

Therapeutic Community *Everything you want to know* *but were afraid to ask*

Washington State Institute on
Addictions and Treatment

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The Issue

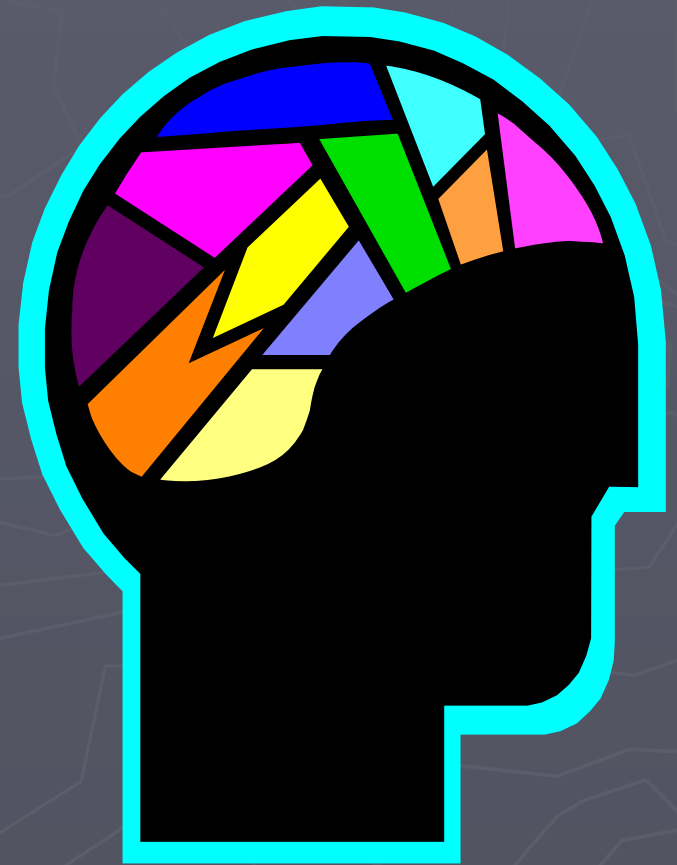
- ▶ Corrections officials are well versed in the staggering numbers of incarcerations that would not be, if alcohol and other drugs were not integral to the offenders life and subsequent offense behavior.
- ▶ More inmates in DOC are convicted of drug offenses than any other class of crime.
- ▶ Given the severity of the addiction problem and the absolute essential and critical need to fully intervene on all offender behavior, the Washington State Department of Corrections must reconsider its current practices and approach to behavioral and custody interventions for offenders.

The Need

- ▶ The Department of Corrections is often the institution of last resort for addicted men and women.
- ▶ It is also often the final stop on the downward physical, psychological and social spiral that hijacks the lives of many of society's most vulnerable individuals.
- ▶ The failure to comprehensively address the integrated addiction, mental and social disorganization of these offenders will simply result in the continued recycling of the offender
- ▶ In the absence of treatment, 75% of released, addicts will return to crime within 30 days of release to the community. (NIDA; 2003) Others will die, quickly, and the rest will die slowly and at great community cost.

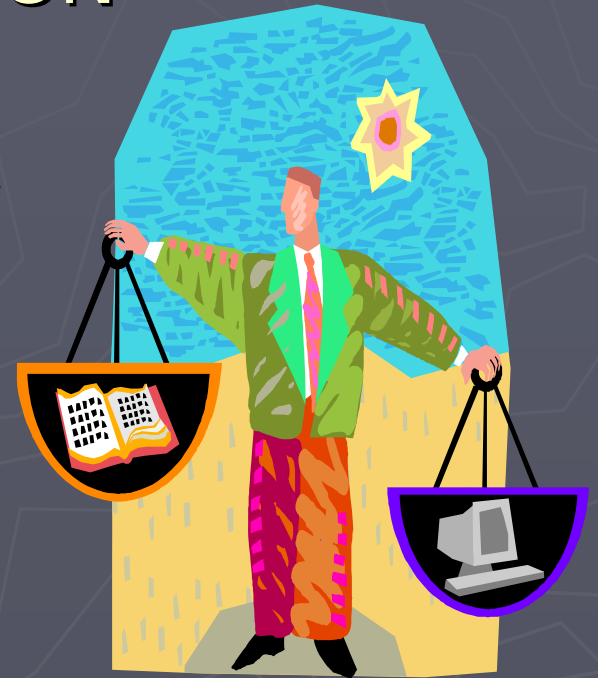
Three chronically relapsing disorders

1. addiction
2. mental illness
3. criminal behavior



AN ALTERNATIVE MANAGEMENT SYSTEM FOR PRISON ADMINISTRATION

Therapeutic Community
AKA
Right Living



Therapeutic Communities are not

HUG A THUG
programs



THERAPEUTIC COMMUNITITES ARE.....

- ▶ An alternative management style
- ▶ A behavioral intervention and shaping tool
- ▶ A way of thinking and living
- ▶ A method to promote accountability
- ▶ A part of a clinical intervention
- ▶ Team



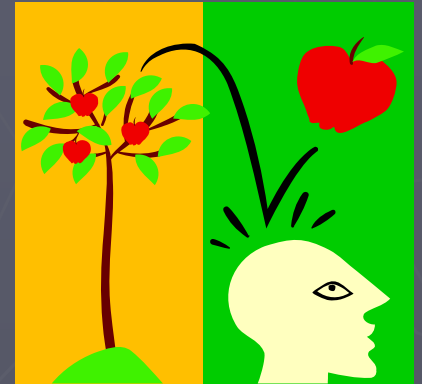
Of course there is a theory involved

The Social Learning Theory

Lifestyle change occurs within the social context.

Negative patterns, attitudes, and roles were not acquired in isolation, nor can they be altered in isolation.

Learning occurs and depends on the individual's interaction with and continual practice of new behavior and thinking patterns, roles and attitudes



Community as Method

The profound distinction between the TC and other treatments and communities is the use of community as a method for changing the whole person

“Therapeutic Community” means that the community itself can remedy and restore the individual.

This forms the basis for community as teacher

Learning that leads to lasting intrinsic change is not passive, it is not rote response, it is personal, active and responsible

Change takes place through an orderly, systemic manner of operation and applying TC techniques and practices as part of everyday life



Therapeutic Communities

- ▶ Have evolved into an alternative management system for prison administration
- ▶ They combine the necessity of security and deterrence with social learning
- ▶ They create a safe, habilitative treatment and work environment for the offender and correctional staff



Philosophy and Mission

- ▶ Every interaction with every offender, by every employee, volunteer, and other offender, is the critical moment for intervention for positive pro-social gain
- ▶ This requires full and rigorous investment by all corrections staff and administrators
- ▶ The investment requires the agency to reframe how business with offenders is conducted



An Approach

- ▶ Traditional confinement and custody practices, risk assessments, numerous evaluations, independent programming and various interventions are not, unto themselves, effective in offender habilitation
- ▶ Rising social and incarceration costs require corrections officials to take offender intervention and habilitation efforts to the next level
- ▶ The next level is not necessarily new but may be viewed as daunting and unsettling for many correctional traditionalists
- ▶ The next level, is full assimilation of prisons within the Right Living model, Alternative Correctional Management Systems, TC

Rehabilitative Approach

- ▶ Introduction of TC as a management approach finds a higher level of job satisfaction among correctional staff
- ▶ High level of job satisfaction have been linked to positive outcomes for corrections, including increased organizational commitment, positive view of offenders, greater compliance with organizational rules and goals
- ▶ TC reports to yield a decrease in the frequency of sick leave, less inmate on inmate and inmate on staff assault and less disruptive behavior of inmates
- ▶ The outcome finds prisons that operate TC have decreased staff turnover

Alternative Management

- ▶ Any alternative management system aimed at implementing and/or expanding substance abuse treatment in a correctional environment represents an effort to bring together two systems (i.e. corrections and treatment) that have historically conflicting core philosophies.

Environmental Effects

- ▶ Operating a therapeutic community in prison has positive environmental effects in the reduction of institutional disorder and increase in overall manageability of offenders.
- ▶ It is evident that this model of substance abuse treatment (TC's) benefits not only offenders and society with lowered recidivism and relapse rates, but also lowering organization, work and environmental related sources of stress which equals reduced occupational risk for custody and treatment staff personnel.

THE TC MODEL

*COMMUNITY AS
METHOD*

*COMMUNITY AS AGENT OF
CHANGE*

VIEW OF RIGHT LIVING

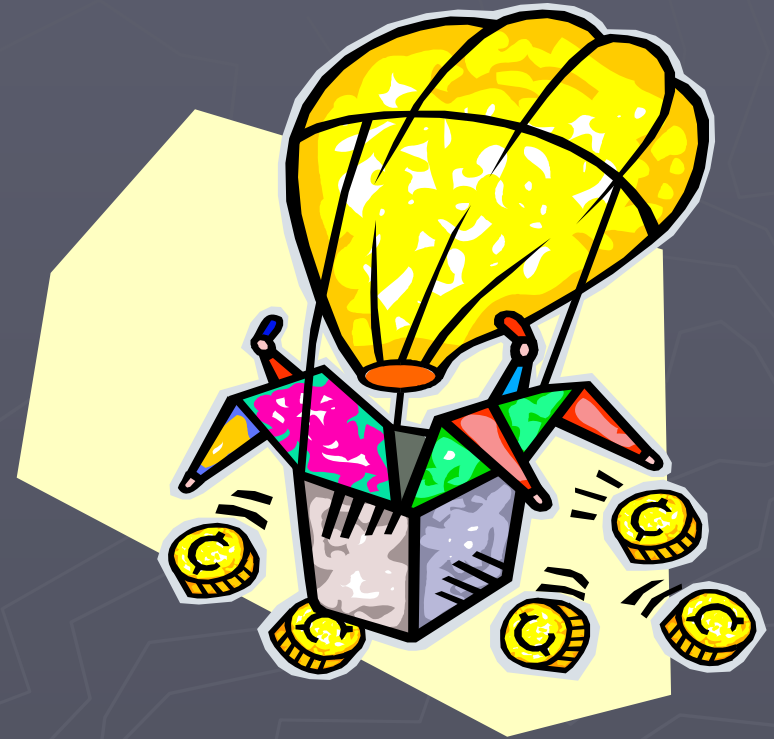
In the view of right living, certain beliefs and values are essential to recovery, personal growth, and healthy living.

“Right Living” refers to an understanding that a particular lifestyle and behavioral choice lead to physical and mental health, and a positive and pro-social outlook on life.



Community as the Agent of Change

- ▶ The TC members engage in the process of change primarily with their peers.
- ▶ Education, training, and therapeutic activities occur in groups, meetings, seminars, job functions, and recreation.
- ▶ The learning and healing experiences essential to recovery and personal growth develops in the community.



The misconception is that “inmates supervise inmates”

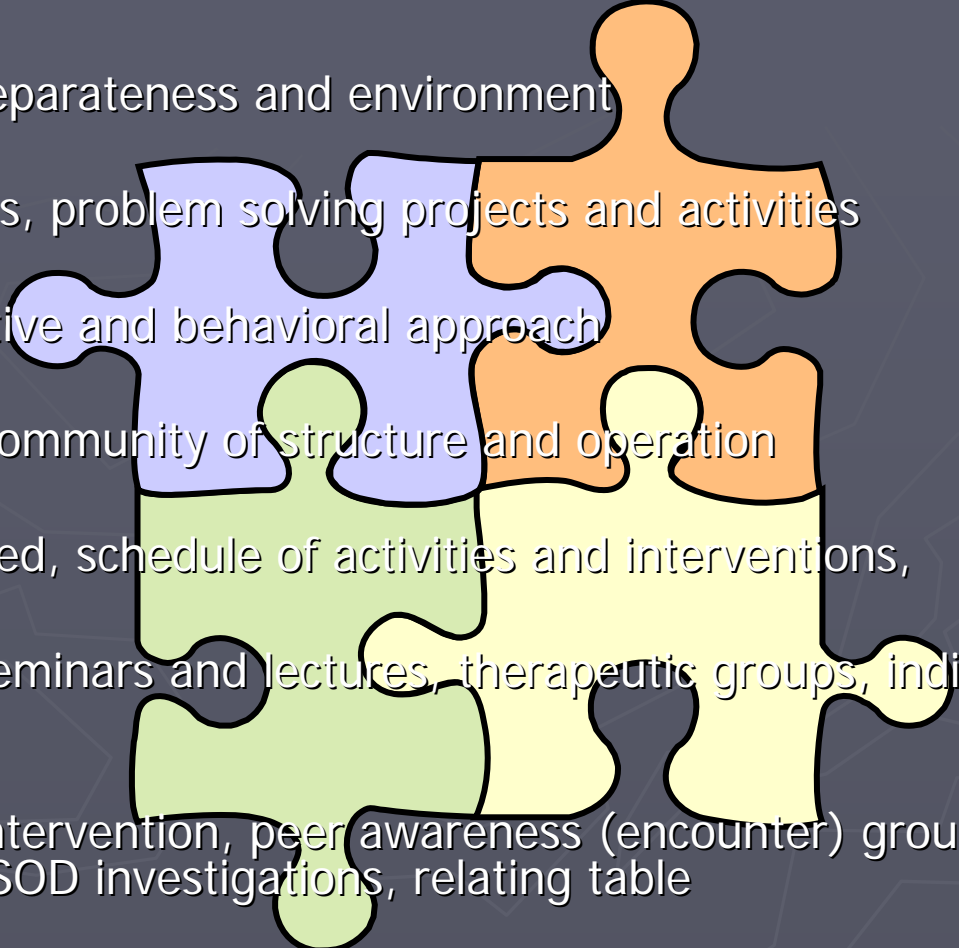
Rational authority always supervise the community

Community members hold each other accountable through the levels of intervention and by role modeling healthy behavior.

In the role of community managers, family members manage what each other is doing through their assigned roles, for example, peer support groups, crew leaders, & upper structure direct the community members in their daily routine and agenda's.



Basic TC Elements

- 
- ▶ Community separateness and environment
 - ▶ Common goals, problem solving projects and activities
 - ▶ Phased cognitive and behavioral approach
 - ▶ A hierarchal community of structure and operation
 - ▶ A daily, planned, schedule of activities and interventions,
 - ▶ Educational seminars and lectures, therapeutic groups, individual and group counseling
 - ▶ TC levels of intervention, peer awareness (encounter) groups, learning experiences, SOD investigations, relating table
 - ▶ Self help fellowships (i.e., AA alcoholic anonymous) work and education.

14 Components HB P. 26

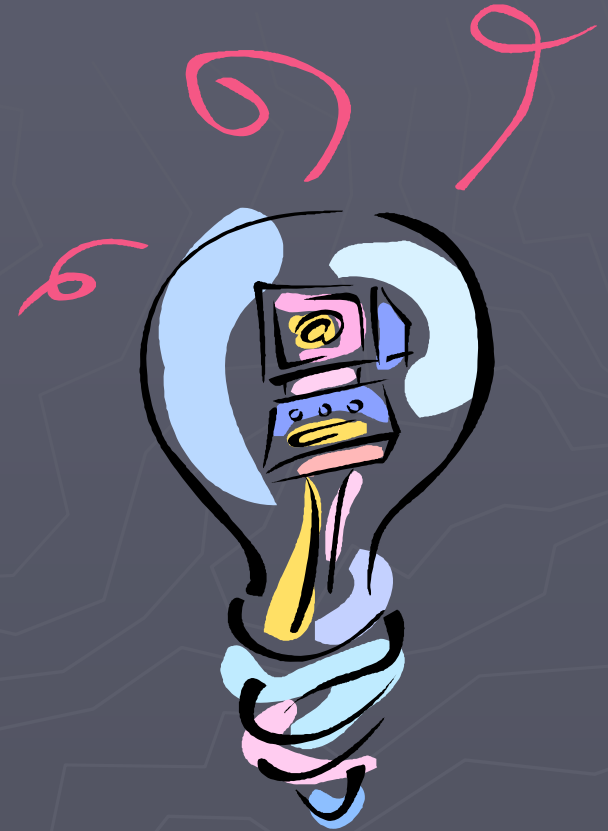
- 1. Community Separateness**
- 2. Community Environment**
- 3. Community Activities**
- 4. Peers as Community Members**
- 5. Staff as Community Members**
- 6. A Structured Day**

14 Components HB P.26

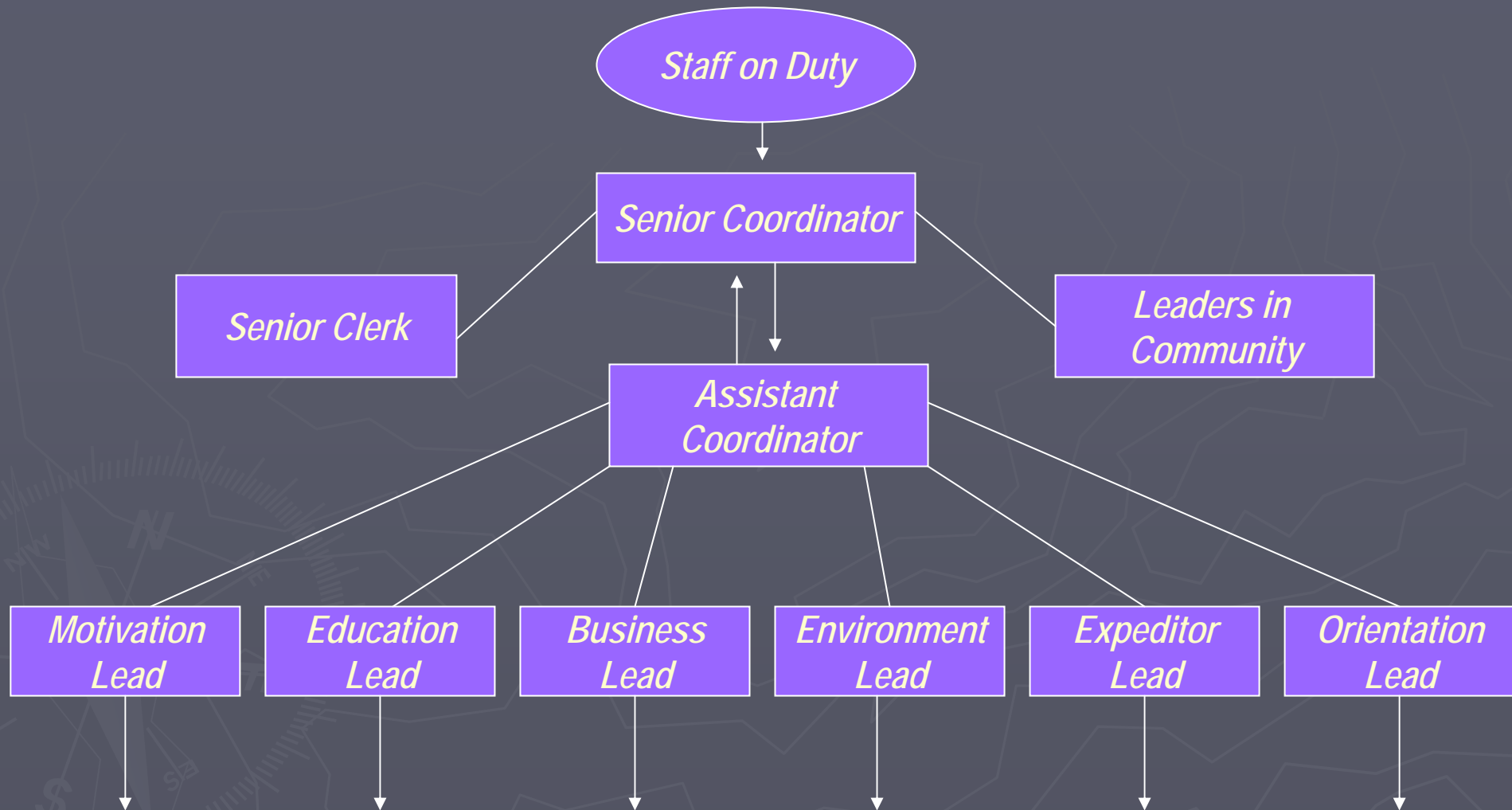
- 7. Phase Format**
- 8. Work as Therapy**
- 9. RL Community Concepts**
- 10. Levels of Intervention**
- 11. Out of Respect**
- 12. Emotional Growth Training**
- 13. Planned Duration of Treatment**
- 14. Continuance of Recovery**

9 Concepts

1. Community Member Roles
2. Awareness
3. Use of Membership as Role Models
4. Community as the Agent of Change
5. Relationships
6. Culture and Language
7. Use of Open Communication
8. Organization, Time Management, Work Ethic
9. Community and Individual Balance



Structure Board



Family

- ⇒ Family related terms are prominently used among participants for each other such as family, brother/sisters keeper.
- ⇒ Former residents of TC's often refer to their program as the place where they "grew up" rather than where they recovered from their addiction.
- ⇒ During their TX members gradually extend their family orientation beyond their immediate peers to the larger social group in residence, referring to the entire program as family.
- ▶ Family And Community Become Interchangeable

What is it about right living that you cannot support ?

- ▶ Common beliefs, shared norms and values serve as explicit guidelines for teaching right living.
- ▶ Rules, regulations and community norms protect the physical and psychological safety of the community.
- ▶ Common language
- ▶ Structure and accountability
- ▶ You are your brothers keeper



Staff in Perspective

The boundary between staff and peers is explicit

Staff members have the highest status in the community

Staff are the ultimate authority in the clinical and community management of the facility

Staff are responsible for the management and quality of the community

Staff and residents are to model right living and recovery behaviors

Staff and residents are equal as people who are involved in personal change.....



Staff Roles

STAFF ARE NOT CONSULTANTS

- ▶ RATIONAL AUTHORITY
- ▶ COMMUNITY MEMBERS
- ▶ TEACHERS/STUDENTS
- ▶ DEMONSTRATORS (TEACH BY DOING)
- ▶ MOTIVATORS
- ▶ ROLE MODELS
- ▶ COMMUNITY BUILDERS
- ▶ FOSTER POSITIVE RELATIONSHIPS



COMMUNITY BEHAVIOR EXPECTATIONS

PROGRESSION OF RIGHT LIVING INTERVENTION TOOLS

Morning Meeting



- ▶ This meeting is designed to start each day on a positive note. Morning meetings inspire confidence and break down fears that members may have about speaking. Morning meetings support community consistency and cooperation. Any Department of Corrections and contract staff may attend and participate.
- ▶ Morning and afternoon meetings are organized and managed by the community using proper communication through the use of proposals.
- ▶ No assignments, presentations, or announcements are facilitated without an approved proposal.
- ▶ An assigned staff member is always present at the morning meeting.
- ▶ Morning meetings begin with “Good Morning Community.” The scope of the meeting consists of daily topics, motivational energizers, requiring individual and group participation that promotes good feelings, laughter, and fun.

Community Behavior Expectations

- ▶ The *Community Behavioral Expectations* are the foundation of the safety of all community members and security of the community.
- ▶ The Department of Corrections' rules direct, and are the foundation of, the community behavioral expectations.
- ▶ All DOC rules and regulations will be followed, and if violated, the consequences as outlined by the DOC WAC policy and procedure will result.

Community Behavior Expectations

HB 18

- ▶ As monitors of the entire community, each member is expected to observe the behavior and attitudes of other members for signs of self-destructive behavior, and confront these directly through the proper levels of intervention.
- ▶ To ignore negative behavior in others not only undermines the integrity of the community, but threatens the recovery of the individual who ignores the self-destructive behavior of other community members.
- ▶ Offenders and addicts developed personal patterns and habits of secrecy and dishonesty which are related to their difficulties in trusting and being trusted. Condoning self-destructive behavior is disrespectful to self and the community.

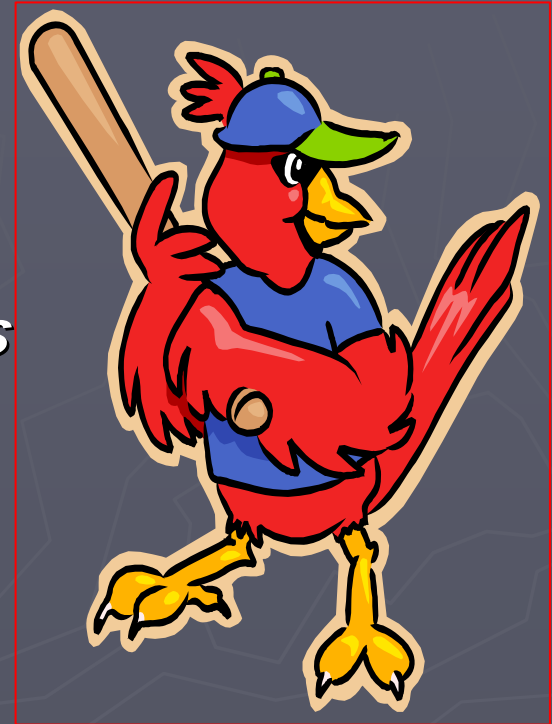
Community Rules

"Right Living" brings about stability, and living with stability requires standards and boundaries.

- ▶ The *Community Behavioral Expectations* are the foundation for the safety of all community members and security of the community.
- ▶ The Department of Corrections' rules are the foundation of the community behavioral expectations.
- ▶ All DOC rules and regulations will be followed, and if violated, will result in consequences outlined by DOC policy
- ▶ There are three categories of behavior expectations in a Right Living Community (RLC): **CARDINAL, MAJOR, & HOUSE**

COMMUNITY BEHAVIOR EXPECTATIONS p 18

- ▶ CARDINAL – For the Safety and Security of the Community
- ▶ MAJOR – Standards & *Boundaries for the Behavior of the Community*
- ▶ HOUSE RULES – Keep the Environment of the Community Safe



Cardinal Rules

For the Safety of the Community HB 18

At the top of the list in a RLC are those expectations considered absolute. These are called *Cardinal Rules* and violating these will always result in a DOC infraction.

CARDINAL RULE

CARDINAL RULES – For the Safety of the Community.

At the top of the list in a RLC are those rules considered absolute. These are called Cardinal Rules and breaking these results in very serious consequences.

DATE / time of Cardinal Rule violation: _____

Family member: _____

FROM: _____

Behavior: (Provide description of specific behavior)

TIME/DATE of DOC notification: _____

DOC staff signature: _____

Major Rules

Set the behavior and boundaries for the community

These are the rules that govern how people will interact with each other and how they go about their daily lives in the RLC, in order to maintain a safe environment. Whether a DOC infraction is upheld or not, there may be RLC levels of intervention implemented.

House Rules HB 20

Keeps the Environment and the Community Safe

House rules involve how jobs are performed, how people address each other, how feedback is given, and things like standing if you get sleepy in a group activity, use of phones, etc.

Levels Of Intervention Are Used To Extinguish Self Destructive Behavior



Therapeutic levels of intervention

- ▶ are a progressive order of clinical interventions
- ▶ support the safety and security of the community
- ▶ assist in raising the awareness of the family who is acting in a self defeating self destructive pattern
- ▶ promote choice and consequences

Behavior Interventions Facilitate

- BEHAVIOR SHAPING
- CONFRONTATION ~ of self destructive behavior
- RESPONSIBILITY
- ACCOUNTABILITY
- PROMOTES RIGHT LIVING
- “BROTHER/SISTER’S KEEPER”

Levels of Intervention

- ▶ Are step by step progressions in attaining healthy behavior change.
- ▶ Both staff and family members follow these levels when helping another family member become aware of self destructive self defeating behavior.

**Step 1: Verbal Awareness
table**

- ▶ **Step 2: Written awareness**
- ▶ **Step 3: Peer Awareness**
- ▶ **Step 4: Clinical Intervention**

Relating



When writing awareness' focus on the self-destructive behavior, not the rule number.

How to raise an awareness and how to respond in a healthy and appropriate manner:

Any time there is an awareness, of any level, raised on any self-destructive self-defeating behavior the process goes like this:

1. The giver needs to inform the receiver by saying, “Out of respect, I am raising your awareness for.....”
2. The receiver then gives the proper response, “Thank you, I will take care of that” which does not mean they own the specific behavior, it means they acknowledge the awareness – it makes a community member STOP and THINK before REACTING.
1. The giver then needs to write on the awareness slip whether the proper response was given or not, and place slip in the designated awareness box.

LEVEL ONE: VERBAL AWARENESS ~ p 87

VERBAL AWARENESS – LEVEL 1

DATE AND TIME of self destructive behavior: January 10, 0000 -- 9:00 am

TO: Ms Jones

FROM: Ms Doe

Self Destructive Behavior:

(Specific description of behavior) During Self discovery group I went to sit down next to Ms Jones but she stated she was saving the seat for Ms Smith, Ms Jones gave the proper response when I brought this to her awareness

“OUT OF RESPECT”

RELATING TABLE

RELATING TABLE

DATE BROUGHT TO SOD: February 9 0000

ISSUE: Mr. Jung and Mr. Chair cannot seem to speak to each other without getting angry with one another, they are on the same crew (business)

BETWEEN: Mr. Jung & Mr. Chair

SELF DESTRUCTIVE BEHAVIORS : Lack of communication skills that are healthy and appropriate

DATE OF RELATING TABLE: February 10, 0000

COMMITMENT TO CHANGE Mr. Jung and Mr. Chair were able to express their feelings of frustration with each other in a healthy and appropriate way, and decided to role model a skit to the family about not telling each other how they felt right away but by holding these feelings in, created frustration and hostility between them. Mr. Jung did not feel Mr. Chair was actively involved in the crew work but never shared that with him. They both learned to express their feelings and listen to each other. This will be role modeled during the skit with the commitment to each other and to the family that they would keep their communications with each other open and honest.



LEVEL TWO: WRITTEN AWARENESS

WRITTEN AWARENESS – please ✓LEVEL 2 ✓LE Level 3 PA

Date And Time of Self Defeating Behavior: August 15 0000 1:15pm

TO: Mr. Belkin

From: Mr. Gateway

Self Destructive Behavior:

(Provide specific description of behavior) While Mr. Belkin was working on the structure board in the hallway he dropped the name tags and cussed up a storm in front of GP and visitors. Mr. Belking gave the proper response.

Witness to event: Mr. State and Counselor May witnessed this event.

SOD initial and date of interview: KH August 16 0000 9 am

Learning experience or PA assignments commitments and date of presentation – PA

Mr. Belkin identified his self destructive behavior as impulsive and disrespect to himself and the family, he agrees to the following learning experience, since Mr. Belkin is poetically skilled he will compose a poem about the benefits of thinking before reacting and how profanity is the “poverty of the intellect.” This is to be presented to the family morning meeting on August 18 at 7:30 am.

LEVEL THREE: WRITTEN AWARENESS

WRITTEN AWARENESS – please LEVEL 2 LE Level 3 PA

Date And Time Of Self Defeating Behavior: May 14 0000 7 am

TO: Mr. Makeover

From: Mr. Health

Self Destructive Behavior:

(Provide specific description of behavior) While walking to work I witnessed Mr. Makeover talking to GP while going to breakfast, and he gave me the proper response while rolling his eyes

Witness to event: Mr. Planner and Mr. Glass

SOD initial and date of interview: KH May 15 0000 9 am

Learning experience or PA assignments commitments and date of presentation – PA

SOD Interview: Mr Makeover owned this behavior, PA scheduled for May 17, 2000.

PUSH UP

- ▶ PUSH UP
- ▶ DATE November 2, 0000
- ▶ TO: Mr. Desk
- ▶ **Behavior** unselfishness and empathetic: I witnessed Mr. Desk (phase one) helping Mr. Tree (phase one) out by showing him how to keep his living area clean, helped make his bed, get up and ready after he learned that his girlfriend sent him a Dear John letter. They never got along before; in fact it was obvious they did not like each other. Somehow this experience changed all that, it was good to see.
- ▶ FROM: Mr. Clark

PROGRESSION OF RIGHT LIVING

INTERVENTION TOOLS HB 95

LEVEL 4 – PEER AND STAFF CLINICAL INTERVENTION

To receive a Level 4 intervention:

A community member has received a verbal awareness, a written awareness, has appeared in PA group twice, and violated the same self-destructive behavior on the same rule violation, in less than 30 days, or

The community member has violated a Cardinal Rule.

Process

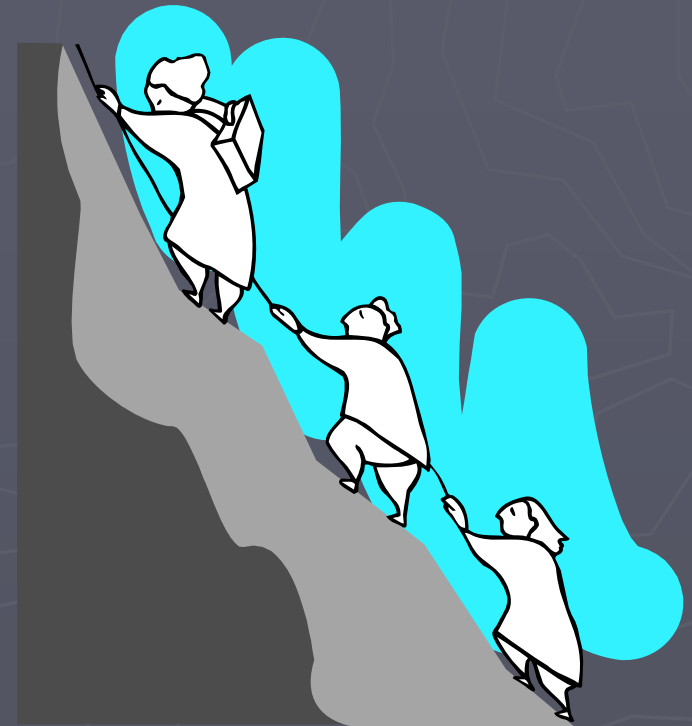
FRMT meeting to include staff involved with the community member.

This team may include community members, if applicable (Big Brother/Senior Coordinator). The group will develop a strategy prior to the intervention, which may include:

1. **Other forms of clinical interventions agreed upon by the FRMT, e.g., learning experience, service commitments, peer awareness, or a combination of existing levels of interventions.**
2. A comprehensive behavior contract on how to assist the community member in halting their self-destructive behavior. This contract may be a collaborative effort with the community member who is receiving this level of intervention.

Implementation of a TC

- ▶ Paradigm shift
- ▶ Staff
 - TC trained management
 - TC trained CDP, MH, CO, education, recreation, medical, administrative staff
 - must share same belief in system, values, model
 - walk the walk not just talk the talk
 - network and work as a team
 - no turf wars



When the prison gates slam behind an inmate,
they do not lose their human quality;
their mind does not become closed to ideas;
their intellect does not cease to feed on a free
and open interchange of opinions;
their yearning for self-respect does not end;
nor is their quest for self realization concluded.
If anything, the needs for identity and self-
respect are more compelling in the
dehumanizing prison environment.

Thurgood Marshall (Purocunier v. Martinez, 416 U.S. 396 (1974))