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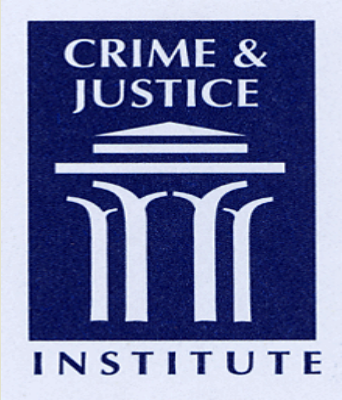

Evidence-Based Practices in Correctional Treatment: Ethical and Philosophical Considerations

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Learning Objectives

By the end of this session, participants will:

- Understand the standards and philosophical framework behind Evidence-Based Practice
- Be able to articulate how this framework can be adapted effectively for correctional treatment;
- Demonstrate understanding of some of the unique ethical issues that this standard of practice raises when applied to offenders

What is Evidence-Based Practice?

- Originated in the field of healthcare
- Its emergence correlated with the rise of the internet
- Imperative to use healthcare dollars efficiently
- The antithesis of quackery and consensus-based decision-making

What is Quackery?

"An alternative to authority-based decision-making, in which consensus, anecdotal experience, or tradition are relied on to make decisions" (Gambrill 2006).

Correctional quackery is dismissive of scientific knowledge, training, and expertise… It embraces the notion that interventions are best rooted in "common sense," in personal experiences (or clinical knowledge), in tradition, and in superstition…. (Latessa 2002)

What is Evidence-Based Practice?

"Evidence-based practice describes a philosophy and process designed to forward the effective use of professional judgment in integrating information regarding each client's unique characteristics, circumstances, preferences, and actions, and external research findings" (Gambrill 2006).

How is Correctional Treatment different from other behavioral healthcare?

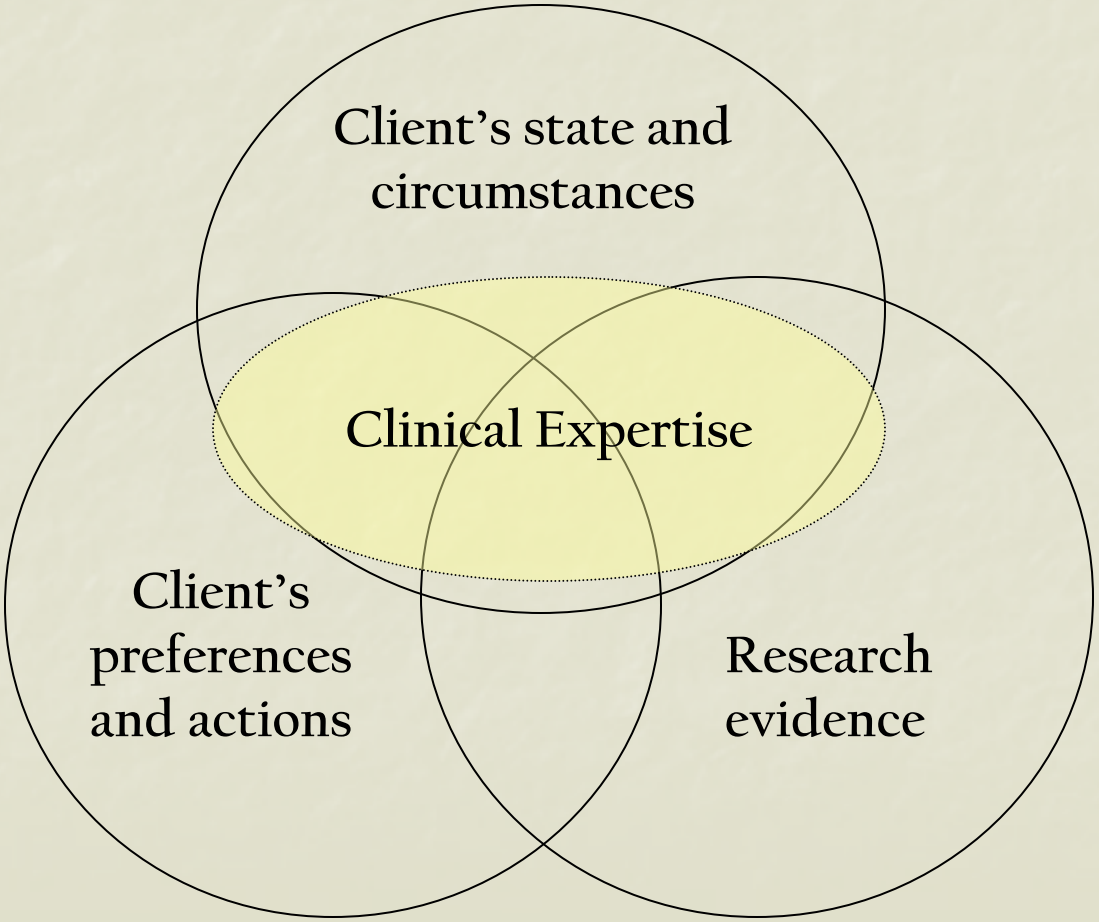
- A unique hybrid of public health and public safety perspectives
- Active, multidisciplinary partnership with referral source
- In addition to treating addiction and mental health, must attend to criminogenic factors

How is Correctional Treatment different from other behavioral healthcare?

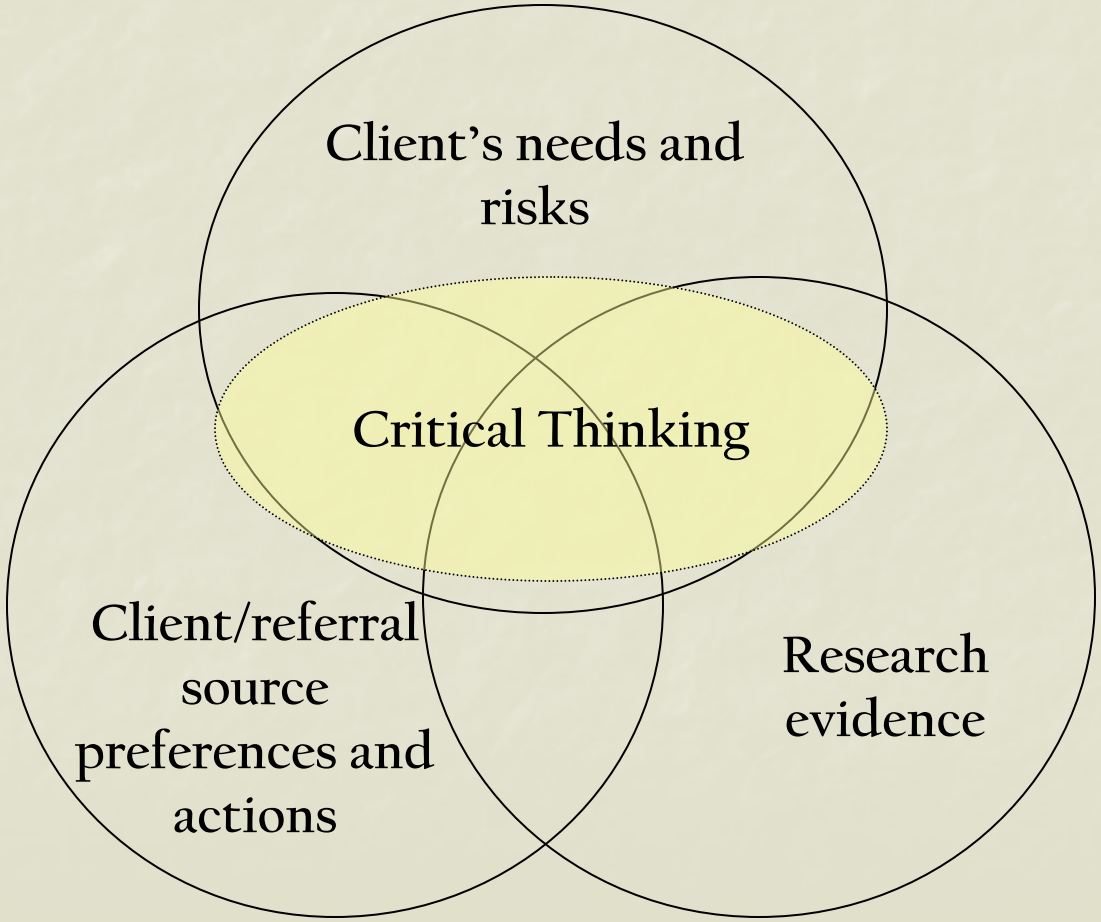
- Integrates accountability interventions into the treatment planning process
- "The client" is defined differently
- It is coerced
- Its success is measured by different outcomes

A model for evidence-based decisions in behavioral healthcare

(Gambrill, 2006)



A model for evidence-based decisions in correctional treatment
(adapted from Gambrill, 2006)



What is Critical Thinking?

"Critical thinking is a unique kind of purposeful thinking in which we use standards such as clarity and fairness. It involves the careful examination and evaluation of beliefs and actions in order to arrive at well-reasoned decisions"

(Gambrill, 2006).

A critical thinker is able to

- Articulate problems and questions about the problems in a manner that is thoughtful, clear, and precise;
  - Gather pertinent data, using theoretical concepts to interpret them;
  - Examine all possible conclusions in an open-minded manner;
  - After considering the *ethical implications* arrive at a logical conclusion about the best course of action

(Center for Critical Thinking, 2007).

Ethical Implications of EBP in Correctional Treatment

- The duty to help clients and avoid harmful interventions
- The duty to promote autonomy and quality of life
- Respect and integrity
- Practitioner competence

Hallmarks of evidence-based practice

- The use of standardized treatment manuals, grounded in tested theoretical concepts;
- Ongoing specialized training;
- Expert supervision for ongoing quality assurance;
- Instruments and tests that measure the fidelity of practice to the research-tested design.

Hallmarks of evidence-based practice (continued)

Providers must

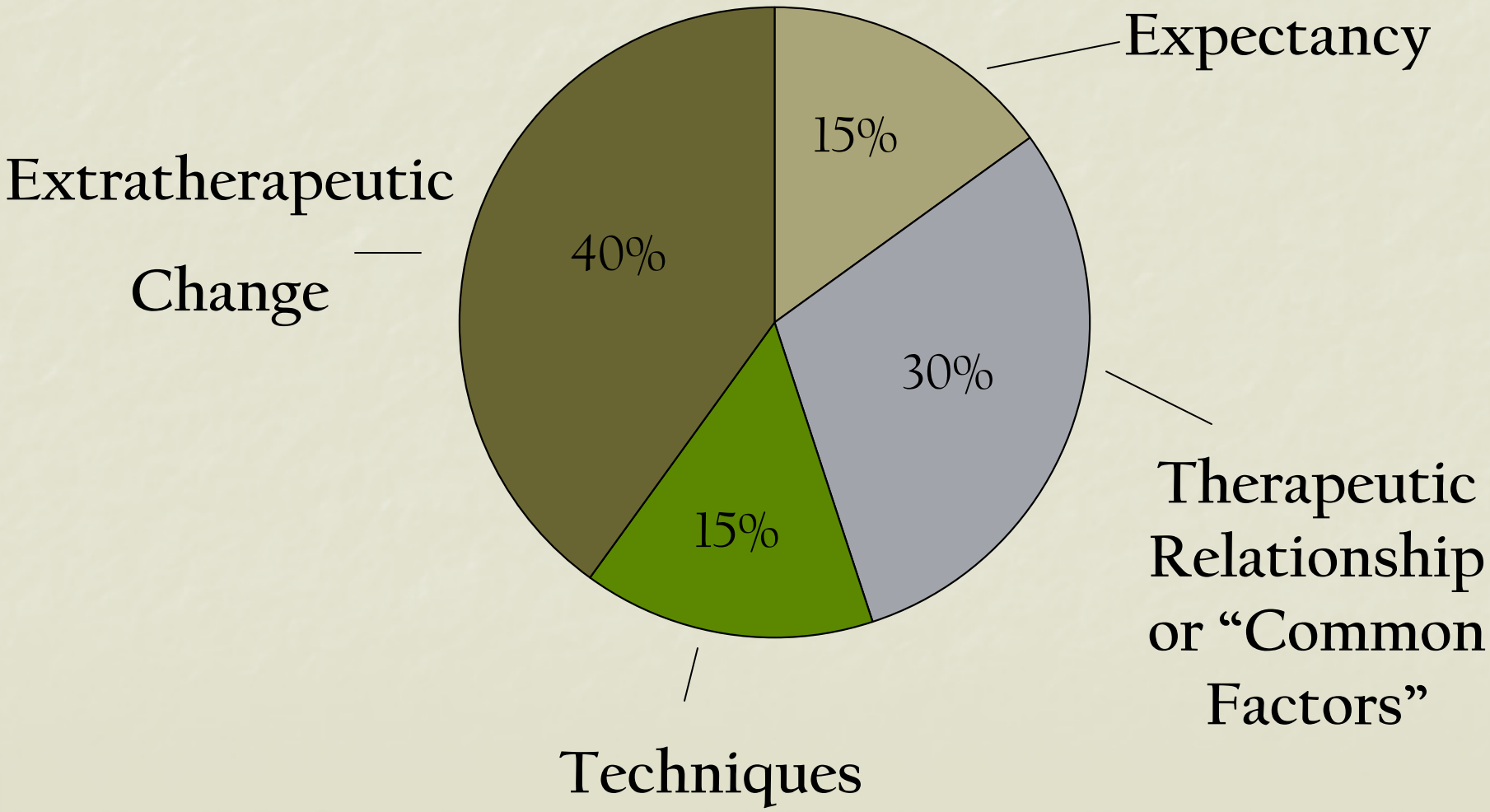
- Evaluate and integrate research findings in collaboration with "the client" around treatment decisions
  - Become "lifelong learners"
  - Use critical thinking skills
- Implement any intervention with fidelity

Some overarching frameworks for EBP

- The strengths perspective
  - Diagnostic labels have limited usefulness
- Change is a developmental phenomenon
  - Change comes in recognizable stages and interventions should be tailored to the stage of change.
- Harm reduction
- Cultural competency
- Common therapeutic factors

Common Therapeutic Factors

(Hubble, Duncan, & Miller, 1999)



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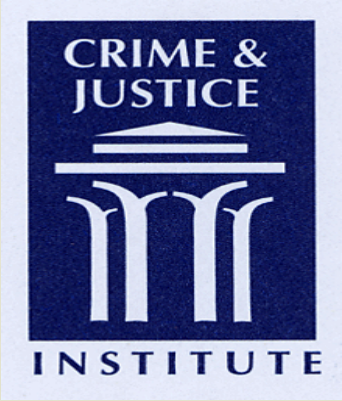

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