Evaluation of the Colorado Short Term Intensive Residential Remediation Treatment (STIRRT) Programs

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Introduction and Background

- Short Term Intensive Residential Remediation Treatment (STIRRT)
  - 14 day intensive residential substance abuse treatment program
  - 8-9 months of continuing care in community (non-residential)
  - Intended to stabilize drug offenders
  - Considered a “last chance” for offenders who would otherwise go to prison.
Referrals

- Those eligible include those referred by:
  - Probation,
  - Parole,
  - Treatment Alternatives to Street Crime (TASC),
  - Denver Drug Court, and
  - Community Corrections.
Four Program Locations

- **Arapahoe House – Commerce City, CO**
  - Multiple locations
  - Male and female participants*
  - 40 clients/month

- **Crossroads Turning Point, Inc. – Pueblo, CO**
  - Male clients only
  - Up to 40/month

- **Larimer County Community Corrections – Fort Collins, CO**
  - Male clients only
  - Up to 20/month

- **Mesa County Criminal Justice Services Department – Grand Junction, CO**
  - Male and female clients
  - Up to 30/month

*Due to some IRB difficulties the AH female participants were excluded from this study.
**Mesa County stopped offering STTIRT in June 2010.
Data Sources

• Drug/Alcohol Coordinated Data System (DACODS)
  • Housed at the Division of Behavioral Health
  • Multiple data transfer steps
• Integrated Colorado Online Network (ICON)
  • Housed at Judicial
• Provider Quarterly Reports
Data Collection and Analysis

- Residential Program Entry
- Residential Program Exit
- Was there a referral to continued care?
- Continuing Care Entry
- Continuing Care Exit
- Recidivism Check
- DADCOS: Admission
- DADCOS: Quarterly Reports: Admission
- DADCOS: Discharge
- DADCOS: Admission
- DADCOS: Discharge
- 9 months after discharge
- New Arrests/New Filings
Residential Program Participants (N = 1324)

- Primarily Caucasian (50%) and Hispanic (33%) males.
- Average age: 34.1 years
- Majority were
  - employed or looking for work at the time of admission.
  - married or single living independently
- Over half had no medical problems at the time of admission, yet
  - Nearly one third had a mental health problem.
- Half of the group had a high school diploma or GED.
- Average Level of Supervision Inventory (LSI): 32.8
- Top four substances used: Marijuana, cocaine, alcohol, and methamphetamine.
Program Outcomes

- 91% of all participants completed the STIRRT residential program successfully.
- Individual program success rates ranged from 87.1 to 96.3%.

<table>
<thead>
<tr>
<th>Location</th>
<th>N</th>
<th>Successful Termination %</th>
<th>Terminated Unsuccessfully %</th>
<th>Other/Unknown outcome %</th>
<th>Total %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Arapahoe House, Denver</td>
<td>579</td>
<td>92.7</td>
<td>6.3</td>
<td>1.0</td>
<td>100</td>
</tr>
<tr>
<td>Crossroads Turning Point, Pueblo</td>
<td>426</td>
<td>87.1</td>
<td>6.8</td>
<td>6.1</td>
<td>100</td>
</tr>
<tr>
<td>Mesa County, Grand Junction</td>
<td>82</td>
<td>96.3</td>
<td>3.7</td>
<td>0.0</td>
<td>100</td>
</tr>
<tr>
<td>Larimer County, Fort Collins</td>
<td>144</td>
<td>92.4</td>
<td>4.2</td>
<td>3.4</td>
<td>100</td>
</tr>
<tr>
<td>Total</td>
<td>1231</td>
<td>91.0 (n=1120)</td>
<td>6.0</td>
<td>3.0</td>
<td>100</td>
</tr>
</tbody>
</table>
Predicting Program Outcome

- Those who were employed were almost twice as likely to complete the program successfully as those who were unemployed.
- African Americans were more than three times as likely to complete the program successfully as those of any other race/ethnicity.
Continuing Care Participants (N = 474)

- 42.3% of the participants enrolled in continuing care after successfully completing residential.
- The proportion that participated in continuing care ranged from 25.3% to 50.9% across programs.

<table>
<thead>
<tr>
<th>Location</th>
<th>Total N</th>
<th>Participated in Continuing Care</th>
<th>Total %</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>No %</td>
<td>Yes %</td>
</tr>
<tr>
<td>Arapahoe House, Denver</td>
<td>537</td>
<td>57.5%</td>
<td>42.5%</td>
</tr>
<tr>
<td>Crossroads Turning Point, Pueblo</td>
<td>371</td>
<td>49.1%</td>
<td>50.9%</td>
</tr>
<tr>
<td>Mesa County, Grand Junction</td>
<td>79</td>
<td>74.7%</td>
<td>25.3%</td>
</tr>
<tr>
<td>Larimer County, Fort Collins</td>
<td>133</td>
<td>72.2%</td>
<td>27.8%</td>
</tr>
<tr>
<td>Total Population</td>
<td>1120</td>
<td>57.7%</td>
<td>42.3% (n=474)</td>
</tr>
</tbody>
</table>
Continuing Care Participants, cont.

- The average wait time: 10.1 days.
- Primarily Caucasian (43.0%) and Hispanic (39.9%).
  - Hispanics were 70% more likely to participate in continuing care than non-Hispanics.
- Those admitted to residential with ANY methamphetamine use were significantly more likely to not participate in continuing care than non-methamphetamine users.
Continuing Care Outcomes

- 323 terminated during the study.
  - The remainder were still active.
- 20.4% terminated continuing care successfully.
- Average LOS for those who successfully completed: 189 days
Recidivism

- Recidivism = new district or county court filing.
  - Must have been successfully terminated from residential to be included.

- 6 month recidivism rate: 14.8%.
  - 12.4% rate for those who participated in continuing care.
  - 16.6% rate for those who did not participate in continuing care.
  - This difference in recidivism rates is statistically significant.

- 12 month recidivism rate: 24.9%.
  - 24.7% rate for those who participated in continuing care.
  - 25.1% rate for those who did not participate in continuing care.

- No significant predictors of recidivism overall.
Conclusion

- STIRRT is intended to be a 2 week intensive residential program followed by an 8 to 9 month non-residential program.
  - However, participation in Continuing care is low.
    - Need qualitative data to explore why.
    - Mandating this portion may be useful.
- The continuing care component of STIRRT requires further study.
Study Limitations

- DACODS
  - Many steps in data transfer process
  - Staff training and turnover
  - Data Quality
- Population size
  - Few Continuing Care participants
  - Time limitations
Questions?

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