

# THE SAT REPORT

Satish Kedia, PhD, Institute for Substance Abuse Treatment Evaluation (I-SATE), The University of Memphis

## Treatment Outcomes for Repeat DUI Offenders in Tennessee (2002–2003)

**D**riving Under the Influence (DUI) is a significant public health hazard in the U.S. today. Alcohol abuse results in car accidents that injure more than a half million people each year, and the societal costs are equally high; in 2000, such accidents cost taxpayers \$114 billion [1]. Further, almost one third of DUI arrests involved repeat offenders [2]. To combat this growing problem, Tennessee established the Alcohol and Drug Addiction Treatment Program (ADAT-DUI) in 1998 to fund mandatory substance abuse treatment for indigent repeat DUI offenders. This report summarizes treatment features and outcomes for a sample of ADAT-DUI clients enrolled in 17 publicly funded facilities in the state during 2002, who voluntarily agreed to participate in this evaluation study.

### Evaluation Methodology

This evaluation uses a pre- and post-test design: facilities collect and submit client admission data to the Bureau of Alcohol and Drug Abuse Services, which collaborates with the Institute for Substance Abuse Treatment Evaluation (I-SATE) project at The University of Memphis. Outcomes data is collected from clients 6 months after admission. The outcomes presented here are derived from interviews with 109 of the 152 individuals who comprised the eligible follow-up sample, resulting in a coverage rate of 71.7%.

### Study Population

For 2002–2003, the study population (n=109) was 81.7% male and 18.3% female and 91.7% White and 8.3% African American. Nearly two thirds

(65.2%) of clients were between 25 and 44 years old, and 70.6% had a high school education. Just over half (52.3%) reported earning less than \$8,500 the previous year. Most clients (81.7%) began abusing substances as teens, and more than half (56.9%) had a family member with an alcohol or drug abuse problem. At the time of admission, 20.2% of clients were married, and a little more than half had minor children.

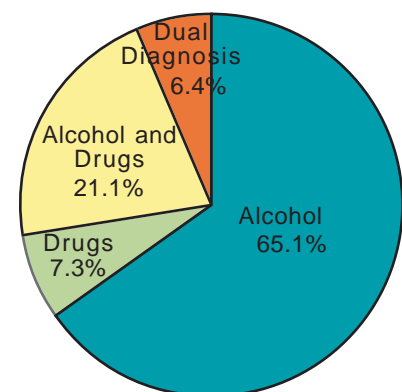
### Treatment Features

All clients were DUI offenders and were ordered by the court to be treated for alcohol and/or drug abuse. Most of the clients (65.1%) were treated primarily for alcohol abuse (Figure 1). One fifth (21.1%) were treated for a combination of alcohol

### Highlights

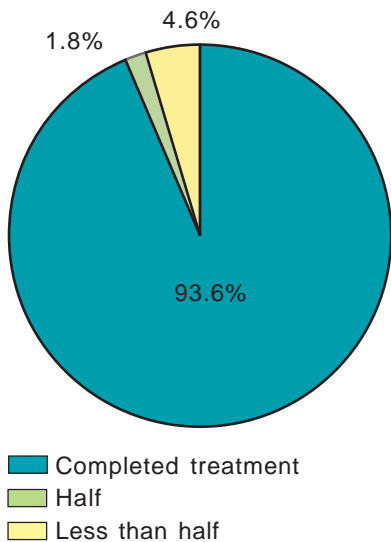
- The percentage of clients abusing alcohol declined from 89.9% at admission to 26.6% after treatment.
- Client unemployment rates were reduced by half.
- While all clients had arrest records at admission, only 7.3% had been rearrested at the 6-month follow-up.
- Six months after admission, clients' involvement in domestic violence decreased, either as perpetrator (12.8% vs. 1.8%) or as victim (24.8% vs. 3.7%).

**Figure 1. Primary Reason for Being Treated**



and drugs. Some (7.3%) of the clients were treated for only drug abuse, and some (6.4%) were treated for a dual diagnosis of alcohol and/or drug abuse and mental illness. With regard to type of service received, approximately three fourths (74.3%) of clients participated in group therapy, and nearly as many were in individual therapy (70.6%). A majority (84.4%) received special skills training, such as relapse prevention and coping skills. Most ADAT-DUI clients surveyed (71.6%) stayed 16 to 30 days in treatment, and the overall completion rate was quite high, 93.6% (Figure 2). With regard to post-treatment activities, one fifth (20.2%) of clients participated in aftercare provided by their facility. Nearly half (45.5%) attended activities once or twice a week, and the same percentage (45.5%) found these activities “very helpful.” More than three fifths of clients (62.4%) chose Alcoholics Anonymous (AA) or Narcotics Anonymous (NA) to help them progress in recovery. More than one third (35.3%) attended AA/NA meetings once or twice a week, and most (67.6%) participants found the meetings to be “very helpful.”

**Figure 2. Level of Treatment Completion**



## Treatment Outcomes

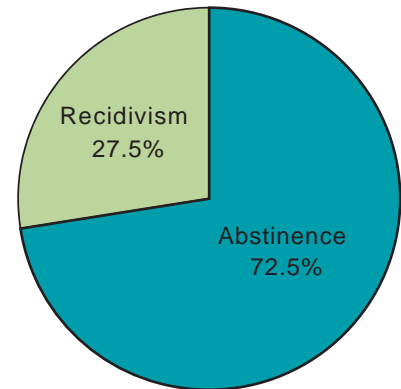
### INDICATORS USED

To assess the impact of substance abuse treatment, researchers used a set of outcomes performance indicators, including changes in substance abuse patterns, employment and living situation, emotional and physical health, and arrest record during the 6 months since admission. Clients were also asked about aspects of their treatment experience, such as modality, duration, and completion; whether he or she participated in aftercare and/or AA/NA; and how helpful he or she found treatment.

### ABSTINENCE RATES

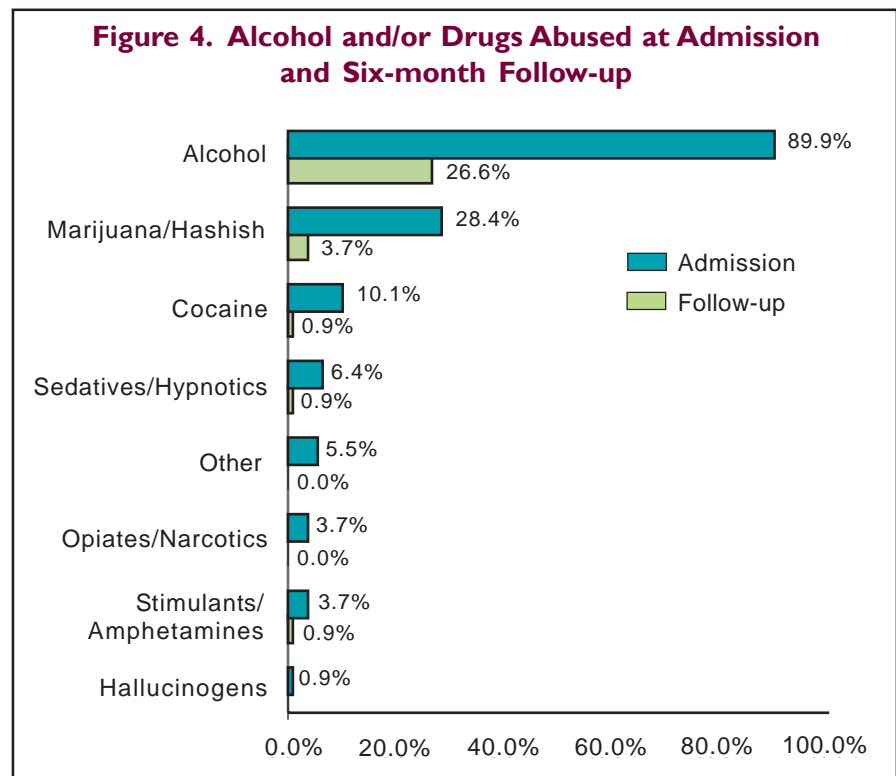
Almost three fourths of clients (72.5%) reported abstinence 6 months after admission (Figure 3). The percentage of clients abusing alcohol declined from 89.9% at admission to 26.6% after treatment. Overall, clients’ abuse of a variety

**Figure 3. Alcohol and/or Drug Abuse at Six-month Follow-up**

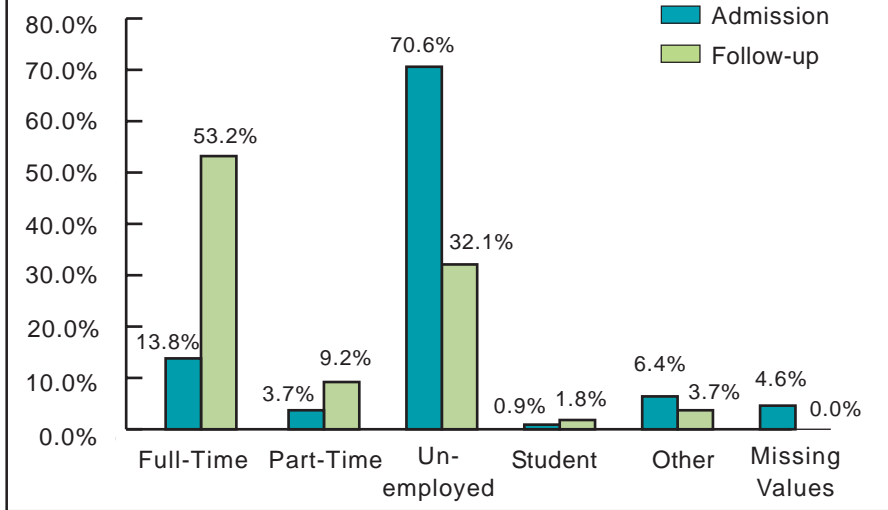


of substances decreased: while 28.4% of clients abused marijuana at admission, only 3.7% were using it at the time of follow-up, and cocaine abuse dropped from 10.1% to 0.9% (Figure 4). Males had a slightly higher abstinence rate (73.0%) than females (70.0%), and African Americans were more likely to report abstinence (77.8%) than Whites (72.0%). Clients’ participation in aftercare and/or AA/NA had a positive effect on success: abstinence rates

**Figure 4. Alcohol and/or Drugs Abused at Admission and Six-month Follow-up**



**Figure 5. Change in Employment Situation since Treatment**



were higher for those participating in AA/NA (75.0%) or aftercare (90.9%) than for the total population (72.5%).

### QUALITY OF LIFE MEASURES

Clients reported that their quality of life had improved in a number of ways following treatment. Unemployment rates were cut by half, and correspondingly full-time employment nearly quadrupled, from 13.8% to 53.2%; part-time employment

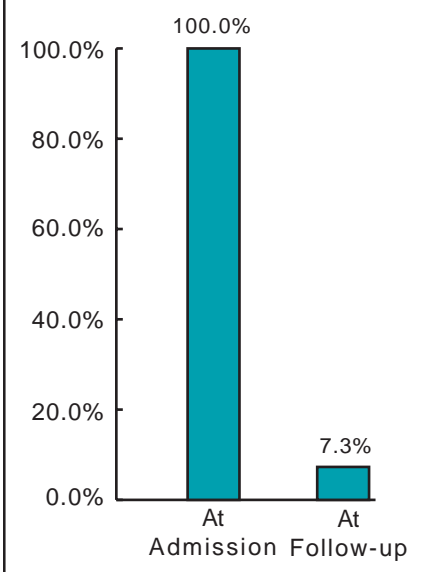
more than doubled, from 3.7% to 9.2% (Figure 5). A little over 60% of clients felt they were performing better at work or at school, and 83.5% thought that their physical health had improved since treatment. At the follow-up, 20.2% rated their overall health as “excellent,” with another 32.1% describing it as “very good.” In addition, the proportion of clients living with immediate family members increased dramatically, from 9.2% at admission to 51.4% at follow-up. While all clients had arrest records at

admission, only 7.3% had been re-arrested by the 6-month follow-up (Figure 6). Finally, clients’ involvement in domestic violence decreased, as perpetrator (12.8% vs. 1.8%) and as victim (24.8% vs. 3.7%) (Figure 7).

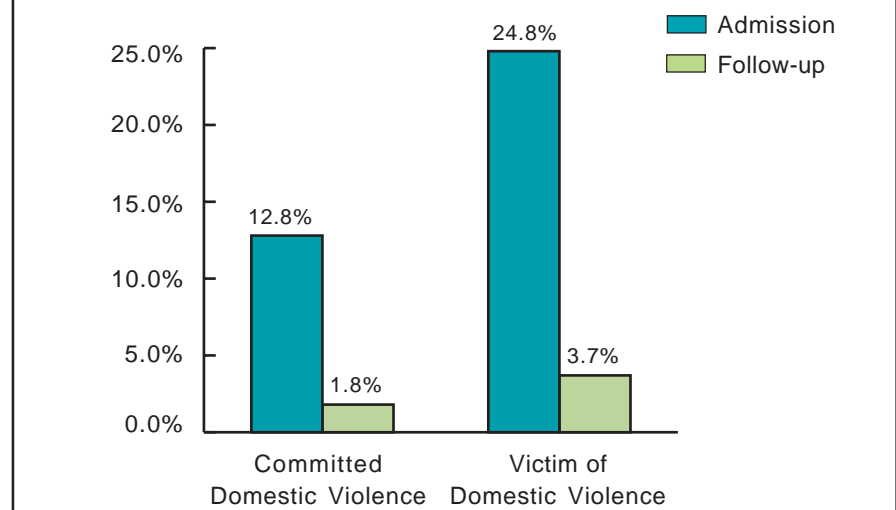
### CLIENTS’ PERCEPTION OF TREATMENT

More than three fourths of clients (78.9%) found treatment “very helpful,” one sixth “somewhat helpful,” and a very small percentage (6.4%) “not helpful” (Figure 8). When asked to identify the features of treatment they liked, 42.2% responded that they liked the staff best. Several complimented counselors who they found very caring as well as stern, and some described the staff as concerned, dedicated, and experienced. More than a third of clients (34.9%) found the education they received at the treatment center most valuable. A few clients (6.4%) liked the environment at the facility the best, finding it “comfortable and friendly.” Other clients found it helpful to be around people like themselves, where they could “talk about their problems” and interact “with other people who have the same problems.”

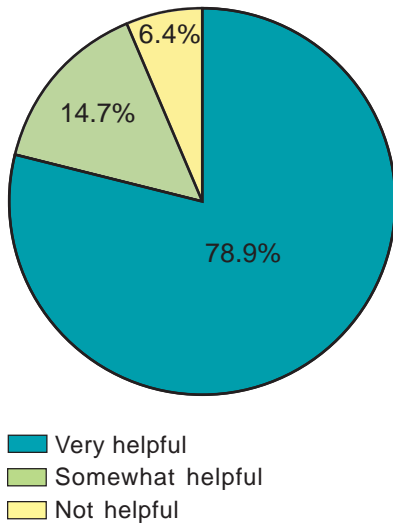
**Figure 6. Change in Arrest Record**



**Figure 7. Domestic Violence Involvement at Admission and Six-month Follow-up**



**Figure 8. Perceived Helpfulness of Treatment**



**Conclusion**

Studies show that treatment for repeat DUI offenders is highly effective and can demonstrably improve the quality of life for clients and their families. Treatment reduces the burden on society from costs related to the criminal justice system, rising insurance

rates, loss of life, diminished productivity, and destruction of affected families. In addition, research has shown that treatment is the most cost-effective option. Whereas the yearly expense for incarcerating a person convicted of a substance abuse offense ranges from \$20-40,000, the cost of treating that person is considerably less, from \$2-12,000 [3].

With more than 72.5% of clients abstinent, large increases in employment, a 7.3% rearrest rate, and reductions in client involvement in domestic violence after treatment, the Tennessee ADAT-DUI Program continues to show the effectiveness of substance abuse treatment for DUI offenders. To further improve outcomes, however, I-SATE research indicates that facility staff might focus on addressing the needs of clients with combined alcohol, drug abuse, and mental health problems; encourage clients to complete the recommended length of treatment and to participate in aftercare services or AA/NA; incorporate outreach initiatives to help clients return to liv-

ing environments free of substance abuse; and enhance the special skills and vocational training for clients so that after treatment they are better able to find employment and function well in society. In addition, the successes and benefits of the ADAT-DUI Program as an alternative to incarceration might be better communicated to members of the Tennessee judiciary.

Citations:

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3. Schneider Institute for Public Health Policy. (2001). *Substance abuse: The nation's number one health problem*. Princeton, NJ: Schneider Institute for Public Health Policy/Robert Wood Johnson Foundation, p. 111.

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**316 Manning Hall**  
**Memphis, TN 38152-3390**  
**[www.isate.memphis.edu](http://www.isate.memphis.edu)**  
**901.678.1753**