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Drug treatment for correctional populations

by [Dwayne Simpson](#), *IBR Director*

Research on the effectiveness of drug treatment for correctional populations has been the focus of several meetings I attended this past year. They include efforts by the *Office of National Drug Control Policy* (in March), *Department of Justice* (in October), and the *Physician Leadership on National Drug Policy* (in November) to disseminate research findings that can help inform national policy. My message, along with that of other researchers, has been that prison-based treatments with transitional care during paroled release are effective, and so are community-based treatments for criminal justice

referrals. Not only can drug treatment reduce relapse and recidivism rates, but it offers significant cost benefits as well.

Not everyone is fully convinced, however, especially those with more traditional criminal justice orientations. To improve the quality of our treatment research and practice, we need (1) *more efficient assessment and referral systems*, (2) *better monitoring of treatment process and client change during treatment*, and (3) *well designed outcome studies*. Progress is being made in all three arenas, especially involving outcome studies that include stronger

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A process model for prison-based treatment

An emerging treatment process model for correctional settings is taking shape, based on work carried out at TCU and other research centers. The model, as conceptualized by Dr. Dwayne Simpson, is similar in dynamic structure to those based on treatment in community settings. Several empirically measurable stages of effective treatment have been

identified, including therapeutic involvement and participation by inmates, positive peer support and psychological functioning, program completion, and successful transition through aftercare. In addition, inmate attributes (such as motivation and criminal history) and program characteristics (such as staff

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comparison groups and better access to official outcome records (i.e., rearrest and reincarceration data). In the next few months, for instance, a new (and improved) wave of 3-year post-release follow-up studies is expected from the labs of Jim Inciardi at the University of Delaware, Harry Wexler at NDRI, and here at TCU.

We also need to refine our *research communication skills*. Scholarly presentations suitable for our scientific colleagues might benefit

from a more concise and creative delivery when presented to practitioners and policymakers. These “hands-on” audiences are most interested in concrete information and practical applications of findings. Simplified, animated graphics (e.g., PowerPoint®) seem to work well for presenting these data, especially for highlighting key points and walking viewers through the genesis of treatment models or other complex constructions (see article below). These computer-

based presentation tools offer scientists a new avenue for technology transfer and the useful dissemination of findings. However, no matter what medium we use to communicate our message, the burden is on us to structure scientific presentations so that they are lively and meaningful. In this way, what we are learning about the effectiveness of prison- and community-based drug treatment can reach the broadest possible audience. ■

Process model, continued from front page.

training and attitudes) appear to influence treatment process. (See Figure 1.) This points to the need for strategic interventions and systematic monitoring of programs

to help meet future accountability expectations. A detailed, animated slide presentation on the background and future implications of this model, based on a recent report to

the *Physician Leadership to National Drug Policy*, is now available at the IBR Web site: <http://www.ibr.tcu.edu> ■

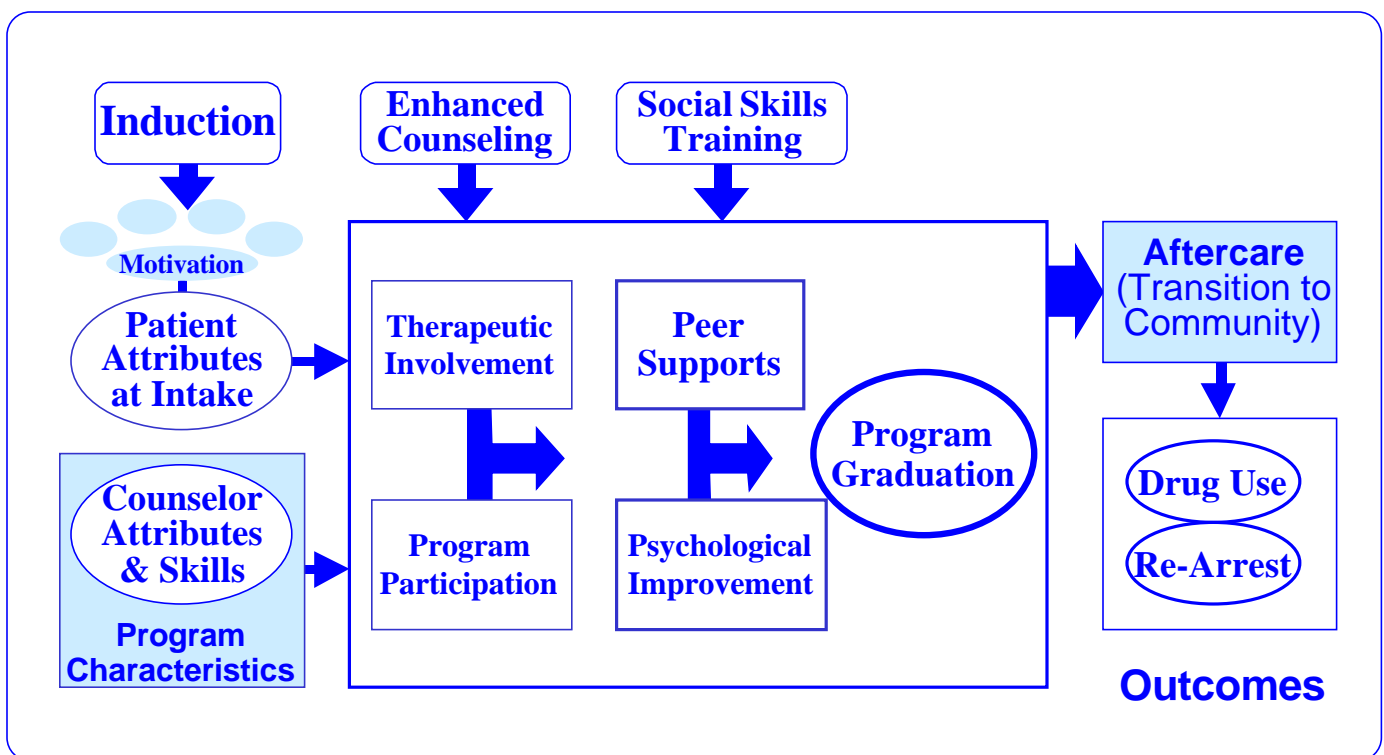


Figure 1. Prison-Based Treatment Process Model

Targeted training for node-link mapping

The utility of node-link mapping, a cognitive enhancement technique for substance abuse counseling, has been demonstrated at IBR in recent years. Both the DATAR and CETOP* projects have found that node-link mapping facilitates counselor-client communication and problem-solving by providing a framework for helping clients visualize interactions and organize experiences. Node-link maps help elicit and represent ideas so that relationships among thoughts, feelings, and actions can be “seen.” Practical applications of node-link mapping continue to be shared with the field through workshops at state and national conferences, including most recently the Texas Commission on Alcohol and Drug Abuse (TCADA) annual meeting and the American Methadone Treatment Association (AMTA) national conference. In addition, a self-guided training manual, *Mapping New Roads to Recovery*, is available for practitioners interested in mapping strategies.**

Node-link mapping creator **Dr. Don Dansereau** and colleagues **Drs.**

Sandy Dees and **Mike Czuchry** have now turned their attention to more targeted methods of sharing mapping technology. In October, Dr. Dees was invited by **Dr. Paula Kleinman** at Columbia University School of Public Health in New York to provide training and consultation for the APRENDE project. This NIDA-funded study will use a mapping-based intervention for heroin addicts undergoing detoxification that will help encourage these patients to enter and remain in long-term treatment after completing their detoxification program. Several types of mapping strategies are used along with solution-based techniques to reduce anxiety and help patients feel more confident about their ability to benefit from ongoing treatment.

Meanwhile, a pilot study to investigate the use of teleconferencing technology to train counselors interested in mapping was recently completed. The collaborative study involved East Tennessee State University (ETSU), Frontier Mental Health (a regional behavioral health cooperative), and Sprint. In the first

part of the study, Dr. Czuchry lead a training seminar for counselors at ETSU and was joined via teleconferencing hook-up by Drs. Dansereau and Dees in Fort Worth. Remote cameras and computer-based education tools were used to facilitate learning and discussion. In the second part of the study, Dr. Czuchry (via a Fort Worth hook-up) provided on-line support for counselors at ETSU during an actual counseling session in which mapping was used. Both clients and counselors gave high ratings to the teleconferencing approach and to node-link mapping. Future studies will continue to investigate the use of telecommunication technologies for training and support in node-link mapping. ■

* *Drug Abuse Treatment Assessment and Research and Cognitive Enhancements for the Treatment of Probationers.*

** Available through **Lighthouse Institute Publishing** at **1-888-547-8271** (toll-free) or on the World Wide Web at: <http://www.chestnut.org/pub.html>

Parenting Workshop piloted at two programs

A new educational module for parents in substance abuse treatment has been piloted at the Salvation Army First Choice program in Fort Worth, a residential treatment facility for women and their children, and at the DATAR research site, Drug Dependence Associates, an outpatient methadone program in San Antonio. The module, *Partners in Parenting*, was developed by IBR

researchers **Norma Bartholomew**, **Danica Knight**, and **Lois Chatham**. It focuses on identified concerns of recovering parents and encourages learning and skills building in key areas such as parent-child communication, developmental expectancies, guidance, and discipline. The 8-session workshop consists of structured group meetings that allow parents to practice and discuss their

experiences with parenting strategies. A total of 35 clients from both sites have taken part in the training to date. Evaluations by both counselors and clients give the module high ratings. Future studies of the module's effectiveness will examine pre- and post-workshop evaluations of family functioning and client parenting skills. ■

Annual Reports highlight probationer treatment

Two teams of IBR researchers working with criminal justice populations in the North Texas area have compiled descriptive reports on these probationers. Treatment and psychosocial information from data collection systems developed at TCU (and available at the IBR Web site) are summarized below:

Dallas County Judicial Treatment Center

A total of 468 probationers were admitted to the Dallas County Judicial Treatment Center (DCJTC) at Wilmer during 1997. About 58% met criteria for alcohol dependence, 68% for cocaine dependence, 34% for marijuana, and 16% for heroin. The DCJTC population was predominately male (69%), Caucasian

(46%), African American (43%), over age 25 (77%), and never married (45%). The average years of education was 11 and 46% were unemployed prior to the arrest leading to their admission at DCJTC. In general, women showed more severe clinical profiles than did men and were more likely to be unemployed or homeless at admission. Overall, the majority (67%) of probationers completed treatment and showed improvements in psychosocial functioning during their 6-month stay.

Substance Abuse Treatment Facility, Tarrant County Community Corrections

The Substance Abuse Treatment Facility (SATF) of the Tarrant

County Community Correctional Facility, the research site for the CETOP project, admitted a total of 412 probationers in 1997. Alcohol, cocaine, crack, and marijuana were the drugs of choice for this population. The SATF population also was predominately male (68%), Caucasian (57%), and over 25 years of age (66%). Sixty percent had completed high school or received a GED and only 22% were unemployed prior to arrest. Women were more likely than men to be heavy crack users (31% versus 15%) and were generally older. The majority (88%) of these probationers completed the 4-month treatment program and showed evidence of improved psychosocial functioning. ■

1998 journal articles by IBR Staff

Bennett, J. B., & Lehman, W. E. K. (1998). Workplace drinking climate, stress, and problem indicators: Assessing the influence of teamwork (group cohesion). *Journal of Studies on Alcohol*, 59(5), 608-618.

Czuchry, M., & Dansereau, D. F. (1998). The generation and recall of personally relevant information. *Journal of Experimental Education*, 66(4), 293-315.

Czuchry, M., Dansereau, D. F., Sia, T. L., & Simpson, D. D. (1998). Using peer, self, and counselor ratings to evaluate treatment progress. *Journal of Psychoactive Drugs*, 30(1), 81-87.

Griffith, J. D., Joe, G. W., Chatham, L. R., & Simpson, D. D. (1998). The development and validation of a *Simpatía* Scale for Hispanics entering drug treatment. *Hispanic Journal of Behavioral Sciences*, 20(4), 468-482.

Griffith, J. D., Knight, D. K., Joe, G. W., & Simpson, D. D. (1998). Implications of family and peer relations for treatment engagement and follow-up outcomes: An integrative model. *Psychology of Addictive Behaviors*, 12(2), 113-126.

Hiller, M. L., Knight, K., Broome, K. M., & Simpson, D. D. (1998). Legal pressure and treatment retention in a national sample of long-term residential programs. *Criminal Justice and Behavior*, 25(4), 463-481.

Joe, G. W., Simpson, D. D., & Broome, K. M. (1998). Effects of readiness for drug abuse treatment on client retention and assessment of process. *Addiction*, 93(8), 1177-1190.

Knight, D. K., Broome, K. M., Cross, D. R., & Simpson, D. D. (1998). Antisocial tendency among drug-addicted adults: Potential long-term

effects of parental absence, support, and conflict during childhood. *American Journal of Drug and Alcohol Abuse*, 24(3), 361-375.

Knight, K., Hiller, M. L., Simpson, D. D., & Broome, K. M. (1998). The validity of self-reported cocaine use in a criminal justice treatment sample. *American Journal of Drug and Alcohol Abuse*, 24(4), 647-660.

Lehman, W. E. K., Farabee, D. J., & Bennett, J. B. (1998). Perceptions and correlates of co-worker substance use. *Employee Assistance Quarterly*, 13(4), 1-22.

Pitre, U., Dansereau, D. F., Newbern, D., & Simpson, D. D. (1998). Residential drug abuse treatment for probationers: Use of node-link mapping to enhance participation and progress. *Journal of Substance Abuse Treatment*, 15(6), 535-543. ■

Research Highlights

New projects

The National Institute of Justice announced that funding will begin in January for a new IBR study entitled *Assessment of a Drug Screening Instrument in Correctional Settings*, designed to assess the use of the TCUDS instrument within the Texas Department of Criminal Justice (TDCJ) Institutional Division and State Jail Division. The study will be carried out during the next 2 years, with **Drs. Kevin Knight** and **Matthew Hiller** serving as Project Managers.

Conference presentations

Drs. Dwayne Simpson and **Kevin Knight** helped inform policy makers about current issues in prison-based treatment at the Department of Justice National Corrections Conference held in Los Angeles in early November. Dr. Knight also chaired a panel on *Critical Issues in Treating the Drug Using Criminal Offender* at the American Society of Criminology annual meeting in Washington, DC in November. He discussed *Legal Pressure and Treatment Motivation in a National Sample of Long-Term Programs* and was joined by **Dr. Matthew Hiller**, who presented a paper entitled *Prison-Based Substance Abuse Treatment, Residential Aftercare, and Recidivism*.

Dr. Kirk Broome joined Dr. Simpson at the Target Cities Meeting in New Orleans in October. The two used data from the national Drug Abuse Treatment Outcome Study to discuss applications of

hierarchical linear modeling (HLM) in outcome evaluations.

Reports in press

Lifetime and current psychiatric comorbidity measures were used as predictors of drug treatment retention in a sample of DATOS clients from diverse agencies and treatment settings. Results indicated current psychiatric symptoms were better predictors of treatment retention than lifetime symptoms.

Psychiatric Comorbidity and Retention in Drug Abuse Treatment Program, Kirk Broome, Patrick Flynn, & Dwayne Simpson. *In press: Health Services Research.*

Hierarchical linear model (HLM) regression analysis was used to examine client and treatment characteristics as predictors of initial HIV risk levels and reductions over time in a sample of DATOS clients. Results showed cocaine use, antisocial personality, and geographic location of the treatment center impacted risks.

HIV Risk Reduction in Outpatient Drug Abuse Treatment: Individual and Geographic Differences, Kirk Broome, George Joe, & Dwayne Simpson. *In Press: AIDS Education and Prevention.*

The impact of residential aftercare on recidivism following prison-based treatment was examined using a sample of drug-involved offenders in Texas in-prison therapeutic communities. Results found that participation in residential aftercare was associated with lower recidivism rates. **Prison-Based Sub-**

stance Abuse Treatment, Residential Aftercare, and Recidivism, Matthew Hiller, Kevin Knight, & Dwayne Simpson. *In Press: Addiction.*

Records of cocaine use collected as part of an evaluation of prison-based drug treatment were used to compare treatment graduates and a nontreated comparison group of parolees. Self reported drug use, urine, and hair test data were used. Results suggest that cocaine use was underreported when compared to hair test results, but underreporting was lower for treatment graduates than for the untreated comparison group. **The Validity of Self-Reported Cocaine Use in a Criminal Justice Treatment Sample, Kevin Knight, Matthew Hiller, Dwayne Simpson, & Kirk Broome.** *In Press: American Journal of Drug and Alcohol Abuse.*

Book chapters in press

Relapse to Opioid and Cocaine Use Following Methadone Treatment, Kirk Broome, Dwayne Simpson, & George Joe. *In Press: Relapse and Recovery Processes in the Addictions* (F. M. Tims, C. G. Leukefeld, & J. J. Platt, Eds.), New Haven, CT: Yale University Press.

Family Assessment, Danica Knight, & Dwayne Simpson. *In Press: Sourcebook on Substance Abuse: Etiology, Epidemiology, Assessment, and Treatment* (R. E. Tarter, R. T. Ammerman, & P. J. Ott, Eds.). Boston: Allyn & Bacon. ■

What's New on the Web

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

New Data Forms Available:

In response to user requests, the Forms Section is being reorganized to make sets of forms easier to find. Forms recently added include adolescent assessments for treatment intake and follow-up and a new data form to assess counselor alliance with Hispanic clients (Simpatia).

- *TCU Youth Intake Form* (Adolescent Assessment)
- *TCU Youth Follow-up Form* (Adolescent Assessment)
- *TCU Simpatia Scale*



New Web Posters:

- *Assessment of Cocaine and Alcohol Dependent Methadone Patients*
- *Correctional Treatment in Community Settings* (animated slide presentation and annotated PDF version)
- *Demonstration of a Computerized Contingency Management (CM) System: TCU StarChart*

Recently graduated? Check out IBR's web info on graduate training opportunities!

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