



Vermont Foundation of Recovery

A history of recovery housing in Vermont, why it matters, and where we go from here.

Recovery Housing History

- ▶ The Oxford House was the first real push into recovery housing.
- ▶ Safe, transparent, and stable living environments for people in early recovery.
- ▶ Recovery homes enhance early recovery and help promote lasting sobriety (Jason, et. al., 2006).
- ▶ 33% greater chance at success of continuous sobriety after leaving a recovery home (Jason, et. al., 2006).
- ▶ Since the report in 2006 – Recovery homes both networked and independent have sprouted throughout the country.
- ▶ National Alliance for Recovery Residences (NARR) founded in 2011.
 - ▶ 27 states have been named affiliates officially, with 3 emerging states.
 - ▶ Vermont named an affiliate in 2017.
- ▶ Vermont Alliance of Recovery Residences (VTARR) founded in 2016.

NARR and VTARR

- ▶ Most recovery homes and recovery home networks had no national recognition.
- ▶ NARR unites recovery homes and offers a way toward certification.
 - ▶ Four levels of care provided.
 - ▶ VFOR is currently a Level II network of homes in Vermont.
 - ▶ Level I being close to a self-governing “Oxford House” model.
 - ▶ Level IV being a closed door, therapeutic type community, with round the clock staffing and oversight.
 - ▶ VFOR offers a house manager who oversees our members, but isn’t on-site 24/7.
 - ▶ VFOR allows all types of medication (supervised).
 - ▶ VFOR recruits volunteers for house mentoring duties, as well as board positions.

VFOR Information

- ▶ Currently four (4) homes across two counties
 - ▶ Each home has six residents, with an exception in Essex which has five.
- ▶ Three (4) Transitional Apartments with two (2) members each.
 - ▶ Transitional Apartments are the “next step” after the recovery home.
 - ▶ Less oversight.
 - ▶ More responsibility, but staying under the VFOR umbrella.
- ▶ VFOR is on track to open three (3) new homes in 2018
 - ▶ St. Johnsbury
 - ▶ Morrisville
 - ▶ Barre

VFOR Information Continued

- ▶ Average length of stay is 5.01 months
 - ▶ Up from avg. of 3.3 months (65% increase) in our first year [2014].
 - ▶ 52.45% of members stay for at least three months.
- ▶ 26.7% of members leave with a zero balance, and on good terms (30 day notice).
- ▶ 71.12% of members are on some type of medication.
- ▶ 55.31% of members are on either suboxone or methadone – medically assisted treatment (MAT).
- ▶ 60.69% of members leave owing VFOR a balance (small and large amounts).

Does It Work?

- ▶ VFOR Satisfaction Survey's issued after a member moves out (good or bad terms):
 - ▶ 42.9% of members that responded reported sobriety lasting 6 months or more **AFTER** leaving a VFOR home.
 - ▶ 50% report their financial obligations to VFOR were fair.
 - ▶ 40% reported VFOR being vital to their transition in early recovery.
- ▶ VFOR issues a satisfaction survey quarterly to all members:
 - ▶ 90% of members report that they would recommend VFOR to others in early recovery.
 - ▶ 60% rate VFOR managers as effective and fair, and another 40% rate their managers as *extremely* effective and fair.
 - ▶ 40% report VFOR's mentoring program as integral to their stay in a VFOR home.

Testimony on HR 4684

- ▶ <https://www.c-span.org/video/?c4720232/ryan-hampton-testifies-energy-commerce-subcommittee-health-support-hr-4684>
- ▶ Information page: <http://narronline.org/congressional-legislation-promoting-best-practices-in-recovery-housing-cites-narr/>