

### **Report on Recovery:**

## An Update on the Recovery Journey Project at Homewood Health Centre

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For more information about the Recovery Journey Project, please visit: www.recoveryjourneyproject.com

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#### **PROJECT OVERVIEW**

The Recovery Journey Project (RJP) is a research study designed to measure recovery outcomes among individuals who receive inpatient treatment for mental health and addictions (MHA). This multi-year, longitudinal study is conducted and led by researchers at Homewood Research Institute (HRI). As an independent research organization, HRI works directly with treatment providers to collect data from former patients and clients to better understand the recovery process and inform improvements to mental health and addiction treatment.

The primary goal of the RJP is to provide evidence that can guide and continually improve MHA practice. This research study offers a platform to continually monitor treatment outcomes and generate scientific evidence related to the recovery process. More specifically, data collected can be used to:

- Monitor and evaluate program quality and effectiveness;
- Inform program planning and quality improvement efforts;
- Generate new knowledge about the recovery process; and,
- Shape future improvements across the MHA system.

The RJP was first launched in the Addiction Medicine Service (AMS) at Homewood Health Centre in 2015. In the first generation of the project (2015-2018), patients were invited to complete a series of self-reported questionnaires administered at admission (baseline), discharge (end of treatment), and 1-, 3-, 6- and 12-month time points after treatment. All patients admitted to the program were invited to participate in the project. Participation in the project was voluntary. A brief description of AMS is provided in Appendix A.

Key indicators of recovery were measured over time, including substance use, mental and physical health, occupational performance, social relationships and functioning, and overall quality of life and life satisfaction. Several other measures were collected for exploratory purposes given their expected link to recovery, including therapeutic alliance, craving, physical activity and continuing care involvement.

A key component of the RJP is the generation of outcome reports. These reports compare changes in key recovery outcomes over time using aggregated data. Results in these reports can be used to: (1) understand and continually monitor program outcomes; and, (2) identify and target areas for program improvement.

A previous report (July 2017) presented changes in key recovery outcomes for patients who were admitted to AMS between **April 2015 and March 2016**. This report provides an update by presenting changes in key recovery outcomes for patients who were admitted to AMS between **April 2016 and March 2017**.

#### **TABLE OF CONTENTS**

REPORT PURPOSE	V
EXECUTIVE SUMMARY	vi
WHO DID WE SPEAK TO?	1
SUBSTANCE USE	2-3
- Continuous abstinence rate	2
- Number of substance use days	3
MENTAL HEALTH	4-6
- Perceived mental health status	4
- Presence of mental health problems	5
- Number of mental health problems	6
OCCUPATIONAL PERFORMANCE	7-9
- Return to work rate	7
- Ability to meet responsibilities at work	8
- Attendance at work	9
SOCIAL RELATIONSHIPS AND FUNCTIONING	10-11
PHYSICAL HEALTH	12-13
- Perceived physical health	12
- Participation in physical activity	13
QUALITY OF LIFE AND LIFE SATISFACTION	14-16
- Perceived quality of life	14
- Perceived life satisfaction	15-16
APPENDICES A-F	vii-ix

#### **REPORT PURPOSE**

The purpose of this report is to present changes in key recovery outcomes from admission to 12 months after treatment for patients who were admitted to AMS between April 2016 and March 2017 and participated in the Recovery Journey Project.

#### **EXECUTIVE SUMMARY**

Overall, participants reported significant improvements in several recovery-oriented outcomes from admission to 12 months after treatment. The main findings are summarized below:



#### Recovery focus area: Substance use

- 63% of participants reported having not used any substances in the 12 months after treatment in the Addiction Medicine Service
- The average number of substance use days significantly decreased from admission to 12 months after treatment



#### Recovery focus area: Mental health

• Significant improvements in mental health were found from admission to 12 months after treatment, including higher perceived mental health and a reduction in the prevalence of mental health symptoms



#### Recovery focus area: Occupational performance

- 72% of participants who were reported being employed at admission returned to a job within 12 months after completing treatment
- Significant improvements were found from admission to 12 months after treatment in occupational performance, including greater ability meet responsibilities at work, as well as fewer problems with attendance at work



#### Recovery focus area: Social relationships and functioning

• Significant improvements were found from admission to 12 months after treatment in abilities to meet or fulfill various social roles and responsibilities



#### Recovery focus area: Physical health

• Significant improvements were found from admission to 12 months after treatment in physical health including higher perceived rating of physical health and participation in physical activity



#### Recovery focus area: Quality of life and life satisfaction

 Significant improvements were found from admission to 12 months after treatment in quality of life and several areas of life satisfaction

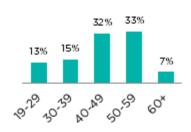


### Who did we speak to?

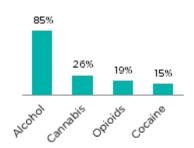
Of the patients who were admitted to AMS between **April 2016 and March 2017** and completed treatment:

112 patients participated in the Recovery Journey Project and responded to questionnaires at both the admission and 12-month time points.

45 was the average age



Substance use at admission







self-identified as white



self-identified as heterosexual



attended at least some post-secondary education



were married or partnered



were employed



#### **Substance use**

# INDICATOR: CONTINUOUS ABSTINENCE RATE

63% of participants reported continuous abstinence from alcohol and drugs in the 12 months after treatment.

Time point	Sample size*	Continuous abstinence rate
1 month	147	73%
3 months	120	67%
6 months	119	67%
12 months	104	63%

<sup>\*</sup> Sample sizes reflect participants who completed the survey at admission and each of the corresponding time points.

What it is: The percentage of participants who reported not using alcohol or drugs.

How it was measured: At follow-up, participants were asked: Since you left Homewood, about [1, 3, 6 12] months ago, have you ... Had any alcohol, used any marijuana, any forms of cocaine, any stimulants other than cocaine, any sedatives, any heroin or heroin mixed with other drugs, any methadone, any opioids other than heroin, any inhalants, or any other drugs.

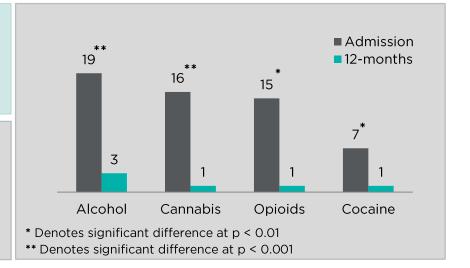
What the data say: The proportion of participants who reported being completely abstinent from alcohol and drugs ranged from 75% at 1 month after treatment to 63% at 12 months.



#### **Substance use**

# INDICATOR: NUMBER OF SUBSTANCE USE DAYS

The average number of substance use days in the past 30 days decreased from admission to 12 months after treatment.



What it is: The average number of days on which participants used alcohol, cannabis, opioids or cocaine.

How it was measured: At admission, participants were asked: During the 90 days before you came to Homewood, on approximately how many days did you have at least one drink containing alcohol, any cannabis, any opioids other than heroin, or any forms of cocaine? The number of days was then divided by three so to compare more directly with the number of days used at 12-months.

At 12-months, participants were asked: During the past 30 days, on approximately how many days did you have at least one drink containing alcohol, any cannabis, any opioids other than heroin, or any forms of cocaine?

What the data say: The average number of days used significantly decreased from admission to 12 months after treatment for alcohol (n = 81, p < 0.001), cannabis (n = 29, p < 0.001), opioids (n = 16, p < 0.01), and cocaine (n = 20, p < 0.01).



# INDICATOR: PERCEIVED MENTAL HEALTH STATUS

68% reported good, very good or excellent mental health 12 months after treatment compared to 49% at admission.



What it is: The percentage of participants who rated their general mental health as excellent, very good, good, fair, or poor.

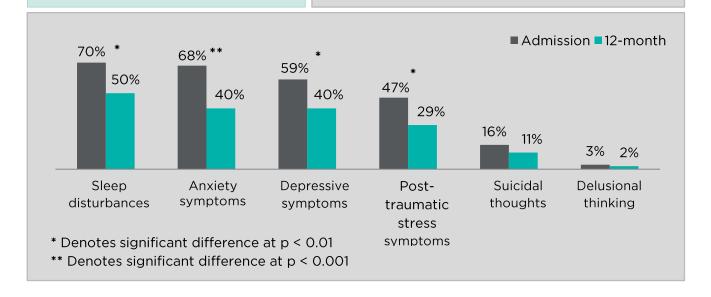
**How it was measured:** At admission and 12 months after treatment, participants were asked: In general, would you say your mental health is...? (excellent, good, very good, fair, poor).

What the data say: The percentage of participants who rated their mental health as excellent, very good or good significantly increased (p < 0.01) from admission to 12 months after treatment. Refer to Appendix B for further data breakdown.



## INDICATOR: PRESENCE OF MENTAL HEALTH PROBLEMS

Overall, **fewer** participants experienced **significant problems** with their **mental health** 12 months after treatment.



What it is: The percentage of participants who reported experiencing any significant\* mental health problems during the past 30 days related to sleep disturbances, depression, anxiety, post-traumatic stress, suicidal thoughts and delusional thinking.

\* Problems were described as significant when they were experienced for two or more weeks, when they kept coming back, when they kept one from meeting responsibilities or when they made one feel like they could not go on.

**How it was measured:** At admission and 12 months after treatment, participants were asked: During the past 30 days, have you had significant problems with....? (Symptoms related to sleep disturbances, depression, anxiety, post-traumatic stress, suicidal thoughts and delusional thinking)

What the data say: The percentage of participants who experienced mental health problems significantly decreased for depressive symptoms (p < 0.01), anxiety symptoms (p < 0.001), sleep disturbances (p < 0.01) and post-traumatic stress symptoms (p < 0.01) from admission to 12 months after treatment.

The percentage of participants who experienced suicidal thoughts (p = 0.371) and delusional thoughts (p = 0.655) did not significantly decrease from admission to 12-months after treatment.



#### INDICATOR:

## NUMBER OF MENTAL HEALTH PROBLEMS

Number of **mental health problems** decreased from **2.6** to **1.6**, a **38**% decrease.

What it is: The average number of mental health problems reported by participants during the past 30 days.

How it was measured: The total number of mental health problems reported by each participant at admission and 12 months after treatment was calculated and averaged across participants.

What the data say: The average number of mental health problems reported by participants decreased significantly (p < 0.001) from admission to 12 months after treatment.



### **Occupational performance**

## INDICATOR: RETURN TO WORK RATE

**72%** of participants who reported being employed at admission **returned to a job** within 12 months after completing treatment.

What it is: The percentage of participants who reported being employed at admission and returned to a job within 12 months after completing treatment.

#### How it was measured:

At admission, participants were asked: What is your current employment situation? (Employed but absent from work, Temporarily laid-off, Job seeker, Future Starter or Not in the labor force).

At 12 months, participants were asked: What is your current employment situation? (Employed at work, Employed but absent from work, Temporarily laid-off, Job seeker, Future Start or Not in the labor force).

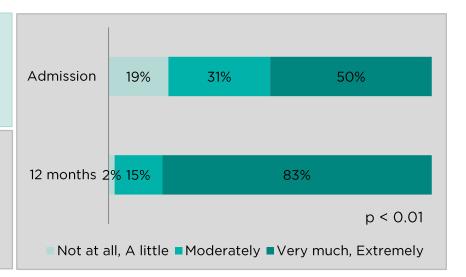
What the data say: Of participants who reported being employed at admission, 72% had returned to a job within 12 months after completing treatment.



### **Occupational performance**

# INDICATOR: ABILITY TO MEET RESPONSIBILITIES AT WORK

**83%** reported meeting responsibilities at work very much or extremely 12 months after leaving treatment compared to 50% at admission.



What it is: The percentage of participants who rated their perceived ability to meet regular responsibilities at work as an extreme amount, very much, a moderate amount, a little or not at all.

#### How it was measured:

At admission, participants were asked: During the past 90 days before you came to Homewood, to what degree do you feel you have been able to meet your regular responsibilities at work?

At 12 months, participants were asked: During the past 30 days, to what degree do you feel you have been able to meet your regular responsibilities at work?

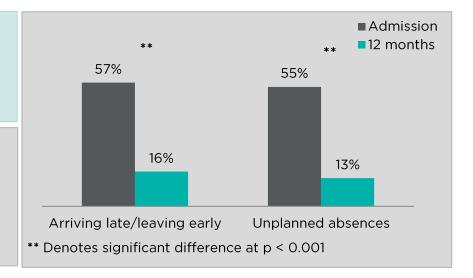
What the data say: The percentage of participants who rated their ability to meet responsibilities at work as very much or extremely significantly increased (p < 0.01) from admission to 12 months after treatment. Refer to Appendix C for further data breakdown.



### **Occupational performance**



Overall, **fewer** participants reported **problems** with their **attendance at work** 12 months after treatment.



What it is: The percentage of participants who arrived late/left early from work, or had any unplanned absences from work.

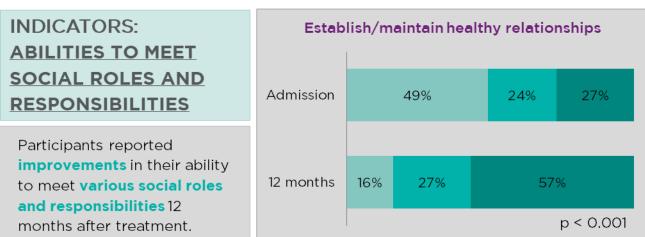
#### How it was measured:

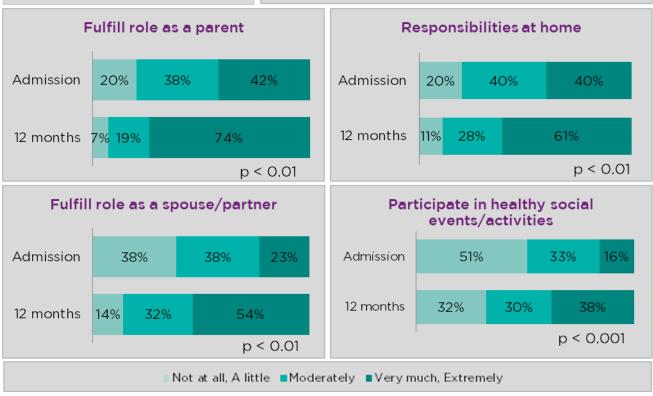
At admission, participants were asked: During the past 90 days before you came to Homewood, have you come in late or left early from work? Had any unplanned absences from work?

At 12 months, participants were asked: During the past 30 days, have you come in late or left early from work? Had any unplanned absences from work?

What the data say: The percentage of participants who had problems with attendance at work significantly decreased for arriving late and leaving early from work (p < 0.001), and having any unplanned absences from work (p < 0.001) from admission to 12 months after treatment.

### Social relationships and functioning





What it is: The percentage of participants whose perceived ability to establish/maintain healthy relationships, fulfill role as a parent, meet responsibilities at home, fulfill role as a spouse/partner and participate in healthy social events/activities was extremely, very much, moderately, a little, or not at all.



### Social relationships and functioning

#### How it was measured:

At admission (during the past 90 days before coming to Homewood) and 12 months after treatment (during the past 30 days), participants were asked: During the [90/30 days], to what degree to you feel you have been able to...

- ... participate in social roles and responsibilities?
- ... meet your responsibilities at home?
- ... fulfill your role as a spouse/partner?
- ... fulfill your role as a parent?
- ... establish or maintain healthy relationships with friends, coworkers, etc.?

What the data say: The percentage of partcipants who were extremely or very much able to fulfill social roles and responsibilities significantly increased for establishing/maintaining healthy relationships (p < 0.001), fulfilling role as a parent (p < 0.01), meeting responsibilities at home (p < 0.01), fulfilling role as a spouse/partner (p < 0.001), and establishing/maintaining healthy relationships (p < 0.001) from admission to 12 months after treatment. Refer to Appendix D for further data breakdown

## Physical health



77% reported meeting good, very good or excellent physical health 12 months after treatment compared to 57% at admission.



What it is: The percentage of participants who rated their general physical health as excellent, very good, good, fair or poor.

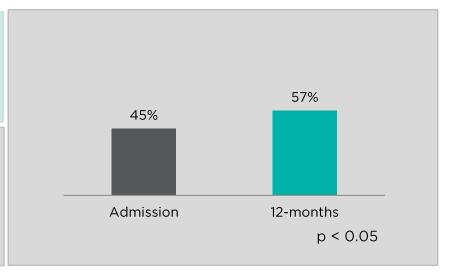
**How it was measured:** At admission and 12 months after treatment, participants were asked: In general, would you say your physical health is...?

What the data say: The percentage of participants who rated their general physical health as excellent, very good or good significantly increased from admission to 12 months after treatment (p < 0.001). Refer to Appendix E for further data breakdown.

## Physical health

# INDICATOR: PARTICIPATION IN PHYSICAL ACTIVITY

**57%** met the Canadian Physical Activity Guidelines 12 months after treatment compared to 45% at admission.



What it is: The percentage of participants who reported meeting or exceeding the Canadian Physical Activity Guidelines that recommend participating in at least 150 minutes of moderate to vigorous physical activity per week, in bouts of 10 minutes or more.

**How it was measured:** At admission and 12 months after treatment, participants were asked: During the past 7 days, how many days did you participate in moderate or vigorous physical activity? How much time did you usually spend doing moderate or vigorous activity on one of those days?

Participants were categorized into less than 150 minutes per week or 150 minutes per week or more.

What the data say: The percentage of participants who reported meeting or exceeded the Canadian Physical Activity Guidelines significantly increased from admission to 12 months (p < 0.05).



### Quality of life and life satisfaction



79% reported meeting good, very good or excellent quality of life 12 months after leaving treatment compared to 53% at admission.



What it is: The percentage of participants who rated their overall quality of life as excellent, very good, good, fair or poor.

**How it was measured:** At admission and 12 months after treatment, participants were asked: Overall, how would you rate your quality of life?

What the data say: The percentage of participants who rated their overall quality of life as excellent, very good or good significantly increased from admission to 12 months after treatment (p < 0.001). Refer to Appendix F for further data breakdown.

### Quality of life and life satisfaction

## INDICATOR: PERCEIVED LIFE SATISFACTION

Participants reported **increased satisfaction** in many **areas of life** 12 months after leaving treatment.





### **Quality of life and life satisfaction**

What it is: The percentage of participants who rated their satisfaction with intimate relationships, family relationships, friends, happiness, living situation, how life is going so far, work/school situation and recreation/social activities as very satisfied, satisfied, mixed, dissatisfied or very dissatisfied.

**How it was measured:** At admission and 12 months after treatment, participants were asked: Currently how satisfied are you with...

- ... the level of intimate relationships?
- ... your family relationships?
- ... your friends?
- ... your general level of happiness?
- ... where you are living?
- ... how life is going so far?
- ... your work or school situation?
- ... recreation and social activities in your life?

What the data say: The percentage of participants who rated their satisfaction as satisfied or very satisfied significantly increased for family relationships (p < 0.001), friends (p < 0.05), how life is going so far (p < 0.001), work/school situation (p < 0.01), happiness (p < 0.001), and recreation/social activities (p < 0.001) from admission to 12 months after treatment.

The percentage of participants who rated their satisfaction as satisfied or very satisfied did not significantly increase for intimate relationships (p = 0.09) or living situation (p = 0.3916) from admission to 12 months after treatment.

Refer to Appendix F for individual category totals for further data breakdown.

#### APPENDIX A: OVERVIEW OF TREATMENT PROGRAM

Addiction Medicine Service (AMS) is a large, 105-bed, inpatient addiction treatment program situated at Homewood Health Centre – a large mental health and addiction treatment facility – in Guelph, Ontario. The voluntary, semi-private program provides primarily group-based treatment to adults (19+) addicted to alcohol and/or drugs, as well as specialized programing for co-occurring post-traumatic stress disorder (PTSD). At the time of this study, the typical length of treatment was 35 days and 56 days for treatment of concurrent PTSD. Treatment was traditionally abstinence-based and comprised of medical stabilization, assessment, recovery-oriented education, skills training, and 12-step facilitation provided by an interdisciplinary team of health professionals. Continuing care planning was a standard component of the discharge process and included referral to professional outpatient services (e.g., weekly, group-based support; individual counselling) and/or ongoing involvement in community-based mutual support groups (e.g., 12-step groups).

#### APPENDIX B: MENTAL HEALTH DATA BREAKDOWN

	Time point	Poor	Fair	Good	Very good	Excellent
Perceived mental	Admission	27%	24%	33%	14%	2%
health	12-months	11%	21%	30%	30%	8%

## APPENDIX C: OCCUPATIONAL PERFORMANCE DATA BREAKDOWN

	Time point	Not at all	A little	Moderately	Very much	Extremely
Ability to meet	Admission	4%	15%	31%	35%	15%
responsibilities at work	12-months	2%	0%	15%	52%	31%

## APPENDIX D: SOCIAL RELATIONSHIPS AND FUNCTIONING DATA BREAKDOWN

	Time point	Not at all	A little	Moder- ately	Very much	Extreme- ly
Establish/maintain healthy	Admission	8%	39%	23%	24%	4%
relationships	12-months	1%	15%	27%	45%	16%
Fulfill role as a parent	Admission 12-months	9% 3%	12% 4%	38% 19%	38% 55%	4% 19%
Meet	Admission	2%	18%	40%	33%	7%
responsibilities at home	12-months	1%	10%	28%	45%	16%
Fulfill role as a	Admission	8%	31%	38%	20%	3%
spouse/partner	12-months	2%	12%	32%	46%	8%
Participate in healthy social events/activities	Admission 12-months	27% 11%	24% 21%	33% 30%	14% 30%	2% 8%

#### **APPENDIX E: PHYSICAL HEALTH DATA BREAKDOWN**

	Time point	Poor	Fair	Good	Very good	Excellent
Perceived physical	Admission	11%	32%	34%	18%	5%
health	12-months	7%	15%	44%	28%	6%

## APPENDIX F: QUALITY OF LIFE AND LIFE SATISFACTION DATA BREAKDOWN

	Time po	oint Poor		Fair	Good	Very good	Excellent
Quality of life	Admission		19%	28%	35%	16%	2%
	12-mont	hs	6%	15%	32%	38%	9%
Life satisfaction domain	Time point	Very dis- satisfied		Dis- satisfied	Mixed	Satisfied	Very Satisfied
Family	Admission	8	%	17%	33%	24%	18%
relationships	12-months	6	%	4%	23%	40%	27%
Friends	Admission 12-months	6% 3%		18% 6%	28% 28%	28% 43%	20% 20%
How life is	Admission	13%		20%	45%	19%	3%
going so far	12-months	5%		7%	29%	37%	22%
Work/school situation	Admission 12-months	16% 10%		16% 9%	34% 24%	23% 35%	11% 22%
General level of	Admission	18	3%	26%	41%	12%	3%
happiness	12-months		%	14%	27%	35%	18%
Recreation/ social activities	Admission 12-months	15% 2%		31% 22%	34% 25%	16% 39%	4% 12%
Intimate relationships	Admission 12-months	25% 15%		21% 18%	19% 24%	23% 27%	12% 16%
Where you are living	Admission 12-months	5% 3%		7% 6%	17% 20%	31% 35%	40% 36%