



CORAM DEO
recovery

PROGRAM EVALUATION



2025

Prepared by Urban Alliance in partnership with Impact Analytics

Acknowledgements

Urban Alliance (UA) is a collective impact organization located in East Hartford, Connecticut. Our mission is to create opportunities for people to achieve lasting change in their lives through the collaborative work of churches and organizations in our local community.

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Program Evaluation: Final Report

ABSTRACT

Coram Deo Recovery provides transitional housing, case management and faith recovery services to women struggling with addiction. This program evaluation is based on baseline data collected at program intake from a total of 701 women and a two-month follow-up survey from 203 women. Analyses demonstrate that women receiving services at Coram Deo Recovery come to the program in a vulnerable state. At intake, they present with significant substance abuse and mental health symptoms and a history of a number of adverse life experiences. However, after participating in the program for just two months, women experience several positive changes including increased confidence in their ability to resist the urge to use drugs, increased social support, increased connection to supportive services, improved mental health, increased self-efficacy and increased overall life stability. These findings suggest that the services provided by Coram Deo Recovery are effective and have a positive impact on the people they serve.

INTRODUCTION

About Coram Deo Recovery

The mission of Coram Deo Recovery is to help women struggling with addiction rebuild their lives and families. Coram Deo Recovery provides transitional housing, case management and faith-based recovery services to women struggling with addiction.

Transitional Living

Coram Deo currently has five homes in New Britain and Berlin, Connecticut, with a total of 52 beds. The transitional housing program is progressive in nature, guiding each woman from the very beginning of their recovery, where the most support is needed, to independent living.

Step one offers the greatest level of support and generally lasts between two and six months. Case managers are at each home five to seven days each week, working diligently with each client to help them obtain the necessary supports to leading a healthy lifestyle. This may include connecting them with clinical services, doctors, dentists and other healthcare professionals.

Step two is intended for those who are working and who have created some stability in their lives. These homes receive some oversight, but much less than in step one. All of the rules continue to apply as residents continue to build a solid foundation for long term sustainability of their recovery. This step lasts from three months up to three years.

Step three is intended for those who have successfully navigated steps one and two and feel ready to move on to living independently. Women in step three are free to live independently, with no curfew and are granted the capacity to have overnight guests at their discretion. Women in step three must remain sober and pay their rent on time.

Case Management

For the first two months in the program, women meet at least weekly with a case manager to develop an individual recovery plan. This plan defines both long- and short-term goals for the client and together they map out a specific action plan that will help the client achieve their goals. The plan includes specific steps the client will take to achieve their goals as well as referrals to additional programs in the community. After the first two months, case managers meet with women approximately monthly to provide ongoing support and referrals.

Faith Recovery Support Services (FRSS)

Faith Recovery Support Services provide each woman an opportunity for mentoring and learning. Through one-on-one meetings and group sessions, women are able to build their social support network, recover in a safe environment and set personal goals.

This program evaluation collected data at intake and 60 days later. The purpose of this evaluation is to:

- provide detailed information about the demographics and life situations of women when they are entering the program
- assess outcomes associated with receiving service at Coram Deo Recovery
- report client satisfaction and experiences after participating in the program for 60 days

METHODS

Evaluation Design

Between 2015 and 2024, a total of 701 women residing at Coram Deo Recovery completed a baseline survey at intake. In 2016, a two-month follow-up survey was also included in the evaluation and was completed by 203 women. A total of 150 women completed both baseline and two-month follow-up surveys. Surveys were completed through an online data collection system. Women were provided with a computer and were able to enter their answer to each question. Baseline and two-month follow-up surveys included questions about each woman's demographic information, substance abuse history, severity and ability to resist urges to use,

anxiety and depression, social support, self-efficacy, life stability, service utilization and program satisfaction.

Measures

The following section provides information about the measures used to collect information about each of the constructs listed below.

Substance Abuse

Substance Abuse Severity: The Drug Abuse Screening Test (DAST-10) is a 10 item brief screening tool that can be administered by a clinician or self-administered (Skinner, 1982). Each question requires a “yes” or “no” response and each “yes” response receives one point. Composite scores indicate the degree of problems related to substance abuse (0 = none; 1-2 = low; 3-5 = moderate; 6-8 = substantial; and 9-10 = severe) as well as suggested actions (none, monitor, further investigation, intensive assessment).

History of Substance Use: For 10 different substances (alcohol, marijuana, methamphetamines, crack/cocaine, heroin, hallucinogens, prescription drugs) women were asked if they had ever used that substance and the age of first use.

Resisting the Urge to Use: Situational Confidence Scale (SCQ) is an eight item questionnaire in which people report how confident they are in their ability to resist the urge to use substances when encountering trigger situations likely to create an urge to use (Breslin *et al.*, 2000). Response choices ranged from “not at all confident” to “totally confident.”

Social and Community Support

Social Support: The MOS Social Support Survey was used to measure perceived emotional support and practical/tangible support (Sherbourne & Stewart, 1991). Women indicated the degree to which they experienced each state, with response choices ranging from “none of the time” to “all of the time.”

Utilization of Supportive Services: Women were asked about their utilization of 10 different types of community programs or services, such as SNAP, primary care, OB-GYN or 12 Step. They indicated if they utilized each program over the previous 12 months or were currently engaged in the service.

Emotional Health, Well-being and Life Stability

Patient Health Questionnaire: The Patient Health Questionnaire for Depression and Anxiety (PHQ-4) was developed to create a brief screener for symptoms of depression and anxiety (Kroenke, Spitzer, Williams & Löwe, 2009). Total score is determined by adding together the

scores for each of the four items. Scores are rated as normal (0-2), mild (3-5), moderate (6-8) and severe (9-12).

Self-Efficacy Scale: Self-efficacy is a person’s confidence in their ability to accomplish a specific goal. Six items from the General Self-Efficacy Scale were used to assess self-efficacy (Bosscher, Rudolf, Smit & Johannes, 1998). Women were asked how true each statement was in their life with response choices ranging from “not at all true” to “exactly true.”

Missouri Self-Sufficiency Scale: The Missouri Community Action Family Self-Sufficiency Scale assesses life stability and self-sufficiency. This tool is based on the premise that the definition of self-sufficiency should include more than just an economic assessment of a family’s situation and must attempt to incorporate less quantifiable aspects of a person’s life, including factors such as education, housing stability, life skills and mental health. The scale consists of twelve areas of life: educational attainment, academic skills, income, employment, health insurance, physical health, mental health and substance abuse, housing, food, child care, transportation, and psychosocial and environmental stressors. For each subscale, women select one of ten responses that best describes their current situation.

RESULTS

Demographics

The following tables provide information about baseline data reported at intake for 701 women. Demographic data shows that most women residing at Coram Deo Recovery describe themselves as White ($n=504$, 75.9%) and came to Coram Deo Recovery directly from an inpatient hospitalization ($n=437$, 65.8%). Most report being single ($n= 422$, 63.9%), having at least a high-school diploma ($n=423$, 64.1%) and that they are not currently working ($n=600$, 91.7%). The average monthly income at intake was \$184.37 (SD = 465.19). However, it is important to note that over 80% of respondents had no monthly income at intake.

Table 1. Demographic Information

Ethnicity $n = 664$	Education (highest level) $n = 660$	
Black/African American: 8.6%	Middle-School: 4.4%	High-School: 64.1%
Latino: 10.1%	2 Yr. College: 19.7%	4 Yr. College: 8.0%
White: 75.9%		
Prior Residence $n = 664$	Marital Status $n = 660$	
Prison: 7.2% Inpatient: 65.8%	Married: 5.3%	Divorced: 19.5%
Shelter: 6.0% Own Apartment: 3.0%	Partnered: 3.3%	Separated 4.5%
	Single: 63.9%	Widowed 3.3%

Detox: 2.6% Living with Friend/Fam: 15.2%	
Hours of Employment Weekly <i>n</i> = 654	Average Monthly Income at Intake: \$184.37
Not Working: 91.7% Under 20 Hours: 2.1% 20-35 Hours: 2.6% 35 + Hours: 3.5%	Average # Children Under 18 Yrs.: 1.0

Women were asked if they had ever experienced adverse or traumatic life events. Table 2 shows the percentage of women who experienced each type of life event. Analyses show that a high prevalence of women receiving services from Coram Deo Recovery experienced adverse and traumatic events in their lives. In fact, 95.5% of women at Coram Deo experienced at least one of the adverse or traumatic life experiences listed below. The majority of woman have experienced multiple traumatic events in their lives, with over 70% of women experiencing 4 or more.

Table 2. Adverse Life Experiences (*n*=664)

Life Experience	<i>n</i>	% Yes
Have you ever been homeless?	523	78.8%
Have you ever been arrested?	557	83.9%
Have you ever been in prison?	367	55.5%
Have you ever been involved in prostitution?	202	30.6%
Have you ever been a victim of domestic violence?	486	73.9%
Have you ever been inpatient?	631	95.5%

Table 3. Number of Adverse Life Experiences (*n*=663)

Number of Life Experiences per Individual	<i>n</i>	% Yes
0	3	0.5%
1	19	2.9%
2	67	10.1%
3	107	16.1%
4	165	24.9%
5	185	27.9%
6	117	17.6%

The DAST-10 assesses substance abuse severity and offers a suggested response based on the level of severity. Most women (80.8%) yielded composite scores that placed them in the substantial or severe range indicating a need for intensive assessment and likely a comprehensive intervention.

Table 4. DAST-10 Substance Abuse Severity (n=621)

Degree of Substance Related Problems	Action	Percent
No problems reported	None	1.0%
Low level	Monitor	6.9%
Moderate level	Further investigation	11.3%
Substantial level	Intensive Assessment	33.8%
Severe level	Intensive Assessment	47.0%

The PQH-4 screens for depression and anxiety. Composite scores indicate the severity of a person’s symptoms of depression and anxiety and the need for further assessment. At intake, most women (76.4%) at Coram Deo Recovery scored in the moderate and severe range for depression and anxiety symptoms. This indicates that many women come into the program in an acute emotional state. It is recommended that people scoring mild, moderate or severe receive a diagnostic evaluation. All women filling out this screening came into the program with at least mild depression and anxiety scores. See Table 5.

Table 5. PQH-4: Anxiety and Depression Severity (n=454)

Anxiety and Depression Severity	<i>n</i>	Percent
Normal	0	0.0%
Mild	107	23.6%
Moderate	179	39.4%
Severe	168	37.0%

Women were asked questions about the intake process. Table 6 suggests that most women entering the program had a very positive intake experience. They did not have a difficult time scheduling the phone screen (n=644, 90.5%), felt comfortable talking with the person who conducted the phone screen (n=644, 91.8%), felt respected by the person who conducted the

phone screen ($n=643$, 94.2%) and felt that they were treated with respect when they first arrived ($n=644$, 95.6%).

Table 6. Client Intake Experiences

	<i>n</i>	<i>SD</i>	Mean	% Strongly Disagree	% Disagree	% Uncertain	% Agree	% Strongly Agree
1. I had a difficult time scheduling a phone screen to enter the program.	644	.947	1.60	59.3	31.2	3.0	3.1	3.4
2. I was comfortable talking to the person who conducted my phone screen.	645	.938	4.53	4.0	1.6	2.6	21.4	70.4
3. The person who conducted my phone screen treated me with respect.	643	.801	4.64	2.6	0.8	2.3	18.2	76.0
4. When I first arrived at the program, I was treated with respect by the staff that greeted me.	644	.763	4.72	2.9	0.3	1.2	13.5	82.1

Additionally, women were asked a series of “yes” and “no” questions about their intake experiences. See table 7 for their responses.

Table 7. Client Intake Experiences Continued

	<i>n</i>	% Yes	% No
When I first arrived at the program, I was offered something to eat.	647	83.6	16.4
When I first arrived at the program I was offered a gift bag.	645	91.5	8.5
I have been assigned a case manager at Coram Deo Recovery.	646	93.0	7.0
I know who my case manager is.	647	82.4	17.6
Did you pay a deposit when you entered Coram Deo Recovery?	644	35.1	64.9
Did you receive any mail from Coram Deo prior to coming?	642	22.4	77.6

Two-Month Outcome Data

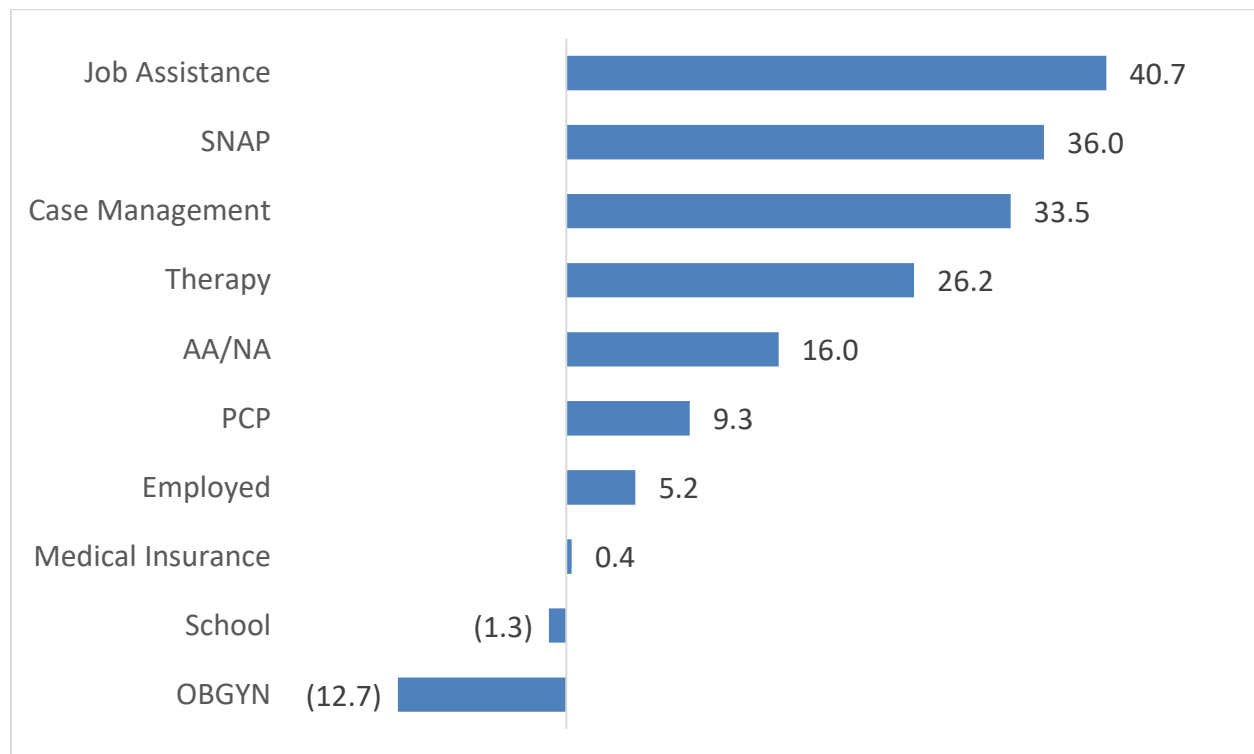
A two-month survey was included in this evaluation to measure changes in each woman’s support system, emotional and mental health and life stability after being in the program for 60 days. The following tables and figures illustrate the changes experienced by women engaged in the Coram Deo Recovery program after two months of receiving services.

The results presented in Table 8 show the percent of women engaged in each type of supportive service at intake and again at two months. This table shows increases in supportive service utilization for women receiving services from Coram Deo Recovery. In figure 1, the greatest increase in services was with assistance finding a job (+40.7pts), receiving SNAP (+36.0pts) and receiving case management (+33.5pts). Seeing a therapist (+26.2pts) and attending AA/NA meetings (+16.0pts) also had a notable increase. The only significant decline in supportive services was in seeing an OBGYN (-12.7pts).

Table 8. Percentage of Women Engaged in Each Supportive Service at Intake and Two Months

	Intake (%)	2 Month (%)	Pt Chg
1. Have you seen a primary care physician in the last 12 months?	69.8	79.1	+9.3pts
2. Have you seen an OB-GYN (obstetrician/gynecologist) in the last 12 months?	46.0	33.3	-12.7pts
3. Are you currently receiving SNAP (food stamps)?	54.0	90.0	+36.0pts
4. Do you currently have medical insurance?	97.1	97.5	+0.4pts
5. Have you attended school (e.g. GED or college program) in the last 12 months?	12.2	10.9	-1.3pts
6. Have you seen a therapist for 3 or more sessions in the last 12 months?	61.8	88.0	+26.2pts
7. Have you attended AA/NA meetings over the last 12 months?	78.5	94.5	+16.0pts
8. Have you received assistance finding employment over the last 12 months?	17.8	58.5	+40.7pts
9. Have you been employed in last 12 months?	49.5	54.7	+5.2pts
10. Have you received case management (had a person help you make and achieve goals) over the last 12 months?	60.0	93.5	+33.5pts

Figure 1. Intake vs. Two Months Point Change of Women Engaged in Each Supportive Service



The results presented in Table 9 demonstrate that participation in Coram Deo Recovery services result in an increased ability to resist the urge to use drugs and alcohol ($t(147) = -4.31, p < .001$), increased emotional support ($t(150) = -5.24, p < .001$), increased practical support ($t(150) = -3.55, p < .001$), reduced depression and anxiety ($t(94) = 2.06, p < .05$), increased self-efficacy ($t(145) = -9.36, p < .001$) and improved self-sufficiency and life stability ($t(137) = -16.14, p < .001$). That is, after participating in Coram Deo Recovery’s programming for 2 months, women are better able to resist the urge to use drugs and alcohol, feel they have increased emotional and practical support in their lives, report lower feelings of depression and anxiety, feel an increased sense of self-efficacy or confidence in their ability to accomplish their goals, and overall are experiencing greater self-sufficiency and life stability. It is important to note that while feelings of depression and anxiety decreased after 60 days in the program, this measure had the lowest statistical significance and reported improvement across program impacts.

Table 9. Changes in Emotional and Mental Health

	Range	Pre-Test Mean	Post-Test Mean	df	t value
Ability to Resist Urges	1-5	3.96	4.31	147	-4.31***

	Range	Pre-Test Mean	Post-Test Mean	df	t value
Emotional Support	1-5	3.89	4.29	150	-5.24***
Practical Support	1-5	3.17	3.57	150	-3.55***
Depression and Anxiety	1-4	7.82	7.24	94	2.06*
Self-Efficacy	1-4	3.05	3.50	145	-9.36***
Self-Sufficiency	1-10	5.73	7.49	137	-16.14***

Note: $p < .05^*$; $p < .01^{**}$; $p < .001^{***}$

Women were asked a series of questions about the degree to which their basic needs were met at intake and after 60 days in the program. Results demonstrate that after 60 days in the program, their basic needs were better met. Women reported a significant increase in having enough healthy food ($t(147) = -4.22, p < .015$), adequate housing ($t(147) = -6.37, p < .001$), enough money to pay bills ($t(144) = -4.24, p < .001$), reliable transportation ($t(144) = -6.46, p < .001$), and enough clothes and basic need items ($t(147) = -5.61, p < .001$). No changes were reported related to adequate health insurance. It is important to note that a high percentage of women entered the program with health insurance and that the mean for this item was quite high ($M=4.31$) at intake. There may not be much room for improvement in this area.

In figure 2, after 60 days in the program, women were best equipped with safe and adequate housing (mean = 4.4 out of 5), health insurance (mean = 4.3 out of 5) and healthy food (mean = 4.0 out of 5). In figure 3, while responses remained under 4 out of 5, or below Agree, for reliable transportation, money to pay bills and clothes and basic needs, these areas saw the greatest % impact after women were part of the program for 60 days (% growth respectively +32%, +24% and +21%).

Table 10. Basic Needs

	Range	Pre-Test Mean	Post-Test Mean	df	t value
I have enough healthy food for myself and my family.	1-5	3.50	3.99	147	-4.22***
I have safe and adequate housing.	1-5	3.75	4.40	147	-6.37***
I have adequate health insurance.	1-5	4.31	4.34	146	-0.42
I have enough money to pay my bills each month.	1-5	2.38	2.96	144	-4.24***
I have reliable transportation.	1-5	2.60	3.42	144	-6.46***

	Range	Pre-Test Mean	Post-Test Mean	df	t value
I have enough clothes and basic needs items.	1-5	3.18	3.84	147	-5.61***

Note: $p < .05^*$; $p < .01^{**}$; $p < .001^{***}$

Figure 2. Post-Test Mean (1-5 Scale with 1 Strongly Disagree to 5 Strongly Agree)

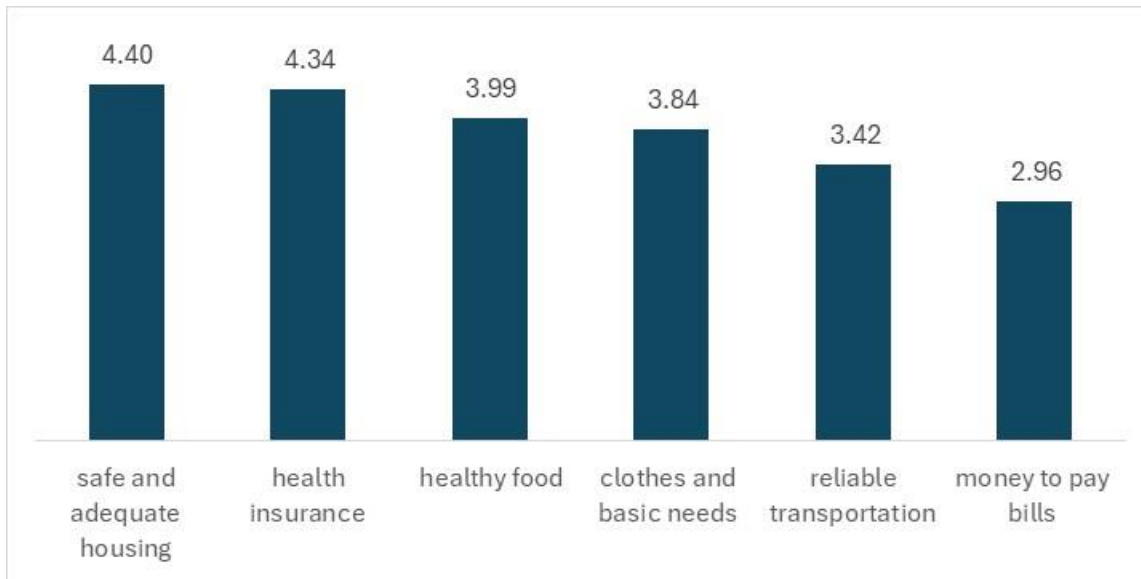
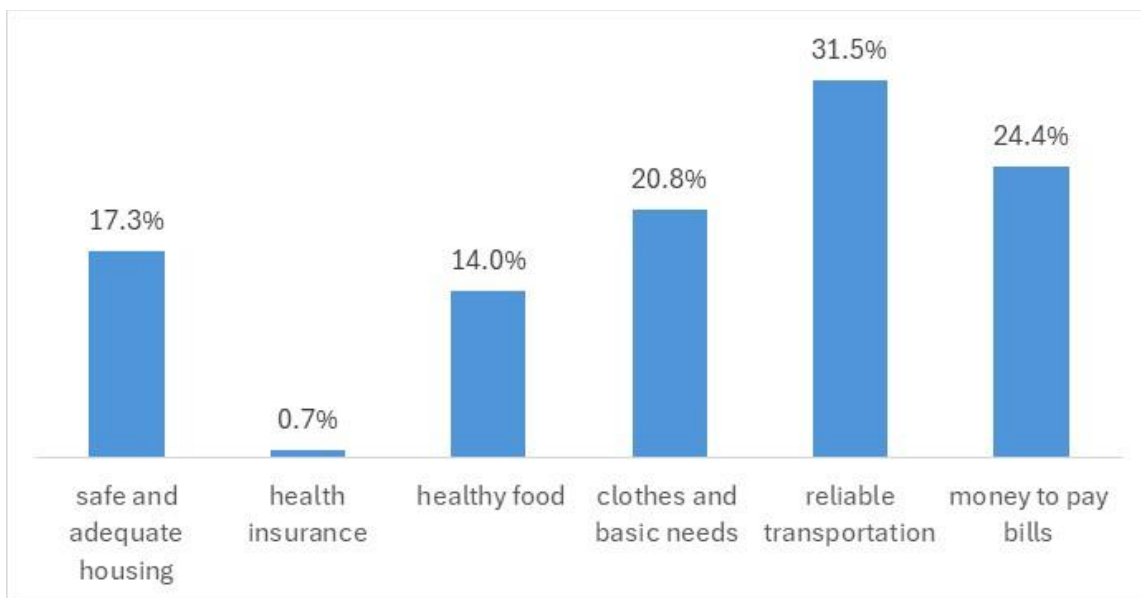


Figure 3. Pre and Post-Test Mean % Change



Satisfaction with Coram Deo Recovery Services

After being in the program for 60 days, women were asked about their experiences with receiving services. Overall, women felt positive about their participation in the program. All mean scores were over 4, indicating that women, on average, agreed to strongly agreed with each of the statements below.

Table 11. Satisfaction with Coram Deo Services

	<i>n</i>	<i>SD</i>	Mean	% Strongly Disagree	% Disagree	% Uncertain	% Agree	% Strongly Agree
1. I am treated with respect by program staff.	198	.624	4.62	0.5	1.0	1.5	29.8	67.2
2. My apartment is safe and in good condition.	198	.732	4.51	0.5	2.5	3.5	32.8	60.6
3. I receive the support I need at Coram Deo Recovery to accomplish my goals.	198	.670	4.57	0.5	2.0	1.0	32.8	63.6
4. I am treated with respect by the other women in the program.	198	.765	4.46	0.5	3.5	3.0	34.8	58.1
5. The rules at Coram Deo Recovery are fair.	198	.739	4.51	0.5	3.0	2.5	32.8	61.1
6. When I have a concern, staff listen and respond quickly.	197	.747	4.49	0.5	3.0	3.0	33.5	59.9
7. I am glad I chose to live at Coram Deo Recovery.	198	.677	4.58	0.5	1.5	3.0	29.8	65.2
8. I would recommend this program to a friend.	198	.728	4.58	1.0	1.5	3.5	26.8	67.2
9. I meet regularly with my case manager.	197	.687	4.56	0.5	2.5	0.5	33	63.5
10. My case manager has helped me to set personal goals.	197	.710	4.54	0.5	3	0.5	33.5	62.4
11. My case manager has helped me to make a plan to accomplish my goals.	197	.746	4.53	0.5	3.6	1.5	31	63.5

Finally, women were asked about perceived outcomes associated with program participation. Overall, women reported that they have more supportive relationships, more hope for their future, that they have achieved some of their goals, feel happier, and are more confident in their ability to remain substance-free and take care of themselves.

Table 12. Client Reported Outcomes

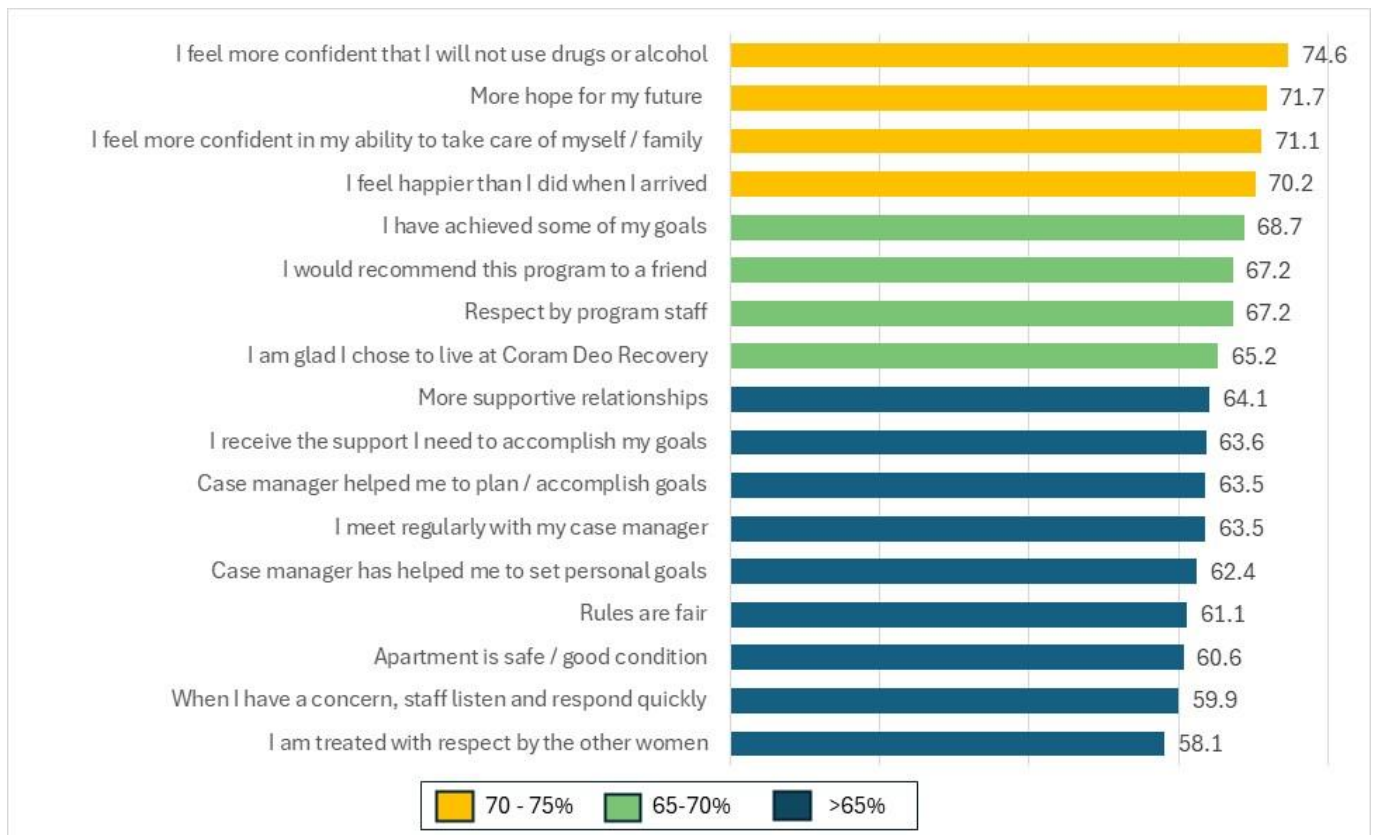
	<i>n</i>	<i>SD</i>	Mean	% Strongly Disagree	% Disagree	% Uncertain	% Agree	% Strongly Agree
1. I have more supportive relationships than I did when I arrived at Coram Deo Recovery.	198	.686	4.56	0.0	3.0	2.0	30.8	64.1
2. I have more hope for my future than I did when I arrived at Coram Deo Recovery.	198	.596	4.67	0.0	1.5	2	24.7	71.7
3. Since I arrived at Coram Deo Recovery, I have achieved some of my goals.	198	.494	4.64	0.0	1.5	1.5	28.3	68.7
4. I feel happier than I did when I arrived at Coram Deo Recovery.	198	.610	4.65	0.0	1.5	2.5	25.8	70.2
5. I feel more confident that I will not use drugs or alcohol than I did when I arrived at Coram Deo Recovery.	197	.613	4.70	0.5	1.5	0.5	22.8	74.6
6. I feel more confident in my ability to take care of myself and my family than I did when I arrived at Coram Deo Recovery.	197	.617	4.65	0.0	2.0	1.5	25.4	71.1

Figure 4 shows responses for strongly agree across satisfaction with Coram Deo services and client reported outcomes. Women responded very favorably across questions. On average,

more than 65% of women strongly agree across the statements about the program and outcomes.

The strongest responses were around positive outcomes. 75% of women strongly agree they are more confident they will not use drugs or alcohol in the future after completing 60 days in Coram Deo. This was the top response. More than 70% of women also strongly agree they have more hope for their future, they are more confident in their ability to take care of themselves and their families and they feel happier than when they arrived at Coram Deo Recovery. 65 to 70% of women reported that they achieved some of their goals, they would recommend Coram Deo Recovery to a friend, they were shown respect by program staff and they are glad they chose to live at Coram Deo Recovery.

Figure 4. Percent Strongly Agree - Satisfaction with Services and Client Reported Outcomes



CONCLUSION

This program evaluation examined the impact of women participating in Coram Deo Recovery's transitional living program. A total of 701 women completed baseline surveys at intake and 203 women completed surveys after 60 days in the program. Analyses reveal that women enter Coram Deo Recovery in a very vulnerable state, that program participation results in several positive outcomes, and that women residing at Coram Deo Recovery are very satisfied with the services they receive.

At intake, women entering Coram Deo Recovery are in a vulnerable state. Baseline data reveals that women enter Coram Deo Recovery in a very vulnerable state. Most women are actively experiencing substantial or severe problems related to substance use. They have experienced a variety of adverse and traumatic life situations, such as homelessness, incarceration, domestic violence or inpatient hospitalization. The majority of woman have experienced multiple adverse or traumatic events in their lives, with over 70% of women experiencing 4 or more. Most women are not employed and more than 80% do not have a monthly income. Further, most women (76.4%) scored in the moderate or severe range for feelings of depression and anxiety indicating a need for follow-up mental health services and evaluation. Based on these findings, at intake, women entering Coram Deo Recovery are in a vulnerable state and need a comprehensive set of support services. Further, the fact that all women scored positive on the depression and anxiety screen, and this area scored the lowest significance for improvement on the Pre vs. Post test, suggest that that clinical evaluation and ongoing behavioral health services may be particularly important for this population.

Women who participate in the program for 60 days experience significant improvements. Data analyses indicate that program participation is associated with a variety of statistically significant outcomes for women including:

- increased confidence in their ability to resist the urge to use drugs
- increased emotional and tangible support
- increased general self-efficacy
- increased overall life stability
- reduced feelings of depression and anxiety

These findings demonstrate that Coram Deo Recovery facilitates holistic changes in the lives of the women they serve, which leads to increased overall life stability. The Coram Deo Recovery case management program is effective in partnering with women to set goals, create recovery plans detailing the steps needed to accomplish goals, connect women to needed services in the community, and offer support to women as they take steps towards achieving their goals.

After 60 days in the program, women report a strong increase in optimism. The strongest responses to satisfaction with the Coram Deo Recovery services were around increased positive outlook for the future; specifically increased confidence in ability, increased hope and increased happiness. 75% of women strongly agree they are more confident they will not use drugs or alcohol in the future after completing 60 days in Coram Deo. This was the top response. More than 70% of women also strongly agree they have more hope for their future, they are more confident in their ability to take care of themselves and their families and they feel happier than when they arrived at Coram Deo Recovery.

Women are satisfied with the services they receive from Coram Deo Recovery. Data was collected both about the program intake process as well as about experiences women had at Coram Deo Recovery after participating in the program for 60 days. Overall, women were very satisfied with all aspects of programming. At intake, 82% of women reported they strongly agree that they were treated with respect when they first arrived. Women also felt comfortable talking with the person who conducted the phone screen, felt respected by the person who conducted the phone screen, and did not find it difficult to schedule the phone screen to enter the program. After 2 months, they continued to report they were treated with respect, that they would refer the program to a friend and that they were happy they chose to live at Coram Deo Recovery. Overall, 90% of women agree to strongly agree across all questions about satisfaction with Coram Deo Recovery. These findings suggest that Coram Deo Recovery creates a warm and welcoming atmosphere where women in the program feel respected.

Next Steps

This program evaluation yielded several positive findings related to the services provided by Coram Deo Recovery. Future research may build on this evaluation and increase the sample size of participants completing two-month surveys. This would provide continued evaluation of the Coram Deo services.

Overall, the current evaluation provides strong evidence indicating that Coram Deo Recovery offers important benefits to women who participate in their programming.

CITATIONS

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