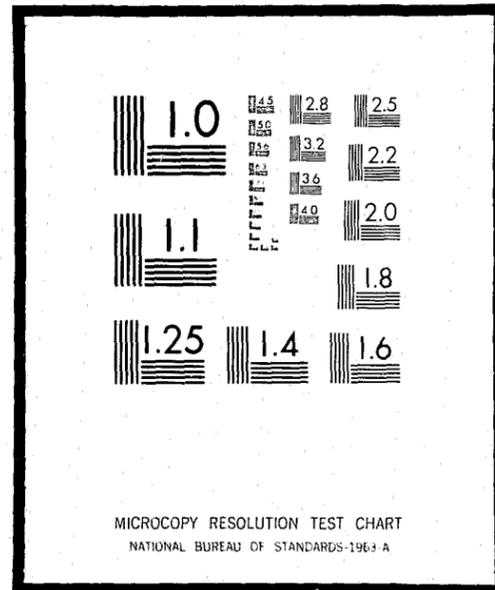


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NATIONAL CRIMINAL JUSTICE REFERENCE SERVICE  
WASHINGTON, D.C. 20531

Date filmed,

1/12/76

ADULT CORRECTIONS DRUG COUNSELING UNIT  
Delaware Division of Drug Abuse  
74-005

A Project Evaluation

Submitted to the Executive Committee  
of the  
Delaware Agency to Reduce Crime

Prepared by  
Pat Robinson

October 1975.

29799

Evaluation

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## ABSTRACT

In August 1974, the Delaware Agency to Reduce Crime awarded \$34,000 to the Division of Drug Abuse for the Adult Corrections Drug Counseling Unit. This Unit was comprised of three drug counselors and a drug counselor supervisor who were housed in an office in the Delaware Correctional Center. The main purpose of the Unit was to screen, diagnose and evaluate incarcerated drug abusers and where appropriate, recommend alternative treatment programs. A secondary purpose of the Unit was to provide direct counseling within the institution for drug abusers.

The proposal contained no section entitled goals or objectives so it was not possible to evaluate the project in relation to achieving specific and quantifiable purposes (the continuation proposal, 75-008, does contain specific goals and quantifiable objectives). It was found that during the period from August 1974 through September 1975, the following number of persons were serviced:

Number of persons screened for admittance	256
Number of clients admitted to the project	103
Number of clients recommended to a treatment alternative	69
Number of persons released to a treatment alternative	65

According to data provided by the project director and records at the Delaware Correctional Center, of the 65 persons released to date, only six have returned to prison for violating conditions of their release or for new charges. Nine other released clients had been returned to prison, but these clients had been placed on pre-trial release and were returned to prison as part of their sentence rather than for violating conditions of release.

The most serious problem of the project was the severe staff shortage during its first seven months. At this writing there were no staff vacancies, so possibly this problem has been remedied. Considering the staff problems, the project performed well. The fact that of the 69 recommendations made for alternative treatment 65 were approved was some indication of the thoroughness of the Units' screening and evaluations.

Although it was not possible to determine the impact of this project, it was determined that the Adult Corrections Drug Counseling Unit served the correctional system in the following ways:

1. Through specialized training in areas of recognizing specific types of drug abuse and in knowing what treatment programs were available and appropriate, staff of the Unit represented an additional resource for the decision makers concerned with treatment.
2. Through group and individual counseling provided by the Unit the project represented an additional treatment alternative within the prison.
3. Through recommendations for alternative treatment programs, the Unit helped to reduce the overcrowded conditions at the Delaware Correctional Center.

Although the goals and objectives of the proposal were not quantifiable, the activity of the project was directly related to their intentions. With the exception of the staff vacancies, the evaluation found no major problems with the performance of the project. The following recommendations were made:

1. The position of Drug Counselor should be reviewed. If it is found that the functions, duties and responsibilities of a drug counselor are similar to those of other counselors, the position should be upgraded so that qualifications and salaries are comparable to other counselors in the Merit System. At the present time it is not.
2. A formal follow-up procedure should be implemented so that the impact of the project can be determined.
3. There is some indication that the concept of the Drug Counseling Unit has been expanded from simply providing a screening/diagnostic service to providing a counseling-treatment service for incarcerated drug abusers. Such a shift would represent a major change in the project, and any such program adjustment should be brought before the Grants Advisory Committee for approval.

In addition to these recommendations, the evaluation raised the question of whether or not four staff persons are necessary to perform the amount of projected work. It could not be determined if the 256 clients served represented all the clients in need of the service (which would be approximately 6 clients per staff person per month) or if this number represented only the number of clients the Unit could handle due to the staff shortages. If the number served does in fact represent the number in need of the service, it may be more appropriate to expand the screening/diagnostic service to the Sussex Correctional Institution rather than to expand the counseling services at the Delaware Correctional Center.

## I. Introduction

In August 1974, the Delaware Agency to Reduce Crime awarded \$34,000 to the Division of Drug Abuse for the Adult Corrections Drug Counseling Unit.<sup>1</sup> The funds were used for one Drug Counselor Supervisor, one Drug Counselor II, two Drug Counselor I's and necessary equipment and supplies.<sup>2</sup> The four counselors were housed in an office in the Delaware Correctional Center. Although not clearly stated in the application, the main purpose of the Adult Corrections Drug Counseling Unit was to screen, diagnose and evaluate incarcerated drug abusers and where appropriate recommend alternative treatment programs. A secondary purpose of the Unit was to provide direct counseling to these same incarcerated individuals.

The Adult Corrections Drug Counseling Unit was separate and distinct from the NARCONON program also operating within the Delaware Correctional Center. Although both NARCONON and the Drug Counseling Unit dealt with the incarcerated drug abuser, NARCONON was geared more toward the long term sentenced offender while the Drug Counseling Unit was geared to the incarcerated drug abuser who was eligible for release to an alternative treatment program (persons in pre-trial and pre-sentence status were included in this group). These two programs were the only drug related projects operating in the prison.

## II. Operation

The Drug Counseling Unit operated on a referral system (often self-referral) rather than on an active case seeking basis. When an inmate sought the help of the Unit, or was referred to the Unit, he would undergo an initial screening. This

<sup>1</sup>In 1972, the DARC approved an application entitled "Adult Corrections Drug Counseling Unit" (FA-48-72). The purpose of this grant was to provide intensive pre-release counseling to short term offenders with drug related backgrounds. More specifically, 100 drug addicted short-term prisoners were to be identified, and intensive counseling, both individual and group (ten groups of ten) was to be provided. The objectives of the grant were not met, and the grant was not renewed after the first year. Remaining funds were reassigned to support a NARCONON program. The current "Adult Corrections Drug Counseling Unit" (74-005) was submitted and approved as an original application.

<sup>2</sup>See Table 1, page 8, for a budget breakdown for 74-005 Adult Corrections Drug Counseling Unit.

initial screening, in which it would be decided if the person would become a client, was very important. Since the inmates were aware that the Unit represented a way to get out of prison, referrals had to be thoroughly screened to insure that only those who were truly motivated for treatment were accepted into the project. This initial screening involved at least three interviews with the inmate, one of which would involve two drug counselors. In addition to the interviews, the inmate's legal status was determined and his background was investigated. According to the application, in order for an inmate to be accepted as a client, all of the following criteria had to be met:

1. The client must be a confirmed drug abuser.
2. The amount or type of drug abuse must be such as to present a problem to that individual's emotional or social adjustment.
3. The individual must exhibit a level of motivation to change such that he would be amenable to completion of a treatment plan.
4. His legal status should be such that a feasible plan for treatment would not be immediately discarded by the Criminal Justice System.<sup>3</sup>

What happened to a client upon acceptance into the program depended to a large extent upon the inmate's legal status (i.e. pre-trial, sentenced, pre-parole). Generally, the client would undergo further evaluation consisting of more intensive interviews and medical and psychological examinations. At the appropriate time the Unit would bring the recommendation to the Drug Evaluation Team.<sup>4</sup> If the DET approved the recommendation for alternative treatment, a representative of the agency offering the treatment program interviewed the client.

<sup>3</sup>There was no empirical measure of these criteria. A decision as to whether or not a client met the criteria was based on background investigation and the subjective judgement of the drug counselors.

<sup>4</sup>The Drug Evaluation Team (DET) is a special group (appointed by the Director of the Division) composed of physicians, psychologists, social workers, vocational rehabilitation specialists, drug counselors and representatives from community agencies whose responsibility is to assist all Drug Abuse Treatment and Education Centers in determining the proper treatment modality for all referred patients. Also, the DET accepts all referrals made by any state or private agency or individual seeking an evaluation, if such persons are felt to be a drug abuser.

If the agency was willing to accept the client, the recommendation was taken to the appropriate authority (sentencing judge, parole board, etc.) for a final decision.

In addition to screening, diagnosing, evaluating and making recommendations, the Unit provided immediate counseling directed at preparing a client for entry into the alternative treatment program.

In May 1975, the counselor supervisor of the Unit initiated a Drug Therapy Group. This group was for sentenced men in medium security who were eligible for release to a community based program.

### III. Findings

#### A. Performance

The application for this project contained no section entitled goals or objectives. However, from the project narrative, the evaluator interpreted the following to be the goals and objectives of the Adult Corrections Drug Counseling Unit:

##### Goals

- a. To meet the specialized needs of the incarcerated drug abuser through the use of a highly trained staff to work in conjunction with the entire prison rehabilitative structure.
- b. To significantly reduce recidivism, increase the client's sense of personal responsibility towards himself, his family and the community.
- c. To increase the use of establishing positive treatment, education, social and employment opportunities.

##### Objectives

- a. To act as a coordinating agent for the various rehabilitative agencies coming in contact with the project's clients.
- b. To issue information, evaluations and recommendations to the various decision making agencies with which clients are involved.
- c. To provide opportunities for the motivated client to identify and attempt to resolve the underlying cause of his drug dependency through a positive counseling relationship.

- d. To provide intensive orientation counseling for the pre-release client as well as short-term supportive counseling upon his release.
- e. To conduct the intensive Drug Evaluation Team interviews.

Since these goals and objectives were not quantifiable, the performance of the project could not be assessed in terms of their accomplishment.<sup>5</sup> However, the activity of the project in terms of clients served could be assessed. Table 2, page 9, describes the performance of the project in terms of persons served. Briefly, the following occurred from August 1, 1974 through September 1, 1975:

Number of persons screened for admittance	256
Number of clients admitted to the project	103
Number of clients recommended to a treatment alternative	69
Number of persons released to a treatment alternative	65

According to data provided by the project director and records at the Delaware Correctional Center; of the 65 persons released to date, only six have returned to prison for violating conditions of their release or for new charges. Nine other released clients had been returned to prison, but these clients had been placed on pre-trial release and were returned to prison as a part of their sentence rather than for violating conditions of release.

Although the goals and objectives of the project were not directly measurable, the above data and the overall operation of the project indicated that the activity occurring in the project was associated with their intentions and purposes.

#### B. Problems

##### 1. Staff Vacancies

This project suffered from continual staff vacancies. Although a total of four positions were approved, the Unit maintained an average of only two staff from August 1, 1974 through July 1, 1975. For only two months during this time were there no vacancies in the Unit.<sup>6</sup>

<sup>5</sup>The continuation proposal contains clearly labeled goals and quantifiable objectives.

<sup>6</sup>Table 3, page 10, indicates the number of positions filled by month. At the time of this writing, the Unit had no vacancies. The last vacancy was filled on July 16, 1975.

In light of the current unemployment situation, it was surprising that it took seven months to fill two vacancies. This appeared to be the result of a combination of factors rather than a deliberate attempt not to fill the vacancies.<sup>7</sup> From an overall standpoint, the entire Division of Drug Abuse Control had had personnel problems. According to the State Personnel Office, there are 52 positions in the agency and in the last year there has been a turnover of 43 persons. Also, it is difficult at best to find a person capable and willing to work with drug abusers within an institution for an annual salary of \$6,037.<sup>8</sup>

The Office of Drug Abuse Control feels very strongly that it takes a particular type of personality to deal with drug abusers, and tries to be quite selective in hiring staff. All of these factors contribute to the difficulty in hiring but the problem is not resolved even when a person is hired. Once staff has been hired, there is a very serious problem termed by the project director as "burn out":

"Our staff by need, must be client and feeling oriented as well as being a therapist. It is very difficult for this type of individual to work in a correctional setting for extended periods of time. Historically, in this project counseling staff after approximately 18 months become more in touch with the negative aspects of correctional institutions and enter a phase of depression that produces the need to leave the job setting and this depression is what is termed "burn out".

The project director was well aware of these difficulties and throughout the project felt this was a serious problem, as have other persons involved with Drug Counseling Unit. It appears, at least for the time being, that the problem of vacancies has been resolved--there have been no vacancies since mid-July. The majority of staff are relatively new and it remains to be seen how long they will stay with the Unit before they are "burned out" or lured away to a better paying position.

<sup>7</sup>See Exhibit A, page 11, for a detailed discussion of efforts to fill vacancies.

<sup>8</sup>This was the annual salary for a Drug Counselor I indicated in the 74-005 application.

## 2. Follow-up

No formal follow-up was maintained on clients. Project staff generally knew what had happened to clients, but only through informal discussions with other segments of the correctional process. Therefore, it could not be determined how many clients successfully completed treatment programs, and did not again engage in criminal activity.<sup>9</sup> A result of this lack of follow-up was that it was not possible to determine the impact of this project on the rehabilitation of its clients.

## IV. Conclusions

According to the Bureau of Adult Corrections, the Adult Corrections Drug Counseling Unit serves the correctional system in the following ways:<sup>10</sup>

1. The counselors in the Unit are trained in; (1) recognizing inmates with valid drug problems (as opposed to those who pretend to have such problems with the hopes of being released to alternative treatment facilities), (2) determining the extent and type of problem, and (3) making recommendations for alternative treatment. Other counseling staff which would be directly involved in making treatment recommendations, e.g., pre-trial release counselors, pre-sentence investigators and institutional counselors, do not have the time or specialized training to develop this expertise. Since in many instances the drug abuser represents a unique type of offender who may need specialized treatment, a Unit which specializes in this area is a benefit to the system.
2. Through counseling provided by the Unit, the project represents an additional treatment alternative within the prison; this is particularly true of the drug therapy group. The one-to-one counseling provided by the Unit helps reduce the workload of the institutional counselors while providing more individualized counseling for selected inmates.

<sup>9</sup>The survey mentioned on page 4 was conducted by the evaluator, and indicated only the clients who had returned to prison in Delaware. It did not deal with clients in other states, or clients who had been rearrested but not returned to prison.

<sup>10</sup>See Appendix A, pages 14 through 19 for letters of endorsement from the Bureau of Adult Corrections.

3. Through recommendations for alternative treatment, the Unit helps to reduce the overcrowded conditions at the institution.

Overall, this project has performed well. The Unit has screened 256 persons and has had 65 clients released to alternative treatment programs. The fact that of 69 recommendations, 65 were approved is an indication of the thoroughness of the Unit's screening and evaluations.

V. Recommendations

1. The position of Drug Counselor should be reviewed. If it is found that the functions, duties and responsibilities of a drug counselor are similar to those of other counselors, the position should be upgraded so that qualifications and salaries are comparable to other counselors.
2. A formal follow-up procedure should be implemented so that the impact of the project can be determined.
3. There is some indication that the concept of the Drug Counseling Unit has been expanded from simply providing a screening/diagnostic service to providing a counseling-treatment service for incarcerated drug abusers. Such an expansion represents major change in the project, and should be brought before the Grants Advisory Committee for approval.

In addition to these recommendations, the question must be raised of whether or not four staff persons are necessary to perform the amount of projected work. It could not be determined if the 256 clients served represented all the clients in need of the service (which would be approximately 6 clients per staff person per month) or if this number represented only the number of clients the Unit could handle due to the staff shortages. If the number served does in fact represent the number in need of the service, it may be more appropriate to expand the screening/diagnostic service to the Sussex Correctional Institution rather than to expand the counseling services at the Delaware Correctional Center.

TABLE 1

Budget Breakdown and Expenditures for 74-005 Adult Corrections Drug Counseling Unit August 1, 1974 through August 31, 1975

<u>Budget Categories</u>	<u>Approved Federal Funds</u>	<u>Expenditures 8-1-74 to 6-1-75</u>
Personnel	\$30,537	\$17,288.80
Consultants	0	0
Travel	2,670	0
Supplies	297	0
Operating Expenses	0	0
Other Equipment	327	0
Other	169	0
Total	\$34,000	\$17,288.80

TABLE 2

Number of Clients Served in the Adult Corrections Drug Counseling Unit From August 1, 1974 through August 31, 1975

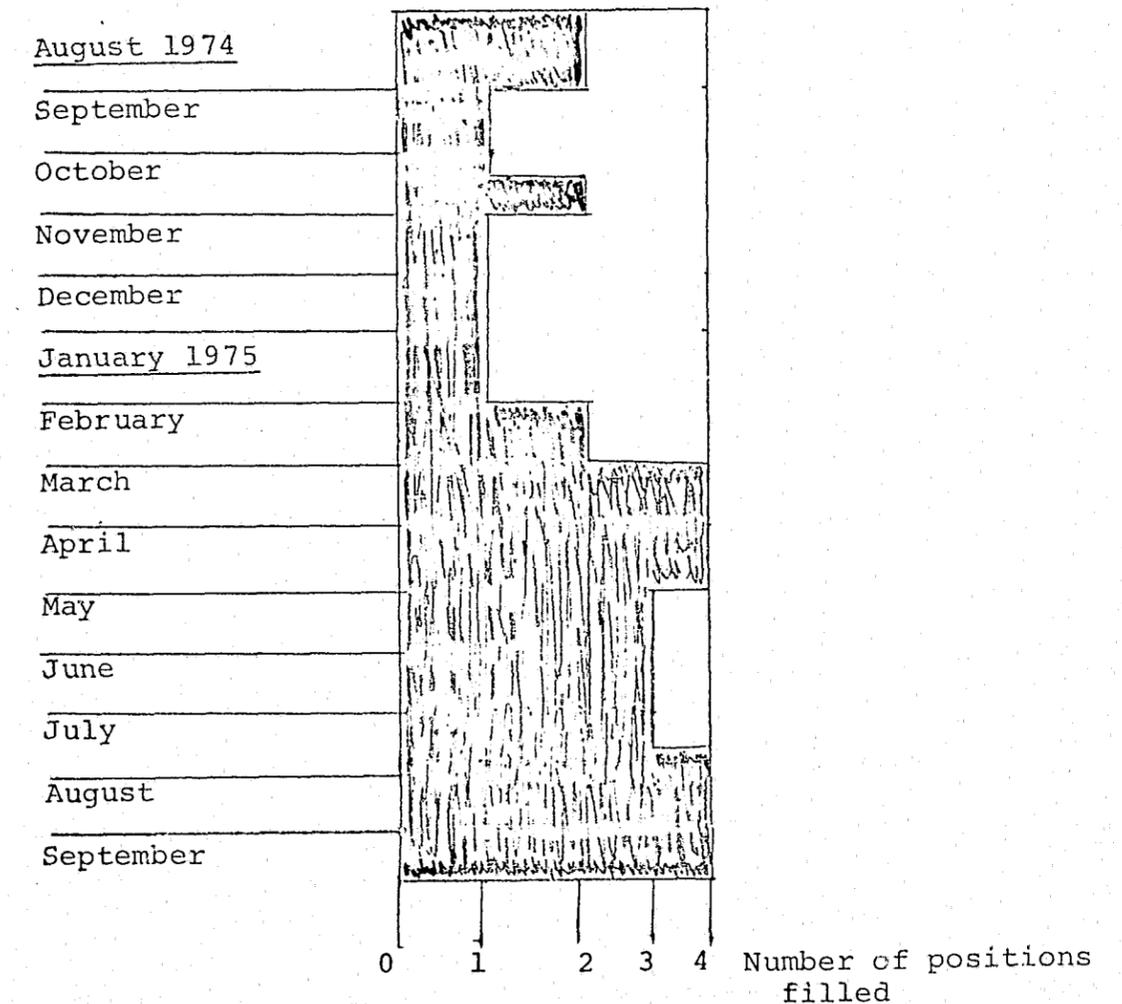
	<u>Pre-Trial Status</u>	<u>Post-Sentenced Status<sup>1</sup></u>	<u>Total</u>
Persons Screened for Admittance	144	112	256
Persons Admitted to Project	60	43	103
Persons Recommended for Treatment Alternative	41	28	69
Persons Released to Treatment Alternative	34	31 <sup>2</sup>	65
Persons Returning to Prison After Being Released to Treatment Alternative	9	6	15

<sup>1</sup>This includes clients eligible for a sentence reduction and clients eligible for parole.

<sup>2</sup>During the time from acceptance into the program to approval for an alternative treatment plan, a client's status may change from pre-trial to post sentence.

TABLE 3

Staff Vacancies in the Adult Corrections Drug Counseling Unit From August 1974 through September 30, 1975





DIVISION OF DRUG ABUSE CONTROL  
3000 NEWPORT GAP PIKE  
WILMINGTON, DELAWARE 19808  
PHONE (302) 998-0878

MEMORANDUM

WILLIAM D. MERRILL  
DIRECTOR  
DEC 12 1974  
GAMES FILE

TO: Pat Robinson - DARC  
FROM: Melvin Jones - Drug Abuse Services  
SUBJECT: Adult Corrections Drug Counseling Project 74-005  
DATE: December 11, 1974

In response to your memo and our telephone conversation of this morning, I would like to provide you with the following information.

As of this date we have one staff member actively working within the project. Mr. Charles Wright was hired on a promotional basis from Juvenile Corrections effective 10/16/74.

Mr. Joseph Halloran was a Counselor with the project from 6/8/72 until 9/15/74. At that time he elected to transfer to our Newark Community Clinic as a Counselor. Also, Mr. Thomas Bisio was a Counselor within the Correctional Program from 10/16/73 until 10/31/74 when he elected to transfer to our Georgetown Clinic. Both of these men transferred out of the project not as a result of disenchantment, but for strictly personal reasons. Both of these Counselors were, and are, excellent employees. Their skills and concerns are of the highest order. They both, in their individual ways, are a clear example of a "burn out" as I mentioned in my previous Quarterly Report. As outlined in that communication, we have taken steps to hopefully monitor and alleviate the situation.

The project at this point in time is in the early developmental stage with the emphasis of hiring and training of staff. This office is extremely concerned with the delays in fulfilling start-up as a result of staff vacancies.

Initially I should like to explain the procedure we must complete in order to fulfill Merit System employment requirements. We must request the staff Certification List of qualified applicants from the State Personnel Office via our Departmental Personnel Office. Upon receipt of the list we must write all applicants requesting that they contact us to arrange for an interview. We may assume that an individual is not interested if he does not respond within five days of receiving the letter of notification.

Because some of the applicants reside in states not in this immediate area, we must allow at least eight working days from the date we mail the letters to insure that the applicant has been given every chance to respond.

Mr. Wright is currently occupying the Drug Counselor II position allotted for the project. We are attempting to fill one Supervisor's position, as well as two Counselor II slots. Because the prison is located in Kent County, we are concerned with the Merit System list for that County in both of the above classifications.

The following is a chart that show the actions of this office with respect to the hiring process.

DRUG COUNSELOR I

Date Requested	Date Received	Date Returned	No. on List	No Response	Not Interested	Unsuitable
6/13/74	6/20/74	7/23/74	1		1	
7/23/74	8/5/74	8/30/74	10	5	4	1
9/3/74	9/23/74	10/3/74	1	1		
10/3/74	10/18/74	11/4/74	1		1	
11/4/74	11/15/74	12/15/74	12	7	4	1

In reviewing this chart one can see that it has taken us an average of thirteen days to receive a Certification List from the date we requested it. On the list that we have received there have been a total of 25 applicants. Of these applicants, a total of 23 have either not responded at all, or have stated they are not interested. This leaves us with a total of two potential counselors. Both of these were deemed not amenable for employment in this project.

With respect to the Counselor Supervisor position, we fully intended to promote Mr. Halloran within that spot. However, as indicated previously, Mr. Halloran decided that he must turn down that position and leave the project.

On 9/19/74 we requested a Certification List for the classification of Supervisor. On 10/30/74, 41 days later, we received a list with one name on it. The individual stated that he was not interested because the salary was insufficient.

Since that time we have received one additional list containing one name. This man is to be interviewed on 12/16/74. He is presently employed as a Parole Officer in the State of New York at an annual salary of \$16,000. per year. I would be very surprised if he would

take the approximate \$6,000. reduction in salary to join our staff.

I feel this clearly shows the position we are faced with, but if I can be of any further assistance in this matter, please contact me.

MJ:ba

cc: J. Yeatman  
C. Brittingham  
W. Merrill

APPENDIX A

Letters of Endorsement for the Adult Corrections  
Drug Counseling Unit from the Bureau of Adult Corrections



RAYMOND W. ANDERSON  
SUPERINTENDENT

DELAWARE CORRECTIONAL CENTER

R. D. NO. 1, BOX 500  
SMYRNA, DELAWARE 19977  
PHONE: (302) 683-9261

May 7, 1975

Mr. Melvin Jones  
Office of Drug Abuse  
Wilmington, Delaware

Dear Mr. Jones:

I have recently become aware that DARC is considering withdrawing those federal funds which are currently supporting the drug counselling program at DCC. I would like to ask you if there is any possibility that the funding will continue so that the present counselor positions may remain at the Center.

The counselors here provide a service to the inmates which we are not able to do ourselves. It has been my experience that there are rather consistently a number of men with drug problems who, because of personality traits and attitudes, are unable to benefit from the Narconon program. They cannot seem to relate to a program which has the extreme structure of Narconon, but do show positive gains when they are involved in the more "fluid" situations presented by more traditional group and therapy approaches. The present drug counselors offer these men a viable alternative to Narconon.

While the counselors assigned to DCC have the potential to deal with men with drug problems in a clinical way, they are simply too understaffed with present institutional work to attempt anything approaching therapy for drug addicts. An additional problem is that your counselors at the institution are able to make referrals to other drug programs outside the institution which have greater validity than referrals from institutional staff because of the specialized training that your men receive. I am afraid that other community units in Delaware and other states as well, would not look upon referrals with the same kind of credibility from my staff as they would referrals coming under the auspices of your office.

Another point I would like you to be aware of is the high regard I have for Mr. Bisio. I have had a number of discussions with him, both around general approaches to dealing with addicted people and some more specific plans for developing programs in the institution. I find Mr. Bisio to be not only enthusiastic and knowledgeable, but very alert and responsive. I think that under his direction, and given the maturity which he has recently shown as a supervisor, the potential for the development of a balanced, effective drug treatment program at DCC is greater than at any time since you have been providing such services to the institution. I would hate to see this potential eliminated at this point in your development.

- 2 -

Mr. Melvin Jones

May 7, 1975

Because of these things, I feel that every effort should be made to continue the services here. If I, as Assistant Superintendent for Treatment, can be of any help in any way towards this end, please let me know.

Very truly yours,

Donald R. Davis  
Asst. Superintendent for Treatment

DRD:v



EMMETT H. DUNLAVY  
ASST. DIRECTOR  
COMMUNITY SERVICES  
(PROBATION/PAROLE)

DIVISION OF ADULT CORRECTION  
PRE-TRIAL RELEASE OFFICE  
~~XXXXXXXXXXXX~~ 800 West Street  
~~XXXXXXXXXXXX~~ Wilmington, Delaware

May 7, 1975

Delaware Agency To Reduce Crime  
Central Y.M.C.A.  
Eleventh & Washington Streets  
Wilmington, Delaware 19801

To Whom It May Concern:

The Pre-Trial Release Unit of the Department of Corrections Division of Community Services has worked closely with the Delaware Correctional Center Drug Counseling Unit from the time that it first operated. The following is an explanation of the coordinated efforts of these units with particular reference to the manner in which this has allowed the extension of Pre-Trial Release services to persons who otherwise would not be released.

The experience of the Pre-Trial Release Office in screening persons to determine their suitability for bail release, and supervision of persons recommended for release, has shown us that a history of drug abuse constitutes a serious obstacle in obtaining and later maintaining a successful bail release. Drug abusers are often in need of close supervision, as well as medical and counseling services, in order to be released with the expectation that they will return to court and not be re-arrested while free on bail. This applies not only to many persons arrested on drug charges, but also to defendants with other types of charges who are found to have a drug abuse problem.

While the problems of drug abusers in general are readily apparent to our office, determining the needs of individual drug users is a complex task. Because we are mandated to investigate all persons held in default of bail, training and man-power limitations allow our office to make only a cursory screening for detection of drug abuse problems. The initial intake interview, which becomes

our primary data source, is conducted under the worst conceivable conditions when considering the sensitive nature of drug abuse. In order to see everyone, interviews are often conducted in public rooms, and frequently in the cell block, itself. There is only one direct question on the clients' drug habits, sandwiched between information on prior hospitalization and inquiries about his arrest record. Finally, the client is warned that his reply is strictly voluntary, because the purpose of our investigation is to provide information to the court. There is seldom time to explain that this information will in the balance benefit the client.

In spite of all of this, our office becomes aware through direct or indirect replies, of many persons with an indeterminate drug problem. Until more details are known, this information may cause our counselor to be apprehensive of recommending release. However, it is at this point that the Drug Counseling Unit provides direct assistance. Whenever the Pre-Trial Release Office requires detailed information on a client with a suspected drug problem, at the Delaware Correctional Center the clients' name is referred to the Drug Counseling Unit. Well over half of all persons held in default of bond in Delaware are housed at the Delaware Correctional Center and are thus readily accessible to the Drug Counseling Unit. The design of the Drug Counseling Unit, as well as the training of the staff, allow the development of a detailed analysis of a clients' drug problem. Privacy during interviews and the time to utilize a broad range of counseling and interview techniques allow the Drug Counseling Unit to obtain information otherwise inaccessible to our office. Most importantly, a guaranteed confidentiality, which is exercised at a clients' discretion, provides information which the Pre-Trial Release Office cannot obtain through our own efforts. Some clients who never indicated any history of drug abuse in our intake interview will divulge their problem to the Drug Counseling Unit. In those instances, the Drug Counseling Unit, with the clients' permission, takes the initiative in contacting our office concerning the clients' bail problem.

Once the Drug Counseling Unit has assisted our office in detection of a drug abuser, our office relies upon their judgment for determination of solutions which could be used as bail conditions in order to make the client a better risk on bail release. Again, the training of the Drug Counseling Unit coupled with their regular first hand contact with the client allows them to obtain information not otherwise available to the Pre-Trial Release Office. In addition, their availability in the prison allows a determination to be made in a few days. Where some clients have been visited by outside counselors attached to drug programs, our office was seldom able to approach the court with their conclusions until several weeks after the initial referral.

Continuation of the Drug Counseling Unit service at the Delaware Correctional Center is vital to the Pre-Trial Release Office's goal of maximizing our bail release service. The loss of the expertise and coordination offered by the Drug Counseling Unit would necessitate an increase in the man hours spent by our office on cases involving drug abusers. In addition, the expertise which could not be duplicated in our office would reduce the quality of the releases which could be effected. We therefore urge that funding for the Drug Counseling Unit at the Delaware Correctional Center be continued.

*Garland S. Gammon mlb*

Garland S. Gammon  
Supervisor  
Pre-Trial Release Program

GSG/mlb

Prepared by Ronald G. Hosterman, Counselor of Pre-Trial Release  
Office for Garland S. Gammon, Supervisor of the Pre-Trial Release Unit.

**END**