

**REPORT OF RECOMMENDATIONS:  
APPALACHIAN REGIONAL COMMISSION'S  
SUBSTANCE ABUSE ADVISORY COUNCIL**

**August 2019**



**Council Charge:**

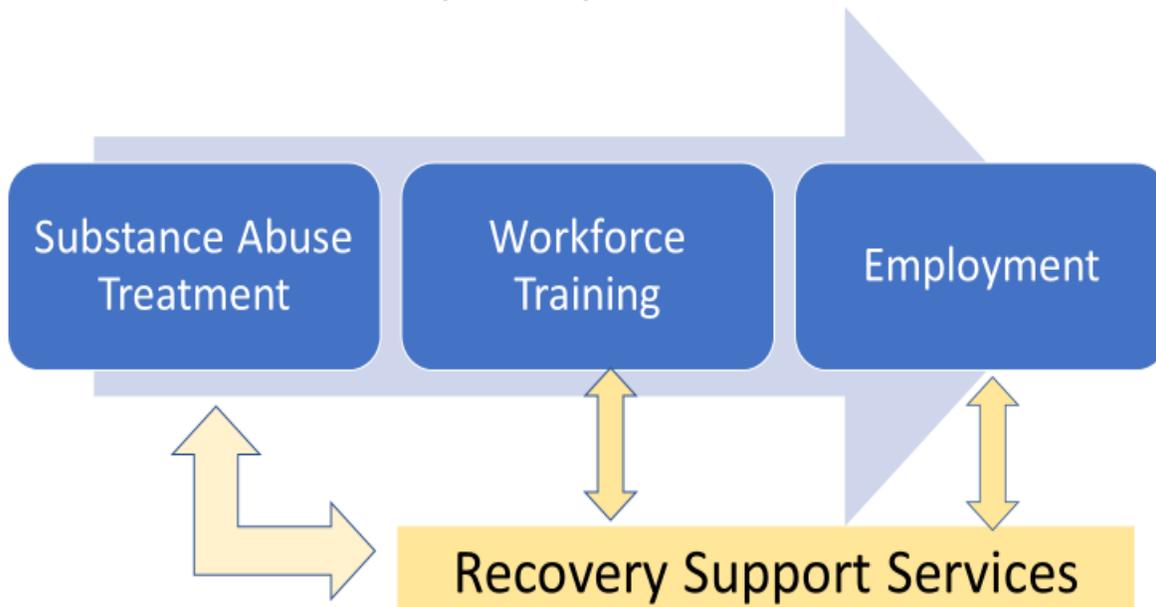
To develop recommendations, achievable within ARC's mission, to help individuals in recovery get the support services and training they need to maintain recovery and successfully re-enter the workforce.

## The Recovery Ecosystem Defined

The substance abuse recovery ecosystem, within the context of building and strengthening economically resilient communities in Appalachia, is a complex linkage of multiple sectors, including, but not limited to: recovery communities, peer support, health, human services, faith communities, criminal justice, public safety, housing, transportation, education, and employers, designed to help individuals in recovery access the support services and training they need to maintain recovery and successfully obtain sustainable employment.

The availability of services to support the recovery ecosystem varies in each community, determined by a number of factors such as existing recovery infrastructure, prevalence of stigma, resources and funding, insurance coverage, employment opportunities, and the length of time and experience communities have had in working to address the substance abuse crisis.

## The ARC Recovery Ecosystem Model



## **Advisory Council Process of Deliberations**

Members of the Substance Abuse Advisory Council received letters of appointment in April 2019 from the Appalachian Regional Commission's (ARC) Federal Co-Chair Tim Thomas following consultation on the selection of members with each state. The Council convened in two multi-day meetings, on May 15-16 in Knoxville, Tennessee, and July 16-17 in Washington, D.C. The full Council of 24 members deliberated to develop recommendations guided in part by [input from ARC's Recovery-To-Work Listening Sessions](#). The Council formed three work groups. Each group considered a different step within the recovery ecosystem model during Council meetings and during supplemental conference calls between meetings. The full Council merged work group efforts and unanimously approved the final set of 14 recommendations. The recommendations are not presented in sequential or prioritized order.

## **What the Advisory Council believes about a Recovery Ecosystem**

Creation of recovery ecosystems is a sustainable solution to the regional substance abuse epidemic that will benefit many sectors of communities.

A successful recovery ecosystem will improve workforce participation and significantly contribute to a more viable economy in the Appalachian region.

The combined understanding and energy of local leaders will lead to tested approaches that meet the unique needs of communities through structured recovery ecosystems that are adaptable across the region.

The infrastructure for a successful recovery ecosystem should be carefully-crafted, deliberately implemented, and consistently evaluated. Lessons from the development of ecosystems should be shared as learning opportunities for all communities.

Long-term commitments by communities to support recovery to work and by employers to provide competitive compensation are critical.

Engaging the lived experience of persons in recovery is critical to effect change, reduce fragmentation, and improve navigation of services.

## **ARC Substance Abuse Advisory Council: Recovery Ecosystem Recommendations**

- 1. Develop a recovery ecosystem model that addresses stakeholder roles and responsibilities as part of a collaborative process that develops infrastructure and operations, and ARC should fund deployment of local planning and implementation of the model, and examine funding models to sustain the recovery ecosystem.**

There is a lack of coordination and alignment among stakeholders at the federal, state, and local level that does not encourage planning and design of recovery ecosystems. Systems models of standard planning processes and tools have been created for healthcare (e.g. continuum of care), substance use (e.g. Sequential Intercept Model [SIM] mapping and the Drug Free Communities framework), and workforce planning (e.g. National Institutes of Health Assessment Tool). However, no model yet exists to reduce local fragmentation in recovery and employment training programs with the goal of recovery to work. ARC should support a recovery ecosystem design process by engaging experts from these fields and successful locally-developed projects with members of Appalachian recovery communities. This group should be charged to identify ecosystem key entry and transition steps, mapping assets and gaps, and integrate components of the model into a toolkit for recovery ecosystems development. The design process should include a stakeholders' survey to identify common barriers to workforce training and employment for persons in recovery. ARC should share the ecosystem model with other federal and state stakeholders to educate them about specific Appalachian issues, and to encourage policy support and financial partnering in Appalachian communities. ARC should then offer one-year planning grants to communities to deploy the ecosystem development process and model. Grants should build the groundwork for the local recovery ecosystem by identifying and convening stakeholders willing to engage in developing the local recovery ecosystem spanning sectors including, but not be limited to, treatment and recovery service organizations, employers, post-secondary education, local government, economic development professionals, chambers of commerce, elected officials, faith-based organizations, and persons from the recovery community. The planning grant process will require community groups to discuss interagency agreements, services integration, and funding mechanisms needed to deploy the model. In particular, expanding access to care through insurance coverage should be examined as effective for sustaining recovery systems in local communities. Participating communities should commit to assist other interested communities through mentor/mentee relationships. Communities will also participate in evaluations that result in defining and measuring the economic development impact of recovery ecosystems on Appalachian communities.

- 2. Develop and disseminate a playbook of solutions for communities addressing common ecosystems gaps and services barriers.**

While each community has a unique set of gaps and needs, different communities share many common challenges. These include availability of recovery services, wrap around services, and employment opportunities. As Appalachian recovery ecosystems emerge, success stories and findings from communities should be gathered and shared. A solution in one location is a strong starting point for a solution in another location. ARC should develop a process to maintain a playbook of solutions to continuously add ideas and descriptive examples of approaches generated through the one-year planning grants (Recommendation 1), recovery ecosystem pilot grants (Recommendation 4), and other community efforts.

**3. Convene regional leaders to educate them about the disease of addiction, encourage their engagement in the recovery ecosystem development process, and use resource clearinghouses, playbooks, toolkits and other products. Formation of partnerships should be a primary objective of the convening process.**

There is public misunderstanding of addiction and recovery, how stigma negatively influences public and employer policies, and how it impacts those in recovery who pursue employment. Lack of community knowledge and acknowledgement of addiction and negative attitudes about substance abuse create and sustain stigma that often discourages, or creates barriers to, those in recovery to successfully pursue work. However, feedback from ARC's listening sessions suggests that Appalachian communities will engage in and support broad-based recovery efforts, often relying on coalitions, once substance use is recognized as a community issue and action is based on a feeling of community responsibility and pride. ARC should use its presence in Washington, D.C., and its partnerships with state governments to promote an understanding of the rationale for recovery ecosystems. Strong partnerships should be promoted among state and regional workforce, economic development agencies, local government, and treatment and recovery groups. Community education needs to shift the dialogue away from personal choice and control toward promoting the language of empowering individuals to maintain recovery and gain meaningful employment.

**4. Fund community pilot projects to demonstrate strategies that address common Appalachian recovery to work issues that negatively impact regional workforce and employment gaps.**

ARC should provide future year pilot project funding to implement community initiatives that address issues and gaps identified through the recovery ecosystem planning grant process. ARC heard in recovery-to-work listening sessions throughout the Appalachian region about how issues that prevent individuals in recovery from gaining employment include transportation, housing, child care, and others. In addition, ARC consistently heard about the value of, and difficulty in, delivering these wrap-around services in recovery to work efforts. Availability and access to evidence-based treatment for addiction, as well as employment support services that are tailored to people in recovery, were additionally identified as needs. All pilot projects should contribute ideas to the playbook of solutions (Recommendation 2), and grantees should be available to participate in mentor/mentee relationships with nearby communities facing similar challenges.

**5. Support communities to create and sustain clearinghouses, both physical and virtual, that include federal, state, and local resources to guide those seeking help for persons in active addiction, or those in recovery and seeking meaningful employment.**

A common message that emerged from the listening sessions was the confusion, lack of direction, and hopelessness felt by individuals, families, and communities trying to find help for persons with addiction. While many resources are publicly available, they are often not organized in a way that helps consumers find what they need. A limited number of resource clearinghouses do exist in the forms of multiservice centers, treatment locators, knowledgeable persons (navigators, reentry counselors, tele-consultation consultants), hotlines, paper manuals, and digital websites. ARC should identify effective approaches and provide assistance so more communities can promote, expand, and maintain clearinghouses.

- 6. Identify one to three commonly available performance metrics for each step of the recovery ecosystem model, including tools and data collection processes for each step of the model, to measure ecosystem effectiveness and capture progress made by individuals in recovery. The measures should be commonly available and reflect the needs and concerns of different stakeholders.**

Maximizing the impact of recovery ecosystems will be contingent upon documenting improvements in both individual and systems outcomes. Communities using the recovery ecosystem model can document critical inputs such as integrated service agreements and interorganizational process improvements. Longitudinal performance measures and benchmarks help identify where gaps remain in local ecosystems and focus stakeholders on where to invest limited resources. Standardized individual services data would help to attract and sustain funding. Ecosystem efficiency outcome measures, for example length of employment/job retention and return on investment of funded dollars, would be useful to compare with community employment (e.g. workforce participation, unfilled positions, and average wages) and health measures (e.g. overdose deaths, and the number of residents in active addiction). ARC should require reporting of selected metrics with all funded programs and analyze results across all grantees to pursue continuous improvement in the recovery ecosystem model.

- 7. Develop and disseminate a model individualized workforce training and employment readiness assessment and evaluation process that helps persons in recovery to secure gainful employment that is meaningful to the individual and allows them to support themselves financially.**

Community workforce planning is a pivotal part of a successful recovery ecosystem. Individualized workforce training and employment readiness plans result in meaningful work and help provide focus and purpose to a person's recovery process and experience. Assisting persons in recovery to develop short-term training and employment readiness plans leading to long-term employment plans should be based on their desires, skills, aptitude, career interests, and goals, and should address potential work challenges. Currently, there is no generally accepted assessment and evaluation process or standard tool that considers the special issues of those in recovery. ARC should convene workforce experts and representatives from the recovery community to collect samples (e.g. the Arizona Self-Sufficiency Matrix) and create a model evaluation assessment template that will facilitate the development of a personalized/individualized Employment Development Plan (EDP). EDPs should identify educational level, strengths, skills, aptitude, and interests of individuals of those in recovery. An adoption and diffusion plan should be included that engages community collaborative partners in use of tools and the EDP for all clients in recovery (e.g. community and technical colleges, human service organizations, workforce and economic development organizations, and/or the criminal justice system).

- 8. Develop model workforce training programs that incorporate recovery services with appropriate evaluation measures.**

Existing traditional workforce training programs are not conducive to supporting individuals in recovery seeking to attain and maintain employment. ARC should research and identify best practice workforce training programs that produce the best outcomes for persons in recovery in the Appalachian region and report those findings throughout the ARC area. The report should catalog program descriptions, specifics of key programming elements, sample linkage and service agreements, and evaluation measures reflecting outcomes for both sustaining recovery and providing workforce training that leads to successful job

placements. Based upon the report, ARC will offer new pilot grants designed to enhance regional workforce participation and encourage integration of this new approach into existing ARC funding mechanisms and partnerships. Funding should require that eligible applicants' proposals report engagement in local recovery ecosystems and document how proposals address gaps in support for persons in recovery.

**9. Research and identify social program eligibility and restrictions that may discourage participants from seeking employment.**

Individual motivation to pursue recovery services, job training, and employment is the most important element in the recovery ecosystem. Eligibility requirements of social programs sometimes inadvertently discourage persons from seeking full time employment. Means tested programs that have "hard" stops can cause the loss of key benefits such as food, health care, and transportation benefits. The loss of these benefits can sometimes exceed the gain from entering the workforce. ARC should inventory requirements of social assistance programs which provide medical coverage, childcare, food and housing assistance, and other wrap-around services that have been shown to promote recovery to work outcomes. Eligibility and benefit levels, tied to employment status, should be identified that disincentivize an individual progressing to complete training programs or gain and maintain meaningful employment. ARC should convene policy makers, program directors, and representatives of the recovery community to recommend ways to better use policy and subsidy levers to encourage those in recovery to seek employment by creating a smoother transition into the workforce, while maintaining necessary stability for their successful recovery.

**10. Create, publish, and disseminate a report which inventories and maps effective best practices in legal deflection and diversion programs as well as state programs that incentivize hiring of persons in recovery with criminal records related to drug charges across the Appalachian region.**

Previous interaction with the criminal justice system can create long-term barriers to employability for the large percentage of non-violent offenders whose substance use disorder (SUD) resulted in felony convictions. The impacts can be both direct, as in restrictions on application or consideration ("check the box"), and indirect, with many persons suffering the effects of unpaid fines and lack of driving privileges. These indirect impacts can create financial and transportation barriers which make employability difficult. Many states have piloted policies or programs to provide assistance to prospective employees. States have also created innovative program strategies that provide incentives for employers to offer work experience and employment to persons in recovery. A comprehensive listing of such programs and policies does not exist. ARC should collect and describe the best practices and distribute them to employers and states throughout the region.

**11. Convene experts to develop and disseminate an employer best practices toolkit to educate employers and human resource experts in recruiting, selecting, managing, and retaining employees who are in recovery.**

Regional employers have identified a general lack of understanding of addiction and recovery, and indicate an absence of prepared resources that would help employers and human resource experts support recovery to work efforts. Therapeutic work environments are known to positively support people in

recovery to become good employees. Employers recognize a shift in workforce and workplace culture is required. To support this, ARC should develop and partner with state workforce programs, employer organizations, and representatives from the recovery community to develop and disseminate an employer best practices toolkit. The toolkit should include content in print, video, and other packaged media formats. Contents should include: (a) explanation of the science of addiction and addiction treatment, best practices in drug testing for applicants and employees, success stories from individuals and employers, the language of recovery, and the principles and examples of how businesses created therapeutic work environments; (b) sample human resources policies, positive supervisory practices, and methods of organizing and using employee peer support services (from existing employees in recovery); and (c) information about federal and state work opportunity tax incentives to hire persons in recovery, program information about how to reduce employer liability, and considerations of employee benefit packages.

**12. Fund local liaison positions across Appalachia responsible for promoting a recovery ecosystem by building bridges between employers, workforce development agencies, and recovery organizations, and disseminating an employer best practices toolkit.**

One example of locally-developed recovery to work efforts is the presence of a person acting as a navigator who advocates for services for an individual in recovery. Likewise, common to successful community efforts to build recovery ecosystems is a person who acts as a liaison between treatment and recovery services, training programs, and employers. The position promotes understanding, makes connections, and facilitates dialogue leading to recovery to work agreements. The organizational home of the liaison emerges from local discussions. Liaisons are familiar with local employers, recovery support systems, insurers, workforce training and education programs, and trade associations. Liaisons play an important role in educating all about available federal, state, and local resources and have organized regional summits and conferences bringing stakeholders together. ARC should identify and describe model efforts, such as West Virginia's Jobs and Hope Initiative, and provide set-aside funding for positions in communities that adopt the ARC recovery ecosystem model.

**13. Fund development of Collegiate Recovery Programs (CRPs) in Appalachian technical schools, small colleges, and universities designed to establish and nurture authentic student-centered communities that focus on interests, wellness, and success for students seeking and living in recovery.**

A promising new recovery to work initiative is focused on students and prospective students enrolled in technical schools, small colleges, and universities. CRPs shift the culture in schools to support students in recovery, combining the elements of the recovery ecosystem within the collegiate environment. These support services, similar to recovery communities and employer-friendly workplaces, provide academic, developmental, therapeutic, and recovery supports such as onsite sober housing, self-help meetings, SUD and wellness specific therapy and counseling. Colleges strive to create a campus-based 'recovery friendly' space and a supportive social community along with institutional, logistical, and technical assistance for self-identified students experiencing recovery who access higher education. Services enable students to maintain recovery and to complete degrees that improve their long-term employment chances. Several Appalachian schools have already successfully brought together key stakeholders to begin programs (e.g. Kennesaw State in northern Georgia), and other schools have expressed a willingness to make the institutional commitment. ARC should explore opportunities to expand this approach through partnering with other federal, state, and regional foundation resources.

**14. Convene a meeting of interested stakeholders to identify how transportation barriers negatively impact recovery to work efforts in rural communities and regional workforce participation, and profile innovative partnerships and funding models that lead to sustainable community solutions enabling individuals to stay in recovery, training programs, and employment.**

Transportation is an issue that affects all aspects of recovery to work and was highlighted in all ARC listening sessions. Different models need to be developed that engage public, private, and faith-based groups supporting effective and efficient solutions. The system must bridge housing, work, training, treatment clinics, and recovery support groups to address the barriers that exist. ARC should identify existing models across the Appalachian region, and compare roles of different stakeholders. ARC should also collect key agreements, processes, and financing arrangements. A final report should be widely disseminated to states and communities engaged in organizing recovery ecosystems.

## **ARC Substance Abuse Advisory Council**

### **Moderator**

- *Bruce Behringer, Powhatan, VA.*

### **Members**

- *William M. Babington, Division Chief Law Enforcement and Traffic Safety Division, Alabama Department of Economic and Community Affairs (ADECA), Montgomery, AL;*
- *Sarah Newman Boateng, Executive Deputy Secretary, Pennsylvania Department of Health, Harrisburg, PA;*
- *Jenell Brewer, Founder/CEO, SPARK (Special People Advocating Recovery Kentucky), Stanton, KY;*
- *Craig Clark, PE, PhD, Chairman of the Board, Community Colleges of Appalachia; Vice President of Economic Development, Alfred State, Alfred, NY;*
- *Olivia Collier, ARC Program Manager, North Carolina Department of Commerce, Raleigh, NC;*
- *Melanie Dallas, LPC, Chief Executive Officer, Highland Rivers Health, Dalton, GA;*
- *Nick Erwin, Director of Human Resources, Bellisio Foods, Jackson, OH;*
- *Mark Farley, Development District of Appalachia Association; Executive Director, Upper Cumberland Development District, Cookeville, TN;*
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- *Nancy Hale*, President/CEO, Operation UNITE, London, KY;
- *Robert H. Hansen*, Director of the Office of Drug Control Policy, West Virginia Department of Health and Human Resources, Charleston, WV;
- *Karen Kelley*, Chief Program Officer, TROSA, Durham, NC;
- *Kody H. Kinsley*, Deputy Secretary for Behavioral Health & Intellectual and Developmental Disabilities, North Carolina Department of Health and Human Services, Raleigh, NC;
- *Patricia Lincourt*, LCSW, Associate Commissioner, New York State Office of Alcoholism and Substance Abuse, Albany, NY;
- *Devin A. Lyall*, Founder/Director, Wilkes Recovery Revolution, Inc., North Wilkesboro, NC;
- *S. Hughes Melton*, MD, MBA, Commissioner, Virginia Department of Behavioral Health and Developmental Services, Richmond, VA;
- *Duane Miller*, Executive Director, LENOWISCO Planning District Commission, Duffield, VA;
- *Robert Pack*, PhD, MPH, Professor, Community and Behavioral Health, Eastern Tennessee State University, Johnson City, TN;
- *Brittany Pittman*, ARC Program Manager, Georgia Department of Community Affairs, Atlanta, GA;
- *Tammy Reynolds*, Captain, Mississippi Bureau of Narcotics, Tupelo, MS;
- *Stephanie Muncy Surrett*, Executive Director, Southwest Virginia Alliance for Manufacturing Inc. Center of Excellence, Abingdon, VA;
- *Sean Terrell*, Dean, Workforce Development, Hocking College, Nelsonville, OH;
- *Chief Robert Ware*, Portsmouth Police Department, Portsmouth, OH;
- *Courtney Thomas-Winterberg*, Director, Allegany County Department of Social Services, Cumberland, MD.