

Law and Justice Interim Committee
12/18/09

Good Morning Mr. Chairman and members of the committee. My name is Rick Alan Deady, and I am the Treatment Contract Program Manager for the Adult Community Corrections Division of the Department of Corrections and I oversee, among 6 other treatment programs, the WATCh programs for the Department.

As of the end of October 2009, the Department has supervised almost 1800 (1792) felony DUI offenders. This represents 12% of the entire Montana offender population. Of the almost 1800 DUI offenders the majority 7 out of 10 (69%; 1,233) are on probation or parole, with almost 2 out of 10 (17%; 312) in an alternative program such as treatment or a prerelease center and almost 1.5 out of 10 (14%; 247) are in prison.

For those that went on the tour of WATCh West yesterday you will have heard a great deal of the information I will discuss today as well as a great deal of this information is in the WATCh handout.

With the change in the DUI Statute the number of DUI offenders being housed at Montana State Prison was growing and the Department needed to address this growing number of offenders and how to not only house them but how to address their substance abuse.

The WATCh program began in February of 2002 as a 140 bed treatment program in Warm Springs. In 2005, to address the continued growing need for treatment beds; growing numbers of female DUI offenders; and to address the geographic expanse of Montana, a second WATCh facility was opened in Glendive at the old Eastmont Campus. Following this expansion, the WATCh West became an all male facility and WATCh East primarily a female facility with males from the eastern 1/3 of Montana a priority also. Currently the WATCh programs have a combined capacity of 165 beds (115 West/50 East). During the last fiscal year 2009, the average daily population was 154 offenders. The WATCh program is a 24/7 residential treatment program set in a secure facility and in the 7 + years that the program has been in existence, there has been no walkaways from either facility.

Each of the facilities has a local screening committee that reviews and accepts or denies the offenders placement. The committees are comprised of local law enforcement, DOC staff, facility staff and local citizens. The acceptance rate is approximately 90%. The most common reasons for denials are: medical issues; criminal histories, and institutional behavior.

Demographics for the WATCh program show that 76% of the offenders are Caucasian, 21% American Indian, 2% Hispanic and 1 % African American. The average age at admission is 44 years of age; the average Blood Alcohol Content (BAC) at arrest is .217 or almost 3 times the legal limit of .08. When WATCh began the average number of DUI's at admission was 7.3; currently the average number of DUI's has declined to 5.6.

Managing the WATCh program, I am routinely asked several questions: What is the cost of treatment versus incarceration; Why six months of treatment; and What type of programming does an offender receive at WATCh and How effective is the program? Let me address the cost first.

The cost of an average stay, for males, in Prison is \$95,529 (1,092 days/\$87.48) and for females is \$61,583 (570 days/\$108.04). The average cost for a stay at WATCh West is \$15,826 and at WATCh East \$19,895. Or put another way, the average prison stay for male offenders is 6 times more costly than the average stay at WATCh West and an average prison stay for female offenders is 3 times more costly than the average stay at WATCh East.

In developing the structure of the Felony DUI program, the Department consulted with other states and national research to determine the best approach to working with Felony DUI offenders. The research indicated that, to be effective, the treatment of these offenders needed to be a combination of alcohol or Chemical Dependency treatment and treatment of the offender's criminal behavior and attitude. The research indicated that to have the highest impact, a minimum of 6 months of intensive treatment was necessary.

The treatment modality is based on the modified Therapeutic Community model that ensures that offenders are held accountable for all their waking hours. This translates to

between 8 and 10 hours of programmed treatment activities per day. This programming includes, but is not limited to: chemical dependency programming; cognitive principles and restructuring, criminal thinking errors, family relationships, anger management, negligent vehicular homicide group (KNIGHTS Program), grief and loss groups, victim issues and restorative justice. The program stresses that the offender's responsibility and accountability goes beyond the 6 months at WATCh and the program instills a "Pay it Forward" ethic that the graduates take back to their communities by attending aftercare treatment groups, presentations to local civic organizations, schools, etc., about drinking and driving.

However, the true measure of the effectiveness of a treatment program is its ability to help offenders avoid repeating the behavior that required treatment in the first place. In the case of WATCh, that behavior is drunken driving. Since the program started in 2002, WATCh has had 2066 graduates and of those, about 90% (1,861) have not had a new DUI conviction. You will hear later about additional measures of the success of the WATCh program. However, not all measures of success can be demonstrated

by statistics, currently at WATCh there is an offender who had only 5 ½ months left to complete his treatment but due to several setbacks early in his treatment was not going to successfully complete his treatment. Instead of giving up, he approached his legal council to have them approach the Judge to extend his time at WATCh so he could successfully complete. The Judge agreed and this offender has extended his treatment and will complete the program in January. A positive solution which will hopefully lead to a positive outcome and a positive life. Before I end my presentation for questions, I want to introduce Mr. Alex Vukovich, Administrator of WATCh West and Mr. Mike Boston, Clinical Supervisor of WATCh West. For questions pertaining to treatment or curriculum at WATCh West, I would yield to their expertise.

Thank you Mr. Chairman and committee.