**Understanding Evidence-Based Practice**

By Pamela F. Rodriguez, TASC Executive Vice President

This issue of *TASC News & Views* is dedicated to the concept of evidence-based practice (EBP) and how we apply it at TASC.

The concept of evidence-based practice is not new. It is simply the current terminology for putting into practice what science has proven to be effective. It is about learning what works and applying it in the real world, in a way that is as faithful as possible to what research has proven.

EBP is about monitoring and evaluating program outcomes and delivery processes, analyzing whether this is making a difference in people’s lives, and making adjustments to improve and enhance outcomes. It is about training, so that clinical services are administered effectively and consistently. It is about innovation, efficiency, fiscal responsibility, and ongoing communication—with partners, stakeholders, and researchers—about what works and what does not. It is about continuing to push for better results.

We are particularly pleased to include in this issue the expertise of Dr. Harry K. Wexler, senior principal investigator for National Development & Research Institutes, Inc. Dr. Wexler is a nationally recognized expert on this topic and a leader in substance abuse policy, treatment, and research.

In the article on page 2, Dr. Wexler explains the difference between research efficacy and clinical effectiveness. These distinctions are important in understanding the limitations of too narrow a definition of EBP. Some practices, though tested under the most rigorous research designs, may not translate seamlessly to a real-world setting. Such practices might prove too difficult to implement or too costly for the funding available. Others may be unable to translate from one setting to another or may not be meaningful to the racial, ethnic, or cultural group involved.

The bottom line is that EBP has to work in the real world. Sometimes this may mean combining various pieces of evidence-based practice, such as what occurs in Illinois’ nationally recognized Sheridan program model. Sometimes it may mean applying good clinical judgment or trying new things that are based in research theory but perhaps not yet formally tested.

Are there practices that work and have been proven to be more effective than others? Absolutely. However, it is also important to recognize that there is no perfect remedy for helping someone to overcome years of traumatic experiences, addiction, and poverty. Different people are motivated by different factors. The factors that go into human behavior are innumerable, and include environmental influences, timing, biology, brain chemistry, social environment, peer influences, and intangible factors such as faith and luck. Though our work is not an exact science, science is required.

And so, as we embrace the EBP of today, it is important to do so with a balanced and interactive approach—an approach where the best of science helps to drive practice and the best of practice helps to drive science.

**“The bottom line is that evidence-based practices have to work in the real world.”**

- Pamela F. Rodriguez, TASC Executive Vice President

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In This Issue
- **EBP: A Researcher’s Perspective** ......................... 2
- **CARF Awards TASC with 3-Year Accreditation** ...... 3
- **Applying Evidence-Based Practice at TASC** ...... 4-5
- **Spring 2008 Training Schedule** .......................... 6-7
- **TASC Plays Role in Local Publisher’s Success** ...... 8

TASC, Inc. (Treatment Alternatives for Safe Communities) is an independent, statewide, nonprofit agency that advocates for people in need of drug treatment and other rehabilitative services. We work in partnership with Illinois courts, prisons, child welfare programs, and community-based service providers to help adults and youth get the help they need to rebuild their lives. Please visit us online at [www.tasc.org](http://www.tasc.org).
Evidence-based practice (EBP) has become a popular term in the delivery of human services. It is recognized and used by medicine, education, criminal justice, and treatment fields alike.

There are different types and degrees of evidence, and each has its purpose and place. (See inset below.) The goal of EBP is to establish quality performance standards and improve outcomes for clients. As policymakers and state regulators search for treatments that “work,” it is important to incorporate an understanding of EBP that balances what research has proven in a controlled setting with what works in the real world.

Among the most rigorous standards of EBP are treatments that have been tested using scientifically controlled research designs such as randomized clinical trials. This “gold standard” of EBP produces statistically significant results which can be replicated by other researchers and codified in a manual for ease of replication. It is important to note, however, that the simple reliance on such carefully controlled research protocols can only go so far.

An appreciation of the difference between research efficacy and clinical effectiveness can help to further clarify the meaning and utility of EBP.

Research efficacy answers the question: Is this treatment beneficial when delivered in carefully controlled conditions? These are the kinds of conditions that exist in the “gold standard” of research design. In randomized clinical trials, a researcher exerts considerable control over the selection of people involved in the treatment, the delivery of the treatment intervention, and the environmental settings in which the treatment occurs.

In contrast, clinical effectiveness refers to evidence that a treatment has beneficial effects when delivered to a wider variety of individuals who are treated in typically less controlled clinical settings by clinicians vs. researchers. An evaluation of clinical effectiveness answers the question: Is this treatment beneficial in the real world?

It is important not to over-rely on measures of efficacy at the expense of effectiveness considerations that are critical for successful treatment implementation.

Continued on page 3...

**Understanding Different Levels of Evidence**

Evaluating the “evidence” in EBP can occur on many different levels. Each level contributes to the others and provides important feedback to further guide and refine the research base.

**Pre-experimental designs** provide the least scientifically controlled evidence. Examples of information collected through this level of evidence include: the observations of program partners, consumers, or clinical staff; the results of simple case studies or process evaluations; or the information gathered from focus groups, expert panels, or key informant activities.

**Quasi-experimental designs** provide strong but more limited scientific evidence than experimental designs. These designs are often utilized to collect evidence when it is impossible or very difficult to obtain a control group (as with some community and workplace interventions).

**Experimental designs** are generally considered the most rigorous because they use control groups which improve one’s ability to draw strong conclusions about the effectiveness of the intervention. This category includes single-site randomized controlled trials (RCTs), replications of RCTs or multi-site RCTs, and multivariate longitudinal research.
CARF Awards TASC with Third Consecutive 3-Year Accreditation

CARF (Commission on Accreditation of Rehabilitation Facilities) awarded TASC with a three-year accreditation for assessment, referral, case management, and service coordination. This is the third consecutive time TASC has received CARF’s highest level of accreditation.

CARF is an independent, nonprofit accrediting body that establishes consumer-focused standards to help organizations measure and improve the quality of their programs and services. The CARF seal is recognized by stakeholders throughout North America as the hallmark of quality services.

For example, clinical service coordination (such as the independent case management administered by TASC) answers the question of effectiveness, if not efficacy. Clinical service coordination is an essential component in the successful implementation of any treatment delivery system that requires clients to transition between treatments and other community-based services. It is hard to imagine implementing substance abuse treatment in the criminal justice system, where a primary goal is successful community reentry and recidivism reduction, without these services.

In short, the real-world application of EBP must consider not only what science has proven in controlled environments, but also what services and implementation structures are necessary to deliver these protocols in a way that is effective and sustainable.

Harry K. Wexler, Ph.D., is co-director for the Center on Evidence-Based Interventions for Crime and Addiction (CEICA) at the Treatment Research Institute (TRI), a senior principal investigator in the Center for Integration of Research & Practice at the National Development & Research Institutes, Inc. (NDRI), and a principal investigator for the Criminal Justice Drug Abuse Treatment Studies (CJ-DATS). Over the last 40 years, Dr. Wexler has achieved a national reputation in the areas of substance abuse policy, treatment, and research. His research has been influential in efforts to expand prison drug treatment by state and federal policymakers.

Evidence-Based Practice Resources

The list below includes examples of evidence-based practice resources and reports specific to the health, social services, and criminal justice fields.

Substance Abuse and Mental Health Services Administration (SAMHSA)
National Registry of Evidence-based Programs and Practices (NREPP)
www.nrepp.samhsa.gov

SAMHSA’s Center for Substance Abuse Treatment (CSAT) Treatment Improvement Protocols (TIPs)
www.samhsa.gov/centers/csatz2002

National Institute on Drug Abuse (NIDA)
www.nida.nih.gov/

NIDA’s Criminal Justice-Drug Abuse Treatment Studies (CJ-DATS)
www.cjdats.org/ka/index.cfm

NIDA’s Principles of Drug Addiction Treatment: A Research-Based Guide
www.nida.nih.gov/PODAT/PODATindex.html

NIDA’s Principles of Drug Addiction Treatment for Criminal Justice Populations: A Research-Based Guide
www.drugabuse.gov/podat_cj/

Report of the Blue Ribbon Task Force on Health Services Research at NIDA

Office of Juvenile Justice and Delinquency Prevention (OJJDP)
www.ojjdp.ncjrs.org/programs/mpg.html

OJJDP’s Blueprint for Change
www.ncmhhj.com/Blueprint/default.shtml
Applying Evidence-Based Practice at TASC

Contributed by TASC’s Research and Evaluation Department, which helps identify and integrate evidence-based practices into TASC’s clinical services

Integrating evidence-based practice into programs and services can be challenging. Program implementation, staff training, process evaluation, and service adjustments take time, money, and effort.

A recent report from the National Criminal Justice Treatment Practices Survey (NCJTPS) highlights the impact of these challenges across the criminal justice system. Published in a special section of the April 2007 Journal of Substance Abuse Treatment, the survey’s initial findings show that there are “multiple systemic, organizational, and infrastructural barriers affecting the provision of evidence-based treatment,” and that overall, treatment programs for substance-involved offenders use less than 60 percent of recommended evidence-based practices.¹

TASC collaborates with agencies across the state to address and minimize these challenges. We leverage TASC’s statewide infrastructure and experience in public health and safety to create cost-effective, research-driven solutions for a number of systems. We also provide external training opportunities for clinical professionals. (See the list of TASC trainings on pages 6 and 7.)

TASC is committed to evidence-based services for our clients and our partners. The following pages contain examples of how TASC takes what works and makes it work.

Examples of Evidence-Based Practice Applied within TASC’s Services

TASC operates 15 different programs across Illinois. Below are examples of evidence-based practice that are incorporated within a number of TASC programs.

Motivational Interviewing
TASC case managers use motivational interviewing techniques to encourage client-directed change and priorities.

Motivational interviewing (MI) is a technique introduced in 1983 by William R. Miller, Ph.D., a professor of psychology and psychiatry at the University of New Mexico. MI uses individually focused communication, designed to elicit clients’ understanding of their situation and their motivation for or resistance to change. It is considered to be especially useful for clients in early stages of change, for individuals who may be sensitive to being lectured, or for those who resent feeling forced to make a change.

For additional information on MI, see the Center for Substance Abuse Treatment’s Treatment Improvement Protocol, Enhancing Motivation for Change in Substance Abuse Treatment located at www.ncadi.samhsa.gov/govpubs/BKD342/.

TCU Screening and Assessment
Clinical screenings and assessments are important to determine the nature and extent of clients’ substance use and other service needs.

TASC includes elements of the TCU (Texas Christian University) Treatment Model and related evidence-based psychosocial assessments in our adult court and probation services and corrections services. These tools have been proven particularly effective in criminal justice settings, especially in identifying offenders in need of substance abuse treatment.

Drug Testing
TASC’s onsite laboratory, TASCLabs, performs over 250,000 toxicology tests annually for TASC’s programs and other entities (e.g., drug courts, probation offices, and individuals).

Regular toxicology or drug testing has proven useful in determining a person’s clinical service needs, setting a standard of accountability, and providing baseline information on the nature of a person’s drug use. The National Institute on Drug Abuse’s Principles of Drug Abuse Treatment for Criminal Justice Populations mentions toxicology as one way to gather important feedback on a person’s treatment progress.

For more information on TASCLabs, including sample collection and lab sites across the state, go to www.tasc-il.org/preview/tasclabs.html or contact the TASC administrator in your area.

Examples of TASC Evidence-Based Programs

Below are examples of TASC programs that have been formally evaluated and proven effective.

Treatment Readiness Groups (TRG)

For Cook County adult probationers who have been accepted as TASC clients and are awaiting admission into treatment, TASC provides drug education and treatment readiness services. This occurs via a program called Reducing Risk: Outreach & Pretreatment for Probationers (RROPP). The RROPP program incorporates Texas Christian University's evidence-based treatment practices, which recognize that preparing an individual for treatment is a fundamental step in the recovery process.

Results from an independent study recently conducted by Loyola University showed that clients receiving TASC treatment readiness services are more likely to enter treatment and stay in treatment longer.

Recovery Coach Program

TASC’s Recovery Coach Program (RCP) began in Cook County as part of a special demonstration project led by the Illinois Department of Children and Family Services (DCFS). A five-year study conducted by the University of Illinois Urbana-Champaign confirmed the model’s success, which resulted in program expansion to Madison and St. Clair counties.

In addition to saving DCFS approximately $5.6 million over the five-year period in which the evaluation took place, clients receiving RCP services showed improved treatment participation and completion and improved family reunification in a shorter period of time.
Putting Research Into Practice

Spring 2008 Training Schedule

TASC offers a series of trainings approved by the Illinois Alcohol and Other Drug Abuse Professional Certification Association (IAODAPCA) and the Illinois Department of Professional Regulation (LCSW and LCPC continuing education). Through our workshops, TASC is proud to not only showcase experts such as Dr. Kevin Knight and Pamela Woll, but also to share the expertise of our own leaders. Our spring calendar includes training provided by TASC’s own Peter Palanca, Phillip Barbour, Benny Lee, and Mack McGhee. We hope you will join us.

To register for the following workshops, or to learn about customized trainings for your organization, please call Randall Webber at (312) 573-8294 or visit www.tasc.org and click on “2008 Training Schedule.”

Criminal Thinking
Friday, March 14, 2008

Presenter: Phillip Barbour, Certified Assessment and Referral Specialist
Time: 8:30 AM – 12:00 PM
Location: TASC Administrative Office
1500 N. Halsted, Chicago, IL 60622
Cost: $60 (early registration: $50 until Friday, February 29)
3 CEUs, IAODAPCA, LCSW, and LCPC

This workshop will explore the thought processes and mental models that often underlie criminal behavior. Presenter Phillip Barbour has over 20 years’ experience working in the substance abuse field with criminal justice populations.

Learning objectives
Participants will be able to:
• Identify styles of criminal thinking
• Understand similarities and differences between criminal behavior thought processes and addiction thought processes
• Describe strategies for effectively working with individuals whose cognition and behavior is influenced by criminal thinking

Gangs: Inside and Out
Wednesday, April 2, 2008

Presenter: Benneth R. Lee
Time: 8:30 AM – 4:30 PM
Location: DePaul University-Loop Campus
1 E. Jackson Blvd., Chicago, IL 60604
Cost: $85 (early registration: $75 until Wednesday, April 9)
6 CEUs, IAODAPCA, LCSW, and LCPC

Join ex-gang leader Benneth R. Lee as he takes you on a journey through gang culture. Explore youth attraction to gangs, and discuss the intergenerational nature of gang affiliation. Mr. Lee, once a high-profile Chicago gang leader suffering from addiction and cycling in and out of prison, is a respected counselor who actively works to improve the lives of drug-involved offenders.

Learning objectives
Participants will be able to:
• Explain why youth join gangs
• Discuss the intergenerational nature of gang affiliation
• Identify typical gang structure, language, colors, symbols, signs, clothing, and territorial marking
• Identify effective methods for working with gang members

Improving the Criminal Justice Drug Treatment Process
Thursday, May 1, 2008

Presenter: Kevin Knight, Ph.D.
Time: 8:30 AM – 4:30 PM
Location: University of Illinois Chicago Center West, 828 S. Wolcott, Chicago, IL 60612
Cost: $125 (early registration: $100 until Thursday, April 17)
6 CEUs, IAODAPCA, LCSW, and LCPC

How do you make the most of treatment and increase recovery rates? With research findings evolving, this workshop brings you up to date on effective treatment practices and introduces innovative strategies to improve the treatment process.

This workshop will uncover the latest research on engaging substance-abusing offenders in treatment and the connection between initial client motivation, engagement, and favorable treatment outcomes.

Kevin Knight, Ph.D., is associate director for Criminal Justice Studies at the Institute of Behavioral Research, Texas Christian University, and a principal investigator for the CJ-DATS Project, a NIDA-funded cooperative agreement involving nine national research centers.

Learning Objectives
Participants will be able to:
• Identify key factors associated with effective criminal justice and substance abuse screening protocols
• Describe newly developed strategies to enhance treatment engagement
• Discuss the importance of the treatment process among substance-abusing offenders in the criminal justice population
New Perspectives on Substance Abuse Prevention  
Friday, May 23, 2008

**Presenter:** Peter Palanca, MA, CADC  
**Time:** 8:30 AM – 4:30 PM  
**Location:** DePaul University-Loop Campus  
1 E. Jackson Blvd., Chicago, IL 60604  
**Cost:** $85 (early registration: $75 until Friday, May 9)  
6 CEUs, IAODAPCA, LCSW, and LCPC

How can prevention and treatment, which often have been regarded as separate disciplines, combine their expertise toward common goals? How can we use a broader public health approach to ultimately reduce the damage of substance abuse in our society? This workshop will challenge traditional perspectives on the boundaries of prevention, and will integrate prevention, treatment, and recovery concepts into a unified and mutually-reinforcing continuum of services.

TASC Vice President Peter Palanca is nationally recognized in the substance abuse treatment and prevention fields. He is also the founder of the Region II Illinois Operation Snowball and a former leader of the Illinois Teen Institute.

**Learning Objectives**  
Participants will be able to:

- List the risk and protective factors that affect an individual’s potential for alcohol and other drug use  
- Describe successful community strategies for preventing the use of psychoactive substances  
- Describe how prevention principles can be utilized to prevent substance dependency, prevent relapse, and to strengthen the communities in which recovering individuals live and work  
- Discuss how communities and the substance abuse treatment providers adopt prevention strategies to assist in shaping the recovery of individuals and their reintegration into their communities

Motivational Empowerment for Human Service Providers  
Friday, June 13, 2008

**Presenter:** Mack D. McGhee, MA  
**Time:** 8:30 AM – 4:30 PM  
**Location:** DePaul University-Loop Campus  
1 E. Jackson Blvd., Chicago, IL 60604  
**Cost:** $85 (early registration: $75 until Friday, May 30)  
6 CEUs, IAODAPCA, LCSW, and LCPC

Is your purpose clear? What personal and professional goals do you have and how do you achieve them? In this workshop, you will develop a personal mission statement and learn methods for maintaining motivation and empowerment.

Mack D. McGhee was one of nine speakers to be featured in a book, *From Mediocre to Magnificent*, which profiles the top up-and-coming motivators nationwide. For more information, visit www.mackdmcghee.com.

**Learning Objectives**  
Participants will be able to:

- Explain self-awareness, self-commitment, and self-fulfillment  
- Develop a personal mission statement  
- Discuss methods of remaining motivated and empowered  
- Discuss how motivation and empowerment can assist in reaching professional goals

How to Get the Piranhas Out of Your Head  
Friday, June 27, 2008

**Presenter:** Pamela Woll, MA, CADC  
**Time:** 8:30 AM ~ 12:00 PM  
**Location:** TASC Administrative Office  
1500 N. Halsted, Chicago, IL 60622  
**Cost:** $60 (early registration: $50 until Friday, June 13)  
3 CEUs, IAODAPCA, LCSW, and LCPC

*How to Get the Piranhas out of Your Head* is designed to help people understand and detach from counterproductive self-talk and reaction patterns. This workshop will take a positive, entertaining, nonthreatening, but comprehensive look at some very serious aspects of being human and the strengths and resources we can use to make more courageous and constructive choices.

Pamela Woll, MA, CADC, is a Chicago-based consultant in writing, training, and instructional design, who works closely with the Great Lakes Addiction Technology Transfer Center. Under her own organization, Human Priorities, Pam also publishes self-help materials for clients and general audiences, including *How to Get the Piranhas out of Your Head* and the accompanying workbooks.

**Learning Objectives**  
By the end of this workshop, participants will have:

- Discussed the psychological patterns addressed in the booklet and related them to the booklet’s metaphorical approach  
- Discussed possible ways of using the booklet, leader’s guide, and workbook in their work  
- Tried group activities and workbook exercises based on this model
Nearly 15 years ago, Isaac Lewis, Jr. was given a second chance at life. He received probation and TASC instead of prison for his drug-related offenses.

“I was homeless, incarcerated, and my family had lost all faith in me,” said Lewis. “TASC, probation, and the other social service agencies gave me the guidance and help I needed to recover.

“My TASC case manager made sure I went to my 12-step meetings and wasn’t using. Being held accountable for my time and actions helped me to take control of my life.”

And Lewis did just that.

Lewis took courses to learn how to run a business, wrote a business plan and grant proposal, and obtained more than $29,000 from the North Lawndale Small Grants Initiative and the Steans Family Foundation to create and publish the North Lawndale Community News (NLCN). NLCN offers positive, uplifting, and informative news and provides employment resources to local residents.

“I take the philosophy that no man is an island. No community is an island,” said Lewis. “Just as I received help and support, I make sure to give help and support. You have to help your neighbor.”

Now, Lewis manages four staff and 125 resident, freelance writers. The newspaper’s distribution has expanded to include the South Lawndale, Austin, East and West Garfield, Humboldt Park, and Near Westside communities, and circulation has tripled since its inception in 1999 (from 5,000 to 15,000).

“Having faith in God and taking advantage of the help and support offered by TASC and others, I was able to make better choices and create a tool that helps others,” said Lewis. “Now the North Lawndale community and those all around us are more connected.”

To learn more about Isaac Lewis and NLCN, visit www.nlcn.org.