An Evaluation

Of the Oxford Houses

In

Butler, Pennsylvania

Housing,

Fellowship,

Self-Reliance,

Self-Respect,

For Recovering Individuals

Winter 2009

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OXFORD HOUSE TRADITIONS

1. Oxford House has as its primary goal the provision of housing for the alcoholic and drug addict who wants to stay clean and sober.

2. All Oxford Houses are run on a democratic basis. Our officers serve continuous periods of no longer than six months

 No Member of an Oxford House is ever asked to leave without cause -- drinking, drug use, or disruptive behavior.

 Oxford House members realize that active participation in AA and/or NA offers assurance of continued sobriety.

 Each Oxford House should be autonomous except in matters affecting other houses or Oxford House, Inc., as a whole.

Each Oxford House should be financially self-supporting.

Oxford House should remain forever nonprofessional.

 Propagation of the Oxford House, Inc. concept should always be conceived as public education.

Members who leave an Oxford House in good standing should become associate members

Evaluation Published March 17, 2009

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Background

Each individual Oxford House is a rented home and chartered by Oxford House, Inc. The chartering procedure is a two-step process: (1) the issuance of a temporary charter, and [2] once the requirements of the temporary charter are met, the issuance of a permanent charter. Both the temporary and permanent charters have three simple conditions that the group requesting a charter must meet in order to call itself an Oxford House[™]. Usually a new house is able to demonstrate it understands the system of operation sufficiently to receive a permanent charter within a period of about six months. The three conditions of both the conditional and permanent charter are as follows:

- The group must be democratically self-run,
- The group must be financially selfsupporting, and
- The group must immediately expel any resident who returns to using alcohol or drugs.

These three basic requirements – democracy, self-support and absolute sobriety – lie at the heart of what makes an Oxford House work. The first requirement that the group be democratically self-run has both a practical and therapeutic value. The residents in an Oxford House save money by managing their themselves rather than house paying employees to "look after them." That is the practical aspect. But also, in managing the operations of their house, the residents gain self-esteem, accountability and civic virtue.

The requirement of self-support also has both practical and therapeutic value. The Butler Oxford House resident pays an average of \$100.00 a week into their group household account as their equal share of household expenses. More importantly, when the residents of an individual house pay their monthly bills each resident in the group gains the satisfaction of having behaved responsibly. This responsible behavior is new behavior for the recovering addict.

The satisfaction that comes from the group paying bills strengthens the cohesiveness of the group as a whole and increases the value of individual sobriety. This is particularly true because each resident in each Oxford House knows firsthand that the success or failure of the individual house depends upon following the disciplined democratic system of operation that is a basic tenant of every Oxford House – including paying household bills on time.

The National Institute on Alcoholism and Alcohol Abuse [NIAAA] and the National Institute of Drug Addiction [NIDA] funded two major studies of Oxford Houses. Those agencies provided the funding to DePaul University in Chicago to conduct a number of national studies related to the efficacy of Oxford House.¹

The studies consisted of a number of specific small-scale studies and two major studies. One of the small-scale studies examined optimism, abstinence self-efficacy and selfmastery of two groups of individuals in early recovery experienced. One group lived in an Oxford House and attended 12-Step self-help recovery meetings. The other group also went to 12-step self-help recovery meetings but did not live in an Oxford House. Both groups were interviewed to determine basic history [demographic and treatment history] and individuals completed surveys related to resources of optimism, the coanitive abstinence self-efficacy and self-mastery. The authors concluded their study as follows:

Overall findings suggest that cognitive resources facilitate substance abusers' recovery and that the Oxford House model provides recovering substance abusers with an environment that provides greater support in their development of cognitive resourcefulness for ongoing abstinence.²

In a major study financed by the National Institute on Drug Abuse [NIDA], the DePaul researchers followed 897 Oxford House residents living in 219 Oxford House around the country [including a number of houses in North Carolina] for a period of 27 months to

¹ Thirteen of the DePaul specific studies have been published in book form: *Creating Communities for Addiction Recovery: The Oxford House Model*, edited by Leonard A. Jason, Joseph R. Ferrari, Margaret I. Davis, Bradley D. Olson, The Hayworth Press, New York, 2006

² John M.Majer, Leonard A. Jason, Bradley D. Olson, *Optimism, Abstinence Self-Efficacy, and Self-Mastery – A Comparative Analysis of Cognitive Resources*, Assessment, Volume 11, No.1, March 2004, 57-63 at P. 62.

determine how many stayed clean and sober without relapse.³ Their findings were that after 27 months a remarkable 87% had stayed clean and sober for the entire period of time.

In another study funded by the National Institute on Alcoholism and Alcohol Abuse [NIAAA], the DePaul researchers randomly selected one-half of a group of 150 recovering individuals leaving treatment in Illinois to enter an Oxford House and compared their outcomes over a two-year period with a control group that would live wherever their normal habitant was following treatment. On its face, the findings were also remarkable -65% of the Oxford House group stayed clean and sober without relapse for the two-year period and only 31% of the control group had the same outcome. When one examines the facts underlying the control group - where 8 of the 75 found their way to an Oxford House anyway and all 8 stayed clean and sober, and then subtracts the 8 from the control group who entered an Oxford House - the contrast between the Oxford House and the control group is 65% versus 23%.

Current Profile of Butler Oxford House Residents

Each year Oxford House, Inc. asks each of the residents in Oxford Houses to complete a confidential questionnaire that has been used since 1987. The data from the questionnaire provides the basis for Oxford House World Services to develop a profile of Oxford House residents and evaluate how well Oxford Houses are doing.

In early March, 21 [87%] of the then average of 24 men living in the cluster of then three Oxford Houses in Butler completed a questionnaire that elicited information about their background and efforts to recover from alcoholism and drug addiction.⁴ The survey questionnaire was one that has consistently been used by Oxford House since 1987. The data obtained from the surveys is a snapshot of who is in the Butler Oxford Houses during the survey period.

In each year, the self-reported background and addiction history of each resident in the National Network of Oxford Houses reflects a pattern. This is not surprising. Addictive behavior has produced destruction to individuals, families and communities. The new element introduced by Oxford House living is the fact that past behavior does not have to be a prologue to the future. The profile of the men living in Butler Oxford Houses in February 2009 is similar to the national profile.

The statistical 2009 profile of Butler Oxford House residents is as follows:

Table – 1 – Race

	Butler	National
White	85.7%	54%
Black	9.5%	42%
Hispanic	4.7%	4% ⁵

In general both gender and race follow the pattern of treatment within the state or geographic region. Oxford House works to ensure that all segments of the community have an opportunity to get into an Oxford House. Oxford House residency will tend to match the overall racial or ethnic population of an area because alcoholism and/or drug addiction tends to cut across racial or ethnic groups. At this time, however, there are only houses for men in Butler.

It can be anticipated that as the network of Oxford Houses in the state or Butler area grows it will continue to have a population with a racial breakdown that closely reflects the population as a whole. Alcoholism and drug addiction know no racial, economic or educational boundaries.

³ To be in this study the individual had to be an existing resident of an Oxford House but was followed for the full 27-month period even after he or she moved out of an Oxford House. The self-reporting of the resident every three months was cross-checked by getting confirmation from a friend designated by the subject at the beginning of the study.

 $^{^{4}}$ A new house for men will open in Butler on the 23rd of March 2009. This will bring the number of

recovery beds to 32. At the time of the survey there were three houses with 25 recovery beds – one vacancy - and the questionnaire response rate was 87% [21/24]

³ The national statistic includes other racial or ethnic groups in addition to Hispanic and because of the small number overall the 4.7% in the Butler results represents only one person.

Age of Residents

The average age of the men residing in the Butler, Pennsylvania Oxford Houses is 41.5. The range of ages is from 16 to 66 and is distributed as shown by Table 2.

Table - 2 Age Range

Age	Count	Percent
18-22	1	5%
23-26	3	14%
27-31	3	14%
32-35	0	0%
35-38	1	5%
39-41	1	5%
42-45	3	14%
46-50	2	10%
50-53	4	19%
54-57	2	10%
58-61	0	0%
62-66	1	5%
Total	21	100.0%

Most of the Oxford House residents Butler and the nation have never served in the military but 23.8% are veterans compared to 20% of the National Oxford House population who are military veterans.

The veterans are a little over fourteen years older on average than the non-veterans [52.4 years versus 38.1 years]. This difference is about twice as great as normal and reflects the fact that the sample size is quite small. A larger number of residents would lower the difference because over time a number of Iraq War vets will move into Oxford Houses and tend to lower the age of those with military service. This has happened already in North Carolina and Washington State.

The average length of schooling of the Butler Oxford House residents is 13.5 years – about a year more than for Oxford House residents in other states. The range of education is completion of grade nine to two with an additional year following a college BS degree.

Slightly under 10% of the Butler Oxford House residents have not completed high school. [Count 2 out of 21] On the other hand, over half of the Butler Oxford House residents have education beyond high school level. About 28% have at least a 4-year college degree. See Table 3 below.

In America, education and economic wellbeing often result in class differences even though as a country the United States promotes an egalitarian philosophy. Alcoholism and drug addiction are egalitarian and Oxford Houses in Butler reflect the ideal mix of well-educated and under-educated, rich and poor, and individuals of different races and religious backgrounds.

More than three-quarters [88%] of the residents graduated from high school. The following table shows the educational attainment diversity.

Last Year	Count	Percent
9	1	4.8%
10	0	0.0%
11	1	4.8%
12	8	38.1%
13	3	14.3%
14	1	4.8%
15	1	4.8%
16	4	19.0%
17	2	9.5%
Total	21	100.0%

Table - 3 Last Year of Formal Education

There is no relationship between any educational level or racial group and length of sobriety. Unsurprisingly, Oxford Houses allow individuals to gain solid sobriety irrespective of racial, educational or income differences. The overall average level of education is 13.5 years but as discussed above, and there are slight differences between various cohorts and the numbers are too small to be significant.

Prior Treatment

Most of the residents in an Oxford House have been through residential treatment more than once. This is not surprising given what is know about alcoholism and drug addiction. Ludwig found that only one in ten of treated individuals are clean and sober eighteen months after treatment⁶, and Vaillant found that over a lifetime only 20% of alcoholics achieve sobriety without relapse.⁷ The general outcome of treatment for drug addiction is equally dismal. A study of treatment outcome for cocaine addiction found 13% stayed clean without relapse. [RAND 1995].

Vernon E. Johnson, described the standard four phases of treatment for alcoholism and drug addiction four decades ago:

- Intervention
- Detoxification
- Education, and
- Long-term behavior change to assure sobriety without relapse.⁸

Long-term behavior change is the most difficult to achieve because behavior change – always difficult – becomes nearly impossible if the individual returns to a living environment identical or similar to where he or she was living as an active alcoholic or drug addict.⁹ Intervention, detoxification and education [about the nature of addiction and motivation to change behavior] is not difficult but alone these three steps can seldom produce recovery without relapse. Long-term behavior change requires the availability of a reasonable opportunity to become comfortable with abstinent behavior.

Unfortunately, the norm for alcoholism and drug addiction treatment is that recovery is at best sporadic. Relapse is generally the expected outcome. Each episode of recovery is followed by recidivism into active drinking of alcohol and/or drug use. Similar to Oxford House residents in other states, the residents in the Butler Houses seldom are in an Oxford House following their first residential treatment episode. [At the Oxford House website: www.oxfordhouse.org it is possible to download a number of studies in other states that used a far higher number of interviews to derive a statistical profile. -- To find the studies go to "Publications/Evaluations/State" and click on the particular state study.] See Table 4 below for the profile of the Butler Oxford House residents.

Table - 4		
Prior Times in	Residential	Treatment

Times	Count	Percent
One	4	19.0%
Тwo	2	9.5%
3-5	6	28.6%
6-10	1	4.9%
More than 10	8	38.1
Total`	21	100%

It is not unusual to find most individuals in formal treatment are not in treatment for the first time. As a matter of fact, the national TEDS report for 2006 shows that less than 40% of all patients in treatment were in treatment for the first time. More than 10% had been in treatment five or more previous times. Therefore, it is not surprising to learn that most residents of Oxford House have been through residential treatment more than once before entering an Oxford House.

Prior residential treatment followed by relapse underscores the fact that behavior change – the only cure for alcoholism and drug addiction –is not easy. It takes time, motivation and a supportive peer living environment to develop comfortable sobriety without relapse.

The concept underlying self-run, selfsupported Oxford recovery Houses is the same as the one underlying Alcoholics Anonymous and Narcotics Anonymous -addicted individuals can help themselves by helping each other abstain from alcohol and drug use one day at a time for a long enough time to permit a new set of values to be substituted for the values of a lifestyle in which alcohol and drugs were used.

Two findings from the Butler Oxford House studies – expulsion rate and length of stay – show that Oxford Houses are *now* providing the time, motivation and supportive peer

⁶ Arnold M. Ludwig, M.D., *Understanding the Alcoholics Mind*, Oxford University Press, New York 1988, p. 5

⁷ George E. Vaillant, *The Natural History of Alcoholism Revisited*, Harvard University Press, Cambridge, Massachusetts, 1995

⁸ Vernon E. Johnson, *I'll Quit Tomorrow* (Harper and Row, San Francisco, 3rd edition, 1980) [First published in 1967.]

⁹ R.J. Goldsmith, *The Essential Features of Alcohol and Drug Treatment*, Psychiatric Annals, 22, pp. 419-424, 1992.

environment for residents to develop sobriety without relapse. The Oxford House charter requires the immediate expulsion of any resident who returns to using alcohol or drugs. In 2007 it is unlikely that this requirement was being followed in Butler.

Oxford House started in Butler when a local resident – William Campbell – contacted Oxford House, Inc. – the national 501[c][3] umbrella organization for all individual Oxford Houses – to apply for a charter. He was granted a charter for Oxford House – Walker Butler August 1, 2006. A charter was granted but it turned out that Bill was not able to really get the house started and on track. Fortunately, Rich Christensen was able to move to Butler early in 2008 to get the house on track. His success has allowed that house to get on track and has led to the opening of three additional houses.

The greatest difference between the DePaul studies and this evaluation is that here the statistical count is actual not survey. The minute an individual enters an Oxford House he or she - without gualification - is part of the sobriety count. It is not uncommon for most institutions involved in treatment to qualify recovery statistics by limiting computation to "those who complete the program." Even with cherry picking cases to include in recovery computations few if any treatment programs approach the outcome rates of Oxford House in achieving recovery without relapse. During the last year, about one-third of the residents in Butler Oxford have been expelled for relapse. This is about 10 points higher than the national relapse rate for Oxford House residents [19.3%] but the percentage should drop as the Oxford House presence becomes established in the Butler area.

About half [57%] the residents in Butler Oxford Houses have lived in the houses for six months or less. About 70% have lived in an Oxford House for less than one year; 91% for less than eighteen months.

The alternative to Oxford House living can be seen by looking at where Butler Oxford House residents lived just prior to the treatment that led them to Oxford House. While none of the current Oxford House residents were homeless immediately preceding entry into an Oxford House, more than 47.6% had experienced homelessness an average of 2.6 times during their addiction. The average length of such homelessness was about 3.6 months [108 days].

The importance of living environment cannot be overemphasized. Within the street drug culture, it is not unusual to have dealers give away "free samples" for the purpose of getting a drug addict back into the market. While liquor, wine or beer stores seldom, if ever, give away free samples, many of their customers will and the pressure to "just have one" is commonplace in many social settings. Putting the newly recovering alcoholic or drug addict into these settings invites relapse. It is not by chance that a popular saying among those in 12-Step programs often remind each other to "avoid people, places and things" that were part of the former addictive behavior.

Common sense leads one to believe that halfway house residents, homeless individuals and those reentering society from jail or prison are unlikely to automatically end up in alcohol and drug free living environments. The profile data from the residents in Butler Oxford Houses confirms this by showing where individuals lived just prior to entering treatment or an Oxford House.

The following table shows the place of residence immediately preceding acceptance into a Butler Oxford House. Notice that nearly half [43%] had marginal housing security before Oxford House, e.g., rented room, or an institution setting.

Table 5
Prior Residence of Butler Oxford House
Residents

Place	Count	Percent
Apartment	3	14.3%
Owned Home	5	23.8%
Rented Home	4	19.0%
Rented Room	4	19.0%
Jail	2	9.5%
VA Hospital	1	4.8%
Halfway House	2	9.5%
TOTAL	21	100%

If one classifies marginal living conditions as rented room, jail, mental hospital, and halfway house, 43% of Oxford House residents were in marginal living conditions just prior to admission to an Oxford House. Even the highly motivated individual is unlikely to succeed in developing comfortable long-term sobriety while living at the margin. Moreover 47% of all Butler Oxford House residents have experienced homelessness averaging nearly 3.6 months. Coupling the marginal living conditions prior last treatment episode with to the background of homelessness almost guarantees relapse and recycling but for the opportunity to live in an Oxford House to gain the time and peer support necessary to become comfortable enough in sobriety to avoid relapse.

The average length of sobriety among Butler Oxford House residents is 15.6 months, which is a good start toward mastering lifelong sobriety. The range of sobriety is from 1 month to more than 12 years. The 15.6 month average is distorted because the sample is small and one of the members in the sample has more than 10 years sobriety. Excluding the "long-term" sober individual the average length of sobriety drops to 9.2 months. This figure is closer to the national norm for Oxford House living for houses less than three years old. When older houses are included the national average is 16.5 months - closer to the length of average sobriety including the person with 12 years of sobriety. This is because there is no time limit on how long a resident can live in an Oxford House and some will live there for a long time.

Residents stay until they feel comfortable with sobriety and confident that they can move without risking relapse. This is economically feasible because all Oxford Houses are rented – not owned. By design Oxford House does not own property. This makes for efficient use of capital and avoids fights over money, property and wealth.

It should also be noted that some of the individuals coming into an Oxford House have accumulated some sobriety from either incarceration or residential treatment – including over 9.5 percent coming from a traditional halfway house and 9.5 percent directly from serving a jail term averaging a little over one year. The head start on sobriety of these individuals coupled with the two individuals who have lived in a house for more than 18 months accounts for the average sobriety of 15.6 months.

In a nutshell, the fact that Oxford Houses are rented rather than owned dwellings makes it easier to have open-ended residency. No one has to leave an Oxford House within a fixed time limit. Therefore, individuals early in recovery have the benefit of being able to share the experience of those with longer sobriety.

The following table [excluding the person with 144 months of sobriety] shows the breakdown of sobriety making up the average.

Table - 6 Current Sobriety in Months

Months	Count	Percentage
1-2	3	15%
3-4	1	5%
5-6	3	15%
7-8	4	20%
9-10	2	10%
11-12	3	15%
13-14	0	0%
15-16	2	10%
17-18	1	5%
19-20	0	0%
21-22	0	0%
23-24	0	0%
25-26	0	0%
27-28	1	5%
Total	20	100%

Dr. George E. Vaillant, in his book *The Natural History of Alcoholism*, states the obvious goal in the treatment of alcoholism [or drug addiction] when he states that, "The treatment of alcoholism should be directed toward altering an ingrained habit of maladaptive use of alcohol. ..." He goes on to spell out the four components of treatment, which can achieve that goal:

- (1) offering the patient a non-chemical substitute dependency for alcohol,
- (2) reminding him ritually that even one drink can lead to pain and relapse,
- (3) repairing the social and medical damage that he has experienced, and
- (4) restoring self-esteem.¹⁰

Vaillant also points out that providing all four components at once is not easy.

Disulfiram [Antabuse] and similar compounds that produce illness if alcohol is ingested are reminders not to drink, but they take away a cherished addiction without providing anything in return: they provide the second component but ignore the first. Prolonged hospitalization provides the first three components but ignores the fourth and Hospital patienthood eventually the first. destroys self-esteem, and when hospitalization ceases the patient loses his substitute dependency. Tranquilizing drugs provide the first component but ignore the other three. For example, providing the anxious alcoholic with tranquilizers will give temporary relief of anxiety but may also facilitate the chain of conditioned responses that lead to picking up a drink at the next point of crisis. Over the long term, providing alcoholics with pills only reinforces their illusion that relief of distress is pharmacological, not human.11

Vaillant does note "self-help groups, of which Alcoholics Anonymous is one model, offer the simplest way of providing the alcoholic with all four components referred to above."12 The same principle applies to Oxford House. It provides the benefits of prolonged hospitalization without the In fact, selfdestruction of self-esteem. esteem is restored through the exercise of helping responsibility, others, resocialization, and constructive pride in maintaining an alcohol and drug-free living environment without dependency upon any outside authority or helper.

The NIAAA and NIDA sponsored DePaul University studies of Oxford House confirm that the Oxford House self-help model is effective in providing the time and peer support in an alcohol and drug-free living environment to assure long-term sobriety without relapse.¹³ Moreover, targeted studies by the DePaul research team show how individuals the effect of Oxford House living on individuals with dual diagnosis, women, and various other subgroups. In general all groups benefit from the Oxford House living environment supportive of recovery without relapse. The cost of addiction is high. The following table showing marital status reflects one of the costs.

Table 7 Marital Status

Status	Count	Percent
Single	9	42.9%
Married	3	14.3%
Separated	2	9.5%
Divorced	5	23.8%
Widowed	2	9.5%
TOTAL	21	100.0%

A third [33.3%] of Oxford House residents had been married but are now separated or divorced. Most believe addiction was the primary reason they were no longer married. Only 14.3% of the individuals in Butler Oxford Houses are still married and there is no indication that spouses in those cases are willing to resume marital status but experience has shown that once an individual has accumulated a year or more of continuous sobriety resumption of the marriage is likely to occur.

The nature of alcoholism and drug addiction is that the disease progresses from bad to worse. The alcoholic and drug addict use alcohol or their drug of choice compulsively. Studies sponsored by the National Institute of Drug Abuse [NIDA] have demonstrated that the brains of alcoholics and drug addicts undergo change. For the alcoholic and drug addict tolerance of alcohol and/or drugs increases – up to a point. Recovering alcoholics nearly all tell of time periods during their drinking when they could "drink everyone under the table" and still function well but later only a little alcohol use impaired behavior. The non-alcoholic and non-drug addict would quickly realize that the use of alcohol or drugs was unwise and The alcoholic or drug addict, stops. however, craves more of the substance that left such a pleasant memory. Human beings are built to forget pain and remember pleasure. This trait causes the alcoholic and drug addict to continue active addiction unless there is intervention followed by successful behavior modification.

Forced intervention is often brought about by the criminal justice system. The uncontrolled behavior brought about when

<u>Alcoholism Revisited</u>, Harvard University Press, Cambridge, 1995, p. 300.

¹¹ Id. 301.

¹² Id. 301.

¹³ A number of the DePaul research studies sponsored by NIAAA and NIDA can be downloaded from the website: <u>www.oxfordhouse.org</u> by going to "Publications/Evaluations/DePaul".

the alcoholic or drug addict is intoxicated and the compulsive behavior associated with seeking another drink of alcohol or drug fix may also bring about criminal behavior.

The profile of the Butler Oxford House residents shows indicia of forced intervention. Most residents [90.5%] have served time in jail. The average total length of time served in jail is about 47 months nearly 4 years. Usually the individual who has jail time accumulated the jail time as the result of several periods of incarceration. In other words, the alcoholic and drug addict has chronic recidivism. Unless a behavior of constant sobriety is developed, most alcoholics and drug addicts will continue a cycle of incarceration, followed by release, followed by relapse, followed by arrest, conviction and incarceration repeating the cycle over and over until death.

Income

Most Butler Oxford House residents have a job. [67%] Their average monthly income for both the employed and not employed is \$1,718, which is more than enough to pay an equal share of Oxford House average household expenses of \$95 a week.¹⁴

Comfortable Recovery

Equally important in terms of learning lifelong sobriety is that 78.9% of the residents are motivated to find time to attend weekly counseling sessions in addition to attendance at 12-Step self-help meetings. This is higher than the national average of 44%, which may suggest that there is more counseling is available in Butler than in many other parts of the country.

The attendance at 12-Step self-help meetings – Alcoholics Anonymous or Narcotics Anonymous – is important to bring about long-term behavior change but is not required as a condition for living in an Oxford Experience - gained over Oxford House. House's quarter century of operation - has shown that voluntary rather than mandatory 12-Step meeting attendance works. Among Butler Oxford House residents, the average number of 12-Step meetings attended each week is slightly over 8. This is more than four times the number of 12-Step meeting attended by the average AA or NA member. It is also more than the national average among Oxford House residents of 5 meetings a week – which is more than twice the average number of weekly meetings attended by AA/NA members. It is the "thing to do" among Oxford House residents because it reflects the common ground – recovery – that ties the residents of the house together. In many ways going to AA or NA meetings becomes a low cost social thing for members of the house to do each evening.

What this shows is that the Oxford House system of operation [democratically self-run, financially self-supported with emphasis on absolute sobriety] motivates residents to take advantage of tools designed by and for addicts to change behavior. Coupled with the absence of a time limit for living in an Oxford House, these tools produce recovery without relapse.

Resident Satisfaction

The standard questionnaire used for obtaining data to profile Oxford House residents asks two questions to elicit the opinion of Oxford House residents about the value of Oxford House living:

17. Would you recommend Oxford House to other alcoholics or drug addicts early in recovery?" and

16 How important has Oxford House been to your sobriety? ☐ Somewhat important, ☐ moderately important, ☐ very important, ☐ insignificant, ☐ not really sure.

More than 95% would recommend an Oxford House and 86% found Oxford House "very important" to their sobriety. Only person found it not to be significant while 9% found it to be "moderately" or "somewhat important."

The bottom line is that more than 65% of the Butler Oxford House residents are staying clean and sober even though the cluster of Oxford Houses is relatively new. Looking ahead it is important to recognize that Oxford Houses in Butler can provide a significant opportunity for individuals to transform their lifes from addiction to sobriety. In the process the system of operation used in each self-help Oxford House has taught responsible civic behavior. It has done so at practically no cost to the taxpayers or society at large.



¹⁴ The monthly income is as of February 2009.

The Map below is from the Oxford House website: **www.oxfordhouse.org** where any individual looking for vacancies can click vacancies on the home page and then go to a page to indicate where they are interested in finding a vacancy. If they type in "Butler, PA" the map below comes up and on line you can click on any house to find the vacancies, if any exist on that particular day.



By clicking on the house name at the left side of the map another page comes up showing three tabs: address, info and photo. The picture below shows the pop-up with tabs and the picture of Oxford House-General Butler.



By being part of the National Network of Oxford Houses the houses in Butler not only get the benefit of a tried and tested system of operation but also all of the stakeholders interested in recovery can have ready access to the technological benefits of the internet. The real-time vacancy data helps treatment providers, social workers, drug courts and the recovery community at large.

Oxford House™

1975-2009

34 Years of Organized Self-Help To Enable Alcoholics and Drug Addicts to Recover Without Relapse

- Sole Authority for Oxford House Charters
- Providing Technical Assistance to Establish New Oxford Houses
- Providing Technical Assistance to Keep Existing Oxford Houses on Track
- Providing Organization of Chapters to Help Houses Help Themselves
- Providing the Time, Living Environment and Support to Enable Alcoholics and Drug Addicts to Achieve Recovery Without Relapse
- Providing the Legal, Philosophical, and Scientific Framework for a Cost-effective, Worldwide Network of Supportive Recovery Housing.

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