Objectives

- Role of NASADAD
- Role of SSAs
- Describe recovery landscape across States
- Highlight some examples from States
- How to connect with your SSA
About the National Association of State Alcohol and Drug Abuse Directors

• NASADAD established in 1971 in Washington, DC

• **Membership**: Each State, Territory, and Jurisdiction has a Substance Abuse Agency Director (SSA) who manages the publicly-funded substance abuse prevention, treatment, and recovery systems

• **NASADAD Component Groups**: National Prevention Network (NPN) and National Treatment Network (NTN); NTN includes Women’s Services Network (WSN) and Opioid Treatment Network (OTN)
What does NASADAD do?

• **Research & Program Applications Division**
  • Technical assistance for States
  • Facilitate information sharing
  • Research projects

• **Public Policy Division**
  • Educate stakeholders
  • Work with Congress and Federal agencies
Characteristics of SSAs

• All shapes and sizes

• Some in public health departments

• Some in human services

• Some co-located
**Role:** Plan, manage, & oversee State prevention, treatment, and recovery system

- Availability of services
- Quality of services
- Accountability
- Liaison to State legislature and Federal government
- Establish or maintain linkages for continuum
Sample Tools Use by State Substance Abuse Agency Directors (SSAs) to Execute Role

• For availability --
  • Funding, outreach, State reports/info
  • Provider relationships

• For quality --
  • Standards of Care, Trainings/TA, State meetings
Sample Tools Use by State Substance Abuse Agency Directors (SSAs) to Execute Role

• For \textit{accountability} --
  • Incentives, score cards, compliance/contract reviews, redirect funds

• For \textit{liaison to State legislature and Federal government} –
  • Adhere to statute and regulations
  • Provide data and information
  • ACA
Sample Tools Use by State Substance Abuse Agency Directors (SSAs) to Execute Role

- For *linkages and continuum*:
  - Convener and supporter of field/others
  - State / federal statutes and regulations (impacts quality, availability)
  - Collaborations with other State agencies
SSAs and Cross-Agency Collaboration

- Criminal justice
- Mental health
- Transportation
- Welfare and child welfare
- Medicaid
- Development disabilities
- Aging
- Military and returning veterans
Funds Managed by State Substance Abuse Agencies

- Substance Abuse Prevention and Treatment (SAPT) Block Grant (HHS/SAMHSA)
- Other discretionary funds:
  - SAMHSA/CSAT (e.g. ATR)
  - SAMHSA/CSAP (e.g. SPF)
  - BJA/DOJ (e.g. Reentry, Drug Courts, EUDL)
- Medicaid funds
- State general funds
- Other
NASADAD, SAPT Block Grant, and Recovery

- **NASADAD Position**: NASADAD recommends altering the statute governing the SAPT Block Grant to explicitly authorize the purchase of recovery support services for substance use disorders. NASADAD also recommends regulatory action flow from this change that would help systematically shape definitions to help ensure effectiveness and accountability.

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**NASADAD Policy Brief: Health Reform Implementation Priorities, February 2011**

NASADAD Efforts in Recovery

**Overall:** Facilitate SSA sharing of effective recovery programs, initiatives and policies

**Specific Actions:**

- *Public Policy Committee Conference Call with FAVOR (June 2012)* – SAPT Block Grant and Support for RCOs and Recovery-Oriented Services

- *National Treatment Network’s ROSC Committee*
  - Identify national and State-specific resources to develop ROSC and recovery support services
NASADAD Efforts in Recovery

- **Women’s Services Network’s ROSC Committee**
  - Address gender-specific recovery issues across States

- National *Recovery Month* Planning Meetings and Review panel for Recovery Month Awards

- NASADAD participation in *SAMHSA’s BRSS TACS Initiative*
  - Develop addiction recovery resources for States
  - Assist with BRSS TACS Policy Academy
State-Level Efforts to Develop a ROSC

- Most States are in the process of – or currently planning for – ROSC implementation*
- More than half of States have developed conceptual elements for ROSC (e.g. ROSC principles, philosophy)*
- More than half of States have conducted strategic planning for ROSC*
- SSAs educate State leaders and stakeholders on recovery principles
- Infuse recovery in State agency
  - Designate a recovery “champion” within agency (e.g. Missouri SSA creating a Director of Recovery Services position)
  - Include peers in decision-making (e.g. State advisory committees)
  - Align funding mechanisms for recovery services
- Connect local-level stakeholders in addiction prevention, treatment, recovery systems, public health, mental health, criminal justice, faith-based communities, etc.

*Based on draft NASADAD report, under review.
Recovery Support Services, Coaches, and Centers

- SSAs fund recovery support services in nearly all States*
  - Examples: Employment/education services, housing, child care, transportation, life skills, peer recovery coaches, faith-based counseling, etc.

- SSAs fund recovery services, coaches, and centers through:
  - Substance Abuse Prevention and Treatment (SAPT) Block Grant
  - Access to Recovery (ATR) Grants
  - Medicaid
  - State general funds, etc.

- Some SSAs credential, train, and fund recovery coaches
- Some SSAs fund recovery centers that offer recovery and peer-delivered services and community space (Examples: Georgia, Vermont)

*Based on draft NASADAD report, under review.
Involving the Recovery Community

• Some SSAs include persons in recovery on State advisory boards/planning councils for treatment and recovery services (Example: Colorado, Oregon, Utah, Vermont)

• Some SSAs hire persons in recovery and/or create offices for consumer affairs (Example: Arizona, New York)
SSAs and Recovery Community Organizations (RCO)

• Contractual/Fiscal
  • RCOs funded to provide recovery support services, advocacy education, etc.
  • E.g. recovery services funded through the ATR grant

• Organizational
  • RCOs participate in State steering committees, advisory boards, etc. on SUD treatment and/or recovery services
State Highlight: Vermont

• SSA funds 11 independent Recovery Centers through SAPT Block Grant and State general funds
• Recovery Centers offer:
  • Recovery support services
  • Space for mutual support group meetings
  • Space for community events
• SSA works with Friends of Recovery - Vermont (FOR-VT, an ARCO member) to plan quarterly recovery forums across State
State Highlight: Colorado

• SSA contracts with Advocates for Recovery (ARCO member) to conduct Peer Reviews as required by SAPT Block Grant (to ensure persons in recovery have input on services offered by SUD treatment system)

• Advocates for Recovery participates on SSA/SMHA State planning and advisory council

• Advocates for Recovery provide recovery coach trainings, funded by ATR grant
State Highlight: Minnesota

• “How can we enhance the continuum of care to provide better support for long-term recovery?”
  • SSA developed RFP for RCOs in 2009 using FAVOR and CCAR information
• Beginning in February 2010, 2 RCOs in the State are grant-funded (both ARCO members)
  • Minnesota Recovery Connection
  • Southern Minnesota Recovery Connection
• MRC and S-MRC provide SSA with connection to recovery community
  • Focus groups
  • Feedback from recovery community, etc.
State Highlight: Missouri

- SSA developed local recovery coalitions with ATR-funded service providers and other stakeholders
- SSA supports an annual conference for SUD, MH, and DD service beneficiaries
- SSA created a Director of Recovery Services position within State agency
- Missouri Recovery Network (MRN, an ARCO member) collaborates with SSA
  - MRN members participate on State’s Advisory Council
  - MRN members participate in planning of State’s annual conference
Conclusion

• Considerable work being done across States, but nature of efforts vary from State to State
• More can be done at the State and local levels
• RCOs can get involved with State efforts by connecting with the SSA
How to connect with your SSA

- Directly with State agency
- Through NASADAD

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