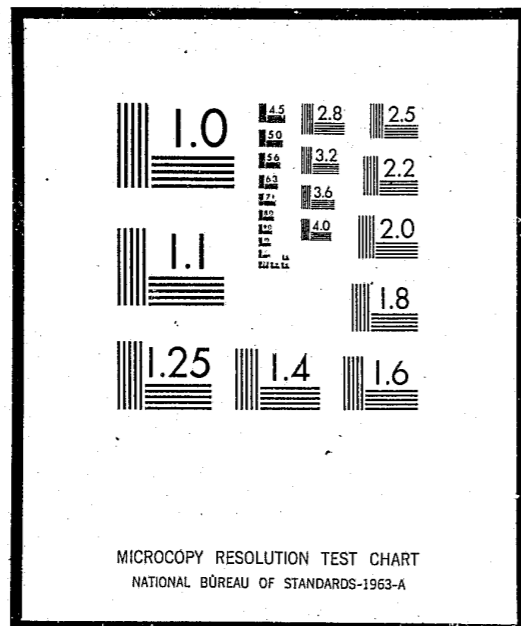


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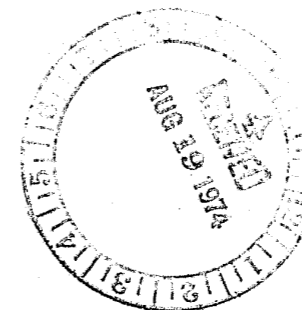
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LJAO # 366



REPORT ON
FAMILY HOUSE, SEATTLE, WASHINGTON

by
Alfred N. Himelson, Ph.D.

17284
EVALUATION

A technical assistance report prepared for the American Justice Institute under contract with the
LAW ENFORCEMENT ASSISTANCE ADMINISTRATION
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October 1971

FAMILY HOUSE
SEATTLE, WASHINGTON

EVALUATION FORMAT

The Family House, a residential program for drug users has combined elements of Synanon, Daytop Lodge with new ideas with the objective of graduating individuals from the house into the community. It differs from say Synanon by its emphasis on eventually having individuals leave the program.

The program evaluation format that follows was constructed after spending two full work days with the co-directors of the Family House in Seattle, Bob and Elaine Garsi. The Family House is somewhat unique among residential programs of this type--in that from almost the very beginning of the house (the fall of 1969) rather detailed records have been kept by the Directors on each resident. The information used in the format presented here is all presently available from Family House Records.

How successful the Family House has been or will be in the future can be measured for three different spheres--they are presented in order of priority.

I. The first is in terms of individual progress. The measurement of such progress in residential programs is often

difficult and unreliable. To avoid these problems measures selected for this evaluation of individual progress in the Family House were those clearly visible and reasonably ambiguous.

II. A second measure of the effectiveness of the Family House is its degree of importance to solving important social problems in the Washington State area. Is it valuable community resource?

III. The economics of the House is the third area of concern--What are the costs involved in the operation of the house and how do they compare with other alternatives (if such exist).

Evaluation: The performance of the Family House cannot be measured using an experimental - control framework. There is no way at present of adequately selecting a control group that would be comparable to those who chose to enter the House. But there is another model that does not depend on comparison of groups. This is the epidemiological model which is based on the notion that persons with illnesses (especially communicable ones) should be removed from the community and then made disease free. In terms of the Family House this means filling the House with confirmed drug users, keeping them drug and crime free for the period of the followup - and then graduating them.

It is important to note that using this model the measure

of success, should not be based on the number entering the house and then eventually graduating. A relatively large number of individuals may enter the house for a short period of time and then leave. But they were not exposed to the program for any significant time. What should be measured can be broken down into two general but related areas.

Residence in House

A. Do those who stay a significant period of time move through the entire program - without experiencing significant trouble. This calls for constructing a simple actuarial table which computes the probability of continuing House residence.

(1) What is the probability that those who stay 6 months will stay one year?

(2) Do those who stay thru one year stay until graduation?

Crime and Drug Use

B. Is length of residence associated with an absence of reported drug use and criminal convictions?

1. The data coding systems provides for recording criminal convictions and their time of occurrence.

Although some information on this is available from Family House Records - it would perhaps be advisable to have this data also available from some independent source - such as the Washington State bureau entrusted with the collecting of criminal statistics.

The second area for investigation is whether the house is being utilized effectively, (1) According to the Family House directors the aim is to fill the house mostly with hard core drug users - many with long criminal histories. Through the evaluation of the personal history materials (see data collection format) it can be determined fairly reliably whether the residents are the desired target population. Again, possibly records from outside the Family House should be used to corroborate the reliability of the records being kept at the House. (2) A second means of evaluating how effectively space in the House is being utilized can be determined by computing at several points in time what percentage of positions in the house is being utilized by residents who will eventually split from the program (with negative outcome after) and what percentage are residents who will stay in the program for significant periods of time.

(a) If at any given time a high percentage of residents will prematurely split - then the supposition is that the house could perhaps have a better selection system. If, however, a substantial percentage stay a significant period then the house is being effectively utilized.

I. Individual Progress

Individual Progress in the Organization

The process leading towards graduation has been very clearly spelled out organizationally. When a person first

comes to the Family he or she serves in a workers position-- then, depending on how their participation in the program is evaluated by the staff, they may be moved up in the organization to the next level of positions. Thus by knowing the positions held by an individual, the investigator knows how the subject was evaluated by the staff. If he or she continues to rise in the organization--then they are being positively evaluated by the staff, if demotion takes place then they are being judged as not improving or possibly retrogressing. A major point of progress should be the end of the subject's first year at the House. Ordinarily, if all has gone well they will begin the reentry phase, moving out of the Family House into the reentry house which is located a short distance away. They begin a new series of tasks which are community oriented. Graduation should take place sometime after the end of the second year after entry to the house. Records have been kept of this occupational progress and it should be possible to chart each individual's movement in the occupational hierarchy, and relate them to other significant outcome criteria.

Other Areas of Progress

Drug users ordinarily have many problems associated with drug use which limits their ability to function adequately.

- (1) Their limited socialization to normal society is one such problem. One of the main stated goals of

the Family House is to provide learning experiences of all kinds. The first year at the House is supposed to begin this task. In their second year (reentry) the residents are involved in many community related activities which are supposed to enlarge both their horizons and skills. The data collected for deck #4 will provide a measure of both the variety and frequency of each individual performing the community oriented tasks.

- (2) In modern urban society having the ability and permission to drive a motor vehicle is an important aspect of leading a modern existence. Drug users commonly have their drivers licenses revoked - either after accidents (often drug caused) or upon criminal conviction. One of the goals of the House in furthering the normalizing process is for residents to have their driving privileges restored.
- (3) Health. Many confirmed drug users although young in years have had considerable health problems - most of which are an accompaniment of their drug use. The directors of the house have stated one of their secondary goals to be an improvement in the health of the residents. During the preparation of the evaluation scheme there was not time to develop an adequate measure of progress in the area of health - but there are various types of indices that can be adopted for the analysis.

Probation and Parole

Some of the residents at the time of entry are on probation or parole. Success in this area can be measured by (a) those who successfully complete either status (b) or remain on probation or parole without serious difficulty.

II. Community Service

The Family House in addition to attempting to change drug user's lives also provides many kinds of community services for the Washington State Area. Most of this community involvement is oriented around alleviating the drug problem. While the staff states that the primary purpose of this involvement is to aid in the progress of second year Family House residents--an evaluation of the programs usefulness should also include the amount of community service the House contributes. An aggregate summation of the various kinds of community services can be obtained from the data provided by existing Family House records. Deck #4 in the data scheme presents a format for this conclusion.

III. Economics

Although some aspects of the value of such a facility are intangible - certain kinds of cost comparisons can be derived. For example, what is the cost of operating the Family House compared to the costs that might have accrued without it, i.e., cost of incarceration, theft,

costs of criminal justice, etc. This is obviously a complex question - and one for which time was not available to develop an adequate format. But it should be pursued in the future.

IV. Other Questions

This evaluation format has been limited in its scope to:

- (a) Information concerning individuals who actually enter the program at Family House, and
- (b) A minimum set of questions that could be explored during the brief consultation time that was available. To the extent that resources are available, other research efforts could be employed. For example, an interview and/or testing program with clients could be done to measure changes in attitude or outlook, as a function of time in the program. Interviews could also be conducted with narcotics agents to determine how program participants are seen in the view of law enforcement.

DATA ANALYSIS CODE SHEET

FAMILY HOUSE

SEATTLE, WASHINGTON

DECK NO. 1

COL. 1 2 3			4 5		6 7		8	9	
Research Number			Year Birth		Highest Grade Completed		Ethnic	Military Service	
10 11			DRUG USE PRIOR TO ENTRY						
Employment		12	13	14	15	16	17		
		Age First Marij.	Age First Amphet.	Use Amphet.	Age First Barbit.	Use Barbits.	Age First Methadrine		
18	19	20	21	22	23	24	25		
Use Methadrine	Age First Halluc.	Use of Halluc.	Age First Opiate	Use Opiates	Prop-erty	Parson	Robbery		
MISD. CONVICTIONS					MISDEMEANOR CONVICTIONS				
26	27	28	29	30	31	32	33	34	
Prostit.	Drug	Other	Prop-erty	Person	Robbery	Prostit.	Drug	Other	
COL. 78 79			FELONY CONVICTIONS						
35	36	0	1	37	38	39	40	41	
No. Juvenile	No. Adult Jail Commit.			No. Adult Prison Commit.	No. Hospital Commits. for Drug Abuse	Total Number of Juvenile and Adult Arrests (Approximate)			
42	43	44	45	46	47	48	49	50	
Referred by Whom	Last Place or Situation before Referral	On Probation or Parole When Entering	Later Probation or Parole Status	Public Assistance on Entry	Public Assistance Later Entry	Drivers License Status on Entry	Drivers License Later		

CODING INSTRUCTIONS

FAMILY HOUSE

DECK NO. 1

- COL. 1 - 3 RESEARCH NO. - A research no. is given to each person formally entering Family House
Female - 000 - 199
Male - 200 plus
- COL. 4 - 5 YEAR OF BIRTH - Code actual year of birth
E.G. Born 1946 - Code (Col. 4) - 4. (Col. 5) - 6
If no. information available Code -00.
- COL. 6 - 7 HIGHEST GRADE COMPLETED - Code actual grade for those having attended college - Code
Completed Freshman year - 13
" Sophomore year - 14
" Junior year - 15
Graduated - 16
- COL. 8 ETHNIC - Code - White (Anglo) - 1
Black - 2
Mexican - 3
Indian - 4
Oriental - 5
- COL. 9 MILITARY SERVICE
0 - Female
1 - No military service
2 - Military service - Honorable Discharge
3 - Military service - General Discharge
4 - Military service - Dishonorable Discharge
9 - No Information
- COL. 10-11 EMPLOYMENT COL. 10 - Code degree of skill (This category to be further developed)
Col. 11 - Significant work record (This category to be further developed)
- B. In COL(S) 12, 13, 15, 17, 19, 21 - Age first use of
- A. Given drug; code the following
0 - No use
1 - Age 12 and earlier
2 - " 13-14
3 - " 15 - 16
4 - " 17 - 18
5 - " 19 - 20
6 - " 21 - 24
7 - " 25 - 29
8 - " 30 and older
9 - No information

In COL(S) 14, 16, 18, 20, 22 - USE OF DRUGS

- 0 - No use
- 1 - Experimental use only
- 2 - Infrequent or occasional use
- 3 - Heavy use in past but not prior to entry to House (Never addicted)
- 4 - Heavy use prior to entry to House but never addicted
- 5 - Heavy use prior to entry to House - Past history of addiction
- 6 - History of addiction but not addicted or heavy use prior to entry to House
- 7 - History of addiction - Addicted at time of entry (Code this response if addiction detected by referral agency)
- 9 - No Information

C. PAST CRIMINAL CONVICTIONS (COL(S) 23 - 24

Code - 0 if no such conviction

- If convicted code actual number of such convictions
- If more than 8 - Code 8
- Code 9, if No Information

For "OTHER" convictions Col. 28 and Col. 34 write in actual crime

COL. 35 NO. JUVENILE COMMITMENTS - Write in actual number of commitments as juvenile - Include only actual incarcerations following Court proceedings

- If none - Code 0
- If more than 8 - Code 8
- If No Information - Code 9

COL. 36, 37, 38

Code using same instructions as for COL. 35

COL. 39 - 40

TOTAL NUMBER ARRESTS -

- Code 00 - If None
- 09 - If No Information

COL. 41

This Column not being used - Can be used in future if so desired

COL. 42

REFERRED TO HOUSE BY WHOM

- CODE 1 - Clinics
- 2 - Doctors
- 3 - Social Workers
- 4 - Lawyers
- 5 - Probation
- 6 - Parole
- 7 - Other Programs
- 8 - Self Referral
- 9 - No Information

COL.43

PLACE PRIOR TO ENTRY TO HOUSE

- CODE 1 - Jail
- 2 - Streets
- 3 - Hospital
- 4 - Parents House
- 5 - Prison - Correctional Institution
- 6 - Other Programs -
Write name of other Program
under Column Box
- 7 - Miscellaneous
(Enter under Column Box)
- 9 - No Information

COL.44

PROBATION OR PAROLE WHEN ENTERING HOUSE

- CODE 0 - Not on probation or parole when entering
- 1 - On probation when entering
- 2 - On parole when entering
- 9 - No Information

COL. 45

LATER PROBATION OR PAROLE STATUS AT GIVEN FOLLOW-UP PERIOD

- CODE 0 - Not on probation or parole when entering
- 1 - Still on probation
- 2 - Still on parole
- 3 - Off probation
- 4 - Off parole
- 9 - No Information

COL. 46

LATER PROBATION OR PAROLE STATUS

(Later follow-up period than COL. 45)

COL. 46

ON PUBLIC ASSISTANCE AT TIME OF ENTRY

- Code 0 - Not on public assistance at time of entry
- 1 - On public assistance on entry
- 9 - No Information

COL. 47

PUBLIC ASSISTANCE LATER

- CODE 0 - Not on public assistance at time of entry, or L.E.A. . subsidy after entry
- 1 - Still on public assistance at end of follow-up period
- 2 - Off public assistance
- 3 - Off public assistance now on L.E.A. subsidy
- 4 - Off public assistance, then off L.E.A. subsidy
- 5 - On L.E.A. subsidy - still on at end of follow-up period
- 6 - Off L.E.A. subsidy - by end of follow-up period
- 9 - No Information

COL. 49

DRIVERS LICENSE STATUS AT END OF FOLLOW-UP PERIOD

- 0 - Never had drivers license
- 1 - License intact (was intact at entry)
- 2 - License still revoked (Was revoked at entry)
- 3 - License restored - Still restored end of follow-up period
- 4 - License restored - and revoked again - Subject still at Family House
- 5 - License restored - Then revoked after subject no longer at Family House

DATA ANALYSIS CODE SHEET

FAMILY HOUSE

SEATTLE, WASHINGTON

DECK NO. 2

1	2	3	4	5	6	7	8	9
Research No.			Month		Day		Year	

DATE ENTRY TO HOUSE

10	11	12	13	14	15	16	17	18	19	20	21
Outcome		No. Months From Entry		Outcome		No. Months		Outcome		No. Months	
22	23	24	25	26	27	28	29	30	31	32	33
Outcome		No. Months		Outcome		No. Months From Entry		Outcome		No. Months	
34	35	36	37								
Outcome		No. Months									

OTHER COLUMNS TO BE USED IF NECESSARY

COL.	
78	79
0	2

FAMILY HOUSE

DECK NO. 2

OUTCOME DATA

CODING INSTRUCTIONS

COL. 1, 2, 3

RESEARCH NUMBER

Female 1 - 199
Male 200 plus

COL. 4 - 9

DATE ENTRY TO HOUSE

COL. 4 - 5 Month

Code; January - 01
Feb. - 02
March - 03
April - 04
May - 05
June - 06
July - 07
Aug. - 08
Sept. - 09
Oct. - 10
Nov. - 11
Dec. - 12

No Inform-99

COL. 6 - 7

CODE ACTUAL DATE

COL. 8 - 9

YEAR - Code actual year

For example, 1969 - Code 69

OUTCOME DATA

The Outcome Data consists of two types of data. The first is the Outcome (See Code below) and (2) the number of months from entry until the occurrence of the event.

The events and date should be coded in serial order according to order of occurrence. If more than one event occurred together they should both be coded-- and the months since entry also coded even if both occurred on same date.

The following is the code for Outcome Columns:

Code 01 - At House or graduated - Entire period, no trouble
02 - Split (Left House)
03 - Returned to House
04 - Arrested only (Released)

The Following deals with criminal convictions that occurred after entry to Family House

Convicted and sent to prison for:

Code 05 - Property crimes
06 - Person "
07 - Robbery "
08 - Vice "
09 - Drug "
10 - Other " (Write under COL. Box)

Convicted and sentenced to jail for

Code 11 - Property crimes
12 - Person "
13 - Robbery "
14 - Vice "
15 - Drug "
16 - Other " (Write under COL. Box)

Convicted: Other Outcome (Not jail or prison = Probation, suspended sentence, etc.)

Code 17 - Property crimes
18 - Person "
19 - Robbery "
20 - Vice "
21 - Drug "
22 - Other " (Write under COL. Box)

Code COL. 23 - Death-Drug related

COL. 24 - Death - Not Drug related

COL. 25 - Death - Reasons not known

Code: COL. 29 - Other Programs

Code: COL 30 - No Negative Information

DATA ANALYSIS CODE SHEET

FAMILY HOUSE

SEATTLE, WASHINGTON

DECK NO. 3

FAMILY HOUSE WORK POSITIONS

1	2	3
---	---	---

Research No.

4	5	6
---	---	---

Mo. Day Yr
Date Entry to House

7	8
---	---

Work

9	10
---	----

Mos. Since Entry

11	12
----	----

Work

13	14
----	----

Date

15	16
----	----

Work

17	18
----	----

Date

19	20
----	----

Work

21	22
----	----

Date

23	24
----	----

Work

25	26
----	----

Date

27	28
----	----

Work

29	30
----	----

Date

31	32
----	----

Work

33	34
----	----

Date

35	36
----	----

Work

37	38
----	----

Date

39	40
----	----

Work

41	42
----	----

Date

43	44
----	----

Work

45	46
----	----

Date

47	48
----	----

Work

49	50
----	----

Date

51	52
----	----

Work

53	54
----	----

Date

55	56
----	----

Work

57	58
----	----

Date

59	60
----	----

Work

61	62
----	----

Date

63	64
----	----

Work

65	66
----	----

Date

COL.
78 79

0	3
---	---

DECK NO. 3
CODING INSTRUCTIONS

COL. 1, 2, 3 - RESEARCH NUMBER

COL. 4, 5, 6, 7, 8, 9 - DATE, ENTRY TO HOUSE

The work columns refer to positions held within the Family House. The date columns refer to months since entry at house until entering that work position; each work change should be coded in chronological order.

Worker (Minor responsibility)

- Code: 01 - Kitchen
02 - Housekeeping
03 - Service crew and maintenance

Slightly Above

- 04 - Nursery (no distinction between sexes)
05 - Communication worker

Slightly Above

- 06 - Ramrod in kitchen
07 - " " housekeeping
08 - " " service and maintenance

Above

Acting Department Head - (Medium responsibility)

- 09 - Kitchen
10 - Housekeeping
11 - Service and maintenance
12 - Nursery
13 - Communication workers

Slightly Above

Department Head (Medium responsibility)

- 14 - Kitchen
15 - Housekeeping
16 - Service and maintenance
17 - Nursery
18 - Communication workers

Higher Status
But Less

Everyday
Responsibility 19 - Limbo

Has no special assignment - just floats

20 - Expeditor

Major Responsibility

Para Professional Training Positions

- Code 21 - Coordinator of House
- 22 - Counselor (Guru) - Keeps records of therapy
- Under supervision

Slightly Above 23 - Community relations coordinator

COL. 24 - At 15 months move to Reentry House

DATA ANALYSIS CODE SHEET

FAMILY HOUSE

SEATTLE, WASHINGTON

DECK NO. 4

1	2	3	4	5	6	7	8	9	
Research No.			Month		Day		Year		
10	11	12	13	14	15	16	17	18	19
Run Outside Groups		Training Groups		Treatment Center Groups		Resource Seminar for Jail Inmates		Monroe Reformatory	
20	21	22	23	24	25	26	27	28	29
Marathon in Walla Walla Prison		Co-Therapist with Gestalt Therapy (S.W.)		Work at Family Rap		Sit on First Year Family House		Work at Family Botique	
30	31	32	33						
Special Performance Projects (E.G. Write Grants)		Work at Spokane Family House							

ADD OTHER COLUMNS IF NECESSARY

CODE - Actual number of time subject participated in activity

COL.
78 79

0	4
---	---

CHAPTER II

DATA AND DISCUSSION

The goals and objectives of the Family House are given in the grant application to LEAA. The stated goal "is to evolve an effective community based residential treatment program for individuals abusing drugs ... especially those having a previous history of arrest or institutionalization."

This goal may be divided into components: 1) evolving an effective community based residential treatment program; 2) for individuals abusing drugs; 3) especially those having a previous history of arrest or institutionalization.

There are some specific objectives listed in connection with this goal and in addition there are some implicit. The explicit objectives are as follows:

1. Provide a "center for alienated youth in the Queen Anne area" (The Family Rap) as part of the treatment described for phase II, the re-entry phase, to be staffed by re-entry personnel. The effect of the Family Rap on the community is of secondary importance to this evaluation than its effect as a treatment component.

2. To make the Family House "more self-supporting through marketing specialty items made by the residents" (The Family Boutique).
3. To "supply much needed assistance for other agencies in handling their addict clientele" through the Family House re-entry individuals (Community Placement Workers).

Again, the effect of such assistance on a community is of less concern in this evaluation than is the effect on Family House members being treated.

It is readily apparent that the expressed goals and objectives cannot constitute the totality of possible and "understood" objectives of the program. For instance it is stated that one year (phase I) "of intensive treatment will enable these individuals to develop the emotional stability and positive self image needed to return to the community." Thus, "emotional stability" and "positive self-image" may be seen as objectives of the treatment program.

Next it is necessary to define what is to be meant by an "effective community based residential treatment program." Program effectiveness is of course a relative concept, rather than absolute. This concept is central

to the evaluation of the Family House program. The kinds of information will of course depend ideally upon the definition of effective. In the case of a post-hoc evaluation such as this one, it is very often the case that data desirable for evidence have not been gathered or are not available. However, an attempt will be made to provide a definition of effectiveness and to bring what data are available to bear on that definition.

Implicit in the definition is that effectiveness includes the idea of a reduction in the rate of recidivism compared to some specified alternatives. One may also assume that cost of treatment relative to alternatives will also, form part of the definition.

The Himelsohn report postulates an epidemiological model for measuring the effectiveness of the program.¹ Using the report that Himelsohn prepared it is possible to gather still more of an idea of what is meant by effectiveness. On page 4 of the report it

¹ Report on Family House, Seattle, Washington, Alfred N. Himelsohn, Ph.D. a technical assistance report prepared for the American Justice Institute under contract with the Law and Enforcement Assistant Administration, U.S. Department of Justice, October, 1971.

is seen that effectiveness includes the concept of efficiency, that is the selection procedure efficient in accepting people who will tend to stay in the program as opposed to selecting people who tend to split prematurely. And on page 6 (item 3) the concept of returning drug users to a healthy state physically is included. Effective is also seen as maintaining or improving an individual's probation or parole status (p.7).

While the report by Himelson may be taken as one approach to gathering and organizing the kinds of information desired for answering the question of whether the program is effective, if it is not obviously organized in a decision making structure; it does not seem necessary as the report by Himelson suggests, to postulate an epidemiological model for evaluation. The general areas of concern may be rephrased and incorporated into a decision making model. Such a model may be a series of questions dealing with the concern suggested in the Himelson report as those questions relate to current alternatives to the Family House and to internal operations, i.e. efficiency. Such an evaluation model may be constructed as follows and will be the one used in this particular evaluation:

1. Is the program effective?
 - A. Do people in the program refrain from socially undesirable behaviors better than or equal to other "treatment" alternatives such as jail or prison?²
 - B. Do individuals completing the program refrain from socially undesirable behavior better than individuals completing the social alternative of a prison term?
 - C. Are the explicit and implicit goals and objectives being met?
2. If A, B and C above are true, is the cost differential between the Family House program and the alternatives favorable or unfavorable, i.e. higher, is the reduction of undesirable behavior "worth" the difference?
3. Is the program run efficiently? If no, would changes affect item 1 above?

² It is not the function of this evaluation to compare the Family House program with other drug treatment programs and no attempts will be made to do so.

4. Is the program meeting its' grant requirement?
If no, would changes affect 1 and 2 above?
5. Is the program reproducible? What parts or aspects are unique to personnel and what aspects of the model are independent of personnel?

In evaluating the program the Family House goals and objectives will be incorporated into the decision making model where appropriate.

I. Is The Program Effective?

"Effective" obviously means many things to many different groups. In this instance it is being defined as:

- 1) people refraining from socially undesirable behaviors,
- 2) a reduction in recidivism, 3) the attainment of explicit and implicit goals and objectives. Because there exists the alternatives of jail or prison for dealing with drug abusers for items 1, 2, and 3 above it is also necessary to attempt to relate them to the alternatives.

- A. Do people in the program refrain from socially undesirable behaviors better than or equal to alternatives such as prison?

Such a comparison is extremely complex, and the results of this evaluation are seen as being no more than a

rough approximation of such a comparison. Examples of the difficulties involved will appear throughout the chapter. But for example there are obviously more controls for deciding whether someone is going to stay in prison, i.e. the use of high walls, guards, etc., and be prevented from committing criminal activities. On the other hand, the Family House is a very structured situation in which peoples' actions are monitored constantly and thus the chance of "unknown" criminal activities taking place by residents would appear to be rather remote. The point is, the situations are different because the contingencies are different and because the goals are different. The prison or jail can "guarantee" the absence of criminal activities by the individual while he or she is incarcerated. The Family House program can make no guarantees but sets as a goal the elimination of criminal activities not only while the person is in the program, but the elimination of those activities after the person leaves or graduates from the program.

During the three years of its operation no member of the Family House has been arrested on a new charge while in residence. There have been instances

of persons being charged with crimes being committed before entry into the Family House and there have been instances of persons being charged with crimes after splitting from the Family House. It is impossible to document whether members of the Family House have actually committed crimes that have gone undetected. However, without evidence to the contrary the deterrent effectiveness of the Family House would seem excellent.

B. Do "graduates" refrain from socially undesirable behavior? Is there a reduction in recidivism?

Unfortunately, for the evaluator, only five persons have "graduated" from the Family House program as of June 30, 1972. Of these, two are starting another Family House in a different area of the state (Spokane, Washington), one more is directing another drug treatment house, one is working as a probation officer, and one is a counselor for the Seattle Mental Health Institute. There have been no adverse incidents. While only five persons have graduated, an additional nine persons were in the phase II or re-entry state of the program at the end of the evaluation period. Of those who were still not in the House, all were employed, doing volunteer work, or in school. It should be

pointed out that the type of work of those persons working is professional, technical, and managerial. It should be noted that graduation is seen as a form of certification as a paraprofessional rather than a mandatory requirement for successful completion of the program.

Table 3 (p. 40) indicates the last known treatment location of those individuals not currently inhouse at the end of the evaluation period with respect to their treatment status.³ As the Table indicates 14 individuals or 32 percent of this group were in re-entry, or alternative re-entry, or had graduated successfully from the program. The last known treatment status of the 29 individuals who are splittees shows that eight individuals were either in jail or in prison, one person had been released from prison with current status unknown, four other individuals status' were determined unknown, 11 individuals were at large, (i.e. either out working, or not working, on welfare, etc.) but not known to be in another drug treatment program, and six individuals were known to be in other drug treatment programs.

Of those persons who remained in the program for 11 or more months regardless of whether they had reached the re-entry stage, including those persons

³Two persons currently inhouse are not included with the "conditional treatment failures," although they split while in re-entry or after 11 months into the program.

CONDITIONAL "SUCCESS"

<u>Status</u>	<u>N</u>	<u>P</u>
Re-entry	3	.07
Alternative Re-entry	6	.14
Graduated	5	.12
TOTAL	14	.33

CONDITIONAL "FAILURES"

<u>Status</u>	<u>N</u>	<u>P</u>
Status Unknown	4	.09
Prison or Jail	8	.18
At Large/Not in a Drug Program	11	.28
In Another Drug Program	6	.12
TOTAL	29	.67

LAST KNOWN TREATMENT STATUS OF
INDIVIDUALS AT END OF EVALUATION PERIOD*

(N=43)

*Does not include 18 Phase I individuals.

TABLE 3

who split and the one person arrested, only one individual, i.e. the person who was arrested, was in any known new legal difficulty. The breakdown of the two individuals who remained in the program for 11 or more months is shown in Tables 4 and 5A (pages 51-52). The breakdown of those individuals (minus current inhouse residents) who stayed in the program less than 11 months is shown in Table 6 (page 53).

The reason for setting the cutoff at 11 months was partly influenced by the fact that to do so would provide two groups of approximately equal size, and because it was felt that 11 months was sufficiently close to one year in duration so as to in effect constitute the completion of phase I of the treatment program. As Table 4 (~~p. 50~~) shows the bulk of the individuals involved (16 out of 21) are still associated with the Family House. Table 5 (~~p. 51~~) shows that 14 of the 21 individuals are working, two more are housewives, and another is in school. Table 6 (~~p. 52~~) shows only four persons known to be working of those individuals who split before 11 months, six being now enrolled in other drug treatment programs.

Table 7 (p. 53) shows the comparisons between those persons who remained 11 or more months and those persons

Graduated	5
Re-entry	3
Alternative Re-entry	6
Returned to Phase I	2
Split at Large	4
In School	1
	<hr/>
TOTAL	21

LAST KNOWN TREATMENT STATUS FOR INDIVIDUALS
STAYING IN PROGRAM MORE THAN 11 MONTHS

(N=21)

TABLE 4

Working	14	(includes three inhouse project coordinators)
Welfare	3	(two persons directing another drug program not yet funded)
Not Working	2	
Housewife	2	
Returned to Phase I	2	
In School	1	

LAST KNOWN OUTCOME OF PERSONS WITH MORE THAN 11 MONTHS
PARTICIPATION AT END OF EVALUATION PERIOD

(N=21)*

*Totals sum to more than N as persons may appear
in more than one category.

TABLE 5

Working	4	(includes one person in another drug program)
Welfare	4	(includes one person in another drug program)
Unknown	4	
Jail or Prison	7	
School	1	
Another Drug Program	6	

LAST KNOWN OUTCOMES OF PERSONS WITH LESS THAN
11 MONTHS (excluding 16 persons inhouse)*

(N=24)

*Totals sum to more than N as persons may appear in
more than one category

TABLE 6

COMPARISON OF PERSONS IN-PROGRAM
MORE THAN 11 MONTHS WITH PERSONS WHO
SPLIT LESS THAN 11 MONTHS*

VARIABLE	≥ 11 months	P ₁	< 11 months	P ₂	P ₁ -P ₂
1. Working	14	.67	4	.17	.50**
2. In School	1	.05	1	.04	.01
3. Housewife	1	.05	--	--	.05
4. On Welfare	3	.14	4	.17	-.03
5. Not Working	2	.10	--	--	.10
6. Returned to Phase I	2	.10	N.A.	--	N.A.
7. In Another Program	--	--	6	.25	.25
8. In Jail/Prison	1	.05	7	.29	-.24**
9. Unknown	--	--	4	.17	.17

*Proportions based on actual group sizes as an individual may
appear in more than one category; N₁=27; N₂=24. Inhouse people
are not included because of unknown outcome.
**p < .01

TABLE 7

who split at less than 11 months in terms of proportions of each of the two groups over the several categories. It is apparent that differences do exist, especially with respect to percent working status. There is also a significant difference in the proportion of individuals in jail or in prison between the two sub groups.

Thus it would seem that for persons who have remained long enough so that it may be implied that they have been affected by the treatment program, at the time of the end of the evaluation period recidivism was restricted to one individual who was rearrested and later probated back to the Family House and 70 percent of the individuals were employed. On the other hand, the group that did not remain for at least 11 months showed only 17 percent employed, which as Table 7 shows is a significant difference, and had roughly 30 percent back in jail or prison, again another significant difference from the group that remained for at least 11 months.

Small numbers of individuals in the other categories precluded the possibility of testing for a significant difference. However, it is notable that none of the individuals in the greater than 11 month group are in another drug program, while six of those persons in the less than 11 months group are in other drug programs. One further

note about the Table is that it is not known whether those persons whose whereabouts are unknown or who are in other drug programs are working or not, with the exception of two individuals: one working and one on welfare.

It has already been indicated that 39 of the 61 persons in the evaluation group were on probation or parole when they entered the Family House, and 29 people entered directly from jail. Approximately 70 percent of the evaluation group entered with a history of hospitalization or conviction for some criminal offense (presumably drug related).

It has also been noted previously that only one male in the group did not have at least one arrest and only eight females had no arrests. And thus it would seem that the goal of treating individuals "especially those having a previous history of arrest or institutionalization...", is being approximated.

Next it is desirable to find out the outcome for those persons coming from jail or on probation or parole. A total of 39 individuals form this group. However, 11 of the persons are inhouse, therefore, the group size is reduced to 28. Of the 28 individuals,

11 stayed in the program 11 or more months. The 11 persons' breakdown is as follows: three were in re-entry at the end of the evaluation period, three had graduated, two were back in the House in phase I,⁴ one was in alternative re-entry, and two had split and were presently at large but not known to be in another drug treatment program. Thus roughly 40 percent of the persons coming in with probation or parole, not presently inhouse with no splits, remained at least 11 months and constitute ~~three~~^{four} out of the five graduates, one of the three re-entry and three of the alternative re-entry individuals. Further 13 of the 21 persons (.65) staying at least 11 months had at least one conviction above misdemeanor).

The disposition of the 17 individuals who did not remain 11 months is as follows: five are in jail or prison, six are supposedly at large, although it is not known whether they are working, four are in

⁴ Not included with the 11 inhouse subtracted from the group.

another drug treatment program, and information about two is totally unavailable. Of course, one might expect that people who were on probation or parole would face the possibility of going to jail or prison if they split from the program.

The only safe statement that can be made about these data is that 40 percent of the individuals entering into the Family program on probation, parole or from jail are not in jail^{or prison} at present; roughly one-third of those who dropped out before 11 months are in prison or jail, and roughly one-third are at large and what they are doing is unknown. ~~On the other hand, seven of the 11 individuals who have remained with the Family program for an appreciable length of time, i.e. 11 months or more, are working.~~ On the other hand, seven of the 11 individuals who have remained with the Family program for an appreciable length of time, i.e. 11 months or more, are working.

C. Attainment of explicit and implicit goals and objectives.

The Family Rap was established and has continued to operate using phase II personnel. Its program includes more than merely providing a drop-in center, although originally developed as a drop-in center, its current counseling on a one-to-one bases is by appointment. There are instead groups of youths meeting weekly, groups of parents meeting weekly and groups of drug

abusers. As mentioned earlier in this evaluation, the concern is not with the effect with the Family Rap on the community but with its effect on the goal of bringing about successful re-entry of the phase II resident into the community. Physically the Family Rap, being separated from the Family House, provides a mechanism for re-entry into the community while still maintaining a strong contact with the Family House and the Family House members. Thus it provides an opportunity to experience the community while having a close support proximity. Second, the experience of running groups provides the phase II personnel practice outside of the House with behaviors that are identical to desired treatment model behaviors of a para-professional nature. It is important to remember that the training received by personnel working in the Family Rap is the kind of training that would prove valuable if those persons were to go on to work as para-professional counselors or rehabilitation related workers, or some similar type of work. For persons not interested in these areas the effect or value of the Family Rap experience may not be as important.

This raises the question of whether or not the Family Rap is important to the Family House goal. Again,

there is no way of providing quantitative data to bear on this question. If one accepts the premise that practice of a behavior leads to improvement of that behavior,⁵ then working at the Family Rap should improve group leadership and other related skills, provided that there is supervision from a person presumably already having those skills. On the other hand if the behaviors involved in participating in the Family Rap, i.e. as group leaders, are not of value in the kinds of activities that the phase II individual wishes to pursue upon graduation then the value of participation is less than optimal.

Participation in the Family Rap as part of the re-entry phase is an ultimate option on the part of the individuals; other experiences that individual might find more appropriate to their post-graduation goals are presumably available by the process of alternative re-entry. Thus there would seem to be some question as to whether the Family Rap is an essential

⁵ A premise consistent with the implicit underlying learning theory model of stimulus-response associationism.

objective leading toward the goal of a rehabilitated individual. This statement in no way is intended to indicate that the Family Rap should not continue or that it is not valuable; the statement merely suggests that the Family Rap in and of itself is not an essential component to the treatment model; that other activities could be substituted, depending upon the phase II objectives of the individual.

The Family Boutique was discontinued early in 1972 due to a lack of interest on the part of the residents and because of the problems involved with trying to run a business. The third and fourth quarterly reports to LEAA provide a rather extensive discussion of the decision to drop this objective and interested individuals should make an attempt to obtain copies of those reports. For the purposes of evaluation the variable (the Family Boutique) really does not exist. Its functioning apparently was not related to the success or failure of the larger goal of effective rehabilitation. One speculation with regard to external activities is that if people are not interested in them, i.e. the residents, then the activities won't be able to continue. In fact, the Family Boutique was probably incompatible with another aspect of the Family House goal, that of training

the individuals for social service types of activities. The speculation then is that the activities should be compatible with the goal of the treatment model.

Consequently with respect to the question of self support, of one objectives, it may be said that the objective was not reached. Whether the objective ever could be reached is unknown. There might be a possibility if the activity utilized in phase II were both income producing and compatible with the goal of the treatment model. Whether the program is self-supporting is probably unrelated to its effectiveness however.

The major community service activities are logged in the quarterly reports for the LEAA grant. Rather than duplicate those data, this section will contain a discussion of the type and scope of such activities. The evaluation question in this instance is not concerned with the impact of the activities on the community, but with their occurrence and direction. The question of value or impact is beyond the scope of this evaluation because of the complexity of assessment that would be involved.

Involvement in community services activities is of course limited to individuals in the re-entry phase

of the treatment. This variable sets a limit on the quantity of involvement. The community service entries in the quarterly reports do not distinguish always whether the individuals involved were the phase II people or the directors. An attempt is made here to keep the two sources separate, at the cost of more extensive documentation.

Some of the activities cited during the early period of the grant as carried out by phase II individuals were the leading of groups at the Purdy Treatment Center for Women, the Washington State Reformatory at Monroe, the Washington State Penitentiary at Walla Walla, the Seattle Treatment Center and the city jail of Seattle. In addition, a community referral service project for jail prisoners was begun.

An increasing number of alternative re-entry plans and work with the Family Boutique, Family Media, and the Family Rap would seem to have contributed to the decline in external community activities. The quarterly reports also evidence some problems connected with re-entry personnel attitudinal maladjustment for some individuals when in the external situations. Re-entry personnel remained low for the duration of the grant period, with the primary service activity being the Family Rap. Activities of this type seem to have

dwindled with the graduation or departure through alternative re-entry of several individuals who had begun the program before the LEAA grant period.

The objective of having re-entry personnel serve as assistants or aides to other drug related programs would seem to have been altered. The reasons cited above may be only part of the picture, however. For instance, early attempts to permit re-entry personnel to plan their own activities related to the Family House resulted in a lack of continuity for these projects: i.e. the Boutique was originally centered around the efforts and desires of re-entry personnel. When the individual departed, the Family House had a project that no one wanted, for reasons already noted earlier in this chapter.

With less re-entry personnel and an emphasis on internal rather than external activities, the treatment model would seem to have been revised during the last half of the grant period, consequently bringing about a lessening of community service activities during that period, although the RAP services were actually increased during this period.

In a cost comparison with more traditional methods of treating drug abusers, all community service activities should probably be measured as defrayed costs for treatment. The Family House cost per client would be reduced, while the cost of institutionalization would remain the same.

Another aspect of community service which has not been presented as part of the model of the underlying goals and objectives are the activities of the co-directors. Consultation with other drug treatment programs, public talks on drug abuse, even the inspiration for a different type of prison living arrangement (the Family Group at Walla Walla) are included here. While these activities may not be a necessary part of treatment, they may be seen as added benefits of this particular program to the community.

Two cited objectives of the treatment were an improved "self image" and "emotional stability" for the residents. In the absence of prior measures these two variables are not measurable with respect to change over treatment time. For this reason, no attempt is being made to evaluate these constructs, but the reader is referred to the recommendations (Chapter IV) for further discussion on this matter.

II. Is the Cost Differential Between the Program and Alternatives Favorable or Unfavorable?

Quite aside from the question of whether an individual ceases to engage in socially undesirable behavior is a question of cost. Putting rehabilitation results aside, is it cheaper to house individuals in the Family House for a year, for instance, or is it cheaper to house them in one of the correctional institutions? Current estimates of cost for the four adult correctional institutions in the state of Washington for the year 1972 were obtained from the Office of Program Planning and Fiscal Management for Social and Health Services. The estimates per man per day range from \$10 for the Washington State Prison at Walla Walla to \$43 for the Woman's Treatment Center at Purdey. The Washington Correction Center at Shelton costs approximately \$17.40 per day per man and the Monroe State Reformatory costs approximately \$14.41 per individual.⁶

A "typical" cost estimate per person per day based on an average of 22 clients is \$14.88⁷ for the Family

⁶These estimates likely do not include building costs and certainly do not include social and health services staff and operations costs, and are thus underestimates, relative to the Family House estimate.

⁷This estimation includes the costs of the Family Rap, which also provides out reach services for non-Family House individuals. If the estimated services were considered as defrayed from the Family House budget per se, the cost per client would reduce to about \$13.00 per day.

House. For fiscal 1972 this estimate of 22 clients, including dependents, is quite close to the client figures arrived at by computing client and dependent days and dividing by the number of days per year: $19.35 + 1.58 = 20.91$, or 21. The Battelle Report⁸ issued March 9, 1972, placed its estimate for 22 clients at approximately \$12.70 per day, based on data provided by the Family House staff at that time.

Comparisons of the kind being made here should of course only be seen as approximations unless the exact methods of formulation used in deriving the cost estimates, which in this case is not known are equivalent. We do have the formulations of the Family House however, we do not have the formulations of the estimates from ODFPI. It would seem safe to say that the Family House cost per person falls somewhere near the lower range of the cost per person per day at one of the adult correctional institutions in the state of Washington. As an aside it can be conjectured that

⁸The Family House. Prepared by Battelle Human Affairs Research Center, Law and Justice Study Center, W.A. Smith, Research Analyst. This report is part of an investigation funded by National Institute of Law Enforcement Assistance Administration Grant No. NI70-0876.

one of the reasons the Family House can compete⁹ with the correctional institutions is that the Family House utilizes those being treated to help treat each other, whereas the correctional institutions utilize a higher proportion of non-residents for "treatment" and supervision.

In addition, the Family House staff are live-in staff providing 24 hour supervision without the necessity of three shifts of personnel, such as are required in correctional institutions.

III. Is The Program Run Efficiently?

This is an important question for any governmentally financed program. The cost analysis figure (Fig. 1) on page 6¹⁰ can be of use in estimating the efficiency of the Family House.⁹ The data used are considered to be "typical" costs for operating the Family House for a year's period, rather than the grant period costs.¹⁰ The reasoning for using typical costs is that the Family House was still developing

⁹This figure is adapted from the Battelle Report cited earlier but based on estimated typical cost figures supplied by the E.A.N. Johnson Co., Edmonds, Washington.

¹⁰The costs and explanations are contained in Appendix B.

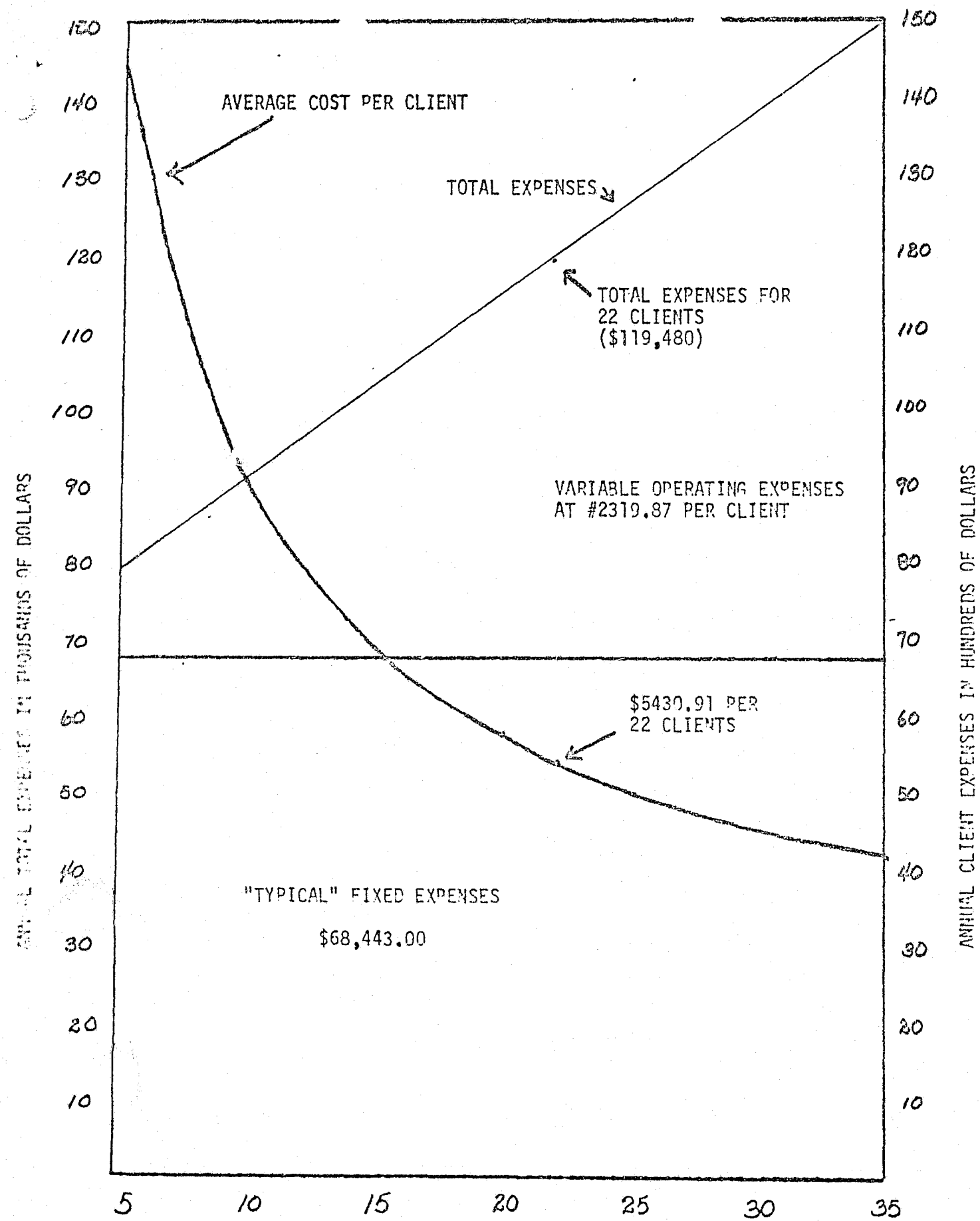


FIGURE I

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and changing during the grant period, with the result that time would be of little use in estimating what similar programs would cost on a stable operating basis. Actual costs are available in the financial reports to Law and Justice.

If the "typical" fixed and variable expenses are accepted, then the average cost per client curve gives an estimate of program efficiency at various levels of client population. Because the curve is asymptotic i.e. never touching the ordinate or abscissa, it is evident that the average cost per client decreases to an approximate limit somewhere around 45 clients. It is also evident that the difference in cost per client per year is only about \$1,000.00 less for 35 clients than for 22 clients. As the client population decreases, however, the cost per client increases rapidly, 10 clients costing about \$9,100.00 per year on the average.

The present client population ideal of about 22 individuals is actually fairly efficient in that not a great deal of money could be saved with a greater number of clients. Also, the addition of extra persons would most likely dictate increased costs not calculated i.e. more transportation vehicles, larger re-entry facilities, an additional phase I director, etc.

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A different aspect of efficiency is concerned with individuals as opposed to expenditures. How efficient is the selection procedure in matching individuals with the program so that the proportion of splittees to in-house members remains low, thus making good use of the facilities?

One kind of evidence for this question is the rate of splittees over a period of time in conjunction with the Family House census for the same period. Because of the lack of complete data prior to the grant period, the investigation of this question will cover the grant period of July 1, 1971 to June 30, 1972 data for splittees and census are found in figures 2 and 3, respectively, pages 72 and 73.

There would seem to be three months of high splittee rate during the grant period: June (1971), December (1971), and March (1972). These periods are associated in the Family House quarterly reports with activity in program alteration, especially relating to changes in the re-entry phase of the program. The census figure shows that the average population during the grant year was 20.03 for adults, and 21.67 including children. These figures compare closely with the client day figures reported above.

Because of the several changes occurring to the

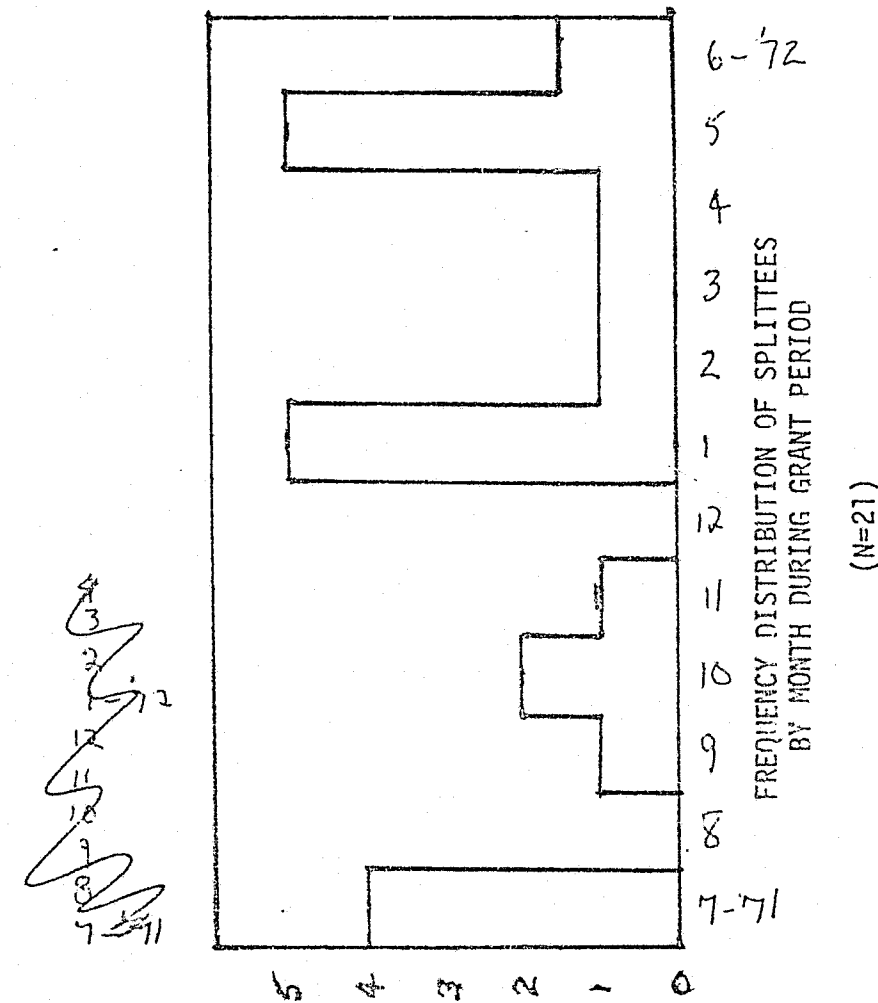
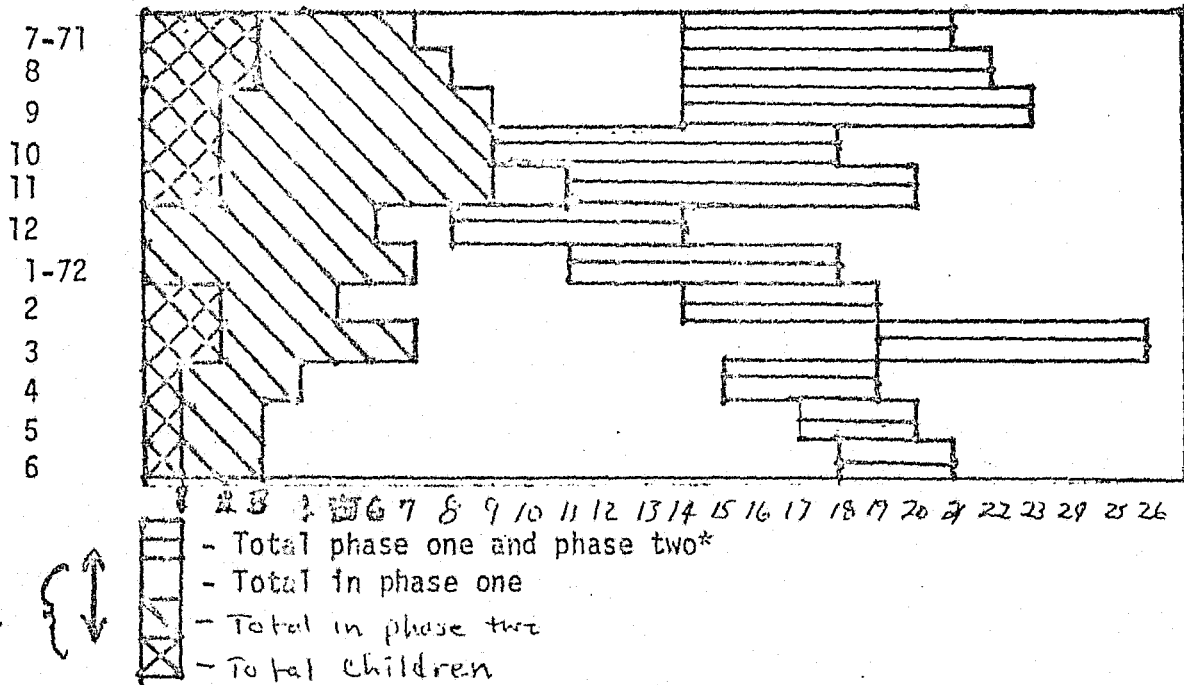


Figure 2

MONTH



C E N S U S

CENSUS OF FAMILY HOUSE FOR GRANT PERIOD AS OF THE FIRST DAY OF EACH MONTH

*Does not include children

Figure 3

Family House during the grant period, it is difficult to conclude or even suggest implications of the rate of splittees. The progress reports note a stagnation occurring through the presence of too many phase II individuals remaining with the program rather than moving into the community. There was also a physical movement of the commune to another house several blocks away.

A third type of efficiency has to do with the flexibility of a program in the face of adverse results. In this respect the Family House seems to rate very highly. The progress reports indicate a willingness to make major revisions in the program and even reversals from those changes in the light of the evidence. For example, the program reversed its expansion and controlled its growth during the grant period when it became apparent that the staff could not effectively deal with the expansion and maintain the type of treatment envisioned from the beginning of the program. The co-directors experimented with a looser structure in phase II and then, when results seemed negative, reverted to a tighter structure. The Family Boutique was phase out as it became evident that it was not functional to the program.

One of the reported primary criteria for these

decisions was the splittee rate. Thus the program has used an indicator of efficiency as a guide in restructuring and revising the treatment components. Only time can tell if the current program is optimal in relation to splittee rate, although it is noteworthy that there were no splittees during the last three months of the grant period.

As suggested earlier, a major component of the treatment model is the re-entry phase. One of the problems with behavior modification programs generally has been the inability to provide for effective behavioral contingencies when an individual returns to the community. The contingencies that worked in the controlled setting, i.e. a hospital, often are not available on the outside, with the result that the client reverts to a pre modification behavior state.

The idea of gradually returning the client to the community while retaining a high degree of contingency control seems at least instinctively appealing. An obvious way of estimating whether the re-entry approach is more effective than a simple graduation at the end of phase I is to compare those people who split after 11 months with those who went into re-entry. Of the seven individuals who split

after 11 months, one is in school and on welfare, two are not working, two are housewives, and two are back in phase I of the program. All of the graduates and re-entry people are of course, working, although two individuals are also on welfare.

The data size does not permit statistical evaluation, but there seems to be a qualitative difference for those going through re-entry phase. The alternative re-entry people constitute a group somewhere between the re-entry and post 11 month splittees, but are, like the re-entry people, working for pay or on a voluntary basis, or are in school. The findings to date would seem to argue for continued watching of the re-entry phase, but the impression is strong that it is valuable to the treatment goal.

Thus it would seem that from the stand point of efficiency, the Family House does well with respect to monetary, clientel, and program aspects.

IV. Is the Program Meeting the Fiscal And Other Grant Requirements?

The firm of Sigler, Preston, and Jensen, Certified Public Accountants, Lynnwood, Washington volunteered its time to audit the Family House books for the year 1971

and has agreed to audit the books again at the end of 1972. It is felt that these two audits by professional accountants more than suffice in meeting the terms of the grant with respect to accountability for monies spent.

Also, Mr. Dennis Loeb of Seattle Law and Justice was contacted, and it was confirmed that he has been monitoring the Family House reimbursement requests. In addition, State auditors are available for the final accounting of the grant monies disbursements.

An additional evaluation of the expenditures of the LEAA monies would seem redundant as there is no reason to suspect any irregularities. For that reason this evaluation will not be concerned whether the Family House met its matched money requirements on time or whether it stayed within its categorical ± 10 percent limitations as provided by the LEAA grant.

V. Is the Program Reproducible?

It is known that drug treatment programs such as Synanon have been reproduced in different areas of the country. It is also known that off-shoots of Synanon have been generated and are functioning. One might say generally that variations of drug treatment

programs are functioning. But the question for the evaluation is whether another Family House can be reproduced. Information relating to this question should shortly be forthcoming as another Family House is being attempted in Spokane, Washington. Evidence will come in watching this second Family House under the direction of two former Seattle Family House graduates.

There is still another aspect of the question: is the Family House reproducible? Whether non Family House personnel could run programs like that of the Seattle Family House. What is the possibility of training individuals so that they could direct Family House training model programs?

The rehabilitation concept of the Family House as with Daytop Village, includes the goal for those persons interested and capable of having its graduates begin their own program based on a similar model in another location. The length of training time is normally of course the length of the treatment program itself. Whether "outside" people could be trained to operate the Family House model successfully or at the level of success exhibited by the Family House presently seems doubtful. Since

the organization of Synanon in California by Dederich there has existed in drug treatment programs a concept of "holding" the addicts undergoing this particular kind of treatment. The ability for the director to hold individuals while not physically restraining them is crucial because drug addiction is by definition a psycho-physical dependence which is extremely strong and extremely resistive to change.

The threat of jail or prison even for those individuals placed in a drug treatment program on probation or parole does not seem to be sufficient in of itself. For instance, of the 39 who entered the Family House on probation or parole 18 are listed as permanent splitees. The estimation by Bob Garsi, for example, of the number of phase I residents that he can hold is an upper limiting value for the population for the Family House first year program. Another reason for the hold concept is that not all persons entering into the treatment program have legal constraints on them. As has been pointed out, for example, many of the females in the program have come in off the streets.

The situation is such that on the one hand there is the example of Synanon, Daytop Village, and other

programs showing that persons going through those programs can then go out and start their own programs. From the Family House two graduates are attempting to start another Family House in Spokane, two alternative re-entry persons are directing Walkway House in Bellview, and a fifth person is the Facility Director of Genesis House, all three drug treatment programs. One the other hand is the position of postulating that people might be trained to function effectively as directors in helping drug abusers without going through a drug treatment program.

The programs run by professionals such as those at Lexington, Kentucky were rather notorious for their lack of success in rehabilitating addicts, especially through the use of holding by force. Given the lack of any currently available evidence to the contrary the suggestion would be that the Family House model is reproducible utilizing graduates of the treatment program who are interested in becoming program directors. The attempt to train directors for the treatment model who have not been through the program on the other hand would undoubtedly involve a considerable length of time, probably as much time as is involved in going through treatment, and the expectation of success is totally unknown, whereas prior evidence

from other drug programs would lead one to conclude that the chances of success for persons who have gone through the Family House treatment are greater than zero.

To sum up what is a very difficult question given the data; it would seem to be evident that persons going through drug treatment training programs can go on to successfully operate their own drug treatment training programs; there would seem to be some evidence that successful directors of such drug treatment programs need to have the ability to hold people in the program without external force; it is not known whether persons not having first hand acquaintance with drug addiction (i.e. ex-addicts) and a heavy commitment toward rehabilitation of addicts, can operate as examples of successful rehabilitation and be trained apart from going through the treatment program. In terms of making probability estimates, the, one might estimate that the program can be reproduced but that efforts to do so should involve graduates of that program.

More reliable evidence can of course come from watching the progress of the Spokane Family House which is currently attempting to begin operation. It should be made clear that the unique part of the

treatment model is not specific to the Family House treatment model but to most drug treatment programs of this nature, such as Synanon, Seadrunar and Daytop Village i.e. the holding power of the director or leader. The parts of the Family House that are unique from other programs would appear to be very reproducible for other drug treatment programs and if they are superior, i.e. lead to more graduates and less recidivism than other programs, then these unique variables should be given consideration by other drug treatment programs. It is however, not the scope of this particular evaluation to compare the Family House with other drug treatment programs; such a comparison will have to await a separate evaluation.

END