

Approved: _____
Date

MINUTES OF THE SENATE FEDERAL AND STATE AFFAIRS.

The meeting was called to order by Chairperson Senator Lana Oleen at 11:10 a.m. on February 8 , 2000 in Room 245-N of the Capitol.

All members were present.

Committee staff present: Mary Galligan, Legislative Research Department
Russell Mills, Legislative Research Department
Theresa Kiernan, Revisor of Statutes
Judy Glasgow, Committee Secretary

Conferees appearing before the committee:

Secretary Janet Schalansky, Social and Rehabilitation Services
Commissioner Albert Murray, Juvenile Justice Agency
Karen Suddath, Dir. Mental Health & Substance Abuse Prevention, SRS

Others attending: See Attached list

Chairman Oleen reopened hearings on:

SCR 1632 urging the Governor and the Governor's Substance Abuse Prevention Council to establish statewide standards to evaluate the success of substance abuse programs.

Chairman Oleen recognized Secretary Schalansky, Social and Rehabilitation Services to respond to questions that had been raised during the previous hearing. Secretary Schalansky stated that Karen Suddath, Dir. Of Mental Health and Substance Abuse Prevention, SRS was present to answer questions about the report that SRS has used. Ms. Suddath provided the committee with a copy of the 1998 Final Report In Kansas, Kansas Alcohol and Drug Treatment Effectiveness Follow-up Study Longitudinal Treatment Effects Report Summary by Kansas State University. A copy of the complete report can be found in Social and Rehabilitation Services Office. Karen Suddath stated that this report contained demographic and outcome related data. Ms. Suddath stated that this is an on going study which SRS has done in recent years. This study summarizes the longitudinal data from the six sections of the Addiction Severity Index: Medical Status; Employment/Support Status; Drug/Alcohol Use; Legal Status; Family/Social Relationships; and Psychiatric Status. Ms. Suddath stated that because of the small size of the study (524 individuals) this report could not evaluate specific programs for success. Karen Suddath referred to information provided to the committee for FY 2000 broken down by Region.(Attachment 1)

Karen Suddath responded to questions from the committee regarding the above report and how this report could be tailored to provide the type of information requested. She reported that she had checked with other states to see how they collect this type of data. California is the only state that has performed an evaluation of standards to evaluate success of substance abuse programs but the cost was two million dollars. Chairman Oleen stated the concern that the studies not take dollars from treatment. She also requested that the committee be furnished a copy showing the five regional areas that were referenced in the handouts.

Chairman Oleen recognized Commissioner Murray, Juvenile Justice Authority. Commissioner Murray stated that there are no nationally recognized standards available to evaluate the success of substance abuse programs. Commissioner Murray stated that with scarce resources, it is important to make good decisions on how the dollars are spent. He stated that JJA supports the establishment of standards by which programs can be measured. Commissioner Murray stated that the Council would move forward by using the resources that currently exist within the state agencies to establish a work group composed of representatives from the agencies that make up the council for purpose of research.

Senator Biggs suggested a change in the wording of the resolution to include tobacco. This would entail several changes throughout the resolution. After discussion by the committee, it was determined that tobacco prevention and treatment was already included in the tobacco settlement. The focus of treatment programs in the resolution target alcohol and drug abuse.

CONTINUATION SHEET

MINUTES OF THE SENATE FEDERAL AND STATE AFFAIRS, Room 245-N Statehouse, at 11:10 a.m. on February 8, 2000.

Chairman Oleen inquired how long after the establishment of standards would it be before the legislature could receive meaningful data. Commissioner Murray stated that it would take from 18 months to two years after the standards were set before programs could be evaluated and the first report made to the legislature. He suggested progress reports during the process to be presented to interested committees.

Chairman Oleen ask the committee for action on the resolution. Senator Bleeker moved to amend the resolution to include short term and long term outcome of the study and include a change proposed by the Council. Senator Becker seconded the motion. The motion carried.

Senator Becker moved to accept the councils amendments and to report the amended bill favorably to the full Senate. Senator Jones seconded the motion. The motion carried.

Chairman Oleen ask for action on committee minutes for January 31 and February 1. Senator Vratil moved that the minutes be approved. Senator Harrington seconded the motion. The motion carried.

The meeting adjourned at 12:01 p.m. The next meeting will be February 9, 2000 at 11:00 a.m.

SENATE FEDERAL AND STATE AFFAIRS COMMITTEE

GUEST LIST

DATE: FEB 8, 2000

NAME	REPRESENTING
Lee Bruman	KDOA
Ann Etter	
Karen Suddath	SRS
Albert Murray	SJA
Janet Schalansky	SAS
Laura Howard	SHJ

1998 FINAL REPORT

In Kansas, Treatment Helps

Kansas Alcohol and Drug Treatment Effectiveness Follow-up Study

1998 Longitudinal Treatment Effects Report

Based upon
Follow-up Addiction Severity Index Interviews conducted in 1998
and
Intake and Discharge records
from the
Medical, Employment / Support, Drug / Alcohol Use, Legal,
Family / Social Relationships, and Psychiatric Sections
of the
Addiction Severity Index
and
Composite analysis of Program Outcomes

June 1999

prepared for
Alcohol and Drug Abuse Services
Social and Rehabilitation Services
State of Kansas

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Kansas Alcohol and Drug Treatment Effectiveness Follow-up Study
Longitudinal Treatment Effects Report Summary

- 1998 -

The effectiveness of Kansas' publicly supported alcohol and drug treatment programs which use the Addiction Severity Index as part of their Intake and Discharge processes is broad-based and statistically significant. The Computer Assisted Telephone Interviewing laboratory in the School of Family Studies and Human Services at Kansas State University administered the Follow-up form of the Addiction Severity Index (ASI) to more than 500 alcohol and drug treatment clients in 1998. This report summarizes the longitudinal data from in the six sections of the Addiction Severity Index: Medical Status; Employment / Support Status; Drug / Alcohol Use; Legal Status; Family / Social Relationships; and Psychiatric Status. The clients' current functioning is contrasted with their functioning as they described it when they were given Intake and Discharge ASI interviews at the treatment programs supported by the Commission on Alcohol and Drug Abuse Services of the Kansas Department of Social and Rehabilitation Services. In addition, this report includes a summary of the client's views and a preliminary analysis and comparison of treatment program outcomes as reflected in their clients' ASI composite scores.

Medical Status:

The modified Follow-up composite problem scores were about the same at Intake, Discharge, and Follow-up. Approximately 6% of the clients received a pension for a physical disability and about 20% were taking prescribed medications at the time of their interviews. During the thirty days prior to their interviews they averaged about four days of medical problems.

Employment / Support Status:

The Follow-up modified composite problem scores were significantly lower than the scores at Intake indicating improvements in employment and support associated with treatment. More respondents had legal access to an automobile, worked more days in the month prior their interviews, and earned more legal income at Follow-up than at Intake or Discharge. The percent of working days increased by 36% and their employment income increased by 70% from \$440 at Intake to \$746 at Follow-up.

Drug/Alcohol Use:

The Follow-up composite problem scores for both alcohol use and drug use were significantly lower than at Intake. Statistically significant reductions in alcohol, alcohol intoxication, cocaine, amphetamines, marijuana, and multi-drug use were found. The average number of days of alcohol use declined by 52% and marijuana, cocaine and amphetamine use declined by 69%, 85% and 92% respectively. The amount spent on alcohol declined over 60% and the amount spent on drugs declined by 91%. The alcohol abstinence rate rose from 46% for the thirty days prior to the Intake interviews to 67% in the thirty days prior to the Follow-up interviews. The comparable abstinence rate for drugs other than alcohol rose from 59% to 81%. While the abstinence rate for alcohol and other drugs increased from 34% to 59%. The clients reported many significant reductions in their alcohol and drug use.

Kansas Alcohol and Drug Treatment Effectiveness Follow-up Study
Longitudinal Treatment Effects Report Summary

- 1998 -
(Continued)

Legal Status:

The ASI composite problem score for the legal section declined significantly from Admission to Follow-up. At Admission 52% were on probation, but fewer were on probation at Follow-up (43%). Half as many were awaiting charges at Follow-up and they had been in jail and engaged in illegal activities fewer days in the past thirty days than at Admission.

Family/Social Relationships:

The composite problem family relationships score was significantly lower at Follow-up than at Intake. At Follow-up the respondents were more satisfied with their marital status and their living arrangements. Fewer appear to be living with their sexual partners and more appear to be living with their parents. At Follow-up the respondents reported far fewer serious problems getting along with their mothers, fathers, spouses, neighbors, and co-workers.

Psychiatric Status:

The composite problem score was significantly lower at Follow-up than at Intake. The respondents reported fewer psychological or emotional problems in the thirty days prior to their Follow-up interviews than they reported prior to their Intake interviews for the following: serious depression; serious anxiety or tension; experiencing hallucinations; having trouble understanding, concentrating, or remembering; having trouble controlling violent behavior; experiencing serious thoughts of suicide; and, suicide attempts. These reductions in the self-reports of psychological or emotional problems paralleled the interviewers' ratings of the respondents' condition.

Respondents' Perceptions of Treatment Effectiveness:

When the clients were asked about their views of the treatment they received 83% said the treatment program reduced their dependency, 84% said it helped them gain control of their lives, 86% said their counselor was helpful, and 82% said their treatment was useful.

Treatment Program Outcome Comparisons:

The composite and modified composite scores were used to compare treatment program outcomes without adjustment for differences in client differences. Statistically significant program differences were found for the following outcomes: medical status, employment / support status, family relationships, and alcohol and other drug abstinence rates. Significant differences were also found for Perceived Program Effectiveness. The programs with sufficient sample size and significant outcome differences are noted in the composite score comparison tables.

These results reflect the gains associated with Kansas' publically supported alcohol and drug treatment efforts and illustrate the potential for assessing treatment effectiveness. The results will be provided to the Kansas Commission on Alcohol and Drug Abuse Services and its citizens' review committee as Kansas strives to increase the effectiveness of its alcohol and drug treatment services.

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Introduction and Overview

The purpose of this report is (1) to present the results of the 1998 study of the status of a sample of alcohol and drug treatment clients approximately six to eight months after they were admitted to one of Kansas ADAS/SRS's publicly supported treatment programs, (2) to place these follow-up results in the context of the intake and discharge interview data, and (3) to present a preliminary comparative analysis of treatment program outcomes. The interviews utilized the Addiction Severity Index (Fifth Edition) (1990). The tasks of this project which are described in this report included adapting the follow-up form of the Addiction Severity Index (ASI) for telephone interviews; obtaining access to the clients who would be interviewed; conducting the interviews with Computer Assisted Telephone Interviewing (CATI) software; compiling and analyzing the interview data; obtaining admission and discharge ASI information from ADAS computer files, and analyzing the intake, discharge, and follow-up ASI interview information. This report describes these steps and provides the results of the process for the 1996 interviews.

The intake ASI records used for the 1998 study provide information on 524 ASI interviews conducted between January 1, 1998 and December 30, 1998. There are 511 intake (admission) , 111 discharge and 524 follow-up interview ASI interview records within this analytic database.

It should be noted that the ASI, whether administered at intake, discharge, or follow-up, is a self-report interview instrument. While self-report interview instruments provide very efficient data sources, it is difficult to fully validate the accuracy of such data sources. It is presumed that this difficulty applies equally to the three sources of data and that it is unlikely to differentially affect the results reported herein.

The comparisons between Intake, Discharge, and Follow-up ASI results reflect changes over time which are associated with the treatment received by the clients and other events in their lives. The comparisons presented in this report include data from the Medical Status, Employment / Support Status, Drug / Alcohol Use, Legal Status, Family / Social Relationships, and Psychiatric Status sections of the ASI.

Project Initiation

In anticipation of the initial grant's approval we requested review and approval by the Kansas State University Committee on Research Involving Human Subjects of our research plan to be sure it provided adequate protection for the human subjects' rights including confidentiality and informed consent. On December 14, 1993 we were notified that the research met the requirements and was classified as exempt. The research plan provides for informed consent and voluntary participation as well as protection of the confidentiality of the clients and the information collected. No names nor any individually identifying information will appear in the analytic data sets or in any reports. This approval has been extended for the 1996 project and its extension through June 30, 1999.

We received notification of the initial grant award on January 3, 1994 and successive grants through June 30, 1999. Shortly after the project began, we recruited and screened potential staff for the project. The 1998 follow-up interviews were administered by Jan Lewis, Anne Radley, Marla Canfield, Maria Masi, and Anna Marcotte who were hired as Graduate Research Assistants and trained in the administration of the telephone interviewing adaptation of the follow-up ASI with a few extra Kansas items. The extra Kansas items included information on duration of treatment, date of treatment completion, and the clients' ratings of the quality and effectiveness of the treatment they received. The statistical analyzes contained in this report were performed by Robert H. Poresky, Ph.D.

Development of the Follow-up Addiction Severity Index

The Fifth Edition of the Addiction Severity Index has a subset of items which are marked for inclusion in follow-up studies. Generally those items which relate to the clients' status in the last 30 days were included in the follow-up and lifetime items were omitted. These items were adapted for the computer assisted telephone interviewing Ci3 software program which was purchased from Sawtooth Software, Inc. The number of items per section from the full ASI used in the follow-up ASI is shown in the next table. Additional items were added for 1995 and retained in the 1998 follow-up based upon our earlier experience including weeks of treatment to help clarify the results since some individuals who were given the Intake ASI did not actually enter treatment.

Follow-up ASI Items

ASI Section	Number of Items	
	Admission	Follow-up
General Information	19	7
Medical Status	11	7
Employment/Support Status	24	18
Drug/Alcohol Use	59	29
Legal Status	32	26
Family History	42	0
Family/Social Relationships	47	22
Psychiatric Status	22	13
Interviewer Items	9	9
Added items		3
Total Items	265	134

Preparing the microcomputer software involved typing the relevant questions from the ASI interview form and the additional 1995 items into the Ci3 program and adding the appropriate Ci3 software programming instructions. The programming was then extensively tested and placed on the microcomputers for the interviewers to use. After the programming was completed and sufficient training was conducted, the 1998 interviews were conducted.

Obtaining Client Data Access

An essential and continuing step, which was conducted concurrently with the development, revision and programming of the follow-up ASI, was obtaining legal access to the names and telephone numbers of the clients for the follow-up telephone interviews as well as the ASI intake and discharge data. This required obtaining consent from the Kansas State University attorney to sign the Qualified Service Organizational Agreements as well as obtaining the agreements from the alcohol and treatment programs which use the ASI. We and ADAS/SRS wrote to the ADAS supported alcohol and drug treatment programs to bring them up-to-date on the follow-up study and to request access to the client contact information and the ASI data. We received Qualified Service Organizational Agreements from the treatment programs listed below which provided admission ASI data and for whom follow-up clients were successfully interviewed.

Programs which Returned Qualified Service Organizational Agreements (with ADAS program number, city and county)

Alcoholism Family Counseling Center (50)		
Wichita	*	Sedgwick
Central Kansas Foundation for Alcohol & Chemical Dependency (55)		
Salina	*	Saline
Corner House (97)		
Emporia	*	Lyon
Cowley County Mental Health Center (5)		
Arkansas City	*	Cowley
Crawford County Mental Health Center (6)		
Pittsburg	*	Crawford
Cypress Recovery, Inc. (197)		
Olathe	*	Johnson
DCCCA Center Outpatient (59)		
Lawrence	*	Douglas
Deaf Hope, Inc.		
Kansas City	*	Wyandotte
Dream, Inc. (354)		
Hays/Great Bend	*	Ellis / Barton
Family Life Center (30)		
Columbus	*	Cherokee
Family Recovery Center (109)		
Hoisington	*	Barton
First Step House (134)		
Lawrence	*	Douglas
Four County Mental Health Center (7)		
Independence	*	Montgomery
Geary Community Hospital / Chemical Dependency Center (135)		
Junction City	*	Geary
Indian Alcoholism Treatment Services (66)		
Wichita	*	Sedgwick

Kansas Mother and Child / Dickenson County Council (KMAC)(23)
 Abilene * Dickenson

Kansas Multi cultural Alcohol And Drug Treatment Center, Inc. (KMADT)(58)
 Kansas City * Wyandotte

Kanza Mental Health & Guidance Center, Inc. (13)
 Hiawatha * Brown

Labette Center for Mental Health Services, Inc.(29)
 Parsons * Labette

Mental Health Center of East Central Kansas (15)
 Emporia * Lyon

Miracles House (327)
 Wichita * Sedgwick

Mirror, Inc. (320)
 Hutchinson * Reno

Mirror, Inc. (93)
 Newton * Harvey

New Chance, Inc. (68)
 Dodge City * Ford

Northeast Drug/Alcohol Referral and Tracking Station, Inc. (149)
 Wichita * Sedgwick

Parallax Program, Inc. (73)
 Wichita * Sedgwick

Pawnee Mental Health Services (#20)
 Manhattan * Riley

Project Turnaround (#281)
 Kansas City * Wyandotte

Recovery Services Council, Inc. (19)
 Leavenworth * Leavenworth

Recovery Services Council, Inc. (74)
 Wichita * Sedgwick

Sedgwick County Addiction Treatment Services (SCATS) (22)
 Wichita * Sedgwick

Shield of Service / Salvation Army (78)
 Kansas City * Wyandotte

Substance Abuse Recovery Programs (SARP) (23)
 Topeka * Shawnee

South Central Kansas Foundation on Chemical Dependency (111)
 Pratt * Pratt

Southeast Kansas Mental Health Center Chemical Abuse Services (25)
 Liberal * Allen

Substance Abuse Center of Eastern Kansas, Inc.(SACEK)(110)
 Kansas City * Wyandotte

Sunrise, Inc. (86)
 Larned * Pawnee

Thomas County Alcohol and Drug Abuse Council, Inc. (70)

Colby * Thomas

Tiyospaye (412)

Wichita * Sedgwick

Women's Recovery Center (237)

Topeka * Shawnee

Women's Recovery Center of Central Kansas (279)

Wichita * Sedgwick

Women's Recovery Center of Western Kansas (350)

Hoisington * Barton

Obtaining and Randomly Selecting Clients for the Follow-up ASI

The first step in the selection of follow-up clients was to acquire a list of the clients who were admitted to treatment some months earlier. These lists were supplied by ADAS/SRS as computer database files with admission date, program number, program ID number, unique ID number, and other data including the admission ASI. After reading the files into our microcomputers, we randomly selected every other unique client number from the intake records for inclusion in this study. Then we extracted the follow-up contact information directly from the newer computer database files.

1998 Follow-up Interview Procedures

The trained interviewers called the randomly selected clients and began the Ci3 Computer Assisted Telephone Interviewing software on their IBM-compatible microcomputers. The CATI software presented the ASI interview items to the interviewers and controlled the progression through the interview which was based upon answers given by the respondents. The ASI interview protocol included the basic data on each selected client, initial contact verification, and voluntary informed consent when the selected client was contacted. Alternatives, including calling back at a later date or obtaining another telephone number to call, were followed when the client was not available. When the client was available, the follow-up ASI was administered.

The average length of the completed interview calls was 20.43 minutes (SD = 11.42 minutes). On rare occasions there were calls which involved a potential suicide. In such situations the program and local police were notified of the emergency as well as ADAS/SRS.

All of the 524 respondents for whom data is reported herein gave explicit informed consent before the telephone interviews were conducted.

The CATI system allows the rapid compilation and conversion of the interview data to be compatible with the Statistical Package for the Social Sciences (versions 6.1 and 9.0 for Windows) (SPSS). The statistical analyses were performed on microcomputers with Windows 98 and SPSS 6.1 and 9.0.

ADAS/ASI sample:

The interviewers attempted to contact 1,922 prior ADAS treatment clients in 1998. These attempts resulted in 524 completed interviews. Even with multiple attempts, the interviewers were unable to interview 1,337 prior clients. The unsuccessful attempts included calls to telephone numbers which were not working, to clients who were consistently not available to be interviewed, to clients whose telephone numbers were incorrect and whom we were unable to locate, refusals, clients whose telephones were never answered, clients who were in jail, clients whose numbers were answered consistently by answering machines, clients whose telephone lines were always busy, and clients who were in treatment. Of the 585 we were able to talk with 524 (90%) completed the ASI follow-up interview. The number of completed interviews for each treatment program/site is shown in the next table.

The Admission (Intake) Addiction Severity Index data was drawn from the Kansas ADAS computer files. Five hundred and eleven Admission ASI records were found to match the 524 Follow-up ASI interviews. Only 111 Discharge records were found in the computer files. Since this is only 21% of the number of Follow-up interview, the Discharge data must be considered incomplete and likely not a true estimate of the functioning of all the clients at the time of Follow-up. It seems likely that the Discharge records were provided only by those clients who successfully completed treatment and were available for the Discharge ASI interview at their treatment facility.

Number of Completed Follow-up Interviews by Treatment Facility Number

Facility Number	Frequency	Percent	Valid Percent	Cum Percent
5	5	1.0	1.0	1.0
6	42	8.0	8.0	9.0
7	19	3.6	3.6	12.6
13	3	.6	.6	13.2
15	15	2.9	2.9	16.0
19	7	1.3	1.3	17.4
20	2	.4	.4	17.7
22	23	4.4	4.4	22.1
23	16	3.1	3.1	25.2
25	2	.4	.4	25.6
29	9	1.7	1.7	27.3
30	3	.6	.6	27.9
50	7	1.3	1.3	29.2
55	28	5.3	5.3	34.5
58	6	1.1	1.1	35.7
59	11	2.1	2.1	37.8
66	10	1.9	1.9	39.7
68	17	3.2	3.2	42.9
70	6	1.1	1.1	44.1
73	31	5.9	5.9	50.0
74	50	9.5	9.5	59.5
78	39	7.4	7.4	67.0
86	14	2.7	2.7	69.7
93	22	4.2	4.2	73.9
97	15	2.9	2.9	76.7
???	1	.2	.2	76.9
109	3	.6	.6	77.5
110	38	7.3	7.3	84.7
111	13	2.5	2.5	87.2
134	3	.6	.6	87.8
135	3	.6	.6	88.4
149	5	1.0	1.0	89.3
197	22	4.2	4.2	93.5
237	4	.8	.8	94.3
279	12	2.3	2.3	96.6
281	2	.4	.4	96.9
320	2	.4	.4	97.3
327	5	1.0	1.0	98.3
350	1	.2	.2	98.5
354	1	.2	.2	98.7
384	2	.4	.4	99.0
412	5	1.0	1.0	100.0
Total	524	100.0	100.0	

Sample

1998 Follow-up respondents

The follow-up sample includes 363 males (69%) and 161 females (31%). They ranged in age from 18 through 75 (average age = 32.03 years, SD = 10.42) years. The racial/ethnic composition and religious preference of the 1998 sample is presented in the next tables. This data is drawn from the ADAS admission records.

Racial/Ethnic Composition of the 1998 Sample

Value Label	Value	Frequency	Valid Percent	Cum Percent	Percent
No answer	0	13	2.5	2.5	2.5
White (not Hispanic)	1	383	75.0	75.0	77.5
Black (not Hispanic)	2	77	15.1	15.1	92.6
American Indian	3	15	2.9	2.9	95.5
Alaskan Native	4	1	.2	.2	95.7
Asian or Pacific Islander	5	4	.8	.8	96.5
Hispanic - Mexican	6	11	2.2	2.2	98.6
Hispanic - Puerto Rican	7	1	.2	.2	98.8
Hispanic - Cuban	8	1	.2	.2	99.0
Other Hispanic	9	5	1.0	1.0	100.0
		-----	-----	-----	
	Total	511	100.0	100.0	

Valid cases 511 Missing cases 0

Religious Preferences of the 1998 Sample

Value Label	Value	Frequency	Percent	Valid Percent	Cum Percent
No answer		12	2.3	2.3	2.3
Protestant	1	138	27.0	27.0	29.4
Catholic	2	66	12.9	12.9	42.3
Jewish	3	1	.2	.2	42.5
Islamic	5	139	27.2	27.2	69.7
None	6	155	30.3	30.3	100.0
		-----	-----	-----	
	Total	511	100.0	100.0	

Valid cases 511 Missing cases 0

Residence

The respondents were living in 73 of Kansas' 105 counties at the time of their interviews. The counties with ten or more respondents in the follow-up sample were Sedgwick (123), Wyandotte (49), Johnson (37), Saline (25), Lyon (23), Crawford (17), Douglas (17), Shawnee (15), Labette (14), Montgomery (10), and Reno (10). Fifteen (2.9%) were not living in Kansas when they were interviewed. Thirty-seven percent of the respondents lived at their current address for a year or less and fifty-four percent said they or their family owned their residence.

When asked during the follow-up interviews, 410 said they had not been in a controlled environment in the prior thirty days, 24 had been in jail, 20 had been in an alcohol or drug treatment program, 3 had been in psychiatric treatment, and 66 had been in an other controlled environment. The number of days in a controlled environment in the past thirty days for those who had been in a controlled environment ranged from 1 to 30 days (mean =22.78 days, SD = 11.05 days).

Days in a Controlled Environment for those in Controlled Environments prior to their Follow-up Interviews

	Value	Frequency	Percent	Valid Percent	Cum Percent
	1	8	1.5	7.2	7.2
	2	3	.6	2.7	9.9
	4	3	.6	2.7	12.6
	5	5	1.0	4.5	17.1
	6	2	.4	1.8	18.9
	7	1	.2	.9	19.8
	10	4	.8	3.6	23.4
	14	1	.2	.9	24.3
	15	5	1.0	4.5	28.8
	21	4	.8	3.6	32.4
	28	2	.4	1.8	34.2
	29	1	.2	.9	35.1
	30	72	13.7	64.9	100.0
	0	413	78.8	Missing	
	-----	-----	-----		
	Total	524	100.0	100.0	
Mean	22.775	Median	30.000	Std dev	11.051
Minimum	1.000	Maximum	30.000		
Valid cases	111	Missing cases	413		

Treatment Modes

The modes of treatment for the respondents in the 1998 sample, which was drawn from the ADAS computer files, are shown in the following table.

Treatment Mode of Respondents

Value Label	Value	Frequency	Percent	Valid Percent	Cum Percent
Outpatient	1	160	30.5	30.5	30.5
Intermediate	2	67	12.8	12.8	43.3
Reintegration	3	23	4.4	4.4	47.7
Day treatment	4	7	1.3	1.3	49.0
Not known	5	219	41.8	41.8	90.8
Not known	8	3	.6	.6	91.4
Not known	9	45	8.6	8.6	100.0
	Total	524	100.0	100.0	
Valid cases	524	Missing cases	0		

Ninety-nine percent of the follow-up respondents entered their most recent alcohol or drug abuse treatment between 5/1/1997 and 9/1/1998. They were interviewed between 1/1/1998 and 12/6/1998.

ASI Follow-up Interview Results

The following information is based upon the answers given to us by the respondents during the follow-up ASI interviews. This information describes the responses of the over 500 adults we were able to interview in calendar year 1998. This report follows the sequence of items in the ASI from the cover page through the Psychiatric Status section.

ASI Cover page:

The respondents' living situations in the past thirty days was the only topic from the cover page of the ASI which was included in the follow-up interview. Twenty-two percent had been in a controlled environment in the past thirty days, including five percent who said they had been or were in jail, four percent in alcohol and/or drug treatment, and 0.6 percent in psychiatric treatment. Seventy-eight percent said they had not been in a controlled environment in the thirty days prior to their follow-up interviews. Those who were in controlled environments averaged twenty-two days of living in controlled environments during the past thirty days.

ASI Medical Status

Longitudinal Treatment Effects Comparison

Medical section respondent records were located for 506 Intake interviews, 91 Discharge interviews and 523 Follow-up interviews. Many respondents who had Intake records in the files did not have Discharge records in the ADAS/ASI files. This is likely due to some respondents still being in treatment, some never entering treatment, and some leaving treatment without completing a Discharge interview.

The average number of times each client was hospitalized during their lifetime was about two days. The follow-up group averaged 0.16 hospitalizations during the six months prior to their interviews. Twenty percent of the clients were taking prescribed medications at Intake, Discharge, and Follow-up. Four to six percent were receiving a pension for a physical disability at Intake, Discharge, and Follow-up. There are three medical items which permit direct comparisons between the clients' functioning at Intake, Discharge and Follow-up because these items covered the same time period at each of the three interviews and they were asked of all the interviewees. The number of days of medical problems in the past thirty days averaged four to five days for the three ASI interviews.

The intake and discharge alcohol and drug abuse clients were all asked to rate how troubled or bothered they were by medical problems on the Patients' Rating Scale, but only those who reported some medical problem days for the Follow-up interview were asked make these ratings which resulted in a much smaller and unrepresentative sample for these two items. Modified Patient Rating Scale averaged were computed to overcome this problem. When the follow-up clients who said they had some days of medical problems were asked how important medical treatment was this limited group rated how troubled or bothered they were and the importance of medical treatment higher than they did at Intake or Discharge. When the modified ratings were used some differences were found between the Discharge and Intake or Follow-up modified ratings.

Composite scores were created to provide summary problem scores for each section of the ASI with higher scores indicating more problems on a 0 to 1 range. For the medical section a modified medical composite score was computed for each respondent. The modification was that a Patients's Rating Score of zero was given for those respondents who said they had no days of medical problems in the past thirty days unless they gave a higher rating. This generated composite problem scores for 507 clients at Intake, 93 clients at Discharge and 522 clients at Follow-up. The average medical composite problem scores were 0.17, 0.12, and 0.17 respectively. These scores were not significantly different.

ASI Medical Status - Longitudinal Treatment Effects
(averages or percentages)

	Group			SA*
	Intake	Discharge	Follow-up	
<u>Client responses:</u>				
Times hospitalized lifetime	2.04	2.01	na	ns
Since admission			0.16	
Do you have any chronic medical problems which continue to interfere with your life?				
Taking prescribed medication (% yes)	21%	22%	20%	ns
Receive pension for physical disability (% yes)	6%	4%	6%	ns
How many days have you experienced medical problems in the past 30? (Days)	4.54	3.59	4.48	ns
How troubled or bothered have you been by these medical problems in the past 30 days?				
Mod. trouble rating*	0.77	0.52	0.89	B
How important to you now is treatment for these medical problems?				
Mod. treatment rating*	0.69	0.33	0.57	A
Mod. Medical composite*	0.17	0.12	0.17	ns
{n}	{507}	{93}	{522}	

Note: SA = STATISTICAL ANALYSIS:

A = Significant difference between Intake and Discharge.

B = Significant difference between Discharge and Follow up.

C = Significant difference between Intake and Follow up.

NS = no statistically significant difference

* = Modified scores calculated to increase sample size (n => 1,000).

ASI Employment/Support Status

Employment / Support Longitudinal Treatment Effect Comparison

The following Longitudinal Treatment Effect table shows improvements in the respondents' employment and support status. A higher percentage have both a valid driver's licenses and an automobile available for use at follow-up than they had at either intake or discharge. Fewer are dependant on other people for their support at follow-up than they were at discharge. The number of days worked in the thirty days prior to the interviews increased significantly from intake to follow-up - a 36% increase in days worked. Their income from employment increased from \$440 at intake to \$493 at discharge to \$746 at follow-up for an overall gain of \$306 per month -- a 70% improvement. Their employment income increased significantly between intake and discharge and follow-up. Apparent changes in unemployment compensation, public assistance, social security, and illegal income were not statistically significant changes. The amount the clients received from their mates, family, or friends decreased significantly from \$71 at intake to \$22 at follow-up. When asked how many days they experienced employment problems in the past thirty days, the numbers were significantly lower at discharge and follow-up than at intake with 7.69 days on the average at intake, 3.91 days at discharge, and 4.42 days at follow-up. The number of days of employment problems declined almost 43% from intake to follow-up. Their reports of the number of people who depend on them for the majority of their food, shelter, etc. was stable at about one dependent at Intake, Discharge, and Follow-up.

On the Patient's Rating Scale, the average modified ratings regarding how troubled or bothered they were by their employment problems declined from intake to discharge and follow-up. Their modified ratings of the importance of employment counseling showed a similar pattern with a marked decline from intake to discharge and then to follow-up.

The average modified composite problem scores for the employment section were 0.61, 0.65, and 0.57 for the clients at intake, discharge, and follow-up, respectively. The treatment effect is statistically significant with the Follow-up respondents showing lower problem levels than those at intake or discharge. This confirms the general trend in the employment results which show increases in days worked, more income, fewer employment problem days, and lower employment problem ratings.

ASI Employment/Support Section - Longitudinal Treatment Effect Table
 Employment / Support Status
 (averages or percentages)

Item:	Group			SA*
	Intake	Discharge	Follow-up	
Education completed (GED = 12 years)	11.77	10.21	na	A
Do you have a profession, trade or skill? (% Yes)				
Do you have a valid driver's license? (% Yes)	53%	51%	59%	ns
Do you have an automobile available for use? (% Yes)	43%	37%	52%	B C
How long was your longest full-time job? (years)				
Does someone contribute to your support in any way?(% Yes)	41%	31%	49%	B C
Does this constitute the majority of your support? (%Yes)	66%	41%	30%	A C
How many days were you paid for working in the past 30?	10.22	9.50	13.86	B C
Income:				
Employment	\$439.66	\$493.41	\$745.92	B C
Unemployment comp.	\$11.63	\$11.61	\$11.35	ns
Public assistance (SRS)	\$30.80	\$25.13	\$24.81	ns
Pension, benefits or Social security	\$54.75	\$31.71	\$54.18	ns
Mate, family, friends	\$70.79	\$71.27	\$21.80	C
Illegal income	\$27.00	\$0.00	\$2.44	ns
Approximate sample size	510	90	515	

Note: SA = STATISTICAL ANALYSIS:

- A = Significant difference between Intake and Discharge.
- B = Significant difference between Discharge and Follow up.
- C = Significant difference between Intake and Follow up.
- ns = no statistically significant difference.

ASI Employment/Support Section - Longitudinal Treatment Effect Table
 (averages or percentages)
 (continued)

Item:	Group			SA*
	Intake	Discharge	Follow-up	
How many people depend on you for the majority of their food, shelter, etc.?	0.97	1.07	0.88	ns
How many days have you experienced employment problems in the past 30?	7.69	3.91	4.42	A C
How troubled or bothered have you been by these employment problems in the past 30 days? (Not at all=0, extremely=4) (Modified patient ratings)	1.24	0.65	0.81	A C
How important to you now is counseling for these employment problems? (Not at all=0, extremely=4) (Modified patient ratings)	0.91	0.27	0.30	A C
Employment Composite Score (Modified)	0.61	0.65	0.57	B C
Approximate sample size	510	110	520	

Note: SA = STATISTICAL ANALYSIS:
 A = Significant difference between Intake and Discharge.
 B = Significant difference between Discharge and Follow up.
 C = Significant difference between Intake and Follow up.
 ns = no statistically significant difference.

ASI Drug/Alcohol Use

Longitudinal Treatment Effect

The next table presents the average responses to items in the drug / alcohol use section of the ASI at Intake, Discharge, and Follow-up. The self-reported number of days of use in the past thirty days of alcohol, opiates and analgesics, cocaine, amphetamines, marijuana, and multiple drugs declined from Intake to Follow-up. Statistically significant differences in the days of drug use in the past 30 days between the Intake and Discharge groups were also found for alcohol, alcohol intoxication, cocaine, amphetamines, marijuana, and multiple drug use. The average number of days of alcohol use declined by 52% between Intake and Follow-up. The average number of days of cocaine use dropped over 85%. Days of amphetamine use dropped 92% from Intake to Follow-up. Marijuana use was lower at Discharge and Follow-up than at intake with an average 69% decline in the number of days of use in the past thirty days. No significant effects were found for heroin, methadone, other opiates / analgesics, barbiturates, hallucinogens, or inhalants which had low levels of reported use prior to treatment admission.

The average amount spent on alcohol in the thirty days prior to each of the interviews dropped from about \$53 at Intake to \$7 at discharge and \$21 at follow-up. The 60% decline in the amount spent on alcohol from the Intake level to the Follow-up level was statistically significant. The average amount spent on drugs reported at Intake was about \$161 which declined to \$14 at discharge and \$15 at follow-up. This is a 91% drop in the amount spent on drugs in the thirty days prior to the Intake and Follow-up interviews.

Thirty-day abstinence rates were computed for the Intake, Discharge, and Follow-up respondents. Statistically significant increases in abstinence rates were found for cocaine, amphetamines, cannabis, and multi-drug use from Intake to Discharge and from Intake to Follow-up. For alcohol use the abstinence rates at Intake, Discharge, and Follow-up were 46%, 82%, and 67% respectively. The abstinence rates for drugs other than alcohol was 59% at Intake, 91% at Discharge, and 81% at Follow-up. The total abstinence rates (alcohol and other drugs) were 34%, 80%, and 59% for Intake, Discharge, and Follow-up, respectively. While 66% were using alcohol or other drugs in the thirty-days prior their Intake interviews, only 41% said they were using alcohol or other drugs in the thirty days prior to the 6-month Follow-up interviews. These treatment related changes were significantly different.

The clients' ratings of amount of trouble or bother and the importance of treatment for alcohol and/or drug problems declined significantly from Intake to Discharge to Follow-up. The modified composite problem scores for the alcohol items were 0.25, 0.13, and 0.08 for the Intake, Discharge, and Follow-up groups, respectively. All three modified alcohol ASI composite problem scores were significantly different, but the sample for the Discharge group was only 20% the size of the Admission and Follow-up groups. The modified drug composite ASI problem scores were 0.10, 0.05, and 0.03 for Admission, Discharge, and Follow-up, respectively. These scores show significant differences between the drug problem levels at Admission and Follow-up. The reductions in drug problem scores from Intake to Discharge, Discharge to Follow-up, and Intake to Follow-up are associated with the drug treatments the respondents received. However, many respondents reported using alcohol (33%) or other drugs (20%) in the thirty days prior to their Follow-up interviews.

The clients' major drug problem varied between the three groups. At Admission 47% had alcohol and alcohol to intoxication as their major problem. Dual addictions, including alcohol and other drugs, were reported for 15% and marijuana was reported as the major problem for 13%. For those interviewed at Discharge 28% had no problem, 24% had an alcohol problem, 17% had a dual addiction problem, and 11% had marijuana as their major problem. At the 6-month Follow-up interview 79% were found to have alcohol and alcohol to intoxication as their major problem and 5% had marijuana as their major problem. The types of major problems were found to differ significantly between the Admission, discharge, and Follow-up groups.

There are clear reductions in alcohol and drug use which are associated with the substance abuse treatment received by the Kansas ADAS clients. These reductions are apparent and statistically significant when the overall results for the alcohol and drug use section of the Addiction Severity Index are considered.

ASI Alcohol and Drug Use - Longitudinal Treatment Effects
Days of Use in the Past 30 Days
(averages)

DRUG:	Group			SA*	
	Intake	Discharge	Follow-up	A	C
Alcohol use	5.29	1.06	2.54	A	C
Alcohol - intox.	3.46	0.60	1.59	A	C
Heroin	0.08	0.00	0.06	NS	
Methadone	0.08	0.00	0.03	NS	
Other opiates/ analgesics	0.17	0.00	0.43	NS	
Barbiturates	0.02	0.00	0.12	NS	
Other sedatives/ hypnotics/tranq.	0.53	0.00	0.84	NS	
Cocaine	1.73	0.43	0.26	A	C
Amphetamines	1.18	0.20	0.09	A	C
Cannabis	2.98	0.61	0.92	A	C
Hallucinogens	0.13	0.00	0.01	NS	
Inhalants	0.13	0.00	0.01	NS	
More than one substance per day (incl. alcohol)	2.41	0.61	0.74	A	C
Sample size (typical)	504	90	515		

Note: SA = STATISTICAL ANALYSIS:
 A = Significant difference between Intake and Discharge.
 B = Significant difference between Discharge and Follow up.
 C = Significant difference between Intake and Follow up.
 NS = no statistically significant difference.

ASI Alcohol and Drug Use - Longitudinal Treatment Effects
(averages)
(continued)

	Group			SA*
	Intake	Discharge	Follow-up	
Amount spent on alcohol in past 30 days	\$53.35	\$6.94	\$20.61	A C
Amount spent on drugs in past 30 days	\$160.57	\$13.86	\$15.27	A C
Outpatient Treatment Days in past 30 days	2.17	6.70	4.04	A B C
Alcohol Problem Days in past 30 days	10.50	2.70	2.11	A C
Drug Problem Days in past 30 days	5.45	2.16	1.76	A C
How troubled or bothered have you been in the past 30 days by these... alcohol problems?*	1.43	0.74	0.37	A B C
drug problems?*	1.35	0.59	0.34	A C
How important to you now is treatment for these ... alcohol problems?*	2.20	1.26	0.57	A B C
drug problems?*	1.84	1.00	0.40	A B C
Composite problem scores				
alcohol*	0.25	0.13	0.08	A B C
drug*	0.10	0.05	0.03	A C
Sample size (typical)	510	90	510	

* indicates modified ratings to preserve sample size.

Note: SA = STATISTICAL ANALYSIS:

A = Significant difference between Intake and Discharge.

B = Significant difference between Discharge and Follow up.

C = Significant difference between Intake and Follow up.

NS = no statistically significant difference.

ASI Alcohol and Drug Use - Longitudinal Treatment Effects
 Abstinence Rates
 (percentages)

DRUG:	Group			SA*
	Intake	Discharge	Follow-up	
Alcohol	46.25%	82.22%	66.67%	A B C
Heroin	98.81%	100.00%	99.81%	C
Methadone	99.60%	100.00%	99.42%	NS
Other opiates/ analgesics	97.62%	100.00%	95.15%	B C
Barbiturates	99.41%	100.00%	99.61%	NS
Other sedatives/ hypnotics/tranq.	94.85%	100.00%	94.95%	A B
Cocaine	83.76%	95.56%	96.70%	A C
Amphetamines	88.49%	96.67%	98.06%	A C
Cannabis	72.28%	95.56%	88.93%	A C
Hallucinogens	99.01%	100.00%	99.61%	NS
Inhalants	98.81%	100.00%	99.42%	NS
More than one substance per day (incl. alcohol)	76.63%	93.33%	90.66%	A C
Drug other than alcohol	58.85%	91.11%	80.54%	A B C
Alcohol and drugs	33.60%	80.00%	58.87%	A B C
Sample size (typical)	505	90	515	

Note: SA = STATISTICAL ANALYSIS:
 A = Significant difference between Intake and Discharge.
 B = Significant difference between Discharge and Follow up.
 C = Significant difference between Intake and Follow up.
 NS = no statistically significant difference.

Major Alcohol Drug Problem at Admission, discharge, and Follow-up
(Count and Row Percent)

	Admission	Discharge	Follow-up
MJR_PBLM			
No problem	7 1.4%	25 27.8%	0 0%
Alcohol	178 35.1%	22 24.4%	267 51.9%
Alcohol -intoxication	60 11.8%	8 8.9%	141 27.4%
Heroin	1 0.2%	0 0%	0 0%
Methadone	0 0%	0 0%	6 1.2%
Other opiates and Analgesics	2 0.4%	0 0%	3 0.6%
Other sedatives/ hypnotics/tranq	2 0.4%	0 0%	5 1.0%
Cocaine	39 7.7%	4 4.4%	11 2.1%
Amphetamines	34 6.7%	5 5.6%	5 1.0%
Cannabis	68 13.4%	10 11.1%	26 5.1%
Hallucinogens	1 0.2%	0 0%	0 0%
Multi-drug (Incl. Alcohol)	0 0%	0 0%	35 6.8%
Polydrug	40 7.9%	1 1.1%	15 2.9%
Dual addiction (Alcohol & Drug)	75 14.8%	15 16.7%	0 0%
Column	507	90	514

Chi-Square	Value	DF	Significance
Pearson	525.07649	28	.00000
Likelihood Ratio	492.75333	28	.00000
Linear-by-Linear Association	106.27697	1	.00000

ASI Legal Status:

Fifty-two percent of the clients said they were on probation. The percent of clients on probation was 56% at Discharge and it dropped to 43% at Follow-up. At Admission and Discharge clients were asked how many times in their lifetime they were arrested and charged with a variety of crimes while the Follow-up clients were asked how many times since they entered treatment, about 6-8 months prior to the follow-up interview, they were arrested and charged with the same list of crimes. At Admission the average number of lifetime arrests and charges per client were: drug charges (0.58), parole/probation violations (0.55) burglary (including larceny and breaking and entering) (0.17), and assault (0.30). Lower lifetime arrest and charge rates were reported for contempt of court (0.14), weapons offenses (0.08), robbery (0.03), and prostitution (0.01). Fewer charges for homicide, manslaughter, or rape were reported. The Admission client group reported an average of 1.86 convictions for their charged crimes.

On the average the clients interviewed at Admission reported 2.07 major driving violations per client and 1.26 charges for driving while intoxicated. There are some indications that the clients who completed Discharge interviews had less serious legal problems than the larger group who were interviewed at Admission. Significantly fewer lifetime offenses were reported by the Discharge group than the Admission group for lifetime drug charges, and parole and probation violations.

The clients were also asked if they were presently awaiting charges. The percent awaiting charges dropped from about 26% for the Admission group and 17% for the Discharge group to 13% six to eight months later for the Follow-up respondents. The Intake clients reported being detained or incarcerated about two days in the past thirty days, while the Follow-up respondents averaged less than one day. The clients' rating of the degree of seriousness and importance of counseling or referral for their legal problems declined significantly from Admission to Discharge and to Follow-up.

The modified legal status problem composite scores were 0.19, 0.12, and 0.09 for the Admission, Discharge and Follow-up groups. The decline in the legal problem composite scores from Intake to Discharge and Follow-up was statistically significant. These findings show a variety of reductions in measures of the clients' legal difficulties which are associated with the treatments received by these alcohol and drug abuse clients.

ASI Legal Status - Longitudinal Treatment Effects
(averages or percentages)

	Group			SA*
	Admission	Discharge	Follow-up	
Are you on probation or parole? %Yes	51.58%	55.91%	42.94%	A C
How many times in your life have you been arrested and charged with the following? (Lifetime rates -- Since admission rates)				
Parole/prob. violations	.5455	.2473	.1389	A
Drug charges	.5870	.2796	.0509	A
Forgery	.0692	.0645	.0039	NS
Weapons offense	.0771	.0430	.0020	NS
Burglary, larceny, B&E	.1660	.1290	.0059	NS
Robbery	.0316	.0538	.0039	NS
Assault	.3024	.2366	.0137	NS
Arson	.0079	.0000	.0000	NS
Rape	.0079	.0000	.0020	NS
Homicide, Manslaughter	.0059	.0000	.0000	NS
Prostitution	.0119	.0000	.0000	NS
Contempt of Court	.1443	.0215	.0078	NS
Other	.3904	.1613	.0431	NS
Sample size (typical)	506	93	510	

Note: SA = STATISTICAL ANALYSIS:

A = Significant difference between Admission and Discharge rates.

NS = no statistically significant difference.

Comparisons between Admission and Discharge with Follow-up were not appropriate since the Admission and discharge rates were lifetime rates and the Follow-up rates were only for the period since Admission to treatment.

ASI Legal Status - Longitudinal Treatment Effects
(averages or percentages)
(continued)

	Group			SA*
	Admission	Discharge	Follow-up	
	Lifetime	Since admission		
How many of these charges resulted in convictions?	1.86	0.89	0.16	n/a
How many times in your life have you been charged with the following?				
Disorderly conduct, vagrancy, public intoxication	0.40	0.23	0.02	n/a
Driving while intoxicated	1.26	1.31	0.05	n/a
Major driving violations	2.07	1.78	0.20	n/a
How many months were you incarcerated in your life?	3.97	4.27	0.30	n/a
Are you presently awaiting charges, trial or sentence? % Yes	26.09%	17.20%	13.31%	A C
How many days in the past 30 were you detained or incarcerated?	2.07	1.45	0.90	C
How many days in the past 30 have you engaged in illegal activities for profit?	1.02	0.01	0.04	A C
How serious do you feel your present legal problems are? (Patient's Rating Scale 0=Not at all--4=Extremely)	1.58	0.88	0.70	A C
How important to you now is counseling or referral for these legal problems? (Patient's Rating Scale 0= not at all--4=Extremely)	0.99	0.50	0.53	A C
Legal Status composite score	0.19	0.12	0.09	A C

Note: SA = STATISTICAL ANALYSIS:

- A = Significant difference between Admission and Discharge.
- B = Significant difference between Discharge and Follow up.
- C = Significant difference between Admission and Follow up.
- NS = no statistically significant difference.
- + = Since admission to treatment or in the last 6-8 months.

ASI Family / Social Relationships

The information obtained in this section from the respondents pertained to their family and social relationships. At Admission 20% of the clients were currently married, 25% were divorced, 44% were never married and 1% were remarried. By the time of the Follow-up interviews, 6-8 months later, 17% were still married, 28% were divorced, and 6% were remarried. These changes were accompanied by increases in their marital satisfaction which increased from 1.56 to 1.68 on the 0 - 2 scale. The clients' living arrangements also appear to have changed from Intake to Follow-up with fewer living with their sexual partner (27% vs. 36%) and more living with their parents (18% vs. 13%). The Follow-up clients were more satisfied with their living arrangements than they were at Intake or Discharge.

Between Intake and Follow-up there were marked and statistically significant declines in the percent who had serious problems getting along with their mothers (declined from 16% to 9%), fathers (14% to 9%), brothers or sisters (13% to 9%), sexual partners or spouses (23% to 17%), and their neighbors (5% to 2%). The number of days in the past thirty days they had serious conflicts with non-family members also declined significantly. Their modified ratings of how troubled or bothered they were by family problems or social problems declined from Intake to Discharge and Follow-up and their need for counseling for these problems also declined from Intake to Discharge and Follow-up.

The modified family relationships composite problem scores for the Intake, Discharge, and Follow-up clients were 0.33, 0.24, and 0.24, respectively. The Discharge and Follow-up respondents had significantly lower problem scores than they had when they were at the Intake phase. These and the above results show reductions in family relationship problems which are associated with the alcohol and drug abuse treatments received by the ADAS clients.

ASI Family / Social Relationships - Longitudinal Treatment Effects
(averages or percentages)

Item	Group			SA*
	Intake	Discharge	Follow-up	
Marital Status				
Married	20%	25%	17%	
Remarried	1%	1%	6%	
Widowed	2%	1%	2%	
Separated	8%	12%	6%	
Divorced	25%	20%	28%	
Never married	44%	41%	42%	
Satisfaction with marital status*				
0=no, 1=Indif., 2=yes	1.56	1.53	1.68	C
Usual living arrangements with sexual partner and children				
with sexual partner and children	22%	29%	15%	
with sexual partner alone	14%	10%	12%	
with children alone	9%	6%	10%	
with parents	13%	10%	18%	
with family	17%	19%	16%	
with friends	5%	3%	6%	
alone	16%	13%	20%	
controlled environment	1%	6%	3%	
no stable arrangements	5%	4%	1%	
Satisfaction with living arrangements*				
0 = no, 1 = Indif., 2 = Yes	1.40	1.25	1.60	B C

Note: SA = STATISTICAL ANALYSIS:

- A = Significant difference between Intake and Discharge.
- B = Significant difference between Discharge and Follow up.
- C = Significant difference between Intake and Follow up.
- NS = no statistically significant difference.
- * Modified values for increased sample size (n = 1,100+).

ASI Family / Social Relationships (continued)
(averages or percentages)

Item	Group			SA*
	Intake	Discharge	Follow-up	
Have you had significant period in the past 30 days in which you experienced serious problems getting along with ... (% yes)				
mother	16.16%	14.44%	8.79%	C
father	14.01%	5.88%	8.86%	A C
brothers/sisters	13.01%	6.59%	9.34%	ns
sexual partner/spouse	22.77%	16.09%	17.32%	C
children	8.01%	6.67%	6.17%	ns
other sig. family	4.38%	2.27%	3.11%	ns
close friends	7.43%	3.57%	5.03%	ns
neighbors	4.63%	1.12%	2.40%	C
co-workers	2.85%	1.22%	6.86%	B C
How many days in the past 30 have you had serious conflicts:				
with your family?	2.91	1.26	1.81	A C
with other people?	1.43	0.53	0.85	C
n (typical)	505	92	509	

Note: SA = STATISTICAL ANALYSIS:

A = Significant difference between Intake and Discharge.

B = Significant difference between Discharge and Follow up.

C = Significant difference between Intake and Follow up.

NS = no statistically significant difference.

ASI Family / Social Relationships (continued)
(averages or percentages)

Item	Group			SA*
	Intake	Discharge	Follow-up	
<u>Patient's Rating Scale:</u>				
How troubled or bothered have you been in the past 30 days by these:				
family problems?*	1.33	0.67	0.52	A C
Social problems?*	0.74	0.31	0.23	A C
How important to you now is treatment or counseling for these:				
family problems?*	1.26	0.72	0.37	A B C
social problems?*	0.74	0.35	0.17	A C
Family Relationships Composite Problem score*	0.33	0.24	0.24	A C

Sample size (typical)

Note: SA = STATISTICAL ANALYSIS:

- A = Significant difference between Intake and Discharge.
- B = Significant difference between Discharge and Follow up.
- C = Significant difference between Intake and Follow up.
- NS = no statistically significant difference.
- * Modified ratings to increase sample size (n => 1,000).

ASI Psychiatric Status

In this section the clients' responses to items pertaining to their psychiatric status and feelings of psychological difficulties are presented. At Intake the clients reported an average of 0.55 hospital treatments and 0.81 outpatient treatments for a psychological or emotional problem for an average of over one treatment per client. Since they were interviewed for admission to alcohol or drug treatment they averaged 0.11 hospital and 1.25 outpatient treatments. The percent of clients who said they were receiving a pension for a psychiatric disability was about 4% at Intake and Follow-up.

The lifetime incidence of psychological and emotional problems seems high with 59% reporting serious depression, 55% reporting serious anxiety or tension, 35% reporting trouble understanding, 40% reporting trouble controlling violent behavior, 31% reporting serious thoughts of suicide, and 20% reporting suicide attempts during their Intake interviews. About 29% had been on prescribed medications for a psychological or emotional problem prior to Admission.

The clients reported marked reductions in psychiatric symptoms between Intake and Follow-up. The percent of clients who said they had psychological or emotional problems in the thirty days prior to each of the interviews declined significantly from Intake to the Follow-up for the following: serious depression (30% vs 23%); serious anxiety or tension (44% vs 27%); hallucinations (6% vs 3%); trouble understanding, concentrating or remembering (27% vs 20%); trouble controlling violent behavior (14% vs 6%); having serious thoughts of suicide (11% vs 3%), and, suicide attempts ((4% vs 1%). The number of days in the past thirty days during which they experienced these psychological or emotional problems decreased from an average of 7.80 days at Intake to an average of 5.98 days at Follow-up. The clients' own ratings of how much they were troubled or bothered and how important treatment was for these psychological or emotional problems also decreased significantly from Intake to Follow-up.

Similar psychological improvements were found in the interviewers' ratings of the clients' mental health. Significant decreases in the percent of clients who were rated as having the following problems were found between intake and follow-up: depressed/withdrawn (22% to 7%); anxious/nervous (22% to 2%); trouble with reality testing, thought disorders, or paranoid thinking (5% to 1%); trouble comprehending, and, concentrating, or remembering (10% to 3%).

The average ASI psychiatric problem composite scores were 0.22, 0.16, and 0.14 for the Intake, Discharge and Follow-up phases of the treatment effectiveness evaluation study. The Discharge and Follow-up composite scores were significantly lower than the clients' Intake psychiatric composite score. These results reflect improvements in the clients' psychological functioning which are associated with the clients' alcohol and drug abuse treatments.

About one percent of the follow-up interviews were rated by the interviewers as being adversely affected by the client's misrepresentation or inability to understand some of the items in the interview.

ASI Psychiatric Status - Longitudinal Treatment Effects
(averages or percentages)

Item:	Group		Follow-up Since Admission	SA*
	Intake Lifetime	Discharge		
How many times have you been treated for any psychological or emotional problem: in a hospital?	0.55	0.71	0.11	na
as an outpatient?	0.81	0.18	1.25	na
Do you receive a pension for a psychiatric disability? %Yes	3.75%	2.17%	4.31%	ns
Have you had a significant period (that was not a direct result of drug/alcohol use) in which you have:	PAST 30 DAY PERIOD (% Yes)			
experienced serious depression?	30.43%	27.96%	23.38%	C
experienced serious anxiety or tension?	43.68%	35.49%	27.42%	C
experienced hallucinations?	5.73%	5.38%	3.14%	C
experienced trouble under- standing, concentrating or remembering?	27.27%	13.98%	19.65%	A C
experienced trouble control- ling violent behavior?	14.43%	8.60%	5.51%	C
experienced serious thoughts of suicide?	10.87%	5.38%	2.75%	A C
attempted suicide?	3.56%	0.00%	1.38%	A C
been prescribed medication for any psychological / emotional problem?	15.02%	11.83%	14.17%	ns
How many days in the past 30 have you experienced these psychological or emotional problems?	7.80	5.34	5.98	A C
PATIENT'S RATING SCALE				
How much have you been troubled or bothered by these psychological or emotional problems in the past 30 days?*	1.35	0.09	0.86	A C
How important to you now is treatment for these psychological problems?*	1.36	0.88	0.71	A C
N (typical)	506	93	508	

Note: SA = STATISTICAL ANALYSIS:

A = Significant difference between Intake and Discharge.

B = Significant difference between Discharge and Follow up.

C = Significant difference between Intake and Follow up.

NS = no statistically significant difference.

*modified rating to increase sample size (n ~ 1,100)

ASI Psychiatric Status
(percentages)

Item	<u>Group</u> <u>Admission</u>
LIFETIME (% Yes)	
experienced serious depression?	59%
experienced serious anxiety or tension	55%
experienced hallucinations	12%
experienced trouble understanding, concentrating or remembering	35%
experienced trouble controlling violent behavior	40%
experienced serious thoughts of suicide	31%
attempted suicide	20%
been prescribed medication for any psychological / emotional problem	29%

ASI Psychiatric Status - Longitudinal Treatment Effects
(averages or percentages)

Item	Group			SA*
	Intake	Discharge	Follow-up	
INTERVIEWER RATINGS				
At the time of the interview,				
is patient: % Yes				
obviously depressed/withdrawn	21.54%	13.98%	7.44%	C
obviously hostile	2.57%	5.38%	1.72%	B
obviously anxious/nervous	22.33%	20.43%	1.53%	B C
having trouble with reality testing, thought disorders, paranoid thinking	4.74%	8.60%	0.57%	A B C
having trouble comprehending, concentrating, remembering	9.88%	1.08%	2.86%	A C
having suicidal thoughts	1.38%	2.15%	0.38%	ns
Psychiatric section composite problem score*	0.22	0.16	0.14	A C
Is the follow-up information significantly distorted by:				
Patient's misrepresentation			0.40	
Patient's inability to understand			1.10	
n (typical)	506	93	510	

Note: SA = STATISTICAL ANALYSIS:

A = Significant difference between Intake and Discharge.

B = Significant difference between Discharge and Follow up.

C = Significant difference between Intake and Follow up.

ns = no statistically significant difference.

* Modified rating to increase sample size (n ~ 1,100).

Respondents' Evaluations

The 1998 included five questions which provided the follow-up respondents a chance to give their views on the value of the alcohol and drug treatments they received from the ADAS programs. The new questions were:

1. "How much did the treatment program help you reduce your dependence on alcohol or drugs?"
2. "How helpful was your counselor?"
3. "How much did your treatment program help you gain more control over your life?"
4. "Overall, how useful was your treatment program?"

These questions were asked with four and five point scales on which a higher value indicated greater treatment effectiveness. A fifth question asked for their comments and suggestions for improving the treatment programs. These suggestions will be included in a later report.

These new questions were answered by over 500 of the 524 follow-up respondents. On the first question concerning how much the treatment program reduced their dependency, 83.3% said it helped from "a bit" to "a lot." Only 16.7% said the program did not help at all. Over 86% said their counselor was "helpful," "Moderately helpful," or "very helpful" and 14% said their counselor was "not helpful." About 84% said the treatment helped them gain control over their lives "a bit," "somewhat," or "a lot" and 16% said it didn't help. Forty percent said their treatment was "very useful," 20% said it was "moderately useful," 22% said it was "useful," and 8% rated the treatment "useless" and 10% said it was "very useless."

Respondent Evaluations
(response distributions)

"How much did the treatment program help you reduce your dependency on alcohol or drugs?"

Value Label	Value	Frequency	Percent	Valid Percent	Cum Percent
Not at all	1	85	16.2	16.7	16.7
A bit	2	86	16.4	16.9	33.7
Somewhat	3	112	21.4	22.0	55.7
A lot	4	225	42.9	44.3	100.0
Don't know	8	2	.4	Missing	
No answer	9	14	2.7	Missing	
	Total	524	100.0	100.0	
Mean	2.939	Median	3.000	Mode	4.000
Std dev	1.132	Minimum	1.000	Maximum	4.000
Valid cases	508	Missing cases	16		

“How much did your treatment program help you gain more control over your life?”

Value Label	Value	Frequency	Percent	Valid Percent	Cum Percent
Not at all	1	79	15.1	15.6	15.6
A bit	2	81	15.5	15.9	31.5
Somewhat	3	121	23.1	23.8	55.3
A lot	4	227	43.3	44.7	100.0
Don't know	8	2	.4	Missing	
No answer	9	14	2.7	Missing	
Total		524	100.0	100.0	
Mean	2.976	Median	3.000	Mode	4.000
Std dev	1.109	Minimum	1.000	Maximum	4.000
Valid cases	508	Missing cases	16		

“Overall, how useful was your treatment?”

Value Label	Value	Frequency	Percent	Valid Percent	Cum Percent
Very useless	1	50	9.5	9.8	9.8
Useless	2	42	8.0	8.3	18.1
Useful	3	112	21.4	22.0	40.1
Moderately useful	4	102	19.5	20.0	60.1
Very useful	5	203	38.7	39.9	100.0
Don't know	8	1	.2	Missing	
No answer	9	14	2.7	Missing	
Total		524	100.0	100.0	
Mean	3.719	Median	4.000	Mode	5.000
Std dev	1.326	Minimum	1.000	Maximum	5.000
Valid cases	509	Missing cases	15		

“How helpful was your counselor?”

Value Label	Value	Frequency	Percent	Valid Percent	Cum Percent
Not helpful	1	69	13.2	13.6	13.6
Helpful	2	76	14.5	15.0	28.5
Moderately helpful	3	75	14.3	14.8	43.3
Very helpful	4	288	55.0	56.7	100.0
Don't know	8	1	.2	Missing	
No answer	9	15	2.9	Missing	
Total		524	100.0	100.0	
Mean	3.146	Median	4.000	Mode	4.000
Std dev	1.114	Minimum	1.000	Maximum	4.000
Valid cases	508	Missing cases	16		

Modified Composite Scores

Composite scores for the Addiction Severity Index were developed for the purpose of detecting improvements in clients' functioning as they progressed through various stages of treatment and subsequent evaluation, such as the follow-up studies. The composite measures were designed to be reliable and valid measures which summarize each of the sections of the Addiction Severity Index by selectively including and weighting key items from each section which would be measures of change. These include the patients' ratings of how troubled or bothered they are by the relevant problems of concern in each section. Higher composite scores indicate more and/or more troublesome problems and lower composite scores indicate fewer and/or less pressing problems. The number of items included for the composite score for each section is shown in the next table.

Section	Number of items
Medical Status	3
Employment Status	4
Alcohol Use	6
Drug Use	13
Legal Status	5
Family/Social Status	13
Psychiatric Status	11

Since the items concerning how troubled or bothered the clients were about certain problems or how important treatment was were not asked or answered if the client said he or she had no such problems, it was necessary to logically infer the responses for these items. The modified composite scores were created to retain a larger and more representative sample and to not lose evidence of improvement from those clients who did not answer questions about how bothered they were or how important treatment was in particular section of the ASI. This inferred rating on the Patients' Rating Scale, was used to compute the following modified composite scores for the statistical analyzes of the Follow-up data utilizing the formulas provided by the developers of the ASI.

Correlations between ASI section composite scores

The creation of the composite scores permitted the analysis of the linkages between different sections of the ASI to determine if a client's alcohol or drug problems were related to other problems the client reported during the ASI interviews. The next tables present the correlations between the modified composite scores for each section of the ASI separately for the intake and follow-up interviews. Theoretically correlations may range from -1, which indicates that a high score on one measure is associated with a low score on the other measure, to 0, which indicates no relationship, to 1, which indicates that a high score on one measure is associated with a high score on the other measure.

The correlations between the composite scores for the Intake data show that the strongest correlations for the alcohol and drug composite problem scores were the psychiatric and family modified composite problem scores. That is, those with greater alcohol and drug problems reported more psychiatric and family problems. Since this is a correlational analysis it is unclear whether the alcohol and drug problems caused the psychiatric and family problems or the alcohol and drug problems were caused by the psychiatric and family problems. It is clear that they co-occurred and very likely affected each other. The alcohol and drug composite problem scores were also significantly correlated which indicates that both substance abuse problems require attention for many of the clients.

- - Modified Composite Problem Score Correlation Coefficients - -
Intake ASI Interview Data

	Alcohol	Drug	Employment	Family	Legal	Medical	Psychiatric
Alcohol	1.0000	.1595**	.0634	.3170**	.0878*	.1196**	.3901**
Drug	.1595**	1.0000	.0326	.3370**	.0029	.1170**	.3864**
Employment	.0634	.0326	1.0000	-.0631	.0823	-.0236	-.0105
Family	.3170**	.3370**	-.0631	1.0000	.0067	.2196**	.4344**
Legal	.0878*	.0029	.0823	.0067	1.0000	.0547	-.0312
Medical	.1196**	.1170**	-.0236	.2196**	.0547	1.0000	.2682**
Psych.	.3901**	.3864**	-.0105	.4344**	-.0312	.2682**	1.0000

* - Signif. LE .05 ** - Signif. LE .01 (2-tailed)

The correlations between the composite problem scores for the Follow-up respondents in the table below show a similar pattern to Intake correlations. Alcohol and drug problem scores are significantly correlated indicating that the respondents who were having trouble with alcohol were often also having trouble with drugs. The composite problem scores which were significantly correlated with alcohol and drug problems were from the psychiatric, family, legal, and medical sections of the Addiction Severity Index. The highest correlation appears to be the psychiatric composite score with the drug problems score which indicates a continuing problem in these areas of functioning. The large number of statistically significant correlations between the ASI problem scores reflects a need for comprehensive ongoing substance abuse treatment services which include attention and assistance in the family, legal, medical, and psychiatric domains.

- - Modified Composite Problem Score Correlation Coefficients - -
Follow-up ASI Interview Data

	Alcohol	Drug	Employment	Family	Legal	Medical	Psychiatric
Alcohol	1.0000	.2087**	.0731	.1065*	.1795**	.1648**	.2246**
Drug	.2087**	1.0000	-.0282	.3207**	.2468**	.1691**	.4166**
Employment	.0731	-.0282	1.0000	.0054	.1609**	-.0012	.0068
Family	.1065*	.3207**	.0054	1.0000	.2023**	.1183**	.3532**
Legal	.1795**	.2468**	.1609**	.2023**	1.0000	.1499**	.2785**
Medical	.1648**	.1691**	-.0012	.1183**	.1499**	1.0000	.3013**
Psych.	.2246**	.4166**	.0068	.3532**	.2785**	.3013**	1.0000

* - Signif. LE .05 ** - Signif. LE .01 (2-tailed)

Modified ASI Composite Score Program Outcome Comparisons

Modified ASI composite scores are outcome measures which reflect the clients' functioning in each ASI area as reported by the clients during the follow-up interviews. These scores are only as reflective of the program outcomes or effectiveness as the sample of those who were interviewed is representative of all the clients who were treated in the mid-1997 to mid-1998 time period. The use of random sampling helps to assure a representative sample, but the difficulty of contacting, finding, and interviewing every randomly selected client casts doubt on the representativeness of the Follow-up sample. This concern is further heightened by prior studies which found that those who were successfully interviewed for the Follow-up sample had fewer problems at their Intake interviews than those who were not interviewed. Another concern in conducting program comparisons is attaining a large enough sample to suggest that the data from those interviewed is representative of those treated by the program in the targeted time period. For the purpose of this analysis only those programs for whom a sample of at least twenty (20) clients will be identified as showing either better or worse treatment outcomes.

Better program outcomes are defined as those programs whose clients' follow-up interviews yielded lower average modified composite problem scores than the mean of all clients in all programs. Worse program outcomes are defined as those programs whose clients' follow-up interviews yielded higher average modified composite problem scores than the mean of all clients in all programs. These outcomes are not adjusted for the client's intake (admission) problem levels so these are not measures of change and they are not adjusted for differences in the client mix from program to program or the external environment of the program.

Medical Status Composite Problem Scores - respondents from program 197 had significantly lower modified composite problem scores.

Employment / Support Status Composite Problem Scores - respondents from programs 6 and 78 had significantly higher modified composite problem scores.

Family Relationships Composite Problem Scores- respondents from program 22 had significantly lower modified composite problem scores.

Alcohol and Other Drug Abstinence rates - respondents from program 73 had a significantly lower alcohol and other drug abstinence rate

Perceived program effectiveness scale, computed from the evaluation items - respondents from program 93 had a significantly lower perceived effectiveness score.

Medical Status Modified Composite Score *

By PROGRAM
Analysis of Variance

Source	D.F.	Sum of Squares	Mean Squares	F Ratio	F Prob.
Between Groups	41	4.4134	.1076	1.5898	.0135
Within Groups	480	32.5004	.0677		
Total	521	36.9138			

Group	Count	Mean	Standard Deviation	Standard Error	95 Pct Conf Int	for Mean
Grp 5	5	.0378	.0845	.0378	-.0671	TO .1427
Grp 6	42	.1803	.2813	.0434	.0926	TO .2679
Grp 7	19	.2047	.3019	.0693	.0592	TO .3502
Grp 13	3	.1370	.2374	.1370	-.4526	TO .7267
Grp 15	15	.0448	.1007	.0260	-.0109	TO .1006
Grp 19	7	.1389	.1802	.0681	-.0278	TO .3056
Grp 20	2	.1944	.2750	.1944	-2.2762	TO 2.6651
Grp 22	23	.2379	.3183	.0664	.1003	TO .3756
Grp 23	16	.1017	.1783	.0446	.0067	TO .1967
Grp 25	2	.0000	.0000	.0000	.0000	TO .0000
Grp 29	9	.1846	.2565	.0855	-.0126	TO .3818
Grp 30	3	.3852	.5381	.3107	-.9515	TO 1.7219
Grp 50	7	.1984	.3512	.1327	-.1263	TO .5232
Grp 55	28	.2742	.3093	.0585	.1543	TO .3941
Grp 58	6	.0315	.0771	.0315	-.0494	TO .1124
Grp 59	10	.1500	.1846	.0584	.0179	TO .2821
Grp 66	10	.0128	.0367	.0116	-.0135	TO .0390
Grp 68	17	.0402	.1225	.0297	-.0228	TO .1032
Grp 70	6	.1185	.1325	.0541	-.0206	TO .2576
Grp 73	31	.2332	.3307	.0594	.1119	TO .3544
Grp 74	50	.1753	.2392	.0338	.1074	TO .2433
Grp 78	39	.2013	.3173	.0508	.0984	TO .3041
Grp 86	14	.1456	.2065	.0552	.0264	TO .2648
Grp 93	22	.2487	.3291	.0702	.1028	TO .3947
Grp 97	14	.0417	.1094	.0292	-.0215	TO .1048
Grp102	1	.0000				
Grp109	3	.0000	.0000	.0000	.0000	TO .0000
Grp110	38	.2001	.2681	.0435	.1120	TO .2883
Grp111	13	.1624	.2932	.0813	-.0148	TO .3396
Grp134	3	.0815	.1411	.0815	-.2691	TO .4321
Grp135	3	.0463	.0619	.0358	-.1076	TO .2002
Grp149	5	.0000	.0000	.0000	.0000	TO .0000
Grp197	22	.0755	.1887	.0402	-.0082	TO .1592
Grp237	4	.2889	.3336	.1668	-.2419	TO .8197
Grp279	12	.2028	.2937	.0848	.0162	TO .3894
Grp281	2	.0000	.0000	.0000	.0000	TO .0000
Grp320	2	.0000	.0000	.0000	.0000	TO .0000
Grp327	5	.6400	.1630	.0729	.4376	TO .8424
Grp350	1	.0000				
Grp354	1	.2833				
Grp384	2	.5222	.2043	.1444	-1.3131	TO 2.3576
Grp412	5	.2267	.3320	.1485	-.1856	TO .6389
Total	522	.1710	.2662	.0117	.1481	TO .1938

*The Modified Composite Score is based on the ASI problem composite score formula with inferences for the trouble and treatment items when these items were not if no problem or trouble was reported. A lower score indicates fewer problems and a higher score represents more problems on the 0 to 1 scale. The means with a "-" or a "+" appear to be below or above the mean for all programs for programs with at least 20 respondents. These outcome scores are not adjusted for intake scores or client differences.

Employment/Support Status Modified Composite Score *
BY PROGRAM

		Analysis of Variance			
Source	D.F.	Sum of Squares	Mean Squares	F Ratio	F Prob.
Between Groups	41	3.3586	.0819	1.3568	.0772
Within Groups	369	22.2793	.0604		
Total	410	25.6379			

Group	Count	Mean	Standard Deviation	Standard Error	95 Pct Conf Int	for Mean
Grp 5	5	.6590	.2750	.1230	.3176 TO	1.0004
Grp 6	37	.6848 +	.2487	.0409	.6018 TO	.7677
Grp 7	15	.5330	.2591	.0669	.3895 TO	.6765
Grp 13	2	.6102	.3486	.2465	-2.5219 TO	3.7423
Grp 15	13	.5657	.2418	.0671	.4196 TO	.7118
Grp 19	7	.4655	.1891	.0715	.2906 TO	.6403
Grp 20	2	.3758	.0328	.0232	.0813 TO	.6703
Grp 22	16	.4664	.2284	.0571	.3447 TO	.5882
Grp 23	13	.5897	.2730	.0757	.4247 TO	.7546
Grp 25	2	.6102	.3665	.2592	-2.6829 TO	3.9032
Grp 29	9	.6114	.2559	.0853	.4147 TO	.8081
Grp 30	1	.2427				
Grp 50	5	.5388	.3375	.1509	.1198 TO	.9578
Grp 55	22	.5650	.2619	.0558	.4488 TO	.6811
Grp 58	4	.4501	.2707	.1353	.0193 TO	.8808
Grp 59	10	.5047	.2606	.0824	.3183 TO	.6912
Grp 66	8	.5283	.2477	.0876	.3212 TO	.7353
Grp 68	14	.4893	.2032	.0543	.3720 TO	.6066
Grp 70	6	.5392	.2140	.0874	.3146 TO	.7637
Grp 73	20	.6193	.2694	.0602	.4932 TO	.7454
Grp 74	45	.5442	.2376	.0354	.4728 TO	.6156
Grp 78	31	.6817 +	.2467	.0443	.5912 TO	.7722
Grp 86	10	.5239	.2610	.0825	.3372 TO	.7106
Grp 93	18	.4436	.1737	.0409	.3573 TO	.5300
Grp 97	12	.5911	.2269	.0655	.4470 TO	.7353
Grp102	1	.8518				
Grp109	2	.8005	.0778	.0550	.1019 TO	1.4991
Grp110	28	.6230	.2647	.0500	.5203 TO	.7256
Grp111	7	.6591	.3237	.1223	.3598 TO	.9584
Grp134	2	.2325	.1756	.1242	-1.3456 TO	1.8105
Grp135	1	.8542				
Grp149	5	.6633	.2051	.0917	.4086 TO	.9180
Grp197	16	.5850	.2504	.0626	.4516 TO	.7184
Grp237	2	.6336	.3666	.2592	-2.6599 TO	3.9271
Grp279	8	.4086	.0721	.0255	.3484 TO	.4689
Grp281	1	.3567				
Grp320	1	.3518				
Grp327	3	.3210	.0654	.0378	.1584 TO	.4835
Grp350	1	.8720				
Grp354	1	.3545				
Grp384	1	.3540				
Grp412	4	.5960	.3090	.1545	.1044 TO	1.0876
Total	411	.5708	.2501	.0123	.5465 TO	.5950

*The Modified Composite Score is based on the ASI problem composite score formula with inferences for the trouble and treatment items when these items were not if no problem or trouble was reported. A lower score indicates fewer problems and a higher score represents more problems on the 0 to 1 scale. The means with a - or a + appear to be below or above the mean for all programs for programs with at least 20 respondents. These outcome scores are not adjusted for intake scores or client differences.

Alcohol Use Modified Composite Score *
By PROGRAM

Analysis of Variance

Source	D.F.	Sum of Squares	Mean Squares	F Ratio	F Prob.
Between Groups	41	.7361	.0180	.9688	.5287
Within Groups	462	8.5618	.0185		
Total	503	9.2979			

Group	Count	Mean	Standard Deviation	Standard Error	95 Pct Conf. Int	for Mean
Grp 5	5	.0514	.0551	.0247	-.0170 TO	.1199
Grp 6	42	.0891	.1421	.0219	.0448 TO	.1334
Grp 7	19	.0780	.1416	.0325	.0098 TO	.1463
Grp 13	3	.0786	.1362	.0786	-.2596 TO	.4169
Grp 15	15	.0161	.0238	.0061	.0030 TO	.0293
Grp 19	7	.0194	.0467	.0177	-.0238 TO	.0627
Grp 20	2	.0353	.0008	.0005	.0284 TO	.0423
Grp 22	22	.1114	.1818	.0388	.0308 TO	.1920
Grp 23	16	.0740	.1561	.0390	-.0092 TO	.1572
Grp 25	2	.0417	.0589	.0417	-.4878 TO	.5711
Grp 29	9	.0766	.0898	.0299	.0076 TO	.1456
Grp 30	3	.1811	.2841	.1640	-.5247 TO	.8869
Grp 50	7	.1152	.1796	.0679	-.0509 TO	.2813
Grp 55	28	.1065	.1677	.0317	.0415 TO	.1715
Grp 58	6	.0711	.0709	.0290	-.0034 TO	.1455
Grp 59	11	.2084	.2913	.0878	.0126 TO	.4041
Grp 66	9	.0313	.0659	.0220	-.0193 TO	.0819
Grp 68	16	.0993	.1555	.0389	.0164 TO	.1822
Grp 70	6	.0617	.0941	.0384	-.0370 TO	.1604
Grp 73	29	.1088	.1378	.0256	.0564 TO	.1613
Grp 74	49	.0760	.1268	.0181	.0396 TO	.1124
Grp 78	37	.0716	.1430	.0235	.0239 TO	.1193
Grp 86	14	.0806	.1164	.0311	.0134 TO	.1478
Grp 93	21	.1359	.1708	.0373	.0581 TO	.2136
Grp 97	14	.0644	.0812	.0217	.0175 TO	.1113
Grp102	1	.0000				
Grp109	3	.0315	.0278	.0161	-.0376 TO	.1006
Grp110	32	.0586	.0898	.0159	.0262 TO	.0909
Grp111	12	.0296	.0478	.0138	-.0008 TO	.0599
Grp134	3	.0139	.0241	.0139	-.0459 TO	.0736
Grp135	3	.0019	.0032	.0019	-.0061 TO	.0098
Grp149	5	.1038	.0974	.0436	-.0172 TO	.2248
Grp197	22	.0613	.0863	.0184	.0230 TO	.0996
Grp237	4	.1542	.1821	.0911	-.1357 TO	.4440
Grp279	12	.0829	.1357	.0392	-.0034 TO	.1691
Grp281	2	.1268	.1229	.0869	-.9772 TO	1.2308
Grp320	2	.0208	.0295	.0208	-.2439 TO	.2855
Grp327	3	.0185	.0321	.0185	-.0612 TO	.0982
Grp350	1	.0000				
Grp354	1	.0000				
Grp384	2	.2661	.2585	.1828	-2.0565 TO	2.5888
Grp412	4	.0104	.0208	.0104	-.0227 TO	.0436
Total	504	.0814	.1360	.0061	.0695 TO	.0933

*The Modified Composite Score is based on the ASI problem composite score formula with inferences for the trouble and treatment items when these items were not if no problem or trouble was reported. A lower score indicates fewer problems and a higher score represents more problems on the 0 to 1 scale. The means with a - or a + appear to be below or above the mean for all programs for programs with at least 20 respondents. These outcome scores are not adjusted for intake scores or client differences.

Drug Use Modified Composite Score *
 BY PROGRAM
 Analysis of Variance

Source	D.F.	Sum of Squares	Mean Squares	F Ratio	F Prob.
Between Groups	41	.1700	.0041	1.1733	.2199
Within Groups	469	1.6574	.0035		
Total	510	1.8274			

Group	Count	Mean	Standard Deviation	Standard Error	95 Pct Conf Int	for Mean
Grp 5	5	.0000	.0000	.0000	.0000	TO .0000
Grp 6	42	.0253	.0398	.0061	.0129	TO .0377
Grp 7	19	.0122	.0260	.0060	-.0003	TO .0248
Grp 13	3	.0000	.0000	.0000	.0000	TO .0000
Grp 15	15	.0000	.0000	.0000	.0000	TO .0000
Grp 19	7	.0170	.0233	.0088	-.0045	TO .0385
Grp 20	2	.0385	.0544	.0385	-.4502	TO .5272
Grp 22	22	.0245	.0467	.0100	.0038	TO .0453
Grp 23	16	.0417	.0711	.0178	.0038	TO .0796
Grp 25	2	.0000	.0000	.0000	.0000	TO .0000
Grp 29	9	.0560	.1026	.0342	-.0229	TO .1349
Grp 30	3	.0910	.1012	.0584	-.1604	TO .3424
Grp 50	7	.0234	.0334	.0126	-.0075	TO .0544
Grp 55	28	.0158	.0328	.0062	.0031	TO .0286
Grp 58	6	.0045	.0110	.0045	-.0070	TO .0160
Grp 59	11	.0159	.0281	.0085	-.0030	TO .0347
Grp 66	10	.0046	.0099	.0031	-.0025	TO .0117
Grp 68	16	.0635	.0961	.0240	.0123	TO .1147
Grp 70	6	.0282	.0418	.0170	-.0156	TO .0720
Grp 73	30	.0303	.0538	.0098	.0102	TO .0503
Grp 74	49	.0256	.0641	.0092	.0072	TO .0440
Grp 78	38	.0338	.0726	.0118	.0100	TO .0577
Grp 86	14	.0156	.0568	.0152	-.0172	TO .0484
Grp 93	22	.0639	.0977	.0208	.0206	TO .1073
Grp 97	14	.0228	.0358	.0096	.0021	TO .0435
Grp102	1	.0000				
Grp109	3	.0000	.0000	.0000	.0000	TO .0000
Grp110	34	.0429	.0825	.0141	.0142	TO .0717
Grp111	13	.0000	.0000	.0000	.0000	TO .0000
Grp134	3	.0581	.0061	.0035	.0431	TO .0732
Grp135	3	.0346	.0600	.0346	-.1143	TO .1836
Grp149	5	.0000	.0000	.0000	.0000	TO .0000
Grp197	22	.0189	.0381	.0081	.0020	TO .0358
Grp237	4	.0199	.0381	.0190	-.0407	TO .0804
Grp279	12	.0667	.1163	.0336	-.0072	TO .1406
Grp281	2	.0096	.0136	.0096	-.1126	TO .1318
Grp320	2	.0385	.0544	.0385	-.4502	TO .5272
Grp327	3	.0214	.0196	.0113	-.0273	TO .0700
Grp350	1	.0000				
Grp354	1	.0000				
Grp384	2	.0038	.0054	.0038	-.0450	TO .0527
Grp412	4	.0000	.0000	.0000	.0000	TO .0000
Total	511	.0276	.0599	.0026	.0224	TO .0328

*The Modified Composite Score is based on the ASI problem composite score formula with inferences for the trouble and treatment items when these items were not if no problem or trouble was reported. A lower score indicates fewer problems and a higher score represents more problems on the 0 to 1 scale. The means with a "-" or a "+" appear to be below or above the mean for all programs for programs with at least 20 respondents. These outcome scores are not adjusted for intake scores or client differences.

Legal Status Modified Composite Score *

By PROGRAM
Analysis of Variance

Source	D.F.	Sum of Squares	Mean Squares	F Ratio	F Prob.
Between Groups	41	.8287	.0202	.7622	.8573
Within Groups	462	12.2525	.0265		
Total	503	13.0812			

Group	Count	Mean	Standard Deviation	Standard Error	95 Pct Conf Int	for Mean
Grp 5	5	.0900	.1245	.0557	-.0646 TO	.2446
Grp 6	42	.0964	.1676	.0259	.0442 TO	.1487
Grp 7	19	.0350	.1003	.0230	-.0133 TO	.0833
Grp 13	3	.0167	.0289	.0167	-.0550 TO	.0884
Grp 15	15	.0000	.0000	.0000	.0000 TO	.0000
Grp 19	7	.0571	.0732	.0277	-.0105 TO	.1248
Grp 20	2	.0000	.0000	.0000	.0000 TO	.0000
Grp 22	21	.1143	.2013	.0439	.0226 TO	.2059
Grp 23	16	.0905	.1744	.0436	-.0025 TO	.1834
Grp 25	2	.1750	.2475	.1750	-2.0486 TO	2.3986
Grp 29	9	.0833	.1541	.0514	-.0351 TO	.2018
Grp 30	3	.0000	.0000	.0000	.0000 TO	.0000
Grp 50	7	.1071	.2244	.0848	-.1004 TO	.3147
Grp 55	28	.1482	.1932	.0365	.0733 TO	.2231
Grp 58	6	.0500	.1225	.0500	-.0785 TO	.1785
Grp 59	11	.0636	.1142	.0344	-.0131 TO	.1404
Grp 66	10	.1500	.1886	.0596	.0151 TO	.2849
Grp 68	16	.0906	.1685	.0421	.0008 TO	.1804
Grp 70	6	.2083	.2538	.1036	-.0580 TO	.4747
Grp 73	30	.0636	.1116	.0204	.0219 TO	.1052
Grp 74	49	.0630	.1350	.0193	.0242 TO	.1018
Grp 78	37	.0973	.1852	.0304	.0355 TO	.1590
Grp 86	14	.0929	.1685	.0450	-.0045 TO	.1902
Grp 93	21	.1402	.1894	.0413	.0539 TO	.2264
Grp 97	14	.1214	.1397	.0373	.0408 TO	.2021
Grp102	1	.0500				
Grp109	3	.0167	.0289	.0167	-.0550 TO	.0884
Grp110	32	.1154	.1998	.0353	.0434 TO	.1875
Grp111	13	.0731	.1481	.0411	-.0164 TO	.1626
Grp134	3	.0000	.0000	.0000	.0000 TO	.0000
Grp135	3	.2000	.3464	.2000	-.6605 TO	1.0605
Grp149	5	.1400	.1673	.0748	-.0678 TO	.3478
Grp197	21	.0994	.1599	.0349	.0266 TO	.1722
Grp237	4	.0875	.1750	.0875	-.1910 TO	.3660
Grp279	12	.0820	.1492	.0431	-.0128 TO	.1767
Grp281	2	.0000	.0000	.0000	.0000 TO	.0000
Grp320	2	.0000	.0000	.0000	.0000 TO	.0000
Grp327	3	.0833	.1041	.0601	-.1752 TO	.3419
Grp350	1	.2500				
Grp354	1	.0000				
Grp384	1	.0000				
Grp412	4	.1250	.2500	.1250	-.2728 TO	.5228
Total	504	.0906	.1613	.0072	.0765 TO	.1047

*The Modified Composite Score is based on the ASI problem composite score formula with inferences for the trouble and treatment items when these items were not if no problem or trouble was reported. A lower score indicates fewer problems and a higher score represents more problems on the 0 to 1 scale. The means with a "-" or a "+" appear to be below or above the mean for all programs for programs with at least 20 respondents. These outcome scores are not adjusted for intake scores or client differences.

Family Relationships Modified Composite Score *

By PROGRAM

Analysis of Variance

Source	D.F.	Sum of Squares	Mean Squares	F Ratio	F Prob.
Between Groups	41	.9055	.0221	1.0910	.3276
Within Groups	464	9.3927	.0202		
Total	505	10.2982			

Group	Count	Mean	Standard Deviation	Standard Error	95 Pct Conf Int	for Mean
Grp 5	5	.2324	.1317	.0589	.0689 TO	.3960
Grp 6	42	.2415	.1811	.0279	.1850 TO	.2979
Grp 7	19	.1969	.1209	.0277	.1386 TO	.2551
Grp 13	3	.2083	.0144	.0083	.1725 TO	.2442
Grp 15	15	.1786	.0693	.0179	.1402 TO	.2170
Grp 19	7	.1571	.0787	.0297	.0844 TO	.2299
Grp 20	2	.2000	.0000	.0000	.2000 TO	.2000
Grp 22	22	.1888	.1055	.0225	.1420 TO	.2355
Grp 23	16	.2277	.1320	.0330	.1574 TO	.2981
Grp 25	2	.2000	.0000	.0000	.2000 TO	.2000
Grp 29	9	.2438	.1051	.0350	.1630 TO	.3246
Grp 30	3	.2967	.1170	.0675	.0061 TO	.5872
Grp 50	7	.3521	.2239	.0846	.1450 TO	.5591
Grp 55	28	.2351	.1470	.0278	.1781 TO	.2921
Grp 58	6	.1537	.0758	.0310	.0741 TO	.2333
Grp 59	11	.2270	.1043	.0315	.1569 TO	.2971
Grp 66	10	.2338	.1068	.0338	.1574 TO	.3102
Grp 68	16	.2944	.2061	.0515	.1846 TO	.4042
Grp 70	6	.3237	.1855	.0757	.1290 TO	.5183
Grp 73	29	.2346	.1521	.0282	.1767 TO	.2925
Grp 74	49	.2480	.1335	.0191	.2097 TO	.2864
Grp 78	38	.2840	.1543	.0250	.2333 TO	.3347
Grp 86	14	.2381	.0692	.0185	.1981 TO	.2780
Grp 93	22	.2853	.2149	.0458	.1901 TO	.3806
Grp 97	13	.2147	.1155	.0320	.1449 TO	.2845
Grp102	1	.2222				
Grp109	3	.2119	.0205	.0119	.1609 TO	.2628
Grp110	32	.2269	.1339	.0237	.1786 TO	.2752
Grp111	13	.2050	.0728	.0202	.1610 TO	.2489
Grp134	3	.3123	.1238	.0715	.0048 TO	.6198
Grp135	3	.2802	.1388	.0802	-.0647 TO	.6251
Grp149	5	.1800	.0447	.0200	.1245 TO	.2355
Grp197	21	.2421	.1618	.0353	.1684 TO	.3157
Grp237	4	.4111	.1876	.0938	.1127 TO	.7096
Grp279	12	.2252	.0897	.0259	.1682 TO	.2822
Grp281	2	.1000	.1414	.1000	-1.1706 TO	1.3706
Grp320	2	.2269	.0380	.0269	-.1150 TO	.5688
Grp327	3	.2856	.1482	.0856	-.0826 TO	.6537
Grp350	1	.4583				
Grp354	1	.1000				
Grp384	2	.2000	.0000	.0000	.2000 TO	.2000
Grp412	4	.1500	.0577	.0289	.0581 TO	.2419
Total	506	.2385	.1428	.0063	.2261 TO	.2510

*The Modified Composite Score is based on the ASI problem composite score formula with inferences for the trouble and treatment items when these items were not if no problem or trouble was reported. A lower score indicates fewer problems and a higher score represents more problems on the 0 to 1 scale. These outcome scores are not adjusted for intake scores or client differences.

Psychiatric Status Modified Composite Score *

By PROGRAM

Analysis of Variance

Source	D.F.	Sum of Squares	Mean Squares	F Ratio	F Prob.
Between Groups	41	2.0769	.0507	1.2108	.1800
Within Groups	463	19.3698	.0418		
Total	504	21.4468			

Group	Count	Mean	Standard Deviation	Standard Error	95 Pct Conf Int	for Mean
Grp 5	5	.0906	.1280	.0573	-.0684	TO .2496
Grp 6	42	.1536	.1883	.0291	.0950	TO .2123
Grp 7	19	.1515	.2190	.0503	.0459	TO .2571
Grp 13	3	.0000	.0000	.0000	.0000	TO .0000
Grp 15	15	.0422	.0676	.0174	.0048	TO .0796
Grp 19	7	.0292	.0773	.0292	-.0423	TO .1007
Grp 20	2	.2045	.2893	.2045	-2.3945	TO 2.8035
Grp 22	22	.1117	.1569	.0334	.0422	TO .1813
Grp 23	15	.2163	.2546	.0658	.0752	TO .3573
Grp 25	2	.0000	.0000	.0000	.0000	TO .0000
Grp 29	9	.1096	.2040	.0680	-.0472	TO .2664
Grp 30	3	.2677	.1553	.0897	-.1182	TO .6535
Grp 50	7	.2333	.2229	.0842	.0272	TO .4395
Grp 55	28	.1084	.1891	.0357	.0351	TO .1818
Grp 58	6	.0361	.0885	.0361	-.0567	TO .1289
Grp 59	11	.3056	.2531	.0763	.1356	TO .4757
Grp 66	10	.1083	.1519	.0480	-.0004	TO .2170
Grp 68	16	.2441	.3410	.0853	.0624	TO .4258
Grp 70	6	.1732	.2308	.0942	-.0689	TO .4154
Grp 73	29	.1452	.2185	.0406	.0621	TO .2284
Grp 74	49	.1207	.1970	.0281	.0641	TO .1773
Grp 78	38	.1779	.2567	.0417	.0935	TO .2623
Grp 86	14	.0698	.1509	.0403	-.0173	TO .1569
Grp 93	22	.2025	.2513	.0536	.0911	TO .3140
Grp 97	14	.1122	.1388	.0371	.0321	TO .1924
Grp102	1	.0939				
Grp109	3	.0000	.0000	.0000	.0000	TO .0000
Grp110	32	.1518	.1872	.0331	.0843	TO .2193
Grp111	13	.0749	.1249	.0346	-.0005	TO .1504
Grp134	3	.2369	.2070	.1195	-.2775	TO .7512
Grp135	3	.2444	.1133	.0654	-.0370	TO .5259
Grp149	5	.0000	.0000	.0000	.0000	TO .0000
Grp197	21	.1417	.2034	.0444	.0491	TO .2343
Grp237	4	.3481	.2029	.1014	.0253	TO .6710
Grp279	12	.1979	.2945	.0850	.0108	TO .3850
Grp281	2	.2045	.1607	.1136	-1.2393	TO 1.6484
Grp320	2	.0000	.0000	.0000	.0000	TO .0000
Grp327	2	.0909	.0000	.0000	.0909	TO .0909
Grp350	1	.0000				
Grp354	1	.0000				
Grp384	2	.0682	.0964	.0682	-.7981	TO .9345
Grp412	4	.0000	.0000	.0000	.0000	TO .0000
Total	505	.1416	.2063	.0092	.1236	TO .1597

*The Modified Composite Score is based on the ASI problem composite score formula with inferences for the trouble and treatment items when these items were not if no problem or trouble was reported. A lower score indicates fewer problems and a higher score represents more problems on the 0 to 1 scale. The means with a "-" or a "+" appear to be below or above the mean for all programs for programs with at least 20 respondents. These outcome scores are not adjusted for intake scores or client differences.

Alcohol Abstinence - 30 day

By PROGRAM*
Analysis of Variance

Source	D.F.	Sum of Squares	Mean Squares	F Ratio	F Prob.
Between Groups	41	11.1915	.2730	1.2505	.1436
Within Groups	471	102.8085	.2183		
Total	512	114.0000			

Group	Count	Mean	Standard Deviation	Standard Error	95 Pct Conf Int	for Mean
Grp 5	5	.4000	.5477	.2449	-.2801 TO	1.0801
Grp 6	42	.7857	.4153	.0641	.6563 TO	.9151
Grp 7	19	.6316	.4956	.1137	.3927 TO	.8704
Grp 13	3	.6667	.5774	.3333	-.7676 TO	2.1009
Grp 15	15	.8000	.4140	.1069	.5707 TO	1.0293
Grp 19	7	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp 20	2	.0000	.0000	.0000	.0000 TO	.0000
Grp 22	22	.7273	.4558	.0972	.5252 TO	.9294
Grp 23	16	.6250	.5000	.1250	.3586 TO	.8914
Grp 25	2	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp 29	9	.6667	.5000	.1667	.2823 TO	1.0510
Grp 30	3	.3333	.5774	.3333	-1.1009 TO	1.7676
Grp 50	7	.7143	.4880	.1844	.2630 TO	1.1656
Grp 55	28	.6786	.4756	.0899	.4942 TO	.8630
Grp 58	6	.6667	.5164	.2108	.1247 TO	1.2086
Grp 59	11	.5455	.5222	.1575	.1946 TO	.8963
Grp 66	9	.7778	.4410	.1470	.4388 TO	1.1167
Grp 68	16	.5000	.5164	.1291	.2248 TO	.7752
Grp 70	6	.6667	.5164	.2108	.1247 TO	1.2086
Grp 73	30	.5000	.5085	.0928	.3101 TO	.6899
Grp 74	50	.5600	.5014	.0709	.4175 TO	.7025
Grp 78	38	.6053	.4954	.0804	.4424 TO	.7681
Grp 86	14	.7143	.4688	.1253	.4436 TO	.9850
Grp 93	21	.6190	.4976	.1086	.3925 TO	.8456
Grp 97	14	.8571	.3631	.0971	.6475 TO	1.0668
Grp102	1	1.0000				
Grp109	3	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp110	35	.6000	.4971	.0840	.4293 TO	.7707
Grp111	13	.5385	.5189	.1439	.2249 TO	.8520
Grp134	3	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp135	3	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp149	5	.6000	.5477	.2449	-.0801 TO	1.2801
Grp197	22	.7273	.4558	.0972	.5252 TO	.9294
Grp237	4	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp279	12	.9167	.2887	.0833	.7333 TO	1.1001
Grp281	2	.0000	.0000	.0000	.0000 TO	.0000
Grp320	2	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp327	4	.7500	.5000	.2500	-.0456 TO	1.5456
Grp350	1	1.0000				
Grp354	1	1.0000				
Grp384	2	.5000	.7071	.5000	-5.8531 TO	6.8531
Grp412	5	1.0000	.0000	.0000	1.0000 TO	1.0000
Total	513	.6667	.4719	.0208	.6257 TO	.7076

*The Abstinence Score is based on the self-reports of zero days of use in the prior 30 days. A higher proportion score indicates more respondents were abstinent and a lower mean proportion indicates that more respondents reported using. The means with a "-" or a "+" appear to be below or above the mean for all programs for programs with at least 20 respondents. These outcome scores are not adjusted for intake scores or client differences.

Abstinence from Drugs other than Alcohol - 30 day
by PROGRAM*

Analysis of Variance

Source	D.F.	Sum of Squares	Mean Squares	F Ratio	F Prob.
Between Groups	41	7.3794	.1800	1.1709	.2225
Within Groups	472	72.5525	.1537		
Total	513	79.9319			

Group	Count	Mean	Standard Deviation	Standard Error	95 Pct Conf Int	for Mean
Grp 5	5	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp 6	42	.7857	.4153	.0641	.6563 TO	.9151
Grp 7	19	.8421	.3746	.0859	.6615 TO	1.0227
Grp 13	3	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp 15	15	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp 19	7	.7143	.4880	.1844	.2630 TO	1.1656
Grp 20	2	.5000	.7071	.5000	-5.8531 TO	6.8531
Grp 22	22	.7727	.4289	.0914	.5825 TO	.9629
Grp 23	16	.7500	.4472	.1118	.5117 TO	.9883
Grp 25	2	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp 29	9	.8889	.3333	.1111	.6327 TO	1.1451
Grp 30	3	.3333	.5774	.3333	-1.1009 TO	1.7676
Grp 50	7	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp 55	28	.8929	.3150	.0595	.7707 TO	1.0150
Grp 58	6	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp 59	11	.7273	.4671	.1408	.4135 TO	1.0411
Grp 66	10	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp 68	16	.6875	.4787	.1197	.4324 TO	.9426
Grp 70	6	.6667	.5164	.2108	.1247 TO	1.2086
Grp 73	30	.7000	.4661	.0851	.5260 TO	.8740
Grp 74	50	.7400	.4431	.0627	.6141 TO	.8659
Grp 78	38	.7105	.4596	.0746	.5595 TO	.8616
Grp 86	14	.9286	.2673	.0714	.7743 TO	1.0829
Grp 93	22	.6364	.4924	.1050	.4181 TO	.8547
Grp 97	14	.9286	.2673	.0714	.7743 TO	1.0829
Grp102	1	1.0000				
Grp109	3	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp110	34	.7647	.4306	.0738	.6145 TO	.9149
Grp111	13	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp134	3	.6667	.5774	.3333	-.7676 TO	2.1009
Grp135	3	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp149	5	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp197	22	.8636	.3513	.0749	.7079 TO	1.0194
Grp237	4	.7500	.5000	.2500	-.0456 TO	1.5456
Grp279	12	.9167	.2887	.0833	.7333 TO	1.1001
Grp281	2	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp320	2	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp327	4	.7500	.5000	.2500	-.0456 TO	1.5456
Grp350	1	1.0000				
Grp354	1	1.0000				
Grp384	2	.5000	.7071	.5000	-5.8531 TO	6.8531
Grp412	5	1.0000	.0000	.0000	1.0000 TO	1.0000
Total	514	.8074	.3947	.0174	.7732 TO	.8416

*The Abstinence Score is based on the self-reports of zero days of use in the prior 30 days. A higher proportion score indicates more respondents were abstinent and a lower mean proportion indicates that more respondents reported using. The means with a "-" or a "+" appear to be below or above the mean for all programs for programs with at least 20 respondents. These outcome scores are not adjusted for intake scores or client differences.

Alcohol and Other Drug Abstinence - 30 day

By PROGRAM *

Analysis of Variance

Source	D.F.	Sum of Squares	Mean Squares	F Ratio	F Prob.
Between Groups	41	13.0426	.3181	1.3499	.0776
Within Groups	471	110.9925	.2357		
Total	512	124.0351			

Group	Count	Mean	Standard Deviation	Standard Error	95 Pct Conf Int	for Mean
Grp 5	5	.4000	.5477	.2449	-.2801 TO	1.0801
Grp 6	42	.7143	.4572	.0706	.5718 TO	.8568
Grp 7	19	.5263	.5130	.1177	.2791 TO	.7736
Grp 13	3	.6667	.5774	.3333	-.7676 TO	2.1009
Grp 15	15	.8000	.4140	.1069	.5707 TO	1.0293
Grp 19	7	.7143	.4880	.1844	.2630 TO	1.1656
Grp 20	2	.0000	.0000	.0000	.0000 TO	.0000
Grp 22	22	.6364	.4924	.1050	.4181 TO	.8547
Grp 23	16	.5000	.5164	.1291	.2248 TO	.7752
Grp 25	2	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp 29	9	.5556	.5270	.1757	.1504 TO	.9607
Grp 30	3	.3333	.5774	.3333	-1.1009 TO	1.7676
Grp 50	7	.7143	.4880	.1844	.2630 TO	1.1656
Grp 55	28	.6429	.4880	.0922	.4536 TO	.8321
Grp 58	6	.6667	.5164	.2108	.1247 TO	1.2086
Grp 59	11	.4545	.5222	.1575	.1037 TO	.8054
Grp 66	9	.7778	.4410	.1470	.4388 TO	1.1167
Grp 68	16	.5000	.5164	.1291	.2248 TO	.7752
Grp 70	6	.5000	.5477	.2236	-.0748 TO	1.0748
Grp 73	30	.3333	.4795	.0875	.1543 TO	.5124
Grp 74	50	.5200	.5047	.0714	.3766 TO	.6634
Grp 78	38	.5000	.5067	.0822	.3334 TO	.6666
Grp 86	14	.6429	.4972	.1329	.3558 TO	.9300
Grp 93	21	.4762	.5118	.1117	.2432 TO	.7091
Grp 97	14	.8571	.3631	.0971	.6475 TO	1.0668
Grp102	1	1.0000				
Grp109	3	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp110	35	.4571	.5054	.0854	.2835 TO	.6308
Grp111	13	.5385	.5189	.1439	.2249 TO	.8520
Grp134	3	.6667	.5774	.3333	-.7676 TO	2.1009
Grp135	3	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp149	5	.6000	.5477	.2449	-.0801 TO	1.2801
Grp197	22	.6818	.4767	.1016	.4704 TO	.8932
Grp237	4	.7500	.5000	.2500	-.0456 TO	1.5456
Grp279	12	.8333	.3892	.1124	.5860 TO	1.0807
Grp281	2	.0000	.0000	.0000	.0000 TO	.0000
Grp320	2	1.0000	.0000	.0000	1.0000 TO	1.0000
Grp327	4	.7500	.5000	.2500	-.0456 TO	1.5456
Grp350	1	1.0000				
Grp354	1	1.0000				
Grp384	2	.5000	.7071	.5000	-5.8531 TO	6.8531
Grp412	5	1.0000	.0000	.0000	1.0000 TO	1.0000
Total	513	.5906	.4922	.0217	.5480 TO	.6333

*The Abstinence Score is based on the self-reports of zero days of use in the prior 30 days. A higher proportion score indicates more respondents were abstinent and a lower mean proportion indicates that more respondents reported using. The means with a "-" or a "+" appear to be below or above the mean for all programs for programs with at least 20 respondents. These outcome scores are not adjusted for intake scores or client differences.

Perceived Program Effectiveness (Evaluation Scale)

By PROGRAM*

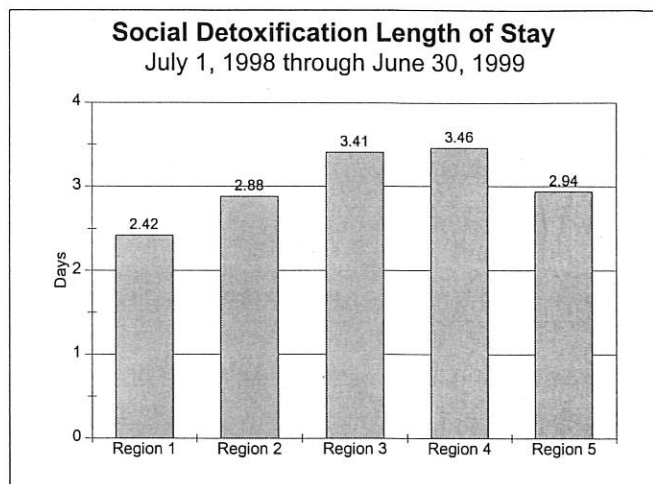
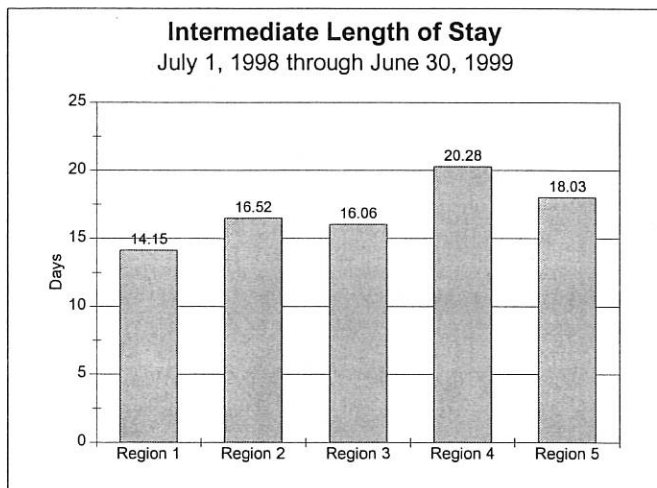
Analysis of Variance

Source	D.F.	Sum of Squares	Mean Squares	F Ratio	F Prob.
Between Groups	41	47.8557	1.1672	1.1849	.2070
Within Groups	462	455.1011	.9851		
Total	503	502.9568			

Group	Count	Mean	Standard Deviation	Standard Error	95 Pct Conf Int	for Mean
Grp 5	5	2.8285	1.3889	.6211	1.1040 TO	4.5531
Grp 6	40	3.1630	.9593	.1517	2.8562 TO	3.4698
Grp 7	19	3.1867	1.1051	.2535	2.6540 TO	3.7193
Grp 13	3	2.9891	1.7386	1.0038	-1.3298 TO	7.3080
Grp 15	15	3.3165	.9918	.2561	2.7672 TO	3.8658
Grp 19	7	3.2701	1.1162	.4219	2.2378 TO	4.3024
Grp 20	2	2.7398	2.0959	1.4820	-16.0912 TO	21.5707
Grp 22	22	2.9438	1.1528	.2458	2.4327 TO	3.4550
Grp 23	16	2.9186	1.0886	.2722	2.3385 TO	3.4986
Grp 25	2	3.2636	.7341	.5191	-3.3321 TO	9.8593
Grp 29	8	3.1557	.8751	.3094	2.4241 TO	3.8874
Grp 30	3	1.9872	1.7089	.9866	-2.2580 TO	6.2324
Grp 50	7	3.5940	.7393	.2794	2.9103 TO	4.2778
Grp 55	28	3.0995	1.0890	.2058	2.6773 TO	3.5218
Grp 58	6	3.7642	.8127	.3318	2.9113 TO	4.6170
Grp 59	11	3.8418	.4622	.1394	3.5312 TO	4.1523
Grp 66	10	3.4553	.5870	.1856	3.0354 TO	3.8752
Grp 68	16	3.1736	1.0061	.2515	2.6375 TO	3.7097
Grp 70	6	2.8081	.9640	.3935	1.7964 TO	3.8197
Grp 73	30	3.0569	1.0170	.1857	2.6772 TO	3.4367
Grp 74	49	3.1096	.9828	.1404	2.8273 TO	3.3919
Grp 78	38	2.9527	1.1056	.1793	2.5893 TO	3.3161
Grp 86	13	3.1810	1.0435	.2894	2.5504 TO	3.8116
Grp 93	21	2.4852 -	1.1767	.2568	1.9496 TO	3.0209
Grp 97	14	3.2548	.7597	.2030	2.8161 TO	3.6934
Grp102	1	3.4826				
Grp109	3	3.5526	.6186	.3571	2.0159 TO	5.0893
Grp110	33	3.4844	.7953	.1384	3.2024 TO	3.7664
Grp111	13	3.3143	.6189	.1717	2.9403 TO	3.6883
Grp134	3	3.6409	.8234	.4754	1.5954 TO	5.6863
Grp135	3	3.2348	1.4880	.8591	-.4618 TO	6.9313
Grp149	5	3.5012	1.0015	.4479	2.2576 TO	4.7447
Grp197	21	3.0451	1.0932	.2386	2.5475 TO	3.5428
Grp237	4	3.5242	.8975	.4488	2.0961 TO	4.9523
Grp279	12	3.7896	.5845	.1687	3.4183 TO	4.1610
Grp281	2	3.7242	.0237	.0167	3.5115 TO	3.9368
Grp320	2	4.2218	.0000	.0000	4.2218 TO	4.2218
Grp327	3	3.9628	.4485	.2590	2.8486 TO	5.0770
Grp350	1	3.9605				
Grp354	1	3.9593				
Grp384	2	3.8360	.5455	.3858	-1.0655 TO	8.7376
Grp412	4	3.3525	.4891	.2445	2.5742 TO	4.1307
Total	504	3.1796	1.0000	.0445	3.0920 TO	3.2671

*The Perceived Program Effectiveness Score is based on the respondents' answers to the four evaluation items. A lower score indicates less perceived program effectiveness and a higher score represents more effectiveness as viewed by the respondents. The means with a "-" or a "+" appear to be below or above the mean for all programs for programs with at least 20 respondents. These outcome scores are not adjusted for intake scores or client differences.

Average Length of Stay By Region July 1, 1998 through June 30, 1999

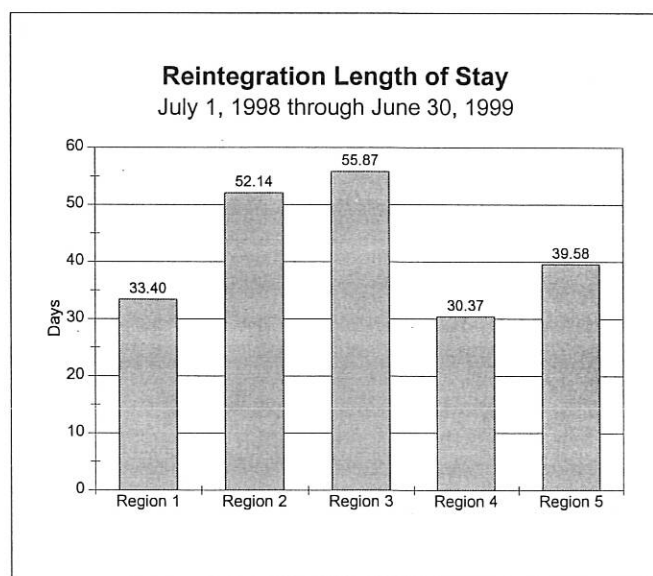
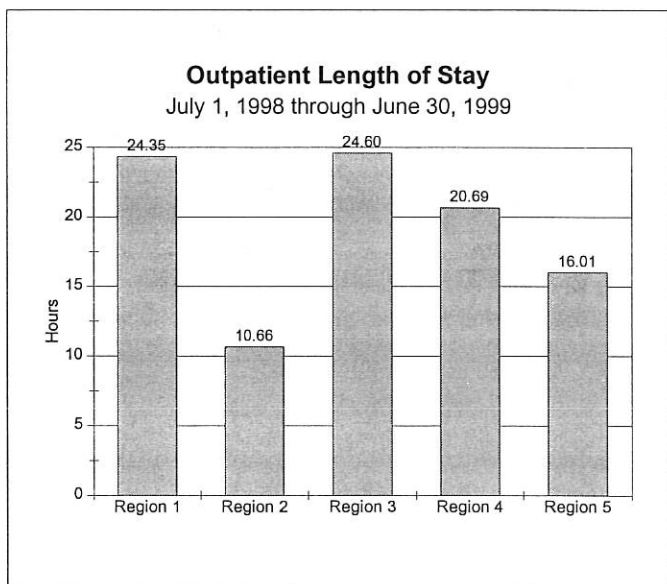


Intermediate

	All Clients	Male	Female
	Days		
Region 1	14.15	13.34	15.28
Region 2	16.52	16.81	15.55
Region 3	16.06	16.42	15.31
Region 4	20.28	20.41	19.85
Region 5	18.03	16.19	20.14

Social Detoxification

	All Clients	Male	Female
	Days		
Region 1	2.42	2.37	2.56
Region 2	2.88	2.98	2.67
Region 3	3.41	3.38	3.50
Region 4	3.46	3.51	3.21
Region 5	2.94	2.93	2.94



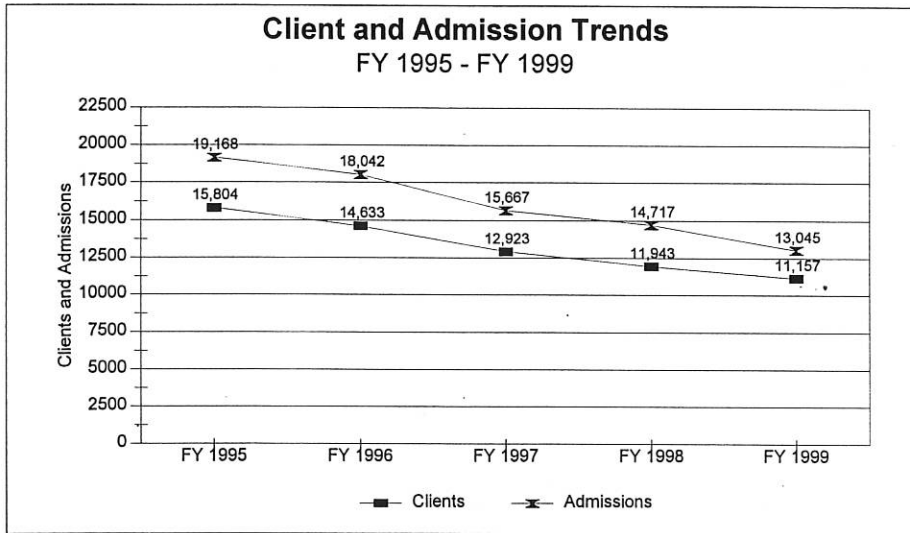
Outpatient

	All Clients	Male	Female
	Hours		
Region 1	24.35	26.34	20.08
Region 2	10.66	11.25	9.27
Region 3	24.60	25.58	21.79
Region 4	20.69	20.35	21.74
Region 5	16.01	14.93	18.38

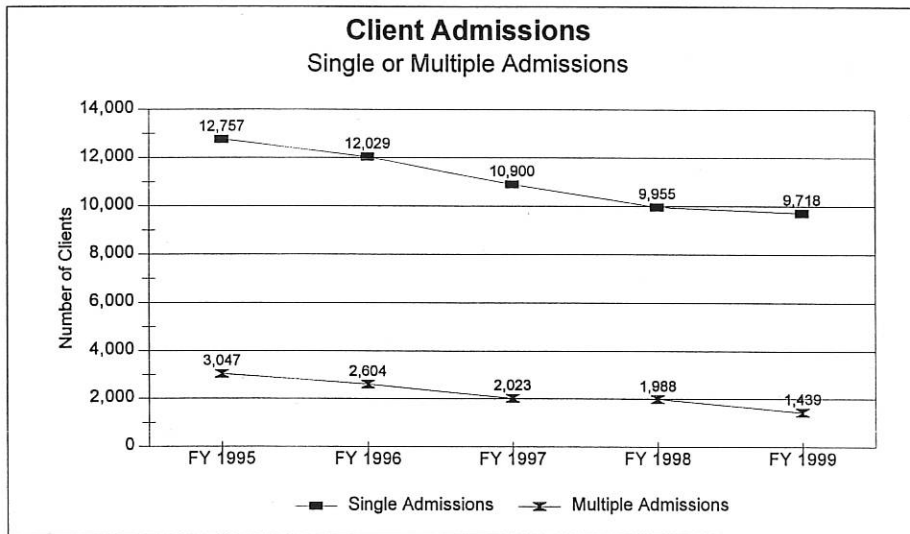
Reintegration

	All Clients	Male	Female
	Days		
Region 1	33.40	34.97	29.65
Region 2	52.14	46.78	69.36
Region 3	55.87	55.11	61.36
Region 4	30.37	28.27	44.72
Region 5	39.58	39.21	44.57

Multiple Admission Trends FY 1995 through FY 1999



	Clients	Admissions
FY 1995	15,804	19,168
FY 1996	14,633	18,042
FY 1997	12,923	15,667
FY 1998	11,943	14,717
FY 1999	11,157	13,045



	Clients with one Admission	Clients with Multiple Admissions
FY 1995	12,757	3,047
FY 1996	12,029	2,604
FY 1997	10,900	2,023
FY 1998	9,955	1,988
FY 1999	9,718	1,439

In FY 1995, 15,804 clients were admitted to alcohol and drug abuse treatment programs. 12,757 clients were admitted to alcohol and drug abuse treatment centers once during FY 1995. 3,042 clients in FY 1995 had multiple admissions to alcohol and drug abuse treatment centers. In FY 1999, 11,157 clients were admitted to alcohol and drug abuse treatment programs. 9,718 clients were admitted to alcohol and drug abuse treatment centers once during FY 1999. 1,439 clients in FY 1999 had multiple admissions to alcohol and drug abuse treatment centers.

Alcohol and Drug Abuse Client Admissions Trends By Resident County FY 2000 State

1-59

Gender

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
Male	726	776	737	749	679	617	0						4,284	69.34%
Female	318	329	326	326	305	290	0						1,894	30.66%
Total	1,044	1,105	1,063	1,075	984	907	0	0	0	0	0	0	6,178	100%

Primary Problem

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
Alcohol	514	552	549	540	492	444	0						3,091	50.03%
Cocaine	193	221	216	195	183	175	0						1,183	19.15%
Marijuana	227	240	214	236	220	208	0						1,345	21.77%
Heroin	8	9	0	9	6	4	0						36	0.58%
Methamphetamine	81	59	66	61	68	62	0						397	6.43%
Other	21	24	18	34	15	14	0						126	2.04%
Total	1,044	1,105	1,063	1,075	984	907	0	0	0	0	0	0	6,178	100%

Age

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
17 and Under	108	143	104	124	121	100	0						700	11.33%
18 - 20	112	100	91	96	74	67	0						540	8.74%
21 - 24	127	107	104	119	92	102	0						651	10.54%
25 - 34	307	288	309	286	295	246	0						1,731	28.02%
35 - 44	285	343	329	320	297	294	0						1,868	30.24%
45 - 54	82	99	102	109	87	76	0						555	8.98%
55 - 64	20	21	22	16	14	18	0						111	1.80%
65+	3	4	2	5	4	4	0						22	0.36%
Total	1,044	1,105	1,063	1,075	984	907	0	0	0	0	0	0	6,178	100%

Race/Ethnicity

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
European	745	756	735	752	655	631	0						4,274	69.18%
African	196	221	175	214	193	156	0						1,155	18.70%
Native	31	26	41	24	31	18	0						171	2.77%
Asian/Pacific	4	8	9	0	4	5	0						30	0.49%
Hispanic	66	81	87	73	88	82	0						477	7.72%
Alaskan	0	1	2	4	1	3	0						11	0.18%
Other	2	12	14	8	12	12	0						60	0.97%
Total	1,044	1,105	1,063	1,075	984	907	0	0	0	0	0	0	6,178	100%

Alcohol and Drug Abuse Client Admissions Trends By Resident County FY 2000 Region 1

1-60

Gender

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
Male	207	272	231	230	193	165							1,298	65.85%
Female	107	126	118	123	105	94							673	34.15%
Total	314	398	349	353	298	259	0	0	0	0	0	0	1,971	100%

Primary Problem

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
Alcohol	170	211	192	182	155	125							1,035	52.51%
Cocaine	59	82	79	69	54	56							399	20.24%
Marijuana	59	85	57	78	70	59							408	20.70%
Heroin	3	3	0	1	3	2							12	0.61%
Methamphetamine	17	12	16	9	10	13							77	3.91%
Other	6	5	5	14	6	4							40	2.03%
Total	314	398	349	353	298	259	0	0	0	0	0	0	1,971	100%

Age

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
17 and Under	28	52	29	51	32	25							217	11.01%
18 - 20	35	35	26	34	15	16							161	8.17%
21 - 24	32	34	33	31	25	31							186	9.44%
25 - 34	103	96	100	83	95	76							553	28.06%
35 - 44	83	143	116	106	95	76							619	31.41%
45 - 54	24	30	32	40	28	25							179	9.08%
55 - 64	8	6	12	6	5	8							45	2.28%
65+	1	2	1	2	3	2							11	0.56%
Total	314	398	349	353	298	259	0	0	0	0	0	0	1,971	100%

Race/Ethnicity

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
European	208	248	237	225	192	174							1,284	65.14%
African	72	89	58	81	64	52							416	21.11%
Native	8	12	15	10	12	7							64	3.25%
Asian/Pacific	2	3	4	0	0	0							9	0.46%
Hispanic	23	38	31	32	29	24							177	8.98%
Alaskan	0	0	1	2	1	1							5	0.25%
Other	1	8	3	3	0	1							16	0.81%
Total	314	398	349	353	298	259	0	0	0	0	0	0	1,971	100%

Alcohol and Drug Abuse Client Admissions Trends By Resident County FY 2000 Region 2

1-61

Gender

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
Male	130	115	107	127	136	105							720	70.94%
Female	49	54	53	47	40	52							295	29.06%
Total	179	169	160	174	176	157	0	0	0	0	0	0	1,015	100%

Primary Problem

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
Alcohol	90	81	88	85	89	77							510	50.25%
Cocaine	10	11	10	10	13	13							67	6.60%
Marijuana	49	47	39	45	49	43							272	26.80%
Heroin	0	1	0	3	0	1							5	0.49%
Methamphetamine	28	23	18	24	18	18							129	12.71%
Other	2	6	5	7	7	5							32	3.15%
Total	179	169	160	174	176	157	0	0	0	0	0	0	1,015	100%

Age

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
17 and Under	19	25	14	16	18	20							112	11.03%
18 - 20	26	21	16	23	22	14							122	12.02%
21 - 24	19	21	23	29	29	19							140	13.79%
25 - 34	52	39	42	53	59	46							291	28.67%
35 - 44	50	45	43	41	36	44							259	25.52%
45 - 54	12	14	20	9	10	10							75	7.39%
55 - 64	1	4	2	3	2	3							15	1.48%
65+	0	0	0	0	0	1							1	0.10%
Total	179	169	160	174	176	157	0	0	0	0	0	0	1,015	100%

Race/Ethnicity

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
European	160	146	131	149	142	135							863	85.02%
African	10	8	10	9	16	6							59	5.81%
Native	5	4	12	5	5	1							32	3.15%
Asian/Pacific	0	2	2	0	1	0							5	0.49%
Hispanic	4	9	4	9	11	15							52	5.12%
Alaskan	0	0	1	2	0	0							3	0.30%
Other	0	0	0	0	1	0							1	0.10%
Total	179	169	160	174	176	157	0	0	0	0	0	0	1,015	100%

Alcohol and Drug Abuse Client Admissions Trends By Resident County FY 2000 Region 3

1-62

Gender

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
Male	105	118	126	132	110	108							699	73.97%
Female	36	38	44	33	46	49							246	26.03%
Total	141	156	170	165	156	157	0	0	0	0	0	0	945	100%

Primary Problem

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
Alcohol	74	97	109	102	93	98							573	60.63%
Cocaine	9	3	12	15	11	7							57	6.03%
Marijuana	45	43	39	35	33	44							239	25.29%
Heroin	1	1	0	0	1	0							3	0.32%
Methamphetamine	12	9	9	10	16	7							63	6.67%
Other	0	3	1	3	2	1							10	1.06%
Total	141	156	170	165	156	157	0	0	0	0	0	0	945	100%

Age

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
17 and Under	26	22	21	19	26	31							145	15.34%
18 - 20	16	18	18	17	12	13							94	9.95%
21 - 24	22	17	20	21	13	16							109	11.53%
25 - 34	28	38	46	46	43	29							230	24.34%
35 - 44	27	44	40	41	41	54							247	26.14%
45 - 54	16	12	19	16	16	10							89	9.42%
55 - 64	4	3	5	3	4	3							22	2.33%
65+	2	2	1	2	1	1							9	0.95%
Total	141	156	170	165	156	157	0	0	0	0	0	0	945	100%

Race/Ethnicity

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
European	112	130	125	133	114	117							731	77.35%
African	9	10	5	6	6	8							44	4.66%
Native	3	0	5	2	3	1							14	1.48%
Asian/Pacific	0	1	2	0	0	0							3	0.32%
Hispanic	16	14	26	21	25	23							125	13.23%
Alaskan	0	1	0	0	0	1							2	0.21%
Other	1	0	7	3	8	7							26	2.75%
Total	141	156	170	165	156	157	0	0	0	0	0	0	945	100%

Alcohol and Drug Abuse Client Admissions Trends By Resident County FY 2000 Region 4

1-63

Gender

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
Male	215	186	200	181	183	168							1,133	71.12%
Female	84	81	71	82	79	63							460	28.88%
Total	299	267	271	263	262	231	0	0	0	0	0	0	1,593	100%

Primary Problem

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
Alcohol	120	101	107	112	105	91							636	39.92%
Cocaine	90	99	85	83	84	80							521	32.71%
Marijuana	59	48	62	54	58	45							326	20.46%
Heroin	3	4	0	4	1	1							13	0.82%
Methamphetamine	15	8	12	6	14	11							66	4.14%
Other	12	7	5	4	0	3							31	1.95%
Total	299	267	271	263	262	231	0	0	0	0	0	0	1,593	100%

Age

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
17 and Under	22	35	35	26	39	18							175	10.99%
18 - 20	26	18	26	14	21	17							122	7.66%
21 - 24	42	26	19	31	20	25							163	10.23%
25 - 34	90	84	84	76	74	65							473	29.69%
35 - 44	94	68	83	82	84	87							498	31.26%
45 - 54	19	30	22	30	21	15							137	8.60%
55 - 64	6	6	2	3	3	4							24	1.51%
65+	0	0	0	1	0	0							1	0.06%
Total	299	267	271	263	262	231	0	0	0	0	0	0	1,593	100%

Race/Ethnicity

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
European	184	163	163	160	142	129							941	59.07%
African	86	81	81	90	88	74							500	31.39%
Native	11	9	6	4	10	8							48	3.01%
Asian/Pacific	2	2	1	0	3	4							12	0.75%
Hispanic	16	9	16	7	16	11							75	4.71%
Alaskan	0	0	0	0	0	1							1	0.06%
Other	0	3	4	2	3	4							16	1.00%
Total	299	267	271	263	262	231	0	0	0	0	0	0	1,593	100%

Alcohol and Drug Abuse Client Admissions Trends By Resident County FY 2000 Region 5

1-64

Gender

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
Male	69	85	73	79	57	71							434	66.36%
Female	42	30	40	41	35	32							220	33.64%
Total	111	115	113	120	92	103	0	0	0	0	0	0	654	100%

Primary Problem

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
Alcohol	60	62	53	59	50	53							337	51.53%
Cocaine	25	26	30	18	21	19							139	21.25%
Marijuana	15	17	17	24	10	17							100	15.29%
Heroin	1	0	0	1	1	0							3	0.46%
Methamphetamine	9	7	11	12	10	13							62	9.48%
Other	1	3	2	6	0	1							13	1.99%
Total	111	115	113	120	92	103	0	0	0	0	0	0	654	100%

Age

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
17 and Under	13	9	5	12	6	6							51	7.80%
18 - 20	9	8	5	8	4	7							41	6.27%
21 - 24	12	9	9	7	5	11							53	8.10%
25 - 34	34	31	37	28	24	30							184	28.13%
35 - 44	31	43	47	50	41	33							245	37.46%
45 - 54	11	13	9	14	12	16							75	11.47%
55 - 64	1	2	1	1	0	0							5	0.76%
65+	0	0	0	0	0	0							0	0.00%
Total	111	115	113	120	92	103	0	0	0	0	0	0	654	100%

Race/Ethnicity

	July 1999	August	September	October	November	Dec 2000	January	February	March	April	May	June 2000	Total	Percent
European	81	69	79	85	65	76							455	69.57%
African	19	33	21	28	19	16							136	20.80%
Native	4	1	3	3	1	1							13	1.99%
Asian/Pacific	0	0	0	0	0	1							1	0.15%
Hispanic	7	11	10	4	7	9							48	7.34%
Alaskan	0	0	0	0	0	0							0	0.00%
Other	0	1	0	0	0	0							1	0.15%
Total	111	115	113	120	92	103	0	0	0	0	0	0	654	100%

Reduce the Number of Days of Alcohol and Cocaine Use

Performance

1

Measure

Contact person for this measure: Karen Suddath, 296-7272

Definition: This measure indicates that successful completion of substance abuse treatment will reduce alcohol and other drug usage as measured at a six month follow-up after discharged from treatment.

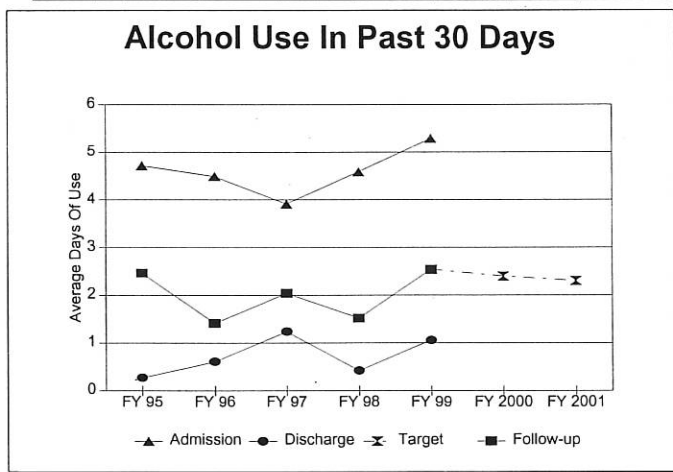
Demonstrates: Reduction in use of alcohol and other drugs demonstrates that the severity of addiction decreases after treatment.

Analysis: All clients are being assessed with a standard assessment tool which places clients in the most appropriate form of treatment. Improvements in this area could be attributed to the use of the standard assessment tool.

These results are documented through application of the Addiction Severity Index (ASI) survey that is administered by treatment programs at admission and discharge. The ASI measures the severity of the clients addiction in seven areas. Kansas State University conducts the six month follow-up survey.

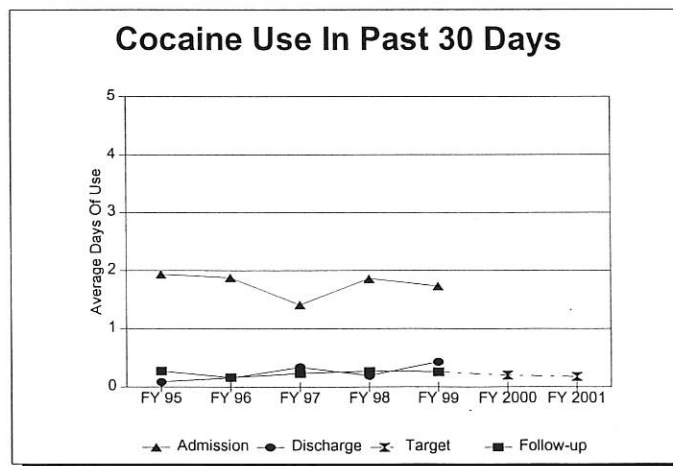
Alcohol Use Past 30 Days

	FY 1995	FY 1996	FY 1997	FY 1998	FY 1999	FY 2000	FY 2001
Admission	4.72	4.49	3.91	4.59	5.29		
Discharge	0.27	0.61	1.24	0.42	1.06		
Target					2.54	2.4	2.3
Follow-up	2.46	1.41	2.04	1.52	2.54		



Cocaine Use Past 30 Days

	FY 1995	FY 1996	FY 1997	FY 1998	FY 1999	FY 2000	FY 2001
Admission	1.934	1.88	1.41	1.86	1.73		
Discharge	0.085	0.155	0.34	0.19	0.43		
Target					0.26	0.2	0.18
Follow-up	0.272	0.161	0.23	0.27	0.26		



Reduce the Dependency on Cash Assistance at the Six Month Follow-up

Performance

2

Measure

Contact person for this measure: Karen Suddath, 296-7272

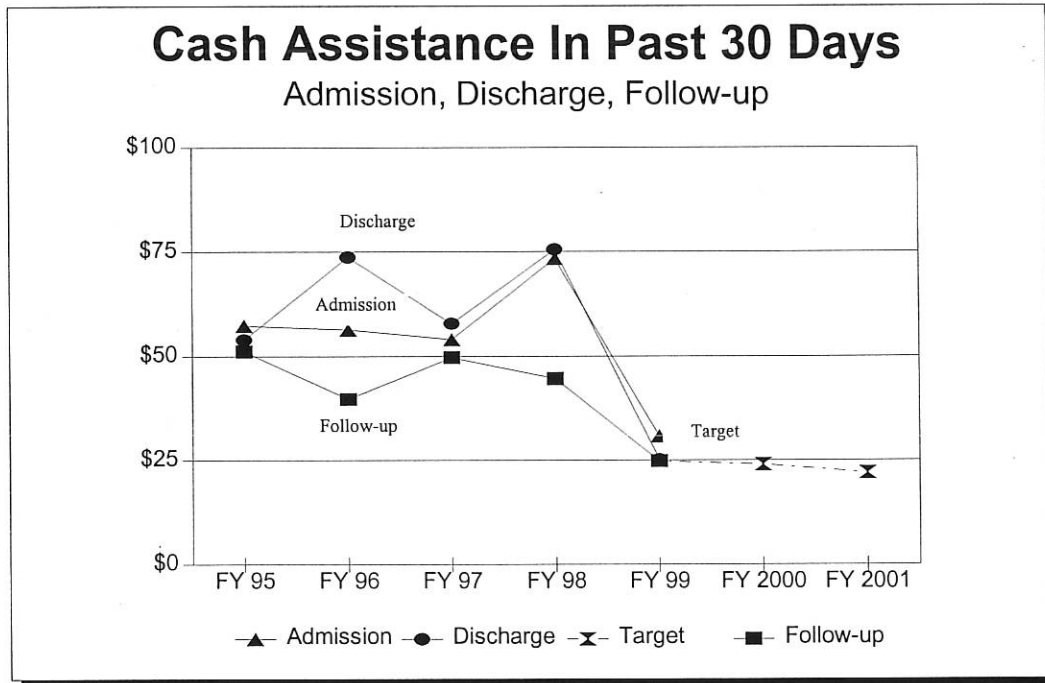
Definition: Clients that successfully complete substance abuse treatment will reduce their dependency on cash assistance.

Demonstrates: Increased employment and less dependence on cash assistance as a result of treatment.

Analysis: The alcohol and drug abuse treatment programs are providing more continuing care services and support services for the clients in treatment over the past year. Support services provided by alcohol and drug abuse treatment programs address client employment issues, housing needs and other issues as identified by the Addiction Severity Index (ASI). A decrease in the use of cash assistance could be attributed to the emphasis on continuing care services and supportive services provided by the alcohol and drug abuse treatment programs.

These results are documented through application of the ASI survey that is administered by treatment programs at admission and discharge. The ASI measures the severity of the clients addiction in seven areas. Kansas State University conducts the six month follow-up survey.

	Public assistance						
	FY 1995	FY 1996	FY 1997	FY 1998	FY 1999	FY 2000	FY 2001
Admission	\$57.28	\$56.31	\$53.97	\$73.36	\$30.80		
Discharge	\$53.90	\$73.76	\$57.76	\$75.53	\$25.13		
Target					\$24.81	\$24.00	\$22.00
Follow-up	\$51.12	\$39.69	\$49.67	\$44.65	\$24.81		



Increase In Income After Treatment

Performance
3
Measure

Contact person for this measure: Karen Suddath, 296-7272

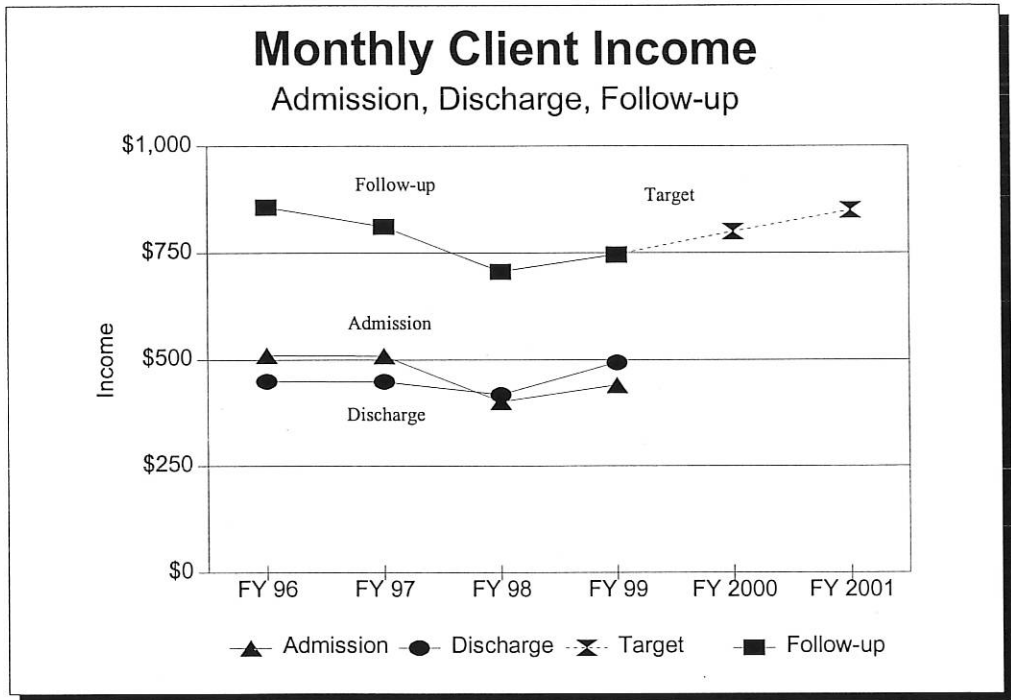
Definition: As severity of addiction is reduced, income from employment will increase.

Demonstrates: Substance abuse treatment is a cost effective process that benefits all Kansans.

Analysis: The alcohol and drug abuse treatment programs are providing more continuing care services and support services for the clients in treatment over the past year. Support services provided by alcohol and drug abuse treatment programs address client employment issues, housing needs and other issues as identified by the Addiction Severity Index (ASI). An increase in the average income at follow-up could be attributed to the emphasis on continuing care services and support services provided by the alcohol and drug abuse treatment programs.

These results are documented through application of the ASI survey that is administered by treatment programs at admission and discharge. The ASI measures the severity of the clients addiction in seven areas. Kansas State University conducts the six month follow-up survey.

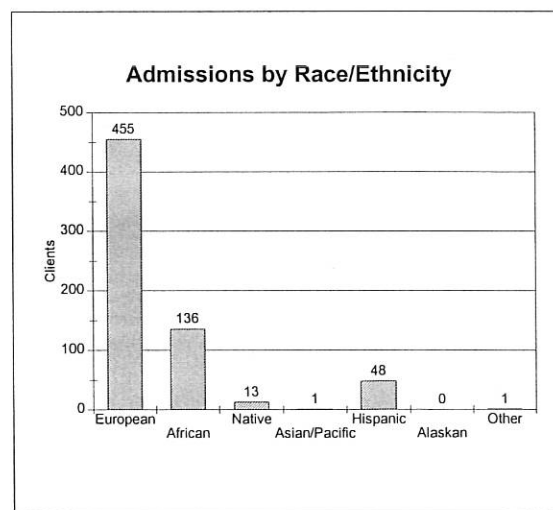
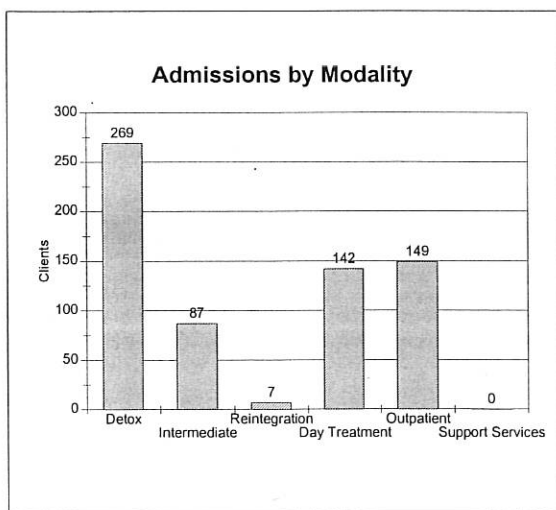
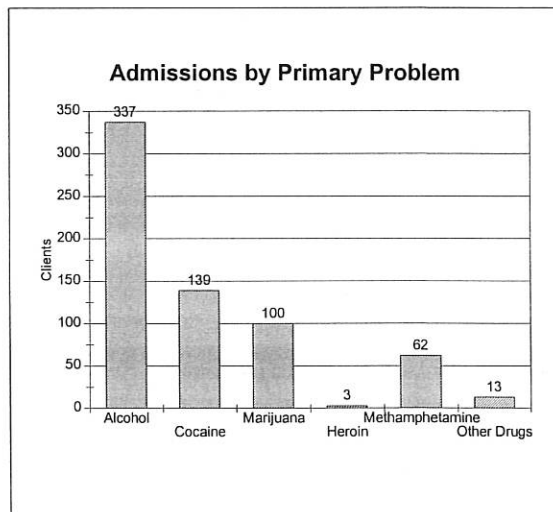
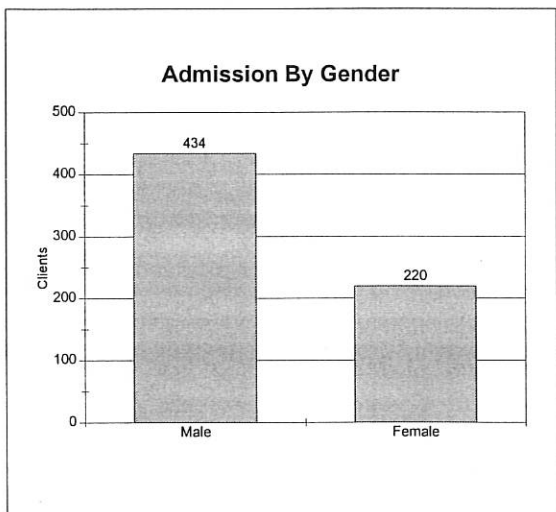
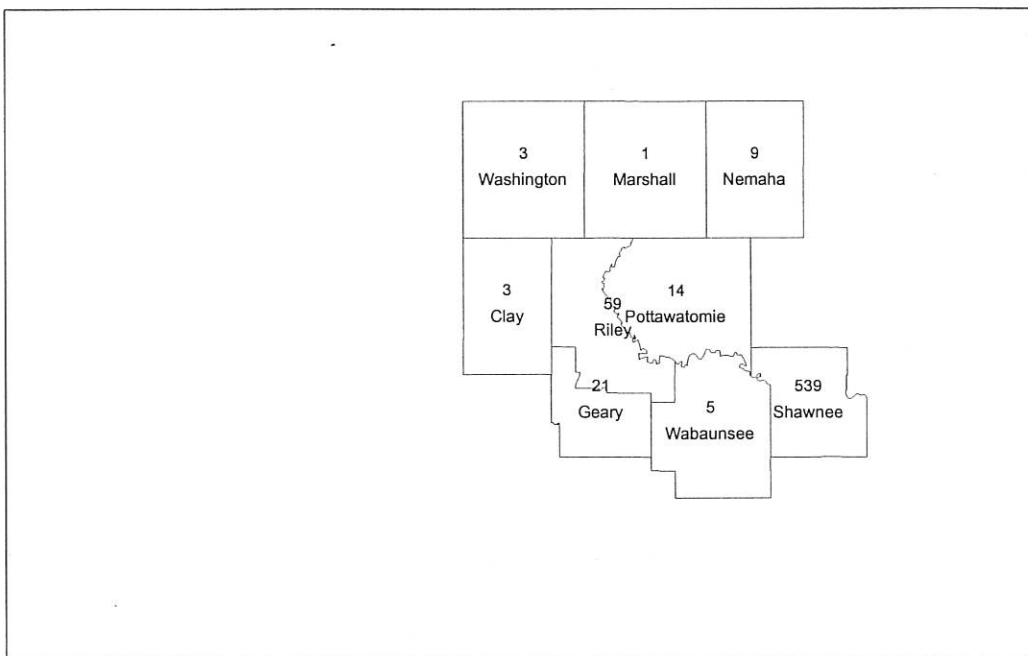
	Monthly Income					
	FY 1996	FY 1997	FY 1998	FY 1999	FY 2000	FY 2001
Admission	\$510.32	\$508.54	\$401.10	\$439.66		
Discharge	\$448.87	\$447.63	\$417.10	\$493.41		
Target				\$745.92	\$800.00	\$850.00
Follow-up	\$857.18	\$811.58	\$706.18	\$745.92		



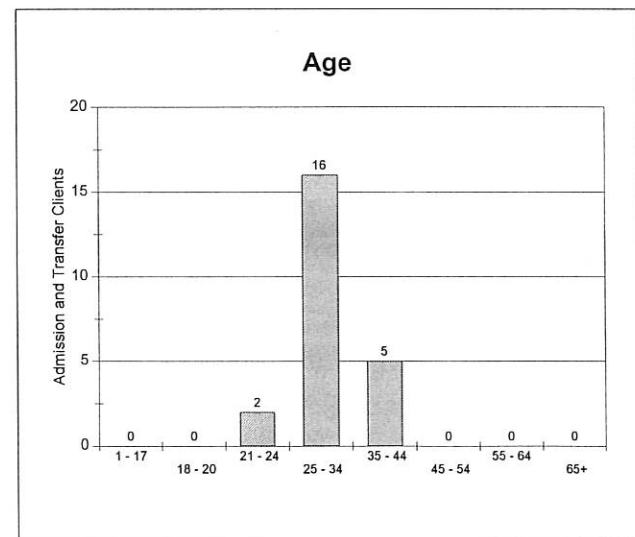
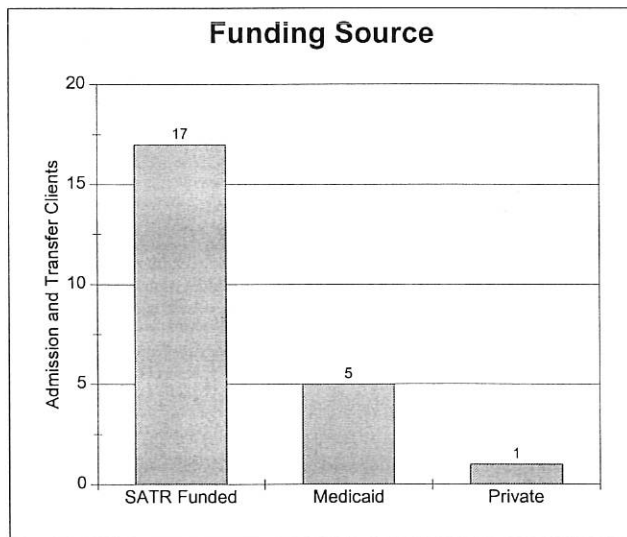
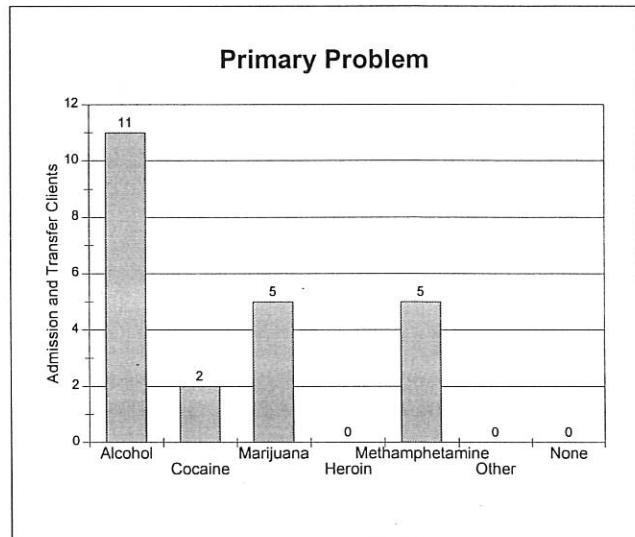
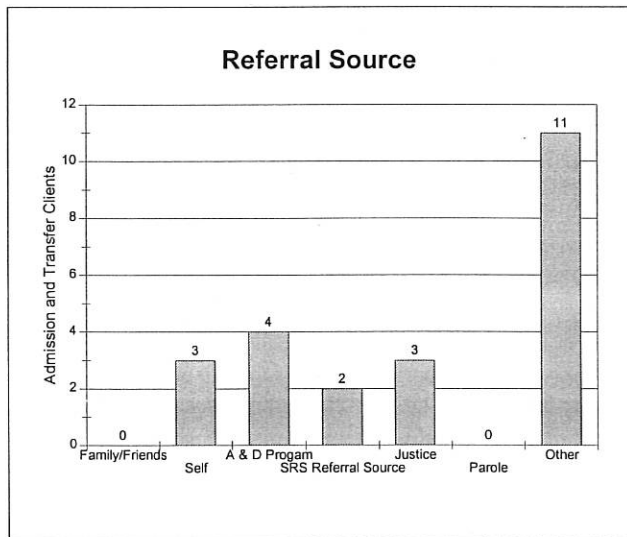
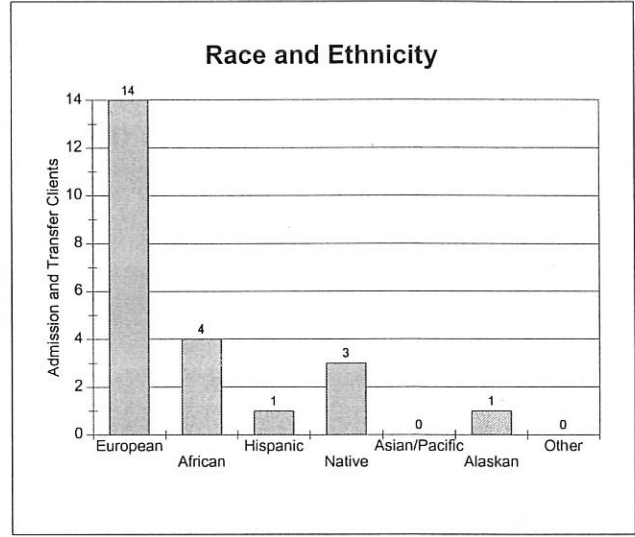
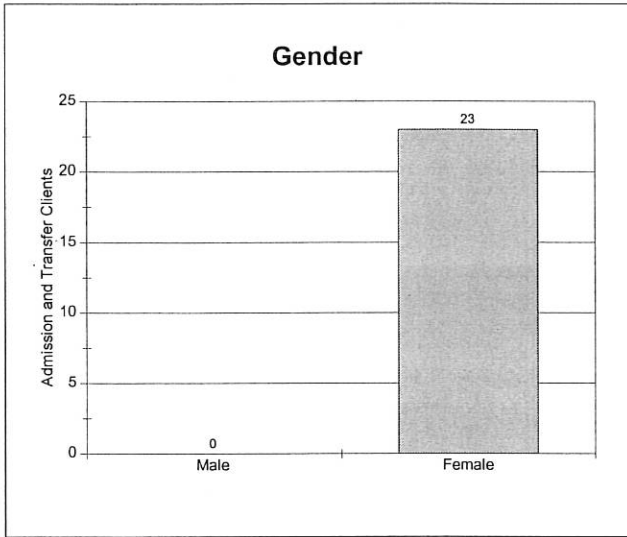
Region 5

Alcohol and Drug Abuse Treatment Admissions

July 1, 1999 through December 31, 1999



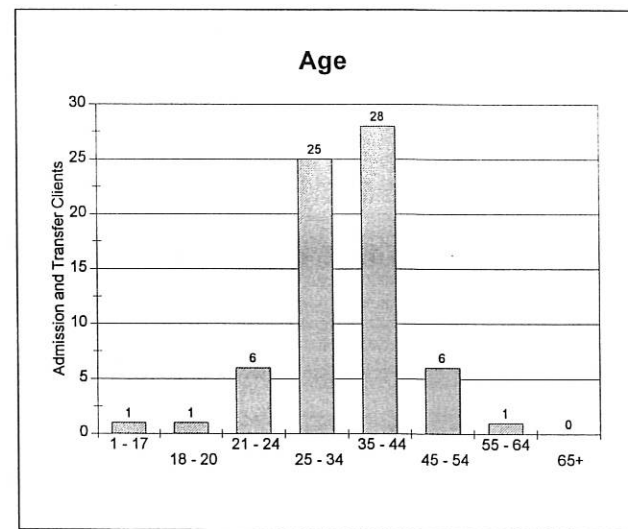
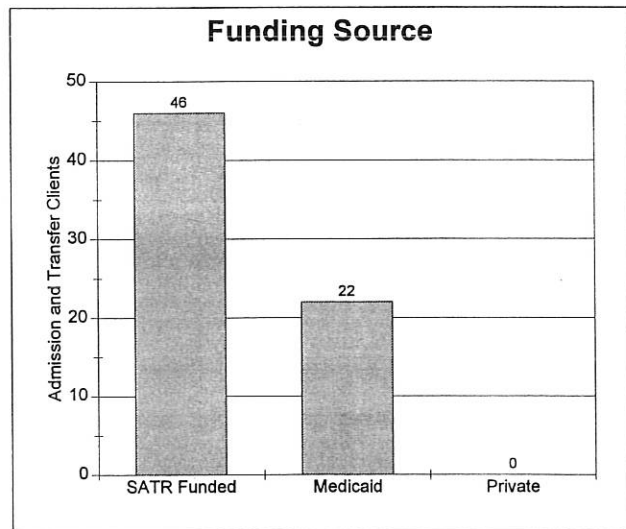
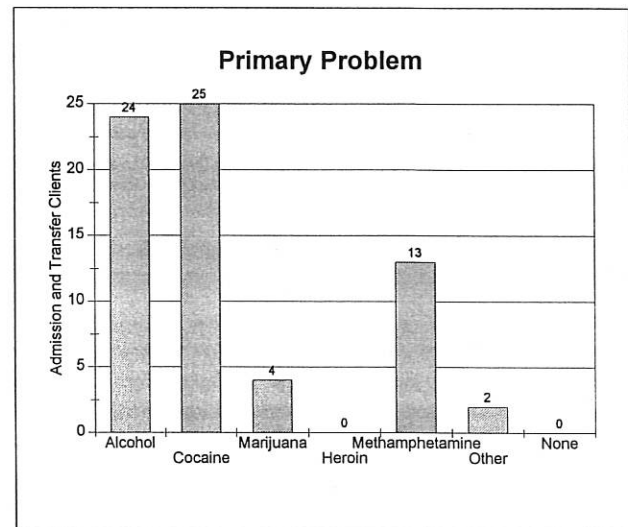
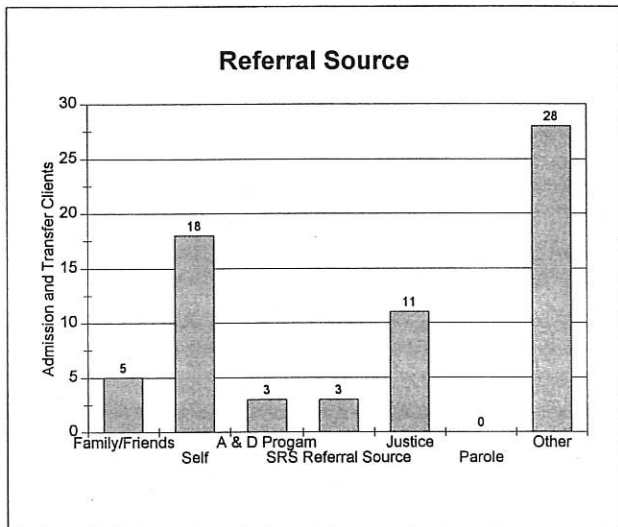
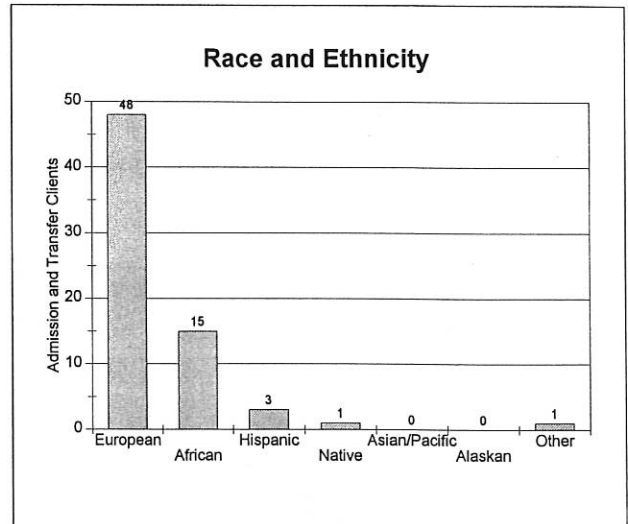
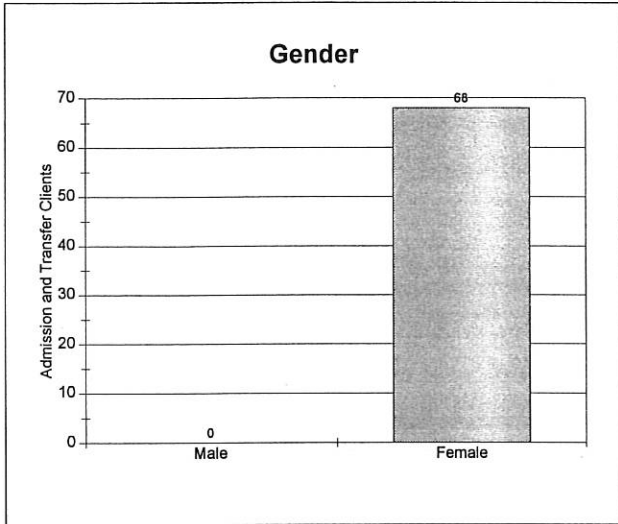
DCCCA - Women's Recovery Center at Topeka Outpatient Admissions and Transfers July 1, 1999 Through December 31, 1999



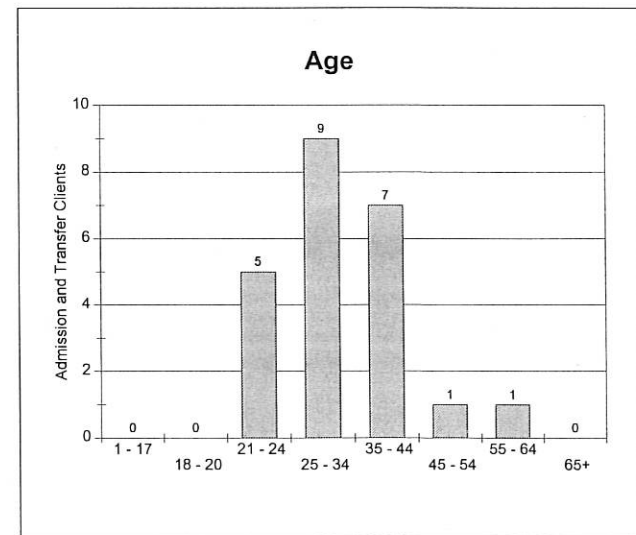
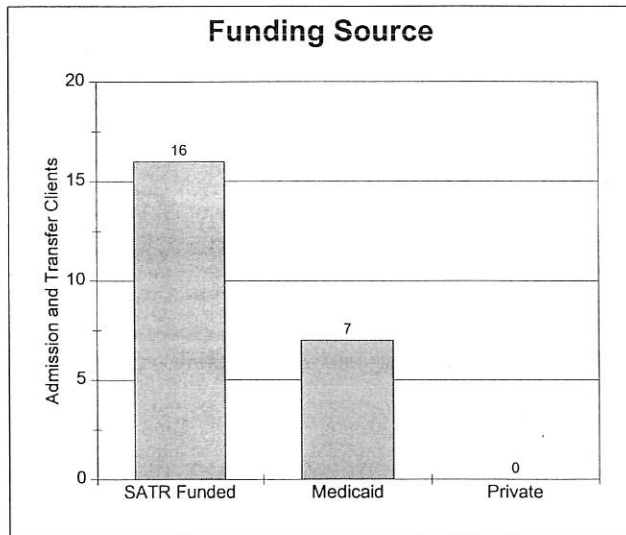
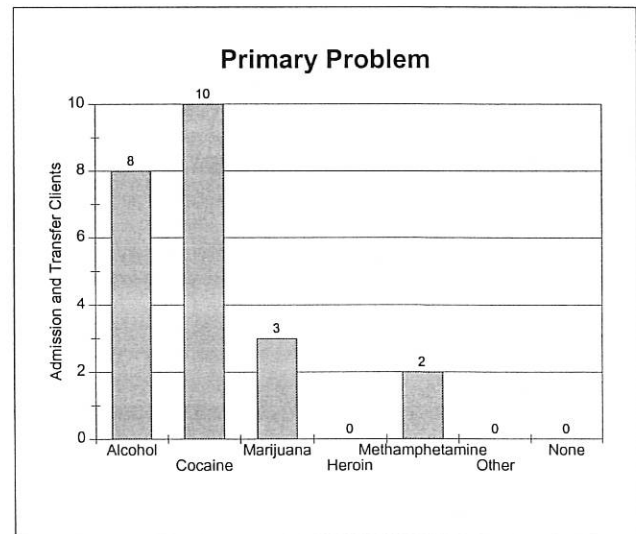
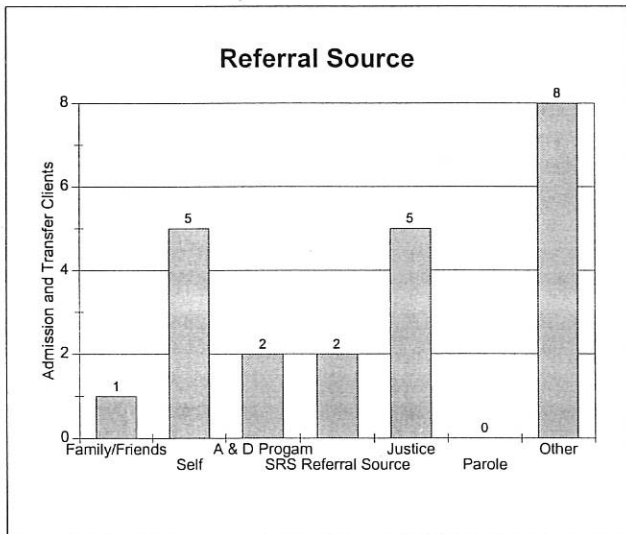
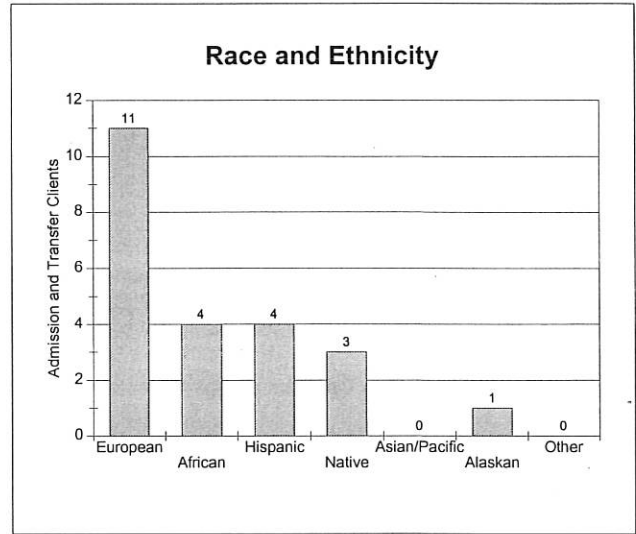
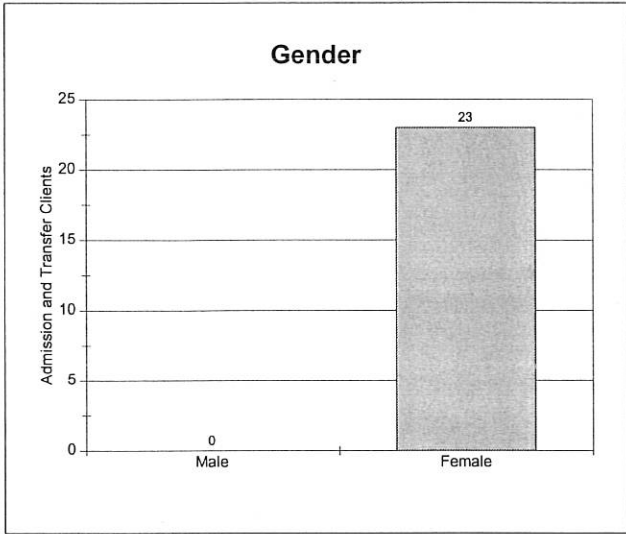
**DCCCA - Women's Recovery Center at Topeka
Intermediate**

Admissions and Transfers

July 1, 1999 Through December 31, 1999

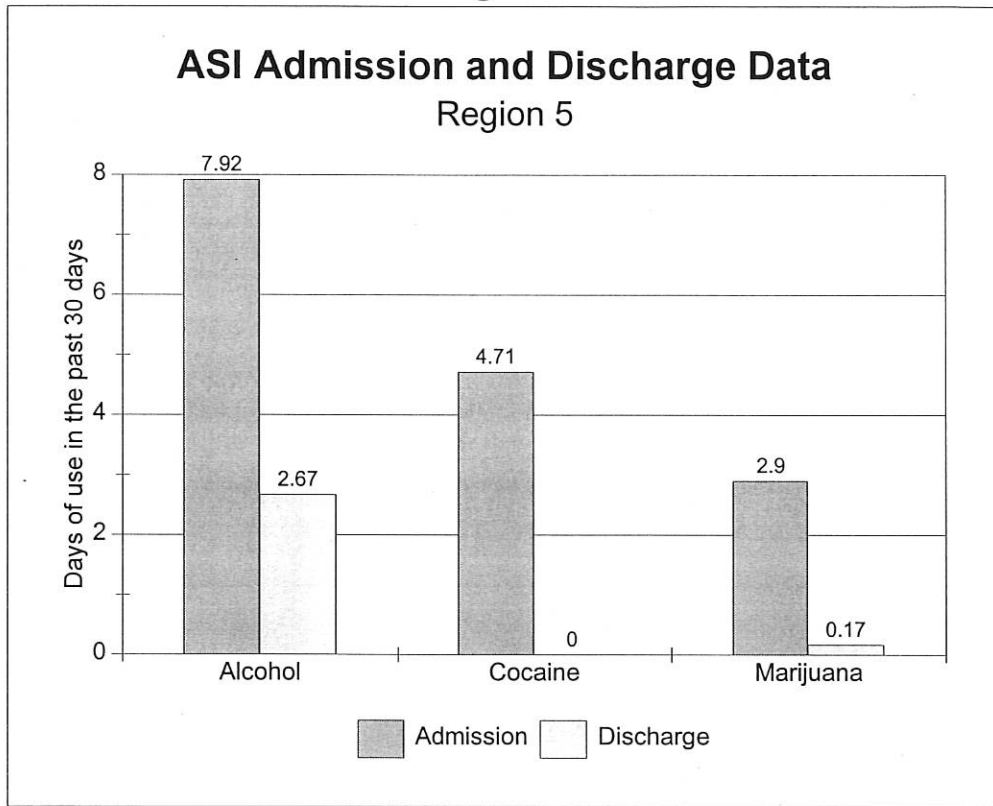


**DCCCA - Women's Recovery Center at Topeka
Day Treatment
Admissions and Transfers
July 1, 1999 Through December 31, 1999**

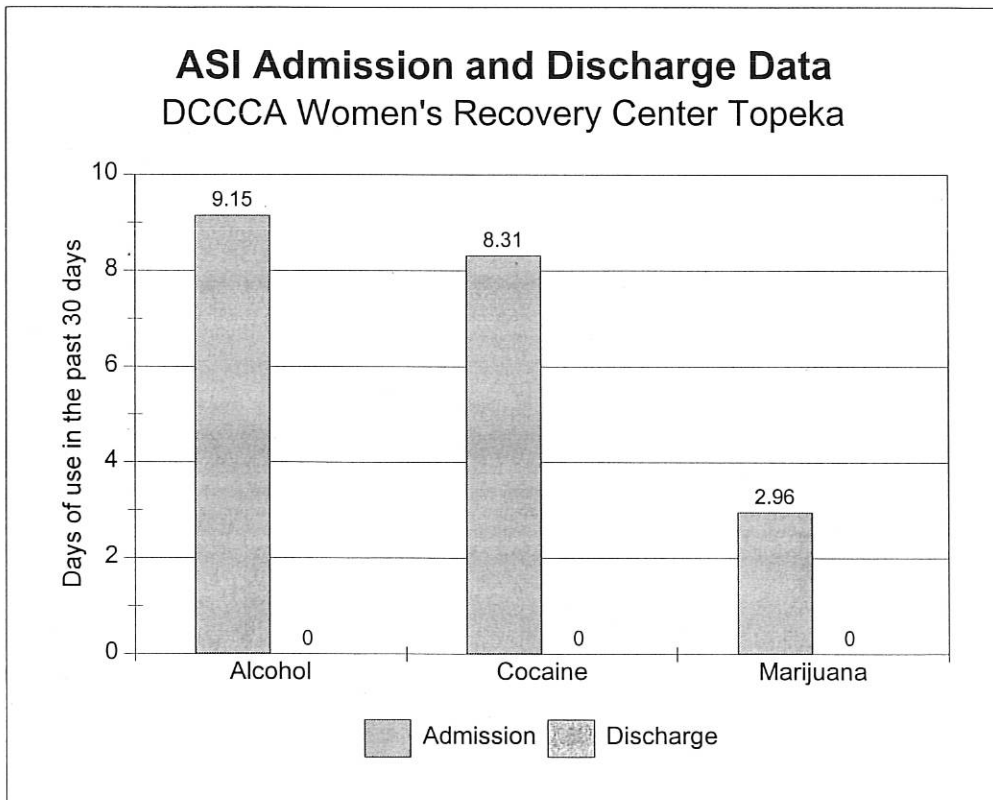


Addiction Severity Index Data July 1, 1998 through June 30, 1999

Region 5

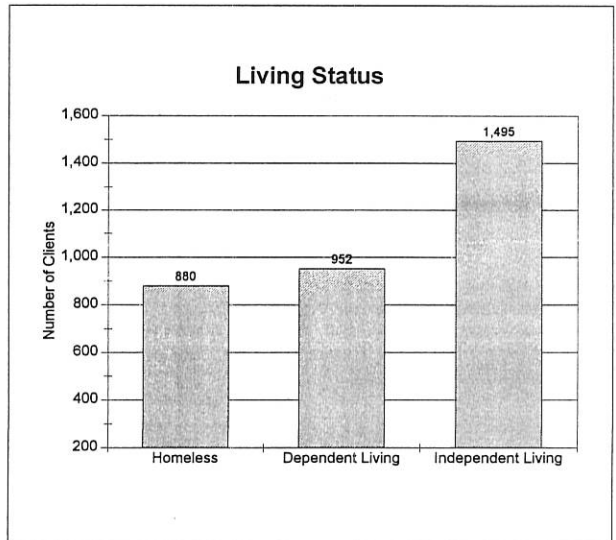
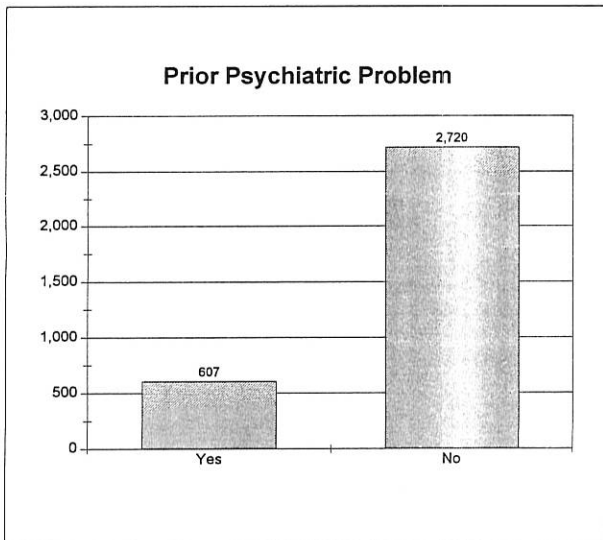
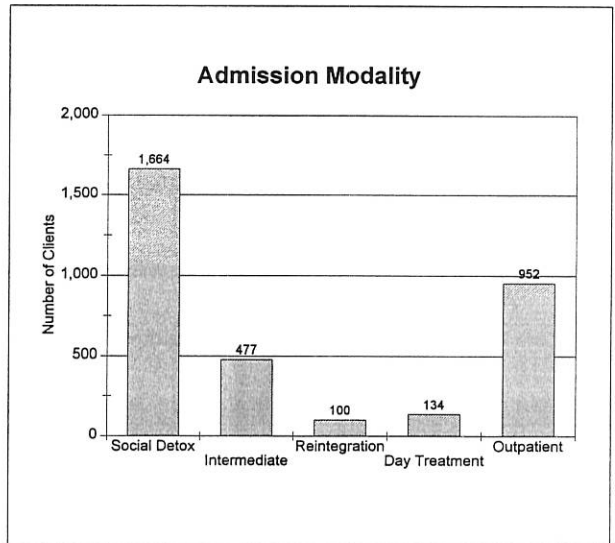
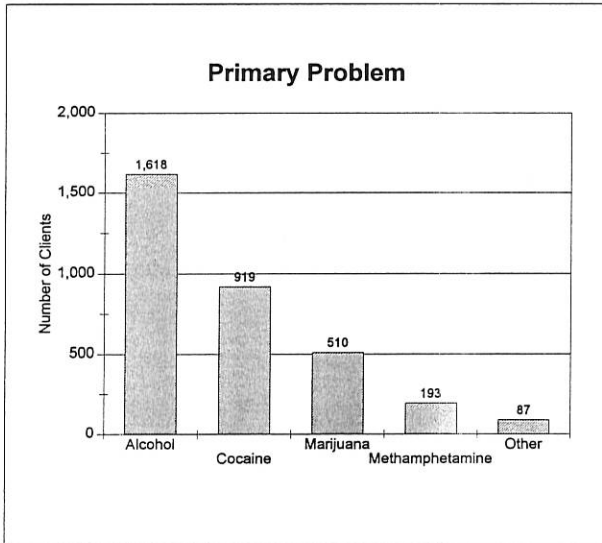
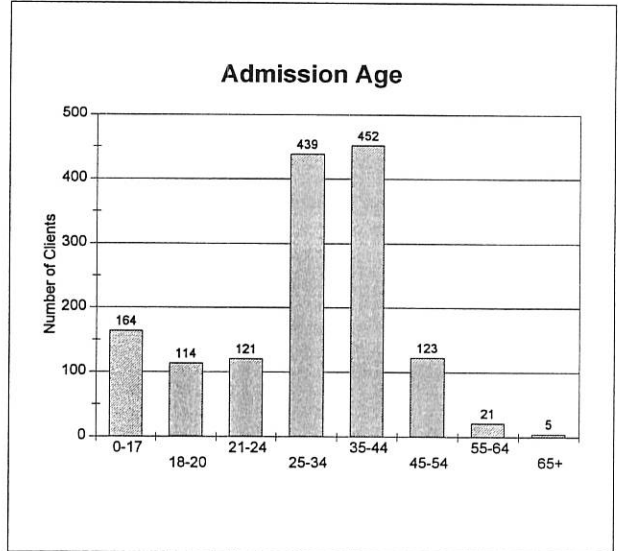
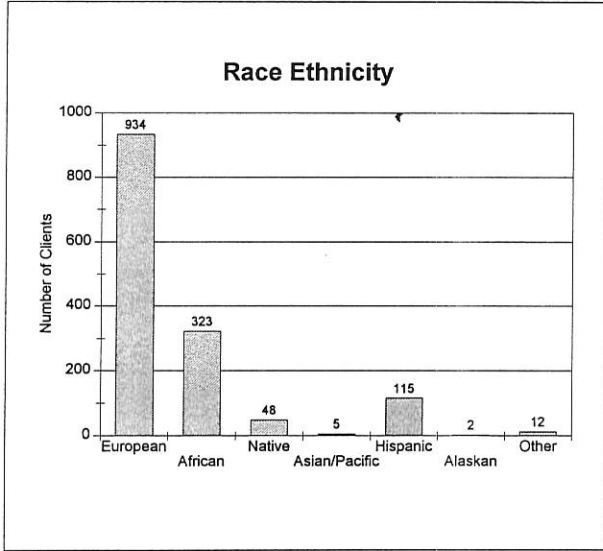
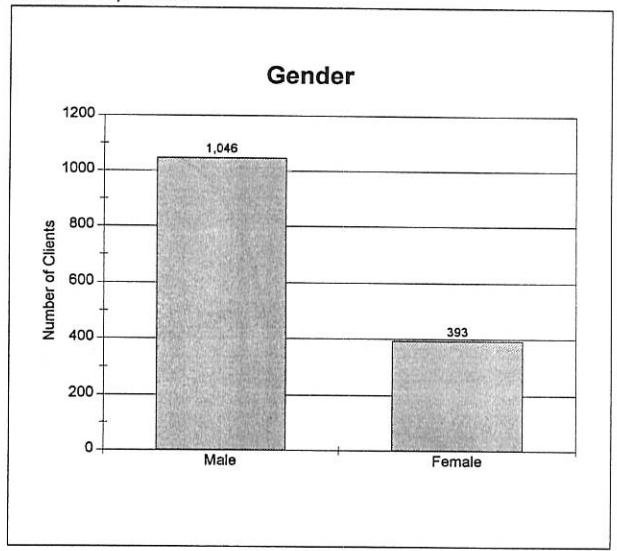
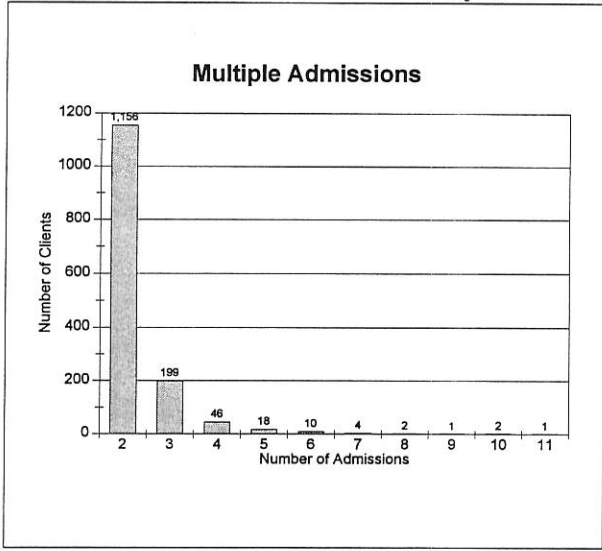


DCCCA Women's Recovery Center Topeka



Clients With Two or More Admissions in FY1999

July 1, 1998 through June 30, 1999



1,439 clients have been admitted to alcohol and drug abuse treatment programs two or more times in FY 1999. The 1,439 client represent 3,327 alcohol and drug abuse treatment admissions.

**Average Length of Stay (Days)
Intermediate
July 1, 1998 through June 30, 1999**

Facility Number	Program	Average Length of Stay	Average Length of Stay (Male)	Average Length of Stay (Female)
073	Parallax	11.80	11.25	12.70
074	DCCCA Options	14.38	14.07	15.08
078	SOS	14.89	14.07	34.60
068	New Chance	14.97	15.52	13.41
279	Women's Recovery Center Wichita	15.33	0.00	15.33
093	Mirror Newton	15.62	13.56	21.00
350	Women's Recovery Center Hoisington	16.39	0.00	16.39
023	SARP	16.41	16.19	16.86
006	Crawford County MHC	16.52	16.81	15.55
055	CKF	17.81	17.88	17.56
058	KMADT	19.81	17.18	24.15
110	SACEK	21.08	26.04	6.19
403	Mainstream	21.94	23.50	21.50
011	Johnson County ACT	23.31	22.71	25.32
237	Women's Recovery Center Topeka	24.16	0.00	24.16
	State	16.63	16.51	16.87

**Average Length of Stay (Days)
Social Detoxification
July 1, 1998 through June 30, 1999**

Facility Number	Program	Average Length of Stay	Average Length of Stay (Male)	Average Length of Stay (Female)
074	DCCCA Options	2.38	2.34	2.47
073	Parallax	2.53	2.44	2.75
055	CKF	2.81	2.78	3.00
006	Crawford County MHC	2.88	2.98	2.67
023	SARP	2.94	2.93	2.94
011	Johnson County	3.40	3.48	3.10
086	Sunrise	3.41	3.35	3.63
078	SOS	3.42	3.44	3.23
068	New Chance	3.63	3.66	3.57
058	KMADT	3.99	4.02	3.88
	State	2.93	2.94	2.87

**Average Length of Stay (Days)
Reintegration
July 1, 1998 through June 30, 1999**

Facility Number	Program	Average Length of Stay	Average Length of Stay (Male)	Average Length of Stay (Female)
110	SACEK	18.50	18.50	0.00
078	SOS	24.20	23.83	32.75
327	Miracles House	26.20	0.00	26.20
073	Parallax	27.10	28.36	24.81
074	DCCCA Options	38.30	38.97	35.63
093	Mirror Newton	39.31	40.12	36.91
023	SARP	39.58	39.21	44.57
058	KMADT	43.33	42.44	46.13
134	First Step House	44.80	0.00	44.80
070	Thomas County Council	47.50	47.50	0.00
097	Corner House	51.50	51.50	0.00
006	Crawford County MHC	52.27	45.43	69.36
086	Sunrise	54.69	54.69	0.00
068	New Chance	54.80	55.85	38.75
384	Deaf Hope	61.00	54.33	81.00
350	Women's Recovery Center Hoisington	70.40	0.00	70.40
	State	38.61	33.75	35.04

**Average Length of Stay (Hours)
Outpatient
July 1, 1998 through June 30, 1999**

Facility Number	Program	Average Length of Stay	Average Length of Stay (Male)	Average Length of Stay (Female)
008	Franklin County MHC	5.71	5.69	5.75
029	Labette Center of MH Services	5.93	6.55	4.27
020	Pawnee Mental Health Center	5.99	6.19	5.43
002	Bert Nash	6.14	13.00	3.40
007	Four County MHC	7.34	7.73	6.47
013	Kanza MHC	8.03	8.10	7.64
365	Charter Hutchinson	8.14	6.83	16.00
005	Cowley County MHC	8.56	10.43	6.45
019	Recovery Services of NE Kansas	8.75	9.29	7.50
006	Crawford County MHC	8.96	8.40	10.84
135	Geary County Hospital	10.00	10.00	0.00
097	Corner House	10.02	10.16	9.44
023	SARP	10.21	10.06	10.62
021	Prairie View	10.36	14.24	7.23
025	SEKMHC	10.42	9.11	14.00
080	SKADAF	10.71	10.75	10.67
111	South Central Foundation	11.09	10.88	11.80
030	Family Life Center	11.17	12.11	9.64
237	Women's Recovery Center Topeka	11.60	0.00	11.60
086	Sunrise	12.11	10.88	14.93
050	Behavior Health Center (AFCC)	12.58	12.60	12.54
059	DCCCA Lawrence	13.43	14.10	11.83
022	Comcare	13.57	12.88	14.76
052	Elm Acres Columbus	13.88	14.64	12.74
078	SOS	14.73	14.15	16.48
279	Women's Recovery Center Wichita	16.90	0.00	16.90
110	SACEK	16.93	15.86	19.19
031	Sumner MHC	17.36	17.97	14.78
068	New Chance	17.72	19.34	16.49
011	Johnson County ACT	17.80	17.19	19.61
281	Project Trun-around	19.91	19.30	19.92
327	Miracles House	20.50	0.00	20.50
093	Mirror Newton	21.11	21.30	20.56
149	Knox Center	21.41	21.13	22.00
101	Smoky Hill Foundation	23.06	25.91	14.95
073	Parallax	23.31	22.15	25.63
015	MHC of East Central Kansas	24.44	27.56	12.56
070	Thomas County Council	25.41	42.22	6.50
350	Women's Recovery Center Hoisington	25.80	0.00	25.80
197	Cypress Recovery	28.82	26.75	37.86
074	DCCCA Options	29.19	30.33	25.91
384	Deaf Hope	29.25	32.67	19.00
211	Cheyenne County	29.75	28.29	40.00
055	CKF	31.46	32.31	28.33
354	Dream	31.47	33.19	28.39
320	Mirror Hutchinson	33.80	34.76	32.44
297	New Day	34.80	36.29	14.00
082	Menninger/Sims Kemper	37.52	36.17	39.69
058	KMADT	42.00	39.25	49.33
066	IATS	47.53	50.21	38.07
176	AYS	56.85	60.55	40.80
412	TIYOSPAYE	58.82	59.27	54.00
	State	20.76	17.65	15.88