

## **Dodge-Fillmore-Olmsted Methamphetamine Project**

### **Evaluation results from participants served July 2008-June 2010**

#### ***Summary***

The Dodge-Fillmore-Olmsted (DFO) Methamphetamine Project is a corrections-based substance abuse treatment and recovery program established in 2004 and comprised of three programs: Crossroads, Odyssey, and Journey. Crossroads is a jail-based pre-treatment component, focused on stabilizing incarcerated offenders prior to outpatient treatment and introducing recovery concepts. Community-based treatment is supported by two gender-specific programs: Odyssey, for men, and Journey, for women.

The program model incorporates a number of components to support participants in their recovery process, including cognitive behavioral therapy, behavioral incentives, and frequent drug testing, over a longer period of time than generally provided through standard treatment programs. To meet the needs of all clients, the program has established partnerships with a variety of local community organizations and individual service providers.

This report utilizes data collected by DFO program staff to describe the characteristics of the participants, summarize the types of services being offered, and examine the impact of the treatment programs on the participating offenders.

#### ***Participant characteristics at intake***

Between July 1, 2008 and June 30, 2010, a total of 188 participants were enrolled in Crossroads, Odyssey, Journey, or a combination of programs. Most program participants were White (80%), male (71%), and single (77%). On average, participants were 28 years old. More than half (52%) of the participants had at least one child.

**A majority of the participants had completed at least a high school education.** Almost two-thirds of participants (66%) had completed at least a high school education.

**Few participants were employed before entering Crossroads.** Less than one-quarter of the participants (24%) were employed in the 30 days prior to incarceration.

**Over half of the female participants reported being victims of domestic violence.** A total of 35 participants reported being a victim of domestic violence, including 58 percent of women and 16 percent of men. A number of women also reported being victims of sexual assault and other violence, including physical and emotional abuse.

**Over half of the participants with intake information available were living in stable housing in the 30 days prior to incarceration.** Participants were most likely to be living with friends or family or renting an apartment or home. However, this information was not available for over one-third of participants.

**One-quarter of the offenders were enrolled in public health insurance programs prior to intake.** One-quarter of the participants with information available received Medical Assistance or MinnesotaCare, while fewer received financial support through General Assistance/MFIP, welfare, or housing assistance through the Section 8 program.

**Over two-thirds of the participants entered Crossroads after being charged with a drug-related crime.** Corrections staff categorized over two-thirds of the crimes committed by participants as drug-related. Most crimes (96%) were felony-level offenses, but fewer (13%) were violent offenses.

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**Most participants had been convicted of at least one crime prior to enrolling in Crossroads.** Over 90 percent of the participants had been convicted of one or more crimes prior to their current offense, and nearly two-thirds had a felony record. Somewhat fewer women had a past criminal record than men. Men were convicted of their first crime as juveniles more often than women. Most participants had served time in jail or prison prior to their current arrest.

**Participants often identified stimulants as their primary drug of choice.** Nearly half of the participants identified methamphetamine their primary drug of choice. This was consistent among both men and women. Other common drugs preferred by participants included cocaine, alcohol, and marijuana.

**Most participants had attempted substance use treatment prior to enrollment into Crossroads.** Of the 168 participants with available information about prior treatment attempts, three-quarters had enrolled in inpatient or outpatient substance abuse treatment in the past. Over 60 percent of the participants had not experienced more than six months of drug abstinence prior to incarceration.

### ***Participant outcomes***

Since July 2008, 55 individuals were discharged from the Odyssey program and 34 were discharged from Journey, with approximately half successfully completing the program (51% of Odyssey participants, 47% of Journey participants).

#### **Services received**

**Successful program graduates were enrolled in Odyssey or Journey for nearly one year.** Overall, the 89 individuals who were discharged from Odyssey or Journey participated in the program an average of 227 days. However, the length of program participation varied widely, from 12 to 730 days. On average, successful graduates were enrolled in Odyssey or Journey for significantly longer periods than those discharged unsuccessfully. The average length of stay was significantly longer for Odyssey than Journey participants.

**On average, men participated in a greater number of group sessions led by chemical dependency counselors than women.** Group sessions are an ongoing component of the treatment and aftercare services DFO program participants receive. Participants in the outpatient programs attended an average of 85 hours of group sessions. Men participated in more hours of group sessions than women (95, compared to 65 hours for women). However, individual participation in group sessions varied considerably. Not surprisingly, participants who successfully completed the program participated in nearly twice as many hours of group sessions than those who did not (an average of 109 hours of group sessions for successful graduates, compared to 60 hours among unsuccessful participants).

**Across most areas, fewer women received supplemental services than men.** Men were more likely to be referred for counseling and a variety of other services (e.g., STD/HIV screening, life skills classes) than women. Exceptions to this generalization are in the areas of medication prescription and monitoring, medical services, and dental services. It is not known whether these differences in service utilization are a result of different needs between men and women, or the availability of services in the two programs.

#### **Drug use**

**Most drug tests administered to the program participants were negative.** A total of 871 drug tests were administered for the 89 participants discharged from Odyssey and Journey during the past year. Most of the tests (96%) were negative. Combined, 80 percent of those discharged did not have any positive drug tests while enrolled in Odyssey or Journey.

**However, drug testing does not deter all drug use.** At discharge, 51 percent of Odyssey participants and 32 percent of Journey participants reported they had used alcohol or drugs while enrolled in the program. In addition, approximately two in five participants (44%) had at least one program violation related to drug use.

**Most participants (88%) were discharged without being arrested for any new charges.** Among the 12 participants who were arrested while enrolled, six were arrested for drug-related offenses.

### **Support, housing, employment**

**Participants had greater formal and informal support at discharge.** In general, program participants had similar types of support at intake and discharge. However, on average, the number of people (informal and formal supports) participants identified as strong supporters of his/her recovery increased significantly over time. These gains were made by participants regardless of which program they were involved in or whether they successfully completed the program.

**Overall, corrections staff categorized the housing situation as stable and sober for nearly two-thirds of the participants at discharge.** There were no significant differences in housing status at discharge by program. However, successful program graduates were significantly more likely to have stable housing at discharge than those who did not complete the program (98%, compared to 27% of unsuccessful participants).

**Nearly half of the participants were employed at discharge.** A total of 43 participants were employed at discharge. Participants who successfully graduated from the program were significantly more likely to be employed than those who were discharged unsuccessfully. Seven of the participants were attending a post-secondary school at discharge, and one Journey participant earned a GED while enrolled in the program.

### **Recidivism risk**

**Significant reductions in risk were observed in key domains among participants who successfully completed treatment.** The Level of Service Inventory-R (LSI-R) is used as pre-post tool to assess changes in service needs and recidivism risk over time. Significant reductions in average LSI-R scores, indicating fewer concerns or needs, were noticed in a number of domains for successful program graduates, including financial problems, drug/alcohol abuse, education and

employment, family/marital issues, and accommodations. In contrast, unsuccessful program participants' scores remained the same or increased slightly. Overall, more than one-quarter of the participants had a lower risk of recidivism after their involvement in the program.

**Participants with lower LSI-R scores at intake were more likely to successfully graduate from the program.** Preliminary data suggests participants with higher LSI-R scores at intake may require more intensive services to successfully complete the program. However, it is important to note a number of participants did not have an intake LSI-R assessment.

**Individuals with higher concerns in areas of education and employment and attitudes/ orientation, may require more intensive services to successfully complete the program.** Preliminary data suggest individuals who did not successfully complete the program had significantly higher scores at intake than program graduates in areas of education and employment, attitudes/orientation, and total score. There were no significant differences in outcomes based on the intensity of alcohol or drug use at intake or criminal history.

### ***Participant satisfaction***

**Overall, the vast majority of participants reported making changes or developing skills that will help them prevent relapse.** Satisfaction surveys were completed by 41 Odyssey/Journey participants and graduates. All participants “strongly agreed” or “agreed” that they are looking for ways to keep from slipping back into old patterns, actively doing things now to cut down or stop their use of drugs, and want to avoid going back to past drug problems. Across most areas, women were more likely to “strongly agree” with these items than men.

**On average, participants found all program components to be “very helpful” or “somewhat helpful.”** The program elements that received the highest average ratings were submitting UAs regularly and participating in sober activities. While still receiving ratings indicating the service was helpful to most participants, the two program components with the lowest ratings were receiving counseling

and getting help while seeking a job. A number of participants indicated they were interested in more support group meetings and social activities.

### ***Conclusions and recommendations***

The data included in this report demonstrate a number of positive outcomes, but also indicate areas where program improvements could be made. Wilder Research suggests DFO staff consider the following recommendations to further enhance the effectiveness of the program and streamline current data collection activities.

- **Explore whether differences in service utilization between men and women reflect gender-specific programming needs or unintended discrepancies in service delivery approaches.** The service utilization data presented in this report demonstrate Journey participants are enrolled for shorter periods of time and referred to fewer services than Odyssey participants. Despite these differences, the outcome measures currently used to examine program effectiveness are fairly similar among participants of both programs. Further exploration to determine how long it takes participants from both programs to attain key measures of success may be helpful in determining the most appropriate program length for both Odyssey and Journey.
- **Consider using trauma-informed service approaches to address the needs of female participants.** A number of women who participate in Journey have experienced past trauma through domestic violence, sexual assault, and other physical/emotional abuse. It may be necessary to consider ways for program staff to receive training on trauma-informed services to assess whether past trauma has occurred and consider the need for additional services.
- **Use case reviews to develop program guidelines and consider appropriate service levels based on recidivism risk and observed needs.** Data gathered to date suggests that participants with low or moderate levels of recidivism risk at intake, based on the LSI-R score, are successfully completing the program, while results are mixed for participants at higher risk of recidivism. A case review approach could provide staff with opportunities to review elements of the program that seem to be working well for a sample of participants with high intake scores and identify strategies to address unmet participant service needs or increase service intensity.
- **Continue to offer opportunities to participate in social activities, support groups, and other community-based programs.** While the results of the satisfaction survey completed by program participants were overwhelmingly positive, a number of participants requested having more opportunities to participate in social activities or support groups. Connections with a broader array of more geographically dispersed community-based organizations may be needed to create new opportunities for Journey and Odyssey participants to expand their sober support networks.
- **Revisit current evaluation goals and approaches to streamline data collection activities and reduce paperwork burden among staff.** At this point in the evaluation, it may be helpful to reassess which outcome measures have been most useful for program staff in understanding the programs strengths and challenges. Data collection forms can then be modified to focus on these priority areas.

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#### **For more information**

This summary presents highlights of the report, *Dodge-Fillmore-Olmsted Methamphetamine Project: July 2008-June 2010 Evaluation Report*. For more information about this report, contact Melanie Ferris at Wilder Research, 651-280-2660.

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