

# BALANCING PUNISHMENT AND TREATMENT

Alternatives to Incarceration in New York City

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## Executive Summary

Like other cities across the United States, New York is gradually increasing its use of alternatives to incarceration (or “ATIs”) for felony offenders. Instead of operating ATIs itself, the city government contracts with ten nonprofit organizations to operate their own programs, whose representatives must persuade judges and prosecutors to send them individual offenders who would otherwise go to jail. Since 1997, these programs have persuaded the courts to send them about 3,000 felony offenders annually. This is the first study to examine New York’s coordinated ATI system for felony offenders and one of the only studies nationally to examine the content of alternative sentencing programs as well as their long-term recidivism rates.

The New York City Council commissioned this study to learn which offenders are sent to ATIs, what happens in the programs, whether the programs compromise public safety, and how the system might be improved. To answer those questions, researchers at the Vera Institute interviewed 687 felony offenders entering nine of the ten alternative programs, then interviewed more than half of them again at the end of their third month. Over a three-year period, the researchers compared the recidivism rate for more than 300 of these offenders with the rate for a sample of similar offenders not sentenced to alternative programs. The researchers also interviewed judges, prosecutors, defense lawyers, and program staff, visited the programs, and obtained attendance and other data from participant case files.

The study shows that the courts are sending serious offenders to the ATIs. The offenders are typically charged with B-level felonies, mostly robberies and drug crimes. They are generally poor, with multiple social and health problems and prior criminal records. Most have not graduated from high school and have no consistent employment. The programs appear to be closely supervising and monitoring these offenders in highly structured and controlling environments although only one is residential. The programs deliver an average of nine group counseling sessions and 90 minutes of individual counseling to each offender in a typical week.

Offenders sent to ATIs show the same rate of re-offending up to three years later as those in a matched comparison group, despite spending much less time incarcerated during the study period. One-third of the offenders in both the ATI group and the comparison group were re-arrested and subsequently convicted, mostly of minor offenses; but while members of the comparison group had been in jail for an average of six of those months, members of the ATI group had spent an average of only one month in jail.

For those concerned about public safety, these results are good news; they show that many felony offenders can be sent to rigorous community programs rather than jail without increasing the risk to the public. For those hopeful about the rehabilitative power of alternative programs, however, the fact that the ATI system reduced recidivism no more than jail suggests that the system should be able to reduce recidivism further if the programs deal more promptly with offenders violating program rules, and if the programs increase their completion rates.

## Table of Contents

Acknowledgements .....	1
Chapter One: Introduction .....	3
The Need for Alternatives to Incarceration .....	4
This Study .....	8
Chapter Two: ATI Entry and Participants .....	13
Placement in an ATI .....	13
Characteristics of the Research Sample .....	18
Summary .....	24
Chapter Three: Program Integrity: ATI Supervision and Treatment .....	25
ATI Program Services .....	25
ATI Participation .....	26
Summary .....	36
Chapter Four: Program Integrity: Retention and Completion Rates .....	38
Retention .....	38
Completion .....	39
Retention and Completion .....	40
Explaining Program Completion .....	41
Summary .....	44
Chapter Five: ATIs and Public Safety .....	46
Conviction Rates Over Calendar Time .....	47
Conviction Rates Over Time at Risk .....	49
Severity of Charges and Sentences .....	50
Conviction by Program Type .....	53
Conviction by Completion Status .....	57
Summary .....	62
Chapter Six: Implications and Conclusions .....	64
Appendices .....	i
ATI Program descriptions .....	li
Research Methodology .....	x
Alternative Measures of Recidivism .....	xxvi

## Acknowledgements

In 1997, the New York City Council's Public Safety Committee called for increased funding of alternatives to incarceration in a report, *Curbing Crime, Cutting Costs: A Plan to Improve the City's Alternative-to-Incarceration Policy*. That report also called for more objective information on program participants, services, and outcomes. In response, the New York City Council, under Speaker Peter Vallone, and the Mayor's Criminal Justice Coordinator, Steven Fishner, asked the Vera Institute of Justice to conduct an evaluation of these programs and their effect on both participants and public safety.

The Vera Institute has had a long and intimate relationship with New York City's ATI system. Vera helped spawn some of the programs. Vera staff members have worked with several ATIs on joint projects, and some of Vera's trustees have played important roles in their governance, funding, and development. We acknowledge this longstanding relationship and hope that it strengthens this report.

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## Chapter One: Introduction

The criminal justice system in New York City includes a unique network of alternatives to incarceration: a coordinated set of programs to which judges may send criminal offenders instead of sentencing them to jail. The programs are designed and operated independently, but all require offenders to attend counseling, classes, and treatment for a period of six months to a year in order to avoid a threatened jail or prison sentence. All but one are non-residential.

Advances in research, changes in sentencing structure, and promising new programs have spurred an interest in intermediate sanctions over the past two decades.<sup>1</sup> New York City currently is spending approximately \$12.5 million on alternatives to incarceration, or ATI programs, responsible for the punishment and treatment of approximately 3,000 people on an annual basis.<sup>2</sup> About half of those people are arrested for misdemeanor offenses and half for felonies. The New York City Council and the city's Criminal Justice Coordinator asked the Vera Institute of Justice to examine the ATI system to understand how, and how well, it functions.

This report assesses the operation of the ATI system when dealing with defendants accused of felonies. While previous studies have examined individual programs, this is the first study to examine the felony ATI system as a whole and ask such questions as: Which felony defendants get these sentences? What crimes have they committed? What problems do they face? Does the ATI system administer their sentences with integrity? Do these sentences compromise public safety? Does the system reduce recidivism?

These are important questions in New York today because the ATI system is itself just coming into maturity. After a decade of invention followed by a decade of refinement, the city's ATI programs are better defined and coordinated than ever before. The answers to questions about the system's integrity and its effect on public safety will serve to inform the mayor and City Council as they make decisions about its future expansion.

The answers to these questions may be equally important nationally and internationally. Alternatives to incarceration, unlike other intermediate sanctions, try to admit only defendants who would otherwise be incarcerated. As such, ATIs offer the potential to significantly reduce criminal justice spending because operation costs for the programs are lower than for jails and prisons. With government revenues limited and many jails overcrowded, there is unprecedented demand for alternative systems that can handle large numbers of offenders with

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<sup>1</sup> For example: R. Collier, "Treating Drug Offenders: Huge Coffers Fund Effort to Replicate Prop. 36 in Other States." *The San Francisco Chronicle*, 1 July, 2001.

<sup>2</sup> The Community Service Sentencing Project (CSSP), an ATI for misdemeanor offenders, supervises some 1600 participants annually. CSSP is run by the Center for Alternative Sentencing and Employment Services, CASES. Vera presented findings from an evaluation of CSSP in a separate report, *A Study of the Community Service Sentencing Project*, in 1999.

integrity, safety, and the ability to reduce future offending.<sup>3</sup> There are lessons in the New York experience from which others can learn.

The ATI system in New York City differs from other programs nationwide in at least three ways. First, its programs are more carefully targeted than most “alternative” sentences in the United States, screening offenders to maximize the chance that the programs admit only those genuinely bound for jail or prison. Defendants whose charges carry potential jail time, but who are likely to receive only a probation sentence, are screened out. Second, the ATI system emphasizes treatment and onsite supervision as opposed to around-the-clock surveillance, avoiding such devices as electronic bracelets. Each program serving felony defendants is under contract to treat a general population of offenders or one of three special populations—substance abusers, women, or youth. These special population categories, although not mutually exclusive, are intended to correspond to sets of treatment needs that the ATI programs must serve. Third, the system is operated not by the government’s probation or corrections department but entirely through contracts between non-profit organizations and the mayor’s Criminal Justice Coordinator and the New York City Council.

Judges in New York, as in most states, are not required by legislation or sentencing guidelines—nor are they encouraged—to send offenders to ATI programs. In the absence of such formal encouragement, budget and justice officials have few mechanisms to shift large numbers of offenders away from jail sentences, even if the alternative sentences save money and reduce crime. These officials may try to promote alternative sentences publicly and privately, but the use of alternative programs is left to the initiative of individual judges, prosecutors, or defense lawyers.

New York City has expanded the network of actors in the courtroom to encourage the use of alternative sentences. City officials have created an ATI system that includes not only programs for offenders, but also court representatives whose job is to persuade even reluctant judges, assistant DAs, and public defenders to use these programs routinely in appropriate cases. As a result, the ATI system plays a dual role in the criminal justice process, trying to shape plea bargains and sentencing decisions in court as well as administering the sentences themselves.

### **The Need for Alternatives to Incarceration**

In New York City, advocates and criminal justice officials have worked together for decades to build the role of ATIs, but their rationales for doing so have differed. Some have promoted ATIs as less expensive than jail but still punitive, depriving offenders of their freedom at least during program hours. Others have emphasized the value of the services ATIs provide to a needy population that would otherwise repeat a cycle of crime and incarceration. By offering drug treatment, literacy classes, family counseling, and employment training, the ATI

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<sup>3</sup> For examples of concern about overcrowding nationally, see: D. Firestone, “Crowded Jails Create Crisis for Prisons in Alabama.” *The New York Times*, 1 May, 2001. Bureau of Justice Assistance, *Alleviating Jail Crowding: A Systems Perspective*. Washington, DC: United States Department of Justice, 2000.

programs might change the circumstances and improve the skills of participants, and in so doing reduce the likelihood that they will commit crimes again. Still others more modestly assert that by dealing with offenders out of jail, the ATIs can at least avoid disrupting the positive roles that participants play in their families and communities, roles such as parenting or supporting others through legitimate employment.<sup>4</sup> Several of these uses of ATIs are similar to goals of intermediate sanctions across the country, such as drug courts and probation alternatives.<sup>5</sup>

In design, the ATI programs fulfill all of these purposes. They maintain their punitive elements by holding participants accountable for absences and misconduct. They monitor costs to keep ATIs less expensive than incarceration—not as easy as it seems if a 12-month treatment program replaces a two- or three-month jail sentence, and if those who fail mid-course are returned to jail for longer than the jail sentence they would have received absent an ATI. They deliver treatment and social services to address the wide range of problems that may contribute to future offending, while preserving the positive roles of their participants in families and communities.

In practice, however, these purposes sometimes conflict, and program operators must balance punishment and treatment while staying within their budgets and meeting their contractual targets for enrollments and successful completions. Moreover, the program operators strike this balance differently over time, as one purpose or another becomes more important to the system as a whole.

*Historical Context.* Most of the individual programs that today comprise the ATI system for felony defendants began as independent efforts, some of them decades ago. The Court Employment Project (CEP) opened in 1967 as the country's first pre-trial diversion project to use rehabilitative services explicitly to help manage the size and shape of the criminal justice system. For another decade and a half, community-based organizations across New York City developed a number of programs designed as substitutes for jail or prison, each funded through private grants or the sponsorship of individual government officials. During this early period, the city was dotted with small experiments, but it had no real system of alternatives to incarceration.

New York State's Classification/Alternatives to Incarceration Act of 1984 brought increased funding and government management to this array of experiments. The Act provided funds for programs that diverted convicted offenders from jail terms of at least 180 days; it

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<sup>4</sup> Vera Institute of Justice, *The Unintended Consequences of Incarceration*. New York: Vera Institute of Justice, 1996. J. Hagan & R. Dinovitzer, "Collateral Consequences of Imprisonment for Children, Communities, and Prisoners." In *Crime and Justice: A Review of Research*, ed. M. Tonry. Chicago: The University of Chicago Press, 1999.

<sup>5</sup> For example: L.W. Sherman, D.C. Gottfredson, D.L. MacKenzie, J. Eck, P. Reuter, & S.D. Bushway. *Preventing Crime: What Works, What Doesn't, What's Promising. Research in Brief*. National Institute of Justice. Washington, DC, 1998. J. Petersilia, "A Decade of Experimenting with Intermediate Sanctions: What Have We Learned?" *Corrections Management Quarterly* 3, no. 3 (1999). F.S. Taxman, "Unraveling What Works for Offenders in Substance Abuse Treatment Services." *National Drug Court Review* II, issue 2 (1999).

required each county or city in the state to establish a committee to coordinate the distribution of these funds, and it began regular state monitoring of the funded programs. While experimentation continued with other private and public funds, the 1984 Act created a dedicated funding stream that continues to support New York City's ATI system to this day.

The Act came in the middle of the largest expansion of jail and prison capacity in New York State history. For both officials and program operators, the Act represented a small but significant counterweight to the pressures forcing unprecedented construction of new jails and prisons. The rhetoric of rehabilitation had been largely abandoned, leaving punishment for crime as an end in itself and rapidly growing in popularity. Between 1980 and 1990, for example, the New York City Department of Correction increased its spending on the city's jails by more than 450 percent.<sup>6</sup> In this context, ATI program operators emphasized their role in diverting offenders who would otherwise go to jail or prison and moderating, however slightly, the enormous costs of expanding the prison system. At the same time, the ATIs responded to some judges' and prosecutors' frustration with their limited sentencing options. To those who wanted options more rigorous than probation but less harsh than incarceration, ATIs began to serve as intermediate sanctions. In short, the newly formalized ATI system was implemented as a means of expanding sentencing options while saving money and relieving a bit of the pressure for jail and prison expansion.

Five years later, New York City officials substantially increased city funding for the ATI system as part of the expansion of the city police department's tactical narcotics teams. The new spending on ATI programs was designed to free space in city jails to handle a part of anticipated increases in felony arrests. As officials began to monitor these programs more closely, however, they became concerned that some were enrolling few offenders who would have received jail sentences, thus failing to save money or relieve pressure on the jails.

In 1991 and again in 1997, the city's Criminal Justice Coordinator created targeting criteria for the ATI programs to use in identifying defendants likely to receive sentences of at least 180 days in jail. In order to predict which defendants were jail-bound, the coordinator drew on statistical models developed by researchers, first at the Vera Institute of Justice and then at the New York City Criminal Justice Agency (CJA).<sup>7</sup> These models suggested using such criteria as detention status, bail amount, or prior felony convictions to identify cases within the targeted range. In the mid-1990s, CJA created distinct models for juvenile offenders, youthful offenders, female drug and non-drug offenders, and male drug and non-drug offenders.

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<sup>6</sup> M. Jacobson and M. Tarlow, *Developing Long-Term Stability in the Correctional Population*. Mayor's Office of Management and Budget, City of New York. NY, 1990.

<sup>7</sup> L. Winterfield, *Models for Predicting Incarceration—Felony Cases: Memorandum to the Jail Population Management Project Advisory Committee, and staff of the Planning Unit, Office of the Deputy Mayor for Public Safety*. New York: Vera Institute of Justice, 1992; S. Belenko, L. Winterfield, M. Phillips, A. Grant, and R. Caliguire, *Estimating the Displacement Effects of Alternatives-to-Incarceration Programs*. New York: New York City Criminal Justice Agency, Inc, 1995. The models represented further refinements and re-analyses of work first conducted and described by D. McDonald, *Punishment Without Walls: Community Service Sentences in New York City*. New Brunswick, NJ: Rutgers University Press, 1986.

The Criminal Justice Coordinator used these models in 1997 to reshape the ATI system for all felony defendants. Through the contracting process, the coordinator required all ATI programs to propose how they would serve a general population of felony offenders or special populations of substance abusers, women, or youth. Moreover, the request for proposals set target numbers for each of these felony populations, focusing the ATI system on those defendants who were then occupying jail space but who might be diverted. The coordinator awarded a set of contracts, and the City Council supplemented these with additional funds directed to specific programs. Finally, the coordinator centralized the responsibility for ATI case targeting and screening by funding a new service within CJA, the Central Court Screening Service (CCSS). Two years later the coordinator returned the screening function to the individual programs, eliminating the central screening service, but CJA continues to use the targeting models to identify potential participants for ATI programs. CJA also continues to identify ATI participants among new arrestees in New York City and make those lists available to the programs, another innovation of the 1997 restructuring.

*From Diversion to Treatment.* By the time that New York City's ATI system was restructured in 1997 to divert offenders from jails and prisons more effectively, the pressure to do so was waning. The population in New York City's jails is now approximately two-thirds of its peak in the early 1990s, and corrections officials find themselves able to focus on long-term maintenance rather than rapid construction.<sup>8</sup>

At the same time, interest in treatment to reduce future offending is enjoying a revival. Information about the effectiveness of drug treatment and the growth of problem-solving courts has spurred interest in a wide range of treatment regimes for criminal offenders including anger management, batterer treatment, and cognitive-behavioral therapies for various anti-social behaviors.<sup>9</sup> ATI program operators, who have been promoting their ability to deliver punishment in the community for less than the cost of a jail sentence, are now asking themselves if it is time to put greater emphasis on their treatment services.

Whatever the mix of punishment and treatment in ATIs, politically accountable officials want to be satisfied that offenders placed in the system do not threaten public safety. Specifically, they worry that offenders placed in ATIs represent a greater risk to the public than those incarcerated. As crime rates continue to fall, the pressure on programs to prevent re-offending is only growing stronger.

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<sup>8</sup> City of New York Independent Budget Office, "City to spend nearly \$1 billion to make temporary jail beds permanent." *Inside the Budget* 82, 4 May 2001.

<sup>9</sup> D.A. Andrews, I. Zinger, R.D. Hoge, J. Bonta, P. Gendreau, & F. Cullen, "Does Correctional Treatment Work? A Clinically Relevant and Psychologically Informed Meta-Analysis." *Criminology* 28, no. 3 (1990). F.T. Cullen, "Rehabilitation and Treatment Programs," in *Crime: Public Policies for Crime Control*, eds. J.Q. Wilson & J. Petersilia (Oakland, Ca.: ICS Press, 2002).

## **This Study**

This report describes the results of a four-year evaluation of New York City’s ATI system for felony defendants. Not only is ours the first study to examine the entire ATI system, we also have been able to look in greater depth than previous studies at the experiences of offenders inside the system. The study has continued long enough for us to follow a substantial number of offenders for two years after they finish the program. We compare reconviction rates of a large sample of those enrolled in ATIs with matched offenders who were sentenced to probation, jail, or prison.

Specifically, this report addresses three central questions:

- **Who enters New York City’s ATI system?** We examine how judges make decisions to sentence offenders to the ATIs: what information about offenders they consider relevant, what they know about the ATIs, and how they distinguish among the programs. We report the characteristics and criminal histories of program participants as well as their treatment needs.
- **Are the ATI programs implemented with integrity?** We examine the programs from the perspective of both punishment and treatment: how tightly structured they are, how they report back to the court, what range and intensity of services they provide, and how well the services match the participants’ needs. We also examine how well the system retains its participants and how many complete the programs successfully.
- **Does the ATI system compromise public safety?** We examine the re-conviction rates among program participants, not only during their time in the programs but for many months afterwards, to see if those placed in ATIs are convicted more often than a matched comparison group. We examine the severity of charges against those who are convicted in both groups and the sentences they receive. (The comparison group is made up of defendants who were eligible for, but not placed in, the ATI system.) Within the ATI programs we examine the relationship between retention and re-conviction rates, and we consider whether participants who complete the programs show better results than those who don’t.

Appendix B provides a description of the data sources and methodology we used to answer each question.

*ATI Programs.* New York City supports ten felony ATI programs that specialize in one of four subpopulation groups. Our research covered nine of these: Freedom (general population); Crossroads, El Rio, Flametree, and Project Return (substance abusers); Crossroads, DAMAS, Hopper Home, and Project Return (women); the Court Employment Project and the Youth

Advocacy Project (youth).<sup>10</sup> Throughout this report we discuss the ATI programs within the four program groups. The figures we present for our study sample as a whole are not representative of the ATI system because we over-sampled within certain of these groups to obtain sufficient numbers of women and youth. In addition, two programs—Crossroads and Project Return—are substance abuse treatment programs for women and are included in both the women’s program group and the substance abuse program groups.

*Methods and Data.* Our research was conducted between September 1997 and March 2001, and data were collected between January 1998 and May 2001. We used a multiple-method design involving a detailed examination of a sample of participants, structured program observation and file review, the construction of a matched sample for comparison purposes, structured interviews with multiple officials in the ATI system, and rearrest and reconviction analysis of participant and comparison groups.

We conducted 687 baseline interviews and 378 follow-up interviews with ATI participants over a three-year period. Researchers attempted to interview every participant who entered the ATIs during the study period. However, because we interviewed people who were in the ATIs, the research sample is less likely to include participants who failed to attend the programs regularly in the six weeks after entry. Respondents were tracked and approached for a second interview after three months in the program.<sup>11</sup> In order to measure program retention, research staff conducted a case file review for each participant who was interviewed at least once. Table 1a describes the data and methods used to respond to each of the research questions. Appendix B provides a full description of the research methodology, how we addressed challenges such as the four-year time frame, and the research instruments.

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<sup>10</sup> Each of the ATI programs is run by a larger agency: Freedom by the Fortune Society, Crossroads by the Center for Community Alternatives (CCA), El Rio by the Osborne Association, Flametree by the Fortune Society, Project Return Intensive Treatment for Women by Project Return, DAMAS by the Fortune Society, Hopper Home by the Women’s Prison Association, CEP by the Center for Alternative Sentencing and Employment Services (CASES), and YAP by CCA. Crossroads and Project Return serve female substance abusers. A tenth program, STEPS, which serves women who are victims of domestic abuse and who attacked their abusers, was not included in this research due to the unique character of the offenses committed by participants in that program.

<sup>11</sup> Research interviewers received weekly updates about program intake from each of the ATI programs in the research. Interviewers went to each ATI weekly or more often, depending on the number of potential interviews. To maximize intake, we conducted baseline interviews with program participants up to six weeks after entry. The baseline interview was designed to assess participant status around entry into the criminal justice system, after six weeks program participation could be expected to affect participants’ memory and response. ATI participants were not interviewed if they did not show up at the ATI program, refused to consent to the research, were not on site when an interviewer was available, or—for participants under the 18—if parental consent was not obtained. We decided to conduct follow-up interviews after three months in consultation with ATI program administrators who thought that three months would be the time when participants were most likely to be integrated into the program, so that a one week snapshot of services would be most revealing of program structure. Interviews were conducted primarily in English, but respondents who spoke only Spanish were interviewed by bilingual research assistants.

**Table 1a: Study Data**

<b>Research Question</b>	<b>Data Source</b>	<b>Collection Period</b>	<b>Collection Method</b>
Who enters the ATIs?	Judicial interviews; Prosecutor interviews; Defense interviews	Mar. 1998-May 1998 April 2000-May 2000	Confidential open-ended interviews conducted by senior research staff.
	Participant interviews	Feb. 1998-Jan. 2001	Confidential structured interviews conducted by research staff.
	New York Criminal Justice Agency pretrial release interviews	Feb. 1998-Jan. 2001	Record transfer using individual identifiers.
Are ATIs implemented with integrity?	Program observations	Mar. 1998-May 1998 Oct 1998-Mar. 1999 Jan. 2000-July 2000	Structured observation and open-ended interviews with program staff conducted by senior research staff.
	Staff interviews	Mar. 1998-May 1998 Feb. 2001-May 2001	Structured interviews with senior program staff.
	Program file review	Feb. 1999-Feb. 2001	Structured data collection from program files.
	Three-month participant follow-up interviews	May 1998-Jan 2001	Confidential structured interviews conducted by research staff.
Do ATIs compromise public safety? Do ATIs rehabilitate participants?	New York State Division of Criminal Justice Services; New York City Department of Correction; New York State Department of Correctional Services	Dec. 2000-May 2001	Record matching using individual identifiers.

Extensive background information was collected on the entire sample using a modified version of the Addiction Severity Index (ASI), a standardized instrument that served as our Time 1 interview. The ASI questionnaire covers a range of areas of personal and family history

including educational, employment, medical, mental health, criminal justice, and substance abuse history.

The follow-up interview served two primary purposes: to assess the participant's circumstances in such areas as residential stability, familial relationships, drug use, and medical and mental health and to provide quantitative information on the content and frequency of services at each site. These interviews were constructed for this research using modified versions of several standardized instruments including the ASI, the Treatment Services Review (TSR), and the Community Oriented Program Environment Scale (COPES).<sup>12</sup> The Time 2 interviews asked participants about their life circumstances in the 30 days prior to the interview, about the services they received in the week prior to the interview, and about their perceptions of the program environment. As with the Time 1 interviews, the Time 2 interviews elicited participants' own reports of their current needs, past experiences, and program experiences.

Program case files were used to obtain attendance and completion information on the 591 research participants who had left the programs by the end of our data collection. Arrest and conviction analyses relied on official criminal records from the New York State Division of Criminal Justice Services (DCJS), the New York City Department of Correction (DOC), and the New York State Department of Correctional Services (DOCS); information about pre-trial defendants was obtained from the New York City Criminal Justice Agency (CJA).

We supplemented these quantitative data sources with field visits to the programs and a series of interviews with participants in the ATI system. In order to assess judicial and prosecutorial decision making, Vera researchers developed a qualitative interview protocol using structured open-ended questions designed to elicit detailed information about perceptions of the ATIs and their use. We interviewed a non-random sample of judges, prosecutors, and defense attorneys working in the four city boroughs that use the programs included in this study. CJA staff and ATI program intake coordinators advised us on use of the ATIs by judges. We then selected a minimum of three judges in each jurisdiction based on their frequency of ATI use and knowledge of the programs. Each prosecutor's office has a chief of narcotics who was interviewed or referred Vera researchers to an assistant prosecutor. We also interviewed four defense attorneys, one in each borough except Staten Island, including staff attorneys at the Legal Aid Society and the director of the Bronx Defenders Service.

*Relationship to Previous Reports.* During the course of this study, the Vera Institute has issued several preliminary reports including a study of the misdemeanor ATI system. This report is

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<sup>12</sup> A.T. McLellan, L. Lubrosky, J. Cacciola & J. Griffith, "New data from the Addiction Severity Index: Reliability and validity in three centers," *The Journal of Nervous and Mental Disease*, 173 (1985): 412-423. A.T. McLellan, A. Alterman, J. Cacciola, D. Metzger & C.P. O'Brian, "A new measure of substance abuse treatment: Initial studies of the treatment services review," *The Journal of Nervous and Mental Disease*, 180 (1992): 101-110. R. Moos, *Community Oriented Programs Environment Scale: Development, Applications, Research*, Third Edition. Palo Alto, CA: Mind Garden, 1996.

intended to stand on its own, but copies of the preliminary reports are available from the Vera Institute of Justice.<sup>13</sup>

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<sup>13</sup> The women's substance abuse programs are included in the findings for both substance abusers and women. Some of the findings differ from those included in our earlier reports because the research sample now includes a larger portion of women and youth.

## Chapter Two: Who Gets an Alternative to Incarceration?

### The Placement Process

The most striking thing about alternative sentencing in felony cases is that it does not occur at any particular moment in the legal proceedings. Only occasionally is an offender sent into the ATI system at a straightforward sentencing hearing following a conviction.

Instead, offenders enter alternative-to-incarceration programs whenever judges order them to do so: before a plea of guilty, after plea but months before formal sentencing, or actually at the sentencing itself. The decision to send an offender into the ATI system is embedded in a negotiation process that involves judges, prosecutors, defense attorneys, and ATI court representatives and begins when the defendant is first brought to court.

In this chapter, we describe the process by which felony defendants enter ATI programs. Based on interview data, we describe the perspectives of the judges, prosecutors, and defense attorneys. We then describe the characteristics of the cases that enter the ATI system through this process, including the reduction in charges through plea bargaining and case disposition in court. Finally, we describe the personal characteristics of the offenders who enter the system and the problems with which they are coping during their participation in ATI programs.

*Case Targeting and Screening.* The ATI screening process focuses first on finding felony cases in which defendants are likely to receive incarceration in the absence of the program. The suitability of defendants for particular programs is then determined by their gender, age, and individual needs.

Since 1997, the process has begun with the Criminal Justice Agency (CJA) using statistical models to target new felony arrestees who are predicted to receive sentences of at least 180 days in jail.<sup>14</sup> The targeting criteria include criminal history and case factors such as the severity of the charge against them and the amount of bail that has been set.<sup>15</sup> Court representatives then screen defendants from the lists generated by CJA along with other candidates identified by judges, prosecutors, and defense attorneys.

At the beginning of our research, court representatives from CJA's Central Court Screening Service screened defendants for seven of the ten programs that comprise the ATI system for felony defendants.<sup>16</sup> Several of the programs also maintained their own representatives in court

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<sup>14</sup> In the 1997 Request for Proposals and the subsequent contracts, the Criminal Justice Coordinator identified this felony target group as "Model C" defendants. Model A and Model B defendants were those misdemeanor cases who would get 20-45 and 46-180 day sentences, respectively.

<sup>15</sup> In response to changes in the city guidelines over time and the need to update the sentencing data used for modeling, CJA revised the targeting categories derived from the criteria based on new statistical models. CJA implemented the changes for computer-targeted felony cases on February 15, 2000. See Mary A. Eckert and Mari Curbelo, *Alternative-to-Incarceration Information Services Third Quarter Fiscal Year 2000: Third Quarter Report*. New York: Criminal Justice Agency, May 2000.

<sup>16</sup> Crossroads and Hopper Home did not receive CCSS referrals. STEPS received CCSS-generated targeting information, but no direct referrals.

during this period. Since the spring of 1999, when the city closed the Central Court Screening Service, the programs have employed their own representatives in the courts to find and screen cases on a daily basis. All “computer-targeted” cases appear on court-date lists provided to the programs by CJA, which tailors the lists to the populations served by each program. Court representatives use these lists, as well as court calendars, to isolate defendants for further screening when they appear in court on a specific date. Judges, defense attorneys, and prosecutors continue to refer cases to the ATI court representatives who then estimate the likely sentence in the case before proceeding.

According to ATI program administrators, the court representatives employed by the programs rely to a greater extent than did CJA representatives on interpersonal relationships with court staff, judges, and prosecutors as a way to identify defendants who are likely to receive custodial sentences. Unlike CJA’s representatives, some program representatives include defendants who are not detained among those they screen. These defendants are far less likely than detained defendants to receive sentences of incarceration, but there is certainly some small percentage among them who do.<sup>17</sup> The variation in targeting reveals that the ATI system is still struggling to create a rigorous method of identifying sufficient numbers of cases that truly are jail-bound and can be reliably diverted from jail.<sup>18</sup>

After targeting, court representatives interview defendants, continuing the screening process to assess whether a particular program meets the defendant’s needs.<sup>19</sup> The programs use a standard, four-page interview developed by CJA, supplemented with additional questions. Using this information, court representatives decide whether to advocate for ATI placement in specific cases. Court representatives from organizations that operate more than one program serving felony offenders screen cases for all their organization’s programs.<sup>20</sup>

*Plea Negotiations and Sentencing.* Having decided to advocate for an ATI placement, the court representative becomes immersed in the plea bargaining process. Nearly all criminal cases in New York City are disposed by plea bargains rather than trials. Pleas are reached through negotiations between defense attorneys, who seek to have the charges reduced and a

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<sup>17</sup> Winterfeld (1992). Several of the ATI program managers say that detention is an important predictor of likely incarceration, but that other case and individual factors also affect sentencing and can indicate likely incarceration even when a defendant is not detained.

<sup>18</sup> The recruitment of our research sample overlaps with the 1999 changes in the ATI system’s screening and court-monitoring procedures. While a detailed analysis of the impact of these changes on the ATI population has not been conducted, limited analyses suggest that these changes do not substantially affect our findings. For a comparison of cases in this study referred under CCSS with those referred after CCSS closed see: R. Kramer, D. Young, & R. Porter, *Alternative to Incarceration Programs for Felony Offenders in New York City*. Vera Institute of Justice, 2000.

<sup>19</sup> With the close of the Central Court Screening Service, the program representatives generally make judgments only about a defendant’s match to their own programs. In some courts, however, such as the Bronx Treatment Court, the screening function is rotated among several programs, with only one program having a presence in court on a given day.

<sup>20</sup> Two ATIs, the Court Employment Project and the Youth Advocacy Project, also have Family Court programs, which conduct separate targeting and screening activities.

light sentence imposed, and prosecutors, who generally aim to maintain the highest charge and impose the toughest sentence. The involvement of judges in the plea negotiation process varies from case to case.

ATI placements are most often negotiated as a condition of a deferred sentence. The defendant admits guilt to a specific offense and agrees to a specific term of incarceration, but the judge holds the sentence in abeyance, permitting the offender to attend an ATI program. The defendants agree that if they fail in the program, they will be sentenced under the agreed sentence. In negotiating such plea agreements, prosecutors and some judges insist that the defendants plead guilty to charges that carry lengthier sentences than the charges they would offer without the ATIs. They believe the harsher sentence provides the “stick” needed to encourage defendants to remain law-abiding while attending the ATI program. If the offender completes the ATI program successfully, the court voids the original guilty plea. At that point, the judge will either dismiss the case or permit the offender to plead guilty to a lesser offense with a sentence of “time served” or probation.

In addition to the deferred sentence, judges have two less common mechanisms for placing offenders in ATI programs. First, a judge may order placement as part of a sentence. This might be commonplace if not for the fact that B-felony charges, which include robbery and sale or possession of controlled substances, are the most common felony charges initially brought against adult defendants, and they require a sentence of incarceration. To sentence such a defendant to an ATI program directly, the judge would need the prosecutor to reduce the charge to a C, D, or E-felony that permits a non-custodial sentence.

Second, a judge may order a defendant into an ATI as a condition of release from detention even before the defendant has entered a plea. This might occur if the prosecutor is insisting on a plea to a B-felony. The judge could release the defendant, mandate ATI attendance, and adjourn the case for several months. In this way, the judge would hope to show the prosecutor that the defendant is suitable for ATI placement and convince the prosecutor to accept a plea to a lesser charge.

Still other factors affect ATI placement of those 14- through 18-year-olds who are eligible for “youthful offender status” under New York law. Youthful offender, or “YO,” status is a legal designation available to defendants once in their lives. It exempts them from mandatory prison sentencing even on B-felony charges and allows their case processing records to be sealed. With a felony conviction removed from the public record, any subsequent felony offense is treated as a first-time offense—a critical designation since state law mandates a prison sentence for a repeat (or “predicate”) offender. Judges have discretion in granting YO status within statutory guidelines. When they grant YO status, they can make placement in an ATI a condition of the sentence without prosecutor approval, even following a plea to a B-felony charge.

*Court Decision-Making.* Our interviews with judges, prosecutors, and defense attorneys revealed that judges vary in the extent to which they seek or thwart ATI pleas, depending on their personal beliefs, professional experiences, and relationships with court representatives. None of the judges we interviewed referred to any particular policy that guided ATI decision-making, and none reported any significant discussion among peers about the process of assessing risk to public safety or a defendant's potential success in treatment. Few judges and virtually no prosecutors expressed strong views about the effectiveness of specific ATI programs in reaching and rehabilitating offenders. Any preferences judges and prosecutors expressed for specific programs usually were the result of their personal familiarity with the court representatives of those programs.

Nevertheless, the judges and prosecutors we interviewed used common language to describe the defendants whom they would be unlikely to place in an ATI program. Because their primary concern is that offenders placed in ATIs might threaten public safety, they are likely to exclude defendants whose charges include violence or the use of weapons. They are much less likely to offer an ATI placement to repeat felony offenders or to those with violent histories. But some prosecutors report that they exclude defendants with a single violent arrest charge while others rely only on convictions. Some say that they are less likely to offer placement to those with histories of absconding or violating probation or parole. Prosecutors in particular are less likely to agree to an ATI for an offense they believe has great public visibility such as a drug crime near a school, drug dealing in a grocery, or any offense in a community that has been complaining about similar offenses.

Conversely, some prosecutors and many judges said they are more willing to use ATIs when the defendant appears to have committed the offense under the influence of illegal substances or to support an addiction. Prosecutors said they might consent to a charge reduction in order to avoid going to trial, especially when they want to protect a witness or when the evidence against the defendant is weak.

Judges and prosecutors told us that they also consider a defendant's personal circumstances, including motivation for treatment, mental stability, family ties, and vocational history. They also take into account a defendant's appearance and attitude and the presence of family in the courtroom. The defense attorneys we interviewed uniformly told us that they also consider their clients' motivation because, if they fail the ATI program, they could receive a longer custodial sentence than they would receive absent the ATI. While some judges said they would not sentence violent offenders to community-based programs, others told us that they are comfortable using those programs that include reliable supervision such as curfews and drug testing.

A few judges expressed interest in the particular elements of ATI programs that manage the risk of re-offending. For the most part, however, we found little evidence that judges were aware of the procedures the ATI programs use to prevent re-offending.<sup>21</sup> Instead, those judges

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<sup>21</sup> In 1996, the Unified Court System's Committee on Alternative Criminal Sanctions reported that judges feel they lack sufficient information about individual ATI programs. Committee on Alternative Criminal Sanctions,

and prosecutors who could distinguish the ATI programs, which are primarily non-residential, from long-term residential drug treatment programs, preferred the more restrictive and longer residential programs.<sup>22</sup> In explaining their preference, many described the ATIs as less secure and posing greater risks to public safety. Offenders in ATI programs, they reasoned, spend much time out of the program and are likely to remain in the same communities where they have obtained drugs and committed crimes in the past. Others saw a secure treatment setting as necessary for punishment rather than public safety. They used terms like difficult, rigorous, and intensive to describe the regimen of the residential therapeutic communities, and they pointed out that these programs usually require residence for a year or more, which some likened to a jail sentence.

Other recent research in New York City has found that judges and prosecutors with extended exposure to outpatient treatment, such as those who work in drug courts, may be more willing to endorse non-residential programs.<sup>23</sup> In the ATI system, however, where defendants typically face longer sentences, and judges and prosecutors have less routine exposure to the programs themselves, many appear to consider ATIs as neither particularly punitive nor effective in preventing re-offending.

That makes the job of court representative very difficult. As several ATI program administrators told us, court representatives must identify large numbers of cases that are serious enough to incur a sentence of at least six months incarceration yet still be within the range that prosecutors are willing to “give up” to the ATI. Notably, few judges and no prosecutors expressed interest in the cost savings associated with using ATI programs instead of incarceration.

These findings suggest that court actors use ATIs for offenders they think are unlikely to reoffend. Judges and prosecutors did not cite such traditional reasons for using ATIs as the rehabilitation of offenders who cycle through the criminal justice system or the reduction of costly incarceration rates. When judges and prosecutors do place offenders in the ATI system, it is because they do not think of the offenders as violent, they see signs that the offenders are motivated, and—most important—they have a good relationship with the ATI court representatives.

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*Report of the Unified Court System’s Committee on Alternative Criminal Sanctions.* New York, 1996. This was not the primary focus of our research, but our interviews with judges suggest that the problem may be less the availability of this information than its practical relevance to the decisions they make.

<sup>22</sup> Judges, again with the assistance of prosecutors, can sentence offenders who need drug treatment to long-term residential drug treatment programs known as therapeutic communities through the DTAP program and TASC. Both serves as brokers between the courts and private drug treatment, providing referral, case management, and court reporting.

<sup>23</sup> R. Porter, *Treatment Alternatives in the Criminal Court: A Process Evaluation of the Bronx County Drug Court.* Vera Institute of Justice, 2001. D. Young, R. Shacklet, T. Ireland, *How, When, and Why: The Utilization of New York State’s Willard Drug Treatment Program.* Vera Institute of Justice (to be released).

## **The Offenders**

*Criminal Charges and Initial Detention Status.* We used pretrial data from CJA to examine plea negotiation and detention. A high proportion of the offenders placed in the ATI system are charged, at least at their initial arraignments, with quite serious crimes. Of the sample we studied, more than half in each of the four program tracks were originally charged with a B-level felony; about 80 percent of those in the substance abuse and women's programs were charged at this level. The ability of the ATI system to enroll offenders charged with these serious felonies is particularly impressive in light of the restrictions that judges and prosecutors say they place on admission. (See Table 2a.)

The program participants were almost all charged with drug offenses or robberies, but the division between these categories varied across the program tracks. Drug-related charges ranged from 78 percent in the substance abuse programs to 21 percent in the youth programs. Robberies ranged from a high of 58 percent of the charges in the youth programs to a low of nine percent in the women's programs. None of the other charge categories accounted for even 10 percent of the cases in any program group.

Not only were the great majority of ATI participants charged with high-level felonies, but a very high proportion also were detained (usually on bail they could not pay) at their first court appearances. Even the women's programs, whose participants were most likely to have been released on their own recognizance, still enrolled three-quarters of their participants from among those who had been detained or held on bail at the start of their cases. These high percentages suggest again that the programs were able to enroll offenders whom judges and prosecutors were treating seriously.

Even after plea bargaining, and after the defendants have entered ATI programs, the charge levels remain quite high, with almost half of the participants in substance abuse, women's, and youth programs pleading guilty to B-level felonies. The exception among the program tracks is the general population program, where less than a third entered pleas to B-level charges. These data are difficult to interpret, however, because the meaning of a disposition varies depending on how the participant entered the ATI program. Some of these disposition charges will be vacated if the participant completes the program, while others represent the final disposition. Except for those with YO status, participants who plead guilty to B-level felonies must have those convictions undone in order to avoid a mandatory prison sentence.

**Table 2a: Case Processing of Arrest Leading to ATI Admission**

<b>Variable Description</b>	<b>Total Sample<sup>24</sup></b> <b>%</b>	<b>Adult General Population</b> <b>%</b>	<b>Substance Abuse Programs</b> <b>%</b>	<b>Women Offender Programs</b> <b>%</b>	<b>Young Offender Programs</b> <b>%</b>
<b>Top Charge at Arraignment<sup>25</sup></b>	(N=638)	(N=148)	(N=268)	(N=168)	(N=152)
Robbery	26	26	10	9	58
Assault	4	4	3	6	6
Weapons	4	9	1	1	5
Other Violent Crimes	1	1	0	0	5
Burglary	5	7	4	4	3
Drug Related	56	50	78	77	21
Other	4	3	5	4	2
<b>Top Charge Level at Arraignment</b>	(N=638)	(N=148)	(N=268)	(N=168)	(N=152)
Felony A	1	0	1	2	0
Felony B	72	62	81	80	65
Felony C	13	17	7	3	21
Felony D	12	20	8	11	12
Felony E	2	1	2	2	1
Misdemeanor/Violation	1	1	1	1	1
<b>Detention Status at Arraignment</b>	(N=638)	(N=148)	(N=268)	(N=168)	(N=152)
Remanded/detained	1	0	1	2	0
Bail not made/detained	82	85	80	73	86
Bail made/released	3	3	2	4	2
ROR	15	13	17	22	13
Sentenced	0	0	0	0	0
<b>Disposition Charge Level</b>	(N=602)	(N=141)	(N=254)	(N=156)	(N=144)
Felony A	0	0	0	0	0
Felony B	43	28	47	47	46
Felony C	29	33	29	30	29
Felony D	21	33	17	14	19
Felony E	6	6	6	5	5
Misdemeanor/Violation	2	0	2	3	1

<sup>24</sup> The sum of the groups is greater than the total because women in substance abuse programs are counted twice.

<sup>25</sup> Arraignment reflects Criminal Court Arraignment.

*ATI Participant Background Characteristics.* Findings from the baseline interviews show that participants in the ATI system struggle with social and economic disadvantages in addition to facing serious criminal liability. The programs operate from the assumption that they must address some or all of these problems in order to prevent participants from committing more crimes. Moreover, the separate program tracks for substance abusers, women, and youth were created in the belief that the problems among these groups would be distinct, allowing each program to concentrate on a slightly different mix of problems.

Our research confirms that the separate program groups generally attracted the participants for whom they were intended. The youth programs enrolled participants on average just over 17 years old; in the other program groups the average ages ranged between 24 and 33. The women’s programs naturally enrolled all women, but this appears to have resulted in the youth and general population programs enrolling almost no women. It is particularly notable that the general population group was, in effect, exclusively male and also significantly younger on average than either the substance abusers’ or women’s groups. This may indicate the reluctance of judges and prosecutors to use ATIs for adult men, possibly because of their more extensive criminal histories.

The programs for substance abusers and the women’s programs for substance abusers attracted many more participants with prior drug treatment than did the other programs as well as many more who told researchers that they needed drug treatment. (See Tables 2b and 2c).

**Table 2b: Demographic Characteristics of Research Sample**

<b>Background Variables</b>	<b>Total (n=687)</b>	<b>General Population (n=152)</b>	<b>Substance Abusers (n=302)</b>	<b>Women (n=194)</b>	<b>Youth (n=161)</b>
Age: Mean	26.5	24.9	31.3	32.6	17.4
Median	21.5	21.1	31.1	33.5	17.6
Percent Male	67%	99%	54%	0%	91%
Race/Ethnicity:					
Latino	38%	37%	41%	43%	29%
African-American	50%	51%	46%	43%	63%
White	4%	3%	6%	6%	1%
Other	8%	9%	7%	8%	7%
Percent Married	11%	13%	14%	13%	1%

**Table 2c: Substance Abuse History of Research Sample**

<b>Background Variables</b>	<b>Total (n=687)</b>	<b>General Population (n=152)</b>	<b>Substance Abusers (n=302)</b>	<b>Women (n=194)</b>	<b>Youth (n=161)</b>
Any prior admission to drug treatment	27%	15%	45%	47%	6%
Used heroin, cocaine past 30 days	16%	9%	26%	23%	1%
Used marijuana past 30 days	44%	46%	39%	28%	56%
Marijuana users reporting daily use	46%	39%	56%	54%	40%
Prior IV drug use	6%	5%	9%	14%	0%
Reports need for alcohol treatment	10%	6%	18%	12%	1%
Reports need for drug treatment	29%	20%	47%	43%	4%

The findings on drug use just prior to arrest suggest that defendants who enter the ATIs are much more likely to use marijuana than cocaine or heroin. Respondents from all programs reported notable, if not unexpected, marijuana use. Approximately half the general population and youth groups reported recent marijuana use, and approximately 20 percent of each group reported using marijuana daily at the time of arrest. Participants reported modest heroin or cocaine use in the previous 30 days, and predictably these rates were higher in the substance abuse and women’s groups. More people in the substance abusers’ and women’s programs reported that they needed drug treatment than in the other two groups, but one in five of those entering the general population program also reported a need for drug treatment. These findings indicate the relative success of the drug treatment programs in targeting defendants who need their services. The data also suggest that participants in the general population and youth groups who regularly use marijuana do not consider it a problem for which they need treatment.

Participants also report a common past involvement with crime. More than half of all the adults and more than a third of the youth report having sold drugs in the past. The youth participants disclosed an average of one-and-a-half prior convictions and four months prior incarceration, quite similar to what the participants in the general population reported. Those in the substance abuse and women’s programs, who are also older, reported an average of more than three convictions and a year or more of past incarceration. (See Table 2d).

**Table 2d: Past Criminal Involvement of Research Sample**

<b>Self-Reported Criminal History</b>	<b>Total (n=687)</b>	<b>General Population (n=152)</b>	<b>Substance Abusers (n=302)</b>	<b>Women (n=194)</b>	<b>Youth (n=161)</b>
Ever sold drugs	56%	64%	64%	54%	36%
Ever arrested as juvenile (< 16 years)	30%	24%	21%	11%	61%
Mean prior convictions	2.3	1.7	3.1	3.7	1.5
Mean months incarcerated	8.5	4.1	13.5	12.0	4.2

*Economic, Health, and Family Circumstances at Entry.* On almost every dimension from health to housing, we found substantial needs among significant proportions of the participants in each program track.

Across the board, their economic circumstances are bleak. Only about a third of the adults—whether in general population, substance abuse, or women’s programs—have earned a high school degree or the equivalent. Low rates of employment and low amounts of earned income characterize the entire ATI sample with those in the women’s programs reporting less engagement with the labor market than any of the other groups. Nearly everyone in the women’s programs was unemployed at the time of the interviews. (See Table 2e).

**Table 2e: Economic Status of Research Sample**

<b>Background Variables</b>	<b>Total (n=687)</b>	<b>General Population (n=152)</b>	<b>Substance Abusers (n=302)</b>	<b>Women (n=194)</b>	<b>Youth (n=161)</b>
High school diploma or GED	29%	32%	38%	36%	6%
Unemployed at time of interview	85%	72%	87%	97%	89%
Mean weeks worked in prior year	11.9	16.7	13.4	6.5	7.2
Mean employment income, past 30 days	\$192	\$281	\$207	\$68	\$132
Depends on others for majority of support	79%	67%	73%	76%	94%

We also found high levels of medical, social, and mental health problems across all four ATI populations in our sample. The percentage of women reporting problems was higher than those in the other program tracks for every category of problem, perhaps because more actually have these problems and perhaps also because they may be more willing to disclose them during interviews. Nevertheless, the rates are high across the board. For example, half of the women report being bothered by a chronic medical problem, but so do one-in-four in the general population and one-in-five in the youth programs. Another striking finding is that two-thirds of those in women’s programs report a past experience with serious depression and so do about half of the men in all the other tracks. (See Table 2f).

**Table 2f: Medical, Psychiatric, and Family Background of Research Sample**

<b>Background Variables</b>	<b>Total (n=687)</b>	<b>General Population (n=152)</b>	<b>Substance Abusers (n=302)</b>	<b>Women (n=194)</b>	<b>Youth (n=161)</b>
Bothered by chronic medical problem(s)	32%	25%	39%	50%	19%
Experienced emotional abuse in lifetime	31%	28%	38%	51%	13%
Experienced physical abuse in lifetime	19%	14%	26%	38%	3%
Experienced sexual abuse in lifetime	11%	4%	17%	30%	1%
Experienced any abuse in lifetime	34%	32%	41%	54%	14%
Experienced serious depression in lifetime	52%	47%	54%	66%	46%
Had thoughts of suicide in lifetime	18%	13%	23%	29%	12%
Been prescribed psychiatric medications in lifetime	10%	2%	15%	22%	6%
Is very troubled by family problems	19%	17%	22%	23%	14%
Is very troubled by social problems	21%	18%	22%	27%	20%
Is very troubled by psychological problems	29%	20%	32%	45%	25%

## **Summary**

Only a small fraction of the felony offenders in New York City courts receive ATI sentences, but the ones who do typically are charged with serious felonies and have been detained or held on bail when they first appeared in court.

In the absence of legislation, guidelines, or even much conversation among judges or prosecutors about who should be sent to these programs, the role of the ATI court representative has become crucial. While judges and prosecutors are unlikely to send offenders who seem violent or unmotivated, they identify their relationship with the court representative as among the most important factors guiding their decisions. The ATI court representatives have become part of the negotiation process among judges, prosecutors, and defense attorneys.

Defendants enter ATI programs not just at the time of their sentencing, but more often as part of a deal in which the judge agrees to defer sentencing. In some cases defendants enter the programs as a condition of pretrial release before pleading guilty. Whenever they enter their guilty pleas, almost half of the ATI participants are pleading guilty to B-felony charges, meaning that ATI participants face, at least in theory, mandatory prison sentences if they fail in their programs.

The separate program groups appear able to attract appropriate participants, with substance abuse program participants reporting higher drug treatment needs and women reporting more family problems. Nonetheless, the picture across all four program groups is one of great disadvantage and multiple needs. A majority of the offenders in all groups report prior involvement with drugs. Almost all are financially disadvantaged and most do not have a high school degree or consistent employment. The rates of family, health, and social problems are high across all groups.

## Chapter Three: The Integrity of Supervision and Treatment

Probation and parole supervision are often characterized by occasional reporting requirements, drug tests, and curfew checks, but life in the ATI system is meant to be more structured. It is the rigor of the daily or weekly program that is supposed to provide both the punitive and the therapeutic components of an ATI sentence. But there is little actual detail about what services participants receive.

This chapter examines the integrity with which the ATI programs are implemented by examining what services were delivered and how they were perceived by participants. The findings here are from follow-up interviews with 378 participants of the total 687 who entered the research.<sup>26</sup> The interviews asked participants about the amount of services they received in the last week of their third month of programming.<sup>27</sup> Analysis of interview data is informed by the site observations, staff interviews and file reviews we conducted throughout the research period. We examine how thoroughly the programs supervise participants, provide treatment that matches their needs, and hold them accountable.

### **ATI Program Services**

All of the ATIs in this research share a general philosophy of providing services to address whatever needs and problems participants may have and making sure that participants comply with court requirements. Whatever population group they serve, most of the programs offer a similar core of services. These include drug treatment and counseling, life skills classes, general education, job training, and job placement. Many of the programs also provide classes in parenting and HIV education and support. All of the programs provide some material resources for clients throughout their stay including daily lunch, clothing when needed, and occasionally even money. The money must be used for rent, medication, obtaining identification, or emergencies. Staff also provide crisis intervention. Finally, there are regular excursions to museums, parks, and performances for both participants and family members.

Each program supplements and tailors these core services to address the special characteristics of its population group. The general population program provides the greatest flexibility for its participants, reflecting the fact that more than a quarter of them are employed.

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<sup>26</sup> Participants who remained in an ATI program after three months were approached for a second interview. We succeeded in conducting follow-up interviews with 55 percent of the original sample: 62 percent of the general population sample; 41 percent of the substance abuser sample; 62 percent of the women sample; and 41 percent of the youth. The majority of participants who were not interviewed either dropped out or were not on site at the ATIs when interviewers were there. As with the entire research sample, the respondents in the follow-up sample are more likely to be compliant than those not interviewed.

<sup>27</sup> Data presented in this chapter indicates only services received in one week and should be viewed as an indicator of total services rather than as an exact count of total services received. We chose a follow-up time in consultation with ATI program managers, who felt that participants would have a stable case management plan by the third month. Some participants, notably youth, are likely to have received significant referrals earlier in programming, and such referrals do not show up in our follow-up interview.

For example, the program permits participants who have daytime jobs to attend evening counseling instead of full-time day treatment. Programs for women and substance abusers, the populations with the most extensive needs, offer the widest range and highest intensity of services. The programs for youth focus on case management, monitoring, stable activities such as school, and vocational training in each participant's neighborhood, providing fewer on-site services.

Most program services are delivered in small groups, regular classes, and larger group meetings. The small groups usually have a clinical or therapeutic purpose. The regular classes may be small or large and may be didactic (e.g., HIV education) or therapeutic (e.g., anger management) in approach. The large group meetings, held daily or weekly, provide regular monitoring and structure, and address routine issues involving the entire program community, such as staff changes, and other concerns that arise. While staff lead most classes and meetings, some group sessions in the later stages of the programs are led by participants.

Typically, participants are scheduled to meet with case managers and take part in individual counseling at least once a week. If necessary, they are scheduled for additional counseling. These counseling sessions provide the link between group activities and each participant's individual treatment plan.

All group and individual sessions are mandatory; some of them, such as support groups, continue throughout an offender's participation while others are scheduled at specific points in a sequential curriculum. Programs require participants to inform case managers of their activities if they are unable to attend a session and to provide verification of where they were—for example, by showing the paperwork from a visit to an unemployment office. Participants are required to sign in when they arrive at the programs and must receive permission to leave program sites early.

All of the ATIs randomly test participants for drug use. Violation of program rules results in sanctions that range from increased hours of activities and drug testing to return to court. In the case of serious violence or repeated problems, the participant is expelled.

### **The Experience of ATI Participation**

In practice, participants must comply with ATI program requirements while coping with the wide array of problems that characterize their daily lives. For example, while many have stable housing, some do not. Only half to three-quarters of the participants in our study were living with immediate family during this time, with a significant minority of those in the substance abuse, women's, and youth programs living in institutional settings. Many also continue to be treated for physical problems.

Even during their third month in the program, participants experienced family, social, or emotional problems several days in the month. They reduced their use of drugs, although a third of those in the youth group told researchers that they used marijuana at least once in the third month in their programs. Those in the youth programs were also most likely to report having engaged in some illegal activity during the month. (See Table 3a).

**Table 3a: Circumstances in the Third Month of ATI Participation**

<b>Variable Description</b>	<b>Total (n=378)</b>	<b>General Population (n=92)</b>	<b>Substance Abusers (n=109)</b>	<b>Women (n=104)</b>	<b>Youth (n=64)</b>
Living with immediate family	61%	73%	50%	48%	67%
Living in an institution	15%	0%	22%	25%	19%
Changed residence in last 30 days	12%	11%	11%	16%	6%
Mean days experienced serious family/social problems in last 30	2.4	1.9	3.5	2.9	2.2
Mean days experienced emotional problems in last 30	6.3	5.3	8.0	8.9	6.8
Prescribed psychiatric medication in last 30 days	8%	1%	15%	18%	8%
Mean days experienced physical health problems in last 30	3.5	2.7	3.8	5.1	2.2
Treated for physical problems in last 30 days	16%	10%	19%	22%	8%
Drank to intoxication in last 30 days	5%	10%	6%	2%	3%
Used: marijuana	14%	14%	5%	5%	33%
heroin	1%	2%	1%	1%	0%
methadone	2%	4%	0%	4%	0%
crack	1%	0%	2%	1%	0%
cocaine	2%	1%	5%	2%	0%
Engaged in illegal behavior in last 30 days	7%	8%	3%	3%	17%

After three months in the ATI system, the participants generally understand that they are scheduled for some activity virtually every weekday. Moreover, they appear to participate almost every day as required. Those in the youth program report the best attendance, missing on average only one day in a month, while those in all of the adult tracks report closer to three missed days in their third month. (See Table 3b).

Participants spend much of their program time in group activity. As Table 3b shows, participants in the general population program reported attending an average of eight group counseling sessions in the week before we interviewed them and spending an additional 1.8 hours in individual counseling. Those in the youth programs reported much less group

counseling, perhaps because these participants are more frequently scheduled for activities in their own communities. Those in the substance abuse and the women’s programs report the most group counseling sessions.

**Table 3b: Services Overview**

<b>Variable Description</b>	<b>Total Sample (n=378)</b>	<b>General Population (n=92)</b>	<b>Substance Abusers (n=109)</b>	<b>Women (n=104)</b>	<b>Youth (n=64)</b>
Mean days attended in month	16.3	15.2	17.2	17.1	18.3
Mean days scheduled in month	19.1	18.2	20.3	20.5	19.9
Mean unexcused absences in month	0.5	1.1	0.2	0.3	0.1
<b>Group Counseling Sessions</b>					
Mean group sessions in week	9.0	8.0	16.4	13.6	3.1
<b>Individual Sessions</b>					
Mean hours in counseling sessions in week	1.6	1.8	1.5	1.4	1.9
<b>Assistance</b>					
Received material assistance since enrollment	26%	17%	32%	40%	25%
Received assistance in coordinating benefits since enrollment	21%	14%	34%	31%	16%

Less than half the participants in each of the four program groups received any material assistance or assistance with their public benefits in their first three months. Those in the women’s and substance abuse programs reported the most assistance, which may reflect higher levels of needs among the women and substance users, a greater willingness to seek such assistance, or different policies or practices among the staff of these programs.

*Group Sessions and Individual Counseling.* All of the programs offered group sessions and individual counseling to address the common issues faced by participants when they enter the ATIs: education and employment, substance abuse, mental health and family functioning, and legal services. But the program tracks vary in the emphasis they place on these different topics. By focusing on a single week of activity in a participant’s third month of an ATI program, we can see these differences among the program tracks.

Education and job training were the focus of more group work in the substance abuser, general population, and women’s programs than in the youth program. At the same time, the

youth programs provided more individual counseling on these topics than did the substance abuse and women’s programs. The general population participants received the most group sessions on education and job training and almost as many individual counseling sessions as did those in the youth programs. Recipients of these services in the general population were more likely to describe them as very helpful than were those in the youth programs. (See Table 3c.)

**Table 3c: Educational and Vocational Services in One Week of ATI Participation**

<b>Service</b>	<b>Total Sample (n=378)</b>	<b>General Population (n=92)</b>	<b>Substance Abusers (n=109)</b>	<b>Women (n=104)</b>	<b>Youth (n=64)</b>
<b><i>Group Sessions</i></b>					
<b>Education or Job Training</b>					
Mean group sessions	1.2	1.4	1.4	1.3	0.8
Referred to outside services	6%	1%	8%	9%	6%
Judged sessions very helpful (number responding)	65% (200)	69% (55)	63% (73)	66% (59)	59% (22)
<b>Job Placement</b>					
Mean group sessions	0.7	0.8	1.0	0.7	0.3
Referred to outside services	2%	0%	3%	5%	2%
Judged sessions very helpful (number responding)	69% (111)	73% (30)	65% (49)	67% (36)	73% (11)
<b><i>Individual Sessions</i></b>					
<b>Education or Job Training</b>					
Received counseling	62%	67%	55%	56%	69%
Referred out for counseling	13%	7%	19%	19%	16%
Judged sessions very helpful (number responding)	75% (248)	80% (64)	76% (67)	83% (66)	69% (45)
<b>Job Placement</b>					
Received counseling	38%	41%	35%	28%	48%
Referred out for counseling	7%	4%	6%	9%	9%
Judged sessions very helpful (number responding)	74% (153)	78% (41)	81% (42)	76% (33)	76% (29)

The low number of group sessions on education and job training in the youth programs may reflect the preference within this group for using schools and other services in their own communities. Yet the participants in the youth programs reported attending school or job training—including those in their communities—only an average of 8.9 days in their third month in the program and working only an average of four days in the month. About half of the participants in the youth program received individual counseling regarding job placement in a single week, the highest rate among the program tracks. (See Tables 3c and 3d).

**Table 3d: Employment and Training in the Third Month of ATI Participation**

<b>Variable Description</b>	<b>Total (n=378)</b>	<b>General Population (n=92)</b>	<b>Substance Abusers (n=109)</b>	<b>Women (n=104)</b>	<b>Youth (n=64)</b>
Mean days worked in last 30 days	4.2	8.2	2.3	0.9	4.0
Mean days in school or job Training in last 30 days	5.2	4.5	1.9	3.7	8.9

Drug testing and treatment is an integral part of all the ATI programs. The substance abuse programs conduct random drug tests several times each week. The general population, women’s, and youth programs test participants selectively based on various indications of use or risk. Respondents in the substance abuse programs report the highest average number of weekly drug tests (3.3) followed by those in the women’s programs (2.7) and the general population (0.6). Of the respondents in these three groups who were drug tested, very few (six percent or less) reported positive results. Program staff confront participants who test positive for substance use and inform the court of the drug test results, but a single positive test does not amount to program failure.

Participants in the substance abuse programs reported receiving the most drug treatment services (5.8 sessions in the week preceding the second interview) followed by the women’s programs (4.6 sessions) and the general population program (3.1 sessions). We found this same pattern in the number of participants who reported discussing these issues during individual counseling sessions. In addition, participants in the substance abuse and women’s programs reported higher rates of referrals to group and individual drug treatment services than those in the general population program. The generally high utility ratings indicate that the participants find this programming helpful. (See Table 3e.)

**Table 3e: Drug Treatment Services in One Week of ATI Participation**

<b>Service</b>	<b>Total Sample (n=378)</b>	<b>General Population (n=92)</b>	<b>Substance Abusers (n=109)</b>	<b>Women (n=104)</b>	<b>Youth (n=64)</b>
<i>Mean drug/alcohol tests</i>	1.6	0.6	3.3	2.7	1.2
<i>Reported one or more positive drug tests</i>	8%	6%	6%	3%	21%
<b>Group Sessions</b>					
<b>AA/NA</b>					
Mean group sessions	0.5	0.6	0.6	0.3	0.2
Referred to outside services	12%	1%	27%	26%	6%
Judged sessions very helpful (number responding)	71% (160)	63% (27)	70% (90)	80% (66)	73% (11)
<b>Relapse Prevention</b>					
Mean group sessions	0.7	0.6	1.3	1.1	0.1
Referred to outside services	6%	1%	8%	9%	11%
Judged sessions very helpful (number responding)	72% (191)	63% (49)	77% (82)	83% (66)	85% (13)
<b>Education</b>					
Mean group sessions	0.8	0.9	1.3	1.1	0.4
Referred to outside services	6%	1%	7%	8%	11%
Judged sessions very helpful (number responding)	75% (186)	63% (49)	84% (76)	89% (65)	69% (16)
<b>Other Drug Treatment</b>					
Mean group sessions	1.3	1.0	2.6	2.1	0.4
Referred to outside services	5%	0%	9%	9	8%
Judged sessions very helpful (number responding)	74% (167)	79% (42)	75% (72)	80% (55)	73% (15)
<b>Total Mean Group Topic-Units</b>	<b>3.3</b>	<b>3.1</b>	<b>5.8</b>	<b>4.6</b>	<b>1.1</b>
<b>Individual Counseling</b>					
Received drug treatment Counseling	33%	24%	38%	37%	34%
Referred out for counseling	5%	0%	6%	8%	8%
Judged sessions very helpful (number responding)	80% (135)	86% (22)	80% (46)	86% (42)	70% (23)

The youth programs again show a different pattern. A majority of these participants had reported marijuana use at intake; about a third reported continued use at least once in their third month in the program, and about one in five of those who reported a drug test also reported

failing it. Yet these participants also report fewer group sessions touching on substance abuse (an average of 1.1 groups in the week preceding the second interview), which may be attributable to the fact that they spend less time per day at their programs. A third of the participants in the youth program report discussing drugs during individual counseling, about the same as participants in the women's and substance abuse programs. It may be a cause of concern, however, that fewer in the youth programs rate this individual counseling as very helpful.

The ATI programs all try to meet the mental health needs expressed by a significant minority of program participants at admission. The programs generally address these concerns by creating treatment plans that take into account the diverse needs of these participants. Staff members tell us that they believe psychological and family problems are partially responsible for both substance use and criminal activity. Counseling that addresses these underlying issues is therefore an integral part of ATI treatment, particularly for women and substance abusers.

The participants in the substance abuse programs report the highest number of mental health group sessions in one week of participation (5.3 sessions). The clients in the women's programs report slightly fewer, because they receive less relaxation therapy and/or acupuncture than the substance abusers. The general population and youth said they receive far fewer group mental health services. Those in the women's programs were most likely to receive or be referred out for individual counseling, followed by those in the substance abusers and youth programs. Most of the mental health services were given high utility ratings except for the relaxation therapy and acupuncture groups, which received some of the lowest scores of any service we studied. (See Table 3f).

Participants in the women's and substance abuse programs report the greatest number of weekly group sessions addressing family problems (about two in a week). Women also were more likely to use their individual counseling sessions to address these problems. Youth were most likely to say they received referrals for family counseling, followed closely by the women and the substance abusers. Participants generally give these services high utility ratings. Those in the youth programs judged individual counseling for both family and mental health issues very helpful a little more than half the time, the lowest of any group, but they gave the outside group sessions to which they were referred the highest ratings.

**Table 3f: Mental Health and Family Services in One Week of ATI Participation**

<b>Service</b>	<b>Total Sample (n=378)</b>	<b>General Population (n=92)</b>	<b>Substance Abusers (n=109)</b>	<b>Women (n=104)</b>	<b>Youth (n=64)</b>
<b><i>Mental Health Services</i></b>					
<b>Group Sessions</b>					
<b>Relaxation Therapy or acupuncture</b>					
Mean group sessions	0.9	0.2	2.3	1.1	0.2
Referred to outside services	4%	0%	6%	6%	9%
Judged sessions very helpful (number responding)	56% (160)	61% (23)	51% (90)	59% (63)	55% (11)
<b>Behavioral Treatment</b>					
Mean group sessions	0.4	0.2	0.8	0.9	0.2
Referred to outside services	2%	0%	2%	3%	5%
Judged sessions very helpful (number responding)	84% (97)	78% (18)	89% (45)	84% (50)	89% (9)
<b>Psychological/Emotional Problems</b>					
Mean group sessions	1.1	0.9	2.2	2.3	0.1
Referred to outside services	3%	0%	5%	5%	8%
Judged sessions very helpful (number responding)	69% (118)	73% (26)	70% (54)	75% (52)	80% (10)
<b>Total Mean Group Sessions</b>	<b>2.3</b>	<b>1.3</b>	<b>5.3</b>	<b>4.2</b>	<b>0.5</b>
<b>Individual Counseling</b>					
Received counseling	35%	24%	39%	53%	39%
Referred out for counseling	6%	0%	7%	2%	8%
Judged sessions very helpful (number responding)	74% (138)	75% (24)	75% (48)	85% (60)	55% (22)
<b><i>Family Services</i></b>					
<b>Group Sessions</b>					
Mean group sessions	0.9	0.7	1.9	2.1	0.2
Referred to outside service	5%	1%	6%	6%	11%
Judged sessions very helpful (number responding)	75% (139)	88% (24)	70% (67)	73% (73)	90% (10)
<b>Individual Sessions</b>					
Received counseling	32%	28%	35%	51%	23%
Referred out for counseling	5%	2%	6%	8%	8%
Judged sessions very helpful (number responding)	72% (178)	73% (37)	76% (58)	81% (70)	61% (31)

We found less variation in the provision of legal services across the program tracks. The substance abuse programs provided the greatest average number of weekly group legal services sessions (average of 1 session in the week) followed by the general population and women’s programs (average of 0.7). Again, the youth programs provided the fewest group sessions (an average of 0.2 in the week). Between one quarter and one third of participants in all four groups used some of their individual counseling time that week to address legal problems. Few say they were referred out for these types of services.

**Table 3g: Legal Services in One Week of ATI Participation**

Service	Total Sample (n=378)	General Population (n=92)	Substance Abusers (n=109)	Women (n=104)	Youth (n=64)
<b>Group Sessions</b>					
Mean group sessions	0.6	0.7	1.0	0.7	0.2
Referred to outside services	2%	0%	1%	2%	3%
Judged sessions very helpful (number responding)	74% (116)	83% (29)	80% (50)	86% (36)	71% (7)
<b>Individual Counseling</b>					
Received legal counseling	33%	29%	33%	31%	28%
Referred out for counseling	2%	0%	0%	2%	6%

*Monitoring and Court Reporting.* In addition to providing on-site services and case management, an ATI is required to provide regular progress reports to the court throughout a participant’s enrollment. We spoke with judges and ATI staff about the court-reporting function of the ATIs. We also reviewed case files to examine the frequency of court appearances and the nature of the reports delivered to judges for each case adjournment.

In interviews, judges emphasized the importance of these reports and expressed frustration at hearing about program participants only after a serious infraction had taken place. Many judges voiced a preference for monitoring defendants through direct contact with ATI court representatives rather than a third party. Others, however, praised the ability of some third parties, such as TASC representatives, to provide good reports.

Court reports include information about drug testing, attendance, treatment progress, and infractions. An ATI program may request the judge’s assistance in convincing participants to adhere to program rules, and most judges are willing to address the defendant directly in court. For the most part, however, the ATIs do not use the kinds of graduated sanctions employed

routinely in drug courts, in which the judge places participants who commit infractions in jail for short periods of time.

The courts issue bench warrants when defendants abscond from ATI programs or fail to appear at a regular court hearing. Individuals returned on bench warrants (or, more commonly, in detention for another crime) can be sentenced as specified under the original plea agreement. Those who fail in the programs for reasons other than absconding—such as not complying with program rules—may be given an opportunity to attend another program or may be sentenced. Our research did not include an examination of the penalties imposed by the courts for a participant’s failure in an ATI program.<sup>28</sup>

*Program Environment.* The experience of participation in the ATI system is not simply defined by program attendance, the types of services received, and occasional appearances in court. It also embraces the daily program environment. We therefore asked participants at the end of three months in the programs to complete a standard instrument, the COPES scale, used to measure the environment in other program settings.<sup>29</sup>

The third dimension of the COPES scale measures the order, clarity, and degree of staff control in the program. From the perspective of courts and government sponsors, this may be the most important dimension of the ATI programs and crucial to their integrity. On this measure, all four of the program tracks scored almost at the top of the scale, suggesting high degrees of organization, clear goals, and strong staff control. Participants clearly perceive the programs as highly structured and supervised.

On the other two dimensions, however, some differences emerge. The first dimension of the scale measures staff-client relationships and therapeutic interactions. Here, all the program tracks scored relatively high except for the youth programs, which scored in the middle of the range. The low scores for spontaneity lowered the overall relationship scores, especially for the youth programs. Participants scored both program involvement and support significantly higher than spontaneity.

The second dimension measures the extent to which the programs encourage personal growth and goal orientation. Here the women’s programs and the substance abuse programs scored highest, helped particularly by their practical orientation and their attention to the feelings and personal problems of their clients. Again, the youth programs scored lowest, with particularly low scores for giving participants opportunities for independent decision-making and leadership, for attending to their feelings and problems, and for tolerating disagreements between participants and staff.

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<sup>28</sup> Such research is important in understanding the costs associated with ATIs and the accountability of the ATI programs, but it involves city and state data review beyond the scope of this research.

<sup>29</sup> The COPES asks respondents to respond true or false to questions about program structure and environment. Responses produce ten scores in three dimensions: relationships, personal growth and system maintenance. The scores range from 0 to 4, with higher numbers indicating stronger perception of the subscale.

**Table 3h: Program Environment Scores**

Dimensions and Subscales	Average Score (Scale = 0 to 4)				
	Total (n=378)	General Population (n=92)	Substance Abusers (n=109)	Women (n=104)	Youth (n=64)
<b>Relationships</b>	<b>2.4</b>	<b>2.5</b>	<b>2.6</b>	<b>2.7</b>	<b>2.2</b>
Involvement	3.2	3.3	3.2	3.4	3.1
Support	2.9	3.0	3.0	3.3	2.7
Spontaneity	1.3	1.2	1.5	1.5	0.8
<b>Personal Growth/Goal Orientation</b>	<b>2.3</b>	<b>2.3</b>	<b>2.6</b>	<b>2.5</b>	<b>2.0</b>
Autonomy	1.7	1.8	2.0	1.8	1.3
Practical	3.2	3.4	3.3	3.2	2.9
Personal Problem Orientation	2.6	2.5	3.0	3.0	2.1
Anger and Aggression	1.9	1.6	2.1	2.1	1.8
<b>System Maintenance and Change</b>	<b>3.5</b>	<b>3.6</b>	<b>3.5</b>	<b>3.6</b>	<b>3.5</b>
Order and Organization	3.6	3.7	3.5	3.5	3.6
Program Clarity	3.7	3.9	3.7	3.7	3.7
Staff Control	3.3	3.3	3.3	3.4	3.4

The items are defined as follows:

Involvement: are clients active in the program

Support: do clients help and support each other and does staff support clients

Spontaneity: does the program encourage open expression

Autonomy: do clients have input on the ways services are structured, can they make independent decisions, take a leadership role

Practical Orientation: do clients learn social and work skills to prepare them for discharge

Personal Problems Orientation: do programs attend to clients' feelings and personal problems

Anger and Aggression: do programs tolerate open arguing among staff or between clients and staff and do they tolerate displays of aggressive behavior

Order and organization: must clients follow directions, e.g., Once a schedule is arranged for individuals, they must follow it

Staff control: do staff keep clients under necessary control.

### Summary

Overall, the ATI system is serving a disadvantaged population with an extensive mix of services and attempts to address individual problems as they arise. From the perspective of the participants and to the extent we could observe the programs, the ATIs are fulfilling their obligation to the courts to supervise and monitor participants. They are conducting drug

testing, enforcing attendance, reporting regularly to the courts, and maintaining highly structured and controlled program environments.

The ATI programs also appear to implement their therapeutic services with integrity. They are delivering a wide range of services to participants in group and individual counseling sessions, as well as referring a substantial minority of participants to outside services. Participants report receiving an average of nine group sessions and one and one half hours of individual counseling each week after three months in the program. At the aggregate level, it appears that the programs respond to the needs suggested in participant background information, and participants generally report high levels of satisfaction with the ATI services. The findings offer a picture of ATI service delivery, but they do not provide comprehensive information about ATI services because the data pertain only to services received in one week by the research sample. Some of the ATI programs point out that their services are most intensive earlier in programming. On the other hand, these findings do not show the services received by participants who do not attend regularly or are no longer in the program.

Participants in the youth programs generally reported the lowest levels of satisfaction. This age group is undoubtedly challenging to supervise and serve; nevertheless, our findings show room for improvement on several measures of program services and environment. Drug treatment, for example, could be more focused on marijuana use, and staff-participant relationships could be strengthened. Our research did not examine the youth programs individually, so some of these problems may be confined to one particular program or another.

## Chapter Four: Completion Rates

Managers of non-residential ATI programs depend on their participants to return to the programs every day. Individual absences may be excused, but persistent absence, a new arrest, or gross violation of program rules usually leads to failure in the program. By contract, the ATI programs studied here were required during this period to keep 55 percent of their participants enrolled through successful completion.

This chapter examines the retention and completion rates for the ATI programs as a whole and for each of the program groups. We analyze the variables—including participant demographic characteristics and criminal history—that are associated with completion. The results show that the retention and completion rates achieved by the ATIs meet the contractual requirements and compare favorably with rates achieved by other treatment and alternative sentencing programs across the country.

### **Retention**

Each ATI program keeps attendance records in individual case files. Vera staff reviewed these files to collect program retention information.<sup>30</sup> All of the ATI programs require at least six months of participation for successful completion.<sup>31</sup> We therefore examined retention in the programs at key intervals up to six months, as well as ultimate completion as defined by each program and in each case. Half of the participants in our study remained in their programs for more than six months. (See Table 4a).

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<sup>30</sup> Case file data was collected for all participants in this research whose ATI cases were closed at the end of the data collection period. Cases were closed either because a participant completed the ATI program, failed in the ATI, or was successfully transferred to a more intensive program. Five hundred ninety-one ATI participants out of the total sample of 687 had closed cases and were included in the retention analysis. The retention and completion rates are reported for the research sample only and may be higher than rates that include everyone entering the ATIs (research subjects and ATI participants not in the research) during the research period. This is because we interviewed participants up to six weeks after they entered the programs, so offenders who had been terminated soon after placement in an ATI or who were not attending regularly are less likely to be in our sample.

<sup>31</sup> Some of the ATIs require a full year of attendance, while others require 6 months to a year depending on participants' progress. Additionally, prosecutors and judges may require participants to remain in the programs beyond these minimum periods.

**Table 4a: Retention, ATI Sample by Program Type**

<b>Measure</b>	<b>Total (n=591)</b>	<b>General Population (n=143)</b>	<b>Substance Abusers (n=165)</b>	<b>Women (n=149)</b>	<b>Youth (n=134)</b>
Median days in program	183	183	181	183	183
Mean days in program	184	176	174	196	192
In program 30 days or more	95%	97%	93%	94%	98%
In program 90 days or more	83%	90%	76%	83%	87%
In program 180 days or more	61%	71%	52%	61%	63%

More than 90 percent of the participants in our sample, in every program track, remained in the programs for at least 30 days. More than 80 percent in the general population, youth, and women’s programs were retained for at least 90 days, and more than 60 percent through 180 days. The substance abuse programs were least likely to retain participants to the 90-day point but even they retained about three-fourths through 90 days and more than half through 180 days. The women’s category includes some women in substance abuse programs; their retention rate through 180 days is 59 percent, slightly better than the rate for the non-women’s substance abuse programs shown on the table.

**Completion**

Overall, the completion findings in our sample indicate that the ATIs succeed in meeting their contractual obligation for completion, initially set at 55 percent of participants.<sup>32</sup> As shown in Table 4b, nearly 60 percent of participants in our sample successfully completed the ATI programs and another six percent were transferred to other programs.<sup>33</sup> The general population and women’s groups well exceeded the 55 percent target (achieving rates of 72 percent and 61 percent respectively), and the youth programs met the goal precisely. The substance abuse programs meet this goal only if transfers are included with completers.<sup>34</sup> It is not unreasonable to include transfers as successful completers in drug treatment programs. Most of the transfers are to residential drug treatment, which means that the ATIs have screened these offenders and determined, with the court’s approval, that they need more intensive services. The major reasons recorded in the case files for participants’ failure to complete the programs were

<sup>32</sup> Initial contracts between New York City and the ATIs defined a target completion rate of 55 percent. Additional requirements included retention rates at three and six months. These target goals have been revised and now vary by program. While the analysis here indicates the overall success of the ATIs in meeting completion targets, not all of the programs met these goals.

<sup>33</sup> The contractual goal of 55% has been modified in the direction of greater flexibility depending on the characteristics of participants enrolled in the individual programs.

<sup>34</sup> The completion and transfer rates for the women’s substance abuse programs are 46% and 11% respectively—about the same as those achieved by the other substance abuse programs.

absconding (45 percent), rearrest (27 percent), and noncompliance (21 percent). The relatively stable general population group showed the lowest failure rate; the substance abuse and youth groups showed the highest rates.

**Table 4b: ATI Program Completion**

<b>Measure</b>	<b>Total (n=591)</b>	<b>General Population (n=143)</b>	<b>Substance Abusers (n=165)</b>	<b>Women (n=149)</b>	<b>Youth (n=134)</b>
Completed	59%	72%	48%	61%	55%
Transferred	6%	1%	10%	7%	5%
Failed to complete	36%	28%	42%	32%	41%

### **Retention and Completion**

Predictably, those who successfully completed the programs remained in the ATIs longer than those who failed to complete. Our analysis showed that the average retention for those who completed the programs is 222 days or about eight months compared to 127 days or about four and a half months for the noncompleters. Small proportions of both completers and noncompleters remain in the programs up to a year and beyond. The 34 participants in the study who transferred out of the ATIs were in the programs for an average of five months.<sup>35</sup>

Retention varies across the program types for both completers and non-completers.<sup>36</sup> On average, completers remain longest in the women’s programs, probably because prosecutors or judges require some women to remain in the ATIs until certain conditions, such as obtaining a job, are met. Substance abuse participants remain for about the same length of time as the youth.<sup>37</sup>

Failure to complete may not indicate that the participant failed to receive substantial services. The youth programs, for example, retain non-completers for 159 days, or about five months – the longest average time that noncompleters are retained. This explains why the youth programs have a 180-day retention rate comparable to that of the women’s programs, while their failure to complete rate is 41 percent compared to 32 percent in the women’s programs. Retention rates, examined independently of completion rates, provide an indication of the impact of service delivery beyond the dichotomous succeed/fail outcome.

The ATI retention and completion rates compare favorably with those achieved by other treatment and ATI programs across the country. For example, a major study of outpatient drug

<sup>35</sup> If transfers were included with completers, mean retention would be 215 days.

<sup>36</sup> In this and the following sections of the chapter, transfers are included as completers, in accordance with the policy of the ATIs and the city.

<sup>37</sup> If the women’s substance abuse programs were included in the substance abuse category, completers would remain in substance abuse programs for an average of 246 days.

treatment programs in 11 cities found that the median length of stay was only 90 days or three months even though the programs expected stays of at least six months.<sup>38</sup> Other studies have found that only about 35 percent of offenders are retained after three months of involvement in outpatient drug treatment.<sup>39</sup> A review of drug court evaluations found that graduation rates averaged 47 percent across the eight courts that measured completion.<sup>40</sup>

### **Explaining Program Completion**

We examined the relationship between background characteristics and program completion using data from the baseline interviews as well as official criminal justice records. We conducted bivariate and multivariate statistical tests to understand whether the individual characteristics of participants entering the ATIs were related to completion. Appendix B provides the full methodology used in these analyses.

In keeping with the findings from our interviews with court stakeholders and ATI administrators, we found that few background characteristics proved helpful in predicting which defendants would succeed in an ATI.<sup>41</sup> In bivariate tests, most participant characteristics that we analyzed – including age, gender, ethnicity, and education – were not significantly associated with program completion. Also not significantly associated with completion were most aspects of the participants’ criminal history—both from their self-reports and from official records—including participants’ reports of their previous convictions and the number of open cases as they entered the ATI. Also included are official records regarding the offenses that brought them into the ATIs (their detention status as well as arrest and conviction charges) and the number and nature of their prior convictions (Table 4c). Thus, whether participants entered the ATIs on convictions for higher or lower level felonies, or for violent or nonviolent offenses, they were about equally likely to complete the programs. Similarly, those with prior felony convictions and those without such histories were equally likely to complete. The absence of significant differences supports the assertion that ATIs can effectively serve more serious felony offenders.

In these analyses, the only characteristics significantly associated with failure to complete were the use of cocaine or heroin within the 30 days preceding program entry, having serious thoughts about suicide, and being incarcerated for more than three months in a participant’s lifetime. It is possible that programs might improve completion rates by focusing services and retention efforts on participants with these characteristics.

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<sup>38</sup> D. Dwayne Simpson et al., “Program Diversity and Treatment Retention Rates in the Drug Abuse Treatment Outcome Study,” *Psychology Of Addictive Behaviors* 11, No. 4 (December 1997).

<sup>39</sup> Roger H. Peters, Mary R. Murrin, “Effectiveness of Treatment-Based Drug Courts in Reducing Criminal Recidivism,” *Criminal Justice and Behavior* 27, No. 1 (February 2000). The authors cite Cooper, 1998; Hubbard, Collins, Rachal, & Cavanaugh, 1998.

<sup>40</sup> Steven Belenko, *Research on Drug Courts: A Critical Review 2001 Update* (The National Center on Addiction and Substance Abuse, 2001).

<sup>41</sup> Because of time limitations, we did not examine the relationship between program participation (our follow-up interview) and program completion. Such analyses may yield additional information about how ATIs can structure service delivery to increase program completion.

**Table 4c: Associations Between Select Characteristics and Program Completion**

<b>Background Characteristics</b>	<b>Percent Completed ATI Program</b>	<b>Completers with Trait (n=379)</b>	<b>p-value trait:no-trait</b>
Male	64%	262	.53
Female	64%	116	
<b>Self-report in Vera interview</b>			
Employed at interview	68%	64	.25
Unemployed at interview	64%	311	
Severely depressed in lifetime	64%	184	.37
Not severely depressed	63%	192	
Serious thoughts of suicide in lifetime	54%	56	.01**
No serious thoughts of suicide	65%	319	
Used cocaine or heroin within 30 days of ATI entry	55%	66	.008**
No cocaine/heroin use within 30 days	67%	313	
Reports need for drug treatment	62%	114	.26
No need for drug treatment	65%	264	
Incarcerated 3 months or more in life	60%	127	.02*
Not incarcerated 3 months or more	69%	237	
Has prior criminal convictions	64%	285	.28
No prior convictions	67%	94	
<b>CJA information on instant offense</b>			
A or B felony charge at arraignment	65%	260	
Other felony charge at arraignment	67%	105	.34
Violent felony charge at arraignment	65%	150	.79
Not a violent felony charge	64%	228	
Drug-related charge at arraignment	66%	205	1.0
Not a drug-related charge	63%	173	
A or B felony charge at disposition	62%	137	.19
Other felony charge at disposition	67%	201	
Violent felony charge at disposition	65%	138	.85
Not a violent felony charge	66%	208	

**Table 4c cont.: Associations Between Select Characteristics and Program Completion**

<b>Background Characteristics</b>	<b>Percent Completed ATI Program</b>	<b>Completers with Trait (n=379)</b>	<b>p-value trait:no-trait</b>
Drug-related charge at disposition	65%	193	1.0
Not a drug-related charge	65%	153	
Conviction history			
no prior felony or misdemeanor	67%	253	.76
no prior felony, <6 misdemeanors	63%	49	
prior felony or >5 misdemeanors	65%	62	
Detention status leaving Criminal Court			
Made bail	80%	8	.64
Bail set, not made	66%	307	
Remanded	33%	1	
Released on own recognizance	63%	51	
Parole continued	67%	2	

§ Figures may not add to 379 due to missing data on individual items.

\* Chi-square and t-test statistically significant at p<.05; \*\* statistically significant at p<.01

In multivariate analysis in which we controlled for many participant characteristics,<sup>42</sup> these same three variables remained significantly associated with completion (Table 4d). Even when age and gender are controlled, participants who reported serious thoughts of suicide or the recent use of heroin or cocaine were significantly less likely to complete than participants who did not report these experiences. The other variable significantly associated with completion was participation in a substance abuse program. Only at the 90 day point is there any substantial variation among participants in our sample or among program groups. While it not surprising that 90-day retention is related to program completion, these findings indicate the importance of retention in the first 90 days for substance abusers. Controlling for the characteristics in the model, offenders who were in substance abuse programs were significantly less likely to complete than participants in the other program types. Those who remain for at least 90 days, however, are as likely to complete as participants in other programs. (Table 4d and Appendix B).

<sup>42</sup> Included in the model are demographic characteristics; participant reports of their criminal history, drug abuse, and thoughts of suicide; official records on the participants' instant offenses—including level and type of charges—and on their history of prior convictions; and program type.

**Table 4d: Logistic Regression Results: Features Related to ATI Completion**

<b>Intake Interview Variable Description</b>	<b>Odds Of Completing</b>
Program Type <sup>43</sup>	
Substance Abuse Treatment	.672
Women’s Programs	1.092
Youth Programs	.751
Gender (male)	1.110
Years of education	.712
Age (years)	1.025*
Has no prior convictions	1.059
Had serious thoughts of suicide	.480**
Not incarcerated more than 3 months	1.065*
Used heroin or cocaine in past 30 days	.451**
Spent at least 90 days in ATI	20.065**

Controlling for other variables: \*significant at p<.05 level; \*\* significant at p<=.01 level  
Odds <1.0 indicate the trait is associated with ATI failure; Odds >1.0 indicate the trait is associated with completion; Odds=1.0 denotes the trait is unrelated to completion.

**Summary**

The ATIs retain participants at rates that meet their original contractual obligations and compare favorably with rates achieved in other programs across the country. All of the program tracks retain more than 60 percent of participants for at least 180 days except for the substance abuse programs, which retain just over half the participants for this minimum period. Nearly 60 percent of the participants in our sample successfully completed the programs, and if transfers are included, nearly two-thirds of participants completed successfully. Few aspects of participants’ lives that we were able to examine—including most aspects of their criminal history—are associated with successful completion. The fact that the severity of the charge that brought the participant into the ATI is not associated with completion supports the ATI mission to enroll serious felony offenders. The participants who are most vulnerable to failure in the programs are those with histories of suicidal thoughts, incarceration, and recent use of cocaine or heroin. This suggests that the programs might improve completion rates by focusing particular attention on participants with these background characteristics.

<sup>43</sup> Here, the referent group is “all other programs” adjusted for the other variables in the model. Including ATIs for the general population produces redundancy in the model. That is, by knowing if a participant is in the other three program types, one can deduce if the participant is in the fourth type.

Consistent with their lower retention rates, the substance abuse programs also achieve the lowest completion rates, even controlling for the participant variables we are able to examine. Nonetheless, participants retained in the substance abuse programs for at least 90 days are just as likely to complete as participants in the other programs. This suggests that the first three months represent a critical risk for participant failure and that the programs—and in particular the substance abuse programs—could improve their completion rates by developing more effective early retention strategies.

## Chapter Five: Public Safety

This chapter addresses the question of whether ATI sentences compromise public safety by examining the reconviction rates of a sample of ATI participants (n=318) in comparison to a sample of similar offenders (n=353) for a period of nearly three years. We also examine the number of days to prior a rearrest that leads to reconviction, and the severity of reconviction charge across the four ATI population groups. We then examine the effect of program completion on conviction rates.

The results show, for our sample, that the ATIs do not compromise public safety. Even though the ATI participants were free in the community for much longer periods than the comparison sample, the two groups had about the same reconviction rates on about the same level of charges over the study period. Nearly three-fourths of those who were convicted, in both groups, were convicted of either a misdemeanor or a noncriminal offense. When we assess the relative impact of program completion on reconviction rates, our findings show a strong relationship between participant completion and lower recidivism rates. This finding indicates that when the ATIs succeed in retaining participants for the full duration of their sentences, they also achieve positive behavior change. However, our findings also show that those participants who fail to complete the programs are even more likely to be convicted of a new offense than comparison subjects who do not enter ATIs.

The comparison group was constructed by using a group of 3,706 Supreme Court defendants not referred to ATIs because of adjudicative, defense, programmatic, or other reasons. Comparison subjects were matched to ATI participants who entered the programs between February 1998 and June 1999 using seven variables including demographic, instant offense, and criminal history information. Only the ATI participants from this match were used for the recidivism analyses.

We defined recidivism as one new arrest for an offense that occurred on or after the date when participants entered the ATI—or participants in the comparison group were sentenced without referral to an ATI—that led to a conviction by November 1, 2000, when we stopped data collection. Throughout this and the following chapter, the term “arrest date” refers to the date of an arrest that led to a conviction. In defining recidivism as an arrest that led to a conviction, we excluded from the analysis those participants whose arrests were recorded in official records as missing disposition information or as pending final disposition. These excluded cases were not used in our calculations.

We calculated recidivism rates for the ATI and comparison samples over calendar time and over time at risk, when the individuals were actually free in the community and, therefore, “at risk” for a new conviction. We calculated calendar time to an arrest that led to a new conviction because it describes the total time from point of sentence that a person is a liability to the criminal justice system. This time period is calculated regardless of whether the person is incarcerated or free in the community. The maximum calendar time for which individuals were

followed is two and three-fourths years; the average for both the ATI and comparison samples is about two years. Calendar time favors the comparison group because a greater portion of the original sentence for comparison subjects is time incarcerated (and therefore not at risk for reoffending) than is the case for ATI participants. Individuals' time at risk means their full calendar time in the study minus any time they spent incarcerated. The days at risk are not consecutive calendar days; they are the total number of days during which a person could have reoffended while in the community. As such, we believe that days at risk is a more appropriate measure of the impact of ATIs.<sup>44</sup>

The analysis is based on arrest and disposition information in unsealed records from the New York State Division of Criminal Justice Services; data on time spent incarcerated is from the New York City and New York State Departments of Correction as well as the New York City Criminal Justice Agency. Appendix B provides a full description of the methodology for the recidivism analysis, including a description of the comparison sample and the data sources. Appendix C discusses alternative ways of defining recidivism.

### **Conviction Rates Over Calendar Time: ATI and Comparison Samples**

For the calendar period studied—from date of entry, or nonreferral, to the ATI through November 1, 2000—about the same proportions of the ATI and comparison samples had at least one arrest that led to conviction (34 percent of the ATIs and 32 percent of the comparison group). The arrest leading to conviction occurs, on average, two months sooner for the ATI than for the comparison group. The average calendar time to a new arrest leading to conviction is nine months for the ATI sample and 11 months for the comparison sample. The comparison group was incarcerated an average of more than six months (194 days) during that calendar period. Consequently, it is not surprising that the average calendar time to rearrest leading to reconviction for the ATI group is shorter than the average for the comparison group.

Table 5a shows that 14 percent of the ATI sample were arrested (leading to a conviction) through the first six months after they entered the programs, and 22 percent were arrested (and later convicted) through the first year. The table also shows that the only calendar time when the ATI group is more likely to be arrested is in the first two months after entry or nonreferral to the program, when small proportions of both groups are arrested and comparison group members are more likely to be incarcerated. Six percent for the ATIs and two percent for the comparison group were arrested during this period. After two months and through two and three-quarters years, about equal proportions of the ATI (28 percent) and comparison (29 percent) groups are arrested. ATI participants and comparison group members were convicted, on average, about the same number of times over the calendar period.

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<sup>44</sup> This recidivism analysis is based on the same matched ATI and comparison groups that we analyzed in our June 2000 report. This analysis, however, differs in some important ways from the earlier one. First, it includes consideration of time at risk; second, it extends the calendar time covered from February to November 2000; and third, it focuses on arrests that led to conviction rather than on all arrests since we consider conviction the better measure of criminal activity. Appendix C provides the results for the analysis based on all arrests.

**Table 5a: Arrests Leading to Conviction Per Time Interval  
(Calendar Days)  
ATI and Comparison Groups**

Selected Calendar Day Intervals <sup>45</sup>	Percent of Sample With Arrest Leading to Conviction (number of arrests per interval)	
	ATI Sample (n=318)	Comparison Sample (n=353)
Less than 1 month	3% (9)	1% (5)
1 to 2 months	3% (10)	1% (4)
2 to 3 months	2% (6)	2% (6)
3 to 6 months	6% (20)	6% (21)
6 months to 1 year	8% (26)	8% (28)
1 to 1.5 years	9% (29)	7% (26)
1.5 to 2 years	2% (6)	3% (11)
More than 2 years	1% (3)	3% (11)
Total Rearrest Rate	34% (109)	32% (112)

About two-thirds of those who were convicted in each group had only the one arrest leading to a conviction; 20 percent had two. The arrested and convicted ATI participants had a mean of 1.6 arrests leading to conviction; the mean for the comparison sample is 1.8 arrests

<sup>45</sup> Months are approximated as 30-day intervals.

leading to conviction. The findings presented in table 5a indicate the relative success of the ATIs in supervising offenders in the community without compromising public safety.

### **Conviction Rates Controlling for Time at Risk in the Community: ATI and Comparison Samples**

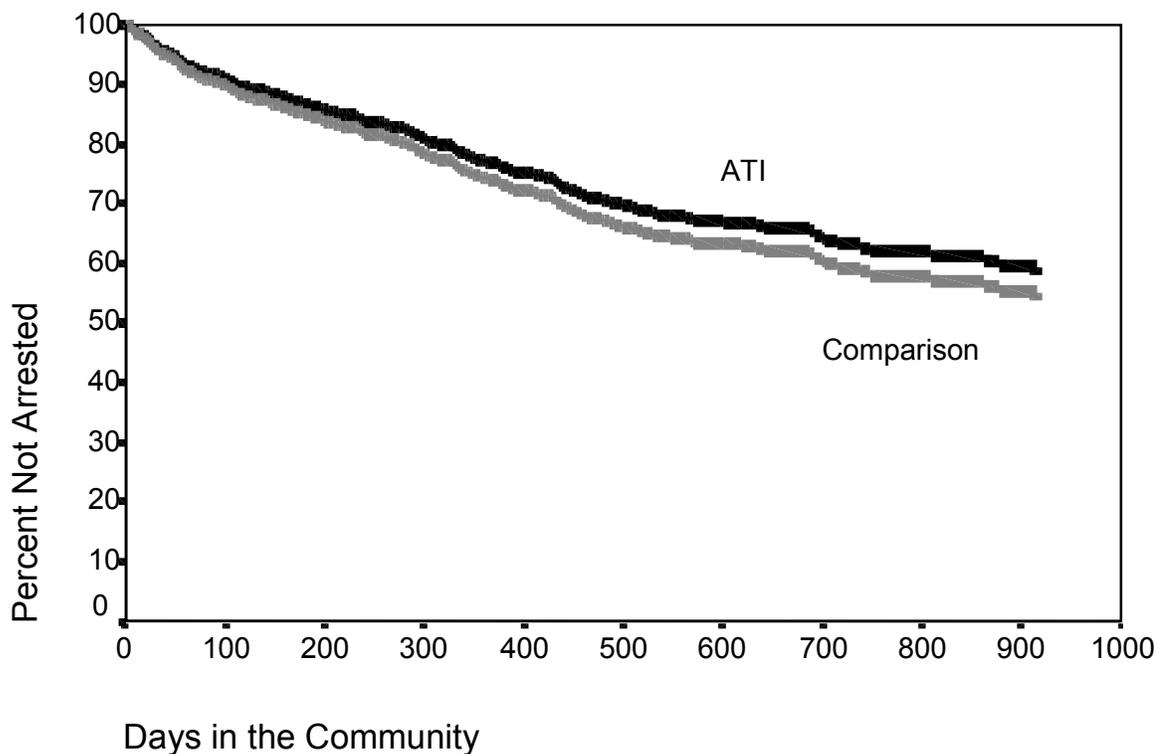
These similarities in conviction rates and number of arrests that led to conviction for calendar time occur even though the ATI and comparison groups had quite different periods at risk over the nearly three years studied. Before a first arrest that led to a conviction or November 1, 2000, the ATI sample spent, on average, 30 days incarcerated while the comparison sample spent 200 days incarcerated. In the comparison sample, moreover, 25 people spent the entire calendar period in jail or prison; if the conviction rate were calculated only for those who had some period in the community, the rate for the ATI and comparison group is exactly the same: 34 percent.

To control for the different periods that members of the ATI and comparison samples were free in the community at risk for a new conviction, we conducted a survival analysis to estimate the percentage of the two groups who would ‘survive’ free of an arrest over two and three-fourths years at risk. This analysis also enables us to estimate the percentage of the groups who would not survive—who would be convicted—through this risk period. The survival analysis also enables us to control for ways in which the ATI and comparison samples differed from each other. See Appendix B.

Even in the early intervals of the study, the ATI and comparison samples are about equally likely to survive, which indicates that the ATI’s higher conviction rates in the early period of calendar time can be explained by the proportion of the comparison group who were incarcerated and not at risk. The average time at risk before an arrest is about the same for both groups—nine months.

The survival curves below adjust for varying follow-up periods in describing differences between the ATI and comparison samples. The available data suggest that about 60 percent of the ATI group and about 55 percent of the comparison group are likely to survive without conviction. Conversely, about 40 percent of the ATI sample and 45 percent of the comparison group are likely to be arrested through nearly three years at risk. These differences are not statistically significant, which means that placement in an ATI does not affect public safety compared with other sanctions.

**Figure 5a: Likelihood of Not Being Convicted**



**Severity of Charges and Sentences: ATI and Comparison Samples**

In addition to examining the rates of arrest and conviction for the ATI and comparison samples, we examined the severity of their reoffending—the charges they faced on the first new conviction and the sentences they received. Our findings here provide further confirmation that the ATIs do not compromise public safety. The arrest and conviction charges of the ATI sample do not differ significantly from those of the comparison sample. Nearly three-fourths of those arrested in both groups were convicted of either a misdemeanor or a noncriminal offense. The only significant difference between the ATI and comparison samples is that the convicted ATI sample was more likely to receive conditional discharge sentences than sentences of incarceration (Table 5b)

The top arrest charges for the two groups were fairly similar; drug charges predominated, and B-felony charges accounted for about 30 percent of the total. The convictions were also likely to be for drug offenses, especially for the comparison group. The ATI and comparison samples were about equally likely to be convicted of a felony. The difference between the two groups is that the ATI group was more likely to be convicted of a violation or infraction rather than a misdemeanor, however this difference was not significant. As a result, of those who were convicted, 72 percent of the ATI sample but 81 percent of the comparison group were convicted of a criminal offense (a felony or misdemeanor).

**Table 5b: Charges and Sentencing Outcomes for Arrests Leading to Conviction: ATI and Comparison Samples**

<b>Variable Description</b>	<b>ATI Sample %</b>	<b>Comparison Sample %</b>
<b>Top Charge at Arrest</b>	(N=109)	(N=112)
Robbery	9	6
Assault	7	5
Weapons	2	3
Other Violent Crimes	3	4
Burglary	13	9
Drug Sale	21	25
Drug Possession	27	25
Other	18	23
<b>Top Charge Level at Arrest</b>	(N=109)	(N=112)
Felony A	2	2
Felony B	30	30
Felony C	5	3
Felony D	9	15
Felony E	5	5
Misdemeanor	50	46
Violation/Infraction	0	0
Other	0	0

Note: Percentages may not equal 100 due to rounding.

Consistent with their higher proportion of convictions for noncriminal offenses, the ATI sample was significantly more likely than the comparison group to receive the sanction of a conditional discharge back to the community (35 percent as opposed to 22 percent of the comparison group), indicating the court’s willingness to release rather than incarcerate them. All of those who received this sentence were convicted of either a noncriminal or a misdemeanor offense.

**Table 5b *continued*: Charges and Sentencing Outcomes for Arrests Leading to Conviction: ATI and Comparison Samples**

<b>Variable Description</b>	<b>ATI Sample %</b>	<b>Comparison Sample %</b>
<b>Disposition Charge Type</b>	(N=108)	(N=112)
Robbery	8	3
Assault	4	4
Weapons	1	4
Other Violent Crimes	3	3
Burglary	9	7
Drug Sale	16	17
Drug Possession	19	26
Other	40	38
<b>Disposition Charge Level</b>	(N=109)	(N=112)
Felony A	1	1
Felony B	8	7
Felony C	7	4
Felony D	9	10
Felony E	4	5
Misdemeanor	43	54
Violation/Infraction	27	20
Other	1	0
<b>Sentencing</b>	(N=109)	(N=112)
Incarceration	56	62
Split Sentence	1	2
Probation	2	3
Conditional Discharge	35	22*
Other	3	5
Sentence Missing	4	6

Note: Percentages may not equal 100 due to rounding. The size of the group in each cell (N) decreases between arrest and disposition because some cases are pending and not yet disposed.

For comparison between comparison and ATI samples: \* =p<. 05; \*\* =p<. 01; \*\*\*=p<. 001

## ATI Program Types

**Table 5c: Arrests Leading to Conviction Per Time Interval (Days at Risk in the Community) ATI Program Type**

Selected Days-at-Risk Intervals <sup>46</sup>	Percent of Sample With Arrest Leading to Conviction Per Interval (number of arrests per interval)				
	ATI Sample (n=318)	General Population (n=84)	Substance Abusers (n=87)	Women (n=75)	Youth (n=72)
Less than 1 month	3% (9)	1% (1)	5% (4)	5% (4)	1% (1)
1 to 2 months	3% (10)	4% (3)	6% (5)	3% (2)	0% (0)
2 to 3 months	2% (6)	2% (2)	0% (0)	1% (1)	4% (3)
3 to 6 months	6% (20)	8% (7)	9% (8)	3% (2)	3% (2)
6 months to 1 year	8% (26)	7% (6)	14% (12)	4% (3)	11% (8)
1 to 1 ½ years	9% (29)	13% (11)	7% (6)	4% (3)	10% (7)
1 ½ to 2 years	2% (6)	1% (1)	3% (3)	0% (0)	1% (1)
More than 2 years	1% (3)	1% (1)	2% (2)	0% (0)	0% (0)
Total Reconviction Rate	34% (109)	38% (32)	46% (40)	20% (15)	31% (22)

*Conviction Rates.* Some conviction patterns are consistent across the programs (Table 5c).<sup>47</sup> Only a small proportion of arrests leading to conviction, for example, occur in the final year of

<sup>46</sup> Months are approximated as 30-day intervals.

the study; arrests that lead to convictions tend to occur in the first year and a half after program entry across the program groups. In other respects the pattern of convictions differs among the programs. The youth and women participants are least likely to be arrested within the first six months of entering the programs, and the substance abuse participants are most likely to be arrested during this time. The greatest period of vulnerability for the women is in the first month; for youth the vulnerable period is when they leave the programs and the six months immediately after that.

The differences in total conviction rates among the programs are significant: participants in the women's programs are significantly less likely to be arrested and convicted than participants in the other programs, and participants in substance abuse programs are more likely to be arrested and convicted.<sup>48</sup> Twenty percent of those in the women's programs and 46 percent of participants in the substance abuse programs were arrested and convicted. The low conviction rates for the women participants are particularly notable considering that they come to the programs with serious criminal histories and high levels of disadvantage and need, as shown in chapters 2 and 3. These low conviction rates are not mirrored in the comparison sample where about equal proportions of men and women were reconvicted.

In the analysis of the full ATI sample, the women's program participants remained significantly less likely than participants in the other program types to be convicted, but the differences between the substance abuse and the rest of the ATI programs were no longer significant. This pattern is evident in the survival analysis results shown on the next page.<sup>49</sup>

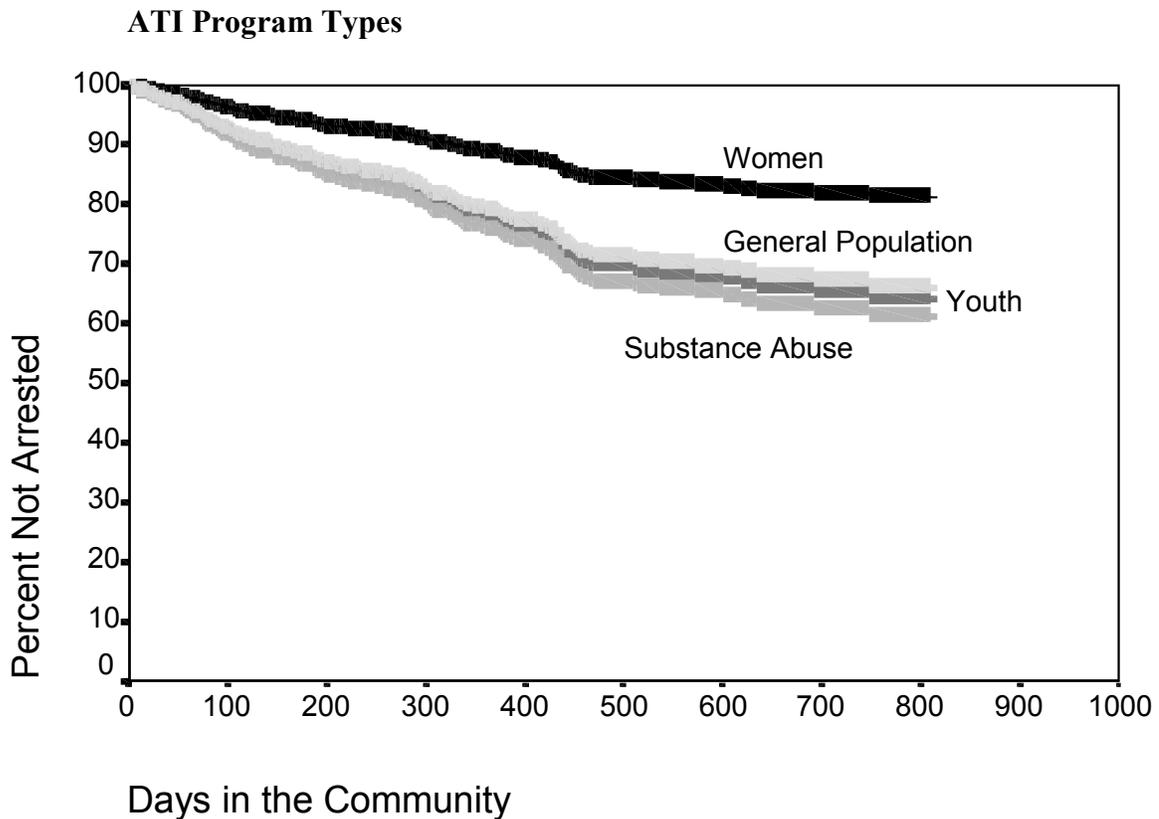
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<sup>47</sup> The analysis for the rate of arrest is based on the ATI sample that was matched with the comparison group, since it shows the relationship between the ATI overall arrest rate shown in the previous sections and the arrest rates of the program types. We also conducted the recidivism analysis for the full ATI sample of 595 participants, and indicate in the text where the patterns were and were not confirmed with the larger sample.

<sup>48</sup> Participants in the women's substance abuse programs are no more likely to be arrested than those in the other women's programs and they are significantly less likely to be arrested than participants in the nonwomen's substance abuse programs.

<sup>49</sup> The survival analysis presented here, as well as the analysis of arrest severity, is based on the full ATI sample where the Ns are robust enough to detect any significant differences over time and for various charge levels.

**Figure 5b: Likelihood of Not Being Convicted**



*Severity of Charges and Sentences.* There are few significant differences among the programs in the severity of charges for the first arrest that led to conviction. Youth are more likely than the other participants to be convicted of robbery, a pattern also found for the arrests that led to their ATI placement, and the general population group is more likely to be convicted of drug sales.

There are some other differences that are notable, although they do not reach the level of statistical significance. The women participants who are arrested are more likely to face misdemeanor “other charges” and to be convicted for misdemeanors rather than felonies.<sup>50</sup> The youth who are arrested are most likely to be convicted of felonies and of noncriminal offenses. About half of convicted participants in the general population, substance abuse, and women’s programs received a sentence of incarceration, but 59 percent of the convicted youth received this sentence. For most of the women, the incarceration sentence was time served.

<sup>50</sup> “Other” charges for women include disorderly conduct, loitering for prostitution, and theft of services.

**Table 5d: Charges and Sentencing Outcomes for Arrests: ATI Program Type**

<b>Variable Description</b>	<b>Total Sample</b>	<b>Adult General Population</b>	<b>Substance Abusers</b>	<b>Women</b>	<b>Youth</b>
	<b>%</b>	<b>%</b>	<b>%</b>	<b>%</b>	<b>%</b>
<b>Arrest Top Charge</b>	(N=147)	(N=37)	(N=51)	(N=20)	(N=39)
Robbery	8	5	4	0	21
Assault	8	8	10	10	3
Weapons	2	3	2	0	3
Other Violent Crimes	2	3	2	0	3
Burglary	13	14	6	15	21
Drug Sale	18	27	22	10	8
Drug Possession	29	30	37	20	21
Other	21	11	18	45	23
<b>Arrest Top Charge Level</b>	(N=147)	(N=37)	(N=51)	(N=20)	(N=39)
Felony A	1	5	0	0	0
Felony B	27	30	29	15	28
Felony C	3	3	2	0	8
Felony D	11	8	10	15	13
Felony E	5	8	6	0	3
Misdemeanor	52	46	53	70	49
Violation/Infraction	0	0	0	0	0
Other	0	0	0	0	0
<b>Disposition Charge Type</b>	(N=146)	(N=36)	(N=51)	(N=20)	(N=39)
Robbery	6	0	2	0	21*
Assault	4	6	4	5	3
Weapons	1	6	0	0	0
Other Violent Crimes	3	3	4	0	5
Burglary	7	11	6	10	3
Drug Sale	14	28 *	14	5	5
Drug Possession	21	19	31	20	10
Other	43	28	39	60	54
<b>Disposition Charge Level</b>	(N=147)	(N=37)	(N=51)	(N=20)	(N=39)
Felony A	1	3	0	0	0
Felony B	7	3	6	10	10
Felony C	8	8	8	0	10
Felony D	7	11	4	5	8
Felony E	3	3	2	0	5
Misdemeanor	45	46	51	60	28
Violation/Infraction	30	24	29	25	39
Other	1	3	0	0	0
<b>Sentencing</b>	(N=147)	(N=37)	(N=51)	(N=20)	(N=39)
Incarceration	52	46	51	55	59
Split Sentence	1	0	2	0	0
Probation	2	0	0	5	5
Conditional Discharge	38	38	41	40	33
Other	3	8	2	0	3
Sentence Missing	3	8	4	0	0

Note: Percentages may not equal 100 due to rounding. The size of the group in each cell (N) decreases between arrest and disposition because some cases are pending and not yet disposed.

\* = p<. 01 for comparison between total sample and other individual populations.

## **ATI Completers and Noncompleters**

*Arrest Rates.* Those who completed the programs were significantly less likely to be convicted of new offenses than those who failed to complete (25 percent and 48 percent).<sup>51</sup> Through the nearly three-year study period, 75 percent of those who completed the programs did not have an arrest that led to conviction (Table 6a).

Only two percent of those who eventually completed the programs were arrested in an arrest that led to conviction during the first two months after ATI entry. Another five percent were arrested leading to conviction between two and six months so that by six months after entering the programs, seven percent of those who completed (or 11 people) were arrested. Ten of them were convicted of either a misdemeanor or a noncriminal offense; one was convicted of a D felony. It is not unusual in these circumstances for ATI staff to advocate for participants in court to facilitate their return to the programs.

Two-thirds of the completers who were arrested were arrested in the periods when they were leaving the programs and in the six months after that—from six months to one and a half years after program entry. Nearly all of the arrests that led to conviction of completers occurred within the first year and a half of entering the programs. Very few were arrested in the final year of the study.

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<sup>51</sup> In this chapter on the ATI sample, we present only the time at risk analysis because the results for calendar and at risk time are essentially the same for the ATI sample. See Chapter Five.

**Table 5e: Arrests Per Time Interval (Days at Risk)  
ATI, Completers, and Non-Completers**

Selected Days-At-Risk Intervals <sup>52</sup>	Percent of Sample With Arrest Leading to Conviction (number of arrests per interval)		
	ATI Sample <sup>53</sup> (n=318)	Completers (n=193)	Non-Completers (n=112)
Less than 1 month	3% (10)	2% (3)	6% (7)
1 to 2 months	3% (10)	0% (0)	9% (10)
2 to 3 months	2% (6)	1% (1)	4% (4)
3 to 6 months	6% (19)	4% (7)	9% (10)
6 months to 1 year	9% (29)	9% (17)	10% (11)
1 to 1 ½ years	9% (27)	9% (17)	8% (9)
1 ½ to 2 years	2% (5)	1% (2)	2% (2)
More than 2 years	1% (3)	1% (2)	1% (1)
Total reconviction rate	34% (109)	25% (49)	48% (54)

For the noncompleters also, recidivism tended to occur during the first year and a half after program entry. Most of those who survived without an arrest for that period, survived for the later intervals. The noncompleters' arrests that led to convictions, however, are more evenly

<sup>52</sup> Months are approximated as 30 day intervals.

<sup>53</sup> The number of completers and noncompleters do not add up to the N for the ATI sample because 15 cases were missing data on completion status.

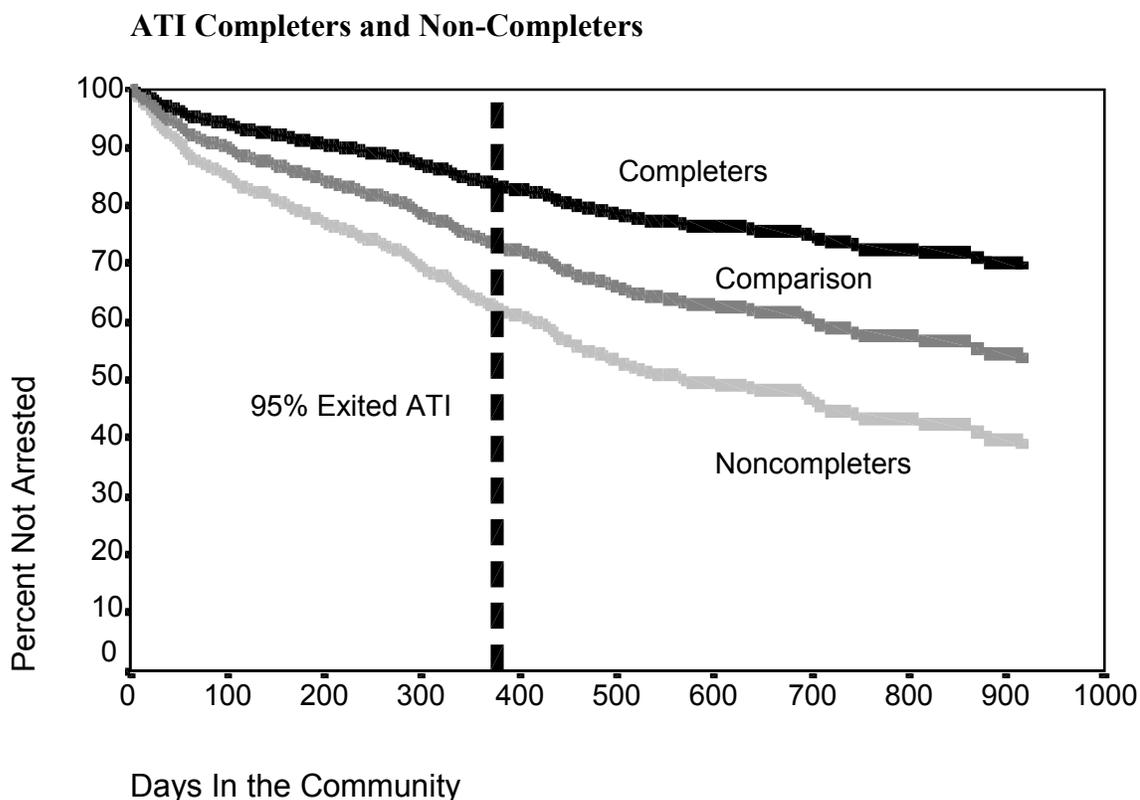
distributed through the earlier intervals. Within two months of entering the programs, 15 percent of the noncompleters were arrested and by six months, another 13 percent were arrested. These arrests within the first six months of program entry account for more than half of the noncompleters' arrests over the study period. Of course, noncompletion of the program is sometimes the result of an arrest. Even when that is not the stated reason for termination, it may be that circumstances around an arrest, such as detention on the new charge, become reasons for noncompletion.

Figure 5a shows the survival patterns for the ATI completers and noncompleters as well as for the comparison group when we control for time at risk. The curves indicate that 70 percent of the completers and 40 percent of the noncompleters would be likely to survive without a conviction if they had two and three-fourths years at risk. This difference is statistically significant, which means it is 99 percent certain that the differences are not due to chance.<sup>54</sup>

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<sup>54</sup> The survival rate is not the same as the percentages of the completers and noncompleters who were not arrested during their time at risk; those percentages as shown above were 75% of the completers and 52% of the noncompleters. The difference is because some of the completers and noncompleters who were not arrested were not actually at risk for over two years, mainly because they came into the study at later periods. The survival analysis controls for this and provides the probability that the individuals would survive if they had the full period at risk.

**Figure 5c: Likelihood of Not Being Convicted**



*Severity of Charges and Sentences.* The ATI completers were not only unlikely to be convicted, they were particularly unlikely to be convicted for a felony offense. More than 60 percent of the completers who were arrested faced misdemeanor charges, and 84 percent of them were convicted either of a misdemeanor or a noncriminal offense. Almost half of the completers who were convicted received conditional discharge sentences rather than incarceration (Table 6b).

Compared to the completers, those who failed in the programs were significantly more likely at arrest to be charged with a felony rather than a misdemeanor offense, to be convicted of a criminal offense, and to be sentenced to incarceration.

**Table 5f: Charges and Sentencing Outcomes for Arrests:  
ATI Completers and Non-Completers**

<b>Variable Description</b>	<b>ATI Sample %</b>	<b>Completers %</b>	<b>Non-Completers %</b>
<b>Top Charge at Arrest</b>	(N=109)	(N=49)	(N=54)
Robbery	9	8	9
Assault	7	8	6
Weapons	2	2	2
Other Violent Crimes	3	0	4
Burglary	13	14	13
Drug Sale	21	12	30 *
Drug Possession	27	39	17 **
Other	18	16	20
<b>Top Charge Level at Arrest</b>	(N=109)	(N=49)	(N=54)
Felony A	2	2	2
Felony B	30	20	39 *
Felony C	5	2	7
Felony D	9	8	9
Felony E	5	6	4
Misdemeanor	50	61	39 *
Violation/Infraction	0	0	0
Other	0	0	0
<b>Disposition Charge Type</b>	(N=108)	(N=49)	(N=53)
Robbery	8	4	11
Assault	4	4	2
Weapons	1	2	0
Other Violent Crimes	3	0	4
Burglary	9	10	9
Drug Sale	16	6	25 **
Drug Possession	19	25	15
Other	40	49	34
<b>Disposition Charge Level</b>	(N=109)	(N=49)	(N=54)
Felony A	1	0	2
Felony B	8	2	13 *
Felony C	7	2	13 *
Felony D	9	10	7
Felony E	4	2	6
Misdemeanor	43	41	44
Violation/Infraction	27	43	13 ***
Other	1	0	2
<b>Sentencing</b>	(N=109)	(N=49)	(N=54)
Incarceration	56	43	69 **
Split Sentence	1	0	2
Probation	2	2	2
Conditional Discharge	35	49	20 **
Other	3	6	0
Sentence Missing	4	0	7

Note: Percentages may not equal 100 due to rounding.

For comparison between completers and noncompleters: \* =p<. 05; \*\* =p<. 01; \*\*\*=p<. 001

ATI completers, whose criminal histories are, on the whole, no less serious than the noncompleters, clearly have lower recidivism rates. The great majority of them are not arrested over a substantial period of time even after they leave the programs, and the great majority of those who are arrested are not convicted of felony crimes. Conversely, most of the participants who are arrested are those who fail to complete, and more than half of them are arrested within six months of entering the programs.

## **Summary**

This research provides evidence that sentencing felony offenders to ATI programs rather than to incarceration does not compromise public safety. The ATI participants are no more likely to be arrested and convicted than the comparison sample over the study period. The ATI participants are arrested and convicted on about the same level of charges as the comparison sample—mostly misdemeanors and noncriminal offenses—and they are significantly more likely than the comparison sample to be discharged back to the community rather than incarcerated.

The research also shows that women in the ATI programs have lower recidivism rates, and that those who complete the ATIs are less likely to be reconvicted than noncompleters.

Our research does not provide sufficient evidence that the ATI system is achieving the overall rehabilitative goal of reducing participant reconviction. It does suggest, however, that the ATIs affect the behavior of those participants who remain in the programs. This research indicates that there are steps the programs could take to improve their overall recidivism rates and increase their rehabilitative capacity in several ways. Considering the survival patterns of the completers even after they finish the programs, ATIs would improve their overall rehabilitative capacity by increasing their completion rates. As Chapter Four suggested, this would mean developing strategies to improve retention through 90 days and to provide particular attention to those whose background characteristics make them vulnerable to failure. The issue of noncompleters is more difficult; the programs are required to report to the courts on participants' progress and on any terminations. While ATI staff seek to give participants every chance to succeed, it is possible that greater efforts to track noncompliance and absconding, and to report them in a timely way to the courts, would bring the sanctions that could prevent, or at least forestall, a new arrest. This may be especially applicable to the substance abuse programs whose participants are more likely to be arrested and convicted within the six months after they enter the programs. Dealing with the issue of the noncompleters would require the city, the courts, and the ATIs to develop more consistent criteria for failure in the programs and for the imposition of sanctions for that failure.

The analysis of the program groups suggests additional ways that the ATIs could strengthen their capacity to fulfill rehabilitative goals. Some characteristics of the women's programs may be associated with their low recidivism rates; they are, for example, smaller and

have lower staff to participant ratios. This is an area that merits further study. What is clearer is that participants in the program groups have different periods of greatest vulnerability for reoffending. By paying special attention to these periods, program staff might reduce recidivism rates. The vulnerable periods are just after they enter the programs for women, between the third and sixth months for the general population group, and in the year after they leave the programs for the youth. For the youth especially some provision of aftercare services might reduce recidivism.

## Chapter Six: Implications and Conclusions

The findings from this four-year evaluation of New York City's alternative to incarceration programs suggest that the programs in this analysis successfully meet several of their goals. Most clearly, they implement their services with integrity. The ATIs target and admit serious, primarily B-level, felony offenders who are significantly challenged by economic, social, and health problems. The programs supervise these participants, report to the courts on their progress and problems, and deliver a broad range of services to address their problems.

While some disadvantage is consistent across all program groups, each also has unique characteristics. The general population—adult offenders without serious addiction—are the most stable, have worked the longest and earned the most money, and report the fewest health problems. The substance abusers report the highest rates of drug use, the most experience with drug treatment, and some of the highest rates of mental health and medical problems. The women, many of whom are also substance abusers, present the greatest overall need. They report high rates of prior drug use, economic instability, and the highest rates of both mental health and medical problems. The youth have committed the most serious offenses; for example, approximately 56 percent were convicted of robbery.

These differences are mirrored in the amount and content of services the participants told us they received. The general population program incorporates substance abuse treatment and health classes into a program that centers on job stability. The substance abuse programs provide extensive drug treatment services, including frequent testing and support services. The women's programs, which have the highest staff to participant ratio, provide drug treatment combined with family and other mental health counseling. The youth programs focus on stabilizing participants in school, supervising their compliance, and providing support services, such as family counseling, as needed.

The ATI programs also generally meet the original completion targets of 55 percent set by New York City in 1997. They graduate an average of about 60 percent of participants in the study, a rate that is higher than rates reported in national studies of outpatient treatment. Participants in the substance abuse programs are least likely to complete successfully even when we control for the characteristics we are able to examine. However, those participants who remain in substance abuse programs for at least 90 days are as likely to complete as participants in the other program types.

This research shows that the ATI programs do not compromise the public safety. Participants were no more likely to be convicted of new offenses over the three years than the comparison group of offenders who spent much more of that time incarcerated. The recidivism analysis shows that 86 percent of the ATI sample remained free in the community without reconviction six months after entry into the program, and 66 percent remained free of a reconviction after nearly three years. This compares with a six-month rate of 90 percent for the matched comparison sample that did not enter ATIs after case processing and 68 percent of the

comparison group after nearly three years. These differences are not statistically significant and are eliminated when time incarcerated is subtracted from the analysis. Recidivism rates can also indicate the value of treatment, as opposed to incarceration, in changing offender behavior. In this respect, the findings in this report suggest that the programs provide this rehabilitative effect on criminal behavior only for those participants who complete the program. Program completers have low recidivism rates, indicating that the ATIs have the potential to effect long-term behavior change. Notably, though not surprisingly, people who complete the ATIs are more than twice as likely to remain free of conviction in the community as people who do not complete. While program completion is expected to be associated with positive long-term outcomes, this finding suggests that the primary challenge to the programs is in retaining participants so that they receive the full benefit of program intervention.

To assist the programs in this regard, the research identifies several participant characteristics that indicate vulnerability to failure in the programs and the periods when participants are most likely to be rearrested. If the ATIs directed specific services to these groups, they could increase completion of the programs and reduce recidivism. In other ways also, the city, the courts, and the ATIs could take steps to strengthen the programs. These include developing standard management information systems, using information about program operations and outcomes to inform sentencing decisions, developing more consistent criteria for program completion, and responding in a timely way to the offenders who fail in the programs.

The sentencing option that the ATIs provide to judges and prosecutors is limited to only a portion of the current target population. ATI administrators say that screeners for the ATIs have a hard time finding cases that are likely to receive a sentence of at least six months incarceration and that prosecutors are willing to “give up” to the ATI, which they perceive as more lenient. The result is that the programs compete for the limited number of cases that prosecutors are willing to release. This prosecutorial discretion limits ATI capacity at the source of the referrals—the court. The ATIs and the city could take steps to inform the courts and prosecutors about the operations and outcomes of the programs so that sentencing decisions would reflect the knowledge that has been gained about participants who have succeeded in the ATI system. In this way, the ATIs might be able to admit a greater proportion of the eligible offender population.

This report documents the effectiveness of ATIs for people who complete the programs but also suggests the importance of ATI reporting to the courts on people who fail to comply with program regulations. Historically, the success of the ATIs has been defined by the percentage of all intakes who graduate, while the people who fail are considered a loss. An alternate view is that the ATIs successfully screen out those defendants who are not able to remain in community-based sanctions. The clinical expertise of program staff is used to assess appropriate placement, which may include more or less intensive treatment as well as jail or prison. In order to maximize the potential of ATIs to help the courts assess defendant placement, the programs and the courts could standardize requirements for completion and

criteria for program failure. The courts and prosecutors must have confidence that non-compliant participants are returned to court swiftly and consistently if they are to use the programs more frequently.

A related issue concerns responses to those who are failing in the programs but have not yet been terminated. One option that has been suggested is the use of graduated sanctions, which have gained prominence through drug courts. Graduated sanctions provide varying degrees of punishment, including short jail stays of a weekend or a week, depending on the severity of the infraction and the compliance history of the individual. While research on the effectiveness of these graduated sanctions is still inconclusive, they are an option to be considered for the ATIs as they would allow judges, in consultation with the programs, to punish infractions without removing the participant from the program and imposing the jail alternative.

A last implication that has been raised both in the literature and by some of the judges, city officials, and ATI program staff we interviewed throughout this study concerns ATI eligibility criteria. The question is whether the criteria should be expanded so that the programs could serve offenders charged with both more serious and less serious crimes. While our research can speak only to the outcomes achieved for those who have been admitted to the ATIs, the option of expanding eligibility criteria raises the issue of fitting the punishment to the crime. Offenders facing shorter and longer terms of incarceration would need to face comparable periods of required treatment and more or less severe sanctions for failure.

This research has shown that the ATI system represents a valuable sentencing option in the city. The programs balance punishment and treatment for felony offenders without compromising public safety, and they have the potential to reduce reoffending.

## Appendix A: Program Descriptions

Note: Program staff and capacity are reported as of June 2001. Program capacity indicates total number of participants, and may exceed individual contractual obligations to the New York City Council or the New York City Criminal Justice Coordinator's office.

Program: **Court Employment Project**  
Agency: **Center for Alternative Sentencing Employment Services (CASES)**  
Address: **346 Broadway**  
**New York, NY 10013**  
Telephone: **(212) 732-0076**  
Executive  
Director: **Joel Copperman**

The Court Employment Project (CEP) is the only ATI that targets 16-19 year olds eligible for Youthful Offender status.<sup>55</sup> With a capacity of 480, CEP is by far the largest of the city-funded ATIs; the program's budget and staff are about three times that of any other ATI. The program's current census is 225. CEP has 58 people on staff in addition to other CASES staff used by the program.

CEP requires participants to attend services at CEP offices between 3:00 p.m. and 6 p.m., but is not a full-time day treatment program. Most participants are expected to attend high school until 3:00 p.m. Those not in high school are required to attend CEP, or to be in an approved activity, from 9 a.m. to 3 p.m. Participants who are not in school attend CASES educational classes during the day initially, and are transitioned into full-time educational and/or vocational programs in their communities.

Activities take the form of group classes and group and individual counseling. Since CEP participants are not regular drug users, sessions focus on job training and development. Support services are also available on-site to assist participants in maintaining constructive activity and supplement agency resources.

The participant develops a program plan with a CEP counselor in the first four weeks of programming. In developing the plan, counselors refer to an extensive CEP manual that describes participant profiles and a system of client issue groups designed to "strengthen foundations," "address and avoid obstacles," and "expand opportunities" to maximize positive behavioral change.

Clients are expected to engage in all scheduled activities, and their effort in doing this is the principle measure of program success. Participants must attend 180 days of the program and either be attending school or have a job to complete the program.

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<sup>55</sup> YO status is a legal designation invoked to seal the case of an adolescent convicted of a felony. With the felony conviction removed from the public record, any subsequent felony offense is treated as a first-time offense. Judges have discretion in granting YO status within statute guidelines. Once they have done so, they treat the defendant as a Class E felony offender, and may make ATI involvement a condition of the sentence.

Program: **Crossroads**  
Agency: **Center for Community Alternatives**  
Address: **39 West 19<sup>th</sup> Street**  
**New York, NY 10011**  
Telephone: **(212) 691-1911**  
Executive  
Director: **Marsha Weissman**

Crossroads is a substance abuse day treatment program for women felony offenders who are at least 16 years old. Crossroads operates out of the Center for Community Alternatives, which began in 1981. Crossroads has an annual capacity of 40 and a current census of 23. It is a twelve-month program with a staff of nine. Staff from the Center for Community Alternatives provide additional support to Crossroads.

Crossroads is licensed by the New York State Office of Alcoholism and Substance Abuse Services (OASAS) as a substance abuse treatment program. Clients are involved in on-site programming from 10:00 a.m. until 4:30 p.m. daily, and the program plans to begin evening and Saturday meetings for women who work. Staff counselors and the transitional specialist work with clients to develop treatment plans in each of the three program phases. Some of the specialized groups and services available at Crossroads include acupuncture, parenting, feelings (anger and depression) management, HIV education and support, general and women's health education, and survivors' and spirituality groups. The Crossroads director estimates that at least 90% of the women served by the program are survivors of mental, physical, and/or sexual abuse. Therefore, the program provides specific groups to help participants come to terms with a history of victimization.

Throughout treatment, the women are encouraged to take active roles in raising their children, and program staff assist women who are trying to regain custody of children in foster care.

The program tests participants for drug use several times each week, and programming is intensified if participants test positive. Participation in program activities, attendance, and sobriety are required to graduate the program. Typically, the court requires participants to remain in the program for a year.

Program: **El Rio**  
Agency: **The Osborne Association**  
Address: **809 Westchester Avenue**  
**Bronx, NY 10455**  
Telephone: **(718) 842-0500**  
Executive  
Director: **Elizabeth Gaynes**

El Rio is an OASAS-licensed comprehensive day treatment program for substance abusers aged 18 and older. The program has an annual capacity of 225 clients and the current census is 133. There are seventeen people on staff at El Rio, and the Osborne Association provides additional support staff. Participants are on-site weekdays from 9:00 am until 2:00 p.m. It is the only city-funded ATI program in the Bronx. It is one of two ATIs contracted to provide substance abuse day treatment for a general adult population.

Unlike many of the other ATIs, El Rio is located in a community which is representative of the clients it serves. El Rio divides cases geographically with Flametree, the other substance abuse treatment program, taking referrals from the Bronx and upper Manhattan.

El Rio clients move through four treatment phases: Orientation, Early Recovery, Stabilization, and Community Reintegration. Program activities include individual and group counseling, classes about substance use, and support and phase groups four days per week. In addition to clinical and educational programming, El Rio offers two alternative activities, acupuncture and ceramics, as therapy for the participants' substance abuse. Participants also develop computer and other job readiness skills, and are required to participate in a constructive leisure activity to help them maintain abstinence.

Structure is a central component of treatment at El Rio. In order to complete the program, staff and participants are required to keep specific schedules, record all attendance and participation, sign in and out, and attend all meetings. Participants are tested for drug use at least twice each week and additional counseling is required when participants continue to test positive. Staff generally avoid punitive responses to infractions and relapses, which are treated in the context of recovery. Participation and sobriety are required to graduate. All graduates of El Rio are encouraged to attend alumni support groups.

Program: **DAMAS, Flametree, Freedom**  
Agency: **The Fortune Society**  
Address: **39 West 19<sup>th</sup> Street**  
**New York, NY 10011**  
Telephone: **(212) 206-7070**  
Executive  
Director: **JoAnne Page**

The Fortune Society has three city-funded ATI programs: Freedom for the general population, Flametree for substance users, and DAMAS for women. All three are day treatment programs, requiring participants to attend on-site programming for 35 hours each week. Persons who are employed or are in a job training or education program elsewhere must come in for a minimum of ten hours each week. The Fortune programs are also unique in admitting and supporting clients who are on methadone maintenance.

Fortune counselors work with each new participant to develop a schedule that includes individual counseling, general activities such as house meetings and recreation, and group counseling and classes. Clients attend groups two or three times daily and attend individual counseling weekly and as needed. All three programs follow the same three-phase system similar to that described in the text of this report. At least 85% attendance is required to advance in each phase. All participants have access to Fortune programming in education (Basic Adult Literacy, ESL, and GED), HIV education and support groups, art therapy, career development, and recreation. The Fortune Society has a total staff of approximately 110 people.

*Freedom* targets the general population of felony offenders who do not have significant drug treatment or mental health needs. The program has a full-time staff of seven, an annual capacity of 120 and a current census of 101. As the only general population program that accepts methadone maintenance clients, Freedom provides an accessible alternative sanction for an older offender population in recovery from heroin addiction. After a second consecutive positive drug test, Freedom staff will refer the individual to a drug treatment program, preferably one overseen by Fortune.

*Flametree* is the general population substance abuse treatment program. Project staff is seven, annual capacity for clients is 78, and the current census is 68. Staff conduct daily classes, relapse prevention, and support groups. Additionally, staff target participants who are unable to maintain sobriety with intensive counseling about individual patterns of substance use.

Initially, the staff work to help clients adjust to program rules and it is not until phase II that clients are expected to reach treatment goals. When clinical staff determine that a client is fully engaged in treatment as a process, clients begin education and vocational training. Administrators believe that recovery is a longer process than the court mandate permits, and

setbacks are expected. However, the program tests for drug use regularly and intensifies counseling for participants who continue to test positive. Flametree staff is reluctant to terminate clients and will work to place someone who is not progressing in an alternate program if they feel they have exhausted in-house resources.

*DAMAS* is the Fortune Society's general treatment ATI program for women. It has a staff of four, an annual capacity of 45, and a current census of 30. It is not a drug treatment program, and referrals must score low on current substance abuse treatment need in the intake interview. A primary goal of *DAMAS* is to provide women with a safe, supportive environment in which they can honestly confront numerous problems of caring for themselves and their children. Program management note that many incoming clients deny needs and problems, and much of the early work by staff focuses on engaging participants.

In addition to attending Fortune programming available to all clients, women at *DAMAS* participate in women's groups on topics such as codependency, parenting, and anger management.

If it is not otherwise available, Fortune provides on-site childcare. Additionally, participants and staff watch the children of the participants; program managers view this as a way to model the positive ways other people interact with children and as a supplement to classes in parenting.

Program: **Hopper Home**  
Agency: **The Women's Prison Association and Home, Inc.**  
Address: **110 Second Avenue**  
**New York, NY 10002**  
Telephone: **(212) 674-1163**  
Executive  
Director: **Ann Jacobs**

The Hopper Home ATI program of the Women's Prison Association is a transitional residence and supervision program for women aged 18 and older. The program is the only city-funded ATI with a residential capacity. Hopper Home has 22 beds and the capacity to serve 20 additional women who reside in the community and report to the program on a regular basis. The current census includes 20 residential and 10 reporting clients. The project has a 15-person staff.

The program consists of four phases, which include a one- to six-month residential component and a community supervision component in which the program client lives in the community and reports to Hopper Home several times each week. The community supervision component lasts the remainder of a one-year term. Unlike the other ATIs, Hopper Home provides only limited substance abuse and clinical programming on-site, and arranges for these services through agreements with other agencies. The program is significantly more restrictive than the other felony ATI programs under evaluation. Clients have a curfew and are not permitted visitors except at scheduled times. Clients are given increased independence as they adhere to program rules such as keeping appointments, returning to the facility as scheduled and completing required chores.

Virtually all clients attend either Crossroads or El Rio from 8:30 a.m. to 5:30 p.m. weekdays and return to Hopper Home to participate in evening and weekend groups. Counselors from these programs communicate with Hopper Home staff several times weekly to report on progress. The WPA also provides support groups for clients and specialized weekly sessions on topics such as developing independent living skills, parenting, stress reduction, and computer training. Staff test for drug use at least three times each week during the residential phase and randomly once the women are living in the community. Hopper Home staff also work with clients to negotiate the Family Court system and advocate for regaining custody of children in foster care.

Program: **Youth Advocacy Project**  
Agency: **Center for Community Alternatives**  
Address: **39 West 19<sup>th</sup> Street**  
**New York, NY 10003**  
Telephone: **(212) 691-1911**  
Executive  
Director: **Marsha Weisman**

The Youth Advocacy Project is the only city-funded ATI program that serves as an alternative to detention for 14- to 16-year-old Juvenile Offenders. A parent or guardian must provide written consent for a youth to be released to YAP. The program primarily provides counseling and community monitoring, has a staff of 13, and utilizes the support staff of the Center for Community Alternatives. Annual project capacity is 100 youth and the current census is 63.

The three-phase system requires school attendance throughout the one-year program. Participants maintain a schedule of on-site individual and group counseling for a minimum of three afternoons weekly, and monitor curfew nightly. As the participant shows increased responsibility and reliability in latter phases, these activities decrease and curfew hours are extended. By approximately the sixth month of attendance the youth is expected to enter phase III, which features placement in a community service program for a minimum of four hours weekly. This work continues until the youth completes the year-long program.

Participant monitoring occurs by telephone, beeper, and home and school visits. In the program's first phase, the monitor will visit the home and school weekly, and the participant must page the monitor each night. Initially, the standard curfew for participants is 8 p.m. on weeknights and 10 p.m. on weekends; however, judges frequently impose earlier curfews. In phase II, home and school visits are bi-weekly and monitoring is usually reduced. In the third phase, all monitoring is done randomly and on an as-needed basis. Project staff rely on family members to locate participants and increase their involvement in the program. YAP also provides weekly family support groups.

Staff report that new YAP clients often use marijuana and alcohol, but rarely use other drugs. In the event that a participant repeatedly tests positive for drug use, YAP counselors will involve the family in treatment, and residential treatment is used for those who do not progress in the program. The program will also accept youth mandated to residential treatment, refer the client, and monitor and report on their progress to the court.

Program: **Project Return Women's Day Treatment Program**

Agency: **Project Return Foundation**

Address: **1484 Inwood Avenue  
Bronx, NY 10452**

Telephone: **(718) 716-3261**

Executive

Director: **Jane Velez**

Project Return's Women's Day Treatment is a drug treatment program specifically for women. Because of program delays, it did not provide services until 1999, one year after the other ATIs in this report. The mission of the Project Return program is to transform participants from drug dependent women into drug free law abiding citizens. Clients must have an open court case, be eighteen years or older, and have a drug problem. Project Return does not accept people on methadone maintenance therapy. The program has a staff of 11, a capacity of 38, and a current census of 24. Unlike the other ATIs, Project Return is operated by a larger drug treatment agency that provides both residential and outpatient drug treatment.

Project Return clients are required to attend the program from 9:00-3:30 daily, and progress through four phases of treatment. Participants attend Project Return for six months to one year depending on individual progress and court supervision. The program uses group and individual counseling to provide drug and alcohol education and relapse prevention. The program also conducts groups on parenting, trauma survival and family issues. The program uses outside programs for educational and vocational programming. Childcare facilities are located on-site in order to maximize participant time in treatment.

## Appendix B: Methodology

*Overview of Data.* The research described in this report covers nine ATI programs: Freedom (general population); Crossroads, El Rio, Flametree, and Project Return (substance abusers); Crossroads, DAMAS, Hopper Home and Project Return (women); the Court Employment Project, and the Youth Advocacy Project (youth).<sup>56</sup> Vera researchers began recruiting felony offenders for this study at most of the ATI sites in February 1998.<sup>57</sup> Newly admitted participants were recruited at each site using weekly referral lists provided by the New York City Criminal Justice Agency (CJA) and the ATI programs. Study intake interviews were conducted on-site as soon as possible and no more than six weeks after entry into the ATI. The research sample is likely to be biased towards participants more likely to remain in the programs because we were less likely to interview participants who did not attend the ATIs regularly in the first weeks of programming. A strict informed consent protocol was followed with those who were available for the interview, and a stipend of \$10 per hour was paid to those who did participate.

In all, 687 ATI participants comprised the study sample, all of whom entered the programs between February 1998 and January 2001. Since one ATI program for women (Project Return) opened in 1999, more of the interviews with women participants occurred in the second half of the study. Tables describing ATI program types (substance abuse treatment, women's, youth, and general population) include all nine programs.

The background information presented in Chapter 2 is based on the responses from the 687 ATI participants with whom the initial interviews were conducted. Background information was collected on the entire sample using a modified version of the Addiction Severity Index (ASI), a standardized instrument.<sup>58</sup> The ASI questionnaire covers a range of areas of personal and family history, including educational, employment, medical, mental health, criminal justice, and substance abuse history.

We tracked time in program from the date of program entry collected at the time of each baseline interview. Research interviewers returned to the programs to conduct follow-up interviews after participants had been in a program for three months. This second, "Time 2," interview covered participants' use of services, their perceptions of the programs, and their

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<sup>56</sup> Each of the ATI programs is run by the larger agency listed here in parentheses: Freedom (the Fortune Society); Crossroads (the Center for Community Alternatives—CCA); El Rio (the Osborne Association); Flametree (the Fortune Society); Project Return Intensive Treatment for Women (Project Return Foundation); DAMAS (the Fortune Society); Hopper Home (the Women's Prison Association); CEP (the Center for Alternative Sentencing and Employment Services—CASES); and YAP (CCA). Crossroads and Project Return serve female substance abusers. A tenth program, STEPS, which serves women who are victims of domestic abuse and who attacked their abusers, was not included in this research due to the unique character of the offences committed by participants in that program.

<sup>57</sup> Project Return opened in 1999. Thus, data collection for this program started later than for the other ATI programs.

<sup>58</sup> McLellan, A.T., Kushner, H., Metzger, D., Peters, R., Smith, I., Grissom, G., Pettinati, H., & Argeriou, M. (1992). The fifth edition of the Addiction Severity Index. *Journal of Substance Abuse Treatment*, 9:199-213. Instrumentation is available from the authors upon request.

status on a subset of these baseline characteristics. Participants who dropped out of the ATIs before three months were not interviewed, nor were participants who were still enrolled in the programs but who were unavailable for interviews either because they were unwilling or because they were not on-site in the ATIs when research staff were there. Of the 687 participants interviewed in our baseline research, 368 completed the second interview. The findings in Chapter 3 are based on these interviews, which used modified versions of several standardized instruments including the ASI, the Treatment Services Review (TSR)<sup>59</sup>, and the Community Oriented Program Environment Scale (COPEs)<sup>60</sup>. The Time 2 interviews asked participants about their life circumstances in the 30 days prior to the interview, about the services they received in the week prior to the interview, and about their perceptions of the program environment. In addition, data on program outcomes for the 591 participants whose ATI cases had been closed by January 2001 was obtained by reviewing case files kept by the ATI programs.

While the numbers of participants in individual programs are small, data which are aggregated into ATI program types (women, substance abuse, general population, and youth) are sufficiently robust to draw conclusions regarding the sample as a whole and each of the given subgroups when compared to all the other ATIs. In Chapters 2 and 3, the programs for women substance abusers are included in the findings for both the substance abuse programs and the women's programs. This assures that the information provided about the participants and programs is useful for assessing whether the program groupings target and serve distinct populations. In Chapters 4 through 6, the type of outcome analyses performed requires that there be no overlap between groups. For this analysis the women substance abuse programs are included only in the women's program category. In these chapters, the substance abuse category refers exclusively to those substance abuse programs serving both men and women (though mostly men). Any distinctions between the women's substance abuse and non-substance abuse programs are noted in the text.

The findings presented in Chapters 2 and 3 are the result of descriptive analyses. Chapter 4 includes descriptive findings as well as the results of bivariate and logistic regressions. Chapters 5 and 6 report descriptive findings as well as those derived from survival analyses. Detailed descriptions of the methodology for these more advanced statistical procedures are provided below.

*Chapter 4: Analyzing Retention and Completion.* Review of files from several ATIs revealed differences among individual programs in case file structure, definition of attendance, and excused and unexcused absences from the program. Creating a definition of program retention

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<sup>59</sup> McLellan, A.T., Alterman, A., Cacciola, J., Metzger, D., & O'Brien, C.P., "A new measure of substance abuse treatment: Initial studies of the treatment services review." *The Journal of Nervous and Mental Disease* 180: 101-110 (1992).

<sup>60</sup> Moos, R.H. (1988) *Community-Oriented Programs Environment Scale Manual*. Palo Alto: Consulting Psychologists Press.

that would adequately reflect those differences was not feasible. Therefore, the researchers defined time in program as the number of days between entry into and exit from the ATI.

The measure of completion was the status assigned by the ATI at the closing of the case. If a participant had transferred to a residential program and remained in that program, the case was considered a successful completion of the ATI program, consistent with the ATI's method of classifying cases.

Binary logistic regression was used to examine the associations between a variety of participant characteristics and the dichotomous outcome of success or failure. Logistic regression was used because we also examined factors with multiple values, such as ATI subgroup, and those which we artificially dichotomized ("none" versus "one or more"). We used data for all participants whose cases were closed, and who had no missing values (n=553).

The final model can explain approximately 35% of the variance in outcome, with the 90-day milestone explaining the greatest amount. While time in program has been shown to be related to positive outcomes such as remaining free of arrest or drug use, it is less interesting in its relation to program completion because participants must complete more than 90 days in order to graduate from any of the ATIs. Because the findings from the logistic regression yield relatively little explanation, future analysis should examine the relevance of other variables – both those measuring program intervention and additional factors not captured in this research. The model shown in Table B1 correctly predicts completion status for 75% of cases.

**Table B1: Logistic Regression Model Results Predicting ATI Completion**

<b>Intake Interview Variable Description</b>	<b>Odds Ratio<sup>61</sup></b>	<b>Coefficient</b>	<b>S. E. (B)</b>
Program Type <sup>62</sup>			
Substance Abuse Treatment	.672	-.396	.307
Women's Programs	1.092	.088	.558
Youth Programs	.751	-.285	.629
Gender (male)	1.110	.104	.476
Years of education	.712	-.338	.350
Age (years)	1.025*	.024	.012
Has no prior convictions§	1.059	.057	.250
Had serious thoughts of suicide§	.480**	-.732	.260
Not incarcerated more than 3 months§	1.065*	.063	.027
Used heroin or cocaine in past 30 days§	.451**	-.795	.288
Spent at least 90 days in ATI	20.065**	2.999	.337
Constant		-1.689	1.924

§ Self-report at first interview

Other multivariate analyses were conducted using retention as a continuous dependent variable. However, even with data transformation, the results were uninformative. Transformation was done because most of the participants' days in the ATI programs climb steeply, and then abruptly drop off at around 180 days, and improvement often is made when logarithmic or exponential changes are made on the troublesome variable. The distribution of this variable so seriously violates the assumption of equal variance and normal distribution that even when manipulated in a number of reasonable ways, the transformation did not satisfy regression requirements.

*Constructing the Comparison Sample.* We selected offenders for the comparison group in collaboration with the Criminal Justice Agency (CJA), the parent organization of CCSS. Until June 1999, CCSS was responsible for screening and targeting felony offenders for the ATI

<sup>61</sup> Throughout the tables in this appendix, the following symbols are used to denote differing levels of statistical significance: \* = p<.05; \*\* = p<.01; \*\*\* =p<.001.

<sup>62</sup> Here, the referent group is "all other programs" adjusted for the other variables in the model. Including ATIs for the general population produces redundancy in the model. That is, by knowing if a participant is in the other three program types, one can deduce if the participant is in the fourth type.

programs. CCSS staff screened potentially eligible offenders by using information about their prior record and current criminal charge to identify people who were likely to receive at least a six-month jail or prison term. CCSS interviewers then assessed defendant need in interviews, and referred appropriate offenders to the ATI programs. CCSS staff made the decision to reject (or not refer) defendants to an ATI based on several factors, including whether the offenders pleaded not guilty or accepted jail time; whether defense counsels, prosecutors, and judges consented to placement; whether court representatives could verify the offenders' community ties; whether offenders met specific criteria for admission into the ATI programs; and whether offenders were willing to attend an ATI program.

Through an agreement with CJA, we used CCSS's records containing the reasons for rejection or non-referral to select our comparison sample. CJA provided us with a subset of offenders not referred from February 1998 through the end of June 1999, including only cases that reached Supreme Court to eliminate people who received criminal court sentences and fines. CCSS staff categorized reasons for not referring offenders to an ATI program and grouped them according to the various sources from which the reason for non-referral originated (for example, adjudicative, district attorney, judge, court representative, or defendant). In an attempt to obtain a group most comparable to our ATI sample, we selected only cases with the following reasons for non-referral within the stated sources: *adjudicative* (cases unavailable for consideration because either a warrant was ordered on the person or the case was missed because it had been disposed without ATI intervention); *defense counsel* (cases refused because of the nature of the instant offense, because either a mandatory state imprisonment was offered or the defendants were offered imprisonment only, or because the defense counsel refused for some other reason); *program* (cases not referred for reasons related specifically to the requirements of the individual ATI programs); and *other/unknown* (cases that were not pursued or rejected for an otherwise not categorized reason).

Using these criteria we selected 3,706 people who were not referred to an ATI program. This group was large enough to generate a comparison sample matched to our ATI participant sample. The sample was identified through a process of individual and group matching with those members of the ATI sample who were admitted to their programs during this same time period (N=377)<sup>63</sup>. Using data from the New York City Criminal Justice Agency (CJA), the researchers selected a set of seven variables on which to match the ATI sample participants with someone from the pool of non-referred defendants who had the same characteristic for each variable. These variables were selected for their published and anticipated association with recidivism. They included demographic factors (gender, age); information about the offense that triggered a defendant's referral or non-referral to an ATI (the county of prosecution, whether it was the defendant's first arrest, the most severe affidavit charge at

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<sup>63</sup> Nine members of the matched ATI sample have been excluded from the recidivism analyses since the match was conducted. Four cases were missing arrest and/or incarceration data and were excluded. In addition, five cases were excluded because one ATI program that had been a part of the earlier research was dropped in the second half of the research. As a result, the final number of cases in the matched ATI sample is 368.

criminal court arraignment, and the defendant's release status leaving criminal court); and information on defendants' prior felonies and misdemeanors.

A single matching variable was defined for each person in the non-referral pool and the ATI sample based on his or her particular combination of these seven variables. Researchers selected a direct match for each ATI participant by randomly selecting a case from the subset of the non-referral cases that had the same matching variable. For example, if there were ten individuals in the ATI sample with a matching variable equal to 15, then ten individuals would be randomly selected from those in the non-referral pool who also had a matching variable with a value of 15. Using this method Vera's researchers were able to match 318 of the 377 ATI participants to a comparison offender from the pool of non-referrals. For the remaining ATI participants who did not have an exact match, a group match was conducted rather than a one-to-one match. Sixty people from the remaining group of non-referrals who were as comparable as possible in terms of each of the seven factors were matched this way.<sup>64</sup>

Statistical testing demonstrated that the two samples are mostly comparable in terms of each of these factors. Table B2 shows that only one of the variables, release status leaving criminal court, was significantly different in the two groups. While significant, these differences affected a very small portion of each sample. The vast majority of both samples were detained leaving criminal court (87 percent of the ATI sample and 99 percent of the comparison group); however, 13 percent less of the ATI sample failed to make bail while 11 percent more were released on their own recognizance.

For a little over two-thirds of people in both groups, the offense for which they were either placed in an ATI program or screened by CCSS ("the instant offense") was their first arrest. The most severe charge at arraignment was about evenly split between drug offenses and violent felony offenses. A little more than two-thirds of both groups had no prior felony or misdemeanor convictions. Among those with a prior felony or greater than five misdemeanors, ATI participants were more likely to have a prior felony conviction (63%), than the comparison group (43%), but this difference was not statistically significant.

Although the two samples are similar in terms of the seven factors we incorporated into our matching process, the comparability of a match group is, at best, an approximation. While the match seeks to account for the differences thought to be most important, there are always other factors that are not considered that may affect recidivism and on which the comparison and ATI groups may differ. For example, we did not take into consideration any indicators of the offender's social or economic stability. Nonetheless, the comparison group provides a yardstick against which to measure the recidivism of the ATI participants.

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<sup>64</sup> One member of the matched comparison group was excluded because she was admitted to one of the study ATIs on the same day that CJA recorded her as a non-referred case. She remained a member of the ATI sample.

**Table B2: Characteristics of Comparison and ATI Samples<sup>65</sup>**

<b>Sample Characteristics</b>	<b>ATI Sample (n=368)</b>	<b>Comparison Sample (n=375)</b>	
<b>Sex</b>			
Female	26%	21%	
Male	74%	80%	
<b>Age</b>			
Less than 18 years old	22%	23%	
18-24 years old	45%	38%	
25-34 years old	15%	18%	
35+ years old	18%	21%	
<b>County/Court of Prosecution</b>			
Bronx	29%	23%	
Brooklyn	29%	29%	
Manhattan	30%	33%	
Queens	11%	15%	
Unknown	1%	0%	
<b>First Arrest</b>			
No	65%	69%	
Yes	35%	31%	
Unavailable	0%	0%	
<b>Most Severe Affidavit Charge (Criminal Court Arraignment)</b>			
Violent Felony Offense	47%	52%	
Drug Offense	47%	43%	
Neither	5%	6%	
<b>Release status leaving criminal court</b>			
Parole continued (ROR)	1%	0%	
Released on recognizance (ROR)	11%	0%	***
Bail made, defendant released	2%	1%	
Bail not made, defendant incarcerated	86%	99%	***
Remanded	1%	0%	

<sup>65</sup> Missing cases were excluded.

**Table B2 *continued*: Characteristics of Comparison and ATI Samples**

<b>Sample Characteristics</b>	<b>ATI Sample (n=368)</b>	<b>Comparison Sample (n=375)</b>
<b>Prior felonies and misdemeanors</b>		
No felonies, no misdemeanors	70%	65%
No felonies, less than 6 misdemeanors	13%	15%
Prior felony <u>or</u> greater than 5 misdemeanors	13%	18%
Missing felonies and misdemeanors	4%	2%

Note: Sample does not add up to 100% for some variables due to rounding.

*Matched ATI Group.* Due to the interviewing patterns of our data collection, women substance abusers are less represented in the matched ATI sample than in the portion of the sample collected after June 30, 1999. As described in Chapters 2 and 3 these participants tended to be older, to be sentenced to an ATI on a drug charge, and to have more prior convictions than the rest of the ATI participants. In addition, ATI programs have hypothesized that changes in crime and policing patterns and case processing trends over the course of the study have resulted in a shift in the makeup of the population of offenders referred to their programs. As a result, as can be seen in Table B3, there are some significant differences between the matched ATI population and the ATI participants who entered the study after the match was conducted.

As expected given our data collection patterns, the post-match ATI sample has a significantly greater proportion of women than the matched ATI sample (41 percent compared to about a quarter of the matched ATI sample). In addition, the post-match sample is significantly older and significantly more likely to have come into the program after being arraigned in criminal court for a drug rather than a violent offense (nearly two-thirds of the post-match sample came into the ATI on a drug offense as opposed to a little under half of the matched ATI sample participants). Furthermore, those entering the sample in the later half of the study are significantly more likely to have been released on their own recognizance leaving criminal court (21 percent versus 11 percent), to have at least one prior conviction (45 percent versus 30%), and to have had a prior felony conviction or more than 5 misdemeanor convictions prior to ATI referral (22 percent versus 13 percent). Overall, the post-match ATI sample is older, more female, and is weighted towards drug offenders with more extensive criminal justice histories than is seen in the matched ATI sample.

**Table B3: Characteristics of Matched and Post-Matched ATI Samples<sup>66</sup>**

<b>Sample Characteristics</b>	<b>Post-Matched ATI (n=303)</b>	<b>Matched ATI (n=368)</b>
<b>Sex</b>		
Female	41%	26% ***
Male	59%	74%
<b>Age</b>		
Less than 18 years old	19%	22%
18-24 years old	35%	45% **
25-34 years old	17%	15%
35+ years old	29%	18% **
<b>County/Court of Prosecution</b>		
Bronx	37%	29%
Brooklyn	30%	29%
Manhattan	26%	30%
Queens	4%	11% ***
Unknown	4%	1% **
<b>First Arrest</b>		
No	70%	65%
Yes	30%	35%
Unavailable	0%	0%
<b>Most Severe Affidavit Charge (Criminal Court Arraignment)</b>		
Violent Felony Offense	29%	47% ***
Drug Offense	61%	47% ***
Neither	10%	5% *
<b>Release status leaving criminal court</b>		
Parole continued (ROR)	0%	1%
Released on recognizance (ROR)	21%	11% ***
Bail made, defendant released	3%	2%
Bail not made, defendant incarcerated	76%	86% ***
Remanded	0%	1%

<sup>66</sup> Missing cases were excluded.

**Table B3 *continued*: Characteristics of Matched and Post-Matched ATI Samples**

Sample Characteristics	Post-Matched ATI (n=303)	Matched ATI (n=368)
<b>Prior felonies and misdemeanors</b>		
No felonies, no misdemeanors	55%	70% ***
No felonies, less than 6 misdemeanors	13%	13%
Prior felony <u>or</u> greater than 5 misdemeanors	22%	13% **
Missing felonies and misdemeanors	10%	4% **

Note: Sample does not add up to 100% for some variables due to rounding.

In order to protect the integrity of the comparisons between the ATI participants and offenders in the comparison group, all analyses that compare the two groups only include the portion of the ATI sample to which the comparison group was matched.

*Defining Recidivism.* Data on arrests and dispositions were provided by the New York State Division of Criminal Justice Services (DCJS). For the purpose of this report, recidivating was defined as being arrested for a crime that occurred on or after the day a defendant was admitted to a study ATI (ATI sample) or not referred to an ATI (comparison sample) and which resulted in a conviction by the last day for which we have arrest and disposition data, November 1, 2000. Furthermore, in order to more specifically address concerns about public safety, the analysis only includes crimes that occurred while a person was living in the community.<sup>67</sup> Because DCJS only releases information on adult arrests that are not given a youthful offender status, it is possible that our data underestimates the number of new arrests leading to conviction for the youngest offenders in the ATI and comparison samples.

Disposition outcomes were derived from the DCJS collapsed disposition codes. DCJS provides a charge related disposition code and a disposition code that also includes non-charge related dispositions such as resentences or seals. On advice from DCJS, the latter disposition code was used to determine whether or not defendants' arrests resulted in conviction. The following case outcomes were considered convictions: conviction, type unknown; conviction by verdict; conviction by plea; YO adjudication, type unknown; YO adjudication by verdict; and YO adjudication by plea. A defendant was considered not convicted if the disposition was labeled acquitted, dismissed, no true bill, prosecution declined, unknown favorable disposition, removed to family court, covered by/consolidated, and other. There were some arrests in the DCJS data set for which the disposition codes were blank. These arrests were also not counted

<sup>67</sup> One member of the ATI sample (who is also included in the Matched ATI sample) and 6 members of the Matched Comparison sample were arrested and later convicted for a [post-ATI admission or rejection] crime that occurred while they were incarcerated. These events were not counted as a recidivating event. Instead, only any later arrests with an eventual conviction for a subsequent crime that occurred while they were in the community were counted as recidivating events.

as convictions (there were 19 of these in the matched comparison data, 18 in the matched portion of the ATI sample and 2 in the post-match ATI sample).

In addition, a number of participants in the ATI and comparison samples had new arrests that were coded as having only interim dispositions or no disposition information. On advice from DCJS, we initially planned to count these as non-convictions. However, these dispositions occurred disproportionately in the matched ATI group (see Table B4 for the distribution of these cases). Some of these arrests were likely to result in convictions (e.g., those with an interim disposition stating the case had been transferred to supreme court). Counting these as non-convictions would have undercounted recidivism, biasing our findings in favor of the ATI group. Another possibility was to include these dispositions as convictions. However, some of the cases were likely to result in dismissals (for example, those that were adjourned in contemplation of dismissal). As a result, considering all these arrests as arrests leading to conviction would overestimate recidivism, biasing against the ATI group.

In order to minimize the biasing effects of this difference between the ATI and comparison groups, we considered two alternatives. One involved trying to reduce the number of cases with unresolved dispositions by making reasonable estimates about case outcomes where possible.<sup>68</sup> However, this approach introduced additional potential for error by presuming outcomes. Instead, we chose to exclude from the recidivism analysis all sample members who only had post ATI admission or non-referral arrests that were coded by DCJS as having interim or no disposition outcomes<sup>69</sup>. As a result, 50 cases were excluded from the matched ATI sample and 22 cases were excluded from the comparison group. Findings from each of the alternate recidivism analyses can be found in Appendix C.

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<sup>68</sup> Cases that were transferred to Supreme Court would be considered convictions and counted as a recidivation event. Those that were adjourned in contemplation of dismissal would be considered non-convictions and not included as a recidivating event. Finally, misdemeanor arrest charges more than one year old that had not yet been arraigned would also be considered non-convictions.

<sup>69</sup> If there was a later arrest with a conviction, the participant was included and this later arrest was counted as their recidivating event.

**Table B4: Distribution of Re-Arrests with Interim or No Dispositions  
ATI and Comparison Samples**

<b>Disposition Type</b>	<b>ATI Sample (N=50)</b>	<b>Comparison Sample (N=22)</b>
<b>Not Yet Arraigned</b>	35%	14%
<b>Arraigned</b>	2%	0%
<b>Held for Grand Jury</b>	2%	5%
<b>Transferred to Supreme Court</b>	29%	50%
<b>Bench Warrant Issued</b>	6%	5%
<b>Returned on Warrant</b>	6%	9%
<b>Adjourned in Contemplation of Dismissal</b>	20%	18%

*Calculating Time at Risk.* In addition to measuring rearrest rates according to calendar time, recidivism was measured according to the amount of this time participants actually spent free in the community and at risk for reoffending. People’s time at risk started on the day they were either admitted to a study ATI (ATI sample) or not referred to an ATI (comparison sample). If someone was incarcerated on the day of this event, their time at risk began if and when they were released back to the community. The last day for which we have DCJS data, November 1, 2000, served as the cut-off date for measuring time at risk. People’s time at risk “clocks” stopped either when they had a recidivating event or, if they did not recidivate, on November 1, 2000, the DCJS data cut-off date.

Data from the New York City Department of Corrections (DOC) and the New York State Department of Correctional Services (DOCS) online inmate locator service were used to track any time sample participants spent incarcerated between their individual start and end dates. These days were counted as days participants were *not* at risk and were subtracted from their total calendar time in the study to give the total number of days spent in the community. There were eight cases from the matched ATI sample which had a DOC admit date with no corresponding discharge date. Because we had no way to know when they were released, these admit dates were excluded and the sample participant was considered to be at risk.

We did not have access to data on sample participants detained by the Department of Juvenile Justice and DOCS data for youthful offenders is not publicly available. As a result, we had to piece together the time that juvenile offenders and youthful offenders spent incarcerated. This was done through two avenues. We used New York City Criminal Justice Agency (CJA)

data on the court history for the offense that brought sample participants either into the ATI or into the comparison group. This allowed us to track any time that a juvenile or youthful offender was detained for this offense while being monitored by the court. This time was then subtracted from the youth's time at risk. Time youth spent incarcerated after receiving their final sentences for these offenses had to be estimated from the sentence length. To guard against over counting the time at risk for these participants, a conservative standard was used to estimate the length of time served. For youth receiving indefinite sentences, they were assumed to have served two-thirds of their maximum sentence time. Those given definite sentences were also assumed to have served two-thirds of their sentence time. Those serving split sentences were assumed to have served their full sentence time. Any days a youth spent incarcerated prior to receiving this final incarcerative sentence was subtracted from these estimated incarceration times.

There were six youth in the juvenile offender program for whom CJA could not get complete pre-sentence case history or their final sentence information either because the youth's case was transferred to family court or because they had no public record available. These youth were considered to be in the community after the last date for which CJA data was available.

*Survival Analysis.* Due to concerns that the comparability of the ATI and comparison samples was compromised by excluding participants with interim and missing dispositions, all survival analyses reported in Chapter Four controlled for the variables on which the two groups were originally matched. Specifically, the following characteristics were used as control variables: gender, age (continuous), county/court of prosecution, the nature of the instant offense (violent or not), whether the defendant was detained leaving their criminal court arraignment for the instant offense, and the severity of their criminal history. The severity of criminal history variable dichotomizes those with a prior felony offense and/or more than 5 misdemeanors from those with no prior felonies and 0 to 5 prior misdemeanor convictions. This variable was highly correlated with the variable measuring whether the instant offense was a study participant's first arrest or not. As a result, this variable was not used as a control variable. The analysis that looks at the likelihood of recidivism by program type uses the entire ATI sample. Due to the differences between the matched and the post-match ATI samples, year of program entry was included as a control variable for this analysis.

The predictive strength of the model for each of the survival analyses presented in Chapters 5 and Chapter 6 are presented below.

**Table B5: Likelihood of Not Being Arrested  
ATI and Comparison (Figure 5a)**

<b>Variable</b>	<b>B</b>	<b>Standard Error</b>	<b>Wald</b>	<b>df</b>	<b>p-value</b>	<b>Risk Ratio</b>
<b>ATI participant</b>	.13	.14	.89	1	.35	1.14
<b>Age</b>	-.02	.01	7.00	1	.01	.98
<b>Male</b>	-.25	.18	1.96	1	.16	.78
<b>Violent instant offense</b>	.31	.17	3.40	1	.07	1.36
<b>Prosecuted in the Bronx</b>	-.23	.18	1.69	1	.19	.79
<b>Prosecuted in Brooklyn</b>	.22	.19	1.38	1	.24	1.25
<b>Prosecuted in Queens</b>	.34	.28	1.54	1	.21	1.41
<b>Released at Criminal Court arraignment</b>	.42	.32	1.72	1	.19	1.52
<b>Prior felony and 6 or more misdemeanor convictions</b>	-.65	.18	12.66	1	.00 **	.52

Being in an ATI program was not significantly associated with being more likely to survive over two years without a new arrest, holding other factors constant (Table B5). However, all other variables held constant, older study participants and those with more serious or extensive criminal justice history backgrounds were significantly less likely to be rearrested.

Controlling for other predictive factors, completing an ATI program strongly and significantly reduced the likelihood of rearrest (completers were less than half as likely to be rearrested as non-completers and comparison group members). In addition, greater age and severity of criminal history continued to lower someone’s likelihood of recidivating (Table B6).

**Table B6: Likelihood of Not Being Arrested  
Completers and Noncompleters (Figure 6a)**

<b>Variable</b>	<b>B</b>	<b>Standard Error</b>	<b>Wald</b>	<b>df</b>	<b>p-value</b>	<b>Risk Ratio</b>
<b>ATI Completer</b>	-.96	.20	22.28	1	.000 ** *	.38
<b>Age</b>	-.02	.01	5.40	1	.02	.98
<b>Male</b>	-.24	.18	1.75	1	.19	.79
<b>Violent instant offense</b>	.26	.17	2.26	1	.13	1.29
<b>Prosecuted in the Bronx</b>	-.24	.18	1.80	1	.18	.78
<b>Prosecuted in Brooklyn</b>	.25	.19	1.69	1	.19	1.28
<b>Prosecuted in Queens</b>	.34	.28	1.48	1	.22	1.40
<b>Released at Criminal Court arraignment</b>	.36	.32	1.27	1	.26	1.43
<b>Prior felony and 6 or more misdemeanor convictions</b>	-.66	.19	12.68	1	.000 ** *	.52

Participants in the women’s programs were about half as likely to be rearrested as the participants in the rest of the ATIs, holding other factors constant (Table B7). In addition, age and having a prior felony conviction or more than five misdemeanor convictions made participants significantly less likely to reoffend. Finally, in this model, participants who were assigned to the ATI by a Bronx court were also less likely to reoffend.

**Table B7: Likelihood of Not Being Arrested  
ATI Program Type (Figure 6b)**

<b>Variable</b>	<b>B</b>	<b>Standard Error</b>	<b>Wald</b>	<b>df</b>	<b>p-value</b>	<b>Risk Ratio</b>
<b>Women's program</b>	-.76	.33	5.19	1	.02 *	.47
<b>Age</b>	-.04	.01	12.22	1	.001 *	.96
<b>Violent instant offense</b>	.25	.23	1.21	1	.27	1.29
<b>Prosecuted in the Bronx</b>	-.64	.24	7.28	1	.007 *	.52
<b>Prosecuted in Brooklyn</b>	-.24	.25	.92	1	.34	.79
<b>Prosecuted in Queens</b>	-.15	.35	.19	1	.66	.86
<b>Released at Criminal Court arraignment</b>	.47	.27	3.09	1	.08	1.61
<b>Prior felony and 6 or more misdemeanor convictions</b>	-.64	.26	5.90	1	.02 *	.53
<b>Admitted in 1998</b>	.60	.36	2.88	1	.09	1.83

## Appendix C: Alternative Measures of Recidivism

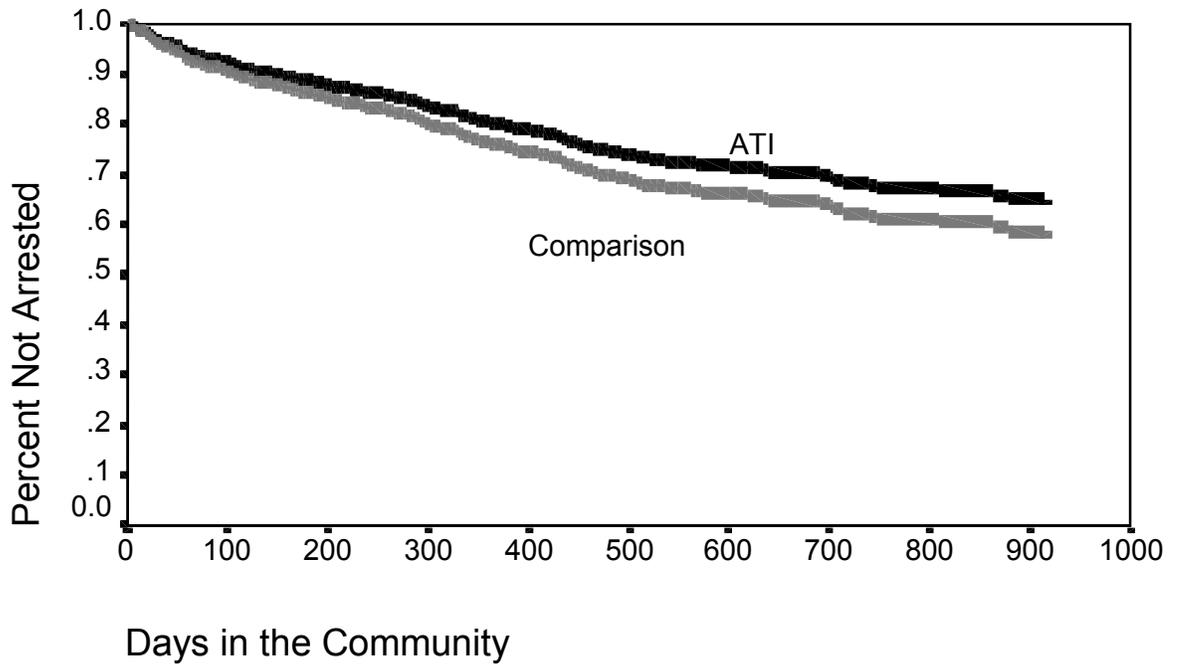
We conducted survival analyses for each of the three alternative ways of addressing the disproportionate number of ATI participants who had new arrests for which there was no final disposition. The findings from each of these analyses are presented below. The first analysis counts these arrests as nonconvictions and therefore does not include them as recidivating events.

When study participants whose rearrests were lacking final dispositions are included in the survival analysis and counted as non-recidivists, there is still no significant difference between the ATI and Comparison samples' likelihood of rearrest after over two years in the community, controlling for other factors (see Figure C1, Table C1). Three control variables were found to be significantly associated with rearrest. Age was negatively correlated with rearrest; for each year of age, study participants' likelihood of rearrest decreased by 2 percent. Members of both the ATI and Comparison sample who had a violent instant offense were about 40 percent more likely to get arrested than those coming in for a drug or other offense. Finally, people with the most severe criminal justice histories were about half as likely to get rearrested as those with no or less severe criminal justice histories.

**Figure C1: Likelihood of Not Being Arrested,**

**Interim/No Dispositions as Nonconvictions**

**ATI and Comparison Samples**



**Table C1: Likelihood of Not Being Arrested, Interim/No Disposition as Nonconviction  
ATI and Comparison Samples**

<b>Variable</b>	<b>B</b>	<b>Standard Error</b>	<b>Wald</b>	<b>df</b>	<b>p-value<sup>70</sup></b>	<b>Risk Ratio</b>
<b>ATI participant</b>	.21	.14	2.27	1	.13	1.24
<b>Age</b>	-.02	.01	4.62	1	.03	.98
<b>Male</b>	-.19	.18	1.12	1	.29	.83
<b>Violent instant offense</b>	.35	.17	4.43	1	.04 *	1.42
<b>Prosecuted in the Bronx</b>	-.31	.18	2.99	1	.08	.74
<b>Prosecuted in Brooklyn</b>	.20	.19	1.13	1	.29	1.22
<b>Prosecuted in Queens</b>	.37	.28	1.76	1	.18	1.45
<b>Released at Criminal Court arraignment</b>	.46	.31	2.18	1	.14	1.59
<b>Prior felony and/or &gt; 5 misdemeanor convictions</b>	-.64	.18	12.14	1	.001 * *	.53

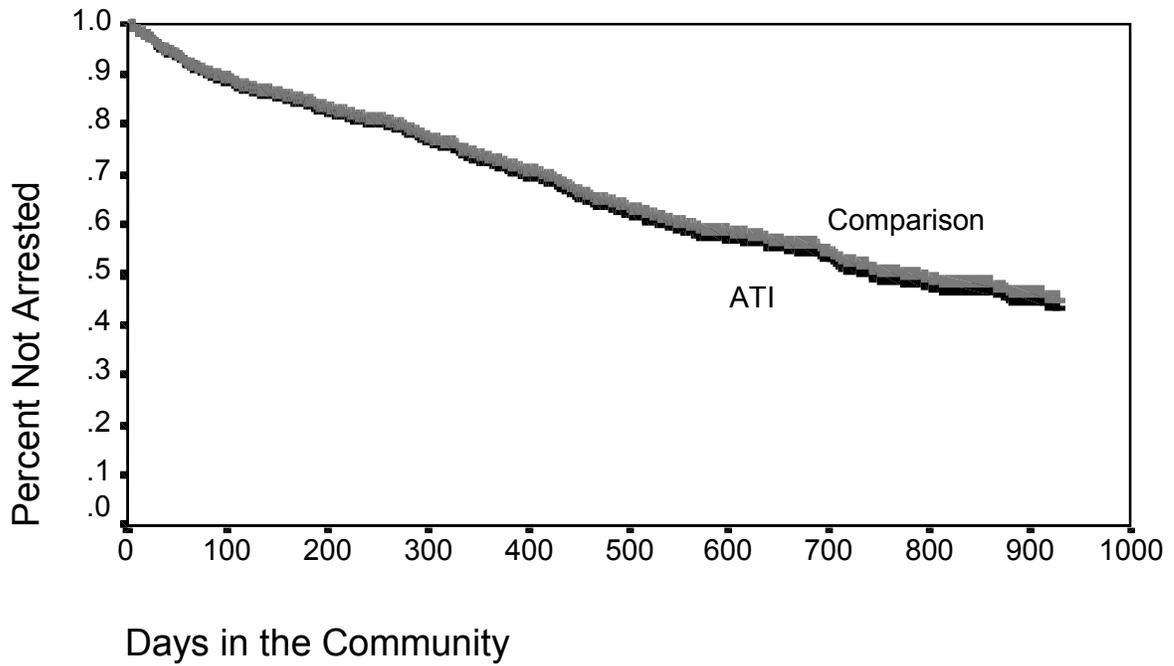
There continue to be no significant differences between the ATI and Comparison samples when arrests with interim or no dispositions are counted as recidivating events (see Figure C2 and Table C2). Again, several of the control variables were significantly associated with rearrest. Controlling for all other factors, older male study participants were significantly less likely to be rearrested, as were those with the most serious histories of criminal justice involvement.

<sup>70</sup> Throughout the tables in this appendix, the following symbols are used to denote differing levels of statistical significance: \* = p<.05; \*\* = p<.01; \*\*\* =p<.001.

**Figure C2: Likelihood of Not Being Arrested**

**Interim/No Disposition as Arrest**

**ATI and Comparison Samples**



**Table C2: Likelihood of Not Being Arrested, Interim/No Disposition as Arrest  
ATI and Comparison Samples**

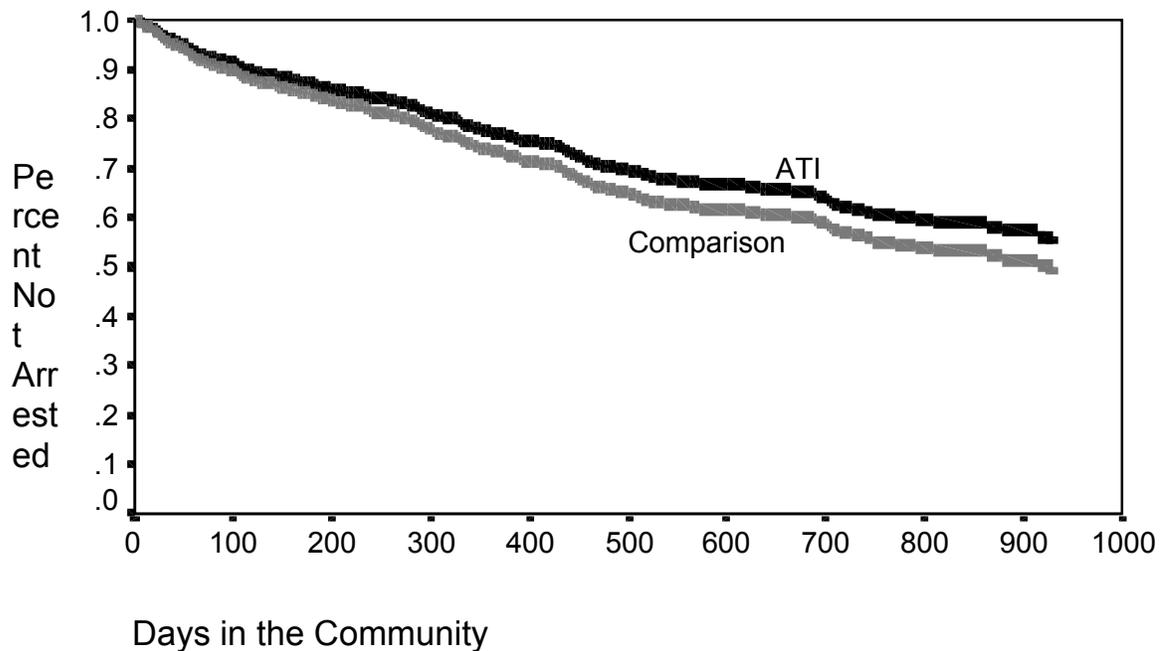
Variable	B	Standard Error	Wald	df	p-value	Risk Ratio
ATI participant	-.04	.12	.12	1	.73	.96
Age	-.03	.01	11.87	1	.001 **	.97
Male	-.40	.16	6.30	1	.01 *	.67
Violent instant offense	.25	.14	3.10	1	.08	1.28
Prosecuted in the Bronx	-.09	.16	.30	1	.58	.92
Prosecuted in Brooklyn	.14	.15	.82	1	.37	1.15
Prosecuted in Queens	.16	.21	.58	1	.45	1.18
Released at Criminal Court arraignment	.17	.24	.51	1	.47	1.19
Prior felony and/or > 5 misdemeanor convictions	-.62	.17	13.70	1	.000 ***	.54

If outcomes are assumed for arrests with interim dispositions that are reasonably likely to result in convictions or dismissals and the remaining participants with unpredictable interim dispositions are excluded from the analysis, the ATIs and comparison groups remain in a statistical dead heat, controlling for other factors (figure C3 and Table C3).<sup>71</sup> In this analysis, being older, male, and having a more severe and/or extensive criminal justice history all were significantly associated with lower rates of rearrest. Coming into the study for a violent offense made participants about 30 percent more likely to be rearrested, controlling for all other factors.

**Figure C3: Likelihood of Not Being Arrested**

**Interim/No Disposition Outcomes Assumed**

**ATI and Comparison Samples**



<sup>71</sup> The following case outcome assumptions were made: cases that had been transferred to Supreme Court were assumed to result in conviction; cases that were adjourned in contemplation of dismissal were assumed to result in dismissal; and misdemeanor cases that were over a year old and had not proceeded past arraignment were assumed to result in dismissal. The remaining participants whose rearrests had no final disposition were excluded from the analysis (N=21 for ATI and N=7 for comparison).

**Table C3: Likelihood of Not Being Arrested,  
Interim/No Disposition Outcomes Assumed  
ATI and Comparison**

<b>Variable</b>	<b>B</b>	<b>Standard Error</b>	<b>Wald</b>	<b>df</b>	<b>p-value</b>	<b>Risk Ratio</b>
<b>ATI participant</b>	.18	.13	1.72	1	.19	1.19
<b>Age</b>	-.02	.01	6.99	1	.01 *	.98
<b>Male</b>	-.36	.17	4.43	1	.04 *	.69
<b>Violent instant offense</b>	.29	.16	3.47	1	.06 *	1.34
<b>Prosecuted in the Bronx</b>	-.15	.17	.75	1	.39	.86
<b>Prosecuted in Brooklyn</b>	.30	.18	2.86	1	.09	1.34
<b>Prosecuted in Queens</b>	.39	.25	2.43	1	.12	1.48
<b>Released at Criminal Court arraignment</b>	.29	.29	1.05	1	.31	1.34
<b>Prior felony and/or &gt; 5 misdemeanor convictions</b>	-.64	.18	12.56	1	.000 ***	.53

**Conclusion**

Regardless of how recidivism was defined, participants in the ATI and Comparison groups were equally likely to be rearrested after over two years in the community, when other predictive factors were controlled for. In all the models, age and severity of criminal justice history were negatively associated with rearrest. In two models, men were also less likely to be rearrested while in two of the models, those with a violent offense were significantly more likely to be rearrested, holding all other factors constant.