Acubrace is a method of acupuncture that targets specific points on the ear involving drowsy and craving pathways.

Art Therapy allows a patient to express herself/himself through a non-verbal, imaginative, and creative exercise. The American Art Therapy Association (AATA) specifically acknowledges the role that art therapy can play in managing addictions (American Art Therapy Association, 2014).

Assessments & Screenings are evaluations used to understand if individuals exhibit features of drug misuse or abuse. Where symptoms are evident, results allow practitioners to prescribe a course of treatment that best suits their needs. Examples may include Addiction Severity Index, University of Rhode Island Change Assessment Scale (URICA), Stages of Change Readiness and Treatment Eagerness Scale (SOCRATES), CAGE-AID, AC-OK Screen for Co-Disorders, World Mental Health, COMPASS EZ.

Community Reinforcement Approach (CRA) is a comprehensive cognitive-behavioral intervention for the treatment of substance abuse problems. CRA seeks to treat substance abuse problems through focusing on environmental contingencies that impact and influence the client’s behavior. Developed in accordance with the belief that these environmental contingencies play a crucial role in an individual’s addictive behavior and recovery, CRA allows familial, social, recreational, and occupational events to support the individual in changing his or her drinking/using behaviors and in creating a successful sobriety.

Dialectical Behavior Therapy (DBT) is a cognitive-behavioral treatment approach with two key characteristics: a behavioral, problem-solving focus blended with acceptance-based strategies, and an emphasis on dialectical processes. “Dialectics” refers to the issues involved in treating patients with multiple disorders and to the type of thought processes and behavioral styles used in the treatment strategies.

Equine-Assisted Therapy (EAT) encompasses a range of treatments that involve activities with horses and other equines to promote human physical and mental health.

Eye Movement Desensitization and Reprocessing (EMDR) is an 8-phase psychotherapy treatment that was originally designed to alleviate the symptoms of trauma. During the EMDR trauma processing phases, guided by standardized procedures, the client attends to emotionally disturbing material in brief sequential doses that include the client’s beliefs, emotions, and body sensations associated with the traumatic event while simultaneously focusing on an external stimulus. Therapists directed bilateral eye movements are the most commonly used external stimulus, but a variety of other stimuli including hand-tapping and audio bilateral stimulation are often used.


displayed as a table

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Description</th>
<th>Rating</th>
<th>Source of Evidence</th>
<th>Justification</th>
<th>Treatment</th>
<th>Average Duration of Program</th>
<th>Program Frequency/Intensity</th>
<th>Delivery Setting</th>
<th>Target Population</th>
<th>Other Sources of Research</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Woman’s Path to Recovery</td>
<td>A woman’s Path to Recovery is a treatment program for women with substance abuse. It can also be used to address behavioral addictions, such as shopping and eating addictions.</td>
<td>Promising</td>
<td>NREPP</td>
<td>Decreased</td>
<td>+</td>
<td>12 sessions over 8-12 weeks</td>
<td>90 minutes per week</td>
<td>Outpatient</td>
<td>Adults, 18 years of age and older with a substance use disorder, cooccurring disorder, and/or co-occurring disorder.</td>
<td>N/A</td>
</tr>
<tr>
<td>Acubrace</td>
<td>Acubrace is a method of acupuncture that targets specific points on the ear involving drowsy and craving pathways.</td>
<td>Theory Based</td>
<td>N/A</td>
<td>+</td>
<td>+</td>
<td>Individualized</td>
<td>Client determines frequency/judication</td>
<td>Inpatient/Domestic Residential Facility</td>
<td>Adults, 18 years of age and older with a substance use disorder.</td>
<td>N/A</td>
</tr>
<tr>
<td>Art Therapy</td>
<td>Art Therapy allows a patient to express herself/himself through a non-verbal, imaginative, and creative exercise. The American Art Therapy Association (AATA) specifically acknowledges the role that art therapy can play in managing addictions (American Art Therapy Association, 2014).</td>
<td>Theory Based</td>
<td>N/A</td>
<td>+</td>
<td>+</td>
<td>Individualized</td>
<td>Client determines frequency/judication</td>
<td>Inpatient/Domestic Residential Facility</td>
<td>Individuals who have a history of trauma and/or substance abuse disorder</td>
<td>N/A</td>
</tr>
<tr>
<td>Assessments &amp; Screenings for substance use disorders</td>
<td>Assessments &amp; Screenings are evaluations used to understand if individuals exhibit features of drug misuse or abuse. Where symptoms are evident, results allow practitioners to prescribe a course of treatment that best suits their needs. Examples may include Addiction Severity Index, University of Rhode Island Change Assessment Scale (URICA), Stages of Change Readiness and Treatment Eagerness Scale (SOCRATES), CAGE-AID, AC-OK Screen for Co-Disorders, World Mental Health, COMPASS EZ.</td>
<td>N/A</td>
<td>N/A</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>Unique to assessment and/or screening tool</td>
<td>Inpatient/Domestic Residential Facility</td>
<td>Adults, 18 years of age and older who have a history of trauma and substance abuse disorder.</td>
<td>N/A</td>
</tr>
<tr>
<td>Community Reinforcement Approach (CRA)</td>
<td>Community Reinforcement Approach (CRA) is a comprehensive cognitive-behavioral intervention for the treatment of substance abuse problems. CRA seeks to treat substance abuse problems through focusing on environmental contingencies that impact and influence the client’s behavior. Developed in accordance with the belief that these environmental contingencies play a crucial role in an individual’s addictive behavior and recovery, CRA allows familial, social, recreational, and occupational events to support the individual in changing his or her drinking/using behaviors and in creating a successful sobriety.</td>
<td>Promising</td>
<td>N/A</td>
<td>+</td>
<td>+</td>
<td>12-16 weeks</td>
<td>Twice per week</td>
<td>Hospital Inpatient/Domestic Residential Facility</td>
<td>Adults, 18 years of age and older who have a primary diagnosis of any Substance-Related Disorder (DSM-IV-R) individual with cooccurring disorders also respond well to this approach</td>
<td>N/A</td>
</tr>
<tr>
<td>Dialectical Behavior Therapy (DBT)</td>
<td>Dialectical Behavior Therapy (DBT) is a cognitive-behavioral treatment approach with two key characteristics: a behavioral, problem-solving focus blended with acceptance-based strategies, and an emphasis on dialectical processes. “Dialectics” refers to the issues involved in treating patients with multiple disorders and to the type of thought processes and behavioral styles used in the treatment strategies.</td>
<td>Promising</td>
<td>N/A</td>
<td>Decreased</td>
<td>+</td>
<td>Increased</td>
<td>Individualized</td>
<td>Minimum of weekly</td>
<td>Inpatient/Domestic Other Community Setting</td>
<td>Adults, 18 years of age and older with substance use disorders, individuals with eating disorders, individuals with comorbid illicit and substance use disorders, individuals with schizophrenia, women experiencing domestic violence, violent intimate partners, inpatient and partial hospitalization, forensic settings</td>
</tr>
<tr>
<td>Equine-Assisted Therapy</td>
<td>Equine-Assisted Therapy (EAT) encompasses a range of treatments that involve activities with horses and other equines to promote human physical and mental health.</td>
<td>Theory Based</td>
<td>N/A</td>
<td>+</td>
<td>+</td>
<td>Individualized, 1-5 sessions</td>
<td>Short-term, 1-5 sessions</td>
<td>Inpatient/Domestic Residential Facility</td>
<td>Adults, 18 years of age and older who have a history of trauma and substance abuse disorder.</td>
<td>N/A</td>
</tr>
<tr>
<td>Eye Movement Desensitization and Reprocessing (EMDR)</td>
<td>Eye Movement Desensitization and Reprocessing (EMDR) Therapy is an 8-phase psychotherapy treatment that was originally designed to alleviate the symptoms of trauma. During the EMDR trauma processing phases, guided by standardized procedures, the client attends to emotionally disturbing material in brief sequential doses that include the client’s beliefs, emotions, and body sensations associated with the traumatic event while simultaneously focusing on an external stimulus. Therapists directed bilateral eye movements are the most commonly used external stimulus, but a variety of other stimuli including hand-tapping and audio bilateral stimulation are often used.</td>
<td>Promising</td>
<td>N/A</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>Major gains are apparent within a few weeks ranging from 3-12 sessions</td>
<td>Weekly one 50- or 90-minute session per week</td>
<td>Hospital Inpatient/Domestic Residential Facility School</td>
<td>Adults, 18 years of age and older who have experienced trauma, particularly those who have post-traumatic stress disorder (PTSD), posttraumatic stress, phobias, and other mental/health disorders</td>
</tr>
</tbody>
</table>

This inventory provides information about services and programs offered by the Department of Mental Health & Substance Abuse Services for individuals with substance use disorders. Rigorous research informs the spectrum of ratings from the lowest level, proven harmful, to the highest level, proven effective. Key outcomes including Justice Involvement, Substance Abuse, Housing & Employment, and Treatment Retention are only a few of the many outcomes that are measured by this research and the cells underneath indicate the impact the program has on the stated outcome (either increase or decrease). An "X" indicates that the research has not measured that stated outcome. More information is available at the bottom of the inventory.
### Program Inventory: Department of Mental Health & Substance Abuse Services

This inventory provides information about services and programs offered by the Department of Mental Health & Substance Abuse Services for individuals with substance use disorders. Rigorous research informs the spectrum of ratings from the lowest level, proven harmful, to the highest level, proven effective. Key outcomes include Justice Involvement, Substance Abuse, Housing, Employment, and Treatment Retention. These outcomes are validated by the research and the cells underneath indicate the impact the program has on the stated outcome (either increase or decrease). An "M" indicates that the research has not measured that stated outcome. More information is available at the bottom of the inventory.

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Description</th>
<th>Rating</th>
<th>Source of Evidence</th>
<th>Justice Involvement</th>
<th>Substance Abuse</th>
<th>Housing &amp; Employment</th>
<th>Treatment Retention</th>
<th>Program Frequency/Intensity</th>
<th>Delivery Setting</th>
<th>Target Population</th>
<th>Other Sources of Research</th>
</tr>
</thead>
<tbody>
<tr>
<td>Helping Men Recover: A Program for Treating Addiction (MD)</td>
<td>Helping Men Recover is a gender-responsive, trauma-informed treatment program for men. The program model is organized into four modules that emphasize the core areas of men's recovery: Self, Relationships, Sexuality, and Faithfulness.</td>
<td>Theory-Based</td>
<td>NREPP</td>
<td>*</td>
<td>Decreased</td>
<td>*</td>
<td>18 sessions over 2-5 months</td>
<td>17x81</td>
<td>1-2 hour sessions per week</td>
<td>Outpatient, Residential Facility</td>
<td>Corrections Court</td>
</tr>
<tr>
<td>Living in Balance</td>
<td>Living in Balance teaches participants how to move from a life of addiction to a life of recovery. It is a manual-based, comprehensive addiction treatment program that emphasizes relapse prevention.</td>
<td>Proven Effective</td>
<td>Pilot Inventory of Programs for Substance Abuse Services</td>
<td>*</td>
<td>Decreased</td>
<td>*</td>
<td>Increased</td>
<td>12 weeks</td>
<td>1-2 hour sessions per week</td>
<td>Outpatient, Correctional</td>
<td>Adults, 18 years of age and older who have a history of trauma and/or substance abuse disorders</td>
</tr>
<tr>
<td>Living in Balance Co-occurring Disorders</td>
<td>Living in Balance sessions focus on treating other co-occurring disorders, including treatment, phases of dual recovery, self-help groups, medication use, relapse prevention, and more. Co-occurring Disorders sessions can be used as a supplement to Core Program by allowing a counselor to integrate a client's mental health disorder treatment into his or her addiction treatment program.</td>
<td>Proven Effective</td>
<td>NREPP</td>
<td>*</td>
<td>Decreased</td>
<td>*</td>
<td>Increased</td>
<td>16 client sessions, approximately 8 weeks</td>
<td>Recovery curriculum covering 3 sessions per week</td>
<td>Outpatient, Correctional</td>
<td>Adults, 18 years of age and older with substance use disorder and a mental health disorder</td>
</tr>
<tr>
<td>Matrix Model Intensive Outpatient Program for Adults</td>
<td>The Matrix Model is an intensive, outpatient treatment approach for individuals with substance use disorders. The intervention integrates aspects of several treatment approaches, including cognitive-behavioral therapy, contingency management, motivational interviewing, 12-step facilitation, family involvement, and supportive, person-centered therapy.</td>
<td>Promising</td>
<td>CEBC</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>16 weeks</td>
<td>1 hour per day, 3 days per week</td>
<td>Intensive Outpatient Program (IOP) requires a minimum of 9 hours per day/3 days per week</td>
<td>Outpatient, Residential Facility</td>
</tr>
<tr>
<td>Medication-Assisted Treatment (Buprenorphine)</td>
<td>Medication-Assisted Treatment (MAT) uses FDA-approved medications, in combination with counseling and behavioral therapies, to provide a &quot;whole-patient&quot; approach to the treatment of substance use disorders. Buprenorphine/naltrexone is an opiate substitution treatment for opioid dependence. It is a daily medication given orally in addition to counseling therapies. Buprenorphine/naltrexone is a partial agonist that suppresses withdrawal symptoms and blocks the effects of opioids. Buprenorphine can be prescribed in office-based settings by physicians that have completed a special training.</td>
<td>Promising</td>
<td>NREPP</td>
<td>*</td>
<td>Decreased</td>
<td>*</td>
<td>Increased</td>
<td>Individualized</td>
<td>Daily</td>
<td>Outpatient, Other Community Setting</td>
<td>Adults, 18 years of age and older with a substance use disorder</td>
</tr>
<tr>
<td>Medication-Assisted Treatment (Opioid Replacement Therapy) (Community)</td>
<td>Medication-Assisted Treatment (Opioid Replacement Therapy) uses FDA-approved medications, in combination with counseling and behavioral therapies, to provide a &quot;whole-patient&quot; approach to the treatment of substance use disorders. Long-acting injectable naltrexone is used as an opioid or opiate antagonist to treat alcohol or opiate dependence. Naltrexone is an antagonist that blocks the euphoric effects of alcohol or opioids, and patients do not develop tolerance or experience withdrawal symptoms when they stop taking the drug. It is intended to reduce cravings and prevent relapse. Patients receive counseling therapies such as cognitive behavioral treatment or motivational enhancement therapy.</td>
<td>Promising</td>
<td>WSIPP</td>
<td>*</td>
<td>Decreased</td>
<td>*</td>
<td>+</td>
<td>6 months</td>
<td>Monthly Injection</td>
<td>Other Community Setting</td>
<td>Adults, 18 years of age and older with an opioid use disorder and/or an alcohol use disorder</td>
</tr>
<tr>
<td>Medication-Assisted Treatment (Opioid Replacement Therapy) ( Correction)</td>
<td>Medication-Assisted Treatment (Opioid Replacement Therapy) uses FDA-approved medications, in combination with counseling and behavioral therapies, to provide a &quot;whole-patient&quot; approach to the treatment of substance use disorders. Long-acting injectable naltrexone is used as an opioid or opiate antagonist to treat alcohol or opiate dependence. Naltrexone is an antagonist that blocks the euphoric effects of alcohol or opioids, and patients do not develop tolerance or experience withdrawal symptoms when they stop taking the drug. It is intended to reduce cravings and prevent relapse. Patients receive counseling therapies such as cognitive behavioral treatment or motivational enhancement therapy.</td>
<td>Promising</td>
<td>WSIPP</td>
<td>*</td>
<td>Decreased</td>
<td>*</td>
<td>+</td>
<td>12 months</td>
<td>Monthly Injection</td>
<td>Corrections</td>
<td>Adults, 18 years of age and older with an opioid use disorder and/or an alcohol use disorder</td>
</tr>
<tr>
<td>Moral Recovery Therapy</td>
<td>Moral Recovery Therapy is a 12-step program that utilizes a cognitive behavioral therapy that leads to enhanced moral reasoning and better decision-making.</td>
<td>Promising</td>
<td>WSIPP</td>
<td>*</td>
<td>Decreased</td>
<td>*</td>
<td>+</td>
<td>12 steps</td>
<td>1-2 times per week</td>
<td>Corrections</td>
<td>High risk offenders</td>
</tr>
</tbody>
</table>

### Key Outcomes

- **Justification for Evaluation:**

### References

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Description</th>
<th>Rating</th>
<th>Source of Evidence</th>
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<th>Substance Abuse</th>
<th>Housing &amp; Employment</th>
<th>Treatment Retention</th>
<th>Average Duration of Program</th>
<th>Program Frequency/Intensity</th>
<th>Delivery Setting</th>
<th>Target Population</th>
<th>Other Sources of Research</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Motivational Enhancement Therapy (MET)</strong></td>
<td>Motivational Enhancement Therapy (MET) is a counseling approach that helps individuals resolve their ambivalence about engaging in treatment and stopping their drug use.</td>
<td>Promising</td>
<td>CEBC</td>
<td>Decreased</td>
<td>Decreased</td>
<td>*</td>
<td>*</td>
<td>Individualized</td>
<td>Assessment, followed by 4 Individual treatment sessions</td>
<td>Inpatient Residential Facility Outpatient School</td>
<td>Individuals who are engaged in treatment for a substance use disorder</td>
<td>NREPP</td>
</tr>
<tr>
<td><strong>Motivational Interviewing</strong></td>
<td>Motivational Interviewing (MI) is a client-centered, directive method designed to enhance client motivation for behavior change. It focuses on exploring and resolving ambivalence by increasing intrinsic motivation to change. MI can be used by itself, as well as in combination with other treatments. It has been utilized in pre-treatment work to engage and motivate clients for other treatment modalities.</td>
<td>Promising</td>
<td>CEBC</td>
<td>*</td>
<td>Decreased</td>
<td>*</td>
<td>Increased</td>
<td>1-2 sessions</td>
<td>30-50 minutes each session; brief interventions have also been supported by research</td>
<td>Corrections Outpatient School/Other Community settings</td>
<td>Correlated Impaired Driving Offenders of All Ages</td>
<td>CEBC, NREPP</td>
</tr>
<tr>
<td><strong>Nurturing Parenting Program</strong></td>
<td>The Nurturing Parenting Programs is a family-centered trauma-informed initiative designed to build nurturing parenting skills as an alternative to abusive and neglectful parenting and child-rearing practices.</td>
<td>Promising</td>
<td>CEBC</td>
<td>Decreased</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>12-23 Sessions</td>
<td>1.5-3 hours per week</td>
<td>Home/Other Community Setting</td>
<td>Targets all families at risk for abuse and neglect, with children birth to 18 years.</td>
<td>CEBC, NREPP</td>
</tr>
<tr>
<td><strong>PRIME for Life</strong></td>
<td>PRIME for Life (PFL) is a motivational intervention used in group settings to prevent alcohol and drug problems or provide early intervention. PFL has been used primarily among court-referred impaired driving offenders. It also has been adapted for use with military personnel, college students, middle and high school students, and parents.</td>
<td>Promising</td>
<td>CEBC</td>
<td>Decreased</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>12 - 20 hours in duration</td>
<td>12 - 20 hours</td>
<td>Other Community Setting</td>
<td>Court referred impaired driving offenders</td>
<td>CEBC, NREPP, NREPP</td>
</tr>
<tr>
<td><strong>Prolonged Exposure Therapy for Posttraumatic Stress Disorders</strong></td>
<td>Prolonged Exposure Therapy is an intervention strategy commonly used in cognitive behavioral therapy to help individuals confront fears. Prolonged exposure is a specific type of cognitive behavioral therapy that teaches individuals to gradually approach trauma-related memories, feelings and situations.</td>
<td>Promising</td>
<td>CEBC</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>8 to 15 sessions over 3 months</td>
<td>One time per week</td>
<td>Outpatient Residential Facility Outpatient School</td>
<td>Individuals who have experienced trauma and have PTSD</td>
<td>CEBC, NREPP, NREPP</td>
</tr>
<tr>
<td><strong>Recovery Coaching</strong></td>
<td>The Recovery Coach (RC) program is an innovative, community-based case management intervention for people who have entered an addiction treatment program or need support to access treatment. The program is designed as an integrated component of a comprehensive addiction treatment continuum. The primary purpose of the recovery coach program is to help individuals gain access to needed resources, services, or supports that will help them achieve recovery from their substance use disorder (SUD).</td>
<td>Theory Based</td>
<td>CEBC</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>3 - 6 months on average</td>
<td>2 to 3 contacts a week and weekly thereafter</td>
<td>Other Community Setting</td>
<td>Adults, 18 years of age and older who have a primary substance use disorder (no co-occurring conditions are expected)</td>
<td>CEBC, NREPP</td>
</tr>
<tr>
<td><strong>Relapse Prevention Therapy</strong></td>
<td>Relapse Prevention Therapy (RPT) is a behavioral self-control program that teaches individuals with substance addiction how to anticipate and cope with the potential for relapse. RPT can be used as a stand-alone substance use treatment program or as an aftercare program to sustain gains achieved during initial substance use treatment.</td>
<td>Promising</td>
<td>CEBC</td>
<td>Decreased</td>
<td>*</td>
<td>Individualized as needed</td>
<td>Individualized as needed</td>
<td>2-4 Individual treatment sessions</td>
<td>1-2 sessions per week</td>
<td>Outpatient Residential Facility Outpatient School</td>
<td>Individuals who are engaged in treatment for a substance use disorder</td>
<td>CEBC, NREPP</td>
</tr>
<tr>
<td><strong>Seeking Safety</strong></td>
<td>Seeking Safety is a present-focused, counseling model coping skills therapy to help people attain safety from trauma and/or substance abuse.</td>
<td>Promising</td>
<td>CEBC</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>*</td>
<td>12-24 sessions</td>
<td>1.5-3 hours per week</td>
<td>Hospital Outpatient Residential Facility Outpatient School</td>
<td>Adults, 18 years of age and older who have a history of trauma and/or substance abuse disorder</td>
<td>CEBC, NREPP, NREPP</td>
</tr>
<tr>
<td>Program Name</td>
<td>Program Inventory</td>
<td>NREPP</td>
<td>Definition</td>
<td>Impact on Outcomes</td>
<td>Description</td>
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<tr>
<td>Proven Effective</td>
<td>A program or service that is proven effective has a high level of research on effectiveness for at least one outcome of interest, determined through multiple qualifying evaluations—high-quality experimental or quasi-experimental studies—outside of Tennessee or one or more qualifying Tennessee-based evaluations.</td>
<td>Increased</td>
<td>Research indicates that the impact of the stated program on this outcome is an increase.</td>
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<tr>
<td>Promising</td>
<td>A program or service that is promising has some research demonstrating effectiveness for at least one outcome of interest, such as a single qualifying evaluation that is not contradicted by other such studies but does not meet the full criteria for the proven effective designation.</td>
<td>Neutral</td>
<td>Research indicates that the impact of the stated program on this outcome is neither an increase nor a decrease.</td>
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<tr>
<td>Theory-Based</td>
<td>A program or service that is theory-based has no qualifying evaluations on effectiveness. These programs typically have a well-constructed theory of change and may have other evidence but do not meet the above criteria.</td>
<td>Neutral</td>
<td>Research indicates that the impact of the stated program on this outcome is neither an increase nor a decrease.</td>
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<tr>
<td>Mixed Effects</td>
<td>A program or service that has mixed effects has a high level of research on the effectiveness of multiple outcomes; however, the outcomes have contradictory effects, determined through multiple qualifying evaluations outside of Tennessee or one or more qualifying Tennessee-based evaluation.</td>
<td>Neutral</td>
<td>Research indicates that the impact of the stated program on this outcome is neither an increase nor a decrease.</td>
<td></td>
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<tr>
<td>No Effect</td>
<td>A program or service that has no evidence of effect has no impact on the measured outcome.</td>
<td>Neutral</td>
<td>Research indicates that the impact of the stated program on this outcome is neither an increase nor a decrease.</td>
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<tr>
<td>Harmful</td>
<td>A program or service that is proven harmful has a high level of research that shows participation negatively impacts outcomes of interest, determined through multiple qualifying evaluations outside of Tennessee or one or more qualifying Tennessee-based evaluation.</td>
<td>Neutral</td>
<td>Research indicates that the impact of the stated program on this outcome is neither an increase nor a decrease.</td>
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</tbody>
</table>

**Key Outcomes**

- **Increased**
- **Neutral**
- **Decreased**

**Delivery Setting**

- **Inpatient**
- **Outpatient**
- **Residential Facility**
- **Hospital**

**Target Population**

- **Adults**
- **Adults, 18 years of age and older who have a history of trauma and/or substance abuse disorder**
- **Adults, 18 years of age and older who have a substance use disorder**
- **Adults, 18 years of age and older who have a serious mental illness, mental health, criminal justice, or substance abuse disorder, or substance abuse disorder, who are incarcerated or at risk of incarceration; and who would benefit from referral and linkage to behavioral health, and other recovery and supportive services.**

**Other Sources of Research**

- **NREPP**
- **Other Community Setting**
- **Offenders**
- **In-patient**

**Source of Evidence**

- **Research**
- **Practice**
- **Policy**

**Program Name**

- **Solution-Focused Group Therapy**
- **Strengthening Families**
- **Strengthening-Based Case Management**
- **Thinking for a Change (TFC)**
- **Thought Field Therapy**
- **Twelve-Step Facilitation Therapy**
- **Wellness Recovery Action Plan (WRAP)**

**Description**

- **Solution-Focused Group Therapy (SFGT)** is a strengths-based group intervention for clients in treatment for mental or substance use disorders that focuses on building solutions to reach desired goals.
- **Strengthening Families** is a strengthening families program (SFP) an evidence-based parenting program designed to help parents and kids develop happier family relationships, improve mental health outcomes, and help decrease youth alcohol and drug use, violence, and delinquency behaviors.
- **Strengthening-Based Case Management** is the Strengths-Based Case Management model recognizes that the ultimate goal of a case manager goes beyond just accessing services. In a strengths-based clinical case management model, case managers focus on empowering clients and their families. Case management and clinical services focus on creating client opportunities for growth, education, and skill development.
- **Thinking for a Change (TFC)** is thinking for a change (TFC) is an integrated cognitive behavioral change program. TFC incorporates research from cognitive restructuring therapy, social skills development, and the learning and use of problem solving skills.
- **Thought Field Therapy** (TFT) is an energy-based form of psychotherapy designed to reduce symptoms of psychological distress by manipulating how energy flows in the body. TFT is based on the premise that bodies consist of energy fields and that imbalances in this system cause physical and emotional issues.
- **Twelve-Step Facilitation Therapy** is an active engagement strategy designed to increase the likelihood of a substance abuser becoming affiliated with and actively involved in Twelve-Step self-help groups.
- **Wellness Recovery Action Plan (WRAP)** is a personalized wellness and recovery program designed to help parents and kids develop happier family relationships, improve mental health outcomes, and help decrease youth alcohol and drug use, violence, and delinquency behaviors.

**Impact on Outcomes**

- **Increased**
- **Neutral**
- **Decreased**

**Average Duration of Program**

- **6-12 sessions**
- **12 to 15 sessions**
- **Decreased**

**Frequency/Intensity**

- **6-12 sessions**
- **30 minutes per week**
- **10-16 weeks**
- **2 hours per week**

**Delivery Setting**

- **Inpatient**
- **Outpatient**
- **Residential Facility**
- **Hospital**

**Target Population**

- **Adults, 18 years of age and older with a substance use disorder.**
- **Families, no specific risk criteria needed.**
- **Adults, 18 years of age and older with a serious mental illness, mental health, criminal justice, or substance abuse disorder, who are incarcerated or at risk of incarceration; and who would benefit from referral and linkage to behavioral health, and other recovery and supportive services.**

**Other Sources of Research**

- **NREPP**
- **Other Community Setting**
- **Offenders**
- **In-patient**

**Source of Evidence**

- **Research**
- **Practice**
- **Policy**

**Program Name**

- **Solution-Focused Group Therapy**
- **Strengthening Families**
- **Strengthening-Based Case Management**
- **Thinking for a Change (TFC)**
- **Thought Field Therapy**
- **Twelve-Step Facilitation Therapy**
- **Wellness Recovery Action Plan (WRAP)**