



Externalizing and selfmedicating: Heterogeneity among repeat DUI offenders

Driving under the influence (DUI) offenders are a diverse group of individuals who often present with unique mental health and criminal histories.

Because of this, offenders may vary in their response to and experiences with treatment.

743 repeat DUI offenders from a court-mandated treatment program: Completed a comprehensive mental health and substance use assessment.

Agreed to share their full criminal record 4-5 years after program attendance.



We identified clusters of repeat DUI offenders based on their mental health and substance use profiles as well as their criminal histories.

Three distinct groups emerged:

Cluster 1:

Offenders who reported few externalizing behaviors or mental health issues N=212



These offenders were the least likely to reoffend in the 4 years post-program:
5.2% committed a DUI offense 20.8% were arraigned on any

offense



Low likelihood of reoffense

Cluster 2:

Offenders who engaged in externalizing behaviors (e.g., substance use or criminality)

N=112



These offenders were the most likely to reoffend in the 4 years post-program:
9.8% committed a DUI offense
55.4% were arraigned on any offense



High likelihood of reoffense

Cluster 3:

Offenders with significant mental health issues but relatively few externalizing behaviors N=419



These offenders were moderately likely to reoffend in the 4 years post-program: 8.1% committed a DUI offense 33.9% were arraigned on any offense



Moderate likelihood of reoffense

Repeat DUI offenders vary widely in their criminal and mental health profiles. Treatment should target these different profiles to better reduce reoffense.

Even in the absence of externalizing behaviors, mental health issues are still a significant risk factor for DUI.



Incorporating universal screening and targeted mental health and substance use treatment in DUI programs may reduce recidivism rates among repeat offenders.

