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Drug Abuse Reporting Program
First National Evaluation of Treatment Effectiveness
Funded by the NIDA
Sells, Simpson, Demaree, & Joe
6 books & 150 papers published (funded 1970-1990)

Tops
Treatment Outcome Prospective Study
Second National Evaluation of Treatment Effectiveness
Funded by the NIDA

Daily Opioid Use: % in Year 1 After Discharge

“Treatment Process” in TOPS
◆ Comparisons between 21 MM programs
◆ Programs with Longer Retention had -
  ◆ Better assessment & program planning
  ◆ Higher MM dose & better UA monitoring
  ◆ Comprehensive (“wrap-around”) services
  ◆ Higher patient ratings for “meeting needs”
Improving Service Delivery: The Role of Screening and Assessment in the Criminal Justice Treatment Process
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Institute of Behavioral Research (IBR), Texas Christian University (TCU)

Drug Abuse Treatment Outcome Studies
Third National Evaluation of Treatment Effectiveness
10,000 Adults
96 Programs
11 Cities
1,200 Adolescents
23 Programs
4 Cities

85 Studies Published (Special Issues) –
Psychology of Addictive Behaviors (Dec 97)
Drug and Alcohol Dependence (Dec 99)
Journal of Adolescent Research (Dec 01 for DATOS-A)
Journal of Substance Abuse Treatment (Dec 03)
Archives of General Psychiatry (99, 01, & 02)

Long-Term Residential (LTR) Treatment
Changes from Before to After Treatment

Changes in Drug Use Patterns
 alters Treatment Systems

Focus on Drug Use and Crime

Record Number of Offenders in US
In 2003, the correctional population in the US reached a new record of 6.9 million offenders

Drug Use among State Prisoners
(Percentages in 1999; N~1,050,000)
Treated? 15-36%
Approximately ½ are drug dependent.
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2007 Sentencing Conference
Judicial Discretion & Problem Solving with the Court System
Austin, TX; November 1, 2007

3 Key Points

1) How do you know if there really is a problem?
2) How do you determine the most effective and efficient treatment for the problem?
3) How do you know if the treatment is working?

Drug Use Severity and Recarceration

<table>
<thead>
<tr>
<th>Drug Use Severity</th>
<th>% Reincarceration (15 Months)</th>
</tr>
</thead>
<tbody>
<tr>
<td>None</td>
<td>22</td>
</tr>
<tr>
<td>Low</td>
<td>21</td>
</tr>
<tr>
<td>Moderate</td>
<td>24</td>
</tr>
<tr>
<td>Substantial</td>
<td>37</td>
</tr>
<tr>
<td>Severe</td>
<td>44</td>
</tr>
</tbody>
</table>

N=324; Weekes, Milison, & Lightfoot, http://198.103.98.138/crd/forum/vol73/2a73c.htm

Treatment That Works!

<table>
<thead>
<tr>
<th>Sanctions</th>
<th>Inappropriate Treatment</th>
<th>Appropriate Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>% Reduction in Recidivism</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-7</td>
<td>-6</td>
<td>30</td>
</tr>
</tbody>
</table>

Andrews et al., 1990, Criminal Justice and Behavior

Assessing Treatment Needs

TCU Drug Screen (TCUDS):
- Short assessment (2 pages)
  - Drug problems/dependence
  - Treatment history/needs

TCUDS Diagnosis
- 47% Overall Correct Classification

TCUDS ASI-D SSI SASSI-2 Others

N=400; Peters et al., 2000 (Journal of Substance Abuse Treatment)

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Methods for Collecting Information

Self-Report
- Interview
- Self-Administered

Biological Assays
- Urinalysis
- Hair Testing
- Sweat Patch
- Blood and Saliva

Other
- Family and Friends Survey
- Criminal History Records

3 Key Points

1) How do you know if there really is a problem?
2) How do you determine the most effective and efficient treatment for the problem?
3) How do you know if the treatment is working?

Treatment that “works” is Comprehensive

Medical
- Mental Health
- Vocational
- Educational
- Legal
- AIDS / HIV Risks
- Financial
- Housing & Transportation
- Child Care
- Family
- Self-Help (AA/NA)
- Pharmaco-therapy
- Group/Individual Counseling
- Urine Monitoring
- Case Management
- Continuing Care

Treatment that “works” is not a Program or an Event, it is a Stage-Based Process

Screening & Referral
- Severity Assessment
- Criminal Justice System
- “Treatment” Services
- Offender Re-entry
- Case Mgmt, Parole

“Process Model” for Treatment

Engage & Commit
- Begin Changes
- Sustain Efforts
- Quitter: Drugs & Crime

“Process Model” for Treatment

Users: Problem Severity & Treatment Readiness
- Early Engagement
- Early Recovery
- Adequate Retention
- Follow-up Outcomes
- Drug use
- Crime
- Social functions
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**TCU Treatment Model**

- Motivation & Induction
- Patient Severity
- Program Readiness
- Program Staff
- Program Resources
- Program Interventions
- Cognitive Strategies
- Social Skills Training
- Social Support Services
- Personal Health Services
- Supportive Networks
- Drug Use
- Crime
- Social Relations
- Early Engagement
- Early Recovery
- Therapeutic Relationship
- Posttreatment
- Behavioral Change
- Psycho-Social Change
- Sufficient Retention
- Retention/Transition

Simpson, Knight & Dansereau, 2004 (Journal of Community Corrections)

**What works with “highest efficiency?”**

- Low Intensity (Educational in General Pop)
- High Intensity (Structured & Segregated)
- Aftercare (or Re-entry) Program
- Long-term

Risk/Needs Assessment for Trt Decisions?
Effective Interventions & Performance Assessments?
Monitor Progress?

**Problem Severity and Intensive Treatment**

<table>
<thead>
<tr>
<th>Problem Severity</th>
<th>Trt Group</th>
<th>% 3-Year Recidivism</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lower Severity</td>
<td>No Treatment</td>
<td>29</td>
</tr>
<tr>
<td></td>
<td>In-Prison+Aftercare</td>
<td>22</td>
</tr>
<tr>
<td>Higher Severity</td>
<td>No Treatment</td>
<td>52</td>
</tr>
<tr>
<td></td>
<td>In-Prison+Aftercare</td>
<td>26</td>
</tr>
</tbody>
</table>


**Targeted Interventions**

Get Focused!!

**Selection of Targeted Interventions**

- Behavioral Interventions
- Social Skills & Support
- Cognitive Interventions
- Recovery Skills Training
- Early Engagement
- Program Participation
- Changes in Thinking
- Acting

Revised & Tested in Correctional Samples

Simpson, 2002, 2004 (J Substance Abuse Treatment)

**3 Key Points**

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Texas/ New Offenses Only:
3-Year Return-to-Custody Rates (%)

No Treatment | Aftercare Dropouts | Aftercare Completers
--- | --- | ---
19 | 22 | 6


TCU CJ-CEST and CTS

Treatment Needs/Motivation
- Desire For Help
- Treatment Readiness
- Treatment Needs Index
- External Pressures Index

Psychological Functioning
- Depression
- Anxiety
- Self Esteem
- Decision Making

Social Functioning
- Hostility
- Risk Taking

Treatment Process Domains
- Treatment Participation
- Treatment Satisfaction
- Counselor Rapport
- Peer Support
- Social Support

Criminal Thinking Scales
- Entitlement
- Justification
- Personal Irresponsibility
- Cold Heartedness
- Criminal Rationalization
- Power Orientation

5 Participating Centers at 26 Sites

TCU (9 Sites) 2106
U Del (6 Sites) 428
NDRI (5 Sites) 317
U Ky (4 Sites) 282
UCLA (2 Sites) 133
Total Clients: 3266

Sites Sampled –
1. Men/Women
2. ModTC/CBT
3. Resid/OP

CJ CEST & CAI

Norms for CJ-CEST Scale Profiles
25th-75th Percentile Scores (N=3,266)

Improvement During Treatment

Response to Treatment


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