Women's Recovery Services Key Findings: Year One

January 1 - May 31, 2017

In October 2016, the Minnesota Department of Human Services Alcohol and Drug Abuse Division (ADAD) contracted with 12 grantees across Minnesota to provide treatment support and recovery services for pregnant and parenting women who have substance use disorders, and their families. This is the second cycle of this grant; ADAD funded a similar initiative over the previous five years. The following provides a description of women and children served by 11 of the 12 funded programs between January 1 and May 31, 2017, and preliminary outcomes for families during the first year of the 5-year grant. Due to limited staffing capacity, one program did not provide data in year one.

Snapshot of clients served

Women served 678 Children of women served 1,301 Average length of Participation 3 months

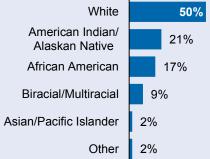
Exited program number of clients 301 Average # of Staff contacts 148 contacts

Service areas of greatest client need: According to program staff, women had the greatest need for services around parenting (68%), mental health and counseling (61%), and housing (49%).

Most common services areas: Program staff were most likely to provide services to women in the following areas: mental health and counseling (85%), parenting (82%), physical or dental health (77%), transportation (72%), housing (63%), and public benefits (63%).

Chemical dependency treatment: 93% of women were in treatment during the program. Just over half (58%) had successfully completed treatment by closing.

Racial background of women served

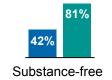


Substance use and sobriety

Primary drug of	Methamphetamine	35%	
choice: For the women who entered	Alcohol	20%	
the programs during	Marijuana/Hashish	18%	6
the reporting period, the primary drug	Heroin	13%	
of choice was	Pharmaceutical Opioids	7%	
most often methamphetamine.	Crack/cocaine	5%	

Change in substance use:

Significantly more women were substance free at closing (81%) compared to intake (42%).



■ intake ■ closing

Infant health

Number of infants born: 54 infants; 80% born full-term and 83% born with a normal birth weight.

Infant toxicology: 59% of infants born in this period tested negative for substances at birth, while 27% tested positive, mostly for marijuana. Results were not available for the remaining 14% of infants born.

Parenting relationships

Reunification: 60 children were reunified with their mothers during year one.

Living with their children: While not a matched analysis, 26% of children were living with their mother at intake and 27% of children were living with their mother at closing.



MARCH 2018

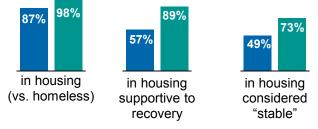
Connection to recovery supports

Sources of recovery support at closing: By program end, women sought support primarily through Alcoholics Anonymous (AA) or Narcotics Anonymous (NA; 77%), a support group in the program (20%), and faith-based support groups (12%).

Change in recovery support participation: Participants were significantly more likely to be participating in AA or NA by closing (81%), compared with intake (65%), and in at least one recovery support activity by closing (91%), compared with intake (73%).

Housing

By closing, significantly more women were:



■ intake ■ closing

Systems involvement

Criminal justice system: No significant change in women's criminal justice system involvement from intake (47%) to closing (46%).

Child protection: Fewer women were involved with child protection at closing (56%) as compared to intake (60%).

Children served

Total number of children . . .

of women who left
the program
624

who received services from program **207**¹

¹33% of children of women who exited the program in year one. Service data was missing for 55% of the 624 children of women who exited during the reporting period.

Most common assessment received by children served: Informal FASD screenings (30%), developmental assessments (28%), and prenatal alcohol or drug screenings (17%).

Child immunizations and medical insurance:

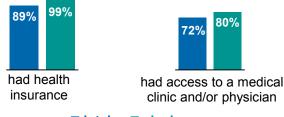
At closing, 73% of children were current on immunizations and 75% were covered by medical insurance, although data was missing for about one-quarter of all children.

Health

Mental health diagnoses: At intake, 80% of women had a mental health diagnosis; the most common diagnoses were anxiety disorders (79%) and depressive disorders (75%).

Mental health services: At closing, 55% of women were receiving or had access to mental health services (although data were missing for 22% of women).

By closing, significantly more women:



[■] intake ■ closing

Additional outcomes

Key factors contributing to positive outcomes include 4+ hours of monthly contact with staff and a connection to mental health services.

Percentage of women. . .

who were engaged with program goals at exit	who participated in a parenting program by closing	who were doing well at program exit according to program staff
70%	82%	59%

Most common service areas that program staff worked on with children



Contents

Overview	
Description of families and services provided	7
Description of women served	7
Length and intensity of women's participation	
Women's services and assessments	
Description of children	9
Services provided to children	9
Outcome results	
Substance use	
Infant health	
Recovery support	
System involvement	
Housing	
Treatment participation	
Health	
Education and employment	
Additional outcomes at closing	
Children at closing	
Contributors to positive outcomes	
Contact with staff	
Mental health services	
Who is most likely to be "successful"?	
Conclusions and next steps	
Appendix	
A. Background	
B. Evaluation methods	
C. Additional data tables	
D. Evaluation tables (from database)	

Figures

1.	Women's Recovery Services' grantees	4
2.	Map of Women's Recovery Services grantees (2016-2019)	5
3.	Change in substance use from intake to closing	. 11
4.	Types of recovery support used by women at closing	. 13
5.	Changes in recovery support participation from intake to closing	. 13
6.	Changes in system involvement from intake to closing	. 14
7.	Changes in housing from intake to closing	. 15
8.	Changes in access to health care from intake to closing	. 16
9.	Changes in employment and schooling from intake to closing	. 17
10.	Staff perception of women's status at closing	. 18
11.	Individual characteristics and behaviors contributing to positive outcomes for women and children	21

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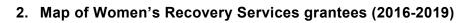
Overview

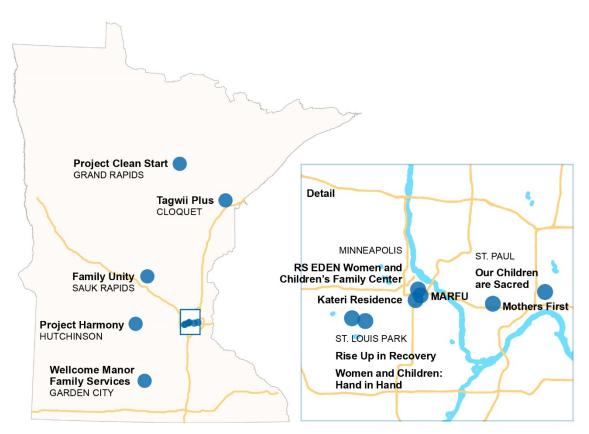
In October 2016, the Minnesota Department of Human Services Alcohol and Drug Abuse Division contracted with 12 grantees (Figure 1) across Minnesota to provide treatment support and recovery services for pregnant and parenting women who have substance use disorders, and their families. Through this initiative, known as Women's Recovery Services, grantees provide comprehensive, gender-specific, family-centered services for the women in their care. The primary goals of the Women's Recovery Services initiative are to help program participants remain alcohol and drug free, obtain or retain employment, remain out of the criminal justice system, find and secure stable housing, access physical and mental health services for themselves and their children, and deliver babies who test negative for substances at birth. In addition, the initiative aims to support grantees to implement the following components into their programs: parent education, trauma-informed care principles and strategies, and Recovery Coaches to support women served by the grant.

See Figure 2 for a map illustrating the location of all 12 programs.

1. Women's Recovery Services' grantees

Grantee	Program
American Indian Family Center	Wakanyeja Kin Wakan Pi "Our Children are Sacred"
Avivo	Mothers Achieving Recovery for Family Unity (MARFU)
Fond du Lac Reservation	Tagwii Plus
Hope House of Itasca County	Project Clean Start
Meeker-McLeod-Sibley Community Health Services	Project Harmony
Perspectives Inc.	Women and Children: Hand in Hand
Ramsey County Community Human Services	Mothers First
RS EDEN	RS EDEN Women and Children's Family Center
St. Cloud Hospital Recovery Plus	Journey Home-Family Unity
St. Stephens Human Services	Kateri Residence
Wayside House	Rise Up in Recovery
Wellcome Manor Family Services	Wellcome Manor Family Services





Evaluation methods

In order to evaluate the progress of women and the effectiveness of the Women's Recovery Services initiative at each program, the Minnesota Department of Human Services (DHS) asked Wilder Research to conduct an evaluation of the initiative for the duration of the 3to 5-year grant. Research staff, in partnership with DHS Alcohol and Drug Abuse Division, developed four data collection instruments to collect information about clients receiving program services, which are completed by program staff at the client-level: an Intake form, a Urinalysis and Contacts form, a Pregnancy Outcome form, and a Closing form. Data are entered into a secure database by program staff. As of fall 2017, follow-up interviews are being conducted with women after they leave their respective programs (1-, 6-, and 12-months after leaving) to track the long-term progress of women; these results will be shared in future reports.

Much of the outcome analysis included in this report is based on a matched-case analysis for women who participated in the program for at least 15 days. Only those women with complete information at *both* intake and closing (for the pre/post comparative analysis) were included to determine if statistically significant changes occurred during their

participation in the program. Often, the total number of women who were served or left the program in year one exceeds the number of women that met these criteria. Thus, the results of the outcome analysis reflect changes observed among a more limited number of women.

See the Appendix for more information about the methodology.

Overview of report

This report presents findings across 11 of the 12 funded programs from January 1, 2017 through May 31, 2017. One grantee was excluded from this report. Because of staffing issues, they were unable to collect the data needed for reporting; however, they will be included in future reports. Although the grant began in October 2016, the evaluation period is only 5 months in length as the beginning of the year was used to design the evaluation, develop data collection forms and protocols, build the database, and train grantees on data collection. Therefore, this report does not include all of the services provided by the programs during year one of the grant period.

The following report begins with a description of the families served and services provided, and then moves into a detailed discussion of outcomes for women. Outcome information includes comparative data about changes from intake to closing and an analysis of factors that contributed to positive outcomes for women. Note that descriptive information about families and services is based on all clients and children served during this reporting period, while outcome information is generally based on all clients whose cases were *closed* during the period.

Description of families and services provided

The following describes the women and children served by 11 grantee programs and the services provided during the latter half of year one (January 1, 2017 through May 31, 2017). Please see Appendix D for additional detail.

Description of women served

WRS grantees served a total of 678 women¹ during the first year of the grant period. These women had a total of 1,301 children, including 54 babies born while women were in a program. A total of 301 women left their program during the first year.

Demographic characteristics at intake

For all women who entered a program in reporting year one:

- Women's race and ethnicity: Women identified as white (50%), American Indian or Alaskan Native (21%), African American (17%), multiracial (9%), or Asian American or Pacific Islander (2%); 2% of women identified another race or race was unknown. Among women served, 6% reported being of Hispanic origin.
- Women's age: The majority of women served were between the ages of 18-34 (79%).
- **Pregnancy at intake:** 170 women (25%) were pregnant at intake (74% of those women had at least one prior pregnancy).
- Income and public benefits: While most women served in year one (90%) had incomes at or below the federal poverty line, they were connected to a variety of public benefits and community resources at intake, with the most common being food support or SNAP (44%), MFIP cash assistance (29%), WIC (18%), and General Assistance (16%).

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

Length and intensity of women's participation

For all women who left a program in reporting year one:

- Average length of participation: 3.3 months (ranged from less than 1 month to 23 months)
- Average number of contacts between program staff and women: 148 contacts (69% of women had at least 2 contacts with staff per month)

Average number of phone contacts: 14 contacts

Average number of one-on-one contacts (in-person): 36 contacts

Average number of group sessions (in-person): 116 contacts

• Average number of hours program staff spent per woman: 181 hours (ranged from less than 1 hour to 822 hours)

Women's services and assessments

For all women who left a program in reporting year one:

- Total number of women who received urinalysis tests (UAs) while in their program: 176 (58% of women who exited in year one)
- Average number of UAs provided to women during their program: 11 UAs (46% of women tested had at least one positive UA, most commonly for methamphetamines, marijuana, or medications taken as directed)
- Most common service areas that program staff worked on with women: In addition to substance abuse treatment and recovery services, program staff were most likely to work with women on mental health or counseling (85%), parenting (82%), physical or dental health (77%), transportation (72%), housing (63%), and public benefits (63%).
- Service areas of highest need: Besides treatment and recovery support needs, program staff reported that women needed the most help with parenting (68%), mental health and counseling (61%), and housing (49%).
- Assessments provided: A total of 277 women (92% of those who closed in year one) received assessments or screenings, most commonly a mental health assessment (78%), a physical health assessment (77%), a Rule 25 chemical health assessment (62%), a mental health screening (62%), an informal Fetal Alcohol Spectrum Disorder (FASD) screening (45%), or a nutritional assessment (15%).
- Percentage of women who completed an evidence-based parenting program: Overall, 39% of women completed an evidence-based parenting program; an additional 43% either participated but did *not* complete the program, or completed the program but not according to the model.

Description of children

Women served by 11 grantee programs during the year one reporting period had a total of 1,301 dependents² at the time of intake. (Note: Race and age information was missing for up to 12% of children; therefore, results may not be representative of all children.) Some key characteristics of these children include:

- Children's race and ethnicity: Children were identified as white (35%), American Indian or Alaskan Native (21%), African American (14%), multiracial (17%), Asian American or Pacific Islander (1%), or another racial group (1%). In addition, 10% were identified as Hispanic.
- Children's age: The majority of children (77%) were under 12 years old.
- Babies born: 54 infants were born to mothers served during year one, and were identified as white (39%), African American (32%), multiracial (17%), American Indian or Alaskan Native (9%), and Asian American or Pacific Islander (4%); 4% (2 infants) were of Hispanic origin.

Services provided to children

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

Overall, the programs served 207 children, or 33% of the 624 children of women who left their program in year one (note: this information was missing for 55% of children). The following provides additional information about the services provided to these 207 children.

- Service areas that program staff worked on with children: For those who received services, program staff most commonly worked with children on developmental needs (74%), physical health or medical care (59%), immunizations (45%), and recreational services (43%).
- Assessments provided to children: The most common assessments administered were informal FASD screenings (30%), developmental assessments (28%), and prenatal alcohol or drug screenings (17%). None of the 207 children served received a formal FASD assessment.

² Of these 1,301 dependents, demographic information is available for 1,207 children; it does not include babies born during the period, as well as babies born prior to 1/1/17, the start of the reporting period.

Outcome results

The following section summarizes information collected about women and their children from 11 grantee programs during the last 5 months of year one of the grant (2016-17 reporting period). Data for one of the 12 grantees is excluded because of staffing issues and lack of data.

This section includes information about how women are doing *at intake* when they first enter a program, as well as a comparison of outcomes from *intake to closing*. Please see Appendices C and D for additional detail on women at intake and overall outcomes.

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

When a matched analysis was not conducted (or when there were too few women with information available at both intake and closing to conduct a matched analysis), general information is provided about women at closing (not matched to their information at intake).

WHAT IS A STATISTICALLY SIGNIFICANT CHANGE?

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

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

Substance use

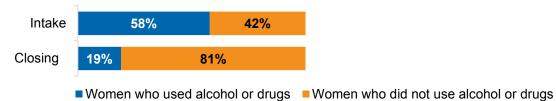
At intake (all women who entered their program in reporting year one)

- Substance use and sobriety: At intake, 54% of women reported having used alcohol and/or other drugs (excluding tobacco) in the 30 days prior to program enrollment or prior to a forced sobriety situation (e.g., jail, treatment) preceding enrollment. For the 252 women³ (37%) reporting no alcohol or drug use within 30 days of intake, their length of sobriety at intake ranged from 1 month to 3.5 years, with an average of 4 months.
- Primary drug of choice: For the women who entered a program during this reporting cycle, their primary drug of choice was most often methamphetamines (35%), followed by alcohol (20%), marijuana/hashish (18%), and heroin (13%).
- Most common substances used: Among those reporting substance use prior to intake, women were most likely to have used methamphetamines (49%), marijuana/ hashish (39%), and alcohol (36%). The majority of women (84%) also reported recent tobacco use at intake.

At closing (women who left their program in reporting year one)

► Matched analysis: The number of women with recent substance use decreased significantly from intake to closing (Figure 3). While 58% of those with matched data had used in the month prior to intake, 19% reported using in the month prior to closing. For more information on women's substance use at closing – including the number who reported *reduced* use from intake to closing – please see Appendix C.

3. Change in substance use from intake to closing (N=254)



Note. Differences between intake and closing were tested using the McNemar's test, and was significant for the number of women who used alcohol or other drugs within 30 days prior to intake and closing at p<.001. Results reflect women's responses when asked about substance use within 30 days prior to intake and closing.

³ 298 women reported no recent alcohol or drug use, however, information on length of sobriety was available for only 252 of those women. Only the duration of sobriety for those 252 women was used in the length of sobriety calculations.

Infant health

All babies born to women served in reporting year one

- **Overall infant health:** Of the 54 infants who were born to mothers in year one, 80% were born full-term and 83% were born with a normal birth weight.
- Infant toxicology: At birth, 27% of infants had positive toxicology results, most often testing positive for marijuana/hashish (73% of those with positive toxicology results). Toxicology data was unknown for 14% of infants born to women served in year one.

Recovery support

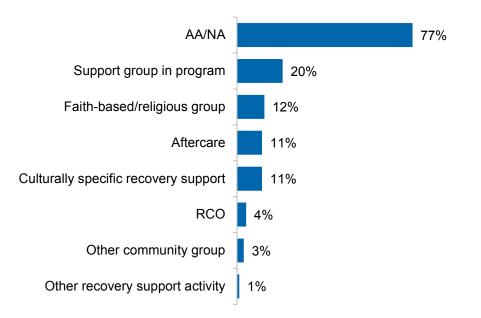
At intake (all women who entered their program in reporting year one)

Sources of recovery support: Among all clients who entered a program this cycle, 48% were participating in Alcoholics Anonymous (AA) or Narcotics Anonymous (NA). Fewer women were connected to recovery support through faith-based groups (12%), groups in the community (8%), other support activities (7%), culturally specific groups (4%), aftercare (3%), and Recovery Community Organizations (RCO) (2%).

At closing (women who left their program in reporting year one)

• Sources of recovery support: By program end, women sought support primarily through AA or NA (77%) (Figure 4).

4. Types of recovery support used by women at closing (N=301)



Matched analysis: Significantly more women were connected to recovery support activities at closing (91%) than at intake (73%), and particularly to Alcoholics Anonymous (AA) and/or Narcotics Anonymous (NA) (81% at closing, compared to 65% at intake) (Figure 5).

Changes in recovery support participation from intake to closing 5. Intake Closing Total N n % % n 91%*** Women involved in any form of recovery support 244 178 73% 223 Women involved in AA and/or NA at... 254 65% 81%*** 165 206

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

System involvement

At intake (all women who entered their program in reporting year one)

- Criminal justice and child protection: 52% of women were involved with child protection at intake and 48% were involved with the criminal justice system.
- Arrests: 14% of women had been arrested in the 30 days prior to program entry.

At closing (women who left their program in reporting year one)

- Criminal justice and child protection: At closing, 53% of women were involved with child protection and 44% were involved with the criminal justice system.
- Arrests: 3% of women had been arrested within 30 days of closing.
- **Babies placed out of home:** 11% of the babies born to mothers served during year one were placed out of the home by child protection following their birth.

► Matched analysis: Fewer women were involved in child protection at closing compared to intake (56% vs. 60%); this decrease was statistically significant but still relatively small overall. The proportion of women involved in the criminal justice system remained the same from intake to closing, although fewer reported having been recently arrested at closing (3%) compared to intake (15%) (Figure 6).

6. Changes in system involvement from intake to closing

		Int	ake	Closing		
	Total N	n	%	n	%	
Women involved in child protection	267	161	60%	149	56%*	
Women involved with the criminal justice system	264	124	47%	120	46%	
Women arrested in the prior 30 days	251	38	15%	7	3%***	

Note. Differences between intake and closing were tested using the McNemar's test. Differences between intake and closing are statistically significant at: ***p<.001 and *p<.05.

Housing

At intake (all women who entered their program in reporting year one)

- At intake, women were most often living at a relative or friend's home (35%), their own house or apartment (22%), or at an inpatient treatment facility (15%).
- 14% of women were homeless (including those living in a shelter or motel), and another 9% were in a correctional facility.
- Living arrangements were considered "supportive to recovery" for 52% of women and "stable" for 43% of women.
- 69% of participants had experienced homelessness at some point in their lives, with most of those (74%) having been homeless one to five times. (Note: Data on their experience with homelessness were missing for 8% of women and the number of times they were homeless was missing for 12% of women; therefore, results may not be representative of all women served by the 11 grantee programs.)

At closing (women who left their program in reporting year one)

▶ Matched analysis: Women were significantly more likely to be in housing (not homeless) at closing (98%) as compared to intake (87%). Additionally, they were more likely to be in housing that was considered "stable" and "supportive to their recovery" at closing (73% and 89%, respectively) than at intake (49% and 57%, respectively) (Figure 7).

7. Changes in housing from intake to closing

		Int	ake	Closing		
Housing situation	Total N	n	%	n	%	
Women in housing/not homeless ^a	175	152	87%	171	98%***	
Women in own home or permanent supportive housing ^b	151	62	41%	68	45%	
Women in "stable" housing ^c	221	109	49%	161	73%***	
Women in housing "supportive to recovery" ^d	203	116	57%	180	89%***	

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

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

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

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

Treatment participation

- **Treatment** *at intake*: The majority of women (81%) were in treatment when they entered their program. Of these, 55% were in inpatient/residential treatment, 30% were in outpatient treatment with housing, and 14% were in outpatient treatment. Of those women living in a treatment facility, 23% had their children living with them.
- Treatment outcomes by closing: For the 93% of women who were in treatment at least once during their program, the most recent treatment outcomes by closing included: successfully completed Rule 31 treatment (58%), noncompliant or left the program without staff approval (31%), still in treatment (2%), and other (9%, including leaving at staff request or transferring to a different program).
- Medication-assisted chemical health treatment and detox: 14% of women received medication-assisted chemical health treatment while in their program, primarily methadone and suboxone. 2% of women were reported to be in detox while in their program.

Health

At intake (all women who entered their program in reporting year one)

- Physical health and access to care: 40% of women reported a severe or chronic physical health problem. Most women had either public or private medical insurance (89%) and a primary care physician, clinic, or both (70%).
- Mental health diagnoses: 80% of women had at least one mental health diagnosis at intake, most often anxiety disorders (79%) and depressive disorders (75%). In addition, 43% had been diagnosed with Post-Traumatic Stress Disorder (PTSD). A small proportion of women reported having a Traumatic Brain Injury (TBI) (5%) or Fetal Alcohol Spectrum Disorder (FASD) (2%).
- Domestic violence: 12% of women reported that they were in a relationship with a partner who was physically or emotionally violent. (Data were unknown for 25% of women.)

At closing (women who left their program in reporting year one)

- Mental health services: By closing, 55% of women were receiving mental health services or were connected to a specific clinic or therapist if services were needed. (Note: Because these data were missing for 22% of women, results may not be representative of all women served by the 11 grantee programs.)
- Domestic violence: Two-thirds of the women (67%) who reported an abusive relationship at intake said that their personal safety had improved by closing. Eight women reported that the relationship had stayed the same and information was missing for the remaining women. Due to the limited number of women who reported being in an abusive relationship at intake, a matched analysis was not conducted to measure improvement in this area. (See Appendix D for complete results.)

▶ Matched analysis: Women were significantly more likely to have medical insurance (99% vs. 89%) and a primary care physician and/or clinic (80% vs. 72%) at closing as compared to intake (Figure 8).

8. Changes in access to health care from intake to closing

		Int	ake	Closing		
	Total N	n	%	n	%	
Women with medical insurance	261	233	89%	257	99%***	
Woman with a primary care physician and/or clinic	254	184	72%	204	80%**	

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

Education and employment

At intake (all women who entered their program in reporting year one)

- Education: 68% of women had at least a high school diploma or GED at intake; 35% had completed some college or obtained a degree.
- Employment and career training programs: Most women (86%) were unemployed at intake; 21% of these were looking for work. Fewer women (12%) were employed either full time or part time.

At closing (women who left their program in reporting year one)

► Matched analysis: Compared to intake, significantly more women were employed (19% vs. 10%) and enrolled in school or a career-training program (5% vs. 2%) at closing, although these overall proportions remained relatively low at closing (Figure 9).

9. Changes in employment and schooling from intake to closing

		Int	ake	Closing		
	Total N	n	%	n	%	
Women employed full time or part time	249	26	10%	48	19%**	
Women in school or a career-training program	270	5	2%	13	5%*	

Note. Differences between intake and closing were tested using the McNemar's test. Differences between intake and closing are statistically significant at: **p<.01 and *p<.05.

Additional outcomes at closing

At closing (women who left their program in reporting year one)

- Engagement in case plan and continuing care plan: At the time of closing, 70% of women were at least somewhat engaged in carrying out their program goals and case plan (as reported by program staff). 65% of women had a continuing care plan in place when they left their program.
- Doing well at closing: Using their own professional judgment, program staff assess whether women are "doing well" or "not doing well" when they leave the program. Overall, staff reported that 59% of women who left their program this past year were "doing well" at closing (Figure 10).



10. Staff perception of women's status at closing (N=301)

For the 41% of women who staff perceived were "not doing well" at closing, this was most often the case because women were not compliant with program requirements (70%) or not engaged in carrying out the goals of her case plan (52%). Other reasons why women were perceived as "not doing well" at closing include women actively using substances (30%), staff not being able to reach or find a woman at closing (19%), and women experiencing a crisis or traumatic life event (11%).

Children at closing

At closing, program staff collected information on the 624 children of women who had participated in a WRS program – regardless of whether or not each child received services from the program. The following summarizes information on the children of all women who left a WRS program in reporting year one, for whom data are available.

- Child protection involvement: At closing, 46% of children were reported to be involved with child protection; it should be noted that child protection involvement was unknown for 20% of children. Of those 285 children known to be involved in child protection, 59% were in a formal out-of-home placement.
- Reunification/custody status: 60 children (10% of all women's dependents) were reunified with their mothers (after a formal placement) by closing.
- Medical insurance and immunizations by closing: By closing, 73% of children were current on their immunizations and 75% were covered by medical insurance; however, this information was missing for a quarter of children (26% and 24% respectively).
- Mental health services at closing: At closing, 15% of children were receiving mental health services; this information was missing for 29% of children.
- Participation in an evidence-based children's program: 10% of children participated in an evidence-based program during reporting year one; although, only half of those (5%) fully completed the program.

Contributors to positive outcomes

Although we know a great deal about the treatment and recovery process for women, factors that contribute to successful outcomes are not well understood. Therefore, Wilder conducted an analysis of individual client characteristics and behaviors to identify which factors contribute to positive outcomes for the women in these 11 grant-funded programs. These outcomes included: abstinence at closing; decreased substance use at closing; no out-of-home placements for babies following birth; negative toxicology results for mothers and babies at time of birth; successful completion of treatment at closing; no involvement with child protection at closing; and reunification with one or more children at closing. See Figure C3 in the Appendix for more information about the variables included in the analysis.

Overall, several of the factors analyzed had a statistically significant impact on various key outcomes (Figure 11), particularly the two factors highlighted below.

Contact with staff

At closing, women who had at least 4 hours of contact with program staff per month were more likely to:

- Be abstinent
- Successfully complete treatment
- Reunify with one or more of their children

Mental health services

At closing, women who were connected to mental health services were more likely to:

- Be abstinent
- Have decreased substance use
- Successfully complete treatment

The outcomes that were most affected by individual characteristics and behaviors were *abstinence at closing* and *successful completion of treatment at closing*, which is reassuring considering that these are primary goals of the grantee programs. Women were more likely to achieve these two positive outcomes if they:

- Had at least 80 hours of total contact time with staff while in the program
- Had living arrangements that staff considered stable and supportive to recovery at closing
- Had a history of homelessness
- Were connected to mental health services at closing

While the link between abstinence and completion of treatment and factors such as increased dosage, stable housing, and mental health services might be expected, it is unclear why a history of homelessness is also associated with these positive outcomes. We will examine this potential predictor in future analyses to see if this pattern continues. In addition, women were more likely to be abstinent at closing if they were involved with child protection at intake or if they had completed treatment at closing. Compared to women of other racial backgrounds, women who identified as white were also more likely to have successfully completed treatment at closing.

11. Individual characteristics and behaviors contributing to positive outcomes for women and children

Outcomes	Pregnant at intake	At least 4 contacts per month	At least 80 hours of total contact	Completed TX at closing	Completed TX <u>before</u> entering program	Alcohol – primary drug of choice	Heroin/ opiates – primary drug of choice	Marijuana – primary drug of choice	Meth – primary drug of choice	Pharm. opioids – primary drug of choice
Abstinent at closing (N=211-256)	\checkmark		$\checkmark\checkmark$	$\checkmark\checkmark$						
Decreased substance use at closing (N=215-260)			√	$\checkmark\checkmark$						
No out-of-home placements for babies following their birth (N=13-16)										
Negative toxicology results for mothers (N=22-29)										
Negative toxicology results for babies (N=11-15)				\checkmark						
Successful completion of treatment at program closing (N=216-257)			$\checkmark\checkmark$							
No involvement with child protection at closing (N=135-161)										\checkmark
Reunification with one or more children at closing (N=168-210)		√	$\checkmark\checkmark$							✓

Note. Factors designated with a double checkmark were found to have a statistically significant influence on the corresponding outcome (p < .05), while those with a single checkmark were approaching statistical significance (p < .10).

11. Individual characteristics and behaviors contributing to positive outcomes for women and children (continued)

Outcomes	Received MAT in program	In stable & supportive living arr. at closing	In TX 3 or more times before program	Race*	Involved in CP at intake	Involved in CJ at intake	History of homeless- ness	Severe or chronic health condition at intake	MH diagnosis at intake	Connected to MH services at closing
Abstinent at closing (N=196-256)		$\checkmark\checkmark$			$\checkmark\checkmark$		$\checkmark\checkmark$			$\checkmark\checkmark$
Decreased substance use at closing (N=197-260)		\checkmark								$\checkmark\checkmark$
No out-of-home placements for babies following their birth (N=13-16)										
Negative toxicology results for mothers (N=24-29)	$\checkmark\checkmark$									
Negative toxicology results for babies (N=12-15)										
Successful completion of treatment at program closing (N=190-257)		$\checkmark \checkmark$		$\checkmark\checkmark$			$\checkmark\checkmark$			$\checkmark \checkmark$
No involvement with child protection at closing (N=122-161)										
Reunification with one or more children at closing (N=169-210)	$\checkmark\checkmark$				$\checkmark\checkmark$					

Note. Factors designated with a double checkmark were found to have a statistically significant influence on the corresponding outcome (p < .05), while those with a single checkmark were approaching statistical significance (p<.10).

* Analyses were conducted to identify whether there were significant differences in the achievement of positive outcomes among clients of particular racial groups – specifically African American, white, and American Indian/Alaska Native clients. The only statistically significant difference (p<.05) was between white clients and those of all other races on the "successfully completed Rule 31 treatment" outcome, such that white clients were more likely to complete treatment than clients of other racial backgrounds.

Who is most likely to be "successful"?

In addition to identifying factors that contribute to individual outcomes like sobriety and family stability, we conducted additional analyses to identify the *characteristics* of clients who tended to be most successful in the programs. Certainly "success" is a multi-faceted concept that can be defined in many different ways and likely needs to take into consideration the unique circumstances of individual clients. For the purposes of this analysis, we defined a "successful" client as one who – at *closing* – met the following criteria:

- Not using substances within 30 days of closing
- In housing (not homeless)
- In housing that is supportive to recovery
- Currently receiving mental health services or connected to a mental health therapist/clinic, if the need should arise
- Engaged in the program

There are certainly other characteristics that are likely indicative of success, but given the type and amount of information available for this report and analysis, we limited our definition to include the above characteristics. A total of 110 clients met these criteria – in other words, 110 clients were considered "successful" at closing.

"Successful" clients were more likely to:

- Be in stable housing at closing^{***} (75% vs. 28%)
- Be in their own home or permanent supportive housing at closing⁺ (75% vs. 62%)
- Be involved in a self-help or recovery support activity at closing^{*} (68% vs 25%)
- Not be involved with the criminal justice system at closing⁺ (72% vs. 60%)
- Identify as white^{*} (71% vs. 54%)

Note. Differences between those clients identified as "successful" and those not identified as successful were statistically significant at: ***p<.001, *p<.05, and +p<.10 (approaching statistical significance).

Other factors were analyzed but were not significant predictors of "success," including: mental health diagnosis; a severe or chronic physical health problem; drug of choice (including alcohol, heroin/opiates, pharmaceutical opioids, meth, and marijuana); being pregnant at intake; length of participation in the program; amount of contact with staff; employment; child protection involvement; custody status; residence of children with mother; participation in treatment; type of treatment; and participation in AA/NA.

Conclusions and next steps

During the abbreviated first year of the DHS Women's Recovery Services grant, 11 grantees served a total of 678 women and their children. On average, women participated in the programs for about 3 months and received 181 hours of programming. The women were most likely to receive help in the areas of mental health or counseling, parenting, physical or dental health, transportation, housing, and public benefits.

During their time in the programs, the women showed improvements in a range of areas. Compared to intake, women at closing were significantly more likely to be:

- Abstinent
- Involved in AA and/or NA
- Involved in some form of recovery support
- Housed (not homeless)
- Housed in living arrangements considered "stable" and "supportive to recovery"
- Employed
- Insured
- Connected to a primary care physician and/or clinic

A preliminary analysis of the factors contributing to these positive outcomes found that, in particular, *contact with staff* (specifically, 4+ hours of contact per month) and a *connection to mental health services* was related to several positive outcomes, including abstinence and successful completion of treatment. Furthermore, at closing, "successful" clients were more likely to: be in stable housing; be in their own home or permanent supportive housing; be involved in a self-help or recovery support activity; and not be involved with the criminal justice system.

Future reports will continue to examine outcomes for women and children at closing, as well as their long-term well-being when results from the follow-up interviews (completed after the women leave the programs) become available.

Appendix

- A. Background
- B. Evaluation methods
- C. Additional data tables
- D. Evaluation tables (from database)

A. Background

Project overview

In 2016, the Minnesota Department of Human Services Alcohol and Drug Abuse Division (ADAD) contracted with 12 grantees across Minnesota to provide treatment support and recovery services for pregnant and parenting women who have substance use disorders, and their families. Through this initiative, known as Women's Recovery Services, grantees provide comprehensive, gender-specific, family-centered services for women in their care. The primary goals of the Women's Recovery Services initiative are to help program participants remain alcohol and drug free, obtain or retain employment, remain out of the criminal justice system, find and secure stable housing, access physical and mental health services for themselves and their children, and deliver babies who test negative for substances at birth (if pregnant). In addition, the initiative aims to provide participants with information and support with regard to parenting. The current cycle of the Women's Recovery Services initiative began in July 2016 and will continue through June 2019, with the possibility of an extension.

The Department of Human Services contracted with Wilder Research of Saint Paul to conduct a comprehensive evaluation of these treatment support and recovery services. This report generally covers program activities that occurred from January through May 2017 (the second half of year one of the grant) for 11 of the 12 grant funded programs; data from one program was excluded due to limited staff capacity to capture the data. The 12 funded grantees include: the American Indian Family Center (Wakanyeja Kin Wakan Pi "Our Children are Sacred" Program), Avivo (Mothers Achieving Recovery for Family Unity (MARFU) Program), Fond du Lac Reservation (Tagwii Plus Women's Recovery Program), Hope House of Itasca County (Project Clean Start), Meeker-McLeod-Sibley Community Health Services (Project Harmony), Perspectives Inc. (Women and Children: Hand in Hand), Ramsey County Community Human Services (Mothers First Program), RS EDEN (RS Eden Women and Children's Family Center), St. Cloud Hospital Recovery Plus (Journey Home-Family Unity Program), St. Stephens Human Services (Kateri Residence), Wayside House (Rise Up in Recovery Program), and Wellcome Manor.

Eligibility guidelines for the grant

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

actively using alcohol or drugs are also eligible to receive program services, regardless of treatment status.

Program services

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

Treatment and recovery services and supports

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

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

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

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

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

Parenting services and supports

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

B. Evaluation methods

Overview

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

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

Process evaluation

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

Outcome evaluation

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

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

Data collection instruments

Research staff, in partnership with ADAD, developed or identified four instruments in order to collect information about women receiving program services. For the current evaluation year, all forms were available in paper format as well as in a web-based database, into which all data were ultimately entered. Data collection instruments for year one are described in more detail below.

Client-level forms

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

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

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

Closing form: Program staff complete a closing form for each woman when they leave the program. The closing form gathers information about maternal health data, child health data, use of services while enrolled, length of sobriety in the program, treatment status, program referrals, and closing status. In addition, the closing form is used to

capture information about services and referrals related to recovery support, physical and mental health, employment, housing, emergency needs, culturally specific needs, and child-specific needs. It also asks program staff to record all screenings and assessments administered to women and their children while in the program, including those administered directly by the program and by other agencies, if known.

Follow-up interviews

In order to track the progress of women and the maintenance of their goals, follow-up interviews will be conducted with women one month, six months, and 12 months after they leave the program. Wilder Research began conducting interviews by telephone reporting year two (Fall 2017) and will continue through the duration of the grant. Interviewers ask respondents about their access to social support, education and employment, housing, transportation, physical and mental health, substance use, involvement with the criminal justice and child protection systems, self-efficacy, parenting and their relationship with their child(ren), children's health and well-being, and their satisfaction with the program.

Technical assistance

Throughout the grant period, Wilder Research provides programs with evaluation technical assistance (TA) as requested. In years two or three of the grant, this TA will include an offer to conduct optional program-specific evaluation activities beyond what is required for the cross-site evaluation.

Analysis

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

Limitations

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

Completeness of data

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

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

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

Interpreting data when there are small numbers of women involved

It is important to use caution interpreting data when there are small numbers of cases reported (small "N" sizes). Percentages are based on number of participants, and in some cases, there are fewer than 10 participants to report. Therefore, it is recommended that tables be examined carefully, and the number of cases be kept in mind when interpreting results as such findings are less reliable and may not be representative.

C. Additional data tables

C1. Change in alcohol and drug use from intake to closing (N=301)

	n	%
Not using substances at closing		
Decreased use: not using drugs/alcohol at all	161	54%
No change: not using drugs/alcohol at intake or closing	69	23%
Using substances less at closing		
Decreased use: still using drugs/alcohol but using less	32	11%
Using substances more or at the same level at closing		
Increased use: using drugs/alcohol more	16	5%
No change: using drugs/alcohol at intake or closing	3	1%
Drug/alcohol use unknown	20	7%

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C2. Complete list of matched analysis results

		Intake		Closing	
	Total N	n	%	n	%
Did not use substances within the 30 days prior to	254	107	42%	206	81%***
Women involved in AA and/or NA at	254	165	65%	206	81%***
Women involved in any form of recovery support	244	178	73%	223	91%***
Employed	249	26	10%	48	19%**
In school or a career training program	270	5	2%	13	5%*
In housing (not homeless)	175	152	87%	171	98%***
In own home/permanent supportive housing	151	62	41%	68	45%
In living arrangements supportive to recovery	203	116	57%	180	89%***
In stable living arrangements	221	109	49%	161	73%***
Not involved in child protection	267	106	40%	118	44%*
Not involved with the criminal justice system	264	140	53%	144	55%
Not arrested in the prior 30 days	251	213	85%	244	97%***
Woman has medical insurance	261	233	89%	257	99%***
Woman has a primary care physician and/or clinic	254	184	72%	204	80%**

Note. Differences between intake and closing were tested using the McNemar's test and are significant at: ***p<.001, **p<.01, and *p<.05.

C3. Contributors to positive outcomes analysis: Factors and outcomes analyzed

Individual client factors	Potential positive outcomes			
 Being pregnant at intake 	- Abstinent at closing (defined as no substance			
 Having at least 4 in-person contact per month with program staff 	use in the 30 days prior to closing)			
	 Decreased substance use at closing 			
 Having at least 80 hours of total contact time with program staff 	 No out-of-home placements for babies immediately following their birth 			
 Successfully completing treatment before enrolling in 	 Negative toxicology results for mothers 			
the program	 Negative toxicology results for babies born to 			
 Successfully completing treatment by closing 	mothers who were pregnant while in the program			
 Using alcohol, heroin/opiates, marijuana, methamphetamines, or pharmaceutical opioids as the 	 Successful completion of treatment at program closing 			
primary drug of choice	 No involvement with child protection at closing 			
 Receiving medically assisted treatment (MAT) while in 	(for those women who were involved at intake)			
the program	- Reunification with one or more children at closing			
 Being in a living arrangement considered by staff to be stable and supportive to recovery at closing 				
- Having been in treatment three or more times previously				
- Race				
 Being involved with child protection at intake 				
 Being involved with the criminal justice system at intake 				
 Having a history of homelessness 				
 Having a severe or chronic physical health conditions at intake 				
 Having a mental health diagnosis at intake 				
 Being connected to mental health services at closing 				

D. Evaluation tables (from database)

7/17/2017

2016 Women's Services - Aggregate Data

Wilder Rese	earch				Add Quest	ion/Suggestior			
My Apps	Equipment Sc	ch 2016 V	Nomen's	The Queue	Homel	ess Stud…	Women's Servi	. New	Арр
Home	Users	Programs	Reports	Clients	Intakes	Dependents	UA/Contacts	Pregnancies	Closings
Programs SETTINGS	Ag… REPORTS &	CHARTS					+ New		More
								Form saved	

Evaluation Tables: Part One

Program Name Aggregate Data

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

Table 1

Opened, served and closed clients and children

	Clients	Children 🥐	New Babies 🥐		Reporting Period
Clients Still Open from Previous Period	266	<u>540</u>	<u>24</u>	Start Date	01-01-2017
New Opened This Period	<u>412</u>	<u>761</u>	<u>30</u>	End Date	05-31-2017
Total Served this Period	678	1,301	54		
Closed This Period	<u>301</u>	<u>624</u>			

Table 2

Eligibility of new clients opened this period

	Number	%
New Clients Opened This Period	<u>412</u>	100%
Clients in Treatment at intake	<u>354</u>	86%
Clients who completed treatment within 6 months prior to intake	<u>25</u>	6%
Clients who plan to enter treatment within 3 months of intake	12	3%
Clients who were pregnant and using drugs or alcohol at intake	<u>31</u>	8%
Clients not in treatment (not meeting eligibility criteria)	<u>7</u>	2%

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Reason for no treatment	Number of Intakes
At risk of relapse	1
Client is parenting and using marijuana	1
Client refused outpatient, no further recommendations	1
Had baby in 12/21/16, last use 12/2/16	1
In recovery with new baby	1
Recommended by child protection to participate	1
tested positive marijuana 2/17 & 3/17	1
Totals (7 groups)	7

Table 3

Parenting status of new clients opened this period

	Number	%
Clients who were pregnant at intake from this period	<u>98</u>	24%
Clients who were parenting at intake	358	87%
	CLIENTS SERVED THIS YEAR	

Descriptive information at intake

Table 4

Referral source

How was the client referred to your program?	Number of Intakes	Number of Intakes (% of col)
(empty)	3	0.4%
Child Protection	125	18.4%
Community program	35	5.2%
Treatment	149	22.0%
Mental health center	14	2.1%
Corrections	56	8.3%
Drug court	16	2.4%
Family/friends	33	4.9%
Clinic/hospital	47	6.9%
Self-referral	92	13.6%
Another WRS grant-funded program	3	0.4%
Other	91	13.4%
Unknown	14	2.1%
Totals (13 groups)	678	100.0%

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Other Referral Source	Number of Intakes
Anonomys	1
Attorney	1
City Attorney	1
Commitment worker	1
Community Action Services	1
Courts (client is on commitment)	1
Domestic Violence Shelter	2
Former Probation Officer	1
Hennepin County CoC	1
Hennepin County CoC - Shelter	28
Hennepin County CoC -Shelter	2
Hennepin County Intake Unit	1
Hennepin County Shelter	2
ICW	1
In Home Worker	1
In-home parenting worker	1
Insurance Company	1
methadone clinic	1
Mission Detox	1
Past clinets of Wellcome Manor Family Services	1
PHN	1
Probation	1
Probations	1
Public Health	1
Public Health Nurse thru Ramsey County	1
Recovery coach/ was a previous client	1
reentry program	1
Rule 25	1
Rule 25 - Clay Co.	1
Rule 25 Assessor	21
Rule 25 Assessor at ART	1
Rule 25 assessor, Wilkin County	1
Rule 25 SW	1
self	1
self-referred	1
Social Services	1
Stay of Committment	1
Wayside Residential	2
Web search	1
White Earth tribe	1
Totals (40 groups)	91

Table 5

Clients by County

County Name	Number of Intakes	Number of Intakes (% of col)
(empty)	3	0.4%
<u>Aitkin</u>	4	0.6%
<u>Anoka</u>	11	1.6%
Becker	8	1.2%
Beltrami	15	2.2%
Benton	7	1.0%
Blue Earth	3	0.4%
Brown	5	0.7%
Carlton	8	1.2%
Carver Cass	6	0.4%
Chippewa	3	0.9%
Chisago	2	0.3%
Clay	3	0.0%
Cook	3	0.4%
Crow Wing	7	1.0%
Dakota	15	2.2%
Dodge	2	0.3%
Douglas	3	0.4%
Freeborn	2	0.3%
Goodhue	2	0.3%
Grant	1	0.1%
<u>Hennepin</u>	221	32.6%
Houston	2	0.3%
<u>Hubbard</u>	1	0.1%
Isanti	2	0.3%
<u>Itasca</u>	31	4.6%
Kanabec	1	0.1%
Kandiyohi	1	0.1%
Lac Qui Parle	1	0.1%
Le Sueur	1	0.1%
Lyon	2	0.3%
Mahnomen Mal aad	3 21	0.4%
McLeod Meeker	9	1.3%
Mille Lacs	13	1.9%
Morrison	3	0.4%
Mower	1	0.1%
Nicollet	2	0.3%
Olmsted	9	1.3%
Otter Tail	3	0.4%
Pennington	3	0.4%
<u>Pine</u>	4	0.6%
Pipestone	1	0.1%
Polk	5	0.7%
Ramsey	104	15.3%
Red Lake	3	0.4%
Redwood	4	0.6%
Renville	1	0.1%
Rice	1	0.1%
Rock	2	0.3%
Scott	6	0.9%
Sibley	7	0.6%
Sibley St. Louis	29	4.3%
Stearns	29	4.3%
Steele	3	0.4%
Todd	1	0.4%
Wabasha	2	0.1%
Wadena	2	0.3%
Washington	7	1.0%
Watonwan	1	0.1%
Wilkin	2	0.3%
Winona	5	0.7%
Wright	12	1.8%
Yellow Medicine	2	0.3%
Totals (66 groups)	678	100.0%

Table 6

Race and ethnicity of clients at intake

<u>Unknown</u> Totals (4 groups)

No

Full Report Email More				
Hispanic Origin		Number of Intakes (% of col)		
<u>(empty)</u>	2	0.3%		
Yes	43	6.3%		

93.1% 0.3%

100.0%

Full Report | Email | More

Race	Number of Intakes	Number of Intakes (% of col)
(empty)	2	0.3%
African American/Black	117	17.3%
American Indian/Alaskan Native	139	20.5%
Asian American/Pacific Islander	11	1.6%
White	340	50.1%
Biracial/Multiracial	56	8.3%
Other	9	1.3%
Unknown	4	0.6%
Totals (8 groups)	678	100.0%

631

678

2

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Other Race	Number of Intakes
African	1
Hispanic	1
Hispanic/Puerto Rican/Mexican	1
Mexican	3
White/Asian American	1
White/Pacific Islander	1
Totals (6 groups)	8

Table 7

Gender and sexual orientation of clients at intake

Full Report Email More					
Gender	Number of Intakes	Number of Intakes (% of col)			
<u>(empty)</u>	3	0.4%			
Female	675	99.6%			
Totals (2 groups)	678	100.0%			

Full Report | Email | More

Sexual Orientation	Number of Intakes	Number of Intakes (% of col)
(empty)	3	0.4%
Heterosexual or straight	557	82.2%
Bisexual	36	5.3%
Homosexual or lesbian/gay	4	0.6%
Unsure about sexual orientation	1	0.1%
Unknown	77	11.4%
Totals (6 groups)	678	100.0%

Table 8

Age at intake

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Age at Intake Category	Number of Intakes	Number of Intakes (% of col)
Under age 18	1	0.1%
Age 18 to under 25	139	20.5%
Age 25 to under 35	397	58.6%
Age 35 to under 49	132	19.5%
Age 49 and older	7	1.0%
Unknown	2	0.3%
Totals (6 groups)	678	100.0%

Table 9

Education Order	Education	Number of Intakes	Number of Intakes (% of col)
2	Some school, but no High School diploma or GED	204	30.1%
3	High School diploma or GED	222	32.7%
4	Some college, but no degree	132	19.5%
<u>5</u>	Vocational Certificate, Associate Degree	87	12.8%
<u>6</u>	College degree or graduate/professional degree	20	2.9%
<u>7</u>	Unknown	10	1.5%
<u>8</u>	(empty)	3	0.4%
Totals (7 groups	i)	678	100.0%

Table 10

Participation in school/career training at intake

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Full Report | Email | More

Are you in school or a career training program?	Number of Intakes	Number of Intakes (% of col)
(empty)	2	0.3%
Yes	17	2.5%
No	652	96.2%
Unknown	7	1.0%
Totals (4 groups)	678	100.0%

Table 11

Employment at intake

Full Report | Email | More

Employment	Number of Intakes	Number of Intakes (% of col)
(empty)	3	0.4%
Unable to work/disabled	2	0.3%
Unemployed – not looking for work	20	2.9%
Employed full-time or part-time	82	12.1%
Disabled/Unable to work	27	4.0%
Unemployed – looking for work	125	18.4%
Unemployed - not looking for work, including clients who are in school and not working	408	60.2%
Other	4	0.6%
Unknown	7	1.0%
Totals (9 groups)	678	100.0%

Full Report | Email | More

Other Employment	Number of Intakes
Employed but on leave for pregnancy	1
LOA	1
Stay at home Mom	1
Worked in Jail	1
Totals (4 groups)	4

Table 12

Living arrangements at intake

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Living arrangement during the past 30 days	Number of Intakes	Number of Intakes (% of col)
(empty)	2	0.3%
No home at present and not in a shelter	2	0.3%
In own house or apartment	146	21.5%
In relative or friend's home	236	34.8%
Transitional housing or GRH (Group Residential Housing)	11	1.6%
Permanent supportive housing	3	0.4%
Sober house/halfway house	6	0.9%
A shelter or motel (using a voucher)	63	9.3%
A place not intended for housing like outside, car, vacant building, etc.	29	4.3%
Correctional facility	41	6.0%
Inpatient treatment facility	104	15.3%
Other	25	3.7%
Unknown	10	1.5%
Totals (13 groups)	678	100.0%

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

Full Report | Email | More

Living Prior to Treatment	Number of Intakes	
In own house or apartment	23	22.1%
In relative or friend's home	30	28.8%
Transitional housing and/or GRH (Group Residential Housing)	3	2.9%
Permanent supportive housing	1	1.0%
Sober house/halfway house	1	1.0%
A shelter (emergency or domestic violence) or motel	10	9.6%
A place not intended for housing like outside, car, vacant building, etc.	5	4.8%
Correctional facility	9	8.7%
<u>Other</u>	19	18.3%
Unknown	3	2.9%
Totals (10 groups)	104	100.0%

Full Report | Email | More

Other Living Arrangement	Number of Intakes
BRF residential treatment	7
couch hopping	4
Ex boyfriends sisters house	1
Group Home	1
hotel-no voucher	1
inpatient treatment	3
No home at present and not in a shelter	1
no home at present and not in shelter	1
Psych Ward	1
residential treatment	1
Section 8 Housing	1
treatment	2
treatment at Teen Challenge	1
Totals (13 groups)	25

Full Report Email More

Supportive living arrangements	Number of Intakes	Number of Intakes (% of col)
<u>(empty)</u>	3	0.4%
Yes	355	52.4%
No	276	40.7%
Unknown	44	6.5%
Totals (4 groups)	678	100.0%

Stable living arrangements	Number of Intakes	Number of Intakes (% of col)
(empty)	3	0.4%
Yes	289	42.6%
No	353	52.1%
<u>Unknown</u>	33	4.9%
Totals (4 groups)	678	100.0%

Full Report Email More		
Ever been homeless	Number of Intakes	Number of Intakes (% of col)
(empty)	9	1.3%
Yes	467	68.9%
No	150	22.1%
Unknown	52	7.7%
Totals (4 groups)	678	100.0%

	Number of Intakes	Number of Intakes (% of col)
(empty)	58	12.4%
1	124	26.6%
2	77	16.5%
3	60	12.8%
<u>4</u>	44	9.4%
<u>5</u>	39	8.4%
<u>6</u>	11	2.4%
<u>7</u>	5	1.1%
<u>8</u>	4	0.9%
<u>10</u>	36	7.7%
<u>11</u>	1	0.2%
<u>12</u>	1	0.2%
<u>15</u>	2	0.4%
<u>16</u>	1	0.2%
<u>20</u>	3	0.6%
<u>30</u>	1	0.2%
Totals (16 groups)	467	100.0%

Table 14

Totals (4 groups)

Physical and mental health at intake

 Full Report
 Email
 More

 Emergency Room past 6 mo
 Number of Intakes (% of col)
 Number of Intakes (% of col)

 (empty)
 5
 0.7%

 Yes
 252
 37.2%

 No
 329
 48.5%

 Unknown
 92
 13.6%

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

678

100.0%

Full Report Email More						
Program Name	Number of Intakes	v	of ER # of ER visits visits (avg) (min		s visits	
Aggregate Data	242		2.12	1.0	0 15.00	
Totals (1 groups)	242		2.12	1.0	0 15.00	
Full Report Email More						
Do you have any s physical health pro	onic		nber of ntakes	Number of Intakes (% of col)		
<u>(empty)</u>				5	0.7%	
Yes	274	40.4%				
No			373	55.0%		
<u>Unknown</u>			26	3.8%		
Totals (4 groups)				678	100.0%	

Program Name	Number of Intakes	CH - Arthritis or carpal tunnel (tot)	CH - Cancer (tot)	CH - Chronic neck or back problems (tot)		CH - Endometriosis (tot)		CH - Heart/circulatory illness (tot)	CH - Hepatitis C (tot)	CH - High blood pressure (tot)
Aggregate Data	678	31	3	66	11	5	15	8	13	30
Totals (1 groups)	678	31	3	66	11	5	15	8	13	30

Full Report	Email Moi	e								
Program Name	Number of Intakes		CH - Kidney stones (tot)	CH - Lung/respiratory illness (tot)			CH - Other (tot)	CH - Seizure disorder (tot)	CH - Sexually transmitted infection (tot)	
Aggregate Data	678	1	6	54	38	29	44	4	5	46
Totals (1 groups)	678	1	6	54	38	29	44	4	5	46

Full Report | Email | More

Specify physical health problems	Numbe

Specify physical health problems	Number of Intakes
asthma	2
Auto immune hepatitis	1
back and hand problem	1
back problems and asthma	1
blood clot in lung, chest and arm	1
Brain tumors	1
Broken hand and thyroid	1
central cord syndrome	1
chronic back pain	1
Degenerative discs	1
Diabetes	1
Fibroids	1
fibromyalgia and asthma	1
gastrointestinal issues	1
Glycoma	1
Hep B	1
high blood pressure	1
Hip displacement from birth	1
Hole in heart	1
hydrotenitisupertiba	1
hypothyroidism	4
Insomnia	1
Irritable bowel	1
kidney problems	1
kidney problems	1
Left Miniscus / Left bunyon required surgery	1
Liver	1
Liver and Kidney Failure	1
Lupus	2
MRSA	2
MS, Carrier MD, DJD, Chronic Pneumonia	1
Multiple sclerosis	2
Multiple sclerosis, Crohn's	1
pancreatic	1
Prolapsed uterus	1
prosthetic eye	1
psoriasis	1
restless leg syndrome	1
scoliosis	3
Scoliosis, Infused vertebraes, Tilted hip	1
Skoleosis	1
Stage 3 colon cancer	1
thyroid	1
TMJ	1
Vertigo, hearing loss, permanent nerve damage	1
Totals (45 groups)	54

Full Report | Email | More

Do you currently have a mental health diagnosis?	Number of Intakes	Number of Intakes (% of col)
<u>(empty)</u>	6	0.9%
Yes	539	79.5%
No	122	18.0%
Unknown	11	1.6%
Totals (4 groups)	678	100.0%

Program Name	Number of Intakes	MH - Depressive Disorder (tot)	MH - Bi-Polar/Manic Depression (tot)		MH - ADHD/ADD/Disruptive Behavior Disorder (tot)
Aggregate Data	678	402	106	428	119
Totals (1 groups)	678	402	106	428	119

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Program Name	Number of Intakes	MH - Personality Disorder (tot)	MH - Schizophrenia/ other psychotic disorder (tot)		MH - Unknown Mental diagnosis (tot)
Aggregate Data	678	58	10	12	5
Totals (1 groups)	678	58	10	12	5

Specify Other Mental Health diagnosis	Number of Intakes
"Learning Disability"	1
attachment disorder/learning disabled	1
Cyclothymic Disorder	1
Eating Disorder	1
Insomnia	2
Learning Disability, Attachment Disorder	1
Memory Loss	1
ODD & Mood disorder	1
Psychosis	1
RAD	1
Sleeping Disorder	1
Totals (11 groups)	12

Full Report | Email | More

Diagnosed with FASD?	Number of Intakes	Number of Intakes (% of col)
(empty)	5	0.7%
No	17	2.5%
Yes	10	1.5%
No, but I suspect I have FASD	26	3.8%
No, and I do not suspect I have FASD	541	79.8%
Unknown	79	11.7%
Totals (6 groups)	678	100.0%

Full Report | Email | More

Diagnosed with a TBI?	Number of Intakes	Number of Intakes (% of col)
(empty)	6	0.9%
No	17	2.5%
Yes	32	4.7%
No, but I suspect it	35	5.2%
No, and I do not suspect it	519	76.5%
<u>Unknown</u>	69	10.2%
Totals (6 groups)	678	100.0%

Full Report | Email | More

Diagnosed with PTSD?	Number of Intakes	Number of Intakes (% of col)
(empty)	5	0.7%
No	10	1.5%
Yes	289	42.6%
No, but I suspect it	51	7.5%
No, and I do not suspect it	266	39.2%
<u>Unknown</u>	57	8.4%
Totals (6 groups)	678	100.0%

Table 15

Medical insurance at intake

Full Report Email More						
Do you have medical or insurance coverage?	Number of Intakes	Number of Intakes (% of col)				
(empty)	3	0.4%				
Yes, public insurance (MA, PMAP, MNCare, etc)	585	86.3%				
Yes, private insurance	17	2.5%				
No	65	9.6%				
Unknown	8	1.2%				
Totals (5 groups)	678	100.0%				

Table 16

Primary physician or clinic at intake

Full Report Email More						
Do you have a primary care physician or clinic?	Number of Intakes	Number of Intakes (% of col)				
<u>(empty)</u>	4	0.6%				
Yes, physician only	16	2.4%				
Yes, clinic only	161	23.7%				
Yes, both physician and clinic	300	44.2%				
No, neither	165	24.3%				
Unknown	32	4.7%				
Totals (6 groups)	678	100.0%				

Table 17

Poverty status at intake

Full Report Email More					
Income Below Federal Poverty Guidelines	Number of Intakes	Number of Intakes (% of col)			
(empty)	3	0.4%			
Yes	610	90.0%			
No	21	3.1%			
Unknown	44	6.5%			
Totals (4 groups)	678	100.0%			

Table 18

Connections to community resources at intake

Full Report Email More								
Program Name		Benefits - MFIP cash assistance (tot)		Benefits - Food Support (SNAP/food stamps) (tot)	Assistance (tot)	Benefits - Subsidized housing (tot)		
Aggregate Data	678	196	125	298	111	42	12	37
Totals (1 groups)	678	196	125	298	111	42	12	37

Full Report | Email | More

Program Name		Benefits - Social Security (regular retirement) (tot)	SSI/SSDI	Benefits - Unemployment benefits (tot)				
Aggregate Data	678	2	54	3	0	28	0	164
Totals (1 groups)	678	2	54	3	0	28	0	164

Table 19

Child protection involvement at intake

Full Report Email More							
Currently involved with Child Protection?	Number of Intakes	Number of Intakes (% of col)					
<u>(empty)</u>	3	0.4%					
Yes	350	51.6%					
No	323	47.6%					
Unknown	2	0.3%					
Totals (4 groups)	678	100.0%					

Table 20

Criminal justice system involvement and arrests at intake

Full Report Email More							
Currently involved with the criminal justice system?	Number of Intakes	Number of Intakes (% of col)					
<u>(empty)</u>	4	0.6%					
Yes	323	47.6%					
No	347	51.2%					
Unknown	4	0.6%					
Totals (4 groups)	678	100.0%					

Wilder Rese	earch				Add Questi	on/Suggestion			
My Apps	Equipment Sch	2016 V	Vomen's	The Queue	Homel	ess Stud…	Women's Servi	Nev	v App
Home	Users	Programs	Reports	Clients	Intakes	Dependents	UA/Contacts	Pregnancies	Closings
Programs SETTINGS	Ag REPORTS & C	CHARTS					+ New		More

Evaluation Tables: Part Two

Program Name Aggregate Data

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

CLIENTS CLOSED THIS YEAR

Table 50

Length of participation in program

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

All clients served

Full Report Email More

Program Name	Number of Closings	Months Enrolled in Program (min)		Months Enrolled in Program (avg)
Aggregate Data	301	0.0	23.3	3.3
Totals (1 groups)	301	0.0	23.3	3.3

Women who met all program criteria

Full Report Email More

Program Name	Total N (tot)	Months Enrolled in Program (min)	Months Enrolled in Program (max)	Months Enrolled in Program (avg)
Aggregate Data	26	6.1	23.3	9.2
Totals (1 groups)	26	6.1	23.3	9.2

Women who did not meet all program criteria

Full Report Email More

Program Name	Total N (tot)	Months Enrolled in Program (min)	Months Enrolled in Program (max)	Months Enrolled in Program (avg)
Aggregate Data	275	0.0	17.8	2.8
Totals (1 groups)	275	0.0	17.8	2.8

Table 51

Closing status

Full Report Email More		
Was the client doing well when she exited the program?	Number of Closings	Number of Closings (% of col)
Yes, client was doing well at exit	177	58.8%
No, client was not doing well at exit	124	41.2%
Totals (2 groups)	301	100.0%

Program Name	Total N (tot)	NDW-Actively using substances (tot)		program requirements		NDW-Disappeared/could not be reached (tot)	NDW-Other (tot)
Aggregate Data	124	37	65	87	14	24	10
Totals (1 groups)	124	37	65	87	14	24	10

NDW-Other (please describe)	Number of Closings
AWOL from Treatment	1
Client discharged against staff advice	1
Client moved out of Ramsey County	1
Client was in jail	1
Medical surgeries and problems	1
Not following recommendations and making impulsive choices	1
Open Child Protection Case in Hennepin County	1
Physical altercation with another client	1
Stole credit card from roommate	1
Transferred to different program	1
Totals (10 groups)	10

Table 52

Program criteria met

Full Report	Email Mo	ore						
Program Name	Number of Closings	Enrolled for a minimum of 6 months (tot)	Completed evidence- based parenting curriculum (tot)	Client was abstinent from drugs and alcohol at exit (tot)	Developed a care plan and treatment plan with staff (tot)	Met all program criteria (tot)	Met all program criteria and doing well (tot)	Met No Program Criteria at exit (tot)
Aggregate Data	301	49	127	218	196	26	26	48
Totals (1 groups)	301	49	127	218	196	26	26	48

Table 53

Recieving additional recovery case management services at closing

Full Report | Email | More

Transferred to another agency	Number of Closings	Number of Closings (% of col)
(empty)	1	0.3%
Yes, by another agency funded by the Women's Recovery Services grant	32	10.6%
Yes, by another program that provides recovery-related case management services not funded by the grant	106	35.2%
No, not receiving recovery-related case management services after closing	127	42.2%
Unknown	35	11.6%
Totals (5 groups)	301	100.0%

Table 54

School status and education outcomes at closing

Full Report Email More						
Were you in school or a career training program?	Number of Closings	Number of Closings (% of col)				
Yes	13	4.3%				
No	285	94.7%				
Unknown	3	1.0%				
Totals (3 groups)	301	100.0%				

Full Report Email More								
Program Name	Number of Closings	S/E - Received GED/ High School diploma (tot)			license/certificate	S/E - No education achievements (tot)		
Aggregate Data	301	1	0	5	1	290	4	
Totals (1 groups)	301	1	0	5	1	290	4	

Table 55

Employment status at closing

7/17/2017

2016 Women's Services - Aggregate Data

Full Report	Email	More

Employment	Number of Closings	Number of Closings (% of col)
(empty)	1	0.3%
Employed full-time or part-time	49	16.3%
Unable to work/disabled	9	3.0%
Unemployed – looking for work	63	20.9%
<u>Unemployed – not looking for work, including clients in school and not</u> working	169	56.1%
Other	2	0.7%
Unknown	8	2.7%
Totals (7 groups)	301	100.0%

Full Report Email More

Other Employment	Number of Closings
Self Employed	1
was going to return to employment	1
Totals (2 groups)	2

Table 56

Living arrangements at closing

Full Report | Email | More

Where is the client currently living?	Number of Closings	Number of Closings (% of col)
(empty)	1	0.3%
In own house or apartment	85	28.2%
In relative or friend's home	106	35.2%
Transitional housing and/or GRH	24	8.0%
Permanent supportive housing	1	0.3%
Sober house/halfway house	14	4.7%
A shelter or motel (using a voucher)	12	4.0%
Inpatient treatment facility	5	1.7%
Correctional facility	4	1.3%
Other	2	0.7%
Unknown	47	15.6%
Totals (11 groups)	301	100.0%

Full Report | Email | More

Specify Other living location	Number of Closings
<u>Hospital</u>	1
Outpatient treatment with residential housing	1
Totals (2 groups)	2

Full Report Email More

Are these living arrangements supportive to the client's recovery?	Number of Closings	Number of Closings (% of col)
Yes	200	66.4%
No	30	10.0%
Unknown	71	23.6%
Totals (3 groups)	301	100.0%

Full Report | Email | More

Would you consider these living arrangements stable?	Number of Closings	Number of Closings (% of col)
Yes	177	58.8%
No	66	21.9%
Unknown	58	19.3%
Totals (3 groups)	301	100.0%

How long has client been living in this location?	Number of Closings	Number of Closings (% of col)
Less than 6 months	161	53.5%
6 months to less than 1 year	41	13.6%
1 year or more	31	10.3%
Unknown	68	22.6%
Totals (4 groups)	301	100.0%

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

Full Report E	Email Moi	re		
Program Name	Number of Clients (tot)	# of days in current location (min)		
Aggregate Data	139	1	180	26
Totals (1 groups)	139	1	180	26

Table 57

Mental health diagnoses at closing

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

of Clients with New Mental Health Diagnoses at Closing

<u>68</u>

of Clients with No New Mental Health Diagnoses at Closing

233

At Closing

Full Repo	ort Emai	I More			
Program Name	Number of Closings	MHD - Depressive Disorder (tot)	MHD - Bi- Polar/Manic Depression (tot)	MHD - Anxiety Disorder, including PTSD (tot)	MHD - ADHD/ADD/Disruptive Behavior Disorder (tot)
<u>Aggregate</u> <u>Data</u>	301	197	42	202	48
Totals (1 groups)	301	197	42	202	48

At intake or at closing

Full Report | Email | More # of Depressive akes Disorder* or (tot) Anxiety Program Name Bipolar disorder/ Attention-deficit Manic Disorder* depression* (tot) Intakes or and Disruptive Closings (tot) Behavior Disorder* (tot) (tot) 301 59 Aggregate Data 213 50 215 Totals (1 groups) 301 213 50 215 59

Program Name	Number of Closings	MHD - Personality Disorder (tot)	MHD - Schizophrenia/ other psychotic disorder (tot)	MHD - Other mental health diagnosis (tot)	MHD - Unknown mental health diagnosis (tot)
<u>Aggregate</u> Data	301	23	3	12	15
Totals (1 groups)	301	23	3	12	15

Full Report Email More

Full Report	t Email	More			
Program Name	# of Intakes or Closings (tot)	Personality Disorder* (tot)	Schizophrenia/ other psychotic disorder* (tot)	Other mental health diagnosis* (tot)	Unknown mental health diagnosis* (tot)
<u>Aggregate</u> <u>Data</u>	301	28	3	17	16
Totals (1 groups)	301	28	3	17	16

Other diagnoses at closing

Full Report Email More	
Specify Other mental health diagnoses	Number of Closings
"Learning Disability"	1
Adjustment Disorder	5
Adjustment Disorder with Anxiety	1
Adjustment Disorder with mixed anxiety and depression	1
Attachment	1
attachment disorder/learning disability	1
Insomnia	1
sleeping disorder	1
Totals (8 groups)	12

Table 58

Mental health services at closing

Full Report Email More		
Is client currently receiving mental health services?	Number of Closings	Number of Closings (% of col)
(empty)	2	0.7%
Yes, client is currently receiving mental health services	108	35.9%
No, but client is connected to a specific clinic/therapist that she can contact if services are needed	57	18.9%
No, client needs mental health services but is not connected to specific clinic/therapist	50	16.6%
Not applicable, client does not need mental health services	19	6.3%
Unknown	65	21.6%
Totals (6 groups)	301	100.0%

Table 59

Other Client Diagnoses at closing

Confirmed FASD Diagnosis	Number of Closings	Number of Closings (% of col)
Yes	2	0.7%
No, but it is suspected the client has FASD	17	5.6%
No, client has never received a FASD diagnosis	227	75.4%
Unknown	55	18.3%
Totals (4 groups)	301	100.0%

Full Report | Email | More

Diagnosed with a TBI?	Number of Closings	Number of Closings (% of col)
(empty)	1	0.3%
Yes, the client was diagnosed before entering the program	10	3.3%
Yes, the client was diagnosed while enrolled in the program	1	0.3%
No, client has never received a TBI diagnosis	230	76.4%
Unknown	59	19.6%
Totals (5 groups)	301	100.0%

Full Report | Email | More

Diagnosed with PTSD?	Number of Closings	Number of Closings (% of col)
(empty)	1	0.3%
Yes, the client was diagnosed before entering the program	114	37.9%
Yes, the client was diagnosed while enrolled in the program	27	9.0%
No, client has never received a PTSD diagnosis	118	39.2%
Unknown	41	13.6%
Totals (5 groups)	301	100.0%

Table 60

Change in intimate partner violence at closing

Full Report Email More

Client in an abusive relationship at intake	Number of Closings	Number of Closings (% of col)	
(empty)	1	0.3%	
Yes	36	12.0%	
No	188	62.5%	
Unknown	76	25.2%	
Totals (4 groups)	301	100.0%	

Full Report | Email | More

# of Intakes (tot)	# of Intakes (tot) (% of col)	
1	2.8%	
24	66.7%	
8	22.2%	
3	8.3%	
36	100.0%	
	Intakes (tot) 1 24 8 3	

Table 61

Medical insurance at closing

Full Report | Email | More

Does client have medical or insurance coverage at case closing?	Number of Closings	Number of Closings (% of col)
Yes, public insurance (MA, PMAP, MNCare)	282	93.7%
Yes, private insurance	4	1.3%
No	4	1.3%
Unknown	11	3.7%
Totals (4 groups)	301	100.0%

Table 62

Primary physician or clinic at closing

Does client have a primary care physician or clinic at case closing?	Number of Closings	Number of Closings (% of col)
Yes, physician	7	2.3%
Yes, clinic	56	18.6%
Yes, both physician and clinic	164	54.5%
No, neither	55	18.3%
Unknown	19	6.3%
Totals (5 groups)	301	100.0%

Table 63

Child protection involvement at closing

Full Report Email More

Currently involved with Child Protection?	Number of Closings	Number of Closings (% of col)
(empty)	1	0.3%
Yes	160	53.2%
No	130	43.2%
Unknown	10	3.3%
Totals (4 groups)	301	100.0%

Table 64

Criminal justice system involvement and arrests at closing

Full Report Email More

Currently involved with the criminal justice system?	Number of Closings	Number of Closings (% of col)	
<u>(empty)</u>	1	0.3%	
Yes	131	43.5%	
No	156	51.8%	
<u>Unknown</u>	13	4.3%	
Totals (4 groups)	301	100.0%	

Full Report Email More

Has client been arrested in the past 30 days ?	Number of Closings	Number of Closings (% of col)
<u>(empty)</u>	1	0.3%
Yes	9	3.0%
No	273	90.7%
Unknown	18	6.0%
Totals (4 groups)	301	100.0%

Substance abuse and treatment status at closing

Table 65

Chemical use at closing

Used any substances in past 30 days	Number of Closings	Number of Closings (% of col)
Yes	61	20.3%
No	218	72.4%
Unknown	22	7.3%
Totals (3 groups)	301	100.0%

Reason for Unknown Drug Use	Number of Closings	Number of Closings (% of col)
Client did not disclose	1	4.3%
client discharged against staff advice	1	4.3%
client discontnued services without notifying	1	4.3%
Client had a relapse and then had medical issues.	1	4.3%
Client has been in and out of jail. No response for 4 months.	1	4.3%
client left program against staff advice, unable to contact at closing	1	4.3%
client may have used in treatment	1	4.3%
client moved out and did not return calls to this writer	1	4.3%
Client wasn't with us long enough	1	4.3%
Could not reach client for an update.	1	4.3%
did not come back to programming	1	4.3%
Didn't have client long enough	1	4.3%
dissapeared and could not be reached	1	4.3%
has not been complinat with program expectations and come to groups or to do UA's	1	4.3%
left ASA	1	4.3%
may have used Meth	1	4.3%
no contact	1	4.3%
no contact/UA within 30 days	3	13.0%
not providing UA's regulalry	1	4.3%
They may have used in treatment but did not admit	1	4.3%
Unable to reach client in the past 30 days.	1	4.3%
Totals (21 groups)	23	100.0%

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Program Name	Number of Closings	Substance - Alcohol (tot)	Substance - Cocaine powder (tot)	Substance - Crack (tot)	Substance - Marijuana/ Hashish (tot)	Substance - Heroin (tot)	Substance - Non- prescription Methadone (tot)	Substance - Pharmaceutical Opioids (tot)	Substance PCP (tot)
Aggregate Data	301	22	4	2	13	9	1	10	1
Totals (1 groups)	301	22	4	2	13	9	1	10	1

Full Report Email More

Program Name	Number of Closings	Substance - Other Hallucinogens/ Psychedelics (tot)		Substance - Other Amphetamines (tot)		Substance - Benzodiazepines (tot)	Substance - Other Tranquilizers (tot)	
Aggregate Data	301	1	22	0	0	1	0	0
Totals (1 groups)	301	1	22	0	0	1	0	0

Full Report Email More

Program Name	Number of Closings	Substance - Other Sedatives/ Hypnotics (tot)		Substance - Ecstasy/ other club drugs (tot)	Substance - Inhalants (tot)	Substance - Over-the-Counter Medication (misuse) (tot)		Substance - Unknown Drugs (tot)
Aggregate Data	301	0	0	0	0	1	3	4
Totals (1 groups)	301	0	0	0	0	1	3	4

Full Report Email More

Other drugs (please specify)	Number of Closings
Medications not prescribed to client	1
unknown	1
Used prescription medication that was not prescribed to her.	1
Totals (3 groups)	3

Duration of sobriety at closing

Only includes those with at least 30 days of sobriety.

Full Report Email More					
Program Name	Number of Clients (tot)	Total Days Sober (min)	Total Days Sober (max)	Total Days Sober (avg)	
Aggregate Data	191	30	1698	164	
Totals (1 groups)	191	30	1698	164	

Table 66

Change in alcohol and drug use from entry to closing

Full Report	Email	More
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Change in alcohol/drug use at closing vs. intake?	Number of Closings	Number of Closings (% of col)
Increased use: using drugs/alcohol more	16	5.3%
No change in use: using drugs/alcohol at the same level	3	1.0%
No change in use: not using drugs/alcohol at either entry or case closing	69	22.9%
Decreased use: still using drugs/alcohol but using less	32	10.6%
Decreased use: not using drugs/alcohol at all	161	53.5%
Drug/alcohol use unknown	20	6.6%
Totals (6 groups)	301	100.0%

Reason for Unknown Drug Use Change	Number of Closings	Number of Closings (% of col)
Client completed intake and was transported home from inpatient treatment and was completely unreachable after that.	1	5.0%
client discharged against staff advice	1	5.0%
Client had a relapse and then had medical issues.	1	5.0%
client has been on run from probation/drug court	1	5.0%
Client left ASA	1	5.0%
Client left at staff request	1	5.0%
Client was transferred to another Treatment program	1	5.0%
Client wasn't with us long enough	1	5.0%
client went MIA	1	5.0%
Could not reach client for an update.	1	5.0%
Didn't have client long enough	1	5.0%
dissapeared and could not be reached	1	5.0%
left program within 2 days of entry	1	5.0%
<u>saa</u>	2	10.0%
same as above	1	5.0%
see above	1	5.0%
unknown	1	5.0%
unknown current use	1	5.0%
We didn't have any more contact.	1	5.0%
Totals (19 groups)	20	100.0%

Table 67

Tobacco use at closing

Full Report Email More

In the past 30 days, has the client used tobacco, e-cigarettes, or vaporizers?	Number of Closings	Number of Closings (% of col)
Yes	254	84.4%
No	26	8.6%
Unknown	21	7.0%
Totals (3 groups)	301	100.0%

Table 68

Change in tobacco use from entry to closing

Full Report Email More

Change in tobacco use at closing vs intake?	Number of Closings	Number of Closings (% of col)
Increased use: using tobacco more	6	2.0%
No change in use: using tobacco at the same level	207	68.8%
No change in use: not using tobacco at either entry or case closing	31	10.3%
Decreased use: still using tobacco but using less	21	7.0%
Decreased use: not using tobacco at all	5	1.7%
Tobacco use unknown	31	10.3%
Totals (6 groups)	301	100.0%

Table 69

Treatment participation at closing

Was this client in treatment at any time during the program?	# of Intakes (tot)	# of Intakes (tot) (% of col)
Yes	279	92.7%
No	22	7.3%
Totals (2 groups)	301	100.0%

Program Name	Number of Clients (tot)	# of Treatment Episodes (min)	# of Treatment Episodes (max)	# of Treatment Episodes (avg)
Aggregate Data	279	1.0	3.0	1.1
Totals (1 groups)	279	1.0	3.0	1.1

Full Report Email More

# of Treatment Episodes	Number of Closings	Number of Closings (% of col)
<u>1.0</u>	247	88.5%
2.0	29	10.4%
3.0	3	1.1%
Totals (3 groups)	279	100.0%

Table 70

Treatment setting for most recent episode

Setting of treatment episodes	Number of Closings	Number of Closings (% of col)
Inpatient/residential	149	53.4%
Inpatient/residential Outpatient	6	2.2%
Inpatient/residential Outpatient with housing	31	11.1%
Outpatient	19	6.8%
Outpatient with housing	74	26.5%
Totals (5 groups)	279	100.0%

		with housing (tot)	TX - Unknown (tot)
186	25	105	0
186	25	105	0
	Inpatient/residential (tot) 186	Inpatient/residential (tot) Outpatient (tot) 186 25	(tot) (tot) (tot) 186 25 105

Table 71

Children living with mother in most recent treatment episode

Full Report Email More

Program Name	Number of Clients (tot)	TX - Inpatient/residential (tot)	TX - Inpatient/residential w/children (tot)	# of children in inpatient/residential (tot)		TX - Outpatient with housing w/children (tot)	
Aggregate Data	301	186	77	107	105	38	71
Totals (1 groups)	301	186	77	107	105	38	71

Table 72

All Treatment Outcomes While in the Program

Full Report Email More		
Treatment Outcomes	Number of Closings	Number of Closings (% of col)
Successfully completed Rule 31 treatment	156	55.9%
Successfully completed Rule 31 treatment Noncompliant/Left without staff approval	6	2.2%
Successfully completed Rule 31 treatment Still in treatment	2	0.7%
Successfully completed Rule 31 treatment Other	12	4.3%
Noncompliant/Left without staff approval	79	28.3%
Noncompliant/Left without staff approval Other	2	0.7%
Still in treatment	3	1.1%
Other	18	6.5%
Other Unknown	1	0.4%
Totals (9 groups)	279	100.0%

Program Name	TXO - Successfully completed Rule 31 treatment (tot)		TXO - Noncompliant/Left without staff approval (tot)		TXO - Unknown (tot)
Aggregate Data	176	5	87	33	1
Totals (1 groups)	176	5	87	33	1

Most Recent Treatment Outcome While in the Program

Full Report Email More

Most Recent Treatment Outcome at Closing	Number of Closings	Number of Closings (% of col)
Successfully completed Rule 31 treatment	161	57.7%
Noncompliant/Left without staff approval	87	31.2%
Still in treatment	5	1.8%
Other	26	9.3%
Totals (4 groups)	279	100.0%

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Other treatment support or recovery	Number of Closings
_	1
At staff request	3
Discharged at Staff request	1
Maximum Benefit	4
none	5
referred back to child protection and county civil commitment	1
referred back to child protection for placement in higher level of care	1
staff request	1
Transfer to different residential program	1
Transfered	1
Transferred to a different residential program	1
unknown	1
unkown	2
Totals (13 groups)	23

Table 73

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

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Received medication-assisted treatment (MAT)	Number of Closings	Number of Closings (% of col)
Yes	42	14.0%
No	253	84.1%
Unknown	6	2.0%
Totals (3 groups)	301	100.0%

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Type of MAT	Number of Closings
Methadone	22
Methadone Suboxone	2
Naltrexone	3
Suboxone	12
Subutex	2
Vivitrol	1
Totals (6 groups)	42

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Program Name	Number of			MAT -	MAT -		MAT -	MAT - Other

	Closings	Clonidine (tot)	Methadone (tot)	Naltrexone (tot)	Suboxone (tot)	Subutex (tot)	Vivitrol (tot)	(tot)
Aggregate Data	42	0	24	3	14	2	1	0
Totals (1 groups)	42	0	24	3	14	2	1	0

Table 74

Detox while in program

Full Report Email More							
Was the client in Detox at any time during the program?	Number of Closings	Number of Closings (% of col)					
(empty)	1	0.3%					
Yes	7	2.3%					
No	293	97.3%					
Totals (3 groups)	301	100.0%					

Table 75

Areas where clients received support

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Program Name	PP - Housing (tot)			PP - Physical/dental health (tot)	PP - Mental health/counseling (tot)	PP - Parenting (tot)		PP - Tobacco cessation (tot)	PP - Transportation (tot)
Aggregate Data	191	81	35	232	257	248	97	128	216
Totals (1 groups)	191	81	35	232	257	248	97	128	216

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Program Name	PP - Public benefits (tot)	PP - Financial issues (tot)		PP - Relationship issues (tot)	PP - Prenatal/postnatal care (tot)	PP - Wellness/recreation (tot)		PP - NONE OF THESE (tot)
Aggregate Data	191	46	100	155	54	152	9	4
Totals (1 groups)	191	46	100	155	54	152	9	4

Full Report Email More

Other Program Participation	Number of Closings
Baby items, R25 Assessment	1
Establishing paternity	1
Identification documents	2
nancy page	1
Phone	1
Referral to treatment	1
treatment	1
Treatment Program Transfer	1
Totals (8 groups)	9

Areas clients needed help with most

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Program Name	3MH - Housing (tot)	3MH - Employment (tot)	3MH - Education/job training (tot)	3MH - Physical/dental health (tot)	3MH - Mental health/counseling (tot)	3MH - Parenting (tot)	3MH - Childcare (tot)	3MH - Tobacco cessation (tot)	3MH - Transportation (tot)
Aggregate Data	147	44	11	58	185	205	33	5	39
Totals (1 groups)	147	44	11	58	185	205	33	5	39

Full Report Email More

Program Name	3MH - Public benefits (tot)	3MH - Financial issues (tot)	3MH - Legal issues (tot)	3MH - Relationship issues (tot)		3MH - Wellness/recreation (tot)	3MH - Other (tot)	3MH - NONE OF THESE (tot)
Aggregate Data	24	2	15	58	21	12	5	0
Totals (1 groups)	24	2	15	58	21	12	5	0

Table 76

Participation in other recovery support activities at closing

Full Report Email More								
Program Name	Number of Closings	SH - Alcoholics / Narcotics Anonymous (AA/NA) (tot)		SH - Culturally specific, e.g. sweat lodge (tot)	SH - Faith-based/religious, not AA/NA (tot)	SH - Aftercare (tot)		
Aggregate Data	301	232	1	33	37	34		
Totals (1 groups)	301	232	1	33	37	34		

Full Report | Email | More

Program Name	Number of Closings	SH - Recovery Community Organization (RCO) (tot)	through this	group (tot)	SH - Other recovery support activity (tot)	SH - Unknown support group (tot)	
Aggregate Data	301	12	59	10	3	11	28
Totals (1 groups)	301	12	59	10	3	11	28

Full Report Email	More
Other recovery support	Number of Closings
Family & Friends	1
parenting class	1
Recovery Coach	1
Totals (3 groups)	3

Table 77

Parent education while in the program

Evidence-based parenting education

Full Report Email More

Client participated in an evidence-based parenting program?	Number of Closings	Number of Closings (% of col)
Yes, and she completed the full program, according to the model	117	38.9%
Yes, and she completed the full program, but NOT according to the model	10	3.3%
Yes, but she did not complete it	119	39.5%
No	54	17.9%
Unknown	1	0.3%
Totals (5 groups)	301	100.0%

Table 78

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

Full Report Email More

Engagement with goals/case plan	Number of Clients (tot)	Number of Clients (tot) (% of col)
<u>(empty)</u>	1	0.3%
Very engaged	75	24.9%
Somewhat engaged	135	44.9%
Somewhat disengaged	60	19.9%
Very disengaged	29	9.6%
Unknown	1	0.3%
Totals (6 groups)	301	100.0%

Table 79

Continuing care plan at closing

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Client had a continuing care plan/discharge plan?	Number of Closings	Number of Closings (% of col)
<u>(empty)</u>	1	0.3%
Yes	196	65.1%
No	91	30.2%
Unknown	13	4.3%
Totals (4 groups)	301	100.0%

Table 80

Contacts For Closed Clients

	Average # Contacts	Total contacts	Closed Clients	Average contact time
In Person Contacts	36.0	<u>8744</u>	<u>243</u>	0.8
Phone Contacts	13.5	<u>1069</u>	<u>79</u>	0.2
Group Contacts	116.3	27,322.25	235	1.4
Average # of All Contacts	147.9	<u>37,135.25</u>	<u>251</u>	
Clients Closed This Period	<u>301</u>			
# of Closed Clients with Any Contact	<u>251</u>			
# Clients with at least 1 in-person contact per month2	226			
# Clients with at least 2 in-person contacts per month	<u>210</u>			

Min, Max, and Average Contact Time (hours) of Clients with some Contact 7/17/2017

2016 Women's Services - Aggregate Data

Full Report Email More							
Program Name	Number of Intakes Time (min			Total Contact Time (avg)			
Aggregate Data	251	0	822	181			
Totals (1 groups)	251	0	822	181			

Table 81

	Urinalysis (UAs) For Clo	osed Clients
	Number	%
Clients Closed This Period	<u>301</u>	100%
# of clients who received UAs	<u>176</u>	58%
Average UAs per client with at least 1 UA	10.5	
# of clients with at least 1 +UA (of those with at least 1 UA)	<u>81</u>	46%
Total # of UAs	<u>1848</u>	100%
Total # of Positive UAs	251	14%
Total # of Negative UAs	1597	86%
	Positive UAs by substance (by Client):
Alcohol	<u>15</u>	19%
Cocaine Powder	<u>8</u>	10%
Crack		0%
Marijuana/Hashish	<u>16</u>	20%
Heroin	<u>6</u>	7%
Non-prescription Methadone	2	2%
Other Opiates/Synthetics	<u>11</u>	14%
PCP		0%
Other Hallucinogens/Psychedelics		0%
Methamphetamines	<u>28</u>	35%
Other amphetamines	<u>6</u>	7%
Other Stimulants	1	1%
Benzodiazepines	Ζ	9%
Other Tranquilizers		0%
Barbiturates		0%
Other Sedatives/Hypnotics	<u>3</u>	4%
Ketamine		0%
Ecstasy/other club drugs		0%
Inhalants		0%
Over-the-counter medications (misuse)	2	2%
Medications taken as directed	<u>13</u>	16%
Other drugs	<u>3</u>	4%
Unknown Drugs		0%

Table 82

POSITIVE UA TESTS

Full Report | Email | More

Program Name	Alcohol # (tot)	Cocaine powder # (tot)	Crack # (tot)	Marijuana/Hashish # (tot)		Non- prescription Methadone # (tot)	Other Opiates/Synthetics # (tot)		Other Hallucinogens/Psychedelics # (tot)		Other amphetamines # (tot)	Other Stimulants # (tot)
<u>Aggregate</u> Data	15	8	0	16	6	2	11	0	0	28	6	1
Totals (1 groups)	15	8	0	16	6	2	11	0	0	28	6	1

Full Report Email More

Program Name	Benzodiazepines # (tot)	Other Tranquilizers # (tot)	Barbiturates # (tot)		Ketamine # (tot)	club drugs	Inhalants # (tot)	Over-the-counter medications (misuse) # (tot)	Medications taken as directed # (tot)	Other Substance # (tot)	Unknown Drugs # (tot)
<u>Aggregate</u> <u>Data</u>	7	0	0	3	0	0	0	2	13	3	0
Totals (1 groups)	7	0	0	3	0	0	0	2	13	3	0

List of other drugs with positive UAs

Other Substance Specify	Number of UA/Contact Logs

No records found

List of reasons why no UAs were conducted:

Reason client had no UAs this period

No UA/Contact Logs found

Table 83

Consent for follow-up interview

Full Report Email More						
Consent from Intake or Closing	Number of Closings	Number of Closings (% of col)				
(empty)	4	1.3%				
No	182	60.5%				
Yes	115	38.2%				
Totals (3 groups)	301	100.0%				

CHILDREN OF CLIENTS CLOSED THIS YEAR

These dependent tables include children born before and after intake.

Table 84

Custody status at closing by child

Full Report Email More

CURRENT involvement with Child Protection (CP)	Number of Children	Number of Children (% of col)
(empty)	112	17.9%
No CP involvement	212	34.0%
CP involvement - no formal placement	118	18.9%
CP involvement - in a formal out of home placement	167	26.8%
Unknown	15	2.4%
Totals (5 groups)	624	100.0%

Full Report Email More

Custody status at closing?	Number of Children	Number of Children (% of col)
(empty)	115	18.4%
Yes, reunified currently	60	9.6%
Yes, still in temporary, formal placement	172	27.6%
Yes, resulted in TLC during the program	12	1.9%
Yes, resulted in TPR during the program	7	1.1%
No, not in placement at any point	246	39.4%
Unknown	12	1.9%
Totals (7 groups)	624	100.0%

Table 85

Living status by child at closing

Full Report Email	More	
Where/with whom is child living most at Closing?	Number of Children	Number of Children (% of col)
<u>(empty)</u>	106	17.0%
Mom	170	27.2%
Dad	81	13.0%
Both parents	11	1.8%
Other family/friends	131	21.0%
Foster care	117	18.8%
Unknown	8	1.3%
Totals (7 groups)	624	100.0%

Table 86

Children's immunization status at Closing

Full Report Email More

Current on immunizations at Closing?	Number of Children	Number of Children (% of col)
(empty)	111	17.8%
Yes	456	73.1%
No	4	0.6%
Unknown	53	8.5%
Totals (4 groups)	624	100.0%

Table 87

Children's mental health services by child at Closing

Full Report Email More

Receiving mental health services at Closing?	Number of Children	Number of Children (% of col)
<u>(empty)</u>	112	17.9%
Yes	95	15.2%
No	349	55.9%
Unknown	68	10.9%
Totals (4 groups)	624	100.0%

Table 88

Children's medical insurance by child at Closing

Full Report Email More		
Medical insurance at Closing?	Number of Children	Number of Children (% of col)
(empty)	112	17.9%
Yes, public insurance (MA, MNCare)	458	73.4%
Yes, private insurance	13	2.1%
No	3	0.5%
Unknown	38	6.1%
Totals (5 groups)	624	100.0%

Table 89

Children diagnosed with FASD at closing

Full Report | Email | More

Diagnosed with FASD at Closing?	Number of Children	Number of Children (% of col)
(empty)	112	17.9%
No, but FASD is suspected	40	6.4%
No, and FASD is not suspected	361	57.9%
Unknown	111	17.8%
Totals (4 groups)	624	100.0%

Table 90

Children's participation in evidence-based programs at closing

Full Report	Email	More
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Participated in evidence-based program?	Number of Children	Number of Children (% of col)
(empty)	129	20.7%
Yes, full completion	32	5.1%
Yes, partial completion	32	5.1%
No	420	67.3%
Unknown	11	1.8%
Totals (5 groups)	624	100.0%

Table 91

Child received services from staff

Full Report Email More

Did child receive services directly from staff?	Number of Children	Number of Children (% of col)
<u>(empty)</u>	345	55.3%
Yes	207	33.2%
No	72	11.5%
Totals (3 groups)	624	100.0%

Areas children recieved services

Full Report Email More										
Program Name	Number of Children	Serv - Physical health/medical care (tot)	(tot)		Serv - FASD (tot)	Serv - Developmental needs (tot)	Serv - Educational needs (tot)	Serv - Safe Infant Sleep (tot)	Serv - Recreational services (tot)	Serv - None of these (tot)
Aggregate Data	207	123	44	94	71	154	81	67	88	26
Totals (1 groups)	207	123	44	94	71	154	81	67	88	26

Screening/Assessment children recieved

Full Report Email More								
Program Name	Number of Children				Scr - FASD assessment (formal diagnostic) (tot)		Scr - None of these (tot)	
Aggregate Data	207	58	36	62	0	4	122	
Totals (1 groups)	207	58	36	62	0	4	122	

Full Report Email More								
Have you been arrested in the past 30 days?	Number of Intakes	Number of Intakes (% of col)						
(empty)	3	0.4%						
Yes	93	13.7%						
No	559	82.4%						
<u>Unknown</u>	23	3.4%						
Totals (4 groups)	678	100.0%						

Substance use and treatment

Table 21

Tobacco use at intake

Full Report Email More								
Recent Tobacco Use	Number of Intakes	Number of Intakes (% of col)						
<u>(empty)</u>	2	0.3%						
Yes	568	83.8%						
No	85	12.5%						
<u>Unknown</u>	23	3.4%						
Totals (4 groups)	678	100.0%						

Table 22

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

Full Report | Email | More

Recent alcohol or other drug use	Number of Intakes	Number of Intakes (% of col)
(empty)	5	0.7%
Yes	366	54.0%
No	298	44.0%
Unknown	9	1.3%
Totals (4 groups)	678	100.0%

Type of drugs used in the past 30 days

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

Full Report Email More									
Program Name	Number of Intakes	Substance - Alcohol (tot)	Substance - Cocaine powder (tot)	Substance - Crack (tot)	Substance - Marijuana/ Hashish (tot)	Substance - Heroin (tot)	Substance - Non-prescription Methadone (tot)	Substance - Pharmaceutical Opioids (tot)	Substance - PCP (tot)
Aggregate Data	678	133	21	14	142	56	1	40	4
Totals (1 groups)	678	133	21	14	142	56	1	40	4

Full Report	Email	More
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Program Name	Number of Intakes	Substance - Other Hallucinogens/ Psychedelics (tot)	Substance - Metham- phetamine (tot)	Substance - Other Amphetamines (tot)				Substance - Barbiturates (tot)
Aggregate Data	678	7	180	6	1	19	0	2
Totals (1 groups)	678	7	180	6	1	19	0	2

Full Report | Email | More

Program Name	Number of Intakes	Substance - Other Sedatives/ Hypnotics (tot)		Substance - Ecstasy/ other club drugs (tot)	Substance - Inhalants (tot)	Substance - Over-the-counter medications (misuse) (tot)		
Aggregate Data	678	1	1	1	2	3	12	2
Totals (1 groups)	678	1	1	1	2	3	12	2

2016 Women's Services - Aggregate Data

Other drugs (please specify)	Number of Intakes

ambien	1
Coricidin Cough and Cold	1
Cough Syrup and Immodium	1
gabepentan	2
Kratom	1
Nicotine	1
Nyquil, Hand sanitizer and Witch Hazel	1
pain medications	1
plant food	2
Spice	1
Totals (10 groups)	12

Length of sobriety

Only includes those with at least 30 days of sobriety

Full Report Email More				
Program Name	Number of Intakes	Total Days Sober (min)	Total Days Sober (max)	Total Days Sober (avg)
Aggregate Data	252	30	1,272	126
Totals (1 groups)	252	30	1,272	126

Table 23

Drug of choice

Primary Drug of Choice

Full Report | Email | More

What is/was your primary drug of choice?	Number of Intakes	Number of Intakes (% of col)
(empty)	3	0.4%
Alcohol	133	19.6%
Cocaine powder	17	2.5%
Crack	16	2.4%
Marijuana/Hashish	123	18.1%
Heroin	87	12.8%
Pharmaceutical Opioids	46	6.8%
PCP	2	0.3%
Methamphetamine	234	34.5%
Other Amphetamines	5	0.7%
Other Stimulants	1	0.1%
Benzodiazepines	7	1.0%
Ketamine	1	0.1%
Other	3	0.4%
Totals (14 groups)	678	100.0%

Secondary Drug of Choice

What is/was your secondary drug of choice?	Number of Intakes	Number of Intakes (% of col)
(empty)	10	1.5%
Other Opiates/Synthetics	4	0.6%
Alcohol	63	9.3%
Cocaine powder	28	4.1%
Crack	11	1.6%
Marijuana/Hashish	117	17.3%
Heroin	41	6.0%
Non-prescription Methadone	2	0.3%
Pharmaceutical Opioids	32	4.7%
PCP	2	0.3%
<u>Other</u> Hallucinogens/Psychedelics	1	0.1%
Methamphetamine	127	18.7%
Other Amphetamines	3	0.4%
Other Stimulants	2	0.3%
Benzodiazepines	12	1.8%
Other Sedatives/Hypnotics	2	0.3%
Ecstasy/other club drugs	2	0.3%
<u>Other</u>	3	0.4%
<u>Unknown</u>	17	2.5%
None	199	29.4%
Totals (20 groups)	678	100.0%

Full Report Email More

Other secondary drug of choice	Number of Intakes
Cough Syrup	1
<u>K2</u>	1
pain medications	1
Totals (3 groups)	3

n	

Kratom

Suboxone

Totals (3 groups)

Spice

Treatment status at intake

Full Report | Email | More

Other primary drug of choice

Full Report Email More		
Are you currently in CD treatment?		Number of Intakes (% of col)
Yes	546	80.5%
No	132	19.5%
Totals (2 groups)	678	100.0%

Number of Intakes

1

1

1

3

12/19

Full Report Email	More	
Is this inpatient/residential or outpatient treatment?	Number of Intakes	Number of Intakes (% of col)
(empty)	8	1.5%
Inpatient/residential	301	55.1%
Outpatient	74	13.6%
Outpatient with housing	163	29.9%
Totals (4 groups)	546	100.0%

Table 25

Children living with mother in treatment at intake

Full Report | Email | More

Is this inpatient/residential or outpatient treatment?		Number of Intakes (% of col)	# of your children living with you at CD treatment facility (tot)	# of your children living with you at CD treatment facility (tot) (% of col)
Inpatient/residential	56	51.4%	74	47.1%
Outpatient	1	0.9%	1	0.6%
Outpatient with housing	52	47.7%	82	52.2%
Totals (3 groups)	109	100.0%	157	100.0%

Table 26

Prior treatment participation

Full Report | Email | More

# of times in CD treatment	Number of Intakes	i taimboi oi
1-2 prior episodes	285	54.4%
3-4 prior episodes	133	25.4%
5 or more prior episodes	106	20.2%
Totals (3 groups)	524	100.0%

Table 27

Detox participation in the past 6 months

Full Report Email More				
Detox past 6 mo	Number of Intakes	Number of Intakes (% of col)		
(empty)	10	1.5%		
Yes	66	9.7%		
No	519	76.5%		
Unknown	83	12.2%		
Totals (4 groups)	678	100.0%		

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

Full Report Email More					
Program Name	# of days in detox (min)	# of days in detox (avg)	# of days in detox (max)		
Aggregate Data	1.00	6.09	30.00		
Totals (1 groups)) 1.00 6.09 30.0				

Table 28

Participation in other recovery support activities at intake

Program Name	Number of Intakes	O	Community rganization (RCO) (tot)	SH - Other com support gro		Faith-based/re gro	SH - eligious up (tot)	SH - Aftercare (tot)
Aggregate Data	678		16		54		82	17
Totals (1 groups)	678		16		54		82	17
Full Report	Email Moi	e						
Full Report I Program Name	Email Mor Number of Intakes	-		olics / Narcotics us (AA/NA) (tot)	SH - Al-Anon (tot)	activity	SH - Ui	nknown rec su activity
	Number of	SH - Culturally specific			Al-Anon	activity (tot)	SH - U	SU

7/17/2017

Full Report Email More	
Other recovery support	Number of Intakes
AHRMS worker AFFP advocates for family peace	1
ARHMS, PO, Psychiatrist	1
Drug Court	1
Family & Friends	3
family/friends	12
friends	1
group therapy	1
Groups in treatment	1
jail programming	1
miscarriage support group	1
none	1
Odyssey Program through Olmstead Co.	1
Outpatient treatment	1
Parent Connection, Stepping Stones Therapy	1
prayer at mosque	1
Project Child	1
Sobriety Feast	1
Sponsor	1
STS/ Methadone	1
suboxone program, support family/friends	1
Support family/friends, yoga	1
Support from family & friends	2
Support from family and friends	5
support from friends and family	1
Totals (24 groups)	42

CHILDREN & PREGNANCIES

Table 29

Race and ethnicity of children at intake

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

Full Report Email More					
Race	Number of Children	Number of Children (% of col)			
(empty)	126	10.4%			
African American/Black	172	14.3%			
American Indian/Alaskan Native	249	20.6%			
Asian American/Pacific Islander	10	0.8%			
White	424	35.1%			
Biracial/Multiracial	200	16.6%			
Other	9	0.7%			
Unknown	17	1.4%			
Totals (8 groups)	1207	100.0%			

Full Report | Email | More

Hispanic Origin	Number of Children	Number of Children (% of col)
(empty)	131	10.9%
Yes	117	9.7%
No	914	75.7%
Unknown	45	3.7%
Totals (4 groups)	1207	100.0%

Table 30

Age of children at intake

Full Report Email More					
Age Category	Number of Children	Number of Children (% of col)			
Under age 2	251	20.8%			
Age 2 to under 5	268	22.2%			
Age 5 to under 12	406	33.6%			
Age 12 to under 18	155	12.8%			
Unknown	124	10.3%			
~Adult	3	0.2%			
Totals (6 groups)	1207	100.0%			

Table 31

Gender of children at intake

Full Report Email More				
Sex	Number of Children	Number of Children (% of col)		
<u>(empty)</u>	76	6.3%		
Male	615	51.0%		
Female	516	42.8%		
Totals (3 groups)	1207	100.0%		

Table 32

Children's living situation at intake

Full Report Email More				
Where/with whom is child living most at Intake?	Number of Children	Number of Children (% of col)		
(empty)	81	6.7%		
Mom	313	25.9%		
Dad	193	16.0%		
Both parents	41	3.4%		
Other family/friend	324	26.8%		
Fostercare	236	19.6%		
Other	8	0.7%		
Unknown	11	0.9%		
Totals (8 groups)	1207	100.0%		

Table 33

Pregnancy status at intake -

Full Report Email More					
Are you currently pregnant?	Number of Intakes	Number of Intakes (% of col)			
<u>(empty)</u>	4	0.6%			
Yes	170	25.1%			
No	502	74.0%			
Unknown	2	0.3%			
Totals (4 groups)	678	100.0%			

Full Report | Email | More

First pregnancy	Number of Intakes	Number of Intakes (% of col)
(empty)	1	0.6%
Yes	44	25.9%
No	125	73.5%
Totals (3 groups)	170	100.0%

Full Report | Email | More

How far along is your pregnancy?	Number of Intakes	Number of Intakes (% of col)
(empty)	3	1.8%
1-3 months	26	15.3%
4-6 months	72	42.4%
7-9 months	67	39.4%
Unknown	2	1.2%
Totals (5 groups)	170	100.0%

Table 34

Pregnancy Outcomes

Women	Served	this	Period	678

	Number	%
# of Live birth, child living	<u>54</u>	94.7%
# of Live birth, child died	<u>0</u>	0.0%
# of Fetal Deaths	2	3.5%
# of Abortions	1	1.8%

Table 35

Race and ethnicity of babies born

Full Report Email More					
Baby - Hispanic Origin	Number of Pregnancies	Number of Pregnancies (% of col)			
Yes	2	3.7%			
No	51	94.4%			
<u>Unknown</u>	1	1.9%			

Baby's race	Number of Pregnancies	Number of Pregnancies (% of col)
African American/Black	17	31.5%
American Indian/Alaskan Native	5	9.3%
Asian American/Pacific Islander	2	3.7%
White	21	38.9%
Biracial/Multiracial	9	16.7%
Totals (5 groups)	54	100.0%

Baby's Other Race Number of Pregnancies

No records found

Table 36

Health of babies at delivery

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

Full Report Email More		
Birth weight	Number of Pregnancies	Number of Pregnancies (% of col)
(empty)	1	1.9%
Low birth weight (less than 5lb, 8oz)	6	11.1%
Normal birth weight	45	83.3%
Unknown	2	3.7%
Totals (4 groups)	54	100.0%

Full Report Email More				
Baby was born full-term	Number of Pregnancies	Number of Pregnancies (% of col)		
<u>Yes</u>	43	79.6%		
No	11	20.4%		
Totals (2 groups)	54	100.0%		

Full Report Email More					
Length of pregnancy	Number of Pregnancies	Number of Pregnancies (% of col)			
32-36 weeks	11	100.0%			
Totals (1 groups)	11	100.0%			

Full Report | Email | More

Baby spent time in intensive care (NICU)	Number of Pregnancies	Number of Pregnancies (% of col)
Yes	13	24.1%
No	38	70.4%
Unknown	3	5.6%
Totals (3 groups)	54	100.0%

For Pre-mature Babies only.

For Babies who spent time in intensive care.

Full Report Email More					
Program Name	# of days in NICU to date (min)	# of days in NICU to date (max)	# of days in NICU to date (avg)		
Aggregate Data	4	35	16.27272727272727		
Totals (1 groups)	4	35	16.272727272727		

Prenatal care

Full Report Email M	ore					
Client received prenatal care	Number of Pregnancies	PC - First Trimester (tot)	PC - Second Trimester (tot)		PC - All Trimesters (tot)	PC - Any Trimester (tot)
Yes	53	34	43	46	31	53
No	1	0	0	0	0	0
Totals (2 groups)	54	34	43	46	31	53

Full Report Email More		
Reason for no pre-natal care	Number of Pregnancies	Number of Pregnancies (% of col)
Client reported she had not had OB care for the past 4 months prior to giving birth	1	100.0%
Totals (1 groups)	1	100.0%

Table 37

Placement at birth

Full Report Email More					
Baby placed outside of home following birth Pregnancies Number of (%) of					
Yes	6	11.1%			
No	47	87.0%			
Unknown	1	1.9%			
Totals (3 groups)	54	100.0%			

Table 38

Mother's Toxicology

Full Report Email More							
Number of Pregnancies	Number of Pregnancies (% of col)						
15	26.8%						
32	57.1%						
2	3.6%						
7	12.5%						
56	100.0%						
	Number of Pregnancies 15 32 2 7						

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

Full Report Email More					
Program Name	Number of Pregnancies	Test - Blood Mother (tot)	Test - Urine Mother (tot)	Test - Unknown Mother (tot)	
Aggregate Data	47	14	36	2	
Totals (1 groups)	47	14	36	2	

Substances clients tested positive for

Full Report	Email More	9							
Program Name	Number of Pregnancies	Alcohol- Mother (tot)	Cocaine Powder- Mother (tot)	Crack- Mother (tot)	Marijuana/Hashish- Mother (tot)	Heroin- Mother (tot)	Non-prescription Methadone- Mother (tot)	Pharmaceutical Opioids-Mother (tot)	PCP- Mother (tot)
Aggregate Data	15	0	0	0	11	1	0	2	0
Totals (1 groups)	15	0	0	0	11	1	0	2	0

Full Repor	t Email N	Nore						
Program Name	Number of Pregnancies	Other Hallucinogens/Psychedelics- Mother (tot)	Methamphetamine- Mother (tot)	Other Amphetamines- Mother (tot)	Other Stimulants- Mother (tot)	Benzodiazepines- Mother (tot)	Other Tranquilizers- Mother (tot)	Barbiturates- Mother (tot)
<u>Aggregate</u> <u>Data</u>	15	0	0	0	0	0	0	0
Totals (1 groups)	15	0	0	0	0	0	0	0

Full Report | Email | More

Program Name	Number of Pregnancies		Ketamine- Mother (tot)	Ecstasy/other club drugs-Mother (tot)	Inhalants- Mother (tot)	Over-the-Counter Medications (misuse)-Mother (tot)	Medications used as directed- Mother (tot)	Other substance- Mother (tot)	Unknown Drugs- Mother (tot)
<u>Aggregate</u> Data	15	0	0	0	0	0	1	0	1
Totals (1 groups)	15	0	0	0	0	0	1	0	1

Table 39

Baby'sToxicology

Full Report Email More						
Number of Pregnancies	Number of Pregnancies (% of col)					
15	26.8%					
33	58.9%					
1	1.8%					
7	12.5%					
56	100.0%					
	Number of Pregnancies 15 33 1 7					

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

Full Report Email More						
Program Name	Number of Pregnancies	Test - Blood Baby (tot)	Test - Meconium Baby (tot)	Test - Urine Baby (tot)	Test - Unknown Baby (tot)	
Aggregate Data	46	9	26	6	9	
Totals (1 groups)	46	9	26	6	9	

Substances babies tested positive for

Full Report	Email More								
Program Name	Number of Pregnancies	Alcohol- Baby (tot)	Cocaine Powder- Baby (tot)	Crack- Baby (tot)	Marijuana/Hashish- Baby (tot)	Heroin- Baby (tot)	Non-prescription Methadone- Baby (tot)	Pharmaceutical Opioids-Baby (tot)	PCP- Baby (tot)
Aggregate Data	15	1	0	0	11	1	0	2	0
Totals (1 groups)	15	1	0	0	11	1	0	2	0

Full Report | Email | More

Program Name	Number of Pregnancies	Other Hallucinogens/ Psychedelics- Baby (tot)	Methamphetamine- Baby (tot)	Other Amphetamines- Baby (tot)	Other Stimulants- Baby (tot)	Benzodiazepines- Baby (tot)	Other Tranquilizers- Baby (tot)	Barbiturates- Baby (tot)
<u>Aggregate</u> Data	15	0	0	0	0	0	0	0
Totals (1 groups)	15	0	0	0	0	0	0	0

Full Report | Email | More

Program Name	Number of Pregnancies	Other Sedatives/Hypnotics- Baby (tot)	Ketamine- Baby (tot)	Ecstasy/other club drugs-Baby (tot)	Inhalants -Baby (tot)	Over-the-Counter Medications (misuse)-Baby (tot)	Medications used as directed- Baby (tot)	Other substance- Baby (tot)	Unknown drugs- Baby (tot)
<u>Aggregate</u> Data	15	0	0	0	0	0	1	0	1
Totals (1 groups)	15	0	0	0	0	0	1	0	1

Table 40

Reason For No Toxicology Test

Reasons mothers not tested Full Rep

Full Report | Grid Edit | Email | More 2 Pregnancies

	Reason mother not tested
	mom was sober
	no reason to speculate use
Reasons infants not tested	Full Report Grid Edit Email More 1 Pregnancy
	Reason baby not tested
	mom was sober