

DRUG USE , ADDICTION, AND THE CRIMINAL JUSTICE POPULATION IN BERNALILLO COUNTY



Background and Overview

This report documents the extent of drug use among the criminal justice involved population in Bernalillo County, specifically those who come in contact with the Bernalillo County Metropolitan Detention Center (MDC) and Juvenile Detention Center (JDC); there is also a focus on the availability of substance abuse treatment services for this population. The report includes a brief review of the Bernalillo County substance abuse treatment system focusing on treatment needs, gaps, and procedures. Data were provided by the MDC and the JDC.

- In 2004 U.S. violent crime declined 24% from 1995 and in the same time period violent crime decreased 5.4% in Albuquerque (FBI, 2005).
- Twenty of the nations 50 largest jails operated above their rated capacity (ISR, 2005).
- Nationwide jails were estimated to be at 94% of rated capacity in 2004 (BJS, 2005) and New Mexico was at 96% of its capacity (NMSC, 2005).
- The MDC is the 50th largest jail in the U.S. and was at 104% of its rated capacity in 2004. In 2006 the average daily population was at 109% of it's rated capacity.
- The JDC has remained below its rated capacity and in March 2006 JDC was at 85% of its capacity.

Crime, Drug Use, and Costs

The link between crime and drug use is well documented and includes several dimensions. Drug users in the general population are more likely than non-users to commit crime and can be explained by three concepts (NIJ, 1994).

1. Offenses may be simple violations of laws prohibiting contact or use of illegal drugs.
2. Crimes may be linked to drugs because of motivation to get money to support drug use.
3. Crimes may be linked to a drug using lifestyle, i.e. exposure to situations that encourage a deviant lifestyle (NIJ, 1994).

Arrestees frequently test positive for recent drug use (Zhang, 2004). In the past, incarcerated jail and prison inmates when asked often report they were under the influence of drugs and/or alcohol

Highlights

- The Bernalillo County Metropolitan Detention Center (MDC) is the 50th largest jail in the US and was at 104% of it's rated capacity in 2004. In 2006 the average daily population was at 109% of it's rated capacity, a growing trend that is not likely to stop.
- Treatment can result in reductions in crime and alcohol/drug use and increased functioning in health and social areas.
- New Mexico had the largest substance abuse treatment gap of any state in the nation (ABHP, 2004).
- The overall rate of drug use in New Mexico is much higher than the rest of the United States. Bernalillo County has the third highest drug-related death rate in the state (TACI, 2002).
- The need for treatment in the criminal justice population in Bernalillo County exceeds the capacity of the system.
- It is particularly important that the arrested drug dependent population in jail be identified and provided substance abuse treatment services.
- Substance abuse treatment services available in the Jail should be evidenced-based and structured for local jail populations.

when they committed the offense that resulted in their sentence. In the MDC in 2003, 75% of male arrestees and 74% of female arrestees tested positive for drugs. Further, of those testing positive it was estimated that 41% of males and 44% of females were at risk for drug dependence.

There is considerable uncertainty about the degree to which drug use causes crime or the degree to which criminal involvement causes drug use and so while drugs and crimes are linked the relationship should be interpreted cautiously. Most crimes result from a variety of factors (personal, situational, and/or economic) and so even when drugs are a cause, they are likely to be only one factor among many (NIJ, 1994).

According to a 2004 report by the ONDCP, the economic cost of drug abuse in 2002 was estimated at \$180.9 billion. The cost of drug abuse has increased an average of 5.3% per year from 1992 to 2002. The most rapid increases in drug abuse costs have been in incarceration and increased spending on law enforcement and adjudication. Costs associated with health treatment and prevention has had a moderate increase.

Treatment Works

According to a 2005 publication by the federal Center for Substance Abuse Treatment (CSAT) there is strong empirical evidence that substance abuse treatment reduces crime. Additionally, researchers from the Treatment Research Institute at the University of Pennsylvania (2005) found that substance abuse treatment, results in significant reductions in crime and alcohol/drug use as well as improved ability to function in health and social areas. For many who need alcohol and drug treatment, contact with the criminal justice system is their first opportunity for treatment and possibly their first occasion to be diagnosed with a substance abuse problem. Unfortunately, more intensive treatment is needed for offenders who are in a recurring cycle of crime and drug abuse.

Research suggests that addicted offenders commit fewer crimes during periods of non-use. Studies of offender populations have shown that cessation of and continued abstinence from drug use is linked to reduced rates of re-offending and re-arrest. Rather than focusing on populations that are sporadic users of illegal drugs, it may be more effective for criminal justice programs to focus their resources on preventing continued drug abuse by high-use offenders or concentrating on serious juvenile offenders that are at risk of delinquency and future adult criminality (CSAT, 2005).

There is limited research on effective evidence-based jail substance abuse treatment programs. A recent review of evidence-based corrections programs by the Washington State Institute for Public Policy (Aos, 2006) found five adult jail based programs possibly reduce crime. Another study, funded by the National Institute of Justice (NIJ, 1997) found lower infraction rates and smaller reconviction percentages for participants who were housed in separate living units. NIJ also noted that aftercare programs preserve or extend the effects of treatment.

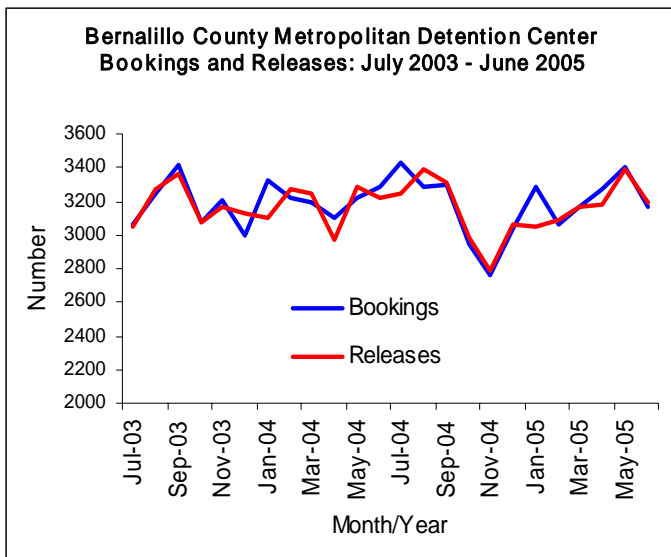


Figure 1

MDC and JDC Trends

At the MDC, the number of releases approximates the number of bookings. Figure 1 documents bookings and releases at MDC, ranging from 2,760 to 3,393 bookings and 2,786 to 3,393 releases during the period from July 2003 through June 2005.

Figure 2 documents the average of each month's daily population from July 2003 through June 2005. The average daily population varied between 1,959 and 2,336 individuals and shows a steady increase.

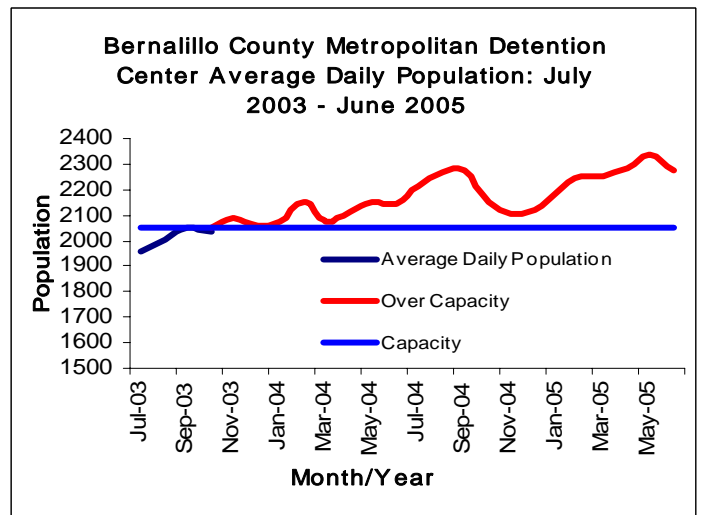


Figure 2

Figure 3 reports the average daily population (ADP) for two time periods. The ADP has increased from 99.4% to 106.6% of its capacity. Between the two time periods the Jail's average daily population increased 7.2%.

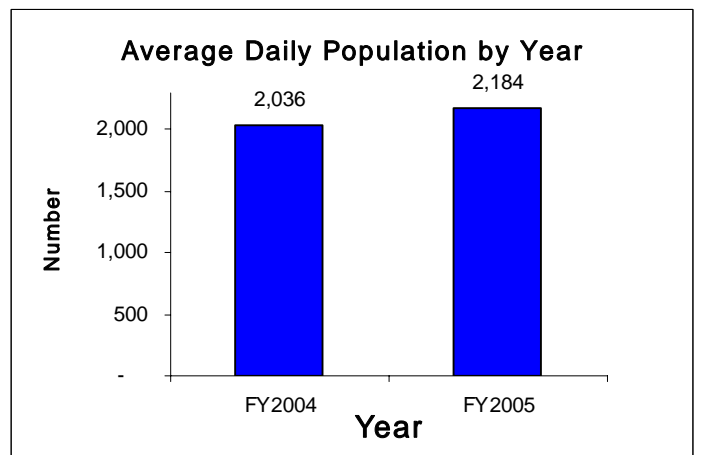


Figure 3

Figure 4 shows that between July 2003 and June 2005 the average monthly length of stay for individuals released varied between 18.6 days and 26.8 days. This chart indicates that since July 2003 the average monthly length of stay has increased.

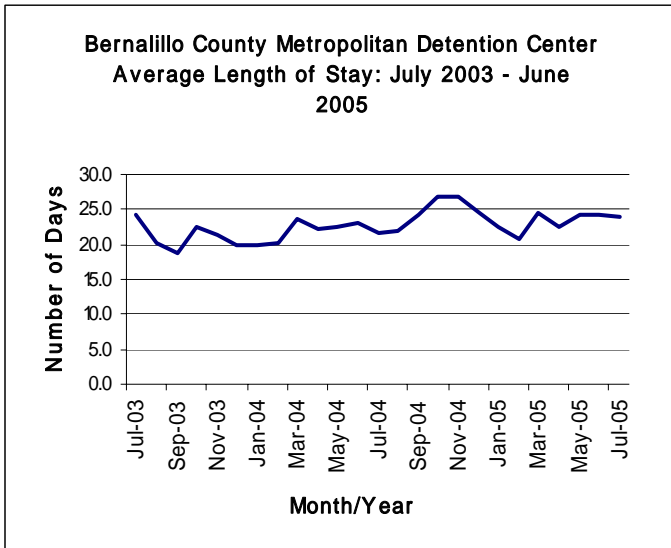


Figure 4

Table 1 documents recidivism information at the MDC measured as the number of times individuals have been booked into the MDC by year from 2000 through 2005 and the total for all six years.

Figure 5 documents JDC bookings and releases for the period July 2003 through June 2005. During this time period, bookings and releases ranged from a low of 208 bookings and 264 releases to a high of 398 bookings and 384 releases. The number of releases by month closely approximates the number of bookings by month and the trend during the two-year study period was relatively flat.

The average daily population in the Bernalillo County Juvenile Detention Center was below its' capacity for all but one month in the two-year study period. The JDC's average daily population ranged as low as 50.8 juveniles and experienced an overall decrease.

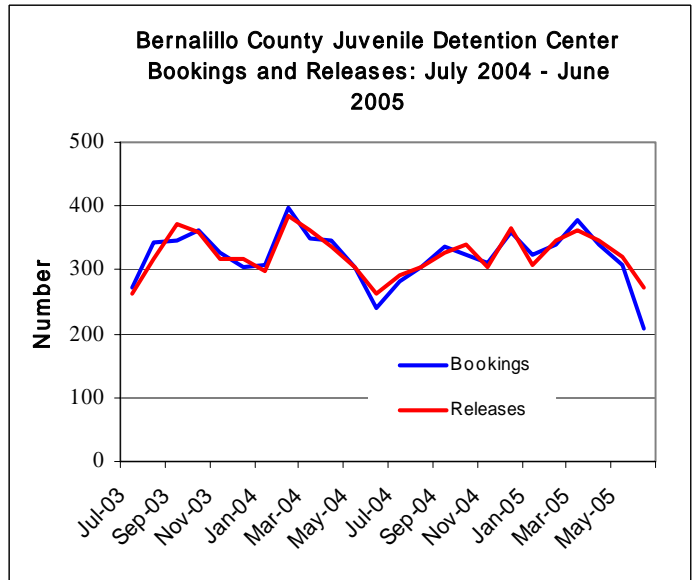


Figure 5

Figure 7 shows the average daily population in the JDC was greater in the first time period compared to the second time period. This is the exact opposite of the trend experienced by the MDC.

Figure 8 reports the average length of stay for individuals released from the JDC by month. The average length of stay in the Juvenile Detention Center experienced an overall decrease in the two-year study period, dropping from 17.5 days in July 2003 to 14 days in June 2005.

Table 2 reports recidivism in the JDC by documenting the number of bookings into the JDC, the number of juveniles booked into the JDC, and the average number of bookings for two time periods. In both time periods, approximately 25% of individuals were booked two or more times.

TABLE 1 - ARRESTEES BOOKED INTO THE METROPOLITAN DETENTION CENTER: JANUARY 2000 – DECEMBER 2005					
Year	Number of Persons	Number of Bookings	Average Number of Bookings for Individuals with Two or More Bookings	Percent of Individuals with One Booking	Percent of Individuals with Two Bookings or More
2000	25,986	37,904	2.7	72.3	27.6
2001	25,393	36,466	2.6	73.4	26.6
2002	27,947	40,654	2.7	72.6	27.4
2003	27,309	38,875	2.6	73.4	26.6
2004	26,916	38,075	2.6	73.8	26.2
2005	27,148	38,444	2.6	73.2	26.8
Total	93,832	230,337	4.2	54.2	45.8

Between July 2003 and June 2005, the MDC experienced considerable growth, growing from an average daily population of 1,959 in July 2003 to an average daily population of 2,279 in June 2005. For every month since September 2003, the Jail's population has been above its rated capacity of 2,048 beds (Figure 2). During this same time period, crime rates in Bernalillo County remained relatively stable resulting in relatively stable monthly bookings and releases (Figure 1). While booking rates remained stable, the monthly average length of stay increased steadily. Table 1 shows that across the last 6 calendar years approximately 26%-27% of individuals were booked two or more times a year.

During the same time period the JDC saw a decrease in its' monthly average length of stay and average daily population. This is perhaps best shown by Figure 7. Similar to the MDC

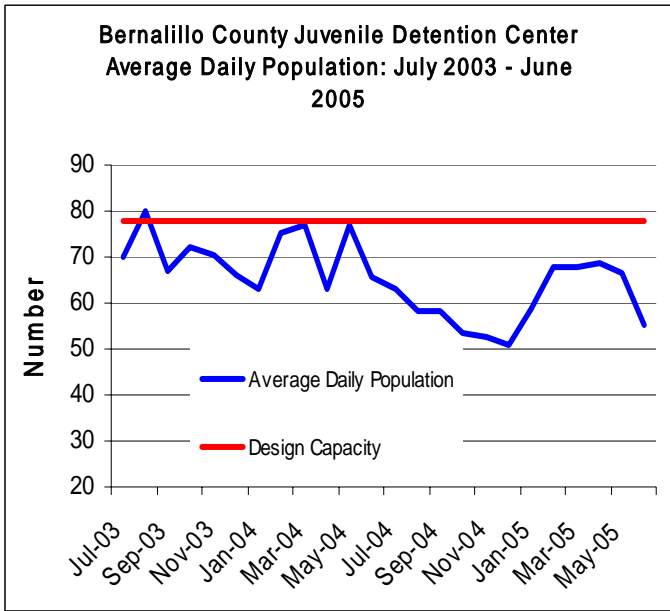


Figure 6

bookings and releases from the JDC were stable. Recidivism measured as multiple bookings for a given time period were also similar for the MDC and the JDC. Of importance is the scope and size of the two populations. The MDC's capacity is

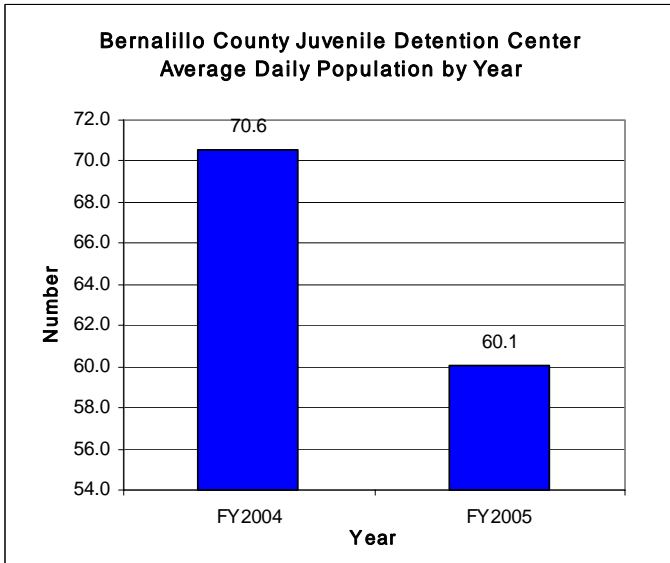


Figure 7

approximately 26 times greater than the JDC and the MDC's bookings and releases and average daily population are proportionally much greater.

The data presented includes similar bookings and releases, average daily population, average length of stay figures, and recidivism figures measures as multiple bookings for the MDC and JDC. While the MDC experienced considerable growth during the two-year period in its' average daily population

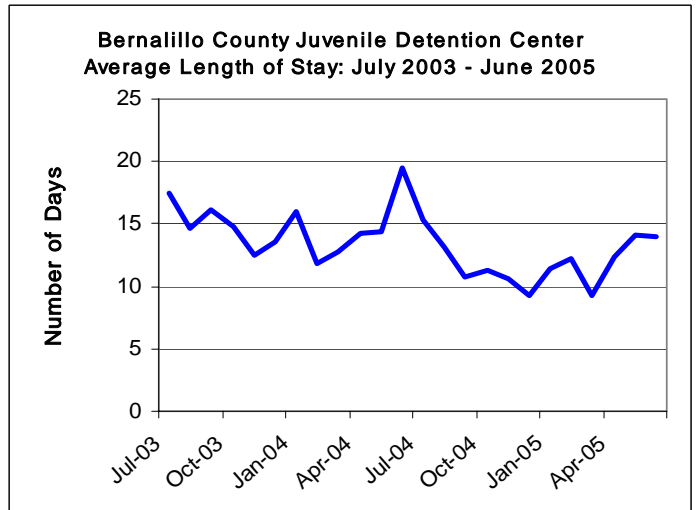


Figure 8

and monthly average length of stay the JDC experienced a general decline in the monthly average length of stay of and the average daily population. Each facility experienced a flat bookings and releases trend for the reporting period. These differences deserve further study and attention.

An in-depth review and discussion of differences between the MDC and JDC is beyond the scope of this report. Broadly, the juvenile and adult systems operate very differently. New Mexico, as most states, has its own distinct juvenile justice system separate from the adult justice system. The underlying beliefs, policies and procedure and laws are different. The underlying rationale of the juvenile justice system is that youth are developmentally different from adults and their behavior is malleable. Rehabilitation and treatment, in addition to community protection, are primary goals.

In the adult criminal justice system rehabilitation is not considered a primary goal and the system is more focused on punishment and deterrence. The adult criminal justice system operates under the assumption that criminal sanctions should be proportional to the offense. Deterrence is seen as a successful outcome of punishment.

These different underlying beliefs make comparisons problematic and comparisons between the two systems should be done cautiously. The systems, as noted earlier, are also vastly different in size and scope. The adult system deals with a much larger number of individuals. An in-depth review of the two

TABLE 2- JUVENILES BOOKED INTO THE JUVENILE DETENTION CENTER: FY 2004 – FY 2005

Year	Number of Persons	Number of Bookings	Average Number of Bookings for Individuals with Two or More Bookings	Percent of Individuals with One Booking	Percent of Individuals with Two Bookings or More
FY04	2,894	4,024	2.6	75.4	24.6
FY05	2,757	3,891	2.8	77.3	22.7

systems might provide some useful information that could help in better understanding differences and similarities and could lead to policy changes that might improve the efficiency of the two systems.

Substance Abuse Treatment Services

Data on drug and alcohol dependence suggests that 6.5% of the population is substance dependent, compared to 4.8% nationally and only 20% of those needing public behavioral health services are receiving them. A recent report by Arizona State University's Applied Behavioral Health Policy (2004) group noted that according to estimates from the National Survey on Drug Abuse, New Mexico had the largest treatment gap of any state. In New Mexico, 3.5% of the population (approximately 130,000 people) need drug treatment services but do not receive treatment. An important factor contributing to this treatment gap is the shortage of licensed and credentialed substance abuse counselors in New Mexico (ABHP, 2004). The overall rate of drug use in New Mexico is much higher than the rest of the United States. Bernalillo County has the third highest drug-related death rate in the state and this rate represents 44% of the state total. By having a very high drug-related death rate and a very large population, Bernalillo County has the largest absolute number of people directly affected by substance abuse (Technical Assistance Collaborative, Inc. and the Human Services Research Institute, 2002).

Substance Abuse Treatment Services in the MDC and JDC

Treatment services in the MDC are limited to the DWI Addiction Treatment Programs (ATP) and limited NA/AA volunteer services. The primary purpose of the ATP is to reduce the incidence of DWI in the county by providing quality addiction treatment to DWI offenders in the jail. ATP is beginning to provide transition services for release from MDC back to the community.

The City of Albuquerque provides an assessment counselor from the Albuquerque Metropolitan Central Intake (AMCI) to assess individuals released from MDC. Individuals released from MDC can receive services from the AMCI's network of treatment providers.

Treatment services in the JDC include the Assisting Youth Using Drugs and Alcohol (AYUDA) program. The program offers counseling services, assessment, relapse prevention and individual case management. AYUDA makes referrals for those who would like to participate in programs upon release. This program has a capacity of 30 juveniles and is a six week program. In addition, the JDC has three full time clinical staff. The staff consists of a LPCC, LISW and LMSW who can provide substance abuse counseling.

Treatment Services Outside the Jail

Substance abuse treatment services are provided outside the jail by numerous agencies, such as the AMCI, the Bernalillo County Metropolitan Assessment and Treatment Services (MATs), and the Division of Behavioral Health. These

agencies provide assessment, outpatient, intensive outpatient, detoxification, inpatient and residential services or more specifically, short term detoxification, substance abuse recovery programs (up to 30 days), traditional housing and case management (4 to 6 months), community outreach services, referrals to specific treatment programs, and psychological evaluations. The Division of Behavioral Health also provides services for adolescents. Additionally, the New Mexico Sentencing Commission maintains a directory of providers throughout the state.

Substance Abusers in the Jail

Using 2003 ADAM data that measured drug use among arrestees, we created estimates of the number of arrestees in the Jail from July 2003 through June 2005 who were drug users and those who were drug dependent or at risk for drug dependence.

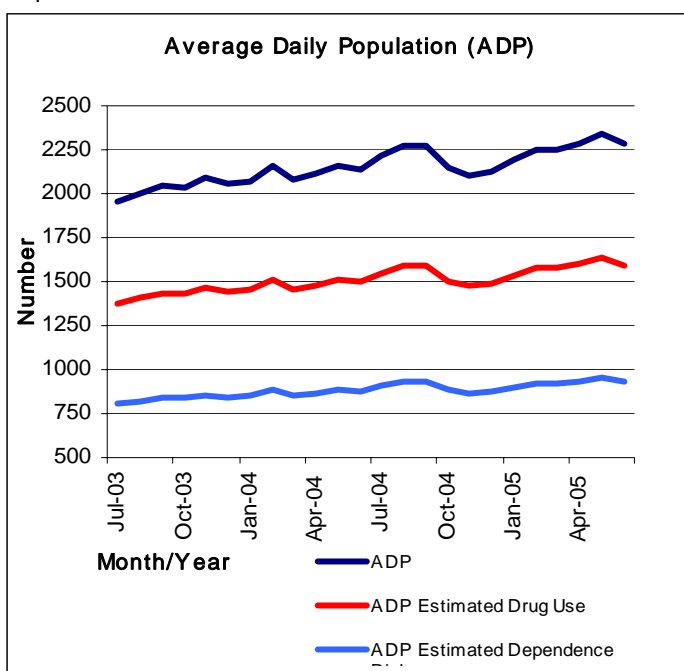


Figure 9

Figure 9 reports the MDC's average daily population, the estimated proportion that uses drugs, and the estimated proportion that is at risk for drug dependence. In 2003 approximately 70% of the arrestees interviewed and tested at the MDC tested positive for drug use and approximately 41% of these individuals were estimated to be at risk for drug dependence. Applying this estimate to the MDC's average daily population of 2,279 individuals in July 2005 we estimate that approximately 1,595 arrestees in the Jail on any given day would have tested positive for drug use and that approximately 654 individuals using drugs were at risk for drug dependence. Unfortunately, at the current time, the jail lacks resources to properly screen, assess, or treat their population.

Serving the Need

Increases in jail populations, nationally and locally, have resulted in large numbers of offenders being released into

communities. Successful reintegration is a complex but important task that might be achieved through proper and effective treatment. Unfortunately, the need for treatment in the criminal justice population exceeds the capacity of the system. There is also limited evidence proving effective jail based substance abuse treatment programs. The reality is most treatment programs have never been evaluated.

For various reasons we do not believe the treatment gap will ever be closed in the jail or the community. First, in order to identify drug dependent arrestees, the jail needs a system to screen individuals and to search arrestees who have been booked multiple times. Second, many arrestees are released within 24-48 hours making it difficult to provide treatment to this population. Third, we lack reliable information on the drug dependent jail population. Fourth, the cost of providing substance abuse services to drug addicted arrestees is prohibitive. Fifth, there is no consensus among policymakers regarding drug offenders.

Recommendations

1. Despite the lack of substance abuse treatment services in Bernalillo County, existing resources could be better used to serve the criminal justice population. This includes better coordination among the various criminal justice agencies in Bernalillo County, criminal justice agencies and substance abuse treatment providers in the community, as well as coordination between the City and County.
2. Screening individuals for substance use and abuse at booking should be explored. It is important that the drug dependent population that remains in the Jail be identified and provided substance abuse treatment services. Individuals who have been booked multiple times into the Jail should be matched with available treatment data in the community (e.g. AMCI data) to discover which of these individuals have received substance abuse treatment and may be drug addicted.
3. Substance abuse treatment services available in the MDC and JDC should be evidenced-based and structured for Jail based populations. This includes a stronger aftercare component to improve the continuum of care from the Jail to the community. Research has shown the importance and benefit of corrections based treatment followed with treatment in the community.
4. How often addicted offenders come into contact with the criminal justice system, the type of contact (police courts, and corrections), reasons for contact, and duration of their contacts should be studied. This report documents that a large minority of the MDC's population is comprised of drug addicted individuals and that a subset of individuals comes into contact with the police, courts and Jail often. It is unknown whether those coming into contact with the MDC are drug addicted, but there is reason to believe this is the case.
5. It is important to better understand what factors have driven the decreases in population at the JDC and the increases in population at the MDC. While the two systems are very

different, a more complete understanding of factors could lead to discussions that improve the efficiency of the adult and juvenile criminal justice systems.

6. It is important to note the current system is under-funded and cannot effectively serve the population. Increased system capacity would be beneficial and may provide long-term benefits that could include reduced system crowding.

Conclusion

Substance abuse and drug addiction are one of many factors that are related to crime and the risk for future offending. A goal of public safety should be to reduce the risk of recurring offenses in the community. This may be better accomplished by serving the treatment needs of substance abusers with a particular focus on drug addicted offenders.

Reforming the existing criminal justice and treatment system to better identify and then provide substance abuse treatment resources to this population using evidence-based practices would benefit public safety and the community.

Further, because substance abuse treatment capacity is limited it would be useful to focus on the addicted population that remains in the Jail for a sufficiently long period of time and perhaps focus even more on the sentenced population, which is a limited subset of the total population. Limited drug treatment resources should be targeted to those with the greatest need. Currently, we don't know if this is occurring at the Jail. Some consideration should be given to methods and opportunities for screening and identifying addicted persons for their first and/or subsequent bookings in the Jail so addicted offenders can be placed into treatment quickly and others referred to treatment in the community.

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