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AB 337

Opposition to DHS 70 didn't show up until AB 886 was introduced late in the last session. It has been reintroduced as AB 287 and is awaiting a hearing by this committee.

I believe that the push back on DHS 70 is due to a misunderstanding of how AB 287 and DHS 70 work together. I think initially people saw the words "loan program" thought all of the AB287 appropriation was to be used funding loans to loosely organized groups. That is not true. AB 287 funds staff to provide technical assistance in opening recovery homes. Staff, that is accountable as any other vender doing business with the state. It also provides \$100,000 to be used for security deposits and first month's rent to be paid back by new houses. It is earmarked to differentiate funds from staff costs.

Thru the committee process the State can decide to:

- 1)Manage the loan fund itself,
- 2)Require the vender to manage the account and send a monthly status report, Thereby offloading all of the costs of administration to the vender.
- 3)Give grants to new houses with no repayment,
- 4)Eliminate that part of the bill.

As we tackle the opiate crisis, Recovery Housing is identified as a critical partner with the state treatment providers to decrease both treatment and criminal justice recidivism. Sober housing doubles treatment program outcomes with about 10% of the expense. But they go hand in hand.

States that used this loan tool 20 years ago have turned that money over several times to build a network of recovery beds that offer a long term, low cost solution to addiction treatment.

It does not make sense to repeal DHS 70 until AB 287 has had a public hearing to determine the need for such a program. The tool has been on the books for almost 30 years. Now we could use it and there is a push to eliminate it. That doesn't make sense.

For more information contact

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OXFORD HOUSES BY STATE

The chart below shows Oxford Houses and Oxford House beds by state. It also notes whether or not Oxford House receives any financial support to help start and maintain Oxford Houses in a state.

- The most Oxford Houses exist in states where the state supports a start-up loan fund and outreach support. Washington, North Carolina and Oregon are home to the most Oxford Houses and each of these states provides start-up loan funds and support for OHI-trained outreach workers who start new Oxford Houses and assist existing Oxford Houses. Agreements with states and localities in FY 2015 totaled about \$5.2 million. Oxford House also received voluntary contributions of over \$450,000 in FY 2015 from individual Oxford Houses.
- Both start-up loans and outreach support are critical for expansion. National expansion was fostered by 1988 Anti-Drug Abuse Act enacted by the 100th Congress at the end of the Reagan Administration. That Act required states to establish \$100,000 start-up loan funds to make \$4,000 start-up loans to groups of six or more recovering individuals to rent a house using the Oxford House model. The loan fund requirement has since become discretionary but some states still provide the funds. Oxford House residents themselves pay back the loans (usually \$4-6,000) over two years. Minimal support for outreach and loans makes all the difference.

State	#Houses	#Beds	Contract
Alabama	1	8	None
Alaska	4	42	None
Arizona	0	0	None
Arkansas	3	23	None
California	6	47	None
Colorado	33	230	Daniels
Connecticut	8	73	Price
Delaware	67	494	State
Florida	3	29	None
Georgia	1	8	None
Hawaii	37	321	State
Idaho	0	0	None
Illinois	51	361	State
Indiana	0	0	None
Iowa	6	49	None
Kansas	80	681	State
Kentucky	6	44	State
Louisiana	102	744	State
Maine	11	92	None
Maryland	51	397	None
Massachusetts	9	85	None
Michigan	5	49	Private
Minnesota	0	0	None
Mississippi	20	131	State
Missouri	42	334	State
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State	#Houses	#Beds	Contract
Montana	0	0	None
Nebraska	33	233	State
Nevada	1	10	None
New Hampshire	1	6	None
New Jersey	130	1041	State
New Mexico	18	128	State
New York	17	157	Private
North Carolina	210	1613	State
North Dakota	0	0	None
Ohio	1	8	None
Oklahoma	83	726	State
Oregon	172	1362	State
Pennsylvania	47	358	Counties
Rhode Island	0	0	None
South Carolina	34	235	State
South Dakota	0	0	None
Tennessee	41	298	State
Texas	168	1271	State
Utah	2	19	None
Vermont	4	32	None
Virginia	123	1007	State
Washington	268	2239	State
W. Virginia	16	116	State
Wisconsin	23	173	None
Wyoming	2	14	None
DC	29	249	State

Visit the Oxford House website: www.oxfordhouse.org

Oxford House World Services • 1010 Wayne Avenue, Suite 300, Silver Spring, Maryland • Telephone 301-587-2916

Oxford House™

Helping alcoholics, drug addicts and those with co-occurring mental illness

Saving Money – Saving Lives **The Low-Cost Solution For Long-Term Recovery**

WHAT ARE OXFORD HOUSES?

Oxford Houses are self-run, self-supported recovery houses. In March 2016 there are over 2,000 houses and 15,500 beds. Each Oxford House is home to recovering alcoholics, drug addicts and those with co-occurring mental illness. Each house is a rented ordinary single-family house. The residents of each house are the same sex and receive a no-cost charter from Oxford House, Inc. [OHI] – the 501[c][3] national umbrella organization for all Oxford Houses. The charter has three conditions: (1) the group must be democratically self-run following the Oxford House Manual®; (2) the group must be financially self-supporting; and (3) the group must immediately expel any member who returns to using alcohol or illicit drugs.

HOW DOES IT WORK?

Each Oxford House is autonomous. Residents govern themselves, electing House officers (with term limits), holding regular House meetings and following disciplined parliamentary procedures. Residents work and pay their own rent and household expenses. There are no time limits on residency so residents can stay long enough to build 'comfortable' sobriety. Furthermore, the system encourages the development of leadership skills and self-efficacy. The result is that more than 80 percent of Oxford House residents remain clean and sober for the long term despite the fact that many of them come from backgrounds that have included lengthy alcohol and drug use, periods of homelessness, and incarceration. Slowly, but surely, residents learn or relearn values and responsible behavior.

HOW DO WE KNOW IT WORKS?

Evidence-based research has demonstrated that the Oxford House program works. Oxford House, Inc. and the residents of Oxford Houses value transparency and welcome research into the program. Supported by grants by NIAAA and NIDA for the study of recovery, DePaul University in Chicago has found remarkable recovery success from Oxford House living. Their findings prompted SAMSHA to list Oxford House™ on the National Registry of Evidenced-based Programs and Practices.

HOW DO NEW OXFORD HOUSES GET STARTED?

In AA, it's said that all that's needed to start a new AA meeting is two recovering people with a resentment and a coffee pot. Starting an Oxford House is a little more complicated, but, all it takes is a few recovering people, the support of those who understand the system, and minimal financing. Most new Oxford Houses are started with the help of Oxford House outreach workers (all of whom are recovering individuals who have lived in an Oxford House) and a start-up loan to the new House that the residents pay back over a couple of years. Once started, Oxford Houses are autonomous and run themselves with very little monitoring. Most Oxford Houses belong to Oxford House chapters. Oxford House residents' participation at state workshops and at the annual Oxford House World Convention helps to assure quality control. These get-togethers also foster community-building and education.

WHAT IS NEEDED TO GET MORE OXFORD HOUSES?

The major barrier to the creation of more Oxford Houses is the lack of start-up funding. As noted on the chart on the back page, the most Oxford Houses exist in states where the state (or a locality) contracts with Oxford House to provide funding for outreach workers and establish a start-up loan fund. Foundations, treatment providers and drug courts also provide funding. Because of the structure of the program, the cost per bed is much, is much lower than for traditional programs. Furthermore, recovery results are strong. In today's budget-strapped environment, Oxford Houses provide the low-cost way to improve recovery outcomes.