



Retooling care to meet our needs– A Recovery Community Vision for a five-year focused substance use disorder treatment and recovery care system

If we know that 5 years of sustained substance use recovery is the benchmark for 85% of people with a substance use condition to remain in recovery for life, why are we not designing our care systems around this reality?

*With the multitude of social, physical, emotional, housing, financial, and other co-occurring conditions/ issues, there is growing recognition that the benchmark for a substance use disorder recovery is five years of continuous progress. We must retool our service system to support this truth. **We envision:***

1. A Substance Use Disorder (SUD) Service System that supports long term recovery: Episodic, short term treatment is expensive and short sighted. Although there may be relapses, we must limit relapses and support long term recovery. We can do this by establishing and funding SUD and long-term recovery support services that address the many complications and co-occurring conditions/ issues. It is clinically appropriate and cost effective to support and augment more formal SUD treatment efforts. These services must be made available statewide for a person with a SUD and for families/significant others and communities, before, during and after formal SUD treatment - generally with decreasing intensity - over a minimum of five years. SUD education, professional referral, and ongoing peer support services for families/significant others provide relief to the families/significant others and are supportive of recovery.

2. A Service System that meets the needs of our young people: Due to the under developed brain and maturity of a young person, a SUD greatly impacts our young people the most and we must expand SUD treatment and recovery efforts for the young person and the family / significant others. We must provide age appropriate SUD services to youth and recovery support services. This includes the development of Recovery High Schools / Collegiate Recovery Programs, and Alternative Peer Groups (APGs). In addition, we must provide local family education, professional referral, and support programs to assist each young person with a SUD to obtain, sustain and support recovery for a minimum of 5 years.

3. Build the 21st Century workforce to serve the next generation: Historically and moving forward, people with lived recovery experience have been the backbone of a strong SUD service system workforce. We must expand and strengthen this statewide workforce so they can provide SUD treatment and recovery support services based on this five-year vision of recovery. This effort includes the development of stable funding streams, reasonable compensation, administrative protocols, and peer recruitment and retention efforts.

4. Although there are many social, employment, legal, educational and other important issues with the person with a SUD, there are a couple of exceptionally important areas.

Employment, Education and self-sufficiency are fundamental to healthy recovery and functional communities. We must reduce and eliminate barriers to employment for persons in recovery and recognize that persons with lived recovery experience are assets in our communities. We envision a network of employers that provide employment opportunities for members of our community and opportunities for peer Employment and self-sufficiency are fundamental to healthy recovery and functional communities. We must expand college and trade educational opportunities while reducing and eliminating barriers to employment for persons in recovery. There must be simple processes for persons to clear their records from past criminal charges as they reach stable, recovery.

5. Recovery Housing Opportunities: People in recovery need stable, supportive and affordable transitional and long-term housing. We must develop a statewide system of quality recovery houses. The system needs to include adolescent and special population housing, infrastructure development, and training for house operators to support recovery from a SUD. The housing system needs to work collaboratively to support long term treatment and recovery as part of a system of care with a five-year recovery goal.

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