

Written Testimony for the Charles Colson Task Force on Federal Corrections
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Randomized Control Trials are the Gold Standard of Research in the field of Medicine.

In the past, the problem of adapting RCTs to the field of Criminology has been the cost. In the last 7 years, the availability of administrative data has become so widespread that you now have the ability, in many cases, to conduct Low Cost RCTs costing between \$50,000 and \$150,000. Within the next 7 years, we will be able to do this in the majority of cases.

My central recommendation is to conduct Low Cost RCTs whenever it is possible to rapidly build the knowledge of what works and what doesn't work. In the past we have been largely spinning our wheels, going from one idea to another and never knowing if something is working.

I am submitting an excerpt of work done by Jon Baron, the president of the Coalition for Evidence-Based Policy in advising the Office of Management and Budget on the implementation of Low Cost Randomized Control Trials. Below are two examples on how to do this.ⁱ

Criminal Justice Example: Hawaii's Opportunity Probation with Enforcement (HOPE) Program

- I. **Program description: HOPE is a supervision program for drug-involved probationers that provides swift and certain sanctions for a probation violation.** The program requires probationers to appear before a judge, who issues a clear warning in open court that any probation violation – including a failed drug test or failure to show up for a probation appointment – will result in immediate jail time. The probationer is then frequently drug tested at random times during probation. If the probationer commits a probation violation, he or she is arrested and jailed briefly – usually for a few days – after which the probationer

resumes participation in HOPE. Probationers can request a drug treatment referral at any time, and repeat violators are mandated to drug treatment.

II. **Evaluation method: Randomized controlled trial (RCT) with follow-up one year after random assignment.** The study sample was 493 probationers in Honolulu identified as being at high risk of violating probation. The probationers were randomly assigned to either a group that participated in HOPE during their probation term or a control group that received usual probation – i.e., a monthly drug test and appointment with a probation officer, with no automatic sanctions for probation violations. The study meets widely-accepted criteria for a well-conducted RCT.ⁱⁱ

III. **Key findings on program impact:** During the one-year follow-up period, HOPE group members (compared to control group members) –

- Were 55% less likely to be re-arrested (21% of the HOPE group were re-arrested during the one-year follow-up versus 47% of the control group);
- Were sentenced to 48% fewer days of incarceration (138 days vs. 267 days);
- Had a much lower rate of failed drug tests – HOPE group members failed an average of 13% of their drug tests, compared to 46% for members of the control group; and
- Were much less likely to have their probation revoked (7% vs. 15%).

All of these impacts were statistically significant at the 0.05 level.

IV. **Cost of measuring program impact: About \$150,000.**¹ The low cost was achieved by measuring study outcomes using administrative data (e.g., arrest records) that the state

¹ This does not include the cost of program delivery, but rather is the added (“marginal”) cost of the evaluation. The study also included a process evaluation, which is not included in the above cost.

already collects for other purposes, rather than engaging in costly new data collection (e.g., surveys).

The \$150,000 cost included such items as (i) meeting with judges to gain their support for the study; (ii) hiring part-time employees through the state attorney general office to extract and prepare the administrative data for analysis; and (iii) analyzing and reporting study results. The study's lead author says that substantial work was needed to ensure the administrative data's accuracy and usability, and that if cleaner data had been available, the cost of measuring program impact on the above outcomes would have been about \$100,000.

Random assignment contributed only a small portion of the study's overall cost (\$10,000-\$15,000). Most of the costs described above, such as data extraction/preparation, would have been incurred even if the study had used a non-randomized design. Gaining judges' agreement with random assignment did not require major effort, because a lead judge supported a randomized design and helped bring fellow judges on board. In addition, researchers were able to use administrative data to monitor whether judges were complying with probationers' randomized condition (e.g., providing warning hearings and frequent drug tests to the HOPE group but not the control group).

Criminal Justice Example: Philadelphia Low-Intensity Community Supervision Experiment

I. Program description: Low-Intensity Community Supervision for probationers or parolees at low risk of committing a serious crime (compared to the usual, more intensive/costly supervision).

This is a program in Philadelphia for criminal offenders on probation or parole identified as being at low risk of committing a serious crime, based on prior criminal behavior and other

factors. These offenders receive low-intensity supervision by a probation officer (averaging 2.4 visits with the officer per year), instead of the usual higher-intensity supervision (averaging 4.5 visits per year). The purpose is to reduce the cost of supervision to Philadelphia County. Based on the encouraging study findings below, the county has adopted this approach for all low-risk offenders.

II. Evaluation method: Randomized controlled trial (RCT) with follow-up one year after

random assignment. This study randomly assigned 1,559 offenders on parole (from a short sentence in county jail) or probation in 2007-2008 to either (i) a treatment group that received low-intensity supervision or (ii) a control group that received standard supervision. The sample members were identified via a computer algorithm as being roughly in the lower half of active cases in likelihood of committing a serious crime. The study meets widely-accepted criteria for a well-conducted RCT.ⁱⁱ

III. Key findings on program impact: During the one-year follow-up period, there were no statistically-significant differences between the treatment and control groups in –

☐ prevalence or frequency of new criminal charges for any offense, including violent offenses;

or

☐ likelihood of incarceration in county jail, or days incarcerated.

There was also no pattern of *non-significant* differences between the two groups in these outcomes. These findings – i.e., no increase in crime – suggest the program is a viable way to reduce costs in the criminal justice system.

IV. Cost of measuring program impact: Less than \$100,000². The low cost was achieved by measuring study outcomes using administrative data (e.g., arrest records) that the county already collects for other purposes, rather than engaging in costly new data collection (e.g., surveys).

The above study cost included such items as (i) extracting the administrative data and preparing it for analysis; (ii) having a research assistant in the probation department monitor random assignment to ensure it was carried out faithfully; and (iii) analyzing and reporting study results. County officials had actually suggested an RCT, so no effort was needed to gain their support for the study design. (The officials felt that an RCT could generate evidence as to the program's safety that would be convincing in the public arena, and help defuse potential controversy over this type of reform.)

Random assignment contributed only a small portion of the study's overall cost (approximately \$15,000-\$20,000). Most of the costs described above, such as data extraction/preparation, would have been incurred even if the study had used a non-randomized design.

References

ⁱ Rigorous Program Evaluations on a Budget - Coalition for Evidenced - Based Policy 2012

ⁱⁱ The study meets widely-accepted criteria for a well-conducted RCT (summarized in the Coalition's [RCT Checklist](#)), such as: (i) the program and control groups were highly similar in their pre-program characteristics; (ii) the study had no sample attrition (because the use of administrative made it possible to measure outcomes for all members of the program and control groups); (iii) the study appropriately measured outcomes for all individuals assigned to the program group, regardless of whether or how long they participated in the program (i.e., the study used an "intention-to-treat" analysis); (iv) study outcomes were assessed with valid measures; (v) where appropriate, the study's statistical analysis accounted for the fact that groups, rather than individuals, were randomly assigned; and (vi) the study evaluated the program as delivered in a typical community setting, thus providing evidence of its effectiveness under real-world implementation conditions.

² This does not include the costs of developing and implementing the program – e.g. the algorithm for identifying low-risk offenders – but rather is the added ("marginal") cost of the evaluation.