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No. _____

STATE OF HAWAIʻI | KA MOKUʻĀINA ʻO HAWAIʻI
DEPARTMENT OF CORRECTIONS AND REHABILITATION
Ka ʻOihana Hoʻomalu Kalaima a Hoʻoponopono Ola
1177 Alakea Street
Honolulu, Hawaiʻi 96813

January 16, 2026

The Honorable Ronald D. Kouchi, President
and Members of the Senate
Thirty-Third Hawai'i State Legislature
State Capitol, Room 409
Honolulu, Hawaiʻi 96813

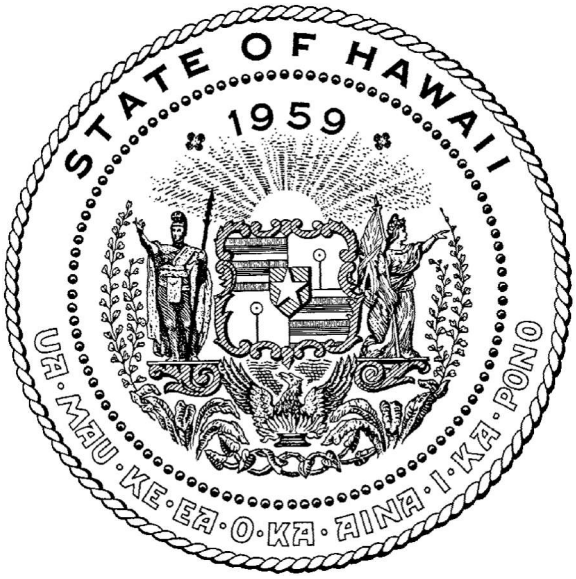
The Honorable Nadine K. Nakamura, Speaker
Members of the House of Representatives
Thirty-Third Hawai'I State Legislature
State Capitol, Room 431
Honolulu, Hawaiʻi 96813

Dear President Kouchi, Speaker Nakamura, and Members of the Legislature,

For your information and consideration, I am transmitting a copy of the Department of Corrections and Rehabilitation's Report on the Criminal Offender Treatment Act, as required by Section 353G-13(c), Hawai'i Revised Statues. In accordance with Section 93-16, Hawai'i Revised Statutes, I am also informing you that the report may be viewed electronically at https://dcr.hawaii.gov/publications/reports-to-legislature/.

Sincerely,

Tommy Johnson
Director



DEPARTMENT OF CORRECTIONS AND REHABILITATION

REPORT TO THE 2026 STATE LEGISLATURE

ANNUAL REPORT ON CRIMINAL OFFENDER TREATMENT ACT

Pursuant to Section 353G-13(c), Hawai‘i Revised Statutes

DECEMBER 2025

ANNUAL REPORT ON CRIMINAL OFFENDER TREATMENT ACT
Pursuant to Section 353G-13(c), Hawai‘i Revised Statutes

INTRODUCTION:

The Department of Corrections and Rehabilitation (DCR) is statutorily required to report on an annual basis to the Legislature and to the Governor, its findings concerning the need for and implementation of the various provisions of Chapter 353G. The report must include information collected under section 353G-13(c), Hawai‘i Revised Statutes subsection:

(a) Every assessment program, treatment program, correctional center or facility, and parole agency that provides services pursuant to this chapter or that otherwise supervises a person or issues an order pursuant to this chapter shall keep case specific records and aggregate data and statistics as may be required by the Department of Health and which shall be required by the statewide substance abuse treatment monitoring program under section 321-192.5, HRS. The Department of Corrections and Rehabilitation shall collect data in accordance with section 321-192.5, HRS, from any assessment program, treatment program, treatment provider, correctional center or facility, and parole agency that provide substance abuse treatment to persons served through public funds administered by the Department of Corrections and Rehabilitation.

(b) The Department of Corrections and Rehabilitation shall include in the contract with any treatment provider all criteria established by the Department of Health pursuant to section 321-192.5, HRS, to determine whether the treatment provider is achieving success in treating individuals with substance abuse problems/dependencies.

(c) The Department of Corrections and Rehabilitation, in conjunction with the Department of Health, shall report on an annual basis to the legislature and to the governor, its findings concerning the need for and implementation of the various provisions of this chapter. The report shall include information collected under subsection (a) and a synopsis of information or data necessary to determine the impact, utility, and cost benefits of the provisions of this chapter.

(d) The Department of Corrections and Rehabilitation, in conjunction with the Department of Health, shall establish an advisory board that shall be comprised of judges, prosecutors, defense attorneys, adult probation officials, parole officials, correctional officials, representatives of assessment programs and treatment programs, and individuals working in licensed alcohol and other drug abuse treatment facilities who are past consumers of treatment services. The advisory board shall meet periodically to discuss the provisions, implementation, and evaluation of this chapter, and to make recommendations to the Department of Health.

Drug Detection Program: The Drug Detection program is a means to hold incarcerated individuals accountable to maintain a drug-free environment within the correctional institutions. DCR's Corrections Program Services – Substance Abuse Services Branch contracts Thermofisher Microgenics to provide immunoassay testing machines at eight facilities statewide. In Fiscal Year 2025, there were 6,915 urine specimens collected, and 75,203 individual tests screened by the immunoassay machines. Of the total amount of specimens collected, 457 resulted positive for illicit substances.

According to the data captured by Thermofisher Microgenics' software, the substances most present in drug detection screenings were Amphetamines/Methamphetamines, Buprenorphine, and Cannabinoids.

SUBSTANCE ABUSE TREATMENT SERVICES:

The Substance Abuse Services Branch is firmly committed to providing the highest quality of evidence-based treatment for incarcerated individuals with substance use disorders, using cognitive-behavioral strategies to address criminal thinking, emotional instability, and antisocial behavior. Treatment services range in intensity for low-risk through high-risk populations, offered across state facilities and via contract at Saguaro Correctional Center in Arizona.

Treatment levels are determined using validated assessment instruments that address risk, needs, and responsivity, to ensure individualized care. Incarcerated individuals are appropriately assigned to one of the three primary treatment modalities, based on assessment results and treatment matching criteria.

Substance Abuse Assessment:

Effective August 1, 2024, DCR began assigning incarcerated individuals to substance abuse treatment levels by utilizing scores attained through the implementation of the Texas Christian University Drug Screen, version 5 (TCUDS 5). The TCUDS 5 is a brief, evidence-based screening tool designed to identify the presence and severity of substance use disorders (SUDs) among individuals, especially those involved in the criminal justice system. This consists of 17 self-reported items that align with the DSM-5 diagnostic criteria for SUDs, allowing classification of an individual's substance use into 4 categories of need: none, low, moderate, or high. By utilizing the TCUDS 5, Corrections Program Services – Substance Abuse Services Branch staff can identify and provide three levels of separate and specific substance abuse treatment to address an offender's criminogenic risk level and needs.

Outpatient Substance Abuse Treatment:

The Halawa Correctional Facility (HCF), Kulani Correctional Facility (KCF), Waiawa Correctional Facility (WCF), Women's Community Correctional Center (WCCC), Kauai Community Correctional Center (KCCC), and Maui Community Correctional Center (MCCC) offer and provide partially contracted, outpatient substance use treatment services through a collaboration between the Salvation Army's Addiction Treatment Services (ATS) and DCR staff.

Outpatient Level of Care is best suited for individuals assessed as low risk with low needs, typically those meeting diagnostic criteria for *mild to moderate* substance use disorders with minimal psychosocial or vocational disruption. The program emphasizes Cognitive-Behavioral Therapy (CBT) components and strategies to help incarcerated individuals recognize and modify thinking patterns that contribute to substance use and criminal behavior. Two-hour group sessions take place twice a week, for four to six months, utilizing evidence-based interactive journaling.

According to FY2025 data, 96 incarcerated individuals Statewide enrolled, with 81 successful completions.

Intensive Outpatient Substance Abuse Treatment:

Intensive Outpatient (IOP) substance abuse treatment services are provided at the following facilities: HCF, WCF, KCF, and WCCC. Services provided at WCCC and HCF are procured via contract with the Salvation Army – ATS, while services at WCF and KCF are provided by DCR personnel.

Intensive Outpatient Level of Care is designed for individuals assessed as moderate-risk with moderate to high needs, who meet diagnostic criteria for *moderate to severe* substance use disorders. The program builds upon CBT principles to explore the relationship between incarcerated individual's thoughts, feelings, and behaviors associated with substance use and criminal activity. Services include individualized treatment planning, counseling, and continuing care over the course of nine months, meeting a minimum of four times a week, up to three hours per session.

According to FY2025 data, 105 incarcerated individuals Statewide enrolled, with 89 successful completions. (Please note completions reflect carryover from the previous fiscal year).

Residential Substance Abuse Treatment:

Residential Level of Care (offered at WCF and WCCC) provides intensive, long-term treatment utilizing the Therapeutic Community model, combining Cognitive-Behavioral Treatment and Social Learning Theory, emphasizing role modeling, peer accountability, and community living to address criminal thinking and behavior. The average length of stay ranges from nine to twelve months, with extensions as clinically indicated. In order to be successful with this population, it is imperative that the population receive consistent and persistent programming at a high dosage and duration.

According to FY2025 data, 51 incarcerated individuals enrolled, with 49 successful completions. (Please note completions reflect carryover from the previous fiscal year).

Reintegration Services (Bridge Program):

Reintegration and Continuing Care services are offered at the Oahu Community Correctional Center (OCCC) and WCCC. Recognizing that delivering effective, research-driven interventions is essential to fostering long-term recovery, reducing recidivism, and supporting successful community reintegration, the Substance Abuse Services Branch also manages a specialized transition program for the furlough populations.

The Bridge Programs provide substance abuse–specific reentry services to incarcerated individuals transitioning from incarceration to the community. The goal is to promote successful reintegration by extending treatment gains and addressing real-world challenges. Federal funding through a Residential Substance Abuse Treatment (RSAT) grant supports both programs that feature job development and life skills training; family education, therapy, and reunification support; with an evidence-based curriculum of continued substance abuse counseling.

According to FY2025 data, 61 incarcerated men enrolled at OCCC, with 43 successful completions. Additionally, there were 13 incarcerated women enrolled at WCCC, with 20 successful completions. (Please note completions reflect carryover from the previous fiscal year).

The Substance Abuse Services Branch further contracts furlough housing for women through the Young Women's Christian Association (YWCA) Fernhurst Ka Hale Hoʻāla Hou No Nā Wāhine (*Home of Reawakening for Women*) program. The program provides safe, supportive housing for female furlough participants from WCCC, focusing on community reintegration and access to supportive services such as job development, money management, life skills, anger management, domestic violence prevention, and relapse prevention education.

According to FY2025 data, 13 incarcerated women enrolled, with 11 successful completions. (Please note completions reflect carryover from the previous fiscal year).

Contracted Services – CoreCivic:

For incarcerated individuals being housed at the Saguaro Correctional Center in Eloy, Arizona, substance abuse services are offered at the Outpatient and Intensive Outpatient Levels of Care. The options are modeled after the DCR's Therapeutic Community structure. The Intensive Outpatient program includes a 24-hour structured therapeutic environment separate from the general population. Incarcerated individuals participate in daily routines, peer-led activities, and treatment sessions designed to reinforce accountability and prosocial behavior.

According to FY2025 data, 49 incarcerated individuals from Hawaiʻi housed at the facility enrolled in OPS, with 31 completions. An additional 155 incarcerated individuals from Hawaiʻi housed at the facility enrolled in IOP, with 108 completions.