AADCP Conference

Research Says... Best Practices in Assessment, Management, and Treatment of Impaired Drivers

Mark Stodola
Probation Fellow

American Probation and Parole Association
Provide participants with information about evidence based assessments, management tools and technologies that can be used to enhance their effectiveness in the supervision of impaired drivers.
Learning Objectives

• Identify how DWI assessments impact supervision strategies

• Identify at least two supervision strategies that are effective in the supervision of DWI offenders

• Explain how assessments can help deliver the most appropriate treatment dosage based on offender risk and needs
So, what’s the problem?

In 2014, there were 1.1 million drivers arrested for driving while under the influence.

In 2014 there were 9,967 alcohol related traffic fatalities.

94 million drunk driving episodes in 2013.
# Arizona DWI Fatalities

<table>
<thead>
<tr>
<th>Alcohol-Impaired Driving Fatalities (BAC=.08+)</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>206</td>
<td>212</td>
<td>230</td>
<td>219</td>
<td>199</td>
</tr>
</tbody>
</table>
# Traffic Safety Facts for Arizona: 2010-2014

**Fatalities in Crashes Involving an Alcohol-Impaired Driver (BAC = .08+)**

<table>
<thead>
<tr>
<th>County Name</th>
<th>Fatalities</th>
<th>Fatalities Per 100,000 Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Apache County</td>
<td>11</td>
<td>8</td>
</tr>
<tr>
<td>Cochise County</td>
<td>5</td>
<td>4</td>
</tr>
<tr>
<td>Coconino County</td>
<td>12</td>
<td>10</td>
</tr>
<tr>
<td>Gila County</td>
<td>6</td>
<td>5</td>
</tr>
<tr>
<td>Graham County</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Greenlee County</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>La Paz County</td>
<td>0</td>
<td>9</td>
</tr>
<tr>
<td>Maricopa County</td>
<td>80</td>
<td>94</td>
</tr>
<tr>
<td>Mohave County</td>
<td>11</td>
<td>6</td>
</tr>
<tr>
<td>Navajo County</td>
<td>14</td>
<td>11</td>
</tr>
<tr>
<td>Pima County</td>
<td>38</td>
<td>28</td>
</tr>
<tr>
<td>Pinal County</td>
<td>12</td>
<td>22</td>
</tr>
<tr>
<td>Santa Cruz County</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Yavapai County</td>
<td>9</td>
<td>10</td>
</tr>
<tr>
<td>Yuma County</td>
<td>5</td>
<td>3</td>
</tr>
</tbody>
</table>
Other Arizona Statistics

- DWI fatalities represent 26% of all traffic fatalities in Arizona. National average is 31%
- Alcohol related crash injuries-3,480 (2013)
- DWI Arrests- 26,843
- DWI Convictions- Not available
- Tax payer subsidy of fatalities- $1 billion
- 74% of alc. Fatalities had .15% BAC
- 5 time offenders- Not available
4,751,400 individuals under community supervision in 2013

15% of this probation population have been convicted of DWIs

8% of the probation population have been convicted of multiple DWIs
High risk drunk drivers:
   BAC level of .15 or above
   More than one drunk driving arrest

Highly resistant to changing their behavior

Less than five percent of these drivers account for about 80 percent of the impaired driving episodes
White males late 20’s to early 30’s
Low level of education
Unemployed/Under-employed
Unmarried
More Hostile
33% of males, 50% of females have a psychiatric disorder
High risk drunk drivers-
Responsible for 6 of 10 alcohol related deaths
GOOD NEWS!

• Two Thirds of DWI Offenders self correct!
Unique challenges to supervising the other 1/3 of impaired drivers
Unique challenges

• Don’t ID as Criminal
• More difficult to catch
• “I’d rather do my time”

Competing interests of Probation
Three approaches to addressing behaviors of drunk drivers

- Prevent Driving
- Prevent Drinking After Drinking
- Prevent Drinking
GUIDELINES FOR COMMUNITY SUPERVISION OF

DWI

OFFENDERS
Guidelines for the Community Supervision of DWI Offenders

Guideline 1

Investigate, collect, and report relevant and timely information that will aid in determining appropriate interventions and treatment needs for DWI offenders during the release, sentencing, and/or supervision phases.
Assessing for Risk/Needs Among Impaired Drivers
Are abuse or addiction the only causal factors we should be concerned about?
What is “Risk”?  

The probability of an individual convicted of one DWI being arrested for a subsequent DWI offense.
Why is it important?

Allocate Resources

Identify Treatment

INTERVENTION
Major Risk Areas of Recidivism
Additional Areas for Consideration

Responsibility & Willingness

How defensive?
Risk Assessment Instruments

- ADS (Alcohol Dependence Scale)
- ASUDS-R (Adult Substance Use and Driving Survey – Revised)
- ASI (Alcohol Severity Index)
- AUDIT (Alcohol Use Disorders Identification Test)
- IDTS (Inventory Drug-Taking Situations)
- DAST (Drug Abuse Screening Test)
- LSI-R (Level of Service Inventory-Revised)
- MAST (Michigan Alcoholism Screening Test)
- SASSI (Substance Abuse Subtle Screening Inventory)
- RIASI (Research Institute on Addiction Self Inventory)
- CARS (Computerized Assessment and Referral System)


What risk assessment challenges do you face with DWI offenders?
Impaired Driving Assessment (IDA)
Goals of the IDA

2. Provide guidelines for identifying effective interventions and supervision approaches that reduce the **risk** of negative outcomes in treatment and community supervision.

3. Provide preliminary guidelines for service **needs** for DWI clients.

4. Estimate the level of **responsivity** of clients to supervision and to DWI and AOD education and treatment services.

5. Identify the degree to which the client’s DWI has jeopardized **traffic safety** and to address this in the supervision plan.
2 Components of the IDA

Self-Report (SR)
34 questions
- Mental health and mood adjustment;
- AOD involvement and disruption;
- Social and legal non-conformity; and
- Acknowledgment of problem behaviors and motivation to seek help for these problems.

Evaluator Report (ER)
11 questions
- Past DWI/non-DWI involvement in judicial system;
- Prior education and treatment episodes;
- Past response to DWI education and/or treatment; and
- Current supervision and services status.
PSYCHOSOCIAL
Items 1-8

LEGAL NON-CONFORMITY
Items 18-25

AOD INVOLVEMENT
Items 9-17

ACCEPTANCE/MOTIVATION
Items 26-29, 32, 34

DEFENSIVENESS
Reverse-Scored 13 SR Items

SR GENERAL
23 SR Items

ER GENERAL
9 ER Items

DWI RISK-SUPERVISION ESTIMATE
31 SR and ER Items, Age, Marital
Self Report Questions
Examples

SR1 - Do you have up or down moods?
SR2 - Do you get nervous, tense or worry about things?
SR5 - How many times have you received treatment for mental or emotional problems?
SR9 - How many times in your life have you been drunk or intoxicated on alcohol?
Self Report Questions (cont.)

SR15- How many times in your life have you received a ticket for non-DWI driving violation such as speeding....?

SR26- How many times have you been enrolled in an alcohol education or treatment program?

SR28- How serious of a problem is your DWI for you?
Evaluator Report
Examples

- # of non-DWI involvements with CJ system
- # of DWI/AOD education program episodes
- # of treatment program episodes
- Past interlock use
- Past EM use
- Level of supervision, treatment and expected compliance
Utilization and Guidelines

1. What are we trying to accomplish?
   • Estimate the probability of negative outcomes and to reoffend
   • Estimate of supervision and service needs

2. Does the IDA only estimate risk?
   • Includes a resource for estimating service needs, responsivity to interventions, and traffic safety
Utilization and Guidelines

3. Should assessment be an evolving process?
   • IDA is an initial screener, yet provides guidelines to proceed
   • Need more comprehensive assessment

4. Should the IDA be used as a sole basis for making decisions?
   • All sources of information are to be used—client/record
   • Final decisions are made by the evaluator and/or court
More Information About the IDA

- Currently available in *paper/pen* format
- Individuals *must* undergo training
- New project underway with NHTSA:
  - Online training course
  - Computerized version of the tool
- Expand for *widespread* public use
Supervision—What works?

Guideline 2
Develop individualized case or supervision plans that outline supervision strategies and treatment services that will hold DWI offenders accountable and promote behavioral change.

Guideline 3
Implement a supervision process for DWI offenders that balances supervision strategies aimed at enforcing rules with those designed to assist offenders in changing behavior.
“really can’t explain it too much except to say that it’s part of a court order.”
WHAT IS TRUE ABOUT OUR DWI POPULATION?

- They are part of our community
- They are not going anywhere
- Punishment alone does not change behaviors
Supervision

- Focus on the person, not the charge
- Address criminogenic needs
  - The Big Four
  - The Next Four
## The Big Four

<table>
<thead>
<tr>
<th>Criminogenic Need</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>History of anti-social behavior</td>
<td>Build non-criminal alternative behaviors to risky situations</td>
</tr>
<tr>
<td>Anti-social personality</td>
<td>Build problem solving, self management, anger management, and coping skills</td>
</tr>
<tr>
<td>Anti-social cognition</td>
<td>Reduce anti-social cognition, recognize risky thinking and feelings, adopt an alternative identity</td>
</tr>
<tr>
<td>Anti-social companions</td>
<td>Reduce association with criminals, enhance contact with pro-social</td>
</tr>
</tbody>
</table>

Source: Ed Latessa, Ph.D.
## The Next Four Criminogenic Need Response

<table>
<thead>
<tr>
<th>Criminogenic Need</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family and/or marital</td>
<td>Reduce conflict, build positive relationships and communication, enhance monitoring/supervision</td>
</tr>
<tr>
<td>Substance abuse</td>
<td>Reduce usage, reduce the supports for abuse behavior, enhance alternatives to abuse</td>
</tr>
<tr>
<td>School and/or work</td>
<td>Enhance performance rewards and satisfaction</td>
</tr>
<tr>
<td>Leisure and/or recreation</td>
<td>Enhance involvement and satisfaction in pro-social activities</td>
</tr>
</tbody>
</table>

Source: Ed Latessa, Ph.D.
Probation terms should be...

- Realistic
- Relevant
- Research based
Costs to DWI Offenders

- Court fines
- Probation Service Fees
- Attorney Fees
- Insurance rate increases
- Ignition Interlock or other technologies
- Treatment
- Court program costs
- Transportation costs after license suspension

$300-$500/month
Guideline 4

Where possible, develop partnerships with programs, agencies, and organizations in the community that can enhance and support the supervision and treatment of DWI offenders.
Partnering and Collaboration
Ignition Interlock
Ignition Interlock-What does the research say?

Reduces recidivism: while installed

32% reduction in recidivism-when used in conjunction with treatment
Capitalism is alive and well!
Transdermal Alcohol Devices
Transdermal alcohol devices - What does research say?

- Deters offenders from drinking
- Accurate technology
- Good at identifying noncompliance
- Helps enforce abstinence
- Recidivism as high as non-users though recidivism takes longer to occur.
Mobile Alcohol Monitoring Technology
DWI Courts
DWI COURT
The Guiding Principles of DWI Courts

1: Determine the Population
2: Perform a Clinical Assessment
3: Develop the Treatment Plan
4: Supervise the Offender
5: Forge Agency, Organization, and Community Partnerships
6: Take a Judicial Leadership Role
7: Case Management Strategies
8: Address Transportation Issues
9: Evaluate the Program
10: Ensure a Sustainable Program
DWI Courts - What does the research say?

Recidivism for repeat offenders that graduate from DWI courts tends to be low.

Even if they don’t graduate, their recidivism is lower.

On average DWI Courts reduce recidivism by 13% (Campbell Collaboration Assessment).

Cost savings compared to traditional court.
DWI Courts are designed for high risk/high need offenders

- Clinical Screening and assessment must be used to identify appropriate clients
- High intensity and strict accountability
- Appropriate treatment
- Program requirements
- **Retention in program VS revocation or termination**
Termination Avoidance

- Behaviors leading up to termination
- Lack of progress
- Lack of cooperation
- Recurring violations
- Bad attitudes

Often result in program staff blaming the client, resulting in termination
Termination Avoidance

- Examine program deficiencies as contributing factors
- Determine whether treatment protocols are evidence-based
- Are new assessments being conducted and treatment plans adjusted accordingly
- Are we missing something
- Are we treating our client (patient) with the correct interventions and dosages
Retain and Graduate your Participants

- Resist the urge to give up on people
- Exhaust all reasonable resources
- Remember that addiction/dependence is a brain disease often coupled with a mental health disorder
COMMUNITY MAPPING RESOURCES CHART

- Law Enforcement/Probation
- Recreational/Libraries
- Mental Health Services
- Family Therapy
- Government Agencies/Officials
- Social Services
- Service Organizations
- Community Foundations
- Housing
- Schools/Colleges/Universities
- Mentoring Programs
- Employment/Job Training
- Literacy Programs
- Treatment
- Community-Based Organizations
- Transportation
- Arts
- Health
- Residents
- Businesses
Treatment & Interventions for Impaired Drivers

Foundation:
Evidence-Based Principles for Effective Interventions
Treatment/Interventions for DUI Offenders

- Motivational Interviewing or Motivational Enhancement
- Cognitive Behavioral Therapy
- Group Counseling/Therapy
Alcohol Treatment—What does the research say?

• Evidence based
• Matched to offender needs
• Include an aftercare component
• Effective treatment attends to multiple needs of the individual, not just his or her abuse
  • Relapse can be expected
Medication Assisted Treatment
(Pharmacological Interventions)

Naltrexone (Vivitrol-injectable version)
- Reduces the pleasurable effects of alcohol

Camprol
- Reduces physical and emotional discomfort in weeks after the individual stops drinking
MAT-What does research say?

- Improve survival
- Increase retention in treatment
- Decrease criminal activities
- Increase employment
- Improve birth outcomes with perinatal addicts
MAT - What does research say?

- Doesn’t make you stop drinking
- No clear evidence that MAT reduces cravings for alcohol
- Should be used in conjunction with treatment
- May be covered by insurance/Affordable Care Act
What can the Probation Fellow do for You?

- Train
- Research
- Collaboration
- DWI courts
For More Information

American Probation and Parole Association-
http://www.appa-net.org/eweb/

National Highway Traffic Safety Administration-
http://www.nhtsa.gov/

Traffic Injury Research Foundation-
http://www.tirf.ca/index.php

National Center for DWI Courts
http://www.dwicourts.org/
Contact Information

Mark Stodola
Probation Fellow
American Probation and Parole Association
602.402.0523 or Probationfellow@csg.org