

## JAIL-BASED SUBSTANCE ABUSE TREATMENT PROGRAM

# ANNUAL OUTCOME EVALUATION REPORT JANUARY 2011

IOWA CONSORTIUM FOR SUBSTANCE ABUSE RESEARCH AND EVALUATION UNIVERSITY OF IOWA, IOWA CITY, IOWA 52242-5000

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## Jail-Based Substance Abuse Treatment Program

NOVEMBER 1, 2008 THROUGH DECEMBER 31, 2010

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#### **EXECUTIVE SUMMARY**

The Jail-Based Substance Abuse Treatment Program was established to deliver and evaluate substance abuse treatment services to clients during incarceration and after release from jail. Clients are tracked for a follow-up interview that occurs approximately six months after admission to the treatment program. The client interviews provide follow-up data to determine outcomes as well as analyze changes between admission and follow-up. This report presents results for clients admitted from November 1, 2008 through December 31, 2010.

Four substance abuse treatment agencies are involved in the Jail-Based Substance Abuse Treatment Program. United Community Services, Inc. (UCS), a Des Moines, Iowa-based agency, delivers treatment to clients in the Polk County Jail; Center for Alcohol and Drug Services, Inc. (CADS), an agency located in Davenport, Iowa delivers treatment to clients in the Scott County Jail; Community and Family Resources (CFR) located in Ames, Iowa delivers treatment to clients in the Story County Jail; and Jackson Recovery Centers based in Sioux City, Iowa delivers treatment to clients in the Woodbury County Jail and the Prairie Hills facility. The Iowa Consortium for Substance Abuse Research and Evaluation conducts the outcome evaluation component of the Jail-Based Substance Abuse Treatment Program.

A total of 1,135 clients were admitted to the Jail-Based Substance Abuse Treatment Program from November 1, 2008 to December 31, 2010: 418 in Polk County, 397 in Scott County, 206 in Story County, and 114 in Woodbury County.

#### **Client Characteristics**

Of the 1,135 clients admitted, admission data have been received on 1,027 clients; data for the remaining 108 clients are pending and will be included in future reports. According to program guidelines, admission data collected by treatment agency staff reflect the client's status prior to incarceration. The following characteristics describe 1,027 of the 1,135 clients admitted.

Age and Sex: Clients ranged from 18 to 65 years of age with a median age of 31 years. Eight hundred thirty-one clients (80.9%) were male and 196 (19.1%) were female. The highest number of males and females at admission were between the ages of 25 and 34 years of age.

Race and Ethnicity: Seven hundred eighteen clients (69.9%) reported Caucasian/White as their primary race at admission; 231 clients (22.5%) reported African American/Black, 32 clients (3.1%) indicated American Indian as their primary race, six clients (0.6%) reported Asian, and one client (0.1%) indicated Alaskan Native. There were 39 clients (3.8%) who responded "unknown" or for whom data for primary race was missing. Fifty-four individuals (5.3%) reported Hispanic or Latino ethnicity at admission.

**Substance Use at Admission:** At admission, 100% of the clients indicated a primary substance of use. Alcohol was the most common primary substance reported by 44.1% of the clients, followed by marijuana (21.4%), methamphetamine (14.2%), and cocaine (11.9%). A secondary substance was reported by 627 clients (61.1%) at admission; marijuana was the most commonly used secondary substance indicated by 22.1%. The second most commonly reported secondary substance at admission was alcohol, indicated by 18% of clients.

Abstinence, Arrests, and Employment at Admission: At admission, 991 (96.5%) reported substance use during the previous six months. One thousand eleven clients (98.4%) reported

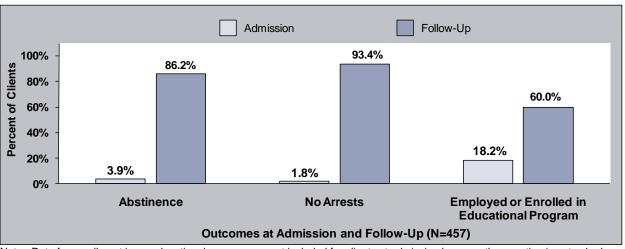


one or more arrests in the previous twelve months. One hundred seventy-two clients (16.7%) were employed at admission: 114 clients (11.1%) indicated full-time employment and 58 clients (5.6%) reported part-time employment.

#### **Outcomes**

Four hundred fifty-eight clients have completed the follow-up interview (six months after admission). Of the 458 clients, admission data have been received for 457 clients. The following outcome data describe clients for whom both admission and follow-up data were obtained. Three outcome variables are examined: abstinence, arrests, and employment /enrollment in an educational program.

#### Abstinence, Arrests, and Employment or Enrollment in Educational Program



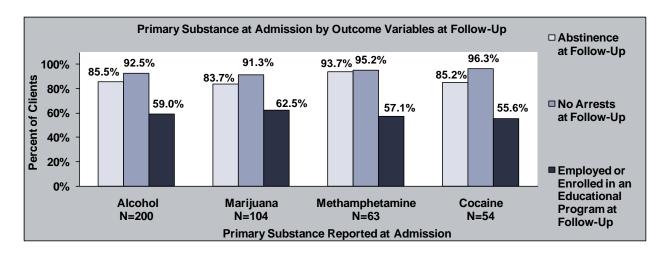
Note: Data for enrollment in an educational program are not included for clients at admission because the question is not asked.

- Three hundred ninety-four clients (86.2%) indicated abstinence at follow-up. Of the 63 clients who reported use, 43 (68.3%) indicated alcohol as the primary substance at follow-up. Twenty-six of the 63 clients who reported use (41.3%) indicated no use during the 30 day period prior to their interview.
- Clients indicating "no arrests" increased by 91.6 percentage points from admission to followup. Thirty clients (6.6%) had been arrested during the six months following admission to treatment.
- Six months following admission, 60% of the clients were either employed full or part-time or enrolled in an educational program. There was a 34.4 percentage point decrease in the number of clients indicating they were not in the labor force (not working or looking for work) from admission to follow-up.

#### Primary Substance at Admission by Outcome Variables:

The four most common primary substances reported at admission were alcohol, marijuana, methamphetamine, and cocaine. Primary substance indicated at admission was examined in relation to key outcome variables: abstinence, arrests, and employment or enrollment in an educational program. Clients reporting alcohol as the primary substance at admission had the highest number of completed follow-up interviews (43.8%).





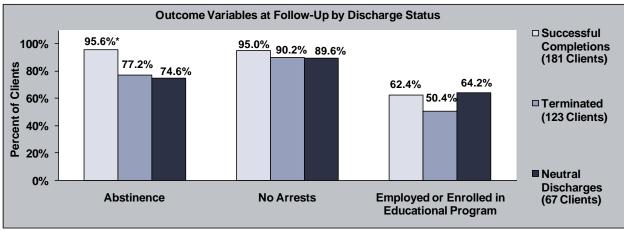
- One hundred seventy-one of 200 clients (85.5%) who indicated alcohol as the primary substance were abstinent during the follow-up period and 87 of 104 clients (83.7%) who reported marijuana were abstinent. Additionally, 59 of 63 clients (93.7%) who indicated methamphetamine and 46 of 54 clients (85.2%) who reported cocaine as the primary substance at admission were abstinent at follow-up.
- Fifteen clients who indicated an arrest during the follow-up period reported alcohol as the
  primary substance at admission; nine clients who reported marijuana, three clients who
  indicated methamphetamine, and two clients who reported cocaine as the primary
  substance at admission had been arrested in the six months following admission.
- One hundred eighteen of the 200 clients (59%) reporting alcohol as the primary substance
  at admission and 65 of the 104 clients (62.5%) indicating marijuana were employed full or
  part-time or enrolled in an educational program at follow-up. Additionally, 36 of the 63
  clients (57.1%) who reported methamphetamine and 30 of the 54 clients (55.6%) indicating
  cocaine as the primary substance at admission were employed full or part-time or enrolled in
  an educational program.

#### Discharge

Eight hundred forty-eight clients have been discharged from the treatment program: 249 of the clients (29.4%) were discharged as "successful"; 314 clients (37%) were discharged from the program due to noncompliance or as a result of the client's decision to remove themselves from treatment program and were designated as "terminated". Two hundred eighty-five clients (33.6%) were discharged for "neutral" reasons (this category includes but is not limited to clients who were discharged due to: legal issues related to a sentence; transferring to another treatment program; or medical reasons). Analyses indicate that clients reporting methamphetamine as the primary substance at admission have a statistically significant higher rate of successful discharge than clients indicating other primary substances at admission (Fisher's Exact Test, p < 0.05).

#### Outcome Variables by Discharge Status:

Three hundred seventy-one clients who completed the follow-up interview have been discharged from the treatment program. Treatment discharge status was examined in relation to key outcome variables: abstinence, arrests, and employment or enrollment in an educational program.



\*Statistically significant (Fisher's Exact Test, p < 0.0001).

• Of the 371 clients who were interviewed: 95.6% of the successfully discharged clients were abstinent; 95% had not been arrested; and 62.4% were working full or part-time or enrolled in an educational program at follow-up. There is a significant difference between clients who are discharged successfully and those who did not complete the treatment program for one of the three outcome variables: successfully discharged clients were significantly more likely to be abstinent (Fisher's Exact Test, p < 0.0001) than clients who did not successfully complete the treatment program.

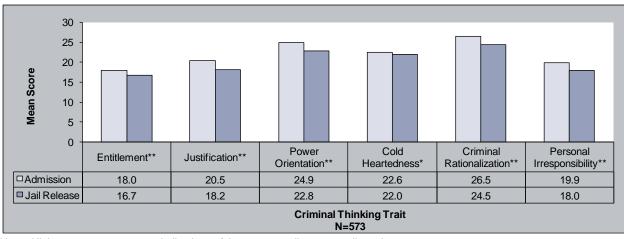
#### **Criminal Thinking Assessment**

Agency staff administer the Criminal Thinking Scales developed by Texas Christian University (TCU), Institute of Behavioral Research. (Simpson, D. D. & Hiller, M. [1999]. TCU data collection forms for correctional outpatient treatment. Fort Worth: Texas Christian University, Institute of Behavioral Research. [On-line]. Available: www.ibr.tcu.edu). The survey is administered to clients at admission, jail release, and three months post-jail release. The two-page instrument contains 37 items and measures six criminal thinking scales: entitlement, justification, power orientation, cold heartedness, criminal rationalization, and personal irresponsibility.

#### Admission to Jail Release:

Five hundred seventy-three clients have completed the survey at both admission and jail release. When comparing admission and jail release mean scores, statistically significant decreases were found on all scales: entitlement, justification, power orientation, cold heartedness, criminal rationalization, and personal irresponsibility (Wilcoxon Tests), indicating a reduction in criminal thinking for all six traits.



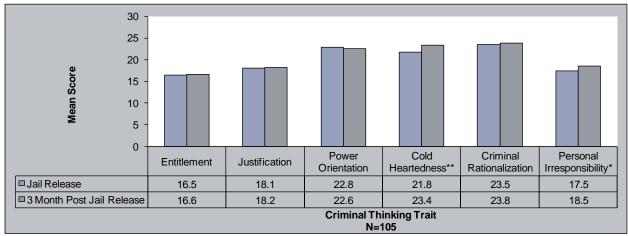


Note: Higher scores are stronger indications of the corresponding personality trait.

Not all clients complete surveys. To the extent that this causes a bias in the sample, comparisons may not reflect clients in the Jail-Based Substance Abuse Treatment Program as a whole.

#### Jail Release to Three Months Post-Jail Release:

One hundred five clients have completed the survey at both jail release and three months post-jail release. When comparing jail release and three months post-jail release mean scores, statistically significant increases were found for two scales, cold heartedness and personal irresponsibility, indicating an increase in criminal thinking (Wilcoxon Tests) for these traits.



Note: Higher scores are stronger indications of the corresponding personality trait.

Not all clients complete surveys. To the extent that this causes a bias in the sample, comparisons may not reflect clients in the Jail-Based Substance Abuse Treatment Program as a whole.

#### Admission, Jail Release, and Three Months Post-Jail Release:

Ninety-one clients have completed the criminal thinking survey at the three survey points: admission, jail release, and three months post-jail release. When comparing admission and three months post-jail release mean scores, statistically significant decreased in the mean scores were found for three of the six criminal thinking scales (Wilcoxon Tests), indicating a



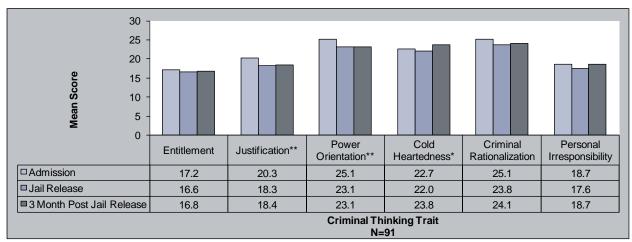
<sup>\*</sup>Statistically significant (Wilcoxon Test, p < 0.01).

<sup>\*\*</sup>Statistically significant (Wilcoxon Test, p < 0.0001).

<sup>\*</sup>Statistically significant (Wilcoxon Test, p < 0.05).

<sup>\*\*</sup>Statistically significant (Wilcoxon Test, p < 0.01).

reduction in criminal thinking for justification and power orientation; but an increase in criminal thinking for cold heartedness.

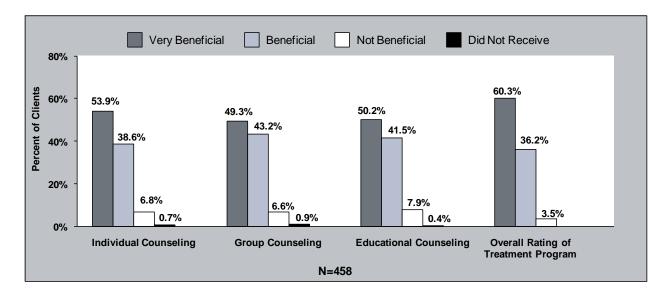


Note: Higher scores are stronger indications of the corresponding personality trait.

Not all clients complete surveys. To the extent that this causes a bias in the sample, comparisons may not reflect clients in the Jail-Based Substance Abuse Treatment Program as a whole.

#### Clients' Perceived Benefit

Results from 458 completed follow-up interviews at six months post admission indicate that 442 of the clients (96.5%) feel that the Jail-Based Treatment Program is either very beneficial or beneficial overall.



<sup>\*</sup>Statistically significant (Wilcoxon Test, p < 0.05).

<sup>\*\*</sup>Statistically significant (Wilcoxon Test, p < 0.01).

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#### **OVERVIEW**

In September 2002, the Iowa Department of Public Health (IDPH), Division of Behavioral Health was awarded a grant from the U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Assistance to implement substance abuse treatment services in a jail setting. The purpose of the grant was to deliver and evaluate substance abuse treatment services to clients during incarceration and after release from jail.

Since the grant began, IDPH has contracted with the Iowa Consortium for Substance Abuse Research and Evaluation (Consortium) to perform the outcome evaluation component of the Jail-Based Substance Abuse Treatment Program. The Consortium conducts a follow-up interview with clients in the program to assist in determining effectiveness of treatment services. The interview occurs approximately six months after admission to the jail-based portion of the treatment program and provides follow-up data to assess outcomes as well as analyze changes between admission and follow-up. Admission and follow-up data are self reported by clients.

Four substance abuse treatment agencies are involved in the Jail-Based Substance Abuse Treatment Program. United Community Services, Inc. (UCS), a Des Moines, Iowa-based agency, delivers treatment to clients in the Polk County Jail; Center for Alcohol and Drug Services, Inc. (CADS), an agency located in Davenport, Iowa delivers treatment to clients in the Scott County Jail; Community and Family Resources (CFR) located in Ames, Iowa delivers treatment to clients in the Story County Jail; and Jackson Recovery Centers based in Sioux City, Iowa delivers treatment to clients in the Woodbury County Jail and the Prairie Hills facility.

The current evaluation and this report examine outcomes for clients admitted from November 1, 2008 through December 31, 2010. Data collected during this time period are not combined with data collected previously by the Consortium for the Jail-Based Substance Abuse Treatment Program due to changes in protocol.

It is important to note that the evaluation is not designed to accommodate clients with multiple admissions. Although infrequent, such situations have occurred and through December 2010, a total of 36 clients have been readmitted. For the purpose of evaluation and record keeping, readmissions are excluded and only data for the first admission are included in this report. Excluding readmission data may make the reporting of successful discharge cases more conservative than if readmission data were included. For example, a client who did not maintain abstinence after the first admission and/or did not successfully complete the program could be readmitted and obtain a successful discharge and abstinence record. This successful outcome would be omitted from the report since only the first admission and discharge are utilized.

#### **EVALUATION PROCESS AND METHODS**

#### **Data Collection**

The program uses standardized client data collection systems developed by IDPH; data are collected by treatment agency staff on each client at admission and at discharge. The Consortium's follow-up data collection instrument integrates with client data collected at admission. Admission data, as well as follow-up data collected by Consortium staff, are client self-reported data.



The Consortium developed the Substance Abuse Incarceration Log System (SAILS), a web-based client data management tool, to assist the agencies with tracking clients as they move through the various phases of treatment. User accounts are set up for authorized staff at each treatment agency to access the system to assist in client management. SAILS provides data on clients admitted and discharged from the treatment program and is regularly updated by treatment agency and Consortium staff. All data transmissions are encrypted to ensure greater security. Treatment staff only have access to information relating to clients served by their agency.

Additionally, a web-based password protected tracking system was developed by the Consortium to assist research assistants in managing individual client data. Client tracking information provides a database that contains updated tracking and detailed case status information for each client.

#### **Evaluation Process and Methods**

The following subsections describe the treatment and evaluation process as it relates to the program.

#### Admission to the Treatment Program

An incarcerated client is admitted to the program after completing an assessment and screening process that involves judges, attorneys, and jail and treatment agency personnel. A signed consent form is obtained by the treatment agency authorizing client permission for the Consortium to receive contact information for the client. Each client is provided informational material that describes the Consortium's role and notes that the client will be invited to participate in the follow-up interview after release from jail. Admission data are collected by treatment agency staff and transmitted to the Consortium.

#### Release from Jail

The client usually receives substance abuse treatment both in jail and upon release from jail on an outpatient basis. Treatment agency staff notify the Consortium when the client is released from jail and provide the following information: a jail release date; updated client address and telephone information; and collateral contact information.

#### Discharge from the Treatment Program

In most cases, clients continue treatment after release from jail. Treatment length varies with individual client needs. Discharge information, including the discharge date and reason for discharge, is provided to the Consortium by treatment agency staff when the client is discharged from treatment.

#### Recruitment

Consortium staff members attempt to contact the client to invite him/her to participate in the follow-up telephone interview after receiving notification that the client has been released from jail. The Consortium's recruitment and tracking procedures are designed to enhance the level of participation in the evaluation process. The follow-up interview takes place approximately six months after admission to treatment. A twenty dollar gift card is provided to the client upon completion of the follow-up interview.



When Consortium staff reach a potential participant via telephone, they explain that they are calling on behalf of the Health Research Network (HRN) and that they would like to talk about participation in a follow-up study. HRN is a pseudonym the Consortium utilizes to assist in protecting client confidentiality. Procedures are established so that phone calls and mail from the Health Research Network can in no way be connected to substance abuse issues. Staff members confirm the identity of the client before describing the project in detail. The confirmation process involves matching the client's date of birth and last four digits of their social security number. If the information matches, the staff member reads the "Information Summary and Consent Document" that describes the project and attempts to recruit the client by securing an oral agreement to participate in the follow-up interview. During the recruitment call, participants are told when their interview can take place (six months post admission). Participants are informed that they will receive periodic update calls or letters, approximately every six to eight weeks, in an attempt to keep contact information current.

The Consortium has a toll-free number which is given to clients along with information regarding the confidential voice mail system. Clients without phone contact information or who do not have telephone service are sent letters asking them to call the Health Research Network's toll-free number in regard to a follow-up study. If clients do not respond to the phone calls or letters, treatment agency staff are contacted for assistance in updating contact information.

Clients can decline or withdraw participation at any time during recruitment or at any point during the follow-up interview process. There are no penalties for withdrawing participation in the study. Once a client declines participation, the case is officially closed unless the client later contacts the HRN and indicates a desire to participate. No future attempts are made to contact clients who choose not to participate in the follow-up interview.

#### Follow-Up Interview

The follow-up interview is conducted by telephone six months after the client is admitted into treatment. At that time, clients usually have received treatment for six months, both in and out of jail. It is not always possible to obtain the follow-up interview exactly six months post admission, therefore, the project design allows staff to interview participants anywhere from two weeks prior to eight weeks after the date that indicates six months post admission. Clients receive a twenty-dollar gift card upon completion of the follow-up interview.

#### **CLIENTS**

#### **Description of Clients at Admission**

Admission data in this report describe the group of clients with treatment admission dates from November 1, 2008 through December 31, 2010 in Polk, Scott, Story, and Woodbury Counties. During this period, 1,135 individuals were admitted to the program: 418 in Polk County, 397 in Scott County, 206 in Story County, and 114 in Woodbury County. Of the 1,135 clients admitted, admission data have been received on 1,027 clients; data for the remaining 108 clients are pending due to development of a new data repository requiring new data submission procedures. These changes were implemented by IDPH, and the data will be included in future reports.



Of the 1,027 clients for whom admission data have been received, 196 of the clients (19.1%) were female and 831 clients (80.9%) were male. Table 1 shows sex by county.

Table 1. Sex

	TOTAL % (N=1,027)*	Polk County % (N=412)*	Scott County % (N=304)*	Story County % (N=201)*	Woodbury County % (N=110)*
Male	80.9 (831)	85.7 (353)	74.7 (227)	89.6 (180)	64.5 (71)
Female	19.1 (196)	14.3 (59)	25.3 (77)	10.4 (21)	35.5 (39)

Note: Due to rounding, percentages may not add up to exactly 100%.

Clients range in age at admission from 18 to 65 years of age with a median age of 31 years. Table 2 shows the age range and median age by county.

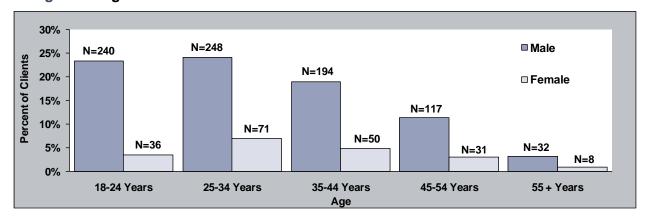
Table 2. Age at Admission

Total N=1,027*		Polk County N=412*		Scott County N=304*		Story County N=201*		Woodbury County N=110*							
	Min	Max	Median	Min	Max	Median	Min	Max	Median	Min	Max	Median	Min	Max	Median
Years of Age	18	65	31	18	63	32	18	64	30	18	65	31	18	60	30

<sup>\*</sup>Admission data for 108 clients (six from Polk County, 93 from Scott County, five from Story County, and four from Woodbury County) are pending and not included in this table; data will be included in future reports.

Figure 1 shows the number of males and females in five age categories. The highest number of males and females at admission were between the ages of 25 and 34 years of age.

Figure 1. Age and Sex at Admission



<sup>\*</sup>Admission data for 108 clients (six from Polk County, 93 from Scott County, five from Story County, and four from Woodbury County) are pending and not included in this table; data will be included in future reports.

Table 3 shows the primary race reported at admission. Additionally, 54 clients (5.3%) reported being of Puerto Rican, Mexican, Cuban, Hispanic, or Latino ethnicity at admission.

**Table 3. Primary Race** 

	All Clients % (N=1,027)*	Polk County % (N=412)*	Scott County % (N=304)*	Story County % (N=201)*	Woodbury County % (N=110)*
Caucasian/White	69.9 (718)	76.7 (316)	61.8 (188)	75.1 (151)	57.3 (63)
African American/ Black	22.5 (231)	18.0 (74)	34.5 (105)	17.9 (36)	14.5 (16)
American Indian	3.1 (32)	0.7 (3)	1.3 (4)	1.0 (2)	20.9 (23)
Asian	0.6 (6)	0.5 (2)	1.0 (3)	0.5 (1)	0.0 (0)
Hawaiian or Pacific Islander	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)
Alaskan Native	0.1 (1)	0.2 (1)	0.0 (0)	0.0 (0)	0.0 (0)
Race Unknown or Data Missing	3.8 (39)	3.9 (16)	1.3 (4)	5.5 (11)	7.3 (8)

Note: Due to rounding, percentages may not add up to exactly 100%.

Tables 4 through 17 on the following pages present admission responses from the 1,027 clients for whom admission data have been received. Admission data for six Polk County clients, 93 Scott County clients, five Story County clients, and four Woodbury County clients admitted to the program are pending and will be included in future reports. According to program guidelines, admission data collected by treatment agency staff reflect the client's status prior to incarceration. The first column describes the responses for the question. The second column presents responses for 1,027 clients in the Jail-Based Substance Abuse Treatment Program who answered this question at admission. The third column describes the responses for 412 clients who were admitted in Polk County; the fourth column describes the responses for 304 clients who were admitted in Scott County; the fifth column describes the responses for 201 clients who were admitted in Story County; and the sixth column describes the responses for the 110 clients who were admitted in Woodbury County.

Admission data include the following highlights:

- **Primary Substance:** At admission, 100% of clients indicated a primary substance of use. Alcohol was the most common, reported by 44.1% of clients. Marijuana was the second most common primary substance indicated by 21.4% of clients at admission, followed by methamphetamine (14.2%), and cocaine (11.9%).
- **Secondary Substance:** A secondary substance was reported by 61.1% of clients at admission. Marijuana was the most commonly used secondary substance, indicated by 22.1% of clients.
- **Tertiary Substance:** A tertiary substance was reported at admission by 25.5% of clients. The most commonly used tertiary substance was marijuana, reported by 6.4% of clients.



<sup>\*</sup>Admission data for 108 clients (six from Polk County, 93 from Scott County, five from Story County, and four from Woodbury County) are pending and not included in this table; data will be included in future reports. Additionally, data for primary race for four additional clients are missing or clients responded "unknown" when asked their race at admission.

- Arrests: At admission, 98.4% of clients reported one or more arrests in the previous twelve months.
- **Employment:** At admission (prior to incarceration), 11.1% of clients were employed full-time and 5.6% of clients were employed part-time.
- Hospitalizations Due to a Substance Abuse-Related Problem: In the six months prior to admission, 9.2% of clients indicated one or more hospitalizations due to a substance abuserelated problem.
- Relationship Status and Living Arrangement: Over half of the clients (51.1%) were single at admission and the most common living arrangement prior to incarceration was living with parents (18.4%).



Table 4. Primary Substance at Admission

Primary Substance	All Clients at Admission* % (N=1,027)	Polk County Clients at Admission* % (N=412)	Scott County Clients at Admission % (N=304)	Story County Clients at Admission* % (N=201)	Woodbury County Clients at Admission* % (N=110)
None	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)
Methamphetamine	14.2 (146)	20.9 (86)	1.6 (5)	12.9 (26)	26.4 (29)
Marijuana	21.4 (220)	18.9 (78)	25.3 (77)	20.9 (42)	20.9 (23)
Alcohol	44.1 (453)	39.8 (164)	38.5 (117)	59.7 (120)	47.3 (52)
Cocaine	11.9 (122)	9.0 (37)	26.3 (80)	2.0 (4)	0.9 (1)
Heroin	1.3 (13)	0.5 (2)	2.6 (8)	1.5 (3)	0.0 (0)
Other Opiates and Synthetics	5.3 (54)	8.3 (34)	3.9 (12)	2.0 (4)	3.6 (4)
Non-Prescription Methadone	0.1 (1)	0.0 (0)	0.0 (0)	0.5 (1)	0.0 (0)
PCP	0.2 (2)	0.5 (2)	0.0 (0)	0.0 (0)	0.0 (0)
Other Hallucinogens	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)
Other Amphetamine	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)
Other Stimulants	0.1 (1)	0.0 (0)	0.0 (0)	0.0 (0)	0.9 (1)
Benzodiazepines	0.1 (1)	0.0 (0)	0.3 (1)	0.0 (0)	0.0 (0)
Other Tranquilizers	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)
Barbiturates	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)
Other Sedatives/Hypnotics	0.2 (2)	0.0 (0)	0.7 (2)	0.0 (0)	0.0 (0)
Inhalants	0.2 (2)	0.5 (2)	0.0 (0)	0.0 (0)	0.0 (0)
Over-the-Counter	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)
Steroids	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)
Ecstasy	0.6 (6)	0.7 (3)	0.7 (2)	0.5 (1)	0.0 (0)
Oxycontin	0.2 (2)	0.5 (2)	0.0 (0)	0.0 (0)	0.0 (0)
Other Prescribed Analgesics	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)
Other	0.2 (2)	0.5 (2)	0.0 (0)	0.0 (0)	0.0 (0)

Note: Due to rounding, percentages may not add up to exactly 100%.
\*Admission data for 108 clients (six from Polk County, 93 from Scott County, five from Story County, and four from Woodbury County) are pending and not included in this table; data will be included in future reports.

Table 5. Secondary Substance at Admission

Secondary Substance	All Clients at Admission* % (N=1,027)	Polk County Clients at Admission* % (N=412)	Scott County Clients at Admission* % (N=304)	Story County Clients at Admission* % (N=201)	Woodbury County Clients at Admission* % (N=110)
None	38.9 (400)	48.3 (199)	22.0 (67)	43.3 (87)	42.7 (47)
Methamphetamine	6.2 (64)	4.9 (20)	0.0 (0)	14.4 (29)	13.6 (15)
Marijuana	22.1 (227)	21.4 (88)	25.7 (78)	18.9 (38)	20.9 (23)
Alcohol	18.0 (185)	11.9 (49)	28.3 (86)	14.4 (29)	19.1 (21)
Cocaine	8.2 (84)	7.5 (31)	14.1 (43)	3.5 (7)	2.7 (3)
Heroin	1.3 (13)	0.5 (2)	3.6 (11)	0.0 (0)	0.0 (0)
Other Opiates and Synthetics	2.3 (24)	3.2 (13)	2.3 (7)	2.0 (4)	0.0 (0)
Non-Prescription Methadone	0.1 (1)	0.0 (0)	0.3 (1)	0.0 (0)	0.0 (0)
PCP	0.1 (1)	0.2 (1)	0.0 (0)	0.0 (0)	0.0 (0)
Other Hallucinogens	0.2 (2)	0.5 (2)	0.0 (0)	0.0 (0)	0.0 (0)
Other Amphetamine	0.4 (4)	0.2 (1)	0.3 (1)	0.5 (1)	0.9 (1)
Other Stimulants	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)
Benzodiazepines	0.2 (2)	0.5 (2)	0.0 (0)	0.0 (0)	0.0 (0)
Other Tranquilizers	0.1 (1)	0.0 (0)	0.3 (1)	0.0 (0)	0.0 (0)
Barbiturates	0.2 (2)	0.0 (0)	0.7 (2)	0.0 (0)	0.0 (0)
Other Sedatives/Hypnotics	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)
Inhalants	0.1 (1)	0.2 (1)	0.0 (0)	0.0 (0)	0.0 (0)
Over-the-Counter	0.1 (1)	0.0 (0)	0.0 (0)	0.5 (1)	0.0 (0)
Steroids	0.1 (1)	0.0 (0)	0.3 (1)	0.0 (0)	0.0 (0)
Ecstasy	1.2 (12)	0.7 (3)	2.0 (6)	1.5 (3)	0.0 (0)
Oxycontin	0.2 (2)	0.0 (0)	0.0 (0)	1.0 (2)	0.0 (0)
Other Prescribed Analgesics	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)
Other	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)

Note: Due to rounding, percentages may not add up to exactly 100%.
\*Admission data for 108 clients (six from Polk County, 93 from Scott County, five from Story County, and four from Woodbury County) are pending and not included in this table; data will be included in future reports.

Table 6. Tertiary Substance at Admission

Tertiary Substance	All Clients at Admission* % (N=1,027)	Polk County Clients at Admission* % (N=412)	Scott County Clients at Admission* % (N=304)	Story County Clients at Admission* % (N=201)	Woodbury County Clients at Admission* % (N=110)
None	74.5 (765)	82.5 (340)	55.9 (170)	83.6 (168)	79.1 (87)
Methamphetamine	2.9 (30)	2.4 (10)	1.0 (3)	6.5 (13)	3.6 (4)
Marijuana	6.4 (66)	3.2 (13)	12.8 (39)	3.0 (6)	7.3 (8)
Alcohol	5.9 (61)	5.3 (22)	8.6 (26)	3.5 (7)	5.5 (6)
Cocaine	4.0 (41)	1.7 (7)	9.5 (29)	1.5 (3)	1.8 (2)
Heroin	0.6 (6)	0.0 (0)	1.0 (3)	0.5 (1)	1.8 (2)
Other Opiates and Synthetics	1.4 (14)	1.7 (7)	2.0 (6)	0.5 (1)	0.0 (0)
Non-Prescription Methadone	0.1 (1)	0.2 (1)	0.0 (0)	0.0 (0)	0.0 (0)
PCP	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)
Other Hallucinogens	0.7 (7)	0.2 (1)	1.3 (4)	0.5 (1)	0.9 (1)
Other Amphetamine	0.4 (4)	0.7 (3)	0.0 (0)	0.5 (1)	0.0 (0)
Other Stimulants	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)
Benzodiazepines	0.3 (3)	0.0 (0)	1.0 (3)	0.0 (0)	0.0 (0)
Other Tranquilizers	0.2 (2)	0.0 (0)	0.7 (2)	0.0 (0)	0.0 (0)
Barbiturates	0.2 (2)	0.0 (0)	0.7 (2)	0.0 (0)	0.0 (0)
Other Sedatives/Hypnotics	0.1 (1)	0.2 (1)	0.0 (0)	0.0 (0)	0.0 (0)
Inhalants	0.2 (2)	0.2 (1)	0.3 (1)	0.0 (0)	0.0 (0)
Over-the-Counter	0.2 (2)	0.2 (1)	0.3 (1)	0.0 (0)	0.0 (0)
Steroids	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)
Ecstasy	1.7 (17)	0.5 (2)	4.9 (15)	0.0 (0)	0.0 (0)
Oxycontin	0.1 (1)	0.2 (1)	0.0 (0)	0.0 (0)	0.0 (0)
Other Prescribed Analgesics	0.1 (1)	0.2 (1)	0.0 (0)	0.0 (0)	0.0 (0)
Other	0.1 (1)	0.2 (1)	0.0 (0)	0.0 (0)	0.0 (0)

Note: Due to rounding, percentages may not add up to exactly 100%.

\*Admission data for 108 clients (six from Polk County, 93 from Scott County, five from Story County, and four from Woodbury County) are pending and not included in this table; data will be included in future reports.

Table 7. Frequency of Primary Substance at Admission

Frequency	All Clients at Admission* % (N=1,027)	Polk County Clients at Admission* % (N=412)	Scott County Clients at Admission* % (N=304)	Story County Clients at Admission* % (N=201)	Woodbury County Clients at Admission* % (N=110)
No Use in Past Six Months	3.5 (36)	0.2 (1)	3.3 (10)	7.0 (14)	10.0 (11)
No Past Month Use	11.3 (116)	2.7 (11)	5.3 (16)	24.4 (49)	36.4 (40)
One to Three Times in Past Month	9.5 (98)	2.9 (12)	7.9 (24)	22.4 (45)	15.5 (17)
One to Two Times per Week	5.4 (56)	3.4 (14)	5.3 (16)	11.4 (23)	2.7 (3)
Three to Six Times per Week	16.8 (173)	22.8 (94)	16.8 (51)	9.5 (19)	8.2 (9)
Once Daily	11.7 (120)	11.4 (47)	7.9 (24)	20.9 (42)	6.4 (7)
Two to Three Times Daily	12.1 (124)	18.9 (78)	12.2 (37)	0.5 (1)	7.3 (8)
Four or More Times Daily	29.6 (304)	37.6 (155)	41.4 (126)	4.0 (8)	13.6 (15)

Table 8. Arrests in Previous Twelve Months at Admission

Number of Arrests	All Clients at Admission* % (N=1,027)	Polk County Clients at Admission* % (N=412)	Scott County Clients at Admission* % (N=304)	Story County Clients at Admission* % (N=201)	Woodbury County Clients at Admission* % (N=110)
None	1.6 (16)	0.0 (0)	0.7 (2)	4.0 (8)	5.5 (6)
One to Three Times	80.4 (826)	76.7 (316)	78.3 (238)	91.0 (183)	80.9 (89)
Four or More Times	18.0 (185)	23.3 (96)	21.1 (64)	5.0 (10)	13.6 (15)



Note: Due to rounding, percentages may not add up to exactly 100%.
\*Admission data for 108 clients (six from Polk County, 93 from Scott County, five from Story County, and four from Woodbury County) are pending and not included in this table; data will be included in future reports.

<sup>\*</sup>Admission data for 108 clients (six from Polk County, 93 from Scott County, five from Story County, and four from Woodbury County) are pending and not included in this table; data will be included in future reports.

Table 9. Employment Status at Admission

Employment Status	All Clients at Admission* % (N=1,027)	Polk County Clients at Admission* % (N=412)	Scott County Clients at Admission* % (N=304)	Story County Clients at Admission* % (N=201)	Woodbury County Clients at Admission* % (N=110)
Employed Full-Time (≥35 hrs/wk)	11.1 (114)	2.2 (9)	23.0 (70)	8.0 (16)	17.3 (19)
Employed Part-Time (<35 hrs/wk)	5.6 (58)	0.7 (3)	13.2 (40)	2.0 (4)	10.0 (11)
Unemployed (looking for work in the past 30 days)	13.7 (141)	2.2 (9)	28.6 (87)	10.9 (22)	20.9 (23)
Not in Labor Force	69.5 (714)	94.9 (391)	35.2 (107)	79.1 (159)	51.8 (57)

Table 10. Months Employed in Previous Six Months at Admission

Months Employed	All Clients at Admission* % (N=1,027)	Polk County Clients at Admission* % (N=412)	Scott County Clients at Admission* % (N=304)	Story County Clients at Admission* % (N=201)	Woodbury County Clients at Admission* % (N=110)
None	45.9 (471)	43.7 (180)	54.3 (165)	40.8 (82)	40.0 (44)
3 Months or Less	fonths or Less 20.0 (205)		19.7 (60)	20.9 (42)	20.0 (22)
4 or More Months	34.2 (351)	36.7 (151)	26.0 (79)	38.3 (77)	40.0 (44)

Note: Due to rounding, percentages may not add up to exactly 100%.

Table 11. Current Taxable Income at Admission

Monthly Income	All Clients at Admission* % (N=1,027)	Clients Clients at at Admission* Admission* Admission*		Story County Clients at Admission* % (N=201)	Woodbury County Clients at Admission* % (N=110)
None	73.9 (759)	74.5 (307)	62.2 (189)	89.6 (180)	75.5 (83)
\$500 or Less	4.2 (43)	4.4 (18)	5.3 (16)	1.5 (3)	5.5 (6)
\$501 to \$1000	9.5 (98)	9.5 (39) 14.5 (44)		2.0 (4)	10.0 (11)
\$1001 to \$2000	8.3 (85)	7.5 (31)	12.2 (37)	5.0 (10)	6.4 (7)
Over \$2000	4.1 (42)	4.1 (17)	5.9 (18)	2.0 (4)	2.7 (3)

<sup>\*</sup>Admission data for 108 clients (six from Polk County, 93 from Scott County, five from Story County, and four from Woodbury County) are pending and not included in this table; data will be included in future reports.



<sup>\*</sup>Admission data for 108 clients (six from Polk County, 93 from Scott County, five from Story County, and four from Woodbury County) are pending and not included in this table; data will be included in future reports.

<sup>\*</sup>Admission data for 108 clients (six from Polk County, 93 from Scott County, five from Story County, and four from Woodbury County) are pending and not included in this table; data will be included in future reports.

Table 12. Primary Source of Support at Admission

Primary Source of Support	All Clients at Admission* % (N=1,027)	Polk County Clients at Admission* % (N=412)	Scott County Clients at Admission* % (N=304)	Story County Clients at Admission* % (N=201)	Woodbury County Clients at Admission* % (N=110)
None	46.0 (472)	41.7 (172)	30.6 (93)	69.7 (140)	60.9 (67)
Wages/Salary	ges/Salary 22.8 (234)		35.5 (108)	10.0 (20)	28.2 (31)
Family/Friends	19.2 (197)	30.3 (125)	14.1 (43)	14.1 (43) 13.4 (27)	
Public Assistance	2.9 (30)	2.4 (10)	5.9 (18)	0.5 (1)	0.9 (1)
Retirement/Pension	0.6 (6)	0.5 (2)	0.7 (2)	0.5 (1)	0.9 (1)
Disability	3.0 (31)	1.2 (5)	6.9 (21)	1.5 (3)	1.8 (2)
SSI/SSDI	1.3 (13)	2.9 (12)	0.0 (0)	0.5 (1)	0.0 (0)
Other	4.3 (44)	2.7 (11)	6.3 (19)	4.0 (8)	5.5 (6)

Table 13. Days of Work or School Missed Due to a Substance Abuse Problem in Previous Six Months at Admission

Days of Work or School Missed Due to a Substance Abuse Problem	All Clients at Admission* % (N=1,027)	Polk County Clients at Admission* % (N=412)	Scott County Clients at Admission* % (N=304)	Story County Clients at Admission* % (N=201)	Woodbury County Clients at Admission* % (N=110)
Zero Days	53.0 (544)	61.2 (252)	30.3 (92)	67.2 (135)	59.0 (65)
One to Five Days	7.4 (76)	7.0 (29)	11.8 (36)	2.0 (4)	6.4 (7)
Six or More Days	Six or More Days 21.4 (220)		7.9 (24)	30.8 (62)	2.7 (3)
Not Applicable	Applicable 18.2 (187)		50.0 (152)	0.0 (0)	31.8 (35)

Note: Due to rounding, percentages may not add up to exactly 100%.

Table 14. Days per Month Attended AA, NA, or Similar Meetings at Admission

Number of Meetings	All Clients at Admission* % (N=1,027)	Clients Clients Clients at at at Admission* Admission* Admission*		Story County Clients at Admission* % (N=201)	Woodbury County Clients at Admission* % (N=110)
None	72.6 (746)	83.0 (342)	62.5 (190)	65.7 (132)	74.5 (82)
One to Ten Meetings	25.9 (266) 15.8 (65) 35.2 (107		35.2 (107)	33.3(67)	24.5 (27)
Eleven or More Meetings	1 5 (15)		2.3 (7)	1.0 (2)	0.9 (1)

<sup>\*</sup>Admission data for 108 clients (six from Polk County, 93 from Scott County, five from Story County, and four from Woodbury County) are pending and not included in this table; data will be included in future reports.



<sup>\*</sup>Admission data for 108 clients (six from Polk County, 93 from Scott County, five from Story County, and four from Woodbury County) are pending and not included in this table; data will be included in future reports.

<sup>\*</sup>Admission data for 108 clients (six from Polk County, 93 from Scott County, five from Story County, and four from Woodbury County) are pending and not included in this table; data will be included in future reports.

Table 15. Number of Hospitalizations Reported at Admission Due to a Substance Abuse Related Problem

Number of Hospitalizations in Previous Six Months	All Clients at Admission* % (N=1,027)	Polk County Clients at Admission* % (N=412)	Scott County Clients at Admission* % (N=304)	Story County Clients at Admission* % (N=201)	Woodbury County Clients at Admission* % (N=110)	
None	90.8 (933)	90.3 (372)	86.5 (263)	98.5 (198)	90.9 (100)	
One Time	6.3 (65)	7.0 (29)	9.2 (28)	1.0 (2)	5.5 (6)	
Two or More Times	2.8 (29)	2.7 (11)	4.3 (13)	0.5 (1)	3.6 (4)	

Table 16. Relationship Status at Admission

Relationship Status	All Clients at Admission* % (N=1,027)	Clients Clients at at Admission* Admission*		Story County Clients at Admission* % (N=201)	Woodbury County Clients at Admission* % (N=110)
Single	51.1 (525)	.1 (525) 46.8 (193) 59.9 (182)		48.8 (98)	47.3 (52)
Married	11.0 (113)	12.1 (50)	8.9 (27)	10.9 (22)	12.7 (14)
Cohabitating	14.2 (146)	16.5 (68) 11.8 (36)		11.9 (24)	16.4 (18)
Separated	5.6 (58)	6.3 (26)	5.6 (17)	3.5 (7)	7.3 (8)
Divorced	orced 17.1 (176)		13.2 (40)	23.9 (48)	14.5 (16)
Widowed	0.9 (9)	0.7 (3)	0.7 (2)	1.0 (2)	1.8 (2)

<sup>\*</sup>Admission data for 108 clients (six from Polk County, 93 from Scott County, five from Story County, and four from Woodbury County) are pending and not included in this table; data will be included in future reports.

<sup>\*</sup>Admission data for 108 clients (six from Polk County, 93 from Scott County, five from Story County, and four from Woodbury County) are pending and not included in this table; data will be included in future reports.

Table 17. Living Arrangements at Admission

Living Arrangement	All Clients at Admission* % (N=1,027)	Polk County Clients at Admission* % (N=412)	Scott County Clients at Admission* % (N=304)	Story County Clients at Admission* % (N=201)	Woodbury County Clients at Admission* % (N=110)	
Alone	13.5 (139)	18.9 (78) 9.9 (30)		12.9 (26)	4.5 (5)	
Parents	18.4 (189)	22.8 (94)	17.1 (52)	10.9 (22)	19.1 (21)	
Significant Other Only	14.2 (146)	18.0 (74)	16.4 (50)	6.5 (13)	8.2 (9)	
Significant Other and Child(ren)	15.2 (156) 18.7 (77) 15.8 (48)		9.5 (19)	10.9 (12)		
Child(ren) Only	2.3 (24)	2.9 (12)	1.6 (5)	2.0 (4)	2.7 (3)	
Other Adults	13.8 (142)	12.4 (51)	18.8 (57)	10.4 (21)	11.8 (13)	
Other Adults and Child(ren)	4.3 (44)	3.2 (13)	7.9 (24)	3.0 (6)	0.9 (1)	
Jail/Correctional Facility	10.8 (111)	0.0 (0)	3.6 (11)	30.3 (61)	35.5 (39)	
Homeless, Shelter	5.3 (54)	2.7 (11)	6.6 (20)	9.0 (18)	4.5 (5)	
Halfway House, Group Home, Transitional Housing	2.1 (22)	0.5 (2)	2.3 (7)	5.5 (11)	1.8 (2)	
Hospital	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)	0.0 (0)	

#### DISCHARGE AND LENGTH OF STAY

Of the 1,135 clients who have been admitted into the treatment program through December 31, 2010, 98 clients are still receiving treatment in jail and 1,037 clients have been released from the in-jail treatment portion of the program. Following their release from jail, many clients continue to receive treatment while on probation, therefore, jail release date and treatment discharge date do not coincide. Table 18 shows the median length of stay in the in-jail portion of treatment, by county, for the 1,037 released clients from the onset of treatment until their release from the in-jail portion of treatment.

Table 18. Length of Stay in In-Jail Portion of Treatment

		Total N=1,037	7	Po	olk Coun N=364	nty	Sc	cott County N=369		Scott County N=369		, , , , , , , , , , , , , , , , , , , ,		nty	Woodbury County N=106		
	Min	Max	Median	Min	Max	Median	Min	Max	Median	Min	Max	Median	Min	Max	Median		
Days	0	370	54	0	241	119	1	137	52	0	370	36	0	168	57		



<sup>\*</sup>Admission data for 108 clients (six from Polk County, 93 from Scott County, five from Story County, and four from Woodbury County) are pending and not included in this table; data will be included in future reports.

Eight hundred forty-eight clients have been discharged from the treatment program. When transmitting discharge information for the 848 clients, agency staff indicate whether or not each client successfully completed the treatment program. Two hundred forty-nine of the clients (29.4%) were discharged as "successful." Three hundred fourteen clients (37%) were discharged from the program due to noncompliance or deciding to remove themselves from treatment and were designated as "terminated." Two hundred eighty-five clients (33.6%) were discharged for "neutral" reasons (this category includes but is not limited to clients who were discharged due to: legal issues related to a sentence; transferring to another treatment program; or medical reasons). Analyses indicate that clients reporting methamphetamine as the primary substance at admission have a statistically significant higher rate of successful discharge than clients indicating other primary substances at admission; Fisher's Exact Test, p < 0.05).

Table 19 presents the length of stay in the treatment program, by county, for the 848 discharged clients from the onset of treatment until their discharge from treatment.

Table 19. Length of Stay in Treatment Program

	Total N=848			Po	Polk County N=291		Scott County N=290		Story County N=183		Woodbury County N=84					
		Min	Max	Median	Min	Max	Median	Min	Max	Median	Min	Max	Median	Min	Max	Median
ı	Days	0	601	128	7	601	271	1	478	80	0	470	55	5	345	136

Table 20 examines length of stay by discharge status. Of the 848 clients who have been discharged from treatment, 249 (29.4%) were discharged successfully. This subgroup of clients averaged: 115 days in jail (range 0 to 241 days); 182 days in treatment following their release from jail (range 0 to 426 days); and 288 days in jail and post jail combined treatment (range 32 to 484 days). Successfully discharged clients had the longest length of stay. The differences in length of stay were significant among the three discharge categories for length of stay in jail and length of stay in treatment following jail release (Kruskal-Wallis Tests, all p-values < 0.05). Additionally, the total length of stay in treatment was significantly longer for successfully discharged clients (Kruskal-Wallis Tests, all p < 0.05).

Table 20. Length of Stay by Discharge Status

Recorded Discharge Status	N	Median Number of Days Client Received Treatment While in Jail	Median Number of Days Client Received Treatment Following Release from Jail	Median Number of Total Days Client Received Treatment	
Successful Completion	249	115	182	288	
Terminated	314	51	19	82	
Neutral Discharge	285	53	0	74	

#### **OUTCOMES**

#### **Overview of Client Activity**

The Consortium attempts to contact each client to invite him/her to participate in a follow-up interview after receiving notification of that individual's release. Of the 1,135 clients admitted through December 31, 2010, 1,037 have been released from jail and can be contacted to participate in the follow-up interview. As of December 31, 2010, Consortium staff have recruited 573 clients to participate in the interview; 15 clients declined participation. Efforts are underway to locate and attempt to recruit clients who have been released from jail and are not yet eligible for an interview.

Eight hundred forty-three clients have reached six months post admission and have been eligible for participation in the evaluation process. Of these, 458 clients completed the follow-up interview. Twenty-eight clients became incarcerated after recruitment and 29 recruited clients could not be located for the interview. Of the recruited clients due for the follow-up interview who were not incarcerated (487 clients), 94% received an interview. The remaining 58 individuals, who have been recruited and are not yet eligible for an interview, are receiving regular update calls from staff as their interview dates near. There were 328 clients classified as "not able to recruit" for the follow-up interview. Of these 328 individuals: 193 were incarcerated (staff does not recruit or interview incarcerated individuals); 133 clients could not be located; two clients were deceased.

#### **Outcomes at Admission and Follow-Up**

Table 21 on the following page shows client outcomes by comparing admission data and follow-up interview data. Three outcome variables are presented: abstinence, no arrests, and employment or enrollment in an educational program. Abstinence refers to abstinence from all substances in the previous six months. The outcome "no arrests" is defined as not having been arrested during the previous twelve months at admission and no arrests in the previous six months at follow-up. The outcome "employment or enrolled in an educational program" is defined as currently working full-time (at least 35 hours per week) or part-time (less than 35 hours per week), or enrolled in a vocational, training, or educational program in the past 30 days. It is important to note that the question regarding enrollment in an educational program is not asked at admission.

At admission, 100% of clients indicated a primary substance of use. Of these, 991 (96.5%) reported substance use in the previous six months. One thousand eleven clients (98.4%) reported one or more arrests in the previous twelve months. One hundred seventy-two clients (16.7%) were employed full or part-time at admission. Results from the 458 clients who completed a follow-up interview six months after admission show that 86.2% of the clients interviewed reported abstinence, 93.4% had not been arrested, and 59.8% were working full or part-time or enrolled in an educational program.



Table 21. Outcomes at Admission and Follow-Up

	N	Abstinence % (N)	No Arrests % (N)	Employed (Full or Part-Time) or Enrolled in Educational Program % (N)
Admission*	1,027	3.5 (36)	1.6 (16)	16.7 (172)**
Follow-Up	458	86.2 (395)	93.4 (428)	59.8 (274)

<sup>\*</sup>Admission data for 108 clients (six from Polk County, 93 from Scott County, five from Story County, and four from Woodbury County) are pending and not included in this table; data will be included in future reports.

#### **Changes from Admission to Follow-Up**

Tables 22 through 24 and Figures 2 through 13 on the following pages reflect outcomes based on a comparison of admission data and follow-up interview data collected approximately six months after admission. The follow-up period refers to the six months preceding the interview (admission to six months post admission).

Comparisons on individual variables are made between status at admission and status at follow-up on those clients who had a response at *both* admission and follow-up. The tables and figures list the response options for the question and provide the responses of 457 clients who answered the particular item both at admission and follow-up; data for one client who completed the follow-up interview are excluded due to pending admission data; data will be included in future reports if it is received.

Follow-up data include the following highlights:

- **Primary Substance:** Three hundred ninety-four clients (86.2%) indicated abstinence. Of the 63 clients who reported use at follow-up, 43 clients indicated alcohol, 13 clients reported marijuana, five clients indicated cocaine, one client reported methamphetamine, and one client indicated heroin as the primary substance at follow-up. Twenty-six of the 63 clients (41.3%) who reported use in the past six months at follow-up indicated no use during the 30 day period prior to their interview, resulting in past 30-day abstinence among 91.9% of the clients six months following admission.
- **Secondary Substance:** Four hundred forty-two clients (96.7%) reported no secondary substance. Seven clients reported the use of alcohol, four clients indicated use of marijuana, three clients reported the use of cocaine, and one client indicated use of other opiates and synthetics as their secondary substance in the past six months at follow-up.
- **Arrests:** Four hundred twenty-seven clients (93.4%) interviewed were arrest-free. Thirty clients (6.6%) had been arrested during the six months following admission to treatment.
- **Employment:** At follow-up, over half of the clients (52.5%) were employed (either full or part-time), compared to 18.1% employed at admission.



<sup>\*\*</sup>Data for enrollment in an educational program are not included for clients at admission because the question is not asked.

- Hospitalizations Due to a Substance Abuse-Related Problem: Seven clients (1.5%) interviewed indicated one or more hospitalizations due to a substance abuse-related problem during the six months post admission time period.
- Relationship Status and Living Arrangements: Over half of the clients (54.5%) were single and the most common living arrangement was living in a halfway house or transitional housing facility at follow-up, indicated by 155 clients (33.9%).



As shown in Table 22, no primary substance was indicated by 86.2% of clients at follow-up (six months after admission). Among clients who completed a follow-up interview, alcohol was the most frequently reported substance at admission and follow-up, indicated by 43.8% at admission and 9.4% at six months post admission.

**Table 22. Primary Substance** 

Primary Substance	Clients with Completed Follow-Up Interview % (N=457)		
Substance	Admission	Follow-Up	
None	0.0 (0)	86.2 (394)	
Methamphetamine	13.8 (63)	0.2 (1)	
Marijuana	22.8 (104)	2.8 (13)	
Alcohol	43.8 (200) 9.4 (43)		
Cocaine	11.8 (54)	1.1 (5)	
Heroin	1.3 (6)	0.2 (1)	
Other Opiates and Synthetics	5.0 (23)	0.0 (0)	
Non-Prescription Methadone	0.2 (1)	0.0 (0)	
PCP	0.0 (0)	0.0 (0)	
Other Hallucinogens	0.0 (0)	0.0 (0)	
Other Amphetamine	0.0 (0)	0.0 (0)	
Other Stimulants	0.0 (0)	0.0 (0)	
Benzodiazepines	0.0 (0)	0.0 (0)	
Other Tranquilizers	0.0 (0)	0.0 (0)	
Barbiturates	0.0 (0)	0.0 (0)	
Other Sedatives/Hypnotics	0.4 (2)	0.0 (0)	
Inhalants	0.2 (1)	0.0 (0)	
Over-the-Counter	0.0 (0)	0.0 (0)	
Steroids	0.0 (0)	0.0 (0)	
Ecstasy	0.0 (0)	0.0 (0)	
Oxycontin	0.2 (1)	0.0 (0)	
Other Prescribed Analgesics	0.0 (0)	0.0 (0)	
Other	0.4 (2)	0.0 (0)	

Note: Data for one client who completed the follow-up interview are excluded from this table due to pending admission data; data will be included in future reports.

Due to rounding, percentages may not add up to exactly 100%.

A client's primary substance may change from admission to follow-up.



Table 23 shows that clients responding "none" to secondary substance use increased by 52.9 percentage points from 43.8% at admission to 96.7% at six months post admission. Fifteen clients (3.3%) reported use of a secondary substance at follow-up.

**Table 23. Secondary Substance** 

Secondary Substance	Clients with Completed Follow-Up Interview % (N=457)		
	Admission	Follow-Up	
None	43.8 (200)	96.7 (442)	
Methamphetamine	5.9 (27)	0.0 (0)	
Marijuana	20.4 (93)	0.9 (4)	
Alcohol	18.2 (83)	1.5 (7)	
Cocaine	7.2 (33)	0.7 (3)	
Heroin	0.7 (3)	0.0 (0)	
Other Opiates and Synthetics	2.0 (9)	0.2 (1)	
Non-Prescription Methadone	0.2 (1)	0.0 (0)	
PCP	0.2 (1)	0.0 (0)	
Other Hallucinogens	0.2 (1)	0.0 (0)	
Other Amphetamine	0.0 (0)	0.0 (0)	
Other Stimulants	0.0 (0)	0.0 (0)	
Benzodiazepines	0.2 (1)	0.0 (0)	
Other Tranquilizers	0.0 (0)	0.0 (0)	
Barbiturates	0.0 (0)	0.0 (0)	
Other Sedatives/Hypnotics	0.0 (0)	0.0 (0)	
Inhalants	0.0 (0)	0.0 (0)	
Over-the-Counter	0.0 (0)	0.0 (0)	
Steroids	0.0 (0)	0.0 (0)	
Ecstasy	1.1 (5)	0.0 (0)	
Oxycontin	0.0 (0)	0.0 (0)	
Other Prescribed Analgesics	0.0 (0)	0.0 (0)	
Other	0.0 (0)	0.0 (0)	

Note: Data for one client who completed the follow-up interview are excluded from this table due to pending admission data; data will be included in future reports.
Due to rounding, percentages may not add up to exactly 100%.
A client's secondary substance may change from admission to follow-up.



At the follow-up interview, 394 of 457 clients (86.2%) reported abstinence in the previous six months as displayed in Figure 2. Twenty-six of the 63 clients (41.3%) who reported use in the past six months at follow-up indicated no use during the 30 day period prior to their interview resulting in 91.9% of the clients with past 30-day abstinence. At admission, over half of the clients (53.4%) reported daily use (once daily or more) of a primary substance; daily use was reported by four clients (0.8%) at the follow-up interview.

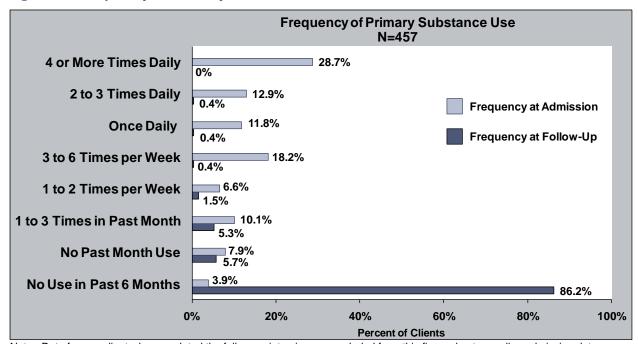


Figure 2. Frequency of Primary Substance Use

Note: Data for one client who completed the follow-up interview are excluded from this figure due to pending admission data; data will be included in future reports.

Due to rounding, percentages may not add up to exactly 100%.

A client's primary substance may change from admission to follow-up.

Changes in frequency of use provide additional information regarding client outcomes. Since a client's primary substance may change from admission to follow-up, a simple comparison of frequency may not be comparable (e.g. having one drink three to six times per week versus smoking methamphetamine three to six times per week). Therefore, Table 24 on the following page presents data for a subset of the total group of clients who completed the follow-up interview; data are provided for individuals who report using the same primary substance at both admission and follow-up. For example, a client may report using alcohol daily at admission and at follow-up report that they have used alcohol one to three times in the past month, representing a decrease in use (assuming similar volume).

Table 24 on the following page presents frequency of use data for individuals who reported using the same primary substance at both admission and follow-up and includes *only* clients who reported use at follow-up (therefore excludes clients who report abstinence at follow-up). For example, a client may report using alcohol daily at admission and at follow-up report that they have used alcohol one to three times in the past month, representing a decrease in use (assuming similar volume). In Table 24, alcohol was the most common primary substance reported at admission and follow-up indicated by 26 of the 40 clients (65%). Overall, clients are reporting less use of substances at follow-up compared to admission. The percentage of clients



reporting "4 or more times daily," "2 to 3 times daily," "once daily", and "3 to 6 times per week" decreased by large margins, likely due to these clients entering the categories of "1 to 3 times in past month", and "no past month use".

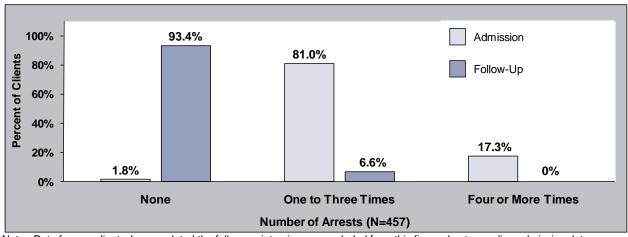
Table 24. Change in Frequency of Primary Substance Use For Clients Indicating Same Primary Substance at Both Admission and Follow-Up

Primary Substance	Clients with Completed Follow-Up Interview % (N=40)			
	Admission	Follow-Up	Change	
No Use in Past Six Months	2.5 (1)	0.0 (0)	-2.5	
No Past Month Use	5.0 (2)	37.5 (15)	+32.5	
1 to 3 Times in Past Month	10.0 (4)	45.0 (18)	+35.0	
1 to 2 Times per Week	15.0 (6)	7.5 (3)	-7.5	
3 to 6 Times per Week	22.5 (9)	0.0 (0)	-22.5	
Once Daily	17.5 (7)	5.0 (2)	-12.5	
2 to 3 Times Daily	7.5 (3)	5.0 (2)	-2.5	
4 or More Times Daily	20.0 (8)	0.0 (0)	-20.0	

Note: Due to rounding, percentages may not add up to exactly 100%.

Four hundred twenty-seven clients (93.4%) were arrest-free at follow-up as displayed in Figure 3. Thirty clients (6.6%) had been arrested during the six months following admission.

Figure 3. Arrests



Note: Data for one client who completed the follow-up interview are excluded from this figure due to pending admission data; data will be included in future reports.

Figure 4 shows that at six months post admission, 137 of the clients (30%) were working full-time (at least 35 hours per week), representing an increase of 16.9 percentage points from admission. In addition, 103 clients (22.5%) were working part-time (less than 35 hours per week) and 180 clients (39.4%) were looking for work. Clients categorized as not being in the labor force are clients who are not employed and not seeking employment.

13.1% **Employed Full-Time** Admission 30.0% **Employment Status** 5.0% **Employed Part-Time** Follow-Up 22.5% 14.9% Unemployed 39.4% 67.0% **Not in Labor Force** 8.1% 40% 80% 0% 20% 60% **Percent of Clients** 

Figure 4. Employment Status

Note: Data for one client who completed the follow-up interview are excluded from this figure due to pending admission data; data will be included in future reports.

Due to rounding, percentages may not add up to exactly 100%.

In Figure 5, the number of clients employed three months or less more than doubled from admission to follow-up (from 92 clients to 207 clients). While there was a decrease in clients who were employed four or more months at follow-up, many had spent a large portion of the previous six months in jail.

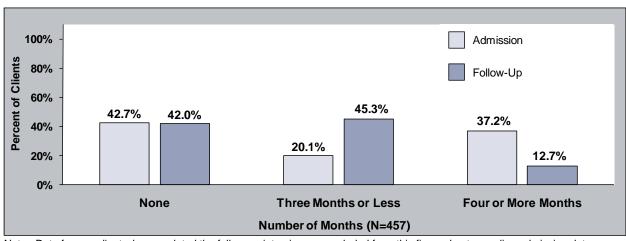


Figure 5. Months Employed

Note: Data for one client who completed the follow-up interview are excluded from this figure due to pending admission data; data will be included in future reports.



As displayed in Figure 6, clients responding to the "no taxable monthly income" category decreased by 36.8 percentage points (from 315 clients to 161 clients) from admission to six months post admission. Compared to admission, there were increases in the four income categories at follow-up: clients responding to \$500 or less increased by 8.8 percentage points (37 clients); clients responding to monthly taxable income of \$501 to \$1000 increased by 11.6 percentage points (49 clients); clients in the income category of \$1001 to \$2000 increased by 12.6 percentage points (53 clients); and clients in the income category of over \$2001 increased by 3.6 percentage points (15 clients).

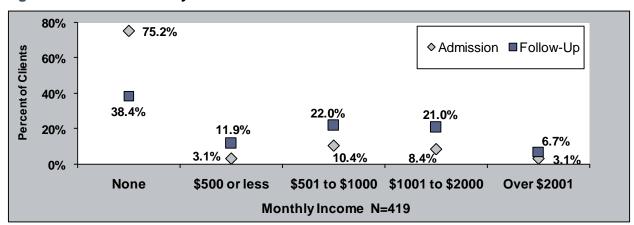


Figure 6. Taxable Monthly Income

Note: Data for one client who completed the follow-up interview are excluded from this figure due to pending admission data; data will be included in future reports.

Additionally, 38 clients who completed the follow-up interview were excluded from this table due to the variability of income (due to contractual/seasonal work or commission based pay) or declining to disclose their income at follow-up. Due to rounding, percentages may not add up to exactly 100%.

As shown in Figure 7, clients reporting "wages or salary" as their primary means of support increased by 23.2 percentage points (by 106 clients) from admission to the follow-up interview. Clients responding to the "none" category decreased by 40.7 percentage points (by 186 clients) from admission to follow-up; only ten clients (2.2%) at follow-up reported no source of support.

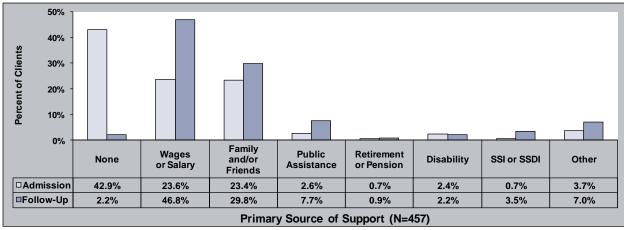
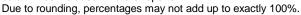


Figure 7. Primary Source of Support

Note: Data for one client who completed the follow-up interview are excluded from this figure due to pending admission data; data will be included in future reports.





Admission data are not included in Figure 8. Not all admission data collection instruments provide a response category for a General Education Degree (GED), therefore admission and follow-up comparison cannot be made because the GED question is specifically asked at follow-up. Clients who receive a GED are grouped with clients in the "high school or equivalent" category at follow-up; therefore, responses at follow-up more accurately reflect a client's level of education. Many clients without high school diplomas are encouraged to work on their GED while in treatment. One hundred twenty-five clients (27.3%) reported that they did not graduate high school at follow-up. Over 50% of clients report an education level of high school only at follow-up and 21.1% reported an education level beyond high school.

80% Percent of Clients 60% Follow-Up 51.5% 40% 27.3% 15.9% 20% 5.2% 0% **Did Not Graduate High School** One to Three **Four or More High School** or Equivalent **Years of College Years of College Highest Grade Completed (N=458)** 

Figure 8. Education

Note: Due to rounding, percentages may not add up to exactly 100%.

One client at the follow-up interview reported missing seven days of work or school due to a substance abuse problem as shown in Figure 9. The number of clients missing zero days due to a substance abuse problem increased 12.7 percentage points from 233 clients (51%) to 291 clients (63.7%) at follow-up. Clients in the "not applicable" category include clients not in the labor force and not enrolled in school in the past six months.

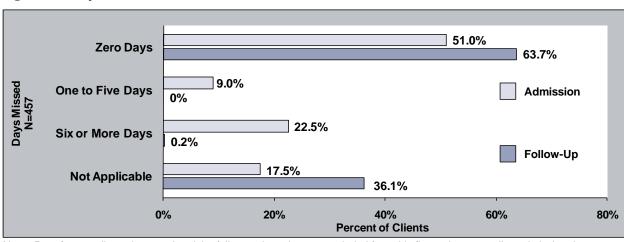


Figure 9. Days of Work or School Missed Due to a Substance Abuse Problem

Note: Data for one client who completed the follow-up interview are excluded from this figure due to pending admission data; data will be included in future reports.



As displayed in Figure 10, the number of clients reporting attendance at Alcoholics Anonymous (AA), Narcotics Anonymous (NA), or similar meetings was over three times greater at the follow-up interview than at admission, with nearly 85% of clients at six months post admission reporting attendance at meetings.

100% Admission Percent of Clients 80% 73.3% Follow-Up 60% 44.2% 40.7% 40% 25.0% 15.1% 20% 1.8% 0% None One to Ten Meetings **Eleven or More Meetings** Average Number of Meeting Attended per Month (N=457)

Figure 10. AA, NA, or Similar Meetings Attended

Note: Data for one client who completed the follow-up interview are excluded from this figure due to pending admission data; data will be included in future reports.

Due to rounding, percentages may not add up to exactly 100%.

As displayed in Figure 11, fewer clients reported substance abuse-related hospitalizations at follow-up compared to admission. Four clients at the follow-up interview reported being hospitalized one time for a substance abuse-related problem, one client indicated two hospitalizations, and two clients reported four hospitalizations since admission.

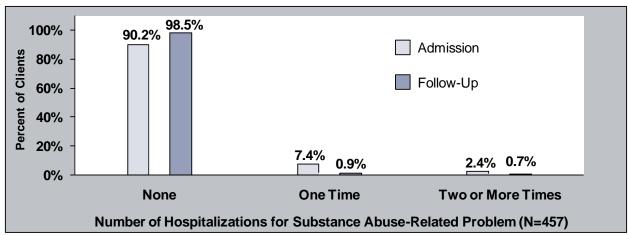


Figure 11. Hospitalizations Due to a Substance Abuse-Related Problem

Note: Data for one client who completed the follow-up interview are excluded from this figure due to pending admission data; data will be included in future reports.

Due to rounding, percentages may not add up to exactly 100%.



The most common response was "single" with nearly 50% of clients reporting this relationship status at admission and over 50% reporting single at follow-up. "Cohabitating" was the second most common response at admission while "Divorced" was the second most common response at follow-up.

**Relationship Status** N=457 47.7% **Single** 54.5% Married 10.5% 9.4% Admission 18.4% Cohabitating 10.1% Follow-Up 6.1% Separated 5.7% 16.2% **Divorced** 19.5% Widowed 0.9% 0% 20% 40% 60% **Percent of Clients** 

Figure 12. Relationship Status

Note: Data for one client who completed the follow-up interview are excluded from this figure due to pending admission data; data will be included in future reports.

Due to rounding, percentages may not add up to exactly 100%.



Many clients in this program are referred by treatment agency staff or the court system to halfway houses due to a need for sober housing, additional structure, or due to a lack of housing options upon jail release. Figure 13 shows that the most common living arrangement reported by clients at admission was living with their parents. At follow-up, the most common living arrangement was living in a halfway house or transitional living facility, indicated by 155 clients (33.9%).

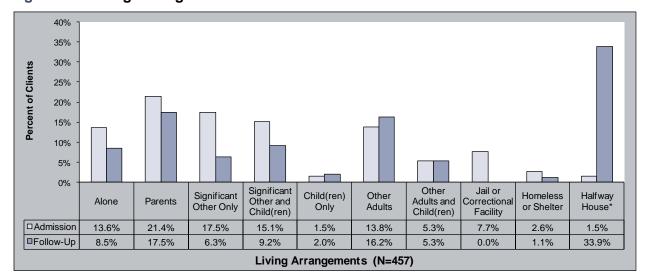


Figure 13. Living Arrangements

Note: Data for one client who completed the follow-up interview are excluded from this figure due to pending admission data; data will be included in future reports.

Due to rounding, percentages may not add up to exactly 100%.

# Primary Substance at Admission by Outcome Variables at Follow-Up

In Tables 25 through 27, primary substance reported at admission is shown in relation to the three key outcome variables: abstinence, arrests, and employment or enrollment in an educational program. To protect the confidentiality of follow-up interview respondents, outcome data for the following primary substances reported at admission are grouped together in the "All Other Substances" category: heroin, other opiates and synthetics, non-prescription methadone, PCP, other hallucinogens, other amphetamine, other stimulants, benzodiazepines, other tranquilizers, barbiturates, other sedatives/hypnotics, inhalants, over-the-counter, steroids, ecstasy, oxycontin, other prescribed analgesics, and other substances. Presenting these data would identify some individuals.

The most frequently used primary substance at admission was alcohol, followed by marijuana. At follow-up, clients reporting alcohol as the primary substance at admission had the highest number of completed follow-up interviews (43.8%).

Some of the more interesting findings are reported below.

• **Abstinence:** Of the 457 clients who were interviewed, 86.2% indicated abstinence six months post admission. Fifty-nine of 63 clients (93.7%) who indicated methamphetamine as the primary substance at admission were abstinent during the follow-up period. Additionally,



<sup>\*</sup>Included in the halfway house category are clients living in substance abuse halfway houses, correctional halfway houses, and transitional housing facilities.

171 of 200 clients (85.5%) who reported alcohol, 46 of 54 clients (85.2%) who indicated cocaine, and 87 of 104 clients (83.7%) who reported marijuana as the primary substance at admission were abstinent during the follow-up period.

- No Arrests: Four hundred twenty-seven clients (93.4%) were arrest-free six months post
  admission. Thirty clients had been arrested: 15 clients who had an arrest indicated alcohol
  as the primary substance at admission, nine clients reported marijuana, three clients
  indicated methamphetamine, two clients indicated cocaine, and one client reported another
  primary substance.
- Employment or Enrolled in an Educational Program: Two hundred seventy-four clients (60%) were employed full or part-time or enrolled in an educational program at follow-up. At six months post admission, 62.5% of clients who indicated marijuana as the primary substance at admission were employed or enrolled in an educational program; 59% of the clients who reported alcohol, 57.1% of clients who reported methamphetamine, and 55.6% of clients who indicated cocaine were working full or part-time or enrolled in an educational program. Additionally, 69.4% of the 36 clients who reported another primary substance at admission were employed full or part-time or enrolled in an educational program at six months post admission.

Table 25 examines primary substance reported at admission in relation to abstinence at follow-up. Six months post admission, 93.7% of the clients who reported methamphetamine as the primary substance at admission were abstinent; this is followed by clients who indicated alcohol (85.5%), cocaine (85.2%), and marijuana (83.7%). There are no significant differences between abstinence at follow-up and primary substance reported at admission (Fisher's Exact Test, p > 0.05).

Table 25. Primary Substance at Admission by Abstinence at Follow-Up

Primary Substance at Admission	Abstinence at Follow-Up % (N=457)
Methamphetamine	93.7 (59/63)
Marijuana	83.7 (87/104)
Alcohol	85.5 (171/200)
Cocaine	85.2 (46/54)
All Other Substances	86.1 (31/36)

Note: Data for one client who completed the follow-up interview are excluded from this table due to pending admission data; data will be included in future reports.



Table 26 examines primary substance at admission in relation to arrests at follow-up. For purposes of this report, clients were categorized as having one or more arrests in the previous six months at follow-up or having no arrests at follow-up. Fifteen clients who reported alcohol as the primary substance at admission, nine clients who indicated marijuana, three clients who reported methamphetamine as the primary substance at admission, two clients who indicated cocaine, and one client who indicated another substance as the primary substance at admission had been arrested at follow-up. There are no significant differences between arrests at follow-up and primary substance reported at admission (Fisher's Exact Test, p > 0.05).

Table 26. Primary Substance at Admission by No Arrests at Follow-Up

Primary Substance at Admission	e No Arrests at Follow-Up % (N=457)	
Methamphetamine	95.2 (60/63)	
Marijuana	91.3 (95/104)	
Alcohol	92.5 (185/200)	
Cocaine	96.3 (52/54)	
All Other Substances	97.2 (35/36)	

Note: Data for one client who completed the follow-up interview are excluded from this table due to pending admission data; data will be included in future reports.

Table 27 describes primary substance at admission in relation to employment status or enrollment in an educational program at follow-up. For purposes of this report, clients were categorized as being employed (full or part-time) *or* enrolled in an educational program in the past 30 days at follow-up or not being employed or enrolled in an educational program at follow-up. At six months post admission, 62.5% of clients who indicated marijuana as the primary substance at admission were employed or enrolled in an educational program; 59% of the clients who reported alcohol, 57.1% of clients who reported methamphetamine, and 55.6% of clients who indicated cocaine were working full or part-time or enrolled in an educational program. There are no significant differences between employment or enrollment in an educational program at follow-up and primary substance reported at admission (Fisher's Exact Test, p > 0.05).

Table 27. Primary Substance at Admission by Employment or Enrollment in Educational Program at Follow-Up

Primary Substance at Admission	Employed (Full or Part-Time) or Enrolled in Educational Program at Follow-Up % (N=457)			
Methamphetamine	57.1 (36/63)			
Marijuana	62.5 (65/104)			
Alcohol	59.0 (118/200)			
Cocaine	55.6 (30/54)			
All Other Substances	69.4 (25/36)			

Note: Data for one client who completed the follow-up interview are excluded from this table due to pending admission data; data will be included in future reports.



## **Outcome Variables at Follow-Up by Discharge Status**

Table 28 shows the three outcome variables for the follow-up interview (abstinence, arrests, and employment or enrollment in an educational program) by treatment discharge status. There are three discharge categories: successful; terminated (clients discharged from the program due to noncompliance or as a result of the client's decision to remove themselves from treatment program); and neutral (this category includes but is not limited to clients who were discharged due to: legal issues related to a sentence; transferring to another treatment program; or medical reasons). It is important to note that while some clients have completed treatment or have been discharged prior to their follow-up interviews, other clients are still engaged in treatment at the time their interviews are conducted. Of the 848 discharged clients, 371 clients have completed the follow-up interview. Eighty-seven clients who completed their follow-up interviews are still receiving treatment and therefore are not included in Table 28.

Three hundred seventy-one discharged clients are represented in Table 28. Of these, 181 clients (48.8%) were discharged as successful cases and 190 clients (51.2%) did not successfully complete the treatment program. Of the 190 clients who did not complete treatment, 123 were terminated and 67 were neutral discharges. Of the 371 discharged clients who were interviewed: 95.6% of the successfully discharged clients were abstinent; 95% had not been arrested; and 62.4% were working full or part-time or enrolled in an education program at follow-up. There is a significant difference between clients who are discharged successfully and those who did not complete the treatment program for one of the three outcome variables: successfully discharged clients were significantly more likely to be abstinent than clients who did not complete the program (Fisher's Exact Test, p < 0.0001).

Table 28. Outcomes by Discharge Status at Follow-Up

Discharge Status	N	Abstinence % (N)	No Arrests % (N)	Employed (Full or Part-Time) Or Enrolled in Educational Program % (N)
Successful Completion	181	95.6 (173)*	95.0 (172)	62.4 (113)
Terminated	123	77.2 (95)	90.2 (111)	50.4 (62)
Neutral Discharge	67	74.6 (50)	89.6 (60)	64.2 (43)
Total	371	85.7 (318)	92.5 (343)	58.8 (218)

<sup>\*</sup>Statistically significant (Fisher's Exact Test, p < 0.0001).



#### **Clients' Perceived Benefits**

Figure 14 displays clients' responses when asked their opinion at follow-up of the various types of treatment received in the Jail-Based Substance Abuse Treatment Program. Also included are comments made by clients. In general, clients had very positive feedback regarding the treatment program.

In Figure 14, results from 458 completed follow-up interviews at six months post admission indicate that 442 of the clients (96.5%) feel that the Jail-Based Treatment Program is either very beneficial or beneficial overall.

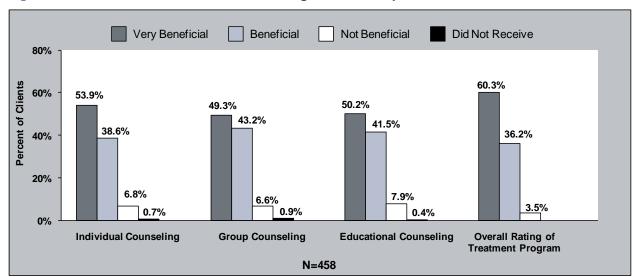


Figure 14. Perceived Benefit of Counseling at Follow-Up Interview

Note: Due to rounding, percentages may not add up to exactly 100%.

#### **Client Comments**

"They didn't just focus on my chemical use, they helped my whole life."

"It was really helpful for me to look at my criminal behavior."

"The thing I liked most about it is that they made me feel like a human being throughout my treatment."

"They helped me out a lot. They changed my life."

"My counselor took time to see me as an individual. I've been through several treatments and this is the best one by far."

"Compared to every other program it was beneficial for me to be in jail while doing the treatment because it gave me time to get myself together."

"I've been through treatment programs and this is the first time I learned about myself. It was the best program I've ever been in."

"I think this program saved my life."



# CRIMINAL THINKING ASSESSMENT

Agency staff administer the Criminal Thinking Scales developed by Texas Christian University (TCU), Institute of Behavioral Research; (Simpson, D. D. & Hiller, M. (1999). *TCU data collection forms for correctional outpatient treatment*. Fort Worth: Texas Christian University, Institute of Behavioral Research. [On-line]. Available: www.ibr.tcu.edu). The survey is administered to clients at admission, jail release, and three months post-jail release. The two-page instrument contains 37 items and measures six criminal thinking scales: entitlement, justification, power orientation, cold heartedness, criminal rationalization, and personal irresponsibility. Scores are obtained by averaging the ratings on items that make up each scale (after reversing scores on reflected items), and then multiplying this mean score by 10 in order to rescale the final scores that range from 10 to 50. Higher scores are stronger indications of the corresponding personality trait. The Consortium developed a software application for scoring the instrument.

*Entitlement* conveys a sense of ownership and privilege, and misidentifies wants as needs. Offenders who score high on the entitlement scale believe that the world "owes them" and they deserve special consideration.

Justification reflects a thinking pattern characterized by the offender minimizing the seriousness of antisocial acts and by justifying actions based on external circumstances. High scores on this scale suggest that antisocial acts are justified because of perceived social injustice.

Power Orientation is a measure of need for power and control. Offenders who score high on this scale typically show an outward display of aggression in an attempt to control their external environment and they try to achieve a sense of power by manipulating others.

Cold Heartedness addresses callousness and high scores on this scale reflect a lack of emotional involvement in relationships with others.

Criminal Rationalization displays a generally negative attitude toward the law and authority figures. Offenders who score high on this scale view their behaviors as being no different than the criminal acts they believe are committed every day by authority figures.

Personal Irresponsibility assesses the degree to which an offender is willing to accept ownership for criminal actions. High scores suggest an offender's unwillingness to accept responsibility and are associated with the offender casting blame on others.

Nine hundred fifty clients completed the criminal thinking survey at admission, 647 clients completed the survey at jail release, and 112 clients completed the survey three months post-jail release. Table 29, on the following page, shows the mean score for each of the six criminal thinking scales at the three survey points. The highest mean scores at all three data collection points were on the criminal rationalization scale, with mean scores of 26.5 at admission, 24.4 at jail release, and 23.7 at three months post-jail release. Clients scored lowest on the entitlement scale averaging 18.0 at admission, 16.7 at jail release, and 16.5 at three months post-jail release.



Table 29. Criminal Thinking Scale Mean Scores

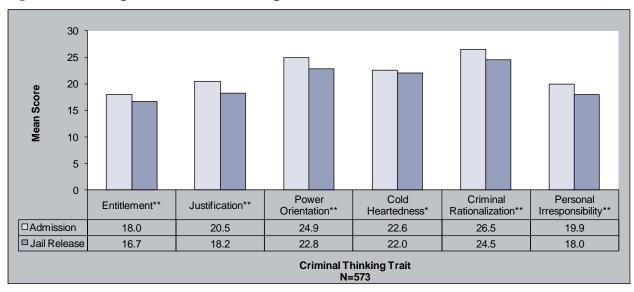
Criminal Thinking Scale	Mean Score for All Clients at Admission (N=950)	Mean Score for All Clients at Jail Release (N=647)	Mean Score for All Clients at Three Months Post-Jail Release (N=112)
Entitlement	18.0	16.7	16.5
Justification	20.3	18.1	18.1
Power Orientation	24.8	22.6	22.6
Cold Heartedness	22.2	21.9	23.3
Criminal Rationalization	26.5	24.4	23.7
Personal Irresponsibility	19.8	18.1	18.4

Note: Higher scores are stronger indications of the corresponding personality trait.

Not all clients complete surveys. To the extent that this causes a bias in the sample, comparisons may not reflect clients in the Jail-Based Substance Abuse Treatment Program as a whole.

Five hundred seventy-three clients have completed the survey at both admission and jail release. Figure 15 shows the comparison of the mean scores for the six criminal thinking scales for the 573 clients who completed the survey at *both* admission and jail release. Analyses indicate there are statistically significant changes in mean scores from admission to jail release for all of the six criminal thinking scales (Wilcoxon Tests), indicating a reduction in criminal thinking for entitlement, justification, power orientation, cold heartedness, criminal rationalization, and personal irresponsibility.

Figure 15. Change in Criminal Thinking from Admission to Jail Release



Note: Higher scores are stronger indications of the corresponding personality trait.

Not all clients complete surveys. To the extent that this causes a bias in the sample, comparisons may not reflect clients in the Jail-Based Substance Abuse Treatment Program as a whole.

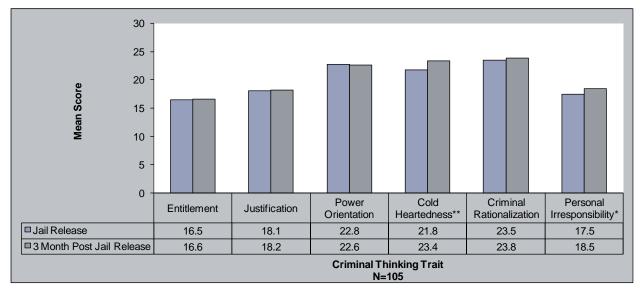
<sup>\*\*</sup>Statistically significant (Wilcoxon Test, p < 0.0001).



<sup>\*</sup>Statistically significant (Wilcoxon Test, p < 0.01).

One hundred five clients have completed the survey at both jail release and three months post-jail release. Figure 16 shows the comparison of the mean scores for the six criminal thinking scales for the 105 clients who completed the survey at *both* jail release and three months post-jail release. Analyses indicate there are statistically significant changes in the mean scores from jail release to three months post-jail release for two of the six criminal thinking scales (Wilcoxon Test), indicating an increase in criminal thinking for cold heartedness and personal irresponsibility.

Figure 16. Change in Criminal Thinking from Jail Release to Three Months Post-Jail Release



Note: Higher scores are stronger indications of the corresponding personality trait.

Not all clients complete surveys. To the extent that this causes a bias in the sample, comparisons may not reflect clients in the Jail-Based Substance Abuse Treatment Program as a whole.



<sup>\*</sup>Statistically significant (Wilcoxon Test, p < 0.05).

<sup>\*\*</sup>Statistically significant (Wilcoxon Test, p < 0.01).

Ninety-one clients have completed the criminal thinking survey at the three survey points: admission, jail release, and three months post-jail release. Figure 17 shows the comparison of the mean scores for the six criminal thinking scales at the three survey points. Analyses indicate there are statistically significant changes in the mean score from admission to three months post-jail release for three of the six criminal thinking scales (Wilcoxon Tests), indicating a reduction in criminal thinking for justification and power orientation but an increase in criminal thinking for cold heartedness.

30 25 20 15 10 5 0 Power Cold Criminal Personal Entitlement Justification\*\* Orientation\*\* Irresponsibility Rationalization Heartedness\* □ Admission 17.2 20.3 25.1 22.7 25.1 18.7 □Jail Release 16.6 18.3 23.1 22.0 23.8 17.6 ■3 Month Post Jail Release 16.8 18.4 23.1 23.8 24.1 18.7 **Criminal Thinking Trait** 

Figure 17. Change in Criminal Thinking at Admission, Jail Release, and Three Months Post-Jail Release

Note: Higher scores are stronger indications of the corresponding personality trait.

Not all clients complete surveys. To the extent that this causes a bias in the sample, comparisons may not reflect clients in the Jail-Based Substance Abuse Treatment Program as a whole.

## RECOVERY SUPPORT SERVICES AND FAMILY INVOLVEMENT

Substance abuse treatment providers document the referral to recovery support services for clients who have been admitted to the outpatient component of the treatment program since October 1, 2010. Additionally, providers are expected to seek the involvement of each offender's family members in the treatment process (when appropriate) and document the services provided. In the event that family members are unable or unwilling to be involved, providers document attempts to involve family members. One hundred eleven clients were admitted between October 1, 2010 and December 31, 2010.

#### **Recovery Support Services**

Recovery support services are nonclinical services that assist individuals and families to recover from alcohol and/or drug problems. They include social support, linkage to and coordination among allied service providers, and a full range of human services that facilitate recovery and



<sup>\*</sup>Statistically significant (Wilcoxon Test, p < 0.05).

<sup>\*\*</sup>Statistically significant (Wilcoxon Test, p < 0.00).

wellness, ultimately contributing to an improved quality of life. Recovery support services include (but are not limited to) the following:

- Dental services
- Employment counseling
- Family education
- Financial counseling
- Housing assistance
- Individual family therapy
- Integrated therapy
- Life skills coaching
- Multiple family group therapy
- Native American healing
- Pharmacological interventions
- Gambling therapy
- Recovery peer coaching
- Spiritual counseling (Other than AA, NA or similar support group)

Preliminary data indicate that four clients have been referred for recovery support services and all four clients attended at least one appointment or session. It is important to note that services are reported for clients who are in the outpatient portion of the treatment program; many clients admitted during this time period are still receiving treatment in the in-jail component or were very recently released from jail.

## **Family Involvement**

Family involvement and education offered by treatment providers to clients' families when appropriate include (but are not limited to):

- Family substance abuse and criminal thinking education
- Information dissemination
- Alternatives to substance abuse and criminal thinking
- Mentoring services for offender family members

Preliminary data indicate that four clients have had family involvement.

As more information regarding recovery support services and family involvement is submitted, additional data will be provided in future reports.

