**Introduction**  
Through media exposure in the United States, many people afflicted with drug and alcohol addictions are portrayed in a negative light. If those who have addiction problems are sober for a long time and then relapse, they are especially looked down upon by the sober community. This brings me to my research question: Why do clients relapse once they leave rehabilitation? I am an intern at chemical dependency recovery center. I have seen many women graduate their programs and return back at the center for another try at recovery. Through my time at my internship, I wanted to further research why these women were relapsing once they graduated treatment.

**Hypothesis**  
"Female clients relapse after leaving treatment due to risk factors such as past abuse, being children of drug and alcohol addicts, and history of mental health problems other than chemical dependency".

**Background Data**  
*Barriers to Treatment for Women with Substance Use Disorders:*  
- primarily focused on the specific barriers that women face going into and leaving substance abuse treatment such as:  
  - childcare while in treatment  
  - entering the workforce  
  - co-occurring disorders, (since they are more likely in women than in men)  
  - fear of stigma  
  - denial  
  - lack of familial and financial support  
- All of these factors follow them once they leave treatment, which affects their continual success after their residential treatment.

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**Methodology**  
In my research project, I ran a query into the admissions program to organize all people who left treatment in 2014. This query collected those who left ASA (Against Staff Advice), those who graduated or “affirmed” the programs they were in, or those who were neutrally discharged to be directed to another agency. Clients who had relapsed once before or even after this specific affirmation were organized into the “relapse” group. Those who had affirmed their first round of treatment and had not returned to services at the agency were organized into the “success” group. Then, I compared the admission surveys given to the “relapse” group before they entered their second round of treatment to the admission surveys given to the “success” group before their round of treatment.

**Basic Demographic Data Collected from Admissions Survey:**  
- client ID  
- discharge date/re-entry into services date  
- marital status  
- number of children under 18 years old in household/number of births (live and still)  
- employment status  
- education completed  
- living arrangements  
- drug of choice  
- usage of those drugs in the last 30 days  
- special populations each client belongs to  
- arrests in the last 30 days  
- mental health diagnoses other than DOA diagnosis  
- number of meetings (AA, NA, etc) attended in the last month.

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**Results**

<table>
<thead>
<tr>
<th>Special Population</th>
<th>Relapse Rates</th>
<th>Success Rates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol &amp; Drug</td>
<td>14%</td>
<td>37%</td>
</tr>
<tr>
<td>Alcohol &amp; Drug +</td>
<td>86%</td>
<td>63%</td>
</tr>
</tbody>
</table>

Out of the 86% who had other special populations,  
- 19/35 women were children of addicts  
- 19/35 women were abused (sexually, physically, domestically)  
- 6/35 had open criminal cases  
- 6/35 had Hepatitis C  

Compared to the success group, the relapse group had 23% more clients who had other mental illness issues other than alcohol/drug dependency.

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