

# Treatment Outcomes

Demonstrating the Effectiveness and Scalability of our **Adaptive Care Model**®



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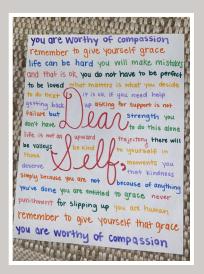
# Contents

### Introduction

Client Testimonial	1
Effect Size and Demographics	3
2021 Outcomes Data and Analysis	
Eating Disorder Symptoms	4
Quality of Life	5
Anxiety Symptoms	6
Emotion Regulation	7
Depression Symptoms	7
Trauma-Related Symptoms	8
Exercise	9
Self-Compassion	10
2021 Perception of Care Results	
Overall Perception of Care	11
LGBTQ + Perception of Care	11
Virtual Perception of Care	12

During my time at Alsana Amare, the staff created a space of safety and solace. From the moment I walked in the door, I went from feeling overwhelmed and alone in my recovery to feeling the deep relief of being supported and cared for. The time I spent there was some of the most healing time of my life, and I will never forget the critical role it played in my recovery. The Alsana staff showed me so much compassion that it gave me permission to being showing myself compassion again too."

- ALSANA CLIENT, Santa Barbara



# Alsana Client Testimonial "They made me feel like I was worthy of support."

Submitted by Alsana Westlake Alumna Tabitha, 31 (she/her)



My name is Tabitha. I love my job working in a level 1 trauma hospital and hope to pursue nursing school in the fall. I also love my family (and have the best nieces in the world!). I am outgoing,

sometimes loud, but

definitely fun. Having struggled with chronic illness in my 20s before eventually getting help, I'm very passionate about helping and advocating for others. Overall, my life is a beautiful ride. It hasn't always been this way; it took a lot of work, and I couldn't have done it without Alsana.

Before Alsana: Hopeless. Failure. Bleak. Weak. Death

I had just turned 29 when I entered Alsana Westlake's eating disorder treatment program. Two months prior, I had a very bad experience in another program that ultimately resulted in my having to leave treatment.

I was afraid to try again, but in the short time between leaving the first program and ultimately deciding to call Alsana, my body and certain events showed me I needed to return to treatment - and quickly. I had lost my job and my apartment. I was losing friends. I felt tired and weak and found myself snapping at everyone.

The biggest red flag was when I yelled at my fiveyear-old niece. I never yell at my nieces. I will never forget her little eyes filling up with tears. I had become someone I did not recognize. I felt like I was losing everything, including myself. My thoughts of self-harm intensified and I even began acting on some of them because I couldn't accept my body, and I couldn't handle how I felt about that. In February 2020, I went to Disney World with my best friend and realized: I am the most depressed person, in the happiest place. My friend wanted to try all this Mickey Mouse-shaped food and I couldn't take in the magic. I was so anxious and depressed while my friend had no idea that I hated myself. It was at this moment I knew I needed to do something. I called Alsana almost immediately upon returning home and was in treatment about a week later. **Let's go!** 

### Choosing to Get Help: Nervous, Growth, Thankful, Anxious, Fearful

Alsana Westlake was extremely different from anywhere else I had been. I was treated like a human being - not a patient. They saw me as a whole person who was trying - just like everyone else - to get through life.

It took me about two weeks to adjust. It was hard to trust the fact that I was safe and accept that struggling is a natural part of the process. Somewhere along the line, though, it clicked: the staff were really on my side. They were for me and not against me. They sat with me when I would scream (because trust me, I did). They sat with me when I would cry, and when I was angry. They never gave up on me. They became my team instead of my enemy. They made me feel like I was worthy of help. On hard days (and there were quite a few) I knew I had support.

I have always held onto something my Dietitian said to me at the time that got me through recovery - "you can feel your feelings but you still need to eat." I really liked it when I got to work with the chef to prepare meals for the house. It helped me get over my fear of cooking and being in the kitchen. All the staff genuinely cared. ALL of them. Even the Nurses that worked at night. Alsana exceeded my expectations. Their approach worked for me. "I think it's great that their Adaptive Care model addresses ALL life's needs and doesn't leave anything out."

# Alsana Client Testimonial (cont.) "They made me feel like I was worthy of support."

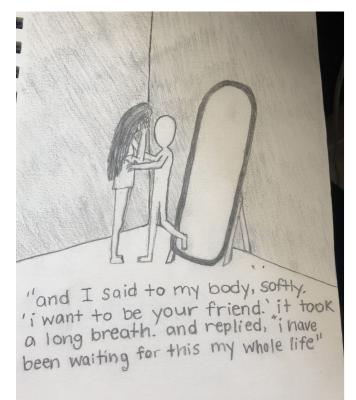
There were times I wanted so badly to quit but I will never forget the people who helped me help myself, the staff that walked alongside me when things were hard. They saved my life, and I'm still in touch with many of them. I'm also still in touch with a friend I met in treatment and we support one another in recovery.

### Since then... Supported. Thankful. Blessed. Motivated. Strong.

This brings us to the beautiful ride that is my life after treatment. It was a scary mess at first, but two years later, I am so thankful for my treatment experience because I know it saved my life. I have so much more now than I ever could have before treatment. I am living the most fulfilled life I can. I work full time in the nursing field (which has a lot to do with the nurses I met in treatment). I have the best lunch dates with my nieces, I cook in my own kitchen, and I can go out with friends and still feel good about myself.

I recommend Alsana to everyone who needs a place to heal because if they can change MY life (I am a hard nut to crack) I know they can help others. I think the most common misconception about eating disorders is that you can "just eat" and you'll be fine. That is completely inaccurate. Another one is "only skinny people can have eating disorders," when in fact most people with eating disorders are at or above "normal" weight. There are so many things people get wrong about eating disorders, and I'm glad I'm now able to help raise awareness.

Before I went into treatment I would write messages on my mirror that said how "awful" I was or "ugly" I looked. But now, I see myself as someone strong and beautiful. Someone positive and worthy. Someone with goals and dreams. I was in a dark place before finding the Alsana community but the support I found there saved my life. To anyone out there struggling with an eating disorder I would say you are worth recovery. Stop comparing yourself to the internet versions of "eating disorders" and questioning if you are "sick enough." There's so much more to life than your eating disorder. You deserve joy, freedom, hope, and happiness. You deserve a life that's not ruled by fear or anxiety. It's ok to be scared; you just have to trust that recovery is possible and that you're worthy of all the help you need to achieve lasting recovery.



Artwork by Tabitha, words by the poet Rupi Kaur

# Effect Size and Demographics

Effect size is used to evaluate the strength of a statistical claim. In other words, it is a value which allows you to see how much your independent variable has affected the dependent variable in an experimental study. We use effect size throughout this booklet to describe the significance of symptom changes in 2021. Larger effects sizes indicate a greater change in the outcome variable. Effect sizes between 0.01 - 0.05 indicate a small effect, while values between 0.06 - 0.13 indicate a medium effect, and values greater than 0.14 indicate a large effect. The chart below uses effect size to quantify various eating disorder symptom changes from admission to discharge.



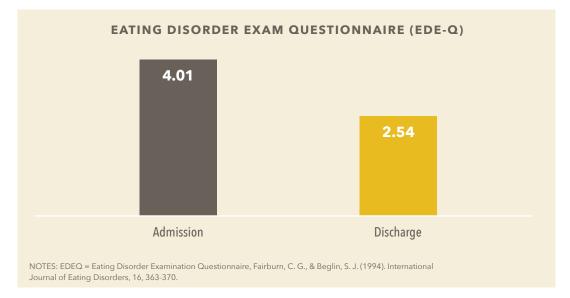
### **DEMOGRAPHICS OF CLIENT SAMPLE**

SAMPLE SIZE		LENGTH OF STAY (DAYS)				TIME PERIO	D	
657 Clients		38 Residential	40 PHI			2021		
GENDER IDENTIT	TY SEXUA	SEXUAL ORIENTATION			MARITAL STATUS ED		UCATION	
85.8% of clients identify as female	38% identify as LGBTQ-	iden	2% tify as osexual	67.2% Single/never married		34.7% had attended college	36.8% were students while in treatment	
EMPLOYMENT	ETHN	ETHNICITY		INSURANCE FAM		HISTORY	AGE	
35.9% Unemployed		<b>9%</b> asian	<b>97.8</b> Insur	sured Biolog		<b>3%</b> Il relative an ED	27.33	
	EATING DISORDER DIAGNOSES*							
	60.9% 10.0% AN BN		<b>4.7</b> BEI	1 <b>-</b>	1.7% ARFID	22.7% OSFED		

#### These are demographic data for 2021.

\* Anorexia Nervosa - Restricting type; Anorexia Nervosa - Binge-eating/purging type; Bulimia Nervosa; Binge Eating Disorder; Avoidant/Restrictive Food Intake Disorder; and Other Specified Feeding or Eating Disorder

# **Eating Disorder Symptoms**



Alsana utilizes the Eating Disorder Exam Questionnaire (EDE-Q), a psychometrically sound and empirically validated instrument, to evaluate improvement in clients' eating disorder symptoms from admission to discharge.

### **Example questions include:**

- "Have you had a definite fear of losing control over overeating?"
- "Trouble concentrating on other activities like work?"
- "How many days have you eaten in secret?"
- "How often do you feel guilty after eating?"
- "Do you have a desire for a totally flat stomach?"

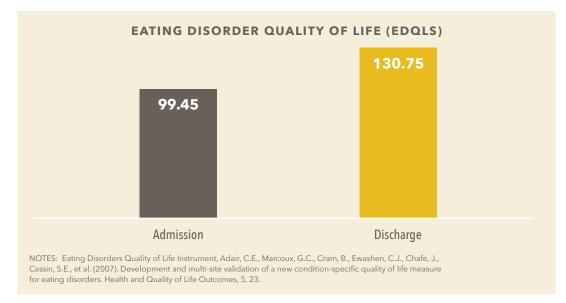
The EDE-Q Global Score provides an overall measure of eating disorder psychopathology. Survey respondents in 2021 demonstrated statistically significant improvement in eating disorder symptoms on the EDE-Q (p<.001) with an effect size of .501.

Alsana has been an exceptional program for me and many others, and the staff was phenomenal support. I got the help I needed in a kind and compassionate manner. I have gained so much knowledge and insight into the things I struggle with, and have been able to put those to work in my daily life in recovery!"



- ALSANA CLIENT, Birmingham

# **Quality of Life**



The Eating Disorder Quality of Life Questionnaire (EDQLS) is utilized to measure the impact of an eating disorder on an individual's quality of life. The EDQLS is a valid and reliable measure of the quality of life for clients in eating disorder recovery, with higher scores indicating better quality of life.

### Sample questions from the EDQLS include:

- "I feel like I don't have a life"
- "My life is full of worry right now"
- "I have lots of rules about food"
- "I feel connected to others"
- "I see positive things in my appearance."

Survey respondents in 2021 demonstrated a statistically significant improvement in quality of life (p<.0001) with an effect size of .563.

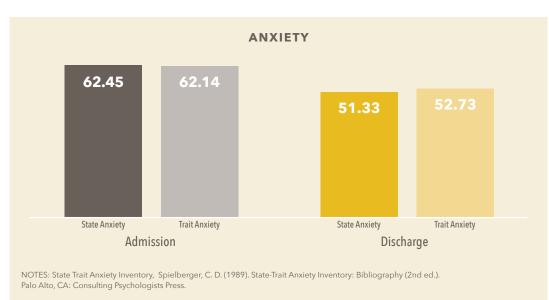
66 I have experienced nothing but great communication and encouragement from Alsana. The treatment center was willing to set up calls with one of my clients to answer questions, address concerns, and bring peace



to a difficult situation. Going through the process of seeking out eating disorder treatment can be so confusing and overwhelming. The Alsana team does all they possibly can in order to reduce fears and help clients feel comfortable.

- DIETITIAN, Referring provider

# **Anxiety Symptoms**



Alsana utilizes State-Trait Anxiety Inventory (STAI) to measure clients' state anxiety and trait anxiety symptom severity.

**STATE ANXIETY:** a transitory emotional state directly related to adverse situations within a specific timeframe.

**TRAIT ANXIETY:** a persistent condition involving a natural tendency towards anxiety that is rooted in an individual's personality.

### **Example questions include:**

### **STATE EXAMPLES**

- "I feel strained."
- "I am presently worrying over possible misfortunes."
- "Lam relaxed."

**TRAIT EXAMPLES** 

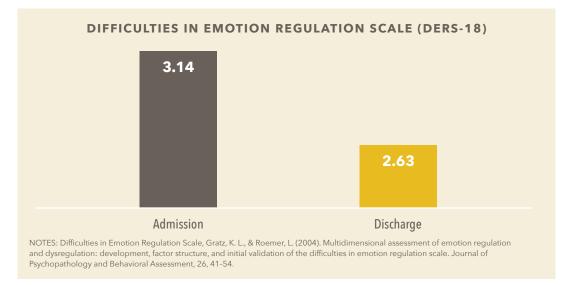
- "I wish I could be as happy as others seem to be."
- "I feel pleasant."
- "I feel like a failure."
- "I have disturbing thoughts."
- "I feel happy."

Survey respondents in 2021 demonstrated statistically significant improvement in State Anxiety scores and Trait Anxiety Scores (p<.0001) from admission to discharge with effect sizes of .392 and .370, respectively.

Alsana was truly meaningful and deeply impactful experience. I am so grateful to the entire staff for their unwavering support and I will remember this place and them forever."



# **Emotion Regulation**



Mood- and emotion-regulation skills represent foundational tasks in eating disorders treatment and lasting recovery. Alsana utilizes the Difficulties in Emotion Regulation Scale (DERS-18) to measure aspects of clients' emotion regulation during treatment. High DERS-18 scores would indicate greater difficulty in mood regulation. Survey respondents in 2021 demonstrated a significant improvement in emotion regulation (p <.001) with an effect size of .297.

# PATIENT HEALTH QUESTIONNAIRE (PHQ-9) 16.06 9.85 9.85 Discharge NDTES: Depression assessed by the PHQ9. Measure development and severity reference groups available at Kroenke et al., (2001). Journal of General Internal Medicine, 16, 606-616.

# **Depression Symptoms**

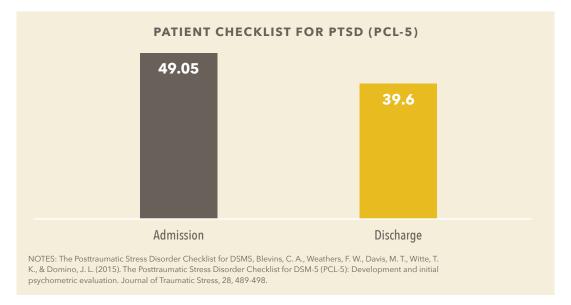
The Patient Health Questionnaire allows us to assess the level of severity of depression more quickly. The PHQ-9 differentiates minimal symptoms of depression from minor depression, major depression, and mild, moderately severe, or severe major depression.

### The survey prompts participants to rate symptom severity on a scale. Example symptoms include:

- "little interest or pleasure in doing things,"
- "trouble falling asleep, staying asleep, or sleeping too much,"
- "moving or speaking so slowly that other people could have noticed."
- "thoughts of self-harm."

Survey respondents in 2021 demonstrated improvement in depression symptoms (p = .051) with an effect size of .234.

# **Trauma-Related Symptoms**



Alsana utilizes the PTSD Checklist (PCL-5) to measure symptoms related to Post Traumatic Stress Disorder.

### **Examples:**

In the last 30 days, to what extent were you bothered by:

- "avoiding memories or thoughts of stressful events?"
- "having strong physical reactions when reminded of stressful events?"
- "trouble remembering important parts of the stressful event?"
- "blame yourself for the stressful event after it happened?"
- "irritable behavior, angry outburst, or acting aggressively?"

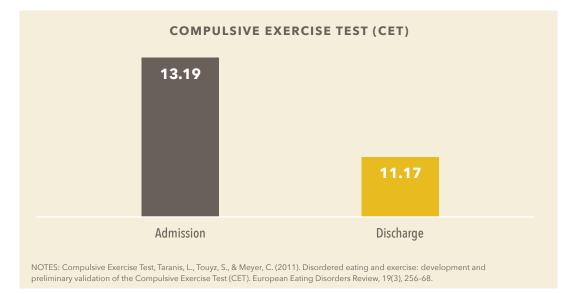
Survey respondents in 2021 demonstrated a statistically significant reduction in PTSD symptoms from admission to discharge (p<.0001) with an effect size of .234.



Alsana saved and changed my life. It's the most trauma informed ED center out there and has such

incredible, informed clinicians (specifically at the Birmingham location I was at). In my experience, they embraced all genders, sexualities, bodies (HAES informed), etc. Even though I came in angry, confused, and stubborn, they stayed with me and let me heal at my own pace without forcing me to be at a place I simply wasn't at the time. They gave me the space, with support, I needed to choose my own recovery; I'm now able to continue heading towards it on my own. I highly recommend Alsana to anyone struggling with an eating disorder who wants to receive compassionate, trauma-informed care."

# Exercise



Alsana utilizes the Compulsive Exercise Test (CET) to assess the core features of excessive exercise in eating disorders. The CET includes a subscale that assesses one's motivations to exercise.

### For example, the CET can help determine if a client exercises:

- ...to control or suppress difficult emotions ...to increase positive emotions
- ...to maintain or lose body weight

### **Example items include:**

- "I exercise to improve my appearance."
- "I feel quilty if I miss an exercise session."
- "If I cannot exercise, I feel anxious."

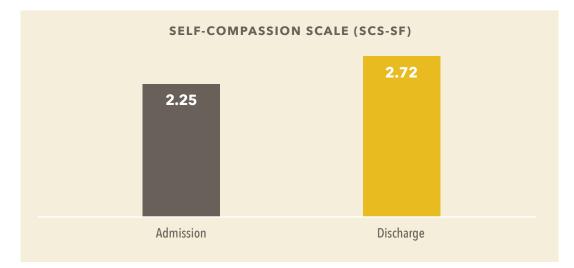
- ... without enjoyment/because they feel like they have to
- "If I feel I have overeaten, I will exercise more."
- "I feel less stressed/tense after I work out."
- Survey respondents in 2021 demonstrated a statistically significant improvement from admission to discharge on the General Compulsivity Global Score (p<.01) with an effect size of .221.

56 I actually feel that I now have the tools and perhaps even the confidence to recover from my ED-for good this time! Thank you to Alsana for helping me get my life back on the right track again. I will remember this place forever."

- ALSANA CLIENT, Monterey



# Self-Compassion



Alsana utilizes the Self Compassion Scale-Short Form (SCS-SF) to measure clients' self-compassion by assessing:

• Self-Kindness

'When I'm going through a tough time, I give myself the caring and tenderness I need'

• Self-Judgment

'I'm disapproving and judgmental about my own flaws and inadequacies')

Common Humanity

'I try to see my failings as part of the human condition'), Isolation (e.g. 'When I fail at something that's important to me, I tend to feel alone in my failure'

- **Mindfulness** 'When something upsets me I try to keep my emotions in balance'
- **Over-Identification** 'When I'm feeling down I tend to obsess and fixate on everything that's wrong'

Improvement in this category was not statistically significant. In 2022, Alsana is taking steps to enhance its current therapeutic approaches (which include Cognitive Behavioral Therapy, Motivational Interviewing, and Dialectical Behavioral Therapy) with the addition of Compassion Focused Therapy (CFT).

Alsana's compassion-focused approach helps clients learn to offer themselves the self-compassion they deserve and to receive compassion from others. This becomes the foundation for the rest of their recovery. Our staff supports clients in imagining what life can be with full and sustained recovery. We help clients to move away from self-blame and shame and towards hope for meaning and fulfillment."

> - HEATHER RUSSO, LMFT, CEDS-S Chief Clinical Officer



# Perception of Care

Alsana's care teams administer Perception of Care Surveys for all clients when they step down to a new level of care or discharge from Alsana, regardless of discharge type. This aids in identifying opportunities for improvement while also providing an opportunity for clients to reflect on their care experience and use their authentic voice.

### Overall, 92% of Perception of Care Survey<sup>1</sup> responses received in 2021 said the respondent "would recommend Alsana to others."

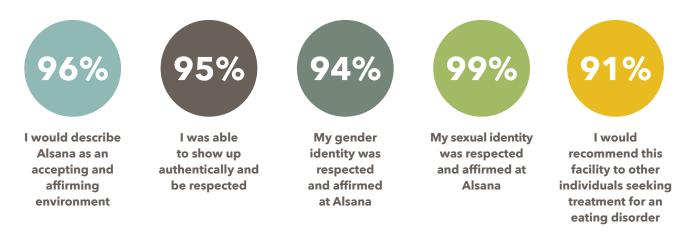
# LGBTQ+ Perception of Care

Statistics show that eating disorders are much more prevalent in the LGBTQ+ community than in the general population.\*

For a space to be truly suitable for healing, it must be more than physically safe and generally respectful. It must be **affirming, intentional, and compassionate** – taking safety and respect to a new level so that those who are most vulnerable get the care and support they need in an environment that is built to meet each unique client where they are in recovery.

**38%** of Alsana clients identify as LGBTQ+

At Alsana, all of our in-person and virtual programs are inclusive, welcoming all genders and sexual orientations. Clients who identify as LGBTQ+ are never segregated. Every client is embraced and appreciated as an integral part of our eating recovery community.



### 2021 LGBTQ+ Perception of Care Survey<sup>3</sup> Results

- <sup>1</sup> N=1371; because Alsana clients are surveyed about PoC when stepping down their level of care and when discharging from programs, the percentages above do not describe a percentage of survey respondents, but the overall results in terms of survey responses received.
- <sup>2</sup> Parker & Harriger, Journal of Eating Disorders (2020) 8:51 https://doi.org/10.1186/s40337-020-00327-y
- <sup>3</sup> N=663; because Alsana clients are surveyed about PoC when stepping down their level of care and when discharging from programs, the percentages above do not describe a percentage of survey respondents, but the overall results in terms of survey responses received.

# Virtual Programs Perception of Care

Alsana's virtual programs, which have served 262 clients since their inception in 2020, enable greater flexibility to accommodate unique client needs and create additional space in Alsana's in-person programs for higheracuity clients for whom virtual programs are not appropriate.



### 2021 Virtual PHP/IOP Perception of Care Survey<sup>1</sup> Results

I felt more love and support here than I've ever felt in my life. This place has become a safe place for me where I feel loved and accepted and like I can be myself. The staff and clients accepted me and supported me for who I was in a nonjudgmental way.

– ALSANA CLIENT, *Birmingham* 





We are grateful to be part of your eating recovery community.

