

**RESULTS FROM THE NATIONAL CRIMINAL JUSTICE TREATMENT PRACTICES
SURVEY AT THE RIVERBEND CORRECTIONAL FACILITY**

PREPARED BY:

Edward J. Latessa, Ph.D.
Professor and Director, Division of Criminal Justice

&

Ryan M. Labrecque, M.S.
Research Assistant, Corrections Institute

University of Cincinnati
Division of Criminal Justice
Center for Criminal Justice Research
PO Box 210389
Cincinnati, Ohio 45221-0389

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METHODS

This study uses the National Criminal Justice Treatment Practices Survey (NCJTPS) to examine the structure, resources and other organizational factors of the Riverbend Correctional Facility (RCF) that may affect its service delivery, including mission, leadership, climate, culture, and beliefs about rehabilitation versus punishment. It also assesses the coordination and integration between the RCF and other correctional and treatment systems. The methods used for data collection and analyses, as well as the study participants, are described below.

Participants

The survey respondents in this study were staff from the Riverbend Correctional Facility (RCF) in Georgia, which included a sample of teachers, instructors, treatment providers, case managers, and the Warden. There were 18 total participants. A description of this sample is presented in Table 1. Generally speaking, the staff in this study were predominately black (82.6%), female (66.6%), older than 40 (77.8%), and have an education beyond a Bachelor's degree (61.1%). While the majority of the respondents (72.3%) have worked in the field of corrections for more than two years, far less (17.7%) have worked at RCF for more than a year.

TABLE 1: DESCRIPTIVE STATISTICS FOR SAMPLE

Characteristic	<i>n</i>	%
Age group		
22-30	1	5.6
31-40	3	16.7
41-50	5	27.8
51-60	6	33.3
61+	3	16.7
Race		
White	3	17.6
Black	14	82.4

Gender		
Male	6	33.3
Female	12	66.6
Highest level of education		
Bachelor's degree	7	38.9
Some graduate school classes	2	11.1
Masters degree or more	9	50.0
Years worked in corrections		
1 or less	5	27.8
2-5	5	27.8
6-10	1	5.6
11 or more	7	38.9
Years worked for RCF		
1 or less	14	82.4
2-5	2	11.8
6-10	0	0.0
11 or more	1	5.9

The percentages may not add to 100.0% due to rounding.

NCJTP Survey

The National Criminal Justice Treatment Practices Survey (NCJTPS) covers several topics, including the opinions of administrators and staff regarding rehabilitation, punishment, and services provided to offenders; organizational capacity and needs; mission and goals of correctional and treatment programs; organizational climate and culture for providing services; and working relationships between correctional and other agencies. The specific surveys used here consisted of three different versions, each tailored for a different type of professional respondent group: *Administrators* ($n = 2$), *Program Directors* ($n = 2$), and *Program Staff* ($n = 14$). The three surveys contain many of the same questions. However, there are some notable differences. In particular, some questions are asked only of staff (e.g., job frustration) where others are asked only of administrators (e.g., organizational culture subscales of *cohesion-involvement*, *hierarchy-consistency*, *performance-achievement*, and *innovation-adaptability*). Also, although all of the surveys contained the subscales of leadership and organizational

climate, each differed in the number and type of questions comprising the scale. All surveys were self-administered by staff and returned to the University of Cincinnati for analysis.

All survey question responses consisted of 5-item Likert scale: 1 = *Strongly Disagree*, 2 = *Disagree*, 3 = *Neutral*, 4 = *Agree*, and 5 = *Strongly Agree*. Items were grouped into subscales defined in the NCJTPS Organizational Measures Manual (for more information see Taxman et al., 2007). Subscale scores were calculated as the sum of scores for all items in the scale divided by total the number of items in the scale. Items that were negatively worded were reverse coded before the subscales were computed.

Analysis

There are two sets of analyses used in this study. The first set is univariate and is fairly straightforward. A measure of central tendency (the mean or *M*) is used to describe the center point of each distribution and a measure of dispersion (the standard deviation or *SD*) is used to describe the spread or variability in the scores. The second set is correlational and is a little more complex. Cronbach's alpha is used to assess the internal consistency reliability of each subscale. The alpha value is based on the correlations of the different items within each subscale, with higher alpha scores indicating similar items are in fact related, or are internally consistent.

The assumptions of normality were checked for all scales and subscales by (a) examining the skewness statistics, and (b) comparing the values of the mean, median, and mode for each scale and subscale. Because the frequency distributions of the scores were found to be approximately normal it was treated as a metric (or interval) variable. Thus, means and standard deviations are used as the measures of central tendency and dispersion. This makes sense because although a 5-point Likert scale has only five response options, in theory, a person's rating could fall anywhere between 1 and 5 (e.g., halfway between 4 and 5).

While the possible values of Cronbach's alpha range from zero to one, a general rule of thumb for describing the level of support for internal consistency reliability is that values less than .70 are *questionable* at best, values from .70 to .79 are *acceptable*, .80 to .89 are *good*, and values .90 or greater are *excellent*. Alpha is also highly dependent upon the number of items in the summated scales, where alpha increases in value as more items are added to a particular scale. Therefore, each table also indicates the total number of items used in the composition of each scale.

RESULTS

Table 2 examines staff attitude toward various treatment philosophies. Survey respondents provided the strongest amount of support for the philosophy of *rehabilitation* ($M = 4.57$) and far less for those of *deterrence* ($M = 2.78$), *incapacitation* ($M = 2.39$), *just desserts* ($M = 2.03$), and more *traditional sanctions* ($M = 2.40$). The internal consistency reliability of the staff attitude subscales ranged from acceptable to excellent, which indicates there is general agreement within the various items that comprise the subscale scores.

TABLE 2: ATTITUDES TOWARD REHABILITATION AND PUNISHMENT

Subscale	<i>M</i>	<i>SD</i>	Cronbach's alpha (<i>n</i> of items)
Rehabilitation	4.57	.38	.75 (4)
Deterrence	2.78	1.21	.90 (3)
Incapacitation	2.39	1.20	.95 (3)
Just desserts	2.03	.88	.84 (2)
Traditional sanctions	2.40	1.04	.96 (8)
<i>Drug user</i>	2.54	1.10	.93 (4)
<i>Criminals</i>	2.35	1.08	.91 (4)

Table 3 evaluates the staff level of concern for some common organizational need areas. Here, lower mean values indicate problematic areas and higher values indicate non-problematic

areas. The two biggest concerns for survey respondents were *staffing* ($M = 2.39$) and *retention* ($M = 2.53$). The two areas of least concern were *computers and IT* ($M = 3.94$) and the *physical facility* ($M = 3.74$). All of the other needs areas fell within the neutral range ($M = 3.17$ to 3.33), indicating that staff neither views these areas as a problem or strength for the organization. The internal consistency of these subscales fell both above and below the acceptable criteria (range from .42 to .91). This indicates there is more internal agreement for the subscales of *retention* and *physical facilities* and less for *staffing* and *funding*.

TABLE 3: NEEDS ASSESSMENT

Subscale	<i>M</i>	<i>SD</i>	Cronbach's alpha (<i>n</i> of items)
Staffing	2.39	.95	.42 (2)
Retention	2.53	1.13	.91 (2)
Training	3.27	.81	.73 (5)
Funding	3.17	.72	.61 (3)
Physical facilities	3.74	.84	.84 (3)
Computers and IT	3.94	.91	.77 (3)
Community support	3.37	.92	.67 (3)
Integration	3.33	.94	.72 (3)

Table 4 examines staff attitudes and beliefs toward treatment practices in general, and assesses their feelings toward the current treatment climate within the organization. Staff had the greatest amount of support for *reentry services* ($M = 4.59$) followed by the use of technology (*information services*: $M = 4.19$). Staff also feel it is important for treatment providers to be knowledgeable (*treatment knowledge*: $M = 3.90$), that the organization take responsibility in motivating offenders (*readiness and motivation*: $M = 3.75$), and that the organization formulate comprehensive assessments of each offender's individual situation, needs and goals (*responsivity and assessment*: $M = 3.59$). The internal consistency of the *responsivity and assessment* subscale (.53) and the *readiness and motivation* subscale (.67) both fell below the acceptable

criteria for Cronbach's alpha. This suggests that while staff generally supports the treatment practices subscales, there is less agreement in the responses of these two scales.

TABLE 4: TREATMENT BELIEFS

Subscale	<i>M</i>	<i>SD</i>	Cronbach's alpha (<i>n</i> of items)
Treatment practices beliefs			
<i>Information systems</i>	4.19	.66	.85 (3)
<i>Responsivity and assessment</i>	3.59	.61	.53 (6)
<i>Readiness and motivation</i>	3.75	.86	.67 (3)
<i>Reentry</i>	4.59	.46	.76 (2)
<i>Treatment knowledge</i>	3.90	.51	.80 (14)
Climate for treatment			
<i>Quality of treatment</i>	3.36	1.11	.94 (6)
<i>Custody staff</i>	3.11	1.27	.97 (3)
<i>Empowerment</i>	3.31	1.17	.86 (3)

Staff is uniformly neutral on all three of the climate subscales. This indicates the respondents feel there are neither problems nor strengths within the organization in regards to the quality, support and means necessary to provide effective treatment. The internal consistency of these subscales all fall between the good and excellent range.

Table 5 explores the subscales that fall under the umbrella of organizational culture. *Organizational commitment* is defined here as the extent to which employees feel committed and attached to their employer. The level of staff commitment is moderate ($M = 3.85$) although the internal consistency is questionable which indicates that staff differs on their individual level of commitment to the organization.

TABLE 5: ORGANIZATIONAL CULTURE

Subscale	<i>M</i>	<i>SD</i>	Cronbach's alpha (<i>n</i> of items)
Organizational commitment	3.85	.69	.86 (9)

Organizational climate ^a			
<i>Future goals/vision</i>	3.18	1.08	.89 (2)
<i>Performance</i>	2.82	1.28	.97 (2)
<i>Training/Skills</i>	3.18	1.12	.96 (2)
<i>Openness/innovation</i>	2.82	.99	.66 (2)
<i>Risk taking</i> ^b	2.86	1.10	
Leadership ^a			
<i>Transformational</i>	3.65	1.16	.97 (6)
<i>Transactional</i>	3.50	1.05	.83 (4)
Job frustration ^a	3.21	1.12	.90 (3)
Cynicism toward change	2.73	1.32	.97 (5)
Perspective taking			
<i>Empathy</i>	4.03	.62	.59 (2)
<i>Positive attributions</i>	3.94	.58	.78 (7)
Inter-department coordination	3.29	.97	.93 (8)
Staff able to make suggestions	3.39	1.11	.95 (5)

^a Only staff surveys were used.

^b Only one item in the subscale so reliability measure was not calculated.

Organizational climate and *leadership* information was gathered in all surveys; however, it should be noted that the items comprising the two scales differed in the administrator survey (although the subscales maintained the same name). Table 5 indicates the data from the staff surveys only. Because there are only two administrators in this sample this data was left out of the table. All of the staff organizational climate subscales were neutral: staff shares in the understanding of the changes needed to help the facility maintain its long-term goals (*future goals/vision*: $M = 3.18$), managers periodically meet with staff to talk about what is working well and what is not to improve *performance* ($M = 2.82$), training opportunities and provided to staff and are valued by supervisors/managers (*training/skills*: $M = 3.18$), staff are comfortable promoting different ideas or suggestions and managers are open and willing to try new ideas or ways of doing things (*openness/innovation*: $M = 2.82$), and staff are comfortable discussing

mistakes, errors or problems with their supervisors and managers (*risk taking*: $M = 2.86$). Only one subscale had questionable internal consistency (*openness/innovation*), the other three had good to excellent scores. Because the *risk taking* subscale is comprised of only one item the reliability measure could not be calculated.

Transformational leadership is defined as the influence that is based on enhancing employee commitment to higher purposes and goals. Transformational leaders communicate inspiring visions, lead by example, encourage teamwork, demonstrate high levels of expectation, attend to individual needs and concerns, and challenge the status quo. *Transactional leadership* is defined as the influence that is based on exchanges between leaders and employees. Transactional leaders provide goals, direction, feedback, resources, and rewards in exchange for effort, commitment, and loyalty of employees within their organization. Staff perceive there to be both *transformational* ($M = 3.65$) and *transactional* ($M = 3.50$) leadership within the RCF organization. The high values of alpha (.97 and .83 respectively) indicate general agreement with the scales.

It should be noted that the mean values for all of the *organizational climate* and *leadership* subscales were slightly higher for administrators when compared to the staff. This should be understood with the caveat that only two administrators surveys were used, thus the differences may be due to the differences in sample size.

Job frustration is defined as the extent to which employees find their job frustrating, where a higher mean value indicates more frustration. Staff responded neutrally on this topic ($M = 3.21$) with excellent internal consistency (.90).

The *cynicism toward change* subscale measures the perception that change is more trouble than it is worth and efforts to make improvements usually fail, where a higher mean

value indicates more cynicism. Staff responded neutrally on this topic ($M = 2.73$) with excellent internal consistency (.97).

Perspective taking is defined as the extent to which correctional officers are able to view the workplace and procedures from the point of view of the treatment staff. The high mean value of the *empathy* subscale ($M = 4.03$) indicates that correctional officers feel concerned when the treatment staff are under pressure and understand the problems that treatment staff face in their jobs, and the high mean value of the *positive attributions* subscale ($M = 3.94$) indicates that corrections officers feel that treatment staff work hard, play an important role in the facility, and work well with the corrections staff.

Inter-department coordination is defined as the degree to which staff from different departments within a facility coordinates their work and activities in providing services to offenders. Staff was neutral ($M = 3.29$) with excellent reliability (.97) on the degree of inter-departmental coordination. Staff was also neutral ($M = 3.39$) on their perception of their ability to make suggestions within the organization with excellent reliability (.95).

Organizational culture subscales (*cohesion-involvement*, *hierarchy-consistency*, *performance-achievement*, and *innovation-adaptability*) were recorded for the Administrator survey only. The mean of all four subscales was 4.00 and the standard deviation was 0, indicating both administrators selected *Satisfactory* in all items for this scale.

SUMMARY AND CONCLUSIONS

As a comprehensive survey for correctional professionals, the NCJTSPS allows researchers, policy-makers, and practitioners to better understand the landscape of correctional and treatment related services available to offenders within a particular correctional setting. This study has provided a snapshot of the attitudes, feelings, and beliefs of RCF staff on several

correctional topics. The results of this study are grouped into three categories: those with strong support, those of no concern, and those with some concern. The results are summarized below.

The RCF staff strongly support the philosophy of rehabilitation and evidence-based treatment practices. Correctional and treatment staff appears to work well with each other, with both groups recognizing the importance of the others role within the institution. There were no major problems noted with the treatment or organizational climate at RCF and there appears to be no issues with inter-departmental coordination. Two areas of concern that were noted were with staffing and retention.

REFERENCES

Taxman, F. S., Young, D. W., Tesluk, P., Mitchell, S., Rhodes, A. G., DeCelles, K., & Perdoni, M. (2007). National Criminal Justice Treatment Practices Survey: Organizational Measures Manual. Unpublished Manual.