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► [Evaluation of the alcohol treatment requirement in five sites across the Lancashire probation area.](#)

Baldwin H., Duffy P.

Centre for Public Health, Liverpool John Moores University, 2010.

In Lancashire in northern England, problem-drinking offenders who agreed to be ordered in to alcohol treatment by the courts dramatically cut their drinking and offending and experienced improved health and wellbeing.

Summary Available in Britain from 2005, alcohol treatment requirements can be imposed for up to three years as part of a community-based sentence or two years within a suspended sentence. The offender has to have a drinking problem considered susceptible to treatment, which should reflect the severity of their drinking and offending, be acceptable to the offender, and locally available. The featured study presents the findings of an evaluation of alcohol treatment requirement schemes at five sites across Lancashire in northern England.

In these areas the probation service commissioned treatment providers to deliver structured alcohol treatment to offenders sentenced to the requirements. Treatment staff recorded the offenders' alcohol use, alcohol-related behaviour, and health at the start of the order and if possible three and six months later. For the 32 offenders who agreed to join the study, this information was made available to the researchers, who also interviewed the offenders to gain their views and experiences. Staff in services involved with the schemes were also interviewed. For the 32 offenders in the study and a few others who consented to these elements, probation and arrest records were also obtained.

[Main findings](#)

During the study period (1 April 2009 to 31 March 2010), 121 offenders were assessed for an alcohol treatment requirement of whom 70 started treatment. 32 treatment-starters joined the study; nearly all the rest were excluded because their assessments were too delayed rather than because they refused the study. Three and six months later treatment reviews were available for 25 and 21 offenders respectively and 21 and 9 were

interviewed by researchers. Only offenders reviewed/interviewed at the first follow-up were included in the final follow-up.

Up to the end of September 2010, 67 of the 70 offenders who had started treatment had been discharged. Of these discharges, 48 (71%) were planned and 19 (28%) unplanned. In the first six months of their orders, the 70 offenders attended on average 22 mandatory treatment appointments. Study participants attended mandatory treatment and probation appointments on a weekly or fortnightly basis. During these sessions participants' alcohol use, offending and related factors were monitored, discussed and addressed.

Nine of 79 offenders given an alcohol treatment order breached the requirements of the order; for another 18, breach proceedings were started but withdrawn. While offenders believed a breach would result in them being re-sentenced to custody, most who did breach either had their breach withdrawn, their community sentence modified, or were given a new community order.

Among study participants there were significant reductions in alcohol consumption and dependence and alcohol-related problem behaviour, particularly during the first three months of their orders. Among the 21 offenders for whom treatment review data was available at both follow-ups, the proportion drinking daily fell from 76% to 29% and 10% three and six months later, and their drinking diaries showed that typical weekly consumption had fallen from 60 UK units to 8 and 18. From all scoring as dependent on alcohol on the [AUDIT questionnaire](#), six months later just 19% did so.

Study participants reported having good relationships with their treatment workers and in some cases, their offender managers. These two sets of staff communicated well and participants recalled attending three-way meetings in which their progress was reviewed by the partner services together. Participants were satisfied with the treatment they had received and their various needs were addressed, though many required ongoing assistance with issues including accommodation and employment. Overall, they felt confident about completing their court orders and continuing to tackle their problems. Several planned to remain in contact with their treatment worker and/or attend further alcohol treatment sessions.

Among the 32 offenders who gave permission for this data to be accessed, the number of arrests fell significantly from 40 during the six months before starting their orders to 14 during the first six months of the order. The most common offences were violence and criminal damage.

Findings also indicated significant improvements in study participants' health and wellbeing and in their relationships with friends, family and partners.

The authors' conclusions

In conclusion, there were positive outcomes for offenders who participated in the evaluation in terms of alcohol use, attitudes, offending, health and relationships. Participants also reported positive experiences of treatment. However, without a control group of similar offenders not sentenced to an alcohol treatment requirement, it is not possible to attribute the positive outcomes to the requirement schemes alone.

This draft entry is currently subject to consultation and correction by study authors.

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