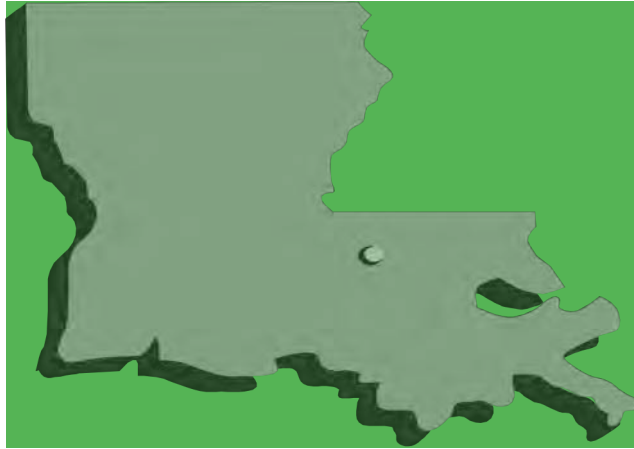


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June 2005

Louisiana Oxford House Resident Profile

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(337) 706-7814 • M

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241 Grand Avenue
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116 Maplewood Street
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337-504-5710 • W

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1105 Marie Antoinette
Lafayette, LA 70506
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102 Stockton Drive
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(337) 408-3240 • M

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2201 Winnie Street
Lake Charles, LA 70601
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1801 18th Street
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3030 Highway 59
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141 Cindy Lou Place
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2031 Destin St.
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331 W. Beach Parkway
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1802 Clearview Parkway
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4601 Windsor
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2828 Audubon St
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318 Ockley
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(318) 865-9585 • W

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270 Southfield
Shreveport, LA 71105
(318) 868-4880 • W

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270 Bruce St
Shreveport, LA 71104
318-670-8375 • M

Oxford House-Len Court
713 Len Court
Shreveport, LA 71104
318-779-0399 • M

Oxford House-Eden Isles
414 Eden Isles Blvd.
Slidell, LA 70458-5572
985-288-4024 • W

Oxford House-Pebble Beach
111 Pebble Beach Drive
Slidell, LA 70458-5743
(984) 201-7314 • M

M = men

W= women

Revised: 3/28/2009

An Evaluation: Oxford Houses of Louisiana



Oxford House-Robinson/Olive

329 Olive Street
Shreveport, LA 71105
Tel. 318-675-2898
10 Men, Established Jan 2001

Introduction

In June 2004, the 120 residents of the Oxford Houses in Louisiana completed the standard Oxford House Resident Profile Survey used by Oxford House, Inc. since 1987. The participation rate was 80% although only 28 of the then 33 Oxford Houses in the state participated.¹ Profile data from that survey is used throughout this evaluation.

The evaluation is also a story of how Oxford House, Inc. and the Louisiana Office of Alcohol and Drug Abuse worked together to build a strong network of self-run, self-supported Oxford Recovery Homes across the state. The goal of the agency and Oxford House is to afford every individual in the state recovering from alcoholism and drug addiction with the opportunity to succeed at staying clean and sober without relapse. At the five year mark the project has a solid start but there are miles to go before the goal is

¹ Among the 28 houses were 200 beds of which 50 were vacant in June 2004. After subtracting the vacancies the full beds numbered 150 of which 120 residents [80%] participated in the survey providing a high assurance that the survey group was representative of the entire Oxford House population.

reached. As of June 2005, there are 40 Oxford Houses in the state with a total of 305 recovery beds.

This evaluation is divided into four parts: (1) Building the Network; (2) Oxford House and Recovery Without Relapse; (3) Louisiana Oxford House Resident Profile, and (4) Fulfilling the Goal.

Building the Network

At the end of June 2005, there are forty Oxford Houses in Louisiana. The establishment of the houses is the result of several contracts between Oxford House, Inc. [OHI] and the Louisiana Department of Health and Hospitals beginning in the second half of FY 2000.² The five- year partnership between Oxford House, Inc. and the Louisiana Office of Alcohol and Drug Abuse has provided hundreds of recovering alcoholics and drug addicts the opportunity to develop sobriety without recidivism.

Five years ago the development of the state network of Oxford Houses began in the Northwest corner of the state. Oxford House-Southfield, a house for 10 men, was opened at 236 Southfield Drive in



Shreveport in February 2000. Three months later, a house for 7 women was established in Shreveport –

² In the spring of 1998, the late Alton E. “Jake” Hadley, MSW, then Assistant Secretary, Office of Alcohol and Drug Abuse, Louisiana Department of Health and Hospitals contacted Oxford House, Inc. [OHI] about developing Oxford Houses in the state as a continuum of halfway house support. Specifically, Jake’s hope was to double the state’s halfway house capacity by shorting the duration of stay at the halfway houses from six months to three months by establishing enough Oxford Houses to permit recovering individuals to move from a halfway house into an Oxford House. During the next year, Jake became ill but Michael Duffy, who took over direction of the state agency following Jake’s illness and death last year, fulfilled his hope. Today, the Louisiana halfway house network has reduced average stay from six months to 87 days – a little better than Jake’s original goal. The state entered into a contract for \$100,000 with OHI for the third and fourth quarters of FY 2000. In FY 2001, the contract amount was \$192,792. In FY 2002, the contract amount was \$221,204. In FY 2003, the contract amount was \$253,100. In FY 2004, the contract amount was \$364,000 and \$136,984 for FY 2005. As of June 1, 2005 a total of \$1,245,916 has been expended to develop the network of 40 self-run, self-supported Oxford Recovery Homes in Louisiana. That is an average one-time cost per home of \$31,353.

Oxford House-Broadmoor at 216 Schaub Drive. In July 2000, another house for 9 women was established at 6260 South Crest Drive in Shreveport – Oxford House-Western Hills. In the same month, Oxford House-Jordan at 636 Jordan Street, Shreveport was established to house 6 men in recovery.

In November 2000 a house for eight men, Oxford House-Coleman for 8 men was established about 100 miles east in West Monroe. This would be the first of several houses in Monroe or West Monroe and as discussed later in this evaluation the number of houses eventually established in Monroe and West Monroe represented either an excess capacity for that area or a failure on OHI's part to effectively convince newly recovering alcoholics and drug addicts in that area to take the opportunity to live in an Oxford House. Today, there are three Oxford Houses in the area – rather than five – and all are for men.



In 2001, development of the Louisiana Network of Oxford Houses expanded into Lafayette and Lake Charles as well as expansion of the Shreveport and Monroe clusters. Lafayette, as shown on the map at the left, and is about 215 miles southeast of Shreveport. Between March and September four new houses were



established in Lafayette – two for men and two for women. Today, there is a fifth house in Lafayette that was established in July 2002. In May 2005, all the Lafayette houses remain open but the house that opened in July 2002 – Oxford House-Dulles is being converted into a women's house in order to better match supply and demand.

As discussed in section three of this evaluation, the improvement of chapter operations can both reduce the number of vacancies and assure better matching between recovery beds and area needs. A good housing service committee at the chapter level should be able to keep beds full and expand to meet demand.

Two of the three Oxford Houses in Lake Charles – 250 miles south of Shreveport and 75 miles west of Lafayette – were also established in 2001 with one

started in August and one started in December. By the end of calendar year 2001, 16 of the 40 Oxford Houses in Louisiana had been established and were clustered in four population centers – Shreveport, Monroe, Lafayette and Lake Charles.

Five additional houses were established during 2002 – two in Metairie, two in Mandeville and the sixth house in Lafayette. Metairie is about 200 miles east of Lake Charles and 135 miles east of Lafayette. Mandeville is about 198 miles east of Lake Charles and 134 miles east of Lafayette. Mandeville and Metairie are only about 30 miles apart and both are about 30 miles west of New Orleans. For the outreach workers in Louisiana, the three years – 2000, 2001 and 2002 – represented the beginning of a statewide network of Oxford Houses but only a beginning because the four clusters of houses were miles apart and two of the population centers in the state were not yet served at all – New Orleans and Baton Rouge.



As 2003 began, three of the five greatest population area in the state did have Oxford Houses. Shreveport, with a 2000 population of 200,145 had five houses. Lafayette, with a population of 110,257, had six houses and Lake Charles with a population of 71,757 had two houses. Mandeville [one house] and Metairie [two houses] opened in 2002 and were 30 miles from New Orleans but neither New Orleans or Baton Rouge had Oxford Houses at the end of 2002 and would not get houses in 2003 either.

The sites for the eight houses established in 2003 were Alexandria, Chalmette, Kenner, Lake Charles and Monroe. Alexandria is the largest city in Rapides Parish [population 126,337] and is about 100 miles south of Monroe. In June and October of 2003 two houses for men were established in Alexandria. In November a house for women was established. Each house accommodated six or seven residents. In May 2004 each house had a vacancy or two but the vacancies were filled in early June.



Kenner, like Metairie and Mandeville, is in Jefferson Parish and only 10 miles from New Orleans. In January 2003 a house for 7 women was established in Kenner. During May 2005, it had three vacancies that suggest the lack of a sufficient number of houses in this large suburb of New Orleans. As discussed later in this evaluation, clusters of houses providing a critical mass of recovery beds is necessary to maximize full utilization of available recovery beds. For example, a treatment counselor who consistently finds no beds available when he or she tries to encourage a person leaving primary treatment to apply to an Oxford House soon gets discouraged and is reluctant to spend the time and effort to convince the next client to follow the same course. By having a sufficient number of houses in an area the chances of matching supply and demand for long-term recovery beds is increased.



Oxford House-Uptown

8504 Freret Street
New Orleans, LA 70118
7 Men, Established Jul 2004

It was not until 2004 that OHI and the state agency began to establish Oxford Houses to serve Louisiana's largest population centers – New Orleans and Baton Rouge. New Orleans city has a population of more than 484,000. Baton Rouge city has a population of about 228,000. These two metropolitan areas have about a third of the state's 4.4 million residents. Because the development of the statewide network of Oxford Houses began in the western part of the state and expanded eastward, Oxford Houses have only recently been introduced to New Orleans and Baton Rouge. In hindsight, it might have been better to

have established strong clusters of Oxford Houses in the most populous regions first. However, at the midpoint of 2005 it appears that both New Orleans and Baton Rouge are poised to take off. This activity can provide the critical mass necessary for strengthening the statewide network of houses, the chapter structure and the development of state association.

The potential for substantial expansion in Baton Rouge and New Orleans can be best understood by looking at OHI development experience in another metropolitan area – Portland, Oregon. Portland has a population of about 529,000. There are 47 Oxford Houses in Portland – one for every 11,255 citizens. Using that formula for New Orleans and Baton Rouge would suggest a minimum of 20 houses in Baton Rouge and 43 houses in New Orleans.

Oxford House and Recovery – Without Relapse

The five-year Oxford House development program in Louisiana has had two primary goals – (1) to permit more recovering individuals to use the Louisiana halfway house system, and (2) to decrease recycling of alcoholics and drug addicts through the system by increasing the percentage of recovering individuals who avoid relapse. Clearly the 305 long-term recovery beds in the Louisiana Oxford House network has contributed to the fact that the time limit for traditional halfway house living has been cut in half from six months to three months. It also appears that – as in other states – the Oxford Houses have improved treatment outcome by providing recovering individuals with the time, discipline and peer support needed to assure recovery without relapse. However, follow-up of residents over a two-year period has not been conducted among Louisiana Oxford House residents and alumni.

The self-run, self-supported Oxford House concept and system of operation is now thirty years old. When the first Oxford House was established in 1975 it was the result of a traditional halfway house closing. The thirteen men living in the halfway house rented the building and set up a system of operation that allowed them to run the house themselves in a disciplined manner. The two biggest differences between the traditional halfway house and the newly formed Oxford House was (1) recovering individuals democratically operated the house themselves, and (2) recovering individuals paid all household expenses including rent to a landlord.

In hindsight, these differences totally eliminated a “we versus. them” attitude between those running the house and those living there. The “we versus them” attitude is usually a part of any group subject to authority and rules of a management group. Inmates in corrections, a hospital, a homeless shelter or a mental institution will develop a common bond among themselves built around complaints about rules, regulations or the exercise of authority. Within a self-run, self-supported Oxford recovery home peers elect their house officials for a fixed six-month term of office. There are five officers within each house and because peers elect them and decisions are made at weekly business meeting the “we versus them” bond is nonexistent. In its place the prevalent common bond becomes achievement of sobriety without relapse.

To assure that the residents of an individual Oxford House are able to enjoy the autonomy of a self-help operation it is essential that Oxford House, Inc. preserve an effective separation between state agencies, funding foundations, treatment providers or correctional official and individual Oxford Houses and chapters. The self-help concept is maintained from the grassroots of individual houses throughout the entire Oxford House organization.

The Oxford House Manual[®] sets out the basic system of democratic operation followed by all Oxford Houses since 1975. It has stood the test of time and can be downloaded as a PDF document from the web site: www.oxfordhouse.org.³ The Oxford House Chapter Manual[®] describes the system of operation used by clusters or groups of individual houses to share their strength, experience and hope with each other. It also can be downloaded. These publications provide the road map for self-run, self-supported operation.

The Oxford House Manual[®] has remained basically the same since it was first published in 1976. In general, it reflects a common sense application of the principles of Alcoholics Anonymous to the everyday practicalities of recovering individuals living together in a disciplined, fair and pragmatic fashion. Oxford Houses stay on track by following the Oxford House standard system of operation set forth in the Oxford House Manual[®] and Oxford House Chapter Manual[®].

³ Click “Publications and Forms” for a download of the Oxford House Manual[®] and Chapter Manual[®] that describes how clusters of individual Oxford Houses provide mutual support to help each other to stay on track.

The residents of each house meet once a week to conduct a democratic house meeting using parliamentary procedures with a definitive structure to enable an orderly process.

Within each house five officers are elected every six months and each has specific duties. A resident can hold the particular office for only six months at a time – a limitation designed to prevent ‘bossism’ from crowding out the egalitarian principles of Oxford House[™].

The table below shows the basic duties and responsibilities of each of the five elected officers:

President

- ◆ •Leads Weekly Meeting
- ◆ •Overall Leadership
- ◆ •Attends Chapter Meetings
- ◆ •Co-signer of checks

Secretary

- ◆ •Takes Meeting Notes
- ◆ •Contacts Treatment Providers
- ◆ •Notifies House Applicants
- ◆ •Monthly reports to OHI

Treasurer

- ◆ •Keeps Checkbook
- ◆ •Pays House bills
- ◆ •Co-signer of checks

Comptroller

- ◆ •Collects Weekly Rent
- ◆ •Audits Treasurer’s Books
- ◆ •Posts weekly payments

Coordinator

- ◆ •Supervises Household Chores
- ◆ •Buys House Supplies
- ◆ •Reports to meeting on chores
- ◆ •Enforces fire safety practices

The weekly business meeting follows parliamentary procedures and regular order. The entire house

discusses issues affecting the group and duties of each officer. Applicants to fill vacancies are discussed and the group takes a vote to approve admission. A super majority vote of 80% approval is necessary to be admitted into membership in the house. Whenever the group suspects that a resident has used either alcohol or an illicit drug, an emergency meeting is called and a vote taken to verify relapse. If a simple majority believes a relapse has occurred, the offending resident must immediately leave.⁴

Self-Help – Heart of Oxford House

Every individual in a house gets an opportunity to gain self-esteem and confidence in the viability of recovery by playing a strong role in the house. The weekly house meeting becomes the focal point of the house operations and group success by the house spills over to every individual in the house. Being able to pay the landlord, the cable TV company, and the electric company each become a building block that underscores the value of sobriety. The individuals working together as team players help each other develop a new way of life. Each Oxford House™ becomes the functional equivalent of a biological family – helping and caring about each other.

The democratic self-rule of the group prevents the “we versus them” division that characterizes the dynamics of a traditional halfway house or other institutions administered by a staff or manager. The peer system of operation changes the common bond among residents from one centered on reacting to institutional authority to one where the bond among residents is the common quest of achieving comfortable sobriety without relapse.

Moreover, the group places behavior expectations on all residents to do chores, carry out responsibilities of office, and to offer recovery support to each other and to live as a well functioning ‘family.’ This cohesive mutual support gives every resident the opportunity to function well without the use of alcohol or drugs. Slowly, but surely, sobriety without relapse becomes a habit. This change partially comes about because residents in an Oxford House gain self-esteem more quickly than recovering individuals not living in an Oxford House.⁵ Majer, and others found that Oxford

House residents in the study reported significantly higher levels of abstinence and self-efficacy than non-Oxford House members attending the same number of 12-Step meetings. Common sense suggests that the family living environment of an Oxford House adds to the confidence in sobriety that is so important for preventing relapse.

Practical experience indicates that most individuals who move into an Oxford House do so because they have no place else to live. Addiction over time has often eroded other living options and applying to live in an Oxford House is sometimes a last resort. Another factor that motivates an individual to apply to live in an Oxford House is a desire to stay sober without relapse. Counselors, judges, or others in recovery have often suggested an Oxford House for a recovering individual.

Independent studies show that Oxford House residents report that the primary reason for choosing to reside in an Oxford House is the fellowship provided and the existence of a structured setting where avoidance of substance use is enforced.⁶ Specifically the survey participants in the study noted above believed that Oxford House differed from other recovery programs they had experienced because it allowed fellowship with similar others, stability in their lives, and sufficient time for change and personal growth. Other studies have shown that residents who stayed in Oxford Houses for longer period of times experienced increases in their sense of community.⁷

In addition to an increase in self-efficacy and a sense of community, the notion of ‘family’ extends to houses helping each other. In Louisiana it has not been uncommon for houses to lend money to each other to take care of unexpected emergencies and together the Louisiana Oxford House Chapters hope to repay loans for some houses that have failed. In many jurisdictions, residents from houses and many local alumni members get together at least annually for workshops, dinner and general get-togethers. In this setting it becomes more like an extended biological family rather than a group of unrelated persons. Alumni and residents from different houses offer each other moral support and friendship.

⁴ Not only is Condition Three of the house charter specific that any resident who relapses must be immediately expelled, but also §2036 of PL 100-690, that authorizes start-up loans from a state recovery home revolving loan fund, requires immediate expulsion.

⁵ John Majer, Leonard Jason and Bradley D. Olson, Optimism, Abstinence Self-Efficacy and Self-Mastery, *Assessment*, Vol. 11 No. 1, March 2004 © Sage Publications

⁶ Jason L. A., Ferrari J. R., Smith B., Marsh P., Dvorchak P.A., Groessl E. K., Pechota M. E., Surtin M., Bishop P. D. Knot E., & Bowden B.S. (1997) An Exploratory Study of Male recovering Substance Abusers Living in a Self-Help, Self-Governed Setting, *Journal of Mental Health Administration*, 24, 332-339.

⁷ Bishop, P.D., Chertok, F., Jason, L.A. (1997). Measuring Sense of Community: Beyond Local Boundaries, *Journal of Primary Prevention*, 18(2), 193-212.

The bonding or extended family behavior arises not only from the common bonds of recovery but also from the common bonds forged through the democratic self-rule inherent in the Oxford House system of operations. Current and former residents of Oxford Houses often take the procedures of self-operation and self-support for granted. However, an objective observer is struck by the disciplined system of operation that underlies the self-operation. As previously noted, each individual has an equal vote in decisions effecting house operations, admissions and expulsions. However, Oxford House, Inc. – the umbrella organization – has an important role to play to assure that the movement within a jurisdiction remains free to determine its own fate. Whenever, a jurisdiction or outside authority attempts to micro-manage the development or operation of a local network of individual houses the concept of self-help is undermined.

Officers carry out their meeting duties by following a very structured format. The Secretary records meeting activities and reports past meeting activity using a standard form and format. The Treasurer reports income and outgo using standard reporting forms and the Coordinator does likewise. Other rituals include the reading of one of the nine Oxford House Traditions at the beginning of each meeting and the Serenity Prayer at the end of each meeting.



Oxford House-Cenla
2304 Elliot Street
Alexandria, LA 71304
Tel. 318-561-7440
9 Men Established Jun 2003

By avoiding a ‘we versus them’ structure Oxford Houses are able to put the focus on recovery. The focus on recovery is within a framework of a disciplined system of operation based on self-help. This disciplined system of operation becomes one of the common experiences shared by alumni and current residents. Storytelling about past meetings and

current problems become a common ground for both present and past members. In the process of storytelling and sharing of experiences the extended family builds upon the value of sobriety without relapse. Along with 12-Step principles, the Oxford House living experience helps to place value on personal achievement of sobriety without relapse.

Most individuals living in Oxford Houses in Louisiana and elsewhere will tell interested observers that sobriety without relapse is something that grows more comfortable with the passage of time. The shared experience makes recovery without relapse the expected norm. In this regard, Oxford House is different from the common perception that addiction is always fraught with relapse.

Oxford House is also different from traditional halfway houses, therapeutic communities or other transitional houses. The self-run and self-supported system of operation puts all the responsibility for operating the house on the residents themselves. The men and women in Oxford Houses in Louisiana rise to the expectations put upon them. They elect officers, hold weekly business meetings, vote new residents into the house, expel residents who relapse and share household expenses to pay all the bills. The blueprint for them to follow is the Oxford House Manual[®] and the Oxford House Chapter Manual[®]. The outreach personnel from OHI and the senior residents and alumni of Oxford Houses provide the guideposts for understanding the practices and procedures that enable the effective self-rule of each Oxford House.

In August 2004, the Louisiana Network of Oxford Houses web page: www.oxfordhousesoflouisiana.org was developed and placed on line. Between August 2004 and June 2005 more than 7,000 hits were recorded. It provides an up-to-date list of current vacancies, shows the picture of each house with a telephone number and map showing its exact location. This tool is available to anyone and clearly many newly recovering individuals are finding a safe place to become comfortable in sobriety without relapse. It is suggested that the Louisiana Oxford Houses ask the state agency to link its web page to the excellent web pages operated by the state agency.

What follows is a profile of the residents living in Louisiana Oxford Houses in June 2004. Where appropriate, Louisiana Oxford House resident characteristics in 2004 are compared to resident characteristics in prior years. Following the profile is a section setting forth the goals for the Louisiana Network of Oxford Houses and the agency.

The 2004 Profile Of Louisiana Oxford Houses And Residents

The World Services Office of Oxford House collects data monthly from each Oxford House with respect to applications, admissions, expulsions for cause and voluntary departures. Resident profiles are obtained using the confidential survey questionnaire designed by the late William Spillane, Ph. D. in his 1988 Evaluation of Oxford Houses. This produces data that can be compared on a year-by-year basis. The house figures below are current as of June 30, 2005. Resident profiles are derived from state surveys conducted June 2004.

Number of Women's Houses:	9	Number of Women Residents:	63*
Number of Houses For Men:	30	Number of Men Residents:	242
National Network of Houses:	39	Total Number of Residents:	305
Average Age:	34.7 years	Age Range::	18 – 62 years
Cost Per Person Per Week [average]:	\$87	Rent Per Group Per Month [average]:	\$1,290
Percent Military Veterans	18%	Average Years of Education	12.9
Residents Working 6/30/04:	83%	Average Monthly Earnings:	\$1,335
Percent Addicted To Drugs or Drugs and Alcohol:	55%	Percent Addicted to Only Alcohol:	45%
Race –		Marital Status –	
White;	77%	Never Married	43.7%
Black;	17%	Separated	10.1%
Asian	01%	Divorced	31.1%
Hispanic	3%	Married	10.9%
Other	3%	Widowed	4.2%
Prior Homelessness:	45.8%	Average Time Homeless:	6 Mos.
Prior Jail:	74.2%	Average Jail Time:	15 Mos.
Average AA or NA Meetings Attended Per Week:	5.6	Percent Going To weekly Counseling <i>plus</i> AA or NA:	39.2%
Average Length of Sobriety of House Residents:	9.6 Mos.	Residents Expelled Because of Relapse:	19.6%
Average Length of Stay In An Oxford House:	13.1 Mos.	Average Number of Applicants For Each Vacant Bed:	4.2

Oxford House Inc.
 1010 Wayne Avenue, Suite 400
 Silver Spring, MD 20910
 Web Site: www.oxfordhouse.org

Oxford Houses in Louisiana Highlights

- **305** Recovery Beds in State
- **57** for Women
- **209** for Men
- State Cost per bed for FY 2004:: **\$1.26** per day
- Average Age: **34.7**
- Monthly Ave. Earnings: **\$1,335**
- Average rent group pays landlords in Louisiana: **\$1,290**
- Average share of household costs per resident: \$87 per week [\$12.42 per day]
- Annual aggregate income of all LA Oxford Residents: **\$4,886,100**
- Louisiana OH residents aggregate FICA tax per year: **\$715,413**
- Average length of sobriety: **9.6** months
- Percent in counseling in addition to AA/NA meetings: **39%**
- AA/NA average meetings per week by LA OH residents: **5.6**

□□□

Profile of Louisiana Oxford House Residents

Age

The average age of Louisiana Oxford House residents in June 2004 was 34.7 years old. This is a little younger than the national Oxford House resident average age of 37.3, but slightly older than it was in 2002 when the average age of Louisiana Oxford House residents was 33.8. The age distribution among Oxford House residents is about the same as in most other states. The following table shows the approximate age distribution of residents in the houses June 30, 2004.

Table 1
2004 Age Grouping of Louisiana Oxford House Residents

19-27	28-36	37-45	46--53	54-62
21%	31%	26%	19%	03%

The average age will tend to be slightly older as time goes by. The longer houses exist there is a tendency for residents to live in the houses longer and therefore at any given time the average age will be a little older.

Resident Income and Expenses

In dollars not adjusted for inflation, average monthly income of residents in 2004 was higher than in 2002.

Table 2
Average Monthly Income Among Louisiana Oxford House Residents

Year	2002	2004
Monthly Income	\$1,237	\$1,335

The average monthly income among the approximately 9,000 residents nationwide is \$1,383 – a little more than monthly income of Louisiana Oxford House residents. This is explained, in part, because nationally 92% of Oxford House residents are employed while only 83% of the Louisiana Oxford House residents in June 2004 reported current employment.

In Louisiana, the average amount each group pays to rent an individual house is \$1,290 compared to a national average of \$1,287 per month per individual house. The average cost of shared household expenses for Louisiana Oxford House residents is slightly less than \$100 a week – well within the area of affordability for residents earning an average of \$1,335 a month.



Oxford House-Windsor

4601 Windsor
Metairie, LA 70001
Tel. 501-304-3490
9 Men, Established Dec 2002

Education

The average educational level of the Louisiana Oxford House residents is 12.9 years with about 13 percent having a college degree. Thirty percent of the residents have not graduated from high school and about 13 percent have some post high school education but not a college degree.

The following table compares the average educational attainment with that of Oxford House residents in several other states.

Table 3
Comparison of Mean Educational Attainment

LA	WA	KS	DC	NC	NJ
12.9	12.6	12.8	13.2	12.5	12.7

Current Sobriety

The current sobriety of Louisiana Oxford House residents is 9.6 months. Based on a sample of 2290 residents from 15 states the weighted average length of sobriety in June 2004 was 17.8 months. The range of Oxford House resident current sobriety ran from 9.6 months for residents in Louisiana to 42.3 months for residents in the District of Columbia. As the average age of houses in Louisiana increases so too will the average length of sobriety for residents living in the houses.

It should be observed that there is a correlation between the average length of current sobriety and the

rate of expansion of Oxford Houses in any geographic area. When Oxford House first arrives in an area, all the houses are newly established houses with most of the residents newly recovering individuals. As a cluster or network of Oxford Houses ages, the average length of sobriety among the residents increases.

A primary feature of the Oxford House concept and system of operation is that residents may live in an Oxford House for as long as they want, provided they stay clean and sober and pay their equal share of household expenses. This open-ended residency in an environment supportive of recovery is one of the reasons that recovering individuals are able to become comfortable enough in sobriety to avoid relapse.

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

- (1) offering the patient a non-chemical substitute dependency for alcohol,
- (2) reminding him ritually that even one drink can lead to pain and relapse,
- (3) repairing the social and medical damage that he has experienced, and
- (4) restoring self-esteem.⁸

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

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

⁸ George E. Vaillant, *The Natural History of Alcoholism Revisited*, Harvard University Press, Cambridge, 1995, p. 300.

crisis. Over the long term, providing alcoholics with pills only reinforces their illusion that relief of distress is pharmacological, not human.⁹

Vaillant does note "self-help groups, of which Alcoholics Anonymous is one model, offer the simplest way of providing the alcoholic with all four components referred to above."¹⁰ The same principle applies to Oxford House. It provides the benefits of prolonged hospitalization without the destruction of self-esteem. In fact, self-esteem is restored through the exercise of responsibility, helping others, re-socialization, and constructive pride in maintaining an alcohol and drug-free living environment without dependency upon any outside authority or helper. As pointed out earlier in this evaluation self-efficacy in reaffirming the value of sobriety is higher among those in an Oxford House environment than for those leaving treatment and taking another path.¹¹

The cost of addiction prior to living in an Oxford House is high and is shown in many ways. The following table showing marital status reflects one of the costs. Nearly half of Oxford House residents had been married but are now separated or divorced. Most of the residents had never been married but for those who had been married many believe that addiction was the primary reason they are no longer married. The June 2004 survey of Louisiana residents showed the following distribution of marital status among the residents.

Table 4
Marital Status 2004 vs. 2002

Marital Status	2004	2002
Single	43.7%	55.3%
Married	10.9%	5.3%
Separated	10.1%	14.0%
Divorced	31.1%	23.7%
Widowed	04.2%	1.8%

As shown above, the distribution of marital status among Louisiana Oxford House residents is about the same in 2004 as in 2002 except a few more widowed persons. In both years the data suggests that most individuals addicted to alcohol and/or drugs do not get married and those who marry tend to divorce or separate.

⁹ Id. 301.

¹⁰ Id. 301.

¹¹ Op. Cit. Majer.

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

Status Prior to Intervention

Prior to the 1960s, it was generally assumed that the alcoholic and/or drug addict would not change behavior until he or she “hit bottom.” Vernon E. Johnson, a minister in recovery himself, popularized the notion that by creating a crisis earlier in the addiction process could raise one’s “bottom”.¹² Today, the criminal justice system is often used to force intervention. The Louisiana Oxford Houses do not yet work closely with drug courts to enable drug court clients to improve their chance of recovery without relapse. Likewise arrest, conviction and jail time can force the alcoholic or drug addict to enter a recovery process.

Among Oxford House residents in Louisiana 74.2 percent have served an average of about 15 months total jail time.

Table 5
Percent of Residents Who Served Jail Time

2004	2002
74.2%	75.7%

The percentage of Oxford House residents having served jail time is consistent with the experience of Oxford Houses in other states and has changed very little in the two years between June 2002 and 2004.

¹² Vernon E. Johnson, *I'll Quit Tomorrow*, Revised Edition, Harper-Collins, New York, 1990

Table 6
State Comparison of Jail Time Served

LA	WA	KS	DC	NC	NJ
74%	81%	78%	58%	77%	80%

Many residents have experienced homelessness during their addiction. The frequency and duration of homelessness is substantial. In the 2004 survey 45.8% of the Louisiana Oxford House residents had been homeless for an average duration of six months. The frequency of homelessness was an average of 2.8 times. Table 7 compares the percent homeless in 2004 with the 2002 survey.

Table 7
Percentage of Homelessness Among Residents

2004	2002
46%	52%

Marital status, prior jail time and homelessness are all indicia of the devastating effects of alcoholism and drug addiction. The indicia confirm that the addiction of residents of Louisiana Oxford Houses is chronic and has progressed to a serious level.

Where one is living just prior to detoxification or treatment immediately preceding moving into an Oxford House confirms the severity of addiction. From the 2004 survey it shows that over 60 percent of the residents were living in a marginal housing situation prior to moving into an Oxford House. Table 8 shows the distribution of place of residence before Oxford House in 2004 and 2002

Table 8
Residence Just Before Oxford House

Place	2004	2002
Owned House	24.4%	35.2%
Apartment	13.5%	19.4%
Rented House	19.3%	12.0%
Rented Room	7.6%	6.5%
Jail	6.7%	6.5%
Mental Hospital	0%	0%
VA Hospital	0%	1.8%
Halfway House	17.7%	9.3%
Homeless	10.9%	9.3%

Notice in the table above that (1) there are about the same percentage of individuals coming directly from jail to Oxford Houses in the 2004 profile than in 2002, (2) homeless, jail and rented room categories are about

the same but halfway house category doubled, and (3) both survey years show a high percentage of residents come from marginal housing situations –homeless up through rented room on the table. Specifically, the percentages from marginal housing environments are: 43% in 2004 and 34% in 2002. Oxford House provides an effective alternative and the addicts with marginal living conditions find that the stability of an Oxford House contributes to recovery without relapse. When individuals successfully move out of an Oxford House, they move into an apartment, a rented house or in a few cases buy a house and become a homeowner.

Racial Composition of Residents

The 2000 United States Census breaks down racial composition for Louisiana as follows: White 63.9%; Black 32.5%; Asian 1.2%; and Other 2.4%. While those categories equal 100%, Census also indicates that 2.4% are of Hispanic origin, which overlaps with the other categories. The questionnaire breaks down racial categories as follows: White, Black, Hispanic, Oriental, and other. Aside from not treating Hispanic as a secondary category to other racial categories the questionnaire uses Oriental rather than Asian. As shown in the table below, the Louisiana Oxford House population under-represents Blacks.

Table 9
Racial Breakdown of Louisiana Residents

2000 Census		2004 Survey	
White	63.9%	White	76.7%
Black	32.5%	Black	16.7%
Asian	1.2%	Asian	1.0%
Hispanic	2.3%	Hispanic	3.3%

A census of Oxford House residents in Louisiana June 20, 2005, identified a total of 26 African-Americans out of a total population that day of 272 residents or about 9.5%. Both in June 2005 and during the survey period of June 2004, the percentage of African-American residents in Louisiana Oxford Houses was too low. Part of this reason may be the way the network of houses developed in the state. Whatever the cause, it is important that the residents in the Louisiana network of Oxford Houses reach out to make certain that the resident population more closely represents the racial make-up of the state. In most states the percentage of African-American population in Oxford Houses is substantially greater than the population of Blacks or African-Americans in the state as a whole.

Throughout the national network of Oxford Houses there the memorable sayings of earlier Oxford House members are repeated over and over. One of those

sayings is “There is not much good that can be said about alcoholism and drug addiction except that they are great egalitarian diseases that are color-blind, class neutral and affect rich, poor and in-between.” Since the first Oxford House began in 1975, not only has there never been a racial problem in any Oxford House, but also Oxford Houses throughout the country have reached out to make certain that minority residents in any location are fairly represented within the local Oxford Houses. In every state – but Louisiana – the minority population in Oxford Houses exceeds the census percentage of the state population by at least 50 percent.

It is recommended that residents of Louisiana Oxford Houses redouble their efforts to assure equal or better minority representation by actively seeking the integration of all individual houses within the state. This action will continue to enable the national Oxford House movement to underscore the true nature of alcoholism and drug addiction as equal opportunity diseases and to celebrate the fact that recovery without relapse is likewise an equal opportunity outcome.

Prior Treatment History

Alcoholism and drug addiction are chronic diseases for which the only effective treatment is total abstinence. Unfortunately, most individuals who go through detoxification and either outpatient or inpatient treatment fail to stay clean and sober. Dr. George E. Vaillant after studying prospectively the Harvard Medical School’s Study of Adult Development, that followed 660 men from 1940 through 1980, found that behavior change takes time, peer support and discipline.¹³

After analyzing data from his lifelong sample, Vaillant writes:

Staying sober is not a process of simply becoming detoxified but often becomes the work of several years or in a few cases even of a lifetime. ... I have found that 10-20 percent never relapse after their first serious request for help; and that thereafter, depending upon the characteristics of the sample, 2-3 percent will achieve recovery each year.¹⁴

Most of the residents of Oxford Houses in Louisiana have a history of repeated relapses but 18 percent of residents were on their first sobriety try. The table

¹³ George E. Vaillant, *The Natural History of Alcoholism*, Harvard University Press, Cambridge, MA 1983. See footnote 12 for a subsequent book written by Vaillant [1995] that followed-up on this initial evaluation.

¹⁴ Id. P. 314

below compares percentages of residents and residential treatment histories among several states.

Table 10
Prior Treatment Record of Oxford House™ Residents
(Percentage)

Number of Sobriety Tries Residential Treatment	LA	WA	KS	DC	NC	NJ
One	18.4	22.0	22.8	21.1	17.8	13.9
Two	24.6	23.3	25.0	23.9	22.8	22.2
Three to Five	42.9	33.6	33.7	30.9	38.0	31.3
Six to Ten	10.5	13.1	11.9	18.3	14.3	20.1
More than 10	03.5	08.0	06.5	05.6	07.0	12.5

More than 60 percent of the Louisiana Oxford House residents had been through residential treatment three times or more before moving into an Oxford House. This is not surprising and is consistent with Vaillant's findings that 'the quality of eventual social adjustment of the recovering individual cannot be reliably assessed during the first two years of abstinence.'¹⁵

Of course, Dr. Vaillant did not have the advantage of being able to study an Oxford House population. The Oxford House population has the advantage of living in a recovery home for as long as it takes for the healing process to assure long-term abstinence and social adjustment to comfortable sobriety.

Recovery Prospects

There is no requirement that Oxford House residents attend 12-Step meetings or attend outpatient-counseling programs. However, Tradition Four of the Oxford House Nine Traditions specifically states:

As an organization Oxford House™ is not part of AA or NA. However, the members of Oxford House™ have found only by being active in AA and/or NA have they found comfortable, long-term sobriety for themselves and the Oxford House™ in which they live.

The tradition of *suggesting*, not mandating, attendance at AA or NA meetings has paid off. Throughout the national network of Oxford House residents go to more than twice as many 12-Step meetings a week than do other 12-Step meeting attendees.¹⁶ Louisiana residents in the June 2004 survey reported attending an average of 5.6 meetings a week. This meeting-going habit not only shows seriousness of the individuals in recovery

¹⁵ Id. P. 313

¹⁶ Every other year AA takes a survey of meeting attendees and the results show that the average AA member attends two meetings a week. Alcoholics Anonymous, GSO, NY, NY

without relapse but also augers well for living a clean and sober life when they move out of an Oxford House. Table 11 compares the meeting-going pattern of Louisiana Oxford House residents with five other jurisdictions.

Table 11
12-Step Meeting Attendance

State	LA	WA	KS	DC	NC	NJ
AA	4.1	2.6	2.9	2.3	2.7	3.2
NA	1.5	1.3	1.0	2.1	3.1	1.9
Combined	5.6	3.9	3.9	4.4	5.8	4.7

Moreover, many of the Louisiana Oxford House residents attend weekly counseling sessions in addition to AA or NA. The June 2004 survey showed that 39.2 percent of the residents attended weekly counseling. Combined 12 Step meetings, counseling and the disciplined living environment explain why current sobriety among the residents was 9.6 months.¹⁷ Sobriety for a recovering alcoholic and/or drug addict becomes a learned behavior that becomes stronger the longer it is practiced. Living in an Oxford House the individual is able to take the time necessary to become comfortable enough in sobriety to avoid relapse or recidivism.

Resident Perceptions of Oxford House

The June 2004 survey asks several questions designed to measure how residents themselves view Oxford House living as a tool for recovery without relapse.

Specifically, residents are asked how important they feel living in an Oxford House is to their own sobriety [Q.16] and whether they would recommend living in an Oxford House to an individual in early recovery [Q.17]. Tables 12 and 13 show the responses of Louisiana residents and those in comparative jurisdictions.

Table 12
Importance of Oxford House Living to Sobriety

Importance	LA	WA	KS	DC	NC	NJ
Somewhat	9.2%	3.2%	1.0%	8.2%	3.2%	4.3%
Moderately	5.9%	4.8%	7.3%	6.8%	3.4%	4.7%
Very	78.2%	89.8%	89.6%	82.2%	91.8%	87.3%
Insignificant	2.5%	1.3%	1.0%	1.4%	0.2%	0.7%
Not Sure	4.2%	1.0%	1.0%	1.4%	1.4%	3.4%

¹⁷ It is anticipated that the average length of sobriety in Louisiana Oxford Houses is at least twice as long as of June 2005 because the average length of time houses have been established has grown.

Table 13
Would You Recommend Oxford House Living to an Individual in Early Recovery?

State	LA	WA	KS	DC	NC	NJ
Yes	96%	97%	99%	99%	93%	96%
No	04%	03%	01%	01%	07%	04%

While the Louisiana Oxford House residents are a little less enthusiastic about Oxford House living than their peers in some other jurisdictions, a substantial percentage find Oxford House very important to their sobriety and 96% would recommend Oxford House to others in early recovery.

That Oxford House living is producing long-term sobriety cannot be doubted. The *average* length of current sobriety among the Louisiana Oxford House residents was 9.6 months in June 2004 and is believed to be more than twice as long in June 2005. There is a saying among Oxford House residents that sobriety is habit forming. For most that saying becomes a reality. Fewer than 20% of the residents who move into an Oxford House in Louisiana are expelled.



Oxford House-Mandeville

3030 Highway 59
Mandeville, LA 70471
Tel. 985-727-1263
8 Men Established Feb 2002

Later this year, DePaul University in Chicago will be releasing the results of a five-year study of Oxford House outcomes compared to a recovery control group that did not live in an Oxford House. It is anticipated that the outcome difference in terms of recovery without relapse will be significant. The 305 Oxford

House recovery beds already established in Louisiana afford the residents of the state a leg up on taking advantage of this cost-effective tool to give alcoholics and drug addicts in recovery the opportunity to master sobriety without relapse.

□□□

Lessons Learned: Goals Sought

The goal of both Oxford House, Inc. – the national umbrella organization for all Oxford Houses – and the state alcohol and drug agency is to have enough Oxford Houses in Louisiana so that every recovering individual who can benefit from Oxford House living has a chance to do so. The establishment of the first 39 or 40 Louisiana Oxford Houses is a good beginning but just a beginning. As the next development phase in the Louisiana network of Oxford Houses begins, it is important to discuss ways and means to improve establishment of new houses and quality maintenance of existing houses.

There are three improvements that can be made to assure more efficient development of additional houses in the state. First, Oxford House, Inc. and the individual Oxford House Chapters in the state need to have greater freedom in location and expansion of new Oxford Houses. Second, better balance between the agency personnel and Oxford House personnel should be developed to preserve the inherent benefits of self-help. Third, ways and means should be developed to enlist greater civic support to reach underserved populations and to increase community tolerance of Oxford House as an important resource for recovery without relapse.

□□□

See the Afterwards following to get an up-date through 2008.

Louisiana Oxford Houses Rebound Post-Katrina

Hurricane Katrina raised havoc in New Orleans and Louisiana throughout the state. It also set back individual Oxford Houses. After it hit the 40 Oxford Houses statewide had been reduced to 28. Those 28 houses not only weathered the storm but were also a strong backbone for rebuilding the network. By 2009, the number of Oxford Houses in the state had increased to 42 together having more than 300 recovery beds. See list inside front cover.

Eleven of the houses serve women and thirty-one serve men. Not only has the network of Oxford Houses in Louisiana been re-established but, the men and women in those houses have reached out to neighboring states to help begin development of statewide networks. They have led workshops in Texas and Oklahoma. They have carried the Oxford House message to Alabama and Florida. In the future, the Oxford House base in Louisiana will lead to the introduction of statewide networks of Oxford Houses in surrounding states.



When the 10th Annual Oxford World Convention was held October 30 through November 2, 2009, the highest award that from Oxford House World Services – the Tom Fellows Award – was given to Michael Duffy, the Assistant Secretary, Office for Addictive Disorders, Louisiana Department of Health and Hospitals. Michael has been a steadfast supporter of Oxford House. Through foul and fair weather his support has been invaluable to the development of a strong network of Oxford Recovery Homes from one end of the state to the other. Over 500 recovering individuals in Louisiana each year are able to live in an Oxford House until they become comfortable enough in sobriety to move out without fear of relapse.

In April 2007 Oxford House-Canal, 122 North Jefferson Davis Parkway, New Orleans [pictured at the left] opened its doors to provide home to 13 men recovering from alcoholism and/or drug addiction. It is but one of the 14 Oxford Houses added to the Louisiana Network of Oxford Houses since Katrina.



The New Orleans Convention

October 30 – November 2, 2008 found more than 600 Oxford House residents and alumni in New Orleans for the 10th Annual Oxford House World Convention.



At the left is Kathleen Gibson, Chief Operating Officer of Oxford House World Services with Admiral Paul Mulloy, Board Member, and Marty Walker, Outreach Coordinator for the State of Louisiana at the head table for the Saturday evening banquet at the New Orleans Hilton Riverside – the convention hotel.

All the men and women living in Oxford Houses across the State of Louisiana made all the convention attendees feel welcome. In the process they strengthened their own sobriety and commitment to the Oxford House goal of establishing enough Oxford Houses to provide all recovering alcoholics and/or drug addicts the opportunity to live in an Oxford House. It is this involvement in helping others and helping the country that holds out great promise for the State and the Nation. It is also this involvement that ties Oxford House residents and alumni together in the belief that they have a close relationship with each other and a high civic responsibility. As the underlying profile of Louisiana Oxford Houses show, the Oxford House concept and system of operation offer the opportunity to greatly expand access to Oxford House and to significantly improve recovery without relapse for drug addicts and alcoholics.

After Words

Epilogue

In August 2005, almost immediately after the foregoing report was published, hurricanes Katrina and Rita battered the state of Louisiana. Oxford Houses of Louisiana did not escape the storms wrath and aftermath. Several houses were flooded and Oxford Houses throughout the country reached out to help the residents in need. Washington state houses, for example, relocated seven men from the afflicted houses. This included paying the transportation costs for the men to get to Washington. North Carolina houses took in several displaced individuals and other houses throughout the national network of Oxford Houses to help their Louisiana family members.

Meanwhile, the Oxford House in Louisiana worked together to rebuild the Louisiana Network of Oxford Houses. As a matter of fact at the next national convention Louisiana Oxford Houses presented a persuasive pitch to have the 2008 Annual Convention in New Orleans. The Convention was scheduled for September 3, 2008. Once again a hurricane tried to thwart the determination of the Louisiana Oxford Houses, but once again it failed. Hurricane Gustav did cause the Convention to be rescheduled but two months later – October 30 – November 2 – found more than 560 residents and alumni in New Orleans for the 10th Annual World Convention at the New Orleans Hilton Riverside in New Orleans.



Friday night awards reception was held on the Creole Queen – a paddle wheeler on the Mississippi where all the Convention attendees enjoyed jazz and great food. The Convention theme “Time for Recovery” underscored the determination of all Oxford Houses to establish enough Oxford Houses so that recovery without relapse becomes the norm – not the exception.

National speakers participated in the 20 breakout panels that examined the latest knowledge about alcoholism and drug addiction, Oxford House and expansion.

Bring People Together for Sobriety



Being clean and sober does not mean that life cannot be enjoyed. Certainly, the New Orleans Convention provided the opportunity to highlight that fun is part of sobriety. The picture above shows Myrna Brown, an alumnus from the State of Washington and Byron Merriweather of Virginia who received the Reggie Midget Award at the Friday night reception.

Federal Drug Czar John Walters gave a keynote address to the General Session of the Convention on Friday afternoon. This was the 7th Oxford House World Convention that Walters had addressed. The recognition of Oxford House by national leaders helps ratify everyone’s belief that Oxford House plays a valuable role in transforming addicted lives from enslavement to freedom. The New Orleans Convention underscored that Oxford House has become an important organization in Louisiana and the Nation.



Oxford House™

1975-2008

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

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

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