

## **The Acres Built Environment: Infrastructure and Community Integration**

Though understandably a project as ambitious as ‘The Acres’ seems a monumental task to actualize, we believe that with the proper implementation and foresight an agriculturally connected village such as that proposed may be the change needed in order to effectively reintegrate those suffering from addiction and mental health affliction back into society. Given the enormity of such an endeavor, many determinants pertaining to The Acres have come to the forefront when pondering what characteristics need be considered if such a project is to be realized. As evidenced by the other sections of this proposal, we recognize the importance of considering how the community may be governed and kept safe, and the means by which relapse may be prevented or at the very least reduced. And while the aforementioned factors certainly contribute to the longevity and success of such a project, arguably ‘simpler’ aspects, such as housing and infrastructure must also be integral considerations.

### **Overview**

As indicated in the community engagement section of The Acres Proposal, significant time has been spent gathering opinion from those who may be most impacted by The Acres, regarding the infrastructure that would be needed to serve as the foundation from which The Acres will grow. Taken together, the questions asked and the brainstorming conducted up to this point have been centered around the prospect of forming an agricultural village that has housing options tailored for relapse prevention and treatment. As will be elaborated on later in this section, this may include an array of potential living situations depending on one’s personal status, regarding their journey to recovery and their familial or professional lives, as well as how living accommodations may change throughout their time at The Acres. Again, we are considering their journey to recovery, but also their desire to play a bigger role within the community. This may be in the form of increased responsibility, or of taking on a bigger role within the village. That considered, we have not overlooked the more nuanced factors that will contribute to how The Acres is developed. For instance, sobriety has been an ongoing topic as we discuss the potential realization of this project. There seems a fine line between recognizing the potential benefits of having a completely sober community, while also attempting to embrace the reality that we as humans are not perfect. All deserving of the same compassion and respect, regardless of our current situation. The prospect of collaboration has been a continuing conversation regarding how that may be realized on both an individual-to-individual basis as well as organization-to-organization. The former refers to how we may be able to successfully integrate two vastly different populations into the same agricultural village: those having suffered from mental health afflictions and addictions, and those who have had the good fortune to remain naïve to such circumstances. Though not to the same degree of familiarity as that just mentioned, we hope to expand this sense of community beyond the reach of The Acres as well, creating an agricultural village that extends welcome to all people in Edmonton; a neighbourhood the greater population may look to with pride and admiration. We also recognize the potential value in having residents of The Acres never truly leave the community. There is hope to establish a system in which those who have successfully ‘graduated’ from The Acres

might maintain a relationship with the community, whether that be through advocacy, volunteering, or mentoring those currently taking part in The Acres program. Lastly, though housing and living accommodations remain at the forefront of the conversation, significant thought has been allocated to recognizing the types of goods and services that will similarly help to support those on their journey to recovery. To be developed more fully later in this section, we strongly propose the inclusion of such services that may pertain to counseling and healthcare, labor, goods and food, lifestyle (gym, restaurant, community centre, etc.) and finally, a strong recommendation for the inclusion of an onsite detox facility. As alluded to in the other sections of this report, the significance of the agricultural component of The Acres community cannot be overstated. However, as this topic has been exhausted throughout the other sections it will only be briefly spoken of here.

### **Living Accommodations**

When considering the types of living quarters that will typify The Acres community, we made a point to account for the unique situations our occupants may have prior experienced, as well as designing a system that would be most beneficial as they venture along their journey to recovery. We furthermore recognize the importance of developing a community in which residents feel both comfortable and excited to lay down roots, to plan to stick around for the long-haul. Research has shown repeatedly that recovery from substance use disorder is not a ‘quick-fix’. For instance, multiple studies have indicated that while not being a ‘magic number’, patients who continue treatment programs for longer than 90 days are considerably less likely to relapse when compared to their counterparts.<sup>1,2</sup> One even found that residents who dropped out of treatment before 90 days had similar rates of relapse as those who only stayed for 1 or 2.<sup>3</sup> Housing developments on their own are not the magical panacea to this seeming ‘90-day problem’. Rather, it is the right kind of housing, the right kind of community, that when actualized, may be able to foster an environment capable of retaining those needing the proper support. Per the Community Engagement section, housing that appears to be most desired when considering The Acres included family housing, rent-to-own condos, co-ops, and subsidized housing. To an extent, we would expect family housing to be a fundamental component of the community. Though potentially not as efficient when it comes to land usage, family housing would be critical for those attempting to reform stability in their lives, particularly those with partners and/or dependents. The stresses associated with attempting to get back on one’s feet need not be compounded with having to deal with neighbours disgruntled by the sounds of pets or children behind thin walls. Furthermore, as will be elaborated on in due time, family housing may serve as a significant steppingstone for those who enter The Acres and may not at first be able to handle the increased responsibility associated with residing in a family home. As may be inferred by the nature of the manner of housing mentioned, we believe it imperative to account for the reality that many of those looking to take part in The Acres program may not be in the most stable of financial status and may benefit from added flexibility and support. Rent-to-own condos may be a more viable option for some, as it benefits those who may not have the financial means to make a down payment on a home, and/or poor credit history and the inability to qualify for a mortgage. Similarly, the inclusion of co-ops and subsidized housing within The

Acres would be expected to limit financial burden, stress – and to an extent responsibility – for those who may not yet be in a position to handle such pressures.

More than simply being concerned with specific infrastructure, as it pertains to places of residence, we consider it prudent to recall that finances are not the sole factor when it comes to establishing safe and comfortable living. At The Acres we would intend to welcome those looking to take part in the program and accommodate them based on their own unique sufferings and personal situations. As an example, there may be a dedicated section of housing specifically for veterans struggling with substance use disorder. Studies have shown that veterans facing problems with substance use do so in a way unique to them, as opposed to their non-veteran counterparts. In Veterans, symptoms of PTSD and chronic pain may contribute substantially to their desire and perceived need to use.<sup>4,5</sup> Similarly, we recognize that many women afflicted by substance use and addiction are commonly found to be in rather precarious and undesirable situations in their personal lives. They may find themselves in an abusive relationship, caring for children alone, or otherwise pressed upon by external stressors, in addition to those posed by mental health and addiction. Having particular housing allocated for women may catalyze their recovery process as studies have shown that when placed in women's only recovery groups, participants have been found to more frequently report feeling safer, embracing more aspects of self-care, and having more of their needs met.<sup>6</sup> Furthermore, women with substance use disorders are less likely to enter treatment when compared to men<sup>7</sup>; having a system which endorses women and their journey to recovery at The Acres could greatly reduce this gap.

Lastly, in relation to the sorts of housing one may experience while residing in the community, we propose to include at The Acres a 'graduated living system' in which residents progress through types of living (if they so desire) that vary on a spectrum of freedom, responsibility, and support. Ideally, we would look at welcoming prospective community members and curating their living situation to that which both we and the member can agree would be best for their particular situation. This may be a young man attempting to get back on his feet, with no finances, and no work experience, who may be in need of increased support such as that which would be found at one of the housing co-ops. In time, as he moves further along his road to recovery, we would hope that through sobriety and self actualization, he would feel comfortable moving to new accommodations, including greater freedoms and a lesser need of direct support. On the other hand, if he has grown particularly fond of his form of accommodations or would like to give back more to the community, there would also be the possibility of assuming greater responsibility within his current residence. For example, the housing co-ops would necessitate senior residents capable of leading and helping those less experienced and in greater need of support. Additionally, they may be expected to lead when it comes to the upkeep and maintenance of the building. This system would also relate services offered within The Acres community. As occupants learn, grow, and mature throughout their stay they would be eligible for occupying higher positions within the greater community. This may come in the form of directing an area of the garden or working for one of the services offered in the community. In a sense we would be looking at fostering a community in which members are capable of recognizing their strengths and weaknesses and then contriving their living situations in ways to best match where they are on their journey.

## **Recovery Through Collaboration**

As evident by the material presented, we desire to develop a unique agricultural village in which those who may be struggling with substance use are able to progress to a healthier and happier life. However, we have come to recognize the potential benefits of inviting people of all capabilities into The Acres community, not simply those plagued by addiction and mental health challenges. At The Acres, we hope to include those not afflicted by dependency, with the expectation that the integration of perspectives will offer additional support and a means of promoting success throughout the program. Research has shown on numerous accounts the benefits of introducing people of varying backgrounds and knowledge to one another as it is believed the diversity of perspective can enhance one's educational experiences.<sup>8</sup> That considered, potential residents of The Acres will be expected to undergo a strict screening process and pertinent training. Regarding the former, we would have to ensure that those entering the community would be appropriate role-models and sources of support for those taking part in the program. For those attempting to put their lives back in order, the risk is simply too great. The anticipated training of such residents may involve learning to appreciate the boundaries of those attempting to find sobriety, education regarding proper language use, and being able to recognize and alert occupants to issues of codependency. Studies have noted the potential benefit of collaborating with outsiders in the recovery process as social support has been recognized to create a sense of inclusion, belongingness, and safety for patients.<sup>9</sup> Furthermore, those recovering from substance use disorder who are socially engaged in community-oriented practices have been found to lead healthier lives and encounter reduced mental distress when compared to their less fortunate counterparts.<sup>10</sup> At The Acres we can expect that collaboration on the micro level of person-to-person may not be the game changer that will swing the tides in our favor, however, the smallest bit of added perspective and support from those around may be able to snowball and result in the production of substantial change.

Looking now at the potential for collaboration at the macro level, we at The Acres intend to foster close relationships with other organizations throughout the greater Edmonton area. The approach taken by The Acres community is intended to be more holistic, tackling issues of sobriety, social capital, and self sufficiency amongst others; however, we are not so naïve as to believe that we are able to manage every facet associated with substance use. Organizations that offer services supportive of The Acres will be critical when it comes to fully accommodating residents. Collaboration between organizations, maintenance of systems that offer a close working relationship, and open communication will allow the best opportunity for offering the most thorough care possible. Research has shown that partnership is a viable strategy for the enhancement of performance and productivity among third sector organizations, as well as leading to better results-per-dollar than if organizations work individually.<sup>11</sup> For instance, there will likely be those with affiliation to The Acres suffering from mental health afflictions. Alberta Hospital Edmonton (AHE) is a psychiatric hospital to the NE of Edmonton and will likely play a significant role in the rehabilitation of our residents. Collaboration between The Acres and AHE would enable a more fluid transition if residents are expected to spend time admitted to the latter. In fact, evidence has shown that collusion between organizations may improve access to services and contribute to better health overall.<sup>12</sup> Of all the stresses one may have in their lives as an

in-patient, the concern that one may be evicted or otherwise removed from a rehabilitation program should not be added to the mix. Open communication between The Acres and other organizations, such as AHE, the Henwood Treatment Centre, and others, would facilitate the offering of an integrated and comprehensive treatment plan, thus allowing patients the greatest opportunity to lead healthy and happy lives.

Of similar intent, though larger in scope, we at The Acres expect to extend this sense of cooperation to more than just those taking an active role in resident recovery, opting to include the greater population of Edmonton as well. The Acres is not to be simply tolerated, or worse, shunned by the broader community. We cannot have it considered as merely a refuge for the less capable in our society; it is to be a place of favor, a beacon of hope, an addition to the city that Edmontonians can identify with, and look upon with pride. We intend to develop The Acres into an area desired by the greater community of Edmonton, welcoming of all people, regardless of background and affiliation, and not something to be marginalized or avoided. Though born from the devotion to provide service for those in need, The Acres is still to be a public neighbourhood, reflecting the obligation to cater to the general public as well. Supplementary to the housing and associated services local to The Acres, we plan to develop public walking trails, picnic sites, and other associated infrastructure pertinent to the inclusion and welcoming of peoples visiting the community. As such, we would include signage and orientations so that those passing through may be privy to our principles, our mission, and our expectations of those visiting – in relation to sobriety and respect of our residents. Furthermore, we will plan to host public events, embracing all people yearning for a sense of community and connectedness, such as theatre, outdoor concerts, or any others of a myriad of public engagements. Through involvement of those external to The Acres we expect to foster connections to the larger community, granting greater understanding of the hardships endured by those in the community, thus, potentially abating the stigmatization associated with mental health concerns and substance abuse. Finally, we hope to develop a system in which we can register and welcome members of the greater Edmonton community to take part in our garden projects. That considered, we would anticipate those interested to undergo appropriate orientation and education, to ensure they are comfortable and confident in being an ally to those living in the community.

Aside from developing systems to collaborate on both an individual and organizational basis, we at The Acres also recognize the advantage that could be realized by maintaining longitudinal collaboration as well. An aspect of the program that we believe would be imperative to its success is the preservation of relationships with those that have ‘graduated’ from The Acres community. We view The Acres as more than a treatment program, it can also be a support that others can count on from the moment they are welcomed, but then conceivably the relationship is never severed. It can be a community that they will never truly lose connection to, unless they truly desire just that. Though grossly generalized, the benefit of maintaining ties is two-fold. For one, past residents will always have the ability to rejoin The Acres community if they ever find themselves at risk of relapse. Secondly, those that have successfully moved on from The Acres will be able to serve as liaisons and supports for those currently undergoing the program. Through being able to empathize with their current experiences, former clients will be able to sponsor current residents and guide them down paths that they themselves found pertinent during

their journey. Though in the preliminary stages of its development, the collaborative programs at The Acres will promote an atmosphere in which residents feel supported and capable of finding their own way back to health and sobriety.

### **Other Services**

Though critical to the success of The Acres community, that which may be characterized as housing is not the only aspect of infrastructure that needs to be considered. Literature has shown that neighbourhood satisfaction may mediate the association between perceived environmental characteristics and measure of mental health in adults; such characteristics include aesthetics and greenery, access to services, and services which positively correlate with good mental health status.<sup>13</sup> At The Acres we will endeavor to include a variety of lifestyle services which will afford occupants access not only to that which benefits their mental health and addiction directly, but the rest of their well-being holistically. The largest building we will hope to include within The Acres community will be a neighbourhood hall/community centre. Ideally multifaceted, the community centre would offer a place for residents to meet and discuss current events, propose change, and generally meet to speak their minds. Furthermore, the centre would be equipped with the means to host events and classes such as sports and arts programs. Research has shown that sustained, meaningful activities, supportive social networks, and new identities, play a key role in the cessation of substance use.<sup>14</sup> On a related note, space permitting, we would also prioritize a physical fitness centre within the community centre. Multimodal exercise has proven to improve depression, stress symptoms, and quality of life outcomes.<sup>15</sup> Other lifestyle services to include may be places(s) of worship, a coffee shop and/or restaurant, and a community kitchen. Clearly not an exhaustive list, we will expect to explore the topic of lifestyle services fully with appropriate stakeholders as the development of The Acres community moves forward.

Regarding services that may be viewed as more integral to the recovery process at The Acres, we would expect to include specialized services that most directly contribute to one's health and way of life, both physically and mentally. Likely an adjunct to the community centre, we will plan to include adequate space for health services such as a pharmacy, clinic(s), and areas for counseling/therapy. We also believe it would be in our best interest to have a labor office that may facilitate job searches and assorted vocational training services. Recognizing that many of the residents at The Acres might have limited job experience and ability, it would be prudent to provide resources effective to facilitating career advancement as they overcome their own unique challenges. We would propose to establish a food market and general store so that tenants need not leave for life necessities, simple goods, and materials. We fully expect some degree of manipulation regarding what types of services will be offered and available to The Acres community, largely depending on capital and that which is presumed most important by the appropriate shareholders. That considered, we expect The Acres to offer more than that which would be deemed needed for residents to simply get by, and rather, enough to confer happiness and health lasting much longer than their time within the community.

One service, however, that we believe would be paramount to include within The Acres development would be the inclusion of an onsite detox facility. By nature of this effort, many of

those looking to enter the community will have recently been in contact with substances; additionally, there may be those already living within the community undergoing moments of weakness and relapse to their own particular vice. Though exact numbers are challenging to ascertain, a survey of the literature points to an overall relapse rate of 40-60% for those recovering from substance use disorder.<sup>16</sup> These numbers are rather astounding, disheartening, and painful to swallow. Though we aspire to mitigate this disparity to the fullest extent, we must remain cognizant and realistic that systems must be in place to account for this issue until it can be remediated. That being said, the road to treatment – never mind the road to recovery – is not so simple a trek. It is one rich in structure and impediment, but ultimately worthy of being a formidable endeavor. The incorporation of an onsite detox facility would diminish real barriers to the initiation of treatment and facilitate transition for prospective and current patients alike. Research has cited that lack of available detox services is a significant barrier for those suffering from substance use; furthermore, the stigma associated with being diagnosed with substance use disorder (SUD) or receiving detox services remains at large.<sup>17</sup> As a community, we would be able to extinguish the latter given the shared perspectives and experiences had by those living at The Acres. There would be no reason to expect stigma to last when all occupants are in the same boat. Similarly, we could expect that some of our tenants will be reluctant to divulge moments of relapse, given their fear of being forced to leave The Acres. Honesty in this case could be perceived as a step towards possibly reverting to homelessness. It must be quite apparent to those entering The Acres that this is not to be a concern. While we will never accept or tolerate substance use at The Acres, we recognize that to be stronger, sometimes the muscle has to tear first. We must strive to foster a self-sufficient process of recovery, not to stifle it. Other prevailing issues pertaining to substance use treatment and access to detox facilities include inadequate funding, but simple transport and distance to facilities has also been found to be a significant factor.<sup>18</sup> Patients, it seems, frequently are unable to reach potential treatment options as they lack the resources for public transit, their cars are broken down, or any other of a myriad of possibilities often faced by those in lower socio-economic status. Obviously this is a compelling argument for the inclusion of an onsite facility, given that such services within The Acres would greatly limit the barriers discussed.

The possibility of an onsite detox facility brings with it a new subject of contention: does an entirely sober community confer more benefit or detriment to its occupants? For many years arguments have been ventured on either side, contending whether it is in the patient's best interest to remove all vices from their lives, or to show compassion through harm reduction and the understanding. Is there a recognition, rather than vilification, that to relapse is to be human? While in many instances a powerful argument can be made that harm reduction may be the best option, for instance programs that have been deployed in relation to opioid and related substances use, we aspire to have The Acres be an entirely sober, and dry community.<sup>19</sup> In theory, the existence of a sober community could pose additional challenges to its occupants, whether that be through the stigmatization of those going through relapse, or the shame associated with having to leave if one cannot maintain. That considered, we are confident that the resources and support that will be present at The Acres to be more than sufficient to help those in their time of darkest need. Though inevitably difficult for those trying to find their way along the road to recovery, we predict the best outcomes to be attainable if the community remains dry. A look at

the existing literature shows that social networks containing less substance use had better outcomes overall, but sober living in particular led to significant improvements in psychiatric severity and avoidance of future arrests.<sup>20</sup> Indeed, when compared to their counterpart, sober living houses are associated with increased odds of employment and higher job retention.<sup>21</sup> We recognize the inherent hardship our residents will endure as they attempt to traverse a new community, with new people, with a new way of life, and the degree to which this may be exacerbated by the strict parameters in place at The Acres. Nonetheless, the community will be there for its residents in perpetuity, and we are confident in our ability to develop a system capable of accomplishing substantial change.

Lastly, with regard to the general infrastructure of The Acres community, at this time we are unable to assess the viability of the option, but we have hopes – to some degree – to include a means of renewable energy for the sake of the community. Recognizing that most options within the industry – geothermal, biogas, wind, etc. – are unrealistic for such a small endeavor, one option that could be viable, even to a limited extent, would be solar. Though understandably The Acres community would not be able to derive all its power from solar alone, the opportunity to offset costs would result in significant value in the long term. If the potential for adding renewable energy to the grid exists, we would likely look to install panels onto buildings as the project is getting developed. Necessarily, such an endeavor would result in building development appropriately researched to ensure sufficient solar radiation would be available and absorbed. Based on current literature, we could expect that building roofs with correct orientations to allow the collection of solar energy can make significant contributions to reducing CO<sub>2</sub> emissions.<sup>22</sup> Though a cost-to-benefit analysis will assuredly have to be undertaken to assess feasibility, we are hopeful that as a community we will be able to do our part, in terms of eco friendly living, in addition to our role in the fight against substance use disorder, and for wellness.

## **The Garden**

While a critical component of community infrastructure, aspects of the community garden will not be exhausted in this section of the report given the degree to which it has been touched on in others. That being said, that which the garden stands for, and to which we are working towards as a community can never be spoken of enough. It is not simply that gardening is the route to recovery; if only it were that simple. Rather, at The Acres we aspire to trace the path of auspicious organizations that have come before, and to tailor our agricultural village into a community devoted to relapse prevention/treatment and self-help. Organizations around the world – The River Garden in Scotland, San Patrignano in Italy, Basta in Sweden, and Delancey Street in the USA – have successfully employed programs centered around the idea of self-help and social enterprise. At The Acres, the purpose of the garden is not to keep people busy, nor is it to profit off the labor of others. Rather, it is a means by which the residents may learn real-life skills, regain self-esteem, and develop a novel sense of self, capable of choosing and acting appropriately to lead a long and healthy life. Intentional labour offers intellectual challenge, the fostering of new relationships, and overall gives us a better understanding of what is necessary to do good in our lives, not only for ourselves, but for others. Through a system built on the notion

of self-help, we will plan to give those who come to The Acres the tools necessary to enact change in their lives. It will be up to them, however, to use those tools to the best of their ability.

## References

1. Simpson, D. D., Joe, G. W., Fletcher, B. W., Hubbard, R. L., & Anglin, M. D. (1999). A national evaluation of treatment outcomes for cocaine dependence. *Archives of General Psychiatry*, *56*(6), 507-514.
2. Hser, Y. I., Grella, C. E., Hubbard, R. L., Hsieh, S. C., Fletcher, B. W., Brown, B. S., & Anglin, M. D. (2001). An evaluation of drug treatments for adolescents in 4 US cities. *Archives of general psychiatry*, *58*(7), 689-695.
3. Simpson, D. D., Joe, G. W., & Brown, B. S. (1997). Treatment retention and follow-up outcomes in the Drug Abuse Treatment Outcome Study (DATOS). *Psychology of Addictive behaviors*, *11*(4), 294.
4. Becker, W. C., Fiellin, D. A., Gallagher, R. M., Barth, K. S., Ross, J. T., & Oslin, D. W. (2009). The association between chronic pain and prescription drug abuse in Veterans. *Pain Medicine*, *10*(3), 531-536.
5. Shipherd, J. C., Stafford, J., & Tanner, L. R. (2005). Predicting alcohol and drug abuse in Persian Gulf War veterans: what role do PTSD symptoms play?. *Addictive behaviors*, *30*(3), 595-599.
6. Greenfield, S. F., Cummings, A. M., Kuper, L. E., Wigderson, S. B., & Koro-Ljungberg, M. (2013). A qualitative analysis of women's experiences in single-gender versus mixed-gender substance abuse group therapy. *Substance use & misuse*, *48*(9), 750-760.
7. Greenfield, S. F., Brooks, A. J., Gordon, S. M., Green, C. A., Kropp, F., McHugh, R. K., ... & Miele, G. M. (2007). Substance abuse treatment entry, retention, and outcome in women: A review of the literature. *Drug and alcohol dependence*, *86*(1), 1-21.
8. Whitla, D. K., Orfield, G., Silen, W., Teperow, C., Howard, C., & Reede, J. (2003). Educational benefits of diversity in medical school: a survey of students. *Academic Medicine*, *78*(5), 460-466.
9. Zaidi, U. (2020). Role of social support in relapse prevention for drug addicts. *International Journal of Innovation, Creativity and Change*, *13*(1), 915-24.
10. Mericle, A. A. (2014). The role of social networks in recovery from alcohol and drug abuse. *The American Journal of Drug and Alcohol Abuse*, *40*(3), 179-180.
11. Proulx, K. E., Hager, M. A., & Klein, K. C. (2014). Models of collaboration between nonprofit organizations. *International Journal of Productivity and Performance Management*.
12. Alderwick, H., Hutchings, A., Briggs, A., & Mays, N. (2021). The impacts of collaboration between local health care and non-health care organizations and factors shaping how they work: a systematic review of reviews. *BMC public health*, *21*(1), 1-16.
13. Leslie, E., & Cerin, E. (2008). Are perceptions of the local environment related to neighbourhood satisfaction and mental health in adults?. *Preventive medicine*, *47*(3), 273-278.

14. Landale, S., & Roderick, M. (2014). Recovery from addiction and the potential role of sport: Using a life-course theory to study change. *International Review for the Sociology of Sport*, 49(3-4), 468-484.
15. Atlantis, E., Chow, C. M., Kirby, A., & Singh, M. F. (2004). An effective exercise-based intervention for improving mental health and quality of life measures: a randomized controlled trial. *Preventive medicine*, 39(2), 424-434.
16. Volkow, N. D. (2010). Drugs, brains, and behavior: The science of addiction. Retrieved on April 4(2022), 255-169.
17. Schultz, N. R., Martinez, R., Cucciare, M. A., & Timko, C. (2016). Patient, program, and system barriers and facilitators to detoxification services in the US Veterans Health Administration: A qualitative study of provider perspectives. *Substance Use & Misuse*, 51(10), 1330-1341.
18. Pullen, E., & Oser, C. (2014). Barriers to substance abuse treatment in rural and urban communities: counselor perspectives. *Substance use & misuse*, 49(7), 891-901.
19. Hawk, K. F., Vaca, F. E., & D'Onofrio, G. (2015). Focus: Addiction: Reducing fatal opioid overdose: Prevention, treatment and harm reduction strategies. *The Yale journal of biology and medicine*, 88(3), 235.
20. Polcin, D. L., Korcha, R. A., Bond, J., & Galloway, G. (2010). Sober living houses for alcohol and drug dependence: 18-month outcomes. *Journal of substance abuse treatment*, 38(4), 356-365.
21. Mericle, A. A., Mahoney, E., Korcha, R., Delucchi, K., & Polcin, D. L. (2019). Sober living house characteristics: A multilevel analyses of factors associated with improved outcomes. *Journal of substance abuse treatment*, 98, 28-38.
22. Ghosh, S., & Vale, R. (2006). The potential for solar energy use in a New Zealand residential neighbourhood: a case study considering the effect on CO2 emissions and the possible benefits of changing roof form. *Australasian Journal of Environmental Management*, 13(4), 216-225.