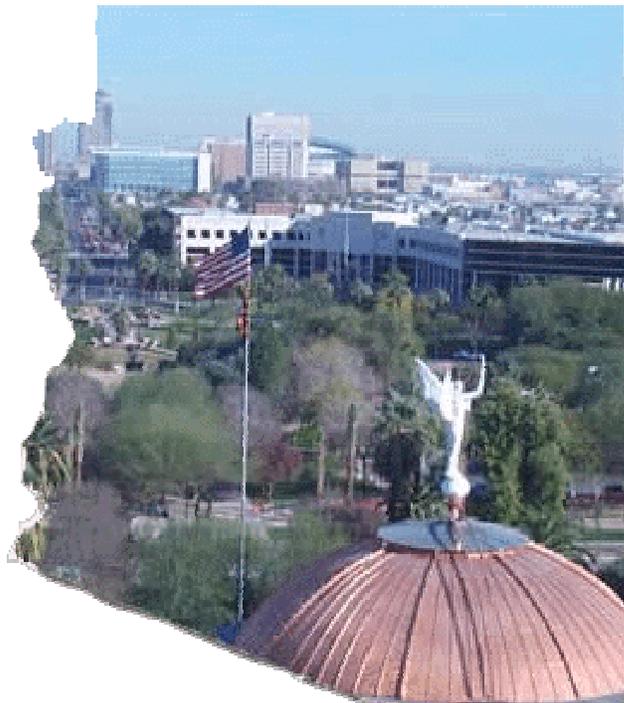


Arizona Criminal Justice Commission
Residential Substance Abuse Treatment
Annual Activity Report



Arizona Criminal Justice Commission

Residential Substance Abuse Treatment



Fiscal Year 2000

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GRANTEE AGENCY: ARIZONA DEPARTMENT OF CORRECTIONS
 PROJECT TITLE: RESIDENTIAL SUBSTANCE ABUSE TREATMENT FOR SEX OFFENDERS
 PROJECT START DATE: 7/1/1999
 PROJECT GRANT NUMBER: SAT-01-107
 REPORT PERIOD: FFY00 – 10/1/1999 – 9/30/2000

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

	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
White Males	29	29
Black Males	2	2
Hispanic Males	4	4
Native American Males	1	1
Other Males	0	0
Total Males	0	0

Number of offenders successfully completing the grant supported treatment program:

	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
Total Males	0	0

Number of offenders who:

	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
Males dropped out of program	0	0
Males terminated from program	0	0

Number of offenders who successfully completed an aftercare program:

	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
Total Males	0	0

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Requested Information (Please provide one evaluation from for each grant funded project)	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
1. Treatment beds added or supported with RSAT grant funds (Federal & Match)	36	36
2. Treatment beds enhanced with RSAT grant funds (for previously established programs, beds enhanced by new services)	0	0
3. Total number of male offenders admitted to the grant funded treatment program.	36	36
4. Total number of females offenders admitted to the grant funded treatment program.	0	0
5. Total number of adult offenders successfully completing the residential program.	36	36
6. Total number of juvenile offenders admitted to the grant funded treatment program.	0	0
7. Total number of offenders successfully completing the residential program.	0	0
8. Average length of stay in the residential program, for those completing the program (in days).	N/A	N/A
9. Total number of offenders that dropped out of the program.	6	6
10. Total number of offenders that were terminated from the program.	0	0
11. Total number of offenders that successfully completed the aftercare program.	N/A	N/A
12. Of the offenders that completed the program, the percentage that have remained drug free during the residential treatment program.	N/A	N/A
13. Of the offenders that completed the program, the percentage that have remained drug free during the aftercare program.	N/A	N/A
14. Of the offenders that completed the program, the percentage that have remained arrest free during the residential program.	N/A	N/A
15. Of the offenders that have completed the program, the percentage that have remained arrest free during the aftercare program.	N/A	N/A
16. Of the offenders that completed the program, the percentage that have remained arrest free following release from aftercare (at least one year follow-up).	N/A	N/A
The following questions are for those programs in existence for two years or more.		
17. Average cost of the program per offender that completed the residential program.	N/A	N/A
18. Average cost of the program per offender that completed the aftercare program.	N/A	N/A

* No aftercare program exists

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Narrative Summary

Please describe the activities carried out with RSAT grant funds during the fiscal year (e.g. treatment programs developed or expanded and program enhancements such as treatment counselors or drug testing added to existing programs).

The Arizona Department of Corrections' Residential Substance Abuse Treatment (RSAT) program features a clinical assessment followed by an approximate 40 week curriculum rooted in cognitive behavioral principles. Still in progress, the assessment and testing capability is being enhanced by addition of the SASSI, Hare Psychopathy Checklist, and the MCMI. This fiscal year, a library of video and print materials was purchased to support the curriculum. Urinalysis is conducted on 100% of participants monthly.

Describe aftercare services that are provided to offenders who complete the residential treatment provided by RSAT funded projects and explain how priority is given to projects that provide aftercare.

No aftercare services are funded by this RSAT program, however inmates who successfully complete the program and are released to community supervision receive transition and aftercare services as determined appropriate by a case management team that consists of a treatment provider, the Parole Officer, and the inmate. No inmate has yet completed this program.

*What are the results of any program or project evaluations you have conducted?
Please attach copies of reports.*

The Arizona RSAT program is housed within a sex offender unit, so all participants have been convicted of sex offenses. Program participation is limited to inmates with one year or less remaining on their sentences. Inmate participants must exhibit a need for treatment. Participants are housed in Housing Unit 3 A/B, in an area reserved for drug, alcohol treatment and sex offender treatment.

What technical assistance is needed to assist you with program implementation and to improve the effectiveness of the projects you fund?

No evaluations have been conducted.

What technical assistance is needed to assist you with program implementation and to improve the effectiveness of the projects you fund?

None

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GRANTEE AGENCY: ARIZONA DEPARTMENT OF JUVENILE CORRECTIONS
 PROJECT TITLE: ADOBE MOUNTAIN SCHOOL
 PROJECT START DATE: 7/1/1998
 PROJECT GRANT NUMBER: SAT-01-105
 REPORT PERIOD: FFY00 – 10/1/1999 – 9/30/2000

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

	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
White Male Juveniles	14	33
Black Male Juveniles	4	5
Hispanic Male Juveniles	16	29
Native American Male Juveniles	0	0
Other Male Juveniles	0	0
Total Male Juveniles	34	67

Number of offenders successfully completing the grant supported treatment program:

	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
Total Male Juveniles	18	22

Number of offenders who:

	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
Dropped out of program	2	2
Were terminated from program	10	16

Number of offenders who successfully completed an aftercare program:

	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
Total Male Juveniles	10	10

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Requested Information (Please provide one evaluation from for each grant funded project)	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
1. Treatment beds added or supported with RSAT grant funds (Federal & Match)	24	24
2. Treatment beds enhanced with RSAT grant funds (for previously established programs, beds enhanced by new services)	Not Applicable	Not Applicable
3. Total number of male juvenile offenders admitted to the grant funded treatment program.	36	83
4. Total number of female juvenile offenders admitted to the grant funded treatment program.	Not Applicable	Not Applicable
5. Total number of offenders successfully completing the residential program.	19	35
6. Average length of stay in the residential program, for those completing the program (in days).	237	238
7. Number of offenders that dropped out of the program.	10	18
8. Total number of offenders that were terminated from the program.	5	5
9. Total number of offenders that successfully completed the aftercare program.	14	24
10. Of the offenders that completed the program, the percentage that have remained drug free during the residential treatment program.	100%	100%
11. Of the offenders that completed the program, the percentage that have remained drug free during the aftercare program.	78%	78%
12. Of the offenders that completed the program, the percentage that have remained arrest free during the residential program.	100%	100%
13. Of the offenders that have completed the program, the percentage that have remained arrest free during the aftercare program.	88%	83%
14. Of the offenders that completed the program, the percentage that have remained arrest free following release from aftercare (at least one year follow-up).	83%	81%
The following questions are for those programs in existence for two years or more.		
15. Average cost of the program per offender that completed the residential program.	\$13,282	\$22,162
16. Average cost of the program per offender that completed the aftercare program.	Not Available	Not Available

* No aftercare program exists

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Narrative Summary

Please describe the activities carried out with RSAT grant funds during the fiscal year (e.g. treatment programs developed or expanded and program enhancements such as treatment counselors or drug testing added to existing programs).

The Recovery Program is an intense special treatment program based upon cognitive restructuring for adjudicated youth with moderate to severe drug abuse problems. The Recovery Substance Abuse Program was started at Adobe Mountain School in Phoenix in 1993. It is to the east of I-17 freeway off Pinnacle Peak Road.

Based on this original model, a federal grant was awarded to Clinical Services through the Arizona Criminal Justice Commission to expand these services to additional youth. The federal grant is called the Residential Substance Abuse Treatment (RSAT) grant. Clinical Services has been awarded the RSAT grant since 1997.

In November 1998 a second unit, Freedom, was opened at Adobe Mountain School for 24 adjudicated male youth whose serious substance abuse history has played a part in their criminal activity.

The Recovery Program helps youth with moderate to serious drug problems. It aims to help them interrupt offense cycles and interrupt drug abuse patterns that may trigger criminal acts. It helps youth replace them with drug free choices and citizen competencies. By the time a youth graduates from Recovery, he should be at an advanced Senior Level so that pro-social decision making is consistently demonstrated while he works on drug relapse prevention skills. The program is based on Clinical Services' special cognitive restructuring curriculum and the bound Recovery Individual Treatment Plan booklet. It helps youth through cognitive phases to decide about their drug abuse and criminal cycles. Staffing includes clinical specialists and a psychology associate, as well as correctional officers.

A fortified curriculum includes Seven Challenges workbooks. The special Recovery Individual Treatment Plan booklets use offense cycle worksheets as crucial tools. The workbooks are based upon stages of change.

Periodic certification of Substance Abuse one-on-one counseling occurs from the internationally renowned grandfather of cognitive restructuring, Dr. Albert Ellis.

Rehearse for Success drama was an additional program enhancement for youth. It helped youth reenact their life stories at critical decision points, as actors played key significant others for youth to experience by observing the scenes.

The grant also provided youth the opportunity to participate in Vocational Preparedness Programs. This provided for psychological and vocational interest screening tests,

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individual counseling around issues that these tests pointed out, and group counseling to help youth explore “work trees” and ways to increase their job readiness by overcoming delinquent and emotional barriers.

Three urinalysis tests are conducted during the youth’s stay in secure care. Also, aftercare urinalysis testing was provided.

Describe aftercare services that are provided to offenders who complete the residential treatment provided by RSAT funded projects and explain how priority is given to projects that provide aftercare.

Per the requirements of the RSAT grant, the program provides two urinalysis tests following release into the community. These two tests are funded by the grant; the parole officer may order additional tests, which are state funded.

In addition, the program provides individual, group and family counseling for substance abuse through community providers, typically funded with the Project Leader’s state Special Treatment budget, although services may also be provided through Child Protective Services, Department of Economic Security, and Tribal Councils. Aftercare providers are selected with the following criteria:

- Treatment modality is consistent with the program’s cognitive restructuring approach
- Providers are experienced in substance abuse counseling and working with adjudicated juveniles
- Providers are culturally sensitive to juveniles’ varied racial, ethnic and cultural backgrounds

In addition, youth may be placed in a community treatment center in a step-down program before being released home. These placements are arranged by the Department’s Community Services and funded by the state.

Aftercare service needs are determined by the juvenile’s Treatment Team, which includes counseling staff, educational staff and the youth’s parole officer, during a Transition Staffing prior to release. The initial services are authorized by the unit Youth Program Supervisor; the parole officer authorizes any additional services that may be necessary, and arranges for the urinalysis tests.

What criteria are used to assign offenders to grant funded projects?

The Recovery Program criteria for program admission:

- Youth is a new commit to secure care
- Youth is between the ages of fourteen and seventeen
- Youth is able to complete a minimum six months and a maximum twelve months in the Recovery Unit and will be released on parole upon completion of the program

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- Youth will be able to receive at least three months of aftercare counseling before s/he turns eighteen
- Youth has a history or present diagnosis of substance abuse or dependence that presents as moderate to severe in nature, verified by Substance Use Survey and Clinical Interview (or Mental Status Exam) administered by Psychology Associate II or Psychologist II; youth has no history of chronic inhalant abuse or dependence
- Youth has no criminal issues related to violent or sexualized behavior
- Youth is not presently on a psychoactive medication
- Youth has no history of the following mental illnesses: emerging borderline, emerging antisocial personality, moderate to severe depression, psychosis, rapid cycling mood disorder, bipolar disorder, schizophrenia, thought disorder, dissociative disorder, post traumatic stress, ADD or ADHD, dementia, or organic brain disorder (as verified by Clinical Interview by Psychology Associate II or Psychologist II, or Mental Status Exam)
- Youth reads at seventh grade level or above as indicated by the TABE or WRATIII administered by Education or by the Psychology staff within the last six months
- Youth consents to join Recovery and work the program to deal with drug problems and to participate in aftercare counseling following release from Recovery
- Youth consents to three UA drops while in the unit (entrance, midpoint and exit) and at least two UA drops during aftercare and signs consent form

With the exception of length of stay and urinalysis testing, one or more criteria may be over-ridden by the psychologist on the recommendation of the Treatment Team evaluating the youth for admission.

*What are the results of any program or project evaluations you have conducted?
Please attach copies of reports.*

The Department has contracted with the National Council on Crime and Delinquency to do an in-depth formal evaluation of the Recovery Program. As a first step, an evaluability assessment was conducted by NCCD. It showed ways to improve the Recovery Program to be fortified for the formal outcome study. Planning for the evaluation began July 2000 and actual data collection will begin in or after January 2001.

An entrance/exit survey on Rational/Irrational Beliefs, based on a form provided by the Albert Ellis Institute in New York, was developed with the help of David Douglas, Research Assistant and Statistical Analyst, and Dr. Emmett Velten of the Ellis Institute. It is being administered to youth as they enter and exit from the program. The purpose is to try to determine what impact the program is making on helping youths develop a rational belief system about themselves and their life circumstances. Administration of the entrance survey began July 2000. To date, no youth who have taken the entrance

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survey have been released to provide comparison exit surveys. A brief descriptive summary of this survey is attached.

An exit survey to determine satisfaction with elements of the program was also developed. A report is attached. It is to help determine areas of strength and areas that suggest improvements.

A follow-up analysis was done on the status of paroled youth six months following release from the program. This was compared with results from one of the general treatment units at each facility, as well as two other special treatment units. This report is attached.

What technical assistance is needed to assist you with program implementation and to improve the effectiveness of the projects you fund?

Materials, seminars and other training on cognitive restructuring therapy with substance abusing youth would be helpful. With turnover in staff, on-going training is a requirement, as well as helping existing staff continue to develop their counseling skills.

It would be helpful for the researcher to be in contact with other comparable programs to share insights on data collection, analysis and evaluation techniques.

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GRANTEE AGENCY: ARIZONA DEPARTMENT OF JUVENILE CORRECTIONS
 PROJECT TITLE: BLACK CANYON SCHOOL
 PROJECT START DATE: 7/1/1998
 PROJECT GRANT NUMBER: SAT-01-104
 REPORT PERIOD: FFY00 – 10/1/1999 – 9/30/2000

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

	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
White Female Juveniles	24	36
Black Female Juveniles	1	2
Hispanic Female Juveniles	22	33
Native American Female Juveniles	3	3
Other Female Juveniles	1	1
Total Female Juveniles	51	75

Number of offenders successfully completing the grant supported treatment program:

	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
Total Female Juveniles	39	39

Number of offenders who:

	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
Dropped out of program	1	1
Were terminated from program	9	9

Number of offenders who successfully completed an aftercare program:

	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
Total Female Juveniles	2	2

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Requested Information (Please provide one evaluation from for each grant funded project)	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
1. Treatment beds added or supported with RSAT grant funds (Federal & Match)	24	24
2. Treatment beds enhanced with RSAT grant funds (for previously established programs, beds enhanced by new services)	Not Applicable	Not Applicable
3. Total number of male juvenile offenders admitted to the grant funded treatment program.	Not Applicable	Not Applicable
4. Total number of female juvenile offenders admitted to the grant funded treatment program.	48	68
5. Total number of offenders successfully completing the residential program.	35	35
6. Average length of stay in the residential program, for those completing the program (in days).	225	225
7. Number of offenders that dropped out of the program.	8	8
8. Total number of offenders that were terminated from the program.	1	2
9. Total number of offenders that successfully completed the aftercare program.	21	21
10. Of the offenders that completed the program, the percentage that have remained drug free during the residential treatment program.	100%	100%
11. Of the offenders that completed the program, the percentage that have remained drug free during the aftercare program.	78%	78%
12. Of the offenders that completed the program, the percentage that have remained arrest free during the residential program.	100%	100%
13. Of the offenders that have completed the program, the percentage that have remained arrest free during the aftercare program.	64%	64%
14. Of the offenders that completed the program, the percentage that have remained arrest free following release from aftercare (at least one year follow-up).	67%	67%
The following questions are for those programs in existence for two years or more.		
15. Average cost of the program per offender that completed the residential program.	\$14,348	\$20,633
16. Average cost of the program per offender that completed the aftercare program.	Not Applicable	Not Applicable

* No aftercare program exists

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Narrative Summary

Please describe the activities carried out with RSAT grant funds during the fiscal year (e.g. treatment programs developed or expanded and program enhancements such as treatment counselors or drug testing added to existing programs).

The Recovery Program at Black Canyon School is an intense special treatment program based upon cognitive restructuring for adjudicated youth with moderate to severe drug abuse problems. A Recovery Program for girls was opened in March, 1999 at Black Canyon School, located adjacent to Adobe Mountain School, with a capacity for 24 girls.

Based on the original model at Adobe Mountain School, a federal grant was awarded to Clinical Services through the Arizona Criminal Justice Commission to expand these services to additional youth. The federal grant is called the Residential Substance Abuse Treatment (RSAT) grant. Clinical Services has been awarded the RSAT grant since 1997.

The Recovery Program helps youth with moderate to serious drug problems. It aims to help them interrupt offense cycles and interrupt drug abuse patterns that may trigger criminal acts. It helps youth replace them with drug free choices and citizen competencies. By the time a youth graduates from Recovery, he should be at an advanced Senior Level so that pro-social decision making is consistently demonstrated while he works on drug relapse prevention skills. The program is based on Clinical Services' special cognitive restructuring curriculum and the bound Recovery Individual Treatment Plan booklet. It helps youth through cognitive phases to decide about their drug abuse and criminal cycles. Staffing includes clinical specialists and a psychology associate, as well as correctional officers.

A fortified curriculum includes Seven Challenges workbooks. The special Recovery Individual Treatment Plan booklets use offense cycle worksheets as crucial tools. The workbooks are based upon stages of change.

Periodic certification of Substance Abuse one-on-one counseling occurs from the internationally renowned grandfather of cognitive restructuring, Dr. Albert Ellis.

Rehearse for Success drama was an additional program enhancement for youth. It helped youth reenact their life stories at critical decision points, as actors played key significant others for youth to experience by observing the scenes.

The grant also provided youth the opportunity to participate in Vocational Preparedness Programs. This provided for psychological and vocational interest screening tests, individual counseling around issues that these tests pointed out, and group counseling to help youth explore "work trees" and ways to increase their job readiness by overcoming delinquent and emotional barriers.

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Three urinalysis tests are conducted during the youth's stay in secure care. Also, aftercare urinalysis testing was provided.

Describe aftercare services that are provided to offenders who complete the residential treatment provided by RSAT funded projects and explain how priority is given to projects that provide aftercare.

Per the requirements of the RSAT grant, the program provides two urinalysis tests following release into the community. These two tests are funded by the grant; the parole officer may order additional tests, which are state funded.

In addition, the program provides individual, group and family counseling for substance abuse through community providers, typically funded with the Project Leader's state Special Treatment budget, although services may also be provided through Child Protective Services, Department of Economic Security, and Tribal Councils. Aftercare providers are selected with the following criteria:

- Treatment modality is consistent with the program's cognitive restructuring approach
- Providers are experienced in substance abuse counseling and working with adjudicated juveniles
- Providers are culturally sensitive to juveniles' varied racial, ethnic and cultural backgrounds

In addition, youth may be placed in a community treatment center in a step-down program before being released home. These placements are arranged by the Department's Community Services and funded by the state.

Aftercare service needs are determined by the juvenile's Treatment Team, which includes counseling staff, educational staff and the youth's parole officer, during a Transition Staffing prior to release. The initial services are authorized by the unit Youth Program Supervisor; the parole officer authorizes any additional services that may be necessary, and arranges for the urinalysis tests.

*What are the results of any program or project evaluations you have conducted?
Please attach copies of reports.*

The Recovery Program criteria for program admission:

- Youth is a new commit to secure care
- Youth is between the ages of fourteen and seventeen
- Youth is able to complete a minimum six months and a maximum twelve months in the Recovery Unit and will be released on parole upon completion of the program
- Youth will be able to receive at least three months of aftercare counseling before s/he turns eighteen

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- Youth has a history or present diagnosis of substance abuse or dependence that presents as moderate to severe in nature, verified by Substance Use Survey and Clinical Interview (or Mental Status Exam) administered by Psychology Associate II or Psychologist II; youth has no history of chronic inhalant abuse or dependence
- Youth has no criminal issues related to violent or sexualized behavior
- Youth is not presently on a psychoactive medication
- Youth has no history of the following mental illnesses: emerging borderline, emerging antisocial personality, moderate to severe depression, psychosis, rapid cycling mood disorder, bipolar disorder, schizophrenia, thought disorder, dissociative disorder, post traumatic stress, ADD or ADHD, dementia, or organic brain disorder (as verified by Clinical Interview by Psychology Associate II or Psychologist II, or Mental Status Exam)
- Youth reads at seventh grade level or above as indicated by the TABE or WRATIII administered by Education or by the Psychology staff within the last six months
- Youth consents to join Recovery and work the program to deal with drug problems and to participate in aftercare counseling following release from Recovery
- Youth consents to three UA drops while in the unit (entrance, midpoint and exit) and at least two UA drops during aftercare and signs consent form

With the exception of length of stay and urinalysis testing, one or more criteria may be over-ridden by the psychologist on the recommendation of the Treatment Team evaluating the youth for admission.

What technical assistance is needed to assist you with program implementation and to improve the effectiveness of the projects you fund?

The Department has contracted with the National Council on Crime and Delinquency to do an in-depth formal evaluation of the Recovery Program. As a first step, an evaluability assessment was conducted by NCCD. It showed ways to improve the Recovery Program to be fortified for the formal outcome study. Planning for the evaluation began July 2000 and actual data collection will begin in or after January 2001.

An entrance/exit survey on Rational/Irrational Beliefs, based on a form provided by the Albert Ellis Institute in New York, was developed with the help of David Douglas, Research Assistant and Statistical Analyst, and Dr. Emmett Velten of the Ellis Institute. It is being administered to youth as they enter and exit from the program. The purpose is to try to determine what impact the program is making on helping youths develop a rational belief system about themselves and their life circumstances. Administration of the entrance survey began July 2000. To date, no youth who have taken the entrance survey have been released to provide comparison exit surveys. A brief descriptive summary of this survey is attached.

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An exit survey to determine satisfaction with elements of the program was also developed. A report is attached. It is to help determine areas of strength and areas that suggest improvements.

A follow-up analysis was done on the status of paroled youth six months following release from the program. This was compared with results from one of the general treatment units at each facility, as well as two other special treatment units. This report is attached.

What technical assistance is needed to assist you with program implementation and improve the effectiveness of the projects?

Materials, seminars and other training on cognitive restructuring therapy with substance abusing youth would be helpful. With turnover in staff, on-going training is a requirement, as well as helping existing staff continue to develop their counseling skills.

It would be helpful for the researcher to be in contact with other comparable programs to share insights on data collection, analysis and evaluation techniques.

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GRANTEE AGENCY: ARIZONA DEPARTMENT OF JUVENILE CORRECTIONS
 PROJECT TITLE: CATALINA MOUNTAIN SCHOOL
 PROJECT START DATE: 1/1/97
 PROJECT GRANT NUMBER: SAT-01-106
 REPORT PERIOD: FFY00 – 10/1/1999 – 9/30/2000

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

	FFY 2000 (10/01/1999 - 9/30/2000	Since start of project to 9/30/2000
White Male Juveniles	5	32
Black Male Juveniles	1	6
Hispanic Male Juveniles	17	40
Native American Male Juveniles	1	4
Other Male Juveniles	0	0
Total Male Juveniles	24	82

Number of offenders successfully completing the grant supported treatment program:

	FFY 2000 (10/01/1999 - 9/30/2000	Since start of project to 9/30/2000
Total Male Juveniles	21	45

Number of offenders who:

	FFY 2000 (10/01/1999 - 9/30/2000	Since start of project to 9/30/2000
Dropped out of program	0	1
Were terminated from program	3	11

Number of offenders who successfully completed an aftercare program:

	FFY 2000 (10/01/1999 - 9/30/2000	Since start of project to 9/30/2000
Total Male Juveniles	3	3

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Requested Information (Please provide one evaluation from for each grant funded project)	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
1. Treatment beds added or supported with RSAT grant funds (Federal & Match)	20	20
2. Treatment beds enhanced with RSAT grant funds (for previously established programs, beds enhanced by new services)	Not Applicable	Not Applicable
3. Total number of male juvenile offenders admitted to the grant funded treatment program.	24	88
4. Total number of female juvenile offenders admitted to the grant funded treatment program.	Not Applicable	Not Applicable
5. Total number of offenders successfully completing the residential program.	21	47
6. Average length of stay in the residential program, for those completing the program (in days).	269	270
7. Number of offenders that dropped out of the program.	2	11
8. Total number of offenders that were terminated from the program.	1	8
9. Total number of offenders that successfully completed the aftercare program.	15	33
10. Of the offenders that completed the program, the percentage that have remained drug free during the residential treatment program.	100%	94%
11. Of the offenders that completed the program, the percentage that have remained drug free during the aftercare program.	78%	78%
12. Of the offenders that completed the program, the percentage that have remained arrest free during the residential program.	100%	100%
13. Of the offenders that have completed the program, the percentage that have remained arrest free during the aftercare program.	71%	70%
14. Of the offenders that completed the program, the percentage that have remained arrest free following release from aftercare (at least one year follow-up).	75%	76%
The following questions are for those programs in existence for two years or more.		
15. Average cost of the program per offender that completed the residential program.	\$20,562	\$17,963
16. Average cost of the program per offender that completed the aftercare program.	Not Available	Not Available

* No aftercare program exists

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Narrative Summary

Please describe the activities carried out with RSAT grant funds during the fiscal year (e.g. treatment programs developed or expanded and program enhancements such as treatment counselors or drug testing added to existing programs).

The Recovery Program at Catalina Mountain School is an intense special treatment program based upon cognitive restructuring for adjudicated youth with moderate to severe drug abuse problems. The first grant-funded Recovery Program began January 1998 in Tucson. This program location houses 20 adjudicated male youth whose serious substance abuse history has played a part in their criminal activities.

Based on the original model at Adobe Mountain School, a federal grant was awarded to Clinical Services through the Arizona Criminal Justice Commission to expand these services to additional youth. The federal grant is called the Residential Substance Abuse Treatment (RSAT) grant. Clinical Services has been awarded the RSAT grant since 1997.

The Recovery Program helps youth with moderate to serious drug problems. It aims to help them interrupt offense cycles and interrupt drug abuse patterns that may trigger criminal acts. It helps youth replace them with drug free choices and citizen competencies. By the time a youth graduates from Recovery, he should be at an advanced Senior Level so that pro-social decision making is consistently demonstrated while he works on drug relapse prevention skills. The program is based on Clinical Services' special cognitive restructuring curriculum and the bound Recovery Individual Treatment Plan booklet. It helps youth through cognitive phases to decide about their drug abuse and criminal cycles. Staffing includes clinical specialists and a psychology associate, as well as correctional officers.

A fortified curriculum includes Seven Challenges workbooks. The special Recovery Individual Treatment Plan booklets use offense cycle worksheets as crucial tools. The workbooks are based upon stages of change.

Periodic certification of Substance Abuse one-on-one counseling occurs from the internationally renowned grandfather of cognitive restructuring, Dr. Albert Ellis.

Rehearse for Success drama was an additional program enhancement for youth. It helped youth reenact their life stories at critical decision points, as actors played key significant others for youth to experience by observing the scenes.

The grant also provided youth the opportunity to participate in Vocational Preparedness Programs. This provided for psychological and vocational interest screening tests, individual counseling around issues that these tests pointed out, and group counseling to

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help youth explore “work trees” and ways to increase their job readiness by overcoming delinquent and emotional barriers.

Three urinalysis tests are conducted during the youth’s stay in secure care. Also, aftercare urinalysis testing was provided.

Describe aftercare services that are provided to offenders who complete the residential treatment provided by RSAT funded projects and explain how priority is given to projects that provide aftercare.

The program provides two urinalysis tests following release into the community. These two tests are funded by the grant; the parole officer may order additional tests, which are state funded.

In addition, the program provides individual, group and family counseling for substance abuse through community providers, typically funded with the Project Leader’s state Special Treatment budget, although services may also be provided through Child Protective Services, Department of Economic Security, and Tribal Councils. Aftercare providers are selected with the following criteria:

- Treatment modality is consistent with the program’s cognitive restructuring approach
- Providers are experienced in substance abuse counseling and working with adjudicated juveniles
- Providers are culturally sensitive to juveniles’ varied racial, ethnic and cultural backgrounds

In addition, youth may be placed in a community treatment center in a step-down program before being released home. These placements are arranged by the Department’s Community Services and funded by the state.

Aftercare service needs are determined by the juvenile’s Treatment Team, which includes counseling staff, educational staff and the youth’s parole officer, during a Transition Staffing prior to release. The initial services are authorized by the unit Youth Program Supervisor; the parole officer authorizes any additional services that may be necessary, and arranges for the urinalysis tests.

*What are the results of any program or project evaluations you have conducted?
Please attach copies of reports.*

The Recovery Program criteria for program admission:

- Youth is a new commit to secure care
- Youth is between the ages of fourteen and seventeen
- Youth is able to complete a minimum six months and a maximum twelve months in the Recovery Unit and will be released on parole upon completion of the program

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- Youth will be able to receive at least three months of aftercare counseling before s/he turns eighteen
- Youth has a history or present diagnosis of substance abuse or dependence that presents as moderate to severe in nature, verified by Substance Use Survey and Clinical Interview (or Mental Status Exam) administered by Psychology Associate II or Psychologist II; youth has no history of chronic inhalant abuse or dependence
- Youth has no criminal issues related to violent or sexualized behavior
- Youth is not presently on a psychoactive medication
- Youth has no history of the following mental illnesses: emerging borderline, emerging antisocial personality, moderate to severe depression, psychosis, rapid cycling mood disorder, bipolar disorder, schizophrenia, thought disorder, dissociative disorder, post traumatic stress, ADD or ADHD, dementia, or organic brain disorder (as verified by Clinical Interview by Psychology Associate II or Psychologist II, or Mental Status Exam)
- Youth reads at seventh grade level or above as indicated by the TABE or WRATIII administered by Education or by the Psychology staff within the last six months
- Youth consents to join Recovery and work the program to deal with drug problems and to participate in aftercare counseling following release from Recovery
- Youth consents to three UA drops while in the unit (entrance, midpoint and exit) and at least two UA drops during aftercare and signs consent form

With the exception of length of stay and urinalysis testing, one or more criteria may be over-ridden by the psychologist on the recommendation of the Treatment Team evaluating the youth for admission.

What technical assistance is needed to assist you with program implementation and to improve the effectiveness of the projects you fund?

The Department has contracted with the National Council on Crime and Delinquency to do an in-depth formal evaluation of the Recovery Program. As a first step, an evaluability assessment was conducted by NCCD. It showed ways to improve the Recovery Program to be fortified for the formal outcome study. Planning for the evaluation began July 2000 and actual data collection will begin in or after January 2001.

An entrance/exit survey on Rational/Irrational Beliefs, based on a form provided by the Albert Ellis Institute in New York, was developed with the help of David Douglas, Research Assistant and Statistical Analyst, and Dr. Emmett Velten of the Ellis Institute. It is being administered to youth as they enter and exit from the program. The purpose is to try to determine what impact the program is making on helping youths develop a rational belief system about themselves and their life circumstances. Administration of the entrance survey began July 2000. To date, no youth who have taken the entrance

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survey have been released to provide comparison exit surveys. A brief descriptive summary of this survey is attached.

An exit survey to determine satisfaction with elements of the program was also developed. A report is attached. It is to help determine areas of strength and areas that suggest improvements.

A follow-up analysis was done on the status of paroled youth six months following release from the program. This was compared with results from one of the general treatment units at each facility, as well as two other special treatment units. This report is attached.

What technical assistance is needed to assist you with program implementation and improve the effectiveness of the projects?

Materials, seminars and other training on cognitive restructuring therapy with substance abusing youth would be helpful. With turnover in staff, on-going training is a requirement, as well as helping existing staff continue to develop their counseling skills.

It would be helpful for the researcher to be in contact with other comparable programs to share insights on data collection, analysis and evaluation techniques.

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GRANTEE AGENCY: MARICOPA COUNTY SHERIFF'S OFFICE
 PROJECT TITLE: ALPHA PROGRAM
 PROJECT START DATE: 7/1/1998
 PROJECT GRANT NUMBER: SAT-00-108
 REPORT PERIOD: FFY00 – 10/1/1999 – 9/30/2000

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

	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000		FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
White Males	135	354	White Females	65	144
Black Males	26	77	Black Females	11	30
Hispanic Males	44	190	Hispanic Females	11	31
Native American Males	5	15	Native American Females	3	7
Other Males	0	1	Other Females	0	0
Total Males	210	637	Total Females	90	212

Number of offenders successfully completing the grant supported treatment program:

	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
Total Males	97	261
Total Females	83	180

Number of offenders who:

	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
Males dropped out of program	11	27
Females dropped out of program	4	8
Males terminated from program	104	159
Females terminated from program	21	42

Number of offenders who successfully
 completed an aftercare program:

	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
Total Males	124	338
Total Females	105	170

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Requested Information (Please provide one evaluation from for each grant funded project)	FFY 2000 (10/01/1999 - 9/30/2000)	Since start of project to 9/30/2000
1. Treatment beds added or supported with RSAT grant funds (Federal & Match)	15	45

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2. Treatment beds enhanced with RSAT grant funds (for previously established programs, beds enhanced by new services)	15	45
3. Total number of male offenders admitted to the grant funded treatment program.	210	480
4. Total number of females offenders admitted to the grant funded treatment program.	105	240
5. Total number of adult offenders successfully completing the residential program.	315	720
6. Total number of juvenile offenders admitted to the grant funded treatment program.	155	359
7. Total number of offenders successfully completing the residential program.	198	497
8. Average length of stay in the residential program, for those completing the program (in days).	180	180
9. Total number of offenders that dropped out of the program.	20	73
10. Total number of offenders that were terminated from the program.	97	150
11. Total number of offenders that successfully completed the aftercare program.	198	497
12. Of the offenders that completed the program, the percentage that have remained drug free during the residential treatment program.	100%	100%
13. Of the offenders that completed the program, the percentage that have remained drug free during the aftercare program.	100%	100%
14. Of the offenders that completed the program, the percentage that have remained arrest free during the residential program.	100%	100%
15. Of the offenders that have completed the program, the percentage that have remained arrest free during the aftercare program.	100%	100%
16. Of the offenders that completed the program, the percentage that have remained arrest free following release from aftercare (at least one year follow-up).	83%	83%
The following questions are for those programs in existence for two years or more.		
17. Average cost of the program per offender that completed the residential program.	N/A	N/A
18. Average cost of the program per offender that completed the aftercare program.	N/A	N/A

* No aftercare program exists

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Narrative Summary

Please describe the activities carried out with RSAT grant funds during the fiscal year (e.g. treatment programs developed or expanded and program enhancements such as treatment counselors or drug testing added to existing programs).

Since obtaining the RSAT funds, the men's portion of the Alpha Program has doubled in size, including all supplemental programs that were already offered to the original group members (Life Skills, GED, Computer Learning Lab, etc.) Drug testing has been a requirement for Alpha participants from the beginning of the program. Crisis Counseling has been made available to those participants to find themselves in need of some additional counseling for issues that may not be appropriate in the group setting. Anger Management groups have been added during the primary phase of treatment, and Cognitive Restructuring groups were added in the post-Alpha phase. During the past year, there has been a greater focus on self-esteem and co-dependency in the female Anger Management groups. This focus seems to have enabled the women to identify and enforce their personal boundaries in a more positive way that does not include violence or abuse.

Describe aftercare services that are provided to offenders who complete the residential treatment provided by RSAT funded projects and explain how priority is given to projects that provide aftercare.

Graduates are allowed to remain in a segregated housing unit with their fellow group members for the duration of their incarceration. This allows the participants to continue working together with common work assignments and attend aftercare programming consisting of post-Alpha groups. Cognitive Restructuring groups also begin at this time. All programming and activities are coordinated so that all members can participate together to keep the cohesiveness of the group going.

*What are the results of any program or project evaluations you have conducted?
Please attach copies of reports.*

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

*What are the results of any program or project evaluations you have conducted?
Please attach copies of reports.*

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

An outcome study (CRAS – Cognitive Restructuring Assessment Survey) was conducted this year, which showed consistent results in regard to recidivism rates for the Alpha Program. A narrative of the findings of this survey is attached.

The Alpha Program was recently nominated for the 2001 Psychiatric Services Achievement Awards Competition, which is supported in part by a grant from Pfizer, Inc. The successful nominees will be named in July 2001. The nomination application was submitted by Southwest Behavioral Health Services, one of the contract providers of services to the members of the Alpha Program.

What technical assistance is needed to assist you with program implementation, and to improve the effectiveness of the projects you fund?

The assistance we have received in the past from RSAT staff has been of great benefit to us as an already-successful substance abuse treatment program. The additional funds that the grant provided to us have allowed us to continue to improve and expand the program that was already in place. We recently obtained our license as a treatment program through the Arizona State Department of Health Services, which provided us with even more information and insight. At this time, our statistics show that we are providing a great service to the community, and we will continue to provide additional programming as time and resources permit.