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**To:** Jim Greiner  
**From:** Sara Bobok  
**RE:** Keith S. Ditman et al., *A Controlled Experiment on the Use of Court Probation for Drunk Arrests*, 124 Am. J. Psychiatry 160 (1967).  
**Date:** February 4, 2019

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**Title:** A Controlled Experiment on the Use of Court Probation for Drunk Arrests  
**Authors:** Keith S. Ditman, George G. Crawford, Edward W. Forgy, Herbert Moskowitz, and Craig MacAndrew  
**Location:** San Diego Municipal Court, California  
**Sample:** N = 301  
**Timeline:** July, 1964 to January, 1965  
**Target group:** Drunk offenders  
**Intervention type:** Alcoholic clinics, Alcoholics Anonymous  
**Research papers:** <https://doi.org/10.1176/ajp.124.2.160>  
**Partners:** Alcoholism Research Clinic; Municipal Court, San Diego Judicial District; Vista Hill Psychiatric Foundation; Health Science Computing Facility, UCLA

## **Abstract**

This study sought to determine the efficacy of different treatment options for drunk offenders in preventing recidivism. It did so by randomly assigning offenders to one of three treatments: Alcoholics Anonymous, a psychiatric alcoholic clinic, and no treatment. The researchers coupled with randomized control test with demographic questionnaires to establish causal explanations in their conclusions. Ultimately, the study found that there was no statistically significant difference between the effectiveness in recidivism prevention of the three treatments.

## ***I. Policy Issue***

In the 1960s, courts and non-legal professionals started to view certain crimes as health-related issues. Chronic drunkenness was one of these crimes. Thus, a variety of programs started emerging to treat offenders struggling with addictive or unsafe substance habits. Programs of the time included psychiatric community clinics, Alcoholics Anonymous, halfway house, honor houses, and sobriety camps. Judges were able to extend these resources to offenders, instead of assigning chronic drunk offenders strictly to probation. However, understanding the efficacy of the aforementioned programs is critical not only

for helping individuals struggling with addiction, but also in determining the legal procedure and precedent for the future.

## ***II. Context of Evaluation***

This study occurred in San Diego, California. Researchers partnered with the San Diego Municipal Court, the Alcoholism Research Clinic of the Division of Alcoholic Rehabilitation for the State of California Department of Public Health, and the Vista Hill Psychiatric Foundation. The researchers had conducted a previous study in which chronic drunk offenders were sent to Alcoholics Anonymous. If they relapsed from this treatment, they were sent to clinic treatment, and if this too failed, they were probated to an honor camp for a span of six months. After a decrease in the number of drunk arrests in San Diego, this study helped the researchers expect that probation with a suspended sentence is effective both for getting chronic offenders into treatment and for decreasing the probability of being rearrested.

## ***III. Details***

This study was composed of two components: a randomized controlled trial and a demographic questionnaire used in an attempt to establish potential causal links.

The study worked with a sample pool of 301 drunk offenders. It defined drunk offender as an individual who had either had two drunk arrests within the last three months or three within the last year. Guilty drunk offenders were fined twenty five dollars, given one-year probation with a suspended 30-day sentence, asked to complete a questionnaire, and ordered to abstain from alcohol for twelve months. After this procedure, judged utilized a randomized assignment schedule to place offenders into one of three treatment categories: clinic treatment, Alcoholics Anonymous, or no treatment.

The researchers followed future rearrests for the 301 individuals in the sample for one year employing San Diego police “rap” sheets and the State of California Criminal Identification and Investigation Report, two independent resources. Ultimately, the researchers only used the cases for which both sources provided the same data, thereby decreasing the sample size from 301 to 241.

## ***IV. Results and Policy Lessons***

This study found that there was no statistically significant relationship between post-conviction treatment and recidivism for chronically drunk offenders or between treatment and the amount of time between treatment and rearrest.

The demographic and biographical trends found in the questionnaire did not pose statistically relevant results due to the small sample size for each of the three treatments. It was therefore hard to make statistical claims regarding demographics within a small treatment group.

Therefore, the study provides no evidence to support the effectiveness of the treatment programs. The researchers comment that these programs might be more effective if

offenders could participate for a longer time than was possible in the study, but this is a speculation, not backed with any significant results. Similarly, they claimed that the demographic information might reveal best practices for selective referral, but again lacked the statistical evidence to support this conjecture.

#### ***V. Quality of the Study***

The randomized aspect the study was successful in achieving its goal. It worked with clear definitions, attention to bias when randomizing, and well documented methodology. However, the size of the sample makes not only cross-treatment comparisons difficult, but also essentially eliminates the opportunity to observe trends within treatments. Particularly when relating their summary of the future for selective referral to said questionnaires and within group trends, it is important to caveat these recommendations with the limitations of the study.