



YOU WON'T SEE ME AGAIN

a review in recidivism

prime for life®

For anyone working with impaired drivers or other offender populations, the ultimate objective is to reduce recidivism. Loosely defined, recidivism refers to the return to a previous pattern of behavior. For offenders, it generally means re-arrest. Although most offenders intend to not be arrested again, some will be. As with many human behaviors, good intentions are not always enough to prevent a return to impaired driving.

Helping people to change their behavior and avoid re-offending is a challenging task, and one that is difficult to study. There are several general types of recidivism studies, each trying to answer a particular type of question. Some are designed to simply find out what percent of people have another impaired driving arrest. Others look at what types of people are most likely to get re-arrested. Still others assess the effectiveness of an intervention in preventing re-arrest.

Studying Recidivism

On the surface, conducting impaired driving recidivism analysis seems like it should be fairly simple – that it is just a matter of examining motor vehicle records. In reality, studying recidivism can be complicated. Recidivism studies require interagency cooperation, access to data considered confidential, compilation of data which may not be designed for this purpose, and funding for these activities. Nevertheless, such studies can provide important information.

Comparing across different recidivism studies is difficult and sometimes not appropriate. Recidivism studies are not created equal. Studies vary on the questions they are trying to answer, communities they are studying, methods they use, and specific challenges faced. This explains the wide range of recidivism rates reported by Wells-Parker and colleagues (1995) in their review of the research literature: 10% to 33%, with an average of 19% across studies.

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One way that studies vary is in the length of time examined during which a new offense can occur. Some look at a timeframe as short as 1 year, while others look at up to 5 years. Because longer timeframes allow greater opportunity for re-offenses, recidivism rates are typically higher – and more informative – the longer the period of time examined. Studies also vary in whether the offenders are all followed for an equal amount of time --which is the better approach – or if they are followed for different amounts of time.

The timing and location of a study can also affect results. For example, what constitutes impaired driving according to a particular state's laws is an important determinant of recidivism rates. Very important is the fact that enforcement may vary over time and between communities. In other words, police officers may not always be patrolling for impaired driving to the same extent at different times or in different areas.

Finally, studies can differ in who they are evaluating. Because certain types of people are known to be more likely to be re-arrested, participant characteristics can affect the results. Specifically, male gender, low education, low income level, single marital status, and higher level of substance dependence symptoms are associated with a higher likelihood of re-offending. Hence, a study sample that is 75% male, for example, will likely show higher recidivism rates than one that is 50% male.

Because any of these factors can vary across time as well as across communities, it is generally unwise to make comparisons between systems or timeframes unless such differences are taken into account.

Assessing Program Effectiveness: Prime For Life®

Testing the effectiveness of programs to reduce recidivism is particularly challenging. Despite the obstacles, a number of recidivism analyses have been conducted on Prime For Life (PFL). Four analyses that used the strongest research methodology are summarized here; findings have been consistent across a number of others.

Researchers have used three main approaches. One examines driving records of people required to take the program and compares those who complete it to those who do not. A problem with this approach is that there may be differences between these two groups – other than whether they completed the program – that could lead to differences in attrition. Hence, a second (and improved) approach is to do this type of comparison while adjusting the findings to account for any pre-existing differences between the groups. The third and best approach is to compare people who take the intervention to those who get a different intervention.





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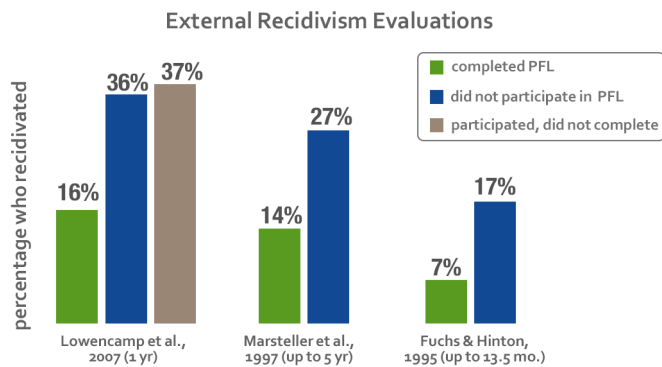
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1. Fred Marsteller and colleagues (1997) at Emory University found that offenders who received an early version of Prime For Life recidivated at a rate of 13.5% while those who did not receive the program recidivated at a rate of 27.1%. This included examining a period of time of up to 30 months.

2. Bryan Fuchs (University of Wisconsin) and Dan Hinton (Winnebago County, Wisconsin) (1995) followed youth charged with an underage drinking citation in Wisconsin for up to 13.5 months. Of those who enrolled in and completed an early version of the Prime For Life curriculum, 6.2% received a second offense compared to 17.3% of those who did not enroll in the program.

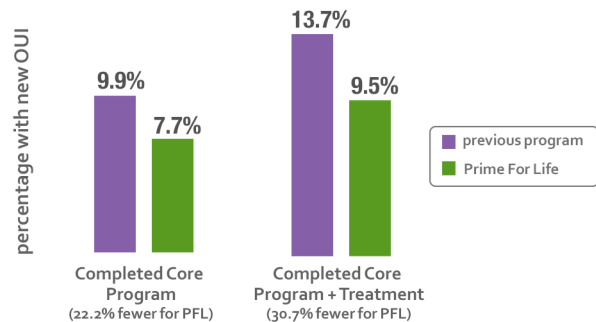
3. Christopher Lowenkamp, Edward Latessa, and Kristin Bechtel (2007) at the University of Cincinnati examined participants in a Court Alcohol and Drug Program that included Prime For Life. They compared one-year recidivism rates among three groups of people, and adjusted these to take pre-existing risk factors and demographics into account. Two groups of people who did not receive Prime For Life (people put on probation and people who did not complete the program) had much higher recidivism rates (36% and 37%, respectively) compared to people who completed the program (16%).



4. Outside independent evaluators conducted the first three studies. At PRI, we conducted our own evaluation (Beadnell et al., 2012) in which we compared three-year recidivism rates for a period of time when the state of Maine used as their core program a previous intervention versus the time during which Prime For Life was implemented. Among people who completed a core program only (either Prime For Life or the previous program), those in Prime For Life were less likely to have a re-arrest (7.7% vs. 9.9%). Some people took these core programs and were required to then participate in substance abuse treatment. Among them, those who completed Prime For Life had lower recidivism rates than those who completed the previous program (9.5% vs. 13.7%). These differences in recidivism rates between Prime For Life compared to another active intervention were statistically significant. Although they may appear relatively small (2.2% and 4.2%), such differences between competing programs are

meaningful. The financial costs of a single impaired driving to offenders, victims, and the legal system are large (e.g., over \$20,000), and the financial and emotional costs of when injuries occur are even greater. Hence, these sized reductions can prevent consequences of significant magnitude.

Recidivism during subsequent 3 years (n=9,796)



We strongly caution against making state-to-state comparisons because so many different factors can affect recidivism rates. As mentioned, differences in laws and enforcement, as well as individual differences such as employment, education, income, and other factors, can raise or lower the level of recidivism in any given state. It is useful, however, to see the trends across multiple locations.

The Sum Total

Two findings stand out in these analyses of Prime For Life. First, the recidivism rates for Prime For Life participants are noticeably lower than those for the comparison groups. Second, this was true in all types of studies: those comparing Prime For Life completers to noncompleters, to people receiving only probation, and to people receiving an alternative program.

Prevention Research Institute (PRI) has continuing interest in conducting or supporting independent recidivism studies. We appreciate opportunities to discuss design and specific outcome measures at the onset of studies to facilitate gathering meaningful data that will best measure impact with offenders.

Administrators and instructors facilitating Prime For Life can feel good about the recidivism data in different systems and settings. Equally important, because Prime For Life is standardized and multiple systems have found similar results, those who use it can feel confident when using the Prime For Life protocol.

Greater detail about these studies are available in a technical report titled "Decreased Recidivism Rates Following Prime For Life® Attendance" and in a poster presented at the Research Society on Alcoholism (RSA) conference, both of which are available on the PRI website.



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