Please Use It and Pass It On
by D. Dwayne Simpson, IBR Director

Some of the best news to applied researchers is hearing that your work is being used. It is especially good news when large public applications are found for your work. This issue focuses on recent decisions by the U.S. Office of Probation and Pretrial Services (OPPS), as well as the U.S. Bureau of Prisons (BOP) and other correctional systems to adopt the TCU Drug Screen II for assessing the drug-related treatment needs of offenders. This latest adoption means an estimated 200,000 of these assessments are being completed annually in the U.S. And because it is available at no cost to users, it represents a huge cost savings for federal, state, and local correctional systems. Even better, this is only one of our many no-cost TCU assessments and treatment resources available to treatment providers.

Another feature of this newsletter is our work in Northern Italy. We have found some wonderful partners in the Veneto region (around Venice and Verona) for conducting international comparisons of organizational functioning in substance abuse treatment programs. Preliminary findings reported at the CPDD (College on Problems of Drug Dependence) meeting in San Juan, Puerto Rico last month indicate good cross-cultural applications of these TCU assessments. Another meeting this month in Venice is set for sharing findings with participating programs.

This is like getting dessert (maybe gelato) after a fine dinner. So we say, “Please use it and pass it on.” And to those who do, “Grazie.” ■

International focus on organizational functioning

The TCU Organizational Readiness for Change (ORC) survey is emerging as an effective, evidence-based measure for understanding program attributes that contribute to therapeutic process and outcomes in U.S. treatment programs (see Special Issue of Journal of Substance Abuse Treatment, Vol. 22, No.4, 2002). As part of a National Institute on Drug Abuse (NIDA) initiative to establish linkages through international research collaborations, the ORC has been translated into Italian for a study of organizational factors in both public and private treatment agencies in the Veneto region of Northern Italy. The goals of these studies are to establish psychometrics for the Italian translation of the ORC, examine differences between Italian and U.S. treatment programs in areas of organizational functioning, and assist the Italian health ministry in identifying potential areas where organizational enhancements might benefit both private and publicly-funded programs.

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The IBR team, headed by Drs. Pat Flynn and Dwayne Simpson and working with collaborators Lorenzo Rampazzo and Monica De Angeli in Italy, targeted 51 public addiction services programs and 31 private therapeutic communities for this research. A U.S. sample of 235 programs affiliated with regional Addiction Technology Transfer Centers (ATTCs) serves as a comparison group.

As reported at the recent CPDD meeting in Puerto Rico, results from the first phase of data collection found the Italian version of the ORC to have acceptable psychometric properties and reveal high levels of similarity between scale scores for U.S. and Italian treatment agencies. Most notably, staff ratings of organizational climate and program resources were strikingly similar (see Figure 1.). By defining “norms” for comparatively high and low functioning levels using 25 and 75 percentile scores, programs are able to make clearer interpretations about what these data mean for their organizations. Interestingly, the figure shows the mean scores for the U.S. sample also operate within the norms for programs in Northern Italy.

The needs of programs in Italy focus on client problems and performance assessments, as well as staff training for improving client engagement and management. Like in the U.S., however, individual programs are highly diverse across virtually all dimensions of organizational functioning. As has been the case in recent U.S.-based studies, access to training and its utilization are directly related to better program resources, staff attributes, and organizational climate. And because programs with the weakest infrastructure are least successful in implementing service enhancements, improving organizational functioning deserves a high priority in the quest for making evidence-based treatment improvements.

This NIDA-funded project is helping transfer the TCU assessments internationally while simultaneously furthering studies on the process of organizational change in the U.S. and Italy. Drs. Flynn and Simpson will travel to Venice in September to present results from Phase I and to explore utilization as part of future work there. Their workshop will include facilitating the exploration of how these data might be used to improve health services in the Veneto region. Presentations based on these data can be viewed at http://www.ibr.tcu.edu

Figure 1. Organizational functioning scores for programs in Italy and U.S. (with 25-75% norms).
TCU Drug Screen continues to gain popularity

As many as 60% of incoming prisoners to federal, state, and local correctional settings may test positive for drugs or alcohol at the time of their arrest. But do they all need substance abuse treatment while in custody? Or as a condition of probation or parole? These are exactly the kinds of questions the TCU Drug Screen is designed to answer. The instrument has been shown to have one of the highest accuracy rates for helping correctional facilities target offenders who are most likely to benefit from drug and alcohol treatment while incarcerated or under community supervision.

The TCU Drug Screen was developed and validated at IBR in the early 1990s by Drs. Kevin Knight and Dwayne Simpson as an instrument to meet the needs of large corrections-based treatment programs. Its psychometric properties were established using data from 18,000 admissions to Texas criminal justice facilities that found it compared favorably with more well-known tools such as the Addiction Severity Index (ASI) drug use section and the Substance Abuse Subtle Screening Inventory (SASSI; see Research Roundup, Volume 8, No. 2). Classification criteria for drug dependence and abuse outlined in the Diagnostic and Statistical Manual, IV (DSM-IV; APA, 1997) are used in the TCU Drug Screen II for assessing addiction problems. It efficiently gauges offenders drug use history, the severity of their drug use, and their readiness and motivation for treatment. Texas and other states currently use the instrument as a screening assessment in the allocation of treatment slots within the criminal justice system.

Recently, the U.S. Office of Probation and Pretrial Services (OPPS) has proposed adopting the TCU Drug Screen for use in the federal probation and pretrial services system, following recommendations from a national pilot study of the instrument conducted by the OPPS National Expert Panel. Field officers administered the instrument as part of the study and provided feedback on its usability and ease of administration. Although designed for self-administration, officers found that for their purposes the instrument was best administered as part of an in-person interview with offenders. This allows officers to clarify any discrepancies and gain a fuller personal understanding of the severity of an offender’s drug-related problems and treatment needs. In addition, OPPS anticipates that this screening tool will make it easier for officers to facilitate comprehensive case planning and management by providing a baseline score from which to measure treatment participation and outcomes. Dr. Knight participated in a recent Federal Judicial Television Network broadcast to discuss the utility of TCU Drug Screen and to answer questions about its implementation.

In addition to the proposed use of the TCU Drug Screen by OPPS, the Federal Bureau of Prisons (BOP) is currently using the instrument in two of its Regions and is considering adopting it nationwide within the next few months. The instrument is being used to help determine eligibility for admission to its Residential Drug Treatment Programs (RDAP). These residential programs have been shown to reduce post-incarceration drug use and criminal activity, making screening for appropriate offender placement an important priority.

The Departments of Corrections (DOC) in both Idaho and Pennsylvania are among the latest state criminal justice systems to add the TCU Drug Screen to their intake and assessment services. In Idaho, the instrument is administered prior to sentencing (along with a general measure of offender risks and needs) as part of the state’s Pre-sentence Investigation to help match individuals to available drug treatment and education programs within the system. Adding the TCU instrument is seen as a way to solidify the DOC’s assessment process and strengthen its statewide data base for following post-sentencing outcomes.

In Pennsylvania, the TCU Drug Screen is a core component of the state DOC’s Alcohol and Other Drugs (AOD) screening and assessment program managed through its Diagnostic and Classification Centers. Scores from the instrument are
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used to help treatment specialists make systematic referrals into treatment. Data collected to date indicate that about 70% of all inmates who enter the DOC are dependent on alcohol or drugs and would benefit from treatment, a finding that is similar to national trends.

Placement in substance abuse treatment programs within the nation’s criminal justice systems likely will continue to be an issue of concern, especially in regions experiencing state and local budget constraints. The TCU Drug Screen II offers the cost-cutting benefit of being available at no charge to interested programs. Its track record and growing popularity are due, in part, to its accuracy, empirical validity, and ease of use. The complete instrument is available in both English and Spanish versions and includes simple guidelines for scoring. Free downloads are available at the IBR Web site at http://www.ibr.tcu.edu.

What’s on the Web from this issue

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Presentations: Collaborative TCU/Veneto Study of Organizational Functioning, presented at the June 2004 CPDD meeting in Puerto Rico, is available as a PowerPoint® download on the “Feature Presentations” page. (http://www.ibr.tcu.edu/presentations/feature.html)

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Forms: The popular TCU Drug Screen II is available for free downloading in English and Spanish. Look for the form under “Screening for Treatment” in the list of TCU Correctional Treatment Assessments on the TCU Treatment Assessments Web page. (http://www.ibr.tcu.edu/pubs/datacoll/tcutreatment.html)