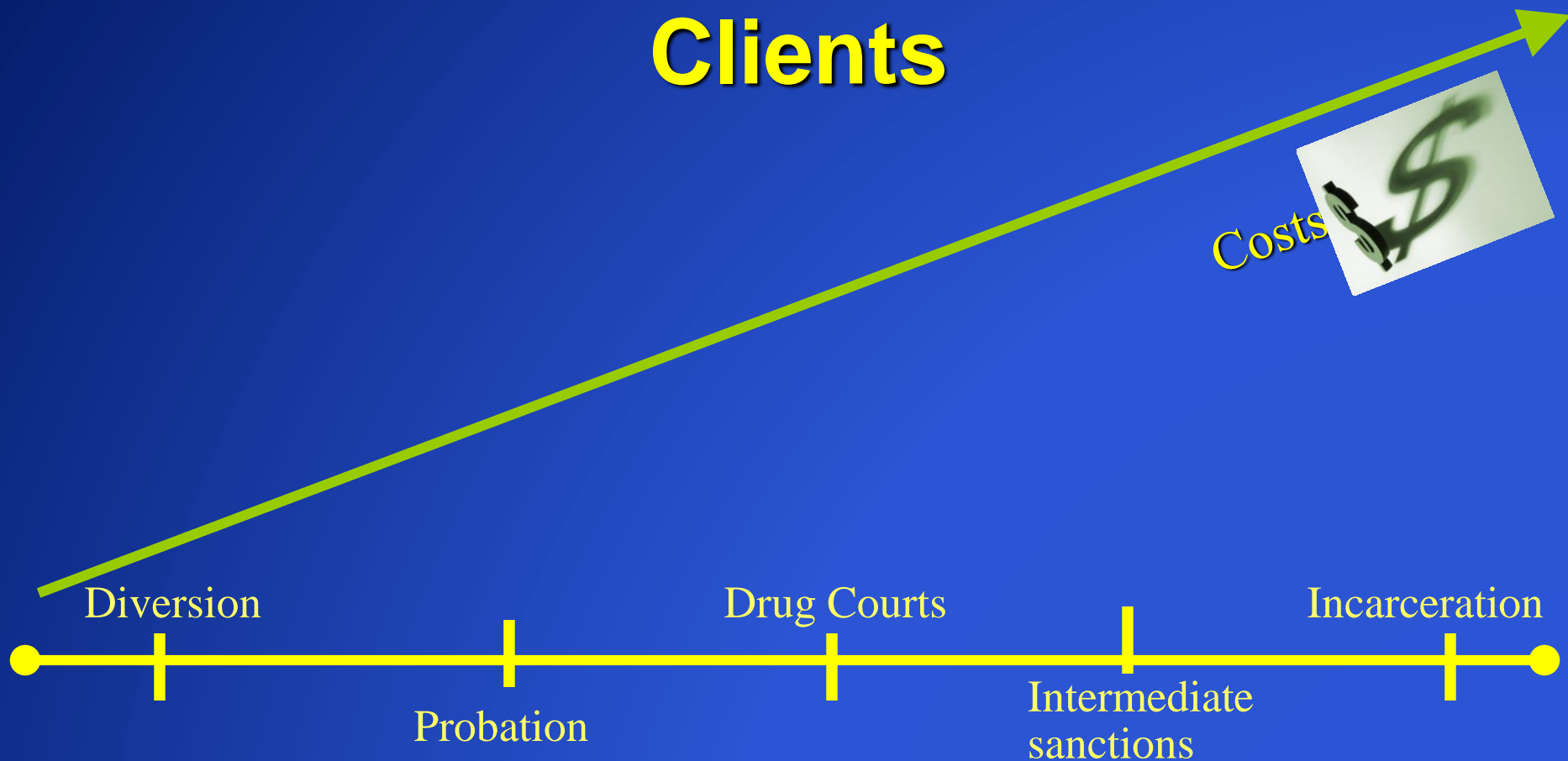
*You better!!!
Or else!!!*



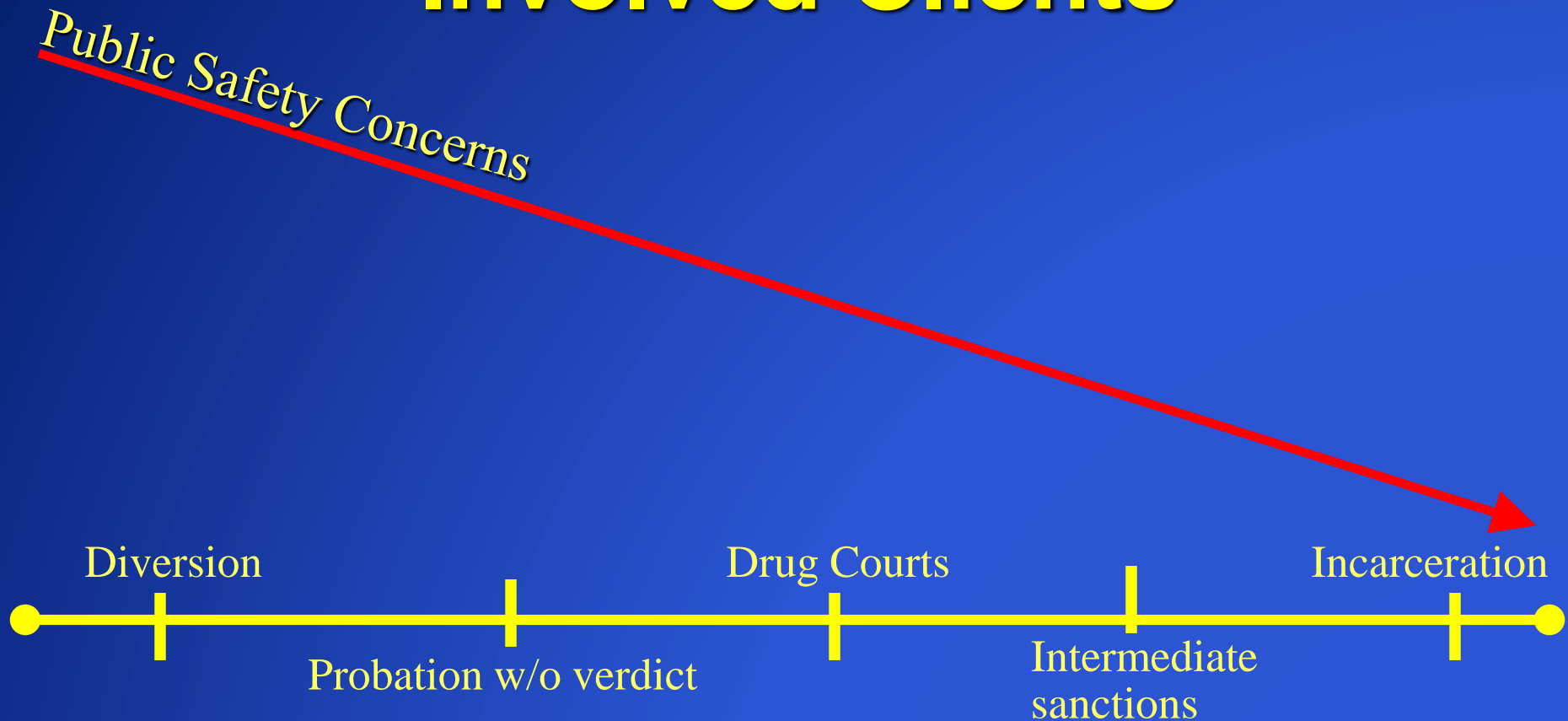
Interventions for Justice Involved Clients



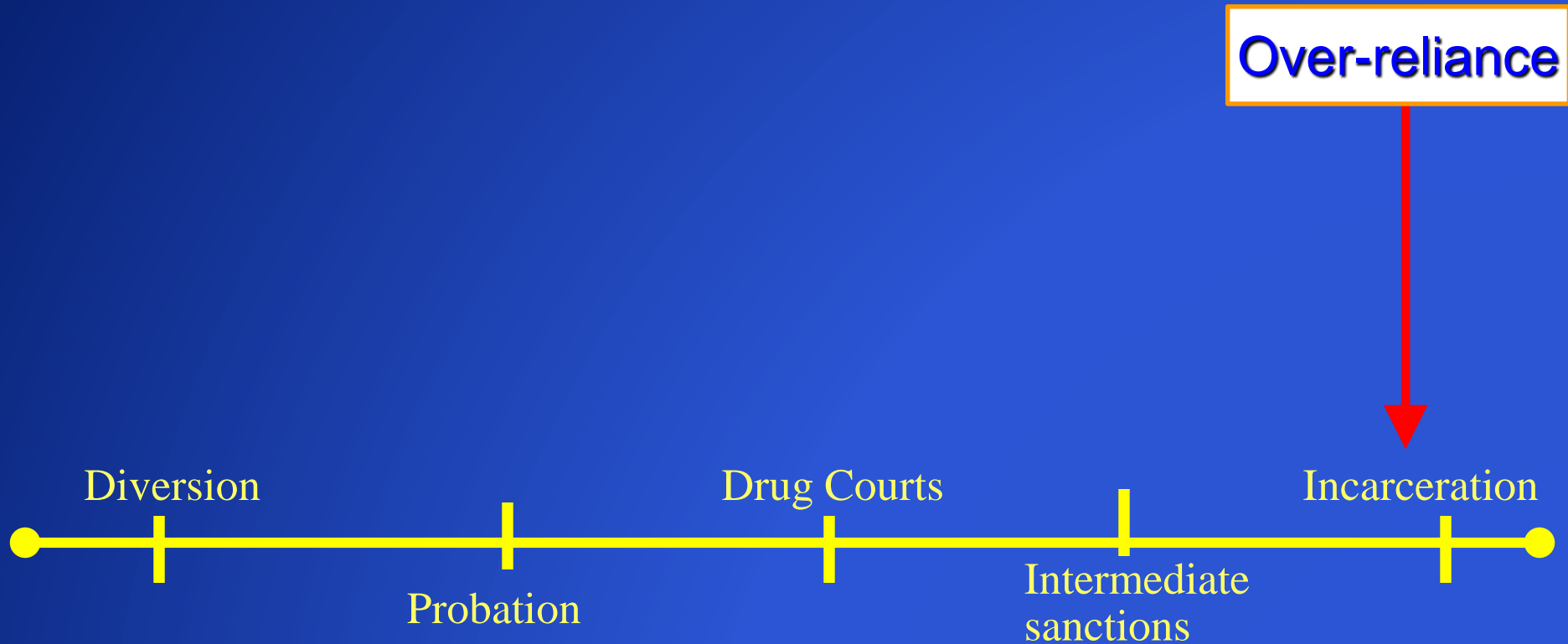
Interventions for Justice Involved Clients



Interventions for Justice Involved Clients



What if we put them all in prisons?



If we rely on sanctions only

Criminal Recidivism in 3 Years

- 68% re-arrested
- 47% convicted
- 50% re-incarcerated

Relapse to Drug Abuse in 3 Years

- 95% relapse



What if we send to all to treatment?

Over-reliance



Diversion

Drug Courts

Incarceration

Probation

Intermediate
sanctions



If we rely on treatment only

Attrition

- 50% - 67% don't show for intake
- 60% - 80% drop out in 3 months
- 70% drop out within 2 - 6 months
- 90% drop out in 12 months



Addressing Drugs and Crime Separately

Public Health Approach

- disease
- treatment

High Attrition

Public Safety Approach

- illegal behavior
- punish

High Recidivism

**What if we combine the best of
both approaches?**

Four Questions to Ask if We Want to Provide Effective Interventions

1. WHOM TO TREAT?

2. WHAT TO TREAT?

3. HOW TO TREAT?

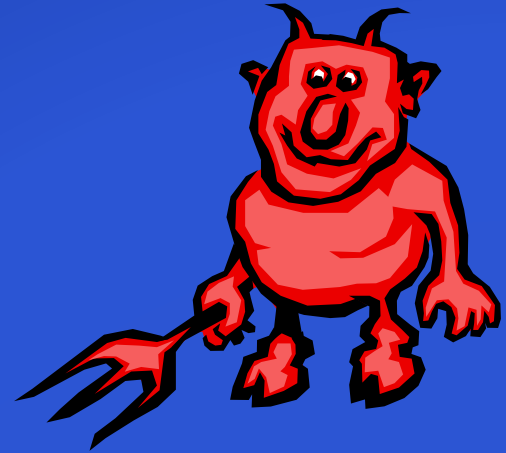
4. HOW WELL TO TREAT?

Risk Principle

- Risk essentially means a difficult prognosis
- The higher the risk level, the more intensive the supervision and accountability should be; and vice versa
- Mixing risk levels is contraindicated

Most Common Criminogenic Risks

- Criminal onset < 16 years
- Prior rehabilitation failures
- History of violence
- Antisocial Personality Disorder
- Familial history of criminal involvement
- Criminal associations
- Criminogenic thinking and sentiment



Question 2: What to Treat?

Need Principle – target criminogenic need factors

- These are needs that are linked to criminal behavior (homelessness, HIV, Hep.C., unemployment, etc.)
- Some are criminogenic, others are not
- *The most common criminogenic needs – substance use disorders, criminal thinking, criminal affiliations*
- Any treatment not targeting criminogenic needs is counter-productive to effectiveness.

Risk & Needs Matrix

High Risk

Low Risk

High Needs

Low Needs

Risk & Needs Matrix

High Risk

Low Risk

High
Needs

Accountability
&
Treatment

Low
Needs

Risk & Needs Matrix

High Risk

Low Risk

High Needs

Accountability & Treatment

Treatment

Low Needs

Accountability & Treatment	Treatment

Risk & Needs Matrix

High Risk

Low Risk

High
Needs

Accountability
&
Treatment

Treatment

Low
Needs

Accountability

Risk & Needs Matrix

	High Risk	Low Risk
High Needs	Accountability & Treatment	Treatment
Low Needs	Accountability	Prevention

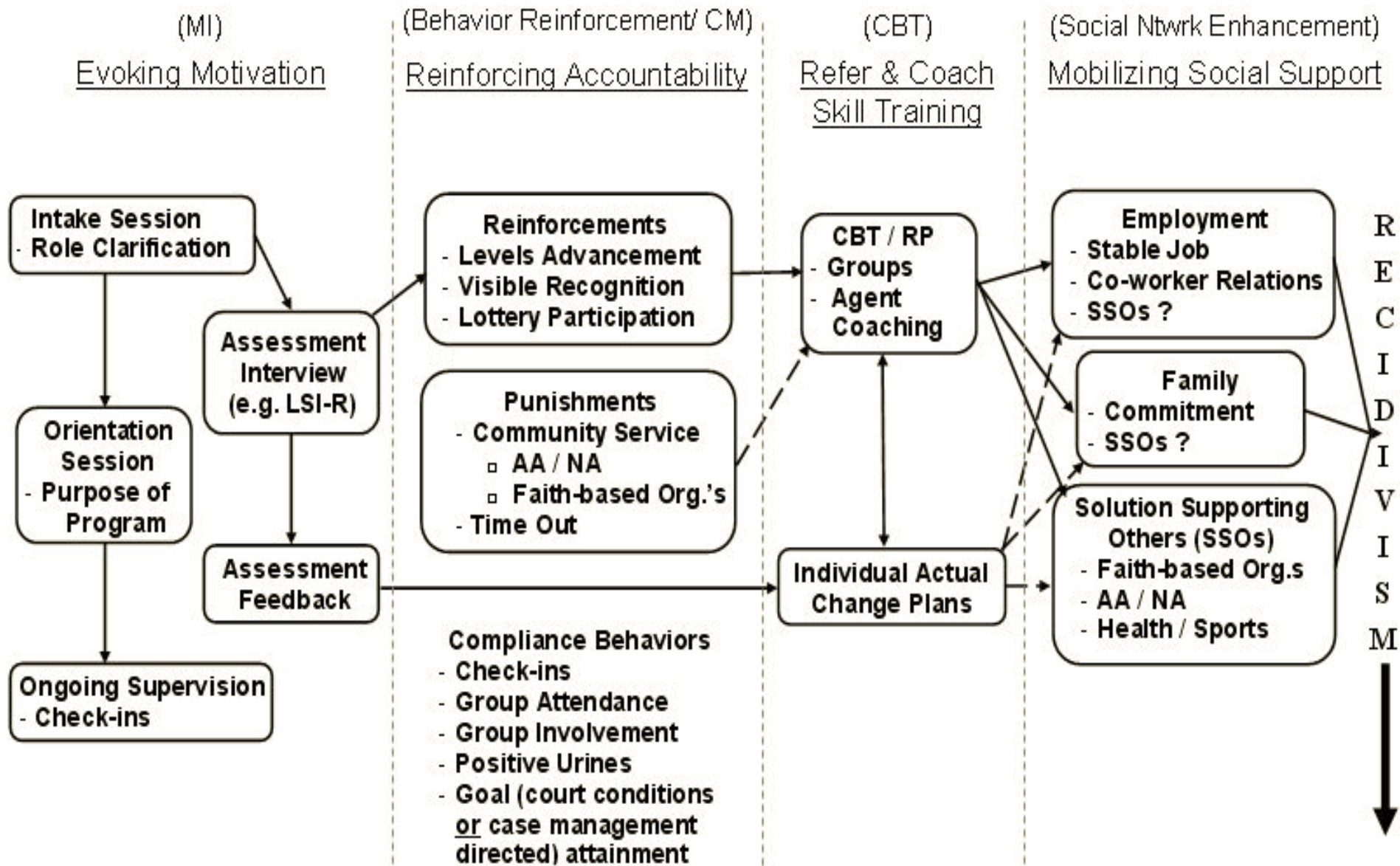


How to Treat?

Effective treatment models

- Residential TC's
- CBT
- Contingency Management
- Motivational Interviewing
- Medications
- Recovery Management

FOUR SUPERVISION STRATEGIES FOR REDUCING RECIDIVISM

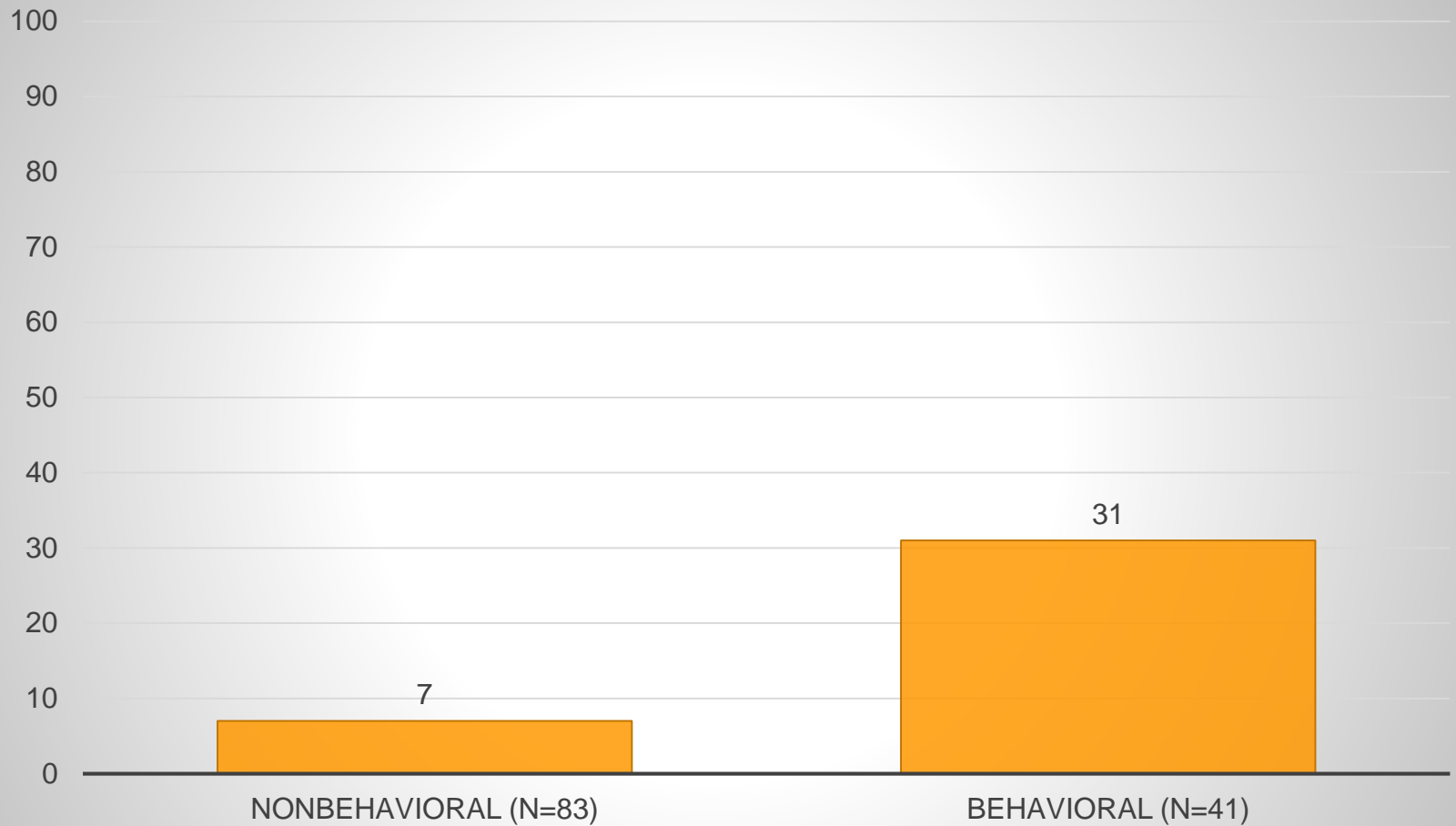


Treatment Should Be Behavioral in Nature

- Use rewards and sanctions effectively
- Train, practice, rehearse pro-social alternatives with offenders
- Completion criteria should be based on acquisition of pro-social skills
- Catch them doing something right and reinforce it
- Do not delay negative feedback when necessary

Behavioral vs. Non-behavioral

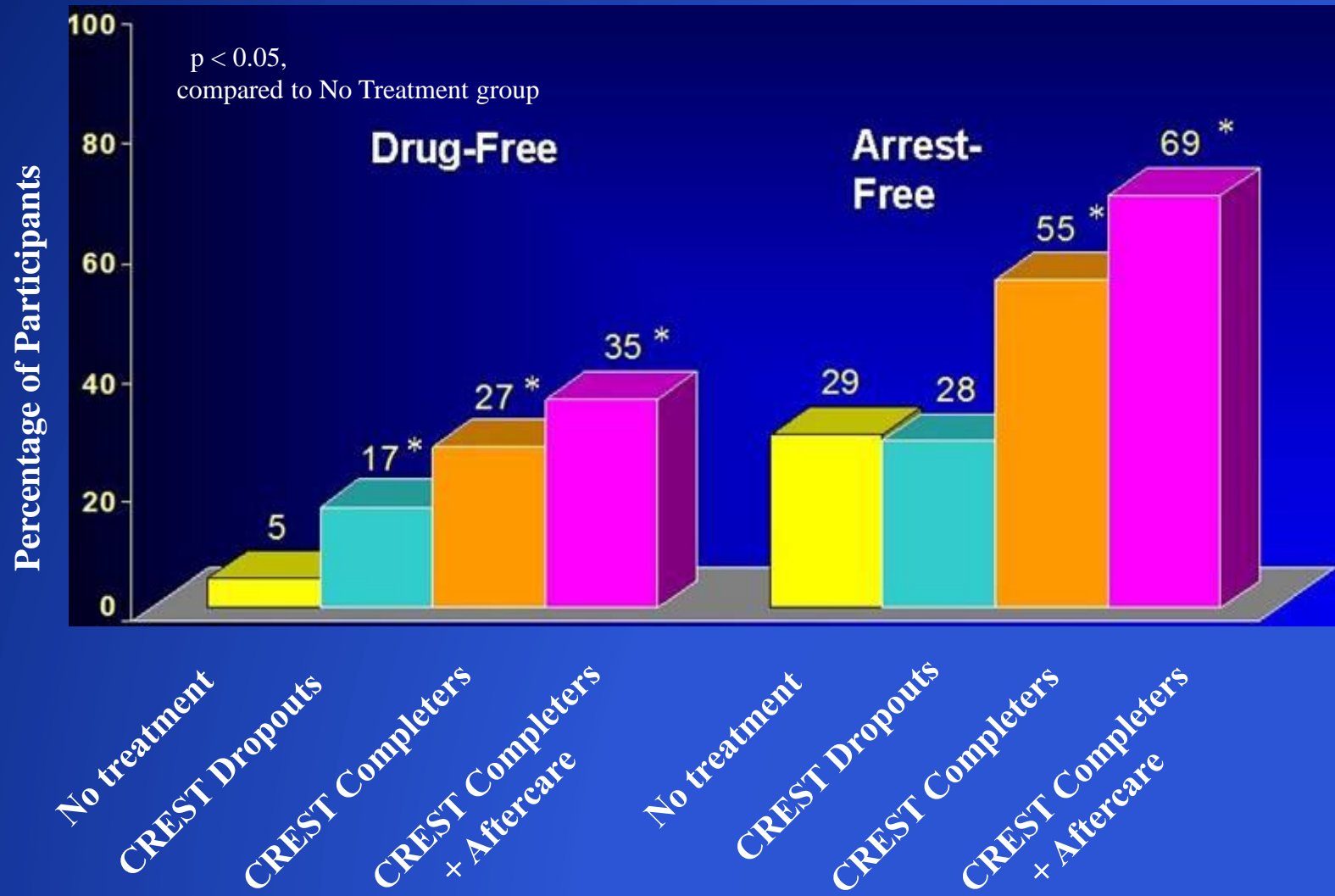
Reduced Recidivism



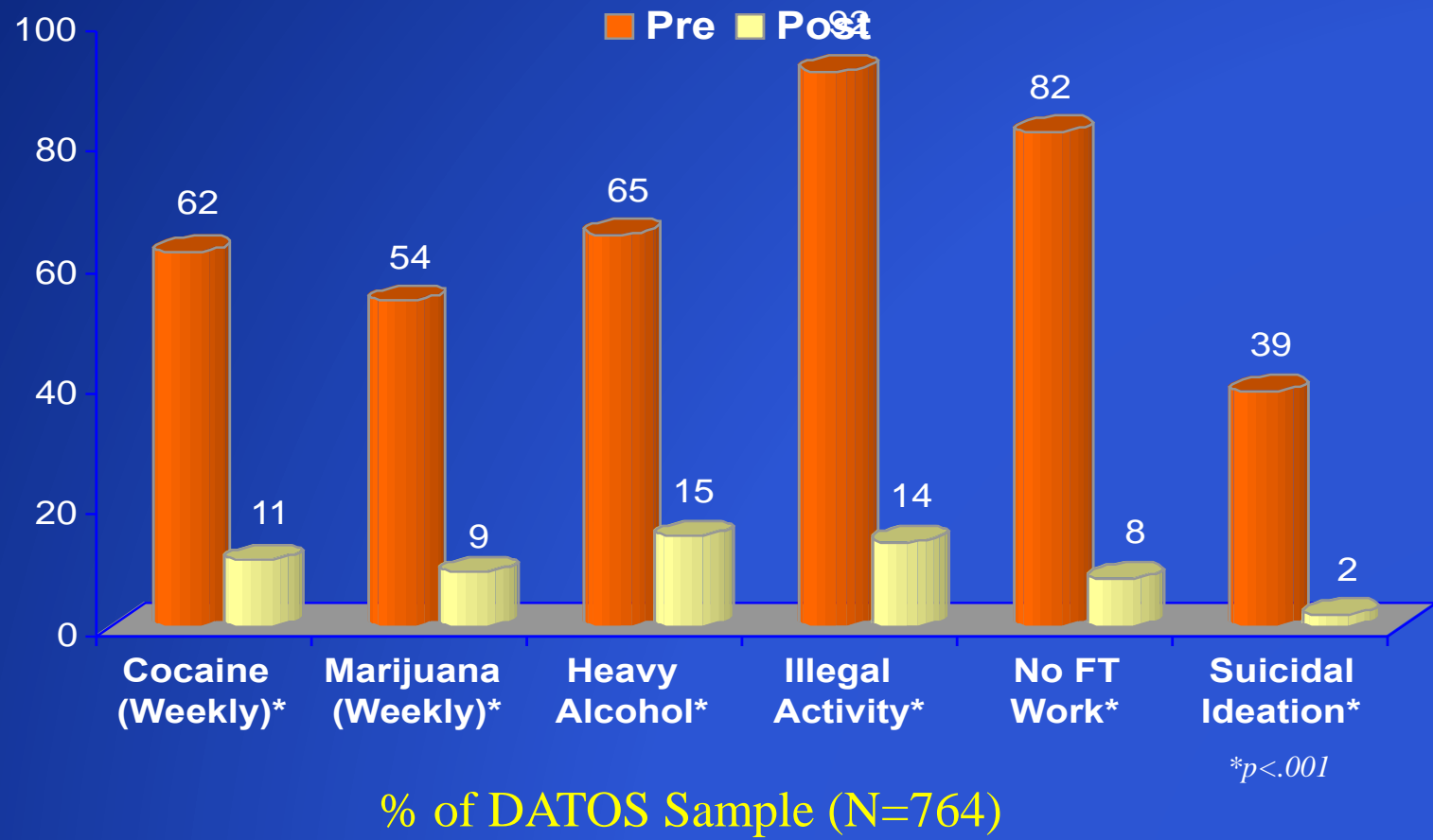
The N refers to the number of studies.

Continuity of care and care management are essential

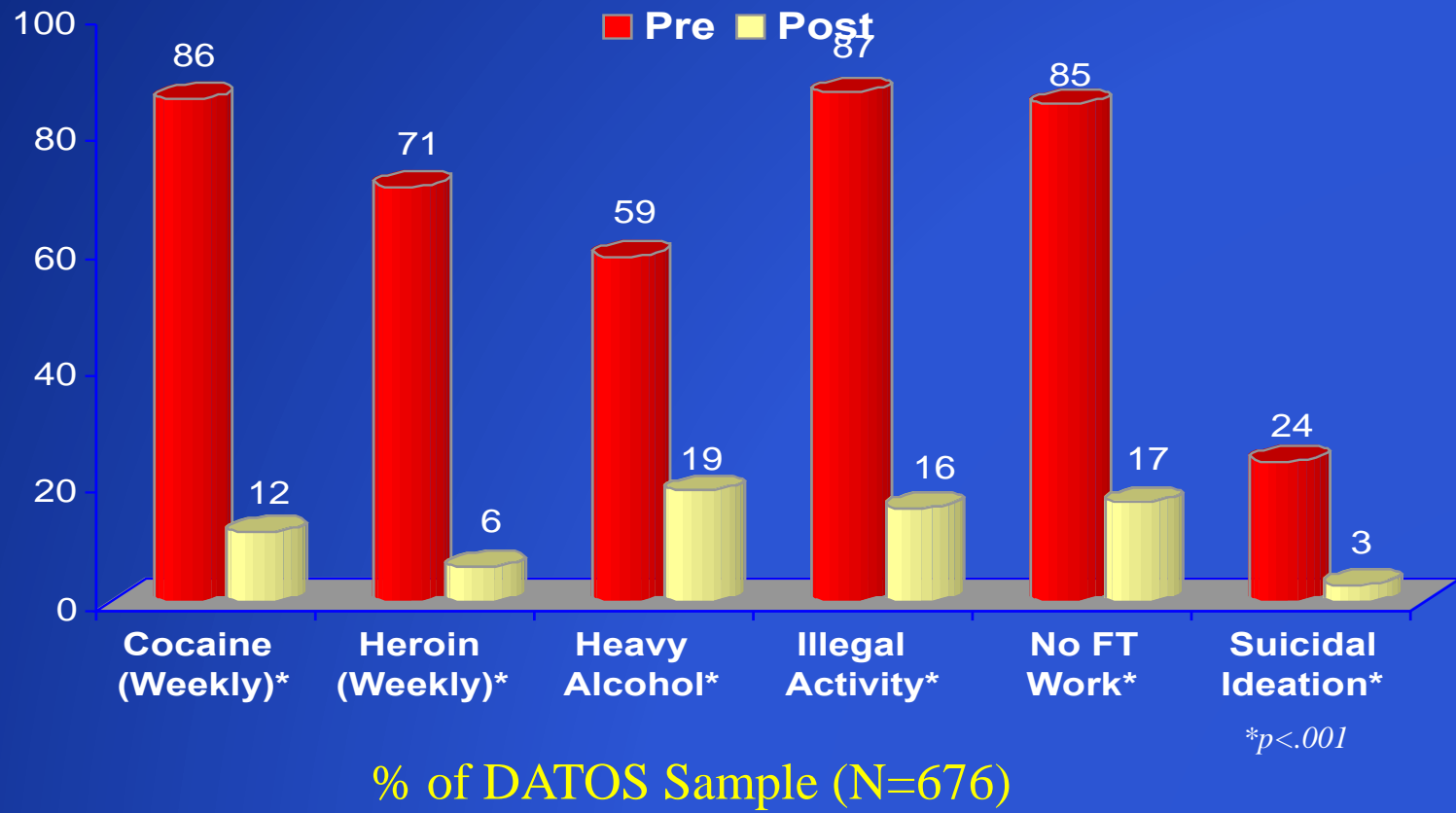
Delaware Work Release Therapeutic Community (CREST) + Aftercare
3 Years After Release (N=448)



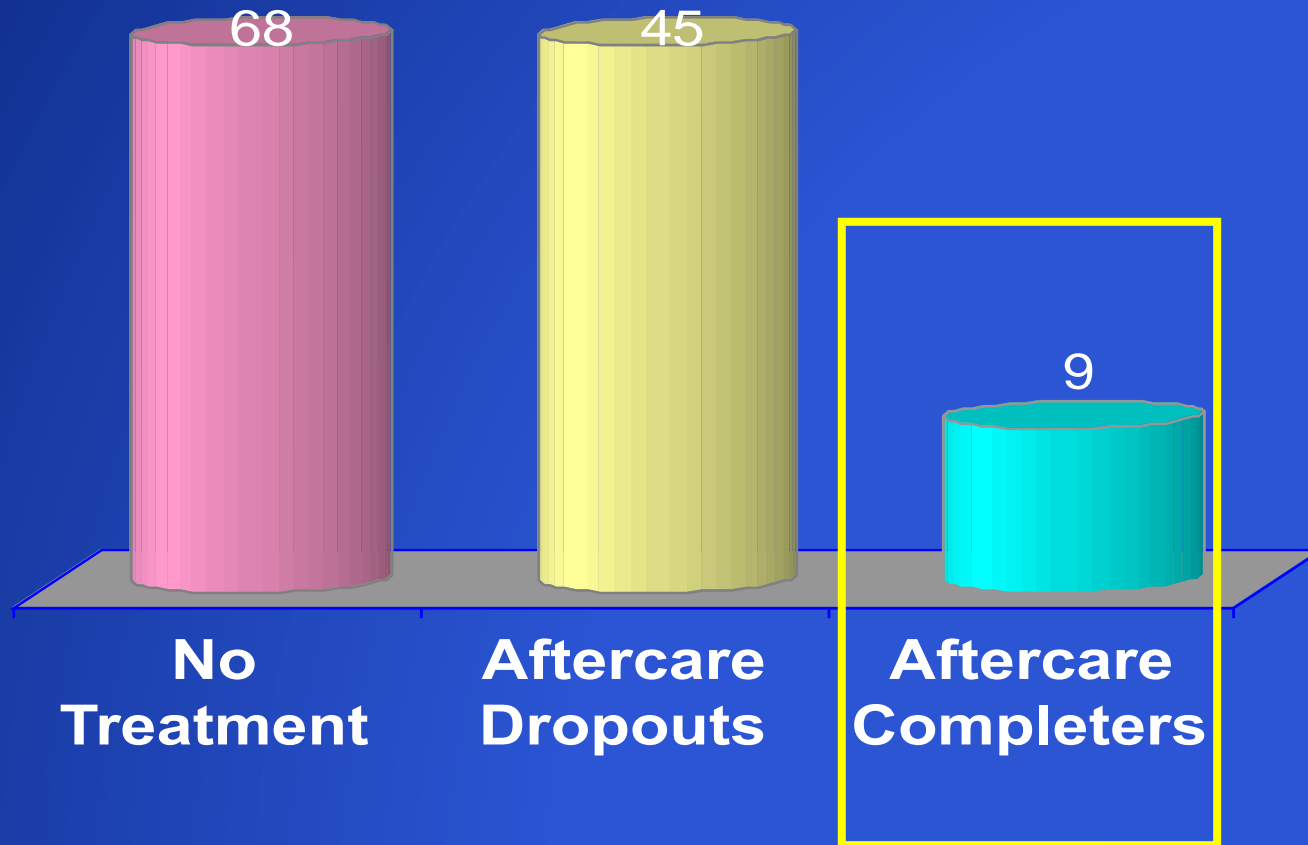
Outpatient Drug-Free (ODF) Treatment Changes from Before to After Treatment



Long-Term Residential (LTR) Treatment Changes from Before to After Treatment



Texas/New Offenses Only: 3-Year Return-to-Custody Rates (%)



Pre-Incarceration
“Old Environment”



Incarceration
“Artificial Environment”



Post-Incarceration
“New Environment”

Behavioral Interventions

Re-Integration with Family/Supports

Vocational Training/Education

MAT

Medical Care

Psychiatric Care

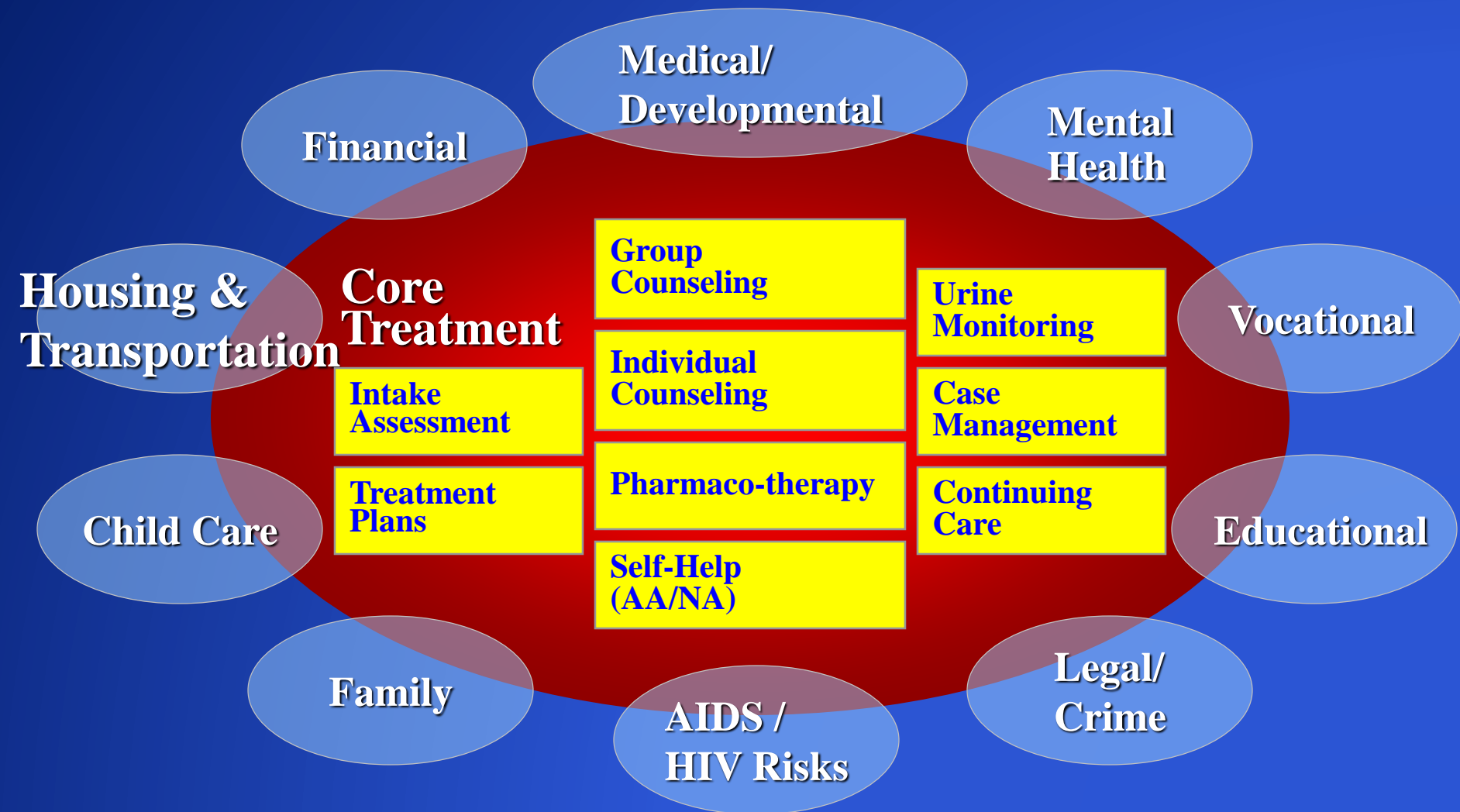
Drug Treatment Needs

Basic Needs (food, shelter, safety)

Time →



Many Pieces to the Puzzle



Treatment Integrity

Provide treatment as it was intended to
be provided

If you have more questions...

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