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**SUBSTANCE ABUSE TREATMENT AND JUSTICE-INVOLVED INDIVIDUALS:  
IMPLICIT BELIEFS ABOUT ADDICTION AND SUCCESSFUL DRUG TESTS**

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Executive Summary

Rehabilitating justice-involved individuals is hard to do. But the most effective rehabilitation programs are those that target problematic attitudes, particularly within a cognitive-behavioral intervention context. Yet, justice-involved clients often harbor attitudes that they may not even be fully aware of—what are known as “implicit beliefs.” These implicit beliefs can facilitate and enable behaviors that individuals know to be harmful to them, even if they are not necessarily “conscious” of such thoughts. Such beliefs can take the form of attitudes that a drug or alcohol addiction is beyond their control (i.e., “it’s a disease, so there’s really nothing I can do about it”)—beliefs that may inhibit one’s motivation to attempt to change.

Individuals hold either an *entity theory*, which assumes that specific attributes or traits are fixed and cannot be changed, or an *incremental theory*, which holds that these traits or attributes are more fluid and malleable. Important for rehabilitation programs, many people, including those providing corrections-based treatment, subscribe to the disease model of addiction—a model that is arguably more inherently entity than incrementally based. The disease model describes substance dependence as a physiological condition that a person cannot control. Alternatively, other treatment models, such as rational-emotive behavior therapy, emphasize choice in overcoming addiction. These programs are more consistent with incremental beliefs about addiction. Either way, the different approaches suggest that individuals hold different beliefs about the nature of addiction, and that these beliefs are likely consequential to their odds of successfully abstaining from problematic drug and alcohol use and successful recovery from addiction.

Accordingly, in the present study we examined the relationship between a measure of implicit beliefs about addiction and the outcomes of tests for substance use at a pivotal phase in a sample of individuals participating in an intensive drug treatment program. In particular, we assessed whether those with implicit beliefs consistent with an *incremental theory* were more likely to pass a drug test when faced with the challenge of transitioning from a highly structured inpatient phase of treatment to the aftercare phase that requires individuals to apply in a real-life setting the skills he or she has learned.

We analyzed data from a sample of 121 justice-involved individuals who participated in a corrections-based intensive drug treatment program known as the Substance Abuse Felony Punishment Facility Program (SAFPF) as a condition of their probation. The participants were incarcerated in a lock-down facility for six to nine months and they attended treatment sessions during their incarceration. During the second phase, participants were placed in a transitional treatment center, where they were closely monitored, attended treatment, gained employment, and found a place to live. This phase lasted approximately 60 days. During the third phase, participants lived on their own, attended aftercare, reported to a probation officer, and to work. Because participants were living on their own and were attending fewer treatment meetings during the aftercare portion of the program, we expected them to be more vulnerable to relapse in this portion of the program.

The results indicate a significant association between implicit beliefs and success or failure on drug tests after the pivotal transition to the aftercare portion of the program. Specifically, those who hold an incremental or malleable theory about the nature of addiction were significantly more likely than their entity theory counterparts to successfully pass their drug tests by a factor of roughly 17%. These effects held up even after controlling for demographic factors, as well as a general measure of recidivism risk.

Table 1.

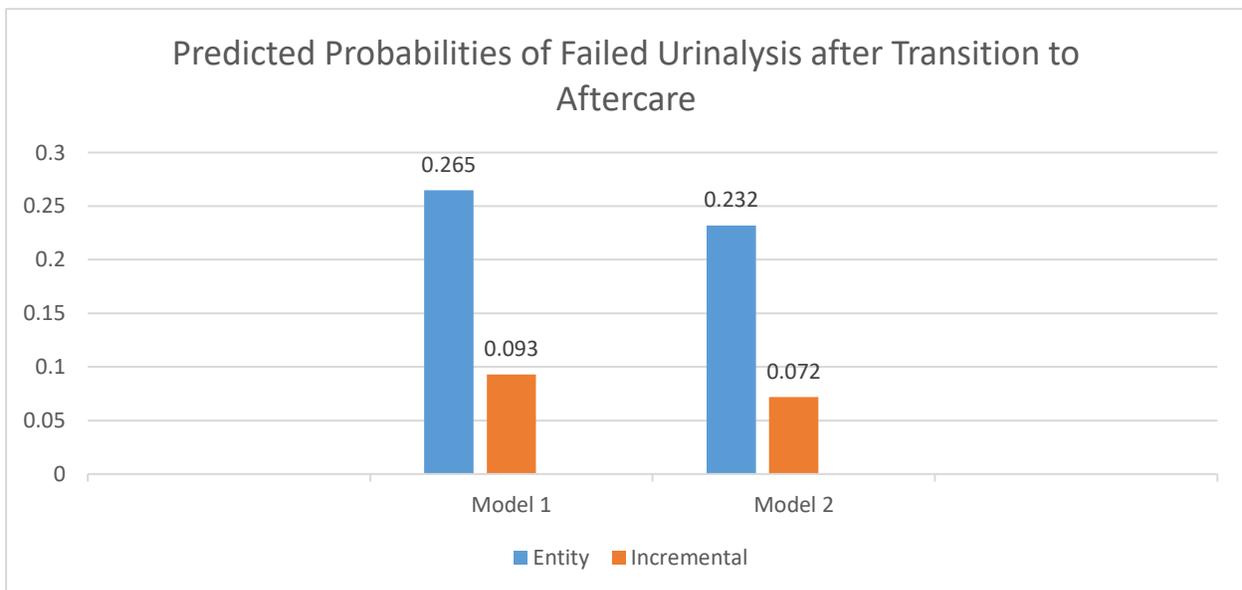
Variable	Model 1	Model 2
<b>Key Independent Variable</b>		
Implicit Beliefs	1.270** (.531)	1.247** (.634)
<b>Control Variables</b>		
Age	.018 (.028)	.027 (.032)
Race	-.646 (.512)	-.640 (.588)
Gender	-.460 (.590)	-.659 (.671)
Wisconsin Risk Score	--	-.078* (.048)
Constant	-2.472** (1.116)	-1.547 (1.575)
Model Statistics	Model $\chi^2 = 9.11^{**}$ -2LL = 102.56 Nagelkerke $R^2 = .120$	Model $\chi^2 = 11.53^{**}$ -2LL = 78.10 Nagelkerke $R^2 = .181$

Coefficients are presented as unstandardized parameter estimates with standard errors in parenthesis.

\*  $p < .10$  (one-tailed)

\*\*  $p < .05$

Figure 1.



The findings suggest that beliefs matter in drug treatment and rehabilitation programs for those with substance abuse issues and that such beliefs play a key role in the success of justice-involved individuals participating in substance abuse treatment regardless of risk level. The simple belief that addiction is something that is beyond a person's control led to higher relapse rates, while a belief that addiction is malleable and within one's control prevented relapse when faced with the difficult transition to life on their own with less structure after participation in a highly structured inpatient treatment program. The results lead to two important factors that merit discussion.

First, the results suggest that correctional interventions and substance abuse treatment programs should consider incorporating indicators of implicit beliefs into assessment and treatment protocols for those with substance use problems. The results also point to the importance of targeting for change problematic implicit beliefs, and our study indicates that we should exercise caution against adopting treatment models that emphasize the notion that justice-involved individuals are "helpless" when it comes to their addiction to drugs and alcohol.

While more research is certainly needed regarding implicit beliefs that are specific to justice-involved clients struggling with substance abuse issues, there is a substantial body of evidence (Dweck, 2008) that beliefs play a powerful role in the way people function in the face of adversity in a variety of situations that has clear implications for drug treatment and rehabilitation programs.

The promising implication for justice-involved treatment programming is that teaching clients a malleable theory about addiction can change the trajectory of their life to a path of resiliency and to success in the face of difficulty.