

# Therapeutic Communities: Reviewing the Theory Behind the TC Model

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Bureau of Justice Assistance (BJA)







Residential Substance Abuse Treatment (RSAT)  
Program for State Prisoners

Training and Technical Assistance Resource

*This project was supported by grant No.15PBJA-22-GK-01132-RSAT awarded by the Bureau of Justice Assistance. The Bureau of Justice Assistance is a component of the Office of Justice Programs, which also includes the Bureau of Justice Statistics, the National Institute of Justice, the Office of Juvenile Justice and Delinquency Prevention, the SMART Office, and the Office for Victims of Crime. Point of view or opinions in this document are those of the author and do not represent the official position or policies of the United States Department of Justice.*



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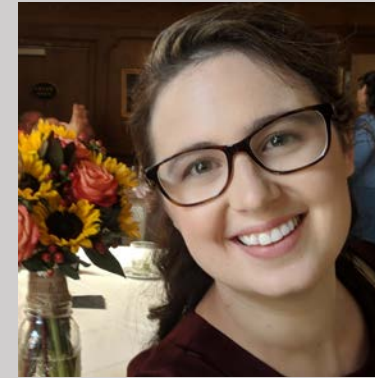


# Today's Presenters

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**Geoff Henderson**  
*Program Director*  
Advocates for Human  
Potential, Inc.



**Samatha Kossow, MPP**  
*Research Associate*  
Advocates for Human  
Potential, Inc.

# Learning Objectives

Upon completion of this presentation, participants will be able to:

1. Define what a therapeutic community is and at least two defining features.
2. List the four perspectives of the therapeutic community (TC).
3. Practice “acting as if” in regular interactions with community members.

# Poll Question

**What is your level of experience with Therapeutic Communities (TCs)?**

- a) Significant first-hand experience
- b) Some first-hand experience
- c) I've heard or learned about TCs, but no personal experience
- d) This is my first exposure to learning about TCs



# Today's Webinar:

- The Therapeutic Community
- Theoretical Underpinnings of the Therapeutic Community
- Acting As If
- Four Perspectives of the Therapeutic Community
- Rational Authority and the Role of Staff

# TCs and the Requirements for Residential Substance Abuse Treatment for State Prisoners (RSAT)

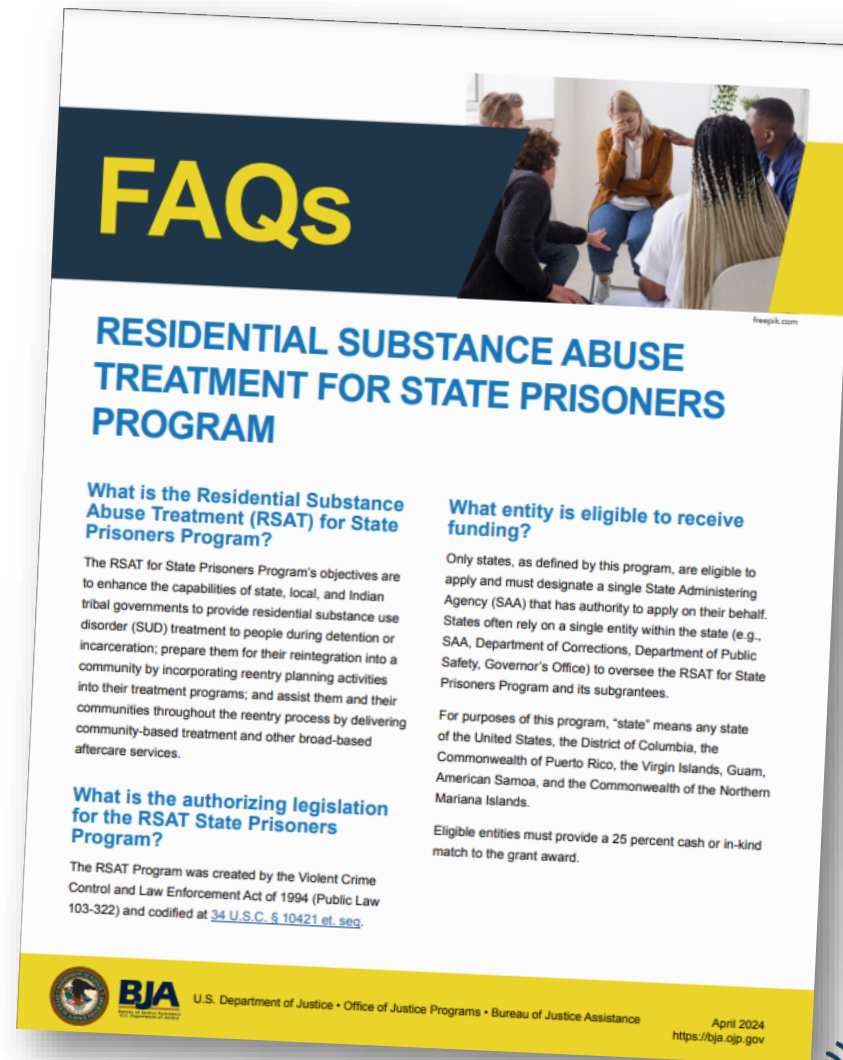
## From BJA's RSAT FAQs:

### What is a TC?

“Residential treatment facilities that are set apart from the general correctional population in either a separate facility or a dedicated housing unit that is used exclusively for RSAT and/or other Substance use disorder (SUD) treatment programs.

Within these units, residential SUD treatment programs may utilize the variety of evidence-based SUD treatment modalities as specified in the Promising Practice Guidelines for RSAT at: [https://www.rsat-tta.com/Files/Manuals-Curricula/RSAT-PPG\\_February2023](https://www.rsat-tta.com/Files/Manuals-Curricula/RSAT-PPG_February2023)”

<https://bja.ojp.gov/doc/rsat-faq.pdf>





# What is a TC?

- From the Promising Practice Guidelines:
  - A therapeutic community (TC) is a participative, group-based approach to long-term mental illness, personality disorders, and substance use disorders. The approach is historically long-term and residential, but increasingly TCs offer short-term residential or outpatient treatment.

# What is a TC?

- From the National Institute on Drug Abuse (NIDA):
  - Incarceration-based TCs are **separate residential drug treatment programs in prisons or jails** for treating SUD.
  - The defining feature of TCs is the emphasis on participation by all members of the program in the overall **goal of reducing substance use and recidivism**.
  - TCs differ from other models of treatment by their focus on recovery, overall lifestyle changes, and **the use of the “community”** as the key instrument for that change.
- Rated “Promising” in reducing recidivism rates after release by [National Institute of Justice Crime Solutions](#).

# Theoretical Underpinnings of the TC Model

## Social Cognitive Learning

Bandura, 1986

- People learn by observing others' behaviors and consequences
- People don't simply imitate others; cognition, environment, and behavior all mutually influence each other.

## Choice Theory

Glasser, 1965

- All behavior is purposeful – it is the person's best attempt at the time, given the information at their disposal, to get what they want to most effectively meet one or more five basic needs.
- Survival, Love and Belonging, Power (self-efficacy), Freedom (autonomy), and Fun/Learning

## Acting As If

***Acting as if*** means participants and staff members must **behave as the person they aspire to be**, rather than the person they have been.

All community members are expected to **behave in ways that demonstrate the values of the community.**



# Acting As If



When a person acts in a certain way long enough, the **thoughts** and **feelings** that support the **behaviors** will strengthen.



**Feelings, beliefs,** and a change in self-perception can follow **behavior** change rather than precede it.

# Theory in Action: Practicing Acting As If

## Staff members can encourage participants to practice acting as if by:

Expect participants to behave in prosocial ways.

Instruct participants to use groups to discuss any ambivalence when acting in ways that feel new and uncomfortable.

When asking a participant to perform a job they may not like:

- Ask the person, “What would it be like if you did like the job? How would you do that task if you enjoyed it?”
- Use their responses as a guide, ask them to perform the job as they described when imagining they enjoyed it.

# Four Perspectives of the Therapeutic Community

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View of the Disorder  
View of the Participant  
View of Recovery  
View of “Right Living”



# Perspectives of the TC

View of the Disorder

View of the Participant

View of Recovery

View of “Right Living”

## View of the Disorder

- SUD and mental health disorders (MHD) are symptoms of a complex disorder involving the whole person.
- Though genetic, environmental, and pharmacologic contributions to SUD and MHD are recognized, there is more emphasis on accountability and responsibility in the recovery and transformation process.
- SUD and MHD are disorders of the whole person involving some or all the areas of:
  - Cognitive functioning
  - Behavioral functioning
  - Emotional functioning
  - Medical functioning
  - Spiritual functioning



# Perspectives of the TC

View of the Disorder

View of the Participant

View of Recovery

View of “Right Living”

## View of the Participant

- People are seen as having psychological and social needs rather than patterns of substance use. A change in lifestyle, in addition to core beliefs about oneself, must change for recovery and transformation to occur.
- New participants will usually have:
  - An unrealistic sense of self
  - Poor decision-making skills
  - Difficulty in identifying, managing, and discussing feelings
  - A tendency to behave irresponsibly or immaturely
  - Low tolerance for discomfort and delayed gratification
  - Problems with authority

# Perspectives of the TC

View of the Disorder

View of the Participant

View of Recovery

View of “Right Living”

## View of Recovery

- Recovery is not simply about abstinence. It is about the gradual transformation of thinking patterns, feelings, values, behaviors, and self-identity.
- Recovery is a developmental learning.
- Helping oneself and helping others are essential components of recovery.
- Medications for mental health and substance use disorders are considered a component of recovery.

# Perspectives of the TC

View of the Disorder

View of the Participant

View of Recovery

View of “Right Living”

## View of “Right Living”

- Certain beliefs and values are essential to recovery and transformation, learning from others and the community, personal growth, and healthy living.
  - Truth and honesty
  - Take personal responsibility for one’s present and future actions
  - Take social responsibility for others within the community
  - Understand that people are “good” but behaviors can be harmful or “bad”
  - Learning to learn
  - Self-reliance balanced with community inter-dependence

## Role of Staff



# Group Exercise

Think of a person in your life who you consider to be a role model or mentor.

In the chat, write down one or two words that describe this person

# Rational Authority



- **All staff behave as rational authorities:** consistent, trustworthy, compassionate, and transparent.
- This can counteract participants' negative experiences with authority.
- Participants can begin to address their fears, distrust, disappointment, and anger toward all authority figures when they begin to accept teaching, guidance and build genuine relationships with staff.
- Participants learn from staff how to become rational authorities in their own lives – at work, in the community, and with families and loved ones upon release.

# Role of TC Staff



- Promote **community as method**.
- Encourage self-help by not doing the work for participants even when staff members have a need to “help”.
- Be a role model since participants observe staff members’ work habits, and how they relate to other staff, manage their emotions, address work-related conflicts.
- Educate and explain what is expected of participants.

# QUESTIONS

- ▶ Type your questions in the Q&A box on your screen.



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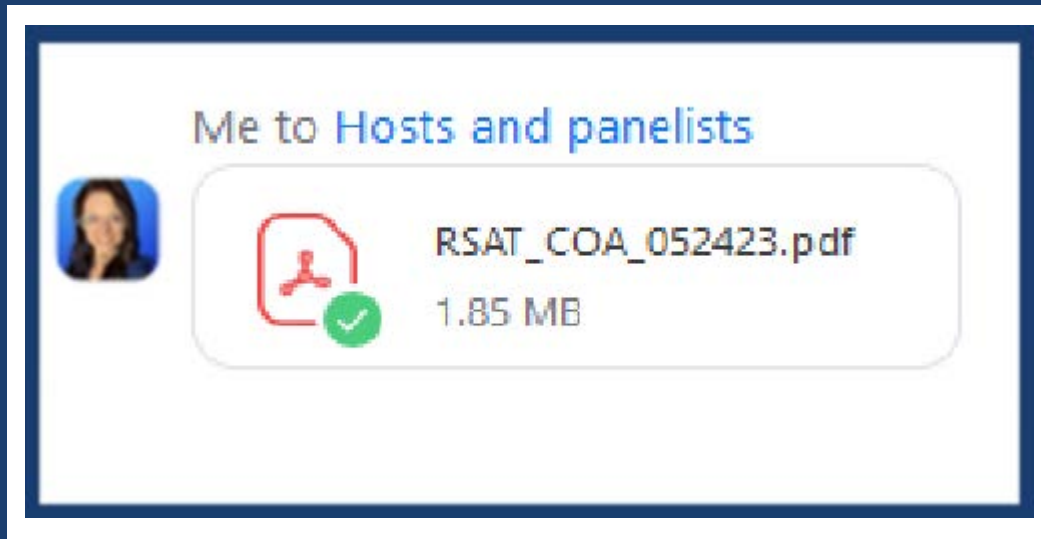
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- All photos used with permission from: [RSAT Virtual Tour - Barnstable House of Correction - MA 2014 \(youtube.com\)](https://www.youtube.com/watch?v=...)

You can download the certificate of attendance from the chat.





# CERTIFICATE OF CONTINUING EDUCATION



1 Continuing Education Hour (CEH) approved by NAADAC, the Association of Addiction Professionals



Pass 10-question quiz with 7 correct answers



Download certificate upon completion of the quiz

**July 10, 2024** RSAT webinar CEH quiz link:

<https://survey.alchemer.com/s3/7919069/July-10-2024-RSAT-Webinar-CEH>

# CONTACT



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