



GAUDENZIA

ADDICTION TREATMENT & RECOVERY SERVICES



FRONTLINE REPORT

FY 2023

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INTRODUCTION

Gaudenzia, Inc. has created our Frontline Report to inform our stakeholders in Pennsylvania, Delaware, Maryland and Washington, D.C. of the trends we see in the field of addiction treatment. Gaudenzia has the distinction of being one of the largest non-profit treatment providers for substance use and co-occurring disorders in the Mid- Atlantic region.

We invite you to read through the Frontline Report for general observations and regionally specific data on demographics and primary and secondary substance use disorder diagnoses across our service areas. We welcome any feedback you may have at PublicRelations@gaudenzia.org

ABOUT OUR DATA

The data reported here represents a full year of data from diagnosis forms within our electronic health record system. As a note, data does not reflect clients served in Gaudenzia's affordable housing programs, W.A.R.M.S program and some of those served in programs that have since closed.

We hope this annual reporting of aggregated data from our client base will help to guide clinical interventions and policy considerations as we work together to help those with substance use disorder (SUD) achieve long-term recovery through evidence-based care.

GAUDENZIA BY THE NUMBERS



8

SITES



Withdrawal
Management

14

SITES



Women with Children
Programs
(including licensed and others)

16

SITES



Residential
Programs

8

SITES



Halfway
Houses

6

SITES



Mental Health
Programs

288

BEDS



Justice-Involved Programs
DOC (Department of Corrections)

24

SITES



Outpatient
Programs

251

UNITS



Housing

1255

BEDS



Residential Beds

MESSAGE FROM OUR CEO

At Gaudenzia, Inc., data is one of the pillars that support everything we do – and it helps explain why we began the **Gaudenzia Frontline Report** three years ago.

The Frontline Report is one of the most comprehensive compilation of statistics about substance use disorder in Pennsylvania, Delaware, Maryland and Washington D.C., offering county-by-county data and observations based on information collected through our programs. As always, we hope that the report provides needed information and drives awareness about addiction trends for policymakers, law enforcement, media and the general public.



**Dr. Dale Klatzker, President & CEO
Gaudenzia, Inc.**

Among the highlights in this year's Frontline report:

- The number of people admitted to Gaudenzia programs in the 12 months ending June 30, increased by 12% to 15,045 from 13,387 the previous fiscal year.
- 28% of those admitted reported a secondary substance use disorder. Of those, 40% had a secondary stimulant use disorder, up from 23% a year earlier.
- The percentage of adults 55+ accessing treatment increased by 5%.
- 68% of admissions completing a biopsychosocial exam between March and June 2023 had a co-occurring mental health diagnosis.

This is actionable data that will be helpful in addressing difficult problems. It is our hope that reports like this will help spur greater urgency in providing better access to treatment services and shedding the remnants of ignorance and stigma that hold back so many of our friends, neighbors and family members from getting the help they need to regain control of their lives.

The numbers also underscore some of our top priorities. These include fostering lower barrier entry to treatment to meet people where they are in their recovery journey. This is especially important given that recent studies show just 20 percent of people with opioid use disorder in 2021 received medications that would have helped them.

We also continue to push for consistent rates and consistent, low barrier authorization processes from funders to ensure providers are paid for the services they provide at a rate that will enable them to continue helping people as quickly and smoothly as possible. We also continue to look at the impact that social determinants of health have on those with substance use disorder.

This led us to open West Mill Place, a 30-unit affordable housing development for individuals and families in Philadelphia. We know that safe and stable housing allows people to better focus on their wellbeing. It's also why we champion programs for women with children such as the Claymont Center in Delaware which recently celebrated its first anniversary. We know that keeping families together provides an incentive for women to seek recovery, gives their children a better chance and hopefully breaks the intergenerational cycle of addiction.

We must never forget that every single number in this report represents a person – a person with hopes, dreams and a desire to lead a happy and fruitful life. The 1,200 employees of Gaudenzia know this. That's why this team of caring and courageous professionals dedicate their lives each and every day to helping people with substance use disorder. They see the pain and the anguish. But they also see the triumph and joy of those who overcome their struggles.

But they can't do it alone. They need the support of policymakers and funding for programs. They need the cooperation of law enforcement. And they need the help of people like you. Please join us in this effort.

Thank you for your support.



Dr. Dale Klatzker
President & CEO
Gaudenzia, Inc.



INDUSTRY WATCH

TROUBLING TRENDS & INNOVATIVE SOLUTIONS

The Rise of Xylazine

Xylazine, also known as “tranq” or “tranq dope,” is a powerful animal tranquilizer that has infiltrated the illicit U.S. drug market in recent years — notably since the start of the COVID-19 pandemic. Today, it’s a dominant substance found in up to 91% of the dope supply in Philadelphia. The sedative makes overdoses harder to reverse and causes painful wounds that can result in amputation. Xylazine is often used to bulk up fentanyl — a highly potent synthetic opioid driving record numbers of fatal overdoses in the U.S.

Unfortunately, many people using street substances don’t realize they’re consuming xylazine and often don’t receive the wound care they need before it’s too late to prevent severe damage. While Philadelphia has been at the epicenter of the xylazine crisis, the sedative is increasingly showing up in other parts of the nation, underscoring an urgent need to expand specialized drug testing, increase equitable access to wound care, and prepare providers nationwide for the unique challenges of treating xylazine use.



Fentanyl Remains a Top Concern

Fentanyl, a deadly synthetic opioid, can be fatal even in miniscule amounts. Along with other synthetic opioids, it continues to be one of the most common drugs involved in overdose deaths today. Fentanyl is 50 to 100 times more potent than morphine and can be 50 times more potent than heroin. While often used to bulk up and increase the potency of drugs like heroin, methamphetamine, cocaine, MDMA, and others, fentanyl may also be pressed into pills made to look like prescription pills.

Individuals typically have no way to tell whether drugs purchased from illicit sources contain fentanyl, making outreach education and the distribution of fentanyl test strips, along with naloxone, crucial to addressing the nation’s overdose crisis. Naloxone can treat a fentanyl overdose if immediately administered, though multiple doses may be required to reverse a fentanyl overdose. If you suspect an opioid overdose, call 911 immediately, even if you can or have administered naloxone yourself.

Harm Reduction is Health Care

Harm reduction is a compassionate approach for individuals with a harmful habit or condition who may not be ready to commit to a complete change. Instead, changes are made incrementally while tracking progress. In substance use disorder (SUD) treatment, harm reduction refers to evidence-based practices that help reduce or prevent overdose deaths and adverse health outcomes. This includes reducing instances of life-threatening infections, as well as reducing the transmission of chronic diseases like HIV and hepatitis among people who use drugs (PWUD).

As a social justice movement, harm reduction initiatives work directly with impacted communities to provide equitable and accessible solutions to their most pressing health and social needs. A proud recipient of the Maryland Department of Health’s ACCESS Harm Reduction grant, Gaudenzia’s harm reduction outreach team engaged 4,145 individuals in MD’s Baltimore City and Anne Arundel County between November 2022 and June 2023, providing naloxone kits, overdose prevention education, and resource navigation. The program also distributed over 300 fentanyl test strips.

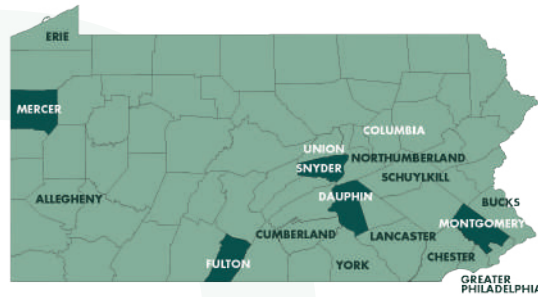
DIAGNOSIS DATA

Counties Where **ALCOHOL** is the Primary Drug of Choice

- Anne Arundel Co, MD
- Baltimore Co, MD
- Washington, DC

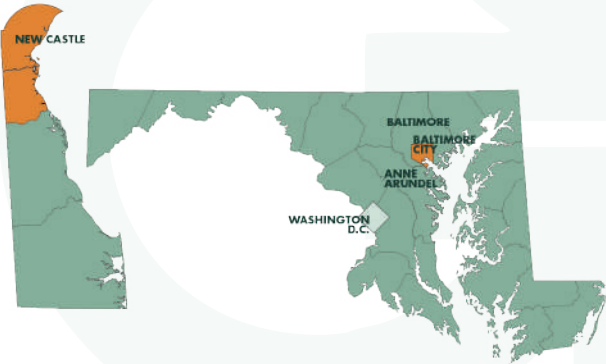


- Dauphin Co, PA
- Fulton Co, PA
- Mercer Co, PA
- Montgomery Co, PA
- Snyder Co, PA



Counties Where **OPIOIDS** are the Primary Drug of Choice

- New Castle Co, DE
- Baltimore City, MD

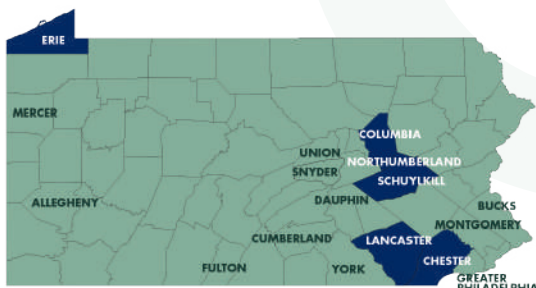


- Bucks Co, PA
- Northumberland Co, PA
- Philadelphia Co, PA



Counties Where **STIMULANTS** are the Primary Drug of Choice

- Chester Co, PA
- Columbia, PA
- Erie Co, PA (tied with OUD)
- Lancaster Co, PA
- Schuylkill Co, PA



ORGANIZATIONAL SUMMARY DATA



Number Served: 15,045*



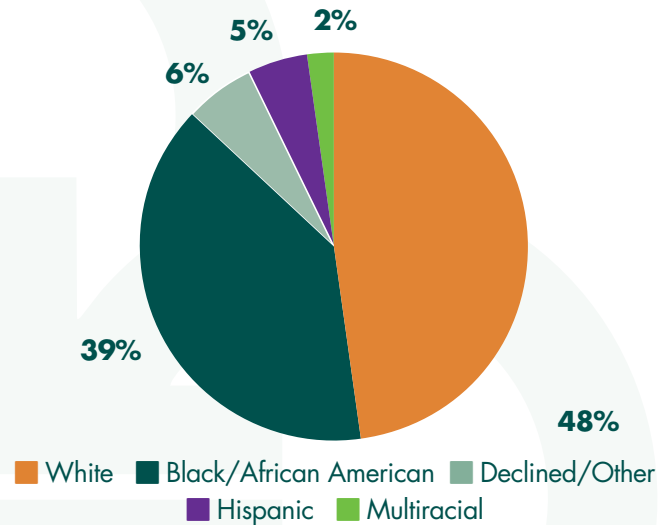
Programs: All Gaudenzia Licensed
SUD Treatment Programs

DEMOGRAPHICS:

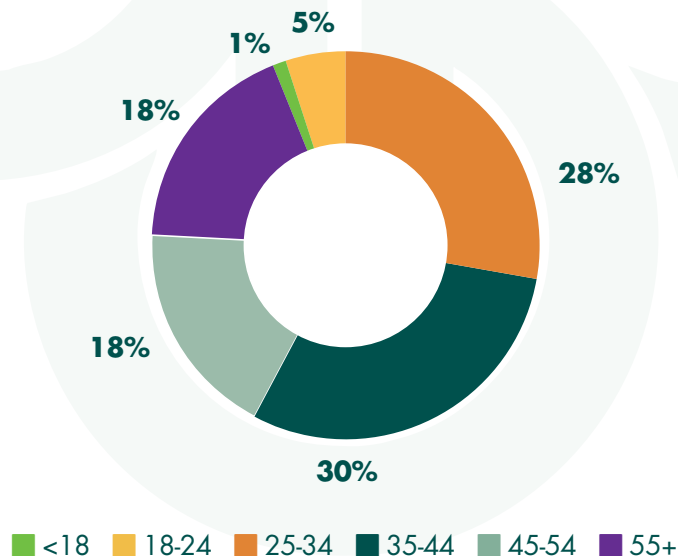
GENDER OF CLIENTS SERVED



RACE/ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED



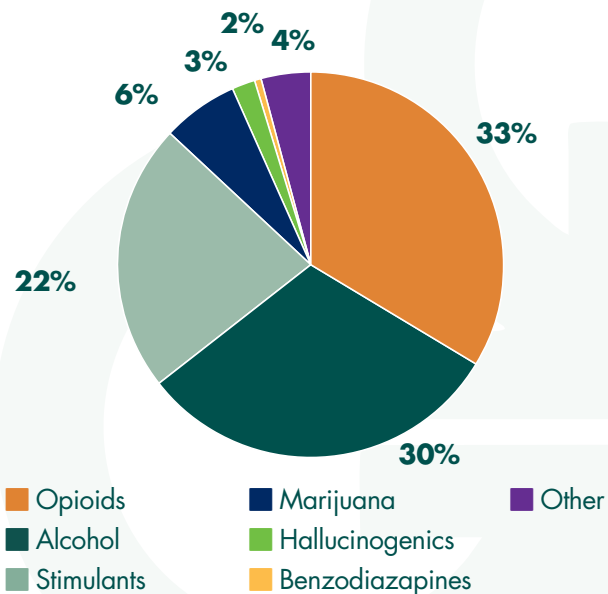
*Excludes 1,722 W.A.R.M.S. admissions.

DIAGNOSIS DATA

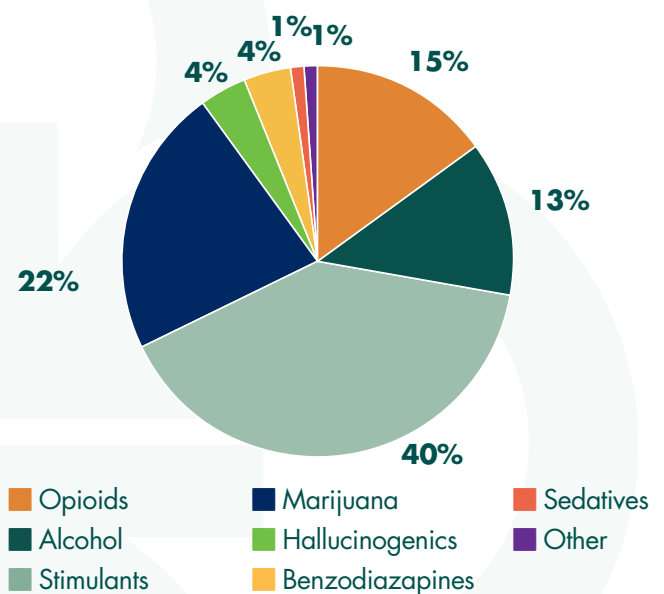
- The percentage of individuals diagnosed with an alcohol use disorder increased by 4% while individuals with a primary stimulant use decreased by 4%.
- 28% of those admitted reported a secondary SUD with a staggering increase in secondary stimulant use disorder (40% in 2023 versus 23% in 2022).
- The percentage of older adults, 55+, accessing treatment increased by 5% since 2022.
- 68% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=15,045)**



**SECONDARY SUD DIAGNOSIS DATA
FY 23 (N=4,263)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
BETWEEN FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZO	OTHER
FY 22	33%	26%	26%	8%	3%	1%	3%
FY 23	33%	30%	22%	6%	3%	2%	4%
Difference	0%	4%	-4%	-2%	0%	1%	1%



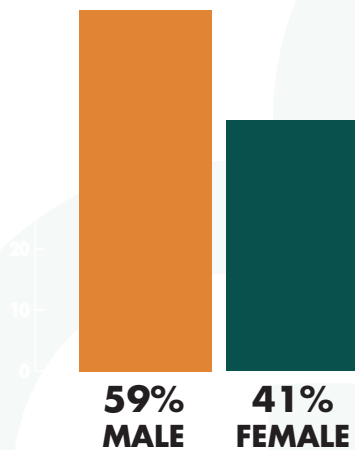
Number Served: 167



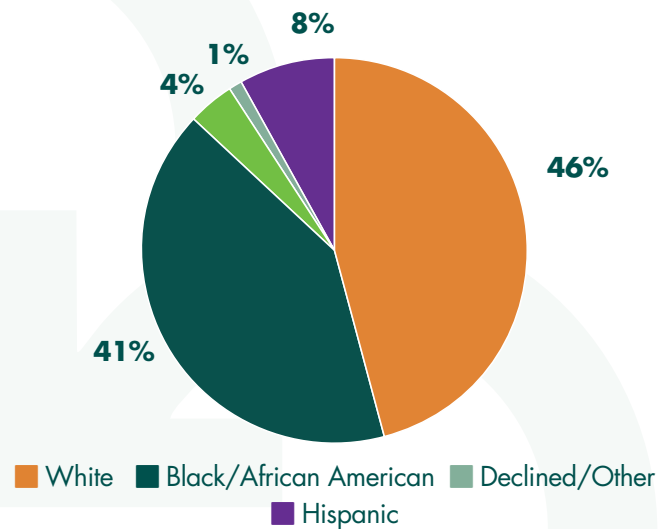
Programs: Fresh Start & Claymont Center for Pregnant and Parenting Women

DEMOGRAPHICS:

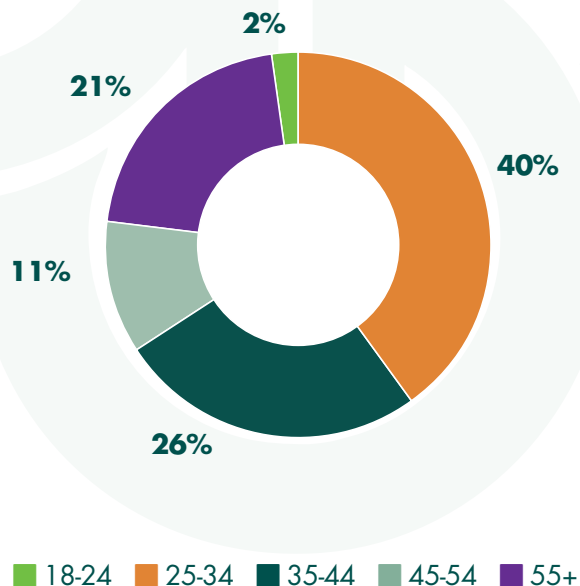
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED

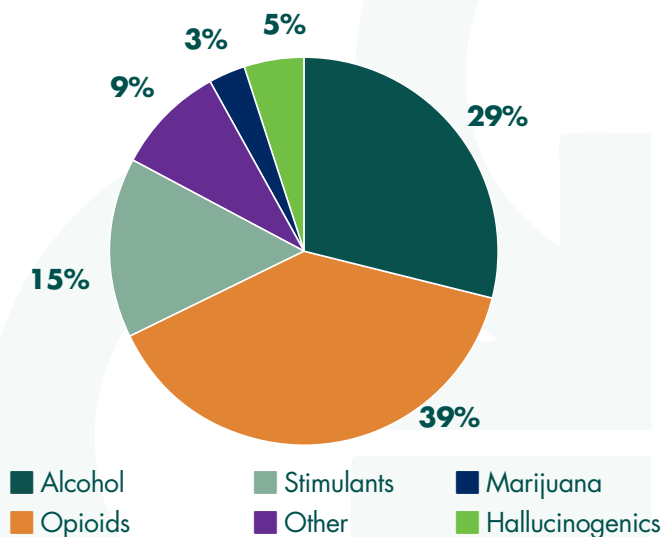




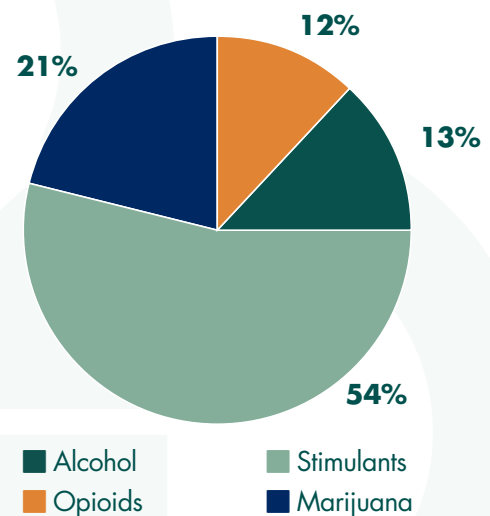
- The percentage of individuals diagnosed with an opioid use disorder increased by 4% and individuals with a hallucinogen use disorder increased by 5%.
- 14% of those admitted reported a secondary SUD with 54% reporting a secondary stimulant use disorder.
- 62% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=167)**

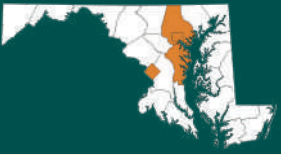


**SECONDARY SUD DIAGNOSIS DATA
FY 23 (N=24)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
BETWEEN FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZO	OTHER
FY 22	35%	27%	18%	2%	0%	N/A	18%
FY 23	39%	29%	15%	3%	5%	N/A	9%
Difference	4%	2%	-3%	1%	5%	N/A	-9%



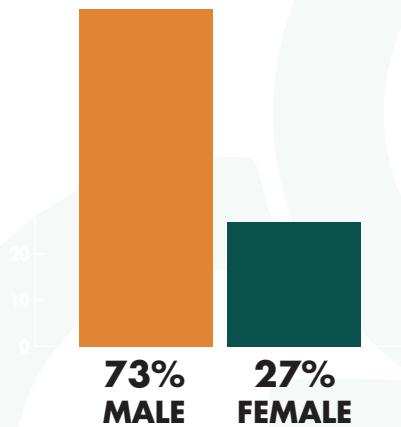
MARYLAND OVERVIEW



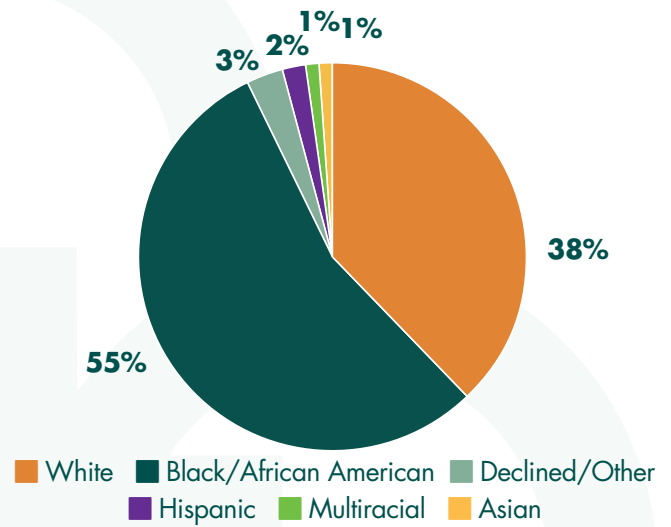
TOTAL NUMBER SERVED: 3,815

DEMOGRAPHICS:

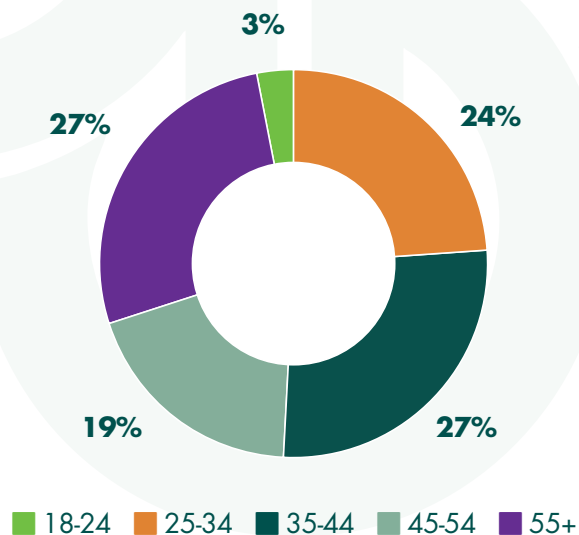
GENDER OF CLIENTS SERVED

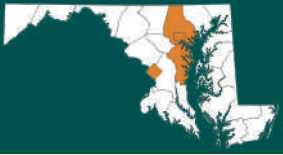


RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED



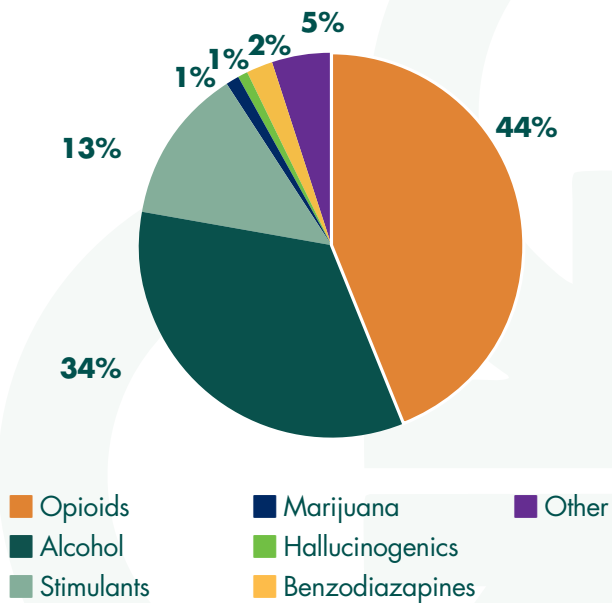


MARYLAND OVERVIEW

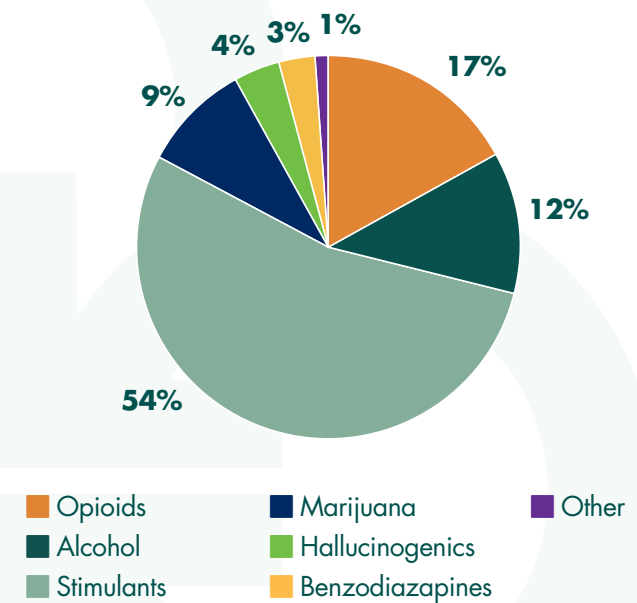
- The percentage of individuals diagnosed with an opioid use disorder fell by 10% while the percentage of individuals with alcohol use disorder increased by 4% and stimulant use disorder increased by 2%.
- 29% of those admitted had a secondary SUD with 54% reporting a stimulant use disorder.
- 70% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=3,815)**

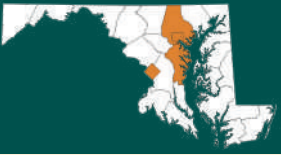


**SECONDARY SUD DIAGNOSIS DATA
FY 23 (N=1,088)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
BETWEEN FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	54%	30%	11%	1%	1%	2%	1%
FY 23	44%	34%	13%	1%	1%	2%	5%
Difference	-10%	4%	2%	0%	0%	0%	4%



MARYLAND

County:
Anne Arundel



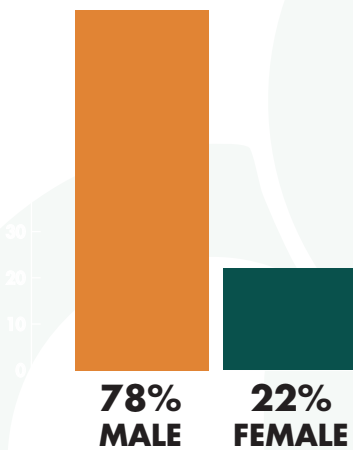
Number Served: 1,806



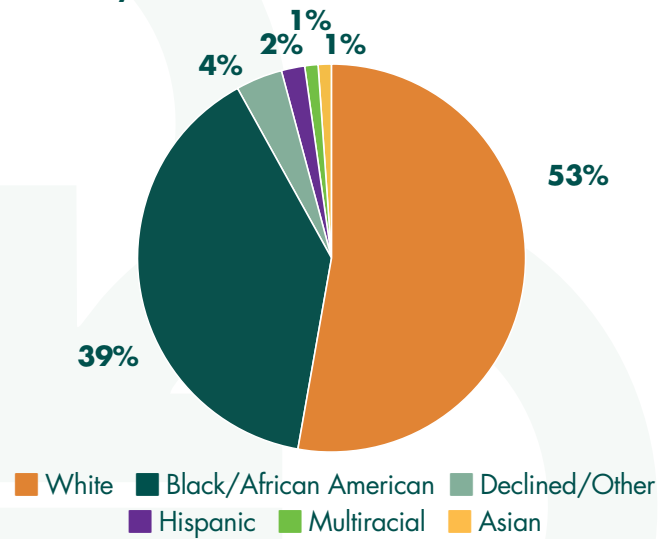
Programs: Glen Burnie OP and Crownsville programs*

DEMOGRAPHICS:

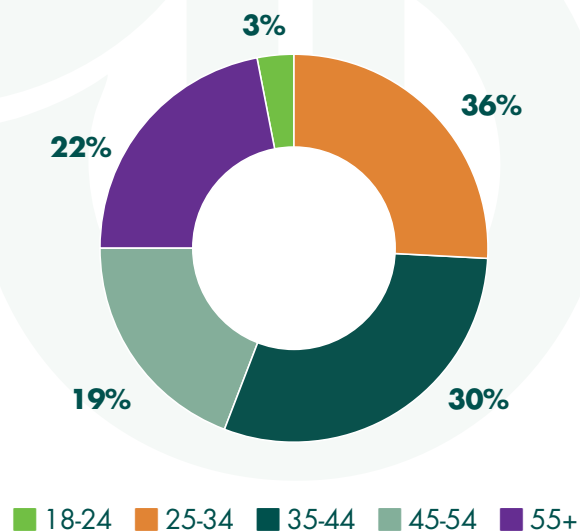
GENDER OF CLIENTS SERVED

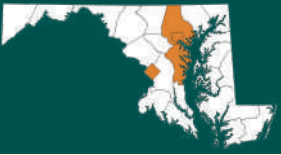


RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED

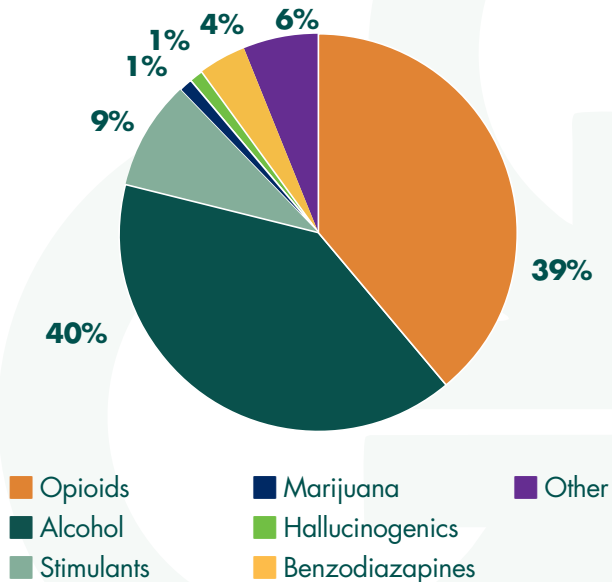




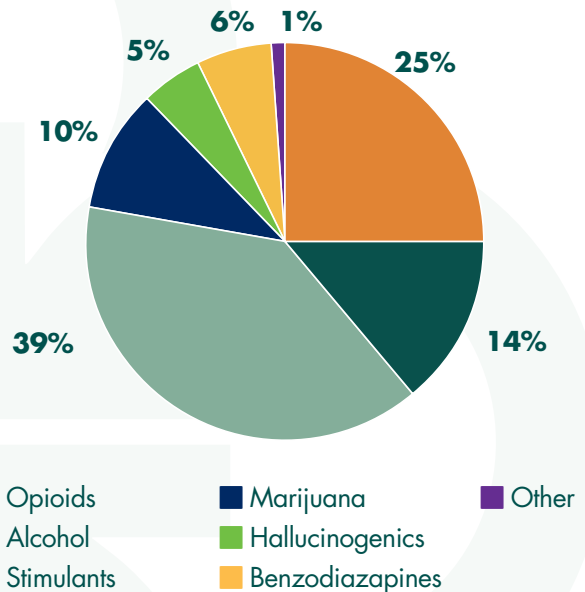
- The percentage of individuals diagnosed with an opioid use disorder fell by 11% while the percentage of individuals with alcohol use disorder increased by 5%.
- 21% of those admitted reported a secondary SUD with 39% reporting a secondary stimulant use disorder.
- 75% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA*:

**PRIMARY SUD DIAGNOSIS DATA
FY 22 (N=1,806)**

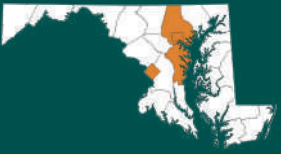


**SECONDARY SUD DIAGNOSIS DATA
FY 23 (N=388)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
BETWEEN FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	50%	35%	8%	2%	1%	3%	1%
FY 23	39%	40%	9%	1%	1%	4%	6%
Difference	-11%	5%	1%	-1%	0%	1%	5%



MARYLAND

County:
Baltimore City



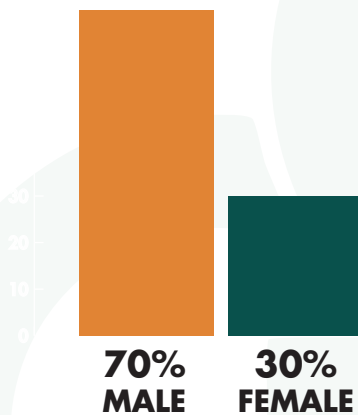
Number Served: 1,738



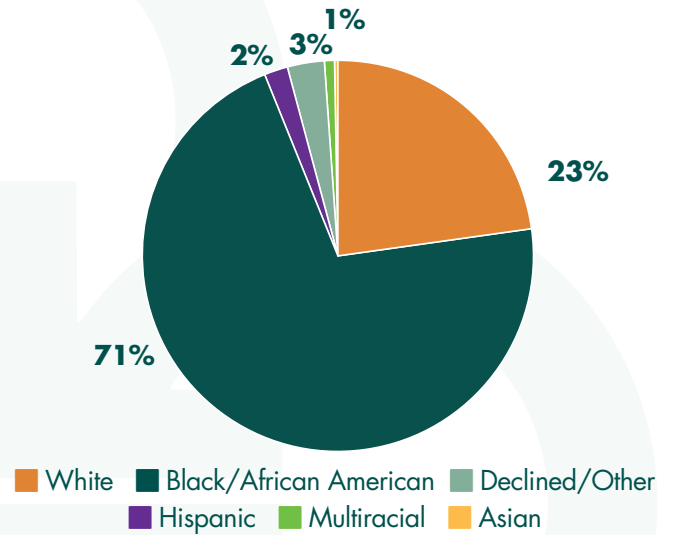
Programs: Park Heights and The Weinberg Center (Woodland Ave)

DEMOGRAPHICS:

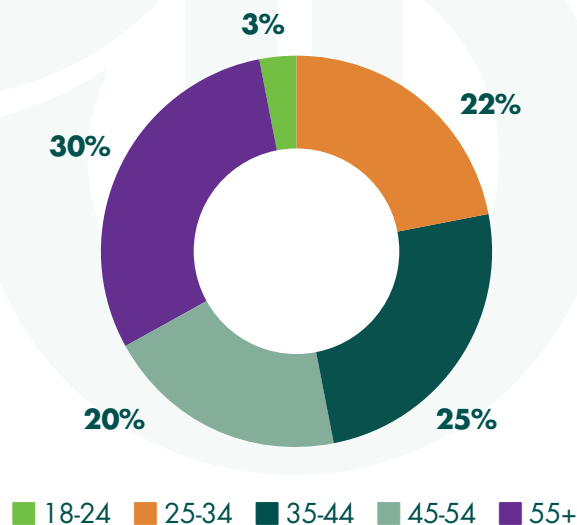
GENDER OF CLIENTS SERVED

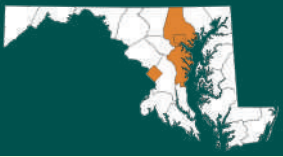


RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED

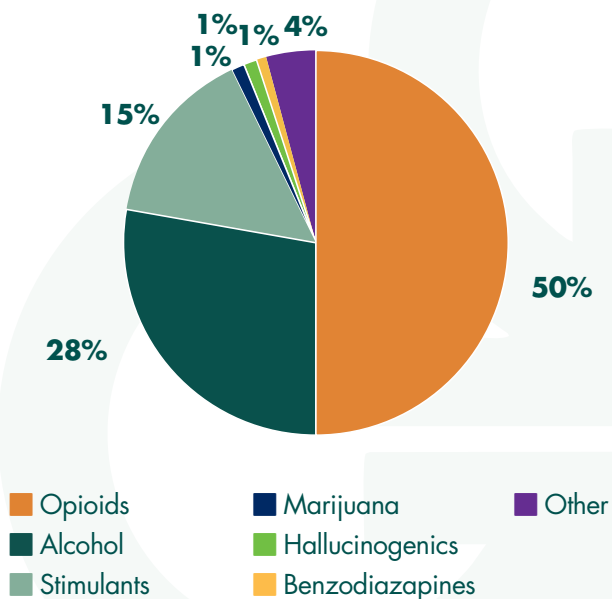




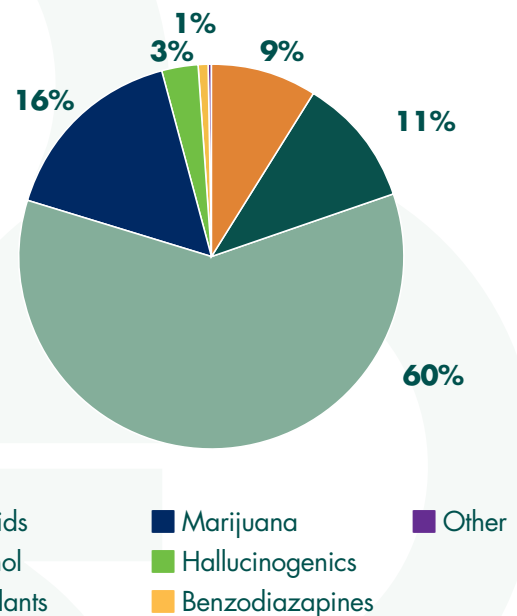
- The percentage of individuals diagnosed with an opioid use disorder fell by 9% while the percentage of individuals with stimulant use disorder increased by 3% and alcohol use disorder increased by 2%.
- 38% of those admitted reported a secondary SUD with 60% reporting a secondary stimulant use disorder.
- 61% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=1,738)**

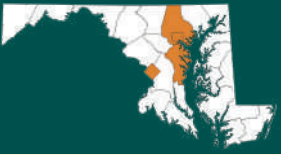


**SECONDARY SUD DIAGNOSIS DATA
FY 23 (N=660)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
BETWEEN FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	59%	26%	12%	1%	1%	1%	0%
FY 23	50%	28%	15%	1%	1%	1%	4%
Difference	-9%	2%	3%	0%	0%	0%	4%



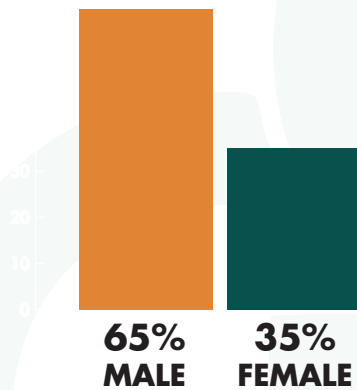
Number Served: 271



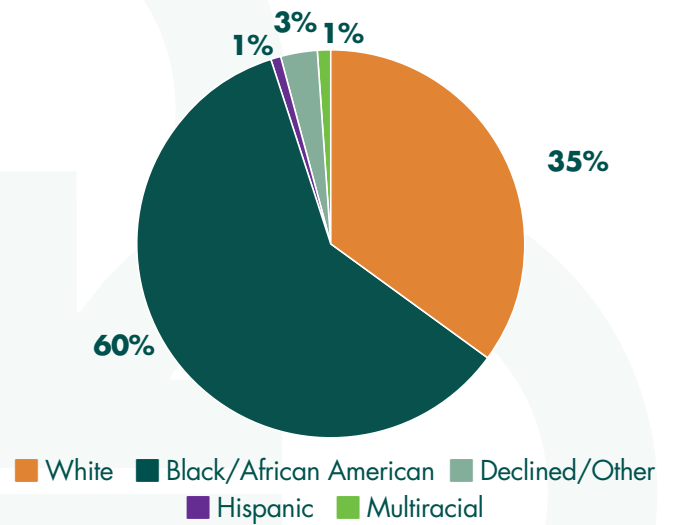
Programs: Owings Mills

DEMOGRAPHICS:

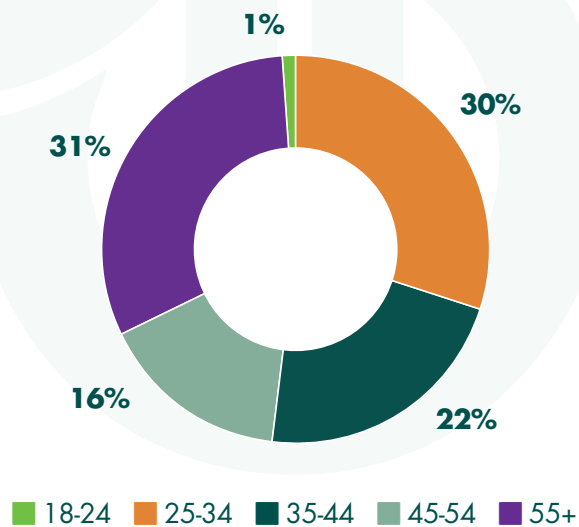
GENDER OF CLIENTS SERVED

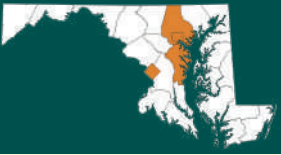


RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED

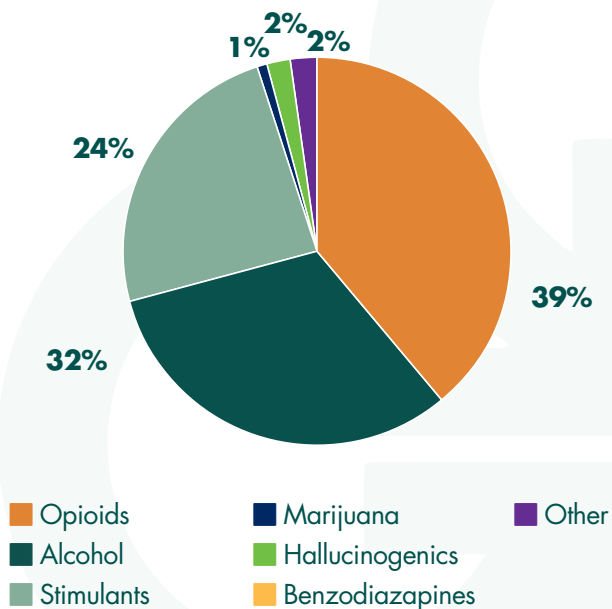




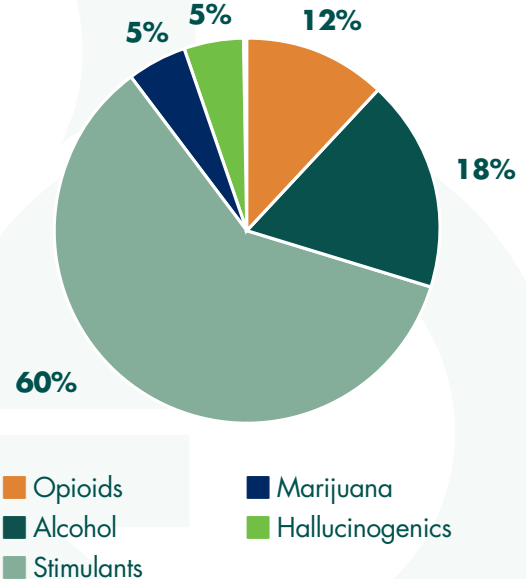
- The percentage of individuals diagnosed with an opioid use disorder fell by 10% while the percentage of individuals with alcohol use disorder increased by 10%.
- 15% of those admitted reported a secondary SUD with 60% reporting a secondary stimulant use disorder.
- 73% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=271)**

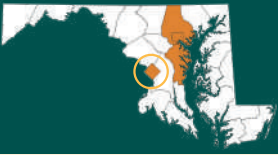


**SECONDARY SUD DIAGNOSIS DATA
FY 23 (N=40)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
BETWEEN FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	49%	22%	23%	2%	3%	1%	0%
FY 23	39%	32%	24%	1%	2%	0%	2%
Difference	-10%	10%	1%	-1%	-1%	-1%	2%



WASHINGTON, DC



Number Served: 860



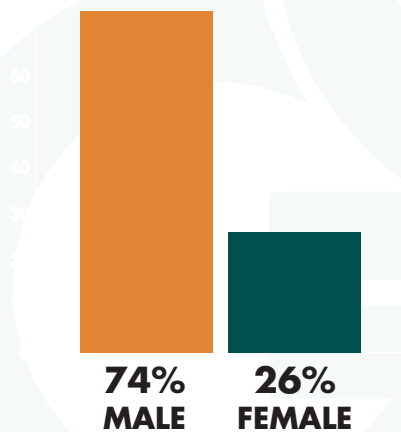
Programs: Rolark Center, Galiber House, and Clark Center

ABOUT OUR DATA

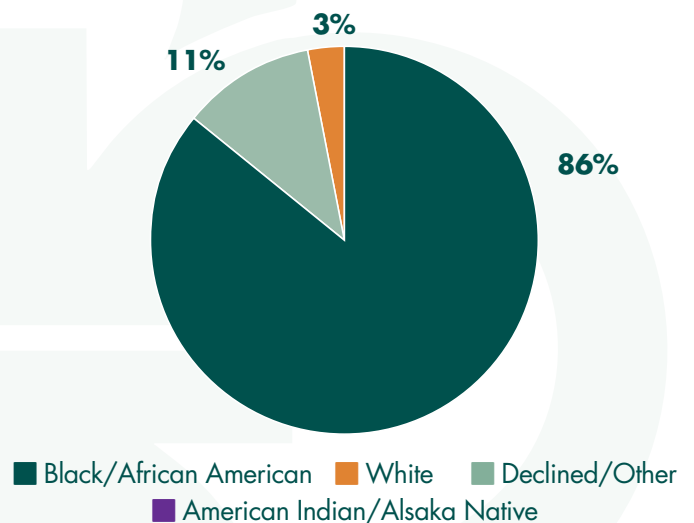
RAP, Inc. has been serving the community of District of Columbia for over 50 years and became an affiliate of Gaudenzia, Inc. in 2014. Located in Ward 5, RAP, Inc. is the only agency in the District to offer a full continuum of integrated substance use disorder (SUD) treatment services. These services are designed to meet the needs of the District's most vulnerable residents including those who are housing insecure, diagnosed with serious mental illness, co-occurring disorders and/or HIV/AIDS, those who are justice-involved as well as members of the LGBTQI+ community.

DEMOGRAPHICS:

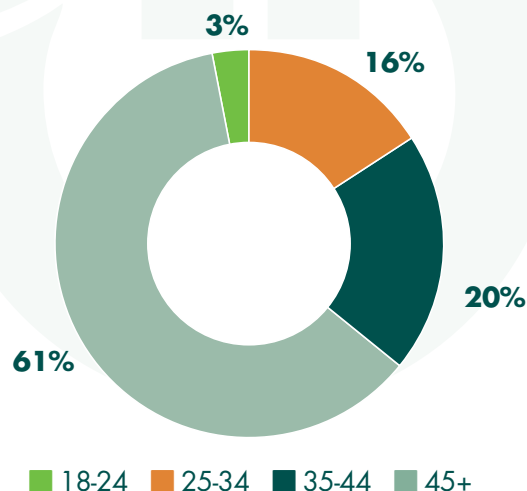
GENDER OF CLIENTS SERVED

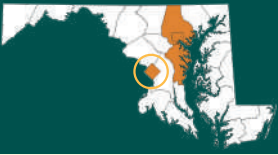


RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED





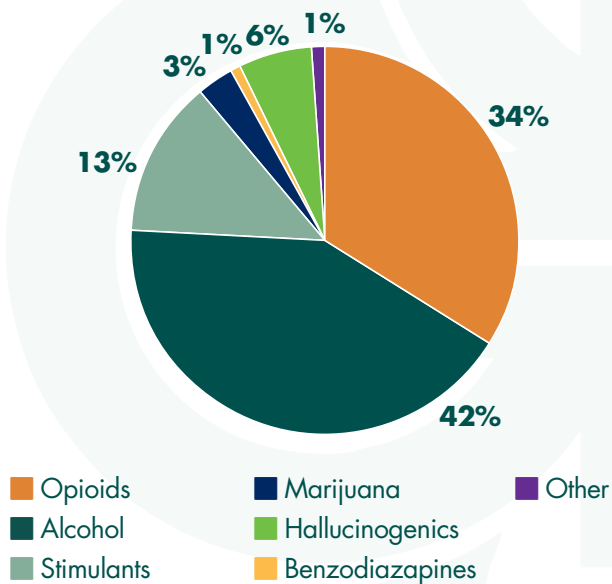
WASHINGTON, DC

Location:
District of
Columbia

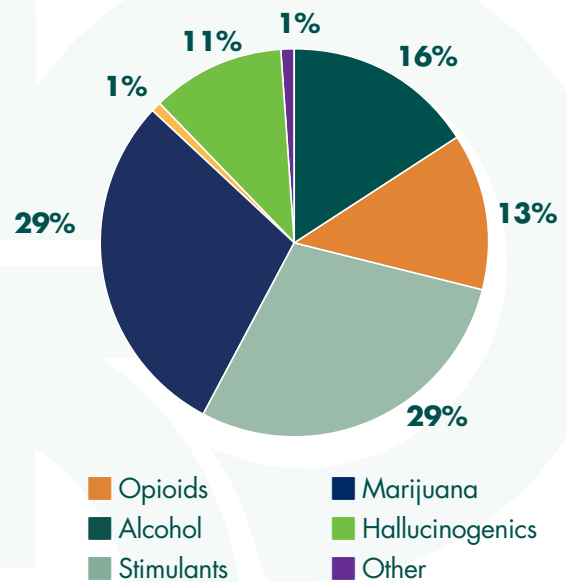
- Alcohol use disorder remains the primary diagnosis and remained mostly stable; however, opioid use disorder increased by 5%.
- 62% of those admitted reported a secondary SUD AND 44% reported a stimulant use disorder.
- The percentage of older adults, 45+, accessing treatment increased by 6% since 2022.
- 58% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=860)**



**PRIMARY SUD DIAGNOSIS DATA
FY 22 (N=1,155)**



PRIMARY SUD DIAGNOSIS COMPARISON CHART BETWEEN FY 2022 AND FY 2023

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	29%	41%	16%	4%	8%	0%	2%
FY 23	34%	42%	13%	3%	6%	1%	1%
Difference	5%	1%	-3%	-1%	-2%	1%	-1%



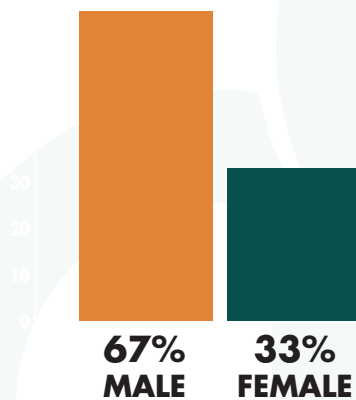
PENNSYLVANIA OVERVIEW



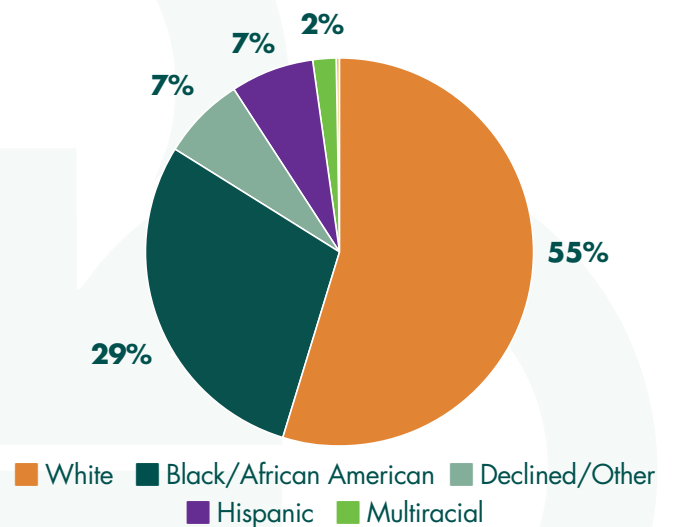
TOTAL NUMBER SERVED: 10,203

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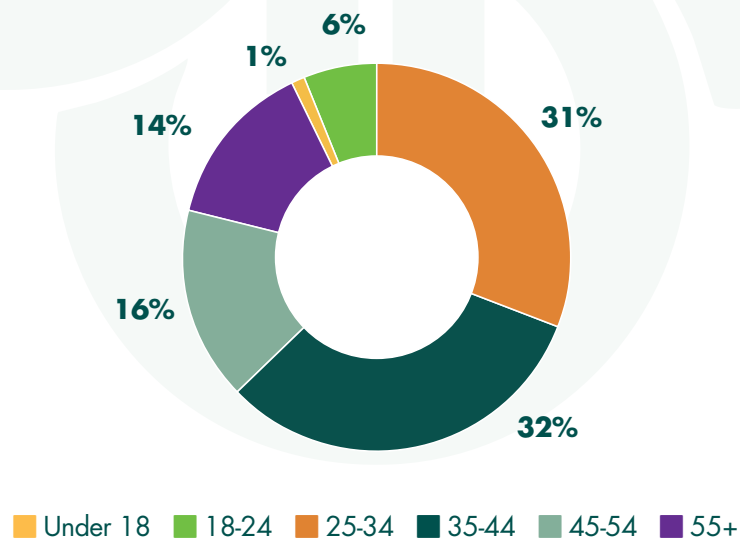
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED



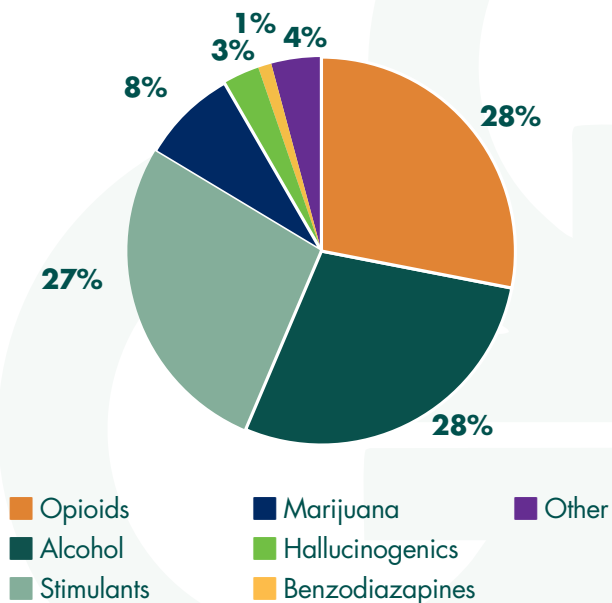


PENNSYLVANIA OVERVIEW

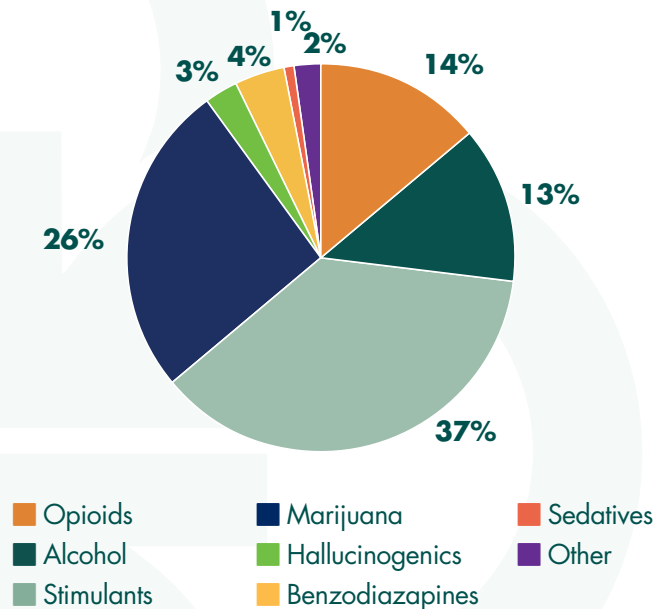
- Primary SUD diagnosis data remained mostly stable with minor increase in AUD (+2%).
- 26% of those admitted reported a secondary SUD with 37% reporting a secondary stimulant use disorder.
- 68% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=10,203)**



**SECONDARY SUD DIAGNOSIS DATA
FY 23 (N=2,614)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
BETWEEN FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	33%	26%	26%	8%	3%	1%	3%
FY 23	28%	28%	27%	8%	3%	1%	5%
Difference	-5%	2%	1%	0%	0%	0%	2%



PENNSYLVANIA

County:
Bucks



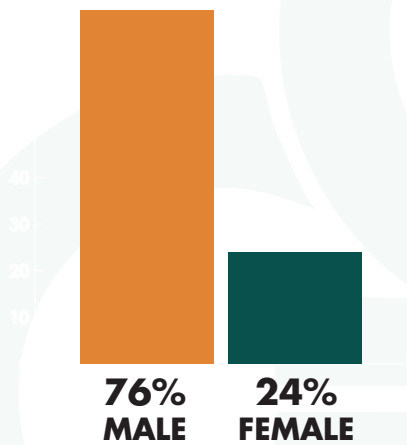
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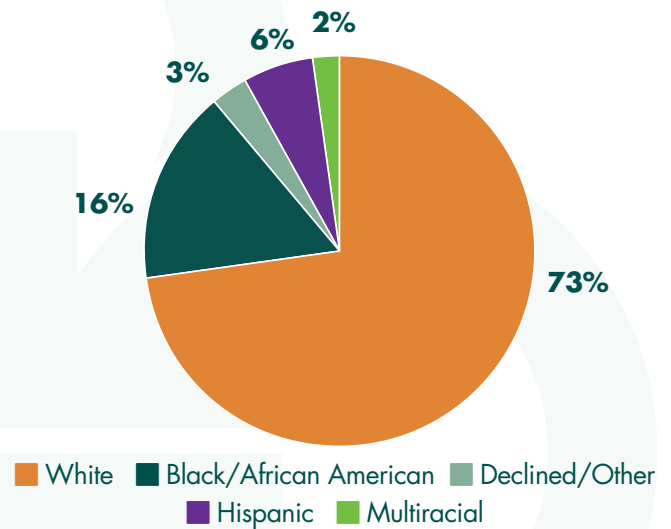
Programs: Lower Bucks

DEMOGRAPHICS:

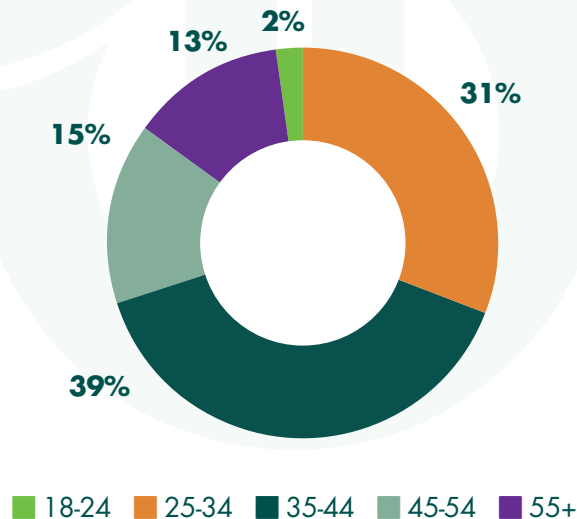
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED





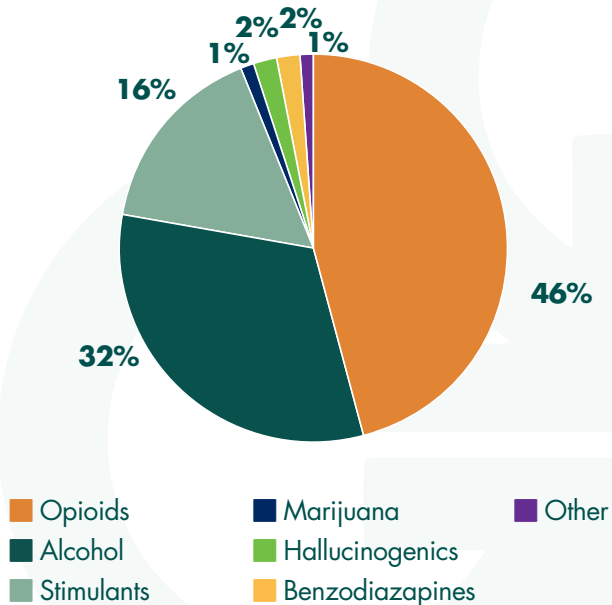
PENNSYLVANIA

County:
Bucks

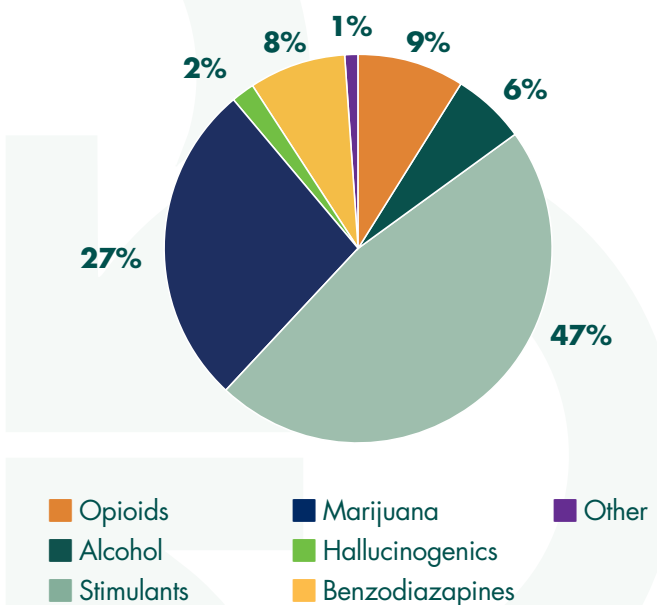
- The percentage of individuals diagnosed with an opioid use disorder fell by 11% while the percentage of individuals with alcohol use disorder increased by 9%.
- 46% of those admitted reported a secondary SUD with 47% reporting a secondary stimulant use disorder.
- The percentage of older adults seeking treatment increased by 6% since 2022.
- 42% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=749)**



**SECONDARY SUD DIAGNOSIS DATA
FY 23 (N=348)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
BETWEEN FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	57%	23%	16%	1%	1%	1%	1%
FY 23	46%	32%	16%	1%	2%	2%	1%
Difference	-11%	9%	0%	0%	1%	1%	0%



PENNSYLVANIA

County:
Chester



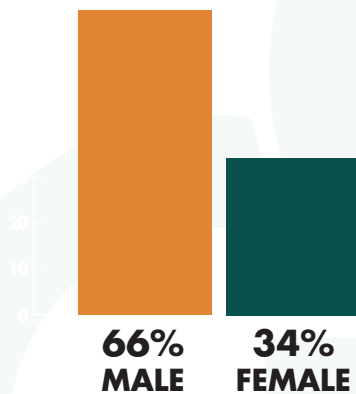
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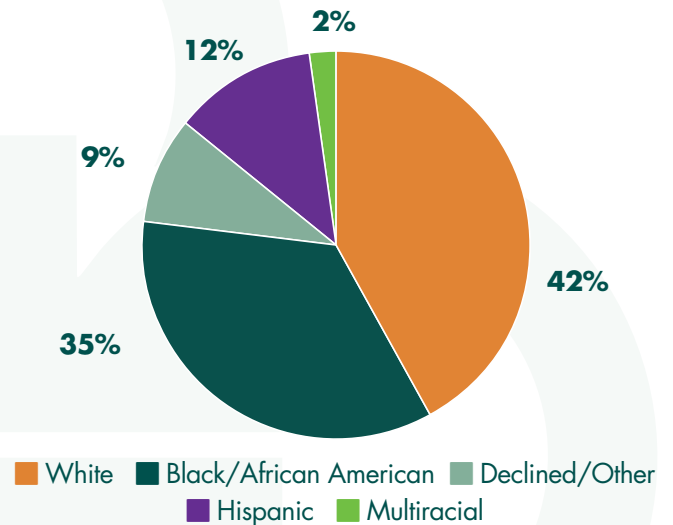
Programs: West Chester House, Kindred House, West Chester Outpatient, Coatesville Outpatient

DEMOGRAPHICS:

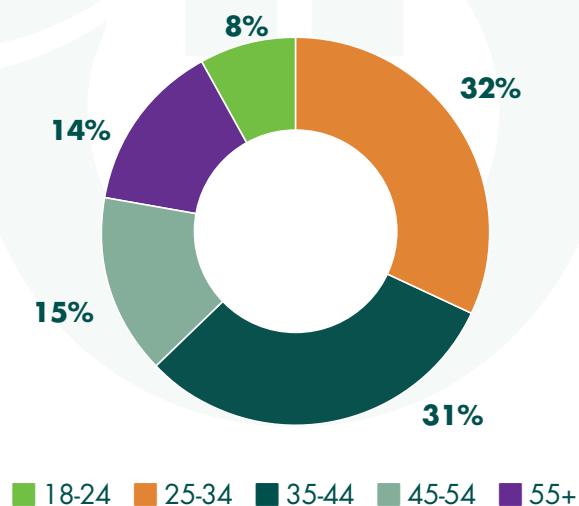
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED





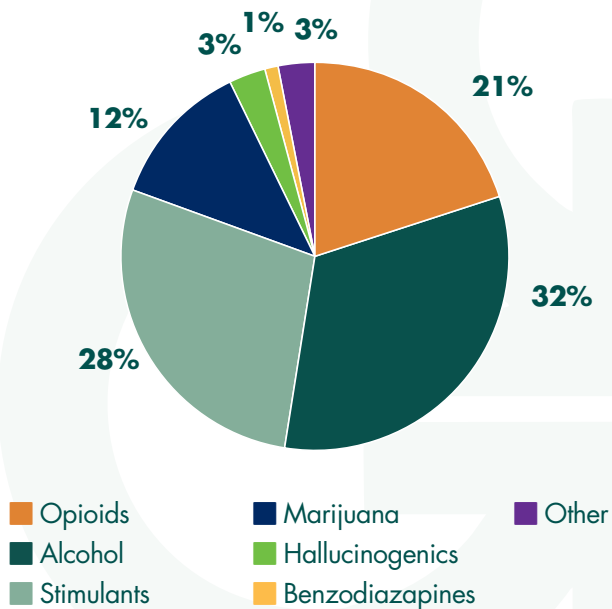
PENNSYLVANIA



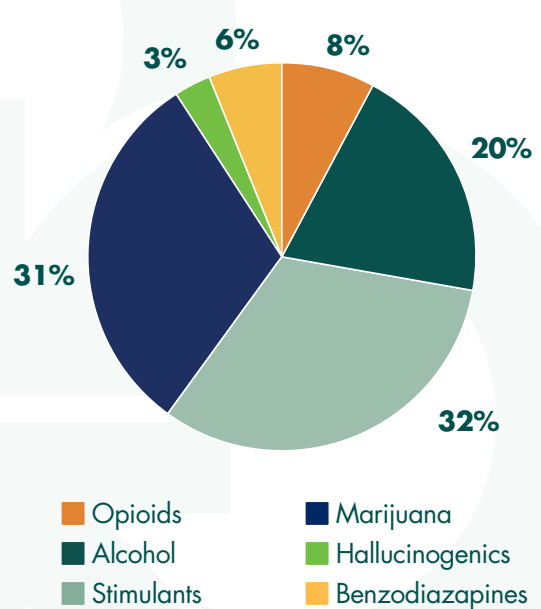
- The percentage of individuals with a primary stimulant use disorder increased by 4%, while hallucinogen use disorder fell by 3%.
- 22% of those admitted reported a secondary SUD with 32% reporting a secondary stimulant use disorder and 31% reporting a cannabis use disorder.
- The percentage of Hispanic clients seeking treatment increased by 6% since 2022.
- 75% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=1,215)**



**SECONDARY SUD DIAGNOSIS DATA
FY 23 (N=265)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
BETWEEN FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	20%	31%	24%	14%	6%	1%	4%
FY 23	21%	32%	28%	12%	3%	1%	3%
Difference	1%	1%	4%	-2%	-3%	0%	-1%



PENNSYLVANIA

County:
Columbia



Number Served: 133



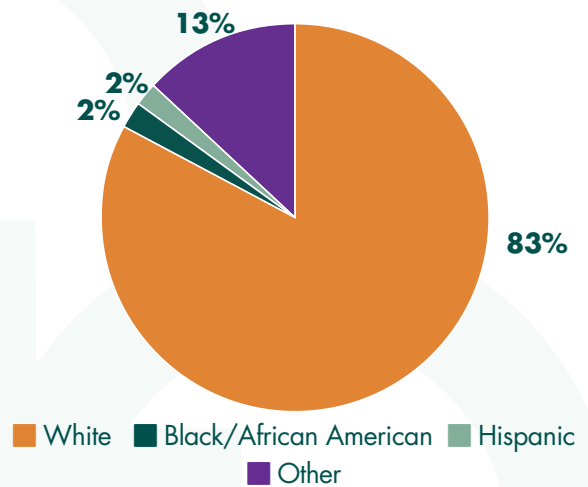
Programs: Berwick IOP and OP

DEMOGRAPHICS:

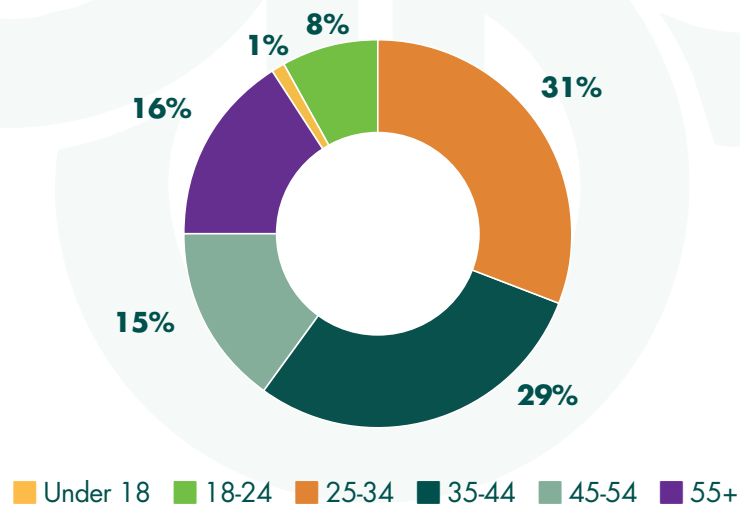
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED





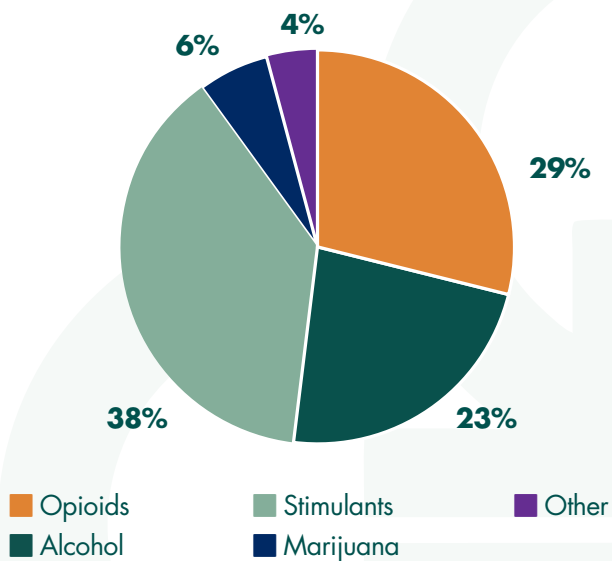
PENNSYLVANIA

County:
Columbia

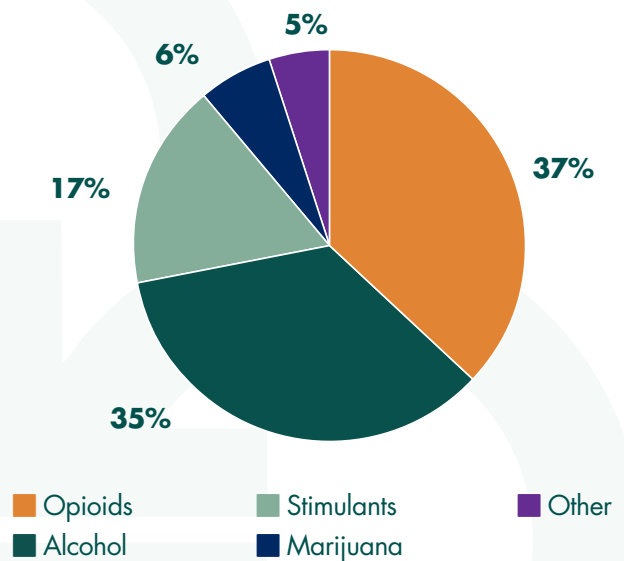
- Stimulant use disorder continues to increase with a 21% increase over 2022.
- Significant decreases in both opioid (-8%) and alcohol (-12%) as a primary use disorder.

DIAGNOSIS DATA:*

PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=133)



PRIMARY SUD DIAGNOSIS DATA
FY 22 (N=96)



PRIMARY SUD DIAGNOSIS COMPARISON CHART
BETWEEN FY 2022 AND FY 2023

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	37%	35%	17%	6%	N/A	N/A	5%
FY 23	29%	23%	38%	6%	N/A	N/A	4%
Difference	-8%	-12%	21%	0%	N/A	N/A	-1%

*Secondary SUD diagnosis data unavailable



PENNSYLVANIA

County:
Cumberland



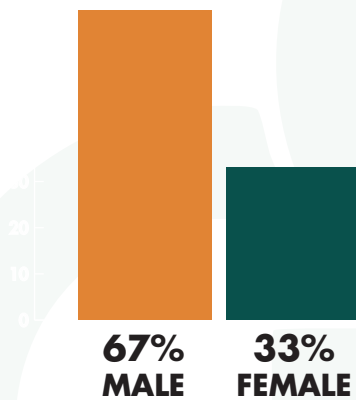
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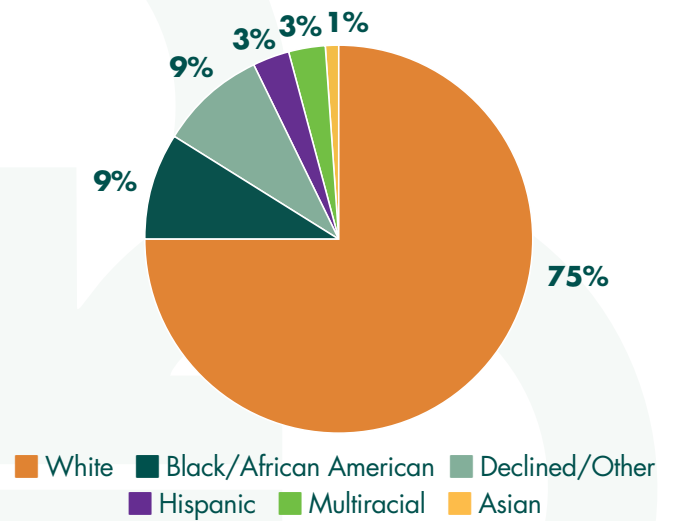
Programs: West Shore IOP, OP, and Early Intervention

DEMOGRAPHICS:

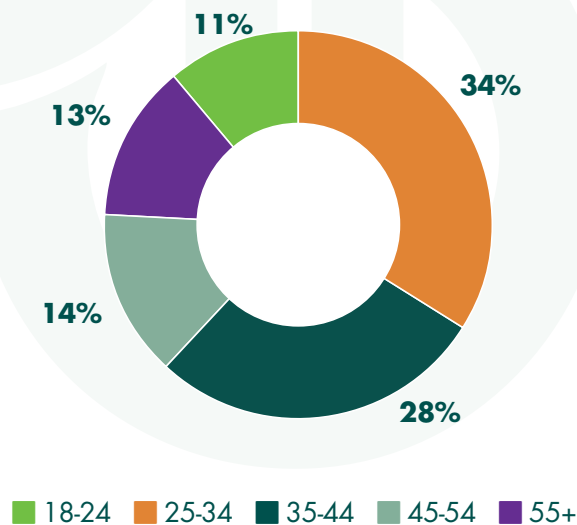
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED





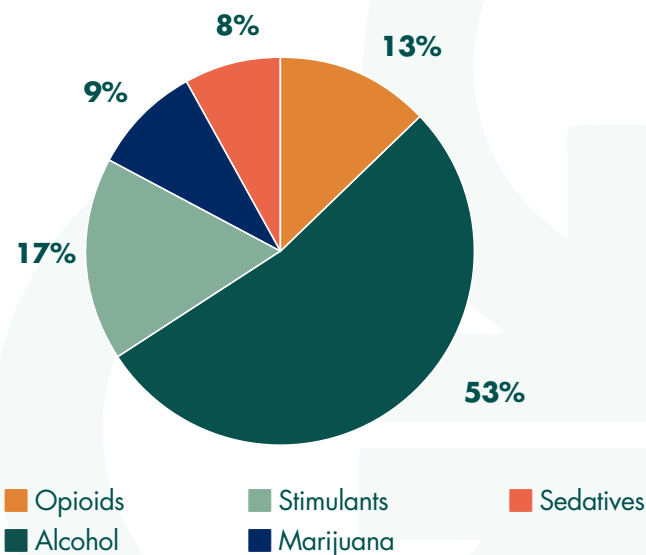
PENNSYLVANIA

County:
Cumberland

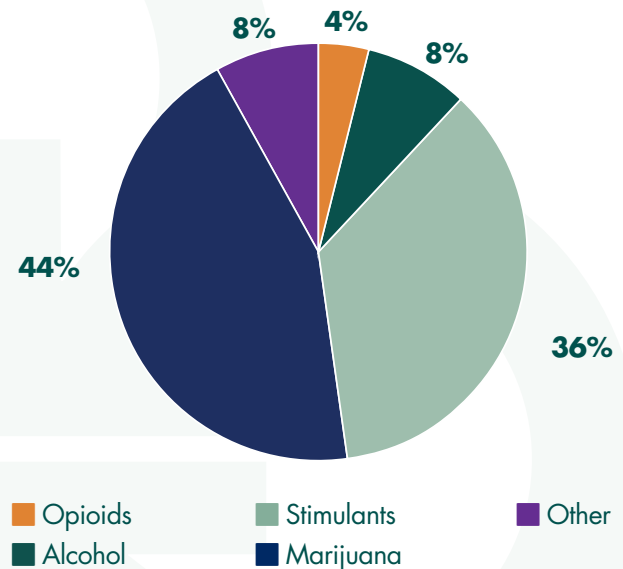
- The percentage of individuals with a primary stimulant use disorder increased by 3%, while alcohol use fell by 8%.
- 8% of those admitted reported a secondary SUD with 44% reporting a secondary cannabis use disorder and 36% reporting a stimulant use disorder.
- 33% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=316)**



**SECONDARY SUD DIAGNOSIS DATA
FY 23 (N=25)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
BETWEEN FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	14%	61%	14%	8%	N/A	N/A	3%
FY 23	13%	53%	17%	9%	N/A	N/A	8%
Difference	-1%	-8%	3%	1%	N/A	N/A	5%



PENNSYLVANIA

County:
Dauphin



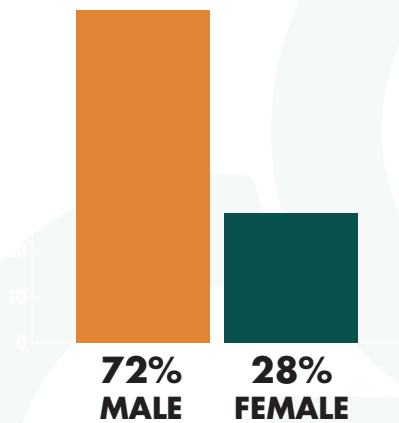
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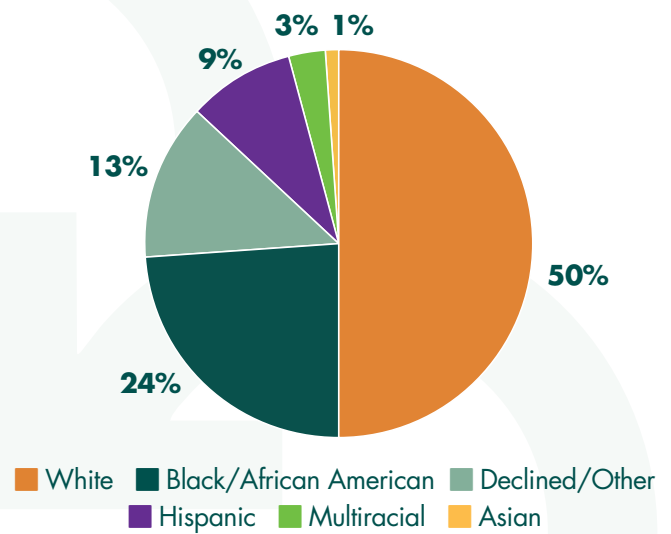
Programs: Common Ground, Concept 90, Harrisburg PHP, IOP and OP, & Serenity House

DEMOGRAPHICS:

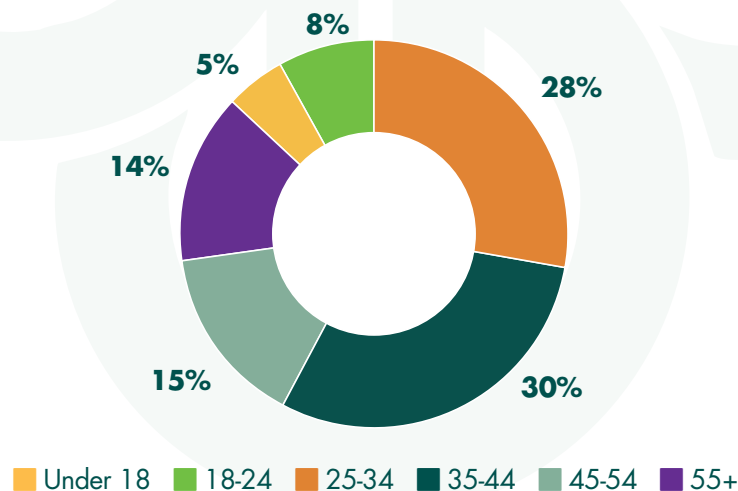
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED





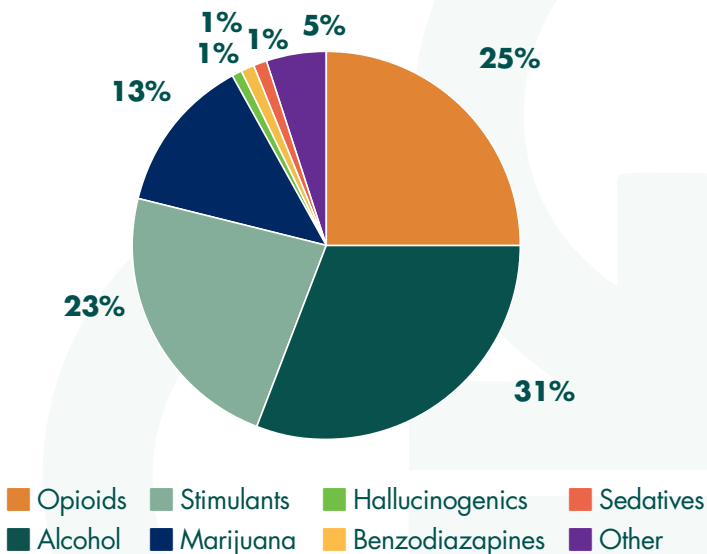
PENNSYLVANIA

County:
Dauphin

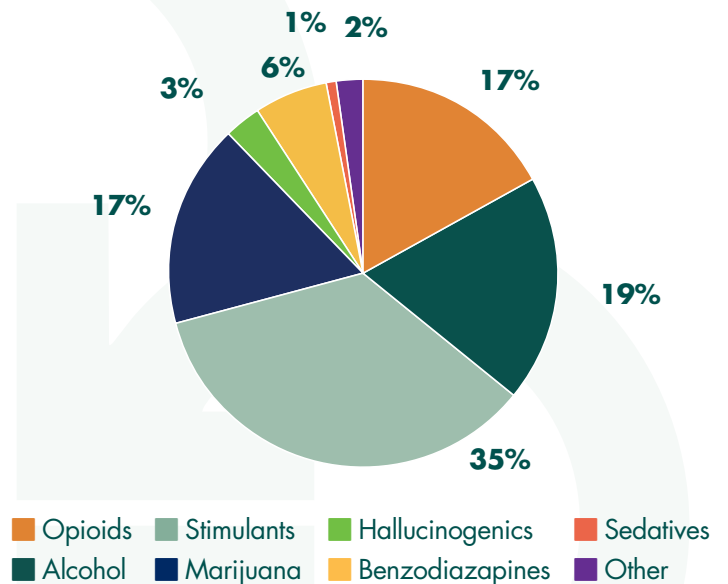
- The percentage of individuals with a primary opioid use disorder fell by 6%.
- 15% of those admitted reported a secondary SUD with 35% reporting a stimulant use disorder.
- 67% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=1,773)**



**SECONDARY SUD DIAGNOSIS DATA
FY 23 (N=267)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
BETWEEN FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	31%	30%	22%	12%	1%	1%	2%
FY 23	25%	31%	23%	13%	1%	1%	5%
Difference	-6%	1%	1%	1%	0%	0%	3%



PENNSYLVANIA

County:
Erie



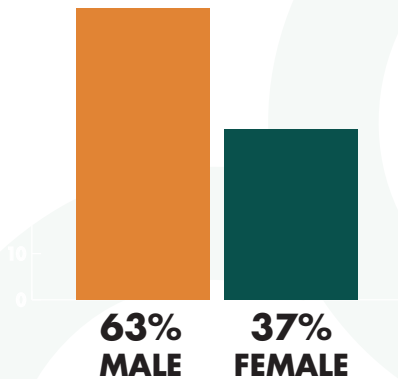
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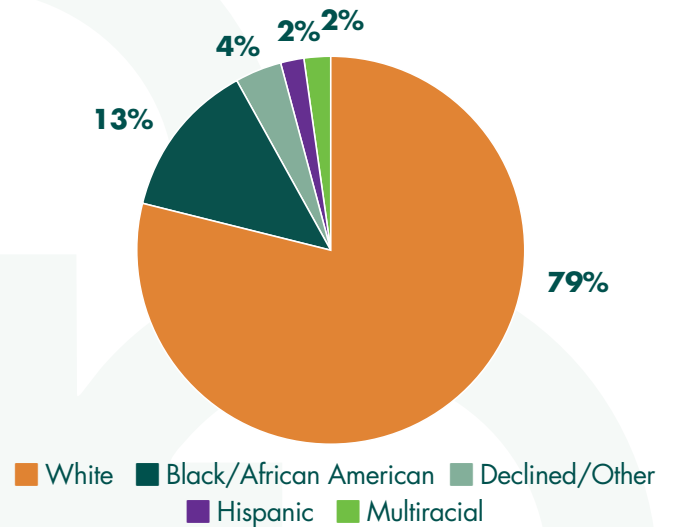
Programs: Community House, Corry OP, Crossroads, Dr. Snow Halfway House, Edinboro OP, Erie OP, Girard OP, & House of Healing

DEMOGRAPHICS:

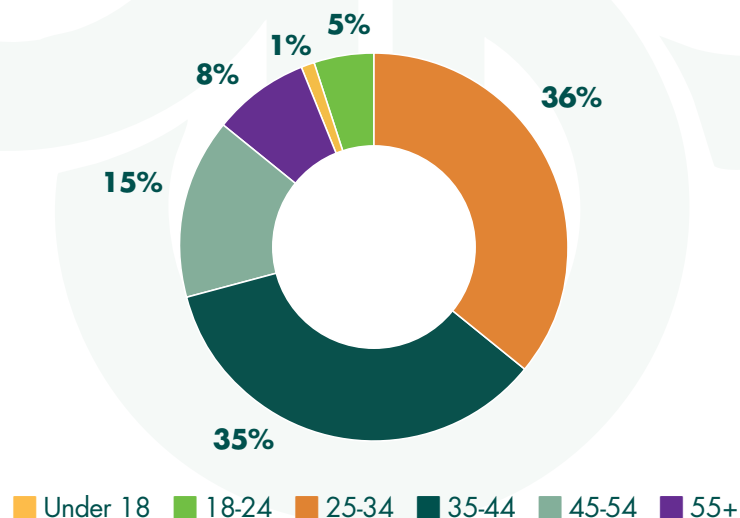
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED





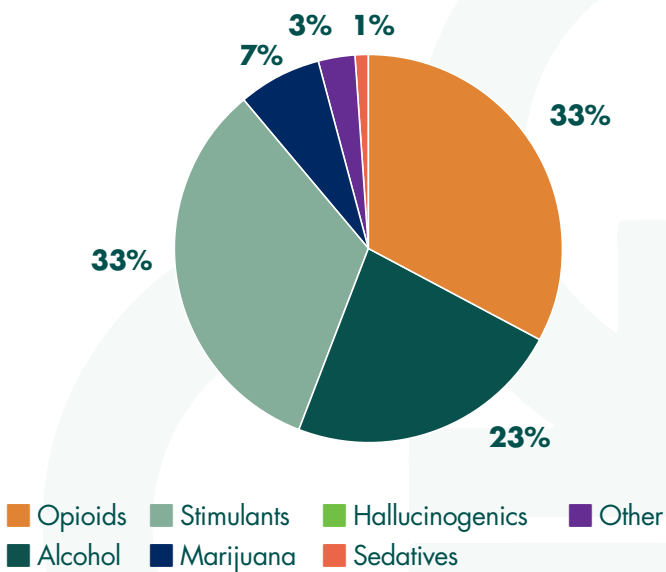
PENNSYLVANIA

County:
Erie

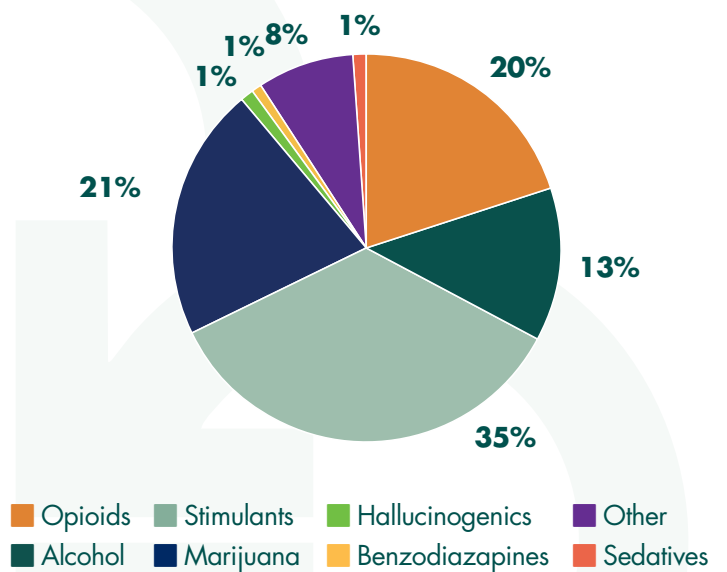
- Alcohol Use Disorder and Opioid Use Disorder both declined while the percentage of individuals with a stimulant use disorder increased by 3%.
- 33% of those admitted reported a secondary SUD with 35% reporting a stimulant use disorder.
- 67% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=1,140)**



**SECONDARY SUD DIAGNOSIS DATA
FY 23 (N=380)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
BETWEEN FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	36%	26%	30%	6%	N/A	N/A	2%
FY 23	33%	23%	33%	7%	N/A	N/A	3%
Difference	-3%	-3%	3%	1%	N/A	N/A	1%



PENNSYLVANIA

County:
Fulton



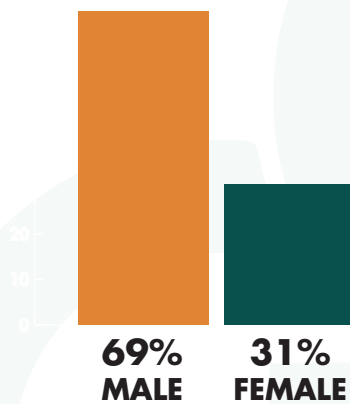
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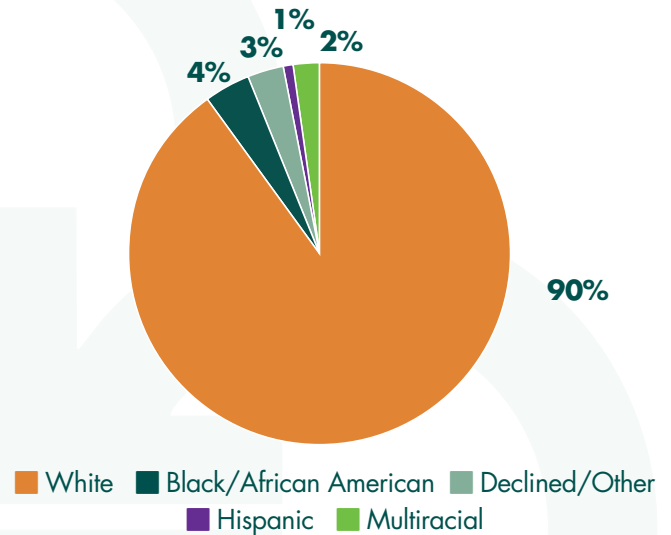
Programs: Fulton County OP

DEMOGRAPHICS:

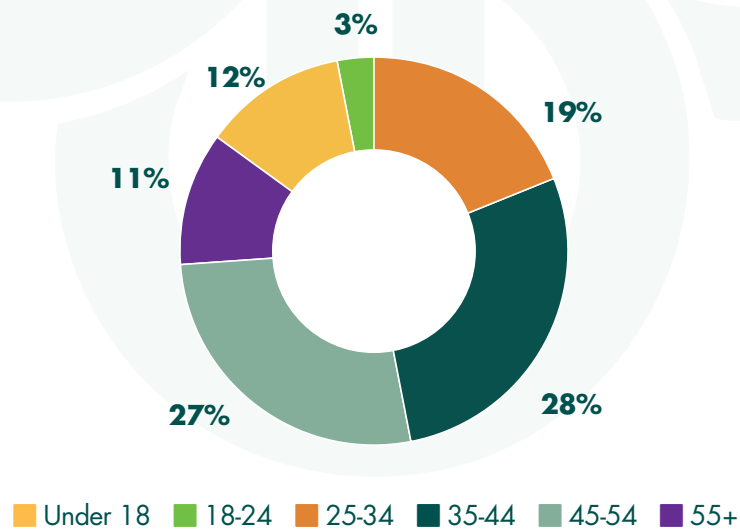
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED





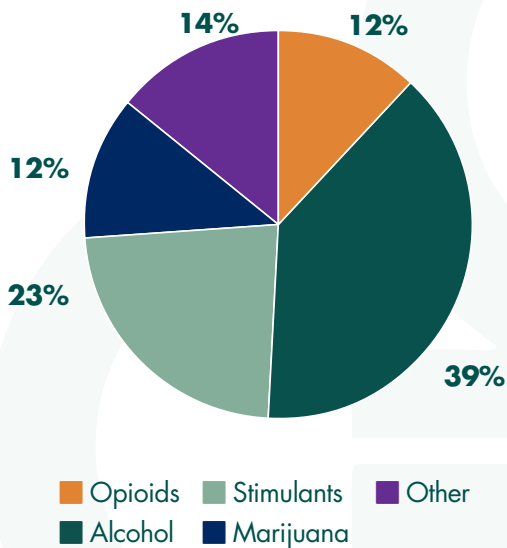
PENNSYLVANIA

County:
Fulton

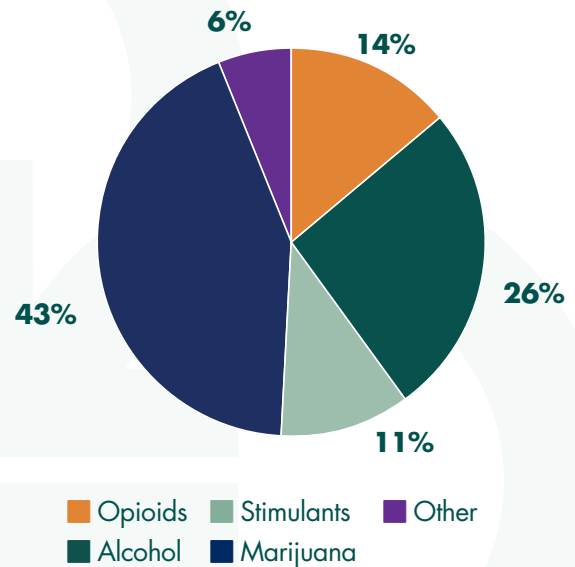
- Alcohol use disorder remains the leading cause of admission with a 3% increase over last fiscal year.
- At least 19% of clients reported more than one diagnosis with the majority reporting secondary cannabis use (45%).
- 50% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=184)**



**SECONDARY SUD DIAGNOSIS DATA
FY 23 (N=35)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	18%	36%	22%	13%	N/A	N/A	11%
FY 23	12%	39%	23%	12%	N/A	N/A	14%
Difference	-6%	3%	1%	-1%	N/A	N/A	3%



PENNSYLVANIA

County:
Lancaster



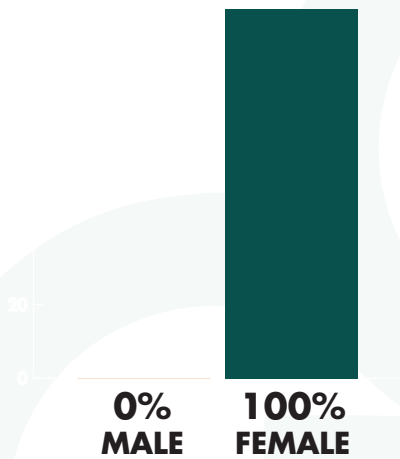
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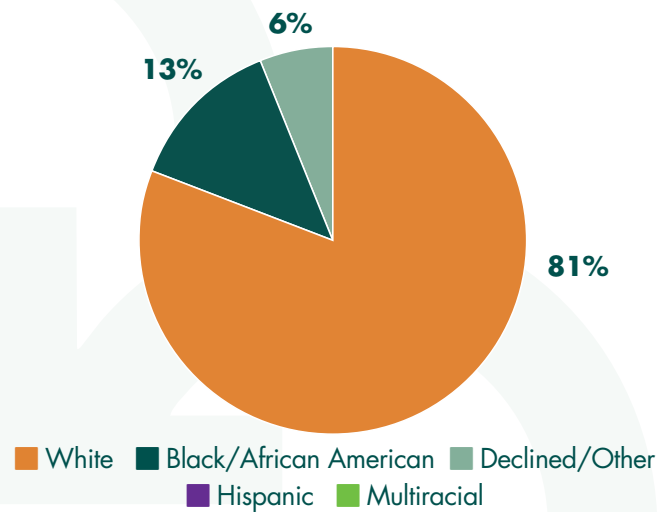
Programs: Vantage

DEMOGRAPHICS:

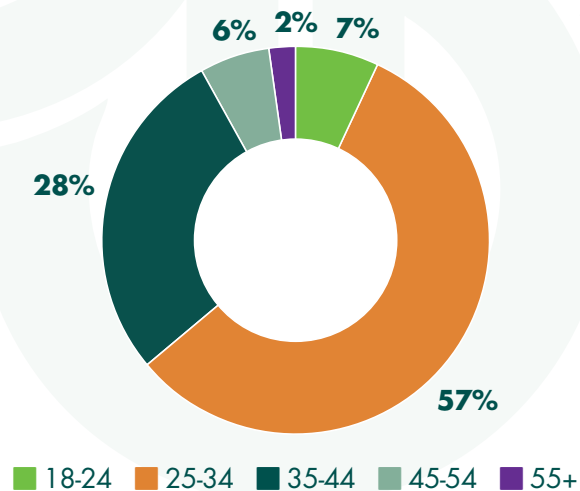
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED





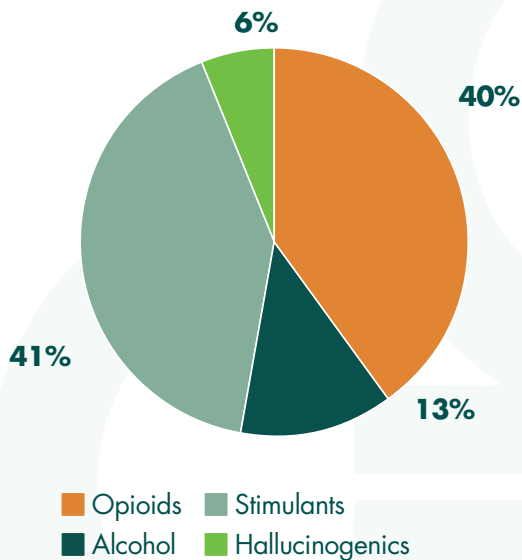
PENNSYLVANIA

County:
Lancaster

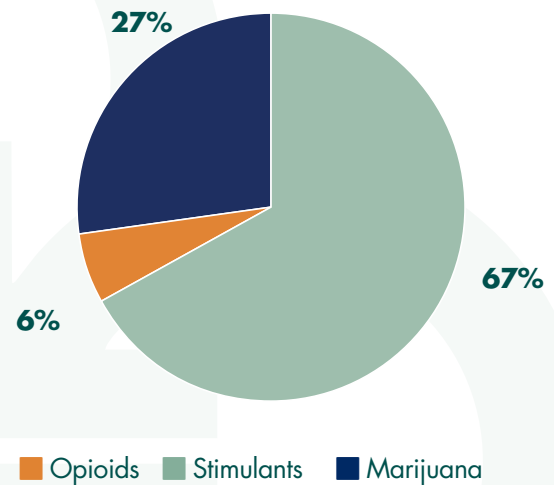
- Stimulant and opioid use disorders remain the primary diagnoses for women admitted to Vantage; however, alcohol use disorder increased by 10% since last fiscal year.
- At least 28% of clients reported more than one diagnosis with the majority reporting secondary stimulant use (67%).
- 95% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=54)**



**SECONDARY SUD DIAGNOSIS DATA
FY 23 (N=15)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
BETWEEN FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	38%	3%	47%	N/A	9%	N/A	3%
FY 23	40%	13%	41%	N/A	6%	N/A	0%
Difference	2%	10%	-6%	N/A	-3%	N/A	-3%



PENNSYLVANIA

County:
Mercer



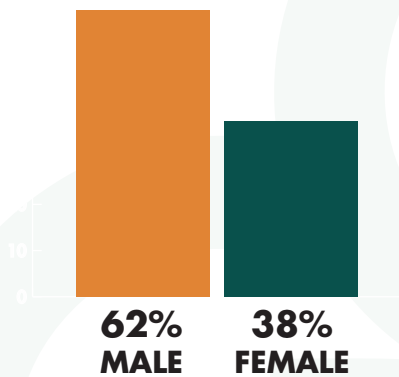
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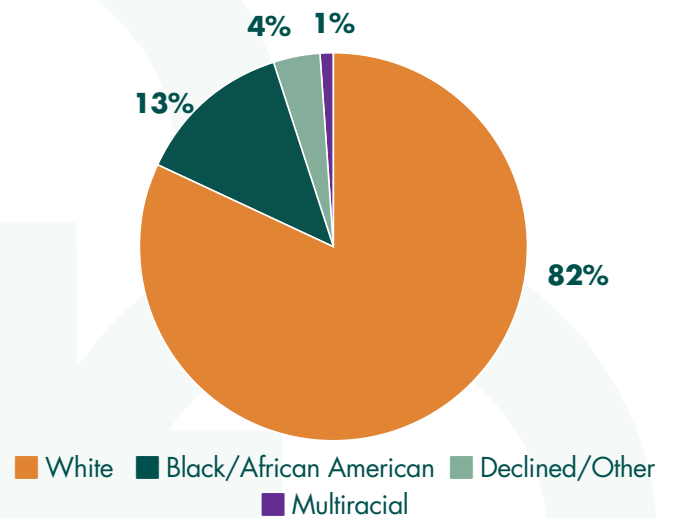
Programs: Sharon OP

DEMOGRAPHICS:

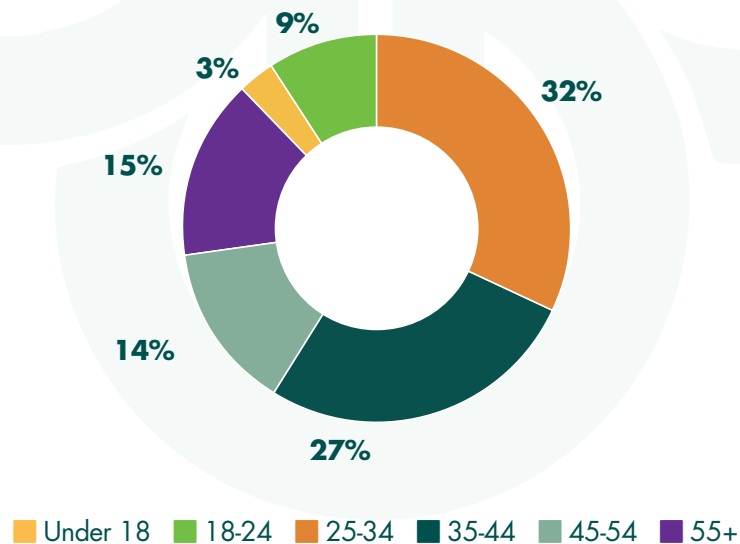
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED





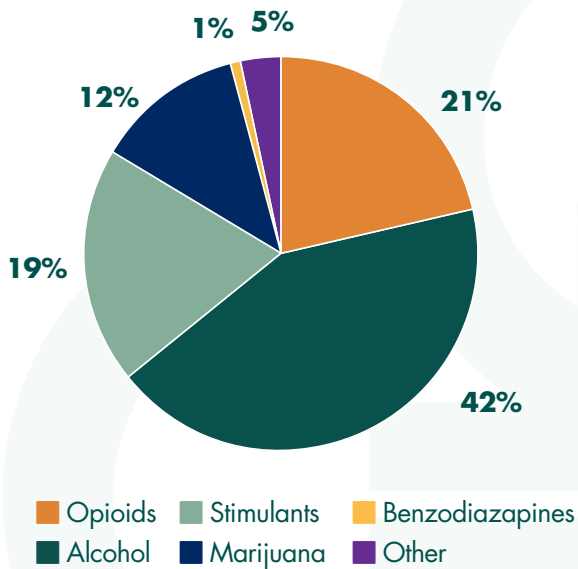
PENNSYLVANIA

County:
Mercer

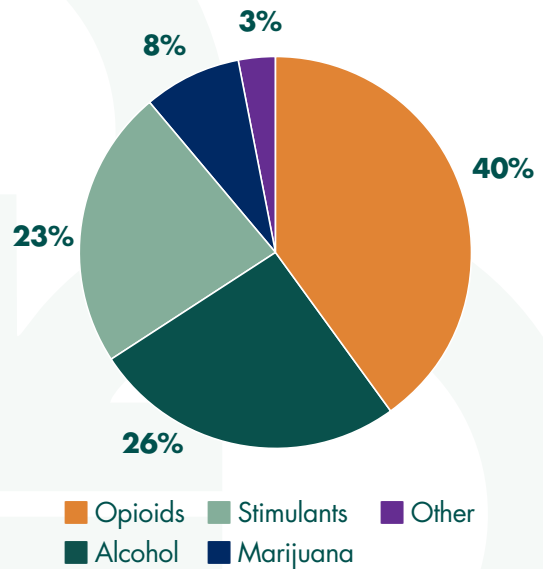
- Alcohol use disorder surged this last fiscal year with a 16% increase. Cannabis use also increased by 4%.
- 100% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.
- Opioid use disorder decreased by -19% - the highest decrease we have seen in our footprint.

DIAGNOSIS DATA:*

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=346)**



**PRIMARY SUD DIAGNOSIS
FY 22 (N=231)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
BETWEEN FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	40%	26%	23%	8%	N/A	0%	3%
FY 23	21%	42%	19%	12%	N/A	1%	5%
Difference	-19%	16%	-4%	4%	N/A	1%	2%

*Secondary SUD diagnosis data unavailable



PENNSYLVANIA

County:
Montgomery



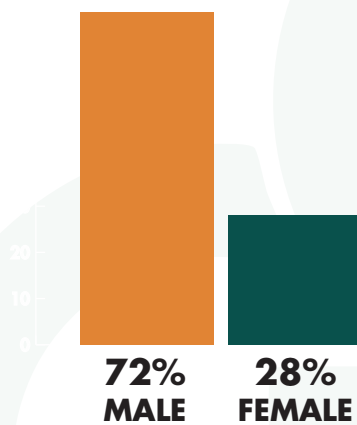
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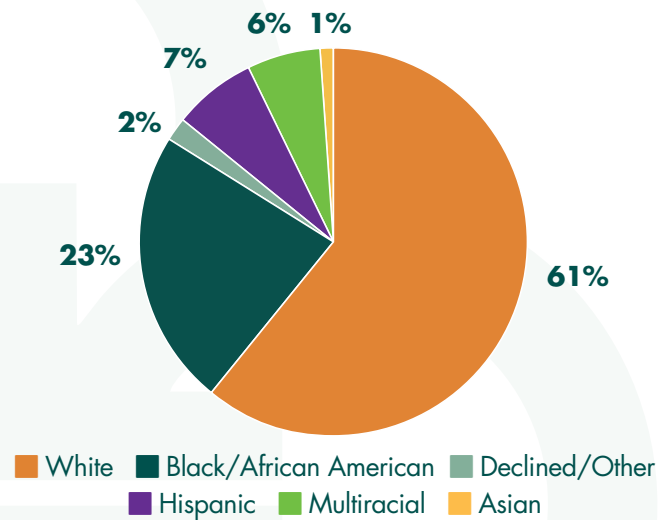
Programs: Montgomery Co. OP & Dresher-Willow Grove OP

DEMOGRAPHICS:

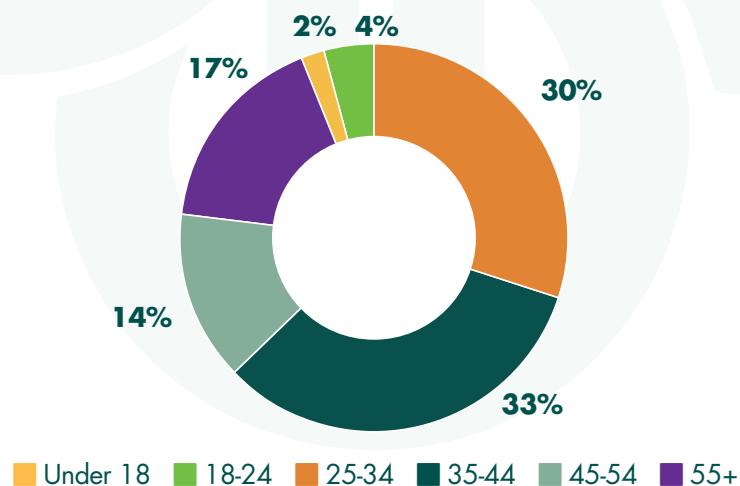
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED





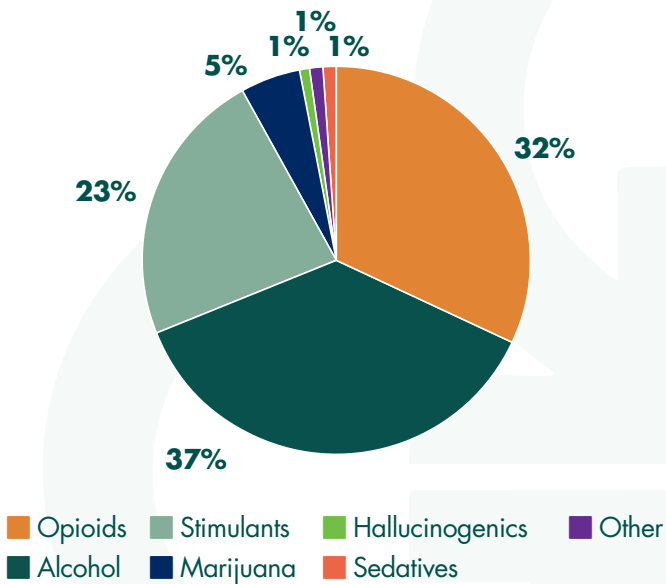
PENNSYLVANIA

County:
Montgomery

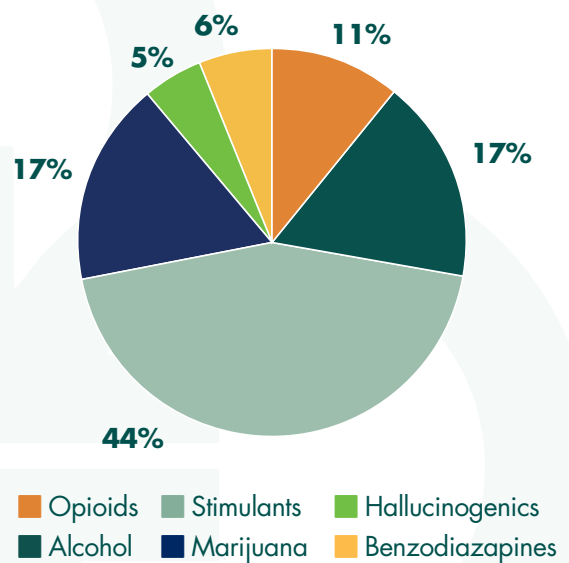
- Alcohol use disorder remains the primary diagnosis for individuals admitted in Montgomery County; however, stimulant use disorder increased by 3% since last fiscal year.
- At least 9% of clients reported more than one diagnosis with the majority reporting secondary stimulant use (44%).
- 59% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

PRIMARY SUD DIAGNOSIS DATA FY 23 (N=390)



SECONDARY SUD DIAGNOSIS DATA FY 23 (N=36)



PRIMARY SUD DIAGNOSIS COMPARISON CHART BETWEEN FY 2022 AND FY 2023

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	35%	35%	20%	5%	3%	1%	1%
FY 23	32%	37%	23%	5%	1%	0%	2%
Difference	-3%	2%	3%	0%	-2%	-1%	1%



PENNSYLVANIA

County:
Northumberland



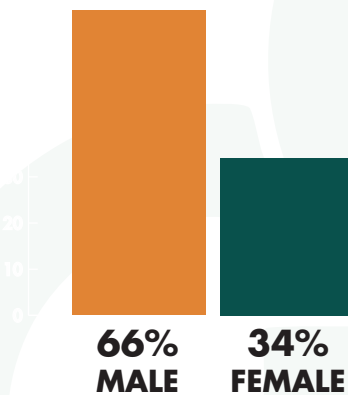
Number Served: 789



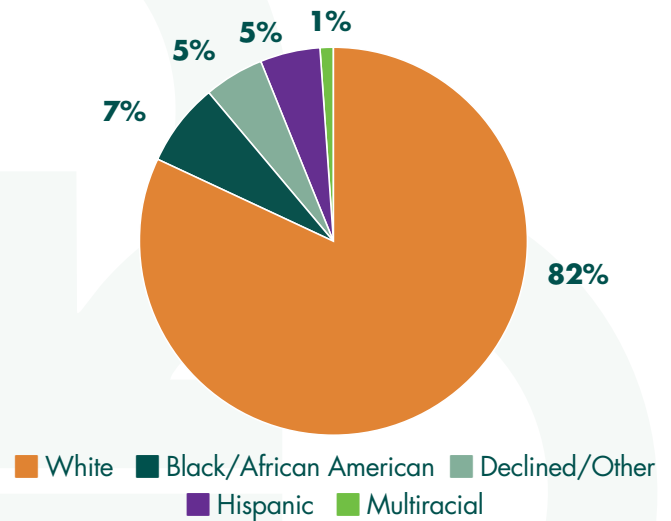
Programs: Coal Township (Res & OP) & Sunbury OP

DEMOGRAPHICS:

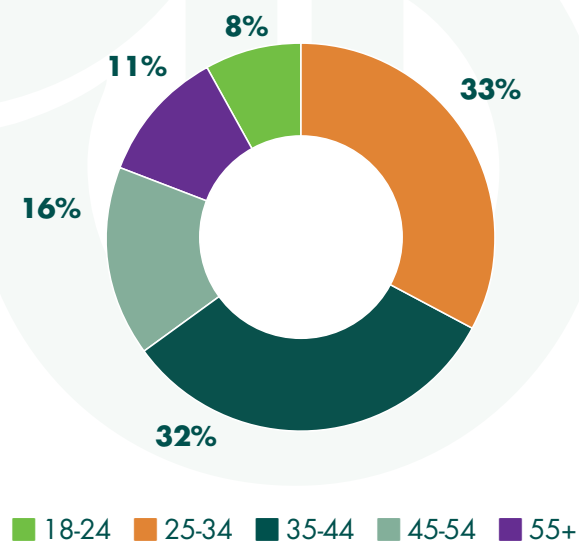
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED





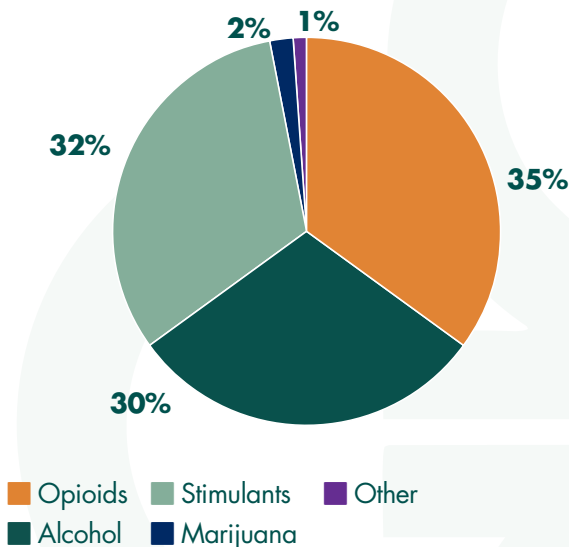
PENNSYLVANIA

County:
Northumberland

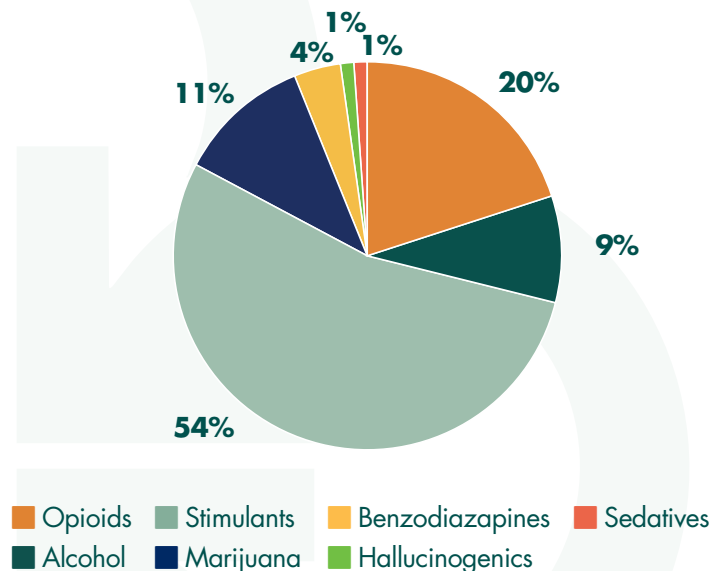
- While Opioid Use Disorder remains the primary diagnosis at admission, the percentage with Opioid Use Disorder fell by 11% while Alcohol Use Disorder and stimulant use disorder increased by 6% and 7% respectively.
- At least 33% of clients reported more than one diagnosis with the majority reporting secondary stimulant use (54%).
- 66% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=789)**



**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=261)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
BETWEEN FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	46%	24%	25%	2%	N/A	2%	1%
FY 23	35%	30%	32%	2%	N/A	1%	0%
Difference	-11%	6%	7%	0%	N/A	-1%	-1%



PENNSYLVANIA

County:
Philadelphia



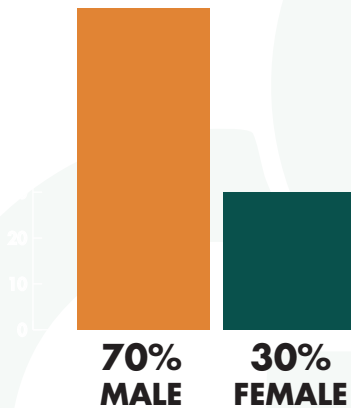
Number Served: 2,493



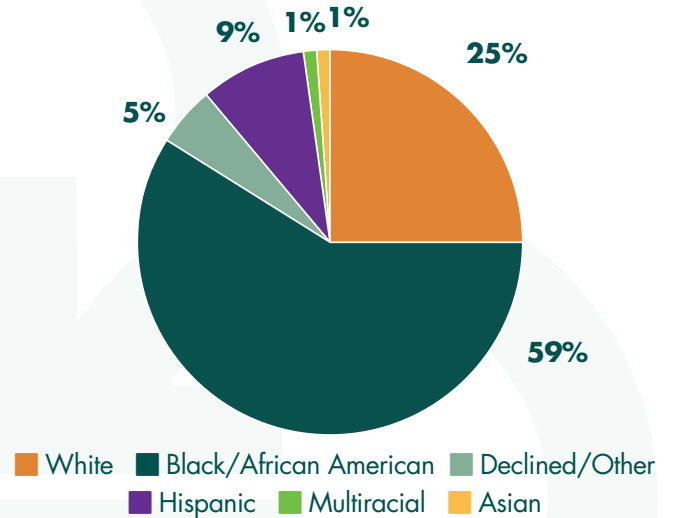
Programs: Broad Street, DRC (Res & OP), Hutchinson Place, Focus House, New Beginnings, Joy of Living, New Outlooks, Outreach I, Outreach II, Re-Entry House, Together House, Winner, WSAC

DEMOGRAPHICS:

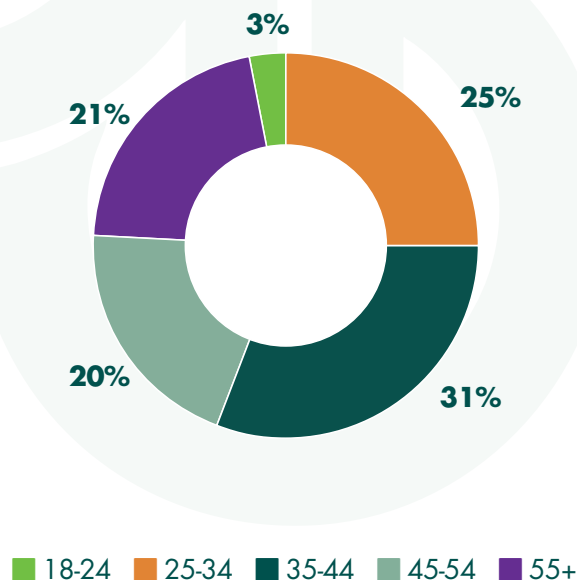
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED





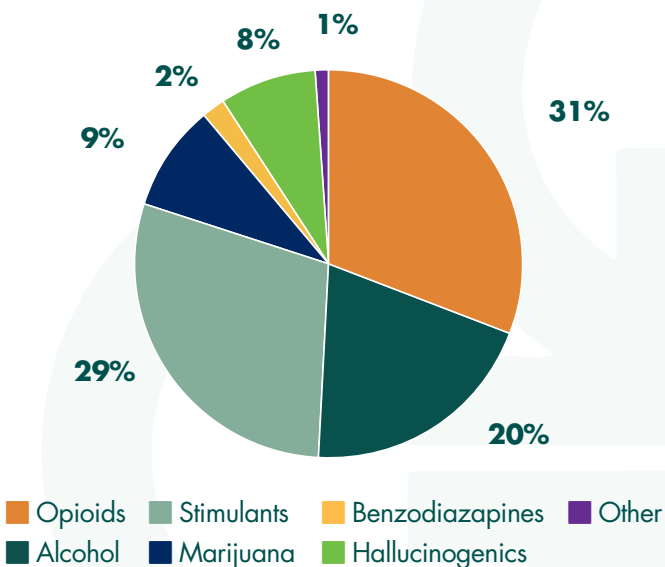
PENNSYLVANIA

County:
Philadelphia

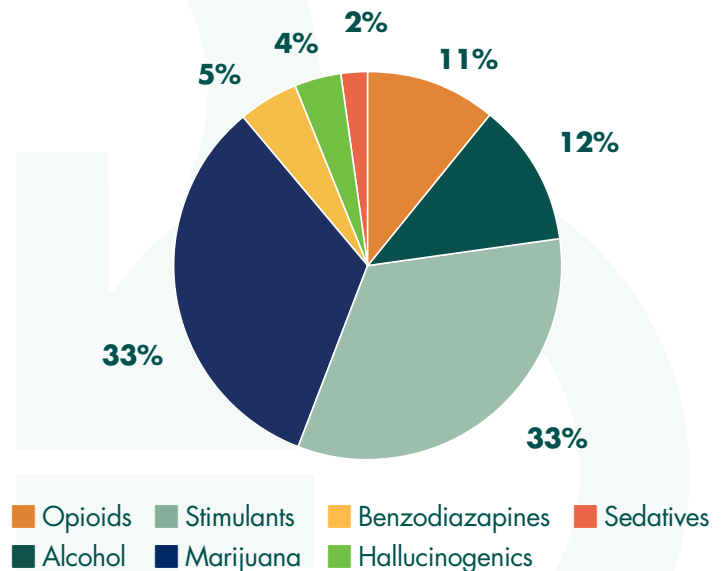
- Primary Substance Use Disorder data remained mostly stable.
- At least 33% of clients reported more than one diagnosis with the majority reporting secondary stimulant use (33%) or cannabis use (33%).
- 64% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

PRIMARY SUD DIAGNOSIS DATA FY 23 (N=2,493)



SECONDARY SUD DIAGNOSIS DATA FY 23 (N=818)



PRIMARY SUD DIAGNOSIS COMPARISON CHART BETWEEN FY 2022 AND FY 2023

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	31%	19%	30%	8%	9%	2%	1%
FY 23	31%	20%	29%	9%	8%	2%	1%
Difference	0%	1%	-1%	1%	-1%	0%	0%



PENNSYLVANIA

County:
Schuylkill



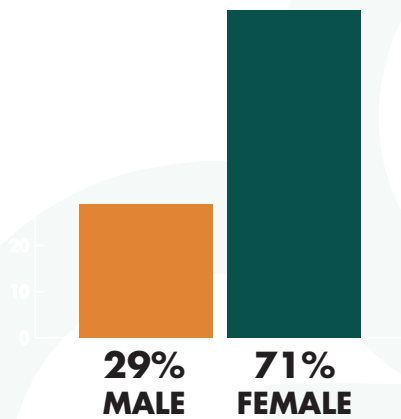
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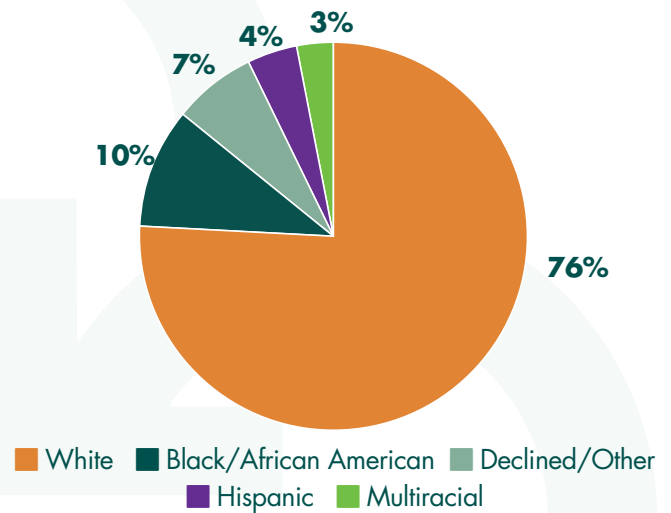
Programs: Fountain Springs, Pottsville OP,
New Destiny

DEMOGRAPHICS:

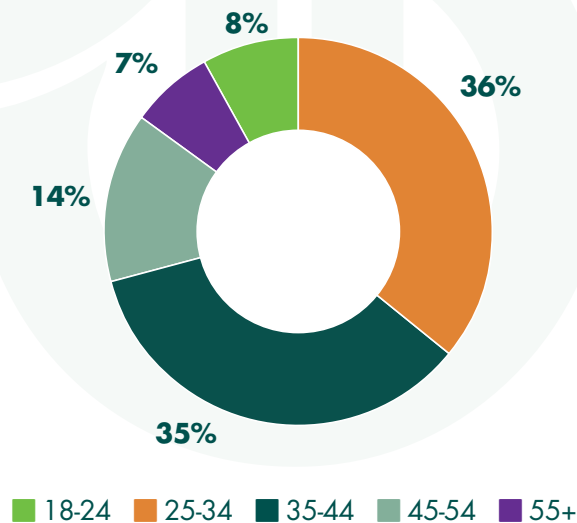
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RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED





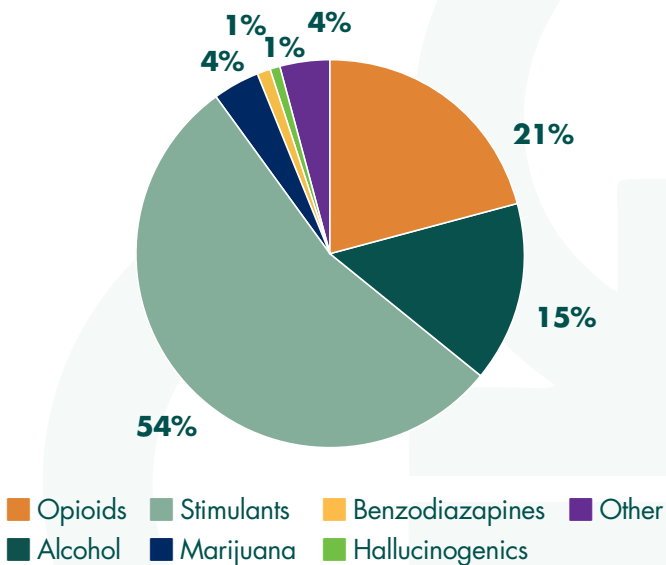
PENNSYLVANIA

County:
Schuylkill

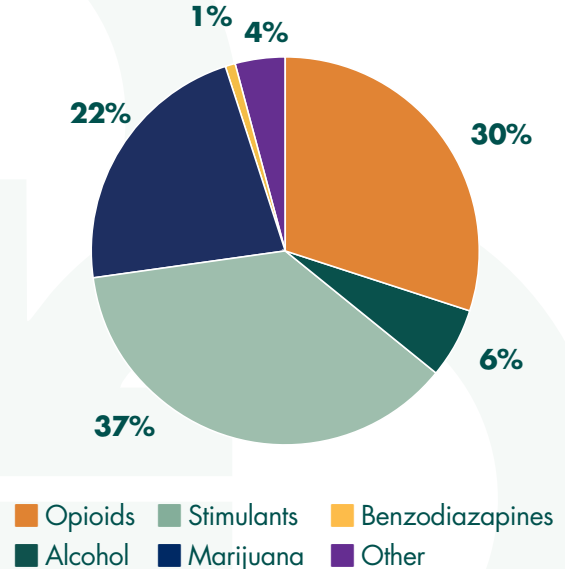
- Stimulants remain the leading diagnosis at admission while opioids see an 8% decline in usage.
- At least 37% of clients reported more than one diagnosis with the majority reporting secondary stimulant use (37%).
- 89% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=350)**



**SECONDARY SUD DIAGNOSIS DATA
FY 23 (N=130)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
BETWEEN FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	29%	13%	54%	2%	0%	1%	1%
FY 23	21%	15%	54%	4%	1%	1%	4%
Difference	-8%	2%	0%	2%	1%	0%	3%



PENNSYLVANIA

County:
Snyder



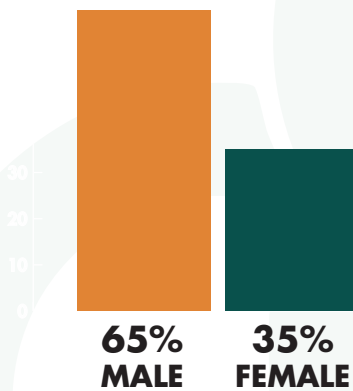
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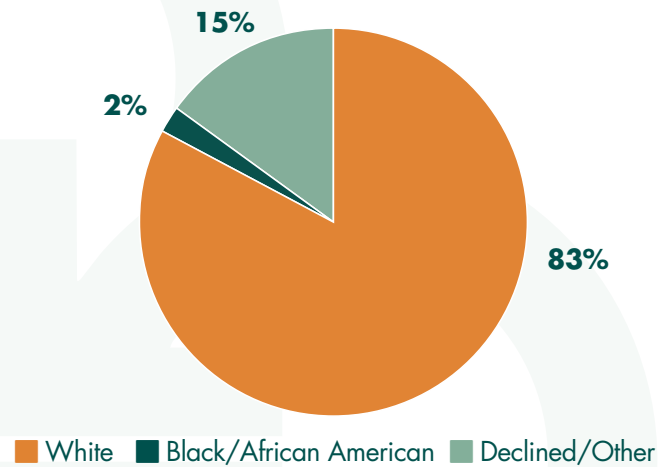
Programs: Middleburg OP

DEMOGRAPHICS:

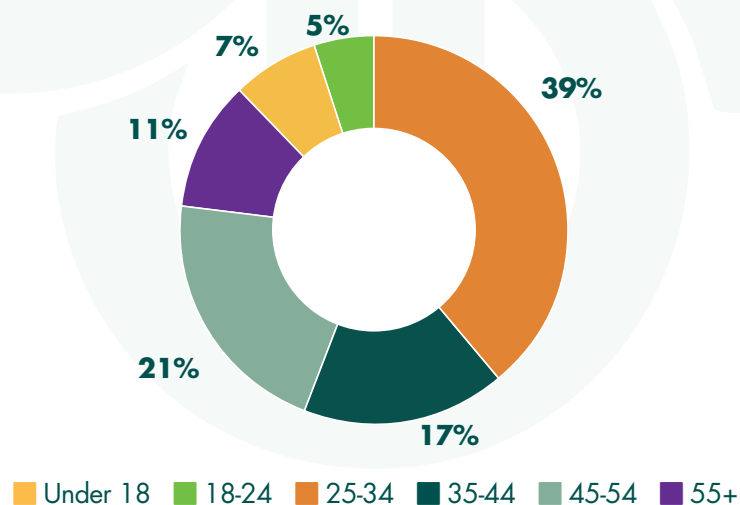
GENDER OF CLIENTS SERVED



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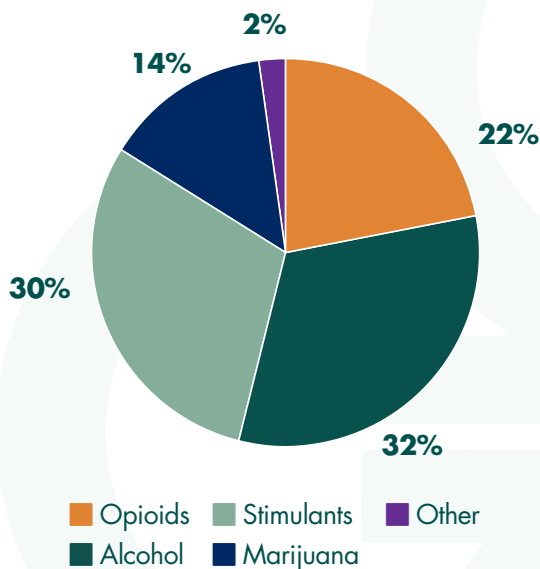
PENNSYLVANIA

County:
Snyder

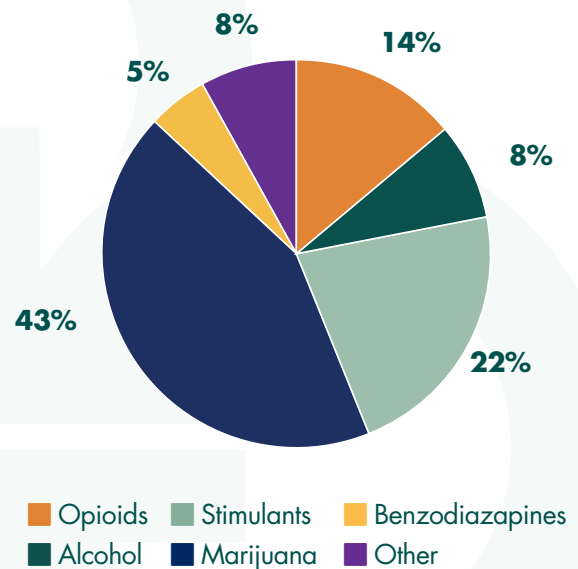
- Opioid use disorder fell by 16% while use of both stimulants and alcohol surpassed opioids with an increase of 8% and 6%, respectively.
- At least 33% of clients reported more than one diagnosis with the majority reporting secondary cannabis use (43%).
- 73% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

PRIMARY SUD DIAGNOSIS DATA FY 23 (N=113)



SECONDARY SUD DIAGNOSIS DATA FY 23 (N=37)



PRIMARY SUD DIAGNOSIS COMPARISON CHART FY 2022 AND FY 2023

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	38%	26%	22%	11%	0%	N/A	3%
FY 23	22%	32%	30%	14%	2%	N/A	0%
Difference	-16%	6%	8%	3%	2%	N/A	-3%



PENNSYLVANIA

County:
Union



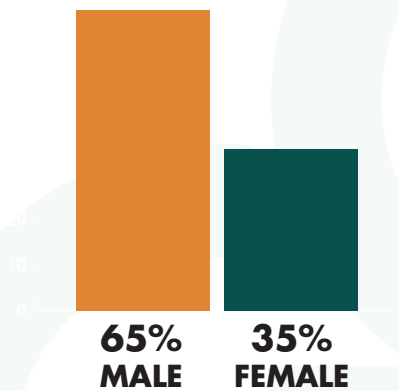
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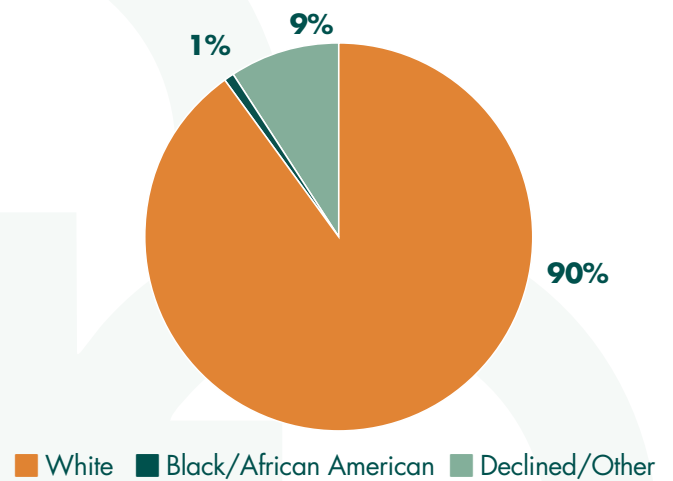
Programs: Lewisburg OP

DEMOGRAPHICS:

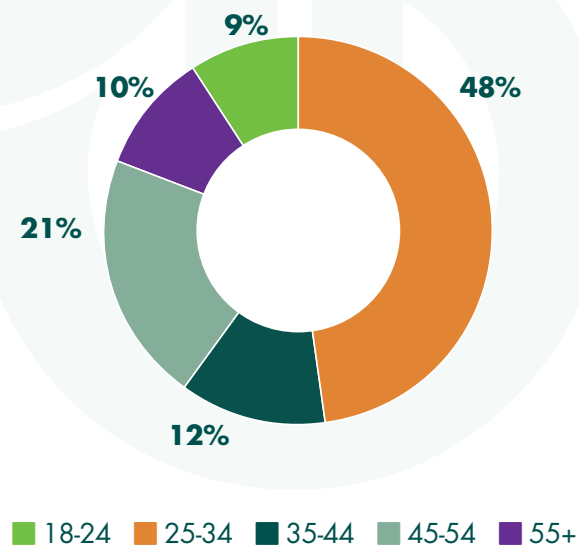
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED





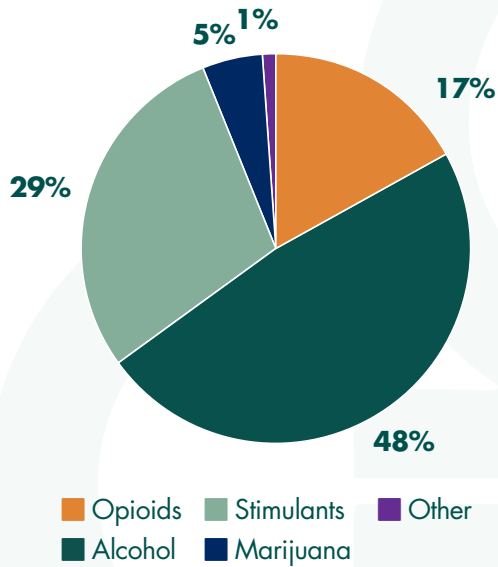
PENNSYLVANIA



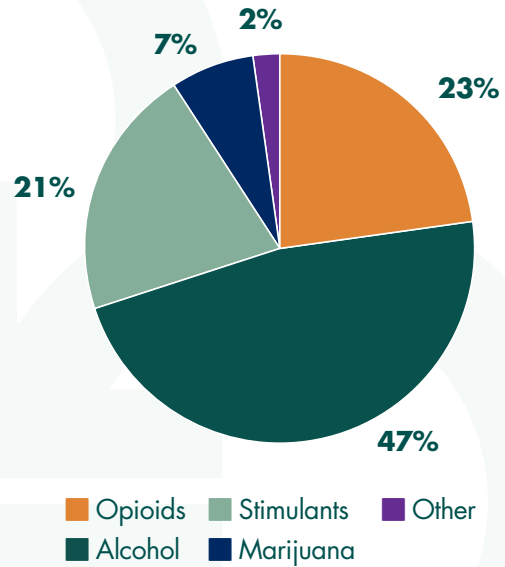
- Alcohol use disorder remains the primary diagnosis for individuals admitted in Union County; however, stimulant use disorder increased by 8% since last fiscal year.
- 67% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:*

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=97)**



**PRIMARY SUD DIAGNOSIS DATA
FY 22 (N=127)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	23%	47%	21%	7%	N/A	N/A	2%
FY 23	17%	48%	29%	5%	N/A	N/A	1%
Difference	-6%	1%	8%	-2%	N/A	N/A	-1%

*Secondary SUD diagnosis data unavailable



PENNSYLVANIA

County:
York



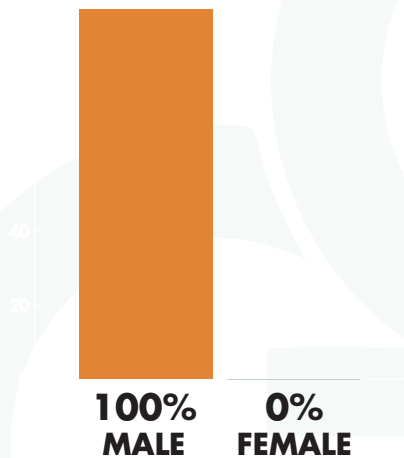
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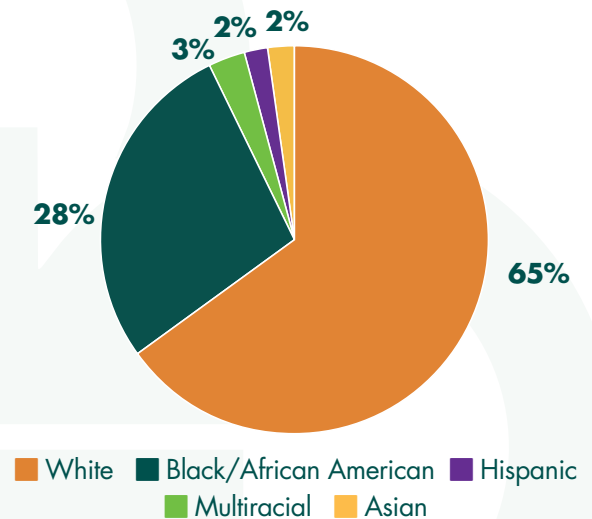
Programs: Integrity House

DEMOGRAPHICS:

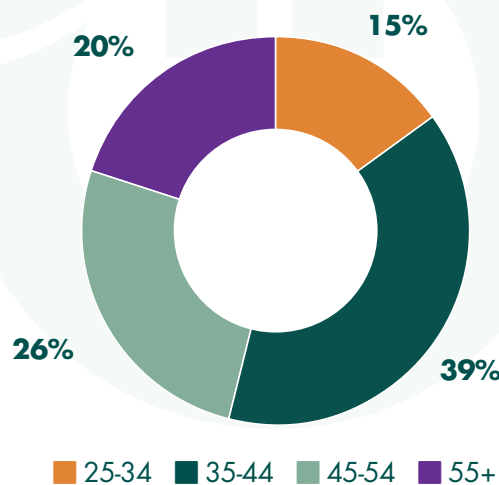
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED





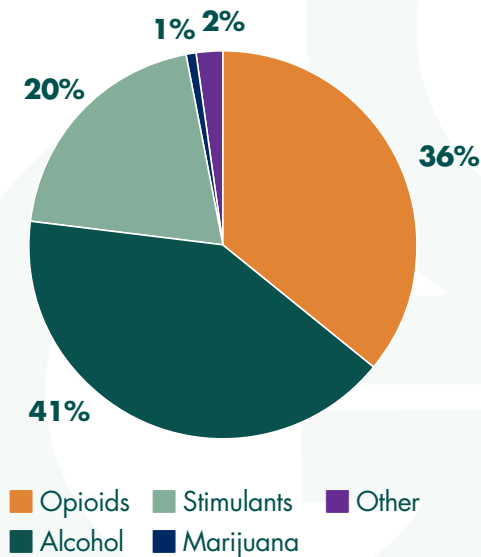
PENNSYLVANIA

County:
York

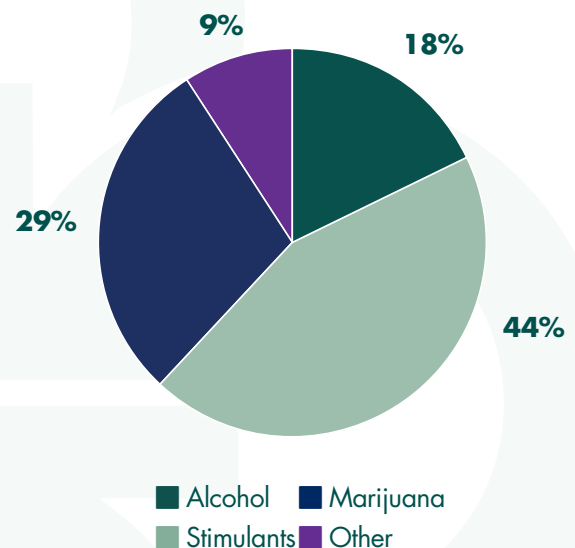
- The percentage of individuals diagnosed with an alcohol use disorder increased by 8% and stimulant use disorder increased by 5% while individuals with a primary opioid use decreased by 10% respectively.
- 56% of those admitted reported a secondary SUD 44% reporting a stimulant use disorder.
- The percentage of older adults, 55+, accessing treatment increased by 8% since 2022.
- 67% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

PRIMARY SUD DIAGNOSIS DATA FY 23 (N=61)



SECONDARY SUD DIAGNOSIS DATA FY 23 (N=34)



PRIMARY SUD DIAGNOSIS COMPARISON CHART BETWEEN FY 2022 AND FY 2023

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	46%	33%	15%	1%	N/A	0%	5%
FY 23	36%	41%	20%	1%	N/A	2%	0%
Difference	-10%	8%	5%	0%	N/A	2%	-5%

PROGRAMS FOR WOMEN WITH CHILDREN

Our Women With Children's Programs (WWC)

More than 40 years ago, Gaudenzia identified a barrier for women to seek treatment was the responsibility of childcare. They had limited options for people to care for their children while they were getting necessary care for themselves that would positively impact their future and that of their family. A common fear was that mothers would have to risk losing their children to the state if they sought help.

In 1979, we responded to this need. Gaudenzia proudly emerged as one of the first providers in the nation to offer a substance use disorder treatment program specifically designed to meet the needs of women with children. Today, we continue that legacy with 14 treatment programs offering expecting mothers and women with young children hope.

By making it possible for young children to stay with their mothers during treatment, our caring team members help women overcome their substance use disorder without fear of separation or losing custody of their children while getting the help they need.

With the opioid crisis, the increasing rates of alcohol use disorders, the increasing rates of stimulant use in pregnant women, and the change in our federal and state laws regarding women's health, there is an even greater need for these services in the coming years. For these reasons, we made the decision to make the services of women with children a stand-alone section in our FrontLine Report this year.

Our women with children's treatment programs provide trauma-informed, gender-responsive and culturally responsive care, with specialized services that include:

- ▶ High-Intensity Residential SUD Treatment
- ▶ Low-Intensity Residential SUD Treatment
- ▶ Co-Occurring Disorders Treatment
- ▶ Medication-Assisted Treatment (MAT) Options
- ▶ Individual and Group Counseling
- ▶ Educational Support Services for Children
- ▶ Connection to Support Services
- ▶ Family Reunification Opportunities
- ▶ Parenting Skill Classes
- ▶ Childcare



ALL WOMEN WITH CHILDREN (WWC) PROGRAMS

We offer 14 locations for women with children. The eleven listed below are the programs that provide residential substance use disorder treatment. We are proud to offer these specialized programs where mothers can receive trauma-informed, gender-responsive and culturally responsive care.

The data listed below are for our treatment programs actively providing these services in FY 2023.

PROGRAM	WOMEN SERVED	CHILDREN SERVED*	TOTAL
Claymont Center (3.3)	33	16	49
Claymont Center (3.1)	7	6	13
Community House for W&C	68	7	73
Fountain Springs	116	24	140
House of Healing	76	20	96
Hutchinson Place	39	29	68
Kindred House LT	65	30	95
New Destiny	99	14	113
New Image	24	13	37
Vantage House	67	15	82
Winner Program LT	45	23	68
TOTAL	639	197	834

NOTE 1: Children served reflects only children entering treatment with their mothers—it does not accurately reflect the number of children born in the program nor does it reflect the number of children who reunified with their mothers in treatment.

NOTE 2: “Served” reflects the number of clients in treatment between 7/1/2022 - 6/30/2023 whereas “admitted” reflects only those who were admitted between 7/1/2022 - 6/30/2023, so these numbers do not match.

*This does not include reunification and children born while the mother was in treatment.

ALL WWC PROGRAM DATA: FY 2023



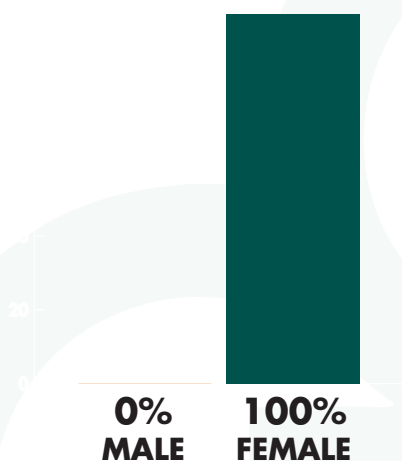
Number Served: 639 women, 197 children served; 545 adult admissions for fiscal year



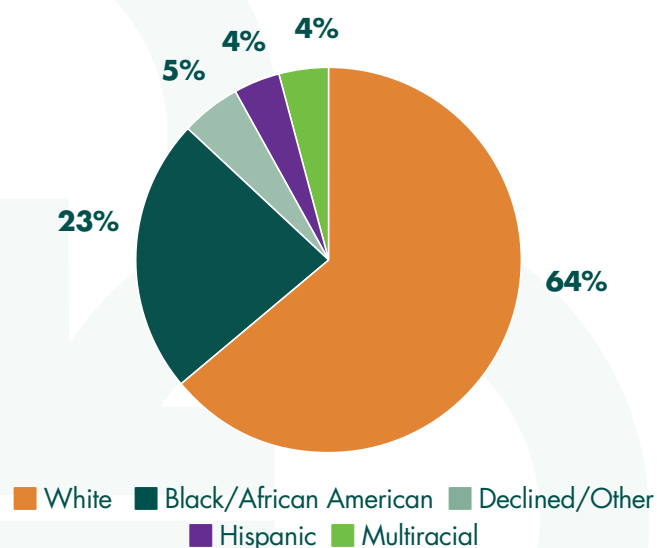
Programs: All WWC programs

DEMOGRAPHICS:

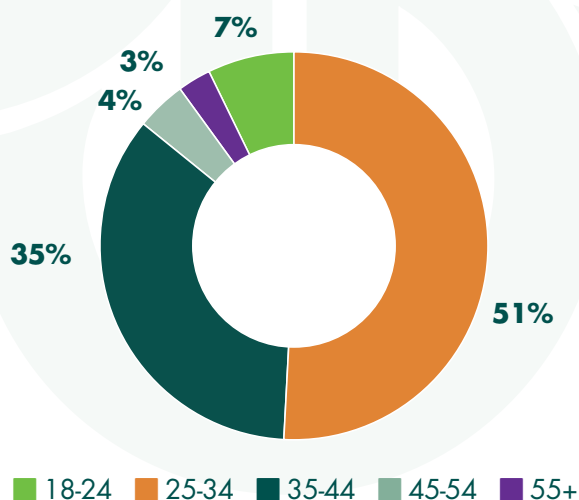
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RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED

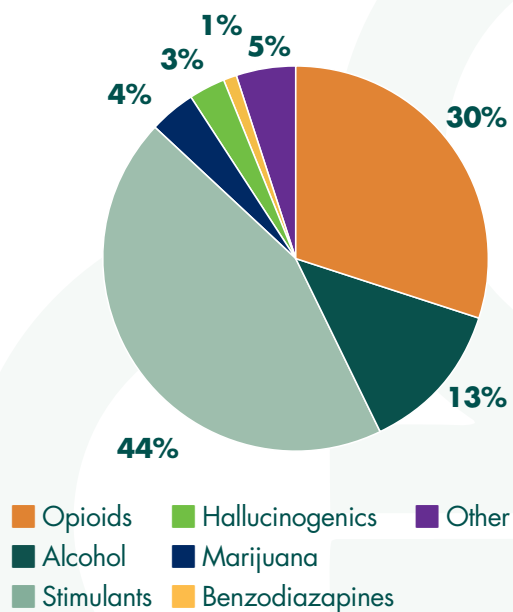


ALL WWC PROGRAM DATA: FY 2023

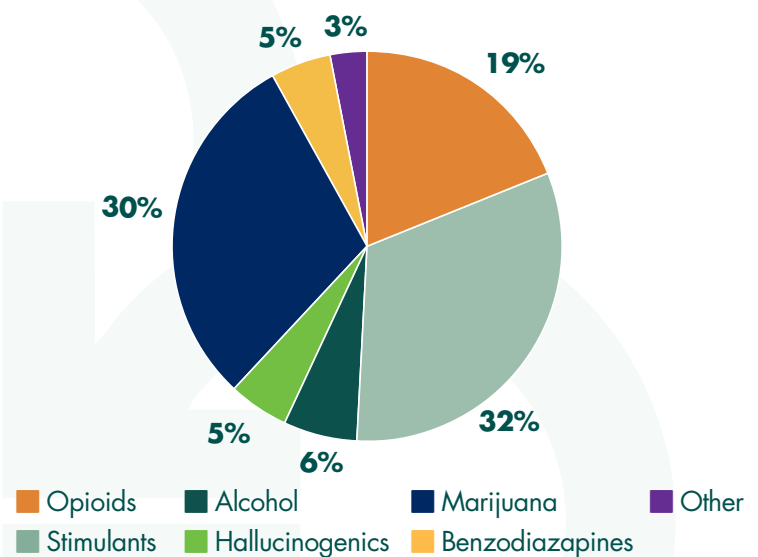
- At least 29% of women report polysubstance use.
- Stimulants remain the most prevalent primary **and** secondary diagnoses; however, alcohol use disorder increased by 5% over FY 2022.
- 87% of women reported a co-occurring mental health diagnosis based on Q4 biopsychosocial data.

DIAGNOSIS DATA:

PRIMARY DIAGNOSIS (N=545)



SECONDARY DIAGNOSIS (N=160)



PRIMARY SUD DIAGNOSIS COMPARISON CHART BETWEEN FY 2022 AND FY 2023

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	35%	8%	48%	2%	4%	1%	2%
FY 23	30%	13%	44%	4%	3%	1%	5%
Difference	-5%	5%	-4%	2%	-1%	0%	3%



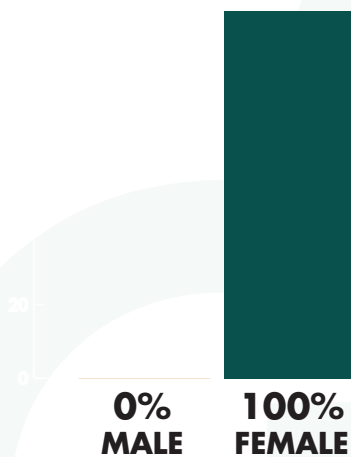
Number Served: 40 women,
22 children admitted since opening
7/1/2022



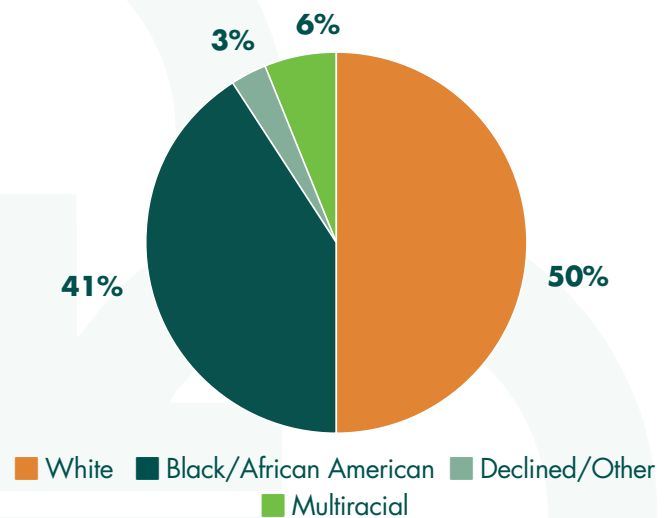
Programs: Claymont Center for Pregnant and
Parenting Women

DEMOGRAPHICS:

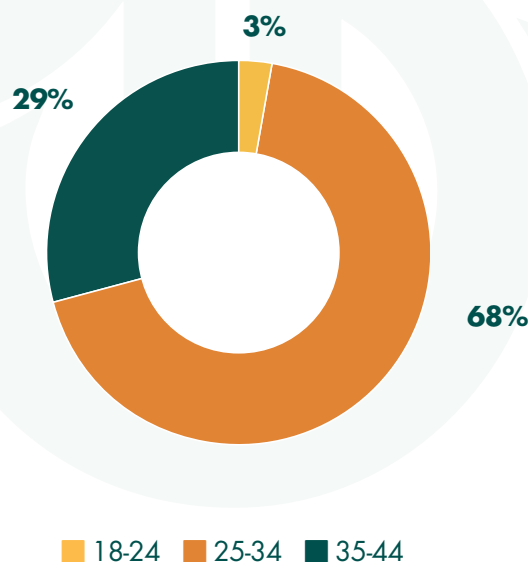
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



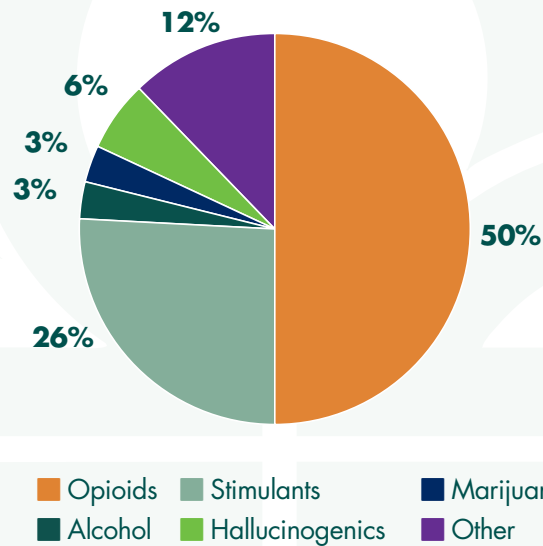
AGE DISTRIBUTION OF CLIENTS SERVED



- Majority of women reported an opioid use disorder (50%) followed by stimulant use disorder (26%).
- Secondary SUD data not available.
- 62% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:*

PRIMARY SUD DIAGNOSIS DATA FY 23 (N=40)



PRIMARY SUD DIAGNOSIS CHART FY 2023

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 23	50%	3%	26%	3%	6%	0%	12%

* Claymont Center opened in July 2022; therefore year over year data is unavailable.



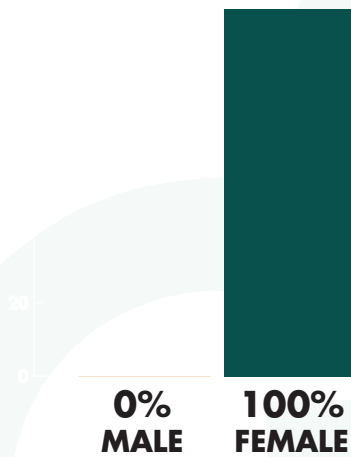
Number Served: 65 women,
30 children served; 52 adult
admissions for fiscal year



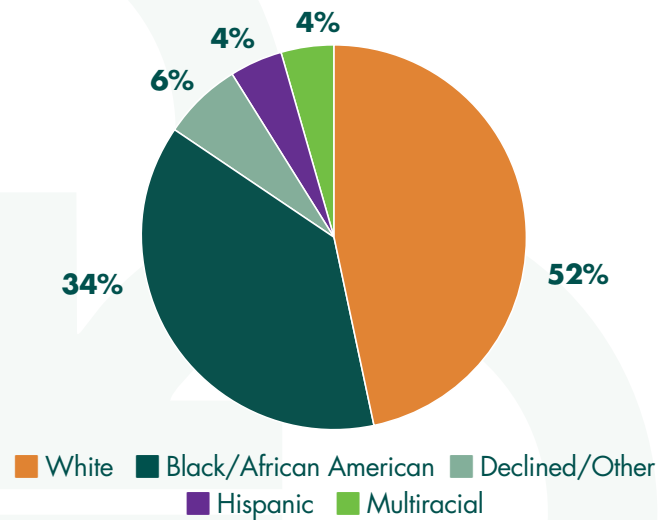
Programs: Kindred House

DEMOGRAPHICS:

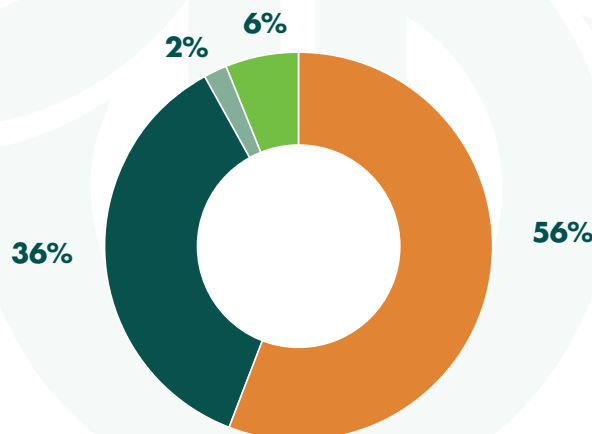
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED



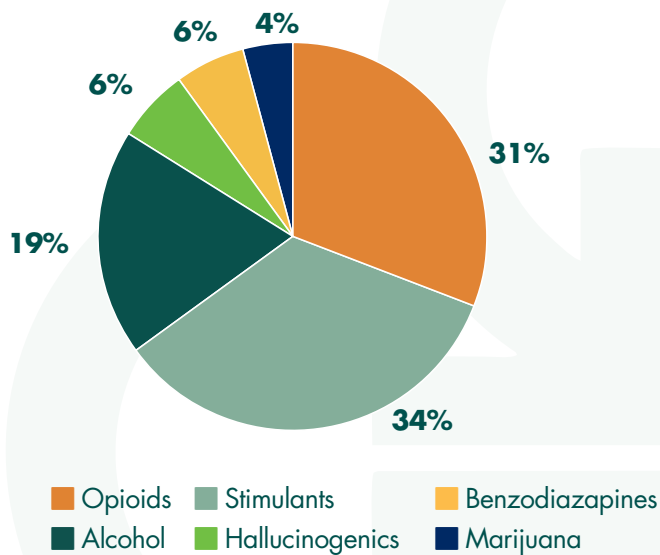
18-24 25-34 35-44 45-54



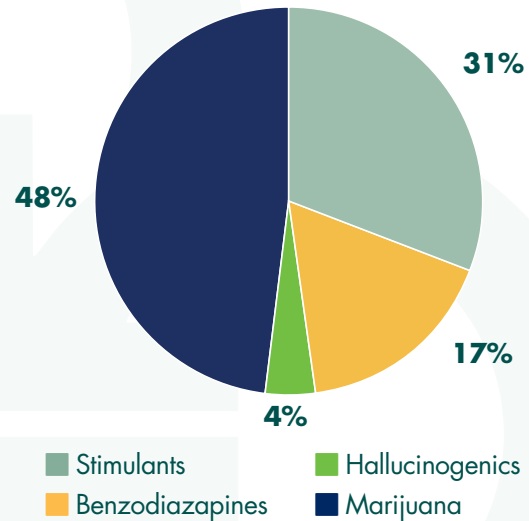
- 44% of women report polysubstance use.
- Stimulants remained the primary SUD; however, there was a 9% increase in women with alcohol use disorder and a 6% increase in benzodiazepine use disorder.
- 95% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=52)**



**SECONDARY SUD DIAGNOSIS DATA
FY 23 (N=23)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
BETWEEN FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	32%	10%	38%	0%	10%	0%	10%
FY 23	31%	19%	34%	4%	6%	6%	0%
Difference	-1%	9%	-4%	4%	-4%	6%	-10%



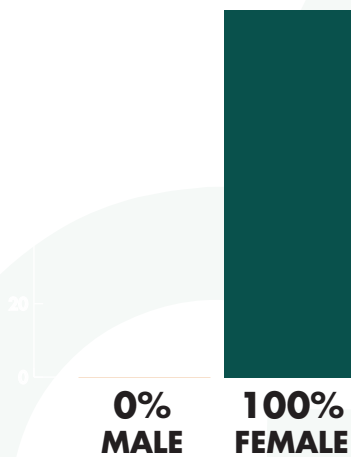
Number Served: 144 women,
27 children served; 126 adult
admissions for fiscal year



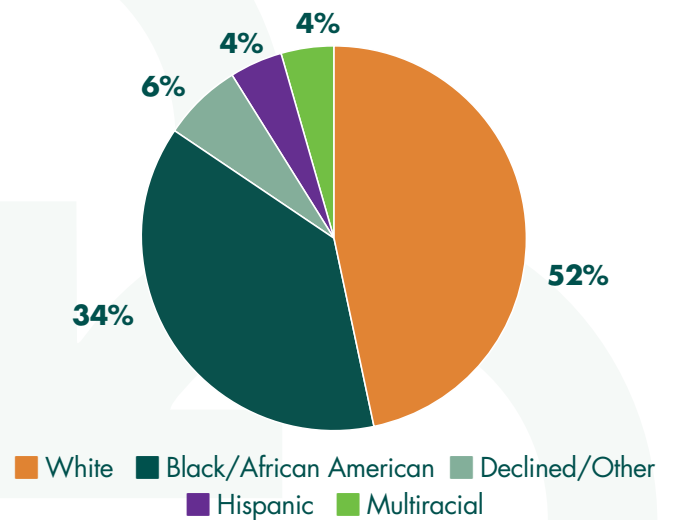
Programs: Community House & House of
Healing

DEMOGRAPHICS:

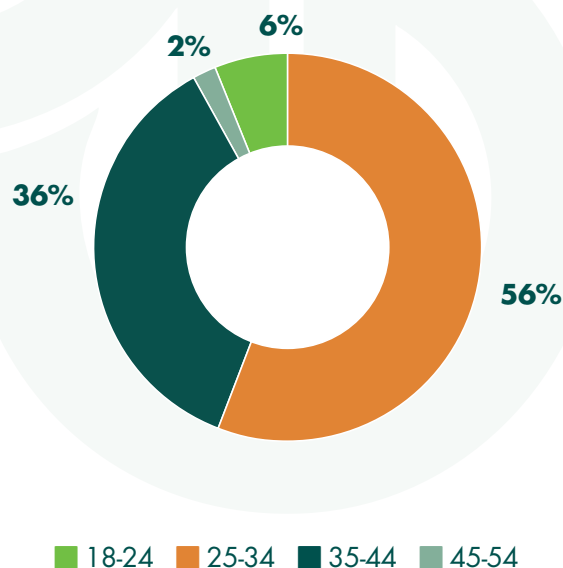
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED

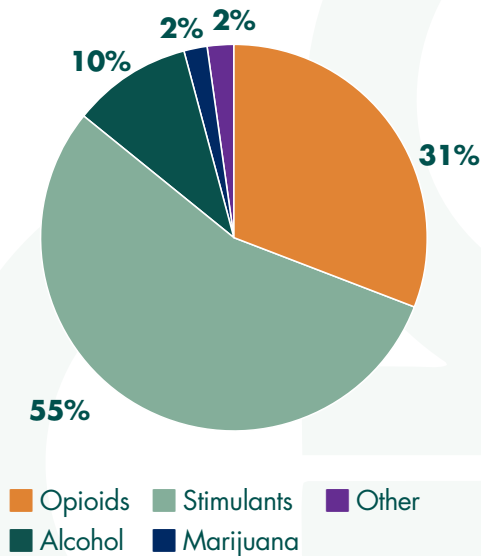




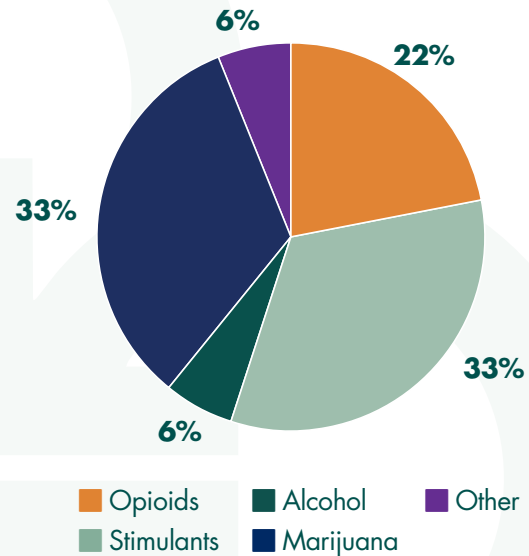
- Stimulant use disorder increased by 5% and alcohol use disorder increased by 3% while opioid use disorder fell by 11%.
- At least 14% of all women report polysubstance use; however, this may be underreported.
- 89% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=126)**



**SECONDARY SUD DIAGNOSIS DATA
FY 23 (N=18)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
BETWEEN FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	42%	7%	50%	1%	N/A	N/A	0%
FY 23	31%	10%	55%	2%	N/A	N/A	2%
Difference	-11%	3%	5%	1%	N/A	N/A	2%



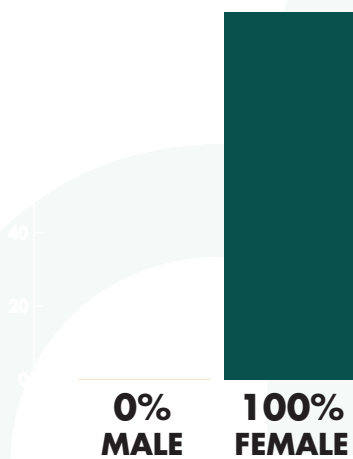
Number Served: 76 women,
32 children served; 60 adult
admissions for fiscal year



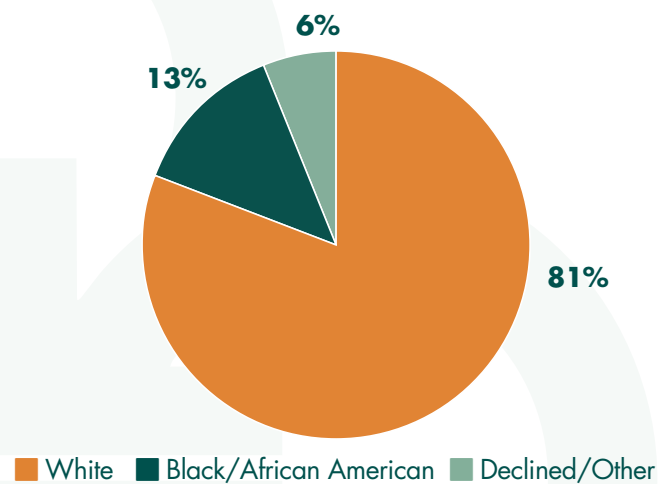
Programs: Vantage House

DEMOGRAPHICS:

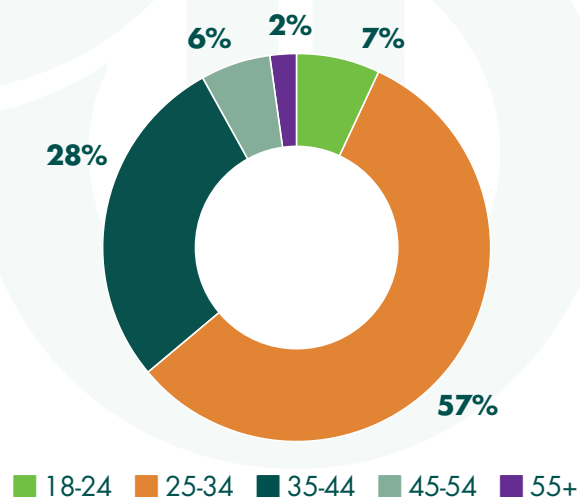
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED

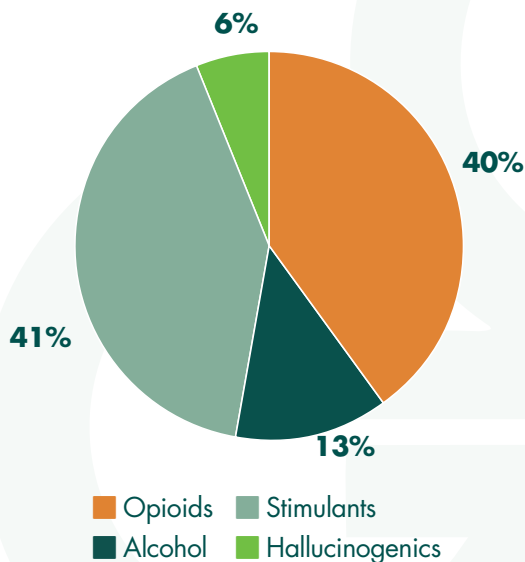




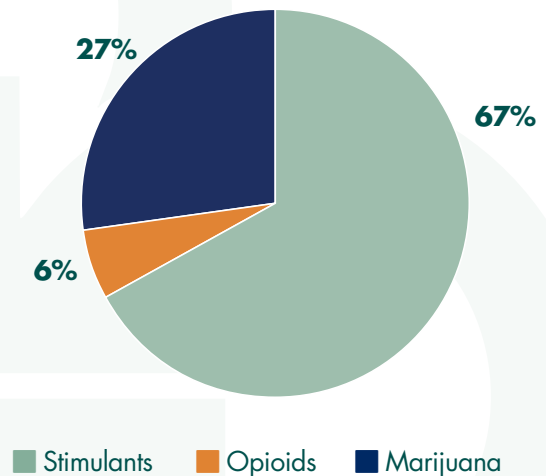
- Stimulant use disorder remains the primary diagnosis for women admitted to Vantage; however, alcohol use disorder increased by 10% since last fiscal year.
- At least 28% of clients reported more than one diagnosis with the majority reporting secondary stimulant use (67%).
- 95% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

PRIMARY SUD DIAGNOSIS DATA FY 23 (N=54)



SECONDARY DIAGNOSIS DATA FY 23 (N=15)



PRIMARY SUD DIAGNOSIS COMPARISON CHART BETWEEN FY 2022 AND FY 2023

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	38%	3%	47%	N/A	9%	N/A	3%
FY 23	40%	13%	41%	N/A	6%	N/A	0%
Difference	2%	10%	-6%	N/A	-3%	N/A	-3%



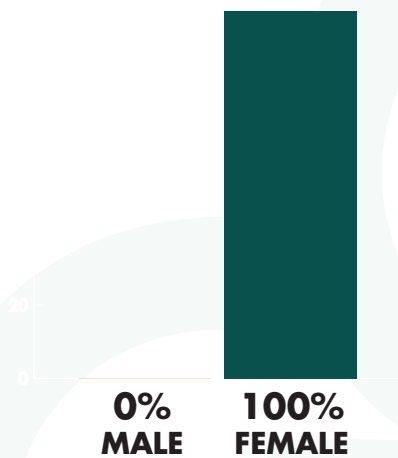
Number Served: 108 women, 65 children served; 81 adult admissions for fiscal year



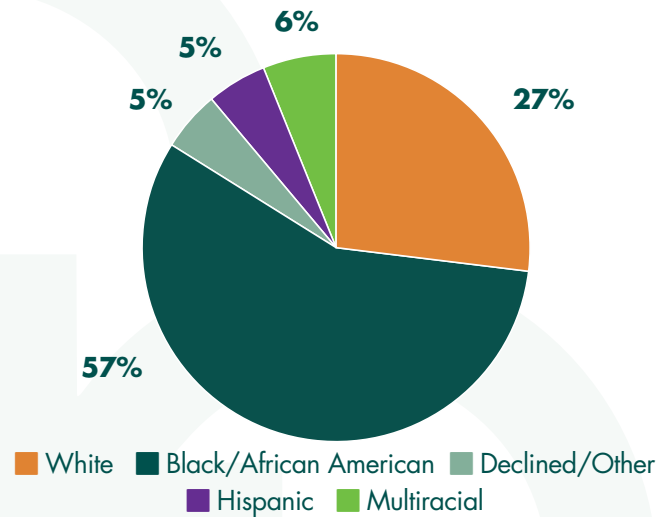
Programs: New Image, Hutchinson Place, & WINNER

DEMOGRAPHICS:

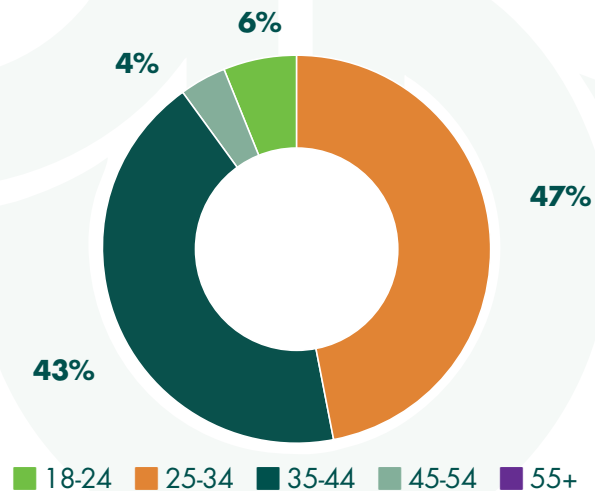
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED

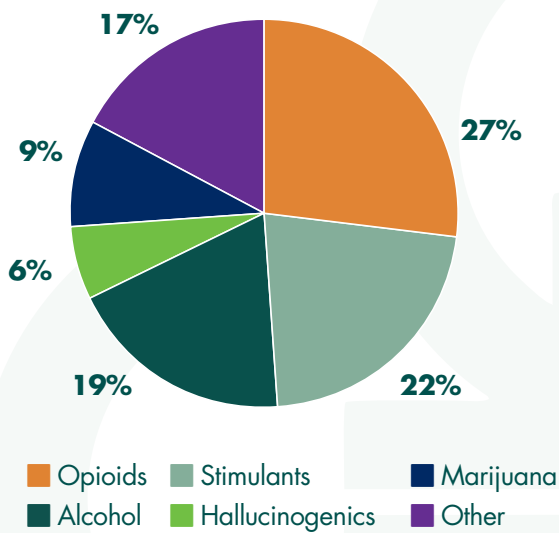




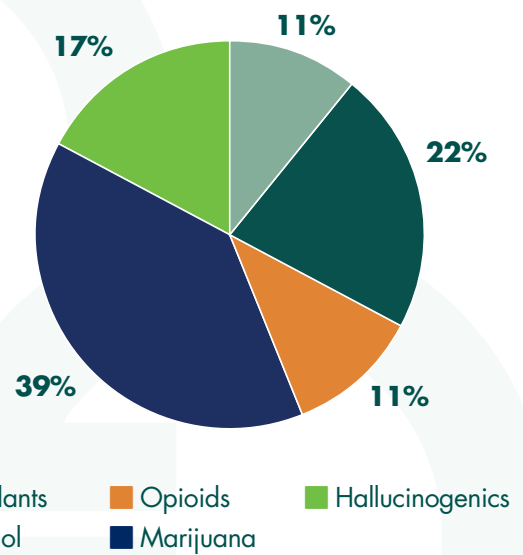
- Stimulant use disorder decreased by 23% while alcohol use disorder increased by +14%.
- 77% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

**PRIMARY SUD DIAGNOSIS DATA
FY 23 (N=81)**



**SECONDARY DIAGNOSIS DATA
FY 23 (N=18)**



**PRIMARY SUD DIAGNOSIS COMPARISON CHART
BETWEEN FY 2022 AND FY 2023**

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	26%	5%	45%	5%	10%	N/A	5%
FY 23	27%	19%	22%	9%	6%	N/A	17%
Difference	1%	14%	-23%	4%	-4%	N/A	12%



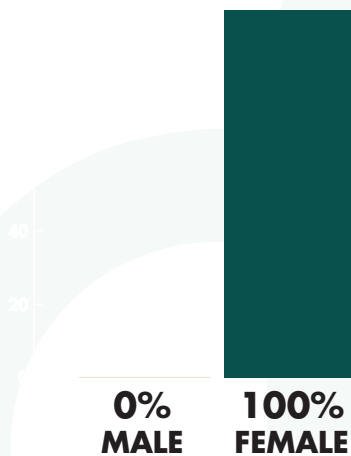
Number Served: 215 women,
34 children served; 187 adult
admissions for fiscal year



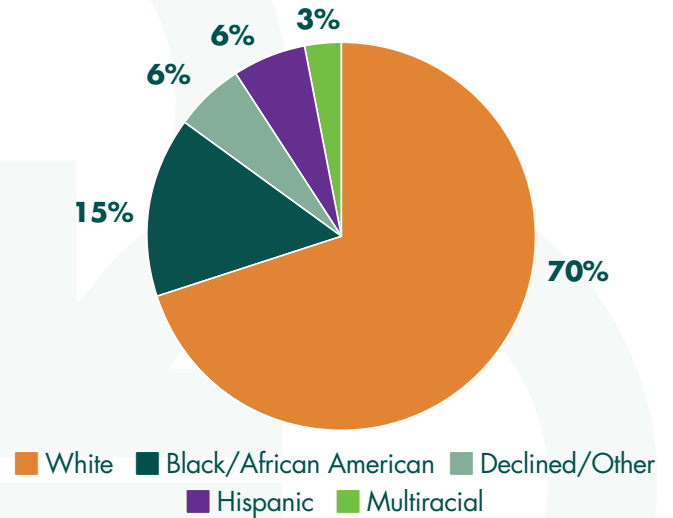
Programs: New Destiny & Fountain Springs

DEMOGRAPHICS:

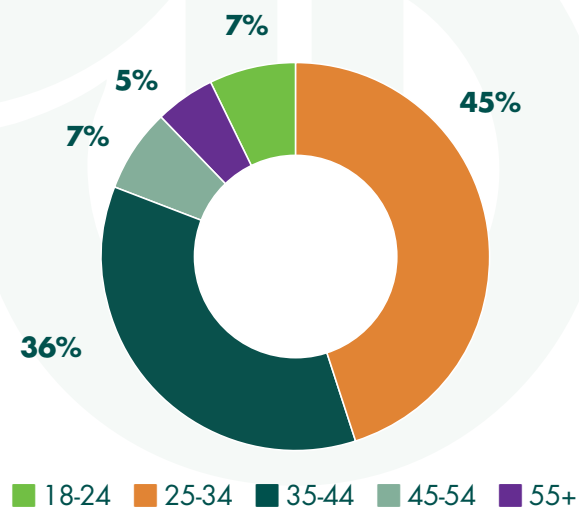
GENDER OF CLIENTS SERVED



RACE/ ETHNICITY OF CLIENTS SERVED



AGE DISTRIBUTION OF CLIENTS SERVED

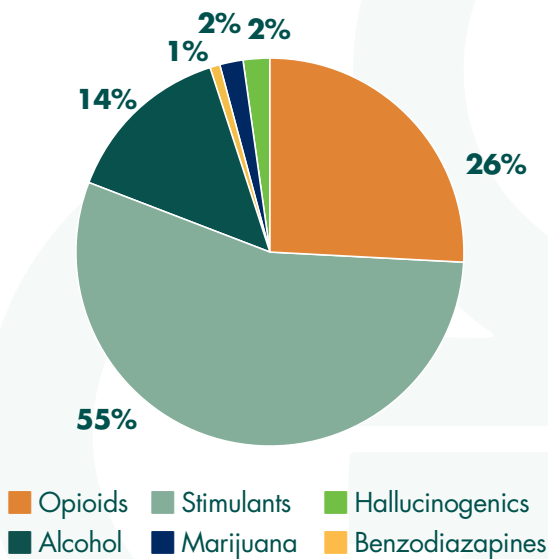




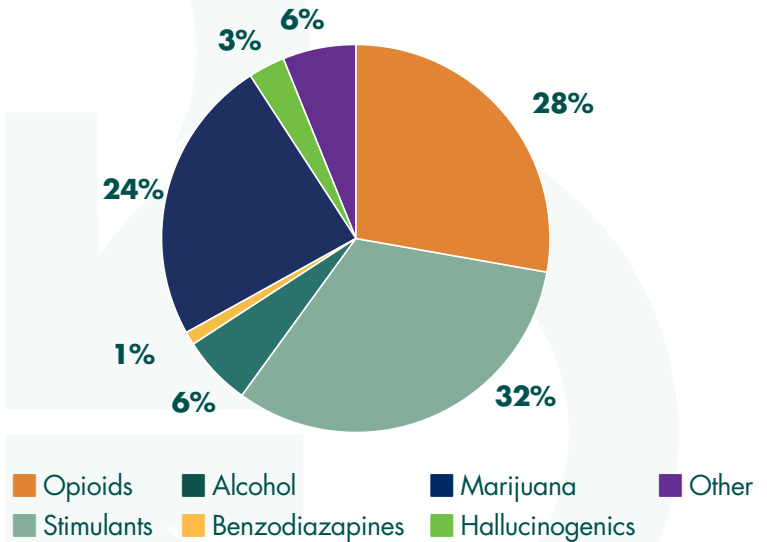
- There was a 5% increase in stimulant use disorder, as well as 2% increases for alcohol, hallucinogens, and cannabis use disorders.
- At least 45% of all women report polysubstance use, with the majority reporting a secondary stimulant use disorder.
- 90% of admissions completing a biopsychosocial between March and June had a co-occurring mental health diagnosis.

DIAGNOSIS DATA:

PRIMARY SUD DIAGNOSIS DATA FY 23 (N=187)



SECONDARY DIAGNOSIS DATA FY 23 (N=85)



PRIMARY SUD DIAGNOSIS COMPARISON CHART BETWEEN FY 2022 AND FY 2023

	OPIOIDS	ALCOHOL	STIMULANTS	MARIJUANA	HALLUCINOGENS	BENZOS	OTHER
FY 22	34%	12%	50%	0%	0%	2%	2%
FY 23	26%	14%	55%	2%	2%	1%	0%
Difference	-8%	2%	5%	2%	2%	-1%	-2%

DRUG DIAGNOSIS CATEGORIES

For coherence and ease of reporting, Gaudenzia, Inc. has grouped and defined substance use disorder diagnoses within its Frontline Report based on the following categories adapted from the Alcohol and Drug Foundation and National Institute on Drug Abuse:

OPIOIDS

Opioids include any natural or synthetic drugs derived from or related to the opioid poppy plant. These drugs bind to opioid receptors in the brain and are central nervous system (CNS) depressants. Opioids also stimulate the release of dopamine and produce euphoria and pain relief. Commonly misused opioids include heroin and opioid-based medications like fentanyl, codeine, morphine, oxycodone, methadone, and buprenorphine. Since opioids slow breathing and heart rate, they pose a significant overdose risk when consumed in high doses or combined with other CNS depressants like alcohol and benzodiazepines.

ALCOHOL

One of the most widely used drugs in the world, alcohol is a CNS depressant that slows down brain function and neural activity. Alcohol is neurotoxic with direct effects on nerve cells. Chronic alcohol use can result in brain damage, depression, liver damage, cancer, high blood pressure, and physical and psychological dependence. Individuals with severe alcohol dependence may require monitoring during withdrawal due to the heightened risk of seizures and hallucinations.

STIMULANTS

Stimulants are a class of drugs that act on the sympathetic and CNS to accelerate brain activity and boost alertness and energy. Commonly misused stimulants include drugs like cocaine, methamphetamine, and amphetamines, including prescription medications for ADHD. Misuse of stimulants leads to long-lasting changes in the brain which promote craving and relapse and overuse can produce anxiety, paranoia, seizures, and other ill effects.

MARIJUANA

Similar to opioids, cannabinoids produce their effects by interacting with specific receptors, located within different parts of the CNS. One of the main cannabinoids is delta-9-tetrahydrocannabinol (THC), commonly known as marijuana. Marijuana has strong psychoactive properties and can be unpredictable when used along with other substances. Repeated use of marijuana can lead to dependence.

HALLUCINOGENS

Hallucinogens, also known as psychedelics, are a class of psychoactive substances that produce changes in perception, mood, and cognitive processes. Hallucinogens affect all senses and can cause a person to see or hear things that do not exist. As a result, they can cause people to experience paranoia and behave in unintentionally dangerous ways. Commonly misused hallucinogens include phencyclidine (PCP), lysergic acid diethylamide (LSD), dimethyltryptamine (DMT), 2,5-dimethoxy-4-methylamphetamine (DOM), and psilocybin or "Magic Mushrooms". Symptoms of use can mimic schizophrenia and psychosis.

BENZODIAZEPINES

Another CNS depressant, benzodiazepines are commonly prescribed to treat anxiety, panic disorders, and sleep disorders. While safe for short-term use, there is a high potential for dependence and misuse which may result in overdose and dangerous withdrawal symptoms, including seizures. These risks are heightened when paired with other CNS depressants like opioids and alcohol. Commonly misused benzodiazepines include Xanax, Valium, Ativan, and Klonopin.

OTHER

Gaudenzia used "other" to code drugs or sedatives for which there was no statistically significant representation. Some "other" drugs included empathogens, like MDMA, dissociatives, like ketamine, and other depressants, like prescription and over-the-counter sleep aids.

NEED HELP?



SUBSTANCE USE AND CO-OCCURRING DISORDERS

Contact our 24-hour Treatment
and Referral Helpline
833.976.HELP(4357)
OR HELPLINE@GAUDENZIA.ORG



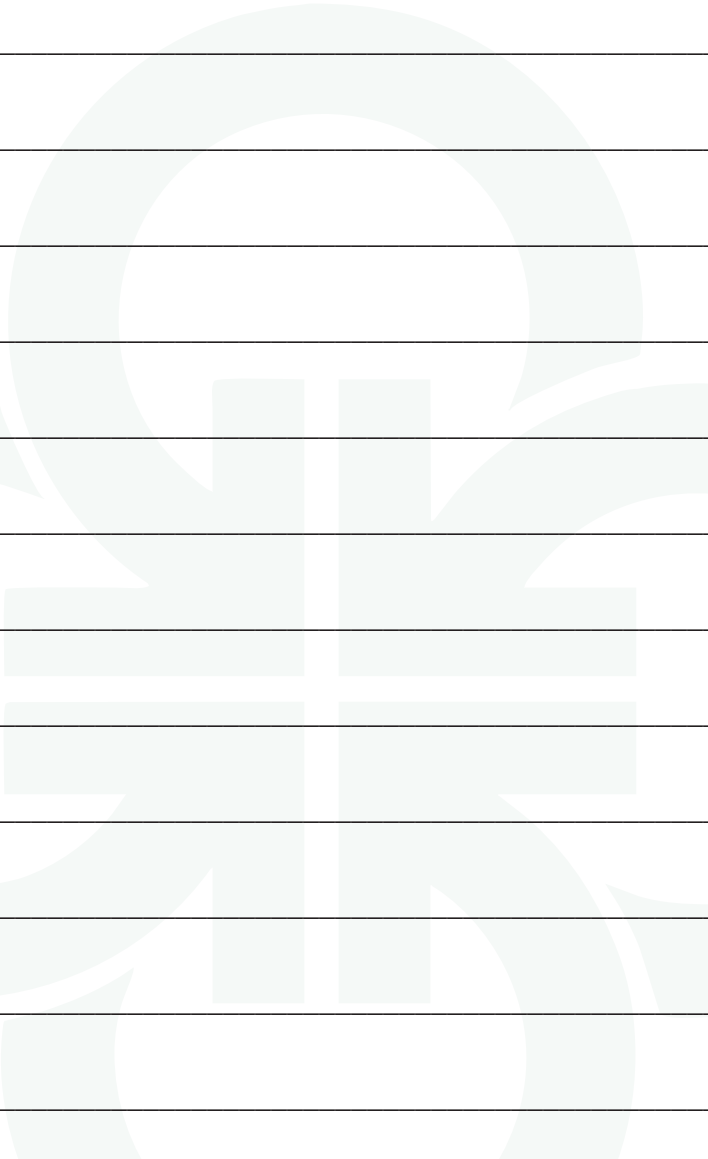
Gaudenzia's Helpline Offers:

- ▶ Confidential 24/7 assistance
- ▶ Skilled specialists for quick access to screening, admission scheduling and transportation assistance to Gaudenzia services
- ▶ Focused attention to each caller's recovery needs
- ▶ Individualized approach to recovery

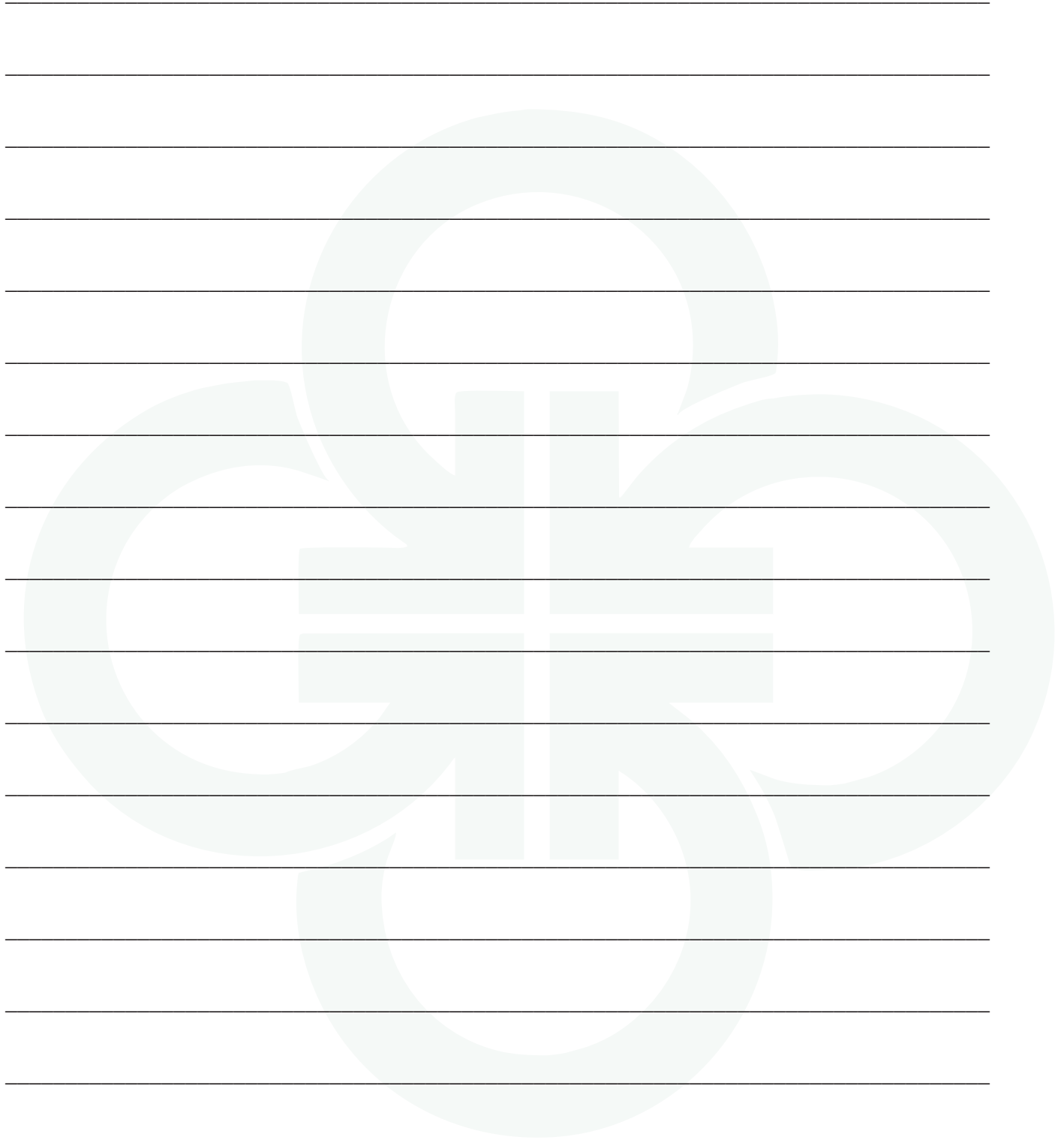
Call 833.976.HELP (4357)

Gaudenzia uses an evidence-based, person-centered treatment model to help individuals and families break the cycle of substance use and co-occurring disorders.

NOTES



NOTES





CONTACT:

GAUDENZIA, INC.
106 W. Main Street
Norristown, PA 19401
PublicRelations@gaudenzia.org

GAUDENZIA.ORG

NEED HELP?

Contact our 24-hour Treatment and Referral Helpline
833.976.HELP(4357) OR HELPLINE@GAUDENZIA.ORG

GIVE HELP

Support our mission and help transform lives, families, & communities.
GAUDENZIA.ORG/ABOUT/WAYS-TO-HELP