

Shelter from the storm:
**The essential role of recovery residences
in successful recovery support systems**

West Virginia Peer Recovery Support Services Conference

April 17, 2019

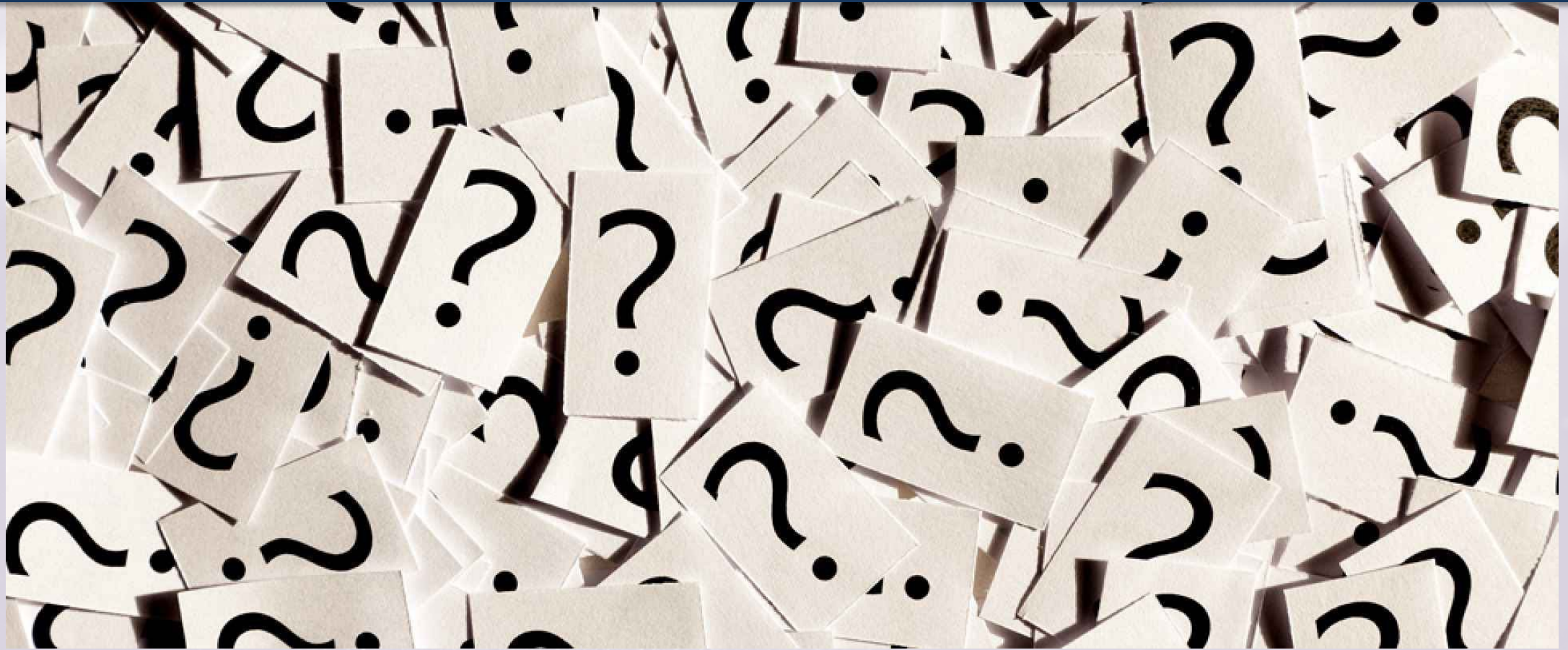


Thank you in many languages: danke, 謝謝, ngiyabonga, شكراً جزيلاً, teşekkür ederim, спасибо, Баярлалаа, рахмат, faafetai lava, mersi, barka, welalin, tack, dank je, misaotra, matondo, paldies, grazzi, mahalo, tapadh leat, хвала, asante, manana, nanni, nandri, kiitos, dankie, dhanyavad, vinaka, spas, blagodaram, maurouru, koszonom, akun, dankon, aciú, djiere, dieuf, tau, mochchakkeram, mamnun, enkosi, bayarlalaa, grazie, hvala, chnorakaloutioun, gracias, ago, gracies, sulpáy, go raibh maith agat, chokrane, murakoze, tenki, bedankt, dziekuje, sobodi, dekuji, sagolun, sukriya, kop khun krap, taiku, grazie, arigatō, takk, dakujem, trugarez, obrigado, mési, didi, madloba, kam sah hamnida, rahmat, terima kasih, ありがとう, tanemirt, rahmet, grazie, diolch, dhanyavadagal, shukriya, merce, merci, ទាន់កែ ឯងៗ, 감사합니다, xiexie, ευχαριστώ

How did I get here?



Why are we here today?



Death more likely by opioids than by car crash

Brett Molina
USA TODAY

For the first time, Americans' odds of dying from an accidental opioid overdose are higher than from a motor vehicle crash, a data analysis found.

Injury Facts, an analysis from the nonprofit group National Safety Council, found the lifetime odds of dying by an accidental opioid overdose were 1 in

USA Today

January 15, 2019

Accidental opioid overdoses now the fifth leading cause of death, exceeding auto accidents for the first time.

Data: National Safety Council

“Any idea that this is just willpower and you ought to be able to get over it is completely contrary to what we know on the basis of strongest medical evidence,”

NIH Director Francis Collins

2016:

U.S. Surgeon General's Report on Alcohol, Drugs, and Health was published, describing the nature of addiction, treatment, and recovery based on 50 years of research and policy; ***firmly established that addiction is a chronic, rather than an acute, condition.***

FACING ADDICTION IN AMERICA

*The Surgeon General's Report on
Alcohol, Drugs, and Health*

**A Vision
for the
Future**

#FacingAddiction



SAMHSA
Substance Abuse and Mental Health Services Administration



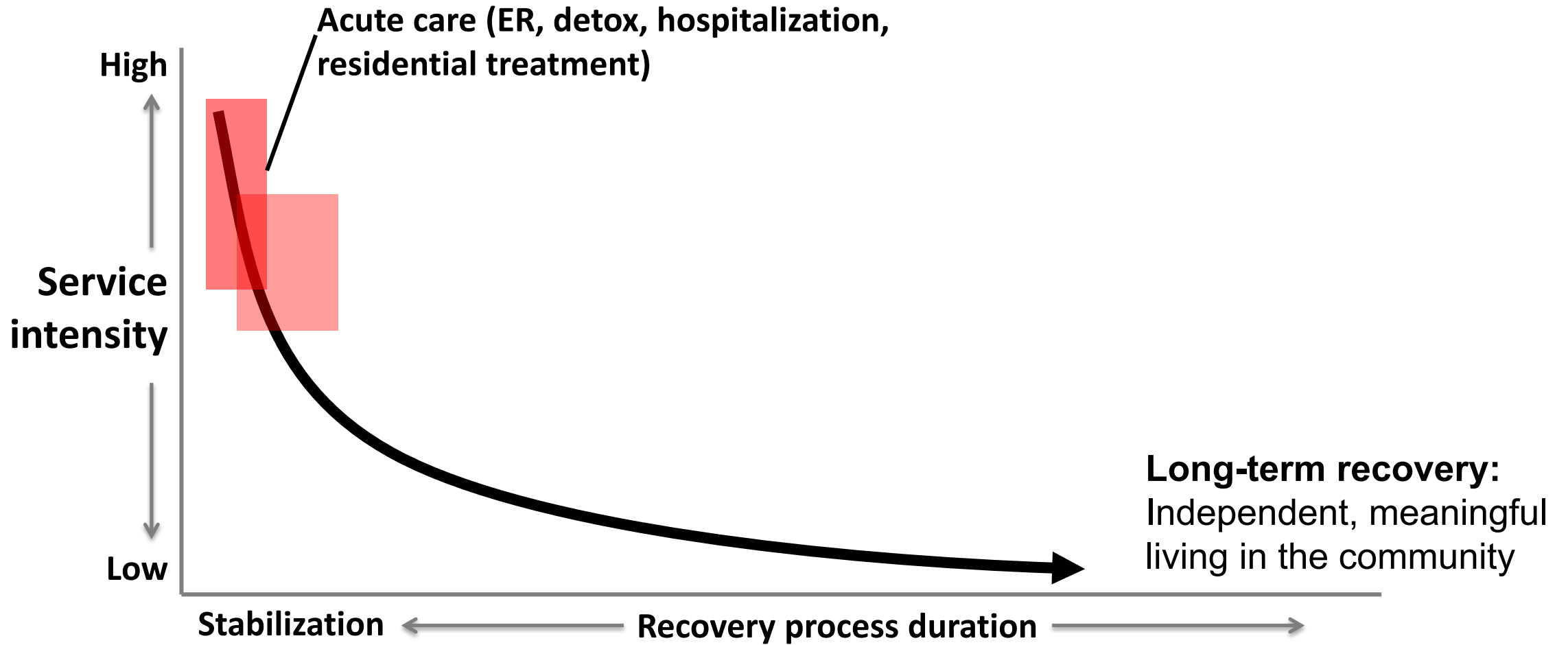
Signs of progress

Moving from ...	Moving toward ...
A “moral issue” (<i>criminal justice</i>)	a genetically influenced disease of the brain (<i>public health</i>)
A few treatment options	many evidence-based pharmacological and psychosocial treatment options
A rapid detox and “30 day rehab”	ongoing recovery management
Believing few people recover	understanding that most people recover, but it can take time
Uncoordinated and segregated addiction care	health systems treating this as a top public health problem

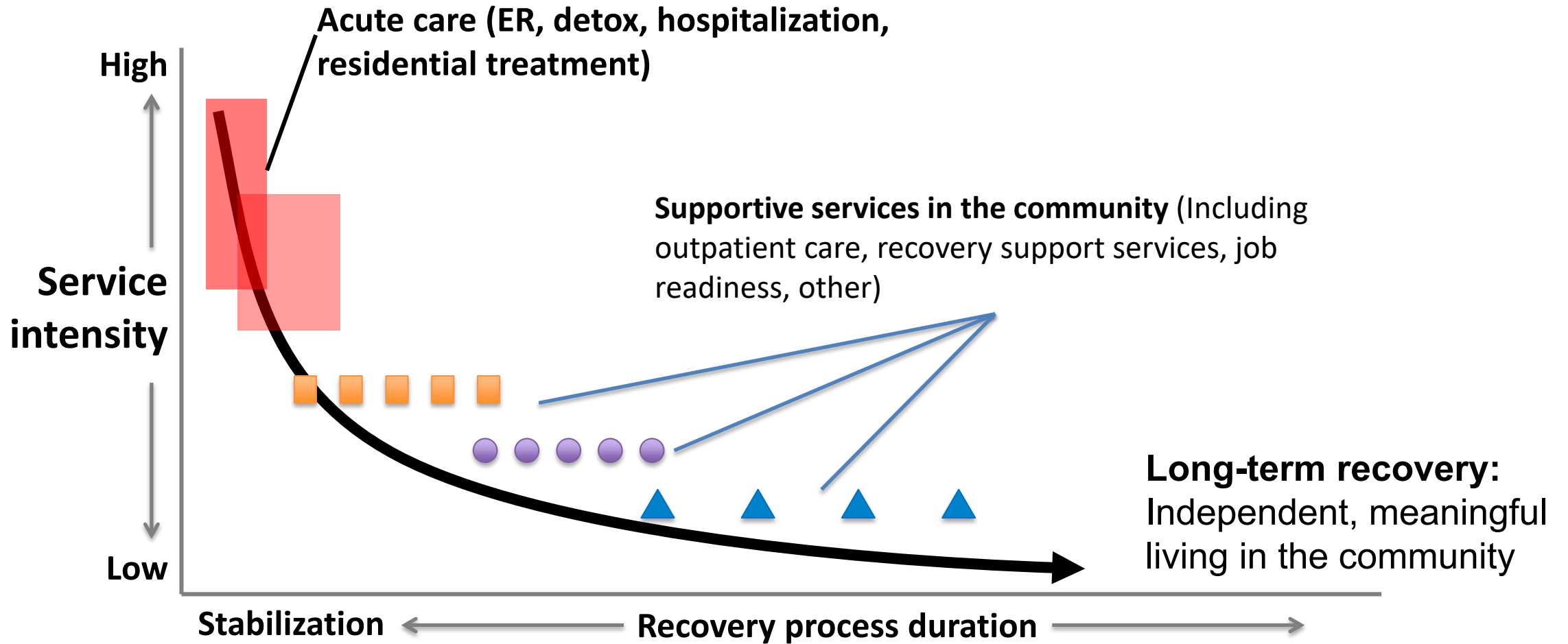
These trends affect peer services

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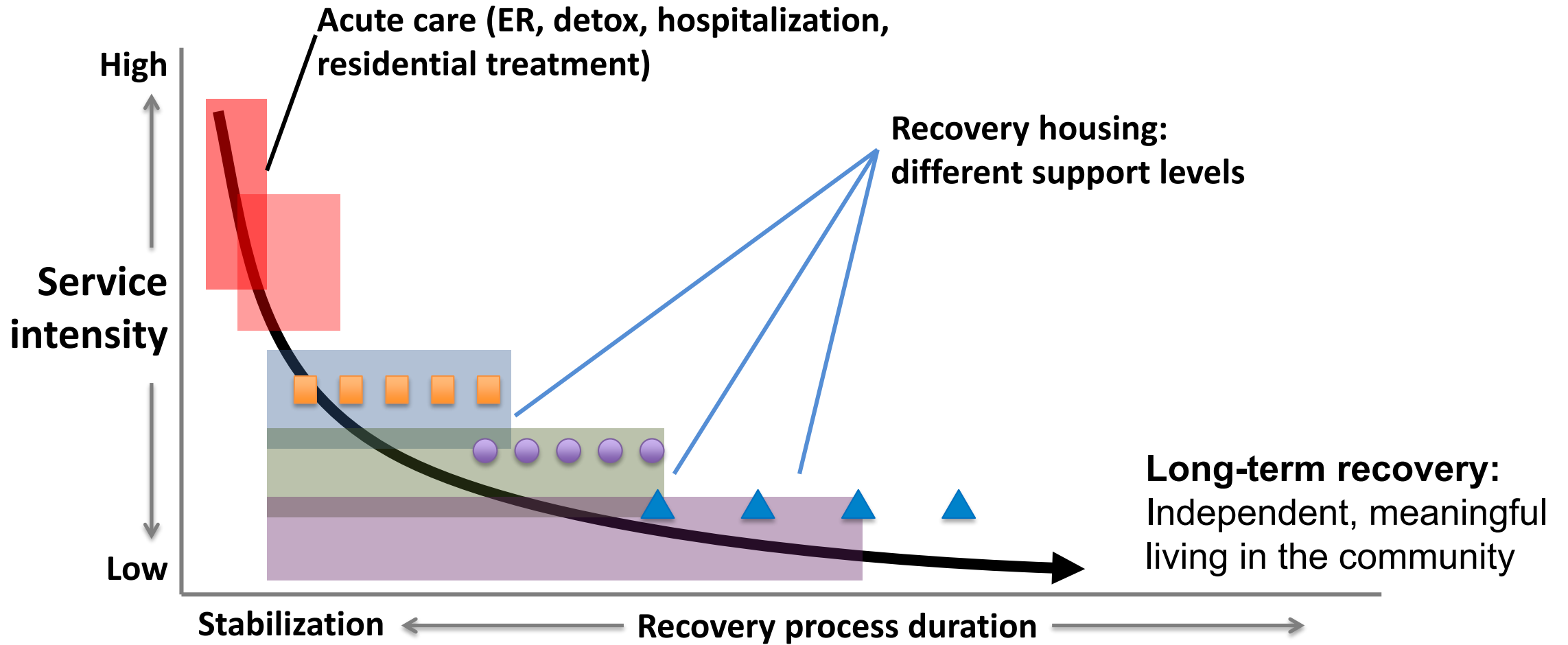
How recovery happens




How recovery happens



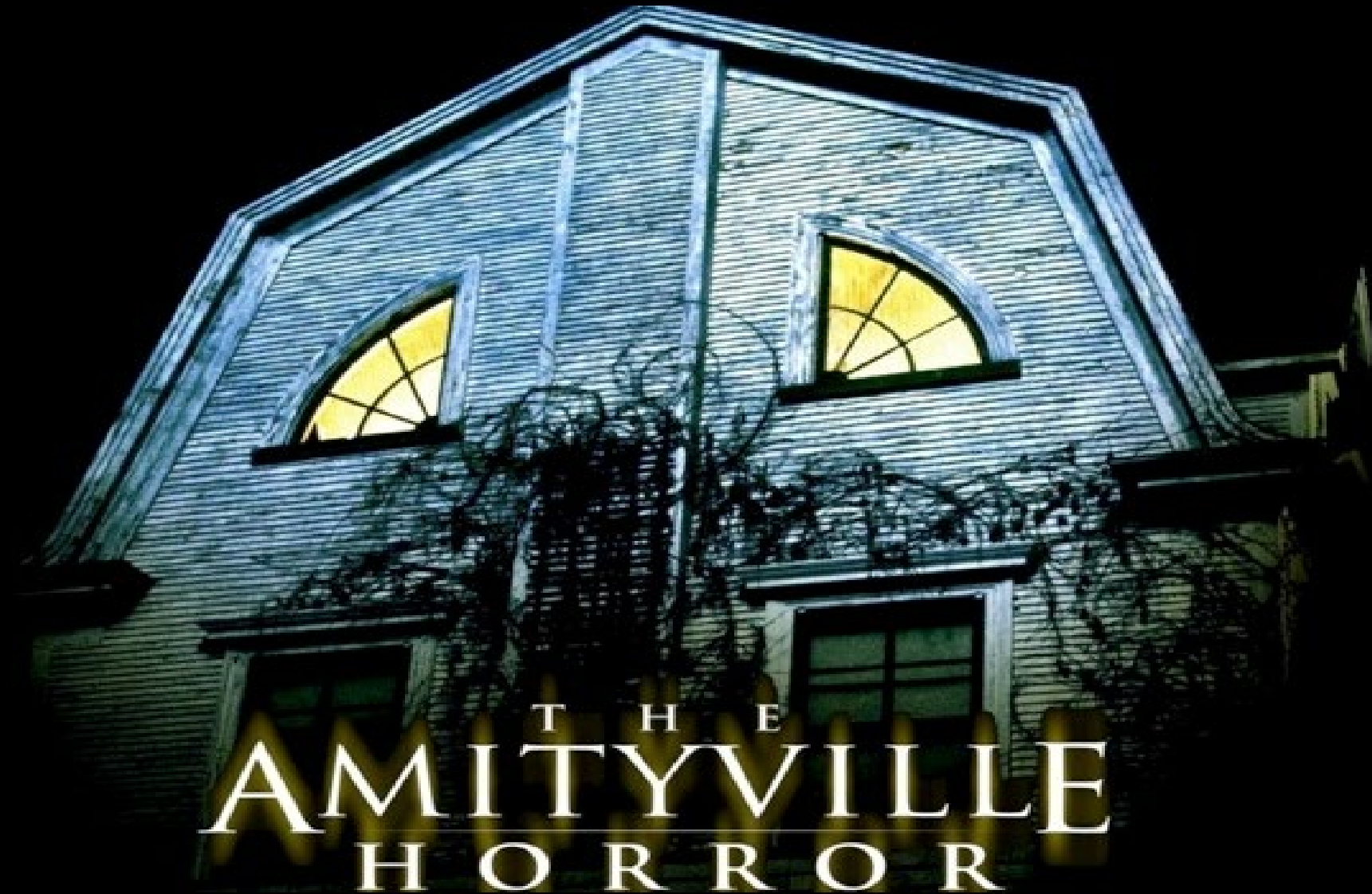
How recovery happens



A photograph showing two hands reaching towards each other in a field of tall, golden grass under a clear blue sky. The hands are positioned in the center of the frame, with one hand slightly above the other. The background is a soft-focus landscape of tall grasses and a clear sky. A semi-transparent white banner is overlaid across the middle of the image, containing the text.

Different perceptions of recovery residences

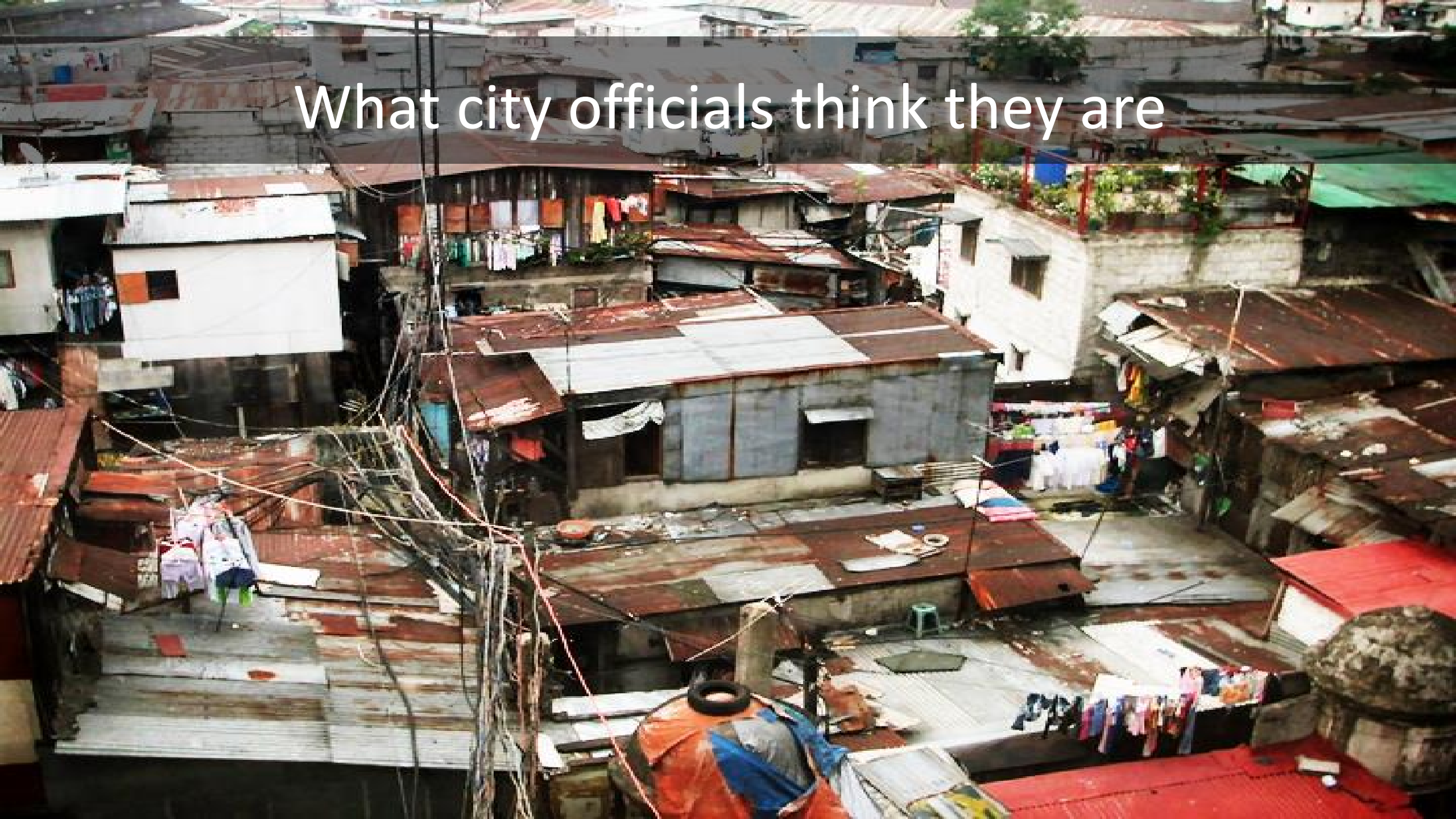
What the Neighbors think they are



Some families think they are ...



What city officials think they are



And some residents think they are





Shared housing

Individuals with substance use disorders

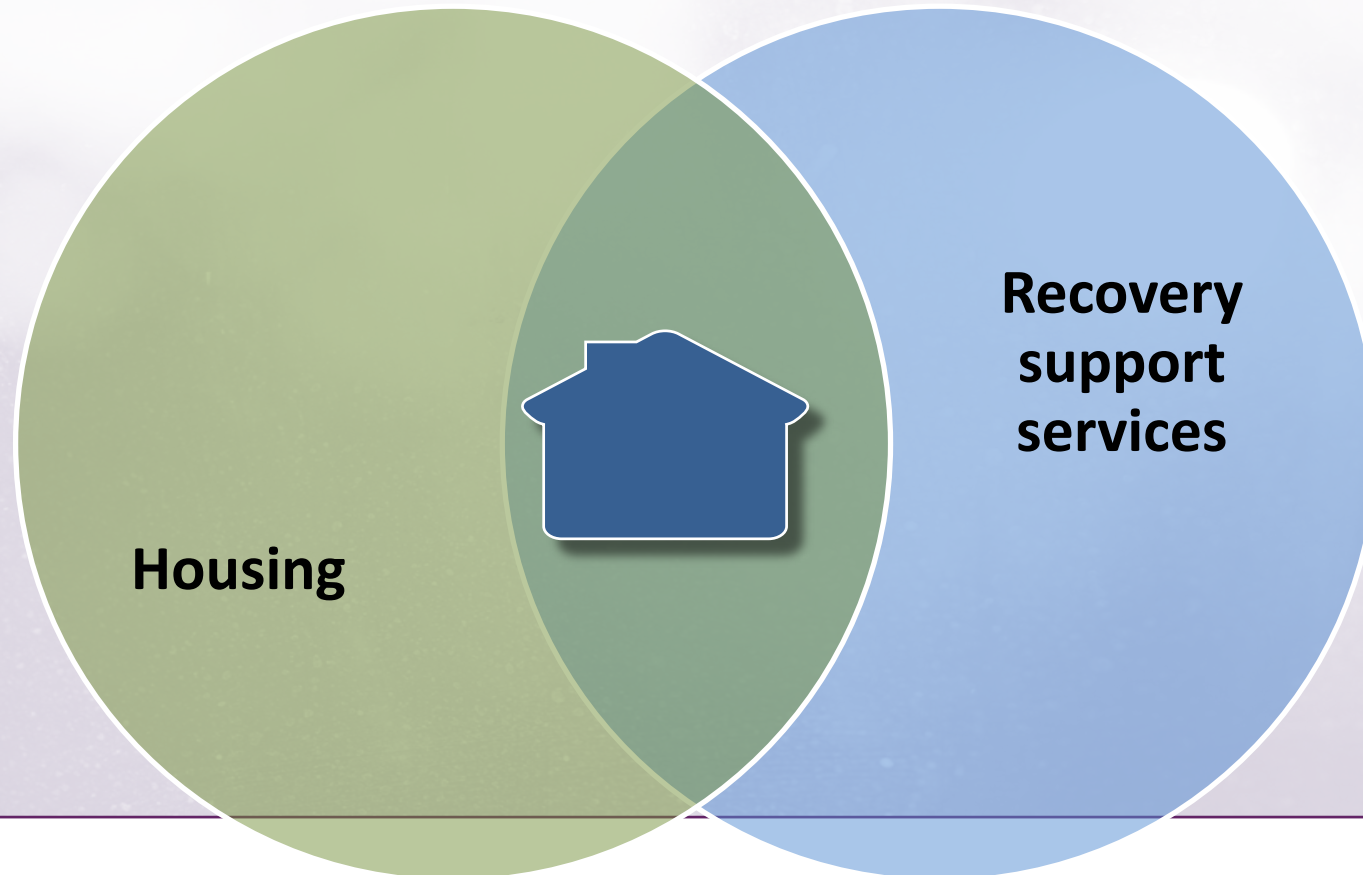
Abstinence-based

Peer recovery support

Operates as a family-like community

Recovery housing; recovery residences

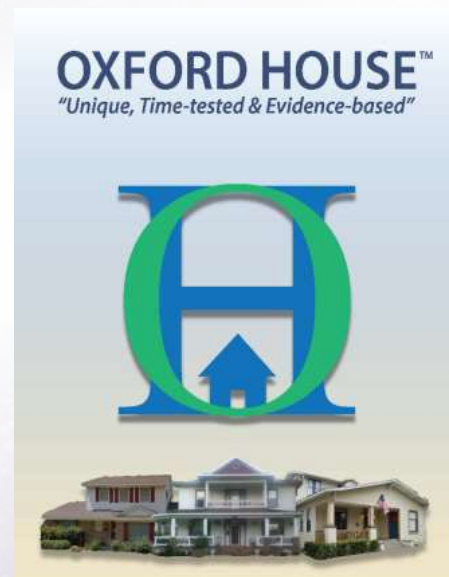
At the intersection of housing and recovery



Excellent recovery housing doesn't just happen

- Standards, ethics based on national best practices
- Provider accountability
- Consumer information and protections
- Provider support, continuing quality improvement
- Training, workforce development
- Integration into larger systems of care
- Local expertise, policy resource

National standards and support systems

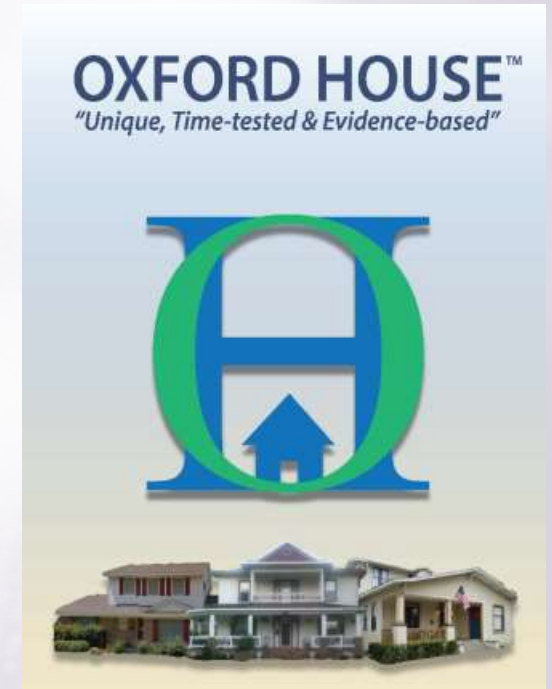


NARR at a glance

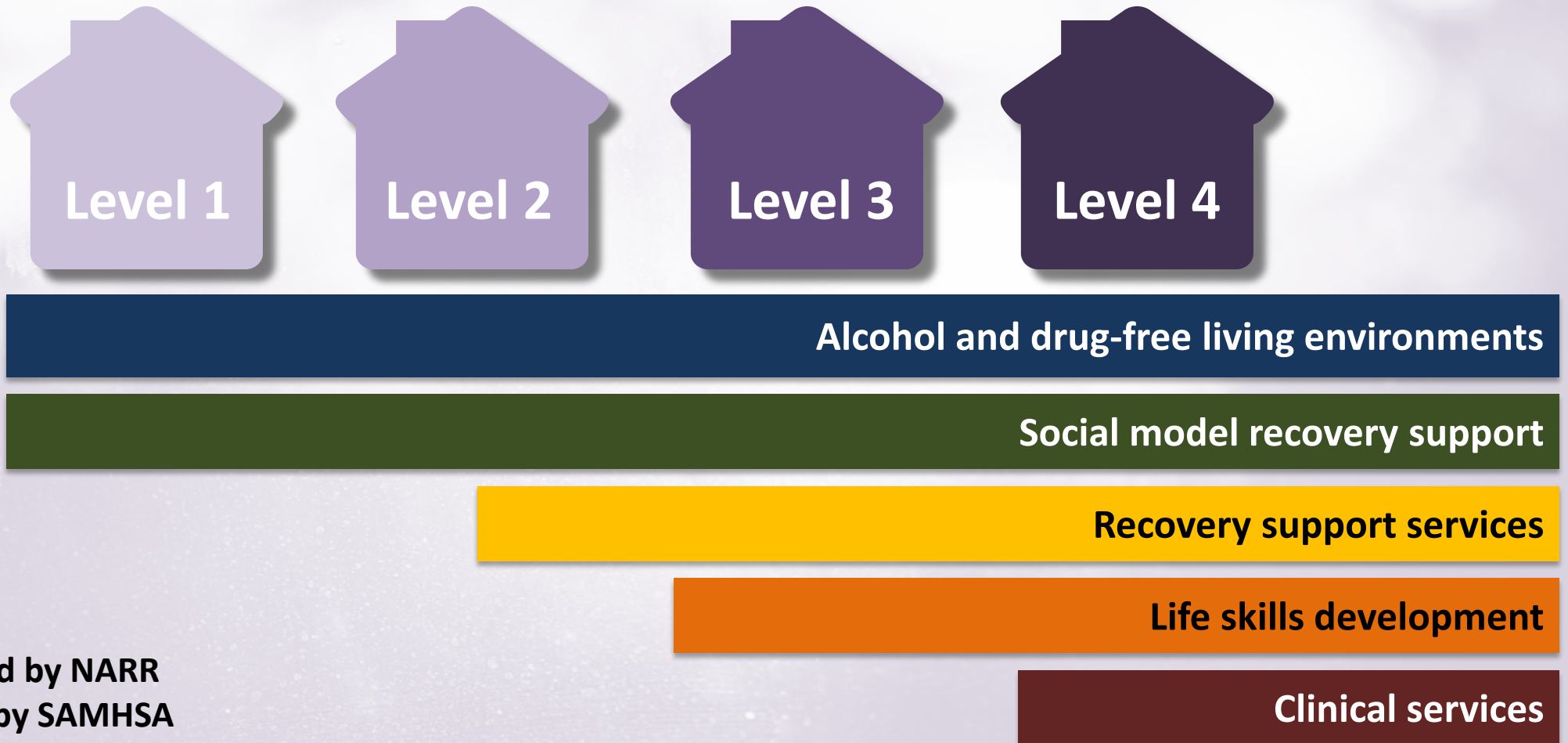
- Founded in 2011 by leading regional recovery housing experts, organizations; based on decades of best practices developed nationally
- ***National Standard and Code of Ethics***
- ***Certification program implemented by state affiliate organizations***
- Covers the full spectrum of recovery housing
- ***Operating model for statewide recovery housing support systems***
- Affiliate relationships in 30 states, more in development
- Training, technical assistance; working relationships with gov't agencies

Oxford House at a glance

- Founded in 1975 by individuals in recovery
- Standards, ethics codes
- Model is a pure peer-run recovery environment
- About 2,400 Oxford Houses nationally
- Contracts with several state governments
- Infrastructure of trained staff supports autonomous homes
- Resident training and resources

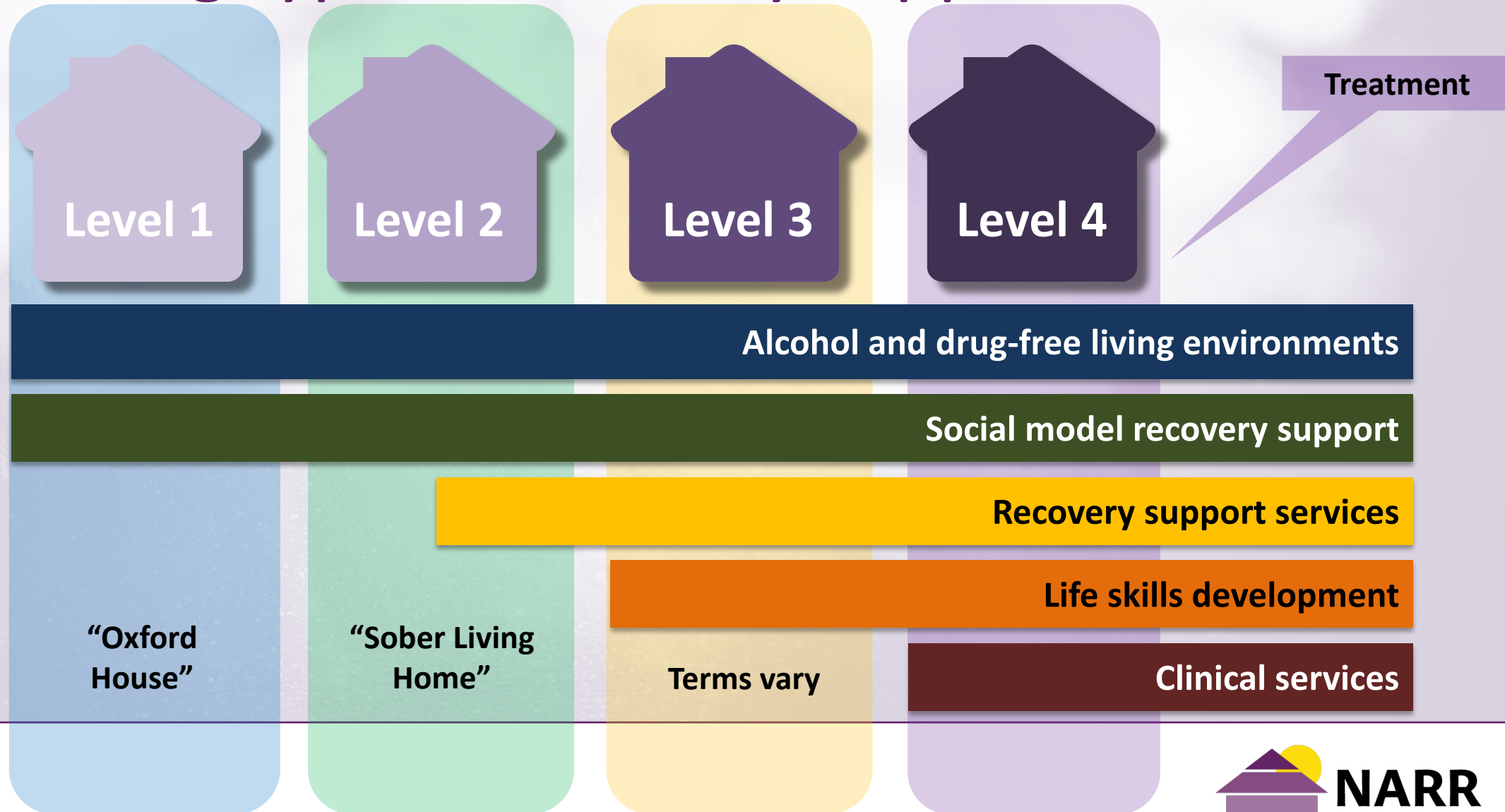


Housing types – recovery support levels

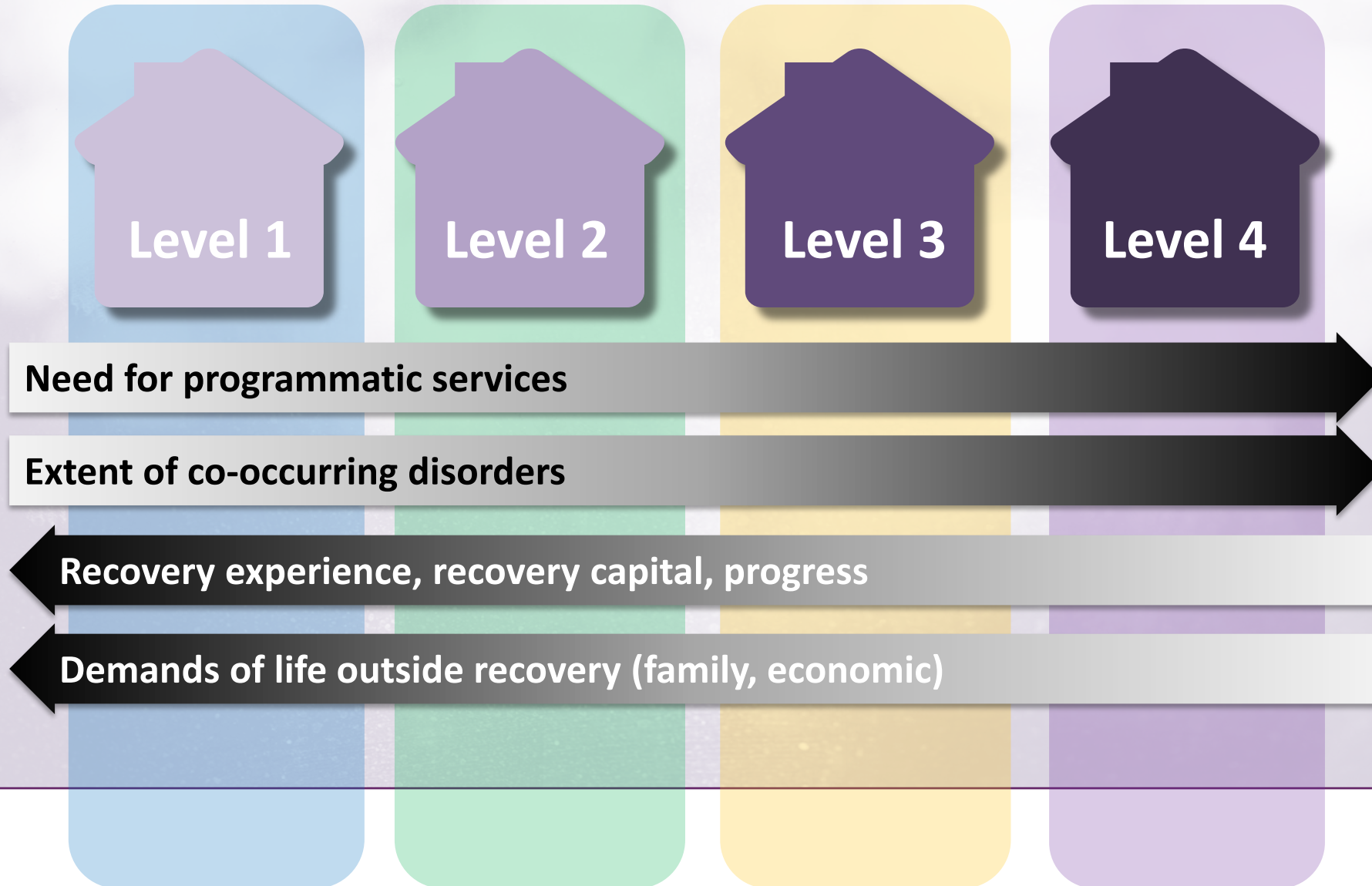


Developed by NARR
Adopted by SAMHSA

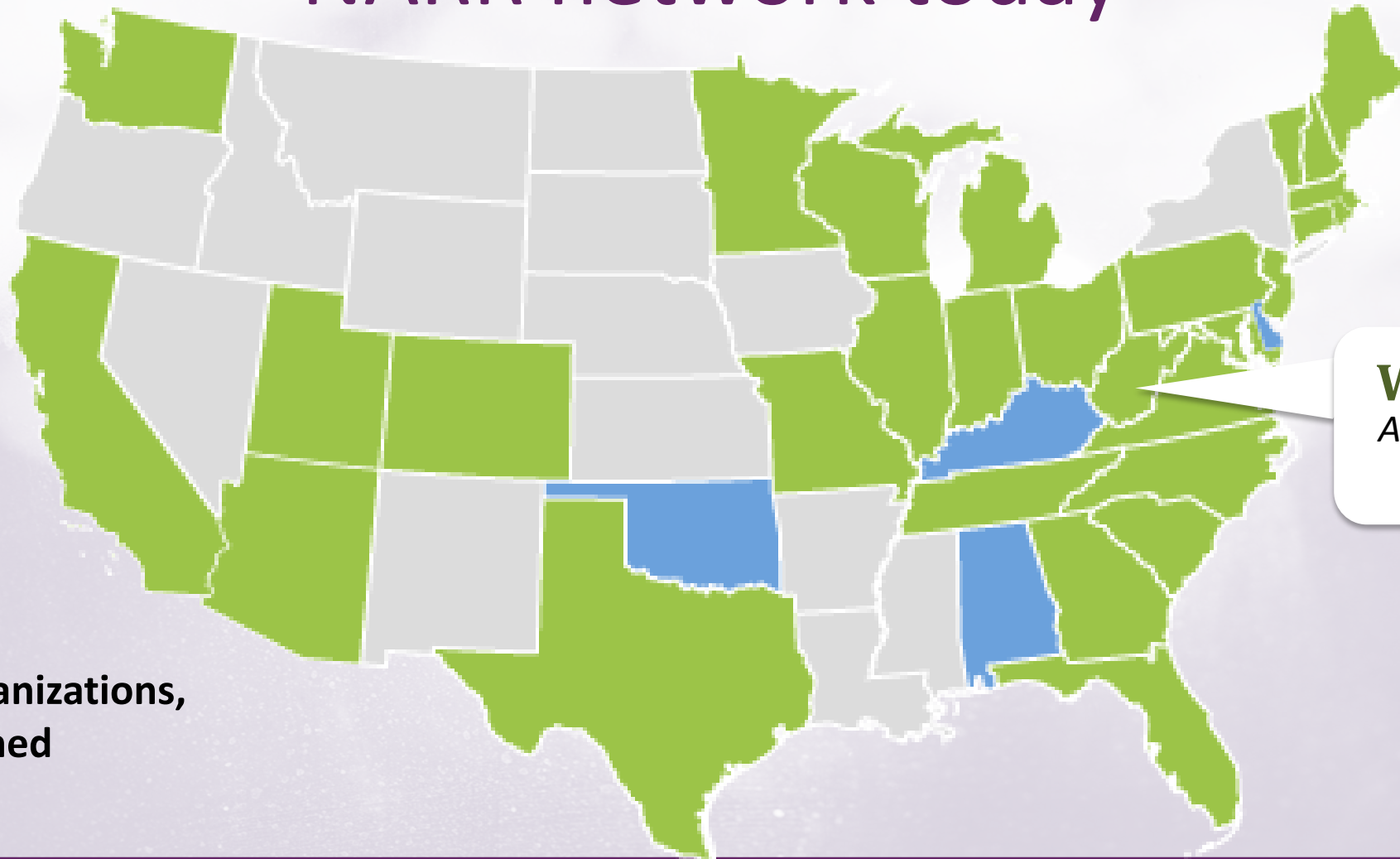
Housing types – recovery support levels



Different levels for different needs



NARR network today



**30 Affiliate organizations,
four being formed**

Standards

Administration

Physical Environment

Recovery Support

Good Neighbor

- 31 standard elements, divided into four major domains
- Roughly 100 individual indicators
- Download from the NARR site:
narronline.org

Companion guide



National Alliance of Recovery Residences (NARR)

National Standard 3.0
Compendium

- History of the development of Version 3 standards
- Explains evidence base, rationale for each rule
- Effective implementation of the standard
- Citations for extended reading

info@narronline.org

narronline.org

855-355-NARR (6277)

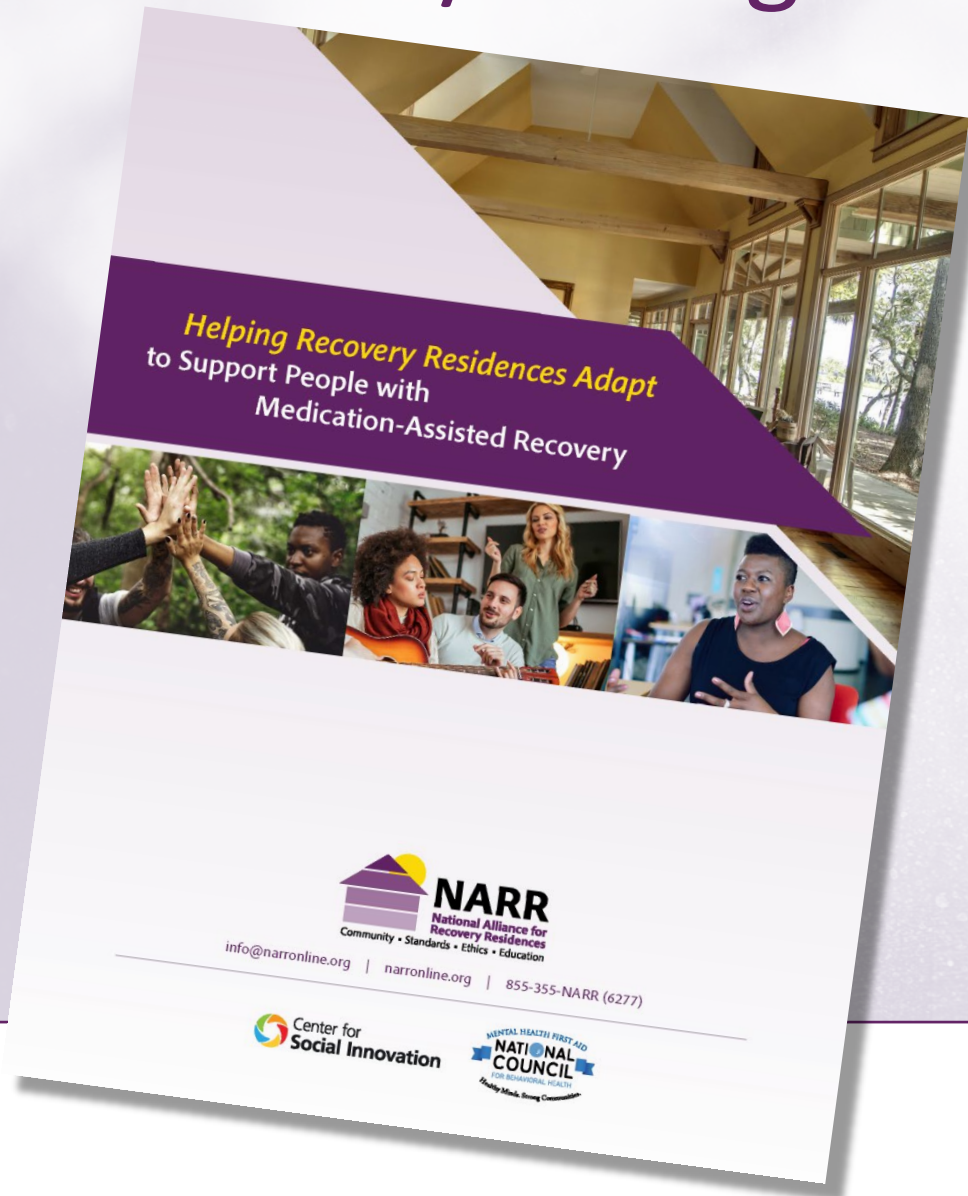
NARR supports people in recovery from addiction by improving access, availability, and quality of recovery housing & services.
NARR is the largest recovery housing organization in the U.S. NARR has affiliates in more than 26 states from coast to coast who collectively support over 25,000 people in addiction recovery living in more than 2,500 certified recovery residences.



Code of Ethics

- Separate from the residence standards
- Consistent with Version 3.0 standards, other professional ethics codes
- Binding on individuals; all persons in positions of responsibility, authority, including volunteers, contractors having contact with residents
- 20 ethical rules

MAT/MAR guide for residence operators



- Just released
- National Council for Behavioral Health, C4 Innovations, NARR
- Best practices for supporting residents receiving MAT
- Goal is “MAT-capable” residences
- Medication-assisted recovery

Assessment, certification

- Annual process
- Formal application
- Review of residence documents
- Structured interviews with operator, staff
- Site assessment
- Standards have evolved from “tell us” to “show us”

Recovery housing policy guide



- A joint effort between National Council and NARR with input from other stakeholders, including Oxford House.
- Provides state policymakers and advocates strategies, tools, and policy language that support the infrastructure of recovery housing, quality operating standards, and protections for people in recovery.
- Highlights three main sections:
 1. Protecting Recovery Housing
 2. Supporting Recovery Housing in Practice
 3. Sample Legislative Language

State system support elements

- Recognition of standards, certification of residences
- Incentives for becoming standards-compliant, submitting to oversight
- Provisions addressing patient brokering, insurance fraud, misleading advertising
- Funding for these elements:
 - Resident access, services
 - Capital costs, system expansion
 - System support

West Virginia Legislation



West Virginia HB 2530

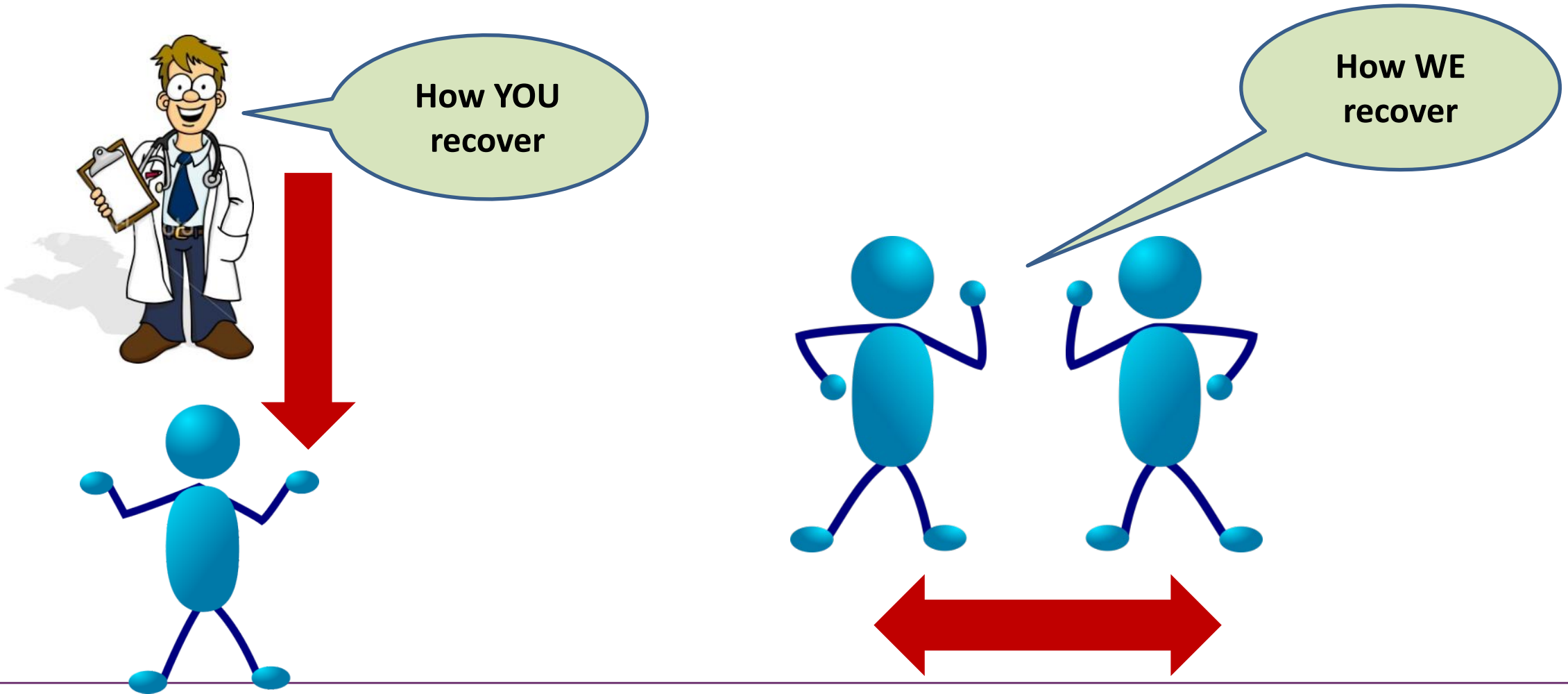
Bill features

- ***Legislative recognition*** of the superior value of quality recovery residences
 - Based on NARR national best practice standards
- ***Voluntary certification program*** for recovery residences
- ***Administered by WVARR*** under DHHR oversight
- Referrals; funded placements; funding access ***only to certified residences***

The Social Model of Recovery



Clinical treatment vs. social model recovery



Elements of the Social Model

- Emphasis on ***experiential knowledge*** gained through one's recovery experience. Residents draw on that experience as a way to help others.
- ***Recovery operates via connections between residents***, not between an individual resident and a professional caregiver.
- ***All residents are consumers and providers***, both giving and receiving help.

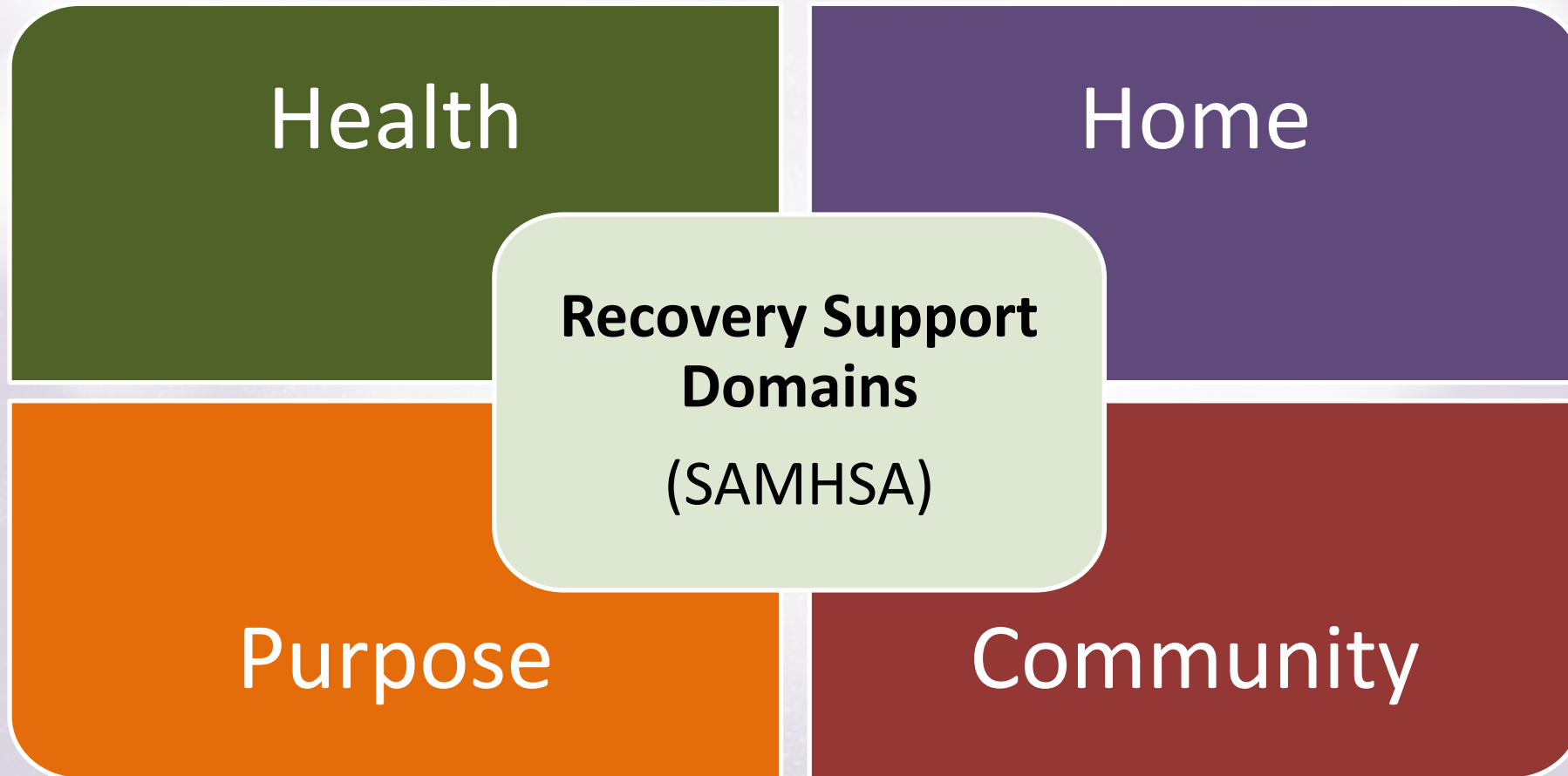
Elements of the Social Model

- As with the early 12-step recovery houses, ***involvement in shared recovery activities*** creates the basic framework for recovery.
- A positive sober environment that ***encourages support for abstinence*** is crucial.
- [SUD] is viewed as being ***centered in the reciprocal relationship between the individual and his or her surrounding social unit.***



Recovery Capital,
the Social Model
and Recovery Residences

Recovery is more than just abstinence



Personal goals and recovery capital



This is where I want to go



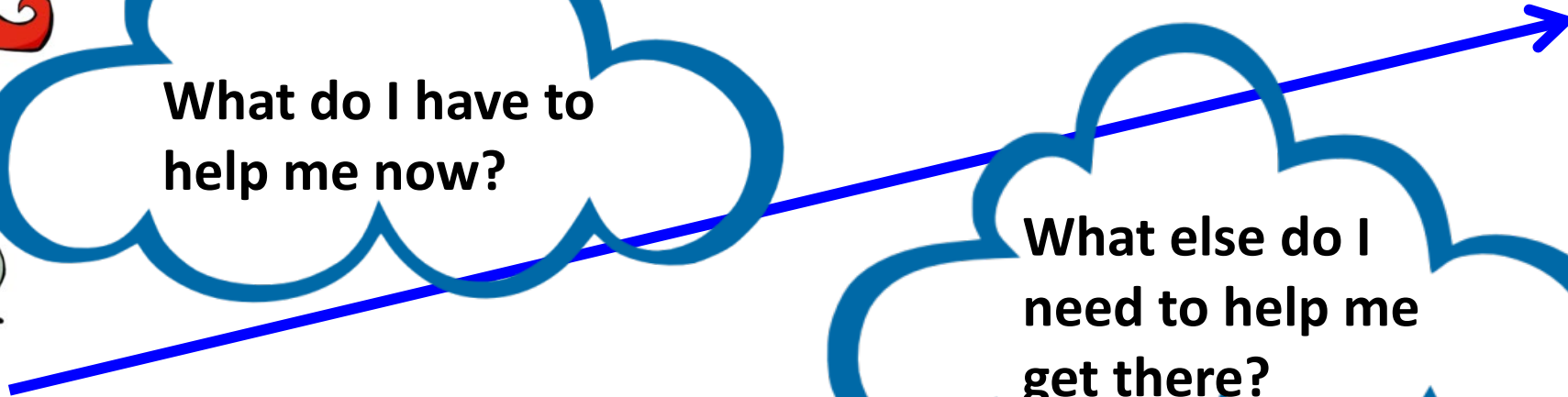
What do I have to help me now?



What else do I need to help me get there?



This is where I am now



Recovery capital defined

- Recovery capital is the *breadth and depth of **internal and external resources** that can be drawn upon to initiate and sustain recovery* from severe AOD problems ^[1]
- Resources that can **help us *maintain recovery***
- Resources that can **help us *achieve personal goals***
- Helpful in ***identifying strengths, needs***
- Having and/or acquiring recovery capital meaningfully aids recovery
- *Assessment of recovery capital can be **part of personal recovery planning***

[1] Granfield & Cloud, 1999; Cloud & Granfield, 2004

Recovery capital: The other side of a personal inventory

Liabilities

Character defects
Limited clean time
Damaged relationships
Fears, shame
Harm to others, self
Assorted wreckage of our past

Resources (Assets)

Personal values
Housemates
Recovery community
Sponsor, mentors
Safe place to live
Skills
Glimmer of hope
Family, friends, ???

Types of recovery capital

Personal Capital

General Health
Mental, emotional
wellbeing
Nutrition
Employment
Education, skills
Financial resources
Housing & living environment
Transportation
Clothing, personal
possessions

Social Capital

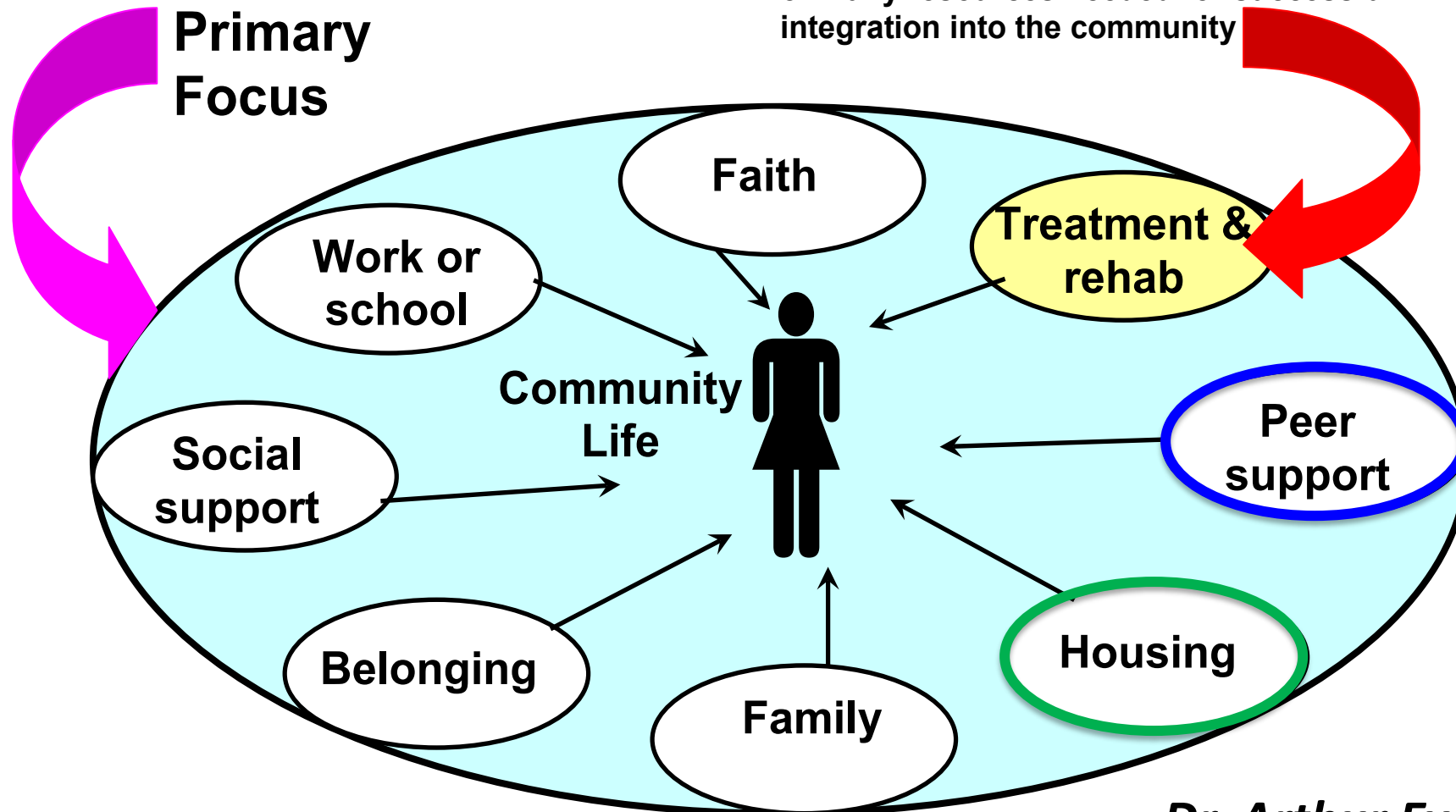
Family support
Significant other
Friendships
Reputation
Social support
Social mobility
Healthy lifestyle
Access to health care
Safety

Cultural Capital

Beliefs
Values
Spirituality
Sense of purpose
Sense of community
Cultural relevance of
available supports

Recovery-oriented Systems of Care

In the model, clinical care is viewed as one of many resources needed for successful integration into the community



Dr. Arthur Evans

Peer support specialists and recovery residences

Collaboration in helping people achieve their recovery goals



We have a lot in common

- Lived recovery experience
- Reliance on social model principles
- Involved in helping individuals set, make progress on, recovery goals
- Assist individuals in acquiring recovery capital
- Assist individuals in finding resources they need

Similarities

Most residence staff are peers

- Similar to support specialists, but different roles, boundaries
- Residence staff have 1:many relationships, not 1:1
- Similar support, development needs

Similar goals, different methods

- RRs and peer specialists connect individuals to the means for achieving their recovery goals

How you can help

- In your role, you interact with recovering individuals who don't live in safe, supportive environments.
- You interact with people who are not thriving, despite current efforts.
- Your advice is sought by people looking to make choices.
- Residents often need peer support outside their housemates.



Lessons for us from elsewhere

Immigrant communities provide parallels

- Viewed as 'other' by mainstream society
- Some needs are unique to this community
- Goals achieved through mutual assistance; specific services provided within the community
- Need help to transition from an old culture (addiction) to a new culture (recovery)
- Need to feel welcome, accepted, encouraged

Join us in October!



NARR
National Alliance for
Recovery Residences

St. Louis
Hilton at the Ballpark
October 14 - 16, 2019

Best Practices
Summit
for Recovery Residences

The background of the banner features a night view of the St. Louis skyline, including the Gateway Arch and the Old Courthouse.

For more information



569 Selby Avenue
St. Paul, MN 55102
(888) 877-4236
narronline.org
info@narronline.org

Dave Sheridan
Board President
dave.sheridan@narronline.org



Discussion

