



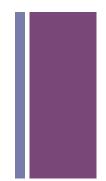
Challenges & Opportunities in Implementing Recovery Oriented Systems of Care:

Successful Approaches to Partnership Development and Systems Change.

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One great, strong, unselfish soul in every community could actually redeem the world." ~ Elbert Hubbard

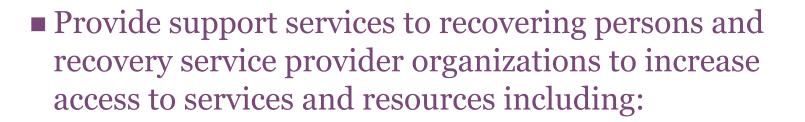


The Detroit Recovery Project Incorporated (DRP) strengthens, rebuilds, and empowers communities affected by drug and alcohol addiction, as well as other underserved populations. DRP supports individuals in identifying and resolving barriers to achieving a healthy and productive drug-free lifestyle.



- To motivate, educate, and empower members of the recovery community and support them on their journey to long-term recovery.
- To engage members of the recovering community in positive recovery-oriented activities that will assist members' commitment to recovery.
- To identify viable options to enhance recovery.
- To promote recovery and dismiss the stigma associated with addiction.





- Quarterly "Voice of Recovery" Newsletter
- Associations with faith-based organizations
- A speakers bureau to highlight and emphasize Recovery initiatives and Successes
- Annual community-wide drug-free events

+ A Community Needs Assessment

In order to better understand the specific strengths and needs of the Recovery Community in Detroit, a survey was administered and focus groups were conducted with members of the Recovery Community (Trent and Smith, 2002).

Findings from the Needs Assessment Study



- Three hundred seventy-one (371) recovering persons completed the needs assessment
- 72.1% are male and 27.9% are female
- Respondents ranged in age from 18 years to over 50
- The modal age group is 36 to 50 years
- The vast majority are African-American 84.8%

Findings from the Needs Assessment Study

Participants surveyed were from the following treatment modalities:

- Residential treatment
- Outpatient treatment
- Methadone treatment
- Aftercare treatment

+ Survey and Focus Group Findings

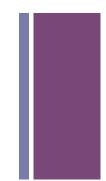
- Treatment programs include a system of support, including spiritual support, that is not available once the treatment experience is over.
- With short episodes of treatment, the principles of recovery are not fully integrated into the person's value, belief and behavior systems.
- Recovering persons often lack access to life skills training, educational opportunities and work skills training
- Recovering persons often lack financial support, health insurance and employment.

The Evolution of Detroit Recovery Project Inc.

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- In 2002, the Bureau of Substance Abuse Prevention, Treatment & Recovery funded the Partnership for a Drug Free Detroit, \$100,000 to begin a special project, entitled the Detroit Recovery Project as a response to the Community Needs Assessment.
- After a year and a half of success in providing recovery services, DRP received its first federal funding from the Substance Abuse Mental Health Service Administration (SAMHSA), Center for Substance Abuse Treatment (CSAT) to be an official Recovery Community Support Program (RCSP) under the auspices of the Partnership for a Drug-Free Detroit when it received a four-year grant for \$1.2 million.
- In July of 2005, DRP received its non-profit 501© 3 status, and became an independent non-profit organization in Detroit, Michigan.

+ Recovery Defined



"We endorse a broad vision of recovery that involves a process of restoring or developing a positive and meaningful sense of identity apart from one's condition and a meaningful sense of belonging while rebuilding a life despite or within the limitations imposed by that condition."

Recovery Core Values

- Equal Opportunity for wellness
- Recovery encompasses all phases of care
- Entire systems to support recovery
- Input at every level

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- Recovery-based outcome measures
- New nomenclature

•System-wide training culturally diverse, relevant and competent services

- Consumers review funding
- Commitment to Peer Support and to Consumer-Operated services
- Participation on Boards, Committees and other decision making bodies
- •Financial support for consumer involvement.

+ Recovery Core Values, Continued

Participation

- No Wrong Door
- Entry At Any-Time
- Choice is respected
- Right to Participate
- Person defines goals

Programming

- Individually tailored care
- Culturally competent care
- Staff know resources

Funding Operations

- No outcomes, no income
- Person selects their Provider
- Protection from undue influence
- Providers don't oversee themselves.
- Providers Compete for business

+ A Recovery-Oriented System Care

 "A recovery oriented system of care identifies and builds upon each individual's assets, strengths, and areas of health and competence to support achieving a sense of mastery over his or her condition while regaining a meaningful, constructive, sense of membership in the broader community.

+ Systems of Care Elements

 The guiding principles on which the Detroit Recovery Project is built begin with the 17 elements of a recovery oriented systems of care perspective.

 We are a Recovery Oriented System of care-which means the DRP provides genuine, free and independent choice from an array of treatment and recovery supports that are individualized, unbundled packages over a life time.

DRP's Continuum of Care

Ensuring continuity of care

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- Providing comprehensive services to the recovery community through a "one-stop-shop" philosophy.
- Ensuring a smooth transition from each level of service
- Offering Individalized recovery planning
 - Supporting consumers in developing a long-term recovery plan that extends beyond involvement with the DRP.
 - Working with each person in developing a customized recovery plan that is "real" to them.
 - Utilizing the individual's resources and working collaboratively with them to develop new resources.
- Identify and address community barriers to recovery
 - Assisting the consumer with navigating social service & recovery community systems.
 - Help with accessing needed services through peer support.



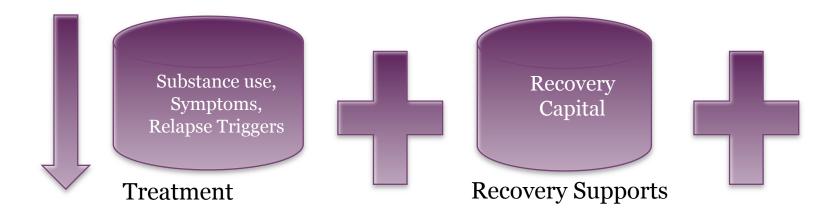
* Many Pathways to Recovery

- The Detroit Recovery Project recognizes that there is "no wrong road" to recovery, but recovery can take place through many pathways, such as:
 - Mutual support groups
 - Profession treatment
 - Faith-based
 - Medication-assisted
 - "Natural" on your own
 - And many more such as the Detroit Recovery Project Incorporated

What are Recovery Support Services?

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Compliment the focus of treatment, outreach, engagement and other strategies and interventions to assist people in recovery and in gaining the skills and resources needed to initiate and maintain recovery.



+ Recovery Support Services aim to:

- 1) Remove personal and environmental obstacles to recovery (e.g., through the provision of child care or transportation)
- 2) Enhance identification of and participation in the recovery community (e.g. through connecting people to treatment and to 12-step and other mutual support/recovery-oriented groups)
- 3) Enhance the person's "recovery capital" (e.g., by assisting people in addressing their basic need, gaining employment, going back to school, forming sober social relationships, etc.)

The importance of early and sustained recovery support is further indicated by treatment-related studies confirming that:

- Recovery from severe AOD problems are not fully stabilized (point at which the risk of future lifetime relapse drops below 15%) until between four to five years of sustained remission (Vaillant, 1996; Dawson, 1996; Jin, Rourke, Patterson, et al, 1998) or longer for some patterns (e.g., opiate addiction) (Hser, Hoffman, Grella, & Anglin, 2001)
- The transition from recovery initiation to lifelong recovery maintenance is mediated by processes of social support (Jason, Davis, Ferrari & Bishop, 2001; Humphreys, Mankowski, Moos & Finney, 1999)
- □ Assertive approaches to post-treatment continuing care can elevate long- term recovery outcomes in adolescents (Godley, Godley, Dennis, et al, 2002) and adults (Dennis, Scott & Funk, 2003).

The importance of early and sustained recovery support is further indicated by treatment-related studies confirming that:

- Most people with alcohol- and other drug-related problems do not seek help through mutual aid or professional treatment (Kessler, 1994; Cunningham, 1999; Cunningham & Breslin, 2004)
- □ Less than half of those admitted to publicly funded addiction treatment successfully complete treatment (SAMHSA, 2002; Stark, 1992)
- More than 50% of individuals discharged from addiction treatment resume alcohol and/or other drug (AOD) use within the following twelve months (Wilbourne & Miller, 2003), most within 30-90 days of discharge (Hubbard, Flynn, Craddock & Fletcher, 2001).

+ Four Models of Social Support

There are four models of social support through which the Detroit Recovery Project meet the many needs of the recovery community.

- These four models are:
 - Informational Support
 - Instrumental Support
 - Emotional Support
 - Companionship Support

+ Informational Support

- Informational Support is characterized by assistance with knowledge, information, and skills. Informational support is shown through the facilitation of Life Skills training, Job Skills training, Educational Assistance and Health/Wellness
 - Information.
- The Detroit Recovery Project offers:
 - Bi-weekly Life Skills workshops
 - Bi-weekly Employability Workshops
 - Weekly GED Preparation Classes
 - Weekly Computer Education Workshops
 - Weekly Health Education Workshops

+ Instrumental Support

- Instrumental Support is characterized by concrete assistance in helping others get things done, such as transportation to support groups, clothing, job application assistance, etc.
 - Housing referrals
 - Employment referrals
 - Clothing Referrals
 - Food assistance
 - Furniture referrals
 - Supplemental service referrals
 - Intra-agency referrals





- Emotional Support is characterized by demonstrations of empathy, care, and concern. Emotional support is shown in the Detroit Recovery Project through mentoring, coaching, and support groups.
 - Women's support groups
 - Dual Recovery Anonymous
 - In-Time of Illness Group
 - Common Needs 12-Step Meetings
 - Morning Medications & Affirmations



+ Companionship Support

- Companionship support is characterized by the feeling gained by being connected to others, and having a social group and/or community. This is shown through alcohol and drug-free social and recreational events, community and cultural events.
 - Safe & Sober March and Rally
 - Recovery Sports Leagues Baseball and Bowling
 - Annual Pancake Breakfast
 - Annual Prayer Breakfast
 - Recovery Warriors Banquet
 - Poetry and Karaoke events
 - Annual Thanksgiving and Christmas dinners
 - Detroit Northwest Activities Center Exercise Facility "Work-Out Sessions"

+ Value of Peer to Peer Services

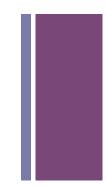
- □ Promote long-term recovery
- □ Reducing Relapse
- □ Minimize negative effects during early intervention
- □ Identification
- □ Non-threatening

Peer Retention Strategies

- □ Peers looking to give back to the community
- □ Peers that are connected to the system (ex. Social Security)
- □ Peers that are retirees
- □ Peers that are looking to be placed temporarily
- □ Peers that are in college seeking internship opportunities
- □ Monthly peer training

+ DRP Program Components

- Co-Occurring Peer Empowerment Program (COPE)
- Strengthening Recovering Families Program (SRFP)
- Comprehensive Outpatient Recovery Services (CORS)
- Health Education
- Relapse Prevention
- Detroit Recovery Project Coalition (DRPC)





- Peer-led recovery program for individuals re-entering the community from jail or prison.
- Co-occurring, meaning a person who has mental health and substance abuse disorders
- Facilitated by Peer Support Specialists and Case Managers, serving as coaches, mentors, and role models
- Dual Recovery Anonymous, 12-Step Support Groups, Peer Support Groups, Mentorship, and ancillary services

+ Strengthening Recovering Families

The Strengthening Families Curriculum is an evidence-based practice developed by Karol Kumpfer of the University of Utah. The DRP has adopted it as our Strengthening Recovering Families Program, tailored especially for the metro-Detroit recovery community.

- 14-week Program for Parents and Children of all ages
- Substance abuse prevention and awareness Parenting Curriculum
- Meals and transportation

Addressing the following topics:

- Teaches parents how to Cope with and recognize depression
- How to effectively handling violence and aggression
- Creating school success vs. school failure
- Structured activities in-house and planned fieldtrips

Comprehensive Outpatient Recovery Services

- Free intake assessment
- Intensive outpatient
- One-on-one counseling
- Group therapy

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- Psycho education
- Relapse prevention
- Sober living skills
- Family counseling
- Case management
- Free aftercare groups
- Alcohol and drug screening





The Health Education Component is a program funded by the Bureau of Substance Abuse Prevention, Treatment & Recovery. This program is an opportunity for the DRP to provide health prevention and education to the community through:

- Health Maintenance Education
 - Topics such as diabetes, high cholesterol and nutrition are discussed.
- HIV Testing and Education
 - Confidential, Anonymous HIV testing with qualified staff. Walkins or appointments.
- STD Education
 - Education on Risky Behaviors
- Hepatitis Prevention and Vaccination
 - Hepatitis education and Vaccinations are available for individuals who are at high-risk for Hepatitis C.

+ Relapse Prevention Center

Serving individuals who are in need of recovery support services who live in out-Wayne County or are in the Wayne County Jailbased program.

Offering support through the following:

- Information and referrals
- Housing assistance
- 12-Step and Men/Women's support groups
- Computer education classes

Ongoing workshops

- Cognitive Behavior Therapy (CBT)
- Relapse Prevention
- Life Skills Preparation
- Employment and Career Readiness/MRS Partnership

+ DRP Volunteers

Service is the rent we pay to be living. It is the very purpose of life and not something you do in your spare time. ~Marion Wright Edelman

Importance of DRP Volunteers

- DRP utilizes volunteers in everyday activities, including:
 - Planning, implementation, and facilitation of programs
 - Office Tasks
 - Transportation
 - Assist in the DRP Clothes Closet
 - Facilitation of community presentations and events



+ Detroit Recovery Project Coalition



A Coalition that was birthed out of the need to work collaborative with organizations in the metropolitan Detroit area that have common goals.

 The first Federally Funded program under the DRPC is the Love Detroit Youth Media Anti-Drug Campaign.
The media campaign is driven and implemented by youth within target zip codes throughout the City of Detroit.

+ DRP Regulations and Reports

- DRP is required to submit reports regarding programs and services for all Federal, State, County, and City funded programs
- DRP is subjected to on-site inspections, surveys, or reviews by personnel from all funding sources

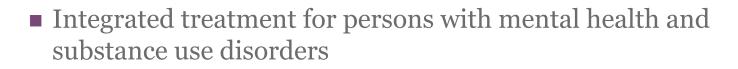
DRP maintains reviews accessible to all interested parties



A Six month follow up with DRP Members and Program Participants resulted in the following findings:

- 91.4% of participants remained abstinent (Did not use alcohol or illegal drugs)
- 100.0% of participants had no involvement with the criminal justice system.
- 54.3% were currently employed or attending school
- 11.4% experienced no alcohol or illegal drug related health, behavioral, social consequences
- 51.4% had a permanent place to live within the community
- 100.0% were socially connected
- Currently, the DRP is collaborating with the University of Michigan Community Based Research Fellowship Program for further research.
 *SAMHSA/CSAT GPRA Reporting System, January 2006; N=35





Peer recovery and recovery support

Prevention CAIT

 CARF Accreditation (Commission on Accreditation of Rehabilitation Facilities)





+ Evidence Based Best Practice

- Four Models of Social Support
- Strengthening Families
- APIC (Assess, Plan, Integrate, Coordinate)
- BRACES (Behavior Specificity, Resources, Accountability, Comprehensive, Evaluation, Systems)
- Cognitive Behavior Therapy (CBT)

Local and National Collaborative Partners:

- City of Detroit Department of Health and Wellness Promotion (DHWP)
- City of Detroit Bureau of Substance Abuse Prevention, Treatment & Recovery (BSAPTR)
- Detroit Rescue Mission Ministry (DRMM)
- Faces and Voices of Recovery (FaVoR)
- Great Lakes Addiction Transfer Technology Center (GLATT-C)
- Partners for Recovery
- Therapeutic Communities of America
- Community of Anti-Drug Coalitions of America (CADCA)
- University of Michigan/ AmeriCorps
- Partnership for a Drug-Free Detroit
- Tri-Cities Tobacco Reduction Coalition
- National Council Alcohol Drug Dependency-Greater Detroit Area (NCADD-GDA)

+ DRP Satellite Sites

Administrative Office Detroit Recovery Project, Inc. 1151 Taylor Detroit, MI, 48202 P: 313.876.4048 F: 313.876.0913 <u>Relapse Prevention Center</u> 211 Glendale, Suite 300 Highland Park, MI, 48203 P: 313.868.0721 F: 313. 868.0306

Welcome Center 355 Grand Blvd. Detroit, MI, 48207 P: 313.579.5462 F: 313.579.9614 Comprehensive Outpatient Recovery Services 18954 James Couzens Detroit, MI, 48235 P: 313.864.5306 F: 313.864.5326

For more information visit us at www.detroitrecovery.org

