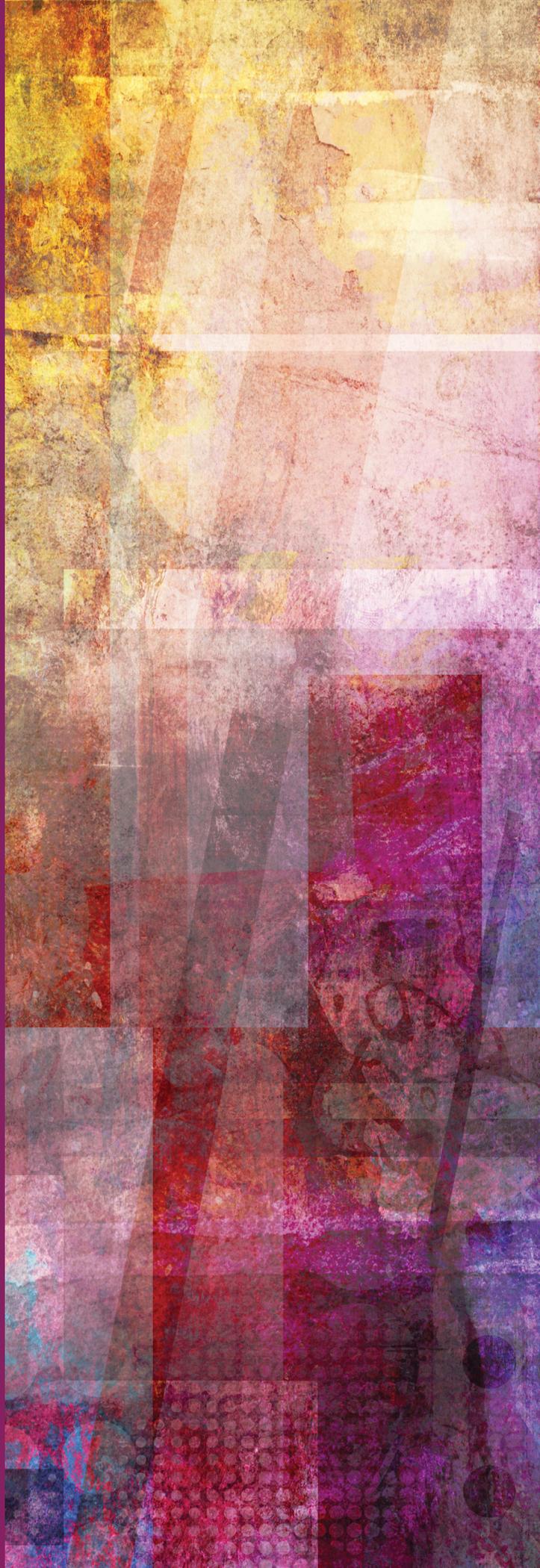


Adult Kentucky Treatment Outcome Study

2016 Findings at a Glance



Introduction

The Kentucky Treatment Outcome Study (KTOS) includes a face-to-face interview with program staff at treatment intake to assess targeted factors such as substance use, mental health symptoms, education, employment status, living situation, and criminal justice involvement prior to entering treatment. KTOS is an important part of the Department for Behavioral Health, Developmental, and Intellectual Disabilities, Division of Behavioral Health's performance-based measurement of treatment outcomes in Kentucky's communities. Then, a follow-up interview is conducted with a selected sample of clients by a member of the University of Kentucky Center on Drug and Alcohol Research about 12 months after the intake interview is completed.

This Findings at a Glance summarizes results from the 2016 Adult Kentucky Treatment Outcome Study annual report. Results for this study included analysis of self-report responses for 1,291^a clients who participated in publicly-funded substance abuse treatment from July 2013 through June 2014 and then completed a follow-up interview about 12 months later (an average of 335 days). There was a low refusal rate for follow-up participation (0.4%) and a high follow-up rate (76.4%) out of those clients who were eligible for follow-up and were randomly selected for the sample.

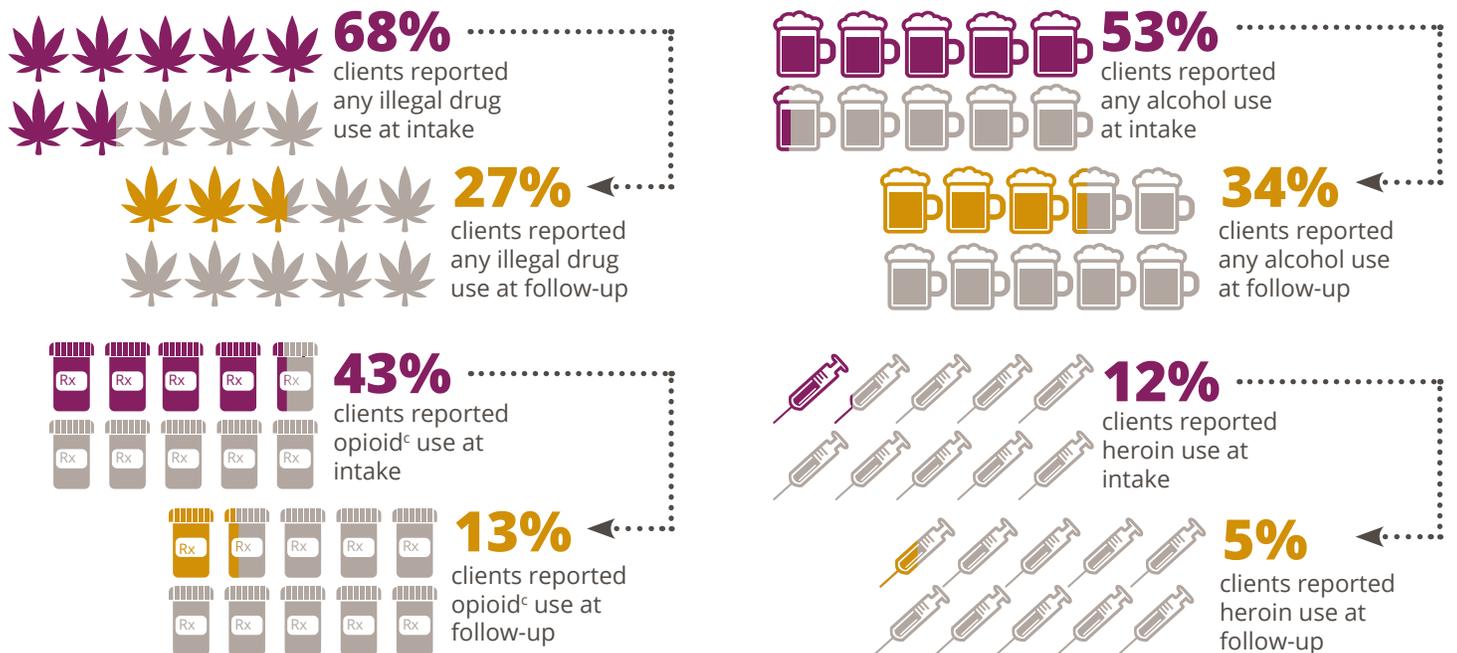
Characteristics of KTOS Clients Included in the Follow-up Sample

Of the 1,291 clients who completed a 12-month follow-up interview:

- Half (54%) were male.
- The majority of follow-up clients were White (92%). A minority were African American/Black (6%) and 3% were Hispanic, American Indian, or multiracial.
- They were an average of 34 years old at the time of the intake interview. The majority of individuals (61%) were 30 years old or older at intake.

Factors Examined at Intake and Follow-up

Past-12-month Substance Use^b

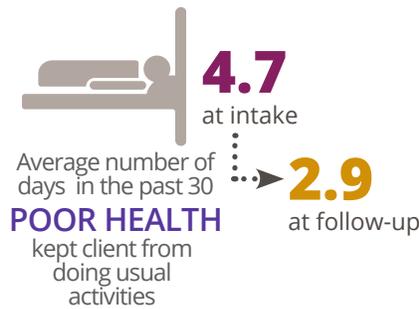
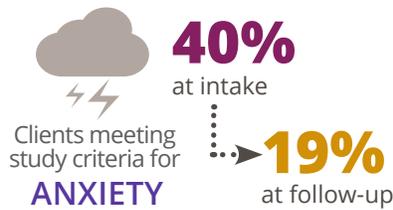
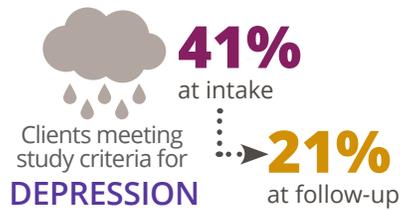


^a A total of 1,291 clients completed intake and follow-up surveys, however one transgender individual was not included in analysis because outcomes were examined by gender; thus, outcomes were only analyzed for 1,290 clients.

^b Because being in a controlled environment inhibits opportunities for alcohol and drug use, clients who were incarcerated all 365 days before entering treatment were not included in the substance use analysis (n = 23).

^c Misuse of opioids other than heroin, including prescription opiates, methadone, and buprenorphine.

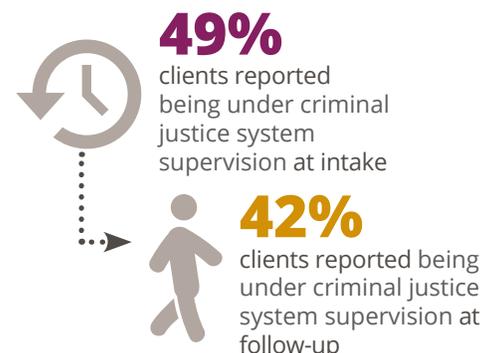
Past-12-month Mental Health and Stress



Past-12-month Economic Indicators



Past-12-month Criminal Justice System Involvement



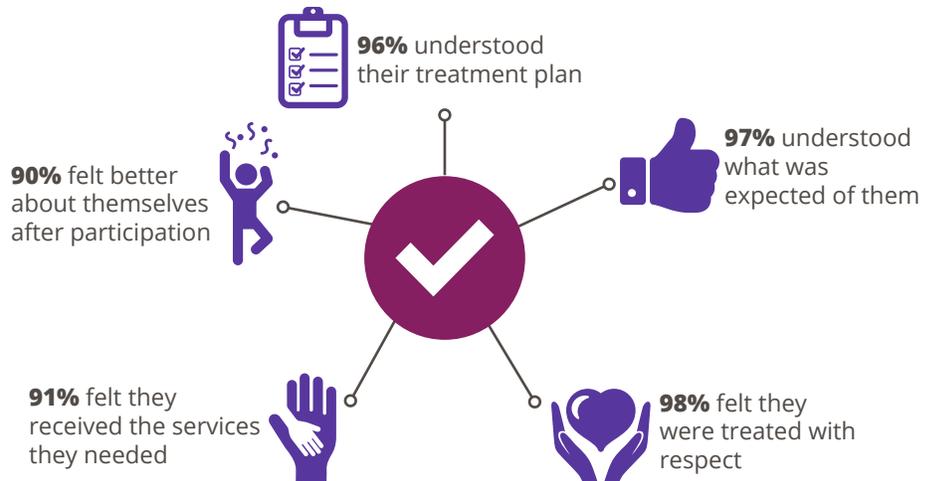
^dMeasure of symptoms in the past 7 days. Higher scores on the Stress-Related Health Consequences scale indicate higher stress and greater physiological indicators of stress. The highest possible score is 75 and the lowest possible score is 0.

Past-30-Day Recovery Supports



Program Satisfaction

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



Cost Savings of Substance Abuse Treatment



Using national estimates of the cost of substance abuse and applying them to clients' substance use before and after program participation, there was a \$3.63 return in cost savings for every dollar spent on providing recovery services.

"I got the best treatment when I was there, I love my counselors to death. Through them, my life has changed."

-KTOS FOLLOW-UP CLIENT

Conclusion

The KTOS 2016 outcome evaluation indicates that publicly-funded substance abuse treatment programs in Kentucky have been successful in facilitating positive changes in clients' lives in a variety of ways. These include decreased substance use, decreased mental health symptoms and stress, increased full-time employment, decreased economic hardship, and decreased involvement with the criminal justice system. Results also show that clients appreciate and value their experiences in treatment programs and have more support for recovery after participating in treatment. Finally, publicly-funded substance abuse treatment (in a variety of modalities) saves Kentucky taxpayers' money in avoided costs that ongoing substance abuse would have cost without treatment.