



**2017
PROGRAM
EVALUATION
ANNUAL REPORT**

November 2017

This program evaluation has been funded by The Retreat. Questions regarding The Retreat, or requests for copies of this report, should be directed to John H. Curtiss, MA, LADC, NCRS, President, 1221 Wayzata Blvd. East, Wayzata, MN 55391; 866-928-3434 or info@theretreat.org,

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The opinions expressed in this report are those of the author and do not necessarily reflect those of The Retreat.

Abstract

This is the final annual update of a longitudinal evaluations effort conducted by Herbert & Louis, LLC, an independent evaluation company, for calendar year 2016 due to the pending retirement of the evaluator. This report presents current year as well as all years findings for the 16 years of the project.

As in the past, the report includes sections for the residential, non-residential, non-residential older adults, and extended stay programs. The report also includes a brief summary of the positive effects of sober housing on sobriety. The information presented continues to confirm positive findings consistently discussed in past reports.

Demographic characteristics of guests remained relatively consistent with previous years with an average age of approximately 39 years in the residential and non-residential programs and 65 years in the older adult program. Approximately 76% of the guests were males and approximately 97% Caucasian. All programs, other than the elder adult program reported approximately 45% single and 27% married across all years. In the elder adult program married guests were predominant.

At departure, guests' willingness to recommend The Retreat to others remained quite high with approximately 96% endorsing this willingness to a great or very great extent. Self-report of improvement remained strong with 90% reporting improvement in the issues that brought them to The Retreat.

At six month follow-up the abstinence rate for those in the residential program was 58% with another 30% reporting using less than before registration. At twelve month, 54% reported abstinence and 32.0% reported using less than before registration – again across all years.

Statistically significant improvements were demonstrated in several recovery critical domains at both six and twelve months.

Although there were fluctuations in the types of substances being used prior to registration and at follow-up, there were no clear, strong trends apparent in changing choices of substance.

Guest satisfaction remained strong across the several service and facility indicators as has been consistently reported previously.

At the conclusion of the 16 year evaluation the evaluator concluded that The Retreat model was one of the most effective observed and studied in his 45 years in the field working with hundreds of agencies. This final report includes an unequivocal recommendation for referral to The Retreat.

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Introduction

This is the final report¹ of an evaluation project that was started in early 2001. The report includes annual data for calendar year 2016 and a summary of all 16 years data for the residential, non-residential, non-residential for older adults, and the extended stay program.

At the time of registration, all guests are requested to complete a registration survey comprised of several domains including general demographics (i.e., age, gender, income, etc.), substance use, prior year health care access, prior year involvement in the legal system, mutual help participation, employment, and quality of life. This registration survey contains 53 questions consisting of checklists and Likert-type response scales with which respondents can indicate their level of agreement with statements (i.e., very great extent, great extent, some extent, little extent, or very little extent).

Guests are requested to complete a satisfaction survey at the time of departure from The Retreat. This 23-question survey contains 20 questions with Likert-type scales covering the domains of satisfaction of facilities, assistance received, critical life-relationships, quality of life, and willingness to recommend The Retreat to others. The final three questions are open-ended seeking responses regarding the most helpful and least helpful experiences during their stay as well as requesting suggestions or comments for program improvement.

All guests are also invited by Retreat staff at the time of registration to participate in the longitudinal follow-up at six and twelve months following their departure. Those who volunteer for this element of the program evaluation complete an informed consent to participate form and provide contact information for the evaluator. At six and twelve months post departure, guests are contacted to complete the survey. Contact is with a first class

¹ Due to retirement of the evaluator.

mailing of the survey first attempted by the contractor with up to two US Postal Service First Class mailings. If the instruments are not returned, the evaluator then attempts telephone contact up to five times during different times and on different days. Failing this attempt, a contact person, identified by the guest, is contacted in an attempt to locate the guest.

For the most part, the follow-up survey is a mirror of both the registration and departure satisfaction surveys containing the same questions; the form also includes additional questions regarding current substance use compared to substance use prior to their stay at The Retreat. The data collected at follow-up provides the opportunity to document and statistically measure changes from enrollment to follow-up.

The report contains a discussion of the guest demographics, findings at departure, the impact of sober housing on recovery rates, as well as outcomes at six and twelve months.

Statistical significance is only reported where the probability of sampling error is five percent or less and referenced by this notation ($p < .05$).

As stated above, the first enrollments for the residential program collected by the evaluation team were in March of 2001. In May of 2009 the non-

Table 1. Total Enrollments (n)	
Residential	5,899
Non-residential	542
Non-residential Older Adults	103
Residential Extended Stay	84

residential alternative was opened followed by the separate non-residential opportunity for older guests in 2011. In June, 2014, data became available for the residential extended stay opportunity. The total number of participants in each of the programs can be seen in Table 1.

Residential

Demographics

The average age of guests this year was 39.5 years similar to all years. Males continued to be significantly more likely to be younger (38.4 years) than females (42.3 years) as previously reported. During the report year, females were significantly less likely to register than males when compared to all years' data. (Table 2)

	n	mean	sd
2016			
All	553	39.5	13.0
Males	390	38.4	12.7
Females	163	42.3	13.2
All Years			
All	5,899	39.3	12.6
Males	3,889	38.3	12.5
Females	1,993	41.3	12.5

Non-Caucasian guests were significantly less likely to register in the residential program this year than in all years. There was no statistically significant difference between males and females for the report year. (Table 3)

	2016	All Years
Caucasian	97.5	93.9
Black/African American	0.4	0.5
Asian	0	0.5
Latino	0	0.1
Native American	0	0.3
Other/Not Reported	0.8	4.7

	2016	All Years
Married	23.4	27.4
Single	51.1	45.3
Divorced	19.0	18.8
Separated	2.9	4.9
Widowed	0.5	1.1
Living as Married	3.1	2.6

The largest distribution of guests remained single – never married (51.1%) and this group was significantly more likely to register during the report year and in all years. The reverse of fewer married guests also applies. (Table 4)

Approximately 35.5% of the guests reported working full-time prior to registration. This was somewhat greater than that reported in the all year data but the difference was not significant. All other categories of employment remained quite stable. (Table 5)

Approximately 0.2% of the all guests across all years reported being self-employed.

	2016	All Years
Full-time	35.5	32.1
Part-time	9.5	8.1
Irregular	4.6	5.6
Homemaker	3.3	4.6
Student	3.1	4.3
Retired	5.9	5.6
Unemployed	38.2	39.7

The level of education of guests enrolling this year remained relatively high with 37.8% reporting some college or trade school and 33.8% college graduate. It was noteworthy that over the course of the evaluation approximately 15.6% of the guests had taken post-graduate course work or had a post-graduate degree. (Table 6)

	2016	All Years
Not Completed HS Graduate	1.3	2.1
HS Graduate	11.5	11.5
Some College/Trade School	37.8	42.3
College Graduate	33.8	28.4
Post-graduate Course Work	6.5	5.4
Post-graduate Degree	9.1	10.2

The current year saw a dip in the distribution of guest who reported an annual household income of \$50,000 or more, but remained statistically similar across all years' data. (Table 7)

	2016	All Years
(Thousands of Dollars)		
< 20	20.1	18.1
20 to 29.9	10.8	8.5
30 to 39.9	10.3	9.4
40 to 49.9	11.6	9.3
> 50	47.3	54.6

Over the years there were expected year to year fluctuations in the distribution of endorsements to the employment related questions. On the job accidents, grievances, and workers' compensation claims in the last 12 months

were reported by less than 10% of the guests over all years. Approximately one-third reported having been fired from a job and approximately one-quarter reported formal disciplinary action by their employer, while approximately one-third reported being promoted. (Table 8)

	Never		Once		Twice		Thrice		> Thrice	
	2016	All Years	2016	All Years	2016	All Years	2016	All Years	2016	All Years
Promoted	58.7	66.7	18.2	16.4	9.2	7.2	4.7	2.9	9.2	6.9
Took a New Job	63.1	67.4	17.0	17.2	8.1	6.9	3.8	2.8	8.1	5.6
Fired From Job	65.7	71.4	23.8	19.9	7.1	5.2	1.3	1.6	2.1	1.9
On Job Accident	93.3	93.2	4.9	5.0	1.1	1.0	0.2	0.2	0.6	0.6
Filed Work Comp Claim	94.6	94.4	4.1	4.9	0.9	0.5	0.4	0.1	0.0	0.2
Filed Grievance	99.4	98.4	0.6	1.5	0.0	0.1	0.0	0.0	0.0	0.0
Formal Disciplinary Action	73.7	78.2	18.9	13.6	4.1	4.7	1.1	1.5	2.2	2.1

On the enrollment survey, guests are asked to indicate all the substances they have used in the past 12 months. Over the years, preference in substances used has seen regional trends. These trends are important to monitor as techniques to recover from various substances, especially those involved with stereotypically strong sub-cultures, can influence mid- to long-term recovery as the individual breaks away from the subculture.

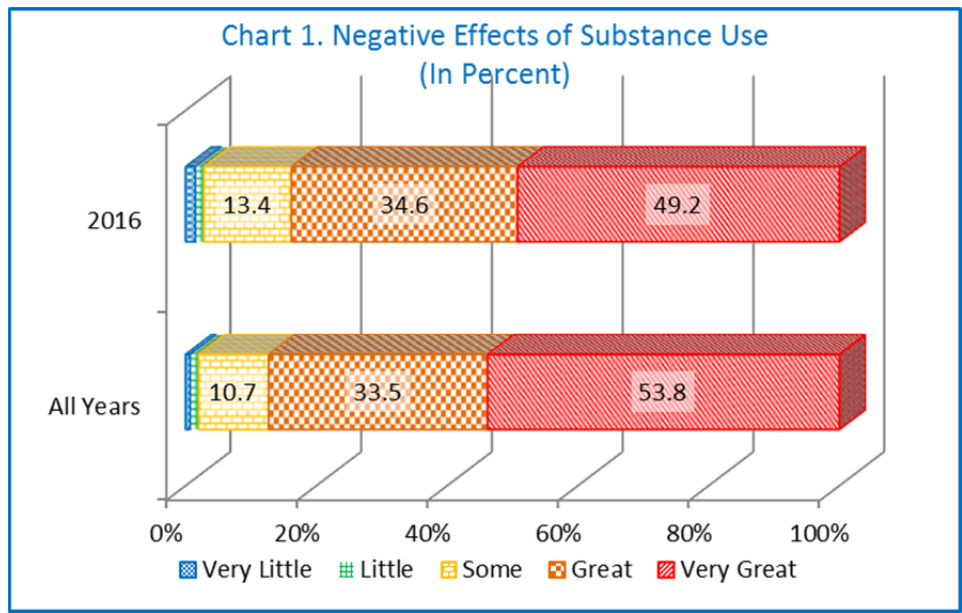
This year there was a downward shift in the distribution of guests reporting the use of cocaine (powder and crack) with upward shifts in methamphetamines, heroin and marijuana. (Table 9)

Alcohol continued to be the most frequently cited primary substance used (65.3%), followed by heroin (6.7%), methamphetamine (6.5%), and other opiates (2.7%). “Other” drugs not listed were indicated by 10.5% of the guests. (Data not in a table.)

Guests continued to report significant negative effects from their substance use. This year 53.8% reported “very great” and 33.5% “great” negative effects on their life.

Only 1.3% reported “little” and 1.5% “very little” effect. (Chart 1)

	2016	All Years
Alcohol	91.5	92.0
Marijuana/Hash	44.3	41.7
Prescription	32.7	35.9
Cocaine (Powder)	26.6	32.5
Meth/amphetamines	23.7	19.1
Other Opiates	21.2	22.4
Heroin	17.5	15.0
Illegal Rx	15.4	20.0
Hallucinogens	14.7	16.5
Over the Counter	13.9	18.0
Sedatives	13.0	16.7
Crack	11.8	17.7
Other Stimulants	9.2	9.6
Inhalants	4.9	6.5
Other Substances	4.7	5.4



Service Utilization

Approximately 42.6%, down from 54.5%, of this year's guests reported accessing detoxification services in the past 12 months prior to registration. These rates are quite similar to the all years' data. (Table 10)

Table 10. Detoxification Episodes (In Percent)		
	2016	All Years
None	42.6	47.1
One Time	28.0	26.6
Two Times	12.8	13.0
Three Times	6.8	6.2
More than Three Times	9.9	7.1

Table 11. Outpatient Episodes (In Percent)		
	2016	All Years
None	55.9	62.2
One Time	26.3	24.1
Two Times	10.9	7.7
Three Times	2.0	2.1
More than Three Times	5.0	3.8

Approximately 55.9% of the guests reported no uses of outpatient services in the past 12 months. This was lower than the all years' data of 62.2%. (Table 11)

Slightly over half of the guests reported substance related residential treatment in the past 12 months with this year being slightly higher than all years. Utilization of this service has always seemed high and suggests that traditional treatment has not worked for many of the guests. (Table 12)

Table 12. Residential A&D Episodes (In Percent)		
	2016	All Years
None	47.6	49.9
One Time	23.3	24.9
Two Times	11.8	11.6
Three Times	6.5	5.8
More than Three Times	10.9	7.8

Table 13. Hospitalizations A&D Related (In Percent)		
	2016	All Years
None	46.6	55.8
One Time	22.5	21.0
Two Times	13.7	10.4
Three Times	6.8	4.8
More than Three Times	10.4	8.0

This year, the frequency of hospitalizations related to substance abuse continued to show an upward trend, with 53.4% of the guests indicating at least one hospitalization, and was higher than the all year distribution of 44.2%. (Table 13)

Approximately 63.1% of the guests reported seeing an individual therapist at least once in the 12 months prior to registration. This utilization marker has been very stable over all years. (Table 14)

	2016	All Years
None	36.9	36.8
One to Five	28.9	28.1
Six to Ten	12.4	11.8
Eleven to Twenty	8.4	9.8
More than Twenty	13.4	13.4

	Never		Once		Twice		Thrice		> Thrice	
	All		All		All		All		All	
	2016	Years	2016	Years	2016	Years	2016	Years	2016	Years
Hospitalization (Physical Problem)	74.2	77.9	15.1	12.8	4.7	4.7	1.5	1.3	4.5	3.2
Emergency Room Hospitalization (Mental Problem)	51.9	52.5	21.4	24.0	11.3	11.3	5.8	5.0	9.6	7.2
Hospitalization (Mental Problem)	84.4	87.2	10.2	8.5	3.4	2.5	0.9	0.8	1.1	0.9

Approximately 25.8% of the guests reported being hospitalized at least once in the past 12 months for physical problems other than those related to substance use, while 48.1% reported at least one emergency room visit. Of those enrolling this year, only 15.6% reported being hospitalized in the prior 12 months for a mental issue. (Table 15)

	> 3 / Week		2 to 3 / Week		1 / Week		1 / Month		< 1 / Month	
	All		All		All		All		All	
	2016	Years	2016	Years	2016	Years	2016	Years	2016	Years
Attend AA/NA	22.7	19.1	19.6	18.8	13.5	12.4	5.7	7.8	38.5	42.0
Contact Sponsor	12.9	11.7	11.4	9.9	16.0	12.4	5.9	6.0	53.9	60.1
Spouse/SO Attend Mutual Help	4.5	2.9	4.9	3.2	6.0	6.7	4.3	3.5	80.4	83.8
Prayer/Meditation	29.0	27.5	14.0	13.9	12.0	12.2	6.9	7.3	38.0	39.1

Approximately 61.5% of the guests reported attending at least one AA/NA group per month, while 46.1% reported having contact with a sponsor at least monthly in the past 12 months. Less than 20.0% reported their spouse or partner attending mutual support meetings and 62.0% reported participating in prayer or meditation at least once a month. These critical recovery markers are relatively constant with previous findings. (Table 16)

This year approximately 21% reported receiving a driving while intoxicated (DWI) citation, 21.0% arrested for a crime related to substance use, 8.1% for possession and 12.0% arrested for other non-substance use crimes. Overall 28.6% reported being incarcerated at some point in the previous 12 months, up sharply from 19.3% previously reported. (Table 17)

	Never		Once		Twice		Thrice		> Thrice	
	2016	All Years	2016	All Years	2016	All Years	2016	All Years	2016	All Years
Driving While Intoxicated	79.0	78.9	14.6	15.7	3.4	3.2	2.3	1.3	0.8	1.0
Arrested A/D Related Crime	79.0	81.6	11.9	11.2	4.3	3.6	2.5	1.7	2.3	1.9
Arrested for Possession	91.9	92.7	6.6	5.4	0.9	1.1	0.4	0.4	0.2	0.4
Arrested for Other Offenses	88.0	88.7	7.3	7.0	1.9	2.1	1.5	0.7	1.3	1.5
Incarcerated	71.4	73.9	18.6	17.3	5.5	4.8	2.4	1.8	2.1	2.2

This year approximately 7.2% of the guests reported accessing a halfway house prior to registration for an average of 72.9 days, somewhat shorter than the all year data. (Table 18)

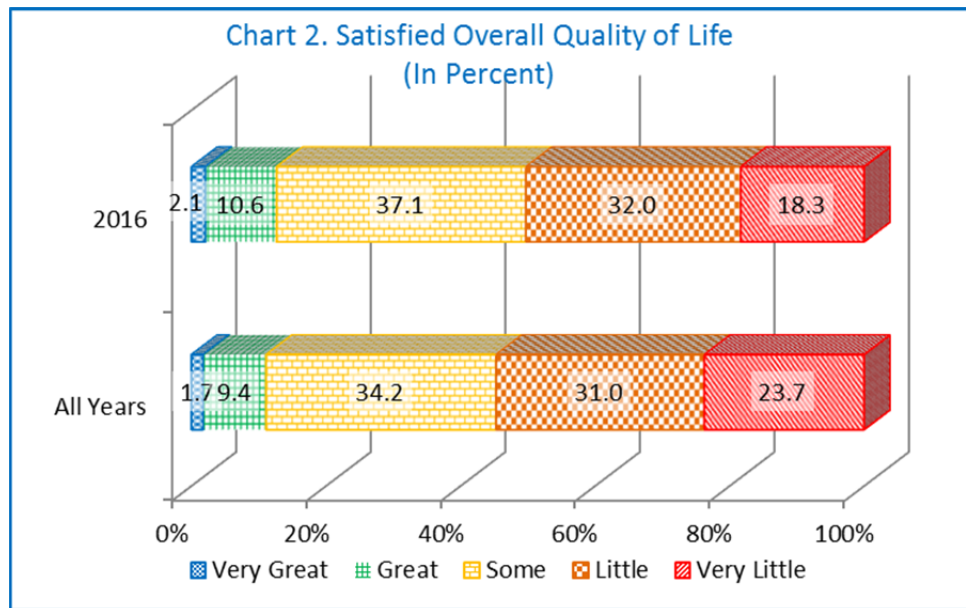
	n	mean	sd
2016	40	72.9	61.1
All Years	428	83.3	74.0

Approximately 21.7% of the guests reported residing in a sober house within the 12 month prior to registration for an average of 130.5 days. (Table 19)

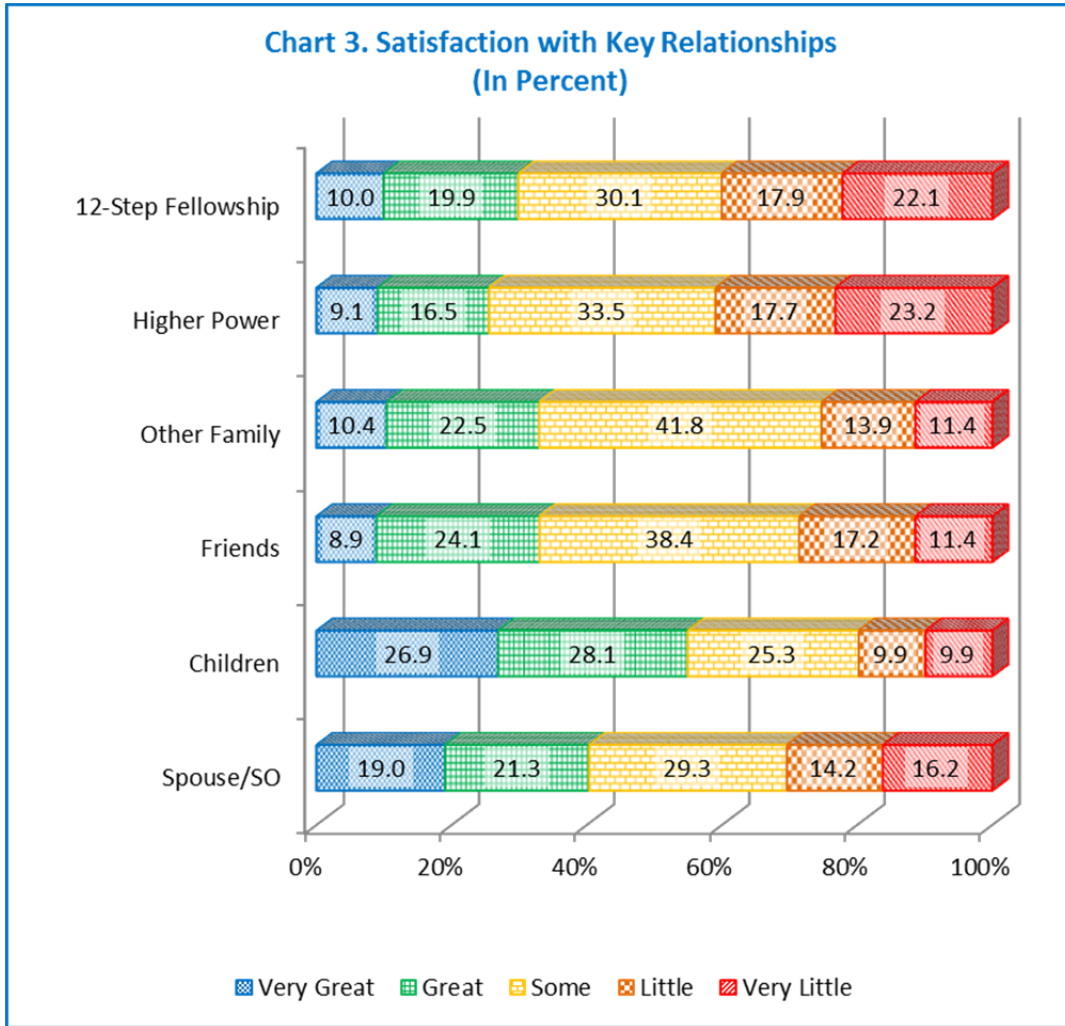
	n	mean	sd
2016	120	130.5	101.7
All Years	849	110.3	98.5

Baseline Satisfaction with Key Recovery Supports

Approximately 50.3% of the guests reported experiencing “little” or “very little” overall satisfaction with their quality of life this year. This distribution of dissatisfaction was somewhat less than the all previous years data. (Chart 2)

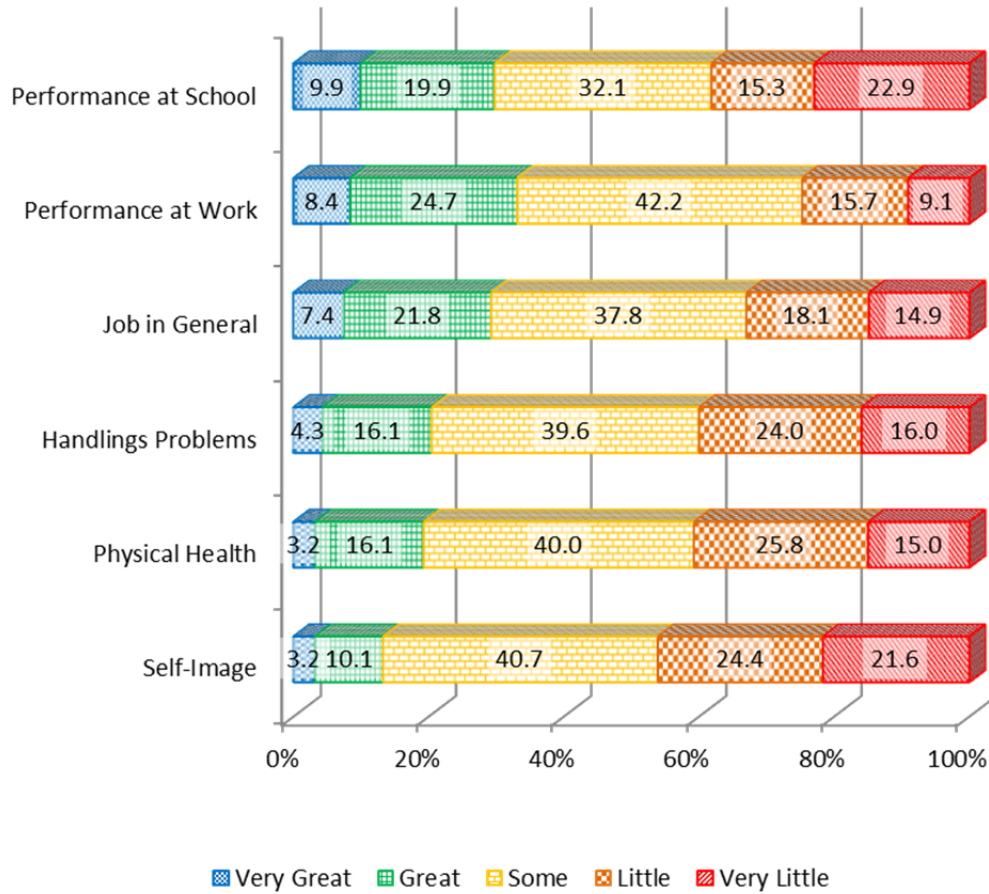


Guest responses to their level of satisfaction with key relationships continued to parallel closely with that previously reported and, as expected, remained low. Least satisfaction was with their relationship with a Higher Power (40.9% “little” and “very little”) followed by 12-Step Fellowship (40.1%), and spouse or significant other (30.4%). Satisfaction with children has consistently been the highest marker in this domain with approximately 48.8% reporting positively. (Chart 3)

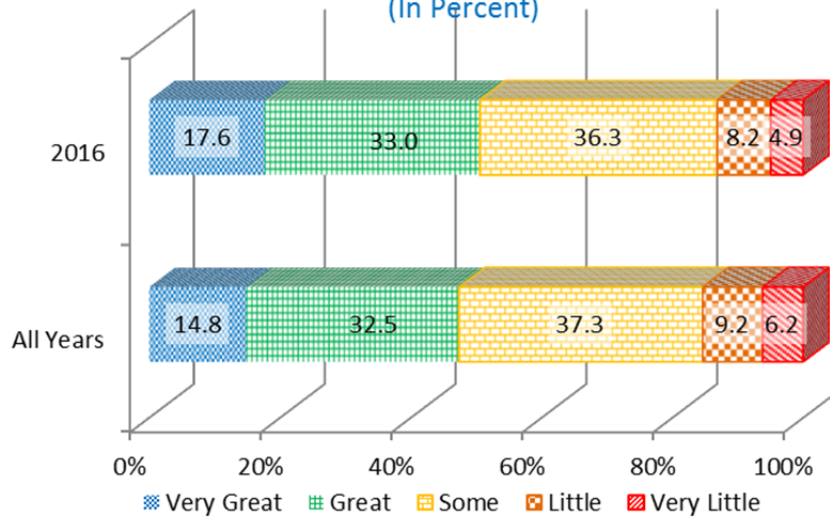


Guest satisfaction with other key indicators suggested several additional areas of low satisfaction such as: 46.1% reporting “little” or “very little” satisfaction with their self-image, approximately 40.7% dissatisfied with their physical health, and 40.0% dissatisfied with their ability to handle problems. (Chart 4)

**Chart 4. Satisfaction with Other Key Indicators
(In Percent)**



**Chart 5. Satisfied With Closest Relationship
(In Percent)**



Satisfaction with their closest support relationship remained low with only 47.4% rating it as “very great” or “great.” The responses to this key recovery support question remained statistically similar to previous years. (Chart 5)

Overall, a “friend” (27.3%) continued to be the most likely identified person who guests reported as most frequently talking to about problems. The distribution of responses has remained relatively stable throughout the evaluation. (Table 20)

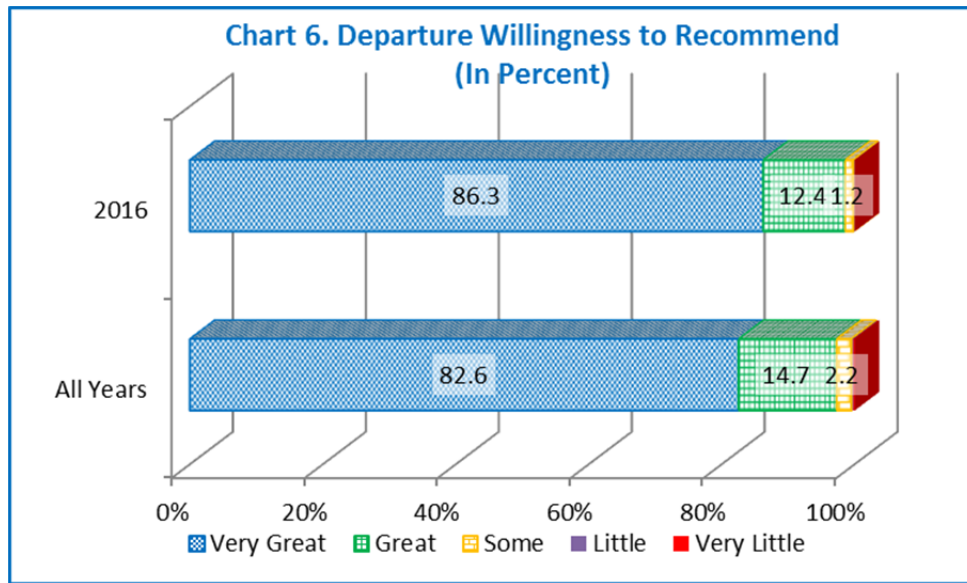
	2016	All Years
Friend	27.3	26.2
Spouse/Significant Other	24.2	23.4
Parent	13.3	12.5
12-Step Sponsor	12.2	10.9
Counselor	9.2	11.2
Child	1.6	1.6
Priest, Minister, Rabbi	0.8	1.4
Other	3.6	3.6
Did not Talk to Anyone	7.6	9.3

Satisfaction at Time of Departure

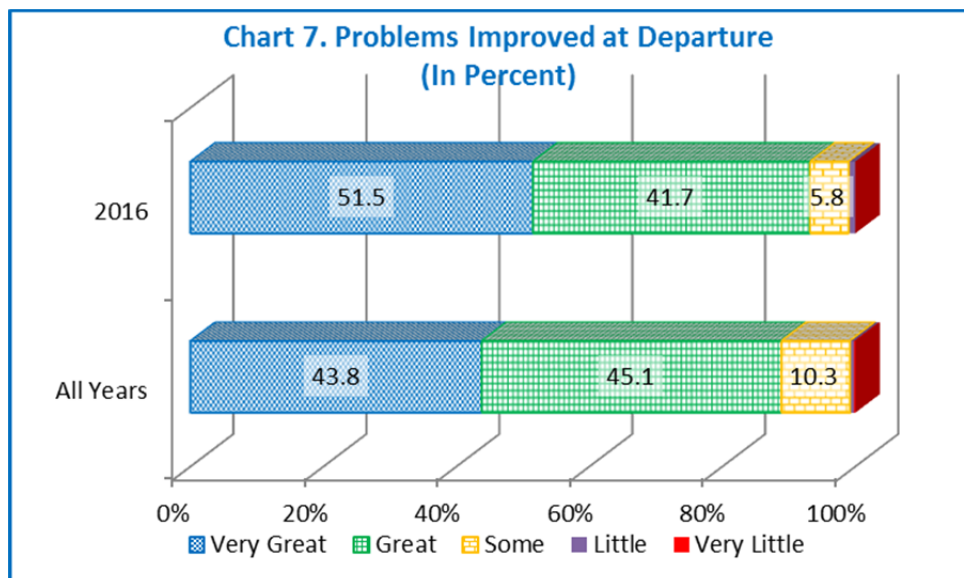
As discussed above, at the time of departure, guests are provided the opportunity to provide feedback on a satisfaction survey. Generally speaking, the findings reported from these studies have been encouragingly positive and consistent over the years although the instrument has proven sensitive in design to staff personalities and approaches.

A key marker for consumer satisfaction is their willingness to recommend the services to others. With a normal rule of thumb based on findings from other addictions programs, a positive endorsement of 85% (“great” and “very great” using the scale employed for this study) is considered minimally acceptable and normally there is evidence of numerous areas for improvement noted from the data with an overall rating of 85%.

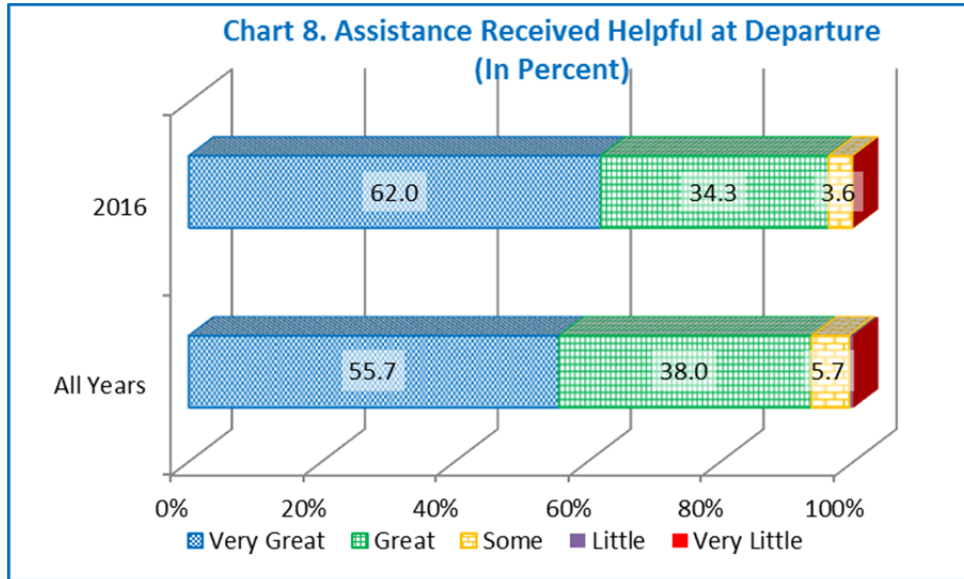
For The Retreat, level of endorsement by guests, at the time of departure, continues to be extremely positive. Of the sample of 503 departing guests participating, a remarkable 98.7% reported they were willing to refer others to The Retreat to a “very great” and “great” extent. This strong endorsement rate has remained relatively stable over the years. (Chart 6)



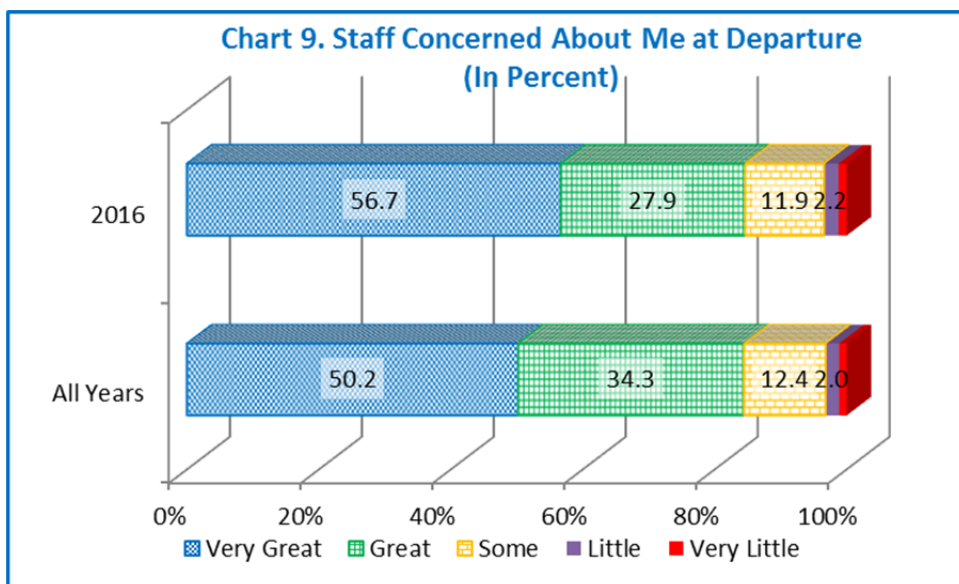
Approximately 93.2% responded to a “very great” and “great” extent regarding the improvement of problems that brought them to The Retreat. This very strong endorsement regarding the improvement of problems has also remained relatively constant. (Chart 7)



Approximately 96.3% of the departing guests reported that the assistance received during their visit was helpful as would be expected with the high level of endorsement with the previous questions. This is statistically similar to all previous years. (Chart 8)



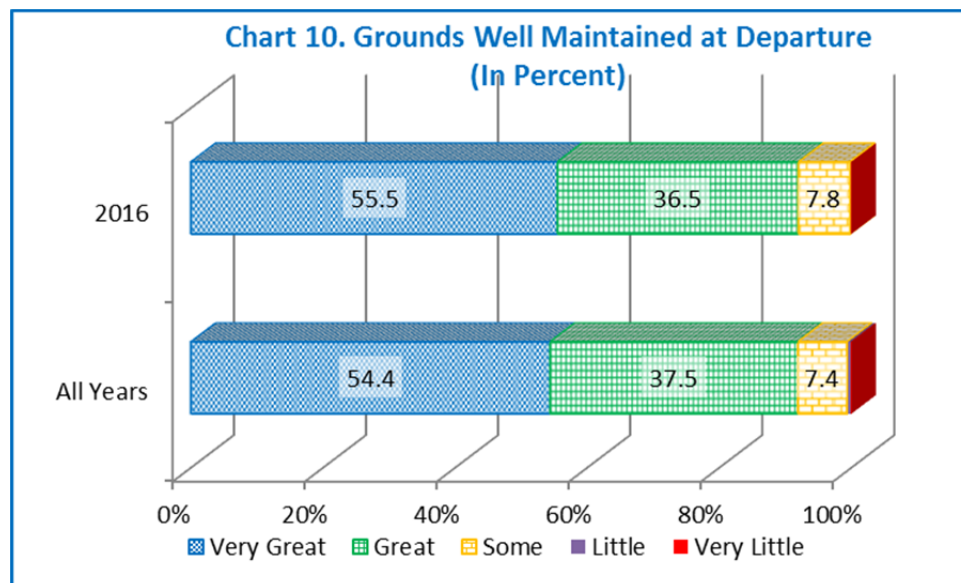
One of the hallmarks of effective service is the extent to which guests feel that staff were personally concerned about them and their care. This year, the indicator for this concern was 84.6% (“very great and great” endorsement) very similar to all previous years. (Chart 9)



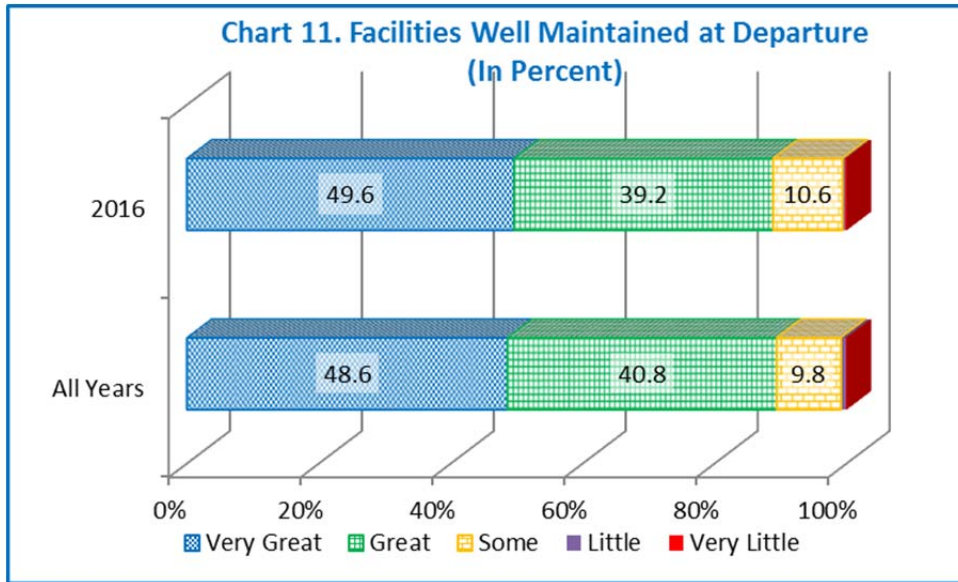
The environment in which services are provided is important to the overall experience guest take away. Condition and maintenance of the grounds, building, living, and working spaces are important to reducing stress and not detracting from the ability of individuals to focus on themselves in a restful, healthy manner. To address those markers the five following questions are asked in an effort to monitor the potential impact of the environment.

Interesting, there has been a nearly imperceptible decrease over the years in the scoring of the “always” category for the questions related to physical facilities.

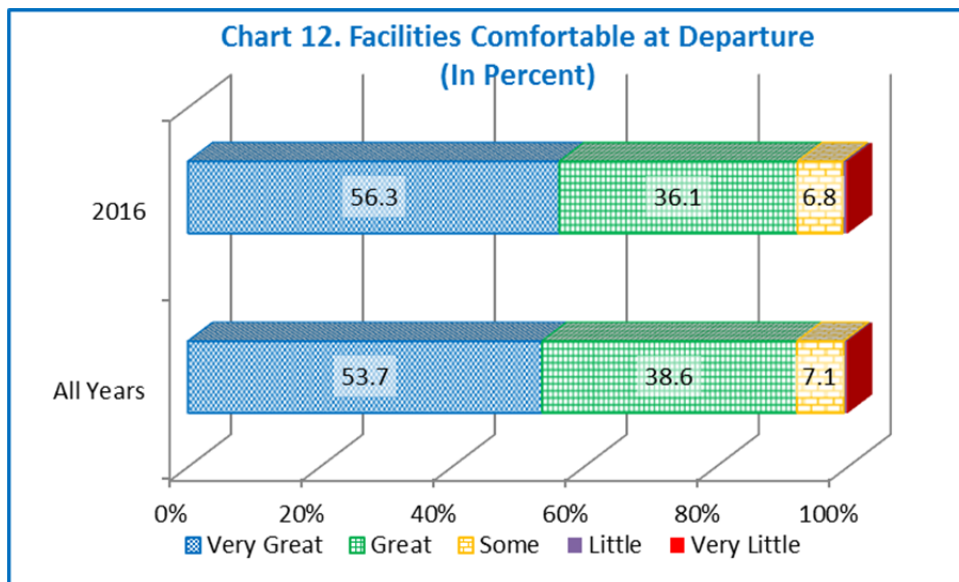
Approximately 92.0% of the departing guests were quite positive about the campus grounds endorsing the good maintenance. For this to remain strong over the long duration of the evaluation and the expansion of the campus is quite remarkable! (Chart 10)



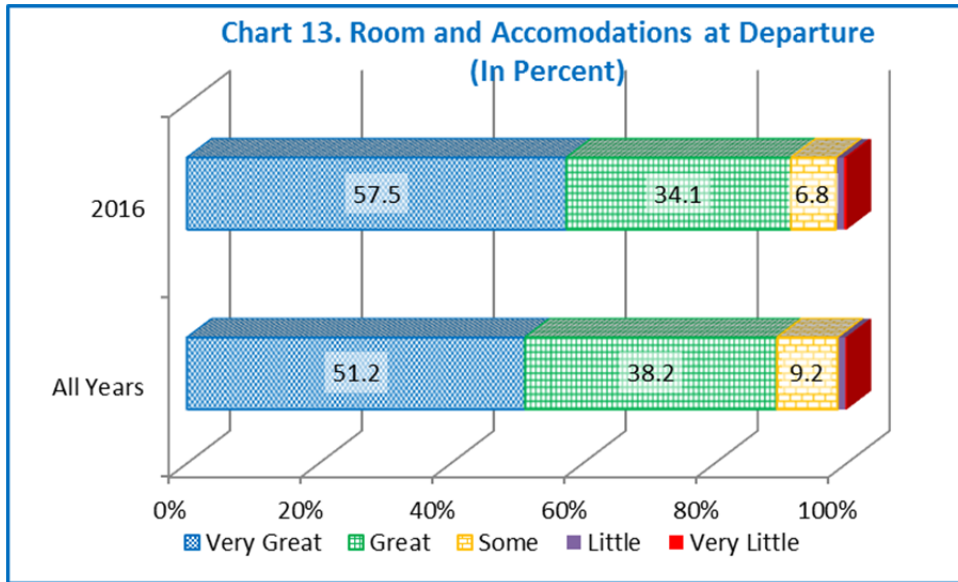
Approximately 88.8% of the departing guests reported positive satisfaction with the maintenance of the facilities. (Chart 11)



Perceptions regarding the comfortableness of the facility also remained relatively constant over the years with 92.4% endorsing positive satisfaction. (Chart 12)

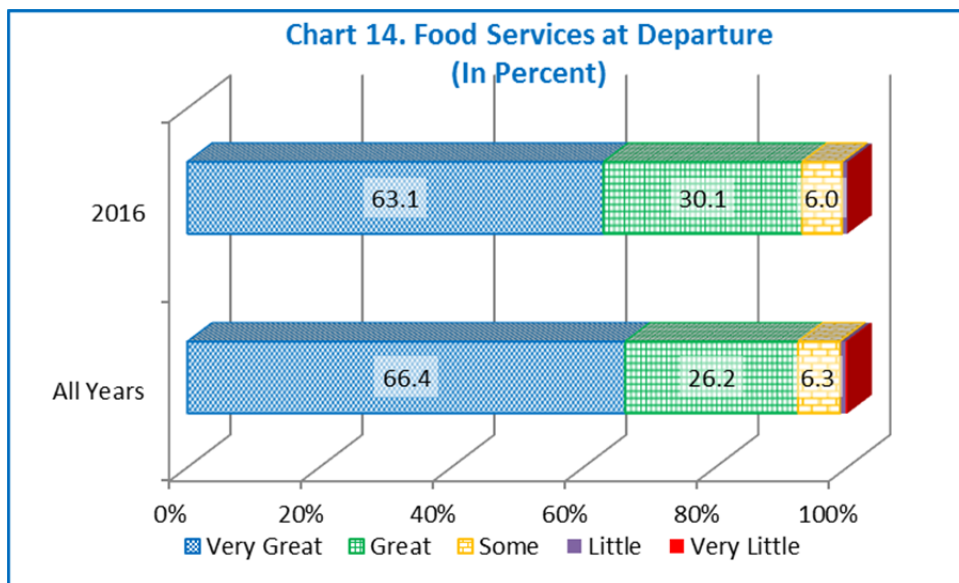


Satisfaction with their room and accommodations was documented at 91.6% this year, similar to all years. (Chart 13)



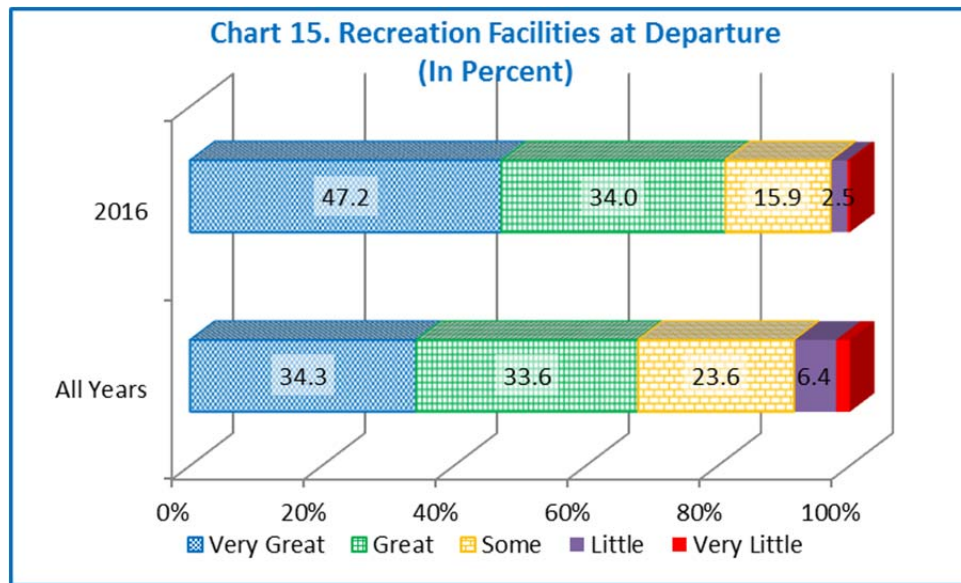
Food services and recreational/exercise opportunities are typically the categories that receive the widest distribution of satisfaction ratings as it seems humans are more particular about what they eat and how they exercise than where they are and what they're otherwise doing. Nonetheless, for The Retreat, remarkably, this has not been the case.

Again this year satisfaction levels with the food services remained quite strong with with a 93.2% positive level of endorsement by guests. (Chart 14)



Satisfaction with recreational opportunities has remained relatively stable over the years but generally quite a bit lower than other indicators with approximately 81.2% positive

endorsement this year. This is lower rating for recreation and exercise facilities/time has been consistently found across a wide spectrum of residential facilities. (Chart 15)



At departure, slightly over 93.2% of the guests reported that the problems that had caused them to come to the Retreat had improved (very greatly and greatly). Approximately 68.5% reported

improvement in their relationship with their spouse or significant other in the short time of the program. As would be expected, about 12.1% reported this relationship

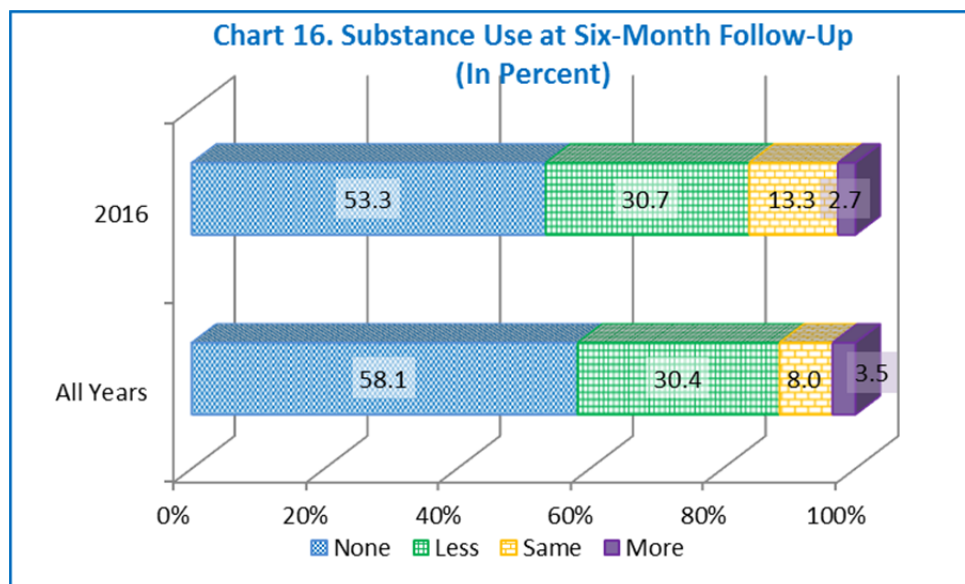
	Improved	Same	Worse
Relationship with Spouse/SO	68.5	19.4	12.1
Relationship with Children	74.0	18.1	7.9
Relationship with Friends	58.5	34.1	7.4
Relationship with Other Family	65.9	27.2	6.9
Higher Power	84.3	13.9	1.8
AA or 12-Step Fellowship	85.4	13.2	1.4
Self-image	59.9	35.0	5.1
Physical Health	58.9	35.4	5.7
Ability to Effectively Handle Problems	65.6	32.5	1.9
Overall Quality of Life	67.8	29.1	3.1
Issues Causing Problems	93.2	5.8	1.0

had become worse (worse and much worse) as frequently happens when relationships are already on a sharp downward spiral prior to registration. (Table 21)

In the past, this report has provided a summary analysis of the qualitative comments guests provide on their departure survey in response to what was the most helpful, least helpful, and suggestions to improve the experience. These comments are monitored and reported by the evaluation team on a monthly basis and an analysis of the current year's guest comments again revealed no trends.

Key Findings at Six-Month Follow-Up

At six-month follow-up, 53.3% of the past guests in the current year sample reported abstinence since departing The Retreat. Approximately 30.7% reported using less than before registration, and 13.3% reported about the same as before enrollment. (Chart 16)



Of those who reported use in the current year sample, 12.3% reported using once and stopping, while 34.3% reported using two or more times with periods of abstinence of longer

than 30 days. Approximately 37.0% reported using two or more times, but being sober for the past 60 days prior to completing the survey and 16.4% of those who used reported using more or less continuously. (Not in a table.)

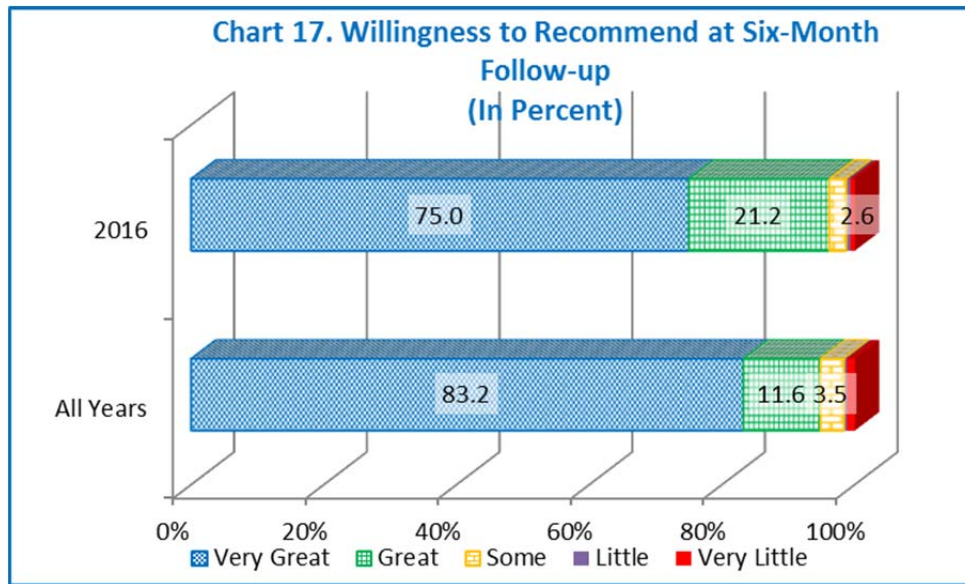
Alcohol (45.5%) continued to be the most frequently identified substance for those who used following departure from The Retreat and saw a slight increase in reported use from all years. There was shifting in the order of prevalence of substances used, with slight increases in heroin and sedatives, and slight decreases in several other substances including, for example, other opiates, cocaine, meth and methamphetamines, and crack cocaine.

(Table 22)

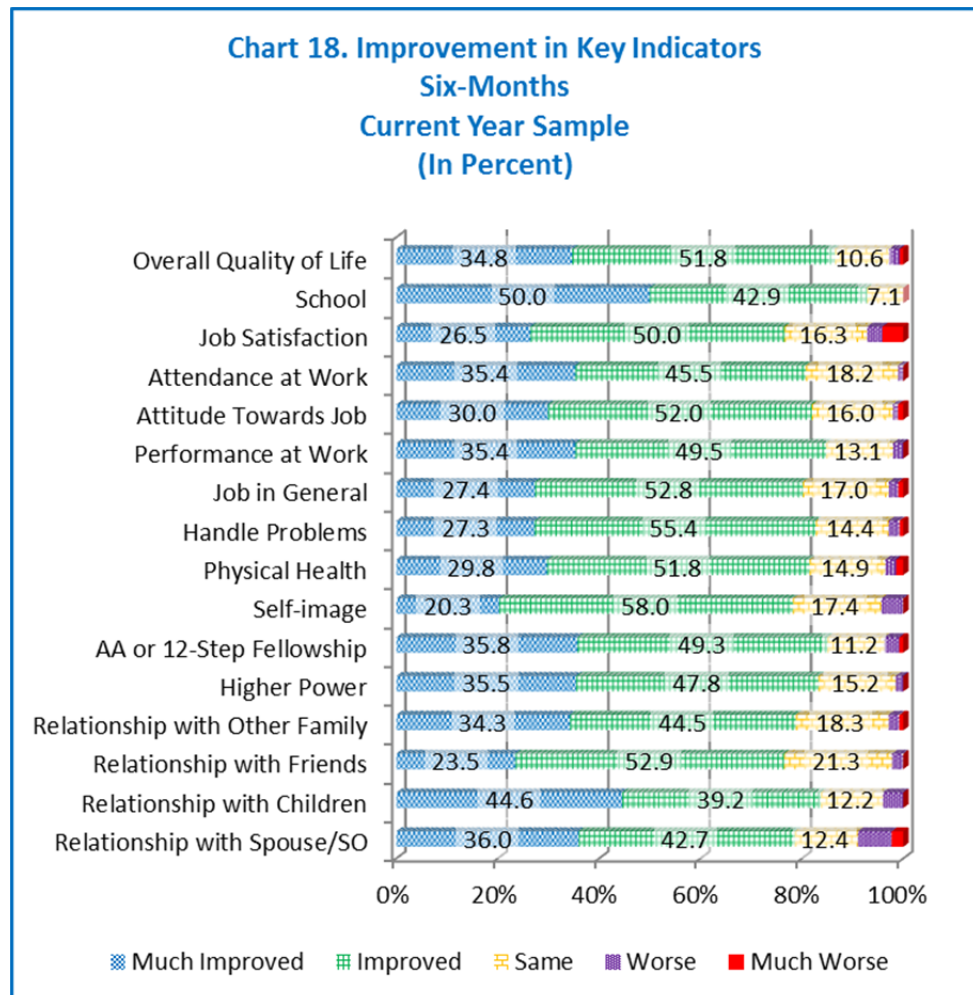
	2016	All Years
Alcohol	45.5	39.0
Prescription Meds	12.2	12.7
Over-the-Counter	5.1	8.9
Cocaine	3.8	6.2
Heroin	3.8	2.6
Meth/amphetamines	3.8	2.8
Hallucinogens	3.2	2.1
Other Opiates	3.2	2.8
Inhalants	3.2	0.9
Sedatives/Tranquilizers	3.2	2.2
Illegal Prescription Meds	1.9	2.7
Crack	1.3	4.2
Other Substances	1.3	1.1
Other Stimulants	0.6	1.5
Marijuana/Hashish	0.1	0.1

A follow-up question pertaining to the primary drug of choice indicated Alcohol (38.5%), while 50.0% indicating no one substance was primary.

Past guests remained quite positive at six-month follow-up with 96.2% of the current year sample endorsing their willingness to recommend the program to others “very great” and “great” extent. The willingness to recommend across all years was 94.8% - both very strong endorsements. (Chart 17)



The distribution of guests reporting improvement and much improvement again was strong with approximately 85.6% reporting improvement in the overall quality of life. Relationships with spouse and children were also report as seeing strong improvement. (Chart 18)



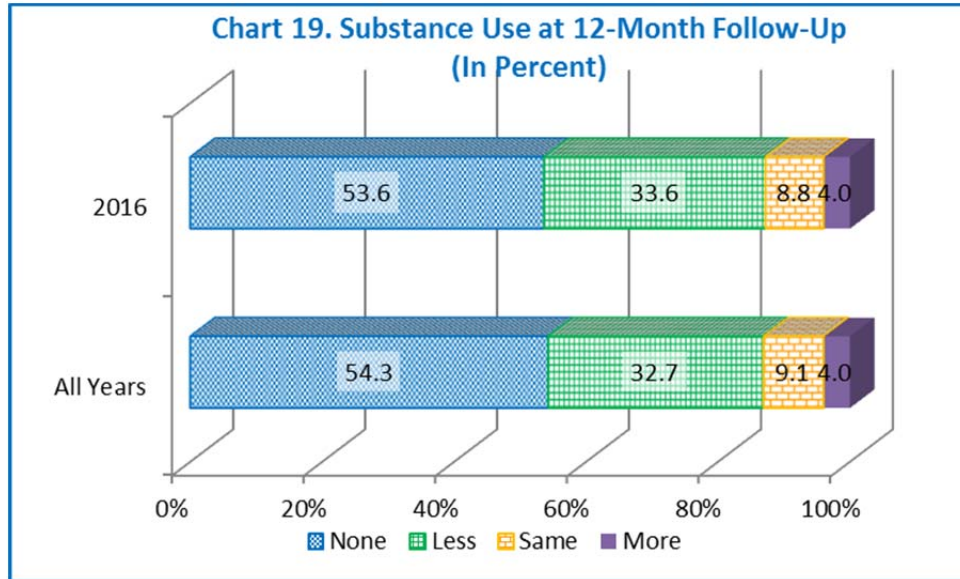
Utilizing an analysis of variance (ANOVA) comparing utilization at six month post departure with what was reported at registration, significant increases in attendance at fellowship meetings, contact with a sponsor, and use of prayer and/or meditation was documented in the current year sample. Significant decreases in detox and inpatient A&D treatment were also present. All years' data demonstrated significant

	2016	All Years
Detox Center	p < .05	p < .01
Outpatient A&D		
Inpatient A&D	p < .05	
Hospitalization A&D		p < .01
Attend Fellowship Meetings	p < .01	p < .01
Contact Sponsor	p < .01	p < .01
Spouse/SO Attend		p < .01
Fellowship Service Work		
Prayer/Meditation	p < .01	p < .01
Sponsored Someone		
Hospitalization Other		
ER Visits		p < .01
Hospitalization MH		
Non-Res/Outpatient Visits		
Arrests (Any Type)		
Incarceration		p < .05
Work Disciplinary Issues		
Been Promoted		
Started New Job		p < .01

improvement in those markers mentioned above and additionally in reduced hospitalizations related to substance use, reduced emergency room visits and reduced incarcerations. (All other markers saw improvement but the changes did not reach statistical significance.) (Table 23)

Findings at Twelve-Month Follow-Up

Approximately 53.6% of the guests participating in the current year 12- month follow-up reported not using substances since departure, essentially the same as the all years' data. Another 33.6% reported using less than before registration, 8.8% reported using about the same and 4.0% reported using more than before registration. (Chart 19)



For those who used, 11.7% reported using once and stopping, 25.0% used two or more times but with periods of abstinence 30 days or longer, 40.0% reported using two or more times and being sober for the past 60 days, and 23.3% reported using more or less constantly since departure for the current year sample.

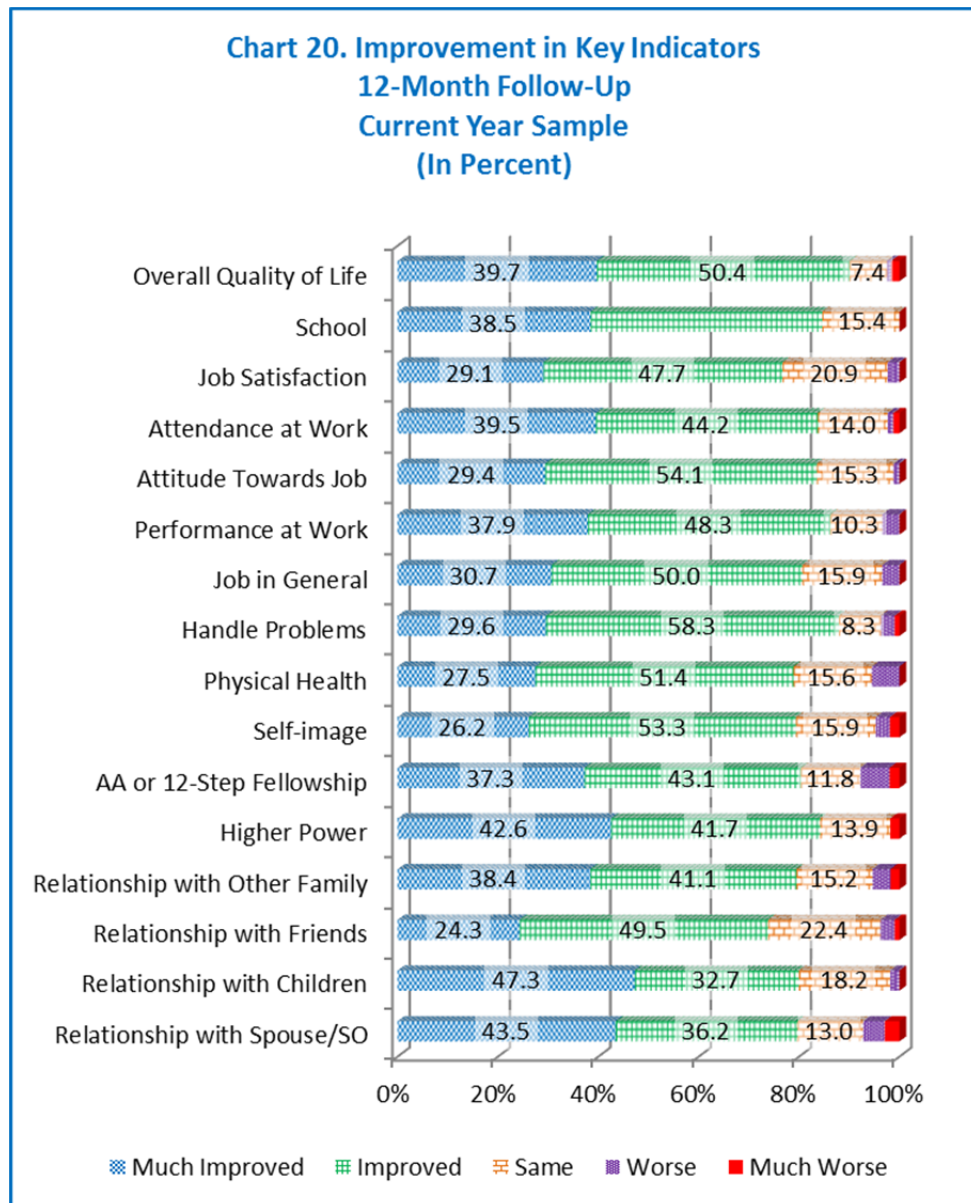
Current sample substances used at twelve-month demonstrated some shifting from previous years with

increased reported use of methamphetamine, other opiates, and sedatives while the use of cocaine (powder and crystal) decreased somewhat. (Table 24)

Table 24. Substances Used at 12-Month Follow-Up (In Percent)

	2016	All Years
Alcohol	43.5	41.3
Prescription Meds	9.2	11.6
Over-the-Counter	7.6	7.3
Meth/amphetamines	4.6	3.1
Other Opiates	3.8	3.3
Sedatives/Tranquilizers	3.8	2.6
Heroin	3.1	3.1
Cocaine	2.3	6.3
Hallucinogens	1.5	1.6
Inhalants	1.5	0.9
Other Stimulants	1.5	1.1
Illegal Prescription Meds	1.5	2.9
Marijuana/Hashish	0.1	0.1
Crack	0.0	4.5
Other Substances	1.5	0.8

At twelve-month follow-up, the distribution of responses regarding improvement of key indicators since departure remained similar to those previously reported and relatively positive. (Chart 20)



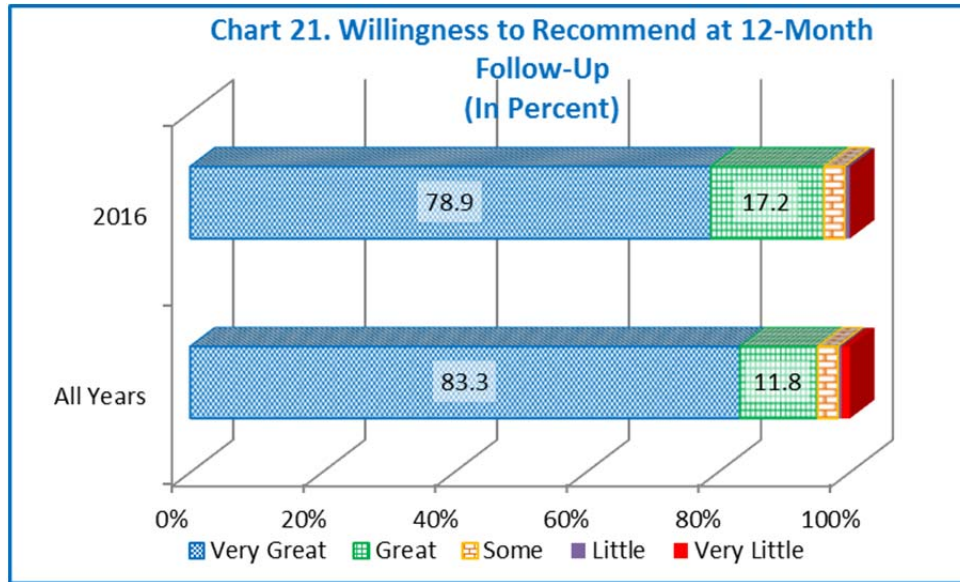
This year there were statistically significant improvements in the frequency reported for all mutual help meetings, contact with a sponsor, and prayer/meditation. Also seeing a

statistically significant were the reporting of taking a new job. The all years' data continued to see a number of statistically significant improvements similar to those previously reported.

As with the six month findings, all markers did show improvement. (Table 25)

Table 25. Key Service Utilization at 12-Months (ANOVA)		
	2016	All Years
Detox Center		p < .01
Outpatient A&D		
Inpatient A&D		
Hospitalization A&D		p < .01
Attend Fellowship Meetings	p < .01	p < .01
Contact Sponsor	p < .01	p < .01
Spouse/SO Attend		p < .01
Fellowship Service Work		
Prayer/Meditation	p < .01	p < .01
Sponsored Someone		p < .01
Hospitalization Other		
ER Visits		p < .01
Hospitalization MH		
Non-Res/Outpatient Visits		p < .01
Arrests (Any Type)		
Incarceration		
Work/Employment Issues		
Been Promoted		p < .05
Started New Job	p < .01	

Willingness to recommend The Retreat to others remained very strong for those participating in the 12-month follow-up with 92.2% reporting favorably. This was statistically similar to previous reports. (Chart 21)



Non-Residential Program

Demographics

The average age of participants in the non-residential program (NRP) this year was 39.3 years, down somewhat from the all years' data. Over all years, females were significantly older than males. This finding is very

common in addictions programs.

(Table 26)

Table 26. Age and Gender NRP

	n	mean	sd
2016			
All	56	39.3	11.3
Males	40	38.8	11.0
Females	16	40.5	12.0
All Years			
All	573	40.5	11.6
Males	351	39.6	11.3
Females	221	42.0	12.0

Table 27. Ethnicity NRP (In Percent)

	2016	All Years
Caucasian	98.8	91.2
Native American	0	0.2
Black/African American	0	0
Latino	0	0.2
Asian	1.2	0.7
Other/Not Reported	0	7.6

NRP participants were primarily Caucasian/White again this year and over all prior years. (Table 27)

This year the NRP saw an increase in the distribution of single participants, but the all years' data continues to demonstrate a more typical distribution regarding marital status.

(Table 28)

Table 28. Marital Status NRP (In Percent)		
	2016	All Years
Married	30.0	36.2
Single	54.0	38.4
Divorced	10.0	15.9
Separated	4.0	4.7
Widowed	0.0	1.3
Living as Married	2.0	3.5

Table 29. Employment Status NRP (In Percent)		
	2016	All Years
Full-time	53.1	52.7
Part-time	8.2	8.3
Irregular	0.0	4.2
Homemaker	4.1	4.7
Student	2.0	2.5
Retired	2.0	4.5
Unemployed	30.6	23.1

The distribution of employed participants remained very stable when compared to the all years' data with nearly one-third of the participants indicating being unemployed.

(Table 29)

The distribution of education for NRP participants this year was statistically similar to the overall data with a majority having some college or having a college degree. (Table 30)

Table 30. Education NRP (In Percent)			
		2016	All Years
Not Completed HS Graduate		2.0	0.7
HS Graduate		12.0	8.1
Some College/Trade School		40.0	37.1
College Graduate		30.0	35.4
Post-graduate Course Work		2.0	6.2
Post-graduate Degree		14.0	12.6

As with the education level, this year's distribution of income ranges was statistically similar to the overall data with the majority reporting household income of over \$60,000 per year. (Table 31)

	2016	All Years
(Thousands of Dollars)		
< 20	14.6	12.0
20 to 29.9	4.2	6.9
30 to 39.9	10.4	8.1
40 to 49.9	10.4	8.5
> 50	60.4	64.6

Over all years of the evaluation very few of the NRP participants filed a workers' compensation claim, experienced an accident

on the job, or filed a grievance. Nearly 20% had been fired at least once in the 12 months prior to enrollment and approximately 15% had formal disciplinary action taken.

Approximately 35.5% had been promoted and nearly 30.0% had taken a new job. The current year data demonstrated some fluctuation but none were statistically significant. (Table 32)

	Never		Once		Twice		Thrice		> Thrice	
	2016	All Years	2016	All Years	2016	All Years	2016	All Years	2016	All Years
Filed Work Comp Claim	92.2	96.8	7.8	2.8	0.0	0.4	0.0	0.0	0.0	0
Fired From Job	72.6	81.1	23.5	16.6	3.9	2.1	0.0	0.0	0.0	0.2
On Job Accident	92.2	96.5	5.9	2.6	2.0	0.6	0.0	0.2	0.0	0.2
Filed Grievance	100.0	99.4	0.0	0.6	0.0	0.0	0.0	0.0	0.0	0.0
Formal Disciplinary Action	78.0	88.5	18.0	7.9	2.0	1.9	0.0	0.9	2.0	0.8
Promoted	62.0	65.5	26.0	18.0	10.0	6.6	0.0	3.4	2.0	6.5
Took a New Job	65.3	70.4	18.4	17.3	14.3	7.0	2.0	2.3	0.0	3.0

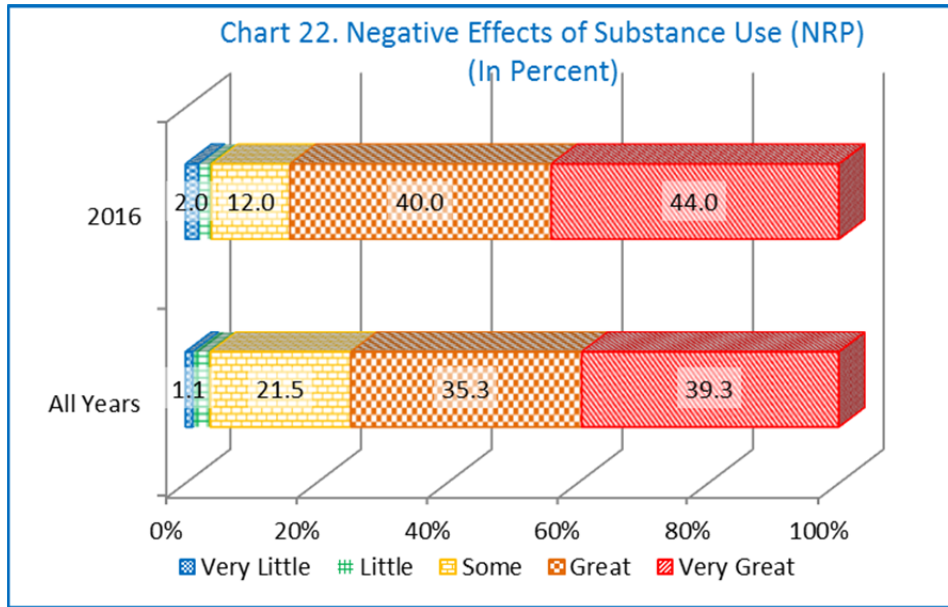
As with the residential guests, the NRP participants reported alcohol most frequently, followed by marijuana, prescription meds, cocaine, and methamphetamines. Interesting, the current year participants were more likely to report using methamphetamine than the all years' data showed at six months for those who used. The distribution of other substances used over all years is somewhat different than that of the residential guest but is not statistically significant,

	2016	All Years
Alcohol	92.2	95.8
Marijuana/Hashish	45.1	33.6
Prescription Meds	29.4	25.7
Cocaine	23.5	21.8
Other Opiates	15.7	15.3
Meth/amphetamines	29.4	13.3
Hallucinogens	13.7	12.2
Illegal Prescription Meds	11.8	11.8
Heroin	17.7	10.5
Over-the-Counter	19.6	10.3
Crack	9.8	8.9
Sedatives/Tranquilizers	7.8	8.5
Other Stimulants	2.0	5.4
Inhalants	3.9	3.5
Other Substances	3.9	3.7

especially when considering the fact that the NRP was implemented much later than the traditional residential program. (Table 33)

The primary drug of choice was alcohol (76.6%) followed distantly by other substances (4.8%) and heroin (4.4%). Current year data saw heroin as the primary drug of choice for 11.8% of the participants and alcohol decreased to 68.8%.

As with previously reported data, NPR participants strongly endorsed the negative impacts that alcohol and drugs were having on their lives at the time of enrollment. (Chart 22)



Service Utilization

Approximately 48% of the current year NRP participants had at least one detox episode in the 12 months prior to enrollment. This rate is somewhat more than the all years' data, but not significantly so. (Table 34)

Slightly over one-third of the NRP participants reported at least one outpatient episode of care prior to the current enrollment. This is somewhat less than the all years' data, but again not significant. (Table 35)

**Table 34. Detoxification Episodes
NRP
(In Percent)**

	2016	All Years
None	62.0	66.6
One Time	24.0	20.2
Two Times	6.0	5.4
Three Times	6.0	4.1
More than Three Times	2.0	3.7

**Table 35. Outpatient Episodes
NRP
(In Percent)**

	2016	All Years
None	72.6	69.9
One Time	17.7	20.5
Two Times	7.8	6.1
Three Times	0.0	1.7
More than Three Times	2.0	1.9

Approximately 59% of the current sample and 52.2% of the all years NRP sample reported having at least one episode of residential care prior to enrolling. (Table 36)

Table 36. Residential A&D Episodes NRP (In Percent)		
	2016	All Years
None	41.2	52.2
One Time	35.3	27.9
Two Times	17.7	12.1
Three Times	2.0	3.0
More than Three Times	3.9	4.8

Hospitalizations for substance use related conditions were prevalent in the NRP group with approximately 37% having at least one episode of care for the current sample, while one-third of the all years sample reported at least one episode of care. (Table 37)

Table 37. Hospitalizations A&D Related NRP (In Percent)		
	2016	All Years
None	62.8	66.7
One Time	21.6	19.3
Two Times	11.8	6.2
Three Times	3.9	4.1
More than Three Times	0.0	3.7

Somewhat fewer of the current NRP participants indicated seeing a therapist or counselor than did the all years sample prior to enrollment. This year 64% reported seeing one and 61.3% overall. (Table 38)

Table 38. Therapist Visits NRP (In Percent)		
	2016	All Years
None	46.0	38.7
One to Five	28.0	25.7
Six to Ten	6.0	11.9
Eleven to Twenty	10.0	10.6
More than Twenty	10.0	13.0

The current year sample of NRP participants were less likely to report hospitalizations for physical problems not related to substance use than the all years' data. They were also less likely to report emergency room visits and hospitalization for mental health problems. (Table 39)

	Never		Once		Twice		Thrice		> Thrice	
	All		All		All		All		All	
	2016	Years	2016	Years	2016	Years	2016	Years	2016	Years
Hospitalization (Physical Problem)	86.3	81.9	11.8	12.3	2.0	3.4	0.0	0.4	0.0	2.1
Emergency Room	66.7	62.8	17.7	20.5	13.7	8.9	2.0	3.5	0.0	4.3
Hospitalization (Mental Problem)	94.1	91.6	3.9	6.3	2.0	0.7	0.0	0.7	0.0	0.6

Participation in recovery oriented activities prior to enrollment were endorsed by a majority of NRP participants, except for the participation of spouses or significant others attendance in both the current and all years' data. (Table 40)

	> 3 / Week		2 to 3 / Week		1 / Week		1 / Month		< 1 / Month	
	All		All		All		All		All	
	2016	Years	2016	Years	2016	Years	2016	Years	2016	Years
Attend AA/NA	16.0	14.7	18.0	17.1	20.0	16.6	14.0	6.3	32.0	45.3
Contact Sponsor	8.0	8.3	10.0	9.9	24.0	15.9	6.0	4.6	52.0	61.3
Spouse/SO Attend Mutual Help	5.9	2.9	3.9	2.3	2.0	5.8	7.8	2.9	80.4	86.1
Prayer & Meditation	29.4	29.4	11.8	14.0	17.7	14.7	9.8	7.5	31.4	34.3

This year only two NRP participants reported having lived in a halfway house during the preceding 12 month for a total of 19 since the introduction of the program. Eleven reported living in a Sober House at some point in the preceding 12 months. (Tables 41 and 42)

	n	mean	sd
2016	2	76.0	46.0
All Years	19	73.3	64.3

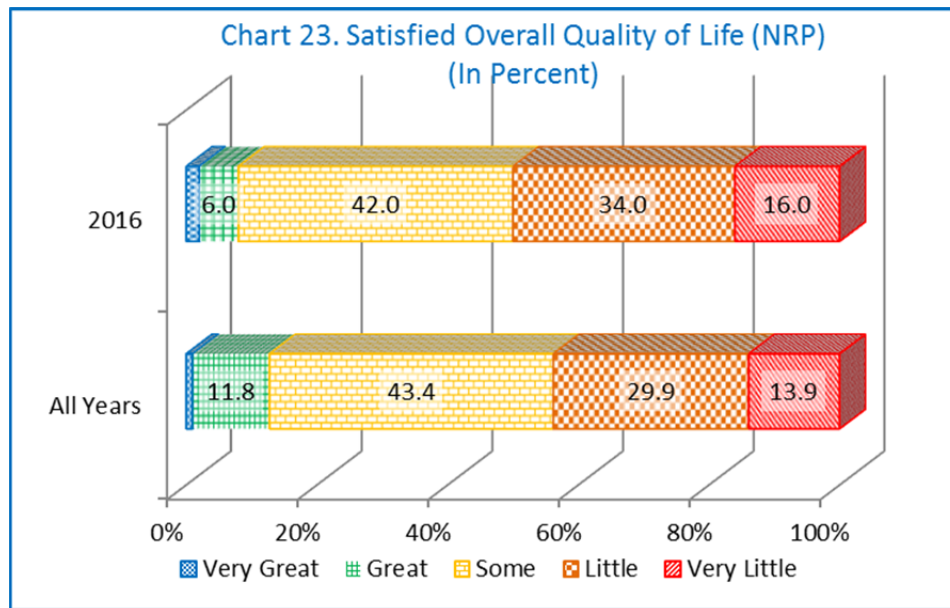
	n	mean	sd
2016	11	162.6	97.3
All Years	73	113.5	107.8

For the current year, there were fewer incidences reported related to involvement with the criminal justice system than for the overall data except for arrests for possession. (Table 43)

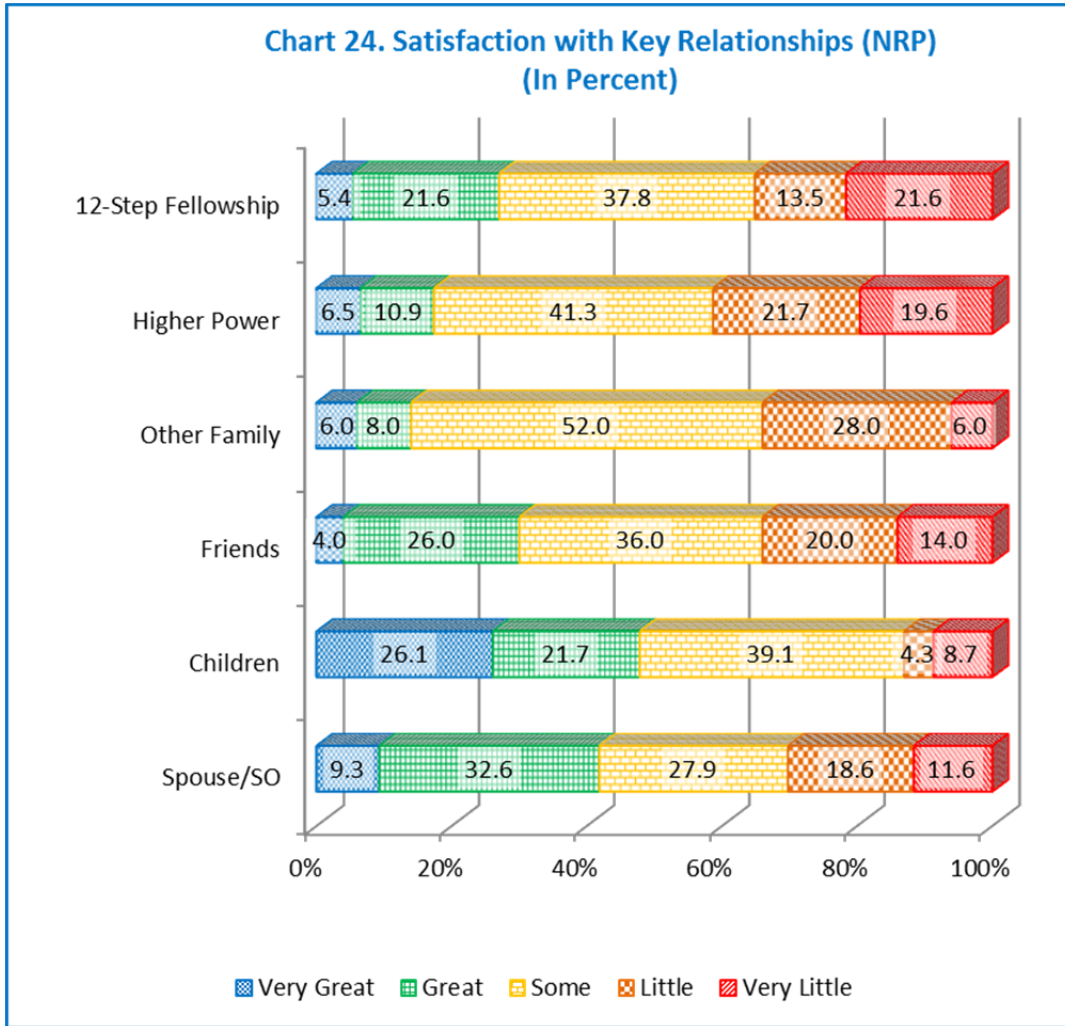
	Never		Once		Twice		Thrice		> Thrice	
	2016	All Years	2016	All Years	2016	All Years	2016	All Years	2016	All Years
Driving While Intoxicated	78.4	71.0	19.6	23.1	2.0	4.3	0.0	1.1	0.0	0.6
Arrested A/D Related Crime	86.3	82.7	5.9	12.1	7.8	3.0	0.0	0.9	0.0	1.3
Arrested for Possession	92.2	93.1	5.9	5.8	2.0	0.7	0.0	0.2	0.0	0.2
Arrested for Other Offenses	100.0	94.2	0.0	4.1	0.0	1.1	0.0	0.4	0.0	0.2
Incarcerated	78.4	73.2	9.8	19.4	9.8	5.8	0.0	0.6	2.0	1.1

Baseline Satisfaction with Key Recovery Supports

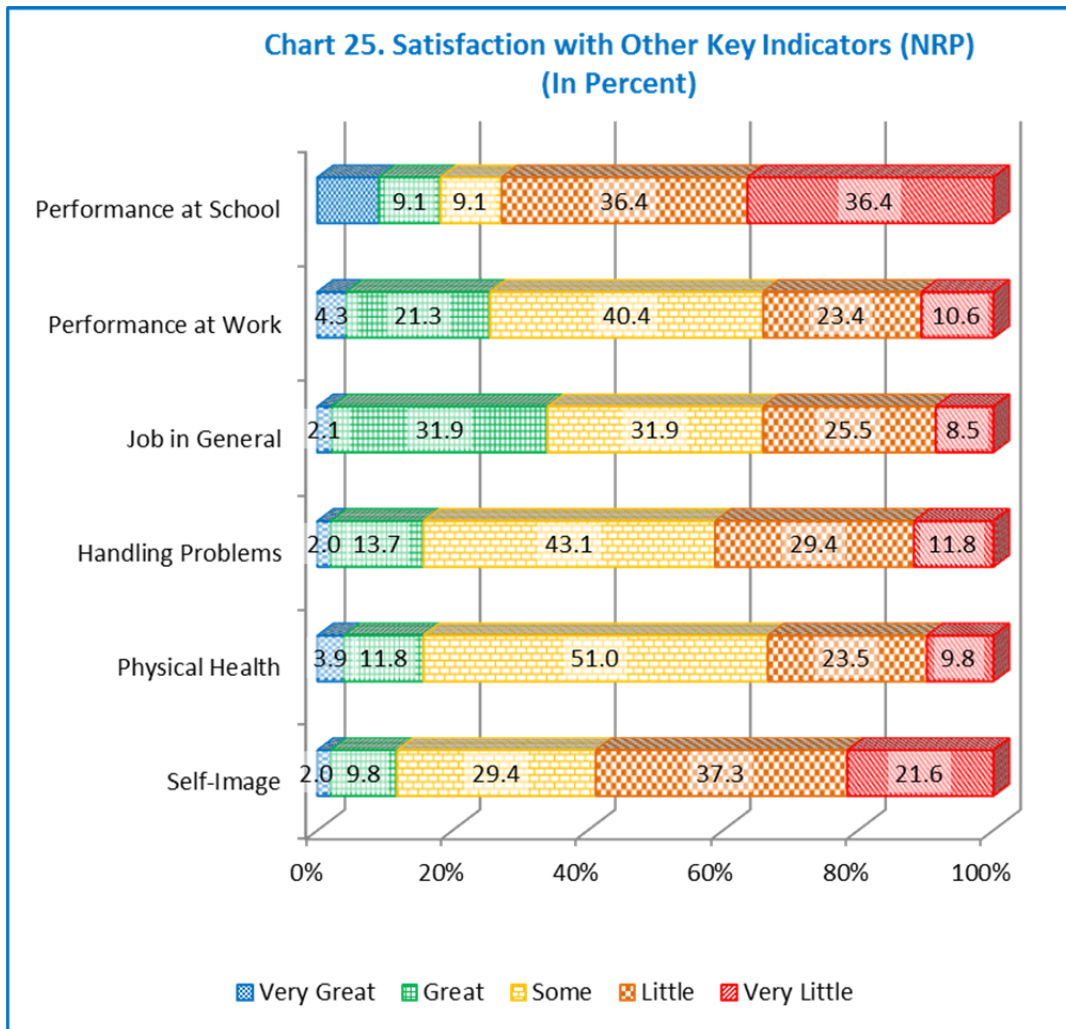
Satisfaction with their overall quality of life remained quite low for the current year as well as for all years. (Chart 23)



NRP participants continued to report relatively low levels of satisfaction overall with key relationships including spouse/SO, friend, other family, Higher Power, and mutual help support groups. Relationship with children continued to be reported more positively than other key relationships, but still remained low. (Chart 24)



NRP participants this year also continued to report low satisfaction with all of the other key quality of life indicators. (It should be noted that very few of the participants responded to the satisfaction with school question.) (Chart 25)

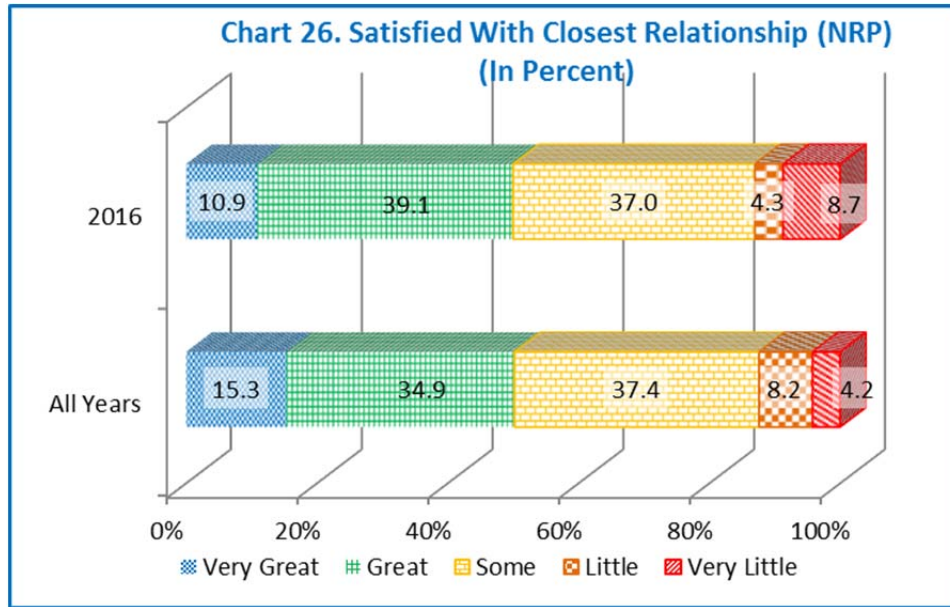


A spouse or significant other continued to be the most frequently used support person, but by a narrow margin across all years' data. As with other markers, there were some fluctuations in the distributions this year, but nothing that would suggest any trends.

(Table 44)

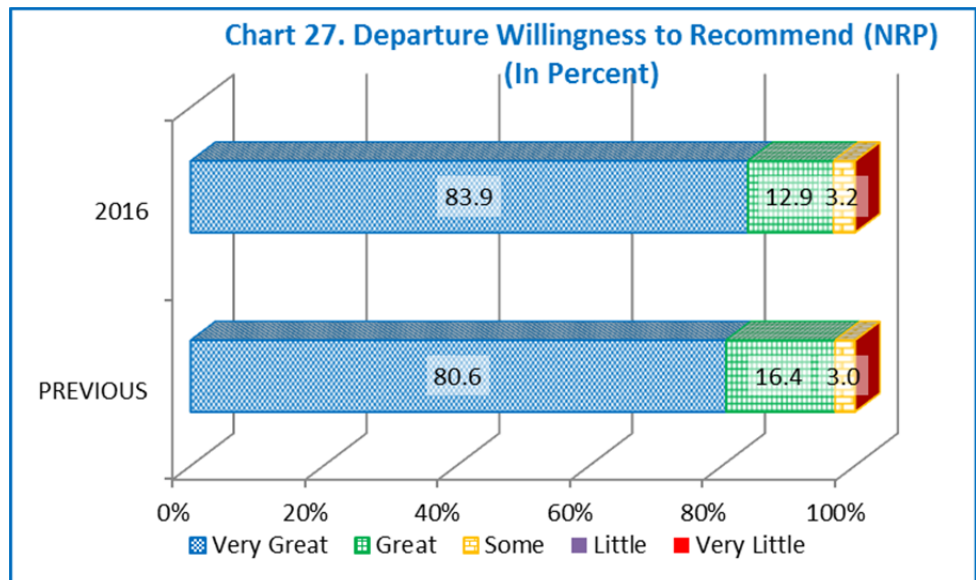
	2016	All Years
Spouse/Significant Other	32.5	26.7
Friend	20.5	25.0
Counselor	12.1	11.5
Did not Talk to Anyone	8.4	9.3
Other	4.8	2.5
Parent	7.2	13.1
Child	0.0	1.3
Priest, Minister, Rabbi	2.4	0.9
12-Step Sponsor	12.1	9.7

Satisfaction with this key relationship was only moderate and has remained relatively constant over the past years. (Chart 26)



NRP Satisfaction at Time of Completion

At the time of completing the NRP, participants remained extremely positive regarding their willingness to recommend the program to others,

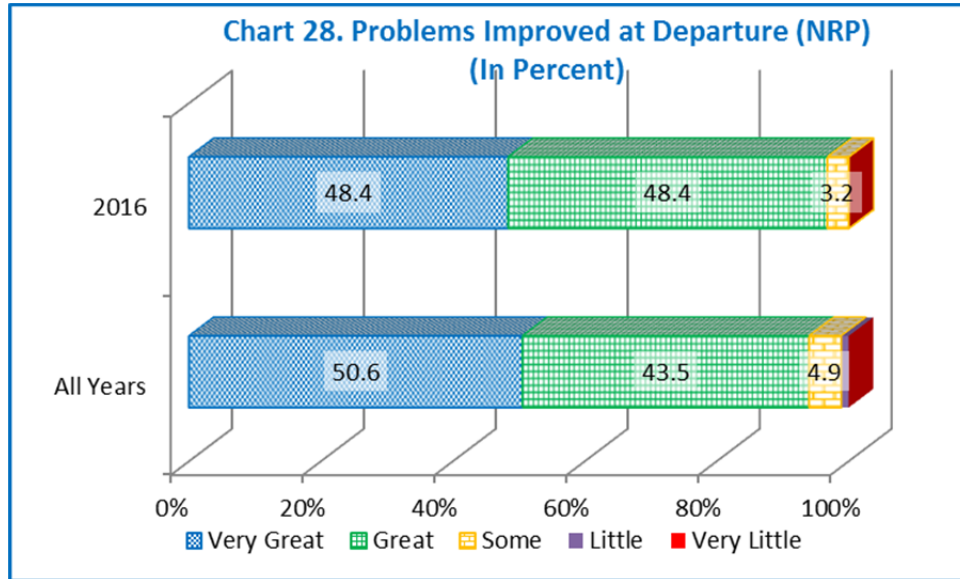


with 96.8% of the current year sample endorsing their willingness to recommend to a “very great” or “great” extent. This high level of satisfaction has been evident since the program

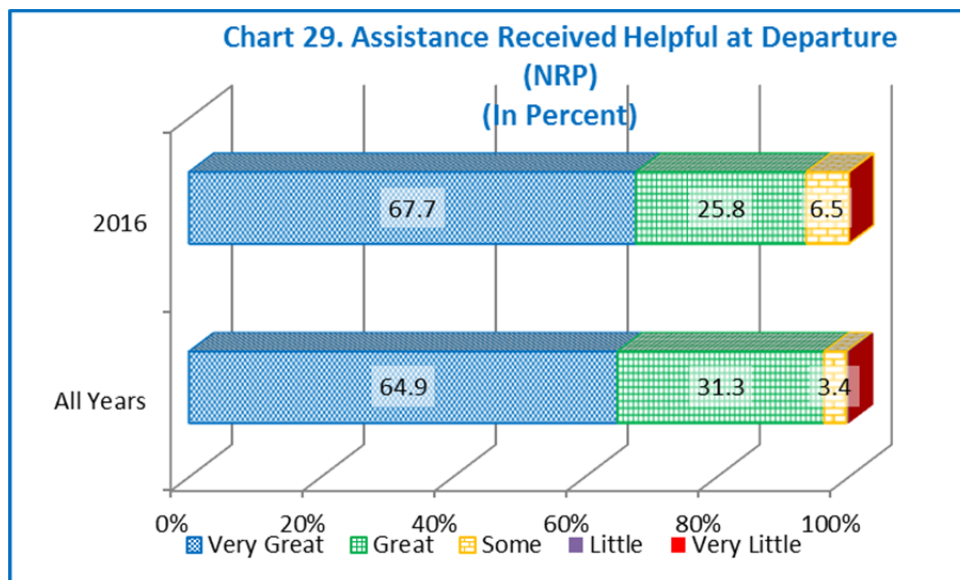
started. (Chart 27)

Participants also strongly endorsed the key marker regarding improvement of the problems that brought them to The Retreat with 96.8% positive endorsement of improvement.

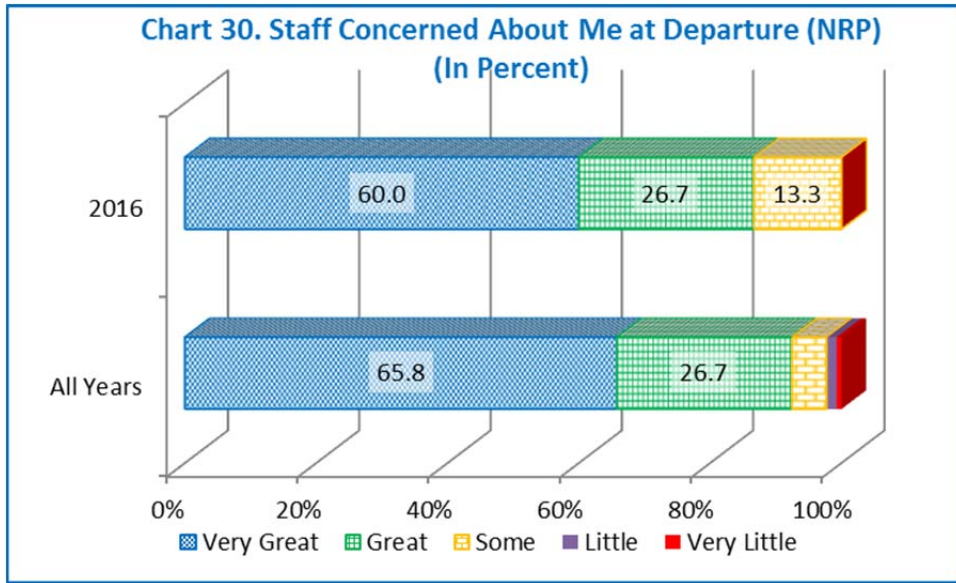
(Chart 28)



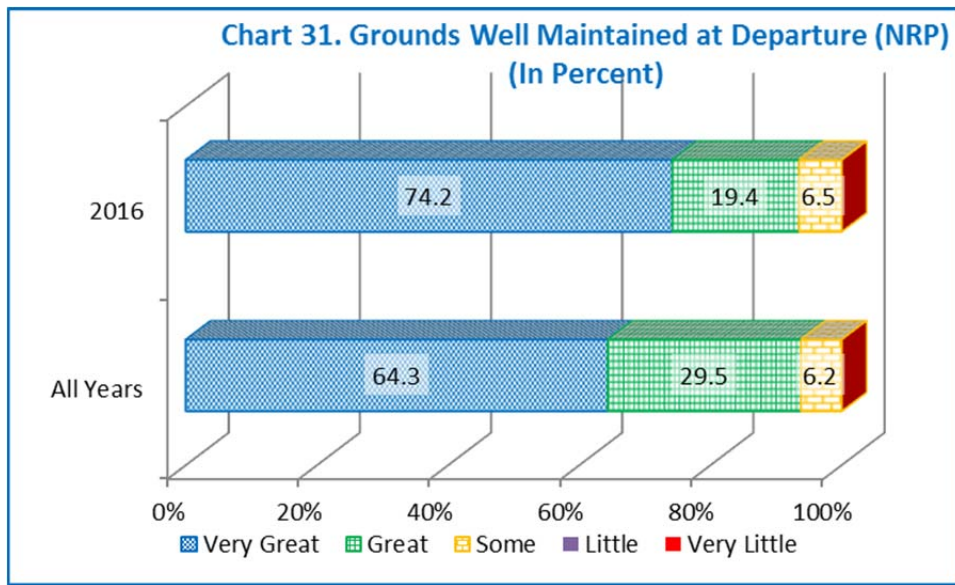
Subsequently, participants were also very positive with a 93.5 % endorsement that the assistance received from the NRP program was helpful. (Chart 29)



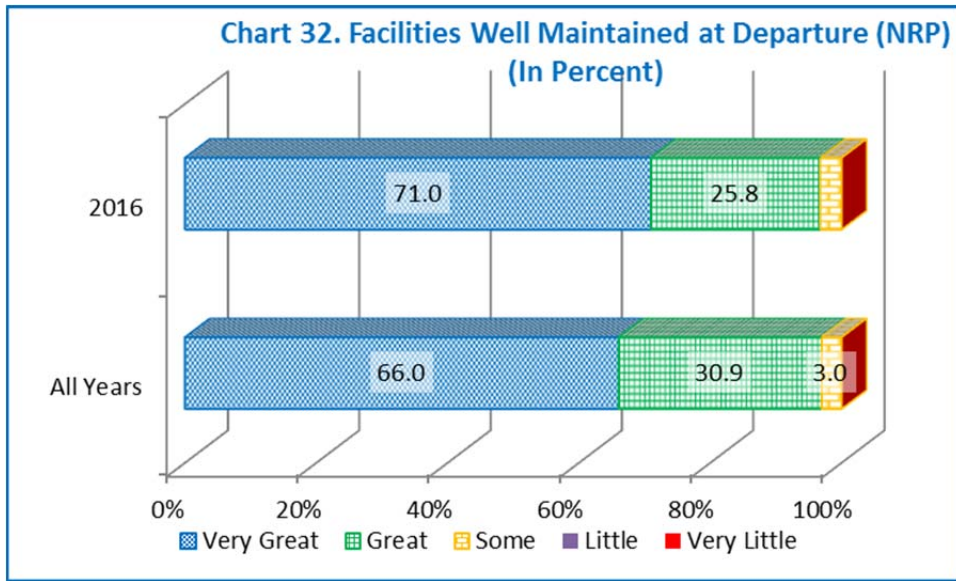
Although remaining positive with 86.7% positive endorsement regarding their perception that staff were concerned about them personally this critical marker did dip from the all years' data somewhat. (Chart 30)



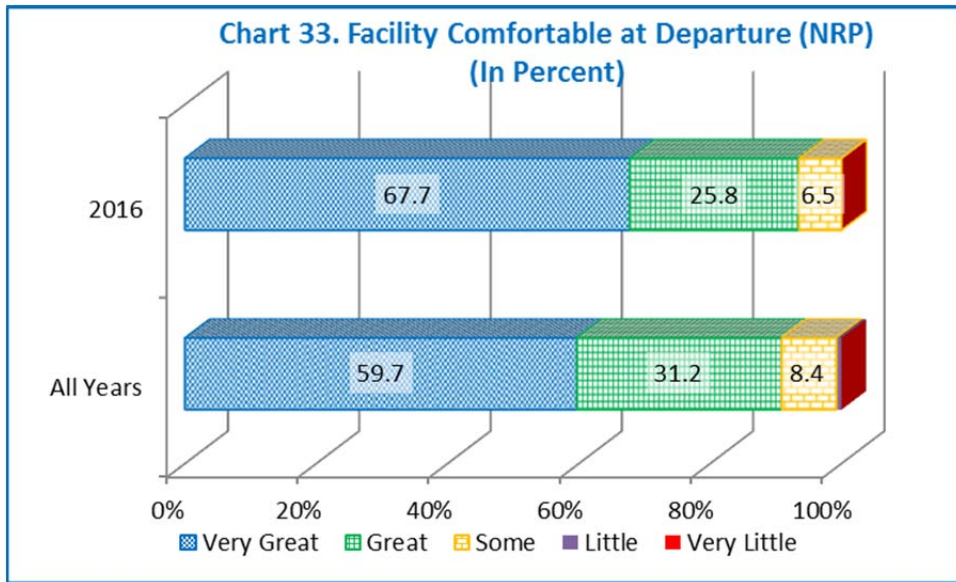
NRP participants continue to positively endorse the maintenance of the campus grounds with a very strong 93.6% level of positive endorsement. (Chart 31)

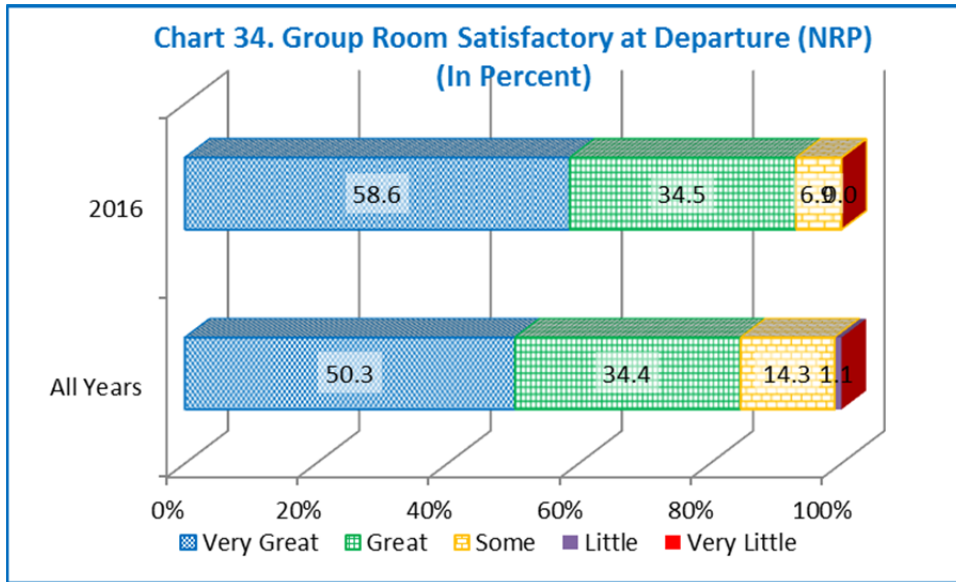


Similarly, they also rated their level of satisfaction with the maintenance of the building and other facilities on the campus with a positive endorsement of 96.8%. (Chart 32)



Comfortableness of the facility and classrooms were also rated very positively as well with both markers seeing improvement over previous years. (Charts 33 and 34)





The NRP participants reported moderate levels of improvement in key relationship at

the time of

departure

including spouse,

children, friends,

and 12-step

activities for

example. The

areas with the

stronger

endorsement of

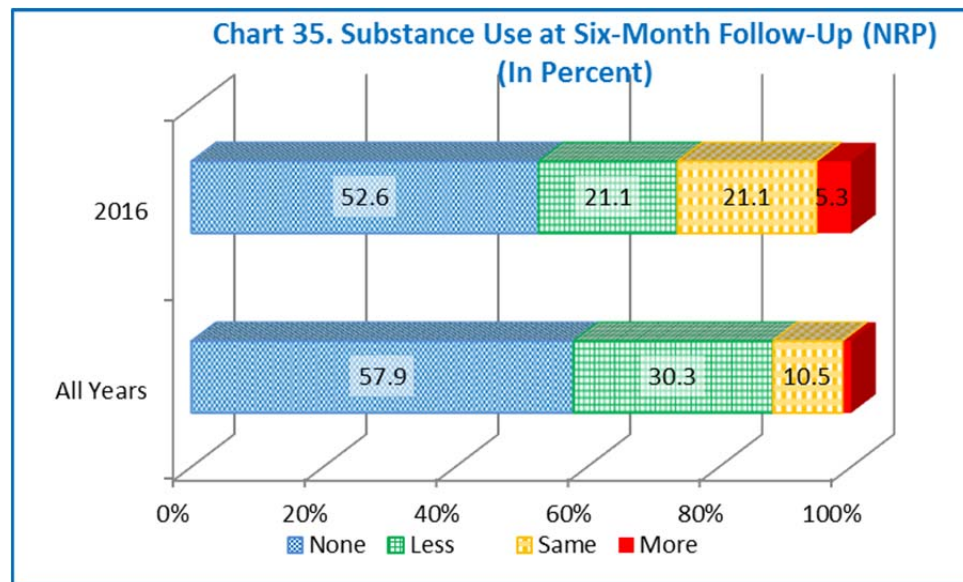
	Improved	Same	Worse
Relationship with Spouse/SO	64.7	35.3	0.0
Relationship with Children	81.3	18.8	0.0
Relationship with Friends	63.3	33.3	3.3
Relationship with Other Family	66.7	30.0	3.3
Higher Power	66.7	30.0	3.3
AA or 12-Step Fellowship	67.7	25.8	6.5
Self-image	51.6	45.2	3.2
Physical Health	58.1	35.5	6.5
Ability to Effectively Handle Problems	74.2	25.8	0.0
Overall Quality of Life	77.4	22.6	0.0
Issues Causing Problems	96.8	3.2	0.0

improvement were with their ability to handle problems and the overall quality of life. The

strongest (96.8%) was the relief of issues that caused them to enroll. (Table 45)

NRP Six-Month Follow-up

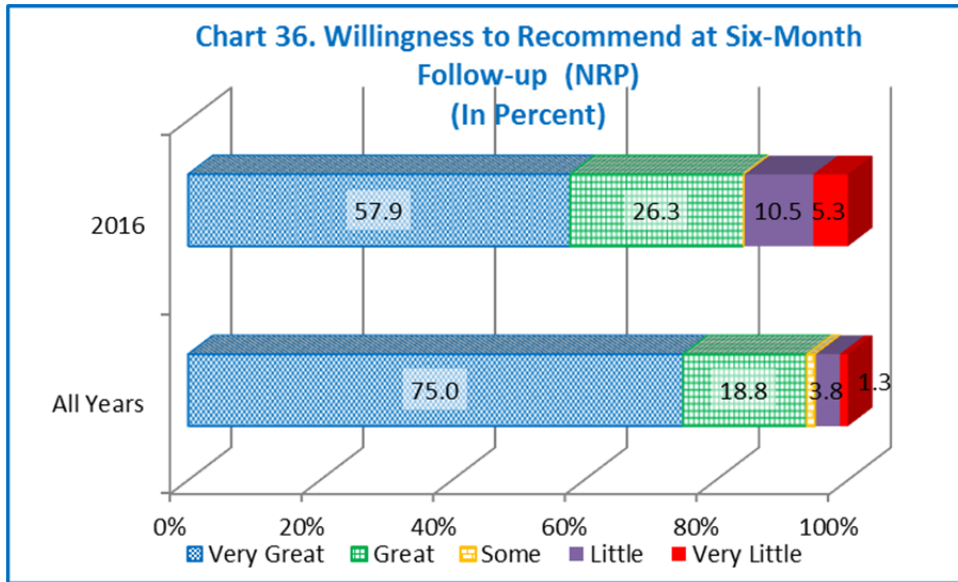
At six-month post departure, approximately 52.6% of the current year sample reported no use of substances, while 21.1% reported less and same each, and only 5.3% reported using more than before enrollment. All year data was somewhat even more positive. (Chart 35)



For those who used, alcohol (42.1%) was the most frequently noted substance followed distantly by opiates and sedatives.

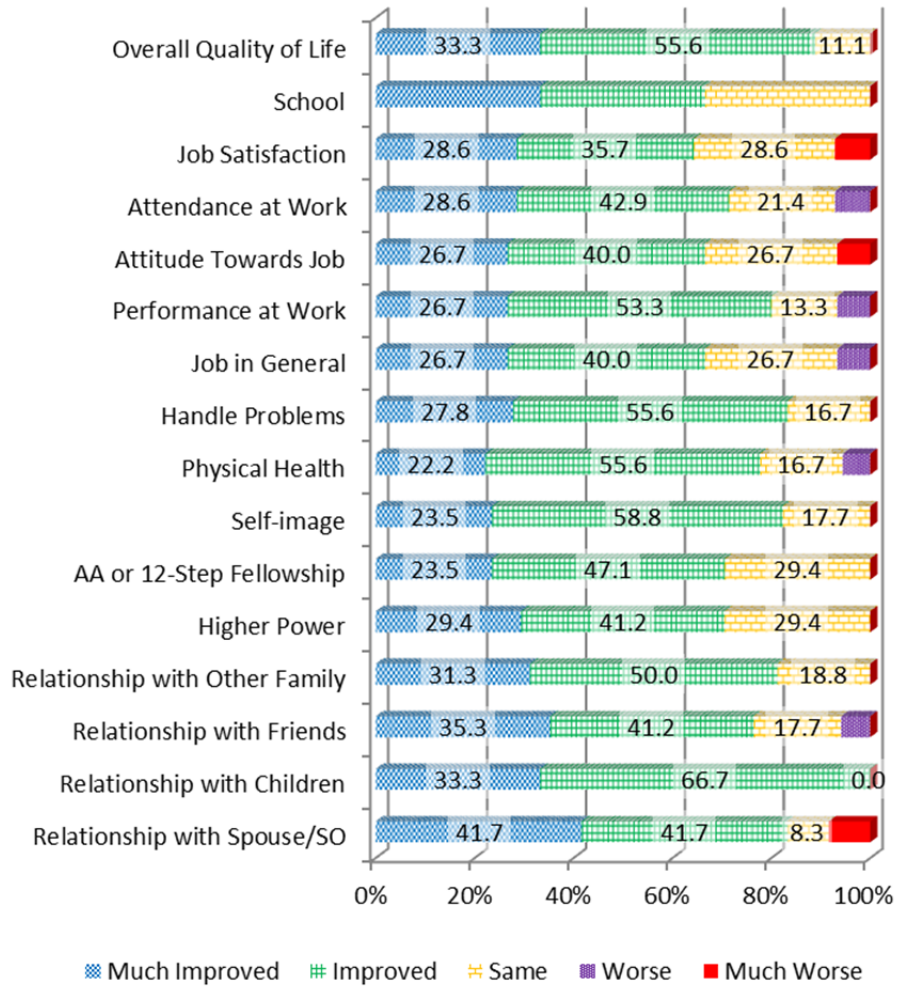
Again this year there were no statistically significant changes in the service utilization indicators, due mainly to the small number of individuals reporting service utilization prior to the program and due to the small sample size. Nonetheless, statistically significant improvement ($p < .01$) was seen in the all years' data for attendance at fellowship meetings, contact with a sponsor, practice of meditation and prayer.

Participant satisfaction at six months dipped to 84.2% positive for the current sample but remained strong with the all years' data at 93.8%. (Chart 36)



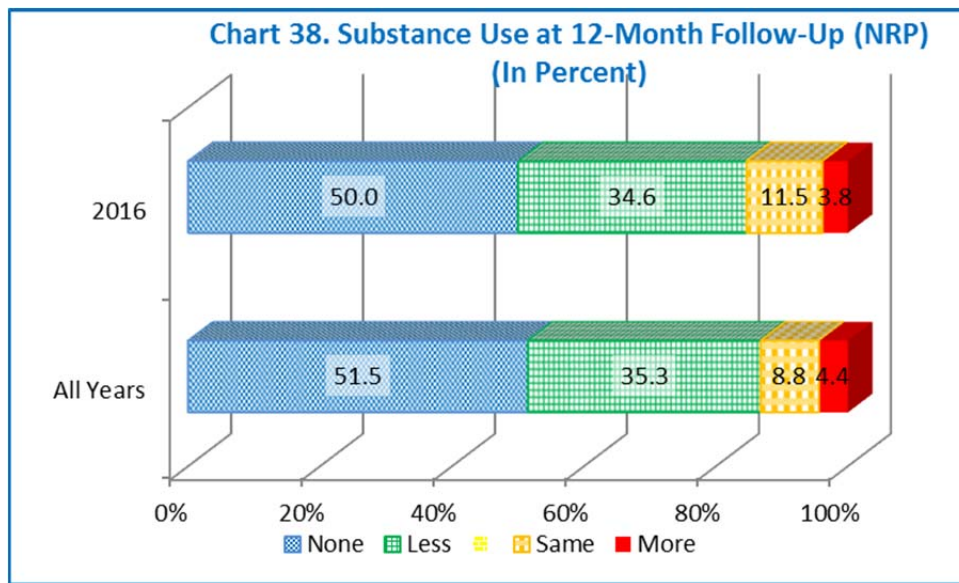
NRP participants reported improvement in nearly all of the key recovery indicators. especially notable were the areas of overall quality of life (much improved or improved), relationship with children, relationship with a Higher Power, physical health, and self-image. (Chart 37)

**Chart 37. Improvement in Key Indicators
Six-Months (NRP)
(In Percent)**



Twelve-Month NRP Follow-up

This year, approximately 50.0% of the 12-month sample reported abstinence since enrolling in the program and another 34.6% reported using, but using less than before registration. This was statistically similar to the all years' data. (Chart 38)

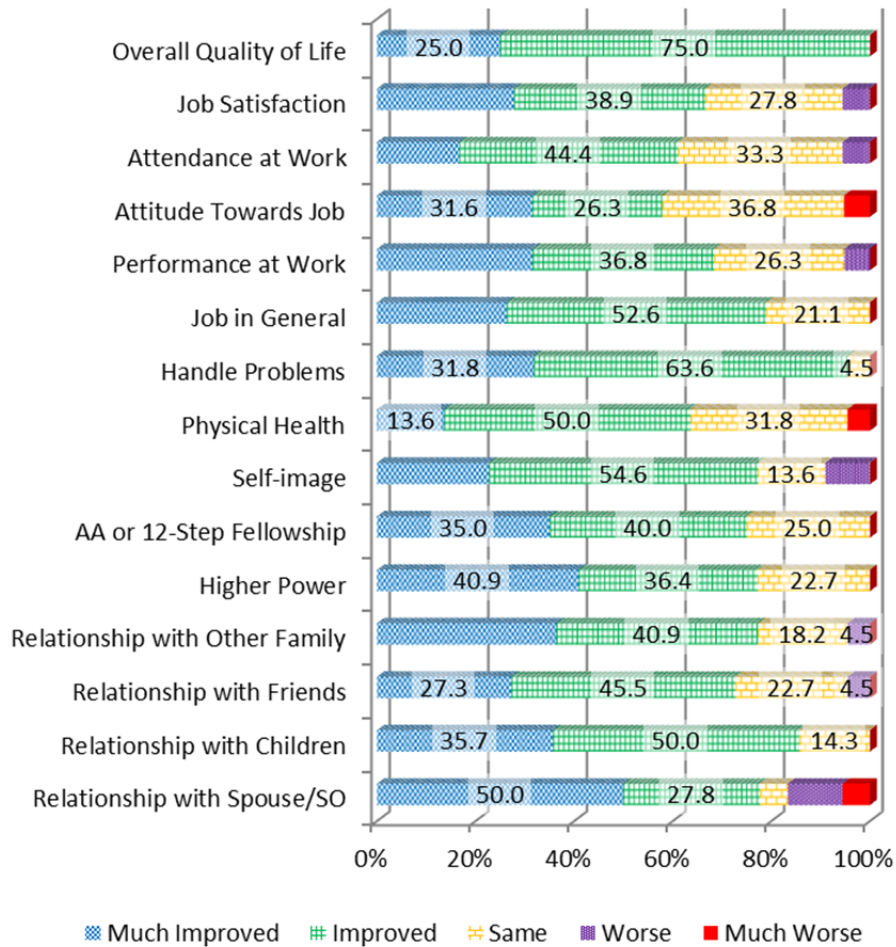


Of those who reported using in the current sample, 35.7% reported using once and then remaining abstinent and another 14.3% reported using more than once but having been abstinent for the past 60 days prior to the survey.

As with all samples across all years, the primary substance was alcohol (44.4%) and a similar distribution indicated no one drug preference.

At 12-months post departure from the NRP, participants in the 12 month follow-up reported their overall quality of life improved (100% much improved and improved) and their relationship with their spouse/so improved 77.8%. (Chart 39.)

**Chart 39. Improvement in Key Indicators
12-Months (NRP) Current Year Sample
(In Percent)**



This is the first year there has been sufficient data with which to conduct an ANOVA for the key service utilization for the NRP. As can be seen in the following table, statistically significant improvements were found in only two areas as noted in the accompanying table. The reason for not demonstrating more significant improvement was due to the relatively high “scores” given on the rating scale at registration leaving less opportunity for numerical improvement across the sample. (Table 46)

Table 46. Key Service Utilization at 12 Month Follow-up NRP (ANOVA)	
	All Years
Detox Center	
Outpatient A&D	
Inpatient A&D	
Hospitalization A&D	
Attend Fellowship Meetings	
Contact Sponsor	p < .01
Spouse/SO Attend	
Fellowship Service Work	
Prayer/Meditation	p < .01
Sponsored Someone	
Hospitalization Other	
ER Visits	
Hospitalization MH	
Non-Res/Outpatient Visits	
Arrests (Any Type)	
Incarceration	
Work/Employment Issues	
Been Promoted	
Started New Job	

Non-Residential Older Adult Program

Demographics

The sample sizes for the Non-Residential Older Adult Program (NREP) continued to be relatively small with 36 reported registrations this year.

The average age of participants in the NREP for the current year was 65.9, slightly older than the all years' data. There were no statistical difference between current year and all years' gender mix nor average ages (Table 47), and participants continued to be predominantly Caucasian. (Table 48)

	n	mean	sd
2016			
All	36	65.9	5.7
Males	14	66.8	4.0
Females	22	65.4	6.4
All Years			
All	167	64.9	5.5
Males	79	65.3	5.2
Females	88	64.7	5.7

	2016	All Years
Caucasian	100	96.5
Native American	0	0
Black/African American	0	0
Latino	0	0
Asian	0	0.5
Other/Not Reported	0	3.0

	2016	All Years
Married	69.2	57.0
Single	15.4	7.0
Divorced	15.4	22.0
Separated	0.0	3.0
Widowed	0.0	7.0
Living as Married	0.0	4.0

	2016	All Years
Full-time	7.7	9.1
Part-time	7.7	13.1
Irregular	0.0	3.0
Homemaker	7.7	13.1
Student	0.0	3.0
Retired	76.9	49.5
Unemployed	0.0	9.1

For the current year, more NREP participants reported being married than in the all years' data but the difference was not statistically significant. (Table 49)

This year most (76.9%) NREP participants reported being retired than in the all years' data, but again, due to the relatively small sample size, differences were not statistically significant. (Table 50)

	2016	All Years
Not Completed HS Graduate	0.0	0.0
HS Graduate	0.0	3.0
Some College/Trade School	30.8	39.4
College Graduate	23.1	24.2
Post-graduate Course Work	7.7	8.1
Post-graduate Degree	38.5	25.3

As previously reported, the education levels of the NREP participants were generally higher than those in the other programs with 38.5% of the current sample reporting a post-graduate degree. (Table 51)

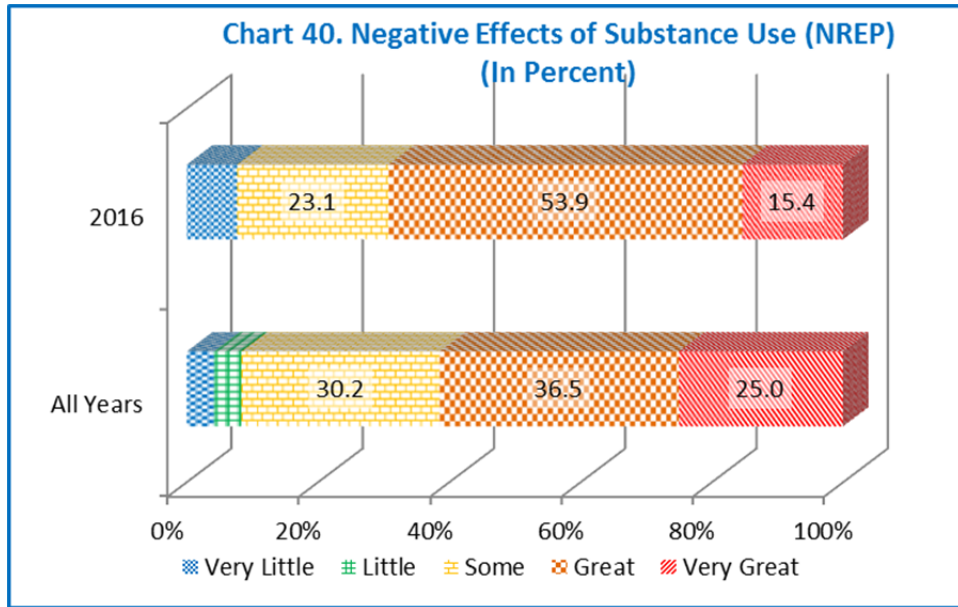
Nearly two-thirds of the current NREP sample and three-quarters of the all years sample reported household incomes of at least \$50,000.

Table 52. Substances Used Prior to Registration NREP (In Percent)			
		2016	All Years
Alcohol	1	100	96.1
Cocaine (Powder)	2		3.9
Crack	3		1.0
Hallucinogens	4		2.9
Heroin	5		2.0
Other Opiates	6		5.9
Inhalants	7		1.0
Marijuana/Hash	8		11.8
Meth/amphetamines	9		2.0
Other Stimulants	10		1.0
Sedatives	11		5.9
Prescription	12		19.6
Illegal Rx	13		2.9
Over the Counter	14		2.9
Other Substances	15		1.0

Alcohol remained the most frequently reported substance used for both the current year and all years' sample. Approximately 19.6% of the all years sample reported using prescription drugs while none of the current year sample so reported – which was somewhat a surprise. (Table 52)

The reported severity regarding the negative effects of substance use prior to enrollment was somewhat higher this year than all previous years but the difference

was not significant. (Chart 40)



Service Utilization NREP

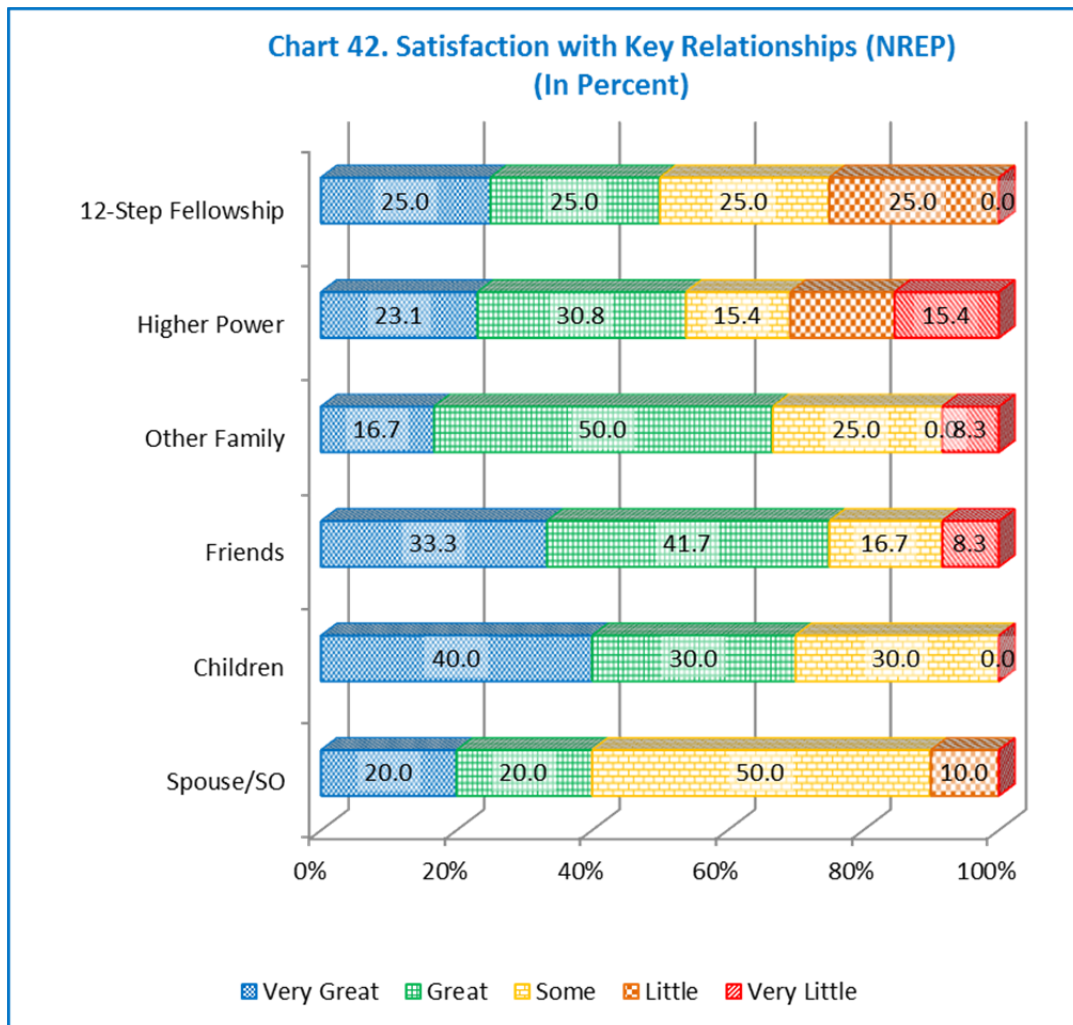
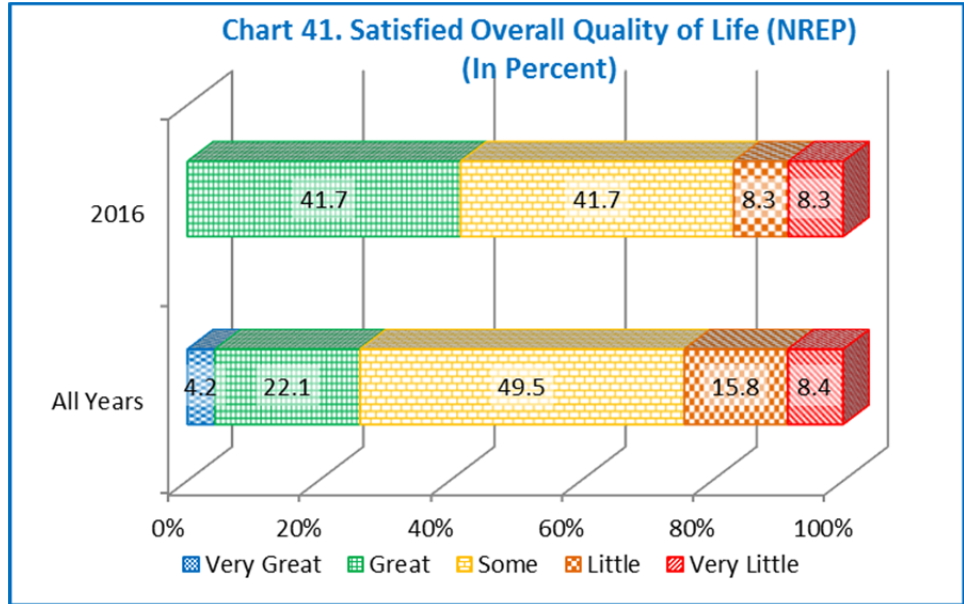
As discussed in earlier reports, due to the small sample size, service utilization was infrequently reported at the time of enrollment, compounded by the small number of surveys received.

Nonetheless, 52.1% reported attending mutual support groups prior to enrollment at least one time per week and another 6.3% about once a month. Additionally, approximately 80.8% reported the practices of meditation and/or prayer at least one time per week or more, with 44.3% reporting more the three times per week.

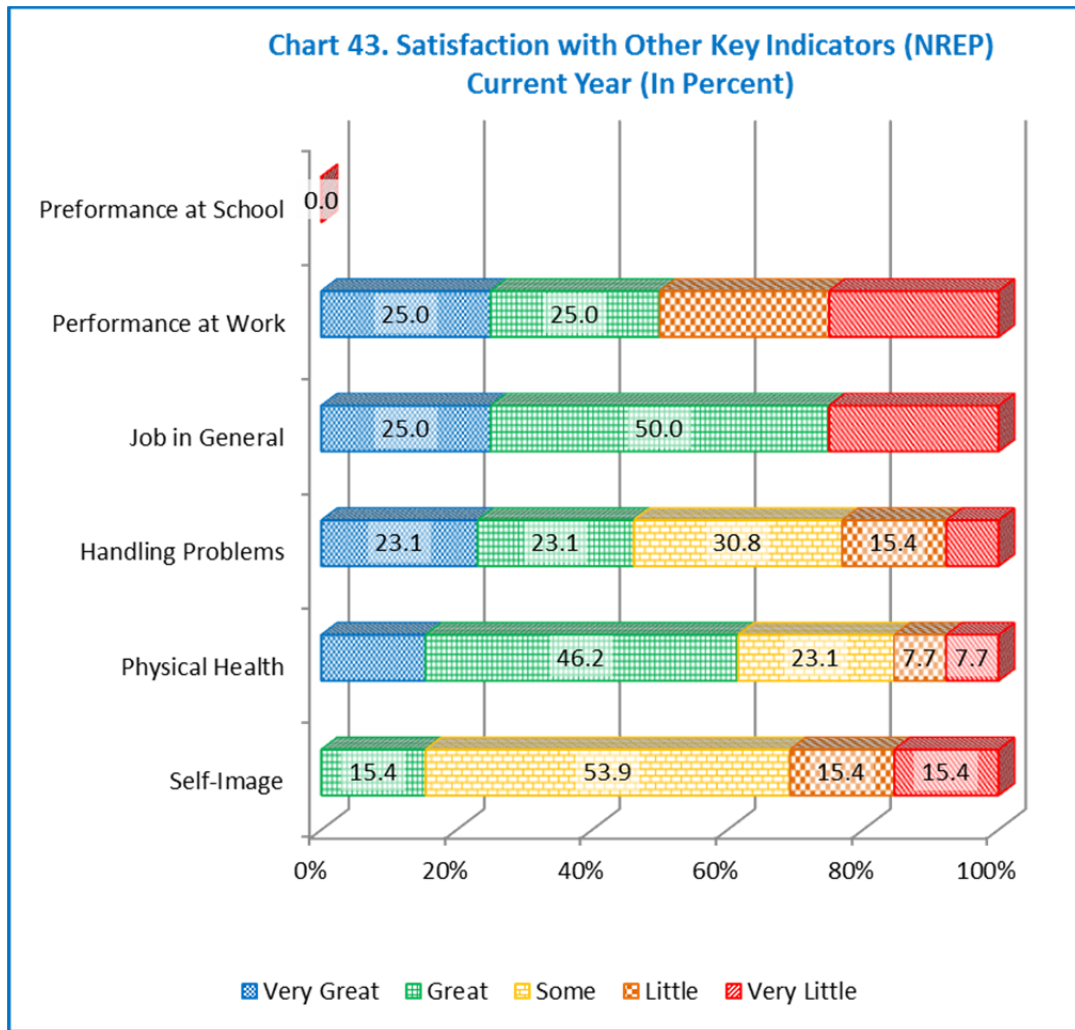
Baseline Satisfaction with Key Recovery Supports NREP

The frequency distributions regarding the participants’ report of overall satisfaction with their quality of life continue to demonstrate variances across years, due in part to the small sample sizes and reporting by percentages. The current year sample was somewhat

more satisfied with their overall quality of life, with 41.7% indicating to a great extent (none to a very great extent). (Chart 41)



The current year data regarding satisfaction key relationships and key recovery indicators continued to demonstrate the fluctuations across years. Interestingly, their satisfaction with friends was more positive than any other social support. (Chart 42)

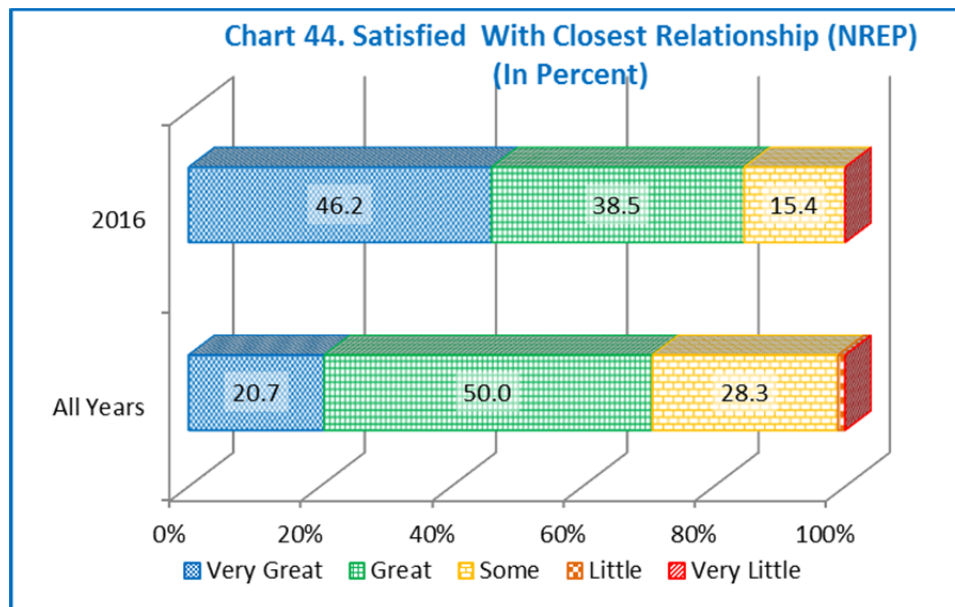


Interestingly, NREP participants' satisfaction with their self-image was quite low with only 15.4% indicating to a great extent. The pattern of distributions was similar to the all years' data. (Chart 43)

This year's NREP participants provided similar responses as seen for all previous years with some shifting from spouse/significant other to friend and sponsor. (Table 53)

This year, participants were somewhat more likely to demonstrate higher levels of satisfaction with this critical support relationship. (Chart 44)

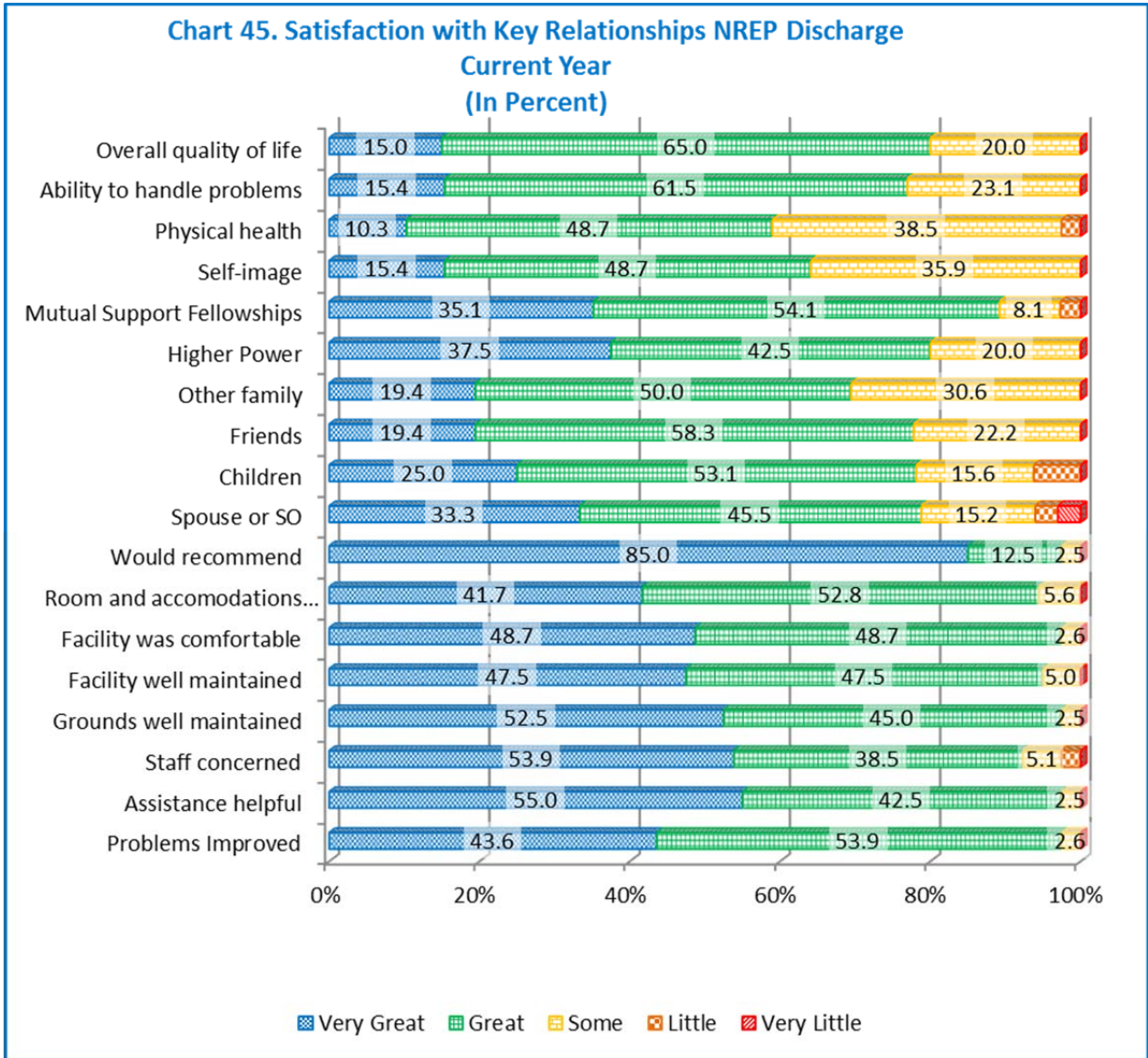
	2016	All Years
Friend	29.4	22.4
12-Step Sponsor	23.5	16.8
Spouse/Significant Other	17.7	26.1
Child	11.8	11.2
Counselor	5.9	10.6
Parent	5.9	3.1
Did not Talk to Anyone	0.0	3.7
Priest, Minister, Rabbi	0.0	1.2
Other	5.9	5.0



Satisfaction at Time of Completion of NREP

Willingness to recommend the program to others also remained very strong with 97.5% reporting endorsement to a very great and great extent. Over the life of the project endorsement remained very high at 97.1%. Other satisfaction markers remained well above

the 90% level for facilities, grounds, staff concern, helpfulness of staff and improvement of the problems that brought them to NREP. (Chart 45)



Six-Month NREP Follow-up

The current year six-month follow-up sample remained small and only the all years' data is reported in this section.

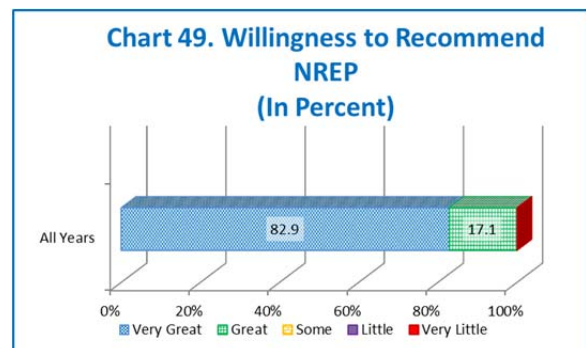
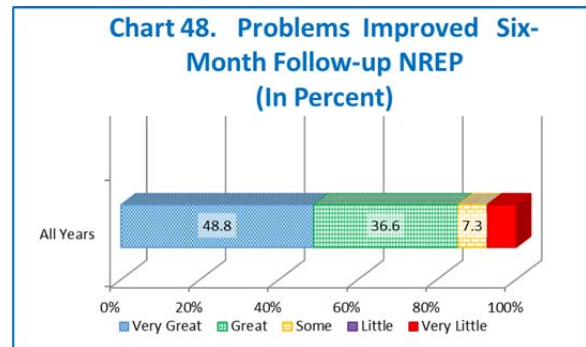
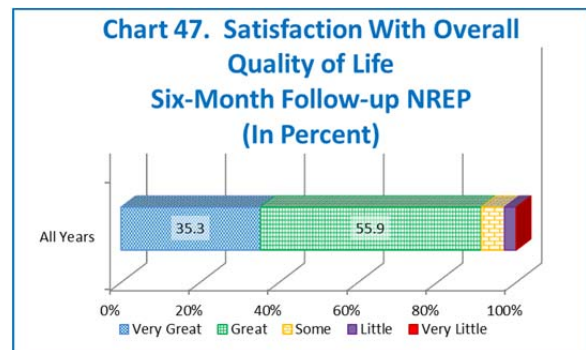
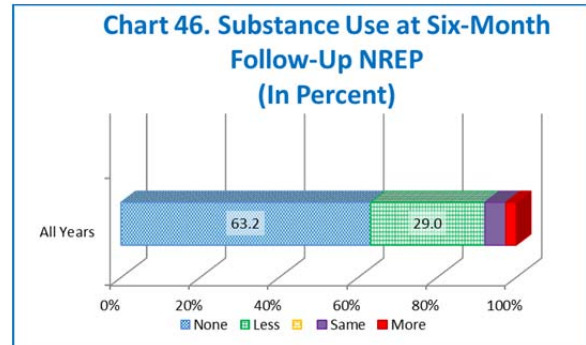
Of those participating in the six-month follow-up, 63.7% reported abstinence since completing NREP and another 29.0% reported using less than before enrollment. (Chart 46)

At six months, 35.3% reported very great satisfaction with their overall quality of life, while 55.9% reported great satisfaction. (Chart 47)

Nearly 85.4% of the NREP respondents reported that the problems that had brought them to the program had improved to a very great and great extent at six-month post completion of the program. (Chart 48)

Their willingness to recommend the NREP to others was also remained very strong with all of the respondents endorsing the question positively. (Chart 49)

There were no statistically significant changes in the reported utilization of resources from enrollment to six-months post completion. This was expected, as discussed above, due to the relatively small sample size and the very low utilization rates reported for services at enrollment. As well the relatively high utilization of mutual help groups and prayer/meditation prior to enrollment precluded the



opportunity for reporting statistically significant improvement.

Twelve-Month NREP Follow-up

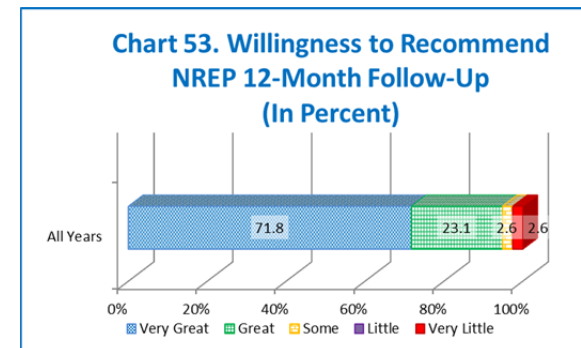
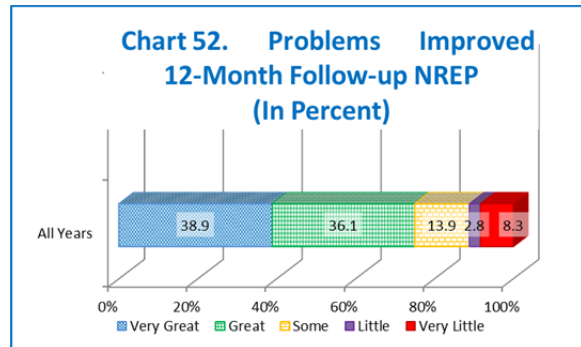
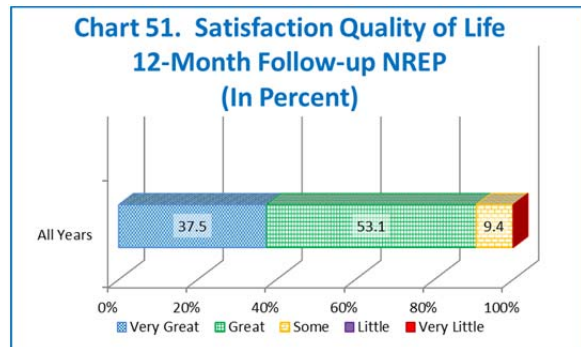
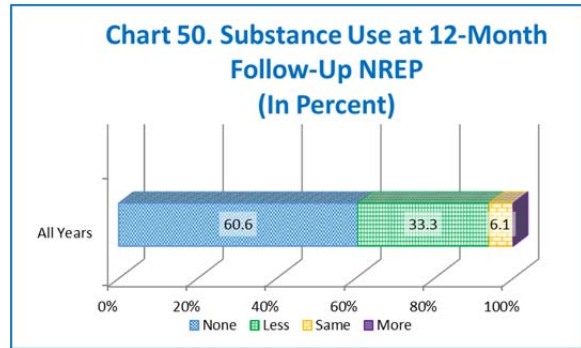
As with the six-month data for this program, due to the small sample size all previous years 12-month data has been combined for presentation purposes.

Approximately 60.6% reported abstinence since departing the NREP, 33.3% reported less use, and 6.1% reported using about the same as before enrolling. (Chart 50)

Satisfaction with the overall quality of their life remained good with 90.6% reporting positive satisfaction. (Chart 51)

Approximately 75% reported that the problems that had brought them to the NREP had improved to a very great and great extent, while 13.9% reported they had remained the same. (Chart 52)

At 12-months post completion 94.9% endorsed a willingness to recommend the NREP to others to a very great and great extent. It should be noted again that there is a tendency



for the willingness to recommend usually decreases in positive intensity the longer one has been away from a program. Nonetheless, this has remained strong for NREP. (Chart 53)

As with the six-month follow-up, the only utilization indicator that saw statistically significant improvement was attendance at mutual help groups.

Extended Stay Program

The average age of guests in the ESP was 41.3 years statistically the same as all years' data. This year females made up 58.1% of the sample but over all years was 53.3 years. There was no significant differences between the average ages in ESP and the residential program, and for this program the differences between ages of females and males was not significant, although females were significantly ($p < .05$) more likely to enroll in the ESP than the regular residential

	n	mean	sd
2016			
All	43	41.3	13.9
Males	18	41.3	15.0
Females	25	41.3	13.0
All Years			
All	90	40.2	13.6
Males	42	38.6	13.7
Females	48	41.7	13.2

program. (Table 54)

		2016	All Years
Caucasian	w	100	96.6
Black/African American	b		
Asian	a		
Latino	m		1.1
Native American	n		
Other/Not Reported	u		2.3

		2016	All Years
Married	1	14.3	19.3
Single	2	47.6	48.2
Divorced	3	26.2	25.3
Separated	4	4.8	3.6
Widowed	5	4.8	2.4
Living as Married	6	2.4	1.2

The Race/Ethnicity for ESP mirrored that of the other programs with 96.6% being White/Caucasian (Table 55), as did the marital status with the largest portion (46.7%) reporting being single (47.6%) this year. (Table 56)

Table 57. ESP Employment Status (In Percent)		
	2016	All Years
Full-time	26.2	20.2
Part-time	4.8	4.8
Irregular	9.5	11.9
Homemaker	2.4	3.6
Student	2.4	2.4
Retired	2.4	6.0
Unemployed	52.4	51.2

Table 58. ESP Education (In Percent)			
		2016	All Years
Not Completed HS Graduate		2.4	1.2
HS Graduate		7.1	6.0
Some College/Trade School		54.8	44.1
College Graduate		23.8	31.0
Post-graduate Course Work		2.4	4.8
Post-graduate Degree		9.5	13.1

The ESP program saw a greater portion of the guests reporting being unemployed (51.2%) at the time of registration than those in the residential program (39.7%) over the life of the evaluation. This group also had a tendency for a larger distribution of those working irregular hours as might be expected. (Table 57)

Those in the ESP also tended to report, on average over all years, similar educational levels as the regular residential guests. (Table 58)

The income ranges reported by ESP guests tended to have a greater distribution in the lower income ranges than the residential guests.

(Table 59)

Table 59. ESP Income Range (In Percent)		
	2016	All Years
(Thousands of Dollars)		
< 20	29.3	33.3
20 to 29.9	12.2	11.1
30 to 39.9	7.3	4.9
40 to 49.9	7.3	3.7
> 50	43.9	46.9

On the surface, employment markers at registration for the ESP guests tended to suggest the possibility that this group might be very slightly more successful with their

employment experience. Although this may be true, the relatively large distribution of those reported being unemployed might have influenced these distributions. The sample was fairly small compared to the overall residential sample this may have some effect also on the distributions within the employment markers. (Table 60)

	Never		Once		Twice		Thrice		> Thrice	
	2016	All Years	2016	All Years	2016	All Years	2016	All Years	2016	All Years
Filed Work Comp Claim	97.6	97.6	2.4	1.2	0.0	1.2	0.0	0.0	0.0	0.0
Fired From Job	64.3	64.6	23.8	20.7	9.5	12.2	2.4	2.4	0.0	0.0
On Job Accident	100.0	96.3	0.0	2.4	0.0	1.2	0.0	0.0	0.0	0.0
Filed Grievance	100.0	98.8	0.0	1.2	0.0	0.0	0.0	0.0	0.0	0.0
Formal Disciplinary Action	71.4	74.4	16.7	15.9	7.1	7.3	2.4	1.2	2.4	1.2
Promoted	54.8	68.3	26.2	19.5	7.1	4.9	2.4	2.4	9.5	4.9
Took a New Job	62.5	68.4	17.5	13.9	15.0	15.2	0.0	0.0	5.0	2.5

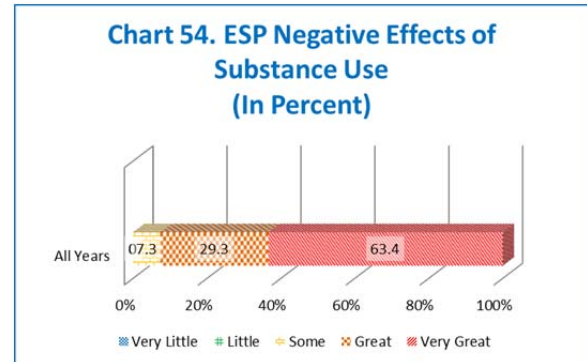
For the ESP group, alcohol was also noted as the most frequently used substance, follow by marijuana, prescription drugs, cocaine, heroin, other opiates, and methamphetamines. There does appear to be a tendency for ESP guests to report a higher frequency of drugs being used than other guest groups, but the length of time this program was operational was insufficient to clearly define trends. (Table 61)

Approximately 73.8% of the current ESP

	2016	All Years
Alcohol	97.6	95.2
Marijuana/Hash	38.1	40.5
Prescription	35.7	35.7
Cocaine (Powder)	28.6	29.8
Meth/amphetamines	28.6	26.2
Illegal Rx	26.2	26.2
Heroin	23.8	23.8
Other Opiates	23.8	26.2
Crack	16.7	19.1
Hallucinogens	14.3	14.3
Over the Counter	14.3	20.2
Sedatives	9.5	14.3
Other Stimulants	7.1	8.3
Inhalants	2.4	3.6
Other Substances	0.0	2.4

guests reported alcohol as the primary substance of choice followed distantly by heroin (11.9%), and other opiates (2.4%). Approximately 9.5% indicated no preference for one substance. (Table 61)

Their report of the extent of negative effects of substance use mirrors that of the residential guest at approximately 92.7% great and very great extent. (Chart 54)



The ESP guests over all years were more likely to report detox episodes than regular residential guests (70.29% compared to 52.9%) and more likely to report outpatient substance use treatment episodes (44.4% compared to 37.8%). (Tables 62 and 63)

	2016	All Years
None	38.1	29.8
One Time	28.6	32.1
Two Times	16.7	15.5
Three Times	4.8	9.5
More than Three Times	11.9	13.1

	2016	All Years
None	47.5	55.6
One Time	27.5	18.5
Two Times	7.5	11.1
Three Times	5.0	7.4
More than Three Times	12.5	7.4

They were also more likely to report prior residential treatment episodes in the past year (64.3% compared to 52.4%) although episodes of care at a general hospital for substance use related causes (52.5% compared to 53.4%) were very similar. (Tables 64 and 65)

	2016	All Years
None	35.7	31.3
One Time	19.1	20.5
Two Times	11.9	21.7
Three Times	11.9	12.1
More than Three Times	21.4	14.5

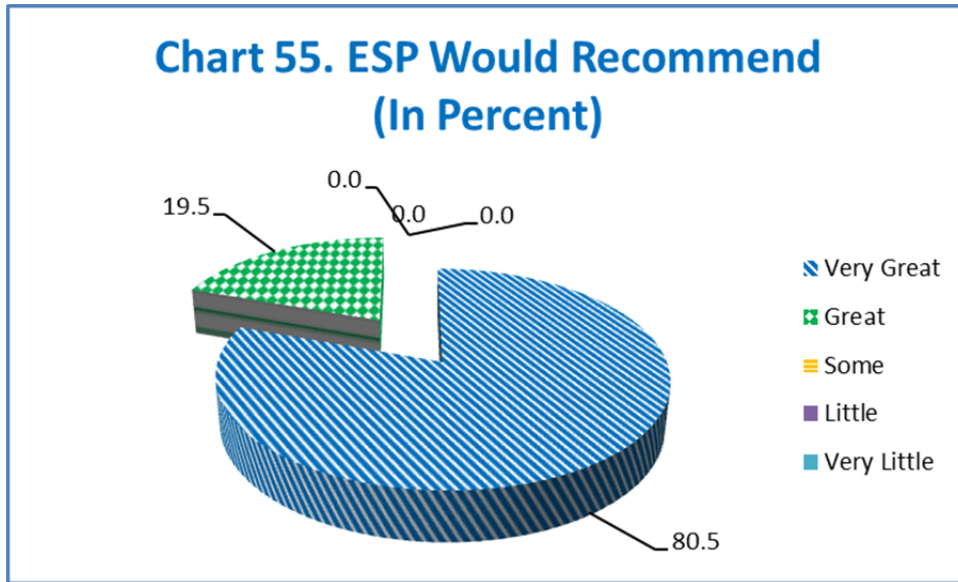
	2016	All Years
None	47.5	45.1
One Time	20.0	18.3
Two Times	12.5	15.9
Three Times	7.5	8.5
More than Three Times	12.5	12.2

Utilization of other, non-substance use related, medical care also was greater than the regular residential guests. For example, hospitalizations for medical problems we reported by 36.6% compared to 25.8%; emergency room visits 51.2% compared to 48.1%; and mental health related hospitalizations 19.5% compared to 15.6%. Engagements in the criminal justice system this year were not statistically dissimilar to those in the residential program. As reported previously, participation in mutual support groups and activities were only slightly less than regular residential guests.

This year, only two (4.8%) ESP guests reported attending a half-way house prior to registration and (26.2%) reported living in a sober house in the year prior.

Utilizing the available data from the evaluation it is clear that those guests participating in the ESP had higher severity issues than those in the regular residential program and more likely to benefit from the longer stay.

As with the other guests, those completing the ESP provided very strong endorsement (100% very great and great) of their willingness to refer other to the time of program completion. (Chart 55)



Sober Housing

In June 2006 the evaluation team was requested to undertake a retrospective look at the apparent efficacy of combining sober housing following the traditional residential program. The findings from that initial study clearly demonstrate that guests utilizing sober housing following their stay at The Retreat would be less likely to be successful at 12-month follow-up based on several factors. They were less likely to be married; less likely to be employed; and when employed, more likely to be making less money than those who did not utilize the sober housing; and finally, more likely to be using illegal substances.

Nonetheless, at 12-month follow-up their level of improvement in the critically key outcomes markers of substance use and overall quality of life were no different than those with more stable situations to return to following their stay at The Retreat (spouses, employment, and less likely use of illegal substances). With both groups demonstrating significant improvement in these areas, the evidence strongly suggested that the use of sober housing following a stay at The Retreat was very beneficial, especially for those who do not have an environment to return to that is conducive to recovery.

Each year since that initial study in 2006 has reinforced those findings. Due to the retirement of the evaluator in 2017, the most current retrospective data was not requested from The Retreat to identify those guests who were engaged in the sober housing which is usually done following the closing of the calendar year. A rerun of the all years' data combined reinforced the findings from the initial study as well as the consistency of the findings from the ensuing years in that those utilizing the sober housing were in a category of individuals with fewer sober living supports and subsequently more likely to fail at early recovery, but actually did as well as those with sober living supports at enrollment. It should be noted that this was not a controlled rigorous research study, but the correlational data findings were nonetheless very convincing.

Departure and Completion Statistics Current Year

The average length of stay (LOS) for the residential program completers was 28.5 days, essentially unchanged from the previous report. There was no significant difference between males and females. This year 28 guests reported as departing prior

	n	mean	sd
Completers			
All	43	45.4	18.1
Males	21	47.1	19.3
Females	22	43.7	16.6
Other		None	

to completion, up from 16 previously reported, with an

average LOS of only 9.05 days. The successful program completion rate was an extremely enviable rate of 94.1%. (Table 66)

	n	mean	sd
Completers			
All	449	28.5	5.0
Males	319	28.2	5.4
Females	129	29.3	3.9
Others			
All	28	9.0	8.8
Males	22	8.5	8.8
Females	6	10.5	8.8

The average length of stay for the extended stay group was 45.4 days, down from 58.8 days previously reported, with essentially no difference between males and females. No guests were reported as departing this program prior to completion. (Table 67)

The average length of stay for guests in the non-residential program was approximately 154.6 days, with no significant difference from that previously reported.

Females were significantly more likely to remain enrolled longer than males. From the data held by the evaluator that approximately 42.2% of the guests leaving this program did so in circumstances other than successful. (Table 68)

The average LOS for guests in the non-residential program for older adults was 52.9 days, essentially the same as previously reported. There was no significant difference in the LOS based on gender. Only one individual was reported as leaving this program as other than complete. (Table 69)

Table 68. Average Length of Stay Non-Residential (Days)

	n	mean	sd
Completers			
All	50	154.6	48.8
Males	36	144.9	47.8
Females	14	179.4	42.1
Other			
All	35	76.9	55.5
Males	24	79.3	55.2
Females	11	71.8	55.8

Table 69. Average Length of Stay Non-Res Older Adults (Days)

	n	mean	sd
Completers			
All	36	52.9	34.9
Males	15	54.7	31.5
Females	21	51.6	37.0
Other			
All	1	19.0	0.0
Males	1	19.0	0.0
Females			

Closing Comments

Outcomes from all of the programs continue to be very good as has been consistently reported since the inception of the evaluation in 2001. As noted in the report, The Retreat senior staff received monthly reports of key satisfaction and outcomes indicators, including guest comments regarding the most helpful and least helpful aspects of their time at The Retreat, as well as suggestions and comments.

It has been the evaluation team's privilege to observe the smooth, thoughtful, and meaningful expansion of the services provided by The Retreat over the years. Noteworthy is the observation that as services were expanded there were none of the expected bumbles in consumer satisfaction or the longitudinal outcomes as usually occurs within agencies as they grow. Quite remarkable.

The primary reason for the completion of the evaluation was due to the retirement of the evaluator who has worked in the addictions and mental health field for approximately 45 years. During that time he has had the opportunity to work with literally hundreds of agencies across the United States. Unequivocally it is the evaluator's opinion that The Retreat has one of the most effective models for recovery, some of the consistently highest consumer satisfaction ratings, and certainly very strong longitudinal outcomes.