

Recovery housing occupies a practical and often misunderstood place in Ohio drug addiction treatment. It is not the same as detox. It is not a substitute for clinical care. It is not simply “a place to stay.” At its best, recovery housing gives people a stable, substance-free living environment while they continue the hard work of rebuilding daily life after acute treatment.

That distinction matters in Ohio, where the treatment system is designed around a continuum of care. State law calls for a community-based continuum for opioid and co-occurring drug addiction that includes detoxification, outpatient care, medication-assisted treatment, peer support, residential services, recovery housing, and multiple pathways to recovery. In plain terms, Ohio recognizes that recovery is rarely a single event. A person may need medical stabilization, therapy, medication, peer connection, safe housing, job support, family repair, and time. Recovery housing fits into that broader picture by helping bridge the gap between structured treatment and fully independent living.

For families, the idea can be confusing. Someone completes residential treatment and then says they are moving into recovery housing. A parent may wonder, “Didn’t treatment already happen?” A spouse may ask whether recovery housing is just another name for rehab. A probation officer, employer, or physician may see the term and need clarity about what kind of support the person is actually receiving.

The answer depends on the level of care, the home’s standards, and the person’s clinical needs. But the central idea is straightforward: recovery housing provides a living environment that supports sobriety and accountability while the person continues care, builds routines, and practices recovery in real life.

Where recovery housing fits in Ohio’s continuum of care

Ohio’s addiction treatment framework includes several connected services rather than one isolated intervention. A person with drug addiction may begin with detoxification if withdrawal creates medical or safety concerns. From there, they may enter residential treatment, intensive outpatient treatment, non-intensive outpatient services, medication-assisted treatment, peer support, or a combination of these.

Recovery housing is part of that same continuum, but it serves a different role from clinical treatment. Treatment addresses substance use disorder through professional services such as assessment, therapy, medical care, medication when appropriate, and structured programming. Recovery housing addresses the living environment. It gives people a place where sobriety is expected, recovery activities are normalized, and daily decisions happen around others pursuing similar goals.

That environmental piece is not minor. Many people leave treatment with motivation and insight, only to return to the same apartment, the same street, the same relationship conflict, or the same loneliness that fueled use before. Treatment may help a person understand cravings, trauma, relapse warning signs, and coping skills. Recovery housing creates space to use those skills repeatedly, in ordinary situations: waking up on time, getting to appointments, paying bills, handling stress after a difficult phone call, avoiding old contacts, and learning how to sit through discomfort without returning to drugs.

The transition from residential care to independent living can be abrupt. In residential treatment, meals, schedules, groups, clinical contacts, and peer interactions are built into the day. At home, structure can disappear overnight. Recovery housing softens that landing. It usually offers more independence than residential treatment but more support than living alone.

Ohio’s inclusion of recovery housing in the continuum is important because it reflects how recovery often unfolds. People do not always move neatly from detox to residential treatment to outpatient treatment to

permanent stability. Some step down gradually. Some return to a higher level of care after relapse or a mental health setback. Some use medication-assisted treatment while living in recovery housing. Some need peer support and outpatient therapy more than they need another residential admission. Multiple pathways are not a slogan in this context. They are a recognition that people recover with different combinations of support.

Recovery housing is not detox, inpatient rehab, or outpatient treatment

The most common misunderstanding is that recovery housing itself is drug addiction treatment. It may be connected to treatment. It may require residents to participate in treatment or recovery activities. It may coordinate with providers. But the house is not the clinical service.

Detoxification focuses on withdrawal and medical stabilization. For some substances, withdrawal can be physically dangerous. For others, it can be intensely uncomfortable and increase relapse risk. Detox is typically short-term and medically focused. Recovery housing does not replace that function.

Residential or inpatient rehab provides structured clinical programming in a treatment setting. Ohio providers that deliver substance use disorder treatment must be certified by the Ohio Department of Mental Health and Addiction Services under state law. That certification requirement matters because clinical treatment involves professional standards, documentation, assessment, and care delivery. Recovery housing should be understood separately from those treatment services, even when both are part of the same person's recovery plan.

Outpatient treatment allows someone to receive care while living outside a residential facility. Intensive outpatient services generally involve more frequent programming than non-intensive outpatient services. Medication-assisted treatment may include approved medications combined with counseling and recovery support, depending on the person's needs and the provider's approach. Peer support adds lived-experience guidance from people trained to help others navigate recovery.

Recovery housing can sit alongside any of these services. A person might live in recovery housing while attending outpatient therapy, participating in medication-assisted treatment, going to peer support meetings, or stepping down from residential care. The home provides the setting. Treatment providers provide the clinical care.

This distinction protects patients and families from false expectations. If someone needs therapy for trauma, medication evaluation, withdrawal management, or treatment for co-occurring mental health symptoms, recovery housing alone is not enough. If someone has completed a residential program but has no safe place to live, outpatient treatment alone may not be enough. The right plan often combines both: clinical services and a recovery-supportive environment.

Why housing stability matters after treatment

People often underestimate how much housing affects recovery. A person can leave a strong treatment program with a relapse prevention plan, a medication schedule, and sincere commitment. If they sleep on a couch where others are using drugs, their risk changes immediately. If they return to a home filled with conflict, untreated mental illness, or easy access to substances, recovery becomes a daily test of endurance.

Housing instability also interferes with the basics of care. It is harder to attend therapy without reliable sleep. It is harder to manage medication without a secure place to store it. It is harder to look for work while moving between temporary arrangements. It is harder to avoid old networks when the only available housing is in the same environment where drug use was routine.

Recovery housing does not remove every risk. Residents still face cravings, grief, legal stress, financial pressure, and relationship problems. But a stable recovery residence can reduce avoidable exposure to substances and chaos. It can also create accountability. If someone misses curfew, withdraws socially, stops attending treatment, or starts reconnecting with high-risk contacts, others may notice sooner than they would if the person lived alone.

There is also a psychological shift that can happen when a person lives with others who are trying to recover. Shame thrives in isolation. In a recovery home, residents may see that early recovery is not glamorous and not linear. Someone else is also rebuilding credit, apologizing to family, applying for jobs, learning how to cook, dealing with court, or sitting through a craving at 9 p.m. That shared experience can reduce the sense of being uniquely broken.

Still, recovery housing requires readiness. It asks residents to live by rules, respect others, remain substance-free, and participate in recovery-oriented routines. Some people welcome that structure. Others resist it, especially if they feel they have already “done treatment” and want immediate independence. Good planning means looking honestly at what the person needs, not what sounds most appealing after a difficult episode of care.

The Ohio context: community-based care and multiple pathways

Ohio’s approach to addiction care recognizes that opioid and co-occurring drug addiction require a range of community-based responses. The continuum includes ambulatory and sub-acute detoxification, non-intensive and intensive outpatient services, medication-assisted treatment, peer support, residential services, recovery housing, and multiple pathways to recovery.

That breadth is important because addiction rarely travels alone. Many people seeking drug addiction treatment also face depression, anxiety, trauma symptoms, medical problems, family disruption, legal pressure, or employment instability. A narrow plan may miss the conditions that keep substance use active. A broad continuum creates more options, but it also requires careful matching.

Consider a person leaving residential care after opioid addiction treatment. They may be clinically stable, taking medication as part of treatment, and engaged in therapy. Returning to an apartment where they previously used drugs may be unsafe. Recovery housing could provide a sober living environment while they attend outpatient care and rebuild work routines.

Another person may complete detox but still have severe cravings, unstable mood, and no outpatient plan. Recovery housing alone would likely be insufficient. They may need a higher level of clinical care before they can benefit from a less intensive living arrangement.

A third person may have strong family support and safe housing but needs intensive outpatient treatment and medication-assisted treatment. Recovery housing may not be necessary. The point is not that every person needs every service. The point is that Ohio’s continuum allows care to be built around actual risk, strengths, and circumstances.

The phrase “multiple pathways to recovery” also deserves practical respect. Some people rely heavily on clinical treatment. Some lean on peer support. Some use medication-assisted treatment. Some find recovery through faith communities, mutual-help groups, family systems, or long-term therapy. Many combine several supports. Recovery housing should not be treated as proof that someone is succeeding or failing. It is one tool, useful when the living environment is a major recovery factor.

What families should ask before choosing recovery housing

Families often look for recovery housing under pressure. A discharge date arrives. A lease has ended. Home is not safe. Everyone wants an answer by Friday. That urgency can lead to rushed decisions.

A careful review does not need to be adversarial. Reputable programs should expect questions. Families should ask how the residence supports sobriety, how it handles relapse, what expectations residents must meet, and how it coordinates with treatment providers when appropriate. The goal is not to find a perfect house. The goal is to understand whether the environment matches the person's needs.

Here are five practical questions worth asking before a move:

1. What recovery expectations apply to residents, including substance-free rules, meetings, treatment participation, work, school, or daily responsibilities?
2. How does the home respond if a resident relapses, misses curfew, brings substances into the house, or becomes unsafe?
3. Does the residence coordinate with certified Ohio treatment providers, outpatient programs, medication-assisted treatment providers, or peer support services when needed?
4. What are the costs, payment expectations, refund policies, and consequences if a resident loses employment or falls behind?
5. What level of structure is present day to day, and who is responsible for oversight in the home?

The answers reveal more than the brochure. A home that immediately evicts every resident after any relapse may protect the environment, but it can also create dangerous instability if no referral process exists. A home with very loose rules may feel comfortable, but it may not provide enough accountability for someone newly out of treatment. A home that discourages medication-assisted treatment without clinical justification may not fit a person whose treatment plan includes medication. A home that cannot explain costs clearly may create financial stress at the worst possible time.

Families should also listen for tone. Recovery housing should support dignity. Accountability is necessary, but humiliation is not treatment. Rules matter, but so does how staff or house leadership speak about residents. People in early recovery are often sensitive to rejection and shame. A house culture built on fear may achieve short-term compliance while undermining long-term trust.

Medication-assisted treatment and recovery housing

Medication-assisted treatment is part of Ohio's continuum of care for opioid and co-occurring drug addiction. For many people, medication can reduce cravings, lower the risk of return to use, and support engagement in counseling and recovery activities. It is a clinical decision, not a moral shortcut.

Recovery housing should be evaluated carefully when medication-assisted treatment is part of the plan. The key question is whether the living environment supports the person's prescribed care. If a resident is receiving medication through an appropriate provider, the recovery home's policies should not create unnecessary barriers to that treatment. At the same time, homes need reasonable procedures for medication safety, privacy, and accountability.

This can be a delicate area. Some recovery communities historically emphasized abstinence in ways that did not always make room for medications used in addiction treatment. Modern drug addiction treatment has increasingly recognized that medication-assisted treatment can be lifesaving for many people with opioid use disorder. Families and patients should avoid environments that turn a legitimate medical plan into a source of stigma.

There are practical issues too. A resident may need transportation to appointments. They may need secure medication storage. They may need scheduling flexibility around dosing, counseling, or medical follow-up. If the recovery home cannot accommodate those realities, the mismatch can create avoidable risk.

The best approach is direct communication. The resident, treatment provider, and recovery housing program should understand the plan. Privacy laws and consent requirements still apply, but coordination becomes easier when the person agrees to appropriate communication among supports.

The role of peer support

Peer support has a different texture from clinical treatment. A therapist may help a patient process trauma, identify cognitive distortions, or treat anxiety. A physician or qualified prescriber may manage medication. A peer supporter brings lived experience and practical recovery knowledge. They can often say, “I remember what that felt like,” and mean it.

In recovery housing, peer influence is constant. Sometimes it is formal, through trained peer support. Often it is informal, through housemates. This can be powerful. New residents watch people a few months ahead of them navigate cravings, employment, family visits, and disappointment without using drugs. That visibility matters.

Peer influence can also cut the wrong way if the house culture is weak. If residents glamorize old behavior, minimize relapse warning signs, or treat rules as obstacles to evade, the environment becomes risky. A recovery residence is only as strong as its culture and oversight. Families should not assume that a sober address automatically creates sober behavior.

Good peer culture balances honesty and responsibility. People can admit cravings without being judged. They can talk about relapse risk before it becomes relapse. They can receive feedback when their behavior starts drifting. This kind of environment helps recovery become normal rather than performative.

Recovery housing after residential treatment

Residential treatment can provide a protected space away from immediate triggers. Facilities may offer intensive therapy, group work, medical support, and structured days. For example, Recreate Behavioral Health Network identifies its Ohio location, Recreate Behavioral Health of Ohio, also referred to as Recreate Ohio, as being in Gahanna, just outside Columbus. The organization says the Ohio facility offers detox, residential or inpatient rehab, and outpatient treatment, and describes the location as providing a full continuum of care. It also states that the Ohio facility offers primary mental health services in a residential treatment setting.

That kind of continuum can be valuable because many patients need step-down planning rather than a sudden stop. A person may complete detox and residential treatment, then continue outpatient care while living in a recovery-supportive environment. The clinical services and the housing support different parts of recovery.

Recreate also states that treatment at its Ohio facility may include approaches such as cognitive behavioral therapy, dialectical behavior therapy, EMDR, medication-assisted treatment, individual therapy, group therapy, family therapy, and couples therapy. It also describes holistic supports that may include yoga and mindfulness, art therapy, adventure therapy, equine therapy, Reiki, acupuncture, chiropractic care, fitness and wellness activities, and nutrition education.

Those services should be understood as treatment offerings or supports within the facility’s described care model, not as a definition of recovery housing itself. Recovery housing may come after or alongside care, depending on the person’s plan. The important clinical question is how the person moves from one level of support to the next without losing momentum.

Discharge planning should begin before the last day of residential treatment. Waiting until the final afternoon creates unnecessary risk. The patient may feel optimistic and insist they can go home, while the clinical team sees unresolved triggers. Or the family may push for recovery housing without considering whether the person needs more treatment first. Good planning looks at recent substance use history, withdrawal risk, psychiatric stability, family environment, transportation, work obligations, legal requirements, medication needs, and willingness to follow house expectations.

Co-occurring mental health needs

Many people seeking help for drug addiction also need care for mental health symptoms. Anxiety, depression, trauma, mood instability, and sleep disturbance can all complicate recovery. Sometimes substance use began as an attempt to manage emotional pain. Sometimes drug use worsened symptoms that were already present. Either way, untreated mental health needs can make recovery housing harder to sustain.

A recovery home is not a psychiatric hospital and should not be expected to function as one. If a person is actively suicidal, psychotic, medically unstable, or unable to manage basic safety, they need a more appropriate level of clinical care. But recovery housing can support people with co-occurring needs when they are stable enough for that setting and connected to treatment.

The practical question is whether the person can participate in the home's expectations while following a mental health treatment plan. Can they attend appointments? Can they take medications as prescribed? Can they communicate when symptoms worsen? Can the home respond appropriately if a resident becomes distressed?

Families sometimes focus only on drug use and miss the mental health pattern underneath. A person may relapse after panic attacks, insomnia, trauma reminders, or relationship conflict. If those triggers are predictable, the recovery plan should address them directly. Housing stability helps, but it cannot replace therapy, medication evaluation, or crisis planning when those are needed.

OARRS and safer prescribing in Ohio

Ohio's OARRS system is the statewide electronic database for controlled-substance dispensing information. It is used to support safe prescribing and help connect people at risk of substance use disorder to resources. While families may not interact with OARRS directly, they should understand why systems like this exist.

Drug addiction treatment often intersects with legitimate medical care. A person may have pain, anxiety, sleep problems, dental procedures, injuries, or surgeries. Controlled substances can carry risk for people with a history of substance use disorder. A monitoring system helps prescribers see controlled-substance dispensing patterns and make safer decisions.

This does not mean people in recovery should be denied appropriate medical treatment. It means prescribing requires care, communication, and awareness. A resident in recovery housing who receives a controlled medication after an injury, for example, may need a plan that includes the prescriber, treatment team, and safe medication handling. The goal is not punishment. The goal is risk reduction.

Families can support this by encouraging honesty with medical providers. Hiding addiction history from a dentist, surgeon, or primary care physician can lead to avoidable exposure. On the other hand, disclosing recovery status allows providers to consider alternatives, limited quantities, closer monitoring, or coordination with addiction treatment professionals when appropriate.

When recovery housing may be the wrong fit

Recovery housing can be helpful, but it is not always the right placement. Some people need more clinical structure. Others have enough support at home and may do well with outpatient treatment. Some are unwilling to follow basic expectations and may use the house only to appease family or court. A poor match can frustrate everyone and increase risk.

Recovery housing may not be appropriate when a person needs medically supervised detoxification, has severe unmanaged psychiatric symptoms, cannot remain safe in a shared living environment, or refuses any recovery-related accountability. It may also be a poor fit if the house's policies conflict with the person's legitimate treatment plan, including medication-assisted treatment.

There is also the issue of timing. Immediately after detox, some people are still too unstable for a lower-structure environment. After residential treatment, others may be ready. A person who has already built months of stability may find recovery housing unnecessarily restrictive unless they need the community or accountability. The decision should be individualized.

One edge case comes up often: the person who looks stable in treatment but has no safe home. They may not meet criteria for continued residential care, yet returning home is clearly risky. Recovery housing can be especially useful here because the main problem is not a need for 24-hour clinical programming. The main problem is exposure, isolation, and lack of structure.

Another edge case involves family homes that are loving but emotionally charged. Parents may be sober, supportive, and committed, yet the household history includes years of fear, lying, overdoses, anger, and exhaustion. Moving back home can reactivate old roles quickly. Recovery housing can create breathing room while family therapy or relationship repair begins.

What residents actually practice in recovery housing

The visible part of recovery housing is the address. The deeper work happens in habits. Residents practice showing up when no one feels like showing up. They practice telling the truth about cravings before the situation becomes urgent. They practice tolerating boredom, conflict, and disappointment.

A person who has spent years organizing life around drugs may need to relearn ordinary routines. Grocery shopping can feel unfamiliar. A quiet evening can feel threatening. A paycheck can become a relapse risk if there is no plan for money. A phone notification from an old contact can unsettle an entire day. Recovery housing creates a setting where these moments are less likely to happen in isolation.

The work is rarely dramatic. It looks like getting to outpatient treatment on time, taking prescribed medication correctly, applying for work, cleaning a shared kitchen, calling a sponsor or peer support, attending family sessions, and going to bed instead of chasing chaos. These tasks may sound simple to someone outside addiction. For a person rebuilding after drug addiction, they can represent major neurological, emotional, and social change.

There is dignity in that repetition. Recovery becomes less about a single promise and more about hundreds of small kept commitments.

A practical way to think about levels of support

Families often ask whether their loved one needs detox, residential treatment, outpatient care, or recovery housing. The better question is, "What risks are present, and what support matches those risks?" The answer may change over time.

A simplified way to think about the fit looks like this:



| Need or risk | Service that may be relevant | |---|---| | Withdrawal symptoms or medical instability | Ambulatory or sub-acute detoxification, depending on severity | | Need for structured clinical care | Residential treatment or intensive outpatient treatment | | Ongoing opioid use disorder treatment needs | Medication-assisted treatment, when clinically appropriate | | Need for lived-experience guidance | Peer support and recovery community involvement | | Unsafe or unstable living environment | Recovery housing as part of the care plan |

This comparison is not a diagnosis or placement tool. It is a starting point for discussion with qualified professionals. A person may have several needs at once. Someone can need medication-assisted treatment, outpatient therapy, peer support, and recovery housing simultaneously. Another person may need detox before any of those supports will be effective.

The most effective plans are flexible. If the person struggles in recovery housing, the response should not be limited to blame. The team should ask whether the level of care is adequate, whether mental health symptoms are undertreated, whether the house is a poor fit, whether medication needs review, or whether external stressors have changed.

The family's role without taking over

Families walk a narrow path. Too little involvement can leave the person isolated. Too much involvement can recreate dependence and conflict. Recovery housing can help by shifting some accountability away from the family system and into a structured community, but families still matter.

The healthiest family role is supportive, informed, and boundaried. That means asking about the plan, encouraging treatment participation, respecting house rules, and avoiding rescue patterns that shield the person from normal consequences. It also means recognizing that recovery belongs to the person, not the family.

Money is a common pressure point. If relatives pay for housing, they should understand the terms and decide what they will and will not cover. Paying rent directly to a program may be different from giving cash to a resident. Covering basic needs may be helpful. Funding avoidance, secrecy, or repeated rule-breaking usually is not.

Communication also needs adjustment. Families may want daily reassurance. The resident may feel monitored and resentful. A predictable rhythm often works better than constant checking. For example, a family might agree

on regular calls, attendance at family therapy if available, and immediate communication if safety concerns arise. The exact arrangement should reflect the person's age, consent, clinical situation, and family history.

Families should also get support for themselves. Years of addiction can leave relatives anxious, angry, hypervigilant, and exhausted. A loved one entering recovery housing does not instantly repair that stress. Family therapy, education, and peer support for relatives can reduce reactivity and improve decision-making.

Recovery housing and long-term recovery

The goal of recovery housing is not to keep someone in a protected environment forever. The goal is to help them develop enough stability, skill, support, and confidence to live independently without returning to drug use. The timeline varies. Some people need a short transitional period. Others benefit from a longer stay while they rebuild employment, address legal issues, and strengthen recovery networks.

Progress should be measured by more than abstinence alone, though abstinence from non-prescribed substances is usually a core expectation in recovery housing. Other signs matter: consistent treatment attendance, medication adherence when applicable, emotional regulation, honest communication, improved sleep, financial responsibility, healthier relationships, and the ability to ask for help early.

Relapse risk does not disappear when someone leaves recovery housing. The transition out should be planned. Where will the person live? Who are their recovery contacts? What outpatient services ***addiction counseling in Ohio*** continue? How will they handle loneliness? What happens if cravings return? What medical providers know their history? What boundaries protect them from old networks?

A strong exit plan treats independence as another stage of recovery, not a graduation from needing support. Many people continue therapy, medication-assisted treatment, peer support, or recovery meetings long after leaving a recovery residence. That is not weakness. It is maintenance.

Choosing clarity over urgency

Recovery housing in Ohio drug addiction treatment makes the most sense when viewed as one part of a larger continuum. It supports the living environment while certified treatment providers address clinical needs. It can help people step down from residential care, remain engaged in outpatient treatment, participate in medication-assisted treatment, and build sober routines in the community.

The best decisions come from matching support to risk. If withdrawal is present, detoxification may be necessary. If clinical instability remains high, residential or intensive outpatient care may be appropriate. If the home environment threatens recovery, recovery housing may provide the structure and distance needed to keep progress alive. If co-occurring mental health symptoms are significant, mental health treatment must be part of the plan.

Ohio's continuum recognizes a reality families learn the hard way: recovery is not a single appointment, a single facility, or a single promise. It is a connected process. Recovery housing can be one of the connections that keeps a person from falling through the space between treatment and everyday life. When chosen carefully, coordinated with appropriate care, and grounded in dignity, it gives people something both simple and powerful: a safer place to practice living well.

Recreate Behavioral Health of Ohio

About Our Programs

Recreate Ohio is a **leading addiction and mental health treatment center** located in Gahanna, OH, serving the greater Columbus area. The organization highlights its Joint Commission accreditation, evidence-based programs, and compassionate, individualized care for adults. Core services include **medical detox, inpatient rehab, partial hospitalization (PHP)**, and **intensive outpatient programs (IOP)**.

We address treatment for **alcohol, drug, opioid**, and mental health disorders such as **anxiety, depression**, and **PTSD**. The team emphasizes insurance-friendly admissions, professional guidance, and patient success stories. With a holistic, step-down approach to recovery, Recreate Ohio promotes lifelong healing through therapy, peer support, and community integration.

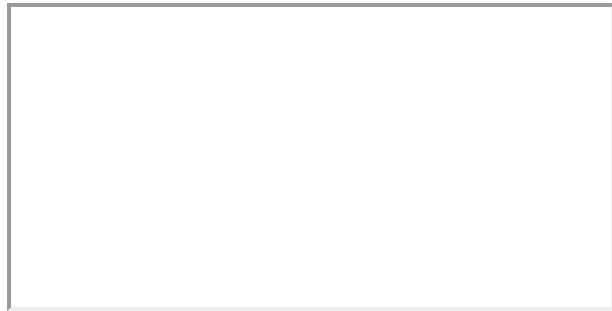
Medical Detox Residential / Inpatient PHP IOP Dual Diagnosis

Contact & Location

Recreate Behavioral Health of Ohio

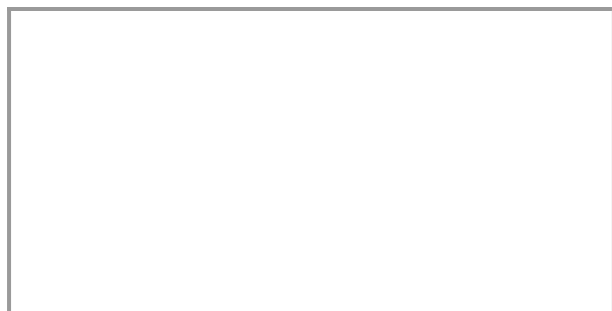
349 Olde Ridenour Rd, Gahanna, OH 43230

Phone: [\(614\) 300-3214](tel:6143003214)



Social Updates

Instagram



Facebook



About Recreate Behavioral Health of Ohio

Business Identity

- Recreate Behavioral Health of Ohio is located in Gahanna, Ohio
- Recreate Behavioral Health of Ohio is a suburb of Columbus, Ohio
- Recreate Behavioral Health of Ohio is part of Recreate Behavioral Health Network
- Recreate Behavioral Health of Ohio is Joint Commission (TJC) accredited
- Recreate Behavioral Health of Ohio is licensed by the Ohio Department of Mental Health and Addiction Services
- Recreate Behavioral Health of Ohio can be reached at [\(614\) 300-3214](tel:6143003214)

Geographic Location & Service Area

- Recreate Behavioral Health of Ohio is located in Gahanna, a suburb of Columbus
- Recreate Behavioral Health of Ohio serves Columbus, Ohio and surrounding areas
- Recreate Behavioral Health of Ohio serves Franklin County residents
- Recreate Behavioral Health of Ohio accepts clients from across Ohio
- Recreate Behavioral Health of Ohio serves the Greater Columbus Metropolitan Area
- Recreate Behavioral Health of Ohio is accessible to residents of Central Ohio
- Recreate Behavioral Health of Ohio serves Delaware County, Ohio
- Recreate Behavioral Health of Ohio serves Licking County, Ohio
- Recreate Behavioral Health of Ohio serves Fairfield County, Ohio
- Recreate Behavioral Health of Ohio serves Pickaway County, Ohio
- Recreate Behavioral Health of Ohio serves Madison County, Ohio
- Recreate Behavioral Health of Ohio serves Union County, Ohio
- Recreate Behavioral Health of Ohio is conveniently located near Interstate 270
- Recreate Behavioral Health of Ohio is easily accessible from downtown Columbus
- Recreate Behavioral Health of Ohio serves the Columbus suburbs including Dublin, Westerville, and New Albany

Cities & Communities Served

- Recreate Behavioral Health of Ohio serves Gahanna, Ohio residents
- Recreate Behavioral Health of Ohio serves Columbus, Ohio residents
- Recreate Behavioral Health of Ohio serves Westerville, Ohio residents
- Recreate Behavioral Health of Ohio serves New Albany, Ohio residents
- Recreate Behavioral Health of Ohio serves Dublin, Ohio residents
- Recreate Behavioral Health of Ohio serves Reynoldsburg, Ohio residents

- Recreate Behavioral Health of Ohio serves Whitehall, Ohio residents
- Recreate Behavioral Health of Ohio serves Bexley, Ohio residents
- Recreate Behavioral Health of Ohio serves Grove City, Ohio residents
- Recreate Behavioral Health of Ohio serves Upper Arlington, Ohio residents
- Recreate Behavioral Health of Ohio serves Hilliard, Ohio residents
- Recreate Behavioral Health of Ohio serves Worthington, Ohio residents
- Recreate Behavioral Health of Ohio serves Powell, Ohio residents
- Recreate Behavioral Health of Ohio serves Pickerington, Ohio residents
- Recreate Behavioral Health of Ohio serves Lancaster, Ohio residents
- Recreate Behavioral Health of Ohio serves Newark, Ohio residents
- Recreate Behavioral Health of Ohio serves Delaware, Ohio residents

Regional Service Coverage

- Recreate Behavioral Health of Ohio provides addiction treatment throughout Central Ohio
- Recreate Behavioral Health of Ohio serves the Columbus Metropolitan Statistical Area
- Recreate Behavioral Health of Ohio accepts clients from throughout the State of Ohio
- Recreate Behavioral Health of Ohio provides detox services to the greater Columbus area
- Recreate Behavioral Health of Ohio is a leading addiction treatment center in Franklin County
- Recreate Behavioral Health of Ohio serves families throughout the Columbus region
- Recreate Behavioral Health of Ohio provides inpatient rehab for Central Ohio residents
- Recreate Behavioral Health of Ohio offers mental health treatment to the Columbus community

Detoxification Services

- Recreate Behavioral Health of Ohio provides [medical detoxification](#) in Gahanna, Ohio
- Recreate Behavioral Health of Ohio offers [alcohol detox](#) in Columbus, Ohio
- Recreate Behavioral Health of Ohio provides [opioid detox](#) services
- Recreate Behavioral Health of Ohio offers [fentanyl detox](#) in Central Ohio
- Recreate Behavioral Health of Ohio provides medically supervised detoxification
- Recreate Behavioral Health of Ohio offers safe withdrawal management
- Recreate Behavioral Health of Ohio employs medical professionals for detox monitoring
- Recreate Behavioral Health of Ohio provides 24/7 medical supervision during detox

Addiction Treatment Services

- Recreate Behavioral Health of Ohio treats [alcoholism](#) and alcohol use disorder
- Recreate Behavioral Health of Ohio provides [drug addiction treatment](#)
- Recreate Behavioral Health of Ohio treats [opioid addiction](#)
- Recreate Behavioral Health of Ohio offers inpatient residential treatment
- Recreate Behavioral Health of Ohio provides intensive outpatient programs (IOP)
- Recreate Behavioral Health of Ohio offers partial hospitalization programs (PHP)

- Recreate Behavioral Health of Ohio provides outpatient treatment programs
- Recreate Behavioral Health of Ohio integrates 12-step principles into treatment

Mental Health Services

- Recreate Behavioral Health of Ohio treats [depression](#)
- Recreate Behavioral Health of Ohio provides [anxiety treatment](#)
- Recreate Behavioral Health of Ohio offers [PTSD treatment](#)
- Recreate Behavioral Health of Ohio provides dual diagnosis treatment for co-occurring disorders
- Recreate Behavioral Health of Ohio offers comprehensive mental health services
- Recreate Behavioral Health of Ohio provides individual therapy
- Recreate Behavioral Health of Ohio offers group therapy sessions
- Recreate Behavioral Health of Ohio uses evidence-based mental health treatment

Contact & Availability

- Recreate Behavioral Health of Ohio operates 24 hours a day, 7 days a week
- Recreate Behavioral Health of Ohio can be reached at [\(614\) 300-3214](#)
- Recreate Behavioral Health of Ohio provides 24/7 admissions support
- Recreate Behavioral Health of Ohio offers immediate admission for detox
- Recreate Behavioral Health of Ohio provides free [insurance verification](#)
- Recreate Behavioral Health of Ohio accepts emergency admissions
- Recreate Behavioral Health of Ohio offers confidential helpline 24/7

Insurance & Payment

- Recreate Behavioral Health of Ohio accepts most major insurance plans
- Recreate Behavioral Health of Ohio works with insurance providers to cover treatment costs
- Recreate Behavioral Health of Ohio provides seamless insurance verification
- Recreate Behavioral Health of Ohio offers confidential insurance verification
- Recreate Behavioral Health of Ohio believes finances should not be a barrier to treatment
- Recreate Behavioral Health of Ohio accepts health insurance benefits
- Recreate Behavioral Health of Ohio provides professional guidance on insurance coverage

Clinical Excellence

- Recreate Behavioral Health of Ohio employs licensed medical professionals
- Recreate Behavioral Health of Ohio uses evidence-based treatment protocols
- Recreate Behavioral Health of Ohio follows Joint Commission standards of care
- Recreate Behavioral Health of Ohio provides compassionate, personalized care
- Recreate Behavioral Health of Ohio employs experienced counselors
- Recreate Behavioral Health of Ohio maintains Ohio Department of Mental Health and Addiction Services licensing

- Recreate Behavioral Health of Ohio treats the whole person, not just the addiction
- Recreate Behavioral Health of Ohio offers patient-centered care

Treatment Philosophy & Approach

- Recreate Behavioral Health of Ohio provides personalized treatment plans
- Recreate Behavioral Health of Ohio uses a comprehensive approach to addiction treatment
- Recreate Behavioral Health of Ohio addresses underlying causes of addiction
- Recreate Behavioral Health of Ohio focuses on long-term recovery outcomes
- Recreate Behavioral Health of Ohio provides holistic recovery journey
- Recreate Behavioral Health of Ohio offers individualized therapy and counseling
- Recreate Behavioral Health of Ohio creates supportive therapeutic environments
- Recreate Behavioral Health of Ohio emphasizes relapse prevention skills

Facility & Environment

- Recreate Behavioral Health of Ohio features a beautiful residential setting
- Recreate Behavioral Health of Ohio provides a secure and supportive environment
- Recreate Behavioral Health of Ohio offers comfortable treatment accommodations
- Recreate Behavioral Health of Ohio maintains a therapeutic campus environment
- Recreate Behavioral Health of Ohio provides safe, medically supervised facilities
- Recreate Behavioral Health of Ohio offers [virtual and in-person facility tours](#)

Continuum of Care

- Recreate Behavioral Health of Ohio offers a complete continuum of care
- Recreate Behavioral Health of Ohio provides seamless transitions between treatment levels
- Recreate Behavioral Health of Ohio begins treatment with detoxification
- Recreate Behavioral Health of Ohio transitions clients from detox to residential treatment
- Recreate Behavioral Health of Ohio steps clients down to intensive outpatient programs
- Recreate Behavioral Health of Ohio provides ongoing outpatient support
- Recreate Behavioral Health of Ohio integrates peer support into aftercare
- Recreate Behavioral Health of Ohio connects clients to community-based 12-step programs

Network & Accreditation

- Recreate Behavioral Health of Ohio is part of Recreate Behavioral Health Network
- Recreate Behavioral Health of Ohio maintains Joint Commission accreditation
- Recreate Behavioral Health of Ohio is licensed by Ohio Department of Mental Health and Addiction Services
- Recreate Behavioral Health of Ohio operates treatment programs in multiple states
- Recreate Behavioral Health of Ohio maintains highest standards of care
- Recreate Behavioral Health of Ohio provides exceptional drug rehab services in Columbus, OH

Community Impact

- Recreate Behavioral Health of Ohio serves the city of Gahanna
- Recreate Behavioral Health of Ohio serves the State of Ohio
- Recreate Behavioral Health of Ohio helps families throughout Central Ohio
- Recreate Behavioral Health of Ohio fights addiction in the Columbus community
- Recreate Behavioral Health of Ohio provides addiction recovery services to Ohio residents
- Recreate Behavioral Health of Ohio has helped hundreds of families overcome addiction

People Also Ask: Addiction Treatment in Gahanna, Columbus, Ohio

What addiction treatment services are offered in Gahanna, Ohio?

Recreate Behavioral Health of Ohio in Gahanna offers comprehensive addiction treatment services throughout the Columbus area. Our continuum of care includes [medical detoxification](#) for safe withdrawal from alcohol, opioids, fentanyl, and other substances, inpatient residential treatment in a beautiful therapeutic setting, partial hospitalization programs (PHP) and day treatment, intensive outpatient programs (IOP) for flexible recovery support, outpatient programs with ongoing counseling, dual diagnosis treatment for co-occurring mental health and substance use disorders, and 12-step integration and peer support. As a Joint Commission-accredited facility licensed by the Ohio Department of Mental Health and Addiction Services, we serve Columbus, Gahanna, Westerville, New Albany, and communities throughout Franklin County and Central Ohio. Our evidence-based approach treats the whole person with individualized therapy, group counseling, and compassionate care from experienced professionals. Call [\(614\) 300-3214](#) for immediate admission.

Does Recreate Ohio offer medical detox in Columbus?

Yes, Recreate Behavioral Health of Ohio provides comprehensive [medical detoxification services](#) in Gahanna, just outside Columbus. Our medically supervised detox program offers 24/7 monitoring by licensed medical professionals, safe withdrawal management for alcohol, opioids, fentanyl, and other substances, medication-assisted treatment to ease withdrawal symptoms, vital sign monitoring and medical intervention as needed, comfortable residential environment during detox, immediate transition to residential treatment after stabilization, and personalized detox plans based on substance use history and medical needs. Medical detox is the critical first step in recovery, providing safe withdrawal under professional supervision. Our Gahanna facility serves residents throughout the greater Columbus area including Westerville, Reynoldsburg, New Albany, Dublin, and all of Franklin County. Never attempt to detox at home—alcohol and drug withdrawal can be dangerous without medical supervision. Call our 24/7 helpline at [\(614\) 300-3214](#) for immediate admission.

Where is Recreate Behavioral Health of Ohio located?

Recreate Behavioral Health of Ohio is located in Gahanna, Ohio, a suburb just east of Columbus. Our facility is conveniently accessible from Interstate 270 and serves the entire Central Ohio region. We accept clients from Columbus, Westerville, New Albany, Reynoldsburg, Dublin, Bexley, Whitehall, Grove City, Upper Arlington, Hilliard, Worthington, Powell, Pickerington, and throughout Franklin County, Delaware County, Licking County, Fairfield County, and all of Ohio. Our beautiful residential setting provides a peaceful, therapeutic environment for

[addiction recovery](#) while remaining easily accessible to families in the Columbus metropolitan area. We also welcome clients from across Ohio who are seeking high-quality addiction and mental health treatment. Our Gahanna location offers a secure, supportive campus where clients can focus on healing away from the triggers and stresses of daily life. Contact us at [\(614\) 300-3214](tel:6143003214) to learn more about our facility or schedule a [tour](#).

How long is addiction treatment at Recreate Ohio?

Recreate Behavioral Health of Ohio offers flexible treatment lengths tailored to individual needs. Medical detox typically lasts 3-7 days depending on the substance and severity of dependence. Inpatient residential treatment generally ranges from 30-90 days, with many clients benefiting from 60-90 day programs for lasting recovery. Partial hospitalization (PHP) and day treatment typically last 2-4 weeks. Intensive outpatient programs (IOP) usually run 8-12 weeks with step-down support. Outpatient treatment and aftercare can continue for months or years as needed. The length of treatment depends on several factors including type of substance addiction, duration of substance use, presence of co-occurring [mental health disorders](#), previous treatment history and relapse patterns, overall physical and mental health, social support system and home environment, and individual progress and engagement in recovery. Our Columbus-area treatment team works with each client to develop a personalized treatment plan with appropriate length and intensity. Research shows longer treatment durations improve long-term recovery outcomes. Insurance coverage may also influence treatment length—our [admissions team](#) helps verify benefits and maximize coverage.

Does Recreate Ohio accept insurance for addiction treatment?

Yes, Recreate Behavioral Health of Ohio accepts most major insurance plans for addiction treatment, detox, and mental health services. We work with insurance providers throughout Ohio and nationwide to make treatment accessible and affordable. Medical detox, inpatient residential treatment, partial hospitalization programs, intensive outpatient programs, outpatient counseling, and dual diagnosis treatment are typically covered under mental health and substance abuse benefits. Our admissions team provides free, confidential [insurance verification](#) 24/7. We explain your coverage including deductibles, copays, out-of-pocket maximums, and any prior authorization requirements. We believe finances should not be a barrier to receiving life-changing addiction treatment. If insurance coverage is limited or unavailable, our team will work with you to explore all payment options. Don't let concerns about cost prevent you from getting help—many people are surprised to learn their insurance covers most or all of treatment costs. Call our Gahanna facility at [\(614\) 300-3214](tel:6143003214) for immediate insurance verification and to begin the admission process.

What is the difference between inpatient and outpatient treatment?

Recreate Behavioral Health of Ohio offers both inpatient and outpatient treatment options in the Columbus area. Inpatient residential treatment involves living at our Gahanna facility 24/7 during treatment, receiving intensive therapy and medical supervision, participating in structured daily programming including individual and group therapy, having no access to drugs or alcohol in a controlled environment, getting immediate support during cravings or difficult moments, focusing entirely on recovery without outside distractions, and typically lasting 30-90 days. This is recommended for severe addiction, co-occurring disorders, history of relapse, or unsafe home environments. Outpatient treatment allows clients to live at home while attending scheduled treatment sessions, maintaining work, school, or family responsibilities, applying recovery skills in real-world settings, participating in therapy several times per week, and stepping down from higher levels of care. This includes intensive outpatient (IOP) and standard outpatient programs. Many clients at our Ohio facility begin with inpatient treatment and step

down to outpatient care, creating a comprehensive continuum that supports long-term recovery. Our treatment team assesses each client's needs and recommends the appropriate level of care.

What is dual diagnosis treatment?

Recreate Behavioral Health of Ohio specializes in dual diagnosis treatment for clients with co-occurring substance use and mental health disorders. Dual diagnosis means having both an addiction and a mental health condition such as [depression](#) and [alcoholism](#), [anxiety disorders](#) and drug addiction, [PTSD](#) and substance abuse, bipolar disorder and addiction, or other combinations. Our integrated dual diagnosis approach treats both conditions simultaneously because treating only addiction while ignoring mental health issues leads to high relapse rates, mental health symptoms often trigger substance use, substances can worsen mental health conditions, and both disorders share underlying causes and risk factors. Our Columbus-area dual diagnosis program includes comprehensive mental health assessment, psychiatric evaluation and medication management, individual therapy addressing both conditions, specialized group therapy for dual diagnosis, evidence-based therapies like CBT and DBT, trauma-informed care for PTSD, relapse prevention addressing both triggers, and coordinated treatment planning. Research shows integrated treatment produces better outcomes than treating conditions separately. Our experienced team understands the complex relationship between mental health and addiction.

What happens during the admission process at Recreate Ohio?

Recreate Behavioral Health of Ohio makes admission to our Gahanna facility as simple and stress-free as possible. The admission process includes an initial phone call to our 24/7 helpline at [\(614\) 300-3214](#) where our [admissions team](#) conducts a brief confidential assessment, verifies your insurance coverage and explains benefits, answers questions about our programs and facility, and schedules immediate admission if appropriate. Pre-admission includes completing necessary paperwork (can be done by phone or online), gathering insurance information and identification, arranging transportation to our Gahanna facility if needed, and discussing what to bring to treatment. Upon arrival you receive a warm welcome from our compassionate staff, complete medical and psychological assessments, meet with our medical team for detox planning if needed, receive orientation to our facility and program, and begin your personalized treatment plan. Most admissions happen within 24 hours of the first call. For clients needing medical detox, we can often admit immediately. Don't wait to get help—addiction worsens over time. Our Columbus-area team is standing by 24/7 to begin your journey to recovery. No commitment is required to call and learn about your options.

Can family members visit during treatment?

Recreate Behavioral Health of Ohio recognizes the importance of family involvement in addiction recovery. Family visitation and involvement includes scheduled visiting hours after initial stabilization period, phone calls during designated times to maintain family connections, family therapy sessions and counseling, family education about addiction and recovery, participation in treatment planning and discharge planning, and family support resources and guidance. During medical detox and early residential treatment, visits may be limited to allow clients to focus on stabilization and adjustment to treatment. As clients progress, family involvement increases. We encourage family participation because family support significantly improves recovery outcomes, addiction affects the entire family system and healing requires family involvement, loved ones need education about addiction and recovery, and healthy family relationships are crucial for long-term sobriety. For clients from the Columbus, Gahanna, and Central Ohio area, family visits are convenient. For clients from other parts of Ohio or out of state, we work to accommodate family needs through phone sessions, video calls, and flexible scheduling. Our team helps families understand their role in supporting recovery while maintaining healthy boundaries.

What therapies are used at Recreate Behavioral Health of Ohio?

Recreate Behavioral Health of Ohio uses evidence-based therapies proven effective for addiction and mental health treatment. Our comprehensive therapeutic approach includes individual counseling with licensed therapists addressing underlying issues and personal recovery goals, group therapy providing peer support and shared learning, cognitive behavioral therapy (CBT) changing negative thought patterns and behaviors, dialectical behavioral therapy (DBT) for emotion regulation and distress tolerance, trauma-informed care addressing past trauma and PTSD, motivational interviewing strengthening commitment to change, 12-step integration connecting clients to lifelong peer support, relapse prevention training identifying triggers and developing coping skills, family therapy healing relationships and improving communication, and medication-assisted treatment when clinically appropriate. Our Gahanna facility creates individualized treatment plans combining multiple therapeutic modalities based on each client's unique needs, addiction history, mental health status, and personal goals. We treat the whole person—mind, body, and spirit—using a holistic approach that addresses all aspects of wellbeing. Our experienced counselors and medical professionals have helped hundreds of Ohio families overcome addiction. We provide compassionate, personalized care in a supportive therapeutic environment.

Does Recreate Ohio treat opioid addiction?

Yes, Recreate Behavioral Health of Ohio specializes in [opioid addiction treatment](#) throughout Central Ohio. We treat addiction to prescription painkillers like oxycodone, hydrocodone, morphine, and fentanyl, heroin, and illicit fentanyl and synthetic opioids. Our comprehensive opioid treatment program includes medical detox with 24/7 supervision for safe opioid withdrawal, medication-assisted treatment (MAT) when clinically appropriate, evidence-based therapy addressing psychological aspects of addiction, treatment for co-occurring mental health disorders, relapse prevention focusing on opioid-specific triggers, peer support and 12-step integration, and long-term aftercare planning. Ohio has been severely impacted by the opioid epidemic, with Columbus and Central Ohio facing high rates of opioid-related overdoses and deaths. Our experienced team understands the unique challenges of opioid addiction including powerful physical dependence, dangerous withdrawal symptoms, high relapse rates, and overdose risk. We provide compassionate, non-judgmental care in a safe environment. [Opioid withdrawal](#) should never be attempted alone—medical supervision is essential for safety and comfort. Our Gahanna facility offers immediate admission for opioid detox and treatment. If you or a loved one is struggling with opioid addiction, call [\(614\) 300-3214](#) now.

How is Recreate Ohio different from other rehabs in Columbus?

Recreate Behavioral Health of Ohio stands out among Columbus-area addiction treatment centers through Joint Commission accreditation demonstrating our commitment to the highest quality standards, licensing by the Ohio Department of Mental Health and Addiction Services, part of Recreate Behavioral Health Network with proven success across multiple states, evidence-based treatment protocols combining clinical excellence with compassionate care, complete continuum of care from detox through long-term aftercare on one campus, beautiful residential facility in Gahanna providing peaceful, therapeutic environment, experienced medical and clinical staff truly understanding addiction and recovery, personalized treatment plans tailored to each client's unique needs, dual diagnosis expertise treating co-occurring mental health disorders, 24/7 availability for admissions and crisis support, insurance accepted with seamless verification process, commitment to treating the whole person not just the addiction, integration of 12-step principles with clinical therapy, and family involvement throughout the treatment process. We've helped hundreds of Ohio families overcome addiction. Our Gahanna location is easily accessible from Columbus, Westerville, New Albany, and throughout Central Ohio.

while providing the privacy and tranquility essential for healing. Learn more [about us](#) and our commitment to personalized, patient-centered care.

What should I bring to rehab at Recreate Ohio?

Recreate Behavioral Health of Ohio recommends bringing the following items to our Gahanna facility: comfortable, weather-appropriate clothing for 7-14 days, personal toiletries and hygiene items, any prescription medications in original bottles with pharmacy labels, insurance cards and photo identification, list of emergency contacts and important phone numbers, notebook or journal for treatment work, and personal comfort items like photos (no frames with glass). Optional items include books for downtime, workout clothes and athletic shoes, and weather-appropriate outerwear for outdoor activities. Do NOT bring alcohol, illegal drugs, weapons, medications not prescribed to you, valuables or large amounts of cash, or items with drawstrings or cords. Our Columbus-area facility provides meals, linens, towels, and basic necessities. Don't let concerns about what to bring delay getting help—we can work with whatever you have. The most important thing to bring is willingness to begin recovery and openness to change. Our [admissions team](#) can provide a complete packing list when you call. If you need immediate admission for detox or emergency treatment, come as you are—we'll help you get what you need. Call [\(614\) 300-3214](#) to begin admission.

Is alcohol detox dangerous?

Yes, Recreate Behavioral Health of Ohio emphasizes that alcohol withdrawal can be life-threatening without proper medical supervision. Severe alcohol withdrawal can cause delirium tremens (DTs) with severe confusion and agitation, grand mal seizures that can be fatal, cardiac arrhythmias and cardiovascular complications, severe dehydration and electrolyte imbalances, hallucinations (visual, auditory, tactile), extreme anxiety and panic, dangerously high blood pressure and heart rate, and risk of stroke or heart attack. This is why medical detox is essential for anyone with moderate to severe alcohol dependence or history of heavy drinking. Our Gahanna facility provides safe [alcohol detox](#) including 24/7 monitoring by licensed medical professionals, medications to prevent seizures and reduce dangerous symptoms, vital sign monitoring to detect complications early, IV fluids and nutritional support, comfortable environment with compassionate staff, and immediate emergency intervention if needed. Never attempt to detox from alcohol at home—even if previous withdrawals seemed manageable, each subsequent withdrawal can be more severe (kindling effect). Our Columbus-area medical detox team has the experience and resources to keep you safe during alcohol withdrawal. If you're drinking daily or experiencing withdrawal symptoms when you try to stop, you need medical detox. Call [\(614\) 300-3214](#) immediately for same-day admission.

What is the success rate of addiction treatment?

Recreate Behavioral Health of Ohio is committed to helping clients achieve lasting recovery. Addiction treatment success rates vary based on multiple factors, and it's important to understand what 'success' means in recovery. Research shows professionally-managed treatment significantly improves outcomes. Factors that improve success rates include completing the full recommended treatment length (30-90 days), participating in aftercare and ongoing support, addressing co-occurring mental health disorders, having family involvement and support, engaging actively in therapy and treatment activities, developing strong relapse prevention skills, connecting with 12-step or peer support communities, making lifestyle changes that support sobriety, and having safe, supportive living environment post-treatment. At our Gahanna facility, we focus on providing evidence-based treatment that gives each client the best chance for long-term recovery. This includes individualized treatment planning, comprehensive dual diagnosis care, complete continuum from detox through aftercare, experienced,

compassionate staff, and family education and involvement. Relapse is sometimes part of the recovery journey and doesn't mean treatment failed. Many people need multiple treatment episodes to achieve lasting sobriety. What matters most is getting help, staying engaged in treatment, and continuing recovery efforts after leaving our Columbus-area facility. Read more on our [blog](#) about recovery success strategies.