

Project Detour

Final Report



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Project Detour

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Introduction

In March 2019, the OMNI Institute partnered with Community Health Partnership in conducting a qualitative evaluation of Project Detour (PD), a program that empowers women to overcome alcohol and opioid use disorders, homelessness, and involvement with the criminal justice system. The purpose of this report is to share the final evaluation findings from focus groups and key informant interviews with various PD stakeholders.

Methods

Data Collection

In collaboration with Community Health Partnership and PD staff, OMNI developed two semi-structured qualitative data collection guides; one for PD clients and one for staff and referral sources for PD. Qualitative data collection encompassed two focus groups and two key-informant interviews. Client data were collected via one focus group, which took place in June 2019, with both current clients as well as client graduates of the program. Please refer to the Client Demographics section (see page 2) for additional details. In July and August 2019, OMNI conducted a series of two key-informant interviews and one focus group with PD staff and with PD referral sources affiliated with the 4th Judicial District Problem Solving Courts in Colorado Springs. Additionally, OMNI created consent forms and a short demographic survey to support data collection. Focus group and key-informant interview questions covered the following content:

- Client Focus Group: overall experience with the program from intake to graduation, perceptions related to housing, program impact and outcomes, involvement in the recovery community
- Referral Source Focus Group and Interviews: program referral selection process, perception of PD, program impact and outcomes

Data Analysis

OMNI conducted a qualitative, thematic analysis of focus group and key-informant interview data. The data were analyzed guided by the development of key themes and a standard coding structure. Analyses emphasized the impact of housing on client engagement in the program and outcomes, as well as other critical aspects of program implementation.

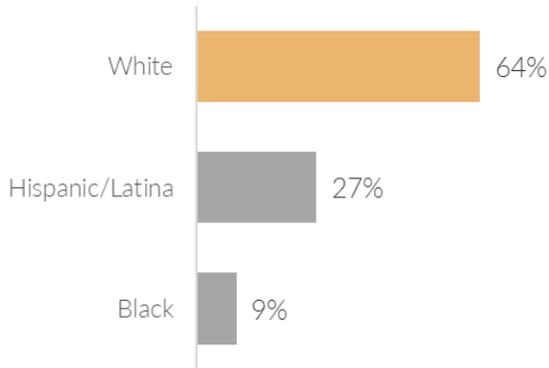
Participant Recruitment

Participant recruitment for this effort was solely based on convenience sampling methods. All PD clients, both current and graduates, were invited to participate in the focus group. Demographic information for this group is outlined below. Participating referral sources and staff were identified by the Chief Executive Officer at Community Health Partnership as well as PD staff. OMNI sent an email requesting their participation. Represented in this sample were the PD Coordinator, the magistrate of Recovery Court, two Recovery Court probation officers, a Recovery Court Coordinator, and a former Recovery Court Coordinator who was involved in the development of PD as a pilot program.

Client Focus Group Participant Demographics

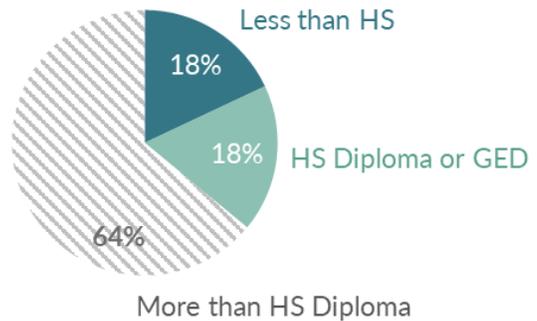


The majority of participants identify as white and not Hispanic/Latina.

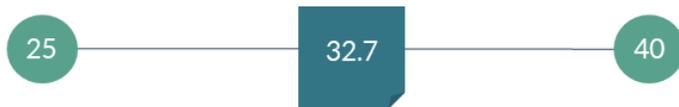


91%
have full- or part-time employment.

The majority of participants have education beyond a high school degree.

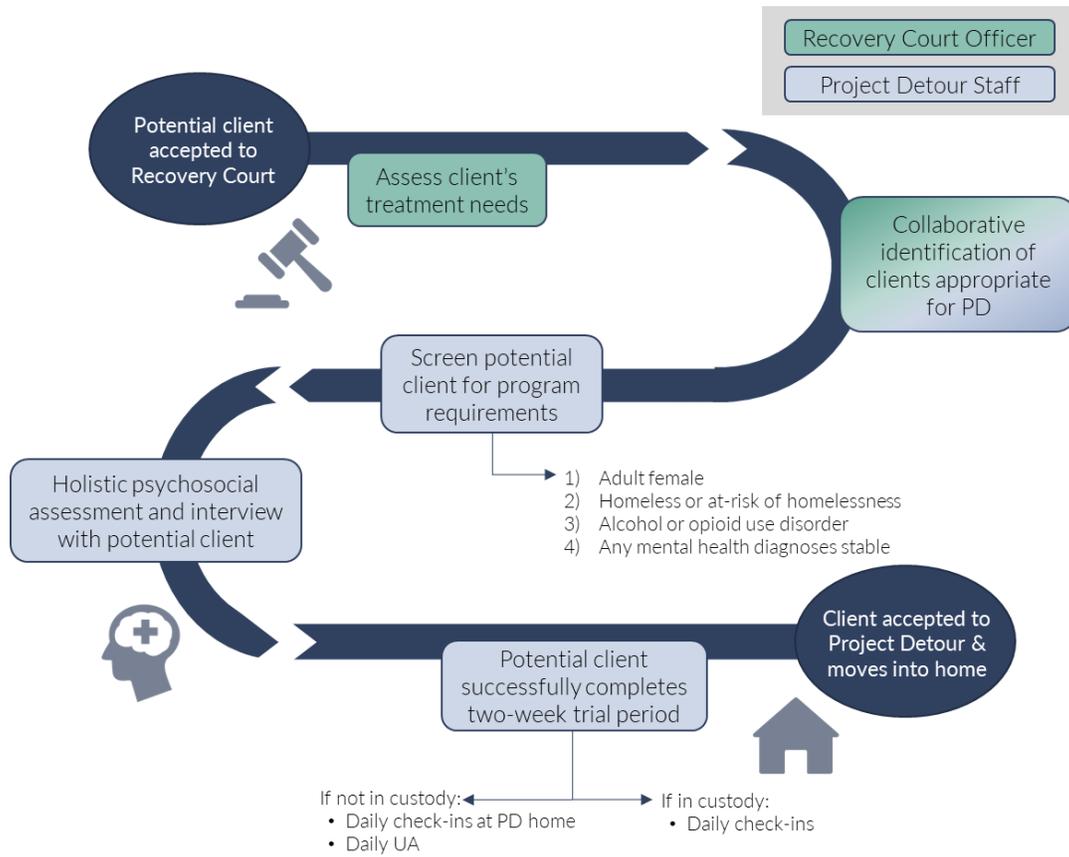


The average age of participants is 32.7 years.

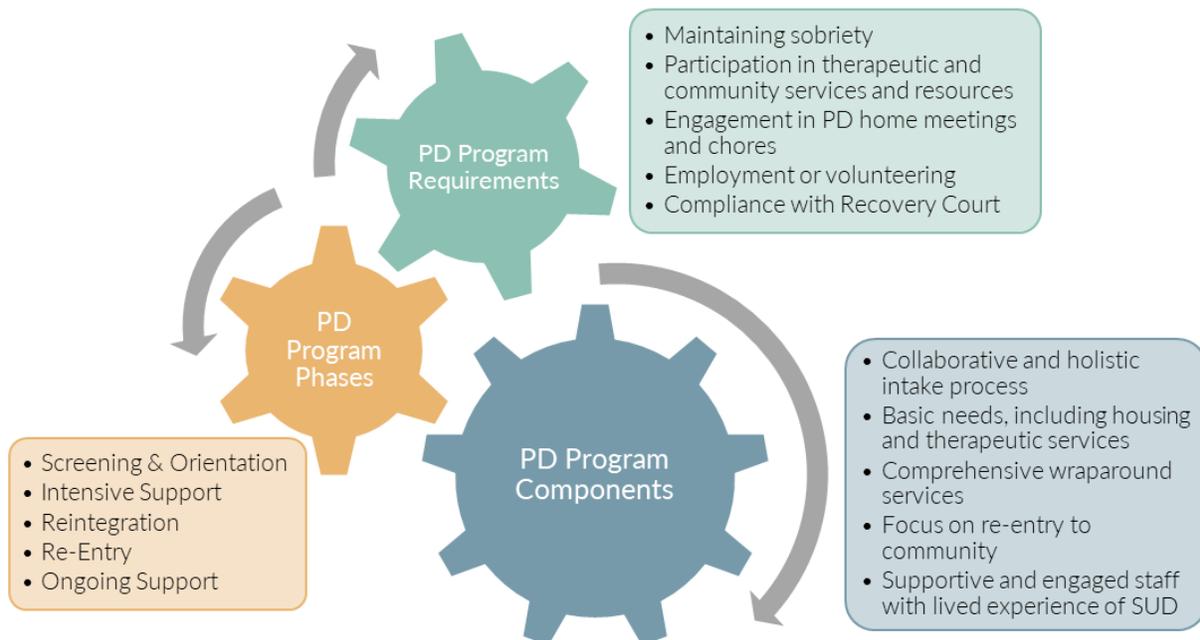


Project Detour Program

Intake Process Overview



Program Structure Overview



Basic Needs Inclusive of Housing & Therapeutic Services Foster Recovery

Housing

Provision of basic needs to ensure program success is a core component of PD, and high-quality housing surfaced as foundational to this effort. Referral sources described offering safe and affordable housing to this population as a step toward addressing the community-wide need for such services. Clients appreciate the physical safety features of the housing, particularly given the insecure location. These features include locks on all doors, an alarm system, and a gate surrounding the house. Clients also noted aspects of a two person-per-room housing layout, which offers more space and comfort and is less traumatizing compared to jail or other sober homes. In the program, additional basic needs of PD clients are also addressed. PD staff identify and provide the services and supplies immediately required to foster the sense of safety described by multiple clients.



"Housing is paramount. If you don't have a safe place to live, you're not going to be thinking about your recovery, you're going to be thinking about survival. Period." - Referral Source

"They were able to hook us in with any resources that we need, so let's get that fixed first... This was important. This was a cushion. This was a safe place. This was home. We were okay here." - PD Client

"You're actually going to have a nice, healthy place for women to live, people to live."
- Referral Source

"[Housing is] the most important part. About 95% of our clients come in self-reporting being homeless." - Referral Source

Basic Needs

Consistently, both referral sources and clients discussed ways the provision of basic needs, including housing and customized therapeutic services, decreases stress and anxiety, resulting in trust, vulnerability, and enhanced commitment to recovery. PD offers clients a wide range of basic needs, including food, transportation, clothing, access to medical care and childcare as needed, and personal hygiene products. Qualitative respondents identified several key ways the provision of stable housing and basic needs are a prerequisite for successful substance use disorder treatment and recovery. First, it enables clients to allocate time and energy toward achieving and maintaining sobriety rather than securing basic needs. Second, with basic needs met, clients can focus on sobriety and self-sufficiency. PD teaches clients to independently secure their basic needs in a healthy way that minimizes risk of returning to old environments, social networks, or habits that result in relapse or incarceration.

"For the first three months they buy your groceries, they give you your bus pass, just all of your basic needs are met, period. There's no need to have to go hustle." - PD Client

"[Here at PD] I know have a house and a shower. You walk in and every single need is met, every box is checked and just like, welcome home." - PD Client

"What I offer them is a safe, sober environment to come and live... It gives them a safe place to be. I let them know that we offer them a bus pass to help them get back and forth to all their appointments, and that we can help them with food, so they're not worried about having to start out looking for work right away... I ask them if they're going to need clothes, I go pick them up from jail when they get out, if they need to be picked up somewhere with their belongings I go and do that. Just whatever they need, basically." - PD Staff

"And [having housing and basic needs met is] helpful when you are looking for a job, when you are trying to better yourself, you can come home... It's having, not only support, but a roof over your head. Not only a roof over your head but they provide food for the first ninety days. That's huge to an addict in recovery." - PD Client

Therapeutic Services

All qualitative respondents identified the provision of individualized therapeutic services as integral to client recovery and ultimate success in PD. Therapeutic services are mandated through the Recovery Court and PD staff work with clients to ensure appropriate services are offered and to identify additional services that may be indicated. To support this program aspect, PD house meetings are led by staff with a Masters in Social Work, the PD Program Manager is a Certified Addictions Counselor, and PD Staff receive training as Peer Recovery Coaches.

This perspective acknowledges the importance of utilizing a trauma-informed approach to offer a wide array of clinically indicated, customized therapeutic services selected to benefit each client, individually. At PD, these services are further supported by intensive case management, especially in early phases of the program where therapeutic support is as critical to success as other basic needs, such as the provision of food or housing. PD's approach toward case management is based on an empowerment model, which entails a collaborative process to determine service options the to optimize meeting client needs to promote safety, supportive, and effective outcomes.

"Every woman here needs more help than just stopping the drugs or alcohol. It's to learn how to live again and learn how to survive in a more I guess acceptable way, the way that other people do, but along with the tools, with the counseling." - PD staff

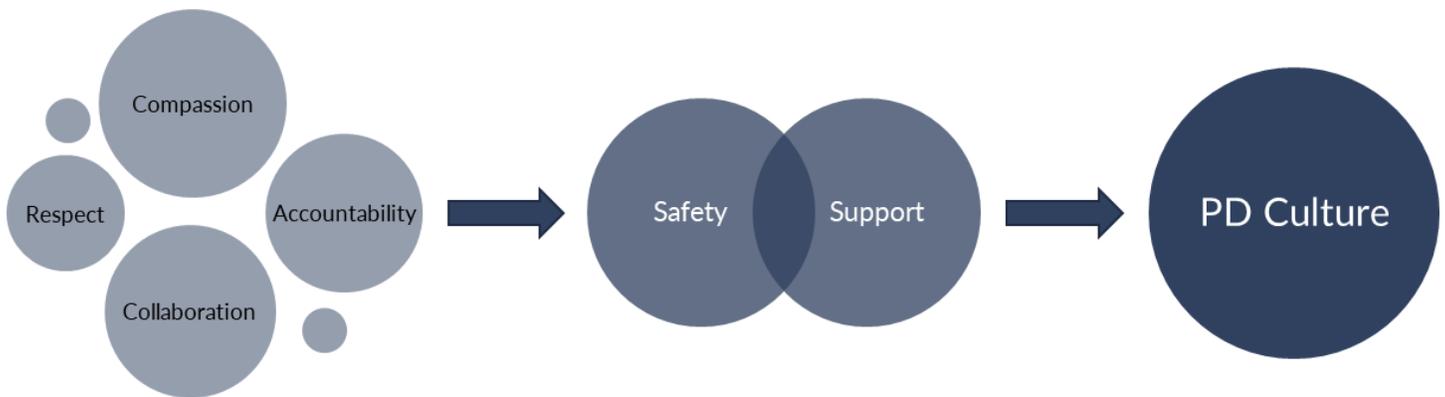
"Case management with [PD Staff] [is the single aspect of the program that is most successful in helping women meet their treatment and recovery goals]... I think case management is huge." - Referral Source

"If you don't provide help and support, people will not be able to move forward... Dealing with the trauma, getting inside a safe and secure group, and allowing them to work it over a period of time." - Referral Source

Beyond a starting point for progress toward recovery, the provision of basic needs, including safe housing and trauma-informed, customized therapeutic services, also lays a solid foundation for the thematic elements that comprise PD's unique culture.

Project Detour Culture

The safe, supportive, and home-like culture of PD is evident to staff, clients, and referral sources alike. This culture begins with establishing safety during the intake process, and is reinforced with ongoing support throughout the program. Qualitative respondents described how qualities of compassion, respect, accountability, structure, and stability underpin the safety and support that are fundamental to the unique culture embodied by PD.



The safety and support exemplified in PD culture afford clients the stability necessary to address recovery challenges, participate effectively in the program, and integrate into the broader recovery community. Ultimately, immersion in PD culture provides clients with a sense of agency and empowerment within their recovery process. Clients in particular noted the active role they play in creating a successful culture, which both reinforces sobriety for clients who have been involved in the program longer and models recovery for newer clients. This cycle thereby creates a sustainable, recovery-oriented culture that all clients contribute to and benefit from.

“The culture in here [at PD] what you feel right now, you're not going to find that in another sober house or in another program. You're just not going to.” - PD Client

“I think that's kind of the culture and the attitude we absolutely have in here [at PD]. We're winners. Let's do this.” - PD Client

“The first gen[eration] that was here and the way the house meetings kind of functioned, it was like, “This is the bar, and you're going to meet this bar or we're not going to get along.” That's what that conversation looked like, but I think it was awesome because the second gen[eration] didn't get offended by it. They strived, right. They were like, ‘Okay, this is how we're supposed to behave. This is what we're striving for and you just continue.’ Now, I see it happening with the third gen[eration] that just came in and everybody's just being productive.” - PD Client

The culture of safety and support is grounded in the respect, compassion, accountability, structure, and stability that is established and embodied by PD program components as well as the attitude and behaviors of staff.

Compassion & Respect

Qualitative respondents noted how compassion and respect are foundational elements leading to the safety and support woven throughout PD's program. Beginning with the intake process, PD staff consistently demonstrate compassion and respect in their language and actions as a way to teach clients the PD culture. As clients progress through the program, compassion and respect are continually modeled and expected in interactions among clients and staff.

"[PD Staff] especially is very good at treating our participants with a great amount of respect and kindness. That goes a really long way with the people who live in the house." - Referral Source

"In some of the other sober homes, it's how they're talked to that really affects our clients. That's a major thing at Project Detour that they are treated with respect." - Referral Source

PD's commitment to compassion and respect is further exemplified in the psychosocial assessment component of the intake process. While some other recovery programs administer an assessment with potential clients, PD's process is unique both in its thoroughness and the compassionate and respectful way PD staff acquire assessment information. PD staff acknowledge the difficulty individuals may have sharing extensive amounts of intimate, and potentially traumatic, information. Therefore, PD staff take steps to convey compassion and respect by offering options and support when possible. These efforts do not go unnoticed by clients, who observe how PD staff are attuned to their needs and experiences.

"Other homes, other programs I've been in ... they just take you. Whereas, here, there was a process. [PD Staff] interviewed us and got to know us." - PD Client

"I try to allow them to feel okay, get up, take a smoke break, go to the bathroom. I might ask them, 'Would you like to continue this another day?' Some of them say yes, some of them want to just get it all done." - PD Staff

Accountability & Structure

Along with compassion and respect, accountability and structure are crucial in creating PD's safe and supportive culture. At PD, this is achieved through a specific, phasic program structure, clear expectations and consequences, and a strong focus on readiness for change and the commitment required by this rigorous program.

Phasic Program Structure & Requirements

Participation in PD entails numerous program requirements including maintaining sobriety; attending recovery meetings and house meetings; participating in case management; attending therapy groups and counseling; completing house chores; connecting with state resources, such as food stamps and Medicaid; securing employment once sobriety is established and maintained; volunteering if not employed; and completing community service as court ordered.

All requirements are completed in program phases, which help clients track their progression and the expectations associated with each phase. Initial phases focus on recovery and mental health,

laying a solid foundation of stability and wellness until clients are ready to transition to the less structured phases that are focused on finding employment. While challenging and busy, clients acknowledge the initial need for structure to maintain sobriety and accountability for their success. PD's rules, particularly regarding communal living space and visitation, promote responsible and accountable behavior that support recovery and eventual reintegration into the larger community. Though some clients initially perceive rules as strict and unfair, they come to understand that the purpose is to ensure safety and sobriety, which is ultimately in their best interest.

"You're busy. [The day after I started the program] I was up the next morning on a bus going to stuff, but that's what normal people do and that's what this program is going to make you do. It makes you live normal again and puts you back in that frame of mind where you're normal again. You do what normal people do every day." - PD Client

"Even though [the structure and schedule] seem hard, I think the program is designed to force us to strive for our sobriety as hard as we strived for our addiction. I think it's designed to make us strive just as hard for something that is just as worth it for us, now that we're sober." - PD Client

"[Not allowing visitors] diminishes the risk of people that are coming in that don't live here. Let's just say that somebody's not sober. Well, here comes the dope stack, and it's risking the sobriety of every single body in here, so that's why it makes sense to me." - PD Client

Clients also describe valuing the structural consistency between PD and recovery groups like AA and NA, which further supports their recovery in multiple ways. First, PD intentionally mirrors its program structure, rules, and requirements with various components of AA or NA to establish consistency and stability that enables clients to feel less vulnerable and more capable of focusing on their sobriety. Second, PD requires participation in AA/NA, or equivalent meetings to ensure that clients spend most of their time engaged in the recovery process with little time for old patterns or habits to manifest. The consistent messages and requirements across PD and AA/NA reinforce sobriety efforts in multiple contexts, give clients a supportive structure and routine to sustain after program completion, and allow clients to establish healthy, sober, and stable relationships to foster a successful transition out of PD and into the broader community.

"The housing requirements are set up exactly as what they say in AA...The suggestions given in Alcoholics Anonymous, those are the same requirements that are here for us. They're forcing you to do it because they're trying to help you find out who you are sober, and we don't really grasp what's happening. Those rules are there for a reason because those are suggestions many years going back of many people that have recovered...They're there for a reason." - PD Client

Though PD's program is structured and rigorous, it also allows for some flexibility at the discretion of PD staff, which increases as clients phase through the program. In addition to rewarding clients for their progress, flexibility also maintains a culture of safety and support while communicating compassion and respect for individual client needs. A prime example of this can be found in PD's policies regarding length of stay, which is typically 12 months. All qualitative respondents acknowledged the many benefits of this timeframe, including time to adjust to the program structure and receive ongoing support. However, PD staff have also supported clients moving into their own housing before the 12-month mark to regain custody of their children. In these

situations, flexibility communicates that PD is invested in supporting client achievement of broader recovery goals and quality of life beyond adherence to PD's specific framework.

"Someone may come in and they're closed off. Some women come in and they're open book. Jane and Jill are on point and they're up and at it every day, and then the next girl takes three months to do what they did in two days." - PD Staff

"It's hard to have someone get better in six months... You have to be more calculated about the expectations of the situation when you're dealing with people. It can't be a box; it has to be fluid." - Referral Source

Clear Expectations

In order for PD structure to maintain the culture of safety and support as intended, there must be extensive clarity regarding expectations and consequences. Developing this clarity begins with obtaining informed consent from clients early in the intake process. Qualitative respondents all noted the importance of taking a hands-on and thorough approach to discussing program requirements and expectations. Clients in particular appreciated clear expectations and outcomes, even when the rules and requirements felt challenging. Setting early expectations paves the way for consistency and accountability throughout a client's time in the program.

"It was all laid out in a piece of paper, 'This is what we need. These are the requirements, and there you go.'" - PD Client

Accountability through Consequences

As clients progress in the program, PD staff acknowledge the crucial role that consistent accountability and structure play in maintaining the safe and supportive culture. In part, PD staff are effective in their roles because they successfully balance accountability and respect, exemplified by the high level of awareness and intention with which rules and boundaries are enforced.

"I think the most important through all of it... is that they know that that I understand and that I not only will be there for them as well as I can, but also that we do have rules and I will still follow the rules." - PD Staff

"I still have to enforce what needs to be done, and they understand that, because the way that I talk to them is not belittling. I don't talk down to them." - PD Staff

To maintain safety and security, clients are required to leave the PD home immediately when they experience a lapse or relapse. Clients may reengage with the program and move back in after achieving seven days of sobriety. Although this has impacted less than one-third of clients, referral sources describe this policy as a barrier to treatment and recovery, noting that clients will likely struggle to remain sober if they do not have a safe place to go. To offer support, PD clients who relapse typically complete their seven-day PD respite period in jail or with supportive friends or family to ensure safety and prevent more severe relapse. PD clients, however, identified the strict consequences for relapse as "essential" because they provide increased incentive to stay sober.

"We know the consequences when it comes to [relapse]... so that's part of the program, and I think that that's an *essential* part for the people that are in this house."
- PD Client

"Once they have a [lapse or relapse] and they have to be out of the program for that two weeks to a month and they don't have anywhere else to go. That's a real difficulty." - Referral Source

"I would say the requirement of being out of the house for a certain amount of time if someone has a relapse [is the single aspect of PD that is least effective in helping women meet treatment/recovery goals]. That's something that's unique to them...When you have somebody that [PD] is their home, that's the only place they have to live. You're basically asking someone to try and stay clean on the street who's just relapsed and that's next to impossible." - Referral Source

Focus on Readiness for Change & Commitment to Program

PD staff and referral sources recognize that a high level of readiness for change and commitment to treatment is necessary for clients to successfully adhere to PD's requirements and high expectations. Thus, client readiness and commitment is monitored during the intake process and throughout the program in various ways. PD staff prioritize the existing culture of safety and support by assessing for readiness and commitment, and by screening potential clients for violent offense charges, behavioral or interpersonal challenges, or frequent movement within recovery programs. PD staff also utilize their own peer perspective to inform their readiness assessment for the program, drawing on this experience to accept clients who indicate they will contribute to the established PD culture of safety and support.

"What I personally am looking for is a commitment and the readiness to make a change." - PD Staff

"Because of personal experience, I always ask them if they're tired physically, mentally and emotionally. Because if those three things do not match up, there's still that [thing] that's going to say, okay, I have one more run [toward substance abuse] in me. If you still think you can use again, then this is not the place for you." - PD Staff

"For me to look through that non-judgmental lens and understand that we didn't grow up to want to be addicts or alcoholics, there's a reason behind it. There's something in our lives that caused this reaction out of us... I mean just that knowledge of what I had to go through is my lens to these ladies. And I have hope for all of them. They can all do it. It is just a matter of when they are ready to do it." - PD Staff

As part of the intake process, PD requires that clients complete a two-week trial, including daily urinalysis confirming sobriety, to establish consistent contact with PD staff. For PD staff, potential clients' readiness and commitment are demonstrated during that two-week time. Clients referred repeatedly to the significance of this process in creating a successful program culture. From their perspective, ensuring participant commitment and readiness promotes a supportive environment and culture, demonstrates PD's commitment to client recovery over financial gain, promotes safety and support, and motivates clients to work harder because they understand they have been selected to participate in a high-standards program.

"That screening process is so important. I remember, [PD Staff] asked me, "Are you willing to sit in jail for another two weeks or thirty days before you commit a program?" I think there's a level of willingness that you need to have coming in here." - PD Client

“And she handpicked. You thank that screening process to really be picky about who they're selecting to come in and be part of this culture and to be part of this supportive recovery environment is really helpful.” - PD Client

“If the woman did not want to participate in Project Detour, we really didn't waste our time. We wanted people who wanted to be a part of this process and who wanted the extra help, but that extra help came with more requirements...So in essence, someone would be asking for extra work to do, so they had to be motivated.” - Referral Source

Despite the benefits of taking time to assess readiness and commitment, referral sources noted that potential clients are often not able to wait two weeks for recovery housing program placement. From their perspective, this requirement is a barrier to referring Recovery Court clients to PD, particularly if release from incarceration is contingent on beginning a treatment program.

"Some individuals choose not to wait for [the two-week trial period] and that's their choice. So that's one of the barriers to it, but we try to tell them that it's the best program they can get so it's worth the wait." - Referral Source

"The two-week wait in the very beginning is going to be an issue. We're working with addicts and so there's immediate gratification issues and impulse control issues. Most of them won't wait, and they're needing to get in somewhere immediately...I don't know if it changes the population of the people that are willing to wait." - Referral Source

Relational Stability

Underpinning the perpetuation of PD culture are the numerous ways support is provided to clients. Qualitative data analysis identifies three primary sources of the extensive support clients receive: PD staff, other PD clients, and the collaborative efforts of the Recovery Court and PD staff. The resulting wraparound support creates stable, consistent relationships that foster safety and support and further develop the PD culture that contributes to PD client success.

Support from Project Detour Staff

Qualitative respondents uniformly acknowledged the role that PD staff play in both program success and individual client success. Qualitative data indicated that the impact of the relationships clients build with PD staff throughout the program are transformative, citing the extent to which PD staff support their sobriety at every stage of recovery. These qualities enable a sense of cohesion and familiarity that helps clients achieve the required security, stability, and support for their success. Referral sources echoed clients in describing the crucial role that PD staff themselves play in the success of clients.

PD staff also noted how support garnered through authentic relationships with clients allows for increased insight into clients' needs and results in higher levels of support. Moreover, the consistent presence of PD staff generates a feedback process where clients can easily seek support and staff have enhanced time and proximity to clients to establish deeper relationships and gain insight into client needs.

"[Here at PD] they have a sincere interest in your recovery...It's because of the staff, too. The design is great, but [the staff] are what made it what it is. I can't imagine it with different people." - PD Client

"[PD Staff are] always here no matter what time of day, [or] at night. If you need something or you need a shoulder to cry on or anything, they're there. We have the same goal" - PD Client

"It just really takes a lot of getting to know them. By their actions, by their words, and just seeing their routines. So when there's something not right or on the spot, then whether I see it or my house manager sees it...so it's just like, 'So and so, she's been sleeping all day, or there's something not right.' And then we find out." - PD Staff

"Luckily my office is here on-site, and that is a tremendous difference... My office being here, I see them so often that you become aware of each other." - PD Staff

"They're like our family. They don't act as staff. Yes, if there needs to be some things that need to be addressed, then they have to do their job. They do it with love wholeheartedly, one hundred percent." - PD Client

"She's kind of like a mother to them and not all sober homes talk respectfully and that just really, really huge with our clients." - Referral Source

Another significant contributing factor enabling transformative support from PD staff is their unique perspective as peers, garnered through lived experience with substance use disorder. Personal experience enables staff to offer a dynamic and individualized blend of compassion, respect, and accountability to clients, which results in safety, support, and a mutual co-creation of the PD culture. Clients noted the value of staff's lived experiences as peers, describing strong feelings of safety and lack of judgement. Further, clients reported feeling inspired and hopeful by the success of PD staff in their recovery.

"It has reminded me of a lot of the things that happened to myself in my life, given me the compassion and understanding and the patience that I need to help these women get through things. Also, because of the things I had to go through with court system and DHS and recovery and everything, I know there's help out there for every situation. I wouldn't change my past for anything, because it's made me who I am to help these women." - PD Staff

"I also have a personal history with abuse, and I know all the things that I endured and had to go through to get where I am, and I just believe that everyone deserves a chance with the correct support and opportunities." - PD Staff

"She's not only been there but she is a success story. I looked at her every day and say to myself, "[PD Staff] can do it, I can damn sure do it, too." So, they are an inspiration." - PD Client

"Especially, when [PD staff] come from where you've been. They're not judging you. That's what makes you feel [safe]." - PD Client

Support Among Project Detour Clients

Because the women selected for this program have a higher level of readiness to achieve sobriety and recovery, they often can support and serve as example for one another in a unique way. This creates a cohesive group immersed in a culture of support and success. Although clients may encounter conflicts, going through a similar process allows them to understand one another, support one another through setbacks, serve as a source of inspiration, offer compassion, and celebrate successes. Many clients stated that engaging in supportive and mutually constructive relationships with other program participants helped them simultaneously realize the harmful qualities of their past relationships and learn the skills to engage with others in healthier and more meaningful ways. PD staff and referral sources also noted the importance of shared experiences among the clients, describing the mutual support, respect, accountability, and encouragement they provide each other.

“And it's nice that we're all in Recovery Court, so we all know the struggle we're in and how *hard* it is when you first get out [and] being so busy. It's great, having the same people here that you can turn to and know that somebody's here that's going to understand.” - PD Client

“We grew to love each other, and you can get close. We don't always get along with everybody, but we still want the best for this group of women.” - PD Client

“I think for me the transition of the lifestyle I was living in my addiction before Project Detour, and being embraced with true friends, true love, true care. It really shed light on the fact I had no friends before I got here. [There was] no support before I got here, nothing before I got here in any of those people. These women here are, and that was the transition for me.” - PD Client

Collaboration Among Recovery Court and Project Detour Staffs

Another layer of support contributing to the success of PD and its clients is the extensive collaboration between PD staff and Recovery Court staff. Consistent and open communication, mutual engagement, and information sharing create a culture of trust and teamwork that fosters PD program success and improves the client experience.

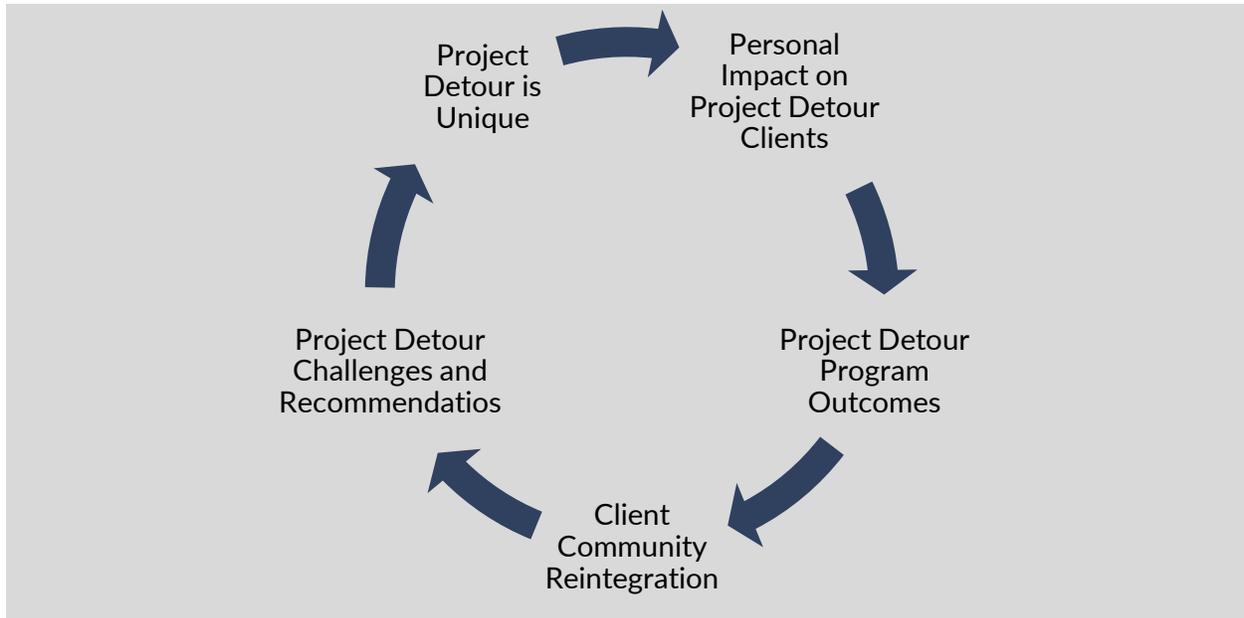
All staff members named the open, consistent, and timely communication between them as key aspects of their positive working relationship. Both PD and Recovery Court staff described each other as highly engaged in the intake process. Referral sources noted the value of PD staff attending court in-person to discuss appropriate referrals, and PD staff appreciated that Recovery Court staff consistently provide useful context about the fit of potential clients. Collaboration continues throughout a client's time in the program, with ongoing communication and information sharing on, at minimum, a weekly basis. Recovery Court staff in particular described benefitting from consistently receiving insightful information about client participation and progress in PD. Both groups also described working together to meet clients' needs, including everything from transportation to trauma therapy, and sharing information that supports clients' success in the program.

“I've really enjoyed having this referral process with the drug court. They've been very open, easy to get along with. It just flows, it works. We trust each other, and that helps us help the client.” - PD Staff

"I would say that [PD's] goals for our women are the same as our goals for our women." - Referral Source

"If she interviews a client, she will let us know immediately if they were found appropriate or not. The communication is very beneficial." - Referral Source

Project Detour Successes & Recommendations



Program Challenges & Recommendations

Overall, qualitative respondents offered few program challenges and recommendations compared to the rewards and benefits PD provides. Clients, however, identified the following recommendations for program improvement:

- More definitive timelines for certain expectations in the program and progression through the program
- More classes and additional support in budgeting and financial management
- Assistance preparing for job interviews with a felony background
- Having expanded access to computers and printers
- Learning more about using computers and technology
- Getting more reliable, easier transportation

The most common challenge identified by referral sources is that there are not enough services and programs like PD to meet the needs of the community. To address this, they offered the following recommendations:

- Scaling the PD model to other locations within and beyond Colorado Springs

- Reducing the two-week trial period to connect women to services more quickly
- Changing the consequences related to relapse so that women can stay in a safe environment that does not risk a lapse becoming a full relapse

Project Detour's Unique Qualities

All respondents commented on various ways that PD is unique from other recovery programs. When making direct comparison to other programs, most PD clients were able to compare PD to other treatment and recovery programs through the lens of direct experience, offering numerous specific ways that PD is different. As indicated previously, clients identified PD's ability to provide holistic and comprehensive basic needs, specifically housing, as a significant factor that increases clients' focus on recovery and distinguishes PD from other programs.

Clients also provided specific examples detailing the way PD provides a physically and emotionally safe environment that is unique compared to other programs. Numerous clients recounted unsafe conditions they have experienced in other places, namely exceeding maximum occupancy levels to secure financial incentives for housing. They also discussed how the transient, inconsistent, and unstable nature of individuals going through other programs risks safety and sobriety. Finally, PD clients noted that the common practice requiring that individuals vacate housing premises during the day increases the likelihood of relapse.

"Project Detour is...a sober living environment for support and reunification. I have never seen a house like that before for women. That is the best one I've ever seen in 19 years." - Referral Source

"Just in the normal sobriety homes, I have just seen women just come and go, and come and go, and come and go... it's just a revolving door if [clients] don't have the right help." - PD Staff

"Every other program is financially motivated, so you're just a paycheck. They'll put you on the couch, in tents in garages...however many they can cram in there according to fire code, and probably pushing the limits because it's your paycheck. So, to me, that's the difference; it's the quality of life that we're given." - PD Client

"In other recovery homes you have people coming straight out of prison, people recovering, people that just want to be clean for themselves, or whose parents are making them. It's a mix of anybody. **There's no process, so a lot of change consistently, constantly, no stability whatsoever. You don't know who's going to relapse [and] from one day to the next, the environment shifts.** I'm really grateful for [PD]. **It's just more stable across the board.**" - PD Client

"All the other sober homes say you got to be out from 8[am] to 4[pm]. When you're first getting out of jail and they tell you, 'Yeah, you can't be home.' It's like, 'What do you want me to do all day?' That's going to make you want to relapse, nowhere to go, but over to the trap spot." - PD Client

There are numerous ways PD establishes itself as a unique and effective program compared to other recovery homes and programs. It is the culmination of PD's approach regarding detailed readiness assessment prior to intake, the provision of basic needs including housing and

therapeutic services, and the process of generating structured, yet customized, phased recovery programming that offer tangible examples of the ways PD is different. Most importantly though, it is the unique PD culture, comprised of elements including compassion, respect, accountability, structure, safety, and support that distinguishes PD and enables successful results.

Results of Project Detour

The infographic features a central icon of a person. Surrounding this icon are four callout boxes, each with a distinct icon and text:

- Top Left (Blue box):** Contains a dollar sign icon. Text: "I feel excited for these women, I feel happy for the ones that are already getting their children back and back on their feet. **I've had seven of these women purchase their cars and move on to their own places...** The ones that work the program...are going to make it." - PD Staff
- Top Right (Light Green box):** Contains a heart icon. Text: "I've been in several programs throughout my life...I left here with **self-integrity, self-efficiency, self-sufficiency.** It's the first I've ever been 18 months sober in my life." - PD Client
- Bottom Left (Orange box):** Contains a plus sign icon. Text: "I believe that **Project Detour saved my life,** and whether it's one life or ten lives, every one counts. I'm very thankful for this place." - PD Client
- Bottom Right (Light Blue box):** Contains an icon of three people. Text: "The other beautiful part is, even when they're done, they're still tied into the community through the alumni network at Project Detour. They're not done when they walk away from those doors. **They're so linked, because of the friendships and relationships that they give back to the community.**" - Referral Source

PD Program Outcomes

Though the program is relatively new and has not graduated a large volume of clients, a significant majority of PD clients have graduated successfully. Of the few who do not successfully navigate the program, all evaluation respondents suggested that it is because that individual is not yet ready for treatment and recovery.

"The [clients] that aren't [successful in PD], they just weren't ready for what it takes to be sober. They just weren't ready yet. Not that they are not going to ever be ready, they just weren't ready at that particular time. They hadn't given up the lifestyle."
- Referral Source

"If you have a dismissive attitude about not wanting the help and not wanting to be sober, then this is not the place for you." - PD Client

"So far, knock on wood, we've only had a few that were disruptive... They just simply weren't ready." - PD Staff

Among the clients who do successfully navigate the program, all respondents identified several notable outcomes they have observed. The most commonly identified outcomes were successful sobriety; successful completion of the PD program; successful navigation of the recovery/drug court process; securing their own basic needs, such as housing, transportation, and employment; and reunification with children. Referral sources noted the value of education, such as employment training, job application skills, financial literacy, and other life skills that promote long-

term self-sufficiency. Respondents also identified the opportunity to save money, primarily through the provision of basic needs while in PD, as crucial to recovery and self-sufficiency.

Client demographic survey results corroborate reported success in the program. These findings indicate that clients in PD have been sober from several months to over one year, and all but one client reported at least part-time employment, indicating they are successful in achieving sobriety and moving on to establish security and a structure of their own. It appears that the provision of comprehensive basic needs within PD's unique culture and environment fosters sustainable outcomes by enabling PD clients to successfully achieve abstinence and sobriety, independently providing their own basic needs, and contributing to a recovery community.

"Anecdotally, most of the women that go in the [PD] program are being successful. They're engaging in treatment; they're moving on to better things and homes when they're finished with that program." - Referral Source

"Looking at the number of women who were being successful, what we did find was emphatically that women who are involved in Project Detour, fare much better from orientation to phase two in our drug court program than those who did not. So the level of services that they have received from Project Detour definitely were a benefit for them and not a burden." - Referral Source

"I'd say [the vast majority of women] that go through Project Detour will remain substance use-free and get back on their feet after completing that program, because of the support that they receive." - Referral Source

Client Impact

Overwhelmingly and emphatically, all clients reported that PD has had a significant positive impact in their lives. Unanimously, the participants believe the program has "saved their life" in some way, with three clients indicating that they literally would not be alive without the support of PD. Others spoke of life saved metaphorically, understanding the role PD has played in placing them on a new life trajectory. Participants also reported being more self-sufficient and holding themselves in higher regard after participating in the program. Many clients noted that PD has been the only program to successfully support their sobriety, allowing clients to establish security, structure, and a recovery community beyond PD.

"I've just been in and out of recovery rooms all over the place for 15 years trying to get it right. I think I saw the end product/beginning product of people that were leaving here and going on with their lives. So I finally heeded to that. I go to my meetings, I'm working my steps, finally. I think that's what it's done for me is it has forced me to sit down and write it out and do the work." - PD Client

"The girls that live here are stuck up in a good way, their heads are held high and they carry themselves well, and they're just better. [PD] just makes us better...self-worth." - PD Client

"I left here with self-integrity, self-efficiency, self-sufficiency. It's the first time I've ever been 18 months sober in my life" - PD Client

Community Reintegration

Ultimately, the long-term measure of success for any reputable treatment or recovery program will be the extent to which clients become active, productive members of a healthy and supportive community. Referral sources described the importance of post-treatment planning for long-term recovery, noting that this is often missed in other recovery programs. PD supports women in their eventual reentry into the community, a process that begins early in the program through required AA/NA recovery community involvement. Numerous clients described the exposure to, and required participation in, a sober recovery community as essential to transitioning away from former habitual environments and toward a community of people focused on sobriety and recovery. The results are new patterns and new relationships that enable connection and support beyond PD and promote sustainable sobriety and long-term recovery for clients.

“They're teaching [PD clients] the life skills that they need to be self-sufficient. We don't want to hold someone's hand forever. We want to be able to let them go, and they can be strong enough to walk on their own.” - Referral Source

“Project Detour really focused on, what do these women do when they leave? It was the re-entry piece... Project Detour really helped us fill that void and that was something that we really needed.” - Referral Source

“I think the fact that you have to get to the sober community and do those meetings, it helps a lot with recovery. If you're just here and you're not doing the meetings...you don't learn new skills. You don't meet new people. Then you're like, 'Oh, well. Let me just call my old dope dealer because I've known him forever and I need somebody to talk to.' Here, it gives you the opportunity to actually get out into the sober community and meet those new people and learn new skills.” - PD Client

Beyond the individual impact on PD clients, building a sustainable and healthy recovery community contributes significantly toward breaking the cycle of addiction on familial, societal, and generational levels. With the skills and experiences gained through PD, clients, by virtue of their success, become tacit leaders within their spheres of influence and within the larger recovery community.

“I've had a lot of help [in PD] getting connected back with the community, getting involved with resources, organizations. Not only that, just getting the impact of everything that happened here at Project Detour and taking that out into the recovery community and showing them this [sobriety/success] is what can happen.” - PD Client

“Women who go through Project Detour I think will be those that will stay away from it and therefore educate their children to also be sober as they grow up. And if they're married or have a significant other, to help them as a model to do the same. So I see the entire family getting better based on them maintaining their sobriety.” - Referral Source

Conclusion

Project Detour's success as a treatment program can be attributed to a combination of factors that permeate the program concept and execution.

