Adolescent Treatment in Therapeutic Communities: National Data on Availability

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Therapeutic Communities for Substance Abuse Treatment

• Studies have demonstrated the effectiveness of TCs in delivering substance abuse treatment
  - In adults
  - In adolescents

• There are few national data that describe the characteristics of TCs in the US
The “Classic” TC Model

- Long-term residential program
- Primarily serving adult clients
- “Community as Method” approach (DeLeon, 2000), with a focus on the “whole person”
- Measurable elements of culture and structure in the Survey of Essential Elements Questionnaire (DeLeon & Melnick, 1996)
Element 1: TC Perspective

- Normative dimensions of TC culture
- Views on addiction
- Views on “right living” including values such as the work ethic, personal responsibility, and responsibility towards others
- Views on roles of counselors as role models of these values
Element 2: Client Hierarchy

- TCs are known for organizing clients into a hierarchy
- Based on time in treatment and clinical progress
- More senior clients take on greater responsibilities within the TC, such as facilitating groups and acting as role models
Element 3: Therapeutic Role of Clients

- Given the emphasis on “community as method,” TCs are known for clients playing significant therapeutic roles within the TC
- Confronting negative behavior & attitudes of others
- Helping others achieve goals
- Affirming progress of others
Element 4: Therapeutic Role of Work

• Work is viewed as having therapeutic importance in the process of recovery
• Vocational training
• Employment during later stages
• Sometimes these jobs are part of TC-owned businesses
Element 5: Aspects of the Program

- Three main stages of treatment: orientation/induction, primary treatment, and re-entry
- Frequent seminars about “right living” and the recovery process
- Meetings to address problems that arise within the TC
- Rituals and traditions to build a sense of community belonging

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Element 6: Discipline within the TC

- Rules of behavior with sanctions for violations
- Emphasis on discipline being an opportunity for learning
Modifications to the TC Model

• Literature suggests several changes:
  - Shorter lengths of stay
  - Rise of outpatient services in TC settings
  - Application of TC Model to new patient populations, e.g. adolescents

• Raises the question of whether and how the elements of the TC Model are being modified
Research Questions

• To what extent are TCs offering treatment services to adolescent clients?
• Are there significant differences TCs with adolescent programs and adult-only TCs in adherence to the six TC elements?
• Are these two types of TCs differentiated by varying reliance on certain types of referral sources?
Methods

• Nationally representative sample of 380 TCs
• Eligibility criteria:
  – Offer substance abuse treatment services
  – Community-based (excludes correctional and VHA facilities)
  – Staff and administrator self-identify the program as a therapeutic community
• Data collected via face-to-face interviews with administrators and/or clinical directors
• Participation rate of 86% among eligible TCs
• Complete data on all measures from 360 TCs
Measures

• Dependent variable: TC offers a treatment track for adolescents (1 = yes, 0 = no)
  - Logistic regression for analysis

• Mean scales drawn from 31 items of the SEEQ
  - TC perspective ($\alpha = .82$)
  - Client hierarchy ($\alpha = .85$)
  - Therapeutic roles of clients ($\alpha = .84$)
  - Work as therapy ($\alpha = .80$)
  - Aspects of program ($\alpha = .82$)
  - Discipline ($\alpha = .84$)
Measures (continued)

• Referral sources
  - % referrals via program alumni
  - % referrals via drug courts
  - % referrals via other aspects of legal system
  - % referrals via social service agencies

• Organizational Variables
  - Residential-only TC
  - Membership in Therapeutic Communities of America (TCA)
  - Accreditation by JCAHO or CARF
  - Size (number of counselors)
  - Age of the TC in years
# Descriptive Statistics: Basic Characteristics

<table>
<thead>
<tr>
<th>Category</th>
<th>% or Mean (S.D.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Offers Adolescent Track</td>
<td>24.44%</td>
</tr>
<tr>
<td>Residential-Only TC</td>
<td>53.06%</td>
</tr>
<tr>
<td>Membership in TCA</td>
<td>23.33%</td>
</tr>
<tr>
<td>Accreditation J CAHO/CARF</td>
<td>30.56%</td>
</tr>
<tr>
<td>Number of Counselors</td>
<td>11.68 (22.83)</td>
</tr>
<tr>
<td>TC Age in Years</td>
<td>20.29 (12.30)</td>
</tr>
</tbody>
</table>
## Descriptive Statistics: TC Elements

<table>
<thead>
<tr>
<th>TC Elements</th>
<th>Mean (S.D.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>TC Perspective</td>
<td>4.69 (.44)</td>
</tr>
<tr>
<td>Client Hierarchy</td>
<td>3.79 (1.35)</td>
</tr>
<tr>
<td>Therapeutic Roles of Clients</td>
<td>4.32 (.88)</td>
</tr>
<tr>
<td>Work as Therapy</td>
<td>3.76 (1.32)</td>
</tr>
<tr>
<td>Aspects of Program</td>
<td>4.38 (.92)</td>
</tr>
<tr>
<td>Discipline</td>
<td>4.66 (.73)</td>
</tr>
</tbody>
</table>
# Descriptive Statistics: Referral Sources

<table>
<thead>
<tr>
<th>Referral Source</th>
<th>Mean (S.D.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>% from program alumni</td>
<td>10.68 (14.29)</td>
</tr>
<tr>
<td>% from drug courts</td>
<td>16.51 (22.04)</td>
</tr>
<tr>
<td>% from other legal system</td>
<td>40.36 (31.27)</td>
</tr>
<tr>
<td>% from social service agencies</td>
<td>21.58 (23.75)</td>
</tr>
</tbody>
</table>
### Logistic Regression of Adolescent Tx: TC Elements

<table>
<thead>
<tr>
<th>TC Element</th>
<th>b (S.E.)</th>
<th>Odds Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>TC Perspective</td>
<td>.600 (.396)</td>
<td>---</td>
</tr>
<tr>
<td>Client Hierarchy</td>
<td>.243 (.154)</td>
<td>---</td>
</tr>
<tr>
<td>Therapeutic Role of Clients</td>
<td>-.441 (.217)*</td>
<td>.644</td>
</tr>
<tr>
<td>Work as Therapy</td>
<td>-.652 (.133)***</td>
<td>.521</td>
</tr>
<tr>
<td>Aspects of Program</td>
<td>.067 (.217)</td>
<td>---</td>
</tr>
<tr>
<td>Discipline</td>
<td>.196 (.272)</td>
<td>---</td>
</tr>
</tbody>
</table>

*p<.05, **p<.01, ***p<.001

Net of referral sources & control variables
TC Elements as Predictors of Adolescent Treatment

- **Work as Therapy**
  - Vocational training & emphasis on employability
  - Likely less immediately relevant for adolescents

- **Therapeutic Roles of Clients**
  - Confronting negative behaviors/attitudes, providing affirmations, helping other achieve goals
  - This therapeutic role may be less appropriate for the developmental stage of adolescence
### Logistic Regression of Adolescent Tx: Referral Sources

<table>
<thead>
<tr>
<th>Referral Source</th>
<th>b (S.E.)</th>
<th>Odds Ratio For S.D. Δ in X</th>
<th>(S.D. of X)</th>
</tr>
</thead>
<tbody>
<tr>
<td>% from program alumni</td>
<td>-.057 (.017)**</td>
<td>.442</td>
<td>(14.29)</td>
</tr>
<tr>
<td>% from drug courts</td>
<td>.009 (.006)</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>% from other legal system</td>
<td>.013 (.005)**</td>
<td>1.487</td>
<td>(31.27)</td>
</tr>
<tr>
<td>% social service agencies</td>
<td>.009 (.006)</td>
<td>---</td>
<td>---</td>
</tr>
</tbody>
</table>

†p<.10, *p<.05, **p<.01, ***p<.001

Net of TC elements & control variables
Logistic Regression of Adolescent Tx: Organizational Variables

<table>
<thead>
<tr>
<th></th>
<th>b (S.E.)</th>
<th>Odds Ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residential-Only Services</td>
<td>-1.037 (.308)**</td>
<td>.354</td>
</tr>
<tr>
<td>Membership in TCA</td>
<td>.729 (.330)*</td>
<td>2.073</td>
</tr>
<tr>
<td>Accreditation (J CAHO/CARF)</td>
<td>.901 (.306)**</td>
<td>2.461</td>
</tr>
<tr>
<td>TC Size (# counselors)</td>
<td>.008 (.006)</td>
<td>---</td>
</tr>
<tr>
<td>TC Age in years</td>
<td>-.008 (.012)</td>
<td>---</td>
</tr>
</tbody>
</table>

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Net of TC elements & referral sources
Summary

• About a quarter of TCs in a nationally representative sample offered a treatment track for adolescents

• Overall, there was strong adherence to the TC elements

• Evidence that TCs with adolescent programs have made some modifications to these elements
  – Less adherence to Therapeutic Roles of Clients
  – Less adherence to Work as Therapy

• No differences in TC perspective, Client Hierarchy, Aspects of Program, & Discipline
Summary (continued)

• Some differences in referral sources
  – Less reliance on alumni referrals
  – More reliance on legal system (but non-drug court) referrals

• TCs offering adolescent services were:
  – Less likely to only offer residential services
  – More likely to be in TCA
  – More likely to be accredited by JCAHO/CARF
Acknowledgements

- The research team is grateful for the support of the National Institute on Drug Abuse (R01-DA-14976).
- We also want to acknowledge the 380 TCs that participated in this on-going project.