



OVERVIEW OF SUBSTANCE ABUSE TREATMENT SERVICES: FISCAL YEAR 2005

**Maureen O'Keefe Leipold
Kasey R. Weber
June 2006**

COLORADO DEPARTMENT OF CORRECTIONS
OFFICE OF PLANNING AND ANALYSIS
2862 SOUTH CIRCLE DRIVE
COLORADO SPRINGS, CO 80906
www.doc.state.co.us

JOE ORTIZ
Executive Director

JOE STOMMEL
Chief of Rehabilitation Programs

SCOTT HROMAS
Research Manager

TABLE OF CONTENTS

Introduction	1
Standardized Treatment Delivery	1
Overview of Prison Based Services	4
Level 2: Drug Education and Increased Urinalysis	4
Level 3: Weekly Outpatient Therapy	5
Level 4: Intensive Outpatient Therapy	6
Level 5: Intensive Residential Treatment (IRT)	8
Level 6: Therapeutic Community (TC)	9
Other Programs	11
Overview of Community Based Services	14
Level 2: Drug Education and Increased Urinalyses	15
Level 3: Weekly Outpatient Therapy	17
Level 4: Intensive Outpatient Therapy	28
Level 5: Intensive Residential Treatment (IRT)	30
Level 6: Therapeutic Community (TC)	32
Evaluation of Offender Treatment Needs	34
Prevalence Rates	34
Substance Abuse Profile	35
Service Delivery	38
Appendix A	43

INTRODUCTION

Substance abuse is known to have a high occurrence rate among incarcerated populations. Colorado is no exception. The present study evaluates the needs of offenders and the availability of treatment services within the Colorado Department of Corrections (CDOC).

CDOC substance abuse services operate under the division of Alcohol and Drug Services where the mission is “To assess substance abusing offenders and provide them a continuum of interventions for ongoing self-change.” Available treatment services vary in duration and intensity; assessment information is used as a guide for making treatment placements.

Standardized Treatment Delivery

The delivery of substance abuse services within Colorado’s criminal justice system was dramatically changed with the passage of Colorado Revised Statute 16-11.5. This legislation mandated three important components for felons: (1) a standardized procedure for assessment of substance abuse including chemical testing, (2) a system of education and treatment programs for substance abusers, and (3) a system of punitive sanctions for offenders who test positive after the initial test. The CDOC, the State Judicial Department, the Division of Criminal Justice of the Department of Public Safety, and the Department of Public Health launched a cooperative effort to fulfill these legislative mandates.

The standardized offender assessment (SOA) is comprised of four instruments. The primary assessment includes the Level of Service Inventory – Revised (LSI-R; Andrews and Bonta, 1995), a recidivism risk measure, and the Simple Screening Instrument (SSI; Winters and Zenilman, 1994), a substance abuse screening measure. The Adult Substance Use Survey (ASUS; Wanberg, 1997) and the Substance Use History Matrix (SUHM; Bogue and Timken, 1993) are administered as the secondary assessment. All offenders need to be assessed on the primary assessment; only those identified with an alcohol or drug problem by the SSI require a secondary assessment.

In conjunction with the standardized offender assessment, a treatment system was formulated. The treatment system, consisting of seven categorical levels, is tied to the assessment battery. Scores on the standardized assessment drive placement into one of the treatment levels. The treatment system provides education and therapy services of varying intensity.

Level 1: No Treatment. Offenders assigned to the first level include those who require no substance abuse treatment. Level 1 individuals have no current clinical diagnosis of substance abuse or dependence.

Level 2: Drug Education and Increased Urinalyses. The second treatment level is prescribed for individuals with no clinical diagnosis of substance abuse or dependence and no withdrawal symptoms. Participants must be mentally, physically, and cognitively capable of participation. Offenders in this modality are generally motivated to participate in treatment and have a strong support system. Level 2 treatment is relatively unstructured in terms of content and program length of stay. However, these programs must incorporate urinalyses and substance abuse education that strives to increase awareness of the effects of drug and alcohol usage.

Level 3: Weekly Outpatient Therapy. Weekly outpatient treatment, level 3, is structured for individuals who may have a clinical diagnosis of substance abuse or dependence. Level 3 programs are designed for individuals who experience up to two of the following consequences of substance abuse: employment difficulties, legal difficulties, or damaged personal relationships. As well, individuals may be appropriate for weekly outpatient treatment if they completed a more intensive program and need continuing support. It is recommended that participants at this level are voluntary, motivated, and have positive support systems outside of treatment.

Level 4: Intensive Outpatient Therapy. Level 4, intensive outpatient treatment, is designed for individuals who require more structured therapy than is provided through weekly outpatient treatment. Individuals may be assigned to level 4 treatment if their histories indicate unsuccessful treatment attempts, prolonged intoxication or lengthy withdrawal, and serious behavioral changes (e.g., legal or family problems) due to substance abuse. Intensive outpatient programs are best suited to individuals who realize the seriousness of their substance abuse problems, but have negative or non-existent support systems and are a high risk for continued drug use. This level may be appropriate for individuals who have a dual diagnosis, present a risk to self or others, or have successfully completed an intensive residential program.

There is some difficulty in distinguishing level 4 from level 3. They differ primarily in intensity since no clear guidelines exist regarding content. The two levels can be distinguished from each other based on length of stay, sessions per weeks, hours per week, or total program hours. Level 4 programs are typically 4 to 6 weeks in program length, 3 to 7 sessions per week, 9 to 21 hours per week, or 36 to 126 total program hours. Level 4 treatment should be followed by level 3 treatment.

Level 5: Intensive Residential Treatment (IRT). Level 5 is an intensive residential program for individuals presenting with serious substance abuse problems. Intensive residential programs typically last 30 days, however, some programs may be as short as 14 days or as long as 45 days. The purpose of level 5 treatment is to provide a brief, intense treatment intervention. Level 5 treatment programs accommodate individuals experiencing acute intoxication or withdrawal symptoms (e.g., hallucinations, disorientation, delirium tremens). As well, they are structured to

accommodate persons requiring medical attention, particularly for disorders related to prolonged substance abuse. Individuals who are diagnosed with a chronic psychiatric disorder or present a danger to self or others are appropriate for placement in a level 5 program. Additionally, level 5 programs treat individuals who lack a positive support system, experience substantial denial, and exhibit inability to sustain independent functioning outside of a controlled environment.

Level 6: Therapeutic Community (TC). Level 6 programs, like level 5, are residential in nature but have greater lengths of stay and are more structured than the lower levels. Typically, TCs have a 6 to 12-month length of stay. Therapeutic communities are designed for individuals with extensive criminal histories, antisocial behavior, and multiple unsuccessful treatment attempts. Level 6 programs use confrontation techniques and place high levels of responsibility on the individual participants for their treatment.

Level 7: Assess for Psychopathy—No Treatment. The final level of treatment, level 7, characterizes individuals with the most serious substance abuse problems. Typically, individuals have lengthy criminal histories, no motivation, a negative attitude, and oftentimes a psychiatric disorder such as cognitive impairment. Due to the extreme severity of their psychological problems, individuals in this category are considered inappropriate for treatment.

A system of punitive sanctions for continued substance use comprises another mandate under C.R.S. 16-11.5. The system of sanctions is related to the SOA and takes the following factors into consideration: (1) level of criminal risk, (2) severity of substance abuse, (3) compliance in supervision, and (4) treatment participation and compliance. Recognizing that each agency must develop their own policies and procedures to respond to offender substance use, specific sanctions (e.g., SOA reassessment, increased supervision, loss of privileges) are suggested depending on the four factors.

OVERVIEW OF PRISON BASED SERVICES

Substance abuse treatment programs are offered at all CDOC facilities. These services are primarily delivered by contract service providers. Inmate population, administrators, mental health coordinators, and treatment providers influence the drug and alcohol programs available at each facility. However, one commonality across facilities is that treatment is generally offered on a group basis. Counselors may offer individual sessions to their group participants if the need is indicated.

This program guide describes substance abuse services provided by Alcohol and Drug Services in CDOC facilities. The programs are categorized by treatment level in order to emphasize placement of offenders into treatment programs as prescribed by the standardized assessment. Each treatment program is briefly described in this program guide. Information regarding successful completion criteria, treatment providers, and group schedules accompanies the program descriptions. The schedule of groups establishes the frequency with which groups meet. The group schedules offer additional information including the facilities that offer the groups, the capacity of each group, the meeting times, and the counselors' names. It should be noted that schedules frequently change; however, the present schedules provide a general framework.

Refer to Appendix A for a list of facility acronyms.

Contractor Acronyms are as follows:

ARP – Addiction Recovery Programs

ARTS – Addiction Research and Treatment Services

CCA – Correctional Corporation of America

DCCCA – DCCCA, Inc.

GRW – GRW Corporation

Mirror – Mirror, Inc.

MMH – Midwestern Mental Health

RMBH – Rocky Mountain Behavioral Health

Level 2: Drug Education and Increased Urinalysis

Choices. This program is designed for offenders assigned to the CCF Diversion Program and covers a span of 24 weeks. The initial segment explores the connection between thoughts, attitudes, beliefs and behaviors. The next component looks at the anatomy of the brain and discusses how different areas influence our thought process. Additionally the program inquires into which areas of the brain are affected by certain drugs and how drug use affects the cognition process. The closing

component of Choices concentrates on the present and how tomorrow can be improved with respect to the choices made today. The group also explores drugs in our culture and the extent they influence the choices people make. Successful completion requires 24 hours of treatment.

Facility	Capacity	Schedule	Counselor	Contractor
CCF	8	1:10 – 2:30 am M	Roy Rall Ellen McCoy	RMBH
CCF	8	1:10 – 2:30 am T	Roy Rall Ellen McCoy	RMBH
CCF	8	1:10 – 2:30 am W	Roy Rall Ellen McCoy	RMBH
CCF	8	1:10 – 2:30 am Th	Roy Rall Ellen McCoy	RMBH
CCF	8	1:10 – 2:30 am F	Roy Rall Ellen McCoy	RMBH

Level 3: Weekly Outpatient Therapy

Boot Camp Program. The Boot Camp Program is similar in design to the Comprehensive Treatment Program. However, this program varies in one significant aspect – all offenders assigned to the Boot Camp are required to attend, which means there are offenders in the group who are not substance abusers. The counselors adapt the addiction model for these offenders by focusing on criminality rather than substance abuse. Because of the large group size, this program is being offered as a level 3 treatment program. Successful completion requires 99 hours of treatment.

Facility	Capacity	Schedule	Counselor	Contractor
CCAP	41	7:30 – 9:00 am M–Th	Joy Sorrell	ARP
CCAP	41	9:30 – 11:00 am M–Th	Joy Sorrell	ARP
CCAP	41	2:00 – 3:30 pm M–Th	Joy Sorrell	ARP

Substance Abuse Education and Relapse Prevention. This program is offered to offenders identified as developmentally disabled by mental health at CTCF. It provides education on frequently abused substances including alcohol and the addictive process. During the relapse prevention portion of this group, offenders learn about relapse and examine their own relapses in the past. They also engage in relapse prevention planning and focus on techniques to prevent relapse. The “Brain Wise – 10 ways to stop and think” curriculum is utilized in this program. Successful completion requires 32 hours of treatment.

Facility	Capacity	Schedule	Counselor	Contractor
CTCF	15	1:00 – 3:00 pm M, W	Jean Connett	ARP

Recovery Plus. The Recovery Plus program is designed to establish the foundation skills necessary for offenders to establish abstinence from all chemicals and establish recovery as a complete lifestyle change. Each week of the program focuses on a different topic, such as how to change a substance using lifestyle, criminal thinking errors, consequences and reasons for use. Clients are required to spend 3 hours in individual counseling with the therapist in order to develop their own recovery plan. Successful completion requires 48 hours of treatment.

Facility	Capacity	Schedule	Counselor	Contractor
CTCF	15	9:00 – 10:50 am T–Th	Clay Simpson	DCCCA

Relapse Prevention. Relapse prevention is designed for inmates who have suffered substance abuse relapse, usually indicated by a positive urinalysis, while incarcerated or on parole. Within the program, offenders develop their own plan to remain abstinent while incarcerated as well as following their release to the community. In particular, this group focuses on connecting offenders to some other form of treatment such as Alcoholics Anonymous or individual counseling. This program is offered as a level 4 intensive outpatient group in some facilities. Successful completion of level 3 requires 18 hours of treatment.

Facility	Capacity	Schedule	Counselor	Contractor
FLCF	16	8:00 – 11:00 am & 1:30 – 4:00 pm M–Th	Sandra Ybarra	DCCCA

Level 4: Intensive Outpatient Therapy

Comprehensive Correctional Systems. This program includes Phases I and II of the Strategies for Self-Improvement and Change (SSC) curriculum. This curriculum operates from a cognitive-behavioral perspective. Offenders address their criminal and addictive thinking. Participants examine factors that may influence them to relapse or repeat their criminal behavior. During the program, offenders develop a relapse prevention plan. Successful completion requires 178 hours of treatment.

Facility	Capacity	Schedule	Counselor	Contractor
SCF	12	7:30–10:45 am M–Th	Mike McGrath	DCCCA
SCF	16	8:00–10:30 am M–W, F	Mimi Packard	DCCCA
SCF	12	1:00–3:30 pm M–F	vacant	DCCCA
SCF	16	1:30–3:45 pm M–W, F	Mimi Packard	DCCCA

Comprehensive Treatment Program. Substance abuse education comprises one-third of the comprehensive treatment program while two-thirds consists of group therapy. The purpose of the education component is to teach offenders the physiological and psychological effects of substance abuse. The education component further requires offenders to address whether they have a substance abuse problem. The function of the therapy component is to present offenders with alternative options to substance abuse and criminal behavior. In presenting options, offenders are able to examine their own history of thought, belief and value patterns in an effort to make better choices in the future. The therapy section of this program also includes a relapse prevention or aftercare plan. This plan targets how offenders can prevent substance abuse relapse following treatment. This program incorporates the cognitive behavioral core curriculum, thereby enabling offenders to attain basic mental health credit. Successful completion requires 99 hours of treatment.

Facility	Capacity	Schedule	Counselor	Contractor
BCCF	12	8:00 – 11:00 am M–Th	Susie Tenorio	CCA
BCCF	12	1:00 – 4:00 pm M–Th	Susie Tenorio	CCA
HCCF	15	8:00 – 11:00 am M–W	Michelle Howard	CCA

Relapse Prevention. The relapse prevention program is designed for inmates who have suffered substance abuse relapse, usually indicated by a positive urinalysis, while incarcerated or on parole. Within the program, offenders develop their own plan to remain abstinent while incarcerated as well as following their release to the community. In particular, this group focuses on connecting offenders to some other form of treatment such as Alcoholics Anonymous or individual counseling. This program is offered as a level 3 outpatient group in some facilities. Successful completion of level 4 requires a minimum 60 hours of treatment.

Facility	Capacity	Schedule	Counselor	Contractor
CCF	8	9:00 – 10:30 am M–Th	Roy Rall Ellen McCoy	RMBH
CSP	Indv.	Various	Roy Rall Ellen McCoy	RMBH
DCC	12	8:30–11:00 pm & 1:00–3:30 pm, M–Th	Glenda Major	MMH

Strategies for Self-Improvement and Change (SSC) This program covers Phase I of the SSC curriculum as well as the mental health core curriculum, substance abuse education and relapse prevention. This cognitive-behavioral approach is designed specifically for substance abusing offenders. In Phase I, offenders are challenged to

change. To motivate offenders to change, instructors help the offender develop self-awareness and learn the role of thought and behavior associated with changes. Phase II is offered in several facilities as well as in the community. Phase III is available in the community. Successful completion requires 63-96 hours of treatment, depending on the contractor (some groups include 16 hours of Relapse Prevention).

Facility	Capacity	Schedule	Counselor	Contractor
AVCF	12	8:00 – 11:00 am, 1:00 – 3:00 pm M–Th	Bobby Vogt	ARP
BCF*	12	1:00 – 3:00 pm M	Eva Eberhardt	GRW
BCF*	12	1:00 – 3:00 pm W	Eva Eberhardt	GRW
BCF*	12	1:00 – 3:00 pm Th	Eva Eberhardt	GRW
BVCF*	12	8:00 – 10:30 am & 12:45 – 3:15 pm M–Th	Ed Snead	ARP
BVMC*	12	8:00 – 10:30 am & 12:45 – 3:15 pm M–Th	Roberta Bolton	ARP
CCCF	15	7:30 –10:00 am & 1:30 – 4:00 pm M–Th	Wanona Wiker Peggy Jo Gregart	CCA
DWCF	15	1:00 – 3:30 pm M–Th	Brenda Noble	ARTS
FLCF	16	8:00 – 11:00 am & 1:30 – 3:45 pm M–Th	Sandra Ybarra	DCCCA
FMCC	15	1:00 – 3:30 pm M–Th	Marvel Wolken	ARP
FMCC	15	5:30 – 7:30 pm M–Th	Marvel Wolken	ARP
HCCF	15	1:00 – 4:00 pm M–W	Lucy Galvan	CCA
KCCF	12	8:00 – 10:30 am M–Th	Jimmie Jones	CCA
KCCF	12	1:30–4:30 pm T, W, Th	Jimmie Jones	CCA
LCF*	15	8:30–11:00 am M,T,W,F	Nancy Maxwell	Mirror
SCC*	12	1:30 – 3:30 pm M–Th	Diane Eastberg	ARP
SCC*	12	5:30 – 7:30 pm M–Th	Diane Eastberg	ARP

* This group continues on to Phase II when Phase I is completed.

Level 5: Intensive Residential Treatment (IRT)

There are no level 5 programs offered in CDOC. Offenders assessed at this level should be referred to level 6.

Level 6: Therapeutic Community (TC)

Below is a matrix of the admission criteria for each prison TC.

Criteria	ACC	DWCF	SCF	SCCF
Gender	M	F	M	M
SOA Level *	5 – 7	4 – 7	5 – 7	5 – 7
Custody Level	Min-R	Min-R, Min	Min-R, Min, Med	Min – Close
Months to PED	<=60	>=6	<=60	12 – 18
Months to MRD	9 – 36	>=6	9 – 36	>=9
Months since last COPD	6	3	6	3
P-Code	1 – 3	N/A	1 – 2	3 – 5
M-Code	1 – 3	N/A	1 – 2	N/A
S-Code	1 – 2	N/A	1 – 2	Conditional
Psychotropic Meds	Stable	Stable	Stable	Yes

* Offenders are not eligible for TC if they have an active “N” qualifier.

Challenge to Change TC. The Challenge to Change TC is a long term residential behavior modification program for substance dependent/abusing female adults. The program offers affective and cognitive components. Completion can be achieved in 9 to 12 months with the length of time being primarily determined by the motivation of the individual client. The program contains an earned privilege system, which includes phases for upward mobility and recognition of taking ownership for past and present behaviors. The TC also has available an aftercare in which offenders who have completed the program may stay in the unit for an additional 30 days to continue to attend groups and gain support before transitioning out of the TC unit.

Facility	Capacity	Schedule	Counselor	Contractor
DWCF	65	Orientation - Residents attend 8 hrs of group/ day. Phases I, II and III - Residents work 20 hrs/ week and attend at least 4 hrs of group/day	Jagruti Rai Dennis Yost Sarah Lester Regina Davis	ARTS

Crossroad to Freedom House TC. Crossroad to Freedom House is shared by substance abusing offenders and sexual offenders, although the groups reside in separate housing units and attend groups independently. This TC operates from a cognitive-behavioral perspective. The TC model provides a highly structured, intensive

treatment opportunity for incarcerated offenders entrenched in an addictive, criminal lifestyle. The program places high demands and expectations on community members, yet also provides them a prospect for recovery. The rules of the TC model those within society. This program has 25 beds reserved for dually diagnosed offenders. Responsibility within the community is stressed to residents. There are several integrated work sites including the greenhouse, the apple orchard, the bee program, and the kitchen. This program also has a reach-in transition component with the community based Peer 1 and Independence House TC programs. Successful completion requires 6 to 12 months of treatment. This program was the first TC in the nation accredited by the American Correctional Association.

Facility	Capacity	Schedule	Counselor	Contractor
ACC	96	Residents attend groups for 4 half days/week and work for 5 half days/week	Tania Garcia Andy Abalos Rick Arthurs Stacey Gordon Andrea Hernandez Danita St. Vrain	CDOC FTE & ARP
Peer 1 Transition		4 days/month at ACC	Michael Dent	ARTS
Independence House Transition		As needed	Jennifer Remack	

O.U.R. House TC. This TC is based on a cognitive-behavioral model and uses intensive group therapy that is highly structured and confrontational. Therapeutic tools such as thinking errors, journaling, rational emotive behavioral therapy (REBT), group therapy, “games,” and intensive relapse prevention programs are featured. Offenders with mental illness (OMI) have a part-time staff person who is dedicated solely to them. Treatment staff team up with case managers, other key facility providers and community service providers to assist offenders in reintegration to the community. Successful completion requires 8 to 12 months of treatment.

Facility	Capacity	Schedule	Counselor	Contractor
SCF	96	Residents work 4 hrs in the morning, and spend the remainder of the day attending at least 3 hrs of group	Dave Booth Chris Dudley Janet Kipp Krista Lindsey	CDOC FTE & DCCCA
Peer 1 Transition		4 days/month at SCF	Michael Dent	ARTS

Personal Reflections TC. This modified TC is designed for offenders who have a dual diagnosis, indicating both a chronic mental illness and a substance abuse problem. The TC model is based on the idea that drug abuse manifests itself globally within individuals, thereby affecting social and psychological management. This particular program operates from a cognitive-behavioral orientation in which offenders address problem behavior in the forum of the community. The program stresses individual accountability and responsibility to the community. The substance abuse staff interfaces with other CDOC staff for anger management and sex offender treatment. Successful completion requires 9-15 months of treatment.

Counselors from SCCF also participate in staffing and provide aftercare groups for offenders who have transitioned from SCCF to the Independence House community corrections centers.

Facility	Capacity	Schedule	Counselor	Contractor
SCCF	32	Residents attend groups from 7:00 am – 9:00 pm except when working. Residents work 5 hrs/day, 5 days/week	George Blansett Robert DeLarosa Art DuCharme Virginia Mollica	ARP
Independence House Transition		2 days/month at SCCF	Kathy Carrington	

Other Programs

Other substance abuse related programs exist within CDOC that do not fit within the realm of the seven treatment levels. Nevertheless, these programs provide valuable services to offenders. Included in these other programs are self-help groups, assessment and referral services for substance abuse treatment, case management, and groups that focus on the transition to the community.

After-Care Program/Hep-C Pre-Interferon Group. The after-care group is currently offered at three facilities, although it is possible for the group to exist where there is a treatment program, depending on facility permission. This program is established at various facilities in accordance with demonstrated offender need. The after-care group is a voluntary program for inmates who have completed some form of drug and alcohol treatment (e.g., SSC). The purpose of the after-care program is to provide continued support to substance abusing offenders. The group addresses how to handle current problem situations and provides an opportunity for offenders to process their emotions. Offenders with Hepatitis-C are required to complete six

months of substance abuse treatment before being eligible for Interferon treatment. This program allows them to complete that requirement.

Facility	Capacity	Schedule	Counselor	Contractor
FLCF	30	8:00 – 9:00 am F	Sandra Ybarra	DCCCA

Alcoholics Anonymous (AA). The AA program is a 12-step, self-help group. These groups are available to all offenders at all facilities on a voluntary basis. Volunteers from the community usually oversee the groups. The DWCF and CSP also offer an AA sponsorship program in which a community volunteer comes to the facility a few times a month to have private one-on-one meetings with a participating offender.

Boot Camp Program – Female Process Group. This group is offered to all females in the Boot Camp Program in addition to the required Comprehensive Treatment Program. The group is a processing group addressing issues unique to the female offender. Volunteers from AA facilitate this program. The group is open-ended, with female recruits attending the group the entire time they are housed at Boot Camp.

Facility	Capacity	Schedule	Facilitator	Contractor
CCAP	10	9:30 – 10:45 am F	Volunteer	ARP

Narcotics Anonymous (NA). The NA program is a 12-step, self-help group for offenders experiencing problems with drugs other than alcohol. The group offers recovering addicts peer support. NA is offered at BCCF, DCC, DWCF, and RCC.

Substance Abuse Assessment Program. The purpose of this program is to conduct standardized offender assessments with incoming CDOC inmates. With the implementation of the LSI-R as the basis for the diagnostic process, the assessment team augments diagnostic programmers' assessments by completing only the ASUS and SUHM instruments. The DRDC assessment team also provides several orientation groups per week, which outline the treatment opportunities within CDOC.

Facility	Capacity	Schedule	Counselor	Contractor
DRDC	N/A	7:00 am – 5:00 pm M–F	Lou DiDomenico George Sikes Daphne Walker	ARP

White Bison. This program, which is available at CCF, CSP, and CCCF, uses the Medicine Wheel and 12-Step program to provide a culturally appropriate recovery

support program for Native American people in prison. Participants watch a video that explains Medicine Wheel teachings and how to apply them to the Steps. In addition, participants share their insights and experiences in talking circle. They also learn how to mind map their own innate knowledge around these teachings and then apply that knowledge to their daily lives and decision making processes. The goal of the program is to create strong social and emotional bonds between the individuals who participate to develop trust, autonomy, and other healthy feelings and thought patterns that will help them to grow emotionally, mentally, physically, and spiritually.

OVERVIEW OF COMMUNITY BASED SERVICES

Through the Treatment Accountability for Safer Communities (TASC) programs, offenders who have paroled and are living in the community are referred to substance abuse treatment. Treatment in the community is provided by Approved Treatment Providers (ATPs). ATPs have applied to the CDOC to gain approved status. Counselors must meet the same background requirements as CDOC or prison-based contract employees.

IRT and TC programs are offered in some community corrections programs. These specialized programs are given oversight through the Division of Criminal Justice and the Alcohol and Drug Abuse Division.

This overview lists community-based ATPs and descriptions of the groups that they offer as well as descriptions of the specialized residential programs. Group schedules in the community tend to be variable and may change according to the offenders' needs. Please call the treatment providers to inquire about scheduling for specific groups. Group size is limited to 12 unless otherwise noted.

Treatment Accountability for Safer Communities (TASC). The TASC program is a community-based case management agency for parolees. Parolees are referred to TASC for a substance abuse assessment. Identified substance abusing offenders are referred to ATPs for treatment, and their attendance is monitored by TASC. TASC further monitors parolees' substance abuse through urinalyses, breathalyzer, and substance monitoring skin patches. MH TASC oversees the OMI program which consists of two case managers who work exclusively with offenders with serious mental illness. All TASC services are provided through Peer Assistance Services, Inc. Office hours are listed below, but random urinalysis testing may be done 7 days per week.

Office	Schedule	Case Manager
Mile High TASC Englewood (303) 761-7554	8:00 am – 6:00 pm M–Th	Dale Brotski Donna Storey
Mile High TASC Ogden (303) 595-4194	8:00 am – 7:00 pm M–Th	Julie Hoffman, Director Chad Edson (OMI) Anita Hoffman Layne Jacobson Esther Kroes (OMI) Vacant Vacant (UA monitor)

Office	Schedule	Case Manager
Northeast TASC Westminster (303) 428-5264	9:00 am – 6:00 pm M–Th 9:00 am – 5:30 pm F	Kristen Parker, Director Tonya Webster Colleen Todd Karen Wagner Anthony Wash Chris Corson (UA monitor)
Northeast TASC Greeley (970) 336-9034	9:00 am – 6:00 pm M–Th 8:00 am – 5:00 pm F	Barbara Heuerman
Northeast TASC Ft. Collins (970) 223-2232	9:00 am – 6:00 pm W, Th	Tonya Webster
Northeast TASC Longmont (303) 678-9941	9:00 am – 6:00 pm Th	Karen Wagner Colleen Todd
Southeast TASC Colorado Springs (719) 444-0882	8:00 am – 5:00 pm M–Th 8:00 am – 4:00 pm F	Lois Lifto, Director David Robinson Bonnie Saenz Sherri Clark Don Hollesen (UA monitor) Vacant
Southeast TASC Pueblo (719) 543-0690	8:00 am – 5:00 pm M–F	Michael Botello Bella Vigil
Western TASC Grand Junction (970) 242-2800	7:00 am – 12:00 pm 1:00 – 6:00 pm M– F	Melissa Ippolito, Director Craig Kovalcik Brandy Kroese Vacant David Joslyn (UA monitor)

Level 2: Drug Education and Increased Urinalyses

Basic Education. This program provides parolees with basic knowledge of addiction and errors in thinking that can lead to overuse or relapse. In group, clients will explore the effects of abuse, the signs of an abuse problem, polydrug education and how to make healthy choices.

Provider	Location	Attendance Requirement	Successful Completion
A. B. Counseling (303) 694-3360	Centennial	One 2-hr group/wk	Min. 12 weeks
About an Alternative (719) 685-0907	Manitou Springs	One 2-hr group/wk	12 weeks
Behavior Services Institute (303) 831-4500	Denver	Up to three 2-hr groups/wk	24 hours
BI, Inc. (303) 832-1144	Denver	Two 2-hr groups/wk	12 weeks
The Family Violence Program (303) 403-8525	Wheat Ridge	One 2-hr group/wk	36 weeks
Pikes Peak Mental Health (719) 572-6300	Colorado Springs	One 60-min group/wk	Open-ended
Clear Creek Counseling (303) 567-4455	Idaho Springs	One 2-hr group/wk	11 weeks
Creative Treatment Options (303) 467-2624	Arvada	One 2-hr group/wk	12 weeks
The Place...Because its Time (719) 846-3919	Trinidad	One 2-hr group/wk	36 weeks
Rocky Mountain Behavioral Health (719) 539-3452	Salida	One 2-hr group/wk	12 weeks

Level II Therapy. This group process looks at individual use of alcohol and other drugs and develops strategies other than continued use/abuse of substances. Utilizing a workbook and hands-on methods to accomplish its goal, the program provides structured exercises for self-assessment, stress reduction, natural highs, refusal skills, self-esteem, progression, violence, anger, high risk factors of substance abuse and models for change. Discussion by group members further enhances the opportunity to make effective changes.

Provider	Location	Attendance Requirement	Successful Completion
A. B. Counseling (303) 694-3360	Centennial	One 2-hr group/wk	Min. 12 weeks
About an Alternative (719) 685-0907	Manitou Springs	One 2-hr group/wk	Min. 12 weeks

Provider	Location	Attendance Requirement	Successful Completion
Behavior Services Institute (303) 831-4500	Denver	One 2-hr group/wk	Open-ended
BI, Inc. (303) 832-1144	Denver	Two 2-hr groups/wk	10 to 20 weeks
Dove Counseling (303) 216-9873	Golden	One 2-hr group/wk	Open-ended
The Family Violence Program (303) 403-8525	Wheat Ridge	One 2-hr group/wk	36 weeks
Lifeline Education and Counseling (719) 471-4265	Colorado Springs	One 2-hr group/wk	12 weeks
UCHSC/ARTS Crosspoints (303) 388-8191	Denver	One 90-min group/wk	Open-ended

Level 3: Weekly Outpatient Therapy

Aftercare/Continuing Care. These programs vary by provider, but are designed for clients who have been through other intensive substance abuse treatment. Length of treatment is determined on an individual basis, based on the client's attendance, participation and commitment to recovery. Maintenance of sobriety and relapse prevention are the primary focuses of this program.

Provider	Location	Attendance Requirement	Successful Completion
Associates for Psychotherapy and Education (719) 564-9039	Pueblo	One 90-min group/wk	Open-ended
Colorado West Recovery Services (970) 241-6023	Grand Junction	One 2-hr group/wk	8 weeks
Inner Journey Counseling (970) 242-1433	Grand Junction	One 90-min group/wk	Open-ended
Pathfinder Clinic (970) 259-6588	Durango	One 90-min group/wk	Open-ended
Addictive Behaviors Counseling (970) 945-4854	Glenwood Springs	One 2-hr group/wk	Min. 40 weeks

Chemical Dependency. The program is a 12-session group designed to assist the client in gaining positive coping skills needed to achieve sobriety. Clients may join at any time, but they must complete the sessions consecutively. Once a client has completed this group, they may enter Relapse Prevention or into another court ordered group. This group is generally recommended for clients who have produced multiple positive UAs.

Provider	Location	Attendance Requirement	Successful Completion
Bridge to Awareness (719) 471-2514	Colorado Springs	One 2-hr group/wk	Min. 30 hours
Bridge to Awareness (719) 390-4652	Security	One 2-hr group/wk	Min. 30 hours

Cognitive Group Therapy. This group is designed for group members to learn new ways to change negative behavior patterns, identify addictive thinking patterns and use rational, analytic thinking to choose positive life skills. The program provides therapeutic intervention for continued poor behavior and includes the identification of relapse triggers, and nutritional counseling for detoxification. It also addresses the commitment to change, learning healthy family and peer boundaries, and the establishment of community resource support systems.

Provider	Location	Attendance Requirement	Successful Completion
Mile High Council on Alcoholism and Drug Abuse (The Council) (303) 825-8113	Denver	One 2-hr group/wk	20 weeks

Co-occurring Group. This group is designed for individuals with co-occurring disorders, meaning that they have both a substance use and a mental health disorder. This group targets people who cycle through chronic, relapsing conditions that do not improve as a result of any single intervention. The co-occurring group provides appropriate treatment through education, information and life skills which offer a framework for ongoing improvement of any existing disorder.

Provider	Location	Attendance Requirement	Successful Completion
Bridge to Awareness (719) 471-2514	Colorado Springs	One 2-hr group/wk	16 weeks

Enhanced Outpatient Program (EOP). The program is psycho-educational with a cognitive-behavioral modification curriculum. Specific topics include, but are not limited to, chemical dependence education, drug transference and synergism, self-esteem, co-dependency issues, spirituality issues, grief and loss issues, stress management, infectious disease, and family roles and rules.

Provider	Location	Attendance Requirement	Successful Completion
Colorado West Recovery Services* (970) 241-6023	Grand Junction	Two 3-hr groups/ wk	Open-ended
Island Grove* (970) 669-1700	Loveland	Four 2-hr groups/wk	Open-ended
Lifeline Education & Counseling (719) 651-7640	Colorado Springs	Four 2-hr groups/wk	6 weeks
Pathfinder Clinic (970) 259-6588	Durango	Two 2-hr groups/wk, plus 1-hr counseling session every other wk	12 weeks
The Place...Because its Time (719) 846-3919	Trinidad	One 2-hr group/wk	36 weeks
UCHSC/ARTS Crosspoints (303) 388-8191	Denver	Three to six hours/wk	Open-ended

* Available for women only.

Intensive Outpatient Program. This is an intense two-phase program for individuals dealing with chemical dependency that helps them to cope with stressors in their environment while establishing recovery. Utilizing a variety of techniques, clients begin the exploration of internal and external conditions that lead to drug/alcohol usage.

Provider	Location	Attendance Requirement	Successful Completion
Cortez Addictions Recovery Service (970) 565-4109	Cortez	Phase I: Three 3-hr groups/wk Phase II: Two 2-hr groups/wk	52 weeks
Creative Treatment Options (303) 467-2624	Arvada	Three 3-hr groups/wk	6 weeks
Dove Counseling (303) 216-9873	Golden	Three 3-hr groups/wk	Open-ended

Provider	Location	Attendance Requirement	Successful Completion
Inner Journey Counseling (970) 242-1433	Grand Junction	Four 3-hr groups/wk	24 weeks
White River Counseling (970) 945-1228	Glenwood Springs	Two 2-hr groups/wk	Open-ended

Matrix Model Program. This outpatient program is targets the needs of stimulant-abusing patients. The goals of this program are to cease drug use and learn issues critical to addiction and relapse. Treatment may include group, individual sessions, family educational group, early recovery skills groups, relapse revention, 12 step and social support groups.

Provider	Location	Attendance Requirement	Successful Completion
Bridge to Awareness (719) 471-2514	Colorado Springs	One 2-hr group/wk	16 weeks
Crossroads Turning Point (719) 846-4481	Trinidad	Two 90-min group/wk	16 weeks

Moral Reconation Therapy. This program is developed specifically using this cognitive behavioral curriculum meant to redirect moral growth. It is an objective, systemic treatment system designed to enhance ego, social, moral and positive behavioral growth in a progressive step-by- step fashion. Treatment focuses on addressing substance abuse, cognitive skills, relapse prevention, and criminal attitudes.

Provider	Location	Attendance Requirement	Successful Completion
Bl, Inc. (303) 832-1144	Denver	One 2-hr group/wk	26 weeks
Bl, Inc. (303) 238-5755	Lakewood	Two 90-min group/wk	Two 90-min group/wk

Recovering Wellness. This outpatient group focuses on recovery skills for the individual wanting to initiate and sustain an alcohol and drug free lifestyle. The aim of this group is to teach participants how to develop positive skills to reach their goals and offers opportunity to practice what they have learned. Great emphasis is placed on forming a circle of support from many areas which may include involvement in AA or NA or other support systems such as family or church groups.

Provider	Location	Attendance Requirement	Successful Completion
White River Counseling (970) 945-1228	Glenwood Springs	One 2-hr group/wk	Open-ended
White River Counseling (970) 625-3416	Rifle	One 2-hr group/wk	Open-ended

Relapse Prevention. Though offered by different providers and covering somewhat different content, most relapse prevention programs are designed for offenders who want to stay clean and sober rather than get clean and sober. Most are cognitive-behavioral in structure. Group activities may include interactive education, role-playing, stress management, and development of long-range relapse prevention plans. Please call providers for more specific information.

Provider	Location	Attendance Requirement	Successful Completion
A. B. Counseling (303) 694-3360	Centennial	One 2-hr group/wk	Open-ended
A. B. Counseling (303) 237-3599	Lakewood	One 2-hr group/wk	Open-ended
About an Alternative (719) 572-1844	Colorado Springs	One 2-hr group/wk	36 weeks
Advantage Treatment Centers (720) 855-1859	Denver (North)	One 75-min group/wk	16 weeks
Advantage Treatment Centers (303) 727-8881	Denver (South)	One 75-min group/wk	16 weeks
Advantage Treatment Centers (720) 855-8477	Denver (East)	One 75-min group/wk	16 weeks
Associates for Psychotherapy and Education (719) 564-9039	Pueblo	One 90-min group/wk	Open-ended
Bl, Inc. (303) 832-1144	Denver	One 90-min group/wk	14 weeks
Bridge to Awareness** (719) 471-2514	Colorado Springs	One 2-hr group/wk	Min. 30 hours
Bridge to Awareness** (719) 296-1366	Pueblo	One 2-hr group/wk	Min. 30 hours
Bridge to Awareness** (719) 390-4652	Security	One 2-hr group/wk	Min. 30 hours

Provider	Location	Attendance Requirement	Successful Completion
Clarity Counseling, P.C. (970) 882-1253 x1	Dolores	One 2-hr group/wk OR one 1-hr individual/wk	Open-ended
Clear Creek Counseling (303) 567-4455	Idaho Springs	One 2-hr group/wk	21 weeks
Colorado Assessment and Treatment Center (303) 757-6019	Denver	One 2-hr group/wk	Open-ended
Colorado West Recovery Services* (970) 241-6023	Grand Junction	Two 2-hr groups/wk	8 weeks
Creative Treatment Options (303) 467-2624	Arvada	One 2-hr group/wk	20 weeks
Creative Treatment Options (303) 467-2624	Westminster	One 2-hr group/wk	20 weeks
Crossroads' Turning Points, Inc. (719) 545-1181	Pueblo	One 90-min group/wk	19 weeks
Day Spring Family Care Center* (303) 294-0972	Denver	One 60-min group/wk	20 weeks
Dove Counseling (303) 216-9873	Golden	One 2-hr group/wk	20 weeks
Dove Counseling (303) 429-3400	Thornton	One 90-min group/wk	20 weeks
The Family Violence Program (303) 403-8525	Wheat Ridge	One 90-min group/wk	36 weeks
Inner Journey Counseling (970) 242-1433	Grand Junction	Two 90-min groups/wk	Min. 8 weeks
Inspirations D/A (303) 422-2303	Arvada	One 2-hr group/wk	18 weeks
Island Grove (303) 857-6365	Fort Lupton	One 2-hr group/wk	20 weeks
Island Grove (970) 351-6678	Greeley	One 90-min group/wk	20 weeks
Island Grove* (970) 669-1700	Loveland	Min. of one 90-min group/wk	20 weeks

Provider	Location	Attendance Requirement	Successful Completion
Lifeline Education and Counseling (719) 471-4265	Colorado Springs	One 2-hr group/wk	12 weeks
Men & Women Seeking Empowerment (303) 665-7037	Lafayette	One 2-hr group/wk	Open-ended
Mile High Council on Alcoholism and Drug Abuse (The Council) (303) 825-8113	Denver	One 90-min group/wk	Open-ended
My Counseling Service (970) 420-7103	Greeley	One 90-min group/wk	27 weeks
New Directions Counseling Center (303-682-9473	Longmont	One 90-min group/wk	20 weeks
North Side Center for Change (303) 433-1306	Denver	One 60-min group/wk	18–24 weeks
Parker Froyd & Associates (303) 202-0801	Lakewood	Two 90-min groups/wk	12 weeks
Peoria Treatment Center (303) 361-9895	Aurora	One 90-min group/wk	18 weeks
Prather, Lyle (970) 824-2557	Craig	One 2-hr group/wk	20 weeks
Residential Treatment Center Outpatient*/** (970) 351-7223	Greeley	One 90-min group/wk	20 weeks
Stark, Robert (970) 945-7858	Avon	One 60-min group/wk	20 weeks
Stark, Robert (970) 945-7858	Carbondale	One 60-min group/wk	20 weeks
Stark, Robert (970) 945-7858	Glenwood Springs	One 60-min group/wk	20 weeks
Timberline Counseling (303) 289-3334***	Thornton	One 60-min group/wk	12 weeks
UCHSC/ARTS Crosspoints (303) 388-8191	Denver	One 90-min group/wk	Open-ended

Provider	Location	Attendance Requirement	Successful Completion
UCHSC/ARTS Women's Program (303) 333-4288	Denver	One 90-min group/wk	16 weeks
Van Dusen, Patricia (970) 874-2581	Montrose	One 90-min group/wk	Open-ended
White River Counseling (970) 945-1228	Glenwood Springs	One 90-min group/wk	Open-ended
White River Counseling (970) 625-3416	Rifle	One 90-min group/wk	Open-ended
White River Counseling (970) 434-6312	Grand Junction	One 90-min group/wk	Open-ended
Yampa Valley Psychotherapists (970) 870-9454	Steamboat Springs	One 2-hr group/wk	20 weeks

* Gender specific groups available.

** Advanced relapse prevention available at this location.

*** Spanish speaking counselor available.

Strategies for Self-Improvement and Change (SSC). This program is designed for individuals with substance abuse problems and a history of criminal conduct. This program brings together effective cognitive-behavioral treatment approaches for changing the behaviors of individuals who have both problems of substance abuse and criminal behavior. The main goals of the SSC treatment are to correct the behavior of the offender, bring the offender's behavior into compliance with the laws of society, and prevent recidivism. All locations offer Phase I of the SSC curriculum and most offer Phases II and III as needed.

Provider	Location	Attendance Requirement	Successful Completion
A. B. Counseling (303) 694-3360	Centennial	One 2-hr group/wk	52 weeks*
A. B. Counseling (303) 237-3599	Lakewood	One 2-hr group/wk	52 weeks*
Addictive Behaviors Counseling (970) 945-4854	Glenwood Springs	Phase I: Two 2-hr groups/wk Phase II/III: One 2-hr groups/wk	52 weeks*

Provider	Location	Attendance Requirement	Successful Completion
Advantage Treatment Centers (720) 855-1859	Denver (North)	One 75-min group/wk	52 weeks*
Advantage Treatment Centers (303) 727-8881	Denver (South)	One 75-min group/wk	52 weeks*
Alcohol Counseling & Guidance Services 970-221-3425	Fort Collins	One 2-hr group/wk	50 weeks*
Arapahoe House (303) 657-3700	Thornton	One or two 2-hr groups/wk	52 weeks*
Bridge to Awareness (719) 471-2514	Colorado Springs	One 2-hr group/wk	50 weeks*
Colorado West Recovery Services (970) 241-6023	Grand Junction	One 2-hr group/wk	48 weeks*
Cortez Addiction Recovery (970) 565-4109	Cortez	One 2-hr group/wk	52 weeks*
Creative Treatment Options (303) 467-2624	Arvada	One 2-hr group/wk	52 weeks*
Creative Treatment Options (303) 467-2624	Westminster	One 2-hr group/wk	52 weeks*
Crossroads' Turning Points, Inc. (719) 589-5176	Alamosa	One 90-min group/wk	50 weeks*
Crossroads' Turning Points, Inc. (719) 545-1181	Pueblo	One 90-min group/wk	50 weeks*
Crossroads' Turning Points, Inc. (719) 846-4481	Trinidad	One 90-min group/wk	50 weeks*
Crossroads' Turning Points, Inc. (719) 738-2076	Walsenburg	One 90-min group/wk	50 weeks*
Dove Counseling (303) 216-9873	Golden	One 90-min group/wk	52 weeks*
Dove Counseling (303) 429-3400	Thornton	One 90-min group/wk	50 weeks*

Provider	Location	Attendance Requirement	Successful Completion
Inner Journey Counseling (970) 242-1433	Grand Junction	One 2-hr group/wk	40 weeks*
Island Grove (303) 857-6365	Fort Lupton	One 2-hr group/wk	50 weeks*
Island Grove (970) 351-6678	Greeley	One 90-min group/wk	52 weeks*
Island Grove (970) 669-1700	Loveland	One 90-min group/wk	52 weeks*
New Directions Counseling Center (303-682-9473	Longmont	One 90-min group/wk	52 weeks*
North Side Center for Change (303) 433-1306	Denver	One 90-min group/wk	52 weeks*
Pathfinder Clinic (970) 259-6588	Durango	One 2-hr group/wk	50 weeks*
Pathfinders Community Counseling (719) 384-8503	La Junta	One 60-min group/wk	32 weeks*
Peoria Treatment Centers (303) 361-9895	Peoria	One 90-min group/wk	52 weeks*
Residential Treatment Center Outpatient ^{*/**} (970) 351-7223	Greeley	One 90-min group/wk	50 weeks*
Rocky Mountain Behavioral Health (719) 275-7650	Canon City	One 2-hr group/wk	52 weeks*
Rocky Mountain Behavioral Health ^{**} (719) 539-3452	Salida	One 2-hr group/wk	50 weeks*
Sobriety House (303) 722-5746	Denver	One 2-hr group/wk	52 weeks*
Social Solutions (719) 964-4199	Colorado Springs	One 90-min group/wk	52 weeks*
Social Solutions (303) 522-4199	Denver	One 90-min group/wk	52 weeks*

Provider	Location	Attendance Requirement	Successful Completion
Social Solutions (303) 522-4199	Northglenn	One 90-min group/wk	52 weeks*
Social Solutions (303) 522-4199	Littleton	One 90-min group/wk	52 weeks*
Stark, Robert (970) 945-7858	Carbondale	One 2-hr group/wk	52 weeks*
Stark, Robert (970) 945-7858	Avon	One 2-hr group/wk	52 weeks*
Stark, Robert (970) 945-7858	Glenwood Springs	One 2-hr group/wk	52 weeks*
UCHSC/ARTS Cross Point (303) 388-8191	Denver	One 90-min group/wk	52 weeks*
White River Counseling (970) 945-1228	Glenwood Springs	Two 2-hr groups/wk	52 weeks*
White River Counseling** (970) 625-3416	Rifle	Two 2-hr groups/wk	52 weeks*
White River Counseling (970) 434-6312	Grand Junction	Two 2-hr groups/wk	52 weeks*

*Time needed to complete all three phases of SSC.

** Gender specific groups available.

Substance Abuse Therapy Group. This is an ongoing weekly process group in which members examine psychosocial functioning in order to improve recovery. It is an open-ended group, and clients discharge from group once they understand their cycle of addiction and have developed effective coping strategies and a relapse prevention plan.

Provider	Location	Attendance Requirement	Successful Completion
Colorado Assessment and Treatment Center (303) 757-6019	Denver	One 1-hr group/wk	Open-ended

Women's Group. This program addresses issues that many women struggle with, especially if they are abusing alcohol and other drugs. Although each woman's path of healing is unique, most find that it involves discovering the true self, connecting in healthy relationships with others, understanding sexuality and gaining

some spiritual connection. Learning to change behavior by changing thought processes and moving from the emotion center to the thought center is the primary focus of this group.

Provider	Location	Attendance Requirement	Successful Completion
Day Spring Family Care Center (303) 294-0972	Denver	One 60-min group/wk	36 weeks
Inspirations D/A (303) 422-2303	Arvada	One 90-min group/wk	Open-ended
Pathfinder Clinic (970) 259-6588	Durango	One 2-hr group/wk	Open-ended
The Place...Because its Time (719) 846-3919	Trinidad	One 2-hr group/wk	Open-ended

Level 4: Intensive Outpatient Therapy

Comprehensive Outpatient Substance Abuse Program for Adults. This program includes individual evaluation, individual and family sessions, group therapy sessions, AA compliance, sobriety checks, case management and discharge planning. Following the program, clients enter the relapse prevention or aftercare programs.

Provider	Location	Attendance Requirement	Successful Completion
Associates for Psychotherapy and Education (719) 654-9039	Pueblo	Three 4-hour groups/wk	10 weeks

Intensive Offender Outpatient Program – Females. These programs are specifically designed for female substance abusing offenders. Though curriculums may vary from provider to provider, the primary goal of these groups is to assist female clients in achieving abstinence and developing coping skills. Past trauma is also addressed.

Provider	Location	Attendance Requirement	Successful Completion
Arapahoe House (303) 657-3700	Thornton	Weeks 1-8: three 3-hr groups/wk Weeks 9-16: three 2-hr groups/wk Weeks 17-36: one 2-hr group/wk	160 hours (36 weeks)
Rocky Mountain Behavioral Health (719) 275-7650	Canon City	Three 3-hr groups/wk	30-90 days

Intensive Offender Outpatient Programs. These programs exist to assist their clients in reaching long term abstinence from substance use. The intensity of the program is designed to meet the needs of individuals who are suffering from severe dependence to alcohol and/or drugs. Though programs vary slightly depending on provider, they often include several curriculums addressing relapse prevention, social support issues, and drug education in both group and individual therapy formats.

Provider	Location	Attendance Requirement	Successful Completion
Arapahoe House (303) 657-3700	Thornton	Two 90-min groups/wk and individual sessions	Open-ended
The Family Violence Program (303) 403-8525	Wheat Ridge	One 90-min group/wk	36 weeks
Rocky Mountain Behavioral Health (719) 275-7650	Canon City	Three 3-hr groups/wk	4 – 12 weeks
UCHSC/ARTS Crosspoints (303) 388-8191	Denver	Three 3-hr groups/wk	8 weeks

STIRRT – Pueblo Aftercare. This program is a mandatory outpatient program for all graduates of the Pueblo STIRRT program. It provides a continuum of care by offering phases I, II and III of the SSC model. This phase of treatment may include family involvement and preservation through continued education and therapy.

Provider	Location	Attendance Requirement	Successful Completion
Crossroads' Turning Points, Inc (719) 545-1181	Pueblo	Minimum 5 hrs/wk	5 weeks

Level 5: Intensive Residential Treatment (IRT)

Community Intensive Residential Treatment (CIRT). CIRT is a 50-bed program for male offenders. The program is based on the first two phases of the SSC curriculum. The goal of their approach is to prevent criminal recidivism and substance abuse relapse within community-based and correctional settings. Clients are provided with knowledge about addictive substances and abuse through journaling and writing assignments. Clients learn techniques to change their irrational beliefs and criminal thinking patterns. Other approaches to treatment are also incorporated, such as 12-step, interpersonal relationships, life skills and leisure activities.

Provider	Location	Weekly Schedule	Successful Completion
San Luis Valley Mental Health Center (719) 589-5134	Alamosa	30 hrs of counselor-led activities 2½ hrs of other structured activities	45 days

ComCor Life Choices (CLC). CLC is a 36-bed IRT program for male and female offenders. While in the CLC program, clients are assigned to particular groups based on criteria such as drug of choice and gender. The client's individual needs are factored into group placement. The SSC curriculum is used in all groups of offenders. Various other types of treatment are available to clients in this program, such as EMDR, SSC and Thought-Field Therapy. Vocational services are also provided. Clients are linked to resources outside of the CLC program prior to their graduation and encouraged to use these resources when they leave.

Provider	Location	Weekly Schedule	Successful Completion
ComCor, Inc. (719) 473-4460	Colorado Springs	40 hrs of counselor-led activities 10 hrs of other structured activities	45 days

Larimer County Residential Center. This program provides treatment services to 11 male offenders. The program incorporates SSC, Relapse Prevention, and a broad range of cognitive and life skills classes which concentrate on communication, management of emotions, healthy relationships nutrition, pro-social activities, budgeting/finances and resume writing and job searching. The program is a closed group model with new groups graduating every 45 days. Individual counseling is also available for clients with co-occurring mental health disorders. Each offender successfully completing the program transitions to the aftercare program or to another aftercare setting.

Provider	Location	Weekly Schedule	Successful Completion
Larimer County Community Corrections (970) 498-7527	Fort Collins	40 hrs of substance abuse education/counselor- led groups	45 days

Residential Treatment Center (RTC). The RTC program provides services for 39 male and 13 female offenders. RTC is located at the community corrections center in Greeley. Women are assigned to rooms on a different floor than the men. Various sources are utilized in treatment groups including the 12-step model, the Design for Living Hazelden curriculum, and cognitive-behavioral techniques. Clients attend large, lecture-type groups as well as smaller therapy groups.

Provider	Location	Weekly Schedule	Successful Completion
Avalon Correctional Services (970) 351-7223	Greeley	20 hrs of counselor- led activities & 5 hrs of other structured activities	45 days (depending on funding source)

Short-Term Intensive Residential Remedial Treatment (STIRRT). STIRRT is a highly structured and compacted drug and alcohol treatment program for male offenders at high risk of re-offending. The primary goal of STIRRT is to initiate a change in the clients' substance use and criminal involvement. The program aims to temporarily remove clients from society and subsequently return them with the skills to reduce criminal involvement and substance abuse so they avoid further incarceration or jail time. The program has a largely cognitive behavioral emphasis, utilizing Phase I of the SSC curriculum. The cognitive behavioral approach is integrated in the

educational and employment skills groups. A full schedule of groups is held each day, Sunday through Saturday, for the 2-week program duration.

Provider	Location	Weekly Schedule	Successful Completion
Arapahoe House (303) 289-3391	Commerce City	46 hrs of counselor-led activities & 10½ hrs of other structured activities	14 days
Crossroads' Turning Points, Inc. Males: (719) 546-6666 Females: (719) 545-1811	Pueblo	49 hrs of counselor-led activities & 28 hrs of other structured activities	14 days

Level 6: Therapeutic Community (TC)

Independence House TC. The Independence House TC is a modified community-based TC designed to transition offenders who are dually diagnosed from the Crossroads to Freedom House and Personal Reflections TC programs. The overall goal of this TC is to assist residents in making choices in their lifestyles that enhance and foster personal growth and responsibility. Residents learn how to maintain a positive lifestyle free of drugs and crime by receiving education about resources available at the community, state, and federal levels. Each resident may earn the privilege of working based on progress in treatment.

Treatment Provider: Independence House and Mental Health Corp. of Denver
Location: Denver

Number of Residential Beds: 27

Successful Completion: Graduation is dependent upon progress in treatment.

A minimum of 9 months residential treatment is required prior to progressing to outpatient aftercare services.

Peer 1 TC. Residential TC activities are divided among intensive and transitional services. Intensive services are aimed at changing attitudes, values and behaviors as well as increasing motivation, readiness for treatment, and ownership of change. The goal of transitional services is reintegration into the community, with specific emphasis on employment, budgeting, family support groups, and appropriate leisure activities. Clients who transition to non-residential services learn independent living skills while engaging in weekly treatment groups.

Treatment Provider: Addiction Research and Treatment Services (ARTS)

Location: Ft. Logan, Denver

Number of Residential Beds: 120 (includes probation, diversion, and drug court)

Successful Completion: Graduation depends on progress in treatment. Average length of stay is 9-12 months on residential status and 1 year on non-residential status. Graduates may remain under Peer 1 monitoring for the duration of their sentence.

Sisterhood Teaching Alternatives to Recovery (STAR) TC. This modified TC treats females with complex substance abuse needs. Women with co-occurring substance abuse and mental health needs as well some who have level 5 treatment needs are accepted into the program on an individual basis. The program includes group and individualized treatment, cognitive behavioral therapy, relapse prevention groups, and gender specific/trauma informed women's treatment services. This residential treatment program has a duration of 4 to 5 months.

Treatment Provider: Crossroads' Turning Point, Inc.

Location: Pueblo

Number of Residential Beds: 24 treatment beds

Successful Completion: Average length of stay is 4 to 5 months on residential status.

The Haven TC. The Haven is a unique long term TC for women and children, with special interest and ability to serve pregnant and post-partum women. The Haven houses 38 women and The Haven Mother's House serves an additional 26 women with their infant children who reside with their mothers in treatment. The Haven serves women with chronic substance abuse disorders. The program offers group treatment, individualized treatment, psychiatric services, cognitive behavioral therapy, parenting education, infant developmental evaluations and services, on-site child care, medication monitoring, on-site medical services, supervised children's visitation, exercise and recreational activities, relapse prevention groups, gender specific/trauma informed women's treatment services, transitional housing, and day treatment.

Treatment Provider: Addiction Research and Treatment Services (ARTS)

Location: Ft. Logan, Denver

Number of Residential Beds: 38 women's treatment beds and 26 beds for mothers with their infants in residence (includes probation, diversion, drug court, and DHS)

Successful Completion: Graduation depends on progress in treatment. Average length of stay is 9-12 months on residential/day-treatment status and 9-12 months of outpatient TC. Graduates may remain under Haven monitoring for the duration of their sentence.

EVALUATION OF OFFENDER TREATMENT NEEDS

The CDOC provides a large array of substance abuse treatment services. It is important for programs to identify the treatment needs of the clientele and determine whether the services are meeting that need.

This section first profiles substance abusers by comparing them to non-abusers across demographic, criminal history, and other treatment needs. Next, the need for specific treatment modalities offenders, as measured by the standardized offender assessment, is explored. Finally, staffing patterns and actual services rendered are analyzed.

The CDOC jurisdictional population ($N = 26,663$), excluding offenders in jail backlog and parolees supervised out of state, was used to profile substance abusers. Substance abusers are identified during the diagnostic assessment process at Denver Reception and Diagnostic Center (DRDC) and Denver Women's Correctional Facility (DWCF).

All offenders are evaluated and screened for various programmatic needs, such as substance abuse, mental health, and vocational. A 5-point severity index is used where higher scores denote a greater priority for services. Offenders scoring three or higher are considered to have a need in that area.

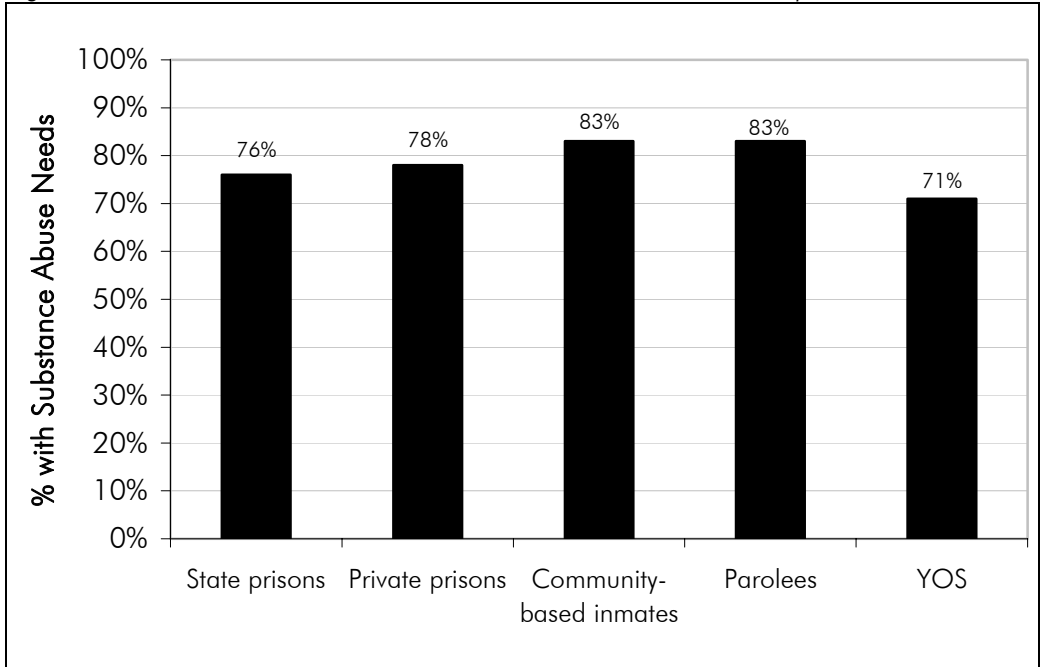
Prevalence Rates

The prevalence of substance abuse across the inmate and parole population as of June 30, 2005 was analyzed. Substance abusers were defined as having a diagnostic need level of 3 through 5 while non-abusers included inmates with level 1 or 2. The substance abuse needs level is calculated from offenders' SSI scores and number of alcohol/drug related arrests within the last 5 years, using an algorithm that takes into account both self-report (SSI score) and a behavioral indicator (number of arrests). Thus, inmates who under-report substance use on the SSI but have substance-related arrests are still identified as substance abusers.

There were 1,189 offenders with missing substance abuse needs levels, reducing the population size to 25,474. Overall, 78% of the population was identified as having substance abuse needs.

Prevalence rates were examined by offenders' location (see Figure 1). Rates were fairly similar across state and private facilities, but they were slightly higher among parolees and community-based inmates (i.e., community corrections, ISP-inmates). YOS had the lowest incidence of substance abuse needs.

Figure 1. Substance Abuse Needs across CDOC Jurisdictional Population



Note. Excludes jail backlog and parolees supervised out of state.

Substance Abuse Profile

Substance abusers were compared to non-abusers on several demographic characteristics and criminal history data (see Table 1). Although similar to non-abusers on gender and ethnicity, substance abusers tended to be younger by two years. Overall, non-abusers were more likely to receive a GED than substance abusers, although substance abusers tended to receive their high school diploma more often.

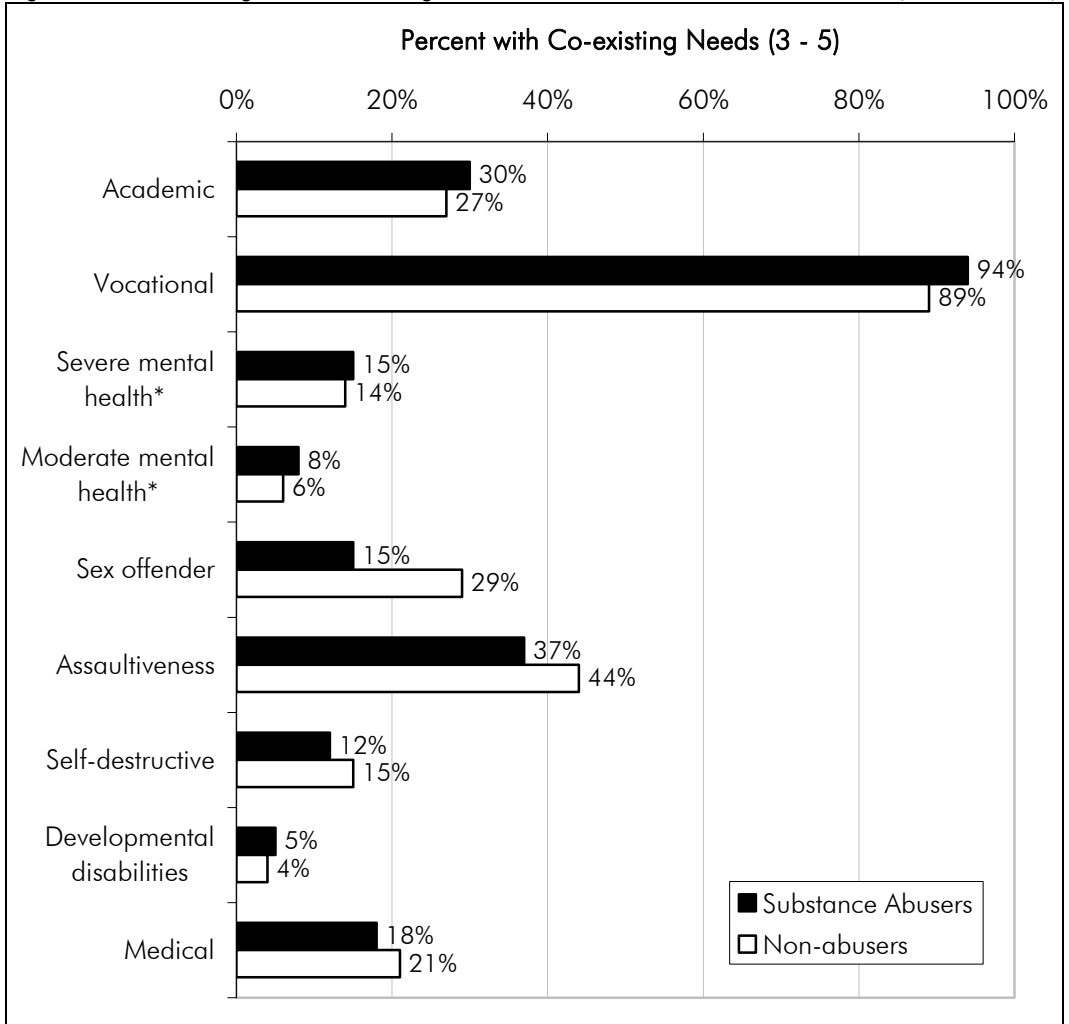
Criminal history data showed that substance abusers were of higher recidivism risk as measured by the LSI-R but non-abusers tended to have more serious offenses as indicated by the felony class. This is likely a result of substance abusers having an accumulation of more, albeit less serious, crimes in their past than the non-abusers.

Table 1. Comparisons across Demographic and Criminal History Data

	Substance Abusers (<i>n</i> = 19,958)	Non-Abusers (<i>n</i> = 5,516)
Gender		
Male	11%	10%
Female	89%	90%
Ethnicity		
Caucasian	47%	48%
Latino/Latina	30%	28%
African American	20%	20%
Native American	2%	2%
Asian	1%	2%
Mean age (st. dev.)	34.5 (9.5)	36.3 (11.7)
High school certificate		
Diploma	55%	46%
GED	19%	31%
Neither	26%	23%
Felony class		
1	1%	4%
2	4%	8%
3	26%	34%
4	45%	38%
5	19%	14%
6	5%	2%
Mean LSI-R (st. dev.)	30.8 (7.3)	24.2 (8.1)

Needs levels were examined differentially for substance abusers and non-abusers (see Figure 2). Substance abusers had greater needs in academic, vocational and mental health areas, but lesser needs in sex offender, assaultiveness, self-destructiveness, and medical areas. The groups were similar on developmental disabilities. Missing data ranged from 286 cases in mental health to 1,833 in self-destructive needs.

Figure 2. Co-existing Needs among Substance Abusers and Non-abusers (N = 25,474)

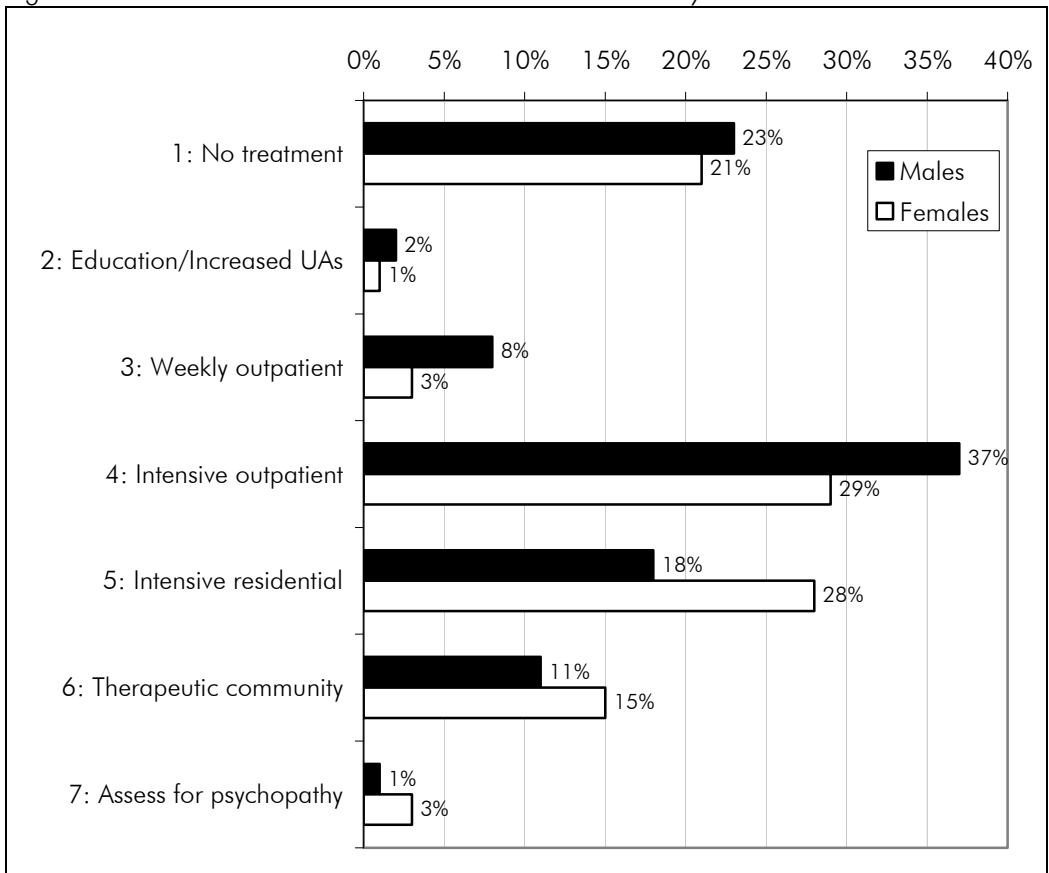


* Severe mental health needs had a C or O qualifier; moderate included all other 3-5 ratings.

The SOA was administered to 3,710 offenders in FY05. There were 14,787 of the June 30, 2005 CDOC population who had active assessments. Estimates of the substance abuse need were calculated from this data across treatment modalities and by gender (see Figure 3).

The highest needs of inmates were treatment levels 4 through 6. The generally high treatment needs demonstrated in this sample would be expected among inmates because they represent the extreme end of the criminal justice population. It would not be expected that inmates would require level 2 treatment, which integrates only education. The higher levels incorporate the psycho-educational component but additionally include therapy. An interesting finding revealed that female offenders are identified with higher treatment needs overall than males.

Figure 3. Estimated Substance Abuse Treatment Needs by Gender



Service Delivery

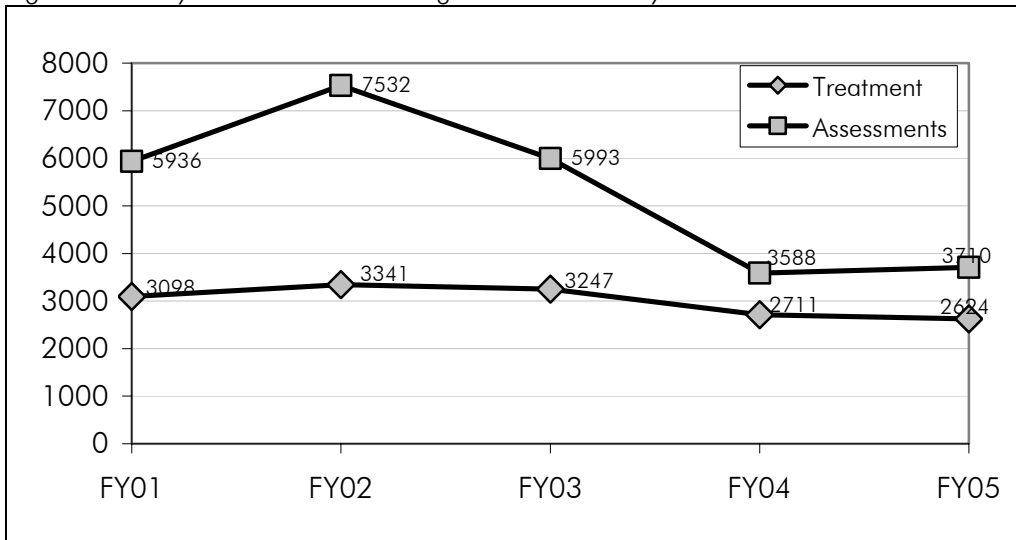
Beginning in March 2003 and continuing through June 2003, state agencies were informed that the state was suffering from a shortfall of anticipated income and budgets would be reduced. The CDOC budgets for FY03 and FY04 were revised, and CDOC was forced to cut positions. Inmate programs were cut significantly.

The Alcohol and Drug Services subprogram was among those that received the largest cuts. The FY04 budget was 40% smaller than previous years. Because of these cuts, Alcohol and Drug Services was compelled to vacate positions and lay off staff at the beginning of FY04. The result was a dramatic decrease in the substance abuse treatment services provided to offenders.

Because TCs have been federally funded and demonstrated both nationally and locally their treatment effectiveness, Alcohol and Drug Services prioritized funds to keep those programs at full capacity. Outpatient treatment services were reduced at some facilities and totally eliminated at others. There were some increases as FLCF and TCF reached operational capacity during FY03, and private prisons were funded through their overall contract with the state and therefore unaffected by subprogram budget cuts.

Figure 4 displays this reduction in assessment and treatment services across a 5-year span. Assessments in particular declined in FY03 and FY04. Although less dramatic, treatment delivery decreased as a function of the budget cuts.

Figure 4. Five-year Alcohol and Drug Services Delivery Rates



Substance abuse treatment services were available at most CDOC prison facilities. The availability of services was examined using discharge summary data because enrollment data is not uniformly available and discharge data gives a more complete depiction of inmates' involvement in treatment. Figure 5 breaks down program terminations for each treatment modality by gender. Level 4 treatment was the predominant modality available within CDOC during FY05.

Termination reasons for FY05 program discharges were examined by treatment level (see Table 2). Transfers noted in the figure are usually related to inmate movements between facilities or release to a community center or parole. Discharges attributed as "other" include offenders who were terminated for medical reasons or referred to treatment elsewhere. Most treatment participants successfully completed treatment; however, level 6 participants quit or were expelled at a higher rate than other treatment modalities. This finding is consistent with the intensity of the TC modality. Because participation in TC is voluntary, offenders struggling with the challenges and structure of the modality tend to drop out, regardless of sanctions that might ensue. Participants who do not comply with the program rules are subject to termination by staff in order to maintain the required positive peer culture.

Figure 5. Program Discharges by Treatment Level (N =2,624)

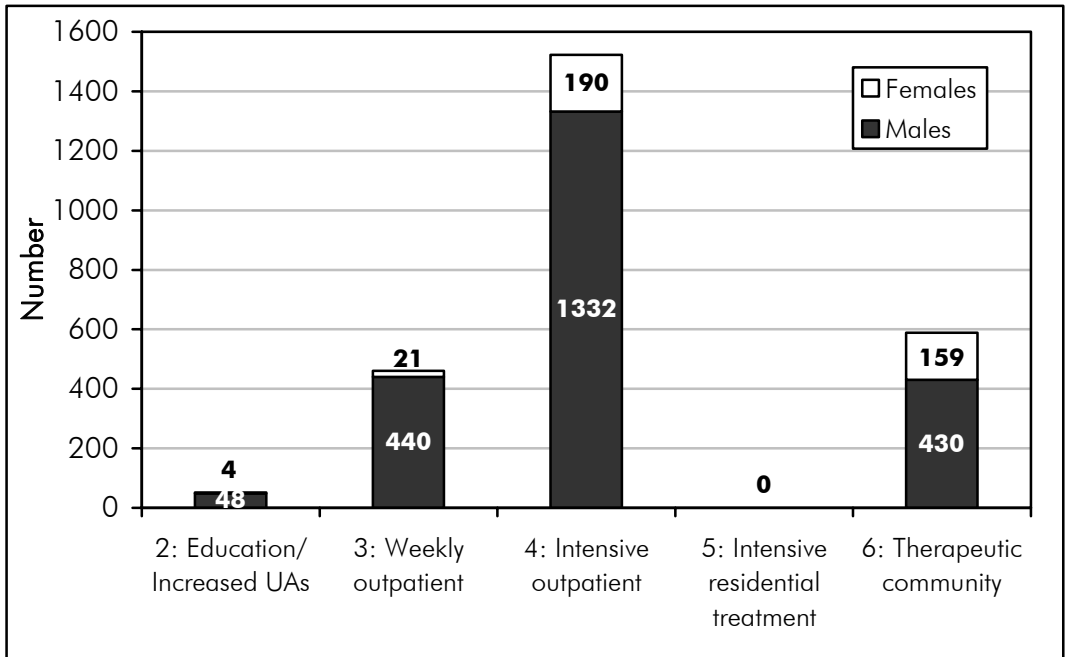


Table 2. Termination Reasons for FY05 Discharges (N = 2,624)

	2: Education (n = 52)	3: Weekly outpatient (n = 461)	4: Intensive outpatient (n = 1,522)	6: Therapeutic community (n = 589)	Total
Finished	56%	83%	85%	40%	74%
Transferred	10%	3%	8%	20%	9%
Quit	17%	1%	2%	10%	4%
Expelled	0%	0%	1%	19%	5%
Other	17%	13%	4%	11%	8%

Treatment discharges were separated into two groups, therapeutic community and education/outpatient, and examined for all CDOC facilities (see Figure 6). Although offender assessment services were provided at DRDC, treatment services were not, given that facility resources are dedicated to processing prison admissions. Services were not provided at CCC, CCF, CSP, CWCF, RCC, and SCC due to budget cuts and staff vacancies.

Length of stay is an important predictor for success in any treatment modality. Generally fewer contact hours were associated with less intense treatment; level 2 had a mean of 64 hours, level 3 had a mean of 60 hours, and level 4 had a mean of 86 hours. Level 6 programs are much longer in duration, with the mean length of stay averaging 209 days.

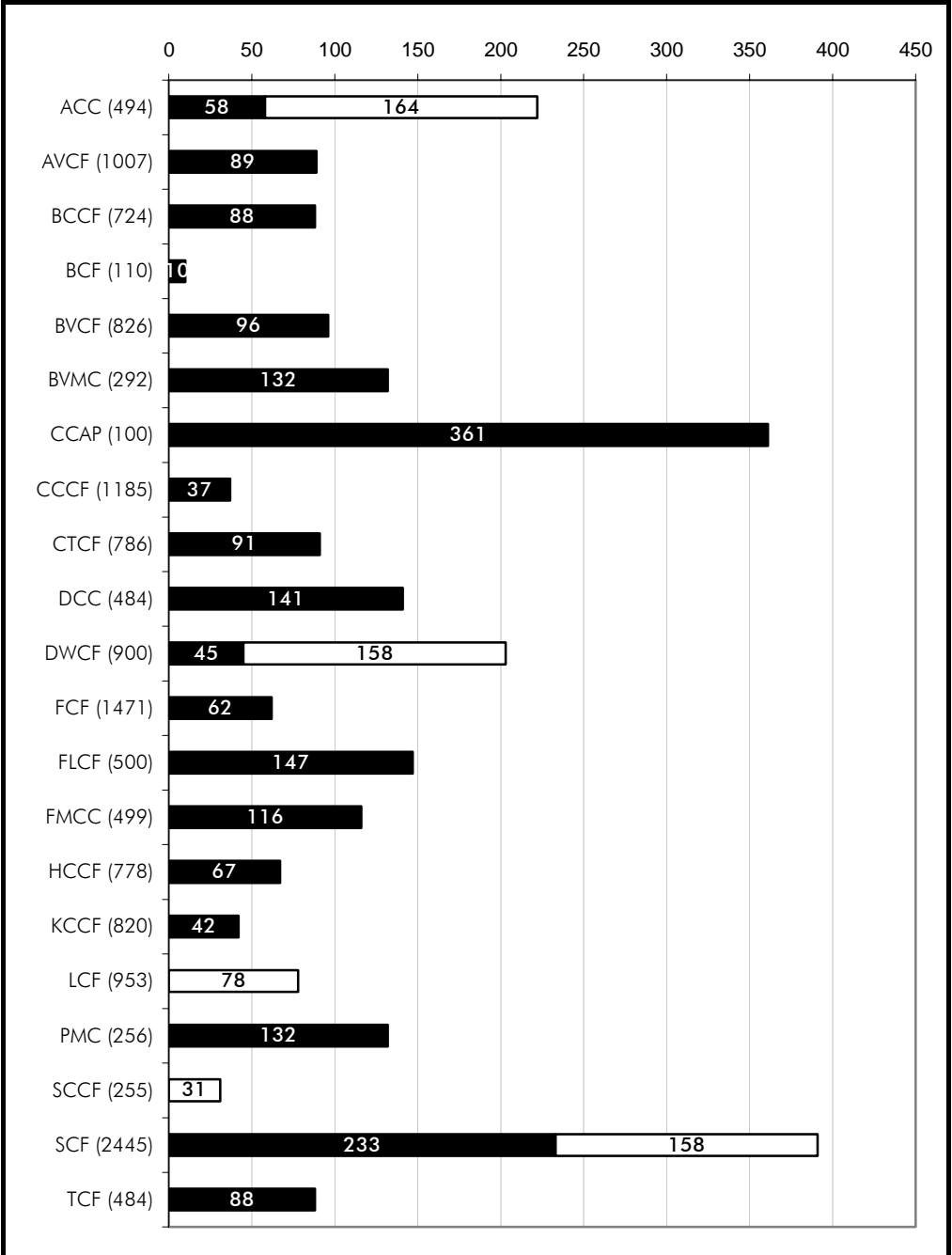
Offender needs to modality matching patterns were examined to determine how often inmates accessed programs that met their treatment needs. Of the 2,624 treatment discharges in FY05, 313 cases were excluded due to missing assessment data, multiple episodes for a single offender, or participation in a treatment program which could not be categorized into a treatment level of 2 through 6.

Table 3 shows matching patterns for FY05 treatment participants. Percentages on the diagonal represent accurate matching of need to modality; those below the diagonal represent inmates who received more intense services than required while those above received less intense services than needed.

Table 3. Comparison of Offender-to-Modality Matching Patterns (N = 2,311)

Rendered Services	Assessed Need					
	2	3	4	5	6	7
2: Education/Increased UAs	0%	0%	1%	0%	0%	0%
3: Weekly outpatient	0%	2%	10%	4%	2%	0%
4: Intensive outpatient	0%	4%	37%	11%	4%	0%
5: Intensive residential	0%	0%	0%	0%	0%	0%
6: Therapeutic community	0%	0%	1%	13%	9%	1%

Figure 6. Program Discharges by Facility (N = 2,624)



APPENDIX A

Acronym	Facility
ACC	Arrowhead Correctional Center
AVCF	Arkansas Valley Correctional Facility
BCCF	Bent County Correctional Facility
BCF	Brush Correctional Facility
BVCF	Buena Vista Correctional Facility
BVMC	Buena Vista Minimum Center
CCAP	Colorado Correctional Alternative Program
CCC	Colorado Correctional Center (Camp George West)
CCCF	Crowley County Correctional Facility
CCF	Centennial Correctional Facility
CSP	Colorado State Penitentiary
CTCF	Colorado Territorial Correctional Facility
CWCF	Colorado Women's Correctional Facility
DCC	Delta Correctional Center
DRDC	Denver Reception and Diagnostic Center
DWCF	Denver Women's Correctional Facility
FCF	Fremont Correctional Facility
FLCF	Fort Lyons Correctional Facility
FMCC	Four Mile Correctional Center
HCCF	Huerfano County Correctional Facility
KCCF	Kit Carson Correctional Facility
LCF	Limon Correctional Facility
PMC	Pueblo Minimum Center
RCC	Rifle Correctional Center
SCC	Skyline Correctional Center
SCCF	San Carlos Correctional Facility
SCF	Sterling Correctional Facility
TCF	Trinidad Correctional Facility
YOS	Youthful Offender System

**Colorado Department of Corrections
Office of Planning and Analysis**

**2862 South Circle Drive
Colorado Springs, CO 80906
<http://www.doc.state.co.us>**