

**Evaluation of California's Substance Abuse and Crime Prevention Act of 2000**

**Testimony Before the Commission on California State Government Organization and  
Economy (The Little Hoover Commission)**

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In November, 2000, 61% of California voters approved Proposition 36, subsequently enacted into law as the Substance Abuse and Crime Prevention Act, or SACPA. This legislation mandated, for an initial five-year period, a major shift in the state's criminal justice policy. Under SACPA, nonviolent drug possession offenders may choose to receive drug abuse treatment in the community instead of being sentenced to a term of incarceration or being placed on community supervision without treatment. SACPA also establishes sanctions for offenders who do not sustain their participation in treatment or who violate certain conditions of probation or parole.

An independent evaluation of SACPA's effects and fiscal impact was called for in the legislation. That evaluation is being carried out by UCLA Integrated Substance Abuse Programs and will cover the full five years of SACPA. In my testimony, I review provisions of SACPA, describe the evaluation's goals and methods, and report on some of the implementation issues being tracked.

## **Provisions of SACPA**

**Treatment.** Under SACPA, adults convicted of nonviolent drug possession offenses in California are eligible to be placed on probation and receive drug treatment in the community instead of incarceration or community supervision without treatment. Offenders who choose SACPA are sent to an assessment center, where their drug use severity and treatment needs are identified. They must then report to the treatment program. Paroled offenders who commit nonviolent drug possession offenses or who violate drug-related conditions of parole can also receive treatment in lieu of re-incarceration. Drug treatment programs serving SACPA offenders must be state-licensed and -certified and provide various types of treatment, including residential and outpatient services and narcotics replacement therapy.

**Sanctions for noncompliance.** Apart from its treatment provisions, SACPA establishes sanctions for offenders who do not sustain their participation in treatment or who violate certain conditions of probation or parole. An arrest for a *non-drug-related* offense or a *non-drug-related* probation violation could result in immediate revocation of probation and incarceration for one to three years. Sanctions for *drug-related* probation violations or for an arrest for *drug possession* depend on the severity and number of occurrences. Courts may revoke probation or assign an offender to a more restrictive treatment program on the first or second occurrence (violation or arrest), but, upon the third, an offender faces incarceration for up to three years. Sanctions for parole violations or for arrests while on parole are similar to those for probation, except that parole is revoked on the second occurrence, not the third.

## **SACPA Evaluation**

Along with evaluations of drug courts and similar initiatives in other states (such as Arizona's

Proposition 200, formally known as the Drug Medicalization, Prevention, and Control Act of 1996), the SACPA evaluation will provide state and national policymakers with information needed to determine the future of similar programs. We will cover four domains: cost-offset, outcomes, implementation, and lessons learned. To guide our work, we have overall evaluation goals in each domain as well as more detailed research questions.

**Cost-Offset.** Goals in the cost-offset domain are to determine whether SACPA leads to a cost-offset and whether overall SACPA funding is adequate. We will use administrative data maintained by State agencies and will collect unit-cost information from treatment, criminal justice, and other sources in order to measure costs and cost savings and to evaluate the adequacy of funds appropriated. There are four research questions in this domain:

- What offender incarceration costs are saved because of SACPA?
- What jail and prison construction costs are saved in anticipation of SACPA effects and as a result of SACPA effects?
- Does the legislated SACPA funding allocation suffice for adequate treatment and supervision of all eligible SACPA offenders?
- What additional funds are allocated or accessed to support treatment and supervision of SACPA offenders?

**Outcomes.** Goals in the outcome domain are to assess SACPA's effect on public safety via reductions in crime, on drug use by offenders, and on the well-being of offenders and their families. We will track these effects during the offenders' participation in SACPA and for one or two years after. Our sources will include the State's administrative databases, covering all 58 counties, and a survey of approximately 2,000 offenders who participate in SACPA in some counties. We will compare outcomes between these offender groups:

- (1) before-SACPA offenders who would have been eligible for SACPA versus SACPA-era

- offenders who are eligible;
- (2) SACPA-era offenders who are eligible and opt for SACPA versus those who are eligible but do not opt for SACPA;
  - (3) SACPA participants who appear for their assessment and enter treatment versus those who do not appear for assessment or treatment; and
  - (4) SACPA participants who enter and complete treatment versus those who do not.

Seven research questions comprise the outcome domain.

- What is the effect of SACPA on offender recidivism?
- What is the effect of SACPA on offender drug use?
- Is recidivism lower among SACPA offenders who participate in treatment (of various types) than among those who do not; is it lower among those who complete treatment than among those who do not?
- What is the effect of SACPA on overall crime trends?
- What is the effect of SACPA on offender employment?
- What is the effect of SACPA on welfare dependency of offenders and their families?
- What is the effect of SACPA on the well-being of offenders' families (e.g., custody of children regained, domestic violence reduced, and child mistreatment reduced)?

**Implementation.** Goals within the implementation domain are to describe the offenders who opt for SACPA and to document innovation in criminal justice and treatment procedures. Our methods will include: “pipeline” models showing the flow of offenders from arrest onward; an annual survey of stakeholders in all 58 counties; in-depth discussion with stakeholders in some counties; and observation at meetings, conferences, and other events. We will use the pipeline models to represent in a visual way each of the major decision-points—arrest, conviction, assessment, entering and completing treatment, community supervision, and (for some) incarceration—and the characteristics of offenders who exit at

each decision-point or continue on. The stakeholder survey and discussions, as well as first-hand observation, will help us understand discretionary, interpretive, and subjective aspects of implementation.

There are three research questions in this domain:

- How many SACPA-eligible offenders enter treatment, complete treatment, and complete probation/parole?
- What procedures are used for needs/risk assessment, treatment placement, and probation/parole supervision for SACPA-eligible offenders?
- How do sectors of the criminal justice and treatment systems respond to SACPA?

**Lessons learned.** Finally, within the lessons learned domain, our goal is to arrive at implications for policy and practice. These will be based on SACPA evaluation findings as well as other evaluations of initiatives like SACPA. Methods will include the annual survey of state and county stakeholders in all 58 counties and discussion groups in some counties; and observation at meetings, conferences, and other events. We will address three research questions in this domain.

- What barriers arose in implementing SACPA, and how were those barriers addressed?
- How can SACPA implementation be improved?
- What are SACPA's "promising practices"?

**Focus counties.** As I mentioned, some of our work will be done in only some counties, not all 58. We refer to these as “focus counties.” From an initial set of 24 volunteers, we selected 10 that provide excellent coverage of the state’s regions. The 10 are: Alameda, Kern, Los Angeles, Mendocino, Orange, San Joaquin, San Mateo, Santa Barbara, Santa Clara, and Shasta. The main activity unique to focus counties is the offender survey, which is not practical in all 58 counties. Other activities in the 10 counties are in-depth small-group discussions with stakeholders and collaborative analysis of data kept by the counties.

**Reporting.** We will report annually to the Department of Alcohol and Drug Programs (ADP), which is responsible for review and release of each report. We will also provide interim feedback to ADP officials, ADP’s advisory groups, and stakeholders through briefings and written reports (after ADP review). In each of the 10 focus counties, we will meet regularly with agency representatives and other local stakeholders to review our findings for that county and offer feedback on implementation.

### **SACPA in Practice: Emerging Implementation Issues**

We will monitor implementation issues throughout the evaluation. At this early point, evidence on such issues is sparse and inconclusive, but it does indicate some of the issues we ought to be tracking over time.

**Treatment availability.** Will local treatment systems be able to expand quickly enough to accommodate the influx of SACPA offenders without shortchanging the non-SACPA client population?

**Opt-outs.** How many persons charged with drug-related misdemeanors choose to take “straight probation” or serve a short jail sentence instead of participating in SACPA?

**No-shows.** What are the no-show rates (i.e., percent of offenders who agree to participate in SACPA but later do not appear for assessment or do not enroll in treatment) across the state? Will no-shows decrease as assessment and referral processes mature? How can assessment and referral processes be streamlined (made to move faster) and tightened up?

**High-need cases.** How many high-need cases will participate in SACPA? High-need cases include offenders with current psychiatric as well as drug abuse disorder, those with severe criminal and drug histories, and those with serious medical problems. High-need cases will need lengthy and intensive treatment as well as close supervision. Will they consume resources rapidly and lead to budget shortfalls?

**Out-year budgets.** How will the future availability of funding from State or other sources (apart

from the locked-in SACPA allocation) affect budgeting for SACPA in the counties? Will enough resources be available for the treatment, other services, and supervision that are needed to make SACPA work?

**Drug courts.** How does the existence of drug courts or other nontraditional criminal-justice options affect demand for SACPA, and how does SACPA affect demand for them?

## **Conclusion**

An independent and rigorous assessment of SACPA will help us understand how SACPA impacts the criminal justice and treatment systems, affects costs, and influences offender behavior. Our evaluation will link research on SAPCA and similar initiatives, communicate findings to state and national audiences, and identify implications for criminal justice and treatment policy. I will be glad to answer any questions you may have.