

Colorado Probation Research in Brief

Strategies for Self-Improvement and Change and Recidivism Following Treatment

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Recidivism and SSC Participation

Summary/Conclusions

The findings in this article are the results of a study “to assess the effectiveness of SSC based upon measures of recidivism.” The researchers reviewed eight treatment programs in Colorado that were offering the Strategies for Self-Improvement and Change (SSC) curriculum with criminal offenders. Referrals to these programs were made from various parts of the criminal justice system, but the research focused on the records of Department of Corrections’ clients. Analyses of the sample data identified a few variables predictive of recidivism, including the length of treatment participation.

Limitations of Information

The most striking limitation was that the SSC curriculum was not facilitated with the same fidelity at each site; only one of the eight sites mandated clients complete all three phases of the program. Additionally, some facilitators “reported rigidly adhering to the SSC manual; others reported modification of SSC content to address individual client needs.” Although these are significant limitations, the results are supported by existing research on treatment intensity, dosage, and recidivism.

Caveat: The information presented here is intended to summarize and inform readers of research and information relevant to probation work. It can provide a framework for carrying out the business of probation as well as suggestions for practical application of the material. While it may, in some instances, lead to further exploration and result in *future* decisions, it is not intended to prescribe policy and is not necessarily conclusive in its findings. Some of its limitations are described above.

The researchers used a sample of 425 Department of Corrections (DOC) clients who discharged between July 2004 and June 2006 from one of eight Colorado treatment provider’s Strategies for Self-Improvement and Change (SSC) program. Researchers collected data on several demographic variables, as well as treatment outcomes. For purposes of this study, recidivism was measured at one and two years following treatment discharge and was defined in two ways: 1) any return to DOC (which might include parole technical violation or a new offense) and 2) a new offense only.

At one year, 38% offenders in the sample had been returned to DOC, while 21% had committed a new offense. In year two, these percentages increased to 50% for DOC returns and 27% for new offenses. “Perhaps most importantly, lower recidivism was also associated with treatment duration (i.e., more days in treatment) and completing treatment. Overall, 47% of non-recidivists completed treatment compared to 18% of recidivists who completed treatment.”

Analyses was conducted to determine possible predictors for one year recidivism rates. Researchers found no demographic variables that were statistically significant predictors for return to DOC; however, completing treatment and paying at least \$100 toward the cost of treatment were related to lower recidivism rates. Also, “leaving treatment against professional advice or due to incarceration were associated with a greater likelihood of one-year recidivism.” When recidivism was defined as a new offense only, results indicated a

few significant offender demographic variables associated with lower recidivism: 30 years or older and at least high school educated. Similar to DOC returns, the likelihood of a new offense decreased when the offender had completed SSC and did not discharge due to incarceration.

Practical Applications

- ✓ Complete quality assessments to ensure the best possible matching of substance abuse treatment needs to the correct modality.
- ✓ Develop a payment plan or budget with the probationer to make sure he can pay for some of his treatment. Consider using treatment vouchers as an incentive, by agreeing to pay for every fourth group, for example.
- ✓ Employ MI skills to move the probationer toward change talk, increasing their readiness for change and the possibility of remaining in treatment.
- ✓ Work with the probationer to identify educational needs, develop goals toward meeting those needs, and monitor progress frequently.
- ✓ Become familiar with the SSC curriculum and regularly ask what the probationer is learning. Reinforce positive behavior change and practice new skills during office visits.
- ✓ Explore barriers the probationer may face in completing the program by finding groups that do not conflict with work schedules or probation meetings. Remove as many barriers as possible, such as limited income, lack of transportation, and childcare issues.

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