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A Drug Program Only Reached Through Prison

By Courtland Milloy
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The District's newest residential drug treatment facility offers substance abusers a unique approach to recovery. A patient starts off by taking a battery of tests to assess literacy, intelligence and even self-concept. A customized 28-day treatment plan is drawn up, and the patient receives regular medical care, counseling and job and life-skills training along with a variety of special treatments such as acupuncture and humor therapy.

The only catch is that to be admitted, you must be a District resident recently paroled from a federal prison. The Offender Reentry and Sanctions Center, which was opened to the public yesterday, is a federally funded, state-of-the-art facility in Southeast Washington. No public treatment facility for non-offenders -- in the District or any other jurisdiction in the area -- can match its quality.

But if you have an extensive history of substance abuse and a lengthy criminal record, and if prison officials are keeping your cell light on in anticipation of your return, then you may qualify for what ORSC administrators call "cutting-edge" treatment for substance abuse.

"A large number of ex-offenders go in and out of the system as parole violators because no one has been able to pinpoint a good substance abuse treatment plan for them," said Jim Lanier, program director for the 102-bed facility. "In our program, we look at the barriers that caused them to be unsuccessful in the past. We determine their strengths and weaknesses, their treatment readiness and their motivation to change, and tie all of that into an individualized treatment plan that prevents them from going back to jail."

No one disputes the need for such a facility, which is run by the Court Services and Offender Supervision Agency, created by the federal government in 1997 to handle probation and parole in the District. Each year, about 2,300 parolees return from federal prisons, and about 70 percent are sent back because of continued drug abuse, according to the agency. About 65 percent of probation revocations were found to be drug-related.

In 1996, Lanier helped start a pilot program that employed the treatment methods now used at the new center. About 90 percent of the ex-offenders who completed treatment stayed clean for at least three years and did not go back to prison, he said. A review of the program in 2001 by University of Maryland researchers found that arrest rates for parolees who received treatment fell dramatically.

"The improvement that effective treatment makes in public safety is immense," Lanier said.

And if this is true of parolees, shouldn't it be true for substance abusers who get help *before* committing drug-related crimes?

The new treatment center is housed on the grounds of the old D.C. General Hospital in a newly renovated building known as Karrick Hall. Once home to a District-operated 28-day treatment program, Karrick Hall was allowed to deteriorate during the 1980s and eventually closed because of neglect and inadequate funding. In a city where about 60,000 residents are in need of substance abuse treatment, where drug-related arrests send more young black men to prison per capita than in any other city in the country, and where drug use has contributed to the AIDS epidemic, Karrick Hall and its 85-bed residential treatment program should have been regarded as indispensable.

Now the refurbished building stands as a beacon of hope in a desolate landscape -- run by the feds this time instead of the city -- next to the D.C. morgue and across from the D.C. jail. The facility has a team of outstanding experts in the field of addiction treatment; many of them are volunteers. Recovering alcoholics and addicts, some of them ex-offenders who completed the treatment program, are among the counselors.

Patients attend sessions on setting goals and managing stress. Computer science is offered in a classroom with top-of-the-line computers that fold away into smoked-Plexiglas-topped desks. The city's public schools should be so well equipped.

Even after being discharged, ex-offenders continue to receive help on staying sober, getting and keeping jobs and reconnecting with family and community. And if they start to get squirrely and think they may relapse, they can go back to the center for a tune-up. And even if they do relapse, they may be readmitted.

The Court Services and Offender Supervision Agency is showing how an innovative drug treatment program turns lives around. If only you didn't have to go to prison first.

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