

2003 Annual Report

"commemorating 41 years of social science research"

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INSTITUTE OF BEHAVIORAL RESEARCH
TEXAS CHRISTIAN UNIVERSITY

TCU Box 298740
Fort Worth, TX 76129
FedEx/UPS: 3034 Sandage St., 76109
Phone: (817) 257-7226
Fax: (817) 257-7290
IBR Web site: www.ibr.tcu.edu
DATOS Web site: www.datos.org
E-mail: ibr@tcu.edu
Web site comments: ibrwebmaster@tcu.edu

This Annual Report presents a summary of IBR research for 2003. We encourage you to visit the IBR Web site, where our research activities are reported with timely updates. This report also can be downloaded as an Adobe® Acrobat® PDF document from the IBR Web site (direct link: www.ibr.tcu.edu/intro/03annrept.pdf). The online version features Web links to related materials within the IBR and DATOS sites.

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Managing Editor:

D. Dwayne Simpson

Editorial Assistants:

Cindy Hayes, Helen Huskey, and Barbara Thomsen

Production Assistants:

Linda Ferdinand and Elena Garcia

Design and Production Manager:

Charlotte Pevoto

About JBR

Mission

To evaluate and improve the effectiveness of programs for reducing drug abuse and related problems.

Focus

For many years, research staff of the Institute of Behavioral Research (IBR) have given special attention to evaluations of substance abuse and behavioral interventions provided by community-based programs, including prevention and treatment, and to the study of long-term addiction careers. Emphasis is on the use of naturalistic designs for studies in real-world settings and the use of advanced multivariate methodologies. Research interests have broadened in recent years to include related areas of significant public concern, such as drug abuse treatment for criminal justice populations as well as the spread of AIDS among injecting drug users and methods for reducing these and other high-risk behaviors. Other areas of interest include organizational functioning and change, and process research on technology transfer.

Bringing together qualified and dedicated research scientists to collaborate in a supportive environment promotes an exciting and productive research atmosphere.

Objectives

Research conducted at the IBR is intended to (1) generate and disseminate knowledge that impacts state and national policy decisions in the addictions field, (2) provide critical methodological and substantive research training for graduate students, (3) help IBR research scientists achieve their highest professional and scientific potential, and (4) raise the research reputation and visibility of Texas Christian University (TCU) through professional publications and related scientific contributions.

Scientific Strategy

Science is intended to be programmatic and incremental, thereby requiring a strategy to help maintain focus and build a systematized knowledge base. In the substance abuse treatment field, the emphasis on “evidence-based” interventions and procedures for quality control and improvement dictate scientific discipline—both in the short- and long-run when seeking grants and publishing findings. The IBR therefore strives to be deliberate in its grant applications, emphasizing its evaluation research heritage, staff strengths, and sequential knowledge gaps that need to be filled. A key operational principle is to be scientifically selective in requests and commitments for funding. The IBR scientific strategy is organized around a conceptual framework synthesized from existing knowledge and represented by the TCU treatment process and outcome model and the TCU program change model. These models help staff visualize the foundations of our treatment and organizational research protocols, identify new issues that deserve attention, and integrate new findings with existing knowledge.

Implementation of field-based studies relies on establishing reliable partnerships with treatment systems and honoring the commitments made to address their needs. Providing useful feedback to research partners, funding agencies, policy makers, and other researchers is an important measure of successful science. In particular, scientific publications are strategically planned, integrated with other studies from the appropriate literature, and structured to effectively communicate the salient findings. Finally, “products” from funded research—including intervention manuals, assessments, presentations, and integrative summaries—are expected to be prepared in a user-friendly format and made available without cost to treatment providers, interested researchers, and the general public.

History

The IBR was organized in 1962 by Dr. Saul B. Sells who served as its Director until his retirement. Dr. D. Dwayne Simpson, a member of the IBR faculty since 1970, became its new Director in 1982 when he temporarily moved the Institute to Texas A&M University. Reestablished at TCU in 1989, the IBR’s mission and role in the University has remained essentially unchanged since it was founded. In 1996, it was designated as a “Center of

About JBR

IBR Web Site

About IBR — provides a link to the TCU Psychology Department Web page (www.psy.tcu.edu) that includes information on the “**Graduate Program**” and how to download the required applications.

Newsletters — Read the *Research Roundup* article, “Fresh Voices: Graduate Training at IBR,” in the **Fall 2003 issue**.

IBR’s research program provides valuable training opportunities in graduate and postgraduate education.

Excellence” at TCU. The research program provides valuable training opportunities in graduate and postgraduate education, contributing to the success of many former students and staff members in academic and applied research leadership positions today.

Organization

The Institute operates as a separate academic unit of the University, but through common research training goals and interests it is closely affiliated with the Department of Psychology. Research Scientists in the IBR function much like other University faculty members; they may hold Adjunct Professor and Graduate Faculty appointments, serve on student thesis and dissertation committees, and teach formal courses when time and opportunities permit. Their special skills in advanced data management and multivariate analytic techniques provide the foundation for graduate training in health services evaluation research at TCU.

Graduate Student Training Opportunities

Research training is an integral part of IBR’s commitment to the conduct of quality behavioral research. Graduate and postgraduate training is carried out in close collaboration with the Department of Psychology and other departments at TCU. Since IBR does not award academic degrees, the student must meet all requirements of the department in which a degree is to be awarded.

IBR’s training program emphasizes:

- Health services research, especially evaluation of drug abuse interventions
- Formulating original research plans and appropriate data collection instrumentation
- Collecting and editing data, and management of large data systems
- Use of sophisticated analytic techniques, and publication of findings
- Combining theory with practice, and communicating applications of results

A limited number of stipends are awarded on a competitive basis.

Applications

Potential students should contact the Graduate Program at TCU’s Department of Psychology, TCU Box 298920, Fort Worth, TX 76129 for application information. Specific interest in the IBR and its emphasis on applied evaluation research in the drug abuse field should be noted at the time of the contact. Based on this information, the IBR Director and faculty will be notified of the application and its status. (TCU policies apply equally regardless of sex, religion, handicap, race, or ethnic origin.)

Texas Christian University

TCU, founded in 1873, is an independent and self-governing institution, related to the Christian Church (Disciples of Christ) from which it receives a commitment to open-minded inquiry into all intellectual issues. The University enrolls 6909 undergraduate students in 92 majors and 1055 graduate students in 23 fields (8 doctoral programs); it employs more than 1,400 faculty and staff and has an operating budget of \$230 million and an endowment in excess of \$800 million. Additional information about TCU is available at www.tcu.edu.

Research Staff and Personnel

Faculty

Director and
Saul B. Sells
Professor of
Psychology

D. Dwayne Simpson (*Ph.D., Experimental Psychology*)

is Director of the Institute of Behavioral Research (IBR) and the S.B. Sells Professor of Psychology at Texas Christian University. His research on drug addiction and treatment effectiveness (reported in over 250 publications and 10 books or edited volumes) includes several large-scale and longitudinal national evaluations. Over the past 15 years, he has focused on assessments of client functioning and service delivery process, and how these factors influence treatment engagement and retention rates, stages of recovery, and long-term outcomes. This work includes development of cognitive and behavioral interventions shown to enhance client services and improvements in program management. His interests have expanded to the study of organizational behavior and its role in transferring evidence-based innovations into practice in community-based treatment agencies as well as criminal justice settings. Simpson is an advisor to national and international research centers and government organizations that address drug abuse treatment and related policy issues, a Fellow in both American Psychological Association and American Psychological Society, and a member of the editorial boards for several journals.

Research
Scientist

Kirk M. Broome (*Ph.D., Experimental Psychology*)

has been with the Institute of Behavioral Research since 1993, first as a graduate student and then as a Postdoctoral Research Associate in 1996-97. His research focuses primarily on program differences in treatment structure and process, and how they relate to client progress. His experience covers the design and analysis of treatment program evaluations, with special emphasis on structural equation modeling and hierarchical linear modeling. He is Project Director for the TCOM Project.

Research
Scientist

Michael L. Czuchry (*Ph.D., Experimental Psychology*)

began working with the IBR in January 1993, and currently serves as an Research Scientist on the CETOP Project. His research interests involve the use of cognitive enhancement tools in educational and treatment settings. Other areas of interest include the development of pedagogical games that may facilitate an openness and readiness for treatment or transition into aftercare.

Associate Director
for Cognitive
Interventions and
Professor of
Psychology

Donald F. Dansereau (*Ph.D., Cognitive Psychology*)

has been on the faculty at Texas Christian University since 1969, where he is now Professor of Psychology and Senior Research Scientist in the IBR. He also is Principal Investigator for the CETOP (Cognitive Enhancements for the Treatment of Probationers) Project, a NIDA-funded research grant. Dr. Dansereau teaches graduate statistics and cognitive psychology, and his research focuses on cognitive approaches for improving education, drug abuse prevention, and treatment. His interests include the development of theoretical models on how individuals acquire and use complex information. Grants from the Defense Advanced Research Projects Agency, Department of Education, U.S. Army Research Institute, National Science Foundation, and National Institute on Drug Abuse have funded his work. His publications include over 160 papers.

Research
Scientist

Sandra M. Dees (*Ph.D., Experimental Psychology*)

joined the IBR in 1992 and is the CETOP Project Manager. Dr. Dees, a licensed psychologist, came to TCU from the Fort Worth Independent School District where she developed a central special education student database and evaluated special education and substance abuse programs. At TCU, under the aegis of a National Institute on Drug Abuse project directed by Dr. Donald F. Dansereau, she conducted research targeting the use of cognitive tools in drug prevention activities for college students. Her work with IBR has focused on the development and use of cognitive strategies within a framework of substance abuse treatment in the criminal justice system.

Research Staff and Personnel

Deputy Director
and Associate
Director for
Health Services
Research

Patrick M. Flynn (*Ph.D., Counseling Psychology*)

joined the IBR in July of 2000. His research has focused on the effectiveness and benefits of treatment, and included clinical assessment, questionnaire development, and multi-site clinical trials and survey research. He is a Fellow in the American Psychological Association, a frequent member of federal grant review panels, a regular reviewer for professional journals, and has served as chairperson of an NIH health services research study section. Since 1990, when he returned to the research environs, he has been the Project Director and Co-Director of national outcome studies, and a Co-Principal Investigator and key investigator for a number of other treatment studies. He is currently Principal Investigator on a NIDA project designed to develop and implement a treatment cost and organizational monitoring system. Prior to his return to full-time research, Dr. Flynn worked in therapeutic community, methadone, and outpatient drug-free treatment programs in several capacities, and served in upper-level management positions in higher education. His academic positions and appointments have included tenured associate professor, college vice president, and dean of academic affairs.

Research
Scientist

Jack M. Greener (*Ph.D., Industrial/Organizational Psychology*)

joined the IBR in 1978 and supervised its industrial psychology research program until 1983. Since that time he has been an independent management consultant and was a Visiting Associate Professor of Psychology at Texas A&M University from 1986 to 1988. He rejoined the IBR in 1989. Dr. Greener's major interests are in industrial-organizational psychology, research methodology, measurement, and evaluation. Recent activities include job analysis surveys, data system management, electronic forms development, and substance abuse treatment evaluation research. He has directed contract research projects and published articles in professional journals in these areas.

Associate Director
for Process and
Outcome Studies

George W. Joe (*Ed.D., Research Design and Educational Measurement*)

originally joined the IBR at TCU in 1969. In 1983 he became a Research Scientist in the Behavioral Research Program at Texas A&M University, and returned to TCU in 1989. His research has focused on the components of the treatment process, evaluation models for treatment effectiveness, etiology of drug abuse, and statistical methodology. He is senior statistician for the IBR. He is experienced in the application of univariate and multivariate statistical methods, in the analytic modeling of data, in questionnaire development, sample selection, and survey research. His publications include over 80 articles in professional journals. He is a member of the NIDA Treatment Research Subcommittee and has served as a member of Special Emphasis Panels. He is also a frequent reviewer for professional journals.

Research
Scientist

Danica Kalling Knight (*Ph.D., Experimental Psychology*)

joined the IBR in 1992. Her research efforts have focused on the effects of substance abuse lifestyles on social relationships, parenting, and child development. Current interests include developing treatment assessments and organizational monitoring systems. She served as Principal Investigator on the Salvation Army First Choice Project, currently serves as Principal Investigator for a NIDA-funded grant, "Social Stress among Mothers in Treatment," and is a Project Scientist on the TCOM Project. Her responsibilities include developing cost and project management instruments, creating data structures, and coordinating field activities.

Research
Scientist

Kevin Knight (*Ph.D., Experimental Psychology*)

joined the IBR faculty in 1991 and has conducted several longitudinal evaluations for treatment of probation and prison populations (including the BOP, RSAT, and TCUDS Projects). As a result, he has worked with criminal justice agencies and data systems at national and regional levels, especially the Texas Department of Criminal Justice and the Federal Bureau of Prisons. He is currently Co-Principal Investigator for the CJ-DATS Project, a NIDA-funded cooperative agreement involving ten national research centers. He serves on journal editorial boards, including serving as co-editor of *Offender Substance Abuse Report*, and participates in advisory activities for a variety of organizations that address substance abuse and related policy issues. His primary research interests include assessment strategies, applications of cognitive enhancements to drug abuse counseling and education, and the study of treatment and organizational processes in criminal justice settings.

Research
Scientist

Grace A. Rowan-Szal (*Ph.D., Behavioral Neuroscience*)

joined the IBR faculty in 1990. As a recipient of a National Research Service Award from NIDA, she was a postdoctoral trainee at the University of Pennsylvania (Department of Psychiatry and Pharmacology) in 1988. While her early studies focused on animal models of drug dependence, Dr. Rowan-Szal's recent research centers on behavioral treatment approaches for drug users. Her research interests include the development of client assessment and data management systems, treatment process, gender issues, alcohol and cocaine use among methadone clients, development of a low-cost contingency management strategy for community-based drug treatment programs, and evaluation of technology transfer strategies. She is currently Project Director for the DATAR Project.

Research
Scientist

Tiffany L. Sia (*Ph.D., Experimental Psychology*)

has been with the IBR since 1995, first as a graduate student and then as a part-time Research Associate. As a Research Scientist in the CETOP Project, she is involved in the development of cognitive enhancements in both educational and treatment settings. Her interests include the implementation and investigation of pedagogical games and techniques aimed at facilitating client motivation for treatment, facilitating client transition from treatment back into the community, and improving training techniques.

Additional Research Staff

Research
Associate

Norma G. Bartholomew (*M.A., Communication and Public Address; M.Ed., Counseling Education*)

joined the IBR in 1991. Her background is in community health education, professional training, and media. As part of the DATAR Project, she has developed psychoeducational intervention modules and counselor training programs in the areas of communication skills and assertiveness, human sexuality, HIV/AIDS, aftercare, and parenting. She serves as editor of the IBR newsletter, *Research Roundup*, and assists with program evaluation studies, publications, and technical reports.

Research
Associate

Janis T. Morey (*M.Ed., Educational Psychology*)

joined IBR in August 2001, and has a background in brain research, psychology, and education. Her responsibilities include coordinating prison meetings and site visits for the CJ-DATS Project, collecting and managing prison data, developing software formats for final versions of IBR criminal justice forms, overseeing printing and materials distribution, and training collaborating CJ-DATS Research Centers in the preparation, administration, and documentation of data collection using the CJ CEST assessment. She also assists with evaluation studies, publications, and technical reports.

Research
Associate

Charlotte W. Pevoto (*M.Ed., Instructional Technology*)

joined the IBR in 1990. Her background is in office software systems, database design and management, and educational software training. Her training in instructional design and cognitive systems, specifically in relation to Web-based design, will help guide the implementation of technology in the TCOM Project. She manages the IBR and DATOS Web sites, designs *Research Summaries* and *Research Roundup* quarterly newsletters, and assists with PowerPoint® presentations and publication graphics, as well as online special reports.

Research
Associate

Ryan R. Roark (*B.A., Psychology*)

first joined the IBR as a graduate research assistant in 1997 and became a Research Associate in 2000, responsible for developing forms using the IBR's Teleform® software system for the DATAR Project. He also assists in the development and maintenance of Web-based data collection.

IBR Web Site

www.ibr.tcu.edu

Staff provides:

- **Research Staff** pages with photos and additional information
- **Graduate Research Assistants** page
- **Support Staff** page
- Tributes to **Dr. Saul Sells** and **Dr. Robert Demaree**

Collaborating Scientists

Barry S. Brown (*Ph.D., Clinical Psychology*)

holds a faculty appointment with the University of North Carolina at Wilmington, and from there directs research projects on early retention and treatment aftercare services and AIDS prevention in Baltimore. In 1993, he was a Visiting Senior Scientist with the Institute of Behavioral Research after serving 17 years with the National Institute on Drug Abuse where he headed a variety of research units. He continues to work regularly with the IBR as an advisor and research collaborator on several studies, and currently chairs the Steering Committee for the Collaborative CJ-DATS Project. Dr. Brown also is on a number of editorial and advisory boards, and has published more than 100 articles in the professional literature. Most importantly, he claims to be loved by small children and animals.

Lois R. Chatham (*Ph.D., Clinical Psychology*)

came to the IBR in 1989 from the US Department of Health and Human Services where she served as a member of the Senior Executive Service at NIMH, NIDA, and NIAAA. She served as Deputy Director until 2003 and was Co-Principal Investigator of the DATAR Project. Areas of interest include treatment exposure as a predictor of outcome, gender differences in drug use and response to treatment, and the development of techniques for encouraging the incorporation of treatment research findings into clinical practice. Dr. Chatham now serves as a consultant to the IBR Director for addressing special issues and is active in several community service initiatives.

Support Staff

Alan Crume (*Computer Systems Consultant*)

maintains microcomputer hardware and network systems.

Linda Ferdinand (*Administrative Research Assistant*)

coordinates office and clerical functions. Maintains the IBR resource library, mailroom, and office supplies.

Elena Garcia (*Administrative Research Coordinator*)

supervises clerical support staff, maintains personnel and financial records, and coordinates administrative and academic unit activities.

Julie Gray (*Administrative Research Assistant for CETOP Project*)

maintains the inventory of grant activity materials, measures, assessments and tools; maintains on-site tracking system database; assists in leading on-site activities; and tracks financial/budget expenditures.

Cindy Hayes (*Administrative Research Assistant for CETOP Project*)

maintains a tracking system for publications, manuscripts, and grant-produced materials, in addition to providing word processing, graphics, and editing support.

Helen Huskey (*Administrative Research Assistant*)

oversees secretarial and word processing services, as well as maintains publications and manuscript archives.

Mary Morton (*On-site Coordinator for CETOP Project*)

acts as a liaison between university and drug treatment facility personnel, maintains record files, administers research measures, and assists with on-site activities.

Barbara Thomsen (*Research Assistant*)

provides logistical support for data management, coordinates project materials (e.g., Downward Spiral) for production and distribution, and edits communications, reports, and publications.

Graduate Research Assistants

Katherine Ortega Courtney (*TCU Graduate Student in Cognitive Psychology*)

is interested in the relationship of spirituality and religiosity to substance use problems and treatment, and gender and racial differences in substance use problems and treatment, including treatment disparities for minority populations. Other interests include psychosocial and motivational factors related to behavioral change, including both the acquisition and cessation of maladaptive behaviors. Katherine assists with the DATAR Project.

Bryan Garner (*TCU Graduate Student in Cognitive Psychology*)

is interested in evaluation of substance abuse treatment, risk assessment, and the study of treatment process. Bryan assists the CJ-DATS Project.

Sandhya Rao (*TCU Graduate Student in Cognitive Psychology*)

completed graduate training in 2003 with an interest in program evaluation research. Her other interests include cognitive approaches to treatment enhancement and statistical methodologies. Sandhya assisted with the DATOS Project.

Shawn Reynolds (*TCU Graduate Student in Social Psychology*)

completed graduate training in 2003 with an interest in the effects of stigma and related cultural influences—drinking permissiveness norms—on the process of substance abuse prevention and treatment. His other interests focus on acculturation, and cross-cultural and quantitative methodologies. Shawn assisted in carrying out the Workplace Project research program.

Undergraduate Assistant

Chris Edwards (*TCU Undergraduate Student*)

assisted IBR technical staff with computer operations and network systems before graduating from TCU in December 2003 with a B.S. degree in Engineering.

Projects

Treatment Process and Technology Transfer

The DATAR Project: Phase 1

Improving Drug Abuse Treatment for AIDS-Risk Reduction

D. Dwayne Simpson, Ph.D.,
Principal Investigator
Lois R. Chatham, Ph.D.,
Project Manager

Funded by:
National Institute on
Drug Abuse (NIDA)

Project Period:
Sept. 1989 to August 1995
Budgeted: \$7.7 million

DATAR Phase 1 studies provided the foundations for the “TCU Treatment Process Model” and demonstrated how cognitive and behavioral management strategies can be used to enhance treatment.

This project began research that now has achieved 20 years of continuous grant funding by NIDA. It focused on the development of improved drug abuse treatment strategies to help reduce client dropout and relapse rates as well as AIDS-risky behaviors of injecting drug users (IDUs). A network of treatment agencies in Texas implemented new intervention strategies within the context of methadone maintenance services, and the 5-year project provided treatment for approximately 1,000 IDUs in Texas.

The research objective was to isolate and evaluate separate components of the overall behavioral intervention process. A cognitive strategy for information and process mapping was implemented with the help of Dr. Don Dansereau at TCU as a method for improving the psychoeducational and therapeutic process. This strategy was used by treatment counselors to improve the focus and organization of therapeutic efforts, as well as behavioral assessments, goal-setting, and decision-making practices of IDUs. The use of contingency management, involving client-contracted schedules of treatment and various low-cost incentives as positive reinforcers for changing target behaviors during and after treatment, was also evaluated. Finally, the behavioral and psychological facilitation offered by life skills and ancillary training was assessed, including HIV/AIDS training to learn risk-reduction behaviors, assertiveness training (especially for women) to increase self-esteem and protection from risky drug use and sexual interactions, relapse prevention training to sensitize IDUs to psychological and environmental triggers for relapse and alternative coping strategies, and support network training to acquaint clients with self-help and treatment aftercare procedures and benefits in an effort to increase referral and attendance rates. Appropriateness and effectiveness of these methods were analyzed in relation to client characteristics.

Client sociodemographic, family and cultural background, behavioral functioning, and psychological adjustment measures were examined as predictors at different stages of the intervention process. These were contained in a comprehensive battery of *data collection instruments* widely circulated and adopted for similar uses by other researchers and treatment systems. Experimental and quasi-experimental methods were used to evaluate during-treatment and post-treatment outcomes as measured by length of treatment retention, behavioral performance (including urinalysis and self-report information), and psychological functioning. The study included follow-up interviews after treatment.

Results helped to develop treatment manuals (distributed through the IBR Web site) and demonstrated ways to improve the quality and effectiveness of treatment for drug abusers. In addition, studies on treatment process contributed to the measurement and understanding of motivational and engagement stages that lead to better treatment outcomes.

Selected DATAR Phase 1 Publications

Simpson, D. D. (1993). Drug treatment evaluation research in the United States. *Psychology of Addictive Behaviors*, 7(2), 120-128.

Dees, S. M., Dansereau, D. F., & Simpson, D. D. (1994). A visual representation system for drug abuse counselors. *Journal of Substance Abuse Treatment*, 11(6), 517-523.

Knight, D., Dansereau, D. F., Joe, G. W., & Simpson, D. D. (1994). The role of node-link mapping in individual and group counseling. *American Journal of Drug and Alcohol Abuse*, 20(4), 517-527.

Rowan-Szal, G. A., Joe, G. W., Chatham, L. R., & Simpson, D. D. (1994). A simple reinforcement system for methadone clients in a community-based treatment program. *Journal of Substance Abuse Treatment*, 11(3), 217-223.

Joe, G. W., Brown, B. S., & Simpson, D. D. (1995). Psychological problems and engagement in treatment. *Journal of Nervous and Mental Disease*, 183(11), 704-710.

Joe, G. W., & Simpson, D. D. (1995). HIV risks, gender, and cocaine use among opioid users. *Drug and Alcohol Dependence*, 37, 23-28.

Simpson, D. D., Joe, G. W., Rowan-Szal, G. A., & Greener, J. M. (1995). Client engagement and change during drug abuse treatment. *Journal of Substance Abuse*, 7(1), 117-134.

Joe, G. W., Dansereau, D. F., Pitre, U., & Simpson, D. D. (1997). Effectiveness of node-link mapping enhanced counseling for opiate addicts: A 12-month posttreatment follow-up. *Journal of Nervous and Mental Disease*, 185(5), 306-313.

Simpson, D. D., Joe, G. W., Dansereau, D. F., & Chatham, L. R. (1997). Strategies for improving methadone treatment process and outcomes. *Journal of Drug Issues*, 27(2), 239-260.

Simpson, D. D., Joe, G. W., & Rowan-Szal, G. A. (1997). Drug abuse treatment retention and process effects on follow-up outcomes. *Drug and Alcohol Dependence*, 47, 227-235.

Simpson, D. D., Joe, G. W., Rowan-Szal, G. A., & Greener, J. M. (1997). Drug abuse treatment process components that improve retention. *Journal of Substance Abuse Treatment*, 14(6), 565-572.

Chatham, L. R., Hiller, M. L., Rowan-Szal, G. A., Joe, G. W., & Simpson, D. D. (1999). Gender differences at admission and follow-up in a sample of methadone maintenance clients. *Substance Use & Misuse*, 34(8), 1137-1165.

Joe, G. W., Simpson, D. D., Greener, J. M., & Rowan-Szal, G. A. (1999). Integrative modeling of client engagement and outcomes during the first 6 months of methadone treatment. *Addictive Behaviors*, 24(5), 649-659.

Simpson, D. D., & Joe, G. W. (in press). A longitudinal evaluation of treatment engagement and recovery stages. *Journal of Substance Abuse Treatment*.

IBR Web Site

www.ibr.tcu.edu

Projects has a web page for each research project with links to other web sections that may include:

- **Resource Collections** — Access integrated sets of Web materials on IBR's major research domains.
- **Research Summaries** — Read in-depth information on special topics in the **Research Summaries** (available to download in PDF).
- **Newsletters** — Read articles in quarterly issues of IBR's *Research Roundup* and featured *Research Summaries* (in PDF).
- **Forms** — Download data collection instruments in Adobe® Acrobat® PDF format free of charge.
- **Manuals** — Download (in PDF) entire manuals, a sample first chapter, or other sections from treatment manuals.
- **Presentations** — View conference materials online in "web posters" and PowerPoint® animated slides. "Feature Presentations" offer printable handouts in PDF format of selected conference presentations.
- **Publications** — Browse a complete list of project publications with searchable abstracts.

Treatment Process and Technology Transfer

The DATAR Project: Phase 2

Improving Drug Abuse Treatment Assessment and Research

D. Dwayne Simpson, Ph.D.,
Principal Investigator
Lois R. Chatham, Ph.D.,
Co-Principal Investigator

Funded by:
National Institute on
Drug Abuse (NIDA)

Project Period:
Sept. 1995 to July 2000
Budgeted: \$4.8 million

DATAR Phase 2 included plans for further counseling improvements and easy-to-use manuals.

This 5-year project continued work begun in 1989 and focused on the development of improved drug abuse treatment to help reduce client dropout and relapse rates in a population of opiate-dependent injection drug users (IDUs). It implemented and evaluated new intervention strategies for methadone maintenance services being provided by Drug Dependence Associates (Dr. J. Thomas Payte, Medical Director) in San Antonio. The DATAR Project funded additional treatment services (static capacity for approximately 120 outpatients) at a time when public financial support for these services was unstable.

The overall research objective was to isolate and evaluate significant components of the therapeutic intervention process. Using a three-part strategy, the project investigated ways to improve counseling procedures, improve client engagement and focus—especially early in treatment—and address special counseling needs of clients. Improvement of counseling procedures built on the use of a cognitive learning approach—called **node-link mapping** developed by Dr. Don Dansereau—found in earlier DATAR work to be effective for improving the counseling process and client retention. Further refinements and applications focused on including abbreviated mapping strategies for addressing crisis issues and enhancing client skills in defining problems and making decisions. To improve client engagement and focus early in treatment, cognitive guides (using mapping) were developed for the purpose of increasing client self-examination and for strengthening their treatment involvement and commitment as evidenced by session attendance and urinalysis results. The impact of treatment intensity variations and combinations of individual and group counseling during different treatment stages were studied. A scale designed to measure the role *Simpatía* has on client engagement and retention was added to the assessment battery. To address the special needs of clients, manual-driven psychoeducational curricula were tested dealing with issues such as improved communication skills and increased awareness of sexual health issues for men, improved parenting skills for both men and women, as well as a structured curricula developed specifically for the purpose of motivating clients to reduce cocaine use. To further strengthen our repertoire of engagement strategies a **Contingency Management (CM)** program utilizing small rewards for positive behaviors was implemented during the first 90 days of treatment.

Finally, the project focused on treatment process and outcomes. The effects of both external and internal treatment factors on outcomes were examined. To do this, a series of studies were conducted to investigate individual differences (including motivation and other elements of cognitive functioning) related to treatment engagement and mapping success, the role of gender and cultural issues in the treatment process, and the relationship of outcomes during and after treatment with the level of services provided and counselor alliance. Follow-up interviews with all clients were conducted 18 months after admission to treatment.

Selected DATAR Phase 2 Publications

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.

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.

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.

Simpson, D. D. (2001). Modeling treatment process and outcomes (editorial). *Addiction, 96*(2), 207-211.

Psychoeducational Treatment Intervention Manuals from the DATAR Project

To order printed manuals, contact the **Lighthouse Institute Publications Web Site** (www.chestnut.org/LI/bookstore/index.html), phone toll-free (888)547-8271, or FAX (309) 829-4661. The Manuals section of the IBR Web site (www.ibr.tcu.edu/pubs/trtmanual/manuals.html) also provides more information and downloads for these manuals:

Bartholomew, N. G., Chatham, L. R., & Simpson, D. D. (1994, revised). *Manual for Time Out! For Me: An Assertiveness/Sexuality Workshop Specially Designed for Women*. Bloomington, IL: Lighthouse Institute Publishing.

Bartholomew, N. G., & Simpson, D. D. (1996). *Manual for Time Out! For Men: A communication skills and sexuality workshop for men*. Bloomington, IL: Lighthouse Institute Publishing.

Bartholomew, N. G., Simpson, D. D., & Chatham, L. R. (1993). *Manual for Straight Ahead: Transition Skills for Recovery*. Bloomington, IL: Lighthouse Institute Publishing.

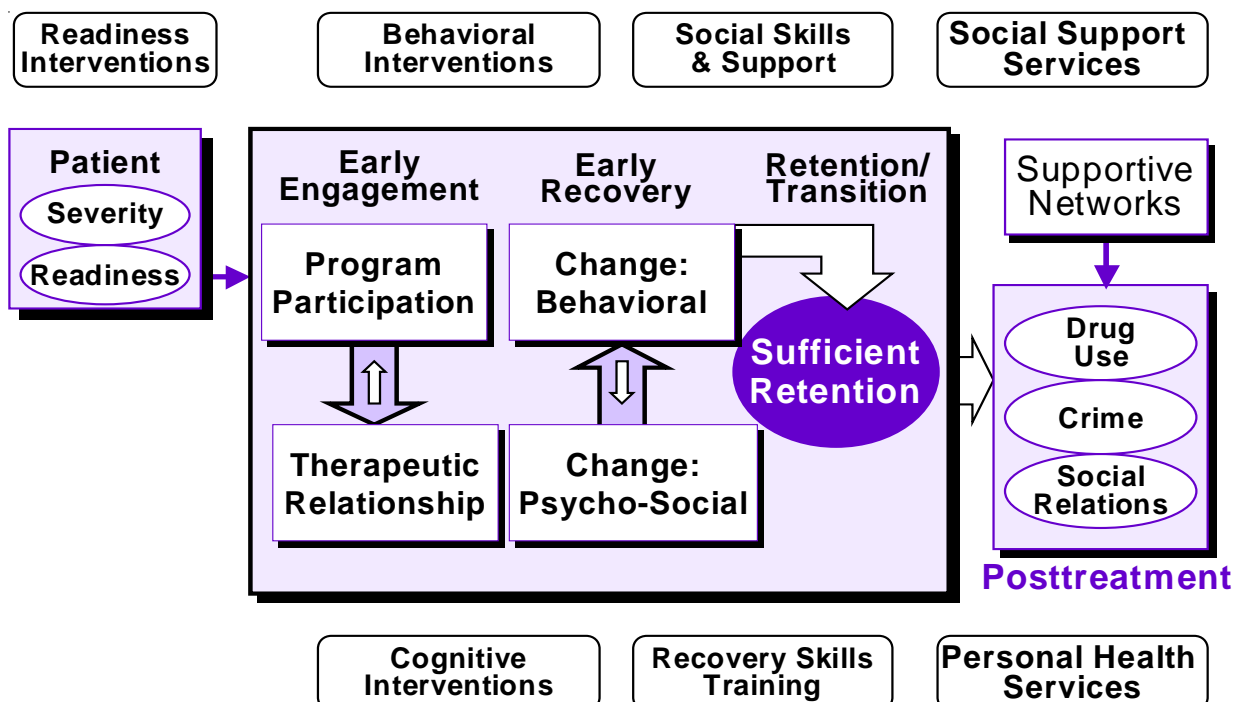
IBR Web Site

www.ibr.tcu.edu

Other **DATAR Phase 2** materials provided in:

- **Resource Collections** — Explore the "**Treatment Process**" and "**Counseling Manuals**" collections.
- **Research Summaries** — Download (in PDF) *Research Summaries* on "**Treatment Process and Outcomes**," "**Counseling Manuals for Special Interventions**," and "**Contingency Management**."
- **Forms** — Download (in PDF) the **TCU Methadone Outpatient Treatment forms** and **Simpatia Scale**.
- **Manuals** — Download (in PDF) treatment manuals developed in DATAR. See information at left.

TCU Model for Treatment Process and Outcomes



The DATAR Project Phase 3

Transferring Drug Abuse Treatment and Assessment Resources

D. Dwayne Simpson, Ph.D.,
Principal Investigator
George W. Joe, Ed.D.,
Co-Principal Investigator
Grace A. Rowan-Szal, Ph.D.,
Project Director

Funded by:
National Institute on
Drug Abuse (NIDA)

Project Period:
Sept. 1999 to July 2004
Budgeted: \$3.7 million

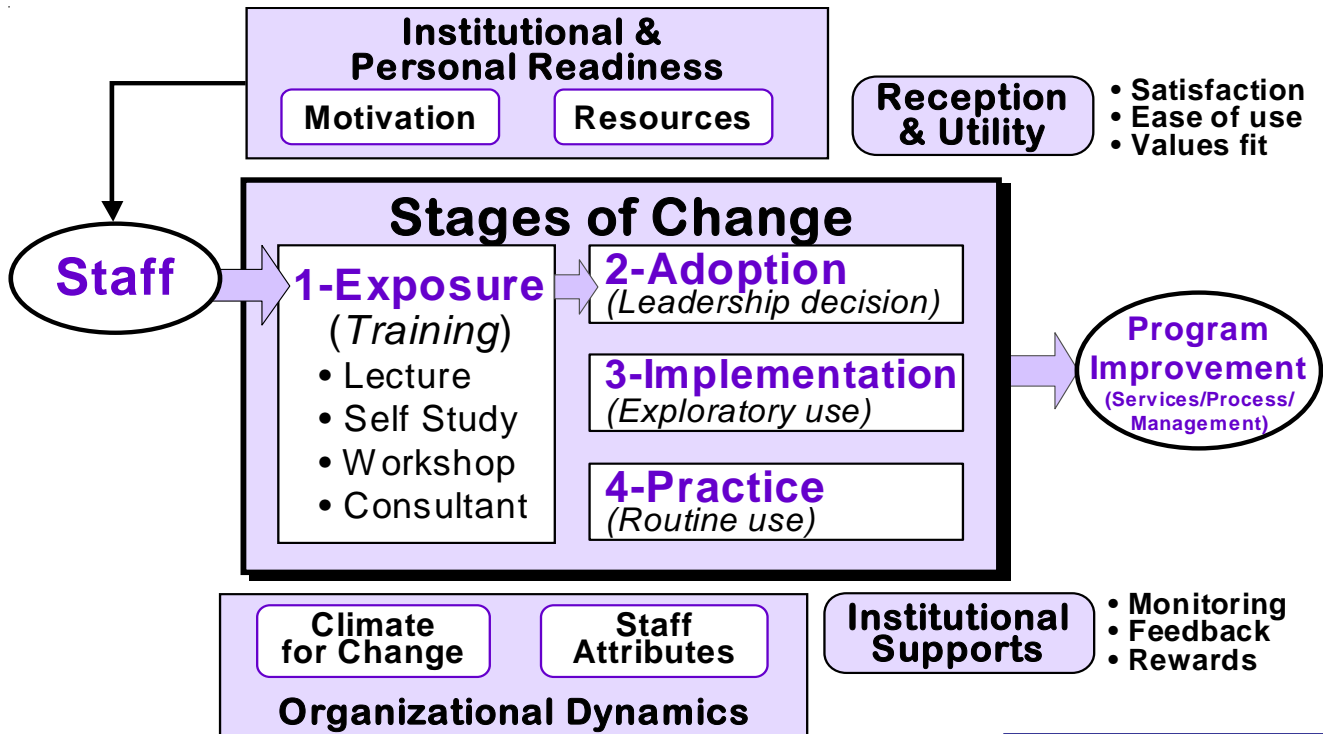
Repeated assessments of organizational climate and attitudes across successive phases of the project will provide evidence concerning “systemic” changes in readiness for and perceived value of treatment innovations.

Field-based drug abuse treatment research conducted at Texas Christian University (TCU) over the past 30 years has contributed to the broad base of literature supporting its effectiveness and the use of comprehensive patient and services assessments for evaluation purposes. The TCU Treatment Model provides a conceptual framework for how treatment “works” and how cognitive and behavioral interventions operate to improve patient engagement and outcomes (see [Research Summaries](#) at www.ibr.tcu.edu). Years of practical experience, however, declare that research findings (especially if disseminated in printed form alone) are seldom sufficient for getting an intervention fully implemented and incorporated as part of the treatment culture for community-based programs. In order for research to be translated into practice, technology transfer is in need of special attention. Towards this goal, TCU was awarded a grant continuation by NIDA, entitled “Transferring Drug Abuse Treatment and Assessment Resources” (DATAR-3). It focuses particular attention on organizational atmosphere in relation to how programs respond to training opportunities for patient assessment and intervention strategies, and how they change over time.

In the face of competing demands on staff time and resources, treatment programs often are reluctant to make operational changes unless forced by new regulations or otherwise convinced that significant benefits will accrue. More information is therefore needed on factors that influence these important organizational decisions and behaviors. The major objectives of this project were to (1) develop a comprehensive and reliable assessment instrument for organizational readiness for change, based on motivation and related attributes of program leaders and staff, institutional resources, and organizational climate, (2) examine changes in organizational readiness over time in relation to specialized training offered to meet program needs, (3) use measures defined by the TCU Treatment Model—particularly the Client Evaluation of Self and Treatment (CEST)—to assess the impact of technology transfer efforts on client performance, (4) compare the effectiveness of “enhanced” training strategies designed to address low levels of organizational readiness for change, and (5) provide training to program directors for improving program self-monitoring and management. It is hypothesized that staff attributes (particularly adaptability) and organizational factors largely determine the success of technology transfer efforts.

Large-scale, multisite evaluations of “technology transfer” are in progress, guided in part by recent conceptual formulations for organizational functioning and factors that influence efforts to change service delivery systems. In particular, we are collaborating with several regional Addiction Technology Transfer Centers (ATTCs), their funding agency (CSAT), and state systems to carry out this research.

TCU Program Change Model



Selected DATAR Phase 3 Publications

Joe, G. W., Broome, K. M., Rowan-Szal, G. A., & Simpson, D. D. (2002). Measuring patient attributes and engagement in treatment. *Journal of Substance Abuse Treatment, 22*(4), 183-196.

Lehman, W. E. K., Greener, J. M., & Simpson, D. D. (2002). Assessing organizational readiness for change. *Journal of Substance Abuse Treatment, 22*(4), 197-209.

Simpson, D. D. (2002). A conceptual framework for transferring research to practice. *Journal of Substance Abuse Treatment, 22*(4), 171-182.

Simpson, D. D., & Brown, B. S. (Eds.). (2002). Special issue: Transferring research to practice. *Journal of Substance Abuse Treatment, 22*(4).

Dansereau, D. F., & Dees, S. M. (2002). Mapping training: The transfer of a cognitive technology for improving counseling. *Journal of Substance Abuse Treatment, 22*(4), 219-230.

Czuchry, M., & Dansereau, D. F. (2003). A model of the effects of node-link mapping on drug abuse counseling. *Addictive Behaviors, 28*(3), 537-549.

[IBR Web Site](http://www.ibr.tcu.edu)

www.ibr.tcu.edu

Other **DATAR Phase 3** materials provided in:

- **Resource Collections** — Explore the "Technology Transfer" and "Assessment Systems" collections.
- **Research Summaries** — Download (in PDF) *Research Summaries* on "Organizational Change" and "Treatment Assessment."
- **Newsletters** — Read the *Research Roundup* article, "DATAR: A 20-Year Research Program," **Fall 2003 issue**.
- **Forms** — Download the CEST, ORC (Staff and Program Director versions), and PTN from the **TCU Treatment Assessment Forms**.

National Treatment Evaluations

The DATOS Project

Drug Abuse Treatment Outcome Studies Research Center

D. Dwayne Simpson, Ph.D.,
Principal Investigator
George W. Joe, Ed.D.,
Co-Principal Investigator

Funded by:

National Institute on
Drug Abuse (NIDA)

Project Period:

Sept. 1995 to August 2001

Budgeted: \$2.14 million

The National Drug Abuse Treatment Outcome Studies (DATOS) was a 5-year collaborative research project, funded by the National Institute on Drug Abuse (NIDA) and based on essentially the same national treatment evaluation strategy developed by the IBR 25 years earlier as part of the DARP Project. It brought together four teams of scientists to explore separate but complementary research themes. As part of this initiative, the IBR team focused on issues of client retention and engagement in treatment, including the significance of selected client and program variables on retention, treatment process, and program compliance. Attention was given to problem severity and its interactions with treatment variables. Also, factors associated with client motivation for treatment and client perceptions of treatment are being examined to better understand their impact on program retention.

The National Development and Research Institutes of North Carolina (NDRI-NC) team, with **Dr. Robert L. Hubbard** as Principal Investigator, examined issues involving the selection of treatment by drug users, including client needs, access to services, and support and impediments to treatment selections. In addition, NDRI-NC looked at factors related to service delivery and client subtypes. UCLA's Drug Abuse Research Center (**Dr. M. Douglas Anglin**, Principal Investigator) explored factors in the addiction and treatment careers of drug abusers that influence response to treatment, including the relationship of background variables and drug use histories on decisions to enter treatment. The UCLA team also tested models of the process of addiction (initiation, progression, cessation, and relapse) among treatment clients. The Services Research Branch at NIDA, with **Dr. Bennett Fletcher** serving as Principal Investigator, focused on issues significant to policy development including cost-benefit analyses, the changing nature of drug abuse treatment clients and the implications for treatment programming and services, and the relations of client economic conditions to treatment performance.

Within their identified research themes, DATOS investigators examined treatment process, retention, and outcome in relation to four variable domains identified as having particular significance for contemporary drug abuse treatment. These included HIV risk behaviors, cocaine use, psychiatric comorbidity, and criminal justice status and activity. Sequential waves of studies were undertaken to look deeper into these research themes and variable domains described.

Core data for the DATOS project included client information from 10,010 admissions to 96 treatment programs that participated between 1991 and 1993 in this third national evaluation study, representing outpatient methadone, outpatient drug free, long-term residential, and short-term inpatient services. One-year and 5-year posttreatment follow-ups with DATOS clients were reported in special journal issues (1 year, *Drug and Alcohol Dependence* and *Psychology of Addictive Behaviors*; 5-year, *Journal of Substance Abuse Treatment*). Additional research has addressed during-treatment and 1-year posttreatment outcomes of adolescent DATOS clients, and were reported in a special issue of *Journal of Adolescent Research*.

Visit the
DATOS Web Site
for findings of this
National Treatment
Evaluation

www.datos.org

IBR hosts an entire Web site that focuses on the coordinated research of the four DATOS Research Centers. The DATOS Web site highlights studies focused on **Adolescents** versus **Adults**. Other sections include **Background**, **Presentations**, and **Publications** with abstracts.

Simpson, D. D., & Curry, S. J. (Eds.). (1997). Special issue: Drug Abuse Treatment Outcome Study (DATOS). *Psychology of Addictive Behavior*, 11(4), 211-337.

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.

Simpson, D. D., & Brown, B. S. (Eds.). (1999). Special issue: Treatment process and outcomes studies from DATOS. *Drug and Alcohol Dependence*, 57(2), 81-174.

Simpson, D. D., Joe, G. W., Fletcher, B. W., Hubbard, R. L., & Anglin, M. D. (1999). Treatments for cocaine addiction: A national evaluation of outcomes. *Archives of General Psychiatry*, 56, 507-514.

Broome, K. M., Simpson, D. D., & Joe, G. W. (1999). Patient and program attributes related to treatment process indicators in DATOS. *Drug and Alcohol Dependence*, 57(2), 127-135.

Joe, G. W., Simpson, D. D., & Broome, K. M. (1999). Retention and engagement models for different treatments modalities in DATOS. *Drug and Alcohol Dependence*, 57(2), 113-125.

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.

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.

Grella, C. E., & Hser, Y. (Eds.). (2001). Special issue on Drug Abuse Treatment Outcome Studies for Adolescents (DATOS-A). *Journal of Adolescent Research*, 16(6).

Hser, Y., Grella, C. E., Hubbard, R. L., Hsieh, S. C., Fletcher, B. W., Brown, B. S., & Anglin, M. D. (2001). An evaluation of drug treatment for adolescents in four U.S. cities. *Archives of General Psychiatry*, 58(7), 689-695.

Simpson, D. D., Joe, G. W., & Broome, K. M. (2002). A national 5-year follow-up of treatment outcomes for cocaine dependence. *Archives of General Psychiatry*, 59, 538-544.

Simpson, D. D. (Ed.). (2003). Special issue: 5-year follow-up treatment outcome studies in DATOS. *Journal of Substance Abuse Treatment*, 25(3).

IBR Web Site

www.ibr.tcu.edu

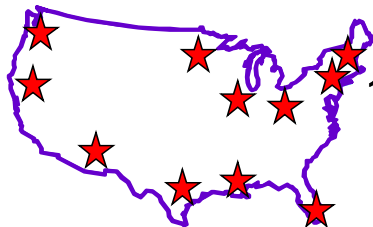
Other **DATOS Project** information provided:

- **Resource Collections** — Explore the “**National Treatment Evaluations**” collection.

DATOS

Drug Abuse Treatment Outcome Studies NIDA's Third National Evaluation of Treatment Effectiveness

10,000 Adults
96 Programs
11 Cities



1,200 Adolescents
23 Programs
4 Cities

85 Studies Published (Special Issues) –

Psychology of Addictive Behaviors (Dec 97)
Drug and Alcohol Dependence (Dec 99)
Journal of Adolescent Research (Dec 01 for DATOS-A)
Journal of Substance Abuse Treatment (Dec 03)
Archives of General Psychiatry (99, 01, & 02)

Cognitive Interventions

The CETOP Project: Phase 1

Cognitive Enhancements for the Treatment of Probationers

Donald F. Dansereau, Ph.D.,
Principal Investigator
D. Dwayne Simpson, Ph.D.,
Co-Principal Investigator
Sandra M. Dees, Ph.D.,
Project Manager

Funded by:
National Institute on
Drug Abuse (NIDA)

Project Period:
Sept. 1994 to August 2000
Budgeted: \$2.3 million

CETOP's objectives include the evaluation of enhanced treatment components designed to improve probationer functioning and outcomes.

The focus of the first 5-year phase of the CETOP Project (Cognitive Enhancements for the Treatment of Probationers) was to study the impact of enhancing mandated substance abuse treatment with cognitive/behavioral tools. The Tarrant County Substance Abuse Treatment Facility (SATF) was a 4-month intensive residential treatment program for 420 probationers each year. This facility was located in the Community Correctional Facility in Mansfield, Texas, and shared a physical plant with two other units (a boot camp and a halfway house). Probationers mandated by judges to the SATF spent their 4 months in a small "community" of residents, where counseling was provided daily. The program also offered a variety of educational and life management activities. Standard treatment program components included (1) a modified therapeutic community approach, (2) counseling to provide professional guidance and support in recovery efforts, (3) special induction and transition sessions to plan for treatment, and later, for recovery maintenance, and (4) life skills instruction and recovery education activities.

Core elements of the cognitive enhancement system introduced by this project were node-link mapping, motivational tools, cognitive skills activities, and scripted collaboration. These tools were used independently and inter-actively to enhance the drug abuse treatment components at the SATF. During-treatment and follow-up assessment measures were used to assess reactions to treatment. The comprehensive battery of measures developed in the DATAR Project was modified for use in this project.

Node-link mapping and associated visual representation strategies were designed to enhance communication and understanding. These techniques are simple methods of eliciting, representing, and organizing information so that relationships between ideas, feelings, and actions can be easily recognized and understood.

Motivational tools were designed to enhance the induction and transition phases of treatment. A series of self-study booklets provide training in the **cognitive skills** (e.g., decision making, problem solving) that are the "basics" of life skills.

The final element consisted of a set of strategies structured to encourage **cooperative activities** among probationers. Probationers working together on a specific task can help each other clarify and elicit ideas and feelings, detect "glitches" in thinking, provide emotional support, develop alternative perspectives, and improve decision-making.

Responses of residents receiving enhanced treatment were compared to those receiving standard treatment components.

Four studies were conducted. The first three focused on enhancements to counseling, induction/transition, and life skills education, respectively. The overall research design was cumulative in that enhancements developed and tested in each study became a regular part of treatment for all probationers entering the SATF during later studies. The fourth study examined the effectiveness of the enhancements with special populations (e.g., females).

Findings

Mapping. Residents rated counseling sessions with extensive map use as “deeper” and having greater group participation. Compared to residents who were not in mapping communities, mapping residents gave more favorable ratings to: their counselors; group counseling sessions; their fellow-residents; security staff; their own efforts to benefit from treatment; and their own abilities to benefit from treatment. In addition, mapping residents also reported better progress toward treatment goals, more participation in group sessions, and more positive responses to treatment as a whole.

Readiness and Re-entry (induction into treatment; transition back to society). Residents who received these activities (which included the Tower of Strengths and Downward Spiral) rated their communities as significantly more engaged in treatment and more helpful to them than those receiving the standard treatment. They rated themselves as more involved in treatment and gave higher ratings to the treatment program and personnel. Those with lower levels of educational experience who received the Readiness and Re-entry activities rated their confidence and motivation higher than did a similar group in the standard program.

Selected CETOP Project Publications

Blankenship, J., Dansereau, D. F., & Simpson, D. D. (1999). Cognitive enhancements of readiness for corrections-based treatment for drug abuse. *The Prison Journal*, 79(4), 431-445.

Czuchry, M. L., & Dansereau, D. F. (1999). Node-link mapping and psychological problems: Perceptions of a residential drug abuse treatment program for probationers. *Journal of Substance Abuse Treatment*, 17(4), 321-329.

Czuchry, M. L., Sia, T. L., & Dansereau, D. F. (1999). Preventing alcohol abuse: An examination of the “Downward Spiral” game and educational videos. *Journal of Drug Education*, 29(4), 323-335.

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

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

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

Czuchry, M., & Dansereau, D. F. (2003). Cognitive skills training: Impact on drug abuse counseling and readiness for treatment. *American Journal of Drug and Alcohol Abuse*, 29(1), 1-18.

Newbern, D., Dansereau, D. F., Czuchry, M., & Simpson, D. D. (in press). Node-link mapping in individual counseling: Treatment impact on clients with ADHD-related behaviors. *Journal of Psychoactive Drugs*.

[IBR Web Site](http://www.ibr.tcu.edu)

www.ibr.tcu.edu

Other **CETOP Project** materials provided in:

- **Resource Collections** — Explore the “**Cognitive Interventions**” collection.
- **Research Summaries** — Download (in PDF) *Research Summaries* on “**Treatment Mapping**,” and “**Treatment Readiness and Induction Strategies**.”
- **Newsletters** — Read *Research Roundup* article, “Take the Ball and Run: Technology Transfer of Cognitive Strategies,” **Summer 2002 issue**.
- **Publications** — Examine complete details of CETOP publications in the list, “**Cognitive Intervention Studies**” (with abstracts).

Cognitive Interventions

The CETOP Project -- Phase 2

Cognitive Enhancements for the Treatment of Probationers

Donald F. Dansereau, Ph.D.,
Principal Investigator
Sandra M. Dees, Ph.D.,
Project Manager

Funded by:

National Institute on
Drug Abuse (NIDA)

Project Period:

March 2000 to August 2005

Budgeted: \$2.3 million

Building on research findings from Phase 1, the primary objective of the 5-year CETOP Phase 2 Project is to assess the impact of introducing into a criminal justice substance abuse treatment program cognitive activities specifically designed to (a) increase probationers' motivation for treatment and (b) promote development of skills that can be useful during treatment. Since probationers frequently come to a criminal justice treatment program with little motivation and no concept of what to do to benefit from treatment, this second project phase employs and extends the motivational and skill-based elements found to be effective with this population. A second major objective is to determine how these activities can be most effectively combined and efficiently delivered.

On-site implementation was relocated to the Dallas County Judicial Treatment Center (under the administration of Cornell Companies, Inc.) in Wilmer, Texas, when the Tarrant County Substance Abuse Treatment Facility site was changed to an outpatient program. The Wilmer facility provides 6 months of residential treatment to approximately 450 probationers each year.

Three major studies were planned to assess the effects of the Motivation Module (Study #1), the Skills Module (Study #2), and the combination of Motivation and Skills Modules (Study #3). The broad research questions being addressed by each study are:

1. **What are the during-treatment effects of these modules** on indicators of motivation and on responses to critical aspects of the treatment program and on perceptions of personal change during treatment? Questionnaires are administered at the beginning, middle, and end of treatment.
2. **What are the effects after treatment** on drug use (urinalysis data) and criminal recidivism during aftercare?
3. **Which residents benefit most?**

The first study was conducted in two parts, with a 10-month implementation at the Mansfield facility followed by 10 months in the Wilmer program, with changes in the protocol to meet the needs of the second facility. The second study was run in 12 months and the last study will close in December of 2004 with 15 months of work. In all three studies, residents were randomly assigned to counseling groups.

The MOTIVATION Module: the "TCU Personal Power Series"

Tower of Strengths. Participants examine 60 cards containing examples of "personal strengths," each choosing 10 that currently describe one's self and 5 that are desired. They display these strengths graphically in a "tower." Discussions and other activities are used to elaborate the strengths (Sia, Czuchry, & Dansereau, 1999).

Downward Spiral. Five to six participants take on the roles of people who are committed to a life of substance abuse. In this board game, the "winner" is the player who stays alive and loses the least of the allotted life resources (e.g., health, family, friends). Players "move" by drawing cards to read about real situations; they suffer consequences of continued substance

This phase extends the prior research on the motivational and skill-based elements by examining how they can be combined and efficiently delivered.

abuse by losing “life points” (Czuchry, Sia, & Dansereau, 1999; Czuchry, Sia, Dansereau, & Dees, 1997).

Personal Power Manuals and RAFTing. Participants read and complete 4 workbooks, both in session and as homework. They learn a Relax And Focus Technique (RAFTing) that can be used regularly as a self-modulation and control strategy.

The COGNITIVE SKILLS Module

The Thought Team. Participants are taught to visualize a “team” of people who can give them quality input on personal decisions and plans (i.e., perspective taking). They then use this team as they create written solutions to sets of “tough situation” scenarios. These are real-life situations which they may themselves encounter (Weldon & Dansereau, 1999).

Map Magic (Mapping). Participants will be taught to organize their thoughts into graphic node-link representations using either free form or “guide” maps (a fill-in-the node structure; Czuchry & Dansereau, 1999; Newbern, Dansereau, & Dees, 1997; Newbern, Dansereau, & Pitre, 1997; Pitre, Dansereau, Newbern, & Simpson, 1998; Pitre, Dees, Dansereau, & Simpson, 1997). This is a manual-driven activity followed by a scripted peer cooperative problem-solving activity.

Node-Link Mapping Manuals from CETOP

To order printed manuals, contact the “Bookstore” at the **Lighthouse Institute Publications Web Site** (www.chestnut.org/LI/bookstore/index.html), phone toll-free (888) 547-8271, or FAX (309) 829-4661. The Manuals section of the IBR Web site (www.ibr.tcu.edu/pubs/trtmanual/manuals.html) also provides more information and downloads for these manuals:

Dansereau, D. F., Dees, S. M., Chatham, L. R., Boatler, J. F., & Simpson, D. D. (1993). *Mapping New Roads to Recovery: Cognitive Enhancements to Counseling*. Fort Worth: Texas Christian University, Institute of Behavioral Research.

Sia, T. L., Czuchry, M. L., Dansereau, D. F., & Blankenship, J. (1998). *Preparation for Change: The Tower of Strengths and The Weekly Planner*. Fort Worth: Texas Christian University, Institute of Behavioral Research.

Dees, S. M., & Dansereau, D. F. (2000). *TCU Guide Maps: A Resource for Counselors*. Fort Worth: Texas Christian University, Institute of Behavioral Research.

Additional materials from CETOP

Czuchry, M. L., Sia, T. L., Blankenship, J., & Dansereau, D. F. (1998). *Downward Spiral Manual: The game you really do not want to play*. Fort Worth: Texas Christian University, Institute of Behavioral Research. To order, contact the “Bookstore” at the **Lighthouse Institute Publications Web Site** (www.chestnut.org/LI/bookstore/index.html), phone toll-free (888) 547-8271, or FAX (309) 829-4661.

Czuchry, M. L., Sia, T. L., Dansereau, D. F., & Dees, S. M. (1997). Downward Spiral: A pedagogical game depicting the dangers of substance abuse. *Journal of Drug Education*, 27(4), 373-387.

Dees, S. M., & Dansereau, D. F. (Eds.). (1997). *A jumpstart for substance abuse treatment: Readiness activities, a TCU/CETOP manual for counselors*. Fort Worth: Texas Christian University, Institute of Behavioral Research.

Dees, S. M., & Dansereau, D. F. (Eds.). (1998). *A jumpstart to Real Life: Re-Entry activities, a TCU/CETOP manual for counselors*. Fort Worth: Texas Christian University, Institute of Behavioral Research.

Sia, T. L., Dansereau, D. F., & Dees, S. M. (2001). *Mapping your step: Twelve step guide maps*. Fort Worth: Texas Christian University, Institute of Behavioral Research.

IBR Web Site

www.ibr.tcu.edu

Other **CETOP Project** materials:

- **Project Summary** — Check out the CETOP project page for a more detailed explanation of the CETOP project studies.
- **Manuals** — Download (in PDF) node-link mapping manuals developed in CETOP. See information below.

Organizational Costs and Functioning

The TCOM Project

Treatment Costs and Organizational Monitoring (TCOM)

Patrick M. Flynn, Ph.D.,
Principal Investigator
D. Dwayne Simpson, Ph.D.,
Co-Principal Investigator
Kirk M. Broome, Ph.D.,
Project Director

Funded by:
National Institute on Drug
Abuse (NIDA)

Project Period:
April 2003 to March 2008
Budgeted: \$3.19 million

This new project focuses on developing an assessment and information system for treatment providers that will monitor organizational attributes and program resources, and link these factors to client performance and program changes over time. It uses the TCU Program Change Model as a conceptual framework for this technology transfer process. The sample consists of 100 outpatient drug-free (i.e., non-methadone), community-based, treatment providers—by far the most common and diverse setting for addiction treatment in the United States. This work extends our thematic program of research designed to better understand process and research diffusion. It expands applications of our client-level Treatment Process Model (i.e., a framework for integrating interventions with client assessments of needs and measures of performance changes over time). Organizational factors and client information will be integrated with data on financial resources to better understand the foundation upon which treatment process and organizational change occur.

A primary goal is to develop reliable instruments that can measure and provide feedback on program resources and organizational dynamics (along with aggregated client data) for the purpose of clinical management in real work community settings where the majority of substance abuse treatment occurs. These are also the major issues program directors rated as among their highest priorities in our recent surveys of training needs. While the ability to effectively use information technology is increasing at most agencies, integrated data systems that meet these crucial clinical management needs have not been developed and tested, and are not yet available for routine use. The specific aims are to: (1) develop a set of field instruments and procedures that treatment programs are willing to implement and use to assess their organization and its resources, (2) demonstrate the feasibility and utility of these assessments in a sample of 100 outpatient drug free treatment providers from different regions in the U.S., (3) monitor organizational changes over time and relate them to client-level indicators of program effectiveness, (4) plan and evaluate a training protocol for program directors on how to use assessment information for improving program management and functioning, and (5) study the process of program change and the long-range implementation of this new technology.

The conceptual approach, assessment strategy, and sampling design build on previous work and experience in conducting organizational and client functioning assessments. Integrated into this plan is work by colleagues from the Heller School for Social Policy and Management at Brandeis University for collecting and interpreting information about program resources. The domains addressed by the comprehensive assessment battery include *organizational factors* (readiness for change, structure, climate), *staff* (cohesion, communication, attitudes), *clients* (motivation, psychosocial functioning, therapeutic engagement, and services), and *program resources* (staff, client, and financial). Programs from different regions of the U.S. are participating in a panel design that includes annual comprehensive assessment data to be used in a variety of cross sectional and prospective prediction analyses.

In addition to improving scientific understanding of these issues (to be communicated through journal publications, conferences, newsletters, and our Web site), several “application” products are expected from this project. These include (1) development of a practical set of organizational and resource assessment instruments suitable for dissemination, (2) establishment of several fundamental predictive relationships between organizational and resource indicators and program functioning and their inclusion in a conceptual model for presentation to scientific and applied audiences, (3) design of interpretative profiles and guidelines for users, and (4) production of manual-guided protocols for training providers in how to use results from the assessment information system.

IBR Web Site

www.ibr.tcu.edu

Other TCOM
Project materials
provided in:

- **Newsletters** — Read the featured articles, “User-friendly management systems for improving treatment” and “Treatment Costs and Organizational Monitoring: Taking a program’s pulse,” from the **Spring-Summer 2003 issue** of *Research Roundup*.

Criminal Justice Evaluations

The CJ-DATS Project

Criminal Justice Drug Abuse Treatment Studies (CJ-DATS)

D. Dwayne Simpson, Ph.D.,
Principal Investigator
Kevin Knight, Ph.D.,
Co-Principal Investigator
Patrick M. Flynn, Ph.D.,
Co-Principal Investigator

Funded by:
National Institute on Drug Abuse (NIDA)

Project Period:
September 2002 to August 2007

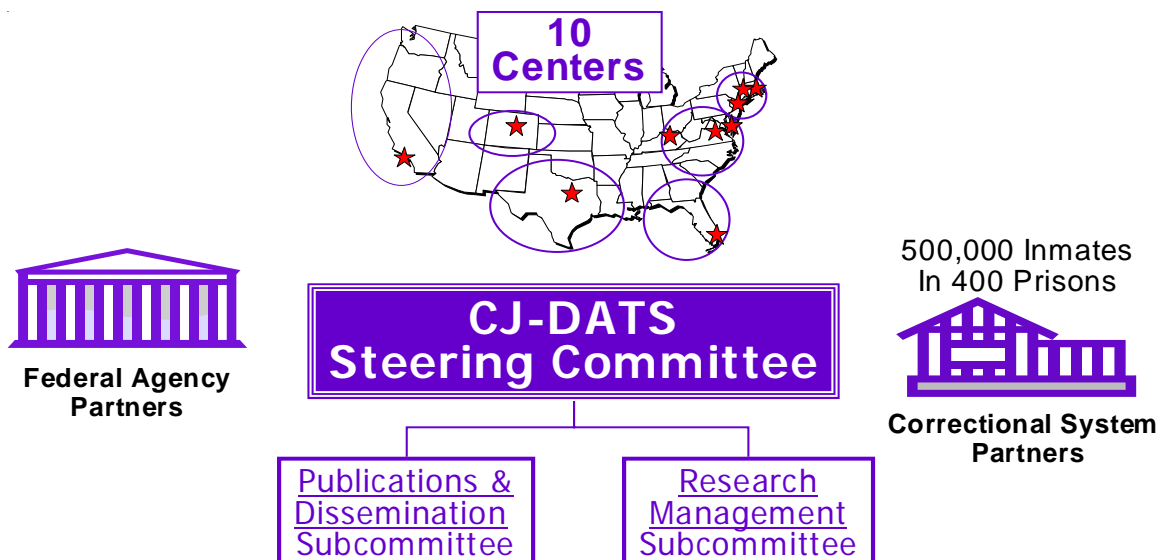
Budgeted: \$3.56 million

IBR is one of nine National Research Centers selected to study current drug treatment practices and outcomes in correctional settings and to examine strategies for improving treatment services for drug-involved offenders. The Criminal Justice Drug Abuse Treatment Studies (CJ-DATS), a 5-year cooperative agreement project funded by the National Institute on Drug Abuse (NIDA), investigates key elements of prison-based treatment systems in the U.S. and makes recommendations for policies to enhance outcomes and improve the overall efficiency of treatment service delivery. A key objective for this landmark study is the establishment of science-based evidence for the role of corrections-based treatment in reducing drug use and crime-related costs to society. States that provide the majority of prison-based drug treatment in the U.S. are participants in CJ-DATS. Its comprehensive research strategy will serve both policy makers and taxpayers alike by providing evidence-based guidelines for delivering effective and efficient drug treatment to correctional populations.

CJ-DATS includes nine Research Centers—at Brown University (**Peter Friedmann**, PI), University of California at Los Angeles (**Michael Prendergast**, PI), University of Connecticut (**Linda Frisman**, PI), University of Delaware (**James Inciardi**, PI), University of Kentucky (**Carl Leukefeld**, PI), University of Miami (**Howard Liddle**, PI), National Development and Research Institutes (**Nancy Jainchill**, PI, and **Harry Wexler**, PI), and TCU (**Dwayne Simpson**, PI)—as well as a Coordinating Center at University of Maryland (**Faye Taxman**, PI) and NIDA collaborators (**Bennett Fletcher** and **Pete Delany**). Functionally, this project shares similarities with DATOS (see www.datos.org), NIDA's third national evaluation of community-based treatment in which the IBR recently completed.

Joining Dr. Simpson as leaders of the TCU team are Drs. Kevin Knight and Pat Flynn (as Co-PIs). The Texas Department of Criminal Justice and the Federal Bureau of Prisons, which oversee two of the largest prison systems in the world, are collaborating partners with the IBR.

CJ-DATS Organizational Structure



Criminal Justice Evaluations

TCU Drug Screen (TCUDS) Evaluation

Kevin Knight, Ph.D.,
Principal Investigator
D. Dwayne Simpson, Ph.D.,
Co-Principal Investigator

Funded by:
National Institute of Justice
(NIJ)

Project Period:
Jan. 1999 to Jan. 2002
Budgeted: \$234,757

Nearly half of
Texas inmates
were identified
as needing
treatment.

IBR Web Site

www.ibr.tcu.edu

Other **TCUDS**
Project materials
provided in:

- **Research Summaries**
— Download (in PDF)
the *Research Summary*
on “**Using the TCU**
Drug Screen.”
- **Forms** — Download (in
PDF) the **TCU Drug**
Screen free of charge.

Although most criminal justice agencies across the United States have become invested in treating drug-abusing offenders in the past decade, the demand for treatment resources has continued to exceed availability. Not only must officials decide who should have access to limited treatment services, but they also need to determine the most appropriate type and intensity of treatment in which a drug-involved offender should be placed. These critical decisions are complicated even further in large correctional systems such as the Texas Department of Criminal Justice (TDCJ), which processes over 3,300 new inmates per month. For these agencies, improved drug abuse screening and treatment referral protocols are essential.

The primary goal of this proposal, therefore, was to examine psychometric properties and validity of the Texas Christian University Drug Screen (TCUDS), an experimental instrument in early stages of implementation at several large correctional settings across the U.S. The TCUDS is being used to assess all new admissions to the TDCJ-Institutional Division and the TDCJ-State Jail Division. Psychometric criteria for this instrument have been established, particularly focusing on its internal consistency, and evaluations were conducted of the concurrent validity of the TCUDS and the ASI Drug Dependence scale. The project is yielding normative data on levels of inmate pre-incarceration drug use and will include prominent subgroups defined by sociodemographic and criminal background variables.

This project helped guide the development of a reliable and valid drug screen that can be used to assess the severity of drug use problems and guide efficient and effective treatment decisions within correctional settings.

TCUDS Project Publications

Knight, K., Simpson, D. D., & Hiller, M. L. (2002). Screening and referral for substance-abuse treatment in the criminal justice system. In C. G. Leukefeld, F. Tims, & D. Farabee (Eds.), *Treatment of drug offenders: Policies and issues* (pp. 259-272). New York: Springer.

Knight, K. (2002). Factors to consider when choosing a screen for drug-use problems. *Offender Substance Abuse Report*, 11 (3), 35-39.

Criminal Justice Evaluations

The BOP Project

Bureau of Prisons (BOP) Treatment Process Evaluation

Kevin Knight, Ph.D.,

Principal Investigator

D. Dwayne Simpson, Ph.D.,

Co-Principal Investigator

Funded by:

National Institute of Corrections
(NIC)

Project Period:

September 2000 to September
2001

Budgeted: \$125,000

IBR Web Site

www.ibr.tcu.edu

Other **Criminal Justice Projects** and **BOP Project** materials provided in:

- **Resource Collections** — Explore the "**Correctional Treatment Evaluations**" collection.
- **Research Summaries** — Download (in PDF) the *Research Summary* on "**Drug Treatment Outcomes for Correctional Settings.**"
- **Publications** — Examine complete details of Criminal Justice publications in the list, "**Correctional Treatment Outcome Evaluations**" (with abstracts).

The project reviewed existing data collection procedures in BOP treatment programs as the first step toward implementing a comprehensive assessment system based on the TCU Treatment Model.

Research has demonstrated that one way to reduce criminality and drug use following incarceration is to provide quality drug treatment to drug-involved offenders while they are in custody. Particularly within correctional settings, long-term residential treatment programs, such as residential drug abuse treatment programs (DAP) provided by the Bureau of Prisons (BOP), have been found to reduce post-incarceration drug use and criminal activity. Nevertheless, the majority of offenders with substance abuse problems continue to return to society untreated, and go back to a life of alcohol and drug use and criminal activity. Given the limited availability of treatment, therefore, it is critical that correctional programs know who can benefit most from their treatment program and which components are having the greatest impact on effecting behavioral change.

Through a Cooperative Agreement between Texas Christian University and the BOP's National Institute of Corrections, this project evaluated an assessment instrument for identifying and monitoring the essential components of the therapeutic treatment process that link with favorable during- and post-treatment outcomes. The specific goals were to (1) identify existing key BOP data points relevant to treatment process, (2) prepare a psychometrically sound assessment instrument that tracks changes in inmate attitudes and cognitive processes over time as they progress through DAP programs, and (3) evaluate the assessment instrument in 6 BOP DAP programs.

Data collected on 667 inmates indicated that the revised TCU-CEST has good psychometric properties and was sensitive to variations across sites. Results helped formulate strategies for continuing this research as part of the CJ-DATS Project.

BOP Project Publication

Knight, K., Simpson, D. D., & Morey, J. (2002, May). *TCU-NIC Cooperative Agreement: Final Report*. Fort Worth: Texas Christian University, Institute of Behavioral Research.

Women and Children Project

Social Stress Among Mothers in Treatment

Danica K. Knight, Ph.D.,
Principal Investigator

Current Funding:
National Institute on Drug Abuse (NIDA)

Former Funding:
Center for Substance Abuse Treatment (CSAT) through the Texas Commission on Alcohol and Drug Abuse (TCADA)

Project Period:
October 1995 to Sept. 2004

Budgeted: \$667,520

Research goals include examining the impact of women's social systems on their ability to engage in and profit from treatment.

The focus of the Women and Children Project was to evaluate the effectiveness of treatment services provided to substance abusing women and their dependent children at the Salvation Army's First Choice Program in Fort Worth. Women entering this 12-month residential program lived with their children in small apartments on the First Choice campus and participated in a comprehensive treatment program. They received individual, group, and family therapy, special assistance in relapse prevention, nutrition, and vocational training, and were connected with a variety of local agencies designed to assist them in securing housing, employment, and health care following graduation from the program. Children also received special services and were integrated into the treatment program through special activities, play therapy, and family therapy. Child care was provided for children younger than school age.

The original research project, funded by CSAT, focused on evaluating services provided by the agency and examining individual, family, and treatment-related factors that impact substance abuse problems and facilitate recovery. During the period between April 1996 and September 2000, a variety of **data collection instruments** were administered at intake, regular intervals during treatment, and follow-up interviews were conducted at 6 and 12 months after discharge.

Evaluation of treatment services included documenting the type and intensity of services received by women and children, and evaluating the effectiveness of several specialized interventions, including a specially developed IBR module entitled *Partners in Parenting*.

The project yielded useful information about women and children as they enter treatment. Alcohol and crack/cocaine were the primary drugs of choice among these women. A large percentage had psychosocial problems and nearly all reported a history of victimization. Approximately half of the children also had a history of victimization and a large percentage exhibited behavior problems. A recent study of social relationships documented significant positive change in family relationships during the first 3 months of treatment, and even greater change among peer relationships during that period, particularly with regard to deviance and the development of supportive relationships with fellow residents. Other studies examining factors related to treatment participation have indicated that various aspects of social relationships differentially impact treatment retention and completion. Specifically, a greater number of children in treatment and a lack of partner support were inversely related to retention. Additionally, clients reporting higher levels of social deviance (i.e., recent arrests, association with deviant peers) were less likely to complete treatment requirements.

In an effort to more fully explore the role of social relationships in women's treatment engagement and recovery, the women and children's project has been extended through September, 2004. Funds from NIDA will enable us to examine the impact of women's social systems on their ability to engage in and profit from treatment. Changes in social networks, the inability to

fulfill responsibilities in various roles, and a lack of support from family members and peers, are conceptualized as constituting social stress. It is hypothesized that women who experience a high degree of social stress (e.g., family conflict, continued contact with drug-using partners or peers, parenting problems) will have more difficulty focusing their attention on treatment. Special emphasis is placed on issues related to children's level of functioning and parenting responsibilities.

Selected Women and Children Publications

Knight, D. K., Wallace, G. L., Joe, G. W., & Logan, S. M. (2001). Change in psychosocial functioning and social relations among women in residential substance abuse treatment. *Journal of Substance Abuse, 13*, 533-547.

Knight, D. K., & Wallace, G. (2003). Where are the children? An examination of children's living arrangements when mothers enter residential drug treatment. *Journal of Drug Issues, 33*(2), 305-324.

Hood., P., Knight, D. K., & Logan, S. M. (2003). Mutually beneficial collaboration: Using evaluation to improve service delivery. *Lessons learned: Residential substance abuse treatment for women and their children* (DHHS Publication No. SMA 03-3787). Rockville, MD: Center for Substance Abuse Treatment.

Partners in Parenting

To order a printed manual of the *Partners in Parenting* module developed for this project, contact the **Lighthouse Institute Publications Web Site** (<http://www.chestnut.org/LI/bookstore/index.html>), phone toll-free (888) 547-8271, or FAX (309) 829-4661. The Manuals section of the IBR Web site (www.ibr.tcu.edu/pubs/trtmanual/manuals.html) also provides more information and downloads for this manual:

Bartholomew, N. G., Knight, D. K., Chatham, L. R., & Simpson, D. D. (2000). *Partners in Parenting*. Fort Worth: Texas Christian University, Institute of Behavioral Research.

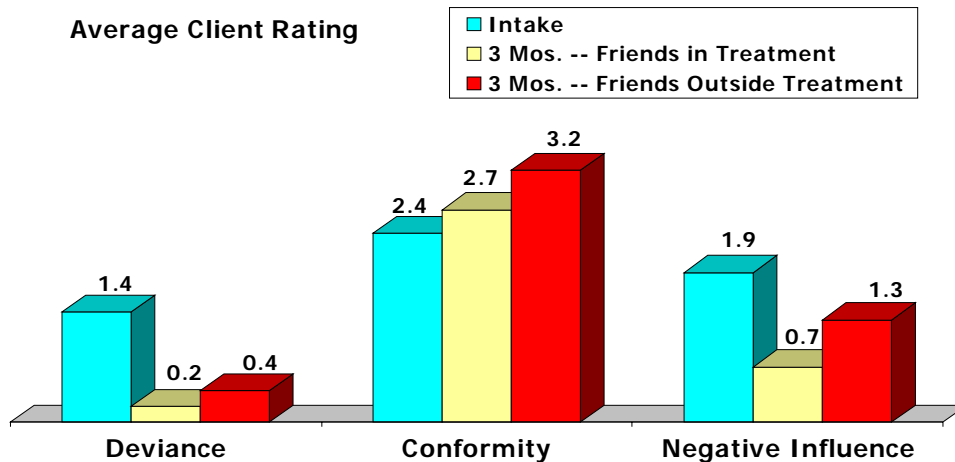
IBR Web Site

www.ibr.tcu.edu

Other **Women and Children Project** materials provided in:

- **Forms** — Download (in PDF) **Women and Children forms** free of charge.
- **Manuals** — Download (in PDF) the manual developed for a module in this project. See information at left.
- **Publications** — Browse a complete list of project publications with abstracts for "**Special Issues: Women & Children in Residential Treatment.**"

Change in Relationships with Friends During the First 3 Months of Treatment



Publications and Presentations

2003 PUBLICATIONS

Books

Bennett, J. B., & Lehman, W. E. K. (Eds.). (2003). *Preventing workplace substance abuse: Beyond drug testing to wellness*. Washington, DC: American Psychological Association.

- Bennett, J. B. (2003). Introduction (pp. 3-28).
- Bennett, J. B., Reynolds, G. S., & Lehman, W. E. K. (2003). Understanding employee alcohol and other drug use: Toward a multi-level approach (pp. 29-56).
- Lehman, W. E. K., & Bennett, J. B. (2003). Team and informational trainings for workplace substance abuse prevention (pp. 165-201).
- Bennett, J. B., Reynolds, G. S., & Lehman, W. E. K. (2003). Cautious optimism and recommendations: A call for more research from applied psychology (pp. 239-258).

Book Chapters

Hood, P., Knight, D. K., & Logan, S. M. (2003). Mutually beneficial collaboration: Using evaluation to improve service delivery. *Lessons learned: Residential substance abuse treatment for women and*

their children (DHHS Publication No. SMA 03-3787). Rockville, MD: Center for Substance Abuse Treatment.

Simpson, D. D. (2003). Understanding drug treatment process to improve outcomes. In G. Serpelloni, M. De Angeli, & L. Rampazzo (Eds.), *La valutazione dell'outcome: Nei trattamenti della tossicodipendenza*. Regione Veneto, Italy: Assessorato alle Politiche Sociali e Non Profit Assessore Antonio De Poli.

Simpson, D. D., & Knight, K. (2003). TCU model of treatment process and outcomes in correctional settings. In J. A. Gondles (Ed.), *The state of corrections* (pp. 211-222). Lanham, MD: American Correctional Association.

Journal Articles

Czuchry, M., & Dansereau, D. F. (2003). A model of the effects of node-link mapping on drug abuse counseling. *Addictive Behaviors*, 28(3), 537-549.

Czuchry, M., & Dansereau, D. F. (2003). Cognitive skills training: Impact on drug abuse counseling and readiness for treatment. *American Journal of Drug and Alcohol Abuse*, 29(1), 1-18.

Dansereau, D. F., Evans, S. H., Czuchry, M., & Sia, T. L. (2003). Readiness and mandated treatment: Development and application of a functional model. *Offender*

Substance Abuse Report, 3(1), 1-2, 13-16.

Fletcher, B. W., Broome, K. M., Delany, P. J., Shields, J. J., & Flynn, P. M. (2003). Patient and program factors in obtaining supportive services in DATOS. *Journal of Substance Abuse Treatment*, 25(3), 165-175.

Flynn, P. M., Joe, G. W., Broome, K. M., Simpson, D. D., & Brown, B. S. (2003). Looking back on cocaine dependence: Reasons for recovery. *The American Journal on Addictions*, 12(5), 398-411.

Flynn, P. M., Joe, G. W., Broome, K. M., Simpson, D. D., & Brown, B. S. (2003). Recovery from opioid addiction in DATOS. *Journal of Substance Abuse Treatment*, 25(3), 177-186.

Flynn, P. M., Porto, J. V., Rounds-Bryant, J. L., & Kristiansen, P. L. (2003). Costs and benefits of methadone treatment in DATOS – Part 1: Discharged versus continuing patients. *Journal of Maintenance in the Addictions*, 2(1/2), 129-149.

Flynn, P. M., Porto, J. V., Rounds-Bryant, J. L., & Kristiansen, P. L. (2003). Costs and benefits of methadone treatment in DATOS – Part 2: Gender differences for discharged and continuing patients. *Journal of Maintenance in the Addictions*, 2(1/2), 151-169.

Knight, K., & Farabee, D. (2003). Should in-prison drug treatment be mandated? *Offender Substance Abuse Report*, 3(6), 81-84.



Updated comprehensive lists of IBR publications, arranged by year and research activity, are maintained in the **Publications** section of the IBR Web site (www.ibr.tcu.edu). The section also provides abstracts of over 200 IBR journal articles published from 1990 to the present.

Knight, D. K., & Wallace, G. (2003). Where are the children? An examination of children's living arrangements when mothers enter residential drug treatment. *Journal of Drug Issues, 33*(2), 305-324.

Reynolds, G. S., & Lehman, W. E. K. (2003). Levels of substance use and willingness to use the Employee Assistance Program. *Journal of Behavioral Health Services & Research, 30*(2), 238-248.

Simpson, D. D. (2003). Introduction to 5-year followup treatment outcome studies. *Journal of Substance Abuse Treatment, 25*(3), 123-124.

Simpson, D. D., & Joe, G. W. (2003). Robert Glenn Demaree (1920-2002). *American Psychologist, 58*(6/7), 493.

In Press

Czuchry, M., & Dansereau, D. F. (in press). The importance of need for cognition and educational experience in enhanced and standard substance abuse treatment. *Journal of Psychoactive Drugs*.

Czuchry, M., & Dansereau, D. F. (in press). Using motivational activities to facilitate treatment involvement and reduce risk. *Journal of Psychoactive Drugs*.

Hiller, M. L., Knight, K., & Simpson, D. D. (in press). Social functioning, treatment dropout, and recidivism of probationers mandated to a modified therapeutic community. *Criminal Justice and Behavior*.

Joe, G. W., Simpson, D. D., & Rowan-Szal, G. A. (in press). Interaction of counseling rapport and topics discussed in sessions with methadone clients. *Substance Use & Misuse*.

Newbern, D., Dansereau, D. F., Czuchry, M., & Simpson, D. D. (in press). Node-link mapping in individual counseling: Treatment impact on clients with ADHD-related behaviors. *Journal of Psychoactive Drugs*.

Rao, S. R., Broome, K. M., & Simpson, D. D. (in press). Depression and hostility as predictors of long-term outcomes among opiate users in DATOS. *Addiction*.

Rowan-Szal, G. A., Bartholomew, N. G., Chatham, L. R., & Simpson, D. D. (in press). A combined cognitive and behavioral intervention for cocaine users. *Journal of Psychoactive Drugs*.

Simpson, D. D., & Joe, G. W. (in press). A longitudinal evaluation of treatment engagement and recovery stages. *Journal of Substance Abuse Treatment*.

Technical Reports

Joe, G. W., Simpson, D. D., Greener, J. M., & Rowan-Szal, G. A. (2003). *TCU Brief Intake: Development and initial validation*. Fort Worth: Texas Christian University, Institute of Behavioral Research.

Simpson, D. D., Knight, K., & Flynn, P. M. (2003, November). *Using a systems approach to improve corrections-based drug treatment programs*. Manuscript prepared for the 2003 ICCA Annual Conference, Indianapolis, IN.

CONFERENCE PRESENTATIONS

(Listed chronologically by month)

Knight, D. K. (2003, January). *Developmental issues in children of substance-abusing parents*. Invited

presentation at the Prairielands ATTC Women's Network Conference, Des Moines, IA.

Knight, D. K. (2003, January). *Partners in parenting: Skill enhancements for parents in treatment*. Invited workshop at the Prairielands ATTC Women's Network Conference, Des Moines, IA.

Czuchry, M., & Sia, T. L. (2003, February). *Motivating probationers through engaging activities: The Downward Spiral*. Invited workshop at TCADA Best Practices Conference, Austin, TX.

Broome, K. M. (2003, April). *TCU program assessments and feedback*. Invited presentation at the Meeting of Regional Managers, Louisiana Office of Addictive Disorders, Baton Rouge, LA.

Courtney, K. O., Rowan-Szal, G. A., Flynn, P. M., & Simpson, D. D. (2003, April). *Investigation of gender and drug treatment modality differences using the TCU CEST*. Poster presentation at the First Annual Student Research Symposium, Texas Christian University, Fort Worth, TX.

Knight, K. (2003, April). *Offender re-entry: What works*. Invited workshop at the 26th Annual Governor's Conference on Substance Abuse, Des Moines, IA.

Rao, S. R., Czuchry, M., & Dansereau, D. F. (2003, April). *Gender differences in psychosocial functioning among probationers in substance abuse treatment*. Poster presentation at the First Annual Student Research Symposium, Texas Christian University, Fort Worth, TX.

Simpson, D. D. (2003, April). *Methods and findings from DATOS: Evaluating outcomes and process*.

Invited plenary for The Effectiveness of Interventions for Addictions, Italian National Institute of Health, Rome, Italy.

Whorton, M. K., Dees, S. M., & Dansereau, D. F. (2003, April). *A study of differences between parent and non-parent clients entering substance abuse treatment*. Poster presentation at the First Annual Student Research Symposium, Texas Christian University, Fort Worth, TX.

Rao, S. R., Broome, K. M., & Simpson, D. D. (2003, May). *Effects of depression and hostility on long-term drug treatment*. Poster presentation at the 15th Annual Convention of the American Psychological Society, Atlanta, GA.

Simpson, D. D. (2003, May). *A systems approach to assessing and improving drug treatment*. Invited plenary for Wisconsin Association for Alcohol and Other Drug Abuse (WAAODA) 37th Annual Spring Conference: "Payers, Providers, Patients: Redefining Partnerships in Healthcare," Madison, WI.

Simpson, D. D. (2003, May). *Measures of client and program functioning in the TCU Treatment Model*. Invited workshop for Wisconsin Association for Alcohol and Other Drug Abuse (WAAODA) 37th Annual Spring Conference: "Payers, Providers, Patients: Redefining Partnerships in Healthcare," Madison, WI.

Broome, K. M., Joe, G. W., & Simpson, D. D. (2003, June). *Counselor differences in patient therapeutic rapport during metha-*

done treatment. Poster presentation at the 65th Annual Scientific Meeting of the College on Problems of Drug Dependence, Bal Harbour, FL.

Conover, C. J., Ettner, S. M., Weaver, M., Flynn, P. M., Porto, J. V., & Ang, A. (2003, June). *Costs of care for people living with HIV/AIDS, chronic mental illness, and substance abuse disorders*. Paper presented at the International Health Economics Association 4th World Congress, San Francisco, CA.

Flynn, P. M. (2003, June). *Innovative research training in services research*. Presentation at the NIDA sponsored workshop on Drug Abuse Research Training from a Public Health Perspective at the 65th Annual Scientific Meeting of the College on Problems of Drug Dependence, Bal Harbour, FL.

Simpson, D. D. (2003, June). *A systems approach to assessing and improving drug treatment*. Invited plenary for "From Science to Services: Effective Practices for Substance Abuse Treatment," sponsored by the Center for Substance Abuse Treatment (CSAT), at the 65th Annual Scientific Meeting of the College on Problems of Drug Dependence (CPDD), Bal Harbour, FL.

Knight, K., & Simpson, D. D. (2003, July). *Implementing best practices*. Invited keynote for the annual conference of the Washington State Institute on Addictions Treatment, Seattle, WA.

Simpson, D. D. (2003, July). *A systems approach to organiza-*

tional change. Invited plenary for the 4th Annual Arizona Summer Institute, sponsored by the Arizona Practice Improvement Collaborative (AZPIC) and the Pacific Southwest Addiction Technology Transfer Center (PSATTC), Sedona, AZ.

Simpson, D. D. (2003, July). *A systems approach to assessing and improving drug treatment*. Invited plenary for the Texas Summer Institute: "Discovering and Using New Ways to Change Lives," sponsored by the Texas Council on Alcohol and Drug Abuse (TCADA), Austin, TX.

Knight, K. (2003, August). *The importance of treatment retention*. Invited plenary for the Treatment Drug Court Grantee Meeting of the Center for Substance Abuse Treatment (CSAT), Washington, DC.

Knight, D. K., Joe, G. W., & Simpson, D. D. (2003, August). *Is the treatment process different for women in residential treatment?* Presented at the annual meeting of the American Psychological Association, Toronto, Canada.

Knight, K., Simpson, D. D., & Flynn, P. M. (2003, August). *Community-based aftercare for offenders in Texas*. Symposium presentation at the 104th Annual Convention of the American Psychological Association, Toronto, Canada.

Simpson, D. D. (2003, August). *A systems view of treatment process and improvement strategies*. Invited plenary for "Transforming Lives: Supporting Resil-



Several online and "Feature Presentations" of IBR conference materials are provided in the **Presentations** section of the IBR Web site (www.ibr.tcu.edu).

- ience, Recovery, and Renewal," the 2003 Annual Conference of the Florida Alcohol and Drug Abuse Association (FADAA), Kissimmee, FL.
- Bartholomew, N. G. (2003, September). *Straight ahead: Transition skills for recovery*. Invited trainer at Indiana State Department of Correction Research-to-Practice Training Conference, Kokomo, IN.
- Czuchry, M., Sia, T. L., & Dansereau, D. F. (2003, September). *When in doubt, map it out: Node-link mapping techniques and applications*. Invited training seminar at the Texas Christian University and Indiana Department of Correction Training Conference, Kokomo, IN.
- Flynn, P. M., & Simpson, D. D. (2003, September). *Treatment works: Toward a better understanding of how it happens*. Invited presentation at the Schneider Center for Behavioral Health, Heller School for Social Policy and Management, Brandeis University, Waltham, MA.
- Knight, K. (2003, September). *The TCU Drug Screen II*. Invited plenary for the Administrative Office of US Courts, Federal Corrections and Supervision Division, Washington, DC.
- Knight, K., Simpson, D. D., & Flynn, P. M. (2003, September). *TCU & BOP: A research partnership*. Invited presentation to BOP Regional Psychology Administrators Meeting, Seattle, WA.
- Rowan-Szal, G. A. (2003, September). *Organizational snapshots: Tools for assessing programs and clients*. Invited trainer at Indiana State Department of Correction Research-to-Practice Training Conference, Kokomo, IN.
- Broome, K. M., Flynn, P. M., Knight, D. K., & Simpson, D. D. (2003, October). *The life of counselors: Organizational climate studies in the treatment costs and organizational monitoring (TCOM) project*. Paper presented at the Conference on Health Services Research in Substance Abuse, Atlanta, GA.
- Courtney, K. O., Rowan-Szal, G. A., Bartholomew, N. G., Moore, D., & Boyles, D. (2003, October). *Assessing client motivation and psychosocial functioning: A Preliminary study*. Poster presentation at the Association for the Treatment of Sexual Abusers 22nd Annual Conference, St. Louis, MO.
- Flynn, P. M., Broome, K. M., Knight, D. K., & Simpson, D. D. (2003, October). *Treatment costs and organizational monitoring (TCOM)*. Paper presented at the Conference on Health Services Research in Substance Abuse, Atlanta, GA.
- Knight, K., & Simpson, D. D. (2003, October). *A treatment systems approach to "what works."* Invited presentation at Midwest Conference on Criminal Justice and Substance Abuse, Iowa City, IA.
- Knight, K., & Tate, T. (2003, October). *Offender drug treatment and the National Treatment Plan*. Invited presentation at the 2003 Implementing Partners for Recovery in Wisconsin Conference, Oconomowoc, WI.
- Moore, D., Courtney, K. O., Bartholomew, N., & Boyles, D. (2003, October). *Assessing client motivation and psychosocial functioning: A preliminary investigation*. Poster presentation at the Association of the Treatment of Sexual Abusers 22nd Annual Research and Treatment Conference, St. Louis, MO.
- Simpson, D. D. (2003, October). *Defining clinical measures for managing treatment and improving outcomes*. Invited presentation at ASAM Conference on Addiction Medicine, Washington, DC.
- Simpson, D. D. (2003, October). *Program performance: A systems approach to improving retention*. Invited presentation at Maryland ADA Management Conference, Rocky Gap, MD.
- Simpson, D. D. (2003, October). *Research and treatment: A process-based approach*. Invited presentation at 46th International Conference on Alcohol and Addictions, Toronto, Canada.
- Knight, K., Simpson, D. D., & Flynn, P. M. (2003, November). *Using a systems approach to improve corrections-based drug treatment programs*. Invited presentation at the International Community Corrections Association (ICCA), Indianapolis, IN.
- Rao, S. R., Czuchry, M., & Dansereau, D. F. (2003, November). *Gender differences in psychosocial functioning among probationers mandated to a substance abuse treatment facility*. Presentation at the American Society of Criminology Conference, Denver, CO.
- Bartholomew, N. G. (2003, December). *Gender-focused HIV intervention for men: Real men are safe*. Invited trainer at NIDA CTN Clinical Trials, Washington Node, Seattle, WA.
- Knight, K. (2003, December). *Assessing your organization's readiness for change*. Invited presentation at the 2003 Probation and Court Services Managers' Symposium, Springfield, IL.