

The ADAM Program provides:

- An unparalleled understanding of drug use in an at-risk population.
- Portraits of the leading and trailing edges of drug problems in an arrestee population.
- A strong basis from which to analyze and evaluate local and national substance abuse, policing, and criminal justice issues and practices.

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For General Program Information:

Arrestee Drug Abuse Monitoring (ADAM) Program

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Publications and Resources

For more information about the ADAM program, research endeavors, and ongoing special projects, we encourage you to visit the ADAM Web site at <http://www.adam-nij.net>.

To order copies of ADAM publications, contact the National Criminal Justice Reference Service at P.O. Box 6000, Rockville, MD 20849-6000, 800-851-3420, or 301-519-5500. You can also e-mail your request to puborder@ncjrs.org.

For more information on NIJ and other programs, visit <http://www.ojp.usdoj.gov/niij>.



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Arrestee Drug Abuse Monitoring Program

Program Brief

What Is ADAM?

The Arrestee Drug Abuse Monitoring (ADAM) Program is a research program of the National Institute of Justice (NIJ) that provides program planning and policy information on drug use and other characteristics of arrestees in U.S. cities through quarterly interviews of adult and juvenile arrestees in holding facilities. ADAM has two fundamental components. The first is a questionnaire administered by a trained interviewer to an arrestee in a booking facility. The second is drug testing by collecting a urine specimen from the respondent, which is tested to detect recent drug use.

Together, these two techniques—interviewing and drug testing—provide a powerful platform from which communities can:

- Assess the dimensions of their particular local substance abuse problems.
- Evaluate, in a low-cost manner, programs and interventions that serve or target the criminally active populations.
- Plan policy responses appropriate for those populations.

As one of the only regular sources of information available to communities about local drug trends, ADAM is an invaluable aid for community planning, monitoring, and resource allocation. ADAM represents an important partnership with and among local, State, and national policymakers. NIJ fashioned ADAM as a flexible platform that allows these policymakers to customize aspects of the program to meet their specific needs. Data collected through ADAM provide a fundamental research and evaluation tool for local analysts, policymakers, and practitioners.

The ADAM Program

Goals

ADAM is one of several drug use indication systems that operate in the United States. Other programs include the National Household Survey on Drug Abuse, Monitoring the Future, and the Drug Abuse Warning Network. ADAM's goal is to assist local, State, and national policymakers in monitoring and understanding the consequences of drug use among detainees. ADAM works to achieve this goal by providing both data and analysis to this audience. It is important to monitor drug use among criminal suspects not only because of the links between drug use and crime, but also

because arrestees are more likely than household respondents and school populations to be heavily involved with drugs.

Applications of ADAM

ADAM helps law enforcement, treatment, prevention, and other professionals understand the dynamics of local drug epidemics. The ADAM interview provides information on how arrestees acquire drugs, how they contact sellers, and how frequently they purchase drugs. From this information, law enforcement agencies can develop a better understanding of the impact that local interventions are having. In addition, treatment planners will receive information on alcohol and illicit drug dependency and the need for treatment among local arrestees. This information can be used to plan specific local treatment measures.

Operations

At each ADAM site, a representative sample of arrestees is approached and asked to participate in the study by trained interviewers who will administer voluntary, anonymous interviews and collect urine specimens. In most sites, more than 80 percent of the individuals approached agree to the interview. Of those, more than 80 percent agree to provide urine specimens.

Data collection takes place quarterly at each site, with collection periods for any single population (male, female, or juvenile) generally lasting 1–2 consecutive weeks in a quarter. Data collections for the different populations do not necessarily run concurrently.

Although most ADAM sites are known by the name of the largest city in the area, the boundaries (or catchment area) of most sites encompass substantially larger areas than just the cities. In most cases, the catchment area is the county. Some States, such as Alaska, do not have counties or similar units of government. In these cases, the catchment area is defined by the city or municipal boundaries.

Addenda

Supplemental interviews can be added to assist with planning on a wide range of other topics concerning arrestees. These specialized questionnaires (called addenda) offer valuable insights into arrestees' attitudes about specific topics that policymakers want to address. Examples of addenda administered at ADAM sites include the reported use and acquisition of firearms; production, acquisition, and use of specific drugs (e.g., methamphetamine, heroin, marijuana, powder cocaine, and crack cocaine); gang behavior and participation; prevalence of domestic violence; and HIV testing patterns, access-to-care issues, and risk reduction practices.

Outreach

Each ADAM site collects outreach data annually. This supplementary data collection is directed at special populations (e.g., suburban, rural, Native American, or juvenile populations) within a State. The objective is to focus on a different population each year, gathering information not ordinarily captured about arrested populations during the regular ADAM data collection process. This outreach moves data collection into areas where information on substance abuse is lacking and where a critical policy need for such information exists.

Local Coordinating Councils

A Local Coordinating Council (LCC) is established at each ADAM site to facilitate local use of the ADAM data. Each LCC is key to the success of the ADAM Program because it helps the community meet local needs, assists in the dissemination of locally relevant findings, and establishes and uses the program's outreach component.

Drug Testing

All ADAM sites are required to test for a core panel of drugs, including amphetamines, cocaine, marijuana, phenylclidine (PCP), and opiates. However, a total of 11 drugs can be tested so that communities can customize the panel to test for drugs that are particularly important in their area. Other drugs that can be tested are alcohol, barbiturates, benzodiazepines, methadone, propoxyphene, and methaqualone. The selection of additional drugs for testing varies depending on the particular site and research purpose.

ADAM Research Informing Policymakers

The benefits of the ADAM Program are derived from the access to data for use in local policy planning. The ADAM Program generates locally relevant and statistically reliable data on crime, drugs, health, and treatment issues as they relate to the arrestee population. ADAM fosters the development of partnerships with researchers and facilitates local coordination and specialized research on drug-related issues of concern to local communities.