

Using Organizational Change Data, Synthetic Treatment Need Estimates, and Arrest Data to Prioritize Resources for Adolescents

P. Allison Minugh, Ph.D. and Susan Janke, M.S.
 DATACORP Providence, Rhode Island

INTRODUCTION

The demand for substance abuse treatment resources often exceeds the available financial resources. With a scarcity of resources, it becomes important to determine where treatment is most needed, and whether providers are ready to deliver evidence-based services.

STUDY PURPOSE

The purpose of this study was to examine the utility of combining knowledge of an organization's readiness to change and adopt evidence-based practices with knowledge of substance abuse treatment need to determine if this combination could be useful in making resource allocation decisions.

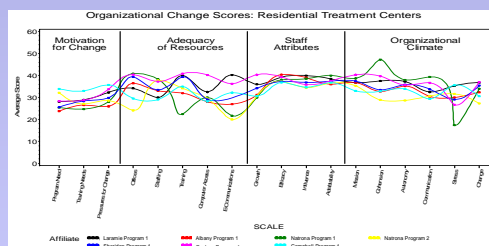
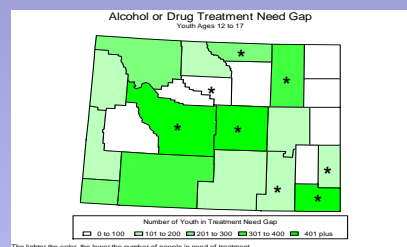
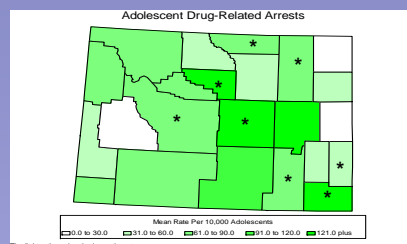
METHODS

The authors used the Texas Christian University Organizational Readiness to Change (ORC) Instrument for program directors and staff to collect organizational readiness to change data on adolescent residential treatment providers. The ORC provides data on motivation for change, resources, staff attributes, and organizational climate; four elements that can serve as a proxy for treatment effectiveness and are necessary for organizational change to occur. The National Survey on Drug Use and Health (NSDUH), in conjunction with US Census data was used to generate synthetic estimates of substance abuse treatment need defined as having a DSM-IV diagnosis of alcohol or drug abuse or dependence. The treatment need "gap" was then calculated by subtracting each county's treatment admissions from its synthetic estimate of treatment need. Arrest data was gathered and averaged over a four-year period to augment treatment need data.

These three measures were then put into an algorithm to help identify counties and programs where resources should be allocated.

RESULTS

The maps below report adolescent drug-related arrests and the adolescent synthetic estimation for substance abuse treatment need, respectively. Counties with darker shades of green have a higher number of adolescent drug arrests or adolescent substance abuse treatment need. Stars on the maps indicate the counties of interest.



The following table presents the ranked values for the organizational readiness to change scores, the adolescent drug-related arrests and the adolescent alcohol and drug treatment need gap. Programs 3 and 4 in Natrona County received the two highest priorities for resource allocation based on their ranks across the three measures.

Program	Total Readiness to Change	Treatment Need	Drug-Related Arrests	Final Rank
Natrona Program 3	2	2	2	1
Natrona Program 4	6	2	2	2
Fremont Program 2	1	3	7	3
Laramie Program 1	7	1	3	3
Albany Program 1	4	5	4	4
Campbell Program 1	3	4	6	4
Laramie Program 2	9	1	3	4
Sheridan Program 2	5	4	5	5
Natrona Program 2	12	2	2	6
Washakie Program 1	8	7	1	6
Natrona Program 1	13	2	2	7
Sheridan Program 1	10	4	5	8
Fremont Program 1	14	3	7	9
Goshen Program 1	11	6	8	10

DISCUSSION

Combining organizational change data with synthetic estimates of treatment need and arrest data provided a more comprehensive picture, and proved to be more useful for informing resource allocation than relying on any one single indicator to describe these rural treatment providers. Organizational readiness to change data can clearly shift a program's priority ranking. If a planner is faced with prioritizing funding in a geographic area with multiple programs, he or she can consider allocating resources to programs that not only have substantial need but also have a greater likelihood of accepting an evidence-based practice and implementing it with fidelity. This is important because a successful program transfer process can lead to program change and program improvement (Lehman, Greener & Simpson, 2002).

Adolescent substance abuse treatment admissions continue to rise and this growth is almost exclusively attributable to criminal justice system referrals (SAMHSA, 2001). Addressing increased treatment demand requires careful resource planning to ensure maximum benefits are achieved for each dollar spent. Combining ORC data with synthetic estimates of treatment need and arrest data provides a systematic and quantifiable methodology for planning and evaluating the provision of adolescent substance abuse treatment services.

Substance Abuse and Mental Health Services Agency (2001). The DASIS Report – Coerced Treatment Among Youths: 1993 to 1998. Washington, DC: Office of Applied Studies.