Using treatment process to improve retention

by Dwayne Simpson, IBR Director

In preparing for a recent conference presentation on the expansion of drug treatment research and practice, I felt encouraged by the scientific progress our field has made over the last 10 years related to the age-old question “what makes treatment work?” We know, for example, that length of stay in treatment is a principal indicator of treatment effectiveness—the longer a client stays, the better the outcome. About 3-months is the usual threshold for achieving therapeutic benefits, although clients entering treatment with more severe psychosocial problems benefit from longer stays, such as opioid addicts who opt for methadone maintenance. However, the active ingredient for successful treatment is not retention per se, but what happens while the person is in a treatment program.

Studies from TCU and other NIDA-funded research centers have found support for a model that takes into account the interrelatedness of elements of effective drug treatment. This model identifies a sequence of factors such as client motivation and attributes at intake, program characteristics, the therapeutic relationship, client participation and compliance during early treatment, counseling and skills training strategies.

Workplace training project enters year 2

Researchers with IBR’s Workplace Project have completed the first phase of development and field testing of a team-oriented training program designed to increase work group cohesiveness and reduce attitudes and behaviors that contribute to alcohol and drug use on the job. An “enhanced” work-team approach, which emphasizes team-building and problem-solving skills, was piloted and compared to a “standard” approach, which provides didactic information on substance abuse policy and EAP benefits, and preliminary study data were collected. Workers in a mid-sized suburban municipality in the Southwest were randomly assigned to participate in.

The complete online slide presentation, “Using Treatment Process to Improve Retention,” is available at the IBR Website.
Using treatment process, continued from front page.

social support issues, and aftercare. This type of treatment process model is useful for guiding and evaluating interventions to improve treatment effectiveness.

However, as researchers, we are concerned not only with the elements of “what happens,” but also with how we can best measure therapeutic components and systematically relate them to treatment retention and outcome. Figure 1 outlines the series of TCU Treatment Process Assessments that have evolved over the course of several large-scale research projects to meet the challenges of measuring and monitoring treatment process and outcome. These represent key domains and provide a useful framework for better assessing client needs and delivering appropriate treatment services. As we move toward identifying better ways to translate research findings to real-world practice, it would seem that improving the measurement and monitoring of treatment process dynamics and client responses to the elements of treatment should be an important goal for technology transfer studies. Evaluation forms for TCU Treatment Process Assessments can be downloaded from the Forms Section at the IBR Web site.

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**Figure 1.**

**Measuring “what happens” in treatment is a key factor in assessing outcomes.**
Workplace training project, continued from front page.

one of the two types of training or to be part of a control group. The pre-and posttraining measures collected for this study focus on organizational climate, working conditions, self-reports of substance use and perceived substance use among co-workers, attitudes toward policy, EAP utilization, and job performance indicators. Six-month follow-up data on participants also will be collected to help assess whether training is associated with a reduction in substance abuse and related problems for workgroups. Figure 2 shows the breakdown of employees who participated in this study.

During the next phase of the project, workers from several “high risk” departments in a larger, urban municipality will take part in the training. Based on participant feedback and the identified needs of this larger workforce, several revisions in the training curricula are underway. The final program will be evaluated in terms of specific training goals such as individual awareness of substance abuse policy and available EAP services, less tolerant workteam attitudes toward substance use, and the willingness of employees to use communication skills to reduce enabling behaviors and encourage impaired co-workers to seek help. In addition, several secondary goals also will be evaluated including identification of strategies that encourage voluntary participation by workers (e.g., incentives, flexible training schedules) and strategies that address the logistical demands (e.g., time, place, employee work loads) of this type of large-scale workplace study.

A six month follow-up will help assess the effectiveness of training programs for reducing workplace substance abuse.

Figure 2.

TCU Workplace Prevention Training Project: Site 1 Participation Levels

<table>
<thead>
<tr>
<th>Enhanced Team Training</th>
<th>8 hour Training</th>
<th>Post-Training Survey (n = 113)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-Training Survey (n = 141)</td>
<td>Session 1</td>
<td>Session 2</td>
</tr>
<tr>
<td>Standard Training</td>
<td>4 hour Training</td>
<td>Post-Training Survey (n = 81)</td>
</tr>
<tr>
<td>Pre-Training Survey (n = 109)</td>
<td>Session 1</td>
<td>Session 2</td>
</tr>
<tr>
<td>Control Group</td>
<td>Post-Training Survey (n = 98)</td>
<td></td>
</tr>
<tr>
<td>Pre-Training Survey (n = 119)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Enhanced Content
- Building workgroup cohesiveness
- Dealing with co-worker tolerance
- Problem solving / stress reduction
- Communication skills

Standard Content
- Substance abuse policy
- EAP benefits
Research Highlights

Reports in press

The role of both client and program attributes in determining therapeutic engagement in drug treatment was examined in this study based on a sample of DATOS clients. Programs better able to engage clients used more ancillary services, averaged better counseling attendance, and had more heterogeneous clients. Higher motivation at intake, better rapport with counselors, and more frequent counseling attendance were attributes of clients who stayed in treatment at least 3 months.


In a related study, a model incorporating treatment process and client background factors to explain treatment retention was tested using data from different DATOS treatment modalities. Across all modalities, positive reciprocal effects were found between therapeutic involvement and counseling session attributes, which in turn were found to have a direct positive effect on treatment retention. Client motivation at intake helped determine therapeutic involvement. **Retention and Patient Engagement Models for Different Treatment Modalities in DATOS**, George Joe, Dwayne Simpson, & Kirk Broome. *In Press: Drug and Alcohol Dependence.*

An integrative model developed to predict treatment retention was expanded to examine posttreatment outcomes in a sample of methadone clients. Pre- and early-treatment measures of motivation, engagement, and therapeutic relationship were examined in relation to measures of social and family influences, drug use, and criminality in the year after treatment. Support was found for both models and for the importance of including social network variables as predictors of outcome. **Modeling Year 1 Outcomes with Treatment Process and Posttreatment Social Influences**, Dwayne Simpson, George Joe, Jack Greener, & Grace Rowan-Szal. *In Press: Addictive Behaviors.*

The relationship between exposure to co-worker substance use, negative consequences, and work group level characteristics (job safety, drinking climate, cohesiveness) were examined in two samples of municipal employees. Work groups involved in higher risk jobs and those with higher levels of drinking climate were most vulnerable to negative consequences, even after controlling for individual risk factors (such as personal drinking and job stress). **Employee Exposure to Co-Worker Substance Use and Negative Consequences: A Multi-Level Model and Assessment of Work Groups**, Joel Bennett & Wayne Lehman *In Press: Journal of Health and Social Behavior.*

Conference presentations

Dr Grace Rowan-Szal will present “Contingency Management and Relapse Prevention Training in a Sample of Cocaine-Using Methadone Clients” in June at the College on Problems of Drug Dependence annual meeting in Acapulco, Mexico. In April, Dr. Rowan-Szal presented “Assessment of Cocaine...
Surveys highlight Internet utilization

A recent survey of counselors, clinicians, and researchers who responded to an informal questionnaire card distributed at conferences and via the Research Summary newsletter found frequent use of the Internet, both for information and downloading materials. In addition, Web-based abstracts and research highlights were endorsed as frequently as published journal articles for preferred methods of staying current in one’s field. Newsletters also were endorsed as a good way to learn about new information; training videos and regional workshops were less strongly endorsed. Among Internet users, the utility of downloadable Web-based counseling materials and training modules/tutorials was supported. These responses are similar to those from a more extensive survey of users of TCU counseling manuals conducted recently by Drs. Lois Chatham and Jack Greener in which a majority of respondents reported using the Internet both at work and at home. Among Net users, Web-based information and counseling materials were strongly endorsed as preferences for staying current. Although informal, these surveys point to a growing utilization of the Internet by drug treatment professionals and highlight the Net’s potential for dissemination of new findings and information.

Web-based information is becoming a popular way of staying current in the field.

Research Highlights, continued

and Alcohol Dependent Methadone Clients” at the Texas Research Society on Alcoholism in Dallas.

In April, Dr. Danica Knight gave presentations at the Society for Research in Child Development meeting in Albuquerque on “Parental Responsibility as a Predictor of Retention Among Women in Substance Abuse Treatment” and “Correlates of Victimization Among Children of Substance-Abusing Women.”

Dr. Joel Bennett chaired a symposium entitled “Beyond Drug-Testing: Recent Innovations in Workplace Substance Use Prevention” at an interdisciplinary conference sponsored by the American Psychological Association and the National Institute for Occupational Safety and Health held in March in Baltimore. Dr. Bennett and Dr. Wayne Lehman also presented papers on “The Team-Based Approach to Substance Abuse Prevention Training in the Workplace” and “The Team Risk Management Approach: Research Review and Previous Models.”

Dr. Kevin Knight will present “Therapeutic Community Outcome Research: An Overview” at the Office of Justice Programs Therapeutic Community Program Design and Implementation meeting in May in Washington, DC. In April, Dr. Knight was an invited presenter for the First National Addiction Technology Transfer Center (ATTC) Research to Practice Teleconference on Domestic Violence and Criminal Justice in Albany, NY.

Dr. Knight and Dr. Matthew Hiller gave presentations at the annual Academy of Criminal Justice Sciences in Orlando in March. Dr. Knight participated in an National Institute of Justice sponsored roundtable on “Residential Substance Abuse Treatment Programs” and Dr. Hiller presented “Predicting Retention in Corrections-Based Treatment.”

New projects

The National Institute of Justice is funding Process Assessment of Correctional Treatment (PACT), a project to conduct follow-up evaluations on probationers who received residential substance abuse treatment at the Dallas County Judicial Treatment Center in Wilmer, TX. Kevin Knight is Principal Investigator and Matthew Hiller Co-Principal Investigator for the project.
What’s New on the Web

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

Forms Section updated:
The Forms Section has been reorganized based on user input to help make form categories easier to locate and download.

New data forms in Forms Section:
Both parent and child form sets from TCU’s Women & Children Project are now available. These forms measure individual functioning of women and their children entering treatment. Included are measures of family functioning and treatment process.

The 1998 IBR Annual Report is online in PDF format and ready for downloading from the About IBR section.

Updated lists of recent publications based on IBR research projects are provided in the Publications Section.