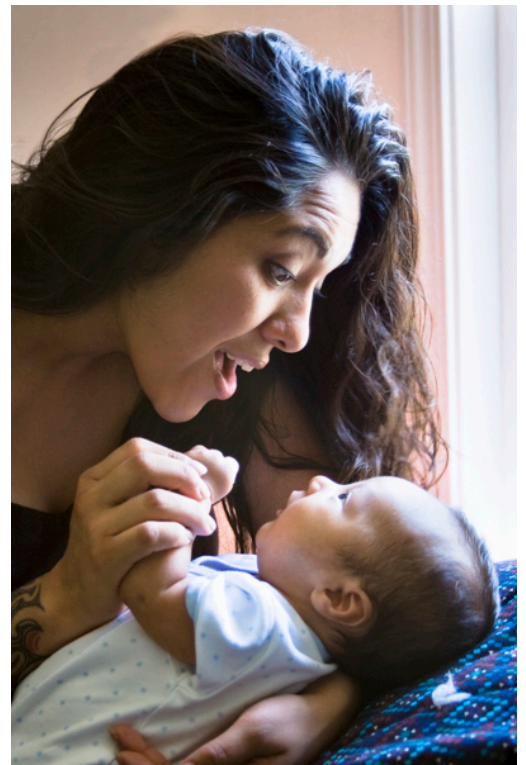


Women's Recovery Services in Minnesota: Year Two Findings

*Evaluation Findings from Year 2 of the
Women's Recovery Services Grant*

Prepared by Wilder Research



A P R I L 2 0 1 9

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Year Two Key Findings: June 1, 2017 – May 31, 2018

Women's Recovery Services

The Minnesota Department of Human Services Behavioral Health Division (BHD) contracts with 12 grantees across Minnesota to provide treatment support and recovery services for pregnant and parenting women who have substance use disorders, and their families, through an initiative known as Women's Recovery Services (WRS). The following provides a description of women and children served by WRS programs between June 1, 2017 and May 31, 2018, and outcomes for families during the year two of the 5-year grant.



Women served by WRS programs

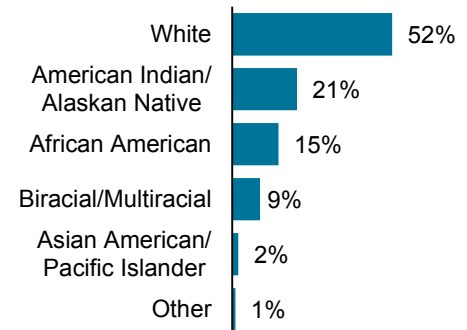
Women served	Children of women served	Median length of participation	Number of women who exited program	Average staff contact time per woman
1,336	2,561	3.3 months	905	218 hours

Service areas of greatest client need: According to program staff, women had the greatest need for services around mental health/counseling (70%), parenting (56%), housing (42%), and relationship issues (30%).

Most common services areas: Besides treatment and recovery support, program staff were most likely to provide services to women in the following areas: mental health/ counseling (89%), parenting (84%), transportation (74%), physical health (73%), relationship issues (69%), wellness/recreation (66%), public benefits (65%), and housing (63%).

Chemical dependency treatment: 82% of women were in treatment when they entered the program – most often in inpatient/residential (58%). Just over half (56%) of those who were in treatment during their program had successfully completed treatment by closing.

Racial background of women served (n=1,336)

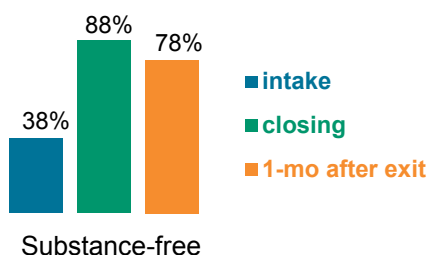


Outcomes for families during year two of the 5-year grant

► Substance use and sobriety

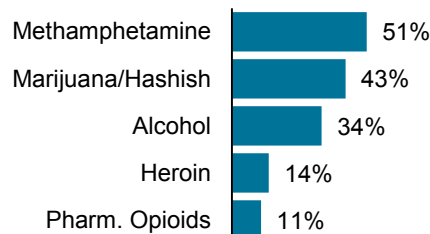
Significant increases in sobriety at closing lose some ground 1-month after exit: Significantly more women were substance-free at closing (88%) when compared to intake (38%), although some of these gains were lost by the 1-month follow-up interview (78%).

Sobriety at intake, closing, and follow-up (n=206)



Meth is the most commonly used and preferred drug at intake: Methamphetamine was the most commonly used drug at intake among the 764 women reporting recent substance use; it was also the most commonly preferred drug at intake among the 1,336 women served.

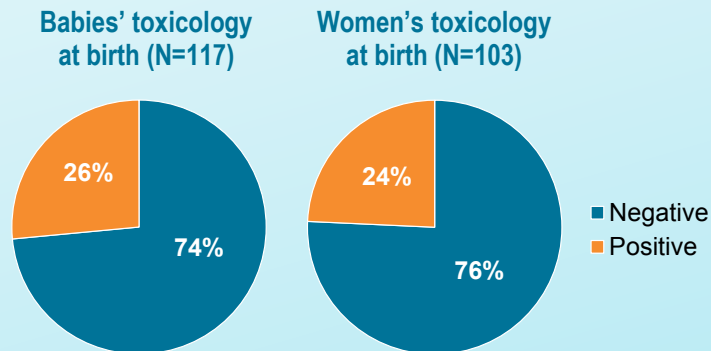
Most commonly used drugs at intake (n=764)



► Infant health

Most babies were born healthy: In year two, most babies were born full-term (90%) and with a normal birth weight (87%).

Toxicology results from baby and mom: At birth, most babies (74%) and mothers (76%) tested negative for substances. Those with positive toxicology results at birth most commonly tested positive for marijuana. Toxicology results were missing or unknown for 15%-25% of women or babies.



► Reunification

246 children were reunified with their mothers by closing (after a formal out-of-home placement)

75 additional children were reunified with their mothers by the 1-month follow-up (after a formal out-of-home placement).

► Connection to recovery supports

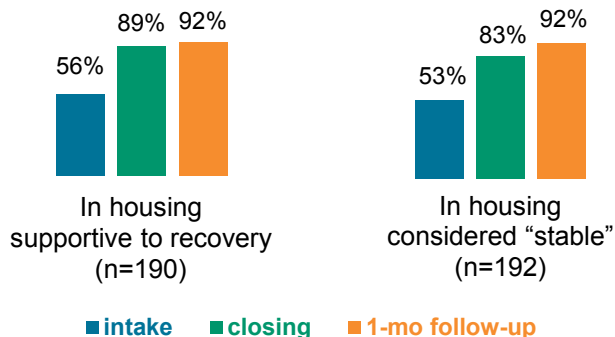
Sources of recovery support at closing: By program end, women sought support primarily through Alcoholics Anonymous (AA) or Narcotics Anonymous (NA; 75%), a faith-based support group (18%), a culturally specific support group (16%), or a support group through their program (15%; n=905).

Change in recovery support participation: Significantly more women were participating in at least one recovery support activity by closing (89%) when compared with intake (55%), including a significant increase in participation in AA or NA from intake (49%) to closing (85%; n=747).

► Housing

Significant housing improvements for women: Compared to intake, significantly more women were in housing “supportive to recovery” and in stable housing at closing and 1-month after program exit (includes the 21% women who exited in year two that had housing information available at all 3 time points).

Significantly more women were:



▶ Health

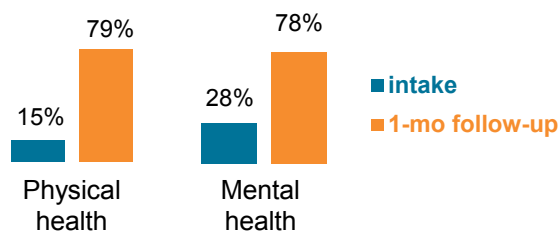
Mental health diagnoses: At intake, 81% of women had a mental health diagnosis. Among those with a diagnosis, the most common were anxiety disorders (85%) and depressive disorders (76%; n=1,078).

Access to health care: At closing, significantly more women had a primary care physician and/or clinic (82%) as compared to intake (71%; n=765).

Significant health gains 1 month after exit:

Significantly more women rated their physical and mental health as “good” or “excellent” at the 1-month follow-up when compared to intake (n=220, representing 24% of women who exited in year 2).

Percentage of women rating their health “good” or “excellent” (n=220)



▶ Parenting relationships and child protection

Relationship with child: One month after program exit, significantly more women (91%) described their relationship with their child as “good” or “excellent” when compared with intake (44%; n=201).

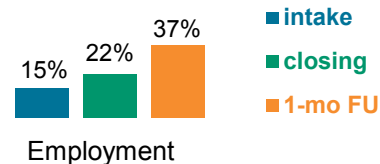
Removal of infants after birth: 13% of babies born to women in year two were placed outside of the home following their birth.

Significant decrease in child protection 1-month after exit: Significantly fewer women were involved with child protection at the 1-month follow-up (41%) when compared to intake (51%) or closing (47%; n=207, or 23% of women who exited in year two).

▶ Employment

Significantly more women were employed at closing (22%) and at the 1-month follow-up (37%) when compared to intake (15%; n=184, representing 20% of women who exited in year two).

Significantly more women employed over time (n=184)



▶ Additional outcomes

Percentage of women . . .

who were engaged with program goals at exit

73%

who completed a parenting program by closing

61%

who were doing well at program exit according to program staff

65%

▶ Dosage of services

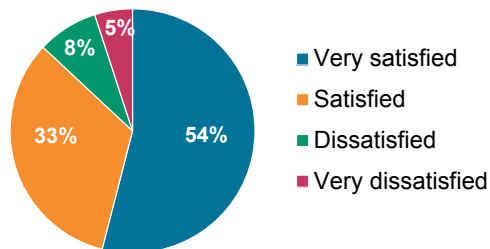
Women who received a *high dosage* of services – participating in their program for 90 days or more and receiving at least 180 of staff contact time and at least 12 hours of in-person staff contact time – were more likely to be:

- “Doing well” *at exit*
- Abstinent from substances *at exit*
- Abstinent from or using less substances *at exit*
- Abstinent from or using less substances *at 1-month follow-up*
- Have successfully completed Rule 31 treatment *by exit*

► Program satisfaction

At follow-up, the majority of women (87%) were satisfied with their WRS program. In addition, most women agreed that staff helped them develop their goals (91%), were available when they needed support (91%), and understood their problems or concerns (90%; n=301).

Most women were satisfied with their WRS program (n=301)



► Contributors to positive outcomes

At program exit and 1-month later, women were significantly more likely to be *sober* or *using less substances* when they:

- Had safe and stable housing at closing
- Were connected to mental health services at closing
- Had successfully completed Rule 31 treatment by closing.

Women were also significantly more likely to be *using less substances* at closing and 1-month after the program – and have negative toxicology results if they gave birth while in the program – if they had received at least 180 hours of staff contact time or at least 4 in-person contacts per month. In addition, a woman's race and preferred drug of choice made a difference in the likelihood of achieving positive outcomes, with those identifying as white and preferring to use meth more likely to achieve positive outcomes.



Children served by WRS programs

Total number of children . . .

of women who left
the program
1,755

who received services
from program
591¹

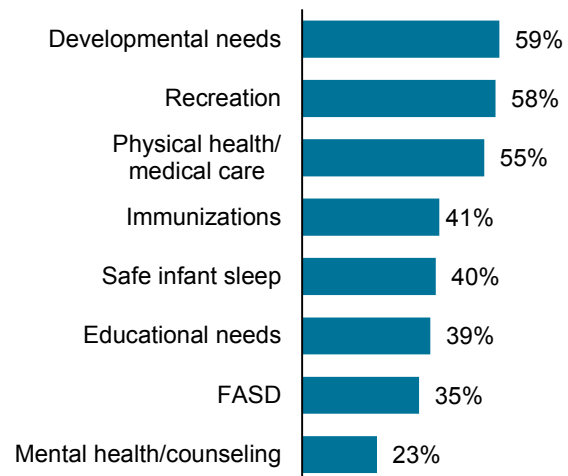
¹34% of children of women who exited the program in year two. Service data was missing for 54% of the 1,755 children of women who exited during the reporting period.

Most common assessments received by children served: Informal Fetal Alcohol Spectrum Disorders (FASD) screenings (47%) and developmental assessments (21%).

Child immunizations and medical insurance:

At closing, 99% of children were current on immunizations and covered by medical insurance; this information was unknown or missing for 23-25% of children.

Most common service areas that program staff worked on with children (N=591)



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For more information

This summary presents highlights of *WOMEN'S RECOVERY SERVICES IN MINNESOTA: YEAR TWO FINDINGS*. For more information about this report, contact Jackie Aman at Wilder Research, 651-280-2669.

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APRIL 2019

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Project overview

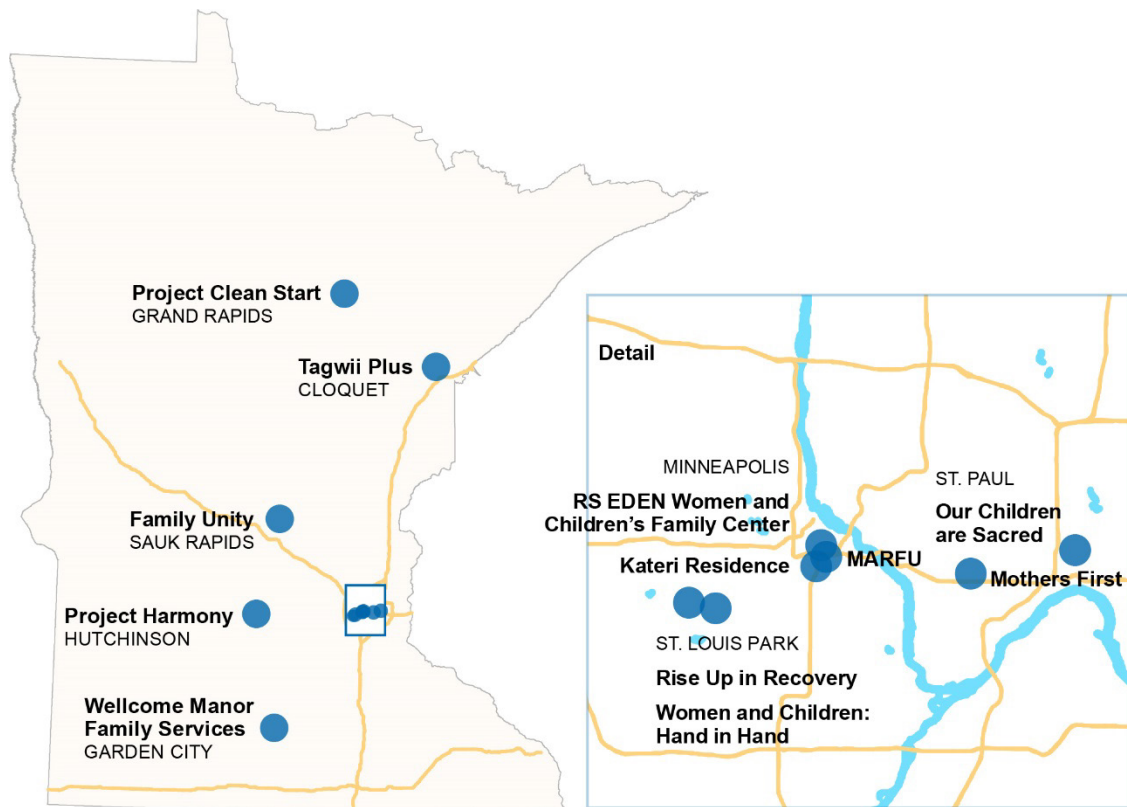
In October 2016, the Minnesota Department of Human Services Alcohol and Drug Abuse Division – which became the Behavioral Health Division (BHD) in fall 2018 – contracted with 12 grantees across Minnesota to provide treatment support and recovery services for pregnant and parenting women who have substance use disorders, and their families (Figures 1 & 2). Through this initiative, known as Women’s Recovery Services (WRS), grantees provided comprehensive, gender-specific, family-centered services for the women in their care. See Appendix A for more grant information.

In order to evaluate women’s progress and the effectiveness of the Women’s Recovery Services grantees, the Department of Human Services asked Wilder Research to conduct an evaluation of the program for the duration of the grant. See Appendix B for more information about the methods used to conduct the evaluation.

1. Women’s Recovery Services’ grantees in year two

Grantee	Program	# of women served by the program	# of women who exited the program
American Indian Family Center	Wakanyeya Kin Wakan Pi “Our Children are Sacred”	19	10
Avivo	Mothers Achieving Recovery for Family Unity (MARFU)	101	63
Fond du Lac Reservation	Tagwii	44	14
Hope House of Itasca County	Project Clean Start	54	27
Meeker-McLeod-Sibley Community Health Services	Project Harmony	46	25
Perspectives Inc.	Women and Children: Hand in Hand	66	20
Ramsey County Community Human Services	Mothers First	148	73
RS EDEN	Women and Children’s Family Center	131	96
St. Cloud Hospital Recovery Plus	Journey Home-Family Unity	297	237
St. Stephens Human Services	Kateri Residence	16	13
Wayside House	Rise Up in Recovery	216	178
Wellcome Manor Family Services	Wellcome Manor Family Services	198	149

2. Map of Women's Recovery Services grantees (2016-2019)



Overview of report

This report presents findings across all 12 funded programs in year two of the grant cycle (June 1, 2017 through May 31, 2018). The report begins with a description of the families served and services provided, and then moves into a detailed discussion of outcomes for women from intake to closing, or program exit. Note that descriptive information about families and services is based on all clients and children served during this reporting period, while outcome information is generally based on all clients whose cases were *closed* during the period.

The report then explores how women are doing one month after exiting WRS programs by comparing outcome data for women at three time points: at intake, closing, and the 1-month follow-up interview. Finally, the report includes an analysis of how the amount and intensity of services impacts outcomes and other factors that contribute to positive outcomes for women.

Description of women served

WRS grantees served a total of 1,336 women¹ during year two of the grant (373 of these women remained from a previous period, while 963 were new to the program). A total of 905 women exited their program during year two.

Exiting a program includes both women who completed the program and those who left without completing it (e.g., stopped attending the program or were asked to leave).

- **Women’s race and ethnicity:** At intake, women largely identified as white (52%), American Indian/Alaskan Native (21%), African American/black (15%), or multiracial (9%); 9% reported being of Hispanic origin.
- **Women’s age:** The majority of women served were age 25-49 (78%).
- **Pregnancy at intake:** 23% of women were pregnant at intake (77% of these women had at least one prior pregnancy).
- **Children of women served:** Women served had a total of 2,561 children, including 133 babies born while women were in a WRS program; 1,755 children exited during year two (along with the 905 women reported above) and 34% of these children were reported to have received services in year two, although this information was missing for 54% of children.
- **Income and public benefits:** Most women served (92%) had incomes at or below the federal poverty line. Women were connected to a variety of public benefits and community resources at intake, with the most common being food support or SNAP (45%), MFIP cash assistance (29%), and WIC (19%).
- **Educational background of women served:** The majority of women served had earned a high school diploma or GED (69%); 14% had obtained a post-secondary degree.

¹ Because it is possible for women to leave and then re-enter the program, this number may include some duplication.

Program participation

The following section includes data for the 905 women *who exited their program* in year two.

Program dosage

- **Average length of participation:** 4.7 months; median 3.3 months (range: <1 month to 5 years²)
- **Average number of contacts between program staff and women:** 188 contacts (93% of women had at least one in-person contact with staff per month)
Average number of phone contacts: 18 contacts
Average number of one-on-one contacts (in-person): 36 contacts
Average number of group sessions (in-person): 163 contacts
- **Average number of hours program staff spent with women:** 218 hours (range: 1 to 1,146 hours)

Services and assessments

- **Most common service areas:** Besides treatment and recovery support, program staff were most likely to work with women on mental health or counseling (89%), parenting (84%), transportation (74%), physical health (73%), relationship issues (69%), wellness or recreation (66%), public benefits (65%), and housing (63%).
- **Service areas of highest need:** Program staff reported that women needed the most help with mental health and counseling (70%), parenting (56%), housing (42%), and relationship issues (30%).
- **Assessments provided:** Nearly all women (94%) received at least one assessment while in a WRS program in year two. Women most commonly received a mental health assessment (73%), a physical health assessment (72%), a Rule 25 chemical health assessment (59%), a mental health screening (46%), or a Fetal Alcohol Spectrum Disorder (FASD) screening through informal questions (43%).
- **Total number of women who received urinalysis tests (UAs) while in the program:** 76% of all women who exited in year two.
- **Average number of UAs provided to women during the program:** 13 UAs; 54% of women had at least one positive UA, most commonly for methamphetamine (41%), marijuana (30%), other amphetamines (17%), alcohol (16%), and other opiates (15%).
- **Percentage of women who completed an evidence-based parenting program:** More than half of women (61%) completed an evidence-based parenting program while in a WRS program.

² While length of participation varied by program and by person, 92% of women who closed in year two participated for a year or less; 5 women (less than 1%) participated for 3-5 years.

In-depth results: comparing intake to closing

The following section summarizes information collected about women and their children during year two of the grant (2017-18 reporting period). It includes information about how women are doing *at intake* when they first enter the program, as well as a comparison of outcomes from *intake to closing/program exit*. Please see Appendix D for additional details on women at both time points and overall outcomes.

► **Matched analysis:** For many of the outcome areas, a matched analysis was used to see if there were significant changes for women in key areas from intake to closing. Because the matched analysis can only be conducted when data are available at both intake and closing, these results are based on a different (usually, smaller) number of women than the total number of women served during the reported year (as described in the previous section).

Among all 12 WRS programs, between 401 and 845 women had matched information on key outcome areas available at both intake and closing, representing 44% - 93% of all women who exited WRS programs in year two. Therefore, matched results may not be representative of all 905 women who exited a WRS program in year two.

For a complete list of matched analysis results, please see Appendix C.

WHAT IS A STATISTICALLY SIGNIFICANT CHANGE?

Wilder uses statistical analysis when looking at differences in outcomes between intake, closing, and follow-up interviews. Statistical software is used to determine whether a difference detected is “real” and more than likely not due to chance. When the report uses the term “significant” to describe change over time, this means the statistical test indicates that we can be confident that actual change occurred from intake to closing in a given outcome area.

While a statistical analysis may reveal that a change is statistically significant, the meaningfulness of these differences should be examined further. Relatively small differences between time points or groups sometimes emerge as “statistically significant” because the large number of women yields more “power” in the analysis to detect even small differences. The extent to which this statistical difference suggests a *meaningful* difference for women from one time to another should be considered for each individual outcome and the broader context in which they occur. For example, a difference of 3 or 5 percentage points, even if statistically significant, is not necessarily practically significant and should not be over-emphasized; in contrast, a difference of 10 or more percentage points suggests a more meaningful difference.

Substance use

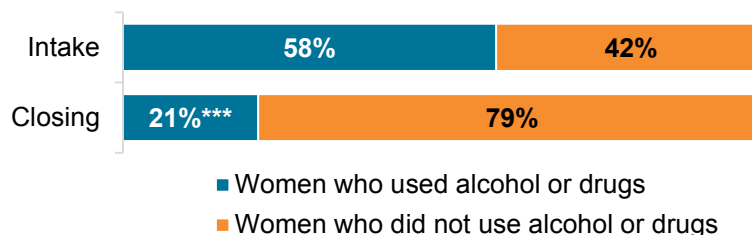
At intake (all women who entered a program in reporting year two)

- **Substance use and sobriety:** At intake, 57% of women reported having used alcohol and/or other drugs (excluding tobacco) in the 30 days prior to program enrollment or prior to a forced sobriety situation (e.g., jail, treatment) preceding enrollment. For the 562 women³ (42%) reporting no alcohol or drug use within 30 days of intake, their length of sobriety at intake ranged from 1 month to 4 years, with an average of 4 months.
- **Primary drug of choice:** For the women who entered a program during year two, the primary drug of choice was most often methamphetamine (38%), followed by alcohol (19%), marijuana (18%), and heroin (13%).
- **Most common substances used:** Among those reporting substance use in the 30 days prior to intake, women were most likely to have used methamphetamine (51%), followed by marijuana (43%), alcohol (34%), heroin (14%), and pharmaceutical opioids (11%). The majority of women (85%) also reported recent tobacco use at intake.

At closing (women who exited a program in reporting year two)

► **Matched analysis:** The number of women with recent substance use **significantly decreased** from intake to closing (Figure 3). While 58% of those with matched data had used in the month prior to intake, 21% reported using in the month prior to closing. For more information on women’s substance use at closing – including the number who reported *reduced* use from intake to closing – please see Appendix C.

3. Change in substance use from intake to closing (N=764)



Note. Differences between intake and closing were tested using the McNemar’s test and are significant at *** $p < .001$.

³ 562 women reported no recent alcohol or drug use; however, information on length of sobriety was available for only 550 of those women. Only the duration of sobriety for those 550 women was used in the length of sobriety calculations.

Infant health

All babies born to women served in reporting year two

- **Most babies were born healthy.** In year two, most babies were born full-term (90%) and with a normal birth weight (87%). In addition, 17% of babies spent time in the NICU.
- **Infant toxicology:** At birth, 26% of babies had positive toxicology results, most commonly for marijuana.⁴ However, 15% of all babies born during year two did not receive a toxicology test or had results unknown to program staff. Infant toxicology was most often obtained through a meconium test (54%) or a blood test (28%).
- **Mothers' toxicology:** While toxicology results were unknown or untested for 25% of women who gave birth in year two, 24% of women with available results tested positive for substances at birth, most commonly for marijuana.⁵ Toxicology results for women were most commonly obtained through a urine test (71%).

Recovery support

At intake (all women who entered a program in reporting year two)

- **Sources of recovery support:** Upon entering their Women's Recovery program, 44% of women were participating in Alcoholics Anonymous (AA) or Narcotics Anonymous (NA). Fewer women were connected to recovery support through faith-based groups (13%), other community groups (6%), culturally specific groups (5%), other recovery activities (5%), Recovery Community Organizations (RCOs; 2%), aftercare (2%), or Al-Anon (1%).

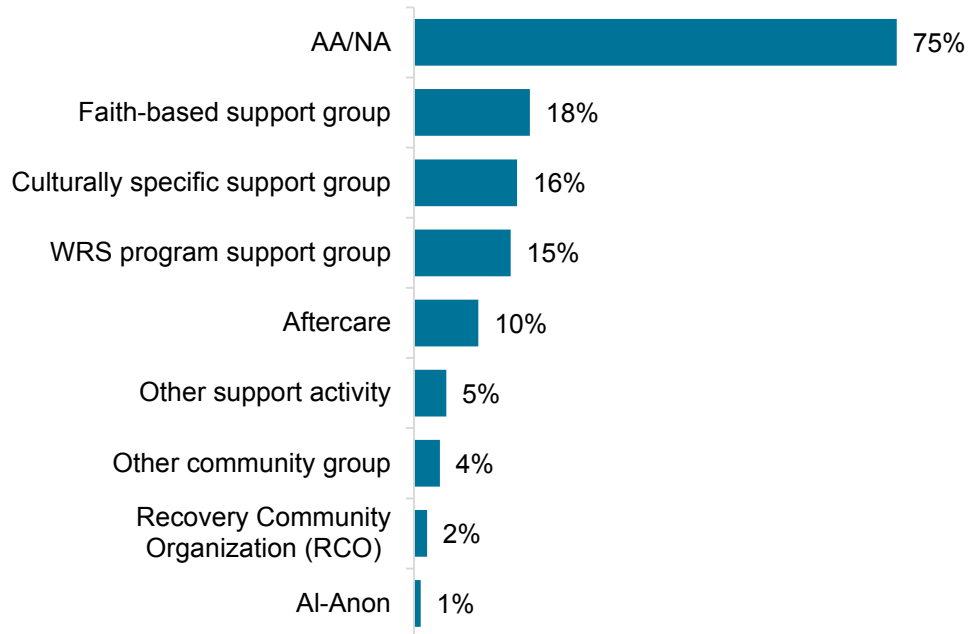
At closing (women who exited a program in reporting year two)

- **Sources of recovery support:** By closing, women sought support primarily through AA or NA (75%), a faith-based support group (18%), a culturally specific support group (16%), or a support group through their WRS program (15%; Figure 4).

⁴ This excludes 9 babies who tested positive for medications taken as directed by the mother.

⁵ This excludes 8 women who tested positive for a medication taken as directed.

4. Types of recovery support used by women at closing (N=905)



► **Matched analysis:** Significantly more women were connected to recovery support activities at closing (89%) than at intake (55%), particularly to Alcoholics Anonymous (AA) and/or Narcotics Anonymous (NA) (Figure 5).

5. Changes in recovery support participation from intake to closing

	Total N	Intake		Closing	
		n	%	n	%
Women involved in any form of recovery support	747	411	55%	666	89%***
Women involved in AA and/or NA at...	747	362	49%	633	85%***

Note. Differences between intake and closing were tested using the McNemar's test and are significant at *** $p < .001$. "Any form of recovery support" includes involvement in AA and/or NA, a support group through the program, a support group in the community, support from family/friends, a faith-based/religious group, or other recovery support activities.

System involvement

At intake (all women who entered a program in reporting year two)

- **Child protection:** 53% of women were involved with child protection at intake and 17% had been referred to their program through that system.⁶
- **Criminal justice system:** 50% of women were involved with the criminal justice system and 16% had been arrested in the 30 days prior to program entry; 10% had been referred through Corrections or Drug Court.

At closing (women who exited a program in reporting year two)

- **Reunification:** 246 children were reunified with their mothers by closing (after a formal out-of-home placement).
- **Babies placed out of home:** 13% of the babies born to mothers served during year two were placed out of the home by child protection following their birth.
- ▶ **Matched analysis:** Women were significantly less likely to be arrested in the 30 days prior to closing (4%) than in the 30 days prior to intake (17%). In addition, significantly fewer women were involved with child protection at closing when compared to intake, although this was only a 4% point decrease (Figure 6).

6. Changes in system involvement from intake to closing

	Total N	Intake		Closing	
		n	%	n	%
Women arrested in the prior 30 days	787	134	17%	28	4%***
Women involved in child protection	845	469	56%	439	52%**
Women involved with the criminal justice system	822	437	53%	440	54%

Note. Differences between intake and closing were tested using the McNemar's test and are significant at ** $p < .01$ and *** $p < .001$.

⁶ Child protection was among the top three referral sources for women entering their Women's Recovery program, as were treatment programs (20%) and self-referrals (20%).

Housing

At intake (all women who entered a program in reporting year two)

- At intake, women were most likely to be living in a relative or friend’s home (31%), in their own house or apartment (25%), or in an inpatient treatment facility (19%).
- In addition, 15% of women were living in a shelter or a place not intended for housing (such as a car, vacant building, or outside) at intake.
- Living arrangements were considered “supportive to recovery” for 58% of women and “stable” for 49% of women.
- The majority of program participants (75%) had experienced homelessness at some point in their lives, with 78% having been homeless one to five times.

At closing (women who exited a program in reporting year two)

► **Matched analysis:** Housing situations improved for many women by the time they exited a WRS program. By closing, women were significantly more likely to be housed (not homeless), in their own home or permanent supportive housing, in housing considered stable, and in housing supportive to their recovery (Figure 7). Please note that matched housing information was available for 44%-79% of women; therefore, these findings may not be representative of all women who exited a WRS program in year two.

7. Changes in housing from intake to closing

	Total N	Intake		Closing	
		n	%	n	%
Women in housing/not homeless ^a	509	423	83%	478	94%***
Women in own home or permanent supportive housing ^b	401	178	44%	217	54%***
Women in “stable” housing ^c	718	361	50%	543	76%***
Women in housing “supportive to recovery” ^d	686	400	58%	597	87%***

Note. Differences between intake and closing were tested using McNemar’s test and are statistically significant at ***p<.001.

^a Woman lives in her own home, a friend’s/relative’s home, transitional housing, permanent supportive housing, or a sober house, rather than no home (homeless, a shelter or motel, or a correctional facility).

^b Woman lives in her own home or permanent supportive housing, rather than a friend’s/relative’s home, transitional housing, or sober house.

^c Woman’s living arrangements are **stable**, as perceived by staff. Factors considered in this determination are woman’s permanency of arrangements, affordability, safety, and adequacy of space and amenities.

^d Woman’s living arrangements are **supportive to recovery**, as perceived by staff. Factors considered in this determination are woman’s safety, proximity to others who are using alcohol or drugs, presence of supportive relationships, and access to alcohol or drugs.

Treatment participation

- **Treatment at intake:** 82% of women were in treatment when they entered a WRS program; 58% were in inpatient/residential treatment and 29% were in outpatient treatment with housing. Of those in treatment at intake, 18% had children living with them while in treatment.
- **Prior treatment participation:** The majority of women (79%) reported having been in treatment at some point prior to entering their current program, typically 1 to 4 times (73%).
- **Treatment outcomes by closing:** Women who enter treatment more than once during their time in the program might have different outcomes for each treatment episode. For the 821 women who were in treatment at some point during their time in the program, their most recent treatment outcomes were as follows: 56% successfully completed Rule 31 treatment, 26% were noncompliant or left the program without staff approval, 5% were still in treatment, and 10% had some “other” treatment outcome.
- **Medication-assisted treatment and detox:** While in a WRS program, 16% of women received medication-assisted treatment, primarily methadone and suboxone (medications used to replace heroin or opioid addiction); 3% spent time in detox while in their program.

Health and safety

At intake (all women who entered a program in reporting year two)

- **Physical health and access to care:** 48% of women reported having a severe or chronic physical health problem at intake, and 45% had been to the emergency room in the past 6 months. The majority of women had medical insurance (89%), typically through a public option (e.g., MA, MNCare), as well as a primary care physician, clinic, or both (72%).
- **Mental health diagnoses:** 81% of women had at least one mental health diagnosis at intake. Among those with a mental health diagnosis, women were most often diagnosed with an anxiety disorder (85%) or depressive disorder (76%). In addition, 44% of all women had been diagnosed with Post-traumatic Stress Disorder (PTSD). A small proportion of women reported a Traumatic Brain Injury (5%) or Fetal Alcohol Spectrum Disorder (FASD; 2%).
- **Domestic violence:** When asked at program exit, 21% of women reported that, at intake, they were in a relationship with a partner who was physically or emotionally violent. (Data were unknown for 21% of women.)

At closing (women who exited a program in reporting year two)

- **Mental health services:** By closing, 75% of women were receiving mental health services or were connected to a specific clinic or therapist if services were needed; however, this information was unknown for 17% of women.
- **Intimate partner violence:** 80% of women who reported an abusive relationship at intake said that their personal safety had improved by closing. 13% of women reported that their personal safety stayed the same or worsened by closing; this information was missing for 7% of women.
- ▶ **Matched analysis:** Significantly more women had a primary care physician and/or clinic at closing (82%) when compared with intake (71%). In addition, nearly all women had medical insurance by closing (99%), a significant increase from intake (91%; Figure 8).

8. Changes in healthcare access from intake to closing

	Total N	Intake		Closing	
		n	%	n	%
Women with a primary care physician and/or clinic	765	544	71%	626	82%***
Women with medical insurance	817	746	91%	807	99%***

Note. Differences between intake and closing were tested using the McNemar's test and are significant at ***p<.001.

Education and employment

At intake (all women who entered a program in reporting year two)

- **Education:** 69% of women had a high school diploma or GED at intake; 40% had completed some college or obtained a degree.
- **Employment and career training programs:** Most women (80%) were unemployed at intake, with 20% of those actively looking for work. Fewer (14%) were employed either full-time or part-time, or involved in school or a career-training program (3%).

At closing (women who exited a program in reporting year two)

► **Matched analysis:** Few women were employed or involved in school or career-training programs at either intake or closing. However, there was a small but statistically significant increase in the proportion of those who were employed full-time or part-time by closing (18%) when compared to intake (13%) (Figure 9).

9. Changes in employment and schooling from intake to closing

	Total N	Intake		Closing	
		n	%	n	%
Women employed full-time or part-time	764	102	13%	139	18%**
Women in school or a career-training program	835	26	3%	37	4%†

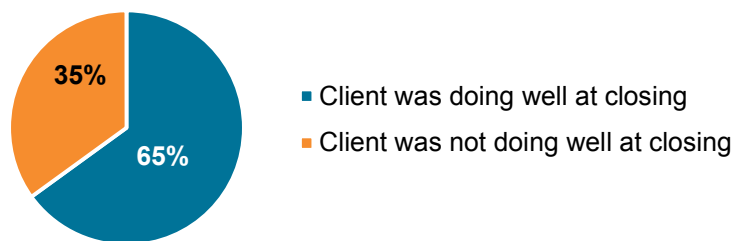
Note. Differences between intake and closing were tested using the McNemar's test and are significant at **p< .01 and †p<.10 (trending toward statistical significance).

Additional outcomes

At closing (women who exited a program in reporting year two)

- **Engagement in case plan and continuing care plan:** At the time of closing, 73% of women were at least somewhat engaged in carrying out their program goals and case plan (as reported by program staff); 68% of women had a continuing care plan in place when they exited a WRS program.
- **Doing well at closing:** Using their own professional judgment, program staff assess the extent to which women are “doing well” or “not doing well” when they leave the program. Overall, staff reported that 65% of women who exited a WRS program this past year were “doing well” at closing (Figure 10).

10. Staff perception of women’s status at closing (N=905)



There were a range of reasons why staff perceived women as “not doing well” at closing, including that they were not compliant with program requirements (61%), they were not engaged in carrying out the goals of their case plan (52%), they were actively using substances (31%), they disappeared or could not be reached (24%), or because the woman was in crisis or experiencing a traumatic life event (14%).

Children of women served

Description of children

Women served by a WRS program during year two of the grant had a total of 2,561 dependents at the time of intake. Key characteristics of these children include:

- **Children's race and ethnicity:** At intake, children were identified as white (38%), multiracial (23%), American Indian/Alaskan Native (21%), African American/black (14%), and Asian American/Pacific Islander (2%). In addition, 15% were identified as Hispanic.
- **Children's age:** The majority of children (81%) were age 12 or younger.
- **Babies born:** A total of 133 babies were born to women served by a WRS program in year two. Babies were most commonly identified as white (36%), multiracial (24%), African American/black (23%), American Indian/Alaskan Native (11%), and Asian American/Pacific Islander (3%). In addition, 13% of babies born in year two were of Hispanic origin.

Services provided to children

While WRS programs offer children's services, programs do not always have the opportunity to serve the children of women participating in the program. Oftentimes, women may not have custody of their children while in their program or do not bring their children with them to the program. In addition, many children are in school or involved in outside programming during the day, limiting program staff's ability to provide services to children.

Overall, WRS programs directly provided services to at least 591 children, or 34% of the 1,755 children of women who exited the program in year two. (Note: this information was missing for 54% of children, so more children may have received services.) The following provides additional information about the services provided to these 591 children.

- **Service areas that program staff worked on with children:** For those who received services, program staff most commonly worked with children on developmental needs (59%), recreational services (58%), and physical health/medical care (55%). Children also received services related to immunizations (41%), safe infant sleep (40%), educational needs (39%), FASD (35%), and mental health/counseling (23%).
- **Assessments provided to children:** Children were most likely to receive a FASD screening through informal questions (47%) or a developmental assessment (21%); 40% of the children served did not receive any of the screenings or assessments listed on the closing form.

Children at closing

At closing, program staff collected information on the 1,755 children of women who had participated in a WRS program – regardless of whether or not each child received services from a program. The following section summarizes information on the children of all women who exited a WRS program in reporting year two, for whom data are available.

- **Custody status:** At closing, 50% of children were involved with child protection. Of those children, 65% had a formal out-of-home placement.
- **Medical insurance and immunizations by closing:** Of the children with known information, 99% of children had medical insurance and were up-to-date on their immunizations at closing, although this information was unknown for 23-25% of children.
- **Mental health services at closing:** At closing, 28% of children were receiving mental health services at closing, although this information was unknown for 28% of children.
- **Participation in an evidence-based children’s program:** While this information was unknown or missing for 15% of children, 5% of children participated in an evidence-based program during reporting year two and fully completed the program; an additional 4% partially completed an evidence-based program.

Life after WRS programs

Follow-up interview results

Number of women who
exited in year two

905

Number of women who
completed a 1-month
follow-up interview

220

Number of women with
results at intake, closing,
and 1-month follow-up

157-220

Wilder Research contacts women by telephone approximately one, six, and twelve months after exit to assess their wellbeing and satisfaction with the program. A total of 220 1-month interviews, 137 6-month interviews, and 13 12-month interviews were completed with women in year two. The number of interviews completed by program and detailed responses from all women interviewed can be found in Appendix D (1-month follow-up data) and Appendix E (6-month follow-up data).

To learn how changes from intake to closing are maintained after clients leave the program,⁷ Wilder conducted an analysis of data at three time points – intake, closing, and a 1-month follow-up. Because this analysis requires women to have information available at all three of these time points, the following results represent findings for 17%-24% of all 905 women who exited the program during year two. Therefore, these findings may not be representative of all women who exited the program in year two.

In addition, programs are not evenly represented in follow-up interview results. Given differences across WRS programs, Wilder Research is more likely to interview women from programs that serve a larger number of women per year and that average a shorter participation length. As Figure 11 shows, 88% of women included in the follow-up analysis participated in one of five programs. Therefore, some programs are represented more than others in the follow-up analysis; these findings may not be representative of all programs and their participants that closed in year two.

The analysis excludes 6-month and 12-month interview results because too few of these interviews had been conducted by the end of year two. Future reports will include data gathered at the 6-month and 12-month follow-up, once a more representative number of interviews has been conducted and matched across previous time points.

⁷ Generally, information collected at intake and closing was based on *staff* report, while information collected during the follow-up interviews was based on *client* self-report. Collecting data from two different sources can impact the accuracy of the data; please see the Limitations section in Appendix A.

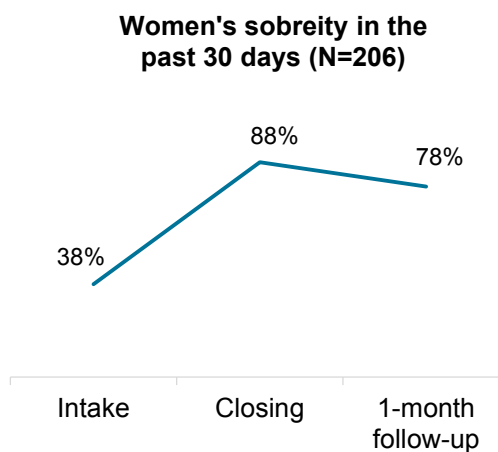
11. Number and proportion of 1-month follow-up interviews completed through May 2018, by program

Grantee	Number of 1-month interviews completed	Proportion of total 1-month interviews
St. Cloud Hospital Recovery Plus	61	28%
Wellcome Manor Family Services	44	20%
Wayside House	38	17%
RS EDEN	28	13%
Ramsey County Community Human Services	22	10%
Avivo	12	6%
Hope House of Itasca County	9	4%
Meeker-McLeod-Sibley Community Health Services	3	1%
American Indian Family Center	1	<1%
Perspectives Inc.	1	<1%
St. Stephens Human Services	1	<1%
Fond du Lac Reservation	0	0%
Total	220	100%

Substance use

12. Significant increases in sobriety at closing lose some ground one month after exit

One month after leaving their program, women **maintained most of the significant gains in sobriety** they made while in the program. Significantly fewer women had used alcohol or drugs at either closing or follow-up when compared to intake. However, some of these gains in sobriety were lost in the month after exiting the program, shown by a significant increase in the percentage of women using substances at follow-up (22%) when compared with closing (12%).



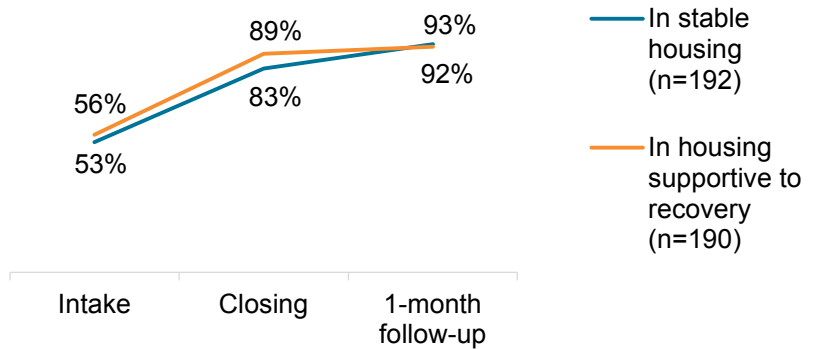
Note. Differences between each point in time were tested using Cochran's Q Test and follow-up pairwise comparisons. The following differences are significant at: *** $p < .001$ and * $p < .05$: "used substances in the past 30 days" – intake to closing***, intake to 1-mo follow-up***, closing to 1-mo follow-up.*

Housing

13. More women have stable and supportive housing one month after exit

Women's housing situations continued to improve in the month following program exit. At the 1-month follow-up, significantly more women reported that their housing was stable (93%) and supportive to their recovery (92%) when compared with intake and closing.

Percent of women in housing considered "stable" and "supportive to recovery"



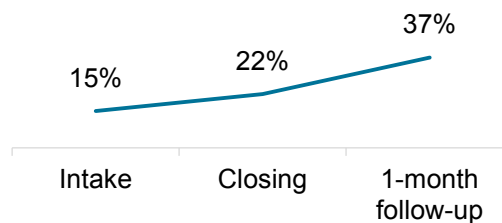
Note. Differences between each point in time were tested using Cochran's Q Test and follow-up pairwise comparisons. The following differences are significant at: *** $p < .001$, * $p < .05$: "stable housing" – intake to closing***, intake to 1-month follow-up***, closing to 1-month follow-up*; "housing supportive to recovery" – intake to closing***, intake to 1-month follow-up***.

Employment

14. Significantly more women were employed at the one-month follow-up

At the 1-month follow-up interview, 68 women (37% of those with matched information at all 3 time points) were employed full- or part-time, a significant increase compared to the percentage of women employed at intake (15% women) and at closing (22% women). Please note that while this represents a significant increase, the number of women working remains low at all time points.

Percent of women employed (N=184)

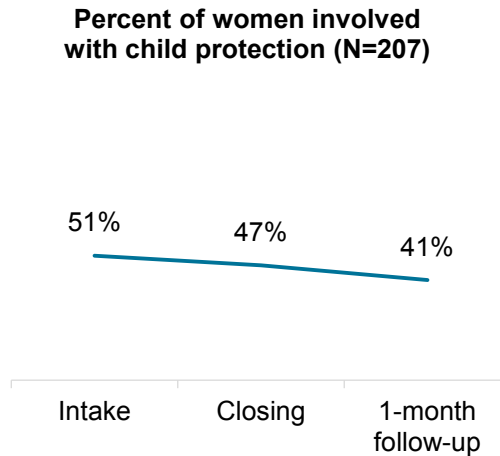


Note. Differences between each point in time were tested using Cochran's Q Test and follow-up pairwise comparisons. The following differences are significant at: *** $p < .001$, * $p < .05$, "employed" – intake to closing*; intake to 1-mo follow-up***; closing to 1-month follow-up***.

Child Protection

15. Significantly fewer women are involved with child protection one month after program exit

At the 1-month follow-up interview, significantly fewer women (41%) were involved with child protection when compared to intake (51%). When looking across all 3 time points, the percentage of women involved with child protection steadily decreases from intake, to closing, to the 1-month follow-up.



Note. Differences between each point in time were tested using Cochran's Q Test and follow-up pairwise comparisons. The following differences are significant at: *** $p < .001$, ** $p < .01$, "involved with child protection" – intake to 1-mo follow-up***, closing to 1-month follow-up**.

Reunification

At the 1-month interview (N=220), 32 women had been reunited with a total of 75 children since leaving the program.

Quality of life

At their 1-month follow-up interview, women are asked to reflect back and rate various aspects of their life *before they started the program*, and to then rate those same aspects *currently*. Women reported significant improvements in many areas of their life (Figure 16), including:

- ✓ Improved physical and mental health
- ✓ Better access to good advice from family and friends
- ✓ Better access to reliable transportation
- ✓ More supportive relationships with family and friends
- ✓ Improved relationships with their children
- ✓ Greater ability to afford basic living expenses
- ✓ More frequently making good parenting decisions

16. Quality of life before and after the program (n=157-220)

	Total N	Before program		At 1-mo follow-up	
		n	%	n	%
Women's mental health is "excellent" or "good"	220	33	15%	174	79%***
Women's physical health is "excellent" or "good"	220	61	28%	171	78%***
Women's family and friends give good advice "most of the time" or "some of the time"	219	127	58%	199	91%***
Women have access to reliable transportation "most of the time" or "some of the time"	218	161	74%	204	94%***
Women's relationships with family and friends are "very supportive" or "somewhat supportive"	219	154	70%	207	95%***
Women consider their relationship with their child(ren) to be "excellent" or "good"	201	88	44%	182	91%***
Women are able to afford basic living expenses "most of the time" or "some of the time"	216	114	53%	182	84%***
Women are making good parenting decisions "most of the time" or "some of the time"	157	110	70%	156	99%***

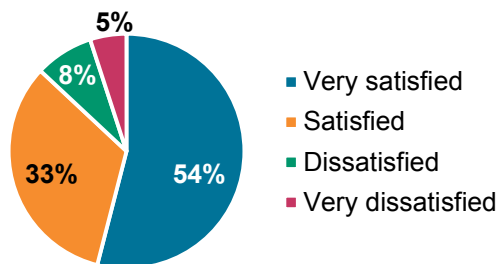
Note. Differences between the two time periods were tested using the McNemar's test and are significant at: ***p<.001. Mental health includes handling stress and managing emotions.

Program satisfaction and support

During follow-up interviews, respondents are asked to provide feedback about their experience in the WRS program, including their satisfaction with the program and the areas in which they felt they received support. Key findings include:

- **Most women are satisfied with the program.** The majority of women (87%) were “very satisfied” or “satisfied” with their WRS program, and 89% would recommend the program to women like themselves (Figure 17 and Appendix E).

17. Program satisfaction (n=301)



Note. Data were gathered at either the 1- or 6-month follow-up and are aggregated in the table above; therefore, the n-size (N=301) is higher than in previous tables.

- **Women gave high ratings to program staff.** When asked about specific program elements, women were most likely to agree that program staff helped them develop their goals (91%), were available when they needed support (91%), and understood their problems or concerns (90%; Appendix E1).
- **Women reported sobriety support as most helpful.** In terms of the services they found most helpful, women were most likely to report that their program helped them to get or stay sober (91%), and that this was the most helpful support to them and their children while in the program (42%). The program also provided the majority of women with emotional support (90%), addressed physical or mental health needs (84%), helped with parenting (79%), and helped women to find a support network of people to help them stay sober (71%; Appendix E5).
- **Women needed more help with housing and basic needs.** More than a quarter of women did not receive help but needed assistance with housing (36%) and basic needs such as transportation and paying the bills (23%; Appendix E5).

Dosage: The impact of service amount and participation levels on client outcomes

Women’s length of participation in WRS programs and the amount of service clients receive while in the program varies widely: across the 12 grant-funded programs, length of participation ranged from less than a month to over 5 years, while the amount of contact staff had with clients ranged from 1 to 1,146 hours. Given this wide variation in service intensity or “dosage” among women, it is possible that outcomes differ for women based upon the amount of service they received while in their program.

In order to explore the impact of dosage, analyses were conducted that compare outcomes for women who received a high level of service to those who received a lower level of service. Figure 18 illustrates how “high dosage” and “low dosage” were defined, which was based upon: women’s length of enrollment in the program; the total number of hours of contact time with program staff; and the number of hours of one-on-one, in-person contact with program staff. The threshold between “high” and “low” was based upon the range of data available for all clients and is an attempt to assess the impact of dosage on women’s outcomes.

18. Criteria used to define high- and low-dosage groups

Criteria	High dosage	Low dosage
Length of program participation	90 days or more	Less than 90 days
Total contact hours (group, phone, and one-on-one)	180 hours or more	Less than 180 hours
Total one-on-one (in-person) contact hours	12 hours or more	Less than 12 hours

Using these criteria, two groups were created: a high-dosage group of 295 women across 8 programs and a low-dosage group of 205 women across 11 programs. Together, the 500 women included in the dosage analysis represent 55 percent of women who closed in year two. The number of clients by program represented within each group is illustrated in Figure 19. Only women who had matched information available (intake to closing, and in some cases, 1-month follow-up data as well) and had data available for every criteria (i.e., no missing data) are included in these counts and in the subsequent analysis.

19. Number of high- and low-dosage clients by program

Women's Recovery Services grantee	Number of women in high-dosage group	Number of women in low-dosage group
American Indian Family Center	0	3
Avivo	23	16
Fond du Lac Reservation	2	4
Hope House of Itasca County	0	7
Meeker-McLeod-Sibley Community Health Services	0	7
Perspectives Inc.	3	0
Ramsey County Community Human Services	0	11
RS EDEN	48	19
St. Cloud Hospital Recovery Plus	58	113
St. Stephens Human Services	2	1
Wayside House	58	12
Wellcome Manor Family Services	101	12
Total	295	205

When high dosage makes a difference

When comparing the outcomes of women who received a high dosage of services to those who received low dosage, women in the high-dosage group were more significantly more likely to be:

- “Doing well” *at exit*
- Abstinent from substances *at exit*
- Abstinent from or using less substances *at exit*
- Abstinent from or using less substances *at the 1-month follow-up*
- Have successfully completed Rule 31 treatment *by exit*

It should be noted that while the high-dosage group was significantly more likely to be abstinent OR using fewer substances at the 1-month follow-up (Figure 20), this significance disappears when looking *just* at abstinence. Although more women in the high-dosage group were abstinent 1 month after they left their program (83%, versus 77% in the low-dosage group), this was not a statistically significant difference. That women in the high-dosage group were not significantly more likely than women in the low-dosage group to be abstinent from substances at the 1-month follow-up could reflect the challenges of the recovery process, as more women may return to substance use once they have exited their program. This finding also underscores the importance of aftercare and continued support to women after they exit a recovery program. Additional analysis is needed as more follow-up interviews are completed with women 1-, 6-, and 12-months after program exit to examine whether differences between the high- and low-dosage groups hold over time.

20. Outcomes significantly linked to a high dosage of service

Outcome	Total N	Proportion of women in <u>high dosage group</u>	Proportion of women in <u>low dosage group</u>
“Doing well” at exit	499	77%	52%***
Abstinent at exit	467	85%	72%***
Abstinent or using less at <u>exit</u>	464	97%	87%***
Involved in AA/NA at exit	482	92%	80%***
Successfully completed Rule 31 treatment by exit	486	74%	42%***
Abstinent or using less at <u>1-month follow-up</u>	145	98%	88%*

Note. Differences between high- and low-dosage groups were tested using chi-square tests and t-tests. Differences are significant at: *** $p < .001$ and * $p < .05$.

In addition, the analysis suggests that some outcomes are not significantly linked to the amount and intensity of services received while in a WRS program. When comparing outcomes of women who received a high dosage of services and those that received a low dosage, at program exit there were no significant differences in whether or not women were: involved with child protection; involved with the criminal justice system; employed; in housing (not homeless); or living in their own home or permanent supportive housing (Figure 21).

21. Outcomes *not* significantly linked to a high dosage of services

Outcome	Total N	Proportion of high dosage clients	Proportion of low dosage clients
<i>Not</i> involved with child protection at exit	498	41%	41%
<i>Not</i> involved with the criminal justice system at exit	492	45%	46%
Employed at exit	473	14%	12%
In housing (not homeless) at exit	421	89%	94%
In own home or permanent supportive housing at exit	382	49%	42%

Note. Differences between high- and low-dosage groups were tested using chi-square tests and t-tests, and were not found to be statistically significant.

Contributors to positive outcomes

Although research has examined the treatment and recovery process for women, the factors that contribute to successful outcomes are still not well understood. Using the data collected during year two of this initiative, we examined some of the potential factors exerting influence on select positive outcomes for women and their children in recovery, including:

- Being in housing considered by staff to be stable and supportive to recovery at closing
- Participating in medically-assisted treatment (MAT) while in the program
- Being connected to mental health services at closing (including women currently using mental health services and those who have access to mental health services should the need arise)
- Having at least 180 contact hours with staff over the course of the program (which includes phone contacts, one-on-one in-person meetings with staff, and group sessions)
- Having at least 4 in-person contacts with program staff over the course of the program (which includes one-on-one in-person meetings with staff and group sessions)
- Successfully completing Rule 31 treatment in one's most recent treatment episode while in the program
- Being pregnant at intake
- Using alcohol, methamphetamines, or heroin/opiates as the primary drug of choice
- Race
- Severe or chronic physical health conditions at intake

The analysis examined to what extent the above factors had a statistically significant impact on key outcomes (Figure 22).

The analysis examined to what extent the above factors had a statistically significant impact on key outcomes (Figure 23).

22. Individual characteristics/behaviors contributing to successful outcomes for women and children

Outcomes	Stable & supportive housing at closing	Connected to mental health services at closing	At least 180 hours of staff contact	At least 4 in-person contacts per month	Completed Rule 31 treatment by closing	Meth – primary drug of choice	Involved in child protection at intake	Race†
Decreased substance use at closing	✓	✓	✓	✓	✓	✓		✓ (W)
Decreased substance use at 1-mo follow-up	✓	✓	✓	✓	✓	✓		✓ (W)
No substance use at closing	✓	✓	✓		✓	✓		✓ (W)
No substance use at 1-mo follow-up	✓	✓			✓	✓		
Reunification with one or more children at closing	✓	✓	✓		✓		✓	
Not involved with child protection at closing								
Infants not placed outside the home following birth								
Negative toxicology results for mothers			✓	✓		✓	✓	
Negative toxicology results for infants						✓	✓	
Successfully completed Rule 31 treatment by closing	✓		✓			✓		✓ (W)

Note. Factors designated with a checkmark were found to have a statistically significant influence on the corresponding outcome ($p < .05$).

† Analyses were conducted to identify whether there were significant differences in the achievement of positive outcomes among women of particular racial groups – specifically African American, white, and American Indian/Alaskan Native women – when compared with all other races. Any racial group found to be significantly more likely to achieve an outcome in comparison with all other racial groups is identified in the chart above using the following abbreviations: W for white.

Results

Overall, many of the factors analyzed had a statistically significant impact on various key outcomes, as illustrated in Figure 22. Some of the highlights are described below.

Stable and supportive housing makes a difference. Results show that securing safe and stable housing by program closing is significantly linked to both abstinence and decreased substance use at closing and the 1-month follow-up. Having stable and supportive housing also has a significant impact on a woman's likelihood of reunification with one or more of her children at closing, as well as her successful completion of a Rule 31 treatment program by closing. While statistically significant, the nature of these correlations needs more consideration. It is likely that a woman's sobriety (or decreased substance use) and successful completion of treatment increases the likelihood that she could obtain safe and secure housing at program exit.

Connections to mental health services are linked to sobriety and reunification by closing. Women with access to mental health services at closing – including those currently receiving mental health services and those connected to mental health services should the need arise – were significantly more likely to be substance free (or show reduced usage) at closing and at the 1-month follow-up. Women with access to mental health services were also more likely to be reunified with one or more of their children at closing.

Women who receive higher levels of staff contact are more likely to achieve positive outcomes. Women who received at least 180 hours of staff contact or at least 4 in-person contacts with staff per month were significantly more likely to show decreased substance use at closing and at the 1-month follow-up. Women were also more likely to test negative for substances after giving birth if they had received either of these levels of staff contact. In addition, women who had received at least 180 hours of staff contact were significantly more likely to be abstinent at closing and at the 1-month follow-up, and to have successfully completed Rule 31 treatment by closing. These correlations should be further examined, as it is also possible that women who are abstinent and successfully completing treatment are more likely to interact with program staff.

Women who successfully complete treatment are more likely to be reunited with their children and to be substance free. While women may sometimes enter and exit treatment multiple times while in a program, those whose successfully completed their most recent treatment episode were significantly more likely to be reunited with one or more of their children by program exit. In addition, those successfully completing treatment were significantly more likely to be abstinent from substances or show decreased substance use by program exit and at the 1-month follow-up.

Outcomes differ depending upon one’s drug of choice. When looking at positive outcomes by a woman’s primary drug of choice, those who prefer methamphetamines are significantly more likely to achieve a number of positive outcomes at closing and at the 1-month follow-up: decreased or no substance use at closing, decreased or no substance use at the 1-month follow-up, negative toxicology for the woman and her baby at birth, and successful completion of Rule 31 treatment by closing. Women who prefer alcohol or heroin/other opiates are significantly more likely to report (or for staff to report) *negative outcomes* (such as positive toxicology results for mom and baby) by program exit and at the 1-month follow-up.

Involvement with child protection is linked to certain positive outcomes for mothers and their children. Women involved with child protection at intake were significantly more likely to be reunified with one or more of their children by closing and to test negative for substances (both mothers and their babies) at birth.

White women are more likely to achieve positive outcomes when compared to women of other races. When looking across all WRS programs, the race of the participating woman makes a difference in a number of outcomes. White women are significantly more likely to be substance-free or show reduced substance use at closing when compared to women of other races, and are significantly more likely to report reduced substance use at the 1-month follow-up. In addition, women who identify as white are also more likely to have successfully completed Rule 31 treatment by closing (Figure 22).

Overall, year two results show that women who identify as American Indian/Alaskan Native or African American/black are less likely to achieve positive outcomes through WRS programs. As Figure 23 shows, women who identify as American Indian/Alaskan Native are significantly more likely to be using more or the same amount of substances at the 1-month follow-up when compared to intake and are significantly less likely to have successfully completed treatment by closing. In addition, when compared to women of all other races, African American/black women are: significantly more likely to be using substances at exit; more likely to be using more or the same amount of substances at exit when compared with intake; more likely to test positive for substances after giving birth while in the program; more likely to give birth to babies that test positive for substances at birth; and less likely to have successfully completed treatment while in the program. BHD and WRS programs should consider these findings and examine the ways in which they work with women of color, in order to ensure that positive outcomes are equally attainable for all women, no matter their race. In addition, it should be noted that this analysis of contributors to positive outcomes does not account for confounding factors that might also contribute to differences in outcomes by race, or to other historical and systemic discriminatory practices and structures which may be in place.

23. The likelihood of achieving certain outcomes varies by race

Outcomes	N	Percentage of women who achieved each outcome		
		White	American Indian/ Alaskan Native	African American/ Black
Decreased substance use at closing	769	95%*	92%	86%**
Decreased substance use at 1-mo follow-up	219	98%**	82%**	88%
No substance use at closing	766	83%**	74%	66%**
No substance use at 1-mo follow-up	219	78%	74%	68%
Negative toxicology results for mothers	65	78%	85%	50%*
Negative toxicology results for infants	74	80%	86%	57%*
Successfully completed Rule 31 treatment by closing	747	67%***	51%**	50%*

Note. Analyses were conducted to identify whether there were significant differences in the achievement of positive outcomes among clients of particular racial groups – specifically white, American Indian/Alaskan Native African American, and African American/black clients – when compared with all other races. Any racial group found to be significantly more or less likely to achieve an outcome in comparison with all other racial groups is denoted with an asterisk, where *p< .05, **p< .01, ***p< .001.

Certain individual characteristics are not statistically linked to positive outcomes.

Positive outcomes were not statistically linked to various characteristics, including: participation in MAT while in the program, being pregnant at intake, or having a severe or chronic physical health condition. When looking at each of these characteristics across all WRS programs, women with these characteristics were not more or less likely to achieve positive outcomes.

Appendix

- A. Background
- B. Evaluation methods
- C. Additional data tables
- D. Evaluation tables (from database)
- E. 1-month follow-up interview tables
- F. 6-month follow-up interview tables

A. Background

Project overview

In 2016, the Minnesota Department of Human Services Alcohol and Drug Abuse Division – which became the Behavioral Health Division (BHD) in fall 2018 – contracted with twelve grantees across Minnesota to provide treatment support and recovery services for pregnant and parenting women who have substance use disorders, and their families. Through this initiative, known as Women’s Recovery Services, grantees provide comprehensive, gender-specific, family-centered services for the women in their care. The primary goals of the Women’s Recovery Services initiative are to help program participants remain alcohol and drug free, obtain or retain employment, remain out of the criminal justice system, find and secure stable housing, access physical and mental health services for themselves and their children, and deliver babies who test negative for substances at birth (if pregnant). In addition, the initiative aims to provide participants with information and support with regard to parenting. The current cycle of Women’s Recovery Services initiative began in July 2016 and will continue through June 2019, with the possibility of an extension.

The Department of Human Services contracted with Wilder Research of Saint Paul to conduct a comprehensive evaluation of these treatment support and recovery services. This report generally covers program activities that occurred from June 2017 through May 2018 (year two of the grant) for all 12 funded grantees, which includes: the American Indian Family Center (Wakanyeja Kin Wakan Pi “Our Children are Sacred” Program), Avivo (Mothers Achieving Recovery for Family Unity (MARFU) Program), Fond du Lac Reservation (Tagwii Women’s Recovery Program), Hope House of Itasca County (Project Clean Start), Meeker-McLeod-Sibley Community Health Services (Project Harmony), Perspectives Inc. (Women and Children: Hand in Hand), Ramsey County Community Human Services (Mothers First Program), RS EDEN (RS Eden Women and Children’s Family Center), St. Cloud Hospital Recovery Plus (Journey Home-Family Unity Program), St. Stephens Human Services (Kateri Residence), Wayside House (Rise Up in Recovery Program), and Wellcome Manor.

Eligibility guidelines for the grant

BHD provides a number of eligibility guidelines for providing grant-funded services, including that women must be pregnant or parenting dependent children under age 19. In addition, they must be enrolled in a substance abuse treatment program, have completed treatment within the six months prior to program enrollment, or commit to entering treatment within three months of program enrollment. Women who are pregnant and actively using alcohol or drugs are also eligible to receive program services, regardless of treatment status.

Program services

Services offered to program participants through the Women’s Recovery Services initiative vary somewhat across sites, but generally include the following:

Treatment and recovery services and supports

This includes: ongoing case management (including home and office visits); recovery coaching and/or support from peer recovery specialists; chemical dependency brief intervention, screening, assessment, and referrals for treatment; comprehensive needs assessments and individualized care plans; trauma-informed approaches to providing services; and ongoing urinalyses (UAs).

Basic needs and daily living services and supports (offered directly or by referral)

This includes: housing; financial education; emergency funds; transportation; job training; and child care.

Mental and physical health services and supports (offered directly or by referral)

This includes: medical and mental health assessments and services for women and children; Fetal Alcohol Spectrum Disorders education and screening for children; prenatal and postnatal health care and nutrition consultation for pregnant women; toxicology testing for mothers and infants; safe sleep education for infants; monitoring immunization status for children; and tobacco cessation services.

Parenting services and supports

This includes: parenting education using an evidence-based parenting curriculum; parenting support; recreational activities for families; and children’s programming.

B. Evaluation methods

Overview

In order to evaluate the progress of program participants and the effectiveness of the Women's Recovery Services initiative at each site, the Department of Human Services asked Wilder Research to conduct an evaluation of the program for the duration of the grant.

Over the course of the initiative, Wilder Research will address the following evaluation questions:

Process evaluation

1. How many women are referred to a program, have a case opened and closed, and are served by the program?
2. What are the characteristics of women served?
3. What services and referrals are women receiving through their participation in the program?
4. What are the main differences across programs?

Outcome evaluation

5. To what extent does participation in the program result in women reducing their use of drugs and alcohol, or maintaining their sobriety?
6. To what extent does participation in the program increase women's access to community resources to meet their (and their children's) basic needs?
7. To what extent does participation in the program help women meet their (and their children's) basic needs?
8. To what extent does participation in the program help women find/maintain stable housing?
9. To what extent does participation in the program help women obtain or maintain employment?
10. To what extent does participation in the program help women stay out of the criminal justice system?

11. To what extent does participation in the program improve women's (and their children's) overall physical and mental health?
12. To what extent does participation in the program help women improve their knowledge and skills related to parenting?
13. To what extent does participation in the program help pregnant women deliver healthy, drug-free infants?
14. To what extent do Women's Recovery Services grant-funded programs result in a cost-savings or cost-benefit to the community/Minnesota?

Data collection instruments

Research staff, in partnership with BHD, developed seven instruments in order to collect information about women receiving program services. For the current evaluation year, all forms were available in paper format as well as in a web-based database, into which all data were ultimately entered. Data collection instruments generally remained the same as in year one, with the exception of some additional questions to select instruments. Data collection instruments for year two are described in more detail below.

Client-level forms

Intake form: Program staff complete a new intake form for each woman who enters their program. This form collects basic demographic and other descriptive information about each woman and her dependent children. It serves as a baseline for assessing changes over time in primary outcome areas of interest such as substance use, employment, housing, criminal justice involvement, child protection involvement, and physical and mental health.

UA and Contacts form: This form captures information about Urinalysis (UA) tests performed and their outcomes (positive or negative) and logs the amount of direct contact the woman had with the program.

Pregnancy Outcome form: Program staff complete a pregnancy outcome form for all pregnant women served through the grant. This form gathers information about mother's and baby's health at delivery including toxicology status for both the mother and infant. The form also gathers descriptive information about the infant. Other birth outcomes such as miscarriage, abortion, and stillbirth are also documented on this form.

Closing form: Program staff complete a closing form for each woman when they leave the program. The closing form gathers information about maternal health data, child health data, use of services while enrolled, length of sobriety in the program, treatment status, program referrals, and closing status. In addition, the closing form is used to capture information about services and referrals related to recovery support, physical and mental health, employment, housing, emergency needs, culturally specific needs, and child-specific needs. It also asks program staff to record all screenings and assessments administered to women and their children while in the program, including those administered directly by the program and by other agencies, if known.

Follow-up interviews

In order to track the progress of women and the maintenance of their goals, follow-up interviews are conducted with women one month, six months, and twelve months after they leave the program. Wilder Research began conducting interviews by telephone in year two of the grant (Fall 2017) and will continue through the duration of the grant. Interviewers ask women about their access to social support, education and employment, housing, transportation, physical and mental health, substance use, involvement with the criminal justice and child protection systems, self-efficacy, parenting and their relationship with their child(ren), children's health and well-being, and their satisfaction with the program.

Technical assistance

Throughout the grant period, Wilder Research provides programs with evaluation technical assistance (TA) as requested.

Data analysis

For this report, Wilder Research conducted analysis of the data described above, entered by program staff into the Women's Recovery Services database, for activities that occurred from June 1, 2017 through May 31, 2018 (year two of the grant). Wilder used the database to conduct basic analysis such as frequencies (number of women in the program) and percentages. Additional analyses (e.g., chi-square tests, McNemar's tests) were conducted using statistical software (SPSS) in order to assess changes in outcomes over time. This includes pretest/posttest matched analysis, which reflects women whose cases were closed during year two and who had matching data available at intake and closing, as well as those who had matching data at intake, closing and the 1-month follow-up. Women who were served less than 15 days in the program were excluded from outcome analyses, as it is not expected that women with such limited program exposure will benefit from the program to the same degree as those involved with the program for a longer term.

Limitations

The following summarizes limitations that should be considered when interpreting evaluation data for year two.

Completeness of data

All information included in this report is based upon data entered into the Women's Recovery Services database, which is completed by program staff. Program staff have been trained how to use and administer the data collection forms and enter data into the database. Due to the high demands on program staff and issues of staff turnover, it is possible that errors have been introduced into the database or that some participant or program information has not been entered and is unaccounted for in the findings reported here.

In order to best meet the needs of DHS and the programs, the data collection instruments are updated on an ongoing basis. For this reason, it is likely there will be a certain amount of missing data due to recent additions of data collection questions during the current or previous reporting periods.

In addition, much of the outcome analysis included in this report is based on a matched-case analysis for women who participated in the program for at least 15 days. Only those women with complete information at both intake and closing (for the pre/post comparative analysis) were included to determine if statistically significant changes occurred during their participation in the program. Often, the total number of women who were served or exited the program in year two exceeds the number of women that met these criteria. Thus, the results of the outcome analysis reflect changes observed among a more limited number of women.

Comparing information collected from multiple sources

Analysis of follow-up data comparing outcomes at intake and closing with outcomes after exiting the program combines data collected by program staff and participants. Program staff collect intake and closing information for women participating in the program. At the follow-up interviews (1-, 6-, and 12-months after closing), women who participated in the program provide information about their wellbeing and other related issues. Therefore, analyses that compare intake, closing, and follow-up data are using information gathered from various sources, which may introduce bias and lessen the accuracy of statistical analysis.

C. Additional data tables

C1. Change in alcohol and drug use from intake to closing (N=905)

Not using substances at closing	n	%
No change: not using drugs/alcohol at intake or closing	193	21%
Decreased use: not using drugs/alcohol at closing	445	49%
Using substances at closing		
Decreased use: using drugs/alcohol <u>less</u> at closing	113	13%
No change: using drugs/alcohol at intake and closing	22	2%
Increased use: using drugs/alcohol <u>more</u> at closing	35	4%
Substance use unknown	97	11%

C2. Complete list of matched analysis results from intake to closing

	Total N	Intake		Closing	
		n	%	n	%
Substance use within 30 days prior to intake/closing	763	446	58%	160	21%***
Tobacco use within 30 days prior to intake/closing	797	701	88%	706	89%
Involvement in any form of recovery support	747	411	55%	666	89%***
Involvement in AA and/or NA	747	362	49%	633	85%***
Involvement with child protection	845	469	56%	439	52%**
Involvement with the criminal justice system	822	437	53%	440	54%
Arrested in the 30 days prior to intake/closing	787	134	17%	28	4%***
In housing/not homeless	509	423	83%	478	94%***
In own home or permanent supportive housing	401	178	44%	217	54%***
In "stable" housing	718	361	50%	543	76%***
In housing "supportive to recovery"	686	400	58%	597	87%***
Has medical insurance	817	746	91%	807	99%***
Has a primary care physician and/or clinic	765	544	71%	626	82%***
Employed full- or part-time	764	102	13%	139	18%**
In school or a career-training program	835	26	3%	37	4%†

Note. Differences between intake and closing were tested using the McNemar's test and are significant at *p< .05, **p< .01, ***p< .001 and †p<.10 (trending toward statistical significance).

C3. Substance use: Matched analysis results from intake to closing to 1-month follow-up (N=206)

	Intake		Closing		1-month follow-up	
	n	%	n	%	N	%
Substance use at intake compared to closing	128	62%	25	12%***		
Substance use at intake compared to 1-month follow-up	128	62%			45	22%***
Substance use at closing compared to 1-month follow-up			25	12%	45	22%*

Note. Differences between each point in time were tested using Cochran's Q Test and follow-up pairwise comparisons. Differences are significant at: ***p<.001 and *p< .05.

C4. Supportive living arrangements: Matched analysis results from intake to closing to 1-month follow-up (N=190)

	Intake		Closing		1-month follow-up	
	n	%	n	%	N	%
In housing "supportive to recovery" at intake compared to closing	107	56%	169	89%***		
In housing "supportive to recovery" at intake compared to 1-month follow-up	107	56%			174	92%***
In housing "supportive to recovery" at closing compared to 1-month follow-up			169	89%	174	92%

Note. Differences between each point in time were tested using Cochran's Q Test and follow-up pairwise comparisons. Differences are significant at ***p<.001.

C5. Stable living arrangements: Matched analysis results from intake to closing to 1-month follow-up (N=192)

	Intake		Closing		1-month follow-up	
	n	%	n	%	N	%
In "stable" housing at intake compared to closing	102	53%	159	83%***		
In "stable" housing at intake compared to 1-month follow-up	102	53%			179	93%***
In "stable" housing at closing compared to 1-month follow-up			159	83%	179	93%*

Note. Differences between each point in time were tested using Cochran's Q Test and follow-up pairwise comparisons. Differences are significant at ***p<.001 and *p< .05.

C6. Employment: Matched analysis results from intake to closing to 1-month follow-up (N=184)

	Intake		Closing		1-month follow-up	
	n	%	n	%	N	%
Employed full- or part-time at intake compared to closing	27	15%	41	22%*		
Employed full- or part-time at intake compared to 1-month follow-up	27	15%			68	37%***
Employed full- or part-time at closing compared to 1-month follow-up			41	22%	68	37%***

Note. Differences between each point in time were tested using Cochran's Q Test and follow-up pairwise comparisons. Differences are significant at ***p<.001 and *p< .05.

C7. Child protection involvement: Matched analysis results from intake to closing to 1-month follow-up (N=207)

	Intake		Closing		1-month follow-up	
	n	%	n	%	N	%
Involvement with child protection at intake compared to closing	106	51%	98	47%		
Involvement with child protection at intake compared to 1-month follow-up	106	51%			85	41%***
Involvement with child protection at closing compared to 1-month follow-up			98	47%	85	41%**

Note. Differences between each point in time were tested using Cochran's Q Test and follow-up pairwise comparisons. Differences are significant at ***p<.001 and **p< .01.

C8. Outcomes for women in high- and low-dosage groups

Outcome	Total N	Proportion of high-dosage clients	Proportion of low-dosage clients
“Doing well” at exit	499	77%	52%***
Abstinent at exit	467	85%	72%***
Abstinent at 1-month follow-up	145	83%	77%
Not using substances, or using less, at exit	464	97%	87%***
Not using substances, or using less, at 1-month follow-up	145	98%	88%*
Successfully completed Rule 31 treatment by closing	486	74%	42%***
Involved in AA/NA at exit	482	92%	80%***
Not involved with child protection at exit	498	41%	41%
Not involved with the criminal justice system at exit	492	45%	46%
Employed at exit	473	14%	12%
In housing (not homeless) at exit	421	89%	94%
In own home or permanent supportive housing at exit	382	49%	42%

Note. Differences between high and low dosage groups were tested using chi-square tests and t-tests. Differences are significant at: ***p<.001 and *p<.05.

D. Evaluation tables (from database)

Aggregate Data Evaluation Tables: Part One

Program Name Aggregate Data

Throughout this report, (empty) indicates data are missing.

Table 1

Opened, served and closed clients and children

	Clients	Children	New Babies	Reporting Period
Clients Still Open from Previous Period	373	710	30	Start Date 06-01-2017
New Opened This Period	963	1851	103	End Date 05-31-2018
Total Served this Period	1,336	2,561	133	
Closed This Period	905	1755		

Table 2

Eligibility of new clients opened this period

	Number	%
New Clients Opened This Period	963	100%
Clients in Treatment at intake	830	86%
Clients who completed treatment within 6 months prior to intake	83	9%
Clients who plan to enter treatment within 3 months of intake	32	3%
Clients who were pregnant and using drugs or alcohol at intake	68	7%
Clients not in treatment (not meeting eligibility criteria)	38	4%

Reason for no treatment	Number of Intakes
Active substance use during pregnancy	1
Active use during pregnancy	1
Active use during pregnancy - just delivered	1
Child protection worker required to attend our group	1
Client delivered baby and was positive for drug use.	1
Client is parenting and using cocaine	1
Client last used in June, she is currently parenting	1
Client stated she has been sober 10 months	1
Client used substances during pregnancy.	1
doesn't want to go into treatment as a recovery option	1
Have been sober for over 6 months; wants recovery support in order to not relapse	1
Heavy substance use prior to pregnancy	1
High risk for relapse, SO is in treatment	1
High risk of relapse (did in august), recent discharge from project harmony, requirement of CPS to participate	1
hx rx drug use for pain control. Recently taken off rx pain killers r/t 3rd trimester of preg, but has thoughts of getting and taking again	1
is allowed to skip treatment if she stays in Project Harmony	1
Looking for a new place to live	1
Needs support from group	1
No treatment recommended	1
Parenting	6
Parenting and using	1
parenting young children and actively using substances	1
parentling	1
Pregnant and at risk of using	1
Pregnant and homeless	1
Pregnant, in early recovery, just released from prison	1
Quortney is pregnant and using	1
Recently applied for guardianship of her 15 yr. old nephew. In need of recovery support and parenting tools provided through our program..	1
Rule 25 assessment in-progress	1
Rule 25 assessor stated MADD panel support group at American Indian Family Center, individual counseling with Native American female counselor, abstain from all mood altering chemicals, remain law-abiding, remain compliant with probation	1
Rule 25 doesn't require intensive services	1
tested positive in pg and just delivered, waiting on a Rule 25	1
thinks of using every day. Doesn't want treatment but wants to determine her own recovery path	1
Totals (33 groups)	38

Table 3

Parenting status of new clients opened this period

	Number	%
Clients who were pregnant at intake from this period	206	21%
Clients who were parenting at intake	840	87%

CLIENTS SERVED THIS YEAR
Descriptive information at intake

Table 4

Referral source

How was the client referred to your program?	Number of Intakes	
<i>(empty)</i>	2	
Child Protection	227	
Community program	83	
Treatment	269	
Mental health center	13	
Corrections	99	
Drug court	41	
Family/friends	65	
Clinic/hospital	79	
Self-referral	262	
Another WRS grant-funded program	8	
Other	176	
Unknown	12	
Totals (13 groups)	1336	100.0%

Other Referral Source	Number of Intakes
Activity Director at the Steele County Jail	1
CD Counselor at Fairview	1
City Attorney	1
Coordinated Entry - Homeless Shelter	8
CRAFT in Rochester	1
Crossroads program in jail	1
Dakota County Addiction Recovery Specialist	1
Detox	2
Domestic Violence Shelter	2
Employer	1
Family Children Services	1
Family Court	1
Former Probation Officer	1
Found us online	1
Girl in jail	1
Halfway House	1
Hennepin County CoC	1
Hennepin County CoC - Shelter	40
Hennepin County CoC-Shelter	2
Hennepin County Shelter	2
Homeless Shelter/Coordinated Entry Referral	1
In Home Worker	1
In-home parenting worker	1
Insurance Company	1
Internet search	1
Kanabec Public Health	1
Lawyer	1
Mental Health Court	1
Mother's First	1
Past clients of Wellcome Manor Family Services	1
Past Wellcome Manor Client	1
Pennington County Social Services	1
PHN	1
Probation	1
Probation Officer	1
Program in jail	1
Public Health Nurse	2
Public Health Nurse thru Ramsey County	1
Recovery Is Happening	1
Rice County Social Services	1
Rule 25 Assessor	1
Rule 25	1
Rule 25	1
Rule 25 Assessor	64
Rule 25 Assessor at ART	1
Rule 25 assessor-ART	1
Rule 25 SW	1
Sober Housing	2
Social Services	2
Social Worker	3
Solid Ground	1
Stay of Commitment	1
Supportive Housing	1
Therapist	1
Web search	1
West Hills Lodge	1
White Earth tribe	1
Woman she was in jail with	1

Client participation required by other system involvement

Required to participate (Y/N)	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	4	0.3%
Yes	741	55.5%
No	578	43.3%
Unknown	13	1.0%
Totals (4 groups)	1336	100.0%

Required to participate	Number of Intakes	
Child protection	456	
Criminal justice system involvement, e.g. probation	265	
Some other system or organization, e.g. housing	20	
Totals (3 groups)	741	100.0%

Table 5

Clients by County

County Name	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	7	0.5%
Aitkin	4	0.3%
Anoka	23	1.7%
Becker	21	1.6%
Beltrami	20	1.5%
Benton	16	1.2%
Big Stone	2	0.1%
Blue Earth	15	1.1%
Brown	8	0.6%
Carlton	20	1.5%
Carver	9	0.7%
Cass	20	1.5%
Chisago	6	0.4%
Clay	3	0.2%
Cook	5	0.4%
Cottonwood	4	0.3%
Crow Wing	11	0.8%
Dakota	31	2.3%
Dodge	8	0.6%
Douglas	16	1.2%
Faribault	2	0.1%
Fillmore	3	0.2%
Freeborn	6	0.4%
Goodhue	3	0.2%
Grant	3	0.2%
Hayward	1	0.1%
Hennepin	378	28.3%
Houston	4	0.3%
Isanti	3	0.2%
Itasca	51	3.8%
Jackson	2	0.1%
Kanabec	5	0.4%
Kandiyohi	8	0.6%
Koochiching	1	0.1%
Le Sueur	6	0.4%
Lyon	3	0.2%
Mahnomen	8	0.6%
Martin	1	0.1%
McLeod	35	2.6%
Meeker	19	1.4%
Mille Lacs	14	1.0%
Morrison	6	0.4%
Nicollet	9	0.7%
Nobles	3	0.2%
Olmsted	26	1.9%
Otter Tail	4	0.3%
Pennington	7	0.5%
Pine	4	0.3%
Pipestone	2	0.1%
Polk	2	0.1%
Pope	3	0.2%
Ramsey	235	17.6%
Red Lake	1	0.1%
Redwood	9	0.7%
Renville	3	0.2%
Rice	9	0.7%
Rock	2	0.1%
Scott	19	1.4%

Table 6

Race and ethnicity of clients at intake

Hispanic Origin	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	1	0.1%
Yes	115	8.6%
No	1216	91.0%
Unknown	4	0.3%
Totals (4 groups)	1336	100.0%

Race	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	1	0.1%
African American/Black	205	15.3%
American Indian/Alaskan Native	279	20.9%
Asian American/Pacific Islander	24	1.8%
White	693	51.9%
Biracial/Multiracial	123	9.2%
Other	10	0.7%
Unknown	1	0.1%
Totals (8 groups)	1336	100.0%

Other Race	Number of Intakes
Hispanic	6
Mexican	4
Totals (2 groups)	10

Table 7

Gender and sexual orientation of clients at intake

Gender	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	2	0.1%
Female	1333	99.8%
Transgender or Bigender	1	0.1%
Totals (3 groups)	1336	100.0%

Sexual Orientation	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	1	0.1%
Heterosexual or straight	1153	86.3%
Bisexual	85	6.4%
Homosexual or lesbian/gay	14	1.0%
Unsure about sexual orientation	6	0.4%
Unknown	77	5.8%
Totals (6 groups)	1336	100.0%

Table 8

Age at intake

Age at Intake Category	Number of Intakes	Number of Intakes (% of col)
Under age 18	2	0.1%
Age 18 to under 25	268	20.1%
Age 25 to under 35	758	56.7%
Age 35 to under 49	281	21.0%
Age 49 and older	24	1.8%
Unknown	3	0.2%
Totals (6 groups)	1336	100.0%

Table 9

Highest level of education completed at intake

Education Order	Education	Number of Intakes	Number of Intakes (% of col)
2	Some school, but no High School diploma or GED	413	30.9%
3	High School diploma or GED	377	28.2%
4	Some college, but no degree	357	26.7%
5	Vocational Certificate, Associate Degree	143	10.7%
6	College degree or graduate/professional degree	40	3.0%
7	Unknown	5	0.4%
8	(empty)	1	0.1%
Totals (7 groups)		1336	100.0%

Table 10

Participation in school/career training at intake

Are you in school or a career training program?	Number of Intakes	Number of Intakes (% of col)
(empty)	1	0.1%
Yes	44	3.3%
No	1288	96.4%
Unknown	3	0.2%
Totals (4 groups)		1336 100.0%

Table 11

Employment at intake

Employment	Number of Intakes	Number of Intakes (% of col)
(empty)	1	0.1%
Unable to work/disabled	1	0.1%
Unemployed – not looking for work	12	0.9%
Employed full-time or part-time	187	14.0%
Disabled/Unable to work	69	5.2%
Unemployed – looking for work	262	19.6%
Unemployed – not looking for work, including clients who are in school and not working	801	60.0%
Unknown	3	0.2%
Totals (8 groups)		1336 100.0%

Other Employment	Number of Intakes
No records found	

Table 12

Living arrangements at intake

Living arrangement during the past 30 days	Number of Intakes	Number of Intakes (% of col)
(empty)	1	0.1%
In own house or apartment	327	24.5%
In relative or friend's home	408	30.5%
Transitional housing or GRH (Group Residential Housing)	23	1.7%
Permanent supportive housing	9	0.7%
Sober house/halfway house	12	0.9%
A shelter or motel (using a voucher)	115	8.6%
A place not intended for housing like outside, car, vacant building, etc.	82	6.1%
Correctional facility	93	7.0%
Inpatient treatment facility	253	18.9%
Other	8	0.6%
Unknown	5	0.4%
Totals (12 groups)		1336 100.0%

Other Living Arrangement	Number of Intakes
Detox	1
Hospital	4
Hospital	1
Hospital and Detox	1
Psych Ward	1
Totals (5 groups)	8

Living arrangements if client was in treatment 30 days before entering the program

Living Prior to Treatment	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	5	2.0%
In own house or apartment	49	19.4%
In relative or friend's home	93	36.8%
Transitional housing and/or GRH (Group Residential Housing)	4	1.6%
Permanent supportive housing	1	0.4%
Sober house/halfway house	3	1.2%
A shelter (emergency or domestic violence) or motel	23	9.1%
A place not intended for housing like outside, car, vacant building, etc.	15	5.9%
Correctional facility	24	9.5%
Other	28	11.1%
Unknown	8	3.2%
Totals (11 groups)	253	100.0%

Other Living Arrangement prior to Treatment	Number of Intakes
Abbott Hospital	1
Another inpatient treatment center	2
Another inpatient treatment facility	13
Dakota County Detox for 30 Days	1
hospital	2
in-patient treatment	1
inpatient treatment	4
outpatient treatment	1
St Joes	1
treatment	2
Totals (10 groups)	28

Supportive living arrangements	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	1	0.1%
Yes	771	57.7%
No	539	40.3%
Unknown	25	1.9%
Totals (4 groups)	1336	100.0%

Stable living arrangements	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	1	0.1%
Yes	657	49.2%
No	658	49.3%
Unknown	20	1.5%
Totals (4 groups)	1336	100.0%

Table 13
History of homelessness

Ever been homeless	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	7	0.5%
Yes	996	74.6%
No	306	22.9%
Unknown	27	2.0%
Totals (4 groups)	1336	100.0%

Times without permanent home	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	64	6.4%
1	306	30.7%
2	161	16.2%
3	141	14.2%
4	84	8.4%
5	84	8.4%
6	32	3.2%
7	12	1.2%
8	10	1.0%
9	3	0.3%
10	58	5.8%
11	1	0.1%
12	9	0.9%
13	1	0.1%
14	1	0.1%
15	11	1.1%
16	1	0.1%
20	11	1.1%
25	1	0.1%
30	2	0.2%
40	1	0.1%
50	1	0.1%
100	1	0.1%
Totals (23 groups)	996	100.0%

Table 14

Physical and mental health at intake

Emergency Room past 6 mo	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	5	0.4%
Yes	603	45.1%
No	675	50.5%
Unknown	53	4.0%
Totals (4 groups)	1336	100.0%

Average # of ER visits excludes clients who did not report their # of ER visits.

Program Name	Number of Intakes	# of ER visits (avg)	# of ER visits (min)	# of ER visits (max)
Aggregate Data	601	2.16	1.00	15.00
Totals (1 groups)	601	2.16	1.00	15.00

Do you have any severe or chronic physical health problems?	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	3	0.2%
Yes	640	47.9%
No	681	51.0%
Unknown	12	0.9%
Totals (4 groups)	1336	100.0%

Program Name	Number of Intakes	CH - Arthritis or carpal tunnel (tot)	CH - Cancer (tot)	CH - Chronic neck or back problems (tot)	CH - Diabetes (tot)	CH - Endometriosis (tot)	CH - Fibromyalgia or neuropathy (tot)	CH - Heart/circulatory illness (tot)	CH - Hepatitis C (tot)	
<u>Aggregate Data</u>	1336	103	13	186	30	13	50	42	49	
Totals (1 groups)	1336	103	13	186	30	13	50	42	49	69

Program Name	Number of Intakes	CH - HIV/AIDS (tot)	CH - Kidney stones (tot)	CH - Lung/respiratory illness (tot)	CH - Migraines (tot)	CH - Other chronic pain other than above (tot)	CH - Other (tot)	CH - Seizure disorder (tot)	CH - Sexually transmitted infection (tot)	
<u>Aggregate Data</u>	1336	6	22	149	125	67	78	21	24	
Totals (1 groups)	1336	6	22	149	125	67	78	21	24	173

Specify physical health problems	Number of Intakes
"Thyroid disease"	1
Ankle	1
Auto immune hepatitis	1
Back spasms, Restless Leg Syndrome, Floater	1
Bladder Infections	1
blood clot in lung	1
blood clot in lung, chest and arm	2
blood clots	1
bone spurs	1
bowel issues	1
central cord syndrome	1
Chronic Kidney Infections	1
Crohn's Disease	1
Cyst	1
edema with unknown cause	1
Epilepsy	1
Eyes- need glasses	1
Factor 5	1
Fibroids	1
Foot issue	1
Gallstones	1
gastrointestinal issues	1
Genetic Kidney Disease	1
Heart and liver damage, stomach cyst	1
Hip displacement from birth	1
Hip, hernias and ankle	1
History of Gullian Barre	1
hydrotenitisupertiba	2
Hypoglycemic	1
Hypothyroid	1
hypothyroidism	4
Insomnia	1
kidney problems	1
kidney infections	1
Legally Blind, Anoxic Brain Injury	1
legs since falling downstairs	1
Liver Issues	1
low iron	1
Low thyroid	1
Mass blood cell disease	1
Mild Chiari Malformation	1
MRSA	1
MS, Carrier MD, DJD, Chronic Pneumonia	1
Multiple Sclerosis	1
neurofibromitosis	1
obgyn	1
Osteonecrosis, Hx of Leukemia	1
ovarian cysts	1
Pancreatitis	1
Pancreatitis	1
pre-diabetes	1
pre-diabetes; gastro-intestonal problems	1
pre-diabetic	1
problems with right eye blindness	1
Prolapsed uterus	1
psoriasis	2
PXE- Pseudoxanthoma elasticum	1
Sarcoidosis	1
..	.

Do you currently have a mental health diagnosis?	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	5	0.4%
Yes	1078	80.7%
No	239	17.9%
Unknown	14	1.0%
Totals (4 groups)	1336	100.0%

Program Name	Number of Intakes	MH - Depressive Disorder (tot)	MH - Bi-Polar/Manic Depression (tot)	MH - Anxiety Disorder inc PTSD (tot)	MH - ADHD/ADD/Disruptive Behavior Disorder (tot)
Aggregate Data	1336	818	233	912	248
Totals (1 groups)	1336	818	233	912	248

Program Name	Number of Intakes	MH - Personality Disorder (tot)	MH - Schizophrenia/ other psychotic disorder (tot)	MH - Other mental health diagnosis (tot)	MH - Unknown Mental diagnosis (tot)
Aggregate Data	1336	119	24	32	8
Totals (1 groups)	1336	119	24	32	8

Specify Other Mental Health diagnosis	Number of Intakes
<u>adjustment Disorder</u>	4
<u>Adjustment Disorder</u>	1
<u>anger problems</u>	1
<u>Anorexia</u>	1
<u>attachment disorder</u>	1
<u>Cleptomania</u>	1
<u>disassociation disorder</u>	1
<u>Disociative Identity Disorder</u>	1
<u>dyslexia</u>	1
<u>eating disorder</u>	4
<u>Emotional Behavioral Disorder</u>	1
<u>FAE</u>	1
<u>FASD</u>	1
<u>Gender dysphoria</u>	1
<u>Insomnia</u>	3
<u>learning disability and attachment disorder</u>	1
<u>Learning Disabilites</u>	1
<u>Masochism</u>	1
<u>Meth induced Psychosis</u>	1
<u>narcolepsy</u>	1
<u>Other-Specified Trauma Related Disorder</u>	1
<u>sleep disorder</u>	1
<u>Trauma</u>	2
Totals (23 groups)	32

Diagnosed with FASD?	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	2	0.1%
No	12	0.9%
Yes	20	1.5%
<u>No, but I suspect I have FASD</u>	72	5.4%
<u>No, and I do not suspect I have FASD</u>	1185	88.7%
Unknown	45	3.4%
Totals (6 groups)	1336	100.0%

Diagnosed with a TBI?	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	2	0.1%
No	9	0.7%
Yes	66	4.9%
No, but I suspect it	88	6.6%
No, and I do not suspect it	1122	84.0%
Unknown	49	3.7%
Totals (6 groups)	1336	100.0%

Diagnosed with PTSD?	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	2	0.1%
No	6	0.4%
Yes	587	43.9%
No, but I suspect it	161	12.1%
No, and I do not suspect it	549	41.1%
Unknown	31	2.3%
Totals (6 groups)	1336	100.0%

Table 15

Medical insurance at intake

Do you have medical or insurance coverage?	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	3	0.2%
Yes, public insurance (MA, PMAP, MNCare, etc)	1157	86.6%
Yes, private insurance	37	2.8%
No	132	9.9%
Unknown	7	0.5%
Totals (5 groups)	1336	100.0%

Table 16

Primary physician or clinic at intake

Do you have a primary care physician or clinic?	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	3	0.2%
Yes, physician only	19	1.4%
Yes, clinic only	278	20.8%
Yes, both physician and clinic	665	49.8%
No, neither	339	25.4%
Unknown	32	2.4%
Totals (6 groups)	1336	100.0%

Table 17

Poverty status at intake

Income Below Federal Poverty Guidelines	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	1	0.1%
Yes	1232	92.2%
No	70	5.2%
Unknown	33	2.5%
Totals (4 groups)	1336	100.0%

Table 18

Connections to community resources at intake

Program Name	Number of Intakes	Benefits - MFIP cash assistance (tot)	Benefits - WIC (tot)	Benefits - Food Support (SNAP/food stamps) (tot)	Benefits - General Assistance (tot)	Benefits - Subsidized housing (tot)	Benefits - Childcare assistance (tot)	Benefits - Child support (tot)
Aggregate Data	1336	381	254	605	229	99	29	81
Totals (1 groups)	1336	381	254	605	229	99	29	81

Program Name	Number of Intakes	Benefits - Social Security (regular retirement) (tot)	Benefits - SSI/SSDI (tot)	Benefits - Unemployment benefits (tot)	Benefits - Veterans benefits (tot)	Benefits - Tribal Per Capita payments (tot)	Benefits - Tribal lease payment (tot)	Benefits - None of these benefits (tot)
Aggregate Data	1336	4	106	2	1	50	1	342
Totals (1 groups)	1336	4	106	2	1	50	1	342

Table 19

Child protection involvement at intake

Currently involved with Child Protection?	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	2	0.1%
Yes	714	53.4%
No	617	46.2%
Unknown	3	0.2%
Totals (4 groups)	1336	100.0%

Table 20

Criminal justice system involvement and arrests at intake

Currently involved with the criminal justice system?	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	2	0.1%
Yes	661	49.5%
No	668	50.0%
Unknown	5	0.4%
Totals (4 groups)	1336	100.0%

Have you been arrested in the past 30 days?	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	2	0.1%
Yes	211	15.8%
No	1107	82.9%
Unknown	16	1.2%
Totals (4 groups)	1336	100.0%

Substance use and treatment

Table 21

Tobacco use at intake

Recent Tobacco Use	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	2	0.1%
Yes	1133	84.8%
No	183	13.7%
Unknown	18	1.3%
Totals (4 groups)	1336	100.0%

Table 22

Alcohol or other drug use in the last 30 days
(Excluding forced sobriety)

Recent alcohol or other drug use	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	1	0.1%
Yes	764	57.2%
No	562	42.1%
Unknown	9	0.7%
Totals (4 groups)	1336	100.0%

Type of drugs used in the past 30 days

Only includes those marking 'Yes' to recent drug or alcohol use.

Program Name	Number of Intakes	Substance - Alcohol (tot)	Substance - Cocaine powder (tot)	Substance - Crack (tot)	Substance - Marijuana/ Hashish (tot)	Substance - Heroin (tot)	Substance - Non-prescription Methadone (tot)	Substance - Pharmaceutical Opioids (tot)	Substance - PCP (tot)
Aggregate Data	1336	262	56	32	326	107	6	81	3
Totals (1 groups)	1336	262	56	32	326	107	6	81	3

Program Name	Number of Intakes	Substance - Other Hallucinogens/ Psychedelics (tot)	Substance - Methamphetamine (tot)	Substance - Other Amphetamines (tot)	Substance - Other Stimulants (tot)	Substance - Benzodiazepines (tot)	Substance - Other Tranquilizers (tot)	Substance - Barbiturates (tot)
Aggregate Data	1336	15	392	18	14	42	0	2
Totals (1 groups)	1336	15	392	18	14	42	0	2

Program Name	Number of Intakes	Substance - Other Sedatives/ Hypnotics (tot)	Substance - Ketamine (tot)	Substance - Ecstasy/ other club drugs (tot)	Substance - Inhalants (tot)	Substance - Over-the-counter medications (misuse) (tot)	Substance - Other Drugs (tot)	Substance - Unknown Drugs (tot)
Aggregate Data	1336	2	3	3	3	4	28	1
Totals (1 groups)	1336	2	3	3	3	4	28	1

Other drugs (please specify)	Number of Intakes
ambien	1
Coricidin	1
Coricidin Cough and Cold	1
Cough Syrup and Immodium	1
gabapentin	3
gabepentan	2
Hand Sanitizer	1
Hydroxyzine	1
muscle relaxers	1
Nicotine	3
Nyquil, Hand sanitizer and Witch Hazel	1
opiates	1
opiates and synthetics	1
other opiates	1
Overdosed on Benadryl	1
pain medications	1
Sober date 5/26/17	1
Spice	1
Suboxone	1
synthetic opiates	1
Synthetics	1
THC	2
Totals (22 groups)	28

Length of sobriety

Only includes those with at least 30 days of sobriety

Program Name	Number of Intakes	Total Days Sober (min)	Total Days Sober (max)	Total Days Sober (avg)
Aggregate Data	550	30	1,474	128
Totals (1 groups)	550	30	1,474	128

Table 22.5

Type of drugs used in the past year

Over the past year, which of the following substances did you use?
(This should not be based only on UA test results.)
Do not include in 2018 reporting.

Program Name	Number of Intakes	Past Year - Alcohol (tot)	Past Year - Cocaine powder (tot)	Past Year - Crack (tot)	Past Year - Marijuana/Hashish (tot)	Past Year - Heroin (tot)	Past Year - Non-prescription Methadone (tot)	Past Year - Pharmaceutical Opioids (tot)	Past Year - PCP (tot)
Aggregate Data	1336	268	55	33	327	103	5	84	3
Totals (1 groups)	1336	268	55	33	327	103	5	84	3

Program Name	Number of Intakes	Past Year - Other Hallucinogens/Psychedelics (tot)	Past Year - Methamphetamine (tot)	Past Year - Other Amphetamines (tot)	Past Year - Other Stimulants (tot)	Past Year - Benzodiazepines (tot)	Past Year - Other Tranquilizers (tot)	Past Year - Barbiturates (tot)
Aggregate Data	1336	16	395	18	14	43	0	2
Totals (1 groups)	1336	16	395	18	14	43	0	2

Program Name	Number of Intakes	Past Year - Other Sedatives/Hypnotics (tot)	Past Year - Ketamine (tot)	Past Year - Ecstasy/other club drugs (tot)	Past Year - Inhalants (tot)	Past Year - Over-the-counter medications (MISUSE) (tot)	Past Year - Other Drugs (tot)	Past Year - Unknown (tot)	Past Year - None (tot)
Aggregate Data	1336	2	3	3	3	5	22	1	0
Totals (1 groups)	1336	2	3	3	3	5	22	1	0

Table 23

Drug of choice

Primary Drug of Choice

What is/was your primary drug of choice?	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	1	0.1%
Alcohol	251	18.8%
Cocaine powder	28	2.1%
Crack	26	1.9%
Marijuana/Hashish	237	17.7%
Heroin	179	13.4%
Non-prescription Methadone	1	0.1%
Pharmaceutical Opioids	83	6.2%
PCP	1	0.1%
Other Hallucinogens/Psychedelics	1	0.1%
Methamphetamine	501	37.5%
Other Amphetamines	3	0.2%
Other Stimulants	1	0.1%
Benzodiazepines	11	0.8%
Ketamine	2	0.1%
Over-the-counter medications (misuse)	2	0.1%
Other	5	0.4%
Unknown	3	0.2%
Totals (18 groups)	1336	100.0%

Secondary Drug of Choice

What is/was your secondary drug of choice?	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	79	5.9%
Alcohol	136	10.2%
Cocaine powder	55	4.1%
Crack	23	1.7%
Marijuana/Hashish	245	18.3%
Heroin	66	4.9%
Non-prescription Methadone	4	0.3%
Pharmaceutical Opioids	51	3.8%
PCP	2	0.1%
Other Hallucinogens/Psychedelics	3	0.2%
Methamphetamine	257	19.2%
Other Amphetamines	3	0.2%
Other Stimulants	7	0.5%
Benzodiazepines	17	1.3%
Barbiturates	1	0.1%
Ecstasy/other club drugs	3	0.2%
Inhalants	1	0.1%
Other	15	1.1%
Unknown	17	1.3%
None	351	26.3%
Totals (20 groups)	1336	100.0%

Other primary drug of choice	Number of Intakes
Coricidin	1
cough and cold medicine	1
K2	1
spice	1
Suboxone	2
Synthetic Marijuana	1
Totals (6 groups)	7

Other secondary drug of choice	Number of Intakes
"whatever else was available"	1
Cough Syrup	1
gambling	1
Hand Sanitizer	1
Lortab	1
nicotine	4
opiates	1
opioids	1
pain medications	1
Percocet and Adderral	1
spice	1
THC wax	1
Totals (12 groups)	15

Table 24

Treatment status at intake

Are you currently in treatment?	Number of Intakes	Number of Intakes (% of col)
Yes	1097	82.1%
No	239	17.9%
Totals (2 groups)	1336	100.0%

Is this inpatient/residential or outpatient treatment?	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	4	0.4%
Inpatient/residential	634	57.8%
Outpatient	142	12.9%
Outpatient with housing	316	28.8%
Unknown	1	0.1%
Totals (5 groups)	1097	100.0%

Table 25

Children living with mother in treatment at intake

Is this inpatient/residential or outpatient treatment?	Number of Intakes	Number of Intakes (% of col)	# of your children living with you at CD treatment facility (tot)	# of your children living with you at CD treatment facility (tot) (% of col)
Inpatient/residential	116	59.8%	155	57.0%
Outpatient	1	0.5%	1	0.4%
Outpatient with housing	77	39.7%	116	42.6%
Totals (3 groups)	194	100.0%	272	100.0%

Have you ever been in treatment before?	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	3	0.2%
Yes	1050	78.6%
No	283	21.2%
Totals (3 groups)	1336	100.0%

Table 26

Prior treatment participation

# of times in CD treatment	Number of Intakes	Number of Intakes (% of col)
1-2 prior episodes	505	49.3%
3-4 prior episodes	245	23.9%
5 or more prior episodes	275	26.8%
Totals (3 groups)	1025	100.0%

Table 27

Detox participation in the past 6 months

Detox past 6 mo	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	6	0.4%
Yes	151	11.3%
No	1118	83.7%
Unknown	61	4.6%
Totals (4 groups)	1336	100.0%

Average # of days in detox excludes clients who did not report their # of days in detox.

Program Name	# of days in detox (min)	# of days in detox (avg)	# of days in detox (max)
Aggregate Data	1.00	5.69	37.00
Totals (1 groups)	1.00	5.69	37.00

▼ **Table 28**

Participation in other recovery support activities at intake

Program Name	Number of Intakes	SH - Recovery Community Organization (RCO) (tot)	SH - Other community support group (tot)	SH - Faith-based/religious group (tot)	SH - Aftercare (tot)
Aggregate Data	1336	21	77	169	32
Totals (1 groups)	1336	21	77	169	32

Program Name	Number of Intakes	SH - Culturally specific group (tot)	SH - Alcoholics / Narcotics Anonymous (AA/NA) (tot)	SH - Al-Anon (tot)	SH - Other activity (tot)	SH - Unknown recovery support activity (tot)
Aggregate Data	1336	70	594	16	69	40
Totals (1 groups)	1336	70	594	16	69	40

Other recovery support	Number of Intakes
AHRMS worker AFFP advocates for family peace	1
ARHMS, PO, Psychiatrist	1
Celebrate Recovery	1
Ceremonies on weekends	1
CMA	2
Codependency Anonymous	1
Common Ground (Outpatient)	1
Counseling	1
CRAFT support group through Empower	1
Crystal Meth Anonymous CMA	2
Domestic Violence Classes	1
Domestic violence/sexual assault support group	1
Drug Court	1
Drug Court, read	1
Educational Skills	1
Exercise	1
Exercise, DIY around the home	1
Family/friends	6
group therapy	1
Groups in treatment	1
Hiking	1
Inpatient Treatment	1
Journal and exercise	1
MADD panel	1
Meditation, reading and writing	1
miscarriage support group	1
Mother's group, New Beginnings	1
none	1
Odyssey Program through Olmstead Co.	1
Outpatient Group	1
Outpatient Treatment	1
Painting	1
Parent Connection, Stepping Stones Therapy	1
Parenting group for incarcerated mothers	1
Project Child	1
RCCS Alumni Group, MRC	1
Reading NA books	1
reading self-help books, meditation and crocheting	1
rollerblading	1
self - client reports removing herself from drug situations and become a client with Mothers first for further support	1
Self-Education	1
Self-Reflection, meditation, relapse prevention group	1
Shelter chemical dependency support group and counselor	1
Sobriety Feast	1
Sponsor	1
suboxone program, support family/friends	1
Support from family & friends	1
Support from family and friends	2
Support from family/friends	2
support from friends and family	1
Support Group through Treatment	1
Supportive friend conversations	1
Therapist	1
Therapy and seeing a Psychologist	1
walk	1
Weekly meeting at treatment	1
Wellness Recovery Action Plan-WRAP	1
Women's moving on class	1

CHILDREN & PREGNANCIES

Table 29

Race and ethnicity of children at intake

Children's intake data excludes babies that are born after intake. This include those that were born this reporting period and counted in the 'Pregnancy Outcome' section below and those born in previous periods and not captured in this period's 'Pregnancy Outcome' section. For this reason the total number of children for the following tables may be different than those in Table 1.

Race	Number of Children	Number of Children (% of col)
<i>(empty)</i>	40	1.7%
African American/Black	329	13.9%
American Indian/Alaskan Native	498	21.0%
Asian American/Pacific Islander	35	1.5%
White	888	37.5%
Biracial/Multiracial	533	22.5%
Other	11	0.5%
Unknown	34	1.4%
Totals (8 groups)	2368	100.0%

Hispanic Origin	Number of Children	Number of Children (% of col)
<i>(empty)</i>	43	1.8%
Yes	345	14.6%
No	1931	81.5%
Unknown	49	2.1%
Totals (4 groups)	2368	100.0%

Table 30

Age of children at intake

Age Category	Number of Children	Number of Children (% of col)
Under age 2	505	21.3%
Age 2 to under 5	543	22.9%
Age 5 to under 12	881	37.2%
Age 12 to under 18	387	16.3%
Unknown	44	1.9%
~Adult	8	0.3%
Totals (6 groups)	2368	100.0%

Table 31

Gender of children at intake

Sex	Number of Children	Number of Children (% of col)
<i>(empty)</i>	21	0.9%
Male	1204	50.8%
Female	1139	48.1%
Unknown	4	0.2%
Totals (4 groups)	2368	100.0%

Table 32

Children's living situation at intake

Where/with whom is child living most at Intake?	Number of Children	Number of Children (% of col)
<i>(empty)</i>	19	0.8%
Mom	600	25.3%
Dad	432	18.2%
Both parents	68	2.9%
Other family/friend	681	28.8%
Foster care	535	22.6%
Other	23	1.0%
Unknown	10	0.4%
Totals (8 groups)	2368	100.0%

Client Relation to Child	Number of Children	Number of Children (% of col)
<i>(empty)</i>	511	21.6%
Mother (birth, adoptive, step)	1818	76.8%
Grandmother	7	0.3%
Other relative caregiver (e.g aunt)	22	0.9%
Non-relative caregiver	10	0.4%
Totals (5 groups)	2368	100.0%

Table 33

Pregnancy status at intake

Are you currently pregnant?	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	2	0.1%
Yes	305	22.8%
No	1021	76.4%
Unknown	8	0.6%
Totals (4 groups)	1336	100.0%

First pregnancy	Number of Intakes	Number of Intakes (% of col)
Yes	70	23.0%
No	235	77.0%
Totals (2 groups)	305	100.0%

How far along is your pregnancy?	Number of Intakes	Number of Intakes (% of col)
<i>(empty)</i>	2	0.7%
1-3 months	49	16.1%
4-6 months	116	38.0%
7-9 months	134	43.9%
Unknown	4	1.3%
Totals (5 groups)	305	100.0%

Table 34

Pregnancy Outcomes

Women Served this Period	1,336	
	Number	%
# of Live birth, child living	133	95.0%
# of Live birth, child died	1	0.7%
# of Fetal Deaths	3	2.1%
# of Abortions	3	2.1%

Table 35

Race and ethnicity of babies born

Baby - Hispanic Origin	Number of Pregnancies	Number of Pregnancies (% of col)
Yes	17	12.8%
No	111	83.5%
Unknown	5	3.8%
Totals (3 groups)	133	100.0%

Baby's race	Number of Pregnancies	Number of Pregnancies (% of col)
<u>African American/Black</u>	31	23.3%
<u>American Indian/Alaskan Native</u>	15	11.3%
<u>Asian American/Pacific Islander</u>	4	3.0%
<u>White</u>	48	36.1%
<u>Biracial/Multiracial</u>	32	24.1%
<u>Other</u>	1	0.8%
<u>Unknown</u>	2	1.5%
Totals (7 groups)	133	100.0%

Baby's Other Race	Number of Pregnancies
<u>Mexican</u>	1
Totals (1 groups)	1

Table 36

Health of babies at delivery

The first 5 tables are only for "live births, child living" outcomes. Mother and Baby Toxicology is for all live births and fetal death outcomes.

Birth weight	Number of Pregnancies	Number of Pregnancies (% of col)
<u>Low birth weight (less than 5lb, 8oz)</u>	12	9.0%
<u>Normal birth weight</u>	116	87.2%
<u>Unknown</u>	5	3.8%
Totals (3 groups)	133	100.0%

Baby was born full-term	Number of Pregnancies	Number of Pregnancies (% of col)
<u>Yes</u>	119	89.5%
<u>No</u>	13	9.8%
<u>Unknown</u>	1	0.8%
Totals (3 groups)	133	100.0%

For Pre-mature Babies only.

Length of pregnancy	Number of Pregnancies	Number of Pregnancies (% of col)
<u>32-36 weeks</u>	13	100.0%
Totals (1 groups)	13	100.0%

Baby spent time in intensive care (NICU)	Number of Pregnancies	Number of Pregnancies (% of col)
<u>Yes</u>	22	16.5%
<u>No</u>	106	79.7%
<u>Unknown</u>	5	3.8%
Totals (3 groups)	133	100.0%

For Babies who spent time in intensive care.

Program Name	# of days in NICU to date (min)	# of days in NICU to date (max)	# of days in NICU to date (avg)
<u>Aggregate Data</u>	1	60	13.947368421053
Totals (1 groups)	1	60	13.947368421053

Prenatal care

Client received prenatal care	Number of Pregnancies	PC - First Trimester (tot)	PC - Second Trimester (tot)	PC - Third Trimester (tot)	PC - All Trimesters (tot)	PC - Any Trimester (tot)
<i>(empty)</i>	1	0	0	0	0	0
Yes	131	85	108	116	75	130
No	1	0	0	0	0	0
Unknown	1	0	0	0	0	0
Totals (4 groups)	134	85	108	116	75	130

Reason for no pre-natal care	Number of Pregnancies	Number of Pregnancies (% of col)
Neglected OB Care	1	100.0%
Totals (1 groups)	1	100.0%

Table 37

Placement at birth

Baby placed outside of home following birth	Number of Pregnancies	Number of Pregnancies (% of col)
<i>(empty)</i>	1	0.8%
Yes	17	12.8%
No	113	85.0%
Unknown	2	1.5%
Totals (4 groups)	133	100.0%

Table 38

Mother's Toxicology

Mother's toxicology results	Number of Pregnancies	Number of Pregnancies (% of col)
Positive toxicology	25	18.2%
Negative toxicology	78	56.9%
Not tested	14	10.2%
Unknown	20	14.6%
Totals (4 groups)	137	100.0%

Toxicology test conducted for those reporting a 'Positive' or 'Negative' result above.

Program Name	Number of Pregnancies	Test - Blood Mother (tot)	Test - Urine Mother (tot)	Test - Unknown Mother (tot)
Aggregate Data	101	22	72	14
Totals (1 groups)	101	22	72	14

Substances clients tested positive for

Program Name	Number of Pregnancies	Alcohol-Mother (tot)	Cocaine Powder-Mother (tot)	Crack-Mother (tot)	Marijuana/Hashish-Mother (tot)	Heroin-Mother (tot)	Non-prescription Methadone-Mother (tot)	Pharmaceutical Opioids-Mother (tot)	PCP-Mother (tot)
Aggregate Data	25	0	1	0	11	2	0	1	0
Totals (1 groups)	25	0	1	0	11	2	0	1	0

Program Name	Number of Pregnancies	Hallucinogens/Psychedelics-Mother (tot)	Other Methamphetamine-Mother (tot)	Other Amphetamines-Mother (tot)	Other Stimulants-Mother (tot)	Benzodiazepines-Mother (tot)	Other Tranquilizers-Mother (tot)	Barbiturates-Mother (tot)
Aggregate Data	25	0	3	1	0	0	0	0
Totals (1 groups)	25	0	3	1	0	0	0	0

Program Name	Number of Pregnancies	Other Sedatives/Hypnotics-Mother (tot)	Ketamine-Mother (tot)	Ecstasy/other club drugs-Mother (tot)	Inhalants-Mother (tot)	Over-the-Counter Medications (misuse)-Mother (tot)	Medications used as directed-Mother (tot)	Other substance-Mother (tot)	Unknown Drugs-Mother (tot)
Aggregate Data	25	0	0	0	0	0	8	0	0
Totals (1 groups)	25	0	0	0	0	0	8	0	0

Table 39

Baby's Toxicology

Baby's toxicology results	Number of Pregnancies	Number of Pregnancies (% of col)
Positive toxicology	31	22.6%
Negative toxicology	86	62.8%
Not tested	4	2.9%
Unknown	16	11.7%
Totals (4 groups)	137	100.0%

Toxicology test conducted for those reporting a 'Positive' or 'Negative' result above.

Program Name	Number of Pregnancies	Test - Blood Baby (tot)	Test - Meconium Baby (tot)	Test - Urine Baby (tot)	Test - Unknown Baby (tot)
Aggregate Data	116	33	63	15	14
Totals (1 groups)	116	33	63	15	14

Substances babies tested positive for

Program Name	Number of Pregnancies	Alcohol-Baby (tot)	Cocaine Powder-Baby (tot)	Crack-Baby (tot)	Marijuana/Hashish-Baby (tot)	Heroin-Baby (tot)	Non-prescription Methadone-Baby (tot)	Pharmaceutical Opioids-Baby (tot)	PCP-Baby (tot)
Aggregate Data	31	0	1	1	15	2	0	1	0
Totals (1 groups)	31	0	1	1	15	2	0	1	0

Program Name	Number of Pregnancies	Other Hallucinogens/Psychedelics-Baby (tot)	Methamphetamine-Baby (tot)	Other Amphetamines-Baby (tot)	Other Stimulants-Baby (tot)	Benzodiazepines-Baby (tot)	Other Tranquilizers-Baby (tot)	Barbiturates-Baby (tot)
Aggregate Data	31	1	3	1	0	0	0	0
Totals (1 groups)	31	1	3	1	0	0	0	0

Program Name	Number of Pregnancies	Other Sedatives/Hypnotics-Baby (tot)	Ketamine-Baby (tot)	Ecstasy/other club drugs-Baby (tot)	Inhalants-Baby (tot)	Over-the-Counter Medications (misuse)-Baby (tot)	Medications used as directed-Baby (tot)	Other substance-Baby (tot)	Unknown drugs-Baby (tot)
Aggregate Data	31	0	0	0	0	0	9	0	1
Totals (1 groups)	31	0	0	0	0	0	9	0	1

Table 40

Reason For No Toxicology Test

Reasons mothers not tested	Reason mother not tested
	Baby was negative, mother not tested
	Client had been sober since 8-25-17
	Client has 5 months of sobriety
	Client neglected OB Care
	Clt did not recall being tested, only baby
	Declined toxicology test
	Died of natural causes
	Dr. did not test mom, only babies. no explanation
	Dr. did not test mom, only babies. no explanation
	No suspected use
	Sober since 7-25-2017

	Reason mother not tested
	Sober since June 2017
	Sober since November 2017
	Sober since October 2017
Reasons infants not tested	Reason baby not tested
	Client neglected OB Care
	Died of natural causes
	MD does not usually test unless there is a suspected use

Aggregate Data

Evaluation Tables: Part Two

Program Name Aggregate Data

Throughout this report, (empty) indicates data are missing.

CLIENTS CLOSED THIS YEAR

Table 50

Length of participation in program

Length of participation in program is based on the difference between the intake and the last date of service.

All clients served

Program Name	Number of Closings	Months Enrolled in Program (min)	Months Enrolled in Program (max)	Months Enrolled in Program (avg)
Aggregate Data	905	0.0	62.8	4.7
Totals (1 groups)	905	0.0	62.8	4.7

Table 51

Closing status

Was the client doing well when she exited the program?	Number of Closings	Number of Closings (% of col)
Yes, client was doing well at exit	586	64.8%
No, client was not doing well at exit	315	34.8%
Too little contact with client to determine	4	0.4%
Totals (3 groups)	905	100.0%

Program Name	Total N (tot)	NDW-Actively using substances (tot)	NDW-Not engaged in fulfilling case plan goal (tot)	NDW-Not compliant with program requirements (tot)	NDW-In crisis/traumatic life event (tot)	NDW-Disappeared/could not be reached (tot)	NDW-Other (tot)
Aggregate Data	319	99	164	196	44	76	38
Totals (1 groups)	319	99	164	196	44	76	38

NDW-Other (please describe)	Number of Closings
admitted to mental health facility	1
Brandi said she was too busy to participate and withdrew from services on 6/1/17	1
Client discharged against staff advice	1
Client discharged herself against staff advice	1
client entered inpatient tx.	1
Client left against staff advice	12
Client left against staff advice following a relapse	1
Client was asked to leave at staff request	4
Client was in jail.	1
CPS working toward TPR. Moved out of county.	1
Deceased	1
Deceased 10/25/2017	1
Discharged against staff advice	1
Discharged at Staff Request due to physical altercation	1
Discharged due to patient conduct	1
discharged for behavioral reasons--(tampering with a UA)	1
Incarcerated	1
jail for parole violation	1
lying and being sneaky	1
Patient Conduct (behavioral)	1
Physical Altercation with Peer	1
Physical Altercation with Peer, Discharged At Staff Request	1
Relapsed and was committed into treatment during her pregnancy	1
Transferred to another program	1
Totals (24 groups)	38

Table 53

Receiving additional recovery case management services at closing

Transferred to another agency	Number of Closings	Number of Closings (% of col)
(empty)	1	0.1%
Yes, by another agency funded by the Women's Recovery Services grant	60	6.6%
Yes, by another program that provides recovery-related case management services not funded by the grant	389	43.0%
No, not receiving recovery-related case management services after closing	364	40.2%
Unknown	91	10.1%
Totals (5 groups)	905	100.0%

Table 54

School status and education outcomes at closing

Were you in school or a career training program?	Number of Closings	Number of Closings (% of col)
Yes	37	4.1%
No	844	93.3%
Unknown	24	2.7%
Totals (3 groups)	905	100.0%

Program Name	Number of Closings	S/E - Received GED/ High School diploma (tot)	S/E - Completed education beyond High School (tot)	S/E - Completed vocational/job training (tot)	S/E - Obtained vocational license/certificate (tot)	S/E - No education achievements (tot)	S/E - Unknown (tot)
Aggregate Data	905	7	6	23	3	853	22
Totals (1 groups)	905	7	6	23	3	853	22

Table 55

Employment status at closing

Employment	Number of Closings	Number of Closings (% of col)
Employed full-time or part-time	147	16.2%
Unable to work/disabled	29	3.2%
Unemployed - looking for work	185	20.4%
Unemployed - not looking for work, including clients in school and not working	493	54.5%
Other	2	0.2%
Unknown	49	5.4%
Totals (6 groups)	905	100.0%

Other Employment	Number of Closings
Retired	1
volunteering 40 hours per week	1
Totals (2 groups)	2

Table 56

Living arrangements at closing

Living Arrangement at Closing	Number of Closings	Number of Closings (% of col)
In own house or apartment	244	27.0%
In relative or friend's home	292	32.3%
Transitional housing and/or GRH	64	7.1%
Permanent supportive housing	20	2.2%
Sober house/halfway house	50	5.5%
A shelter or motel (using a voucher)	47	5.2%
A place not intended for housing like outside, car, vacant building, etc.	8	0.9%
Inpatient treatment facility	35	3.9%
Correctional facility	20	2.2%
Other	6	0.7%
Unknown	119	13.1%
Totals (11 groups)	905	100.0%

Specify Other living location	Number of Closings
hospital	2
hospital until she gives birth	1
Medical Detox Center	1
mental health facility	1
Outpatient with housing	1
Totals (5 groups)	6

Are these living arrangements supportive to the client's recovery?	Number of Closings	Number of Closings (% of col)
Yes	618	68.3%
No	103	11.4%
Unknown	184	20.3%
Totals (3 groups)	905	100.0%

Would you consider these living arrangements stable?	Number of Closings	Number of Closings (% of col)
Yes	559	61.8%
No	192	21.2%
Unknown	154	17.0%
Totals (3 groups)	905	100.0%

How long has client been living in this location?	Number of Closings	Number of Closings (% of col)
Less than 6 months	589	65.1%
6 months to less than 1 year	85	9.4%
1 year or more	64	7.1%
Unknown	167	18.5%
Totals (4 groups)	905	100.0%

Average # of days in current location excludes clients who did not report their # of days in current location.

Program Name	Number of Clients (tot)	# of days in current location (min)	# of days in current location (max)	# of days in current location (avg)
Aggregate Data	518	1	999	23
Totals (1 groups)	518	1	999	23

Did your program directly provide housing for the client while she was in your program?

Program Provided Housing	# of Intakes (tot)	# of Intakes (tot) (% of col)
(empty)	2	0.5%
Yes	279	67.9%
No	129	31.4%
Unknown	1	0.2%
Totals (4 groups)	411	100.0%

Did your client go through a Coordinated Assessment for housing while in the program? Do not include in 2018 reporting.

Coordinated Assessment	# of Intakes (tot)	# of Intakes (tot) (% of col)
(empty)	602	66.5%
Yes	82	9.1%
No	213	23.5%
Unknown	8	0.9%
Totals (4 groups)	905	100.0%

When the client exits your program will she be on a waiting list for Section 8 or other subsidized housing? Do not include in 2018 reporting.

Subsidized Housing	# of Intakes (tot)	# of Intakes (tot) (% of col)
(empty)	603	66.6%
Yes	58	6.4%
No	231	25.5%
Unknown	13	1.4%
Totals (4 groups)	905	100.0%

Table 57

Mental health diagnoses at closing

This includes clients with an unknown diagnosis at intake and an identified diagnosis at closing.

of Clients with New Mental Health Diagnoses at Closing

197

of Clients with No New Mental Health Diagnoses at Closing

708

At Closing

Program Name	Number of Closings	MHD - Depressive Disorder (tot)	MHD - Bi-Polar/Manic Depression (tot)	MHD - Anxiety Disorder, including PTSD (tot)	MHD - ADHD/ADD /Disruptive Behavior Disorder (tot)
Aggregate Data	905	567	142	661	154
Totals (1 groups)	905	567	142	661	154

Program Name	Number of Closings	MHD - Personality Disorder (tot)	MHD - Schizophrenia/ other psychotic disorder (tot)	MHD - Other mental health diagnosis (tot)	MHD - Unknown mental health diagnosis (tot)
Aggregate Data	905	66	14	25	40
Totals (1 groups)	905	66	14	25	40

At intake or at closing

Program Name	# of Intakes or Closings (tot)	Depressive Disorder* (tot)	Bipolar disorder/ Manic depression* (tot)	Anxiety Disorder* (tot)	Attention-deficit and Disruptive Behavior Disorder* (tot)
Aggregate Data	905	645	171	704	196
Totals (1 groups)	905	645	171	704	196

Program Name	# of Intakes or Closings (tot)	Personality Disorder* (tot)	Schizophrenia/ other psychotic disorder* (tot)	Other mental health diagnosis* (tot)	Unknown mental health diagnosis* (tot)
Aggregate Data	905	90	17	40	43
Totals (1 groups)	905	90	17	40	43

Other diagnoses at closing

Specify Other mental health diagnoses	Number of Closings
Adjustment disorder	10
Adjustment disorder with anxiety	1
Adjustment Disorder with Depressed Mood	4
Adjustment disorder with mixed anxiety and depressed mood	1
Adjustment Disorder with mixed anxiety and depression	1
adjustment disorder, NOS	1
Cocaine, Amphetamine and cannabis disorder	1
Eating Disorder	2
FAE	1
Meth induced Psychosis	1
Trichotillomania	1
Totals (11 groups)	24

Table 58

Mental health services at closing

Is client currently receiving mental health services?	Number of Closings	Number of Closings (% of col)
<i>(empty)</i>	4	0.4%
Yes, client is currently receiving mental health services	390	43.1%
No, but client is connected to a specific clinic/therapist that she can contact if services are needed	169	18.7%
No, client needs mental health services but is not connected to specific clinic/therapist	128	14.1%
Not applicable, client does not need mental health services	61	6.7%
Unknown	153	16.9%
Totals (6 groups)	905	100.0%

Table 59

Other Client Diagnoses at closing

Confirmed FASD Diagnosis	Number of Closings	Number of Closings (% of col)
<i>(empty)</i>	2	0.2%
Yes	9	1.0%
No, but it is suspected the client has FASD	43	4.8%
No, client has never received a FASD diagnosis	763	84.3%
Unknown	88	9.7%
Totals (5 groups)	905	100.0%

Diagnosed with a TBI?	Number of Closings	Number of Closings (% of col)
<i>(empty)</i>	1	0.1%
Yes, the client was diagnosed before entering the program	42	4.6%
Yes, the client was diagnosed while enrolled in the program	3	0.3%
No, client has never received a TBI diagnosis	765	84.5%
Unknown	94	10.4%
Totals (5 groups)	905	100.0%

Diagnosed with PTSD?	Number of Closings	Number of Closings (% of col)
<i>(empty)</i>	2	0.2%
Yes, the client was diagnosed before entering the program	385	42.5%
Yes, the client was diagnosed while enrolled in the program	108	11.9%
No, client has never received a PTSD diagnosis	357	39.4%
Unknown	53	5.9%
Totals (5 groups)	905	100.0%

Table 60

Change in intimate partner violence at closing

Client in an abusive relationship at intake	Number of Closings	Number of Closings (% of col)
<i>(empty)</i>	2	0.2%
Yes	152	16.8%
No	562	62.1%
Unknown	189	20.9%
Totals (4 groups)	905	100.0%

Abusive relationship change	# of Intakes (tot)	# of Intakes (tot) (% of col)
Improved	122	80.3%
Stayed the same	19	12.5%
Gotten worse	1	0.7%
Unknown	10	6.6%
Totals (4 groups)	152	100.0%

Table 61

Medical insurance at closing

Does client have medical or insurance coverage at case closing?	Number of Closings	Number of Closings (% of col)
Yes, public insurance (MA, PMAF, MNCare)	836	92.4%
Yes, private insurance	11	1.2%
No	15	1.7%
Unknown	43	4.8%
Totals (4 groups)	905	100.0%

Table 62

Primary physician or clinic at closing

Does client have a primary care physician or clinic at case closing?	Number of Closings	Number of Closings (% of col)
Yes, physician	6	0.7%
Yes, clinic	153	16.9%
Yes, both physician and clinic	510	56.4%
No, neither	151	16.7%
Unknown	85	9.4%
Totals (5 groups)	905	100.0%

Table 63

Child protection involvement at closing

Currently involved with Child Protection?	Number of Closings	Number of Closings (% of col)
<i>(empty)</i>	4	0.4%
Yes	462	51.0%
No	429	47.4%
Unknown	10	1.1%
Totals (4 groups)	905	100.0%

Table 64

Criminal justice system involvement and arrests at closing

Currently involved with the criminal justice system?	Number of Closings	Number of Closings (% of col)
<i>(empty)</i>	4	0.4%
Yes	458	50.6%
No	412	45.5%
Unknown	31	3.4%
Totals (4 groups)	905	100.0%

Has client been arrested in the past 30 days ?	Number of Closings	Number of Closings (% of col)
<i>(empty)</i>	4	0.4%
Yes	34	3.8%
No	802	88.6%
Unknown	65	7.2%
Totals (4 groups)	905	100.0%

Substance abuse and treatment status at closing

Table 65

Chemical use at closing

Used any substances in past 30 days	Number of Closings	Number of Closings (% of col)
Yes	188	20.8%
No	620	68.5%
Unknown	97	10.7%
Totals (3 groups)	905	100.0%

Reason for Unknown Drug Use	Number of Closings	Number of Closings (% of col)
AWOL	1	1.0%
Client became unreachable	5	5.2%
Client became unreachable following a relapse	1	1.0%
Client continued to have positive UA's due to the way THC leaves the system	1	1.0%
client denied using but provided diluted UA results. Her Behavior was suggestive of recent chemical use but could not be confirmed by UA.	1	1.0%
client did not complete UA on last date of service 11/21/17	1	1.0%
Client did not disclose about her use or if she's using.	1	1.0%
Client discharged against staff advice	2	2.1%
Client discharged due to conduct	1	1.0%
client discontinued services without notifying	1	1.0%
Client disengaged with program	1	1.0%
Client had admitted relapse 5/15/2017 on alcohol and misuse of ADD meds, refused to take UA after relapse to verify sobriety	1	1.0%
Client had not attended treatment since 2/16/18. Suspicion of use, but unknown due to not having a UA after 2/15/18.	1	1.0%
Client has become unreachable.	1	1.0%
Client has graduated, no longer recorded	1	1.0%
Client has never used substances	1	1.0%
Client has not been engaged with program for a month	1	1.0%
Client has not been in contact with program for over a month at closing	1	1.0%
client has not been in programming	2	2.1%
Client has not communicated with MF regarding substance use since January, 2018. At that time she reported continued sobriety.	1	1.0%
Client is unreachable	1	1.0%
Client left program/no contact with client in past several months	2	2.1%
Client left program/no contact with client in past several weeks	1	1.0%
client left the program and could not be reached.	1	1.0%
Client left treatment without telling anyone	1	1.0%
Client refused to make herself available for drug and alcohol testing	1	1.0%
client stopped coming to programming--unable to get UA results	1	1.0%
Client was asked to leave at staff request	5	5.2%
Client was unreachable	1	1.0%
Client went AWOL after dirty UA	1	1.0%
Client went AWOL. Use is unknown at this time.	1	1.0%
denies positive UA	1	1.0%
Difficulty connecting with client	1	1.0%
discharged from program	1	1.0%
has not met with this writer	1	1.0%
have not had contact with client	1	1.0%
Held in jail for awhile before sentencing.	1	1.0%
I have not seen her for over 30 days	1	1.0%
left programming unable to know due to no contact	1	1.0%
Lost contact	2	2.1%
moved, limited contact	1	1.0%
NA	1	1.0%
No contact	2	2.1%
Only attended group once	1	1.0%
Our agency does not administer or require UAs	1	1.0%
Poor contact from client, last visit in September	1	1.0%
Positive UA in September, 2 negative since then. Denies use.	1	1.0%
Possibly using in treatment and tampering with UA's	1	1.0%
Produced a dirty UA prior to discharge	1	1.0%
Produced dirty UA prior to discharge	1	1.0%
recent chemical use was suspected, client denied and program staff was unable to obtain a UA	1	1.0%
Refused UA's	1	1.0%
Reports of client using by peers, client refused UDS	1	1.0%
Resident refused all services and assistance for the 60 days leading to her departure.	1	1.0%
Resident refused UA submission	1	1.0%
Resident move out started as a trip out of state that was extended; client kept extending the trip and never returned.	1	1.0%
she is not being tested and has not always been truthful about her use	1	1.0%
she left treatment and do not know if she was using	1	1.0%
She went to a different city and had no contact with case management before being exited from program	1	1.0%
The client is not reachable	1	1.0%
There has been no contact with the client for several months	1	1.0%
Tina was in jail and had a brief set of time to move out and go to treatment. Staff was not able to meet with her. Suspects she has not used due to being in jail, but cannot confirm during time before treatment, last date of admitted drug abuse was 5/9/2017	1	1.0%
UAs had been coming back as adulterated.	1	1.0%
Unable to connect with client	1	1.0%
Unable to contact client in last 30 days to determine use.	2	2.1%
Unable to locate client	8	8.2%

Program Name	Number of Closings	Substance - Alcohol (tot)	Substance - Cocaine powder (tot)	Substance - Crack (tot)	Substance - Marijuana/ Hashish (tot)	Substance - Heroin (tot)	Substance - Non-prescription Methadone (tot)	Substance - Pharmaceutical Opioids (tot)	Substance - PCP (tot)
Aggregate Data	905	55	19	11	47	16	1	18	1
Totals (1 groups)	905	55	19	11	47	16	1	18	1

Program Name	Number of Closings	Substance - Other Hallucinogens/ Psychedelics (tot)	Substance - Methamphetamine (tot)	Substance - Other Amphetamines (tot)	Substance - Other Stimulants (tot)	Substance - Benzodiazepines (tot)	Substance - Other Tranquilizers (tot)	Substance - Barbiturates (tot)
Aggregate Data	905	0	70	13	2	14	0	0
Totals (1 groups)	905	0	70	13	2	14	0	0

Program Name	Number of Closings	Substance - Other Sedatives/ Hypnotics (tot)	Substance - Ketamine (tot)	Substance - Ecstasy/ other club drugs (tot)	Substance - Inhalants (tot)	Substance - Over-the-Counter Medication (misuse) (tot)	Substance - Other Drugs (tot)	Substance - Unknown Drugs (tot)
Aggregate Data	905	4	2	5	0	4	15	3
Totals (1 groups)	905	4	2	5	0	4	15	3

Other drugs (please specify)	Number of Closings
antidepressants-Wellbutrin	1
buprenorphine 2	1
buprenorphine 2 (not prescribed)	1
DXM	1
Hand Sanitizer	1
k-2spice	1
k2	4
kratom	2
Misuse of prescription Methadone [boosting with other rx drugs]	1
pain meds-opiates	1
Suboxone	1
Totals (11 groups)	15

Duration of sobriety at closing

Only includes those with at least 30 days of sobriety.

Program Name	Number of Clients (tot)	Total Days Sober (min)	Total Days Sober (max)	Total Days Sober (avg)
Aggregate Data	579	31	2072	172
Totals (1 groups)	579	31	2072	172

Table 66

Change in alcohol and drug use from entry to closing

Change in alcohol/drug use at closing vs. intake?	Number of Closings	Number of Closings (% of col)
Increased use: using drugs/alcohol more	35	3.9%
No change in use: using drugs/alcohol at the same level	22	2.4%
No change in use: not using drugs/alcohol at either entry or case closing	193	21.3%
Decreased use: still using drugs/alcohol but using less	113	12.5%
Decreased use: not using drugs/alcohol at all	445	49.2%
Drug/alcohol use unknown	97	10.7%
Totals (6 groups)	905	100.0%

Reason for Unknown Drug Use Change	Number of Closings	Number of Closings (% of col)
AWOL	2	2.1%
Client became unreachable	6	6.3%
Client became unreachable following a relapse	1	1.0%
Client did not disclose about her use or if she's using.	1	1.0%
client discharged	1	1.0%
Client discharged against staff advice	1	1.0%
Client discharged due to conduct	1	1.0%
Client had admitted relapse 5/15/2017 on alcohol and ADD meds, refused to take UA after relapse to verify sobriety, case manager's best guess is: Decreased use but still using	1	1.0%
Client had not attended treatment since 2/16/18. Suspicion of use, but unknown due to not having a UA after 2/15/18.	1	1.0%
Client has become unreachable.	1	1.0%
Client has not been engaged with program for a month	1	1.0%
Client has not been in contact with program for over a month at closing	1	1.0%
Client has refused to make herself available to drug and alcohol testing	1	1.0%
client left	1	1.0%
Client left against staff advice	8	8.3%
Client left against staff advice following a relapse	1	1.0%
Client left program/no contact with client in past several months	2	2.1%
Client left program/no contact with client in past several weeks	1	1.0%
Client left treatment due to dirty UA	1	1.0%
Client left treatment without telling anyone	1	1.0%
Client only completed one meeting with SW all other interactions were over the phone. She did not report alcohol use, but SW did not inquire either.	1	1.0%
client passed away	1	1.0%
Client produced dirty UA	1	1.0%
Client was asked to leave at staff request	5	5.2%
Client was AWOL	1	1.0%
client was suspected of using in the program, but provided dilute UA results.	1	1.0%
Client was unreachable	1	1.0%
Client went AWOL after dirty UA	1	1.0%
Client went AWOL. Use is unknown at this time.	1	1.0%
CT wasn't connected to services upon discharges	1	1.0%
Difficulty connecting with client	1	1.0%
Disappeared/left program	1	1.0%
has not been in housing	1	1.0%
haven't been able to locate client for the last 2 months	1	1.0%
Left program	2	2.1%
left treatment	1	1.0%
Lost contact	2	2.1%
moved. Limited contact	1	1.0%
no contact	1	1.0%
not being tested because her CPS case closed and not always truthful about her use	1	1.0%
poor contact from client	1	1.0%
Possibly using in treatment and tampering with UA's	1	1.0%
Produced a dirty UA prior to discharge	1	1.0%
Produced dirty UA prior to discharge	1	1.0%
Reports of client using by peers, client refused UDS	1	1.0%
Resident refused all services and assistance for the 60 days leading to her departure.	1	1.0%
saa	4	4.2%
same as above	2	2.1%
She went to a different city and had no contact with case management before being exited from program	1	1.0%
Staff not sure what Tina's drug use was upon exit.	1	1.0%
stopped attending programming	1	1.0%
There has been no contact with the client for several months	1	1.0%
UAs had been coming back as adulterated.	1	1.0%
Unable to connect with client	1	1.0%
Unable to contact client in last 30 days to determine use.	1	1.0%
Unable to locate or contact client	1	1.0%
Unable to locate client	5	5.2%
Unable to locate client	2	2.1%
unable to locate client to assess	1	1.0%
Unable to locate client to confirm current substance use	1	1.0%
Unable to locate client to confirm current use	1	1.0%
Unable to reach client in the past 30 days.	2	2.1%
Unable to reach client.	1	1.0%
unsure if use is less or the same as before entering treatment	1	1.0%
Unwilling to submit UA	1	1.0%
went awol	1	1.0%
Totals (66 groups)	96	100.0%

Table 67

Tobacco use at closing

In the past 30 days, has the client used tobacco, e-cigarettes, or vaporizers?	Number of Closings	Number of Closings (% of col)
<i>(empty)</i>	1	0.1%
Yes	750	82.9%
No	99	10.9%
Unknown	55	6.1%
Totals (4 groups)	905	100.0%

Table 68

Change in tobacco use from entry to closing

Change in tobacco use at closing vs intake?	Number of Closings	Number of Closings (% of col)
Increased use: using tobacco more	42	4.6%
No change in use: using tobacco at the same level	528	58.3%
No change in use: not using tobacco at either entry or case closing	96	10.6%
Decreased use: still using tobacco but using less	96	10.6%
Decreased use: not using tobacco at all	22	2.4%
Tobacco use unknown	121	13.4%
Totals (6 groups)	905	100.0%

Table 69

Treatment participation at closing

Was this client in treatment at any time during the program?	# of Intakes (tot)	# of Intakes (tot) (% of col)
Yes	821	90.7%
No	81	9.0%
Unknown	3	0.3%
Totals (3 groups)	905	100.0%

Program Name	Number of Clients (tot)	# of Treatment Episodes (min)	# of Treatment Episodes (max)	# of Treatment Episodes (avg)
Aggregate Data	771	1.0	51.0	1.3
Totals (1 groups)	771	1.0	51.0	1.3

# of Treatment Episodes	Number of Closings	Number of Closings (% of col)
1.0	663	86.0%
2.0	100	13.0%
4.0	1	0.1%
5.0	1	0.1%
6.0	1	0.1%
7.0	1	0.1%
11.0	2	0.3%
15.0	1	0.1%
51.0	1	0.1%
Totals (9 groups)	771	100.0%

Table 70

Type(s) of treatment while in program

Setting of treatment episodes	Number of Closings	Number of Closings (% of col)
<i>(empty)</i>	4	0.5%
Inpatient/residential	459	55.7%
Inpatient/residential Outpatient	18	2.2%
Inpatient/residential Outpatient Outpatient with housing	2	0.2%
Inpatient/residential Outpatient with housing	77	9.3%
Outpatient	79	9.6%
Outpatient Outpatient with housing	1	0.1%
Outpatient with housing	183	22.2%
Unknown	1	0.1%
Totals (9 groups)	824	100.0%

Program Name	TX - Inpatient/residential (tot)	TX - Outpatient (tot)	TX - Outpatient with housing (tot)	TX - Unknown (tot)
Aggregate Data	556	100	263	1
Totals (1 groups)	556	100	263	1

Table 71

Children Living with mother during treatment

Program Name	Number of Clients (tot)	TX - Inpatient/residential w/children (tot)	# of children in inpatient/residential (tot)	TX - Outpatient with housing w/children (tot)	# of children in Outpatient with housing (tot)
Aggregate Data	905	218	306	99	155
Totals (1 groups)	905	218	306	99	155

Table 72

Outcome of most recent treatment type

Most Recent Treatment Outcome at Closing	Number of Closings	Number of Closings (% of col)
<i>(empty)</i>	28	3.4%
Successfully completed Rule 31 treatment	458	55.6%
Noncompliant/Left without staff approval	210	25.5%
Still in treatment	42	5.1%
Other	78	9.5%
Unknown	8	1.0%
Totals (6 groups)	824	100.0%

Table 73

Medication-assisted chemical health treatment (MAT) while in program

Received medication-assisted treatment (MAT)	Number of Closings	Number of Closings (% of col)
Yes	141	15.6%
No	747	82.5%
Unknown	17	1.9%
Totals (3 groups)	905	100.0%

Type of MAT	Number of Closings
Methodone	88
Methodone Suboxone	2
Naltrexone	3
Suboxone	35
Subutex	6
Vivitrol	7
Totals (6 groups)	141

Program Name	Number of Closings	MAT - Clonidine (tot)	MAT - Methadone (tot)	MAT - Naltrexone (tot)	MAT - Suboxone (tot)	MAT - Subutex (tot)	MAT - Vivitrol (tot)	MAT - Other (tot)
Aggregate Data	141	0	90	3	37	6	7	0
Totals (1 groups)	141	0	90	3	37	6	7	0

Table 74

Detox while in program

Was the client in Detox at any time during the program?	Number of Closings	Number of Closings (% of col)
<i>(empty)</i>	1	0.1%
Yes	25	2.8%
No	858	94.8%
Unknown	21	2.3%
Totals (4 groups)	905	100.0%

Table 75

Areas where clients received support

Program Name	PP - Housing (tot)	PP - Employment (tot)	PP - Education/job training (tot)	PP - Physical/dental health (tot)	PP - Mental health/counseling (tot)	PP - Parenting (tot)	PP - Childcare (tot)	PP - Tobacco cessation (tot)	PP - Transportation (tot)
Aggregate Data	574	171	106	665	804	761	297	348	667
Totals (1 groups)	574	171	106	665	804	761	297	348	667

Program Name	PP - Public benefits (tot)	PP - Financial issues (tot)	PP - Legal issues (tot)	PP - Relationship issues (tot)	PP - Prenatal/postnatal care (tot)	PP - Wellness/recreation (tot)	PP - Other (tot)	PP - NONE OF THESE (tot)
Aggregate Data	586	317	395	626	193	595	22	6
Totals (1 groups)	586	317	395	626	193	595	22	6

Other Program Participation	Number of Closings
Assist with finding baby items	1
Attend programming/classes	1
Baby items	2
Baby resources	2
chemical dependency treatment	1
Chemical Health Assessment	1
child protection court	1
Child Protection Court Process	1
Community Resources-Baby items	1
Find AA/NA meetings in her area	1
Food resources	1
food support	1
Help with Child Protection Process	1
Identification Documents	1
obtain drivers permit	1
Peer Recovery Assistance	1
R25 Assessment	1
resources	1
Taxes and Identification Documents	1
Treatment support/options	1
Totals (20 groups)	22

Areas clients needed help with most

Program Name	3MH - Housing (tot)	3MH - Employment (tot)	3MH - Education/job training (tot)	3MH - Physical/dental health (tot)	3MH - Mental health/counseling (tot)	3MH - Parenting (tot)	3MH - Childcare (tot)	3MH - Tobacco cessation (tot)	3MH - Transportation (tot)
Aggregate Data	381	48	25	174	630	505	106	16	116
Totals (1 groups)	381	48	25	174	630	505	106	16	116

Program Name	3MH - Public benefits (tot)	3MH - Financial issues (tot)	3MH - Legal issues (tot)	3MH - Relationship issues (tot)	3MH - Prenatal/postnatal care (tot)	3MH - Wellness/recreation (tot)	3MH - Other (tot)	3MH - NONE OF THESE (tot)
Aggregate Data	95	29	102	267	97	41	23	1
Totals (1 groups)	95	29	102	267	97	41	23	1

Screenings and Assessments

Program Name	S-A - Rule 25 chemical health assessment (tot)	S-A - Mental health screening (tot)	S-A - Mental health assessment (tot)	S-A - Physical health assessment (tot)	S-A - Prenatal assessment (tot)	S-A - FASD screening (i.e. informal questions) (tot)	S-A - FASD assessment (i.e. formal diagnostic) (tot)	S-A - Nutritional assessment (tot)	S-A - Other (tot)
Aggregate Data	570	435	680	688	129	405	9	131	6
Totals (1 groups)	570	435	680	688	129	405	9	131	6

Table 76

Participation in other recovery support activities at closing

Program Name	Number of Closings	SH - Alcoholics / Narcotics Anonymous (AA/NA) (tot)	SH - Al-Anon (tot)	SH - Culturally specific, e.g. sweat lodge (tot)	SH - Faith-based / religious, not AA/NA (tot)	SH - Aftercare (tot)
Aggregate Data	905	676	10	141	163	86
Totals (1 groups)	905	676	10	141	163	86

Program Name	Number of Closings	SH - Recovery Community Organization (RCO) (tot)	SH - Support group through this program (tot)	SH - Other community group (tot)	SH - Other recovery support activity (tot)	SH - Unknown support group (tot)	SH - No support group (tot)
Aggregate Data	905	16	134	39	46	71	94
Totals (1 groups)	905	16	134	39	46	71	94

Other recovery support	Number of Closings
<u>crafts</u>	1
<u>talk to family</u>	1
<u>Art and Meditate</u>	1
<u>Artwork</u>	1
<u>Celebrate Recovery</u>	3
<u>CMA</u>	1
<u>Coda</u>	1
<u>Color and crochet</u>	1
<u>CRAFT and pray</u>	1
<u>crafts and journal</u>	1
<u>crafts and meditate</u>	1
<u>Crochet</u>	2
<u>Crochet and reading</u>	1
<u>Draw and Read</u>	1
<u>DV class</u>	1
<u>family support</u>	1
<u>In-home parenting</u>	1
<u>Journaling</u>	1
<u>MAT groups at HCMC</u>	1
<u>Meditate</u>	2
<u>Meditate and Read</u>	1
<u>Meditation</u>	1
<u>Meditation and mindfulness</u>	1
<u>Meditation and read recovery books</u>	1
<u>Meditation, books and prayer</u>	1
<u>Meditation, crafts, reading and exercise</u>	1
<u>Meditation, journal and exercise</u>	1
<u>Meditations and Reading</u>	1
<u>Parent Connection, Peer Recovery Specialist</u>	1
<u>Peer Recovery Specialist</u>	3
<u>Read</u>	1
<u>Reading</u>	1
<u>Reading and Meditation</u>	1
<u>Reading, journaling, meditation, exercise and spending time with son</u>	1
<u>Recovery Coach</u>	1
<u>Self-help books and recovery books</u>	1
<u>Sponsor and Recovery Coach</u>	1
<u>Therapy, reading, crafts and outings</u>	1
<u>Women's parenting group</u>	1
<u>Write, read, meditate and pray</u>	1
Totals (40 groups)	46

Table 77

Parent education while in the program

Did the client participate in parenting education?	Number of Closings	Number of Closings (% of col)
<i>(empty)</i>	2	0.2%
<u>Yes, and it was an evidence-based program or curriculum</u>	729	80.6%
<u>Yes, and it was not an evidence-based program or curriculum</u>	36	4.0%
<u>No, has at least one child but did not participate</u>	93	10.3%
<u>No, does not have children</u>	12	1.3%
<u>Client was not offered parenting</u>	4	0.4%
<u>Unknown</u>	29	3.2%
Totals (7 groups)	905	100.0%

Evidence-Based Parenting Education Completion	Number of Closings	Number of Closings (% of col)
<i>(empty)</i>	1	0.1%
<u>Completed in full</u>	442	60.6%
<u>Did not complete in full</u>	286	39.2%
Totals (3 groups)	729	100.0%

Non-Evidence-Based Parenting Education Completion	Number of Closings	Number of Closings (% of col)
<u>Participated in ALL parenting education activities offered</u>	10	27.8%
<u>Participated in SOME parenting education activities offered</u>	26	72.2%
Totals (2 groups)	36	100.0%

Table 78

Client engagement in carrying out goals and case plan while in the program

Engagement with goals/case plan	Number of Clients (tot)	Number of Clients (tot) (% of col)
<i>empty</i>	2	0.2%
Very engaged	341	37.7%
Somewhat engaged	324	35.8%
Somewhat disengaged	141	15.6%
Very disengaged	89	9.8%
Unknown	8	0.9%
Totals (6 groups)	905	100.0%

Table 79

Continuing care plan at closing

Client had a continuing care plan/discharge plan?	Number of Closings	Number of Closings (% of col)
<i>empty</i>	2	0.2%
Yes	618	68.3%
No	253	28.0%
Unknown	32	3.5%
Totals (4 groups)	905	100.0%

Table 80

Contacts For Closed Clients

	Average # Contacts	Total contacts	Total contact time	Closed Clients	Average contact time per client
In Person Contacts	36.1	32,533	27,060.00	901	30.0
Phone Contacts	18.2	5065	1252.25	279	4.5
Text Message	4.4	48	6.50	11	0.6
Group Contacts	162.6	131,867.5	168,627.25	811	207.9
Any Contacts	188.1	169,513.5	196,946	901	218.6

Do not include Text Messages in 2018 reporting.

Clients Closed This Period 905

Closed Clients with at least 1 in-person contact per month 839

Closed Clients with at least 2 in-person contacts per month 784

Min, Max, and Average Contact Time (hours) of Clients with some Contact

Program Name	Number of Intakes	Total Contact Time (min)	Total Contact Time (max)	Total Contact Time (avg)
Aggregate Data	902	1.0	1146.3	218.3
Totals (1 groups)	902	1.0	1146.3	218.3

Table 81

Urinalysis (UAs) For Closed Clients

	Number	%
Clients Closed This Period	905	100%
# of clients who received UAs	690	76%
Average UAs per client with at least 1 UA	12.5	
# of clients with at least 1 +UA (of those with at least 1 UA)	370	54%
Total # of UAs	8620	100%
Total # of Positive UAs	1162	13%
Total # of Negative UAs	7458	87%
Positive UAs by substance (by Client):		
Alcohol	60	16%
Cocaine Powder	42	11%
Crack	9	2%
Marijuana/Hashish	112	30%
Heroin	20	5%
Non-prescription Methadone	7	2%
Other Opiates/Synthetics	56	15%
PCP	3	1%
Other Hallucinogens/Psychedelics	4	1%
Methamphetamines	153	41%
Other amphetamines	64	17%
Other Stimulants		0%
Benzodiazepines	47	13%
Other Tranquilizers	1	0%
Barbiturates		0%
Other Sedatives/Hypnotics	12	3%
Ketamine		0%
Ecstasy/other club drugs	17	5%
Inhalants		0%

Over-the-counter medications (misuse)	7	2%
Other drugs	14	4%
Unknown Drugs	2	1%

Medications take as directed

Medications taken as directed 113 31%

Table 82

POSITIVE UA TESTS

Program Name	Alcohol # (tot)	Cocaine powder # (tot)	Crack # (tot)	Marijuana/Hashish # (tot)	Heroin # (tot)	Non-prescription Methadone # (tot)	Opiates/Synthetics # (tot)	Other # (tot)	PCP # (tot)	Hallucinogens/Psychedelics # (tot)	Other amphetamines # (tot)	Methamphetamines # (tot)	Other amphetamines # (tot)	Other Stimulants # (tot)
Aggregate Data	60	42	9	112	20	7	56	3		4		153	64	0
Totals (1 groups)	60	42	9	112	20	7	56	3		4		153	64	0

Program Name	Benzodiazepines # (tot)	Other Tranquilizers # (tot)	Barbiturates # (tot)	Sedatives/Hypnotics # (tot)	Other # (tot)	Ketamine # (tot)	Ecstasy/other club drugs # (tot)	Inhalants # (tot)	Over-the-counter medications (misuse) # (tot)	Other Substance # (tot)	Unknown Drugs # (tot)
Aggregate Data	47	1	0	12	0	17	0	7	14	2	
Totals (1 groups)	47	1	0	12	0	17	0	7	14	2	

List of other drugs with positive UAs

Other Substance Specify	Number of UA/Contact Logs
No records found	

List of reasons why no UAs were conducted:

Reason client had no UAs this period
has not met with this writer
moved out and has been UA'd randomly during 1:1 meetings
random UAs now

Table 83

Consent for follow-up interview

Consent from Intake or Closing	Number of Closings	Number of Closings (% of col)
<i>empty</i>	7	0.8%
No	140	15.5%
Yes	758	83.8%
Totals (3 groups)	905	100.0%

CHILDREN OF CLIENTS CLOSED THIS YEAR

These dependent tables include children born before and after intake.

Table 84

Custody status at closing by child

CURRENT involvement with Child Protection (CP)	Number of Children	Number of Children (% of col)
<i>empty</i>	167	9.5%
No CP involvement	649	37.0%
CP involvement - no formal placement	304	17.3%
CP involvement - in a formal out of home placement	565	32.2%
Unknown	70	4.0%
Totals (5 groups)	1755	100.0%

Custody status at closing?	Number of Children	Number of Children (% of col)
<i>empty</i>	174	9.9%
Yes_reunified currently	246	14.0%
Yes_still in temporary formal placement	494	28.1%
Yes_resulted in TLC during the program	15	0.9%
Yes_resulted in TPR during the program	12	0.7%
No_not in placement at any point	744	42.4%
Unknown	70	4.0%
Totals (7 groups)	1755	100.0%

Table 85

Living status by child at closing

Where/with whom is child living most at Closing?	Number of Children	Number of Children (% of col)
<i>(empty)</i>	163	9.3%
Mom	557	31.7%
Dad	262	14.9%
Both parents	42	2.4%
Other family/friends	368	21.0%
Foster care	289	16.5%
Other	18	1.0%
Unknown	56	3.2%
Totals (8 groups)	1755	100.0%

Table 86

Children's immunization status at Closing

Current on immunizations at Closing?	Number of Children	Number of Children (% of col)
<i>(empty)</i>	166	9.5%
Yes	1301	74.1%
No	19	1.1%
Unknown	269	15.3%
Totals (4 groups)	1755	100.0%

Table 87

Children's mental health services by child at Closing

Receiving mental health services at Closing?	Number of Children	Number of Children (% of col)
<i>(empty)</i>	166	9.5%
Yes	351	20.0%
No	911	51.9%
Unknown	327	18.6%
Totals (4 groups)	1755	100.0%

Table 88

Children's medical insurance by child at Closing

Medical insurance at Closing?	Number of Children	Number of Children (% of col)
<i>(empty)</i>	166	9.5%
Yes, public insurance (MA, MNCare)	1312	74.8%
Yes, private insurance	32	1.8%
No	12	0.7%
Unknown	233	13.3%
Totals (5 groups)	1755	100.0%

Table 89

Children diagnosed with FASD at closing

Diagnosed with FASD at Closing?	Number of Children	Number of Children (% of col)
<i>(empty)</i>	170	9.7%
Yes, before program	3	0.2%
No, but FASD is suspected	125	7.1%
No, and FASD is not suspected	1113	63.4%
Unknown	344	19.6%
Totals (5 groups)	1755	100.0%

Table 90

Children's participation in evidence-based programs at closing

Participated in evidence-based program?	Number of Children	Number of Children (% of col)
<i>(empty)</i>	182	10.4%
Yes, full completion	85	4.8%
Yes, partial completion	77	4.4%
No	1338	76.2%
Unknown	73	4.2%
Totals (5 groups)	1755	100.0%

Table 91

Child received services from staff

Did child receive services directly from staff?	Number of Children	Number of Children (% of col)
<i>(empty)</i>	946	53.9%
Yes	591	33.7%
No	218	12.4%
Totals (3 groups)	1755	100.0%

Areas children recieved services

Program Name	Number of Children	Serv - Physical health/medical care (tot)	Serv - Mental health/counseling (tot)	Serv - Immunizations (tot)	Serv - FASD (tot)	Serv - Developmental needs (tot)	Serv - Educational needs (tot)	Serv - Safe Infant Sleep (tot)	Serv - Recreational services (tot)	
Aggregate Data	591	324	133	244	208	351	228	238	344	
Totals (1 groups)	591	324	133	244	208	351	228	238	344	20

Screening/Assessment children recieved

Program Name	Number of Children	Scr - Developmental assessment (tot)	Scr - Prenatal alcohol or drug screening (tot)	Scr - FASD screening (informal screening) (tot)	Scr - FASD assessment (formal diagnostic) (tot)	Scr - Other screening (tot)	Scr - None of these (tot)
Aggregate Data	591	123	24	275	2	15	239
Totals (1 groups)	591	123	24	275	2	15	239

E. 1-month follow-up interview tables

E1. Number and proportion of 1-month follow-up interviews completed through May 2018, by program

Grantee	Number of 1-month interviews completed	Proportion of total 1-month interviews
St. Cloud Hospital Recovery Plus	61	28%
Wellcome Manor Family Services	44	20%
Wayside House	38	17%
RS EDEN	28	13%
Ramsey County Community Human Services	22	10%
Avivo	12	6%
Hope House of Itasca County	9	4%
Meeker-McLeod-Sibley Community Health Services	3	1%
American Indian Family Center	1	<1%
Perspectives Inc.	1	<1%
St. Stephens Human Services	1	<1%
Fond du Lac Reservation	0	0%
Total	220	100%

E2. Women's satisfaction with program (N=293-301)

	Total N	Percentage who agree or strongly agree	Percentage who disagree or strongly disagree
The staff understood your problems or concerns.	301	90%	10%
The staff were available when you needed their support.	301	91%	9%
The staff knew a lot about services and programs in the community that could help you and your family.	299	84%	16%
The staff were sensitive to cultural issues.	293	91%	9%
You and the staff worked together to develop your goals for you and your family.	299	91%	9%
You feel you got the right level of support from the program.	301	83%	17%
The services you received through the program met your expectations.	300	84%	16%
You would recommend this program to women like yourself.	301	89%	11%

Note. Cumulative percentages may vary from 100 percent due to rounding. Women's satisfaction was collected at both the 1-month and 6-month interviews, whichever came first; satisfaction results from both time points were combined and included in this table.

E3. Parenting program participation (N=301)

Did you participate in a parenting program while you were in the program?	N	%
Yes	244	81%
No	57	19%

Note. Cumulative percentages may vary from 100 percent due to rounding. Women were asked their parenting program participation at either the 1-month or 6-month interview, whichever came first; results from both time points were combined and included in this table.

E4. Parenting program impact (N=242)

Of those reporting participation in a parenting program

Would you say...	Strongly agree		Agree		Disagree		Strongly disagree	
	N	%	N	%	N	%	N	%
The parenting program you participated in helped you learn new parenting techniques or strategies to deal with your child's behavior.	130	54%	85	35%	20	8%	7	3%
The parenting program you participated in helped you learn more about child development and what to expect of children at different ages.	125	52%	86	36%	29	12%	2	1%

Note. Cumulative percentages may vary from 100 percent due to rounding. Women were asked at either the 1-month or 6-month follow-up interview to reflect on this aspect of their life before participating in the program and after participating, whichever interview came first; results from both time points were combined and included in this table.

E5. Overall satisfaction with program (N=301)

	Very satisfied	Satisfied	Dissatisfied	Very dissatisfied
Overall, how satisfied were you with the services you received through the program?	54%	33%	8%	5%

Note. Cumulative percentages may vary from 100 percent due to rounding. Participant satisfaction was collected at both the 1-month and 6-month interviews, whichever came first; satisfaction results from both time points were combined and included in this table.

E6. Types of support obtained through the program (N=294-299)

Did the program help you to...	Yes, program helped with this	No, and I needed this type of help	No, but I did not need this type of help	Percentage who felt this was most helpful to them or children (N=290)
Get or stay sober	91%	5%	4%	42%
Find a support network of people who could help them stay sober	71%	13%	16%	7%
Address your physical or mental health needs?	84%	13%	3%	11%
With parenting?	79%	7%	15%	9%
With housing?	27%	36%	37%	2%
With things like housing, transportation, or paying bills	52%	23%	25%	3%
With getting benefits like MFIP or WIC	58%	7%	36%	3%
By just being there to provide emotional support or encouragement?	90%	8%	2%	22%

Note. Cumulative percentages may vary from 100 percent due to rounding. Information on the types of support provided through the program was collected at both the 1-month and 6-month interviews, whichever came first; and results from both time points were combined and included in this table.

E7. Women's wellbeing before and 1-month after the program (N=220)

How would you describe the following areas of your life?	Excellent		Good		Fair		Poor	
	Before starting program	At 1-month follow-up	Before starting program	At 1-month follow-up	Before starting program	At 1-month follow-up	Before starting program	At 1-month follow-up
Your physical health	5%	31%	23%	47%	29%	20%	43%	2%
Your mental health	3%	31%	12%	48%	24%	18%	61%	3%

Note. Cumulative percentages may vary from 100 percent due to rounding. At the 1-month interview, women reflected back on their physical and mental health before participating the program (a retrospective rating) and then described their health since leaving the program.

E8. Relationship with child before and after the program (N=202-212)

	Excellent		Good		Fair		Poor	
	N	%	N	%	N	%	N	%
<u>Before entering the program</u> , how would you describe your relationship with your child?	29	14%	60	30%	57	28%	56	28%
<u>Since you left the program</u> , how would you describe your relationship with your child?	138	65%	54	26%	14	7%	6	3%

Note. Cumulative percentages may vary from 100 percent due to rounding. At the 1-month interview, women reflected back on their relationship with their child before participating in the program (a retrospective rating) and then described their relationship since leaving the program.

E9. Use of alcohol and other drugs since leaving the program (at 1-month follow-up) (N=219)

	N	%
Woman has used alcohol, marijuana, or other drugs since leaving the program	50	23%
Change in substance use among those who have used (N=50)		
Using more at follow-up	6	12%
Using about the same amount at follow-up	7	14%
Using less at follow-up	37	74%
Frequency of substance use since leaving the program (N=50)		
1 time	17	34%
2 or 3 times	15	30%
More than 3 times	18	36%

Note. Cumulative percentages may vary from 100 percent due to rounding.

E10. Types of substances used by 1-month follow-up (N=48-49)

Substances used	N	%
Alcohol	32	65%
Marijuana/pot/weed/hashish	21	43%
Methamphetamines (meth)	16	33%
Misused prescription drugs	6	12%
Crack/cocaine	4	8%
Heroin	4	8%
Non-prescription methadone	2	4%
Other substances	2	4%

Note. Cumulative percentages may vary from 100 percent due to rounding.

E11. Length of sobriety at 1-month follow-up (N=170)

How long have you been abstinent/clean/sober?	N	%
Less than 6 months	80	47%
6-11 months	66	39%
12-18 months	17	10%
More than 18 months	7	4%
Average (mean) length of sobriety: 8 months		
Median length of sobriety: 6 months		

Note. Cumulative percentages may vary from 100 percent due to rounding.

E12. Supportiveness and stability of living situation at 1-month follow-up (N=219)

When thinking about your current living situation...	Very supportive or stable	Somewhat supportive or stable	Not very supportive or stable	Not at all supportive or stable
How supportive to recovery is your current living situation?	71%	22%	5%	3%
How stable to recovery is your current living situation?	54%	38%	2%	5%

Note. Cumulative percentages may vary from 100 percent due to rounding.

E13. Employment situation at 1-month follow-up (N=219)

Current employment situation at 1-month follow-up	N	%
Employed full-time or part time	73	33%
Unable to work due to a disability	29	13%
Unemployed, and looking for work	59	27%
Unemployed, and not currently looking for work, including those in school	45	21%
Something else	13	6%

Note. Cumulative percentages may vary from 100 percent due to rounding. Employment includes temporary work and self-employment.

E14. Financial situation and access to transportation before and 1-month after the program (N=217)

How often are you/were you able to...	Most of the time		Some of the time		Rarely		Never	
	Before starting program	At 1-month follow-up	Before starting program	At 1-month follow-up	Before starting program	At 1-month follow-up	Before starting program	At 1-month follow-up
Afford basic living expenses (rent, food, etc.)	31%	64%	22%	20%	29%	12%	18%	4%
Access reliable transportation	57%	76%	17%	17%	19%	6%	7%	1%

Note. Cumulative percentages may vary from 100 percent due to rounding. At the 1-month interview, women reflected back on their physical and mental health before participating in the program (a retrospective rating) and then described their health since leaving the program.

E15. Number of children living with you at 1-month follow-up (N=219)

How many children are you currently living with or parenting at least half of the time?	N	%
No children	58	27%
1 child	76	35%
2 children	38	17%
3 children	32	15%
4 children	11	5%
5 children	3	1%
9 children	1	1%
Average (mean) number of children among women living with children (N=161)	1.96	
Median number of children among women living with children (N=161)	2	

Note. Cumulative percentages may vary from 100 percent due to rounding.

E16. Parenting decisions before and 1-month after the program (N=161)

	Most of the time		Some of the time		Rarely		Never	
	N	%	N	%	N	%	N	%
<u>Before entering the program</u> , how often did you feel you were making good parenting decisions?	36	23%	74	47%	33	21%	14	9%
<u>Since you left the program</u> , how often did you feel you were making good parenting decisions?	145	90%	15	9%	1	1%	—	—

Note. Cumulative percentages may vary from 100 percent due to rounding. At the 1-month interview, women reflected back on their parenting decisions before participating in the program (a retrospective rating) and then described their parenting decisions since leaving the program.

E17. Removal and reunification of children by 1-month follow-up (N=209)

Since you left the program...	Yes		No	
	N	%	N	%
Have you had any involvement with Child Protection?	86	41%	123	59%
Have any of your children been removed from your care?	14	16%	72	84%
Have any of your children been reunited with you?	32	37%	54	63%

Note. Cumulative percentages may vary from 100 percent due to rounding. By the 1-month follow-up, a total of 35 children were removed from their mom's care and 75 children had been reunited with their mom.

E18. Relationships with family and friends before and 1-month after the program (N=219)

	Very supportive		Somewhat supportive		Not at all supportive	
	N	%	N	%	N	%
<u>Before entering the program</u> , how would you describe your relationship with family and friends?	49	22%	105	48%	65	30%
<u>Since you left the program</u> , how would you describe your relationship with family and friends?	153	70%	54	25%	12	6%

Note. Cumulative percentages may vary from 100 percent due to rounding. At the 1-month interview, women reflected back on their relationships before participating in the program (a retrospective rating) and then described their relationships since leaving the program.

E19. Access to good advice before and 1-month after the program (N=219)

	Most of the time		Some of the time		Rarely		Never	
	Before starting program	At follow-up	Before starting program	At follow-up	Before starting program	At follow-up	Before starting program	At follow-up
How often did you have friends or family available to give you good advice when you were facing a crisis?	31%	71%	27%	20%	30%	6%	12%	3%

Note. Cumulative percentages may vary from 100 percent due to rounding. At the 1-month interview, women reflected back on the availability of good advice before participating in the program (a retrospective rating) and then described the availability of good advice since leaving the program

F. 6-month follow-up interview tables

F1. Number and proportion of six-month follow-up interviews completed through May 2018, by program

Grantee	Number of 6-month interviews completed	Proportion of total 6-month interviews
Wayside House	34	25%
St. Cloud Hospital Recovery Plus	28	20%
RS EDEN	20	15%
Wellcome Manor Family Services	19	14%
Hope House of Itasca County	10	7%
Avivo	7	5%
Ramsey County Community Human Services	7	5%
Meeker-McLeod-Sibley Community Health Services	4	3%
American Indian Family Center	2	2%
Perspectives Inc.	2	2%
St. Stephens Human Services	3	2%
Fond du Lac Reservation	1	<1%
Total	137	

Note. Percentages may not equal 100% due to rounding.

Social support

F2. Relationships with family and friends at 6-month follow-up (N=135)

	Very supportive		Somewhat supportive		Not at all supportive	
	N	%	N	%	N	%
In the past month, how would you describe your relationship with family and friends?	104	77%	26	19%	5	4%

Note. Cumulative percentages may vary from 100 percent due to rounding.

F3. Access to good advice at 6-month follow-up (N=135)

	Most of the time		Some of the time		Rarely		Never	
	N	%	N	%	N	%	N	%
<u>In the past month</u> , how often did you have friends or family available to give you good advice when you were facing a crisis?	107	79%	20	15%	4	3%	4	3%

Note. Cumulative percentages may vary from 100 percent due to rounding.

Employment and education

F4. Participation in schooling or job training since leaving the program (N=135)

	N	%
Number of clients that have participated in any additional schooling or job training since leaving the program	37	27%
Of those who participated in any additional schooling or job training since leaving the program, have you obtained or attended... (N=37)		
GED/High School	10	27%
Associate's or vocational college	3	8%
College degree/four year college	2	5%
Graduate/professional school	0	0%
Other job training	19	51%

Note. Cumulative percentages may vary from 100 percent due to rounding.

F5. Employment situation at 6-month follow-up (N=135)

Current employment situation at 6-month follow-up	N	%
Employed full-time or part time	65	48%
Unable to work due to a disability	17	13%
Unemployed, and looking for work	29	22%
Unemployed, and not currently looking for work, including those in school	20	15%
Something else	4	3%

Note. Cumulative percentages may vary from 100 percent due to rounding. Employment includes temporary work and self-employment.

Basic living expenses and transportation

F6. Financial situation and access to transportation at 6-month follow-up (N=135)

In the past month, how often have been able to...	Most of the time		Some of the time		Rarely		Never	
	N	%	N	%	N	%	N	%
Afford basic living expenses (rent, food, etc.)	74	55%	39	29%	16	12%	6	4%
Access reliable transportation	96	72%	26	19%	11	8%	1	1%

Note. Cumulative percentages may vary from 100 percent due to rounding.

Housing

F7. Frequency of housing transitions since leaving the program (N=86)

	Range	Mean
Number of times clients moved since leaving the program (six months ago)	1-10	2

Note. These numbers exclude 48 families who did not move during the follow-up period.

F8. Living arrangements at 6-month follow-up (N=134)

How would you describe your current housing or living arrangement?	N	%
In an apartment or house that you own or rent, which is not part of a transitional or permanent supportive housing program	50	37%
Permanent housing program with services to help you keep your housing, either on site services or services that come to you	16	12%
Staying with a relative or friend on a temporary basis	35	26%
Transitional housing program	6	5%
Staying with a relative or friend on a long-term basis	13	10%
Residential drug or alcohol treatment facility	1	1%
Emergency shelter	1	1%
Halfway house for people in recovery	8	6%
No home at present, such as staying on the streets, car, or other places not meant for human habitation	2	2%
Some other place	2	2%

Note. Cumulative percentages may vary from 100 percent due to rounding.

F9. Supportiveness and stability of living situation at 6-month follow-up (N=133-134)

When thinking about your current living situation...	Very supportive or stable	Somewhat supportive or stable	Not very supportive or stable	Not at all supportive or stable
How supportive to recovery is your current living situation?	76%	19%	3%	2%
How stable to recovery is your current living situation?	60%	31%	4%	6%

Note. Cumulative percentages may vary from 100 percent due to rounding.

Mental and physical health

F10. Women's wellbeing at 6-month follow-up (N=134)

How would you describe the following areas of your life?	Excellent		Good		Fair		Poor	
	N	%	N	%	N	%	N	%
Your physical health	30	22%	55	41%	40	30%	9	7%
Your mental health	24	18%	55	41%	46	34%	9	7%

Note. Cumulative percentages may vary from 100 percent due to rounding.

F11. Client use of emergency room and hospitalization since leaving the program (N=134)

Since the time you left THE PROGRAM, have you...	N	%
Been to the emergency room for any reason related to your own health	52	39%
Of those who visited the emergency room (N=51)	Range	Mean
Number of visits	1-10	2.25

F12. Mental health concerns since leaving the program (N=134)

Since the time you left the program, have you...	N	%
Client has concerns related to anxiety, depression, or other mental health concerns since leaving the program	83	62%
Client has received help at a clinic, or from a therapist, psychiatrist, or other mental health provider	79	86%

Note. Cumulative percentages may vary from 100 percent due to rounding.

Criminal justice system involvement

F13. Clients' arrested since leaving the program (N=134)

	N	%
Client has been arrested for any reason since leaving the program	17	13%
Of those arrested (N=17)	Range	Mean
Number of times arrested	1-2	1.18

F14. Clients arrested since leaving the program (N=134)

	N	%
Client has been charged with any crimes or violations of a law since leaving the program	9	7%
Of those charged (N=9)	Range	Mean
Number of times charged	1-2	1.22

F15. Clients incarcerated since leaving the program (N=134)

	N	%
Client has been incarcerated since leaving the program	13	10%
Of those incarcerated (N=13)	Range	Mean
Time spent incarcerated (days)	1-122	23

F16. Clients in detox since leaving the program (N=134)

	N	%
Client has been in detox since leaving the program	5	4%
Of those in detox (N=5)	Range	Mean
Number of times in detox	1-4	1.6

Substance use

F17. Use of tobacco at 6-month follow-up (N=134)

Client smokes cigarettes or uses tobacco products at 6-month follow-up	N	%
Yes	125	93%
No	9	7%
Yes, but only in cultural ceremonies	0	0%

Note. Cumulative percentages may vary from 100 percent due to rounding.

F18. Use of alcohol and other drugs at 6-month follow-up (N=134)

	N	%
Woman has used alcohol, marijuana, or other drugs since leaving the program	56	42%
Change in substance use among those who have used (N=55)		
Using more at follow-up	3	6%
Using about the same amount at follow-up	5	9%
Using less at follow-up	47	86%
Frequency of substance use since leaving the program (N=56)		
1 time	10	18%
2 or 3 times	23	41%
More than 3 times	23	41%

F19. Types of substances used since leaving the program (N=56)

Substances used	N	%	Of those who have used, clients who used this substance in the past 30 days	
			N	%
Alcohol	38	68%	13	34%
Marijuana/pot/weed/hashish	27	48%	16	59%
Methamphetamines (meth)	19	34%	8	42%
Other opioids	11	20%	3	27%
Crack/cocaine	7	13%	3	43%
Heroin	6	11%	1	17%
Non-prescription methadone	0	0%	0	0%
Other substances (benzodiazepines, ecstasy)	3	6%	1	33%

F20. Length of sobriety at 6-month follow-up (N=77)

How long have you been abstinent/clean/sober?	N	%
Less than 6 months	2	3%
6-11 months	36	47%
12-18 months	28	36%
More than 18 months	11	14%
Average (mean) length of sobriety: 14 months		
Median length of sobriety: 12 months		

Note. Cumulative percentages may vary from 100 percent due to rounding.

F21. Participation in drug or alcohol treatment programs since leaving program (N=134)

Since you left the program, have you entered any other drug or alcohol treatment programs?	N	%
Yes	50	37%
No	84	63%

Note. Cumulative percentages may vary from 100 percent due to rounding.

F22. Participation in other recovery support activities since leaving program (N=132-134)

Client participation in the following activities as part of recovery support since leaving the program	N	%
Other things to support recovery?	99	75%
Alcoholics Anonymous (AA) or Narcotics Anonymous (NA)?	98	73%
Aftercare	68	52%
A faith-based or religious group	58	43%
Support from a recovery coach or peer recovery specialist?	38	29%
Another support group offered in the community?	32	24%
A Recovery Community Organization (RCO)?	30	23%
A culturally specific group like a sweat lodge or talking circle?	22	16%
Al-Anon?	17	13%

F23. Sponsor at 6-month follow-up (N=134)

Do you have a sponsor?	N	%
Yes	53	40%
No	81	60%

Note. Cumulative percentages may vary from 100 percent due to rounding.

F24. Participation in Medication Assisted Treatments (MAT) since leaving program (N=124)

Since leaving the program, have you received any MAT or opioid maintenance therapy?	N	%
Yes	16	13%
No	108	87%

Note. Cumulative percentages may vary from 100 percent due to rounding.

F25. Helpfulness of Medication Assisted Treatments (MAT) (N=16)

Of those who reported participating in MAT since leaving the program:	Very helpful	Somewhat helpful	Not very helpful	Not at all helpful
In general, how helpful would you say Medication Assisted Treatment has been in your recovery?	75%	25%	0%	0%

Note. Cumulative percentages may vary from 100 percent due to rounding.

Self-efficacy

F26. Self-efficacy at 6-month follow-up (N=134)

How much do you agree or disagree with the following statements?	Strongly agree		Agree		Disagree		Strongly disagree	
	N	%	N	%	N	%	N	%
You can usually solve difficult problems if you try hard enough	75	56%	56	42%	1	1%	2	2%
When you set goals for yourself, you have a hard time following through	9	7%	35	26%	67	50%	23	17%
You stay calm when facing difficulties	26	20%	84	64%	20	15%	2	2%
You can usually handle whatever comes your way	43	32%	86	64%	4	3%	1	1%
You often feel overwhelmed by all of the challenges in your life	14	10%	51	38%	55	41%	14	10%

Note. Cumulative percentages may vary from 100 percent due to rounding.

Parenting

F27. Number of children living with women at 6-month follow-up (N=134)

How many children are you currently living with or parenting at least half of the time?	N	%
No children	36	27%
1 child	42	31%
2 children	25	18%
3 children	17	12%
4 children	9	7%
5 children	3	2%
6 children	2	2%
Average (mean) number of children among women living with children (N=86): 2.10		
Median number of children among women living with children (N=86): 2		

Note. Cumulative percentages may vary from 100 percent due to rounding. The mean excludes families with no children living with them.

F28. Interactions with children at 6-month follow-up (N=83-86)

How would you describe the following areas of your life?	Most of the time		Some of the time		Rarely		Never	
	N	%	N	%	N	%	N	%
You were able to control your anger and frustration with your children	76	88%	9	11%	1	1%	0	0%
You showed your children love and affection.	85	99%	1	1%	0	0%	0	0%
You consistently set limits and provided appropriate consequences.	71	85%	12	14%	1	1%	0	0%
When your children were upset or stressed out, you tried to understand what was going on with them	76	88%	9	11%	0	0%	1	1%
When your children did something well, you let them know that you were proud of them	86	100%	0	0%	0	0%	0	0%
You could name several good qualities your children have	86	100%	0	0%	0	0%	0	0%
You feel positive about being a parent	76	88%	10	12%	0	0%	0	0%
You make good parenting decisions	77	90%	7	8%	1	1%	1	1%

Note. Cumulative percentages may vary from 100 percent due to rounding.

F29. Relationship with child at 6-month follow-up (N=86)

How would you describe the following areas of your life?	Excellent		Good		Fair		Poor	
	N	%	N	%	N	%	N	%
In the past month, how would you describe your relationship with your child?	61	71%	22	26%	3	4%	0	0%

Note. Cumulative percentages may vary from 100 percent due to rounding.

F30. Involvement with child protection since leaving the program (N=128)

Since you left the program, have you had any involvement with child protection?	N	%
Yes	57	45%
No	71	56%

Note. Cumulative percentages may vary from 100 percent due to rounding.

F31. Reunification and removal of children since leaving the program (N=56-57)

Since you left THE PROGRAM	Yes		No	
	N	%	N	%
Have any of your children been reunited with you?	20	35%	37	65%
Have any of your children been removed from your care?	24	43%	32	57%

Note. Cumulative percentages may vary from 100 percent due to rounding. By the 6-month follow-up, a total of 50 children were removed from their mom's care and 43 children had been reunified with their mom.

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