



Artwork by Angelica H. of Far West Center's Art Helps and Heals (AHH!) Art Therapy Program

ADDICTION RECOVERY ADVOCACY MEETINGS

**Aligning Efforts to Support a
Recovery Community**

Introduction

Dear Community:

The Alcohol, Drug Addiction and Mental Health Services (ADAMHS) Board of Cuyahoga County began hosting Addiction Recovery Advocacy meetings in 2017. These meetings bring together individuals in recovery, family members who have lost a loved one to addiction, individuals with a loved one struggling with addiction, professionals, and family support groups to unite powerful voices and create change through action.

In 2019, the Addiction Recovery Advocacy meeting group strategized how Cuyahoga County can align its efforts with RecoveryOhio, Governor DeWine's statewide initiative to address mental health and substance use disorders. During the Addiction Recovery Advocacy meeting held on June 24, 2019, Tia Marcel Moretti, Deputy Director of RecoveryOhio, spoke about RecoveryOhio's efforts. After her presentation, attendees brainstormed ideas, organized those ideas into categories and prioritized the ideas based upon achievability. The brainstorming session focused on four of RecoveryOhio's eight focus areas:

1. **Stigma & Education:** Negative attitudes and beliefs toward people living with a mental health disorder or in recovery from a substance use disorder are common and harmful. These negative attitudes extend to and affect family members, places of work, health care providers, policies, and the allocation of public resources.
2. **Workforce Development:** The mental health and addiction (behavioral health) treatment workforce is a complex and growing system made up of many professionals of varying levels of training and education. The increased visibility of behavioral health issues and an improved understanding of mental illness and substance use disorders as chronic diseases have led to a growth in treatment facilities, driving the need for a larger workforce to meet the demand for clinical services.
3. **Prevention:** Effective strategies to reduce the prevalence of mental illness and addiction conditions and decrease adverse outcomes require a full continuum of care, including health promotion, evidence-based prevention and treatment, and recovery resources to support healthy living. Prevention is an often overlooked, but important, component of this continuum. The adage "an ounce of prevention is worth a pound of cure" is an appropriate expression, as effective prevention services help individuals become more

resilient, cope with life stresses, and decrease the likelihood of developing substance use disorders, mental illness, or both.

4. **Treatment & Recovery Supports:** Recovery rates for individuals with mental health or substance use conditions are as good as those for other physical conditions, such as diabetes, asthma, and high blood pressure. As with other diseases and disorders, mental illness and substance use disorders impact everyone. Ohio must continue to work hard to ensure that all strategies addressing mental illness and substance use disorders includes effective approaches to address the needs of all Ohioans.

These focus areas were selected by meeting participants prior to the first meeting. At the September 23, 2019, Addiction Recovery Advocacy Meeting, work groups expanded upon ideas from the June 24, 2019 meeting and broke them into actionable items. This report is a summary of the ideas generated by the Addiction Recovery Advocacy meeting work groups from both meetings. In the coming months, the work groups will begin implementing action items to align local efforts with *RecoveryOhio's* statewide initiatives.

The ADAMHS Board staff and Board of Directors are committed to supporting the recommendations in this report that have been made by the attendees of the Addiction Recovery Advocacy meetings. Through this work we can continue to support a stronger and more resilient recovery-focused community.

Sincerely,

Scott S. Osiecki
Chief Executive Officer

Stigma and Education

Negative attitudes and beliefs toward people living with a mental health disorder or in recovery from a substance use disorder are common and harmful. These negative attitudes extend to and affect family members, places of work, health care providers, policies, and the allocation of public resources.

RecoveryOhio Suggestions: Public Education, Media Outreach, Professional Training and Involving the Citizen Workforce.

Top ideas from the June 24, 2019 meeting:

- Use personal stories in the media and highlight people in recovery
- Have persons in recovery on decision making committees
- Implement universal person-centered language and offer classes at community centers promoting recovery-oriented language
- Create a media toolkit empowering others to reduce stigma and educate the community on addiction and recovery
- Embrace and show sober culture
- Rebrand addiction and recovery with positive images and success stories
- Collaborate between clinics/hospitals and the recovery community
- Unify voices and break down silos

Action items from the September 23, 2019 meeting:

- **Public Education:**
 - Explore bringing the “Denial Ohio” campaign to Cuyahoga County
 - Identify cost/budget/funding
 - Build culturally specific campaigns with recovery-oriented language and include persons in recovery
 - Involve parents and the community within the school system on stigma and recovery education

- Create more public service announcements educating the public, and share those announcements in hospitals, community centers, faith communities and school systems
- Print/Distribute the Words Matter rack card originally created by Ohio MHAS to reduce stigma through language changes. Distribute words matter cards to libraries, recreation centers, in hospital waiting rooms, and other community gathering places
- Utilize resiliency and trauma-informed “spoken word” performers at public events
- Have individuals in recovery create public art such as murals
- **Media Outreach:**
 - Create a “Reporting on Substance Use Disorders” media kit for community partners ([Mindframe for Alcohol and Drugs: Guidelines for Communicating about alcohol and other drugs](#), Mindframe.org.au)
 - Shift focus from Death to Resiliency by focusing on recovery
- **Involve Citizen Workforce:**
 - Convene stakeholders (BVU, Service Providers, Hospitals, etc.), using shared resources would build buy-in and help break down siloes
 - Organize Social Media “Telethons” about topics like prevention, treatment and recovery
 - Utilize Twitter Chats and/or Facebook Live
 - Educate employers in the county about substance use disorders and suicide, access to treatment and recovery supports, reintegrate recovering individuals back into the workforce
- **Professional Training:**
 - Educate media and citizen workforce as well as other community stakeholders on “Reporting Guidelines”
 - Promote prevention-based best practices for social media, using recovery-focused language

Workforce Development

The mental health and addiction (behavioral health) treatment workforce is a complex and growing system made up of many professionals of varying levels of training and education. Between 2006 and 2017, Ohio added 580 behavioral health establishments, representing a more than 30 percent increase. While some behavioral health establishment types have been in decline (such as stand-alone psychiatric practices), others have experienced growth (such as mental health and substance abuse residential facilities). The increased visibility of behavioral health issues and an improved understanding of mental illness and substance use disorders as chronic diseases have led to a growth in treatment facilities, driving the need for a larger workforce to meet the demand for clinical services.

RecoveryOhio Suggestions: Needs Assessment, Creation of Regulatory and Financing Structure that support equity in healthcare, establishing career paths, financial support for education, supporting/retaining current workforce, increase prevention specialists, promote cultural competence.

Top ideas from the June 24, 2019 meeting:

- Assess workforce needs in local behavioral health workforce
- Share administrative staff and duties to reduce costs
- Continue education and low-cost training that help professionals earn CEUs/RCHs
- Increase employee training on evidence-based curriculum
- Support Recovery-Oriented System of Care by helping clients join the behavioral health workforce
- Determine best practices to attract new workers, support and retain current workforce and reduce turnover
- Address wage equity for all positions for small and large organizations
- Enhance loan forgiveness and tuition assistance programs

Action items from the September 23, 2019 meeting:

- **Needs Assessment:**
 - ADAMHS Board and agency partners are working together on a local workforce needs assessment to identify gaps and challenges in the local behavioral health workforce
 - Support efforts to increase the number of practitioners available to provide mental health and addiction services, including MAT and psychiatric services for both youth and adults and assist provider network in recruiting staff
- **Creation of Regulatory and Financing Structure:**
 - Encourage agencies to collaborate for shared administrative duties (some examples are Wingspan, Signature Health, and New Direction/Hitchcock)
 - Advocate for Medicaid changes to the BH Redesign regarding payments linked to productivity, rates and reimbursements.
 - Research salary and position guidelines for large (i.e Hospitals) and small organizations (community providers) to dissuade job jumping, reduce turnover and create equitable wages between providers.
 - Share information and program ideas with the three largest healthcare agencies through the Opioid Consortium, Cuyahoga Board of Health overdose to action committee and other workforce collaborations
- **Support/Retain Current Workforce:**
 - Recommend ways to improve onboarding processes for new employees in provider agencies and increase support for supervisors
 - Continue low-cost training institutes that help professionals earn CEUs/RCHs; Encourage providers to consider a reimbursement program for training and certification fees and ensure that the workforce is receiving comprehensive training on evidence-based curriculum
 - Research methods/policies to address burnout, secondary trauma and compassion fatigue and share info with local workforce groups.

- Suggestions include: Respite care program for BH providers, create a pool of CPST workers to provide coverage on days off, implement self-care programs (yoga, meditation, fitness) and peer-to-peer support programs, provide access to trauma-informed care for employees on a regular basis, and create/expand policies, practices and programs that allow staff to have a better work-life balance (parental leave, improved vacation/sick time benefits)
 - Research best methods/programs for student loan forgiveness, tuition assistance and longevity pay and share with local workforce groups
 - Recommend that providers address safety concerns, real or perceived, that negatively impact individuals working with home and school-based clients
 - Support trauma-informed resources and care for behavioral health care workers, peer support specialists, recovery coaches, and first responders to reduce the effects of secondary trauma
- **Establish Career Paths:**
 - Continue work with colleges and universities to help them close the gap between academic theory and community practice
 - Share workforce group recommendations with coalitions made up of provider agencies and local colleges and universities to discuss mutual needs and expectations
 - Continue to support Community Colleges that can create pathways for advance degrees and diverse staffing in the local community
 - Support systematic changes that encourage and allow for non-traditional employees to get certified to work directly with behavioral health clients
 - Continue involvement in community and college/university career fairs
 - Provide leadership development programs through area partners that are focused on the development and growth of staff leadership skills
 - Identify scholarship opportunities for individuals interested in attending conferences related to current careers in the behavioral health field

Prevention

Effective strategies to reduce the prevalence of mental illness and addiction conditions and decrease adverse outcomes require a full continuum of care, including health promotion, evidence-based prevention and treatment, and recovery resources to support healthy living. Prevention is an often overlooked, but important, component of this continuum. The adage “an ounce of prevention is worth a pound of cure” is an appropriate expression, as effective prevention services help individuals become more resilient, cope with life stresses, and decrease the likelihood of developing substance use disorders, mental illness, or both.

RecoveryOhio Suggestions: School/community surveys, Increase coordination (state, funding, coalitions), ensure K-12 school-based prevention, before- and after-school programs, prevention across lifespan, drug-free workplace programs/expand law enforcement’s role in prevention, and community-focused prevention strategies.

Top ideas from the June 24, 2019 meeting:

- Hire more prevention specialists and ensure they are well-trained in evidence-based best practices
- Provide culturally specific prevention to all groups
- Bring Improbable Players to local communities for prevention education theatre
- Increase the use of peer advocates as a prevention tool, especially in high schools
- PSAs comparing other chronic illnesses and addiction
- Start early and often with prevention efforts
 - Teach coping skills and social emotional learning
- Showcase prevention approaches with the highest effectiveness

Action items from the September 23, 2019 meeting:

- **Ensure K-12 School-based Prevention:**
 - Provide more resources to schools i.e. resources for counseling, peer support and other effective prevention efforts

- Hire more prevention specialists and ensure they are well-trained in evidence-based best practices
- Advocate for school-based prevention programs that teaching coping skills, resiliency building and social emotional learning
- **Before- and After-school Programs:**
 - Encourage providers and community partners to create before- and after-school programs to provide more prevention outside of school for youth with low school attendance
 - Collaborate with organizations that are already community gathering places to offer more prevention programming
 - Recommend the use evidence-based practices to create peer-to-peer support and prevention programs, especially for adolescents and teens
 - Recommend that a youth summit be held to bring together adolescents and teens to learn more about mental health, substance use and peer-to-peer support
- **Community-focused Prevention Strategies:**
 - Utilize Improbable Players to provide more prevention education performances in the community
 - Cater prevention efforts to specific groups i.e. senior specific prevention, local employers
 - Convene various prevention coalition leadership/chairs to provide updates and align systematic efforts
 - Educate the community about Adverse Childhood Experiences, social determinants of health and toxic stress and how they impact risk factors for substance use, mental health conditions and suicide

Treatment and Recovery Supports

Recovery rates for individuals with mental health or substance use disorders are as good as those for other physical conditions, such as diabetes, asthma, and high blood pressure. As with other diseases and disorders, mental illness and substance use disorders impact everyone. Treatment is effective and can help people recover to lead satisfying and productive lives. This includes easy access to acute crisis services, subacute step-down rehabilitative care, and permanent supportive housing, when needed. Recovery supports promote individual, program, and system-level approaches that foster health and resilience; increase housing to support recovery; reduce barriers to employment, education, and other life goals; transition individuals from institutional settings to community living; and connect to necessary social supports in their chosen community. Every citizen and family in Ohio should have equitable access to all levels of treatment, care and supports necessary to sustain recovery.

RecoveryOhio Suggestions: Early Intervention, Crisis Services, Treatment, and Recovery Supports.

Top ideas from the June 24, 2019 meeting:

- Make existing family supports more well-known
- Advocate for certified recovery/sober homes
- Remove barriers to treatment i.e. insurance, medication requirements, ID requirements, warrants, phones, waiting lists, transportation, geographic limits, children and pregnancy
- Uniform screening and assessment in courts and jails
- Behavioral Healthcare parity
- Free transportation to treatment and meetings
- Develop partnerships with stakeholders to increase access to services while developing a community provider network that is responsive and available 24-hours per day

Action items from the September 23, 2019 meeting:

- **Early Intervention:**
 - Assess social determinants of health to identify individuals who may be at higher risk for substance use, share findings with local system
 - Share the crisis hotline number to help connect individuals with treatment/support at the earliest stages of substance use
 - Advocate for a uniform screening/assessment in the Criminal Justice System
- **Crisis Services:**
 - Research how to improve and increase the number of offerings for immediate access to care; share the information with local groups/providers
- **Treatment:**
 - Ensure local trainings for providers focuses on trauma-informed and culturally competent care
 - Advocate for longer-term treatment modalities for persons with a history of chronic relapse
 - Advocate for expanded access to Medication Assisted Treatment
 - Research effective methods to address barriers to treatment and create a document to implement these methods system-wide
 - Advocate for parity to ensure understanding of insurance coverage rights and how to seek support with parity enforcement
- **Recovery Supports:**
 - Create a list of local family supports available and share in the community
 - Investigate parent recovery coach training to help families better support a loved one's recovery
 - Advocate for certified recovery/sober houses
 - Expand peer support trainings to increase the number of peer supporters in our community

Your feedback is appreciated!

Do you have feedback or additions you'd like to make to this report? Please contact Jake Rosebrock, AmeriCorps VISTA Member, at jrosebrock@adamhsc.org.

RecoveryOhio

RecoveryOhio is working to provide a full continuum of care to all of Ohio.

RecoveryOhio's goals are to create a system to help make treatment available to Ohioans in need, provide support services for those in recovery and their families, offer direction for the state's prevention and education efforts, and work with local law enforcement to provide resources to fight illicit drugs at the source.

Get more information about RecoveryOhio, its priorities and initiatives by visiting www.recoveryohio.gov.

The Alcohol, Drug Addiction and Mental Health Services (ADAMHS) Board of Cuyahoga County

The Alcohol, Drug Addiction and Mental Health Services (ADAMHS) Board of Cuyahoga County is responsible for the planning, funding and monitoring of public mental health and addiction treatment and recovery services delivered to the residents of Cuyahoga County. Under Ohio law, the ADAMHS Board is one of 50 Boards coordinating the public mental health and addiction treatment and recovery system in Ohio. The Board is a quasi-independent part of county government, governed by a volunteer Board of Directors. The Board contracts with provider agencies to deliver services that assist clients on the road to recovery.

Learn more about the ADAMHS Board on our website: www.adamhsc.org, or follow us on Facebook, Twitter and/or Instagram @ADAMHSBoardCC.

24-hour Suicide Prevention, Mental Health/Addiction Crisis, Information and Referral Hotline
Call: 216-623-6888 | Text "4HOPE" to 741741