Oxford House –
Together We Can

Commemorative Program

11th Oxford House World Convention
Hyatt Regency Washington – On Capitol Hill
September 3-6, 2009
## Oxford House World Convention

### Convention Schedule

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<th>Time</th>
<th>Friday</th>
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| 7 AM – 8:30 AM | Continental Breakfast  
- Reminder – World Council Nominations Due by Noon | Continental Breakfast  
- Voting until Noon for World Council By Houses Attending Convention | Continental Breakfast  
7AM – 8:15 AM  
[General Session Begins at 8:15AM – Closes at 9:45AM] |
| 8:15AM – 9:30AM | **First General Session**  
- Invocation Msgr. Eddie Tolentino  
- Welcome: Paul Molloy  
- **Dr. Westley Clark**, CSAT, Keynote  
- Election Process: James McClain | **Third Breakout Panels**  
1. Psychiatric Co-morbidity  
2. Getting Jobs in Early Recovery  
3. Review of Women’s Conf.  
4. Ethics for Workers in the Field  
5. Chapters and State Associations | **Closing General Session**  
- Remembrance of Members Who Have Died  
- Tradition Renewal – Alumni and Current Members  
- Conference Summary  
- Closing Remarks |
| 9:30AM – 10:45AM | **First Breakout Panels**  
1. Why Behavioral Research Matters  
2. How State Agencies Allocate Resources  
3. Drug Courts & Incarceration Alternatives  
4. Veterans, Recovery & Oxford | **Fourth Breakout Panels**  
1. Ex-offenders and OH Research  
2. Drug Court Operation  
3. Discrimination under FHA  
4. Recovery-Oriented Systems of Care  
5. Replication of Houses |  |
| 11:00AM – 12:15PM | **Second Breakout Panels**  
1. Veterans and Active Military Research  
2. Educating the Public & Leaders  
3. Homelessness: Jobs & Recovery  
4. State Agencies working with OH | **Fifth Breakout Panels**  
1. Housing Ethnic Differences  
2. Prison Re-Entry  
3. Getting OH Data Recorded  
4. Medications in OH |  |
| 12:15PM – 2:00PM | Luncheon on Your Own  
[Petitions for Oxford House World Council election to be turned in by 12:45 PM.] | Luncheon on Your Own [AA/NA meetings at hotel]  
Alumni Lunch; Get Tickets |  |
| 2:00PM – 4:15PM | **Second General Session**  
Welcome: Vincent Gray, DC Council  
- Keynote: A. Thomas McLellan, Deputy Director, ONDCP  
- Eligible Nominees for World Council give 3 minute speeches | **Third General Session**  
- Speaker A.J. Adams  
12-Step Author  
- Recognition of New World Council Members  
- Vote on Resolutions |  |
| Evening | CRUISE ON THE POTOMAC  
- 5:00 to 6:00 Invocation and Awards  
- 6:00 Buses leave hotel  
- 7:00-9:00 Cruise | Banquet at Convention Hotel  
(6:00 – 8:30)  
- Invocation  
- Dinner  
- Dennis Wholey, Speaker  
- Awards  
- Dance; 9:00PM – Midnight |  |

**Meeting Rooms:** General Sessions: Regency A Ballroom  
Panels #1 Columbia A; #2 Columbia B; #3 Valley Forge #4 Yorktown #5 Regency A

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**Oxford House – Together We Can**

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Welcome

Oxford House, Inc.
11th Annual World Convention

September 3 – 6, 2009

As Mayor of the District of Columbia, it is my pleasure to extend a warm welcome to Oxford House, Inc., on the occasion of your 11th Annual World Convention.

This event will afford an opportunity to discuss issues of concern that impact group recovery homes and individuals who are affected by alcohol and drug addiction. As you take this opportunity to reflect on your past accomplishments, I extend an invitation for each of you to visit our monuments, museums and diverse neighborhoods, and eat in our fine restaurants.

On behalf of the residents of the District of Columbia, you have my best wishes for a productive and enjoyable event.

Adrian M. Fenty
Mayor, District of Columbia
Welcome to the 11th Annual Oxford House World Convention. Oxford House has come a long way since the first self-run, self-supported Oxford House started in 1975. Today there are more than 1,350 houses. Last year we gathered in New Orleans to celebrate. This year we gather in Washington, DC to motivate ourselves – and our Nation – to redouble efforts to alleviate alcoholism and drug addiction by thinking about ways to achieve what many believe is an impossible dream – elimination of the demand for illegal drugs and elimination of recidivism by recovering alcoholics and drug addicts. We have come to believe that Oxford House is a sure path to recovery without relapse. We also know that the cost-effective nature of Oxford House means it can be scaled up at minimal cost to enable every addict in the country to get clean and sober and stay that way.

We know that, for alcoholics and drug addicts in recovery to stay clean and sober, it takes behavior change, peer support and time. Oxford Houses provide the discipline to change behavior, and the peer support and time necessary for the recovering alcoholic and drug addict to become comfortable enough in sobriety to stay clean and sober forever. What if we figured out how to establish as many Oxford Houses as needed to serve all the alcoholics and drug addicts in our nation? First, the bad guys profiting from supplying illegal drugs would have to look for a new job. Second, 25 million Americans afflicted with alcoholism and drug addiction would stop hurting themselves, their families and their communities. Third, the effectiveness of every treatment provider in the country would increase five-fold as individuals went through treatment but once rather than two, three, four, five or more than ten times through treatment. Fourth, easy money for terrorists, thugs and other bad guys would dry up. Fifth, all Americans could take pride in extending freedom abroad by enabling freedom to so many at home.

How we get from here to the there is at the heart of this year’s convention theme – “Together We Can.” Start with imagining what if every existing Oxford House started an additional house once each year? At the end of five years, there would be 40,000 Oxford Houses. The very next year there would be 80,000 houses with more than 640,000 beds – enough to serve more than 60 percent of those who go through formal treatment each year.

We know that, while it is important for Oxford House to be self-sufficient, we must be humble enough to realize that we need to work together with everyone else interested in recovery from alcoholism and drug addiction in order to expand sufficiently to meet the need. Oxford House can make the crucial difference for recovering alcoholics and drug addicts and we need the help and support of all organizations and individuals who want to help. “Together We Can” is not an empty slogan but a realization that we need a lot of help to establish enough houses to help all who need recovery support sufficient to avoid recidivism.

As we gather in Washington, DC for our 11th Annual World Convention, it is a good time to look back at our organization’s success, to affirm the aspirations we have for our organization and to honestly measure where we are at this point in our history. Like AA and NA, we can sum up many Oxford House milestones with slogans that have meaning because of progress. The first Oxford House World Convention ten years ago in Washington, D.C. asked the simple question: “If Not Us, Who?” The next year in Kansas City, Missouri we emphasized “Recovery Without Relapse.” In 2001, back in D.C., the theme was “If Not Now, When?” Then we went to Seattle in 2002 where the convention theme was “Changing the Culture of Recovery.” Back in
DC the next year, our group summed up our mission: “Recovery, Responsibility, Replication.” In 2004, San Antonio hosted our convention and our focus was “Back to Basics.” Then, in 2005, in Alexandria, the theme was “Family, Fellowship, Freedom.” In 2006 in Wichita it was time to recognize that Oxford House had “Come of Age.” The 2007 convention in DC speculated with the question “What If?”, and, in New Orleans last year, Oxford House emphasized “Time for Recovery.”

This year – as President Obama starts his new Administration – the Oxford House family borrows the theme “Together We Can” knowing that the growth of the network of Oxford Houses from 18 houses in 1989 to nearly 1,400 today has depended upon teamwork – working together to establish new houses, new chapters and state associations. It has also involved reaching out to share the concept and system of operation with recovering alcoholics and drug addicts throughout the world. It is significant that Oxford House—Good Hope has just been established in Ghana and Byron Merriweather has just returned after getting the house started. Together We Can – expand Oxford House to afford every recovering alcoholic and drug addict the opportunity to become comfortable enough in recovery to avoid relapse.

Paul Molloy, Founder and CEO

Father Martin – Alcoholic
By Paul Molloy

In recovery there are some individuals who we all feel we know as close friends because they have shared with us the knowledge they learned in overcoming addiction to alcohol or other drugs. Father Joseph Martin was such an individual. All of us in recovery either knew him personally or felt we did because of “Chalk Talk” – either the book or the various videos of the dedicated priest teaching everyone about the mysterious but awful progression of alcoholism.

In 1970, Father Martin reached out to Mae Abraham, a woman he met through A.A., and with her and her husband’s encouragement, he made the decision to work in the field of recovery. He became a lecturer and educator in the Division of Alcohol Control for the State of Maryland, conducting seminars for doctors, lawyers, parole officers, and social workers. In 1972, the United States Navy filmed “The Blackboard Talk,” which they then dubbed “The Chalk Talk.” It became known throughout the U.S. military and established Father Martin as a recognized leader in the addiction treatment field.

The late Mike Deaver, who spoke at the 2003 Oxford House World Convention at the Omni Shoreham in Washington, became sober at Father Martin’s Ashley near Havre de Grace, Maryland. All had the additional opportunity to see Father Martin, who year after year shared his strength, experience and hope arising from his recovery from alcoholism. On March 9, 2009 at age 84, Father Martin died.

Father Martin pushed “graduates” of his program to move into an Oxford House. We shall all miss his common sense, dedication to recovery, and support for the self-run, self-supported recovery support of Oxford Houses.
11th Annual Oxford House Convention
Hyatt Regency Washington On Capitol Hill
Washington, DC

September 3 - September 6, 2009
Thursday, September 3rd

Annual Oxford House Golf Tournament 8:00 AM Start

This is the 11th Annual Oxford House Golf Tournament. It starts at 8:00 AM at the Langston Legacy Court, 1900 Benning Road, Washington DC. It is held in conjunction with the annual world convention both for the enjoyment of the participants and to underscore the fact that recovery without relapse enables all recovering individuals to enjoy all aspects of life. Players will meet at 7:00 AM in the hotel lobby to get rides to the golf course.

This year’s event will be held Thursday, September 3, 2009 at the Historic Langston Legacy Golf Course. The course opened in June 1939 with only nine holes and remained so until 1955, when the course was completed as planned. The beginning holes of each nine are laid out in a northerly to northeasterly direction. The length of the course is 6,652 yards (3,226 yards on both front and back nines). Typical course hazards are man-made sand traps and natural water hazards. It is noted for some challenging dogleg holes. A driving range is located at the far southeast corner of the area and is set off from the course itself. The course retains most of its historical layout.

Registration begins at 7:45 am, with tee-off at 8:30 am. The cost for this event is only $85. This price includes 18 holes of golf, riding cart, lunch and various door prizes and awards. There will be an awards presentation directly after golf at The Langston Legacy Golf Course with catered lunch provided under the tent.

Registration 1:30 PM – 8:00 PM
Regency Foyer

Women's Pre-convention Conference 3:00 PM – 9:00 PM
Columbia A

World Council Meeting 9:30 PM – 10:00 PM
Olympia

AA Meeting 9:30 PM – 10:30 PM
Congressional A

NA Meeting 9:30 PM – 10:30 PM
Congressional B

Candidates for World Council should pick up nominating petitions at Registration Desk. Nominating petitions must be turned in by noon on Friday. Resident member candidates need signatures from residents representing five different houses. Alumni candidates need signatures from five alumni members.
Friday, September 4th

Continental Breakfast 7:00 AM - 8:15 AM
Regency Foyer

Opening General Session 8:15 AM - 9:30 AM
Regency Ballroom

Invocation by Monsignor Eddie Tolentino, Pastor of Saint Michael the Archangel Roman Catholic Church in Silver Spring, Maryland will officially open the 11th Oxford House World Convention. Paul Molloy will provide an overview of the convention and set the convention theme: “Oxford House - Together We Can”. James McClain will welcome the delegates on behalf of the Oxford House, Inc. Board of Directors and describe the process for the election of World Council Members.

Keynote Speaker: Westley Clark, M.D., JD, M.P.H., CAS, FASAM
Director Center on Substance Abuse Treatment

Dr. Clark, Director of the Center for Substance Abuse Treatment [CSAT] is making his ninth presentation to an Oxford House World Convention. He has held his job during the Clinton, Bush and Obama Administrations and is a nationally recognized leader in treatment for alcoholism and drug addiction. During his tenure he has changed the public perception from an expectation of an instant fix for alcoholism and/or drug addiction by treatment to the reality that recovery from addiction is a process that takes motivation, time and behavior change. Dr. Clark recognized early on that Oxford House provided the organized opportunity for recovery to take hold. Oxford House residents and alumni return their respect for Dr. Clark.

First Breakout Panels 9:30 AM - 10:45 AM
Columbia A Why Behavioral Research Matters
Columbia B How State Agencies Allocate Resources
Valley Forge Drug Courts and Incarceration Alternatives
Yorktown Veterans, Recovery and Oxford House

Second Breakout Panels 11:00 AM - 12:15 PM
Columbia A Oxford House: Veterans and Active Military
Columbia B Educating the Public and Political Leaders about Recovery
Valley Forge Homelessness, Jobs and Recovery
Yorktown State Agencies Working With Oxford House

Lunch and AA/NA Meetings 12:15 PM - 1:45 PM
Lunches available for purchase in Lobby or Neighborhood
AA in Congressional A NA Congressional B
Second General Session

Regency Ballroom

♦ Welcome to DC from Vincent Gray, Chairman DC City Council

♦ Keynote by A. Thomas McLellan, Ph.D., Deputy Director of ONDCP

Dr. Tom McLellan – the new “Deputy Drug Czar” – is one of the leading scientists observing, analyzing and evaluating ways and means for alcoholics and drug addicts to achieve sobriety without relapse. In short, he has been the man who designed the modern tools for identifying an addict and providing him or her with an effective path to recovery.

Dr. McLellan, has been involved in some of the most important addiction research in recent decades, including the development of the Addiction Severity Index and studies comparing addiction with other chronic health conditions. Most recently, he headed the Treatment Research Institute at the University of Pennsylvania.

Dr. Robert DuPont – a good friend of Oxford House and the first director of NIDA – had the following to say about McLellan’s appointment by President Obama.

The nomination of Tom McLellan Ph.D. to be Deputy Director of ONDCP is the most important White House appointment for substance abuse treatment in over a decade. Tom is widely recognized as the leading drug treatment researcher in the world. He has no peers and no detractors. He enjoys a unique position of respect from this field that seldom agrees on anything. Dr. McLellan is the man and this is the hour to revitalize drug abuse treatment and to raise the national priority for demand reduction. This appointment brings great credit to the Obama administration. It fulfills the President’s ambition to bring new ideas to solve long-neglected, urgent national priorities.

♦ Speeches by nominees for World Council election.

Friday Awards General Session

Regency Ballroom

Invocation: Major Paul McFarland, Salvation Army
Presentation of Awards: Jerry Conlon, Chairman of Board of Directors
Kathleen Gibson, Chief Operating Officer

Evening Dinner Cruise on the Potomac

Buses leave from Hotel entrance beginning at 6:00 PM

Hints on Getting the Most out of the Convention

1. Attend as many sessions as you can.
2. Participate in election of World Council officers.
3. Individuals from same houses or chapters split up to learn as much as possible to bring home.
4. Get to know folks from other states to extend your Oxford House family.
5. Enjoy your sobriety. Learn and have fun.
Saturday September 5th

**Continental Breakfast**
Regency Ballroom Foyer
7:00 AM - 8:15 AM

**Third Breakout Panels**
8:15 AM - 9:30 AM
- Columbia A Room: Psychiatric Co-morbidity
- Columbia B Room: Getting Jobs in Early Recovery
- Valley Forge: Review of Women's Conference
- Yorktown: Ethics for Workers in the Field
- Regency: Development of Chapter and State Associations

**Fourth Breakout Panels**
9:45 AM - 11:00 AM
- Columbia A Room: Ex-Offenders in Oxford House
- Columbia B Room: Housing Act Discrimination
- Valley Forge: Drug Court Operations
- Yorktown: Recovery-oriented Systems of Care
- Regency: Replication of Oxford Houses

**Fifth Breakout Panels**
11:30 AM - 12:35 PM
- Columbia A Room: Medications in Oxford House
- Columbia B Room: Re-entry from Prison
- Valley Forge: Keeping Oxford House Data Up-To-Date
- Yorktown: Diverse Ethnic Houses

**Lunch**
12:45 PM - 2:00 PM
- AA in Congressional A
- NA in Congressional B
- Alumni Luncheon in Thunder Grill at Union Station
  [Tickets at Registration Desk: $25 per person]

**Third General Session**
2:15 PM - 4:30 PM
Regency Ballroom
- Remarks by A.J. Adams - Hazelden author
- Report of World Council
- Introduction of New World Council Members
- Vote on Convention Resolutions
Saturday Evening
Banquet
6:00 PM - 8:30 PM
♦ Master of Ceremonies, Bill Paley
♦ Invocation
♦ Founder's Award
♦ Riley on his friend Father Martin

Dance
9:00 PM to 12:00 PM
AA speaker: Dennis Wholey

Sunday Morning
Continental Breakfast
7:00 AM - 8:15 AM
Closing Session
8:15 AM - 9:45 AM
Plaza Ballroom West
Remembering Oxford House family members who died during the last year
Lessons learned at the Convention for Oxford House
Group recitation of Oxford House Traditions

A more detailed summary of the fifteen breakout panels follows.

In the later pages of this program, residents and alumni of Oxford Houses around the country share their stories. The stories describe the terrible price that addiction extracts from the individual, their families and the community. As Oxford House has come of age and we examine “Together We Can”, it is important that all of us share our stories to demonstrate the power of recovery and to motivate communities across the land to establish Oxford Houses so that many more recovering individuals are given an opportunity to master recovery without relapse.

We hope that these stories and the ones in previous year’s programs will prompt everyone in Oxford House to share their story. Send the stories to Oxford House World Services and we will publish them. Please include your full name; however, in the AA/NA tradition we are publishing stories with only the first name and initial. Nevertheless, many of us will recognize each other because we are family.

Thanks to the participants in the pre-convention Oxford House Women’s Conference held Thursday September 3rd. The women will review the excellent presentations by featured speakers and the issues discussed that arise in houses for recovering women more often than in houses for men in the Third Session Breakout Panel, Saturday – Yorktown Room. Oxford Houses work for everyone because it is an Oxford House tradition to make sure that solutions to group living problems are analyzed and resolved.
Summary of Breakout Sessions

Friday Breakouts: First Session
1. Why Behavioral Research Matters
2. How State Agencies Allocate Resources
3. Drug Courts and Recovery in Lieu of Incarceration
4. Veterans, Recovery and Oxford House

Why Behavioral Research Matters

Columbia A 9:30 AM – 10:45 AM
Panelists: Leonard Jason, Ph.D. DePaul University Community Research Center
Keith Humphreys, Ph.D. Formerly at Stanford University now at ONDCP
Akiva Liberman, Ph.D. National Institute on Drug Abuse [NIDA]

Leonard Jason, Ph.D. is Director of the DePaul University Community Research Center in Chicago and the author of more than dozens of major peer-reviewed research of residents and alumni of Oxford House. Keith Humphreys, Ph.D. was a member of the Stanford University faculty and a consultant on addictions to the Department of Veteran’s Affairs. Dr. Humphreys is now at the Office National Drug Control Policy. Dr. Humphreys researches interventions for substance abuse and psychiatric disorders. He focuses particularly on evaluating the outcomes of professionally-administered treatments and peer-operated self-help groups (e.g., Alcoholics Anonymous), developing health services research-related applications for innovative qualitative and quantitative research techniques, and analyzing national mental health policy. Akiva Liberman, Ph. D. is a Health Science Administrator at NIDA focused on addiction treatment and incarceration. In addition to numerous publications, Dr. Liberman has managed grants related to behavior research in substance abuse, co-morbidity and recovery.

More than 100 peer-reviewed based research articles have been published concerning the effect that Oxford House living has on development of comfortable sobriety without relapse. This panel will discuss why behavioral research matters with respect to [1] successful treatment outcomes, [2] equal access to best practices to achieve successful outcomes, and [3] cost-effective utilization of the national health care system.

How State Agencies Allocate Resources

Columbia B 9:30 AM – 10:45 AM
Tori Fernandez Whitney Senior Deputy Director APRA District of Columbia
Kenneth B. Batten, Sr. Director, Office of SAS, Virginia Department. of MH/ MR/ SAS
Moderator: Riley Reagan Former State Director Cofounder of NASADAD

Each state and the District of Columbia have a single agency that is responsible for administering funds from the federal block grants to combat alcoholism, drug addiction and mental illness. These agencies also get state funding and sometimes other grant funding. This panel is a “big picture” panel with experienced state directors looking at where the money comes from, how it is used and how well it meets the needs of their respective jurisdictions. The purpose of the panel is to help everyone to understand present funding streams and the adequacy of funding for states to meet the needs imposed by alcoholism, drug addiction and mental illness. In addition the panel will discuss how well their agencies and other state agencies coordinate funding for effective treatment of alcoholism and/or drug addiction from intervention, detoxification, and formal treatment through mastering of sobriety without relapse. Specifically, how well does the status quo integrate treatment for those who are homeless and/or in the criminal justice system [drug courts/prison re-entry/parole/probation].

Flo Stein and Ken Batten have more than twenty years experience within their states. Tori Fernandez Whitney, in her three years as director, has rebuilt the Alcohol Prevention and Recovery Agency in the District of Columbia. Flo Stein is currently President/Chair of [NASADA] the National Association of State Alcohol Drug Abuse Directors. Tori Whitney is First Vice President of NASADAD and Ken Batten is Regional Director of Region III.
Drug Courts and Incarceration Alternatives

Valley Forge
9:30 AM – 10:45 AM
Panelists:
West Huddleston
Chief Executive Officer, NADCP
General Barry McCaffrey [Ret. USA]
Former Director, ONDCP
Moderator: Joe Chavez
Oxford House Outreach Worker Hawaii

The panel will focus on the “big picture” value of drug courts. West Huddleston has been a moving force at the National Association of Drug Court Professionals ever since the organization was formed in 1994. The growth of drug courts – from the 12 that existed in 1994 to the more than 2,300 today – have also spilled over to other behavioral health problem areas with another 1,191 problem-solving courts (mental health courts, community courts, reentry courts, DWI courts, etc.) in operation in all 50 states and U.S. territories. NADCP has forever changed the face of the justice system. When coupled with Oxford House living, the special court clients with alcoholism and/or drug addiction greatly increase the chances that they can stay clean and sober and stay out of trouble.

General Barry McCaffrey served as Director of ONDCP in the Clinton Administration and was instrumental in getting drug courts accepted and off the ground. General McCaffrey has continued his interest in providing alcoholics and/or drug addicts the opportunity to get and stay clean and sober. General McCaffrey was the first Director of ONDCP to address the Oxford House World Convention [1999].

Veterans, Recovery and Oxford House

Yorktown
9:30 AM – 10:45 AM
Panelists:
Worth Bolton
Clinical Instructor, The University of NC at Chapel Hill
Mary Rooney
Homeless Coordinator, Department of Veteran’s Affairs
Ron Pritchard
President VAADAC, Portsmouth, Virginia
Moderator
Paul Mulloy [Ret. USN]
OHI Board Member

Almost 20 percent of the residents within the network of nearly 1,400 Oxford Houses throughout the country are veterans. Most are vets from the Vietnam era. An increasing number of veterans are from the recent Iraq and Afghanistan wars. Worth Bolton is one of the experts with clinical expertise in dealing with veterans having substance abuse problems in addition to any other medical problems. Mary Rooney is the coordinator of programs for homeless veterans – most of whom have substance abuse problems – at the central office of the Department of Veterans Affairs in Washington. Ron Pritchard is President of the Virginia Association of Alcoholism and Drug Abuse Counselors (VAADAC). He operates out of Portsmouth, Virginia and deals on a regular basis with veterans getting substance abuse treatment through VA.

From the stories of vets living in Oxford Houses, it is clear that many find Oxford House living a way to get comfortable enough in sobriety to avoid relapse – even though they have often been through treatment many time before and often have co-occurring problems to the substance abuse such as PTSD. The panel will set forth the scope and extent of the problem facing veterans and discuss ways to improve access to Oxford House living for those who could benefit from it.

Admiral Mulloy has been a director of Oxford House, Inc. since 1997 and during his active duty was instrumental in making the Navy program to combat substance abuse second to none. After retirement from the Navy, Admiral Mulloy served as Director of the Rhode Island substance abuse agency.

Friday Breakouts: Second Session
1. Oxford House: Veterans and Active Military
2. Educating the Public and Leaders about Recovery
3. Homelessness, Jobs and Recovery
4. State Agencies Working With Oxford House
Alcoholism, drug addiction and mental illness are egalitarian diseases. Active, retired and separated military members develop these maladies just like everyone else. However, the treatment regimen for the active, retired and separated military is often different from the treatment available to others in society. For example, when Rear Admiral Paul Mulloy was in charge of Human Resources in the Navy, it had an excellent intervention and treatment program for alcoholics and/or drug addicts. Today, zero tolerance of any drug use tends to thwart intervention and treatment.

With many servicemen and women returning from Iraq and Afghanistan with substance abuse problems with or without co-occurring mental disabilities, the importance of Oxford House to provide the time and security to get well seems clear. This panel will discuss the types of problems facing veterans and active military where Oxford House availability might provide treatment outcome improvement by providing the time and peer support necessary to become comfortable enough in sobriety to avoid relapse.

Educating the Public and Political Leaders about Recovery

In 1940, Marty Mann became the first women alcoholic who entered recovery with the help of AA. She was thirty-five years old and a well-known New York public relations person. She went public about her alcoholism and her recovery and, because AA was already committed to anonymity, she started the National Council on Alcoholism in order to educate the public about her belief that [1] alcoholism is a disease, [2] it is irreversible, but [3] recovery is possible by learning behavior that includes absolute sobriety. She and the NCA encouraged the school on alcohol studies at Yale [now at Rutgers] and encouraged establishment of state chapters of NCA throughout the country.

Marty Mann died at age 75 in 1980. Today, the National Council on Alcoholism is known as the National Council on Alcoholism and Drug Dependence [NCADD]. Robert Lindsey is President and CEO and has undertaken efforts to revitalize state chapters throughout the country. Anne Doolen is Executive Director of the chapter in North Carolina – one of the strongest state chapters. Pat Taylor is Executive Director of Faces and Voices of Recovery – a relatively new grassroots movement among recovering alcoholics and/or drug addicts doing similar work in educating the public, government and business about the nature of alcoholism and drug addiction and stressing that individual recovery can replace addiction if society provides a reasonable opportunity for individual recovery to take place. The theory is that if the public understands the disease and the recovery process, it will support invention, treatment and long-term recovery and will be tolerant enough to invite recovering individuals back as productive members of society.

The panel will discuss the goals of those in recovery to encourage the rest of society to reach out to the still-suffering drug addict and alcoholic. Oxford House – since its expansion beyond the DC area began in 1989 – has worked with all groups interested in recovery to increase the opportunity for recovery without relapse and public acceptance that recovering individuals can be productive members of society – if given the chance.
Homelessness, Jobs and Recovery

Yorktown

Panelists: Henry Pierce Executive Director, Clean and Sober Streets
Stephen Glaude Executive Director, MCSR
Robert H. Fleming DC Recovery Alliance

Moderator: Marty Walker Outreach Coordinator Louisiana

Hundreds of thousands of individuals are homeless in America at some time during each year. Many are homeless throughout the year. Most are either alcoholics, drug addicts or mentally ill – or a combination of all three maladies. Henry Pierce is Executive Director of Clean and Sober Streets, the alcohol and drug-free treatment program that is on the north side of the 4th Street Homeless Shelter just a few blocks from the convention hotel. Henry worked closely with the late Michael Deaver, who was a strong supporter of Clean and Sober Streets. Many of the homeless in recovery at Clean and Sober Streets move on to one of the 30 Oxford Houses in D.C. to become comfortable enough in recovery to avoid relapse. Stephen Glaude and Robert Fleming have both been leaders in the DC Recovery Community in providing treatment and recovery opportunities for the addicted homeless and jobless. Stephen is also Executive Director of Men Can Stop Rape, a nonprofit to stop abuse of women by men. Together, the panelists provide a perspective that will show the magnitude of the task facing society and the important role that the safe, clean and sober living environment of an Oxford House can play in helping to alleviate the chronic problems of homelessness. Marty Walker is an outreach worker in Louisiana and an alumnus from Oregon where he got clean and sober a decade ago.

State Agencies Working With Oxford House

Valley Forge

Panelists: Chris Scalise Contract Manager, State of New Jersey
MeLinda Trujillo Contract Manager, State of Washington
Ray Caesar Oklahoma Department of Mental Health and Substance Abuse Services
Laura N. Griffith Community Services/Treatment Manager, Wyoming
Jackie Romero Office for Addictive Disorders, Louisiana

Moderator: Gino Pugliese Outreach supervisor: WA, OK, WY.

In more than a dozen states, Oxford House, Inc. – the non-profit umbrella organization for all individual Oxford Houses has contracts with the single state agency [or some other agency at state, county or local level] to provide on-site trained outreach workers to find suitable houses to rent, recruit newly recovering individuals to live in the houses and to teach them how to operate a clean and sober house as an Oxford House. Week in and week out, Oxford House field staff and their supervisors within Oxford House, Inc. work with state managers to make certain that everyone knows what is going on. The state managers also are anxious to have sufficient data to evaluate the success or failure of efforts to build a network of Oxford Houses within the state or subdivision in the state.

The panelists all work with Oxford House outreach workers and Oxford House, Inc. Their expectations include the development of a safe and effective network of Oxford Recovery Homes to serve the needs of residents within their states. Gino Pugliese, the moderator, has been an outreach worker in Washington State for a decade and now manages Oxford House outreach in Washington, Wyoming and Oklahoma.

Oxford House –Together We Can
Saturday Breakouts: Third Session
1. Psychiatric Co-morbidity
2. Getting Jobs in Early Recovery
3. Review of Women's Conference
4. Ethics for Workers in the Field
5. Development and Significance of State Associations and Chapters

Psychiatric Co-morbidity
Columbia A
8:15 AM – 9:30 AM
Panelists:
John Majer, Ph.D.
Leonard Jason, Ph.D.
Kenneth Hoffman, MD, MPH [Ret USA]
Mark Spence

Richard Daley College, Chicago, Illinois
Director DePaul Community Research Center
Principal Investigator DOD/VA Oxford House Study
Alumnus Oxford House

In a major study funded by NIDA, the DePaul research group studied the extent of dual diagnosis among Oxford House residents and the effect of living in an Oxford House. Their findings, published in 2008 in the American Journal of Community Psychology, showed [1] a high incidence of dual diagnosis and [2] a good outcomes [abstinence and control of any psychiatric problem. This large studied confirmed that individuals with dual diagnosis can do well in an Oxford House. John Majer, Ph.D. is the principle author of the peer-reviewed study findings along with Leonard Jason, Ph.D. and Carol North, MD. Dr. Hoffman is a psychiatrist, a member of the Oxford House Board and has worked with dually-diagnosed patients. Mark Spence, a former Oxford House resident, works with individuals primarily having mental illness.

Getting Jobs Early in Recovery
Columbia B
8:15 AM – 9:30 AM
Panelists:
Victoria Knott
Quinetta Rowley Womack, LAC,
Johnny Allem
Rob Fleming

Apprenticeship Consultants, Dept. of Labor, NC
Executive Director of Workforce Development, LA
Former President Johnson Institute
DC Recovery Alliance

Moderator:
Kurtis Taylor
North Carolina Outreach

Oxford Houses rely upon self-help operation. Every resident pays an equal share of household expenses. The equal share of expenses averages about $100 a week with a range of $75 to about $150, dependent primarily on the amount of rent the group pays the landlord. Therefore, it is important that each resident have a source of income. A few Oxford House residents have disability benefits or retirement income but most rely upon having a job. This panel looks at the ways and means that individuals newly in recovery can get employment. Victoria Knott is an apprenticeship consultant in North Carolina. Quinetta Rowley Womack views the problem from a workforce development prospective in the State of Louisiana. Johnny Allem and Rob Fleming have had practical experience as employers, recovering individuals and activists in the recovery field in the District of Columbia. Kurtis Taylor works with recovering individuals leaving prison to enter Oxford Houses in North Carolina. Together, the panel will look at ways and means for newly recovering individuals – some with prior incarceration – can get jobs.

Oxford House – Together We Can
Review of Women's Conference

Panelists:
- Judy Maxwell, Oxford House Outreach Worker – Washington State
- Myrna Brown, Oxford House Alumnus, WA State – Outreach Worker (retired)
- Karen Sutton, Oxford House Alumnus, OH Peer Mentor
- Terri Martin, Oxford House Alumnus - Texas

Moderator: Kristen Currie Stevens, Oxford House Outreach Worker – New Jersey

For the 11th year, women alumni and residents of Oxford Houses meet the day before the opening of the Oxford House World Convention for a six-hour pre-convention conference to discuss issue related to Oxford Houses for women and women with children. This year the meeting is likely to include about 150 women. Not only does the Women’s Conference provide an opportunity to discuss substantive issues involving recovery in general and recovery among women in particular but it also looks at the variety or problems facing Oxford Houses for women and women and children. This panel will share the work of the Women’s Conference with the convention as a whole.

The number of Oxford Houses for women has now reached 329 houses, with 2,507 recovery beds. Seventy-five of the houses (with 579 recovery beds) are for women with children. Society has placed different responsibilities on women with children than on similarly situated men. The Women’s Conference looks at the unique problems facing houses for women and children within the context of the successful Oxford House program, and examines the specific benefits afforded by Oxford House living.

Ethics for Workers in the Field

Panelists:
- Shirley Beckett Mikell, Director of Certification and Education, NAADAC
- Paula Harrington, Alumnus and Outreach, North Carolina
- Michael Doolen MSW, LCSW, LCAS, Behavioral Health Care Specialist, Eastern N. Carolina
- Paul Stevens, Outreach Worker, Virginia

Moderator: Jeff Hunt, Oxford House Outreach Worker – Oklahoma

Working with recovering individuals is often a challenge for case workers and outreach workers who have a job to do but who must also avoid personal relationships that can harm the recovering individuals. The purpose of this panel is to discuss the common sense guidelines followed by the health care profession. The Oxford House outreach worker – whether a paid OHI employee or a house, chapter or state association officer has a special duty to avoid relationships or actions that hurt the good reputation of Oxford House. The panel discusses permissible and impermissible behavior by counselors and paid Oxford House employees. They will also discuss how to deal with diverse populations within an Oxford House and how to teach tolerance and permissive behavior among residents in houses and chapters.

Ethical standards are part of the tradition of the 12-Step programs with their discouragement of “13th Stepping” and the panel will look at that tradition as applied to the professionalism of the field. It will also examine the safeguards that keep outreach workers in the Oxford House field detached enough to assure that individual houses and chapters are in fact self-run – which research shows makes a big contribution toward the development of sobriety comfortable enough to avoid relapse.
Development and Significance of Chapters and State Associations

Regency A 8:15 AM – 9:30 AM
Panelists:
- Jackson Longan, Oxford House Outreach Worker – Oklahoma
- Mike Zalusky, Oxford House Outreach Worker – New Jersey
- George Kent, Oxford House Outreach Worker – New Jersey
- James McClain, Board of Directors, Alumnus Oxford House

Moderator: John Fox, Oxford House Outreach Supervisor – NJ, WVA, NC

As a self-run, self-supported recovery home concept, Oxford House residents and alumni recognize that the reputation and effectiveness of Oxford Houses and Oxford House, as a whole, depends upon checks and balances to assure that every house adheres to its charter. This panel will look at the ways and means Oxford House utilizes to assure that all houses stay on track. Chapters, State Associations, outreach workers and Oxford House World Services are some of the tools that keep houses on track. Workshops and the utilization of the web resources are also important tools for assuring good quality. This experienced panel will discuss how to start a chapter and State Association and their importance to Oxford Houses.

Saturday Breakouts: Fourth Session
1. Ex-offenders and Oxford House Research
2. Drug Court Operation
3. Discrimination under Federal Fair Housing Act
4. Recovery-oriented Systems of Care
5. Replication of Oxford Houses

Ex-offenders and Oxford House Research

Columbia A 10:00 AM – 11:15 AM
Panelists:
- Chris Beasley, DePaul University
- Stephanie Marez, Oxford House, Illinois
- Carolyn Ellis, Oxford House, Illinois
- LaRhonda Stalling, Oxford House, Illinois
- John Majer, Ph.D., Richard Daley College, Chicago, Illinois
- Leonard Jason, Ph.D., Director DePaul University Community Research Center

This panel looks at depth into how ex-offenders perform in an Oxford House setting. Existing research data suggest that ex-offenders do well in Oxford Houses. The existing data will be discussed and areas needing more research will be identified. Individuals who have reached out to the Oxford House population in Illinois houses to verify findings from the national database join Dr. Majer and Dr. Jason. The group has also utilized national data collected as part of the NIDA and NIAAA sponsored research.

A substantial percentage of Oxford House residents have served jail time. The average length of jail time is 1 year, 1 month, and research shows that most will stay clean and sober without relapse.

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Discrimination under Federal Fair Housing Act

**Yorktown**  
10:00 AM – 11:15 AM  
Panelists:  
- Greg Heafner  
  Practicing Attorney, Chapel Hill, North Carolina  
- Thomas E. Patton  
  Practicing Attorney, Washington, D. C.  
- Steve Polin  
  Practicing Attorney, Washington, D. C.  
Moderator:  
- Troy Manns  
  Oxford House Outreach Worker – North Carolina

Beginning with national expansion in 1989, Oxford House faced Not-In-My-Back-Yard [NIMBY] problems almost everywhere it went. Steve Polin and Greg Heafner are lawyers who are Oxford House alums and are involved in a number of cases protecting Oxford House rights under the Federal Fair Housing Act. Thomas E. Patton is not an alumnus but has helped Oxford House residents defend their rights under the law. Most recently he and Scott Moore – from Omaha, Nebraska – defended seven Oxford Houses in Winchester, Virginia and were able to reach a settlement with the city before trial in Federal court.

The panel will discuss the various kinds of discrimination attempted by local governments to keep Oxford Houses out of certain areas or to treat Oxford House rentals different from rentals to biological families. The panel will provide an overview of the law and explain how civil rights under the law can be protected.

**Recovery Oriented Systems of Care**

**Valley Forge**  
10:00 AM – 11:15 AM  
Panelists:  
- Anne Doolen  
  Executive Director NC Alcohol/Drug Council of North Carolina  
- Kurtis Taylor  
  Alumnus and Outreach, North Carolina  
- Steve Shapiro  
  Public Health Advisor U. S. Dept. of Health and Human Services  
Moderator:  
- Xavier Hodge  
  Oxford House Outreach Worker – Washington DC

Recovery-oriented systems of care shift the question from, “How do we get the client into treatment?” to “How do we support the process of recovery within the person’s environment?” —H. Westley Clark MD. JD, CAS, FASM

From the time Oxford House started in 1975 through the end of the 20th Century almost everyone recognized that alcoholism and/or drug addiction are diseases but until the last few years almost everyone talked in terms of intervention and treatment as if those two events would fix the problem. Today, the field of alcoholism and/or drug addiction treatment has begun to think and behave in “recovery oriented systems of care.” The quote from Dr. Clark sums up the big difference. The article in the convention materials from the April 2009 issue of *Counselor: The Magazine for Addiction Professionals*, by William White and Paul Molloy, points out how Oxford House has demonstrated the importance of creating an environment where sobriety becomes comfortable enough for the recovering individual to avoid relapse.

This panel discusses the changed thinking in the field and shows how Oxford House fits into a recovery-oriented system of care. Clearly the availability of Oxford House living has the effect of improving the environment for many who are in early recovery from alcoholism and/or drug addiction. Early DePaul research seems to indicate that it can also provide the added supported needed for the individual with dual diagnosis to stop drinking and using illegal drugs while taking appropriate prescribed medication as directed.
Replication of Oxford Houses

Regency A

Panelists:  Matthew Wilder  Oxford House Outreach Worker – West Virginia  
Daniel Fuchs  Oxford House Outreach Worker – Wyoming  
Misty Wilkins  Oxford House Outreach Worker – North Carolina  
Stacie Anderson  Oxford House Outreach Worker – Washington State

Moderator:  Blake Bippes  Oxford House Outreach Worker – Washington State

The first Oxford House was started in 1975. As of this convention, there are nearly 1,400 Oxford Houses in the United States with houses in Australia, Canada and Ghana. Just in the United States, there are enough people afflicted with this disease to have at least 10,000 Oxford Houses. Some might suggest as many as 70,000 houses. The theme of this convention “Together We Can” recognizes that Oxford House must work with lots of other groups dedicated to recovery if there is ever going to be a sufficient number of Oxford Houses.

This panel will discuss the nuts and bolts of opening a house and getting it up and running as an Oxford House. Each of the members of the panel has had experience in establishing new Oxford Houses in new territories. They will discuss the practical things that must be undertaken in order to get enough Oxford Houses established to be able to create a mutually supportive chapter and eventually a state association.

Drug Court Operation

Columbia B

Panelists:  Hon. Nelson Rupp  Drug Court Judge Montgomery County, Maryland  
Samantha Lyons  Drug Court Coordinator, Montgomery County Circuit Court  
Joe Chavez  Oxford House Outreach Hawaii  
Robert H. Fleming  DC Recovery Alliance

Judge Rupp runs a drug court in Montgomery County, Maryland. Samantha Lyons co-ordinates the treatment options afford clients of the court. It is often suggested that a court client find an Oxford House to live in. Joe Chavez works closely with drug court judges in Hawaii and Robert Fleming has worked with the drug court option in the District of Columbia. This panel will focus on the “nuts and bolts” of having an effective drug court.

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<td>Family, Fellowship, Freedom</td>
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<td>2009</td>
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Saturday Breakouts: Fifth Session

1. Housing Accommodating Ethnic Differences
2. Prison Re-entry
3. Getting Oxford House Data Recorded
4. Medications in Oxford Houses

Housing Accommodating Ethnic Differences

Columbia A

11:30 AM – 12:35 PM

Panelists:
- Gilberto Padilla, Oxford House, Illinois
- Randy Ramirez, Assistant Coordinator, Oxford House Expansion
- Michael Doolen MSW, Behavioral Health Care Specialist, Eastern North Carolina
- Leon Venable, Alumnus and Director Illinois Oxford House Expansion
- John Majer, Ph.D., Richard Daley College, Chicago, Illinois
- Leonard Jason, Ph.D., Director DePaul University Community Research Center

Research shows that Oxford Houses work for diverse populations of recovering individuals – Black, White, Hispanic, Native American, Pacific Islander – young, old – men, women – gay or straight – dually-diagnosed or deaf, or individuals with physical disabilities. However, when it comes to individuals who have limited understanding of English, there may be barriers to understanding and applying the Oxford House disciplined democratic system of self-run, self-supported operation. Michael Doolen has applied the language diverse solutions in North Carolina. Leon Venable and his Illinois colleagues have worked on Spanish-speaking houses in Illinois. The DePaul studies have examined ethnic diversity among existing Oxford House populations. This panel will discuss the need for and barriers to establishing non-English-speaking Oxford Houses and integrating them into the larger family of Oxford Houses.

Prison Re-entry

Columbia B

11:30 AM – 12:35 PM

Panelists:
- Deacon Ronald R. Ealey, St. Michael the Archangel RC Church, Silver Spring, MD
- Marius Davis, US [Federal] Probation Officer, Washington, DC
- Darryl Hughes, Supervisory US Probation Officer
- Keith Haynie, Oxford House Criminal Justice Liaison, North Carolina

Moderator:
- Tony Perkins, Washington State Association Chairperson

About 2.2 million individuals are incarcerated in the United States, with about 700,000 being released each year. More than half have an alcohol and/or drug addiction problem. The fact that they do not stay clean and sober after release from incarceration contributes to a recidivism rate of over 60 percent within a year after release. Oxford House and many others have instituted various outreach programs to help individuals returning to society following jail or prison time. About 80 percent of the 10,000 Oxford House residents at any one time have served jail or prison time. Most have been incarcerated several times with an average length of incarceration of about a year.

This panel will discuss the problem and the outreach of Oxford House as it attempts to alleviate the recidivism problem. Deacon Ealey makes regular visits to DC jail as part of his ministry. Marius Davis and Darryl Hughes are with the federal probation system and Keith Haynie is the liaison between Oxford House and the North Carolina criminal justice system. Tony Perkins has developed outreach to those incarcerated in the Washington State. In particular, the importance of recovering individuals having a “safe” place to live after leaving jail or prison can make a big difference. The members of this panel know firsthand what happens to individuals in recovery who leave jail or prison. The two Oxford House members of the panel can explain the mechanics of being accepted to an Oxford House under the circumstances of leaving incarceration.
Getting Oxford House Data Recorded

Panelists: David L, Chief of Information Technology, Oxford House, Inc
Joe Chavez, Oxford House Outreach supervisor for Hawaii

The success of Oxford House over the last 34 years has come about in large part because of the organization’s openness to examination of data related to recovery. Even though few were open about their own personal recovery, in 1975, the men who started the first Oxford House were open about who relapsed and who stayed clean and sober. In 1987 the small cluster of 13 Oxford Houses welcomed study of all their data about recovery and relapse. Bill Spillaine tracked down residents and former residents and reported that 80 percent of those who entered and Oxford House between 1975 and 1987 had stayed clean and sober.

This re-enforced the practice of encouraging open data collection about recovery within Oxford House. As the Oxford House movement expanded around the country, the men and women of Oxford House invited research. Over 100 peer-reviewed papers have been published showing the effect Oxford House living has on recovery without relapse.

As technology has improved, and as Oxford House World Services has help expand the number of Oxford House from 18 in 1989 to over 1,400 today, data about Oxford House is more important ever. Modern technology permits each Oxford House to report significant events as they happen. This breakout session explains how the secretary of each house should sign into the Oxford House website each week to report data that can have a significant impact on the future growth of the network of Oxford Houses. For example, David and Joe will explain how easy it is to report applications and departures on a weekly basis in addition to showing how many vacancies houses have. For the newcomer to recovery, the accurate vacancy data can mean the difference between having a safe place to live and going back to the street to use. For old-timers in recovery, accurate data can help build a national network of self-run, self-supported Oxford House and support long-term recovery.

Yorktown

Panelists: Riley Regan, Therapist and Former State Director
Ken Hoffman, MD, Board Member
Kelly Crowder, Oxford House Outreach Worker, Virginia
Robin Breckenridge, RN, Oxford House Outreach Worker, Louisiana
Moderator: George Kent, Oxford House Outreach Worker, New Jersey

About 47% of Oxford House residents attend weekly counseling in addition to AA/NA meetings. Many also may have dual diagnosis and require medication to function without resorting to the use of alcohol and/or addictive drugs. Since prescription medication can also be addictive, it is often difficult to sort out permissible medication that is not a threat to others in the clean and sober living environment of an Oxford House. This panel will discuss the ways and means of walking a practical line between maintaining an alcohol and drug-free living environment while recognizing the need for some individuals to use medication.

Examples of psychiatric problems requiring medication include bi-polar disorder and other diseases. The panel will attempt to sort out the criteria for determining what medications are acceptable and how any acceptable medication should be handled in a house in order to minimize the chance that someone other than the intended user takes it or that the user misuses the medication.
Research

In this 2009 Oxford House World Convention, research is highlighted in a number of breakout panels because good research is the best way to arrive at the best way for alcoholics and drug addicts to achieve sobriety comfortable enough to avoid relapse. Try to have at least one person from your house, chapter or state association attend the various breakout that discuss the importance of research and role Oxford House residents and alums play in making research relevant.

During the last 34 years, more than 250,000 individuals have lived in an Oxford House. Most of them became comfortable enough in sobriety to avoid relapse. They would attribute their successful sobriety to Oxford House. Testimonials are useful but insufficient alone to evaluate any program.

From the beginning of Oxford House, residents and alumni have invited independent research. Perhaps the initial motivation for this was a defense to those who wondered if “the inmates could run the asylum”, but as years passed outside expertise became a tool to understand the dynamics that made Oxford House so effective.

In 1988, Bill Spillaine, Ph.D., a retired NIDA employee, took a job at Catholic University and asked to review the first twelve years of Oxford House outcomes. The men and women in Oxford House readily agreed and his report that 80% of the Oxford House residents had remained clean and sober from the day they had moved into an Oxford House has stayed the norm.

This early work convinced the residents and alumni of Oxford House that tracking the demographics and progress of Oxford House residents and alumni was essential for monitoring the performance of the Oxford House program. Since that time, Oxford House Inc. has conducted its own regular surveys of residents and also encouraged outsiders to both use the Oxford House data and create their own studies.

In many ways Oxford House has become a gateway for recovery studies. While Oxford House residents and alumni respect the anonymity principle of AA and NA, they understand that Oxford House as an institution prides itself on openness and scientific behavioral research.

In 1991, when Leonard Jason, Ph.D. at DePaul University in Chicago asked permission to do some research studies of Oxford House, the residents and alumni of Oxford House quickly agreed. They have continued this practice of inviting independent research by bona fide researchers.

More than 100 papers have been published in peer-reviewed journals covering all aspects of what takes place among the residents of Oxford House that result in the development of sobriety comfortable enough to avoid relapse.

Policymakers, who rely upon scientific research to develop ways and means to make health care affordable, effective and open to access by all, should be impressed by the strength and scope of research about alcoholism and/or drug addiction arising from the data from thousands of individuals who are living or have lived in Oxford Houses. Prior to the development of this research there was a paucity of research in the field.

Recent Published Researchers
Oxford House Studies

Leonard A. Jason, PhD, DePaul University, Chicago
John M. Majer, PhD, Richard J. Daley College, Chicago
Bradley D. Olson, PhD, Northwestern U., Chicago
Joseph R. Ferrari, PhD, DePaul University, Chicago
Carol S. North, MD, University of Texas, Dallas
Margaret I. Davis, PhD, Dickinson College, Carlisle, PA
Josefina Alvarez, PhD, DePaul University, Chicago
David R. Groh, PhD, DePaul University, Chicago
Benjamin C. Graham, MS, DePaul University, Chicago
Douglas L. Polcin, EdD, Public Health Institute, CA
Jeffrey D. Roth, MD, FASAM, Psychiatrist, Chicago
Judah J. Viola, PhD, National-Louis University, Chicago
Friedner Wittman, PhD. University of California, Berkley.
Thomasina Borkman, PhD. George Mason University, VA
William L. White, MA, Chestnut Health Systems, Illinois
Both NIDA and NIAAA have funded studies to determine whether and how Oxford Houses have worked to enable addicted individuals to master abstinence. For example, one DePaul study followed 897 residents in 219 Oxford House across the country for 27 months. Each resident was interviewed every three months and a friend identified at the first interview verified the self-reports of the interviewees. At the end of the period, 87 percent had stayed clean and sober without relapse. In another NIH study, 150 individuals just getting out of primary treatment were randomly divided into two groups: one going to Oxford House; the other to their normal living place. After 27 months, 69 percent of the group going to Oxford Houses had stayed clean and sober without relapse while only 35 percent of the control group had maintained sobriety. Even when the comparison of outcomes used a controlled study with everyone having the same primary treatment regime, those who resided in an Oxford House following treatment were twice as likely to stay clean and sober.

Another study measured self-efficacy in sobriety for newly recovering individuals living in an Oxford House versus those who only went to AA/NA. The Oxford House group gained confidence in sobriety five times faster.

The universality of Oxford House living has also been examined. Separate studies showed that Oxford Houses worked for all subgroups. For example, deaf recovering individuals did well in Oxford Houses; both men and women did well in Oxford Houses; women with children did well, those with criminal records did well; those with mental illness or dual diagnosis did well; and formerly homeless individuals did well. In addition, neighbors have accepted Oxford Houses in their neighborhoods. The list of studies and findings encompass a wide range of outcomes that ratify the concept and system of operation.

More than 100 published, peer-reviewed articles have been published in academic journals. The evidence is in and it is time for the country to focus on Oxford House as a means to improve treatment outcome for alcoholics and drug addicts. Already three books have been published based upon the DePaul University studies.

Many of the published articles from academic and professional journals are available at the Oxford House website: www.oxfordhouse.org under “Publications/Evaluations/DePaul.” A complete list of more than 100 peer-reviewed published articles is at the website and can be downloaded.

_Havens: True Stories of Community Healing._
Leonard Jason & M. Perdoux
Research Results and Expansion

Independent research has provided evidence of the successful recovery outcomes for individuals residing in Oxford Houses. Its examination of the dynamics of Oxford House performance suggests that the Oxford House program can be replicated on a large scale. For example, the books and published articles make clear that the success of the Oxford House concept and system of operations is not dependent on charismatic or gifted individual leaders but rather it derives from the proven system of operation.

Reliance upon democracy, self-support and grassroots operation partially explains why the organization has been able to expand on a significant scale. There are thousands of recovery support programs that work in a particular community but, because they depend upon one or two dedicated individuals or large capital expenditures for their success, they are difficult – if not impossible – to replicate on a large scale. The 33-year old Oxford House program has developed the organizational competence and method of expansion that gives it a unique ability to serve the nation as it strives to reduce the demand for illicit drugs and the harm caused by both drug addiction and alcoholism. It has done so while producing a product – hundreds of self-sufficient recovery homes – that follow the same disciplined system of operations.

Recovery without Relapse – A Core Oxford House Principle

Oxford House embodies a philosophy that believes that once an alcoholic and/or drug addict is detoxified and given primary treatment, relapse should be the exception not the norm.

Beginning about the time the first Oxford House started in 1975, the alcoholism and drug treatment community began to preach, “Relapse is part of the disease of alcoholism and drug addiction.” Many suspect that the propagation of that belief was motivated by complaints from the health insurance industry, which at that time had not yet cut back on coverage for substance abuse treatment or other behavioral health problems. For the last thirty-three years Oxford House has demonstrated that relapse is not necessarily “part of the disease of alcoholism and drug addiction”. As a matter of fact, with good support for long-term sobriety, recovery without relapse can be the norm.

Outcome studies have continually shown than 80% or more of Oxford House residents become comfortable enough in sobriety to avoid relapse. William L. White, the leading historian concerning alcoholism, drug addiction, treatment and recovery has recently suggested that perhaps “relapse may reflect a defect in the treatment protocol presently followed in the country rather than being inherent in the disease of addiction.” He cites Oxford House as a thirty-year experiment in showing that with appropriate support recovery without relapse can be the norm.
Oxford House continually emphasizes that recovery without relapse is the expected and achievable goal – and Oxford House residents have proven its validity.

As the nation reforms its health care system, it is important to recognize this reality. Recycling individuals in and out of treatment costs too much – for society and for the recycled individuals and their families. Over half the residents coming into Oxford House have been through residential treatment three times or more. Ten percent have been in treatment ten times or more. The government TEDS data show that fewer than 40% of those entering treatment are there for the first time. Stopping – or significantly reducing – relapse rates could nearly double the number of primary treatment slots available in the county without spending an additional penny.

**Expanding Oxford House Overseas**

For many years Oxford House has had cluster of houses in Canada and Australia. This year the Oxford House program extended to Africa because a resident of Ghana, originally from the United States, is in recovery and learned about Oxford House.

Dan O’Laughlin worked for the Peace Corps in 1963 and he served in Ghana. He had a career in government and along the way became involved in Alcoholics Anonymous. Last summer Dan visited Silver Spring to learn more about Oxford House because his adopted country – Ghana – needs resources to help combat alcoholism and drug addiction. He and his family and friends raised money to build a house to become an Oxford House near Accra, Ghana. He also raised money so that Oxford House could send an outreach worker to the country to help teach the new residents the operating system of an Oxford House. Byron Merriweather, World Council Member and outreach worker in Richmond, Virginia, has spent the last couple of months there. Oxford House-Hopeful Way has been established and the first residents have moved in. The House has its own website and we expect many more houses on the African continent. The new house website: [http://www.geocities.com/hopefulwayghana](http://www.geocities.com/hopefulwayghana).
OXFORD HOUSE STORIES

This segment of the program contains a selection of autobiographical sketches by current and former residents of Oxford Houses. These recovering individuals are sharing their stories in order to help others afflicted by alcoholism and drug addiction understand the hope afforded by Oxford House. Many readers will be struck by the devastating damage associated with alcoholism and drug addiction. There is no pill or magic bullet that can produce a cure for addiction. The only path to recovery is total abstinence from alcohol and addictive drugs. Few are able to master such behavior change alone. Together with the 12-Step programs, Oxford House offers its residents the opportunity and time to use peer support, a safe living environment and a disciplined system of operation to achieve the behavior changes necessary to avoid a return to the use of alcohol and addictive drugs.

The thousands of individuals who have found a path to recovery by living in an Oxford House know that Oxford House has come of age. All members of the Oxford House family hope that by sharing these personal stories of hard-won recovery, they will contribute to the growth of the Oxford House network, guide those not yet in recovery toward an effective program, and foster the understanding and support of the broader community.

Chris F’s Story

I moved into the Oxford House June 2008. Alcohol had taken me out of me and my 13 year career, home, and family. My marriage was hanging on by a very small thread. My wife and girls had had enough of my countless days of doing nothing but drinking. No working. No more being active in my home or family life. My wife took me to a local detox center expecting never to see me again. I was broken and had nowhere to go. After a week there and a thirty-day house, I called this Oxford House and interviewed. I was welcomed in and offered support and advice from the current residents. They gave encouragement along with guidelines that have taught me to be responsible for myself and my actions. They also kept me in my 12-step program and encouraged me to get a sponsor. Seeing the success of those around me I went along and now have a new way of life – a rewarding life in which I can hold my head high. Still in the house, I have the opportunity to help newcomers and give to them what was given to me. Newcomers remind me of where I was just over a year ago and where I can easily be again. They keep me right-sized and very grateful for what God has brought into my life. I will always be grateful for Oxford House, all it stands for, for the help and opportunities it offers us when it seems the rest of the world has given up on us.

Howard J’s Story

Howard L. Johnson born in Raleigh, NC: My first name was given to me by my mother, and my middle name was given to me by one of my mother's brothers. I inherited my last name from my father. Of course, people always tease me about my name even to this day. I grew up in an upper middle class family. My mother, and her side of the family, is where I was taught Christian principles which generated a long line of ministers, deacons, and singers such as my oldest sister. I'm the youngest of 3 siblings with 1 sister, and 1 brother. I was raised by both of my parents in a loving home environment. My father is a man who is a spiritually profound man of God. My mother was always the social one with a creative touch in interior design, well respected with soothing conversations in which family members trusted her with personal discussions. I inherited those gifts from my mother. My mother is still driven on spiritual principles in spite of being involved in a car accident in which a drunk driver slammed head-on with her in 1973. While growing up in my youthful days before the age of 14, I didn't have good communication with my family, and never talked about my feelings because that was something you just don't do. I was always in my head by myself at home, and pretty much taught myself how to think. I experienced my first drink at the age of 14, and experienced weed around the same time. My father's side of the family was the conservative party people who were high-minded, and I inherited that style of thinking from them (thinking I was better than others). My mother's side of the family was not the big party people, and – don't get me wrong – some of her siblings are ex problem drinkers who were considered functional. My mother's father was a problem drinker before he passed away back in 1975. My father's father was a problem drinker before he passed away back in 1983.

I experienced social drinking at Family Reunions, Weddings, Family gatherings, Cook outs, and when there was a Funeral. I thought this was normal because that was how I was taught. I didn't experience any issues with drinking.
until 1987. On New Year’s Day of 1985 one of my first cousins decided to go visit some family, and paid a visit to some of our first cousins. Of course, we celebrated with drinking, and some of my cousins were already under the influence by drinking and drugging. Unfortunately, that evening turned out tragic as I experienced the death of one of my cousins who was shot to death beside my car by a cousin who was controlled with anger by his drinking, and using drugs. That was to start of my out-of-control life by witnessing that event. I had to get on the stand and testify against a cousin to whom we were all close.

I went numb for the next 2 decades, and I started experimenting with cocaine, free-basing, and crack. 1987, I was involved in a single car accident while drinking. I passed out at the wheel of the car. When I came to, I was walking down the street in 20 degree weather at 1:30 a.m. I remember I prayed to God to help me. I went through a 4 1/2 hour surgery with 12 cracks in my skull in March, 1987. Four months after my surgery, I was back hanging out with my disease full force. I became a terrorist in my family. I would run to church, and I was not ready to stop hanging out with my disease. My disease became my pimp! I stole a lot of time from my loving parents, sister, brother, and other family members. My immediate family, and outside family, always had high expectations for me.

I always kept a good job because my background is in financial risk management. Finally, in 1993, I got married, and kept my ex wife and her daughter hostage for 6 hellish years. I stole time from their lives while living in Winston-Salem, NC. I experienced my first treatment center in 1988 at Charter in which my disease advised me 15 days later that I didn’t need treatment. I experienced my 2nd treatment center in 1995 with 13 1/2 weeks of intense out-patient treatment, and 3 weeks later my disease advised me that I didn't need that either. Also, I experienced 2 DUI's in 1988, and that was the last time I experienced DUI's. That’s not to say that I didn't continue to drink and drive for years after that. My disease took me to NYC, DC, OH, and VA, doing geographic tour of drinking, and drugging. I was introduce to AA/NA in 1995, and sat in the denial chair until 1998. I went to my 3rd treatment center in Raleigh in 1998, and then moved to Asheville, NC to an Oxford House. My stay in Oxford House for 1 year provided a great deal of relief. I got a sponsor in AA and started living some spiritual principles in my life.

I eventually moved on, and I knew in the back of my mind that I was not ready to give my life completely to God – that’s the 3rd step. So I started down the river of being pimp by my disease until April 2002 when I prayed to God to help me. I moved from DC to Raleigh, and went back to treatment. I knew there was peace in Asheville, NC while I was living in Oxford House. I loved the mountains, my sponsor was still living there, and I just needed to get back connected. I started acting on God's guidance when I moved to a Oxford House, and started living again with spiritual principles. I started to glow, faith developed – faith in my sponsor, faith in the Oxford House, and – most of all – faith in God!

I started getting involved with the Oxford House Chapter II (Asheville, NC) to learn about the many service opportunities in Oxford House. I started understanding the traditions of the Oxford House, and got involved in different positions in the Oxford House. I attended the State Board Meetings, Conventions, and Chapter Meetings of Oxford House.

I give thanks to God for our founder of the Oxford Houses. It has had a direct impact on my life, and helped me promote the character that I was taught by my parents. It has given me the opportunity to serve with several state representatives in the state of NC. It has produced faith in my living knowledge of the Oxford House to promote a relationship with the Oxford Houses of NC, with the state coordinator, and with the outreach persons that I have known throughout my Oxford House experiences. It has given me the passion to help open up the first Oxford House in Cherokee, NC and also in Franklin, NC. I love the PI involvement with the Oxford House out here in Western North Carolina to continue the mission – God first / Clean house / Help others!

J.C. Navarro’s Story

My Oxford House experience is not unique in the same way that my recovery story is shared by many. The 12-Step program has worked in my life because of my Higher Power, the program and the fellowship of AA. These components exist in my Oxford House experience as well.

With all of these similarities, my personal viewpoint of what changed in my life since I found recovery is nothing short of a miracle. This journey has been remarkable.
I squandered a fabulous career in the Oilfield Industry, I lost a beautiful home and most importantly, I lost my family. I went to prison twice before I was ready to completely surrender control to a Power greater than myself. My continued strong connection to God is my defense against that first drink or drug use.

Oxford House provides me the opportunity for a constant reminder of this principle. We begin and end every house business meeting with prayer. Asking Him into our every deliberation is essential to our success. God does for us what we cannot do for ourselves. Who keeps us sober? “Our Father, who art in heaven…”

Another principle in the 12 steps that resides in Oxford House as well is service. When I have gotten into my own head (which is a dangerous place to be), the advice I have been given in the program is to go do some service work. A fundamental truth for me is that by serving others my foundation in recovery is strengthened.

Opportunities for service work in the Oxford House community abound and they are close at hand. They begin at home. Serving as an officer in an Oxford House is a real way to immediately do something for others. The local Chapter offers ways to serve including the Housing Services committee. The State Board Association and the World Council are available as well as ways to serve.

But, also, I have found the tremendous circumstances where you help the member living with you by sharing your experience, strength and hope in a very personal way. This, I know, is one of the huge benefits Oxford House has provided to me. These “built in” occasions where one alcoholic/addict can sit down with another in their own living room and share. The Oxford House fellowship is one that I cherish. This has been the hallmark of my remarkable journey. Being helped and helping others on such an intimate level has, without a doubt, been a blessing from God that has more than anything else given me a solid foundation in recovery.

The most recent miracle in my life was being able to purchase my new home. As I matriculate from my Oxford House on Mistletoe in San Antonio, Texas, I join the ranks of those who have found long-term recovery due in great part to the Oxford House model. Sadly, I have seen many not make it as well.

I will carry these memories, the joys, and the sorrows, with me forever and I am eternally grateful for the experience.

God bless Paul Molloy and the other founders of Oxford House. And may God bless us all.

Roy L.’s Story

When I was 13, I got high for the first time and, from that point on, that was all I wanted to do. For the next 25 years I moved all over the country and did what I wanted to do – which was to get high and drink.

When I came to North Carolina I was beaten down, lonely, scared and had no family. I started going into treatment centers and halfway houses but was never able to find what I was looking for.

I continued this way for another 14 years until God led me to an Oxford House. Since I have been here I have finally found what I was looking for – A FAMILY!! I have been in the Oxford House for 6 months now and my life and attitude towards life has changed completely. I have friends who care about me and who want to be around me. We help each other and enjoy each other’s company. We do things together and have lots of fun. We are a FAMILY.

For me, there is nothing worse than being alone. Today I am not alone.

Note: Many more stories are at the Oxford House, Inc. website: www.oxfordhouse.org under “About Us/Stories.”
## Oxford House Resident Profile

<table>
<thead>
<tr>
<th>Description</th>
<th>Value</th>
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<tbody>
<tr>
<td>Number of Women’s Houses:</td>
<td>329</td>
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<tr>
<td>Number of Houses For Men:</td>
<td>1,030</td>
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<tr>
<td>Global Network of Houses:</td>
<td>1,359</td>
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<td>Number of States with Houses:</td>
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<tr>
<td>Average Cost Per Person Per Week:</td>
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<td>Residents Working 6/15/09:</td>
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<tr>
<td>Percent Addicted to Alcohol only:</td>
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<tr>
<td>Veterans</td>
<td>18.2%</td>
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<tr>
<td>Race --</td>
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<tr>
<td>White</td>
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<tr>
<td>Black</td>
<td>31%</td>
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<td>Hispanic</td>
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<tr>
<td>Other</td>
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<tr>
<td>Marital Status --</td>
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<tr>
<td>Never Married</td>
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<td>Separated</td>
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<td>Divorced</td>
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<tr>
<td>Married</td>
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<td>Widowed</td>
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<td>Prior Homelessness:</td>
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<td>Prior Jail:</td>
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<td>Average AA or NA Meetings Per Week Per Resident:</td>
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<td>Average Length of Sobriety of House Residents:</td>
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<tr>
<td>Average Length of Stay In An Oxford House:</td>
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<td>Average Cost Per Person Per Week:</td>
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<td>Rent Per Group Per Month:</td>
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<td>Percent Addicted To Drugs or Drugs and Alcohol:</td>
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<td>Ave. Educational attainment:</td>
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<td>Marital Status --</td>
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<td>Average Time Homeless:</td>
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<td>Average Jail Time:</td>
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<td>Percent Going To Counseling and AA or NA:</td>
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<td>Residents Expelled Because of Relapse:</td>
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<tr>
<td>Average No. of Applicants For Each Vacant Bed:</td>
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</tr>
</tbody>
</table>

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1 As of July 30, 2009 or April 1, 2009 based on standard OHI survey and house reports.

2 Other includes Native American, Asian, Pacific Islander and Hawaiian.
See You Next Year at a City to be Chosen
OXFORD HOUSE TRADITIONS

1. Oxford House has as its primary goal the provision of housing for the alcoholic and drug addict who wants to stay clean and sober.

2. All Oxford Houses are run on a democratic basis. Our officers serve continuous periods of no longer than six months.

3. No Member of an Oxford House is ever asked to leave without cause -- drinking, drug use, or disruptive behavior.

4. Oxford House members realize that active participation in AA and/or NA offers assurance of continued sobriety.

5. Each Oxford House should be autonomous except in matters affecting other houses or Oxford House, Inc. - as a whole.


7. Oxford House should remain forever non-professional.

8. Propagation of the Oxford House, Inc. concept should always be conceived as public education.

9. Members who leave an Oxford House in good standing should become associate members.
Oxford House™

1975-2009

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

• Providing 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.

Write or Call

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