DATAR follow-up studies underway

Follow-up outcome studies based on data from clients who received treatment as part of the first phase of the DATAR project support the importance of treatment retention and enhanced counseling techniques. In a recent study focusing on retention issues, IBR Director Dr. Dwayne Simpson, and Drs. George Joe and Grace Rowan-Szal looked at 435 opiate-dependent clients one year after discharge from three methadone treatment programs in Texas. Results showed that there were significant improvements in illicit drug use, alcohol use, and criminal involvement at follow-up, with longer retention (especially a year or more) being related to better outcomes (see Figure 1 on page 2.) Clients in treatment for a year or longer were 5 times more likely than shorter term clients to show favorable outcomes. The study also found that length of stay was predicted by indicators of client motivation and early program involvement. Although more integrative analyses of client characteristics, therapeutic process, and environmental influences are needed, it appears that frequency of session attendance during the first months of treatment and motivational measures can help identify clients at higher risk of dropout.

In a related study focusing on enhanced counseling techniques, Drs. George Joe, Donald Dansereau, Urvashi Pitre, and Dwayne Simpson looked at a subsample of DATAR follow-up clients (N=202) who had been randomly assigned to either enhanced or standard counseling conditions during treatment. Those in the enhanced condition were exposed to node-link mapping techniques during individual and group sessions. The study looked at indicators of behavioral and psychosocial adjustment and found that clients who participated in the mapping condition reported less criminal activity 12 months following treatment discharge. In addition, among clients who

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TCU/DATOS plan focuses on treatment retention

IBR’s research plan for the 5-year Drug Abuse Treatment Outcome Studies (DATOS) project will concentrate on questions related to early treatment engagement and retention. The DATOS project so far has collected intake, during-treatment, and follow-up data from some 10,000 adults in methadone maintenance, long-term residential, and outpatient drug-free programs across the country. In addition, Year 3 follow-up data will be collected during the coming year.

Drs. Dwayne Simpson and George Joe, who head the IBR team, will use DATOS files to learn more about program and client characteristics, especially cocaine use, HIV/AIDS risks, crime, and psychiatric problems, that impact treatment outcomes. Special attention will be given to problems associated with treatment dropouts that occur before clients achieve therapeutic engagement in a program and with practical concerns about finding the best matches between types of clients and treatment alternatives.

DATOS is a collaborative effort among several substance abuse research centers and includes teams of experienced evaluation scientists from IBR, the National Institute on Drug Abuse (NIDA), Research Triangle Institute, and the Drug Abuse Research Center at UCLA. This large-scale project will help shed light on the effectiveness of community-based treatment programs and make recommendations for improvements in counseling and service delivery for drug abuse treatment.

Figure 1. Improvements from Before to After Treatment

Findings on the during-treatment benefits of using mapping in drug abuse counseling and suggests the possibility of enduring effects from use of this enhancement strategy.
First Choice begins service

The Salvation Army First Choice Program, a residential treatment program for women and children being evaluated by Dr. Danica Knight at IBR, has begun admitting clients with funds provided by the Center for Substance Abuse Treatment (CSAT). The program has been expanded to allow services for 20 client families who live in newly renovated efficiency apartments on the First Choice campus in Fort Worth.

In addition to substance abuse treatment and vocational services for parents, the program features an on-site therapeutic child care center dedicated to play therapy, drug and alcohol education, tutoring, skills building, and self-esteem enhancement for children. Initial assessments indicate that a high percentage of children entering the program with their mothers are at risk for behavioral problems. Special programming to help mothers address parenting and other issues will include the Strengthening Families Program, developed by Dr. Karol Kumpfer and Time Out! For Me, a women's health and assertiveness module developed by IBR.

Evaluation and assessment domains for the First Choice Program will include demographic, drug and alcohol use, criminal history, and psychosocial functioning for the mothers; health, learning, and social/emotional functioning for the children; and family functioning and parent/child relationships for the family. In addition, elements of the treatment program itself will be looked at including compliance, individual, group, and family counseling, educational interventions, and linkages to other community social services.

Research Highlights

Studies examine node-link mapping for probationer treatment

Two recently completed IBR studies examined the use of node-link mapping in a criminal justice substance abuse treatment setting. In the first study, Associate Research Scientist Dr. Dianna Newbern examined counseling session evaluations collected from probationers who participated in 26 group sessions at a residential treatment facility in Mansfield, Texas as part of the Cognitive Enhancements for the Treatment of Probationers (CETOP) project. Sessions were divided into those that involved a large amount of node-link mapping activities and those that used little or no mapping. Participants rated the sessions that used mapping as significantly deeper and as involving more group participation.

The second study by Associate Research Scientist Dr. Urvashi Pitre involved 386 probationers who were randomly assigned to either mapping-enhanced or standard counseling conditions. Those exposed to node-link mapping counseling gave more favorable evaluations of their group meetings, counselors, fellow probationers, and security staff than did those in the standard condition. In addition, mapping subjects rated themselves higher on treatment effort and self-efficacy measures than did standard subjects. The findings suggest that mapping fosters more effective communication, promotes therapeutic alliance, and enhances perceptions of program effectiveness.

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Lighthouse Institute to handle DATAR treatment manuals

Lighthouse Institute (LI), a nonprofit division of Chestnut Health Systems in Bloomington, Illinois, has taken over the publication and distribution of treatment enhancement manuals developed for IBR’s DATAR project. The collaborative venture, designed to assure wider availability of these materials to substance abuse treatment professionals, is in keeping with LI’s mission to provide training and training resources on a variety of health and human services topics.

IBR manuals currently available include Time Out! For Me, an assertiveness and sexuality module for women; Straight Ahead: Transition Skills for Recovery, which addresses relapse prevention and social networking; Approaches to HIV/AIDS Education, a basic curriculum for HIV awareness and prevention; and Mapping New Roads to Recovery, a primer for counselors on the use of node-link mapping, a visual representation technique. Manuals range in cost from $15 to $19, plus shipping and handling. To order manuals or a catalog of Lighthouse publications call (309) 827-6026 or FAX (309) 829-4661. ■