



National Institute of Justice

Research Preview

Jeremy Travis, Director

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A Corrections-Based Continuum of Effective Drug Abuse Treatment

A summary of a presentation by Dr. James A. Inciardi, University of Delaware

Drug-involved offenders who participate in a continuum of drug treatment — prison-based treatment followed by treatment in a work-release center — have lower rates of drug use and recidivism than drug-involved offenders who participate in a shorter treatment program, according to the preliminary findings of a study conducted by researchers at the University of Delaware.

The findings indicate that at 18 months after release, drug offenders who received 12–15 months of treatment in prison followed by an additional 6 months of drug treatment and job training were more than twice as likely to be drug-free than offenders who received prison-based treatment alone. Furthermore, offenders who received both forms of treatment were much more likely than offenders who received only prison-based treatment to be arrest-free 18 months after their release (71 percent compared to 48 percent).

Program overview

Prison-based treatment. The State of Delaware, with the support of the Bureau of Justice Assistance, in 1987 established the Key, a prison-based treatment program for drug-involved offenders at a men's maximum security prison. The Key is a therapeutic community, a self-contained treatment environment separated from the drugs and violence often found in prisons. The therapeutic community model is based on the philosophy that drug abuse is a disorder of the whole person and that treatment should therefore focus on building an offender's self-esteem and changing his values and attitudes.

Delaware's Department of Corrections immediately found benefits in the program: the Key was the cleanest, safest, most trouble-free section of the prison. The program now is funded by the State and currently has 140 beds. All

participants are volunteers and are eligible if they are within 18 months of their work-release dates or parole eligibility.

Until 1994, Delaware did not have prison-based treatment for drug-involved female offenders. With funding from the Center for Substance Abuse Treatment, University of Delaware researchers in February 1994 initiated a therapeutic community for women in a 50-bed facility at the Women's Correctional Institution in New Castle, Delaware. The facility, called the WCI Village, now is near full capacity.

Transitional care. Earlier studies of the effectiveness of long-term residential treatment indicated that without aftercare and followup support, offenders were likely to relapse into drug use and crime. The studies, which evaluated the Federal Bureau of Prisons' drug treatment programs in public health service hospitals in Lexington, Kentucky, and Fort Worth, Texas, revealed a 96-percent relapse rate among treatment participants. Based on these and numerous other studies, the researchers at the Key program anticipated that 12–15 months of prison-based treatment would be insufficient.

With the support of the National Institute on Drug Abuse (NIDA), the researchers established the Crest Outreach Center at the Plummer Center, a conventional work-release center in Delaware. Crest is the first therapeutic community work-release center in the United States. After release from the Key program, offenders enter the Crest Center for 6 months of treatment and job training in a therapeutic community setting.

Crest requires participants to stay in the center for the first 3 months of treatment while they learn how to look for a job, prepare resumes, and interview. This approach

FINDINGS

	6-Month Followup		18-Month Followup	
	Drug-Free	Arrest-Free	Drug-Free	Arrest-Free
Comparison Group	35%	62%	19%	30%
Key Group	70%	82%	30%	48%
Crest Group	85%	85%	45%	65%
Key-Crest Group	95%	97%	76%	71%

contrasts with conventional work-release programs where participants immediately begin looking for work during the day and spend only evenings and weekends at the work-release center. Crest admits offenders who have not participated in the Key program and have not received prior treatment, as well as female offenders who may or may not have received prior treatment.

The treatment staff at Crest is a mix of counseling professionals and recovering drug users. The correctional presence at Crest is limited; a correctional officer walks through the facility three times a day to take count, and the Plummer Center broadcasts announcements to Crest on its public address system.

Aftercare. After completion of the transitional treatment program at Crest, participants continue treatment in an outpatient aftercare program for 6 months, returning to Crest once a week for group support meetings. At the end of the 6 months they attend a “marathon encounter weekend” of group therapy.

Research design

Researchers conduct interviews with offenders before they enter the Key program about their past drug use, sexual activity, and criminal behavior. To determine an offender’s progress in treatment, researchers also conduct clinical interviews at the beginning and completion of the Key program. With support from NIDA, researchers in 1992 began conducting followup interviews at 6 and 18 months after completion of the Key program. The researchers also conduct urine and blood tests to check for drug use and exposure to HIV.

The followup interviews involve four groups of offenders: a comparison group, which received no treatment; a Key group, which received only prison-based treatment; a

Crest group, which received only treatment at the work-release center; and a Key-Crest group, which received treatment in both the Key and Crest programs.

Initial findings indicate that a longer and more comprehensive continuum of treatment increases the likelihood that an offender will be drug- and arrest-free in the long term:

- Although after 6 months the Crest group’s progress was almost as good as the Key-Crest group’s, after another year, its progress had declined in comparison with that of offenders who had received the longer continuum of treatment.
- Members of the comparison and Key groups were less likely to be drug- and arrest-free at 6 and 18 months after release than the groups of offenders who received longer periods of treatment.
- At 18 months after release, there was no statistically significant difference between the comparison group and the Key group.

The latter two findings may stem from the Key and comparison groups’ participation in a conventional work-release program that gave them more freedom but put them at much greater risk of exposure to drugs and opportunities for criminal activity.

Continuing efforts

The researchers have received funding from NIDA to enhance the aftercare program to include more “booster sessions,” or weekend group therapy meetings. Each participant who completes the Crest program will attend weekend booster sessions at 6 and 12 months after leaving the Crest program. Funding from NIDA also will support continued followup studies of the program participants through 2005.

James A. Inciardi, Ph.D., is Director of the Center for Drug and Alcohol Studies at the University of Delaware. Dr. Inciardi presented his research to an audience of researchers and criminal justice professionals as part of NIJ’s Research in Progress Seminar Series. A 60-minute VHS videotape, *A Corrections-Based Continuum of Effective Drug Abuse Treatment*, is available for \$19 (\$24 in Canada and other countries). When ordering, please refer to NCJ 152692.

Use the order form on the next page to obtain this videotape and any of the other videotapes now available in the series.

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