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THE NATIONAL INSTITUTE OF JUSTICE DRUG USE FORECASTING SYSTEM (DUF)

NGJRB

PURPOSE

ACQUISITIONS

The National Institute of Justice is pleased to announce the formation of the DUF system, a national data system for tracking drug use trends in the offender population. The system will begin in 1987 in 10 large cities across the United States. Every 3 months, voluntary urine specimens will be obtained from a small sample of arrestees in each participating city. Because the estimates of drug use will be based upon urinalysis results rather than self-reports, the DUF system promises to provide the most objective information available regarding the prevalence of drug use in offenders. In addition to providing national level information about drug use trends, the system will provide each participating city with information that can be used to detect drug epidemics earlier, to plan the allocation of law enforcement, treatment and prevention resources, and to measure the impact of efforts to reduce drug abuse and crime.

RATIONALE FOR DUF

Since 1971, the District of Columbia has operated the Nation's only program for the systematic identification of drug using arrestees by urinalysis. All arrestees held in the D.C. Superior Court lock-up are asked to provide a voluntary urine specimen for analysis. Studies of the information collected by the D.C. urine testing program (DuPont and Kozel 1976; Forst and Wish 1983; Toborg 1986; Carver 1986) have clearly demonstrated the potential value of arrestee urinalysis test results for tracking drug use trends in offenders and for describing the relationship between drug use and crime. The urinalysis findings were extremely useful in documenting the large PCP abuse problem in the District of Columbia and resulted in an expansion of the treatment resources that were made available for PCP abusers. It seems reasonable that as illicit drugs become available in a community they would be used first by the more deviant persons, i.e. criminals. Thus, the rise in heroin use in the District of Columbia between 1975 and 1980 showed up in the results from the D.C. testing program at least one year before it was apparent in the more commonly available community indicators of heroin use (treatment admissions, overdose deaths, emergency room admissions).

The success of the D.C. testing program prompted the National Institute of Justice to sponsor research projects in New York City that included the collection of urine specimens from arrestees and probationers (Wish et al. 1986; Wish and Johnson 1986; Wish 1987). The research showed the high level of drug use in arrestees in New York City (56 percent of male arrestees were positive for one or more of four drugs in 1984--PCP, cocaine, opiates methadone; 55 percent of intensive supervision probationers studied in 1986 were positive for one or more of these drugs). These studies also showed that persons being processed by the criminal justice system would greatly underreport their recent use of illegal drugs. The research in New York City and Washington D.C. clearly demonstrated that urine tests provide a much more accurate estimate of the prevalence of drug use in offenders than can be obtained from criminal justice records or detainees' self-reports.

DUF PROCEDURES

<u>DUF cities</u>. NII plans are to introduce DUF in 10 cities in 1987. DUF has already been initiated in New York City and Indiannapolis. In the first year of the program, cities will be selected that meet as many of the following criteria as possible: 1) availability of a central booking facility; 2) large population; 3) large number of index crimes; 4) suspected drug abuse problem; 5) ability to follow DUF procedures; 6) location vis a vis other DUF sites. Selected sites will

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receive a contract from NII to pay for the program.

As part of the site selection process, NIJ staff will visit each city to verify its appropriateness as a site for DUF. After a site has been selected, a second visit by DUF staff will train local staff on how to conduct the interviews, obtain the voluntary urine specimens and process the data for delivery to NIJ. An independent consultant will be hired in each city to provide technical assistance and work with staff during the tdata collection period. Data will be collected in each site during evening shifts for approximately 7 days, every 3 months. In some sites, it may be necessary to obtain information-for more than I week in order to obtain the desired number of urine specimens (200 from males, 100 from females). It is anticipated that three or four staff members will be needed during the data collection.

Location of data collection. Initially, DUF will be established in cities with a central booking facility. The expense of collecting sufficient information from sites with numerous booking facilities would be prohibitive at this time. All data will therefore be collected in the central booking facility.

<u>Data collection staff.</u> It is anticipated that the DUF staff in each site will vary, depending upon the availability of appropriate persons in central booking. Arrangements for staffing the project will be negotiated during the pre-implementation site visit.

Persons to be approached. During the first few data collections, only male arrestees will be approached, typically during the evening shift. After sufficient experience has been gained by a site, female arrestees will be included in the DUF samples. Initially, all available male arrestees will be eligible for inclusion in the sample. After sufficient familiarity with the arrestee population in a site has resulted, a system may be developed to assign a selection priority for certain types of arrestees. For example, when there is a choice between two or more arrestees, persons charged with a nondrug felony offense may be selected over persons charged with a misdemeanor offense. Each arrestee will be asked to be take part in a voluntary, confidential interview about their prior use of illicit drugs and treatment, and to provide a urine specimen for analysis. No names will be recorded on any of the data forms and all data will be protected from subpoena by a Federal Certificate of Confidentiality that will be on display for the participants. The DUF procedures have resulted in rates of cooperation above 80 percent in New York City and Indianapolis.

Testing of urines. If a site has a competent local laboratory that can perform the necessary tests, that lab will be contracted to perform the tests. In that event, a proficiency testing program will be used to assure the accuracy of the test results. (Specimens will be split and tested by the DUF criterion laboratory.) If the site has no local testing option, NIJ will have the specimens tested by the DUF project laboratory. Test results will be sent by the laboratory to NIJ in a standard format. Drugs to be tested for include opiates, PCP, methadone, marijuana and cocaine. Depending upon local conditions and preferences, other drugs may be included in the screen. All laboratories will use the EMIT urinalysis system to ensure comparability of findings.

<u>Completed interviews</u>. Completed interviews will be photocopied; one set will be retained by the site, the original will be sent to NIJ for processing. After one year's experience, NIJ will provide the site with a microcomputer with which to process DUF data for delivery to NIJ and to analyze results.

Data processing and report preparation. The completed interviews and test results will be sent to NIJ for merging and analysis. Each site will receive immediate feedback on their current results. When feasible, a "DUF Alert" will be sent to a site if it appears that a change in drug use trends is occurring or if analyses indicate certain locations where drug using arrestees (or specific types of drugs) appear to be newly concentrated. Each site will also receive a copy of their merged interviews and test results so that they may conduct their own analyses.

NIJ will prepare a national report that presents the information obtained from each site in an easily comparable way. Using the test results and other site information about the annual number of arrestees, estimates of the total number of drug users in the offender population in each site will made. The trend in drug use in each city will be examined along with a projection of future trends. DUF information will be compared with other indicators of community drug use in each locality.

The reports will also examine the relationship between arrest charge, location of arrest, and age at arrest with drug use.

COSTS TO THE CRIMINAL JUSTICE SYSTEM

Staff burden. DUF data collection will take place on 7 days every 3 months. Most of the data collection can be accomplished by staff already onsite or by persons hired especially for DUF. Depending upon the location of the plumbing facilities, some additional burden may result if staff must escort the arrestee to a toilet to obtain the urine specimen. The preparation of the completed interviews and urine specimens for shipment can easily be accomplished by one person at the end of the week's data collection.

Economic costs to the system. It is anticipated that each site will incur no extra costs as a result of DUF activities. The costs of obtaining the interviews, specimens and laboratory tests will be borne by the DUF project.

FOR FURTHER INFORMATION

Listed below are some of the research reports relevant to DUF. For information on how to obtain copies, please call NIJ's National Criminal Justice Reference Service at 1-800-851-3420.

- Carver, J.A., "Drugs and crime: Controlling use and reducing risk through testing." In NIJ Reports, SNI 199, Washington, D.C.: National Institute of Justice, September/October 1986.
- Forst, B. and Wish, E.D., "Drug use and crime: providing a missing link." In Kenneth R. Feinberg, (ed.), Violent Crime in America, Washington, D.C.: National Policy Exchange, 1983.
- Toborg, M., Bellassai, J. P. and Yezer, A. M. J., "The Washington, D.C. urine testing program for arrestees and defendants awaiting trial: A summary of interim findings." Presented at the NIJ conference, Drugs and crime: Detecting use and reducing risk, Washington, D.C., June, 1986.
- Wish, E.D., Brady, E. and Cuadrado, M., "Drug use in arrestees: Findings from Manhattan." Presented at the NII conference, Drugs and crime: Detecting use and reducing risk, Washington, D.C., June, 1986.
- Wish, E.D., Cuadrado, M. and Martorana, J., "Estimates of drug use in Intensive supervision probationers: Results of a pilot study," <u>Federal Probation</u>, Administrative Office of the U.S. Courts, Washington, D.C. (in press).
- Wish, E. D. and Johnson B.D., "The impact of substance abuse on criminal careers." In Alfred Blumstein, Jacqueline Cohen, Jeffrey A. Roth and Christ A. Visher (eds.), <u>Criminal Careers and Career Criminals</u>, Volume II, Washington, D.C.: National Academy Press, 1986.

For further information about the DUF system or about how to become a DUF site, please contact Dr. Eric Wish at the National Institute of Justice, Washington, D.C. (202-272-6040)

Questions and Answers About the DUF System

The Drug Use Forecasting System (DUF) is a new program sponsored by the National Institute of Justice that will track drug use among arrested persons in a number of American cities. DUF city, samples of 200-300 arrestees will be selected at three month intervals. These persons will be interviewed about their drug use and asked to provide a urine sample that will be tested for illicit drugs. DUF procedures are anonymous -- no names will recorded on the interviews or specimen containers. Participation in the DUF procedures will be voluntary. All arrestees will be protected by a U.S. Department of Justice Certificate of Confidentiality that ensures that the information collected cannot be subpoened and will not be used for other than The DUF information will be available for research purposes. immediate analysis by the city. NIJ will take the data from all the cities and use it to publish reports on national drug use Below are some frequent questions and answers regarding trends. DUF.

1. What is the goal of the DUF system?

To measure, through urine testing, the extent of drug use among the arrestee populations in 10 or more cities, and to track over time increases/decreases in number of arrestees who test "dirty", the types of drugs that are being used, and demographic information on users and non-users.

2. What type of information will be collected?

From confidential interviews—information will be obtained from arrestees on frequency of drug use, past or present enrollment in treatment programs, age of first use.

Through urine testing--information can be obtained on types of drugs available in the city, the extent of drug use among different age, sex and ethnic groups, and the association of drug use and arrest charges.

<u>From arrest report</u>--precinct of arrest, age of arrestee, date of arrest, ethnicity, arrest charge.

3. Isn't this information already available?

Yes and no. Experience in other cities demonstrates that relying on arrestees to admit drug use is almost a wasted effort. Only about one-half of arrestees testing positive by urinalysis admitted to recent drug use.

Urine tests can provide the best information about what drugs are in use. In one city, widespread PCP use was largely unknown until the results of the urine testing program were available. The city subsequently altered its available treatment programs to meet this need. Arrestee urine tests have also been shown to provide advance warning of drug epidemics.

4. Who will use the information other than drug treatment agencies?

Virtually all local agencies involved in fighting drugs. The information on drug use among arrestees will be of use to the police in collecting information on the availability of specific drugs and the impact of enforcement strategies; school authorities can use the information in developing education and prevention efforts. The courts and corrections administrators can use the information in planning programs for both pretrial and post-adjudication populations.

5. What technology will be used, and what drugs will be screened?

All cities will use the same test system, so that the results from one site can be compared to those from another. Initially, all drugs will be screened in order to identify which are prevalent in a city.

6. What will it cost?

The cost of each data collection will be funded by NIJ. A small contract will be awarded to each participating site to pay for <u>both</u> staff and laboratory analysis.

7. How much will the program disrupt operations?

Very little. Every three months, a sample of 250-300 arrestees in each city will be asked to participate. These persons will be approached in the Central Booking facility as soon as possible after arrest and asked to answer the interviewer's questions and give a urine sample. In previous projects, about 4 out of 5 arrestees agreed to participate. In addition:

- o The work will be done during the evening shift;
- o 3-4 interviewers will interview and collect samples from about 20-25 persons each evening for 5-7 consecutive evenings, or until about 200 participants have given samples;
- o The interviews will average about 5 minutes;
- o The arrestees will be guaranteed confidentiality: under a Federal Certificate of Confidentiality, the information cannot be used against the arrestee;
- o Both felons and misdemeanants will be asked to participate;
- o The urine samples and the interview forms will be labeled with a code number so that information can be linked without revealing the arrestee's identity;

- The interview forms will be mailed to NIJ for data entry and analysis; the urine samples will be mailed to a laboratory designated by NIJ for analysis. In some cities, analysis of the urine samples may be done locally if the requisite equipment is available;
- 8. Will this program trigger a lawsuit?

Probably not, because:

- a) participation is voluntary;
- b) the participant is protected by a Certificate of Confidentiality;
- c) names are not recorded on the interview forms or specimen containers.
- 9. Whom can I call to find out more?

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