Evaluation of Montana's Residential Methamphetamine Treatment Programs

Elkhorn Treatment Center for Women
Nexus Treatment Center for Men

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EXECUTIVE SUMMARY

This report describes, analyzes and presents information from Department of Corrections contracted programs for the treatment of methamphetamine and other drug offenders: the Elkhorn program for women in Boulder, operated by Boyd Andrew Community Services (BACS), and the Nexus program for men in Lewistown, operated by Community Counseling and Correctional Services (CCCS). The report thoroughly describes the population and identifies specific risk factors associated with program and prerelease center completion/non-completion. Recommendations for improving outcome are suggested.

This 2013 report incorporates data from the previous 2008 and 2010 reports.

The primary evaluation research goal was to establish efficient data collection and reporting methods that could be implemented over an extended period of time, enabling the ongoing reporting of data useful for verifying and improving program effectiveness. This 2013 report incorporates data from the previous 2008 and 2010 reports. In 2011 the DOC shifted responsibility for hiring a program evaluation researcher solely onto the programs who continued to retain Research & Survey Consulting to maintain continuity.

Between April of 2007 and July of 2012 data was collected on 867 offenders: 303 admitted to Elkhorn and 564 admitted to Nexus. It is clear that these programs are treating very different populations with regards to gender, family history, criminal history, mental illness etc. Reporting is combined here not for critical comparison but to make report reading more efficient.

Over a 5 year period 79.5% of everyone admitted to Nexus and 86.1% of everyone admitted to Elkhorn completed their 9 month stay as sentenced. In the most recent year for which complete data is available, 2011 (most 2012 admissions are still in the 9 month programs or prerelease), both programs saw a lower percentage of completions with Nexus showing the most substantial (but not statistically significant) drop. This reflects the increasingly diverse and complex population of offenders which included substantially more opioid users (for women, opiate users have more than doubled from 15% early in the program to 38% currently), a consistently high rate of risk from psychiatric illness and medications, Attention Deficit Hyperactivity Disorder and young age as well as convoluted criminal and treatment histories.

For Nexus, all offenders who did not complete their Nexus facility stay were initially sent to the Sanction, Treatment, Assessment, Revocation and Transition center (START), Montana State Prison, another DOC facility/program, or a county jail. For Elkhorn, offenders who did not complete their Elkhorn stay all were initially returned to Montana Women's Prison, a Passages program, or a county jail.

Of those offenders who completed the treatment center portion of the program (Nexus or Elkhorn) and went to a PRC, the completion rate at the PRC was 72.7% for men and 72.1% for women. The completion rate for those who finished both the treatment program and the PRC was 59.39% for Nexus and 60.01% for Elkhorn; there is no statistically significant difference between programs.

Movement between programs and facilities is fluid, complex and challenging to aggregate for groups of offenders. With drug offenders committed to DOC there are many programmatic and facility options designed to best meet the offender's criminogenic and rehabilitative concerns over time. Assessment, sanction and drug offender placement in diverse DOC programs is a dynamic process driven by clinical judgment and program availability. Rather than following a rigid linear process from program A, to B, to C most offenders cycle through many programs and facilities over time.

Services at the programs must continue to adapt to more effectively address men and women who have a co-occurring mental illness; those reporting a history of childhood abuse or neglect; the female offenders who were victims of domestic violence; the men with Attention Deficit Hyperactivity Disorder (ADHD), those physically abused/neglected as children; and a criminal population all of whom are chemically dependent - addicted.

The Department of Corrections, Nexus and Elkhorn are advised to continue to gather and centralize as much information on these offenders as possible in order to continue identifying those at highest risk and to deliver maximally effective programs. De-emphasizing quantitative evaluation methodology and moving in the direction of ground level narrative informed outcome studies will prove most informative going forward.

> *Services at the programs must continue to adapt to more effectively address men and women who have a co-occurring mental illness…*

Introduction

The primary goal of this program evaluation outcome research was to assess the efficacy of the Nexus and Elkhorn methamphetamine treatment programs. The initial objective was to establish efficient data collection and reporting methods that would enable ongoing data collection for verifying and improving program effectiveness, including the prediction of program non-completion, offender return rate, and recidivism. This is the third report and the others were presented in 2008 and 2010; with data now collected on 867 offenders spanning 6 years the objective has been met. The goal is ongoing and this report furthers the assessment of efficacy.

The DOC has adopted the ASCA (Association of State Correctional Administrators) definition of recidivism. That definition is: The rate at which adult offenders return to prison in Montana for any reason within three years of release from prison. Each release can have only one corresponding return. To determine this rate for Nexus and Elkhorn would require data identifying only those who had been sent to the programs from prison and failed to complete the entire program including prerelease and then were returned directly, at some point to prison; Department of Corrections statisticians are in the best position to compute this specific legalistic number. The focus of this study in on program completion and specifically, identifying factors for predicting program non-completion. For this report, "non-completion" is defined as the rate at which adult offenders exit the programs for any reason other than successful completion.

History

Montana Code Annotated 45-9-102 indicates that for offenders convicted of a second or subsequent offense of criminal possession of methamphetamine, "the department of corrections may place the person in a residential methamphetamine treatment program operated or approved by the department of corrections…." These approved programs were established and in September of 2007, the Montana Department of Corrections (DOC), in collaboration with BACS and CCCS, contracted with Dr. Conley of Research & Survey Consulting (RSC) for program evaluation outcome research to assess the efficacy of Nexus and Elkhorn.

This third report on these programs combined with the previous work fulfills the goals set forth in the legislature's original request for treatment proposals that "the contractor shall provide both quantitative and qualitative measures of the program's performance by generate(ing) management reports that accurately track these measures."

Methods

Program evaluation methods utilizing secondary analysis of file data as well as survey research were used for this study. The primary strategy was for program staff to collect data from offender records and files. No information was sought which would not normally be in a client record; this was not experimental research and there were no interventions devised for the study. Information concerning variables in offenders' lives is stored electronically and in paper form at both programs and data from these sources was selected for study purposes. The data ultimately provided to RSC by the Elkhorn program was in the form of paper client surveys, which were then hand-entered into Statistical Package for the Social Sciences (SPSS), a research software program. The Nexus program generated and provided additional variables beyond what was

initially requested. Key variables concerning offender movement were provided by Mark Johnson of DOC as Excel spreadsheets which were then converted into the main SPSS file. All data was rendered compatible through extensive re-coding and data reconciliation processes. A normal process of re-coding, labeling and transforming the data was necessary to render it amenable to statistical analysis. Ultimately this yielded an information-rich and useful data set. Results are presented as percentages.

For this third report the data set was split, separating the information from Nexus and Elkhorn. Though many variables are held in common it proved more useful and informative to organize and analyze the programs separately, though results are still presented concurrently in a single report. Statistical models analyzed the data for frequency distributions of all information; predictive models were generated to identify risk factors predicting program non-completion, prerelease center non-completion and offender return rates.

Statistical Methods

Analysis of data employed several statistical methods. Initially, simple frequencies were used to examine the variables and generate a description of the population. Preliminary correlations and cross-tabulations explored potential significant relationships between both individual and grouped variables. For this report, the term "significant" is used throughout to indicate that statistical testing established (or failed to establish) a relationship or association between variables which, according to the mathematical laws of probability, is not due to mere chance. Following initial examination, both univariate and multivariate methods were employed. Univariate statistical methods examine the relationship between two variables. For example, this method can address the question: To what degree is being referred from MSP, MASC or START associated with program completion? In this case, we are examining a simple association between one predictor variable (i.e., MSP/not MSP) and one outcome variable (i.e., completion/non-completion). This process was also used as a building block and predecessor to the multivariate methods.

The two univariate statistics used in this study were chi-square analysis and t-tests. Chi-square analysis is used when exploring relationships or differences between categorical variables, that is, variables that capture information within categories, such as facility type, the presence or absence of a diagnosis, and the use or non-use of a particular drug. T-tests are used to examine differences in the mean of a continuous variable, such as days in placement, age or number of prior intakes, in relation to the grouping variable. With a t-test, the mean of the continuous variable (i.e., days in placement) is compared for two groups of offenders (i.e., mentally ill / not mentally ill) in order to see if there is a significant difference. If there is a difference, then the continuous variable is considered a good candidate for use in a multivariate predictor model. In other words, if there is a significant difference in the average number of days in program between mentally ill/not mentally ill, then the variable is a good potential candidate for use in the more complex, multivariate predictor model. The results of univariate tests are reported for each variable in the study where comparison of groups is appropriate.

A single multivariate statistical method was used to build predictor models for this study: binary logistic regression. In this analysis there is a single outcome variable, such as completion/non-completion. Several predictor variables are used simultaneously to determine the likelihood that

the outcome variable will occur. The procedure also determines if the relationship between specific predictor variables and the outcome variable is statistically significant or could have occurred by chance. If the probability of the relationship occurring by chance is less than five percent ($p<.05$) it is considered a non-chance finding. This allows the researchers to examine the effect of each variable while considering the effects of all other variables in the model. Variables that have both a univariate and multivariate effect on outcome are considered risk factors.

The following description of program participants includes variables used next in predictor models designed to address the questions: who succeeds and who fails at treatment? Why? The answers to these will inform discussion and recommendations for programmatic consideration.

Description of Program Participants with commentary on program completion

The following section includes analysis of all offenders admitted to the programs since the last report combined with all admitted since the start of the evaluation in 2007. This new analysis incorporates re-analysis of previous data.

   Referrals: 564 offenders admitted to the Nexus site were available for analysis. 32.7% of male offenders were referred from Montana State Prison; 30.4% Parole and Probation across the state, including those from county jails; 19.3% from MASC; 11.3% from START; 4.3% came from Crossroads correctional facility and the rest from 'other'. There is no statistically significant difference in program completion rates (facility or PRC) between groups of offenders referred from these different sources.

There were 303 female offenders admitted to the Elkhorn site included in analysis. 17.5% came from Montana Women's Prison; 34.3% from Passages; 3.0% were DOC commits; 21.7% came from Probation offices; 19.8% from 'other' sources such as courts, other DOC or county jail programs and federal commitments; and 3.6% came directly from the parole board. Again, there is no statistically significant difference in program completion rates (facility or PRC) between groups of offenders referred from these different sources.

   Prison time, lifetime felonies, misdemeanors and arrests: 76.4% of men and 98.6% of women spent some of their lifetime in prison prior to Nexus or Elkhorn; of these, the average time served in prison was 62 months for men and 45 months for women. The average number of lifetime felony convictions for male offenders is 4.66; misdemeanor convictions 15.71; and arrests 19.74. For female offenders, the average number of lifetime felony convictions, misdemeanor convictions and arrests is 3.5, 8.6 and 12.0 respectively; this has remained essentially unchanged since the start of the programs. These values all show a statistically significant difference ($p<.05$) between men and women, with men more criminally involved at the arrest and conviction levels. For men, the average prison time for Nexus non-completers was significantly longer than for completers (75.4 vs. 60.63 months). For both groups there were no other differences on these variables for completers/non-completers with either the treatment or PRC. This has remained significantly unchanged across years.

   Age and Ethnicity: The average age of male offenders is 34.84, but 50% are under 34 years old. The average age of female offenders is 35.72, and again 50% are younger than that. With

regards to age, for both Elkhorn and Nexus, younger participants are significantly less likely to complete both the treatment and PRC part of the programs. 74.5% of Nexus offenders are white, 19.9% are Native American/American Indian, 3.0% are Hispanic from Mexican descent, 1.6% are Black and .9% identified as other. 61.1% of Elkhorn offenders are white, 33.3% are Native American/American Indian, 2.3% are Hispanic of Mexican descent, 0.3% are Hispanic of Puerto-Rican descent, 1.3% are Black and the remainder are 'other.' The age and ethnicity varies a bit across years for both programs but has not significantly changed from any one year to the others. The proportion of Native American /American Indian women (33.3%) is significantly greater than men (19.9%).

> *…younger participants are significantly less likely to complete both the treatment and PRC part of the programs.*

Program completion/non completion at both the treatment facility and PRC level was cross tabulated with a variable of 'Native American/other' and subject to a chi-square test of difference; there is no difference in completion rate for these and other ethnic groups.

Education level: With regard to education, 49.6% of all Nexus residents hold a GED certificate, 17.0% are high school graduates, 6.9% have "Technical College" level education, 2.3% have an associate's degree, 1.1% have a master's, bachelor's or Ph.D. and 1.7% have either vocational training, a tech degree or a certificate. 8.7% of all male offenders reported no academic achievement; some cases had missing data. Of the Elkhorn offenders, 39.3% have reportedly obtained a GED, 17.6% have a high school diploma; 9.8% report some high school but not graduation or GED; 7.5 % record no education at all; 24.0% have some higher education – associate's, technical school, bachelor's or other. Education level was unknown for 1.8%. Educational level was subject to extensive coding, re-coding and exploratory statistical analysis; as documented in this data set it is not significantly associated with program completion/non-completion.

Marital status: 54.1% of Nexus offenders have never been married, 8.3% are divorced, 18.3% are married, and 17.4% common law married or cohabitating with a small percent reporting widowed or separated. This varies significantly by year of admission with no apparent pattern.

> *71.5% of offenders at the Nexus treatment facility are fathers … 86.4% of the female offenders at the Elkhorn facility are mothers.*

34.1% of Elkhorn residents are divorced, 19.3% are married, 22.3% have never been married, 17.3% are married by common law statute or were cohabitating, another 5.3% are separated, and the remaining 1.7% are engaged, single or 'other.' Marital status is not significantly associated with program completion/non-completion.

Children: 71.5% of offenders at the Nexus treatment facility are fathers having an average of 2.64 children. Of the Nexus parents, 77.3% have between one and three children, and 22.7% have 4 or more. 46% of those with children reported they were living with them at the time of their arrest. 86.4% of the female offenders at the Elkhorn facility are mothers. On average, they have 2.44 children. Of those with children, 73.2% have between one and three children, 24.9% have between four and six children, and 3.8% have seven children or eight children. This has not changed significantly over the life of the programs. For both Elkhorn and

Nexus, being a parent and the number of children are not significantly associated with program or PRC completion/non-completion.

Domestic violence, child abuse and neglect: 50.8% of offenders at Elkhorn report being victims of domestic violence and 28.0% have stayed in a domestic violence shelter. 38.0% of men from Nexus were physically abused or neglected as a child and 17.9% indicate that they were sexually abused as a child. Of these, only 12.4% of men were placed in the custody of Child Protective Services (CPS) or Department of Child and Family Services (DCFS). 14.0% of men and 20.4% of women spent time in foster care as a child. Men who reported being sexually abused as a child (a traumatic experience) were significantly less likely to complete Nexus.

56.7% of women from the Elkhorn program report a history of childhood abuse or neglect; they were no more or less likely to complete Elkhorn or the PRC. 22.1% of all women were in DCFS custody as a child at some point. No sensitive information specifically concerning sexual abuse history was gathered from the women for this study, though anecdotal evidence suggests that the percentage of women sexually abused as children is higher than for men. Of those women reporting abuse specifically, only 33.1% indicate having been in CPS or DCFS custody. Overall, women are more likely than men to have been placed in the custody of CPS or DCFS at some point as a child.

Additional family variables: The additional client information proffered by Nexus proved to be very informative. For example, 30.6% of male offenders report having a diagnosis of ADHD as a child with 44.9% of those who did were reportedly medicated for it. This proved to be a statistically significant predictor of program non-completion of the Nexus stay, though that did not carry over to the PRCs; this finding was consistent across years. 40.7% of Nexus offenders have substance-abusing mothers and 58.7% report having a substance-abusing father. 16% of their fathers and 5.6% of their mothers are reportedly incarcerated. 7.3% report that their mother has been convicted of a drug-related crime and 12.8% report that their father has been convicted of a drug-related crime. Additionally, 24.3% have siblings who are also in the Montana Criminal Justice System. These variables were not associated with program outcome.

Elkhorn Mental Health

Nexus Mental Health
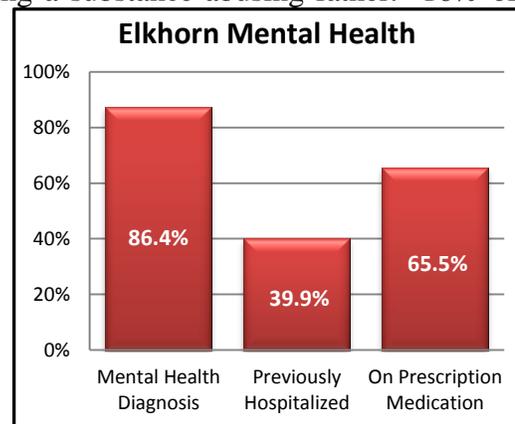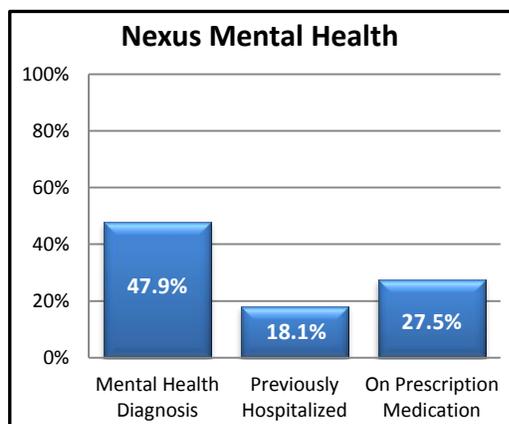
Mental Illness:
On average, 47.9% of the Nexus offenders, report having a mental health diagnosis; this does not vary significantly across the 6 years of the study. 18.1% have been previously hospitalized or placed in a mental health facility, and 27.5% are taking prescription psychiatric medication. Of the Elkhorn offenders, 86.4% have a mental health diagnosis, while 39.9% report previous hospitalization or placement in a mental health facility and 65.5% are taking prescription medication. Scores on the Kessler

screening instrument indicate that over 39.3% of the Nexus and 51.5% of the Elkhorn populations screen positive for mental distress associated with mental illness. This prevalence rate of mental illness is not significantly different than in the first two studies indicating that the phenomenon is consistent in this population. These results indicate that the client populations of both programs are most accurately described as co-occurring disordered.   Mental illness variables are consistently significantly predictive of program and PRC non-completion.

Employment: At the time of incarceration, 52.2% of all Nexus offenders were reportedly employed full-time, 8.9% were employed part-time, 34.98% were unemployed, 3.92% were on disability, and the remaining were not in the workforce. The percentage of offenders who were employed and unemployed varied significantly over the 6 years studied, likely reflecting the general economy. Also at the time of incarceration, 31.2% of male offenders reported an annual income level under $10,000, 33.3% made $10,001-$25,000 annually, 19.0% reported an annual income of $25,001-$40,000 and 6.2% made $40,001-$75,000 annually. One respondent claimed an annual income over $75,001 at time of incarceration and income was unknown for the rest.

> *Pre-incarceration employment was not a significant predictor of program completion*

> *88.2% of all Nexus offenders report one or more illegal sources of income*

Income information was not gathered on the female offenders, but 76.0% were reportedly unemployed or not in the workforce at the time of incarceration − many came from another DOC program or county jail. Pre-incarceration employment was not a significant predictor of program completion.

Illegal income: 88.2% of all Nexus offenders report one or more illegal sources of income with 70.1% reporting previously selling illegal drugs as an income source. Other illegal income sources included drug manufacture, selling prescription drugs, stealing from their employers and stealing from friends and family. 51.4% claim theft of property or burglary. Other reported illegal sources of income include credit card fraud, shoplifting, using women to make money, and "selling myself and others." This is reflected above where the offenders had an average of 4.66 lifetime felonies and 15.71 misdemeanors.

Year	Program	Meth	Alcohol	Marijuana	All Opioid	All Others
1	Nexus	55%	17%	18%	05%	06%
2	Nexus	37%	18%	23%	15%	07%
2	Elkhorn	37%	18%	15%	15%	15%
3	Nexus	38%	18%	24%	12%	08%
3	Elkhorn	37%	18%	11%	30%	04%
4	Nexus	44%	15%	13%	13%	15%
4	Elkhorn	28%	25%	09%	38%	00%
5	Nexus	28%	21%	15%	15%	21%
5	Elkhorn	28%	26%	09%	37%	00%

Table 1

Drugs of choice: Table 1 indicates offender-reported 'first drug of choice' for each year the information was available from the programs; year one data collection was incomplete for the Elkhorn program as evaluation measures were being implemented. The percent indicating Methamphetamines was highest for the early years of both programs but for the men it is exactly half now of what it was in year one. Opiates have tripled from 5% to 15% for men currently and are predicted to keep rising. Alcohol and marijuana have remained fairly consistent. For women, meth use is also down and opiate users have more than doubled from

15% early in the program to 37% currently. This category includes heroin and prescription opioids. Interestingly, female offenders report using 'opioids first' at more than twice the level of men, mostly as prescription pill abuse. Analysis of second and third drugs of choice proved less informative, though alcohol and marijuana were consistently the top second and third drugs used. Particular drug used was not significantly associated with likelihood of program or PRC completion though in some analysis opioid users appeared to pose completion challenges.

> *For women … opiate users have more than doubled from 15% early in the program to 38% currently.*

Predicting non-completion of Nexus, Elkhorn and the Prerelease centers

This section of the report addresses the critical concern: who completes, who doesn't, and why? Over a 5 year period, 79.5% of all admissions to Nexus and 86.1% of all admitted to Elkhorn completed their 9 month stay as sentenced. The average length of stay for Elkhorn program non-completers is 121 days – almost exactly 4 months. For men who do not complete the program, average stay is 110 days.

Program completion by year for each program					
	1	2	3	4	5
Nexus	75%	78%	85%	87%	73%
Elkhorn	90%	92%	90%	81%	78%

Table 2

This section of the report further explores what drives non-completion rates and what predicts success or failure in both treatment facility and prerelease center programs (PRC). As noted in the executive summary, program and PRC completion rates vary by admission cohort (year). This is because admission and discharge are an ongoing daily process and the use of calendar year cut-points is arbitrary. For example, we could look at completion rates by month of year or quarters. For Nexus, annual participant completion rates range from a low of 73.4% in year 5 to a high of 87.0% in year 4. Elkhorn ranges from 78.2% completion rate for year 5 to 91.7% in year 2 (See table 2). From a statistical point of view some single years for each program have different completion rates from what would be expected with normal variation. The same is true for the prerelease part of the sentence (see table 3). If we examined an alternative set of time periods (say fiscal years or 6 month periods) the percent of completers for each time period would likely look different.

When considering the diverse background characteristics of participants (gender, average number of arrests, felonies, prison time, abuse history, etc.) in each the Nexus and Elkhorn programs, it is reasonable that such yearly and overall variation in completion rates across programs would be observed. For example, men have a more substantial criminal background (arrests, felony, and misdemeanor conviction) while women exhibit more indicators of mental illness (medications, hospital stays). This variation in program and PRC completion rates across programs and years is expected to continue fluctuating.

Pre-release enter Completion by year for each program					
	1	2	3	4	5
Nexus	84%	79%	58%	67%	82%
Elkhorn	91%	87%	65%	53%	54%

Table 3

For those who complete the Elkhorn and Nexus programs, PRC completion rates are remarkably similar at 72.1% for women and 72.7% for men. Despite significant variation from year to year, for this study, all non-completers will also be examined collectively across years.

For Nexus offenders who complete Nexus and go on to a PRC, the completion rate also varies across centers. It is very important to note that statistically, despite apparent variation, no single offender is any more likely to complete at one PRC than any other. Moreover, the data gathered here only indicates which center the offender was referred to when they left the treatment program – no data was gathered from the PRCs themselves on the completion rate of their sub-populations of Nexus and Elkhorn referrals. This would make a good validity check.

For Elkhorn offenders who complete Elkhorn and go on to a PRC completion rate varies across centers as well. It is again notable that for women, no single offender is any more likely to complete at one PRC than any other.

At Risk

The Table 4 (page 14) lists risk factors for non-completion on the left axis and the associated programs across the top. The following dialog will be understood when looking simultaneously at the table. Risk factors are those variables that are significantly associated with failing some or both parts of the program, the PRC or either, and include age, number of lifetime felonies, having a mental health diagnosis (compared to those with no mental health diagnosis), being on psychiatric medications (compared to those with no psychiatric medications), average number of months spent in prison prior to the program, having a diagnosis of ADHD (compared to those with no diagnosis of ADHD), and being referred from START (compared to those referred from all other sources). Many more variables were used to try to predict program completion: number of lifetime arrest and misdemeanor convictions, first drug of choice, where the offender was referred from (prison, START, Parole and Probation officer, etc.) married or other, having children or not, whether the offender had a history of physical and/or sexual abuse, race, etc. Using binary logistic regression as a statistical prediction model, all possible predictor variables were entered together and repeated iterations removed those that were not predicting. Table 4 represents what remains.

Non-completion for Nexus only

Having a mental health diagnosis, being on psychiatric medication, and/or having ADHD as part of childhood history place Nexus participants at risk for failure. For example, 31.8% of those on medication fail the program compared to 16.6% who are nor on medication (table 4, second column). Moreover, previous studies had indicated that younger offenders were at higher risk to fail, this continues to be the case, though not significantly for Nexus alone when data is included from all years and the variables are entered into the model with those in the table. That only three variables should prove predictive speaks to the complexity of the offender population and the myriad number of characteristics that go into successful completion. The small number of significant predictors for Nexus completion/non-completion discovered here set the trend for what would follow in additional analysis. This is a very conservative

That only three variables should prove predictive speaks to the complexity of the offender population…

method of detecting predictors but those that were identified are undeniably associated with the outcome. This is addressed further in the discussion section.

Non-completion of Prerelease center following Nexus

Using binary logistic regression as a statistical prediction model, certain variables together significantly predict PRC non-completion following Nexus and must be considered risk factors: age, number of lifetime felonies (in both programs having more felonies is associated with completing PRC), and being initially referred to Nexus from START (prior to going to the PRC). It appears that START referrals are less likely to complete than those from MSP, MASC, etc.

> *No single offender is any more likely to complete at one PRC than any other.*

Nexus and prerelease center combined: completion and non-completion

Those who failed to complete either Nexus or the prerelease center were younger, had spent less past time in prison, and/or were on psychiatric medications.

Non-Completion of Elkhorn

Only two variables together significantly predict program non-completion for Elkhorn and must be considered risk factors: younger age, and more lifetime felonies.

Non-Completion of Prerelease center following Elkhorn

Certain variables together significantly predict program non-completion: being younger, having less felonies, and being on psychiatric medication.

Elkhorn and prerelease center combined: completion and non-completion

Those who failed to complete either Elkhorn or the prerelease center were significantly younger and or on psychiatric medication. In fact, the younger clients on medication are pulling down the whole rate of completion. Chart 4 indicates that if those on medications were excluded from the analysis the overall completion rate for Elkhorn and PRC would be 71%, though clearly, co-occurring diagnosed offenders are the rule, not the exception.

	Nexus		PRC		Nexus & PRC		Elkhorn		PRC		Elkhorn & PRC	
	Complete	Non-Complete	Complete	Non-Complete	Complete	Non-Complete	Complete	Non-Complete	Complete	Non-Complete	Complete	Non-Complete
Mean Age	*	*	35	33	35	32	36	32	37	34	37	33
Lifetime Felonies	*	*	5.1	4.2	*	*	*	*	3.9	2.7	3.9	3.1
Mental Health Diagnosis	73.0%	27.0%	*	*	*	*	*	*	*	*	*	*
No Mental Health Diagnosis	84.1%	15.9%	*	*	*	*	*	*	*	*	*	*
Psych. Medications	68.2%	31.8%	*	*	51.5%	48.5%	*	*	67.7%	32.3%	57.0%	43.0%
No Psych. Medications	83.4%	16.6%	*	*	66.0%	34.0%	*	*	85.1%	14.9%	71.3%	28.8%
Mean Months in Prison	*	*	57	68	57	72	44	50	*	*	*	*
ADHD	72.4%	27.6%	*	*	*	*	*	*	*	*	*	*
No ADHD	82.5%	17.5%	*	*	*	*	*	*	*	*	*	*
Referred START	*	*	58.6%	41.4%	*	*	*	*	*	*	*	*
Referred All Other	*	*	74.0%	26.0%	*	*	*	*	*	*	*	*

Table 4

*Not a significant predictor

Longitudinally tracking completers/non-completers post-program

What becomes of them? For Nexus, all offenders who did not complete their Nexus facility stay were initially sent to the Sanction, Treatment, Assessment, Revocation and Transition center (START), Montana State Prison, another DOC facility or program, or a county jail. For Elkhorn, offenders who did not complete their Elkhorn stay all were initially returned to Montana Women's Prison, a Passages program, or a county jail. Methodology for tracking offenders after their Elkhorn/Nexus and PRC stays is exceedingly complex and doing so accurately and with confidence in results proved to be beyond the capacity of this current study. Offenders who fail either the program or PRC most often are sent to prison, jail, START, Passages, or an alternative secure Community Corrections program. Some actually eventually return to the program. Most completers either continue on probation/parole, are on conditional release, have their sentence discharged or relocate. Determining who re-enters DOC custody at specific points in time after the program, for what reason, where and why they are placed (new crime, revocation etc.) is a study best conducted internally at the DOC by a statistician with full unlimited access to the Offender Management Information System. For example, to determine recidivism as defined by DOC, a subset of offenders referred directly from prison would have to be tracked through every program they attend (in-state and elsewhere) and monitored for another admission to prison at any point. Simply answering the question 'are they in prison now' does not suffice. Short of this, in order to complete the most efficient long term follow up of offenders, the programs themselves would need at least one administrator with direct access to OMIS.

> *In order to complete the most efficient follow up of offenders the programs themselves would need at least one administrator with direct access to OMIS.*

Discussion and Recommendations

The initial disparity in completion rates between Elkhorn/Nexus dissipates through PRC program stay; both programs (with PRC follow up) are completing essentially 60% of those they admit. The likelihood of any offender completing the program varies significantly and predictably by specific offender characteristics. Both programs face ongoing challenges in providing a successful and complete treatment experience for offenders with mental health issues, especially if they are younger and/or on medication. In general, it is the older offender with more felony convictions and more prison time behind them that complete.

Co-occurring psychiatric illness and medication issues should be more specifically targeted by treatment programming with a goal of eliminating the persistent disparity in completion rates. In many cases, mental illness is under-reported and under-diagnosed prior to treatment referral and only manifests itself more obviously in the residential treatment environment where it compromises the offender's ability to comply with program participation. For those on medication, being on the *right* medication and reliably complying with the prescription is key.

It is reasonable to assume that in addition to those identified in this evaluation other factors will continue to vary across this diverse and complex population, not all of which will have a quantifiable impact on completion. In studying any treatment population there are always intangibles and the best source of information for further exploring completion rates and return rates is the subjective knowledge base of the clinical directors and frontline practitioners of the treatment programs themselves. Future studies should minimize effort at quantification and instead focus primarily on qualitative narrative interviewing and analysis of program staff and representative groups of offenders as an evaluation methodology.

Setting up a specific methodology and strategy for collecting research-level program evaluation data reflects a contemporary and advanced professional corrections management strategy. At this point in time the programs and DOC are able track this group of offenders and identify characteristics which place them at significant risk of program/PRC non-completion. The ultimate goal of this study was to establish efficient data collection and reporting methods which would enable improvement of program effectiveness and this has been met.

For the Nexus and Elkhorn programs the data collection systems remain in place. Ensuring accurate data collection beyond program exit is crucial for the development of fiscally and politically satisfactory answers to key questions. De-emphasizing quantitative evaluation methodology and moving in the direction of ground level narrative informed outcome studies will prove most informative going forward.

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