Hawaii’s Opportunity Probation with Enforcement (HOPE) Program

A high-intensity supervision program for probationers at risk of a probation violation, found in a well-conducted randomized controlled trial to reduce the likelihood of re-arrest by 55% during the year after random assignment.

I. Description of the intervention

Hawaii’s Opportunity Probation with Enforcement (HOPE) is a program for probationers identified by their probation officer as being at high risk of 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 randomly drug tested 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.

Click here for more information on the program.

II. Evidence of Effectiveness

A. Evaluation method: A single-site randomized controlled trial of the program with follow-up one year after random assignment.

HOPE was evaluated in a well-conducted randomized controlled trial of 493 probationers in Honolulu identified as being at high risk of failing 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 sample was 74% male and 65% Asian/Polynesian, averaged 36 years of age, and had an average of 17 prior arrests.

B. Effects of HOPE one year after random assignment:

These are the effects on all of the main outcomes the study measured (including any such outcomes for which no or adverse effects were found). All effects shown are statistically significant at the 0.05 level unless otherwise noted.

Compared to the control group, HOPE 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 53% less likely to have their probation revoked (7% vs. 15%).

C. Discussion of study quality:

• The study evaluated HOPE as it normally operates in Honolulu’s Adult Client Services probation unit, thus providing evidence of its effectiveness in real-world community settings.

• HOPE and control group members were highly similar in their observable pre-program characteristics (e.g., demographics, criminal history).

• The study measured outcomes for all members of the HOPE group regardless of whether or how long they participated in the program (i.e., the study used an “intention-to-treat” analysis).

• The study had no sample attrition: Administrative records were used to measure outcomes for 100% of the original sample.

• Study limitations

  ➢ The study only measured HOPE’s short-term effects – i.e. through one year after random assignment, during which time most HOPE group members were still on probation and participating in the program. Short-term effects are not always a reliable predictor of longer-term, post-program impacts on criminal activity and other important outcomes.

  ➢ HOPE’s effects in reducing arrests, incarcerations, and probation revocations may not necessarily equate to its effects on probationers’ actual criminal activity, because the program intentionally changed the threshold of probationer behavior that triggers these events.

  ➢ The study was conducted in a single site (Honolulu), with a sample that was largely Asian/Polynesian. It is not yet known whether the effects generalize to other settings and populations.

D. Thoughts on what more is needed to build strong evidence: A second well-conducted randomized controlled trial, conducted in a different setting and with longer-term follow-up, to determine (i) whether the sizable early effects described above are sustained beyond one year and/or probationers’ completion of the program; and (ii) whether the program is effective across the range of settings/populations where it might normally be implemented.

III. References