Mapping the Gap

Leveraging Data to Build Effective Recovery Housing Infrastructure

Presenters

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Thank You to Funders

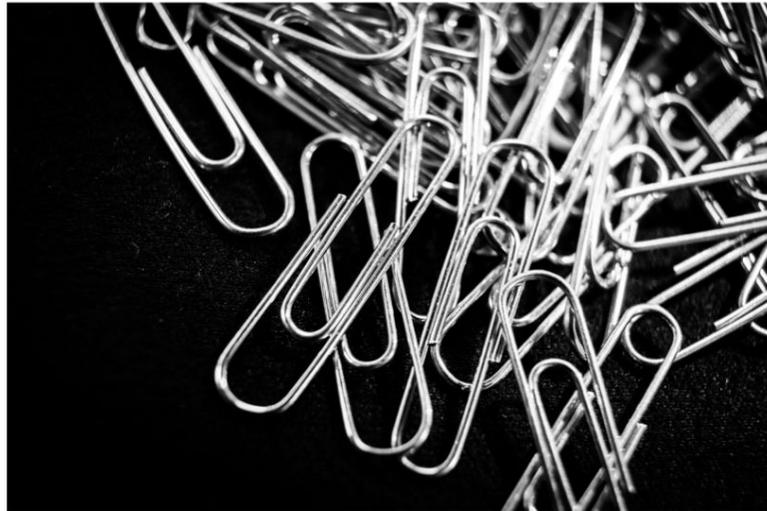# Getting Started with Data

Getting Started with Data

What you Want
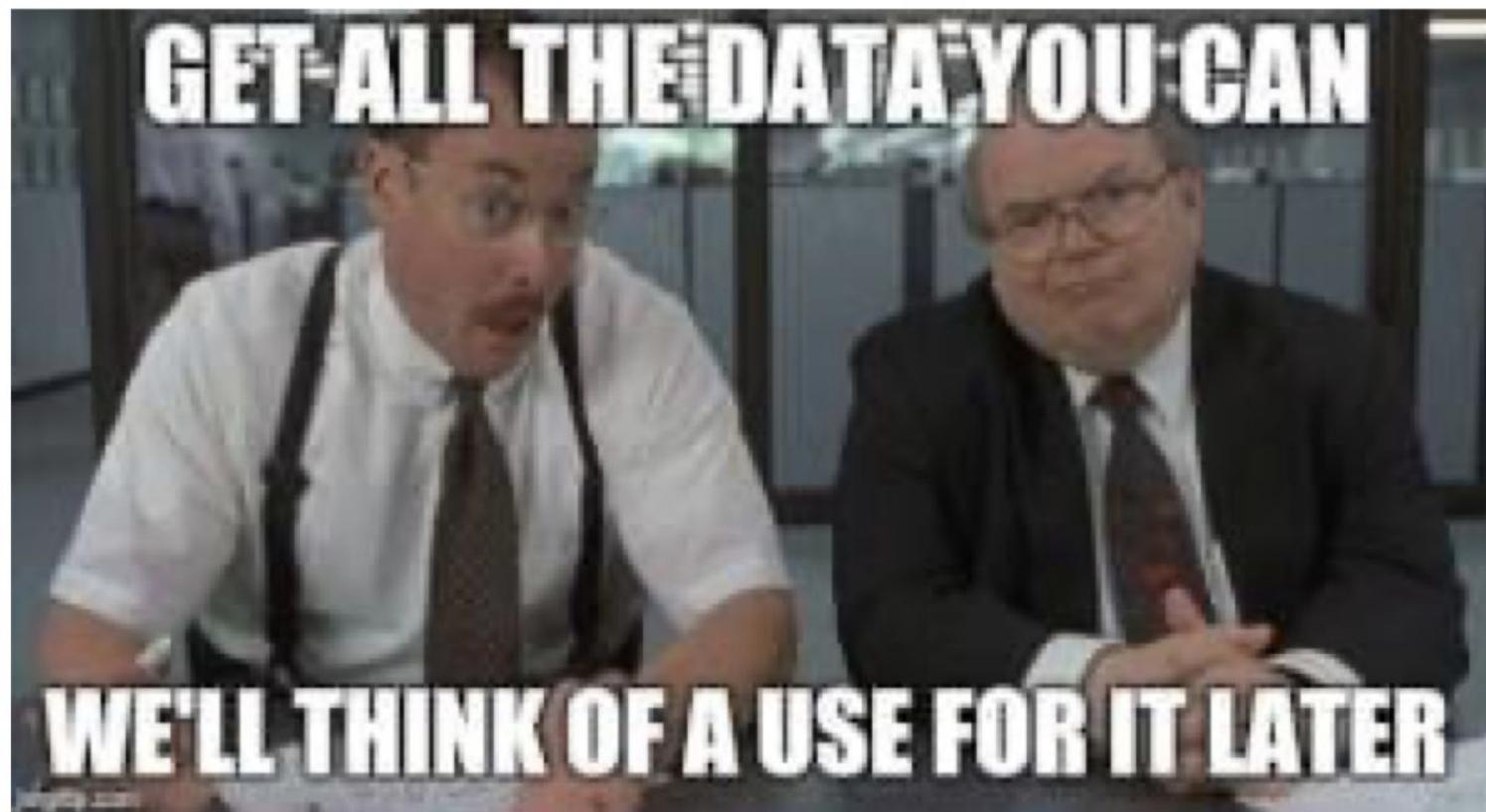

What you Have

The Void of the Unknown

GET ALL THE DATA YOU CAN
WE'LL THINK OF A USE FOR IT LATER

"Perfect is the enemy of good"
- Voltaire

Keep it Simple, Friend.

Taking Stock

- What resources are available to you now?

- What resources are available to those who will be doing the data entry?

- Build buy-in through collaboration.

- Remember that data collection is one thing – data analysis is another.

- There is a learning curve.

Building Blocks

- What do groups of stakeholders want to know? (Hint: It won't be the same across the stakeholders).

- Look to the available literature and existing tools in public domain.

- Think like a decision-maker who does not understand recovery housing – what do we want to be able to tell them?
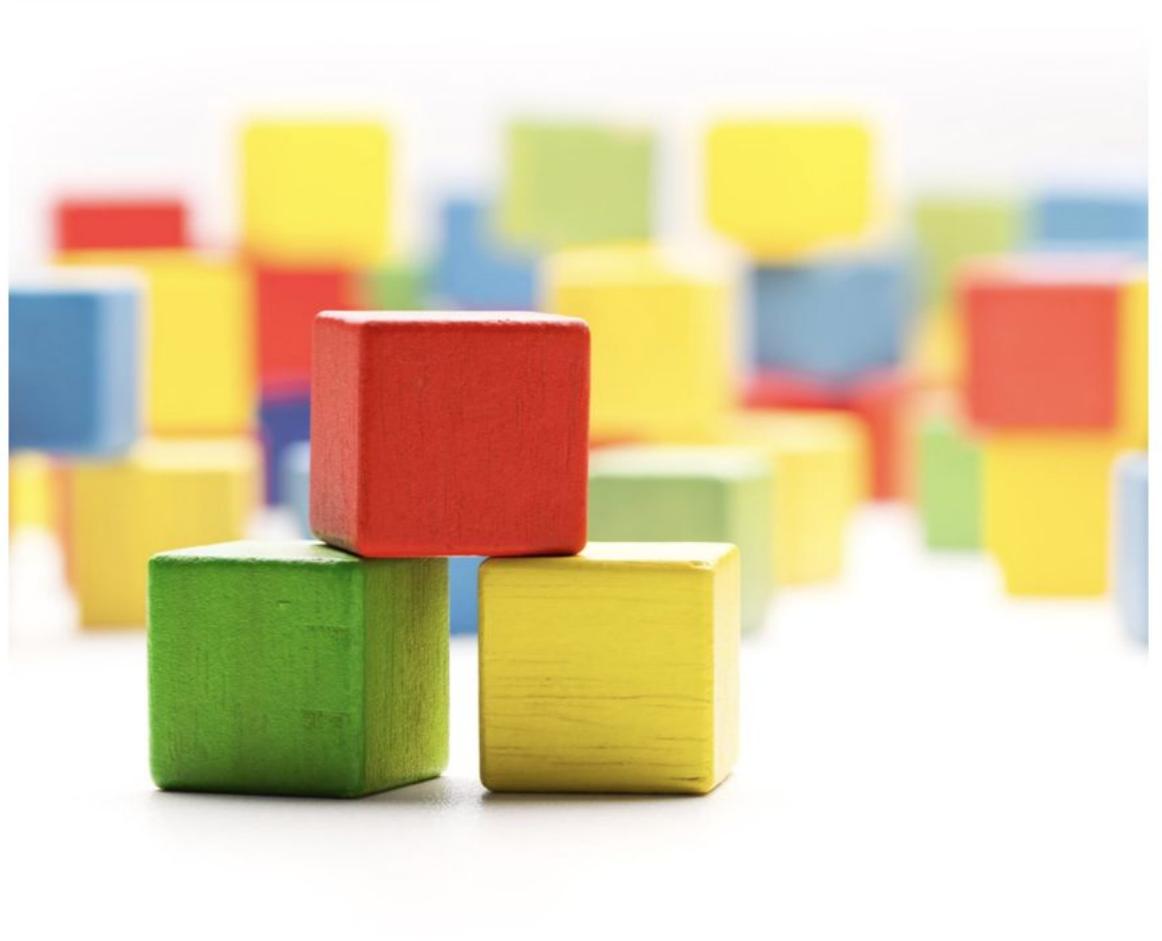
What Matters to Us

Descriptive Research:

- What do we know about residents who are moving into recovery housing?

- What changes do they experience over time?

- What do we know about residents who are moving out of recovery housing?

Correlational Research:

- What seems to make an impact?

Qualitative Research:

- What do residents want to tell us?

Other Measures
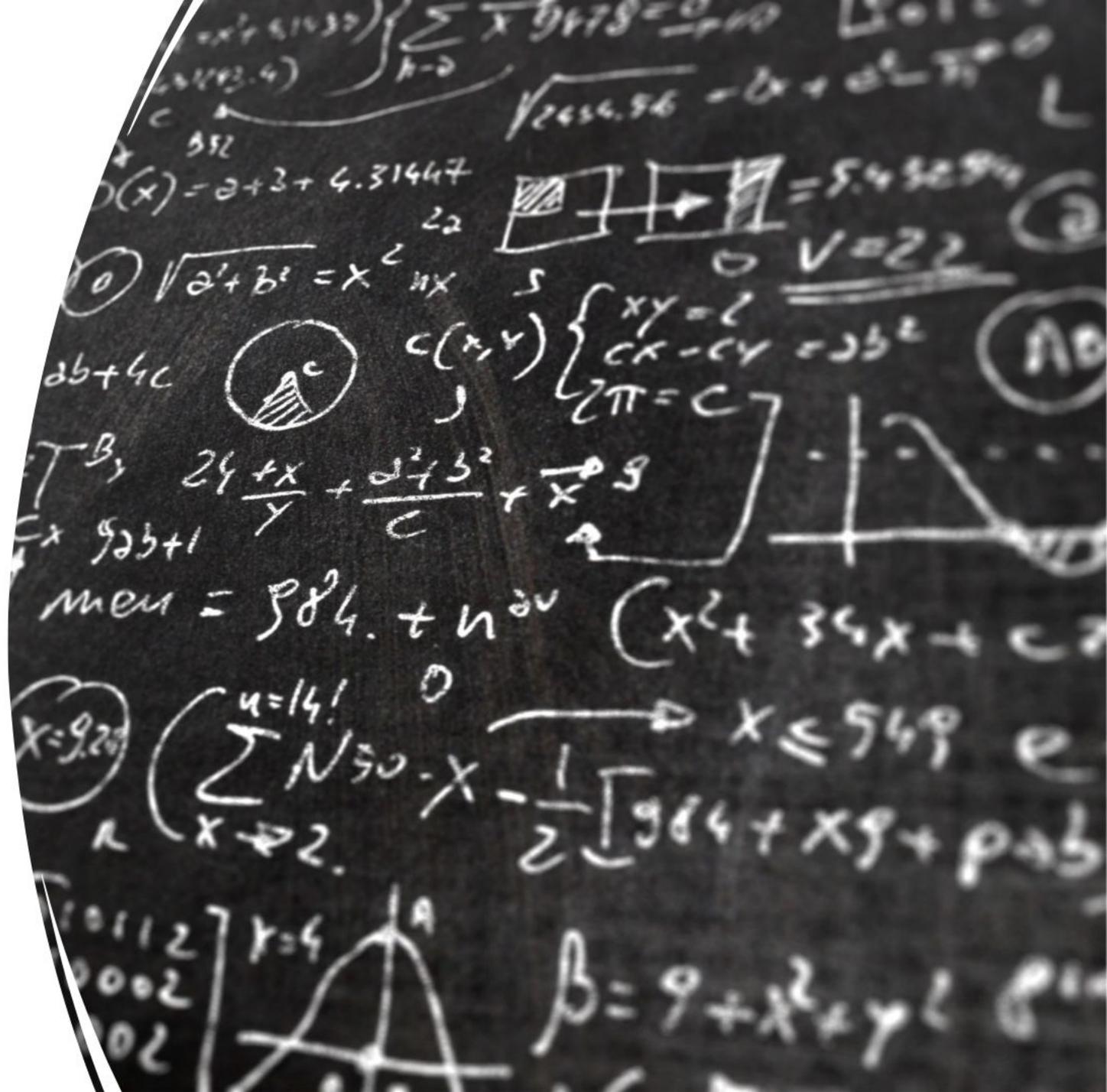
- Social Model
- Characteristics of the Home/Residence
- Capacity
- Level of Support
- Other factors

Consistency is Key

- There is a learning curve to using entering data into a system.
- There is a learning curve to reviewing data reports or a dashboard.
- There is a learning curve to translating data into advocacy and our stories.

Legal and Ethical Considerations

Data Ownership

- You should own the data

- Work with partners who are willing to do "work for hire"

- Be weary of people offering things for free
  - If you are not making a purchase, you are probably the product"

- Look for partnerships that allow you to also gain in the profits

Check-in

- We will take five minutes for questions.

- Questions that we cannot get to, please write them down on the flipchart in the room so that the presenters can see them and work to answer them.

Structure of the ORH Outcomes Tool

Three time intervals for data collection:
- Move in
- Six months into the stay
- Move out

Categories of questions include:
- Demographics
- Addiction history
- Living situation
- Economic and social circumstances (e.g., debts, personal documents, parenting status)
- Education and Employment
- Experience with recovery and recovery supports
- Recovery capital
- Questions about experience as a resident (at move-out)

Outcomes Data: May - December 2022
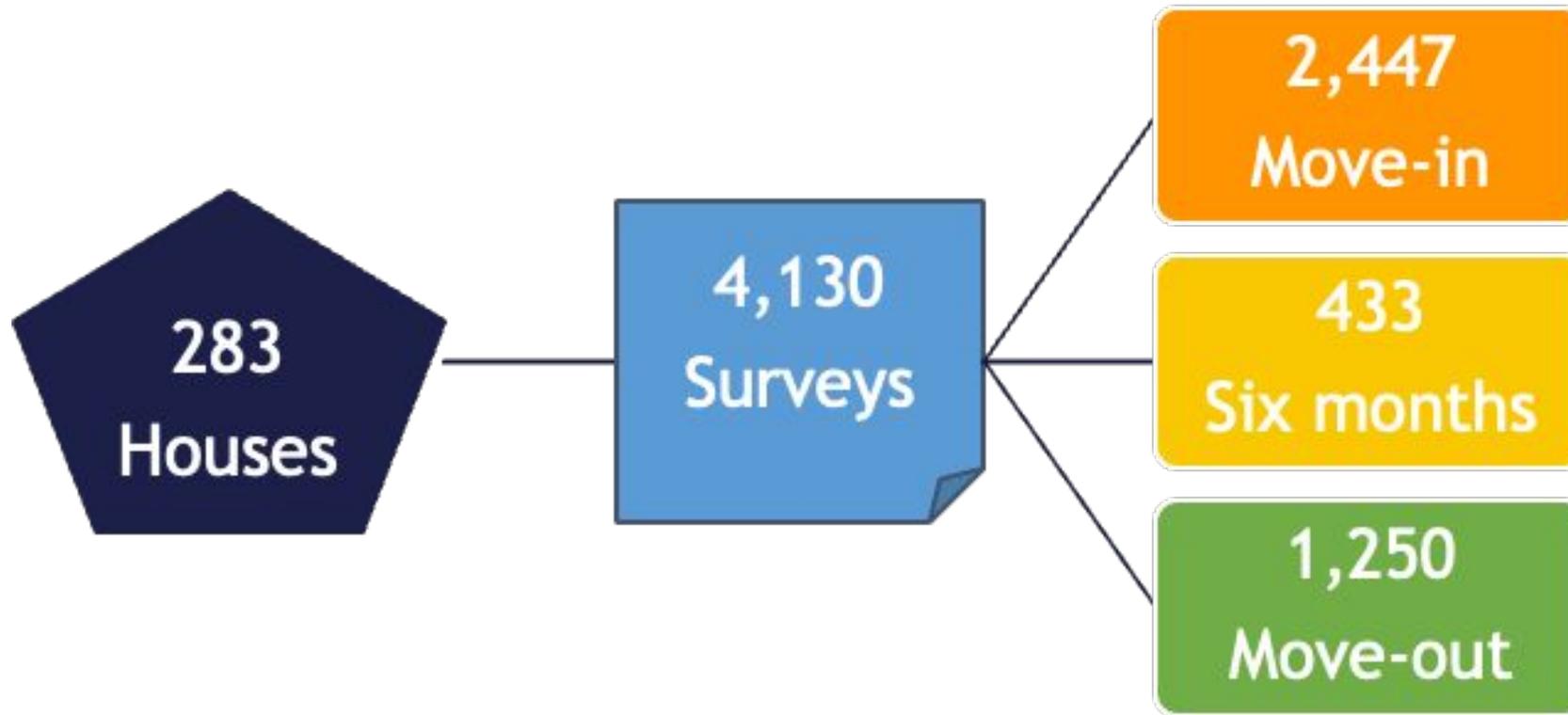
Dispelling Myths with Data

- Myth: "By only funding opioid addiction we can stop this crisis"
- Fact: It is an addiction crisis that needs to be addressed comprehensively.

Top 4 Substances of Abuse:

- **Alcohol (52.0%)**
- **Marijuana (47.4%)**
- **Methamphetamines (44.0%)**
- **Fentanyl (35.8%)**

80%+ reported poly-substance use

Substances Used By Participants

Data collected at move-in. Multiple responses allowed.

Classes
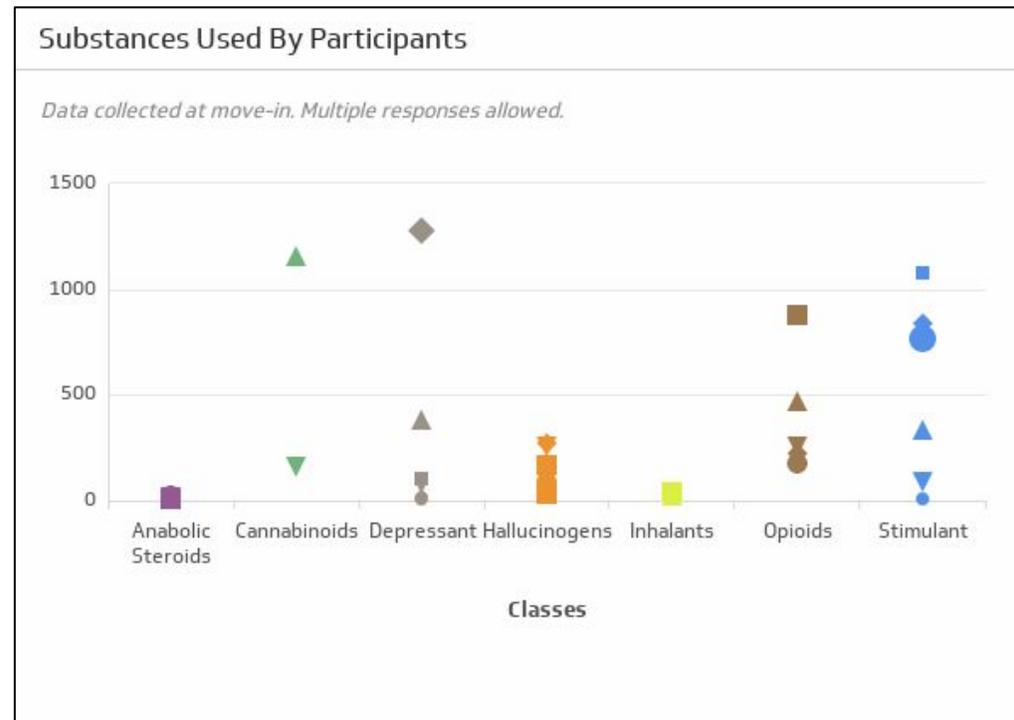
Dispelling Myths with Data

- Myth: "The addiction crisis is mainly impacting young people"
- Fact: The addiction crisis is being felt across the lifespan

Age

Data collected at move-in.

- 18-24 years (197) [8%]
- 25-29 years (359) [15%]
- 30-34 years (496) [20%]
- 35-39 years (427) [17%]
- 40-44 years (327) [13%]
- 45-49 years (225) [9%]
- 50-54 years (184) [8%]
- 55-59 years (135) [6%]
- 60-64 years (67) [3%]
- 65-69 years (19) [1%]
- 70+ years (7) [0%]
- Prefer not to answer (4) ...
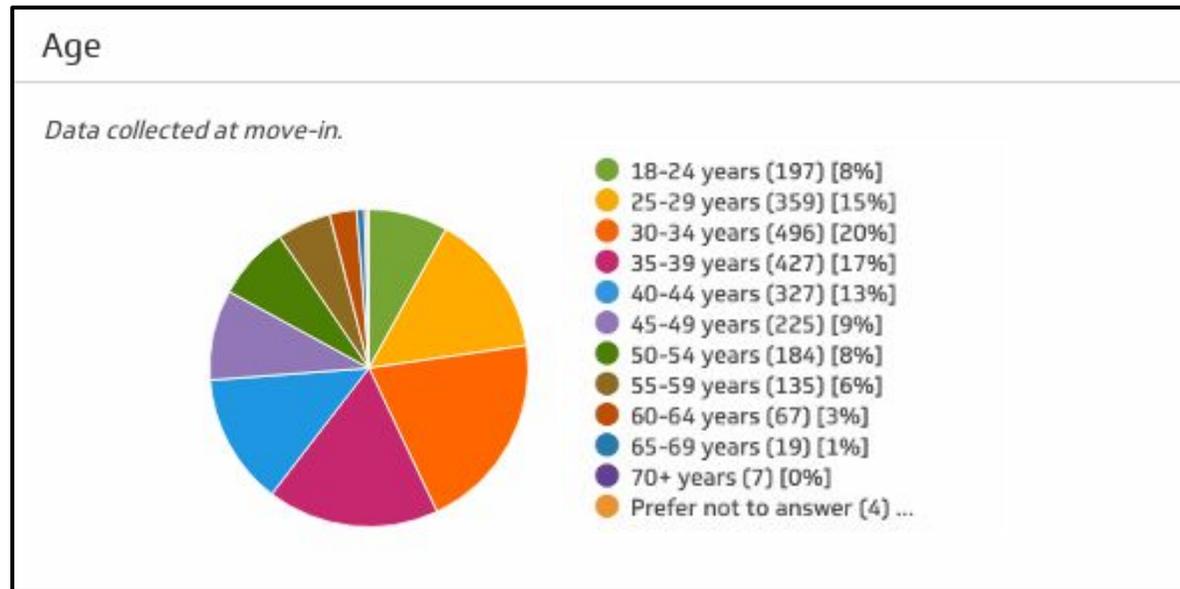
Dispelling Myths with Data

- Myth: "All people in recovery housing are criminals"
- Fact: Many people in recovery housing are not involved in the criminal justice system

At any given time, slightly less than half of respondents were involved in the criminal justice system.

- 48% at move-in
- 45% at six months
- 44% at move-out

Criminal Justice Accomplishments in Recovery Housing

Multiple responses allowed.

SIX MONTHS   n=433

- Six Months

Completed drug court requirements	23
Completed other criminal justice requirements	53
Completed parole/probation	31
None of the above	317
Prefer not to answer	23
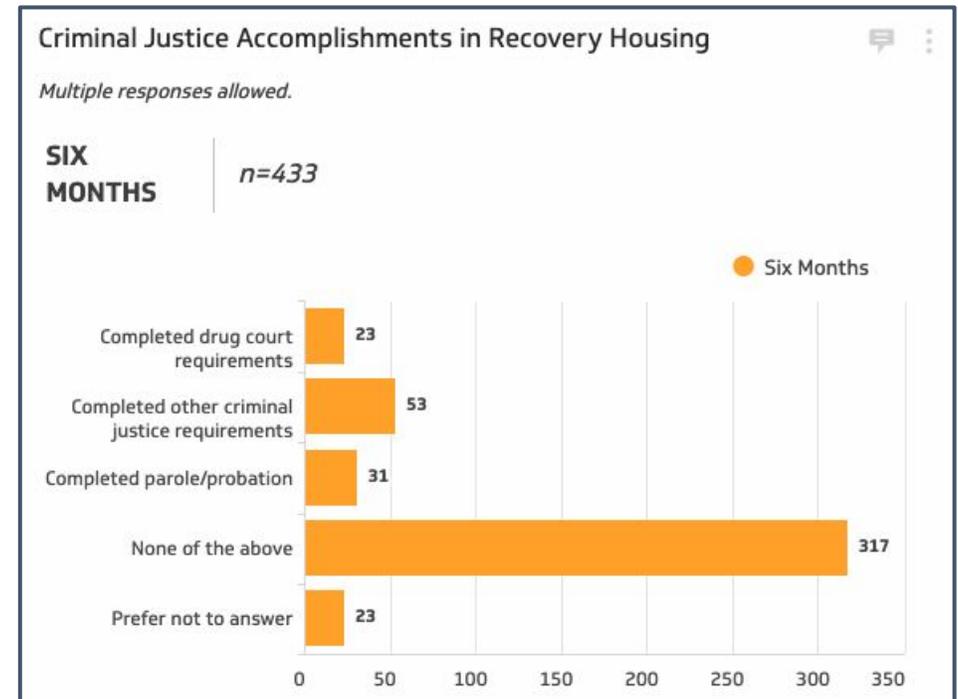
Successes in Recovery Housing - Substance Use

Alcohol Use in the Past 30 Days

MOVE-IN n=2,447
- No use (1973) [81%]
- 1-10 days (228) [9%]
- Prefer not to answer (45) [2%]
- 21-30 days (91) [4%]
- 11-20 days (110) [4%]

SIX MONTHS n=433
- No use (419) [97%]
- Prefer not to answer (6) [1%]
- 1-10 days (2) [0%]
- 11-20 days (1) [0%]
- 21-30 days (5) [1%]

MOVE-OUT n=1,250
- No use (913) [73%]
- 21-30 days (23) [2%]
- 1-10 days (116) [9%]
- Prefer not to answer (21) [2%]
- 11-20 days (15) [1%]
- Unknown (162) [13%]

Illicit Drug use in the past 30 days

MOVE-IN n=2,447
- No use (1852) [76%]
- 1-10 days (227) [9%]
- 11-20 days (167) [7%]
- Prefer not to answer (50) [2%]
- 21-30 days (151) [6%]

SIX MONTHS n=433
- No use (416) [96%]
- Prefer not to answer (5) [1%]
- 21-30 days (7) [2%]
- 1-10 days (3) [1%]
- 11-20 days (2) [0%]

MOVE-OUT n=1,250
- No use (856) [68%]
- 21-30 days (21) [2%]
- 1-10 days (158) [13%]
- Prefer not to answer (26) [2%]
- 11-20 days (22) [2%]
- Unknown (167) [13%]

Successes in Recovery Housing - Employment

Move-In

- **23%** unemployed and not looking for work.

- **7%** working part-time.

- **10%** working full-time.

Six Months

- **6%** unemployed and not looking for work.

- **23%** working part-time.

- **38%** working full-time.

Move-Out

- **15%** unemployed and not looking for work.

- **13%** working part-time.

- **29%** working full-time.

Successes in Recovery Housing - Debt

Respondents Over $5,000 in Debt

50% at move-in

↓

42% at move-out

Most Common Types of Debt

1. **Court Fees**

2. **Past Due Bills**

3. **Child Support**

4. **Credit Cards**

Successes in Recovery Housing - Education

Educational Status

	College	Vocational School	Skilled Training
Move-In	5.36%	1.09%	2.49%
Six Months	7.11%	4.00%	11.11%

Educational Attainment

- **17.32% had achieved a high school diploma by six months.**

- **14.80% had achieved a high school diploma by move-out.**

- **5.31% had achieved a technical/vocational certification by six months.**

- **2.64% had achieved a technical/vocational certification by move-out.**

Successes in Recovery Housing - Length of Stay

- 29% stayed less than a month

- 44% stayed one to six months

- 25% stayed more than six months

Possession of Personal Documents

	Stayed Longer than a Month	Total Population
Possess a driver's license	42%	36%
Possess a state ID	67%	61%

Employment Status

	Stayed Longer than a Month	Total Population
Part-time paid work	38%	29%
Full-time paid work	17%	13%

Equity in Analysis

Outcomes of Special Populations - LGBTQ+

Members of the LGBTQ+ population were more than twice as likely to identify as female.

LGBTQ+ population had the highest rate of uninvolvement in recovery supports at move-in (31.48%), but by move-out, no one in this population reported uninvolvement.

34% of LGBTQ+ rated their mental health as "Good on most days" compared to 50% of their heterosexual counterparts.
By move-out, that gap had narrowed, with 60% of LGBTQ+ and 64% of heterosexual populations rating their mental health as "Good on most days."

Though they reported relatively low rates of a sense of community and belonging at move-in, those identifying as LGTBQ+ had surpassed the percentage of heterosexual respondents reporting the same at move-out.

Equity in Analysis

Outcomes of Special Populations - Other Populations

Males and females showed similar employment rates at move-in, but by move-out, males were twice as likely to be working full-time.

BIPOC population had the 2nd highest rate of uninvolvement in recovery supports at move-in (31%), but by move-out, no one in this population reported uninvolvement.

28% of BIPOC were over 50 years old, compared to 15% of residents identifying as White.

Females were more likely to report having people to rely on in support of their recovery.
Males were more likely to report having a clear sense of who they were.

Build on your Success

- **After 5 years of collecting data, ORH evaluated the tool and made updates.**
  - Based on changes in cultural conversations, what we'd realized was missing, and with a better understanding of what data was most valuable

- **Do you want to change data collection methods?**
  - E.g. change a question from multiple-response to single response

- **What deeper questions do you want to ask?**
  - E.g., expanded options for gender and sexual identity, education/criminal justice accomplishments specifically asked

- **What additional information do you want to collect?**
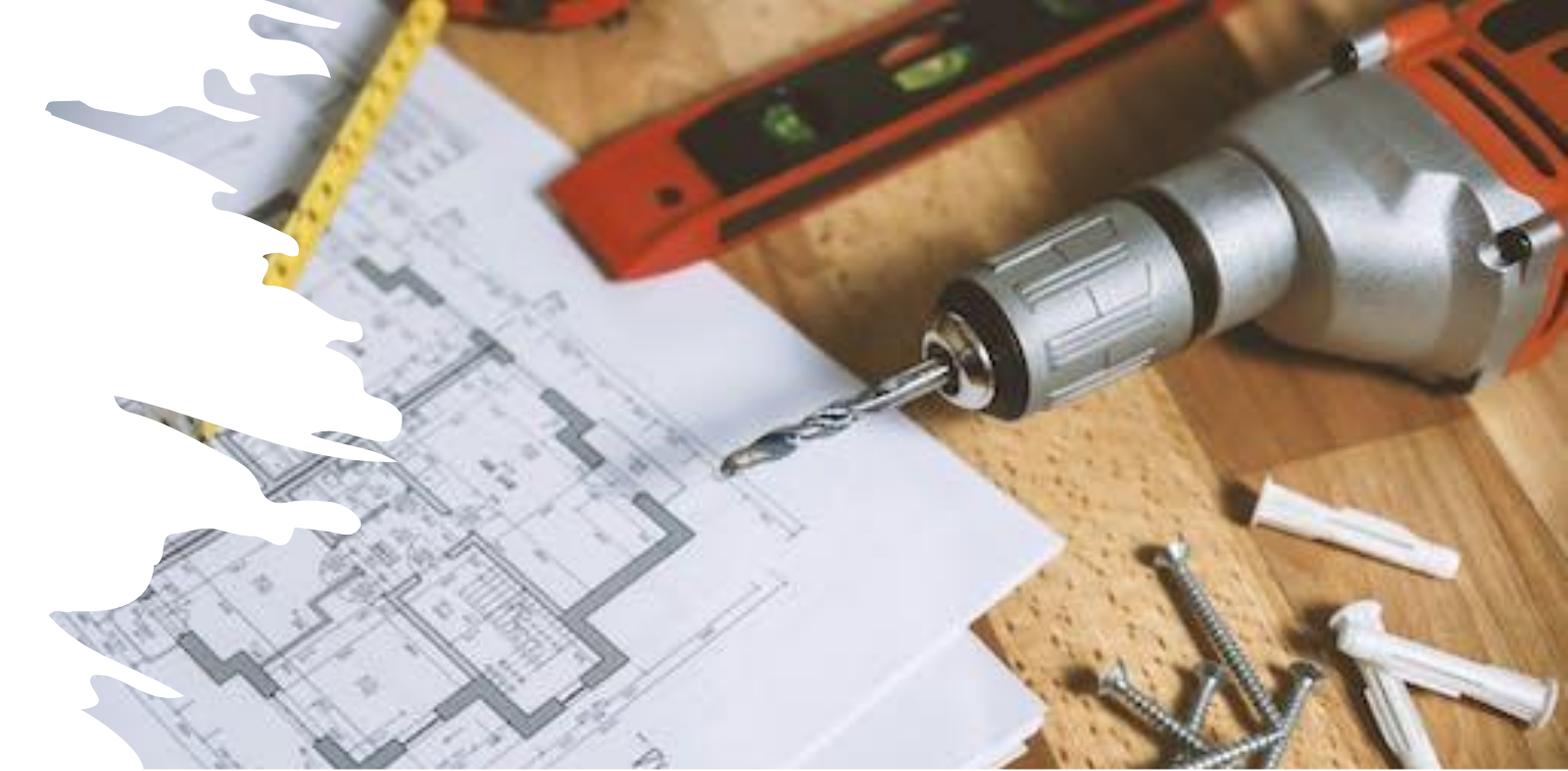 - E.g., veteran status, type of insurance

Questions
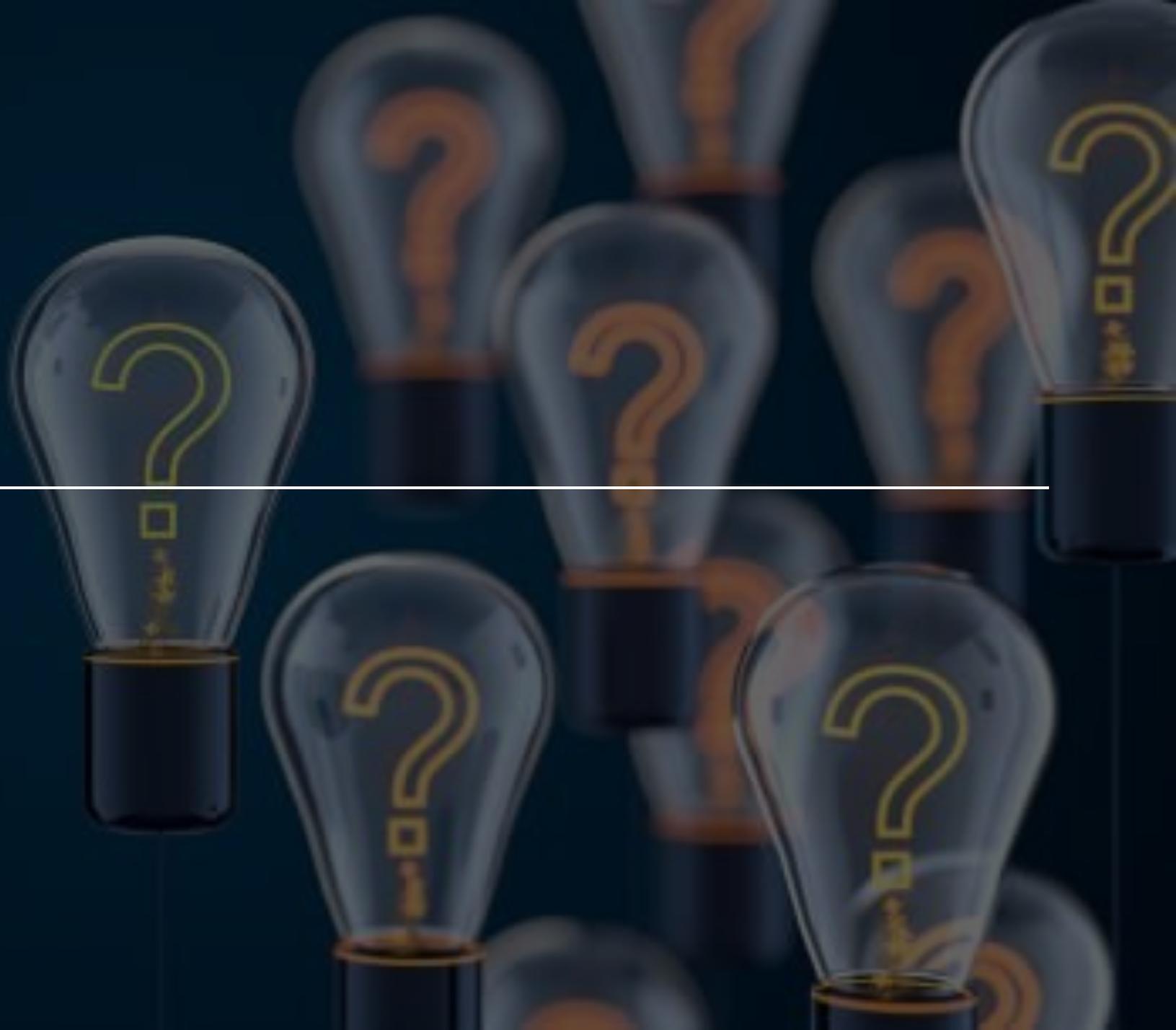
Building on the Basics

- Leverage your existing data to answer deeper questions

- "How much recovery housing do we need?" and "Are we meeting that need?"

What is CAST?

- Calculating an Adequate System Tool (CAST)
  - Version 1.0 (2015): Developed in 2015 at Substance Abuse and Mental Health Services Administration (SAMHSA)

  - Version 2.0 (2017): Updated to include opioid response module and estimate of risk from social determinants

  - Version 3.0 (2020): Updated to include rural specific estimates, expanded interventions, and additional modules
    - Forthcoming article: Recovery Support and Capacity Assessment Using the Calculating an Adequate System Tool (CAST): Two case studies" – *Substance Abuse*

  - Version 4.0 (now): In process, shifting to a web-based platform, and adding additional modules
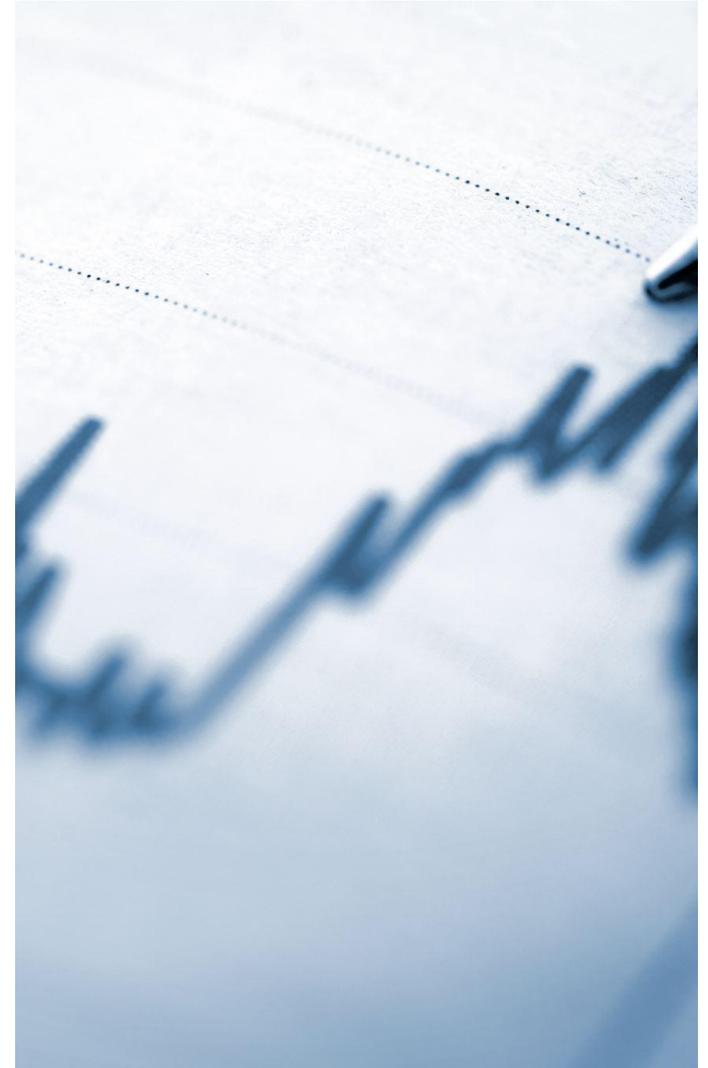   - Recovery Residences as one of these modules

How has CAST been used?

- State-wide assessments: Nevada and Oregon

- Regional assessments: Ohio, Montana, New Hampshire

- County assessments: Delaware, Montana, Pennsylvania, Michigan

- Specialty populations: Adapted for use on U.S. Army installations through a project with the Army Public Health Center
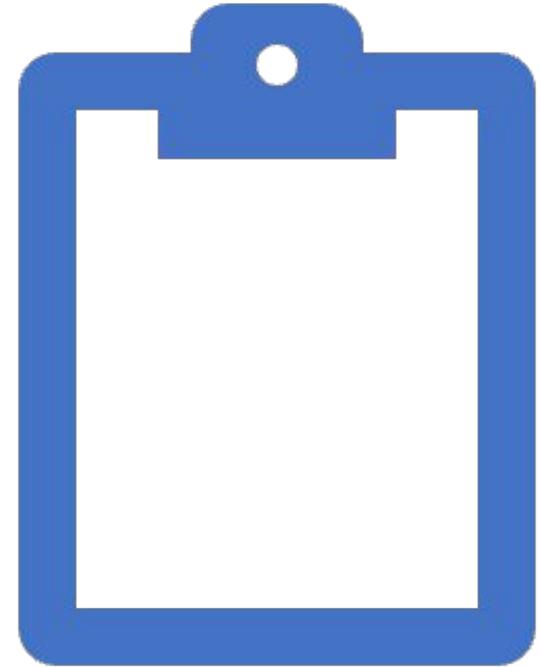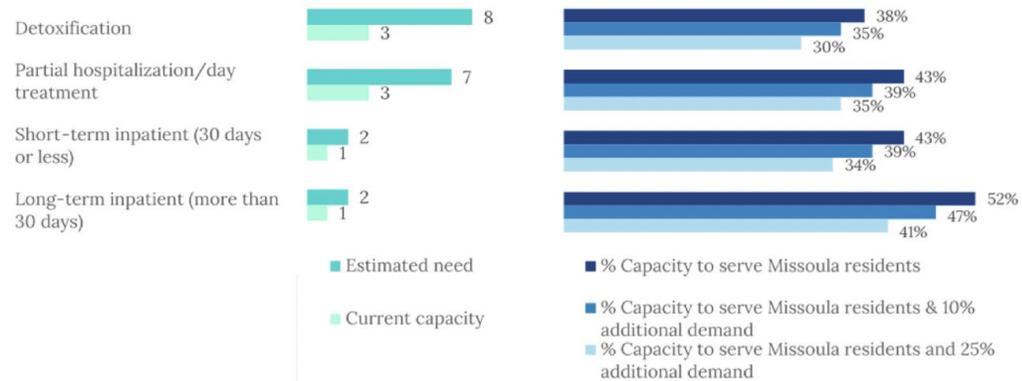
Why is CAST useful and distinctive?

- "A recently developed, promising framework that uses social indicators to estimate substance abuse treatment need in a population is the Calculating for an Adequate System Tool or CAST (Green, et al., 2016). **This methodology provides a framework for estimating needs at the local level and, based on these estimates, calculating community-specific recommendations at the service level for components of the continuum of care (promotion, prevention, referral, treatment, and recovery) by using social indicators to modify estimates of the population's needs**."

    - *Needs Assessment Methodologies in Determining Treatment Capacity for Substance Use Disorders: Final Report, U.S. HHS, Assistant Secretary for Planning and Evaluation, 2019*
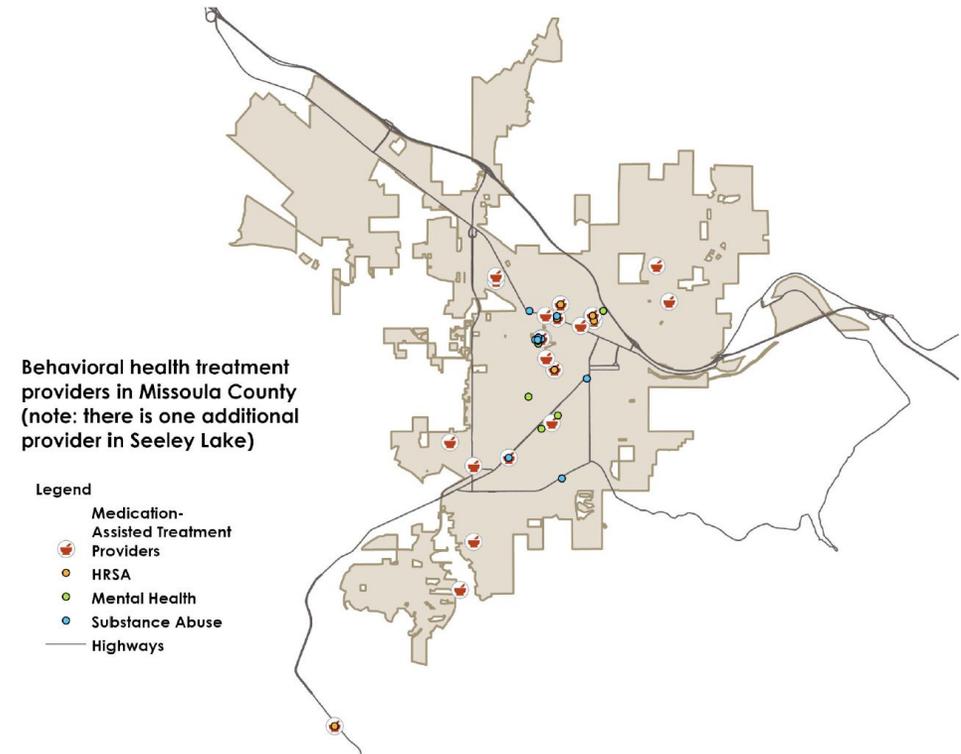
Missoula County, MT

Figure 6. Inpatient capacity for treatment in Missoula County

Detoxification — Estimated need: 8, Current capacity: 3
% Capacity to serve Missoula residents: 38%
% Capacity & 10% additional demand: 35%
% Capacity & 25% additional demand: 30%

Partial hospitalization/day treatment — Estimated need: 7, Current capacity: 3
43%
39%
35%

Short-term inpatient (30 days or less) — Estimated need: 2, Current capacity: 1
43%
39%
34%

Long-term inpatient (more than 30 days) — Estimated need: 2, Current capacity: 1
52%
47%
41%

Legend:
- Estimated need
- Current capacity
- % Capacity to serve Missoula residents
- % Capacity to serve Missoula residents & 10% additional demand
- % Capacity to serve Missoula residents and 25% additional demand

Figure 5. Geographic distribution of behavioral health treatment providers in Missoula County

Behavioral health treatment providers in Missoula County (note: there is one additional provider in Seeley Lake)

Legend
- Medication-Assisted Treatment Providers
- HRSA
- Mental Health
- Substance Abuse
- Highways

CAST in Ohio

- Partnership with Might Crow to assess Franklin and Scioto Counties in 2021
  - Gretchen shared the tool with Danielle

- In discussions with Danielle, it became clear that the logic of CAST could be adapted to estimate capacity of recovery residences

Three key questions

What is the current capacity of the existing bed infrastructure of recovery houses in Ohio and does this meet the projected demand for this service?

What are projections for the cost savings to the behavioral health treatment care system in Ohio with additional investments in recovery housing?

Are there disparities in access or utilization by geography race, gender, and socio—economic status for recovery housing in Ohio?
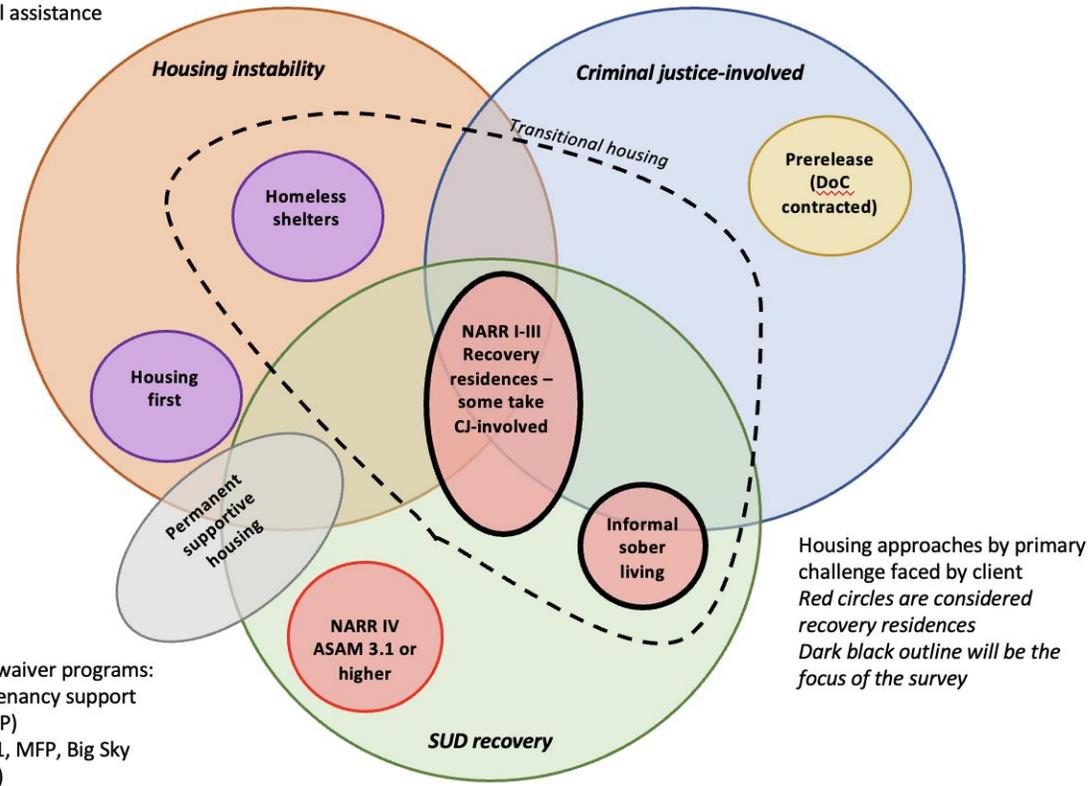
Adapting CAST to support Ohio Recovery Housing: Montana RR Census Project

NARR Levels

STANDARDS CRITERIA		RECOVERY RESIDENCE LEVELS OF SUPPORT			
		LEVEL I Peer-Run	LEVEL II Monitored	LEVEL III Supervised	LEVEL IV Service Provider
	ADMINISTRATION	• Democratically run • Manual or P& P	• House manager or senior resident • Policy and Procedures	• Organizational hierarchy • Administrative oversight for service providers • Policy and Procedures • Licensing varies from state to state	• Overseen organizational hierarchy • Clinical and administrative supervision • Policy and Procedures • Licensing varies from state to state
	SERVICES	• Drug Screening • House meetings • Self help meetings encouraged	• House rules provide structure • Peer run groups • Drug Screening • House meetings • Involvement in self help and/or treatment services	• Life skill development emphasis • Clinical services utilized in outside community • Service hours provided in house	• Clinical services and programming are provided in house • Life skill development
	RESIDENCE	• Generally single family residences	• Primarily single family residences • Possibly apartments or other dwelling types	• Varies – all types of residential settings	• All types – often a step down phase within care continuum of a treatment center • May be a more institutional in environment
	STAFF	• No paid positions within the residence • Perhaps an overseeing officer	• At least 1 compensated position	• Facility manager • Certified staff or case managers	• Credentialed staff

CAST-RH Inputs

- What was needed in Ohio in order to complete CAST
  - Quality information on homes – Census and capacity
  - Demographic data about clients – Allowed for disparities assessment
  - Publicly available federal and state data – Supplements and comparisions

$$\frac{\text{Relevant Population} * \text{Program usage rate} * \text{Frequency}}{\text{Group size}}$$

Relevant population – Estimate of the total number of individuals in a county or region who could use the intervention (broken down further below)

Usage rate – Estimate of the eligible population who are likely to use the service

Frequency – Estimate of the frequency with which the population will use the service in one year

Group size – Estimate of the total number of individuals who are served by an intervention (units vary by intervention type)

Basic CAST equation

Inclusion Criteria

- Certified by ORH

- Applied for certification in past 5 years

- Applied for state or federal funds to support recovery housing

- Reported to be offering recovery housing by local county boards of mental health and addiction services

- Completed an online survey from ORH

Sample – Housing capacity

300 ORGANIZATIONS

800 RESIDENCES

Results – Level 1 (state)

Table 1. Statewide estimates of Level 1 recovery housing bed capacity - By sex

	Statewide Bed Needs - Level 1		
INTERVENTION	ESTIMATED NEED	CURRENT CAPACITY	ESTIMATED PERCENT OF NEED MET
All	5,769	456	8%
Female	1,826	238	13%
Male	3,943	335	8%

Results – All Levels (state)

Figure 2. Overall proportion of need for recovery housing bed met by current capacity in Ohio

Proportion of Need Met by Current Bed Capacity

Counties/Service Areas with no RR

Figure 4. Counties and regions with no recovery housing at any level

Number of residences
- At least one residence
- No residences at any level
- Region
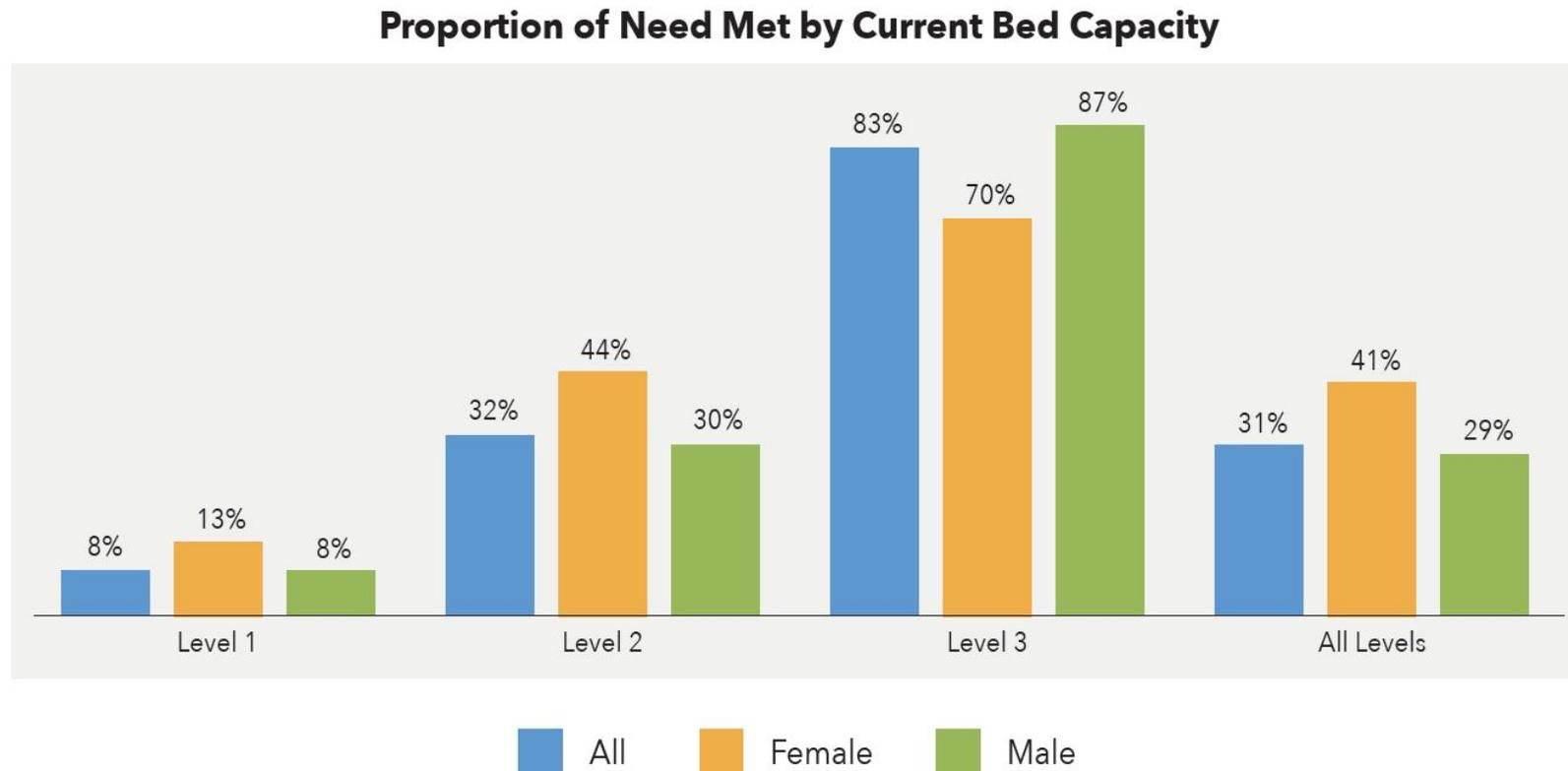
Results – By County/Service Area

Table 5. Estimated percent of need met for Levels 1-3 by Behavioral Health Authority Region

REGION	Level 1			Level 2			Level 3		
	All	Female	Male	All	Female	Male	All	Female	Male
Adams, Lawrence, Scioto	0%	0%	0%	59%	57%	60%	386%	565%	262%
Allen, Hardin, Auglaize	0%	0%	0%	102%	116%	96%	187%	167%	200%
Ashland	0%	0%	0%	15%	30%	8%	121%	298%	0%
Ashtabula	0%	0%	0%	36%	20%	43%	0%	0%	0%
Athens, Hocking, Vinton	9%	0%	13%	33%	46%	28%	71%	0%	118%
Belmont, Harrison, Monroe	0%	0%	0%	0%	0%	0%	0%	0%	0%
Brown	0%	0%	0%	16%	0%	23%	0%	0%	0%
Butler	0%	0%	0%	0%	0%	0%	0%	0%	0%
Champaign, Logan	0%	0%	0%	21%	38%	17%	0%	0%	0%
Clark, Greene, Madison	0%	0%	0%	22%	44%	12%	51%	60%	46%
Clermont	0%	0%	0%	17%	23%	15%	0%	0%	0%
Clinton, Warren	0%	0%	0%	3%	0%	4%	34%	26%	39%
Columbiana	0%	0%	0%	5%	0%	7%	0%	0%	0%

Net Economic Benefit

- Lo Sasso et al. (2012)
  - Net economic benefit – overall savings and benefits for individuals and society

Net Economic Benefit = Cost-Savings + Cost-Benefit

Estimates

Estimated cost-savings from funded recovery housing (2022): $34,897,500

Estimated total economic benefit of recovery housing (2022): $51,042,000.

Financial impact of increased enrollment

Table 6. Potential cost impacts of 10% or 25% increased enrollment in recovery housing in Ohio

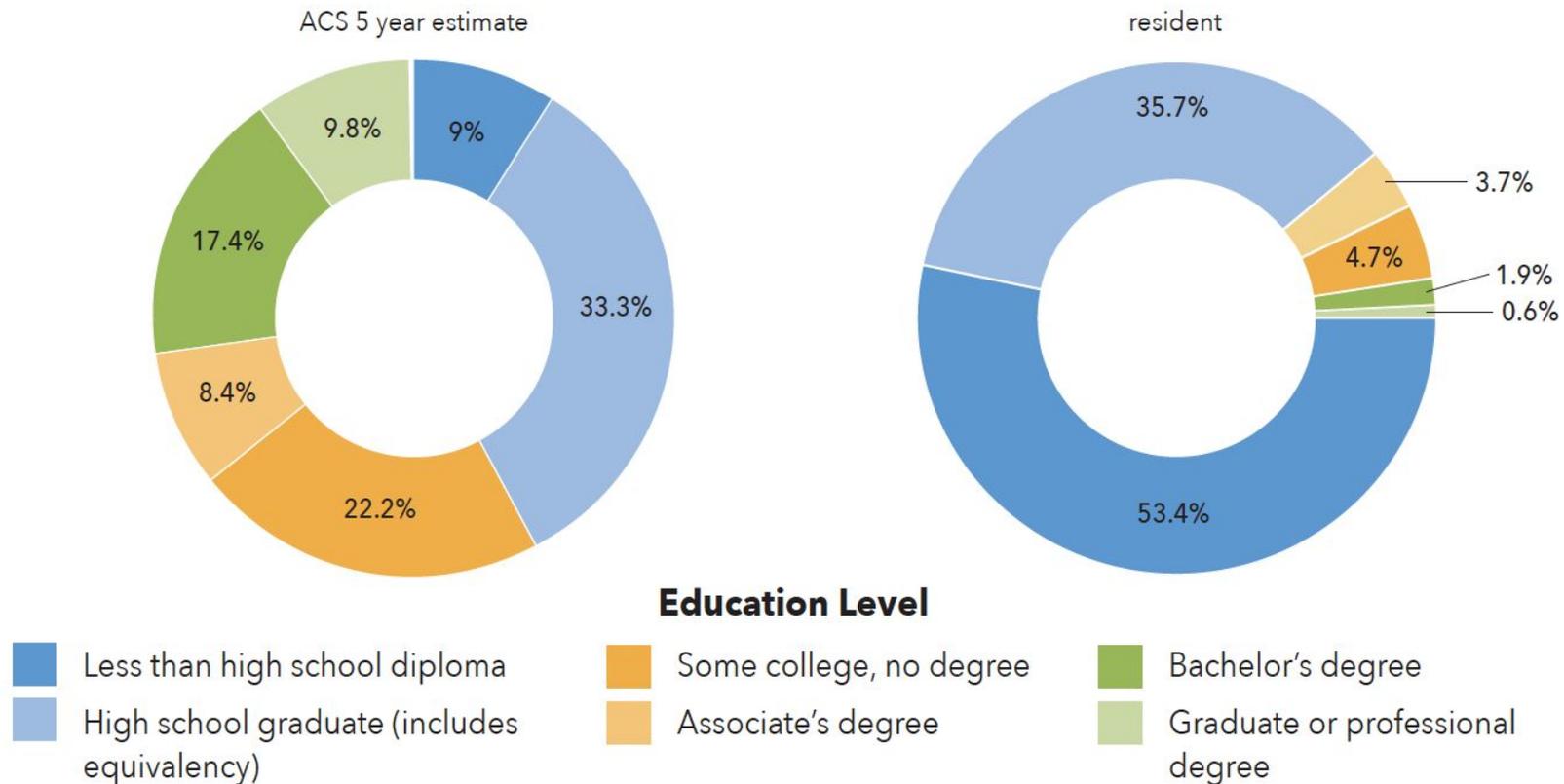| Economic Impact of Increased Enrollment		
SCENARIO	COST-BENEFITS	COST SAVINGS
10% increase in enrollment	$3,489,750	$8,593,950
25% increase in enrollment	$8,724,375	$21,484,875

Equity in access analysis – Income

Figure 11. Comparison of income level of recovery residents and Ohio population

ACS 5 year estimate

59.2%   40.8%

resident

48.6%   1.2%   50.2%

Income Level

- $49,999 or less
- $50,000 or more
- No income at this time

Equity in access - Education

Figure 12. Comparison of education level of recovery residents and Ohio population

ACS 5 year estimate

resident

Education Level

- Less than high school diploma
- High school graduate (includes equivalency)
- Some college, no degree
- Associate's degree
- Bachelor's degree
- Graduate or professional degree

Equity in access - Race

Figure 14. Differences in proportion of black population: Region v. Recovery residents

Race: Black or African American Only
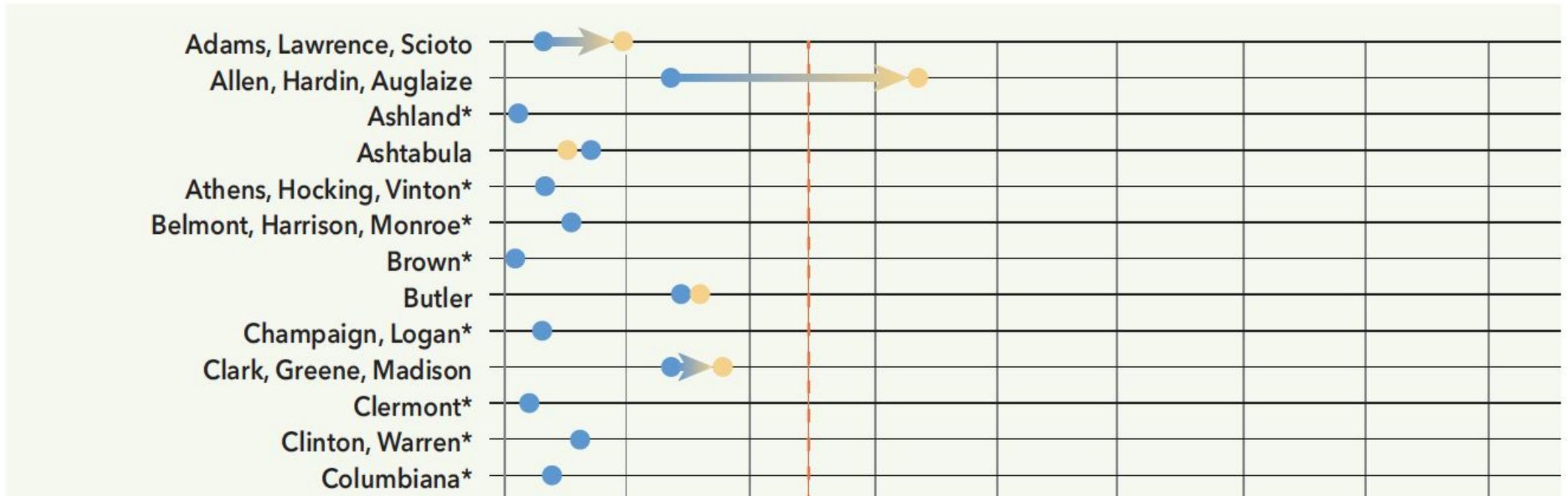
Equity in access - Results

1

Race/ethnicity aligns with Ohio, with significant variation across regions

2

More females engaged in RH in Ohio than proportion of adult population in Ohio

3

Low household incomes (less than $15,000 per year) in recovery housing is much higher than population of Ohio

How it has been received/ how did it make a difference

Impact
- Allowed statewide and local coalitions to prioritize needs

Testimony
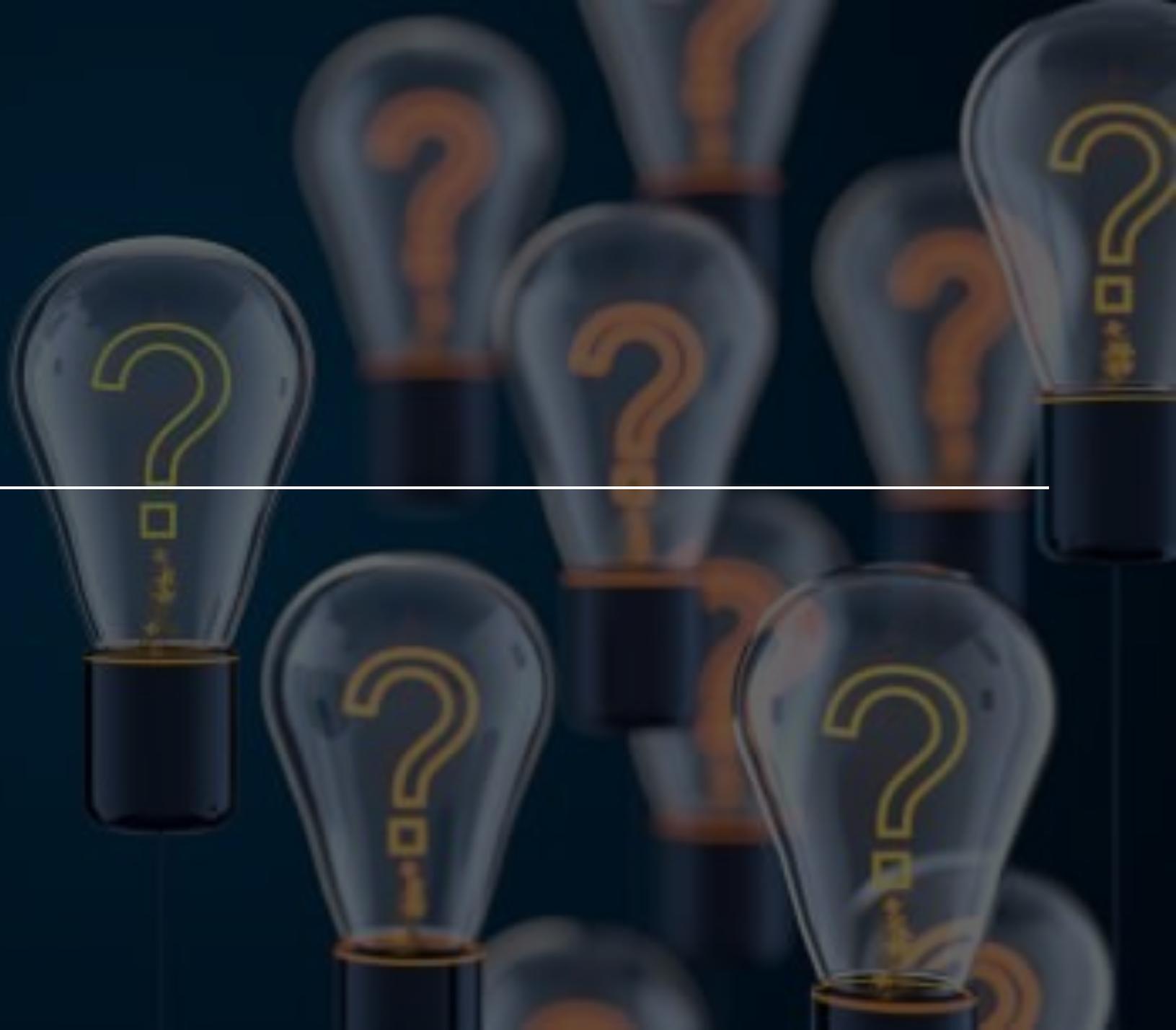- Utilized by Danielle and ORH to advance legislative goals

News publications
- Created opportunities for a focus and awareness raising across the state
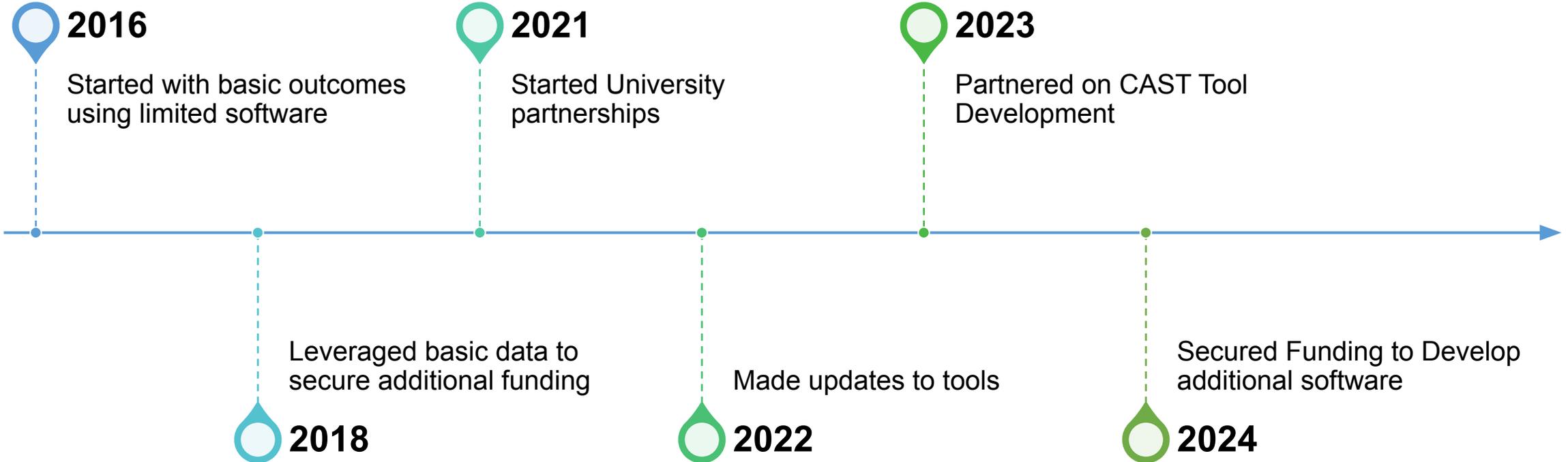- Intention is to recreate the report annually, drawing attention to improvements and continued needs

Questions

How we have grown

2016
Started with basic outcomes using limited software

2021
Started University partnerships

2023
Partnered on CAST Tool Development

Leveraged basic data to secure additional funding
2018

Made updates to tools
2022

Secured Funding to Develop additional software
2024

Build Statewide Infrastructure

- Data can help your state make measurable process

- Set goals for your data

- Tell people how they can help you reach the goal

Share with Decision Makers

- Send to policy makers

- Ask to present to committees

- Issue Press Releases

- Discuss with private foundations and funders

Share in format helpful to grassroots

- Make sure data is presented in a way that can help individual operators raise funds or tell the story in their local area

Be transparent as possible

BE HONEST ABOUT THE DATA

TALK ABOUT LIMITATIONS

ALSO TALK ABOUT WHAT YOU NEED TO OVERCOME LIMITATIONS

Gather support for specific needs

- We need more Level I housing

- We need more child care support for parents

- We need more housing for families – like apartments

- We need to address the line between Level III housing and treatment to ensure not only availability, but also access

Keep going

- Engage with multiple partners
  - ORH is Working on a project to follow select residents overtime
  - ORH is partnering to develop a tool to see what exact factors lead to a resident staying in housing over six months
  - ORH is also partnering to build new data collection system for operators to collect specific recovery planning data on residents

Infrastructure is not build in a day

START WITH THE BASICS

REMEMBER DATA ENTRY

OWN THE DATA YOU COLLECT

PARTNER EFFECTIVELY

BE TRANSPARENT

LEVERAGE YOUR RESULTS

Final Questions

Contact Us

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