Whole Health Recovery Recovery
Four Dimensions of the Recovery Process

HEALTH
Overcoming or managing one’s disease(s) as well as living in a physically and emotionally healthy way

HOME
A stable and safe place to live

COMMUNITY
Relationships and social networks that provide support, friendship, love, and hope

PURPOSE
Meaningful daily activities, such as a job, school, volunteerism, family caretaking, or creative endeavors, and the independence, income and resources to participate in society
Recovery Housing or Recovery Residence is preferred.

Why? It implies “recovery” is the priority and because words matter.
Recovery Residences (RR)

A 170+ Year Peer-Led Legacy

1840s
- Earliest recorded Recovery Housing

Mid-1900s to present
- AHHAP – Assoc. of Halfway House Alcoholism Programs
- Workforce training & certification

Late 1900s to present
- 70s: Oxford House, Inc.
- 70/80s; regional orgs formed: CAARR, GARR, SLN...
- Regional standards, training and certification

Early 2000s to present
- More regional orgs: MASH, CCAR...
- Regional standards, training and certification

2011 +
- National Alliance for Recovery Residences (NARR)
What is Recovery Housing?

Sober, safe and healthy living environments that promote recovery from alcohol and other drug use.

Residential services are based on the social model of recovery.

Services range from long-term living environments that includes peer-to-peer recovery support programs that integrate the medical model to varying degrees.

Service intensity among levels of recovery residences varies based on the needs of the residents served.
Indiana Recovery Housing Landscape

6.75 Million – Total Population

675,000 with Substance Use Disorder (10% of Population)

If 5% of the 675k could benefit from Recovery Housing, we need 33,750 Beds

Indiana currently has approximately 2,000 RR Beds

Of 92 Counties – 63 without Recovery Housing, primarily rural counties

Over 65% of our current Housing is located in Marion and Allen Counties (our two most populated counties)

Currently serving less than 6% of population in need Recovery Housing across our state
Who is Recovery Housing For?

- Those who are actively working to live alcohol and drug-free lives on a day-to-day basis.
- Those who desire a safe and structured living environment with others who share the goal of sobriety.
- Those who want to engage in support, services, and/or treatment opportunities to further their recovery.
- Those who are at-risk of homelessness because they are exiting traditional treatment, incarceration, military duty or are living in a home or neighborhood that puts them at risk for using substances.
Outcomes

Multiple studies show that recovery housing leads to high rates of employment (79-86%)

Recovery homes have also been shown to:

- Decrease substance use
- Decrease incarceration rates
- Increase income
- Increase family and social functioning
- Improve psychological and emotional well-being
- Increase quality of life measures
2016: INARR is formed, applies & receives 501(c)3 Status. Board is populated with Recovery advocates and professionals. Meet with policy makers and state legislators, to discuss best practices in other states (Ohio & Massachusetts). www.inarr.org is launched.

2017: Recovery housing included in Indiana law, all counties encouraged to plan for recovery housing throughout Indiana, state and local funding provided for recovery housing via Recovery Works. DMHA contracts with INARR to provide TA, and to begin reviewing and certifying recovery housing in Indiana per the NARR standards.

2020: INARR has now provided technical assistance and certified 115 Recovery Residences across the state of Indiana.
House Bill 1006 & Senate Bill 402 – “Mental Health Matters”

Requires Recovery Residences to be certified to NARR standards, overseen by DMHA (Division of Mental Health Addiction).

DMHA contracts with INARR to review and certify Recovery Residences.

Recovery Residences must be INARR certified to qualify for Recovery Works funding.
National Alliance for Recovery Residences

Comprehensive nomenclature

National standards to promote quality

Fidelity Review program

32 state affiliate organizations (4,000+ Recovery Houses & 100,000+ Residents annually)
Recovery Residence Levels

I
Peer-run
Peer recovery support in a democratically run living environment.

II
Monitored
Peer recovery support and staff-monitored structure.

III
Supervised
Peer recovery support, staff-monitored structure plus structured (re)habilitative life skill development.

IV
Service Provider
Peer recovery support, staff-monitored, life skills and clinical programming.
Recovery Housing providers require support in connecting and collaborating with established systems of care.

Recovery Housing exists at the intersection of Recovery, Treatment, and Housing.
What problem are we trying to solve?
STATE OF ADDICTION: INDIANA

- Indiana providers wrote 74.2 opioid prescriptions for every 100 persons, a rate that was 26% higher than the national average.
- Indiana experienced 1,800 drug overdoses deaths in 2017, up 22% from 2016.
- Indiana had the 14th highest drug overdose death rate in the U.S. in 2017.
Dual Diagnosis / Co-Ocurring Disorder

37% of alcohol abusers & 53% of drug addicts also have at least 1 serious mental illness.

Signs and symptoms of a dual diagnosis:
- Extreme mood swings
- Inability to control their moods
- Inability to hold down a job or long-term relationship
- Legal or financial problems
- No improvement in these symptoms even after they’ve been sober for two weeks or longer

The signs and symptoms of addiction and dual diagnosis often overlap. Common signs and symptoms of people with a dual diagnosis include:
THE TOP TEN IDENTIFIED PRIORITIES INCLUDE:

- Access to care
- Mental and behavioral health
- Obesity
- Substance use disorders
- Nutrition and physical activity
- Diabetes
- Tobacco use
- Heart disease
- Cancer
- Maternal and infant health
Withdrawal Management (ASAM Beds)
Medication Assisted Treatment (MAT)
Primary Medical Care
Behavioral Health Care
Recovery Housing
Peer Recovery Support Services
12 Step Program
Case Management
Skills Training
Employment/Education Assistance
Housing Assistance
Whole Health Recovery

Acute Care – WHRC

Recovery Housing (NARR IV & III)

Next Step Housing (NARR II & I)
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‘A Model for Indiana and the Country’
White House official praises innovative whole health recovery model.

Anne Hazlett with the White House’s Office of National Drug Control Policy tours the proposed Aspire treatment facility in Anderson Friday with Barbara Scott, CEO of Aspire Indiana Health, and Darrell Mitchell, CEO of Progress House.

Darrell Mitchell
darrell.mitchell@aspire.Indiana.org
(317) 587-0560