



Prisoner Reentry: Addressing the Challenges in a Chemical Dependency Program



The Greater Rochester Collaborative
Master of Social Work Program
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Introduction

Since the reversing of the Rockefeller law there has been an increase of offenders reentering the community and in need of chemical dependency treatment. This project was conducted to gather and explore data on the specific needs of individuals returning from prison and in need of entering a chemical dependency treatment program. This project analyzed data and information to determine if there is a need to develop a specific prison reentry chemical dependency program that will address the needs of individuals returning from prison. For treatment to be effective it must address all needs of the patient, not just their drug/alcohol use. Within a certain period of time almost two-thirds of prisoners that reenter the community will return to prison (Morrison & Luecke, 2005).

Research Questions:

1. Is there a need for a separate chemical dependency program that not only addresses addiction but the specific needs, risks, barriers and criminal thinking of individuals being released from prison and reentering the community?
2. What does it take to help begin changing criminal thinking/behavior while in a Chemical Dependency Treatment Program?

Variable's:

Dependent variable is perceived treatment success.

Independent variables are the specific needs, risks and barriers that are not being addressed in chemical dependency treatment such as basic life skills, social skills, criminal and prison thinking/behavior.

Hypotheses:

- ❖ Treatment success will increase with the introduction of social skills specialty groups.
- ❖ Treatment success will increase with the introduction of a Chemical Dependency Prisoner Reentry Program that will address addiction as well as criminal thinking behavior.
- ❖ Treatment success will increase with the introduction of case management.

Design of Project

- mix-method design.
- 20 question survey composed of quantitative and qualitative questions.
- descriptive and explorative which will identify specific needs, risks and barriers.



Methods

Participants: The population is male, from twenty years to fifty years old, reentering from prison and on parole. Participants will be attending Chemical Dependency Outpatient Treatment at Evelyn Brandon Health Center.

Data Collection: When a participant first enters treatment there is an evaluation completed to gather information for treatment. Primary investigator met with counselors, reviewed the project and provided each counselor with a packet which included survey, release and explanation of the survey. During orientation the primary counselor has this information and reviews the project with participants. If participants are interested in the project they will review and sign the consent form. Participants completed the survey by answering quantitative and qualitative questions. Primary investigator met with some participants while they were in group and reviewed the project and criteria for participation. Primary investigator set appointments with participants who were interested. At the appointment primary investigator explained the project and participants signed the consent form. Participants completed the survey by answering the quantitative and qualitative questions.

Instrumentation/Evaluation Tools: A 25 question survey was developed by (Mike Blegg and the Safer Monroe Area Reentry Team for questions 1-21) and self-authored for questions 22-25.

Results/Findings

- Quantitative data was entered into SPSS and analyzed.
- Univariate (frequency and percentages) were analyzed to ascertain whether there is a need for a chemical dependency reentry program that not only addresses addiction but the specific needs, risks, barriers and criminal thinking of individuals being released from prison and reentering the community. Hypothesis is that treatment success will increase with the introduction of a reentry chemical dependency program that will address addiction as well as criminal thinking.
- Results indicate that 90.9% of participants indicated they would attend a program addressing the multiple needs of people reentering from prison into the community.

Table 1: While in treatment would you attend specialty groups that address the multiple needs of people reentering from prison?

	FREQUENCY	PERCENTAGE
Yes	20	90.9%
No	2	9.1%
Total	(n=22)	100%

Results/Findings

- Qualitative data was analyzed by creating a matrix and using the Grounded Theory Method.
- ❖ **What other type of services/support are you in need of while in treatment?**
 - ❑ General themes are: "I need mental health/meds", "I need to work on anger/conflict issues", "I need help getting employment", "I need help with financial issues" "I need help with transportation issues", "I would like parenting classes" help with relationship issues" and housing "I need supportive housing" I would like a safe, stable living environment."
- ❖ **What recommendations would improve services of the treatment program?**
 - ❑ General themes are: "I would like to be in a group with other men who just came out of prison", "address the needs of people leaving prison", "treat us as individuals, do not judge", ask us and listen to us about treatment" "I need help getting into school", help with transportation/bus passes", "help with services such as legal aid."
- ❖ **How would you define successful completion of treatment?**
 - ❑ General themes are: "I would be employed", I would have housing/be going to school" "I would have medical insurance", living independently in the community " living in a safe environment", "having a stable sober support network", staying clean/sober, completing my goals" and learning how to be honest with self/others, having a spiritual program."

Discussion

Conclusions: After close analysis of data collected over the past few months the results suggest there is a need for a chemical dependency reentry program at Evelyn Brandon Health Center. Results helped to identify areas that will need to be addressed while in a chemical dependency program. Results of the data did fit with theory and literature. Findings are consistent with past research.

Limitations:

- surveyed only one chemical dependency site.
- did not include females in study.
- no control over who would be coming in for treatment.
- participants perception of questions, would eliminate some questions and have follow up questions as needed, such as do you currently have a case manager or what is your perception of a case manager.

Implications:

For this program to work and be successful the size of groups will need to be kept at 10-12 patients. This will allow for patients in group to adjust and begin to build trust with counselor and peers in group. Because all patients in group are on parole and returning from prison it is easier to address criminal thinking/behavior. There will be a case manager that will meet with patients as they enter treatment to see if patients need help connecting with services while in treatment. The implementation of this program will benefit patients by providing them with the best care possible and counselors will be able to utilize Person Centered and Evidence Based Practice.

Implementation:

- February 2010 a reentry program was developed at Evelyn Brandon Health Center addressing not only addiction, but the needs, risks, behaviors and criminal thinking of people reentering the community from prison.
- March 2010 the program was implemented. There are currently 15 patients in the program.
- May 2010 phase 2 of the reentry program will open.
- Evelyn Brandon Health Center purchased work books that are focused on the criminal thinking and addiction.
- Counselor has developed a syllabus for the program which is backed by literature and the research.