SOBRIETY SCHEMES: LESSONS FROM THE US

BACKGROUND NOTE FOR DAN GREAVES, HOME OFFICE, OCTOBER 2013

Purpose of document

- Provide a detailed write-up of a recent Policy Exchange field trip the United States, incorporating site visits to a number of Sobriety Schemes
- Identify and assess a number of critical challenges for translating successful US schemes for the UK context
- Outline potential policy options for the further application of alcohol monitoring technologies, as part of a piloting strategy

Parts of this background note will be used for a major report on alcohol misuse and crime to be published by Policy Exchange in late 2013/early 2014.

Background

Policy Exchange has recently undertaken a series of public events on the subject of tackling problem drinking and crime, with contributors including Jeremy Browne MP, Damian Green MP and Diana Johnson MP.

We will publish research in the autumn on court reform, which will recommend greater specialisation in the courts system, including greater trialling of sentencing and court processes that specifically address alcohol-related offences.

We are about to embark on a major programme of research that would analyse the links between alcohol misuse and crime, and explore the use of targeted measures to change the culture of binge drinking amongst young people. This would include an examination of the emerging evidence from social psychology and neuroscience about what works in changing problem drinkers’ behaviour.

In July, with this programme of work in mind, Policy Exchange’s Crime and Justice Unit undertook a week-long visit to the United States, as guests of the National Association of Drug Court Professionals (NADCP).

The primary purpose of the trip was to provide US perspectives on problem-solving courts (e.g. drug courts, DWI courts, sobriety courts, veteran treatment courts, family courts). This included observing the annual NADCP Conference in Washington DC, followed by a series of visits to alcohol monitoring (and electronic monitoring) programmes in a number of different states.

Transdermal alcohol monitoring technology

Transdermal alcohol monitoring is a relatively new technology in the UK. It allows individuals’ alcohol consumption patterns to be monitored through an ankle bracelet. The bracelet samples an individual’s skin for the presence of alcohol once every thirty minutes (or 48 times a day). Based on the frequency of the testing, this technology is generally accepted as providing Continuous Alcohol Monitoring (CAM). The bracelet has tamper detection alerts
which will notify the relevant authorities if the offender attempts to place objects in between the leg and the skin. The system is water resistant.

The bracelet stores and records the test results that are collected throughout the day. At a pre-determined time (e.g. once a day) the transdermal test results are then uploaded via a base station that is connected to a telephone line or mobile adaptor. If offenders do not have a telephone line, they can report to their supervising agency (e.g. probation, police) to have the data collected periodically.

The results are interfaced with a secure web based portal. The software enables the supervising agency to view the offender’s data, print reports and manage inventory.

Some of the most cutting-edge ankle bracelets incorporate radio frequency (RF) technology which means that sobriety orders can be combined with conventional curfews.

Evidence of effectiveness

The most prominent evaluation of continuous alcohol monitoring has been undertaken by RAND, which looked at the first ever sobriety programme in the US – the ‘24/7’ scheme in South Dakota. It found “strong support for the hypothesis that frequent alcohol testing with swift, certain, and modest sanctions can reduce problem drinking and improve public health outcomes.”

Subsequent studies have demonstrated not only an impact on problem drinking, but also offending while participating in the scheme and statistically significant reductions (between 14% and 42%) in recidivism thereafter.

The visits

1) National Association of Drug Court Professionals (NADCP) Conference

This large, three day conference brought together around 5,000 problem-solving court practitioners (judges, treatment specialists, probation officers, parole agencies) from across the US. We attended a series of workshops that offered academic and practitioner insight into addressing alcohol and drug misuse – including through a system of effective incentives and sanctions delivered as part of a sentence.

2) Wayne County, Michigan

The first site we visited was a scheme run in Wayne County’s Sheriff Department, which incorporates the city of Detroit. It is the largest Sheriff-run sobriety programme in the US that uses transdermal alcohol monitoring technology.

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Here, the Sheriff has initiated a monitoring programme, to help reduce overcrowding in a large, 2,600 bed county jail. Police officers and prison staff have actually had their roles expanded - becoming part-time monitoring officers – and parts of the prison have been emptied as a result of the scheme.

Approximately 1,000 offenders have been monitored on a continuous alcohol monitoring (CAM) ankle bracelet since the scheme began and a larger number of other offenders are released on a GPS/satellite tracking device.

**Key features**

- **Alternative to custody**: This model operates as an alternative to custody for serving prisoners, i.e. those who would otherwise remain in prison.
- **Police not probation**: In this programme, it is primarily police officers who monitor offenders’ compliance with the terms of their sentence.
- **Rapid enforcement**: Where there is an infraction, these police teams go out to quickly re-arrest the offender.
- **No real treatment component**: There is no substantial treatment offer to complement the use of the alcohol monitoring technology; it is used almost exclusively as an enforcement tool.
- **Significant results**: Nevertheless, the Sheriff reported that over 80% of offenders do not consume alcohol while on the scheme, and a very small minority are returned to custody.
- **Cost-effective**: The senior management team also highlighted the significant reductions in the prison budget that have been made possible by the prisoner-release scheme. The cost of the monitoring averages $8 a day per offender, whereas the daily cost to incarcerate an offender in a county jail is over $70.

**Results to date**

<table>
<thead>
<tr>
<th>Total Monitored</th>
<th>975</th>
<th>Number of offenders who were monitored</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Completed</td>
<td>868</td>
<td>From the above total, those who completed</td>
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<tr>
<td>% Compliant (Completed)</td>
<td>84%</td>
<td>Percentage of offenders who completed with no drinking or tampering events</td>
</tr>
<tr>
<td>% Noncompliant (Completed): 1-2 Events</td>
<td>14%</td>
<td>Percentage of offenders who completed with one or two drinking or tampering events</td>
</tr>
<tr>
<td>% Noncompliant (Completed): 3+ Events</td>
<td>2%</td>
<td>Percentage of offenders who completed with three or more drinking or tampering events</td>
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<tr>
<td>Average Monitored Days</td>
<td>77 days</td>
<td>Average monitoring period</td>
</tr>
<tr>
<td>Total Monitored Days</td>
<td>82,614</td>
<td>Number of monitored days since programme inception</td>
</tr>
<tr>
<td>Sober Days</td>
<td>82,366</td>
<td>The number of days clients were monitored where no drinking or tamper events occurred</td>
</tr>
</tbody>
</table>
% Days Sober | 99.7% | Percent of all Days Monitored where clients no alcohol or tamper events

3) Michigan Department of Corrections (MDOC)

Across the state of Michigan, alcohol monitoring technology is used widely as part of bail conditions and post-release supervision for high-risk offenders who have committed serious alcohol-related offences. The state is one of the largest users of alcohol monitoring technology in the US – with the MDOC staff indicating a typical caseload of over 1,300 offenders monitored at any one time.

The technology is primarily used by probation and parole teams. We spent a good amount of time with one of these teams in Detroit. In particular, we interviewed a probation officer who has managed offenders who are monitored on CAM devices for around a decade. Initially sceptical, he has since become a firm advocate of the use of the bracelets (deciding to exclusively monitor individuals with alcohol-related offences) and told us about the success stories that have been produced as a result of the schemes.

Key features

- **Community sanction and post-prison focus**: This model operates both as a prison-release programme and as a community monitoring scheme for those who are not in prison.
- **Probation-led**: The police are not involved with this scheme; it is led by probation and parole staff who use alcohol monitoring as a key accountability tool for reducing recidivism for ex-prisoners.
- **Longer monitoring periods**: Given the post-prison focus, the length of monitoring is much longer in Michigan – with an average of 115 days of sobriety, compared to 77 days in Wayne County.
- **Treatment – residential and community-based**: This programme contains a variety of treatment options (often mandated) for probationers and parolees. There are some residential treatment schemes and some community support programmes to help problem drinkers tackle their dependency issues.

Results to date

| Total Monitored | 14,523 | Number of offenders who were monitored |
| Total Completed | 13,134 | From the above total, those who completed |
| % Compliant (Completed) | 68% | Percentage of offenders who completed with no drinking or tampering events |
| % Noncompliant (Completed): 1-2 Events | 21% | Percentage of offenders who completed with one or two drinking or tampering events |
| % Noncompliant (Completed): 3+ Events | 11% | Percentage of offenders who completed with three or more drinking or tampering events |
| Average Monitored Days | 115 days | Average monitoring period |
| Total Monitored Days | 1,656,058 | Number of monitored days since |
4) Sobriety Court, Denver, Colorado

We spent a morning observing a ‘Sobriety Court’ which operates out of Denver’s Justice Center (a huge court building in the city centre, with a large detention facility attached serving the entire city’s police department). The Sobriety Court programme functions as a community scheme for probationers. This visit demonstrated the potential role of a court (with an enthusiastic, charismatic judge) in helping to reinforce the core elements of a sobriety scheme.

Focusing on drink-drivers, violent offenders (including domestic violence perpetrators) and other non-violent offenders, this visit showed how courts (in addition to probation staff) can play a key role in holding offenders accountable for their compliance, and in applying a set of meaningful sanctions and incentives to encourage the successful completion of the sentence.

Key features

- **Judge-led**: In this scheme it is primarily the judge, with the assistance of probation staff, who holds offenders accountable – deciding on a range of incentives and sanctions to reward or punish offenders, depending on their compliance.
- **Therapeutic**: With co-location of key treatment providers and other social services, the aim of the court is as much therapeutic as it is enforcement-focused – based largely on a Drug Court-type model.
- **Shorter period of monitoring**: With its probation (i.e. before custody) rather than parole (post-custody) focus, the period of monitoring is often shorter, with an average of 70 days.

<table>
<thead>
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<th>Total Monitored</th>
<th>6,656</th>
<th>Number of offenders who were monitored</th>
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</thead>
<tbody>
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<td>6,496</td>
<td>From the above total, those who completed</td>
</tr>
<tr>
<td>% Compliant (Completed)</td>
<td>81%</td>
<td>Percentage of offenders who completed with no drinking or tampering events</td>
</tr>
<tr>
<td>% Noncompliant (Completed): 1-2 Events</td>
<td>13%</td>
<td>Percentage of offenders who completed with one or two drinking or tampering events</td>
</tr>
<tr>
<td>% Noncompliant (Completed): 3+ Events</td>
<td>6%</td>
<td>Percentage of offenders who completed with three or more drinking or tampering events</td>
</tr>
<tr>
<td>Average Monitored Days</td>
<td>70</td>
<td>Average monitoring period</td>
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</tbody>
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### General reflections

The field visits and the academic evidence from RAND and elsewhere suggests that continuous alcohol monitoring is extremely effective in reducing alcohol misuse, with significant reductions in both problem drinking and alcohol-related offending during the monitoring period, and statistically significant reductions in recidivism thereafter.

There is clearly real potential for this technology to be applied in England and Wales. Though devised primarily as an accountability tool to increase the certainty of detection, the surprisingly high number of offenders who desist entirely from drinking heavily indicates that alcohol monitoring can actually help to change offenders’ behaviour. The certainty of detection allows for the further application of the Government’s ‘swift and sure’ agenda, which have been evidenced successfully in projects such as the HOPE probation scheme in Hawaii (i.e. the fact that the swiftness and certainty of a sanction is more important in driving behaviour change than its severity).

There are, of course, challenges for translating this technology into the UK context, which must be properly addressed before consideration is given to its mass roll-out. These include which group of offenders the technology should be applied to; how successful operational models should be shaped; how to generate sufficient sentencer and practitioner buy-in to ensure successful schemes; and how to properly integrate alcohol monitoring technology into our criminal justice and sentencing regimes.

### Challenges for UK translation

1) **Target group:** In the US, alcohol monitoring is primarily used for those who have committed DUI (driving under the influence) or DWI (driving while intoxicated) offences. While the US sees over 10,000 alcohol-related road deaths a year, circumstances in the UK are clearly different – with 290 deaths in 2012, and a consistent, long-term decline in drink-driving offences.

   However, our field visits indicated that states in the US have already been using alcohol monitoring technology at scale for a broader range of people who have committed alcohol-related offences, including for those convicted of violent offences, domestic violence and lower-level ‘quality of life’ (or anti-social behaviour) cases. This reflects the fact that, according to the Pew Center, 40% of state prisoners convicted of violent offences were under the influence of alcohol at the time of their offence (the corresponding statistic in England and Wales is 44%).

   Successful use of alcohol monitoring technology for these cohorts suggests that its potential application in England and Wales is very wide – especially given our own binge drinking and violent crime issues.
However, given that results will likely differ between different offender groups and operational models, it will be vital for the Home Office and Ministry of Justice to closely evaluate early schemes.

2) **Operational model**: as discussed above, we witnessed a range of different models for using alcohol monitoring technology. We have yet to see any hard evidence from the US as to the relative effectiveness of different models, e.g. does a scheme achieve better results when the police are the monitoring authority, rather than probation or the private sector? Are schemes more successful when alcohol treatment is combined with monitoring? How long should the authorities monitor offenders for, as a minimum? How crucial is the role of a judge in holding offenders accountable?

Understandably, each of the schemes we visited advocated their own approach – and it is clear that, whatever the model, there are very good compliance rates (between 68% and 84% of offenders have perfect compliance) and an extremely high overall number of days in which no drinking events are recorded at all (99.3% to 99.6%). But there will clearly be significant benefits in devising a range of differently-configured pilots to test different operational models.

3) **Meaningful and swift sanctions/incentives**: the importance of a proper system of sanctions and incentives cannot be overstated. In the US a sobriety order is invariably used as an alternative to custody, or in a post-release setting, with the threat of a return to custody ever-present. As well as the certainty of detection (i.e. the ankle bracelet), the certainty of punishment is likely to be a key factor in the very high success rates of these schemes.

In the England and Wales context, the schemes need to be designed so that the consequences of failure to comply are very clear and transparent at the outset of the sobriety order. This need not necessarily mean that custody (or a long stay in custody) is the ultimate sanction, because the certainty of punishment is more important in driving behaviour change than the severity of the punishment. But the sanction certainly needs to be meaningful and, crucially, followed through with. Nothing is likely to jeopardise the success of a sobriety programme more than if offenders get to know early on that the consequences of them consuming alcohol while wearing the bracelet are minor, random or trivial.

4) **The role of the centre**: In England and Wales, there is a somewhat chequered history of schemes that are, or are perceived to be, ‘imposed’ at the local level by the centre. Policy Exchange’s previous work on Drug Courts, another US import, has shown that when there is insufficient understanding or support for a programme locally, it is unlikely to be successfully translated, nor the positive results replicated.

It is clear that in the US, just as with Drug Courts, sobriety programmes have developed organically, been initiated locally and are tailored to local circumstances. In the UK, while the Home Office could be encouraging local areas and providing some funding, this does suggest that as many schemes as possible need to be as locally-owned and driven as possible, with the Home Office helping to shape the programmes, but not being over-prescriptive about the precise models. As discussed above, there is no one single effective model and it makes sense, as resources allow, for a number of different elements to be tested. In this sense, it’s important that PCCs, police forces, judges, magistrates’ benches and local authorities are given the freedom to pilot sobriety programmes by the Home Office and Ministry of Justice – and legislation amended if necessary to make it happen.
5) Generating local support: It was clear from the schemes we visited that, at both a managerial and front-line level, there is significant support for the use of alcohol monitoring. The judges, police teams and probation officers see it as a very important part of their armoury in tackling problem drinkers’ behaviour. It was also apparent that this support has been built over a good period of time – no doubt as the technology has been proven to be effective and as strong working relationships have been built with the service providers. The main complaint was that there was not more money available to use more of these kind of devices.

The Home Office, Ministry of Justice and PCCs will need to take pro-active steps to achieve strong buy-in before and during the running of sobriety programmes. Without such support from the judiciary and police, not enough offenders may be put onto the scheme by judges or the police (depending on the model) – and even if sufficient cohorts are built, the monitoring and enforcement activity will fail if probation staff (or similar) do not understand or believe in the aims of the sobriety programme. This needs to be a continuous effort and will require real engagement, resources and commitment.

Where alcohol monitoring technology could be applied in England and Wales

Given the discussions above, there are a number areas where this technology is likely to be effective. There are clear opportunities in the criminal justice, health and social services spheres which could be tested to determine the optimum use of the technology. The main ones are:

- **Conditional Cautions**: alcohol monitoring could be used as part of a conditional caution, with the promise of prosecution for the original offence for non-compliance. The period of sobriety could be short, e.g. 50-80 days, with the likely target group made up of violent and non-violent offenders with a history of alcohol-related offences. Compliance could be monitored by the police, as in Wayne County. There would not need to be any alcohol treatment for this cohort. This would fit well with the kind of scheme envisaged by Bernard Hogan-Howe.

- **Community Order Requirement**: alcohol monitoring could be ordered as part of a community order requirement. It could be combined with treatment provision (where available) and be probation-led, in terms of monitoring and case management. There could also be a role for a court in holding offenders accountable, as in Denver, though this would depend on judicial buy-in and being able to ensure sufficient resources to periodically review sentences and the ability to ensure continuity of judge/offender engagement (something that is difficult to achieve with the lay magistracy). Non-compliance would be dealt with procedurally in a similar way to the conventional breach of a community order, though we would stress that the sanctions available should be at the higher end (e.g. a short return to custody) - with very clear and mutually understood rules about the consequences. The aim of this is to achieve the certainty and swiftness that the evidence suggests is necessary – and making sure that non-compliance rates do not mirror the poor compliance rates for conventional community sentences (1/3 are not completed).

- **Alternative to Custody**: for more serious violent offenders (and domestic violence perpetrators), alcohol monitoring could be used as a formal alternative to custody, as in many schemes in the US. The ultimate sanction here would be a custodial sentence and the scheme would likely be probation-led and might also involve the close cooperation of the police.

- **Prisoner release** (e.g. HDC): alcohol monitoring could also be used formally or informally for released prisoners. Prison governors or the parole board could mandate a period of sobriety for offenders being released from prison on licence, or as part of early release on Home Detention Curfew (HDC), with a
certain recall to custody for non-compliance. Monitoring could also be used for probation providers (under payment-by-results) to encourage offenders to stay on the straight and narrow on release. In both instances, it is likely that the schemes will be probation or private sector-led.

- **Problem families/social services:** alcohol monitoring could be used by social services or other providers of services to problem families to enforce requirements and change behaviour. Many problem family schemes use behaviour contracts linked to evictions or improvement orders, which could involve a period of sobriety to support the behaviour change sought. Monitoring could also be used by social services in cases of child neglect or poor parenting, to provide accountability and seek to change parents’ behaviour. In extreme cases, this could be linked to decisions to take children into care.

- **Health/voluntary scheme:** alcohol monitoring could also be used in a health setting, with problem drinkers who have been admitted to A&E (perhaps multiple times) being subject to a period of sobriety, with the threat of facing the NHS bill for their treatment for non-compliance.

**A piloting strategy**

A strategically-conceived piloting strategy, led by the Home Office, could explore:

- Which groups of offenders are most responsive to alcohol monitoring
- New evidence about the extent to which problem drinking and associated reoffending can be reduced with the assistance of this technology
- What operational models provide the best results and why
- How to apply sanctions and incentives as part of a sentence to deliver the optimum outcomes
- What models provide the best value for money – potentially including cost/benefit analyses
- Evidence about market capacity or readiness for providing alcohol monitoring technologies
- A better understanding about how to specify alcohol monitoring services
- Insight into the procurement methodologies needed to go to scale in the future

The big advantage of pilots in this area is that they need not take many years to deliver results. Results could be achieved quickly, especially given that the length of the sobriety order is relatively short (e.g. between 2 and 4 months) and the fact that outcomes can be delivered almost in real-time. Reoffending results, based on a three and twelve month measure, could also be included as part of pilot evaluations – with pilot participants compared to a control group made of up offenders with matched characteristics.