

FINAL REPORT

OHIO RSAT OUTCOME EVALUATION

SUMMARY REPORT

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OHIO RSAT OUTCOME EVALUATION

INTRODUCTION

The Office of Criminal Justice Services and the University of Cincinnati formed a partnership for the development and evaluation of residential substance abuse treatment programs in Ohio. OCJS was the administrative agency for the RSAT programs and was responsible for program funding, development, and oversight. The University of Cincinnati was responsible for program evaluation. Three programs participated in an outcome evaluation that was funded by the National Institute of Justice. The programs included in the outcome evaluation included – Monday Community Correctional Institution, Mohican Youth Center, and Noble Choices. This report represents the culmination of the outcome evaluation that took place from January 1998 to June 2001.

STATEMENT OF THE PROBLEM

The prevalence of drug and alcohol use among adult and juvenile offenders creates many problems for criminal justice system. It is estimated that, within the criminal justice system, seven out of ten men and eight out of ten women are drug users (Lipton, 1998; National Center on Addiction and Substance Abuse, 1998). Furthermore, 80 percent of the nation's correctional population have been seriously involved with drugs. In 1998, drug offenders accounted for 21 percent of the state prison population and 59 percent of the federal prison population (National Center on Addiction and Substance Abuse, 1998). In addition, 30 billion dollars was spent to incarcerate offenders who had a history of drug or alcohol abuse or were convicted of drug/alcohol abuse (National Center on Addiction and Substance Abuse, 1998).

The intricate link between substance abuse and delinquent behavior also is well documented. Drug testing conducted in twelve cities during 1997 revealed that 42 to 66 percent of male youths tested positive for at least one drug at the time of arrest (National Institute of Justice, 1998). Additionally, juvenile arrests for drug abuse violations increased 86 percent over the past decade (Snyder, 1999). Recognizing the link between continued drug use and recidivism, state and local agencies are searching for the most effective way of treating this challenging correctional population. The Residential Substance Abuse Treatment programs funded by Subtitle U of the Violent Crime Control and Law Enforcement Act of 1994 offer a promising avenue for treating drug offenders.

Residential substance abuse treatment has its roots in the therapeutic community movement of the 1950s. Synanon, the first therapeutic community, was established by Dederich in 1958 and emerged out of the self-help movement (Brook and Whitehead, 1980). It is estimated that nearly one-third of all therapeutic communities today are based upon the traditional Synanon programs (DeLeon, 1990a). These traditional programs are highly structured and organized, and treatment lasts from one to three years (Sandhu, 1981). Because drug use is seen as a symptom of a larger personality disorder, traditional TCs are designed to restructure the personality of the offender through encounter group therapy and a focus on occupational improvements. The “community” of drug offenders is seen as the primary agent of change (DeLeon and Ziegenfuss, 1986). Recently modified versions of the traditional TC have emerged. Correctional research has shown that cognitive-behavioral approaches (e.g., relapse prevention) are effective in reducing the likelihood of recidivism. Thus, TCs have combined the self-help approach with cognitive-behavioral interventions to form

“modified” TCs in which the main focus of treatment is the cognitive-behavioral interventions.

Research has revealed mixed results for both community-based and prison-based TCs. Several studies of community-based TCs have demonstrated a reduction in criminal behavior and substance abuse and an improvement in employment and other prosocial behaviors (Knight, Simpson, and Hiller, 1999; Wexler, Melnick, Lowe, and Peters, 1999; Wexler, 1995). Overall, the research on therapeutic communities suggests that program completion and length of stay in treatment are the most significant factors in predicting success (usually measured as no involvement in criminal activity and abstinence from drugs) (Simpson, 1984; DeLeon and Rosenthal, 1979; Faupel, 1981; DeLeon, 1990b).

The research on TCs is not without criticisms. Inciardi, Martin, Butzin, Hooper, and Harrison (1997) identified four criticisms of TC research. First, a lack of multivariate designs makes it difficult to disentangle the effects of individual characteristic and the effects of treatment, leaving us with little information about factors that are predictors of relapse or recidivism. Second, most studies have not incorporated multiple outcome criteria to measure program success. Third, as with most correctional research, the follow-up time frames have been inadequate. Fourth, the comparison groups used often fail to account for important differences between groups that are likely to influence program outcome. Relatedly, the use of treatment comparison groups is often misleading since members of these groups are likely to have received some kind of treatment. Another common shortcoming in TC research is the insufficient attention that is given to the measurement of program quality (Faupel, 1981; Moon and Latessa, 1994). The

current studies overcame these criticisms by: using two measures of outcome – arrest and incarceration, having a longer follow-up period (from 21 months to 3 years), and using comparison groups which receive treatment and those that do not receive treatment.

SITE DESCRIPTIONS

Three RSAT programs were funded in Ohio in 1997. This outcome evaluation focuses on MonDay Community Correctional Institution, Mohican Youth Center, and Noble Choices.¹ Table 1 provides a brief description of these programs.² MonDay Community Correctional Institution is funded by the Ohio Department of Rehabilitation and Correction; but is an autonomous program under the jurisdiction of a local community correctional board comprised of local judiciary. The Mohican Youth Center is operated by the Ohio Department of Youth Services, which is a statewide agency responsible for the operation of 13 secure facilities and parole services, and the care and supervision of approximately 4,300 youth. Noble Choices is operated by the Ohio Department of Rehabilitation and Correction. This agency is responsible for 34 prisons and parole services, and the care and supervision of approximately 75,000 adult offenders.

¹ There were three separate studies conducted. The first study (MonDay's outcome evaluation) compared three different forms of treatment – a residential substance abuse treatment program (MonDay RSAT group) to a traditional residential program (MonDay's pre-TC group) and an outpatient drug treatment program (MCCOP). The second study (Mohican's outcome evaluation) compared a juvenile residential based substance abuse program (Mohican's treatment group) to a traditional residential based program for juveniles (Mohican's pre-TC) and with youth who received little or no treatment (DYS group). The last study (Noble's outcome evaluation) compared a prison-based residential substance abuse program (Noble's treatment group) to offenders who received no treatment (Noble's comparison group).

² For each site, comparison groups were also chosen to determine the effectiveness of the RSAT programs. The descriptions of the comparison groups will be presented below.

Table 1: Site Descriptions (Treatment Groups)

Program Characteristics	MonDay Community Correctional Institution	Mohican Youth Center	Noble Choices
Population	Adult males & females	Juvenile males	Adult males
Population Setting	Community-based correctional facility	Medium security facility	Medium security facility
Parent Organization	Local judiciary board	Department of Youth Services	Department of Rehabilitation and Corrections
Program Approach	TC with cognitive behavioral	TC with cognitive behavioral	TC with cognitive behavioral
Length of Stay	6 months	6 months	6 - 9 months
Number of Beds	30	160	120
Date of First Admission	January 1, 1998	March 30, 1998	October 19, 1998
Date Study Ended	June 30, 2001	June 30, 2001	June 30, 2001
Sample Size	N = 226	N = 448	N = 273
CPAI Scores ³ :			
Implementation	90.9	64.3	71.4
Assessment	72.7	72.7	54.0
Treatment	59.0	24.0	29.0
Staff	62.5	54.5	54.0
Evaluation	100.0	75.0	33.0
Other	100.0	83.3	66.7
Overall	74.2	52.1	49.2
Case Status at End of Study Period:			
Successful	198 (87.6%)	289 (82.1%)	83 (41.1%)
Unsuccessful	16 (7.1%)	12 (3.4%)	61 (30.2%)
Other	12 (5.3%)	51 (14.5%)	58 (28.8%)

³ These are the revised scores.

MonDay Community Correctional Institution

*MonDay RSAT Group*⁴. Offenders that entered MonDay Community Correctional Institution between January 1, 1998 and June 30, 2001 participated in this RSAT outcome evaluation. There were a total of 226 offenders in the MonDay treatment group. By January 1, 1998, MonDay had shifted treatment from a residential-based program to a residential substance abuse program that operated as a therapeutic community. The therapeutic community model that is operated by MonDay is rooted in a social learning approach that provides opportunities for modeling and behavioral rehearsal techniques that engender self-efficacy. The treatment groups provided within MonDay incorporate a cognitive behavioral approach that aims to challenge antisocial attitudes and develop self-control. More specifically, some of the groups that are conducted at MonDay are chemical dependency education and process, relapse prevention, criminal thinking errors, anger management, problem solving, codependency, and parenting.

In addition, to the groups, offenders may also work on obtaining their GED or seek and obtain employment. MonDay has also adopted much of the language of a therapeutic community. For example, offenders participate in encounter groups in which a member is confronted about behavior in front of his/her peers. The encounter group is designed to make the offender see how his/her behavior affects the community and how his/her attitudes, thoughts, and value systems affect his/her behavior. In addition to group

⁴ Participation in MonDay's treatment group was voluntary. If the facility identified a need and the offender agreed to treatment, then the offender could be placed in the TC. Furthermore, participation in the evaluation of MonDay's treatment was completely voluntary. There were no repercussions if the offender refused to volunteer.

therapy and employment/GED classes, offenders participate in morning and evening meetings and meet for individual counseling sessions with their case manager.

MonDay Community Correctional Institution Pre-TC. The first comparison group for MonDay consisted of 244 offenders who were sent to MonDay from January 1, 1991 to June 30, 1993. During this time, MonDay operated a traditional residential program that attempted to make the offenders become responsible by modifying their behavior through holistic programming or treating the whole offender. The program conducted various groups such as Taking Charge, chemical dependency groups, and parenting classes. The Taking Charge group, chemical dependency groups, and the Rational Emotive Therapy group for anger management taught offenders how to plan and rehearse alternatives to problem situations through behavioral techniques.

The difference in treatment between the therapeutic community and the residential program is the influence of the family. In a TC, the “community” plays a very influential role in the treatment. It is the family’s responsibility to identify thinking errors and confront the particular family member. In addition, the TC model was based on a social learning model whereas the residential program was more of an eclectic model.

MCCOP Participants. The other comparison group included 133 offenders who participated in an outpatient drug treatment program – Montgomery County Chemical Offender Program (MCCOP). Offenders in this program were sentenced to a probation term in which they participated in a 12-step model in order to reduce substance abuse. Offenders who were sentenced to probation from June 20, 1990 to August 5, 1994 and

participated in the Montgomery County Chemical Offender Program were included as comparison participants⁵.

Mohican Youth Center

*Mohican Treatment Group*⁶. The Mohican treatment group consisted of 448 youth that entered Mohican during February 2000 to June 2001. In March 1999, Mohican shifted treatment from a residential-based substance abuse program to a therapeutic community model. Mohican has also adopted much of the language of a therapeutic community. With the TC model the youth have a greater role in conducting groups and confronting behavior. For example, youth participate in encounter groups in which youth are confronted about behavior in front of his peers. The encounter group is designed to make the youth see how his behavior affects the community and how his attitudes, thoughts, and value systems affect his behavior. Youth also participate in groups based on the phase they are in. Mohican has four phases in which youth learn about the therapeutic community, identify thinking errors, focus on personal recovery, and practice relapse prevention. These groups utilize some cognitive behavioral techniques such as identifying thinking error and teaching prosocial alternatives to behavior. In addition to group therapy, youth attend school during the year and participate in morning and evening meetings.

⁵ Data from the comparison groups were collected earlier than the data from the treatment group. The data from the comparison groups were collected as part of an earlier study of the institution and thus, were readily available. In addition, there were not large amount of missing information within these data sets. Furthermore, the variables were collected in a manner which allowed for a comparison with the data collected from the treatment group.

⁶ Participation in Mohican's treatment group was not voluntary. The whole institution was a therapeutic community and youth were sent to this institution by the Department of Youth Services. However, participation in the evaluation of Mohican was voluntary. There were no consequences if the youth decided not participate in the evaluation.

Mohican Youth Center Pre-TC. The first comparison group for Mohican consisted of 343 youth who were sent to Mohican from March 30, 1998 to March 31, 1999⁷. During this time, Mohican operated a combined 12-step and cognitive-behavioral model of treating substance abuse. The 12-step model views alcoholism as a physical, mental, and spiritual disease (Van Voorhis and Hurst, 2000). The cognitive-behavioral approach used by Mohican included the Normative Culture group whereby youth identified and resolved problem behaviors and thinking errors. Thus, this cognitive component of the program sought to reduce alcohol and drug abuse by changing the thinking that supports substance abuse and by manipulating the stimuli and consequences that prompt and maintain behavior. This comparison group was chosen in order to compare treatment modalities.

The pre-TC treatment was an eclectic approach which used cognitive-behavioral techniques. The overall program was not based on an effective model of treatment as was the TC that was operated by the Mohican treatment group. In addition, the family members in the TC were more responsible for confronting anti-social thinking and behavior. In essence, the study is comparing an eclectic model (12-step with cognitive-behavioral components) with a social-learning model (therapeutic community).

DYS Participants. The other comparison group included 450 youth in other institutions within the Department of Youth Services who received minimal or no specialized drug and alcohol services. The youth were randomly selected from an automated database maintained by DYS. Females and those youth who did not have a

⁷ The data used for the comparison group was previously collected as part of a process evaluation conducted on the RSAT program at Mohican, and thus, were readily available. Moreover, the variables corresponded with the data that was collected for the therapeutic community program at Mohican (Mohican treatment group).

risk assessment score were removed from the database prior to the selection.⁸ Due to the random selection by the risk of recidivism, these youth did not necessarily have to have an identified substance abuse problem.

Noble Choices

*Noble Treatment Group*⁹. The Noble treatment group was comprised of offenders that entered the Noble Choices RSAT program between August 1998 to June 2001. A total of 273 offenders were in the treatment group.¹⁰ Noble Choices is a six to nine month therapeutic community consisting of three phases. During Phase I, or the induction phase, new residents learn about the structure of the program and what is expected of them as members of a therapeutic community. Inmates are also provided with basic drug and alcohol education during this phase. Phases II and III focus on primary treatment and continuing care planning. During phases II and III, inmates participate in the following groups:

- Rational Emotive Therapy – focuses on replacing unhealthy thought patterns with healthy thought patterns that support prosocial behaviors.
- Free Your Mind – focuses on the choices and consequences associated with substance abuse and strategies for change.
- Commitment to Change – identifies thinking errors and strategies for overcoming them.
- Manifesting Excellence – focuses on cultural diversity.

⁸ Ohio Department of Youth Services uses the Youthful Level of Service Inventory (YO-LSI) to determine risk level.

⁹ Participation in Noble's TC was completely voluntary. Offenders were assessed to determine if they meet the criteria for entering the TC and then it was the offender's decision to participate. Furthermore, offenders could exit the program voluntarily. In addition, participation in the evaluation was completely voluntary. There were no consequences for refusing to participate.

¹⁰ There were a total of 353 offenders that entered the RSAT program during this time period. However, 80 cases were missing large amounts of information; therefore, it was impossible to include these participants in the study.

- Relapse Prevention – focuses on the cycle of addiction and on providing clients with the skills necessary for maintaining sobriety.

Offenders also participate in ongoing TC activities including a weekly TC caseload group that focuses on feelings and problem solving, TC family meetings, encounter groups, crew meetings, seminars, and didactics, and individual sessions with their TC counselor.

Noble Comparison Group. The comparison group for Noble was selected from a sample of cases provided by ODRC. There were two criteria that had to be met in order to be included into the comparison group. First, offenders had to enter the prison system during 1998. Second, offenders had to be identified as having a substance abuse problem, but assigned to the general population. There were two different sources used to determine if the offender had a substance abuse problem. First, the mental health assessment was examined to identify if the offender had a substance abuse problem. Second, when the information was not available in the mental health assessment, the pre-sentence investigation was reviewed to determine a presence of a substance abuse problem. There were 258 offenders in this comparison group.

METHODS

Research Design

This outcome evaluation utilized a non-equivalent comparison group design to estimate the impact of the RSAT programs on future criminal involvement. Random assignment to groups was not possible. Therefore, any significant differences on background characteristics between the treatment and comparison groups were controlled statistically.

Data Collection

As part of the RSAT project, the University of Cincinnati created an automated database to assist programs with data collection and provide a mechanism for reporting results. The RSAT database was installed at the University. Site personnel collected the data from offenders and case notes and UC staff entered the data into the automated database.¹¹ The data consisted of: demographics, offense and disposition, prior criminal history, drug use and history, risk level, program phases and advancement, type of treatment, program violations, drug screens, treatment outcome, and pre and post assessments. The sites also provided agency-specific assessment information on each offender (e.g., Level of Service Inventory, Youthful Level of Service Inventory, Adult Substance Abuse Survey, Prison Inmate Inventory). Data forms were checked periodically to ensure the quality of the data. Recidivism data were collected by UC staff through written surveys of parole officers and offenders during December 2001 and January 2002.¹²

In addition to quantitative data for measuring program processes, the Correctional Program Assessment Inventory (CPAI, Gendreau & Andrews, 1994) was used as a measure of program integrity. The CPAI provides a standardized, objective way for assessing the quality of correctional programming against empirically based standards. The CPAI is designed to ascertain how well the program is meeting the principles of effective intervention. There are six primary sections of the CPAI: program

¹¹ Staff at Mohican Youth Center entered the data and then sent the database to UC.

¹² Follow-up questionnaires were sent to parole officers and RSAT treatment participants. However, only a limited number of the follow-up questionnaires sent to the participants were returned to the University. Therefore, follow-up information will be reported from the parole officers only. Furthermore, the majority of Noble's treatment group was returned to the general population. In addition, of those who were released, information on the parole region was missing. For these reasons, follow-up questionnaires were not sent to Noble participants or to Noble's parole officers.

implementation, client pre-service assessment, program characteristics, staff characteristics, evaluation, and other. Each section of the CPAI consists of 6 to 26 items with a total of 77 items. Each of these items is scored as “0” or “1.” For an item to be scored “1”, the program must demonstrate that it has meet the specified criteria. Each section is scored as either “very satisfactory” (70% to 100%); “satisfactory” (69% to 60%); “needs improvement” (59% to 50%); or “unsatisfactory” (less than 50%). The overall total and score is summed across the six sections and the same scale is used in determining the overall assessment. Data for the CPAI are gathered through structured interviews with program staff. Other sources of information include examination of program documentation, review of case files, and observation of program activities. Upon conclusion of the assessment, a report is written which details the program strengths and areas that need improvement.

Research using the CPAI has shown it to be a significant predictor of arrest and incarceration (Holsinger, 1999). Offenders who participate in programs where there is low program integrity (as measured by the CPAI) are significantly more likely to recidivate (e.g., be arrested and/or incarcerated). Furthermore, other researchers have found support for the concepts that comprise the CPAI (Antonowicz & Ross, 1994).

Process Variables Examined

There were four main categories of process variables examined including offender characteristics, nature of services provided, termination data, and post-release treatment and supervision.

Offender characteristics. The standardized intake form (see Appendix B) was used to collect basic demographic information such as age, gender, race, marital status,

number of dependents, years of education, and employment status prior to arrest. Additional information was also collected which included: criminal history and substance abuse history.

Supplemental information that was collected on offender characteristics included: the offenders' level of psychological and social functioning as measured by the Client Self-Rating Form (Simpson & Knight, 1998); their level of cognitive distortions as measured by the *How I Think* questionnaire (Barriga, Gibbs, Potter, & Liao, 1999); their risk of recidivism and major problem areas as measured by the Level of Service Inventory (LSI, Andrews & Bonta, 1995), or the Youthful Level of Service Inventory (YLSI) or the Prison Inmate Inventory (PII, Behavior Data Systems, 1998); and their severity of substance abuse problem as measured by the Adult Substance Use Survey (ASUS, Wanberg, 1994) or the Juvenile Automated Substance Abuse Evaluation (JASAE, ADE Incorporated, 1997)¹³.

Nature of services provided. The service tracking form (see Appendix A) was used to collect information on the nature of services available at the RSAT programs. The information collected included: participation in groups, length of time in each phase, number of encounters, length of individual counseling sessions, and number and type of program violations. Additional information from the CPAI¹⁴ and the schedule of activities were used as indicators of the services provided.

Termination data. The information collected regarding the offenders' termination from the RSAT programs included type of termination (successful or unsuccessful) and criminal justice placement and residency upon termination (See

¹³ See Appendix A for copies of these questionnaires.

¹⁴ Information from the CPAI included the specific groups and interventions that were being offered to everyone.

Appendix A). Successful completion for the groups was defined as acquiring treatment goals¹⁵.

Post release treatment and supervision. Data collection instruments were developed to gather general information from parole officers regarding each offender's treatment and supervision activities during the period of supervision after release from the program. A data collection instrument was sent to an offender who provided an address to gather information on educational progress, employment and family situation, peer groups, and criminal involvement and drug usage after release from the program.

Outcome Variables Examined

There were two main categories of outcome variables examined including intermediate outcomes and longer-term outcomes.

Intermediate outcomes. Intermediate outcomes that were examined included changes in offenders' psychological and social functioning as measured by the re-administration of the Client Self-Rating form and changes in the offenders' level of cognitive distortions as measured by the re-administration of the *How I Think* questionnaire.

Long-term outcomes. The current evaluation tracked offenders in all groups for a period of at least 21 months. MonDay's evaluation tracked offenders up to 3½ years after they left the institution. Mohican's evaluation tracked offenders for a period of 21 months (636 days) after they were released from Mohican. Noble's evaluation tracked

¹⁵ If the offenders did not complete the criteria for successful completion, then they were removed from the RSAT groups because the RSAT program was only 6 months in length

offenders for a period of seven months to 3½ years.¹⁶ The outcome variables that were examined included two measures of recidivism. Recidivism was defined as new arrest (yes or no) and any new period of incarceration (yes or no)¹⁷.

Analysis

This study examines the differences among the RSAT participants and comparison group members along a variety of measures. In some instances, data for the comparison groups were not available. When this was the case, only the treatment data were presented. This study will examine multiple outcome measures for the RSAT participants and comparison cases. Chi-square, t-tests, and analysis of variance tests were conducted to examine the differences between groups and logistic regression was used to estimate the probability of rearrest.

Logistic regression was used to estimate the probability of arrest and new incarceration after incarceration. The purpose of the logistic regression is two-fold. First, a logistic regression model identifies the significant predictors of the outcome – arrest or new incarceration. Second, logistic regression controls for differences between the groups. Accordingly, variables that are significantly different will be included into the model in order to control for these differences. The variables chosen for the logistic regression varied according to the program.¹⁸ For example, the variables for the MonDay evaluation included: race, gender, marital status, completion of 12th grade, age, number of

¹⁶ Not all MonDay and Noble offenders were tracked for a period of 3½ years after termination from the program. Those who were released early in the study period were more likely to have a longer time “at risk” and thus, were tracked for a longer period of time.

¹⁷ The arrest and incarceration period included all possible options – new arrest for any crime and/or technical violation for any reason that resulted in an arrest or incarceration.

¹⁸ See Appendix B for a complete listing of the variables in all the models and their codings. Some variables were not included in the logistic regression because data were not available (e.g., the facility did not use the assessment instrument at the time of data collection).

prior arrest (included in the arrest model), number of prior convictions (included in the incarceration model), and group. The variables included in the Mohican evaluation were race, age, highest grade completed, felony degree, Y-LSI total, JASAE score, and the group variable. The variable for the Noble evaluation included: race, age, marital status, completion of 12th grade, number of prior arrests (included in the arrest model), number of prior convictions (included in the incarceration model), participation in previous treatment, days at risk in the community, and the group variable. These variables were chosen for three reasons: 1) they were correlated at the bivariate level with the outcomes; 2) they were included as control variables because there were significant differences between the groups; or 3) previous research has shown that the variable was a significant predictor of outcome.

RESULTS¹⁹

Social Demographic Information

Social demographic data were collected in order to describe the RSAT participants and comparison groups and to investigate whether differences in outcome were related to differences within the three samples. By knowing the types of offenders the RSAT programs serve, we can determine whether outcomes were influenced by any of these demographic factors. This section profiles the groups based on demographic characteristics such as age, race, gender, educational level and performance, employment and criminal history.

What are the characteristics of the offenders served by Ohio's RSAT programs? What, if any differences exist between the treatment groups and comparison groups with regards to background characteristics?

¹⁹ For a complete set of tables that contain all the information presented throughout the report, see Appendix B.

Monday Community Correctional Institution:

- The Monday RSAT group and comparison groups were similar in regards to marital status, educational level, and employment status. The typical offender was single, had a 10th grade education, and was unemployed prior to arrest.
- The offenders were different in regards to race, gender, and age. The typical offender in the Monday RSAT group was white (60.8%), male (67.3%), and was 32 years of age. The typical offender in the pre-TC group was white (53.1%), male (65.8%), and age 27 when they were sentenced to the Monday pre-TC program. The typical offender in the MCCOP group was black (51.6%), male (82.7%), and 30 years of age. Both the RSAT group and the pre-TC group were more likely to have females than the MCCOP.
- The majority of offenders in the Monday RSAT group and Monday pre-TC group were serving a sentence for a felony 4 or felony 5 property or drug offense. The majority of offenders in the MCCOP group were serving a sentence for a felony 3 or 4 personal or property crime.
- The Monday RSAT group was significantly younger than the MCCOP group when they were first arrested ($\bar{x} = 19.89$ vs. $\bar{x} = 23.44$). In addition, the RSAT group had significantly less prior arrests ($\bar{x} = 3.18$) than the pre-TC group ($\bar{x} = 5.99$); however, the RSAT group had significantly more prior convictions than the MCCOP group ($\bar{x} = 2.20$ vs. $\bar{x} = 1.37$).
- The majority of the Monday RSAT group scored in the “moderate” (61%) to “medium/high” (30.3%) risk category of the Level of Service Inventory.
- The Monday RSAT group has an extensive substance abuse history. The majority of participants scored in the high-medium or high category for the following ASUS scales: involvement, disruption, social, mood, and global. Scoring in this range on these scales indicate that drug or alcohol abuse is extensive and disruptive in life functioning. The average age of first alcohol use was 13 and the average age of first drug use was 15. Furthermore, the majority of the treatment group (81.8%) reported a history of prior drug or alcohol treatment.
- The majority of the Monday RSAT group had high levels of anxiety, depression, risk-taking behaviors, hostility, and antisocial attitudes as measured by the Client Self Rating Form. In addition, most of the treatment group scored in the borderline-clinical to clinical range on the cognitive distortions, behavioral referents, and overt, covert, and overall *How I Think* scales. Offenders falling into this category may exhibit eternalizing psychopathology.

Mohican Youth Center:

- The Mohican treatment and comparison groups were very similar with regards to race, age at intake, highest grade completed, and enrollment in school prior to arrest. The typical youth in each group was white, 16 years of age, had completed the 8th grade, and had been enrolled in school.
- Members in the Mohican treatment and pre-TC group differed only in terms of employment status and living arrangement prior to commitment to Mohican (data was not available for the DYS group). The majority of youth in the treatment group was employed (50.7%) at the time of intake and living with a parent or guardian (94.4%). Youth in the pre-TC group was more likely to be unemployed (73.9%) and living in a secure environment (9.8%).
- Concerning criminal history, the typical Mohican offender was a property offender with a felony level 2 offense (except for DYS where the level of offense was a misdemeanor). However, there were significant differences between the groups in regards to the criminal history. For example, the Mohican pre-TC was more likely to have committed a personal offense (35.1%) whereas the treatment group was more likely to have committed a property offense (52.9%). The DYS group was the least serious group when examining the level of adjudication. More DYS youth had a misdemeanor or felony 5 adjudication (31.8%) whereas 45.5 percent of the Mohican treatment group and 46.1 percent of the pre-TC group had a felony 1 or 2 offense. The age at first arrest was approximately 12 years of age for the Mohican treatment and Mohican pre-TC group.
- The age of first drug and alcohol use was approximately 12 years of age for both the Mohican treatment and Mohican pre-TC group (data was not available for the DYS group). In addition, the drug of choice for these two groups was marijuana.
- Results of the Juvenile Automated Substance Abuse Evaluation (JASAE) instrument indicated that the youth in all three groups have significant substance abuse problems along with ingrained patterns and attitudes supporting this problem. The majority of youth in all groups had a score of 21 indicating a need for intensive substance abuse treatment.
- The results of the Youthful Level of Service Inventory (Y-LSI) reports that the majority of youth in the Mohican treatment group (66.6%) and the Mohican pre-TC group (69.5%) were assessed as a high or very high risk of recidivating whereas the majority of the DYS group (56.9%) were assessed as a moderate risk of recidivating.
- Data pertaining to psychological and social factors as measured by the Client Self-Rating are available for the Mohican treatment group and the Mohican pre-TC group. T-tests showed that the pre-TC group was a higher risk than the treatment group on the following scales: anxiety, depression, risk-taking, and

hostility. However, the Mohican treatment group had higher levels of self-esteem than the pre-TC group.

- The Mohican treatment group's cognitive distortions were measured using the *How I Think* Questionnaire. The results indicate the majority of youth were classified as borderline clinical or clinical in the following scales: self-centeredness, blaming others, minimizing, opposition, physical aggression, lying, and stealing; thus, indicating high levels of cognitive distortions.

Noble Choices:

- The Noble treatment group and comparison groups were similar in regards to background characteristics. The typical offender did not complete 12th grade and was single. There were significant differences in regards to race, age and employment status. The typical offender in the Noble treatment group was white (64.8%), 28 years of age, and employed full-time at the time of placement (60.1%), while the typical offender in the comparison group was black (66.7%), 33 years of age, and unemployed (71.1%).
- Concerning criminal history the typical offender in the Noble treatment group was a personal (37.2%) or property offender (44.0%), whereas, those in the comparison group were more likely to be involved in drug offenses (97.3%)²⁰. Noble treatment group members were significantly more likely to be convicted for Felony 2 (31.6%) and 3 offenses (27.1%) while comparison group members were more likely to be convicted for Felony 5 offenses (61.3%). The age at first arrest was similar for both groups with most individuals reporting their first arrest at age 16 or greater.
- Noble treatment and comparison group participants were significantly different in regards to prior drug charges with 49.0 percent of the treatment group and 71.7 percent of the comparison group having a prior drug charge. Data were available for the treatment group for age at first alcohol use and age at first drug use. The treatment group first used alcohol at the age of 12 whereas the average age of first drug use was 14.
- Data pertaining to the Prison Inmate Inventory were available for Noble treatment group participants. The data indicated that a majority of the participants have a "problem" or "severe problem" with drugs and alcohol. Also, approximately one-half of the sample reported a "problem" or "severe problem" for distress and judgment. Participants were at higher risk on the adjustment and drug use scales at program termination than at program intake.

²⁰ The selection criteria for inclusion into the comparison group were based on drug charges. The significant difference was expected.

- Data pertaining to psychological and social factors as measured by the Client Self-Rating were available for the treatment group. Noble participants scored high on the desire for help, decision-making, self-efficacy, treatment readiness, and anti-social attitudes scales. Thus, these areas are higher risk factors for the Noble participants.
- The Noble treatment group's cognitive distortions were measured using the *How I Think* questionnaire. The treatment group were classified as "borderline clinical" or "clinical" in the following scales: physical aggression, lying, oppositional defiance, stealing, self-centered, blaming others and minimizing/labeling thus indicating high levels of cognitive distortions. Offenders categorized in the clinical range have higher needs in these cognitive distortion areas.

All RSAT Participants:

- As shown in Table 2, the majority of all RSAT participants was white, male, single, and between the ages of sixteen to twenty. Fifty-seven percent of the participants were white whereas 92.1 percent was males. Approximately 27 percent of the sample was age 16 to 17 at the time of incarceration; 18.6 percent was age 18 to 20; 12.6 percent was age 21 to 25 at the time of intake; and 9.9 percent was 26 to 30 years of age. Only 20.4 percent of adult RSAT participants were married at the time of intake.
- The majority of the RSAT sample was uneducated and unemployed. Only 21.7 percent of RSAT participants had at least a 12th grade education. The majority of the sample had only a 10th grade education or lower (66.5%).
- Approximately 42 percent of the sample was employed either full-time or part-time at the time of incarceration.
- Table 3 reports the current offense and criminal history for all RSAT participants. More offenders were arrested for a property crime (47.8%) followed by a personal crime (26.2%) and a drug offense (19.1%).
- Approximately 30 percent of the RSAT participants committed the least serious type of felony offense – felony level 5. Twenty-six percent committed a felony level 2 offense. Almost 22 percent were charged with a felony 3 offense and 16.7 percent were charged with a felony 4. Only 8.9 percent of the RSAT participants were charged with the most serious offense level – felony 1.

Table 2: Demographic Characteristics

Characteristic	MonDay (N = 226)		Mohican (N = 448)		Noble (N = 273)		All (N = 947)	
	N	%	N	%	N	%	N	%
Race:								
White	135	60.8	232	51.8	177	64.8	544	57.7
Nonwhite	87	39.2	216	48.2	96	35.2	399	42.3
Gender:								
Male	152	67.3	448	100.0	273	100.0	873	92.1
Female	74	32.7	0	0.0	0	0.0	74	7.9
Age at Intake:								
12 to 15	0	0.0	75	17.4	0	0.0	75	8.2
16 to 17	0	0.0	249	58.0	2	0.8	251	27.4
18 to 20	26	11.8	105	24.6	37	13.9	168	18.6
21 to 25	34	15.5	0	0.0	81	30.4	115	12.6
26 to 30	34	15.5	0	0.0	57	21.5	91	9.9
31 to 40	92	41.3	0	0.0	70	26.4	162	17.7
41 or higher	34	15.4	0	0.0	19	7.3	53	5.8
Marital Status:								
Married	39	17.6	NA		61	22.7	100	20.4
Single	183	82.4	NA		208	77.3	391	79.6
Highest Grade:								
7 th or less	14	6.8	30	6.7	7	2.8	51	5.6
8 th	19	9.2	161	35.9	14	5.6	194	21.4
9 th	18	8.7	146	32.6	21	8.3	185	20.4
10 th	39	18.9	86	19.2	48	19.2	173	19.1
11 th	45	21.8	16	3.6	45	18.0	106	11.7
12 th or higher	71	34.5	9	2.0	116	46.0	196	21.7
Employment:								
Unemployed	134	67.2	221	49.3	177	68.6	532	57.6
Employed	83	38.2	227	50.7	81	31.4	391	42.4

N's may not equal total due to missing information

Table 3: Current Offense and Criminal History

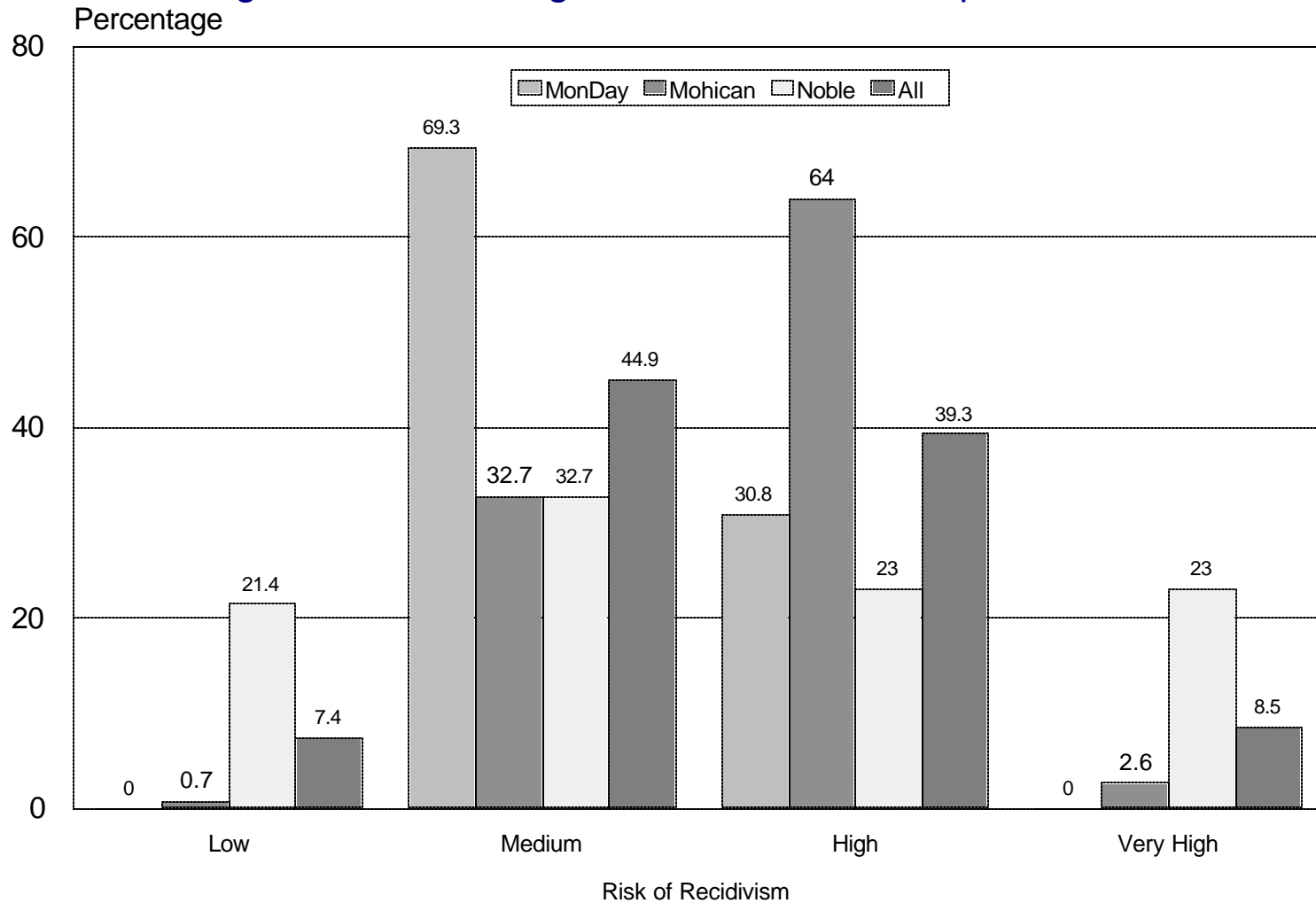
Characteristic	MonDay (N = 226)		Mohican (N = 448)		Noble (N = 273)		All (N = 947)	
	N	%	N	%	N	%	N	%
Crime Type:								
Personal	17	7.5	125	29.1	99	37.2	241	26.2
Property	96	52.9	227	52.9	117	44.0	440	47.8
Drug	99	43.8	40	9.3	37	13.9	176	19.1
Other	14	6.2	37	8.6	13	4.9	64	6.9
Offense Level:								
Felony 1	6	2.7	43	10.1	29	12.9	78	8.9
Felony 2	11	4.9	151	35.4	71	31.6	233	26.5
Felony 3	34	15.0	52	12.2	61	27.1	147	16.7
Felony 4	58	25.7	97	22.7	37	16.4	192	21.9
Felony 5	117	51.8	84	19.7	27	12.0	228	30.0

N's may not equal total due to missing information

- The RSAT programs are targeting the appropriate offenders with regards to risk of recidivism (Figure 1). The majority of RSAT offenders scored as either medium risk (44.9%) or high risk (39.3%) according to the individual assessment instruments that each site used to assess risk of recidivism²¹. Only 7.4 percent of RSAT participants were “low” risk.
- Figure 2 reports the overall *How I Think* score for the RSAT participants. The majority of RSAT offenders (72.9%) were classified as “clinical” whereas 17.5 percent was classified as “border-line clinical” and 7.9 percent was classified as “non-clinical.”
- On average all RSAT participants had greater needs in the following areas of the Client Self-Rating scales: anxiety, risk-taking, hostility, and depression (Table 4). The higher the score, the higher level of psychological or social functioning for the individual. In addition, the participants had less needs in the following areas: self-esteem, decision-making and self-efficacy.

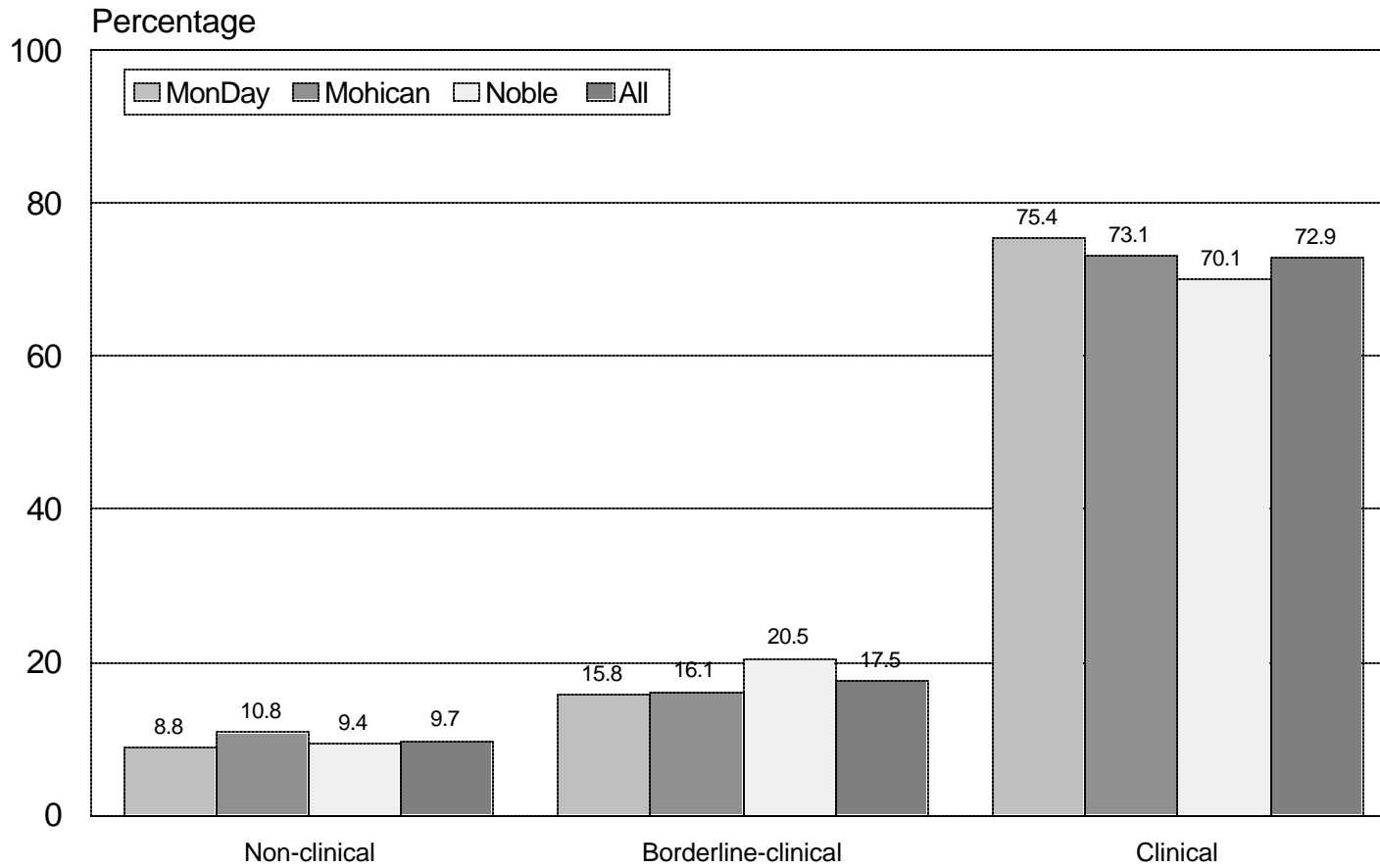
²¹ MonDay uses the Level of Service Inventory to assess risk of recidivism. Mohican uses the Youthful Level of Service Inventory to assess risk and Noble uses the violence scale of the Prison Inmate Inventory to assess risk.

Figure 1: Risk Categories for RSAT Participants*



*Sites use different risk assessment instruments. Percentages based on risk assessment categories used by different sites. Monday (LSI), Mohican (Y-LSI), Noble (PII)

Figure 2. Summary Score for *How I Think* for RSAT Participants



*Individuals scoring 4.25 or lower on the Anomalous Response Scale. Individuals were placed in the classifications based on which third of the scale their scores fell within. Higher scores indicate a problem in the summary score measured.

Table 4: Descriptive Statistics for the Client Self-Rating For All RSAT Participants

Scale:	MonDay (N = 226)		Mohican (N = 448)		Noble (N = 273)		All (N = 947)	
	N	\bar{x}	N	\bar{x}	N	\bar{x}	N	\bar{x}
Anxiety: (range 7-35)	201	21.84	401	17.10	240	19.22	842	19.39
Depression: (range 6-30)	199	17.51	406	12.88	246	15.98	851	15.46
Self-esteem: (range 6-30)	200	16.70	402	22.61	244	19.11	846	19.47
Decision-making: (range 9-45)	200	29.65	398	31.47	245	30.58	843	27.23
Risk-taking: (range 7-35)	197	22.54	404	21.23	246	21.91	847	21.89
Hostility: (range 8-40)	202	21.19	397	20.23	245	21.64	844	21.02
Self-efficacy: (range 7-35)	200	24.04	400	26.38	244	25.60	844	25.34
Desire for Help: (range 7-35)	118	12.96	405	23.52	140	27.06	663	21.18
Treatment Readiness: (range 8-40)	83	27.16	399	23.52	133	30.90	615	27.19

N's may not equal total due to missing information

Treatment Considerations

Outcome evaluations are enhanced when the researcher is able to determine what happened to the client while under supervision. This may include documenting whether a participant moved to different phases based on progress and the outcome of treatment. The purpose of this section is to identify the general services provided by MonDay's RSAT program and the rates of phase advancement. In addition, this section will address

behavior while in the RSAT program. In-program behavior, as measured by violations and drug testing, can have a significant impact on behavioral change. This section addresses the participation and behavior of the offenders in the RSAT programs.

What were the specific groups that individuals participated in while at the RSAT programs? What were the rates of phase advancement and individual counseling? How many individuals tested positive for drugs while at the programs? How many program violations did offenders experience while in the program?

MonDay Community Correctional Institution:

- The majority of offenders in the MonDay RSAT group (90%) received a cognitive class in which their antisocial attitudes were addressed. In addition, 57 percent received anger management, 64 percent received social skills, and 42 percent received educational or vocational classes. Ninety percent received relapse prevention.
- MonDay has five different phases in which the offender can advance through. Ninety-eight offenders completed the orientation and phase one.²² The average length of time spent in orientation was 25 days and 43 days in phase one. Ninety-seven offenders completed phase two and the average length of time was 33 days. Eighty-five offenders completed phase three in an average of 40 days. However, only 54 offenders completed phase four. The average amount of time spent in phase four was 38 days.
- There were 421 drug tests administered to 98 MonDay treatment group offenders. Sixteen tests (3.8%) were positive for drugs. The drugs that were detected were marijuana, cocaine, and opiates.
- Program violation data was only available for 56 offenders in the MonDay RSAT group. House violations are the least serious, followed by a major violation, and a cardinal violation is the most serious. The average number of house violations was 3.88 violations. The average number of major violations was 0.23 and the average number of cardinal violations was 0.25.
- Encounters are conducted to provide a forum for dealing with conflict between family members and to establish accountability. Sixty-one offenders were encountered at least once while at MonDay. Forty-four offenders were encountered twice and eleven offenders were encountered three times.

²² Data were only available for 98 participants. Information on the 90 participants in the RSAT process evaluation was not available.

Mohican Youth Center:

- Once placed into Mohican, youth receive the same services regardless of risk level or need level. Some specific groups included: orientation of the therapeutic community model, identifying thinking errors, personal recovery, chemical dependency, and relapse prevention. In addition, youth attend school throughout the day.
- Mohican has four different treatment phases for youth to advance through. The orientation phase is for eight sessions. Phase one and phase two lasts for seven weeks and phase three is eight weeks. The average amount of days spent in each phase varied. On average, there were 36 days spent in orientation, 59 days spent in phase one, 56 days spent in phase two, and 54 days spent in phase four. In addition, not all participants successfully completed phase three before being terminated from Mohican.
- The average amount of time 173 youth spent in individual counseling was 318 minutes (5.3 hours). There was a total of 34 different sessions.
- There were 269 different drug tests administered to 198 youth while at Mohican. There were no positive drug tests reported.
- Mohican incorporates three types of program violations. The house violation is the least serious followed by a major violation and then the cardinal violation is the most serious. The average number of house violations was 42 for 289 youth. The average number of cardinal violations was 1.87 and the average number of major violations was 7.03.

Noble Choices:

- Once placed in Noble Choices participants receive the following services and education groups: rational emotive therapy, commitment to change, manifesting excellence, drug and alcohol counseling, and relapse prevention.
- Noble Choices has three different phases for participants to advance through. The induction/orientation phase lasts for lasts for 30 days. Phase two focuses on primary intervention. Phase three continues to focus on primary intervention and completion of treatment goals, improving personal skills, and developing aftercare programming and support networks. Participants spent an average of 49.28 days in Phase I, 116 days in Phase II, and 84.78 days in Phase III. In addition, not all participants successfully completed all three phases prior to release back into the general prison population or the community.

- Rates of individual counseling were available for 114 program participants. The number of individual sessions ranged from one to seventeen with a majority of program participants receiving four or fewer counseling sessions. In total, RSAT participants received an average of 113.03 minutes of individual counseling across all sessions.
- Drug tests were administered to 173 individuals 802 times while at Noble Choices. All but three drug tests results were negative.
- Noble Choices incorporates three types of program violations. The house violation is the least serious followed by a major violation and a cardinal violation as the most serious. Data on program violations were available for 154 Noble participants. The average number of house violations was 13.18, cardinal violations were 0.64, and the average major violations were 0.13. On average, RSAT participants received 13.94 violations during their participation in treatment.

All RSAT Participants:

- On average, 271 RSAT offenders completed an orientation phase in an average of 30 days.²³ (Table 5). There were 453 offenders that completed phase 1. The average length of stay in phase 1 was 51 days. Approximately 349 offenders completed phase 2 in an average of 68 days. It took an average of 59 days for 244 offenders to complete phase 3.
- Information on program violations was available for 499 RSAT offenders. There was an average of 19 house violations (the least serious), 0.92 cardinal violations, and 2.46 major violations (the most serious). The average number of total violations were 27 violations per RSAT participant.
- Information on drug testing was available for MonDay and Mohican participants. There were 680 total drug tests on 296 offenders in these facilities. A clear majority of these tests was negative (97.6%). Sixteen tests were positive for drugs. All of these tests were from MonDay participants.
- There were a total of 67 individual counseling sessions for 355 offenders across all three sites. On average, each RSAT participant received a total of 248 minutes (4.13 hours) of individual counseling during his/her participation in RSAT.

²³ MonDay and Mohican have a phase called orientation. Noble's 1st phase is called phase 1; however, the participants are orientated to the TC during this phase.

Table 5: Programming Information for All RSAT Participants

Characteristic	MonDay (N = 226)		Mohican (N = 448)		Noble (N = 273)		All (N = 947)	
	N	\bar{x}	N	\bar{x}	N	\bar{x}	N	\bar{x}
Phases:								
Orientation	98	25.21	173	36.08	NA		271	30.65
Phase 1	98	45.53	167	59.78	188	49.28	453	51.53
Phase 2	97	33.80	154	56.11	97	116.00	349	68.64
Phase 3	85	40.46	136	54.23	23	84.78	244	59.82
Phase 4	54	38.93		NA		NA	54	38.93
Program Violations:								
House	56	3.88	289	42.22	154	13.18	499	19.76
Cardinal	56	0.25	289	1.87	154	0.64	499	0.92
Major	56	0.23	289	7.03	154	0.13	499	2.46
Unknown	11	57.09	20	6.90	0	0.00	31	32.00
Total	56	15.57	289	51.60	154	13.94	499	27.04
Drug Tests:								
Negative	395	4.03	269	1.36	NA		664	2.70
Positive	16	0.16	0	0.00	NA		16	0.16
		98 Offenders		198 Offenders		NA		296 Offenders
Individual								
Counseling:	68	314.15	173	318.46	114	113.03	355	248.55
		16 Sessions		34 Sessions		17 Sessions		67 Sessions

N's may not equal total due to missing information

Intermediate Outcomes

Intermediate objectives are the direct effects that are attained through receiving the treatment such as reducing the offender's levels of psychological and social functioning, and cognitive distortions. This section will present the changes in the offenders' levels of cognitive distortions and psychological and social functioning. The specific research questions were:

What are the changes in the individuals' levels of psychological and social functioning? What are the changes in the individuals' cognitive distortions? What are the completion rates among RSAT participants?

MonDay Community Correctional Institution:

- Paired sample t-tests revealed a significant difference between the time 1 and time 2 score for the following Client Self-Rating scales: anxiety, depression, risk-taking, hostility, self-esteem, decision-making, and self-efficacy. Participation in MonDay's RSAT program significantly reduced the offenders' levels of anxiety, depression, risk-taking, and hostility while increasing self-esteem, decision-making, and self-efficacy.
- Participation in MonDay's RSAT program significantly reduced the offenders' cognitive distortions as measured by the *How I Think* Questionnaire. For example, the cognitive distortions of self-centeredness, blaming others, minimizing, and assuming the worst were reduced. The behavioral referents of oppositional/defiance, physical aggression, lying, and stealing were reduced. In addition, the summary scores for overt and covert behaviors along with the overall How I Think scale was significantly reduced by participation in the RSAT program.
- All offenders in all groups were released at the time of termination of the project. In addition, the majority of offenders in the MonDay RSAT group (87.6%) and the MonDay pre-TC group (87.3%) were successfully released. Twenty-nine percent of the offenders in the MCCOP group were successfully released.
- The average length of time spent in treatment was 169 days for the MonDay RSAT group and 126 days for the MonDay pre-TC group. (Length of time spent in treatment was not available for the MCCOP group.)
- A logistic regression model was calculated to determine which factors predict successful completion of treatment for MonDay's therapeutic community RSAT program. There were no significant predictors of successful program completion, which is not surprising given that completion of MonDay is based on time. MonDay's RSAT program can only provide services to offenders for 180 days.

Mohican Youth Center:

- Paired sample t-tests revealed a significant difference between the time 1 and time 2 score for the following Client Self-Rating scales: depression, self-esteem, decision-making, and hostility. Participation in Mohican's therapeutic community RSAT program resulted in a significant increase in youths' levels of self-esteem, decision-making ability and hostility and a reduction in their depression. In addition, regression analyses revealed that the longer the youth spent in treatment, the more likely he was to be hostile.

- Paired sample t-tests revealed no significant differences between the time 1 and time 2 measures of cognitive distortions when examining cases that may be considered suspect.²⁴ However, when looking at the cases that were not considered suspect, participation in treatment resulted in a significant decrease in the youths' self-centeredness, lying, covert and overt behaviors, and the overall *How I Think* scale.
- The majority of youth in all groups were discharged at the time of termination. In addition, the majority of youth in the Mohican treatment group (82.1%) and the Mohican pre-TC group (100%) were successfully discharged. Forty-seven percent of the DYS group was successfully discharged. However, there were some significant differences in discharge types. The DYS group was more likely to be unsuccessfully discharged.
- The average length of time spent in treatment was 188 days for the Mohican treatment group and 181 days for the Mohican pre-TC group. The average length of time spent in an institution was 231 days for the DYS group.
- A logistic regression model was calculated to determine which factors predict successful completion of treatment for Mohican's therapeutic community RSAT program. There were no significant predictors of successful completion, which is not surprising given that completion is largely based on the sentence length of the youth and not on the acquisition of prosocial skills.

Noble Choices:

- There was a significant difference between time 1 and time 2 scores on for the following Client Self-Rating scales: anxiety, depression, risk-taking, hostility, desire for help, and readiness for treatment. Participation in Noble's RSAT program reduced the offenders' level of anxiety, depression, risk-taking, hostility, desire for help, and treatment readiness while increasing the levels of self-esteem and decision-making. Regression analysis revealed that time in program did not significantly impact any of the scales.
- With regard to offenders' cognitive distortions, there was a significant difference in the minimizing/mislabeling scale from time 1 to time 2 when including cases that may be suspect.²⁵ Participation in treatment reduced the offenders' minimizing cognition. There were no significant differences between time 1 and time 2 when suspect cases were removed.

²⁴ A case is considered suspect when the anomalous response scale (scale used to determine if the youth was lying or randomly marking answers) was 4.0 to 4.25.

²⁵ A case is considered suspect when the anomalous response scale (scale used to determine if the individual was lying or randomly marking answers) was 4.0 to 4.25.

- Over half of the Noble Choices program participants (57.5%) were placed in the general prison population upon completion from the program. In addition, 41.1 percent of the individuals were successfully discharged (met goals and/or time in program), 30.2 percent were unsuccessfully discharged, 14.9 percent withdrew from the program voluntarily, and 13.9 percent withdrew for other reasons.
- The average length of time spent in treatment was 218.62 days for the Noble treatment group. The Noble treatment group participants spent an average of 1,127.26 days in prison and comparison group members spent an average of 361.34 days in prison. This difference is statistically significant.
- A logistic regression model was calculated to determine which factors predict successful completion of treatment in the Noble Choices therapeutic community RSAT program. There were no significant predictors of successful completion.

All RSAT Participants:

- Table 6 reports the termination information for 780 RSAT participants.²⁶ Approximately 73 percent of RSAT participants had successfully completed the program whereas 11.4 percent were unsuccessfully discharged. Fifteen percent were classified as “other” which could be because of early release, judicial release, voluntary withdrawal, or discharged for medical reasons.
- The average length of stay in RSAT treatment was 192 days per participant.

Table 6: Termination Information for All RSAT Participants

Characteristic	MonDay (N = 226)		Mohican (N = 367)		Noble (N = 273)		All (N = 780)	
	N	%	N	%	N	%	N	%
Case Status:								
Successful	198	87.6	289	82.1	83	41.1	570	73.1
Unsuccessful	16	7.1	12	3.4	61	30.2	89	11.4
Other	12	5.3	51	14.5	58	28.7	121	15.5
Length of Stay:	$\bar{x} = 169.21$		$\bar{x} = 188.24$		$\bar{x} = 218.62$		$\bar{x} = 192.03$	

N's may not equal total due to missing information

²⁶ Some participants were still active at the time of data collection. Eighty-one youth in Mohican were still active and 71 offenders in Noble were either still active or the termination information was missing.

Performance After Termination

Information pertaining to new arrests and new periods of incarceration were obtained for RSAT participants to determine the effectiveness of Ohio's RSAT programs in reducing recidivism. The specific research questions addressed in this section are:

What are the rates of new incarcerations after termination? What factors are associated with post-release performance?

MonDay Community Correctional Institution:

- Approximately 35.8 percent of the MonDay RSAT group was arrested within one year after termination, whereas 32.4 percent of the MonDay pre-TC was arrested, and 26.3 percent of the MCCOP group was arrested within the same time period. Only 7.1 percent of the RSAT group was arrested one to two years after release whereas 12.4 percent of the MonDay pre-TC group and 13.5 percent of the MCCOP group was arrested during this time period. There were no offenders in the MonDay RSAT group arrested during two to 3.8 years after termination but 10.4 percent and 9.0 percent of the MCCOP group was arrested two to 3.8 years after release.
- Twenty percent of the MonDay RSAT group was incarcerated within one year after release. Twenty-five percent of the MonDay pre-TC was incarcerated and 23.7 percent of the MCCOP group was incarcerated during the same time period. Only 6.6 percent of the RSAT group was incarcerated one to two years after release from MonDay whereas 13 percent of the pre-TC and 10.7 percent of the MCCOP group was incarcerated during this time period. There were no offenders that were incarcerated during the time period of two to 3.8 years.
- Logistic regression models were calculated to determine what factors predict arrest. Age and number of prior arrests were significant predictors in all models predicting arrest. Younger offenders and offenders with more prior arrests in all groups were more likely to be arrested. Race was a significant predictor in two models – all groups predicting arrest and MonDay RSAT and pre-TC groups predicting arrest. Nonwhites were more likely than whites to be arrested. The group variable was not a significant predictor in any model predicting arrest. However, the coefficient was negative in all models. Thus, participation in MonDay's RSAT program reduced the probability of arrest when compared to the other treatment modalities. However, the reduction was not statistically significant.
- Logistic regression models were calculated to determine what factors predict incarceration. When examining all groups and the MonDay RSAT and the pre-TC

groups, nonwhites were more likely to be incarcerated when compared to whites. Gender was a significant predictor in two models. Males were more likely to be incarcerated after termination from the programs. Age was a significant predictor in one model – MonDay RSAT and pre-TC groups predicting incarceration. Younger offenders were more likely to be incarcerated than older offenders. Number of prior convictions was a significant predictor in the model MonDay RSAT and MCCOP groups predicting incarceration. Offenders with more prior convictions were more likely to be incarcerated. Participants in the MonDay RSAT group was less likely to be incarcerated in all models, but the reduction in the probability of incarceration was not statistically significant.

Mohican Youth Center:

- The majority of offenders in all three groups did not obtain a new arrest after termination - treatment (73.6%); pre-TC (62.9%); DYS (57.3%). However, the Mohican treatment group was rearrested significantly faster than the DYS group.
- Approximately 17 percent of the Mohican treatment group was incarcerated after termination whereas 37.5 percent of the Mohican pre-TC and 37 percent of the DYS group obtained a new period of incarceration. These differences were statistically significant.
- When all youth were included in the model predicting incarceration, younger youth, youth who had completed a higher grade level, youth with a less serious offense, youth with a more serious substance abuse problem, and youth in the comparison groups were more likely to be incarcerated. After controlling for differences between the groups, the probability of incarceration for the treatment group was 16 percent versus 34 percent for the comparison groups.
- When only the Mohican treatment group and the Mohican pre-TC group were included in the model, younger youth and youth in the Mohican pre-TC group were more likely to be incarcerated. Accordingly, there was a 19-point reduction in the probability of incarceration when youth participated in the Mohican treatment group.
- Finally, when youth in the Mohican treatment group and DYS group are included in the model, younger youth, youth with a less serious offense, youth with a more serious substance abuse problem, and youth in the comparison group were more likely to be incarcerated. The probability of incarceration for the Mohican treatment group was 18 percent versus 33 percent for the DYS group.

Noble Choices:

- The outcome variable (arrest) were examined by length of time “at risk” in the community. Of those who had been “at risk” for a period of 6 months to a year,

thirteen percent of the treatment group and 66.7 percent of the comparison group had been rearrested. When examining the time period of one to two years “at risk” in the community, 35 percent of the treatment group and 50 percent of the comparison group were rearrested. Even though the comparison group was rearrested at lower percentages during every time period, there were no significant differences between the groups on the percentages of rearrests.

- The percentage of offenders being re-incarcerated was lower for the treatment group than for the comparison group. For example, of those who had been “at risk” in the community for a period of 6 months to a year, only 6.5 percent of the treatment group and 33.3 percent of the comparison group had been incarcerated. When examining the time period of one to two years “at risk”, 20 percent of the treatment group and 27.8 percent of the comparison group had been incarcerated. Again, the comparison group was less likely to be incarcerated than the comparison group for all time periods; however, these differences were not statistically significant.
- Logistic regression models were computed to determine the significant predictors of arrest and incarceration. Nonwhites, younger offenders, and offenders with more prior arrests were more likely to be arrested after termination. Furthermore, offenders who were not married and had been in the community for a longer period of time were more likely to be incarcerated. The group variable in either model was not statistically significant. Thus, participation in Noble’s RSAT program did not statistically reduce the probability of arrest and incarceration.

All RSAT Participants:

- As shown in Table 7, the majority of RSAT participants did not have a new arrest after termination from the program (66.9%) whereas the majority of the comparison group (53.3%) were arrested during the follow-up time period. Only 33 percent of RSAT participants obtained a new arrest during the follow-up period.²⁷
- Information concerning incarceration was available for 779 RSAT participants (82.3%) and 1385 participants in the comparison groups (97.0%). Approximately 18 percent of RSAT participants were incarcerated after termination from the programs whereas 37 percent of the comparison group was incarcerated during the follow-up time period.²⁸

²⁷ Arrest information was not available for Mohican participants or Mohican comparison groups. The total percentages are based on MonDay and Noble participants and comparison groups.

²⁸ The follow-up time periods differ for each program. The follow-up for MonDay was up to 3.8 years after termination. The follow-up time period for Mohican was up to 21 months. The follow-up time period for Noble was 3.09 years.

Table 7: Outcome Information for All RSAT Participants and Comparison Groups

Characteristic	RSAT All (N = 947)		Comparison All (N = 1428)	
	N	%	N	%
Arrested:				
Yes	148	33.1	337	53.3
No	299	66.9	295	46.7
Incarcerated:				
Yes	146	18.7	513	37.0
No	633	81.3	872	63.0

N's may not equal total due to missing information

- Table 8 reports the percentage reduction in recidivism due to participation in RSAT. For MonDay RSAT participants, participation in the RSAT program resulted in a 1 percent decrease in the probability of arrest when compared to participants in the pre-TC group and the MCCOP group. Even though the decrease was not statistically significant, participation in Noble's RSAT group resulted in a 14 percent decrease in the probability of arrest.
- Participation in MonDay's RSAT program resulted in a decrease in the probability of incarceration ranging from 6 percent to 7 percent. However, this decrease was not statistically significant. Participation in Mohican resulted in a statistically significant 15 to 19 percent decrease in the probability of incarceration within 21 months for all three models – treatment and all comparison groups combined, treatment and the pre-TC group, and treatment and the DYS group. There was a 13 percent decrease in the probability of incarceration for Noble RSAT participants, however, the decrease was not statistically significant.

DISCUSSION

General Conclusions

The RSAT outcome evaluations are promising. The findings for Mohican Youth Center consistently reveal that participation in Mohican's RSAT therapeutic community resulted in a significant decrease in the probability of incarceration after termination. In addition, the significant effect was found when controlling for other factors such as race, age, grade level, and risk level. Accordingly, participation in Mohican's therapeutic

Table 8: Reduction in Recidivism Due to Participation in RSAT

	MonDay All Groups	MonDay RSAT & Pre-TC	MonDay RSAT & MCCOP	Mohican All Groups	Mohican TX & Pre-TC	Mohican TX & DYS	Noble Both Groups
Arrested After Termination:	1%	0%	0%	Not reported	Not reported	Not reported	14%
Incarcerated After Termination:	7%	6%	6%	18%*	19%*	15% *	13%

* Statistically significant decrease

community RSAT program significantly reduced the probability of incarceration for high-risk youth.

Participation in MonDay's therapeutic community RSAT program resulted in a decrease in the probability of arrest and incarceration when compared to offenders in the pre-TC group (traditional residential program) and offenders in the MCCOP group (outpatient drug treatment). However, the decrease was not statistically significant. It is important to note that for the MonDay evaluation, the RSAT group was compared to other forms of substance abuse treatment (residential and outpatient).

Participation in Noble's RSAT program also resulted in a decrease in the probability of incarceration when compared to offenders who did not receive treatment. However, this decrease was not statistically significant.

Limitations of the Study

We must offer a word of caution when interpreting these results because little was known about the types of services the offenders once they left the institutions. Research has shown that aftercare is an integral part of treating offenders. Thus, the offenders that did not recidivate may have taken part in other services upon termination from the RSAT programs or the other programs.

The current study only tracked the participants for a limited time, furthermore, many offenders had only recently completed the program. The amount of time "at risk" varied tremendously and may not be long enough to adequately assess the effects of Ohio's RSAT programs.

Another limitation of the study was that random assignment was not possible. Random assignment would have allowed to the groups to be very similar with regard to

characteristics that may influence outcome and would have strengthened any findings of a treatment effect. This is a common problem in correctional research; nonetheless, the study had to use statistical control rather than design control.

In addition, the time period for the comparison groups differed from the treatment groups. Thus, the profiles or characteristics of drug offenders could have changed. This change could have resulted in the differences found between the groups.

Lastly, there were large amounts of missing data²⁹ for the treatment groups and the comparison groups. For example, LSI data were not available for the MonDay comparison groups. We were not able to examine the type of services participated in by the Mohican pre-TC or the DYS groups because the data was not available. Thus, we were not able to control for these differences when predicting the outcome.

Recommendations

The following recommendations are offered based on the findings of the MonDay outcome evaluation:

1. MonDay should continue the therapeutic community approach. The results report that participation in MonDay's RSAT program slightly reduced the probability of being arrested or incarcerated when compared to the participants in the traditional residential treatment (pre-TC) and the outpatient treatment (MCCOP).
2. MonDay should develop completion criteria that are not time-based. Completion of treatment should be based on acquisition of pro-social attitudes and behaviors and not length of time. The results revealed that cognitive distortions were significantly correlated with outcome. Thus, completion should be centered on eliminating the cognitive distortions.
3. Research has shown that aftercare is an important component of therapeutic communities (Knight, Simpson, and Hiller, 1999; Wexler, Melnick, Lowe, and Peters, 1999). Accordingly, MonDay should strengthen the aftercare component. It is important that offenders released from MonDay receive high quality aftercare services that address their needs.

²⁹ In some instances, the data was simply not available to collect.

4. MonDay should continue to collect data that would enable the outcome study to continue. The current study was limited in the amount of follow-up time to track the offender. However, if MonDay continues the study, research can further examine the long-term effects of the therapeutic community RSAT programs.

Based on the findings, and in order to further increase the effectiveness of Mohican's therapeutic community RSAT program, the following recommendations are offered for Mohican:

1. DYS should continue and probably expand the therapeutic community approach. The significant findings for treatment indicated that Mohican's TC treatment substantially reduced the probability of being incarcerated. In addition, it appears that the treatment modality is appropriate for the high-risk juvenile population.
2. Aftercare is an important aspect to effective interventions. DYS should strengthen the aftercare services it offers youth released from Mohican.
3. Mohican should continue to collect data that would enable the outcome study to continue. The current study was limited in the amount of follow-up time to track the youth. However, if Mohican continues the study, research can further examine the long-term effects of the therapeutic community RSAT program.

The following recommendations are offered to Noble Choices:

1. Noble Choices should screen out offenders that are not appropriate for the program. Likewise, criteria for screening individuals for participation in the program should be reviewed and revised to ensure that appropriate placement decisions are made. It is problematic that the majority of offenders who completed the Noble Choices program return to the general population. Placing an offender back into the population could result in an erosion of the treatment effect since antisocial attitudes and behaviors are more likely to be reinforced than positive ones.
2. Noble needs to improve treatment as outlined in the Correctional Program Assessment Inventory. First, the program needs to develop a behavioral model that includes more positive reinforces and elimination of shaming and humiliation. There is little evidence that these punishers are effective in changing offender behavior. Second, the program needs to more consistently train offenders to monitor problem situations and rehearse alternative, prosocial responses. This process should be reinforced throughout the entire curriculum/program. Third, staff should receive formal training on the theory and practice of interventions employed by the program. In addition, staff morale was extremely low, which can

have a detrimental effect on program integrity. Steps need to be taken to increase staff input into the program. Furthermore, a change in administration resulted in the program not having the level of support it was initially given. Support for treatment efforts from the administration is vital for a program housed in a prison setting, and a lack of strong support can have a detrimental effect on program integrity.

3. Noble Choices should continue to evaluate this program with a focus on better data collection and follow-up for program participants. Longer follow-up periods will allow us to determine the long-term effects of the RSAT program. In addition, it will be interesting to see how offenders who go from the RSAT program to general population to the community perform compared to those who go from RSAT to the community. Data were not available to address this issue.

REFERENCES

ADE Incorporated. (1997). Juvenile Automated Substance Abuse Evaluation Reference Guide. Clarkston, MI: Author.

Andrew, D. A., and Bonta, J. (1995). Level of Service Inventory-Revised. Tonawanda, NY: Multi-Health Systems.

Antonwicz, D.H. and Ross, R.R. (1994). Essential components of successful rehabilitation programs for offenders." International Journal of Offender Therapy and Comparative Criminology, 38(2): 97-104.

Barriga, A. Q., Gibbs, J. C., Potter, G., and Liao, A. K. (1999) How I Think Questionnaire.

Behavior Data Systems, Ltd. (1998). Ohio Prison Inmate Inventory. Phoenix, AZ: Author.

Brook, R. C., and Whitehead, P. C. (1980). "Treatment of drug abuse." In M. Tonry and J. Q. Wilson (Eds.), Drugs and Crime. Chicago: The University of Chicago Press.

DeLeon, G. (1990a). "Treatment strategies." In J. Inciardi (Ed.), Handbook of Drug Control in the United States (pp. 115-138). Westport: Greenwood Press.

DeLeon, G (1990b). "Effectiveness of therapeutic communities." In J. J. Platt, C. D. Kaplin, and P. J. McKim (Eds.), The Effectiveness of Drug Abuse Treatment: Dutch and American Perspectives (pp. 113-126). Malabar, FL: Robert E. Krieger Publishing.

DeLeon, G. and Ziegenfuss, J. T. (1986). Therapeutic Communities for Addictions: Readings in Theory, Research and Practice. Springfield, IL: Charles C. Thomas Publisher.

DeLeon, G. and Rosenthal, M. (1979). "Therapeutic communities." In R. L. Dupont, A. Goldstein, and J. O'Donnell (Eds.), Handbook on Drug Abuse (pp. 39-48). Washington, D.C.: U.S. Government Printing Office.

Faupel, C. E. (1981). "Drug treatment and criminality: Methodological and theoretical considerations." In J. A. Inciardi (Ed.), The Drugs Crime Connection (pp. 183-206). Beverly Hills: Sage.

Gendreau, P. and Andrews, D. A. (1994). Correctional Program Assessment Inventory (4th ed.). St. John, New Brunswick: University of New Brunswick.

Holsinger, A.M. (1999). Opening the Black Box : Assessing the Relationship between Program Integrity and Recidivism. (Dissertation). Ann Arbor, MI: UMI.

Inciardi, J. A., Martin, S. S., Butzin, C. A., Hooper, R. M., and Harrison, L. D. (1997). "An effective model of prison-based treatment for drug-involved offenders." Journal of Drug Issues, 27(2): 261-278.

Lipton, D. S. (1998). "Therapeutic communities: History, effectiveness and prospects." Corrections Today (October): 106-109.

Knight, K., Simpson, D. D., and Hiller, M. L. (1999). "Three-year reincarceration outcomes for in-prison therapeutic community treatment in Texas." The Prison Journal, 79(3): 337-351.

National Center on Addiction and Substance Abuse. (1998). Behind Bars: Substance Abuse and America's Prison Population. New York, NY: Columbia University.

National Institute of Justice. (1998). 1997 Drug Use Forecasting Annual Report on Adult and Juvenile Arrestees. Washington, DC: Author, U.S. Department of Justice.

Sandhu, T. S. (1981). "The effectiveness of community-based correctional programs." in S. Sandhu (Ed.), Community Corrections: New Horizons (pp. 296-351). Springfield: BannerStone House.

Simpson, D. D. (1984). "National treatment system based on the drug abuse reporting program (DARP) follow-up research." In F. Tims and J. Ludford (Eds.), Drug Abuse Treatment Evaluation: Strategies, Progress, and Prospects (pp. 29-41). National Institute on Drug Abuse Research Monograph No. 51. Rockville, MD: U.S. Department of Health and Human Services, National Institute on Drug Abuse.

Simpson, D. D. and Knight, K. (1998). TCU Data Collection Forms for Correctional Residential Treatment. Fort Worth: Texas Christian University, Institute of Behavioral Research [On-line]. Available: www.ibr.tcu.edu.

Snyder, H. N. (1999). "Juvenile Arrests 1998." OJJDP Juvenile Justice Bulletin. Washington, DC: OJJDP, U.S. Department of Justice.

Van Voorhis, P. and G. Hurst. (2000). "Treating substance abuse in offender populations." In P. Van Voorhis, M. Braswell, and D. Lester (Eds.), Correctional Counseling and Rehabilitation (pp. 265-288). Cincinnati, OH: Anderson Publishing Co.

Wanberg, K. (1994). Adult Substance Use Survey.

Wexler, H. K. (1995). "The success of therapeutic communities for substance abusers in American prisons." Journal of Psychoactive Drugs, 27(1): 57-66.

Wexler, H. K., Melnick, G., Lowe, L., and Peters, J. (1999). "Three-year reincarceration outcomes for Amity in-prison therapeutic community and aftercare in California." The Prison Journal, 79(3): 321-336.

Yochelson, S. and Samenow, S. E. (1976). The Criminal Personality: A Profile for Change. New York, NY: Jason Aronson.

APPENDIX A

DATA COLLECTION INSTRUMENTS

**OHIO'S RESIDENTIAL SUBSTANCE ABUSE TREATMENT PROGRAMS
Standardized Intake Form**

1) _____ Name of individual completing form

2) _____ Program code 2 = Mohican Youth Center
 3 = MonDay Community Correctional Institution
 4 = Noble Correctional Institute

IDENTIFYING INFORMATION

3) _____ Case #

4) _____ Name
 Last First Middle Initial

5) _____ SSN

6) ____ / ____ / ____ Date of birth

OFFENDER CHARACTERISTICS

7) _____ Race: 1=White 2=Black 3=Hispanic 4=Native American 5=Asian 6=Other

8) _____ Sex: 1=Male 2=Female

9) _____ Marital status: 1=Married 2=Not married

10) _____ Number of dependents (under 18 years of age)

11) _____ Highest grade completed: 1-12 = Grades 1-12; 13 = Some college; 14 = Bachelors or higher
 _____ If completed less than 12 grades, did the offender earn a GED? 1=Yes; 2=No

12) _____ Employment status prior to arrest
 1=Employed full-time (35 hours or more/week) 2=Employed part-time (less than 35hours/week)
 3=Unemployed

CURRENT OFFENSE

13) _____ Most serious charge (enter name of charge - e.g., CCW, Burglary)

14) _____ Level of conviction offense:
1=F1 2=F2 3=F3 4=F4 5=F5 6=M1 7=M2 8=M3 9=M4

15) ____/____/____ Date screened for RSAT

16) ____/____/____ Date placed in RSAT program

CRIMINAL HISTORY

17) ____/____/____ Date of first arrest

_____ If exact date is unknown, please indicate age of first arrest

18) Number of prior arrests (adult and juvenile) _____ Felony _____ Misdemeanor

19) Number of prior convictions (adult and juvenile) _____ Felony _____ Misdemeanor

20) _____ Has the offender ever been arrested on a drug charge? 1=Yes 2=No

21) _____ Number of prior sentences to a secure facility

22) _____ Number of prior sentences to community supervision

23) _____ Number of unsuccessful terminations from community supervision

SUBSTANCE USE HISTORY

24) _____ First Drug of Choice

- | | |
|------------------------------|---------------------------|
| 1=heroin | 7=LSD |
| 2=non-crack cocaine | 8=PCP |
| 3=crack | 9=inhalants |
| 4=amphetamines | 10=over the counter drugs |
| 5=barbiturates/tranquilizers | 11=alcohol |
| 6=marijuana | 12=Other (specify: _____) |

25) _____ Second Drug of Choice (use codes for question #24)

26) _____ Age of first alcohol use

27) _____ Age of first drug use

28) _____ Do any immediate family members have a substance abuse problem? 1=Yes 2=No

29) _____ Has the offender received previous drug/alcohol treatment? 1=Yes 2=No

If yes, indicate the number of times the offender has experienced each of the following types of treatment:

- _____ Detoxification
- _____ Methadone maintenance
- _____ Outpatient
- _____ Short-term inpatient (30 days or less)
- _____ Residential

30) _____ Has the offender been dual diagnosed with mental illness and substance abuse?
1=Yes 2=No

Please attach the following completed instruments OR a summary of results/scores:

Noble - PII

Monday - LSI and ASUS

OHIO'S RESIDENTIAL SUBSTANCE ABUSE TREATMENT PROGRAMS

Client Self-rating Form

(Adapted from TCU DCJTC Client Evaluation of Self and Treatment)

Today's date: ___/___/___

To be completed by staff: ___ intake ___ discharge

Full name: _____

Birthdate: ___/___/___

Directions: Each of the statements below describes a way that you might or might not feel about yourself. There are no right or wrong answers, we just want to know what you think. Please use the following scale to tell us whether you agree or disagree with each of the statements listed below. Just circle the one number closest to your opinion (to the right of each statement).

1	2	3	4	5
Strongly Disagree	Disagree	Undecided/ Unsure	Agree	Strongly Agree

Circle One

- | | 1 | 2 | 3 | 4 | 5 |
|---|---|---|---|---|---|
| 1. You like to take chances..... | 1 | 2 | 3 | 4 | 5 |
| 2. You feel sad or depressed..... | 1 | 2 | 3 | 4 | 5 |
| 3. You need help in dealing with your drug/alcohol use..... | 1 | 2 | 3 | 4 | 5 |
| 4. Sometimes you feel that you are being pushed around in your life..... | 1 | 2 | 3 | 4 | 5 |
| 5. You consider how your actions will affect others..... | 1 | 2 | 3 | 4 | 5 |
| 6. You have much to be proud of..... | 1 | 2 | 3 | 4 | 5 |
| 7. You want to be in a drug/alcohol treatment program..... | 1 | 2 | 3 | 4 | 5 |
| 8. In general, you are satisfied with yourself..... | 1 | 2 | 3 | 4 | 5 |
| 9. You like the "fast" life..... | 1 | 2 | 3 | 4 | 5 |
| 10. You feel mistreated by other people..... | 1 | 2 | 3 | 4 | 5 |
| 11. It is urgent that you find help immediately for your drug/ alcohol use..... | 1 | 2 | 3 | 4 | 5 |
| 12. You have thoughts of committing suicide..... | 1 | 2 | 3 | 4 | 5 |
| 13. You have trouble sitting still for long..... | 1 | 2 | 3 | 4 | 5 |
| 14. You plan ahead..... | 1 | 2 | 3 | 4 | 5 |

1	2	3	4	5
Strongly Disagree	Disagree	Undecided/ Unsure	Agree	Strongly Agree

Circle One

15. This treatment program seems too demanding for you.....	1	2	3	4	5
16. You like others to feel afraid of you.....	1	2	3	4	5
17. You feel lonely.....	1	2	3	4	5
18. You like friends who are wild.....	1	2	3	4	5
19. Your life has gone out of control.....	1	2	3	4	5
20. You like to do things that are strange or exciting.....	1	2	3	4	5
21. You have too many outside responsibilities now to be in this treatment program.....	1	2	3	4	5
22. You feel like a failure.....	1	2	3	4	5
23. You have trouble sleeping.....	1	2	3	4	5
24. You feel interested in life.....	1	2	3	4	5
25. You sometimes want to fight or hurt others.....	1	2	3	4	5
26. You are tired of the problems caused by drugs/alcohol.....	1	2	3	4	5
27. You think about the possible results of your actions.....	1	2	3	4	5
28. You stay away from anything dangerous.....	1	2	3	4	5
29. You feel you are basically no good.....	1	2	3	4	5
30. This treatment may be your last chance to solve your drug/ alcohol problems.....	1	2	3	4	5
31. You have a hot temper.....	1	2	3	4	5
32. You have trouble making decisions.....	1	2	3	4	5

1	2	3	4	5
Strongly Disagree	Disagree	Undecided/ Unsure	Agree	Strongly Agree

Circle One

- | | | | | | |
|--|---|---|---|---|---|
| 33. You think of several different ways to solve a problem..... | 1 | 2 | 3 | 4 | 5 |
| 34. You feel nervous..... | 1 | 2 | 3 | 4 | 5 |
| 35. There is really no way you can solve some of the problems
you have..... | 1 | 2 | 3 | 4 | 5 |
| 36. You analyze problems by looking at all the choices..... | 1 | 2 | 3 | 4 | 5 |
| 37. Your temper gets you into fights or other trouble..... | 1 | 2 | 3 | 4 | 5 |
| 38. You will give up your friends and hangouts to solve your
drug/alcohol problems..... | 1 | 2 | 3 | 4 | 5 |
| 39. You make decisions without thinking about consequences..... | 1 | 2 | 3 | 4 | 5 |
| 40. You have trouble concentrating or remembering things..... | 1 | 2 | 3 | 4 | 5 |
| 41. There is little you can do to change many of the important
things in your life..... | 1 | 2 | 3 | 4 | 5 |
| 42. This type of treatment program will <u>not</u> be very helpful to you.. | 1 | 2 | 3 | 4 | 5 |
| 43. You feel extra tired or run down..... | 1 | 2 | 3 | 4 | 5 |
| 44. You make good decisions..... | 1 | 2 | 3 | 4 | 5 |
| 45. You feel afraid of certain things, like crowds or going out alone. | 1 | 2 | 3 | 4 | 5 |
| 46. You want to get your life straightened out..... | 1 | 2 | 3 | 4 | 5 |
| 47. You only do things that feel safe..... | 1 | 2 | 3 | 4 | 5 |
| 48. You get mad at other people easily..... | 1 | 2 | 3 | 4 | 5 |
| 49. You wish you had more respect for yourself..... | 1 | 2 | 3 | 4 | 5 |
| 50. You have little control over the things that happen to you..... | 1 | 2 | 3 | 4 | 5 |

1	2	3	4	5
Strongly Disagree	Disagree	Undecided/ Unsure	Agree	Strongly Agree

Circle One

- | | | | | | |
|---|---|---|---|---|---|
| 51. You can quit using drugs/alcohol with without any help..... | 1 | 2 | 3 | 4 | 5 |
| 52. You worry or brood a lot..... | 1 | 2 | 3 | 4 | 5 |
| 53. You are in this treatment program because someone else made you come..... | 1 | 2 | 3 | 4 | 5 |
| 54. You often feel helpless in dealing with the problems of life..... | 1 | 2 | 3 | 4 | 5 |
| 55. You have carried weapons, like knives or guns..... | 1 | 2 | 3 | 4 | 5 |
| 56. You feel tense or keyed-up..... | 1 | 2 | 3 | 4 | 5 |
| 57. You plan to stay in this treatment program for awhile..... | 1 | 2 | 3 | 4 | 5 |
| 58. You are always very careful..... | 1 | 2 | 3 | 4 | 5 |
| 59. You think about what causes your current problems..... | 1 | 2 | 3 | 4 | 5 |
| 60. You can do just about anything you really set your mind to do.. | 1 | 2 | 3 | 4 | 5 |
| 61. You feel a lot of anger inside you..... | 1 | 2 | 3 | 4 | 5 |
| 62. You feel tightness or tension in your muscles..... | 1 | 2 | 3 | 4 | 5 |
| 63. What happens to you in the future mostly depends on you..... | 1 | 2 | 3 | 4 | 5 |
| 64. This treatment program can really help you..... | 1 | 2 | 3 | 4 | 5 |
| 65. You feel you are unimportant to others..... | 1 | 2 | 3 | 4 | 5 |

The "HOW I THINK" Questionnaire

NAME: _____ DATE: _____

AGE: _____ Circle One: Male/ Female

To be completed by staff: _____ intake _____ discharge

Each statement in this questionnaire may describe how you think about things in life. Read each statement carefully. Then ask yourself, "Is it fair to say that this statement describes my thinking within the past six months?" Your answers will be kept confidential.

Mark your answer on the sheet. Don't say it out loud.

Any questions?

O.K., turn the page and begin.

1. Sometimes I get bored.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

2. I can't help losing my temper a lot.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

3. I might as well lie- when I tell the truth, people don't believe me anyway.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

4. Everybody has the right to be happy.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

5. I have tried to get even with someone.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

6. When I lose my temper it's because people try to make me mad.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

7. People are always trying to hassle me.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

8. If I lie to people, that's nobody's business but my own.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

9. If I really want something, it should be mine.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

10. You can't trust people because they will always lie to you.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

11. When I get mad, I don't care who gets hurt.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

12. I have forgotten important things.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

13. Sometimes you have to lie to get out of trouble.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

14. When friends need you, you should be there for them.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

15. People are always trying to start fights with me.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

16. If I tell someone off, it's their fault for trying to tell me what to do.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

17. People need to be roughed up once in awhile.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

18. If you know you can get away with it, only a fool wouldn't steal.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

19. I have taken things without asking.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

20. You should hurt people first, before they hurt you.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

21. Everybody lies. It's no big deal.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

22. It's important to think of other people's feelings.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

23. Everybody steals; you might as well get your share.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

24. The police are going to hassle you whether you steal or not.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

25. I sometimes want things that my friends have.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

26. People force me to lie when they ask me too many questions.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

27. If I make a mistake, it's not my fault if I got mixed up with the wrong crowd.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

28. If I really want to do something, I don't care if it's legal or not.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

29. I have sometimes said something bad about a friend.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

30. No matter how hard I try; I can't help getting in trouble.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

31. If you don't push people around, you will always get picked on.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

32. I get into arguments, but other people always start them.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

33. I am generous with my friends.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

34. It's important to look at all sides of a situation.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

35. If someone is careless enough to lose a wallet, they deserve to have it stolen.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

36. It's O.K. to tell a lie if someone is dumb enough to fall for it.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

37. Getting what you need is the only important thing.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

38. I have covered up things that I have done.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

39. If I hit someone, it's their fault for making me mad.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

40. I have done bad things that I haven't told people about.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

41. If I see something I like, I take it.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

42. A lie doesn't really matter if you don't know the person.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

43. If people don't cooperate with me, it's not my fault if they get hurt.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

44. Sometimes I gossip about other people.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

45. If a store or homeowner gets robbed, it's their fault for not having better security.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

46. It's no use trying to stay out of fights.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

47. Everybody needs help once in awhile.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

48. It's O.K. to push people around if you're in a bad mood.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

49. You might as well steal; people would steal from you if they have the chance.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

50. In the past, I have lied to get myself out of trouble.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

51. You might as well steal. If you don't take it somebody else will.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

52. I have sometimes done things that bother other people.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

53. Rules are mostly meant for other people.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

54. Sometimes you have to hurt someone if they don't cooperate with you.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

55. Stores make so much money that it's O.K. to just take things you need.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

56. I have taken advantage of other people.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

57. Taking a car doesn't really hurt anyone if nothing happens to the car and the owner gets it back.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

58. Only a coward would walk away from a fight.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

59. You should get what you need even if it means someone has to get hurt.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

60. People should be honest with me.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

61. If someone leaves a car unlocked, they are asking to have it stolen.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

62. Everybody breaks the law; it's no big deal.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

63. You have to get even with people who don't show you respect.

agree strongly	agree	agree slightly	disagree slightly	disagree	disagree strongly
-------------------	-------	-------------------	----------------------	----------	----------------------

OHIO'S RESIDENTIAL SUBSTANCE ABUSE TREATMENT PROGRAMS

Service Tracking Form

Client Name: _____ Case No: _____

Program code: _____ 1= Nova House; 2 = Mohican; 3 = Monday; 4 = Noble

1. Specialized Services Provided

Please maintain a log of the discrete services provided to individual offenders (e.g., education, cognitive skills training, anger management) beyond those general services provided all offenders through the TC environment. In the columns provided include the name of service (e.g., Rational Emotive Therapy), date started, date ended, and progress in treatment. Do not include individual counseling.

Type of Service	Date Started	Date Ended	Please check the box which describes the offender's progress in treatment		
			Achieved Objectives	Some progress	No progress

3. Encounters

Please record the date of any encounters that were held with the offender.

- | | |
|--------------------------|--------------------------|
| A. ____ / ____ / ____ | I. ____ / ____ / ____ |
| B. ____ / ____ / ____ | J ____ / ____ / ____ |
| C. ____ / ____ / ____ | K ____ / ____ / ____ |
| D. ____ / ____ / ____ | L. ____ / ____ / ____ |
| E. ____ / ____ / ____ | M. ____ / ____ / ____ |
| F. ____ / ____ / ____ | N. ____ / ____ / ____ |
| H. ____ / ____ / ____ | O. ____ / ____ / ____ |

4. Treatment Phases

If your program uses a phase or level system, please indicate the client's start and end dates for each phase. If a client regresses or repeats a phase, please indicate the reason for the regression in column four. Otherwise, leave column four blank.

Phase Name	Start date	End date	If moved back to earlier phase, please indicate reason

5. Drug Testing

Date of Test	Result (1=positive; 2=negative)	If positive, for what drug(s)?*

***Substance Codes**

1=Cocaine 2=Amphetamine 3=THC 4 = Benzodiazapine 5 = PCP 6= Opiate 7 = Alcohol

6. Program Violations

Please record violations committed by the client throughout his/her participation in the residential phase of the therapeutic community.

Date of Violations	Type of Violations (check all types that apply for the date specified. If the offender committed multiple violations of one type, record the number of violations committed instead of a checkmark)			
	House	Cardinal	Major	Institutional Infractions

OHIO'S RESIDENTIAL SUBSTANCE ABUSE TREATMENT PROGRAMS

Standardized Termination Form

Please indicate the circumstances surrounding the client's discharge from the program including the date of discharge, type of discharge, and plan for aftercare.

1) Client Name: _____

2) Social Security No: _____

3) Program code: _____ 1= Nova House; 2 = Mohican; 3 = MonDay; 4 = Noble

4) Date of discharge ____/____/____

5) Type of discharge _____

- 1=Successful completion (achieved treatment goals)
- 2=Successful completion (completed required time but did not achieve treatment goals)
- 3=Unsuccessful termination (disciplinary, lack of participation/progress)
- 4=Voluntary withdrawal from program
- 5=Escape/Absconson
- 6=Unable to participate due to reclassification, medical, out to court
- 7=Other (specify: _____)

6) Living arrangements upon discharge _____

- 1=With family/relatives
- 2=With friends
- 3=By him/her self in apartment/house
- 4=Group home
- 5=Halfway house
- 6=Foster care
- 7=Other (specify: _____)

7) Has continued drug/alcohol treatment been arranged for the client? _____ 1=Yes; 2=No

8) Criminal Justice Placement _____

- 1=Probation supervision
- 2=Parole supervision
- 3=Jail
- 4=Prison
- 5=DYS institution
- 6=Other (specify: _____)

9) To facilitate the collection of follow-up data, please provide the following information on the agency responsible for the offender's supervision/custody upon discharge from RSAT.

Agency (probation, parole, institution) _____

Probation/Parole Officer's name _____

Address _____

City, State, Zip _____

Phone Number _____

10) Please provide reassessment information by attaching the following items Or a summary of results/scores.

- Monday - LSI reassessment
- Noble - PII reassessment

APPENDIX B

DESCRIPTIVE STATISTICS

Table B1: List of Measures for the Independent and Dependent Variables in Regression Models

MonDay Independent Variables	Mohican Independent Variables	Noble Independent Variables
<p>Race: 0 = White; 1 = Nonwhite</p> <p>Age: 18 – 59</p> <p>Gender: 0 = Female; 1 = Male</p> <p>Marital Status: 0 = Not Married; 1 = Married</p> <p>Grade 12: 0 = Did not complete the 12th grade; 1 = Completed the 12th grade</p> <p>Number of Prior Arrest: 0 – 36</p> <p>Number of Prior Convictions: 0 – 11</p> <p>Completion of Treatment: 0 = Did not complete treatment; 1 = Completed treatment</p> <p>Level of Service Inventory (LSI) Score: 18 – 42</p> <p>Group: 0 = all cases combined; 1 = MonDay RSAT group 0 = Pre-TC; 1 = MonDay RSAT group 0 = MCCOP; 1 = MonDay RSAT group</p>	<p>Race: 0 = White; 1 = Nonwhite</p> <p>Age: 12 – 20</p> <p>Highest Grade Completed: 1 – 13</p> <p>JASAE Score: 1 – 88</p> <p>Felony Level: 0 = misdemeanor; 1 = F5; 2 = F4; 3 = F3 4 = F2; 5 = F1</p> <p>Y-LSI Score: 0 – 37</p> <p>Group: 0 = all cases combined; 1 = Mohican RSAT group 0 = Pre-TC; 1 = Mohican RSAT group 0 = DYS; 1 = Mohican RSAT group</p>	<p>Race: 0 = White; 1 = Nonwhite</p> <p>Age: 20 – 57</p> <p>Marital Status: 0 = Not Married; 1 = Married</p> <p>Grade 12: 0 = Did not complete 12th grade; 1 = Completed the 12th grade</p> <p>Number of Prior Arrest: 0 – 50</p> <p>Number of Prior Incarcerations: 0 – 36</p> <p>Participation in Previous Treatment: 0 = no; 1 = yes</p> <p>Days at Risk: 31 – 1733</p> <p>Type of Termination*: 0 = unsuccessful; 1 = successful completion</p> <p>Felony Level*: 1 = F1; 2 = F2; 3 = F3; 4 = F4; 5 = F5</p> <p>Group: 0 = comparison group; 1 = treatment group</p>
<p>MonDay Dependent Variables</p> <p>Arrested: 0=no; 1 = yes</p> <p>Incarcerated: 0 = no; 1 = yes</p>	<p>Mohican Dependent Variables</p> <p>Incarcerated: 0 = no; 1 = yes</p>	<p>Noble Dependent Variables</p> <p>Arrested: 0=no; 1 = yes</p> <p>Incarcerated: 0 = no; 1 = yes</p>

*Felony level and type of discharge were included only in the model predicting outcomes with the treatment group.

Table B2: MonDay Demographic Characteristics

Characteristics	MonDay RSAT (N= 226)		Pre-TC (N=244)		MCCOP (N=133)	
	N	%	N	%	N	%
Race:						
White	135	60.8	128	53.1	60	48.4
Black	82	36.9	107	44.4	64	51.6
Other	5	2.3	6	2.5	0	0.0
$\chi^2 = 9.620; p = .047$						
Gender:						
Male	152	67.3	160	65.8	110	82.7
Female	74	32.7	83	34.2	23	17.3
$\chi^2 = 13.057; p = .001$						
Age at Intake:						
18 to 20	26	11.8	50	21.3	18	14.9
21 to 25	34	15.5	64	27.2	26	21.5
26 to 30	34	15.5	58	24.7	24	19.8
31 to 35	51	23.2	43	18.3	22	18.2
36 to 40	41	18.1	13	5.5	14	11.6
41 to 45	18	8.2	6	2.6	8	6.6
46 to 50	10	4.5	1	0.4	5	4.1
51 to 59	6	2.7	0	0.0	4	3.3
Mean	32.30		27.03		30.94	
$F = 26.924; p = .000$						
Marital Status:						
Married	39	17.6	45	18.9	24	18.2
Single	183	82.4	193	81.1	108	81.8

MonDay pre-TC participants January 1990 – June 1993
 N's may not equal total due to missing data

Table B3: MonDay Social History

Characteristics	MonDay RSAT (N= 226)		Pre-TC (N=244)		MCCOP (N = 133)	
	N	%	N	%	N	%
	Highest Grade Completed:					
9 th grade or less	51	24.8	50	20.9	27	20.5
10 th grade	39	18.9	50	20.9	30	22.7
11 th grade	45	21.8	58	24.3	26	19.7
12 th grade	48	23.3	68	28.2	41	31.1
Some college or higher	23	11.2	13	5.4	8	6.1
Mean	10.38		10.68		10.72	
Employment Status Prior to Arrest:						
Employed full-time or part-time	83	38.2	79	35.3	40	32.8
Unemployed	134	67.2	145	64.7	82	67.2

MonDay pre-TC participants January 1990 – June 1993

NA = Information not reported

Table B4: MonDay Current Offense and Criminal History

Variable	MonDay RSAT (N= 226)		Pre-TC (N=244)		MCCOP (N=133)	
	N	%	N	%	N	%
Crime Type:						
Personal	17	7.5	33	15.3	27	22.9
Property	96	52.9	82	38.0	51	43.2
Drug	99	43.8	88	40.7	29	24.6
Other	14	6.2	13	6.0	11	9.3
$\chi^2 = 23.929; p = .001$						
Level of Adjudication:						
Felony 1	6	2.7	7	3.3	13	10.2
Felony 2	11	4.9	17	8.1	15	11.8
Felony 3	34	15.0	53	25.4	27	21.3
Felony 4	58	25.7	132	63.2	72	56.7
Felony 5	117	51.8	0	0.0	0	0.0
$\chi^2 = 232.534; p = .000$						
Age at First Arrest:						
16 or younger	75	41.9	68	29.3	24	20.5
17 to 18	25	14.0	54	23.3	16	13.7
19 to 25	44	24.6	70	30.2	42	35.9
26 to 30	15	8.4	25	10.8	16	13.7
31 to 40	17	9.5	11	4.7	12	10.3
41 or older	3	1.3	4	1.7	7	6.0
Mean	$\bar{x} = 19.89$		$\bar{x} = 19.99$		$\bar{x} = 23.44$	
$F = 10.461; p = .000$						

MonDay pre-TC participants January 1990 – June 1993

Table B4: MonDay Current Offense and Criminal History (continued)

Variable	MonDay RSAT (N= 226)		Pre-TC (N=244)		MCCOP (N=133)	
	N	%	N	%	N	%
Prior Sentences to Community Supervision:						
0	44	20.7	0	0.0	0	0.0
1	71	33.3	99	41.8	61	48.0
2	50	23.5	64	27.0	35	27.6
3	23	10.8	42	17.7	21	16.5
4 or more	25	11.7	32	13.5	10	7.9
Mean	$\bar{x} = 1.99$		$\bar{x} = 2.18$		$\bar{x} = 1.27$	
F = .703; p = .496						
Prior Arrests:						
0	27	13.0	0	0.0	0	0.0
1 to 2	88	42.3	62	25.6	48	36.6
3 to 4	49	23.6	61	25.2	39	29.7
5 or more	44	21.1	119	49.2	44	33.7
Mean	$\bar{x} = 3.18$		$\bar{x} = 5.99$		$\bar{x} = 4.77$	
F = 20.779; p = .000						
Prior Convictions:						
0	38	20.2	33	21.0	55	49.5
1 to 2	89	47.3	88	56.1	36	32.4
3 to 4	32	17.0	24	15.3	10	9.0
5 or more	29	15.4	12	7.6	10	9.0
Mean	$\bar{x} = 2.20$		$\bar{x} = 1.86$		$\bar{x} = 1.37$	
F = 5.609; p = .004						

MonDay pre-TC participants January 1990 – June 1993

Table B5: MonDay Drug History

Variable	MonDay RSAT (N= 226)		Pre-TC (N=244)		MCCOP (N=133)	
	N	%	N	%	N	%
Age at First Alcohol Use:						
10 and under	36	16.9		NA		NA
11 to 12	37	17.4		NA		NA
13 to 15	85	39.9		NA		NA
16 to 17	35	16.4		NA		NA
18 or older	20	9.4				
Mean	13.63			NA		NA
Age at First Drug Use:						
10 and under	12	5.6		NA		NA
11 to 12	36	16.9		NA		NA
13 to 15	91	42.7		NA		NA
16 to 17	43	20.2		NA		NA
18 or older	31	14.6				
Mean	15.03			NA		NA
First Drug of Choice:						
Heroin	34	15.7	6	2.8	3	3.0
Non-crack cocaine	35	16.2	0	0.0	0	0.0
Crack	50	23.1	47	21.8	41	41.4
Marijuana	39	18.1	32	14.8	12	12.1
Alcohol	41	19.0	24	11.1	17	17.2
Other	17	7.9	6	2.8	0	0.0
Multiple ³⁰	0	0.0	101	46.8	99	26.3

MonDay pre-TC participants January 1990 – June 1993

NA = Information not available

³⁰ The treatment participants were not asked about multiple drugs.

Table B5: MonDay Drug History (continued)

Variable	MonDay RSAT (N= 226)		Pre-TC (N=244)		MCCOP (N=133)	
	N	%	N	%	N	%
Dual Diagnosis:						
Yes	34	16.7		NA		NA
No	169	83.3		NA		NA
History of Family Substance Abuse:						
Yes	166	77.2		NA		NA
No	49	22.8		NA		NA
History of Prior Treatment:						
Yes	180	81.8		NA		NA
No	40	18.2		NA		NA
Type of Prior Treatment:						
Detoxification	41	22.8		NA		NA
Methadone Maintenance	15	8.3		NA		NA
Outpatient	103	57.2		NA		NA
Short-term inpatient	92	51.1		NA		NA
Long-term residential	83	46.1		NA		NA

MonDay pre-TC participants January 1990 – June 1993
 NA = Information not available

Table B6: Mohican Demographic Characteristics

Characteristics	Treatment (N= 448)		Pre-TC (N=343)		DYS (N=450)	
	N	%	N	%	N	%
Race:						
White	232	51.8	162	47.2	222	49.3
Black	180	40.2	157	45.8	205	45.6
Other	36	8.0	24	7.0	23	5.1
Age at Intake:						
12	0	0.0	0	0.0	3	0.7
13	4	0.9	6	1.8	15	3.5
14	19	4.4	18	5.4	47	11.0
15	52	12.1	50	15.0	71	16.7
16	97	22.6	89	26.6	133	31.2
17	152	35.4	113	33.8	134	31.5
18	89	20.7	55	16.5	23	5.4
19	11	2.6	3	0.9	0	0.0
20	5	1.2	0	0.0	0	0.0
Mean	16.66		16.38		15.90	
F= 40.429; p = .000						
Number of Dependents:						
0	369	82.4	283	83.7	NA	
1	56	12.5	40	11.8	NA	
2	22	4.9	14	4.1	NA	
3	1	0.2	0	0.0	NA	
4	0	0.0	1	0.3	NA	

Mohican Pre-TC participants January 1998 – August 1999

NA = Information not reported

N's may not equal total due to missing data

Table B7: Mohican Social History

Characteristics	Treatment (N= 448)		Pre-TC (N=343)		DYS (N = 450)	
	N	%	N	%	N	%
Highest Grade Completed:						
6 th grade or less	10	2.3	13	3.9	38	9.8
7 th - 9 th grade	322	72.7	236	70.0	309	80.1
10 th grade	86	19.4	57	16.9	29	7.5
11 th grade	16	3.6	22	6.5	11	2.8
12 th grade or higher	9	2.0	9	2.7	0	0.0
Mean	8.79		8.76		8.04	
F= 45.907; p = .000						
School Performance Prior to Commitment:						
Enrolled	319	71.4	254	74.1	320	71.1
Truant $\chi^2 = 23.815$; p = .000	263	59.0	245	71.4	NA	
Low achievement $\chi^2 = 12.303$; p = .000	240	53.8	212	61.8	NA	
Disruptive behavior $\chi^2 = 52.046$; p = .000	390	87.4	213	62.1	NA	
Suspensions/expulsions $\chi^2 = 22.184$; p = .000	397	89.4	267	77.8	248	76.8
Employment Status Prior to Arrest:						
Employed full-time	68	15.2	20	6.0	NA	
Employed part-time	159	35.5	67	20.1	NA	
Unemployed	221	49.3	246	73.9	NA	
$\chi^2 = 49.103$; p = .000						
Living Arrangements:						
With parents/guardians	405	94.4	295	87.2	NA	
Foster care	13	3.0	5	1.5	NA	
Group home	9	2.1	5	1.5	NA	
Secure placement	2	0.5	33	9.8	NA	
$\chi^2 = 39.196$; p = .000						
Number with History of Runaway:	109	25.4	114	33.2	NA	
$\chi^2 = 6.624$; p = .010						

Table B8: Mohican Current Offense and Criminal History

Variable	Treatment (N= 448)		Pre-TC (N=343)		DYS (N=450)	
	N	%	N	%	N	%
Crime Type:						
Personal	125	29.1	116	35.1	147	33.7
Property	227	52.9	152	46.0	201	46.1
Drug	40	9.3	41	12.4	52	11.9
Other	37	8.6	21	6.4	36	8.3
$\chi^2 = 31.984; p = .000$						
Level of Adjudication:						
Felony 1	43	10.1	41	12.2	57	12.8
Felony 2	151	35.4	114	33.9	53	11.9
Felony 3	52	12.2	56	16.7	72	16.1
Felony 4	97	22.7	83	24.7	123	27.5
Felony 5	84	19.7	42	12.5	135	30.2
Misdemeanor	0	0.0	0	0.0	7	1.6
$\chi^2 = 103.419; p = .000$						
Age at First Arrest:*						
9 or younger	35	8.2	7	5.5	NA	
10 – 12	159	37.3	41	37.4	NA	
13 – 15	195	45.8	64	49.8	NA	
16 or older	36	8.4	17	13.2	NA	
Mean	12.68		13.12		NA	
Prior Drug Charge:						
Yes	215	50.4	148	44.0	NA	
No	212	49.6	188	56.0	NA	

Mohican Pre-TC participants January 1999 - August 1999

* $p < .05$

Table B9: Mohican Drug History

Variable	Treatment (N= 448)		Pre-TC (N=343)		DYS (N=450)	
	N	%	N	%	N	%
Age at First Alcohol Use:*						
9 and under	63	14.8	74	22.8		NA
10 to 12	143	33.6	99	30.6		NA
13 to 15	192	45.2	134	41.4		NA
16 and over	27	6.4	17	5.1		NA
Mean	12.17		11.56		NA	
Age at First Drug Use:						
9 and under	63	14.2	46	13.6		NA
10 to 12	177	39.9	126	37.4		NA
13 to 15	181	40.7	152	45.1		NA
16 and over	23	5.2	13	3.9		NA
Mean	11.99		12.17		NA	
First Drug of Choice:						
Heroin	7	1.6	1	0.3		NA
Crack or Cocaine	7	1.6	4	1.2		NA
Marijuana	323	76.0	262	78.7		NA
Alcohol	67	15.8	49	14.7		NA
Other	21	4.9	14	4.2		NA
$\chi^2= 7.821; p = .166$						

Mohican participants January 1998 – August 1999

* p < .05

Table B9: Mohican Drug History (continued)

Variable	Treatment (N= 448)		Pre-TC (N=343)		DYS (N=450)	
	N	%	N	%	N	%
Dual Diagnosis:						
Yes	183	41.1	85	26.7		NA
No	262	58.9	233	73.3		NA
$\chi^2 = 16.673; p = .000$						
History of Family Substance Abuse:						
Yes	232	52.1	209	61.8		NA
No	213	47.9	129	38.2		NA
$\chi^2 = 7.346; p = .007$						
History of Prior Treatment:						
Yes	305	68.2	181	53.6		NA
No	142	31.8	157	46.4		NA
$\chi^2 = 17.595; p = .000$						
Type of Prior Treatment:						
Detoxification*	0	0.0	7	3.9		NA
Methadone Maintenance	0	0.0	4	2.2		NA
Outpatient	184	60.3	106	59.6		NA
Short-term inpatient	25	8.2	44	24.3		NA
Long-term residential*	132	43.3	69	38.1		NA

	Treatment (N= 437)				Pre-TC (N=197)				DYS (N=341)			
	Min.	Max.	Mean	SD	Min.	Max.	Mean	SD	Min.	Max.	Mean	SD
JASAE Score	21.00	76.00	51.35	12.58	17.00	74.00	48.02	11.32	1.00	88.00	43.75	18.45
$F = 25.597; p = .000$												

NA = Information not available

* $p = .05$

Table B10: Mohican Youthful Level of Services Inventory

YO-LSI Scale	Treatment (N= 425)				Pre-TC (N=72)				DYS (N=450)			
	Min.	Max.	Mean	SD	Min.	Max.	Mean	SD	Min.	Max.	Mean	SD
Prior and Current Offenses, Adjudications (range 0-5)	.00	5.00	3.16	1.19	.00	5.00	3.32	1.16	.00	5.00	2.80	1.35
Family Circumstances and Parenting (range 0-6)	.00	6.00	3.51	1.35	.00	6.00	2.99	1.62	.00	6.00	2.78	1.44
Employment/Education (range 0-7)	.00	7.00	3.68	1.84	.00	7.00	3.76	1.72	.00	7.00	3.27	1.82
Peer Relations (range 0-4)	.00	4.00	2.92	0.92	.00	4.00	3.22	0.99	.00	4.00	2.52	1.10
Substance Abuse (range 0-5)	.00	5.00	3.98	1.22	.00	5.00	3.92	1.21	.00	5.00	2.93	1.77
Leisure/Recreation (range 0-3)	.00	3.00	1.94	0.61	.00	3.00	1.89	0.74	.00	3.00	1.74	0.71
Personality and Behavior (range 0-7)	.00	7.00	3.57	1.66	.00	7.00	3.49	1.80	.00	7.00	3.05	1.81
Attitudes and Orientations (range 0-5)	.00	5.00	2.00	1.12	.00	5.00	1.74	1.31	.00	5.00	1.38	1.14
Total (range 0-42) F= 58.501; p = .000	.00	37.00	24.76	5.51	.00	35.00	24.06	6.51	.00	37.00	20.47*	6.31

Table B11: Mohican Descriptive Statistics for Client Self Rating – Time 1

Scale	Treatment (N= 440)			Pre-TC (N=85)		
	N	Mean	SD	N	Mean	SD
Anxiety* (range 7-35)	401	17.10	5.26	72	19.35	5.18
Depression* (range 6-30)	406	12.88	4.06	72	14.15	3.92
Self-esteem* (range 6-30)	402	22.61	3.95	72	18.96	3.61
Decision-making (range 9-45)	398	31.47	5.36	72	30.40	6.48
Risk-taking* (range 7-35)	404	21.23	5.05	72	23.46	5.37
Hostility* (range 8-40)	397	20.23	6.15	72	25.79	6.70
Self-efficacy (range 7-35)	400	26.38	4.21	72	25.74	4.66
Desire for Help (range 7-35)	405	23.52	5.29	NA	NA	NA
Treatment Readiness (range 8-40)	399	26.58	5.54	NA	NA	NA

* p < .05

Table B12: Noble Demographic & Social Characteristics

Characteristics	Treatment (N = 273)		Comparison (N = 258)	
	N	%	N	%
Race:				
White	177	64.8	86	33.3
Nonwhite	96	35.2	172	66.7
$\chi^2 = 52.658; p = .000$				
Age at Intake:				
17 - 20	39	14.7	25	9.7
21 - 24	72	27.0	40	15.5
25 - 29	56	21.1	41	16.0
30 - 34	37	14.0	39	15.1
35 - 39	38	14.4	35	13.7
40+	0	0.0	64	22.9
$F = 28.641; p = .000$		$\bar{x} = 28.26$	$\bar{x} = 33.80$	
Number of Dependents:				
0	92	35.2	72	36.0
1	60	23.0	53	26.5
2	51	19.5	37	18.5
3	30	11.5	22	11.0
4 or more	28	10.7	16	8.0
$F = .026; p = .873$		$\bar{x} = 1.47$	$\bar{x} = 1.42$	
Highest Grade Completed:				
9 th grade or less	42	16.8	49	24.7
10 th grade	48	19.2	47	23.7
11 th grade	45	18.0	47	23.7
12 th grade	67	26.8	46	23.2
Some college or higher	49	19.2	9	4.5
		$\bar{x} = 11.04$	$\bar{x} = 10.48$	
GED Earned:				
Yes	57	48.3	45	18.1
No	61	51.7	203	81.9
$\chi^2 = 36.180; p = .000$				
Marital Status:				
Married	61	22.7	36	18.7
Not married	208	77.3	157	81.3
Employment:				
Employed full-time	155	60.1	49	24.9
Employed part-time	22	8.5	8	6.6
Unemployed	81	31.4	140	71.1
$\chi^2 = 70.451; p = .000$				

N's may not equal total due to missing data

Table B13: Noble Current Offense and Criminal History

Characteristics	Treatment (N = 273)		Comparison (N = 258)	
	N	%	N	%
Crime Type:				
Personal	99	37.2	2	0.8
Property	117	44.0	0	0.0
Drug	37	13.9	251	97.3
Other	13	4.9	5	51.9
	$\chi^2 = 373.804; p = .000$			
Level of Adjudication:				
Felony 1	29	12.9	0	0.0
Felony 2	71	31.6	3	1.2
Felony 3	61	27.1	20	7.9
Felony 4	37	16.4	75	29.6
Felony 5	27	12.0	155	61.3
	$\chi^2 = 214.249; p = .000$			
Age at First Arrest:				
9 or younger	2	1.3	1	0.4
10 – 12	11	7.1	11	4.5
13 – 15	36	23.2	37	15.1
16 - 18	53	34.2	83	34.0
19 or older	53	34.2	112	45.0
	$F = 20.936; p = .000$		$\bar{x} = 20.30$	
	$\bar{x} = 16.92$			
Prior Drug Charge:				
Yes	125	49.0	170	71.7
No	130	51.0	67	28.3
	$\chi^2 = 26.388; p = .000$			
Number of Prior Arrests:				
None	15	5.5	9	4.1
1 to 3	94	34.6	46	21.2
4 to 6	66	24.3	60	27.6
7 to 9	31	11.4	30	13.8
10 to 12	28	10.3	24	11.0
13 or more	38	14.2	48	22.3
	$F = 3.851; p = .000$		$\bar{x} = 8.18$	
	$\bar{x} = 6.98$			
Number of Prior Convictions:				
None	93	34.2	34	15.7
1	27	9.9	46	21.2
2	25	9.2	29	13.4
3	22	8.1	34	15.7
4	14	5.1	26	12.0
5 or more	37	33.5	48	22.1
	$F = 43.655; p = .000$		$\bar{x} = 3.06$	
	$\bar{x} = 4.24$			

N's may not equal total due to missing data

Table B14: Noble Drug History

Characteristics	Treatment (N = 273)		Comparison (N = 258)	
	N	%	N	%
Age at First Alcohol Use:				
9 and under	44	16.2		N/A
10 to 12	66	24.1		N/A
13 to 15	85	30.9		N/A
16 and over	53	19.5		N/A
	$\bar{x} = 12.71$			N/A
Age at First Drug Use:				
9 and under	21	7.7		N/A
10 to 12	57	20.8		N/A
13 to 15	81	29.6		N/A
16 to 18	82	30.1		N/A
	$\bar{x} = 14.61$			
First Drug of Choice:				
	5	2.0	5	2.0
Opiates	47	18.6	86	33.6
Cocaine	93	36.8	88	34.4
Marijuana	94	37.2	74	28.9
Alcohol	14	5.6	3	1.2
Other				
	$\chi^2 = 26.756; p = .001$			
Dual Diagnosis:				
Yes	38	16.7		N/A
No	190	83.3		N/A
History of Family Substance Abuse:				
Yes	152	62.0		N/A
No	93	38.0		N/A
History of Prior Treatment:				
Yes	141	57.3	24	9.9
No	105	42.7	219	90.1
Type of Prior Treatment:				
Detoxification	33	12.1		N/A
Methadone TX	3	1.1		N/A
Outpatient	65	23.8		N/A
Short-term inpatient	49	17.9		N/A
Long-term residential	77	28.2		N/A

N's may not equal total due to missing data

N/A = Information was not available

Table B15: MonDay Paired Sample t-tests on Client Self-Rating Time 1- Time 2*

Scale	No. of Pairs	Time 1 Mean	Time 2 Mean	t-value	Sig
Anxiety (range 7-35)	145	21.72	17.86	8.113	.000
Depression (range 6-30)	142	17.60	13.65	10.448	.000
Self-esteem (range 6-30)	143	16.79	20.71	-9.302	.000
Decision-making (range 9-45)	143	29.60	34.36	-8.722	.000
Risk-taking (range 7-35)	147	22.29	20.50	3.911	.000
Hostility (range 8-40)	148	20.91	19.53	2.844	.005
Self-efficacy (range 7-35)	146	24.09	26.30	-5.685	.000
Antisocial Attitudes (range 5-25)	76	13.20	12.37	1.925	.058
Desire for Help (range 7-35)	57	25.82	26.93	-1.221	.227
Treatment Readiness (range 8-40)	57	27.58	29.05	-1.509	.137

* includes all time

Table B16: MonDay Paired Sample t-tests on How I Think Questionnaire, Time 1- Time 2*

Scale	No. of Pairs	Time 1 Mean	Time 2 Mean	t-value	Sig
<u>Cognitive Distortions</u>					
Self-centered (range 0-6)	27	3.62	3.02	4.52	.000
Blaming Others (range 0-6)	27	3.54	3.10	3.53	.002
Minimizing/Mislabeling (range 0-6)	26	4.61	4.25	3.92	.001
Assuming the Worst (range 0-6)	28	2.94	2.53	2.80	.009
<u>Behavioral Referents</u>					
Opposition-Defiance (range 0-6)	27	3.64	3.11	4.79	.000
Physical Aggression (range 0-6)	29	3.74	3.24	3.90	.001
Lying (range 0-6)	26	3.79	3.39	2.78	.010
Stealing (range 0-6)	27	3.44	3.06	3.00	.006
<u>Summary Scores</u>					
Covert (range 1-6)	26	3.63	3.24	3.21	.004
Overt (range 1-6)	27	3.70	3.17	4.64	.000
How I Think (range 1-6)	26	3.69	3.22	4.13	.000

* Includes the scores that may be considered “suspect” because the AR scale is greater than 4.0 but less than 4.25.

Table B17: MonDay Termination Information

Variable	MonDay RSAT (N= 226)		Pre-TC (N=244)		MCCOP (N=133)	
	N	%	N	%	N	%
Case Status at Time of Data Collection:						
Successfully discharged	198	87.6	207	87.3	44	33.6
Unsuccessfully discharged	16	7.1	17	7.2	38	29.0
Other	12	5.3	13	5.5	49	37.4
$\chi^2 = 164.083; p = .000$						
Continued Drug Treatment:						
Yes	147	90.2	NA		NA	
No	16	9.8	NA		NA	
Living Arrangements Upon Discharge:						
With family/relative	110	58.2	NA		NA	
With friends	13	6.9	NA		NA	
By himself/herself	5	2.6	NA		NA	
Group home	1	0.5	NA		NA	
Halfway house	29	15.3	NA		NA	
Other	31	16.4	NA		NA	
Criminal Justice Placement Upon Discharge:						
Probation	173	90.6	NA		NA	
Parole	3	1.6	NA		NA	
Jail	13	6.8	NA		NA	
Prison	2	1.0	NA		NA	

MonDay Pre-TC participants January 1991 – June 1993

NA = Information not reported

N's may not equal total due to missing data

Table B18: Regression Coefficients Predicting Successful Completion (Monday)

Factor	Beta	Significance Level
Race	-.1418	.8329
Age	.0224	.5838
Gender	-.7332	.3721
Marital Status	.6408	.5632
Complete 12 th Grade	-.3983	.5632
LSI Score	-.0880	.2067
Constant	5.5373	
-2 Log Likelihood	80.892	
Goodness of Fit	186.401	

Table B19: Mohican Paired Sample t-tests on Client Self-Rating Time 1- Time 2* for the Treatment Group Only

Scale	No. of Pairs	Time 1 Mean	Time 2 Mean	t-value	Sig
Anxiety (range 7-35)	176	17.23	17.93	-1.776	.077
Depression (range 6-30)	178	13.04	12.33	2.039	.043
Self-esteem (range 6-30)	173	22.52	23.68	-3.523	.001
Decision-making (range 9-45)	172	31.73	32.83	-2.406	.017
Risk-taking (range 7-35)	175	21.33	21.82	-1.376	.171
Hostility (range 8-40)	173	20.29	21.51	-2.594	.010
Self-efficacy (range 7-35)	175	25.98	26.43	-1.253	.212
Desire for Help (range 7-35)	173	23.63	23.73	-.254	.800
Treatment Readiness (range 8-40)	174	26.55	26.29	.510	.611

* includes all time

Table B20: Mohican Paired Sample t-tests on How I Think Questionnaire, Time 1- Time 2*

Scale	No. of Pairs	Time 1 Mean	Time 2 Mean	t-value	Sig
<u>Cognitive Distortions</u>					
Self-centered (range 0-6)	111	3.29	3.19	1.506	.135
Blaming Others (range 0-6)	114	3.22	3.23	-.063	.950
Minimizing/Mislabeling (range 0-6)	111	4.19	4.20	-.141	.888
Assuming the Worst (range 0-6)	109	2.82	2.70	1.423	.158
<u>Behavioral Referents</u>					
Opposition-Defiance (range 0-6)	114	3.25	3.22	.374	.709
Physical Aggression (range 0-6)	113	3.40	3.34	1.052	.295
Lying (range 0-6)	104	3.51	3.44	1.035	.303
Stealing (range 0-6)	111	3.30	3.25	.944	.347
<u>Summary Scores</u>					
Covert (range 1-6)	104	3.41	3.34	1.190	.237
Overt (range 1-6)	112	3.33	3.27	.819	.415
How I Think (range 1-6)	101	3.38	3.31	1.166	.246

* Includes the scores that may be considered “suspect” because the AR scale is greater than 4.0 but less than 4.25.

Table B21: Mohican Paired Sample t-tests on How I Think Questionnaire, Time 1- Time 2*

Scale	No. of Pairs	Time 1 Mean	Time 2 Mean	t-value	Sig
<u>Cognitive Distortions</u>					
Self-centered (range 0-6)	65	3.53	3.34	2.071	.042
Blaming Others (range 0-6)	68	3.45	3.38	.696	.489
Minimizing/Mislabeling (range 0-6)	66	4.31	4.19	1.633	.107
Assuming the Worst (range 0-6)	65	3.05	2.87	1.650	.104
<u>Behavioral Referents</u>					
Opposition-Defiance (range 0-6)	68	3.48	3.36	1.284	.204
Physical Aggression (range 0-6)	68	3.61	3.45	1.915	.060
Lying (range 0-6)	61	3.72	3.48	2.834	.006
Stealing (range 0-6)	65	3.51	3.39	1.518	.134
<u>Summary Scores</u>					
Covert (range 1-6)	61	3.62	3.43	2.480	.016
Overt (range 1-6)	67	3.55	3.40	2.002	.049
How I Think (range 1-6)	59	3.60	3.41	2.407	.019

* Does not include the suspect cases

Table B22: Mohican Termination Information

Variable	Treatment (N= 448)		Pre-TC (N=343)		DYS (N=450)	
	N	%	N	%	N	%
Termination Status at Time of Data Collection:						
Discharged	367	81.9	343	100.0	421	93.6
Still Active	81	18.1	0	0.0	29	6.4
$\chi^2 = 83.303$; $p = .000$						
Case Status at Time of Data Collection:						
Successfully discharged	289	82.1	267	100.0	120	47.4
Unsuccessfully discharged	12	3.4	0	0.0	27	10.7
Other	51	14.5	0	0.0	106	41.9
$\chi^2 = 213.184$; $p = .000$						
Parole Region:						
Akron	65	23.5	17	14.0	NA	
Athens	27	9.7	4	3.0	NA	
Cincinnati	23	8.3	13	10.0	NA	
Cleveland	66	23.8	20	16.0	NA	
Columbus	39	14.1	8	6.0	NA	
Dayton	25	9.0	9	7.0	NA	
Toledo	24	8.7	5	4.0	NA	
Other	8	2.9	76	61.0	NA	
Continued Drug Treatment:						
Yes	75	81.5	70	59.3	NA	
No	17	18.5	48	40.7	NA	

Mohican Pre-TC participants January 1998 – August 1999

NA = Information not reported

N's may not equal total due to missing data

Table B23: Regression Coefficients Predicting Successful Completion (Mohican)

Factor	Beta	Significance Level
Race	-.7128	.2968
Highest Grade	-.5583	.1294
JASAE Score	-.0044	.8790
Y-LSI Score	-.0496	.4607
Age at Discharge	.4353	.2075
Constant	2.8529	
-2 Log Likelihood	84.074	
Goodness of Fit	271.272	

Table B24: Noble Paired Sample t-tests on Client Self-Rating Time 1 - Time 2*

Scale	No. of Pairs	Time 1 Mean	Time 2 Mean	t-value	Sig
Anxiety (range 7-35)	120	19.77	18.08	3.491	.001
Depression (range 6-30)	122	16.76	15.27	4.567	.001
Self-esteem (range 6-30)	123	18.65	20.27	-3.532	.001
Decision-making (range 9-45)	120	30.01	32.32	-4.373	.000
Risk-taking (range 7-35)	125	21.78	20.73	2.171	.032
Hostility (range 8-40)	123	22.31	20.08	4.094	.000
Self-efficacy (range 7-35)	122	25.10	25.72	-1.460	.147
Desire for Help (range 7-35)	69	26.81	24.61	3.151	.002
Treatment Readiness (range 8-40)	66	29.65	27.20	2.679	.009
Antisocial Attitudes (range 6-30)	38	11.21	10.44	1.087	.284

* includes all time

Table B25: Noble Paired Sample t-tests on How I Think Questionnaire, Time 1- Time 2*

Scale	No. of Pairs	Time 1 Mean	Time 2 Mean	t-value	Sig
Cognitive Distortions					
Self-centered (range 0-6)	48	3.17	3.06	-0.991	.302
Blaming Others (range 0-6)	48	3.22	3.07	1.043	.172
Minimizing/Mislabeling (range 0-6)	52	4.36	4.06	1.387	.002
Assuming the Worst (range 0-6)	54	2.58	2.59	3.215	.920
Behavioral Referents					
Opposition-Defiance (range 0-6)	47	3.23	3.05	1.767	.084
Physical Aggression (range 0-6)	47	3.30	3.17	1.443	.156
Lying (range 0-6)	54	3.38	3.35	0.356	.723
Stealing (range 0-6)	55	3.25	3.13	1.382	.173
Summary Scores					
Covert (range 1-6)	54	3.32	3.24	0.900	.372
Overt (range 1-6)	46	3.23	3.11	1.684	.099
How I Think (range 1-6)	56	3.31	3.18	1.504	.140

* Includes the scores that may be considered “suspect” because the AR scale is greater than 4.0 but less than 4.25.

Table B26: Noble Termination Information

Variable	Treatment (N = 273)	
	N	%
Case Status:		
Successful completion – goals achieved	69	34.2
Successful completion – time/not goals	14	6.9
Unsuccessful completion – disciplinary	61	30.2
Voluntary withdrawal	30	14.9
Unable to participate	3	1.5
Other	25	12.4
Continued Treatment at Discharge		
Yes	41	25.8
No	118	74.2
Living Arrangements Upon Discharge		
Family/relative	43	25.0
Friends	3	1.7
Self	2	.7
Halfway House	16	9.3
Other	108	62.8

N's may not equal total due to missing data

Table B27: Percentage Arrested During the Time Period (MonDay)

Time Period	Treatment (N= 226)		Pre-TC (N=244)		MCCOP (N=133)		Significance Level
	N	%	N	%	N	%	
1 year or less	35.8%	(N = 81)	32.4%	(N = 78)	26.3%	(N = 35)	.176
1 to 2 years	7.1%	(N = 16)	12.4%	(N = 30)	13.5%	(N = 18)	.082
2 years or more	0.0%	(N = 0)	10.4%	(N = 25)	9.0%	(N = 12)	.000

N's = the number of people arrested during the time period.

Table B28: Percentage Incarcerated During the Time Period (MonDay)

Time Period	Treatment (N= 226)		Pre-TC (N=244)		MCCOP (N=133)		Significance Level
	N	%	N	%	N	%	
1 year or less	20.4 %	(N = 46)	25.1%	(N = 60)	23.7%	(N = 31)	.467
1 to 2 years	6.6%	(N = 15)	13.0%	(N = 31)	10.7%	(N = 14)	.074

N's = the number of people incarcerated during the time period.

Table B29: MonDay Regression Coefficients Predicting Arrest = 1*

Factor	Beta	Significance Level
Race	.060	.851
Gender	.458	.171
Marital Status	.682	.090
Complete Grade 12	-.364	.284
Age	-.041	.033
LSI	.054	.088
Type of Termination	-2.150	.008
Constant	1.005	
-2 Log Likelihood	268.055	
Nagelkerke R ²	.167	

*MonDay RSAT group only

Table B30: MonDay Regression Coefficients Predicting Incarceration = 1*

Factor	Beta	Significance Level
Race	-.358	.328
Gender	.654	.093
Marital Status	.488	.276
Complete Grade 12	.099	.794
Age	-.059	.009
LSI	.074	.043
Type of Termination	-1.521	.015
Constant	-.456	
-2 Log Likelihood	227.158	
Nagelkerke R ²	.182	

*MonDay RSAT group only

Table B31: MonDay Regression Coefficients Predicting Arrest = 1*

Factor	Beta	Significance Level
Race	.559	.002
Age	-.036	.004
Gender	.280	.152
Marital Status	-.184	.434
Complete Grade 12	-.284	.200
Prior Arrests	.081	.000
Group	-.045	.818
Constant	.359	
-2 Log Likelihood	745.092	
Nagelkerke R ²	.107	

*All Groups

Table B32: MonDay Regression Coefficients Predicting Arrest = 1*

Factor	Beta	Significance Level
Race	.624	.003
Age	-.049	.001
Gender	.044	.840
Marital Status	-.110	.682
Complete Grade 12	-.219	.324
Prior Arrests	.086	.001
Group	-.006	.980
Constant	.822	
-2 Log Likelihood	570.602	
Nagelkerke R ²	.118	

*MonDay RSAT and pre- TC Groups

Table B33: MonDay Regression Coefficients Predicting Arrest = 1*

Factor	Beta	Significance Level
Race	.204	.392
Age	-.030	.036
Gender	.445	.095
Marital Status	.140	.643
Complete Grade 12	-.399	.108
Prior Arrests	.082	.008
Group	-.005	.985
Constant	.152	
-2 Log Likelihood	445.108	
Nagelkerke R ²	.085	

*MonDay RSAT and MCCOP groups

Table B34: MonDay Regression Coefficients Predicting Incarceration = 1*

Factor	Beta	Significance Level
Race	.457	.019
Age	-.024	.079
Gender	.503	.021
Marital Status	.113	.654
Complete Grade 12	.025	.903
Prior Convictions	.053	.070
Group	-.319	.144
Constant	-.706	
-2 Log Likelihood	663.595	
Nagelkerke R ²	.063	

*All groups

Table B35: MonDay Regression Coefficients Predicting Incarceration = 1*

Factor	Beta	Significance Level
Race	.472	.037
Age	-.045	.011
Gender	.381	.120
Marital Status	-.051	.864
Complete Grade 12	-.043	.861
Prior Convictions	.047	.149
Group	-.254	.311
Constant	.028	
-2 Log Likelihood	496.776	
Nagelkerke R ²	.080	

*MonDay RSAT and pre- TC

Table B36: MonDay Regression Coefficients Predicting Incarceration = 1*

Factor	Beta	Significance Level
Race	.015	.957
Age	-.031	.074
Gender	.675	.042
Marital Status	.330	.327
Complete Grade 12	.140	.618
Prior Convictions	.155	.006
Group	-.248	.351
Constant	-.836	
-2 Log Likelihood	361.462	
Nagelkerke R ²	.089	

*MonDay RSAT and MCCOP

Table B37: Outcome Information For Terminated Participants (Mohican)

Variable	Treatment (N= 367)		Pre-TC (N=341)		DYS (N=421)	
	N	%	N	%	N	%
Incarcerated After Termination:						
Yes	63	17.2	128	37.5	154	37.0
No	304	88.8	213	62.5	262	63.0
$\chi^2 = 46.901; p = .000$						
Mean Time to Commitment*:	193.89		296.03		255.07	
* $p < .05$						

Mohican Pre-TC participants January 1998 – August 1999

N's may not equal total due to missing data

Table B38: Mohican Regression Coefficients Predicting Recombitment = 1*

Factor	Beta	Significance Level
Race	.168	.223
Age	-.477	.000
Highest grade completed	.162	.021
Felony level	-.136	.010
Y-LSI score	.000	.976
JASAE score	.016	.004
Group	-.966	.000
Constant	5.308	
-2 Log Likelihood	1259.742	

*Treatment versus comparison groups combined

Table B39: Mohican Regression Coefficients Predicting Recommitment = 1*

Factor	Beta	Significance Level
Race	.053	.772
Age at discharge	-.432	.000
Highest grade completed	.165	.065
Felony level	-.142	.058
Y-LSI score	-.029	.225
JASAE score	.016	.102
Group	-1.054	.000
Constant	5.436	
-2 Log Likelihood	748.465	

*Treatment and pre-TC predicting incarceration

Table B40: Mohican Regression Coefficients Predicting Recommitment = 1*

Factor	Beta	Significance Level
Race	.277	.106
Age at discharge	-.545	.000
Highest grade completed	.167	.084
Felony level	-.149	.029
Y-LSI score	-.001	.935
JASAE score	.013	.047
Group	-.814	.000
Constant	6.417	
-2 Log Likelihood	827.780	

*Treatment and DYS predicting incarceration

Table B41: Percentage Arrested During Follow-up Period by Time At Risk (Noble)

Time Period	Treatment Group		Comparison Group		Significance Level
	%	N	%	N	
6 months to 1 year	13.0%	(N = 46)	66.7%	(N = 3)	.065
1 to 2 years	35.0%	(N = 60)	50.0%	(N = 36)	.198
2 to 3 years	43.8%	(N = 32)	48.2%	(N = 114)	.693
3 years or more	0.0%	(N = 3)	61.0%	(N = 105)	.065

Table B42: Percentage Incarcerated During Follow-up Period by Time At Risk (Noble)

Time Period	Treatment Group		Comparison Group		Significance Level
	%	N	%	N	
6 months to 1 year	6.5%	(N = 46)	33.3%	(N = 3)	.230
1 to 2 years	20.0%	(N = 60)	27.8%	(N = 36)	.454
2 to 3 years	21.9%	(N = 32)	36.0%	(N = 114)	.201
3 years or more	0.0%	(N = 3)	41.0%	(N = 105)	.274

Table B43: Factors Predicting Arrest For the Treatment Group (Noble)

Variable	Beta	Sig.
Race	.703	.084
Age	-.017	.604
Marital Status	-.416	.416
Highest Grade	-.319	.006
Degree of Offense	.364	.046
Previous TX	.344	.433
Number of Prior Arrests	-.053	.067
Type of Termination	-.660	.088
Number of Days in TX	.000	.473
Number of Days at Risk	.002	.001
Constant	.967	
-2 Log Likelihood	172.742	

Table B44: Factors Predicting Incarceration For the Treatment Group (Noble)

Variable	Beta	Sig.
Race	.031	.955
Age	-.022	.611
Marital Status	-.676	.357
Highest Grade	-.121	.406
Degree of Offense	.655	.006
Previous TX	.188	.748
Number of Prior Convictions	-.047	.316
Type of Termination	-.709	.161
Number of Days in TX	.000	.843
Number of Days at Risk	.003	.002
Constant	-2.710	
-2 Log Likelihood	109.527	

Table B45: Noble Regression Coefficients Predicting Arrest = 1*

Factor	Beta	Significance Level
Race	.5185	.0385
Age	-.0334	.0502
Marital Status	-.5907	.0672
Complete Grade 12	-.4919	.0616
Prior Arrests	.0402	.0223
Previous Treatment	.3352	.2961
Days at Risk	.0008	.0861
Group	-.5566	.1217
Constant	-.5388	
-2 Log Likelihood	453.790	

*Noble Treatment and comparison group

Table B46: Noble Regression Coefficients Predicting Incarceration = 1*

Factor	Beta	Significance Level
Race	-.0669	.8065
Age	-.0090	.6123
Marital Status	-.8719	.0332
Complete Grade 12	-.1353	.6324
Prior Convictions	.0239	.4296
Previous Treatment	.4367	.2386
Days at Risk	.0010	.0319
Group	-.6656	.1049
Constant	-1.9618	
-2 Log Likelihood	412.190	

*Noble Treatment and comparison group