

# DRUG TESTING ON SUPERVISION

## Key points

- Community supervision agencies should prioritize fairness and evidence-based practices to support community safety, reduce reoffending, and limit supervision revocations — transitioning from a system focused on catching or enabling failure to one focused on facilitating and supporting success.
- Many agencies require all clients to drug test, even if they have no history of substance use.
- Evidence suggests that drug testing is driving technical violations and revocations, widening the net of the carceral system without meaningfully supporting rehabilitation or community safety.
- Drug testing is costly in time and money for both clients and supervision agencies.
- Limiting testing to clients with substance issues and reducing punitive responses to positive tests is consistent with addiction medicine and can reduce overall violations and revocations while targeting resources more effectively.

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## Overview

Submitting to drug tests is often a standard condition for people on probation and parole in the U.S., even if a client has no history of problematic substance use (Robina, 2020). Fulfilling testing requirements is costly for both people on supervision and agencies. Most people are charged an average of \$15-\$20 per test, and tests can be ordered as often as 2-3 times per week.

Despite its ubiquity, there is no evidence that blanket drug testing on supervision supports community safety. Additionally, the limited existing literature on testing in supervision confirms that more drug testing is not associated with greater compliance or better outcomes for people on supervision — and that drug use is not associated with reoffending (Lattimore et al., 2018). Instead, **more testing is associated with more violations and revocations**—jeopardizing community safety rather than supporting it by incarcerating more people and thereby impeding their ability to remain in their homes, jobs, or schools.

Supervision agencies in the U.S. generally test reflexively, and testing practices vary across agencies. Existing best practices are outdated (the last American Probation and Parole Association guidelines were released in 1992). Still, some agencies are reforming their practices, and finding that **limiting testing to people with documented substance use issues and reducing the punitiveness of responses to positive tests can reduce overall violations and save costs**. Evidence from these agencies and the literature related to testing on supervision offer a number of promising practices that can save costs, reduce violations, and reduce burdensome requirements for clients. This piece reports out from a scan of the academic literature surrounding drug testing in the supervision context, addiction medicine best practices, interviews with probation stakeholders, researchers, advocates, and people on supervision, and a close review of six agencies' testing policies.

## Literature overview

According to the American Society of Addiction Medicine, the leading medical authority on addiction in the U.S., drug tests should serve as an informational tool to support recovery, not deliver punishment (Jarvis et al., 2017). Studies evaluating drug testing as part of an intensive supervision program find that increased testing is not associated with greater compliance, and that drug use is not necessarily associated with reoffending (Gray et al., 2001; Lattimore et al., 2018). These findings confirm that blanket drug testing is ineffective, and if it is used, should be targeted to people with a documented drug nexus to their offense. **When testing does occur, supervision agencies should focus on rewarding success** and understanding — not punishing — failure. This approach is known as contingency management (CM). The research on CM confirms that offering incentives such as cash, a gift card, or downgrading of conditions can reduce violations and improve overall compliance when testing takes place (Davis et al., 2016, Metrebien et al, 2021).

## Overview of testing on supervision

Most people on supervision are required to submit to drug tests as a condition of supervision. These conditions come from requirements to abstain from illegal drug use. Tests may be random or scheduled. Most supervision agencies use urinalysis (UA) tests that can test for a customizable set of drugs. Tests can be administered at a local probation or parole office or at a private testing site, and, less frequently, at a client's home.

Testing frequency generally varies depending on the client's risk assessments and the agency's policies. Some supervision agencies have a set frequency for drug testing where clients are tested once a month or every other month depending on their risk assessment. Other agencies often use a random testing system in which a client must call a phone number or check an app daily to see if they have been called to test. If called, clients must report to test that day, regardless of employment or other obligations. Offices and testing sites typically operate on normal business hours, and clients may have to skip work or travel long distances by car, bus, or even by hitchhiking to get to their testing site (Flock & Remkus, 2020).

## Responses to positive tests

A positive test can result in sanctions including mandated treatment, technical violations, remand to jail, or revocation to jail or prison. Probation agencies typically do not have uniform responses to positive tests — responses are often guided by the client's background and through a progressive system of assigning sanctions. For example, in Oregon, sanctions — including jail time, house arrest, community service, etc. — are selected from a menu corresponding to the level of the violation and the client's risk assessment.

Mandates to complete treatment and increased testing appear to be the most common responses to multiple failed drug tests (Daly et al., 2021). Some experts urge non-coercive and non-mandated treatment instead, citing harm reduction and best practice research that shows sending a client to treatment as a punishment undermines the treatment.

While most probation and parole staff emphasized that a positive or missed test alone would almost never lead to a revocation, data suggests that **drug testing plays a role in technical violations and points to unaddressed substance use disorder treatment needs** (Daly, 2021; Roberts Freeman, 2021; Grommon et al., 2021). Missed drug tests also drive violations that can lead to a revocation. In Denver, CO, 63% of all people who had their supervision revoked had missed drug tests (UW, 2021). Supervision agencies also acknowledge a link between absconding and testing — a client is less likely to report if they know they will test positive and receive sanctions as a result (Schiraldi, 2018). In cases where drug tests are used, using results as an informational tool rather than a source of punishment can support rehabilitation and reduce violations (Davis et al., 2016, Metrebien et al, 2021).

## Fees & Costs

Most people on supervision in the U.S. are charged a fee per drug test. An informal of 27 people on probation across the U.S. using the message board site Reddit revealed that clients pay an average of \$15-\$20 per test. Clients said that these fees were often only a small piece of the overall costs associated with testing. One interviewed client in Brazoria County, TX who tests 2-3 times per week said each test costs him at least \$40. The test itself is \$10, and the testing site is an hour's drive (\$30 for gas both ways for one trip). These costs can pile up — most people on supervision make less than \$20,000 per year — and force clients to make **impossible choices between completing a test and buying groceries or paying rent** (Brett et al., 2020). Some supervision agencies, including adult probation in Alameda County, CA and Hennepin County, MN, have eliminated testing fees. Other agencies should follow suit (AV, 2020).

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## Drug courts

Clients completing a drug court program are often subject to more stringent testing and treatment requirements than people on more typical supervision. The National Association of Drug Court Practitioners (NADCP, 2018) recommends testing clients twice per week. Interviewed drug court clients in Oregon and Texas reported testing 2-4 times per week. NADCP's guidelines are rooted in the three-day detection period for most drugs, yet their intensity can impose significant burdens for clients. It appears that most clients are tested at this same frequency — twice per week or more — for the duration of their drug court program, which typically lasts two years. However, evidence suggests that ordering more frequent tests in drug court does not improve retention or program completion (Kleinpeter et al., 2010). Reducing testing frequency over time, as clients move through phases of the program, would lessen burdens and save costs for both the program and clients.

## Example policies from supervision agencies

The following summary offers an overview of common testing practices in U.S. supervision agencies.

Case Study Sites	Is drug testing a standard condition?	Fees for testing?	Violate for marijuana?	How often?
<b>Alameda County, CA</b> Adult Probation	Not standard, but frequently imposed.	No	No	Usually in regular PO meeting
<b>Brazoria County, TX</b> Adult Probation	Yes	\$18.55	Yes	At PO discretion. Client must call-in daily
<b>State of California</b> Adult Parole	Not standard, but frequently imposed.	No	No	Usually in regular agent meeting
<b>Hennepin County, MN</b> Community Corrections	Not standard, but frequently imposed.	No	Rarely	At officer discretion. Client must call-in daily
<b>Monroe County, IN</b> Adult Probation	Yes	\$25	Yes	Once per month, once every two months, or at discretion
<b>State of Oregon</b> Community Corrections	Yes*	No	Rarely	At PO discretion. Client must call-in daily

\*In 2022, Oregon's legislature passed a reform policy that will remove drug testing as a standard condition beginning in 2023 (Oregon, 2022).

## Potential Model for Reform: Hennepin County

Hennepin County's Adult Probation department implemented a number of reforms to their drug testing practices in 2020-2021. The department found that only 7.5% of total tests between 2017-2019 came back positive, and most were positive for marijuana alone, leading staff to believe the Department over-tested. Staff implemented the following changes to align testing with best practices, increase efficiency, and reduce burdens for staff and clients:

1. A client must have a court order or condition of release to test in order for the Department to test them. A court order or condition of release to test occurs when a client has a documented substance use issue that relates to their likelihood of reoffending.
2. Clients who are tested must have a substance issue linked to criminal behavior.
3. Clients cannot be double tested (e.g. if they are already being tested in a treatment program, probation cannot test them).
4. Clients will not be panel tested—the department only tests for drugs of concern to the client.
5. Any marijuana testing orders must be approved by a supervisor.
6. Staff are directed to reinforce negative tests with verbal affirmation and develop an action plan in collaboration with a client in response to a positive test.
7. Testing frequency, continuance, and the staff response to results must be tied to a client's unique needs according to a substance use assessment that a client completes when they begin supervision. For example, a client with a history of drug use but who is not currently using and unlikely to relapse should be tested less frequently than someone who is beginning recovery.

Since these reforms, the number of people testing per week has dropped to 400 from 1,000. The number of positive drug tests in the Department's standard violation reports has also dropped. In 2017, 41% of standard violation reports included a positive test; in 2021, only 18% of violation reports did. Further evaluation is needed to determine the impact of this shift on other important outcomes, including revocations and community safety. However, Hennepin County officials report positive experiences and outcomes.

## Recommendations

Agencies can take a number of steps to help reduce violations associated with drug testing and make the process less punitive and harmful. At the condition setting level, testing could be eliminated as a standard condition (as Oregon recently did via state legislation passed in 2022, following supervision agencies including Hennepin County, MN and Alameda County, CA), especially when people with a substance use issue are already undergoing mandated treatment that typically involves drug tests.

Testing can also be administered more judiciously to reduce violations and support evidence-based practices. Agencies could end testing for marijuana, test only for drugs of concern, reduce frequency and randomness of testing, avoid duplicate testing, and abolish testing fees. Agencies could also build a relationship before initiating tests — in Harris County, TX, the Adult Probation Department began waiting three months to drug test probation clients. They found that these clients were 35% more likely to stay connected and succeed than those who were immediately tested.

Supervision agencies have a number of options to better align drug testing with best practices and evidence, and reduce violations and costs in the process. To help motivate a transformation in supervision from catching or enabling failure to facilitating and supporting success, testing should be used only as a way to identify and help treat underlying needs, and should not be tethered to punitive outcomes. Together, these practices can alleviate the human and financial cost of testing, and can help agencies work toward better outcomes for people under supervision.

## Works Cited

- Arnold Ventures (2020). *Fines and Fees Statement of Principles*. Retrieved from <https://craftmediabucket.s3.amazonaws.com/uploads/AV-FinesFeesResearchStatement-v4-1.pdf>
- Daly, R., Deary, M., Lawson, V., & Nagarajan, P. (2021). *Pathways to Success on Probation: Lessons Learned from the First Phase of the Reducing Revocations Challenge*. CUNY Institute for State & Local Governance. Retrieved from <https://islg.cuny.edu/resources/pathways-to-success-on-probation>
- Davis, D. R., Kurti, A. N., Skelly, J. M., Redner, R., White, T. J., & Higgins, S. T. (2016). A review of the literature on contingency management in the treatment of substance use disorders, 2009-2014. *Preventive medicine*, 92, 36–46. <https://doi.org/10.1016/j.ypmed.2016.08.008>
- Flock, E., & Remkus, A. (December 2020). *How court ordered drug testing poses impossible choices*. PBS News Hour. Retrieved from <https://www.pbs.org/newshour/nation/how-court-ordered-drug-testing-poses-impossible-choices>
- Gray, M., Fields M., Maxwell S. (2001). *Examining Probation Violations: Who, What, and When*. *Crime & Delinquency*. 47(4), 537-557. Retrieved from <https://journals.sagepub.com/doi/10.1177/0011128701047004003>
- Grommon, E., Bohmert, M., Lowder, E., Hatfield, T., Ying, M., & Diaz, C. (2021). *Reports: Reducing Revocations in Monroe County, Indiana*. Dr. Indiana University Northcutt Bohmert Research Lab. Retrieved from <https://blogs.iu.edu/mimnb/2021/06/30/reports-reducing-revocations-in-monroe-county-indiana/>
- Lattimore, P., Dawes, D., MacKenzie, D., & Zajac, G. (2018). *Evaluation of the Honest Opportunity Probation with Enforcement Demonstration Field Experiment (HOPE DFE)*. National Institute of Justice. Retrieved from <https://www.ojp.gov/ncjrs/virtual-library/abstracts/evaluation-honest-opportunity-probation-enforcement-demonstration>
- Metrebian, N., Weaver, T., Goldsmith, K., Pilling, S., Hellier, J., Pickles, A., Shearer, J., Byford, S., Mitcheson, L., Bijral, P., Bogdan, N., Bowden-Jones, O., Day, E., Dunn, J., Glasper, A., Finch, E., Forshall, S., Akhtar, S., Bajaria, J., Bennett, Contingency Management Programme Team (2021). *Using a pragmatically adapted, low-cost contingency management intervention to promote heroin abstinence in individuals undergoing treatment for heroin use disorder in UK drug services (PRAISE): a cluster randomised trial*. *BMJ open*, 11(7), e046371. <https://doi.org/10.1136/bmjopen-2020-046371>
- National Association of Drug Court Practitioners (NADCP, 2018). *Adult Drug Court Best Practice Standards*. Retrieved from <https://www.nadcp.org/wp-content/uploads/2018/12/Adult-Drug-Court-Best-Practice-Standards-Volume-2-Text-Revision-December-2018-1.pdf>
- Roberts Freeman, K., Khalid, A., Robin, L., Shukla, R., Thompson, P., Olsen, R. (2021). *Reducing Probation Revocations in Pima County, AZ*. The Urban Institute. Retrieved from <https://www.urban.org/research/publication/reducing-probation-revocations-pima-county-arizona>
- S.B. 1510, 2022 Regular Session (Oregon, 2022). <https://olis.oregonlegislature.gov/liz/2022R1/Measures/Overview/SB1510>
- Schiraldi, V. (2018). *Testimony before the New York State Assembly Standing Committees on Codes, Health, Governmental Operations, and Alcoholism and Drug Abuse on behalf of five former Commissioners of New York City Probation*, October 16th, 2018.
- The Robina Institute (Robina, 2020). *Research Brief: Drug Testing as a Condition of Supervision*. Retrieved from [https://robinainstitute.umn.edu/sites/robinainstitute.umn.edu/files/drug\\_testing.pdf](https://robinainstitute.umn.edu/sites/robinainstitute.umn.edu/files/drug_testing.pdf)
- University of Wyoming Criminal Justice and Sociology & Denver Adult Probation Department (UW, 2021). *Reducing Revocations Challenge Final Report*. Retrieved from <http://www.uwyo.edu/cj/opportunities/news-and-events/uw-revised-final-report.pdf>