



# Criminal Justice Initiatives (CJI)

## Second Year Outcomes

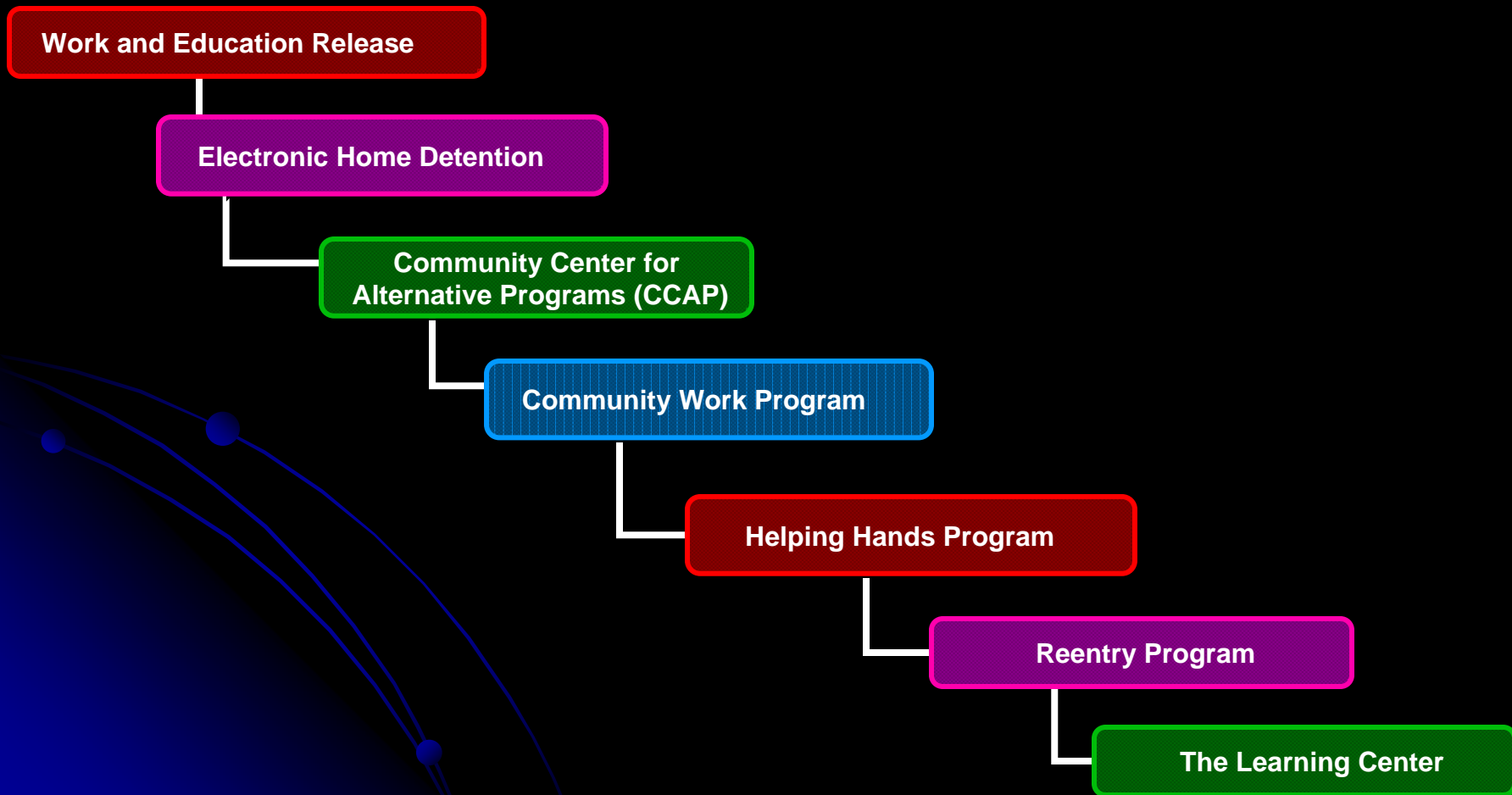
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# What is the CJI?

- \$1.8 million initially allocated by King County in 2003 to CJI (\$0 to Community Corrections)
- \$4.5 million in 2007 (\$500K for Community Corrections programs)
- Goal of reducing jail adult population and recidivism
- Priority on repeat jail users and those with substance abuse and/or mental health problems who are not already in services

# King County Community Corrections Division Alternatives & Programs



# CJI Programs

- Co-occurring disorder (COD) integrated treatment (referred from MH and Drug courts)
- **Housing vouchers** (referred from MH and Drug courts, and CCAP)
- Mental health (MH) vouchers (referred from jail)
- Methadone vouchers (referred from jail)
- **Chemical dependency (CD) treatment at CCAP**

# Participants in CJJ Programs

	Year 1	Year 2	TOTAL
COD treatment	85	79	164
<b>Housing voucher</b>	<b>189</b>	<b>159</b>	<b>348</b>
Mental health voucher	40	37	77
Methadone voucher	264	46	310
<b>CCAP – CD treatment</b>	<b>87</b>	<b>136</b>	<b>223</b>
<b>TOTAL</b>	<b>665</b>	<b>457</b>	<b>1,122</b>

# Participant Characteristics

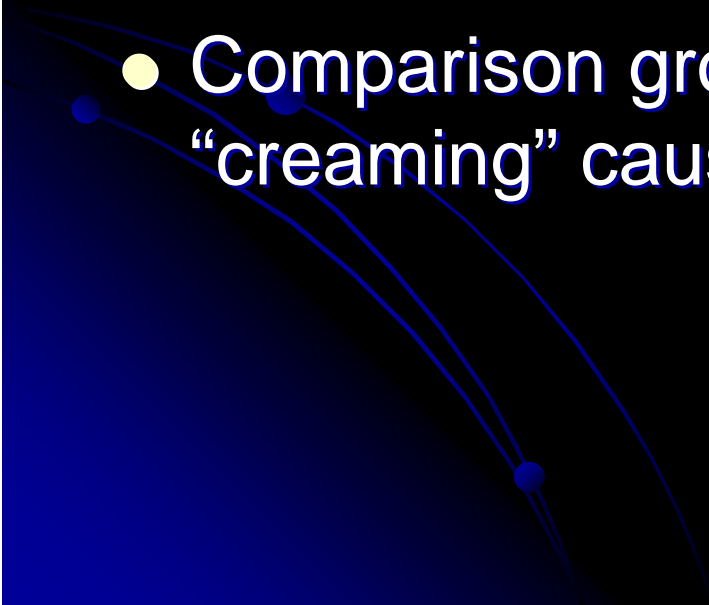
## CJI Programs

### Years 1 and 2

	Women*	Non-White*	Mean Age	Homeless	Employed
COD treatment	37%	46%	36.1	59%	2%
<b>Housing voucher</b>	<b>29%</b>	<b>45%</b>	<b>39.4</b>	<b>100%</b>	<b>NA</b>
Mental health voucher	32%	45%	37.7	51%	6%
Methadone voucher	31%	35%	41.7	54%	6%
<b>CCAP – CD treatment</b>	<b>29%</b>	<b>43%</b>	<b>34.4</b>	<b>25%</b>	<b>12%</b>

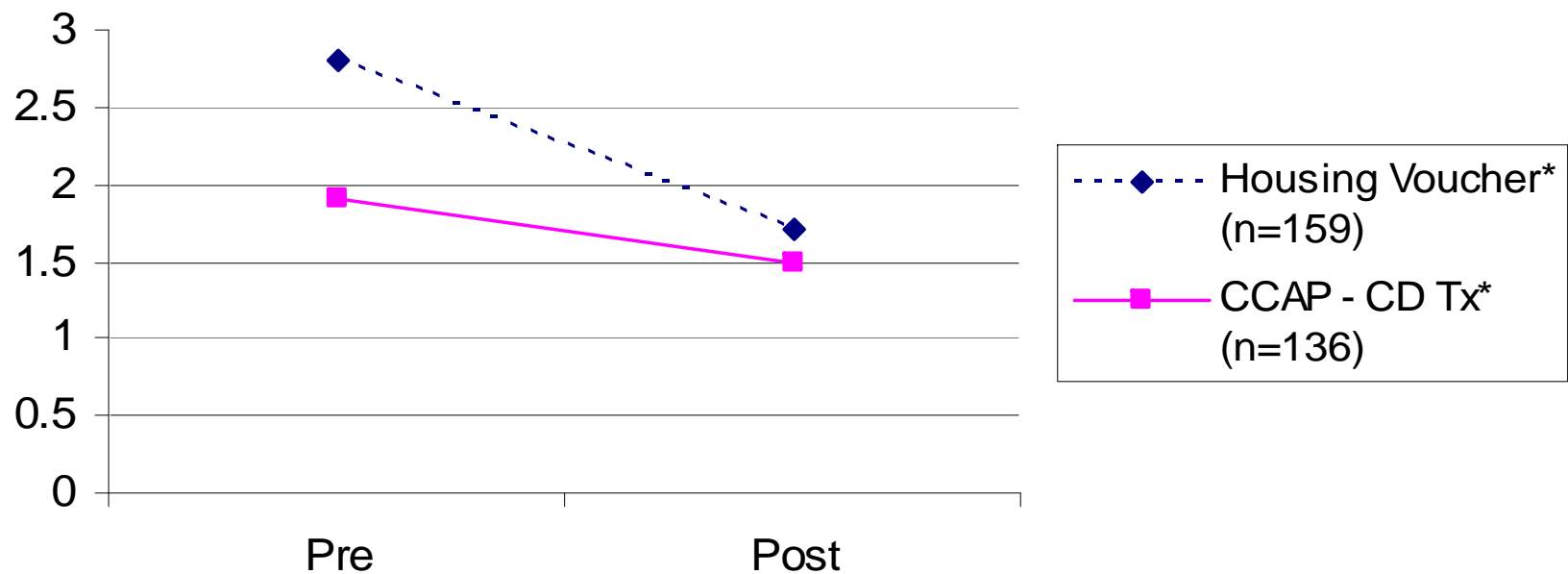
\*Jail population ~12% women and 41% non-white

# Program Evaluation Design CJI Programs

- Jail and clinical outcomes
  - Outcome analysis: One-year pre-“index” booking compared to one-year post-release from “index” booking (pre-post design)
  - Comparison groups analyzed – but reverse “creaming” caused non-comparability
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# Change in Jail Bookings Community Corrections Programs Second Year Cohorts

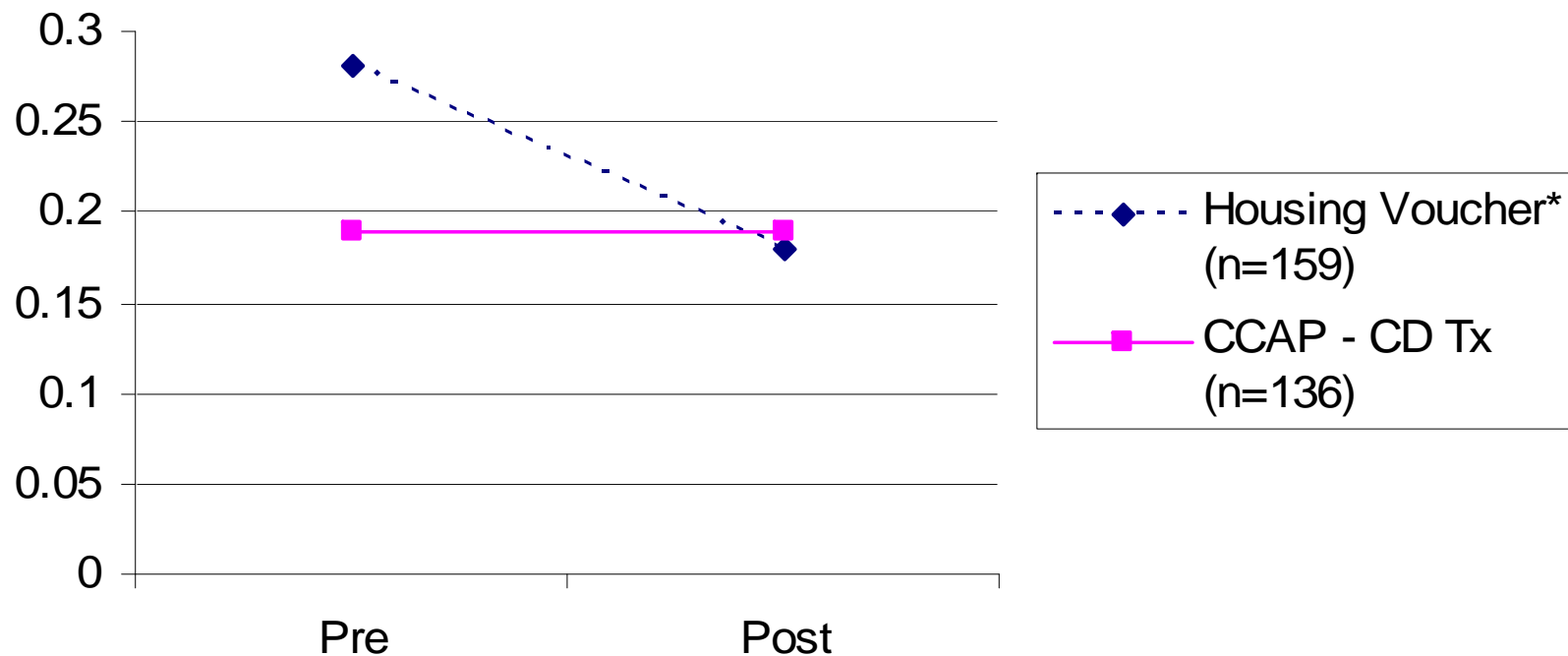
**Average Jail Bookings  
Housing Voucher and CCAP-CD Tx Programs**



\*Statistically significant

# Change in Jail Bookings/30 days "at-risk" Community Corrections Programs Second Year Cohorts

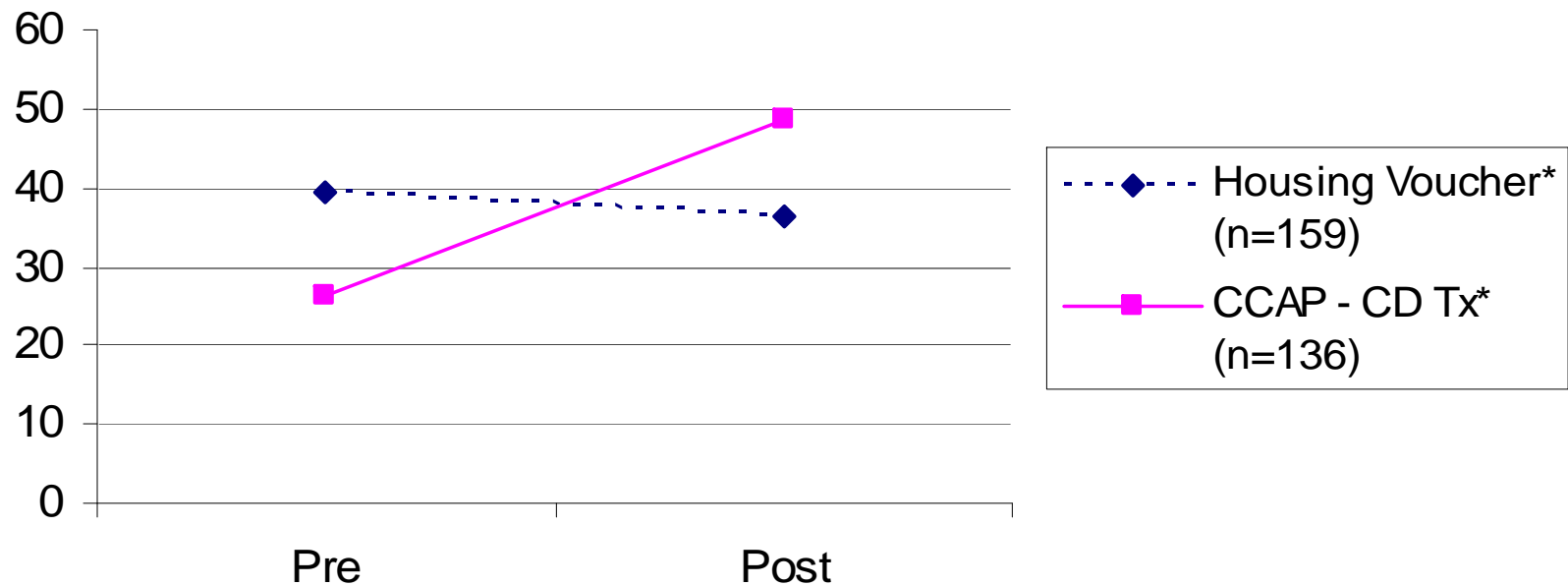
Average Jail Bookings per Month "at-risk"



\*Statistically significant

# Change in Jail Days Community Corrections Programs Second Year Cohorts

**Average Jail Days  
Housing Voucher and CCAP-CD Tx Programs**

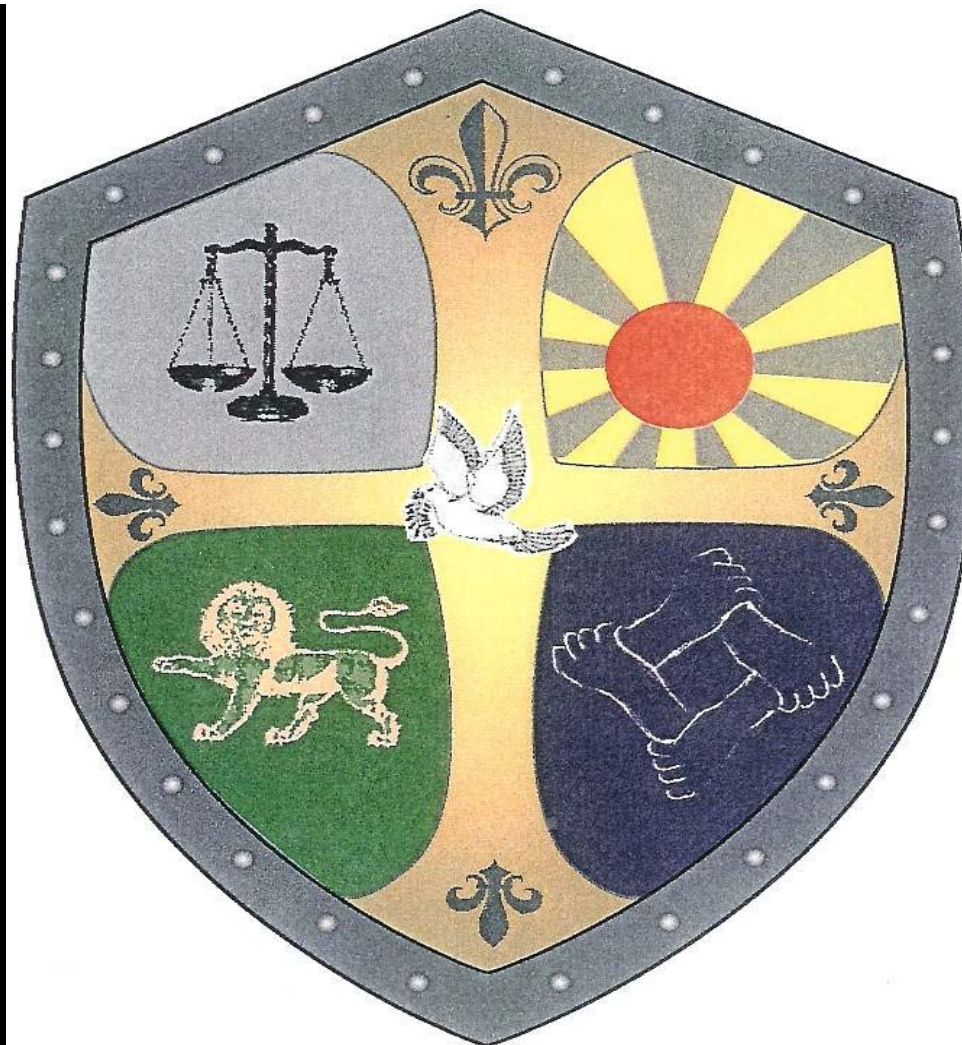


\*Statistically significant

# Participant-reported impacts

<b>“Agree” or “Strongly agree”</b> ~ 20% sample of each program	<b>Housing</b>	<b>CCAP CD Treatment</b>
<b>Deal more effectively with probs.</b>	71%	80%
<b>Not using drugs as much</b>	79%	75%
<b>Not craving drugs as much</b>	75%	75%
<b>Do more productive things</b>	80%	65%
<b>Symptoms not bothering as much</b>	69%	n/a
<b>Physical health improved</b>	64%	72%
<b>Better able to control life</b>	74%	60%
<b>Do better in social situations</b>	68%	75%
<b>Housing situation improved</b>	80%	64%
<b>Better able to deal with crises</b>	70%	45%
<b>Getting along better with family</b>	64%	37%
<b>Do better in school and/or work</b>	65%	20%

CCAP  
Evidence-  
based  
Group  
Curricula



*Providing  
treatment  
within a  
therapeutic  
class  
structure*

Team CCAP  
Striving to Make Outstanding  
CHOICES

# CCAP Evidence-based Group Curricula – 2007

- Evidenced-based curricula – each track and each group has documented research that guides the group structure and materials
- TRACKS
  - Basic Needs Track
  - Domestic Violence Track
  - Child and Family Track
  - Psychosocial and Psychoeducational Groups
  - Pre-Treatment Track
  - Intensive Outpatient Substance Abuse Treatment
  - Outpatient Substance Abuse Treatment
  - Co-Occurring Disorders Treatment/Support

# Screening and Assessment

- **GAIN-SS**

- Provides a very accurate screening for:
  - substance abuse/addiction
  - mental health issues and Axis 1 and Axis 2 indicators

- **GAIN-I**

- Provides a complete diagnostic assessment for:
  - substance abuse/addiction
  - mental illness and mental health issues
  - health risk behaviors
  - ADD/ADHD screen
  - And more than 20 other subscales that assess issues impacting clients ability to enter recovery

# Basic Needs Track

- Focus: Linking individuals with appropriate resources
  - Groups – Basic Needs, Social Support, Self Esteem and Transitions
  - One-on-One services from mental health if need is indicated
  - Work to establish basic benefits package for medical, substance abuse treatment, mental health treatment, food, and housing
  - Prepares the individual to succeed in treatment by stabilizing their living situation

# Domestic Violence Track

- Track is for offenders who have domestic violence issues either as an offender or victim
  - Groups – Managing Stress, Women’s Support, Men and Women’s Domestic Violence, Conflict Resolution, Communication Skills
  - Groups help clients understand and cope with triggers associated with anger, substance use and violence
  - Track prepares clients for and augments treatment tracks

# Child and Family Track

- Track is for clients with families or family of origin trauma
  - Groups – Ties that Bind, Grief and Loss, Seeking Safety, and Family Relations
  - Groups help clients process how their past impacts their current situation and provides support to prevent further trauma and generational family ills
  - Track helps clients learn the family support can be a part of their recovery and how family is related to their way of thinking and living

# Psychosocial and Psychoeducational Groups

- Understanding your Actions (Behavior Analysis)
- Mental Wellness
- Creative Growth (Art Therapy)
- Self-Awareness and Mindfulness (Dialectical Behavioral Therapy)
- Goal and Personal Development
- Health and Wellness
- Leadership Skills
- Lifestyle Changes (Stages of Change)
- Self Esteem
- Social Support

# Treatment

- Pre-treatment and interim services – preparation and motivation for treatment entry and provides linkages for higher levels of care if needed
- Intensive Outpatient Chemical Dependency Treatment – three 3-hour groups per week plus individual treatment sessions as needed
- Outpatient Chemical Dependency Treatment – one hour treatment group per week plus individual treatment sessions as needed
- Co-Occurring Disorder Treatment – fully integrated treatment program
- Auricular acupuncture – January 2008



Thank You!

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