The efficacy of diversion and aftercare strategies for adult drug-involved offenders: a summary and methodological review of the outcome literature

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CRD summary
This review evaluated diversion and aftercare programmes for adult drug-involved offenders. The authors concluded that there is some evidence that diversion and aftercare programmes could be effective in this group, but the methodological quality of the studies underpinning this assumption are poor and such conclusions are not supported by the available evidence.

Authors' objectives
To summarise best practice elements of diversion and aftercare programmes for adult drug-involved offenders, and to broaden the scope of previous methodological reviews.

Searching
PsycINFO, MEDLINE, Web of Science, Scopus, Sociological Abstracts and AUSThealth were searched from 1996 to 2005 (inclusive); the search terms were reported. The reference lists of recent outcome studies were also screened.

Study selection

Study designs of evaluations included in the review
Outcome evaluations were eligible for inclusion.

Specific interventions included in the review
Studies focusing on diversion and aftercare programmes were included. Studies focusing only on drug treatment, policy or education, mental health issues, pharmaceutical diversions, substance abuse programmes, or instrument validation were excluded. The diversion studies evaluated included drug court programmes and mixed treatment options that included in-patient services, residential programmes or out-patient services. The aftercare study intervention comprised counselling, case-management, skills building for employment, HIV prevention, crisis intervention and peer support.

Participants included in the review
Studies of drug-involved offenders were eligible for inclusion. Studies of only addicted health workers, non-drug-related crime, or domestic violence were excluded. The included studies recruited adult offenders with substance abuse problems, mostly comprising cocaine, heroin and marijuana.

Outcomes assessed in the review
No inclusion criteria relating to the outcomes were stated. The main outcomes were crime recidivism rates, substance use and psychological functioning.

How were decisions on the relevance of primary studies made?
One reviewer screened titles and abstracts, with ambiguous studies being discussed with a second reviewer. Two reviewers applied the inclusion criteria to full papers and resolved any differences through discussion.

Assessment of study quality
Study quality was assessed using standardised criteria relating to the use of a prospective and randomised design, the reporting of patient characteristics, statistical analyses, effect sizes and intervention, follow-up and the reporting of cost-effectiveness. It was not reported how many reviewers performed the validity assessment.
Data extraction
The authors did not state how the data were extracted for the review, or how many reviewers performed the data extraction.

Studies were reported as showing a significant increase or decrease in an outcome. However, no details regarding the outcome data extracted were reported.

Methods of synthesis
How were the studies combined?
The studies were described narratively, grouped by intervention type, standardised criteria and outcome.

How were differences between studies investigated?
Differences in some study characteristics were shown in a table and were discussed in the text.

Results of the review
Twenty outcome studies were included: 19 diversion studies (number of participants not reported; sample sizes ranged from 156 to 1,966) and 1 aftercare study (n=145).

Quality.
Sixteen of the diversion studies were prospective evaluations; three were randomised controlled trials and one a combination of random and non-random allocation. Of the 15 non-randomised studies, all had a comparator group who were either untreated, or refused or were ineligible to participate. The aftercare study used a combination of random and non-random allocation.

Diversion (19 studies).
Fourteen studies (74%) reported a reduction in criminal recidivism among treatment participants over the follow-up period, and five failed to find any significant differences in criminal recidivism between groups. Nine studies (48%) evaluated drug use outcomes, of which six provided support for diversionary strategies. Three studies (16%) reported no significant differences in drug use between groups. Five studies (27%) reported on psychological functioning, four of which found no significant differences between groups.

Aftercare (1 study).
Results from this study indicated that participation in aftercare reduced drug use and criminal activity, but that the positive effects of aftercare were greatest immediately after treatment services.

Authors’ conclusions
Evaluation studies of diversion programmes continue to be of poor methodological quality. The authors stated that there is some evidence from this review that diversion and aftercare programmes could be effective, but that the strength of this evidence is weak.

CRD commentary
The review addressed a clear question, with exclusion criteria clearly stated for the intervention and population; criteria were not well defined for the study design and outcomes. The authors undertook a comprehensive search for published literature but did not seek unpublished studies, thereby increasing the potential for publication bias, which was not investigated in the review. It was unclear whether language restrictions were applied during the search, therefore there is a potential for language bias. Efforts were made to reduce error and bias during the study selection process, but it is unclear whether similar efforts were made during the data extraction and quality assessment. Study quality was assessed against standardised criteria.
Limited study details were reported. The use of a narrative synthesis seems appropriate given the clinical heterogeneity of the included studies and the nature of the evidence. The authors’ conclusion, that studies included in the review are not of sufficient quality from which to draw conclusions, seems reliable.

Implications of the review for practice and research
Practice: The authors did not state any implications for practice.

Research: The authors outlined suggestions for improving the quality of evidence from future research and suggested that there are opportunities to undertake evaluations of aftercare that are not prison-based or post-release.

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