

Oxford House 2009 Profile Series

An Evaluation of the Network of Oxford Houses

New Jersey



Oxford House –Providing Time for Recovery

June 2009

Oxford House World Services

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Oxford House, Inc.

Oxford House, Inc. is the umbrella organization of the national network of more than 1,300 individual Oxford Houses. Its central office is located at 1010 Wayne Avenue, Suite 300, Silver Spring, Maryland near where the first Oxford House™ started in 1975.

Oxford House™ is a concept and system of operations based on the experience of recovering alcoholics and drug addicts who learned that by living together in a disciplined, self-run, self-supported home they could help each other to become comfortable enough in sobriety to avoid relapse. The Oxford House Manual® is the basic blueprint that provides the organization and disciplined democratic structure that permit groups of recovering individuals to successfully live together in recovery. All Oxford Houses are *rented* ordinary single-family houses in good neighborhoods.

The national network of Oxford Houses works because the umbrella organization assures the quality of Oxford Houses through a time-tested system of operation, encourages expansion through partnerships with individual state governments, fosters independent outcome research and assures the civil rights of residents to locate in good neighborhoods. Its 34-year old system of operation provides individuals recovering from alcoholism and/or drug addiction with the time, peer support and confidence building skills to become comfortable enough in sobriety to avoid relapse or return to addictive use of alcohol and/or drugs.

Following enactment of §2016 of the Anti-Drug Abuse Act of 1988 – PL 100-690, New Jersey was one of the first states to begin development of a network of Oxford Houses.

Nine of the seventy Oxford Houses in New Jersey today are over 15 years old. This report based on October/November 2008 data collection updates the evidence about who is served by the statewide network of Oxford Houses in New Jersey. It is a follow-up evaluation to the 2007 Evaluation based on 2006 data collection downloadable from the Oxford House website: www.oxfordhouse.org. It also discusses the status of the New Jersey Recovery Home Revolving Loan Fund and recommends faster expansion of the network of Oxford Houses in the state.

Silver Spring, Maryland

June 2009

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** Victor Fritz took office January 2009 and is an ex-officio member of the board.

INTRODUCTION

Oxford Houses are self-run, self-supported houses for persons recovering from alcoholism and drug addiction. The network of Oxford Houses in New Jersey currently consists of 70 Oxford Houses, providing recovery housing for approximately 1,300 residents during the course of a year. Oxford House, Inc., is the umbrella organization for the network of individual Oxford Houses. This report is an update of the 2007 Evaluation Report of the New Jersey Oxford Houses. A copy of that report is available on the Oxford House web site at: www.oxfordhouse.org.

This report presents a profile of New Jersey Oxford House residents and changes in the profile over time. In addition, the report evaluates the effectiveness of the Oxford Houses based on the profile data as well as on independent research. Finally, the report considers how Oxford Houses could be used more effectively in New Jersey in the future.

The profile data are taken from a survey conducted of Oxford House residents in October/November 2008. The survey form has been used by Oxford House, Inc. [OHI] since 1987, when it was developed. The survey provides demographic information about Oxford House residents along with background information on each resident's addiction and recovery. The 2008 survey achieved a 68% response rate. Where appropriate differences are noted between the current and prior data.

The overall status of the New Jersey Network of Oxford Houses is good. The evaluation found positive outcomes – continuous sobriety – for more than three-quarters of the 1,292 residents who lived in the houses during 2008. Nine of the Oxford Houses in New Jersey are over fifteen years old – giving the network of Oxford Houses in New Jersey maturity enjoyed by few other states.

Since returning to New Jersey in 2001, OHI has increased the number of houses from 22 to 70 although more utilization of the NJ Recovery Home Revolving Loan Fund is needed to meet demand. Since the survey was conducted, three houses have been added with start-up funding provided by other houses in the state. One house (in Hamilton, near Trenton) closed at the end of May because the wiring in the house was not up to Oxford House standards and the landlord was unable or unwilling to upgrade it. The remaining men in that house either moved into other living arrangement or to other Oxford Houses in the area.

There is a need for substantially more Oxford Houses in New Jersey than currently exist. The houses had twice as many applicants as could be accepted in 2008. And the applicant pool would have been much greater if there were more active outreach to drug courts, treatment providers and prison re-entry programs.

The advantage of making Oxford House living available to those leaving primary treatment is its proven record of success. A significant percent of Oxford House residents achieve recovery without relapse. The Oxford House program is designed to achieve this result and independent research has documented its success.

Given that individuals in relapse or recidivism currently use most treatment beds in New Jersey (as in other states also), ways need to be found to stop the recycling. Oxford House provides the time and method to achieve this result – one alcoholic and addict at a time. The Oxford House experience has shown that relapse need not – and should not – be considered unavoidable because of nature of the disease of alcoholism and drug addiction. With Oxford House support relapse becomes the exception – not the norm.

Table 1 – New Jersey Resident Profile May 2009

Number of Women's Houses:	14	Number of Women Residents:	106
Number of Houses For Men:	57	Number of Men Residents:	444
Total Network of New Jersey Houses:	71	Total Number of Residents:	550
Average Age:	35.9 Years	Age Range	18 – 62 Years
Cost Per Person Per Week [average]: [Range \$90 - \$145]	\$105	Rent Per Group Per Month [average]: [Range \$1,200 - \$4,500]	\$2,300
Percent Military Veterans	10.1%	Average Years of Education [all residents]:	12.8
Residents Working 10/30/08:	80.3%	Average Monthly Earnings:	\$1,849
Percent Addicted To Drugs or Drugs and Alcohol:	71.8%	Percent Addicted to Only Alcohol:	28.2%
Race –		Marital Status –	
White;	85.3%	Never Married	64.7%
Black;	10.9%	Separated	7.3%
Other	3.8%	Divorced	21.9%
		Married	3.2%
		Widowed	2.5%
Prior Homelessness:	56.4%	Average Length of Homelessness:	7.6 Mos.
Prior Jail:	73.9%	Average Jail Time:	15.5 Mos.
Average AA or NA Meetings Attended Per Week:	4.4	Percent Going To weekly Counseling in addition to AA or NA meetings:	31.2%
Average Length of Sobriety of House Residents:	18.3 Mos.	Residents Expelled Because of Relapse:	19%
Average Length of Stay In An Oxford House:	9.1 Mos.	Average Number of Applicants For Each Vacant Bed:	+2.0

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 above are current as of May 31, 2009. Resident profiles are derived from state surveys conducted in October-November 2008.

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Table 1

Last Treatment	No.
Anderson	1
Archstones	4
ASAP	1
Atlantic City	1
Bergen Pines	4
Bergen	9
Burlington Jail	1
Camden County	3
Caron	2
Carrier Clinic	5
Choices Center	1
Clinton House	1
Clearbrook	1
Crawford	3
Delaware	1
Discovery	30
Eva's Recovery	2
Excel	1
Endeavor	9
Fair Oaks	1
Freedom House	1
Hampton	2
Hanson House	13
Hope Hall	1
Hendricks	9
IHD	6
Integrity House	7
Jail	1
Jersey Shore	1
Kennedy	6
Lakeland	8
Lighthouse	8
Market St	1
Maryville	17
Mattie House	7
Message of	1
New Beginnings	1
New Hope	29
Overlook	2
Post House	6
Recovery Frist	1
Park Bench	3
Princeton	1
Rescue Mission-	1
Salvation Army	4
Seabrook	11
Shoreline	8
Spring House	1
Straight and	11
St. Clairs	4
St.Christopher's	4
Stepping	2
Sunrise	14
Turning Point	14
Westhampton	1
	288

Treatment, Research and Outcomes

Oxford House residents in New Jersey – like Oxford House residents everywhere – generally come to an Oxford House following some sort of specialty treatment – a facility designed to help alcoholics/drug addicts stay clean and sober. Table 1, at the left, shows the last treatment facility that New Jersey Oxford House residents attended before moving into an Oxford House. Only 20% came to Oxford House after their first treatment endeavor – either outpatient or residential. The average number of times New Jersey Oxford House residents had been in residential treatment is 2.6 times – 4.9 times including outpatient treatment.

One can draw the conclusion from this that “relapse is part of the disease of alcohol and/or drug addiction” or that “relapse is a defect in the present treatment system” because it too often fails to provide the support necessary for a recovering individual to become comfortable enough in sobriety to avoid relapse. The experience of Oxford House suggests that the latter conclusion is correct.

Vaillant writes "self-help groups, of which Alcoholics Anonymous is one model, offer the simplest way of providing the alcoholic with the basic treatment components to assure sobriety."¹ 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.

The New Jersey Oxford House data show that the houses serve individuals from a variety of primary treatment providers. As Table 1 shows, the residents came from almost all the treatment providers in the state. In short, Oxford House is the one-size fits all fix for the deficiency in the present treatment system that fails to provide the time and recovery support necessary to assure long-term sobriety without relapse. Oxford Houses provide uniform access and availability irrespective of primary treatment. Most of the residents will stop recycling in and out of treatment. This is different from normal outcomes.

A brief reminder of the relatively poor treatment outcomes for those trying to stop addiction to alcohol and/or drugs follows.

¹ Dr. George Vaillant published his major works on alcoholism in 1983 and 1995 but he had reported significant findings much earlier. At Harvard, Vaillant became head of the longitudinal studies of human behavior involving the Grant group – a large sample [268 men] of selected – beginning in 1937 as sophomores and continuing to 1940 – over their lifetime to measure physical and psychological behavior. For 42 years psychiatrist, Vaillant has been chief investigator and the Harvard studies picked up a core city group and a women’s group to monitor in the same way. The June 2009 issue of Atlantic monthly has a good article about the Doctor and his remarkable data research base. Vaillant is also a non-alcoholic Trustee on the Board of Alcoholics Anonymous – in part because of his work on alcoholism, which is an outgrowth of the longitudinal Harvard and core city studies.



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In 1988, Dr. Arnold M. Ludwig, a professor of psychiatry at the University of Kentucky, reported that eighteen month follow-up studies of alcoholics after treatment showed that about one-half of the alcoholics managed to stay dry for a minimum of three months; about one-third for six months; about one-sixth for twelve months; and less than one-tenth for an entire eighteen month period.² In 1996, the Rand Corporation studied recovery from cocaine addiction and found that one-year after treatment only 13% were still clean and sober. Dr. Vaillant's longitudinal study [now covering 70 years] predicts about a 20% recovery rate – with or without treatment.³

R.J. Goldsmith in *The Essential Features of Alcohol and Drug Treatment* found that six-months after a traditional halfway house stay only 10.9% of male residents maintained sobriety and only 9.5% of female residents remained sober.⁴ By contrast the outcome for residents of Oxford Houses is eight times better than what Goldsmith reports. More than 100 peer-reviewed published research articles about Oxford house financed mostly by NIAAA and NIDA support this fact.⁵

² Arnold M. Ludwig, M.D., *Understanding the Alcoholics Mind*, Oxford University Press, New York 1988, p. 51.

³ George E. Vaillant, *The Natural History of Alcoholism*, Harvard University Press, Cambridge, 1983, p. 300. [when this book was published the study of college men and core city group covered a 42 year period]

⁴ *Psychiatric Annals*, 22, pp. 419-424 (1992).

⁵ www.oxfordhouse.org "Publications/Evaluations/DePaul" contains a list of articles – both from DePaul researchers and others. It is updated monthly.

Recently, *Counselor – The Magazine for Addiction Professionals* published an article about Oxford Houses, which raises a basic question concerning the proposition about alcoholism and/or drug addictions that “relapse is part of the disease.” The article suggests that relapse may be a defect in a treatment protocol that does not include support for recovery maintenance. The authors go on to point out that for the last three decades Oxford House has demonstrated that with adequate post-treatment support the relapse rate can be significantly reduced.⁶

The New Jersey Oxford House data show that the houses serve individuals from a variety of primary treatment providers – almost all the treatment providers in the state. In short, Oxford House is the one-size fits all fix for the deficiency in the present treatment systems. Oxford Houses provide uniform access and availability irrespective of primary treatment and above all Oxford House living is likely to produce recovery without relapse.

The fall 2008 survey collects information to describe the characteristics of those who move into New Jersey Oxford Houses. It also documents the paths to recovery followed by Oxford House residents and reviews the importance of independent research to quantify the behavior change among the residents, its durability and the processes in Oxford House that contribute to it.

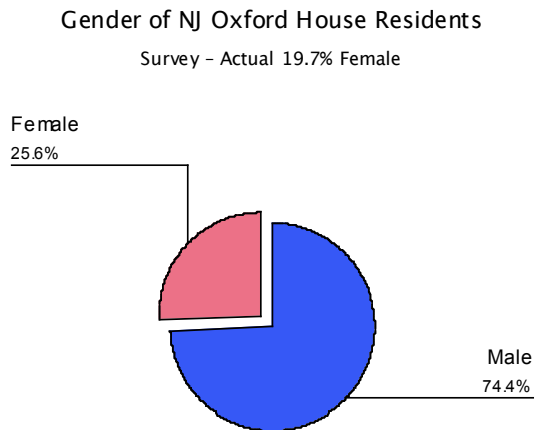
⁶ William L. White and J. Paul Molloy, “Oxford Houses: Support For Recovery Without Relapse,” *Counselor – The Magazine for Addiction Professionals*, Vol.10, No. 2, April 2009.



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New Jersey Oxford House Resident Profile
 [October/November 2008]

There are Oxford Houses for men and for women but there are no co-ed houses. Some of the women’s houses accept women with children. The survey slightly over-represents women in New Jersey Oxford House [25.6% of respondents versus an actual percentage of 19.7% of residents]. The difference is insignificant based on previous surveys and follow-up analysis to verify age and income among the “missing men.”⁷



As pointed out earlier, women are under-represented in New Jersey Oxford Houses when compared to the percentage of women receiving treatment in New Jersey based on the TEDS data. In 2008, about 48,000 alcoholics and/or drug

⁷ The “missing men” were called and questioned on age and income. The result was no change from averages based on the survey questionnaires.

addicts in New Jersey were treated for alcoholism and/or drug addiction – 69.7% males and 31.3% females – yet only 19.7% of New Jersey Oxford House recovery beds are for women.⁸

Overall, 1,292 individuals lived in New Jersey Oxford Houses during the year – about 2.7% of those entering treatment in the state, based on the TEDS data. This group – while small in relation to the total treatment number – is unlikely to relapse or to need primary treatment again. Most Oxford House residents stay in an Oxford House until they become comfortable enough with sobriety to avoid relapse. This evaluation will confirm that Oxford House changes normal recovery outcome from one fraught with relapse to one where sobriety without relapse is the norm. It will also recognize that most individuals coming into Oxford House have a record of repeated relapses. Since Oxford House changes the normal outcome following primary treatment for alcoholism and/or drug addiction, the evaluation will also raise the question of how many Oxford Houses might be the necessary to achieve a “tipping point” to make treatment more effective.

The twelve-month turnover of recovery beds in New Jersey is shown below in Table 2.

Table 2
 12-Month Turnover March 2008 to March 2009

Month	Applications	Admissions	Number Leaving House		
			Vol.	Relapse	Other
Mar.	104	67	27	19	10
Apr.	99	54	23	27	11
May	109	69	18	29	12
Jun.	105	58	27	37	4
Jul.	89	60	18	36	9
Aug.	118	69	25	24	11
Sep.	108	66	29	25	13
Oct.	141	72	26	20	17
Nov.	121	70	21	24	21
Dec.	109	69	24	30	15
Jan	98	54	24	31	15
Feb	92	54	18	14	16
TOTAL	1293	762	280	316	154

During the 12-month period, 1,292 individuals lived in the New Jersey Oxford Houses – 550 at the start of the period and 762 entering during the period. 24% of those relapsed – about 5 points higher than

⁸ While 48,000 in New Jersey went in treatment during the year, only 32,000 completed the treatment. The percentage for male and female is based on those in treatment rather than those who “completed” treatment.

the national average among Oxford House residents but still only about a quarter of “normal” outcome.⁹



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Based on the survey sample of more than 300 residents in New Jersey Oxford Houses, the average number of times residents had been through treatment is 4.9 times. Men had been through treatment slightly more times than women [5.02 versus 4.5] but both genders showed recycling. Looking at just residential treatment, the recycling factor is just as pronounced – an average of 2.62 times [men 2.64 – n 228; women 2.57 – n 80]. As a result of living in an Oxford House, close to 80% of these individuals will stay abstinent and stop recycling in and out of either outpatient or residential treatment.

If the Oxford House option were more readily available, fewer alcoholics and/or drug addicts would relapse following primary treatment. The question is how many Oxford House recovery beds are needed to significantly shift the present treatment outcome statistics? We do not know but we do know that not every person going through treatment needs the additional recovery support provided by Oxford House living. Our belief is that there is a point somewhere between the present supply of 543 New Jersey Oxford Recovery beds and having an Oxford House recovery bed available for everyone going through treatment that is the tipping point that would change the culture of recovery from alcoholism and/or drug addiction

⁹ Nationally the relapse rate in Oxford House is about 19% and has stayed within 1% of that level for the last twenty years. The NIDA sponsored DePaul study that followed 897 individuals for 27 months – in an out of an Oxford House – found 13% relapsed. [Jason et. al. *The Need for Substance Abuse Aftercare: A Longitudinal analysis of Oxford House, ADDICTIVE BEHAVIORS* 32 (2007) pp. 803-818] Downloadable: www.oxfordhouse.org “Publications/Evaluations/DePaul”

from one where relapse is expected to a culture in which relapse is the rare exception.

About 42,000 individuals will complete primary treatment this year.¹⁰ The present level of Oxford House recovery beds [543] in the NJ serves about 1,300 individuals during a year. The fortunate few [3.1%] who get into an Oxford House will do well – 76% become comfortable enough sobriety to avoid relapse. Our hypothesis is that at 2,200 recovery beds [serving about 5,200 or slightly over 12% of those in treatment] would be a tipping where sobriety without relapse becomes the norm. The only way to test that is more development and honest assessment of treatment outcomes.

Some will suggest that there are many ways to strengthen the recovery movement short of developing a network of self-run, self-supported Oxford Houses. It is not the purpose of this evaluation to be critical of any efforts to help recovering individuals to stay clean and sober in many other ways – whether drop-in centers, mentoring efforts or more intensive 12-step or group therapy efforts. However, our experience has been that only Oxford House seems organized in a way to provide the time and peer support likely to produce recovery without relapse. Moreover, only Oxford House has the ability to collect the data essential for meaningful evaluation.

Some individuals completing primary treatment are able to become comfortable enough in sobriety to avoid relapse by regularly attending AA/NA meetings following formal treatment. However, many need more recovery support. Oxford Houses provide that additional support by providing a place to live where recovery is the center of everything. Not only is the living arrangement focused on sobriety but it is different from the living arrangement that was associated with addictive use. Often this change is important because the addictive living environment may have created tension among family members or loved ones. It is not uncommon for counselors to hear from returning clients that he or she had relapse because the tension was so great at home. “My family just didn’t trust me so I finally drank, “ is one of the most common reasons that a person in recovery who has returned to drinking will give following the relapse.

¹⁰ TEDS 2006 Data Set SAMSHA – May 2009 [See also section in this evaluation on TEDS data – pages 18-19.]

Status of New Jersey Recovery Home Revolving Loan Fund

When OHI was in New Jersey the first time [1990-1995], 32 Oxford Houses were funded from the New Jersey Recovery Home Revolving Loan fund [a \$100,000 fund administered for the state by OHI]. The performance of all the original houses started by the fund was remarkable – every house repaid its \$4,000 start-up loan by making payments of \$170 a month without missing a payment. [See the 2007 Evaluation downloadable from the website: www.oxfordhouse.org under “Publications/Evaluations/States”.] Table 3 below is a snapshot of the fund at the end of June. Since OHI resumed activity in New Jersey in 2001, the \$100,000 fund has loaned out \$255,350 [65 loans] and \$233,672 has been repaid. The fund has not made any new loans for the last 18 months.

Table 3 – Current Status of NJ Recovery Home Revolving Loan Fund

House Name	Loan	Payment	Date	Repaid	Balance	Status
Oxford House - Barrington	\$3,000	\$84	6.19.09	\$2,155	\$845	Closed
Oxford House - Cardinal Court	\$3,100	\$170	6.19.09	\$3,100	0	Open
Oxford House – Clairmont	\$4,000	\$170	6.19.09	\$3,060	\$940	Open
Oxford House – Conover [West]	\$4,000	\$50	6.19.09	\$2,000	\$2,000	Closed
Oxford House – Cuyler	\$4,000	\$170	4.02.09	\$1,350	\$2,650	Closed
Oxford House – Edison	\$4,000	\$50	6.19.09	\$2,620	\$1,510	Closed
Oxford House – Gloucester City	\$4,000	\$50	6.19.09	\$3,160	\$840	Closed
Oxford House – Islen	\$4,000	\$50	6.19.09	\$2,090	\$1,910	Closed
Oxford House – Kickapoo	\$4,000	\$85	6.19.09	\$1,870	\$2,130	Closed
Oxford House – Magill Ave.	\$4,000	\$50	6.19.09	\$2,620	\$1,380	Closed
Oxford House – Morristown	\$3,600	\$170	6.19.09	\$3,440	\$160	Open
Oxford House – Peachfield	\$4,000	\$170	6.19.09	\$2,830	\$1,180	Open
Oxford House – Roosevelt	\$4,000	\$85	6.19.09	\$1,285	\$2,715	Closed
Oxford House – Route 527	\$4,000	\$170	6.19.09	\$4,000	\$0	Open
Oxford House – Veranna	\$1,800	\$170	6.19.09	\$1,700	\$100	Closed
Oxford House – Vineland	\$4,000	\$170	6.19.98	\$1,802	\$2,198	Open
Oxford House – West Orange	\$4,000	\$170	6.19.09	3,830	\$170	Open
Oxford House – Willingboro	\$4,000	\$170	5.19.09	\$2,250	\$550	Open
Summary of Fund [Exclusive of Bank Charges]			Cash	Receivables	Total	
[As of June 30, 2009]			\$78,216	\$21,278	\$99,494	

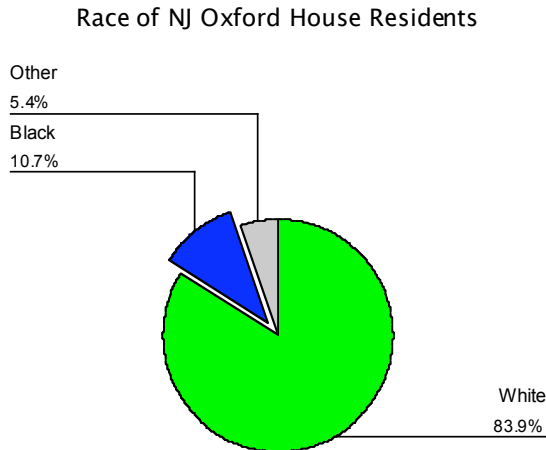
When OHI re-entered the state in 2001, the number of houses had declined from 32 to 22 and the loan fund was re-instituted to provide start-up loans. Between 2001 and 2006 the loan repayments were not as good as during the earlier period. OHI used the same coupon books and attempted to collect the monthly repayments but with less success. The agency froze new loans beginning in 2007. There have been no new start-up loans made from the fund during the last 20 months.

Once the state and OHI realized that many houses were falling behind in loan repayments, OHI changed the collection system to using monthly electronic transfer from the house’s checking account to OHI for deposit in the NJ Recovery Home Revolving Loan fund collections improved. Today every house is up to date as the June repayments shown in Table 2 illustrate. Notice that where a house status shows “Closed” other houses in the chapter have assumed responsibility for repaying the closed house loan obligation. Eight of the houses listed in Table 3 are still open and, while 10 of the houses are closed, the chapters are repaying the closed house loans. All repayments are made by monthly electronic transfer and, while chapter repayments are for various amounts, the open house repayments are all at a rate of \$170 per month.

It is recommended that the revolving loan fund again begin making new start-up loans. Not only is there a need for additional houses in the state but the establishment of additional houses also significantly affects the morale and enthusiasm among residents of existing houses. In short, on-going expansion provides a level of enthusiasm among residents of existing Oxford Houses that improves chapter organization and the effectiveness of every Oxford House.

Oxford House Residents – Race

It is important to have an accurate profile of Oxford House residents to verify that the program reaches a representative group of the recovering population.



With a population of about 8.7 million, New Jersey has a White population of 74.1%, a Black population of 12.4% and 13.5% of the population of other race.

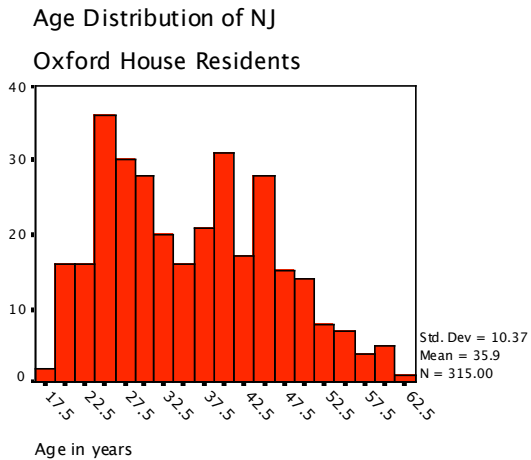
As in the 2007 evaluation, the percentage of White New Jersey Oxford House residents is higher than the White population of the state – 83.9% versus 74.1%. The Black Oxford House population in New Jersey is 10.7% versus an overall Black population in the state of 12.4%.

The TEDS data show that 71.3% of individuals receiving treatment in New Jersey were White and that 25.1% were Black. From the primary treatment perspective, the percentage of Blacks in treatment is twice the Black share of the state population. While the racial composition of NJ Oxford Houses is closer to the racial composition of the state as a whole, it nevertheless is under serving Blacks.

The most obvious reason that the Oxford House population is slightly more White than the state as a whole is that most houses are located in predominately white geographic areas of the state. Development of more Oxford Houses in Northern New Jersey [Bergen, Essex and Union Counties and Newark] would result in a racial balance among residents that more closely reflects the population of the state.

Oxford House Residents – Age and Sobriety

The average age of New Jersey Oxford House residents is 35.9 with a range from 17 to 68.¹¹ Men average a year older than women [36.2 versus 35.2] but both men and women in New Jersey Oxford Houses average about two years younger than Oxford House residents in other states. The average length of sobriety of overall is 18 months. Women average 13.9 months and men average 19.8 months. Slightly over 30% of all residents have less than six months sobriety.



Among the New Jersey Oxford House residents are a handful of men [3] who have more than 10 years of sobriety with more than 5 years in the particular Oxford House in which they are now residing. Long-term residency adds stability to the statewide network of houses and suggests looking at “old-timers” in greater detail in some future analysis.

In connection with long-term sobriety, it should also be noted that the DePaul studies have uniformly shown an extremely high sobriety without relapse for those who live in an Oxford House six months or more. Almost all of the relapses during the March 2008 to March 2009 period were individuals with less than six months residency in a house. In Table 2 all but 5 of the 316 who relapsed had less than six months in a house.

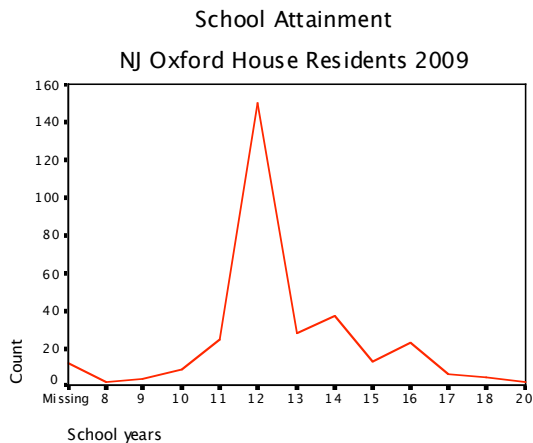
There is no statistical relationship shown between age and length of sobriety. While the average age is 35.9 years, the distribution of ages includes clusters of those in the twenties, thirties and forties.

¹¹ The average age in prior 2006 survey was 36.4 – just a little older.

Within each age group sobriety depended upon the length of time living in an Oxford House. Oxford House living seems to contribute to abstinent behavior irrespective of age, previous times in treatment, prior incarceration, prior homelessness or dual diagnosis [addiction plus a mental illness]. This is in conformity with the findings of the DePaul research group in a variety of studies as discussed earlier under Oxford House and Modern Research.

Educational Attainment

The average educational attainment of the New Jersey Oxford House residents is 12.8 years [range grade 8 to post college graduate]. Those not having a high school diploma constitute 13 percent. Those with a college degree or better constituted 4.3 percent. The graph below shows the distribution.

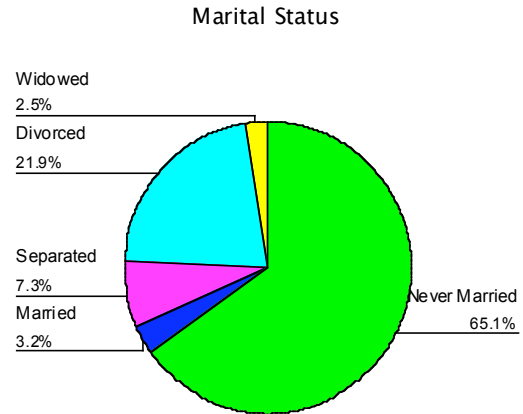


There is no significant relationship between educational level, age, race, income or number of times through treatment. Women had a slightly greater educational attainment than men – 13.04 years versus 12.74 years. The mean educational level of all New Jersey residents was about the same as the educational level among Oxford House residents nationally – 12.8 years versus 12.56 years.

The survey did not elicit information about whether or not those without a high school diploma were working toward getting a GED. However, in other states about half of this population does so. In the next year, Oxford House will develop a program for New Jersey Oxford Houses to at least make information available about the value of GED programs. We will reach out to find supportive links for continuing education to help individuals with a high school diploma to get a GED.

Marital Status

Alcoholism and drug addiction take a toll on marriage. Among New Jersey Oxford House residents about 30% of residents are either divorced or separated. Only 3% are currently married.



Two-thirds of the New Jersey Oxford House residents have never been married – just as in the 2006 survey. The divorced and separated percentages were also about the same. In both surveys the marital status of New Jersey Oxford House residents is similar to the marital status of Oxford House residents in other states.

Employment and Income

Since the residents of each house share the expenses of operating an Oxford House, most residents work to earn money to pay their equal share of household expenses. The average equal share of household expenses in New Jersey Oxford Houses is \$105 a week with a range of \$90 to \$150 a week. At any given time, most of the residents will have a job, but some will be looking for work or have income from unemployment insurance, Social Security, veteran’s benefits or other retirement income.

Those receiving veteran’s benefits, Social Security or other retirement income will do volunteer work related to recovery such as working on the call in desk for 12-step programs to avoid the problem of just sitting around the house watching television. The house membership as a whole decides on the type of volunteer work a resident on income maintenance should do by discussing the matter with the resident during a regular house meeting. The belief is that no one should just sit around and watch TV.

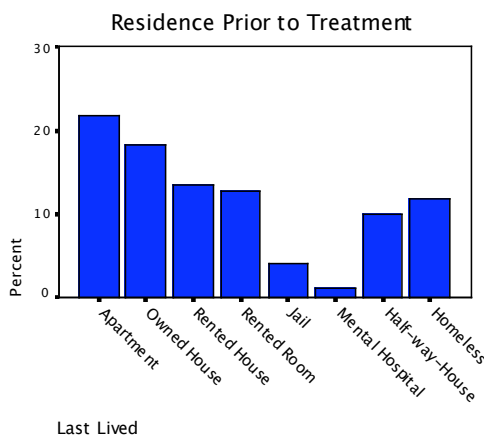
Most of the residents work. The following graph shows the percentage of residents employed when the survey questionnaire was completed.



The average income for the residents of the New Jersey Oxford Houses is \$1,849 a month – range \$550 to \$6,600. This income is adequate for each individual to pay his or her weekly share of household expenses that averages \$105 a week for residents of New Jersey Oxford Houses [range \$90 – \$145 a week].

The average monthly income in October-November 2008 was only \$49 a month more than it was in the 2006 survey. The income of New Jersey Oxford House residents in aggregate is substantial – \$12,203,400 during the last 12 months.¹² That income generates \$1,787,798 in FICA taxes – the payroll tax to finance Social Security and Medicare [7.65% of income on both employee and employer].

Prior Residence



When one looks at where an individual resided prior to treatment immediately preceding moving into an Oxford House, the last five categories shown in the graph above could be considered marginal housing – rented room, jail, mental hospital, halfway house or homeless. But for Oxford House, it can reasonable be concluded that these individuals would return to marginal living conditions.

Among the New Jersey Oxford House residents, 43% had marginal living conditions just prior to their last treatment episode. The 57% with non-marginal living conditions were: 21.8% apartment, 18.3% owned house and 13.6% rented house. There is no statistical relationship between length of sobriety and where a person lived prior to treatment leading to an Oxford House.

If one were to consider the individuals living in an owned house [18.3%] as the most stable in terms of middle class achievement, it is interesting to note that a fairly large number of such individuals live in a New Jersey Oxford House. [About 100 individuals at any one time; around 240 during the course of a year.] This data, along with educational attainment, is at least circumstantial evidence that that there is a mix of “has beens” and “never weres” that is probably greater than one would find among the population of traditional halfway houses. While there are no studies measuring the socio-economic integration of Oxford Houses – independently or compared to other recovery housing – it is our hypothesis that this integration helps all residents to adjust to living a productive life associated with sobriety that is comfortable enough to avoid relapse. It is also our belief that those who owned homes and were middle class are unlikely to go to a traditional halfway house.¹³

Homelessness is the most marginal of the marginal living situations. While only 12% of the New Jersey Oxford House residents had been homeless immediately preceding their last treatment experience, 56.4% had been homeless at sometime during their addictive use for an average period of about 7.6 months. Of those who had been homeless the average number of times homelessness occurred was 2.6.

¹² The aggregate FICA tax is slightly overstated because a few of the residents have social security or pension benefits but it certainly is assured because everyone with less than \$102,000 a year [the current FICA income cap] pays tax on total income.

¹³ In a small sample [8] of personal interviews some who were homeless had in the past “owned homes” but had hit a low bottom. They had been to traditional halfway houses. None of those who had lived in their “owned home” had ever considered a traditional halfway house.

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