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Modeling a Modified TC Design  
for Work Release

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Modeling a Modified TC Design  
for Work Release

Introducing therapeutic communities (TC) into the prison setting has proven difficult. Many of the characteristics of therapeutic communities such as client decision-making and authority directly contradict the prison mandate of custody and control. Correctional officials are suspicious of therapeutic communities<sup>1</sup> and frequently work to undermine their success<sup>2</sup>.

Establishing therapeutic communities in work release settings has not proven any easier. Although work release programs are more open than prisons, custodial issues remain paramount. Traditionally, work release programs were developed as mechanisms to relieve prison overcrowding as well as provide a transitional setting from prison to the community for offenders. Although the first work release programs were developed at the turn of the century, they did not become popular until the late 1960's and early 1970's<sup>3</sup>. At that time they were touted as cost-effective and more productive and humane than prison. However, supporters often advocated for them without evidence of success or even feasibility. Regardless, by 1973 43 states had developed

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<sup>1</sup> Robert B. Levison, "TC or Not TC? That is the Question," in Hans Toch (ed.), Therapeutic Communities in Corrections. (NY: Praeger Publishers, 1980), pp. 50-53.

<sup>2</sup> George M. Camp and Camille G. Camp, Preventing and Solving Problems Involved in Operating Therapeutic Communities in a Prison Setting (South Salem, NY: Criminal Justice Institute, 1990).

<sup>3</sup> James A. Inciardi, Criminal Justice (San Diego: Harcourt Brace Jovanovich, 1990), p.702-703.

work release programs<sup>4</sup>.

The primary purpose in work release is obtaining and maintaining employment. Other activities such as education and drug treatment are encouraged but not required<sup>5</sup>. Shifting priorities in the work release setting from employment to drug treatment is a formidable one. The University of Delaware, through a National Institute on Drug Abuse grant, is attempting to do just that by creating a therapeutic community in a work release setting. Research on TCs in various settings<sup>6</sup> coupled with the increasing concern of treating drug abusing offenders indicate that a work release TC would be appropriate.

The following discussion addresses the difficulties of integrating a therapeutic community into a work release setting; or, possibly more accurately, modifying a TC for work release. The examples given will be primarily from our experiences in establishing CREST Outreach Center in Delaware. The development of such a program does not occur outside the influence of public pressures or state obligations. The impact of both of these on CREST are also discussed.

It is important to keep in mind that this TC is the

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<sup>4</sup> Gordon P. Waldo and Theodore G. Chiricos, "Work Release and Recidivism: An Empirical Evaluation of a Social Policy," in Marcia Gutlentag (ed.) Evaluation Studies Review Annual, Vol 2 (Beverly Hills, CA: Sage Publications, 1977), pp. 624-644.

<sup>5</sup> James A. Inciardi, Criminal Justice (San Diego: Harcourt Brace Jovanovich, 1990), p. 703.

<sup>6</sup> See George DeLeon and James T. Ziegenfuss (eds.), Therapeutic Communities for Addictions: Readings in theory, Research and Practice (Springfield, IL: Charles C. Thomas, 1986).

treatment component of a larger NIDA demonstration research grant. The purpose of the research is to determine the efficacy of a TC work release program. There are three research groups in this study: 1) respondents from an in-prison therapeutic community entering CREST; 2) respondents from the general prison population with no prior TC experience entering CREST; and 3) respondents from the general prison population entering conventional work release. All respondents participate in baseline interviews prior to leaving prison; 6, 12 and 18 month follow-ups; and HIV and urine testing. The research design also involves an intensive process evaluation of CREST.

Such a research design will allow us to address numerous questions about TCs such as: Is a work release TC any better for reducing recidivism and relapse than regular work release?; Is TC an appropriate first treatment?; How do women fare in a co-ed TC? What are the factors affecting relapse and recidivism among all three research groups? What are these factors among the TC clients? Is in-prison TC experience beneficial to later success in both the work release TC and in the community? In addition, the process evaluation will enable us to get inside the black box of treatment and explore the dynamics of TC treatment, complementing the impact and outcome data collected through the interviews.

Research designs such as this are integral in evaluating and, if appropriate, replicating TC and other treatment models. However, they also influence the TC. In our case, all

respondents must volunteer to participate in CREST. In addition, participation in CREST can not affect the client's sentence. The implications of these research guidelines are discussed further in the context of client selection. Most importantly, the Center for Drug and Alcohol Studies is not an established treatment organization; we are a research facility. Therefore, we are more dependent on the Delaware Department of Correction on such things as security, meals, and program space than some other established treatment providers might be.

Many TCs have been established outside the prison, in a community setting, including Synanon, Daytop Village, Amity and others. However, most of these community based TCs have mixed populations, of which probationers, parolees and others under the custody of the department of correction are only a portion of the resident population. As such, only those clients with correctional or court stipulations come under the scrutiny of these authorities. However, the entire program, including staff, of TCs such as CREST whose entire client population are technically in the custody of the department of correction, are watched and scrutinized by correctional authorities. Conflicts between the custodial priorities of correctional officials and treatment priorities of TCs similar to those seen in prison settings arise. As recommended when initiating prison based TCs, it is important to gain the support and cooperation of correctional authorities, particularly correctional officers,

when establishing a TC work release program<sup>7</sup>.

Because the community seems at greater risk from the offenders in community-based work release programs than from those in prison, the scrutiny imposed on a work release TC often seems more stringent than in prison TCs . Concerns about the community response affect both the site/facility selection and the client selection. At the time that CREST was initiated, Delaware like most states experienced a budget crunch. Although we received some renovation funds from NIDA, we needed assistance from the State on preparing a facility. We were also completely dependent on the state and the Department of Correction on providing the location and the building for the program. The Delaware Department of Correction had also begun expansion on one state prison, and construction on a larger prison for women. Therefore, the citizens were particularly sensitive to additional facilities and programs for offenders in their neighborhoods.

The only option the Department of Correction offered was housing space in an existing work release center with program and office space in an adjacent abandoned American Legion building. We renovated this building for staff offices and program space. For programmatic reasons, it is essential that work release TCs have their own kitchens. Resident training and program job functions require such self sufficiency. Therefore, we converted the two story garage into a kitchen/ dining room.

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<sup>7</sup> "Creating A Social Learning Environment in the Prison," in Hans Toch (ed.) Therapeutic Communities in Corrections (NY: Praeger Publishers, 1980), pp. 120-137.

As indicated in other research on TCs, autonomy and separation from negative influences of the inmate environment is essential for the success of TCs<sup>a</sup>. This holds true for work release TCs also. Maintaining autonomy and control over both the CREST clients and the program as a whole is difficult with the location adjacent to the existing work release center. Several steps have been taken to ensure separation of CREST from the regular work release. All TC activities occur in a separate building. CREST clients are housed in a unit separated from other work release residents by a wall. All meals are prepared by CREST clients and staff and served separate from other work release residents. CREST staff also take full responsibility for the correctional status of the clients, increasing the program autonomy and separation. They maintain contact with judges, parole and probation officers and other authorities to make sure that the correctional and court stipulations are followed.

Many correctional authorities have been criticized harshly for releasing certain inmates to work release. In response to these criticisms and in an attempt to relieve the community of a sense of risk, correction officials are conservative in their decisions about approving work release. This hesitation creates problems identifying and recruiting potential clients appropriate for work release as well as for TC treatment.

In Delaware, many sentences are split, requiring a certain

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<sup>a</sup> See Hans Toch (ed.) Therapeutic Communities in Corrections (NY: Praeger Publishers, 1980).

amount of time to be served in prison and a certain amount in work release. As such, work release is not an early release from prison but rather part of a sentence ordered by the court. Releasees serving the final part of their sentence at work release have no incentives to participate in treatment programs, especially intense ones such as a TC. Inmates appropriate for work release are not interested in TC treatment. On the other hand, inmates appropriate and interested in TC treatment are often considered ineligible for work release by correctional authorities.

Fortunately, many judges in Delaware are also requiring some offenders to participate in drug treatment programs as part of their sentence. Therefore, offenders are interested in going to CREST in order to satisfy the in-patient treatment requirement of their sentence. In short, eligibility criteria for the work release TC must be compatible with the sentencing and release practices of the correctional system.

Another consideration in designing a TC for work release offenders is length of program. Research on TCs indicate that most programs are successful if the treatment is designed for about 9 to 12 months. Staying too long can be as detrimental as not staying long enough<sup>9</sup>. In addition, work release TCs must balance the length of time remaining on sentences to be served at

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<sup>9</sup> Harry Wexler, Doug Lipton and K. Foster, "Outcome evaluation of a Prison Therapeutic Community for Substance Abuse Treatment: Preliminary Results." Paper presented at the American Society of Criminology annual meeting, San Diego, November 1985.



work release with the length of treatment. Once work release clients have served their sentence they must be released, regardless of progress through the treatment program. CREST was designed as a six month program, the average length of stay in the Delaware work release programs. Although this time in treatment may coincide with client sentences, it may not be long enough for successful treatment, especially for those clients with no previous treatment experience.

The treatment model at CREST follows a five phase design. Phase One is a two week orientation, involving induction into the TC, assessment and evaluation. Phase Two is an eight week component emphasizing involvement in the TC community, such as participation in morning meetings, community jobs, group therapy, individual counseling, confrontation and nurturing. Phase Three stresses role modeling and supervision of other clients with the assistance of staff. This phase lasts about five weeks. Phase Four is a two week preparation for transition from the TC community to the outside community, with mock interviews, resume preparation and seminars on job seeking. Phase Five is re-entry, including obtaining and maintaining employment outside the TC. During this phase, which lasts about seven weeks, clients remain at the facility but begin the transition back to the community by retaining gainful employment, finding appropriate housing and initiating the recovery stage of their treatment<sup>10</sup>.

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<sup>10</sup> James A. Inciardi, Dorothy Lockwood, Steven S. Martin, and Bruce M. Wald, "Therapeutic Communities in Corrections and Work Release: Some Clinical and Policy Considerations," paper presented

CREST has an additional variable to consider in its program design. Some of the clients will have completed primary treatment in the in-prison TC. These clients will move through the phase system on an accelerated basis, spending less time in orientation and re-entering the community more quickly. These clients will also provide much of the TC structure and framework, having had prior experience in a TC.

A final consideration in developing a work release TC is security. This is a particularly difficult subject for an all offender TC in which the Department of Correction has custody of the clients. It is difficult to balance the need to protect the community, the needs of the Department of Correction to fulfill its legal obligations of custody and the program needs to ensure that nonsupportive correctional officers and officials do not sabotage the program and that treatment staff are able to implement the program successfully. Ideally, correctional staff should be trained so that they understand TCs. Supportive and knowledgeable correctional staff can benefit the TC.

In Delaware, due to the state cut-backs, the Department of Correction was unable to provide correctional staff for CREST. Existing staff at the adjacent work release center conduct the basic monitoring procedures such as counts. The CREST staff coordinate with the correctional officers in approving and administering passes. CREST staff maintain client records as

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well as contact judges and the parole board, tasks usually conducted by correctional staff at the work release center. Generally, the additional 'correctional' activities conducted by CREST staff benefits the autonomy of the TC. However, correctional officers frequently demand information or input on decisions made about clients under the guise of security. The distinction between clinical and correctional/custodial decisions needs to be made clear for those work release TCs in which the correctional authorities have custody of the clients.

In sum, considerations for modifying a TC for work release include community response and support, site selection, client selection and recruitment, Department of Correction support and cooperation, security, program autonomy, length of treatment, and compatibility of client's correctional status with treatment requirements.