Team Approach to Drug Treatment Shows Promise in Improving Traffic Safety

When the courts find someone guilty of driving under the influence of alcohol and/or other drugs (DUI), that person may be less likely to repeat the offense if he or she receives treatment for an underlying drinking problem. With growing recognition of how effective treatment can help, some judges and safety officials are moving an innovative practice, the DUI/Drug Court, to center stage.

Experts know that addiction treatment, in combination with a driver’s license suspension, can reduce recidivism for people with alcohol and other drug problems. This combination works better than a jail term and costs taxpayers less. Courts now typically require DUI offenders with multiple convictions to complete an alcohol treatment program at their own expense.

More than 60 communities have found ways to maximize the effectiveness of this strategy by establishing special DUI/Drug Courts – and the top federal highway safety official has called for wider adoption of this practice. While their methods vary, most DUI/Drug Courts build a team of criminal justice and treatment professionals, led by a judge, all working towards the same goal: improving traffic safety by treating an underlying cause of impaired driving instead of relying on punishment alone to change destructive behavior. This team approach ensures coordination among judges, attorneys, probation officers and treatment professionals and makes it much harder for DUI offenders to slip through the cracks in the system.

"It’s really interesting to see the interaction among team members," observes Mike Devine, director of a DUI/Drug Court program in Hall County, Georgia. “Although they have very different perspectives, they positively influence one another as everybody begins to invest in the offender’s well being.”

DUI/Drug Courts offer more structured assessment, motivation and monitoring of DUI offenders than court-mandated referrals in which treatment proceeds along an entirely separate track. Like the successful drug courts upon which many have been modeled, DUI/Drug Court teams take an active interest in how well an offender who has been diagnosed with an alcohol problem responds to treatment. At the same time, offenders understand that if they don’t adhere to their treatment regimen, which includes abstaining from the use of alcohol and other drugs, they may go to jail.
DUI/Drug Courts Help Strengthen Offender’s Desire to Change

“Most alcoholics, down deep, want to get and stay sober and get their lives back to normal,” says Judge Philip F. Howerton, Jr. who presides over two DUI/Drug Courts in Mecklenburg County, North Carolina. Judge Howerton, an early and impassioned advocate for drug courts, speaks from experience. He has been in recovery from alcoholism since 1988. He is quick to point out, however, that the only prerequisite for a DUI/Drug Court judge is “an understanding of the problems of alcoholics and a commitment to their treatment.”

Devine points to the willingness of DUI offenders to enter these programs as evidence of their commitment to change. “The reality is that in Georgia they will end up doing far more as part of the DUI/Drug Court process than if they did their jail time and went on probation,” he notes. Nor does participation in Hall County’s DUI/Drug Court mean that offenders get any breaks: mandatory minimum laws that determine sentences for various levels of DUI offenses remain in effect.

Personal Accountability Is Key

Court monitoring is more intense in the early phases of treatment, when offenders often appear before the judge on a weekly basis. These appearances allow the offender to establish a strong personal connection with the judge who, based on the recommendations of the treatment professional and other team members, can reward evidence of progress or apply graduated sanctions in its absence.

Jesse Y., whose second DUI arrest and high blood alcohol concentration meant that he would spend six months in jail if he didn’t enter the Mecklenburg County DUI/Drug Court two years ago, says that the judge disciplined him like a parent. Now a father himself for the first time at 47, Jesse had been treated for his alcohol problem shortly after his first DUI arrest seven years before. But like many first-time DUI offenders who enter treatment, he admits that he had no intention of quitting drinking. After completing a 28-day program, Jesse says he felt “I could take what I knew from the program and put it with what I knew and do it my way.” Jesse couldn’t do it “his own way” the second time because Judge Howerton demanded accountability including frequent, random Breathalyzer and drug tests.

The regular reporting requirement also permits a more rapid response by other members of the team. If an offender fails to appear in court, the judge can issue an arrest warrant which law enforcement officers can execute immediately in the interest of public safety.

Because DUI/Drug Court teams have been educated about the chronic nature of addiction, relapse does not necessarily mean expulsion from the program. Depending on the jurisdiction, however, judges can apply graduated sanctions – such as jail time, home detention or the installation of an ignition interlock device – based on a combination of factors. These include the seriousness of the violation for which the offender was arrested, the offender’s past history, how long the offender has participated in the program and the type of
relapse as well as the recommendations of the treatment professional. A DUI/Drug Court in Indiana has found that positive or negative reinforcement of conduct soon after it occurs is critical in helping foster an increased sense of personal accountability among offenders. Good behavior can be rewarded with less frequent reporting to the judge or restoration of driving privileges to and from work, if permitted by state law.

“The court’s continued demand for personal accountability gives us more time to redirect how program participants think about alcohol and other drugs,” says Christine Zurblis, a case manager at New Hope Counseling which provides intensive treatment services for the Hall County DUI/Drug Court program. “We’ve also found that being held to the same standards intensifies the bond among the DUI offenders and helps build group support.”

Caldwell C., a 60-year old graduate of the Mecklenburg County DUI/Drug Court, credits this support system for turning him around at a critical stage early in the program when the urge to drink again nearly overwhelmed him. “I saw another side of supposedly drunks and drug addicts that cared enough to stay an hour and a half or so after our session was over just to talk to me and counsel me, to help me go in the right direction,” he remembers. “I mean it just opened my eyes, it opened my heart and encouraged me to stay clean and sober.”

Four years after graduating from the program, Caldwell is still sober and working for a local school system in a more demanding job than he ever has held before.

Different Treatment Methods Used

Traditional alcohol treatment is delivered in conjunction with most DUI/Drug Courts, but some jurisdictions are even helping close the gap between clinical research and practice. A California DUI/Drug Court program in Butte County uses medications, still unusual in most alcohol treatment programs despite evidence that they can support recovery efforts. After a qualifying medical examination, repeat offenders who have been diagnosed with alcoholism receive prescriptions for naltrexone, a drug that helps block craving, and for which they must pay. The involvement of the court makes it possible to ensure that offenders take their medication: as part of the protocol, they are required to do so in front of a designated pharmacist. Offenders in the program took naltrexone an average of 29 weeks, a period long enough to help them make necessary behavioral changes through continued counseling and support group participation.

An Arizona DUI/Drug Court judge requires offenders to sign a behavior contract that specifies what will be expected of them – such as how many counseling sessions or support group meetings they will be expected to attend – until their next appearance in court. Treatment research indicates that this kind of behavior contracting is associated with positive outcomes.

Steep Reductions in Rearrest Rates

Individual DUI/Drug Court records indicate that they are having a significant impact on highway safety. The New Mexico Department of Health found that just 6.8 percent of offenders who completed a DUI/Drug Court program in Dona Ana County – funded by alcoholic beverage excise taxes – were rearrested for impaired driving after 18 months compared to 35.9 percent of offenders throughout the state whose cases had been adjudicated in a more typical fashion. A judge in Michigan (home to the nation’s highest concentration of DUI/Drug Courts) has been encouraged by similar results: before starting a DUI/Drug Court, 45 percent of the impaired drivers who appeared before him were rearrested; today, the recidivism rate has fallen to 13.5 percent.

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Lack of uniformity among DUI/Drug Courts makes it difficult for researchers to establish their effectiveness definitively but progress is being made in this area as well. The **National Drug Court Institute (NDCI)** is leading an effort to increase the number of DUI/Drug Courts and establish practice standards based on the Drug Court model. While significant differences exist between the populations served by Drug Courts and DUI/Drug Courts – particularly because state laws and public opinion narrow the sanctions and incentives that can be used in DUI cases – there are enough similarities that the best practices, designs and operations identified by NDCI offer a ready blueprint for establishing DUI/Drug Courts.⁹

The **National Highway Traffic Safety Administration (NHTSA)** has such confidence in DUI/Drug Courts that Jeffrey Runge, MD, who directs the federal agency, has made their enhancement a top priority in the national strategy to prevent impaired driving.¹⁰ In 2003 NHTSA funded the bilingual DUI/Drug Court in Hall County, Georgia where each of the offenders receives a year of intensive treatment and counseling. “This approach works because it allows enough time for healing to take hold,” explains Devine who recently organized the program’s first graduation ceremony. Many more of these graduations may be taking place now that NHTSA has designated funding for DUI/Drug Courts in its proposed budget.

*For more information on improving alcohol interventions for DUI offenders, see the Ensuring Solutions primer Finding Common Ground.*

**Sources**


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