

Counseling Services & Cognitive Behavioral Treatment Facts Sheet

The Evidence Based Practices Model supports and encourages correctional agencies to employ and utilize cognitive behavioral programs for the offender population. The research indicates that this treatment approach has the highest return on reducing recidivism when implemented with integrity of the model. There is strong evidence that cognitive-behavioral therapy (CBT) reduces recidivism among youth and adults (Campbell-Lipsey 2007, Wilson 2005). Effects are strongest for offenders with a high risk of recidivism (Campbell-Lipsey 2007). CBT can also reduce recidivism by persons who abuse substances (McMurran 2007) and sex offenders (Schmucker 2008). For serious juvenile offenders, CBT is particularly effective at reducing the recurrence of serious crimes (Campbell-Garrido 2007).

Profile of Programs

Motivation for Change: Motivation for Change is considered an intervention rather than a program. It reduces the resistance participants have toward more intensive programming and helps them identify for themselves where they are at in their stage of change with regard to their criminal behaviors, addictions, attitudes, values, and beliefs. This program meets the legal mandate for Substance abuse counseling and is a pre-requisite for all other programming needs. **Program Sites: State Prisons, Private Prisons, County Camp, Transitional Centers, Probation Detention Centers**

Moral Reconciliation Therapy (MRT). MRT® is an objective, systematic treatment system designed to enhance ego, social, moral, and positive behavioral growth in a progressive, step by step fashion. MRT® has 12 to 16 steps, depending on the treatment population. MRT® attempts to change how offenders make decisions and judgments by raising moral reasoning from Kohlberg's perspective. Briefly, MRT® seeks to move clients from hedonistic (pleasure vs. pain) reasoning levels to levels where concern for social rules and others becomes important. Research on MRT® has shown that as clients pass steps, moral reasoning increases in adult drug and alcohol offenders and juvenile offenders. MRT focuses on changing criminal attitudes, beliefs, values, thinking pattern, and behaviors. **Program Sites: State Prisons, Private Prisons**

Thinking for a Change (T4C). Thinking for a Change (T4C) is an integrated, cognitive behavioral change program for offenders that include cognitive restructuring and skill building. The program is focused on changing destructive attitudes and behaviors that reinforce criminal behavior. The program helps offenders develop problem-solving skills and identify what they are telling themselves to justify breaking a rule or law, and then helps them to come up with new attitudes and beliefs to counter the faulty attitudes and beliefs they already have that keep getting them into trouble. Currently our offenders will ignore a problem until it is too big for them to handle. This class gives them steps to follow on how to manage problems while they are still manageable. **Program Sites: State Prisons, Private Prisons**

The Problem Solving Skills in Action (PSSIA) program is a cognitive behavioral intervention program that teaches cognitive skills. The intervention directly teaches offenders the critical prosocial skills-alternatives to antisocial behavior. Such interventions often address deficiencies in basic social skills, problem solving, anger management, perspective taking, and empathy. These skills are broken down into component steps and taught in class much by a process of first understanding the benefits of using the skill, then watching clear and realistic modeling, followed by opportunities for participant's role play and give one another constructive feedback, before eventually transferring the skills to realistic setting. This program is a closed ended 8 session group. **Program Sites: State Prison, Private Prison, County Camps, Transitional Centers**

Sex Offender Psycho-educational Program (SOPP). The Sex offender curriculum is designed to provide a teaching structure that addresses the following: focus the offender on the reality of harm to his victim (s) regardless of the specific details of his/her conviction; insures that the offender recognizes that he/she made choices throughout every step of the process that ended with his present position in the group and that he must accept responsibility for all choices; provides focus on sexual offending as abuse of power to meet one's own needs despite the cost to others; provides a forum for discussion relevant to the task of controlling one's behavior for the rest of one's life; provides a setting in which the offender can practice new ways of handling feelings and urges. **Program Sites: State Prisons, Private Prisons**

Anger Management (SAMSHA) Cognitive behavioral therapy (CBT) treatments have been found to be effective, time-limited treatments for anger problems (Beck & Fernandez, 1998; Deffenbacher, 1996; Trafate, 1995). Four types of CBT interventions, theoretically unified by principles of social learning theory, are most often used when treating anger disorders: The treatment model described in this manual is a combined CBT approach that employs relaxation, cognitive, and communication skills interventions. Anger Management is a 12-week cognitive behavioral anger management group treatment program. **Program Sites: State Prisons, Private Prisons**

Family Violence Intervention Program (herein "FVIP") - Any program that is certified or seeking certification by the Department of Corrections pursuant to Code Section 19-13-14 and designed to rehabilitate family violence offenders. The term includes, but is not limited to, batterer intervention programs, anger management programs, anger counseling, family problem resolution, and violence therapy. **Program Sites: State Prisons, Private Prisons**

Moving On: This gender-specific program addresses many risk factors that can lead to a woman's criminal behavior. It provides women with alternatives to criminal activity by helping them identify and mobilize personal and community resources. Moving On is a flexible, open-ended intervention program that allows continuous intake. It draws on evidence-based treatment models of relational theory and cognitive-behavioral therapy. The program content is organized around four main themes: **Program Sites: Female Prisons**

1. Encouraging personal responsibility and enhancing motivation for change
2. Expanding connections and building healthy relationships
3. Skill enhancement, development, and maintenance
4. Relaxation and stress management skills

Active Parenting Now is a video-based parenting education program targeting parents of children from early childhood through early teens who want to improve their parenting skills and their child's behavior. It is based on the application of Adlerian parenting theory, which includes mutual respect among family members, nonviolent discipline, problem solving, communication skills training, family enrichment, and encouragement. **Active Parenting Now** is conducted in one 2-hour class per week for 6 weeks. The program features a video that contains vignettes of a variety of typical family situations depicted by professional actors. Each scene provides an example of how an autocratic or permissive parenting technique fails to handle a situation and then models the alternative authoritative (or "active") skills. **Program Sites: Female Prisons; Helms Unit**

Breaking the Chains of Trauma. The Trauma-MRT program is for treatment for trauma- related experiences. The Trauma-Focused- MRT (TF- MRT) approach incorporates all of the key issues identified in SAMHSA’s Trauma Informed Treatment Protocol. MRT is a NREPP program included on the SAMHSA National Registry of Evidence-based Programs and Practices. The TF-MRT curriculum, Breaking The Chains of Trauma, is for use with offenders, mental health clients, substance abusers and individuals struggling with day -to-day responsibilities due to trauma-related experiences. The curriculum is designed to be an 8-session group format that can be implemented in an open-ended format – where new participants can enter at any time – or as an 8-session psycho-educational class. There are separate workbooks for female and male participants. **Program Sites: Lee State Prison**

Offenders Under Transition (O.U.T.)- A Cognitive Behavioral Program utilized in the level 5 TIER II non-mental health facilities designed to enhance an offender’s motivation to change a problem behavior, combined with programming to provide new skills. The curriculum is based on Cognitive Behavioral Therapy (CBT) and Motivational Interviewing (MI) treatment concepts. O.U.T is a 9-month program designed to modify anti-social behavior for offenders who are housed in the TIER II housing unit. **Program Sites: Hays SP, Macon SP, Georgia SP, Telfair SP, Valdosta SP, Smith SP, Ware SP, Hancock SP, Georgia Diagnostic SMU**

For More Information, Contact:

Talisha Moody, LPC, MS
Inmate Services, Risk Reduction Services
Counseling Services & Cognitive Behavioral Unit, Program Director
(706) 819-3858 (work cell phone)
(478) 992-5914 (work fax)
Email: Talisha.Moody@gdc.ga.gov