

Global coverage and retention factors of criminal justice-related drug and alcohol treatment programs among offenders: a systematic review

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Introduction: Drug and alcohol treatment completion has both health and legal implications. It is viewed as a critical outcome measure and one of the best predictors of a client's long-term success. This review aimed to conduct a global systematic search of criminal-justice drug and alcohol treatment programs and significant sociodemographic, economic, and programmatic characteristics factors that influence treatment retention for offenders.

Method: A systematic search and review of available studies and reports from peer-reviewed and grey literature databases, including PsycINFO, SCOPUS, Web of Science, EBSCO Criminal Justice, LILACS, Google Scholar Advanced, Proquest Dissertation and Theses Global, Trove, and government and non-governmental websites have been completed. Specific data of interest include criminal justice-related drug and alcohol programs, client-level factors (sociodemographic and economic), and programmatic factors, including service availability, location and providers' attitudes influencing retention.

Results: Preliminary search revealed limited evidence of factors influencing criminal justice-related drug and alcohol programs treatment retention. The comprehensive search and review would produce extensive evidence to be presented and discussed.

Discussions and Conclusions: To the authors' knowledge, this systematic review is the first to assess and synthesize published and unpublished evidence regarding factors influencing criminal justice-related drug and alcohol treatment program retention among offenders.

Implications for Practice or Policy: This global systematic review is timely and relevant as it will offer an understanding of factors supporting treatment retention. It would assist programming efforts and aid in targeting offenders who could benefit most from treatment-oriented drug treatment programs such as the NSW Magistrates Early Referral into Treatment (MERIT) Program.