

RESEARCH ROUNDUP

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Partners in Research

Diverse sites provide backbone for research.

Over the years, much of IBR's research focus has involved the evaluation of substance abuse treatment carried out in community-based programs. In pursuing research interests such as treatment process, client motivation, and the impact of enhanced interventions, scientists are required to look deeply into the so-called "black box" of treatment. In order to do this effectively, strong partnerships are needed between researchers and research sites. This article highlights four community-based programs whose collaboration and support are an essential part of IBR's current research efforts. As partners in research, they provide real-life laboratories for new treatment approaches and

help assure the orderly collection of data—factors that provide the backbone for research.

Drug Dependence Associates San Antonio, Texas DATAR Project

Drug Dependence Associates (DDA) was founded in 1970 in San Antonio by **Dr. Thomas Payte** and a group of health care professionals who wanted to improve the quality of services and treatment options available to individuals addicted to heroin. At a time when such a move was considered controver-

See **Partners**, page 2.

Selected Data Forms Now Available On-line

Also in this issue:

Research Highlights 5

Data collection instruments developed by IBR for drug abuse treatment and outcome assessment projects are now available for downloading at the Institute's Web site. A wide array of evaluation instruments used in the DATAR and Criminal Justice projects is available, including the **TCU/CJ**

Drug Dependence Screen (a 15-item, self-administered form for assessing severity of drug problems), the **TCU/DATAR Initial Self Rating** (which contains psychosocial functioning scales for domains such as self-esteem, depression, motivation, and treatment readiness), and the **TCU/DATAR**

See **Forms On-line**, page 6.

Partners, continued from front page.

sial, DDA began offering methadone maintenance as part of its continuum of care. Today, its mission remains the same—the humane treatment of heroin addic-



Participation in research exposes sites to new clinical tools as well as the rigors of data collection.

tion through methadone maintenance, counseling, detoxification, naltrexone treatment, and the provision of ancillary medical services.

DDA is one of only three agencies in San Antonio that provides outpatient methadone maintenance treatment. Most of the clinic's 500 patients hear about the program by word-of-mouth. They range in age from 18 to 70; almost all have chronic histories of opioid addiction, and a high percentage have coexisting social, medical, and psychiatric problems. Dr. Payte believes that methadone maintenance “engages and retains patients so that coexisting problems may be addressed. The goal of treatment,” he says, “is restoration of function and health, offering the patient an opportunity for improved quality of life. We accept that long-term, indefinite treatment is often appropriate, and the most valuable service we offer is individualized care delivered in an environment of dignity, compassion, and respect.”

DDS is the primary research site for **DATAR** (Drug Abuse Treatment Assessment Research), a 5-year continuation of a project to isolate and evaluate significant

components of the therapeutic process. Studies are based on analyses of intake, during-treatment, and follow-up data, and focus on strategies to improve counseling procedures, to address special counseling needs, and to improve patient engagement early in treatment. According to Dr. Payte, involvement in the research project has provided his staff with a better appreciation of the discipline and structure of gathering and reporting data. In addition, involvement in research has meant exposure to valuable clinical tools and concepts.

Salvation Army First Choice Program Fort Worth, Texas Women and Children's Project

In the late 1980s, a group of community leaders in Fort Worth commissioned the Junior League to carry out a needs assessment to identify the most pressing problem faced by women seeking substance abuse treatment. Overwhelmingly, the need for a residential program where women could stay with their children was identified. With this information the Salvation Army sought funding from the Texas Commis-



sion on Alcohol and Drug Abuse (TCADA), and in 1989 the First Choice Program began operation with a capacity to serve 10 families. In 1995, funding was obtained from the Center for Substance Abuse Treatment (CSAT) that doubled the program's capacity from 10 to 20 beds. The 12-month residential program is open to women of childbearing age and their dependent children, and clients are referred through adult probation, Child Protective Services, other drug and alcohol programs, and word-of-mouth.

Families live in independent apartments on the First Choice grounds and mothers are responsible for maintaining a stable environment for their children with supportive help from therapeutic staff. Program Director **Paula Hood** says the agency's treatment philosophy entails an eclectic blend of services and approaches tailored to the unique needs of recovering women. Treatment plans are individually designed and children are integrated into the program through special activities, play therapy, and family therapy. "Redemption is a guiding concept in our agency's framework," notes Mrs. Hood. "We believe in 'second chances'." She views child care as the most valuable treatment service offered at First Choice because it frees women from having to choose between getting help or staying with their children.

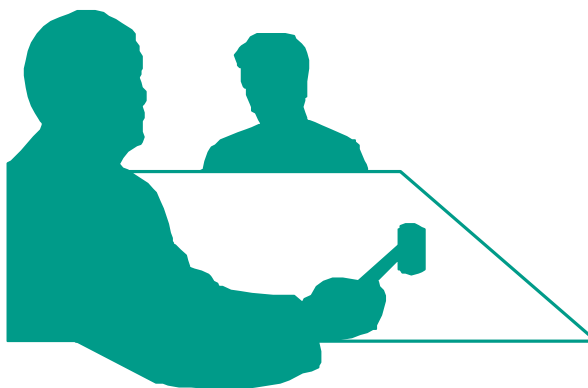
First Choice is the research site for IBR's **Women and Children Project**, a 5-year evaluation of program services and individual, family, and treatment-related factors that facilitate recovery. Intake, during-treatment, and 6- and 12-month follow-up data will be used in the evaluation studies. According to Mrs. Hood, involvement in the research project has helped document the high level of developmental and psychosocial needs of children entering the program, allowing

staff to design appropriate interventions. In addition, the agency has a greater appreciation for the rigor and structure needed for good data management.

Dallas County Judicial Treatment Center Wilmer, Texas Criminal Justice Project

The Texas Criminal Justice Treatment Initiatives, signed into law in 1991, created over 5,000 beds for residential, community-based treatment of probationers with substance abuse problems. Several Dallas County judges realized the need for treatment services in their jurisdiction and contracted with Interventions, Inc.,* a nationally-recognized vendor of drug and alcohol programs. In September 1991, the Dallas County Judicial Treatment Center (DCJTC) opened with 300 beds for primary and aftercare treatment, becoming one of the first such programs in the state. Probationers with substance

A modified therapeutic community approach is used in most Texas criminal justice programs.



abuse problems are mandated to the facility by felony judges of the Dallas County District Court who work with local probation and community supervision officers to secure placement.

See **Partners**, page 4.

* Cornell Corrections took over management in February 1997.

Partners, continued from page 3.

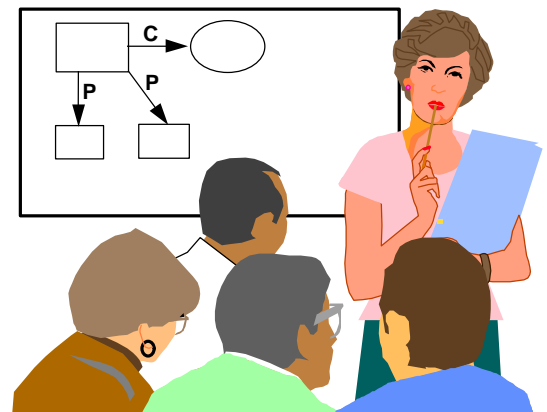
The treatment philosophy at DCJTC emphasizes changing behavior through a modified therapeutic community approach that utilizes cognitive-behavioral interventions, life skills training, community building, and 12-step groups. Facility Director **Julien Devereux** sees the program's long term continuum of care as its most valuable treatment service. As an alternative to jail, probationers complete a 6-month residential program, plus another 6 to 9 months of aftercare services, depending on need. "We use the legal system as leverage to insist on changes in lifestyle," notes Mr. Devereux, "and we provide a lengthy change of environment that adds to our effectiveness."

DCJTC is a research site for IBR's **Criminal Justice Project**, which is investigating treatment process factors and follow-up outcomes in corrections-based programs for substance abusing offenders. Recently completed 6- and 12-month follow-up studies of DCJTC clients indicate that graduates have relatively lower re-arrest rates, especially those who take advantage of the aftercare program. According to Mr. Devereux, serving as a research site has helped his staff appreciate the process of using data to identify trends and program problems. In addition, the research has validated staff's belief that DCJTC outcomes are among the best in the country for criminal justice programs.

February 1992 and quickly reached its capacity of 140 beds. As part of the Tarrant County Community Correctional Facility, residents are ordered to participate in the program by the county's Criminal Courts as either a condition of probation for a new offense or as a revocation or amendment of previous probation.

During their 4-month treatment stay, residents participate in a modified therapeutic community consisting of four "communities" of about 35 people each. In addition, all residents leaving the program are required to attend 3 months of aftercare groups and are encouraged to attend 12-step meetings. SATF Unit Supervisor **Rodney Thompson** identifies the program's treatment philosophy as one based on the belief that chemical dependency is a progressive but treatable disease. Treatment seeks to address the physical, emotional, social, and spiritual aspects of addiction through multi-modal interventions such as life skills education, group therapy, and experiential therapy (e.g., *Ropes* and *Challenge* courses). In addition, each community takes part in a *12-Step Steward Program* in which residents are selected by their peers and staff to serve as role models and to organize and facilitate 12-step meetings.

SATF is the research site for **CETOP** (Cognitive Enhancements for Treatment of



Ongoing studies provide sites with feedback on treatment outcomes.

Tarrant County Substance Abuse Treatment Facility Mansfield, Texas CETOP Project

The Tarrant County Substance Abuse Treatment Facility (SATF), made possible through the same Texas legislation as the Dallas County center, began operation in

Research Highlights

Conference presentations

Several IBR researchers were invited to present workshops at the 40th Annual Institute of Alcohol and Drug Studies of the Texas Commission on Alcohol and Drug Abuse (TCADA) this summer in Austin. **Dr. Don Dansereau** will discuss “Node-link mapping,” **Drs. Mike Czuchry** and **Tiffany Sia** will explain “A new board game approach to address treatment readiness and clients’ understanding of addiction dynamics,” **Drs. Matthew Hiller** and **Kirk Broome** will present “The ‘Ins and Outs’ of evaluating your CD program,” and **Norma Bartholomew** will discuss “Straight Ahead: Solution-focused approaches for relapse prevention.”

At the College on Problems of Drug Dependence Annual Meeting held in Nashville in June, IBR scientists presented findings from the NIDA-funded Drug Abuse Treatment Outcome Study (DATOS). **Dr. Grace Rowan-Szal** discussed “Cocaine/crack use and treatment dropouts in a national treatment

sample,” and **Dr. Kirk Broome** presented “Retention and HIV risk-reduction in a national treatment sample.” Also, **Dr. Urvashi Pitre** presented “Node-link mapping enhanced substance abuse counseling helps reduce AIDS risk,” based on findings from the CETOP project on residential criminal justice treatment.

Reports on projects

A compilation of major findings from the first 5 years of the DATAR project will appear this summer in the *Journal of Drug Issues*. The article, “Strategies for improving methadone treatment process and outcomes,” authored by **Drs. Dwayne Simpson, George Joe, Don Dansereau,** and **Lois Chatham** summarizes the during-treatment performance and follow-up outcomes of 960 methadone clients exposed to cognitive, behavioral, and psychoeducational strategies designed to improve their engagement and participation in treatment. Also appearing in the same issue, an overview of findings from

See **Research Highlights**, page 6.

Partners, continued from page 4.

Probationers), a 5-year project focusing on node-link mapping and associated approaches designed to enhance communication, learning, and motivation among probationers. Studies center on the contributions of these enhancements to treatment components such as induction, counseling, and life-skills education. According to Mr. Thompson, involvement in research has brought first-hand knowledge of new techniques and strategies for

substance abuse treatment, such as node-link mapping. He notes that because treatment at SATF is group-centered, “mapping has been an effective tool for residents who struggle with sharing or opening up in front of a large group of people.” ■

Forms On-line, continued from front page.

Intake and **Follow-up Interview** packages (comprehensive instruments for examining drug and criminal history, family and social networks, levels of drug and alcohol use, injection frequency, employment, and HIV risky behavior).

The Web site provides background and psychometric information about the

forms, which are in **Adobe PDF(R)** format, along with detailed instructions for downloading. The address is: www.ibr.tcu.edu/pubs/datacoll/datacoll.html. All TCU forms may be used free-of-charge, with the sole request that IBR be informed about applications and results. For additional information, e-mail at ibr@tcu.edu. ■

Research Highlights, continued from page 5.

the CETOP project by **Drs. Urvashi Pitre, Sandra Dees, Donald Dansereau, and Dwayne Simpson**, “Mapping techniques to improve substance abuse treatment in criminal

justice settings,” which details the impact of mapping-enhanced counseling with 380 probationers mandated to residential substance abuse treatment. ■

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