

Bridging The Gaps

Post-Treatment Outcomes Report



Providing insightful data to help treatment programs improve their outcomes

**For Patients Discharged Between
November 17, 2023 and November 30, 2024**

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BACKGROUND

About Bridging The Gaps

Bridging the Gaps ("BTG"), located in Winchester, Virginia, is dedicated to guiding individuals toward lasting sobriety and fulfilling lives free from addiction. Beyond traditional approaches, which solely focus on the psychological and spiritual facets of addiction, Bridging the Gaps offers alternative therapies that address the physiological aspects. By addressing the root causes of an individual's addiction and working to heal neurochemistry imbalances, Bridging the Gaps fosters sustainable growth and resilience.

Bridging the Gaps offers a wide range of services, including residential, partial hospitalization (PHP), intensive outpatient (IOP), and outpatient (OP) programs. Their clinical team adopts a trauma-informed approach and employs evidence-based modalities like dialectical behavior therapy (DBT), cognitive behavioral therapy (CBT), motivational interviewing (MI), and eye movement desensitization reprocessing (EMDR). Acknowledging the significance of family support, they also offer a dedicated program to promote healing and reconciliation within familial relationships.

Bridging the Gaps started using INSIGHT Addiction™ to monitor patients on November 2, 2023. This report summarizes outcomes data for BTG patients who discharged between November 17, 2023 and November 30, 2024.

This report was released on March 18, 2025.

Research Design

All patients participated in Vista's INSIGHT Addiction™ progress monitoring research in which they were screened for depression, anxiety, trauma, eating disorders, suicidal ideation, and self-harming behavior shortly after intake. Every week or two thereafter, their clinicians received reports tracking the severity of the symptoms of the various disorders they were struggling with, as well as the strength and frequency of any cravings they were feeling, their satisfaction with treatment, and the quality of their relationships with their closest family members.

Vista Research Group has been contacting all patients who spent at least seven days in treatment at one month, six months, and twelve months after treatment. Vista researchers made at least seven attempts to contact them at each time period via text, email, and phone. To encourage complete honesty, patients participating in the post-treatment research were promised confidentiality, and only aggregated results are provided to BTG.

Survey Submissions

Vista received the following post-treatment survey responses:

Bridging the Gaps Outcomes Survey Submissions (among surveys due no later than December 31, 2024)		
	One Month F/U	Six Month F/U
# of Patients Selected for Outcomes	51	34
# of Complete Responses Received	34 (67%)	17 (50%)
Total Responses	34 (67%)	17 (50%)

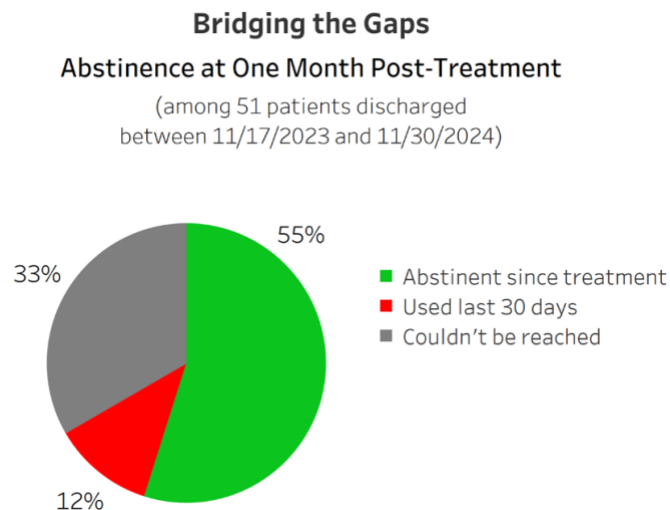
Vista received one month surveys from 67% of the patients from whom they were requested and six month surveys from 50% of the patients.

POST-TREATMENT ABSTINENCE

A crucial measure of success for an abstinence-based addiction treatment program is how many patients can abstain from drugs and alcohol after treatment.

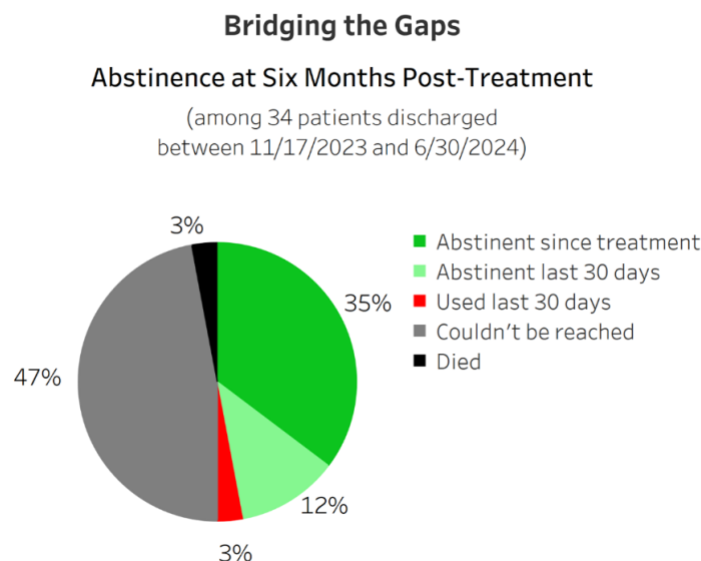
One Month Post-Treatment Abstinence

Among 51 patients discharged on or before November 30, 2024, 55% were reachable at one month post-treatment and said they had abstained from alcohol and all non-prescribed drugs since leaving treatment. Another 12% reported having used drugs and/or alcohol during this first month:



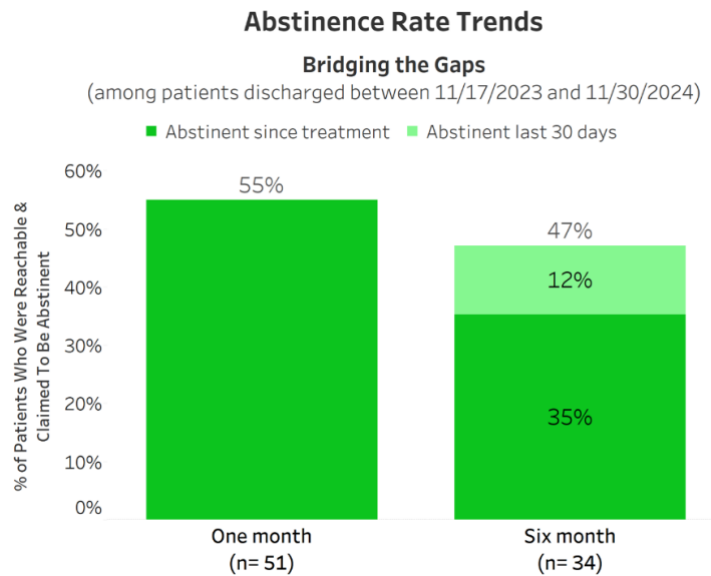
Six Month Post-Treatment Abstinence

Among 34 patients discharged on or before June 30, 2024, 47% were reachable at six months post-treatment and said they had abstained from alcohol and all non-prescribed drugs for at least the previous 30 days. Another 3% reported having used drugs and/or alcohol during the last 30 days:



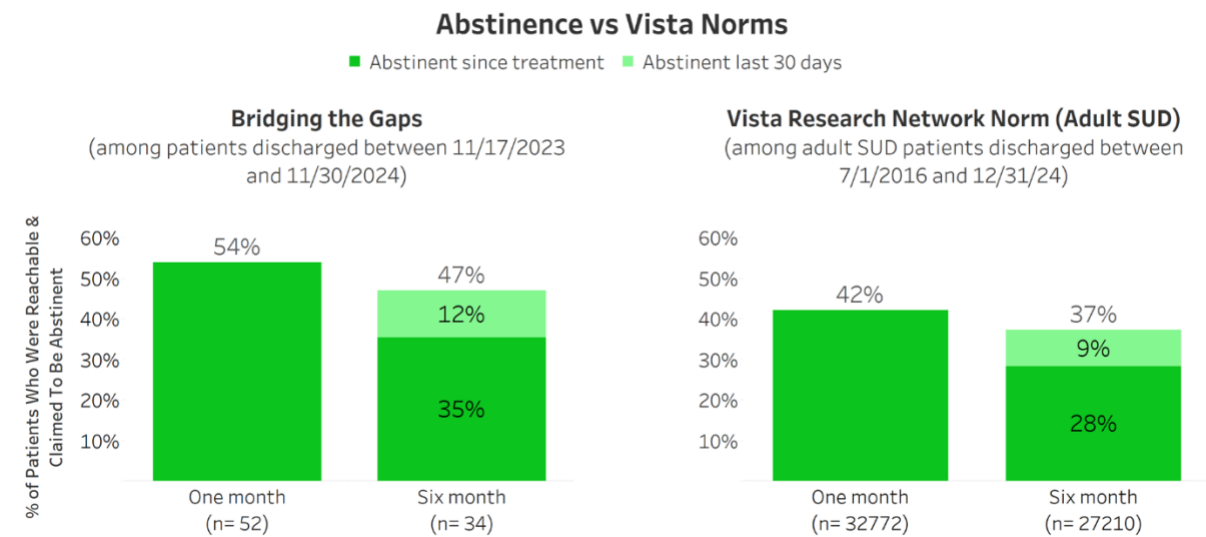
Abstinence Rates By Time Since Discharge

Because addiction is a chronic disease and relapse a common occurrence, Vista considers the percentage of patients who have been abstinent for at least the last 30 days to be the most important measure of success. The percentage of BTG patients who were abstinent for at least the last 30 days decreased from 55% at one month post-treatment to 47% at six months post-treatment:



Comparison to National Norms

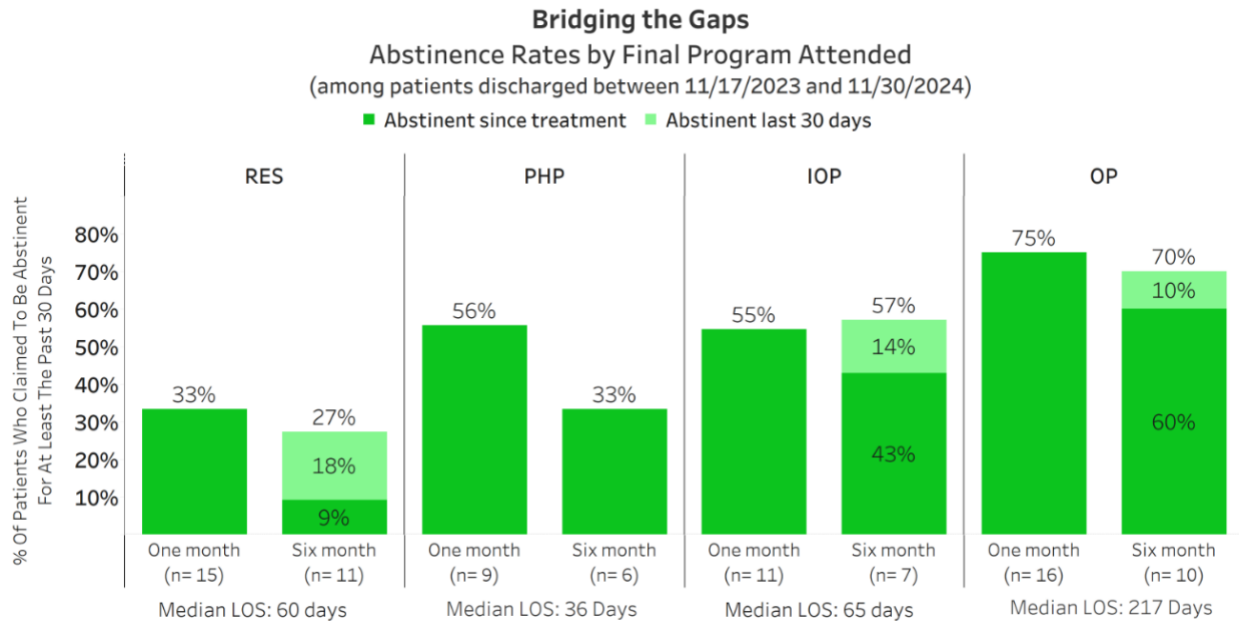
Bridging the Gaps' abstinence rates at one and six months post-treatment are much higher than the Vista norms at each of those time periods:



It is important for context to note that Vista's norms are probably well above the average for the entire addiction treatment industry today. The reason for this is that the only treatment centers which are likely to make the significant investment in tracking their post-treatment outcomes are top-quality programs that are confident their outcomes are very good.

Abstinence Rates By Last Program Attended

Abstinence rates at one and six months were highest for patients discharging from OP, who had a median length of stay of 217 days. Despite having a shorter median length of stay, patients discharging from PHP had better abstinence rates than patients discharging from residential. However, the sample sizes were small:



FACTORS FAVORING ABSTINENCE SUCCESS

Several critical factors improved abstinence success rates, the most crucial of which was whether patients successfully completed treatment or not.

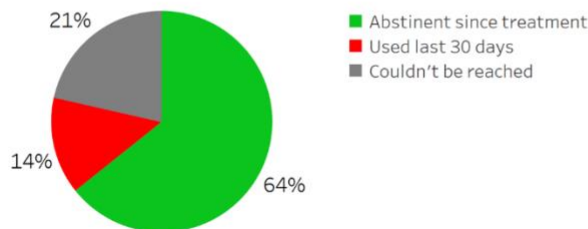
Successfully Completing Treatment

At one month post-treatment, 64% of the patients who successfully completed all recommended treatment reported having been abstinent since discharge. In comparison, only 51% of the patients who did not complete treatment reported being abstinent:

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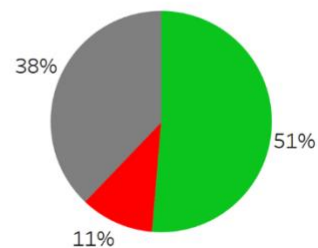
Abstinence at One Month - Completed Recommended Treatment

(among 14 patients discharged between 11/17/2023 and 11/30/2024)



Abstinence at One Month - Did Not Complete Recommended Treatment

(among 37 patients discharged between 11/17/2023 and 11/30/2024)

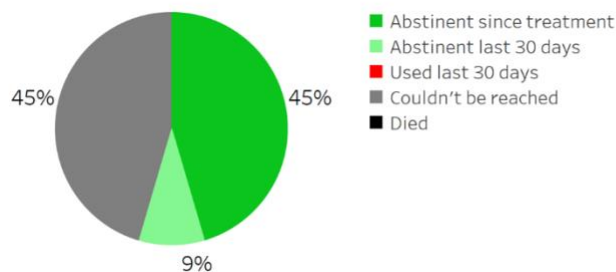


Fifty-four percent (54%) of the patients who completed treatment reported being abstinent six months after discharge for at least the last 30 days compared to only 43% of the patients who left without completing treatment:

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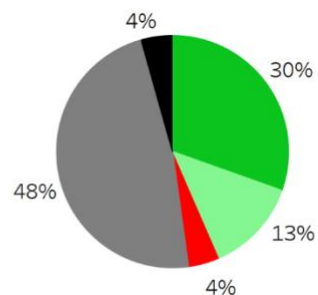
Abstinence at Six Month - Completed Recommended Treatment

(among 11 patients discharged between 11/17/2023 and 6/30/2024)



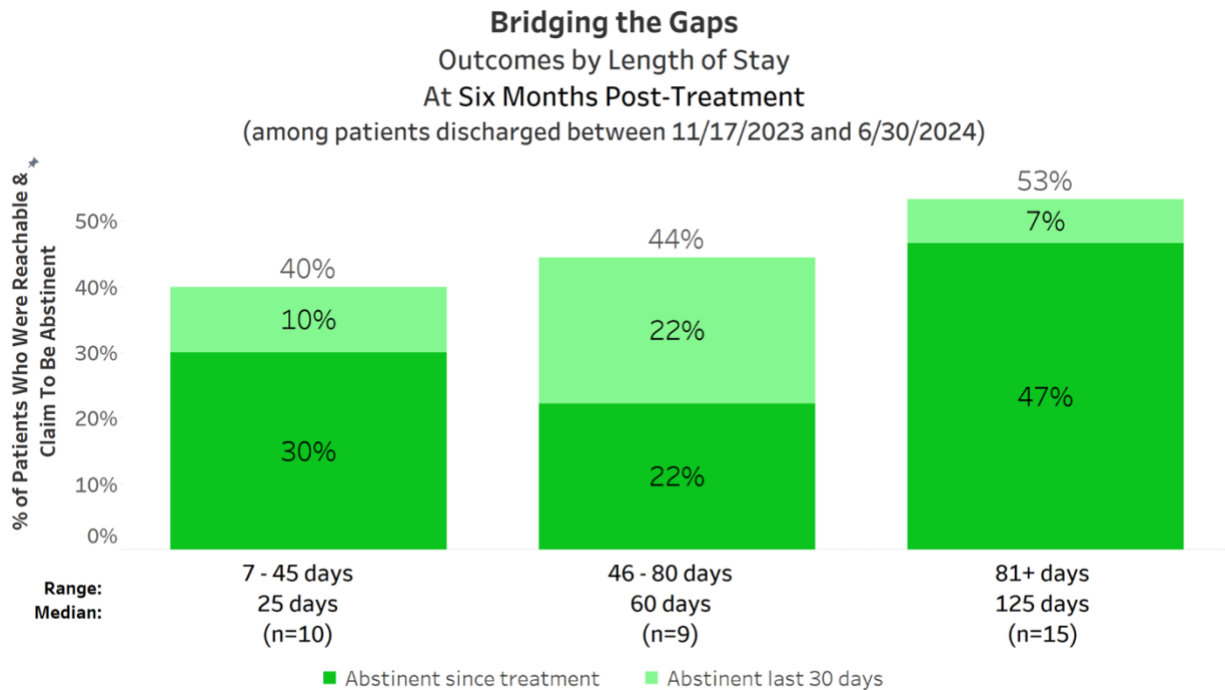
Abstinence at Six Month - Did Not Complete Recommended Treatment

(among 23 patients discharged between 11/17/2023 and 6/30/2024)



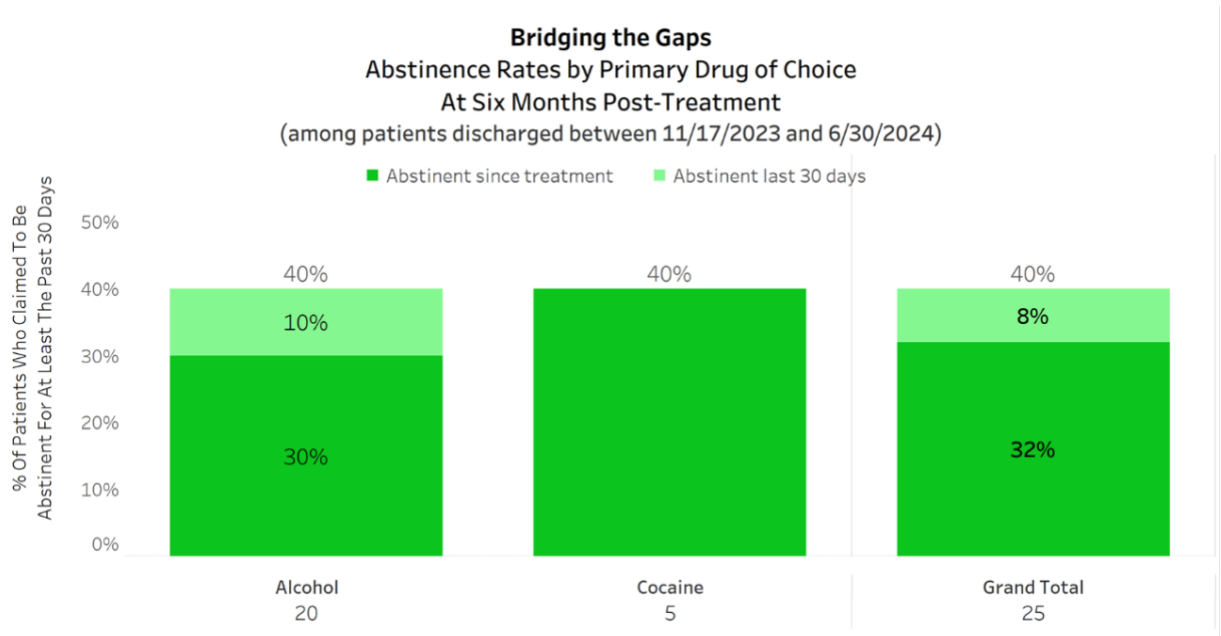
Length of Treatment

A second critical factor improving abstinence success rates was the length of a patient's treatment. The percentage of BTG patients who reported being abstinent for at least the last 30 days at six months post-treatment increased with length of stay. Only 40% of patients in treatment for 45 days or less were abstinent six months later compared to 53% for those who stayed in treatment for more than 80 days:

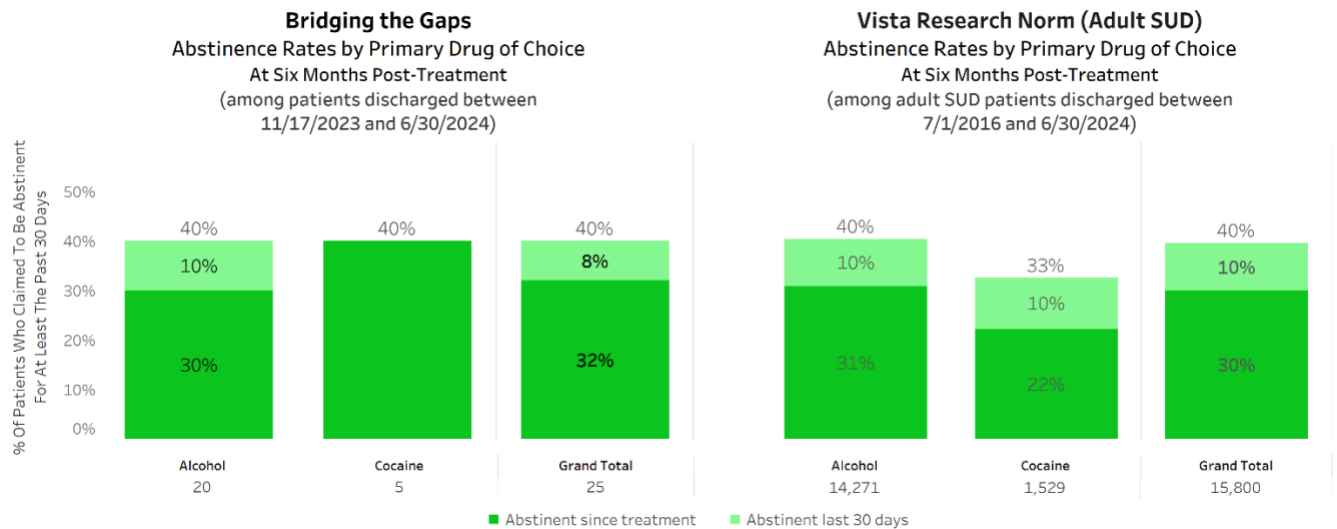


Drug of Choice

Another critical factor was a patient's primary drug of choice. Bridging the Gaps' six month abstinence rates varied by this factor. Patients whose drug of choice was cocaine were more likely to have been abstinent since treatment compared to those whose drug of choice was alcohol. However, the sample sizes varied widely:



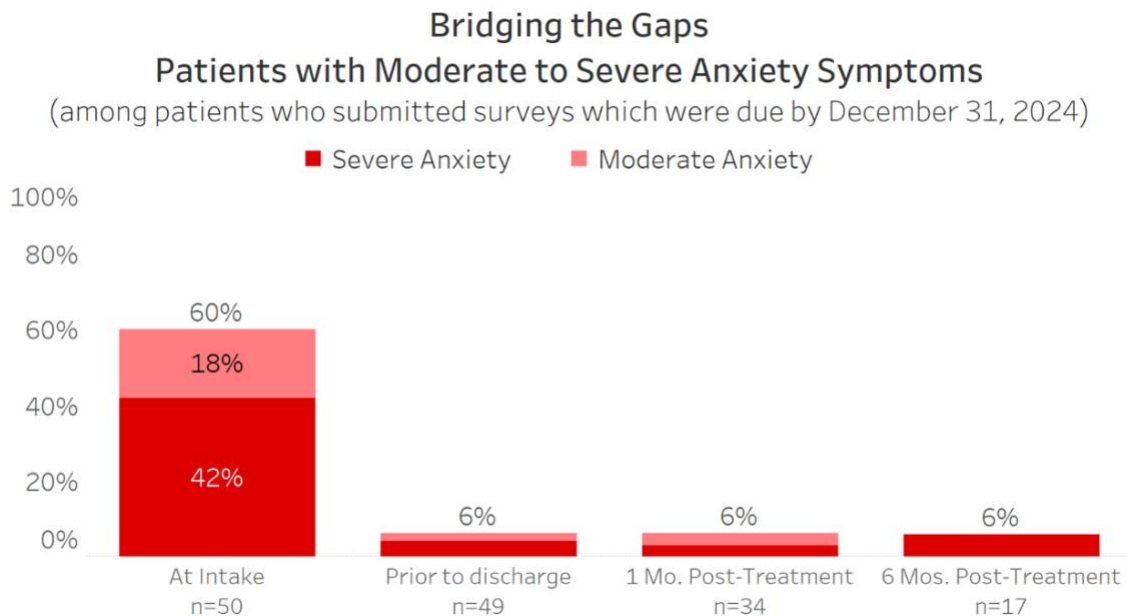
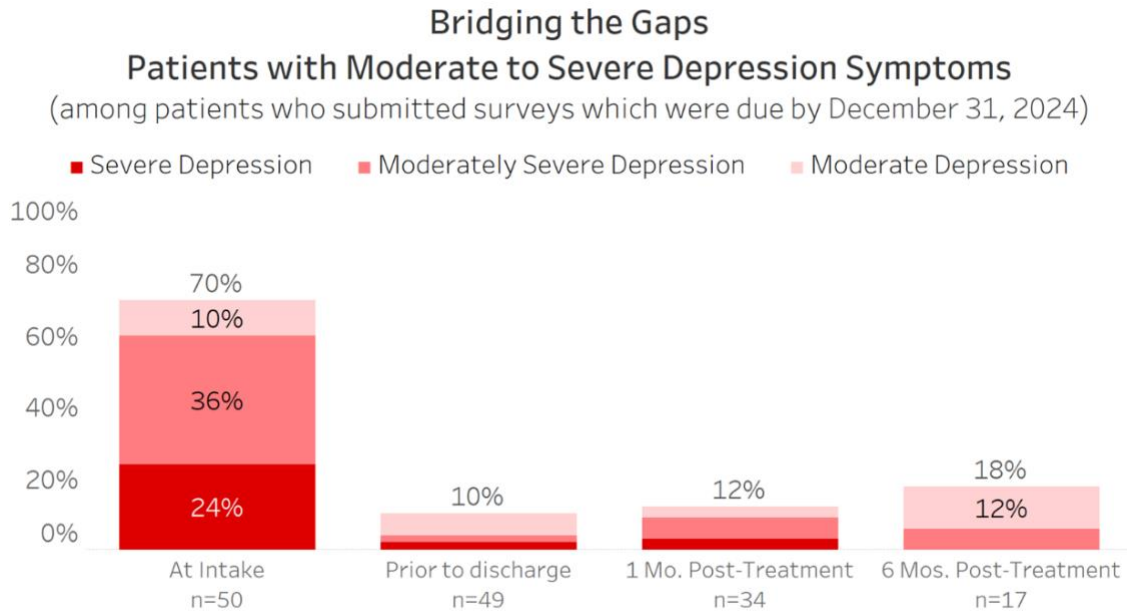
Bridging the Gaps' abstinence rate for patients in treatment for cocaine is higher than the Vista norm. Patients in treatment for alcohol addiction had a comparable abstinence rate compared to the Vista norm:



IMPACT OF TREATMENT

Reduction in Severity of Co-Occurring Disorders

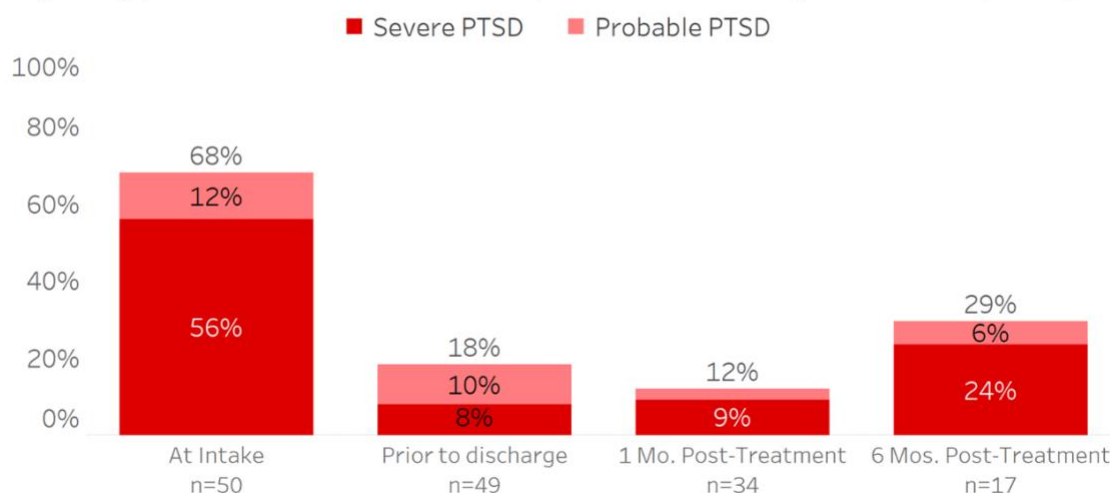
The percentages of patients reporting moderate to severe symptoms of co-occurring disorders decreased dramatically during treatment and remained relatively low throughout the six months post-treatment:



Bridging the Gaps

Patients with Moderate to Severe Trauma Symptoms

(among patients who submitted surveys which were due by December 31, 2024)



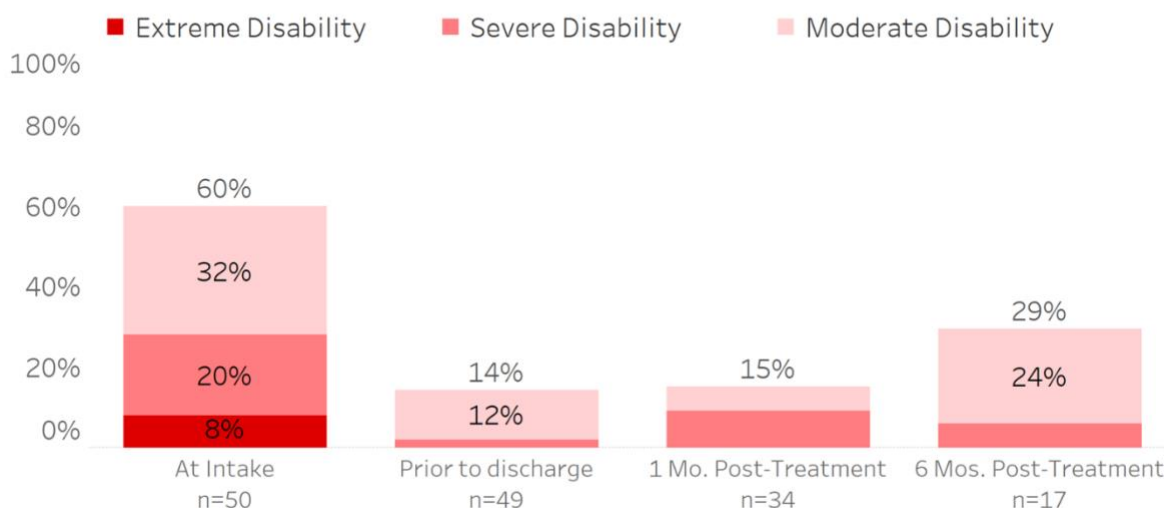
Progress on Functioning

At intake, 60% of BTG patients reported having issues that impacted their ability to function normally in their everyday lives, but the percentage reporting such issues decreased dramatically during treatment. At the last survey before discharge, only 14% of patients reported challenges impacting their daily functioning. The percentage of patients reporting issues with daily functioning remained improved from intake throughout the six months post-treatment:

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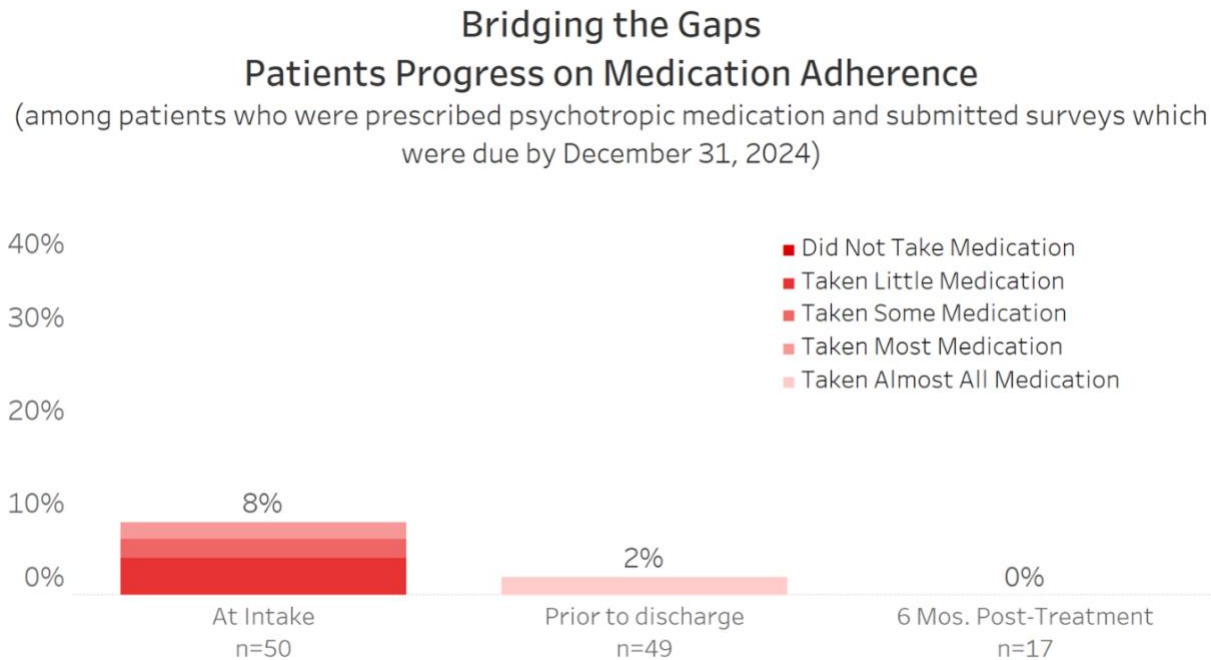
Patients with Moderate to Extreme Functioning Symptoms

(among patients who submitted surveys which were due by December 31, 2024)



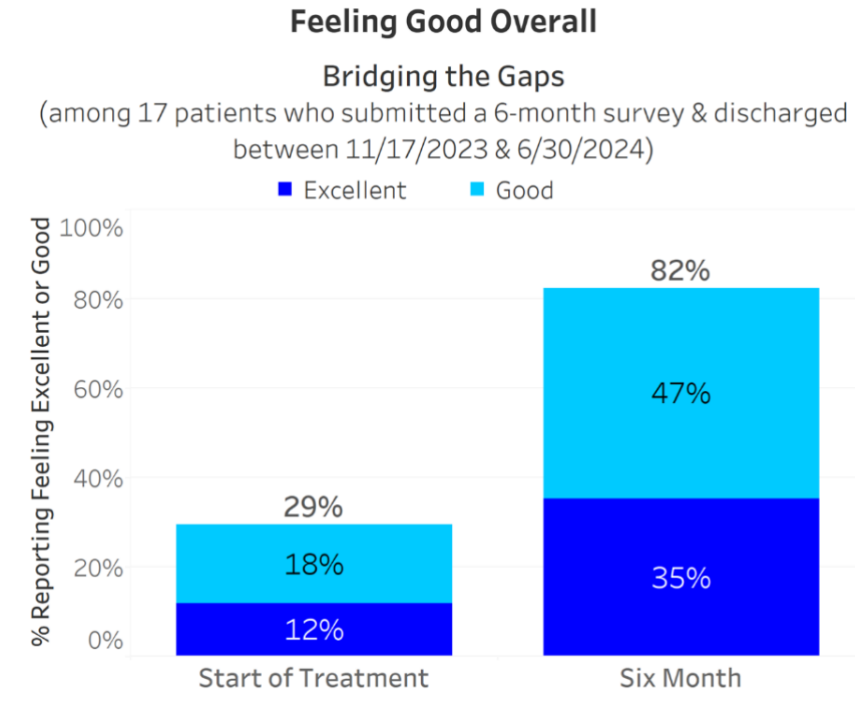
Progress on Medication Adherence

At intake and on subsequent surveys, patients with prescribed medications are asked if they've been taking them as directed. If the answer is no, they are asked how much of the medication they have been taking. The percentage of BTG patients who were not taking all medication as prescribed improved from 8% at intake to 2% on their last survey prior to discharge. This percentage improved further to 0% at six months post-treatment:

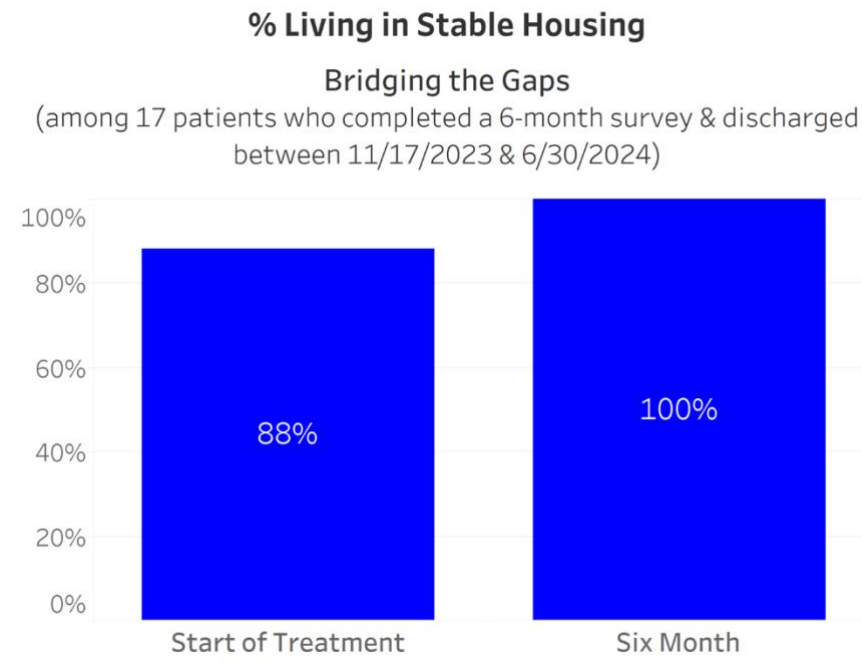


Improvement in Quality of Life

The majority (82%) of patients who completed the six month post-treatment survey reported feeling excellent or good during the last 30 days. By comparison, only 29% had reported feeling excellent or good in the 30 days prior to entering treatment:



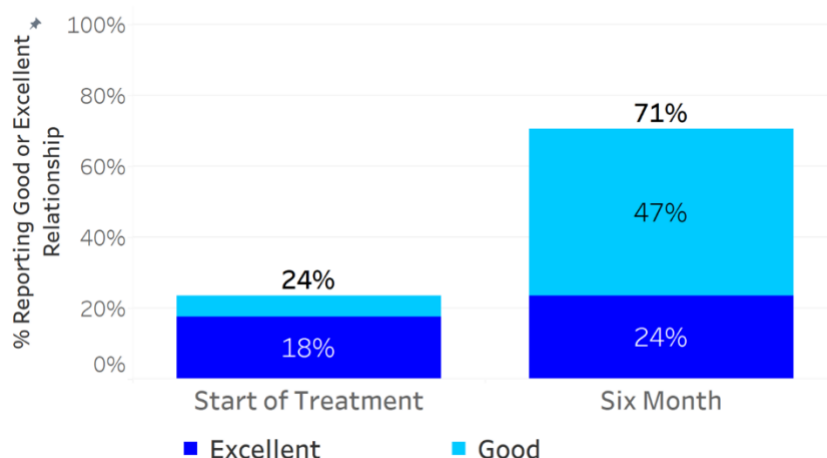
Among 17 patients who completed the six month survey, 100% said they were living in stable housing at six months post-treatment compared to 88% at intake:



Among patients who completed the six month survey, 71% reported having an excellent or good relationship with their closest family members at six months post-treatment. This is nearly triple the 24% who reported having good family relationships at the start of treatment:

Good Relationship with Closest Family Members

Bridging the Gaps
(among 17 patients who completed a 6-month survey & discharged between 11/17/2023 & 6/30/2024)



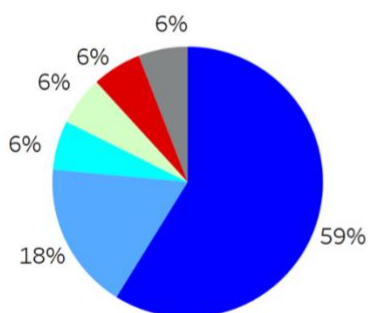
The percentage of patients who were working, going to school, or working in the home decreased modestly from 82% at intake to 76% six months after discharge among patients submitting the six month survey. However, this was a very small sample size:

Impact of Treatment on Employment

Bridging the Gaps

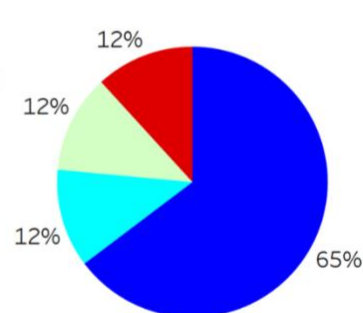
(among 17 patients who completed a 6-month survey & discharged between 11/17/2023 & 6/30/2024)

Employment (Start of Treatment)



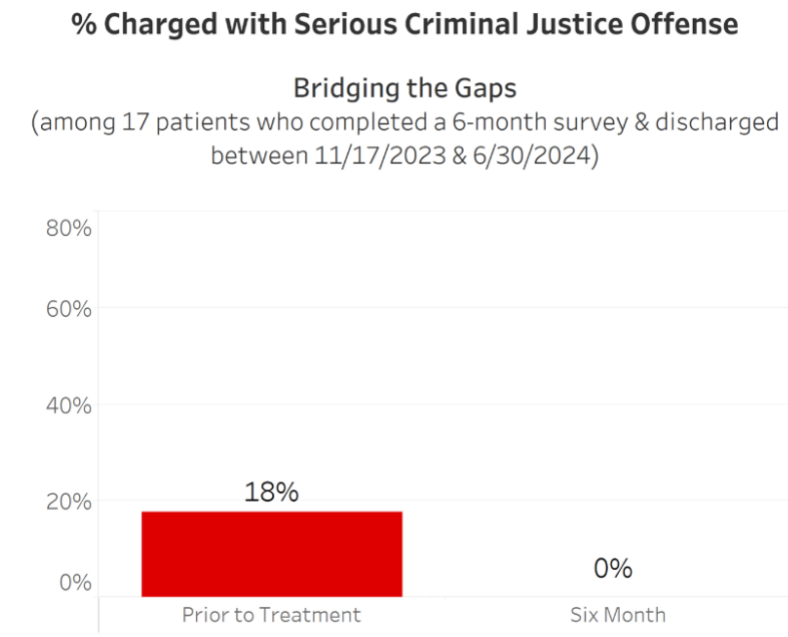
Working or Going to School: 82%

Employment at Six Months



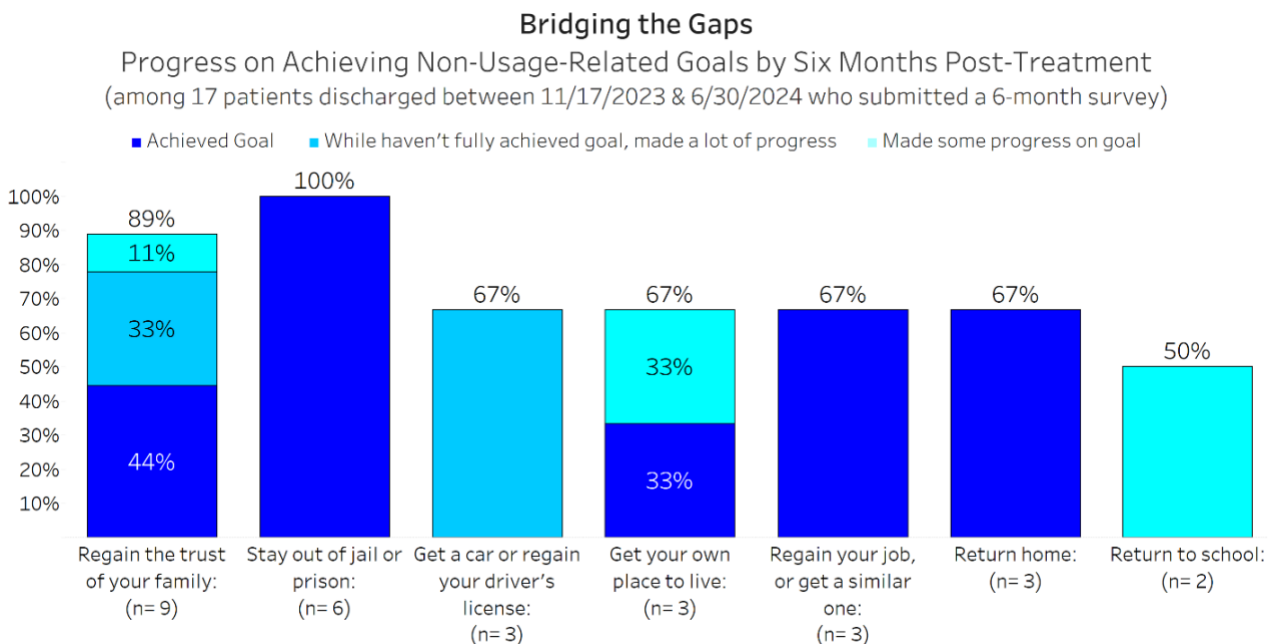
Working or Going to School: 76%

Among patients who completed the six month survey, 18% had been charged with a serious criminal offense in the year prior to entering treatment compared to 0% in the six months post-treatment:



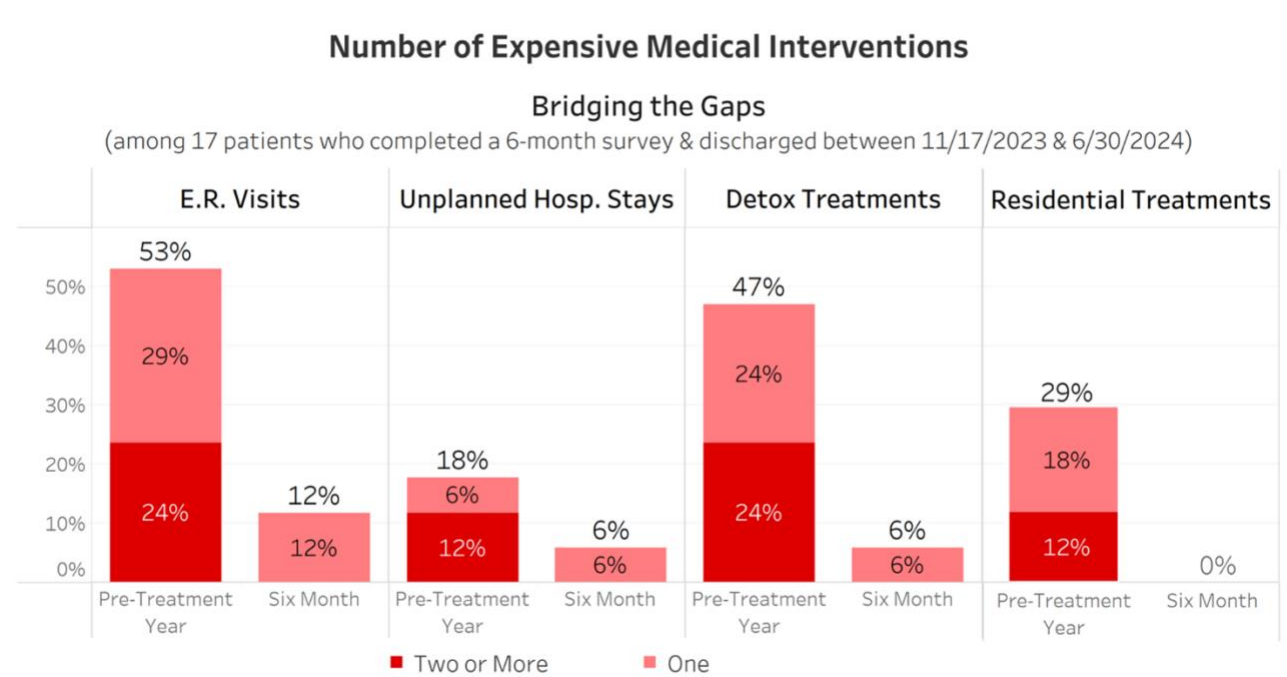
Progress on Non-Usage-Related Treatment Goals

At the start of treatment, BTG patients were asked to choose up to three personal goals they were hoping that they would be able to accomplish as they stopped abusing drugs and alcohol. The majority of patients who were reachable at 6 months post-treatment reported having made extensive progress on meeting these goals:



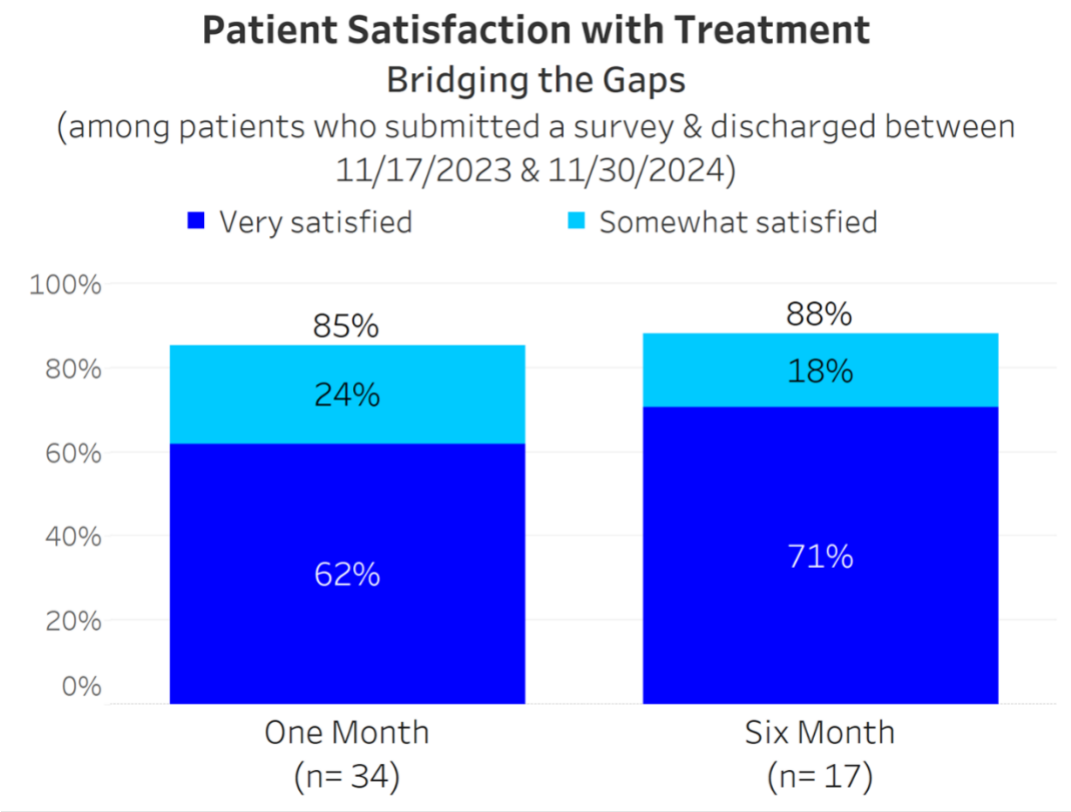
Expensive Medical Interventions

BTG patients who completed the six month post-treatment survey have had far fewer expensive medical interventions than would have been predicted based on their pre-treatment year. For example, 53% of patients had an emergency room visit at least once in the year prior to treatment compared to only 12% in the six months post-treatment. It is important to note that the interventions reported at intake in the graph below occurred over the course of a year, while the post-admission interventions only covered a six month time span:



SATISFACTION WITH TREATMENT

When reached post-treatment, most patients reported being quite satisfied with the treatment they had received at BTG:



Sample patient comments are included in the Appendix.