

## Corrections

## Gateway Continues Commitment to Research That Improves Outcomes

Gateway Foundation has always been committed to participating in research projects that demonstrate the efficacy of our interventions and develop improved outcomes through evidence-based practices. For the past year, Gateway participated in two nationally-funded treatment studies that are working to advance research into Medication-Assisted Treatment (MAT) and improve re-entry initiatives that produce a reduction in health risks upon offenders' release from prison.

## MAT Implementation in Community Correctional Environments.

For several years, Gateway's St. Louis Outpatient Program has been incorporating medication assistance to complement the traditional psychosocial treatment modalities used with addicted offenders. Due to minimal resources for other detoxification options, medication assistance has become a common practice with these clients. The treatment protocols include medications such as Suboxone, Naltrexone, and Vivitrol and vary from client to client based on individual needs and clients' responses to the medications. Gateway Foundation clinicians in St. Louis have found that medication assistance, particularly for the high number of alcohol- and heroin-dependent clients, has reinforced our methods for attacking this challenging addiction. In order to reinforce this clinically-based evidence, Gateway Foundation has partnered with Texas Christian University's (TCU) Institute of Behavioral Research (IBR) to conduct formal research into strategies to improve the implementation of MAT interventions with our population.



The current collaborative research project with TCU IBR is part of a National Institute on Drug Abuse (NIDA)-funded Criminal Justice Drug Abuse Treatment (CJ-DATS) arant (PI: Kevin Knight) and supports a patient-level outcome sub-study to complement the Medication-Implementation Assisted Treatment in Community Correctional Environments (MATICCE) protocol. The purpose of our study is to examine the patient-level impact of Medication-Assisted Treatment (with a focus on the prescription of Vivitrol®-extended release Naltrexone) for criminal iustice-involved individuals under real-world conditions.

Although the evidence base for MAT is well-established, there remains persistent skepticism within the criminal justice system about the feasibility and impact of promoting medication-assisted treatment. Thus, this study will collect data from the target population to directly answer the question most often asked by the CJ community, i.e., does enrolling probation/parole clients in MAT decrease their drug use and reduce recidivism? Through Gateway's participation in this study, we hope to not only improve our client outcomes in St. Louis, but also to provide foundational support to broaden the application of MAT in additional community corrections markets. In so doing, **Gateway continues its commitment to improving the field of correctional treatment**.

"We have a public health mandate to stop the devastating scourge of drug abuse and addiction afflicting this country, and new medications to treat addiction could go a long way to achieving this end. It is a gaping need." \*

- Nora D. Volkow, M.D. Director National Institute on Drug Abuse

\* Volkow, N.D. (2010, June 23). Treating Addiction as a Disease: The Promise of Medication-Assisted Recovery. Testimony to Congress. Retrieved from http://www.drugabuse.gov/about/legislation/legislation.html

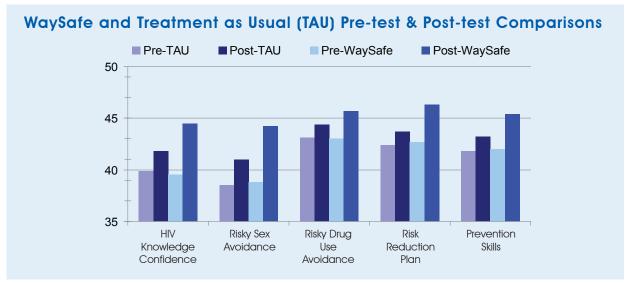


## TCU's Disease Risk Reduction.

Over the past year, several of Gateway's institutional programs in Missouri and Texas participated in Texas Christian University's Disease Risk Reduction (DRR) study (Wayne Lehman, Ph.D., Principal Investigator and Kevin Knight, Ph.D., Co-Principal Investigator), another research project funded by NIDA. The purpose of the project was to develop and test an intervention that focuses on the critical high-risk transition time between incarceration and return to the community.

The intervention tested through this study included: 1) WaySafe – a six session, manual-based interactive intervention focusing on decision-making skills that occurs during the latter phase of treatment in prison substance abuse programs and 2) Keep It Safe – a four-part toolkit given to offenders when they leave the correctional facility which is designed to reinforce decision-making skills during transition back into the community.

The WaySafe curriculum was successfully implemented in eight different prison-based substance abuse treatment programs in Texas and Missouri, with participants varying by gender, type of program, and program length. The evidence supports the effectiveness of WaySafe in improving knowledge and confidence in general; knowledge, confidence and motivation in avoiding risky sex and drug use activities; knowledge and confidence for getting tested for HIV and skills for preventing HIV; and confidence and motivation to use those skills. As compared to the Treatment as Usual (TAU) group, the WaySafe intervention had a positive effect for participants in each of the eight facilities in which it was implemented. The figure below demonstrates the similarities between cohorts (WaySafe and TAU) at pre-test, but the post-WaySafe results are significantly higher than the post-TAU scores.



Findings from the study also suggested that treatment engagement (treatment participation, treatment satisfaction, and counselor rapport) is associated with success in treatment. Specifically, the data showed that offenders with higher treatment engagement before *WaySafe* had higher scores on *WaySafe* measures at pre-test and at post-test; offenders with lower engagement who were in *WaySafe* showed significant improvement on WaySafe scores from pre-test to post-test; and offenders who participated in *WaySafe* had higher engagement scores after *WaySafe* than did offenders in the TAU group.

In addition to the efficacy results, the verbal reports received from counselors who delivered the curriculum and offenders who participated were very positive. Due to the successful implementation of this intervention, most program locations intend to continue using the *WaySafe* curriculum as a standard component of pre-release programming. *This is another example of Gateway's commitment to "moving research into practice."* 

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