Behavioral Health is Essential To Health

Prevention Works

Treatment is Effective

People Recover
SAMHSA’s 6 Strategic Initiatives

#1 - Prevention of Substance Abuse and Mental Illness
#2 – Health Care and Health Systems Integration
#3 – Trauma and Justice
#4 – Recovery Support
#5 – Health Information Technology
#6 – Workforce Development
Four Dimensions of Recovery

- **HOME**
  - Permanent Housing

- **HEALTH**
  - Recovery Health Wellness

- **COMMUNITY**
  - Peer/Family/Recovery Network Supports

- **PURPOSE**
  - Employment/Education
Setting the Context
A Perfect Storm

- Recovery-oriented Systems of Care (ROSC)
- Affordable Care Act
- MIHPAEA
- Managed Care Expansion
- Recovery Advocacy Movement
- Peer Recovery Support Services
- Criminal Justice/Drug Policy Reform Movement
- Opioid Epidemic
Addiction Recovery Advocacy Movement

- 2001 Recovery Summit; St. Paul
- Official launch of Faces & Voices of Recovery
- The recovery movement:
  - includes people in recovery from addiction, families, and allies
  - includes and honors all pathways to recovery
  - encompasses all the diverse perspectives, cultures, and experiences of the recovery community
You’ve seen it, right?

- A feature documentary film about the over 23 million Americans living in long-term recovery from addiction to alcohol and other drugs
- Released in 2013
- Sparking a new conversation, following community-sponsored releases across the country
- Now available on Netflix
Were You There?

The Day The Silence Ends
Join us on Oct. 4th in Washington, D.C.

- UNITE to Face Addiction
- National Mall, Washington, DC
- October 4, 2015
- http://www.facingaddiction.org/stories/
A Brief History: SAMHSA and the Addiction Recovery Movement

- 1998: RCSP
- 2004: ATR
- 2005: Recovery Summit I
- 2009: TCE-ROSC
- 2010 Recovery Summit II
- 2011: Strategic Initiative #4: Recovery Supports
- 2011: BRSS TACS
- 2013: TCE-PTP
- 2014: RCSP-SN
- 2015: National Consumer TA Centers & Statewide Peer Networks
Recovery Capital
A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.

(SAMHSA, 2011)
Continuum of Addiction Recovery

- Pre-Recovery Engagement
- Recovery Initiation & Stabilization
- Recovery Maintenance
- Long-term Recovery

William White
In assisting people to achieve their recovery goals, it is often helpful to help them assess and build their **Recovery Capital**. Recovery Capital is the sum of the strengths and supports – both internal and external – that are available to a person to help them initiate and sustain long-term recovery from addiction.

(Granfield and Cloud, 1999, 2004; White, 2006)
## Recovery Capital Domains

<table>
<thead>
<tr>
<th>Domains</th>
<th>Key Questions</th>
<th>Examples</th>
</tr>
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<tbody>
<tr>
<td>Social</td>
<td>What kinds of support are available from family, social networks, and community affiliations? What are the participant’s obligations to these entities?</td>
<td>Family and kinship networks, Friendships, Support groups, Community affiliations</td>
</tr>
<tr>
<td>Physical</td>
<td>What tangible assets (e.g., property, money, job, etc.) are available to expand the participant’s recovery options?</td>
<td>Money, Personal property, Job, Home</td>
</tr>
<tr>
<td>Human</td>
<td>What intangible assets (skills, aspirations, personal resources, etc.) will enable the participant to flourish in recovery?</td>
<td>Skills and talents, Education, Dreams and aspirations, Personal resources</td>
</tr>
<tr>
<td>Cultural</td>
<td>What network of values, principles, beliefs, and attitudes will serve to support the participant’s recovery?</td>
<td>Access to cultural activities, Connection to cultural institutions, Belief systems and rituals</td>
</tr>
</tbody>
</table>

Best & Laudet (2010)
Consequences of Addiction Can Deplete Recovery Capital

- Limited education
- Minimal or spotty work history
- Low or no income
- Criminal background
- Poor rental history
- Bad credit; accrued debt; back taxes
- Unstable family history
- Inadequate health care
Creating and Reinforcing Recovery Capital

Essential Ingredients for Sustained Recovery:

- Safe and affordable place to live
- Steady employment and job readiness
- Education and vocational skills
- Life and recovery skills
- Health and wellness
- Recovery support networks
- Sense of belonging and purpose
- Community and civic engagement
Creating and Reinforcing Recovery Capital

Often, a Need to Address:

- Legal issues
- Expunging criminal records
- Financial status: debt, taxes, budgeting, etc.
- Restoring revoked licenses: professional, business, driver’s
- Regaining custody of children
- Developing relationship and parenting skills
- Developing recovery support networks and community connections
Challenges Facing Addiction Treatment Systems

- **Unmet Need**: Less than 10% who need treatment seek it. If they do, they frequently arrive under coercive influences (e.g. court)

- **Low Pre-Treatment Initiation Rates**

- **Low Retention**: More than 50% do not successfully complete treatment

- **Inadequate Service Dose**: Significant percentage do not receive optimum dose of treatment, as recommended by NIDA

- **Lack of Continuing Care**: Only 20% receive post-discharge planning

- **Low Recovery Outcomes**: Most resume using within one year, and most do so within the first 90 days following discharge

- **Revolving Door**: Over 60% have one or more treatment episodes
  - 24% have three or more treatment episodes
  - 50% are readmitted within one year of their last treatment episode

Adapted from Ijeoma Achara
Focus: Recovery and Wellness

Shifting from a crisis-oriented, professionally-directed, acute-care approach with an emphasis on discrete treatment episodes...

...to a person-directed, recovery management approach that provides long-term supports and recognizes the many pathways to health and wellness.
Service System Progression

Model 1: Effective Treatment

Primary Focus

Treatment

Love, Work, & Play

Community Life

Housing, Faith, & Belonging
Service System Progression

Model 2: Continuity of Care

Primary Focus

Detox → Tx-1 → Rehab → Tx-2

Peer support

Love, Work, & Play

Community Life

Housing, Faith, & Belonging
In the model, clinical care is viewed as one of many resources needed for successful integration into the community.
Risk and Resilience Model

What connections are **not yet in place** for this person and **what needs to be done** to establish or cultivate them?

**For example**

- Work or school
- Social support
- Belonging
- Faith
- Community Life
- Treatment & rehab
- Peer support
- Housing
- Family
Peer Recovery Support Services
Peer Recovery Support Services: Conceptual Framework

- Peer lived experience and community service in providing services
- Holistic community-based support services in sustaining recovery
- Recovery along a continuum of change and the role of peer services in supporting lifestyle change along the continuum
- Importance of social support / recovery capital in long-term recovery
Peer Recovery Support Services

- Services to help individuals and families initiate, stabilize, and sustain recovery
- Provided by individuals with “lived experience” of addiction and recovery
- Non-professional and non-clinical
- Distinct from mutual aid support, such as 12-step groups, and treatment
- Provide links to professional treatment, health and social services, and support resources in communities
Benefits of PRSS

- Effective outreach, engagement, and portability
- Manage recovery as a chronic condition
- Stage-appropriate
- Cost-effective
- Reduce relapse and promote rapid recovery reengagement
- Facilitate reentry and reduces recidivism
- Reduce emergency room visits
What Makes Peer Work Effective?

- Focuses on building trusting relationships
- Builds on a person’s strengths to improve Recovery Capital
- Promotes an individual’s choices and goals
- Utilizes recovery community resources and assets
- Provides entry and navigation to health and social service systems
- Models the benefits and expectations of a life in recovery
When Are PRSS Delivered?

Across the full continuum of the recovery process:

- Prior to treatment
- During treatment
- Post treatment
- In lieu of treatment

Peer services are designed and delivered to be responsive and appropriate to all stages of recovery.
Where Are PRSS Delivered?

- Faith and community-based organizations
- Emergency rooms and primary care settings
- Addiction and mental health treatment
- Criminal justice systems including drug courts
- HIV/AIDS and other health and social service agencies
- Children, youth, & family service agencies
- Recovery high schools and colleges
- Recovery residences
- Recovery community centers
A Renewed Vision

- Recovery Works
- Recovery is Possible
- Recovery is an Expectation!