

# Arizona Criminal Justice Commission

## Drug Control and System Improvement Publication

Our mission is to sustain and enhance the coordination, cohesiveness, productivity and effectiveness of the Criminal Justice System in Arizona



## *Residential Substance Abuse Treatment Program*

**2003**

**2004**

THE STATE OF ARIZONA

2003 STATE ANNUAL REPORT  
RESIDENTIAL SUBSTANCE ABUSE TREATMENT PROGRAM  
ACTIVITIES

Presented to:

The U.S. Department of Justice  
Office of Justice Programs  
Bureau of Justice Assistance

By:

The Arizona Criminal Justice Commission

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*This document is available in alternative formats by contacting the Commission Office at (602) 364-1146.*

# Arizona Residential Substance Abuse Treatment

## Annual Report FFY 2003

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(Mike Doohan, Lexicor)

The Arizona Criminal Justice Commission is assisted in the review of applications for Residential Substance Abuse Treatment (RSAT) grants by Ms. Christina A. Dye, Substance Abuse Services Chief, and staff of the Arizona Department of Health Services, Behavioral Health & Substance Abuse Division, 2122 E. Highland Ave. Phoenix, AZ 85016-4739. The expertise of their staff in helping the Commission ensure that proposed substance abuse treatment programs are viable and consistent with treatment services offered throughout Arizona is deeply appreciated.

## Arizona Department of Corrections Men in Recovery

The “Men in Recovery” (MIR) program places special emphasis on reentry and family reunification during and after treatment. The program’s format is a “stages of change” model which recognizes the participant’s continuum of awareness, motivation and readiness to take positive action. It is designed as a four-phase treatment and pre-release program for ninety-two male inmates. Male inmates eligible for “Men in Recovery” must meet security eligibility criteria and must be at least twelve months from their release date. The program’s goals are to: 1) ready participants for treatment (Phase I); 2) deliver substance abuse treatment in conjunction with family reunification activities (Phase II); 3) provide intensive relapse prevention and pre-release planning for all participants through a contracted case manager (Phase III); and 4) deliver after release services with structured case management for men eligible for services under Proposition 200 funding (Phase IV). All inmates participating in Phase I, II and III are tested for drugs once a month. The male participants are separately housed at the Arizona State Prison Complex (ASPC) Tucson Manzanita Unit.

The Phase I treatment component uses curriculums designed specifically for substance criminal offenders and is delivered by certified substance abuse counselors. Inmates participating in the program have work assignments, education classes, vocational training and treatment activities. Phases I and II provide skills for interaction with family members and offer several opportunities for family encounters. These programs reinforce the unity of family, specifically men’s role as parents. One program is designed and delivered by a qualified academic service provider and focuses on parenting skills, rebuilding family relationships and communication. Some of the course topics include personal and family role development, parent/child communications, conflict resolution, personal and family financial security and domestic violence. The program offer labs that provide interaction between fathers and children as well as other family members.

The following is an overview of the “Men in Recovery” program’s phases:

Phase I: This is an eight week pre-treatment stage that readies the participant for structured treatment. This phase is a workshop called *Awakening*. The prime objective of the workshop is for each individual in recovery to look inward and take full responsibility for what they do with themselves. Through a group process, individuals are asked to set aside the mind-set of blaming others for their present situation, and to set up new positive feelings about who they are and what they can become. This program serves as a preparation for the formal substance abuse treatment and education phases of the Arizona Department of Corrections Office of Substance Abuse Services (OSAS) program. The *Awakening* workshop has as its core message how individual emotions and

emotional development, going back to childhood and adolescence, need to be examined and addressed. It then proposes concrete methods for each individual to integrate this new awareness into everyday life. Office of Substance Abuse Services seeks to maximize this newly internalized shift in attitude and expands on it with a program that can offer the participant the real possibility of a lifestyle free of substance abuse.

Phase II: This thirty-two week component focuses on intense structured treatment. The curriculum consists of two main programs: The *New Direction* program by Hazelden, and *The Relaxation and Stress Reduction Workbook*. The *New Direction* treatment curriculum is a cognitive-based model developed by Hazelden in partnership with the Minnesota Department of Corrections, and includes six modules; Inmate Orientation, Criminal and Addictive Thinking, Drug and Alcohol Education, Socialization, Relapse Prevention, Release and Reintegration Preparation. This program includes two days of training for treatment staff, was designed for use with offenders in the criminal justice system and meets all RSAT requirements. *The Relaxation and Stress Reduction Workbook*, authored by Martha Davis, is a well recognized program designed to give clients the cognitive tools necessary to successfully focus on recovery and change in their lives. These two curricula are the primary resource for the program.

Phase III: To ensure that gains made during in prison treatment continue release, an after release component is essential. After release services are coordinated between the correctional treatment program and human service and rehabilitation prior to release. The Department believes that blending the in-prison treatment stage with specialized pre-release planning will improve enrollment and engagement in community-based treatment. For this reason Phase III begins two months prior to the participant's release date so that pre-release planning and case management can begin. The program staff facilitates participant introduction to the Treatment Assessment Screening Center (TASC) case manager. This case manager will assist the participant in the community re-entry process by participating in relapse prevention activities and intense re-entry planning. This planning identifies treatment and other service needs such as drug-free housing, job placement services and social service referrals to community based programs.

Phase IV: This phase begins when the inmate is released from prison. To reduce the likelihood of relapse, long-term relapse management programs and after release need to be available. The participants released to community will be directly linked to the Men's Treatment Network (MTN). The Network in conjunction with the Department of Corrections parole officer will closely manage the participant's case for up to twelve months.

Highlights from the past fiscal year:

- The program hired personnel to fill three (3) substance abuse counselor positions.
- Funding was provided this period to add one case manager position.
- The program enhanced services through inclusion of the Face the Future Relapse Prevention Program, parenting classes offered by Pima Community College, and Family Labs offered to participants and family members through a contract with Pima Community College.
- In response to the need for voluntary participation, a recruitment presentation was developed and Correctional Addiction Officers were trained to deliver the program at other geographical units.
- As a result of the above effort, the program ended the year with one-hundred percent (100%) bed utilization.
- Enrolled, assessed and completed treatment plans for eleven (11) clients.

After Release Services Provided:

- All after release services can be arranged through the assigned Substance Abuse Counselor and Community Corrections parole staff. Counselors typically assist participants in gaining entry to half-way houses in the Phoenix and Tucson metropolitan areas. After release counseling services are offered through contracts with the Correctional Officer Offender Liaison (COOL).

Criteria for entrance into the RSAT Program:

- Participants are selected based on their public and institutional risk factors, should be within 12 months from their earliest release, and demonstrate a need for services through an Arizona Department of Corrections substance abuse classification screening and the Addiction Severity Index Multimedia Version. Program evaluation is based on outlined goals and objectives. The following is the current status of those objectives:

<b>Goals</b>	<b>Objectives</b>	<b>Update</b>
Goal #1: Clinically assess all incoming program participants	Objective #1: Assess all inmates within 30 days of beginning the program	<b>Approaching Objective:</b> Objective has been met until recently, based on influx of new recruitments
Goal #2: Train all staff assigned to the program in substance abuse and addiction	Objective #1: All staff, including officers assigned to work the MIR program will receive training and information regarding addiction	<b>Met Objective-MIR Staff:</b> Program staff currently meet all training requirements <b>Unable to Meet Objective-Security Staff:</b> Due to program implementation issues and security staff changes, this objective not met
Goal #3: At least 90% of the program participants will be drug and alcohol free while participating in the program	Objective #1: Conduct monthly drug testing on all participants.	<b>Met Objective</b>
	Objective #2 Develop an incentive program for inmates who remain alcohol and drug free while participating in the program	<b>Pending:</b> The Manzanita Unit Deputy Warden had agreed to allow inmates with negative UA results extra use of the inmate phone system and is in development discussion stage
Goal #4 Provide program participants with opportunities that focus on family reunification and will assist them in community re-entry	Objective #1 Provide in-house programs that develop skills to interact with family members	<b>Met Objective:</b> Family Management classes and labs begun this year
	Objective #2 Develop a transitional plan	<b>Met Objective:</b> MIR counselors are currently assisting inmates to obtain transitional services until a caseworker is hired

<b>Goals</b>	<b>Objectives</b>	<b>Update</b>
	Objective #3 Inmates in Phase III will develop a written relapse prevention plan	<b>Pending:</b> Caseworker position still vacant. Inmate receive relapse prevention in Phase II
	Objective #4 Establish a mentor program to assist participants with re-entry	<b>Pending:</b> Currently looking for community resources
Goal #5 Program participants participating in Phase IV of the program will remain drug free for at least 90 days after release	Objective #1 Conduct monthly drug testing on all participants	<b>Met Objective</b>
	Objective #2 Case Manager will track participant progress in the community. Measurement: UA documentation	<b>Met Objective:</b> Substance abuse counselors are tracking released participants through their parole officer

Technical assistance needed for program implementation:

- No technical assistance is needed to date

GRANTEE AGENCY: ARIZONA DEPARTMENT OF CORRECTIONS  
 PROJECT TITLE: MEN IN RECOVERY  
 PROJECT START DATE: 7/1/2002  
 PROJECT GRANT NUMBER: SAT-04-109  
 REPORT PERIOD: FFY03 – 10/1/2002 – 9/30/2003

Number of offenders admitted to the grant supported treatment program this Federal Fiscal Year:

	FFY 2003 (10/01/2002 - 9/30/2003)	Since start of project to 9/30/2003
White Males	21	29
Black Males	10	12
Hispanic Males	10	16
Native American Males	2	2
Other Males	0	0
Total Males	43	59

Number of male offenders successfully completing the grant supported treatment program:

	FFY 2003 (10/01/2002 - 9/30/2003)	Since start of project to 9/30/2003
Total	11	11

Number of male offenders who:

	FFY 2003 (10/01/2002 - 9/30/2003)	Since start of project to 9/30/2003
Dropped out of program	7	8
Terminated from program	11*	11

Number of male offenders who successfully completed an aftercare program:

	FFY 2003 (10/01/2002 - 9/30/2003)	Since start of project to 9/30/2003
Total	0	0

\*25 % of the inmates admitted to the program were terminated. Of the terminations, two were transfers and the remaining nine were the results of disciplinary action. During this period, there was a serious incident that occurred and resulted in reclassification and movement of inmates.

Requested Information ( <b>Please provide one evaluation form for each grant funded project</b> )		FFY 2003 10/01/2002- 9/30/2003	Since start of project to 9/30/2003
1.	Number of previously funded RSAT beds continued during this report period	92	
2.	Number of new treatment beds added with RSAT grant funds during this report period.	0	
3.	Number of treatment beds funded through other sources, but enhanced with RSAT funded services.	N/A	N/A
4.	Number of days of residential treatment provided.	365	455
5.	Total number of male adult offenders entering an RSAT grant funded treatment program.	43	59
6.	Total number of female adult offenders entering an RSAT grant funded treatment program.	0	0
7.	Total number of offenders successfully completing the residential program.	11	11
8.	Average length of stay in the residential program, for those completing the program (in days).	330	330
9.	Total number of offenders that dropped out of the residential program.	7	8
10.	Total number of offenders that were terminated from the residential program.	11	11
11.	Total number of offenders that successfully completed the after care program.	0	0
12.	Of the offenders that completed the program, the percentage that have remained drug free during the residential program.	100%	100%
13.	Of the offenders that completed the program, the percentage that have remained drug free during the aftercare program.	91%	91%
14.	Of the offenders that completed the program, the percentage that have remained arrest free during the aftercare program.	100%	100%
15.	Of the offenders that completed the program, the percentage that have remained arrest free following release from aftercare, if known. ( <b>one year follow-up</b> ).	N/A	N/A
The following questions are for those programs in existence for two years or more:			
16.	Average cost per day for the residential program.	N/A	N/A
17.	Average cost per day for the aftercare program	N/A	N/A

## Arizona Department of Corrections Progressive Recovery

The Arizona Department of Corrections Substance Abuse Treatment (OSAS-RSAT) and Inmate Mental Health Sex Offender Program (IHS) is managed distinctly, but administered therapeutically in a manner that fosters mutual support and overarching goals. Inmate Mental Health Sex Offender staff work closely with Office of Substance Abuse Services (OSAS) RSAT staff. All inmates in the Cook Unit receive an introduction to Sex Offender Treatment (termed Phase I) and they may choose to participate in Phase II. Phase II encompasses the Substance Abuse Treatment Program. The OSAS-RSAT program is comprised of a ten to twelve month structured treatment program, plus ten closely related psycho-educational courses organized into five instructional blocks. Participants in Phase II are initially screened for OSAS-RSAT participation by Substance Abuse Treatment Needs scores of 3 or higher (with 5 being the most acute need for intervention and treatment). All OSAS-RSAT participants are placed in specialized housing with IHS program participants.

Participants in the program are initially screened by length of sentences and by the Alcohol/Drug classification scores of 3 or higher. All Progressive Recovery participants are placed in specialized housing. Once the inmate has been oriented and enrolled in the voluntary program, he is given a pre-test, consent to treat form, a release of information form, program guidelines and a psychological/social history.

Formal assessments using the Alcohol Addiction Severity Assessment (ASI) is conducted on every new participant. Once the assessment is complete, the inmates The following is an overview of the "Men in Recovery" program's phases:

Phase I: This phase is a readiness stage to prepare the participant for formal treatment. During once a week sessions, which last three hours, the inmate will examine individual emotions and emotional development through group exercises and experiences.

Phase II: This component begins formal treatment and places emphasis on a curriculum that educates the participant about cognitive behavior change, coping skills and an understanding of substance abuse addiction. Progressive Recovery is designed around a cognitive-behavioral treatment curriculum called *New Direction* and developed by Hazelden. It is a multi-format, multi-module program encompassing four modules called *Criminal and Addictive Thinking*, *Drug and Alcohol Education*, and *Socialization*. The fourth module, *Relapse Prevention*, is used in Phase III.

Phase III: The final twelve weeks of the curriculum addresses common relapse triggers and shows offenders how to create a crisis management plan to avoid a relapse. Structured case management, focused on transition, is conducted between the counselor and the participant.

Phase IV: In this phase inmates are placed in an ongoing substance abuse Continual Care Group Therapy Program until their release to the community. This group is held weekly and offers support group discussions and relapse prevention activities, utilizing the *New Direction* module *Release and Reintegration*.

Highlights from the past fiscal year:

- This funding year the program converted to the same curriculum used by the Men in Recovery program, *New Direction* published by Hazelden. The program also revised the assessment process by using the Addiction Severity Index MV tool.
- Recruitment continued to be an important issue during this time period. In response to this need, a list of eligible inmates was generated using release data from the Adult Information Management System.
- Correctional Addiction Officers were trained to deliver a “recruitment” presentation, this helped increase recent enrollments.

After Release Services Provided:

- All after release services are arranged through the assigned Substance Abuse Counselor and Community Corrections parole staff. After release counseling services are offered through contracts with the Correctional Officer Offender Liaison.

Criteria for entrance into the RSAT Program:

- Participants are selected based on their public and institutional risk factors and should be within 12 to 15 months from their earliest release.
- They should demonstrate a need for services through an ADC substance abuse classification screening and the Addiction Severity Index Multimedia Version.

<b>Goals</b>	<b>Objectives</b>	<b>Update</b>
<b>Goal #1: Clinically assess all incoming program participants.</b>	<p>Objective #1: All program participants will have an intake assessment completed within 30 days of beginning the program and assessments will be incorporated into the treatment plan for guiding the treatment process.</p> <p>Objective #2: The project will track and record the number of attendees completing each phase.</p>	<p>Implemented the Addiction Severity Index Multi-media Version. Continuing with 30 Day Assessments.</p> <p>During this evaluation period two inmates completed Phase II, and five inmates completed Phase III.</p>
<b>Goal #2: Train all staff assigned to the program in substance abuse and addiction.</b>	<p>Objective #1: All staff, including officers, assigned to work the MIR program will receive training and information regarding addictions.</p>	<p>Staff attended Southwest School for Behavioral Health Studies in August 2003, and completed all required ADC Refresher Training</p> <p>Security staff have not been trained due to Progressive Recovery's shortage of staff and vacant supervisory position.</p>
<b>Goal # 3: At least 90% of the program participants will be drug and alcohol free while participating in the program.</b>	<p>Objective #1: Conduct monthly drug testing on all participants.</p>	<p>All participants were drug tested during this evaluation period and no positive UA tests were reported.</p>
	<p>Objective #2: Develop an incentive program for inmates who remain alcohol and drug free while participating in the program.</p>	<p>Inmates who test negative for UA maintain all of their unit privileges.</p>
<b>Goal #4: Program Participants released under Community Supervision will remain drug free for at least 90 days after release.</b>	<p>Objective #1: Community Supervision participants will be drug tested after release.</p>	<p>A review of the Adult Information Management System indicated that none of the participants received a positive UA after release.</p>
	<p>Objective #2: Program participants will be tracked through Community Supervision and those not on supervision will be asked to contact the in-prison case manager to self-report progress in the community. This will occur on a volunteer basis.</p>	<p>Substance Abuse Counselors are tracking released participants through their parole officer. A review of the Adult Information Management System illustrates that out of twenty seven releases during this rating period, only seven were returned to custody for technical violations.</p>

Technical assistance needed for program implementation:

- No technical assistance is needed to date

GRANTEE AGENCY: ARIZONA DEPARTMENT OF CORRECTIONS  
 PROJECT TITLE: PROGRESSIVE RECOVERY  
 PROJECT START DATE: 7/1/1999  
 PROJECT GRANT NUMBER: SAT-04-107  
 REPORT PERIOD: FFY03 – 10/1/2002 – 9/30/2003

Number of offenders admitted to the grant supported treatment program this Federal Fiscal Year:

	FFY 2003 (10/01/2002 - 9/30/2003)	Since start of project to 9/30/2003
White Males	9	172
Black Males	3	18
Hispanic Males	10	66
Native American Males	0	0
Other Males	0	0
Total Males	22	256

Number of male offenders successfully completing the grant supported treatment program:

	FFY 2003 (10/01/2002 - 9/30/2003)	Since start of project to 9/30/2003
Total	1	83

Number of male offenders who:

	FFY 2003 (10/01/2002 - 9/30/2003)	Since start of project to 9/30/2003
Dropped out of program	4	61
Terminated from program	0	2

Number of male offenders who successfully completed an aftercare program:

	FFY 2003 (10/01/2001 - 9/30/2003)	Since start of project to 9/30/2003
Total	N/A	N/A

Requested Information (Please provide one evaluation form for each grant funded project)		FFY 2003 10/01/2002- 9/30/2003	Since start of project to 9/30/2003
1.	Number of previously funded RSAT beds continued during this report period	80	
2.	Number of new treatment beds added with RSAT grant funds during this report period.	0	
3.	Number of treatment beds funded through other sources, but enhanced with RSAT funded services.	0	0
4.	Number of days of residential treatment provided.	365	1185
5.	Total number of male adult offenders entering an RSAT grant funded treatment program.	22	256
6.	Total number of female adult offenders entering an RSAT grant funded treatment program.	0	0
7.	Total number of offenders successfully completing the residential program.	1	83
8.	Average length of stay in the residential program, for those completing the program (in days).	270	N/A
9.	Total number of offenders that dropped out of the residential program.	4	61
10.	Total number of offenders that were terminated from the residential program.	0	2
11.	Total number of offenders that successfully completed the after care program.	0	0
12.	Of the offenders that completed the program, the percentage that have remained drug free during the residential program.	100%	98%
13.	Of the offenders that completed the program, the percentage that have remained drug free during the aftercare program.	N/A	N/A
14.	Of the offenders that completed the program, the percentage that have remained arrest free during the aftercare program.	N/A	N/A
15.	Of the offenders that completed the program, the percentage that have remained arrest free following release from aftercare, if known. <b>(one year follow-up)</b> .	N/A	N/A
The following questions are for those programs in existence for two years or more:			
16.	Average cost per day for the residential program.	N/A	N/A
17.	Average cost per day for the aftercare program	N/A	N/A

## **Arizona Department of Corrections Women in Recovery**

The “Women in Recovery” (WIR) program places special emphasis on reentry and family reunification during and after treatment. The program’s format is a “stages of change” model which recognizes the participant’s continuum of awareness, motivation and readiness to take positive action. It is designed as a four phase gender responsive treatment and pre-release program for ninety-six female inmates. Female inmates eligible for “Women in Recovery” must meet security eligibility criteria and be twelve months from their release date. The program’s goals are to: 1) ready participants for treatment (Phase I); 2) deliver substance abuse treatment in conjunction with family reunification activities (Phase II); 3) provide intensive relapse prevention and pre-release planning for all participants through a contracted case manager (Phase III); and 4) deliver afterrelease services with structured case management for women eligible for the Women’s Treatment Network (Phase IV). All inmates participating in Phase I, II and III are tested for drugs once a month. The female participants are separately housed at the Arizona State Prison Complex (ASPC) Perryville-San Pedro Unit.

The Phase I treatment component, uses curricula designed specifically for substance abusing women in the criminal justice system and is delivered by certified substance abuse counselors. Female inmates participating in the program have work assignments, education classes, vocational training and treatment activities. The Phase II and III provide the skills for interaction with family members and offer several opportunities for family encounters. These programs reinforce the unity of family and the woman’s role as a parent. One program is designed and delivered by a qualified academic service provider and focuses on parenting skills, rebuilding family relationships, and communication. Some of the course topics include personal and family role development, parent/child communications, conflict resolution, personal and family financial security, domestic violence and distant parenting. The program offers labs that provide interaction between mothers and children as well as other family members. This session begins in mid-treatment and extends into Phase III so family activities are occurring close to release.

Developing community partnerships is critical to the “Women in Recovery”. The Corrections Department has joined with the Arizona Cactus Pine Girl Scout Council to provide the “Girl Scouts Beyond Bars” program. This program offers the opportunity for incarcerated mothers and their daughters to bond while participating together in girl scouting activities inside the prison. Mothers and daughters meet twice a month on Saturdays. When not meeting with their mothers, the daughters participate in community troops. This is an opportunity for women in recovery to understand that they serve as models to their daughters.

The following is an overview of the “Women in Recovery” program’s phases;

Phase I: This is an eight week pre-treatment stage that readies the participant for structured treatment. This phase called *Awakening* is delivered by the staff of the Huger Foundation, a local nonprofit organization that provides this program within the community. The foundation donated the entire cost of redesigning and delivering the program to the Arizona Department of Corrections. The correction staff is working closely with the Foundation to assist in the coordination of the program. The prime objective of the workshop is for each individual in recovery to look inward and take full responsibility for what they do with themselves. Through a group process, individuals are asked to set aside the internal mind-set of blaming others for their present situation, and to set up new positive feelings about who they are and what they can become. This program will serve as a preparation for the formal substance abuse treatment and education phases of Arizona Department of Corrections Office of Substance Abuse Services’ (OSAS) program. The *Awakening* workshop has as its core message how individual emotions and emotional development, going back to childhood and adolescence, need to be examined and addressed. It then proposes concrete methods for each individual to integrate this new awareness into everyday life. The Office of Substance Abuse Services seeks to maximize this newly internalized shift in attitude and expands on it with a program that can offer the participant the real possibility of a lifestyle free of substance abuse.

Phase II: This is a thirty two week program that begins with the participant’s screening and assessment using a standardized substance abuse assessment tool called Addiction Severity Index (ASI). This is a cognitive-based program using a treatment curriculum that is women-oriented using specially trained staff. Cognitive therapy is used to help women recognize errors and fallacies in their thinking. The curriculum used is designed for female offenders in the criminal justice system called “Helping Women Recover” authored by Dr. Stephanie Covington. The curriculum consists of two components: a *Facilitator’s Guide* and the *Women’s Journal*. The treatment activities are based on four curriculum modules (17 lessons) as well as processing groups.

Phase III: To ensure that gains made during in prison treatment continue after release, an afterrelease component is essential. Afterrelease services are coordinated between the correctional treatment program and human service and rehabilitation prior to release. The Department believes that blending the in-prison treatment stage with specialized pre-release planning will improve enrollment and engagement in community-based treatment. For this reason Phase III begins two months before the participants release date so that pre-release planning and the case management can begin. The program staff facilitates the participant introduction to the Treatment Assessment Screening Center (TASC) case manager. This case manager will assist the participant in the community re-entry process by participating in relapse prevention activities and intense re-entry planning. This planning identifies treatment and other

service needs such as drug-free housing, job placement services and social service referrals to community based programs.

Phase IV: This phase begins when the inmate is released from prison. To reduce the likelihood of relapse, long-term relapse management programs and afterrelease need to be available. The participants released to community supervision in the Phoenix metropolitan area will be directly linked to the Women's Treatment Network (WTN). The Network in conjunction with the Department of Corrections parole officer will closely manage the participant's case for up to twelve months.

Highlights from the past fiscal year:

- Eight (8) groups have been started with a total enrollment of 123 inmates.
- Of the above, twenty-five (25) have graduated.
- Of those who graduated, seventeen (17) have been released.
- An additional forty-four (44) are projected to graduate by the time this report is prepared.
- One-hundred percent of inmates in the program are UA tested every month. As of January 27, 2004, none have tested positive.
- Of the seventeen who were released, none have tested positive or have been returned to custody.

Afterrelease Services Provided:

- Before an inmate is released, a contact telephone or email is requested. Inmates are also asked to call the WIR office on a regular basis to check in on their progress.
- WIR staff monitors all contacts and they are recorded in the Master File.
- Information recorded includes categories such as employment, attending schooling, continuing treatment, use of social services agencies, and quality of family support.
- Calls to the offender's probation or parole officer are also noted in the Master File.
- The names of offenders who have completed community supervision are checked against the ADC AIMS system to ensure they have not returned to custody.

Criteria for entrance into the RSAT Program:

- Public Risk Needs score of 2 or lower.
- Institutional Risk Needs score of 3 or lower.
- Twelve (12) to eighteen (18) months to earliest release.
- Alcohol/Drug Treatment Need (A/D) score of 2 or higher
- Mental Health Needs (MH) score of 2 or lower (3's considered on a cases-by-case basis).
- Detainer score of 2 or lower.

<b>Goals</b>	<b>Objectives</b>	<b>Update</b>
Goal #1: Clinically assess all incoming program participants	Objective #1: Assess all inmates within 30 days of beginning the program	<b>Met Objective:</b> All eligible inmates have been assessed.
Goal #2: Train all staff assigned to the program in substance abuse and addiction, as well as how to work with female offenders	Objective #1: All staff, including officers assigned to work the WIR program will receive training and information regarding addiction	<b>Met Objective-MIR Staff:</b> Program staff currently meet all training requirements <b>Unable to Meet Objective-Security Staff:</b> The three shifts of security staff have not been available for formal training due to shortages. Working with the DW to implement in the future
	Objective #2: All staff working the WIR program will attend a "Working With Female Offenders" class.	<b>Met Objective:</b> Program staff currently meet all training requirements
Goal #3: At least 90% of the program participants will be drug and alcohol free while participating in the program	Objective #1: Conduct monthly drug testing on all participants	<b>Exceeded Objective:</b> No positive UA's for illegal drugs have been reported among participants since program inception
	Objective #2: Develop an incentive program for inmates who remain alcohol and drug free while participating in the program	<b>Pending:</b> Working with the DW to develop an appropriate incentive program that is compatible with a level 2 yard
Goal #4: Provide program participants with opportunities that focus on family reunification and will assist them in community re-entry	Objective #1: Provide in-house programs that develop skills to interact with family members	<b>Met Objective:</b> Family Reintegration classes and labs are operational

<b>Goals</b>	<b>Objectives</b>	<b>Update</b>
	Objective #2: Develop a transitional plan	<b>Met Objective:</b> WIR therapists are currently assisting inmates to obtain and develop transitional services until a case worker is hired
	Objective #3: Inmates in Phase III will develop a written relapse prevention plan	<b>Met Objective:</b> Case worker position is still vacant. Inmates, however, developed a written relapse plan in Phase II
	Objective #4: Establish a mentor program to assist participants with re-entry	<b>Met Objective:</b> All participants who complete, and have parole for 3 or more months, are referred to the COOL program. All participants who complete are also given information regarding the resources available with the Fresh Start program at the Women's Resource Center. This is an organization dedicated to supporting women in need, who are looking for self-sufficiency.
Goal #5: Program participants in Phase IV of the program will remain drug free for at least 90 days after release	Objective #1: Phase IV program participants enrolled in the Total recovery or community supervision programs will be drug tested on a weekly basis for the first 90 days after release	<b>Met Objective:</b> Community supervision has changed policy so that offenders are randomly tested. Offenders in program are tested once a week for the first month after release. The frequency of testing after that is from 1 to 4 times per month.
	Objective #2: Case managers will track Phase IV participants' progress in the community	<b>Met Objectives:</b> Case manager is currently in recruitment and services will begin within 60 days. Therapists are currently tracking caseload

GRANTEE AGENCY: ARIZONA DEPARTMENT OF CORRECTIONS  
 PROJECT TITLE: WOMEN IN RECOVERY  
 PROJECT START DATE: 7/1/2002  
 PROJECT GRANT NUMBER: SAT-04-108  
 REPORT PERIOD: FFY03 – 10/1/2002 – 9/30/2003

Number of offenders admitted to the grant supported treatment program this Federal Fiscal Year:

	FFY 2003 (10/01/2002 - 9/30/2003)	Since start of project to 9/30/2003
White Females	75	86
Black Females	11	12
Hispanic Females	15	19
Native American Females	6	6
Other Females	1	1
Total Females	108	124

Number of female offenders successfully completing the grant supported treatment program:

	FFY 2003 (10/01/2002 - 9/30/2003)	Since start of project to 9/30/2003
Total	13	25

Number of female offenders who:

	FFY 2003 (10/01/2002 - 9/30/2003)	Since start of project to 9/30/2003
Dropped out of program	26*	31
Terminated from program	4	4

Number of female offenders who successfully completed an aftercare program:

	FFY 2003 (10/01/2002 - 9/30/2003)	Since start of project to 9/30/2003
Total	0	0

\*24% of the inmates admitted dropped out of the program. Half was due to disciplinary problems the remainder was due to personal issues including conflicting work schedules, education and/or medical issues.

Requested Information ( <b>Please provide one evaluation form for each grant funded project</b> )		FFY 2003 10/01/2002- 9/30/2003	Since start of project to 9/30/2003
1.	Number of previously funded RSAT beds continued during this report period	96	
2.	Number of new treatment beds added with RSAT grant funds during this report period.	0	
3.	Number of treatment beds funded through other sources, but enhanced with RSAT funded services.	0	0
4.	Number of days of residential treatment provided.	365	365
5.	Total number of male adult offenders entering an RSAT grant funded treatment program.	N/A	N/A
6.	Total number of female adult offenders entering an RSAT grant funded treatment program.	107	123
7.	Total number of offenders successfully completing the residential program.	13	25
8.	Average length of stay in the residential program, for those completing the program (in days).	300	300
9.	Total number of offenders that dropped out of the residential program.	26	31
10.	Total number of offenders that were terminated from the residential program.	4	4
11.	Total number of offenders that successfully completed the after care program.	0	0
12.	Of the offenders that completed the program, the percentage that have remained drug free during the residential program.	100%	100%
13.	Of the offenders that completed the program, the percentage that have remained drug free during the aftercare program.	N/A	N/A
14.	Of the offenders that completed the program, the percentage that have remained arrest free during the aftercare program.	N/A	N/A
15.	Of the offenders that completed the program, the percentage that have remained arrest free following release from aftercare, if known. ( <b>one year follow-up</b> ).	N/A	N/A
The following questions are for those programs in existence for two years or more:			
16.	Average cost per day for the residential program.	N/A	N/A
17.	Average cost per day for the aftercare program	N/A	N/A

## **Arizona Department of Corrections RSAT Total Recovery (After Release)**

The Arizona Department of Corrections (ADC) RSAT Total Recovery program seeks to address the housing assistance and continuing treatment needs of recently released inmates. Housing assistance is one of the primary needs for many released inmates. At most half-way houses a monetary deposit is required and this can be the most difficult requirement for a newly released inmate trying to re-enter the community.

Continued treatment is another critical need for the substance abusing offender. The first ninety days after release are the most critical time during which the likelihood of an offender relapsing is very high. ADC 's Community supervision accesses the Drug Treatment Education Fund to provide continuous treatment for released offenders on community supervision. However, program linkages and continuity of care for RSAT participants is lost upon release from ADC. Even though they are referred to services, the offender may need continuing support and encouragement to make a successful transition. Direct community linkage to services, instead of merely referrals, will enable the prison-based case manager to offer a continuum of care in a sober living environment.

The ADC's RSAT program has been designed with an on-site manager who will directly work with the inmate early in the program to begin preparing the inmate for reentry at the point the individual begins formal treatment. Release planning will be an ongoing process between the case manager, offender, assigned parole officer and the counseling staff.

### **Program Goals and Objectives:**

All prison-based treatment programs will participate and complete ADC's transition education program.

1. Caseworkers assigned to the RSAT funded treatment programs will receive training on delivering the transition education program.
2. Caseworkers will present the transition education program to each participant .

All program participants' housing needs will be identified and those determined to be homeless will be linked to the RSAT funded transitional housing assistance program component.

1. Establish contract with service providers in Tucson and metropolitan Phoenix.

2. Case manager identifies, selects, and coordinates inmates' placement with community supervision.

All program participants continuing treatment needs are identified and linked to a contracted treatment provider for twelve (12) relapse prevention sessions.

1. Each inmate has a treatment plan individualized to their needs and coordinated with a community provider.
2. Case manager ensures the releasee is scheduled for twelve post-release sessions.
3. All release plans and post-release activity is staffed with the ADC's Community Corrections staff.

At least 90% of the program participants are to be drug and alcohol free while participating in the program.

1. The project conducts monthly drug testing on all program participants and tracks the number of positives and negatives on each participant.

**Performance Indicators and Evaluation:**

Information pertaining to the proposed activity is provided to the Arizona Criminal Justice Commission as required in the RSAT grant. Annual reports note program effectiveness through goal and objective progress reporting. Performance indicators used include parole violations, parole officer status reports, number of drug free days, data in any new offenses, employment and degree of family reintegration.

**Arizona Department of Juvenile Corrections  
Adobe Mountain School  
Freedom Unit**

Adobe Mountain School opened its Freedom treatment housing unit in December 1998, a 24 bed male youth facility located in North Phoenix modeled after the original recovery program at Adobe Mountain School.

The Recovery program helps male youth with moderate to severe drug problems whose length of stay is consistent with the grant requirements of six to twelve months in the secure care program. The program helps youth combat delinquent and substance abuse urges, using cognitive approaches. The program is based upon a treatment model developed by the Arizona Department of Juvenile Corrections Clinical Services' Chief of Counseling. The program components used are "cognitive restructuring". Research has shown that the cognitive restructuring approach to treatment helps youth reduce delinquent and drug abuse urges.

The cognitive program developed for RSAT continues to emphasize the interruption of delinquent thinking. The program uses group treatment of delinquency through the *Limit and Lead* group counseling activities developed by Dr. M. Ferrara.

For substance abuse urges, staff conducts individual counseling using cognitive interventions, such as *Rational Emotive Behavior Therapy* (REBT). The staff has received training and certification in REBT for Substance Abusing Adolescents from the Albert Ellis Institute of New York City. Dr. Ellis is known as the "grandfather of cognitive restructuring".

*The Seven Challenges* developed by Dr. Robert Schwebel are cognitive workbooks based on steps that help substance abusing youth make wiser decisions about themselves and drugs. The workbooks are based upon the original materials on the *States of Change* by Carlo C. DiClemente.

The core program is based on a special cognitive restructuring curriculum. It is described in the *Recovery Program Manual* for facilitators. It is put into practice in the bound *Recovery Individual Treatment Plan* (ITP) booklets for the youth in treatment. Youth begin the *Recovery ITP* at the Freshman Level, after they finish the generic *Orientation Level* (ITP) booklet that all youth complete during their first 30 days in secure care. The *Recovery ITP* helps youth through shifts in thinking, decide about their drug abuse and criminal patterns of behavior. The *Recovery ITP* includes delinquent offense cycle worksheets and *The Seven Challenges* activities so the youth are able to process their written work in group settings. *Thinking for a Change* worksheets are also included in the new *Recovery ITP*, so that youth can practice and develop social and coping skills.

*Thinking for a Change* is developed by nationally recognized consultants in conjunction with the Office of Juvenile Justice and Delinquency Prevention (OJJDP).

The program helps youth with moderate to serious drug problems interrupt offense cycles, drug abuse patterns that may trigger criminal acts. It helps youth replace them with drug free choices and citizen competencies. By the time a youth graduates from the special substance abuse program, he will have progressed through the Level System. He should be at an advanced Senior Level so that pro-social decision making is consistently demonstrated, along with work on drug relapse prevention skills.

Three urinalysis tests are conducted during the youth's stay in secure care.

The RSAT housing unit, as designed, typically treats 24 youth, and utilizes a special staffing pattern, noted as follows:

<b>Staff Position</b>	<b>Number of Staff</b>
Youth Program Supervisor	1
Youth Program Officer	3
Clinical Specialist	1
Psychologist II	1 (part-time)

All three RSAT sites share the efforts of the Transition Psychology Associate, the Psychologist, and the Administrative Assistant positions. The Administrative Assistance job duties are focused on helping youth get services, and staff training. This position has been approved by the Department of Justice.

Highlights from the past fiscal year:

- The *Seven Challenges* groups continued with a renewed focus on interactive learning activities. Examples include: youth placing themselves in line according to severity of drug problem with discussion of why they placed themselves in that order and what constitutes severity of a drug problem; youth drawing "life lines" depicting high and low points in their lives with discussion of their lives and relationship of events and emotions to drug use.
- Relapse prevention groups are held weekly, led by primary clinicians. These groups had previously been limited to youth who were preparing for transition to the community but now include all youth in small groups.
- These relapse prevention groups are led by the youth's primary clinician and utilize a multimedia approach including videotapes, printed materials and role plays.

- Drug and alcohol education groups have been added. In addition to presentation and discussion of factual information regarding the effects of drug and alcohol, group activities are incorporated to demonstrate the concepts.
- Improvements have been made in the weekly treatment team reviews of youth progress. Individualized target behaviors are now developed with each youth and evaluated on a regular basis. Additional information incorporated into the youth's weekly progress review includes progress in treatment work, school and group behavior, as well as unit behavior.
- Improvements were made this year in behavior management of youth. Changes were made to incorporate a greater variety of behavior management strategies, with a greater focus on rewarding positive behaviors.
- Significant staff training occurred this year, including two day-long training sessions for all staff covering Suicide Prevention strategies and Mental health issues. Other training sessions included Behavior Management, Limit and Lead Therapy, Gang Awareness, Cultural Diversity, and Youth Rights.
- The agency's RSAT program manager began a cross-training program in which clinical staff and managers from the programs come together for all-day sessions to share interventions that have worked and for increased training.
- The number of youth participating in the Neurotherapy program continued to grow this year. An additional youth program officer was hired at the end of this reporting year in order to increase Neurotherapy services and the number of youth who can participate in the program.
- Two Family Days were held for the youth and family members, including pot-luck meals and family games with prizes. In addition to these being enjoyable events for youth and families, they allow the treatment team to gain a better picture of the youth's family dynamics and support system.

**Aftercare Services Provided:**

- Clinical staff members from the Freedom program develop a transition plan in conjunction with the youth, his family, the education transition coordinator, the parole officer and the family services coordinator provided by ADJC. These plans include aftercare outpatient counseling and urinalysis testing through an automated youth offender management system.

- A variety of contract providers are typically utilized in Maricopa County for aftercare services to Freedom graduates. The services are tailored to the youth's individual needs. Some examples of clinical services provided include; home-based individual, group, family, counseling and/or functional family therapy several times a week, and two follow-up urinalysis tests. Selected providers are sensitive to youth's racial, ethnic, cultural and gender issues.

Criteria for entrance into RSAT Recovery Program:

- All youth agree to receive treatment for their substance abuse problem in the Freedom Special Treatment housing unit for six months to one year. During the assessment process for the Freedom program, prior to entry into the program, it is discussed with the youth and their family that in order to complete the Freedom program effectively their length of stay in secure care may need to be extended past their court ordered mandatory minimum release date from ADJC.
- Youth is newly committed to secure care.
- Youth is between the ages of fourteen and seventeen (younger or older juveniles may be considered based on individual review and current housing unit dynamics).
- Youth has completed RAC and a Diagnostic Assessment interview. Youth has a history or current diagnosis, of substance abuse or dependence that presents as moderate to severe in nature, verified by Substance Use Survey and Clinical Interview (or Mental Status Exam) administered by Psychology Associate II or Psychologist II; youth has no history of chronic inhalant abuse or dependence.
- Youth has no criminal issues related to violent or sexualized behavior.
- Youth has no history of the following mental illnesses as verified by Clinical Interview or Mental Status Exam by Psychology Associate II or Psychologist II: emerging borderline personality disorder, severe depression, psychosis, schizophrenia, dissociative disorder, dementia, or organic brain disorder.
- Youth reads at seventh grade level or above as indicated by the TABE or WRATIII administered by Education or by the Psychology staff within the last six months.
- Youth signs consent form for three UA drops while in the unit and at least two UA drops during aftercare.

Results of program or project evaluation:

(See Appendix A)

Technical assistance needed for program implementation:

➤ None Requested

Grantee Agency: Arizona Department of Juvenile Corrections  
 PROJECT TITLE: ADOBE MOUNTAIN SCHOOL – FREEDOM UNIT  
 PROJECT START DATE: 7/1/1998  
 PROJECT GRANT NUMBER: SAT-04-105  
 REPORT PERIOD: FFY03 – 10/1/2002 – 9/30/2003

Number of offenders admitted to the grant supported treatment program this Federal Fiscal Year:

	FFY 2003 (10/01/2002 -9/30/2003)	Since start of project to 9/30/2003
White Male Juveniles	11	70
Black Male Juveniles	0	7
Hispanic Male Juveniles	27	87
Native American Male Juveniles	3	6
Other Male Juveniles	0	1
Total Male Juveniles	41	171

Number of male juvenile offenders successfully completing the grant supported treatment program:

	FFY 2003 (10/01/2002 -9/30/2003)	Since start of project to 9/30/2003
Total	32	108

Number of male juvenile offenders who:

	FFY 2003 (10/01/2002 -9/30/2003)	Since start of project to 9/30/2003
Dropped out of program	0	4
Were terminated from program	7	30

Number of male juvenile offenders who successfully completed an aftercare program:

	FFY 2003 (10/01/2002 -9/30/2003)	Since start of project to 9/30/2003
Total	30	66

Requested Information ( <b>Please provide one evaluation form for each grant funded project</b> )		FFY 2003 10/01/2002- 9/30/2003	Since start of project to 9/30/2003
1.	Number of previously funded RSAT beds continued during this report period	24	
2.	Number of new treatment beds added with RSAT grant funds during this report period.	0	
3.	Number of treatment beds funded through other sources, but enhanced with RSAT funded services.	N/A	N/A
4.	Number of days of residential treatment provided.	365	1764
5.	Total number of male adult offenders entering an RSAT grant funded treatment program.	41	171
6.	Total number of female adult offenders entering an RSAT grant funded treatment program.	N/A	N/A
7.	Total number of offenders successfully completing the residential program.	32	108
8.	Average length of stay in the residential program, for those completing the program (in days).	218	243
9.	Total number of offenders that dropped out of the residential program.	0	4
10.	Total number of offenders that were terminated from the residential program.	7	30
11.	Total number of offenders that successfully completed the after care program.	30	66
12.	Of the offenders that completed the program, the percentage that have remained drug free during the residential program.	94%	88%
13.	Of the offenders that completed the program, the percentage that have remained drug free during the aftercare program.	30%	64%
14.	Of the offenders that completed the program, the percentage that have remained arrest free during the aftercare program.	47%	61%
15.	Of the offenders that completed the program, the percentage that have remained arrest free following release from aftercare, if known. ( <b>one year follow-up</b> ).	Unknown	Unknown
The following questions are for those programs in existence for two years or more:			
16.	Average cost per day for the residential program.	\$945.22	\$1,013.13
17.	Average cost per day for the aftercare program	\$729.92	Unknown

**Arizona Department of Juvenile Corrections  
Black Canyon School  
Recovery Unit**

The program helps youth with moderate to serious drug problems, the program has its own staff. The Youth Program Supervisor and Clinicians are funded by RSAT. Recovery aims to help youth interrupt offense cycles and interrupt drug abuse patterns that may trigger criminal acts as well as looking in to any trauma core issues that might trigger drug use. It helps youth replace these with drug-free choices and citizen competencies. By the time a youth graduates from the special substance abuse program, she will have progressed through the Level System and should be at a Senior Level, so that pro-social decision making is consistently demonstrated, along with work on drug relapse prevention skills.

The primary core cognitive program is based on a Gender specific special cognitive restructuring curriculum. It is put into practice in the bound *Recovery Individual Treatment Plan* (ITP) booklets for the youth in special treatment. Youth begin the *Recovery* ITP at the freshman level, after they finish the generic *Orientation Level* ITP booklet that all youths complete during their first 30 days in secure care. The *Recovery* ITP helps youth, through shifts in thinking, decide about their drug abuse and criminal cycles. The unit managers and *Recovery* staff improved the special *Recovery Individual Treatment Plan* (ITP) booklets this year.

The new *Recovery* ITP includes expanded delinquent offense cycle worksheets and *The Seven Challenges* activities as crucial tools. *Thinking for a Change* worksheets are also included in the new *Recovery* ITP, so that youth can practice and develop social and coping skills. *Thinking for a Change* was developed by nationally recognized consultants in conjunction with the Office of Juvenile Justice and Delinquency Prevention (OJJDP).

The *Recovery Individual Development Plan* has been augmented to include approximately 20 specific issues and problem areas for a female adolescent substance abuser. These issues are addressed through interactive journals from *The Change Company*, such as; Eating Disorders, Why Am I here?, Anger & Other Feelings, My Family, Personal Relationships, I'm Okay, Living With Others, How We Change, Moving On, Citizenship, Life Management, The Con Game, and others. *Recovery* groups are held weekly to allow for the processing of insight, beliefs, and feelings about the recovery process.

The second core curriculum for youth is *The Seven Challenges* workbooks. The workbooks are based upon steps that help substance abusing youth make wiser decisions about themselves and drugs. This had a pilot study with promising results in Tucson. The program is so popular that the developer, psychologist Dr.

Robert Schwebel, has been presenting it on national radio and television shows in the last few years. The workbooks are based upon the original material on the *Stages of Change* by DiClemente, et al. Dr. Schwebel provided on-site consultation to clinicians this year to help improve their implementation of the workbook exercises with youth.

The third core curriculum is Dr. Matthew L. Ferrara's *Limit and Lead* approach. It is a cognitive program that aims, through peer feedback in group counseling, to interrupt youth from acting out delinquent urges.

Recovery staff has been trained in Motivational Interviewing techniques; these are used to partner with the youth to help foster the relationship. The youth in the Recovery program respond better to a combination of group and 1:1 counseling. These 1:1 sessions are much more effective when the youth have built a solid therapeutic relationship based on trust. Peer pressure in the group dynamic creates a foundation to insight and therapy but the individual counseling is where the treatment and rehabilitation takes place.

Urinalysis tests are conducted during the youth's stay in secure care. Behind-the-fence urinalysis is funded by RSAT.

The RSAT housing unit, as designed, typically treats 24 youth, and utilizes a special staffing pattern, noted as follows:

<b>Staff Position</b>	<b>Number of Staff</b>
Youth Program Supervisor	1
Youth Program Officer	3
Clinical Specialist	1
Psychologist II	1 (part-time)

All three RSAT sites share the efforts of the Transition Psychology Associate, the Psychologist, and the Administrative Assistant positions. The Administrative Assistance job duties are focused on helping youth get services, and staff training. This position has been approved by the Department of Justice.

Highlights from the past fiscal year:

- The newly developed program, *Artists in Residence*, has continued. This program was funded by RSAT through June 30, 2003, and has been continued with state funding beginning July 1, 2003. The program manager, with feedback from staff and youth, led to the conclusion that direct teaching of artistic skills could be more beneficial to youth than the past reenactment of turning points in the youth's lives through drama. This year youth experimented with creating art works after they learned from nationally recognized artists, serving as mentors during the two twelve-week seminars.

- The developer of *The Seven Challenges*, Dr. Robert Schwebel, Ph.D., held extensive advanced training at Black Canyon School for Recovery staff and provided ongoing clinical supervision.
- The Challenge Course experience is designed to be a safe, challenging, rewarding and fun experience for all participants regardless of their physical, mental, or emotional abilities. The activities are found in a maze of poles, ropes, and cables and require a group to work together to solve problems, help each other overcome perceived limits and produce a sense of exhilaration and accomplishment. There are process groups after each experience to identify how these skills can be used in life.
- *Vocational Readiness* is a program that continues for eligible youth. Youth noted their satisfaction, as this program helped them to address delinquent and emotional barriers to future job success. *Vocational Readiness Program* provides an extensive battery of psychological testing. These tests provide for a complete diagnosis at the AXIS I level for a substance abuse disorder. This allows for a “lock and key” admission into the VOC-REHAB program. VOC-REHAB will follow the youth until they are 22 years of age, providing assistance with educational needs as well as vocational training and placement.
- Recovery staff was certified in *Rational Emotive Behavior Therapy* (REBT) by the Albert Ellis Institute of New York City. Recovery earned their certification with great enthusiasm. Drs. Michler Bishop and Emmet Velton led the practicum. It was the most beneficial REBT practicum offered to RSAT staff to date. Dr. Bishop is a contemporary of many clinicians. He has written a book called *Managing Addictions*, which helps map out *Stages of Change* in drug abusers for clinicians to attend to when they conduct REBT counseling.
- Recovery staff attended an additional 3 days of training for neurotherapy. The YPS and PSA II traveled to the Lexicore facility in Boulder, Colorado to receive hands-on training by the professionals there.

Aftercare Services Provided:

- The new RSAT aftercare funds extend to the community, as well as other state and community resources may fund aftercare providers for the graduates. Special treatment graduates from Recovery have clinical staff set up aftercare outpatient counseling and urinalysis testing through an automated system. Service can be available until the youth turns 18, when the department’s jurisdiction ends. However, the average length of aftercare services arranged is 90 days.

- Various state-contracted providers are utilized in Maricopa and Pima Counties for aftercare services to graduates. Some co-eds transition to a group home before returning to their community, upon the recommendations of the parole officer. Alternatively, aftercare services provided also include: home-based individual, group, family, counseling and/or functional family therapy several times a week, and two follow-up urinalysis tests. Providers are sensitive to youth's racial, ethnic, cultural, and gender issues.
- Through new funding from the Re-entry grant, RSAT graduates transitioning to one of four outlying counties (Pinal, Mohave, Cochise, and Yuma) now have an ADJC Community Re-entry specialist trained to supervise, intervene, and coordinate aftercare services that were previously unavailable. Aftercare providers conduct counseling using a treatment modality that is consistent with the Clinical Services cognitive restructuring approach. Providers are experienced in substance abuse counseling for delinquent co-eds.
- Functional family Therapy and Neurotherapy have been added to the treatment opportunities available to the youth who are from Maricopa County. These are new to the aftercare offerings due to an additional RSAT Aftercare grant.

Criteria for entrance into RSAT Recovery Program:

- All youth agree to receive treatment for their substance abuse problem in the Special Treatment housing unit for six months to one year. Doing so may mean that their length of stay in secure care needs to be extended past their court ordered mandatory minimum date for secure care.
- Youth is between the ages of fourteen and seventeen.
- Youth is able to complete a minimum six months or a maximum of twelve months in Recovery and will be released on parole upon completion of the program.
- Youth graduates and is released several months before the age of 18, and she is able to receive at least three months of aftercare counseling.
- Youth has a history, or present diagnosis, of substance abuse or dependence. The problem presents as moderate to severe in nature. Substance Use Survey Needs Assessment or Clinical Interview verifies the substance abuse. A Psychology Associate II or Psychologist II administers the Clinical Interview. In addition, the youth has no history of chronic inhalant abuse or dependence.

- Youth has no history of the following mental illnesses: emerging borderline, emerging antisocial personality, severe depression, psychosis, rapid cycling mood disorder, bipolar disorder, schizophrenia, thought disorder, dissociative disorder, post traumatic stress, attention deficit or attention deficit hyperactivity disorder, dementia, or organic brain disorder (as verified by Clinical Interview).
- Youth reads at seventh grade level or above as indicated by the TABE academic achievement test, administered by Education or by the Psychology staff within the last six months.
- Youth consents to join Recovery, to work in the program to deal with drug problems, and to participate in aftercare counseling following release from Recovery.
- Youth consents to three urinalysis tests while in the unit (entrance, midpoint and exit), at least two tests during aftercare, and signs urinalysis test consent forms.
- With the exception of length of stay and urinalysis testing, one or more criteria may be over-ridden by the Unit Manager, with the approval of the Superintendent. The length of stay and the substance abuse criteria can not be overridden.

Results of program or project evaluation:

(See Appendix A)

Technical assistance needed for program implementation:

- None Requested

GRANTEE AGENCY: ARIZONA DEPARTMENT OF JUVENILE CORRECTIONS  
 PROJECT TITLE: BLACK CANYON SCHOOL  
 PROJECT START DATE: 7/1/1998  
 PROJECT GRANT NUMBER: SAT-04-104  
 REPORT PERIOD: FFY03 – 10/1/2002 – 9/30/2003

Number of offenders admitted to the grant supported treatment program this Federal Fiscal Year:

	FFY 2003 (10/01/2002 -9/30/2003)	Since start of project to 9/30/2003
White Female Juveniles	14	83
Black Female Juveniles	1	5
Hispanic Female Juveniles	13	73
Native American Female Juveniles	3	11
Other Female Juveniles	0	1
Total Female Juveniles	31	173

Number of female juvenile offenders successfully completed the grant supported treatment program:

	FFY 2003 (10/01/2002 -9/30/2003)	Since start of project to 9/30/2003
Total	32	119

Number of female juvenile offenders who:

	FFY 2003 (10/01/2002 -9/30/2003)	Since start of project to 9/30/2003
Dropped out of program	0	7
Were terminated from program	1	20

Number of female juvenile offenders who successfully completed an aftercare program:

	FFY 2003 (10/01/2002 -9/30/2003)	Since start of project to 9/30/2003
Total	26	87

Requested Information ( <b>Please provide one evaluation form for each grant funded project</b> )		FFY 2003 10/01/2002- 9/30/2003	Since start of project to 9/30/2003
1.	Number of previously funded RSAT beds continued during this report period	24	24
2.	Number of new treatment beds added with RSAT grant funds during this report period.	0	0
3.	Number of treatment beds funded through other sources, but enhanced with RSAT funded services.	N/A	N/A
4	Number of days of residential treatment provided.	365	365
5.	Total number of male adult offenders entering an RSAT grant funded treatment program.	N/A	N/A
6.	Total number of female adult offenders entering an RSAT grant funded treatment program.	31	173
7.	Total number of offenders successfully completing the residential program.	32	119
8.	Average length of stay in the residential program, for those completing the program (in days).	222	252
9.	Total number of offenders that dropped out of the residential program.	0	7
10.	Total number of offenders that were terminated from the residential program.	1	20
11.	Total number of offenders that successfully completed the after care program.	26	87
12.	Of the offenders that completed the program, the percentage that have remained drug free during the residential program.	81%	95%
13.	Of the offenders that completed the program, the percentage that have remained drug free during the aftercare program.	35%	57%
14.	Of the offenders that completed the program, the percentage that have remained arrest free during the aftercare program.	73%	68%
15.	Of the offenders that completed the program, the percentage that have remained arrest free following release from aftercare, if known. ( <b>one year follow-up</b> ).	Unknown	Unknown
The following questions are for those programs in existence for two years or more:			
16.	Average cost per day for the residential program.	\$818.85	\$1,236.29
17.	Average cost per day for the aftercare program	\$1,819.71	Unknown

**Arizona Department of Juvenile Corrections  
Catalina Mountain School  
Recovery Unit**

Catalina Mountain Recovery is based on the original model at Adobe Mountain School. The program helps male youth from the Pima County area, with moderate to severe drug problems whose length of stay is comparative with the grant requirements of six to twelve months in the secure care program. The program helps youth combat delinquent and substance abuse urges, using the cognitive approaches. The Recovery unit is based upon the treatment model program design, which was developed by Clinical Services' Chief of Counseling. The program components used are "cognitive restructuring". Research has shown that the cognitive restructuring approach to treatment helps youth turn around delinquent and drug abuse urges.

The cognitive program set up for RSAT continues to emphasize the interruption of delinquent thinking. The program uses group treatment of delinquency through the *Limit and Lead* group counseling activities developed by Dr. Matthew L. Ferrara.

For substance abuse urges, staff conducts individual counseling using cognitive interventions, such as *Rational Emotive Behavior Therapy* (REBT). The staff has received training and certification in REBT for Substance Abusing Adolescents from the Albert Ellis Institute of New York City. Dr. Ellis is known as the "grandfather of cognitive restructuring".

*The Seven Challenges* developed by Dr. Robert Schwebel, are cognitive workbooks based on steps that help substance abusing youth make wiser decisions about themselves and drugs. The workbooks are based upon the original material on the *States of Change* by DiClemente. They challenge the youth's decisions and life choices around drugs.

The core program is based on a special cognitive restructuring curriculum. It is described in the *Recovery Program Manual* for facilitators. It is put into practice in the bound *Recovery Individual Treatment Plan* (ITP) booklets for the youth in treatment. Youth begin the *Recovery ITP* at the Freshman Level after they finish the generic *Orientation Level* (ITP) booklet that all youth complete during their first 30 days in secure care. The *Recovery ITP* helps youth through shifts in thinking, decide about their drug abuse and criminal patterns of behavior. The *Recovery ITP* includes delinquent offense cycle worksheets and *The Seven Challenges* activities so the youth are able to process their written work in group settings. *Thinking for a Change* worksheets are also included in the new *Recovery ITP*, so that youth can practice and develop social and coping skills. *Thinking for a Change* is developed by nationally recognized consultants in conjunction with OJJDP.

The Recovery program helps youth with moderate to serious drug problems. Recovery aims to help youth interrupt offense cycles and drug abuse patterns that may trigger criminal acts. It helps youth replace them with drug free choices and citizen competencies. By the time a youth graduates from the special substance abuse program, he will have progressed through the Level System. He should be at an advanced Senior Level so that pro-social decision making is consistently demonstrated, along with work on drug relapse prevention skills.

The RSAT housing unit, as designed, typically treats 24 youth, and utilizes a special staffing pattern, noted as follows:

<b>Staff Position</b>	<b>Number of Staff</b>
Youth Program Supervisor	1
Youth Program Officer	3
Clinical Specialist	1
Psychologist II	1(part-time)

All three RSAT sites share the efforts of the Transition Psychology Associate, the Psychologist, and the Administrative Assistant positions. The Administrative Assistance job duties are focused on helping youth get services, and staff training. This position has been approved by the Department of Justice.

Highlights from the past fiscal year:

- This year the program provided an average of seventy-six (76) treatment groups per month. The ability to provide this high number of treatment groups consistently is due, in part, to grant funding. Grant funds pay for the YPO III, PA II, and YPS clinical positions, as well as overtime to maintain staffing even during manpower shortages. The clinical staff attended training this year to improve their clinical skills. This training included research-based substance abuse counseling training and emotion management training, as well as other clinical training needed to effectively treat this population. This training, and the use of overtime, allowed the program to average one-hundred and twenty-one (121) individual sessions per month. The majority of these sessions were provided by the clinical staff. Fourteen (14) family sessions were also provided.
- Grant funds were also provided to purchase treatment material including; interactive journals from the Change Companies and the *Seven Challenges*. These workbooks follow the Stages of Change (or Trans-theoretic Model). Additional treatment materials purchased included educational videos and interactive CD-ROMs in the areas of AOD education and emotion management.

- The fine arts program during this year was provided by internal staff. The youth created a video entitled “A Day in the Life of Recovery”. The video allowed youth to discuss what they were doing and learning in treatment and was presented to their families at a Family Day. Another project was “Self Portrait”. This project combined photography, visual arts, poetry and prose to give youth an opportunity to present their view of themselves to their families. Supplies for the fine arts group would not be available if not for the grant.
- All youth submit to urine drug testing at least once during their stay. Youth are tested for cause as well. Fifty-four (54) drug tests were completed in the reporting period.

Aftercare Services Provided:

- Youth completing the Recovery Program receive aftercare upon release from the institution, providing they remain in the department’s jurisdiction (prior to age 18). All youth are required to submit to two additional drug tests in the first three months following discharge. The majority of youth graduating from the Recovery Program receive aftercare counseling, group, and/or family counseling. Home-based counseling is also available as needed. One youth also received thirty (30) days of outreach and tracking services.
- Youth also are seen by the family service coordinators at the Parole office for individual, group, and family counseling. Aftercare services are a high priority and are written into the parole plan for the youth. The extent of the aftercare services are based on individual need and are discussed by the multidisciplinary treatment team at the youth transition staffing.

Criteria for entrance into RSAT Recovery Program:

- All youth agree to receive treatment for their substance abuse problem in the Special Treatment housing unit for six months to one year. Doing so may mean that their length of stay in secure care needs to be extended past their court ordered mandatory minimum date for secure care. When this occurs, parental consent and support is elicited. If the youth is not willing to enter the program, the youth is not accepted.
- Youth is between the ages of fourteen and seventeen.
- Youth is able to complete a minimum six months or a maximum twelve months in the Recovery Unit and will be released on parole upon completion of the program.

- Youth graduates and is released several months before the age of 18, and he is able to receive at least three months of aftercare counseling.
- Youth has a history, or present diagnosis, of substance abuse or dependence. The problem presents as moderate to severe in nature. Substance Use Survey, Needs Assessment or Clinical Interview verifies the substance abuse. A Psychology Associate II or Psychologist II administers the Clinical Interview. In addition, the youth has no history of chronic inhalant abuse or dependence.
- Youth has no criminal issues related to violent or sexualized behavior.
- Youth is not presently on psychoactive medications.
- Youth has no history of the following mental illnesses: emerging borderline, emerging antisocial personality, severe depression, psychosis, rapid cycling mood disorder, bipolar disorder, schizophrenia, thought disorder, dissociative disorder, post traumatic stress, attention deficit or attention deficit hyperactivity disorder, dementia, or organic brain disorder (as verified by Clinical Interview).
- Youth reads at seventh grade level or above as indicated by the TABE academic achievement test, administered by Education or by the Psychology staff within the last six months.
- Youth consents to join Recovery, to work in the program to deal with drug problems, and to participate in aftercare counseling following release from Recovery.
- Youth consents to three urinalysis tests while in the unit (entrance, midpoint and exit), at least two tests during aftercare, and signs the urinalysis consent forms.
- The length of stay, substance abuse criteria, urinalysis and having at least three months available for aftercare are criteria that can not be overridden. One or more of the other criteria may be overridden by the Psychologist, with the approval of the Superintendent or the Project Leader.

Results of program or project evaluation:

(See Appendix A)

Technical assistance needed for program implementation:

➤ None Requested

GRANTEE AGENCY: ARIZONA DEPARTMENT OF JUVENILE CORRECTIONS  
 PROJECT TITLE: CATALINA MOUNTAIN SCHOOL  
 PROJECT START DATE: 1/1/97  
 PROJECT GRANT NUMBER: SAT-02-106  
 REPORT PERIOD: FFY03 – 10/1/2002– 9/30/2003

Number of offenders admitted to the grant supported treatment program this Federal Fiscal Year:

	FFY 2003 (10/01/2002 -9/30/2003)	Since start of project to 9/30/2003
White Male Juveniles	6	52
Black Male Juveniles	4	10
Hispanic Male Juveniles	20	105
Native American Male Juveniles	2	12
Other Male Juveniles	0	0
Total Male Juveniles	30	179

Number of male juvenile offenders successfully completing the grant supported treatment program:

	FFY 2003 (10/01/2002 -9/30/2003)	Since start of project to 9/30/2003
Total	21	109

Number of male juvenile offenders who:

	FFY 2003 (10/01/2002 -9/30/2003)	Since start of project to 9/30/2003
Dropped out of program	0	1
Were terminated from program	9	38

Number of male juvenile offenders who successfully completed an aftercare program:

	FFY 2003 (10/01/2002 -9/30/2003)	Since start of project to 9/30/2003
Total	17	70

Requested Information ( <b>Please provide one evaluation form for each grant funded project</b> )		FFY 2003 10/01/2002- 9/30/2003	Since start of project to 9/30/2003
1.	Number of previously funded RSAT beds continued during this report period	20	
2.	Number of new treatment beds added with RSAT grant funds during this report period.	0	
3.	Number of treatment beds funded through other sources, but enhanced with RSAT funded services.	N/A	N/A
4.	Number of days of residential treatment provided.	365	2,129
5.	Total number of male adult offenders entering an RSAT grant funded treatment program.	30	177
6.	Total number of female adult offenders entering an RSAT grant funded treatment program.	N/A	N/A
7.	Total number of offenders successfully completing the residential program.	21	109
8.	Average length of stay in the residential program, for those completing the program (in days).	246	263
9.	Total number of offenders that dropped out of the residential program.	0	1
10.	Total number of offenders that were terminated from the residential program.	9	38
11.	Total number of offenders that successfully completed the after care program.	17	70
12.	Of the offenders that completed the program, the percentage that have remained drug free during the residential program.	90%	98%
13.	Of the offenders that completed the program, the percentage that have remained drug free during the aftercare program.	53%	64%
14.	Of the offenders that completed the program, the percentage that have remained arrest free during the aftercare program.	100%	100%
15.	Of the offenders that completed the program, the percentage that have remained arrest free following release from aftercare, if known. <b>(one year follow-up)</b> .	Unknown	Unknown
The following questions are for those programs in existence for two years or more:			
16.	Average cost per day for the residential program.	\$936.90	\$894.17
17.	Average cost per day for the aftercare program	\$376.75	Unknown

## **Arizona Department of Juvenile Corrections Afterrelease Recovery**

The Afterrelease Recovery Program is an afterrelease pilot program to set up the agency infrastructure that will assist youth with neurotherapy and Functional Family Therapy follow up. Three service modalities will help male and female graduates stay on the path. The grant will support three services: neurotherapy, family therapy, and urinalysis. Graduates in Maricopa County will receive at least three urinalysis tests in the community, at least once per month. Neurotherapy graduates in this county need 12 or more follow up sessions to reinforce gains.

An Afterrelease Coordinator is responsible for developing RSAT Community Corrections systems to strengthen the connectivity between the graduates and their provider communities. This person creates linkages between youth, parole officers, and providers. This person directs systems to set up clinical resources, measure progress data, and track performance trends of youth.

Providers for urinalysis, neurotherapy, Functional Family Therapy, / Home-Based Counseling have been selected. These contractors will be situated in Maricopa County, primarily in the metropolitan Phoenix area.

### **Project Goals and Objectives:**

The broad goal of the secure care RSAT Recovery program is to reduce the risk of delinquent criminal and drug activity by committed youth who require long-term specialized treatment programs due to substance abuse patterns. The broad goal of Afterrelease is to strengthen relapse prevention skills where the youth lives. The objectives are:

1. To help youth obtain employment; or, to help youth attend school or job training.
2. To help youth decrease the number of relapses to drug abuse.
3. To reduce recidivism rates.

Grantee Agency: Arizona Department of Juvenile Corrections  
 PROJECT TITLE: AFTERRELEASE RECOVERY  
 PROJECT START DATE: 7/1/2003  
 PROJECT GRANT NUMBER: RAC-04-200  
 REPORT PERIOD: FFY03 – 10/1/2002 – 9/30/2003

Requested Information ( <b>Please provide one evaluation form for each grant funded project</b> )	FFY 2003 (10/01/2002 -9/30/2003)	Since start of project to 9/30/2003
1. Total number of male offenders admitted to the grant funded aftercare program.	3	3
2. Total number of female offenders admitted to the grant funded aftercare program.	3	3
3. Total number of adult offenders admitted to the grant funded aftercare program.	0	0
4. Total number of juvenile offenders admitted to the grant funded aftercare program.	3	3
5. Total number of offenders successfully completing the aftercare program.	N/A (a)	N/A (a)
6. Average length of time each participant is in the aftercare treatment program (in days).	N/A (a)	N/A (a)
7. Total number of participants that dropped out of the aftercare program.	0	0
8. Total number of participants that were terminated from the aftercare program.	0	0
9. The percentage of participants that have remained drug free during the aftercare program.	N/A (a)	N/A (a)
10. The percentage of participants that have remained arrest free during the aftercare program	N/A (a)	N/A (a)
11. Of the participants that completed the program, the percentage that have remained arrest free following release from aftercare ( <b>at least one year follow-up</b> ).	N/A (a)	N/A (a)
The following questions are for those programs in existence for two years or more.		
12. Average cost of the program per participant that completed the aftercare program ( <b>cost of aftercare program only</b> )	N/A (a)	N/A (a)

(a) program began 7/1/03

## **Maricopa County Sheriff's Office Alpha Program**

The Alpha program is available to inmates who are assessed as to have a minimum of six months of incarceration. Specific segments of substance abuse therapy have been identified and incorporated in the Alpha Program. Alpha volunteer participants are segregated from the general population and are housed in pods of thirty inmates. The inmates are required to fully participate in all assigned classes, treatment groups and work based on the initial and continuing psychological/social, motivation level, and security assessments. A minimum of two hours of daily therapy is provided. Drug testing is a requirement of the program.

The first phase of Alpha (Pre-Alpha) concentrates on developing a positive pre-treatment attitude. It builds self esteem and an awareness of substance use patterns. A supplement class of women is added that focuses self-esteem and codependent relationships. The Pre-Alpha phase of the program can last up to six weeks.

The second phase of Alpha (Primary Alpha) consists of intensive group therapy focusing on substance use, sexual abuse, personal relationships, cognitive patterns, environment influences, anger control, criminal patterns and self responsibility.

The third phase of Alpha (Post Alpha) continues until the inmate is released. This portion of the program includes a continuation of group therapy, developing recovery plans and community resources and transitional issues. In addition, cognitive restructuring and family re-orientation groups are required.

Southwest Behavioral Health is contracted to provide two hours of gender/age (male/female/adult/juvenile) specific cognitive restructuring groups twice per week for Alpha participants. Concepts of Change, Southwest Behavioral Health and Sage Counseling, Inc. provide two hour daily groups focusing on gender specific anger issues and teaching control techniques. Employment issues and ethics classes are conducted through Sage Counseling, Inc. and Concepts. New Opportunities for Work (NOW) is a four week class focusing on gaining and retaining employment. Concepts for Change and the Alpha staff have designed a curriculum to teach inmates and their families/significant others how to deal with anger, build trust, heal relationships and set boundaries so inmates can transition into a new environment and successfully follow their recovery plans with support. Inmates' families are encouraged to attend group sessions during the last month of incarceration. Sage Counseling Inc. and Concepts for Change provide self-esteem and codependency group counseling for female inmates.

Highlights from the past fiscal year:

- An additional counselor was allowed this year and the program has since expanded to include five groups of fifteen (15) men. The expansion also included all supplemental programs that were already offered to the existing group members (Life Skills, GED, Anger Management, etc.). Drug testing has been a requirement for Alpha participants since the beginning of the program.
- Crisis counseling has been made available to those participants who find themselves in need of some additional counseling for issues that may not be appropriate in the group setting.
- During the past year there has been a greater focus on self-esteem and co-dependency issues in the female Anger Management groups. This focus seems to have enabled the women to identify and enforce their personal boundaries in a more positive way that does not include violence or abuse. In addition, a greater emphasis has been placed on a domestic violence component of the Anger Management portion of the supplemental services provided to the male and female participants in the post-Alpha phase of the program.

Aftercare Services Provided:

- Graduates remain in the segregated housing unit with their fellow group members for the duration of their incarceration. This allows the participants to continue on in the support system that has been created. They also continue working together with common work assignments and attend aftercare programming consisting of Cognitive Restructuring and Anger Management/Domestic Violence counseling.
- All programming and activities are coordinated so that all members can participate together to maintain group cohesiveness. In addition, another RSAT award has allowed the program to provide a continuum of services following release from incarceration.

Criteria for entrance to the RSAT Program:

- A one-on-one interview is conducted with each potential group member, a copy of which is maintained in his/her file. Information is obtained regarding all aspects of the person's life, including substance use/abuse, treatment history, education level, relationship issues and medical/mental health issues. All of this information is used to determine the focus of treatment for the individual, while, at the same time, continuing to maintain the integrity of the program by following the highly successful Alpha Program curriculum.

Result of Program or Project Evaluations:

- Program evaluations are done on an individual basis in the form of pre and post test administered by counselors and facilitators. Results are based on progress made by the individuals during the time that they are in the group. The counselors and Alpha staff monitor these reports. Success is determined by exhibited and stated improvement in skill building, anger management, cognition, recognition of substance using behavior and other similar patterns. This documentation is maintained in the individual's permanent file.

Technical assistance needed for program implementation:

- The assistance received in the past from the RSAT staff has been of great benefit as an already successful substance abuse and treatment program. The additional funds provided by the grant have allowed improvement and expansion of the program already in place.

GRANTEE AGENCY: MARICOPA COUNTY SHERIFF'S OFFICE  
 PROJECT TITLE: ALPHA PROGRAM  
 PROJECT START DATE: 7/1/1998  
 PROJECT GRANT NUMBER: SAT-04-108  
 REPORT PERIOD: FFY03 – 10/1/2002 – 9/30/2003

Number of offenders admitted to the grant supported treatment program this Federal Fiscal Year:

	FFY 2003 (10/01/2001 - 9/30/2003)	Since start of project to 9/30/2003		FFY 2003 (10/01/2002 - 9/30/2003)	Since start of project to 9/30/2003
White Males	320	901	White Females	77	439
Black Males	73	228	Black Females	10	65
Hispanic Males	127	437	Hispanic Females	36	128
Native American Males	27	64	Native American Females	8	29
Other Males	0	2	Other Females	1	2
Total Males	547	1632	Total Females	132	663

Number of offenders successfully completing the grant supported treatment program:

	FFY 2003 (10/01/2002 -9/30/2003)	Since start of project to 9/30/2003
Total Males	344	1184
Total Females	115	397

Number of offenders who:

	FFY 2003 (10/01/2002 -9/30/2003)	Since start of project to 9/30/2003
Dropped out of program	55	200
Terminated from program	126	479

Number of offenders who successfully  
completed an aftercare program:

	FFY 2003 (10/01/2002 -9/30/2003)	Since start of project to 9/30/2003
Total Males	303	1143
Total Females	99	381

Requested Information ( <b>Please provide one evaluation form for each grant funded project</b> )		FFY 2003 10/01/2002- 9/30/2003		Since start of project to 9/30/2003
1.	Number of previously funded RSAT beds continued during this report period	175		
2.	Number of new treatment beds added with RSAT grant funds during this report period.	0		
3.	Number of treatment beds funded through other sources, but enhanced with RSAT funded services.	0		0
4.	Number of days of residential treatment provided.	260		1,365
5.	Total number of male adult offenders entering an RSAT grant funded treatment program.	Adults 547	Juv 0	Adults 1,632
6.	Total number of female adult offenders entering an RSAT grant funded treatment program.	Adults 118	Juv 14	Adults 663
7.	Total number of offenders successfully completing the residential program.	Adults 449	Juv 10	Adults & Juv 1,581
8.	Average length of stay in the residential program, for those completing the program (in days).	182.52		182.52
9.	Total number of offenders that dropped out of the residential program.	55		200
10.	Total number of offenders that were terminated from the residential program.	126		479
11.	Total number of offenders that successfully completed the after care program.	Adults 393	Juv 9	N/A
12.	Of the offenders that completed the program, the percentage that have remained drug free during the residential program.	99%		99%
13.	Of the offenders that completed the program, the percentage that have remained drug free during the aftercare program.	98%		97%
14.	Of the offenders that completed the program, the percentage that have remained arrest free during the aftercare program.	99%		99%
15.	Of the offenders that completed the program, the percentage that have remained arrest free following release from aftercare, if known. <b>(one year follow-up).</b>	83		86
The following questions are for those programs in existence for two years or more:				
16.	Average cost per day for the residential program.	\$1,239.73		\$1,239.73
17.	Average cost per day for the aftercare program	Incl. Above		Incl. Above

## Maricopa County Sheriff's Office Transition Alpha Program (Afterrelease)

The Transition Alpha Program (TAP) is designed to provide transitional treatment upon release from jail into the community. The transitional treatment is provided by contracted agencies that currently provide supplemental components of the Alpha program. These agencies are well versed on the Alpha philosophy, programmatic content, and how to interface with Alpha participants. They have agreed to create a continuation program in the community for referred Alpha program graduates. Alpha meets the Residential Substance Abuse Treatment requirements.

The Maricopa County Adult Probation Department, Concepts for Change, Sage Counseling and Alpha staff have agreed to participate in the program.

### Project Goals and Objectives:

Reduce recidivism and crime by teaching inmates how to recover from chemical addictions and discontinue antisocial behavior. This will be accomplished by the following objectives:

1. Providing transitional tools and incentives for inmates to remain substance free and sober for one year upon release and completion of TAP.
2. Providing transitional opportunities for inmates to experience personal growth and achievement.
3. Providing direct linkages to community service providers by enrolling them in outside programs.
4. Educating inmates to control impulsive behaviors and to make positive, responsible choices while attending TAP.

Describe the afterrelease activities carried out with the grant funds during the fiscal year:

- The Alpha program participants have proven themselves to be very motivated and have presented well and in a manner consistent with the treatment they have received in the pre-, primary, and post-Alpha phases during their incarceration.

Explain what priority is given to aftercare providers

- Since this is solely an afterrelease program, care was given to recruiting providers who were familiar with the Alpha Program philosophy in order to ensure continuity of treatment.
- The providers who were chosen have worked closely with MCSO for approximately four years and know the staff and clientele.

What criteria are given to assign offenders to the grant funded aftercare program

- The selection process is based on need for the residential beds. Residential care is costly. Since only a small number of clients will be receiving services, only those individuals with the potential for the greatest benefit will receive services.
- Generally, those individuals have extremely limited options (homeless, no family in the area, unfamiliar with available social services). The individuals who have option upon release (stable home, job) are referred to the outpatient provider to attend group sessions on their own.

Results of any program or project evaluations conducted

- Because this is a new program, the results evaluation process is still ongoing. Reports received so far are positive.

Technical assistance needed for program implementation

None at this time.

GRANTEE AGENCY: MARICOPA COUNTY SHERIFF'S OFFICE  
 PROJECT TITLE: TRANSITION ALPHA PROGRAM  
 PROJECT START DATE: 7/1/2003  
 PROJECT GRANT NUMBER: RAC-04-300  
 REPORT PERIOD: FFY03 – 10/1/2002 – 9/30/2003

Requested Information ( <b>Please provide one evaluation form for each grant funded project</b> )	FFY 2003 (10/01/2002 -9/30/2003)	Since start of project to 9/30/2003
1. Total number of male offenders admitted to the grant funded aftercare program.	6	6
2. Total number of female offenders admitted to the grant funded aftercare program.	0	0
3. Total number of adult offenders admitted to the grant funded aftercare program.	6	6
4. Total number of juvenile offenders admitted to the grant funded aftercare program.	0	0
5. Total number of offenders successfully completing the aftercare program.	0	0
6. Average length of time each participant is in the aftercare treatment program (in days).	N/A	N/A
7. Total number of participants that dropped out of the aftercare program.	1	1
8. Total number of participants that were terminated from the aftercare program.	1	1
9. The percentage of participants that have remained drug free during the aftercare program.	84%	84%
10. The percentage of participants that have remained arrest free during the aftercare program	84%	84%
11. Of the participants that completed the program, the percentage that have remained arrest free following release from aftercare ( <b>at least one year follow-up</b> ).	N/A*	N/A*
The following questions are for those programs in existence for two years or more.		
12. Average cost of the program per participant that completed the aftercare program ( <b>cost of aftercare program only</b> )	N/A*	N/A*

\* Numbers not available yet

# APPENDIX A

January 16, 2004

## Project Overview

Prepared by Mike Doohan of Lexicor with the assistance from DALex Processing Team, John Drozd Ph.D. , Carla Hickey, M.A., CCC, QEEGT and sub-contractors Dr. Perter Smith and Dr. Sandy Silverman.

Quantitative EEG (QEEG), also known as brainmapping, is an advanced technology technique to gather brainwave data for analysis. QEEG analysis through the DataLex Service allows for the statistical processing and comparison of brainwaves to aid in classifying and evaluating disorders of the brain based on brain electrical activity.

Neurofeedback/Neurotherapy training is a repetitive procedure of measuring and feeding back a specific brainwave frequency at a particular scalp location, using software to provide a visual and/or auditory reward for the voluntary shifting of the youth's EEG pattern in the desired direction.

With the supervision by state licensed Psychologist's in both Phoenix and Tucson the project began at Black Canyon, Adobe Mountain and Catalina Mountain Schools in the 4<sup>th</sup> Quarter of 2002.

- Todd O'Leary of the Recovery Unit initially headed the project at Black Canyon.
- Dr. Leticia Amick of the Freedom Unit at Adobe Mountain led the project for that facility.
- Dr. Sandy Silverman provided supervision and training for both facilities in Phoenix.
- Julie Treinen at Catalina Mountain in Tucson headed the project at that facility with supervision and training from Dr. Peter Smith.

As of 12/17/03, 32 youth had received QEEG's and had their data processed through the DataLex Service. While no unusual or unique EEG pattern is evident in the youth we do see 53% (17 of 32 youth) tested positive for having the known pattern of ADHD. The DSM-IV suggests that 2-5% of the general population have ADHD. Research suggests undiagnosed/untreated ADHD is a risk factor for impulsive, externalizing behaviors and substance abuse.

Using the QEEG data to guide the Neurotherapy training provides the necessary data to insure proper training techniques are used.

In a study that combined data for several major population studies, 13 percent of children received a diagnosis of Conduct Disorder or Oppositional Defiant

Disorder. Of that 13%, thirty-one percent were also diagnosed with ADHD (Eddy, 2001). This study underscores the importance of assessing children and adolescents with conduct disorder and/or substance abuse problems for other mental health conditions and treating those co-morbid conditions when they are present. To this end, neurofeedback techniques can provide a valuable addition to comprehensive, multi-modal treatment programs.

Reference: Eddy, J.M (2001). Aggressive and Defiant Behavior: "The Latest Assessment and Treatment Strategies for the Conduct Disorders." Compact Clinicals: Kansas City, MO.

Adobe Mountain School

Number of Youth in the program: 13

Total number of Neurofeedback sessions completed: 127

General reported Results:

Overall progress was reported by staff and adolescents in terms of behavior, concentration and focus.

Black Canyon School

Number of youth in program: 8

Total number of Neurofeedback sessions completed: 55

General reported results:

Improvements in self-control and behavior were reported by staff:

Catalina Mountain School

Number of youth in the program: 17

Total number of Neurofeedback sessions completed: 381

General Reported results:

Improved behaviors and decreased incident reports were reported for some of the youth in the program. Some increase in grades was also reported.