Interactive Journaling

Interactive Journaling is a goal-directed, client-centered model that aims to reduce substance abuse and substance-related behaviors, such as recidivism, by guiding adults and youth with substance use disorders through a process of written self-reflection. The model is based on structured and expressive writing techniques, principles of motivational interviewing, cognitive-behavioral interventions, and the integration of the transtheoretical model of behavior change. The approach helps participants modify their behavior as they progress through the stages of change that underlie the transtheoretical model: (1) precontemplation (not intending to begin the change in behavior in the next 6 months), (2) contemplation (intending to begin the change in behavior in the next 6 months), (3) preparation (intending to begin the change in behavior in the next 30 days), (4) action (practicing the behavior for less than 6 months), and (5) maintenance (practicing the behavior for at least 6 months).

The focus of the Interactive Journaling model is the participant journal, which includes worksheets with nonconfrontational questions intended to help participants think and then write about their substance use problem and its association with their current negative life situation, which may include incarceration or arrest for driving under the influence (DUI). Using the journal, participants explore and resolve a variety of topics, including ambivalence toward their substance use, recognition that they have a substance use problem, the connection between substance use and their current situation, health and other consequences of substance use, and irresponsible behavior while under the influence of alcohol and/or drugs. Questions also guide participants in considering their motivations for change, exploring behavior change options, and developing a plan with target behavior-related goals and a timeline for achieving these goals.

The journals used in Interactive Journaling vary in length on the basis of the target population, the setting, and the type of delivery. Interactive Journaling can be delivered as a self-guided program, or it can be facilitated through one-on-one sessions or in a group format; it can also be used as part of a primary substance abuse treatment or prevention program.

Two studies were reviewed for this summary. One study included a 24-page journal titled “Changing Course,” which was delivered as a self-guided program for reducing recidivism among male inmates who had substance use dependence, were incarcerated at a local jail, and had at least one other arrest in the previous 12 months. Another study included a 64-page journal, which was delivered as the basis of a 12-hour, facilitated course curriculum for reducing recidivism among first-time DUI offenders.

Descriptive Information

| Areas of Interest | Substance abuse prevention  
|                  | Substance abuse treatment  
|                  | Co-occurring disorders  

| Outcomes | Review Date: February 2013  
|         | 1: Recidivism  
| Outcome Categories | Crime/delinquency  
| Ages | 18-25 (Young adult)  
|      | 26-55 (Adult)  
|      | 55+ (Older adult)  
| Genders | Male  
|        | Female  
| Races/Ethnicities | American Indian or Alaska Native  
|                  | Black or African American  
|                  | White  
|                  | Race/ethnicity unspecified  
| Settings | Outpatient  
|          | Correctional  


Quality of Research
Review Date: February 2013

Documents Reviewed
The documents below were reviewed for Quality of Research. The research point of contact can provide information regarding the studies reviewed and the availability of additional materials, including those from more recent studies that may have been conducted.
### Study 1

### Study 2

### Supplementary Materials


### Outcomes

#### Outcome 1: Recidivism

| Description of Measures | In one study, recidivism was defined as the rearrest and booking of a study inmate at the Buncombe County Detention Facility (BCDF) in the 12 months after study entry. Data were obtained from the management information system (MIS) of the BCDF, which is the only jail facility available for the local city police department and the county sheriff's office. These data were used to calculate the percentage of study participants who were rearrested and booked at the BCDF. |
| Key Findings | In another study, recidivism was defined as a rearrest for a DUI offense in the study's 4-year follow-up period. Data were obtained from South Dakota DUI-related arrest records extracted from the Unified Judicial System database for the 2004-2007 timeframe. These data were used to calculate (1) the percentage of study participants who were rearrested for a DUI offense and (2) the rate of recidivism, monitored through the use of a survival function that compared the length of time between first and subsequent DUI arrests for participants. |

In a randomized clinical trial with male inmates incarcerated in a county jail facility, participants who were identified as being dependent on one or more substances (according to the Comprehensive Addictions and Psychological Evaluation Manual, which follows DSM-IV-TR diagnostic criteria) and whose current offense was related to substance involvement, with a minimum of one prior incarceration in the previous 12 months, were assigned to the intervention or comparison condition. Inmates in the intervention group received a 24-page interactive journal titled "Changing Course" from a research staff assistant, who provided a 10-minute introduction on the contents of the journal and the journaling process. Inmates in the comparison group received a government booklet on substance use disorders and criminal behavior, with information on substance use and related problems and a telephone number for a national hotline that they could call when released from jail if they were interested in treatment services. Rearrests for each study participant were tracked through the BCDF MIS for the 12-month period following study entry. In the 12 months after study entry, the percentage of participants rearrested and booked at the BCDF was lower for the intervention group than the comparison group (51% vs. 66%; p < .05).

In a retrospective, quasi-experimental study, first-time DUI offenders (18 years and older) in two study conditions were matched and compared. Participants in the intervention group received the South Dakota Public Safety DUI Interactive Journaling course curriculum from 2004 through 2007. The curriculum consisted of a 64-page journal and was delivered through six 2-hour or four 3-hour classroom-type group sessions by 13 State alcohol/drug treatment agencies using the same
structured facilitator guide. Participants received a journal at the first session, and during each session, they completed writing elements in the journal under the guidance of the course facilitator. Writing assignments were given between course sessions, and participants were encouraged to practice and discuss the curriculum content with a concerned friend, family member, and/or significant other outside of the sessions. Participants in the control group were first-time DUI offenders (with arrests in 2003) who had not received the Interactive Journaling course curriculum. Findings included the following, from 2004 through 2007:

- Among all participants, the percentage of those rearrested for DUI was lower for the intervention group than the control group (13.5% vs. 18.5%; p < .001), and the rate of recidivism was slower for the intervention group than the control group (p < .0001).
- Among male participants, the percentage of those rearrested for DUI was lower for the intervention group than the control group (15.1% vs. 20.3%; p < .001), and the rate of recidivism was slower for the intervention group than the control group (p < .0001).
- Among female participants, the percentage of those rearrested for DUI was lower for the intervention group than the control group (10.4% vs. 15.2%; p < .001), and the rate of recidivism was slower for the intervention group than the control group (p < .0001).
- Among 21- to 29-year-old participants, the percentage of those rearrested for DUI was lower for the intervention group than the control group (15.2% vs. 20.3%; p < .001), and the rate of recidivism was slower for the intervention group than the control group (p < .0001).
- Among 30- to 39-year-old participants, the percentage of those rearrested for DUI was lower for the intervention group than the control group (10.9% vs. 17.3%; p < .001), and the rate of recidivism was slower for the intervention group than the control group (p < .0001).
- Among 40- to 49-year-old participants, the percentage of those rearrested for DUI was lower for the intervention group than the control group (12.1% vs. 17.2%; p = .002), and the rate of recidivism was slower for the intervention group than the control group (p < .0001).
- Among 50- to 59-year-old participants, the percentage of those rearrested for DUI was lower for the intervention group than the control group (7.3% vs. 12.2%; p = .013), and the rate of recidivism was slower for the intervention group than the control group (p = .0023).
- Among 60- to 90-year-old participants, the percentage of those rearrested for DUI was lower for the intervention group than the control group (2.2% vs. 9.5%; p = .011); however, there was no significant difference between groups in regard to the rate of recidivism.

**Studies Measuring Outcome**

<table>
<thead>
<tr>
<th>Study</th>
<th>Age</th>
<th>Gender</th>
<th>Race/Ethnicity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Study 1</td>
<td>26-55 (Adult)</td>
<td>100% Male</td>
<td>73.2% White</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>23.5% Black or African American</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>3.3% Race/ethnicity unspecified</td>
</tr>
<tr>
<td>Study 2</td>
<td>18-25 (Young adult)</td>
<td>68.8% Male</td>
<td>85% White</td>
</tr>
<tr>
<td></td>
<td>26-55 (Adult)</td>
<td></td>
<td>8.3% American Indian or Alaska Native</td>
</tr>
<tr>
<td></td>
<td>55+ (Older adult)</td>
<td>27.4% Female</td>
<td>6.6% Race/ethnicity unspecified</td>
</tr>
</tbody>
</table>

**Study Populations**

The following populations were identified in the studies reviewed for Quality of Research.

**Quality of Research Ratings by Criteria (0.0-4.0 scale)**

External reviewers independently evaluate the Quality of Research for an intervention's reported results using six criteria:

1. Reliability of measures
2. Validity of measures
3. Intervention fidelity
4. Missing data and attrition
5. Potential confounding variables
6. Appropriateness of analysis

For more information about these criteria and the meaning of the ratings, see [Quality of Research](#).
### Study Strengths

Recidivism was calculated from arrest data entered into standardized databases regulated by the criminal justice system at a county level in one study and at a State level in another study, providing both a certain level of reliability (owing to the legal necessity of recording arrests accurately) and validity (owing to the total independence of the investigators). The accurate extraction of arrest data from databases by research assistants was independently verified, and there is construct validity for definitions of arrests on the basis of the criminal justice legal system. In a study with first-time DUI offenders, the investigators and alcohol/drug treatment agencies delivering the curriculum worked together to train instructors and document pre- and postintervention changes in knowledge and attitudes about substance use and driving with 1-year follow-up assessments. There were no missing arrest data for the immediate catchment area of either study owing to the record databases. One study used random assignment (i.e., a coin toss), which generally controlled for many potential confounding variables. One study used a sophisticated survival analysis to model the longitudinal recidivism data from participants in both study conditions.

### Study Weaknesses

Neither study provided formal reliability or validity estimates for the arrest data in the database nor for the subsequent extraction of the arrest data. There was no formal measurement of intervention fidelity in either study. In one study, there was no information as to what was said during the research assistant's 10-minute talk with participants regarding the journal, no effort was made to determine whether participants actually wrote in their journals, and no feedback was provided to participants by a staff person. In another study, there was no tracking of whether participants wrote in their journals, and there was no tracking of the feedback participants received about what they wrote. Because it is not known how much participants (particularly those with reading or writing deficits) wrote in their journals, it is difficult to know how tightly coupled the actual journaling is to the recidivism outcome in either study. Additional confounding variables specific to study design cannot be ruled out in one study, which was a quasi-experimental retrospective review of database records limited to one State.

### Readiness for Dissemination

**Review Date: February 2013**

#### Materials Reviewed

The materials below were reviewed for Readiness for Dissemination. The implementation point of contact can provide information regarding implementation of the intervention and the availability of additional, updated, or new materials.

Sample implementation and training materials:

- **Alaska Alcohol and Drug Information School:**

- **CHOICES About Alcohol:**

- **Crow Nation:**

- **Managing Co-Occurring Disorders: An Integrated Approach:**
• Motivational-Educational-Experiential (MEE) Interactive Journaling System:

• New Mexico DWI Education Program:

• Residential Drug Abuse Program:

• Responsible Decisions:

• Self-Management: A Guide to Your Feelings, Motivations, and Positive Mental Health: Addiction Treatment Edition:

• South Dakota Public Safety DUI Program:
  ◦ Cognitive Behavior Therapy [Informational handout]

• Substance Abuse: The Courage To Change:

• Virginia Alcohol Safety Action Program (VASAP):

Non-program-specific training resources from the Change Companies:


Other implementation and training documents:


Non-program-specific quality assurance materials from the Change Companies:

Readiness for Dissemination Ratings by Criteria (0.0-4.0 scale)

External reviewers independently evaluate the intervention’s Readiness for Dissemination using three criteria:

1. Availability of implementation materials
2. Availability of training and support resources
3. Availability of quality assurance procedures

For more information about these criteria and the meaning of the ratings, see Readiness for Dissemination.

<table>
<thead>
<tr>
<th>Implementation Materials</th>
<th>Training and Support Resources</th>
<th>Quality Assurance Procedures</th>
<th>Overall Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.0</td>
<td>4.0</td>
<td>4.0</td>
<td>4.0</td>
</tr>
</tbody>
</table>

Dissemination Strengths

Participant journals are attractive and contain engaging exercises. Facilitator guides contain reproductions of the corresponding participant journals, along with core content information and facilitation tips and techniques. Numerous Interactive Journaling programs are available, giving implementers a variety of choices for meeting the needs of their client populations. In addition, the developer can customize a program to meet the needs (e.g., culture, language) of a specific population or to comply with State-specific requirements and regulations. Many training options are available in a variety of formats, including on- and off-site trainings and coaching and consultation via phone calls and Webinars. The developer has a team of consultants who are available to provide assistance on program implementation, staff selection, training options, assessment and outcome measurement, fidelity, and organizational development. A tool is available in long or short form to support program fidelity, and participant pre- and posttests are available to measure outcomes. In addition, the developer offers the Outcome Assessment and Reporting System, which can be used to collect longitudinal data throughout an entire treatment episode. Participant, facilitator, and training evaluations are available to assess program delivery.

Dissemination Weaknesses

No weaknesses were identified by reviewers.

Costs

The cost information below was provided by the developer. Although this cost information may have been updated by the developer since the time of review, it may not reflect the current costs or availability of items (including newly developed or discontinued items). The implementation point of contact can provide current information and discuss implementation requirements.

<table>
<thead>
<tr>
<th>Item Description</th>
<th>Cost</th>
<th>Required by Developer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participant journals</td>
<td>$0.90-$9 per journal</td>
<td>Yes</td>
</tr>
<tr>
<td>Interactive Journaling facilitator guides</td>
<td>$15-$35 per guide</td>
<td>Yes</td>
</tr>
<tr>
<td>45-minute telephone orientation session for facilitators, clinicians,</td>
<td>Free</td>
<td>No</td>
</tr>
<tr>
<td>and supervisors</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1-day Orientation Training for facilitators, clinicians, and</td>
<td>• Off-site training in</td>
<td>No</td>
</tr>
<tr>
<td></td>
<td>Carson City, NV:</td>
<td></td>
</tr>
<tr>
<td>Training Type</td>
<td>Description</td>
<td>Includes/Excludes</td>
</tr>
<tr>
<td>----------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------</td>
</tr>
</tbody>
</table>
| 2- to 3-day Facilitation Implementation Training for facilitators, clinicians, and supervisors | - Off-site training in Carson City, NV: $1,000 per day for up to 15 participants  
                    - On-site training: $2,500 for day 1 and $2,000 for days 2 and 3, for up to 25 participants | Yes                                                                            |
| 2-day Advanced Facilitator Training for facilitators, clinicians, and supervisors                  | - Off-site training in Carson City, NV: $1,000 per day for up to 15 participants  
                    - On-site training: $4,500 for up to 25 participants                               | No                                                                             |
| Distance learning, e-learning, and Webinar modules for facilitators, clinicians, and supervisors (with continuing education credits ranging from 0.5 to 9.0 per module) | - For individual participants, $10-$25 per module  
                    - For agencies, $150-$1,000 per module for tailored Webinars                | No                                                                             |
| 3-day, on- or off-site Training for Trainers                                                              | - Off-site training in Carson City, NV: $1,000 per day for up to 6 participants  
                    - On-site training: $6,500 for up to 10 participants                           | No                                                                             |
| Phone, Webinar, or email technical assistance and consultation                                           | Free                                                                                                | No                                                                             |
| In-depth phone or Webinar coaching                                                                     | Starts at $150 per hour                                                                            | No                                                                             |
| The Change Companies Fidelity Tool (long and short forms)                                                | Free                                                                                                | No                                                                             |
| Facilitator evaluations, facilitator self-evaluations, and supervisor/observer evaluation of facilitators| Free                                                                                                | No                                                                             |
| Training evaluation and observation and feedback form                                                    | Free                                                                                                | No                                                                             |
| Participant program evaluation forms                                                                     | Included with facilitator guide or available online                                                | No                                                                             |
| Participant pre- and posttests                                                                          | Included with facilitator guide or available online                                                | No                                                                             |
| Outcome Assessment and Reporting System (OAARS)                                                          | $99 for a package of 50 OAARS tools, reporting tables, tabulation sheets, and administration manual | No                                                                             |

**Additional Information**

The Change Companies can customize journals to fit the needs of an implementing agency, and site licenses for distance learning, e-learning, and Webinar modules are available for agencies.

**Replications**

Selected citations are presented below. An asterisk indicates that the document was reviewed for Quality of Research.


To learn more about implementation, contact:
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To learn more about research, contact:
William R. Miller, Ph.D.
(505) 265-3318
wrmiller@unm.edu

Consider these Questions to Ask (PDF, 54KB) as you explore the possible use of this intervention.

Web Site(s):

- [http://www.changecompanies.net](http://www.changecompanies.net)

This PDF was generated from http://nrepp.samhsa.gov/ViewIntervention.aspx?id=333 on 5/15/2014