

Solutions: An intensive substance abuse program

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The Substance Abuse Program for Federally Sentenced Women was developed in 1995 to meet the needs of women with moderate substance abuse problems. In place at the Edmonton Institution for Women (EIFW) since 1996, the program has been successful enough to investigate its applicability to more severe drug and alcohol addictions.

Background

A needs assessment for a more intensive substance abuse program at EIFW was conducted through a series of focus groups, which explored the following questions:

1. Is there a need for a more intensive substance abuse program at EIFW?
2. What do offenders feel would be of importance in an intensive substance abuse program?
3. What do staff and management believe to be the needs of the offenders and of the institution in terms of substance abuse programming?

Five focus groups were held — three with offenders, one with staff, and one with management. Those offenders who participated in the focus groups also engaged in a brief written survey to identify the topics in which they were most interested.

Several key issues emerged from the focus groups. Safety within the group setting, in terms of sharing personal vulnerability was an important issue for offenders, as were holistic healing, longer-term programming, choice and community links. Staff and management also identified safety within the group, need for longer-term programming and community links as significant concerns.

Based on the information gleaned through the focus groups, the needs assessment concluded, "There are a diverse, and sometimes

competing, range of needs and wants for an intensive substance abuse program. However, all focus group participants recognize the need for an intensive program. A program that can meet the needs of all key players will require a program design that is innovative and non-traditional."

Two important recommendations resulted from the needs assessment:

1. That an intensive substance abuse program be developed. This program would be part of a continuum of substance abuse programs within the system and would be congruent with the Substance Abuse Program for Federally Sentenced Women and the Community Component of that program.
2. That any intensive substance abuse program have in its design the following characteristics:

- inmate-centredness, individualization and empowerment;
- accessibility;
- flexibility;
- content that addresses the underlying factors of substance abuse (skill deficits, cognitive distortions, abuse, etc.); and,
- a variety of delivery modes, including facilitator-led, self-study, participant-led, and group and individual components.

Program design

Following the needs assessment, the Solutions program was developed to help reduce offenders' relapse into substance abuse and criminality. The program's main focus is on behaviour change rather than solely on the use of substances. Solutions uses a cognitive-behavioural approach in its presentation of five independent modules:

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1. The Basics
2. Distress Tolerance
3. The Skills of Change
4. Emotions
5. Recovery Skills

Although each module builds on information presented in the previous module, they can be taken independently.

In The Basics, the participants learn about the model of change, the actions of drugs on the brain, the activator, the behaviour, the consequence chains that make up any kind of behaviour, the connection between trauma and addiction, and the cycle of addiction.

In Distress Tolerance, the participants are introduced to a variety of concrete skills that can be used for dealing with difficult situations, such as grounding and visualization techniques, breathing and distraction exercises.

In The Skills of Change, the participants create a vision of what they want their lives to be and begin setting goals that will help them achieve that vision. A major component of this module involves having the participants pick a behaviour they would like to change (preferably a behaviour unrelated to substance abuse) and then working through a process that helps them understand how to change habits successfully. This process includes identifying the good and not-so-good things about changing, creating a plan for change, and looking at the activators and the consequences of the behaviour they are attempting to change. Once the participants understand the processes of change and acquire skills for change, they can then apply them to their substance-using behaviours.

In the Emotions module, the participants are given a brief introduction to emotions and learn techniques for managing fear, anger, depression and joy.

Finally, in Recovery Skills, the participants learn a number of relapse-prevention strategies. They learn to identify a high-risk situation, to care for themselves, to ask for support, to deal assertively with unsupportive people, to make new friends, and to refuse drink and drug offers. In this module, the

participants are given numerous opportunities to practise the skills they learn through role-playing.

The five modules within Solutions are broken down into 60 two-hour workshops. Participants are given opportunities to participate in large group discussions, work in small groups or as individuals, practise new skills in role playing, and share their learning.

Along with the structured two-hour workshop, another hour is set aside each day for the participants to engage in a variety of leisure activities. This hour is called Open Time. The philosophy behind this component is that many women who use substances have difficulty using their leisure time in a productive manner. Ideally, each participant will choose how to spend her time during this part of the program. This component of the program provides excellent opportunities for establishing community links through guest lectures, recovery stories and so on. Other activities that could take place during this time include reading, sports, reflection, journal writing, cooking and crafts.

Solutions is set up to be delivered by two facilitators. This allows opportunity for another important component of the program — one-on-one counselling with participants during Open Time. During individual sessions with their facilitators, participants can clarify any questions that have arisen for them during the workshops, explore options for spending their Open Time constructively, deepen their understanding of what led them to their abuse of drugs, and develop healthy alternatives to drug use.

Program implementation

The participants for the pilot Solutions program at EIFW were carefully screened through a battery of assessment tools. Only those individuals identified as having substantial-to-severe problems with drugs and alcohol were accepted into the program. This level of addiction was determined through the administration of the Alcohol Dependence Scale, the Drug Abuse Screening Test, and the Problems Related to Drinking Scale. An intensive one-on-one interview was

also conducted with each offender who had been referred to the program and assessed as having a substantial-to-severe addiction to drugs and/or alcohol. Each participant completed a pre- and post-questionnaire that assessed personal attitudes about the effects of drug and alcohol use, levels of temptation and confidence, coping behaviors, drinking expectancy, drinking refusal self-efficacy, drinking/drug use-related locus of control, relapse attitudes and knowledge, and readiness to change.

The pilot Solutions program started on 15 February 1999, and ended on 14 May 1999. Ten women began the program; one withdrew with less than two weeks to completion. Of the remaining nine women, five successfully completed the program and four received unsuccessful completions. Overall, interest and enthusiasm in the workshops remained high throughout the 12 weeks of Solutions.

Given the nature of the institution, Open Time could not be implemented with the intended flexibility. Rather than having each participant decide individually how she wanted to spend her hour of leisure activity, the class decided together on one structured activity. Although the

women were strongly encouraged to participate in these structured leisure time activities, attendance was totally optional. This approach had limited success. Several of the women faithfully attended the optional leisure activities and appeared to enjoy and benefit from their participation. Unfortunately, those individuals who were less motivated and not capable of productively structuring their leisure time chose to return to their units during the majority of the Open Time sessions and thus experienced little growth in this area.

During the course of the program feedback data were submitted from the ten participants and the facilitators on what worked and what needed modification. At the completion of the program each participant and the facilitators were interviewed to provide program information for assessment by a substance abuse review panel. The results of this review are expected by the end of this year (1999). It is anticipated that a fully accredited, intensive substance abuse program for women will result from this review. ■

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