Recovery Homes: Potential and Future Challenges

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Feb. 15, 2023 Presentation at the Recovery Science Series event, hosted by the Recovery Research Institute and sponsored by the Opioid Response Network

- After treatment for substance misuse
  - ➢many patients return to high-risk environments

- Returning to these settings increases chances of relapse

Oxford Houses

- Grassroots movements
  - now over 3,000 Oxford Houses
  - Serving over 25,000
  - Self-run with no professional staff
  - No substance use, pay fair share rent, follow rules
- In the current cost-conscious environment
  - represents an inexpensive and potentially effective setting promoting abstinence

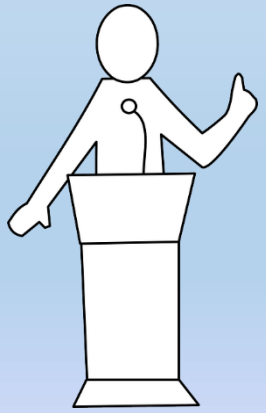
Recovery
Oxford House
Responsibility Democracy

Oxford House Residents Help Those in their community

- Residents reported spending around 10.6 hours per month on neighborhood involvement
- 44% involved in administering and running support groups

Affects on the Neighborhoods

- Neighborhood involvement around recovery also came in the form of educating the community
  - 56% were involved in educating the community about Oxford House
  - 36% were involved in educating the community on recovery in general

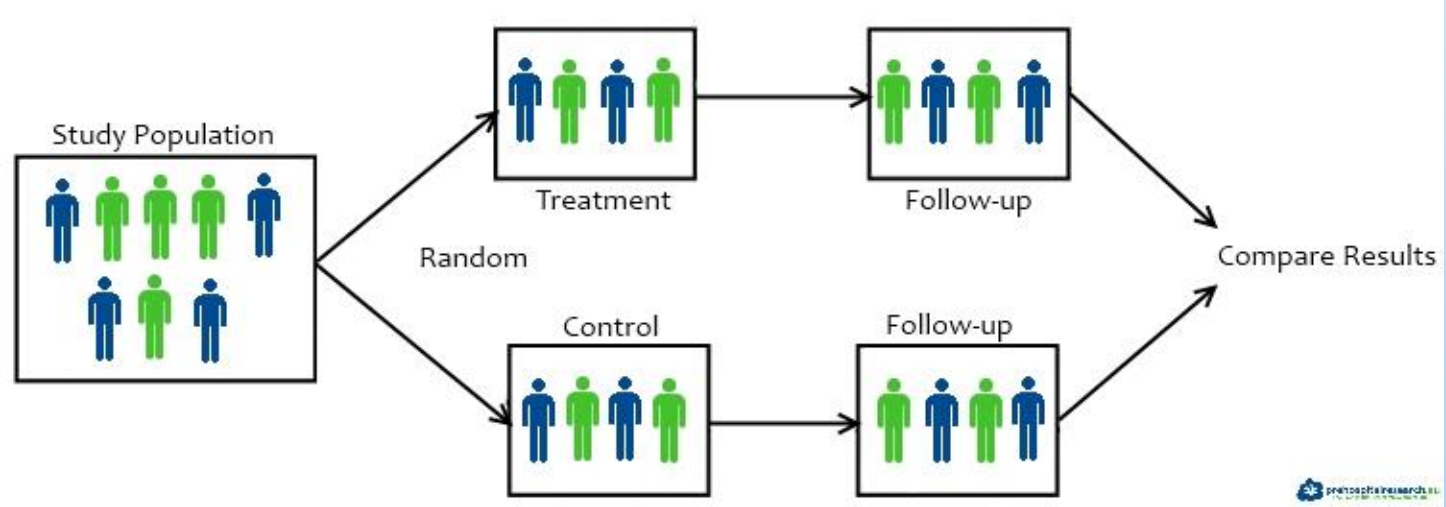


When Asked

- "Do you think living in the Oxford House increased your likelihood of involvement in your neighborhood,"
  - ➢86% answered, "yes."
    - ▪Jason, Schober, Olson (2008)

First NIH Outcome Study

- What are the outcomes of recovery homes
- Randomized outcome study within the state of Illinois

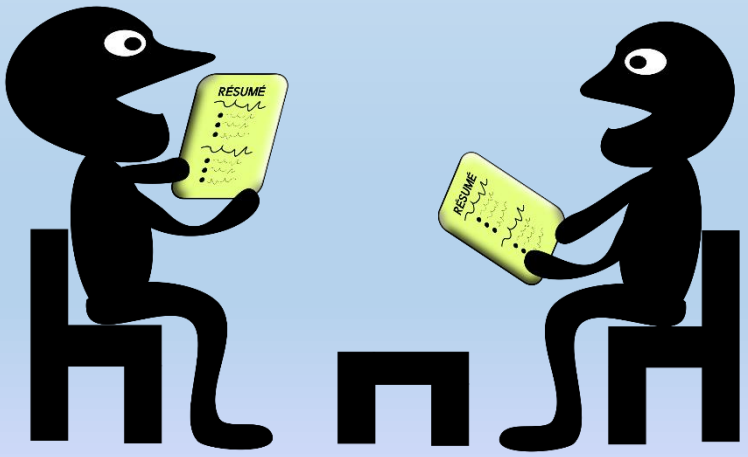


NIH-Funded Study

- Participants just completing substance abuse treatment
- Randomly assigned to either an Oxford House or Usual Care condition
  - 150 of 154 approached individuals agreed to participate
  - All participants assigned to Oxford House condition were accepted

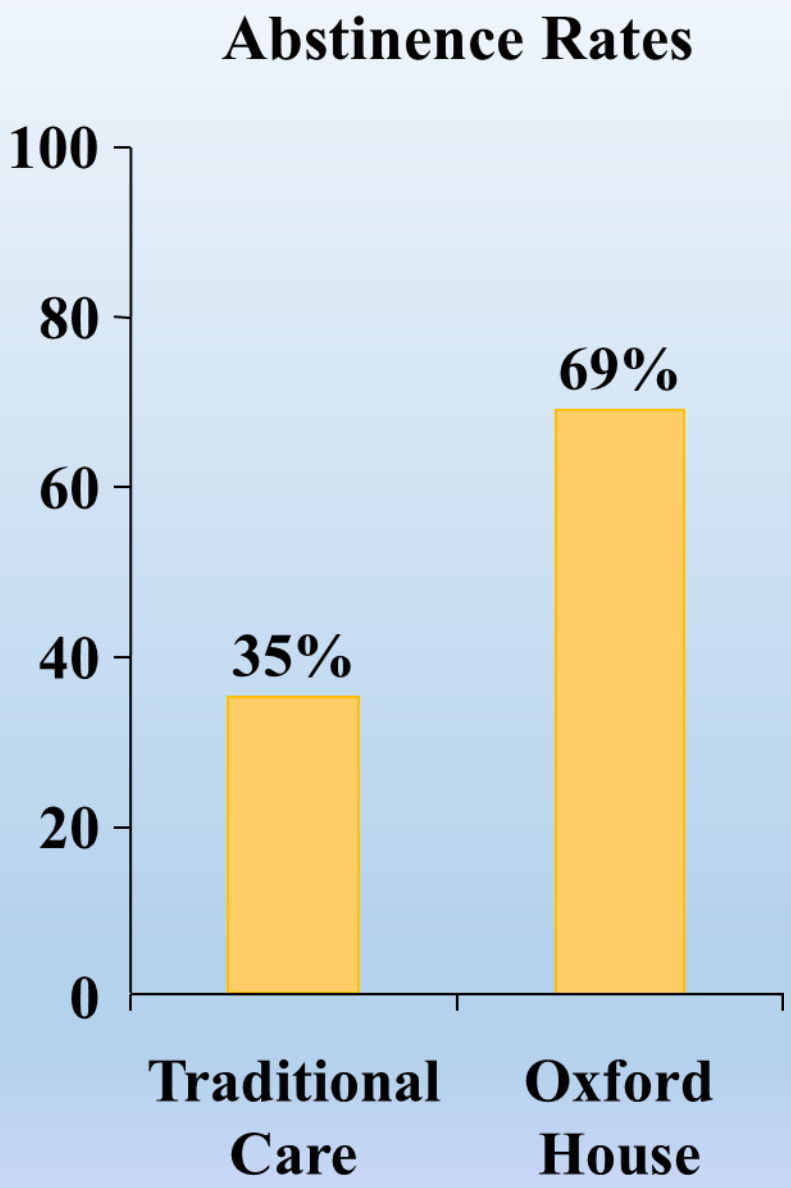
Design

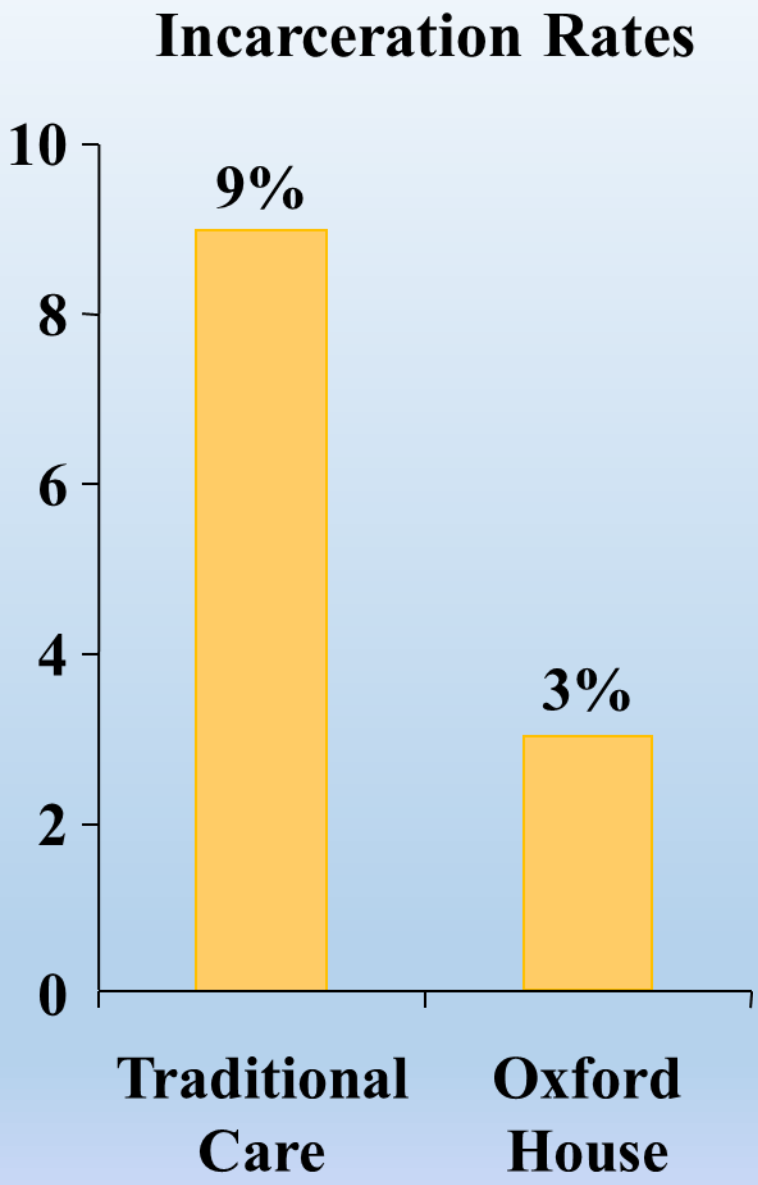
- Participants were interviewed every 6 months for a 24 month period (Four waves)
- Across the 24-month assessment
  - Oxford House, 89%
  - Usual care, 86%

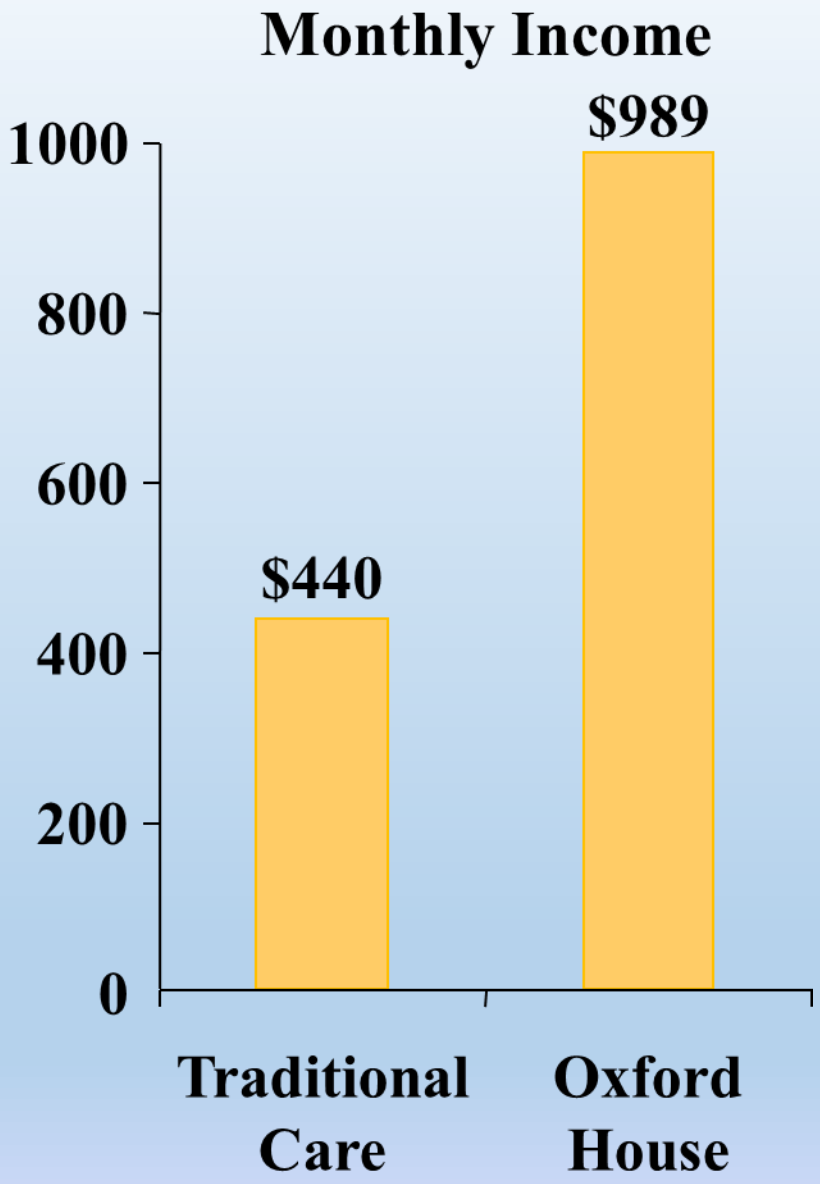


Outcomes at 24-month Follow-up

- OH compared to Usual care group
  - higher abstinence rates (69% vs 35%)
  - higher monthly income ($989 vs $440)
  - lower incarceration rates (3% vs 9%)


Abstinence Rates
100
80
60
40
20
0
69%
35%
Traditional Care
Oxford House


Incarceration Rates
10
8
6
4
2
0
9%
3%
Traditional Care
Oxford House


Monthly Income
$989
1000
800
600
$440
400
200
0
Traditional Care
Oxford House

Study Published in:

The Washington Times, Chicago Sun-Times, Philadelphia Inquirer, Guardian, Orlando Sentinel, El Paso Times, Missoulian, Springfield News-Sun, Union Daily Times, Latrobe Bulletin, Kingman Daily Miner, Havre Daily News, The Advocate-Messenger, Miles City Star, Post-Tribune, Peru Daily Tribune, Beatrice Daily Sun, Daily Journal, Dayton Daily News, The Journal, Spartanburg Herald-Journal, West County Times, Valley Times, Contra Costa Times, Afro Times

Group homes reported to provide high success rates for addicts

STUDIES: Communal living helps recovering addicts become productive members of society

By RANDOLPH E. SCHMID
Associated Press

WASHINGTON — Self-supporting group homes have high success rates in helping individuals recover from alcoholism and drug addiction, researchers from DePaul University reported Thursday.

A pair of studies being presented at the annual meeting of the American Psychological Association found success rates of 65 percent to 87 percent for the homes.

The benefits of communal living include lowering relapse rate and helping keep individuals as productive members of society, reported lead author Leonard A. Jason. In addition, he noted, the houses operate at little or no cost to the taxpayer.

Jason and co-authors studied residents of Oxford House, a network of group homes across the country serving recovering addicts. Each resident pays a share of the costs and can be evicted for using drugs or alcohol.

One study compared 75 people who went into an Oxford House after detoxification with 75 others who went to halfway houses or returned to the community. After two years 65 percent of the Oxford House residents were still clean and sober compared to 31 percent of the others, Jason said.

The second study began with a national sample of 897 Oxford House residents. After a year 607 remained in the study and, of those, 87 percent reported they were still off alcohol and drugs.

Those who dropped out of the study had previously reported higher rates of drug and alcohol use than those who stayed in, the report noted. It said those who dropped out were younger and had spent less time in the home than those who remained.

The program seemed to work equally well for men and women, the researchers said, and there were no significant differences among racial groups in the program.

The Oxford House program was founded 30 years ago in Montgomery County, Md., and has 1,123 houses across the country and in Canada and Australia. While some states have loan programs to help get houses started, each house is otherwise self-supporting and is governed by its own residents.

Led to OH being Approved

- SAMHSA approved OH as being empirically validated program

Worked Courts Protect OHs

- Expert Witness several cases where communities dealing NIMBY

Study of Altruism

- Over time, residents of the communal living recovery model showed significantly greater tolerance trajectories than usual care participants.
- Results supported the claim that residents of communal living settings unit around super-ordinate goals of overcoming substance abuse problems
  - Olson, Jason, Davidson, & Ferrari (2009)

Finding: Importance of One Friend

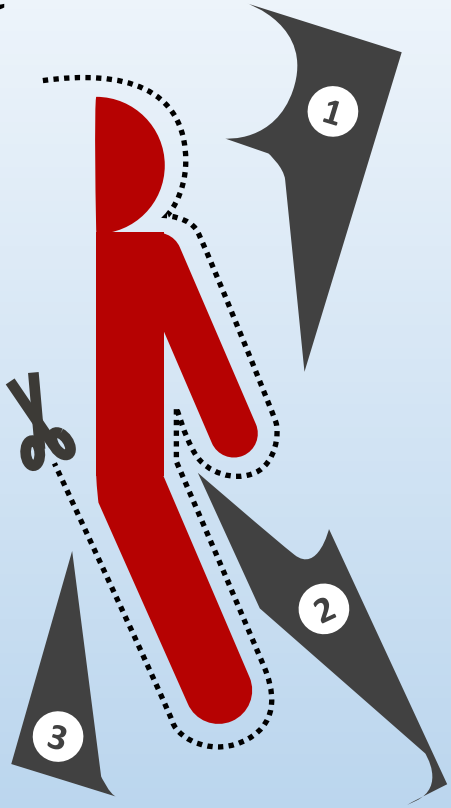
- House residents are friends with at least one other resident are less likely to leave recovery homes early
- Best predictor of long term abstinence

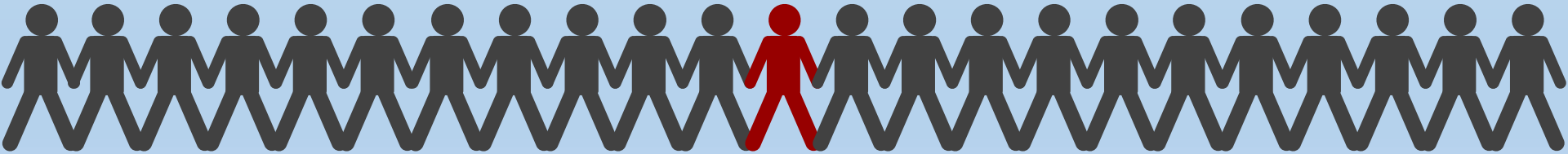
Criminal Justice

1 - Dataset

NIH dataset of 270 individuals recently released from jail or prison.

Participants recruited from inpatient treatment centers in the Chicago area on or before their last day of treatment.





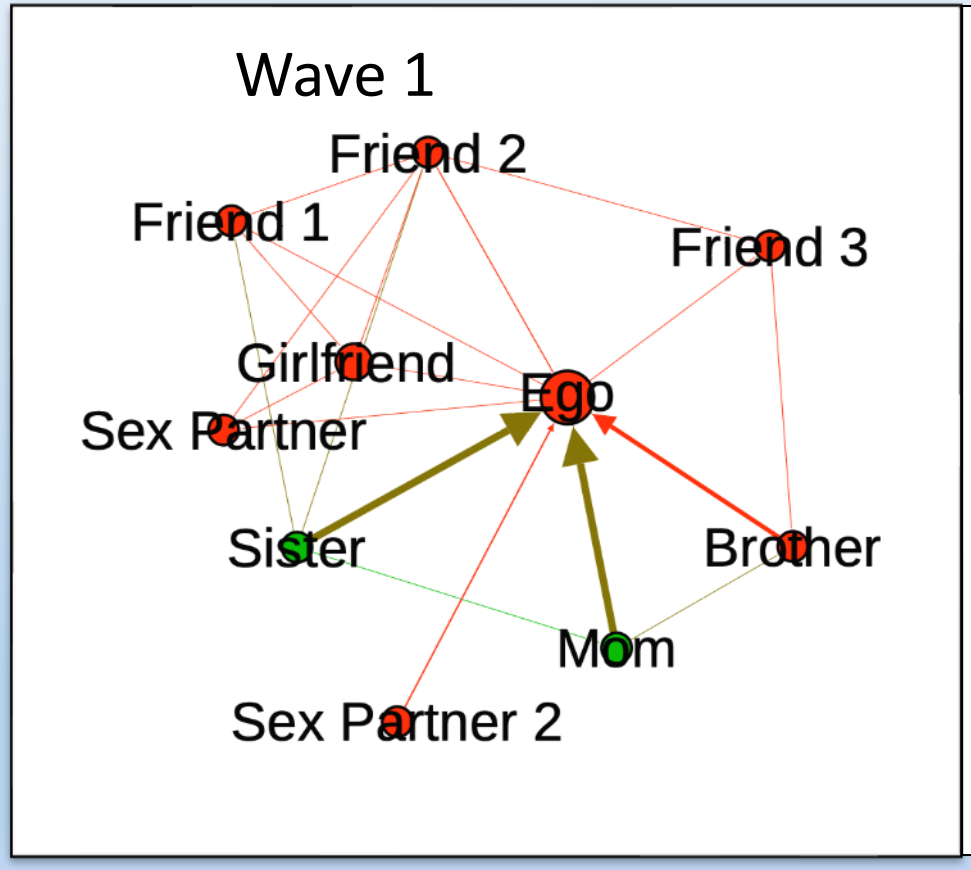
Sub-Sample

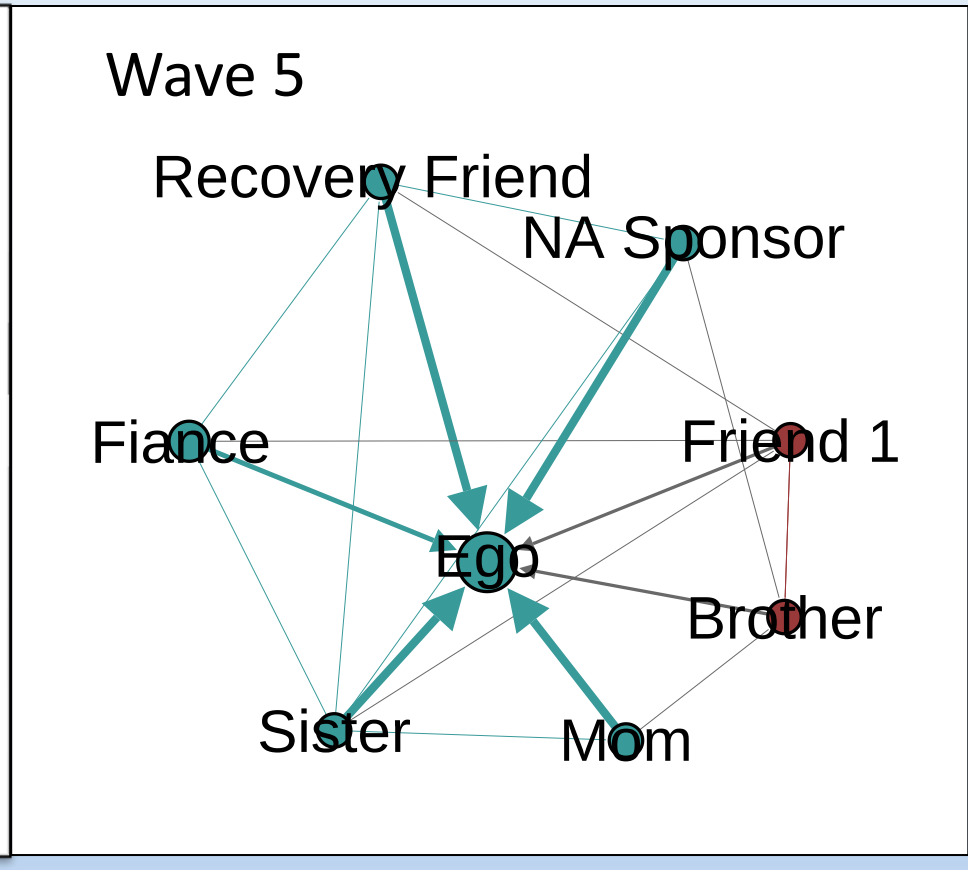
- Ego network data of 5 women who reported high risk HIV behavior
  - i.e. needle sharing from heroin use, and prostitution
- Ego's average age was 38
- All were African American
- Mean of 7 convictions
- Average 2 years recently spent in the justice system

Mean Network Characteristics

Network Characteristics	Wave 1	Wave 5
Num of Alters	5.33(2.31)	7(3)
Heroin Users	4.33(2.31)	1.67(.58)
Family	33%(13%)	47.6%(34.7%)

Network Changes Through Recovery Process: Ego 2





Developed a Social Network Instrument

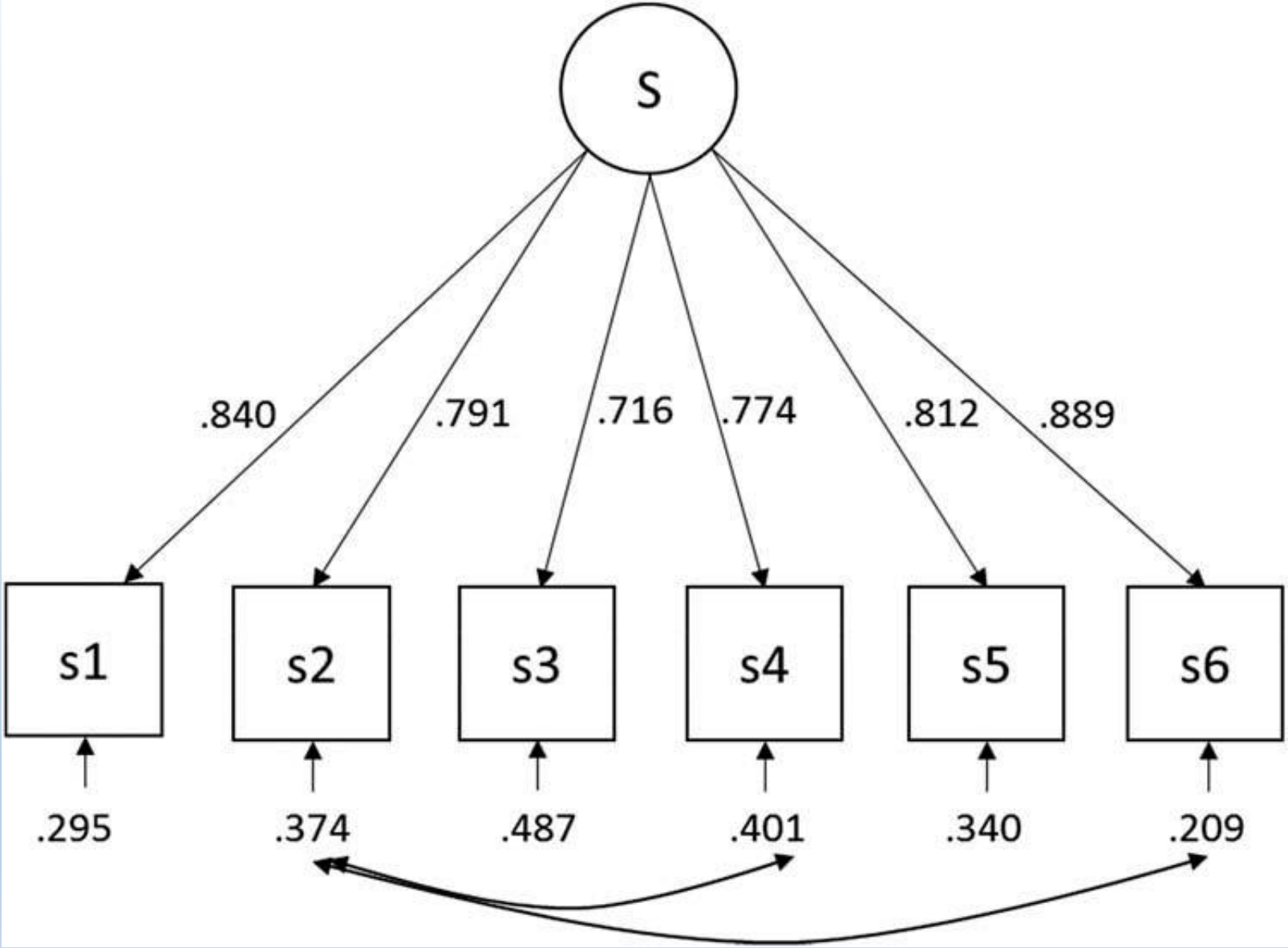
- Types of relationships
  - friend to adversary
- Mentoring
  - going to the person for advice on recovery and other important life issues
- Trust
  - how much money you would lend

Ratings

- Each is rated on a 5-point (0-4) scale appropriate to the relationship type
  - friendship goes from
  - “close friend” to “adversary”

Psychometrics

- Cronbach's alpha was .85 and all items contributed positively
- Multi-level CFA on the social network instrument and found excellent fit and per-item loading contribution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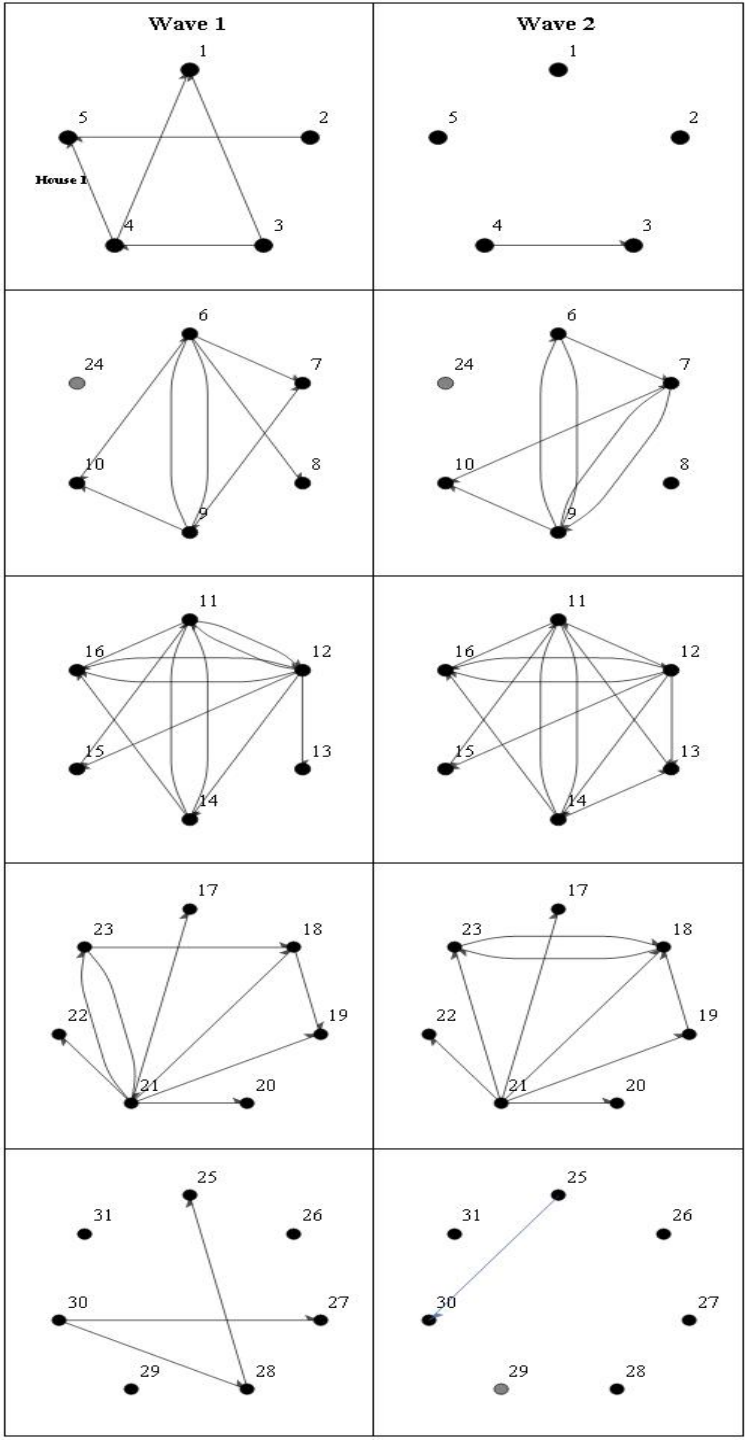
.209

Examined 5 OH recovery homes Wave 1 and Wave 2 (3 month FU)

- Stochastic Actor-Oriented Model (Snijders et al) provides a statistical framework for modeling relationships
  - whereby social networks are conceptualized as a set of individuals whose relationships evolve over time according to an underlying probability structure

Figure 1. Trust Relationships



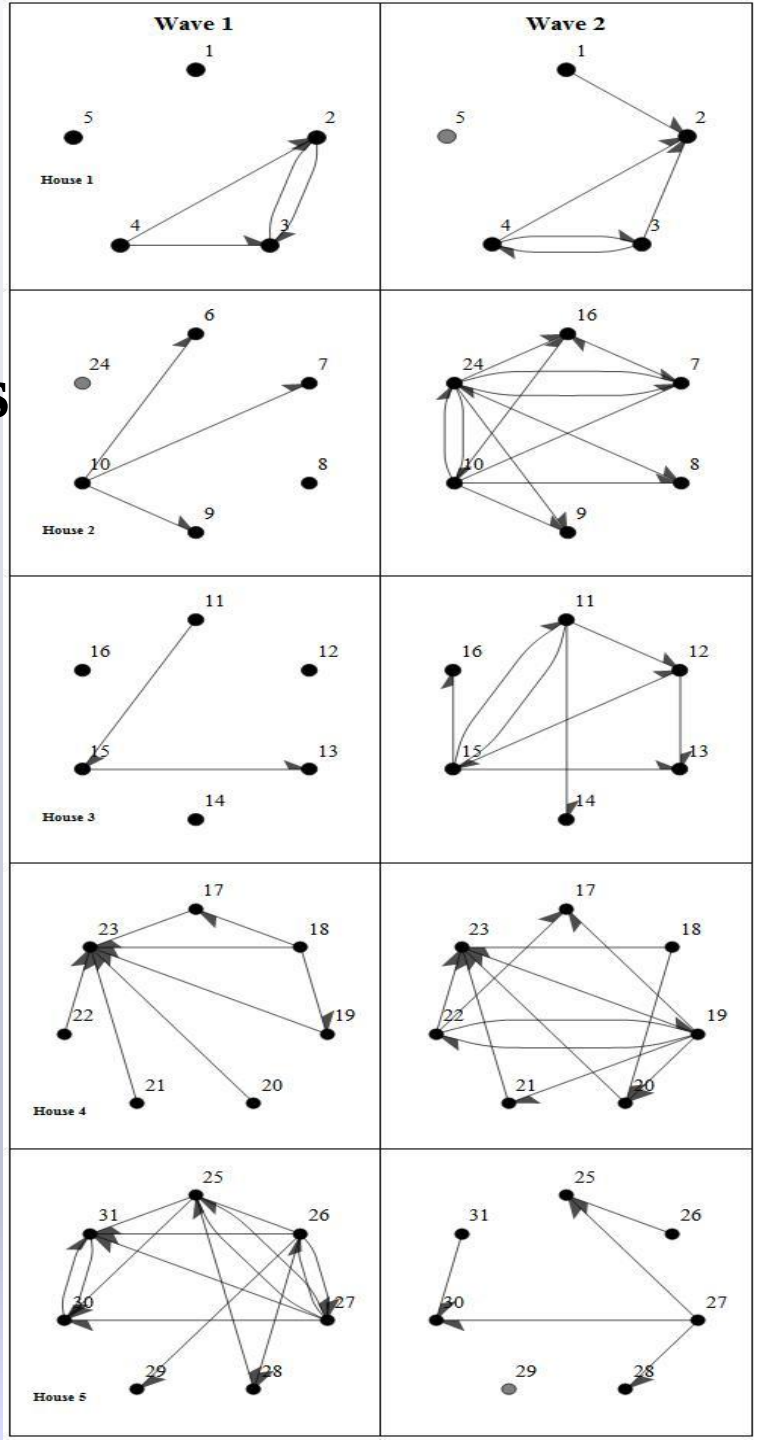
Wave 1: 5 out of 31 dyadic trust linkages are mutual (16%)

Wave 2: 5 out of 25 dyadic trust linkages are mutual (20%)

Trust relationships tended to be a bit more symmetric

Non-resident

Figure 2. Confidant Relationships



Wave 1: 3 out of 24 dyadic confidant links are symmetrical (12.5%)

Wave 2: 3 out of 30 dyadic confidant links are symmetrical (10%)

Element of role specialization – designated "listener" does not generally confide in the other person

Non-resident

Stochastic Actor-Based Model with RSiena

- Parameter showing the effect of Trust on Confidant is 3.76 (t = 2.67, p = .008)
  - Greater level of trust predicts a greater probability of forming a confidant relationship
- Significant 12-step ego effect
  - Individuals who engaged in more 12-step activity were more likely to trust others
- Significant length of house residence effect
  - Length of house residence made an individual more likely to be trusted

Do Oxford House residents trust and confide in each other?

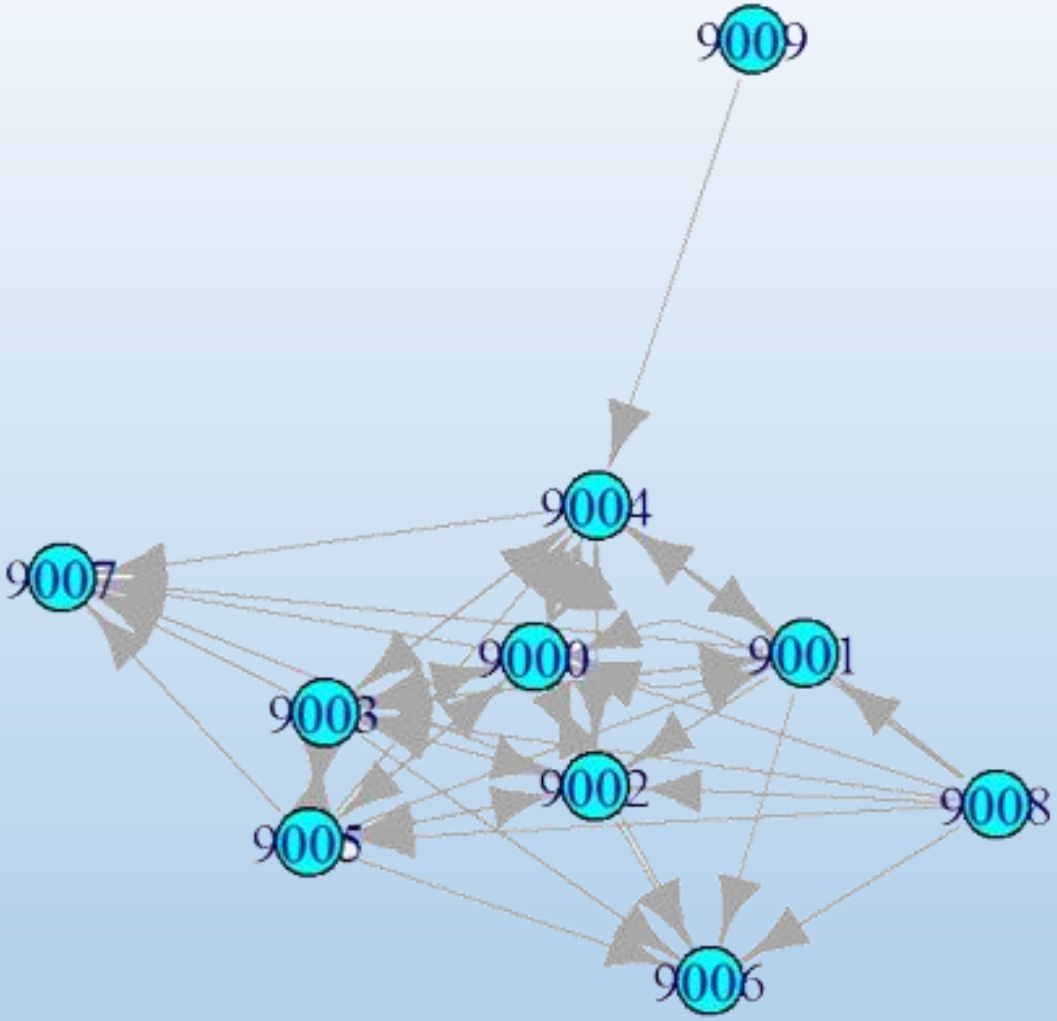
- When do we trust our housemates?
  - If your Oxford House adopts AA-related attitudes and behaviors, you are more likely to trust them
  - If you participate in 12-step activities, you are more likely to trust them
- When do we confide in our housemates?
  - When you trust an Oxford House member, you are more likely to choose that member as a confidant
  - Members are either a confider or confidant, but not both

Social Network Findings from a Suquamish Tribe Men's House

- We assessed their network's
  - diameter
  - reciprocity
  - the average path length
  - cohesion
  - density
  - transitivity
  - centrality

Types of Relationships: Non-judgmental social support

- How friendly are you with this person?
  - Close Friend
  - Friend
  - Acquaintance
  - Stranger
  - Adversary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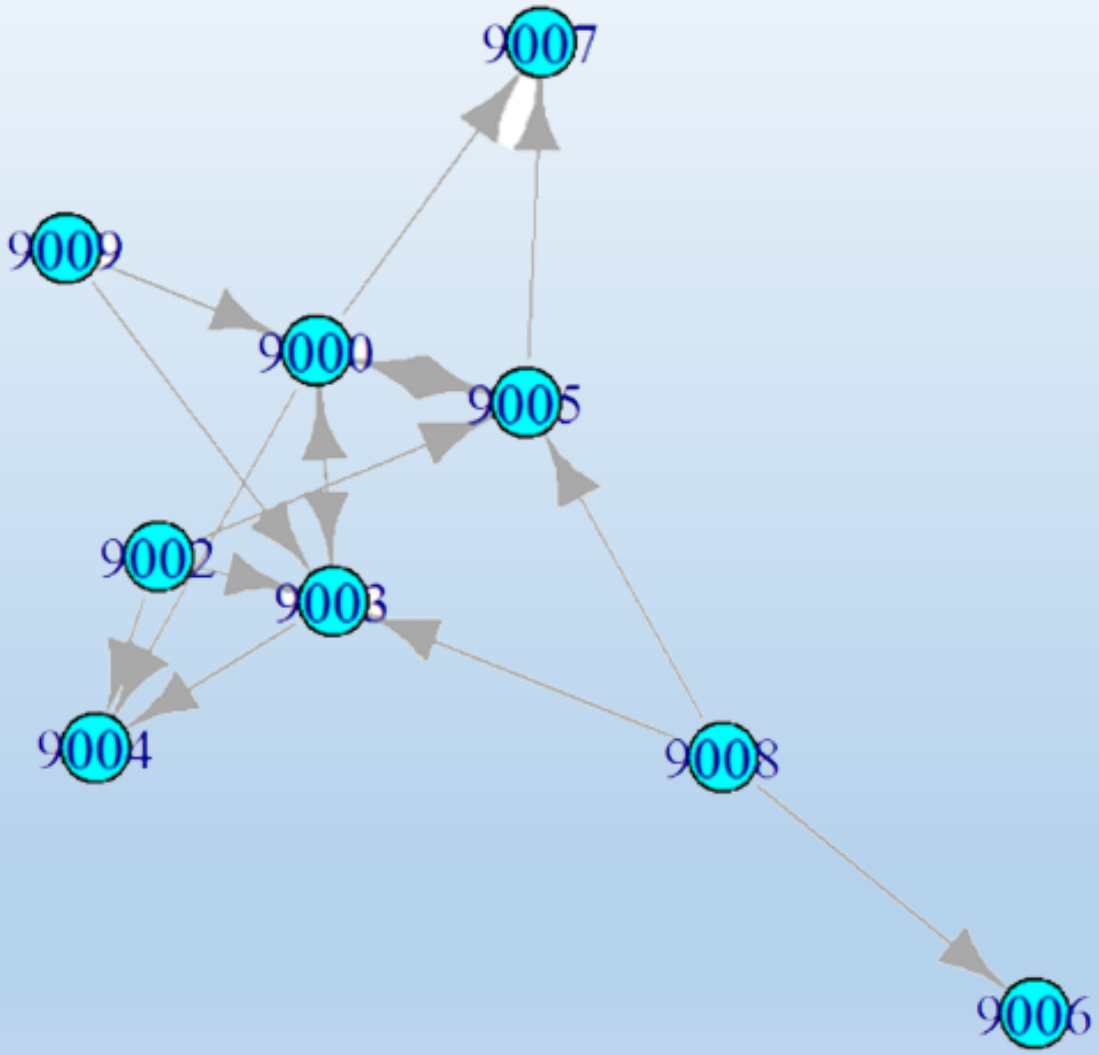
Mentoring: Being a Confidant

- How often do you go to this person for advice on your recovery and other important life issues?
  - Very Often
  - Quite Often
  - Regularly
  - Rarely
  - Never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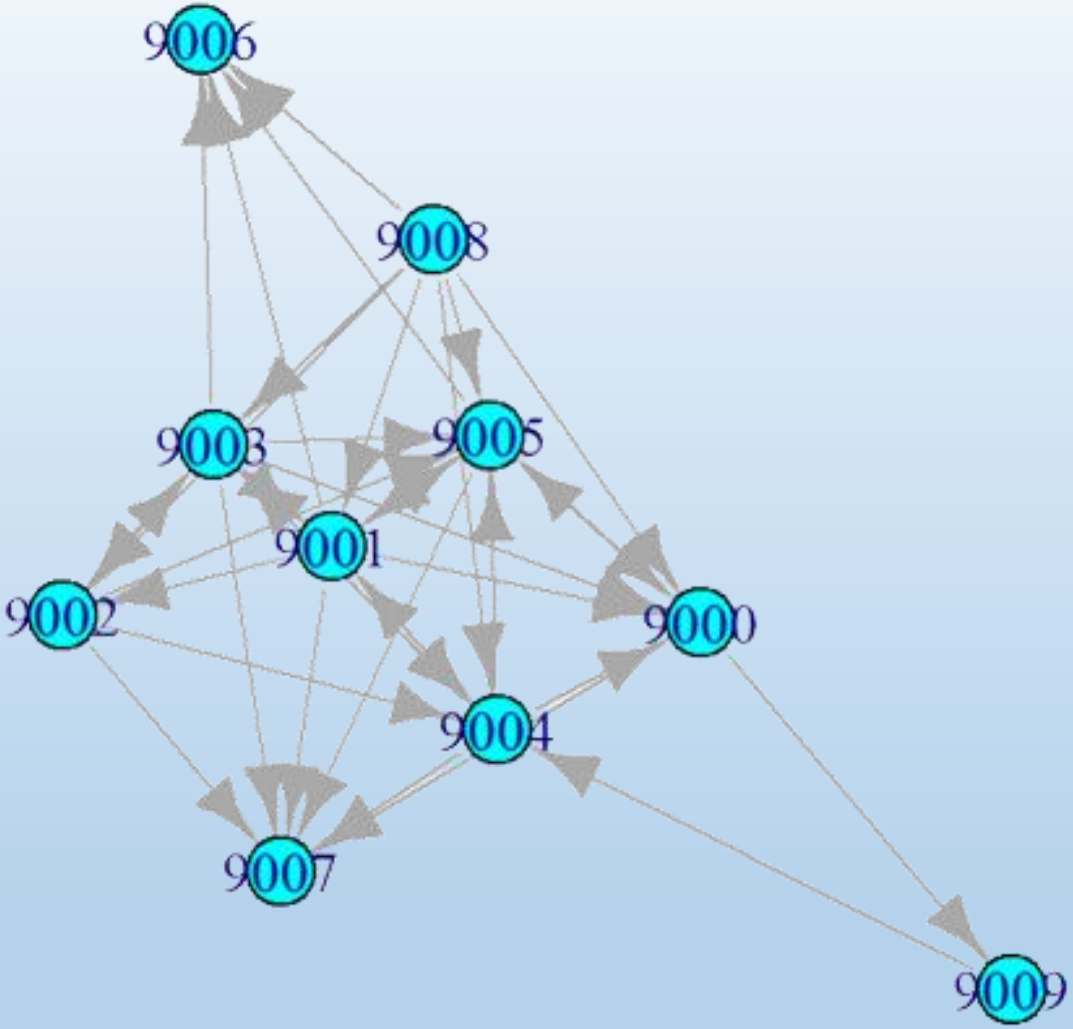
Trust:
Providing Tangible Resources

- If this person asked to borrow money from you, how much would you be willing to lend them?
  - $0
  - $10
  - $50
  - $100
  - $500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Output for Trust

vertices 10
edges 38
mean degree 7.6 mean degree out 3.8 mean degree in 3.8

diameter 3
reciprocity 0.32
average path length 1.49
cohesion 0
density 0.422
transitivity 0.80
centrality 0.044

Findings

- Found a well-integrated social network of OH residents by examining its
  - ➢diameter, reciprocity, the average path length, cohesion, density, transitivity, and centrality
- This recovery home located on a Suquamish Tribe provided its residents with
  - ➢multiple sources of friendship, trust and confidants

NIH Funded Study

- Self-report research data were collected from participants residing in 42 Oxford Houses (collect data every 4 months for 2 years)

- Wave 1 data included 55% males and 44.5% females with a mean age of 38.4 years (SD = 10.8).

- The average length of stay in an Oxford House for participants was 10.3 months (SD = 12.55, range from 7 days to 6.8 years).

Also Measuring Psychological Sense of Community

- A brief 9-item questionnaire was developed with good psychometric properties to assess sense of community
  - ➢ Three theoretically derived factors emerged with good measurement model fit, internal reliabilities, and convergent validity
  - ➢Three levels: the *Self*, the interactions with others (*Membership*). and the organization (*Entity*)
    - ▪Jason, Stevens & Ram (2015)

Psychological Sense of Community Scale

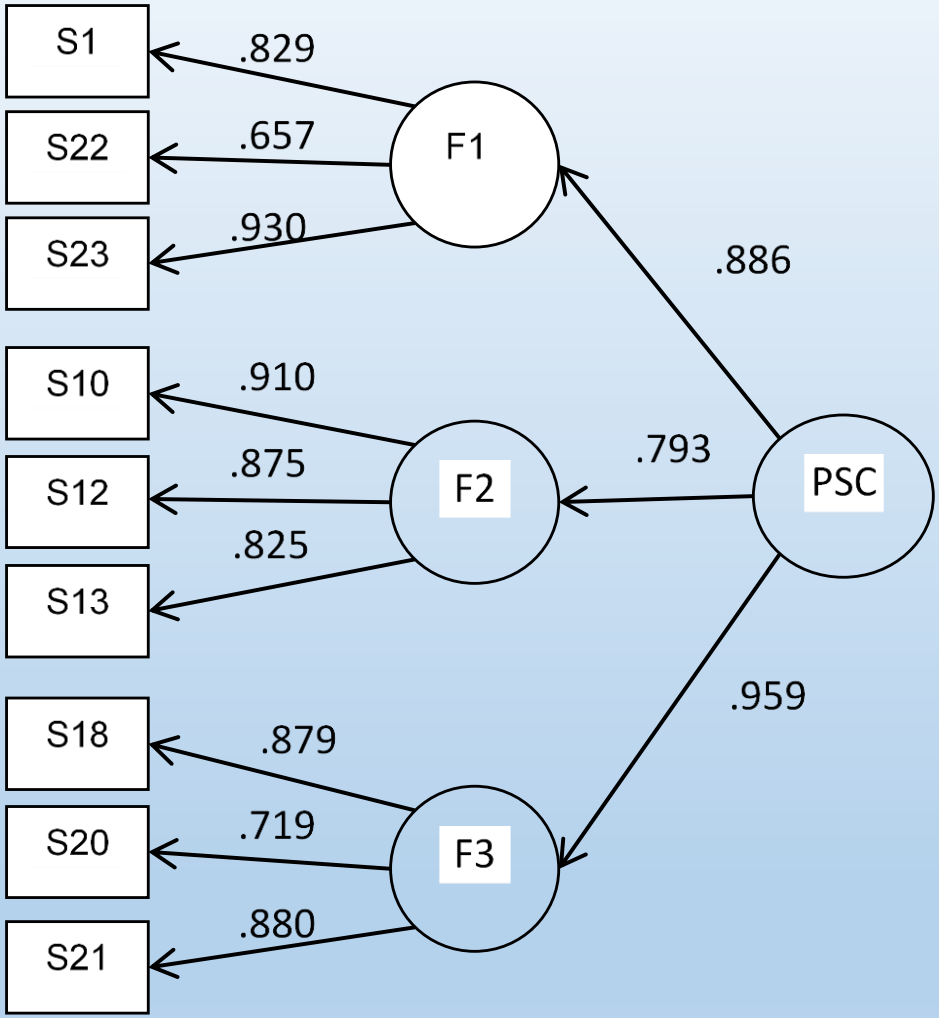
Respondents answer whether they whether they Strongly Disagree, Disagree, Slightly Disagree, Slightly Agree, Agree, or Strongly Agree with the questions below.

Replace the letter "E" with the *Entity* and the letter "M" with the *Membership* that the sample will refer to.

I think this E is a good E
I am not planning on leaving this E
For me, this E is a good fit

M can depend on each other in this E
M can get help from other M if they need it
M are secure in sharing opinions or asking for advice

This E is important to me
I have friends in this E
I feel good helping the E and the M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.910
.875
.825
.879
.719
.880
F1
F2
F3
PSC
.886
.793
.959

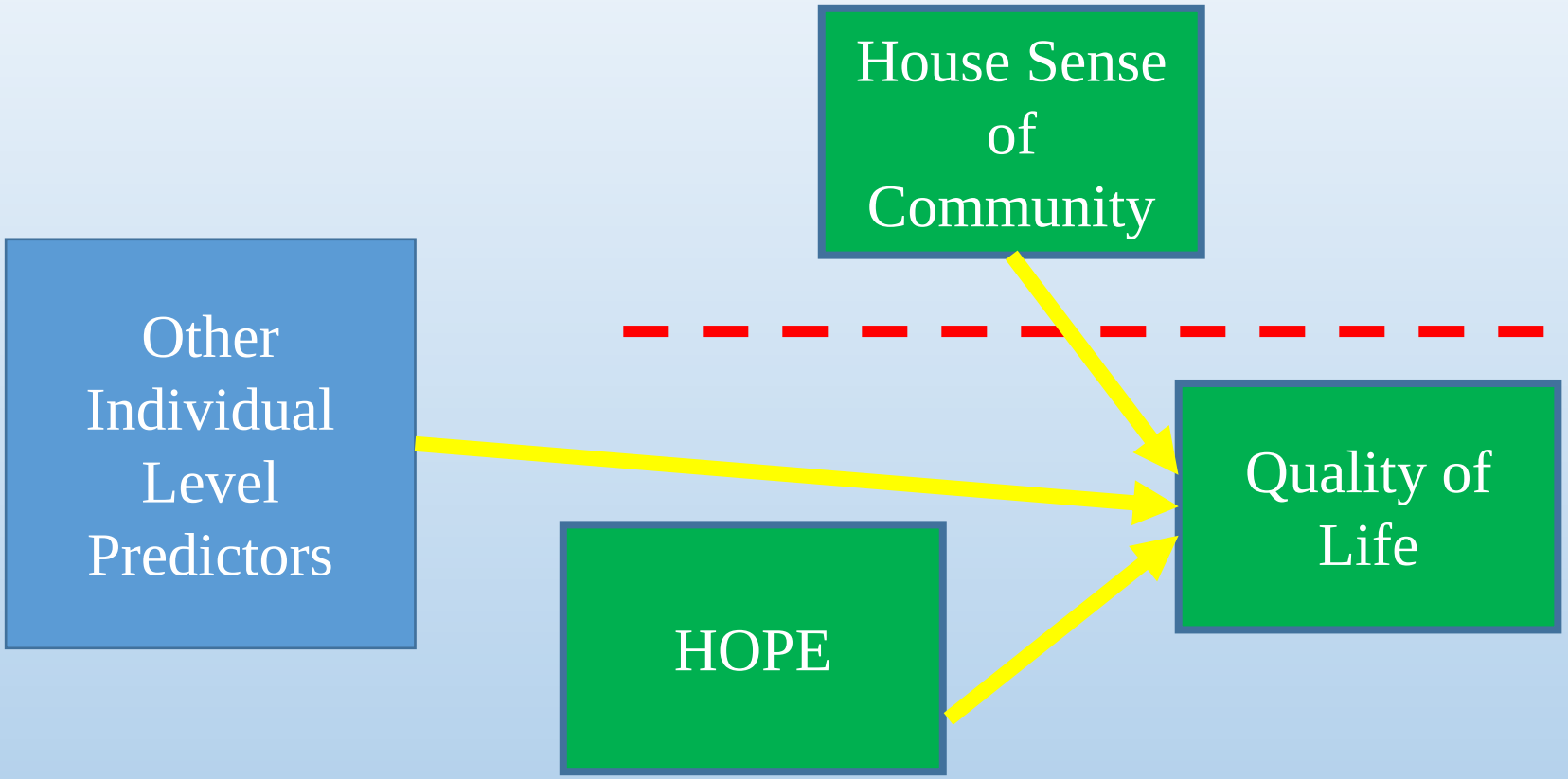
Sense of Community and Trust

- We found both sense of community and trust are ecological aspects of settings that had important influences on hope
  - an engaged individual tends to value trust relationships
- The sense of community *Self* factor was the best predictor of hope
  - suggesting that an individual's personal investment in their house community are related to their hopefulness in terms of goal attainment and opportunities

Investigated the relationship of Hope, Sense of Community, and Quality of Life

- Hope and sense of community were strong predictors of quality of life
- Supporting contextual as well as individual characteristics as possible influences on recovery trajectories
- An important possible function of a recovery residence is the creation of a sense of community
- These findings have implications for both individual and systems-level resource or competency based interventions

Conceptual Model…



Attitudes Towards Medications for Opioid Use Disorder (era 2016)

- The vast majority of residents were not receiving MAT; 32% reported MAT histories
- Negative attitudes regarding MAT were observed among residents who were not receiving MAT
- Those presently receiving MAT reported mixed attitudes regarding their use of MAT in OHs

Majer, J. M., Beasley, C., Stecker, E., Bobak, T. J., Norris, J., Nguyen, H. M., & Jason, L. A. (2018). Oxford house residents' attitudes toward medication assisted treatment use in fellow residents. *Community Mental Health Journal*, *54*(5), 571-577.

Characteristics of OH Residents Utilizing MAT

- There were no significant differences observed in terms of abstinence rates, involvement in 12-step groups, or previous MAT treatments between residents utilizing or not utilizing MAT
- Residents living with others who were utilizing MAT reported more favorable attitudes than residents who were not living with such residents
  - observed only among residents whose primary drug of choice involved heroin or opioids.

Majer, J. M., Jason, L. A., Norris, J., Hickey, P., Jeong, H., & Bobak, T. J. (2020). Medications for opioid use disorder utilization among Oxford House residents. *Community Mental Health Journal*, 56(5), 925-932.

Homophily Effect on OH Residents Using MAT

- We examined the relationship between psychiatric severity and stress among persons utilizing medication assisted treatment (MAT)
  - ➢social networks within recovery homes reduced the effects of psychiatric severity and stress for residents who use MAT when they live with others who also use MAT

Majer, J. M., Bobak, T. J., & Jason, L. A. (2021). Psychiatric severity and stress among recovery home residents utilizing medication assisted treatment: a moderated mediation analysis of homophily. *Advances in Dual Diagnosis, 14*(3), 147-158.

Interpretative phenomenological analysis

- Sample included: 5 women and 3 men, prescribed either methadone or Suboxone, that were living in OHs
- Four general themes emerged from the data: Recovery Process, Managing Logistics of MAT Utilization, Personal Development, and Familial Values
- Individuals prescribed MAT do benefit from living in an OH in order to manage their recovery as well as stay compliant with their medication

- Soto-Nevarez, A., Abo, M., , Hudson, M., Bobak, T., Jason, L.A. (2022). Lived Experiences of Oxford House Residents Prescribed Medication-Assisted Treatment. Submitted for Publication

Discussion

- By identifying mechanisms through which social environments affect health outcomes and looking at system-level evolution
  - Research could contribute to reducing health care costs by improving the effectiveness of the residential recovery home system in the US
  - ➢ also restructuring and improving other community-based recovery settings
- What is needed is low cost but effective ways of replacing those social networks with ones that feature individuals who do not abuse alcohol and drugs, and who are employed in legal activities

Settings that have ecological variables that instill hope

- Might be particularly effective for treating individuals with substance use disorders
  - ➢Hope is at least one component of a successful recovery process
- Research is now needed that would provide insight on within house structure and dynamics as predictors of an individual's likelihood of maintaining a positive recovery trajectory

- Community network-based solutions include recovery homes where individuals can seek support with others for their addictions
- Mutual help systems like Oxford House recovery homes can facilitate access to large supportive networks where people make new friends who all know each other and interact regularly and intimately to promote a new lifestyle and promotes altruism