In-Patient & Out-Patient Treatment

Treatments · https://www.gmuace.org/appropriateness-statement-package/treatments/in-patient-out-patient-treatment/

In-Patient Treatment – Evidence-based practice

Out-Patient Treatment – Evidence-based practice

Summary of the Evidence

- Both in-patient (residential) and out-patient (community-based) treatment for alcohol and drug use are evidence-based practices shown to reduce both drug use and recidivism.
- Treatment that follows the RNR principles is more effective than treatment that does not.
- In-patient and out-patient care can include many of the same services (i.e., individual therapy, group therapy, etc.) but they differ in the amount they control the client's environment while receiving services.

What Are In-Patient and Out-Patient Treatment?

Most individuals who enter the criminal legal system (the "criminal justice" or "legal" system is referred to as the criminal legal system in this document) either have substance use difficulty or were using alcohol or illegal drugs during the time of their crime.

- Alcohol and drug treatment offered to those on supervision can reduce substance use and subsequently reduce recidivism.
- The treatment offered by supervision comes in many types, including alcohol and drug education (see psychosocial education for drug use statement for more), intensive out-patient, out-patient treatment, in-patient treatment, and medication-assisted treatment.
- ***In-patient/residential treatment*** broadly refers to therapeutic interventions provided in varied residential settings where patients live during some periods of treatment.
- ***Out-patient treatment*** broadly refers to interventions provided in settings where recipients live in the community at their usual place of residence.

How Are They Used?

- Treatment programs that follow the risk-need-responsivity (RNR) principles are more effective than those that do not.
- The RNR principles for effective treatment include the following:
  - conducting comprehensive actuarial assessment of static (unchanging) and dynamic (changeable) risk factors with periodic reassessment
  - prioritizing treatment resources for higher-risk clients or clients with higher needs in a particular area
  - targeting specific criminogenic needs
  - providing treatment that is responsive to an individual's temperament, learning style, motivation, culture, and gender
- In-patient treatment is effective for the following reasons:
  - it removes individuals from environments that promote alcohol and drug use
  - it provides an environment where treatment efforts can be concentrated
  - it offers medical/psychiatric care and emotional support to patients
- Out-patient treatment is effective for the following reasons:
  - it keeps individuals in their environment
  - it allows the individual to apply their skills in managing themselves and the environment
  - it provides opportunities for the client to address difficulties "real-time" and coping strategies to be created and tested while having the support provided by the treatment
  - it can teach clients to mobilize support within their environment to manage relapse
- Both in-patient and out-patient treatment can include some combination of the following:
  - individual therapy sessions
  - group therapy sessions
  - medication services
  - CBT interventions
  - alcohol and drug use education
  - life skills

- mental health services
- compulsory self-help meetings (i.e., 12-step recovery)
- support services

How Can They Be Used to Monitor Compliance?

- Clients are often mandated to treatment as a part of their conditions of supervision. If this is the case, their participation and progress in treatment can be monitored.
- Treatment providers and officers should be familiar with each other to offer the client the best possible support for participation and progress in treatment.
- Quality working relationships with the client increase the possibility that clients will discuss difficulties they are having with treatment. This can prevent clients from abstaining from treatment and thus violating their supervision.

How Can They Be Used as a Supervision Tool?

- Both in-patient and out-patient treatment are rehabilitative tools designed to help clients reduce their use and improve their lives.
- An officer can reinforce their position as a change agent by offering treatment services in response to their client's difficulty with substance use.
- If a client relapses, an officer can reinforce their position as a change agent by understanding and encouraging while working with their client to determine what adjustments would improve chances of long-term abstinence.
  - Often clients need multiple attempts at treatment programming before they remain abstinent long-term. Because of this, officers should not view treatment failure as proof that their client is not capable of change.
  - Substance use is a relapsing disorder that requires various strategies to obtain long-term success.

What Are the Costs of In-Patient and Out-Patient Treatment?

- Due to the considerable costs of treatment, referrals to both in-patient and out-patient treatment are limited

- Treatment services should only be offered to someone who has gone through a validated substance use evaluation and diagnosed with a substance use disorder

What Do Supervision Staff Think?

- Supervision staff report that in-patient and out-patient treatment are
  - sometimes appropriate for all low-risk clients and
  - always appropriate for all medium- to high-risk clients.

Compliance Level

- Supervision staff report that psychological sanctions like in-patient and out-patient treatment are
  - sometimes appropriate for low-risk clients who are in low, medium, and high compliance with their supervision conditions,
  - always appropriate for medium- to high-risk clients in low compliance with their supervision conditions, and
  - sometimes appropriate for medium- to high-risk clients in medium and high compliance with their supervision conditions.

What Should You Expect When Using In-Patient and Out-Patient Treatment?

- There is substantial evidence that both in-patient and out-patient treatment can reduce alcohol and drug use as well as reduce recidivism.
- Treatment that is structured to follow the RNR principles is more effective than treatment that does not.
- High-quality substance use treatment programming often is multimodal, offering an array of services that both educate clients about substance use and teach the skills needed to successfully abstain from using.

Are In-Patient and Out-Patient Treatment Evidence-Based Practices?

- Yes, a substantial body of empirical evidence exists to support both in-patient and out-patient treatment.

What Do People Formerly Involved in the Criminal Legal System Think About In-Patient and Out-Patient Treatment?

- People with lived experience in the criminal legal system report that in-patient and out-patient treatment are
  - sometimes appropriate for all low-risk clients and
  - sometimes appropriate for all medium- to high-risk clients.

Communication That Strengthens the Officer-Client Relationship (Messaging)

- Officers should openly discuss the results of substance use evaluations with their clients.
- Officers should openly discuss the potential treatment options available to the client.
- Officers should make room for the client to express their feelings, both positive and negative, about the different treatment options and their prior experience in treatment.
- Officers should be open to modifying treatment plans based on the client's changing needs.
- Officers should reach a mutual agreement with the client regarding their chosen treatment option.
- If treatment is mandated by the court or as a condition of supervision, officers should be transparent about the potential consequences if the client does not complete or relapses during treatment.

Special Considerations When Using In-Patient and Out-Patient Treatment with Subpopulations

Gang-Involved

None

General Violence

None

Intimate Partner Violence

IPV clients have a high likelihood of having a history of substance abuse. Additionally, research suggests that addressing any substance use disorders should be a part of an intervention plan for IPV clients. As such, both in-patient and out-patient treatment may be important for both client success on supervision and the safety of victims.

Serious Mental Illness

Substance use is the norm rather than the exception for this group with rates as high as 85% for justice-involved individuals with mental illnesses. Aside from the typical reasons that individuals use substances, individuals with mental illnesses often use substances to deal with their mental health symptoms—anxiety, paranoia, auditory and visual hallucinations, etc. Because of this, both in-patient and out-patient treatment services may be especially helpful for SMI clients.

Substance Use Disorder

Individuals with a diagnosed substance use disorder (via substance use disorder evaluation) who are willing to seek treatment should be given the information and resources that make this possible.

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