

**THE IOWA  
CONSORTIUM**  
FOR SUBSTANCE ABUSE RESEARCH AND EVALUATION

———— **OUTCOMES MONITORING SYSTEM** ————  
**IOWA PROJECT**

**YEAR FIVE REPORT**

**PREPARED BY:**

IOWA CONSORTIUM FOR SUBSTANCE ABUSE RESEARCH AND EVALUATION  
UNIVERSITY OF IOWA, IOWA CITY, IOWA 52242-5000

**WITH FUNDS PROVIDED BY:**

IOWA DEPARTMENT OF PUBLIC HEALTH, DIVISION OF HEALTH PROMOTION, PREVENTION, AND ADDICTIVE BEHAVIORS



**THE IOWA  
CONSORTIUM**  
FOR SUBSTANCE ABUSE RESEARCH AND EVALUATION

— **OUTCOMES MONITORING SYSTEM** —  
**IOWA PROJECT**

**YEAR FIVE REPORT**

**SEPTEMBER 2003**

**KURT ROTH, MSW**

**STEPHAN ARNDT, PHD  
DIRECTOR**

**KRISTINA BARBER, MSM  
ASSOCIATE DIRECTOR**

© 2003 IOWA CONSORTIUM FOR SUBSTANCE ABUSE RESEARCH AND EVALUATION  
UNIVERSITY OF IOWA  
100 OAKDALE CAMPUS  
IOWA CITY, IOWA 52242-5000

## Executive Summary

### OMS Background

The Outcomes Monitoring System (OMS) was established to systematically gather data on substance abuse treatment outcomes in Iowa. Randomly selected clients are tracked for follow-up interviews that occur approximately six months after discharge from treatment. In calendar year 2002, 368 follow-up interviews were completed.

### Overview of Findings

Changes between the admission and follow-up data include the following highlights.

- **Primary Substance Used:** Clients responding to “no primary substance” increased from 0% at admission to 46.8% at follow-up. This means that at follow-up, nearly half of the clients remained abstinent. In addition to the clients who were abstinent, 41.1% said, at follow-up, that alcohol was their primary substance.
- **Frequency of Primary Substance Use:** Nearly twice as many clients reduced the frequency of their primary substance (51.7%) compared to those who increased their use (26.7%). Of the people who used at least daily at admission, 52.8 were abstinent and 95.7% had reduced the frequency of their use.
- **Secondary Substance Use:** Clients responding to “no secondary substance” category increased by 42 percentage points from 42.8% to 84.8%. Therefore, only 15.2% of clients reported using more than one substance at follow-up. For those who did indicate use of a secondary substance, marijuana was most common followed by alcohol. Both showed a large decrease between admission and follow-up in the percentage of clients using them (decreases of 15.3 and 15.7 percentage points).
- **Frequency of Secondary Substance Use:** Clients were 3.7 times more likely to reduce their frequency of their secondary substance, 31.9% reduced their use while only 8.7% increased their use. Most people remained abstinent (56.1%) before and after treatment regarding their secondary substance.
- **Arrests:** For the question regarding arrests, the admission response refers to the 12 months prior to admission and the follow-up response refers to the 6 months since discharge. Only 10.9% of the clients had been arrested during the 6 months following treatment. Of those who were arrested, nearly all were arrested 1-3 times. Clients responding to “1-3 arrests” decreased by 58.2 percentage points between admission and follow-up.
- **Months Employed:** Clients responding to “no months employed” category went down 20.3 percentage points. Clients responding to “4 or more months” category went up 17.2 percentage points.
- **Income:** Clients responding to “no income” category dropped 14.3 percentage points. Clients responding to “\$1001 to \$2000 for taxable monthly income” increased by 14.1 percentage points. This increase in monthly income corresponds with the previous finding that more clients are employed.

Primary substance use was examined in relation to key outcome variables—abstinence, arrests and employment.

- **Abstinence:** clients whose primary substance at admission was alcohol or marijuana abstained at a lower rate during the follow-up period than clients whose primary substance was methamphetamine or cocaine. Those whose primary substance at admission was methamphetamine had the highest abstinence percentage during the follow-up period (67.3%) with the exception of three substance groups comprised of only 1 or 2 clients. Alcohol was the most common primary substance at admission with clients in this group remaining abstinent at a rate of 40.2%, the lowest abstinence rate of the substances studied.
- **Arrests:** clients whose primary substance at admission was alcohol were arrest-free during the follow-up period at a rate of 93.9%. Clients reporting cocaine as their primary substance at admission were arrest free at a rate of 92.2%, followed by methamphetamine at a rate of 84.2%, and marijuana at a rate of 81.8%. Differences in the arrest rates did not reach statistical significance.
- **Employment:** Nearly 60% of the clients who reported alcohol as their primary substance at admission were employed full time at follow-up. Clients whose primary substance was marijuana were working full time at a rate of 41.8%; however, marijuana tends to be a drug of choice for adolescents, which would help explain the low full time employment rate.

## Table of Contents

Section A. Background	3
Section B. OMS Overview	3
B.1. Sampling Procedures	3
B.2. Recruitment	4
B.3. Tracking	4
B.4. Follow-up Interview	5
Section C. Recruitment, Tracking, Follow-up Efforts	5
Section D. Changes from Admission to Follow-up	6
Section E. Comparison of Admission and Follow-up Responses	7
Table 1: Primary Substance Used	8
Table 2: Secondary Substance Used	9
Table 3: Frequency of Primary Substance	10
Table 4: Frequency of Secondary Substance Abuse	10
Table 5: Change in Substance Use at Follow-up	10
Table 6: Days per Month Attended AA, NA or similar Meetings	11
Table 7: Arrests	11
Table 8: Hospitalizations	11
Table 9: Employment Status	12
Table 10: Months Employed	12
Table 11: Income	12
Table 12: Income Source	13
Table 13: Days Missed Work or School	13
Table 14: Education	14
Table 15: Relationship Status	14
Table 16: Living Arrangements	15
Section F. Outcome: Abstinence	15
Table 17: Abstinence by Primary Substance Used	16
Table 18: Abstinence by Employment	17
Table 19: Abstinence by Living Arrangements	17
Table 20: Abstinence by Relationship	18
Table 21: Abstinence by Income Source	18
Table 22: Abstinence by Income	19
Table 23: Abstinence by Arrests	19
Table 24: Behavioral Change and Abstinence at Follow-up	20
Table 25: AA/NA Meetings Attended	20
Section G. Outcome: Arrests	20
Table 26: No Arrests by Primary Substance Used	21
Table 27: No Arrests by Employment	22
Table 28: No Arrests by Living Arrangements	22
Table 29: No Arrests by Relationship	23
Table 30: No Arrests by Income Source	23
Table 31: No Arrests by Income	24

Section H. Outcome: Employment	24
Table 32: Full Time Employment by Primary Substance Used	25
Table 33: Full Time Employment by Living Arrangement	26
Table 34: Full Time Employment by Relationship	26
Table 35: Full Time Employment by Income Source	27
Table 36: Full Time Employment by Income	27
Section I. Length of Stay	28
Table 37: Length of Stay by Outcomes	28
Table 38: Length of Stay by Primary Substance at Admission	29
Section J. Recommendations	30

### **APPENDIX: Presentation of Tracking Data**

Table A1: Client Classification Codes	31
Diagram A1: All Clients--January 1 – December 31, 2002	32
Diagram A2: Adults--January 1 – December 31, 2002	33
Diagram A3: Adolescents--January 1 – December 31, 2002	34
Tracking Report for Clients Admitted in 2002	
Table A2. Case Status – All Clients	35
Table A3. Closed by Category- All Clients	35
Table A4. Rates for all Clients	35
Tracking Report for Clients Admitted in 2002—Adults	
Table A5. Case Status – Adults	36
Table A6. Closed by Category – Adults	36
Table A7. Rates for Adults only	36
Tracking Report for Clients Admitted in 2002--Adolescents	
Table A8. Case Status – Adolescents	37
Table A9. Closed by Category – Adolescents	37
Table A10. Rates for Adolescents only	37
Table A11. Client Contacts Closed Cases--Number and Type of Contact	38
OMS Client Contact Data--All Clients with Closed Cases	
Table A12. Clients - interview obtained	39
Table A13. Clients with no interview	39
Table A14. Average number of contacts and minutes per client	39

## **Section A. Background**

In July 1998, at the request of the Iowa Department of Public Health (IDPH), the Iowa Consortium for Substance Abuse Research and Evaluation (Consortium) designed and tested an Outcomes Monitoring System (OMS) to reflect substance abuse treatment related outcomes in Iowa. Before then, treatment agency staff conducted their own interviews. Implementation of the OMS project relieved the treatment agencies from the responsibility of tracking and interviewing clients, and provided an independent evaluation regarding treatment related client outcomes. OMS client sampling was initiated in January 1999.

In addition to providing treatment related outcomes, OMS was created to examine:

- the costs associated with the tracking, recruiting and interviewing substance users by an independent organization;
- the effects of different levels of care on treatment outcomes for various client groups; and
- the process involved in obtaining and utilizing meaningful client outcomes at the individual agency level.

## **Section B. OMS Overview**

### **B.1. Sampling Procedures**

Since 1982, IDPH has collected client data using the Substance Abuse Reporting System (SARS). Data are collected that relate to various aspects of the treatment provision process including: crisis, screening, admission, discharge, services, and follow-up. OMS follow-up data collection is designed to integrate with SARS data. While the primary focus of OMS is the acquisition of follow-up data, the success of its design is dependent upon complete and accurate SARS admission and discharge data.

OMS data are obtained through random sampling procedures from the population of publicly funded substance abuse treatment clients. This includes drug clients who receive IDPH-funded treatment in one of the following environments: medically managed inpatient, primary residential treatment, extended residential treatment, halfway house, continuing care, extended outpatient, intensive outpatient, or medically monitored residential. The data set from which the sample is drawn is comprised of the previous month's SARS admission data. Given that the number of admissions varies from month to month, the sample size also varies. The average monthly sample size during calendar year 2002 was 65 with a range of 46 to 95 clients.

The monthly random sample consists of approximately 5% of the adult clients and, until the October sample, 10% of the adolescent (age 18 and younger) clients from the population. Beginning in October, adolescents were sampled at the same rate (5%) as the adults. Due to the small percentage of minorities in the state, 100% of African Americans were included in the OMS sample in previous years, resulting in a higher representation of blacks in the sample than was reflected in the population. The census of African Americans continued through the January 2002 sample. Because this report includes a census of African American clients from the January sample, and because adolescents were oversampled until October, mathematical adjustments were made in this report to weight the sample data to accurately reflect the population.

## **B.2. Recruitment**

Immediately after the monthly OMS sample is selected, Consortium staff members contact clients in an effort to secure an oral agreement to participate in a 15 minute follow-up telephone interview that takes place approximately six months after discharge from treatment. When OMS staff locates a potential participant via the telephone, they explain that they are calling on behalf of the Health Research Network (HRN is a pseudonym for the Consortium.) and that they would like to talk about participation in a public health study. Staff members confirm the identity of the client before describing the project in detail and attempting to recruit the client. The confirmation process involves matching social security number and date of birth records during the phone call. If the information matches, the staff member will read the remaining recruitment script that describes the OMS and the risks and benefits associated with participation in the OMS project.

After the script has been read, clients are asked if they would like to participate in OMS. If they agree to participate, client contact information is recorded and participants are told that they will receive periodic update calls or letters from the OMS staff until it is time for the follow-up interview. OMS staff also explain that the update calls take only a few minutes and are used to keep contact information current and to add collateral information, such as a relative's phone number, to the case file. Participants also are informed that when an update call is made, OMS staff members identify themselves as a staff member with the Health Research Network, calling to inquire about a public health study.

Clients without phone contact information or those that do not have current telephone service are sent letters asking them to call the Health Research Network's toll-free number in regard to a public health study. Clients frequently call the toll-free number from a pay phone or from a neighbor's phone to contact OMS staff members. It is at this point that recruitment occurs and information is recorded about contacting them in the future -- both for the update calls and the follow-up interview.

Clients may refuse participation in the OMS at any time. They may refuse during the reading of the recruitment script or they may withdraw their participation even if they had indicated earlier that they would like to take part in the follow-up interview. There are no penalties for withdrawing participation in the study; however, a twenty-five dollar gift certificate is provided upon completion of the follow-up interview.

## **B.3. Tracking**

Client tracking information is recorded on each client until the case is closed. This tracking information consists of the successful contacts and attempted contacts that are made in an attempt to communicate with the client. There are two groups of tracking information: 1) the contacts that take place prior to a client's recruitment; and 2) the contacts that take place after a client has been successfully recruited into OMS. Once a client refuses participation, the case is officially closed and tracking of that individual ceases unless the client later contacts the HRN and indicates a desire to participate.

Every attempt to locate a client for recruitment is recorded. These attempts usually consist of: phone calls to friends, relatives, and treatment counselors; mailing letters to former addresses; and conducting internet searches. Once the client is recruited, each contact attempt (usually update letters and phone calls) is recorded as a tracking event until the interview date.

An on-line system for recording tracking information in real time has been developed and implemented during the past year. OMS staff members enter tracking events for each client as

they occur. This provides a database that contains updated tracking and case status information for each client. The new system reduces data entry time and provides more detailed information while reducing the chance for error.

#### **B.4. Follow-up Interview**

Four important elements of OMS must be present before a client's follow-up interview can occur. OMS staff must: 1) be able to contact the client via the telephone; 2) have the client's documented agreement to participate in the follow-up interview; 3) have a discharge date from IDPH; and 4) have documented that six months have passed since the discharge date.

The discharge date is critical as it sets the time frame for when the follow-up interview should take place. Since its inception, the OMS design has follow-up interviews occurring six months after the client has been discharged from primary treatment. Without an official SARS discharge date, it is impossible for OMS staff to determine when an interview should take place.

Once OMS staff receives a SARS discharge date, a plan to obtain the client follow-up interview is implemented. Due to the normal complexities of every day living, it is not always possible to obtain the follow-up interview on the exact post discharge date. Given this, the project design allows OMS staff to interview recruited participants anywhere from two weeks prior to eight weeks after the date that indicates six months post discharge.

### **Section C. Recruitment, Tracking and Follow-Up Efforts**

This report describes the group of randomly selected clients who had treatment admission dates from January 1, 2002 through December 31, 2002. During this twelve month period, 740 individuals were selected to take part in the OMS project. Of that number, 491 individuals have consented to participate in the follow-up interview process. To date, 368 of these follow-up interviews have been completed. An additional 72 individuals, who have been recruited, are receiving regular update calls from staff as their interview date nears. Of the OMS clients admitted during the 2002 calendar year, 77 declined to participate in the project.

The total number of treatment clients currently classified as "not able to recruit" is 138. Of this number, 44 individuals are incarcerated. OMS staff is not allowed to recruit or interview individuals that are incarcerated; however, several clients (13) became incarcerated after being successfully recruited into the follow-up study. Eighty-four unrecruited individuals could not be located, even after numerous phone calls, letters, and Internet searches. Likewise 30 clients who were successfully recruited, could not be located when their interview date arrived. Interview due dates already had passed for 9 unrecruited and 1 recruited client when the Consortium received notification of their discharge dates. One client died.

In this report, the recruitment rate was calculated two ways. The first recruitment rate is based on only those individuals OMS staff was able to contact and who then directly told the staff that they either did or did not want to participate in OMS. This calculation results in a recruitment rate of 86.4%. The second recruitment rate is based on all individuals who had a potential opportunity to state whether or not they wanted to participate in the OMS. Therefore, the denominator of the second recruitment rate includes a larger set of individuals consisting of those who were successfully recruited, those who refused, and unrecruited clients whom staff has been unable to locate. This calculation results in a recruitment rate of 75.3%.

Of the clients eligible for a follow-up interview (successfully recruited who are not in prison, and with an interview due date that has arrived), 90.6% received an interview. This includes recruited clients who could not be located when their interview was due and those who decided not to take part in the interview after initially agreeing to do so.

Detailed tracking information regarding the status of the entire OMS sample is displayed in the Appendix, pages 31 through 39.

#### **Section D. Changes from Admission to Follow-Up**

Clients undergo many changes after admission to substance abuse treatment. When considering the observed changes, it is important to use caution when ascribing reasons for the changes to particular causes, i.e. good treatment/poor treatment, number of previous treatments/no previous treatment, etc. Also, it is important to realize that a combination of many factors affect client outcomes. These include such things as readiness to change, mental illness, transportation, child care needs, age, gender, culture, ethnicity, etc.

The tables in Section E reflect the changes in a client's life situation based on a comparison of the SARS admission data and the OMS SARS follow-up interview data collected approximately six months after discharge and, on average, 8 months following admission. Comparisons on individual variables are made between status at admission and status at follow-up on those clients who had a response at *both* admission and follow-up for that variable. Fifteen categories were identified for comparison from the SARS admission and follow-up forms. Some of the more interesting findings between the admission and follow-up data are reported below. For a complete overview of comparisons refer to the tables in Section E on pages 7 through 15.

- **Primary Substance Used:** Clients responding to “no primary substance” increased from 0% at admission to 46.8% at follow-up. This means that at follow-up, nearly half of the clients remained abstinent. In addition to the clients who were abstinent, 41.1% said, at follow-up, that alcohol was their primary substance.
- **Frequency of Primary Substance Use:** Nearly twice as many clients reduced the frequency of their primary substance (51.7%) compared to those who increased their use (26.7%). Of the people who used at least daily at admission, 52.8 were abstinent and 95.7% had reduced the frequency of their use.
- **Secondary Substance Use:** Clients responding to “no secondary substance” category increased by 42 percentage points from 42.8% to 84.8%. Therefore, only 15.2% of clients reported using more than one substance at follow-up. For those who did indicate use of a secondary substance, marijuana was most common followed by alcohol. Both showed a large decrease between admission and follow-up in the percentage of clients using them (decreases of 15.3 and 15.7 percentage points).
- **Frequency of Secondary Substance Use:** Clients were 3.7 times more likely to reduce their frequency of their secondary substance, 31.9% reduced their use while only 8.7% increased their use. Most people remained abstinent (56.1%) before and after treatment regarding their secondary substance.

- **Arrests:** For the question regarding arrests, the admission response refers to the 12 months prior to admission and the follow-up response refers to the 6 months since discharge. Only 10.9% of the clients had been arrested during the 6 months following treatment. Of those who were arrested, nearly all were arrested 1-3 times. Clients responding to “1-3 arrests” decreased by 58.2 percentage points between admission and follow-up.
- **Months Employed:** Clients responding to “no months employed” category went down 20.3 percentage points. Clients responding to “4 or more months” category went up 17.2 percentage points.
- **Income:** Clients responding to “no income” category dropped 14.3 percentage points. Clients responding to “\$1001 to \$2000 for taxable monthly income” increased by 14.1 percentage points. This increase in monthly income corresponds with the previous finding that more clients are employed.

### **Section E. Comparison of Admission and Follow-up Responses**

Tables 1 through 16 show the admission responses from all clients admitted in 2002. The tables also describe the admission and follow-up responses from the clients who completed follow-up interviews (a subset of the first group). The first column describes the responses, or categories of responses, for the SARS question. The second column describes the responses for all clients in the OMS that answered the item at admission. The third and fourth columns describe the responses for clients that answered the particular item both at admission and at follow-up—a group of 368 clients. The number of clients in this group is smaller because it represents only those clients who completed the follow-up interview.

**Table 1. Primary Substance Used**

At follow-up, 46.8% indicated no primary substance was used. The success rates for primary substance used are included in the Outcomes section on pages 16, 21 and 25.

	Complete OMS Sample at Admission % N=740 (weighted)	OMS Sample with Follow-Up Interviews Completed N=368 (weighted %)	
		Admission	Follow-Up
None	0	0	46.8
Alcohol	49.7	51.2	41.1
Marijuana and/or hashish	24.7	26.7	8.7
Methamphetamine	19.8	16.8	1.9
Cocaine	3.9	4.1	1.0
Heroin	0.7	0.3	0
Benzodiazepines	0	0	0.5
Other	0.2	0	0
Other Opiates and Synthetics	0.6	0.6	0
Other Amphetamine	0.3	0.3	0
Barbiturates	0	0	0
Inhalants	0.2	0	0
Other Hallucinogens	0	0	0
Other Sedatives and Hypnotics	0	0	0
Over the Counter	0	0	0
Non-Prescription Methadone	0	0	0
PCP	0	0	0
Other Stimulants	0	0	0
Other Tranquilizers	0	0	0
Steroids	0	0	0

**Table 2. Secondary Substance Used**

Clients responding to “no secondary substance” category increased by 42 percentage points from 42.8% to 84.8%. Therefore, only 15.2% of clients report using more than one substance at follow-up.

	Complete OMS Sample at Admission % N=740 (weighted)	OMS Sample with Follow-Up Interviews Completed N=368 (weighted %)	
		Admission	Follow-Up
None	41.0	42.8	84.8
Alcohol	20.4	21.0	5.3
Marijuana and/or hashish	24.7	23.5	8.2
Methamphetamine	6.5	5.7	1.4
Cocaine	5.1	5.0	0
Other Hallucinogens	0.3	0	0
Other	0.3	0.3	0.2
Heroin	0.5	0.6	0
Other Amphetamine	0.2	0.3	0
Benzodiazepines	0.2	0	0
Over the Counter	0.2	0.4	0
PCP	0	0	0
Non-Prescription Methadone	0.2	0	0
Other Opiates and Synthetics	0.5	0.3	0
Other Sedatives and Hypnotics	0	0	0
Other Stimulants	0	0	0
Steroids	0	0	0
Inhalants	0	0	0
Other Tranquilizers	0.2	0	0
Barbiturates	0	0	0

Tables 3 and 4 reflect changes in the frequency of substance use. These tables describe frequency change for the primary and secondary substances that are reported at the time of the interview. At follow-up, the primary substance listed at admission may no longer be their drug of choice.

For example, a participant who reports alcohol as their primary substance at admission, and they use it 1-2 times per week, may report at follow-up that they have used their primary substance 1-3 times in the past month. Although this looks like a promising finding, caution must be used when interpreting it because the participant may have made a change in the type of primary drug. Table 5 shows the percentage of clients who changed primary drugs.

**Table 3. Frequency of Primary Substance**

At admission, 14.5% of the clients reported “no use in the past six months.” At follow-up, the percentage increased to 46.8% for this category (an increase of 32.3 percentage points).

	Complete OMS Sample at Admission % N=740 (weighted)	OMS Sample with Follow-Up Interviews Completed N=368 (weighted %)		
		Admission	Follow-Up	Change
No use in past six months	14.8	14.5	46.8	+32.3
No past month use	33.3	30.4	10.8	-19.6
1-3 times in past month	21.4	23.4	10.6	-12.8
1-2 times per week	11.5	13.5	23.6	+10.1
3-6 times per week	6.6	7.0	4.4	-2.6
Once daily	3.6	3.3	2.2	-1.1
2-3 times daily	4.1	3.0	1.0	-2
4 + times daily	4.7	4.8	0.6	-4.2

**Table 4. Frequency of Secondary Substance**

Clients responding to “no use in the past six months” category increased by 25.1 percentage points from 59.7% to 84.8%. Further analysis showed that of these clients who reported “no use in past six months” at admission, nearly 94% maintained abstinence.

	Complete OMS Sample at Admission % N=740 (weighted)	OMS Sample with Follow-Up Interviews Completed N=368 (weighted %)		
		Admission	Follow-Up	Change
No use in past six months	59.9	59.7	84.8	+25.1
No past month use	21.8	20.5	4.7	-15.8
1-3 times in past month	10.1	11.2	4.2	-7
1-2 times per week	3.7	4.4	3.9	-0.5
3-6 times per week	2.0	1.8	1.2	-0.6
Once daily	0.6	0.3	1.1	+0.8
2-3 times daily	0.6	0.5	0	-0.5
4 + times daily	1.3	1.6	0	-1.6

**Table 5. Change in substance use at follow-up**

	% of Non-abstinent Clients N=197 <sup>†</sup>
Changed primary substance	31.3
Changed secondary substance	50.0
Changed frequency of primary drug	77.0
Changed frequency of secondary drug	44.8

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. Therefore, the number of clients is approximate.

**Table 6. Days per month attended AA, NA or similar meetings**

Clients responding to “no meetings” category decreased by 32.3 percentage points. Clients responding to “1-10 meetings” category increased by 27 percentage points. Compared to clients’ attendance at AA or NA meetings at the time of admission, attendance increased dramatically during the 6 months following discharge from treatment.

	Complete OMS Sample at Admission % N=740 (weighted)	OMS Sample with Follow-Up Interviews Completed N=368 (weighted %)		
		Admission	Follow-Up	Change
None	78.2	81.0	48.7	-32.3
1- 10 meetings	17.2	13.9	40.9	+27
11 + meetings	4.5	5.2	10.4	+5.2

**Table 7. Arrests**

Clients responding to “no arrests” increased by 61.2 percentage points from 27.9% at admission to 89.1% at follow-up. This shows that only 10.9% of the clients had been arrested during the 6 months following treatment.

	Complete OMS Sample at Admission % N=740 (weighted)	OMS Sample with Follow-Up Interviews Completed N=368 (weighted %)		
		Admission	Follow-Up	Change
None	30.4	27.9	89.1	+61.2
1-3 times	65.6	68.9	10.7	-58.2
4 times or more	4.1	3.2	0.2	-3

**Table 8. Hospitalizations**

Clients responding to “no hospitalizations” increased by 11.1 percentage points to 96.9% at follow-up. Clients responding to “1-3 hospitalizations” decreased by 11.1 percentage points from 14.2% to 3.1%. This suggests that most of the clients who had been experiencing hospitalizations as a result of their substance abuse prior to admission for substance abuse treatment were no longer being hospitalized following discharge from treatment.

	Complete OMS Sample at Admission % N=740 (weighted)	OMS Sample with Follow-Up Interviews Completed N=368 (weighted %)		
		Admission	Follow-Up	Change
None	88.0	85.8	96.9	+11.1
1-3 times	11.7	14.2	3.1	-11.1
4 times or more	0.3	0	0	0

**Table 9. Employment Status**

Clients responding to “employed full time” category increased by 13.7 percentage points. Clients responding to “unemployed” category decreased by 11.5 percentage points. At follow-up, a much higher percentage of clients were employed either part or full time than was the case when these clients entered treatment.

	Complete OMS Sample at Admission % N=740 (weighted)	OMS Sample with Follow-Up Interviews Completed N=368 (weighted %)		
		Admission	Follow-Up	Change
Employed Full Time (>35 hrs/ wk)	38.8	40.0	53.7	+13.7
Employed Part Time (<35 hrs/ wk)	13.3	13.9	20.1	+6.2
Unemployed (looking for work in the past 30 days)	26.3	26.1	14.6	-11.5
Not in labor force	21.6	20.0	12.0	-8.0

**Table 10. Months Employed**

Clients responding to “no months employed” category decreased by 20.3 percentage points. Clients responding to “4 or more months” category increased by 17.2 percentage points.

	Complete OMS Sample at Admission % N=740 (weighted)	OMS Sample with Follow-Up Interviews Completed N=368 (weighted %)		
		Admission	Follow-Up	Change
None	27.8	23.0	2.7	-20.3
1-3 months	20.6	17.1	20.2	+3.1
4 + months	51.6	59.9	77.1	+17.2

**Table 11. Income**

Clients responding to “no income” category decreased by 14.3 percentage points. Clients responding to “\$1001 to \$2000 for taxable monthly income” increased by 14.1 percentage points. This increase in monthly income corresponds with the previous finding that more clients are employed.

	Complete OMS Sample at Admission % N = 740 (weighted)	OMS Sample with Follow-Up Interviews Completed N=368 (weighted %)		
		Admission	Follow-Up	Change
None	43.6	40.9	26.6	-14.3
\$500 or less	9.8	10.0	12.5	+2.5
\$501 to \$1000	19.2	20.1	17.9	-2.2
\$1001 to \$2000	22.1	22.1	36.2	+14.1
Over \$2001	5.4	6.9	6.9	0

**Table 12. Income Source**

Clients responding to the “none” category decreased by 16.9 percentage points. Clients responding “wages/salary” increased 7.9 percentage points while clients responding to “family/friends” category increased by 8.5 percentage points. More than half of the clients who responded “none” at admission received their primary support from family/friends at follow-up. These clients likely consisted mostly of adolescents. Nearly 40% of the clients in the “none” category at admission were receiving salary/wages as their primary support at follow-up.

	Complete OMS Sample at Admission % N=740 (weighted)	OMS Sample with Follow-Up Interviews Completed N=368 (weighted %)		
		Admission	Follow-Up	Change
None	20.4	17.6	0.7	-16.9
Wages/ Salary	48.7	50.4	58.3	+7.9
Family/ Friends	23.5	25.9	34.4	+8.5
Public Assistance	1.7	1.1	2.0	+0.9
Retirement/ Pension	0.5	0.7	0.3	-0.4
Disability	1.6	0.9	1.6	+0.7
Other	3.8	3.4	2.7	-0.7

**Table 13. Days Missed Work or School**

Clients responding “five or fewer days” increased 10.7 percentage points to 91.6% at follow-up. Clients responding “six or more days missed” decreased by 5.8 percentage points. The number of days a client missed work or school due to substance abuse decreased following treatment.

	Complete OMS Sample at Admission % N=740 (weighted)	OMS Sample with Follow-Up Interviews Completed N=368 (weighted %)		
		Admission	Follow-Up	Change
Five or fewer days	84.0	80.9	91.6	+10.7
6 or more days	6.9	7.3	1.5	-5.8
N/A	9.1	11.9	6.9	-5

**Table 14. Education**

Clients responding to the “did not graduate from high school” category decreased by 9.9 percentage points. This suggests that several clients graduated high school or earned their GED between the time they were admitted to treatment and the time they completed their follow-up interview. Clients responding to the “some college” category increased by 5.9 percentage points.

	Complete OMS Sample at Admission % N=740 (weighted)	OMS Sample with Follow-Up Interviews Completed N=368 (weighted %)		
		Admission	Follow-Up	Change
Did Not Graduate High School	36.3	30.6	20.7	-9.9
High School Only	45.9	48.1	52.1	+4
Some College	17.6	16.5	22.4	+5.9
College Grad	3.2	4.8	4.8	0

**Table 15. Relationship Status**

Clients responding to the “married” category decreased by 3.9 percentage points. Clients responding to the “divorced” category increased by 6.3 percentage points.

	Complete OMS Sample at Admission % N = 740 (weighted)	OMS Sample with Follow-Up Interviews Completed N=368 (weighted %)		
		Admission	Follow-Up	Change
Single	55.5	54.5	50.9	-3.6
Married	15.9	18.4	14.5	-3.9
Cohabiting	9.3	9.0	10.8	+1.8
Separated	6.6	7.1	6.5	-0.6
Divorced	11.8	10.0	16.3	+6.3
Widowed	0.9	1.0	1.0	0

**Table 16. Living Arrangements**

Clients responding to the “alone” category increased by 4.4 percentage points. Clients responding to the “significant other and child(ren)” category decreased by 3.4%.

	Complete OMS Sample at Admission % N = 740 (weighted)	OMS Sample with Follow-Up Interviews Completed N=368 (weighted %)		
		Admission	Follow-Up	Change
Alone	14.4	14.1	18.5	+4.4
Parents	26.6	31.4	31.1	-0.3
Significant Other Only	8.7	9.3	9.2	-0.1
Significant Other and Child(ren)	15.3	17.4	14.0	-3.4
Child(ren) Only	3.5	3.1	5.3	+2.2
Other Adults	15.6	13.6	14.3	+0.7
Other Adults and Child(ren)	5.6	4.2	4.3	+0.1
Prison or Jail	3.7	3.2	0	-3.2
Homeless	1.5	0.5	0	-0.5
Half-way House	5.0	3.1	3.3	+0.2
Hospital	0.2	0	0	0

**Section F Outcome: Abstinence**

Tables 17 through 25 examine abstinence in relation to other variables. Abstinence is defined as responding “none” when asked at follow-up to name a primary substance. The follow-up interview occurred approximately 6 months after the client was discharged from treatment. Mention of the “follow-up period” in this report refers to the 6 months between the client’s discharge from treatment and the follow-up interview.

Although 368 follow-up interviews were completed, individual tables contain data from fewer clients due primarily to missing data. The N for each question response represents the number of abstinent clients and the number of total clients (out of clients who answered the question at follow-up) who indicated that response.

Table 17 shows that clients whose primary substance at admission was alcohol or marijuana abstained at a lower rate during the follow-up period than clients whose primary substance was methamphetamine or cocaine. Those whose primary substance at admission was methamphetamine had the highest abstinence percentage during the follow-up period (67.3%) with the exception of three substance groups comprised of only 1 or 2 clients. Alcohol was the most common primary substance at admission with clients in this group remaining abstinent at a rate of 40.2%, the lowest abstinence rate of the substances studied.

**Table 17. Abstinence by Primary Substance**

OMS Sample with Follow-Up Interviews Completed (N=360)	
Primary Substance at Admission	Abstinence at follow-up %** (N) <sup>†</sup>
Alcohol	40.2 (74/184)
Marijuana	41.5 (40/96)
Methamphetamine	67.3 (41/61)
Cocaine	63.7 (9/15)
Heroin	100.0 (1/1)
Benzodiazepines	0 (0/0)
Other	0 (0/0)
Other opiates and synthetics	100.0 (2/2)
Other Amphetamine	100.0 (1/1)
Barbiturates	0 (0/0)
Inhalants	0 (0/0)
Other hallucinogens	0 (0/0)
Other sedatives and hypnotics	0 (0/0)
Over the counter	0 (0/0)
Non-prescription methadone	0 (0/0)
PCP	0 (0/0)
Other stimulants	0 (0/0)
Other tranquilizers	0 (0/0)
Steroids	0 (0/0)

\*\* p<.01

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. The numbers of clients are approximate but the percentages are accurate.

Tables 18 through 25 present one question each and shows admission and follow-up responses from clients who completed the follow-up interview. The second column lists the abstinence percentage of clients at follow-up who were asked the question at admission. The third column lists the percentage of clients in a response category, who were abstinent when asked the question at follow-up. For instance, Table 18 shows that of the clients employed full time at admission, approximately 50 out of 134 were abstinent at follow-up, yielding a 37.2% success rate for this group. Of those employed full time at follow-up, 82 out of 180 were abstinent, yielding a 45.8% success rate. There were statistically significant differences in abstinence success rates for employment status at admission. For example, those who were unemployed had a higher success rate. However, the success rates were more homogenous for employment status at follow-up.

**Table 18. Abstinence by Employment**

	OMS Sample with Follow-Up Interviews Completed N=335	
	<i>Employment asked at Admission</i> Abstinence %** (N) <sup>†</sup>	<i>Employment asked at Follow-Up</i> Abstinence % (N) <sup>†</sup>
Employed Full Time (>35 hrs/ wk)	37.2 (50/134)	45.8 (82/180)
Employed Part Time (<35 hrs/ wk)	33.7 (16/47)	33.3 (22/67)
Unemployed (looking for work in the past 30 days)	59.3 (52/87)	45.0 (22/49)
Not in labor force	38.9 (26/67)	42.7 (17/39)

\*\* Statistically significant (p<.01)

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. Therefore, the numbers of clients are approximate but the percentages are accurate.

Clients who were unemployed when they were admitted for treatment had the highest abstinence rate (59.3%) at follow-up. Approximately 6 months after leaving treatment, unemployed clients had an abstinence rate of 45%. Abstinence was reported by 45.8% of clients employed full time at follow-up. The number of clients indicating that they were employed full time increased during the follow-up period from 134 at admission to 180 at follow-up. The number of unemployed clients decreased from 87 to 49 for the same period.

**Table 19. Abstinence by Living Arrangements**

	OMS Sample with Follow-Up Interviews Completed N=336	
	<i>Living Arrangements asked at Admission</i> Abstinence % (N) <sup>†</sup>	<i>Living Arrangements asked at Follow-Up</i> Abstinence %* (N) <sup>†</sup>
Alone	43.6 (21/47)	46.9 (29/62)
Parents	36.2 (38/106)	42.5 (44/105)
Significant Other Only	50.8 (16/31)	38.7 (12/31)
Significant Other and Children	48.1 (28/59)	55.0 (26/47)
Children Only	39.0 (4/10)	38.8 (7/18)
Other Adults	38.9 (18/46)	21.7 (10/48)
Other Adults and Children	38.4 (5/14)	61.2 (9/14)
Prison or Jail	68.5 (7/11)	0 (0)
Homeless	100 (2/2)	0 (0)
Half-way House	50.5 (5/10)	62.6 (7/11)
Hospital	0 (0)	0 (0)

\* Statistically significant (p<.05)

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. Therefore, the numbers of clients are approximate but the percentages are accurate.

The abstinence rate at follow-up for clients who were living with other adults when admitted for treatment was 38.9%. The abstinence rate for this group was 21.7% (a decrease of more than 17 percentage points) at follow-up. At the same time, the abstinence rate at follow-up for clients who were living with other adults and children when admitted was 38.4%. It increased to 61.2% (an increase of nearly 23 percentage points) at follow-up. The same pattern is found for clients living with a significant other only compared to a significant other and children. It appears that

having children in the residence is beneficial to the client following treatment if living with a significant other or other adults. The abstinence rate at follow-up for clients living with their parents (the largest group) when admitted was 36.2%. The abstinence rate for clients living with their parents six months after leaving treatment was 42.5%.

**Table 20. Abstinence by Relationship**

	OMS Sample with Follow-Up Interviews Completed N=336	
	<i>Relationship asked at Admission</i> Abstinence %* (N) <sup>†</sup>	<i>Relationship asked at Follow-Up</i> Abstinence % (N) <sup>†</sup>
Single	35.6 (65/183)	37.6 (64/171)
Married	59.2 (37/62)	48.2 (24/49)
Cohabiting	39.6 (12/30)	52.1 (19/36)
Separated	43.0 (10/24)	55.4 (12/22)
Divorced	54.3 (18/34)	42.8 (23/55)
Widowed	66.7 (2/3)	66.7 (2/3)

\* Statistically significant ( $p < .05$ )

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. Therefore, the numbers of clients are approximate but the percentages are accurate.

Over half of the clients are single at both data gathering points. This coincides with the previous table which shows that the largest group was comprised of clients that lived with their parents. The abstinence rate at follow-up for clients who were single when they were admitted was 35.6%. Clients who were single at follow-up had an abstinence rate of 37.6%. Those who were married when admitted were abstinent during the follow-up period at a higher rate (59.2%) than clients with other relationship statuses except for those who were widowed (there are only 3 such clients).

**Table 21. Abstinence by Income Source**

	OMS Sample with Follow-Up Interviews Completed N=336	
	<i>Income Source asked at Admission</i> Abstinence %* (N) <sup>†</sup>	<i>Income Source asked at Follow-Up</i> Abstinence % (N) <sup>†</sup>
None	57.9 (34/60)	50.0 (1/2)
Wages/ Salary	36.2 (61/170)	45.8 (90/196)
Family/ Friends	44.3 (39/87)	39.3 (45/116)
Public Assistance	31.8 (1/3)	47.0 (3/7)
Retirement/ Pension	0 (0/2)	100 (1/1)
Disability	38.1 (1/3)	33.3 (2/5)
Other	70.0 (8/11)	22.5 (2/9)

\* Statistically significant ( $p < .05$ )

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. Therefore, the numbers of clients are approximate but the percentages are accurate.

A large decrease from 60 clients at admission to 2 clients at follow-up occurred for clients that reported no income source. At follow-up, there was a large increase in clients who reported their income source as wages/salary or family/friends. It is evident that after treatment, clients

either got jobs (as shown in Table 18) or began receiving support from family and friends. Despite having no income source when admitted, these clients were able to succeed in treatment at a higher rate than the other groups except for one. Clients who reported “other” as their source of income at admission fared the best regarding abstinence at follow-up (70%). Those reporting wages as their primary source of support at follow-up comprised the largest group and had an abstinence rate of 45.8%.

**Table 22. Abstinence by Income**

	OMS Sample with Follow-Up Interviews Completed N=315	
	<i>Income asked at Admission</i> Abstinence %* (N) <sup>†</sup>	<i>Income asked at Follow-Up</i> Abstinence % (N) <sup>†</sup>
None	51.3 (66/129)	42.5 (36/84)
\$500 or less	43.6 (14/31)	30.7 (12/39)
\$501 to \$1000	29.4 (19/63)	35.3 (20/56)
\$1001 to \$2000	40.1 (28/70)	48.8 (56/114)
Over \$2000	37.3 (8/22)	52.6 (11/22)

\* Statistically significant ( $p < .05$ )

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. Therefore, the numbers of clients are approximate but the percentages are accurate.

Clients who were earning \$1001 to \$2000 per month at admission represented the second largest income group (70 clients) and abstained at a rate of 40.1%. Six months after leaving treatment, client’s earning this monthly income comprised the largest group (114 clients) and had an abstinence rate of 48.8%. The largest group at admission was clients reporting no income. This group fared well with treatment, with an abstinence rate of 51.3%, the highest for all groups at admission.

**Table 23. Abstinence by Arrests**

	OMS Sample with Follow-Up Interviews Completed N=336	
	<i>Arrests asked at Admission</i> Abstinence % (N) <sup>†</sup>	<i>Arrests asked at Follow-Up</i> Abstinence % (N) <sup>†</sup>
None	40.9 (38/94)	43.9 (131/299)
1-3 times	44.3 (102/231)	34.6 (12/36)
4 times or more	33.5 (4/11)	100 (1/1)

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. Therefore, the numbers of clients are approximate but the percentages are accurate.

Clients who had been arrested 1-3 times during the 12 months prior to admission for treatment comprised the largest group at admission (231 clients) and were abstinent at a rate of 44.3% at follow-up. At follow-up, 299 clients had not been arrested since discharge from treatment. Nearly 44% of the clients in this group were abstinent during the follow-up period. Clients who had been arrested 1-3 times since discharge from treatment were abstinent at a rate of 34.6% at follow-up. The number of clients in this group was more than eight times smaller than the group of clients who had not been arrested. Only one client had been arrested more than three times since discharge from treatment, however that client was able to achieve abstinence.

**Table 24. Behavioral change and abstinence at follow-up**

	Abstinent N=171 <sup>†</sup>	Not Abstinent N=197 <sup>†</sup>
Percent that changed employment status	49.8	46.8
Percent the changed relationship status	26.6	25.5
Percent that changed income status	47.7	52.5

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. Therefore, the number of clients is approximate.

A comparison of clients who were abstinent at follow-up versus clients who were not abstinent on the three variables in Table 24 reveals small differences. The percentage of abstinent clients whose employment status changed between admission to treatment and follow-up was three percentage points higher than for clients who were not abstinent. The percentage of non abstinent clients whose income status changed was approximately five percentage points higher than for abstinent clients. The table does not indicate whether the change represents an increase or a decrease in income. About a fourth of the clients in both groups changed relationship status.

**Table 25. AA/NA meetings attended**

	Abstinent N=171 <sup>†</sup>	Not Abstinent N=197 <sup>†</sup>
Average number of NA/AA meetings attended per month since treatment ended	4.9	2.8

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. Therefore, the number of clients is approximate.

Table 25 presents numbers showing that clients who were abstinent at follow-up attend an average of 4.9 AA, NA, or similar type meetings per month. This compares to an average of only 2.8 such meetings per month for clients who were not abstinent during the follow-up period.

### **Section G. Outcome: Arrests**

Tables 26 through 31 examine arrest status in relation to other variables. For purposes of this report, clients were categorized as having at least one arrest since discharge from treatment or having no arrests since discharge.

Table 26 shows clients whose primary substance at admission was alcohol were arrest-free during the follow-up period at a rate of 93.9%. Clients reporting cocaine as their primary substance at admission were arrest free at a rate of 92.2%, followed by methamphetamine at a rate of 84.2%, and marijuana at a rate of 81.8%. Differences in the arrest rates did not reach statistical significance.

**Table 26. No Arrests by Primary Substance**

OMS Sample with Follow-Up Interviews Completed (N=336)	
Primary Substance at Admission	No Arrest at follow-up % (N)†
Alcohol	93.9 (163/173)
Marijuana	81.8 (72/88)
Methamphetamine	84.2 (47/56)
Cocaine	92.2 (13/15)
Heroin	100.0 (1/1)
Benzodiazepines	0 (0/0)
Other	0 (0/0)
Other opiates and synthetics	100.0 (2/2)
Other Amphetamine	100.0 (1/1)
Barbiturates	0 (0/0)
Inhalants	0 (0/0)
Other hallucinogens	0 (0/0)
Other sedatives and hypnotics	0 (0/0)
Over the counter	0 (0/0)
Non-prescription methadone	0 (0/0)
PCP	0 (0/0)
Other stimulants	0 (0/0)
Other tranquilizers	0 (0/0)
Steroids	0 (0/0)

† The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. The numbers of clients are approximate but the percentages are accurate.

Table 27 shows that for clients employed full time at admission, approximately 124 out of 134 had not been arrested during the follow-up period, yielding a 92.6% success rate for this group. Arrest status was also asked at follow-up. Of those employed full time at follow-up, 168 out of 180 had not been arrested since discharge, yielding a 93.5% success rate. There were statistically significant differences in the success rates for employment status at follow-up. For example, those not in the labor force had a lower success rate.

**Table 27. No Arrests by Employment**

	OMS Sample with Follow-Up Interviews Completed N=335	
	<i>Employment asked at Admission</i> No arrests % (N) <sup>†</sup>	<i>Employment asked at Follow-Up</i> No arrests %* (N) <sup>†</sup>
Employed Full Time (>35 hrs/ wk)	92.6 (124/134)	93.5 (168/180)
Employed Part Time (<35 hrs/ wk)	88.4 (41/47)	85.8 (58/67)
Unemployed (looking for work in the past 30 days)	86.5 (76/87)	84.3 (41/49)
Not in labor force	86.0 (57/67)	80.6 (31/39)

\* Statistically significant ( $p < .05$ )

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. Therefore, the numbers of clients are approximate but the percentages are accurate.

Clients who were employed full time when they were admitted for treatment were arrest free after discharge at a rate of 92.6%. Clients who were unemployed at admission were arrest free at a rate of 86.5%. At follow-up, clients who were employed full time were arrest free during the follow-up period at the highest rate (93.5%), followed by clients who were employed part time (85.8). Therefore, clients who were employed at follow-up were arrested fewer times than those who were unemployed or not in the labor force.

**Table 28. No Arrests by Living Arrangements**

	OMS Sample with Follow-Up Interviews Completed N=336	
	<i>Living Arrangements asked at Admission</i> No arrests % (N) <sup>†</sup>	<i>Living Arrangements asked at Follow-Up</i> No arrests %* (N) <sup>†</sup>
Alone	78.4 (37/47)	84.4 (52/62)
Parents	87.1 (92/106)	86.5 (90/105)
Significant Other Only	96.4 (30/31)	92.7 (29/31)
Significant Other and Children	97.9 (57/59)	97.2 (46/47)
Children Only	89.0 (9/10)	87.2 (15/18)
Other Adults	90.4 (41/46)	94.7 (45/48)
Other Adults and Children	95.8 (13/14)	100 (14/14)
Prison or Jail	79.0 (9/11)	0 (0)
Homeless	100 (2/2)	0 (0)
Half-way House	82.3 (8/10)	61.6 (7/11)
Hospital	0 (0)	0 (0)

\* Statistically significant ( $p < .05$ )

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. Therefore, the numbers of clients are approximate but the percentages are accurate.

Clients who had been in prison or jail immediately prior to admission for treatment remained arrest free at a rate of 79% during the six months after discharge from treatment. The largest group at both data points is comprised of clients who live with their parents. Clients in this category at admission were arrest free at rate of 87.1% during the 6 months after discharge, whereas 86.5% had not been arrested since leaving treatment.

**Table 29. No Arrests by Relationship**

	OMS Sample with Follow-Up Interviews Completed N=336	
	<i>Relationship asked at Admission</i> No arrests %** (N) <sup>†</sup>	<i>Relationship asked at Follow-Up</i> No arrests %* (N) <sup>†</sup>
Single	86.9 (159/183)	87.9 (150/171)
Married	94.4 (58/62)	93.8 (46/49)
Cohabiting	100 (30/30)	93.3 (34/36)
Separated	81.0 (19/24)	89.5 (19/22)
Divorced	93.2 (31/34)	89.6 (49/55)
Widowed	33.3 (1/3)	33.3 (1/3)

\* Statistically significant (p<.05); \*\* Statistically significant (p<.01)

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. Therefore, the numbers of clients are approximate but the percentages are accurate.

Married or cohabitating clients were arrested fewer times since discharge from treatment than clients in other relationship categories. Of the clients who were cohabitating when admitted for treatment, none were arrested in the six months after discharge. Married clients at admission were arrest free at a rate of 94.4% following treatment. When clients were asked their marital status at follow-up, married clients had the highest arrest free percentage (93.8%) since discharge. Cohabiting clients had the second highest percentage (93.3%) of clients who had not been arrested. Other than widowed clients (of which there were only 3), clients who were single at follow-up had the lowest rate for remaining arrest free (87.9%).

**Table 30. No Arrests by Income Source**

	OMS Sample with Follow-Up Interviews Completed N=336	
	<i>Income Source asked at Admission</i> No arrests % (N) <sup>†</sup>	<i>Income Source asked at Follow-Up</i> No arrests % (N) <sup>†</sup>
None	84.9 (50/60)	100 (2/2)
Wages/ Salary	91.1 (154/170)	92.3 (181/196)
Family/ Friends	88.2 (77/87)	83.4 (96/116)
Public Assistance	100 (3/3)	83.1 (6/7)
Retirement/ Pension	50.0 (1/2)	100 (1/1)
Disability	100 (3/3)	78.1 (4/5)
Other	90.0 (10/11)	100 (9/9)

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. Therefore, the numbers of clients are approximate but the percentages are accurate.

When earning wages/salary as the source of primary income when admitted for treatment, clients remained arrest free after discharge at a rate of 91.1%. The percentage of clients at follow-up that had not been arrested during the follow-up period who report wages/salary as their main income source was 92.3%.

**Table 31. No Arrests by Income**

	OMS Sample with Follow-Up Interviews Completed N=315	
	<i>Income asked at Admission</i> No arrests % (N) <sup>†</sup>	<i>Income asked at Follow-Up</i> No arrests %** (N) <sup>†</sup>
None	87.2 (113/129)	82.5 (69/84)
\$500 or less	91.4 (29/31)	87.8 (35/39)
\$501 to \$1000	90.1 (57/63)	88.4 (50/56)
\$1001 to \$2000	90.2 (63/70)	93.5 (107/114)
Over \$2000	94.8 (21/22)	100 (22/22)

\*\* Statistically significant (p<.01)

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. Therefore, the numbers of clients are approximate but the percentages are accurate.

Table 31 shows the higher the client's monthly income at follow-up, the less likely it was for the client to have been arrested during the 6 months after discharge from treatment. One hundred percent of the approximately 22 clients earning more than \$2,000 per month had no arrests. The largest group at follow-up, those earning between \$1,000 and \$2,000 per month, had the second highest percentage of clients who were not arrested (93.5%). Clients with no income when admitted for treatment comprised the largest group at admission (129 clients). They were arrest free at a rate of 87.2% during the follow-up period.

## **Section H. Outcome: Employment**

Tables 32 through 36 examine employment status in relation to other variables. For purposes of this report, clients were categorized as being employed full time at follow-up or not being employed full time at follow-up.

Nearly 60% of the clients who reported alcohol as their primary substance at admission were employed full time at follow-up. Clients whose primary substance was marijuana were working full time at a rate of 41.8%; however, marijuana tends to be a drug of choice for adolescents, which would help explain the low full time employment rate. Again, alcohol was the most common primary substance with 172 clients.

**Table 32. Full Time Employment by Primary Substance**

OMS Sample with Follow-Up Interviews Completed (N=335)	
Primary Substance at Admission	Employed Full Time at follow-up % (N) <sup>†</sup>
Alcohol	59.6 (102/172)
Marijuana	41.8 (37/88)
Methamphetamine	54.0 (30/56)
Cocaine	55.2 (8/15)
Heroin	100.0 (1/1)
Benzodiazepines	0 (0/0)
Other	0 (0/0)
Other opiates and synthetics	0 (0/2)
Other Amphetamine	100.0 (1/1)
Barbiturates	0 (0/0)
Inhalants	0 (0/0)
Other hallucinogens	0 (0/0)
Other sedatives and hypnotics	0 (0/0)
Over the counter	0 (0/0)
Non-prescription methadone	0 (0/0)
PCP	0 (0/0)
Other stimulants	0 (0/0)
Other tranquilizers	0 (0/0)
Steroids	0 (0/0)

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. The numbers of clients are approximate but the percentages are accurate.

Table 33 shows that for clients living alone at admission, approximately 21 out of 48 were working full time at follow-up, yielding a 44.5% success rate for this group. Living arrangement was also asked at follow-up. Of those living alone at follow-up, 33 out of 61 were working full time, yielding a 54.2% success rate. The reader should be aware that of the clients who answered these questions, nearly 22% were clients 18 years old or younger, with some as young as age 13. Naturally, these clients are not expected to be employed full time, a fact that should be taken into consideration when interpreting the numbers presented in the tables.

**Table 33. Full Time Employment by Living Arrangements**

	OMS Sample with Follow-Up Interviews Completed N=335	
	<i>Living Arrangements asked at Admission</i> Working full time % (N) <sup>†</sup>	<i>Living Arrangements asked at Follow-Up</i> Working full time % (N) <sup>†</sup>
Alone	44.5 (21/48)	54.2 (33/61)
Parents	43.7 (46/106)	43.7 (46/105)
Significant Other Only	69.1 (22/31)	53.4 (17/31)
Significant Other and Children	63.9 (37/57)	69.2 (33/47)
Children Only	44.7 (5/10)	64.5 (11/18)
Other Adults	57.2 (26/46)	55.6 (27/48)
Other Adults and Children	60.8 (9/14)	44.1 (6/14)
Prison or Jail	68.5 (7/11)	0 (0)
Homeless	34.4 (1/2)	0 (0)
Half-way House	65.6 (7/10)	66.5 (7/11)
Hospital	0 (0)	0 (0)

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. Therefore, the numbers of clients are approximate but the percentages are accurate.

**Table 34. Full Time Employment by Relationship**

	OMS Sample with Follow-Up Interviews Completed N=335	
	<i>Relationship asked at Admission</i> Working full time % (N) <sup>†</sup>	<i>Relationship asked at Follow-Up</i> Working full time % (N) <sup>†</sup>
Single	49.0 (90/183)	48.7 (83/170)
Married	60.1 (36/61)	65.6 (32/49)
Cohabiting	66.1 (20/30)	51.9 (19/36)
Separated	50.0 (12/24)	52.4 (11/22)
Divorced	57.7 (19/34)	59.4 (33/55)
Widowed	66.7 (2/3)	66.7 (2/3)

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. Therefore, the numbers of clients are approximate but the percentages are accurate.

Table 34 shows that 66.1% of clients who were cohabitating when they were admitted for treatment were working full time at follow-up. Forty-nine percent of clients who were single at admission were working full time. At follow-up, 48.7% of single clients were working full time. It is likely that most of the clients under age 19 are single and contribute to the relatively low success rate for single clients. Of clients who were married at follow-up, 65.6% were working full-time. Clients who were divorced at follow-up were employed full-time at a rate of 59.4%.

**Table 35. Full Time Employment by Income Source**

	OMS Sample with Follow-Up Interviews Completed N=335	
	<i>Income Source asked at Admission</i> Working full time %*** (N) <sup>†</sup>	<i>Income Source asked at Follow-Up</i> Working full time %*** (N) <sup>†</sup>
None	41.1 (24/60)	50.0 (1/2)
Wages/ Salary	69.8 (117/168)	86.1 (168/195)
Family/ Friends	35.8 (31/87)	8.4 (10/116)
Public Assistance	31.8 (1/3)	0 (0/7)
Retirement/ Pension	50.0 (1/2)	0 (0/1)
Disability	0 (0/3)	0 (0/5)
Other	40.0 (5/12)	12.6 (1/9)

\*\*\* Statistically significant (p<.001)

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. Therefore, the numbers of clients are approximate but the percentages are accurate.

When admitted for treatment, clients whose primary income source was wages/salary were employed full time at follow-up at nearly double the rate of clients whose primary income source was family/friends (69.8% and 35.8% respectively). When asked their primary income source at follow-up, the difference between the two groups is tenfold (86.1% and 8.4%). Again, it is likely that the adolescent clients (who are not expected to be employed full time) are receiving their primary support from family, contributing largely to the low success rate for this group. It stands to reason, as the table shows, that 86.1% of clients whose primary income source was wages at follow-up were employed full-time.

**Table 36. Full Time Employment by Income**

	OMS Sample with Follow-Up Interviews Completed N=314	
	<i>Income asked at Admission</i> Working full time %*** (N) <sup>†</sup>	<i>Income asked at Follow-Up</i> Working full time %*** (N) <sup>†</sup>
None	40.1 (52/129)	2.7 (2/84)
\$500 or less	20.8 (6/31)	14.8 (6/39)
\$501 to \$1000	62.7 (40/63)	55.4 (31/55)
\$1001 to \$2000	76.9 (54/70)	96.5 (110/114)
Over \$2000	85.6 (18/21)	94.7 (20/22)

\*\*\* Statistically significant (p<.001)

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. Therefore, the numbers of clients are approximate but the percentages are accurate.

Forty percent of clients who reported no monthly income when admitted for treatment were employed full-time when interviewed 6 months after discharge. The number of clients that reported no income at follow-up decreased by more than one-third from the number at admission. The group of clients earning more than \$2,000 per month when admitted for treatment fared the best at follow-up with 85.6% being employed full time. Not surprisingly, the table shows that at follow-up, clients with higher monthly income were more likely to be employed full time. The most common income category at follow-up was \$1,001-\$2,000 per month, with approximately 110 out of approximately 114 clients (96.5%) employed full time.

## **Section I. Length of Stay**

Length of stay is defined as the number of days from client admission through discharge. It represents the number of days that the client had an active, open case with the treatment agency. Most clients do not receive residential treatment. For those who do, their lengths of stay include the time they spend physically living at the treatment facility along with the number of days they receive during aftercare until their case is closed. For clients who do not receive residential treatment, their length of stay begins the day they first receive treatment and ends the last day that they receive treatment, or until the treatment agency discharges them and closes their case.

Percentages in the column titled “abstinence” refer to the percentage of clients that were abstinent during the follow-up period for each length of stay range. Numbers in parentheses represent the approximate number of clients who were abstinent and the approximate total number of clients who were in that length of stay range. For example, of the 33 clients who were in treatment less than seven days, 8 of them were abstinent at follow-up, revealing a success rate of 24.7%. Numbers in the “no arrests” and “employed full time” columns are presented the same way as abstinence. The total number of clients varied in each column because of missing data. That is, more of the clients who completed follow-up interviews answered the abstinence question than answered the arrest and employment questions.

The follow-up interview took place approximately 6 months after the client was discharged from treatment. The follow-up period refers to the period of time between the client’s discharge and completion of the follow-up interview.

**Table 37. Length of Stay by Outcomes**

Days of Treatment	OMS Sample with Follow-Up Interviews Completed		
	Abstinence % <sup>***</sup> (N) <sup>†</sup> Total N=360	No arrest % (N) <sup>†</sup> Total N=336	Employed Full Time % (N) <sup>†</sup> Total N=335
Less than 7 days	24.7 (8/33)	88.5 (28/32)	53.2 (17/32)
7 - 30 days	41.7 (29/70)	86.2 (60/70)	45.5 (32/70)
31 - 60 days	46.1 (45/97)	93.0 (82/88)	58.9 (52/88)
61 - 90 days	46.5 (29/62)	91.2 (52/57)	61.5 (34/56)
91 - 120 days	49.1 (21/43)	91.1 (36/40)	56.4 (23/40)
More than 120 days	66.8 (37/55)	82.6 (40/49)	45.1 (22/49)

<sup>\*\*\*</sup> p<.001

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. Therefore, the numbers of clients are approximate but the percentages are accurate.

Table 37 shows that the most common length of stay was 31-60 days while the least common was less than 7 days. Regarding abstinence, the table shows the longer the length of time that clients were in treatment, the higher their abstinence percentage during the follow-up period. Clients who were in treatment at least four months remained abstinent at a rate of 66.8%. Only 24.7% of clients who were in treatment less than 7 days were abstinent during the follow-up period.

Ninety-three percent of clients who were in treatment 31-60 days were not arrested during the follow-up period. Of clients whose treatment lasted more than 120 days, 82.6% of them were not arrested. At follow-up, clients in treatment from 61-90 days were employed full time at a

rate of 61.5%. Interestingly, clients who were in treatment the longest were employed full time at a rate of only 45.1%. Differences between categories did not reach statistical significance for arrest or employment data.

Admission data revealed four substances that clients repeatedly mentioned as their primary substance: alcohol, marijuana, methamphetamine, and cocaine (see Table 1). Table 38 presents the percentage of clients in each length of stay category for these substances. The table also presents the average number of days that clients remained in treatment when the client listed that substance as their primary substance at admission.

**Table 38. Length of Stay by Primary Substance at Admission**

Primary Substance at Admission	Length of Treatment						Average # of days treated
	Less than 7 days %	7-30 days %	31-60 days %	61-90 days %	91-120 days %	More than 120 days %	
Alcohol N=368 <sup>†</sup>	13.4	17.5	24.2	18.2	12.0	14.7	66.4
Marijuana N=183 <sup>†</sup>	11.7	17.7	24.4	16.1	10.4	19.8	70.4
Methamphetamine N=146 <sup>†</sup>	22.3	17.8	13.4	15.7	13.0	17.8	67.2
Cocaine N=29 <sup>†</sup>	10.1	31.1	32.3	6.1	8.2	12.3	56.6

<sup>†</sup> The number of clients is rounded to the nearest integer but could contain a decimal point due to weighting of the data. Therefore, the number of clients is approximate.

Unlike previous tables in this section that include data only from clients who completed follow-up interviews, data in Table 38 are drawn from the entire pool of 740 clients who were admitted during 2002.

The table shows that for clients whose primary substance at admission was marijuana, 11.7% were in treatment less than 7 days. This number was 22.3% for clients whose primary substance at admission was methamphetamine. Slightly more than 40% of the methamphetamine clients were treated for less than 31 days. Similarly, 41.2% of the cocaine clients were in treatment less than 31 days, although cocaine clients comprised the smallest group (29 clients). Nearly 30% of alcohol and marijuana clients were in treatment less than 31 days.

Clients whose primary substance at admission was marijuana were in treatment an average of 70.4 days. This was the longest average length of stay of the four groups. Clients who listed cocaine as their primary substance had the shortest average length of stay in treatment at 56.6 days.

## **Section J. Recommendations**

- Of the clients with closed cases, 9% were incarcerated when their interview due date arrived. Consortium staff and IDPH staff may want to explore avenues with the DOC that would allow recruiting and interviewing individuals who are incarcerated.
- More detailed analyses could be conducted to determine if there are differences in outcomes based on the client's primary substance at admission. Abstinence, arrests, and employment could be further studied comparing clients who differ based on their primary substance at admission.
- The project might benefit from asking some basic inquiry questions to clients who refuse the offer to participate in the follow-up interviews. Information gained could help us understand why these clients declined. This information could potentially be used to decrease the number of refusals.
- The Consortium should investigate ways to increase the recruitment rate of clients and reduce the number of clients listed as "unable to locate."

## APPENDIX: Presentation of Tracking Data

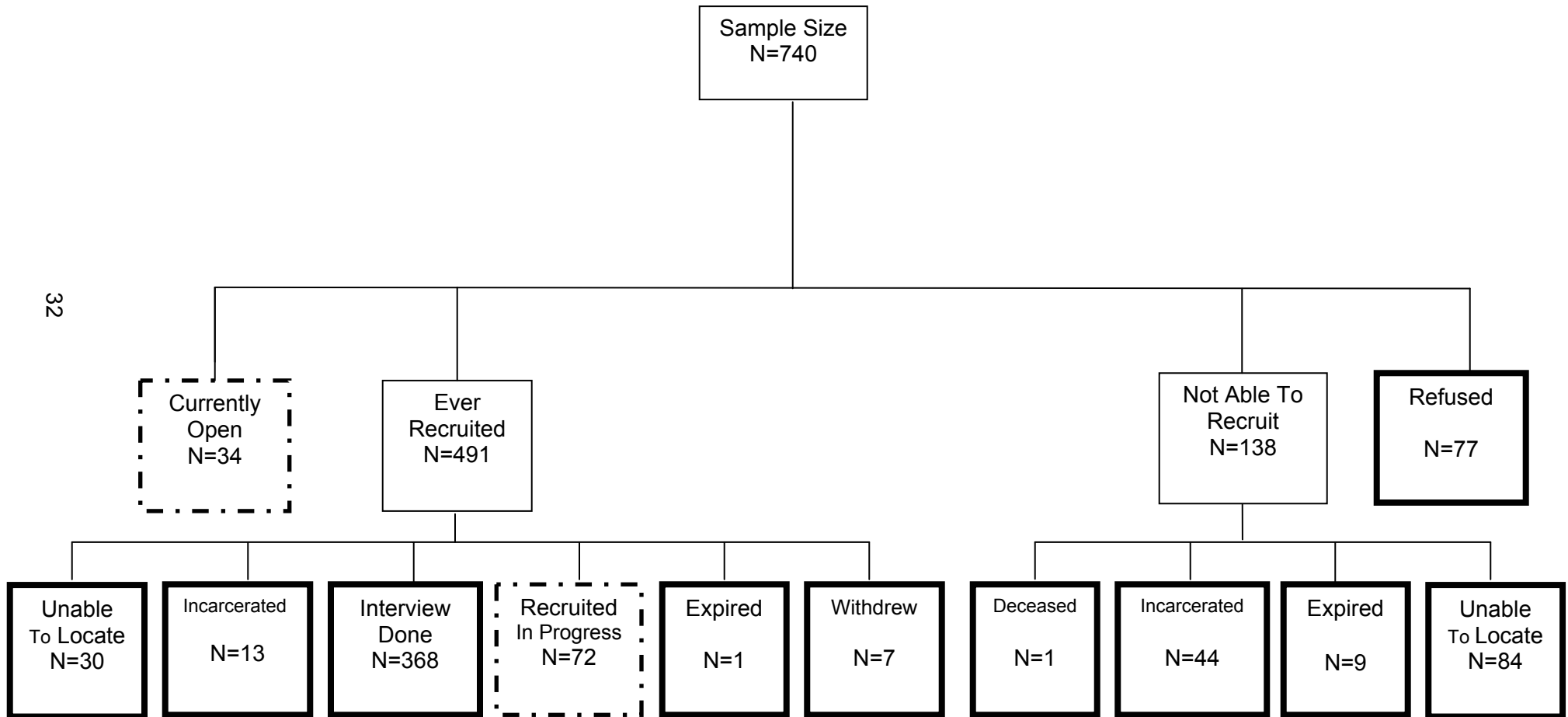
Table A1: Client Classification Codes	31
Diagram A1: All Clients--January 1 – December 31, 2002	32
Diagram A2: Adults--January 1 – December 31, 2002	33
Diagram A3: Adolescents--January 1 – December 31, 2002	34
Tracking Report for Clients Admitted in 2002	
Table A2. Case Status – All Clients	35
Table A3. Closed by Category- All Clients	35
Table A4. Rates for all Clients	35
Tracking Report for Clients Admitted in 2002—Adults	
Table A5. Case Status – Adults	36
Table A6. Closed by Category – Adults	36
Table A7. Rates for Adults only	36
Tracking Report for Clients Admitted in 2002--Adolescents	
Table A8. Case Status – Adolescents	37
Table A9. Closed by Category – Adolescents	37
Table A10. Rates for Adolescents only	37
Table A11. Client Contacts Closed Cases--Number and Type of Contact	38
OMS Client Contact Data--All Clients with Closed Cases	
Table A12. Clients - interview obtained	39
Table A13. Clients with no interview	39
Table A14. Average number of contacts and minutes per client	39

Several tracking categories are used in the OMS tracking database. These categories increase the understanding of what happens to individuals after they are discharged from treatment.

**Table A1. Client Classification Codes**

Sample Size	The total number of clients who have been randomly selected for inclusion in the OMS.
Currently Open	This includes clients that staff is actively trying to locate and recruit. Included are clients who are new to the sample, have been sent a letter, or have no working phone and have not yet responded to multiple letters.
Ever Recruited	This includes clients, who at some point, agreed to participate in the follow-up interview aspect of the OMS. Included are clients who were recruited but died before their interview date, were recruited but incarcerated at the time of their interview, were recruited but could not be located at the time of their interview, were recruited and interviewed, were recruited but waiting for their interview date, were recruited but their interview date had expired at the time the Consortium received notice of their discharge date, or were recruited but withdrew from the project.
Not Able to Recruit	This includes clients that staff has never been able to successfully contact. Included are clients who died before staff could contact them, clients who had not been successfully contacted and were incarcerated at the time of their interview date, clients who staff were unable to locate despite months of effort, and clients who had not been contacted but had a potential interview date that had already passed when the Consortium received notice of the client's discharge date.
Refused	Client refused participation in the follow-up interview aspect of the OMS. Case is immediately closed.
Deceased	Client died before recruitment or, if the client is recruited, before the interview could take place. Case is closed.
Withdrew	Client initially agreed to participate in the study but then decided not to participate in the project. Case is closed.
Expired	When OMS staff received SARS discharge date for a client from the treatment agency via the IDPH, the subsequent interview date had already expired. Client may or may not have been successfully recruited. Case is closed.
Recruited In Progress or Interview Done	Client agrees to take part in the follow-up interview aspect of the OMS. Client will receive update calls and/or letters until the interview date nears. Case will close when interview takes place.
Unable to Locate	OMS staff was not able to make contact with the client either via the telephone or mail system at time interview was due to take place. Client may have initially been contacted and successfully recruited. Case is closed.
Incarcerated	Client is incarcerated at the time their interview was due to take place. The client may or may not have been successfully recruited. Case is closed.

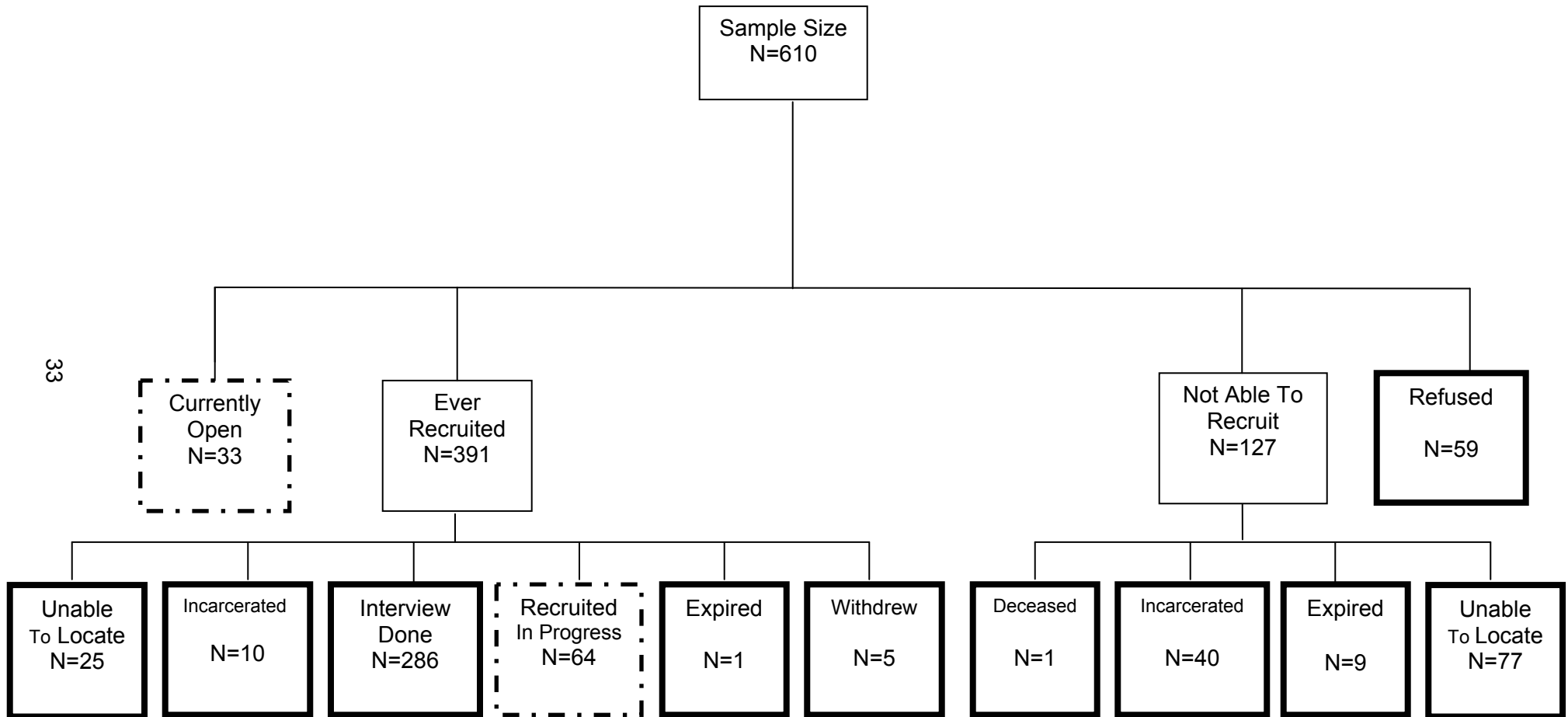
# Diagram A1: Outcome Monitoring System January 1 – December 31, 2002 All Clients\*



32

\* Bolded boxes represent clients with a closed status. Dashed boxes represent clients with an open status (staff are attempting to locate, recruit, and/or interview the client.)

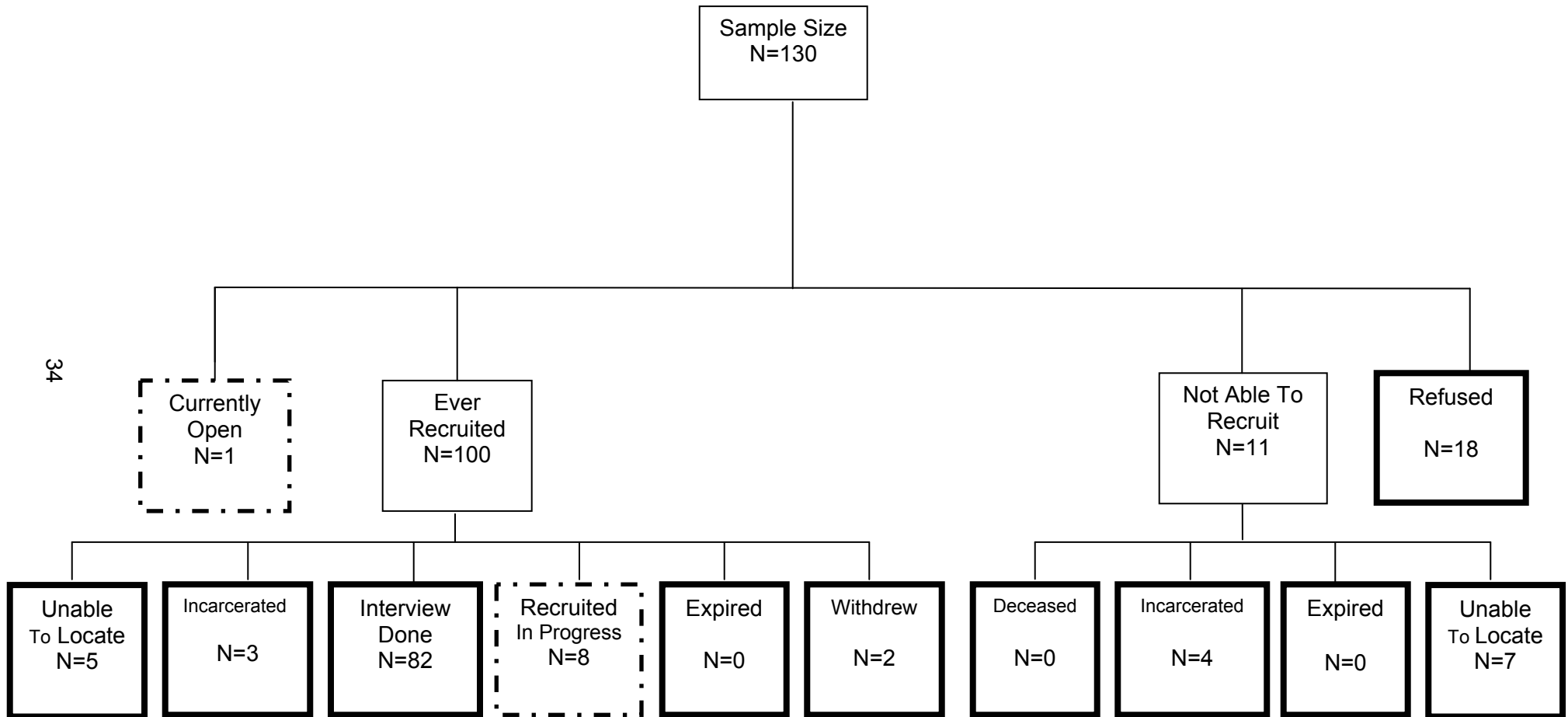
## Diagram A2: Outcome Monitoring System January 1 – December 31, 2002 Adults\*



33

\* Bolded boxes represent clients with a closed status. Dashed boxes represent clients with an open status (staff are attempting to locate, recruit, and/or interview the client.)

## Diagram A3: Outcome Monitoring System January 1 – December 31, 2002 Adolescents\*



34

\* Bolded boxes represent clients with a closed status. Dashed boxes represent clients with an open status (staff are attempting to locate, recruit, and/or interview the client.)

**Tracking Report for Clients Admitted in 2002  
ALL CLIENTS - 740**

**Table A2. Case Status – All Clients**

Status	Number of clients
Open cases	106
Closed cases	634
<b>Total</b>	<b>740</b>

**Table A3. Closed by Category- All Clients**

Category name	Number of clients	Percentage of clients
Follow-up interview complete	368	58.0
Unable to locate	114	18.0
Refused participation	77	12.2
Incarcerated	57	9.0
Expired	10	1.6
Withdrew	7	1.1
Deceased	1	.2
<b>Total</b>	<b>634</b>	<b>100</b>

**Table A4. Rates for all Clients**

Category	Percentage
Recruitment rate	86.4
Recruitment rate *	75.3
Refusal rate	13.6
Follow-up rate	75.0
Not able to recruit rate	19.5

---

\* For information regarding this recruitment rate, refer to page 5 of the report.

**Tracking Report for Clients Admitted in 2002  
ADULTS - 610**

**Table A5. Case Status – Adults**

Status	Number of clients
Open cases	97
Closed cases	513
<b>Total</b>	<b>610</b>

**Table A6. Closed by Category - Adults**

Category name	Number of clients	Percentage of clients
Follow-up interview complete	286	55.8
Unable to locate	102	19.9
Refused participation	59	11.5
Incarcerated	50	9.8
Expired	10	1.9
Withdrew	5	1.0
Deceased	1	.2
<b>Total</b>	<b>513</b>	<b>100</b>

**Table A7. Rates for Adults only**

Category	Percentage
Recruitment rate	86.9
Recruitment rate *	74.2
Refusal rate	13.1
Follow-up rate	89.5
Not able to recruit rate	22

---

\* For information regarding how this recruitment rate is calculated, refer to page 5

**Tracking Report for Clients Admitted in 2002  
ADOLESCENTS - 130**

**Table A8. Case Status – Adolescents**

Status	Number of clients
Open cases	9
Closed cases	121
Total	130

**Table A9. Closed by Category - Adolescents**

Category name	Number of clients	Percentage of clients
Follow-up interview complete	82	67.8
Unable to locate	12	9.9
Refused participation	18	14.9
Incarcerated	7	5.8
Expired	0	0.0
Withdrew	2	1.7
Deceased	0	0.0
<b>Total</b>	<b>121</b>	<b>100</b>

**Table A10. Rates for Adolescents only**

Category	Percentage
Recruitment rate	84.8
Recruitment rate *	80.0
Refusal rate	15.3
Follow-up rate	90.0
Not able to recruit rate	8.5

---

\* For information regarding how this recruitment rate is calculated, refer to page 5

**Table A11. Client Contacts Closed Cases  
Number and Type of Contact**

Type of contact	Adolescent	Adult	Total
An outgoing phone call attempting to recruit client.	621	3,325	3,946
An outgoing phone call in which recruitment has actually taken place and the client has either agreed to participate or refused.	85	294	379
An outgoing phone call attempting to update/check-in with client.	406	1,552	1,958
An outgoing phone call attempting to reach client for the 6-month follow-up interview	360	1,080	1,440
An outgoing phone call completing the 6-month follow-up interview.	64	211	275
An outgoing phone call attempting to track client through collateral contracts.	172	1,831	2,003
Any attempts (phone call/letter/fax) to track client through original treatment agency, these could be either incoming or outgoing.	81	813	894
Incoming call in which a recruitment is attempted	53	250	303
Incoming phone calls from client or collateral contacts (not from treatment agency).	22	125	147
Incoming call in which the follow-up interview is completed.	16	76	92
(Other) Usually directory assistance or an Internet search, but also any call/contact that doesn't fall under any other category.	164	1,258	1,422
A letter sent to contact client; includes letters that have been returned and notification of address changes from post office; outgoing or incoming.	345	2,403	2,748
<b>Sum of all types of client contacts</b>	<b>2,389</b>	<b>13,218</b>	<b>15,607</b>
<b>Sum of minutes for all types of client contacts</b>	<b>17,198</b>	<b>93,785</b>	<b>110,983</b>
<b>Average of # client contacts per closed client</b>	<b>19.7</b>	<b>25.8</b>	<b>24.6</b>
<b>Average of # minutes per closed client</b>	<b>141.7</b>	<b>182.3</b>	<b>174.6</b>

## OMS CLIENT CONTACT DATA

### All Clients with Closed Cases \*

**Table A12. Clients - interview obtained**

Status	Clients	Contacts	Minutes	Letters
Total Interviews Completed	368	7175	55805	1123

**Table A13. Clients with no interview**

Status	Clients	Contacts	Minutes	Letters
Unable to Locate	114	3843	25015	828
Refused	77	628	4045	97
Incarcerated	57	1147	7160	189
Expired	10	178	1200	32
Withdrew	7	195	1165	19
Deceased	1	27	185	6
<b>Grand Total</b>	<b>266</b>	<b>6018</b>	<b>38770</b>	<b>1171</b>

**Table A14. Average number of contacts and minutes per client**

Status	Clients	Contacts	Contacts (Mean)	Minutes	Minutes (Mean)
Interviews Completed	368	7175	19.5	55805	151.6
Unable to Locate	114	3843	33.7	25015	219.4
Refused	77	628	8.2	4045	52.5
Incarcerated	57	1147	20.1	7160	125.6
Expired	10	178	17.8	1200	120
Withdrew	7	195	27.9	1165	166.4
Deceased	1	27	27	185	185

\* Information in Tables A12 through A14 represents only closed cases. Cases are closed for 85.7% of the 740 clients in this report.