

Enhancing the Wellness of Offenders in a Residential Correctional Substance Abuse Program: A Community Based Approach

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Outline

- Why Establish Wellness Programs in Prisons?
- How Wellness Programs Can Be Established & Evaluated
- Results From an Innovative Correctional Wellness Program
- Summary/Conclusions
- Questions/Discussion

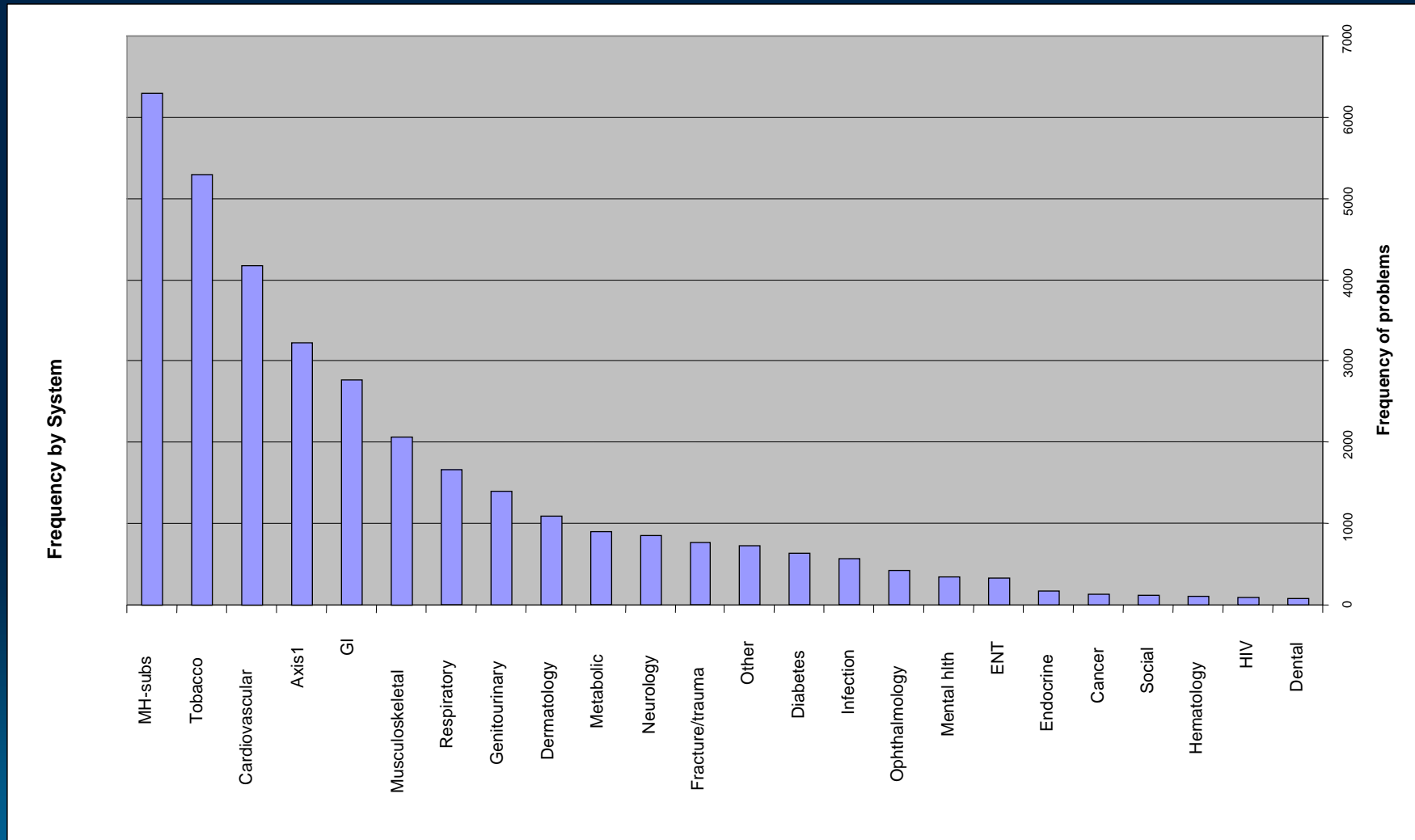
The Need for Correctional Wellness Programs: The Offender

- Engage in **high risk health behaviors**
- Have **less access** to health care when not incarcerated
- Have increased prevalence of **infectious, communicable & chronic conditions**
- Have increased prevalence of **mental illness & substance abuse**
- **Are aging**

The Need for Correctional Wellness Programs: The State

- **A responsibility** to efficiently utilize state resources
- **A window of opportunity** to promote health & wellness

Prevalence of Medical Problems – KY Department of Corrections



Evidence that Worksite Wellness Programs Work

- Cost-effectiveness
 - Health care costs
 - Productivity
 - Attendance
 - Presenteeism
- Improved morale
- Improved health

Lessons from the Worksite Wellness Approach

- Obtain **leadership** permission and support
- **Appoint** a Wellness Committee
- Select **evidence-based interventions**
- Devise a **strategic plan** and have it approved
- Administer Health Risk Assessments (**HRAs**)
- **Review** and revise plan
- Begin **interventions**
- Collect **data**
- **Continually revise** wellness plan

Typical Wellness Topics....

- Physical activity
- Stress management
- Health education
- Mental health
- Cancer screening
- Mother and infant education
- Work site injuries
- Dental Care
- Tobacco use cessation
- Alcohol and drug use
- Nutrition and weight management
- Sexually transmitted diseases
- Preventive care
- Back care

Examples of Wellness Program Activities

- Biologic testing (cholesterol, sugar, BP, etc)
- Individualized recommendations on basis of HRA responses
- Workshops (brown bag lunches) on nutrition, exercise, tobacco non-use, stress
- Incentives (contests, recognition, dues for health clubs)
- Exercise facilities, walking track
- Healthy food choices on site
- Newsletter

Adapting Worksite Wellness Approach to Corrections Settings

- Little adjustment needed
- Material incentives are problematic
- Security concerns may limit access to outside and exercise equipment
- Ability to change nutritional choices are limited
- Inmates have not traditionally been involved in planning programs
- HRAs require different wording for inmates

Enhancing Wellness at Roederer Therapeutic Community (RTC)

Kentucky Corrections
Health Services Network

Academic & Health Policy Conference
March 2007, Massachusetts

Characteristics of our Wellness Program Site

- Roederer Therapeutic Community
- Behavioral substance abuse program
- Residential – 200 beds
- Non medical
- Minimum security
- Prisoners and parolees
- A structured program
- Managed by 10 Staff
- Assisted by 8 Elders
- Wellness Program started in August 2005



Characteristics of our Population

- All male
- Adult – Average age, 35
- 35% African American, 65% White
- All have a history of substance abuse

Responses to Health Risk Assessment

	Healthy (%)	Moderate Risk (%)	High Risk (%)
Exercise (n = 278)	50.7	26.3	23.0
Nutrition (n = 267)	6.7	42.7	50.6
Stress (n = 274)	46.4	39.4	14.2
Depression (n = 276)	54.7	31.9	13.4
Smoking (n = 276)	23.2	10.9	65.9
Tobacco Use (n = 304)	18.4	na	81.6
Risky Sexual Activity* (n = 281)	17.1	na	82.9
Seat belt use* (n = 281)	30.2	42.7	27.1
Dental (n = 275)	20.4	15.6	64.0

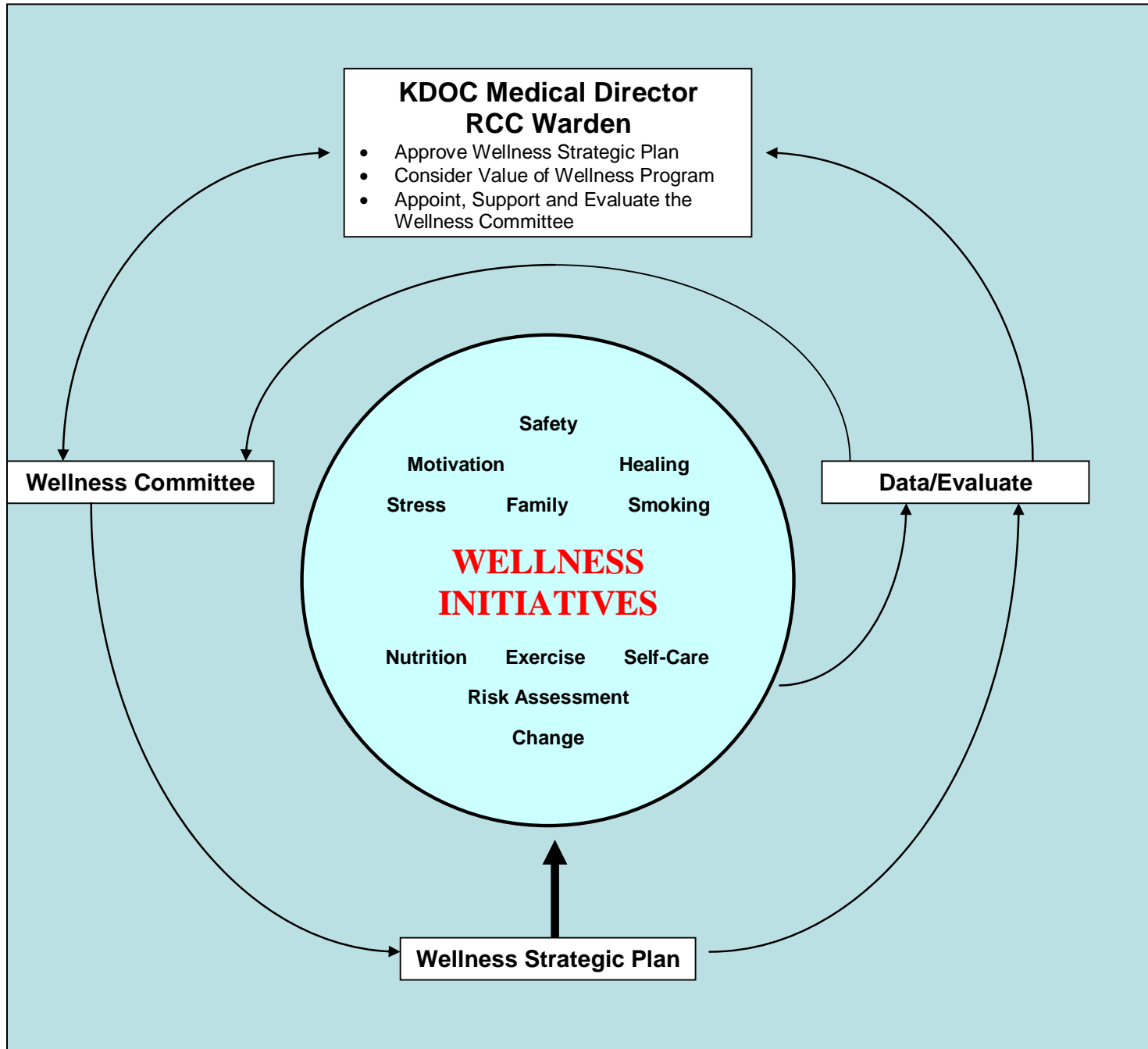
* Indicates “when not incarcerated”

Important Considerations

- Community-based participative research approach
- Follow a model for community health education planning (The Precede-Proceed model)

The PRECEDE-PROCEED Process

- Assess -
 - Social context
 - epidemiologic data
 - audit behavior & environment
 - identify predisposing, reinforcing & enabling factors
 - administrative & policy context
- Implement
- Evaluate process, impact & outcome



Examples from *Wellness Works* - Process

- Academic partner proposed a wellness emphasis
- Senior Dept of Correction administrators agreed
- Wellness Committee appointed & charged to develop a plan (PRECEDE-PROCEED steps followed)
- Plan approved by leadership
- Resources allocated
- HRA developed specifically for inmates
- Interventions begun & data collected
- Wellness Elder & resident staff aid appointed

Examples from *Wellness Works* - Projects

- Health Risk Assessments administered
- Classes address modifiable risk factors
- Garden
- Nutrition workshops
- Walking track
- Increased physical activity opportunities
- Visiting speakers
- Peer-to-peer moderated smoking cessation forums
- Library enhanced with wellness materials
- In house newsletter produced by residents

Is Wellness Works Working?

Kentucky Corrections
Health Services Network

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How to Evaluate a Wellness Program

Three data sources:

1. Self administered questionnaires
2. Medical Record
3. Logs and administrative and program documents

How to Evaluate a Wellness Program (cont.)

Three data sources:

1. Self administered questionnaires
 - Event Evaluations
 - Exit Evaluation
 - Key Informant Survey
 - Health Risk Assessments
2. Medical Record

How to Evaluate a Wellness Program (cont.)

3. Logs and administrative and program documents

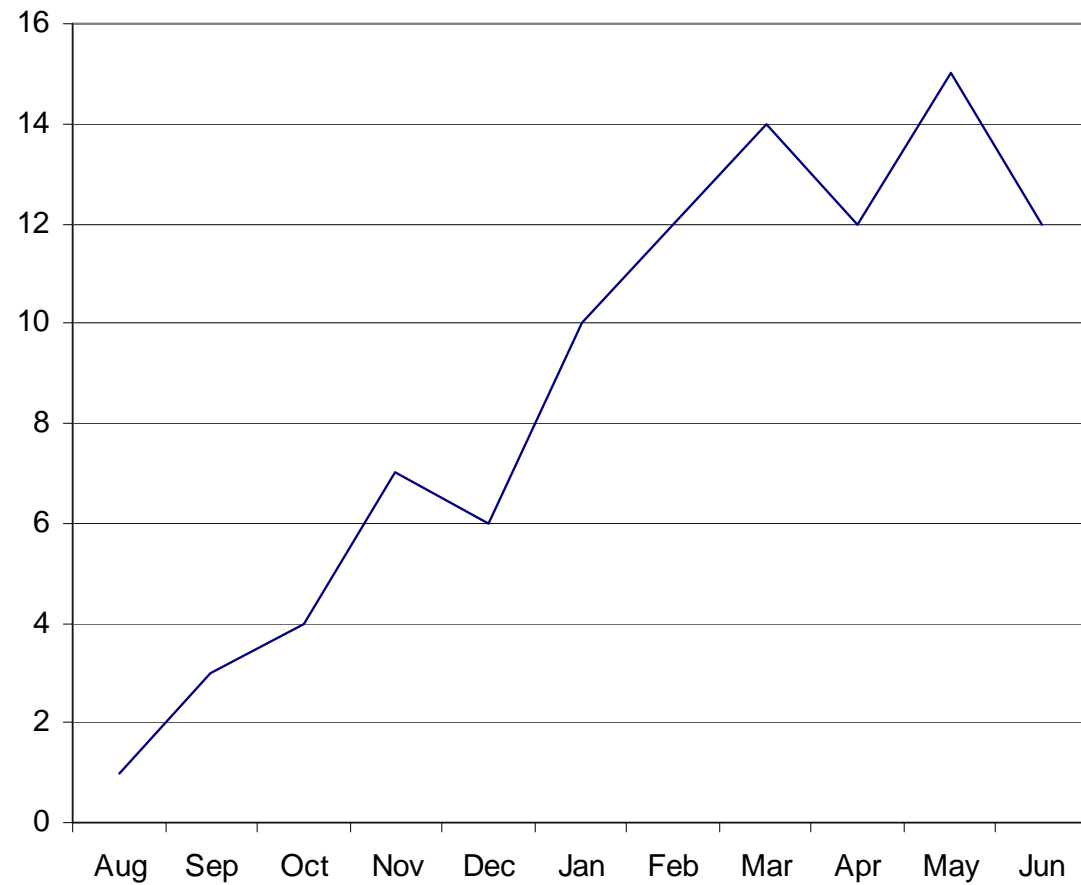
- process logs
- participation rosters
- meeting notes
- wellness plan
- environmental audit
- curriculum audit
- cost data
- canteen sales

How to Evaluate a Wellness Program (cont.)

Ultimate Outcomes

1. Long-term self-reports (HRAs)
2. Physiologic measures
 - BP
 - Blood lipids
 - Weight
 - Abdominal girth
3. Disease Outcomes

Wellness Works Total # Wellness Activities/Opportunities



Exit & Event Evaluations

Criteria	Event Eval	Exit Eval
Resident participates in Wellness Works (n = 46)	NA	30% participated in “many” or “some” of the wellness events/classes
Resident will be healthier	65% agree (n = 158)	56.5% agree (n = 46)
Others will be healthier	53% agree (n = 158)	37% agree (n= 46)
Wellness Works (or a specific Program) could be improved	23% agree 53.5% disagree (n = 157)	29% agree 38% disagree (n = 45)
The Event/Class was well-presented	91% agree (n = 155)	NA
Of those that participate, how many receive significant benefit?	29.5% chose “Many” 64% chose “Some” (n = 156)	11 % chose “Many” 70% chose “Some” (n = 47)

Exit & Event Evaluations

Quotes from residents

Applying myself to this program I strongly feel my health levels will increase for the better.

I believe this to be a good thing. People need to be educated about wellness issues!

I'm gonna try-it's all about the action I put into my wellness. At least I have the knowledge.

Health is a choice

I think the wellness program would be a great thing for the people of this community. Not only are we getting help for addiction and our minds but we will be able to learn about our health and how to make sure we are maintaining good healthy routines. I feel it will be a great thing.

Key Informant Survey

	Strong Agree (%)	Agree (%)	Dis-agree (%)
Staff can participate	57	30	3
Residents can participate	63	33	0
Time spent is worth effort	40	40	0
Lifestyle changes made	10	70	10
SAP more effective	37	50	3
Adequate resources	17-23	40-47	17-20
Clear direction for program	17	47	17
Expand to other SAPs	50	37	0

n = 30

Key Informant Survey

I think it's a great way to introduce life-changing ideas to people who may not have a chance otherwise.
Staff Member

The wellness program can be improved by installing resident leadership to set long and short term goals and have appropriate deadlines to meet those goals.
Resident

Too busy with overwhelming work load to participate at acceptable level.
Staff Member

Having a nurse educator with sufficient time and talent to deliver and coordinate the wellness plan.
Outsider Comment

HRA Six-month Follow-up

In General, how good is your health?

	Very Good (%)	Good (%)	Poor (%)
Baseline	37.9	45.7	16.4
Follow-up	40.5	41.4	18.1

n = 116

HRA Six-month Follow-up

Modifiable Lifestyles

	At Risk (%)	
	Baseline	Follow-up
Exercise	47.4	59.8
Nutrition	91.7	94.8
Smoking	73.7	70.7
Stress	59.2	44.9
Depression	45.9	39.8
Unsafe Sex	57.8	60.3

n = 117

HRA Six-month Follow-up

	Change from Baseline (# days in last 30)	p
Full of Energy	- 1.0	0.59
Physical Health Not Good	+ 2.3	0.19
Mental Health Not Good	- 0.1	0.96

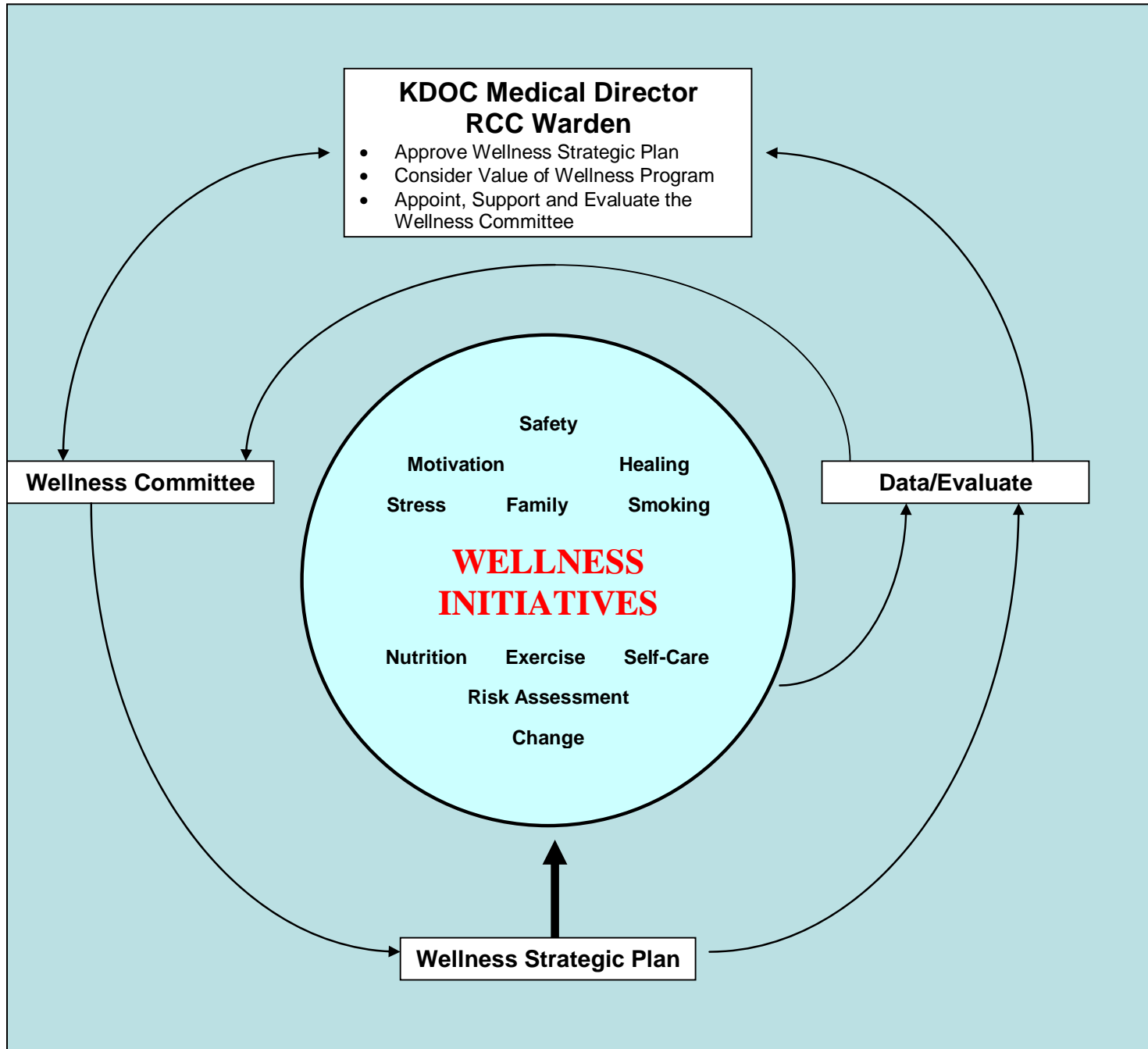
n = 79

Data Not Yet Analyzed

- Participation rates
- Physiologic measures
- Canteen sales

Is Wellness Works Working?

1. Program has been well-received by staff and residents
2. Changes to community culture, for example, the appointment of a wellness elder and aide
3. Residents have suggested program improvements, for example, tracking health behaviors
4. Program is supported by DOC
5. Activities are well-attended
6. Program is expanding
7. Modest changes in lifestyles reported (but data analysis has just begun)
8. Long-term effect not yet known



Essential Elements of a Successful Correctional Wellness Program

1. Planning and preparation

- **Needs assessment** to appropriately target interventions
- Obtain sufficient **resource allocation**
- **Evidence based** interventions
- Develop and have approved a **strategic plan**
- Define **measurable objectives**
- Adopt a **holistic** approach
- Collect **performance data** and make improvements
- Ensure program is **cost-effective and efficient**
- Plan for **sustainability**

Essential Elements of a Successful Correctional Wellness Program

2. People

- Leadership **support**
- A **champion**, e.g., a nurse educator or outside facilitator
- Involved and **committed staff**
- High levels of resident and staff **participation**
- Identify and **target high-risk offenders**
- Effective **communication strategy**

Essential Elements of a Successful Correctional Wellness Program

3. Community-Based Participation

- Wellness committee made up of
 - clinical staff
 - program staff
 - program residents
 - university advisers
- Wellness program activities evaluated by residents elected to Evaluation Advisory Panel
- Daily wellness activities coordinated by resident Elders and Aides

Contact Presenters

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