West Virginia Network of Oxford Houses

July 2020

Oxford House, Inc.
1010 Wayne Avenue, Suite 300
Silver Spring, Maryland 20910

Telephone: 301.587.2916
Website: www.oxfordhouse.org
About Oxford House, Inc.

Oxford House, Inc. is the Delaware nonprofit, 501(c)(3) corporation that serves as the umbrella organization of the worldwide network of more than 2,900 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 recover from alcoholism, drug addiction or co-occurring mental illness. They also learned that Oxford House™ provided the living environment that could help them become comfortable enough with recovery 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. The average number of residents per house is about 8 with a range per house of 6 to 16.

Oxford Houses work because they have no time limit on how long a resident can live in an Oxford House™ and because they all adhere to the charter conditions that require that [1] the group must be democratically self-run following the policies and procedures of the Oxford House Manual©; [2] the group must be financially self-supporting; and [3] the group must immediately expel any resident who returns to using alcohol or illicit drugs.

Oxford House™ charters are provided free to groups of 6 or more recovering individuals of the same gender starting an Oxford House™. Oxford Houses provide the time, peer support and structured living environment necessary for long-term behavior change to take hold.

The oldest Oxford House in West Virginia started May 14, 2007 and provides home to six women. The House has served 166 recovering individuals and approximately 130 stayed clean and sober while living in the house. Today, there are 35 Oxford Houses in West Virginia. This report is a profile of the statewide network of Oxford Houses.

Oxford House™ was the only recovery-housing program listed on the 2011 federal National Registry of Evidence-based Programs and Practices [NREPP]. Oxford House™ was also singled out in the 2016 Surgeon General’s Report “Facing Addiction in America.” Moreover, more than 200 DePaul University studies since 1992 have confirmed the value of Oxford House™ in fostering long-term recovery.

Silver Spring, Maryland
August 10, 2020

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The West Virginia Oxford House Survey

In late November 2019, 127 of the then 146 West Virginia Oxford House residents [87%] completed a detailed survey describing them and their recovery progress. The survey questions have been asked of Oxford House residents since 1988. The surveys provide an indication of who is being served by Oxford House™ and how Oxford House living is fueling their road to long-term recovery.

This report presents the results of the survey and describes how Oxford Houses fit into the continuum of care that many professionals believe is essential for long-term recovery from alcoholism, drug addiction and co-occurring mental illness. In 2011, Oxford House™ was listed as a best practice on the federal government’s National Registry of Evidence-based Program and Practices [NREPP] maintained by SAMHSA. In 2016, the then, Surgeon General, in his report, “Facing Addiction” singled out Oxford House™ as a model for recovery homes. The current Surgeon General reiterated that conclusion when he spoke at the 2019 Oxford House World Convention in Washington, DC.1

Part 1 – Profile of the Current West Virginia Oxford House Population
Part 2 – How Oxford Houses Work
Part 3 – Research and Oxford House
Part 4 – List of West Virginia Oxford Houses

Oxford House Blueprint for Success

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1 Videos of the convention are available on the Oxford House website at [www.oxfordhouse.org](http://www.oxfordhouse.org).
2020 West Virginia Oxford House Survey Results

The table presents the results of a confidential survey given to all the residents living in WVA Oxford Houses in November 2019. Responses were received from 127 of the 146 individuals then in residence, yielding a response rate of 87 percent.

| Total Number of Oxford House residents who completed the survey: [87% of residents] | 127 | Average Age of residents: (Range 19 – 65: Median 33) | 34.2 Years |
| Number of Men in survey: | 81 | Number of Women in survey: | 46 |
| Average Weekly Cost Per Person for household expenses [Range $80 to $135] | $110 | Rent Per Group Per Month Average: (Range $785-$3000 per month) | $1,280 |
| Percent Military Veterans: | 5.5% | Average Years of Education (Median 12) | 12.1 |
| Residents Employed 11/30/2019: | 81.1% | Average Monthly Earnings: [Median $1,000] | $1,208 |
| Addicted to only Alcohol: | 11.2% | Addicted to Alcohol and other Drugs: (Opioids 88.9; MAT 64.2) | 89.8% |
| Race— | White 92.1% | Marital Status— | Never Married 59.1% |
| Black 3.2% | Separated 5.5% |
| Native American 3.1% | Divorced 29.1% |
| Hispanic .8% | Married 4.7% |
| Other .8% | Widowed 1.6% |
| Prior Homelessness: | 83.5% | Median Time Homeless: [Median Times 2] | 6.0 Mos. |
| Prior Jail: | 93.7% | Average Jail Time: Median Jail Time: | 19.2 Mos. 9 Mos. |
| Percent going to AA or NA | 98% | Average Number AA or NA Meetings Attended Per Week: | 5.0 |
| Percent Going To Counseling in addition to AA or NA (weekly): | 36.2% | Average Length of Sobriety of House Residents: | 11.1 Mos. |
| Residents Expelled During FY 2020 Because of Relapse: | 23.5% | Average Number of Applicants For Each Vacant Bed: | 4+ |
| Average Length of Stay In An Oxford House: | 9 Mos. | New Houses started in FY 2020 | 8 |

Number of West Virginia Oxford Houses and Beds as of July 20, 2020

| Number of Men’s Houses: | 24 | Number of Men’s Recovery Beds: | 179 |
| Number of Women’s Houses: | 11 | Number of Women’s Beds: | 83 |
| Total Number of WVA Oxford Houses | 35 | Total Number of OH Beds | 262 |
Background

West Virginia began supporting the development of self-run, self-supported Oxford Houses in 2007. Slowly but surely, a strong statewide network of 35 Oxford Houses has spread throughout the state.

During November of last year, West Virginia Oxford House residents completed a detailed survey about their addiction and Oxford House living with 127 of the then 146 residents [87%] completed the survey. The survey provides a snapshot of the persons living in the statewide network of Oxford Houses in West Virginia that began in 2007. The four houses shown below have all been operating for more than 10 years and provide the foundation for today’s network of 35 West Virginia Oxford Houses.

These are all ordinary single-family houses that are being used for the extraordinary purpose of providing groups of individuals recovering from addiction the opportunity to gain the peer recovery support they need to become comfortable enough in recovery to avoid relapse.
Part 1 – Profile of the Current West Virginia Oxford House Population

When the current residents were surveyed in November 2019, 127 [87%] of the then 146 West Virginia Oxford House residents completed the survey. All the existing houses participated and 64% of the participants were men and 36% were women. Today, there are 11 women’s Oxford Houses in the state and 24 men’s houses, which is about the same ratio as the gender ratio of respondents in the survey.

The Oxford House bed space throughout the state is 179 for men and 83 for women [total beds 262]. There are 5 Oxford Houses for women with taking women with children. During FY 2020 [July 1, 2019 – June 30, 2020], the statewide network of Oxford House served 868 individuals. Of the number of individual living in West Virginia Oxford House in FY 2020, 204 were expelled because of relapse [23.5%]. (For more discussion of relapse see the section on treatment history on the next page.)

Distribution of Recovery Within Houses

Within each Oxford House there are differences in lengths of residents’ sobriety. Partly because there is no time limit on residency within an Oxford House, individuals are able to stay as long as they want provided, they do not drink alcohol or use illicit drugs. This factor contributes greatly to the overall success rate of Oxford House living because every individual is different. Some adapt to the behavior change needed for long-term recovery quickly; others take years to become comfortable enough in behavior needed to assure long-term recovery. Because replication of individual Oxford Houses is relatively simple, it takes place all the time. For example, in 2016 – just four years ago – there were only 13 Oxford Houses in the state. Today the state has 35 Oxford Houses – over a 270% increase.

The current length of sobriety does not necessarily mean that an individual’s total time of recovery falls within the time frame of living in an Oxford House. Some individuals may have some length of sobriety before moving into a house. For example, the survey shows that 20% of the respondents have 2 years or more of sobriety. Some may have picked up sober time in prison before coming into an Oxford House. On the other hand, several individuals with more than five years of sobriety have lived in an Oxford House for most of their time in recovery. The various lengths of recovery time allow “new-comers” to gain a variety of testament to the value of long-term recovery from the “old-timers” in recovery.
Treatment History

The federal government maintains the Treatment Episode Data Set [TEDS] which identifies the prior treatment characteristics for the one in seven individuals who actually get treatment. The TEDS data shows that the average prior treatment episodes for those in treatment is a little more than three previous treatment episodes. A remarkable 15% of those in treatment have been in treatment previously five times or more. Fewer than 25% are in treatment for the first time.

The prior treatment episodes for the Oxford House population also shows repeated times in formal treatment usually followed by relapse. As a matter of fact, many professionals in the field proclaim relapse is part of the disease. Oxford House™ from its beginning has emphasized that relapse does not have to be the norm. All of its emphasis is on recovery without relapse.

Table 1
Percent of Prior Treatment Tries

<table>
<thead>
<tr>
<th>No. of Sobriety Tries in Formal Treatment</th>
<th>VA</th>
<th>OK</th>
<th>TX</th>
<th>NC</th>
<th>WV</th>
</tr>
</thead>
<tbody>
<tr>
<td>One</td>
<td>16.1</td>
<td>25.6</td>
<td>23.9</td>
<td>18.2</td>
<td>22.3</td>
</tr>
<tr>
<td>Two</td>
<td>24.2</td>
<td>23.5</td>
<td>18.8</td>
<td>20.0</td>
<td>18.9</td>
</tr>
<tr>
<td>Three to Five</td>
<td>41.9</td>
<td>27.4</td>
<td>31.9</td>
<td>44.1</td>
<td>27.7</td>
</tr>
<tr>
<td>Six to Ten</td>
<td>12.9</td>
<td>16.7</td>
<td>13.8</td>
<td>10.9</td>
<td>16.8</td>
</tr>
<tr>
<td>More than Ten</td>
<td>04.8</td>
<td>6.8</td>
<td>11.6</td>
<td>06.3</td>
<td>14.3</td>
</tr>
</tbody>
</table>

Even though 22% of the individuals living in West Virginia Oxford House during FY 2020 were asked to leave because of relapse, the majority of residents were expelled for using alcohol or illicit drugs. Oxford House does not track individuals after they stop living in an Oxford House, but studies suggest that the system of operations and the open-ended residency policy enables the development of long-term recovery. A National Institute of Drug Abuse [NIDA] financed study by DePaul University [Grant # DA 13231] followed 897 residents living in 219 Oxford Houses across the county for 27 months. The DePaul researchers found that only 13% returned to using alcohol or illicit drugs. The DePaul study did take place in 2007 – a number of years before the current opioid epidemic.

While 89.8% of the surveyed West Virginia Oxford House residents abused opioids, not all are using medically assisted treatment. As a matter of fact, 64.2% are in medically assisted treatment [MAT]. For most of those, the medicine is buprenorphine although several are on methadone. In a recent article in ALCOHOLISM TREATMENT QUARTERLY, John Majer, PhD, Leonard Jason, PhD and others found that “Oxford Houses provide valuable social support that helps persons utilizing MATs in their recovery.”

Because prior opioid users are in the Oxford House population, each Oxford House group teaches its residents about the use of Narcan. The survey did not inquire as to whether or not opioid overdoses had occurred to residents during the past year. However, Oxford House outreach personnel train house residents to have and be able to use Narcan.

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2 There are about 25 million alcoholics, drug addicts and those with co-occurring mental illness. Of that number, fewer than 1.7 million get formal treatment each year. TEDS data includes information from the annual pool of those in treatment.

3 Addictive Behaviors 32 (2007) 803-818

4 ALCOHOLISM TREATMENT QUARTERLY, 2020, VOL. 38, NO. 2, 199–214
https://doi.org/10.1080/07347324.2019.1678445
Racial Diversity

The egalitarian nature of alcoholism and drug addiction cuts across all racial and ethnic groups of individuals. The graph below reflects the diversity of the WV Oxford House population.

This diversity is reflected in the individual houses throughout the state. African Americans are a little under-represented and White only are a little over-represented relative to state census data. However, the diversity is significant and the further development should eventually parallel the diverse population of the state. Fortunately, the already wide-spread distribution of Oxford Houses throughout the state, enables development around the initial clusters of Oxford Houses. The picture of a South Carolina map on the cover of this report illustrates the concentration of houses [numbers on the yellow dots] in the larger cities of the state.

Marital Status

Well over half of the residents in West Virginia Oxford House residents [59.1%] have never been married. Moreover, addiction wreaks havoc with relationships and over thirty percent who had been married are divorced or separated by the time they arrive at an Oxford House. The graph at the left illustrates the distribution of marital status among the residents in the West Virginia network of Oxford Houses. This finding tracks the marital status of residents in the national network of Oxford Houses. However, the “never married” category is about 5% higher for West Virginia residents and this factor is probably related to the fact that residents in West Virginia Oxford Houses are quite a bit younger than Oxford House residents in other states. [See below.]

Age of Residents

The average age of residents in West Virginia Oxford Houses is 34.2. The ages range from 19 to 65. The median age is 33 which is about 6 years younger than the national average median age. There seems to be two reasons for the younger average and median ages: [1] the opioid epidemic has adversely affected younger individuals and [2] the rapid growth in the number of WV Oxford Houses means that there fewer “old-timers” in the statewide network of Oxford Houses.

West Virginia Oxford Houses have a lower percentage of veterans [5.5%] than do networks of houses nationally [18%]. This may be because the overall age of residents is younger. Nevertheless, OHI will increase its outreach to veterans particularly in Martinsburg.
Education

The diversity of the Oxford House population is also demonstrated by the variation in educational attainment among the residents. The highest level of formal education among the West Virginia Oxford House residents ranges from the 2nd grade to graduate degrees. The range of educational attainment level among residents serves as a reminder of the egalitarian nature of alcoholism, drug addiction and co-occurring mental illness. The average educational attainment level is 12.1 years, which is identical to the national average of 12.1 years. The median, however, is exactly 12 years. Since 23% of the residents have not obtained high school graduation, the state and OHI should make certain that all the Oxford Houses in the state have up-to-date information about how to obtain a GED. In some states, community colleges and universities welcome Oxford House residents and the residents take advantage of their open-ended residency in an Oxford House to gain further education. The University of North Carolina at Chapel Hill has two Oxford Houses dedicated to students and there are 17 other Oxford Houses in Chapel Hill where some students live. When the Covid-19 pandemic passes, OHI will reach out to community colleges and universities in the state to share how some schools are using Oxford Houses to support recovery among students.

Employment

The survey of residents took place in November 2019. The national shutdown because of the pandemic had not begun. Unsurprisingly, 81.1% of respondents were employed. The average monthly income – from both employment and other sources – was $1,208 yet lower than the June 2019 national average of $1,695.

The median income is $1,500. Since the equal expense share cost of living in an Oxford House averages $110 per week [range $80-$135] in West Virginia, the income per person is more than adequate. The equal expense share covers all household expenses except for a resident’s food. The largest household expense is the rent the group pays the landlord, which in West Virginia averages $1,280 a month with a range from $700 to $3,000 a month.

Prior Living Situation

Almost all residents of Oxford House are enjoying a significant improvement in living arrangements over what they had before moving into an Oxford House.
A third [33%] of the individuals who moved into an Oxford House were previously living in what can best be described as marginal living situations homeless, jail or halfway house. The 31.5% “living with family” could be added to the marginal living situation in most cases. In all cases prior living failed to get or keep the individuals on the path to recovery. If it had, they would not have applied to and accepted approval to move into an Oxford House.

Homelessness

When we look at the survey responses in more detail past homelessness and incarceration stand out. 82.5% of all respondents experienced homeless at least twice and for a median length of time of 5 months. When an addict goes through detoxification and returns to homelessness, the chance that he or she will stay clean and sober is very unlikely. For the person who has been homeless to move into an Oxford House the difference is great. Among other things a person has a safe place to live rather than a crowded homeless shelter or the streets. A person also has his or her own key to a real house in a real neighborhood. For many that fact along provides a sense of self-esteem and pride.

The fact that the Oxford House provides a safe, clean and comfortable living environment is in and of itself a big incentive to continue on the path of recovery. To stay in that place to live requires not taking a drink of alcohol or using an illicit drug because such action would result in immediate expulsion. Postponing taking a drink of alcohol or using an illicit drug becomes a small price to pay for staying in an Oxford House. Soon days become weeks and weeks month and recovery becomes a valuable habit. The Oxford House resident has substantially increased the odds that long-term recovery without relapse is likely.
Jail Time

The vast majority [93.7%] of West Virginia Oxford House residents have served jail or prison time. The median time of incarceration is 9 months with an average of 19.2 months. The range of incarceration is from a few days to well over ten years. Most have been introduced to recovery programs while in jail or prison. In the 12-Step programs there is a saying that addicts in recovery need to avoid the places, people and things associated with their addictive use. That is easier said than done but, for individuals leaving jail or prison, Oxford House becomes a feasible way to avoid the old associates and old neighborhoods. Nearly a ten percent of the residents came directly from jail or prison into an Oxford House.

12-Step Meetings and Counselling

Not only does living in an Oxford House provide 24/7 peer recovery support but the living environment encourages attending a lot of 12-Step meetings outside of the house. The respondents indicated that the average number of such meetings they attend each week is 5. That number is more than twice the number the person not living in an Oxford House attends. For example, AA tries to estimate the number of AA meetings members attend each week and have found that is slightly more than two a week.

In addition to attending lots of AA/NA meetings 28.6% of respondents to the survey indicated they attended weekly counselling sessions with a therapist. Many of these individuals were participants in medically-assisted treatment programs.

Importance of Oxford House Living to Recovery

Respondents to the survey were asked two questions to measure their personal satisfaction with Oxford House: [1] how important is it to your own recovery, and [2] would you recommend it to others? Fewer than 6% would not recommend Oxford House to others and 98% felt it was very important to their own recovery. It should be noted that four respondents who would not recommend Oxford House to others, had each been in Oxford House less than one month. Only one individual with more than one month’s residence would not recommend Oxford House to others.
Part 2 – How Oxford Houses Work

Each Oxford House™ is self-run and self-supported. Within the Oxford House™ community, it is often remarked that “The inmates run the asylum.” They do. Such participatory democracy not only is cost efficient, but it also provides the foundation for personal change. Each resident rises to the occasion whether it is by voting on acceptance of a new resident, expelling a resident who relapses, carrying out the duties of being a house officer, or simply voting on an issue at a weekly house business meeting. All of the processes and procedures are set forth in the Oxford House Manual© and related materials. With the mutual support and supervision that individual Oxford Houses provide for each other through chapters and statewide associations, uniformity and quality control is assured. In West Virginia, one can visit an Oxford House in Morgantown, Huntington, , Charleston, Clarksburg or anywhere else in the state and immediately recognize that the particular recovery group within each house is following the same set of procedures and protocols. Oxford House, Inc. has not only provided a full set of operational manuals but also has taken the time to teach the group the basic procedures than enable a recovery group to function well. Visiting any one of the more than 2,900 Oxford Houses throughout the country provides the same affirmation.

Each weekly House business meeting illustrates participatory democracy and pragmatic problem-solving in action. Each meeting opens with a reading of one of the nine Oxford House Traditions. This underscores the purpose of Oxford House and sets the tone for the entire meeting. The House President calls the meeting to Order and asks the Secretary to read the minutes of the last business meeting. The minutes are then either accepted by majority vote or amended based on a motion to amend followed by majority vote. Robert’s Rules of Order dictates parliamentary procedures. The Treasurer reports on the balance of the group’s checking account; the Comptroller reports on whether every resident is up to date in paying an equal share of household expenses; and the Chore Coordinator reports on how well the residents have adhered to the chore list during the previous week. The group then considers new business, which may range from a personality issue within the house or plans for a social event such as a picnic or bowling.

Just as many large families have get-togethers to share each other’s company and knowledge, Oxford Houses do too. The officers of each individual house get together once a month at a Chapter meeting. Those meetings also follow disciplined procedures and elect officers. They also stage events to enjoy getting together in non-drinking, non-using “fun” activities.

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5 Oxford House is organized from the bottom-up. In addition to the basic Oxford House Manual© there is an Oxford House Chapter Manual©, an Oxford House World Council Manual© and an Oxford House State Association Manual©. Along with a growing number of standardized forms these manuals provide a definitive blueprint for each Oxford House to uniformly follow processes and procedures that reflect the successful formula that makes Oxford House™ the only best practice listed on the National Registry of Evidence-base Programs and Practices.
Common to all Oxford Houses is participatory democracy and pragmatic problem-solving whether it involves personality problems or a broken dishwasher. If there is a problem the group faces it and comes up with ways to resolve it. Each resident has an equal vote and pays an equal share of household expenses. Stigma associated with recovery from addiction is discouraged but stigma with respect to active addiction is not discouraged. A return to active addiction results in immediate expulsion from an Oxford House. The reason for this is that active addiction almost always results in bad behavior that adversely affects the individual and his or her family and community.

Not everyone masters the new behavior necessary to stay away from using alcohol or other addictive drugs at the same pace. Some quickly adapt and some take a lifetime. The Oxford House concept is based on easy expansion of a supply of beds – simply rent another house – rather than arbitrarily limiting the time of residency one individual in order to make room for another. When a particular house is staying full, stable and operating well, renting another house is the better way than imposing a time limit on residency in order to make room for the newcomer.

The “expanding to meet the need” is something that began 45 years ago in the first Oxford House. The beds were full. Newcomers to recovery applied and needed a place to live that support their road to recovery. The men in the first Oxford House pooled their resources after just three months of existence and rented a second house. That spirit of expanding to meet the need has followed the Oxford House model across West Virginia and the 48 other states.

As suggested by the picture above of three basic Oxford House Manuals, expanding to meet the need has required organization of chapters, conventions, training sessions, state associations and periodic conventions in order for houses to monitor the performance of each other. The charter conditions are simple, but they require everyone’s support to help keep the model on track.
Part 3 – Research and Oxford House

OHI relies on internal and third-party research to understand better not only the recovery process, but also, more specifically, the role Oxford Houses can play in making long-term recovery without relapse the norm rather than the exception. The independent third-party research began in 1987 when Bill Spillaine, Ph.D., started teaching at Catholic University after he retired from NIDA. Dr. Spillaine asked to review the outcome records of individuals who had lived in an Oxford House from its beginning in 1975 through 1987. Everyone living in all 13 Oxford Houses at that time agreed to cooperate with him. Dr. Spillaine tracked down more than 1,200 former Oxford House residents to learn how many had stayed clean and sober. When he came to the leaders of Oxford House and reported that 80% had stayed clean and sober without relapse, the leaders asked, “What are we doing wrong to have 20% relapse rate?” Dr. Spillaine explained that the normal rate of sobriety without relapse was less than 20% and that the Oxford House resident outcome was exceptionally good. Spillaine’s report fueled interest in Congress to include a provision in the 1988 Anti-Drug Abuse Act [§2036 of PL 100-690, codified at 42 USC 300x-25] to encourage states to promote Oxford House development. That small start-up loan provision became the catalyst that helped Oxford House grow from 13 houses in the Washington, DC area to a national network of more than 2,900 houses.

Independent third-party research about Oxford House took off following a 1991 CBS “60 Minutes” segment about Oxford House. Dr. Leonard Jason, head of the DePaul University Community Research Center saw the program and immediately became interested in researching how Oxford Houses worked. His organization has now published more than 200 peer-reviewed articles and studies about Oxford House and its effect on recovery from addiction. One of his studies followed 897 residents in 219 Oxford Houses across the country and found that over a 27-month period only 13% had returned to active addiction. A 2004 study by John Majer, PhD, compared recovery between regular 12-Step meeting attendees who live in an Oxford House and those who do not. His conclusion:

This study investigated two community samples of recovering substance abusers in which participant response came from natural settings, and this adds to the credibility of findings. Overall, findings suggest that cognitive resources facilitate substance abusers’ recovery and that the Oxford House model provides recovering sub-stance abusers with an environment that provides greater support in their development of cognitive resourcefulness for ongoing abstinence.7

Research has been key to concluding that Oxford House™ can enable individuals to achieve long-term recovery without relapse. Because ‘recovery without relapse’ is the desired norm, not the exception, every Oxford House resident tries to accept responsibility for being a productive member of his or her Oxford House and also learn to have fun without the use of alcohol or drugs. By developing a new lifestyle, individuals gain confidence that life with using alcohol or illicit drugs is possible. That confidence carries over whenever a resident moves out of an Oxford House clean and sober. It has also produced general acceptance in the addiction treatment field that Oxford House living is an effective path to long-term recovery.

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6 Addictive Behaviors 32 (2007) 803-818
7 Assessment, Volume 11, No. 1, March 2004 57-63
The 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:

- 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 Oxford House program was listed as a best practice on the National Registry of Evidence-based Programs and Practices [NREPP] in 2011. The NREPP was a searchable online registry of mental health and substance abuse interventions that have been reviewed and rated by independent reviewers. The purpose of the 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. The Oxford House Model is the only recovery house concept and system of operation listed on the NREPP.

The annual Oxford House National Convention has become a place where experts in the field of addiction present their most recent finding about the nature of alcoholism, drug addiction and the process of long-term recovery. Every Director of the federal Office of Drug Control Policy has been a speaker at the convention as have other leaders in the field of alcohol and drug addiction.

At the Oxford House 2019 Convention, the first General Session included the following speakers: Dr. William Compton, Deputy Director of NIDA; Dr. Westley Clark, former 20-year Director of CSAT; Dr. Stuart Gitlow, former President ASAM; Dr. Jerome Adams, current Surgeon General, Dr. Joshua Sharfstein, head of Bloomberg Health Initiative at Johns Hopkins, Leonard Jason, PhD at DePaul University and Dr. John Kelly of Harvard. A video of the session is available on the Oxford House website: [www.oxfordhouse.org](http://www.oxfordhouse.org).

Dr. John Kelly of Harvard emphasized that alcoholism and illicit drug addiction are chronic diseases and require measurement over time. Kelly used five-point criteria for measuring the predictability of long-term successful recovery: Quality of Life; Happiness; Recovery Capital; Self-Esteem and Psychological Distress. At the five-year point following the start of recovery, life becomes balanced and continues to get even better. The Oxford House model is particularly well suited to help those new in recovery to make it to and beyond the initial five years.
The on-going research underscores that there are many paths to recovery. However, basic to any sure path of recovery is the need to recognize that every individual has unique characteristics that require time and a lot of support to bring about change. Dr. Kelly’s five-factor criteria for successful recovery provides the metrics for measuring an individual’s progress toward an increase in quality of life, happiness, recovery capital and self-esteem while having a decrease in psychological distress.

It is becoming increasing clear that the self-help aspects of the Oxford House model provide a common purpose and sturdy support in achieving a comfortable and life-long recovery.

Pictured above are WV Oxford House residents and alumni at the 2019 Annual Oxford House National Convention in Washington, DC over Labor Day weekend.
Benwood

Benwood
419 Main St
Benwood, WV  26031
304-905-9061
6 / M
Oxford House since 8/1/2015

Fairmont

Komorebi
607 Coleman Ave
Fairmont, WV  26554
304-989-2532
7 / M
Oxford House since 7/1/2018

Fika
615 6th Ave
Huntington, WV  25701
9 / M
Oxford House since 3/1/2020

Charleston

Park Drive
707 Main Street
Charleston, WV  25302-1709
681-265-2635
6 / M
Oxford House since 10/1/2008

Wolverine
1118 Gladden St.
Fairmont, WV  26554
8 / WC
Oxford House since 11/30/2019

Matinsburg

Wallace
513 Wyoming Street
Charleston, WV  25302-2031
681-265-0500
7 / M
Oxford House since 7/18/2011

Cabell
2409 9th Avenue
Huntington, WV  25703-1917
681-204-3274
7 / M
Oxford House since 11/10/2014

Huntington

Bonnie
309 S 22nd St.
Clarksburg, WV  26301
304-969-9410
6 / W
Oxford House since 2/1/2017

West Washington
1406 Stewart Ave
Huntington, WV  25701-3547
681-378-3730
6 / M
Oxford House since 9/1/2008

Jefferson
303 W Martin St
Martinsburg, WV  25401
681-252-0826
10 / M
Oxford House since 6/1/2020

Clarksburg

Jewel
424 A/B Duff Ave.
Clarksburg, WV  26301
304-566-7848
6 / M
Oxford House since 4/15/2017

Ala
606 7th Avenue
Huntington, WV  25701
8 / M
Oxford House since 7/15/2016

Chloe
628 South Queen St.
Martinsburg, WV  25401
304-901-4466
8 / W
Oxford House since 3/15/2016

Marvel
922 W. Pike Street
Clarksburg, WV  26301
304-566-7500
9 / WC
Oxford House since 11/1/2017

GTO
324 8th Avenue
Huntington, WV  25917
6 / M
Oxford House since 7/1/2017

Bishop Overlook
435 Faulkner Ave
Martinsburg, WV  25401
304-306-9837
6 / M
Oxford House since 7/15/2018

Magneto
600 Joseph Street
Clarksburg, WV  26301
304-969-9552
7 / M
Oxford House since 11/1/2019

Anastasia
340 6th Ave. W
Huntington, WV  25701
304-521-9045
8 / WC
Oxford House since 6/1/2018

Anna
122 E. South Street
Martinsburg, WV  25401
7 / WC
Oxford House since 2/1/2020

Dunbar

Dunbar
216 20th St
Dunbar, WV  25064-2304
202-380-7674
6 / W
Oxford House since 5/15/2007

Thundering Herd
624 6th Avenue
Huntington, WV  25701
681-378-6162
8 / W
Oxford House since 8/1/2019

Julius 2
613 Faulkner Ave.
Martinsburg, WV  25401
6 / M
Oxford House since 6/1/2020
<table>
<thead>
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<th>Location</th>
<th>Address</th>
<th>Contact Information</th>
<th>Gender</th>
<th>Start Date</th>
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</table>

**West Virginia Oxford Houses**

**35 Houses Strong**

**24 for men**

**11 for women**

Oxford House – Dunbar is the oldest Oxford House in West Virginia. It was established May 15, 2007 and is the home for six women.
**Oxford House Traditions**

1. Oxford House has as its primary goal the provision of housing for the alcoholic and drug addict who wants to stay clean and sober.

2. All Oxford Houses are run on a democratic basis. Our officers serve continuous periods of no longer than six months.

3. No Member of an Oxford House is ever asked to leave without cause -- drinking, drug use, or disruptive behavior.

4. Oxford House members realize that active participation in AA and/or NA offers assurance of continued sobriety.

5. Each Oxford House should be autonomous except in matters affecting other houses or Oxford House, Inc. as a whole.


7. Oxford House should remain forever non-professional.

8. Propagation of the Oxford House, Inc. concept should always be conceived as public education.

9. Members who leave an Oxford House in good standing should become associate members.
Oxford House™
1975-2020

45 Years of Organized Self-Help To Enable Alcoholics and Drug Addicts to Recover Without Relapse

- Providing Sole Authority for Oxford House Charters
- Providing Technical Assistance to Establish New Oxford Houses
- Providing Technical Assistance to Keep Existing Oxford Houses on Track
- Providing Organization of Chapters to Help Oxford Houses to Help Themselves
- Providing the Time, Living Environment and Support to Enable Alcoholics and Drug Addicts to Achieve Recovery Without Relapse
- Providing the Legal, Philosophical, and Scientific Framework for a Cost-effective, Worldwide Network of Supportive Recovery Housing.

Write or Call

Oxford House, Inc.
1010 Wayne Avenue, Suite 300
Silver Spring, Maryland 20910

Telephone 301-587-2916
Facsimile 301-589-0302
E-Mail Info@oxfordhouse.org
Web Site: www.oxfordhouse.org