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The Impact of Treatment and Monitoring on Prince George's County DWI'S

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16. Abstract <p>The state of Maryland maintains this nation's most intensive monitoring system for convicted drinking drivers. Each offender placed in the program by the court is required to attend a face-to-face interview once a week. In addition to the Monitor Program, judges in Prince George's County have the option of sentencing impaired drivers from 1 to 4 weeks to a specially built county DWI Facility.</p> <p>DUI's were divided into four groups 1) those who were placed on the State Monitor Program only, 2) those who were sentenced to the DWI Facility only, 3) those who were placed in both programs, and 4) those who received neither. The purpose of this study was to evaluate the impact on recidivism of each of these four outcomes.</p> <p>Offenders who received both the Facility and the DDMP program had the highest proportion of individuals with one or more prior offenses (38%). Twenty-nine percent of those assigned to only the DWI Facility had priors, while 24% assigned to only the State Monitor Program had priors. Only 15% for those not assigned to neither of the treatment programs had one or more priors. Despite difference in prior offenses, recidivism rates for offenders not assigned to either of these treatments were considerably higher (35%) than for those offenders assigned to either the DWI and DDMP, or Both programs (15% or less).</p>			
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EXECUTIVE SUMMARY

The state of Maryland maintains this nation's most intensive monitoring system for convicted drinking drivers. The Maryland Drinking Driver Monitor Program (DDMP) which is a program component of the State Division of Parole and Probation supplies 97 monitors who manage a caseload of over 23,000 drivers convicted of driving while impaired (DWIs). Each offender placed in the program by the court is required to attend a face-to-face interview with the monitor once a week. At this meeting, the offender turns in attendance slips demonstrating that he or she has attended outpatient treatment and/or Twelve Step Programs (i.e., AA, NA) as prescribed by the court. The offender is also required to be abstinent while on the program. The DDMP monitors can return an offender to court for failure either to attend treatment programs or for not maintaining abstinence or any other condition of probation.

In addition to probation supervised by the Monitor Program, judges in Prince George's County have the option of sentencing impaired drivers from 1 to 4 weeks to a specially built county DWI Facility. This 60 bed low-security unit which is jointly operated by the county health and the county corrections department, conducts an intensive group based, diagnostic and therapy program leading to an individually tailored referral to an outpatient alcohol and/or drug treatment program during the year following release. The Facility program was designed to be followed by placing the offenders into the State DDMP program so that the individually tailored treatment program developed at the center could be carried out under the supervision of a monitor. However, approximately half of the offenders sentenced to the DWI Facility have been placed on supervised probation by the DDMP upon release from the program.

Convicted DUI's in Prince George's County can be divided into four groups based on their participation or non-participation in the DDMP and/or DWI Facility program; 1) those who are placed on the State Monitor Program only, 2) those who are sentenced to the DWI Facility only, 3) those who are placed in both programs, and 4) those who receive neither. The purpose of this study was to evaluate the impact on recidivism of each of these four outcomes.

The study was undertaken by obtaining from the Maryland Department of Motor Vehicles (DMV) files the driving records of all Prince George's County residents who were convicted of a drunk driving offense (including BAC test refusal) between August 1985 (when the DWI Facility opened) and December of 1988. Driving records for these individuals were obtained back to January of 1982 when the Maryland Department of Motor Vehicles file was automated. Lists of the name, license number and date of entry for individuals who had been sentenced to the P.G. County DWI Facility were obtained from the Facility records and matched with the driver license number from the Maryland DMV file. Similarly, the DDMP files were consulted to obtain the names of P.G. County residents who were placed in the State Monitor

Program by the courts from August 1985 through 1988. These names were also matched with the DWI sample from the Maryland DMV files.

Drivers with less than three years of prior record (before the index conviction) and drivers with less than two years of exposure, following the index conviction, to recidivism were dropped from the file. The reduced file contained 1,181 offenders who received only the Facility program, 4,032 who received only the DDMP program and 858 who received both programs and finally, 2,867 who received neither program, for total 8,938 cases studied in this investigation. Ninety-five names from the Monitor Program could not be matched with the DMV record because of missing information.

Analysis of these data indicated that those offenders who received both the Facility and the DDMP program had the highest proportion of individuals with one or more prior offenses (38%). Twenty-nine percent of those assigned to only the DWI Facility had priors, while 24% assigned to only the State Monitor Program had priors. Only 15% for those not assigned to either of the treatment programs had one or more priors. Despite this difference in prior offenses, which indicated that the more serious problem drinkers (and problem drivers) were assigned to both DDMP and DWI Facility programs, recidivism rates for offenders not assigned to either of these programs were considerably higher than for those offenders assigned to either the DWI and DDMP programs.

For the first offenders who had no priors the group that received neither treatment had a recidivism rate of over 35% during the first year, compared to 15% or less for the three treated groups. For those offenders with at least one prior conviction in the previous 36 months, the differences were smaller, but the Neither group still demonstrated the greatest recidivism. In part, the high first year recidivism for the Neither group with no priors is probably attributable to the fact that this group rarely received a license suspension, whereas those who were assigned to the Facility or DDMP or both were more likely to be suspended. The increased driving exposure for the Neither group might be expected to produce a significantly higher recidivism rate, though some studies have suggested that suspension has a greater effect on accidents than on DWI recidivism. The comparison of the three treated groups, (Facility only, DDMP only, and Both) with the Neither group is affected by the limited data available in the present study. It is clear that judges sentenced offenders who they believed to have the most serious drinking problem to the Facility and Monitor Program. In doing so they made use of data (such as arrest BAC or DWI offenses prior to 1982) which were not available for the present study. Without these data, it was not possible for the present investigators to fully equate the four groups and as a result, the impact of the DDMP and Facility treatments is probably understated relative to the Neither comparison group. The result of the study suggests that almost all offenders coming through the P.G. County court system would benefit from being assigned to the DDMP Monitor Program or the DWI Facility program or, best of all, Both.

INTRODUCTION

Prince George's County in the State of Maryland has an unusual, perhaps unique, residential Facility for DWI offenders. This Facility, constructed with a half million dollar grant from the state legislature, opened in September 1985, and houses 60 clients. Included within the 60-bed capacity are 10 beds for females.

THE DWI FACILITY

Originally intended solely as a treatment center for DWIs processed by the PG County courts, the Facility has recently accepted clients from nearby federal courts and other Maryland counties in order to fill the 60-bed capacity. Keeping the Facility at capacity is significant to a major goal set by the county which was to make the Facility self-supporting. The Facility charges \$33.86 per day. A 7-day sentence costs \$237; a 14-day sentence \$474; 21-day sentence \$711; and a 28-day sentence \$948 (Porto, 1988). Through its first two years of existence, the Facility did not collect sufficient funds from clients to be self supporting. This occurred because the Facility operated at approximately 2/3 of its capacity and because many client payments were delayed. Payments are scheduled over time and are not required to be completed until the end of probation, which can run from one to two years. Currently, the Facility is at capacity and collections have increased. It is expected that the Facility will be self sufficient in the near future.

The Facility is jointly run by two county departments, as shown in Figure 1. The Facility is managed by the Prince George's Department of Corrections. The Corrections Department's Chief of Community Corrections is responsible for all of the physical operations of the building itself, including food preparation, maintenance, fee collections, work release programs, and Facility security itself. A corrections officer is on duty at the entrance at all times and has full authority over the residents in the Facility.

The P.G. Health Department provides the DWI Facility Program Director and Assistant Program Director who manage therapy and diagnostic programs, which are conducted by contract counselors who arrive in the evening and weekends at the Facility.

The DWI center is housed in a building that has an appearance of a school and is situated just across a double razor wire electrified fence from the P.G. County Detention Center. The building itself has no bars or fences, but within the building the discipline is similar to that encountered in a jail. Correction officers are located at the entrance 24 hours a day, and supervise the activities of the 60 residents. No resident may leave the building unless assigned to a work release program. All residents are subject to random breath and urine tests, as well as regular inspection of their dormitory-like facilities. Any offender who does not maintain discipline is transferred to the Detention Facility.

Clients may be sentenced by the court to from 1-4 weeks at the Facility. Normally, the period of residence begins at least one week after sentencing, following an initial interview with the work release director the prior week who then determines whether the potential client has a job and wishes to be placed on work release during the residential period. Clients report on Friday mornings and are processed into the Facility during the day. They begin on Friday evening an intensive therapeutic and diagnostic program which runs through the weekend. Those that qualify for work release are allowed to leave the Facility each weekday morning provided they return by 6 p.m. Upon their return, they are tested for alcohol since abstinence is required throughout the period of residence at the Facility. There is also random urinalysis for illicit drugs. During the weekday evenings and throughout the weekends, therapy sessions are continued for the full period of residence.

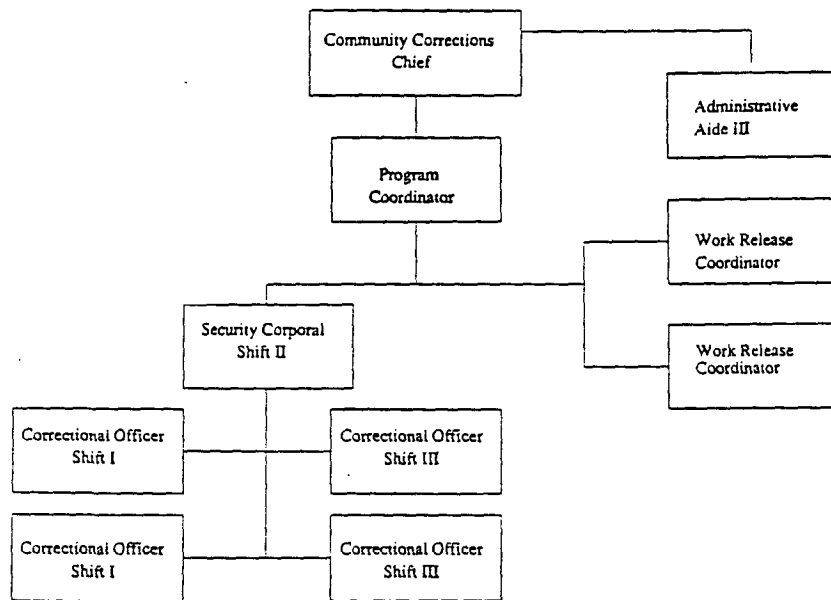
The residential program was designed to be combined with a year of probation on the State of Maryland Monitor Program. This year long program was based on the research conducted by Reis (1983) under NHTSA's sponsorship in Sacramento, CA in which it was found that at least some reduction in recidivism could be obtained among multiple offenders if therapy were continued for a period of at least a year and supported by bi-weekly meetings with a probation officer. Maryland has available a Monitor Program which provides for weekly meetings with a monitor and this program was tied in with that of the center so that the residential period could be followed by at least a year of monitoring in the community.

The center program itself was also modeled in part on the Weekend Intervention Program (WIP) (another program evaluated with NHTSA funds) which was developed by Dr. Harvey Seigel (1985) at Wright State University in Dayton, Ohio. That program provided for 48 hours of intensive group diagnostic activity leading to an individualized referral plan for treatment in the following year. Originally, it was expected that most offenders would be sentenced to PG County DWI Facility for 7 days, and the WIP model originated by Seigel was to be conducted during that period. However, over the early years of the Facility, the program has been developed to include a significant amount of counseling and with this addition the period of residence has gradually been extended until most are assigned to the Facility 28 days.

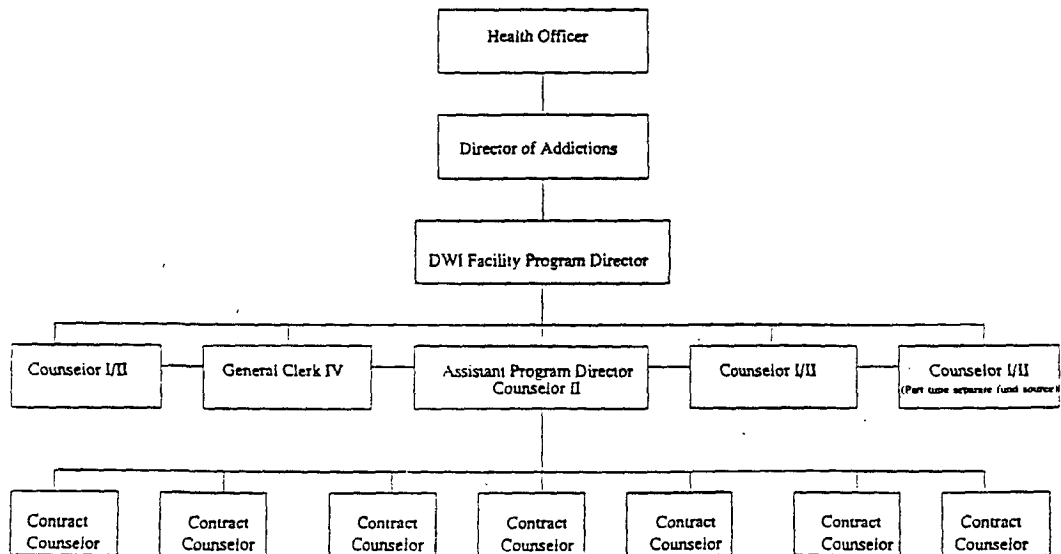
Despite this extension and length, the program at the DWI center is only intended to initiate treatment through intervention and collecting sufficient information to design a personally tailored referral plan to an appropriate community treatment Facility. Twenty-eight days is too short a period to produce a full recovery from problem drinking. It was intended, therefore, that the sentence to this residential Facility would be followed by at least a year of supervision under the Monitor Program.

**FIGURE 1. ORGANIZATION OF THE
P.G. COUNTY DWI FACILITY***

Prince George's County Department of Corrections
DWI Facility



Prince George's County Health Department
DWI Facility



AND A VOLUNTEER STAFF OF FIFTEEN

* Provided by Porto, DWI Facility Program Director, 1990.

In fact, of the 2,058 residents assigned to the Facility between August 15, 1985 and April 30, 1988, only 56% were placed on probation by the court with the Monitor Program (Porto, 1988).

Two-thirds of the P.G. DWI Facility are white as shown in Figure 2 according to Facility Records (Porto, 1988). Most of the clients are diagnosed by the Facility Staff as early, middle or late stage problem drinkers (Figure 3). Only 5% are seen as having no drinking problem. In addition to problems with alcohol, nearly 40% of the residents have at least a potential problem with a drug other than alcohol (Figure 4) (Porto, 1988).

THE MONITOR PROGRAM

The State of Maryland is also unique in having the nation's most intensive monitoring system for convicted drunk drivers. The Maryland Monitor System operates as a division within the State of Maryland Probation Department. The monitors, many of whom are recovering alcoholics, generally have at least two-year AA degrees, or equivalent business experience, with some specialization in addictions. The Monitor Program maintains an office in each of the 12 counties. In P.G. County, the main office is in College Park with branch offices in Upper Marlboro, Hyattsville, Forestville, and Laurel. At most of these offices, there are at least two monitors, with each monitor handling approximately 240 cases per week.

The client is required to report to his or her Monitor once a week. At this interview, the client will present attendance slips which demonstrate that during the previous week, he or she participated in assigned outpatient treatment programs and/or assigned AA meetings. At these weekly conferences, some support counseling is provided. Accountability is stressed and the offender's problems are confronted. Monitors will spend more time with those clients they feel need counseling than with those who appear to be reasonably comfortable with the limits imposed by the Monitor Program. Monitors are equipped with the Alco-ScanTM saliva test strips and with Alco-sensorTM pre-arrest breath testers to test clients who give evidence of drinking. Random urinalyses are also conducted at least once during every three months on every client. The Monitor Program recommends to the bench that abstinence from both alcohol and other drugs be a part of the assignment to the DDMP. When ordered, evidence of drinking or drug use will result in violation of probation.

An example of the functioning of the Monitor Program is provided by a group of graduates from the DWI Facility who were residents between August 15, 1985 to April 30, 1988. The data are taken from the Monitor Program files and were reported by Carol Porto, DWI Facility Program Director in March of 1988. As can be seen in Table 1 and Figure 5, during that period, only 56% of the Facility residents were placed on the Monitor Program. Of those placed on the program, approximately 1 in 4

FIGURE 2

RACE DISTRIBUTION of DWI Facility Clients

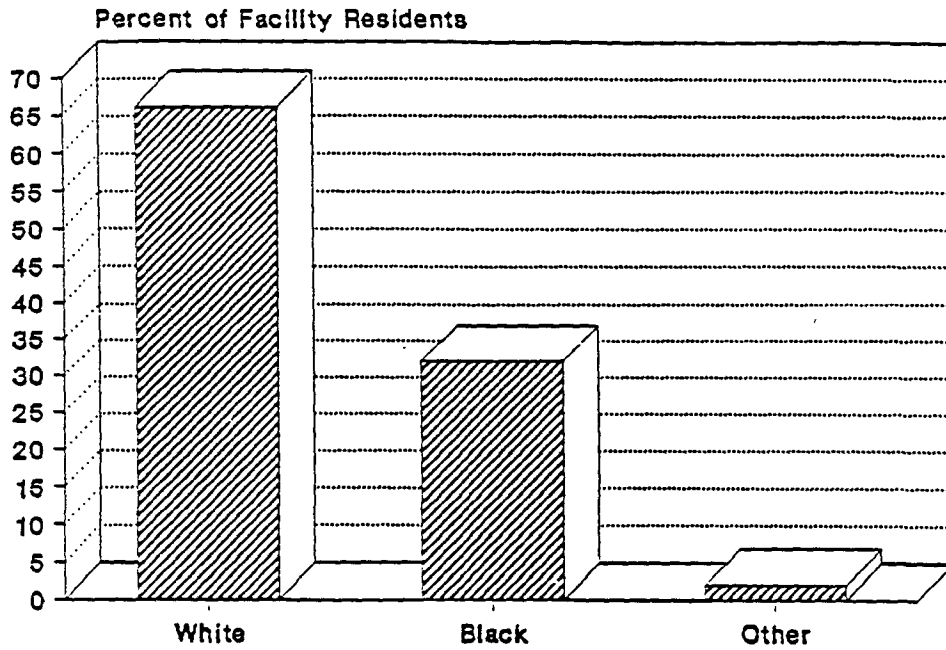


FIGURE 3

SEVERITY OF ALCOHOL PROBLEM of DWI Facility Clients (as judged by DWI Facility Therapists)

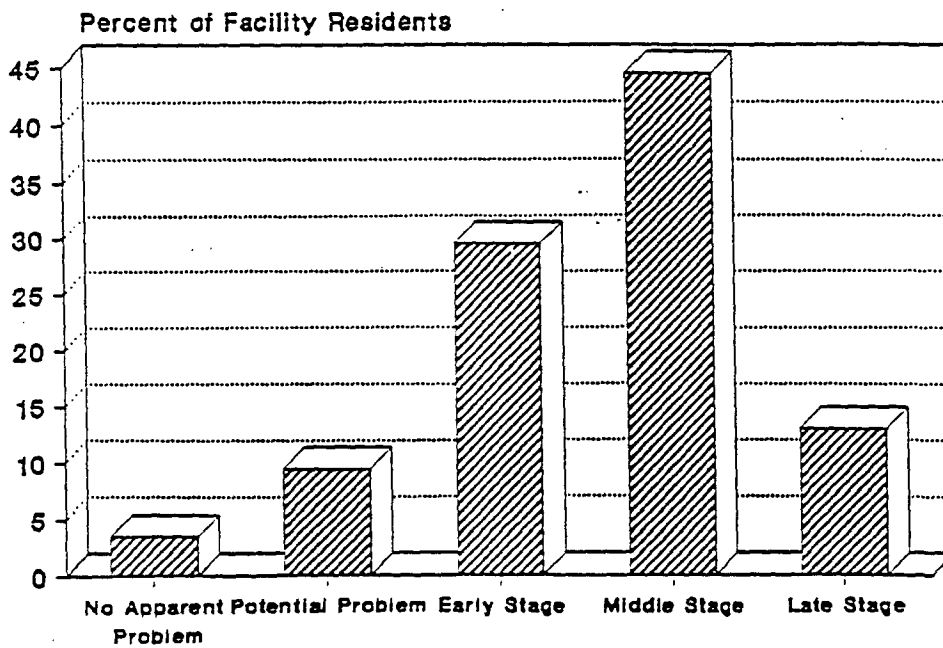


FIGURE 4

SEVERITY OF DRUG ADDICTION PROBLEM
of DWI Facility Clients
(as judged by DWI Facility Therapists)

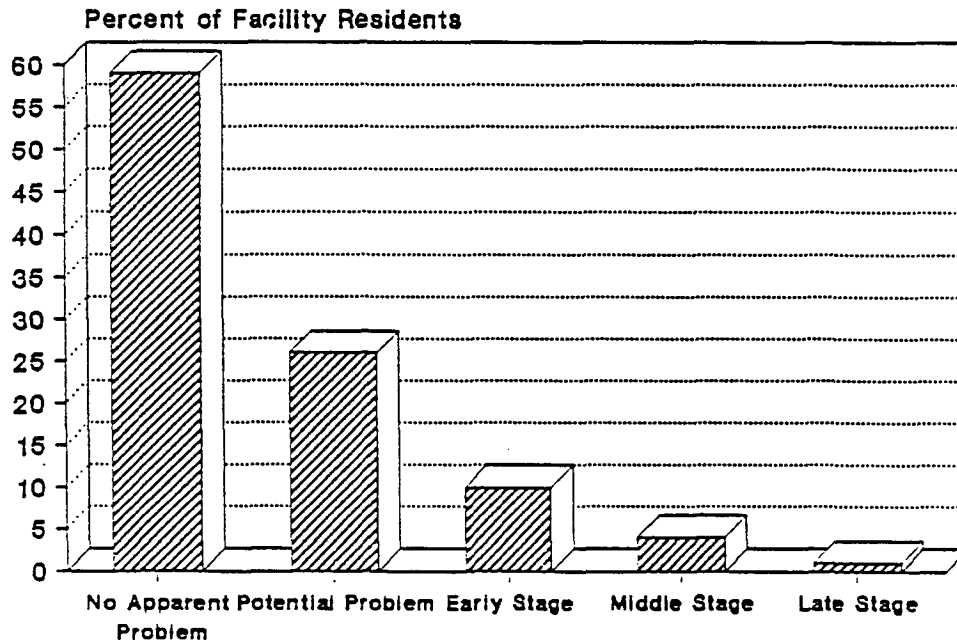
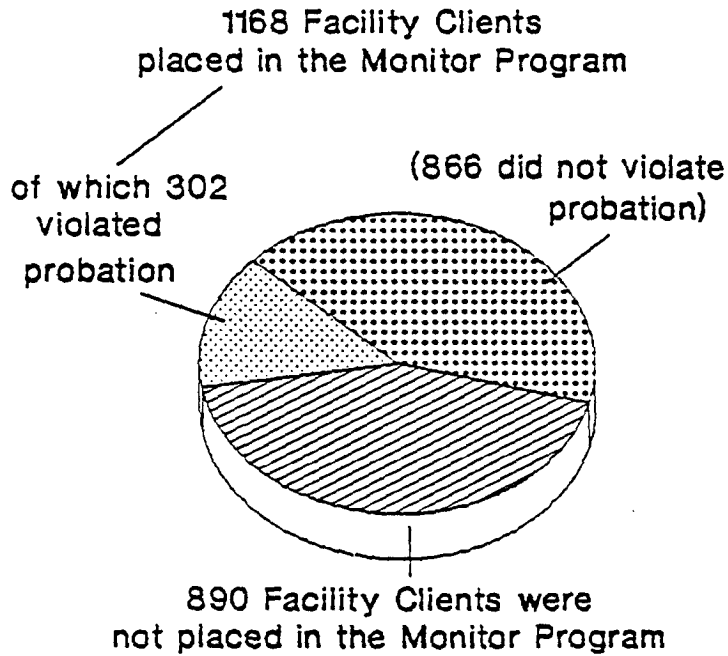


FIGURE 5

Participation of Facility Clients
in Monitor Program
(August 15, 1985 to April 30, 1988)



Total N=2058

violated probation. The violation rate varied with the length of time in the Facility with those who were in the Facility 7 days violating at a 33% rate, while those who were in for 28 days, violated at approximately half of this rate. Violations tended to occur early in the Monitor Program since the average length of time prior to violation for those who violated was just over two months.

Table 1 also shows the reasons for violation. Only about 8% of these violations were for the DWI charge, while half were for either failure to continue to report for weekly interviews, or a failure to abstain from alcohol. An interesting fact uncovered in the course of this study was that violators tended to be younger than non-violators. As might be expected, the average age of the DWI Facility residents was 34, but the average age of the violator was 25.

THE P.G. COUNTY COURT SYSTEM

While the Monitoring Program and the DWI Facility are unique, the Maryland court system provides in its diversity a good example of a typical state lower court program. Drunk driving cases are heard at two levels -- the District Court and the Circuit Court. At the District Court level, judges are assigned to cases at random. The police officer forwards the citation from to the State office in Annapolis where it is entered into the State court computer. The computer assigns each case to a judge on a random basis.

If the case is pursued by the prosecutor, it will be held before the specified judge of the District Court unless the accused "preys a jury trial." In this case, the trial is moved to the Circuit Court where all cases are heard by Judge Femia. Since Judge Femia provides a unique, open, fixed schedule of penalties based on whether the individual is a first or multiple offender and on the BAC level, the sanctions that will be imposed are known to the offender before trial (in fact, most offenders are handled through plea bargains rather than trials). For this reason, and perhaps in part because Judge Femia rarely uses the Monitor Program, approximately half of those who are charged with DWI request a jury trial and are moved to the Circuit Court.

The District Court has a good computerized record system. An example of a printout of one section of this system is shown in Figure 6. With the system it is possible to track the individuals from initial arrest to court sentencing, providing the sentencing is done in the District Court. For those who "prey a jury trial" and move to the Circuit Court, the separate Circuit Court file, which is in hardcopy form, must normally be interrogated. The District Court makes use of a probation assignment addendum to the court order entitled "DWI Special Conditions of Probation". An example of this form is shown in Figure 6.

TABLE 1

ANALYSIS OF DWI FACILITY RESIDENTS
On Probation With
The Drinking Driver Monitor Program

Clients entering DWI Facility between 8/15/85 and 3/30/88

56% 1168 of 2058 Residents were on the Monitor Program.
26% 302 of these 1168 Residents violated probation.

Primary Reasons for Violation - 302 Residents

8% (24 Residents) had a subsequent DWI Charge.
29% (90 Residents) failed to continue to report to DDMP.
23% (70 Residents) failed to abstain from alcohol and missed 50% of the scheduled meetings with DDMP.
21% (63 Residents) failed to complete aftercare treatment.
13% (39 Residents) failed to verify AA attendance.
5% (16 Residents) failed to abstain from illicit drugs.

FIGURE 6

Example of P.G. County Court Computerized Record

07/10/89	DISTRICT COURT OF MARYLAND		DIST: 05
TRAFFIC SYSTEM CITATION INFORMATION			
CIT NUM: [REDACTED]	NAME: [REDACTED]	DIST/LOC: 05 01	
VIO DATE: 09/22/87	D/LI: [REDACTED]	DC	AGY/SAGY: DA SOD
TRL DATE:	FINE: 250.00	CHARGE: JA21902 A	OFFICER: 0677
TRL TIME:	PAID: 250.00	DISP: PBJ 06/15/88	STATUS: T 10/13/88
----- DEFENDANT -----		----- VEHICLE -----	
ADDR: [REDACTED]	LICENSE: NRH801	M DESC: 88CADI02	
CITY: CAPITOL HGTS MD 20743	----- DISPOSITION -----		
HEIGHT: 600 WEIGHT: 185 RACE: I SEX: M	DISP: PROBATION BEFORE JUDGEMENT:		
BIRTHDATE: 12/24/29 BATCH: 87279046	DATE: 06/15/88 FLEA: G DIS/LOC: 05 01		
----- VIOLATION -----		JUDG: 9C? FINE: 250.00 COST: 10.00	
VIO DATE: 09/22/87 TIME: 10:05A	CON/ACC: NO SUSP: .00 SUSP: .00		
CHARGE: JA21902 PARA: A CODE:	PROBATION: 06/15/91 CONFINEMENT: NO		
WRITTEN: (DRIVING , ATTEMPTING TO DRIVE	AMEND/CHG: PARA: CODE:		
) VEH. WHILE INTOXICATED	MPH: ZONE:	DEFR/DATE: 07/15/88	

A notable feature of the Maryland DWI adjudication system is that there is a provision for "Probation Before Judgement" (PBJ) which can be applied to first offenders in lieu of a DWI conviction. Where probation before judgement is ordered, the individual does not receive a notation on the State driving record that a DWI conviction has occurred. The Probation-Before-Judgement record is held in a special confidential file and is not available to the general public or insurance companies. If there is no further offense within 3 years, the offense is never placed on the regular license file. The offender by state law is allowed only one Probation-Before-Judgement, and if charged with a second offense, must, if convicted, be sentenced as a "first" offender. As can be seen by Figure 7, probation before judgement may be used for even rather serious offenders who are sentenced 24 months probation, a relatively intensive treatment schedule, and AA attendance.

RESEARCH DESIGN

This research was intended to evaluate the impact on recidivism of a sentence to the PG County DWI Facility and/or to the State Monitor Program. Data from 3 sources were combined to conduct this study. A search was made of the State Motor Vehicle Department file including the confidential PBJ file to identify every individual who was convicted of DWI or given a PBJ between August 1, 1985 and December 31, 1988 who resided in P.G. County. This search yielded 8,656 records.

A second source of data came from the P.G. County files of the State DWI Monitor Program who were assigned to the Monitor Program from the initiation date for the DWI Facility August 1985 through the end of the study period in December 1988. This produced 5,251 records. Finally, all of the records of individuals sentenced to the DWI Facility were reviewed to select those who entered the Facility from its opening in August 1985 through to the end of the year 1988. This yielded 2,169 files.

Data from these three files were integrated into one file by matching License Soundex numbers. Once the files were integrated, cases with less than three years of license record prior to the index offense and/or less than two years of record following the index offense were eliminated from the study. This matching and selection process yielded the four groups shown in Figure 8. While all the qualified records (three years of prior coverage, two years of post conviction coverage) were successfully matched with the master file obtained from the Department of Motor Vehicles, 95 of the Monitor only program cases could not be matched to the DMV file.

The reasons for the failure of Monitor Program records to match the DMV file fall into a number of different categories, perhaps the principle reason being errors in copying the DMV soundex number. In addition, it is possible that some of those listed in the Facility and monitor files as P.G. County residents are currently listed in the DMV file as residents in other Maryland counties because they have moved since their

FIGURE 7

(To be attached to Court order for Probation form)

DWI SPECIAL CONDITIONS OF PROBATION

DEFENDANT [REDACTED] TRIAL DATE 4-7-89 LOCATION B9/um

CIT. # MV G535765 DATE ISSUED 1-17-89 BLOOD/BREATH TEST RESULTS _____

VERDICT: G/A _____ G/B _____ PBJ/A _____ PBJ/B _____ OTHER PBJ-21-902

Probation monitored by MONITOR PROGRAM ONLY for 24 months.

_____ Probation supervised by P & P and Monitor Program for _____ months.

Alcohol Assessment By: _____

DEFENDANT MUST REMAIN TOTALLY ABSTINENT FROM ALCOHOL AND ILICIT DRUGS DURING THE PROBATION TERM and submit to all alcohol/drug screening tests as directed by DDMP and/or treatment provider.

Defendant shall successfully complete at defendant's sole expense, if any, _____ Health Department Alcohol Program
_____ AOC Approved Alcohol Program
_____ MVA Alcohol Education Program - SOCIAL DRINKERS ONLY
(If MVA-AEP evaluation determines defendant to be a Problem Drinker, defendant may be referred for alcohol treatment.)

Defendant shall submit to interview by Boston University School of Public Health research project on alcohol-related driving arrest within 30 days from date probation commences. (Prince George's residents only)

_____ Defendant shall attend _____ meetings of ALCOHOLICS ANONYMOUS (AA) PER WEEK for the period of probation.

After six (6) months, ALCOHOLICS ANONYMOUS ATTENDANCE may be modified by DDMP.

Defendant shall comply with the following:

_____ Alcohol Restriction on license within 15 days of trial date.

_____ Community Service _____ hours _____

Other conditions: Continue with AARS, Attend AA 3 times A week

ADDITIONAL PROBATION CONDITIONS AND INSTRUCTIONS TO DEFENDANT ON REVERSE SIDE OF THIS FORM.

CONSENT:

X Name [REDACTED] Defendant's Signature
X Address [REDACTED] Zip [REDACTED]
X Phone # [REDACTED] Sex [REDACTED] Race [REDACTED] DOB [REDACTED]
X Driver Lic. # [REDACTED]
X Employer [REDACTED]
X Phone # [REDACTED]
X Prior DWI? YES Prior DDMP? _____

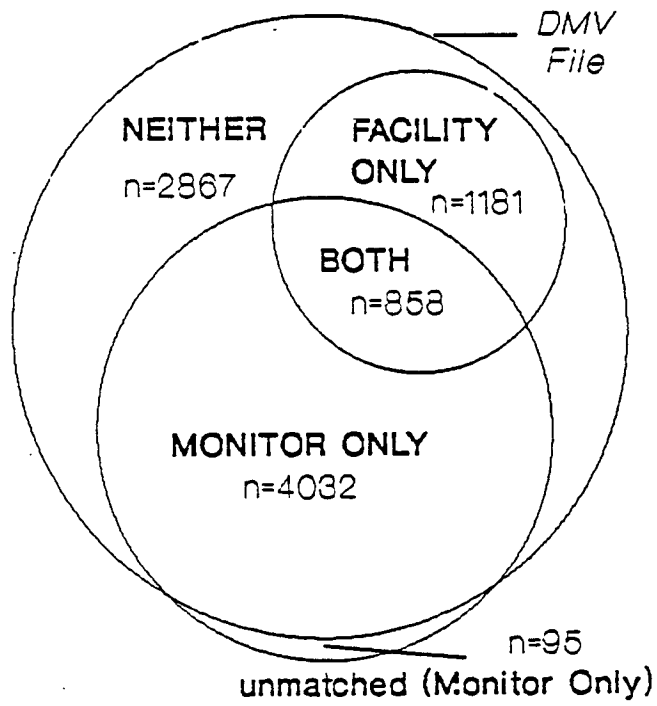
DEFENDANT MUST CONTACT THE FOLLOWING WITHIN 72 HOURS:
DRINKING DRIVER MONITOR PROGRAM
5105 Berwyn Road - Suite #102
College Park, MD 20740
Telephone # 982-0394

JUDGE Nolan

WHITE - Court File • CANARY - DDMP • PINK - Probationer • GOLDENROD - Health Department • GREEN - Parole & Probation
DPP-MP-1 (R 2/88)

FIGURE 8

Overlap of Three Data Sources
Used in Study



conviction. Another factor is that the Maryland soundex number contains the first letter of the last name of the individual. If a woman marries and takes her husband's last name, a new soundex number will be created. There may be some errors in connecting the two soundex numbers. Finally, in the course of this study, some cases have been found where due to administrative problems, a court record has not reached the DMV file.

The recidivism data element has two attributes -- the occurrence or non-occurrence of the offense, and the date at which the offense occurred. Based on the date of occurrence, the offense could be assigned to the period before the entry into one of the three programs to be evaluated, in which case it was labeled a "prior," or to the period following the entry into the program, in which case it was identified as a recidivist offense.

Program entry which occurred at or shortly after conviction was determined from the records of the DWI center or of the Monitor Program. When the records of the individuals in the Facility or Monitor Program were matched with their Department of Motor Vehicle driving record, the DWI offense associated with the program entry was identified as the "index" offense and eliminated from the analysis. DWI offenses before that date became priors and DWI offenses after that date became recidivism offenses. Note that the date on the Motor Vehicle file associated with an offense was the conviction date, not the date when the offender was arrested.

The Neither control group made up of P.G. County residents who were DWI offenders, but who were not sent to either the Monitor Program or the DWI Facility, was established by selecting those individuals who had a DWI offense after July 1985, but were not found on either the monitor or DWI Facility lists. This date coincides with the establishment of the DWI Facility. The first DWI offense following this date was defined as the "index" offense and eliminated from the analysis. Subsequent DWIs became recidivism offenses, DWIs occurring before that index offense date became priors.

Not available for analysis was the BAC at time of arrest, or such other possible recidivism predictors as the results of the assessment conducted by the court Pre-Sentence investigators who can be requested by the judges to interview the offender. It is highly probable that those offenders whom judges believe to have a serious drinking problem are assigned to the DWI Facility and to the Monitor Program. Our database, however, only permits the use of prior DWI offenses, age and sex as covariates for equating groups.

Further, the period during which prior DWI's are available is limited by the length of the period from the entry point for the case and January 1, 1982. A check of data available in the DWI Facility files indicates that a number of the individuals who entered the Facility had offenses prior to January 1, 1982, and thus were considered multiple offenders. Overall, the DWI Facility reported 95% multiple offenders whereas

the data we are presenting shows the DWI Facility with approximately 40% multiple offenders based on 3 prior years (rather than 10). This difference is due to the 3 year limit on the period for recording prior DWI offenses in our study compared to a 10-year limit for the DWI Facility file.

The significance of this limitation for the present study is that we have an inadequate control for the initial differences between the individuals sentenced to the DWI Facility or assigned the Monitor Program compared to those who received neither of these treatments. This should work to reduce the apparent effectiveness of the DWI Facility and Monitor Programs because they deal with offenders with more severe drinking problems and our analysis cannot fully correct for these initial differences in the offender assignment.

DATA ANALYSIS

The first step in the data analysis was to determine the significance of the three control or covariate measures available for equating the populations assigned to the four experimental groups. Two demographic variables, gender and age, were available together with prior DWI offenses. Each of these were evaluated to determine the intergroup differences and their relation to the criterion variable. Unless the groups varied significantly on the measure and the measure is related to the criterion -- recidivism, it is not important to control them through covariate analysis.

Demographic Variables

Two demographic variables were available for this analysis, age and sex of the offender. Because the sex distribution was predominantly male (92%), this variable was not expected to be of significant value in covariate analysis. However, the differences between groups were subjected to analysis of variance to determine whether there were inter-group differences and as shown in Table 2 and Figure 9, it was found that the Neither group had a significantly lower proportion of males than did the three treated groups. However, when the relationship between gender and recidivism was tested, it was found that even though females had a slightly higher recidivism rate, this difference was not statistically significant (see Table 3 and Figure 10).

TABLE 2
PROPORTION OF MALES IN THE
FOUR EXPERIMENT GROUPS

	<u>Group</u>	<u>Mean</u>	<u>Std Dev</u>	<u>Cases</u>
For Entire Population		.9225	.2674	4182
	1 BOTH (F+M)	.9537	.2103	583
	2 FACILITY only	.9477	.2228	612
	3 MONITOR only	.9271	.2601	1344
	4 NEITHER	.8984	.3023	1643

Total Cases = 5341

Analysis of Variance

<u>Source</u>	<u>Sum of Squares</u>	<u>D.F.</u>	<u>Mean Square</u>	<u>F</u>	<u>Sig.</u>
Between Groups	1.9420	3	.6473	9.1078	.0000
Within Groups	296.9561	4178	.0711		

Eta = .0806

Eta Squared = .0065

TABLE 3

RELATIONSHIP OF GENDER TO
 RECIDIVISM IN FIRST 24 MONTHS

	<u>Mean</u>	<u>Std Dev</u>	<u>Cases</u>
For Entire Population	.2444	.4298	4251
Female	.2689	.4440	331
Male	.2423	.4286	3920

Analysis of Variance

<u>Source</u>	<u>Sum of Squares</u>	<u>D.F.</u>	<u>Mean Square</u>	<u>F</u>	<u>Sig.</u>
Between Genders	.2149	1	.2149	1.1635	.2808

FIGURE 9

Percent Male

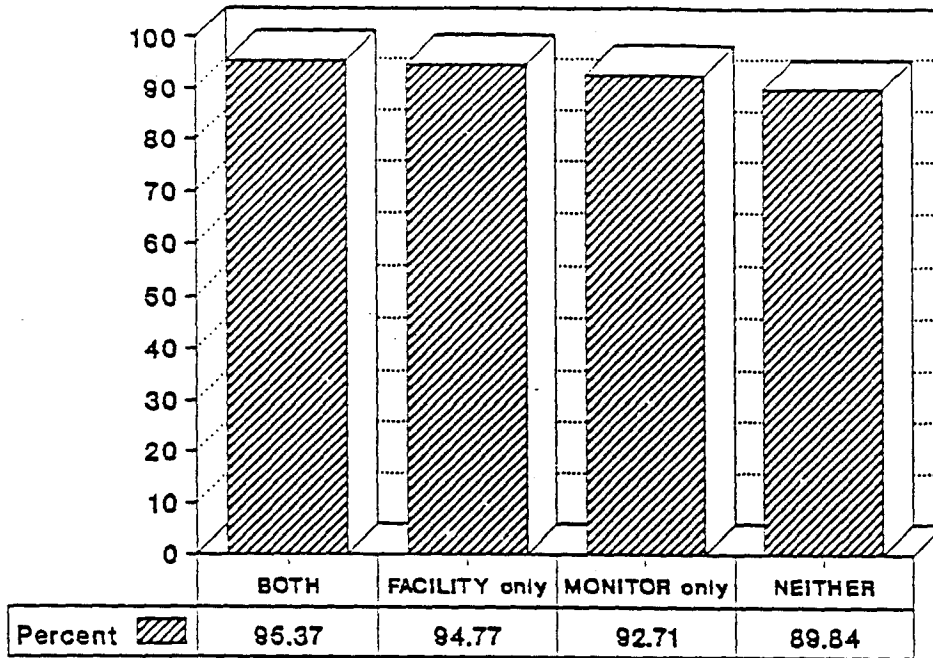
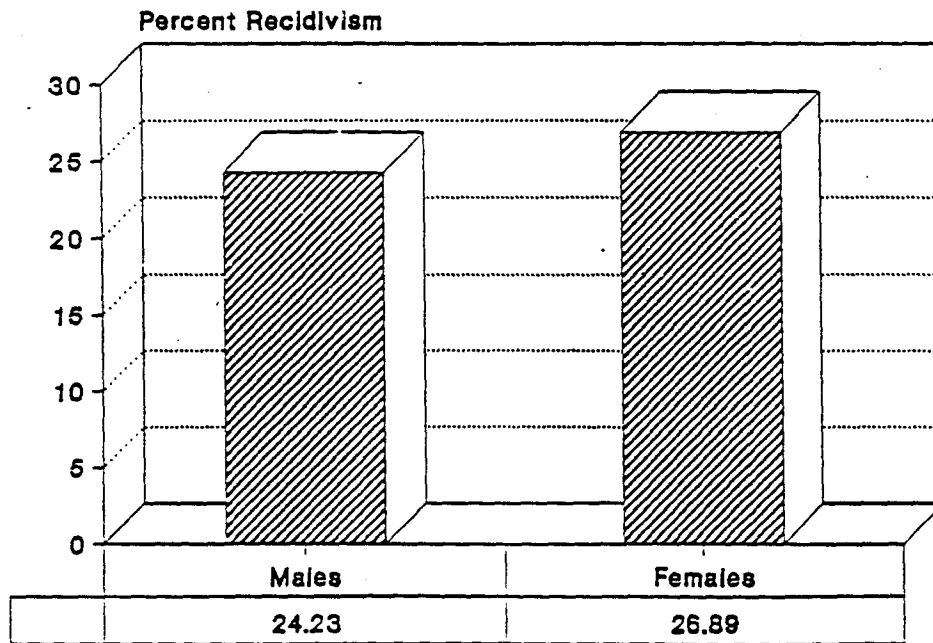


FIGURE 10

RECIDIVISM RATES BY GENDER
(within two years)



The relationship of age to group membership and to recidivism was also determined. The age distribution for each of the groups is shown in Figure 11. While there appears to be relatively little difference between these distributions, the analysis of variance indicates that the Monitor Only and Neither group were significantly younger than was the group that received both the Facility and the Monitor Program (see Table 4). Age was significantly related to recidivism as is shown in Table 5 and Figure 12. The offenders under 21 demonstrated the highest recidivism rate, while those 65 and over had the lowest rate. Recidivism demonstrated a fairly linear relationship to age. The indicated relationship between offender age and recidivism was a correlation of $-.075$. Since the Neither group tended to be younger, this correlation would tend to increase the number of rearrests for that group and reduce the rearrest among Both and Facility. However, the relationship is small. Because the relationship is significant, however, this variable was used as a covariate in some of the analyses conducted to determine the effect of the Monitor and Facility programs.

Prior Offenses

The number of prior offenses varied significantly among groups as shown in Table 6 and Figures 13 and 14. All three of the treated groups contained offenders who had on an average more priors than those offenders who were sentenced to neither the Monitor Program nor the Facility. The largest number of priors was for those offenders who were sentenced to both treatments. Because of the strong relationship between group membership, mean number of priors and recidivism, the correlation between priors and recidivism was not significant overall (see Table 6). It was significant within groups.

The combination of the significant inter-group differences in priors with the relatively strong relationship between priors and recidivism makes this an important variable for control through covariate analysis. As noted earlier, this variable might be even more significant had it been possible in the present study to collect information on priors over a period of 10 years before the offense, rather than only 36 months. However, even within more limited time, this variable is significant to the present analysis. It was used in two ways. One, as a covariate when all offenders assigned to each of the four groups were studied, and secondly, as a basis for separating offenders into those with priors and those without priors for separate study.

Variation in Date of Index Offense

This study was designed to evaluate differences in recidivism between the four experimental groups beginning with individuals who were convicted of drunken driving in August 1985 and continuing through those convicted in calendar 1988. A possibly confounding

FIGURE 11

Age Distribution by Group

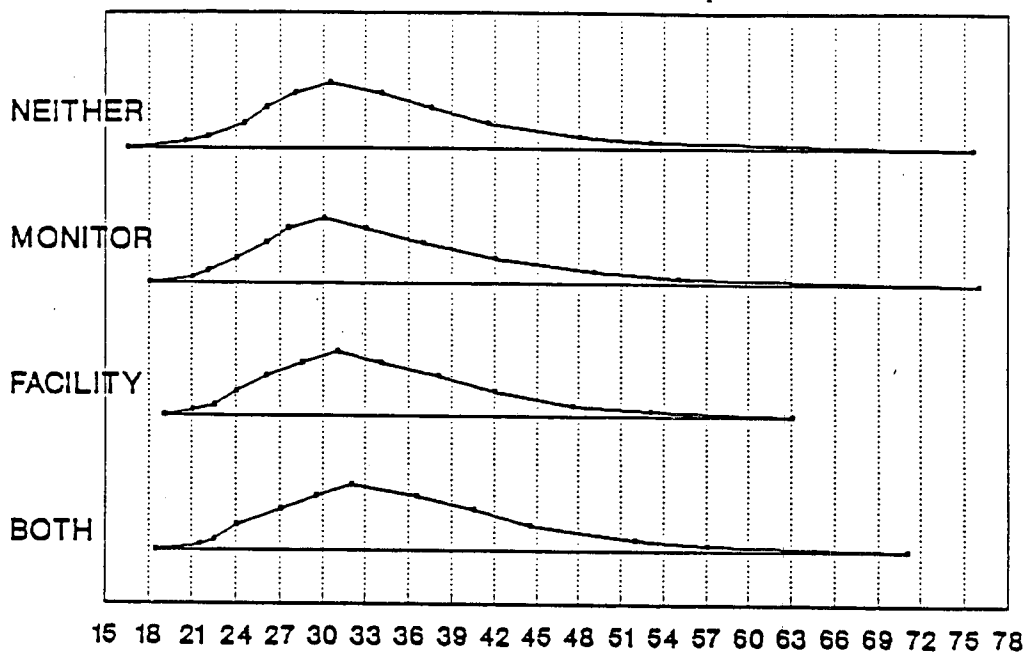


FIGURE 12

Recidivism Rates by Age Group
(within two years)

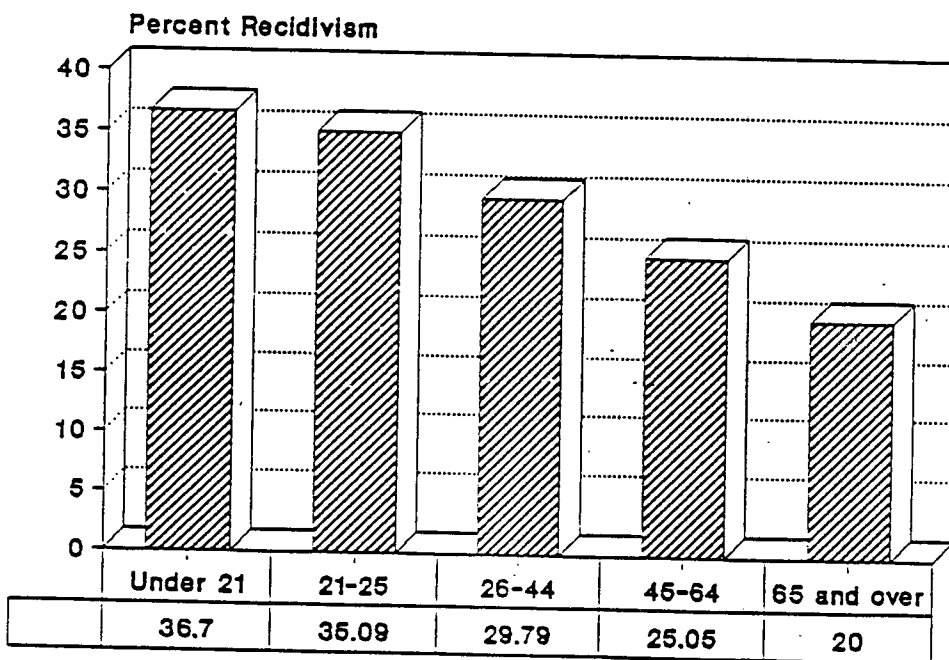


TABLE 4

AGE DIFFERENCES BETWEEN
TREATMENT GROUPS

	<u>Count</u>	<u>Standard Mean</u>	<u>Deviation</u>
Group 1 Both	612	34.8795	10.7750
Group 2 Facility	832	34.4964	10.3358
Group 3 Monitor	1701	33.4249	10.7571
Group 4 Neither	2710	33.4862	10.3462
Total	5855	33.7576	10.5213

Analysis of Variance

<u>Source</u>	<u>D.F.</u>	<u>Squares</u>	<u>Square</u>	<u>F Ratio</u>	<u>F Prob.</u>
Between Groups	3	1612.2653	537.4218	4.8645	.0023
Within Groups	5851	646407.7591	110.4782		
Total	5854	648020.0243			

G G G G
r r r r
P P P P
3 4 2 1

<u>Mean</u>	<u>Group</u>
33.4249	Group 3 Monitor
33.4862	Group 4 Neither
34.4964	Group 2 Facility
34.8795	Group 1 Both

* *

* Denotes groups that are significantly different at the .05 level, using Scheffe's multiple comparison procedure.

TABLE 5

RELATION OF OFFENDER AGE
TO TWO YEAR RECIDIVISM RECORD

<u>Age Group</u>	<u>Mean</u>	<u>Std Dev</u>	<u>Cases</u>
For Entire Population	.3069	.4613	3431
<21	.3670	.4833	188
21-25	.3509	.4775	818
26-44	.2979	.4574	1917
45-64	.2505	.4338	483
65+	.2000	.4082	25

Analysis of Variance

<u>Source</u>	<u>Sum of Squares</u>	<u>D.F.</u>	<u>Mean Square</u>	<u>F</u>	<u>Sig.</u>
Between Age Groups	4.2378	4	1.0594	5.0023	.0005
Linearity	4.1001	1	4.1001	19.3595	.0000
Dev. from Linearity	.1376	3	.0459	.2166	.8849

R = -.0750 R Squared = .0056

Within Groups 725.5885 3426 .2118

Eta = .0762 Eta Squared = .0058

TABLE 6

RELATIONSHIP OF PRIORS TO
 RECIDIVISM FOR ALL OFFENDERS

<u>Variable</u>	<u># of Priors</u>	<u>Mean</u>	<u>Std Dev</u>	<u>Cases</u>
For Entire Population		.1987	.3990	5341
PRIORS2	0	.2005	.4004	4114
PRIORS2	1	.1852	.3887	934
PRIORS2	2 or more	.2150	.4115	293

Total Cases = 5341

Analysis of Variance

<u>Source</u>	<u>Sum of Squares</u>	<u>D.F.</u>	<u>Mean Square</u>	<u>F</u>	<u>Sig.</u>
Between Groups	.2614	2	.1307	.8210	.4402
Within Groups	849.9689	5338	.1592		

Eta = .0175

Eta Squared = .0003

FIGURE 13

Percent Having Prior Offenses

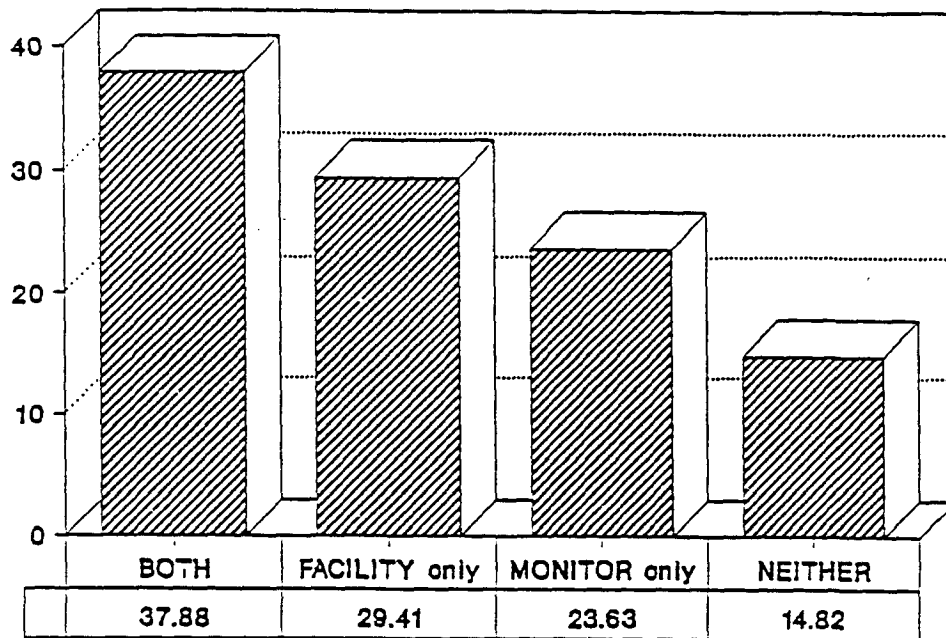
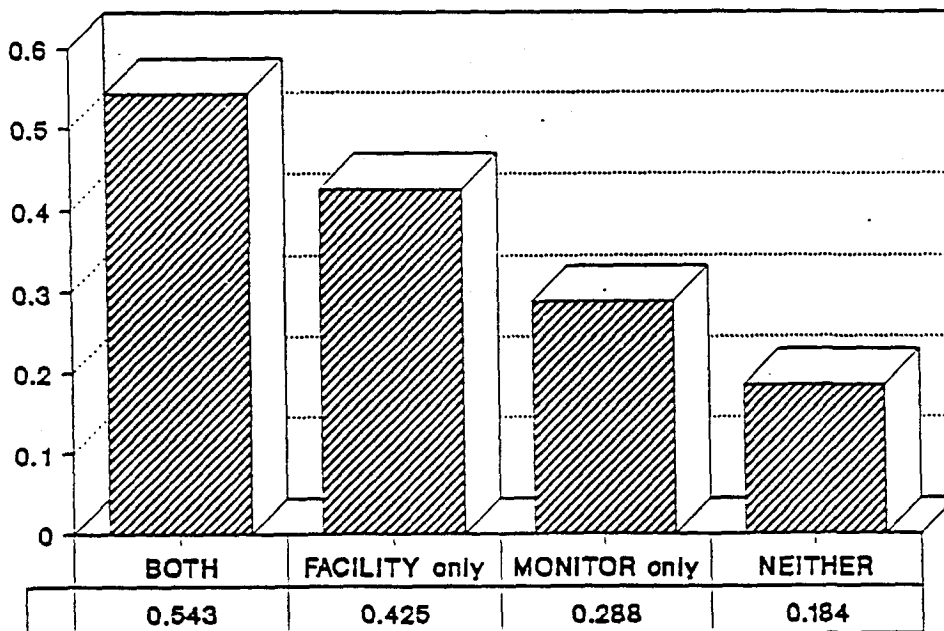


FIGURE 14

Average Number of Priors



factor is between group variation in the distribution of dates of the index conviction of the offenders in each group. If most of the offenders studied in the Neither group were convicted in 1985 while most of the offenders in the Facility group were convicted in 1987, it is possible that differences in recidivism could occur due to variations in such factors as enforcement of drunken driving penalties in P.G. County over time. It was important, therefore, to determine the distribution of entry dates for those offenders placed in each of the four groups. This distribution is shown in Figure 15.

These distributions were compared through analysis of variance. While the distributions appear similar in Figure 15, the analysis demonstrated that the Facility only group had a significantly later mean entry date than the other three groups. This difference was apparently due to the tendency of judges early in the life of the DWI Facility to sentence individuals to both the DWI Facility and the Monitor Program while later on individuals were assigned more frequently to the Facility alone without the follow-up Monitor Program. This change is shown in Figure 16. Because most of the analysis of the differences between the four experimental groups have been based on offenders who had at least 2 years of exposure after the index offense, the tendency of the judges to use both treatments early increases the size of that group relative to the size of the Facility only group. This change had little effect on the Monitor only group since there were many in the Monitor Program from the beginning of the catchment period in 1985.

[Note that Figure 16 shows proportions of the Facility group assigned to the Monitor Program for the periods January through June 1985 which is before the official opening of the Facility. This occurs because the entry date used for the study was the conviction date, not the date of entry into the Facility. A number of individuals convicted during the first half of 1985 had to wait for entry into the Facility until it opened in July of that year. Thus, the Facility group does include some individuals convicted prior to its official opening].

Analysis of Recidivism

Recidivism can be analyzed by a number of different statistical techniques. Since the occurrence or non-occurrence of a re-arrest for DWI is categorical data, the use of log-linear analysis and models based on the Chi Square statistic are normally recommended. However, it has been the experience of this investigator that the more familiar Analysis of Variance and the Analysis of Covariance techniques frequently provide the same result. For the current analysis, four different techniques were utilized to explore the data as fully as possible. These four procedures included the following:

FIGURE 15

Date of Baseline Offense

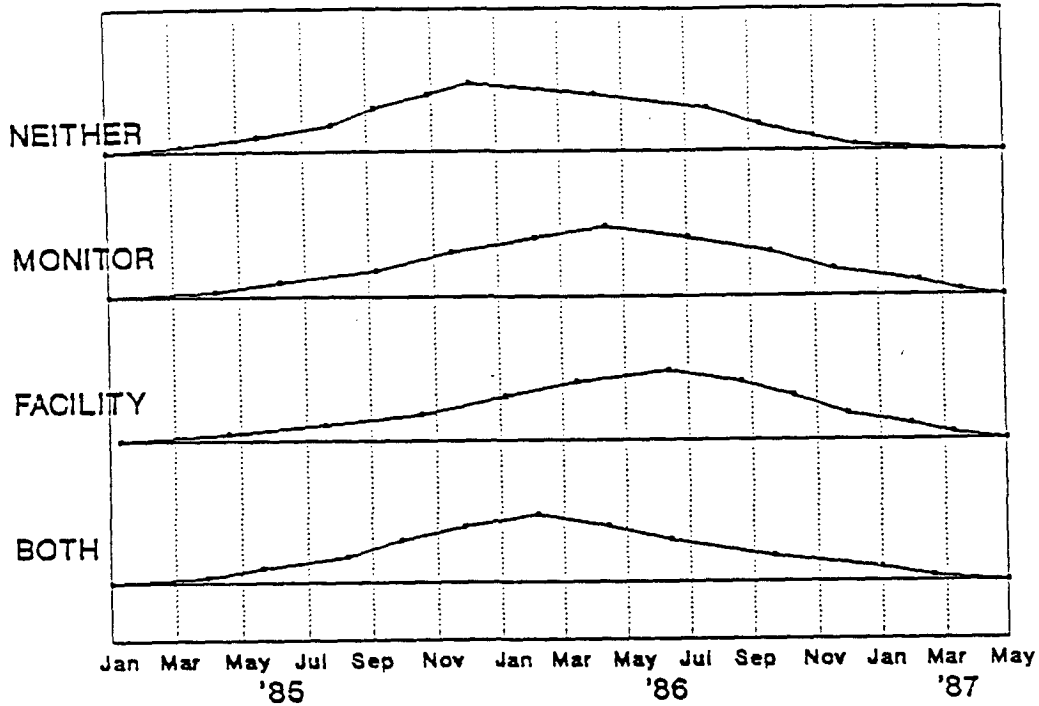
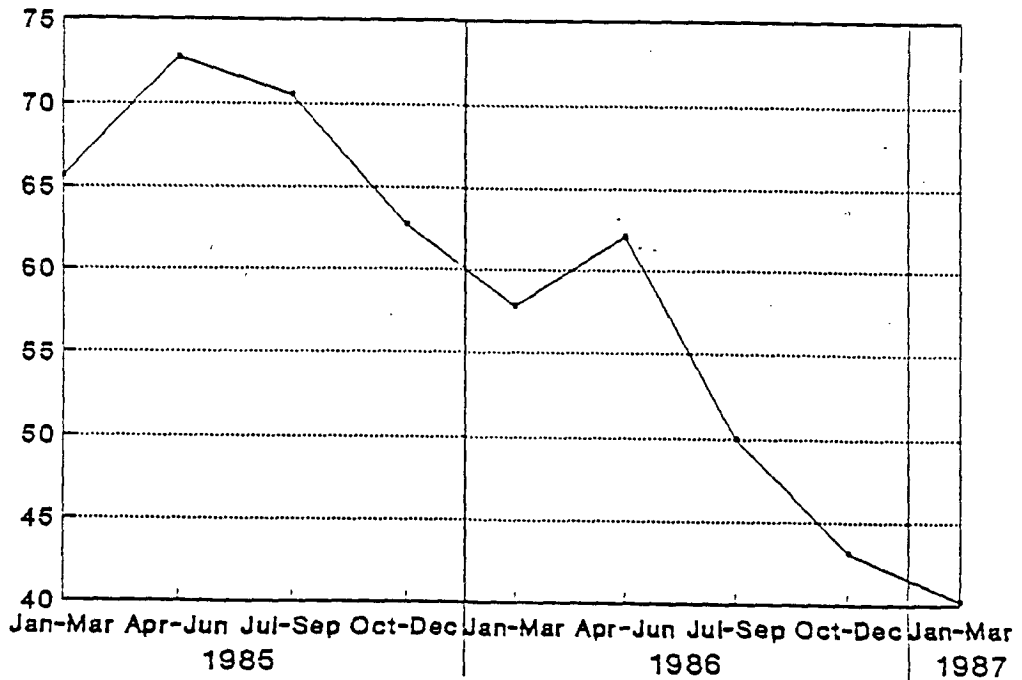


FIGURE 16

Percent of Facility Group Assigned to Monitor Program



1. Analysis of Covariance (ANCOVA) in which priors, were used as a covariate to control the differences in individual assignment to the four groups being evaluated.
2. Analysis of Variance (ANOVA) was used to evaluate the recidivism of the four experimental groups after dividing all of the clients into those with no priors (first offenders) and those with one or more priors (multiple offenders). ANOVA was also applied to the time between conviction and the recidivist offense.
3. Log Linear Analysis was conducted on the four groups after the clients had been divided into those with priors and those who were first offenders.
4. The survival analysis technique was applied to the populations of the four treatments after dividing them between those with and without priors.

Analysis of Covariance

To compare the overall recidivism for offenders assigned to Facility or Monitor Program or both with those who received neither of these treatments, an analysis of covariance was employed using DWI offenses during the 36 months preceding the index offense as a measure for adjusting the group differences in the drinking status of the individuals assigned by the courts.

The result of this analysis is shown in Table 7 and Figure 17. As can be seen, when the recidivism data were adjusted for prior offenses, the Neither group had almost 4 times more recidivism during the two years following the index offense than did those assigned to one of the treatment groups. This difference between the Neither and the treatment groups is highly significant, however, there are no significant differences between the three treatment groups themselves.

It is clear that the largest difference between the Neither and the treated groups occurs during the first year for which there is almost five times as much recidivism in the Neither group as in those sent to the monitor or the Facility, or both. However, the difference persists in the second year where the recidivism for the Neither group is approximately 50% higher than for the treated groups.

TABLE 7
ANALYSIS OF COVARIANCE FOR 12 MONTH
RECIDIVISM PERIOD - SECOND YEAR ONLY
(PRIORS BASED ON 36 MONTHS)

Tests of Significance for RCD_24# using UNIQUE sums of squares.

Source of Variation	SS	DF	MS	F	Sign. of F
WITHIN CELLS	548.88	4613	.12		
REGRESSION	1.13	1	1.13	9.47	.002
CONSTANT	16.13	1	16.13	135.53	.000
GROUP	6.01	3	2.00	16.85	.000

Regression analysis for WITHIN CELLS error term.
Dependent variable .. RCD_24#

Covariate	B	Beta	Std. Err.	t-value	Sign. of t
PRIORS36	.02541	.04526	.008	3.077	.002

Adjusted and Estimated Means
Variable .. RCD_24#

Cell	Obs. Mean	Adj. Mean	Est. Mean	Raw Resid.	Std. Resid.
1 - Both	.071	.067	.071	.000	.000
2 - Facility only	.060	.059	.060	.000	.000
3 - Monitor only	.070	.072	.070	.000	.000
4 - Neither	.147	.151	.147	.000	.000

(*) Denotes pairs of groups significantly different at the .050 level.

Mean	Group	G r	G r	G r	G r
.0598	Group 2	p	p	p	p
.0696	Group 3	2	3	1	4
.0712	Group 1				
.1471	Group 4	*	*	*	

FIGURE 17
 OVERALL - ADJUSTING FOR PRIORS

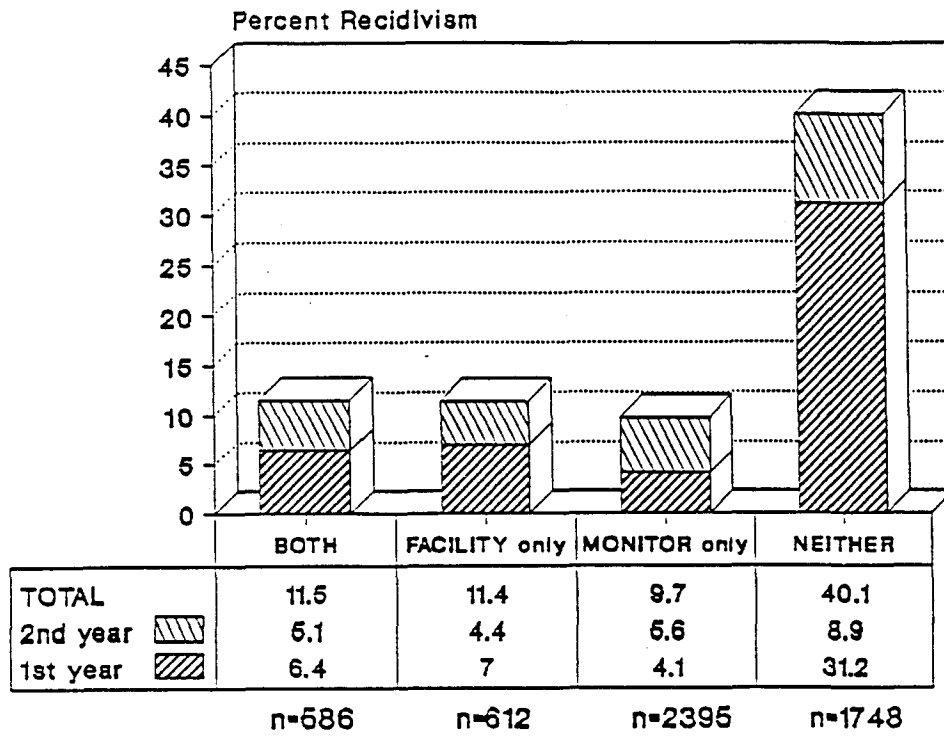
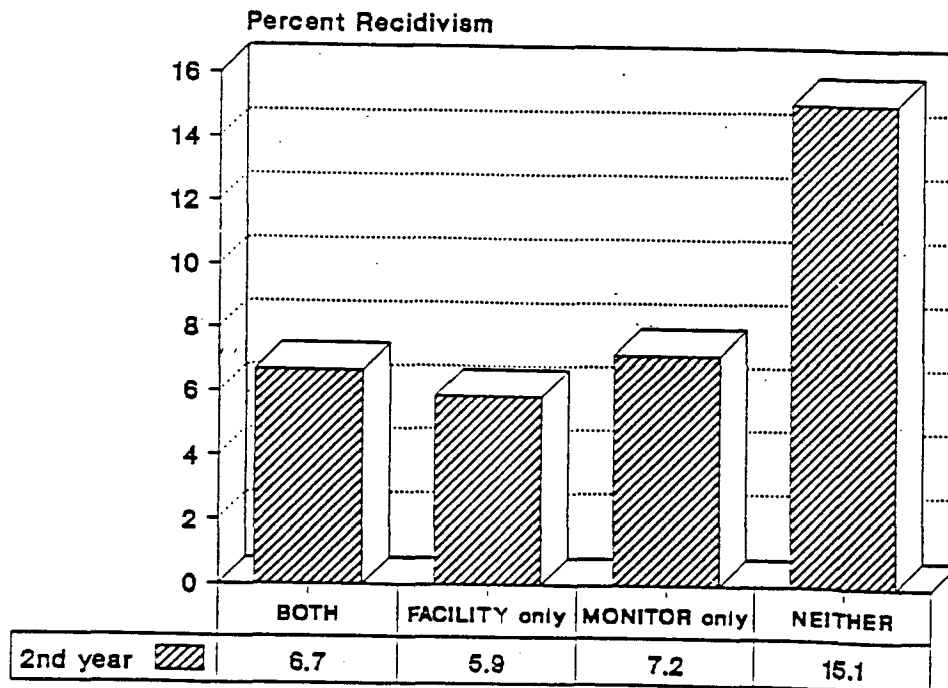


FIGURE 18
 OVERALL - NO 1st YEAR REPEATS



If those who had a repeat offense during the first year following their index offense are dropped and only those who "survived" into the second year are considered, then the recidivism for the Neither group is almost twice as high as for the treated groups (Figure 18). Thus, the advantage of the treated groups extends into the second year.

Analysis of Variance

Another approach taken to the evaluation of the differences between treated and untreated groups was to break the offenders into two groups. The first offenders with no priors and the multiple offenders with one or more priors were analyzed separately using analysis of variance. This is shown in Figures 19 and 20.

The largest difference between treated groups and the Neither group occurs for the first offenders with no priors (Figure 19). Differences are significant in both the first year where the Neither group has a recidivism rate almost 6 times higher than the treated groups and in the second year in which the Neither group has a recidivism rate double that of the treated groups.

The differences in recidivism are less marked among the multiple offenders (Figure 20). In part, this may be due to the relatively small samples available for analysis. In the case of the multiple offenders, the recidivism rate for the Neither group is approximately twice that of the treated groups during the first year but there appears to be no difference in recidivism during the second year (Figure 22).

In part, this lack of difference from multiple offenders may be due to differences in the initial input population since the treatment groups had a higher average number of DWIs during the 3 years before the index offense than did the Neither group. This difference is shown in Figures 13 and 14.

The effect of treatment for the second year for those with and without priors is shown in Figures 21 and 22. In this analysis, only those individuals who survive first year without a DWI offense are included. As can be seen for the first offenders, the impact of the treatment programs is highly significant even in the second year where the Neither group had three times the higher recidivism than the treated group. However, the multiple offenders show no significant differences in second year offenses.

Analysis of Time to Repeat Offense

The analysis described above used the recidivism measure as a bivariate; present or absent. Analysis of variance and covariance is best applied to continuous rather than categorical data. The recidivism event can be turned into a continuous measure by using the number of days to reoffense. This produces a somewhat skewed

FIGURE 19

NO PRIORS

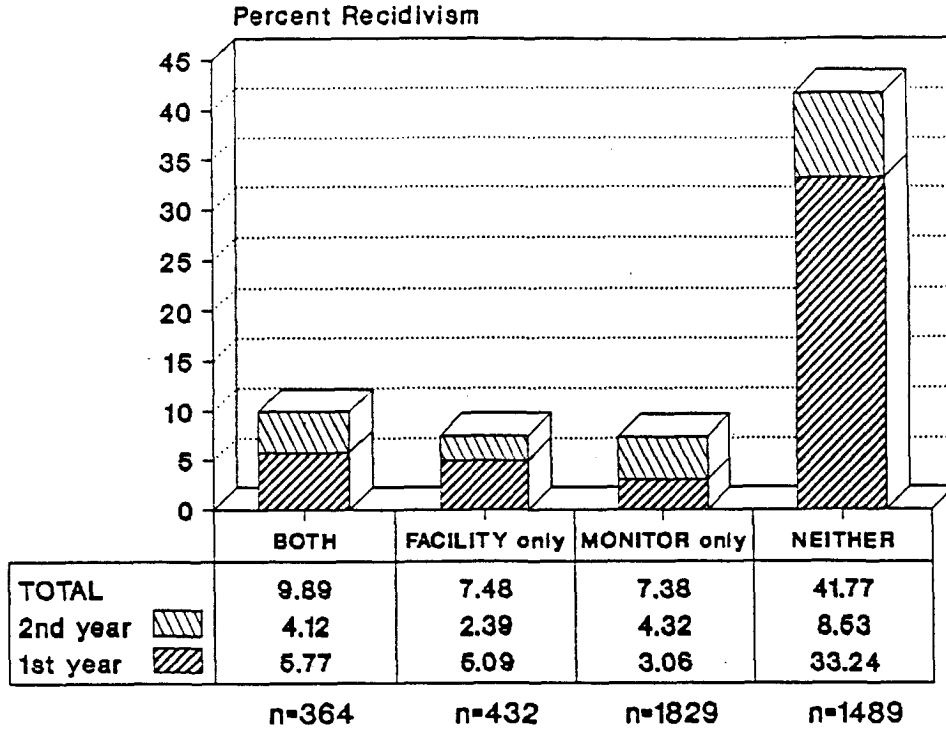


FIGURE 20

ONE OR MORE PRIORS

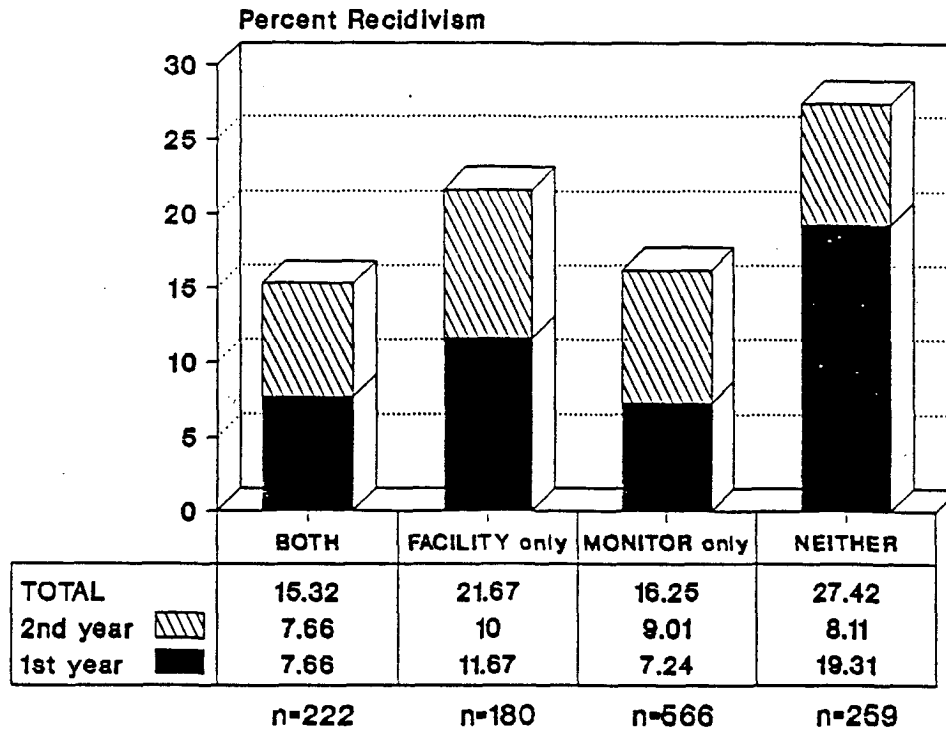


FIGURE 21

NO PRIORS - NO 1st YEAR REPEATS

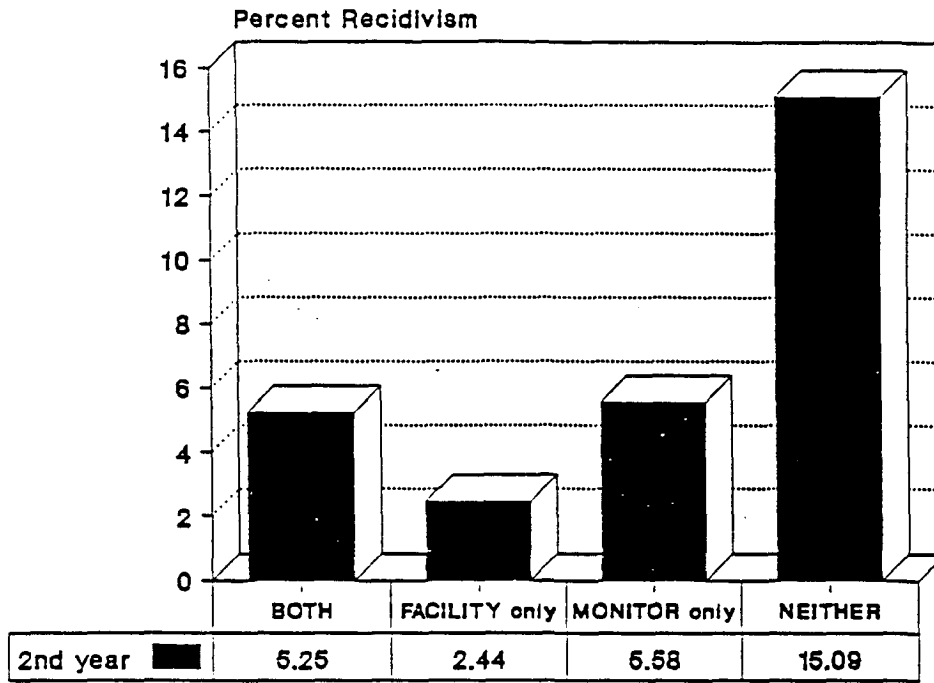
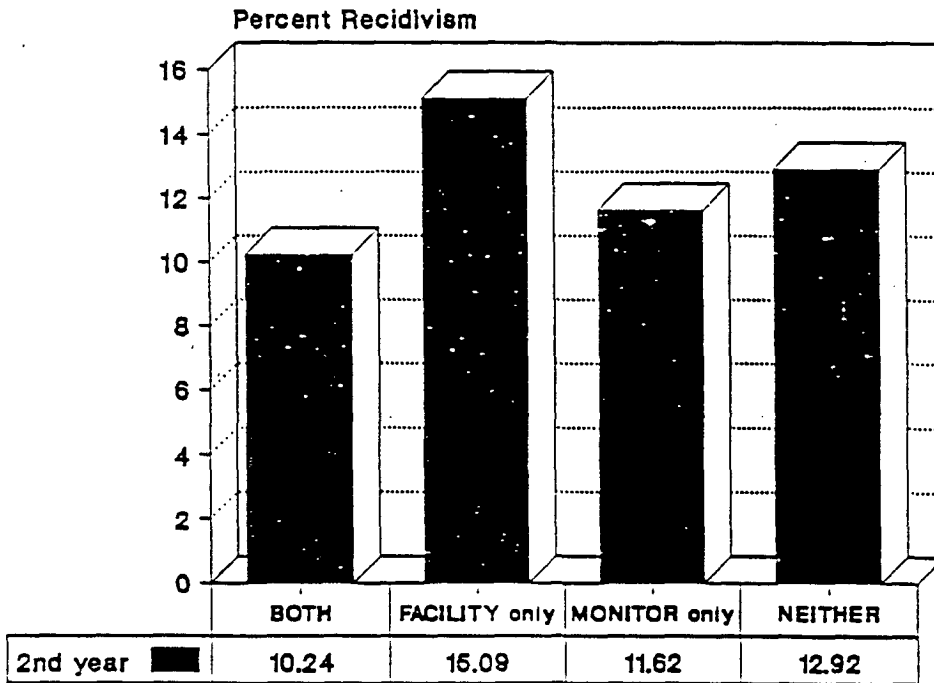


FIGURE 22

1+ PRIORS - NO 1st YEAR REPEAT



distribution since those who survive for the full 2 year period all receive the same 720-day score. For this analysis, the group was then divided into the 4114 offenders who had no priors and the 1227 offenders with one or more prior. The results of the analysis are shown in Table 8.

As can be seen, the results are essentially consistent with the analysis using the recidivism as a bivariate. Once again, the Neither group has a worse (in this case, lower) mean time to reoffense than do the 3 treatment groups which have close to identical mean times to reoffense. When the multiple offenders are considered, the overall F ratio is still highly significant, the Neither group having a shorter time to reoffense than the treated groups. However, as before, the difference for the multiple offenders are not as great as for the first offenders.

The mean time to reoffense combines two features of the criteria data. One is the total number of recidivist events and the other is the elapsed time between the index offense and the recidivism offense. In order to determine the effect of time, independent of the number of recidivism, an analysis of variance was conducted on the mean time to reoffense only for those who had a repeat offense. In this analysis those who survived 2 years without a repeat offense were not included. Once again, the groups were divided into those with priors, the multiple offenders, and those with no priors, the first offenders. Analysis of variance was used to analyze the differences between treatment groups and the data appear in Table 9. As can be seen at the top of Table 9, the group of first offenders demonstrated a highly significant difference between the Neither and the Monitor Programs in terms of the time to reoffense. The differences are highly significant but note that the number in the both group and Facility group are very small, so that the mean values are relatively unreliable.

For those multiple offenders who reoffended within two years (bottom of Table 8), there is also a tendency for the Neither group to have an earlier mean reoffense time than the three treated groups. Once again, note that the groups are small and therefore the means relatively unreliable. Despite this, the F ratio was 2.53 which is significant at approximately the .05 level. Thus, there is evidence for both the first offenders and the multiple offenders that there is not only more recidivism for the Neither group than for the treated groups but that recidivism occurs at an earlier time closer to the index offense.

Log Linear Analysis

As noted above, the recidivism criterion consists of categorical data (occurrence or non-occurrence of a DWI during the two year period following index offense). Categorical data is best analyzed with non-parametric, log linear methods and the Chi Square test. While it is believed that Analysis of Variance is sufficiently robust to provide a valid result using the recidivism variable, this assumption was tested by

TABLE 8
ANALYSIS OF VARIANCE
TIME TO RECONVICTION

First Offenders:

<u>Factor</u>	<u>Code</u>	<u>Mean</u>	<u>Std. Dev.</u>	<u>N</u>
GROUP	BOTH (F+M)	691.690	128.887	364
GROUP	FACILITY	697.914	123.932	432
GROUP	MONITOR	705.097	102.292	1829
GROUP	Neither	524.853	265.677	1489
For entire sample		637.920	201.323	4114

Tests of Significance for ND_24 using UNIQUE sums of squares

<u>Source of Variation</u>	<u>SS</u>	<u>DF</u>	<u>MS</u>	<u>F</u>	<u>Sig of F</u>
WITHIN CELLS	136806720.4	4110	33286.31		
CONSTANT	1092614236	1	1.093E+09	32824.74	.000
GROUP	29896675.12	3	9965558.4	299.39	.000

Multiple Offenders:

<u>Factor</u>	<u>Code</u>	<u>Mean</u>	<u>Std. Dev.</u>	<u>N</u>
GROUP	BOTH (F+M)	674.901	143.021	222
GROUP	FACILITY	649.639	178.736	180
GROUP	MONITOR	672.523	150.715	566
GROUP	NEITHER	611.703	218.476	259
For entire sample		656.758	171.683	1227

Tests of Significance for ND_24 using UNIQUE sums of squares

<u>Source of Variation</u>	<u>SS</u>	<u>DF</u>	<u>MS</u>	<u>F</u>	<u>Sig of F</u>
WITHIN CELLS	35387762.66	1223	28935.21		
CONSTANT	433817121.8	1	433817122	14992.71	.000
GROUP	748632.45	3	249544.15	8.62	.000

conducting a separate log linear analysis of the first and multiple offenders. The results of the analysis is shown in Table 10. The Chi Square is highly significant, indicating once again that there is a significant difference between groups and that the individuals sentenced to one of the two treatments or to both treatments had significantly less recidivism than the Neither group. Thus the log linear results are consistent with the ANOVA and ANCOVA results.

Survival Analysis

The survival analysis technique is particularly useful for analyzing recidivism since it permits the use all of the data rather than requiring that some cases be dropped so that the exposure period is across groups. The survival analysis system does not require that the exposure to recidivism be equated across groups but can handle differences in exposure by considering the total exposure based on the number of cases in each group separately day by day through whatever survival period is available.

Survival analysis was applied as before separately to the first offenders and multiple offenders. These two analyses are shown in Figures 23 and 24. The analysis for the first offenders provides results similar to the previous ANOVA and Log Linear analysis. The Neither group has a much lower survival rate than the three treated groups. This difference is highly significant, as shown in Table 11. There is some evidence that first offenders assigned to the Monitor Program have slightly lower recidivism rates than those sent only to the Facility. Among the multiple offenders, the Neither group has a significantly lower survival rate than offenders assigned to the Monitor Program (Table 11), while the Facility only group falls between the Neither and the two monitor groups for multiple offenders. The Facility only group has about the same survival rate as the Neither group. However, it should be kept in mind that the numbers of cases are quite small in this analysis because there were relatively few multiple offenders in the Neither group. Moreover, the numbers on which the curves are based decrease as individuals reoffend and drop out of the survival group.

FIGURE 23
NO PRIORS (within last 36 months)

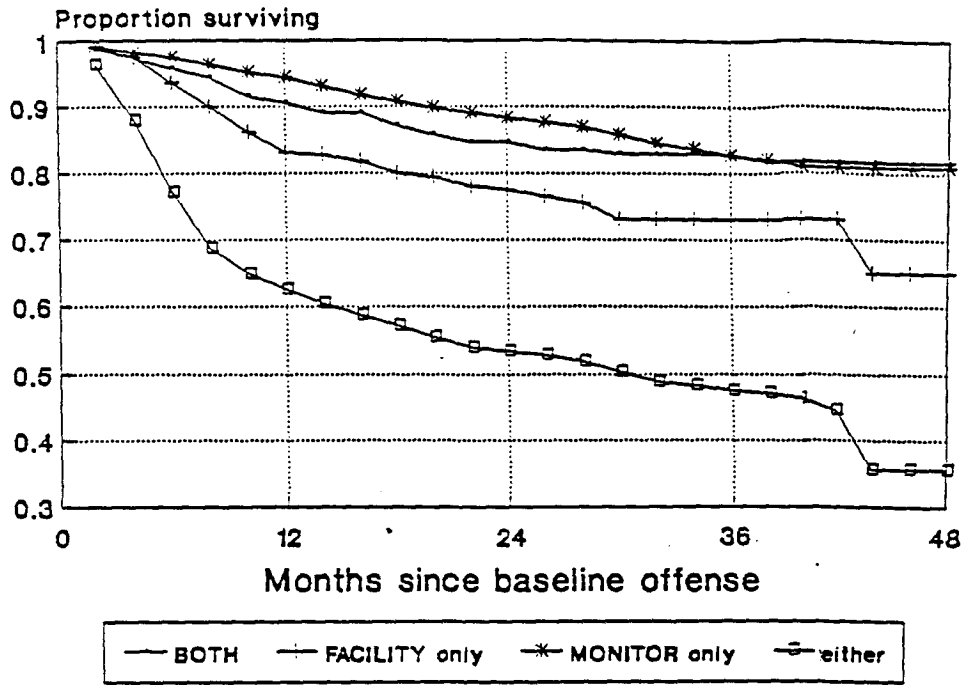


FIGURE 24
PRIORS (within last 36 months)

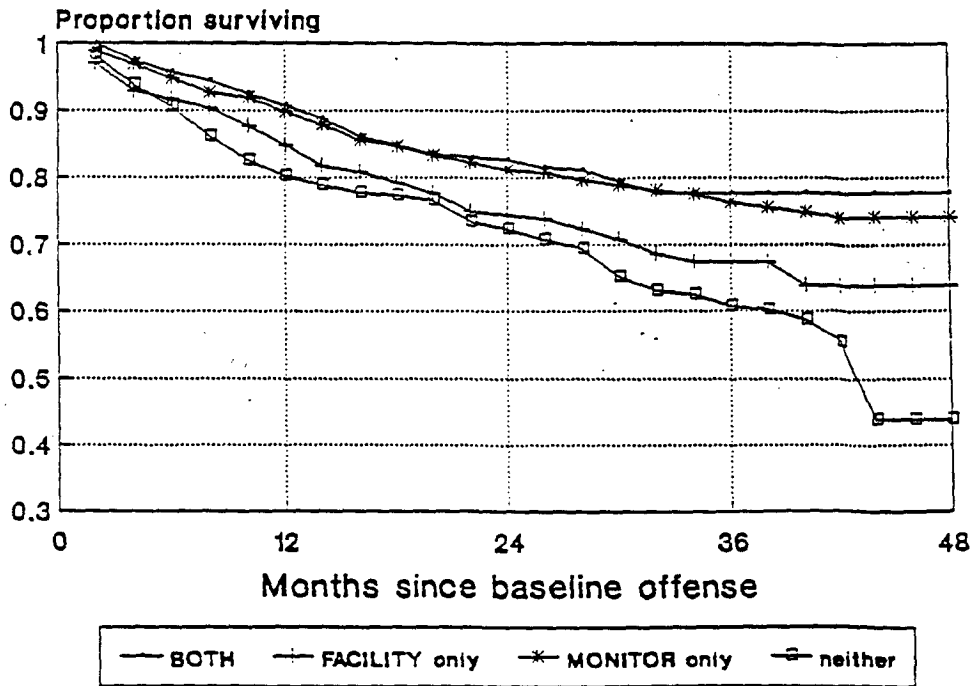


TABLE 9

ANALYSIS OF VARIANCE TIME TO RECONVICTION FOR OFFENDERS
WHO RECIDIVATED DURING 24 MONTHS
FOLLOWING THE INDEX CONVICTION

First Offenders:

<u>Factor</u>	<u>Code</u>	<u>Mean</u>	<u>Std. Dev.</u>	<u>N</u>
GROUP	BOTH (F+	342.639	182.254	36
GROUP	FACILITY	296.844	184.959	32
GROUP	MONITOR	392.607	191.116	135
GROUP	Neither	238.900	168.736	622

Tests of Significance for ND_24 using UNIQUE sums of squares

<u>Source of Variation</u>	<u>SS</u>	<u>DF</u>	<u>MS</u>	<u>F</u>	<u>Sig of F</u>
WITHIN CELLS	24798478.54	821	30205.21		
CONSTANT	23741146.57	1	23741147	786.00	.000
GROUP	2843435.68	3	947811.89	31.38	.000

Multiple Offenders:

<u>Factor</u>	<u>Code</u>	<u>Mean</u>	<u>Std. Dev.</u>	<u>N</u>
GROUP	BOTH (F+	370.235	155.101	34
GROUP	FACILITY	359.103	199.725	39
GROUP	MONITOR	376.391	187.529	92
GROUP	NEITHER	298.465	197.033	71

Tests of Significance for ND_24 using UNIQUE sums of squares

<u>Source of Variation</u>	<u>SS</u>	<u>DF</u>	<u>MS</u>	<u>F</u>	<u>Sig of F</u>
WITHIN CELLS	8227433.28	232	35463.07		
CONSTANT	24644894.06	1	24644894	694.95	.000
GROUP	269648.95	3	89882.98	2.53	.058

TABLE 10
LOG LINEAR ANALYSIS OF RECIDIVISM DATA FOR OFFENDERS
WITH AND WITHOUT PRIORS

Observed, Expected Frequencies and Residuals:

<u>FACTOR</u>	<u>OBS COUNT</u>	<u>EXP COUNT</u>	<u>ADJ RESIDUAL</u>	<u>RESIDUAL</u>
NOT REPEATING				
NEITHER				
Priors None	918.00	1249.81	-331.807	-25.045
Priors 1 or more	134.00	149.30	-15.303	-2.869
FACILITY only				
Priors None	425.00	370.85	54.152	6.620
Priors 1 or more	122.00	125.22	-3.222	-.658
MONITOR only				
Priors None	1757.00	1526.74	230.260	16.482
Priors 1 or more	459.00	439.88	19.119	2.165
BOTH				
Priors None	351.00	313.05	37.946	5.013
Priors 1 or more	171.00	162.15	8.854	1.596
REPEATING				
NEITHER				
Priors None	639.00	307.19	331.807	25.045
Priors 1 or more	52.00	36.70	15.303	2.869
FACILITY only				
Priors None	37.00	91.15	-54.152	-6.620
Priors 1 or more	34.00	30.78	3.222	.658
MONITOR only				
Priors None	145.00	375.26	-230.260	-16.482
Priors 1 or more	89.00	108.12	-19.119	-2.165
BOTH				
Priors None	39.00	76.95	-37.946	-5.013
Priors 1 or more	31.00	39.85	-8.854	-1.596

Goodness-of-Fit Test Statistics:

Likelihood Ratio Chi Square = 678.56554 DF = 7 P = .000

Pearson Chi Square = 700.92310 DF = 7 P = .000

TABLE 11

Significance of Results of
Survival Analysis

	<u>NO PRIORS</u>			<u>PRIORS</u>		
MONITOR EFFECT:	Lee-Desu	sign.		Lee-Desu	sign.	
Neither vs. Monitor only	623.71	<.001		20.14	<.001	
Facility only vs. Both	7.19	.008		7.31	.007	
FACILITY EFFECT:	Lee-Desu	sign.		Lee-Desu	sign.	
Neither vs. Facility only	57.48	<.001		1.10	.28	
Monitor only vs. Both	1.66	.20		.20	.65	
OTHER COMPARISONS:	Lee-Desu	sign.		Lee-Desu	sign.	
Facility only vs. Monitor only	20.08	<.001		7.55	.006	
Neither vs. Both	132.87	<.001		15.58	<.001	

SUMMARY OF RESULTS

The various analytical procedures applied to the recidivism data available for this study appeared to agree well in the results obtained. These results are summarized below:

1. Offenders sentenced to the DWI Facility or State monitoring program or both have significantly lower overall recidivism rates than do those DWI offenders who are given neither of these alternatives. The difference is quite large for those offenders not assigned to one of the treatment alternatives. They have recidivism rates 4 times larger than the treated offenders.

2. When the P.G. County offenders are divided into those who have not had a prior DWI offense in the 3 years preceding their conviction (first offenders) and those who have had one or more offenses in the preceding 3 years (multiple offenders) the impact of assignment to treatment program on recidivism appears to be greater for the first than for the multiple offenders. For first offenders, the advantage is approximately 5 to 1, with those not assigned to one of the two treatment options having five times more recidivism during the 2 years following conviction. The reduction in recidivism associated with sentencing to one of the two treatment options appears smaller but still statistically significant for those with prior offenses. These multiple offenders who are not assigned one of the treatment options have approximately 50% more recidivism over 2 years than those who are sentenced to the monitor Facility, the DWI Facility, or both.

3. The impact of the assignment to the DWI Facility on recidivism is greatest in the first year following conviction and smaller but still significant in the second year for the first offenders. For the multiple offenders, treatment reduces recidivism in the first year but there is no difference in the second year recidivism rate.

4. Sentencing the offenders to the treatment options also appears to lengthen the time between the index conviction and a subsequent DWI offense among those offenders who do recidivate. Offenders not assigned to any treatment options demonstrated a significantly shorter period between their conviction and a subsequent DWI offense.

5. Approximately 92% of all P.G. County offenders are male. However, only 89% of the individuals not assigned to one of the treatment programs were male. This difference between those groups sentenced to treatment which had slightly higher percentages of males and the Neither group, which had a slightly lower percentage of males, was statistically significant. Females had a slight tendency to recidivate more frequently than males. However, this difference in recidivism rate was not statistically significant.

6. Offender age is related to the probability of repeating the DWI offense. The highest recidivism rate is demonstrated by young drivers under the age of 21. The lowest rate is demonstrated by the elderly over age 65. The average age for those sentenced to the Facility or to both treatment programs was 34, whereas the average age for those who were sentenced only to the Monitor Program or sentenced to Neither treatment was approximately 33. This difference was statistically significant indicating that age could play some role in the observed differences in recidivism between those treated and the Neither group.

7. The number of priors during the 3 years preceding the index offense was clearly related to group membership. More multiple than first offenders are likely to be sentenced to the Facility or the Monitor Program. Since the number of multiple offenders in the treated group was high, while the recidivism of these groups was low, there was a strong interaction between group membership and priors. This interaction was strong enough that the direct correlation between priors and recidivism was not statistically significant. However, the relationship between priors and recidivism within group was strong enough for this variable to be a useful covariate for equating groups.

DISCUSSION

The large difference between the treated and untreated P.G. County offenders is surprising. Normally, studies of the effect of treatment on recidivism reveal a much more modest impact of treatment on the reoffense rate. However, it should be noted that a relatively similar result was reported by LeClair (1987) at the Longwood Treatment Center in Massachusetts. This Facility is similar to the P.G. County DWI Center in that it is run by the Corrections Department and is considered an incarceration program where inmates are held in a non-secure Facility but under discipline similar to that which would be typical of a jail. The Longwood program includes detoxification, where required, educational programs, group and individual counseling. Like the P.G. County center, the majority of those sentenced to Longwood are multiple offenders.

Individuals attending the Longwood Facility were found to have a recidivism rate of approximately 6% (note the similarity to the data in this study) compared to a statewide rate for offenders of 25% and a 19% for multiple offenders assigned to low security institutions without treatment facilities. Thus, the current results are quite consistent with those of the Longwood Facility.

Perhaps a somewhat surprising result of the present study is the lack of difference between the three treatment options. If the Facility alone is effective and the Monitor Program is equally effective, why is the combination of both not even more effective? With the relatively crude data available for this study, it is not possible to answer this question with certainty. It should be noted, however, that offenders who received both the facility and the monitor program had a greater number of prior DWI offenses (see Figure 13) indicating that they may have had more serious drinking problems. It is possible, therefore, that the benefit of combining both programs is hidden by the initial differences between groups.

It should also be noted that offenders placed in the DDMP are frequently required to attend an educational or outpatient treatment program and/or Alcoholics Anonymous. Thus, while the Monitor Only group did not receive a residential program, they were exposed to some therapeutic programs. This may have reduced some of the difference that might otherwise appeared in recidivism rates of the DDMP and Facility groups. As discussed below, an evaluation in Mississippi of probation monitoring alone, not associated with continued attendance at treatment and AA programs did not reduce recidivism.

There is some suggestion from the analysis of multiple offenders that the Monitor Program is more effective than the Facility program in reducing recidivism, after the first year. This difference, however, must be carefully interpreted since the numbers in the groups analyzed are very small and the difference is not statistically significant. It would be reasonable to suspect that the impact of 7-28 days in the Facility would wear off over time, while the continued presence of the monitoring

program for 6-12 months into the second year would be more effective in controlling drinking by offenders in the second year.

The apparent impact of the Monitor Program on recidivism is consistent with the results of Reis (1983) who found that bi-weekly meetings with a counselor in California was about as effective in reducing recidivism as was a year long treatment program for multiple offenders). Together the present study and the Reis report suggest that regular monitoring which is tied in with supervision of treatment can be an effective method of reducing recidivism.

This type of probation follow-up is in contrast to the traditional probation program such as that evaluated by Landrum et al (1980) in Mississippi. Their evaluation suggested that probation alone had no impact on recidivism. This may be due to the fact that the contact between the monitor and the offender was much less frequent and because the monitoring was not focused upon assurance of treatment follow-up. The individuals evaluated in the Mississippi probation program were given only short-term treatment programs. It would seem reasonable to believe that a monitoring program can be effective where individuals participate in a long-term treatment follow-up and where the monitoring is directly related to ensuring attendance and participation in that program. Another feature of the Maryland Monitor Program is the requirement of abstinence which was not a feature of the Mississippi DWI probation program.

In many areas, offenders are motivated to accept treatment programs by a reduction in the length of license suspension. This has led to a number of research projects to evaluate the relative effectiveness of full or partial suspensions in comparison to treatment with no driving limitation. Peck, Sadler and Perrine, (1985) have reviewed these studies which generally demonstrated suspension is more effective than treatment in reducing the overall number of traffic accidents. However, a number of these studies suggested that with respect to recidivism and alcohol-related accidents suspension and treatment may be equally effective in reducing recidivism (Sadler and Perrine, 1984; Tashima and Peck, 1986; Voas & McKnight, 1989).

The current research differs from these studies which contrast driving suspension with treatment in that there is evidence that the treated group received both suspension and the treatment program whereas the Neither group was only not sentenced to treatment, but in many cases did not receive a suspension. Thus, the current comparison combines, at least to some extent, the impact of both a suspension and treatment.

Some evidence for this proposition is demonstrated in Figure 25, which compares the recidivism in the first and second year for the group which received neither of the treatment programs. For the first offenders with no priors, there was a significantly higher recidivism rate than for the multiple offenders. The multiple offenders were generally given a driving suspension while the first offenders may have escaped the suspension in the majority of the cases. The difference in the recidivism first year

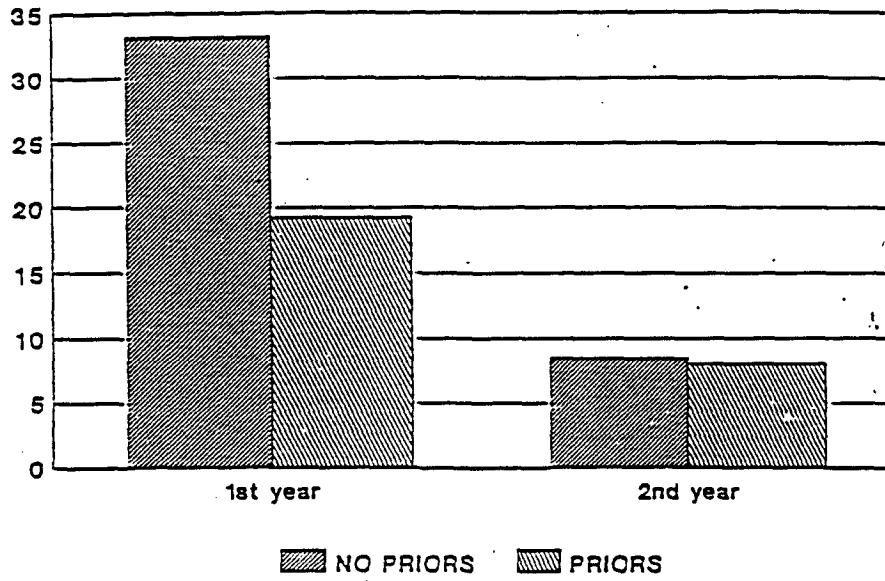
would appear to be due to the presence or absence of a driving suspension. Note that in the second year when neither the first or second offenses would have been suspended, recidivism is identical for both groups.

It is probably that in the current study, those first offenders whose drinking problem was viewed as serious enough for them to be sentenced to the Monitor Program or the Facility received a driving suspension while those first offenders assigned to neither of these programs were more likely to avoid suspension. For the multiple offenders, suspension was more likely for all individuals whether they were sentenced to treatment or not. Thus the avoidance of a suspension principally impacts first offenders in the *Neither* group during the first year. Since the effects of being sentenced to the Monitor Program or the DWI Facility persists into the second year for the first offender group, there is evidence that the differences demonstrated in recidivism are not simply due to license suspension. Moreover, the reduction produced by license suspension on the criterion used in this study - DWI recidivism - has been shown to be less strong than its effect on non-alcohol related crashes and offenses (Peck, Sadler and Perrine, 1985). Therefore, even if the first offender program groups has the "advantage" over the *Neither* group, of being suspended, this probably does not account fully, for the measured differences in the recidivism criterion.

Overall, the results of this study suggest that many first offenders in P.G. County are being let off too lightly in terms of sentencing alternatives available to the court. It appears that the number of DWI offenses committed by offenders could be reduced if even first offenders were placed on the Monitor Program or sent to the Facility and also received substantial driving suspensions. The Monitor Program and the Facility program which were designed principally for multiple offenders appear to be at least equally effective for first offenders (perhaps because among first offenders, there is a large number of unrecognized problem drinkers). The failure to use these alternatives with first offenders and particularly the failure to suspend the license of first offenders appears to be increasing the number of impaired drivers on the roads in Prince George's County.

FIGURE 25

NEITHER GROUP RECIDIVISM



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