

RESEARCH ROUNDUP

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Treatment outcome studies in criminal justice

Interest continues to grow in the U.S. and abroad on the question of whether or not corrections-based drug and alcohol treatment is worthwhile. In attempting to provide answers, a growing body of IBR research conducted over the past decade has focused on what seems to work best in treatments for inmates and probationers in criminal justice (CJ) facilities. Most notably, there seems to be no simple formula for achieving successful treatment outcomes with this challenging population. Our research points to a

balance of intertwining factors that may have a positive influence both on during-treatment and post-treatment outcomes.

Effective screening and referral are important for optimal treatment outcomes.

Intensive prison-based treatment, which is generally more expensive and has limited numbers of treatment slots/beds, is most appropriate for individuals with more severe drug and crime

problems. Those with less serious problems can benefit from other types of interventions. In an effort to design a quick screening and referral tool to help assessment workers in criminal justice settings make more effective determinations about an inmate's need for treatment, the [TCU Drug Screen \(TCUDS\)](#) was developed. Tests of the instrument using a sample of over 18,000 Texas inmates found it to be highly reliable and valid for identifying inmates with drug-

See **Criminal justice**, page 4.



IBR Web site wins award

IBR's Web site has won an Award of Excellence

from the Society of Technical Communication (STC), Lone Star Chapter in the category of Online

Competition, Information and Reference. The IBR site was the only non-profit winner in this category, competing against such notables as Dell Computer Corporation, Nokia, and Sage Software.

IBR Webmaster, [Charlotte Pevoto](#), who manages the overall technical development and maintenance of the site, received the award on behalf of the Institute. The STC judges' feedback complimented the site's straightforward design, ease of navigation, fast download capability, and overall usability.

The Web site first went online in the Fall of 1996, with a general mission

See **Web site award**, page 3.

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Assessing program change

by [Dwayne Simpson](#), IBR Director

In our last newsletter (Vol. 10, No. 3, Fall 2000) we summarized organizational and client functioning assessments for programs that attended a training workshop for the Prairielands ATTC in Omaha. Since then, we have collected post-training assessments as part of efforts to evaluate and refine these instruments. In comparing these data with pre-training assessments, we noticed large changes in client and staff ratings had occurred in one program. **Figure 1** illustrates these changes in regard to *client participation* scores, showing that two other similar programs (Program A and Program B) remained stable while Program C changed from the lowest to the highest score over the 5-month follow-up period (all three programs had ratings from 3 or more staff and 20 or more clients). **Figures 2 and 3** describe client changes in Program C in more detail and also reveal that client services increased. Finally, staff ratings for Agency C (**Figure 4**) indicated that several areas of *training needs* dropped (especially in areas focused on during the workshop), and staff attitudes for *making program changes* became more positive.

A telephone call to the program confirmed the accuracy of these survey results. In brief, we were told by the new program director that there had been major changes, including personnel turnover along with staff adoption of some of the techniques learned at our workshop. Although organizational change in most programs is a slow process, this abrupt and significant restructuring in Program C was

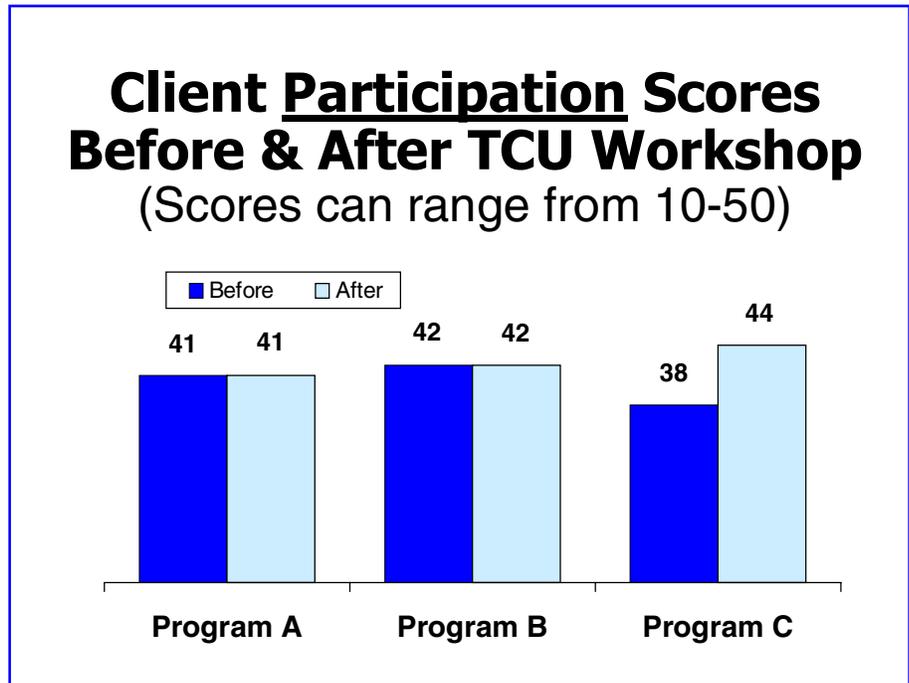


Figure 1.

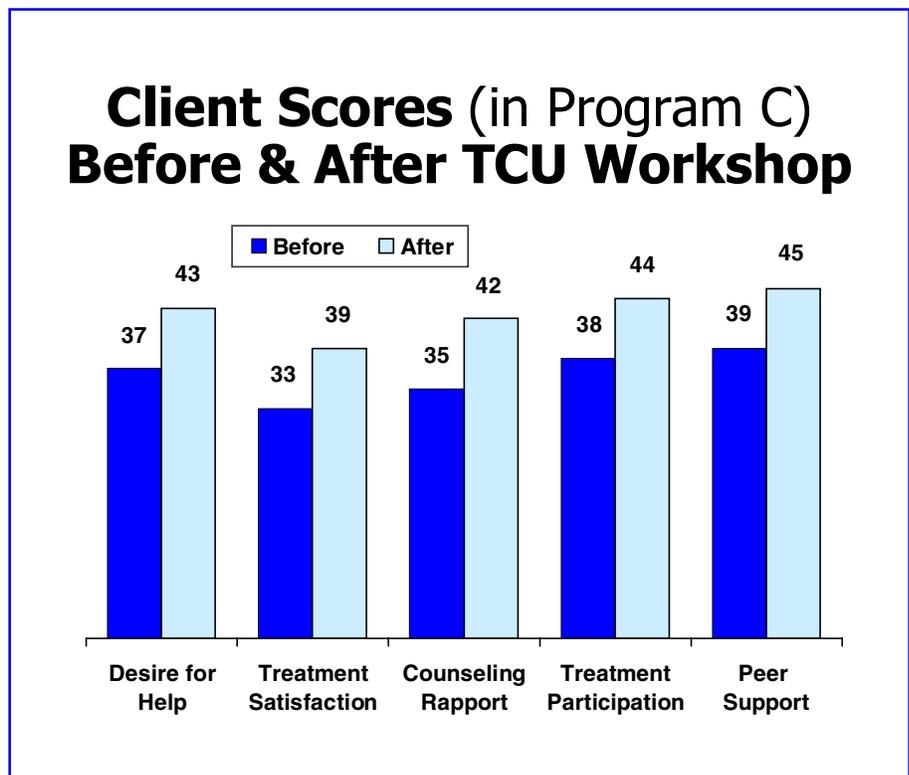


Figure 2.

opportunistic for us because it helped establish that our assessments can accurately detect shifts in activity and attitudes in a program.

Minor refinements are being made in the instruments based on findings

from this first phase of this NIDA-funded technology transfer research project, and preparations are in place for the next phase based on another workshop this Spring in the Seattle area. ■

Client Services (in Program C) Before & After TCU Workshop

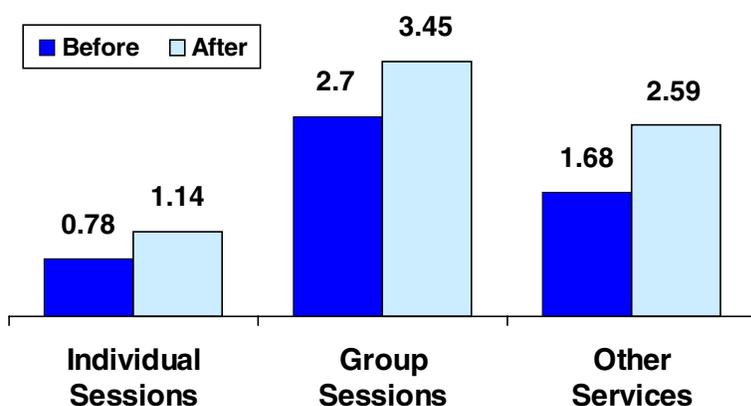


Figure 3.

Staff Scores (in Program C) for Immediate Training Needs

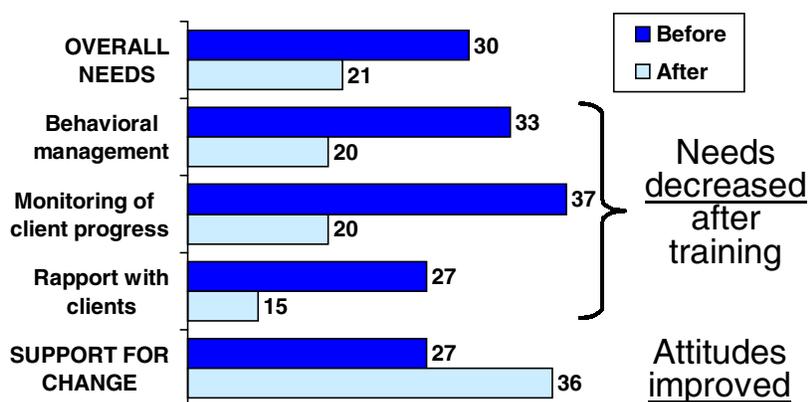


Figure 4.

Web site award, continued from front page.

to provide updated information about the research activities conducted at IBR, including references to findings published in journal articles and other special reports. Over the years, it has evolved into a critical dissemination tool for evaluation materials, scholarly presentations, and information about collaborative projects.

The IBR site now provides a comprehensive depository of [data collection instruments](#), [treatment intervention materials](#), [conference presentations](#), [publication abstracts](#), and [newsletters](#), all available as free-of-charge downloads in a variety of formats. The site currently averages about 1500 “hits” per day, a number that continues to increase. At least 10% of the users are from other countries in Asia, Europe, North and South America, and the Australian region.

The scope and function of the Web site will continue to evolve. Recent additions include making available for free downloading a complete set of [counseling manuals](#) that are being used in the [DATAR-3 project](#). This newly-funded NIDA project is concerned with the measurement of technology transfer indicators and with helping drug treatment programs more easily access and utilize research-based treatment interventions and program assessment tools. ■

Criminal justice, continued from front page.

related problems in need of treatment. The brevity of the TCUDS, along with its potential usefulness in minimizing inappropriate referrals to intensive treatment programs has led to its use in several large correctional facilities in over a dozen states.

An interest in creating usable assessment tools for corrections-based treatment populations continues at IBR, and a newly-funded project, being carried out in conjunction with the National Institute of Corrections, will develop and test a new comprehensive assessment instrument that seeks to capture the essential components of CJ-based *treatment process* over time. It is designed to identify favorable during-and-post-treatment outcomes and track changes in inmate attitudes and functioning as they progress through drug abuse treatment programs offered at six Bureau of Prisons facilities in Texas.

Quality therapeutic interventions during custody can improve group counseling, the primary form of counseling offered in CJ settings.

Our [CETOP research project](#) (Cognitive Enhancement for the Treatment of Probationers) is conducted at a 140-bed intensive supervision treatment facility for substance abusers in north Texas. CETOP studies have consistently supported the value of using cognitive, motivational, and induction strategies to improve during-treatment outcomes. Probationers taking part in mapping-enhanced counseling, a visual method for conceptualizing problems and issues, reported significantly more treatment participation, progress, and

motivation to make lifestyle changes than did those in standard counseling. In addition, they gave higher ratings to the program and personnel. In more recent studies, probationers assigned to participate in a group induction and readiness program rated themselves as more engaged in treatment than those in standard groups, and they gave higher ratings to the treatment program and personnel. Those in the induction program also rated their communities as more engaged and helpful.

The continuum of criminal justice treatment efforts should include emphasis on the inmate's transition back into the community.

Community-based aftercare is integral and failure to provide adequate transitional treatment following release can erode positive gains made during in-prison treatment. Early outcome evaluations conducted by IBR at the Kyle New Vision Program ([PTA Project](#)), an in-prison therapeutic community that provides intensive treatment for drug-involved inmates during the final 9 months of their sentence, were highly favorable. Program graduates had clear reductions in criminal and drug activity in the 6 months after leaving prison (compared to their records for the 6 months before incarceration). They also had lower recidivism and relapse rates than a matched comparison group.

However, 1-year follow-up outcome studies have emphasized the role of post-release aftercare programs (such as transitional therapeutic communities) for improving outcomes. For example, only 17% of those completing both in-prison and transitional programs were

arrested within 1 year of release, compared to 30% of those who complete prison treatment only and 30% of an untreated comparison group. In more recent studies of 3-year outcomes among inmates with high-severity problems, those who complete both in-prison and aftercare programs were the least likely to be reincarcerated (26%), compared to 66% of aftercare dropouts and 52% of the comparison group.

Similar results were found in studies conducted at a corrections-based, community residential treatment facility serving the Dallas area ([RSAT Project](#)). The 228 probationers enrolled in the program were court mandated in lieu of incarceration for nonviolent, felony drug and alcohol offenses. They spent an average of 6 months in the locked residential phase, and some went on to participate in 6 to 9 months of aftercare. Early studies showed that program graduates had lower rearrest rates than program noncompleters at both 6 month and 1-year follow-up. A more recent study, funded by the National Institute of Justice, is examining treatment process and outcome at this facility. Findings show that about 70% of probationers complete the program and that those who drop out tend to have more serious rules infractions or quit against staff advice. Dropout because of rule violations was associated with being cocaine dependent and having a history of depression or violent behavior.

[Citations](#) and further information about IBR evaluation and assessment studies in correctional settings, including a list of [downloadable data forms](#) are available at our Web site. ■

Research Highlights

Report in press

In this study to assess the impact of workplace training on employees attitudes about substance abuse and the benefits of employee assistance programs, municipal employees (n=260) were randomly assigned to two types of training. One group received an informational, didactic review of their workplace EAP and

substance abuse policy and the second group received skills-enhancement training that presented substance abuse prevention in the context of team-building and stress management. Results showed that both types of training increased knowledge about EAP functions and policy, with the team-building group reporting more EAP trust, willingness to seek help, and

willingness to encourage peers to seek help, and the informational group reporting reduced attitudes of stigma about substance abusers.

Bennett, J. B., & Lehman, W. E. K. (in press). Workplace substance abuse prevention and help-seeking: Comparing a team-oriented and informational training. *Journal of Occupational and Health Psychology*. ■

IBR journal articles published in 2000

Bartholomew, N. G., Hiller, M. L., Knight, K., Nucatola, D. C., & Simpson, D. D. (2000). Effectiveness of communication and relationship skills training for men in substance abuse treatment. *Journal of Substance Abuse Treatment, 18*(3), 217-225. [\[Abstract\]](#)

Bennett, J. B., Lehman, W. E. K., & Reynolds, S. (2000). Team awareness for workplace substance abuse prevention: The empirical and conceptual development of a training program. *Prevention Science, 1*(3), 157-172. [\[Abstract\]](#)

Blankenship, J., & Dansereau, D. F. (2000). The effect of animated node-link displays on information recall. *Journal of Experimental Education, 68*(4), 293-308. [\[Abstract\]](#)

Czuchry, M., & Dansereau, D. F. (2000). Drug abuse treatment in criminal justice settings: Enhancing community engagement and helpfulness. *American Journal of Drug and Alcohol Abuse, 26*(4), 537-552. [\[Abstract\]](#)

Griffith, J. D., Rowan-Szal, G. A., Roark, R. R., & Simpson, D. D. (2000). Contingency management in outpatient methadone treatment:

A meta-analysis. *Drug and Alcohol Dependence, 58*, 55-66. [\[Abstract\]](#)

Hiller, M. L., Broome, K. M., Knight, K., & Simpson, D. D. (2000). Measuring self-efficacy among drug-involved probationers. *Psychological Reports, 86*, 529-538. [\[Abstract\]](#)

Hiller, M. L., Simpson, D. D., Broome, K. M., & Joe, G. W. (2000). Legal status at intake and posttreatment incarceration: 12-Month follow-up of methadone maintenance treatment. *Journal of Maintenance in the Addictions, 1*(4), 27-43. [\[Abstract\]](#)

Knight, K., Hiller, M. L., Broome, K. M., & Simpson, D. D. (2000). Legal pressure, treatment readiness, and engagement in long-term residential programs. *Journal of Offender Rehabilitation, 31*(1/2), 101-115. [\[Abstract\]](#)

Melnick, G., De Leon, G., Hiller, M. L., & Knight, K. (2000). Therapeutic communities: Diversity in treatment elements. *Substance Use & Misuse, 35*(12-14), 1819-1847. [\[Abstract\]](#)

Rowan-Szal, G. A., Chatham, L. R., Joe, G. W., & Simpson, D. D.

(2000). Services provided during methadone treatment: A gender comparison. *Journal of Substance Abuse Treatment, 19*, 7-14.

[\[Abstract\]](#)

Rowan-Szal, G. A., Chatham, L. R., & Simpson, D. D. (2000). Importance of identifying cocaine and alcohol dependent methadone clients. *The American Journal on Addictions, 9*, 38-50. [\[Abstract\]](#)

Rowan-Szal, G. A., Joe, G. W., & Simpson, D. D. (2000). Treatment retention of crack and cocaine users in a national sample of long term residential clients. *Addiction Research, 8*(1), 51-64. [\[Abstract\]](#)

Sia, T. L., Dansereau, D. F., & Czuchry, M. L. (2000). Treatment readiness training and probationers' evaluation of substance abuse treatment in a criminal justice setting. *Journal of Substance Abuse Treatment, 19*, 459-467. [\[Abstract\]](#)

Simpson, D. D., Joe, G. W., Greener, J. M., & Rowan-Szal, G. A. (2000). Modeling year 1 outcomes with treatment process and post-treatment social influences. *Substance Use & Misuse, 35*(12-14), 1911-1930. [\[Abstract\]](#) ■

What's New on the Web

At the IBR site, <http://www.ibr.tcu.edu>

About IBR — IBR's 2000 Annual Report is available to download in Adobe® Acrobat® PDF format. This online version offers "Web markers" that link directly to new and updated information in the IBR and DATOS Web sites. Download the Annual Report and take a detailed Web tour of IBR's 2000 research activities.



Forms — An important revision of the popular criminal justice form, *TCU Drug Screen (TCUDS-II)*, is featured in the Web site's Forms Section. Look to download this form (in PDF) under **Correctional: Residential Treatment Forms**.

Projects — Now the Projects Section features project information arranged by treatment setting and purpose, such as *National Treatment Evaluations, Treatment Process and Technology Transfer, Criminal Justice, Women and Children, Drugs in the Workplace, HIV/AIDS Outreach, and Adolescent Interventions*. Projects pages have updated summaries and serve as focal points with links to related project support materials throughout the IBR Web site. New Criminal Justice projects, **Bureau of Prisons (BOP) Treatment Process Evaluation** and Phase 2 of the **CETOP Project**, are included in this section update.

Downloads — This page provides a convenient, indexed list of all files that can be downloaded from the IBR site.

Graduating soon? Check out IBR's graduate training opportunities in "About IBR."

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