This report is an evaluation of the network of Oxford Houses in the State of Oklahoma using survey data from the last quarter of 2016. The state-supported Oxford House development program in Oklahoma has enabled over 9,000 recovering individuals to help themselves stay clean and sober without relapse.

Oxford House, Inc. is a 501(c)(3) nonprofit umbrella organization dedicated to helping recovering individuals achieve comfortable, long-term sobriety without relapse.
About Oxford House, Inc.

Oxford House, Inc. [OHI] is the Delaware nonprofit, 501(c)(3) corporation that serves as the umbrella organization of the worldwide network of more than 2,100 individual Oxford Houses. Its central office is at 1010 Wayne Avenue, Suite 300, Silver Spring, Maryland 20910.

Oxford House™ is a concept and system of operations based on the experience of recovering alcoholics and drug addicts who learned that behavior change is essential to recovery from alcoholism and drug addiction. They also learned that Oxford House provided the living environment that could help them become comfortable enough with abstinent behavior to stay clean and sober without relapse.

The Oxford House Manual© is the basic blueprint that provides the organization and structure that permit groups of recovering individuals to successfully live together in a supportive environment. All Oxford Houses are rented ordinary single-family houses in good neighborhoods. There are Oxford Houses for men and Oxford Houses for women but there are no co-ed houses. Nationally, the average number of residents per house is about 8 with a range per house of 6 to 16. The average number of residents in Oxford Houses in Oklahoma is 8.8.

Oxford Houses work because they: (1) have no time limit for how long a resident can live in an Oxford House; (2) follow a democratic system of operation; (3) utilize self-support to pay all the household expenses; and (4) adhere to the absolute requirement that any resident who returns to using alcohol or drugs must be immediately expelled. Oxford House provides the missing elements needed by most alcoholics and drug addicts to develop behavior to assure total abstinence. It provides the time, peer support and structured living environment necessary for long-term behavior change to take hold.

Individuals living in an Oxford House learn or relearn values and responsible behavior and, slowly but surely, they develop long-term behavior to assure comfortable sobriety to avoid forever. Some individuals live in Oxford Houses a few months; others for many years. By using participatory democracy and self-support, alcoholics, drug addicts and those with co-occurring mental illness develop long-term recovery. With long-term recovery, each becomes a productive citizen and stays out of trouble.

After 42 years of steady growth and successful recovery outcomes, Oxford House™ has been proven to work and is a very cost-effective way to support long-term recovery without relapse. There are 100 Oxford Houses [883 beds] in Oklahoma and more than 2,100 Oxford Houses nationwide.


This 2017 evaluation of the Oklahoma Network of Oxford Houses is a review upon which the state can determine the value of Oxford House™ to those in recovery, recovering individuals leaving incarceration and to the state’s health care costs overall.

Silver Spring, Maryland
April 7, 2017

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Silver Spring, Maryland
April 7, 2017
Introduction

This is the fourth evaluation of Oxford Houses in Oklahoma prepared by Oxford House, Inc. [OHI]. Previous evaluations in this profile series were published in 2007, 2009 and 2011 and are available on the Oxford House website: [www.oxfordhouse.org](http://www.oxfordhouse.org) under “Publications/Evaluations/State.”

Oxford House is a concept and system of operation for recovering alcoholics, drug addicts and those with co-occurring mental illness to live together in an environment supportive of long-term recovery. Started in 1975, Oxford House has provided a safe place for recovering individuals to become comfortable enough in sobriety to avoid relapse. Since it began, more than 500,000 individuals seeking recovery have lived in an Oxford House. Most have stayed clean and sober without relapse. More than 180 academic research articles about Oxford House have been published in peer-reviewed journals. A list of such publications is available at the Oxford House website: [www.oxfordhouse.org](http://www.oxfordhouse.org) at “About Us/Resources.”

Simply stated, Oxford Houses provide recovering individuals with the disciplined, supportive living environment that they need to learn behavior changes to develop sobriety comfortable enough to avoid relapse.

Oklahoma Oxford House residents enjoying a cookout at Oxford House-Castle 55 in Norman
The recent [November 2016] US Surgeon General’s Report “Facing Addiction In America,” singled out Oxford House™ as a key program in the continuum of successful treatment for addiction. The Report summarized the evidence-based treatment outcomes as follows:

Outcomes:

- An 87 percent abstinence rate at the end of a 2-year period living in an Oxford House, four to five times greater than typical outcomes following detoxification and treatment.
- Comparisons between a group living in Oxford House and going to AA/NA versus a similar group that only goes to AA/NA show that the group living in an Oxford House had higher and more positive rates of self-efficacy and self-mastery.
- In a comparison study between Oxford House residents and a group that was assigned usual aftercare services, the Oxford House group had significantly lower substance use (31.3 percent vs. 64.8 percent), higher monthly income ($989 vs. $440), and lower incarceration rates (3 percent vs. 9 percent).

The National Registry of Evidence-based Programs and Practices [NREPP] is a searchable online registry of mental health and substance abuse interventions that have been reviewed and rated by independent reviewers. The purpose of this registry is to assist the public in identifying scientifically-based approaches to preventing and treating mental and/or substance use disorders that can be readily disseminated to the field. NREPP is one way that the federal Substance Abuse and Mental Health Services Administration [SAMHSA] is working to improve access to information on tested interventions and thereby reduce the lag time between the creation of scientific knowledge and its practical application in the field. The Oxford House Model is listed as a successful evidence-based intervention on NREPP. [See: http://legacy.nreppadmin.net/ViewIntervention.aspx?id=223 ] It is the only recovery house concept and system of operation that is listed on NREPP.

As a matter of fact, Oxford House™ may have started the evidence-based movement by opening its membership up to research on recovery from alcoholism, drug addiction and co-occurring mental illness in 1987. In 1987, William Spillane, Ph.D. had recently retired from the National Institute of Drug Abuse where he had been Deputy under Dr. Robert DuPont [now a member of the Oxford House, Inc. Board of Directors] and had begun an academic career at the Catholic University of America’s School of Social Work. Dr. Spillane asked residents of the 13 Oxford Houses then in existence if he could study what had happened to the residents of Oxford Houses since they began in 1975.

Using the application forms retained by each of the 13 original Oxford Houses, Spillane tracked down about 1,200 former residents. In late 1987 he reported that 80% of them never drank alcohol or used illicit drugs since they had lived in an Oxford House. The immediate reaction of the Oxford House leaders was to question what they were doing wrong since 20% had relapsed. Spillane quickly explained that an 80% success rate was four or five times better than the normal success

It was the catalyst for the expansion of Oxford House™ from a small network of 13 Oxford Houses in the vicinity of the Nation’s Capital to a national network of more than 2,100 houses. Many states – including Oklahoma by 2006 – turned to Oxford House, Inc. for successful development of self-run, self-supported recovery homes.

Oxford House, Inc. [OHI] – the 501(c)(3) nonprofit umbrella organization – utilizes trained outreach workers [on-site field representatives] and start-up loan management to develop new houses and uses a time-tested system of quality control to make sure that houses stay on track. Each year the organization completes an in-depth review of performance of Oxford Houses within particular states. Part of that process is the administration of a standard profile questionnaire to be completed by residents of Oxford Houses within a state. Each resident completes the standard questionnaire [available at the Oxford House website: www.oxfordhouse.org under “Publications/General” by scrolling to bottom of the page] that has been used to create resident profiles since 1989.

The first few Oxford Houses in Oklahoma were established when alumni from Oxford Houses in Kansas City came home to Tulsa. Oxford House-Southern Hills, started in 2002, is still going strong. Each year more than a dozen recovering men move in and gain the peer support and discipline they need to stay clean and sober. House establishment and keeping houses on track is greatly enhanced through the use of trained and supervised OHI outreach workers.

The Oklahoma Network of Oxford Houses has grown from a handful of Oxford Houses into a strong statewide network ever since the state began development support in 2006. It will continue to grow as long as the partnership between OHI and the state continues. Since 2006, the State of Oklahoma has contracted with OHI to supply, train and supervise outreach workers to help the residents throughout the statewide network of Oxford Houses to expand the network and to keep it on track. This profile of Oklahoma Oxford House residents shows the program’s success.

During the Fall 2016, 625 Oklahoma Oxford House residents – 450 males and 175 females – completed the standard survey. Data from that survey and monthly reports by OHI field representatives provide the basis for the 2017 Evaluation of Oklahoma Oxford House residents.
## 2014 Oxford House Profile
### Oklahoma Fall Survey Results

Resident profiles are derived from 625 confidential responses to surveys taken in the Fall 2016.

<table>
<thead>
<tr>
<th>Total Number of Oxford House residents who responded:</th>
<th>625</th>
<th>Average Age:</th>
<th>36.6 Years</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>450</td>
<td>Median Age:</td>
<td>35 Years</td>
</tr>
<tr>
<td>Female</td>
<td>175</td>
<td>Youngest:</td>
<td>18 Years</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Oldest:</td>
<td>74 Years</td>
</tr>
<tr>
<td>Number of Men’s Houses:</td>
<td>69</td>
<td>Number of Men Residents:</td>
<td>632</td>
</tr>
<tr>
<td>[April 1, 2017]</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number of Women’s Houses:</td>
<td>31</td>
<td>Number of Women Residents:</td>
<td>251</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cost Per Person Per Week for Rent</td>
<td>$110</td>
<td>Rent Per Group Per Month [average: $900-2200]</td>
<td>$1,455</td>
</tr>
<tr>
<td>[range $85 to $125]</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Percent Military Veterans</td>
<td>8.8%</td>
<td>Average Years of Education</td>
<td>12.2 years</td>
</tr>
<tr>
<td>Residents Working 11/30/2016</td>
<td>88.3%</td>
<td>Average Monthly Earnings:</td>
<td>$1,652</td>
</tr>
<tr>
<td>Percent Addicted To Drugs or Alcohol &amp; Drugs:</td>
<td>42%</td>
<td>Percent Addicted to Only Alcohol:</td>
<td>58%</td>
</tr>
<tr>
<td>Race –</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>80.2%</td>
<td>Marital Status –</td>
<td></td>
</tr>
<tr>
<td>Hispanic</td>
<td>2.5%</td>
<td>Never Married</td>
<td>48.5%</td>
</tr>
<tr>
<td>Black</td>
<td>4.4%</td>
<td>Separated</td>
<td>7.9%</td>
</tr>
<tr>
<td>Nat American</td>
<td>12.9%</td>
<td>Divorced</td>
<td>36.2%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Married</td>
<td>5.5%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Widowed</td>
<td>1.6%</td>
</tr>
<tr>
<td>Prior Homelessness:</td>
<td>56%</td>
<td>Average Time Homeless:</td>
<td>12 Months</td>
</tr>
<tr>
<td>Prior Jail:</td>
<td>81%</td>
<td>Average Jail Time:</td>
<td>23 Months [Median 12]</td>
</tr>
<tr>
<td>Average AA or NA Meetings Attended Per Week:</td>
<td>4.6 Times</td>
<td>Percent Going To weekly Counseling in addition to AA or NA:</td>
<td>34%</td>
</tr>
<tr>
<td>Average Length of Sobriety of House Residents:</td>
<td>15.3 Months</td>
<td>Residents Expelled Per Month Because of Relapse:</td>
<td>5.7%</td>
</tr>
<tr>
<td>Average Length of Stay In An Oxford House:</td>
<td>11 Months</td>
<td>Average Number of Applicants For Each Vacant Bed:</td>
<td>+3.0</td>
</tr>
</tbody>
</table>

The Number of Houses Increased from 78 in December 2015 to 100 as of March 1, 2017.
The number of recovery beds increased by 250 from 633 to 883 during the same 14-month period.

In June 2006, Oxford House, Inc. – the national umbrella organization of Oxford Houses – entered a contract with the Oklahoma Alcohol and Drug Addiction agency in Oklahoma to provide technical assistance to help establish and maintain a network of Oxford Houses. The contract brought paid outreach workers to the state to help recovering individuals establish and maintain a network of Oklahoma Oxford Houses. This began a process that has produced a strong network of self-run, self-supported Oxford Houses throughout the state. Part of the development process conducted by Oxford House, Inc. includes periodic evaluations to measure progress.

Three earlier evaluations of the development of Oxford Houses in the Oklahoma are at the website: www.oxfordhouse.org under “Publications/Evaluations/State” [2007, 2009, 2011] and can be downloaded to get a fuller understanding of the successful partnership between the state and Oxford House, Inc.. The table below shows the increase in the number of Oxford Houses operating in the state over time.1

<table>
<thead>
<tr>
<th>Year</th>
<th>2007</th>
<th>2009</th>
<th>2011</th>
<th>2012</th>
<th>2015</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oxford Houses</td>
<td>28</td>
<td>51</td>
<td>52</td>
<td>59</td>
<td>74</td>
<td>100</td>
</tr>
<tr>
<td>Recovery Beds</td>
<td>237</td>
<td>434</td>
<td>448</td>
<td>499</td>
<td>639</td>
<td>883</td>
</tr>
</tbody>
</table>

There are now 100 Oxford Houses in the state – 31 for women and 69 for men. Together, the houses provide 833 recovery beds – 251 for women and 632 for men.

In the fall of 2016, an individual survey was administered to residents of 100 of the houses.2 Participation in the survey was 88% with 625 of the 711 then current residents in the 100 houses surveyed completing the survey questionnaire.3

The questionnaire has been used by Oxford House, Inc. since 1989. It collects data that provides a profile of residents, including prior treatment episodes, current sobriety and recovery status.

Alcoholism, drug addiction and co-occurring mental illness cut across economic, educational and racial differences in an egalitarian fashion. Historically the Oxford House surveys opened the door to scientifically looking at the recovery process with greater thoroughness and detail that was previously available. In a recent book, Jeffrey D. Roth, MD, Board Certified in Addiction Psychiatry, wrote:

While research on AA has been limited by the role of anonymity in recovery, the willingness of Oxford Houses to open their doors to academic research gives us an opportunity to see recovery from addiction in action.4

Part of the Oxford House culture is a willingness by residents to provide information to help understand the recovery process. This has provided access to third-party researchers and their research has confirmed findings of the Oxford House, Inc. evaluations – including the conclusion that Oxford House living substantially increases the odds of successful long-term recovery. The residents of the Ox-

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1 The 2012 figures are as of the end of first quarter of 2012. Five new houses have been started during the first two

2 At the time of the survey there were 172 vacancies in the houses. This was attributable both to usual turnover and that recently started houses were not full yet.

3 There were 883 recovery beds in the 100 houses that were part of the survey. During the survey period there were 172 vacancies and 661 current residents. [625/711= 88%]

ford Houses in Oklahoma have made a contribution to both understanding the recovery process and the role that Oxford Houses play in helping individuals to become comfortable enough in sobriety to avoid relapse.

Recovery Process

The history of addiction is replete with the tension between personal discipline and illness that thwarts good behavior. In the excellent PBS television program by Ken Burns, Prohibition, viewers were reminded that there is nothing new about the problems of alcoholism, drug addiction and co-occurring mental illness. They were also reminded that law cannot magically control behavior leading to addiction and recovery from addiction requires the difficult task of individual behavior change.

Oxford House–Meridian II
Oklahoma City, Oklahoma
10 Men • Established September 1, 2006

Most [84%] of the residents in an Oxford House have been through residential treatment more than once [mean 4.4 times]. This is not surprising given what is known about alcoholism and drug addiction. Ludwig found that only one in ten of treated individuals are clean and sober eighteen months after treatment, and Vaillant found that over a lifetime only 20% of alcoholics achieve sobriety without relapse.6 The general outcome of treatment for drug addiction is equally dismal. A study of treatment outcome for cocaine addiction found 13% stayed clean without relapse. [RAND 1995]

The cycling of individuals in and out of treatment has always been a problem. Prior to 1960, a majority of the recycling involved institutionalization in asylums. Today, jail or prison often serves the same purpose. Later in this evaluation, the prior treatment record and incarceration of the Oklahoma Oxford House residents are discussed.

National data compiled by the federal government of those in formal treatment in any given year show that fewer than 40% of those in treatment are there for the first time. To better understand the value of Oxford House living, it is worth considering the basics of treatment of alcoholics and drug addicts.

Vernon E. Johnson, described the standard four phases of treatment for alcoholism and drug addiction four decades ago:

♦ Intervention
♦ Detoxification
♦ Education, and
♦ Long-term behavior change to assure sobriety without relapse.7

Long-term behavior change is the most difficult to achieve because behavior change – always difficult – becomes nearly impossible if the individual returns to a living environment identical or similar to where he or she was living as an active alcoholic or drug addict.8 Intervention, detoxification and education

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[about the nature of addiction and motivation to change behavior] is not difficult but these three steps alone can seldom produce recovery without relapse. Long-term behavior change requires the availability of a reasonable opportunity to become comfortable with abstinent behavior.

**Treatment History**

Reviewing the treatment history of the residents in Oxford House shows that most individuals have tried to achieve long-term sobriety many times before admission to an Oxford House. The following table compares treatment history of residents in various states. Oklahoma residents have a similar treatment history as residents in other states.

<table>
<thead>
<tr>
<th>No. of Sobriety Tries in Residential Treatment</th>
<th>OK</th>
<th>TX</th>
<th>NC</th>
<th>VA</th>
<th>WA</th>
</tr>
</thead>
<tbody>
<tr>
<td>One time</td>
<td>25.6</td>
<td>23.9</td>
<td>18.2</td>
<td>16.1</td>
<td>22.0</td>
</tr>
<tr>
<td>Twice</td>
<td>23.5</td>
<td>18.8</td>
<td>20.0</td>
<td>24.2</td>
<td>23.2</td>
</tr>
<tr>
<td>Three to Five</td>
<td>27.4</td>
<td>31.9</td>
<td>44.1</td>
<td>41.9</td>
<td>33.6</td>
</tr>
<tr>
<td>Six to Ten</td>
<td>16.7</td>
<td>13.8</td>
<td>10.9</td>
<td>12.9</td>
<td>13.1</td>
</tr>
<tr>
<td>More than Ten</td>
<td>6.8</td>
<td>11.6</td>
<td>06.3</td>
<td>04.8</td>
<td>08.0</td>
</tr>
</tbody>
</table>

Prior residential treatment followed by relapse underscores the fact that behavior change – the only cure for alcoholism and drug addiction – is not easy. It takes time, motivation and a supportive peer living environment to develop sobriety comfortable enough to avoid relapse.

About 51% of the Oklahoma Oxford House residents have been through residential treatment 3 or more times. Recycling in and out of treatment has been the norm. Oxford House can change that norm so that recovery without relapse can become the new norm rather than the exception. Put another way, the individual resident in an Oxford House is given the opportunity to become comfortable enough in sobriety to avoid relapse.

One concept underlying self-run, self-supported Oxford Houses is similar to one underlying Alcoholics Anonymous and Narcotics Anonymous – addicted individuals can help themselves by helping each other abstain from alcohol and drug use for a long enough time to permit a new set of values to be substituted for the old addictive behavior. Unlike AA or NA – where the formal meeting is but an hour at a time – Oxford House is total immersion in recovery and sobriety day after day. One professional described Oxford House as “AA in a house where meetings are 24 hours a day and seven days a week.” That is not a bad description.

Two findings from the Oklahoma Oxford House studies – expulsion rate and length of stay – show that Oxford Houses are providing the time, motivation and supportive peer environment for residents to develop sobriety without relapse. The Oxford House charter requires the immediate expulsion of any resident that resumes using alcohol or drugs. The cumulative relapse rate [measured over time between entry and exit] among Oklahoma residents is about 19% but will average about 5% a month when measured on a snapshot basis. In addition, the current residents in Oklahoma Oxford Houses have accumulated a significant length of sobriety – an average of 15.3 months.9

Dr. George E. Vaillant, in his book *The Natural History of Alcoholism*, states the obvious goal in the treatment of alcoholism [or drug addiction] when he states that, "The treatment of alcoholism should be directed toward altering an ingrained habit of maladaptive use of alcohol."

He goes on to spell out the four components of treatment, which can achieve that goal:

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9 About half of the residents have been in an Oxford House about six months with the other half having lived in a house more than six months. Mean is 7 months. Length of sobriety is longer because some sobriety is gained before admission – particularly among the former incarcerated
offering the patient a non-chemical substitute dependency for alcohol,
reminding him ritually that even one drink can lead to pain and relapse,
repairing the social and medical damage that he has experienced, and
restoring self-esteem.\(^\text{10}\)

Vaillant also points out that providing all four components at once is not easy. Disulfiram [Antabuse] and similar compounds that produce illness if alcohol is ingested are reminders not to drink, but they take away a cherished addiction without providing anything in return: they provide the second component but ignore the first. Prolonged hospitalization provides the first three components but ignores the fourth and eventually the first. Hospital patienthood destroys self-esteem, and when hospitalization ceases the patient loses his substitute dependency. Tranquilizing drugs provide the first component but ignore the other three. For example, providing the anxious alcoholic with tranquilizers will give temporary relief of anxiety but may also facilitate the chain of conditioned responses that lead to picking up a drink at the next point of crisis. Over the long term, providing alcoholics with pills only reinforces their illusion that relief of distress is pharmacological, not human.\(^\text{11}\)

Vaillant did note "self-help groups, of which Alcoholics Anonymous is one model, offer the simplest way of providing the alcoholic with all four components referred to above."\(^\text{12}\) The same principle applies to Oxford House. It provides the benefits of prolonged hospitalization without the destruction of self-esteem. In fact, self-esteem is restored through the exercise of responsibility, helping others, re-socialization, and constructive pride in maintaining an alcohol and drug-free living environment without dependency upon any outside authority or helper.

The restoration of self-esteem or confidence in sobriety has been measured by comparing new residents of Oxford House with similarly situated individuals [new in recovery] who attend 12-Step Meetings but do not live in Oxford House.\(^\text{13}\) Majer and his colleagues at DePaul University found that the Oxford House living environment greatly increased abstinence self-efficacy and self-mastery. Specifically, their study concluded:

> Overall, findings suggest that cognitive resources facilitate substance abusers’ recovery and the Oxford House model provides recovering substance abusers with an environment that provides greater support in their development of cognitive resourcefulness for ongoing abstinence.\(^\text{14}\)

Subsequent studies have confirmed the importance of “self-efficacy in abstinence and the meaning in life” with respect to achievement of long-term recovery without relapse. In 2010, Majer and his colleagues interviewed 100 Oxford House resident equally divided between Mid-Atlantic region and Midwestern region with all residents given a Basic Information Survey [27 items] and a Treatment Involvement Survey [21 items]. Findings showed significant relationships between active 12-step involvement and increases in resources that sustain ongoing recovery, with treatment implications that addiction clinicians should target and encourage clients’ simultaneous involvement in a number of 12-step activities. The Oxford House living situation provided the time and place


\(^{11}\) Id. 301

\(^{12}\) Id. 301


\(^{14}\) Op. Cit. 62
for simultaneous involvement in a number of 12-step activities such as sponsorship, socialization around recovery activities and general getting comfortable with sobriety.

While this sort of self-reported data may be somewhat suspect, the Oxford House population has demonstrated a high degree of reliability. In 2007, for example, the DePaul research group completed a 27-month study of 897 Oxford House residents located in 219 houses across the country. At the being of the study period they had requested that each participant provide a third-party who knew them to certify the accuracy of their answers. When the third parties were contacted, it showed that 97% of the responses were verified. (Jason, Davis, Ferrari & Anderson, 2007). The article describing that study was published in *Addictive Behaviors* 32 (2007) and is downloadable from the Oxford House website: www.oxfordhouse.org under “Publications/Evaluations/DePaul” by clicking on “The need for substance abuse after-care: Longitudinal analysis of Oxford House.”

Oxford House residents are good subjects for researchers examining the recovery process because residents are part of a research-friendly culture and the quality control of Oxford House assures verification of sobriety or relapse. In Oklahoma, Oxford House residents go to an average of 4.4 formal AA/NA meetings each week with only five individuals in the survey [2%] not going to such meetings. All the meetings are normal 12-step meeting held in the community – not the particular house. This expands socialization beyond the individual living situation.

**How Oxford Houses Work**

Each individual Oxford House is chartered by Oxford House, Inc. [OHI]. The chartering procedure is a two-step process: (1) the issuance of a temporary charter, and [2] once the requirements of the temporary charter are met, the issuance of a permanent charter. This process becomes the foundation for the continuing operation of each Oxford House. It establishes and enunciates the core values of Oxford Recovery Homes. The charter has three simple conditions that the group must meet in order to call itself an Oxford House™:

- The group must be democratically self-run,
- The group must be financially self-supporting, and
- The group must immediately expel any resident who returns to using alcohol or drugs.

These three basic requirements: democracy, self-support and absolute sobriety, along with open-ended residency lie at the heart of what makes an Oxford House work.

**Democracy**

The requirement that the group be democratically self-run has both a practical and therapeutic value. The residents in an Oxford House save money by managing their houses themselves rather than paying employees to “look after them.” That is the practical aspect. But also, in managing the operations of their house, the residents gain self-esteem, accountability and the civic virtues of tolerance, responsibility and accountability.

**Self-Support**

The requirement of self-support also has both practical and therapeutic value. The Oklahoma Oxford House residents pay an average of $110 a week into their group household account as their equal share of household expenses. The range of weekly equal household share of expenses is from $85 to $145. More importantly, when the residents of an individual house pay their monthly bills, each

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15 60 of the 100 Oxford Houses in Oklahoma have achieved permanent charter status. The remainder is in the process of qualifying.
resident in the group gains the satisfaction of having behaved responsibly. This is new behavior for the recovering addict and a confidence builder that it is integral to the mastery of comfortable sobriety.

Absolute Sobriety

Finally, the requirement of the charter that any resident who relapses must be immediately expelled underscores that the primary purpose of the house is to gain sobriety without relapse. Whenever peers vote a resident out of the house because of relapse, each resident has the value of his own sobriety enhanced. Likewise voting new residents into the house is sobriety enhancing. The older house members want to set a good example for the new residents and in doing so reinforce their own sobriety.

Open-Ended Residency

The individual Oxford House becomes a safe haven for continuous sobriety. Because there is no time limit on how long a resident can live in an Oxford House, each individual can stay as long as it takes to become comfortable with sobriety without relapse. Experience has shown that sobriety – like addiction – is habit forming. More than 80% of the residents in Oxford Houses stay clean and sober. Only about 5% per month of the residents in Oklahoma Oxford Houses are asked to leave because of relapse.

At this time we do not have statistics about how many individuals who relapse and are expelled from a house will subsequently get sober and re-enter an Oxford House. We do have numerous examples of individual who fall into this category and are working with researchers to develop a tracking system. Our hypothesis is that well over fifty percent will “make it” the second time around.

Confidence Building From Mutual Support

Oxford House draws heavily upon American history; culture and tradition to build networks of Oxford Houses to enable long-term recovery from addiction to alcohol and other drugs.

Organization

Oxford House is unique among alcoholic and drug addict recovery homes because it has a standard cost effective system of development and operation. Three keys to development are rental of ordinary houses, simple charter conditions, and uniform operational procedures for each house. Rental, rather than building or owning a house, is important because not only does it keep property on the local tax roll but it also utilizes an existing readily available market. Just like an ordinary family an Oxford House family seeks to rent a good house in a good neighborhood.

The group becomes an identifiable entity by getting a charter from Oxford House, Inc. and a tax identification number from IRS. The charter makes the group part of the network of Oxford Houses and the tax identification number enables a group to open a checking account as its own unincorporated association. The charter has three specific conditions: (1) the group must be democratically self-run, (2) the group must be financially self-supported, and (3) the group must immediately expel any resident who returns to using drugs or drinking alcohol. The conditions are simple and straightforward. The Oxford House Manual© details the system of operation so that every house is able to meet the requirements of the charter and an on-site trained outreach worker who has lived in an Oxford House teaches the new residents the system of operation.

More than 187 trained outreach workers have traveled from Alaska to Australia to teach
others in recovery from alcoholism and drug addiction how an Oxford House™ works and to explain why living in an Oxford House™ is the best road for achieving recovery without relapse. The outreach worker is trained by Oxford House, Inc. and helps local recovering individuals with the following tasks:

- Finding a suitable house to rent
- Getting a charter from OHI
- Getting an FEIN number from IRS
- Recruiting initial residents
- Teaching residents the system of operations
- Building mutually supportive chapters
- Balancing supply of houses to demand
- Developing linkages to providers
- Developing employment linkages
- Documenting success/failure

Oklahoma provides resources for five outreach workers to help develop the statewide network of houses. The outreach workers not only teach resident how to run an individual house but also organize groups of houses into chapters to assure quality control.

A chapter is a grouping of three to twelve houses in an area in which the officers of the various houses meet once a month to share their strength, experience and hope with each other. The chapter meetings provide a means for helping all the houses to adhere to the time-tested procedures that should be used by each house. Chapters also expand the recovery-oriented socialization of the residents of all the houses by arranging group events ranging from picnics to bowling or softball leagues. Among the Oklahoma Oxford Houses there are currently 10 chapters [up from 7 in 2011]. During 2016, the Oklahoma chapters held five cookouts throughout the state to enjoy sobriety and share the good news about Oxford Houses with the recovery community at large.

When a chapter becomes too large for meaningful action, the houses will split a chapter into two chapters. Chapters in turn get together to form a state association. The Oklahoma Oxford House State Association has an annual conference so that residents can get to know each other better and work to expand the supply of Oxford House recovery beds. These events, along with periodic workshops held by the chapters themselves, provide ongoing education to new residents. This is important because annual turnover in houses averages about 2.1 times during the course of a year. Many OK residents attended the 2016 annual national Oxford House convention in Dallas. [See picture on page 19.]

In addition to the role chapters play in quality control of Oxford Houses outreach workers encourage members of the 12-step recovery community, treatment providers and landlords to let OHI know of any problems of individual Oxford Houses. They are provided the toll-free telephone number of Oxford House, Inc. [OHI] and encouraged to report problems. When OHI learns of a problem or potential problem, it immediately investigates and takes corrective action. Now in its 42nd year, OHI seldom has had to take corrective action but whenever it has had to the problem was quickly resolved.

The growth in the number of houses in the Oklahoma [illustrated in Table 1] shows that the process for replication of Oxford House works. From the outset the Oxford House Manual©, written in 1975, has been a good blueprint for recovering individuals living together to manage and operate a self-run, self-supported recovery home.

**Individual House Operation**

Each house uses the time-tested system of organization to effectively provide the living conditions essential for each house to operate. Weekly house meetings are held, five officers
are elected, everyone shares in the household chores and meeting of household expenses in an equal fashion. A close examination of the dynamics of each house shows that each house reflects a balance between order and individual liberty tempered by fairness. Equal treatment and equal responsibility are centered on the underlying goal for each individual to become comfortable enough in sobriety to avoid relapse and becomes a strong common bond. That common bond tends to take thousands of everyday chores and challenges and weave them into a solid foundation to support long-term recovery from addiction.

Simple things arising from the self-run group’s everyday success in living without booze or drugs re-enforce the value of sober living. For example, paying the landlord’s rent on time or the electric bill produces satisfaction for each individual in the group. That satisfaction adds an element of pleasure in the brain and at some point enough elements of personal pleasure associated with sobriety will become sufficient to offset the lingering pleasure the brain associated with using alcohol or other drugs.

Obviously each individual is different and the number of sobriety pleasure elements needed to assure recovery without relapse will vary. That is why there is no artificial time limit on how long an individual can live in an Oxford House. Some will stay only a few months and others will live in an Oxford House for years.

☐ ☐ ☐

Oklahoma Oxford House Resident Profile

The survey was completed by 88% of Oklahoma Oxford House residents who were asked to complete it during fall 2016. The sample is sufficiently large enough to accurately reflect the profile of residents.

The age of those residing in OK Oxford Houses averaged 36.3 years. As table 3 shows men in the sample were about two years older on average than women. This reflects the same average age for women in 2014 as in 2012 but a full year younger on average for males in 2014 than in 2012.

<table>
<thead>
<tr>
<th>Gender</th>
<th>Mean Age 2012</th>
<th>Mean Age 2014</th>
<th>Mean Age 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>37.9</td>
<td>36.9</td>
<td>36.3</td>
</tr>
<tr>
<td>Female</td>
<td>34.9</td>
<td>34.9</td>
<td>34.4</td>
</tr>
<tr>
<td>Both</td>
<td>37.1</td>
<td>36.3</td>
<td>36.6</td>
</tr>
</tbody>
</table>

Slightly more than 52% of the residents in Oklahoma Oxford Houses are between ages 33 and 46. About 23 percent are younger than 33 and about 26% are over age 47. The diseases of alcoholism and drug addiction are progressive and most of the residents would have some form of “alcoholism and/or drug addiction finally caught up with me” as the reason they were living in an Oxford House. This pattern seems to be true irrespective of race or gender, but as shown in Table 3 women are a little younger than men.

<table>
<thead>
<tr>
<th></th>
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</thead>
<tbody>
<tr>
<td>White</td>
<td>75.4%</td>
<td>81%</td>
<td>80.6%</td>
<td>78.8%</td>
</tr>
<tr>
<td>Black</td>
<td>7.7%</td>
<td>4.6%</td>
<td>5.5%</td>
<td>4.2%</td>
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<tr>
<td>Native American</td>
<td>9.0%</td>
<td>11.4%</td>
<td>8.3%</td>
<td>12.9%</td>
</tr>
<tr>
<td>Other</td>
<td>7.9%</td>
<td>3.0%</td>
<td>5.7%</td>
<td>3.6%</td>
</tr>
</tbody>
</table>

The racial composition of Oxford House residents in Oklahoma is not statistically different that the diversity of population within the state in general. It does have a slightly higher percentage of Whites and Native Americans than the percentage of those in the state.
Table 5

<table>
<thead>
<tr>
<th>Marital Status</th>
<th>2012 Percent</th>
<th>2014 Percent</th>
<th>2016 Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never Married</td>
<td>40.8%</td>
<td>48.0%</td>
<td>48.5%</td>
</tr>
<tr>
<td>Married</td>
<td>4.5%</td>
<td>6.6%</td>
<td>5.5%</td>
</tr>
<tr>
<td>Separated</td>
<td>11.2%</td>
<td>9.9%</td>
<td>7.9%</td>
</tr>
<tr>
<td>Divorced</td>
<td>40.8%</td>
<td>33.9%</td>
<td>36.2%</td>
</tr>
<tr>
<td>Widowed</td>
<td>2.6%</td>
<td>1.6%</td>
<td>1.8%</td>
</tr>
</tbody>
</table>

Most of the recovering alcoholics, drug addicts and those with co-occurring mental illness living in Oklahoma Oxford Houses had never married [48.5%]. If they had married, they were currently either separated [7.9%] or divorced [36.2%]. Only 5.5% are still married.

This status is typical for alcoholics and drug addicts in recovery. Addiction causes havoc on relationships. The changes between survey periods are interesting but not statistically significant.

As previously discussed, most of the residents have cycled in and out of treatment. [See Table 2.] More than a quarter of the residents had been through residential treatment four times or more. More than 10% had been through treatment eight times or more. The typical treatment outcome is relapse – except for those who get into an Oxford House. Relapse has other consequences as well. Homelessness is one and spending time incarcerated in jail or prison is another.

Almost every Oklahoma Oxford House resident [88%] had some jail time prior Oxford House living. Put another way all but 12 percent of the Oklahoma Oxford House residents had served some jail time prior to acceptance into an Oxford House. The average number of arrests leading to jail time is 4.8 and the average length of jail time is 29 months – over twice as long as the finding [358 days] in 2011. The change comes about in part because OHI outreach workers actively reach out to attract recovering individuals leaving incarceration.

Oxford House opens access to an alternative to relapse by providing the peer support, alcohol and drug-free living environment, disciplined democratic governance and open-ended residency. Everyone takes different lengths of time to master behavior change and in Oxford House a resident who stays clean and sober and pays an equal share of household expenses can stay as long as it takes to master sobriety. This change in living environment is particularly important for those leaving incarceration.

Last Prior Residence

When one looks at where a resident was living just prior to moving into an Oxford House it is easy to understand why Oxford House living reduces the risk of relapse. As shown in Figure 2, over 13 percent of the res-
idents were homeless immediately prior to moving into an Oxford House and 16.6% came directly from incarceration into an Oxford House.

Figure 2
Prior Residence Before Oxford House

About 13.4% of residents came to Oxford House immediately following homelessness. Another 31% came from jail, rented room, halfway house or mental hospital for a total of 45% coming from previous marginal living situations. The likelihood that those individuals would have been able to develop sobriety comfortable enough to avoid relapse without living in an Oxford House is remote. On the other hand, more than 80% of those individuals who do live in an Oxford House will be able to develop sobriety comfortable enough to avoid relapse.

The findings from this 2017 survey of residents in Oklahoma Oxford Houses are consistent with the finding of the 2007, 2009, and 2011 surveys.17

Alcoholism, drug addiction and co-occurring mental illness tend to be egalitarian and the effects caused by the diseases do not vary much among populations in different locations.

Veterans

Nationally about 18% of the Oxford House residents are military veterans even though existing Oxford Houses have limited outreach to VA hospitals and other places where vets are likely to congregate. The percentage of veterans in the Oklahoma Oxford Houses is less – 9% – far less than it should be.

Oxford House outreach workers have reached out to recruit recovering veterans to Oklahoma Oxford Houses. Nevertheless, the percentage of veterans is less than would normally be expected. Perhaps the VA facilities in the state should put a greater emphasis on the availability of Oxford Houses within the state. Just like other recovering individuals, veterans do well in the Oxford House environment. In 2011, DePaul University and the DePaul Community Research Center examined a subset of veterans living in Oxford Houses throughout the country. They found that:

Abstinence rates for the veteran subsample were high. Additionally, results suggested that participants experienced a reduction in anxiety and depression over time.18

The common-bond of past addiction and hoped for recovery provides a common ground for development of sobriety comfortable enough to avoid relapse. The degree of comfort includes development of habits that may require regular use of medication for psychiatric disorders [co-occurring mental illness] and behavior patterns that reduce periodic flashbacks associated with PTSD. In effect, the housemates of the vet with co-occurring mental illness are able to provide the tolerance and peer support for comfortable


sobriety that also reduces the stress in living with PTSD that can often exacerbate the problem. Slowly but surely the individual facing co-occurring mental illness is able to develop behavior that minimizes the symptoms that can lead to dysfunction. Because of the diversity of the Oxford House population and the disciplined democratic self-rule and self-support it provides a smooth transition for integration into society at large.

This ease of transition works for both those afflicted solely with addiction or with addiction plus an underlying psychiatric disorder including many forms of PTSD. Unfortunately, the Department of Veterans’ Affairs at the national level has seemed to lack focus on using resources not directly controlled by the agency itself. We are attempting to encourage it to utilize the cost-effective Oxford House program to serve veterans in recovery better.

**Education**

As with every other characteristic, the egalitarian nature of alcoholism and drug addiction cuts across the least and most education individuals in society. The educational level among Oklahoma Oxford House residents ranges from 7 at the fourth grade attainment level [6.6%] to 9 with post college graduate study [1.5%]. The educational attainment data is similar to such data in other states.

It is interesting to note that 24 of the 616 [out of total survey population of 625] who answered the survey question were presently pursuing study at community colleges or university. Oxford House living provided not only support for the recovery but inexpensive living accommodations while pursuing additional education.

The following figure illustrates the spread for educational attainment.

The mean educational level is 12.2 years – nearly the same as the national average age among Oxford House residents. It is not unusual that about half [47.5%] of the residents had completed high school but did not have additional education. While only 7% had graduated from college, nearly 32% had some formal education beyond high school graduation.

There is no relationship by educational level and the mastery of sobriety. Sobriety comfortable enough to avoid relapse is related to length of sobriety and the building of habits that focus on the value of not using any alcohol or other addictive drugs. The foundation for good habit building is not using alcohol or other addictive drugs a day at a time. The days accumulate and with the passage of time habits are formed to develop sobriety that is comfortable enough to avoid relapse.

While it is not required that residents of Oxford Houses attend 12-Step recovery meetings [AA/NA], almost all of the residents do because meeting attendance becomes part of the social life of living in an Oxford House. The reasons for this vary from following suggestions of others in recovery to as crass a motivation that attending a 12-Step meeting is an inexpensive social night out. The Oklahoma
Oxford House residents attend an average of 4.6 – up from 4.4. in 2011 – AA or NA 12-Step meetings every week. This is more than twice as many meetings the average for the average member of those 12-step groups.19

**Employment**

Most individuals living in an Oxford House get a job so that they can pay their equal share of household expenses. [Averaging about $110 a week.] Of those who participated in the survey 88.3% of the residents had employment with the remainder [11.7%] between jobs, looking for work or receiving retirement or unemployment benefits.

The average income of Oklahoma Oxford House residents is $1,652 – up about 20% from the average income of $1,417 found in the 2011 survey. The range of incomes is from a few hundred to $6,000 a month.

When considering monthly income keep in mind that the average weekly equal share of household expenses per resident is $110 a week up only $9 from 2011. The equal share of household expenses covers all the living costs for the resident except food, which is provided by each resident.

**How Residents View Oxford House**

The test of Oxford House viability comes from looking at the continuation and growth of the network of Oxford Houses in any area. The fact that the number of Oxford Houses in Oklahoma continues to expand is one piece of evidence that they are effectively serving individuals in recovery from alcoholism, drug addiction and co-occurring mental illness. Another piece of evidence comes from asking residents two relevent questions: [1] How important is Oxford House living to your sobriety and [2] would you recommend Oxford House living to someone else.

Survey participants were given a question that asked them to rank the importance of Oxford House living in relation to their current period of sobriety. The scale used ranged from ‘moderate’ to ‘insignificant’ with ‘not quite sure’ and ‘very’ included in the middle of the list. The vast majority [92.4%] found Oxford House living ‘very important’ to their sobriety. Only 3 individuals of the 609 who answered the question found it ‘insignificant.’ Everyone in the survey would ‘recommend’ Oxford House living to a friend in recovery.

**Prior Formal Treatment**

Attachment A shows the last prior formal treatment facility residents went through before moving into an Oklahoma Oxford House. For the average resident ‘prior formal treatment’ had happened 4.4 times before. Hopefully, living in an Oklahoma Oxford House is the last time treatment will be necessary. Most residents will stay clean and sober.

**Conclusion**

The network of Oklahoma Oxford Houses continues to grow and with continued support from the state and can be expected to grow even more. The graph in Attachment B shows the one of the major benefits from having a strong statewide network of Oxford Houses. The residents in the houses pay all household expenses and save the state a lot of money.

---

19 Every two years AA does a survey on meeting attendance and on average AA members attend 2 meetings per week.
<table>
<thead>
<tr>
<th>Rehab</th>
<th># of Residents Attended</th>
<th>Rehab</th>
<th># of Residents Attended</th>
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<tbody>
<tr>
<td>12 and 12</td>
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<td>Next Step</td>
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<td>ABHC</td>
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<td>Opportunities</td>
<td>3</td>
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<tr>
<td>Action Steps</td>
<td>2</td>
<td>Options</td>
<td>1</td>
</tr>
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<td>Parkside</td>
<td>1</td>
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<tr>
<td>Adult Rehabilitation Ctr</td>
<td>4</td>
<td>Pawhuska Treatment</td>
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<tr>
<td>Alpha 2</td>
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<td>Pellow House</td>
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<td>Ambrosia</td>
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<td>Ardmore Stabilization</td>
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<td>CAAIR</td>
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<td>Red River Recovery</td>
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<td>DARP</td>
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<td>Red Rock</td>
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<tr>
<td>NADTC</td>
<td>3</td>
<td>Road Back</td>
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<tr>
<td>NOCA</td>
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<td>TBCH</td>
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<td>Bridge to Recovery</td>
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<td>Salvation Army</td>
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<td>Choctaw Nation</td>
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<td>St. Anthony's</td>
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<td>Valiant House</td>
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<td>Van's House</td>
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<tr>
<td>House of Hope</td>
<td>12</td>
<td>Watershed</td>
<td>2</td>
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<tr>
<td>HOW Foundation</td>
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<td>Wings of Freedom</td>
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<tr>
<td>Human Skills</td>
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<td>My Brothers Keeper</td>
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<td>John and Bill's Mission</td>
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<td>LaPaloma</td>
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<td>Laureate</td>
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<td>Lifegate</td>
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<td>Lighthouse</td>
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<td>Midwest Regional</td>
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</tr>
<tr>
<td>Monarch</td>
<td>5</td>
<td></td>
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</tr>
<tr>
<td>Mirror</td>
<td>1</td>
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</tr>
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</table>
Residents of Oxford House pay an equal share of household expenses. The household expenses vary depending primarily on the amount of rent each group pays to the landlord to rent the particular house.
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<thead>
<tr>
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<tbody>
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<td>911 S. Broadway Avenue Ada, OK 74820-8227</td>
<td>601 S. Wortman Ave Claremore, OK 74017</td>
<td>707 E. Warner Ave Guthrie, OK 73044</td>
<td>2212 North Santa Fe Avenue Moore, OK 73160</td>
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<td>580-279-1191</td>
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<td>405-293-6544</td>
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<td>10 / M</td>
<td>Oxford House since Feb '12</td>
<td>Oxford House since Apr '17</td>
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<td>401 Campbell Drive Ardmore, OK 73401-1919</td>
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<td>7 / W</td>
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<td>405-826-6796</td>
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<td>7 / M</td>
<td>Oxford House since Mar '17</td>
<td>Oxford House since Mar '14</td>
<td>Oxford House since Jul '09</td>
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<tbody>
<tr>
<td>Broken Arrow, OK 74012-3320</td>
<td>216 E 29th St Edmond, OK 73013</td>
<td>300 Washington Ave McAlester, OK 74501-4449</td>
<td>1815 Elmhurst Dr Norman, OK 73071-1652</td>
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<tr>
<td>918-615-6687</td>
<td>405-513-5189</td>
<td>918-302-9263</td>
<td>405-310-6050</td>
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<tr>
<td>9 / W</td>
<td>Oxford House since Aug '12</td>
<td>Oxford House since Mar '15</td>
<td>Oxford House since Aug '12</td>
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<tr>
<td>1608 S Beech Ave Broken Arrow, OK 74012-6207</td>
<td>2717 Edgewood Dr Edmond, OK 73013</td>
<td>3624 Ridgewood Dr Midwest City OK, OK 73110</td>
<td>500 Claremont Dr Norman, OK 73069</td>
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<td>918-286-3505</td>
<td>405-859-3312</td>
<td>405-465-2131</td>
<td>405-701-3055</td>
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<td>9 / W</td>
<td>Oxford House since Sep '12</td>
<td>Oxford House since Nov '16</td>
<td>Oxford House since Oct '15</td>
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<tbody>
<tr>
<td>113 W Norman St Broken Arrow, OK 74012</td>
<td>1832 E Maple Avenue Enid, OK 73701-4504</td>
<td>2512 Crystal Drive Moore, OK 73160-5536</td>
<td>1534 Briar Meadow Rd Norman, OK 73071</td>
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<tr>
<td>918-806-8983</td>
<td>580-540-4563</td>
<td>405-703-1640</td>
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<td>11 / M</td>
<td>10 / M</td>
<td>8 / M</td>
<td>10 / M</td>
</tr>
<tr>
<td>Oxford House since Aug '15</td>
<td>Oxford House since Sep '11</td>
<td>Oxford House since Dec '04</td>
<td>Oxford House since Dec '15</td>
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<tr>
<td>112 E. 13th Place Claremore, OK 74017-4207</td>
<td>2913 W Maine Ave Enid, OK 73703</td>
<td>508 NE 20th Moore, OK 73160-7218</td>
<td>1907 Oakhurst Circle Norman, OK 73071</td>
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<tr>
<td>918-341-4626</td>
<td>580-297-5216</td>
<td>405-759-7621</td>
<td>405-310-4369</td>
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<td>7 / M</td>
<td>Oxford House since Jan '16</td>
<td>Oxford House since May '13</td>
<td>10 / WC</td>
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<tr>
<td>Oxford House since Jul '08</td>
<td>Oxford House since May '16</td>
<td>Oxford House since Jul '16</td>
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<tr>
<td>109 E 4th Street Claremore, OK 74017-7403</td>
<td>1226 N. Grand Ave. Enid, OK 73701</td>
<td>116 SW 14th Street Moore, OK 73160</td>
<td>2107 Westwood Drive Norman, OK 73069</td>
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<tr>
<td>918-923-6697</td>
<td>405-826-6818</td>
<td>405-703-7118</td>
<td>405-310-3134</td>
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<td>9 / M</td>
<td>Oxford House since Sep '10</td>
<td>Oxford House since Jun '16</td>
<td>Oxford House since Jul '16</td>
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</table>
Oxford House - Briarwood Park
8513 East 34th Street
Tulsa, OK  74145-1532
918-622-2442
8 / M
Oxford House since Mar '04

Oxford House - Fontana
5345 S 76th E Ave
Tulsa, OK  74145-7838
918-764-9266
10 / M
Oxford House since Nov '07

Oxford House - Opportunity
8742 E 30th Street
Tulsa, OK  74129
918-561-6144
8 / M
Oxford House since Sep '14

Oxford House - Braden Park
1217 S Yale Ave
Tulsa, OK  74112
918-392-4788
11 / M
Oxford House since Mar '17

Oxford House - Millwood Estates
3829 S. 98th East Avenue
Tulsa, OK  74146-2424
918-764-9176
9 / M
Oxford House since Oct '04

Oxford House - Burning Tree
6414 South 86th E. Ave
Tulsa, OK  74133-7621
918-286-2311
10 / M
Oxford House since Nov '08

Oxford House - South Park Plaza
7440 E 70th St
Tulsa, OK  74133
918-286-1663
11 / M
Oxford House since Oct '14

Oxford House - Mustang
2000 Lankestar PL.
Yukon, OK  73099
405-494-9879
10 / M
Oxford House since Apr '16

Oxford House - Rockwood Hills
7217 S. Columbia Ave
Tulsa, OK  74136-5524
918-619-6227
9 / M
Oxford House since Nov '05

Oxford House - Memorial South
7610 E. 58th Place
Tulsa, OK  74145-9405
918-508-2118
10 / M
Oxford House since May '09

Oxford House - Tulsa
4207 E 64th St.
Tulsa, OK  74136
918-398-6418
11 / M
Oxford House since Nov '14

Oxford House - Darlington
1784 S. Darlington Avenue
Tulsa, OK  74112-6920
918-764-9210
10 / M
Oxford House since Aug '06

Oxford House - Patterson Estates
6436 S. 87th East Avenue
Tulsa, OK  74133-7623
918-994-7247
10 / W
Oxford House since Jul '09

Oxford House - Scissortail
6920 S. 77th Avenue
Tulsa, OK  74133
918-936-0267
9 / WC
Oxford House since Jun '15

Oxford House - Leisure Lanes
1540 S. 69th East Avenue
Tulsa, OK  74112-7437
918-794-1531
6 / W
Oxford House since Mar '07

Oxford House - Rustic Hills
3726 E. 59th Place
Tulsa, OK  74135-7824
918-292-8113
9 / M
Oxford House since Dec '09

Oxford House - Jamestown South
6325 S. Jamestown Ave.
Tulsa, OK  74137
918-340-7170
9 / M
Oxford House since Aug '15

Oxford House - Shadow Mountain
6031 S 76th East Ave
Tulsa, OK  74145-9340
918-619-6358
6 / W
Oxford House since Dec '05

Oxford House - East Wedgewood
6609 S. 112th East Ave
Tulsa, OK  74133-2630
918-893-1445
10 / W
Oxford House since Jan '12

Oxford House - Progress Way
2537 E 56th St
Tulsa, OK  74105
918-960-2852
7 / MC
Oxford House since Jun '16

Oxford House - Woodridge
2611 E 71st Place
Tulsa, OK  74136-5530
918-728-8529
11 / M
Oxford House since Feb '06

Oxford House - Tulsa Mid-Town
1616 S. Norfolk Ave
Tulsa, OK  74120-6224
918-619-9469
8 / W
Oxford House since Feb '12

Oxford House - Regime
6044 S 72nd East Ave
Tulsa, OK  74145
918-728-8518
12 / M
Oxford House since Jul '16

Oxford House - Shirley Ann
1609 S 69th East Avenue
Tulsa, OK  74112-7438
918-794-6662
6 / WC
Oxford House since Mar '08

Oxford House - Terrace Manor 2
1309 Terrace Dr
Tulsa, OK  74104-4409
918-794-4672
11 / M
Oxford House since Jun '12

Oxford House - Redemption
8015 S. 87th E Ave
Tulsa, OK  74133
918-286-6367
10 / M
Oxford House since Oct '16

Oxford House - Leslie Leigh
11604 E 23rd Place
Tulsa, OK  74129-5620
918-398-6523
8 / WC
Oxford House since Mar '08

Oxford House - Enclave
9144 S 69th East Ave
Tulsa, OK  74133-5305
918-661-6320
9 / M
Oxford House since Jan '14

Oxford House - Holtzclaw II
6444 S 87th East Ave
Tulsa, OK  74133
918-286-0518
10 / WC
Oxford House since Nov '16

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31 for Women
70 for Men
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1010 Wayne Avenue, Suite 300
Silver Spring, Maryland 20910

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