RESEARCH ROUNDUP

IBR'S QUARTERLY NEWSLETTER

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Kyle Facility is Evaluation Site

IBR Evaluates Prison Treatment Effectiveness for New Criminal Justice Initiative

As the drugs and crime crisis in Texas continues to overcrowd prisons, the Texas Commission on Alcohol and Drug Abuse (TCADA) has contracted with IBR to evaluate the short and long term effectiveness of the state's newly established drug treatment initiative for prisoners. The Texas Criminal Justice Treatment Initiative was created to reduce recidivism and ease prison overcrowding by offering treatment alternatives to prisoners with chemical dependency problems. A team of IBR researchers will collect in-treatment and follow-up data on approximately 300 Texas parolees with substance abuse histories, and compare outcomes of those who participated in a nine-month in-prison treatment program with those who did not. The New Vision Chemical Dependency Treatment Center in Kyle



Dr. Kevin Knight, Project Manager for PTA, and Ms. Shirley Livingston, Clinical Director of the Kyle Facility.

(south of Austin), a 500-bed In-Prison Therapeutic Community (ITC), was chosen as the evaluation site. New Vision is one of seven ITCs planned for Texas over the next two years.

The Texas Criminal Justice Treatment Initiative

The Texas Criminal Justice Treatment Initiative is a multi-tiered approach for treating prisoners with drug and alcohol problems. In addition to therapeutic communities behind prison walls, the initiative also establishes other treatment approaches, such as treatment in-lieu of prison for non-violent, first-time offenders. Residential halfway houses and outpatient treatment programs with monitored recovery have also been established to help reintegrate prison treatment graduates back into the community. The initiative calls for Texas to have 14,000 treatment slots in the criminal justice system by 1995 for offenders with substance abuse problems.

The "Texas Initiative" has drawn national attention and has been hailed as a far-sighted and progressive attempt to break the crime and drugs connection. U.S. Attorney General Janet Reno praised the approach during her recent tour of the New Vision facility, and Dr. Lee Brown, director of the Clinton Administration's Office of National Drug Control Policy, has called the Texas program a model for substance abuse treatment within the criminal justice system. The legislation that established funding for

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Prison Treatment (continued from page 1)

these landmark programs was passed by the 72nd Legislature and signed into law by Governor Ann Richards in 1991. The initiative also has received praise from drug treatment researchers and clinicians around the country.

Assessment Project

With so much national attention focused on Texas, the assessment and evaluation phase TCU Prison Treatment Assessment (PTA) Project will evaluate treatment process and short and long term treatment effectiveness at the Kyle New Vision facility, which has been in full operation since 1992. IBR Director Dr. Dwayne Simpson will serve as Principal Investigator, and Associate Re-Project Manager. Senior Research Scientist Dr. Lois Chatham will direct follow-up activities, and Associate Research Scientist Dr. Mabel Camacho will assist with data involved with the evaluation of criminal justice treatment programs since 1991 when Drs. Simpson and Knight were asked to develop and implement an evaluation plan for treatment interventions used by the **Tarrant County Substance Abuse Treatment** Facility (TCSATF), a 140-bed program for non-violent drug offenders located in

The therapeutic community approach adopted by New Vision (and similar ITCs in

The IBR Prison Treatment

of in-prison treatment is viewed as vital. The search Scientist Dr. Kevin Knight will act as management and analysis. The IBR has been Mansfield.

Texas) allows inmates assessed as having a substance abuse problem to spend the last nine months of their sentence in an intensive treatment program. After release, graduates are referred to a 90-day residential halfway house program, and then to 12-months of non-residential treatment and supervised recovery in the community.

The PTA Project will collect baseline data from 200 ITC clients during the weeks immediately prior to their release. Selected items from the TCU Intake Form will be used to gather background data on pre-incarcera-



tion functioning and sociodemographic variables such as family and peer relations, criminal history, drug use history, psychological status, treatment

experience, and related measures. In addition, data will be gathered on treatment process issues (such as program structure and counseling activities) and psychosocial functioning (e.g., self-esteem, depression, hopelessness, decision-making, hostility, and risk-taking).

PTA subjects also will be asked to complete several standardized scales commonly used in drug treatment research. These will be used to assist in establishing the reliability of a number of brief screening scales developed at the IBR for this and other treatment evaluation projects.

Both the six and twelve month follow-up involve face-to-face interviews and selfadministered questionnaires that revisit baseline measures. Hair samples will be collected from subjects to determine whether drugs were used in the 90 days prior to the follow-up interviews. Baseline and follow-up data will also be collected from a comparison group of 100 Texas prison inmates with

(Please see PRISON on next page.)

--- Dr. D. Dwayne Simpson, **IBR Director**

"This study is

scientific evalua-

tion work that

will help guide

funding deci-

sions. IBR is

proud to be in

the forefront of

research on one

of the main drug

abuse treatment

issues facing our

nation."

future policy and

part of the

Ongoing IBR Research

DATAR Study Uses Hair Analysis

Counselors at Corpus Christi Drug Abuse Council (CCDAC) have received training in how to collect hair samples for pre-admission drug screening. CCDAC is the site of DATAR's new study of criminal justice probationers who have been referred to treatment because of cocaine use. Hair analysis was added to the study's admission protocol because of the limitations of urine screening for cocaine. Cocaine metabolites are detectable in urine assays for only about 72 hours after last use, but hair analysis can provide a much longer window of detection. This enlarged window gives researchers a more comprehensive measure of subjects' drug use histories.

The use of hair analysis technology has helped DATAR counselors identify and admit persons who would have otherwise failed to meet admission criteria for the study, either because they failed to self-report drug problems or because they had a negative urinalysis for cocaine. During training, DATAR staff learned how to explain hair sampling to potential clients and how to correctly cut and package the hair specimen for analysis.

A small lock of head hair is needed for testing. Ideally, a 1½ inch length containing

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substance abuse problems who did not participate in the *New Vision* ITC.

"The Texas Initiative is expected to have a long-term, national impact on how society will deal with drugs and crime," notes Dr. Simpson. "This study is part of the scientific evaluation work that will help guide future policy and funding decisions. IBR is proud to be in the forefront of research on one of the main drug abuse treatment issues facing our nation."

at least 60 hairs is collected by cutting as close to the scalp as possible. Both clients and staff have found this procedure less intrusive than collecting a urine specimen.

Hair samples are sent to Psychemedics Corporation, the California firm that originally developed hair analysis. The samples undergo a special washing process followed by immunoassay screenings for specific drugs of abuse. Although still new, this alternate screening technology holds great promise for the drug treatment field. The use of hair analysis technology has helped DATAR counselors identify and admit persons who would have otherwise failed to meet admission criteria for the study.

Completed Study

Cocaine Use Increases HIV/ AIDS Risks

Addicted opiate users who also use cocaine were found to practice more HIV/AIDS-risky behaviors than those not using cocaine in a recent DATAR (Drug Abuse Treatment for AIDS-Risk Reduction) study. Drs. George Joe and Dwayne Simpson looked at needle use and sex behaviors among 487 clients admitted to three methadone maintenance treatment programs in Texas.

They found that clients who abused cocaine were less likely to use clean needles and more likely to have shared needles with a greater number of people than were clients who abused opiates alone. Cocaine users also reported more unprotected sex outside their primary relationships, and unprotected sex in prostitution. Females reported more use of dirty needles than males, and were more likely to have unprotected sex with injection drug users. This study supports recent findings from other researchers who have suggested that cocaine use among opiate addicts is an important predictor of AIDS-risky behaviors.

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The Drug Abuse Treatment for AIDS-Risk Reduction (DATAR) project is funded by a treatment enhancement grant (DA06162) from the National Institute on Drug Abuse.

DATAR Manuals Available

The following treatment enhancement manuals are available from IBR's DATAR Project:

MAPPING NEW ROADS TO RECOVERY: Cognitive Enhancements to Counseling. A self-paced training manual for counselors interested in learning node-link mapping. 131 pp., illus., bibl., appen., exercises, glos.

STRAIGHT AHEAD: Transition Skills for Recovery. A counselor manual for leading 10 educational group sessions incorporating node-link mapping. Designed for clients ready for transition into aftercare. Approx. 193 pp., illus., bibl., intro. includes "How to Use this Manual." Handouts for each session.

TIME OUT! FOR ME: An Assertiveness and Sexuality Workshop Specially Designed for Women. A counselor manual for leading 6 educational group sessions for women. 218 pp., illus., bibl., appen. including "How to Use This Manual" and "FACTS Manual Reference Section." Handouts for each session.

Copies of these manuals are available for \$15 per manual to cover printing and shipping costs. Free copies are available for small-budget, nonprofit groups. For more information, contact **Norma Bartholomew** at IBR's address listed below.



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