

Kentucky Opioid Replacement Treatment Program Outcome Study

2020 FINDINGS AT A GLANCE

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Introduction

In 2007, Kentucky opioid treatment programs (OTPs) began collecting outcome data on medication-assisted therapy. The Kentucky Opioid Replacement Treatment Outcome Study (KORTOS) is conducted in collaboration with the Kentucky Division of Behavioral Health and Narcotic Treatment Authority and includes client-level intake data collected by OTPs. Through a contract with the Division of Behavioral Health, the data are submitted to the University of Kentucky Center on Drug and Alcohol Research (UK CDAR) where 6-month follow-up interviews are completed with consenting maintenance treatment clients.

The goal of KORTOS is to examine client satisfaction and client outcomes for several targeted factors including: (1) substance use, (2) mental and physical health, (3) criminal justice involvement, (4) quality of life, (5) education, economic status, and living situation, and (6) recovery supports. This Findings at a Glance summarizes client outcomes from nine of Kentucky's OTPs for 114 clients who completed an intake interview between January 1, 2018 and December 31, 2018, agreed to do the follow-up about 6 months later, completed a follow-up interview between July 1, 2018 and June 30, 2019, and were still engaged in an OTP at the time of the follow-up.

Characteristics of the Follow-up Sample

Of the 114 adults who completed a 6-month follow-up interview:

- 51.8% were female
- The majority of follow-up clients were White (93.9%), 3.5% were African American and 2.6% were Hispanic, American Indian, or multiracial
- They were an average of 37 years old at the time of the intake interview
- 21.1% of clients were never married, 50.9% were married or cohabiting, 24.6% were separated or divorced, and 3.5% were widowed
- 39.5% of follow-up clients had at least one child under age 18 who was living with them

Factors Examined at Intake and Follow-up

Past-6-month substance use



REPORTED ANY
ILLEGAL DRUG USE***

96% | **37%**
at intake | at follow-up



REPORTED
PRESCRIPTION
OPIOID MISUSE***1

73% | **11%**
at intake | at follow-up



REPORTED HEROIN
USE***

66% | **13%**
at intake | at follow-up



REPORTED NON-
OPIOID DRUG USE***2

74% | **27%**
at intake | at follow-up

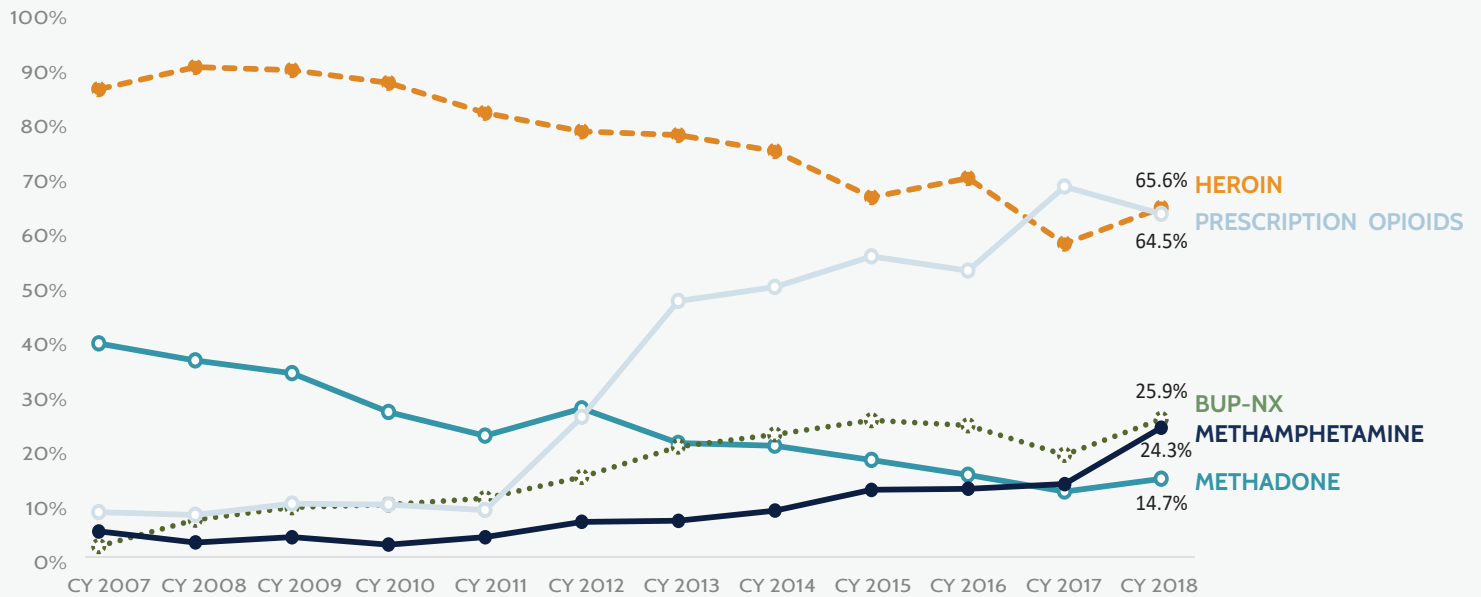
***p < .001.

¹ Including opioids such as morphine, Percocet, Oxycontin, Lortab

² Drugs in this category include marijuana, cocaine, amphetamines, tranquilizers, hallucinogens, inhalants, barbiturates, and synthetic drugs like synthetic marijuana or bath salts.

How Much Has Specific Past-30-day Drug Use Changed Over Time?

This trend analysis examines the percent of KORTOS clients who reported misusing prescription opiates/opioids, non-prescribed methadone, non-prescribed buprenorphine-naloxone (bup-nx), heroin, and methamphetamine in the 30 days before entering treatment from CY 2007 to CY 2018.³



Past-6-month mental health



MET STUDY CRITERIA FOR DEPRESSION***

71% at intake | **28%** at follow-up



MET STUDY CRITERIA FOR ANXIETY***

78% at intake | **35%** at follow-up



MET STUDY CRITERIA FOR COMORBID DEPRESSION AND ANXIETY***

65% at intake | **20%** at follow-up



REPORTED SUICIDAL IDEATION AND/OR ATTEMPTS***

18% at intake | **4%** at follow-up

Past-30-day physical health



AVERAGE NUMBER OF DAYS PHYSICAL HEALTH WAS NOT GOOD***

13.8 at intake | **7.6** at follow-up



AVERAGE NUMBER OF DAYS MENTAL HEALTH WAS NOT GOOD***

17.7 at intake | **8.3** at follow-up



REPORTED CHRONIC PAIN**⁴

54% at intake | **35%** at follow-up

p < .01, *p < .001.

³ Clients who reported being in a controlled environment all 30 days before entering treatment were not included in this analysis.

⁴ Past-6-month measure.

Past-6-month economic indicators



CURRENTLY EMPLOYED FULL-TIME**

34% at intake | **47%** at follow-up

GENDER WAGE GAP

At follow-up, employed women made only \$0.67 for every dollar employed men made.



\$1.00

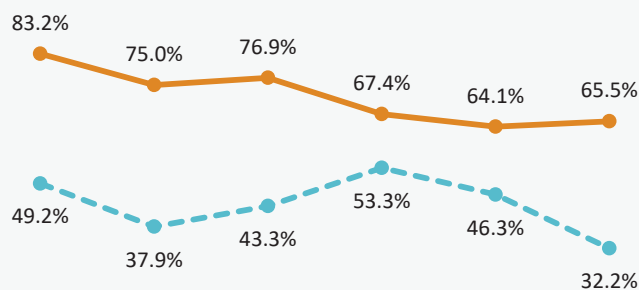


\$0.67

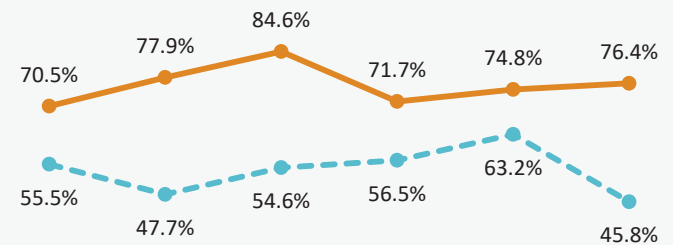
Trends in employment by gender

For the past 6 years, significantly fewer women reported being employed (full- or part-time) at least one month in the past 6 months at intake compared to men. In 2018, however, the gap is narrowed with 67.4% of men reporting employment compared to 53.3% of women. By follow-up, on average, around half of women reported they were employed full-time or part-time at least one month in the past 6 months but significantly more men reported employment during that same time frame.

INTAKE



FOLLOW-UP



2015 (n = 223) | 2016 (n = 236) | 2017 (n = 175) | 2018 (n = 184) | 2019 (n = 239) | 2020 (n = 114)

Men (solid line) | Women (dashed line)

2015 (n = 223) | 2016 (n = 236) | 2017 (n = 175) | 2018 (n = 184) | 2019 (n = 239) | 2020 (n = 114)

Men (solid line) | Women (dashed line)



CURRENTLY HOMELESS**

25% at intake | **9%** at follow-up



REPORTED DIFFICULTY MEETING BASIC LIVING NEEDS**

54% at intake | **35%** at follow-up



REPORTED DIFFICULTY MEETING HEALTH CARE NEEDS*

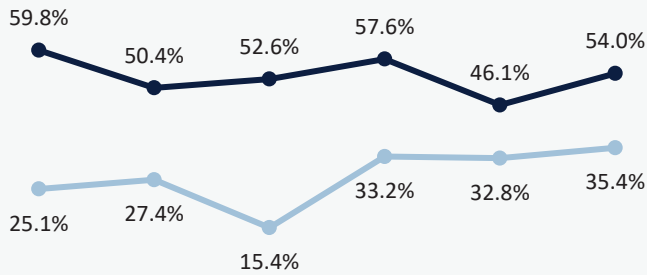
35% at intake | **24%** at follow-up

*p < .05, **p < .01.

Trends in difficulty meeting needs

Overall, for the past 6 years, there has been a decrease in clients reporting difficulty meeting basic living needs and meeting basic health care needs at intake. Since 2017, however, the number of clients reporting difficulty meeting basic living needs and meeting basic health care needs at follow-up has increased compared to previous years.

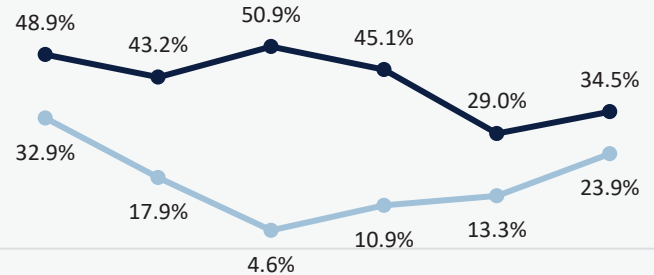
DIFFICULTY MEETING BASIC LIVING NEEDS



2015 (n = 223) 2016 (n = 236) 2017 (n = 175) 2018 (n = 184) 2019 (n = 241) 2020 (n = 113)

● Intake ● Follow-up

DIFFICULTY MEETING BASIC HEALTH CARE NEEDS



2015 (n = 223) 2016 (n = 236) 2017 (n = 175) 2018 (n = 184) 2019 (n = 241) 2020 (n = 113)

● Intake ● Follow-up

Past-6-month criminal justice involvement and victimization



REPORTED ANY ARREST*

17% | **7%**
at intake | at follow-up



REPORTED BEING INCARCERATED⁶

12% | **8%**
at intake | at follow-up



REPORTED INTERPERSONAL VICTIMIZATION^{7***}

33% | **16%**
at intake | at follow-up

*p < .05, ***p < .001.

⁶ Not a significant change.

⁷ Including when they may have been the victim of a crime, harmed by someone else, or felt unsafe.

Recovery supports



REPORTED ATTENDING MUTUAL HELP RECOVERY MEETING IN THE PAST 30 DAYS***

23%

at intake

54%

at follow-up

WHAT WILL BE MOST USEFUL IN STAYING OFF DRUGS/ALCOHOL AT INTAKE AND FOLLOW-UP

INTAKE

FOLLOW-UP



34%

employment



29%

being a parent



28%

counseling



26%

support from family



24%

change in environment



21%

staying busy

Quality of life and well-being

Quality of life

Ratings were from 1='Worst imaginable' to 5='Good and bad parts were about equal' to 10='Best imaginable'.



AVERAGE QUALITY OF LIFE RATINGS***

3.9

at intake

7.9

at follow-up

Functioning and well-being

Ratings were from 0, "Not at all good" to 10, "Extremely good."



OVERALL WELL-BEING***

5.1

at intake

8.2

at follow-up



PERSONAL WELL-BEING***

5.1

at intake

8.3

at follow-up



INTERPERSONAL WELL-BEING***

5.5

at intake

8.4

at follow-up



SOCIAL WELL-BEING***

4.5

at intake

8.0

at follow-up

Program Satisfaction

At follow-up, clients were asked to rate their overall level of satisfaction with the treatment program on a scale from 1 (worst treatment imaginable) to 10 (best treatment).



87%

felt listened to and heard by counselor or program staff



88%

treatment approach was a good fit



83%

expectations and hopes for treatment were met



82%

had input into treatment goals, plans, and progress



81%

program staff believed in me and that treatment would work for me

***p < .001.

Conclusion

The 2020 KORTOS evaluation indicates that opioid treatment programs in Kentucky have been successful in facilitating positive changes in clients' lives in a variety of ways, including decreased substance use, decreased mental health symptoms, decreased economic hardship, and decreased involvement with the criminal justice system. Results also show that clients have an improved quality of life and more support for recovery after participating in treatment. Overall, KORTOS clients had significant improvements in key factors that have been associated with facilitating recovery.

“There needs to be more of these places available to people. Amazing program! The methadone program was the only way for me to get straight and move forward with my life.”

KORTOS FOLLOW-UP CLIENT