

2019-2020 EVALUATION REPORT



**TULARE COUNTY SHERIFF'S OFFICE
RESIDENTIAL SUBSTANCE ABUSE
TREATMENT PROGRAM**

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TABLE OF CONTENTS



	Page
INTRODUCTION	2
RSAT Program Overview.....	3
Acknowledgements	4
METHODS.....	5
FINDINGS.....	6
The Evaluation Sample.....	6
Self-perceptions about Character Change.....	9
Changes in Personal and Social Behaviors.....	10
Improvement in Characteristics Associated with Substance Abuse Treatment.....	11
Changes in Thinking and Attitudes about Criminal Behavior	13
Changes in Parent Confidence and Connectedness	14
Graduation Readiness.....	15
Participant Satisfaction Level and Feedback	16
Life Changes After Inmate Re-entry into the Community.....	20
ISSUES FOR CONSIDERATION	25



INTRODUCTION

"I got to use my time in custody in a positive way." - RSAT Participant

This report presents evaluation findings from the Tulare County Sheriff's Office FY 2019-20 Residential Substance Abuse Treatment (RSAT) program, a successful project that has been in place for the past 21 years to address the county's staggering drug problem and return inmates to the community with the necessary tools to remain clean and sober. The federally funded grant program is one of four California RSAT projects funded by the Board of State and Community Corrections (BSCC). Barbara Aved Associates (BAA), a Sacramento-based consulting firm, was engaged in 2015 as the external evaluation contractor. This report represents the second annual evaluation report of the current three-year (2018-2021) RSAT grant cycle.

Substance abuse—defined as a dependency on mind and behavior altering substances—is associated with family disruptions, financial problems, lost productivity, failure in school, domestic violence, child abuse and crime.¹ The 2019 Central Valley Community Health report for Tulare County identified substance abuse as one of the top factors that most impacts the overall health of the community.² Among youth, for example, Tulare County reports that alcohol use rates for ninth graders are well above the state average: 27. 6 to 34.3 percent of ninth graders admit to drinking alcohol in the past month.

The magnitude of the drug problem in Tulare County—inflicting damage to all aspects of communities—is considerable. Based on state prevalence estimates, 9.7% of the Tulare County adult population age 18 and older (and 13.1% for males alone) is estimated to be in need of services related to an alcohol or drug diagnosis. Income level makes a measurable difference, however. The estimated need rises to 10.7% for those living in households below 200% of poverty, and for males below the poverty level it increases to 14.5%.³

Domestic violence and substance abuse have been referred to as “a tragically common pairing.” Alcohol use, for instance, affects cognitive and physical function, reducing a person's self-control and lessening their ability to negotiate a non-violent resolution to conflicts. According to national data, alcohol plays a role in about 55% of domestic violence cases. In 2018, 41.5% of the 627 Domestic Violence Related Calls for Assistance in Tulare County involved a weapon.⁴

Drug overdose deaths, an important indicator of the size of prescription and illicit drug use, are a leading contributor to premature death and are largely preventable. In 2019, the reported drug overdose deaths in Tulare County represented a mortality rate of 9 per 100,000 population), with the rate for non-Hispanic whites nearly double those of Hispanics.⁵ According to state public health data, the 2017 drug-induced death rate of 10.8 (a 3-year average) landed Tulare County in the 12th rank among California counties. The percent of alcohol-driving deaths, 30%, in the county matched the statewide average.⁶

¹ Healthy People 2020 Topics. <http://www.healthypeople.gov/2020/leading-health-indicators/2020-lhi-topics/Substance-Abuse>

² https://www.hospitalcouncil.org/sites/main/files/file-attachments/final_central_valley_chna_3.18.pdf?1553209460

³ California Mental Health and Substance Use Needs Assessment: California Behavioral Health Prevalence Estimates by County. Technical Assistance Collaborative and Human Services Research Institute. January 2012.

⁴ <https://openjustice.doj.ca.gov/data>

⁵ Robert Wood Johnson Foundation. <http://www.countyhealthrankings.org/rankings/data/CA>

⁶ Ibid.

Drug treatment studies for inmate populations have found that when programs are well designed, carefully implemented, and utilize effective practices they can reduce relapse; reduce inmate misconduct; increase the level of the offender's stake in societal norms; improve relationships; and improve health and mental health symptoms and conditions.^{7,8} Substance abuse treatment, particularly when integrated with health interventions, cognitive behavioral therapy, social skills training, case management, and the use of medications to treat both mental and substance use disorders, has become a critical part of correctional programs as Tulare's RSAT program demonstrates. The RSAT program, supported by the criminal justice community, was designed to deliver a continuum of services during incarceration—substance abuse treatment and recovery services; social, cognitive and behavioral counseling; life skills training; health-related education; and relapse prevention—and to facilitate successful re-entry into community living.

Reoffending is a key criterion in evaluating correctional substance abuse treatment programs though the challenge of measuring it is well recognized. Substance-addicted inmates are at a high risk of recidivism following their release from incarceration though post-release treatment in the community is an important variable. Many factors influence an inmate's likelihood to recidivate, such as education, race, age and crime risk.⁹ However, studies indicate the return-to-prison rate is much lower for inmates who participate in inmate substance abuse treatment programs, particularly those that include elements like encouraging inmates to develop marketable job skills and helping them maintain family ties while incarcerated, as RSAT does.

The timing of this evaluation plan coincided with one of the most historic and unprecedented events as the crisis of COVID-19 unfolded—with uncertain long-term health, social and financial impact to the county. This emergency has presented unique challenges to Tulare County's justice system as well, including limited court calendars, arraignments being held via video conference and, importantly, some inmates eligible for early release. The impact to the evaluation of early entry to the community, as you will read below, resulted in a lower number of inmates with full RSAT participation and challenges for home visits by Parole and other staff.

RSAT Program Overview

Tulare County Sheriff's Office RSAT program is located within a medium level custody facility for sentenced male offenders with a maximum capacity of 64 beds. In FY 2019-20, 107 inmates enrolled in the program; 80 of the graduates entered the Aftercare portion. There are four full-time counselor positions (not all currently filled) who work in the unit, which when fully staffed represents an average staff-to-inmate ratio of 1:15.

The program utilizes evidence-based practices in using Residential Drug Abuse Program (RDAP), Errors in Criminal Thinking, Thinking for Change, and Transition Curriculum as the primary treatment curricula. Champions, a non-profit treatment agency based in Hanford, provides treatment services for the program under a contract with the Sheriff's Department. Although a 6-12 month treatment span is generally believed to be optimal, the RSAT treatment program considers enrollment in the program for a minimum of 4 months a good marker, and thus it is the required time commitment for graduation. Staff is careful when inmates are placed in the program to ensure their release is scheduled during this timeframe. (Note: in previous years we tested and then with mutual agreement based on poor results ended the inclusion of some inmates participating less than 4 months; therefore, only the RSAT graduates are included in this evaluation dataset.)

⁷ https://www.bop.gov/inmates/custody_and_care/docs/annual_report_fy_2012.pdf

⁸ Inciardi JA, Martin SS, Butzin CA. Five-year outcomes of therapeutic community treatment of drug-involved offenders after release from prison *Crime & Delinquency*. January 2004;50: 88-107.

⁹ <https://www.bsa.ca.gov/pdfs/reports/2018-113.pdf>

Inmates are assessed for enrollment in RSAT using the Correctional Assessment and Intervention System™ (CAIS) system¹⁰ to determine appropriate placement into the program. The program has established a minimum of 70% assessed as moderate-to-high risk of offending.

About three-quarters of the inmates have formal Probation commits that allows the capability for follow-up upon release. RSAT staff attempt to track aftercare for 1 full year following program graduation—to the extent that participants are reachable.

Other programs are also offered to inmates that complement and strengthen the RSAT skills. For example, some of the men participate in the Sheriff's Department Gang Awareness Parenting Project. This First 5 grant-funded program works with both inmates and their family members (outmates) to increase knowledge of the effects of violence on their children and reduce stress related to parenting and family life.

Acknowledgements

The external evaluation team consisted of Barbara M. Aved, PhD, MBA, principal investigator, and Jared Funakoshi, BS, who provided research and data entry assistance. Larry S. Meyers, PhD, an Associate with BAA, provided topic area expertise. The internal team from the Tulare County Sheriff's Department included Susanna Reyes and Nicole Salinas, Inmate Programs Manager and Inmate Program Specialist, respectively. We are very appreciative of the staff experience and cooperation in supporting the evaluation.

¹⁰ <https://www.nccdglobal.org/assessment/correctional-assessment-and-intervention-system-cais>



METHODS

"If I had to do it over again here, I'd participate more, be more involved."
- RSAT Participant

The project Evaluation Plan was reviewed at the beginning of Year 2 to determine where changes might need to be made to capture additional or different data; only minor revisions were necessary. The Evaluation Plan frames 8 main study questions that the evaluation can reasonably be expected to answer at the end of the grant period. It also identifies outcome measures, success indicators, evaluation instruments and the data collection and analysis plan for each question.

Data Source	Description of Tool	Data Collection Method
Outcome Assessment and Reporting System (OAARS)	1-4 scale pre/post assessment tool measures changes in 10 domains	Counselors observe and score at time of entry (pre) and again at discharge (post)
Six Pillars Personal Inventory	36-item pre/post rating of 6 core values, English/ Spanish	Inmate self-rating at time of entry (pre) and time of discharge (post).
Positive Characteristics Inventory	20-item scaled pre/post assessment of behaviors associated with positive characteristics	Counselors observe and record assessment scores at 1 month after entry (pre) and at the time of discharge (post)
TCU-CTS Criminal Thinking Scale	36-item pre/post self-rating instrument developed to assess cognitive functioning expected to be related to criminal conduct; ratings of statements in 6 areas	Inmate self-administered at the time of program entry (pre) and again at time of discharge (post)
Mother-Father Read Program	1-6 scale post-participation of being video-taped reading to a child to assess impact on parenting confidence and connectedness	Inmate self-administered after recording is completed and flash drive and book is mailed to inmate's home
Graduation Criteria and Rating	A rubric or scoring guide with 8 domains to assess inmate performance against a set of criteria developed to determine graduation readiness	Two counselors rate the inmate to reduce potential for bias; the final score represents an average (44 points possible)
RSAT Exit Survey	1-time opinion rating, English/ Spanish	Inmate self-administered at time of discharge
Inmate Re-entry Follow-Up Form	Rating form for tracking and documenting progress on individual participant goals	Staff contacts inmates within first week of release and monthly thereafter. Data points for evaluation are at 3 months, 6 months and 12 post discharge

Staff sent us participant scores from some of the tools which we further analyzed and prepared for inclusion in this report. For the remainder of the tools, we received raw data forms on a scheduled basis, cleaned, coded and entered the data into excel spreadsheets using appropriate data security measures, analyzed the data and applied statistical testing, and prepared the evaluation report.

FINDINGS



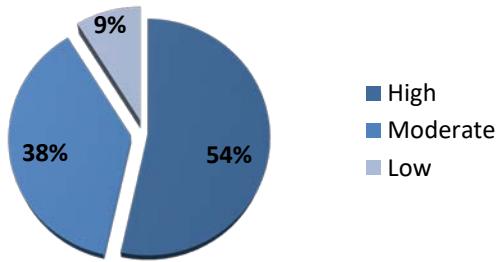
"The parenting class showed me ways to handle situations when I start my family." - RSAT Participant

The Evaluation Sample

Near-full evaluation data were captured on most of the new RSAT participants. However, as in previous years, not all tools were able to be completed for all inmates. This was primarily due to earlier release on a sentence—including this year, uniquely, because of the coronavirus—and less often because inmates or counselors/staff turned in incomplete forms.

In FY 2019-20, 107 inmates enrolled in the RSAT program, 80 (75%) of whom were assessed with CAIS;¹¹ another 68 individuals were enrolled in the aftercare portion of the program. Based on the CAIS risk assessment criteria, 92% of RSAT's inmates were determined to be "moderate" to "high" risk of re-arrest for a drug or alcohol related offense (Figure 1), meeting the CAIS criteria for a large majority of participants to be classified at this level. The close to 9% of participants assessed as "low" were enrolled in the RSAT program as well because they were court referred or insisted they wanted to participate in the program.

Figure 1. FY 2019-20 RSAT Enrollees, by CAIS Risk Assessment Status (n=107)



Demographic characteristics and substance abuse treatment experience, shown in Table 1 on the next page, was available from 66 inmates (about 35% fewer than last year) assessed with the OAARS tool, providing a context for the outcome findings in this report. The average RSAT participant was younger this year, particularly the 18-24 year-old age group (75% higher than last year). While about 80% had not gone beyond high school, the group was slightly more highly educated this year. More of the inmates had never been married (53% vs. 49% previously) while 13.7% (vs. 21.8% previously) were married or considered themselves as married with a partner.

Just over 30% of the men had been working full-time at the time of arrest, but a higher proportion, 58.5% (compared to 40.6% last year and 35.6% the year before), were unemployed when arrested; a portion but not all of this increase was likely due to the coronavirus. Of the 40 inmates with prior treatment experience, a lower percentage this year than last year, 20.0% vs. 35.9%, reported finding it a challenge to stay sober/clean for more than a year following their last treatment.

¹¹ The Correctional Assessment and Intervention System™ (CAIS) system.

Table 1. Characteristics of the FY 2019-120 RSAT Group (n=66)

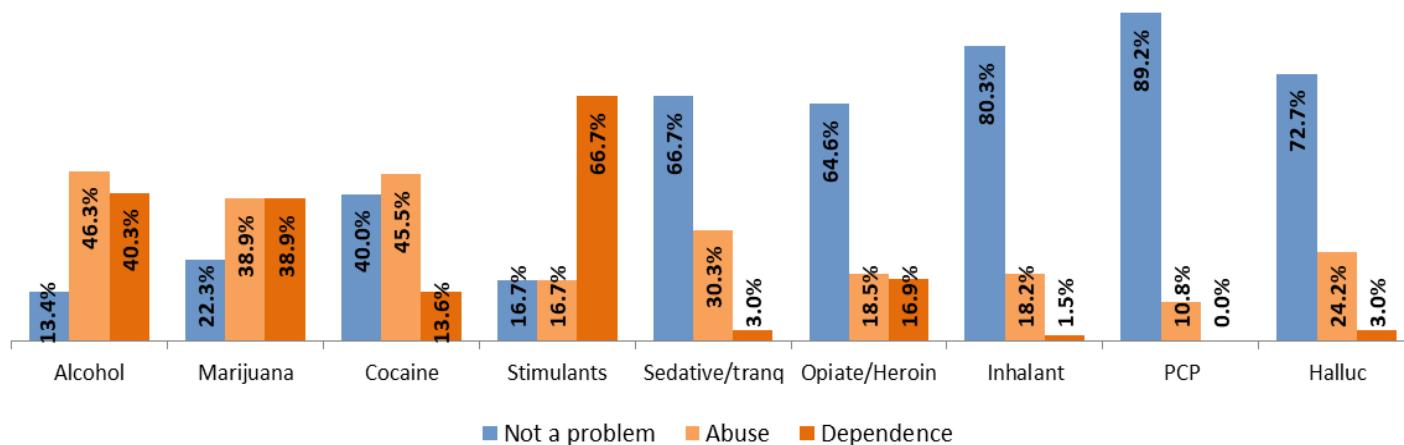
Item	Number	Percent
DEMOGRAPHIC CHARACTERISTIC		
Age		
18-24 years	10	14.9%
25-39 years	38	57.5%
40-64 years	17	25.8%
65+ years	2	3.0%
Ethnic Group		
Hispanic/Latino – white	6	9.1%
Hispanic/Latino – non-white	27	40.9%
African American	0	0.0%
Native American/Alaska Native	2	3.0%
Native Hawaiian/Pacific Islander	0	0.0%
Asian	2	3.0%
Caucasian/White	27	40.9%
Multiracial/Biracial/Other	2	3.0%
Highest Education Level		
No HS diploma or GED	27	40.9%
HS diploma or GED	26	39.4%
Vocational/technical	7	10.6%
Associate degree	4	6.0%
Bachelor's degree	2	3.0%
Master's degree or higher	0	0.0%
Marital Status at Program Entry		
Never married	35	53.0%
Divorced	12	18.2%
Separated	7	10.6%
Widowed	1	1.5%
Living as married	6	9.1%
Married	5	7.6%
Employment Status at Program Entry		
Working F-T for pay	20	30.8%
Working P-T for pay	1	1.5%
Unemployed	38	58.5%
Not working for pay by choice	16	24.6%
Disabled	2	3.1%
Retired	1	1.5%
TREATMENT EXPERIENCE		
Number of Prior Treatment Admissions		
None	24	36.9%
One	14	21.5%
Two or more	27	41.5%
Longest Period of Abstinence Following Last Treatment (n=64)		
Under 90 days	16	40.0%
3-12 months	16	40.0%
Over 1 year	8	20.0%

Source: OAARS data.

Just over forty-one percent of the inmates who reported a prior treatment experience said the current admission was at least their third, that is, they had had two or more previous treatment admissions. (It isn't clear from the OAARS form whether this means at the current facility or possibly at another place of incarceration. Regardless, this percentage is higher than last year at 34.0% and the year before that of 25.8%).

The inmates are also asked when they complete the intake portion of the OAARS form to identify their "drug of choice" (this is referred to on the form as "Diagnostic Impressions"). The individual himself determines and marks whether each of the 9 substances listed is a problem, abused or a dependency. As Figure 2 shows, alcohol, stimulants and marijuana abuse/dependency, 86.6%, 83.4%, and 77.8%, respectively, were the primary problems this group presented with this year (it is understood that the drug(s) of choice may change slightly from year to year). We suspect but cannot know from this data a certain proportion of the men may have abuse/dependency issues with more than one substance.

Figure 2. Inmates Self-Reported Drug of Choice at Admission¹ (n=65-67)





Self-Perceptions about Character Change

Evaluation Question	Did inmates perceive their character changed after participating in the program?
Outcome Measure	Increased awareness of the values associated with good character.

The Character Counts program, which is integrated throughout the RSAT curriculum, includes both inmate and counselor pre/post assessments. Inmates use the Six Pillars Personal Inventory from this program to self-rate perceptions of their personal core characteristics. All of the percentage changes from pre- to post-ratings were statistically significant except for the characteristics of Trustworthiness and Respect; the inmates did not perceive themselves as having made significant change in these two characteristics following participation in the program (Table 2).

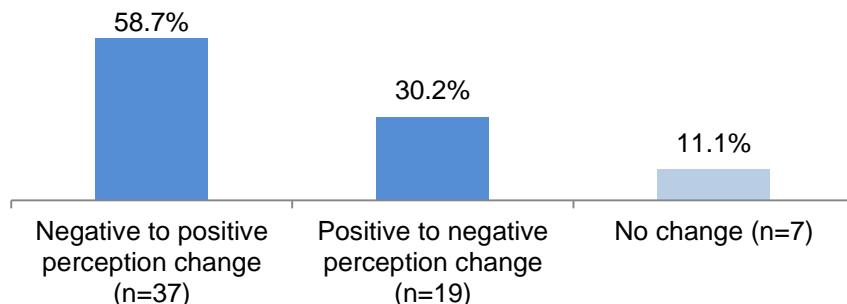
Table 2. Self-Perceived Changes in Personal Core Characteristics Using Six Pillars Inventory (n=63)

Characteristics	Average Pre-Assessment Score	Average Post-Assessment Score	% Change
Trustworthiness	14.4	15.3	6.3%
Respect	20.1	21.0	4.7%
Responsibility	17.7	19.4	9.5% *
Fairness	18.3	20.3	10.7% *
Caring	33.0	36.1	9.3% *
Citizenship	24.1	29.0	20.3% *
Overall Average	21.2	23.5	10.8% *

*p<.05

Most (58.7%) of the inmates believed they demonstrated the core qualities to a greater extent at the end of the program than at the beginning (changing their self-perceptions from negative to positive). Close to a third (30.2%) of the inmates (double the proportion from last year), however, initially rated themselves higher in many of the areas at pre-t-assessment, perceiving they came into the program already demonstrating a great deal of the characteristics (Figure 3). These positive-to-negative perception changes suggest these inmates may later have had more awareness of what true character was and a more realistic perception of the extent to which they possessed them than when they entered the program. About six percent of the inmates perceived no change in their personal characteristics after participating in the program.

Figure 3. Changes in Self-Ratings of Pre- and Post-Character Assessment (n=63)





Changes in Personal and Social Behaviors

Evaluation Question	To what degree did participants exhibit a positive change in personal and social behaviors?
Outcome Measure	Increased level of personal “moral compass;” increased social skills and integration.

The Positive Characteristics Inventory, with counselors’ rating of inmates, is another tool in the Character Counts program to look for changes that have taken place in inmates’ personal qualities. The program strategy specifically focuses on the root of change—mindset and behavior modification—and asks inmates to look at the choices they’ve made and their consequences.

For all 20 character traits measured, the counselors rated the inmates more positively at the end of the program than at the beginning with a 47.4% average increase; all of the post-assessment ratings were statistically significant (Table 3).

Table 3. Counselor-Assessed Positive Characteristics Inventory (n=65)

Characteristic	Average Pre-Assessment Score	Average Post-Assessment Score	% Change
Recognizes Own/Others Feelings	1.6	2.4	50.0% *
Helps Others	1.7	2.7	58.8% *
Reliable	1.9	2.8	47.4% *
Open-Minded	1.8	2.7	50.0% *
Loyal	1.9	2.8	47.4% *
Accountable	1.8	2.7	50.0% *
Strives To Do Best	1.7	2.7	58.8% *
Respects Authority	2.0	2.9	45.0% *
Self-Disciplined	1.8	2.7	50.0% *
Respectful of Others	2.0	2.9	45.0% *
Honest	1.9	2.8	47.4% *
Uses Good Manners	1.8	2.9	61.1% *
Shows Gratitude	1.9	2.8	47.4% *
Controls Anger	1.9	2.8	47.4% *
Listens To Others	2.0	2.8	40.0% *
Kindness To Others	1.9	2.8	47.4% *
Does Not Bully	1.9	2.9	52.6% *
Plays By The Rules	2.0	2.8	40.0% *
Obeys The Rules	2.0	2.8	40.0% *
Participated In The Community	1.6	2.6	62.5% *
Overall Mean	1.9	2.8	47.4% *

Note. Mean scores reflect the following rating choices: 1 = Low, 2 = Medium, 3 = High levels of which inmates display the quality. Pre-assessment is 1 month after program entry.

* $p < .05$.

At the individual inmate level, none of the 65 men assessed was rated by the counselor higher at the beginning of the program than at discharge. Overall, the inmates showed an average improvement in their individual scores of 18.7%.



Improvement in Key Characteristics Associated With Substance Abuse Treatment

Evaluation Question

To what extent did participants demonstrate improvement concerning key characteristics associated with substance abuse treatment?

Outcome Measure

Attitude and behavior change regarding substance abuse and recovery issues.

The RSAT program requires inmates to identify, confront, and alter the attitudes, values, and thinking patterns that lead to criminal and drug-using behavior. Changes on the OAARS (Outcome Assessment and Reporting System) post-assessment showed an overall average increase in knowledge/ change in substance abuse and recovery issues for the total sample of -41.1%; these are statistically significant improvements (Table 4). The graduates showed the most change in their ability to focus on treatment (similar to last year) followed by openness and personal commitment to change.

Table 4. Outcome Assessment and Reporting System (OAARS) (n=67)

Scale	Pre-Assessment Avg Score	Post-Assessment Avg Score	% Change
Emotional volatility (Measure 1)	1.4	0.8	-42.9% *
Ability to focus on treatment (Measure 2)	1.6	0.7	-56.3% *
Affective and anxiety problems/disorders (Measures 3-4)	2.5	1.4	-44.0% *
Awareness and understanding of the condition (Measures 5-8)	5.9	3.1	-47.5% *
Openness and personal commitment to change (Measures 9-12)	6.1	3.0	-50.8% *
Willingness to involve others in treatment (Measures 13-15)	4.8	3.0	-37.5% *
Indication of ability to follow through on treatment plan (Measure 16)	1.8	1.1	-38.9% *
Level of engagement in treatment (Measures 17-19)	4.3	2.8	-34.9% *
Social interpersonal support (Measures 20-23)	8.0	6.0	-25.0% *
The recovery environment (Measures 24-29)	15.4	10.3	-33.1% *
Overall Mean	5.2	3.2	-41.1% *

Note: Means are based on a scale of 1 – 5. Low scores indicate fewer problems on each measure and negative percentage change indicates inmate improvement.

*p<.05

In-Custody Drug Testing

Despite the impressive knowledge gain and positive changes related to substance use and recovery issues, in-custody drug testing is still necessary. Staff randomly tests 10% of the RSAT enrollment weekly (per the BSCC grant requirements) as well as any new participant to establish a

baseline. When there are positives, staff does a follow-up in 1 month; they report it is rare see positive results on the same inmate 2 months in a row.¹²

Of the 436 tests conducted between July 1, 2019 and June 15, 2020, 17 (3.9%) were positive (Figure 4), a slightly higher proportion than last year at 3.0%.¹³

Figure 4. Results of In-Custody Drug Testing, 2019-20

Number of Tests	Positive	Negative
436	17 (3.9%)	419 (96.1%)

¹² Marijuana, which can stay in the system for up to 3 months, is generally what accounts for positives in new enrollments.

¹³ There are unavoidably duplicates because sometimes an inmate's name randomly comes up more than once.



Changes in Thinking and Attitudes about Criminal Behavior

Evaluation Question	To what extent did inmates change their thinking and attitudes about criminal behavior?
Outcome Measure	Reduction in criminal thinking; reduction in the risk of recidivism.

The TCU-CTS Criminal Thinking Scale—based on the *Positive Thinking for a Change* curriculum (which has no tool)—evaluated the overall effectiveness of the Cognitive Behavioral Treatment of the RSAT program. The curriculum was offered two times a week for 5 hours.

During FY 2019-20, there were 49 inmates with both pre- and post-self-assessment ratings. As Table 5 shows, changes in half (3 of the 6) of the criminal thinking characteristic were statistically significant: these were in the areas of Entitlement (which had been the only improvement last year), Power Orientation and Criminal Rationalization. Though there was overall improvement in the men's scores (mean of -2.2%), the change was not significant. Note that low scores indicate fewer problems on each measure and negative percentage change indicates inmate improvement.

Table 5. Criminal Thinking Scale (n=49)

Scale (Characteristic)	Pre-Test Average Scores	Post-Test Average Scores	% Change
Entitlement	18.8	18.7	-5.3% *
Justification	20.0	19.9	-5.0%
Power Orientation	24.9	23.6	-5.2% *
Cold-Heartedness	22.9	23.4	2.2%
Criminal Rationalization	28.9	27.2	-5.9% *
Personal Irresponsibility	21.3	20.8	-2.3%
Overall Mean	22.8	22.3	-2.2%

Note: Scores (which were re-grouped by scales and in some cases reversed for certain items) are based on an original scale of 1 – 5. Low scores indicate fewer problems on each measure and negative percentage change indicates inmate improvement.

*p<.05



Changes in Parent Confidence and Connectedness

Evaluation Question	How did participating in a video-taped reading program impact parent confidence?
Outcome Measure	Increase in connectedness, parental involvement and ability. Reduced stress level.

Last year, the Sheriff Department implemented an innovative program called Mother/Father Read, a collaboration between the Sheriff and Tulare County Public Library. The concept is to give inmates who are fathers the opportunity of understanding the value of reading to a child to promote learning and to model parents as their child's first teacher. The Sheriff Department now owns many of the children's books, some of which had been provided via United Way which buys books for the inmates' children.

After the inmate has practiced reading the book, he is videotaped reading as he would do so to his child (he may record as many age-appropriate books for the number of children he has—and for however many homes his children live in). The flash drive of the recording and actual book(s) are then delivered to the child(ren), and families are notified about the upcoming delivery. A survey we developed is routinely administered to inmates who participate in this program.

This year, although Mother/Father Read transferred from the Public Library to an all-in-house program, with Deputies trained and assigned to administer it, the program was not implemented and we received no evaluation (survey) data to report for FY 2019-20.



Graduation Readiness

Evaluation Question What proportion of RSAT participants successfully completed the program?

Outcome Measure Achievement of goals set at time of discharge. Reduced rate of recidivism.

A graduation readiness scale and scoring rubric was used to ensure the program was not graduating inmates only because of time served, but because they demonstrated expected proficiencies. The graduation achievement affects inmates when they go back to court for a modification (i.e., early release on their sentence). If the program does not graduate them, the courts could determine the inmates have to stay in the program longer or until their final outdate arrives. When an inmate does not achieve a passing score, he is given a participation certificate instead of a graduation certificate. Staff has observed that either type of certificate is important to most of the inmates. Some inmates have validated this explicitly in the exit survey when expressing that the certificate "is the most useful thing about the RSAT program" when re-entering the community.

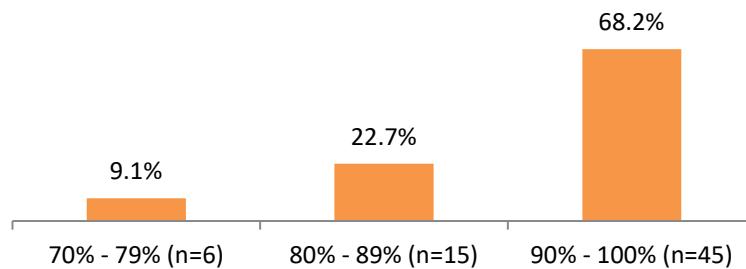
The criteria included scored components in eight skill categories such as accountability, anger management, and parenting, each with its own point value. To reduce potential bias, two counselors rate the inmate and the final score is averaged. Appropriate case management, counselor, and other program staff make this determination. A minimum of score of 34 out of 49 points (70%) is necessary to receive a graduation certificate. The counselors are expected to apprise inmates throughout their program of any danger in not graduating so that not reaching 70% should not be a surprise.

This year, the average success score of the 66 inmates who graduated from RSAT was 89.9%. All but 2 (97%) of the RSAT participants were able to achieve a passing score of at least 70% and receive a graduation certificate (Figure 5). As the bar graph in Figure 6 shows, about two-thirds (68.2%) (23.2%) of the graduates' scores were in the 90%-100% score range; it is unclear why such a large percentage this year of the graduate's scores was in the top range when last year that proportion was only 23.2%.

Figure 5. RSAT Graduation Success

Total Number Assessed	66	Number/percent graduation certific.	n=64 (96.7%)	Average score (of 64)	44.2	Average percent	89.9%
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Figure 6. Percent Achievement Meeting/Exceeding Graduation Completion Criteria by the Range of Scores





Participant Satisfaction Level and Feedback

Evaluation Question

How satisfied were participants with the RSAT program?

Outcome Measure

Improved participant satisfaction. Program improvement toward greater impact.

An Exit Survey was used to evaluate inmates' perceptions about the RSAT program. The user-perspective is important feedback to be able to assess the need for and make any program changes. While all of the RSAT graduates "agreed" with the 9 positive program statements that were evaluated, none of them actually "strongly agreed" (a mean of 3.42) as shown in Table 6. The men most agreed with the statement *The counselors were knowledgeable and helpful* and least with *Custody staff was supportive and understood the program*, though the differences in agreement scores were not significant.

Table 6. RSAT Exit Survey Results (n=59)

Statements	Average Score
The counselors were knowledgeable and helpful	3.58
I feel as though I can be successful on the outside	3.56
If I had a problem, counselors listened and offered guidance	3.47
I feel the program has given me the tools needed for recovery	3.46
I have a plan in place I feel good about for my re-entry into the community	3.40
I would recommend this program to others	3.39
I liked the daily structure of the classes	3.31
The program was better than I expected	3.31
Custody staff was supportive and understood the program	3.29
Overall Average	3.42

Note: Based on a scale of 1 – 4 where 1=Strongly disagree; 2=Disagree; 3=Agree; 4=Strongly agree.

Most and Least Favorite Classes

The remainder of the Exit Survey offered inmates an opportunity for feedback through open-ended questions. Table 7 on the next page shows what the men described as their most and least favorite classes. Similar to previous years, slightly under half (48.2%) of the inmates identified Thinking for a Change as their *most* favorite class. They offered reasons such as: "I liked the science behind it;" "I learned a lot about myself and addiction;" and "it helped me think before I react wrong." Parenting was mentioned second as a favorite (including for a couple of the men who were not yet parents), with "I learned ways to handle situations when I start my family," and "it was fun to do role playing" as common explanations.

RDAP was mentioned about equally as the favorite/least favorite class. Positive comments included "it helped me realize my short comings;" negative expressions included "I didn't get the point," and "because I haven't been a great dad."

Those who cited Thinking for a Change as a least favorite class and included a comment said it was “pointless,” or “hard to talk about kids.” Anger management was liked because of the counselor and “the open discussion of the topic,” but was disliked by several who saw it as “meticulous and repetitive,” it made one person “sad,” and another one “miss my kids too much;” two did not see themselves as angry people. A couple of people who did not identify either a favorite or least favorite class commented that there was “too much paperwork and not enough interaction” in RSAT

Table 7. Most and Least Favorite Classes, by Frequency of Mention

Most Favorite	F (n=56)	Least Favorite	F (n=55)
Thinking for a Change	27	None*	16
Parenting	9	RDAP	10
RDAP	8	Parenting	8
Anger management	4	Thinking for a Change	8
Re-entry	4	Anger management	7
All of the classes	2	Matrix	5
Matrix	2	Re-entry	1

*It wasn't always clear whether “none” meant the person didn't like any of them, or none of them was his favorite because he liked them all.

Best Part of the Program

Inmates listed a wide variety of program features they liked best, most commonly referring to the personal relationships they formed. These included positive comments about the counselors—who were viewed as personable and caring—the group interaction and listening to each other’s stories; and break time to mingle with others. Several of the men described variations on “getting the help and tools I need to stay clean” and the benefit of understanding more about addiction. Several likes “the house rewards” as the best part of the program.

Areas to Change

“Nothing needs to change” was the most common response (representing about 30% of all comments) followed by “no locked cell doors” (21%) when the inmates were asked what they would change about the program if they could. The areas wishing for change were generally in the order of mention shown in Table 8.

Table 8. Areas Wishing to Change

“If I could change one thing about this program it would be....”
<ul style="list-style-type: none"> ■ Nothing (“everything is fine the way it is”) ■ Open the cell (doors) all day/open-door policy ■ More 1-on-1 time with counselors ■ Have more programs (none were specified) ■ Re-entry placement/format ■ More sports ■ Have some (inmates?) teach the class ■ Counselors to be more strict

Most Surprised By

The majority (25%) of the inmate comments related to the caring and helpfulness of the counselors (“they genuinely want success for you”) and staff attitudes (“they were nicer than I expected”). Some of the men expressed surprise at how much they and some of the other inmates had opened up during the group sessions, and a few even sounded amazed that they had learned anything or “made such progress” while incarcerated. Some of the men were surprised that “everyone got along,” and others at being offered house rewards.

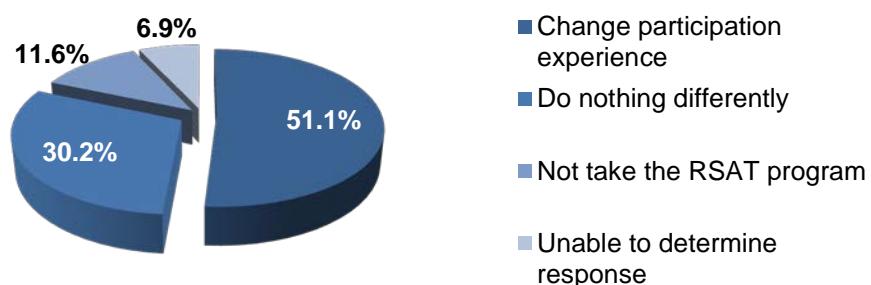
Table 9. Most Unexpected Results

“I was most surprised by....”
<ul style="list-style-type: none">■ Caring/respect/helpfulness of the counselors■ Staff’s understanding and support■ Personal insight/change in thinking (“the things I actually learned”)■ Behavior while incarcerated (“how much I opened up;” “how much I ended up sharing”)■ Supportiveness and congeniality from fellow inmates (“that there weren’t any conflicts”)■ The resources that were available■ “All the diversity of the people” (including counselors/staff?)

Reflections

Just over half (51.1%) of the men if they had to “do it again while here” described wishing they had done at least one thing differently (Figure 7). About one-third (30.2%) said they wouldn’t change a thing about their participation, and 11.6% said they would not have signed up for the RSAT program if they had to do it again.

Figure 7. Inmates’ Responses to Do Over Again (n=43)



The inmates’ personal regrets for what they wished they done more (or less) of or a better job of, in frequency of mention, were described as:

- “Be more involved”
- “Participate more”
- “Help the counselors more”
- “Better myself”
- “See more movies”
- “I would definitely do it (this program) again except I’m not coming back; I’ll stay out of jail now”

Most Useful for Re-Entry

Similar to last year, being provided the skills to maintain sobriety (thinking for change, recognizing one's triggers, building resilience to peer/gang pressure), acting responsible and accepting responsibility were the most common responses for what the RSAT participants thought would be most useful for re-entry into the community. Two of the men specifically gave a nod to having their RSAT certificate as something they believed would be useful once they were released.

About two-thirds of the individuals volunteered affirmative statements about their intentions to apply what they learned to their lives; these comments included:

- “To start thinking more about consequences”
- “Learning to communicate better”
- “Learning social skills”
- “To think about change skills I learned here”
- “Ability to say no to others”
- “Knowing my triggers”
- “Ways to stay sober”
- “Knowing more about how to get housing, jobs”
- “Life skills and rational thinking”



Life Changes after Re-entry into the Community

Evaluation Question	What life changes have occurred following inmates' re-entry into the community?
Outcome Measure	Achievement of goals set at time of discharge; reduced rate of recidivism.

Community re-entry presents particularly significant challenges for individuals who have co-occurring substance abuse and mental health issues. Many people leaving jail are not prepared for release and, upon release, face many obstacles to becoming healthy, productive members of their communities. Key barriers to successful re-entry include the difficulty of securing stable housing, discontinuity of medications and other treatment services, and high rates of substance use relapse and recidivism.^{14,15}

Research shows that prison-based substance abuse is effective – if combined with aftercare – and leads to reductions in recidivism. Inmates who graduate from the RSAT program are moved to the Aftercare program and attempts are made to follow them for 12 months post-discharge. Staff tries to contact each inmate within the first week of release and monthly thereafter. Due to very low responses to the contacts, staff implemented a rewards program and made inmates aware they would be eligible for a monthly drawing of a \$50 WalMart gift card if they were able to be reached in Aftercare during the month of contact. This year, the program upped the reward to two of the gift cards. Later in the program year, they implemented a first-Friday-of-the-month in-person opportunity for the men to come back to the jail—some “want nothing to do with” their jail experience after they leave—and meet casually and comfortably with staff who interview them for the follow-up information. This new approach was gaining ground until all in-person activities were shut down due to COVID.

Because a variable and limited amount of follow-up data were consistently available for the 68 individuals in Aftercare for FY 2019-20, we concentrated primarily on data for selected months in months 1 through 6. (For a few of the follow-up items, however, we looked at data in all 6 months.) Table 13 on page 21 displays this information and represents an *unmatched* sample, i.e., not always the same men each time but all men with data in any of those months. Unfortunately, as is generally the case, too few of the 23 men successfully contacted in Month 1 were successfully contacted across enough months to constitute a *matched* sample. i.e., the same men reported across all 6 months.

Overall, the men who were successfully reached for interviews reported very positive circumstances in nearly all of the areas reported. Housing during Aftercare was reported to be very stable and family and peer support was considered to be adequate. Nearly all of them described themselves and their well-being as very satisfied with how things were going in their life. The rates of employment after the first month were unusually high, however, we note that two-thirds of the follow-up calls were made after the shelter-in-place requirement due to the coronavirus (more about this is discussed in the Recommendations section of this report).

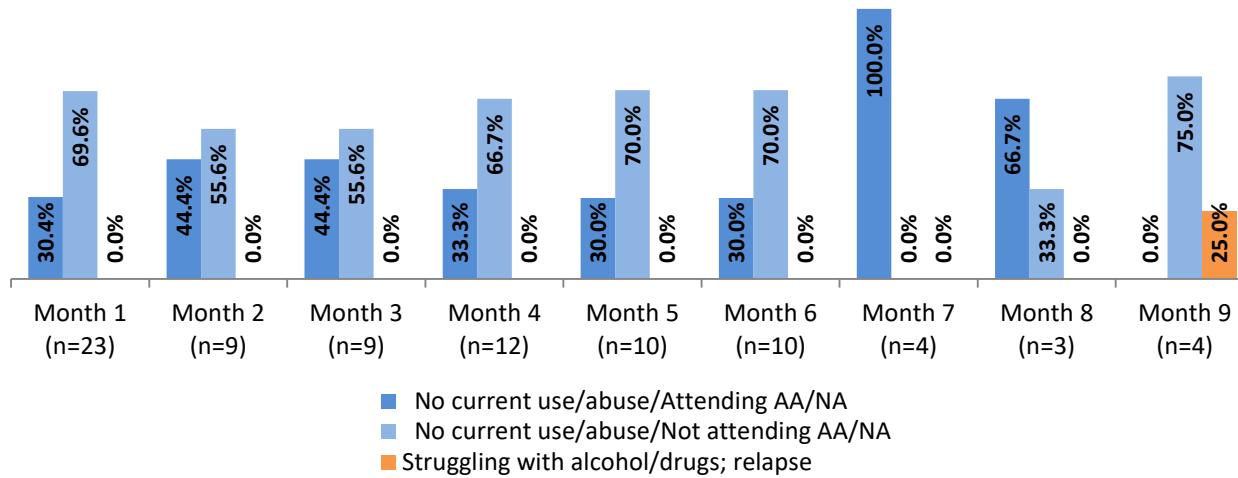
Pursuing education or training/certification was not a goal for most of these graduates. For those for whom it was, one of the follow-up periods showed 1 person receiving a certificate, 1 person “in progress,” and 8 people with “no progress.”

¹⁴ Van Olphen J et al. Community reentry: perceptions of people with substance use problems returning home from New York City jails. *J Urban Health*. 2006 May;83(3):372–381.

¹⁵ Baillargeon, J, Hoge SK, Penn JV. Addressing the challenge of community reentry among released inmates with serious mental illness. *American Journal of Community Psychology*, 2010;46: 361–375.

In all but 1 of the first 9 months of follow-up calls, the men reported no current drug use or alcohol abuse or relapse (Figure 8). Although for the most part they were not struggling with use/relapse issues, two-thirds or more said they were not attending AA/NA, outpatient treatment or other similar service (some effect of the months before COVID closed in-person meetings).

Figure 8. RSAT Aftercare Follow-Up of Recovery-Related Experience¹



¹These are not unique cases, i.e., the same individual could be interviewed in multiple months.

RSAT Aftercare participants described various goals they were working on (Table 12). Building or improving relationships, including with their children, which in the past has comprised a high percentage of the goals, was minimally described in the follow-up months we used for the analysis. Identifying housing as a goal was interesting given virtually every interview indicated that housing was “stable.” Complying with probation was clearly important in the first month post-discharge. Of the 42 phone call results shown in Table 13, only 5 (11.9%) were identified as “has not begun.”

Table 12. Types of Goals Described by Former Inmates During RSAT Aftercare¹

Goal	Month 1 (n=23)	Month 3 (n=9)	Month 6 (n=10)
Build/improve relationship			3 (30.0%)
Find employment	7 (30.4%)	2 (22.2%)	1 (10.0%)
Education/training			2 (20.0%)
Housing	3 (13.0%)	3 (33.3%)	
Parenting skills			
Obtain needed documents		1 (11.1%)	1 (10.0%)
Comply with probation	11 (47.8%)	3 (33.3%)	1 (10.0%)
Recovery-related	1 (4.3%)		1 (10.0%)
DUI program	1 (4.3%)		1 (10.0%)

¹These are not unique cases, i.e., the same individual could be interviewed in multiple months.

Although the men who were able to be interviewed generally described their circumstances as positive overall, as we've noted in past evaluations, we cannot know whether the men *not* able to be reached would have reported differently. For instance, we know anecdotally that some of the inmates released early from COVID may not have had time to arrange/find shelter and could therefore be homeless. Others might be struggling to find employment or link to already-strained community resources.

Table 13. Former Inmate Follow-up Results at Selected 3-Month Intervals (Unmatched Sample)

Measure	Month 1 (n=23)		Month 3 (n=9)		Month 6 (n=10)	
	#	%	#	%	#	%
Housing						
Stable	23	100.0	8	88.9	10	100.0
Unstable	0	0.0	1	11.1	0	0.0
Employment						
F-T	9	39.1	9	100.0	8	80.0
P-T	1	4.3	0	0.0	1	10.0
Unemployed – by choice	1	4.3	0	0.0	0	0.0
Unemployed – not by choice	12	52.2	0	0.0	1	10.0
Family Support						
Adequate	22	95.7	9	100.0	10	100.0
Inadequate	1	4.3	0	0.0	0	0.0
Peer Support						
Adequate	20	87.0	9	100.0	10	100.0
Inadequate	3	13.0	0	0.0	0	0.0
Recovery						
No current use/abuse/Attending AA/NA	7	30.4	4	44.4	3	30.0
No current use/abuse/Not attending AA/NA	16	69.6	5	55.6	7	70.0
Struggling with alcohol/drugs; relapse	0	0.0	0	0.0	0	0
Legal						
No re-arrest	23	100.0	9	100.0	10	100.0
Re-arrested	0	0.0	0	0.0	0	0.0
Meet all court orders	0	0.0	0	0.0	0	0.0
Register as sex offender	0	0.0	0	0.0	0	0.0
Register as narc offender	0	0.0	0	0.0	0	0.0
Completed probation	0	0.0	0	0.0	0	0.0
Completed restitutions	0	0.0	0	0.0	0	0.0
Education/Training						
No progress (hasn't begun to pursue)	5	21.7	1	11.1	2	20.0
In progress	1	4.3	0	0.0	0	0.0
Received certificate	0	0.0	0	0.0	1	10.0
Received degree	0	0.0	0	0.0	0	0.0
Not applicable (not one of his goals)	17	73.9	8	88.9	7	70.0
Child Custody (where applicable)						
Restored/satisfactory	4	66.7	1	100.0	4	66.7
Not restored/ unsatisfactory	2	33.3	0	0.0	2	33.3
Self-Satisfaction/Well-Being						
Very Unsatisfied	0	0.0	0	0.0	1	10.0
Somewhat unsatisfied	0	0.0	0	0.0	0	0.0
Somewhat satisfied	8	33.8	3	33.3	1	10.0
Very Satisfied	15	65.2	6	66.7	8	80.0
Goal 1¹						
Has not begun	4	17.4	0	0.0	1	10.0
In progress	18	78.3	9	100.0	4	40.0
Completed	1	4.3	0	0.0	5	50.0

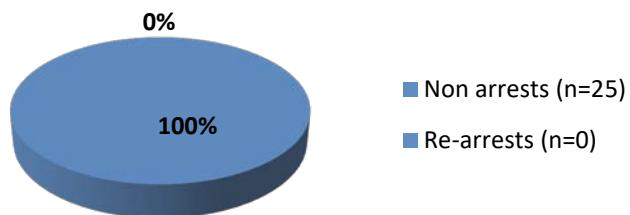
²Not all inmates have the same goals. If there were multiple goals stated, only the first goal was considered.

Post-Discharge Arrests

The Probation Department provided post-discharge arrest and drug testing data as part of the re-entry success indicators; this also allowed us to see how closely their information correlated with the men's self-report during telephone follow-up reviews with RSAT staff.

This program year, 25 inmates met the 1-year anniversary criterion of 12 months post discharge, i.e., the inmate had been re-entered into the community for 1 full year or more after being discharged from jail and the Aftercare program. None (100%) of the men were re-arrested¹⁶ as the unusual pie chart display in Figure 9 shows.

Figure 9. One-Year Post-Discharge Arrest History (n=25)



We also looked at the post-discharge re-arrest data of inmates who are in the current RSAT Aftercare program, i.e., men during the current program year who were between 1 day and 12 months after having been discharged from jail. Of the 68 RSAT graduates discharged who entered into Aftercare, 14 (20.6%) were re-arrested or in some way connected to the penal system (e.g., sent to state prison) (Figure 10); 6 (42.9%) of these 14 re-arrests within the first year of follow-up were related in one way or another to substance abuse charges (Figure 11).

Figure 10. RSAT In-Aftercare Arrest History (n=68)

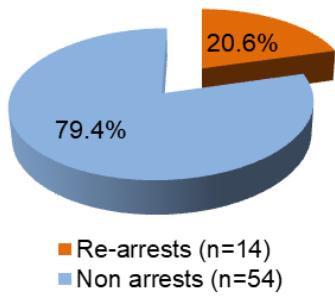
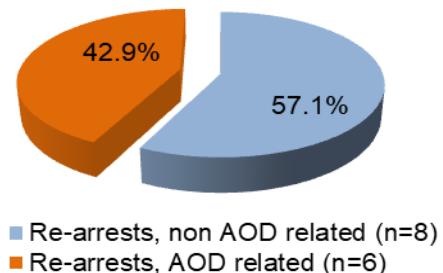


Figure 11. RSAT In-Aftercare Arrests Related and Unrelated to Alcohol/Drugs (n=14)

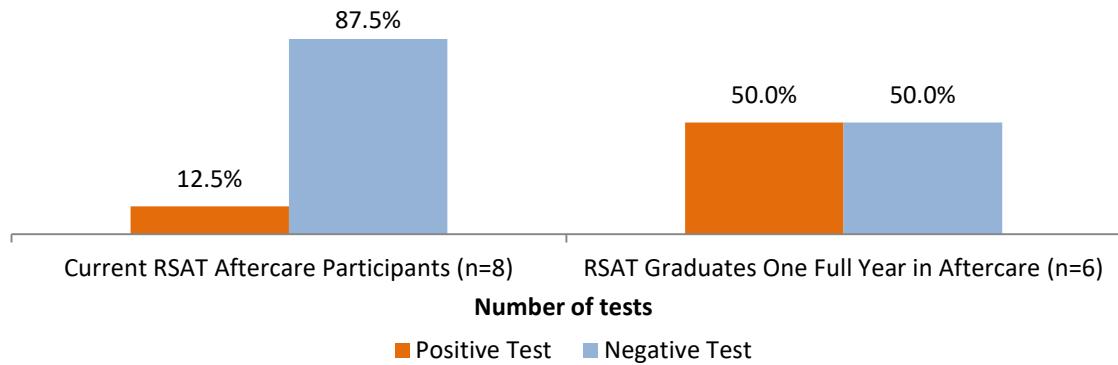


The AOD arrest charges were described primarily as possession or selling a controlled substance, possession of drug paraphernalia (e.g., for smoking/injecting), and in one case public intoxication. Note, however, that an arrest does not necessarily lead to a conviction. Of the 6 arrests that were tied to drugs or alcohol, only one of them resulted in a conviction.

Post-Discharge Drug Tests

Probation also provided urine drug testing results on the RSAT participants after they were discharged from jail; these outcomes are summarized in Figure 12. Among the 5 RSAT graduates being followed during the Aftercare portion of the program tested by Probation,¹⁷ 11.1% (up from 6.7% last year) of the total test results were positive. One full year after completing the Aftercare portion, however, the portion of positive tests among the former RSAT participants rose to 50%.

Figure 12. Post-Discharge Urine Drug Tests of Two Types of RSAT Participants, Summary Data



Note: the results are based on the number of tests, not the number of men.

Source: Tulare Probation Department, June 18, 2020.

¹⁷This represents only 7.4% of the Aftercare enrollees.

ISSUES FOR CONSIDERATION



"The best part of this program was being given a chance."
- RSAT Participant

"I'm already a good parent. I didn't need any of that information."
- RSAT Participant

The need for substance abuse treatment in the criminal justice system continues to be an essential part of incarceration programs, and the results of the Tulare County RSAT program suggest that overall the interventions are making at least a short-term difference in most of these inmates' thinking and even lives. The Tulare County Sheriff Department remains committed to supporting this long-running evidence-based program, and has continued to make adjustments to reflect best practices and feedback from our evaluations. This report covers Year 2 of the current 3-year, 2018-2021 grant cycle.

This year, the last few months of the program period—and consequently the evaluation—was impacted by the emergence of the unprecedented coronavirus, restricting inmate participation in certain group activities, releasing inmates earlier than planned, hampering Probation's observations of drug testing, and reducing overall the number of individuals available for evaluation—which reduced the dataset in this report by about one-quarter from previous years. Despite the smaller sample size, the data continue to represent matched sets where there were pre/post assessments—whether by self-report or counselor-administered—and adhere to the integrity of the evaluation protocols.

The following comments and recommendations are offered for your consideration, and we look forward to discussing them with you on July 23 at the meeting we've scheduled in your office.

1. Control Group

It had been agreed to again revisit the idea of a control group for this fiscal year—given its benefit for comparative purposes—but based on conversation with staff it was decided to drop the concept and not develop that feature in the current grant cycle evaluation design. Going forward, however, when you apply for the *next* 3-year grant—which we assume will occur in the spring—we do recommend you include a control group as part of your evaluation plan *and* be sure to make adequate provision for it in the budget request. Having a control group can answer a number of questions about program success.

2. Aftercare

Successful reintegration into the community upon release for offenders who complete in-jail substance abuse programs—followed by linkages to community resources including substance abuse treatment—is still clearly the ultimate goal of this program—and the ultimate success criterion. While the appropriate process is in place to measure life after re-entry, the follow-up data continue to be sparse and too limited to draw complete conclusions about re-entry results. Despite offering

incentives (monthly drawings now for 2 \$50 WalMart gift cards based on inmate feedback) and, until closure caused by COVID, in-person follow-up interviews at the facility, the RSAT graduates rarely make themselves available after release to provide information about their circumstances.

Not counting the current situation due to COVID, the average number of graduates who are released each month is 5.8-6, according to staff; this would yield about 72 men a year eligible for Aftercare. Some of the graduates can be dropped from this program, however. Staff drops them if they cannot get a hold of them several months in a row. They can also get dropped by Probation if they are not being compliant (e.g., not available for drug testing). This begs the question of how strict or lenient the definition is for “non-compliance,” and therefore how many eligibles become ineligible because they aren’t responsive to being contacted. Besides reducing the number of potential contacts, it’s quite possible those dropped or un-contactable have very different life circumstances than the graduates we know about whose housing, recovery, peer group support and overall satisfaction were relatively high. We suspect that part of your county’s homeless population, for instance, includes the graduates who have *not* been reached by or remained in Aftercare. To fully understand the extent of your results, we need to capture more men and, most importantly, the same men across multiple months.

We understand the agreement with Probation is to test 10%-12% of Aftercare enrollees. From the data submitted to us, Probation tested only 7.4% of the Aftercare enrollees this year. This is not an adequate amount of support from Probation. Although Probation may not be able to observe a person providing a urine test in exactly the same way as pre-COVID, there might be some modifications they should be willing to make to safely perform testing on a higher proportion of the men.

We know you agree and understand that the after-release picture is the most important part of knowing a program’s success. We also understand the continuing challenges of keeping the graduates connected for 12 months—and some of the limitations posed by the pandemic. However, we encourage you to re-instate option of in-person interviews, with masks and proper social distancing of course, since that had begun to get results, and again suggest you might consider a “neutral” outdoor environment if you don’t wish to invite the men back to your facility.

3. Capturing Additional Evaluation Information

We are concerned about the rising trend (at least for the last 3 years) of inmates with two or more prior treatment admissions. We assume staff and/or counselors do something with this red flag information (tailor the program approach accordingly?), including asking a question along the lines of “What mainly happened or triggered your inability to stay clean and sober in the current time?” It would be helpful for us to have this information—including some related information—and wondered whether there is already a formal way of capturing it for us that is easy to share. If not, would you be open to adding a simple questionnaire—or set of questions to an existing questionnaire/intake form—we can develop with your input? If so, let’s discuss during the upcoming meeting so that any decisions about this can be readily made and data can be captured as early in FY 20-21 as possible.

4. Data Quality

Last year we had noted problems with marking some forms incorrectly (e.g., recording the specific month of the follow-up call) limiting our ability to analyze the data. The problems were not observed this year and have been fixed, and we appreciate staff’s attention to these details.

5. Mother/Father Read Program

We were disappointed that this important module of the RSAT program could not be conducted this year. The positive feedback from inmates, family members (including children) and staff attested to its value, and we look forward to seeing it included in the program/evaluation for FY 20-21.

6. Other Program Enhancements

- We understand you decided not to implement Stages of Change/Responsivity so we have eliminated it from potential future evaluation.
- We also understand you did not have an interest in implementing the relationship-building program for inmates we'd shared with you last year, *PREP Inside and Out*[®] (Prevention and Relationship Enhancement Program), and have also removed this from the potential work for the FY 20-21 evaluation.
- This is an especially critical time for finding community-based resources that are still open that can help the RSAT graduates meet their basic needs and maintain sobriety, as well as strengthen family relationships. We were glad to learn that the fathers are being informed about and referred to Parenting Network's *Project Fatherhood* in Visalia and Porterville.