

SOLUTIONS HEALTHCARE

CLINICAL OUTCOMES REPORT

July 2026

20
26



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EXECUTIVE SUMMARY

This study employed the Patient Health Questionnaire (PHQ-9), the Generalized Anxiety Disorder Scale (GAD-7), and the Brief Addiction Monitor – Revised (BAM-R) to measure the impact that Solutions Healthcare has on client mental health and recovery outcomes. A total of over 300 clients participated in the study, which tracked changes in depression, anxiety, substance use, risk factors, and protective factors over the course of one year. Data collection occurred at six time points: intake, discharge, one month, three months, six months, and one year post-discharge.

To account for variation in participant follow-up and missing data points across the year, a generalized linear mixed model (GLMM) was used to analyze changes in scores over time. This statistical method allows for reliable estimation of treatment effects even when some clients completed only a subset of the follow-up assessments. The analysis revealed that clients entered treatment with severe symptoms of depression, anxiety, and substance use, often presenting with co-occurring conditions. Following treatment, participants experienced statistically significant and sustained improvements across all domains.

By one-year post-discharge, clients demonstrated substantial and sustained improvements across key indicators of recovery. BAM-R substance use scores were 71.1% lower than at intake, risk factors were 43.7% lower, and protective factors were 84.5% higher. Improvements from intake to one year were statistically significant, indicating that the observed changes were unlikely to be explained by sampling variability alone. In addition, clients demonstrated meaningful reductions in symptoms of depression and anxiety over the follow-up period. Taken together, these findings demonstrate substantial improvements in behavioral health and recovery outcomes among clients receiving treatment at Solutions Healthcare, with gains evident through one year following discharge.

The data were independently collected, analyzed, and reported by Pacific Analytics, a quantitative behavioral health research firm. For questions regarding this research, please contact Kyle Van Duser, Ph.D., at info@pacificanalytics.org.



INTRODUCTION

OBJECTIVE

The purpose of this study is to assess the effectiveness of Solutions HealthCare's ability to help clients suffering from depression, anxiety, and substance abuse. The sections below: Research Questions, Hypotheses, Methodology, Findings, and Discussion take an empirical approach for assessing Solutions Healthcare's longitudinal impact on client mental health.

OVERVIEW OF SOLUTIONS HEALTHCARE

Solutions Healthcare is a behavioral health provider offering evidence-based treatment for individuals struggling with mental health disorders and substance use. Based in Central Florida, with locations in Oviedo, Orlando, DeLand, and Palm Coast, Solutions Healthcare provides a continuum of care that includes residential treatment, intensive outpatient programs (IOP), and individual, group, and family therapy.

Their approach emphasizes clinical best practices such as Acceptance and Commitment Therapy (ACT), Cognitive Behavioral Therapy (CBT), and trauma-informed care. Treatment plans are highly individualized, focusing on long-term recovery and emotional well-being. Accredited by The Joint Commission and licensed by the Florida Department of Children and Families and the Agency for Health Care Administration (AHCA), Solutions Healthcare is committed to delivering ethical, compassionate, and comprehensive behavioral health services in a safe and supportive environment.

RESEARCH QUESTIONS

In order to empirically assess the effectiveness of Solutions Healthcare's ability to support its clients, the study seeks to answer the following research questions (RQ):

RQ1: Is treatment at a Solutions Healthcare program effective at improving clients' feelings of depression over time?

RQ2: Is treatment at a Solutions Healthcare program effective at improving clients' feelings of anxiety over time?

RQ3: Is treatment at a Solutions Healthcare program effective at improving clients' self reported struggles with substance abuse?

The study focused on client depression, anxiety, and substance abuse as key areas to monitor longitudinally beyond discharge.



HYPOTHESES

In alignment with the research questions, the study sought to test the following hypotheses to empirically assess the effectiveness of Solutions Healthcare:

1

Depression (RQ1)

Null Hypothesis:

$H_0: M1 = M2 = M3 = M4 = M5 = M6$

There is no difference in clients' self-reported feelings of depression over time after completion of an Solutions Healthcare treatment program.

Alternative Hypothesis:

$H_1: M1 \neq M2 \neq M3 \neq M4 \neq M5 \neq M6$

Clients who complete an Solutions Healthcare treatment program experience a decrease in self-reported feelings of depression over time.

2

Anxiety (RQ2)

Null Hypothesis:

$H_0: M1 = M2 = M3 = M4 = M5$

There is no difference in clients' self-reported feelings of anxiety after completion of an Solutions Healthcare treatment program.

Alternative Hypothesis:

$H_1: M1 \neq M2 \neq M3 \neq M4 \neq M5$

Clients who complete a Solutions Healthcare treatment program self-report a decrease in feelings of anxiety which are sustained over time.

3

Substance Abuse (RQ3)

Null Hypothesis:

$H_0: M1 = M2 = M3 = M4 = M5 = M6$

There is no difference in clients' self-reported challenges with substance abuse over time after completion of an Solutions Healthcare treatment program.

Alternative Hypothesis:

$H_1: M1 \neq M2 \neq M3 \neq M4 \neq M5 \neq M6$

Clients' self-reported improvements with substance abuse challenges over time after completion of a Solutions Healthcare treatment program.

METHODOLOGY

CRITERIA FOR INCLUSION

This study took a multipronged quantitative approach to best assess Solutions Healthcare programs' effectiveness at improving client wellbeing.

Research evaluators analyzed the admission, discharge, one month post discharge, three months post discharge, six months post discharge, and one year post discharge PHQ-9, GAD-7 and BAM-R for approximately three hundred participants (n=300) admitted between April 15, 2024 and June 27, 2025. Clients entered treatment with a range of mental health diagnoses, frequently with co-morbidity.

Administratively, all clients are requested to complete the PHQ-9, GAD-7, and BAM-R for consistent tracking purposes.

METHODOLOGY

STATISTICAL METHOD AND SAMPLE POPULATION

The study employed a General Linear Mixed Model (GLMM) to examine the relationship between intake, discharge, and post-treatment depression, and anxiety scores. As is common with applied research, participants often do not complete surveys during every single time interval. With classic analysis of variance repeated measures (ANOVA), a single missed survey time interval results in the participant being excluded from the study.

The GLMM technique permitted the researcher to utilize participant data despite the existence of missing data. Further, it allowed for greater latitude to work with the collected data without violating statistical assumptions. In turn, this provided a relatively robust sample within the population of Solutions Healthcare alumni. Below is a descriptive table which displays the breakdown of responses by time interval.



METHODOLOGY

Sample Population

Survey	BAMR	
Time	Intake	651
	Discharge	319
	One Month	59
	3 Months	18
	6 Months	50
	1 Year	76
Total		1173
Survey	PHQ9	
Time	Intake	712
	Discharge	447
	One Month	85
	6 Months	55
	1 Year	66
Total		1395
Survey	GAD7	
Time	Intake	731
	Discharge	506
	3 Months	73
	6 Months	56
	1 Year	47
Total		1413

ASSESSMENT TOOLS

The study drew upon the following assessment tools for programmatic analysis.

PATIENT HEALTH QUESTIONNAIRE-9 (PHQ-9)

The PHQ-9 is a multipurpose instrument for screening, diagnosing, monitoring, and measuring the severity of depression.[i] It consists of nine questions that align with the criteria for diagnosing major depressive disorder in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5).[ii] The table below shows the range of scores that represent cut points for mild, moderate, moderately severe, and severe depression.[iii]

[i] Kroenke K, Spitzer RL, Williams JB. The Patient Health Questionnaire-2: Validity of a Two-Item Depression Screener. *Medical Care*. 2003;41:1284-92.

[ii] Kroenke K, Spitzer RL. The PHQ-9: a new depression diagnostic and severity measure. *Psychiatry Ann*. 2002;32:509-21.

[iii] Kroenke K, Spitzer RL, Williams JB. The PHQ-9: validity of a brief depression severity measure. *J Gen Intern Med*. 2001;16:606-13.

Clinical Depression Scales	
Score	Depression Severity
0 – 4	None-minimal
5 – 9	Mild
10 – 14	Moderate
15 – 19	Moderately Severe
20 – 27	Severe

GENERALIZED ANXIETY DISORDER SCALE (GAD-7)

The Generalized Anxiety Disorder 7-item (GAD-7) is an easy to perform initial screening tool for generalized anxiety disorder[i]. GAD-7 is a self-report questionnaire designed to assess the severity of generalized anxiety symptoms. It consists of seven questions that individuals answer based on their experiences over the past two weeks.

[i] Spitzer RL, Kroenke K, Williams JB, Löwe B. A brief measure for assessing generalized anxiety disorder: the GAD-7. *Arch Intern Med*. 2006;166:1092-7.

Clinical Anxiety Scales	
Score	Anxiety Severity
0 – 5	Minimal
5 – 10	Mild
10 – 15	Moderate
15 – 20	Severe

ASSESSMENT TOOLS CONTINUED

BREIF ADDICTION MONITOR - REVISED (BAM-R)

The BAM-R is a 17-item tool used to monitor substance use and recovery progress over time. Developed by the Department of Veterans Affairs, it measures client functioning across three domains:

- **Substance Use: frequency of alcohol or drug use**
- **Risk Factors: triggers and relapse vulnerability**
- **Protective Factors: strengths and recovery supports**

Each item is scored from 0 to 4, with higher scores indicating more of the measured behavior (e.g., more substance use, more risk, or more protection depending on the item).



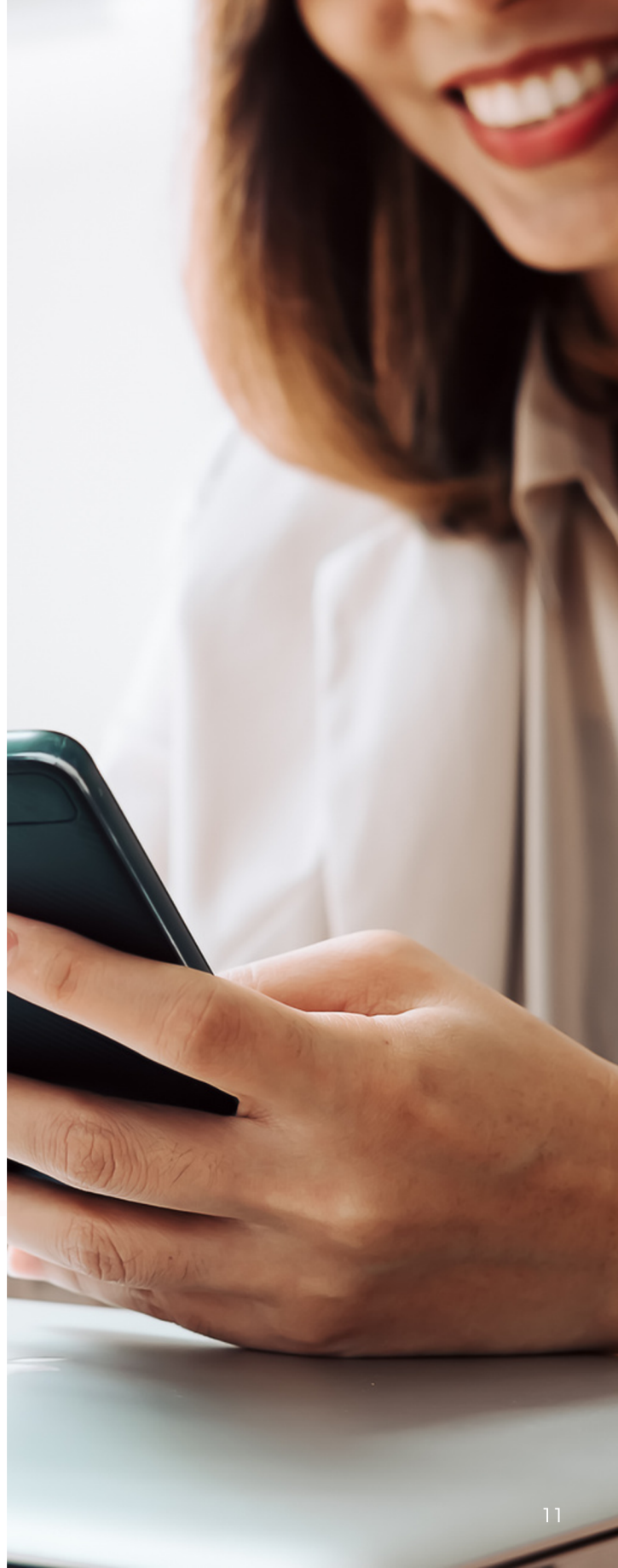
DATA COLLECTION

ETHICAL CONSIDERATIONS OF HUMAN SUBJECTS RESEARCH

Clients were contacted post discharge electronically and offered a gift card for participation.

The lead researcher consulted with Advarra, a private human subjects Institutional Review Board (IRB) to determine if the study needed formal oversight. Using the Department of Health and Human Services (DHHS) regulations at 45 CFR 46, Advarra IRB determined that the research project did not meet the DHHS definition of human subjects research under 45 CFR 46 and, therefore did not require IRB oversight.

Specifically, data presented in the findings are for Solutions Healthcare programs institutional improvement, anonymized, and aggregated in a way that safeguards any personal identifiable information. While IRB oversight was not deemed a requirement, written consent was ascertained throughout the data collection process.



FINDINGS

RQ1-DEPRESSION

Based on the findings below, we can reject our null hypothesis. Clients who participate in Solutions Healthcare see a major reduction in their feelings of depression. This is statistically significant at alpha .05. These findings hold true for long after clients leave Solutions Healthcare. Clients enter with moderately severe depression and they discharge below the clinical threshold. This is statistically significant at alpha.05.

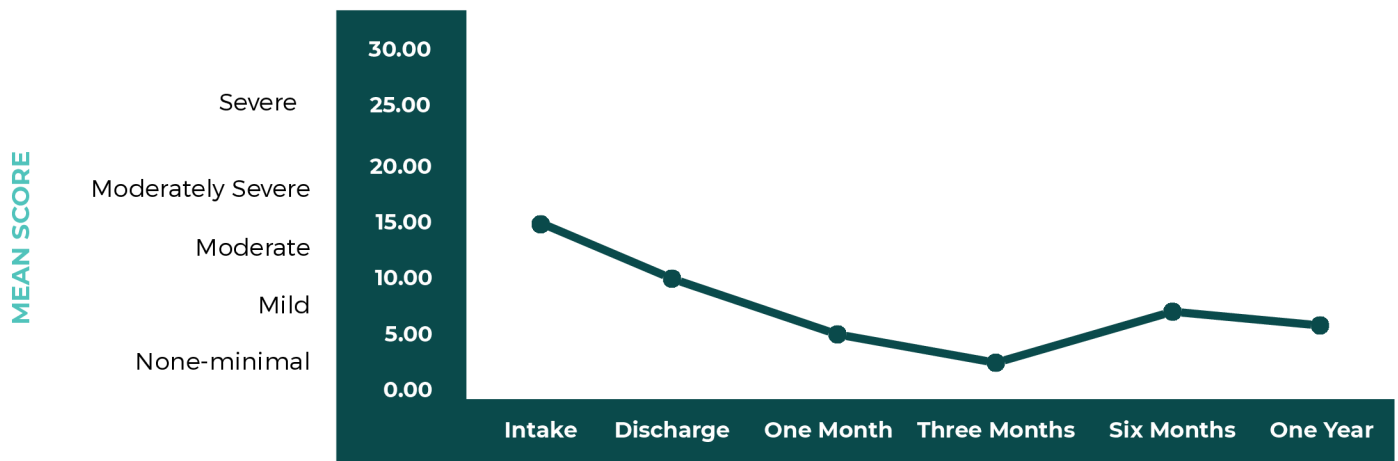
Below are the findings from the GLMM outputs examining time. As evident from the estimates of fixed effects Model One, we may reject our Null Hypothesis.

Clients who participate in a Solutions Healthcare program experience a decrease in their depression symptoms long after discharge. This is significant at alpha .05.



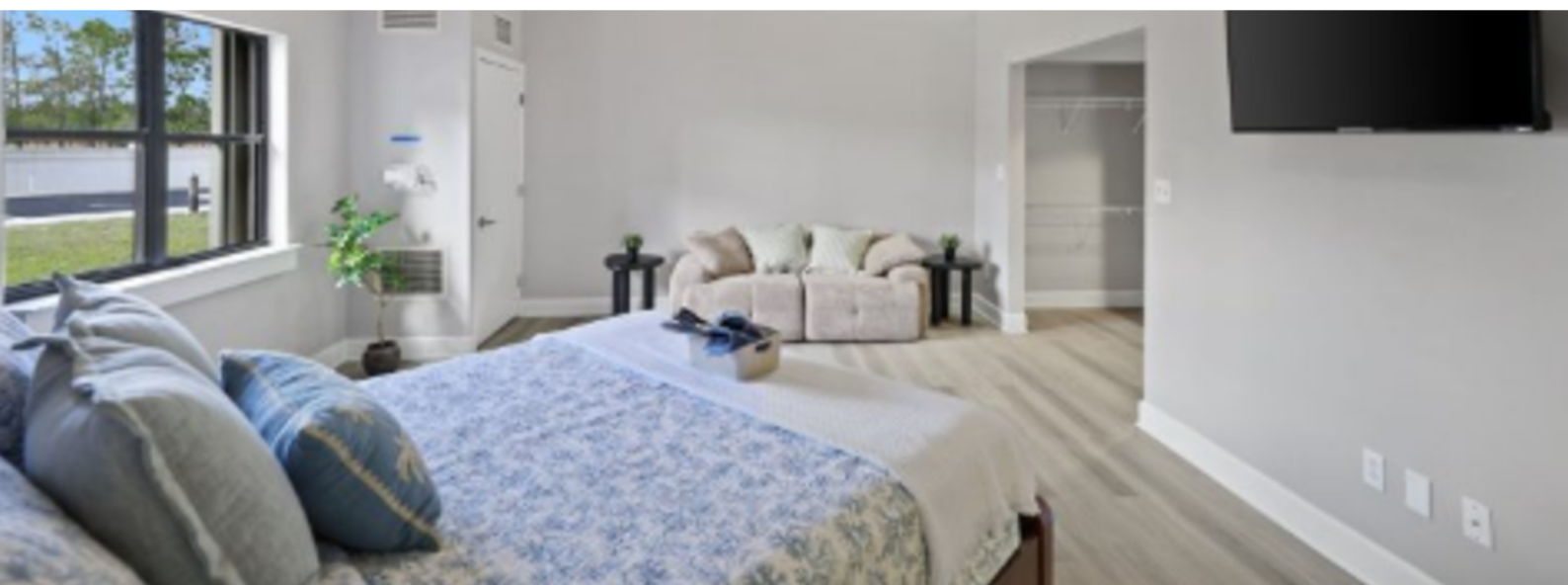
PHQ-9 FINDINGS

PHQ-9 SCORE OVER TIME



ASSESSMENT OCCURRENCE

Depression symptoms improved substantially over the course of treatment and remained well below intake levels throughout the one-year follow-up period. Mean PHQ-9 scores declined from approximately 15 at intake to 10 at discharge and 5 at one month, reaching their lowest level at three months post-discharge. Although symptoms increased modestly at six months, mean scores remained in the mild range through one year, indicating sustained improvement in depressive symptoms following treatment.



PHQ-9 FINDINGS

Descriptive Statistics

Score

Period #		Count	Mean	Standard Deviation	CV
Intake	Palm Coast	154	9.85	6,171	62.60%
	Deland	82	17.23	7,740	44.90%
	Orlando	476	19.27	7,369	38.20%
	Total	712	17.00	8,113	47.70%
Discharge	Palm Coast	115	8.77	6,268	71.50%
	Deland	50	9.44	6,306	66.80%
	Orlando	282	8.95	6,312	70.50%
	Total	447	8.96	6,289	70.20%
One Month Post	Palm Coast	15	4.93	5,444	110.40%
	Deland	10	4.30	3,653	85.00%
	Orlando	60	6.12	6,418	104.90%
	Total	85	5.69	5,980	105.00%

a. Dependent Variable: Issue Score.

PHQ-9 FINDINGS

Descriptive Statistics Score

Period #		Count	Mean	Standard Deviation	CV
Three Months Post	Palm Coast	6	2.33	5,241	224.60%
	Deland	4	1.75	1,500	85.70%
	Orlando	20	6.55	7,487	114.30%
	Total	30	5.07	6,802	134.30%
Six Months Post	Palm Coast	10	5.40	6,670	123.50%
	Deland	8	7.63	6,209	81.40%
	Orlando	37	8.19	7,612	92.90%
	Total	55	7.60	7,223	95.00%
One Year Post	Palm Coast	19	7.74	9,654	124.80%
	Deland	6	4.50	4,848	107.70%
	Orlando	41	8.12	7,407	91.20%
	Total	66	7.68	7,902	102.90%
Total	Palm Coast	319	8.82	6,568	74.50%
	Deland	160	12.64	8,439	66.70%
	Orlando	916	14.01	8,912	63.60%
	Total	1395	12.67	8,640	68.20%

a. Dependent Variable: Issue Score.

PHQ-9 FINDINGS

Model Dimension^a

		Number of Levels	Number of Parameters
Fixed Effects	Intercept	1	1
	Period #	6	5
	Fac.Id	3	2
	Period#*Fac.Id	18	10
Residual			1
Total		28	19

a. Dependent Variable: Score.

Type III Tests of Fixed Effects^a

Source	Numerator df	Denominator df	F	Sig.
Intercept	1	1377.000	351.595	0.000
Period #	5	1377.000	55.526	0.000
Fac.Id	2	1377.000	7.566	0.001
Period#*Fac.Id	10	1377.000	10.188	0.000

a. Dependent Variable: Score.

A longitudinal mixed-effects model was used to evaluate changes in PHQ-9 depression scores across six assessment periods and three treatment locations. Results demonstrated a significant effect of time, $F(5, 1377) = 55.53$, $p < .001$, indicating significant changes in depression symptoms over time. Significant differences were also observed across treatment locations, $F(2, 1377) = 7.57$, $p = .001$, along with a significant time-by-location interaction, $F(10, 1377) = 10.19$, $p < .001$. These differences should be interpreted in the context of different levels of client acuity at treatment entry. Palm Coast primarily serves clients receiving PHP/IOP services, whereas DeLand and Orlando include residential levels of care. Consequently, differences in PHQ-9 scores and trajectories across locations reflect differences in presenting clinical severity and level of care at admission rather than differences in treatment effectiveness.

PHQ-9 FINDINGS

Estimates^a

Period #	Mean	Std. Error	df	95% Confidence Interval	
				Lower Bound	Upper Bound
Intake	15,450	0.330	1,377,000	14,803	16,098
Discharge	9,053	0.411	1,377,000	8,246	9,860
One Month Post	5,117	0.981	1,377,000	3,193	7,041
Three Months Post	3,544	1,565	1377	0.475	6,614
Six Months Post	7,071	1,150	1377	4,816	9,327
One Year Post	6,786	1,131	1,377,000	4,568	9,004

a. Dependent Variable: Score.

TPHQ-9 depression scores demonstrated substantial improvement over time. Estimated mean scores decreased from 15.45 at intake to 9.05 at discharge and 5.12 at one month post-discharge, reaching a low of 3.54 at three months. Although scores increased modestly at six months (7.07), improvements were sustained at one year (6.79), representing an approximately 56% reduction in depressive symptoms compared with intake. Overall, the findings indicate substantial and durable improvement in depression symptoms following treatment.

PHQ-9 FINDINGS

Pairwise Comparisons^a

(I) Period #		Mean Difference (I-J)	Std. Error	df	Sig.c	95% Confidence Interval for Difference ^c	
						Lower Bound	Upper Bound
Intake	Discharge	6.397*	0.527	1377	0.000	4,846	7,948
	One Month Post	10.334*	1,035	1377	0.000	7,291	13,376
	Three Months Post	11.906*	1,599	1377	0.000	7,204	16,608
	Six Months Post	8.379*	1,196	1377	0.000	4,861	11,897
	One Year Post	8.664*	1,178	1,377,000	0.000	5,201	12,128
Discharge	Intake	-6.397*	0.527	1377	0.000	-7,948	-4,846
	One Month Post	3.936*	1,063	1,377,000	0.003	0.809	7,063
	Three Months Post	5.509*	1,618	1377	0.010	0.752	10,266
	Six Months Post	1,982	1,221	1377	0.001	-1,609	5,572
	One Year Post	2,267	1,203	1,377,000	0.897	-1,271	5,804

Based on estimated marginal mean *. The mean difference is significant at the .05 level.

a. Dependent Variable: Issue Score.

c. Adjustment for multiple comparisons: Bonferroni.

Pairwise comparisons confirmed significant and sustained reductions in depressive symptoms relative to intake. PHQ-9 scores were significantly lower at discharge and at every post-discharge assessment through one year (all $p < .001$). Additional significant improvement occurred from discharge to one month ($p = .003$) and three months ($p = .010$). Although scores subsequently increased somewhat, neither six-month nor one-year scores differed significantly from discharge, indicating that the substantial reduction in depression symptoms achieved during treatment was maintained through one year post-discharge.

PHQ-9 FINDINGS

Pairwise Comparisons^a

(I) Fac.Id	(J) Fac.Id	Mean Difference (I-J)	Std. Error	df	Sig.c	95% Confidence Interval for Differences	
						Lower Bound	Upper Bound
Palm Coast	DeLand	-0.971	1,187	1377	1	-3,817	1,875
	Orlando	-3.030*	0.83	1377	0.001	-5,019	-1,041
DeLand	Palm Coast	0.971	1,187	1377	1	-1,875	3,817
	Orlando	-2,059	1,023	1377	0.133	-4.51	0.393
Orlando	Palm Coast	3.030*	0.83	1377	0.001	1,041	5,019
	DeLand	2,059	1,023	1377	0.133	-0.393	4.510

Based on estimated marginal mean *. The mean difference is significant at the .05 level.

a. Dependent Variable: Issue Score.

c. Adjustment for multiple comparisons: Bonferroni.

Pairwise comparisons identified some differences in PHQ-9 scores across treatment locations. Orlando had significantly higher depression scores than Palm Coast, with an estimated mean difference of 3.03 points ($p = .001$). In contrast, differences between Palm Coast and DeLand and between DeLand and Orlando were not statistically significant after adjustment for multiple comparisons. These findings should be interpreted in the context of differences in client acuity at treatment entry and levels of care provided across locations, rather than as evidence of differences in treatment effectiveness. Palm Coast primarily serves PHP/IOP clients, whereas Orlando and DeLand include residential levels of care.

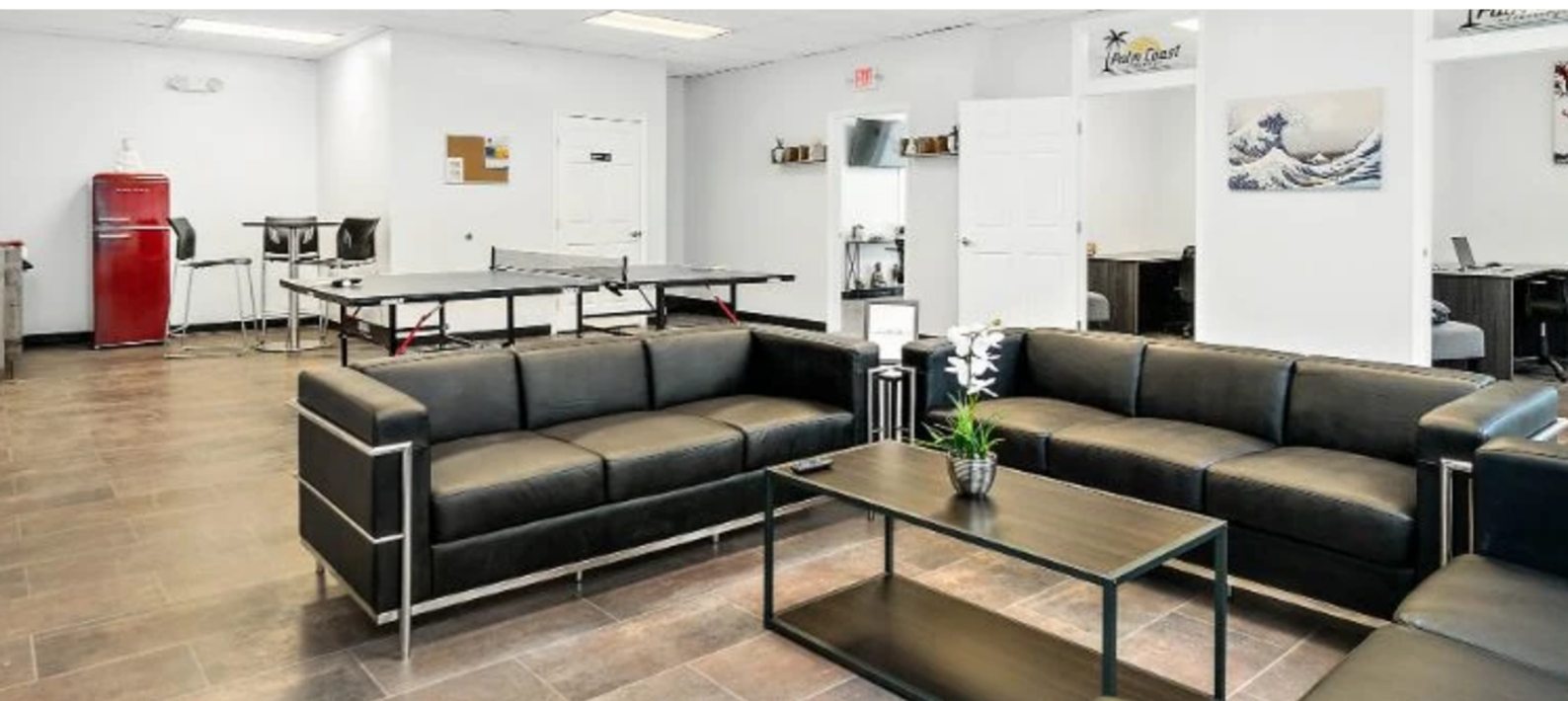
PHQ-9 FINDINGS

The longitudinal analysis provides strong evidence that clients experienced substantial and sustained reductions in depressive symptoms over the course of treatment and throughout the post-discharge follow-up period. PHQ-9 scores decreased significantly over time ($p < .001$), with estimated mean scores declining from 15.45 at intake to 9.05 at discharge. Symptoms continued to decline following treatment, reaching estimated means of 5.12 at one month and 3.54 at three months post-discharge.

Pairwise comparisons confirmed that PHQ-9 scores at every subsequent assessment period were significantly lower than at intake (all $p < .001$). At one year post-discharge, the estimated mean PHQ-9 score was 6.79, compared with 15.45 at intake, representing an approximately 56% reduction in depressive symptoms.

The analysis also identified differences in PHQ-9 scores across treatment locations. Orlando had significantly higher estimated depression scores than Palm Coast, while differences between Palm Coast and DeLand and between DeLand and Orlando were not statistically significant after adjustment for multiple comparisons. These findings should be considered within the context of differences in client acuity at treatment entry and levels of care across locations.

Palm Coast primarily serves clients receiving PHP/IOP services, whereas Orlando and DeLand include residential levels of care. Accordingly, differences across locations reflect differences in presenting clinical severity and level of care at admission rather than differences in treatment effectiveness.

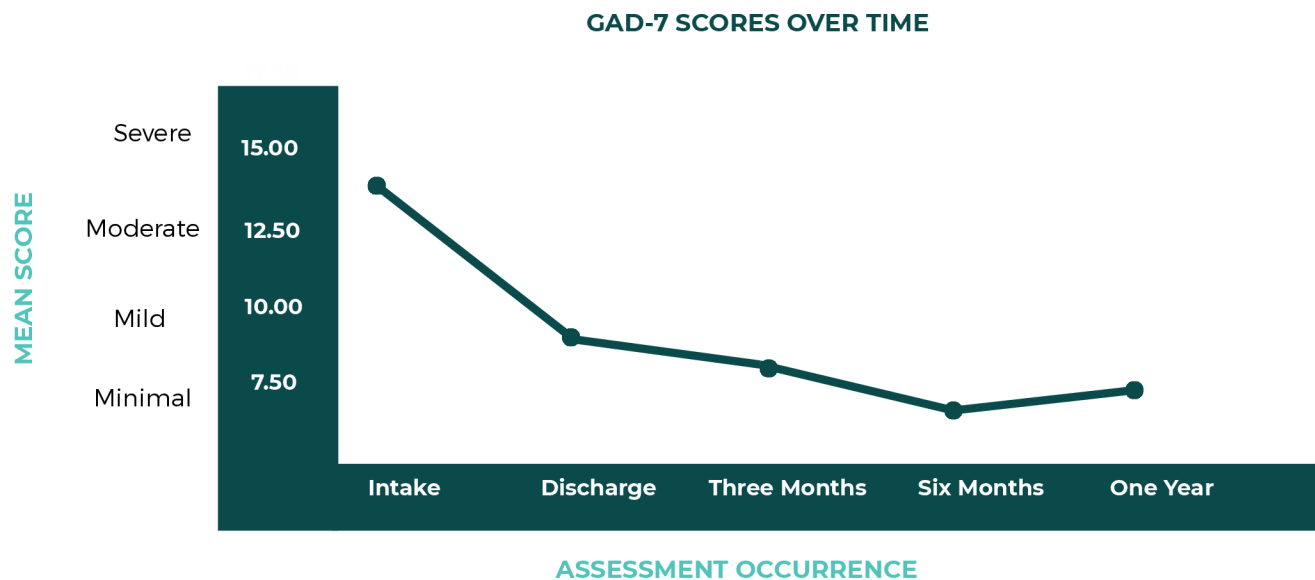


RQ2- ANXIETY

Based on the findings below, we can reject our null hypothesis. Clients who participate in Solutions Healthcare see a major reduction in their feelings of anxiety over time. This is statistically significant at alpha .05. These findings hold true for long after clients leave a Solutions Healthcare Program. Clients enter with severe anxiety and they discharge below the clinical threshold. Clients experience no increase in their symptoms post discharge. This is statistically significant at alpha.05.



RQ2- ANXIETY



Anxiety symptoms demonstrated substantial and sustained improvement following treatment. Clients entered treatment with mean GAD-7 scores in the severe anxiety range. Scores declined substantially by discharge and continued to improve during the post-discharge period, reaching the mild range. Although symptoms increased slightly at one year, mean anxiety scores remained substantially below intake levels and within the mild range, indicating that improvements achieved during and following treatment were largely sustained through one year post-discharge.

Descriptive Statistics

Period #		Count	Mean	Standard Deviation	CV
Intake	Palm Coast	160	9.34	5,073	54.30%
	Deland	85	14.08	5,983	42.50%
	Orlando	486	17.36	4,828	27.80%
	Total	731	15.22	5,998	39.40%
Discharge	Palm Coast	127	8.30	5,597	67.40%
	Deland	59	9.20	5,352	58.20%
	Orlando	320	9.39	6,218	66.20%
	Total	506	9.09	5,979	65.80%
Three Months Post	Palm Coast	15	9.20	7,664	83.30%
	Deland	11	7.82	5,474	70.00%
	Orlando	47	6.94	6,438	92.80%
	Total	73	7.53	6,549	86.90%
Six Months Post	Palm Coast	13	5.92	7,274	122.80%
	Deland	6	5.33	6,314	118.40%
	Orlando	37	5.49	4,363	79.50%
	Total	56	5.57	5,260	94.40%
One Year Post	Palm Coast	12	5.42	7,366	136.00%
	Deland	6	7.67	7,367	96.10%
	Orlando	29	7.45	5,698	76.50%
	Total	47	6.96	6,283	90.30%

Descriptive Statistics

Period #		Count	Mean	Standard Deviation	CV
Total	Palm Coast	327	8.65	5,651	65.30%
	Deland	167	11.40	6,391	56.10%
	Orlando	919	13.26	7,017	52.90%
	Total	1413	11.97	6,918	57.8%

Descriptive statistics demonstrate substantial reductions in anxiety symptoms during treatment that were sustained throughout the post-discharge period. Clients entered treatment with a mean GAD-7 score of 15.22, corresponding to the severe anxiety range. By discharge, the mean score had declined to 9.09, representing the mild range. Mean anxiety scores remained within the mild range at three months (7.53), six months (5.57), and one year post-discharge (6.96). At one year, mean GAD-7 scores were approximately 54% lower than at intake, indicating substantial and sustained improvement in anxiety symptoms.



RQ2 - ANXIETY

Model Dimension^a

		Number of Levels	Number of Parameters
Fixed Effects	Intercept	1	1
	Period#	5	4
	Fac.Id	3	2
	Period# * Fac.Id	15	8
Residual			1
Total		24	16

A longitudinal mixed-effects model was used to examine changes in GAD-7 anxiety scores across five assessment periods and three treatment locations. The model included assessment period, treatment location, and the interaction between time and location as fixed effects. This approach allows changes in anxiety symptoms over time to be evaluated while also examining whether symptom levels and patterns of change differ across treatment locations.



RQ2 - ANXIETY

Type III Tests of Fixed Effects^a

Source	Numerator df	Denominator df	F	Sig.
Intercept	1	1398	696,193	0.0000
Period#	4	1,398,000	51,883	0.0000
Fac.Id	2	1,398,000	3,545	0.0290
Period# * Fac.Id	8	1398	13,997	0.0000

a. Dependent Variable: Score.

The longitudinal mixed-effects model demonstrated a significant change in anxiety symptoms over time, $F(4, 1398) = 51.88$, $p < .001$. Significant differences were also observed across treatment locations, $F(2, 1398) = 3.55$, $p = .029$, along with a significant time-by-location interaction, $F(8, 1398) = 14.00$, $p < .001$, indicating that patterns of improvement differed across locations. These location differences should be interpreted in the context of different levels of client acuity at treatment entry, as Palm Coast primarily serves PHP/IOP clients, while DeLand and Orlando include residential levels of care. Thus, differences across locations reflect differences in presenting clinical severity and level of care at admission rather than differences in treatment effectiveness.



RQ2 - ANXIETY

Estimates^a

Period #	Mean	Std. Error	df	95% Confidence Interval	
				Lower Bound	Upper Bound
Intake	13.595	0.261	1398	13.084	14.107
Discharge	8.963	0.308	1398.000	8.359	9.567
Three Months	7.985	0.779	1398.000	6.457	9.513
Six Months	5.581	0.958	1398.000	3.702	7.46
One Year	6.844	0.982	1398	4.917	8.771

a. Dependent Variable: Score.

Estimated GAD-7 scores demonstrated substantial and sustained reductions in anxiety symptoms over time. Mean anxiety scores declined from 13.60 at intake to 8.96 at discharge, with further reductions to 7.99 at three months and 5.58 at six months post-discharge. At one year, the estimated mean remained low at 6.84, representing an approximately 49.7% reduction in anxiety symptoms relative to intake. Although scores increased modestly between six months and one year, the one-year mean remained approximately half the intake level and within the mild anxiety range, demonstrating sustained improvement through one year post-discharge.



RQ2 - ANXIETY

Pairwise Comparisons^a

(I) Fac.Id		Mean Difference (I-J)	Std. Error	df	Sig.c	95% Confidence Interval for Difference ^c	
						Lower Bound	Upper Bound
Palm Coast	DeLand	-1,184	0.920	1398	0.595	-3,391	1,022
	Orlando	-1.687*	0.634	1,398,000	0.024	-3,206	-0.168
DeLand	Palm Coast	1,184	0.920	1398	0.595	-1,022	3,391
	Orlando	-0.503	0.813	1,398,000	1	-2,451	1,445
Orlando	Palm Coast	1.687*	0.634	1,398,000	0.024	0.168	3,206
	DeLand	0.503	0.813	1,398,000	1	-1,445	2,451

Based on estimated marginal mean *. The mean difference is significant at the .05 level.

a. Dependent Variable: Issue Score.

c. Adjustment for multiple comparisons: Bonferroni.

Pairwise comparisons identified a significant difference in anxiety scores between Orlando and Palm Coast. Orlando had estimated GAD-7 scores that were 1.69 points higher than Palm Coast ($p = .024$, 95% CI [0.17, 3.21]). In contrast, differences between Palm Coast and DeLand ($p = .595$) and between DeLand and Orlando ($p = 1.000$) were not statistically significant. These findings should be interpreted in the context of differences in client acuity at treatment entry and levels of care provided, as Palm Coast primarily serves PHP/IOP clients, while Orlando and DeLand include residential levels of care. Accordingly, the observed facility differences reflect differences in presenting clinical severity and level of care at admission rather than differences in treatment effectiveness.

Pairwise Comparisons^a

(I) Period #		Mean Difference (I-J)	Std. Error	df	Sig.c	95% Confidence Interval for Difference ^c	
						Lower Bound	Upper Bound
Intake	Discharge	4.632*	0.404	1,398,000	0	3,497	5,767
	Three Months Post	5.611*	0.821	1,398,000	0	3,301	7,920
	Six Months Post	8.014*	0.993	1,398,000	0	5,223	10,806
	One Year Post	6.752*	1,016	1398	0	3,894	9,609
Discharge	Intake	-4.632*	0.404	1,398,000	0	-5,767	-3,497
	Three Months Post	0.979	0.837	1,398,000	1,000	-1,376	3,333
	Six Months Post	3.382	1,006	1,398,000	8	553	6,211
	One Year Post	2.119	1,029	1,398,000	.397	-775	5,014

Based on estimated marginal mean *. The mean difference is significant at the .05 level.

a. Dependent Variable: Issue Score.

c. Adjustment for multiple comparisons: Bonferroni.

Pairwise comparisons confirmed significant and sustained reductions in anxiety symptoms relative to intake. GAD-7 scores were significantly lower at discharge, three months, six months, and one year post-discharge compared with intake (all $p < .001$). The largest reduction was observed between intake and six months, with an estimated decrease of 8.01 points. At one year, GAD-7 scores remained 6.75 points lower than intake (95% CI [3.89, 9.61], $p < .001$), representing an approximately 49.7% reduction in estimated anxiety symptoms. Although scores increased modestly between six months and one year, the one-year score did not differ significantly from discharge ($p = .397$), indicating that the substantial improvement achieved during treatment was sustained through one year post-discharge.

Period #* Fac.Id

(I) Period #	Fac.ID	Mean	Std. Error	df	95% Confidence Interval for Differences	
					Lower Bound	Upper Bound
Intake	Palm Coast	9.344	0.437	1,398,000	8.487	10.201
	Deland	14.082	0.599	1398	12.907	15.258
	Orlando	17.360	0.251	1398	16.868	17.852
Discharge	Palm Coast	8.299	0.490	1,398,000	7.338	9.261
	Deland	9.203	0.719	1,398,000	7.792	10.614
	Orlando	9.388	0.309	1,398,000	8.782	9.993
Three Months Post	Palm Coast	9.200	1.426	1398	6.402	11.998
	Deland	7.818	1.666	1398	4.551	11.036
	Orlando	6.936	0.806	1398	5.355	8.517
Six Months Post	Palm Coast	5.923	1.532	1,398,000	2.917	8.929
	Deland	5.333	2.255	1398	0.909	9.758
	Orlando	5.486	0.908	1398	3.705	7.268
One Year Post	Palm Coast	5.417	1.595	1,398,000	2.288	8.545
	Deland	7.667	2.255	1,398,000	3.242	12.091
	Orlando	7.448	1.026	1398	5.436	9.461

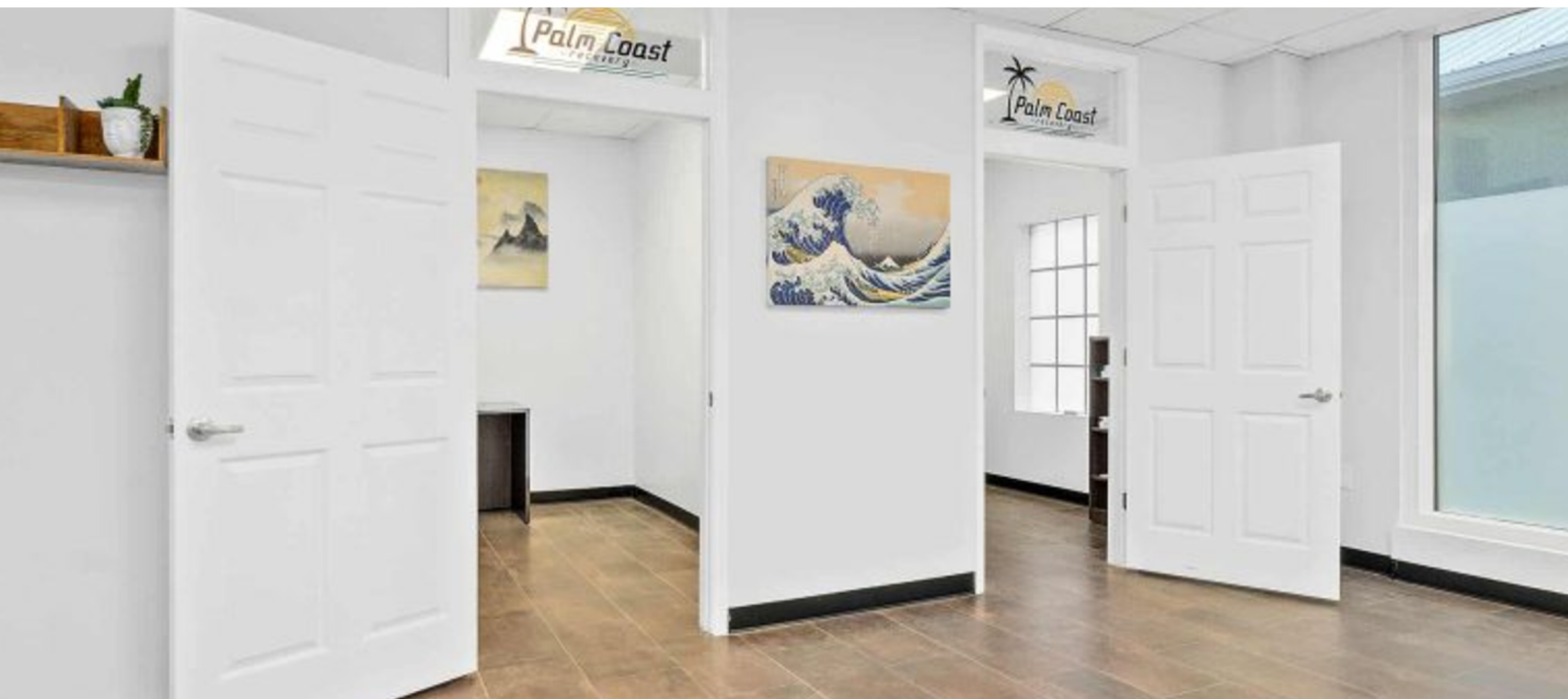
a. Dependent Variable: Score.

Anxiety trajectories varied across treatment locations, with the greatest differences evident at treatment entry. At intake, estimated GAD-7 scores ranged from 9.34 at Palm Coast to 14.08 at DeLand and 17.36 at Orlando, demonstrating substantial differences in presenting anxiety severity across locations. Orlando clients entered treatment, on average, in the severe anxiety range, compared with moderate anxiety at DeLand and mild anxiety at Palm Coast. By discharge, however, estimated scores had converged considerably across the three locations, ranging from 8.30 to 9.39, all within the mild anxiety range. Scores generally remained substantially below intake levels throughout follow-up. This pattern provides important context for the significant time-by-location interaction and reinforces that differences among facilities should be understood in relation to different levels of client acuity at treatment entry and levels of care provided, rather than interpreted as differences in treatment effectiveness.

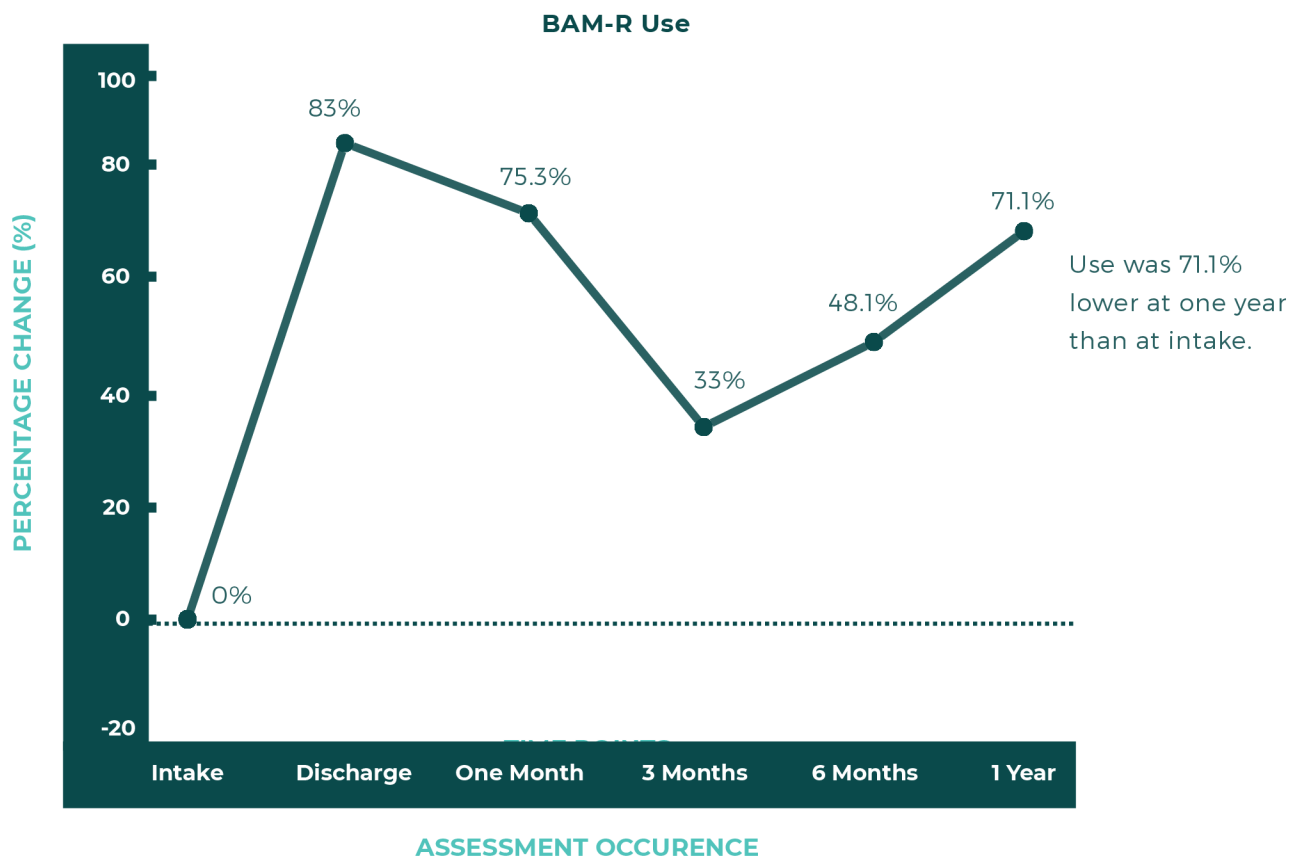
GAD-7 FINDINGS

The longitudinal analysis demonstrated significant and sustained reductions in anxiety symptoms. GAD-7 scores decreased significantly from intake across all subsequent assessment periods ($p < .001$), with the largest reduction occurring at six months post-discharge. At one year, estimated anxiety scores remained 49.7% below intake levels and were not significantly different from discharge, indicating that improvements achieved during treatment were largely maintained over time.

Differences across treatment locations primarily reflected different levels of client acuity at entry, with Orlando and DeLand serving residential populations in addition to other levels of care, while Palm Coast primarily serves PHP/IOP clients. Overall, the findings demonstrate substantial improvement in anxiety symptoms that was sustained through one year following discharge.

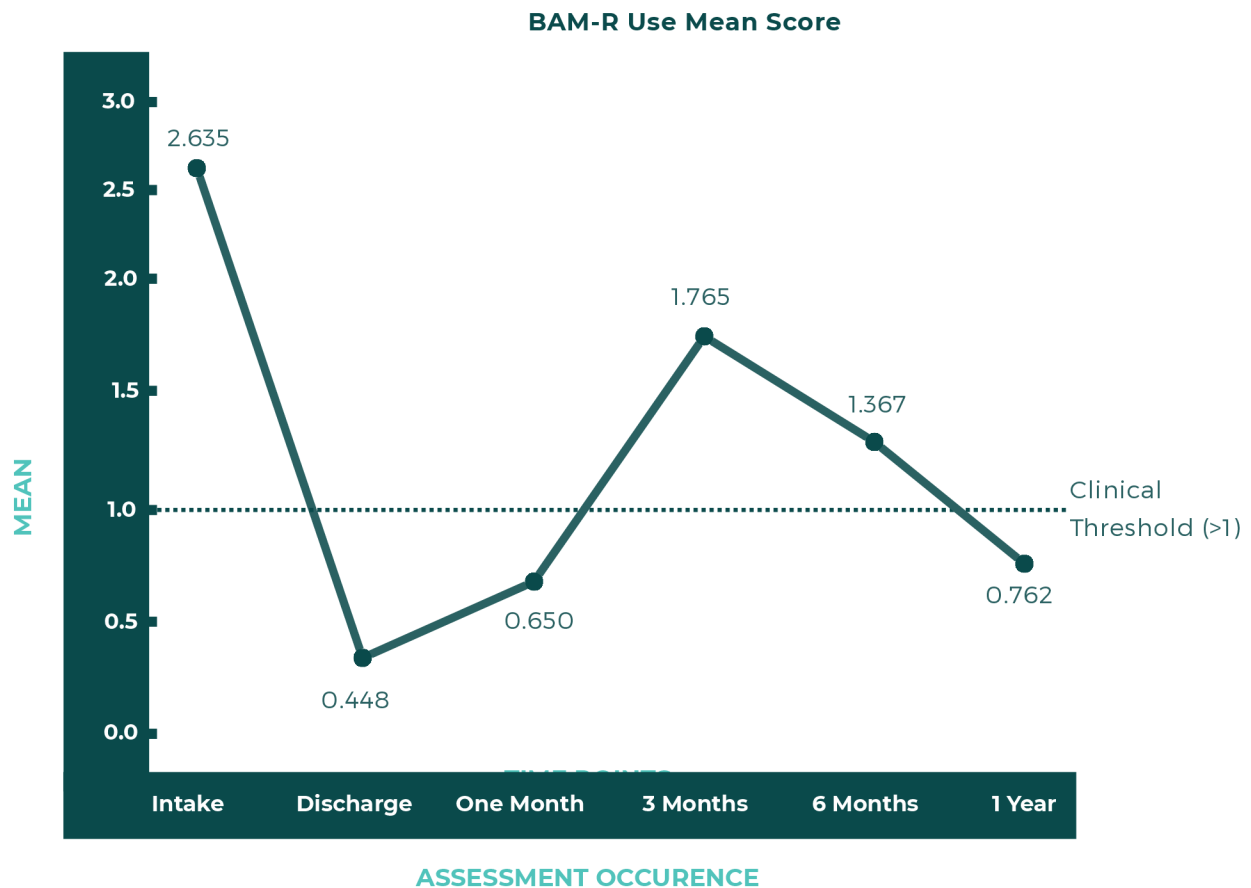


RQ3 - SUBSTANCE ABUSE



BAM-R Use scores demonstrated substantial reductions in substance use following treatment. Compared with intake, estimated use scores were 83.0% lower at discharge and remained below intake throughout the follow-up period. Although the magnitude of improvement fluctuated over time, substance use was 71.1% lower at one year post-discharge, demonstrating substantial and sustained improvement in substance use outcomes.

RQ3 - SUBSTANCE ABUSE



Note: Negative lower confidence limits are a statistical artifact of the model. BAM-R Use scores cannot be less than zero.. BAM-R Use scores demonstrated substantial reductions following treatment. Mean Use declined from 2.64 at intake to 0.45 at discharge, falling below the clinical-attention threshold of 1. Although scores fluctuated during follow-up and temporarily exceeded the threshold at three and six months, the one-year mean declined to 0.76, representing a 71.1% reduction from intake and a return to below the clinical-attention threshold. Overall, the pattern indicates substantial improvement in substance use that remained evident one year post-discharge.

BAM-R USE DOMAIN

Descriptive Statistics

Time		Count	Mean	Standard Deviation	CV
Intake	Deland	70	4.67	4,380	93.8%
	Orlando	443	2.34	3,431	146.4%
	Palm Coast	138	0.89	2,455	275.4%
	Total	651	2.29	3,512	153.7%
Discharge	Deland	34	0.94	2,662	282.9%
	Orlando	197	0.23	0.967	414.1%
	Palm Coast	88	0.17	0.887	520.4%
	Total	319	0.29	1,256	430.9%
One Month	Deland	5	0.40	0.894	223.6%
	Orlando	39	0.95	2,305	243.0%
	Palm Coast	15	0.60	1,682	280.3%
	Total	59	0.81	2,063	253.6%
Three Months	Deland	2	4.50	6,364	141.4%
	Orlando	9	0.22	0.667	300.0%
	Palm Coast	7	0.57	1,134	198.4%
	Total	18	0.83	2,203	264.4%
Six Months	Deland	7	0.86	2,268	264.6%
	Orlando	32	2.06	3,172	153.8%
	Palm Coast	11	1.18	2,136	180.8%
	Total	50	1.70	2,859	168.2%

a. Dependent Variable: USE.

BAM-R USE DOMAIN

Descriptive Statistics

Time		Count	Mean	Standard Deviation	CV
One Year	Deland	4	0.00	0	
	Orlando	53	1.08	2,286	212.50%
	Palm Coast	19	1.21	1,932	159.60%
	Total	76	1.05	2,141	203.40%
Total	Deland	122	3.08	4,143	134.40%
	Orlando	773	1.61	2,977	184.70%
	Palm Coast	278	0.67	1,985	295.10%
	Total	1173	1.54	2,995	194.20%

a. Dependent Variable: USE.

Descriptive statistics demonstrate substantial reductions in BAM-R Use following treatment. Mean Use scores declined from 2.29 at intake to 0.29 at discharge, representing an approximately 87% reduction during treatment. Scores remained below intake levels throughout follow-up, despite some fluctuation over time. At one year post-discharge, the mean Use score was 1.05, approximately 54% lower than the raw intake mean. Overall, the descriptive findings indicate a marked reduction in substance use during treatment, with improvements remaining evident through one year following discharge.

BAM-R USE DOMAIN

Model Dimension^a

		Number of Levels	Number of Parameters
Fixed Effects	Intercept	1	1
	Time	6	5
	FacID	3	2
	Time * FacID	18	10
Residual			1
Total		28	19

a. Dependent Variable: USE.

Type III Tests of Fixed Effects^a

Source	Numerator df	Denominator df	F	Sig.
Intercept	1	1,155,000	40,089	0.000
Time	5	1155	18,214	0.000
FacID	2	1155	2,015	0.134
Time * FacID	10	1155	3,830	0.000

a. Dependent Variable: USE.

A longitudinal mixed-effects model demonstrated significant changes in BAM-R Use scores over time, $F(5, 1155) = 18.21$, $p < .001$, indicating that substance use changed significantly across the six assessment periods. The overall effect of treatment location was not statistically significant, $F(2, 1155) = 2.02$, $p = .134$, suggesting no overall difference in Use scores across facilities. However, the significant time-by-location interaction, $F(10, 1155) = 3.83$, $p < .001$, indicates that patterns of change over time differed across locations. Overall, the findings provide strong statistical evidence of meaningful changes in substance use over time.

BAM-R USE DOMAIN

Estimates^a

Time	Mean	Std. Error	df	95% Confidence Interval	
				Lower Bound	Upper Bound
Intake	2,635	0.142	1,155,000	2,356	2,915
Discharge	0.448	0.198	1155	0.061	0.836
One Month	0.650	0.499	1155	-0	1,629
Three Months	1,765.000	0.802	1155	0.192	3,337
Six Months	1,367	0.475	1155	0.435	2,300
One Year	0.762	0.523	1,155,000	-0.265	1,789

a. Dependent Variable: USE.

Estimated BAM-R Use scores demonstrated substantial reductions in substance use over time. Mean Use scores declined from 2.64 at intake to 0.45 at discharge, representing an 83.0% reduction, and remained below intake levels throughout all follow-up periods. Although scores fluctuated during follow-up, the estimated mean at one year was 0.76, representing a 71.1% reduction from intake. Importantly, the one-year estimated mean remained below the BAM-R clinical-attention threshold of 1.0, indicating substantial and sustained improvement in substance use through one year post-discharge.

BAM-R USE DOMAIN

Pairwise Comparisons^a

(I) Time		Mean Difference (I-J)	Std. Error	df	Sig.c	95% Confidence Interval for Differencec	
						Lower Bound	Upper Bound
Intake	Discharge	2.187*	0.244	1155	0.000	1,470	2,904
	One Month	1.986*	0.519	1155	0.002	0.459	3,512
	Three Months	1	0.814	1155	1,000	-1,524	3,266
	Six Months	1,268	0.496	1155	0.161	-0.191	2,727
	One Year	1.873*	0.542	1155	0.009	0.278	3,469
Discharge	Intake	-2.187*	0.244	1155	0.000	-2,904	-1,470
	One Month	-0.201	0.537	1155	1,000	-1,780	1,378
	Three Months	-1,316	0.826	1155	1,000	-3,745	1,112
	Six Months	-0.919	0.515	1155	1,000	-2,433	0.595
	One Year	-0.314	0.560	1155	1,000	-1,959	1,332

Pairwise comparisons confirmed significant reductions in BAM-R Use from intake at several key assessment periods. Use scores were significantly lower at discharge ($p < .001$), one month ($p = .002$), and one year post-discharge ($p = .009$) compared with intake. Although estimated scores also remained below intake at three and six months, these differences were not statistically significant after adjustment for multiple comparisons. Importantly, none of the post-discharge assessments differed significantly from discharge, indicating that the substantial reduction in substance use achieved during treatment was maintained through one year post-discharge.



Based on estimated marginal means

*. The mean difference is significant at the .05 level.

a. Dependent Variable: USE.

c. Adjustment for multiple comparisons: Bonferroni.

BAM-R USE DOMAIN

Pairwise Comparisons^a

(I) FacID		Mean Difference (I-J)	Std. Error	df	Sig.b	95% Confidence Interval for Difference ^b	
						Lower Bound	Upper Bound
Deland	Orlando	0.747	0.533	1155	0.482	-0.529	2.024
	Palm Coast	1.124	0.567	1,155,000	0.143	-0.235	2.483
Orlando	Deland	-0.747	0.533	1155	0.482	-2.024	0.529
	Palm Coast	0.377	0.347	1155	0.835	-456.000	1,209
Palm Coast	Deland	-1.124	0.567	1,155,000	0.143	-2.483	0.235
	Orlando	-0.377	0.347	1155	0.835	-1,209	0.456

Based on estimated marginal means

a. Dependent Variable: USE.

c. Adjustment for multiple comparisons: Bonferroni.

Pairwise comparisons found no statistically significant differences in BAM-R Use scores across treatment locations. Comparisons between DeLand and Orlando ($p = .482$), DeLand and Palm Coast ($p = .143$), and Orlando and Palm Coast ($p = .835$) were all nonsignificant after adjustment for multiple comparisons. These findings indicate that, despite differences in client populations and levels of care across locations, overall substance use outcomes did not significantly differ by treatment facility.

BAM-R USE DOMAIN

4. Time * FacIDa

Time		Mean	Std. Error	df	95% Confidence Interval	
					Lower Bound	Upper Bound
Intake	Deland	4,671	0.331	1,155,000	4,022	5,321
	Orlando	2,343	0.132	1155	2,085	2,601
	Palm Coast	0.891	0.236	1155	0.429	1,354
Discharge	Deland	0.941	0.475	1,155,000	0.009	1,873
	Orlando	0.234	0.197	1155	-0.154	0.621
	Palm Coast	0.170	0.295	1155	-0.409	0.750
One Month	Deland	0.400	1,239.000	1,155,000	-2,030	2,830
	Orlando	0.949	0.443	1155	0.079	1,819
	Palm Coast	0.600	0.715	1155	-0.803	2,003
Three Months	Deland	4,500	1,958	1155	0.658	8,342
	Orlando	0.222	0.923	1155	-1,589	2,034
	Palm Coast	0.571	1,047	1155	-1,482	2,625
Six Months	Deland	0.857	1,047	1,155,000	-1,197	2,911
	Orlando	2,063	0.490	1155	1,102	3,023
	Palm Coast	1,182	0.835	1155	-0.457	2,820
One Year	Deland	-0.00	1,385	1,155,000	-2,717.000	2,717
	Orlando	1,075	0.380	1,155,000	0.329	1,822
	Palm Coast	1,211	0.635	1155	-0.036	2,457

a. Dependent Variable: USE.

BAM-R USE DOMAIN FINDINGS

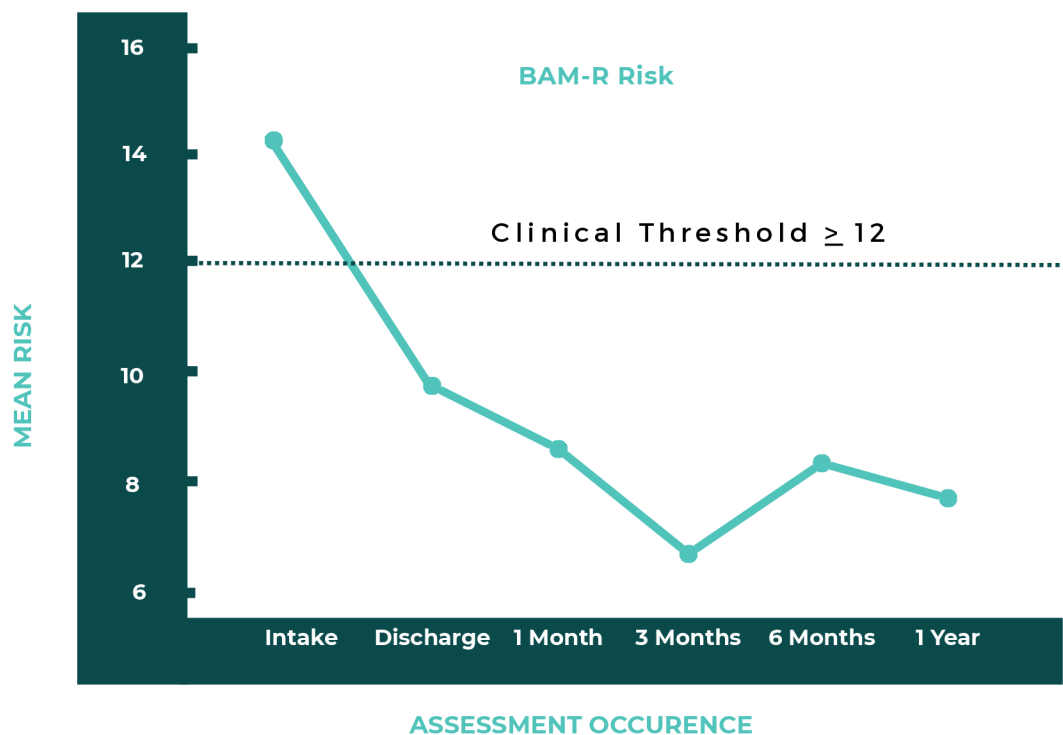
The longitudinal analysis demonstrated a significant reduction in substance use over time ($p < .001$). Estimated BAM-R Use scores declined from 2.64 at intake to 0.45 at discharge, an 83.0% reduction. At one year post-discharge, the estimated mean remained low at 0.76, representing a 71.1% reduction from intake and remaining below the BAM-R clinical-attention threshold of 1.0.

Pairwise comparisons confirmed that Use scores were significantly lower than intake at discharge ($p < .001$), one month ($p = .002$), and one year ($p = .009$). Although scores fluctuated during follow-up, none of the post-discharge assessments differed significantly from discharge, indicating that the substantial reduction achieved during treatment was maintained through one year post-discharge.

Importantly, overall BAM-R Use scores did not significantly differ across treatment locations ($p = .134$). While patterns of change over time varied by location, the overall findings demonstrate substantial and sustained reductions in substance use following treatment. At one year, clients maintained an estimated 71.1% reduction in substance use relative to intake, providing evidence of meaningful and durable improvement.



RQ3 - SUBSTANCE ABUSE RISK FACTORS



BAM-R Risk Factors demonstrated substantial improvement following treatment. Estimated Risk scores declined from 13.57 at intake, above the clinical-attention threshold of 12, to 10.21 at discharge and remained below the threshold throughout the post-discharge period. At one year, the estimated mean was 7.64, representing a 43.7% reduction in risk factors relative to intake. Overall, the findings demonstrate a substantial reduction in recovery-related risk that was sustained through one year post-discharge.

BAM-R RISK DOMAIN

Descriptive Statistics

Time		Count	Mean	Standard Deviation	CV
Intake	Deland	70	15.20	4,045	26.60%
	Orlando	443	15.58	5,584	35.80%
	Palm Coast	138	9.94	4,821	48.50%
	Total	651	14.34	5,751	40.10%
Discharge	Deland	34	11.26	3,536	31.40%
	Orlando	197	9.83	4,560	46.40%
	Palm Coast	88	9.53	4,541	47.60%
	Total	319	9.90	4,471	45.20%
One Month	Deland	5	7.20	5,357	74.40%
	Orlando	39	9.51	6,303	66.30%
	Palm Coast	15	6.93	4,803	69.30%
	Total	59	8.66	5,918	68.30%
Three Months	Deland	2	9.50	0.707	74.00%
	Orlando	9	7.78	5,403	69.50%
	Palm Coast	7	4.57	3,910	85.50%
	Total	18	6.72	4,750	70.70%

a. Dependent Variable: Risk.

BAM-R RISK DOMAIN

Descriptive Statistics

Time		Count	Mean	Standard Deviation	CV
Six Months	Deland	7	8.14	5,336	65.50%
	Orlando	32	8.28	6,854	82.80%
	Palm Coast	11	7.73	6,958	90.00%
	Total	50	8.14	6,568	80.70%
One Year	Deland	4	9.00	5,888	65.40%
	Orlando	53	7.92	4,949	62.50%
	Palm Coast	19	6.00	4,595	76.60%
	Total	76	7.50	4,925	65.70%
Total	Deland	122	13.07	4,806	36.80%
	Orlando	773	12.89	6,238	48.40%
	Palm Coast	278	9.16	4,950	54.00%
	Total	1173	12.02	6,030	50.10%

a. Dependent Variable: Risk.

Descriptive statistics demonstrate substantial and sustained reductions in BAM-R Risk Factors following treatment. Mean Risk scores declined from 14.34 at intake to 9.90 at discharge, moving from above the clinical-attention threshold of 12 to below the threshold. Scores remained below the threshold throughout follow-up, with means of 8.66 at one month, 6.72 at three months, 8.14 at six months, and 7.50 at one year. Based on the raw descriptive means, the one-year score represents an approximately 47.7% reduction in risk factors from intake, indicating that improvements observed during treatment remained evident through one year post-discharge.

BAM-R RISK DOMAIN

Model Dimension^a

		Number of Levels	Number of Parameters
Fixed Effects	Intercept	1	1
	Time	6	5
	FacID	3	2
	Time * FacID	18	10
Residual			1
Total		28	19

a. Dependent Variable: Risk.

Type III Tests of Fixed Effects^a

Source	Numerator df	Denominator df	F	Sig.
Intercept	1	1,155,000	597,331	0.000
Time	5	1155	25,418	0.000
FacID	2	1155	7,330	0.001
Time * FacID	10	1155	4,778	0.000

a. Dependent Variable: Risk.

A longitudinal mixed-effects model demonstrated significant changes in BAM-R Risk Factors over time, $F(5, 1155) = 25.42$, $p < .001$, providing strong evidence that recovery-related risk decreased across the assessment period. Significant differences were also observed across treatment locations, $F(2, 1155) = 7.33$, $p = .001$, along with a significant time-by-location interaction, $F(10, 1155) = 4.78$, $p < .001$, indicating that patterns of change varied across locations. These location differences should be interpreted in the context of different levels of client acuity and levels of care at treatment entry, rather than as direct evidence of differences in treatment effectiveness.

BAM-R RISK

Estimates^a

Time	Mean	Std. Error	df	95% Confidence Interval	
				Lower Bound	Upper Bound
Intake	13,573	0.264	1155	13,055	14,092
Discharge	10,210	0.367	1155	9,491	10,930
One Month	7,882	0.926	1155	6,064	9,700
Three Months	7,283	1,488	1155	4,364	10,202
Six Months	8,050	0.882	1155	6,320	9,781
One Year	7,642	0.972	1155	5,735	9,548

a. Dependent Variable: Risk.

Estimated BAM-R Risk scores demonstrated substantial and sustained improvement over time. Mean Risk scores declined from 13.57 at intake to 10.21 at discharge, moving from above the clinical-attention threshold of 12 to below it. Scores continued to decline following discharge and remained below the threshold at every follow-up assessment. At one year, the estimated mean was 7.64, representing a 43.7% reduction in risk factors relative to intake. Overall, the findings indicate substantial reductions in recovery-related risk that were maintained through one year post-discharge.

BAM-R RISK

Pairwise Comparisons^a

(I) Time		Mean Difference (I-J)	Std. Error	df	Sig.c	95% Confidence Interval for Differences ^c	
						Lower Bound	Upper Bound
Intake	Discharge	3.363*	0.452	1155	0.000	2,033	4,693
	One Month	5.691*	0.963	1155	0.000	2,858	8,525
	Three Months	6.290*	1,511	1155	0.001	1,846	10,735
	Six Months	5.523*	0.921	1155	0.000	2,814	8,231
	One Year	5.932*	1,007	1,155,000	0.000	2,970	8,893
Discharge	Intake	-3.363*	0.452	1155	0.000	-4,693	-2,033
	One Month	2,328	0.996	1155	0.294	-0.602	5,259
	Three Months	2,927	1,532	1155	0.845	-1,580	7,435
	Six Months	2,160	955.000	1155	0.359	-0.650	4,970
	One Year	2,569	1,039	1,155,000	0.203	-0.486	5,624

Based on estimated marginal means

*. The mean difference is significant at the .05 level.

a. Dependent Variable: Risk.

c. Adjustment for multiple comparisons: Bonferroni.

Pairwise comparisons confirmed significant and sustained reductions in BAM-R Risk Factors relative to intake. Risk scores were significantly lower at discharge, one month, three months, six months, and one year post-discharge compared with intake (all $p \leq .001$). At one year, Risk scores remained 5.93 points lower than intake ($p < .001$), representing a 43.7% reduction. Importantly, none of the post-discharge assessments differed significantly from discharge, indicating that the substantial reduction in recovery-related risk achieved during treatment was maintained through one year post-discharge.

BAM-R RISK

Pairwise Comparisons^a

(I) FacID		Mean Difference (I-J)	Std. Error	df	Sig.c	95% Confidence Interval for Difference ^c	
						Lower Bound	Upper Bound
Deland	Orlando	0.233	0.988	1,155,000	1,000	-2,136	2,603
	Palm Coast	2.600*	1,052	1,155,000	0.041	0.077	5,122
Orlando	Deland	-0.233	0.988	1,155,000	1,000	-2,603	2,136
	Palm Coast	2.366*	0.644	1155	0.001	0.821	3,912
Palm Coast	Deland	-2.600*	1,052	1,155,000	0.041	-5,122	-0.077
	Orlando	-2.366*	0.644	1155	0.001	-3,912	-0.821

Based on estimated marginal means

*. The mean difference is significant at the .05 level.

a. Dependent Variable: Risk.

c. Adjustment for multiple comparisons: Bonferroni.

Pairwise comparisons identified significant differences in BAM-R Risk scores across treatment locations. Both DeLand and Orlando had significantly higher Risk scores than Palm Coast, with differences of 2.60 points ($p = .041$) and 2.37 points ($p = .001$), respectively. DeLand and Orlando did not significantly differ from one another. These findings should be interpreted in the context of differences in client acuity and levels of care at treatment entry, rather than as evidence of differences in treatment effectiveness.

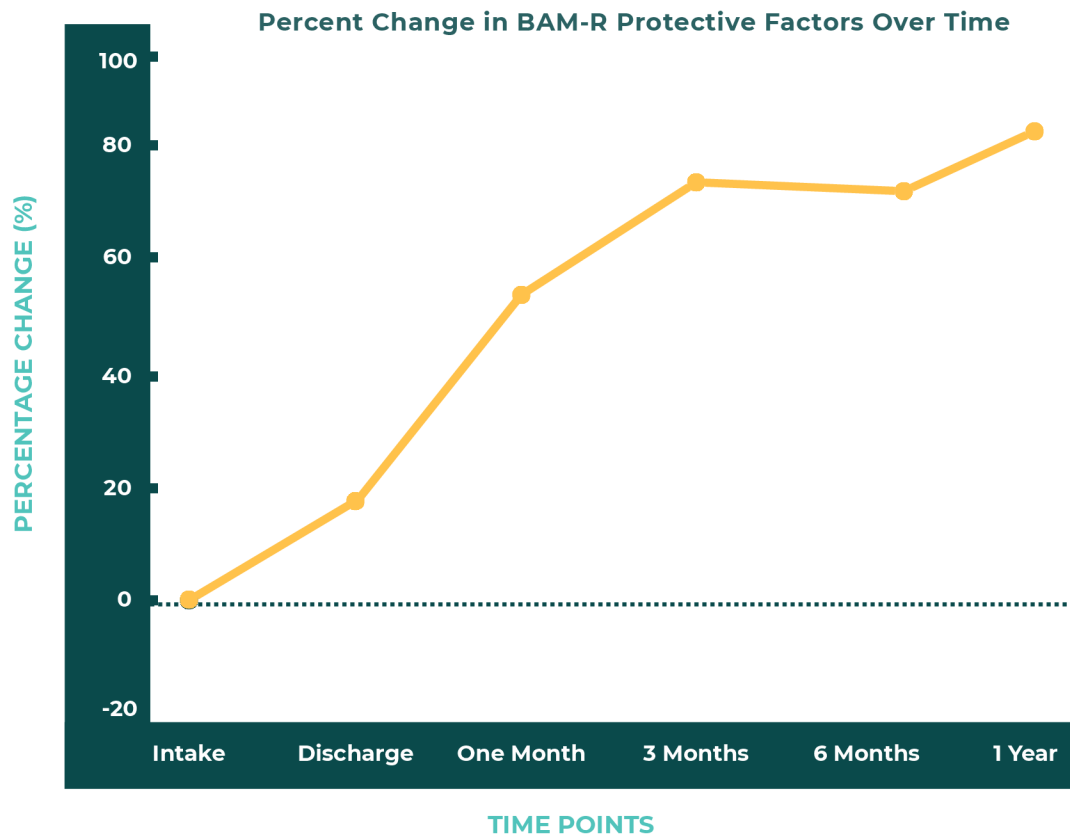
BAM-R RISK

4. Time * FaciDa

Time		Mean	Std. Error	df	95% Confidence Interval	
					Lower Bound	Upper Bound
Intake	Deland	15,200	0.614	1155	13,995	16,405
	Orlando	15,578	0.244	1155	15,099	16,057
	Palm Coast	9,942	0.438	1155	9,083	10,801
Discharge	Deland	11,265	0.882	1,155,000	9,535	12,994
	Orlando	9,832	0.366	1,155,000	9,114	10,551
	Palm Coast	9,534	0.548	1155	8,459	10,609
One Month	Deland	7,200	2,299	1155	2,690	11,710
	Orlando	9,513	0.823	1,155,000	7,898	11,128
	Palm Coast	6,933	1,327	1155	4,329	9,537
Three Months	Deland	9,500	3,635	1155	2,368	16,632
	Orlando	7,778	1,713	1155	4,416	11,140
	Palm Coast	4,571	1,943	1,155,000	0.759	8,383
Six Months	Deland	8,143	1,943	1,155,000	4,331	11,955
	Orlando	8,281	0.909	1155	6,498	10,064
	Palm Coast	7,727	1,550	1155	4,686	10,768
One Year	Deland	9,000	2,570	1,155,000	3,957	14,043
	Orlando	7,925	0.706	1155	6,539	9,310
	Palm Coast	6,000	1,179	1155	3,686	8,314

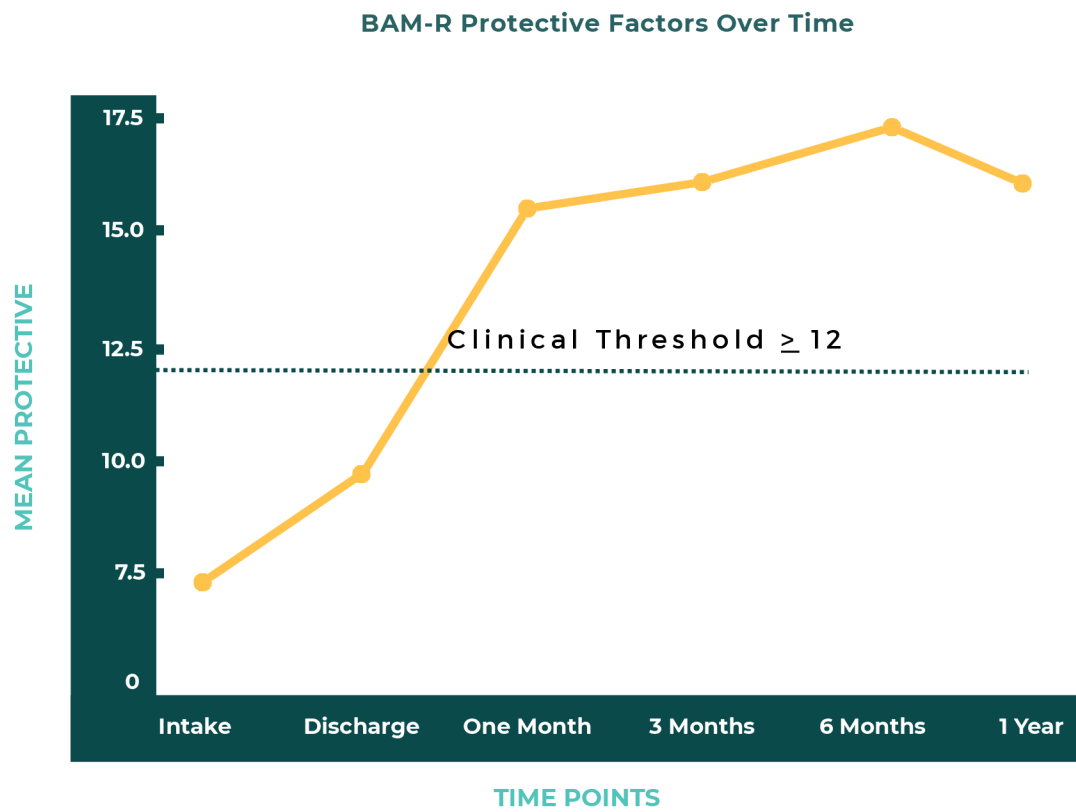
a. Dependent Variable: Risk.

RQ3 - SUBSTANCE ABUSE PROTECTIVE FACTORS



BAM-R Protective Factors increased substantially over time, reflecting meaningful gains in resources that support recovery. Protective Factors increased from intake through discharge and continued to strengthen throughout the post-discharge period. Relative to intake, estimated Protective Factors were 13.6% higher at discharge, 57.8% higher at one month, 73.6% higher at three months, 75.1% higher at six months, and 84.5% higher at one year. Overall, the findings demonstrate substantial and sustained growth in recovery-supporting protective factors through one year post-discharge.

RQ3 - SUBSTANCE ABUSE PROTECTIVE FACTORS



BAM-R PROTECTIVE

Descriptive Statistics

Time		Count	Mean	Standard Deviation	CV
Intake	Deland	70	12.00	5,059	42.20%
	Orlando	443	5.56	3,858	69.40%
	Palm Coast	138	10.40	4,764	45.80%
	Total	651	7.28	4,910	67.50%
Discharge	Deland	34	11.59	3,619	31.20%
	Orlando	197	9.25	4,623	50.00%
	Palm Coast	88	10.91	5,664	51.90%
	Total	319	9.96	4,915	49.40%
One Month	Deland	5	14.60	3,847	26.30%
	Orlando	39	15.77	5,958	37.80%
	Palm Coast	15	13.73	7,959	58.00%
	Total	59	15.15	6,354	41.90%
Three Months	Deland	2	18.00	1,414	79.00%
	Orlando	9	17.11	3,723	21.80%
	Palm Coast	7	13.43	4,860	36.20%
	Total	18	15.78	4,333	27.50%

a. Dependent Variable: Protective.

BAM-R PROTECTIVE

Descriptive Statistics

Time		Count	Mean	Standard Deviation	CV
Six Months	Deland	7	16.57	3,207	19.40%
	Orlando	32	18.56	4,938	26.60%
	Palm Coast	11	13.82	6,940	50.20%
	Total	50	17.24	5,509	32.00%
One Year	Deland	4	21.00	3,559	16.90%
	Orlando	53	15.43	6,119	39.60%
	Palm Coast	19	15.16	6,283	41.40%
	Total	76	15.66	6,129	39.10%
Total	Deland	122	12.65	4,887	38.60%
	Orlando	773	8.36	5,955	71.20%
	Palm Coast	278	11.28	5,611	49.80%
	Total	1173	9.50	5,991	63.10%

a. Dependent Variable: Protective.

Descriptive statistics demonstrate substantial growth in BAM-R Protective Factors following treatment. Mean Protective scores increased from 7.28 at intake to 9.96 at discharge, followed by further gains to 15.15 at one month and 15.78 at three months. Protective Factors remained elevated at six months (17.24) and one year (15.66), with the one-year mean more than double the raw intake mean. Overall, the findings indicate substantial and sustained strengthening of recovery-supporting protective factors throughout the post-discharge period.

BAM-R PROTECTIVE

Model Dimension^a

		Number of Levels	Number of Parameters
Fixed Effects	Intercept	1	1
	Time	6	5
	FacID	3	2
	Time * FacID	18	10
Residual			1
Total		28	19

a. Dependent Variable: Protective.

Univariate Testsa

Numerator df	Denominator df	F	Sig.
5	1155	34,809	0.000

The F tests the effect of Time. This test is based on the linearly independent pairwise comparisons among the estimated marginal means.

a. Dependent Variable: Protective.

Analysis of BAM-R Protective Factors demonstrated a significant effect of time, $F(5, 1155) = 34.81$, $p < .001$, indicating that protective factors changed significantly across the six assessment periods. Combined with the observed increases in estimated scores over time, these findings provide strong statistical evidence that clients experienced meaningful growth in recovery-supporting protective factors during treatment and throughout the post-discharge follow-up period.

BAM-R PROTECTIVE

Type III Tests of Fixed Effects^a

Source	Numerator df	Denominator df	F	Sig.
Intercept	1	1,155,000	1,707,577	0.000
Time	5	1155	34,809	0.000
FacID	2	1155	4,013	0.018
Time * FacID	10	1155	9,030	0.000

a. Dependent Variable: Protective.

The mixed-effects model demonstrated significant differences in BAM-R Protective Factors over time and across treatment locations. Protective Factors changed significantly across assessment periods, $F(5, 1155) = 34.81$, $p < .001$, and also differed significantly across locations, $F(2, 1155) = 4.01$, $p = .018$. A significant time-by-location interaction was also observed, $F(10, 1155) = 9.03$, $p < .001$, indicating that patterns of growth in protective factors varied across locations. These differences should be interpreted in the context of different levels of client acuity and levels of care at treatment entry, rather than as direct evidence of differences in treatment effectiveness.

BAM-R PROTECTIVE

Estimates^a

Time	Mean	Std. Error	df	95% Confidence Interval	
				Lower Bound	Upper Bound
Intake	9,319	0.241	1,155,000	8,846	9,792
Discharge	10,582	0.335	1155	9,925	11,239
One Month	14,701	0.845	1155	13,042	16,359
Three Months	16,180	1,358	1,155,000	13,516	18,843
Six Months	16,317	0.805	1155	14,738	17,897
One Year	17,197	0.886	1155	15,458	18,937

a. Dependent Variable: Protective.

BAM-R Protective Factors increased significantly over time, $F(5, 1155) = 34.81$, $p < .001$. This finding indicates meaningful changes in recovery-supporting protective factors across the six assessment periods. Together with the observed increases in Protective scores from intake through one year post-discharge, the results demonstrate significant and sustained growth in factors that support long-term recovery.

BAM-R PROTECTIVE

Pairwise Comparisons^a

(I) Time		Mean Difference (I-J)	Std. Error	df	Sig.c	95% Confidence Interval for Differencec	
						Lower Bound	Upper Bound
Intake	Discharge	-1.263*	0.413	1155	0.034	-2,477	-0.050
	One Month	-5.382*	0.879	1155	0.000	-7,968	-2,797
	Three Months	-6.861*	1,379	1155	0.000	-10,917	-2,806
	Six Months	-6.999*	0.840	1155	0.000	-9,470	-4,527
	One Year	-7.879*	0.919	1,155,000	0.000	-10,581	-5,176
Discharge	Intake	1.263*	0.413	1155	0.034	50	2,477
	One Month	-4.119*	0.909	1155	0.000	-6,793	-1,445
	Three Months	-5.598*	1,398	1155	0.001	-9,711	-1,485
	Six Months	-5.735*	0.872	1155	0.000	-8,299	-3,171
	One Year	-6.615*	0.948	1,155,000	0.000	-9,402	-3,828

Based on estimated marginal means

*. The mean difference is significant at the .05 level.

a. Dependent Variable: Protective.

c. Adjustment for multiple comparisons: Bonferroni.

Pairwise comparisons confirmed significant increases in BAM-R Protective Factors across all assessment periods relative to intake. Protective scores were significantly higher at discharge ($p = .034$), one month, three months, six months, and one year post-discharge (all $p < .001$). Protective Factors also continued to increase significantly after discharge, with each subsequent follow-up shown in the table significantly higher than discharge. At one year, the estimated Protective score was 7.88 points higher than intake, representing an 84.5% increase and demonstrating substantial and sustained growth in recovery-supporting protective factors.

BAM-R PROTECTIVE

Pairwise Comparisons^a

(I) FacID		Mean Difference (I-J)	Std. Error	df	Sig.c	95% Confidence Interval for Difference ^c	
						Lower Bound	Upper Bound
DeLand	Orlando	2,013	0.902	1,155,000	0.077	-0.149	4,175
	Palm Coast	2.719*	0.960	1155	0.014	0.417	5,021
Orlando	DeLand	-2,013	0.902	1,155,000	0.077	-4,175	0.149
	Palm Coast	0.706	0.588	1,155,000	0.690	-0.704	2,116
Palm Coast	DeLand	-2.719*	0.960	1155	0.014	-5,021	-0.417
	Orlando	-0.706	0.588	1,155,000	0.690	-2,116	0.704

Based on estimated marginal means

*. The mean difference is significant at the .05 level.

a. Dependent Variable: Protective.

c. Adjustment for multiple comparisons: Bonferroni.

Pairwise comparisons identified some differences in BAM-R Protective Factors across treatment locations. DeLand had significantly higher Protective scores than Palm Coast, with an estimated difference of 2.72 points ($p = .014$). In contrast, differences between DeLand and Orlando ($p = .077$) and between Orlando and Palm Coast ($p = .690$) were not statistically significant. These findings should be interpreted in the context of differences in client acuity and levels of care at treatment entry, rather than as evidence of differences in treatment effectiveness.

BAM-R PROTECTIVE

4. Time * FacIDa

Time		Mean	Std. Error	df	95% Confidence Interval	
					Lower Bound	Upper Bound
Intake	Deland	12,000	0.561	1,155,000	10,900	13,100
	Orlando	5,558	0.223	1155	5,120	5,995
	Palm Coast	10,399	0.399	1155	9,615	11,182
Discharge	Deland	11,588	0.804	1,155,000	10,010	13,166
	Orlando	9,249	0.334	1,155,000	8,593	9,904
	Palm Coast	10,909	0.500	1155	9,928	11,890
One Month	Deland	14,600	2.098	1155	10,485	18,715
	Orlando	15,769	0.751	1,155,000	14,296	17,243
	Palm Coast	13,733	1.211	1155	11,357	16,109
Three Months	Deland	18,000	3.317	1155	11,493	24,507
	Orlando	17,111	1,563	1155	14,044	20,179
	Palm Coast	13,429	1,773	1,155,000	9,950	16,907
Six Months	Deland	16,571	1,773	1,155,000	13,093	20,050
	Orlando	18,563	0.829	1155	16,936	20,189
	Palm Coast	13,818	1,414	1155	11,044	16,593
One Year	Deland	21,000	2,345	1155	16,399	25,601
	Orlando	15,434	0.644	1,155,000	14,170	16,698
	Palm Coast	15,158	1,076	1155	13,047	17,269

a. Dependent Variable: Protective.

BAM-R PROTECTIVE DOMAIN FINDINGS

BAM-R Protective Factors demonstrated significant and sustained improvement over time ($p < .001$). Estimated Protective scores increased from 9.32 at intake to 10.58 at discharge and continued to rise throughout follow-up, reaching 17.20 at one year, an 84.5% increase from intake. Pairwise comparisons confirmed significantly higher Protective scores at every subsequent assessment compared with intake, with gains continuing after discharge. Although some differences were observed across treatment locations, the overall pattern demonstrates substantial and durable growth in recovery-supporting protective factors through one year post-discharge.



DISCUSSION

The findings demonstrate substantial and sustained improvement across multiple dimensions of behavioral health and recovery. Significant reductions were observed in depression, anxiety, substance use, and recovery-related risk, alongside substantial increases in protective factors. Importantly, improvements remained evident through one year post-discharge. At one year, estimated BAM-R Use was 71.1% lower, Risk Factors were 43.7% lower, and Protective Factors were 84.5% higher than at intake. PHQ-9 and GAD-7 results similarly demonstrated significant and sustained reductions in depression and anxiety symptoms.

Differences across treatment locations should be interpreted in the context of client acuity and level of care at entry, as DeLand and Orlando include residential treatment while Palm Coast primarily serves PHP/IOP clients. Although follow-up sample sizes decreased over time, the overall pattern remained consistent: clients demonstrated meaningful improvements during treatment that were largely sustained well beyond discharge.

CONCLUSION

Differences in outcomes and trajectories were observed across treatment locations. These findings should be interpreted within the context of differences in client acuity and levels of care at treatment entry. DeLand and Orlando include residential treatment components, whereas Palm Coast primarily serves PHP/IOP clients. Accordingly, facility-level differences are better understood in relation to differences in presenting clinical severity and treatment populations rather than as direct evidence of differences in treatment effectiveness.

Although follow-up sample sizes decreased over time and outcomes demonstrated some variability during the post-discharge period, the overall pattern was consistent: clients showed marked improvement during treatment and maintained substantial gains well beyond discharge. These findings underscore the importance of evaluating treatment outcomes longitudinally rather than relying solely on admission-to-discharge change.

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CLINICAL OUTCOMES REPORT

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