

National
Recovery Month

Prevention Works • Treatment is Effective • People Recover

SEPTEMBER 2011

JOIN THE VOICES FOR RECOVERY

**RECOVERY BENEFITS
EVERYONE**



Substance Abuse and Mental Health Services Administration

www.samhsa.gov • 1-877-SAMHSA-7 (1-877-726-4727)

DEAR **NATIONAL RECOVERY MONTH** SUPPORTER:

The Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT), within the U.S. Department of Health and Human Services, is pleased to present the **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)** toolkit. As a key conduit for several of SAMHSA's Strategic Initiatives, public awareness and support and recovery support, **Recovery Month** increases the public's understanding of substance use and mental disorders to achieve the full potential of prevention and treatment support services. It also helps people recognize and seek assistance for these health conditions with the same urgency as any other condition and aims to reduce barriers to recovery. **Recovery Month** encapsulates this on every level.

Millions of Americans are in recovery from substance use and mental disorders today. While approximately 22.5 million people were classified with a substance use disorder in 2009, according to the **2009 National Survey on Drug Use and Health**, treatment services are effective, and recovery is possible. This year's theme, "**Join the Voices for Recovery: Recovery Benefits Everyone,**" emphasizes that all Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost. The theme showcases how public awareness will increase access for those in need of essential substance use and mental health services and how these legislative changes will improve the overall health and well-being of people in the United States.

Treatment hasn't always been easily accessed by some. Approximately 22 percent of adults with substance use and/or mental disorders in 2009 were uninsured. Fortunately, with the passage of the Affordable Care Act in 2010, coverage will expand to approximately 32 million Americans who were not previously insured.

For 22 years now, **Recovery Month** has joined together millions of people across the United States to celebrate recovery and educate communities about substance use and mental disorders. To aid you in planning your **Recovery Month** events, and to provide you with tools and educational materials to distribute in your community, SAMHSA created this toolkit, with an expanded online version available at <http://www.recoverymonth.gov>.

This toolkit gives you useful information in printed form, with extended versions and additional materials posted exclusively online. The toolkit contains three separate sections:

- **Media Outreach** – This section is available exclusively online so you can easily download and customize the template media materials with your local information. To review this section, visit <http://www.recoverymonth.gov>, click on "**Recovery Month Kit**" and locate the "Media Outreach" section. More information about this section is available in the enclosed flyer, titled "How to Use This Toolkit and the **Recovery Month** Website."
- **Targeted Outreach** – In this toolkit, you will find general facts and audience-specific information in brief summaries. For more extensive versions of each piece, visit <http://www.recoverymonth.gov>, click on "**Recovery Month Kit**" and locate the "Targeted Outreach" section.
- **Resources** – This printed section offers local organizations to partner with for your **Recovery Month** activities as well as throughout the year. You also can refer people in need of assistance to these organizations. SAMHSA has included a new "Fast Facts" sheet that outlines general information on substance use and mental disorders, treatment and recovery, and new provisions in the health reform bill in an accessible format. You also can find a "Developing Your Social Network" guide, which contains information on how to promote **Recovery Month** online, through social media platforms such as Twitter and Facebook.

Thanks to your hard work year after year, **Recovery Month** continues to be a fundamental part of raising awareness about the importance of the treatment and recovery community. Our success couldn't be achieved without you. Together, we can make a difference in the lives of those who need treatment, individuals in recovery and those affected by substance use and mental disorders.

RECOVERY

RESOURCES

The resources enclosed in this folder provide guidance on raising year-round awareness for **Recovery Month**. Share these resources with your community members so they can be active participants in the treatment and recovery movement and volunteer to help educate and reach others. The folder includes:

- **Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery** – A fact sheet that includes a bulleted list of top-line statistics about recovery and substance use disorders and facts about health reform and its provisions.
- **Developing Your Social Network** – An instructional guide for developing your own pages on social media platforms, such as Facebook and Twitter, to interact with the online recovery community. Information in this document will aid you in connecting online with individuals and groups with similar interests.
- **Building Community Coalitions** – A resource to help you partner with other organizations during **Recovery Month** and year round.
- **Planning Partners Directory** – A list of organizations that meet regularly throughout the year to plan **Recovery Month** celebrations. These groups could be potential collaborators or resources as you plan your own activities.
- **Single-State Agency (SSA) Directory** – A list of State offices that can provide local information and guidance about substance use and mental disorders, treatment, and recovery in your community.
- **Prevention, Treatment, and Recovery Resources** – An extensive document with substance use and mental disorder prevention, treatment, and recovery resources that cover a wide range of support services.
- **Customer Satisfaction Form** – A feedback form to share your successes during **Recovery Month** and offer feedback to improve future **Recovery Month** materials.

1-800-662-HELP (4357)
1-800-487-4889 (TDD)

WWW.RECOVERYMONTH.GOV



SMA #11-4649

How to Use This Toolkit and the *National Recovery Month* Website

There are many ways you can use the ***National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)*** toolkit—available both in an abbreviated printed form and online with additional components at <http://www.recoverymonth.gov>.

This fact sheet will explain what is available in the printed toolkit and what can be found only online, as well as give you tips on how to best use each element. The three sections of the toolkit—“**Media Outreach**,” “**Targeted Outreach**,” and “**Resources**”—will help you plan your events, reach key audiences in your community, and offer resources to help people.

Media Outreach

The “**Media Outreach**” section offers tips for planning and promoting your ***Recovery Month*** activities, as well as templates to customize and send to local and online media outlets. Available exclusively online, these tools will help you to expand your activities’ reach. On the ***Recovery Month*** website at <http://www.recoverymonth.gov>, you will find:

- **Promoting *Recovery Month* with Events** – Helps you plan both in-person and online events by giving tips on popular event ideas and trends
- **Working with the Media** – Offers guidance about how to publicize your events and other ***Recovery Month*** activities; also includes tips on creating relationships with the media and giving interviews with print and television reporters as well as pitching templates
- **Press Materials for Your *Recovery Month* Event** – Shows you how to develop and distribute media advisories, press releases, and backgrounders, including templates to customize
- **Writing an Op-ed During *Recovery Month*** – Outlines how to draft and submit an op-ed, placed opposite the editorial page of your local newspaper, and includes a template to follow
- **Official *Recovery Month* Proclamations** – Gives tips for what content to include in a proclamation—an official notice from a government official to raise awareness about an issue—and provides a template with instructions for recruiting an official
- **Using Public Service Announcements to Promote *Recovery Month*** – Presents ideas for distributing live-read public service announcements (PSAs) and how to promote pre-recorded ***Recovery Month*** PSAs in your community, as well as a community events PSA available exclusively online
- **Banners, Letterhead, and Logos** – Allows you to customize your outreach materials by printing logos on your organization’s letterhead or copying them onto the camera-ready letterhead provided online (You also can add the ***Recovery Month*** banners or logo to any materials you produce; High-resolution versions of the banners and logos are available online)

Targeted Outreach

The “**Targeted Outreach**” section offers audience-specific information about what provisions are included in the Affordable Care Act, such as improving coverage for and access to substance use and mental disorder prevention, treatment, and recovery support services. In the printed toolkit, SAMHSA has provided brief fact sheets with top-line information. You can use these summaries or the longer versions of each piece, available at <http://www.recoverymonth.gov>, to reach your community. Also included are ideas for distributing the materials in this section.

General Information

- **Overview: Recovery Benefits Everyone!** – This piece offers a general overview about how all Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost. You can provide this information to the general public and other audiences at your **Recovery Month** events.
- **Commonly Misused Substances** – These statistics and trends are broken down by type of drug and can be useful to distribute to other support organizations. Other organizations can use this information for their own **Recovery Month** activities and to educate their members year-round. The printed version is a stand-alone piece separate from the main “Targeted Outreach” printed booklet.
- **Treatment and Recovery: Finding Specialized Help** – This document contains an overview of treatment and recovery support services and can be useful for people with substance use and mental disorders and their loved ones. You can distribute this document during **Recovery Month** and beyond as a primer for people who are seeking help.
- **Join the Voices for Recovery** – This is a snapshot of real stories of people who have struggled with a substance use or mental disorder and are on a path of recovery. As you’ll see, some stories highlight those who work in the prevention, treatment, or recovery support field or others who may be affected by substance use and mental disorders. This piece is a portable mini-book that can be easily shared with others to provide strength and inspiration. These stories are also available online.

Audience-Specific Information

- **A Policymaker’s Guide for Addressing Substance Use and Mental Disorders** – Contact your local, State, or Federal policymakers to highlight the prevalence of substance use and mental disorders in communities throughout the United States and urge them to support **Recovery Month**. This piece contains useful information on the benefits of access to treatment and recovery support services as a result of the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA).
- **Substance Use and Mental Disorders Affect All Individuals** – Use this piece to educate family and friends and to help people who suffer from substance use and mental disorders gain access to treatment and recovery support services.
- **Health Care Providers’ Role in Addressing Substance Use and Mental Disorders** – Distribute this piece to health care providers—including those who work at primary care centers or practices, community health centers (including Federally Qualified Health Centers), trauma centers, pharmacies, and emergency rooms—to educate them about how health reform affects treatment and recovery support services and how to effectively assess and refer patients to these services.
- **Addressing Substance Use and Mental Disorders in the Workplace** – Send this piece to businesses in your community to educate them on addressing substance use and mental health in the workplace setting and how health reform may affect their business.

Resources

The resources SAMHSA has provided can help you prepare for your **Recovery Month** events, as well as consider potential partnerships with other organizations. For more information, please see the pocket on the right side of this toolkit’s folder or visit <http://www.recoverymonth.gov>.

Share your accomplishments. Tell the Substance Abuse and Mental Health Services Administration about your successes and key learnings from this year’s Recovery Month celebration. Fill out the “Customer Satisfaction Form” by going to <http://www.recoverymonth.gov>, clicking on “Recovery Month Kit” and locating the “Resources” section.

JOIN THE VOICES FOR RECOVERY

RECOVERY BENEFITS EVERYONE

This year's **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)** theme highlights the benefits that health reform will bring to individuals, families, and communities nationwide. You can find all the resources you need to plan a **Recovery Month** event this September at <http://www.recoverymonth.gov>.

This website is brought to you by the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT), within the U.S. Department of Health and Human Services (HHS). On this site, you will find useful information and tools to help you:

- Organize local and virtual **Recovery Month** events;
- Build a coalition in your community or online;
- Publicize your events on the **Recovery Month** website and social networking sites, Facebook, accessible at <http://www.facebook.com/RecoveryMonth>, Twitter, accessible at <http://www.twitter.com/RecoveryMonth>, and YouTube, accessible at <http://www.youtube.com/user/RecoveryMonth>; and
- Access and customize media materials with your logo and details, and order **Recovery Month** materials for your own event.

<http://www.recoverymonth.gov>

The **National Recovery Month (Recovery Month)** 2011 website offers:

- A fact sheet including top-line statistics about recovery, substance use disorders and health reform;
- Media outreach tips and tools available exclusively online that offer guidance for garnering media coverage and feature adaptable templates;
- A new media glossary that details how to use online engagement tools;
- A **Recovery Month** planning toolkit online, with instructions for ordering free, hard-copy materials;
- An interactive section to view other activities across the country and post event information, photos, and videos;
- Tips for organizing traditional and online community events and developing community coalitions;
- Television and radio public service announcements (PSAs) and the *Road to Recovery* television and radio series, as well as the latest recovery news;
- A monthly "Ask the Expert" series with treatment-related professionals answering your questions; and
- Tips and tools for linking to the **Recovery Month** website and connecting with others on the campaign's social networking websites, Facebook, accessible at <http://www.facebook.com/RecoveryMonth>, Twitter, accessible at <http://www.twitter.com/RecoveryMonth>, and YouTube, accessible at <http://www.youtube.com/user/RecoveryMonth>. These sites offer a community to connect with and materials, including all **Recovery Month** PSAs.



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TARGETED
OUTREACH

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TARGETED OUTREACH

TARGETED OUTREACH



“ Recovery is a second chance at life and has shown me that there are no limitations to giving to our community and leading the best life we possibly can. ”

Rob Jaspersen

Certified Addictions Counselor

Roseburg, OR

Recovery is possible and so common that half of all adults over age 18 know someone in recovery from addiction to commonly used substances such as alcohol, illicit drugs, or prescription drugs.

SOURCE: *Americans Believe in Prevention and Recovery From Addiction.* CARAVAN Fact Sheet. The Substance Abuse and Mental Health Services Administration website: http://www.samhsa.gov/Attitudes/CARAVAN_Factsheet.pdf, p. 1. Accessed August 12, 2010.

OVERVIEW

Recovery Benefits Everyone!

For 22 years, **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)**, sponsored by the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT), within the U.S. Department of Health and Human Services (HHS), has celebrated people in recovery and lauded the work of treatment providers. **Recovery Month** highlights that all individuals have the fundamental and inherent value to be accepted and treated with respect, dignity, and worth. In addition, **Recovery Month** spreads the message that behavioral health is an essential part of health and one's overall wellness, and that prevention works, treatment is effective and recovery from substance use and mental disorders is possible.

This year's **Recovery Month** theme, **“Join the Voices for Recovery: Recovery Benefits Everyone,”** emphasizes that:

- All Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost.
- Public awareness will increase access for those in need of essential substance use and mental health treatment and recovery support services, including behavioral health treatment.
- These legislative changes will improve the overall health and well-being of people in the United States.

The passage of the MHPAEA provides parity, or the recognition by insurance services—both public and private—that substance use and mental disorders are treated comparably to other physical health and medical conditions.¹

This overview will discuss health reform's impact on access to treatment and recovery services, the overall need for these services in today's society, and groups that can raise awareness about these services.

The Substance Use and Mental Health Landscape

Substance use and mental disorders touch everyone one way or another—regardless of race, age, gender, workplace, geography, or socioeconomic level. While the conditions are widespread, treatment services are effective, and recovery is possible. In fact, millions of Americans are in recovery today.²

Substance use disorders—which include misuse, dependence, or addiction to alcohol and/or legal or illegal drugs—and mental health problems—which include depression, anxiety disorder, mood disorder, post-traumatic stress disorder (PTSD), and others—are major public health concerns in the United States, but prevention and treatment services are available and effective. Studies have shown that substance use disorders include both physical and mental dependences,³ and have characteristics similar to other chronic diseases, such as asthma, hypertension, and diabetes.⁴ Like substance use disorders, mental health problems are common, yet treatable, and the realities are often misunderstood. The most common mental health problems are anxiety and mood disorders, ranging from phobias to major depression and bipolar disorder.⁵

As with other chronic illnesses, individuals who seek treatment and recovery support services for substance use and mental disorders learn new life skills and go on to live healthy, empowered, and productive lives, giving back to their communities.

Understanding the Need for Prevention and Treatment

Effective and cost-efficient strategies for preventing and reducing the severity of some substance use and mental disorders exist. For example, school-based prevention programs for children, teens, and young adults that talk about the dangers of alcohol and/or drug use can reduce the development of substance use disorders.⁶ Despite numerous successful prevention efforts, in 2009, 20.9 million people aged 12 or older still needed treatment for substance use disorders but did not receive it at a specialty substance use facility in the past year,⁷ and 6.1 million adults in the United States aged 18 or older who reported an unmet need for mental health care didn't receive services.⁸ Fortunately, recovery is possible, and so common that half of all adults over age 18 know someone in recovery from addiction to commonly used substances such as alcohol, illicit drugs, or prescription drugs.⁹

A number of risk factors are associated with substance use and mental disorders. Research suggests that genetic factors account for between 40 to 60 percent of a person's risk of developing a substance use disorder.¹⁰ However, just because a substance use or mental disorder runs in a family, it doesn't mean that others in the family or their children will be affected.¹¹ In fact, more than one-half of all children of people with alcohol dependence don't develop the disease.¹² Likewise, while some mental health problems—such as bipolar disorder—tend to run in families, most children with a family history will not develop the condition.¹³ If parents are worried that they or their children may be at risk for a substance use or mental disorder, consider the following tips: don't drink illegally or use illicit drugs,¹⁴ don't misuse prescription medication,¹⁵ address traumatic events,¹⁶ communicate any concerns with a health care provider or a trusted person,¹⁷ and stay physically and mentally healthy.¹⁸

Expanded Access to Treatment

In 2009, approximately 22 percent of adults with substance use and/or mental disorders were uninsured. Of these uninsured adults, one in three had incomes below the Federal Poverty Level.¹⁹ There is a great need to help people who suffer from substance use and/or mental disorders gain access to treatment and recovery support services. Now, with the passage of the Affordable Care Act in 2010, health care coverage will expand to approximately 32 million Americans who were not previously insured.²⁰ This Federal law includes many new provisions aimed at improving coverage for and access to substance use and mental disorder prevention, treatment, and recovery support services.

Through the implementation of the MHPAEA, employer health plans with more than 50 employees enrolled that choose to include coverage for substance use and mental health services must provide those benefits in the same way as all other medical and surgical services covered by their plan. Therefore, for plans that choose to offer coverage, co-payments, deductibles, and annual and lifetime caps on substance use and mental disorder treatment benefits must be equal to benefits for other medical conditions.²¹ Behavioral health is essential to health and this expanded access to treatment can provide thousands of Americans the opportunity to live happy, healthy, and productive lives in long-term recovery.

Encouraging Recovery in Communities Across America

Barriers to the treatment of substance use and mental disorders—including discrimination, lack of access, and denial—still exist. The following groups can be instrumental in raising awareness about the importance of accessing treatment and recovery support services and their effectiveness, to help erase barriers. Additionally, they can educate people nationwide on the physical, emotional, economical, and social benefits of recovery.

- Policy makers** – Local, State, and Federal policymakers need to inform their constituents about the benefit of treatment for and recovery from substance use and mental disorders, and how recovery positively affects communities both socially and economically. For example, after individuals receive treatment in an integrated primary care and substance use setting, total medical costs per patient per month are more than halved.²² With treatment, one's overall health improves, community crime decreases, and employment increases.²³

- **Individuals Affected by Substance Use and Mental Disorders, Families, and People in Recovery** – Millions of people in the United States are directly or indirectly affected by substance use and mental disorders. It is essential to recognize the signs and symptoms of substance use and mental disorders and how to access treatment and recovery support services. Additionally, people already on a path of recovery can help others achieve recovery to live a healthy, productive life and participate fully in their community.
- **Health Care Providers** – Primary care providers, community health centers, and Federally Qualified Health Centers (FQHC) screen, diagnose, and treat people with substance use and mental disorders or work with specialty care providers to help people recover. Specialty treatment providers need to know how health reform will affect the delivery of services. They also need to reevaluate the services they offer and how they collaborate with general health care providers to serve the broader populations needing treatment.²⁴
- **Workforce** – Substance use disorders cost employers more than \$100 billion annually through absenteeism, increased health claims, increased accidents, and lost productivity.²⁵ In addition, the annual economic cost of mental health problems is estimated to be at least \$79 billion, of which \$63 billion is due to lost productivity.²⁶ To combat these issues, employee assistance programs (EAPs), which can range from telephone-based to on-site programs, can be easily implemented. EAPs can benefit companies in many ways, such as improving productivity by more than 50 percent.²⁷ Furthermore, the return on investment in EAP services for mental health problems is about a \$2 to \$4 savings for every dollar invested.²⁸

Recovery Benefits Everyone

The recovery process is different for everyone. SAMHSA supports a recovery-oriented system of care, which recognizes that each person must be the central participant in his or her own recovery. While service types may vary, all services should offer choice, honor each person's potential for growth, focus on a person's strengths, and attend to overall health and well-being.²⁹ For resources that can aid in one's recovery journey and improve overall well-being, refer to the resources available at the end of this document.

Investing in prevention, treatment, and recovery support services benefits everyone by reducing the social and economic burdens that substance use and mental disorders have on society. Specifically, it is possible to decrease the Nation's substance misuse costs, which exceed half a trillion dollars,³⁰ as well as costs related to mental health problems, which amount to approximately \$79 billion, annually.³¹ SAMHSA encourages community leaders, clergy, health care providers, and employers to inform all individuals that in the wake of health reform, coverage for substance use and mental health treatment and recovery support services (if provided) will be equal to the medical and surgical benefits provided for other health conditions. Through access to treatment, complete recovery is possible, ultimately improving one's entire well-being, including mental, physical, spiritual, and emotional health.

Additional Recovery Resources

A variety of resources provide additional information on **Recovery Month**, substance use and mental disorders, and prevention, treatment, and recovery support services.

- **Substance Abuse and Mental Health Services Administration (SAMHSA) Website** (<http://www.samhsa.gov>) – Leads efforts to reduce the impact of substance use and mental disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357)** or 1-800-487-4889 (TDD) – Provides 24-hour free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website** (<http://www.samhsa.gov/treatment>) – Contains information about treatment options and special services located in your area.
- **SAMHSA's "Considerations for the Provision of E-Therapy" Report** (<http://store.samhsa.gov/shin/content/SMA09-4450/SMA09-4450.pdf>) – Shares extensive information on the benefits, issues, and success of e-therapy.
- **SAMHSA's ADS Center** (<http://stopstigma.samhsa.gov>) – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour hotline available to anyone in a suicidal crisis or emotional distress.
- **Alcoholics Anonymous** and **Narcotics Anonymous** (<http://www.aa.org> and <http://www.na.org>, respectively) – Contains an array of resources for individuals suffering from alcohol or drug dependence, respectively, and allows them to find and join a local chapter.
- **Al-Anon/Alateen** and **Nar-anon** (<http://www.al-anon.alateen.org> and <http://www.nar-anon.org>, respectively) – Provides community and support networks for family members of all ages who have been affected by substance use disorders.
- **Narconon** (<http://www.narconon.org>) – Provides prevention, education, and rehabilitation programs for drug misuse and dependence.
- **SMART Recovery**® (<http://www.smartrecovery.org>) – Offers free, self-empowering, science-based mutual-help groups for all types of addictive behaviors.

As health reform continues to be implemented, use the following resources to learn how to access treatment and recovery support services:

- **HealthCare.gov** (<http://www.healthcare.gov>) – Managed by HHS; provides information to the general public on how the new law affects access to health care.
- **The Kaiser Family Foundation** (<http://www.kff.org/healthreform/upload/8061.pdf>) – Provides a summary of the comprehensive health reform law.
- **The Parity Implementation Coalition's Parity Toolkit** (http://www.facesandvoicesofrecovery.org/pdf/final_parity_toolkit.pdf) – Aids individuals in seeking recovery, and their families, providers, and advocates, in understanding their rights under the MHPAEA law.

For a longer version of this guide, please visit <http://www.recoverymonth.gov>, locate the "Recovery Month Kit," and click on the "Targeted Outreach" link. Information about treatment options and special services in your area can be found by calling 1-800-662-HELP (4357) or 1-800-487-4889 (TDD), as well as at <http://www.samhsa.gov/treatment>.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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“ The tools I learned in treatment provided me ways to cope with challenges, be sober, and live life and take pleasure in it. ”

Lorie Hammerstrom
SMART Recovery
Boston, MA

In 2009, 4.3 million people aged 12 or older received treatment for substance use disorders,¹ and 30.2 million adults aged 18 or older received services for mental health problems,² beginning their recovery.

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TREATMENT AND RECOVERY

Finding Personalized Help

Recovery is a life-long process, and people in recovery can experience improved relationships, better mental and physical well-being, and newfound abilities to deal with problems in a healthy manner.¹ Treatment and recovery require hard work, dedication, willingness to change, and a customized treatment plan. In 2009, 4.3 million people aged 12 or older received treatment for substance use disorders² and 30.2 million adults aged 18 or older received services for mental health problems,³ beginning their recovery.

Every year, **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)**, is sponsored by the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT), within the U.S. Department of Health and Human Services (HHS). The campaign celebrates people who are in recovery from substance use and mental disorders and the work of their treatment and recovery support service providers, as well as encourages people in need of help to seek services. **Recovery Month** aims to spread the message that behavioral health is an essential part of health and one's overall wellness, and that prevention works, treatment is effective, and that people can and do recover. **Recovery Month** supports several of SAMHSA's Strategic Initiatives (which can be found at <http://www.samhsa.gov> by clicking on "About Us") and strives to increase public awareness of substance use and mental disorders, health reform implementation, and recovery support through an individual, program, and system approach.

This year's theme, **"Join the Voices for Recovery: Recovery Benefits Everyone,"** highlights that:

- All American's have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost.
- Public awareness will increase access for those in need of essential substance use and mental health treatment and recovery support services, including behavioral health treatment.
- These legislative changes will improve the overall health and well-being of people in the United States.

The passage of the MHPAEA provides parity, or the recognition by insurance services—both public and private—that substance use and mental disorders are treated comparably to other physical health and medical conditions.⁴

This document will outline effective treatment and recovery options for substance use and mental disorders, the need to address co-occurring disorders, holistic approaches to recovery, and the impact of health reform on access to treatment and recovery services.

Effective Treatment and Recovery Options for Substance Use Disorders

In the United States, more than 11,000 specialized treatment facilities provide rehabilitation, behavioral therapy, counseling, medications, and other types of services.⁵ Other treatment and recovery programs exist outside the specialty sector—including emergency room services, private doctor's offices, self-help groups, prisons, and hospitals—which provide support and guidance for those with substance use or mental disorders.⁶ SAMHSA supports recovery-oriented systems of care, which support the idea that each person must be the central participant in his or her own recovery and that a personal recognition of the need for change and transformation is necessary.⁷ Common treatment settings include:

Inpatient or Residential Treatment Programs

These treatment programs are located in a hospital or residential setting, where people temporarily or permanently live to participate in rehabilitation and recovery.⁸ They include the following:

- **Hospital-based rehabilitation units** – Located in a medical/hospital setting or a specialized chemical dependency facility, these programs usually include medical detoxification and are best suited for people who need intensive monitoring or have developed chronic or acute medical or psychiatric problems along with their addiction.⁹
- **Inpatient programs and therapeutic communities** – Short- or long-term inpatient treatment programs house individuals at a treatment facility while they undergo intensive therapy. This type of treatment is often followed by extended participation in support groups (e.g., ongoing group therapy or individual counseling and 12-step programs).¹⁰

Outpatient Treatment Programs

In these programs, individuals don't live at the treatment facility, but return for treatment services through scheduled visits offered in health or hospital clinics, counselors' offices, local health department offices, community mental health centers, or at inpatient programs that also offer outpatient clinics.¹¹ They may include the following:

- **Individual counseling** – These private one-on-one sessions help people address issues of motivation and build skills to resist substance use through behavioral therapy to modify attitudes and behaviors and improve relationship and life skills.¹²
- **Medication-assisted treatment (MAT)** – These clinically driven treatment programs use medications in combination with counseling and behavioral therapies to provide a whole-patient approach to the treatment of substance use disorders.¹³ For example, buprenorphine, methadone, and naltrexone are FDA-approved medications used in treating both alcohol and opioid dependences.¹⁴
- **Family counseling** – These counseling sessions are led by a professional and usually take place in a private practice or clinic to provide a neutral forum. This approach educates family members about substance use disorders, helps them become aware of their loved one's need for support, and improves family communication.¹⁵
- **Group therapy** – This type of therapy has trained leaders that offer healing to foster recovery from substance use disorders. This approach reduces isolation, enables members to witness the recovery of others, provides positive peer support, helps members cope with their condition, offers useful information to those new to recovery, and instills hope.¹⁶

Recovery Support Services

Recovery support services are nonclinical options that provide help through all stages of recovery. Recovery community groups are nonprofit organizations that provide support services to individuals in recovery, which include job training and employment services, housing assistance, parent/family education, and life skills development.¹⁷ Other recovery support services include:

- **Peer-to-peer support programs** – These programs are provided by leaders in the recovery community who are often in recovery themselves. Such programs can expand the capacity of formal treatment systems by initiating recovery and intervening early if or when relapse does occur.¹⁸
- **Mutual support groups** – These groups offer an open environment for members with similar problems to share experiences and can help participants sustain recovery by building new friendships with people who don't use alcohol or drugs. They include well-known programs such as Alcoholics Anonymous and Narcotics Anonymous (accessed at <http://www.aa.org> and <http://www.na.org>, respectively),¹⁹ and other non-12-step programs such as SMART Recovery® (accessed at <http://www.smartrecovery.org>).
- **Faith-based support groups** – Many people rely upon their spirituality during difficult times, and these support programs are available at many churches, synagogues, mosques, or other places of worship and are usually low-cost or free of charge.²⁰

Online Support

Online support provides individuals the opportunity to receive treatment sessions and attend meetings virtually from any location at any time. Online support includes the following resources:

- **E-therapy services** – These treatment services offer participants electronic counsel through text- and non-text-based communication methods (e.g., email, Internet chats, text, telephone, video conferencing).²¹
- **Recovery chat rooms** – Online venues, such as chat rooms, offer a free-form structure for people to share their stories with fellow members of the recovery community.²²
- **Blogs and social networking sites** – One way to connect with others in treatment and recovery is through blogs and social networking sites such as Facebook and Twitter. Refer to the “Building Your Social Network” document in this toolkit for more information on how to effectively connect through social media and visit the **Recovery Month** Facebook page, YouTube channel, and Twitter account.

Effective Treatment and Recovery Options for Mental Health Problems

There are more than 200 classified forms of mental health problems, and similar to cancer, diabetes, and heart disease, these conditions are often physical as well as emotional and psychological.²³ Mental health problems can be effectively treated with a variety of treatment options. Approximately 70 to 90 percent of individuals experience a significant reduction of symptoms and improved quality of life with a combination of medication, therapy, and other support services.²⁴ Common treatment options include:

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Psychotherapy

This method for treating mental health problems is also known as “talk therapy” and involves talking face-to-face with a therapist or other medical professional to help a person understand his or her mental health problem.²⁵ Some types of psychotherapy include:

- **Cognitive Behavioral Therapy (CBT)** – Helps individuals identify distorted thinking patterns, recognize and change inaccurate beliefs, change behaviors, and relate to others in more positive ways.²⁶
- **Psychoanalysis** – Long-term therapy that seeks to identify unconscious motivations and early patterns to resolve issues and to become aware of how those motivations influence present actions and feelings.²⁷
- **Family-Focused Therapy (FFT)** – Designed to include the whole family as way to identify the difficulties and conflicts among family members that may contribute to or worsen an individual’s mental health problem.²⁸
- **Dialectical Behavior Therapy** – Originally developed to help individuals who have suicidal thoughts, reminds the individual when his or her behavior is unhealthy or disruptive, and teaches skills needed to better deal with similar situations in the future.²⁹
- **Interpersonal Therapy** – Works to improve communication patterns and helps people learn to express appropriate emotions in healthy ways and is commonly used to treat depression.³⁰

Medication Therapy

Many treatment options stress the importance of combining prescription medications with therapy and support groups to help create a stable treatment plan and sustain recovery.³¹ Medications are often used to treat the symptoms of mental health problems. They do not cure conditions, but can help people feel better and maintain normal daily routines. Medications work differently for everybody. People should ask their health care professional about the risks, possible side effects, and using the medication with certain foods, alcohol, and other medications.³²

Support Groups

A group-based approach is helpful for many people looking to find support and common ground, with some groups led by peers, while others may be led by a mental health professional. A variety of organizations specialize in different mental health problems (e.g., Alzheimer’s, anxiety, bipolar disorder, autism, depression, eating disorders) and most offer groups for individuals, family members, and friends.³³ For more information on mental health support groups, or for a support group referral, refer to Mental Health America, accessed at <http://mentalhealthamerica.net>, or the National Mental Health Consumers’ Self-Help Clearinghouse, accessed at <http://www.mhselfhelp.org>.

How Health Reform Will Affect Access to Treatment Services

The Affordable Care Act and the MHPAEA include many new provisions aimed at improving coverage for and access to substance use and mental disorder prevention, treatment, and recovery support services. Many of these laws’ provisions will be implemented over the next few years with the large coverage expansion in 2014. Research suggests that expanding people’s access to treatment and recovery support services significantly increases the number of people who actually seek out treatment services.³⁴ SAMHSA’s Health Reform Strategic Initiative (which can be found at <http://www.samhsa.gov/about/strategy.aspx> by clicking on “Health Reform”) emphasizes the increased need for affordable health care coverage, access to appropriate integrated and high-quality care, and works to reduce disparities that currently exist between the availability of behavioral health services and other medical conditions. Refer to the “Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery” document in the “Resources” section of this toolkit for more information on health reform.

The Importance of Addressing Co-Occurring Disorders

An individual who suffers from both a substance use and a mental health problem, such as anxiety or depression, has a co-occurring disorder.³⁵ People with co-occurring disorders may use alcohol and/or illicit drugs to self-medicate symptoms of depression, anxiety, or other mental health problems, but this can eventually worsen the symptoms they initially tried to relieve.³⁶ Below are some helpful tips to maintain mental and physical health if you have a co-occurring disorder:³⁷

- **Follow your physician's advice** and don't take yourself off medication even if you feel better and think you no longer need treatment or medication.
- **Adopt healthy habits such as regular exercise**, healthy eating, and proper sleeping patterns; these can result in more energy and can help you balance your mood.
- **Learn your triggers and identify coping mechanisms** to recognize the causes and signs of your substance use and mental disorders. This will help you develop a personal action plan if you recognize the onset of symptoms.

The Holistic Approach to Recovery

Effective treatment and recovery addresses a person's overall mental and physical well-being.³⁸ Holistic recovery is a gradual process that aims to achieve a greater balance of mind, body, and spirit in relation to other aspects of one's life, including family, work, and community and should accompany a larger treatment plan.³⁹ Some holistic approaches you can try, which are known to be effective in helping to relieve stress include:

- **Acupuncture** – This practice involves inserting fine needles into specific points on the surface of your body to stimulate healing. Acupuncture is rapidly increasing in popularity and is used in many treatment facilities.⁴⁰
- **Creative arts therapy** – Art therapy, which can help you to express feelings that you cannot easily communicate, can help manage emotions and stress.⁴¹
- **Meditation** – This relaxation technique can help you improve your mental concentration and stability, reduce anxiety and depression, and promote a deep sense of inner peace.⁴²
- **Yoga** – This exercise program uses physical postures and controlled breathing to increase your flexibility, calm your mind, improve concentration, and promote patience.⁴³

Additional Recovery Resources

A variety of resources are available that provide additional information on **Recovery Month**, substance use and mental disorders, and prevention, treatment, and recovery support services.

- **Substance Abuse and Mental Health Services Administration (SAMHSA) Website** (<http://www.samhsa.gov>) – Leads efforts to reduce the impact of substance use and mental disorders on communities nationwide.
- **SAMHSA’s National Helpline, 1-800-662-HELP (4357)** or 1-800-487-4889 (TDD) – Provides 24-hour free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.
- **SAMHSA’s “Find Substance Abuse and Mental Health Treatment” Website** (<http://www.samhsa.gov/treatment>) – Contains information about all treatment options and special services located in your area.
- **SAMHSA’s ADS Center** (<http://www.stopstigma.samhsa.gov>) – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour hotline available to anyone in a suicidal crisis or emotional distress.
- **RecoverForever.com** (<http://www.recoverforever.com>) – Offers live online support and contains an abundance of resources on alcohol and drug treatment services that are searchable by State.

As health reform continues to be implemented, use the following resources to learn how to access treatment and recovery support services:

- **HealthCare.gov** (<http://www.healthcare.gov>) – Managed by HHS; provides information to the general public on how the new law affects access to health care.
- **The Kaiser Family Foundation** (<http://www.kff.org/healthreform/upload/8061.pdf>) – Provides a summary of the comprehensive health reform law.
- **The Parity Implementation Coalition’s Parity Toolkit** (http://www.facesandvoicesofrecovery.org/pdf/final_parity_toolkit.pdf) – Aids individuals in seeking recovery, and their families, providers, and advocates, in understanding their rights under the MHPAEA law.

For a longer version of this guide, please visit <http://www.recoverymonth.gov>, locate the “Recovery Month Kit,” and click on the “Targeted Outreach” link. Information about treatment options and special services in your area can be found by calling 1-800-662-HELP (4357) or 1-800-487-4889 (TDD), as well as at <http://www.samhsa.gov/treatment>.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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“ I shared my story with Congress to promote the effectiveness of treatment, the possibility of recovery, and the need for adequate funding of services. ”

Jo Anne Stone

A Stepping Stone to Success

Winter Park, FL

State governments spend more than 13 percent of their budgets on problems related to alcohol and/or drug use. Less than 4 percent of this funding is spent on prevention and treatment, while more than 96 percent pays for the social, health, and criminal costs related to substance use disorders.

SOURCE: *Blueprint for the States: Policies to Improve the Ways States Organize and Deliver Alcohol and Drug Prevention and Treatment.*
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POLICYMAKERS

Guide for Addressing Substance Use and Mental Disorders

Substance use disorders—which include misuse, dependence, or addiction to alcohol and/or legal or illegal drugs—and mental health problems—which include depression, anxiety disorder, mood disorder, post-traumatic stress disorder, and suicide—are a major public health concern in the United States, but prevention and treatment services are available and effective. In 2010, Congress passed and President Obama signed the Affordable Care Act, expanding health care coverage to approximately 32 million Americans who weren't previously insured.¹ This legislation, along with the Mental Health Parity and Addictions Equity Act (MHPAEA), includes many provisions that aim to improve coverage for and access to prevention, treatment, and recovery services for substance use or mental disorders.

Local, State, and Federal governments are the primary funders for treatment and recovery support services, and therefore are critical in conveying that recovery from substance use and mental disorders is possible and benefits the entire community socially and economically.

Every year, the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT) within the United States Department of Health and Human Services (HHS) sponsors **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)**. The campaign raises awareness that behavioral health is an essential part of health and one's overall wellness, and that substance use and mental disorders are treatable and people can and do recover. **Recovery Month** supports several of SAMHSA's Strategic Initiatives (which can be found at <http://www.samhsa.gov> by clicking on "About Us"), particularly the goals of increasing public awareness of substance use and mental disorders, health reform implementation, and offering recovery support through an individual, program, and system approach. This year's theme, **"Join the Voices for Recovery: Recovery Benefits Everyone,"** emphasizes that:

- All Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost.
- Public awareness will increase access for those in need of essential substance use and mental health treatment and recovery support services, including behavioral health treatment.
- These legislative changes will improve the overall health and well-being of people in the United States.

The passage of the MHPAEA provides parity, or the recognition by insurance services—both public and private—that substance use and mental disorders are treated comparably to other physical health and medical conditions.²

This document will help policymakers understand their communities increased access to treatment and recovery services because of health reform and parity, as well as the prevalence of substance use and mental disorders and how treatment and recovery services offer returns on investment, including benefitting the overall health, productivity, and financial standing of a community; and provides suggestions for addressing substance use and mental disorders in their jurisdictions.

Expanding Access to Treatment and Recovery Services

The Affordable Care Act, along with the MHPAEA, aims to improve coverage and access to prevention and essential services for substance use or mental disorders. When the Affordable Care Act is fully implemented, State Health Insurance Exchanges will provide individuals and small businesses with an “one-stop-shop” to find and compare health insurance options.³ SAMHSA’s Health Reform Strategic Initiative (which can be found at <http://www.samhsa.gov/about/strategy.aspx> by clicking on “Health Reform”) promotes the increased need for affordable health care coverage, access to appropriate high-quality and integrated care, a reduction in disparities that exist between the availability of services for substance use and mental disorders and other medical conditions. Information about prevention, treatment, and recovery services for substance use and mental disorders, as well as referral to these services, is available by calling **1-800-662-HELP (4357)** or 1-800-487-4889 (TDD), as well as visiting <http://www.samhsa.gov/treatment>. For further information on how the health reform law affects access to health care, visit the Federal website, <http://www.HealthCare.gov>.

Prevalence of Substance Use and Mental Disorders in the United States

Substance use and mental disorders affect millions of people nationwide—including members of the United States Congress, mayors, and council members. In the United States in 2009, among adults aged 18 or older, 20.8 million people were classified with a substance use disorder,⁴ 45.1 million people were classified with a mental health problem,⁵ and 8.9 million people had co-occurring substance use and mental disorders.⁶ Each year, approximately 40 million destructive illnesses or injuries occur among Americans as the result of their substance use disorder.⁷

According to the National Institute of Mental Health, approximately one in four adults, or 26.2 percent of all Americans aged 18 and older, suffer from a diagnosable mental health problem in a given year.⁸ Fortunately, with a combination of medication, therapy, and other support services, between 70 and 90 percent of individuals with a mental health problem have significantly reduced their symptoms and improved the quality of their lives.⁹

Policymakers, along with family and social service workers, are instrumental in solving this immense problem and improving the lives of those in their communities. It is important that they represent all individuals in their community and raise awareness of the benefits of supporting treatment and recovery services.

The Value of Investing in Treatment—How Recovery Benefits Everyone

Substance use and mental disorders can be effectively treated, just like many other illnesses that affect one’s physical and mental health.¹⁰ Investing in treatment is both necessary and valuable. According to several conservative estimates, every \$1 invested in substance use treatment programs yields a return of between \$4 and \$7 in reduced drug-related crime, criminal justice costs, and theft. When savings related to health care are included, total savings can exceed costs by a ratio of 12 to 1.¹¹ Similarly, treatment for mental health problems works. Research has shown that after three weeks of treatment at a mental health outpatient program, the work impairment of employees living with mental health problems was cut nearly in half, from 31 percent to 18 percent.¹² Increasing access to substance use and mental disorders treatment and recovery support can successfully help:

- Cut medical costs;¹³
- Improve productivity;¹⁴
- Reduce child abuse and foster care rates;¹⁵ and
- Decrease homelessness.¹⁶

Treatment is associated with major reductions in substance use, reductions in costs to society, and improved patient recovery.¹⁷ In 2009, 4.3 million people aged 12 or older received treatment for substance use disorders,¹⁸ and 30.2 million adults aged 18 or older received services for mental health problems,¹⁹ beginning their quest to live a more productive and healthy life.

How to Help Your Community

As the primary allocators of funding for prevention and treatment services for substance use and mental disorders, policymakers have the potential and obligation to help their communities. State governments spend more than 13 percent of their budgets on problems related to alcohol and/or drug use. Less than 4 percent of this funding is spent on prevention and treatment, while more than 96 percent pays for the social, health, and criminal costs related to substance use disorders.²⁰ According to the National Association of State Mental Health Program Directors, 2010 spending for mental health services fell nearly 5 percent compared with 2009.²¹

Policymakers and all elected officials need to provide leadership and develop a strategy to prevent and address substance use and mental disorders.²² As an elected official or policymaker you can help by taking the following steps:

- **Implement treatment interventions in the criminal justice system.** Research shows that drug courts that require participation in substance use or mental health treatment are effective in reducing societal costs and rates of substance use and mental disorders.²³
- **Inform your constituents on health reform** and its effect on access to prevention, treatment, and recovery support services in your community.
- **Issue a proclamation** to raise awareness of substance use and mental disorders in your community or State. The proclamation can highlight significant issues that affect your constituents, including how health reform and the MHPAEA affects treatment and recovery support services. Refer to the “Official Recovery Month Proclamation” document in this toolkit for a sample proclamation that you can customize.
- **Attend a Recovery Month event** to show your solidarity and support for the cause.
- **Plan a public policy forum** or roundtable to raise awareness of substance use and mental disorders and the negative impact they have on communities throughout the United States.
- **Work collaboratively with other national, State, and local leaders** to educate your community on how prevention and treatment can be beneficial through implementing substance use or mental health advisory State boards.

To support one of SAMHSA's Strategic Initiatives (which can be found at <http://www.samhsa.gov> by clicking on “About Us”) it is essential to speak out to the public so that all people are aware of the prevention, treatment, and recovery services available to them and the benefits of accessing these services. Through your work, SAMHSA hopes that individuals will seek assistance for substance use and mental disorders with the same urgency as they would with any other health condition.

Additional Recovery Resources

A variety of resources provide additional information on **Recovery Month**, substance use and mental disorders, and prevention, treatment, and recovery services.

- **Substance Abuse and Mental Health Services Administration (SAMHSA) Website** (<http://www.samhsa.gov>) – Leads efforts to reduce the impact of substance use and mental disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357)** or 1-800-487-4889 (TDD) – Provides 24-hour free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website** (<http://www.samhsa.gov/treatment>) – Contains information about all treatment options and special services located in your area.
- **Single-State Agency Directory** – Included in the **Recovery Month** toolkit and lists State agencies that plan, implement, and evaluate substance use and mental disorders prevention, treatment, and recovery services.
- **SAMHSA's ADS Center** (<http://www.stopstigma.samhsa.gov>) – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour hotline available to anyone in a suicidal crisis or emotional distress.

As health reform continues to be implemented, use the following resources to learn how to access treatment and recovery support services:

- **HealthCare.gov** (<http://www.healthcare.gov>) – Managed by HHS; provides information to the general public on how the new law affects access to health care.
- **The Kaiser Family Foundation** (<http://www.kff.org/healthreform/upload/8061.pdf>) – Provides a summary of the comprehensive health reform law.
- **The Parity Implementation Coalition's Parity Toolkit** (http://www.facesandvoicesofrecovery.org/pdf/final_parity_toolkit.pdf) – Aids individuals in seeking recovery, and their families, providers, and advocates, in understanding their rights under the MHPAEA law.

For a longer version of this guide, please visit <http://www.recoverymonth.gov>, locate the "Recovery Month Kit," and click on the "Targeted Outreach" link. Information about treatment options and special services in your area can be found by calling 1-800-662-HELP (4357) or 1-800-487-4889 (TDD), as well as at <http://www.samhsa.gov/treatment>.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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“ I’ve learned that substance use and other problems may have run in my family for generations, but this doesn’t have to define my life. ”

Anna Sappah

*Alaska Addiction Professionals Association
Anchorage, AK*

Research shows that less than half of all children of people with alcohol dependence develop the disease.

SOURCE: *A Family History of Alcoholism: Are You at Risk?* National Institutes of Health/National Institute on Alcohol Abuse and Alcoholism website: <http://pubs.niaaa.nih.gov/publications/FamilyHistory/Family%20History.pdf>, p.2.

SUBSTANCE USE AND MENTAL DISORDERS AFFECT ALL INDIVIDUALS

There is a great need to help people who suffer from substance use and mental disorders gain access to treatment and recovery support services. Fortunately, through health reform, this vision is about to become a reality for many. The implementation of the Affordable Care Act, along with the Mental Health Parity and Addictions Equity Act (MHPAEA), provides a new opportunity to inform people about expanded access to treatment and recovery services. Individuals with a substance use or mental disorder who seek treatment and recovery support services can live healthy, productive, and meaningful lives in recovery.

This September, **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)**, sponsored by the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT) within the U.S. Department of Health and Human Services (HHS), emphasizes that behavioral health is an essential component of health and one's overall wellness, and that prevention works, treatment is effective, and recovery is possible from substance use and mental disorders. **Recovery Month** shares that all individuals have the fundamental and inherent value to be accepted and treated with respect, dignity, and worth.

This year's theme, **"Join the Voices for Recovery: Recovery Benefits Everyone,"** emphasizes that:

- All Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost.
- Public awareness will increase access for those in need of essential substance use and mental health treatment and recovery support services, including behavioral health treatment.
- These legislative changes will improve the overall health and well-being of people in the United States.

The passage of the MHPAEA provides parity, or the recognition by insurance services—both public and private—that substance use and mental disorders are treated comparably to other physical health and medical conditions.¹

This document will discuss how to recognize the symptoms of these conditions in all ages, tips on helping friends or family members in need, how to access treatment and recovery support services, and strategies to sustain recovery and empower others to seek recovery. In addition, this document will provide resources on **Recovery Month** and information on how health reform will affect treatment and recovery support services.

All Ages are Affected by Substance Use Disorders

Although substance use disorders are prevalent in our communities, treatment is effective, and people can and do recover. In 2009, 4.3 million people aged 12 or older in the United States received treatment for a substance use disorder.² In fact, recovery from a substance use disorder is so common that half of all adults over age 18 know someone in recovery.³ Therefore, all people should learn the signs and symptoms of substance use disorders and how to access prevention and treatment services if needed. Below are symptoms that may accompany a substance use disorder by age group. Similar information for mental health problems can be found later in this document.

Adolescents⁴

- Associating with a new set of friends
- Sudden decline in school performance
- Reduced interest in previous hobbies
- Alcoholic beverages missing from the house

Teens often use alcohol and/or drugs due to social pressures, therefore, their treatment should address both the physical dependence and overall self-worth.⁵ Outpatient, multidimensional family therapy was created for adolescents with alcohol and/or drug problems and addresses issues that may have caused them to use substances. This treatment approach strives to improve overall family functioning.⁶

Young Adults

- Frequent need of medication refill⁷
- Increased tolerance for alcohol⁸
- Legal trouble⁹
- Increased promiscuity¹⁰

Many treatment approaches for young adults exist, but e-therapy, an online approach to counseling, provides an accessible mode of treatment that specifically targets this age group due to their increased experience with technology and social networking.¹¹ In The Rooms (<http://www.intherooms.com>), which offers online support meetings, and Recovery Chat (<http://meetings.recoverychat.com>), a less-structured online venue that allows users to chat with others in every stage of recovery, are effective online treatment and recovery support services.

Middle-Aged Adults¹²

- Anxious or paranoid demeanor
- Deterioration of physical appearance
- Frequent fighting
- Unexplained financial problems

Businesses often offer employee assistance programs (EAPs) that provide access for middle-aged adults to receive substance use disorder treatment while maintaining their career. Some EAP resources include confidential counseling, treatment referrals, and employee education.¹³ Some programs also offer follow-up services that provide assistance to employees who return to work after receiving treatment.¹⁴ Refer to the “Addressing Substance Use and Mental Disorders in the Workplace” document in this toolkit for more information on EAPs.

Older Adults¹⁵

- Anxiousness or irritability
- Increased memory loss
- Being out of touch with loved ones
- Unusual responses to medication

Older adults may find the prospect of treatment difficult, and it is important that they receive treatment services in a way that they feel comfortable.¹⁶ For example, age-specific group treatment may work best for older adults, so they can connect with people their age and find social support.¹⁷

All Ages are Affected by Mental Health Problems

Like substance use disorders, mental health problems are highly treatable, and recovery or management of the condition is possible. Mental health problems affect approximately 1 in 4 adults, or about 57.7 million Americans in a given year.¹⁸ An individual's mental health refers to how the person thinks, feels, and acts, which includes our cognitive and/or emotional well-being. The most common mental health problems include various anxiety disorders and mood disorders.¹⁹ Mental health problems affect people of all ages, races, genders, workplaces, geographies, and socioeconomic levels. Therefore, everyone should learn the signs and symptoms of mental health problems and how to access treatment and prevention services.

Children²⁰

- Changes in school performance
- Poor grades despite strong efforts
- Excessive anxiety in daily activities or persistent nightmares
- Hyperactivity and/or persistent lack of behavioral control

Adolescents²¹

- Inability to cope with problems and daily activities
- Changes in sleeping and/or eating habits
- Defiance of authority and/or substance use
- Prolonged negative mood

Fortunately, research on mental health problems among children and adolescents is constantly evolving, and effective therapies are known for treating many of these conditions.²² It's important to take action and get mental health screenings by a medical professional or community mental health center. Mental health is crucial to the health and well-being of all children. Losing critical developmental years in a child's life can be avoided by identifying a mental health problem early.²³

Adults²⁴

- Dramatic changes in mood and/or behavioral habits
- Excessive fears, anxieties, or anger
- Suicidal thoughts
- Denial of obvious problems
- Numerous unexplained physical ailments
- Excessive absenteeism in the workplace

Many people suffer from more than one mental health problem at a given time, with 45 percent meeting the criteria for two or more disorders.²⁵ Screening for mental health problems is critical to properly diagnose and treat individuals. A wide range of options is available to treat mental health problems. It is important to speak to a health care professional to determine the right recovery plan.²⁶ Refer to the "Treatment and Recovery: Finding Specialized Help" document in this toolkit for more information.

Substance Use and Mental Disorders in Families

If someone in your family has a history of alcohol and/or drug dependence or mental health problems, it doesn't necessarily mean that you will develop any of these conditions. Research shows that less than half of all children of people with alcohol dependence develop the disease.²⁷ You can help reduce you or your family's risk by:

- Avoiding situations and people that encourage drinking and/or drug use;²⁸
- Developing a strong relationship with your children if you're a parent;²⁹
- Keeping a well-balanced life;³⁰
- Seeking help for mental health problems;³¹ and
- Effectively dealing with peer pressure.³²

You can encourage people in your family to get help if they develop a substance use and/or mental disorder. Talk with your loved ones, and let them know that substance use and mental disorders are treatable and people do recover. Conditions can be managed with the support and services provided in recovery-oriented, person-centered care. Reinforce that you are concerned about them, you are there to listen, and you want to help them recover.³³

Access to Treatment and Recovery and Mental Health Support

With the passage of health reform, people may see fewer financial barriers to treatment, better integrated care and more prevention and wellness programs. For instance, under the MHPAEA, when employers cover treatment for substance use and mental disorders, these benefits must be covered equally to any other medical or surgical benefits. Co-payments and deductibles for a visit can't be larger and there can't be greater limits in behavioral health inpatient days than for medical and surgical inpatient days.³⁴ Included in the Affordable Care Act, effective immediately, employer health plans must cover prevention services with no co-payments³⁵ and allow, in most cases, young adult dependents to stay on their parents' insurance plan until they are 26 years old.³⁶ To support SAMHSA's Public Awareness and Support Strategic Initiative (which can be found at <http://www.samhsa.gov> by clicking on "About Us") you can encourage loved ones to seek assistance for a substance use and/or mental disorder with the same urgency as any other health condition.

The Recovery Process

In 2009, more than 20.8 million adults aged 18 or older in the United States suffered from a substance use disorder—people of all ages, races, genders, workplace, geographies, and socioeconomic levels.³⁷ Additionally, 8.9 million adults suffered from both a substance use disorder and a mental health problem, also known as a co-occurring disorder.³⁸ Given this prevalence, it's important to address this public health issue and help people who suffer from substance use or mental disorders seek recovery to manage their condition. Fewer than 20 percent of people in the United States would think less of a friend or relative who is in recovery.³⁹ If you are in recovery, the following tips and strategies can help you sustain it.

- **Avoid tempting situations** that remind you of the times when you misused substances or that cause sadness or anxiety.⁴⁰
- **Express your feelings** to connect with others to develop stronger relationships.⁴¹
- **Find constructive ways to spend your free time** by becoming involved in hobbies and extracurricular activities that benefit your health, well-being, and quality of life.^{42, 43}
- **If you experience a relapse of alcohol and/or drug use**, contact one of your support peers and learn from your choices to help you in the future.⁴⁴

Contribute to *Recovery Month's* Mission to Help Others

Individuals who are already on the path of recovery can help others achieve recovery to live a healthy, productive, and meaningful life. Peer-to-peer support programs are designed and provided by leaders in the recovery community who are often in recovery themselves. Peer leaders build strong and mutually supportive relationships and can expand the capacity of formal treatment systems by initiating recovery, reducing relapse, and intervening early when relapse does occur.⁴⁵ Express your support for **Recovery Month** by becoming a peer leader, giving speeches at schools or retirement homes, volunteering at an event, submitting an op-ed to your local paper, or promoting **Recovery Month** networking sites, including Facebook, Twitter, and YouTube.

Additional Recovery Resources

A variety of resources provide additional information on **Recovery Month**, substance use and mental disorders, and prevention, treatment, and recovery support services.

- **Substance Abuse and Mental Health Services Administration (SAMHSA) Website** (<http://www.samhsa.gov>) – Leads efforts to reduce the impact of substance use and mental disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357)** or 1-800-487-4889 (TDD) – Provides 24-hour free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website** (<http://www.samhsa.gov/treatment>) – Contains information about all treatment options and special services located in your area.
- **SAMHSA's ADS Center** (<http://www.stopstigma.samhsa.gov>) – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour hotline available to anyone in a suicidal crisis or emotional distress.
- **Alcoholics Anonymous** and **Narcotics Anonymous** (<http://www.aa.org> and <http://www.na.org>, respectively) – Contains an array of resources for individuals suffering from alcohol or drug dependence, respectively, and allows them to find and join a local chapter.
- **Al-Anon/Alateen Family Groups** (<http://www.al-anon.alateen.org>) – Provides support groups for families and friends of people with alcohol problems.
- **Nar-Anon** (http://www.nar-anon.org/Nar-Anon/Nar-Anon_Home.html) – Offers a community for family members to share experiences related to substance use disorders.
- **Narconon** (<http://www.narconon.org>) – Provides prevention, education, and rehabilitation programs for drug misuse and dependence.
- **SMART Recovery**[®] (<http://www.smartrecovery.org>) – Offers free, self-empowering, science-based mutual help groups for all types of addictive behaviors.

As health reform continues to be implemented, use the following resources to learn how to access treatment and recovery-oriented services:

- **HealthCare.gov** (<http://www.healthcare.gov>) – Managed by HHS; provides information to the general public on how the new law affects access to health care.
- **The Kaiser Family Foundation** (<http://www.kff.org/healthreform/upload/8061.pdf>) – Provides a summary of the comprehensive health reform law.
- **The Parity Implementation Coalition’s Parity Toolkit** (http://www.facesandvoicesofrecovery.org/pdf/final_parity_toolkit.pdf) – Aids individuals in seeking recovery, and their families, providers, and advocates in understanding their rights and benefits under the MHPAEA law.

For a longer version of this guide, please visit <http://www.recoverymonth.gov>, locate the “*Recovery Month Kit*,” and click on the “Targeted Outreach**” link. Information about treatment options and special services in your area can be found by calling 1-800-662-HELP (4357) or 1-800-487-4889 (TDD), as well as at <http://www.samhsa.gov/treatment>.**

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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“ My depression led me to the hospital, and instead of just giving me medicine, an astute nurse recognized my problem and sent me straight to a 14-day treatment program. ”

Tracey Lee

*Unity Hall/Solano County Health and Social Services
Fairfield, CA*

Research has shown that less than one-third of primary care providers routinely screen their adolescent patients for mental health problems. Health care providers should consider both alcohol or drug misuse and mental health problems when assessing a patient’s illness and during routine check-ups.

SOURCE: Ozer EM, Zahnd EG, Adams SH, et al. *Are Adolescents Being Screened for Emotional Distress in Primary Care.* J Adolesc Health. 2009, 44:520-527.

HEALTH CARE PROVIDERS

Health Care Providers' Role in Addressing Substance Use and Mental Disorders

Over the past decade, vast improvements have been made in the way society and health care providers view substance use and mental disorders. These are chronic yet treatable conditions, and people do recover from even the most serious conditions.¹ Because they are treatable, individuals across the United States should seek assistance for substance use and mental disorders with the same urgency as other health conditions. A variety of medical and non-medical treatment options exist.²

Health care providers, who have the most frequent contact with patients and provide the majority of care, must increase their knowledge of substance use and mental disorders to screen, provide intervention, and referrals to treatment and recovery services for these prevalent public health conditions.

Each September, **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)**, sponsored by the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT), within the U.S. Department of Health and Human Services (HHS) educates the public that behavioral health is essential to health and one's overall wellness, prevention works, treatment is effective, and people can and do recover from substance use and mental disorders. **Recovery Month** stresses that all individuals have the fundamental and inherent value to be accepted and treated with respect, dignity, and worth. This year's theme, **"Join the Voices for Recovery: Recovery Benefits Everyone,"** emphasizes that:

- All Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost.
- Public awareness will increase access for those in need of essential substance use and mental health treatment and recovery support services, including behavioral health treatment.
- These legislative changes will improve the overall health and well-being of people in the United States.

The passage of the MHPAEA provides parity, or the recognition by insurance services—both public and private—that substance use and mental disorders are treated comparably to other physical health and medical conditions.³

Health care providers are on the front lines in assessing, diagnosing, and treating people with substance use and mental disorders. Because providers are often the first contact for a person with an undiagnosed health concern and are responsible for continuing care for a variety of medical conditions, they have the ability to help their patients through careful assessment, intervention, and referral to treatment and recovery services.

This document will outline tips to help patients, how health reform affects providers, how to effectively assess and refer patients with a substance use disorder or mental health problem to treatment services and recovery support, and how all health care providers can make a difference during **Recovery Month** and throughout the year.

Helping Patients Overcome Substance Use and Mental Disorders

Health care providers can educate their patients about the realities of diseases such as substance use and mental disorders and assist their patients in accessing effective and individualized treatment. For both substance use and mental disorders, diagnosis begins with the provider asking questions about the patient's symptoms and medical history, since there is no laboratory test to specifically identify these problems.⁴ To provide the most appropriate and highest quality of care, providers can:

- **Become more comfortable discussing substance use and mental disorders** – Often, health care providers don't discuss alcohol and/or drug misuse with their patients, due to their own misconceptions or because they feel unprepared to diagnose a substance use disorder.⁵ In fact, research has shown that less than one-third of primary care providers routinely screen their adolescent patients for mental health problems.⁶ Consider both alcohol or drug misuse and mental health problems when assessing a patient's illness and during routine check-ups. It's important to always be supportive of patients who have a substance use or mental disorder or are in recovery.
- **Have positive attitudes about recovery** – Giving positive guidance to people with substance use and mental disorders can specifically impact their confidence and future aspirations.⁷ Having a positive outlook about their condition and remaining empathetic, respectful, and nonjudgmental is more likely to make patients feel empowered to seek help and strive to improve their well-being.⁸
- **Seek adequate training** – Many health care providers may not specialize in assessing substance use and mental disorders or be trained on where to refer patients for treatment and recovery support services.⁹ By educating themselves about these relevant topics, providers can effectively screen patients and increase access to treatment and recovery services.
- **Overcome patient resistance** – Approximately 85 percent of patients admit to lying to their physicians about substance use.¹⁰ Continue trying to connect with patients on a personal level, and with time and support, individuals may be ready to trust their provider and seek help.
- **Spread the message that treatment is effective and recovery is possible** – One of SAMHSA's Strategic Initiatives (which can be found at <http://www.samhsa.gov> by clicking on "About Us") focuses on increasing public awareness of substance use and mental disorders. Research shows that individuals with substance use and mental disorders can achieve long-term recovery through a variety of settings and methods.¹¹ Providers can communicate that, as with other chronic medical illnesses, disease management is essential to recovery.¹²
- **Learn more about insurance reimbursements** – Many physicians are concerned that they won't be reimbursed for the time required to screen and treat a patient with a substance use or mental disorder, and admit that this keeps them from beginning the discussion.^{13,14} However, screening and referral services for these conditions are reimbursed by Medicare, Medicaid, and many private insurance options.

By taking the time to educate patients who suffer from substance use and mental disorders on how to change their daily habits, health care providers have the opportunity to empower their patients to live healthy, productive lives, free of alcohol and/or drugs.

Effectively Assessing and Referring Patients with Substance Use Disorders to Treatment Services

Because prevention works and treatment is effective, all health care providers and facilities must commit to prevention and early intervention. Any individual at risk of developing a substance use disorder can be diagnosed through primary care screenings,¹⁵ which quickly assess the severity of one's substance use disorder and identify the appropriate level of treatment necessary.¹⁶ Health care providers should keep in mind while screening and relay to their patients that there is scientific evidence indicating that if adults choose to drink, they should do so in moderation, which is up to 1 drink per day for a woman and up to 2 drinks per day for men.¹⁷

Additionally, brief interventions, consisting of either a single or multiple sessions, aim to motivate a patient to change his or her behavior.¹⁸ An equally important component of screening and brief interventions is referral to treatment and care. Providers should take into account an individual's personal needs as well as the severity of the person's substance use disorder when referring patients to treatment programs.

Effectively Assessing and Referring Patients with Mental Health Problems to Treatment Services

As with substance use disorders, mental health problems do not discriminate. Approximately one in four adults in the United States suffers from a diagnosable mental health problem.¹⁹ Despite the commonality of mental health problems, some conditions—such as depression—often aren't diagnosed, with an estimated 75 percent of those who suffer from depression not receiving a diagnosis.²⁰ It is important that health care providers are trained to recognize, assess, and refer individuals in need to effective treatment and recovery support services.

Screening

Each mental health problem has its own characteristics and symptoms. However, there are general warning signs—including excessive anxieties, thinking and talking about suicide, strange and grandiose ideas, or marked personality change—that might alert providers that a patient needs specialty help. Providers should ask their patients if they have a history of trauma or abuse, or if they have experienced any of these signs.²¹

Once the health care provider identifies a patient's symptoms and conducts a physical exam, most experts use the *Diagnostic and Statistical Manual of Mental Disorder (DSM)* to aid in diagnosing a specific mental health problem. The book, which is compiled by the American Psychiatric Association, classifies and describes more than 300 types of conditions, ranging from anorexia to schizophrenia.²² If providers are not familiar with using the DSM book or free online screeners, such as The Patient Health Questionnaire (PHQ) (<http://www.phqscreener.com>),²³ patients should be referred to a psychiatrist, psychologist, other licensed health professional, or to a peer specialist in the field of recovery who is specifically trained to diagnose and treat mental health problems.²⁴

Referral

When referring a patient to medical treatment or therapy, providers should relay that mental health problems are common, that treatment is effective, and that with help, people can and do recover from these conditions. As with substance use disorders, no universal approach exists for treating mental health problems.²⁵ For more information on mental health problem treatment services, visit the “Treatment and Recovery: Finding Specialized Help” document in this toolkit. Additionally, use the tools and resources at the end of this document, such as **SAMHSA’s National Helpline** at **1-800-662-HELP (4357)**, **SAMHSA’s Treatment Locator** (<http://www.samhsa.gov/treatment>), or Mental Health America (<http://www.mentalhealthamerica.net>).

What Health Reform Means for Health Care Providers and Their Patients

In 2009, nearly 20.9 million people aged 12 or older needed treatment for substance use disorders but didn’t receive it at a specialty substance use facility,²⁶ and 6.1 million adults aged 18 or older who reported an unmet need for mental health care didn’t receive services.²⁷ While a variety of reasons exist, the **2009 National Survey on Drug Use and Health** shows that when examining combined data from 2006 through 2009, almost 37 percent of people who needed treatment for a substance use disorder, and made an effort to get treatment, didn’t receive it because they did not have health coverage or could not afford the cost.²⁸ In addition, in 2009, 42.5 percent of 6.1 million adults needed mental health services, but didn’t receive them because they reported that they couldn’t afford mental health care.²⁹ Through the passage of the Affordable Care Act, along with the MHPAEA, health insurance coverage will expand over the next several years to millions who were not previously insured, including those in need of substance use and mental disorder treatment.³⁰

Changes that may impact health care providers and their patients include:

- **Increased access to primary care providers** – The Affordable Care Act has a number of provisions for improving primary care with a comprehensive strategy to strengthen and grow the primary care workforce. Over \$30 billion will be invested into Federally Qualified Health Centers from 2011 to 2015, which will expand care to millions of Americans, increasing access to treatment and recovery services for many in need.³¹
- **Protection for health care consumers** – Through the Affordable Care Act, Americans will be protected against the worst abuses of some health insurance companies. For example, the provisions will protect Americans by prohibiting denying coverage of children based on pre-existing medical conditions. Additionally, the law will eliminate lifetime limits on coverage.³²

Many of these laws’ provisions will be implemented in the next couple of years and because each health insurance plan will differ depending on the provider and plan options, it’s important for patients to understand their plan to best use their benefits. SAMHSA’s Health Reform Strategic Initiative (which can be found at <http://www.samhsa.gov/about/strategy.aspx> by clicking on “Health Reform”) supports and promotes the increased need for affordable health care coverage and access to appropriate high-quality care. It also works to reduce disparities that currently exist between behavioral health services and medical or surgical benefits. Refer to the “Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery” document in the “Resources” section of this toolkit for more information on health reform.

Making a Difference During *Recovery Month* and Throughout the Year

This September and throughout the year, SAMHSA encourages all health care providers to become involved in **Recovery Month**. To make a difference in someone's life:

- **Offer free screenings and seminars** to underserved communities. Research guest speaking opportunities at local schools and community groups to showcase the positive effects of recovery on one's overall health and well-being.
- **Share your story** if you are a health care provider in recovery from a substance use disorder or are managing a mental health problem. Encourage others and let them know they are not alone. Help them learn about treatment and recovery options.
- **Attend trainings or continuing education courses to increase your understanding of appropriate treatment and recovery services.** Learn how to effectively screen, assess, intervene, and refer individuals in need of treatment services.

Additional Recovery Resources

A variety of resources provide additional information on **Recovery Month**, substance use and mental disorders, and prevention, treatment, and recovery support services.

- **Substance Abuse and Mental Health Services Administration (SAMHSA) Website** (<http://www.samhsa.gov>) – Leads efforts to reduce the impact of substance use and mental disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357)** or 1-800-487-4889 (TDD) – Provides 24-hour free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website** (<http://www.samhsa.gov/treatment>) – Contains information about all treatment options and special services located in your area.
- **SAMHSA's ADS Center** (<http://www.stopstigma.samhsa.gov>) – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour hotline available to anyone in suicidal crisis or emotional distress.

As health reform continues to be implemented, use the following resources to learn how to access treatment and recovery support services:

- **HealthCare.gov** (<http://www.healthcare.gov>) – Managed by HHS; provides information to the general public on how the new law affects their access to health care.
- **The Kaiser Family Foundation** (<http://www.kff.org/healthreform/upload/8061.pdf>) – Provides a summary of the comprehensive health reform law.
- **The Parity Implementation Coalition's Parity Toolkit** (http://www.facesandvoicesofrecovery.org/pdf/final_parity_toolkit.pdf) – Aids individuals in seeking recovery, and their families, providers, and advocates in understanding their rights under the MHPAEA law.

For a longer version of this guide, please visit <http://www.recoverymonth.gov>, locate the “*Recovery Month Kit*,” and click on the “*Targeted Outreach*” link. Information about treatment options and special services in your area can be found by calling 1-800-662-HELP (4357) or 1-800-487-4889 (TDD), as well as at <http://www.samhsa.gov/treatment>.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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“ I’ve found my niche after starting my own business as a recovery consultant. Life is better today because I can help people sustain recovery, thus giving me strength to continue on my own journey. ”

Don Rothschild

Peak Paths

Denver, CO

Of the 20.8 million adults aged 18 or older classified with substance use dependence or abuse, 70 percent are employed full or part time.¹ In addition, depression—the most common mental health problem in the workplace—affects about 1 in 10 employees.²

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¹ Data courtesy of U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Behavioral Health Statistics and Quality, February 2011.

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Addressing Substance Use and Mental Disorders in the Workplace

The majority of people with substance use and mental disorders are employed. In fact, of the 20.8 million adults aged 18 or older classified with substance use dependence or abuse, 70 percent are employed full or part time.¹ In addition, depression, the most common mental health problem in the workplace, affects about 1 in 10 employees.² Increasing access to treatment and recovery support services will improve employee health, lower health care costs, reduce absenteeism, reduce the risk of injury, and ultimately improve job performance and productivity.³

Sponsored by the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT), within the U.S. Department of Health and Human Services (HHS), **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)** raises awareness of substance use and mental disorders and stresses that prevention works, treatment is effective, and people can and do recover from these conditions. **Recovery Month** shares that all individuals have the fundamental and inherent value to be accepted and treated with respect, dignity, and worth. This year's theme, **"Join the Voices for Recovery: Recovery Benefits Everyone,"** emphasizes that:

- All Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost.
- Public awareness will increase access for those in need of essential substance use and mental health treatment and recovery support services, including behavioral health treatment.
- These legislative changes will improve the overall health and well-being of people in the United States.

The passage of the MHPAEA provides parity, or the recognition by insurance services—both public and private—that substance use and mental disorders are treated comparably to other physical health and medical conditions.⁴

Through its Health Reform Strategic Initiative (which can be found at <http://www.samhsa.gov/about/strategy.aspx> by clicking on "Health Reform") SAMHSA encourages people to understand the major themes of the Affordable Care Act: integration between primary care and behavioral health, accountability, quality home- and community-based services, and availability of wellness and prevention services. **Recovery Month** also supports SAMHSA's Strategic Initiatives by increasing public awareness of substance use and mental disorders and offering recovery support through an individual, program, and system approach.

In addition to educating employees about the positive benefits that health reform will have on their overall health and well-being, all employers can implement effective prevention, wellness, and support programs at their workplace and refer employees in need to assessment and treatment.⁵

This document will outline the importance of prevention and support in the workplace, the prevalence of substance use and mental disorders among employees, and factors in the workplace that contribute to increased substance use and mental disorders. Additionally, it will discuss how health reform helps small and large businesses and ways employers can get involved with **Recovery Month** to address substance use and mental disorders in all work settings.

Education, Awareness, and Support in the Workplace

Employee education, awareness, and support campaign, which educate employees on the overall impact substance use and mental disorders can have on their family and coworkers, are effective in preventing problems both in and out of the workplace.⁶ Through these prevention, treatment, and wellness programs, employers can promote healthy lifestyles and reinforce the following positive messages to their employees:⁷

- Drug-free workplace policies protect the health and safety of all employees, customers, and the public.
- By effectively addressing substance use and mental disorders, employers can see benefits such as improved employee morale, quality of work, employee satisfaction, and decision-making, as well as reduced absenteeism and tardiness.
- Implementing exercise programs and beginning other health-oriented activities can help improve physical and emotional health issues among employees, such as weight problems, high blood pressure, diabetes, depression, or gastric problems and can help reduce stress.

In short, prevention works, treatment is effective, and people do recover from substance use and mental disorders while contributing to their jobs. Visit the Mental Health America website, accessed at <http://www.mentalhealthamerica.net/go/information/get-info/workplace>, for various tips and resources to help identify employees who have a mental health problem and help them access treatment services.

Prevalence of Substance Use and Mental Disorders in the Workplace

Use of substances may occur both on and off the job, equally affecting one's overall health, well-being, and work performance. According to a national survey, in the course of a year, more than 2 million people used illicit drugs during work hours, and approximately 7 percent of Americans used alcohol during the workday.⁸ Specific occupations—including construction workers, sales personnel, restaurant workers, and transportation workers—have the highest rates of reported substance use. Additionally, mental health problems—especially depression—are extremely common,⁹ affecting approximately 1 in 10 employees.¹⁰ It's estimated that 72 percent of people in the workforce who have depression are not properly diagnosed, causing over \$63 billion lost annually due to decreased productivity.¹¹ Prevention, awareness, and support campaigns in and out of the workplace are essential to combat these treatable, yet common, public health problems.

Contributing Factors to Substance Use and Mental Disorders in the Workplace

Occupational, personal, and social factors play a role in increased substance use and mental disorders in and outside the workplace. For example, job responsibilities that have low satisfaction or inconsistent supervision may contribute to increased substance use and mental disorders.¹² Additionally, personal stressors, such as an illness, trauma, or marital strain,¹³ as well as economic worries, are common troubles that also can contribute to a substance use or mental disorder.¹⁴

The following signs may be present in employees who are dealing with these issues:¹⁵

- Increased work absences and on-the-job accidents;
- Inconsistent work quality or work not up to its usual standards; and
- Extended lunch breaks, late arrivals, or early departures.

Employers should support **Recovery Month's** efforts by encouraging employees and company leaders to brainstorm and apply positive ways to help prevent substance use and mental disorders within the workplace, and refer colleagues to treatment and recovery support resources if needed.

Health Reform Substantially Affects the Workplace

Based on combined data from 2006 through 2009, almost 37 percent of people aged 12 or older who needed substance use treatment, felt a need for treatment, and made an effort to receive treatment, didn't receive it because they didn't have health coverage or couldn't afford the cost.¹⁶ Additionally, more than 42.5 percent of the 6.1 million adults aged 18 or older who reported an unmet need for mental health care, but didn't receive services, cited the inability to afford care as a barrier to treatment.¹⁷ However, with the passage of the Affordable Care Act in 2010, coverage will expand to approximately 32 million Americans who were not previously insured.¹⁸

The Affordable Care Act includes many provisions aimed at improving prevention coverage and access to essential substance use and mental health treatment and recovery support services, including behavioral health treatment. Small and large employers should keep several things in mind as the legislation is implemented. For instance, as of 2010, a small business may qualify for a tax credit of up to 35 percent to offset the cost of providing health insurance to employees. This applies to companies that have up to 25 employees, pay average annual wages below \$50,000, and provide health insurance.¹⁹ For large employers that have more than 50 employees, the health plan that was in effect on March 23, 2010, when the Affordable Care Act was passed is exempt from certain provisions in the Affordable Care Act if no major changes are made to coverage.²⁰ For more information on how health reform will affect employers, visit <http://www.HealthCare.gov>. Additionally, refer to the "Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery" document in this toolkit for more information on health reform and the positive effects it, along with the MHPAEA, will have on access to treatment and recovery support services.

Addressing Substance Use and Mental Disorders in Your Workplace

This September and throughout the year, SAMHSA encourages all employers and workers to become involved in **Recovery Month** and work to improve the overall health and well-being of people in all workplace settings. Specifically, as an employer, you can:

- Write a comprehensive alcohol- and drug-free policy;
- Train supervisors to detect signs of substance use and mental disorders and educate your employees about how they can impact the workplace;
- Provide an employee assistance program (EAP);
- Start a drug testing program;
- Encourage work-life balance;
- Sponsor a **Recovery Month** event; and
- Offer free space to your employees to hold support group meetings.

Additional Recovery Resources

A variety of resources provide additional information on **Recovery Month**, substance use and mental disorders, and prevention, treatment, and recovery support services.

- **Substance Abuse and Mental Health Services Administration (SAMHSA) Website** (<http://www.samhsa.gov>) – Leads efforts to reduce the impact of substance use and mental disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357)** or 1-800-487-4889 (TDD) – Provides 24-hour free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website** (<http://www.samhsa.gov/treatment>) – Contains information about treatment options and special services located in your area.
- **SAMHSA's Division of Workplace Programs** (<http://www.workplace.samhsa.gov>) – Provides guidance for employers on workplace drug-testing issues and can also be accessed by calling 1-800-Workplace (967-5752).
- **SAMHSA's ADS Center** (<http://www.stopstigma.samhsa.gov>) – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour hotline available to anyone in a suicidal crisis or emotional distress.
- **Mental Health America** (<http://www.nmha.org>) – Offers resources about the realities of mental health and mental illness.

As health reform continues to be implemented, use the following resources to learn about the impact of these changes on access to treatment and recovery support services:

- **HealthCare.gov** (<http://www.healthcare.gov>) – Managed by HHS; provides information to the general public on how the new law affects their access to health care.
- **The Kaiser Family Foundation** (<http://www.kff.org/healthreform/upload/8061.pdf>) – Provides a summary of the comprehensive health reform law.
- **The Parity Implementation Coalition's Parity Toolkit** (http://www.facesandvoicesofrecovery.org/pdf/final_parity_toolkit.pdf) – Aids individuals in seeking recovery, and their families, providers, and advocates in understanding their rights under the MHPAEA law.

For a longer version of this guide, please visit <http://www.recoverymonth.gov>, locate the "Recovery Month Kit," and click on the "Targeted Outreach" link. Information about treatment options and special services in your area can be found by calling 1-800-662-HELP (4357) or 1-800-487-4889 (TDD), as well as at <http://www.samhsa.gov/treatment>.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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Substance Abuse and Mental Health Services Administration

SAMHSA

www.samhsa.gov • 1-877-SAMHSA-7 (1-877-726-4727)

1-800-662-HELP (4357)

1-800-487-4889 (TDD)

WWW.RECOVERYMONTH.GOV

National
Recovery Month

Prevention Works • Treatment is Effective • People Recover

SEPTEMBER 2011

JOIN THE VOICES FOR RECOVERY

RECOVERY BENEFITS
EVERYONE

TARGETED
OUTREACH

COMMONLY MISUSED SUBSTANCES



Every year, **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)** offers assistance and resources for those in need of treatment and recovery support services, as well as their friends, colleagues, and loved ones. In 2009, millions of individuals began their recovery from substance use and mental disorders, some through treatment: 4.3 million people received treatment for a substance use disorder¹ and 30.2 million people for a mental health problem.² Many people use alcohol and/or illicit drugs to self-medicate the symptoms of depression, anxiety, or other mental health problems, or to escape physical and emotional discomfort.³ This can worsen the symptoms they initially tried to relieve, and can lead to substance use disorders.⁴ However, treatment does work and people can and do recover from substance use and mental disorders.

This year's theme, **“Join the Voices for Recovery: Recovery Benefits Everyone,”** emphasizes that all Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost.

Substance	Other Names ^{5,6}	Immediate Intoxication Effects ⁷
Alcohol, Inhalants, and Tobacco		
Alcohol	Booze	Depressant: Impaired coordination, memory and judgment; slurred speech; decreased attention and memory
Tobacco products	Chew, dip, smoke, cigarettes, cigars, smokeless tobacco, snuff, spit tobacco	Stimulant: Increased adrenaline, metabolism, and concentration
Gases, nitrites, aerosols (inhalants)	Ether, chloroform, nitrous oxide, isobutyl, isoamyl (poppers, snappers, whippets, laughing gas)	Stimulant: loss of inhibition, loss of motor coordination, slurred speech, and muscle weakness
Illicit Drugs		
Cocaine (including crack cocaine)	Coke, snow, flake, blow, bump, toot, C, white lady, crack, rock	Stimulant: Increased alertness, attention, and energy
Ecstasy	Adam, E, X, eve, XTC, decadence, M&M	Stimulant: Increased energy, feelings of peacefulness and acceptance
Heroin	Big H, dope, smack, white horse	Feeling of euphoria, flushing of skin, dry mouth, and heaviness of the extremities
Hallucinogens	LSD, peyote, acid, mellow yellow, boomers, shrooms	Delusions, changes in senses, mood, and body temperature
Marijuana	Pot, weed, hash, grass, reefer, Mary Jane, ganja	Distorted perceptions, impaired coordination, and loss of memory
Methamphetamine	Speed, meth, chalk, ice, crank	Stimulant: Agitation, anxiety, insomnia, and decreased appetite
Prescription Drugs		
Pain relievers (Opioids: Hydrocodone, oxycodone, morphine, codeine, fentanyl)	Vike (Vicodin®), Oxy, O.C. (Oxycontin®), M (roxanol), Schoolboy (empirin with codeine), China white, dance fever (Actiq®)	Pain relief, feeling of euphoria, and drowsiness
Psychotherapeutics	Prozac®, Zoloft®, Ritalin®	Increased attention and alertness, and dizziness
Sedatives	Haldol®, Thorazine®, Navane®, Prolixin®, Mellaril®, Trilafon®	Depressant: Reduced anxiety, induced sleep, and lowered inhibitions
Tranquilizers	Benzos (Mebaral®, Ativan®, Xanax®, Valium®, Nembutal®, Librium®)	Depressant: Reduced anxiety, induced sleep, and lowered inhibitions
Stimulants (methylphenidate, amphetamines) ¹⁴	Adderall®, Ritalin®, Concerta®	Increased calming, “focusing” effect

Recovery Month stresses that all individuals have the fundamental and inherent value to be accepted and treated with respect, dignity, and worth. The campaign supports several of SAMHSA's Strategic Initiatives (which can be found at <http://www.samhsa.gov/about/strategy.aspx>), particularly the goals of increasing public awareness of substance use and mental disorders, health reform implementation, and recovery support through an individual, program, and system approach. Public awareness will increase access for those in need of essential treatment and recovery support services and improve the overall health and well-being of people in the United States.

Statistics from the **2009 National Survey on Drug Use and Health** show that education about the dangers of substance use and mental disorders, along with prevention, treatment, and recovery education, is critical to decrease the growing rates of substance use.

Using data from the National Institute on Drug Abuse, The Partnership for a Drug-Free America, and the 2008 and 2009 **National Survey on Drug Use and Health**, the following chart provides an overview of the most commonly misused substances in the United States, including how prescription medications are abused. The chart can be used to raise awareness about the prevalence of these substances and the need for substance use and mental disorder treatment and recovery support services.

Negative Health Effects ⁸	Average Age of First Use in 2009 (vs. in 2008) and Current Rate Among Youth ^{9, 10, 11}	Number of People Who Used it in the Past Month in 2009 vs. in 2008 ^{12, 13}
Alcohol, Inhalants, and Tobacco		
Seizures, chronic sleep problems, respiratory depression, respiratory arrest, damage to vital organs, high blood pressure, negative pregnancy outcomes (including Fetal Alcohol Syndrome)	16.9 years in 2009 (17 years in 2008); (rate of current alcohol use is 3.5% among youth aged 12 or 13, and 13% among youth aged 14 or 15)	130.6 million people in 2009 (similar to 129 million people in 2008)
Increased blood pressure and heart rate, lung disease, coronary heart disease, stroke, cancer	17.5 years in 2009 (17.4 years in 2008); (rate of current tobacco use is 11.6% among youth aged 12 to 17)	69.7 million people in 2009 (similar to 70.9 million people in 2008)
Rapid or irregular heartbeat, cardiovascular and nervous system damage	16.9 years in 2009 (15.9 years in 2008)*	0.6 million people in 2009 (similar to 0.64 million people in 2008)
Illicit Drugs		
Rapid or irregular heartbeat, stroke, muscle spasm, chest pain, nausea	20 years in 2009 (19.8 years in 2008); (rate of current cocaine use is 0.3% among youth aged 12 to 17)	1.6 million people in 2009 (similar to 1.9 million people in 2008)
Involuntary teeth clenching, loss of inhibition, increased heart rate, anxiety, blurred vision	20.2 years in 2009 (20.3 years in 2008)*	760,000 people in 2009 (increased from 550,000 people in 2008)
Collapsed veins, infection of the heart lining and valves, abscesses, liver disease, kidney disease, pulmonary complications	25.5 years in 2009 (23.4 years in 2008)*	0.2 million people in 2009 (same as in 2008)
Elevated heart rate, increased blood pressure, persistent mental health problems	18.4 years in 2009 (18.4 years in 2008); (rate of current hallucinogen use is 0.9% among youth aged 12)	1.3 million people in 2009 (similar to 1.1 million people in 2008)
Increased heart rate, respiratory infection, impaired memory, anxiety	17 years in 2009 (17.8 years in 2008); (rate of current marijuana use is 7.3% among youth aged 12 to 17)	16.7 million people in 2009 (increased from 15.2 million people in 2008)
Rapid or irregular heartbeat, stroke, high blood pressure, delusions, anxiety, hallucination	19.3 years in 2009 (19.2 years in 2008)*	502,000 people in 2009 (increased from 314,000 people in 2008)
Prescription Drugs		
Restlessness, muscle and bone pain, drowsiness, seizure, respiratory depression, decreased heart rate	20.8 years in 2009 (21.2 years in 2008); (rate of current nonmedical use of prescription pain relievers is 2.7% among youth aged 12 to 17)	5.3 million people in 2009 (increased from 4.7 million people in 2008)
Blurred vision, rapid heartbeat, skin rashes, persistent muscle spasms, tremors	21 years in 2009 (22 years in 2008)*	7 million people in 2009 (increased from 6.2 million people in 2008)
Seizures, chronic sleep problems, respiratory depression, respiratory arrest	19.7 years in 2009 (15.9 years in 2008)*	370,000 people in 2009 (increased from 234,000 people in 2008)
Seizures, chronic sleep problems, respiratory depression, respiratory arrest	22.4 years in 2009 (24.4 years in 2008)*	2 million people in 2009 (similar to 1.8 million people in 2008)
Increased blood pressure, heart rate, and body temperature; decreased sleep and appetite; stroke	21.5 years in 2009 (21.3 years in 2008)*	1.3 million people in 2009 (increased from 904,000 people in 2008)

*Data for current rate among youth not available.

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1-800-487-4889 (TDD)

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Inclusion of websites and other resources mentioned in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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National
Recovery Month

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SEPTEMBER 2011

JOIN THE VOICES FOR RECOVERY

RECOVERY BENEFITS EVERYONE

PERSONAL STORIES ABOUT RECOVERY





JOIN THE VOICES FOR RECOVERY

Every year, the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT), within the U.S. Department of Health and Human Services (HHS), sponsors **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)**. This initiative celebrates that all individuals have the fundamental and inherent value and need to be accepted and treated with respect, dignity, and worth. Each September, the campaign raises awareness that behavioral health is an essential part of health and one's overall wellness, and that substance use and mental disorders are treatable and people can and do recover. The observance celebrates people in recovery and those who work in the treatment field.

This year's **Recovery Month** theme, **"Join the Voices for Recovery: Recovery Benefits Everyone,"** encourages community leaders, health care providers, and people in the workplace to inform all individuals that the Affordable Care Act expands coverage to those previously uninsured, and that the Mental Health Parity and Addictions Equity Act (MHPAEA) includes many new provisions aimed at improving coverage for and access to substance use and mental health treatment and recovery support services. The theme also encourages family members and friends to support those they know on their path to recovery.

The following narratives bring this theme to life in a unique and personal way. They highlight the positive effects of treatment and recovery, and the effects substance use and mental disorders have on an individual as well as those surrounding them. Learn from these stories, share their voices, and take action to help expand and improve the availability of effective treatment for those still in need.



RICK DYER

LAW OFFICES OF RICHARD J. DYER NEWTON, MA

My story proves that recovery can help and is effective.

Despite coming from a happy family, I was dependent on alcohol and drugs by my early teens. Addiction quickly left me homeless, helpless, and penniless, robbing me of my youth and driving me to spend years in jail. Regardless, the love and commitment of the recovery community helped me learn the tools and skills to transform my life, return to school, and finally become a trial lawyer and advocate for people with substance use disorders.

It was because of the people who believed in me when I had lost faith in myself that I was able to earn my G.E.D. while incarcerated, and later graduated from college and law school. The Governor of Massachusetts graciously pardoned my past crimes, and I hope to become a judge in my home state. I have been featured in Parade Magazine and have appeared on CBS Weekend News.

Although I am a member of a 12-step group, recovery comes by many paths. It teaches responsibility and self-respect. Recovery has brought me a level of satisfaction and accomplishment I never dreamed was possible while using alcohol and drugs. Most importantly, recovery has shown me how to give back and to love: my community, my family, and most importantly, myself. Recovery works.



TIMOTHY HOWARD

PROJECT DEVELOPER
DRUG LAW REFORM - CRIMINAL JUSTICE SERVICES
NEW YORK, NY

As a result of a drug treatment program, I began my recovery on April 4, 1990. On that day, I realized a higher power might have a better plan for me if I was willing to surrender long enough.

But recovery was the last thing on my mind in the late 1970s and 1980s as I was running the streets of Harlem. Then, I thought that alcohol and drugs were just an aspect of partying. My frame of mind led me to multiple visits to jail, three broken marriages, abandonment of my three children, and the loss of countless jobs. Not much of a party. I didn't know what my future looked like, but I knew for sure what the past looked like, and I didn't like it.

I sought out 12-step meetings, obtained a sponsor, and worked the program. I returned to school and achieved a bachelor's degree and a master's in social work. Today, I have become a credentialed alcohol and substance abuse counselor and licensed master of social work.

“ I didn't know what my future looked like, but I knew for sure what the past looked like, and I didn't like it. ”

MARY ANN MAIKISH

**CASAC/VOLUNTEER GROWTH GROUP COUNSELOR
BETH ISRAEL STUYVESANT SQUARE REHAB
NEW YORK, NY**

My growth during my 22 years of recovery has been a slow process—sometimes painful, sometimes exhilarating, and always wonderful.

As the third-generation in my family with a substance use disorder, I was no stranger to 12-step programs. I was the child of an alcoholic, tied up in knots, paralyzed emotionally by fears, full of secrets, and longing for oblivion. Despite all this, I appeared to be highly functioning as I worked my way through college and graduated with a bachelor's degree, albeit while using lots of marijuana and LSD.

I was clean during pregnancy and for the first five years of my daughter's life, but being an addict without a program, I picked up alcohol again. I had a good job, a beautiful child, and a loving family, but I was in total denial.

In 1988, my family staged an intervention, which resulted in detoxification, inpatient rehabilitation, outpatient group therapy, individual therapy, and a 12-step program. As a result, I acquired tools of sobriety that I use daily.

Because of my experiences, I can and do contribute to the field as a counselor and member of a 12-step program. I was so honored to have been chosen as the 2010 A&E Delegate from New York State to The Recovery Project in Philadelphia. In addition, I contribute to my community as a member of the Community Emergency Response Team, the Bellevue Hospital Community Advisory Board, and as a volunteer at my synagogue's homeless shelter.

“ My growth during my 22 years of recovery has been a slow process—sometimes painful, sometimes exhilarating, and always wonderful. ”

Mary Ann Maikish





BETTY CURRIER

FRIENDS OF RECOVERY NEW YORK
COOPERSTOWN, NY

My recovery journey has been nothing short of amazing, filling me with peace, hope, love, and purpose. In short, it's been a life beyond my wildest dreams. For more than 20 years, I managed to look good on the outside, but inside I was drowning in fear, shame, loneliness, and overwhelming hopelessness that no amount of alcohol could fill. I am proud to say that I am in long-term recovery, and I haven't needed a drink to change how I think, feel, or act since January 6, 1976.

My recovery has been enriched, and I've been able to pass on what I was so freely given and experienced firsthand. I've been able to provide support and encouragement to others on their own pathway to recovery. Then an influential movement attracted my attention—advocacy.

Advocacy reaches not only the recovery community, but also the greater population with the message that recovery is real, and policies and services that support recovery are vital. I'm a founding board member of Friends of Recovery of Delaware & Otsego Counties, in New York State, where we operate county recovery community centers and speak out for the needs of individuals living in these very rural areas. More recently, I've helped establish Friends of Recovery New York, a statewide organization that leads recovery advocacy and provides support and encouragement to local communities of recovery as they join us in this nationwide movement.

My commitment and life purpose will always be to demonstrate the reality of recovery for those affected by substance use and mental disorders and to help change public perceptions and embrace recovery. I'm so very proud to be a face and voice of recovery.



HONESTY LILLER

THE MCSHIN FOUNDATION
RICHMOND, VA

I started using drugs at age 12 and couldn't stop, but am now in long-term recovery.

After I found heroin at age 17, nothing was important to me other than using drugs. During this whirlwind I became pregnant, but that didn't stop me from using. I was in and out of treatment for years until I finally threw my hands up and gave myself to recovery. I was done with the pain of addiction. A recovery community organization took me in and showed me how to live again. I became a member of a 12-step program that has saved my life.

Today, I am surrounded by recovery, and I love every bit of it. I have been drug-free for almost 4 years. I am a proud wife, mother, sister, daughter, and friend. Recovery has turned my life around completely, and for that I am truly grateful.

“ Recovery has turned my life around completely, and for that I am truly grateful. ”

FRANCISCO TORRES

WE CAN RECOVER TREATMENT CENTER OLATHE, KS

I was born in Cuba in 1961 to a poor family in a poor town, mistreated because of my economic status. Discrimination, loneliness, sadness, and fear led me to a substance use disorder, but today I'm sober and have been working in the field of recovery.

It wasn't an easy ride. On March 20, 1997, I was desperate to die rather than continue living my life as an addict with no place to live or food to eat. I began praying to God, although I had never believed before in my life. That same day, I went to treatment and have been in recovery ever since.

Since I began my recovery, I enrolled in college and obtained an associate's degree in psychology, a bachelor's degree in applied psychology, and a double master's in clinical and counseling psychology. I started running, first around 200 meters, and have now run 10 full marathons and more than 20 half-marathons.

I own three homes, and I plan to start a recovery home. I also wrote and developed a treatment program, "We Can Recover," for a treatment facility. As part of **Recovery Month**, I was honored to be selected as the 2010 Recovery Project Delegate for the State of Kansas. None of this would have been possible, if it wasn't for the first step I made towards recovery.

“ None of this would have been possible, if it wasn't for the first step I made towards recovery. ”



ROB JASPERSON

CERTIFIED ADDICTIONS COUNSELOR
ROSEBURG, OR

Recovery has created a different world for me these past 23 years. I entered a residential program in 1987 at age 40, after my second marriage began to fail and I realized that alcohol had been my best friend for 27 years. We have no way of knowing the damaging effects of our addiction on our families and friends until we change. Addiction causes one to look inward, not out toward others.

That has changed now. In my first year of sobriety, I worked with recovering adolescents. After a 30-year career with the U.S. Postal Service, I returned to college, graduated, and have been a certified addictions counselor for the last five years. I help my clients set the best example they can for their families. We need their love and trust.

I have a happy marriage of 32 years with my wife and enjoy close relationships with my son, daughter, and two grandchildren. I spend my free time playing active sports like road-biking and kayaking, and doing creative arts. I have volunteered for many organizations. I am on the local American Cancer Society's Relay for Life team and am on the volunteer committee with Umpqua Partners Ramble for Recovery. I also enjoy helping local Cub Scouts earn badges.

My greatest and most humbling contribution was to anonymously donate a kidney in 2005. I was also chosen in 2010 to be A&E's Oregon Delegate for Faces and Voices of Recovery in celebration of **Recovery Month**. Recovery is a second chance at life and has shown me that there are no limitations to giving to our community and leading the best life we possibly can.



BROOKE BECKHAM

SOUTH DAKOTA DEPARTMENT OF SOCIAL SERVICES
SIOUX FALLS, SD

Through my experience in recovery, I have emerged as a person who is loved, proud, and grateful to have walked down that path, even if it wasn't easy.

My drinking started when I was 13, and I experienced many consequences from my use of alcohol and drugs. By the time I turned 27, I had been in juvenile placement centers and had a wealth of legal troubles. But today, hope and faith fill my life where despair and disbelief once resided.

My moment of clarity came when I thought about my beautiful little girl. I could continue on a destructive path, losing everything that was important to me, including my life, or I could accept the fact that I needed help. At that point, I became willing to take responsibility for my recovery, my life, and my daughter.

I stopped just attempting to be sober and started to learn how to live in recovery. The result has been a wonderful, beautiful, and powerful journey.

Being clean and sober allows me to share the message of recovery and how it enables you to take an amazing journey to the center of yourself. I want to help people find their whole being, all while healing part of myself with every story I hear from others. I have rebuilt relationships, gone back to school, and am currently pursuing my Ph.D. and working as a mental health therapist in a maximum-security prison. I am now living a life I never dreamed of before recovery.



CINDY CHRISTY

ADDICTION TECHNOLOGY TRANSFER CENTER
PRAIRIE VILLAGE, KS

I haven't had a drink or used a drug in over 6 years, and I'm alive today and in long-term recovery because of government-funded treatment programs that help people just like me. However, it wasn't long ago that I was sick, unemployed, and uninsured. Ready to change, I took the first step to recovery by making a difficult phone call, ending up in a nonmedical detox program for people who cannot afford care. After detox, I was guided into a 90-day treatment facility and, although it took multiple attempts to maintain my recovery, those initial periods of treatment were crucial. While those months of care cost the state money, I believe that I have been able to repay that debt over and over.

Today I'm employed, I'm medically insured, I pay taxes, and I volunteer. I also own a registered automobile with auto insurance, have a valid driver's license, and am able to give back to my community. Last September, I was involved in planning Kansas City's first Recovery Month event, The Mike Johnson Memorial Walk for Recovery. White House Office of National Drug Control Policy Director, Gil Kerlikowske attended the event, and more than 600 participants came out to help raise awareness that addiction is treatable and recovery is possible.

It's not an exaggeration to say that I know hundreds of people exactly like me in recovery who are well-respected and able to live, work, learn, and participate fully in their communities. I cherish my relationship with my family and community of friends, something I would have missed out on had it not been for the help I received.

LYNN TYNAN

**PAST DIRECTOR
WE CARE FOUNDATION WOMEN'S RECOVERY CENTER
LAS VEGAS, NV**

As a result of a drug treatment program, I began my recovery on April 4, 1990. On that day, I realized a higher power might have a better plan for me if I was willing to surrender long enough.

But recovery was the last thing on my mind in the late 1970s and 1980s as I was running the streets of Harlem. Then, I thought that alcohol and drugs were just an aspect of partying. My frame of mind led me to multiple visits to jail, three broken marriages, abandonment of my three children, and the loss of countless jobs. Not much of a party. I didn't know what my future looked like, but I knew for sure what the past looked like, and I didn't like it.

I sought out 12-step meetings, obtained a sponsor, and worked the program. I returned to school and achieved a bachelor's degree and a master's in social work. Today, I have become a credentialed alcohol and substance abuse counselor and licensed master of social work.

“ My relationships are true and trusting. My wonderful son and I have a beautiful friendship. He is a survivor and a terrific man. When my grandchildren wrap their arms around me and say “I love you, Nanny,” I melt. I could have missed all this. One day at a time, I thank God and my 12-step program for my life. ”

Lynn Tynan



ANDREW ALLEN

**COMMUNITY RELATIONS
PRINCIPAL FINANCIAL GROUP**
AMES, IA

Born on 7/7/77, I grew up thinking I'd be lucky. It wasn't until I got sober that I realized just how lucky I am.

I excelled in sports and academics when I was young, but my childhood wasn't easy. I had several run-ins with the law, and by my freshman year of high school, I was failing classes, misdiagnosed as a sociopath, and expelled from school. All that changed once I received treatment at Youth & Shelter Services (YSS) in Ames, IA. There I awoke to a new life.

For the first time, I surrendered. My life changed as I thrived on the concept of giving back. YSS put me on its board and empowered me to become successful.

I got involved in a 12-step recovery. I became a mentor to youth. I finished high school and college, took a Fortune 250 corporate job, and found myself leading my company's United Way campaign. I spoke publicly for the first time in a professional setting about my journey. That year, my company won the Spirit of America Award from the United Way of America.

Inspired to do more, I took a role in community relations managing charitable giving; was appointed to the Federal Advisory Committee on Juvenile Justice; helped create ReggiesSleepout.org, which raises \$165K+ annually for youth homelessness awareness; was inducted into the Iowa Volunteer Hall of Fame; and was named the inaugural Young Professional of the Year by *Juice Magazine*.

Today, recovery is the center of my life, making me the best husband, father, son, employee, and community member I can be.



PATRICE POOLER

**EXECUTIVE DIRECTOR
MID-OHIO VALLEY FELLOWSHIP HOME
PARKERSBURG, WV**

I have been clean and sober since March 27, 1995.

I was in college studying to be a counselor when I took a class on substance use and saw myself within the pages of the textbook and at the mandatory 12-step recovery meetings. I was shocked to discover I was dependent on alcohol and drugs.

Growing up in an alcoholic family, I had learned at a young age the family rules of “don’t talk, don’t trust, and don’t feel.” I had my first drink at age 14. At 16, I was forced to put a child up for adoption—the hardest thing I have ever done. It took a lot of alcohol and drugs to numb the emotional pain. I spent 21 years trying to be happy in the form of substance use, and always wanted more.

Fortunately, after 10 years of recovery, I had the chance to be reunited with my son when he was 28 years old. I have a relationship with him today. He has had a good life with parents who gave him the life I could not.

I know today that happiness is an inside job. Thanks to recovery, I have gained the courage to heal and to learn that healing comes from feeling. The very thing I had avoided was exactly what I needed to cope with life, one day at a time, without the use alcohol or drugs.

“ Thanks to recovery, I have gained the courage to heal and to learn that healing comes from feeling. ”

ANNA SAPPAH

**EXECUTIVE DIRECTOR
ALASKA ADDICTION PROFESSIONALS ASSOCIATION
ANCHORAGE, AK**

I am a person in long-term recovery from dependence to heroin. Treatment helped me learn how to deal with my feelings and emotions, and to live life without the use of drugs.

I've learned that substance use and other problems may have run in my family for generations, but this doesn't have to define my life. I didn't always know that; my drug use began at age 12, and by the time I was 13, I was using alcohol and other drugs daily. Now I have a much different story to share.

In 1995, I was given the opportunity to participate in outpatient treatment, where I was able to identify the issues that I had been self-medicating for most of my life. Through treatment and ongoing 12-step participation, I have been able to heal broken relationships. I have been happily married for nearly 13 years, and have regained custody and raised both of my children. I am blessed to participate in the lives of my children and grandchildren.

Because of treatment, I have gone from being a seasonal construction worker who depended on welfare and unemployment checks to being an executive director for a local nonprofit. I have earned a college degree in human services and nonprofit management and am currently in graduate school working on a degree in counseling psychology.

“ Treatment helped me learn how to deal with my feelings and emotions, and to live life without the use of drugs. I've learned that substance use and other problems may have run in my family for generations, but this doesn't have to define my life. ”



LORIE HAMMERSTROM

SMART RECOVERY
BOSTON, MA

Recovery has enabled me to change my life for the better, and living has truly become much more manageable and enjoyable than it used to be.

Back in my mid-30s, I began to struggle with stress, particularly balancing a career and family. I sought relief and was prescribed antidepressants, but as I attempted to escape the feelings of stress in my life, I began drinking a bit. As time went by, “a bit” turned into more frequent drinking, and soon I found myself drinking every night, unable to stop. I told my doctor that I was drinking and I didn’t feel well, but he just continued increasing and changing my anti-depressant medications. I began to feel anxious, and it all just seemed to get worse!

I looked further for help with my drinking and found SMART Recovery® 6 years ago. There I learned how to deal with life’s upsets in rational and helpful ways, without alcohol. I had turned to alcohol as a short-term quick fix to escape my upsets and frustrations, but in the long term it made things far worse. The tools I learned in treatment provided me ways to cope with challenges, be sober, and live life and take pleasure in it.

I’m no longer overwhelmed as I was for so long. Challenging situations still arise, but I see that life isn’t so much about what happens to me, but about how I choose to think about it. That makes all the difference—in my present life and in the choices I make for my future.

“ Recovery has enabled me to change my life for the better.. ”



PAM SCOTT

DIRECTOR
THE HEALING PLACE
LOUISVILLE, KY

I came to recovery a very broken woman: homeless and hopeless. I had squandered everything and hurt everyone who mattered to me, and my health was poor. I finally found a long-term program that met my needs and had an emphasis on giving back.

Today, I am the director of that program. My life has been restored and helping others in recovery is my purpose in life. I have my sons and four wonderful grandchildren. I own a home, and I have more work helping others than I can possibly imagine. This year, my youngest son is celebrating his second year of sobriety, and I am celebrating my 15th.

My motto has become “Trust God, Clean House, and Help Others.” If you do those simple things and never stop working on yourself, life holds great promise. I never want to forget where I came from, as I do not want to return to that misery. Addiction is a disease that ravages entire families, and I must never forget that. Staying clean and sober is simple, but not easy.

“ I never want to forget where I came from, as I do not want to return to that misery. Addiction is a disease that ravages entire families, and I must never forget that. Staying clean and sober is simple, but not easy. ”



THOMAS MCKNIGHT

PUBLIC SPEAKER
CENTREVILLE, MD

Being in recovery means the world to me and my two daughters. I carry my 20-year medallion every day and am very proud to show it off. I have gained respect in my hometown and the surrounding communities due to the pure fact that I'm not ashamed to admit that I am in recovery.

I started drinking at 12 and became dependent by 16. Alcohol was my only drug of choice because it was easy to get. Before my 21st birthday, I had four DUIs. Shortly thereafter my wife began to realize I had a severe drinking problem. When she had had enough, she threw her ring at me and said, "I will not be married to a drunk." I have not had a drink since.

Now I work closely with the local sheriff's department and teach driver's education courses. My daughters are very proud of me and enjoy when other students come up to them after hearing my driving presentation. My dream is to present my experiences to every high school in the State, as well as the country. I know I can't save them all, but if I can reach just one, then I have done what I set out to do.

Recovery is possible; it can be done. It is one day at a time. Think of staying sober today; don't worry about next week, or even tomorrow. Today is now and tomorrow is promised to no one.

WALTER GINTER

**DIRECTOR OF RECOVERY SUPPORT
NATIONAL ALLIANCE FOR MEDICATION ASSISTED RECOVERY
NEW YORK, NY**

Working in New York City in 2003, I probably seemed completely indistinguishable from the average Westport commuter. I was 54 years old and married, owned a small search firm with my wife, participated in civic activities, and was a registered voter. But each day I took a medication for a chronic medical condition.

Taking a maintenance medication is hardly atypical; people take maintenance medications for blood pressure, diabetes, anxiety, and countless other medical conditions—but the difference is that I took a medication to treat my opiate dependence. I had spent the past 20 years trying unsuccessfully to taper my addiction to heroin. At the time I did not understand that my opiate use had caused changes in my brain.

Eventually, I learned that taking medication to restore normal brain function is no different than taking prescribed medication for any other chronic medical condition, such as insulin for diabetics. Very few individuals who use medication-assisted treatments consider themselves in recovery because they have the misconception that recovery only occurs after you leave treatment—but that's not true. I realized that I was not alone, and that thousands of people have achieved abstinence and sobriety with medication-assisted treatments.

I am now 61 years old and still ride the train to New York. Only now it is to the South Bronx, where I teach methadone patients that recovery assisted by medication is just as valid as any other pathway to recovery, with the intention of preserving their health and wellness.

“ I realized that I was not alone, and that thousands of people have achieved abstinence and sobriety with medication-assisted treatments. ”

Walter Ginter



JERRY MOE

**CHILDREN'S PROGRAM DIRECTOR
BETTY FORD CENTER
RANCHO MIRAGE, CA**

Recently, a mother brought her 9-year-old son, Phillip, to the children's program where I work. Although she had been clean and sober for 11 years, she wanted Phillip to participate in the program to help him understand their long family history with alcoholism and the recovery lifestyle she wholeheartedly embraced.

Phillip immediately took to the program. He'd tear up when others shared their pain, reach out his hand to anyone who needed it, and give astounding feedback with wisdom and conviction that reached beyond his years. At one point, the children were asked to write a story about how addiction has hurt their families. Phillip struggled, as he didn't have firsthand exposure, but I advised, "Just write about what you've learned here so far." He nodded, grinned, and started to write.

The next day, the adults gathered to hear the children's stories. Typically during this exercise, there is a full range of emotions—fear, guilt, shame, gratitude, joy, and sadness. I encouraged Phillip's hesitant mother to stay and listen to what Phillip had to say. When it was his turn, Phillip sat across from his mom in the middle of the circle and opted to talk just to her. "I've learned one important thing here. God really blessed me when he made you my mom. Thanks for being sober for my whole life. I promise I won't get mad at you anymore when you go to your meetings. Now I understand."

His mother fought her way to recovery. What a gift her son gave her that day. This small family reminded me that the gifts of recovery are bountiful in many, many ways.



JO ANNE STONE

FOUNDER
A STEPPING STONE TO SUCCESS
WINTER PARK, FL

Growing up, I had everything going for me—I was an honor student, cheerleader, athlete, and student council member. But even though my father is dependent on alcohol and I swore I wouldn't follow in his footsteps, I started using alcohol and drugs at age 13. I believed I was different and I could control it.

I thought I was controlling it until age 32, when I finally hit bottom with no job, no car, and no home. I called my sister, who was already in recovery, and with her support went to a 6-month treatment program. Since achieving recovery, I have returned to school, received my bachelor's degree, and became a certified addictions professional. I opened my own treatment center in July 2010.

Today, I define myself as a wife, daughter, grandmother, and business owner, as well as a person in recovery for 17 years. Despite the hardships I've faced, I love my life and wouldn't trade anything I have been through. My experience has made me more determined to succeed and a better counselor to my clients, whose experiences I can understand firsthand.

In my professional life, I have conducted research on how to best treat criminal offenders with substance use disorders and how to avoid re-offenses. I have shared my story with Congress to promote the effectiveness of treatment, the possibility of recovery, and the need for adequate funding of services. I work daily to help others get better and live honest, productive lives. Last year, as part of **Recovery Month**, I was honored to be chosen as the Florida A&E Recovery Delegate and participated in a walk in Philadelphia and spoke at my hometown walk in Orlando.

WHITNEY O'NEILL

OUTREACH AND PROGRAM COORDINATOR FACES & VOICES OF RECOVERY WASHINGTON, DC

My life truly began in June 2005, when I finally broke through to the side of recovery. I had no idea recovery would give me the life that I couldn't even conceive for myself. In recovery, I gained back my physical strength, mental capacity, and spiritual well-being.

I badly needed this, because my addiction had hit me hard and fast. I went from being an excelling student and athlete from a good family to being broken, homeless, starving, and suffering from a potentially fatal liver disease. When I entered a treatment center at age 25, I didn't know what year it was or how old I was. My family had suffered greatly from the sidelines with no tools to help me.

The help I so badly needed arrived when I was arrested for being under the influence. In California, a program called Proposition 36 instituted treatment instead of jail time. Rather than serving 90 days in jail, I was offered residential treatment. Since that day, I have lived alcohol and drug free.

I was introduced to the 12-step program, which taught me how to embrace life in a way that I had never been able to before. I became active in politics and my community. I even landed a job with a top firm in Los Angeles. I now work in Washington, DC, in recovery advocacy. The biggest gift of all has been motherhood. My newborn son is nothing short of a miracle, and his father and I have built a true family. My recovery has taught me that no life is disposable and everyone deserves the hope of recovery.

“ I had no idea recovery would give me the life that I couldn't even conceive for myself. In recovery, I gained back my physical strength, mental capacity, and spiritual well-being. ”



STEPHEN DICKERSON

**PROGRAM MANAGER
HUMAN RESOURCES DEVELOPMENT
FOUNDATION INC.
PRINCETON, WV**

With nearly 11 years of continuous recovery, I am proof that recovery is possible. Today, I enjoy a life filled with manifold blessings and comforts, but I didn't always.

It didn't take me long to completely bottom out from the time I first took marijuana at 14 to being in my fourth treatment center at age 20, as an IV drug user with a total of 16 cents, 2 pairs of pants, and 3 shirts. I was sick, and my substance use disorder had led me to do things I swore I never would. It caused me to make decisions that hurt everyone who had the misfortune of caring about me.

That was then, but recovery has given me a life. It has changed me from a sick man without anything to a man who has everything I could have ever imagined existed. I went back to school three times to earn a G.E.D., bachelor's, and master's in vocational rehabilitation counseling.

I have a wonderful wife, two terrific kids, a sense of direction, and a positive attitude that I might have taken for granted otherwise. I work daily to bring hopes and dreams to at-risk youth. Through my experience, I can offer hope to otherwise hopeless situations.

“ With nearly 11 years of continuous recovery, I am proof that recovery is possible. ”



TRACEY W. LEE

**UNITY HALL/SOLANO COUNTY HEALTH
AND SOCIAL SERVICES**
FAIRFIELD, CA

I was once a straight-A student with a bright future, but substance use replaced my dreams with nightmares. I remember these years vividly and willingly tell my story in hopes that my pain and triumph will help others in need to find recovery and reclaim their lives.

What started out as recreational drug use in college turned into full-blown addiction by the time I reached 30. Domestic violence, depression, homelessness, bankruptcy, and suicide attempts became my life. My son's world became as unpredictable as I was, but somehow I didn't relate our chaos to my drug use.

Fortunately, my depression led me to the hospital, and instead of just giving me medicine, an astute nurse recognized my problem and sent me straight to a 14-day treatment program. That was 14 years ago. I cannot begin to express my joy at the changes in my life.

My son is now 21 and will soon graduate from Stanford University. He has flourished in my recovery, and I have been there for him in every way. I have renewed my relationships with my parents and siblings. For years, I helped "Put a Face on Recovery" and spoke at churches, high schools, city and county councils, and the State Capitol about the importance of treatment and recovery.

Today, I have my master's in public administration and I serve on the board of a recovery community support organization. I am currently a supervisor working in social services and just purchased my first home. Embracing all of my activities, work, and play is a profound sense of spirit and unwavering faith.



DON ROTHSCHILD

PEAK PATHS DENVER, CO

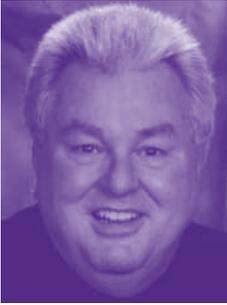
It all started in 1977 when my boss sent me to treatment for my drinking problem. I was a corporate executive with a wonderful wife, two kids, a home, two cars, and a dog. I believed that my life was fantastic.

I went to treatment, but unfortunately didn't stick with the recovery program. I continued down a path of destruction for another decade, in and out of treatment. Finally, while in treatment in 1986 and planning my next drink, I got it!

At age 56, I finished treatment and went to a halfway house in a city where I'd never been in my life. I ate, slept, lived, and breathed a recovery program, and learned that there is no problem in the world so great that a drink wouldn't make it worse.

I started a new life at an age when most retire. It was a struggle because of my age and lack of experience outside my previous industry. But I didn't drink, even when I was laid off from several jobs. I had a strong recovery program, and things that had previously slipped away were restored. I received support from my ex-wife, who always had faith in me. I returned to college at age 59 and found work as an addiction counselor. My driving privileges were returned and through bankruptcy my debt was forgiven.

Today, my wife and I are happily remarried. After starting my own business as a recovery consultant, I've found my niche. Life is better today because I can help people sustain recovery, thus giving me strength to continue on my own journey.



FARRIS ROBERTSON

DIRECTOR
RECOVERY CHAPEL
SPRINGFIELD, MO

I finally found long-term recovery at age 31. That was after having lived in a ghetto, jails, and mental wards, and having participated in various recovery programs. My battle to recover is nothing unique, but my dedication to long-term sobriety shines as an example for the 400 people I impact each week.

As founder of Recovery Chapel in Springfield, MO, I'm fortunate to be celebrating 25 years in recovery. This gives me the heart and clarity to lead an organization that is growing by leaps and bounds, with 10 recovery houses, a rehabilitation facility, a worship center, a 12-step and Christian-friendly environment, and 4 business enterprises that offer training and sustenance. I am simply grateful for the opportunity to serve a world in desperate need of sanity and sobriety.

“ I am simply grateful for the opportunity to serve a world in desperate need of sanity and sobriety. ”

JOIN THE VOICES FOR RECOVERY

TO SHARE YOUR STORY, VISIT

<http://recoverymonth.gov/Voices-for-Recovery/Share-Your-Story.aspx>.

National
Recovery Month

Prevention Works • Treatment is Effective • People Recover

SEPTEMBER 2011



1-800-662-HELP (4357)
1-800-487-4889 (TDD)

WWW.RECOVERYMONTH.GOV

National
Recovery Month

Prevention Works • Treatment is Effective • People Recover

SEPTEMBER 2011

JOIN THE VOICES FOR RECOVERY

RECOVERY BENEFITS
EVERYONE

PREVENTION, TREATMENT,
& RECOVERY RESOURCES



PREVENTION, TREATMENT, AND RECOVERY RESOURCES

The following is a list of substance use and mental health resources that can help you during **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)** and throughout the year. The organizations are listed by category to help you quickly identify the resource(s) most closely aligned with your needs. Resources cover a variety of subject areas, including culture, policy, education, recovery, mental health, mutual support groups, prevention, and more. The referenced organizations represent a broad sampling of what is available nationwide. Organizations in **aqua** are **Recovery Month** Planning Partners and are heavily involved in the planning activities.

Please note: This list is not exhaustive of all available resources. Inclusion does not constitute endorsement by the U.S. Department of Health and Human Services (HHS), the Substance Abuse and Mental Health Services Administration (SAMHSA) or its Center for Mental Health Services (CMHS), Center for Substance Abuse Prevention (CSAP), and Center for Substance Abuse Treatment (CSAT).

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FEDERAL AGENCIES

General Information About Mental Health and Substance Use

EXECUTIVE OFFICE OF THE PRESIDENT (EOP)

White House Office of Faith-Based and Neighborhood Partnerships

Located in seven Federal agencies, this group's goal is to make sure that grassroots leaders can compete on an equal footing for Federal dollars, receive greater private support, and face fewer bureaucratic barriers.

708 Jackson Place
Washington, DC 20502
202-456-1414

<http://www.whitehouse.gov/administration/eop/ofbnp>

EOP, White House Office of National Drug Control Policy (ONDCP)

This component of the Executive Office of the President establishes policies, priorities, and objectives for the Nation's drug control program, which includes prevention, treatment, and recovery.

P.O. Box 6000
Rockville, MD 20849-6000
800-666-3332

<http://www.whitehousedrugpolicy.gov>

EOP, ONDCP Information Clearinghouse

This Federal office serves as a resource for statistics, research data, and referrals useful for developing and implementing drug policy.

P.O. Box 6000
Rockville, MD 20849-6000
800-666-3332

<http://www.whitehousedrugpolicy.gov/about/clearingh.html>

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS)

This Federal Government agency protects the health of all Americans and provides essential human services, especially for those who are least able to help themselves.

200 Independence Avenue SW
Washington, DC 20201
877-696-6775

<http://www.hhs.gov>

HHS, Administration on Aging (AoA)

The mission of this organization is to develop a comprehensive, coordinated and cost-effective system of home and community-based services that helps elderly individuals maintain their health and independence in their homes and communities.

1 Massachusetts Avenue NW
Washington, DC 20201

<http://www.aoa.gov>

HHS, Agency for Healthcare Research and Quality (AHRQ)

This organization within the HHS, supports research that helps people make more informed decisions and improves the quality of health care services. AHRQ, formerly known as the Agency for Health Care Policy and Research, is committed to improving care safety and quality by developing successful partnerships and generating the knowledge and tools required for long-term improvement. The goal of AHRQ's research is to provide measurable improvements in health care in America, gauged in terms of improved quality of life and patient outcomes, lives saved, and value gained for what we spend.

540 Gaither Road
Rockville, MD 20850

<http://www.ahrq.gov>

HHS, Centers for Disease Control and Prevention (CDC)

For more than 60 years, this organization has been dedicated to protecting health and promoting quality of life through the prevention and control of disease, injury, and disability. The CDC is committed to programs that reduce the health and economic consequences of the leading causes of death and disability, thereby ensuring a long, productive, healthy life for all people.

1600 Clifton Road
Atlanta, GA 30333
800-CDC-INFO (232-4636)
888-232-6348 (TTY)
800-QUIT-NOW (784-8669)
800-332-8615 (TYY)

<http://www.cdc.gov>

CDC, National Center for Health Marketing (NCHM)

This center helps define the future of health marketing within the CDC, the Federal sector, and beyond.

1600 Clifton Road
Atlanta, GA 30333

<http://www.cdc.gov/healthmarketing>

CDC, National Center for HIV, STD, and TB Prevention, Divisions of HIV/AIDS Prevention (NCHSTP)

As the Federal Government's lead agency in combating HIV/AIDS, the CDC is a source of extensive data, public education materials, and prevention information accessible through numerous links on its website. Statistics and prevention measures relating to HIV/AIDS risks and prevalence among drug users are included.

1600 Clifton Road
Atlanta, GA 30333

<http://www.cdc.gov/nchstp/od/nchstp.html>

CDC, Office on Smoking and Health (OSH)

This office is a division within the National Center for Chronic Disease Prevention and Health Promotion, one of the CDC centers. The CDC OSH website, <http://www.cdc.gov/tobacco>, contains numerous resources such as Taking Action Against Secondhand Smoke—An Online Toolkit, CAPS—Community Actions and Practices, and National Tobacco Control Program State Exchange.

1600 Clifton Road
Atlanta, GA 30333

<http://www.cdc.gov/nccdphp>

HHS, Center for Medicare and Medicaid Services (CMS)

This Federal agency provides health insurance for more than 74 million Americans through Medicare and Medicaid. It also enforces the Health Insurance Portability and Accountability Act (HIPAA) and several other health-related programs.

7500 Security Boulevard
Baltimore, MD 21244

877-267-2323
410-786-3000

<http://www.cms.hhs.gov>

HHS, Food and Drug Administration (FDA)

This Government agency is responsible for protecting the public health by assuring the safety, effectiveness, and security of human and veterinary drugs, vaccines, and other biological products, medical devices, our Nation's food supply, cosmetics, dietary supplements, and products that give off radiation.

800-216-7331
301-575-0156

<http://www.fda.gov>

**HHS, FDA
MedWatch**

This website is the FDA gateway for finding clinically important safety information and reporting serious problems with human medical products.

<http://www.fda.gov/safety/medwatch/default.htm>

HHS, Health Resources and Services Administration (HRSA)

This Federal agency's mission is to improve and expand access to quality health care for all.

Parklawn Building
5600 Fishers Lane
Rockville, MD 20857

301-443-3376

<http://www.hrsa.gov>

HHS, HRSA**Poison Control Program**

This program oversees the national toll-free Poison Help Line, 1-800-222-1222, which connects callers to their nearest poison center, 24 hours a day, 7 days a week for help in a poisoning emergency. Calls are free and confidential and can be translated into 161 languages.

Parklawn Building
5600 Fishers Lane, Room 100-06
Rockville, MD 20857

800-222-1222

<http://www.poisonhelp.hrsa.gov>

HHS, National Institutes of Health (NIH)

This Federal institute, under the HHS is the steward of medical and behavioral research for the Nation.

9000 Rockville Pike
Bethesda, MD 20892

301-496-4000

<http://www.nih.gov>

HHS, NIH**National Institute on Alcohol Abuse and Alcoholism (NIAAA)**

This Federal institute provides leadership in the national effort to reduce alcohol-related problems by conducting and supporting research in a wide range of scientific areas.

5635 Fishers Lane, MSC 9304
Bethesda, MD 20892-9304

301-443-3860

<http://www.niaaa.nih.gov>

HHS, NIH**National Institute on Drug Abuse (NIDA)**

This Federal institute supports most of the world's research on the health aspects of drug abuse and addiction. It carries out a large variety of programs to ensure the rapid dissemination of research information and its implementation in policy and practice.

6001 Executive Boulevard
Room 5213, MSC 9561

Bethesda, MD 20892-9561

301-443-1124

<http://www.drugabuse.gov>

HHS, NIH**National Institute of Mental Health (NIMH)**

The mission of NIMH is to transform the understanding and treatment of mental health problems through basic and clinical research, paving the way for prevention and recovery. For the institute to continue fulfilling this vital public health mission, it must foster innovative thinking and ensure that a full array of novel scientific perspectives are used to further discovery in the evolving science of brain, behavior, and experience.

6001 Executive Boulevard

Bethesda, MD 20892

<http://www.nimh.nih.gov>

NIH, National Center for Complementary and Alternative Medicine (NCCAM)

This is the Federal Government's lead agency for scientific research on complementary and alternative medicine (CAM). It is 1 of the 27 institutes and centers that make up the National Institutes of Health (NIH) within the HHS. NCCAM sponsors and conducts research using scientific methods and advanced technologies to study CAM. CAM is a group of diverse medical and health care systems, practices, and products that are not presently considered to be part of conventional medicine.

9000 Rockville Pike

Bethesda, MD 20892

<http://nccam.nih.gov>

HHS, Office of the Assistant Secretary for Health (ASH)

This group of the Assistant Secretary of Health is comprised of 12 core public health offices and the Commissioned Corps, a uniformed service of more than 6,500 health professionals who serve at HHS and other Federal agencies. Formerly known as the Office of Public Health and Science (OPHS).

200 Independence Avenue SW, Room 716G

Washington, DC 20201

202-401-7425

<http://www.hhs.gov/ash>

HHS, Office on Disability (OD)

This organization's mission is to oversee the implementation and coordination of programs and policies that enhance the health and well-being of people with disabilities. OD works directly with the agencies of the Department to facilitate policy development and to advance disability issues across agency and Departmental lines. OD identifies opportunities to maximize and streamline processes that result in the elimination of inefficient or redundant efforts to serve Americans with disabilities.

200 Independence Avenue, SW

Washington, DC 20201

<http://www.hhs.gov/od>

HHS, Substance Abuse and Mental Health Services Administration (SAMHSA)

This Federal agency improves the quality and availability of prevention, treatment, and rehabilitative services to reduce illness, death, disability, and cost to society resulting from substance use disorders and mental health problems. It lists a range of resources on its "Find Substance Abuse and Mental Health Treatment" website, <http://www.samhsa.gov/treatment>.

1 Choke Cherry Road, Eighth Floor

Rockville, MD 20857

240-276-2130

<http://www.samhsa.gov>

HHS, SAMHSA Health Information Network

This clearinghouse provides comprehensive resources for alcohol, drug, and mental health information.

P.O. Box 2345

Rockville, MD 20847-2345

877-SAMHSA-7 (877-726-4727)

800-487-4889 (TTY)

<http://www.samhsa.gov/SHIN>

HHS, SAMHSA National Clearinghouse for Alcohol and Drug Information (NCADI)

A component of SAMHSA's Health Information Network (SHIN), this group provides the Nation with a one-stop resource for substance abuse prevention and treatment information.

The NCADI information services department responds to substance abuse information requests via telephone, email, postal mail, TDD, and fax.

877-SAMHSA-7 (877-726-4727)

800-487-4889 (TDD)

877-767-8432 (Español)

<http://www.ncadi.samhsa.gov>

HHS, U.S. Department of Agriculture (USDA) Dietary Guidelines for Americans

This Federal agency is responsible for developing and executing U.S. policy on farming, agriculture, and food. Dietary Guidelines for Americans has been published jointly by HHS and USDA every five years since 1980. Of interest to those engaged in efforts to prevent alcohol abuse and alcohol-related problems are the Chapter 9 guidelines for alcohol consumption, which constitute a de facto "official" definition of moderate or responsible alcohol use.

U.S. Department of Agriculture

1400 Independence Avenue SW

Washington, DC 20250

202-720-2791

<http://www.healthierus.gov/dietaryguidelines>

UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT (USAID)

This independent Federal Government Agency receives overall foreign policy guidance from the Secretary of State. The agency supports long-term and equitable economic growth and advances U.S. foreign policy objectives by supporting economic growth, agriculture and trade; global health; and democracy, conflict prevention, and humanitarian assistance.

Information Center
U.S. Agency for International Development
Ronald Reagan Building
Washington, DC 20523-1000
202-712-4810
<http://www.usaid.gov>

Culture-Specific

HHS, Indian Health Service

This agency offers health services for Alaska Natives and American Indians.

The Reyes Building
801 Thompson Avenue, Suite 400
Rockville, MD 20852-1627
301-443-2038
<http://www.ihs.gov>

HHS, Office of Minority Health Resource Center

This national center develops health policies and programs to eliminate health disparities in racial and ethnic minority populations.

P.O. Box 37337
Washington, DC 20013-7337
800-444-6472
<http://www.omhrc.gov>

U.S. DEPARTMENT OF INTERIOR (DOI)

This Government agency offers resources on the prevention of substance use disorders for American Indians, Alaska Natives, and Island communities.

1849 C Street NW
Washington, DC 20240
202-208-3100
<http://www.doi.gov>

DOI, Office of Alcohol and Substance Abuse Prevention Bureau of Indian Affairs

This office in the DOI provides reservation-based substance use disorder prevention programs for American Indians.

1849 C Street NW
Washington, DC 20240
202-208-3710
<http://www.bia.gov>

SAMHSA, Native American Center for Excellence (NACE)

This SAMHSA initiative provides up-to-date information on American Indian and Alaska Native (AI/AN) substance use disorder prevention programs, practices, and policies. NACE also provides training and technical assistance support for urban and rural prevention programs serving AI/AN populations.

SAMHSA Native American Center for Excellence
1395 Piccard Drive, Suite 100
Rockville, MD 20850
301-977-6553
<http://nace.samhsa.gov>

Justice System

U.S. DEPARTMENT OF JUSTICE (DOJ)

This Federal Government agency enforces the law and defends the interests of the United States according to the law, including drug enforcement.

950 Pennsylvania Avenue NW
Washington, DC 20530-0001
202-514-2000
<http://www.usdoj.gov>

DOJ, Americans with Disabilities Act (ADA) Information and Technical Assistance Home Page

This Federal department provides information about the Americans with Disabilities Act (ADA) through a toll-free ADA Information Line and a website. It permits businesses, State, local governments, and others to call and ask questions about general or specific ADA issues.

U.S. Department of Justice, Civil Rights Division
Disability Rights Section – NYA
950 Pennsylvania Avenue NW
Washington, DC 20530
800-514-0301
800-514-0383 (TTY)
<http://www.ada.gov>

DOJ, Office of Justice Programs (OJP)

The substance abuse and crime section of this organization's website contains many resources, including training and technical assistance opportunities.

Office of Justice Programs
U.S. Department of Justice
810 Seventh Street NW
Washington, DC 20531
202-307-0703
<http://www.ojp.usdoj.gov/programs/substance.htm>

DOJ, OJP**Bureau of Justice Assistance (BJA)**

BJA supports law enforcement, courts, corrections, treatment, victim services, technology, and prevention initiatives that strengthen the nation's criminal justice system. It provides leadership, services, and funding to America's communities.

810 Seventh Street NW, Fourth Floor

Washington, DC 20531

202-616-6500

866-859-2687 (Toll-free)

<http://www.ojp.gov/BJA>

DOJ, Bureau of Justice Assistance Clearinghouse

This Federal bureau offers community training and technical assistance to prevent crime, substance use disorders, and violence (reference and referral services for criminal justice professionals).

Bureau of Justice Assistance

Office of Justice Programs

810 Seventh Street NW, Fourth Floor

Washington, DC 20531

800-851-3420

<http://www.ojp.usdoj.gov/BJA>

DOJ, OJP**Bureau of Justice Statistics (BJS)**

This organization was first established on December 27, 1979 under the Justice Systems Improvement Act of 1979, Public Law 96-157 (the 1979 Amendment to the Omnibus Crime Control and Safe Streets Act of 1968, Public Law 90-351). The BJS works to collect, analyze, publish, and disseminate information on crime, criminal offenders, victims of crime, and the operation of justice systems at all levels of government. These data are critical to Federal, State, and local policymakers in combating crime and ensuring that justice is both efficient and evenhanded.

810 Seventh Street NW

Washington, DC 20531

202-307-0765

<http://bjs.ojp.usdoj.gov>

DOJ, Community Capacity Development Office

This multi-agency's strategy is to "weed out" violent crime, gang activity, and drug trafficking, and "seed" human services to the areas where these activities occur, encompassing prevention, intervention, treatment, and neighborhood revitalization.

810 Seventh Street NW

Washington, DC 20531

202-616-1152

<http://www.ojp.usdoj.gov/ccdo>

DOJ, Drug Court Planning Initiative

This initiative provides research, scholarship, and information for drug courts and other court-based intervention programs.

DOJ Bureau of Justice Assistance

810 Seventh Street NW, Fourth Floor

Washington, DC 20531

202-616-6500

<http://dcpi.ncjrs.gov/dcpi/dcpi.html>

DOJ, Drug Enforcement Administration (DEA)

This Federal Government agency enforces the Nation's controlled substances laws and regulations, works to reduce the availability of illegal drugs, and has a prevention arm devoted to reducing the demand for these drugs. The DEA contributes its "street-smart" perspective and skills to the field and helps to link law enforcement with other providers.

Office of Demand Reduction

2401 Jefferson Davis Highway

Alexandria, VA 22301

888-327-4236

<http://www.dea.gov>

DOJ, National Criminal Justice Reference Service

To support research, policy, and program development worldwide, this Federal organization provides criminal justice and substance use disorder information.

P.O. Box 6000

Rockville, MD 20849-6000

800-851-3420

301-519-5500

<http://www.ncjrs.gov>

DOJ, OJP**National Institute of Corrections (NIC)**

This agency within the U.S. Department of Justice, Federal Bureau of Prisons. The Institute is headed by a Director appointed by the U.S. Attorney General. A 16-member Advisory Board, also appointed by the Attorney General, was established by the enabling legislation (Public Law 93-415) to provide policy direction to the Institute. The NIC provides training, technical assistance, information services, and policy/program development assistance to Federal, State, and local corrections agencies.

320 First Street NW

Washington, DC 20534

800-995-6423

202-307-3106

<http://nicic.gov>

DOJ, OJP**National Institute of Justice (NIJ)**

This organization is the research, development and evaluation agency of the U.S. Department of Justice. It provides objective, independent, evidence-based knowledge and tools to meet the challenges of crime and justice, particularly at the state and local levels.

810 Seventh Street NW
Washington, DC 20531
202-307-2942

<http://www.ojp.usdoj.gov/nij/about/welcome.htm>

DOJ, OJP**Office of the Assistant Attorney General (OAAG)**

The group is responsible for the overall management and oversight of OJP. This includes setting policy; ensuring that OJP policies and programs reflect the priorities of the President, the Attorney General, and the Congress; and promoting coordination among the OJP offices and bureaus.

Office of Justice Programs
U.S. Department of Justice
810 Seventh Street NW
Washington, DC 20531
202-307-0703

<http://www.ojp.usdoj.gov/about/offices/oaag.htm>

DOJ, OJP**Office of Juvenile Justice and Delinquency Prevention (OJJDP)**

This organization provides national leadership, coordination, and resources to prevent and respond to juvenile delinquency and victimization. OJJDP supports states and communities in their efforts to develop and implement effective and coordinated prevention and intervention programs and to improve the juvenile justice system so that it protects public safety, holds offenders accountable, and provides treatment and rehabilitative services tailored to the needs of juveniles and their families.

810 Seventh Street NW
Washington, DC 20531
202-307-5911

<http://www.ojjdp.gov>

OJ, OJP**Office for Victims of Crime (OVC)**

Established in 1988 through an amendment to the Victims of Crime Act (VOCA) of 1984, this group is charged by Congress with administering the Crime Victims Fund (the Fund). Through OVC, the Fund supports a broad array of programs and services that focus on helping victims in the immediate aftermath of crime and continuing to support them as they rebuild their lives. Millions of dollars are invested annually in victim compensation and assistance in every U.S. State and territory, as well as for training, technical assistance, and other capacity-building programs designed to enhance service providers' ability to support victims of crime in communities across the Nation.

U.S. Department of Justice
810 Seventh Street NW, Eighth Floor
Washington, DC 20531
202-307-5983

<http://www.ojp.usdoj.gov/ovc>

DOJ, OJP**Sex Offender Sentencing, Monitoring, Apprehending, Registering, and Tracking Office**

This group was authorized by the Adam Walsh Child Protection and Safety Act of 2006 to administer the standards for the Sex Offender Registration and Notification Program. This program can administer grant programs relating to sex offender registration and notification, and cooperate with and provide technical assistance to States, the District of Columbia, principle U.S. territories, units of local government, tribal governments, and other public and private entities involved in activities related to sex offender registration or notification or to other measures for the protection of children or other members of the public from sexual abuse or exploitation.

810 Seventh Street NW
Washington, DC 20531
202-514-4689

<http://www.ojp.gov/smart>

U.S. DEPARTMENT OF TRANSPORTATION (DOT)**National Highway Traffic Safety Administration (NHTSA)**

The mission of this organization is to develop partnerships to cooperatively save lives, prevent injuries, and reduce traffic-related health care and economic costs resulting from impaired driving from using alcohol and other drugs.

NHTSA Headquarters
1200 New Jersey Avenue SE
West Building
Washington, DC 20590
888-327-4236

<http://www.nhtsa.gov>

DOT, NHTSA**Blood Alcohol Concentration, State, and Federal Law**

This law states it is illegal per se for drivers to operate motor vehicles when they have blood alcohol concentrations (BACs) at or above a specified level in the United States. The customary level in most States was .10 blood alcohol concentration (BAC) for drivers ages 21 and above until 1992, when NHTSA recommended in a report to Congress that all States lower their illegal per se level to .08 for all drivers 21 years of age and older. As of August 2005, all 50 States, the District of Columbia, and Puerto Rico have set .08 BAC as the maximum level for drivers.

NHTSA Headquarters
1200 New Jersey Avenue SE
West Building
Washington, DC 20590
888-327-4236

<http://www.nhtsa.dot.gov/nhtsa/whatis/bb/2007/pages/NHTSAPerfMeas.htm>

DOT, NHTSA**Stop Impaired Driving**

This organization partners with criminal justice and community organizations to sponsor impaired driving campaigns such as You Drink & Drive, You Lose, Friends Don't Let Friends Drive Drunk, and Zero Tolerance Means Zero Chances. The Stop Impaired Driving site includes program toolkits, success stories, and other resources.

NHTSA Headquarters
1200 New Jersey Avenue SE
West Building
Washington, DC 20590
888-327-4236

<http://www.stopimpaireddriving.org>

HHS, Office of Civil Rights (OCR)

As the Department's civil rights and health privacy rights law enforcement agency, OCR investigates complaints, enforces rights, and promulgates regulations, develops policy, and provides technical assistance and public education to ensure understanding of and compliance with non-discrimination and health information privacy laws.

200 Independence Avenue, SW
Washington, DC 20201

<http://www.hhs.gov/ocr>

Mental Health**HHS, NIH****National Institute of Mental Health (NIMH)**

This institute conducts research to reduce mental health problems and behavioral disorders in America.

6001 Executive Boulevard
Room 8184, MSC 9663
Bethesda, MD 20892-9663
866-615-NIMH (6464)
301-443-4513

<http://www.nimh.nih.gov>

HHS, SAMHSA**Center for Mental Health Services (CMHS)**

This Federal center seeks to improve the availability and accessibility of high-quality community-based services for people with or at risk for mental health problems and their families. It collects, analyzes, and disseminates national data on mental health services designed to help inform future services policy and program decision-making.

P.O. Box 2345
Rockville, MD 20847
800-789-2647
240-221-4021

<http://www.samhsa.gov/about/cmhs.aspx>

HHS, SAMHSA, CMHS**10x10 Wellness Campaign**

The Federal Government has spearheaded the SAMHSA 10x10 Wellness Campaign, launched in 2010, to promote the importance of addressing all parts of a person's life in hopes of increasing life expectancy for persons with mental health problems by 10 years over the next 10 years.

<http://www.10x10.samhsa.gov>

HHS, SAMHSA**National GAINS Center for People with Co-Occurring Disorders in the Justice System**

This center provides access to community-based services for adult and juvenile criminal offenders with co-occurring substance use and mental health problems.

345 Delaware Avenue
Delmar, NY 12054
800-311-GAIN (4246)

<http://gainscenter.samhsa.gov/html/about>

HHS, SAMHSA, CMHS

Resource Center to Promote Acceptance, Dignity and Social Inclusion Associated with Mental Health (ADS Center)

This organization enhances acceptance and social inclusion by ensuring that people with mental health problems can live full, productive lives within communities without fear of prejudice and discrimination. We provide information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.

<http://www.stopstigma.samhsa.gov>

HHS, SAMHSA, CMHS

Consumer Survivor Mental Health Information

SAMHSA's Center for Mental Health Services (CMHS) supports the meaningful participation of mental health consumers/survivors in all aspects of the mental health system including the planning, design, implementation, policy formulation, and evaluation of mental health services.

1 Choke Cherry Road, Suite 6-1069

Rockville, MD 20857

240-276-1330

<http://www.samhsa.gov/consumersurvivor>

HHS, SAMHSA, CMHS

Refugee Mental Health Program (RMHP)

This program originated in the Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) in 1980 in response to the arrival of nearly 125,000 Cubans on South Florida shores. Its mission is to provide mental health assessment, treatment, and consultation to Cuban and Haitian migrants and their providers.

1 Choke Cherry Road, Room 6-1099

Rockville, MD 20857

240-276-1845

HHS, SAMHSA, CMHS

Systems of Care

This website is devoted to providing information about the mental health of children, youth, and families. Systems of care is an approach to services that recognizes the importance of family, school, and community, and seeks to promote the full potential of every child and youth by addressing their physical, emotional, intellectual, cultural, and social needs.

1 Choke Cherry Road, Sixth Floor

Rockville, MD 20857

240-276-1980

<http://www.partnersforrecovery.samhsa.gov/ros.html>

HHS, SAMHSA, CMHS

What a Difference a Friend Makes Campaign

SAMHSA launched the Mental Health Campaign for Mental Health Recovery to encourage, educate, and inspire people between 18 and 25 to support their friends who are experiencing mental health problems.

<http://www.whatadifference.samhsa.gov>

National Suicide Prevention Resource Center

SPRC promotes the implementation of the National Strategy for Suicide Prevention and enhances the Nation's mental health infrastructure by providing States, Government agencies, private organizations, colleges and universities, and suicide survivor and mental health consumer groups with access to the science and experience that can support their efforts to develop programs, implement interventions, and promote policies to prevent suicide.

55 Chapel Street

Newton, MA 02458

877-438-7772

http://www.sprc.org/about_sprc/index.asp

Military/Veterans

U.S. DEPARTMENT OF DEFENSE (DOD)

This department provides a wide array of services to prevent substance use disorders, including worksite education, drug testing, early intervention, outpatient counseling, and inpatient treatment.

5111 Leesburg Pike

Skyline 5, Suite 810

Rockville, MD 22041

703-681-0064

<http://www.defenselink.mil>

DOD, Office of Assistant Secretary of Defense for Public Affairs

This public affairs office develops policies, plans, and programs in support of DOD objectives and operations.

1400 Defense, Pentagon, Room 3A-750

Washington, DC 20301-1400

703-428-0711

<http://www.defenselink.mil/pubs/almanac/asdpa.html>

Department of Defense Center of Excellence (DCoE)

This group assesses, validates, oversees, and facilitates prevention, resilience, identification, treatment, outreach, rehabilitation, and reintegration programs for psychological health (PH) and traumatic brain injury (TBI) to ensure the Department of Defense meets the needs of the Nation's military communities, warriors and families.

2345 Crystal Drive

Crystal Park 4, Suite 120

Arlington, VA 22202

800-510-7897

<http://www.dcoe.health.mil/About.aspx>

DOD, United States Army**Army Center for Substance Abuse Programs (ACSAP)**

This group supports combat readiness by providing program oversight, supervision, inspection, integration, technical assistance, and training development for the operation and management of all elements of the Army Substance Abuse Program.

4501 Ford Avenue, Suite 320
Alexandria, VA 22302
703-681-5583

<http://www.acsap.army.mil>

DOD, United States Army**Army Medical Surveillance Activity (AMSA)**

This division of the army is the only organization that performs comprehensive medical surveillance and routinely publishes background rates of diseases and injuries for the army population.

Army Medical Surveillance Activity
2900 Linden Lane, Suite 200
Silver Spring, MD 20910
301-319-3240

<http://www.afhsc.army.mil/home>

DOD, United States Marine Corps**Marine Corps Community Services (MCCS)**

This group seeks to provide the Marine Corps with plans, policies, and resources to improve and sustain the capabilities of commanders. Its goal is to prevent problems that detract from unit performance and readiness.

United States Marine Corps Personal and Family
Readiness Division
3280 Russell Road
Quantico, VA 22134
703-784-9454

<http://www.usmc-mccs.org>

DOD, United States Navy**National Naval Medical Center's Substance Abuse and Rehabilitation Program (SARP)**

This program's mission is to improve operational readiness, promote healthy lifestyles, and treat problems from alcohol and substance use. Substance-related problems are identified and treated by a team of specialists. The program is designed to meet the individual needs of active-duty personnel, family members, and retirees.

Substance Abuse and Rehabilitation Program
National Naval Medical Center
8901 Rockville Pike
Bethesda, MD 20889
301-295-4611

<http://www.bethesda.med.navy.mil>

DOD, United States Navy**Navy Alcohol & Drug Abuse Prevention Program (NADAP)**

This group's mission is to support the Navy's readiness by fighting alcohol abuse and drug use. It offers information and assistance to support individual and command alcohol and drug use prevention efforts.

Department of the Navy, Navy Environmental Health Center
620 John Paul Jones Circle, Suite 1100
Portsmouth, VA 23708-2103
757-953-0700

<http://www.npc.navy.mil/CommandSupport/NADAP>

U.S. DEPARTMENT OF VETERANS AFFAIRS (VA)

This Government agency provides benefits and services to people who are veterans, family members, or survivors of veterans.

810 Vermont Avenue NW
Washington, DC 20420
800-827-1000

<http://www.va.gov>

VA, Center for Post-Traumatic Stress Disorder (PTSD)

This center advances the clinical care and social welfare of U.S. veterans through research, education, and training on PTSD and stress-related disorders.

802-296-6300

<http://www.ptsd.va.gov>

VA, Suicide Prevention Hotline

This helpline provides veterans in emotional crisis with round-the-clock access to trained professionals.

800-273-TALK (8255)

<http://www.suicidepreventionlifeline.org>

Policy/Education**HHS, Centers for Disease Control and Prevention (CDC)**

For a full description, refer to General Information under Federal Agencies.

HHS, NIH**National Library of Medicine (NLM)**

This library contains extensive substance use disorder research.

8600 Rockville Pike
Bethesda, MD 20894
888-346-3656

<http://www.nlm.nih.gov>

HHS, NIH, NIDA

Office of Science Policy and Communications

This Government office conducts science-based research on substance use disorders.

6001 Executive Boulevard
Room 5213, MSC 9561
Bethesda, MD 20892-9561
301-443-1124

<http://www.nida.nih.gov/about/organization/OSPC/OSPC.html>

HHS, SAMHSA, CSAT

Road to Recovery Television and Radio Series

*This SAMHSA-sponsored television and radio series, which discusses substance use and mental disorders, is produced monthly and available on the **Recovery Month** website.*

<http://www.recoverymonth.gov/Multimedia.aspx>

Prevention

DOJ, DEA

Just Think Twice

This website focuses on demand reduction and street-smart prevention for teenagers, aiming to educate teens about the realities of drug use.

<http://www.justthinktwice.com>

EOP, ONDCP

Above the Influence

This campaign helps teens become more aware of the influences around them and encourages them to stay above the influence of peer pressure.

<http://www.abovetheinfluence.com>

EOP, ONDCP

National Youth Anti-Drug Media Campaign

A comprehensive advertising and public relations program, this campaign offers critical drug information for teens and tips for parents on keeping their kids healthy and drug-free.

<http://www.mediacampaign.org>

Fetal Alcohol Spectrum Disorders (FASD)

Center for Excellence

The mission of this center is to facilitate the development and improvement of prevention, treatment, and care systems in the United States by providing national leadership and facilitating collaboration in the field. CSAT and the Center for Mental Health Services (CMHS) are SAMHSA's lead agencies for this initiative.

<http://www.fascenter.samhsa.gov>

Foundations of Prevention Online

This online course consists of eight instructional units broken up into separate learning modules. The course is self-paced and available 24 hours a day. Tests are scored immediately, so users know how well they are doing and when they need to review.

<https://preventionplatform.samhsa.gov/fop/index.cfm?CFID=172156&CFTOKEN=25512330>

HHS, NIH, NIAAA

National Advisory Council on Alcohol Abuse and Alcohol Prevention Task Force on College Drinking

This task force is a leader in the national effort to reduce alcohol-related problems. In addition to conducting and supporting research in a wide range of scientific areas, the Institute translates and disseminates information to health care providers, researchers, policymakers, and the public. Online information for the general public is available in English and Spanish. Topics include: "Beyond Hangovers: Understanding alcohol's impact on your health"; "A Family History of Alcoholism—Are you at risk?"; "Alcohol: A woman's health issue"; "Make a Difference: Talk to your child about alcohol-Parent's booklet"; "Tips for Cutting Down on Drinking."

5635 Fishers Lane, MSC 9304

Bethesda, MD 20892-9304

301-443-3860

<http://www.collegedrinkingprevention.gov>

HHS, NIH, NIDA

Prevention Research

This institute supports most of the world's research on the health aspects of drug abuse and addiction. It carries out a large variety of programs to ensure the rapid dissemination of research information and its implementation in policy and practice.

6001 Executive Boulevard

Room 5213, MSC 9561

Bethesda, MD 20892-9561

301-443-1124

<http://www.nida.nih.gov/drugpages/prevention.html>

HHS, Office of Disease Prevention and Health HP2010 – Healthy People 2010 (and beyond)

This report is published by the Office of Disease Prevention and Health Promotion (ODPHP), HHS, and states two overall goals: to increase quality and years of healthy life and to eliminate health disparities. These are supported by 467 objectives organized within 28 main focus areas, each identifying an overall goal.

<http://www.healthypeople.gov>

HHS, SAMHSA**Center for Substance Abuse Prevention (CSAP)**

The mission of this center is to bring effective substance use prevention to every community nationwide. Its discretionary grant programs—whether focusing on preschool-age children and high-risk youth or on community-dwelling older Americans—target States, communities, organizations, and families to promote resiliency, promote protective factors, and reduce risk factors for substance use.

1 Choke Cherry Road
Rockville, MD 20857
240-276-2420

<http://www.samhsa.gov/about/csap.aspx>

HHS, SAMHSA, CSAP**A Family Guide to Keeping Youth Mentally Healthy & Drug Free**

This website serves as a family guide to keep youth mentally healthy and drug free.

1 Choke Cherry Road
Rockville, MD 20857
240-276-2548

<http://www.family.samhsa.gov>

HHS, SAMHSA, CSAP**Building Blocks for a Healthy Future**

This initiative is an early childhood substance use prevention program that educates parents and caregivers about the basics of prevention in order to promote a healthy lifestyle.

1 Choke Cherry Road
Rockville, MD 20857
800-694-4747, ext. 4820

<http://bblocks.samhsa.gov>

HHS, SAMHSA, CSAP**National Centers for the Application of Prevention Technologies (CAPTs)**

The CSAP national CAPT website provides links to each of the individual centers that make up the system: Northeast, Central, Western, Southeast, and Southwest.

<http://captus.samhsa.gov>

HHS, SAMHSA, CSAP**National Registry of Evidence-based Programs and Practices (NREPP)**

This is a searchable database of interventions for the prevention and treatment of mental and substance use disorders. NREPP publishes intervention summaries on its website for every intervention it reviews.

<http://www.nrepp.samhsa.gov>

HHS, SAMHSA, CSAP**Prevention Pathways**

This website provides information on prevention programs, program implementation, evaluation technical assistance, online courses, and a wealth of other prevention resources.

<http://pathwayscourses.samhsa.gov>

HHS, SAMHSA, CSAP**Prevention Platform**

This is an online resource for substance abuse prevention provided by the SAMHSA's Center for Substance Abuse Prevention (CSAP).

<https://preventionplatform.samhsa.gov>

HHS, SAMHSA, CSAP**Reach out Now National Teach-In Too Smart To Start**

This is an underage alcohol use prevention initiative for parents, caregivers, and their 9- to 13-year-old children.

1 Choke Cherry Road
Rockville, MD 20857
240-747-4980

<http://www.toosmarttostart.samhsa.gov>

HHS, SAMHSA, CSAP**Stop Underage Drinking Portal of Federal Resources**

The Consolidated Appropriations Act of 2004 directed the Secretary of Health and Human Services to establish the Interagency Coordinating Committee on the Prevention of Underage Drinking (ICCPUD) and to issue an annual report summarizing all Federal agency activities related to preventing underage alcohol use. The website is a comprehensive portal of Federal resources for information on underage drinking and ideas for combating this issue.

1 Choke Cherry Road
Rockville, MD 20857
240-747-4980

<http://www.stopalcoholabuse.gov>

HHS, SAMHSA, CSAP**Talk Early. Talk often. Get Others Involved.**

This is a public education website developed by HHS, in support of the Surgeon General's Call to Action to communicate to parents about how they can help reduce their child's risk of becoming involved with alcohol. The main focus is to provide parents with information and tools to help them have open and ongoing conversations with their preteen and teen children about the dangers of underage alcohol use.

<http://www.underagedrinking.samhsa.gov>

Recovery/Treatment

Depression and Bipolar Support Alliance (DBSA)

This group's mission is to provide hope, help, and support to improve the lives of people living with depression or bipolar disorder. DBSA pursues and accomplishes this mission through peer-based, recovery-oriented, empowering services and resources when people want them, where they want them, and how they want them.

730 North Franklin Street, Suite 501
Chicago, IL 60654-7225
800-826-3632
<http://www.dbsalliance.org>

HHS, NIH, NIDA

Treatment Research

This agency supports most of the world's research on the health aspects of drug abuse and addiction. It carries out a large variety of programs to ensure the rapid dissemination of research information and its implementation in policy and practice.

6001 Executive Boulevard
Room 5213, MSC 9561
Bethesda, MD 20892-9561
301-443-1124
<http://www.drugabuse.gov/drugpages/treatment.html>

HHS, SAMHSA, CMHS Recovery To Practice

This initiative is the most recent of the Federal Government's efforts to promote recovery for all Americans affected by mental health problems.

7315 Wisconsin Ave, Eighth Floor
Bethesda, MD 20814
301-951-0056

HHS, SAMHSA, CSAP

Co-Occurring Center for Excellence (COCE)

This organization provides the technical, informational, and training resources needed for the dissemination of knowledge and the adoption of evidence-based practices in systems and programs that serve people with co-occurring disorders.

<http://coce.samhsa.gov>

HHS, SAMHSA

SAMHSA's National Helpline

This Helpline provides 24-hour free and confidential information in English and Spanish.

800-662-HELP (800-662-4357)
800-487-4889 (TDD)
<http://www.samhsa.gov/treatment>

HHS, SAMHSA

Treatment Locator

This is a searchable directory that contains resources about mental health, substance abuse, and alcohol and drug treatment programs.

<http://www.samhsa.gov/treatment>

HHS, SAMHSA

Center for Behavioral Health Statistics and Quality (CBHSQ)

This office (formerly the Office of Applied Studies) has primary responsibility for the collection, analysis and dissemination of behavioral health data.

1 Choke Cherry Road, Room 7-1044
Rockville, MD 20857
240-276-1212
<http://www.samhsa.gov/about/cbhsq.aspx>

HHS, SAMHSA

Center for Substance Abuse Treatment (CSAT)

*As the sponsor of **Recovery Month**, this organization promotes the availability and quality of community-based substance use treatment services for individuals and families who need them. It supports policies and programs to broaden the range of evidence-based effective treatment services for people who abuse alcohol and drugs and that also address other addiction-related health and human services problems.*

1 Choke Cherry Road, Second Floor
Rockville, MD 20857
240-276-2750
<http://www.samhsa.gov/about/csat.aspx>

HHS, SAMHSA, CSAT

Division of Pharmacologic Therapies (DPT)

This division manages the day-to-day regulatory oversight activities necessary to implement the use of opioid agonist medications, such as methadone and buprenorphine, approved by the U.S. Food and Drug Administration for addiction treatment.

1 Choke Cherry Road, Room 2-1075
Rockville, MD 20857
240-276-2700
<http://www.dpt.samhsa.gov>

HHS, SAMHSA, CSAT

Knowledge Application Program (KAP)

This program provides substance use treatment professionals and consumers with publications, online education, and other resources that contain information on best treatment practices.

JBS International, Inc.
5515 Security Lane, Suite 800
North Bethesda, MD 20852
<http://kap.samhsa.gov>

HHS, SAMHSA, CSAT**Partners for Recovery Program**

This program is dedicated to the advancement of prevention, treatment, and recovery from substance use and mental health disorders.

240-276-1691

<http://www.pfr.samhsa.gov>

HHS, SAMHSA, CSAT**Recovery Community Services Program, The (RCSP)**

This grant program awards funding to peer-to-peer recovery support services that help people initiate and/or sustain recovery from alcohol and drug use disorders. Some projects also offer support to family members of people needing, seeking, or in recovery.

1 Choke Cherry Road, Room 5-1124

Rockville, MD 20857

240-276-1566

National Coalition for Mental Health Recovery

This organization will ensure that consumer/survivors have a major voice in the development and implementation of health care, mental health, and social policies at the State and national levels, empowering people to recover and lead a full life in the community.

1101 15th Street NW, #1212

Washington, DC 20005

877-246-9058 (Toll Free)

<http://www.ncmhr.org>

National Technical Assistance Centers on Peer Support

NCSTAC promotes mental health systems transformation by working with diverse racial and ethnic communities to conduct comprehensive community assessments, develop community coalitions, advocate for improved mental health services and conduct public education activities.

2000 North Beauregard Street, Sixth Floor

Alexandria, VA 22311

866-439-9465

<http://ncstac.org>

Shared Decision Making

This is an interactive and collaborative process between individuals and their health care providers that is used to make health care decisions pertinent to an individual's personal recovery. This approach is consistent with the values of choice, self-determination, and empowerment and provides a means of enhancing consumer involvement in mental health care which has recognized benefits for positive treatment outcomes.

<http://www.samhsa.gov/ConsumerSurvivor/shared.asp>

State Consumer Networks

This group provides direct services, advocacy, and technical assistance to smaller consumer-operated services have emerged over the past 15 years. As States seek to include the "consumer voice" in systems transformation and to support consumer-operated services, the expertise, community-organizing, and advocacy skills offered by networks are assets to all stakeholders.

1000 Wilson Boulevard, Suite 1825

Arlington, VA 22209-3901

800-368-5777

<http://psychservices.psychiatryonline.org/cgi/content/full/60/3/291>

Schools/Youth**U.S. DEPARTMENT OF AGRICULTURE (USDA), 4-H**

Healthy lifestyle education and activities for youth are presented through a program managed nationally by the families, 4-H, and Education and Extension Service of the U.S. Department of Agriculture.

1400 Independence Avenue SW, STOP 2225

Washington, DC 20250-2201

202-401-4114

<http://www.national4-hheadquarters.gov>

U.S. DEPARTMENT OF EDUCATION (ED)

This department makes information available to students, parents, teachers, and administrators, including grants for anti-alcohol and drug programs.

400 Maryland Avenue SW, 7E-247

Washington, DC 20202-6123

800-872-5327

<http://www.ed.gov>

ED, Higher Education Center for Alcohol, Drug Abuse, and Violence Prevention (HEC)

Funded by the ED, this group provides support to all institutions of higher education in their efforts to address alcohol and illicit drug problems. HEC provides technical assistance, develops publications, and conducts training workshops.

<http://www.higheredcenter.org>

ED, Office of Safe and Drug-Free Schools

This office provides information on drug-free school programs and activities.

400 Maryland Avenue SW

Washington, DC 20202-6123

202-260-3954

DOJ, DEA

Get Smart About Drugs

This DEA program is a resource for parents about how and why teens abuse prescription drugs.

2401 Jefferson Davis Highway

Alexandria, VA 22301

202-307-1000

<http://www.getsmartaboutdrugs.com>

HHS, NIH, NIAAA

College Drinking—Changing the Culture

This is a one-stop resource to comprehensive research-based information on issues related to alcohol abuse and binge drinking among college students.

<http://www.collegedrinkingprevention.gov>

HHS, NIH, NIDA

Heads Up Website

Through a continuing partnership, NIDA and Scholastic, Inc., the global children's publishing and media company, distributes information on the health effects of drugs to students and teachers in grades 5 through 10 nationwide through a program called "Heads Up: Real News About Drugs and Your Body."

6001 Executive Boulevard

Room 5213, MSC 9561

Bethesda, MD 20892-9561

301-443-1124

<http://www.scholastic.com/headsup>

HHS, NIH, NIDA

NIDA for Teens

This website educates adolescents ages 11 through 15 (as well as their parents and teachers) about the science behind drug abuse.

6001 Executive Boulevard

Room 5213, MSC 9561

Bethesda, MD 20892-9561

301-443-1124

<http://www.teens.drugabuse.gov>

HHS, NIH, NIDA

NIDA Goes Back to School Website

This website is a source of free information about the latest science-based drug use publications and teaching materials. The site is targeted toward teachers and parents.

6001 Executive Boulevard

Room 5213, MSC 9561

Bethesda, MD 20892-9561

301-443-1124

<http://www.backtoschool.drugabuse.gov>

HHS, SAMHSA, CSAT

Safe Schools/Health Students (SS/HS)

SS/HS a Comprehensive Approach to Youth Violence Prevention

This initiative is a unique Federal grant-making program designed to prevent violence and substance abuse among our Nation's youth, schools, and communities

202-260-3954

<http://www.sshs.samhsa.gov/default.aspx>

HHS, SAMHSA, CSAP

Stop Underage Drinking Portal of Federal Resources

For a full description, refer to Prevention under Federal Agencies.

HHS, SAMHSA, CSAP

Talk Early. Talk Often. Get Others Involved

For a full description, refer to Prevention under Federal Agencies.

National Institute on Disability and Rehabilitation Research (NIDRR)

This institute provides leadership and support for a comprehensive program of research related to the rehabilitation of individuals with disabilities. All of its programmatic efforts are aimed at improving the lives of individuals with disabilities from birth through adulthood.

400 Maryland Avenue SW

Washington, DC 20202

800-872-5327

<http://www2.ed.gov/about/offices/list/osers/nidrr/index.html>

Reclaiming Futures

This initiative created by the Robert Wood Johnson Foundation (RWJF), housed in the Regional Research Institute of the School of Social Work at Portland State University, offers a new approach to helping teenagers caught in the cycle of drugs, alcohol and crime. In 29 communities across the Nation, the program has received investments to spread its model from RWJF, the Office of Juvenile Justice and Delinquency Prevention, SAMHSA's Center for Substance Abuse Treatment, and the Kate B. Reynolds Charitable Trust.

Portland State University

PO Box 751

Portland, OR 97207-0751

503-725-8911

<http://www.reclaimingfutures.org>

Workplace

HHS, SAMHSA, CSAP

Workplace Resource Center Helpline

This Helpline supplies centralized access to information about drug-free workplaces and related topics.

1 Choke Cherry Road
Rockville, MD 20857
800-WORKPLACE (800-967-5752)
240-276-2600

<http://www.drugfreeworkplace.gov>

U.S. DEPARTMENT OF LABOR (DOL)

This department provides information for U.S. job seekers, wage earners, and retirees, offering information about workplace rules and regulations.

200 Constitution Avenue NW
Washington, DC 20210
866-4-USA-DOL (866-487-2365)

<http://www.dol.gov>

DOL, Office on Disability Employment Policy (ODEP)

This office works closely with the Departments of Defense and Veterans Affairs, as well as DOL's Veterans Office to address the provision of personal recovery and employment assistance to our nation's disabled service members, including those coming back from Iraq and Afghanistan.

U.S. Department of Labor, Office on Disability Policy
Frances Perkins Building
200 Constitution Avenue NW
Washington, DC 20210

<http://www.dol.gov/odep>

DOL, ODEP

America's Heroes at Work

This is a DOL project that addresses the employment challenges of returning service members living with Traumatic Brain Injury (TBI) and/or Post-Traumatic Stress Disorder (PTSD). Designed for employers and the workforce development system, the website is your link to information and tools to help returning service members affected by TBI and/or PTSD succeed in the workplace—particularly service members returning from Iraq and Afghanistan.

866-4-USA-DOL (866-487-2365)
<http://www.americasheroesatwork.gov>

DOL, DisabilityInfo.gov

This comprehensive Federal website provides disability-related Government resources.

<http://www.disabilityinfo.gov>

DOL, Drug-Free Workplace Advisor

This tool provides information to businesses about how to establish and maintain an alcohol- and drug-free workplace. It also provides information about the Drug-Free Workplace Act of 1988, based on the Office of Management and Budget's (OMB) Government-wide non-regulatory guidance.

U.S. Department of Labor, Frances Perkins Building
200 Constitution Avenue NW, Room S-2312
Washington, DC 20210
866-487-2365

<http://www.dol.gov/elaws/drugfree.htm>

DOL, Substance Abuse Information Database

This interactive database provides a one-stop source of information with summaries and full texts of materials relating to workplace substance use issues. Employers can draw on articles from experts as well as success stories from a variety of industries to assist them in establishing and maintaining a workplace substance use program.

U.S. Department of Labor
200 Constitution Avenue NW, Room S-2312
Washington, DC 20210
866-487-2365

<http://www.dol.gov/workingpartners>

DOL, Working Partners for an Alcohol-and Drug-Free Workplace

This program, established by the DOL, raises awareness about the impact of substance abuse in the workplace, especially in small businesses. Working Partners has facts and figures about alcohol and drug abuse and information on how to establish an alcohol- and drug-free workplace. It features the fully searchable Substance Abuse Information Database (SAID), which contains hundreds of reports, studies, and surveys that relate to workplace substance abuse. Summaries of laws and regulations also are included in SAID. Working Partners offers free subscriptions for email updates of news and information.

<http://www.dol.gov/dol/workingpartners.htm>

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)

Information for small business employers about EEOC-enforced laws and processes is available through the commission.

U.S. Equal Employment Opportunity Commission
131 M Street NE
Washington, DC 20507
800-669-4000

<http://www.eeoc.gov>

U.S. NATIONAL LABOR RELATIONS BOARD (NLRB)

This Federal agency administers the National Labor Relations Act by conducting elections to determine whether or not employees want union representation, as well as investigating and remedying unfair labor practices by employers and unions.

1099 14th Street NW

Washington, DC 20570-0001

866-667-NLRB (866-667-6572)

866-315-NLRB (866-315-6572) (TTY)

<http://www.nlr.gov>

U.S. SMALL BUSINESS ADMINISTRATION (SBA)

Grantees of the Paul D. Coverdell Drug Free Workplace Program assist small businesses with the implementation of a drug-free workplace program by providing financial, technical, and management assistance, including information about grants/loans and employee assistance programs.

409 Third Street SW

Washington, DC 20416

800-827-5722

<http://www.sba.gov>

SBA, U.S. Business Advisor

The organization gives access to Federal Government information, services, and transactions.

<http://www.business.gov>

OTHER RESOURCES

Culture Specific

Arab and Middle East Resources Center (AMERC)

This nonprofit organization was founded to provide inter-culturally sensitive services to raise awareness about of substance abuse and mental health problem. This will include public awareness and recovery support. AMERC is a member of Michigan Community Coalition for Change (MC3). AMERC mission is building bridges for recovery and well-being.

313-766-8712

National Alliance of Multi-Ethnic Behavioral Health Association (NAMBHA)

This 501c3 organization is composed of a myriad of diverse associations interested in the elimination of disparities in mental and behavioral health and improving the well-being of racial/ethnic children, adults, families and communities. Peruse the site for further information on products and services, supports, resources, and NAMBHA's infrastructure.

3 Bethesda Metro Center
Bethesda, MD 20814
301-941-1834

<http://nambha.org>

National Minority AIDS Council

The Council supplies resources for minorities with AIDS.

1931 13th Street NW
Washington, DC 20009-4432
202-483-6622

<http://www.nmac.org>

Support for Addictions Prevention and Treatment in Africa Foundation (SAPTAF)

For a full description, refer to Prevention.

African American

Association of Black Psychologists

This association addresses issues facing black psychologists and the black community.

P.O. Box 55999
Washington, DC 20040-5999
202-722-0808

<http://www.abpsi.org>

Black Administrators in Child Welfare, Inc.

This association provides help for African-American children and their families in the child welfare system.

900 Second Street NE, Suite 217
Washington, DC 20002
202-783-3714

<http://www.blackadministrators.org>

GROUP Ministries, Inc.

For a full description, refer to Recovery Support Programs.

National Association for Equal Opportunity in Higher Education

This association offers programs and services for African-American college students and college campuses.

209 Third Street SE
Washington, DC 20003
202-552-3300

<http://www.nafeo.org>

National Association of African Americans for Positive Imagery

This campaign includes alcohol and tobacco control to promote positive community and self images and foster environments free of health disparities.

1231 North Broad Street
Philadelphia, PA 19122
215-235-6488

<http://www.naaapi.org>

National Association of Black Social Workers

The membership of this association includes African Americans working in social services.

2305 Martin Luther King Avenue SE
Washington, DC 20020
202-678-4570

<http://www.nabsw.org>

National Black Alcoholism and Addiction Council

This group provides programs, education, and training for the prevention and treatment of substance use disorders in the African-American community.

1500 Golden Valley Road
Minneapolis, MN 55411
877-NBACORG (622-2674)
407-532-2747

<http://www.nbacinc.org>

National Black Child Development Institute (NBCDI)

NBCDI provides and supports programs, workshops, and resources for African-American children, their parents, and communities in early health education, elementary and secondary health education, child welfare, and parenting.

1313 L Street, NW, Suite 110
Washington, DC 20005-4110
800-556-2234

<http://www.nbcdi.org>

National Council of Negro Women, Inc.

This organization offers information about issues affecting African-American women and their families.

633 Pennsylvania Avenue NW
Washington, DC 20004
202-737-0120

<http://www.ncnw.org>

National League of Cities (NLC)

The overall purpose of the NLC is to strengthen and promote cities as centers of opportunity, leadership, and governance.

1301 Pennsylvania Avenue NW, Suite 550
Washington, DC 20004
202-626-3000

www.nlc.org

National Medical Association (NMA)

This association serves as the collective voice of African-American physicians and a force for parity and justice in medicine and the elimination of disparities in health.

1012 10th Street NW
Washington, DC 20001
202-347-1895

<http://www.nmanet.org>

Turning Point

For a full description, refer to State and Local Resources.

Asian-Pacific Islander**Asian and Pacific Islander American Health Forum**

This forum includes Asian and Pacific Islander communities in all health, political, social, and economic arenas.

1828 L Street NW, Suite 802
Washington, DC 20036
202-466-7772

<http://www.apiahf.org>

Asian Counseling and Referral Service, Inc.

For a full description, refer to Recovery Support Programs.

Japanese American Citizens League

This community organization provides assistance through programs that enhance the cultural preservation of the Japanese-American community and challenge social injustice wherever it may occur.

1765 Sutter Street
San Francisco, CA 94115
415-921-5225

DC Office

1850 M Street NW, Suite 1100
Washington, DC 20036
202-223-1240

<http://www.jacl.org>

Korean American Coalition

This group holds one strong voice for the Korean-American community by bringing people together to build a better community for all through education, service, and advocacy.

1001 Connecticut Avenue NW, Suite 730
Washington, DC 20036
202-296-9560

<http://www.kacdc.org>

National Asian American Pacific Islander Mental Health Association

This association aids the mental well-being of Asian Americans and Pacific Islanders when dealing with problems including substance use.

1215 19th Street, Suite A
Denver, CO 80202
303-298-7910

<http://www.naapimha.org>

National Asian Pacific American Families Against Substance Abuse, Inc. (NAPAFASA)

This private, nonprofit membership organization involves service providers, families, and youth to promote health and social justice and address the alcohol, tobacco, and other drug issues of Asian and Pacific Islander populations.

340 East Second Street, Suite 409
Los Angeles, CA 90012
213-625-5795

<http://www.napafasa.org>

Organization of Chinese Americans

This organization serves as a resource for Chinese-American and Asian-American citizens and permanent residents to help them secure their rights through legislative and policy initiatives.

1322 18th Street NW
Washington, DC 20036-1803
202-223-5500

<http://www.ocanational.org>

Hispanic/Latino

ASPIRA Association, Inc.

This association offers programs and activities dedicated to leadership development and education of Puerto Rican and other Latino youth.

1444 Eye Street NW, Suite 800

Washington, DC 20005

202-835-3600

<http://www.aspira.org>

Chicanos Por La Causa, Inc.

This nonprofit community development corporation offers social service programs and services throughout Arizona.

1112 East Buckeye Road

Phoenix, AZ 85034

602-257-0700

<http://www.cplc.org>

Latin American Youth Center

This center provides outpatient counseling services for Hispanic individuals, families, and groups.

1419 Columbia Road NW

Washington, DC 20009

202-319-2225

<http://www.layc-dc.org>

National Alliance for Hispanic Health

This alliance offers information on health issues that affect the Hispanic community.

1501 16th Street NW

Washington, DC 20036

202-387-5000

<http://www.hispanichealth.org>

National Hispanic Medical Association (NHMA)

This association conducts health and policy research and offers programs to improve the health of Hispanics and other underserved populations.

1411 K Street NW, Suite 1100

Washington, DC 20005

202-628-5895

<http://www.nhmamd.org>

National Latino Behavioral Health Association

The mission of this organization is to provide national leadership for the advancement of Latino behavioral health services.

1616 P Street NW, Suite 109

Washington, DC 20036

<http://www.nlbha.org>

National Latino Children's Institute (NLCI)

This national institute conducts research and presents educational materials, programs, and services focused on Latino children.

118 Broadway Street, Suite 615

San Antonio, TX 78205

210-228-9997

<http://www.nlci.org>

National Latino Council on Alcohol and Tobacco Prevention (NLCATP)

The Council prevents tobacco use and reduces alcohol use disorders in the Latino community through the dissemination of science-based research findings, community education, technical assistance, policy analysis, and advocacy.

250 Fifth Avenue, Suite 403

New York, NY 10001

<http://www.nlcatp.org>

Puerto Rican Organization for Community Education and Economic Development, Inc.

This organization addresses the social, health, and economic needs of Latino and non-Latino communities.

1126 Dickinson Street

Elizabeth, NJ 07201

908-351-7727

<http://www.proceedinc.com>

Native American

American Indian Community House (AICH)

This organization provides health and social services for American Indians in New York City.

11 Broadway, Second Floor

New York, NY 10004-1303

212-598-0100

<http://www.aich.org>

National Congress of American Indians (NCAI)

This organization offers assistance for tribes, tribal leaders, and youth in the prevention of, treatment of, and recovery from substance use disorders among American Indian and Alaskan Native families and communities.

1516 P Street NW

Washington, DC 20005

202-466-7767

<http://www.ncai.org>

National Indian Child Welfare Association (NICWA)

This association is dedicated to the well-being of American Indian children and families.

5100 SW Macadam Avenue, Suite 300
Portland, OR 97239
503-222-4044
<http://www.nicwa.org>

National Indian Health Board (NIHB)

This organization provides health care research and services for tribes, area health boards, tribal organizations, Federal agencies, and private foundations.

926 Pennsylvania Avenue SE
Washington, DC 20003
202-507-4070
<http://www.nihb.org>

Pima Prevention Partnership

This nonprofit, multi-cultural coalition for substance use disorders and delinquency prevention in Tucson provides policy leadership, program development, youth prevention services, grant writing, planning, and evaluation services to promote community development for Native Americans.

2525 East Broadway, Suite 100
Tucson, AZ 85716
520-624-5800
<http://www.thepartnership.us>

United National Indian Tribal Youth, Inc.

This organization develops initiatives to foster the spiritual, mental, physical, and social development of Native American youth.

500 North Broadway, Suite 10
Oklahoma City, OK 73102
405-236-2800
<http://www.unityinc.org>

White Bison, Inc.

This nonprofit organization disseminates culturally based principles, values, and teachings to support healthy community development and servant leadership, and to support healing from alcohol, substance abuse, co-occurring disorders, and intergenerational trauma. It offers learning resources to the Native American community nationwide on topics such as sobriety, recovery, prevention, and wellness/wellbriety.

701 North 20th Street
Colorado Springs, CO 80904
877-871-1495
719-548-1000
<http://www.whitebison.org>

Faith-Based Organizations

Alcoholics Victorious

This is a Christian-oriented 12-step support group for those recovering from alcohol or chemical dependency. It offers information and referrals, literature, phone support, conferences, support group meetings, and a newsletter.

4501 Troost Street
Kansas City, MO 64110-4127
816-561-0567
<http://www.alcoholicsvictorious.org>

Calix Society

This is a 12-step fellowship of Catholic alcoholics who help one another maintain sobriety through Alcoholics Anonymous. The group is concerned with total abstinence, spiritual development, and sanctification of the whole personality of each member.

3881 Highland Avenue, Suite 201
White Bear Lake, MN 55110
800-398-0524
651-773-3117
<http://www.calixsociety.org>

Catholic Charities, USA

This membership association provides vital social services to people in need, regardless of their religious, social, or economic backgrounds.

66 Canal Center Plaza, Suite 600
Alexandria, VA 22314
703-549-1390
<http://www.catholiccharitiesusa.org>

Celebrate Recovery®

This is a worldwide Christ-centered recovery ministry. By working the 12 steps, their Biblical principles, and the corresponding 8 Recovery Principles found in the Beatitudes, individuals find freedom from past hurts and harmful addictive and dysfunctional behaviors.

1 Saddleback Parkway
Lake Forest, CA 92630
949-609-8334
<http://www.celebraterecovery.com>

Church of Jesus Christ of Latter-Day Saints

This Mormon organization promotes strong family relationships.
2520 L Street NW, Second Floor
Washington, DC 20037
202-448-3333
<http://www.lds.org>

Clergy Recovery Network

This network mentors ministry professionals through personal crises and early recovery. It seeks to help clergy guide their ministries toward spiritual and organizational health before, during, and after a leadership crisis.

P.O. Box 52

Joplin, MO 64501

406-292-3322

<http://www.clergyrecovery.com>

Faith Partners

This organization promotes the prevention of alcohol, tobacco, and other drug abuse. It provides tools, training, materials, and assistance to congregations in several States.

511 Cargill Drive

Spicewood, TX 78669

512-394-9101

<http://www.faith-partners.org>

Faith WORKS

This organization facilitates the involvement of faith-based communities in the implementation of welfare reform.

2825 West Street, #1

Redding, CA 96001

530-242-1492

<http://www.faith-works.cc>

**Institute for Public Health Faith Collaborations
Rollins School of Public Health, Emory University**

This institute promotes vital learning at the intersecting boundaries where faith and health overlap, merge, and emerge transformed.

1256 Briarcliff Road

Atlanta, GA 30306

404-727-5246

<http://www.ihpnet.org>

Intercongregational Alcoholism Program (ICAP)

This network is for recovering alcoholic women in religious orders. The group aims to help Roman Catholic women who are, or have been, members of religious orders who are in need due to alcoholism or chemical dependencies.

7777 Lake Street, Suite 115

River Forest, IL 60305-1734

708-488-9770

Jewish Alcoholics, Chemically Dependent Persons and Significant Others (JACS)**A Program of the Jewish Board of Family and Children's Services (JBFCS)**

This program's mission is to help both individuals and the Jewish community at large effectively treat and prevent the problem of addiction. JACS provides a supportive network of Jews who are successfully in recovery and co-dependence, as well as the communal professionals, clergy, and educators who help them. The organization is a resource center where individuals, families, groups, and community institutions can turn for helpful, comforting guidance.

135 West 50th Street, Sixth Floor

New York, NY 10020

212-632-4600

<http://www.jacsweb.org>

Jewish Big Brother and Big Sister League

This league is an outpatient treatment program for adolescents, adults, and families suffering from alcohol, drug, or other addictions.

5750 Park Heights Avenue

Baltimore, MD 21208

410-466-9200

<http://www.jfs.org>

Lutheran Services in America

This organization advocates for sound and compassionate public policies on behalf of Lutheran social ministry organizations and the people they serve.

700 Light Street

Baltimore, MD 21230-3850

800-664-3848

<http://www.lutherservices.org>

National Council of Churches

The council helps parents communicate with their children about alcohol, tobacco, and illegal drugs.

475 Riverside Drive, Suite 800

New York, NY 10115

212-870-2228

<http://www.nccusa.org>

Odyssey Networks

This network is the Nation's largest coalition of Christian, Jewish, and Muslim faith groups dedicated to achieving interfaith understanding through the production and distribution of media.

The Interchurch Center

475 Riverside Drive

New York, NY 10115

212-870-1030

<http://www.odysseynetworks.org>

Overcomers In Christ (OIC)

This recovery program deals with every aspect of addiction and dysfunction (spiritual, physical, mental, emotional, and social). Members overcome obstacles using Christ-centered motivations.

P.O. Box 34460
Omaha, NE 68134
402-573-0966

<http://www.overcomersinchrist.org>

Overcomers Outreach, Inc.

This organization provides Christ-centered 12-step support for people with any compulsive behavior, their families, and friends. It uses the 12 steps of Alcoholics Anonymous and applies them to the Scriptures.

12828 Acheson Drive
Whittier, CA 90601
800-310-3001
877-968-3726

<http://www.overcomersoutreach.org>

Pathways to Promise

This organization is an interfaith technical assistance and resource center that offers liturgical and educational materials, program models, and networking information to promote a caring ministry with people with mental illness and their families. These resources are used by people at all levels of faith group structures, from local congregations to regional and national staff.

5400 Arsenal Street
St. Louis, MO 63139

<http://www.pathways2promise.org>

Presbyterians for Addiction Action (PAA) Presbyterian Health, Education and Welfare Association

This association assists Presbyterians as they minister in an increasingly addictive society to restore people of the Presbyterian faith.

100 Witherspoon Street
Louisville, KY 40202
888-728-7228, ext. 5800

<http://www.pcusa.org/phewa/paa.htm>

Recovery Consultants of Atlanta, Inc. (RCA)

This is a nonprofit, faith-based organization founded by concerned, committed, and spiritually centered members of Atlanta's recovery community. It collaborates with faith (primarily churches) and community-based organizations, develops peer-to-peer support services and programs, and works to build a network of recovering individuals.

3423 Covington Drive, Suite B
Decatur, GA 30032
404-289-0313

<http://www.recoveryconsultants.org>

Recovery Ministries of the Episcopal Church

This is a national membership organization that raises awareness throughout the church community about addictions and the hope of recovery from these illnesses.

2872 Hannon Hill Drive
Tallahassee, FL 32309
866-306-1542

<http://www.episcopalrecovery.org>

Reviving the Human Spirit: A Faith Community Initiative, Health Foundation of Greater Cincinnati

This independent foundation is dedicated to improving community health in Cincinnati and 20 surrounding counties.

Rookwood Tower
3805 Edwards Road, Suite 500
Cincinnati, OH 45209-1948
513-458-6640

<http://www.asapcenter.org>

Salvation Army

This organization provides a broad array of social services that include providing food for the hungry, relief for disaster victims, assistance for the disabled, outreach to the elderly and ill, clothing and shelter to the homeless, and opportunities for underprivileged children.

615 Slaters Lane
P.O. Box 269
Alexandria, VA 22313
703-684-5500

<http://www.salvationarmyusa.org>

Save Our Selves (SOS Clearinghouse)

This organization is dedicated to providing a path to sobriety, an alternative to those paths depending upon supernatural or religious beliefs.

4773 Hollywood Boulevard
Hollywood, CA 90027
323-666-4295

<http://www.cfiwest.org/sos/index.htm>

Seventh-Day Adventist Church

Through the Adventist Development and Relief Agency and other programs, this Church operates youth camps, community service projects, family life counseling, and Health & Temperance Programs, which include substance use disorder prevention/treatment and recovery options as a continuum.

12501 Old Columbia Pike
Silver Spring, MD 20904
301-680-6000

<http://www.adventist.org>

Shinnyo-en Foundation

The organization helps build more caring communities by supporting educational programs that engage and inspire young people in meaningful acts of service. The Foundation was established in 1994 by Shinnyo-en, a lay Buddhist order whose members strive to live with utmost sincerity and respect for others.

201 Mission Street, Suite 2450
San Francisco, CA 94105
415-777-1977
<http://www.sef.org>

St. Paul's Episcopal Church

This church has hosted 12-step programs and other affiliate programs for more than 15 years.

221 34th Street
Newport News, VA 23607
757-247-5086
<http://www.stpaulsnn.org>

Springs Rescue Mission

The mission reaches the poor and needy of Colorado Springs by providing for their physical needs while ministering restoration to their spirit, soul, and body.

5 West Las Vegas Street
Colorado Springs, CO 80903
719-632-1822
<http://www.springsrescuemission.org>

United Methodist Church – General Board of Church and Society of the United Methodist Church

This agency of the United Methodist Church offers faith-based substance abuse prevention advocacy training for local churches and faith-based programs for churches to de-stigmatize addiction and provide church-wide training on substance use disorders.

100 Maryland Avenue NE
Washington, DC 20002
202-488-5600
<http://www.umc-gbcs.org>

Volunteers of America

This is a national, nonprofit, faith-based organization dedicated to helping those in need rebuild their lives and reach their full potential. Through thousands of human service programs, including housing and health care, the group helps nearly 2 million people in over 400 communities.

1660 Duke Street
Alexandria, VA 22314
800-899-0089
703-341-5000
<http://www.vo.org>

Family and Social Services**Alliance for Children and Families**

This alliance provides services to the nonprofit child and family sectors and economic empowerment organizations.

11700 West Lake Park Drive
Milwaukee, WI 53244-3099
414-359-1040
<http://www.alliance1.org>

American Council for Drug Education (ACDE)

For a full description, refer to Prevention.

Elks Drug Awareness Resource Center

This program is the largest volunteer drug awareness program in the country. It is committed to eliminating the use and abuse of illegal drugs by all members of its society.

2750 North Lakeview Avenue
Chicago, IL 60614-1889
773-755-4700
<http://www.elks.org>

Child Welfare League of America (CWLA)

This membership organization has more than 1,100 public and private nonprofit agencies promoting the well-being of children, youth, and their families, and protecting every child from harm.

2345 Crystal Drive, Suite 250
Arlington, VA 22202
703-412-2400
<http://www.cwla.org>

Children's Defense Fund

This fund provides child welfare and health programs.

25 E Street NW
Washington, DC 20001
800-233-1200
202-628-8787
<http://www.childrensdefense.org>

Children's Health Initiative (CHI)

This program produces innovative digital media projects combining television and Internet technologies. CHI focuses on issues affecting the health of at-risk groups such as those living in poverty, families where children don't typically graduate from high school, teen parents, families with high incidence of substance abuse, and adults who grew up in violent homes. It is its belief that the health of a community can only be measured by the health of its children. The initiative's purpose is to help families create and sustain stable, wholly healthy (with physical, mental, emotional, and social well-being) homes for children.

P.O. Box 24123
New Orleans, LA 70184
985-892-7571
<http://www.childrenshealthinitiative.net>

Dictionary for Dads

This nonprofit organization shares education, resources, and practical experiences that are fundamental in helping men make informed decisions about parenting. Its goal is to assist dads in raising happy and healthy children.

516-398-1934

<http://www.dictionaryfordads.com>

Federation of Families for Children's Mental Health

This national parent-run organization focuses on the needs of children and youth with emotional, behavioral, or mental disorders, and their families.

9605 Medical Center Drive

Rockville, MD 20850

240-403-1901

<http://www.ffcmh.org>

Intervention 911

This group works with families nationwide to bring loved ones suffering from addiction to treatment. The organization also gives family and friends the tools they need to heal during the recovery process.

170 North Vista Street

Los Angeles, CA 90036

866-888-4911

<http://www.intervention911.com>

Kennedy Krieger Family Center

This center provides mental health and support services for children, adolescents, and families who experience trauma through the effects of abuse, neglect, and environmental factors.

2901 East Biddle Street

Baltimore, MD 21213

443-923-5800

http://www.kennedykrieger.org/kki_cp.jsp?pid=1400

National Alliance to End Homelessness

This is a nationwide coalition of public, private, and nonprofit organizations devoted to ending homelessness.

1518 K Street NW, Suite 410

Washington, DC 20005

202-638-1526

<http://www.endhomelessness.org>

National Alliance for Mental Illness (NAMI)

For a full description, refer to Mental Health.

National Association for Children of Alcoholics (NACoA)

For a full description, refer to Mutual Support Groups.

National Association of Public Child Welfare Administrators (NAPCWA)

This association is devoted solely to representing administrators of State and local public child welfare agencies, bringing an informed view of the problems facing families today to the formulation of child welfare policy.

810 First Street NE, Suite 500

Washington, DC 20002

202-682-0100

<http://www.aphsa.org/napcwa>

North American Family Renewal Institute, Inc. (NAFRI)

This institute researches, treats, and educates on all forms of addictive behaviors, and provides therapist training, public policy awareness, and specialized networking weekends for individuals in the recovery community.

8503 Schultz Road

Clinton, MD 20735

301-877-1577

Sigma Gamma Rho Sorority, Inc.

This sorority offers social services for communities around the Nation.

1000 South Hill Drive, Suite 200

Cary, NC 27513

888-747-1922

<http://www.sgrho1922.org>

U.S. DEPARTMENT OF AGRICULTURE, 4-H

For a full description, refer to Schools/Youth under Federal Agencies.

University of Baltimore School of Law Center for Families, Children and the Courts

This group's mission is to create, foster, and support a national movement to integrate communities, families, and the justice system to improve the lives of families and the health of the community.

1420 North Charles Street

Baltimore, MD 21201

410-837-5737

<http://law.ubalt.edu/cfcc>

Young Men's and Young Women's Hebrew Association/92nd Street Y

This organization is committed to sharing its programs with all New Yorkers regardless of economic circumstance. It provides financial assistance and an outreach program that brings the arts into the lives of economically disadvantaged local schoolchildren and keeps them off the streets.

1395 Lexington Avenue

New York, NY 10128

212-415-5500

<http://www.92y.org>

Young Men's Christian Association of the U.S.A. (YMCA)

The group provides health and social services for men, women, and children.

101 North Wacker Drive
Chicago, IL 60606
800-872-9622
<http://www.ymca.net>

Young Women's Christian Association of the U.S.A. (YWCA)

This organization offers health and social services for women and their families.

2025 M Street NW, Suite 550
Washington, DC 20036
800-YWCA-US1 (992-2871)
202-467-0801
<http://www.ywca.org>

YOUTH M.O.V.E.

This youth-led national organization is devoted to improving services and systems that support positive growth and development by uniting the voices of individuals who have experience in various systems, including mental health, juvenile justice, education, and child welfare.

9605 Medical Center Drive, Suite 280
Rockville, MD 20850
240-403-1901
<http://www.youthmovenational.org>

Health Care**American Holistic Health Association (AHHA)**

This association encourages physicians and practitioners to incorporate holistic principles into their practices and educate the public on the power of the holistic approach.

P.O. Box 17400
Anaheim, CA 92817
714-779-6152
<http://www.ahha.org>

DrugWatch

This comprehensive website database features extensive information about thousands of different medications and drugs currently on the market or previously available worldwide. By providing FDA alerts, drug interactions, and potential side effects, this site provides patients with valuable knowledge that could enhance their ability to voice concerns with their doctors and improve their quality of care.

800-452-0949
<http://www.drugwatch.com>

Families USA

This organization provides resources on access to high-quality, affordable health care as well as senior citizen issues.

1201 New York Avenue NW, Suite 1100
Washington, DC 20005
202-628-3030
<http://www.familiesusa.org>

**George Washington University
Ensuring Solutions to Alcohol Problems Initiative**

This program works to increase access to treatment for individuals with alcohol problems by collaborating with policymakers, employers, and concerned citizens.

2021 K Street NW, Suite 800
Washington, DC 20006
202-994-4303
<http://www.ensuringsolutions.org>

Haight Ashbury Free Clinics, Inc.

The mission of these clinics is to increase access to health care for all and improve the health and well-being of their clients. More than 34,000 individuals and their loved ones depend on the clinics every year to provide free, high-quality, demystified, and comprehensive health care that is culturally sensitive, nonjudgmental, and accessible to all in need.

P.O. Box 29917
San Francisco, CA 94129
415-746-1967
<http://www.hafci.org>

National Association of Community Health Centers (NACHC)

This association collaborates with community, migrant, and homeless health centers that provide health care to the poor and medically underserved.

7200 Wisconsin Avenue, Suite 210
Bethesda, MD 20814
301-347-0400
<http://www.nachc.com>

National Association of County Behavioral Health and Developmental Disability Directors (NACBHD)

For a full description, refer to State and Local Resources.

National Committee for Quality Assurance (NCQA)

This group provides information about the quality of the Nation's managed care plans.

1100 13th Street NW, Suite 1000
Washington, DC 20005
202-955-3500
<http://www.ncqa.org>

National Council on Patient Information and Education (NCPIE)

This multi-disciplinary coalition works together to stimulate and improve communication of information on safe and appropriate medicine use to consumers and health care professionals.

200-A Monroe Street, #212
Rockville, MD 20850-4448
301-340-3940
<http://www.talkaboutrx.org>

National Health Law Program

This national program provides resources on health care for uninsured or underinsured low-income people.

Health Consumer Alliance
2639 South La Cienega Boulevard
Los Angeles, CA 90034
310-204-4900
<http://www.healthconsumer.org>

National Minority AIDS Council

For a full description, refer to Culture-Specific Resources.

Justice/Legal System

American Bar Association (ABA) Standing Committee on Substance Abuse

This committee promotes justice system reform that addresses problems associated with illegal use of drugs and alcohol in this country. To carry out this mission, the Standing Committee collaborates with other ABA entities; Federal, State, and local public/private organizations; and State, local, and territorial bar associations.

740 15th Street NW
Washington, DC 20005-1019
202-662-1000
<http://www.abanet.org/subabuse>

American Correctional Association (ACA)

This organization provides resources for practitioners in the correctional profession and those interested in improving the justice system.

206 North Washington Street, Suite 200
Alexandria, VA 22314
800-ACA-JOIN
703-224-0000
<http://www.aca.org>

Bazelon Center

The Bazelon Center for Mental Health Law is a nonprofit organization devoted to improving the lives of people with mental illnesses through changes in policy and law.

1101 15th Street NW, Suite 1212
Washington, DC 20005
202-467-5730
<http://www.bazelon.org>

Center for Families, Children and the Courts

This center is dedicated to improving the quality of justice and services to meet the diverse needs of children, youth, families, and self-represented litigants in the California courts.

455 Golden Gate Avenue, Sixth Floor
San Francisco, CA 94102-3660
415-865-7739
<http://www.courts.ca.gov/programs.htm>

Center on Juvenile and Criminal Justice

This center focuses on reducing reliance on incarceration as a solution to social problems.

440 Ninth Street
San Francisco, CA 94103
415-621-5661
<http://www.cjcj.org>

DC Bar – Lawyers Assistance Program

Established in 1985, this is a free and confidential program assisting lawyers, judges, and law students who experience problems that interfere with their personal lives or their ability to serve as counsel or officers of the court.

1101 K Street NW, Suite 200
Washington, DC 20005
202-737-4700
http://www.dcbar.org/for_lawyers/bar_services/counseling/index.cfm

Drug Court Clearinghouse

This group provides technical assistance for drug court programs.

Justice Programs Office, School of Public Affairs, American University, Brandywine Building
4400 Massachusetts Avenue NW, Suite 100
Washington, DC 20016-8159
202-885-2875
<http://www1.spa.american.edu/justice/project.php?ID=1>

International Community Corrections Association (ICCA)

To enhance the quality of services and supervision for offenders in community corrections programs, this association offers information, training, and other services.

8701 Georgia Avenue, Suite 402
Silver Spring, MD 20910
301-585-6090
<http://www.iccaweb.org>

Legal Action Center (LAC)

This nonprofit law and policy organization fights discrimination against people with histories of substance use disorders, HIV/AIDS, or criminal records, and advocates for sound public policies in these areas.

225 Varick Street
New York, NY 10014
800-223-4044
212-243-1313

<http://www.lac.org>

National Association of Drug Court Professionals (NADCP)

This association seeks to reduce substance use, crime, and recidivism by promoting and advocating for the establishment and funding of drug courts and providing for the collection and dissemination of information, technical assistance, and mutual support to association members.

4900 Seminary Road, Suite 320
Alexandria, VA 22311
703-575-9400

<http://www.nadcp.org>

National Council of Juvenile and Family Court Judges

The council supplies publications and information about juvenile and family courts.

P.O. Box 8970
Reno, NV 89507
775-784-6012

<http://www.ncjfcj.org>

National Drug Court Institute (NDCI)

This institute promotes education, research, and scholarship for drug courts and other court-based intervention programs.

4900 Seminary Road, Suite 320
Alexandria, VA 22311
703-575-9400

<http://www.ndci.org>

National Sheriffs' Association

This association offers crime prevention programs that help sheriffs better serve the people of their cities, counties, or jurisdictions.

1450 Duke Street
Alexandria, VA 22314-3490
800-424-7827

<http://www.sheriffs.org>

National Treatment Accountability for Safer Communities (TASC)

This membership organization represents individuals and programs dedicated to the professional delivery of treatment and case management services to populations with substance use disorders.

1025 Connecticut Avenue NW, Suite 605
Washington, DC 20036
202-293-8657

<http://www.nationaltasc.org>

Sentencing Project

This project conducts research on sentencing and incarceration.

514 10th Street NW, Suite 1000
Washington, DC 20004
202-628-0871

<http://www.sentencingproject.org>

TASC, Inc. of Illinois

For a full description, refer to Recovery Support Programs.

Mental Health**American College of Mental Health Administration (ACMHA)**

ACMHA has a proven record of demonstrating the vision to pinpoint cutting-edge issues and support the development of innovative strategies to move the field. Now in its fourth decade, ACMHA is focused on equipping behavioral health leaders for a field that is rapidly changing in extraordinary times. The membership is a diverse working network of influential leaders and emerging leaders from across systems concerned with mental health and substance use conditions representing public and private administrators of services; national, State, and county government; professional organizations; managed behavioral health care organizations; research and academia; and consumer and family advocacy organizations.

7804 Loma del Norte Road NE
Albuquerque, NM 87109-5419
505-822-5038

<http://www.acmha.org>

Connecticut Department of Mental Health Addiction Services (DMHAS)

This organization promotes and administers comprehensive, recovery-oriented services in the areas of mental health treatment and substance use disorder prevention and treatment throughout Connecticut.

410 Capitol Avenue
P.O. Box 341431
Hartford, CT 06134
800-446-7348
860-418-7000

<http://www.dmhas.state.ct.us>

Mental Health America (MHA)

This is the country's oldest and largest nonprofit organization addressing all aspects of mental health and mental illness. With more than 320 affiliates nationwide, MHA works to improve the mental health of all Americans through advocacy, education, research, and service.

2000 North Beauregard Street, Sixth Floor
Alexandria, VA 22311
800-969-6642
703-684-7722

<http://www.mentalhealthamerica.net>

Mental Health Self-Assessment

This site is dedicated to families and service members who need a private and confidential assessment for conditions such as depression, post-traumatic stress disorder, anxiety disorder, bipolar disorder, and alcohol abuse.

<http://www.militarymentalhealth.org/Welcome.aspx>

National Alliance on Mental Illness (NAMI)

This is a nonprofit support and advocacy organization of consumers, families, and friends of people with severe mental illnesses. NAMI works to achieve equitable services and treatment for more than 15 million Americans living with severe mental illnesses and their families.

3803 North Fairfax Drive, Suite 100
Arlington, VA 22203
703-524-7600

<http://www.nami.org>

National Association for Children of Alcoholics (NACoA)

For a full description, refer to Mutual Support Groups.

NACoA, Just 4 Kids

This resource is devoted to helping kids who are affected by substance use in their homes or families. The resource is sponsored by NACoA, a nonprofit membership and affiliate organization, which works on behalf of children of alcohol- and drug-dependent parents. NACoA's mission is to eliminate the adverse impact of alcohol and drug use on children and families by working to raise public awareness and provide leadership in public policy at the national, State, and local levels.

10920 Connecticut Avenue, Suite 1000
Kensington, MD 20895
301-468-0985

<http://www.nacoa.org/kidspage.htm>

National Association of State Mental Health Program Directors (NASMHPD)

This association is the only member organization representing State executives responsible for the \$36.7 billion public mental health service delivery system serving 6.4 million people annually in all 50 States, 4 territories, and the District of Columbia.

NASMHPD operates under a cooperative agreement with the National Governors Association.

66 Canal Center Plaza, Suite 302
Alexandria, VA 22314

703-739-9333

<http://www.nasmhpd.org>

National Coalition for Mental Health Recovery (NCMHR)

This coalition ensures that consumers/survivors have a major voice in the development and implementation of health care, mental health, and social policies at the State and national levels, empowering people to recover and lead a full life in the community.

1101 15th Street NW, #1212
Washington, DC 20005

<http://www.ncmhr.org>

National Association of School Psychologists (NASP)

For a full description, refer to Provider and Professional Organizations.

NASP, Ready to Learn, Empowered to Teach

This organization offers an education policy platform, Ready to Learn, Empowered to Teach: Excellence in Education for the 21st Century, which outlines five principles necessary to ensure excellence in education by lowering barriers to learning and teaching.

<http://www.nasponline.org/advocacy/readytolearn.aspx>

Providence Center

This organization is the largest community mental health center in Rhode Island providing comprehensive services to adults, adolescents, and children experiencing mental health, substance use, emotional, and behavioral difficulties.

528 North Main Street
Providence, RI 02904
401-276-4000

<http://www.providencecenter.org>

Suicide Prevention Resource Center Education Development Center, Inc.

A national technical assistance center funded by a grant from SAMHSA, this program provides prevention support, training, and resource materials to strengthen suicide prevention networks.

55 Chapel Street
Newton, MA 02458
800-273-TALK (8255) (SAMHSA's Hotline)
877-438-7772
617-964-5448 (TTY)
<http://www.sprc.org>

Western Psychiatric Institute and Clinic

The institute provides behavioral health services for children, families, schools, and communities.

3811 O'Hara Street
Pittsburgh, PA 15213
412-624-1000
<http://wpic.upmc.com/default.htm>

Military/Veterans

AMVETS

This organization provides support for veterans and the active military in procuring their earned entitlements. It also offers community services that enhance the quality of life for this Nation's citizens.

4647 Forbes Boulevard
Lanham, MD 20706-4380
877-726-8387
301-459-9600
<http://www.amvets.org>

Vet2Vet

This consumer/provider partnership program utilizes veterans in recovery in a peer-counseling capacity to help other veterans. Vet2Vet is administered by veterans who themselves have been consumers of VA mental health services.

203-623-0731
<http://www.vet2vetusa.org>

Disabled American Veterans (DAV)

This organization is the official voice of America's service-connected disabled veterans—a strong, insistent voice that represents all of America's 2.1 million disabled veterans, their families, and survivors. Its nationwide network of services, which is free of charge to all veterans and members of their families, is completely supported by membership dues and contributions from the American public.

3725 Alexandria Pike
Cold Springs, KY 41076
877-426-2838
<http://www.dav.org>

Mental Health Self-Assessment

For a full description, refer to Mental Health.

National Coalition for Homeless Veterans (NCHV)

This is a 501(c)(3) nonprofit organization that serves as the resource and technical assistance center for a national network of community-based service providers and local, State, and Federal agencies. These groups provide emergency and supportive housing, food, health services, job training and placement assistance, and legal aid and case management support for hundreds of thousands of homeless veterans each year.

333½ Pennsylvania Avenue SE
Washington, DC 20003-1148
800-VET-HELP
<http://www.nchv.org>

National Veterans Foundation (NVF)

This group's mission is to serve the crisis management, information, and referral needs of all U.S. veterans and their families. It operates the Nation's only toll-free helpline for all veterans and their families.

9841 Airport Boulevard, Suite 512
Los Angeles, CA 90045
877-777-4443
<http://www.nvf.org>

New Directions

This is a long-term drug and alcohol treatment program that provides food, shelter, and rehabilitation to homeless veterans at four Los Angeles-area locations. An estimated 27,000 homeless veterans live in Los Angeles, which is home to the country's largest Veteran's Affairs hospital. Some suffer from both substance use disorders and mental health problems.

11303 Wilshire Boulevard, VA Building 116
Los Angeles, CA 90073-1003
310-914-4045
<http://www.newdirectionsinc.org>

Swords to Plowshares

This group promotes and protects the rights of veterans through advocacy, public education, and partnerships with local, State, and national entities.

1060 Howard Street
San Francisco, CA 94103
415-252-4788
<http://www.swords-to-plowshares.org>

Veterans of Foreign Wars (VFW)

This organization's members mentor youth groups, help in community food kitchens, volunteer in blood drives, and visit hospitalized veterans. Other members help veterans file compensation claims or "voice their vote" with elected officials.

406 West 34th Street
Kansas City, MO 64111
816-756-3390

<http://www.vfw.org>

Mutual Support Groups

16 Steps of Discovery and Empowerment

This group offers support for a wide variety of quality of life issues, such as addiction, codependency, abuse, and empowerment. The 16 Steps focus on a positive approach to help members celebrate personal strengths, stand up for themselves, heal physically, express love, and see themselves as part of the entire community, not just the recovery community.

P.O. Box 1302
Lolo, MT 59847
406-273-6080

<http://www.charlottekasl.com>

Abraham Low Self-Help System (ALSHS, formerly Recovery Inc.)

Recovery International and RI Discovery meetings are safe places to talk about life's struggles with others who have experienced similar struggles in their lives.

105 West Adams Street, Suite 2940
Chicago, IL 60603
866-221-0302

<http://www.recovery-inc.com>

Adult Children of Alcoholics (ACA) World Service Organization (WSO)

This is a 12-step, 12-tradition program of women and men who grew up in alcoholic or otherwise dysfunctional homes. Members meet with each other in a mutually respectful, safe environment and acknowledge common experiences.

P.O. Box 3216
Torrance, CA 90510
562-595-7831

<http://www.adultchildren.org>

Al-Anon/Alateen

This 12-step mutual support program provides groups for adults and teenagers who are the families and friends of alcoholics.

Al-Anon Family Group Headquarters, Inc.
1600 Corporate Landing Parkway
Virginia Beach, VA 23454-5617
757-563-1600

<http://www.al-anon.alateen.org>

Alcoholics Anonymous (AA)

This support group provides sponsorship and a 12-step program for life without alcohol.

P.O. Box 459
New York, NY 10163
212-870-3400

<http://www.aa.org>

Alcoholics Victorious

For a full description, refer to Faith-Based Organizations.

All Addicts Anonymous

This program is available to help all addicts who suffer from a range of addictions (alcohol, drugs, tobacco, sex, lying, etc.) recover. Participants adopt the Four Absolutes, the Twelve Steps, and the Ten Points as a way of life.

P.O. Box 500
Hankins, NY 12741
888-4 AAA GROUP (888-422-2476)

<http://www.alladdictsanonymous.org>

American Self-Help Sourcebook

This is a searchable database of more than 1,100 national, international, and online self-help support groups for addictions, bereavement, health, mental health, disabilities, abuse, parenting, caregiver concerns, and other stressful life situations.

Saint Clare's Health Services
100 East Hanover Avenue, Suite 202
Cedarknolls, NJ 07927-2020
973-326-6789

<http://www.mentalhelp.net/selfhelp>

Anesthetists in Recovery (AIR)

This is a network of recovering nurse anesthetists. Members support one another through phone support, information, and referrals to groups and treatment.

222 South Prospect Avenue
Park Ridge, IL 60068
847-692-7050

<http://www.aana.com/Resources.aspx?id=1224>

Association of Persons Affected by Addiction (APAA)

For a full description, refer to Recovery Support Programs.

Benzodiazepine Anonymous (BA)

This is a mutual support group for people in recovery from addiction to benzodiazepines (Xanax®, Halcion®, Valium®, Ativan®, Dalmane®, Librium®, etc.) or any other addicting prescription drug. BA uses its own lists of 12 steps and 12 goals.

11507 Cumpston Street
North Hollywood, CA 91601
818-667-1070

Calix Society

For a full description, refer to Faith-Based Organizations.

Chapter Nine Group of Hollywood, MD

This is a 12-step program of recovering couples in which partners work together. The group name comes from chapter nine of the Alcoholics Anonymous Big Book "The Family Afterwards," which is based on the belief that members of the family or couples should meet on the common ground of tolerance, understanding, and love.

1168 White Sands Drive
Lusby, MD 20657
410-586-1425

Chemically Dependent Anonymous (CDA)

This group's purpose is to carry the message of recovery to the chemically dependent person for those with a desire to abstain from alcohol and drugs.

P.O. Box 423
Severna Park, MD 21146
888-CDA-HOPE (232-4673)
<http://www.cdaweb.org>

Co-Anon Family Groups

This is a fellowship of men and women who are husbands, wives, parents, relatives, or close friends of someone who is chemically dependent. The program is primarily a 12-step program that combines self and mutual support systems.

P.O. Box 12722
Tucson, AZ 85732-2722
800-898-9985
<http://www.co-anon.org>

Cocaine Anonymous World Services

This is a fellowship of men and women who share their experience, strength, and hope with each other so that they may solve their common problem and help others to recover from their addiction.

3740 Overland Avenue, Suite C
Los Angeles, CA 90034
800-347-8998
310-559-5833
<http://www.ca.org>

Crystal Meth Anonymous

This program is a 12-step fellowship for those in recovery from addiction to crystal meth. The only requirement for membership is the desire to stop using crystal meth.

4470 West Sunset Boulevard, Suite 107 PMB 555
Los Angeles, CA 90027-6302
213-488-4455
<http://www.crystalmeth.org>

DC Bar – Lawyer's Assistance Program

For a full description, refer to Justice/Legal System.

Double Trouble Recovery, Inc.

This is a fellowship of men and women who share their experience, strength, and hope with each other so that they may solve their common problems and help others to recover from their particular substance use and mental health problems.

P.O. Box 245055
Brooklyn, NY 11224
718-373-2684
<http://www.doubletroubleinrecovery.org>

Dual Recovery Anonymous (DRA)

This is a self-help program for individuals who experience a dual disorder of chemical dependency and a psychiatric or emotional illness. The group is based on the principles of the 12 steps and the personal experiences of individuals in dual recovery.

P.O. Box 8107
Prairie Village, KS 66208
877-883-2332
913-991-2703
<http://www.draonline.org>

Emotions Anonymous (EA)

This is a 12-step organization, similar to Alcoholics Anonymous. The fellowship is composed of people who come together in weekly meetings for the purpose of working toward recovery from emotional difficulties. EA members are from many walks of life and are of diverse ages, economic statuses, and social and educational backgrounds. The only requirement for membership is a desire to become well emotionally.

P.O. Box 4245
St. Paul MN 55104-0245
651-647-9712
<http://emotionsanonymous.org>

Families Anonymous (FA)

This is a 12-step self-help recovery fellowship of support groups for relatives and friends of those who have alcohol, drug, or behavioral problems. The group is a nonprofit mutual help organization and is not affiliated with any religion or institution.

P.O. Box 3475
Culver City, CA 90231-3475
800-736-9805
<http://www.familiesanonymous.org>

Family Empowerment Network (FEN)

This network offers support, education, and training for families of children with fetal alcohol syndrome or fetal alcohol effects, as well as interested professionals. The group creates a network of families that support one another and hosts annual family retreats.

1100 Delaplaine Court

Madison, WI 53715

800-462-5254

608-261-1419

<http://pregnancyandalcohol.org/index.asp?menuID=142&firstlevelmenuID=142&siteID=1>

Fathers Against Drunk Driving (FADD)

This organization's mission is to reduce the alcohol-related deaths within the community. FADD has over 7,000 members nationwide, in addition to members in Canada and in Mexico.

311 Conley Street

Porterville, CA 93257

559-756-1748

<http://www.faddintl.org>

Fetal Alcohol Syndrome Family Resource Institute (FASFRI)

This is a grassroots coalition of families and professionals concerned with fetal alcohol syndrome effects. The group offers educational programs, brochures, information packets, group meetings, phone support, conferences, and referrals.

P.O. Box 2525

Lynnwood, WA 98036

800-999-3429

<http://www.fetalalcoholsyndrome.org>

Free-N-One

This support group teaches people to be free mentally and spiritually, as well as free from drugs and alcohol. It offers information and referrals, phone support, literature, and conferences.

538 South Overhill Drive

Los Angeles, CA 90043

323-359-0009

<http://www.free-n-one.org>

GROW International

This grassroots initiative is inspired by men and women across the globe to bring about growth through agricultural, educational, and social development. GROW International works alongside individuals, government, and organizations to bring transformation. The group believes that growth and development should move beyond the boundaries of race and political affiliation, and should penetrate regions across the globe, using the latest developmental, educational, and technological methods.

964-750-441-0835

<http://www.growinternationalonline.com>

Hypoics Not Anonymous (HNA)

HNA is for anyone with any type of addiction. The group uses the philosophy that addictions are caused by neurological mechanisms rather than personal weaknesses.

8779 Misty Creek Drive

Sarasota, FL 34241

941-929-0893

<http://www.nvo.com/hypoism/hypoicsnotanonymous>

Inter-Congregational Alcoholism Program (ICAP)

For a full description, refer to Faith-Based Organizations.

International Doctors in Alcoholics Anonymous (IDAA)

This is a group of approximately 4,500 recovering health care professionals of doctorate level who help one another achieve and maintain sobriety from addictions.

2616 NW 25th Place

Gainesville, FL 32605-2826

352-375-0240

<http://www.idaa.org>

International Lawyers in Alcoholics Anonymous (ILAA)

This organization serves as a clearinghouse for support groups for lawyers who are recovering from alcohol or other chemical dependencies.

416-925-0734

<http://www.ilaa.org>

International Pharmacists Anonymous (IPA)

This is a 12-step fellowship of pharmacists and pharmacy students recovering from any addiction.

11 Dewey Lane

Glen Gardner, NJ 08826-3102

908-537-4295

<http://mywebpages.comcast.net/ipa/ipapage.htm>

LifeRing

This international nonprofit organization offers sober, secular self-help. Members rely on the strength of each individual and the influence of sober conversation to abstain from alcohol and drugs. LifeRing welcomes people from all faiths, or none, but those beliefs are private. LifeRing brings people together via face-to-face and online support groups, and provides sobriety tools through original books, publications, and interactive online resources.

800-811-4142

<http://www.lifering.org>

Marijuana Anonymous World Services

This is a fellowship of men and women who share a desire to stop using marijuana. They accomplish their goals by using the basic 12 steps of recovery founded by Alcoholics Anonymous.

P.O. Box 2912
Van Nuys, CA 91404
800-766-6779

<http://www.marijuana-anonymous.org>

Men Against Destruction Defending Against Drugs and Social Disorder (MADD DADS Inc.)

This organization provides family activities, community education, speaking engagements, and “surrogate fathers” who listen to and care about street teens.

5732 Normandy Boulevard
Jacksonville, FL 32205
904-781-0905

<http://www.maddads.com>

Men for Sobriety

This organization’s purpose is to help all men recover from problem drinking through the discovery of self, gained by sharing experiences, hopes, and encouragement with other men in similar circumstances.

P.O. Box 618
Quakertown, PA 18951-0618
215-536-8026

Mothers Against Drunk Driving (MADD)

This group’s mission is to stop drunk driving, support victims, and prevent underage drinking.

511 East John Carpenter Freeway, Suite 700
Irving, TX 75062
800-GET-MADD (438-6233)

<http://www.madd.org>

MusiCares

This program provides a safety net of critical assistance for people in times of need. Its services and resources cover a wide range of financial, medical, and personal topics. It also focuses the resources and attention of the music industry on human service issues that directly impact the health and welfare of the music community.

11 West 42nd Street, 27th Floor
New York, NY 10036-8002
877-303-6962
212-245-7840

<http://www.musicares.com>

Nar-Anon/Narateen

This organization provides support for families and friends of drug users.

Nar-Anon Family Group Headquarters, Inc.
22527 Crenshaw Boulevard, Suite 200 B
Torrance, CA 90505
800-477-6291
310-534-8188

<http://www.nar-anon.org>

Narcotics Anonymous World Services (NA)

This is a nonprofit fellowship society of men and women for whom drugs had become a major problem. Membership is open to all, regardless of the particular drug or combination of drugs used.

P.O. Box 9999
Van Nuys, CA 91409
818-773-9999

<http://www.na.org>

National Association for Children of Alcoholics (NACoA)

This national nonprofit membership and affiliate organization is the advocate and voice for children and families impacted by alcoholism or drug dependency in the family. NACoA provides training, evidence-based programs, materials, and public policy guidance to facilitate substance use prevention and recovery support for all impacted family members.

11426 Rockville Pike, Suite 301
Rockville, MD 20852
888-55-4COAS (2627)
301-468-0985

<http://www.nacoa.org>

National Families in Action (NFIA)

This website includes the group’s Guide to the Drug-Prevention Movement, Guide to the Drug-Legalization Movement, Guide to Drug-Related State-Ballot Initiatives, and many substance-specific fact sheets about the effects of each drug on the brain. The site also offers the NFIA Drug Abuse Update digest.

<http://www.nationalfamilies.org>

National Family Partnership (NFP)

This partnership is a coalition of families working for substance use prevention. The group hosts a number of prevention activities, including the Red Ribbon Campaign and the Plant the Promise Campaign.

2490 Coral Way, Suite 501
Miami, FL 33145
800-705-8997
305-856-4886

<http://www.nfp.org>

National Women's Health Resource Center (NWHRC)

This nonprofit organization, which is dedicated to helping women make informed decisions about their health, encourages women to embrace healthy lifestyles to promote wellness and prevent disease. The NWHRC website offers an extensive alphabetical listing of health topics—such as HIV/AIDS, substance abuse, smoking, and violence against women—that provide science-based information on their topics. Each section includes a link to the source reference documents used for developing the topic materials.

<http://www.healthywomen.org>

Overcomers In Christ (OIC)

For a full description, refer to Faith-Based Organizations.

Overcomers Outreach, Inc.

For a full description, refer to Faith-Based Organizations.

Pills Anonymous (PA)

This self-help, self-supporting, anonymous 12-step program is based on Alcoholics Anonymous. It is designed for those who want to help themselves and others recover from chemical addiction.

5201 White Lane
New York, NY 10001
212-874-0700

Psychologists Helping Psychologists (PHP)

This mutual support group is for doctoral-level psychologists or students who have had a personal experience with alcohol or drugs.

3484 South Utah Street
Arlington, VA 22206
703-243-4470

Rational Recovery Systems (RRS)

This is a program of self-recovery from addiction to alcohol and other drugs through planned, permanent abstinence using Addictive Voice Recognition Technique (AVRT).

P.O. Box 800
Lotus, CA 95651
530-621-2667
<http://www.rational.org>

Remove Intoxicated Drivers (RID)

This group's mission is to deter impaired driving and teen binge drinking that often leads to intense trauma for all concerned. Its members advocate for victims, enablers of tough laws, and watchdogs for law enforcement and adjudication in the courts.

P.O. Box 520
Schenectady, NY 12301
888-283-5144
518-372-0034
<http://www.rid-usa.org>

Rockstar Superstar Project (RSSS)

This organization spreads awareness about the disease of addiction and celebrates recovery by offering programs that spread hope to those affected by addiction, especially youth. RSSS is about inspiring and encouraging others to believe in themselves and to dream catch; to make responsible choices by waking up every day and "doing the right thing." All of the projects through RSSS are based upon the idea of rebranding sobriety by creating venues to have those crucial conversations and by inspiring others to share their gifts with the world.

<http://www.rockstarsuperstarproject.com>

Schizophrenia Anonymous (SA)

This is a self-help support group for persons diagnosed with schizophrenia or a schizophrenia-related illness. SA was founded in the Detroit area in July 1985, and since that time, thousands of people have participated in meetings. There are currently more than 150 groups meeting throughout 31 States as well as Australia, Brazil, Canada, Mexico, France, India, and Venezuela.

P.O. Box 941222
Houston, TX 77094-8222
240-423-9432
http://www.sardaa.org/sa_main.html

SMART Recovery®

For a full description, refer to Recovery Support Programs.

Sobriety TV

This group produces, acquires, and licenses documentaries and independent films about addiction and recovery and publishes the content on YouTube.

301-455-8381
<http://www.sobriety.tv>

Social Workers Helping Social Workers (SWHSW)

This group supports people's recovery from alcohol or other chemical dependence, either their own or that of a significant other, among social workers, BSW/MSW, or MSW matriculating students. Social workers with other addictions are welcome to attend meetings.

1300 47th Street
Chicago, IL 60653
773-493-6940

Steppin' Out Radio

The goal of this one-of-a-kind radio show is to produce powerful radio broadcasts and provide an outlet for participants in 12-step meetings to share their stories.

845-359-3299
<http://www.steppinouradio.com>

Talk Therapy Television

For the full description, refer to Policy/Education.

Veterinarians in Recovery (VIR)

This group is a support network for veterinarians in recovery from alcoholism and other addictions. VIR provides information and referrals, phone support, and newsletters.

104 Maple Trace
Birmingham, AL 35244
651-261-4029

Policy/Education**A&E Network**

Inspired by the overwhelming response to its Emmy-nominated series Intervention, this television network created The Recovery Project, a multi-year campaign designed to generate widespread awareness that addiction is a treatable disease and recovery is possible.

<http://www.therecoveryproject.com>

Addiction Technology Transfer Center National Office (ATTC)

For a full description, please refer to Research.

Alliance for Recovery Advocates

This organization empowers people to become advocates for recovery.

6601 Grand Teton Plaza, Suite A
Madison, WI 53719
608-829-1032

<http://www.waaoda.org/advocacy.html>

American Council on Alcoholism (ACA)

This group is dedicated to educating the public about the effects of alcohol, alcoholism, alcohol abuse, and the need for prompt, effective, readily available, and affordable alcoholism treatment.

1000 East Indian School Road
Phoenix, AZ 85014
800-527-5344

<http://www.aca-usa.org>

**American Medical Association (AMA)
Office of Alcohol and Other Drug Abuse**

This collaboration of the AMA and The Robert Wood Johnson Foundation works to reduce underage alcohol use.

515 North State Street
Chicago, IL 60654
800-621-8335
312-464-5000

<http://www.ama-assn.org/ama/pub/category/3337.html>

American Public Human Services Association (APHSA)

This association develops, promotes, and implements public human service policies and practices that improve the health and well-being of families, children, and adults.

1133 19th Street NW, Suite 400
Washington, DC 20036
202-682-0100

<http://www.aphsa.org/Home>

Association of State and Territorial Health Officials

For a full description, refer to State and Local Resources.

Boston University Center for Psychiatric Rehabilitation

The Center is a research, training, and service organization dedicated to improving the lives of people who have psychiatric disabilities.

940 Commonwealth Avenue West
Boston, MA 02215
617-353-3549

<http://www.bu.edu/cpr>

Boston University School of Medicine (BUMC)

The school provides summaries of the latest clinically relevant research on alcohol and health, particularly in the area of health disparities. The newsletter "Alcohol and Health: Current Evidence" is published by BUMC.

801 Massachusetts Avenue, Second Floor
Boston, MA 02118
617-638-5300

<http://www.bu.edu/act/alcoholandhealth/index.html>

Boston University School of Public Health

The school works to improve the health of local, national, and international populations, particularly the disadvantaged, underserved, and vulnerable, through excellence and innovation in education, research, and service.

715 Albany Street
Boston, MA 02118
617-638-4640

<http://www.bumc.bu.edu>

Capitol Decisions, Inc.

This full-service government relations and public affairs firm provides counsel in distinct issue areas, including State and local government, public works, health care, and public health.

101 Constitution Avenue NW, Suite 675 East
Washington, DC 20001
202-638-0326

<http://www.capitoldecisions.com>

Center for Alcohol and Drug Research and Education

This international nonprofit organization provides public information and technical assistance, guidance, information, and expert service to individuals, organizations, governmental agencies, and a variety of nonprofit organizations in the private sector to improve the quality of their response to substance use disorders.

6200 North Charles Street
Baltimore, MD 21212-1112
410-377-8992

Community Anti-Drug Coalitions of America (CADCA)

For a full description, refer to State and Local Resources.

Corporation for Supportive Housing (CSH)

This organization was established in 1991 and advances its mission to help communities create permanent housing to prevent and end homelessness by providing advocacy, expertise, leadership, and financial resources to make it easier to create and operate supportive housing.

50 Broadway, 17th Floor
New York, NY 10004
212-986-2966
<http://www.csh.org>

Discover Films

This company produces award-winning health and educational videos for students, educators, and group leaders.

P.O. Box 1745
Covington, LA 70434
985-892-7571
<http://www.discover-films.com>

Drug Free America Foundation, Inc.

This drug prevention and policy organization is committed to developing, promoting, and sustaining global strategies, policies, and laws that will reduce illegal drug use, drug addiction, drug-related injury, and death. Drug Free America Foundation is a Non-Governmental Organization (NGO) in Special Consultative Status with the Economic and Social Council of the United Nations.

5999 Central Avenue, Suite 301
Saint Petersburg, FL 33710
727-828-0211
<http://www.dfaf.org>

Drug Strategies

This group develops publications and programs focused on effective approaches to the Nation's drug problems. It publishes a guide to treating youth with substance use disorders titled "Treating Youth: A Guide to Adolescent Drug Programs."

1616 P Street NW, Suite 220
Washington, DC 20036
800-559-9503
202-289-9070
<http://www.drugstrategies.org>

Entertainment Industries Council, Inc. (EIC)

This nonprofit organization works within the film, television, and music industries to promote the accurate depiction of health and social issues in entertainment productions.

EIC East
1856 Old Reston Avenue, Suite 215
Reston, VA 20190-3305
703-481-1414

EIC West
3000 West Alameda Avenue
Administrative Building, Suite 225
Burbank, CA 91523
818-840-2016
<http://www.eiconline.org>

Faces & Voices of Recovery

This national recovery advocacy organization mobilizes people in recovery from addiction to alcohol and other drugs, families, friends, and allies in campaigns to end discrimination and make recovery a reality for even more Americans.

1010 Vermont Avenue NW, Suite 618
Washington, DC 20005
202-737-0690
<http://www.facesandvoicesofrecovery.org>

Friends of SAMHSA

This organization engages in communication, education, and grassroots advocacy. Its membership is diverse, both geographically and ideologically, and its mission is to increase awareness and advance the agenda of this critical services administration. This independent coalition is dedicated to bringing awareness to the important role that behavioral health plays in overall health. It believes that SAMHSA should be a major contributor to the formation of health policy and also seeks to work with SAMHSA's leadership to improve their dialogue with those in the field, so that in the end the consumer will benefit. This organization is not affiliated with SAMHSA.

P.O. Box 1315
Annandale, VA 22003
571-426-0297
<http://www.friendsofsamhsa.org>

Georgetown University Health Policy Institute

This is a multi-disciplinary group of faculty and staff dedicated to conducting research on key issues in health policy and health services research. Institute members are engaged in a wide diversity of projects, focusing on issues relating to health care financing, the uninsured, Federal health insurance reforms, quality of care and outcomes research, mental health services research, and the impact of changes in the health care market on providers and patients.

P.O. Box 571444
3300 Whitehaven Street NW, Suite 5000
Washington, DC 20057-1485
202-687-0880
<http://ihcrp.georgetown.edu>

Georgetown University Health Policy Institute, Center on an Aging Society

This center is a nonpartisan public policy institute that fosters critical thinking about the implications of an aging society and studies the impact of demographic changes on public and private institutions and families of all ages.

P.O. Box 571444
3300 Whitehaven Street NW, Suite 5000
Washington, DC 20057
202-687-0880
<http://ihcrp.georgetown.edu/agingsociety>

Health Matrix, Inc.

This organization develops communications programs that inform the debate on key issues in science, policy, and health care.

7918 Jones Branch Drive, Suite 600
McLean, VA 22102
703-918-4930
<http://www.healthmatrixinc.com>

Join Together

For a full description, refer to State and Local Resources.

Kaiser Family Foundation

This organization is a nonprofit, private operating foundation focusing on the major health care issues facing the Nation. The Foundation is an independent voice and source of facts and analysis for policymakers, the media, the health care community, and the general public.

2400 Sand Hill Road
Menlo Park, CA 94025
650-854-9400
<http://www.kff.org>

Men Against Destruction Defending Against Drugs and Social Disorder (MADD DADS Inc.)

For a full description, refer to Mutual Support Groups.

Mothers Against Destructive Decisions (MADD)

For a full description, refer to Mutual Support Groups.

National Association of Attorneys General (NAAG)

NAAG offers information about statewide tobacco settlements.

2030 M Street NW, Eighth Floor
Washington, DC 20036
202-326-6000
<http://www.naag.org>

National Association of State Medicaid Directors (NASMD)

For a full description, refer to State and Local Resources.

National Association of State Mental Health Program Directors (NASMHPD)

For a full description, refer to Mental Health.

National Coalition for Mental Health Recovery (NCMHR)

For a full description, refer to Mental Health.

National Conference of State Legislatures (NCSL)

For a full description, refer to State and Local Resources.

National Governors Association Center for Best Practices

For a full description, refer to State and Local Resources.

National Civic League (NCL)

This nonprofit, nonpartisan membership organization is dedicated to strengthening citizen democracy by transforming democratic institutions. It fosters innovative community-building and political reform, assists local governments, and recognizes collaborative community achievement.

1889 York Street
Denver, CO 80206
303-571-4343
<http://www.ncl.org>

National Commission Against Drunk Driving (NCADD)

By uniting a broad-based coalition of public and private sector organizations and others, the Commission works to reduce impaired driving and its tragic consequences.

8403 Colesville Road, Suite 370
Silver Spring, MD 20910
240-247-6004

Odyssey Networks

For a full description, refer to Faith-Based organizations.

Parent/Professional Advocacy League (PAL)

This group provides support, education, and advocacy around issues related to children's mental health.

45 Bromfield Street, 10th floor
Boston, MA 02018
617-542-7860
<http://ppal.net/default>

Physicians and Lawyers for National Drug Policy

This organization conducts research and provides information to the public on drug use disorders, and works to put a new emphasis on the national drug policy by substantially refocusing the investment in the prevention and treatment of harmful drug use.

PLNDP National Project Office
Center for Alcohol and Addiction Studies
Brown University Box G-S121-4
Providence, RI 02912
401-863-6635
<http://www.plndp.org>

Recovery Living Network

This global communications network focuses on addiction recovery and prevention, using the power of personal experience, celebrity influence, and mass media communication to help individuals when alcohol, drugs, or other excessive behaviors have become a problem in their lives. Its mission is to remove the stigma from the public psyche to change the perception and image of addiction by talking about it openly and honestly, and by sharing personal stories of hope and inspiration.

949-887-0242
310-600-3079

Recovery Network Foundation (RNF)

This foundation develops recovery-dedicated projects in print, radio, TV, film, and video formats. "Under the Influence: The Film Series" is a national touring festival that showcases films in which addiction and recovery play leading roles.

P.O. Box 8969
Briarcliff Manor
New York, NY 10510-8969
914-941-2863
<http://www.recoverynetworkfoundation.org>

RecoveryNC

*Initiated in September of 2008 to coincide with the celebration of **Recovery Month**, this campaign allows North Carolinians in recovery to emerge together, along with their families, friends, advocates, and the treatment and recovery provider community.*

1730 Varsity Drive, Suite 105
Raleigh, NC 27606
919-802-7972
<http://www.recoverync.org>

ReNew Media, LLC

This is a multi-media company that serves the addiction recovery community. Currently, the company delivers its content through various digital and print means, including its website, mobile applications, social media, and its national print magazine, Renew.

2030 West Barry Avenue
Chicago, IL 60618
773-883-4474
<http://www.reneweveryday.com>

Save Our Society from Drugs

This is a legislative and congressional affairs organization that fights against permissive drug policy that negatively impacts society.

5999 Central Avenue, Suite 301
St. Petersburg, FL 33710
727-828-0211
<http://www.saveoursociety.org>

Sobriety TV

For a full description, refer to Mutual Support Groups.

Steppin' Out Radio

For a full description, refer to Mutual Support Groups.

Talk Therapy Television

Talk Therapy Television, Inc., or Talk Therapy TV, is a private, not-for-profit organization that produces and broadcasts weekly television programming dedicated to promoting behavioral health awareness, treatment, and recovery. Additionally, Talk Therapy TV promotes creative and innovative ideas that generate public dialogue and discussion, and reduce the stigma associated with these disorders.

95-21 106 Street
Ozone Park, NY 11416
631-780-2807
<http://www.talktherapytv.org>

United for Recovery

This nonprofit organization is an advocacy group for people in treatment and in recovery. It works to broaden public awareness and understanding of addiction and recovery and increase opportunities for people to get the help they need.

210 Gateway, Third Floor
Lincoln, NE 68505
310-704-1336
<http://www.unitedforrecovery.org>

U.S. Conference of Mayors

For a full description, refer to State and Local Resources.

Prevention

American Council for Drug Education (ACDE)

This council is a prevention and education agency that develops programs and materials based on the most current scientific research on drug use and its impact on society.

50 Jay Street
Brooklyn, NY 11201
718-222-6641
<http://www.acde.org>

Campaign for Tobacco-Free Kids

For a full description, refer to Youth Programs.

FACE® Initiative

The national nonprofit organization is focused on alcohol issues. It works in media development and training for the reduction of alcohol-related problems. Since 1989, FACE® has stood for Facing Alcohol Concerns through Education, but it no longer uses a full name. FACE® offers trainings and products, including full-color bookmarks, posters, and cards.

<http://www.faceproject.org>

Fetal Alcohol and Drug Unit

This group is dedicated to the prevention, intervention, and treatment of fetal alcohol syndrome and fetal alcohol effects.

180 Nickerson Street, Suite 309
Seattle, WA 98109
206-543-7155
<http://depts.washington.edu/fadu>

Five Moms Campaign

This group of five women is spreading the word about cough medicine abuse. The campaign's mission is to have each person tell five more moms about this nationwide problem, who will then tell another five, and another five beyond that.

<http://www.fivemoms.com>

Hands Across Cultures

This organization works to improve the health, education, and well-being of the people of Northern New Mexico through family-centered approaches deeply rooted in the multicultural traditions of their communities.

P.O. Box 2215
Española, NM 87532
505-747-1889
<http://www.handsacrosscultures.org>

Leadership to Keep Children Alcohol Free Foundation

The purpose of this coalition of Governors' spouses and public and private organizations is to prevent alcohol use by children between nine and 15 years old.

<http://www.alcoholfreechildren.org>

Marin Institute for the Prevention of Alcohol and Other Drug Problems

This policy-focused advocacy organization offers training and publications primarily concerned with alcohol marketing practices and counter strategies, and works closely with the World Health Organization and other groups to promote environmental prevention.

<http://www.marininstitute.org>

National Association of State Alcohol and Drug Abuse Directors (NASADAD)

For a full description, refer to State and Local Resources.

National Center for Prevention and Research Solutions (NCPRS)

This center operates a drug prevention and education program called Race Against Drugs, and has a nationwide network of volunteers and DEA/FBI agents assisting the program by conducting community and school events throughout the country.

3132 South Ridgewood Avenue
South Daytona, FL 32119
86-NCPRS-NOW (62777-669)
386-760-2254
<http://www.ncprs.org>

National Education Association Health Information Network (NEAHIN)

This association offers resources on youth alcohol and drug use prevention.

1201 16th Street NW, Suite 216
Washington, DC 20036
202-822-7570
<http://www.neahin.org>

National Inhalant Prevention Coalition (NIPC)

This public-private effort promotes awareness and recognition of the under-publicized problem of inhalant use. The coalition serves as an inhalant referral and information clearinghouse, stimulates media coverage about inhalant issues, develops informational materials and a newsletter, provides training and technical assistance, and leads a week-long national grassroots education and awareness campaign.

506 Barton Avenue
Chattanooga, TN 37405
800-269-4237
423-265-4662
<http://www.inhalants.org>

National Organization on Fetal Alcohol Syndrome (NOFAS)

This organization provides education and awareness about the prevention of birth defects caused by alcohol consumption during pregnancy.

1200 Eton Court NW, Third Floor
Washington, DC 20007
202-785-4585
<http://www.nofas.org>

National Parent Teacher Association (PTA) Drug and Alcohol Abuse Prevention Project

This project presents drug facts, parenting tips, and family activities on protecting children from drugs and alcohol.

541 North Fairbanks Court, Suite 1300
Chicago, IL 60611-3396
312-670-6782
<http://www.pta.org>

Partnership at Drugfree.org

For a full description, refer to Youth Programs.

Partnership for Prevention (PFP)

This organization seeks to coordinate and focus the efforts of members to make prevention a visible and viable means to improving the Nation's health. The PFP website includes a Tools and Resources area with archived files of publications of interest to substance abuse prevention professionals and advocates. Publications include "What Policymakers Need to Know About Cost Effectiveness" and "Guide to Smart Prevention Investments."

<http://www.prevent.org>

Society for Adolescent Medicine

This organization offers advice for teens and parents on how to avoid alcohol and drug dependency.

111 Deer Lake Road, Suite 100
Deerfield, IL 60015
847-753-5226
<http://www.adolescenthealth.org>

Society for Prevention Research

This professional organization focuses on the advancement of science-based prevention programs and policies through empirical research. The organization's members include scientists, practitioners, advocates, administrators, and policymakers. The group holds an annual meeting and publishes Prevention Science Journal.

<http://www.preventionresearch.org>

Substance Abuse Librarians and Information Specialists (SALIS)

Established in 1978, this international association of individuals and organizations has special interests in the exchange and dissemination of alcohol, tobacco, and other drug (ATOD) information. SALIS holds an annual conference, publishes a quarterly newsletter, maintains a members-only listserv facilitating rapid exchanges of substance abuse information, and maintains a comprehensive list of bibliographic, statistical, and related databases covering all aspects of substance abuse. The group works closely with its counterpart association in Europe, ELISAD (<http://www.elisad.eu>).

<http://www.salis.org>

Support for Addictions Prevention and Treatment in Africa Foundation (SAPTAF)

This is a nonprofit organization focused on support for prevention and treatment in Africa from alcohol and other drug problems, serving as a resource to improve the well-being of individuals, families, and communities.

1040 Main Street, #103
Napa, CA 94559
917-892-0423
<http://www.sapta.or.ke/home>

Provider and Professional Organizations

ACTION Campaign

This campaign is a cross-sector partnership among nongovernmental organizations, foundations, and Government agencies, including SAMHSA, the State Associations of Addiction Services, the Network for the Improvement of Addiction Treatment, and the National Association of State Alcohol and Drug Abuse Directors (NASADAD).

Mechanical Engineering Room 4021
1513 University Avenue
Madison, WI 53706
608-890-1445
<http://www.actioncampaign.org>

Alcoholism and Substance Abuse Providers of New York State (ASAPNY)

This nonprofit membership association consists of coalitions, programs, and agencies throughout New York State that provide substance use disorder prevention, treatment, and research.

1 Columbia Place, Suite 400
Albany, NY 12207
518-426-3122
<http://www.asapnys.org>

American Academy of Addiction Psychiatry (AAAP)

The academy offers continuing education for substance use disorder treatment professionals.

400 Massasoit Avenue, Suite 307, Second Floor

Providence, RI 02914

401-524-3076

<http://www.aaap.org>

American Academy of Child and Adolescent Psychiatry (AACAP)

This academy provides information for AACAP members, parents, and families about the treatment of developmental, behavioral, and mental health problems.

3615 Wisconsin Avenue NW

Washington, DC 20016

202-966-7300

<http://www.aacap.org>

American Academy of Pediatrics (AAP)

This organization serves as a forum for pediatricians to address children's health needs.

141 Northwest Point Boulevard

Elk Grove Village, IL 60007

847-434-4000

<http://www.aap.org>

American Association for Marriage and Family Therapy (AAMFT)

This association represents the professional interests of more than 25,000 marriage and family therapists throughout the United States, Canada, and abroad.

112 South Alfred Street

Alexandria, VA 22314-3061

703-838-9808

<http://www.aamft.org>

American Association for the Treatment of Opioid Dependence (AATOD)

This group was founded in 1984 to enhance the quality of patient care in treatment programs by promoting the growth and development of comprehensive methadone treatment services throughout the United States.

225 Varick Street, Fourth Floor

New York, NY 10014

212-566-5555

<http://www.aatod.org>

American Association of Pastoral Counselors (AAPC)

AAPC represents and sets professional standards for more than 3,000 pastoral counselors and 100 pastoral counseling centers in North America and around the world. This association provides and promotes theologically informed, spiritually sensitive, ethically sound, and clinically competent counseling as an extension of the ministry of faith communities.

9504A Lee Highway

Fairfax, VA 22031

703-385-6967

<http://www.aapc.org>

American Dental Association (ADA)

This group is the world's oldest and largest national dental society, representing more than 70 percent of dentists throughout the United States. The ADA is committed to helping its members better identify, understand, and accommodate the special health care needs of patients with substance use disorders, and to facilitating the journey of recovery for its member dentists and their respective office staffs.

211 East Chicago Avenue

Chicago, IL 60611-2678

312-440-2500

<http://www.ada.org>

American Legacy Foundation (Legacy)

This foundation works with those interested in decreasing the use of tobacco by Americans. Among Legacy's top priorities are to reduce tobacco use by young people and to support programs that help people quit smoking. Legacy works to limit people's exposure to secondhand smoke. Legacy supports the Tobacco Technical Assistance Consortium to help develop and evaluate new tobacco prevention programs and provide technical support.

<http://www.americanlegacy.org>

American Medical Women's Association

This national association offers publications and information related to women's health.

100 North 20th Street, Fourth Floor

Philadelphia, PA 19103

215-320-3716

<http://www.amwa-doc.org>

American Mental Health Counselors Association (AMHCA)

This association works exclusively for licensed mental health counselors by advocating for legislation that expands, enhances, and protects the right to practice, promotes mental health awareness; and builds the profession of mental health counseling nationally.

801 North Fairfax Street, Suite 304

Alexandria, VA 22314

800-326-2642

703-548-6002

<http://www.amhca.org>

American Psychiatric Association

This association offers mental health information for professionals, individuals, and families.

1000 Wilson Boulevard, Suite 1825

Arlington, VA 22209

888-357-7924

703-907-7300

<http://www.psych.org>

American Psychiatric Nurses Association (APNA)

This professional organization with 7,000 members is committed to the specialty practice of psychiatric mental health nursing, health and wellness promotion through identification of mental health issues, prevention of mental health problems, and the care and treatment of people with psychiatric disorders. APNA is a resource for psychiatric mental health nursing and was recently named as one of American Chronicle's Top 10 Industry Associations in Nursing.

1555 Wilson Boulevard, Suite 530

Arlington, VA 22209

703-243-2443

<http://www.apna.org/i4a/pages/index.cfm?pageid=1>

American Psychological Association (APA)

This organization is the largest scientific and professional organization representing psychology in the United States. Its membership includes more than 150,000 researchers, educators, clinicians, consultants, and students.

750 First Street NE

Washington, DC 20002

800-374-2721

202-336-5500

<http://www.apa.org>

American Public Health Association (APHA)

This association influences policies and priorities to set public health practice standards and to improve health worldwide.

800 Eye Street NW

Washington, DC 20001

202-777-2742

<http://www.apha.org>

APHA, Alcohol, Tobacco, and Other Drugs Section (ATOD)

The site offers downloadable newsletters; each year's program for the Alcohol, Tobacco and Other Drugs (ATOD) Section at the APHA Convention; and a leadership directory of email links to active members of the ATOD Section.

<http://www.apha.org/membergroups/sections/aphasections/atod>

American Society of Addiction Medicine (ASAM)

This is an association of 3,000 physicians from across America dedicated to improving the treatment of alcoholism and other addictions, educating physicians and medical students, promoting research and prevention, and enlightening and informing the medical community and the public about these issues.

4601 North Park Avenue

Upper Arcade, Suite 101

Chevy Chase, MD 20815

301-656-3920

<http://www.asam.org>

Association for Medical Education and Research in Substance Abuse (AMERSA)

This association offers training and materials for medical professionals and students and all primary health professional disciplines.

125 Whipple Street, Suite 300

Providence, RI 02908

401-243-8460

<http://www.amersa.org>

Association of Lesbian and Gay Addiction Professionals and Their Allies (NALGAP)

This membership organization, founded in 1979, is dedicated to the prevention and treatment of alcoholism, substance use, and other addictions in lesbian, gay, bisexual, and transgender communities.

1001 North Fairfax Street, Suite 201

Alexandria, VA 22314

800-548-0497

<http://www.nalgap.org>

Child Welfare League of America (CWLA)

For a full description, refer to Family and Social Services.

Community Intervention

This organization offers educational materials, training, and consultation for professionals working with children ages 5 to 18.

2412 University Avenue SE, Suite B

Minneapolis, MN 55414

800-328-0417

<http://www.communityintervention.org>

Drug Strategies

For a full description, refer to Policy/Education.

Health Communications, Inc. (HCI)

Founded in 1976, this company publishes several new titles per year for professionals and consumers. It provides information and education to addiction and mental health professionals through Counselor, The Magazine for Addiction Professionals.

3201 SW 15th Street
Deerfield Beach, FL 33442
800-851-9100

<http://www.counselormagazine.com>

Institute for the Advancement of Human Behavior

This organization provides continuing medical education for mental health, chemical dependency, and substance use disorder treatment providers in the United States and Canada.

4370 Alpine Road, Suite 209
Portola Valley, CA 94028
800-258-8411

<http://www.iahb.org>

**International Certification and Reciprocity Consortium/
Alcohol and Other Drug Abuse**

This nonprofit voluntary membership organization is comprised of certifying agencies involved in credentialing alcohol and drug use counselors, clinical supervisors, and prevention specialists.

298 South Progress Avenue
Harrisburg, PA 17109
717-540-4457

<http://www.icrcaoda.org>

International Nurses Society on Addictions

This professional specialty organization offers information and education for nurses concerning prevention, intervention, treatment, and management of substance use disorders.

P.O. Box 14846
Lenexa, KS 66285-4846
877-646-8672

<http://www.intnsa.org>

**National Association for Alcoholism and Drug
Abuse Counselors (NAADAC): The Association for
Addiction Professionals**

This national nonprofit membership organization, with over 52 affiliates across the United States, American Territories, and internationally, focuses on empowering addiction-focused professionals to achieve excellence through education, advocacy, knowledge, standards of practice, ethics, and professional development, and research.

1001 North Fairfax Street, Suite 201
Alexandria, VA 22314
800-548-0497
703-741-7686

<http://www.naadac.org>

**National Association of Addiction Treatment Providers
(NAATP)**

This association represents private substance use disorder treatment programs throughout the United States.

313 West Liberty Street, Suite 129
Lancaster, PA 17603
717-392-8480

<http://www.naatp.org>

National Association of Peer Specialists (NAPS)

The National Association of Peer Specialists is an organization dedicated to promoting peer specialists throughout the United States. We are a group of dedicated peer specialists seeking ways to improve the effectiveness of the mental health system through the hiring of other peer specialists.

755 Alta Dale SE
Ada, MI 49301
616-676-9230

<http://www.naops.org>

National Association of Rural Health Clinics

This association offers information on how to improve the delivery of quality, cost-effective health care in rural, underserved areas.

Two East Main Street
Fremont, MI 49412
866-306-1961

<http://www.narhc.org>

National Association of School Psychologists

The Association provides resources focused on enhancing the mental health and educational competence of all children.

4340 East West Highway, Suite 402
Bethesda, MD 20814
301-657-0270

<http://www.nasponline.org>

National Association of Social Workers (NASW)

As the largest membership organization of professional social workers in the world, this organization works to enhance the professional growth and development of its members, to create and maintain professional standards, and to advance sound social policies.

750 First Street NE, Suite 700
Washington, DC 20002
202-408-8600

<http://www.socialworkers.org>

National Council for Community Behavioral Healthcare

This group is the national association of community providers who together care for 6 million adults and children across the country who suffer from mental illnesses, developmental disabilities, and substance use disorders. Its members employ more than 250,000 staff and provide mental health and substance use disorder treatment, rehabilitation, housing, and community support services.

1701 K Street NW, Suite 400

Washington, DC 20006

202-684-7457

<http://www.thenationalcouncil.org>

National Inhalant Prevention Coalition (NIPC)

For a full description, refer to Prevention.

Network for the Improvement of Addiction Treatment (NIATx)

This network is a partnership between the Robert Wood Johnson Foundation's Paths to Recovery program, the Center for Substance Abuse Treatment's Strengthening Treatment Access and Retention (STAR) program, the National Institute on Drug Abuse, and a number of independent addiction treatment organizations. It works with treatment providers to make more efficient use of their capacity and shares strategies for improving treatment access and retention.

1513 University Avenue

Mechanical Engineering, Room 4121

Madison, WI 53706

608-265-0063

<http://www.niatx.net>

**Portland State University
Graduate School of Social Work**

This program offers the only graduate social work education programs in Oregon accredited by the Council on Social Work Education. The three major functions of the school are teaching, research, and community service.

Graduate School of Social Work

Portland State University

P.O. Box 751

Portland, OR 97207

503-725-4712

<http://www.pdx.edu/ssw>

ReStart, Inc.

This nationally accredited, full-service behavioral health care provider offers a wide range of diagnostic and treatment services tailored to meet individual needs, including community support services for adults, children, and adolescents. It offers diagnostic assessments, child and adult therapy, families and group sessions, assessments and counseling, residential treatment for girls, behavioral therapy, assertive community treatment teams, psychological evaluations, intensive in-home services, and community support teams.

2602 Courtier Drive

Greenville, NC 27858

252-355-4725

<http://www.restarthumanservices.com>

Society for Adolescent Substance Abuse Treatment Effectiveness

This is a voluntary and informal network of researchers, evaluators, providers, and policymakers interested in pooling their knowledge and resources to improve the field.

301-587-1600

<http://www.chestnut.org/LI/APSS/SASATE>

Recovery Support Programs

National

Asian Counseling and Referral Service, Inc.

This service provides a culturally competent, linguistically accessible community recovery center for Asian and Pacific Americans and other immigrants and refugees with a history of substance use disorders.

3639 Martin Luther King Jr. Way South

Seattle, WA 98144

206-695-7600

<http://www.acrs.org>

Association of Persons Affected by Addiction (APAA)

This nonprofit recovery community organization is designed to engage the faces and voices of the recovery community in reducing stigma and provides peer-to-peer recovery community support services.

2438 Butler Street, Suite 120

Dallas, TX 75235

214-634-APAA (2722)

<http://www.apaarecovery.org>

Co-Occurring Center for Excellence (COCE)

For a full description, refer to Recovery/Treatment.

<http://coce.samhsa.gov>

Cyber Recovery Fellowship

This website offers faith-based support forums for people in recovery.

<http://www.cyberrecovery.net/forums>

**Dual Diagnosis Anonymous World Services, Inc.:
Dual Diagnosis Anonymous Expansion Project**

This project addresses the needs of individuals diagnosed with co-occurring substance use disorders and mental health problems.

P.O. Box 8107
Prairie Village, KS 66208
909-888-9282

<http://draonline.org>

eGetGoing

eGetgoing's mission is to bring high-quality, affordable, and confidential treatment to a much larger segment of the population, where and when they need it.

20400 Stevens Creek Boulevard
Cupertino, CA 95014
877-757-6237
408-998-3040

<http://www.egetgoing.com>

Foundation for Recovery

The Foundation for Recovery promotes the positive impact recovery has in the community and in the lives of individuals and families affected by substance use and/or mental health conditions. It's programs, services, and partnerships open pathways for recovery by removing social barriers and creating opportunities for those seeking recovery.

4750 West Sahara Avenue, Suite 10
Las Vegas, NV 89102
702-257-8199

<http://www.forrecovery.org>

KeepComingBack.com

This website provides the latest news and research about addiction and recovery, interviews with experts on recovery, and the ability to join a network of people seeking recovery.

<http://www.keepcomingback.com>

**Lesbian, Gay, Bisexual and Transgender Community
Center SpeakOUT!: Voices for Recovery**

This center works to create safe and welcoming spaces for lesbian, gay, bisexual, and transgender people in recovery.

208 West 13th Street
New York, NY 10011
212-620-7310

<http://www.gaycenter.org>

National Home Infusion Association (NHIA)

This trade association represents and advances the interests of organizations that provide infusion and specialized pharmacy services and products to the entire spectrum of home-based patients.

100 Daingerfield Road
Alexandria, VA 22314
703-549-3740

<http://www.nhianet.org>

**National Rural Alcohol and Drug Abuse Network, Inc.
(NRADAN)**

This private, nonprofit foundation promotes networking between rural programs and professionals, and provides liaisons to key Federal and State government agencies and private resources.

University of Wisconsin-Stout
221 10th Avenue East
Menomonie, WI 54751-0790

715-532-9030

<http://www.uwstout.edu/outreach/nri>

Shouting Inside

This website helps young people who misuse substances share their stories and their struggles with like-minded young people.

<http://www.shoutinginside.com>

SMART Recovery®

This international nonprofit organization offers free, self-empowering, science-based mutual help groups for abstaining from any substance or activity addiction. The SMART Recovery 4-Point Program® helps people recover from all types of addictive behaviors, including alcohol, drugs, substance abuse, gambling addiction, and addiction to other substances and activities. SMART Recovery® currently sponsors more than 600 face-to-face meetings around the world, and more than 16 online meetings per week.

7304 Mentor Avenue, Suite F

Mentor, OH 44060

866-951-5357

440-951-5357

<http://www.smartrecovery.org>

Sober.com

This website is committed to providing those in need of drug rehab programs, alcoholism treatment, and substance abuse services with the most accurate information available.

<http://www.sober.com>

Sober Recovery Community

This website offers support forums for people in recovery, as well as friends and family members affected by someone's substance use.

<http://www.soberrecovery.com/forums>

TASC, Inc. of Illinois

This not-for-profit organization conducts research, advances public policy, and provides services to ensure that individuals with substance use and mental health problems receive treatment and access to recovery.

1500 North Halsted Street
Chicago, IL 60642
312-787-0208
<http://www.tasc.org>

Women for Sobriety, Inc.

This nonprofit organization is dedicated to helping women overcome alcoholism and other addictions.

P.O. Box 618
Quakertown, PA 18951-0618
215-536-8026
<http://www.womenforsobriety.org>

Alaska**Southcentral Foundation: Alaska Women's Recovery Project (AWRP)**

This project provides leadership training, mentoring, and support for recovering women.

4501 Diplomacy Drive
Anchorage, AK 99508
907-729-4955
<http://www.southcentralfoundation.com>

Arizona**Community Bridges, Inc.**

This program offers treatment and recovery to homeless, indigent, and working poor adults. It also provides prevention, education, and training services to the public.

1811 South Alma School Road, Suite 160
Mesa, AZ 85210
480-831-7566
<http://www.communitybridgesaz.org>

Pascua Yaqui Tribe of Arizona: Community Change Oriented Recovery Effort (C-CORE)

This program provides quality, competent, and culturally compatible peer services to tribal and community members.

7474 South Camino De Oeste
Tucson, AZ 85757
520-883-5000
<http://www.pascuayaqui-nsn.gov>

Pinal Hispanic Council: Proyecto Bienestar (Project WellBeing)

This project seeks to empower members to assist others, motivating them to sustain recovery through education and training.

712 North Main Street
Eloy, AZ 85231
520-466-7765
<http://www.pinalhispaniccouncil.org/grants/RCSPGrant.htm>

Pima Prevention Partnership: A Recovery Movement For and About Young People

This partnership aims to reduce relapse and supports wellness using a strength-based approach to recovery for Native Americans.

2525 East Broadway, Suite 100
Tucson, AZ 85716
520-624-5800
<http://www.thepartnership.us>

Tohono O'Odham Nation

This tribal government is establishing a recovery community service project and peer-to-peer system.

P.O. Box 837
Sells, AZ 85634
520-603-2477
<http://www.tonation-nsn.gov>

Women in New Recovery: Our Common Welfare

This recovery community organization is a residential treatment facility for women in Arizona and New Mexico.

860 North Center Street
Mesa, AZ 85201
480-464-5764
<http://www.winr.org>

California**Council on Alcoholism and Drug Abuse**

The council provides peer-led recovery support services in Santa Barbara, CA.

232 East Canon Perdido Street, P.O. Box 28
Santa Barbara, CA 93102
805-963-1433
<http://www.cadasb.org>

Walden House, Inc.: PROSPER (Peers Reaching Out Supporting Peers to Embrace Recovery)

This project provides strength-based peer-to-peer recovery services to people and their families who face the challenges of recovery and re-entry into society from prison.

1550 Evans Avenue
San Francisco, CA 94124
415-554-1100
<http://www.waldenhouse.org>

Colorado

White Bison, Inc.

For a full description, refer to Native Americans under Culture-Specific Resources.

Connecticut

Connecticut Community for Addiction Recovery (CCAR)

A community of people in recovery, family members, friends, and allies, this group is organized to put a positive face and voice on recovery from substance use disorders.

198 Wethersfield Avenue

Hartford, CT 06114

860-224-2227

<http://www.ccar.us>

Connecticut Department of Mental Health Addiction Services (DMHAS)

For a full description, refer to Mental Health.

Georgia

Recovery Consultants of Atlanta, Inc.

For a full description, refer to Faith-Based Organizations.

Hawaii

Waianae Men in Recovery, The

This program offers what is known as a “clean and sober house,” which provides a clean and sober living environment for men in recovery from alcoholism and other addictions.

P.O. Box 458

Waianae, HI 96792

wmir@hawaii.rr.com

Kentucky

Heartland Cares, Inc.

This project promotes effective long-term recovery among HIV-positive people in rural areas of Kentucky and Illinois.

3025 Clay Street

Paducah, KY 42001

877-444-8183

270-444-8183

<http://www.hcares.org>

Massachusetts

Massachusetts Organization for Addiction Recovery (MOAR)

This organization is a collective voice of people in recovery, families, and friends who are helping each other educate the public about the value of living in recovery and the resources to support recovery.

c/o Boston ASAP

30 Winter Street, Third Floor

Boston, MA 02108

617-423-6627

<http://www.moar-recovery.org>

Western Massachusetts Training Consortium: The RECOVER Project

This peer-led recovery community helps those in recovery assume meaningful roles in their towns and neighborhoods.

187 High Street, Suite 204

Holyoke, MA 01040

413-536-2401

Michigan

Clark Associates: The Detroit Recovery Project

This organization offers useful information, training, and city-wide support and resources for making communities safe and drug free.

1151 Taylor Street, Room 317B

Detroit, MI 48202

313-876-0770

<http://www.drugfreedetroit.org>

National Council on Alcoholism and Drug Dependence – Greater Detroit Area (NCADD-GDA)

This council provides effective alcohol and drug abuse intervention, prevention, and treatment services to children and adults with substance use disorders in the Detroit area.

2400 E. McNichols

Detroit, MI 48212

313-868-1340

313-865-8951 (fax)

<http://www.ncadd-detroit.org>

Minnesota

Minnesota Recovery Connection (MRC)

Minnesota Recovery Connection is a community comprised of individuals, families, and entire communities seeking recovery. MRC offers hope and help for recovery, for those who need it, for those who want it, and for those who can give it.

253 State Street
St. Paul, MN 55107
651-233-2080

<http://www.minnesotarecovery.org>

Nevada

Center for the Application of Substance Abuse Technologies (CASAT)

Frontier Recovery Network

The staff and peer volunteers of the Frontier Recovery Network assist recovering individuals in Reno, NV, with education about or referral for treatment, housing, transportation, child care, and life skills.

Mail Stop 279
University of Nevada, Reno
Reno, NV 89557-0258
775-784-6265

<http://casat.unr.edu>

New Hampshire

New England Institute of Addiction Studies (NEIAS) and New England Alliance for Addiction Recovery (NEAAR)

Expanding the New England Alliance for Addiction Recovery

This collaboration of statewide recovery community organizations is dedicated to the promotion and enhancement of recovery and to improving public awareness about substance use disorders.

75 Stone Street
Augusta, ME 04330
207-621-2549

<http://www.neias.org>

New Jersey

National Council on Alcoholism and Drug Dependence – New Jersey, Inc. (NCADD-NJ): Friends of Addiction Recovery-New Jersey (FOAR-NJ)

This organization promotes recovery and builds leadership skills and capacity in the recovery community.

360 Corporate Boulevard
Robbinsville, NJ 08691
609-689-0599

<http://www.ncaddnj.org>

New York

AIDS Service Center of Lower Manhattan, Inc. HIGH (How I Get Help on Recovery)

This center facilitates the creation of Empowerment, a peer-delivered recovery community organization.

41 East 11th Street, Fifth Floor
New York, NY 10003

212-645-0875

<http://www.ascnyc.org>

Center for Community Alternatives: Recovery Network of New York

This project organizes recovering individuals who have a history of involvement in the criminal justice system to improve the delivery of treatment to offenders and ex-offenders and to help reduce the dual stigmatization of ex-offenders in recovery.

115 East Jefferson Street, Suite 300
Syracuse, NY 13202

315-422-5638, ext. 222

<http://www.communityalternatives.org>

Exponents, Inc.

This minority-led organization is dedicated to improving the quality of life of individuals affected by drug addiction, incarceration, and HIV/AIDS. Programs assist individuals and their families through difficult transitions from addiction to recovery, from incarceration to civilian life, and from welfare to work.

151 West 26th Street, Third Floor
New York, NY 10001

212-243-3434

<http://www.exponents.org>

Fortune Society

This project provides peer-to-peer recovery support services to ex-prisoners and their families who are working toward recovery.

29-76 Northern Boulevard
Long Island City, NY 11101

212-691-7554

<http://www.fortunesociety.org>

GROUP Ministries, Inc.

This project provides peer recovery support services focused primarily on African Americans and other people of color.

1333 Jefferson Avenue
Buffalo, NY 14208

716-883-4367, ext. 21

khsmith101@aol.com

National Alliance for Medication Assisted Recovery (NAMA) Recovery

For a full description, refer to Recovery/Treatment.

Rockland Council on Alcoholism & Other Drug Dependence, Inc.: Friends of Recovery-Rockland (FOR-Rockland)

The council challenges stereotypes about addiction recovery.

25 Smith Street, Suite 101

Nanuet, NY 10954

845-215-9788

<http://www.rcadd.org>

North Carolina

Eastern Band of Cherokee Indians:

A-Ye-Ga: Awakening the Recovery Spirit

This recovery community organization in Cherokee, NC, is of, by, and for the Eastern Band of Cherokee Indians.

P.O. Box 455

Cherokee, NC 28719

828-497-7000

<http://www.nc-cherokee.com>

RecoveryNC

For a full description, refer to Policy/Education.

Voices for Addiction Recovery, NC, Inc.

This organization serves addicted, single, pregnant women; addicted teenagers; adults who have become part of the criminal justice system; people with HIV/AIDS and their support organizations; and the growing Hispanic population, who are struggling with addiction issues.

P.O. Box 2925

Asheville, NC 28802

828-252-9022

voicesnc@aol.com

Ohio

Northern Ohio Recovery Association (NORA)

This project provides faith-based recovery support services in a three-county area.

3746 Prospect Avenue

Cleveland, OH 44115

216-391-6672

<http://www.norainc.org>

Welcome Home Ministries: Face to Face

This faith-based program is for women who face the dual challenges of recovery and re-entry to society from incarceration.

P.O. Box 184

Richmond, OH 43944

740-765-4959

<http://www.welcomehomeministries.org>

Oklahoma

Oklahoma Citizen Advocates for Recovery and Treatment

This group's mission is to empower recovering people and their families through physical, emotional, and spiritual growth to make significant contributions to society.

2808 Northwest 31st Street

Oklahoma City, OK 73112

866-848-7555

<http://www.ocarta.org>

Oregon

Central City Concern: Recovery Association Project (RAP)

This peer-led recovery community organization focuses on building leadership and power among people in recovery. Its strengths-based peer services are available to other groups, including trainings on organizing recovering people with a focus on leadership and active citizenship, and implementing a peer-led recovery mentor program.

18438 Southeast Pine Street

Portland, OR 97233

503-489-0470

<http://www.centralcityconcern.org>

<http://www.rap-nw.org>

Relief Nurseries, Inc.: Accessing Success

This project targets parents of children in high-risk families and provides recovery support services.

1720 West 25th Avenue

Eugene, OR 97405

541-343-9706

<http://www.reliefnursery.org>

Pennsylvania

Bucks County Council on Alcoholism

The council is an independent nonprofit organization whose mission is to provide resources and opportunities to reduce the impact of addiction and to improve related health issues for the entire community. It provides services such as consultation, assessment, intervention, and treatment.

252 West Swamp Road, Suite 12

Doylestown, PA 18901

800-221-6333

215-345-6644

<http://www.bccadd.org>

Easy Does It, Inc.: Full Circle

This group organizes committees that focus on a holistic approach to the process of personal growth within the recovery process.

1300 Hilltop Road
Leesport, PA 19533
610-373-2463

<http://www.easydoesitinc.org>

Pennsylvania Recovery Organizations Alliance, Inc.**(PRO-A)****Statewide/Regional Community Mobilization Project**

This project supports recovery through peer-driven support services and education.

900 South Arlington Avenue, Suite 119
Harrisburg, PA 17109
717-545-8929

<http://www.pro-a.org>

PRO-ACT

For a full description, refer to Recovery/Treatment.

RASE Project

This project in south central Pennsylvania provides recovery support services, events, training and education, supportive housing, and intervention services. The RASE Project also offers the Buprenorphine Coordinator Program, providing recovery support for those in medication-assisted treatment for opioid addiction.

1820 Linglestown Road, Suite 101
Harrisburg, PA 17110
717-232-8535

<http://www.raseproject.org>

Tennessee**Alcohol and Drug Council of Middle Tennessee:
Nashville Area Recovery Alliance (NARA)**

This grassroots membership-based organization is comprised of individuals in recovery, as well as their families, friends, and allies.

P.O. Box 330189
Nashville, TN 37203
615-269-0029

<http://www.adcmt.org>

Texas**Recovery Alliance of El Paso**

The alliance was organized in 1998 to fight stigma for people in recovery from substance use disorders, and is now dedicated to providing peer-to-peer recovery support services.

P.O. Box 9669
El Paso, TX 79995
915-594-7000

<http://www.recoveryalliance.net>

Serving Children and Adolescents in Need

This youth outreach group is developing the "Futuros Saludables Recovery Services Program," which will enhance substance use treatment by promoting recovery, reducing relapse, and intervening when relapse does occur. The program will provide peer-designed and peer-led services with an emphasis on leadership development, principles of self-care, and cultural diversity among participants.

2387 East Saunders Street
Laredo, TX 78041
956-724-3177

<http://www.scan-inc.org>

Virginia**McShin Foundation**

For a full description, refer to Recovery/Treatment.

Substance Abuse and Addiction Recovery Alliance (SAARA)

For a full description, refer to Recovery/Treatment.

Washington**Multifaith Works**

This group unites communities of compassionate care and inclusive spirituality with people living in isolation and loneliness. The network provides administrative, emotional, and supervisory support, as well as volunteer recruitment, training, and leadership skill development for peer volunteers.

115 16th Avenue
Seattle, WA 98122
206-324-1520

<http://www.multifaith.org>

Recovery/Treatment**About Recovery**

This site offers addiction and recovery resources and provides a national helpline that is available 24 hours a day.

877-345-3370

<http://www.aboutrecovery.com>

Addiction Survivors

This group is dedicated to providing online peer support communities for those with addiction, their families, and friends.

P.O. Box 333
Farmington, CT 06034

<http://www.addictionsurvivors.org>

Addiction Treatment Centers

This site offers information about drug treatment centers, alcohol rehab programs, and dual diagnosis treatment resources, including blogs, forums, video sharing, and a comprehensive directory of over 11,000 treatment facilities.

378 Santana Row, #326
San Jose, CA 95128
408-210-4910

<http://www.treatment-centers.net>

Addiction Treatment Watchdog

This website is a resource for educating medication-assisted treatment patients and others about the disease and treatment of opiate addiction.

<http://www.atwatchdog.lefora.com>

Advocates for Recovery Through Medicine (ARM)

This organization's goals are to end stigma and discrimination against people who use medications to treat addictions and to move addiction treatment, especially opiate addiction treatment, into mainstream medicine.

P.O. Box 90337
Burton, MI 48509
810-250-9064

<http://www.armme.org>

Advocates for the Integration of Recovery and Methadone (AFIRM)

This group supports methadone as an effective tool of recovery that can be enhanced through the integration of other treatment approaches. It promotes the development of Methadone Anonymous (MA) and other 12-step fellowships, as well as clinical treatment alternatives, such as incorporating spirituality modalities into traditional treatment settings.

455 East Bay Drive
Long Beach, NY 11561
516-897-1330 (days)
516-889-8142 (evenings)

<http://www.methadonetoday.org/afirm.html>

Alcohol and Drug Rehab Treatment Resource Center

This online center provides information on key issues about alcohol and drug abuse, including interventions, rehab, and treatment. Visitors must enter identifying information to participate in this website.

<http://www.addict-help.com>

Alexandria Community Services Board (CSB)

This group provides effective and cost-efficient mental health, mental retardation, and substance use prevention and treatment services that measurably improve the quality of life for Alexandria, VA's neediest citizens.

720 North Saint Asaph Street, Fourth Floor
Alexandria, VA 22314
703-746-3400

<http://www.alexandriava.gov/mhmrsa>

Aliviane NO-AD, Inc.

This nonprofit community-based organization is dedicated to the provision of HIV and substance use disorder prevention, intervention, treatment, education, and follow-up care to the residents of West Texas.

10690 Socorro Road
Socorro, TX 09927
915-858-6208

American Association for the Treatment of Opioid Dependence (AATOD)

For a full description, refer to Provider and Professional Organizations.

American Association of Poison Control Centers (AAPCC)

This association is a nationwide organization of poison centers and interested individuals.

515 King Street, Suite 510
Alexandria, VA 22314
703-894-1858

<http://www.aapcc.org>

Association of Recovery Schools (ARS)

This organization advocates for the promotion, strengthening, and expansion of secondary and post-secondary programs designed for students and families committed to achieving success in both education and recovery. ARS exists to support such schools which, as components of the recovery continuum of care, enroll students committed to being abstinent from alcohol and other drugs and working a program of recovery.

1231 Highland Avenue
Ft. Washington, PA 19034
215-628-8600

<http://www.recoveryschools.org>

Behavioral Health Services (BHS)

This nonprofit organization has provided a continuum of substance use, mental health, and senior services since 1973. Each of its 11 facilities (located throughout Los Angeles County) is based on its mission of transforming lives by offering hope and opportunities for recovery, wellness, and independence.

15519 Crenshaw Boulevard

Gardena, CA 90249

310-679-9126

310-675-4431

<http://www.bhs-inc.org>

Betty Ford Center

This center provides treatment for chemical dependency, as well as support and educational resources for family members and children of clients.

39000 Bob Hope Drive

Rancho Mirage, CA 92270

800-434-7365

760-773-4100

<http://www.bettyfordcenter.org>

C4 Recovery Solutions, Inc.

This nonprofit was established to promote the design, provision, and monitoring of outcomes-based services that initiate and sustain recovery from substance use disorders, as well as improve prevention and harm-reduction strategies that mitigate addiction's worst effects.

<http://www.c4recoveryolutions.org>

California Association of Addiction Recovery Resources (CAARR)

This association educates and provides statewide recovery resources for alcoholics and people with addiction problems living in California.

2400 Marconi Avenue

P.O. Box 214127

Sacramento, CA 95821

916-338-9460

<http://www.caarr.org>

Caron Treatment Center

This center offers detoxification, gender-separate rehabilitation, relapse treatment, and extended care for adults and adolescents; educational programs for family members; and student assistance services.

243 North Galen Hall Road

Wernersville, PA 19565

800-854-6023

<http://www.caron.org>

CRC Health Group

This group offers the most comprehensive network of specialized behavioral care services in the Nation, serving over 30,000 people each day in 140 facilities, providing healing and hope in the lives of patients, students, and families. For over two decades, CRC programs have helped individuals and families reclaim and enrich their lives.

20400 Stevens Creek Boulevard, Sixth Floor

Cupertino, CA 95014

877-637-6237

408-998-7260

<http://www.crchealth.com>

Faces & Voices of Recovery

For a full description, refer to Policy/Education.

Fairview Recovery Services

Fairview offers individually tailored services for people suffering from chemical dependency.

5 Merrick Street

Binghamton, NY 13904

607-722-8987

<http://www.frsinc.org>

Father Martin's Ashley

This is a private, nonprofit facility for the treatment of substance use disorders serving people aged 18 and over since 1987. It offers a comprehensive program of services for individuals and families afflicted by the disease of addiction.

800 Tydings Lane

Havre de Grace, MD 21078

800-799-4673

410-273-6600

<http://www.fathermartinsashley.com>

Foundations Associates

This is a treatment and advocacy organization dedicated solely to the treatment and recovery of people with co-occurring mental illness and substance use disorders. The agency has a full continuum of care, with locations in Memphis and Nashville, TN.

210 Westwood Place

Brentwood, TN 37027

877-345-3357

615-256-9005

<http://www.dualdiagnosis.org>

Gateway Foundation

This foundation is a private, not-for-profit organization providing substance use treatment; each year, 29,000 clients are provided care in community-based and correctional settings.

55 East Jackson Boulevard, Suite 1500

Chicago, IL 60604

312-663-1130

<http://www.gatewayfoundation.org>

Gaudenzia, Inc.

This group helps people affected by chemical dependency, mental health problems, and related conditions to achieve a better quality of life—allowing them to live as productive and accountable individuals.

106 West Main Street
Norristown, PA 19401
610-239-9600

<http://www.gaudenzia.org>

Griffin Recovery Enterprises

This enterprise, led by Dan Griffin, consists of books, presentations, and a blog. Griffin's latest book, "A Man's Way Through the Twelve Steps," uses interviews with men in various stages of recovery, along with his own experience, to offer a holistic approach to sobriety for men.

4549 Park Avenue
Minneapolis, MN 55407
612-701-5842

<http://www.dangriffin.com>

Hazelden Foundation

This national nonprofit organization founded in 1949 helps people reclaim their lives from the disease of addiction. Hazelden's comprehensive approach to addiction addresses the full range of patient, family, and professional needs, including treatment and continuing care, research, higher learning, public education and advocacy, and publishing.

P.O. Box 11
Center City, MN 55012
800-257-7810
651-213-4200

<http://www.hazelden.org>

Hope Networks/We Recover Foundation

This group supports community efforts regarding treatment, job skills, living skills, and retraining programs to reduce poverty, crime, and illiteracy found in untreated communities.

8867 Highland Road, Suite 320
Baton Rouge, LA 70808
866-859-3513

In the Rooms, Inc.

This social networking website is for the recovery community worldwide. Its mantra is H.I.T.C.H.—Help, Inform, Touch, Connect, and Heal—for those already in recovery, seeking recovery, and family and friends around the world.

<http://www.intherooms.com>

LifeRing

This international nonprofit organization offers sober, secular self-help. Members rely on the strength of each individual and the influence of sober conversation to abstain from alcohol and drugs. LifeRing welcomes people from all faiths, or none, but those beliefs are private. LifeRing brings people together via face-to-face and online support groups, and provides sobriety tools through original books, publications; and interactive online resources.

1217 23rd Street
Sacramento, CA 95816
800-811-4142

<http://lifering.org>

Mayo Clinic, Addiction Psychiatry

This addiction psychiatry unit offers chemical dependency programs for people with substance use disorders.

200 First Street SW
Rochester, MN 55905
507-284-2220

<http://www.mayoclinic.org>

McShin Foundation

This foundation is Virginia's fastest-growing peer-to-peer recovery community organization. Founded in 2004, The McShin Foundation is a nonprofit committed to serving individuals and families in their fight against substance use disorders.

2300 Dumbarton Road
Richmond, VA 23228
804-249-1845

<http://www.mcshin.org>

Medical Assisted Treatment of America

This website aims to raise awareness and understanding of substance use, the problems it creates, and the ways to deal with these problems.

368 Johnston Parkway
Kennesaw, GA 30152-4445
770-428-0871

<http://www.medicalassistedtreatment.org>

Methadone Support Organization (MSO)

This group is a support organization for medically assisted treatment that is available for people addicted or dependent on opiates for any reason. Its provider- and patient-friendly online support resources include information on methadone and pregnancy, Methadone Anonymous, support forums, on-site experts to answer questions, and more.

<http://www.methadonesupport.org/board.html>

Mount Saint John Home & School for Boys

This residential treatment center is for boys with behavioral and learning problems.

135 Kirtland Street
Deep River, CT 06417
860-343-1300
<http://www.mtstjohn.org>

Narconon

This is a nonprofit drug rehab program dedicated to eliminating drug abuse and drug addiction through drug prevention, education, and rehabilitation.

4652 Hollywood Boulevard
Hollywood, CA 90027
800-468-6933
323-962-2404
<http://www.narconon.org>

Narconon of Oklahoma

This group is located in Oklahoma and is part of the larger Narconon International group. It uses a full natural approach to treatment and recovery by teaching participants how to live a drug-free life.

800-468-6933
918-339-5800
<http://www.stopaddiction.com>

National Alliance for Medication Assisted Recovery (NAMA Recovery)

This is a membership organization representing people whose recovery from opiate dependence is assisted with medication. Its membership includes methadone patients, family members, and health care professionals whose common goal is to fight the ignorance and prejudice surrounding medication-assisted recovery.

435 Second Avenue
New York, NY 10010
212-595-NAMA (6262)
<http://www.methadone.org>

National Alliance of Advocates for Buprenorphine Treatment (NAABT)

This nonprofit organization has the mission to educate the public about the disease of opioid addiction and the buprenorphine treatment option, to help reduce the stigma and discrimination associated with patients with addiction disorders, and to serve as a conduit for connecting patients in need of treatment to qualified treatment providers.

P.O. Box 333
Farmington, CT 06034
860-269-4390
<http://www.naabt.org>

National Association on Alcohol, Drugs and Disability, Inc. (NAADD)

This association promotes awareness and education about substance use disorders among people with physical, sensory, cognitive, and developmental disabilities.

2165 Bunker Hill Drive
San Mateo, CA 94402
650-578-8047
<http://www.naadd.org>

National Council on Alcoholism and Drug Dependence, Inc. (NCADD)

Founded in 1944, NCADD and its Affiliate Network is a voluntary health organization dedicated to fighting the Nation's #1 health problem—alcoholism, drug addiction, and the devastating consequences of alcohol and other drugs on individuals, families, and communities. NCADD focuses on increasing public awareness and understanding of the disease of alcoholism and drug dependence through education, prevention, information/referral, intervention, treatment services, advocacy, and recovery support services, and has helped millions of individuals and family members into recovery.

244 East 58th Street, Fourth Floor
New York, NY 10022
800-NCA-CALL (622-2255) (Hope Line)
212-269-7797
<http://www.ncadd.org>

Newport Academy

This treatment center is dedicated to providing comprehensive, gender-specific, integrated treatment programs for adolescent males and females. It provides support in an environment of caring and compassion by which teens and their families may recover from the destructive effects of substance abuse and related behavioral health issues. It offers separate residential facilities and has an active after-school program in Orange County, CA.

866-382-6651
<http://www.newport-academy.com>

Opiate Dependence Resource Center (ODRC)

This national organization serves to safeguard patients through effective mediation, assuring access to care, and preservation of the familial structure to improve their quality of life and help them achieve recovery.

67 Main Street, Suite 304
Brattleboro, VT 05301
802-251-0066
<http://www.methadone.net/index2.htm>

Oxford House, Inc.

This is the umbrella organization for a network of more than 1,200 democratically run, self-supporting, and drug-free group homes throughout the country.

1010 Wayne Avenue, Suite 300
Silver Spring, MD 20910
800-689-6411
301-587-2916
<http://www.oxfordhouse.org>

Partnership for Recovery (PFR)

This coalition includes the Betty Ford Center, Bradford Health Systems, Cumberland Heights, Father Martin's Ashley, Gateway Rehabilitation Center, Hazelden Foundation, Valley Hope Association, and the National Association of Addiction Treatment Providers.

101 Constitution Avenue NW, Suite 675 East
Washington, DC 20001
202-737-8167
<http://www.partnershipforrecovery.org>

Phoenix House

This nonprofit organization serves individuals throughout the country who are struggling with substance abuse and/or co-occurring mental health problems. Phoenix House provides residential and outpatient treatment along with prevention and recovery support services.

164 West 74th Street
New York, NY 10023
212-595-5810
<http://www.phoenixhouse.org>

PRO-ACT

This grassroots recovery support initiative in southeastern Pennsylvania (Bucks, Chester, Delaware, Montgomery, and Philadelphia Counties) has provided prevention, intervention, and recovery support services, as well as education and advocacy, to the community for 11 years. It has been providing a growing matrix of peer-to-peer support services, which has led to the opening of three Recovery Community Centers, now a hub for all recovery services.

252 West Swamp Road, Suite 12
Doylestown, PA 18901
800-221-6333
<http://www.proact.org>

Providence Center

For a full description, refer to Mental Health.

Psychology Today

This organization is dedicated to helping people understand their addiction, the issues behind it, and how to overcome the challenge.

115 East 23rd Street, Ninth Floor
New York, NY 10010
212-260-7210
<http://www.psychologytoday.com>

Reality House, Inc.

This organization provides culturally appropriate substance abuse and HIV treatment and prevention services to New Yorkers living mainly in Harlem, Washington Heights, and the South Bronx.

34-51 Vernon Boulevard
Long Island City, NY 11106
212-281-6004
<http://www.realityhousesny.org>

Recovery Connection

This is a comprehensive addiction treatment resource and drug rehabilitation referral service. The organization has staff across the country available 24 hours a day to answer all concerns about substance use, addiction treatment, and rehabilitation.

4825 North Dixie Highway
Oakland Park, FL 33334
800-993-3869
954-491-1771
<http://www.recoveryconnection.org>

Recovery Works

This group offers resources for recovery from various forms of addiction.

<http://www.recoveryworks.info>

Resolution Ranch

This is a therapeutic camp in Texas for troubled teen boys ages 13 to 17.

2274 Texas 4
Cameron, TX 76520-4531
512-923-9636
<http://www.resolutionranch.com>

Ridgeview Institute

This institute provides mental health and substance use disorder treatment services in Georgia.

3995 South Cobb Drive
Symrna, GA 30080
800-329-9775
770-434-4567
<http://www.ridgeviewinstitute.com>

Rimrock Foundation

This foundation offers community-developed treatment services for substance use disorders.

1231 North 29th Street
Billings, MT 59101
800-227-3953
406-248-3175
<http://www.rimrock.org>

Sagebrush

This holistic residential substance abuse treatment center for adults provides a small, individualized clinical program to give an ideal recovery environment where one can focus on mental, physical, and spiritual well-being.

P.O. Box 554
Great Falls, VA 22066
888-406-7444
<http://www.sagebrushva.com>

Second Road Inc.,

This is a 24-hour web-based nonprofit group to help those in recovery (and the families of those affected by addiction) learn to live with the challenges presented by everyday life and continue on a fulfilling road of recovery. The site offers a community of trust and understanding, inspiring stories from people of diverse cultures and backgrounds, the knowledge of many experts in the addiction treatment field, and the tools to resist relapse in a secure, non-threatening environment.

P.O. Box 1506
Charlottesville, VA 22902
434-295-9595
<http://www.thesecondroad.org>

State Associations of Addiction Services (SAAS)

For a full description, refer to State and Local Resources.

Stepping Stone of San Diego

This group provides treatment and recovery services focusing on the lesbian, gay, bisexual and transgender communities.

3969 Fourth Avenue, Suite 201
San Diego, CA 92103
619-295-3995
<http://www.stepsstonesd.org>

Substance Abuse and Addiction Recovery Alliance (SAARA)

This is a community-based grassroots membership organization of individuals in recovery from alcohol and other drug addiction, their families, friends, and committed community supporters.

306 Turner Road, Suite P
Richmond, VA 23225
804-762-4445
<http://www.saara.org>

The T.A. LIBBY Group

This group provides addiction science education and recovery advocacy through published work, continuing education workshops, conference presentations, and visibility events.

443-822-6791
<http://www.talibby.com>

Therapeutic Communities of America (TCA)

This national nonprofit membership association represents more than 650 substance use and mental health treatment programs that provide a variety of services to substance use and co-occurring disorder clients with a range of special needs.

1601 Connecticut Avenue NW, Suite 803
Washington, DC 20009
202-296-3503
<http://www.therapeuticcommunitiesofamerica.org>

United for Recovery

For a full description, refer to Policy/Education.

Valley Hope Association

This nonprofit organization has provided quality substance use disorder treatment services since 1967. It operates treatment facilities in Arizona, Colorado, Kansas, Missouri, Nebraska, Oklahoma, and Texas.

P.O. Box 510
Norton, KS 67654
800-654-0486 (General Information)
800-544-5101 (Admissions)
<http://www.valleyhope.com>

Vanguard Services Unlimited

This nonprofit, community-based organization offers high-quality treatment and recovery to individuals and their families with substance use disorders.

521 North Quincy Street
Arlington, VA 22203
703-841-0703
<http://www.vanguardservices.org>

Vera Institute of Justice, La Bodega de la Familia

This institute offers family- and community-based recovery services for people on parole or probation.

233 Broadway, 12th Floor
New York, NY 10279
212-334-1300
<http://www.vera.org>

Village South

This group offers substance use disorder treatment programs and referrals for job training, shelter, and HIV testing for the diverse communities of Miami-Dade County, FL.

3050 Biscayne Boulevard, Ninth Floor

Miami, FL 33137

800-443-3784

305-573-3784

<http://www.villagesouth.com>

Watershed

This is a group of recovery facilities that provide services including detoxification, residential rehabilitation, intensive outpatient treatment, prevention, and education.

P.O. Box 7185

Columbia, SC 29202

800-861-1768

<http://www.thewatershed.com>

Research**Addiction Technology Transfer Center (ATTC)****Network National Office**

To advance public health and wellness, SAMHSA's ATTC Network accelerates lasting change in behavioral health care systems by translating, disseminating and promoting the adoption and implementation of effective and culturally sensitive clinical practices. A list of ATTC Regional Centers, the States they serve, and contact information can be found on the ATTC Network website.

University of Missouri – Kansas City

5100 Rockhill Road

Kansas City, MO 64110

816-235-6888

<http://www.ATTCnetwork.org>

Caribbean Basin and Hispanic ATTC (serving Puerto Rico and the U.S. Virgin Islands)

Centro de Estudios en Adiccion

Universidad Central del Caribe Call Box 60-327

Bayamon, PR 00960-6032

787-785-4211

<http://cbattc.uccaribe.edu>

Central East ATTC (serving DE, DC, MD, NJ)

8737 Colesville Road, Suite 300

Silver Spring, MD 20910

240-645-1145

<http://www.ceattc.org>

Great Lakes ATTC (serving IL, OH, IN, MI)

Jane Addams College of Social Work

University of Illinois at Chicago

1640 West Roosevelt Road, Suite 511

Chicago, IL 60608-1316

312-996-1373

<http://www.glattc.org>

Gulf Coast ATTC (serving TX, LA, NM)

University of Texas School of Social Work

Center for Social Work Research

1717 West Sixth Street, Suite 335

Austin, TX 78703

512-232-0616

<http://www.utattc.net>

Mid-America ATTC (serving AR, KS, MO, OK, NE)

University of Missouri-Kansas City

5100 Rockhill Road

Kansas City, MO 64110-2499

816-482-1100

<http://www.mattc.org>

Mid-Atlantic ATTC (serving VA, WV, KY, TN)

4907 Fitzhugh, Suite 202

Richmond, VA 23230

804-367-7720

<http://www.attcnetwork.org/midatlantic>

Mountain West ATTC (serving NV, MT, WY, UT, CO, ID)

University of Nevada, Reno

CASAT/MWATTC Mailstop 279

Reno, NV 89557

775-784-6265

http://www.attcnetwork.org/regcenters/index_mountainwest.asp

New England ATTC (serving ME, NH, VT, MA, CT, RI)

Center for Alcohol and Addiction Studies, Brown University

Box G-S121

Providence, RI 02912

401-863-6486

<http://www.attc-ne.org>

Northeast ATTC (serving NY, PA)

Institute for Research, Education & Training in Addictions

425 Sixth Avenue, Suite 1710

Pittsburgh, PA 15219

866-246-5344

<http://www.neattc.org>

Northwest Frontier ATTC (serving AK, WA, OR, HI, Pacific Islands)

810 D Street NE
Salem, OR 97301
503-373-1322
<http://www.nfattc.org>

Pacific Southwest ATTC (serving CA, AZ)

UCLA Integrated Substance Abuse Programs
1640 South Sepulveda Boulevard, Suite 200
Los Angeles, CA 90025
310-267-5408
<http://www.psattc.org>

Prairielands ATTC (serving IA, MN, ND, SD, WI)

University of Iowa
1207 Westlawn
Iowa City, IA 52242
319-335-5368
<http://www.patcc.org>

Southeast ATTC (serving GA, NC, SC)

National Center for Primary Care at Morehouse School of Medicine
720 Westview Drive SW
Atlanta, GA 30310-1495
404-752-1016
<http://www.sattc.org>

Southern Coast ATTC (serving FL, AL, MS)

Florida Certification Board
1715 South Gadsden Street
Tallahassee, FL 32301
850-222-6731
http://www.attcnetwork.org/regcenters/index_southerncoast.asp

Center for Science in the Public Interest: Alcohol Policies Project

This center conducts policy development and technical research for the prevention of alcohol use disorders at local, State, and national levels.

1875 Connecticut Avenue NW, Suite 300
Washington, DC 20009
202-332-9110
<http://www.cspinet.org>

Center for Substance Abuse Research

This research center provides information on substance use disorders and their impact on individuals, families, and communities.

4321 Hartwick Road, Suite 501
College Park, MD 20740
301-405-9770
<http://www.cesar.umd.edu>

CompassPoint Addiction Foundation

This foundation performs research about the causes and nature of substance use disorders.

P.O. Box 2800-338
Carefree, AZ 85377
480-368-2688
<http://www.addictionresearch.com>

Harvard Medical School Division on Addictions

This center provides education and training to health care workers who treat substance use disorders and to scientists who study them.

101 Station Landing, Second Floor
Medford, MA 02155
781-306-8600
<http://www.divisiononaddictions.org>

Journal of Global Drug Policy and Practice

This journal is a peer-reviewed, scientific, free online publication that helps public and private entities to participate in the exchange of valuable information about drug policy and practice, while sharing different cultural attitudes and perspectives.

2600 Ninth Street North, Suite 200
St. Petersburg, FL 33704
727-828-0211
<http://www.globaldrugpolicy.org>

National Center on Addiction and Substance Abuse at Columbia University (CASA)

This organization is the only nationwide entity that brings together all the professional disciplines needed to study and combat abuse of all substances—alcohol, nicotine as well as illegal, prescription, and performance-enhancing drugs—in all sectors of society.

633 Third Avenue, 19th Floor
New York, NY 10017
212-841-5200
<http://www.casacolumbia.org>

National Development and Research Institutes, Inc. (NDRI)

A National Institute on Drug Abuse grantee, this nonprofit research and educational organization is dedicated to advancing scientific knowledge in the areas of alcohol and drug abuse, treatment, and recovery; HIV, AIDS, and HCV; therapeutic communities; youth at risk; and related areas of public health, mental health, criminal justice, urban problems, prevention, and epidemiology.

71 West 23rd Street, Eighth Floor
New York, NY 10010
212-845-4400
<http://www.ndri.org>

Physicians and Lawyers for National Drug Policy

For a full description, refer to Policy/Education.

Robert Wood Johnson Foundation

This foundation offers grants for training, education, and research.

P.O. Box 2316
College Road East and Route 1
Princeton, NJ 08543-2316
877-843-7953
<http://www.rwjf.org>

Substance Abuse and Mental Health Data Archive (SAMHDA)

This data archive contains substance use disorder and mental health research data.

ICPSR University of Michigan Institute for Social Research
P.O. Box 1248
Ann Arbor, MI 48106-1248
888-741-7242
<http://www.icpsr.umich.edu/SAMHDA>

Urban Institute

This institute conducts economic and social policy research on a range of issues, including substance use disorders, health insurance, and community-based health care.

2100 M Street NW
Washington, DC 20037
202-833-7200
<http://www.urban.org>

State and Local Resources

American Council on Alcohol Problems

This federation of 37 State affiliates seeks long-range solutions to alcohol-related problems using educational and legislative approaches.

2376 Lakeside Drive
Birmingham, AL 35244
205-985-9062

Associates in Counseling

This group provides counseling and psychiatric services in addition to substance use disorder groups.

2225 North University Drive
Pembroke Pines, FL 33024
954-962-6200

The Association of Community Mental Health Authorities of Illinois (ACMHAI)

ACMHAI's purpose is to increase the capacity of community mental health systems to eliminate, ameliorate or reduce the incidence of mental disabilities by strengthening and developing local mental health authorities.

P.O. Box 17187
Urbana, IL 61803
(217) 369-5168
<http://www.acmhai.org>

Association of State and Territorial Health Officials

This association develops programs and policies for State health departments to promote health and prevent disease.

2231 Crystal Drive, Suite 450
Arlington, VA 22202
202-371-9090
<http://www.astho.org>

Californians for Drug-Free Youth (CADFY)

Through community mobilization, this organization co-develops and provides effective and comprehensive youth, adult, and family prevention/intervention/treatment and recovery community support services that are deployed through its national outreach bureau, Community Alliances for Drug-Free Youth.

1010 Second Avenue, Suite 1900
San Diego, CA 92101
619-557-5753
<http://www.cadfy.org>

Coalition of Behavioral Health Services

This collaboration of organizations and individuals in the Houston metropolitan area is working to bridge the gap between substance use disorder treatment resources, mental health resources, and residents in need of such services.

501 Garden Oaks Boulevard
Houston, TX 77018
713-426-2637, ext. 4511
<http://www.cbhshouston.org>

Community Anti-Drug Coalitions of America (CADCA)

This organization builds and strengthens the capacity of community coalitions to create safe, healthy, and drug-free communities. It supports members with technical assistance and training, public policy, media strategies, conferences, and special events.

625 Slaters Lane, Suite 300
Alexandria, VA 22314
800-542-2322
703-706-0560
<http://www.cadca.org>

Connecticut Clearinghouse

This organization serves as Connecticut's resource center for information about alcohol, tobacco, drugs, and related issues.

334 Farmington Avenue
Plainville, CT 06062
800-232-4424
860-793-9791 (TTY)
<http://www.ctclearinghouse.org>

Connecticut Community for Addiction Recovery (CCAR)

For a full description, refer to Recovery Support Programs under Connecticut.

Council of State Governments (CSG)

This council is our Nation's only organization serving all three branches of State government. CSG is a region-based forum that fosters the exchange of insights and ideas to help state officials shape public policy.

2760 Research Park Drive
P.O. Box 11910
Lexington, KY 40578-1910
859-244-8000
<http://www.csg.org>

Join Together

This national resource for communities working to reduce substance use disorders offers a comprehensive website, daily news updates, publications, and technical assistance.

580 Harrison Avenue, Third Floor
Boston, MA 02118
617-437-1500
<http://www.jointogether.org>

La Joya ISD

This independent school district in La Joya, TX, offers programs and counseling for substance use prevention, education, and intervention.

201 East Expressway 83
La Joya, TX 78560
956-580-5000
<http://www.lajoyaisd.com>

Massachusetts Organization for Addiction Recovery (MOAR)

For a full description, refer to Recovery Support Programs.

Mental Help, Educate and Advocate

This website is a compilation of information gathered by members of the Massachusetts Department of Mental Health (DMH) Southwest Suburban Site Board. Its mission is to learn about, educate, and advocate for all people living with mental illness.

http://www.mentalhelpinfo.org/Home_Page.php

Miami Coalition for a Safe and Drug-Free Community University of Miami/North South Center

This broadly based community organization is committed to reducing the problems of substance use disorders and directly related social issues by serving in the role as a community convener and facilitator.

2490 Coral Way, Fourth Floor
Miami, FL 33415
305-854-4515
<http://www.miamicoalition.org>

Minnesota Department of Human Services Alcohol and Drug Abuse Division

This department develops and maintains an effective chemical health service system in Minnesota that encourages and supports research-informed practices surrounding alcohol and drug abuse.

651-431-2460
<http://www.dhs.state.mn.us>

National Association of Counties

This association offers national legislative, research, technical, and public affairs assistance for U.S. counties.

25 Massachusetts Avenue NW, Suite 500
Washington, DC 20001
202-393-6226
<http://www.naco.org>

National Association of County Behavioral Health and Developmental Disability Directors (NACBHD)

This nonprofit membership organization is comprised of county/local behavioral health authorities who plan and deliver mental health, developmental disability, and substance use disorder services, as well as the State associations that represent their interests.

25 Massachusetts Avenue NW, Suite 500
Washington, DC 20001
202-661-8816
<http://www.nacbhd.org>

National Association of State Alcohol and Drug Abuse Directors (NASADAD)

This association supports the development of effective prevention and treatment programs throughout every State.

1025 Connecticut Avenue NW, Suite 605
Washington, DC 20036
202-293-0090
<http://www.nasadad.org>

National Association of State Medicaid Directors (NASMD)

This is a bipartisan, professional, nonprofit organization of representatives of state Medicaid agencies, affiliated with the American Public Human Services Association (APHSA). The primary purposes of this group are to serve as a focal point of communication between the States and the Federal Government, and to provide an information network among the States on issues pertinent to the Medicaid program.

1133 19th Street NW, Suite 400
Washington, DC 20036
202-682-0100
<http://www.nasmd.org>

National Conference of State Legislatures (NCSL)

This is a bipartisan organization that serves the legislators and staffs of the Nation's 50 States, its commonwealths, and territories. It provides research, technical assistance, and opportunities for policymakers to exchange ideas on the most pressing State issues.

444 North Capitol Street NW, Suite 515
Washington, DC 20001
202-624-5400
<http://www.ncsl.org>

National Governors Association (NGA) Center for Best Practices

This bipartisan nonprofit association represents the collective voice of the Nation's governors. Its mission is to help shape and implement national policy and help governors and their policy staff develop and implement innovative solutions to the challenges facing their States.

444 North Capitol Street, Suite 267
Washington, DC 20001
202-624-5300
<http://www.nga.org/center>

New York State Office of Alcoholism and Substance Abuse Services

This organization works to improve the lives of residents of New York by leading a system of addiction services through prevention, treatment, and recovery.

1450 Western Avenue
Albany, NY 12203-3526
518-473-3460
<http://www.oasas.state.ny.us/index.cfm>

North Carolina Department of Health and Human Services Division of Mental Health

Developmental Disabilities and Substance Abuse

This office is primarily responsible for leadership, guidance, and management of relationships with the local management entities who contract directly for addiction treatment services. It also collaborates with a wide variety of public and private partners and customers to promote recovery through the adoption of recovery-oriented systems of care and the promotion of a reduction to barriers to services.

919-733-4534
<http://www.dhhs.state.nc.us/MHDDSAS>

OpenMindsOpenDoors

This initiative is aimed at ending discrimination against people with mental illness and is coordinated by the Mental Health Association in Pennsylvania. The campaign is centered on educating the public about mental illness and the legal rights of people living with a mental illness.

c/o MHAPA
1414 North Cameron Street, First Floor
Harrisburg, PA 17103
717-346-0549
<http://www.openmindsopendoors.com>

Partnership for a Drug-Free NC, Inc.

This partnership coordinates statewide resources and provides services to reduce the negative impact of substance use and mental illness on North Carolina's individuals, families, and communities.

665 West Fourth Street
Winston-Salem, NC 27101
888-732-3362
336-725-8389
<http://www.drugfreenc.org>

Pennsylvania Department of Health Bureau of Drug and Alcohol Programs

This State government agency develops and implements a comprehensive health, education, and rehabilitation program for the prevention, intervention, treatment, and case management of drug and alcohol abuse and dependence.

02 Kline Plaza, Suite B
Harrisburg, PA 17104
717-783-8200
<http://www.health.state.pa.us/bdap>

Recovery Consultants of Atlanta, Inc.

For a full description, refer to Faith-Based Organizations.

State Associations of Addiction Services (SAAS)

This is the national organization of State provider associations representing treatment and prevention programs for substance use disorders.

236 Massachusetts Avenue NE, Suite 505
Washington, DC 20002
202-546-4600
<http://www.saasnet.org>

Texas Department of State Health Services Community Mental Health and Substance Abuse Services

This department works to improve the health and well-being of people living in Texas. The department built an extensive research and reference collection in the area of substance abuse prevention and treatment, which is available online.

909 West 45th Street
Austin, TX 78751
512-458-7111
<http://www.dshs.state.tx.us/default.shtm>

Turning Point

This organization has served the Minnesota community since 1976, providing African Americans with a holistic approach to counseling and treatment.

1500 Golden Valley Road
Minneapolis, MN 55411
612-520-4004
<http://www.ourturningpoint.org>

U.S. Conference of Mayors

This forum provides mayors with the opportunity to share ideas and recommend policy positions.

1620 Eye Street NW, Suite 400
Washington, DC 20006
202-293-7330
<http://www.usmayors.org>

Wisconsin Clearinghouse for Prevention Resources

The clearinghouse provides substance use prevention resources for youth, parents, schools, and communities.

University Health Services, UW-Madison
333 East Campus Mall, #8104
Madison, WI 53715-1381
800-248-9244
608-262-9157
<http://wch.uhs.wisc.edu>

Workplace, Labor, and Insurance Resources

A Safe Haven Foundation

The foundation supports an individual as he or she enters into and sustains long-term recovery from substance use. It works with each person to develop a personal "Continuum of Housing and Care."

2750 West Roosevelt Road
Chicago, IL 60608-1048
312-372-3820
<http://www.asafehaven.com>

American Association of Health Plans

This is a health plan association representing more than 1,000 health plans throughout the country. It provides information on managed care organization educational programs, health care delivery, research, services, and products.

601 Pennsylvania Avenue NW
South Building, Suite 500
Washington, DC 20004
202-778-3200
<http://www.ahip.org>

America in Recovery

This program offers a no-charge hiring website that helps employers and potential employees who are in recovery find each other.

P.O. Box 38589
Houston, TX 77238-8589
<http://www.americainrecovery.org>

American Federation of Government Employees (AFGE)

This group is the largest Federal employee union representing 600,000 Federal and Washington, DC, Government workers nationwide and overseas. Workers in virtually all functions of Government at every Federal agency depend on AFGE for legal representation, legislative advocacy, technical expertise, and informational services.

80 F Street NW
Washington, DC 20001
202-737-8700
<http://www.afge.org>

American Federation of State, County and Municipal Employees (AFSCME)

This group is the Nation's largest and fastest-growing public service employees' union. It has 1.4 million members and is made up of people who serve the public every day in all areas of Government, health, education, and other services, both public and private.

1625 L Street NW
Washington, DC 20036-5687
202-429-1000
202-659-0446 (TTY)
<http://www.afscme.org>

American Psychological Association

For a full description, refer to Provider and Professional Organizations.

Anti Drug@Work

This website serves as a drug prevention information center and a supportive community for working parents to interact and learn from each other.

405 Lexington Avenue, 16th Floor
New York, NY 10174
800-729-6686
<http://www.theantidrug.com/atwork>

Communities of Tomorrow's Economic Development (CT)

This organization, in cooperation with industry players, associations, regional economic development authorities, and other stakeholders, aims to create economic development in the private sector. CT focuses on the expansion of existing enterprises and the creation of new enterprises to drive economic growth and maximize return on investment in innovation.

250-10 Research Dr., Innovation Place
Regina, Saskatchewan S4S 7J7
306-522-6699
<http://www.communitiestomorrow.ca>

Corporation for Supportive Housing (CHS)

For a full description, refer to Policy/Education.

DC Bar – Lawyers Assistance Program

For a full description, refer to Justice/Legal System.

Drug Free Business Houston/Drug Free Business Texas

This organization helps companies increase safety and productivity through the establishment of comprehensive drug-free workplace programs.

303 Jackson Hill Street
Houston, TX 77007
713-942-4100
http://www.council-houston.org/Workplace_Services.aqf

Employee Assistance Professionals Association, Inc. (EAPA)

This membership organization offers resources to employee assistance professionals.

4350 North Fairfax Drive, Suite 410
Arlington, VA 22203
703-387-1000
<http://www.eap-association.com>

Employee Assistance Society of North America

This society provides information for EAP professionals and organizations.

2001 Jefferson Davis Highway, Suite 1004
Arlington, VA 22202-3617
703-416-0060
<http://www.easna.org>

Employee Health Programs

This group, a subsidiary of First Advantage Corporation, designs and manages drug-free workplace programs, employee assistance programs, and other services that benefit employers and employees.

P.O. Box 2430
Rockville, MD 20827
800-275-7051
<http://www.ehp.com>

Federation of State Physician Health Programs (FSPHP)

This organization evolved from initiatives taken by the American Medical Association (AMA) and individual State physician health programs, focusing upon rehabilitation and monitoring of physicians with psychoactive substance use disorders as well as mental and physical illness.

c/o American Medical Association
515 North State Street, Room 8584
Chicago, IL 60654
312-464-4574
<http://www.fsphp.org>

Institute for a Drug-Free Workplace

This institute emphasizes the need for drug-free workplace programs and educates employers and the public at large about the rights and responsibilities of employers and employees with regard to drug use disorders and the workplace.

10701 Parkridge Boulevard, Suite 300
Reston, VA 20191
703-391-7222
<http://www.drugfreeworkplace.org>

International Brotherhood of Electrical Workers (IBEW)

This group represents approximately 750,000 members who work in a wide variety of fields, including utilities, construction, telecommunications, broadcasting, manufacturing, railroads, and government.

900 Seventh Street NW
Washington, DC 20001
202-833-7000
<http://www.ibew.org>

Labor Assistance Professionals (LAP)

This organization is composed of members of trade and industrial unions involved in the provision or administration of member assistance programs with special emphasis on issues of chemical abuse or dependency. It is dedicated to obtaining comprehensive alcohol and drug treatment and all other mental health services for its members at a reasonable and fair price.

13 Bolton Gardens
Bronxville, NY 10708
914-961-5867
<http://www.laborassistanceprofessionals.com>

Laborers' Health and Safety Fund of North America (LHSFNA)

This group exists to enhance jobsite safety and health, improve the competitiveness of signatory employers of the Laborer's International Union of North America (LIUNA), and strengthen LIUNA.

905 16th Street NW
Washington, DC 20006
202-628-5465
<http://www.lhsfna.org>

Lawyers Helping Lawyers

This organization provides confidential, non-disciplinary help for lawyers, judges, law students, and their family members with substance use or mental health problems. Assistance may take many forms, such as assessment, professional consultation, information about and referral to treatment resources, informal and formal interventions, and monitoring.

700 East Main Street, Suite 2035
Richmond, VA 23219
804-644-3212
<http://www.valhl.org>

National Drug-Free Workplace Alliance

The alliance offers drug-free workplace program assistance and education.

2600 Ninth Street North, Suite 200
St. Petersburg, FL 33704
727-471-0009
<http://www.ndwa.org>

National Safety Council (NSC)

This council is a nonprofit public service organization dedicated to educating and influencing people to prevent accidental injuries and deaths.

1121 Spring Lake Drive
Itasca, IL 60143-3201
800-621-7615
<http://www.nsc.org>

Office of Alcoholism and Substance Abuse Services National Association on Drug Abuse Problems, Inc.

A private nonprofit organization founded by business and labor leaders, this office provides programs that assist at-risk and underserved individuals to become independent, self-sufficient, and employed.

355 Lexington Avenue
New York, NY 10017
212-986-1170
<http://www.nadap.org>

Society for Human Resource Management (SHRM)

This is the world's largest association devoted to human resource management.

1800 Duke Street
Alexandria, VA 22314
800-283-7476
<http://www.shrm.org>

U.S. Chamber of Commerce

The U.S. Chamber of Commerce provides resources for U.S. businesses, including information on EAPs and drug testing.

1615 H Street NW
Washington, DC 20062-2000
202-659-6000
<http://www.uschamber.com>

Washington State Labor Council (WSLC)

This council represents and provides services for hundreds of local unions and trade councils throughout Washington State. It's core programs are legislative advocacy, political action, communications and media relations, and assistance with organizing campaigns.

314 First Avenue West
Seattle, WA 98119
800-542-0904
206-281-8901
<http://www.wslc.org>

Youth Programs

AnswersForTeens.com

This website provides information for teenagers seeking help if they are living with a parent who may be abusing alcohol/drugs. It provides information, helps teenagers think through their problems with their parents, and outlines places where teenagers can go for help. It builds off of Edith Lynn Hornik-Beer's book, "For Teenagers Living With a Parent Who Abuse Alcohol/Drugs."
<http://www.answersforteens.com>

Association of Recovery Schools (ARS)

For a full description, refer to Recovery/Treatment.

Augsburg College's StepUP Program

This program provides ongoing support to students in recovery who are willing and able to progress toward an academic degree through separate chemical-free housing, weekly individual support meetings, and community activities.
 2211 Riverside Avenue South
 Minneapolis, MN 55454
 612-330-1000
<http://www.augsburg.edu>

Big Brothers/Big Sisters of America

This youth mentoring organization helps at-risk youth overcome the many challenges they face.
 230 North 13th Street
 Philadelphia, PA 19107
 215-567-7000
<http://www.bbbsa.org>

Boy Scouts of America

This group offers character development programs and leadership training for boys.
 National Office
 1325 West Walnut Hill Lane
 Irving, TX 75015
 972-580-2000
<http://www.scouting.org>

Boys and Girls Clubs of America

This organization provides opportunities for recreation and companionship for children at home with no adult care or supervision.
 1230 West Peachtree Street NE
 Atlanta, GA 30309-3506
 404-487-5700
<http://www.bgca.org>

Camp Fire USA

This group offers services in areas such as youth leadership, self-reliance, after-school groups, camping, and environmental education.
 1100 Walnut Street, Suite 1900
 Kansas City, MO 64106-2197
 816-285-2010
<http://www.campfireusa.org>

Campaign for Tobacco-Free Kids

This campaign works to protect children from tobacco use and exposure to secondhand smoke.
 1400 Eye Street NW, Suite 1200
 Washington, DC 20005
 202-296-5469
<http://www.tobaccofreekids.org>

Community Alliances for Drug-Free Youth, Inc. (CADFY)/ Californians for Drug-Free Youth

Through community mobilization, CADFY co-develops and provides effective and comprehensive youth, adult, and family prevention/intervention/treatment and recovery community support services that are deployed through its national outreach bureau.
 1010 Second Avenue, Suite 1900
 San Diego, CA 92101
 619-557-5753
<http://www.cadfy.org>

Connecticut Turning to Youth and Families (CTYF)

This is a nonprofit organization established to strengthen prevention, treatment, and recovery support services for youth and families. Using the power of youth and families with their own stories, it offers peer-to-peer programs and services that are natural recovery supports for other youth and families.
 135 West Road
 Marlborough, CT 06447
 860-838-3553
<http://www.ctyouthandfamilies.org/ctyf>

D.A.R.E

This program is a police officer-led series of classroom lessons that teaches children from kindergarten through 12th grade how to resist peer pressure and live productive drug- and violence-free lives.
 P.O. Box 512090
 Los Angeles, CA 90051
 800-223-DARE
<http://www.dare.org>

Drug Free America Foundation, Inc.

For a full description, refer to Policy/Education.

Girl Scouts of the USA

The Girl Scouts are dedicated to helping all girls everywhere build character and gain skills for success in the real world.

420 Fifth Avenue
New York, NY 10018-2798
800-478-7248
212-852-8000
<http://www.girlscouts.org>

Junior Achievement

This organization educates and inspires young people to value free enterprise, business, and economics.

1 Education Way
Colorado Springs, CO 80906
719-540-8000
<http://www.ja.org>

MENTOR/National Mentoring Partnership

This group is widely acknowledged as the Nation's premier advocate and resource for the expansion of mentoring initiatives nationwide. MENTOR leverages resources and provides the support and tools that mentoring organizations need to effectively serve young people in their communities.

1600 Duke Street, Suite 300
Alexandria, VA 22314
703-224-2200
<http://www.mentoring.org>

**National Parent Teacher Association (PTA)
Drug and Alcohol Abuse Prevention Project**

For a full description, refer to Prevention.

National Student Assistance Association (NSAA)

This national membership organization of student assistance professionals offers early intervention and training on alcohol- and drug-related problems in thousands of schools across the country.

1704 Charlotte Pike, Suite 200
Nashville, TN 37203
800-257-6310
<http://www.nasap.org>

Network on Transitions to Adulthood

This group, supported by the John D. and Catherine T. MacArthur Foundation, examines the changing nature of early adulthood (ages 18-34), and the policies, programs, and institutions that support young people as they move into adulthood.

University of Pennsylvania Department of Sociology
3718 Locust Walk
Philadelphia, PA 19104-6299
215-898-1569
<http://www.transad.pop.upenn.edu>

Parents 4 A Change

This website works to raise awareness about the use of opiates and heroin among teenagers.

<http://www.parents4achange.com>

Partnership at Drugfree.org

This nonprofit organization helps parents prevent, intervene in, and find treatment for drug and alcohol use by their children. Bringing together renowned scientists, parent experts, and communications professionals, this public health nonprofit translates current research on teen behavior, parenting, addiction, and treatment into easy-to-understand resources at drugfree.org. The organization also reaches families through its community education programs, which focus on local drug and alcohol issues of concern for parents, youth, and the Hispanic community.

405 Lexington Avenue, Suite 1601
New York, NY 10174
212-922-1560
<http://www.drugfree.org>

Students Against Destructive Decisions (SADD)

This organization provides students with prevention tools to deal with underage drinking, other drug use, impaired driving, and other destructive decisions.

255 Main Street
Marlborough, MA 01752
877-SADD-INC (7233-462)
<http://www.sadd.org>

Students Taking Action Not Drugs (STAND)

This college-level substance abuse prevention marketing program educates students about the dangers of addictive drugs and mobilizes them to reduce substance use on their campuses.

5999 Central Avenue, Suite 301
St. Petersburg, FL 33710
727-828-0211
<http://www.studentstakingaction.org>

Teen Challenge International

This network of 240 centers throughout the United States (and in 82 nations) provides youth, adults, and families with effective and comprehensive faith-based solutions to life-controlling alcohol and drug problems. The Teen Challenge Training Centers are 8-to-14-month comprehensive residential recovery programs that deal with drug and alcohol addictions, offered at minimal cost to the participants.

5250 North Towne Centre Drive
Ozark, MO 65721
417-581-2181
<http://www.teenchallengeusa.com>

U.S. DEPARTMENT OF AGRICULTURE (USDA), 4-H

For a full description, refer to Schools/Youth under Federal Agencies.

U-Turn of SAARA, Inc.

This organization is dedicated to empowering disadvantaged people, especially youth, to improve their lives, thus enabling them to improve their communities and ultimately society.

306 Turner Road, Suite P

Richmond, VA 23225

804-762-4445

<http://www.saaracenter.org>



1-800-662-HELP (4357)
1-800-487-4889 (TDD)

WWW.RECOVERYMONTH.GOV



FAST FACTS

Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery

Every year, the Substance Abuse and Mental Health Services Administration (SAMHSA) releases the **National Survey on Drug Use and Health**, the prime source of information on the country's substance use and mental disorders. The survey includes information on the prevalence and patterns of substance use and mental disorders, along with treatment and recovery. This survey, along with many other reliable resources, contains useful statistics to use when promoting **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)**. This year's **Recovery Month** theme, "**Join the Voices for Recovery: Recovery Benefits Everyone,**" educates people in the United States about the impact of new legislation on access to health insurance and to treatment and recovery services. SAMHSA supports **Recovery Month** through several of its Strategic Initiatives, particularly the goals of increasing public awareness of substance use and mental disorders, health reform implementation, and offering recovery support through an individual, program, and system approach.

Below are general statistics relating to substance use disorders, mental health problems, recovery, and treatment that support the **Recovery Month** message that prevention works, treatment is effective, and recovery is possible. Additionally, this guide will discuss health reform and how it will affect people living throughout the United States. When developing your **Recovery Month** materials, include information in this fact sheet to convey the importance of recovery and to solidify your statements with facts.

Statistics on Prevention

- A majority of Americans (80 percent) have positive feelings about prevention and recovery from substance use disorders.¹
- Research shows that those who begin drinking at a later age are less likely to develop a substance use disorder than those who begin before age 21.²
- Children who learn about the risk of drugs at home are up to 50 percent less likely to use drugs than those who are not taught about the dangers.³
- Early geriatric screening and case management for mental health problems can result in significant decreases in institutionalization (2.5 percent are institutionalized with intervention versus 16.9 percent without intervention) and death (2.5 percent die with intervention versus 6.1 percent without intervention).⁴
- Mental health intervention initiatives, including school-based programs that target cognitive, problem-solving, and social skills of children and adolescents, have been found to reduce depressive symptom levels by 50 percent or more, one year after the intervention.⁵

Data on Substance Use and Misuse

- According to the World Health Organization, worldwide, approximately 2.5 million people die each year due to alcohol use and 15.3 million people have a drug dependence.⁶
- Children of alcohol-dependent parents have a 50 percent chance of developing their own dependence.⁷
- Only a third of parents discuss the risks of abusing prescription medicines with their kids.⁸
- Individuals treated for alcohol misuse are approximately 10 times more likely to commit suicide than those who do not misuse alcohol, and people who abuse drugs have about 14 times greater the risk for eventual suicide.⁹
- The prevalence of past-month alcohol use among youth aged 12 to 17 decreased to 14.7 percent in 2009 from 17.6 percent in 2002.¹⁰

Data on Mental Health Problems

- Results from the **2009 National Survey on Drug Use and Health** data show that in 2009, an estimated 45.1 million adults aged 18 or older in the United States (19.9 percent of the population) had any mental illness in the past year.¹¹
- A little more than half (54 percent) of young adults who know someone with a mental illness believe that treatment can help people with mental illnesses lead normal lives.¹²
- An overwhelming majority of Americans (84 percent) believe that people with mental illnesses are not to blame for their conditions.¹³
- Almost two-thirds of 18- to 24-year-olds know someone with depression or alcoholism and more than 40 percent of the 18- to 24-year-olds know others with a drug addiction.¹⁴
- According to the Adverse Childhood Experiences (ACE) study, childhood stressors such as abuse, witnessing domestic violence, and other forms of household dysfunction increase the likelihood of depression and suicide attempts in children, adolescents, and adults.¹⁵

Positive Impressions of Treatment and Recovery

- Approximately 75 percent of the population believes that recovery is possible from addiction to highly abused substances, such as alcohol, prescription drugs, and marijuana.¹⁶
- Half of all adults over age 18 know someone in recovery from an addiction to alcohol, illicit drugs, or prescription drugs.¹⁷
- Fewer than 20 percent of Americans say they would think less of a friend or relative if they discovered that person is in recovery from addiction to alcohol and/or drugs.¹⁸
- Between 70 and 90 percent of individuals with a mental health problem have significant reduction of symptoms and improved quality of life with a combination of medication, therapy, and other support.¹⁹
- Two-thirds of Americans believe that treatment and support can help people with mental illnesses lead normal lives.²⁰

2009 Statistics Related to Substance Use and Mental Disorders

- 4.3 million people aged 12 or older received treatment (at any location) for substance use disorders.²¹
- 2.6 million people received treatment for substance use disorders at specialty facilities (hospitals, drug or alcohol rehabilitation facilities, or mental health centers).²²
- Nearly 20.9 million people aged 12 or older (8.3 percent of the population) needed but did not receive treatment for substance use disorders in the United States.²³
- The rate of substance dependence or abuse for males aged 12 or older was nearly twice as high as the rate for females (11.9 vs. 6.1 percent).²⁴
- 31.9 percent of the 6.1 million adults aged 18 or older who reported an unmet need for mental health care didn't receive mental health services because they believed that their problem could be handled without care. In addition, 18.5 percent of these 6.1 million adults didn't know where to go for mental health care.²⁵
- Approximately 22 percent of adults with substance use and/or mental disorders were uninsured, and one in three had incomes below the Federal Poverty Level.²⁶
- Between 2002 and 2009, the percentage of youths aged 12 to 17 with a substance use disorder declined from 8.9 to 7.0 percent.²⁷

Economic Costs of Substance Use and Mental Disorders

- After individuals receive treatment for their substance use disorder, total medical costs per patient per month are more than halved, from \$431 to \$200.²⁸
- For every \$1 invested in treatment, taxpayers save at least \$7.46 in costs to society.²⁹
- Less than 10 percent of people with substance use disorders receive treatment, at a societal cost of over \$300 billion annually.³⁰
- Substance use disorders cost employers more than \$100 billion annually through increased accidents, increased health care claims and lost productivity.³¹
- The annual economic cost of mental health problems is estimated to be at least \$79 billion. Most of that amount—approximately \$63 billion—reflects the cost of lost productivity in the workplace.³²

Health Reform: What Do I Need To Know?

Health reform has the potential to impact everyone living in the United States, with the signing of the Affordable Care Act by President Barack Obama on March 23, 2010. The Affordable Care Act gives Americans more freedom and control over their health care, as well as new benefits that ensure people will receive the care they need at a more reasonable cost.

Each insurance plan will differ from person to person, but the Affordable Care Act already provides protections from insurance abuses that affect 2011 employer coverage. Coverage changes under both Medicaid and State Health Insurance Exchanges will be implemented by 2014, expanding coverage to millions who are currently uninsured. Many of the statutes will be implemented over the next few years and it is important to understand the benefits included in your health plan so you can best take advantage of what it has to offer. Below you can find some general provisions of the Affordable Care Act:

- Medicaid, a health program for low income individuals and families, will expand its eligibility to 133 percent of the Federal Poverty Level³³ and all newly eligible parents and adults without children will receive benefits, which include essential substance use and mental health services at parity.³⁴
- Insurance companies will be prohibited from imposing lifetime limits in all health plans and insurance policies.³⁵
- Starting in 2014, if an individual doesn't have access to insurance through their employer, they will be able to buy insurance directly in a State Health Insurance Exchange that gives more choices and lower prices.³⁶
- Insurance companies will be prohibited from denying coverage due to a pre-existing condition for children starting in 2011, and for adults in 2014.³⁷
- Starting in 2011, young people, up to age 26, can remain on their parents' health insurance policy.³⁸
- Most health plans will cover some important preventive services at no additional cost to you, including counseling for a substance use or mental disorder.³⁹

Additional information about the Affordable Care Act can be found at <http://www.HealthCare.gov>.

How Will the Affordable Care Act Affect Substance Use and Mental Health Treatment?

The Affordable Care Act along with the Mental Health Parity and Addictions Equity Act (MHPAEA) includes many new provisions aimed at improving coverage and access to substance use disorder and mental health problem prevention, treatment, and recovery support services. Together, both will help millions of people living in the United States whose health insurance plans had previously not covered those services. The passage of the MHPAEA provides parity, or the recognition by insurance services—both public and private—that substance use and mental disorders are treated comparably to other physical health and medical conditions. The following are key substance use and mental health provisions in the new Laws.

- All employer health insurance plans, with more than 50 employees enrolled, must comply with the MHPAEA. This means that if the employer chooses to include substance use and mental health treatment, these services must be offered at parity with other medical and surgical benefits. For instance, the co-payments and deductibles for a visit can't be larger and there can't be greater limits in behavioral health inpatient days than for medical and surgical inpatient days.⁴⁰
- Eligibility for Medicaid will be expanded, and all newly eligible parents and childless adults will receive basic benefits, including essential substance use and mental health services at parity.⁴¹
- A National Prevention Council has been created with the Office of National Drug Control Policy (ONDCP) Director as a member.⁴²
 - Substance use disorders has been listed as a national priority for that council's report to Congress.⁴³
 - SAMHSA will be required to be consulted on issues related to preventing substance use and mental disorders.⁴⁴

Inclusion of websites and other resources mentioned in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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DEVELOPING YOUR SOCIAL NETWORK

Social media effectively connects you with the world on issues that you are passionate about, including **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)**, as well as broader treatment and recovery topics. Through your organization's blog and social media platforms, such as Facebook and Twitter, you can reach a larger audience, allowing more rapid communication than through traditional media outlets. If you already have solid background knowledge of social networking, this document will help you expand your knowledge of social media to enhance your promotion of **Recovery Month** or treatment and recovery in general. If you are a social media beginner, it will be helpful for you to also refer to the "**New Media Glossary**" document in this toolkit, which clearly defines relevant terms.

Recovery Month is sponsored by the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT), within the U.S. Department of Health and Human Services (HHS). This year's theme, "**Join the Voices for Recovery: Recovery Benefits Everyone,**" emphasizes that:

- All Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost.
- Public awareness will increase access for those in need of essential substance use and mental health treatment and recovery support services, including behavioral health treatment.
- These legislative changes will improve the overall health and well-being of people in the United States.

The passage of the MHPAEA provides parity, or the recognition by all insurance services—both public and private—that substance use and mental disorders are treated comparably to other physical health and medical conditions.

This document will provide ideas on how to incorporate social media and social networks into your everyday life and spread **Recovery Month's** message and theme in September and throughout the year.

How Do I Start Incorporating Social Media Into My Everyday Life?

When working with social media, you must establish your goals and objectives, which will also determine how involved you will be within the social media network. For example, your goal may be to have over 500 Twitter followers, to post a new and interesting status every day, or to use a blog to create a forum for people affected by substance use and/or mental disorders. Keep your goals in mind when creating your own profile, account, or page. You will have extensive control over the content and the overall message that you want to include. First, start by searching social networking sites for organizations or social media members that have similar goals and missions, where discussions can be easily started and relationships built. Remember that social media and blogging rely on interacting and networking with others. Below are some tips that foster reciprocated support for your Facebook page, Twitter account, or blog from others.

- Posting positive statements on another user's wall
- "Liking" another page
- Updating your status to promote another page or initiative. By placing an "@" in front of the users name on Facebook, for example @**RecoveryMonth**, your status can link directly to the **Recovery Month** Facebook page
- Recommending that friends visit a Facebook page
- Re-tweeting a positive message concerning treatment or recovery issues
- Promoting another page's event if it relates to your overall message
- Commenting on a blog post you find helpful or useful and reposting it on your blog
- "Sharing" another page's status updates to show support

How Can I Use Blogs to Reach Out to Others in the Digital Space?

Blogs can be used to create online communities for people with similar interests or who support the same causes. Keep in mind that blogging requires a large time commitment. Coming up with fresh, new content and posting it at regular intervals makes a blog successful. If you don't think you will be able to post a new entry most days, your time might be better spent participating in conversations on other blogs, rather than starting your own.

Before you create your own personal blog, or one for your organization, use the resources below to gauge existing blogs and what topics they discuss.

- **Google Blog Search**, which you can search by date and relevance at <http://blogsearch.google.com>. Use this site to see what bloggers discuss about a specific topic, such as substance use and mental disorders, treatment, or recovery. To develop a relationship with the writer, you should follow the blog regularly, paying particular attention to the owner's latest posts so it shows that you are engaged.
- **Blog Pulse**, where you can search by date and relevance at <http://www.blogpulse.com>. Use this site to create a graph that plots the number of online conversations taking place about a specific topic. This will help you identify ways to positively contribute to the conversation.

If you decide to start your own blog, many websites offer guidance, such as Wordpress, accessible at <http://www.wordpress.com>, or Blogger, accessible at <http://www.blogger.com>. Once you name your blog and start to post, use sites such as Facebook or Twitter to promote it.

Use the following tips to help you connect with others on message boards and blogs:

- **Comment on other people's blog posts** and let them know about the resources available to help them combat a substance use and/or a mental health problem. Also, direct people to <http://www.recoverymonth.gov>.
- **Offer resources and support.** Treatment and recovery services are sometimes offered online, and anonymous users may post messages about their own recovery journey. Respond with words of encouragement or helpful information and resources. Tell them about **Recovery Month** activities and ways to get involved to further the campaign's reach.
- **Participate regularly in message boards** about substance use and mental disorders and recovery, and offer resources and tips.

How Do I Use Facebook to Promote *Recovery Month*?

Since its launch in 2004, Facebook has developed into a worldwide social networking website with more than 500 million active members. The site offers two unique ways to join: either with a personal account or with an official page account.

- A **personal account** is started by signing up with your name and email address. It features personal interests, contact information and other personal information, photos, and videos. You can change the privacy settings on your personal account page to limit or widen the visibility of what you want your friends or other Facebook users to see.
- An **official page** is used if you want your organization to join Facebook. These pages can help promote a company or an initiative and are entirely public, so non-Facebook users can view them as well.

Once you start an account, you can:

- Find other Facebook members by using the search function, and "friend" or "like" any pages that share the same interests as you.
- Share resources or link to sites that are helpful to those visiting your page, such as treatment or recovery services in your area.
- Create an "event page" and send invites to your friends with more information about a certain event in your community to publicize a **Recovery Month** event.

Add the **Recovery Month** Events Widget, accessible at <http://www.recoverymonth.gov/Community-Events/EventsWidget.aspx>, to promote your specific event or all **Recovery Month** events on your blog or website.

- The invitation should include the location, time and date, a brief description of the event, and the option of including any interesting or related links.
- Make sure to stress the importance of RSVPing to the event by clicking the yes, maybe, or not attending buttons.
- Since you are working in a digital space, you can create an online event, such as a rally or a forum, and invite your Facebook friends who are interested in **Recovery Month** to join and chat with others who actively promote treatment and recovery.

How Can I Use Twitter to Promote Recovery Month?

Another popular social networking site is Twitter, a microblogging service that allows “tweets,” or text-based posts up to 140 characters long, to be displayed on your profile page. These tweets are publicly accessible unless you edit your privacy settings. “Following” another Twitter account shows that you have interest in what they tweet, and lays groundwork for a relationship. The site is easy to use and allows you to choose your Twitter name, write a short biography, and to choose an account icon image. Below are some features of Twitter to help promote **Recovery Month**.

- Use the search function to look up keywords relating to **Recovery Month**, substance use and mental disorders, treatment, and recovery, to find conversations on the topic or users who have related interests or messages. When you find Twitter users who have similar interests, be sure to follow them and reply to their tweets. This is a great way to gain followers.
- If you come across an appealing tweet, **retweet** the information to share with others. To do this, add a “RT” in front of the text so other Twitter users realize that it is a re-tweet, and feel free to add commentary if you support the message. For example, “**YourUserName**: Yes! Only one more week! RT **@RecoveryMonth**: One week until **National Recovery Month!**”
- Show support to Twitter users who post on your feed by **replying to their post**. This can be done by using an “@” symbol directly before a Twitter user’s name, and be sure to thank and support their initiative to promote them.
- Create a **hashtag**, or “#” with a key phrase (like your organization’s name), to allow users to easily search for you using this key phrase. Make sure to use **#RecoveryMonth** whenever you want your tweet to link to the **Recovery Month** Twitter account.
- Send **direct messages**, or private tweets, to another Twitter user if you want to communicate privately.

Use Twitter to quickly and succinctly inform your followers or other users on general updates, events, or anything of interest to the treatment and recovery community. By joining members together, you can form an online community that can communicate about common interests or can be used as a support system. Be sure to start following **@RecoveryMonth** for information about upcoming events, personal stories of recovery, and general conversation about the benefits of treatment and recovery. Hopefully, they will follow you back!

Tips for starting an official Facebook page:

1. After signing up, fill out your profile with either your organization’s or personal information, including contact information.
2. Upload either a personal photo or your organization’s logo.
3. Control what information you make public by editing your privacy settings.
4. Use the search bar to find friends on Facebook, and “friend” them to include them in your network.
5. Update your status to let your network know you are new to Facebook and post any comments that will help support your page.

What Other Social Media Outlets Can Help Promote Recovery Month?

While Facebook and Twitter dominate the social networking space, other social media applications can be used to successfully spread ideas and communicate the **Recovery Month** message through video, photo, and location-based communication.

- Use **YouTube** to upload videos that relate to positive messages surrounding **Recovery Month**, substance use and mental disorders, and the benefits of treatment and recovery. Subscribe to different channels and comment on videos you enjoy, to grow your fan base and find others who share similar interests. When uploading videos, choose the most relevant category and use tags so other users can easily find your content.
- Use **Flickr** to display images and videos of **Recovery Month** events. Tag and title them with specific keywords, such as your organization or event name, so they can be found easily by search engines. Join a Flickr group that has similar interests and comment on their discussion boards or photos. You can also create your own group if you are unable to find one that relates to your organization or interests.
- Use **Foursquare** to “check in” at **Recovery Month** event locations using applications on smartphones (e.g., iPhone, BlackBerry, Android, Palm) or mobile Internet. This updates other **Recovery Month** supporters about the specific location of an event or networking opportunities in your community.

Be sure to check out the **Recovery Month** YouTube page, accessible at <http://www.youtube.com/user/RecoveryMonth>, to watch public service announcements and other videos relating to treatment and recovery.

How Can I Use Social Media Successfully?

There are many different ways to promote **Recovery Month** and your organization through social media. Always remember when working with social media that you are writing in a public forum where nothing is ever deleted. Also, to keep your friends or networks continually interested, be positive and keep your posts or statuses current, optimistic, and thought-provoking. If a friend on Facebook or a follower on Twitter is offensive, simply “defriend,” stop following the person, or even block him or her. If someone’s actions are inappropriate or threatening, contact your social media network’s administrator and file a report. Always remember that your goal is to spread positive messages and promote awareness for substance use and mental disorders, treatment, and recovery. If you are passionate about these topics, there are millions out there who share your interest and are willing to listen and share their stories as well.

Continue to visit the **Recovery Month** website, <http://www.recoverymonth.gov>, to see what resources are available to help you connect online. Keeping ahead of the social networking trends will help to promote your **Recovery Month** activities and raise awareness about substance use and mental disorders, treatment, and recovery.

Inclusion of websites and other resources mentioned in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

BUILDING COMMUNITY COALITIONS

Coalitions are made up of an alliance of people representing diverse organizations who work together to achieve a common goal. Bolster your **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)** campaign by creating a coalition to promote educational resources about substance use and mental disorders, treatment, and recovery. Conduct comprehensive research to find groups and individuals across the country who share your mission. Use social networking tools to educate and unite more people by expanding the reach of your coalition beyond your local community.

Millions of people of every race, age, gender, workplace, geography, or socioeconomic level suffer from substance use and mental disorders, and recovery is possible. With online and community support, you can reach these groups faster, easier, and more conveniently.

Sponsored by the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT), within the U.S. Department of Health and Human Services (HHS), this year's **Recovery Month** campaign, "**Join the Voices for Recovery: Recovery Benefits Everyone,**" emphasizes that all Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA). These laws aim to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost. The passage of the MHPAEA provides parity, or the recognition by all insurance services—both public and private—that substance use and mental disorders are treated comparably to other physical health and medical conditions. Additionally, public awareness will increase access for those in need of essential substance use and mental health treatment and recovery support services, ultimately improving the overall health and well-being of people in the United States.

How to Begin

Coalitions unite leaders who represent different constituencies, such as elected or appointed officials and business, educational, health services, social, and religious groups. They bring together grassroots organizations and people with a shared interest in achieving a mutual goal or need.

Participate in coalition activities by:

- Building your own if there is no active coalition that meets your needs
- Joining and supporting the **Recovery Month** efforts of a community coalition that already exists

Creating a new coalition provides you with more control and the ability to plan and implement your vision for your initiative. On the other hand, uniting with an existing coalition will save upfront planning time and allows you to quickly enhance existing efforts to celebrate **Recovery Month**. Remember that joining coalitions comprised of groups with different goals from your own may be useful. For example, partnering with a coalition whose focus is on preventing substance use and mental disorders, if your organization does not address that area, might offer a significant opportunity for your organization to branch out. Continue your coalition after your **Recovery Month** event concludes to strengthen support and collaboration of resources in your community.

Refer to the following tips to create or partner with a coalition in line with the goals of **Recovery Month**:

- **Decide specifically what issues related to substance use and mental disorders you want to address.** How are these problems being handled? For example, are there treatment and recovery resources in your community that address the specific needs of various populations? Engage policymakers, families, people in recovery, and health care providers in the dialogue to enhance treatment options and recovery support services.
- **Determine what resources are already available and what groups are currently involved online, in your community, and nationwide. Compare that with your own goals and resources.** Consider people in the public and private sectors who might make influential and positive contributions to your **Recovery Month** coalition. Find organizations to partner with, such as prevention, treatment, and recovery support services; law enforcement; and other social and educational agencies. Other organizations that have the resources and expertise needed to build a successful coalition around substance use and mental disorders include:

- Adult independent living communities
- Treatment and recovery organizations
- Child welfare organizations
- Criminal justice system
- Foundations and volunteer groups
- Government agencies
- Health-related organizations
- Individual and family therapists
- Mental health organizations
- National and local media outlets
- Private companies/businesses
- Recovery bloggers
- Recovery community
- Recovery and peer-to-peer support groups
- Schools, universities, and educational community
- Veterans' associations

Research all organizations before inviting them to join to ensure their mission aligns with yours. It's important that the relationship is mutually beneficial. For a coalition to be most effective, each member must be committed to the mission and work collaboratively. Online collaboration tools make it easier, allowing people to work remotely, rather than at the same location.

- **Recruit members to the coalition.** Contact your coalition's potential allies and invite them to join your coalition, or ask if they are already involved with one you could join. Be sure to reference any existing connections you have with members of their organizations. When you recruit people to participate in your effort, have substantive materials to show them, describe your mission, and ensure they have a specific role in the coalition. The following tools will help to build your coalition from the ground up and recruit members:

- Social media, such as Facebook (<http://www.facebook.com>) or Twitter (<http://www.twitter.com>)
- Email
- A website encouraging people to join
- Virtual meetings
- Online services to organize meetings simultaneously across the country, such as <http://www.meetup.com>

- **Confirm the coalition participants** and evaluate whether you have included a diverse panel of organizations that work with different groups in the community. Participation commitments can be informal verbal agreements or formal written contracts among the members, depending on the scope of the collaboration. For the coalition to be successful, keep in mind these guidelines:

- Be respectful of time commitments
- Allow all members to have an active role in planning and decision-making
- Set priorities and goals
- Agree on a communication process and responsibility for maintaining it
- Communicate and meet regularly
- Prepare a budget for activities and determine who will manage it
- Have a main contact person to coordinate members
- Decide the coalition's leadership early in the coalition's development

A solid leadership team needs to oversee the coalition and ensure the efficient and timely execution of the coalition's plan, while fostering communication and a clear sense of the coalition's direction.

- **Grade your coalition and celebrate its successes.** See a Community Anti-Drug Coalitions of America (CADCA) resource, which can be found at <http://www.cadca.org/resources/detail/evaluation-primer>, for tools to assess the effectiveness of your collaborative partnership efforts. Share your successes by posting your event materials, photos, and videos on **Recovery Month** social media outlets such as the **Recovery Month** Facebook page (<http://www.facebook.com/recoverymonth>), YouTube channel (<http://www.youtube.com/user/recoverymonth>), and Twitter account (<http://twitter.com/recoverymonth>). Refer to the "New Media Glossary" and "Developing Your Social Network" documents in this toolkit for ideas on how to use these online tools.

The Affordable Care Act gives Americans more freedom and control over their health care, as well as new benefits that ensure people will receive the care they need at a more reasonable cost. Below you can find some general provisions on the new law, some of which are effective immediately, while others will be enacted by 2020. Refer to “Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery” in this toolkit for more information.

- Medicaid, a health program for low income individuals and families, will expand its eligibility to 133 percent of the Federal Poverty Level and all newly eligible parents and adults without children will receive benefits, which include essential substance use and mental health services at parity.
- Insurance companies will be prohibited from denying coverage due to a pre-existing condition for children starting in 2011, and for adults in 2014.
- Starting in 2011, young people, up to age 26, can remain on their parents' health insurance policy.
- Most health plans will cover some important preventive services at no additional cost to you, including counseling for a substance use or mental disorder.

Successful Partnerships to Model

Community coalitions have supported prevention, treatment, and recovery issues for years. The **Recovery Month** observance has its own coalition made up of the **Recovery Month** Planning Partners. Organized in 1997, the Planning Partners include more than 130 groups involved in the prevention, treatment, and recovery from substance use and mental disorders. The group meets quarterly to establish goals and set priorities for **Recovery Month** every year. For a list of the Planning Partners, refer to the “Planning Partners” directory in this toolkit.

Additionally, the Office of National Drug Control Policy (ONDCP) and the U.S. Department of Justice fund hundreds of community partnerships throughout the country. In 2009, the CADCA estimated that there were more than 5,000 operational anti-drug coalitions in the United States.

The following are addiction and other health-related coalition examples that will help guide you in the coalition-building process:

- **Mental Health America of Indiana** – Accessed at <http://www.mentalhealthassociation.com>, this organization promotes the mental health and recovery of all Indiana citizens through educational programs to increase public understanding and acceptance of people with a substance use disorder or mental health problem.
- **Addiction Coalition** – Accessed at <http://www.addictioncoalition.org>, this coalition is committed to stopping addiction in Central Alabama by raising community awareness and accelerating communication among professionals fighting addiction.
- **Ohio Citizen Advocates** – Accessed at <http://www.oca-ohio.org/home0.aspx>, this group works to eliminate the misconceptions associated with alcohol and other drug addiction by educating the public that addiction is a preventable, treatable medical illness.

Recovery Month Planning Partner Resources

The following are **Recovery Month** Planning Partner organizations that you can use as resources to create successful coalitions.

Alcoholism and Substance Abuse Providers of New York State (ASAPNY)

This nonprofit membership association consists of coalitions, programs, and agencies throughout New York State that provide substance use disorder prevention, treatment, and research.

518-426-3122

<http://www.asapnys.org>

American Mental Health Counselors Association (AMHCA)

This association works exclusively for licensed mental health counselors by advocating for legislation that expands, enhances, and protects the right to practice; promotes mental health awareness; and builds the profession of mental health counseling nationally.

800-326-2642

703-548-6002

<http://www.amhca.org>

Community Anti-Drug Coalitions of America (CADCA)

This organization builds and strengthens the capacity of community coalitions to create safe, healthy, and drug-free communities. It supports members with technical assistance and training, public policy, media strategies, conferences, and special events.

800-54-CADCA (22322) (Toll-Free)

703-706-0560

<http://www.cadca.org>

Faces & Voices of Recovery

This national recovery advocacy organization mobilizes people in recovery from addiction to alcohol and other drugs, families, friends, and allies in campaigns to end discrimination and make recovery a reality for even more Americans.

202-737-0690

<http://www.facesandvoicesofrecovery.org>

Mental Health America (MHA)

This is the country's oldest and largest nonprofit organization addressing all aspects of mental health and mental illness. With more than 320 affiliates nationwide, MHA works to improve the mental health of all Americans through advocacy, education, research, and service.

703-684-7722

<http://www.nmha.org>

National Association for Children of Alcoholics (NACoA)

This national nonprofit membership and affiliate organization is the advocate and voice for children and families impacted by alcoholism or drug dependency in the family. NACoA provides training, evidence-based programs, materials, and public policy guidance to facilitate substance use prevention and recovery support for all impacted family members.

888-55-4COAS (2627) (Toll-Free)

301-468-0985

<http://www.nacoa.org>

National Council on Alcoholism and Drug Dependence, Inc. (NCADD)

Founded in 1944, NCADD and its Affiliate Network is a voluntary health organization dedicated to fighting the Nation's #1 health problem—alcoholism, drug addiction and the devastating consequences of alcohol and other drugs on individuals, families, and communities. NCADD focuses on increasing public awareness and understanding of the disease through education, prevention, information/referral, intervention, treatment services, advocacy, and recovery support services, and has helped millions of individuals and family members into recovery.

800-NCA-CALL (622-2255) (Hope Line)

212-269-7797

<http://www.ncadd.org>

National Inhalant Prevention Coalition (NIPC)

This public-private effort promotes awareness and recognition of the under-publicized problem of inhalant use. It serves as an inhalant referral and information clearinghouse, stimulates media coverage about inhalant issues, develops informational materials and a newsletter, provides training and technical assistance, and leads a week-long national grassroots education and awareness campaign.

800-269-4237

423-265-4662

<http://www.inhalants.org>

PLANNING PARTNERS

The following organizations are partners involved in planning **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)** activities in conjunction with the U.S. Department of Health and Human Services' Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT). You are encouraged to ask local and national organizations to collaborate with your organization on **Recovery Month** planning; please refer to the "**Building Community Coalitions**" document for tips. You can find local affiliates or chapters by contacting the national organizations directly. Full listings with addresses are included in the "**Prevention, Treatment, and Recovery Resources**" brochure.

A&E Network

*Inspired by the overwhelming response to its Emmy-nominated series **Intervention**, this television network created **The Recovery Project**, a multi-year campaign designed to generate widespread awareness that addiction is a treatable disease and recovery is possible.*

<http://www.therecoveryproject.com>

Addiction Survivors

This group is dedicated to providing online peer support communities for those with addiction, their families, and friends.

<http://www.addictionsurvivors.org>

Addiction Technology Transfer Center (ATTC) Network National Office

To advance public health and wellness, SAMHSA's ATTC Network accelerates lasting change in behavioral health care systems by translating, disseminating, and promoting the adoption and implementation of effective and culturally sensitive clinical practices. A list of ATTC Regional Centers, the States they serve, and contact information can be found on the ATTC Network website.

816-235-6888

<http://www.ATTCnetwork.org>

Adult Children of Alcoholics (ACA)

Newline World Service Organization (WSO)

This is a 12-step, 12-tradition program of women and men who grew up in alcoholic or otherwise dysfunctional homes. Members meet with each other in a mutually respectful, safe environment and acknowledge common experiences.

562-595-7831

<http://www.adultchildren.org>

Advocates for Recovery Through Medicine (ARM)

This organization's goals are to end stigma and discrimination against people who use medications to treat addictions and to move addiction treatment, especially opiate addiction treatment, into mainstream medicine.

810-250-9064

<http://www.atwatchdog.lefora.com>

Alcoholism and Substance Abuse Providers of New York State (ASAPNY)

This nonprofit membership association consists of coalitions, programs, and agencies throughout New York State that provide substance use disorder prevention, treatment, and research.

518-426-3122

<http://www.asapnys.org>

Aliviane NO-AD, Inc.

This nonprofit community-based organization is dedicated to the provision of HIV and substance use disorder prevention, intervention, treatment, education, and follow-up care to the residents of West Texas.

915-858-6208

<http://aliviane.org>

Alliance for Children and Families

This alliance provides services to the nonprofit child and family sectors and economic empowerment organizations.

414-359-1040

<http://www.alliance1.org>

American Association for Marriage and Family Therapy (AAMFT)

This association represents the professional interests of more than 25,000 marriage and family therapists throughout the United States, Canada, and abroad.

703-838-9808

<http://www.aamft.org>

American Association for the Treatment of Opioid Dependence (AATOD)

This group was founded in 1984 to enhance the quality of patient care in treatment programs by promoting the growth and development of comprehensive methadone treatment services throughout the United States.

212-566-5555

<http://www.aatod.org>

American Association of Pastoral Counselors (AAPC)

This association provides and promotes theologically informed, spiritually sensitive, ethically sound, and clinically competent counseling and consultation as an extension of the ministry of faith communities.

703-385-6967

<http://www.aapc.org>

American Bar Association (ABA)

Standing Committee on Substance Abuse

This committee promotes justice system reform that addresses problems associated with illegal use of drugs and alcohol in this country. To carry out this mission, the Standing Committee collaborates with other ABA entities; Federal, State, and local public/private organizations; and State, local, and territorial bar associations.

202-662-1000

<http://www.abanet.org/subabuse>

American Council for Drug Education (ACDE)

This council is a prevention and education agency that develops programs and materials based on the most current scientific research on drug use and its impact on society.

718-222-6641

<http://www.acde.org>

American College of Mental Health Administration (ACMHA)

ACMHA has a proven record of demonstrating the vision to pinpoint cutting-edge issues and support the development of innovative strategies to move the field. Now in its fourth decade, ACMHA is focused on equipping behavioral health leaders for a field that is rapidly changing in extraordinary times. The membership is a diverse working network of influential leaders and emerging leaders from across systems concerned with mental health and substance use conditions representing public and private administrators of services; national, State, and county government; professional organizations; managed behavioral health care organizations; research and academia; and consumer and family advocacy organizations.

505-822-5038

<http://www.acmha.org>

American Dental Association (ADA)

This group is the world's oldest and largest national dental society, representing more than 70 percent of dentists throughout the United States. The ADA is committed to helping its members better identify, understand, and accommodate the special health care needs of patients with substance use disorders, and to facilitating the journey of recovery for its member dentists and their respective office staffs.

312-440-2500

<http://www.ada.org>

American Mental Health Counselors Association (AMHCA)

This association works exclusively for licensed mental health counselors by advocating for legislation that expands, enhances, and protects the right to practice; promotes mental health awareness; and builds the profession of mental health counseling nationally.

800-326-2642

703-548-6002

<http://www.amhca.org>

American Psychological Association (APA)

This organization is the largest scientific and professional organization representing psychology in the United States. Its membership includes more than 150,000 researchers, educators, clinicians, consultants, and students.

800-374-2721

202-336-5500

<http://www.apa.org>

American Society of Addiction Medicine (ASAM)

This is an association of 3,000 physicians from across America dedicated to improving the treatment of alcoholism and other addictions, educating physicians and medical students, promoting research and prevention, and enlightening and informing the medical community and the public about these issues.

301-656-3920

<http://www.asam.org>

Arab and Middle East Resources Center (AMERC)

This nonprofit organization was founded to provide inter-culturally sensitive services to raise awareness about substance abuse and mental health problems. This will include public awareness and recovery support. AMERC is a member of Michigan Community Coalition for Change (MC3) and its mission is building bridges for recovery and well-being.

313-766-8712

Association of Lesbian and Gay Addiction Professionals and Their Allies, The (NALGAP)

This membership organization, founded in 1979, is dedicated to the prevention and treatment of alcoholism, substance use, and other addictions in lesbian, gay, bisexual, and transgender communities.

800-548-0497
<http://www.nalgap.org>

Association of Persons Affected by Addiction (APAA)

This nonprofit recovery community organization is designed to engage the faces and voices of the recovery community in reducing stigma and provides peer-to-peer recovery community support services.

214-634-APAA (2722)
<http://www.apaarecovery.org>

Association of Recovery Schools (ARS)

This organization advocates for the promotion, strengthening, and expansion of secondary and post-secondary programs designed for students and families committed to achieving success in both education and recovery. ARS exists to support such schools which, as components of the recovery continuum of care, enroll students committed to being abstinent from alcohol and other drugs and working a program of recovery.

215-628-8600
<http://www.recoveryschools.org>

Behavioral Health Services (BHS)

This nonprofit organization has provided a continuum of substance use, mental health, and senior services since 1973. Each of its 11 facilities (located throughout Los Angeles County) is based on its mission of transforming lives by offering hope and opportunities for recovery, wellness, and independence.

310-679-9126
<http://www.bhs-inc.org>

C4 Recovery Solutions, Inc.

This nonprofit was established to promote the design, provision, and monitoring of outcomes-based services that initiate and sustain recovery from substance use disorders, as well as improve prevention and harm reduction strategies that mitigate addiction's worst effects.

<http://www.c4recoveryolutions.org>

California Association of Addiction Recovery Resources (CAARR)

This association educates and provides statewide recovery resources for alcoholics and people with addiction problems living in California.

916-338-9460
<http://www.caarr.org>

Capitol Decisions, Inc.

This full-service government relations and public affairs firm provides counsel in distinct issue areas, including State and local government, public works, health care, and public health.

202-638-0326
<http://www.capitoldecisions.com>

Caron Treatment Center

This center offers detoxification, gender-separate rehabilitation, relapse treatment, and extended care for adults and adolescents; educational programs for family members; and student assistance services.

800-854-6023
<http://www.caron.org>

Catholic Charities, USA

This membership association provides vital social services to people in need, regardless of their religious, social, or economic backgrounds.

703-549-1390
<http://www.catholiccharitiesusa.org>

Center for Alcohol and Drug Research and Education

This international nonprofit organization provides public information and technical assistance, guidance, information, and expert service to individuals, organizations, governmental agencies, and a variety of nonprofit organizations in the private sector to improve the quality of their response to substance use disorders.

410-377-8992

Chicanos Por La Causa, Inc.

This nonprofit community development corporation offers social service programs and services throughout Arizona.

602-257-0700
<http://www.cplc.org>

Communities of Tomorrow's Economic Development (CT)

This organization, in cooperation with industry players, associations, regional economic development authorities, and other stakeholders, aims to create economic development in the private sector.

CT focuses on the expansion of existing enterprises and the creation of new enterprises to drive economic growth and maximize return on investment in innovation.

306-522-6699

<http://www.communitiestomorrow.ca>

Community Anti-Drug Coalitions of America (CADCA)

This organization builds and strengthens the capacity of community coalitions to create safe, healthy, and drug-free communities. It supports members with technical assistance and training, public policy, media strategies, conferences, and special events.

800-542-2322

703-706-0560

<http://www.cadca.org>

Connecticut Turning to Youth and Families (CTYF)

This is a nonprofit organization established to strengthen prevention, treatment, and recovery support services for youth and families. Using the power of youth and families with their own stories, CTYF offers peer-to-peer programs and services that are natural recovery supports for other youth and families.

860-838-3553

<http://www.ctyouthandfamilies.org/ctyf>

Corporation for Supportive Housing (CSH)

This organization, established in 1991, advances its mission to help communities create permanent housing to prevent and end homelessness by providing advocacy, expertise, leadership, and financial resources to make it easier to create and operate supportive housing.

212-986-2966

<http://www.csh.org>

CRC Health Group

This group offers the most comprehensive network of specialized behavioral care services in the Nation, serving over 30,000 people each day in 140 facilities and providing healing and hope in the lives of patients, students, and families. For over two decades, CRC programs have helped individuals and families reclaim and enrich their lives.

877-637-6237

408-998-7260

<http://www.crchealth.com>

DC Bar – Lawyers Assistance Program

Established in 1985, this is a free and confidential program assisting lawyers, judges, and law students who experience problems that interfere with their personal lives or their ability to serve as counsel or officers of the court.

202-737-4700

http://www.dcbbar.org/for_lawyers/bar_services/counseling/index.cfm

Elks Drug Awareness Resource Center

This program is the largest volunteer drug awareness program in the country. It is committed to eliminating the use and abuse of illegal drugs by all members of its society.

773-755-4700

<http://www.elks.org>

Employee Assistance Professionals Association, Inc. (EAPA)

This membership organization offers resources to employee assistance professionals.

703-387-1000

<http://www.eapassn.org>

Employee Health Programs

This group, a subsidiary of First Advantage Corporation, designs and manages drug-free workplace programs, employee assistance programs, and other services that benefit employers and employees.

800-275-7051

<http://www.ehp.com>

Entertainment Industries Council, Inc. (EIC)

This organization works within the film, television, and music industries to promote the accurate depiction of health and social issues in entertainment productions.

703-481-1414 (EIC East)

818-840-2016 (EIC West)

<http://www.eiconline.org>

EXECUTIVE OFFICE OF THE PRESIDENT (EOP)**White House Office of Faith-Based and Neighborhood Partnerships**

Located in seven Federal agencies, this group's goal is to make sure that grassroots leaders can compete on an equal footing for Federal dollars, receive greater private support, and face fewer bureaucratic barriers.

202-456-1414

<http://www.whitehouse.gov/administration/eop/ofbnp>

EOP, White House Office of National Drug Control Policy (ONDCP)

This component of the Executive Office of the President establishes policies, priorities, and objectives for the Nation's drug control program, which includes prevention, treatment, and recovery.

800-666-3332

<http://www.whitehousedrugpolicy.gov>

EOP, ONDCP**Information Clearinghouse**

This Federal office serves as a resource for statistics, research, data, and referrals useful for developing and implementing drug policy.

800-666-3332

<http://www.whitehousedrugpolicy.gov/about/clearingh.html>

Faces & Voices of Recovery

This national recovery advocacy organization mobilizes people in recovery from addiction to alcohol and other drugs, families, friends, and allies in campaigns to end discrimination and make recovery a reality for even more Americans.

202-737-0690

<http://www.facesandvoicesofrecovery.org>

Faith Partners

This organization promotes the prevention of alcohol, tobacco, and other drug abuse. It provides tools, training, materials, and assistance to congregations in several States.

512-394-9101

<http://www.faith-partners.org>

Foundations Associates

This is a treatment and advocacy organization dedicated solely to the treatment and recovery of people with co-occurring mental illness and substance use disorders. The agency has a full continuum of care, with locations in Memphis and Nashville, TN.

877-345-3357

615-256-9005

<http://www.dualdiagnosis.org>

Foundation for Recovery

This group promotes the positive impact recovery has in the community and in the lives of individuals and families affected by substance use and/or mental health conditions. Its programs, services, and partnerships open pathways for recovery by removing social barriers and creating opportunities for those seeking recovery.

702-257-8199

<http://www.forrecovery.org>

Friends of SAMHSA

This organization engages in communication, education, and grassroots advocacy. Its membership is diverse, both geographically and ideologically, and its mission is to increase awareness and advance the agenda of this critical services administration. This independent coalition is dedicated to bringing awareness to the important role that behavioral health plays in overall health. It believes that SAMHSA should be a major contributor to the formation of health policy and also seeks to work with SAMHSA's leadership to improve their dialogue with those in the field, so that in the end the consumer will benefit.

This organization is not affiliated with SAMHSA.

571-426-0297

<http://www.friendsofsamhsa.org>

Gaudenzia, Inc.

This group helps people affected by chemical dependency, mental illness, and related conditions to achieve a better quality of life—allowing them to live as productive and accountable individuals.

610-239-9600

<http://www.gaudenzia.org>

Georgetown University Health Policy Institute

This is a multi-disciplinary group of faculty and staff dedicated to conducting research on key issues in health policy and health services research. Institute members are engaged in a wide diversity of projects, focusing on issues relating to health care financing, the uninsured, Federal health insurance reforms, quality of care and outcomes research, mental health services research, and the impact of changes in the health care market on providers and patients.

202-687-0880

<http://ihcrp.georgetown.edu>

**George Washington University
Ensuring Solutions to Alcohol Problems Initiative**

This program works to increase access to treatment for individuals with alcohol problems by collaborating with policymakers, employers, and concerned citizens.

202-994-4303

<http://www.ensuringsolutions.org>

Health Matrix, Inc.

This organization develops communications programs that inform the debate on key issues in science, policy, and health care.

703-918-4930

<http://www.healthmatrixinc.com>

International Nurses Society on Addictions

This professional specialty organization offers information and education for nurses concerning prevention, intervention, treatment, and management of substance use disorders.

877-6-INTNSA (646-8672)

<http://www.intnsa.org>

**Jewish Alcoholics, Chemically Dependent Persons
and Significant Others (JACS)/**

**A Program of the Jewish Board of Family
and Children's Services (JBFCS)**

This program's mission is to help both individuals and the Jewish community at large effectively treat and prevent the problem of addiction. JACS provides a supportive network of Jews who are successfully in recovery and co-dependence, as well as the communal professionals, clergy, and educators who help them. The organization is a resource center where individuals, families, groups, and community institutions can turn for helpful, comforting guidance.

212-632-4600

<http://www.jacsweb.org>

Join Together

This national resource for communities working to reduce substance use disorders offers a comprehensive website, daily news updates, publications, and technical assistance.

617-437-1500

<http://www.jointogether.org>

Legal Action Center (LAC), The

This nonprofit law and policy organization fights discrimination against people with histories of substance use disorders, HIV/AIDS, or criminal records, and advocates for sound public policies in these areas.

800-223-4044

212-243-1313

<http://www.lac.org>

LifeRing

This international nonprofit organization offers sober, secular self-help. Members rely on the strength of each individual and the influence of sober conversation to abstain from alcohol and drugs. LifeRing welcomes people from all faiths, or none, but those beliefs are private. LifeRing brings people together via face-to-face and online support groups, and provides sobriety tools through original books, publications, and interactive online resources.

800-811-4142

<http://lifering.org>

**Massachusetts Organization for Addiction Recovery
(MOAR)**

This organization is a collective voice of people in recovery, families, and friends who are helping each other educate the public about the value of living in recovery and the resources to support recovery.

617-423-6627

<http://www.moar-recovery.org>

McShin Foundation, The

This foundation is Virginia's fastest growing peer-to-peer recovery community organization. Founded in 2004, The McShin Foundation is a nonprofit committed to serving individuals and families in their fight against substance use disorders.

804-249-1845

<http://www.mcshin.org>

Mental Health America (MHA)

This is the country's oldest and largest nonprofit organization addressing all aspects of mental health and mental illness. With more than 320 affiliates nationwide, MHA works to improve the mental health of all Americans through advocacy, education, research, and service.

800-969-6642

703-684-7722

<http://www.mentalhealthamerica.net>

Minnesota Recovery Connection (MRC)

Minnesota Recovery Connection is a community comprised of individuals, families, and entire communities seeking recovery. MRC offers hope and help for recovery, for those who need it, for those who want it, and for those who can give it.

651-233-2080

<http://www.minnesotarecovery.org>

MusiCares

This program provides a safety net of critical assistance for people in times of need. Its services and resources cover a wide range of financial, medical, and personal topics. It also focuses the resources and attention of the music industry on human service issues that directly impact the health and welfare of the music community.

877-303-6962

212-245-7840

<http://www.musicares.com>

Narconon

This is a nonprofit drug rehab program dedicated to eliminating drug abuse and drug addiction through drug prevention, education, and rehabilitation.

800-468-6933

323-962-2404

<http://www.narconon.org>

Narconon of Oklahoma

This group is located in Oklahoma and is part of the larger Narconon International group. It uses a full natural approach to treatment and recovery by teaching participants how to live a drug-free life.

800-468-6933

918-339-5800

<http://www.stopaddiction.com>

National Alliance for Medication Assisted Recovery (NAMA Recovery)

This is a membership organization representing people whose recovery from opiate dependence is assisted with medication. Its membership includes methadone patients, family members, and health care professionals whose common goal is to fight the ignorance and prejudice surrounding medication-assisted recovery.

212-595-NAMA (6262)

<http://www.methadone.org>

National Alliance of Advocates for Buprenorphine Treatment (NAABT)

This nonprofit organization has the mission to educate the public about the disease of opioid addiction and the buprenorphine treatment option, to help reduce the stigma and discrimination associated with patients with addiction disorders, and to serve as a conduit for connecting patients in need of treatment to qualified treatment providers.

860-269-4390

<http://www.naabt.org>

National Alliance to End Homelessness

This is a nationwide coalition of public, private, and nonprofit organizations devoted to ending homelessness.

202-638-1526

<http://www.endhomelessness.org>

National Asian Pacific American Families Against Substance Abuse, Inc. (NAPAFASA)

This private, nonprofit membership organization involves service providers, families, and youth to promote health and social justice and address the alcohol, tobacco, and other drug issues of Asian and Pacific Islander populations.

213-625-5795

<http://www.napafasa.org>

National Association of Addiction Treatment Providers (NAATP)

This association represents private substance use disorder treatment programs throughout the United States.

717-392-8480

<http://www.naatp.org>

National Association for Children of Alcoholics (NACoA)

This national nonprofit membership and affiliate organization is the advocate and voice for children and families impacted by alcoholism or drug dependency in the family. NACoA provides training, evidence-based programs, materials, and public policy guidance to facilitate substance use prevention and recovery support for all impacted family members.

888-55-4COAS (2627)

301-468-0985

<http://www.nacoa.org>

National Association for Alcoholism and Drug Abuse Counselors (NAADAC):

The Association for Addiction Professionals

This national nonprofit membership organization, with over 52 affiliates across the United States, American Territories and internationally, focuses on empowering addiction-focused professionals to achieve excellence through education, advocacy, knowledge, standards of practice, ethics and professional development, and research.

800-548-0497

703-741-7686

<http://www.naadac.org>

National Association on Alcohol, Drugs and Disability, Inc. (NAADD)

This association promotes awareness and education about substance use disorders among people with physical, sensory, cognitive, and developmental disabilities.

650-578-8047

<http://www.naadd.org>

National Association of County Behavioral Health and Developmental Disability Directors (NACBHD)

This nonprofit membership organization is comprised of county/local behavioral health authorities who plan and deliver mental health, developmental disability, and substance use disorder services, as well as the State associations that represent their interests.

202-661-8816

<http://www.nacbhd.org>

National Association of Drug Court Professionals (NADCP)

This association seeks to reduce substance use, crime, and recidivism by promoting and advocating for the establishment and funding of drug courts and providing for the collection and dissemination of information, technical assistance, and mutual support to association members.

703-575-9400

<http://www.nadcp.org>

National Association of Public Child Welfare Administrators (NAPCWA)

This association is devoted solely to representing administrators of State and local public child welfare agencies, bringing an informed view of the problems facing families today to the formulation of child welfare policy.

202-682-0100

<http://www.aphsa.org/napcwa>

National Association of Social Workers (NASW)

As the largest membership organization of professional social workers in the world, this organization works to enhance the professional growth and development of its members, to create and maintain professional standards, and to advance sound social policies.

202-408-8600

<http://www.socialworkers.org>

National Association of State Alcohol and Drug Abuse Directors (NASADAD)

This association supports the development of effective prevention and treatment programs throughout every State.

202-293-0090

<http://www.nasadad.org>

National Center on Addiction and Substance Abuse at Columbia University (CASA)

This organization is the only nationwide entity that brings together all the professional disciplines needed to study and combat abuse of all substances—alcohol, nicotine as well as illegal, prescription and performance enhancing drugs—in all sectors of society.

212-841-5200

<http://www.casacolumbia.org>

National Civic League (NCL)

This is a nonprofit, nonpartisan membership organization dedicated to strengthening citizen democracy by transforming democratic institutions. It fosters innovative community building and political reform, assists local governments, and recognizes collaborative community achievement.

303-571-4343

<http://www.ncl.org>

National Coalition for Mental Health Recovery (NCMHR)

This coalition ensures that consumers/survivors have a major voice in the development and implementation of health care, mental health, and social policies at the State and national levels, empowering people to recover and lead a full life in the community.

<http://www.ncmhr.org>

National Conference of State Legislatures (NCSL)

This is a bipartisan organization that serves the legislators and staffs of the Nation's 50 States, its commonwealths, and territories. It provides research, technical assistance, and opportunities for policymakers to exchange ideas on the most pressing State issues.

202-624-5400

<http://www.ncsl.org>

National Council on Alcoholism and Drug Dependence, Inc. (NCADD)

Founded in 1944, this organization and its Affiliate Network is a voluntary health organization dedicated to fighting the Nation's #1 health problem—alcoholism, drug addiction and the devastating consequences of alcohol and other drugs on individuals, families and communities. NCADD focuses on increasing public awareness and understanding of the disease of alcoholism and drug dependence through education, prevention, information/referral, intervention, treatment services, advocacy, and recovery support services, and has helped millions of individuals and family members into recovery.

800-NCA-CALL (622-2255) (Hope Line)
212-269-7797

<http://www.ncadd.org>

National Council on Alcoholism and Drug Dependence – Greater Detroit Area (NCADD-GDA)

This council provides effective alcohol and drug abuse intervention, prevention, and treatment services to children and adults with substance use disorders in the Detroit area.

313-868-1340
313-865-8951 (fax)

<http://www.ncadd-detroit.org>

National Council for Community Behavioral Healthcare

This group is the national association of community providers who together care for 6 million adults and children across the country who suffer from mental illnesses, developmental disabilities, and substance use disorders. Its members employ more than 250,000 staff and provide mental health and substance use treatment, rehabilitation, housing, and community support services.

202-684-7457

<http://www.thenationalcouncil.org>

National Council on Patient Information and Education (NCPIE)

This multi-disciplinary coalition works together to stimulate and improve communication of information on safe and appropriate medicine use to consumers and health care professionals.

301-340-3940

<http://www.talkaboutrx.org>

National Drug Court Institute (NDCI)

This institute promotes education, research, and scholarship for drug courts and other court-based intervention programs.

703-575-9400

<http://www.ndci.org>

National Governors Association (NGA) Center for Best Practices

This bipartisan nonprofit association represents the collective voice of the Nation's governors. Its mission is to help shape and implement national policy and help governors and their policy staff develop and implement innovative solutions to the challenges facing their States.

202-624-5300

<http://www.nga.org/center>

National Inhalant Prevention Coalition (NIPC)

This public-private effort promotes awareness and recognition of the under-publicized problem of inhalant use. It serves as an inhalant referral and information clearinghouse, stimulates media coverage about inhalant issues, develops informational materials and a newsletter, provides training and technical assistance, and leads a week-long national grassroots education and awareness campaign.

800-269-4237

423-265-4662

<http://www.inhalants.org>

National Organization on Fetal Alcohol Syndrome (NOFAS)

This organization provides education and awareness about the prevention of birth defects caused by alcohol consumption during pregnancy.

202-785-4585

<http://www.nofas.org>

National Rural Alcohol and Drug Abuse Network, Inc. (NRADAN)

This private, nonprofit foundation promotes networking between rural programs and professionals and provides liaisons to key Federal and State government agencies and private resources.

715-532-9030

<http://www.uwstout.edu/outreach/nri>

National Safety Council (NSC)

This council is a nonprofit public service organization dedicated to educating and influencing people to prevent accidental injuries and deaths.

800-621-7615

<http://www.nsc.org>

Network for the Improvement of Addiction Treatment (NIATx)

This network is a partnership between the Robert Wood Johnson Foundation's Paths to Recovery program, the Center for Substance Abuse Treatment's Strengthening Treatment Access and Retention (STAR) program, the National Institute on Drug Abuse, and a number of independent addiction treatment organizations. It works with addiction treatment providers to make more efficient use of their capacity and shares strategies for improving treatment access and retention.

608-265-0063

<http://www.niatx.net>

Newport Academy

This treatment center is dedicated to providing comprehensive, gender-specific, integrated treatment programs for adolescent males and females. It provides support in an environment of caring and compassion by which teens and their families may recover from the destructive effects of substance abuse and related behavioral health issues. It offers separate residential facilities and has an active after-school program in Orange County, CA.

866-382-6651

<http://www.newport-academy.com>

New York State Office of Alcoholism and Substance Abuse Services

This organization works to improve the lives of residents of New York by leading a system of addiction services through prevention, treatment, and recovery.

518-473-3460

<http://www.oasas.state.ny.us/index.cfm>

**North Carolina Department of Health and Human Services
Division of Mental Health**

Developmental Disabilities and Substance Abuse

This office is primarily responsible for leadership, guidance, and management of relationships with the local management entities who contract directly for addiction treatment services. It also collaborates with a wide variety of public and private partners and customers to promote recovery through the adoption of recovery-oriented systems of care and the promotion of a reduction of stigma and barriers to services.

919-733-4534

<http://www.dhhs.state.nc.us/MHDDSAS>

Northern Ohio Recovery Association (NORA)

This project provides faith-based recovery support services in a three-county area.

216-391-6672

<http://www.norainc.org>

Odyssey Networks

This network is the Nation's largest coalition of Christian, Jewish, and Muslim faith groups dedicated to achieving interfaith understanding through the production and distribution of media.

212-870-1030

<http://www.odysseynetworks.org>

Oxford House, Inc.

This is the umbrella organization for a network of more than 1,200 democratically run, self-supporting, and drug-free group homes throughout the country.

800-689-6411

301-587-2916

<http://www.oxfordhouse.org>

Partnership at Drugfree.org, The

This is a nonprofit organization that helps parents prevent, intervene in, and find treatment for drug and alcohol use by their children. Bringing together renowned scientists, parent experts, and communications professionals, this public health nonprofit translates current research on teen behavior, parenting, addiction and treatment into easy-to-understand resources on its website. The organization also reaches families through its community education programs, which focus on local drug and alcohol issues of concern for parents, youth, and the Hispanic community.

212-922-1560

<http://www.drugfree.org>

Partnership for Recovery (PFR)

This coalition includes the Betty Ford Center, Bradford Health Systems, Cumberland Heights, Father Martin's Ashley, Gateway Rehabilitation Center, Hazelden Foundation, Valley Hope Association, and the National Association of Addiction Treatment Providers.

202-737-8167

<http://www.partnershipforrecovery.org>

**Pennsylvania Department of Health
Bureau of Drug and Alcohol Programs**

This State government agency develops and implements a comprehensive health, education, and rehabilitation program for the prevention, intervention, treatment, and case management of drug and alcohol abuse and dependence.

717-783-8200

<http://www.health.state.pa.us/bdap>

Phoenix House

This nonprofit organization serves individuals throughout the country who are struggling with substance abuse and/or co-occurring mental health problems. It provides residential and outpatient treatment along with prevention and recovery support services.

646-505-2060

<http://www.phoenixhouse.org>

**Portland State University
Graduate School of Social Work**

This program offers the only graduate social work education programs in Oregon accredited by the Council on Social Work Education. The three major functions of the school are teaching, research, and community service.

503-725-4712

<http://www.pdx.edu/ssw>

PRO-ACT

This grassroots recovery support initiative in southeastern Pennsylvania (Bucks, Chester, Delaware, Montgomery, and Philadelphia Counties) has provided prevention, intervention, and recovery support services, as well as education and advocacy, to the community for 11 years. It has been providing a growing matrix of peer-to-peer support services, which has led to the opening of three Recovery Community Centers, now a hub for all recovery services.

800-221-6333

<http://www.proact.org>

Providence Center, The

This organization is the largest community mental health center in Rhode Island providing comprehensive services to adults, adolescents, and children experiencing mental health, substance use, emotional, and behavioral difficulties.

401-276-4000

<http://www.providencecenter.org>

Psychology Today

This organization is dedicated to helping people understand their addiction, the issues behind it, and how to overcome the challenge.

212-260-7210

<http://www.psychologytoday.com>

RASE Project, The

This project in south central Pennsylvania provides recovery support services, events, training and education, supportive housing, and intervention services. The RASE Project also offers the Buprenorphine Coordinator Program, providing recovery support for those in medication-assisted treatment for opioid addiction.

717-232-8535

<http://www.raseproject.org>

Reclaiming Futures

This initiative created by the Robert Wood Johnson Foundation (RWJF), housed in the Regional Research Institute of the School of Social Work at Portland State University, offers a new approach to helping teenagers caught in the cycle of drugs, alcohol and crime. In 29 communities across the Nation, the program has received investments to spread its model from RWJF, the Office of Juvenile Justice and Delinquency Prevention, SAMHSA's Center for Substance Abuse Treatment, and the Kate B. Reynolds Charitable Trust.

<http://www.reclaimingfutures.org>

Recovery Alliance of El Paso

The alliance was organized in 1998 to fight stigma and discrimination for people in recovery from substance use disorders, and is now dedicated to providing peer-to-peer recovery support services.

915-594-7000

<http://www.recoveryalliance.net>

Recovery Connection

This is a comprehensive addiction treatment resource and drug rehabilitation referral service. The organization has staff across the country available 24 hours a day to answer all concerns about substance use, addiction treatment, and rehabilitation.

800-993-3869

954-491-1771

<http://www.recoveryconnection.org>

Recovery Consultants of Atlanta, Inc. (RCA)

This is a nonprofit, faith-based organization founded by concerned, committed, and spiritually centered members of metro-Atlanta's recovery community. It collaborates with faith (primarily churches) and community-based organizations, develops peer-to-peer support services and programs, and works to build a network of recovering individuals.

404-289-0313

<http://www.recoveryconsultants.org>

Recovery Living Network

This global communications network focuses on addiction recovery and prevention, using the power of personal experience, celebrity influence, and mass media communication to help individuals when alcohol, drugs, or other excessive behaviors have become a problem in their life. Its mission is to remove misconceptions from the public psyche to change the perception and image of addiction by talking about it openly and honestly, and by sharing personal stories of hope and inspiration.

310-315-4727

<http://www.recoveryliving.com>

Recovery Network Foundation (RNF)

This foundation develops recovery-dedicated projects in print, radio, TV, film, and video formats. "Under the Influence: The Film Series" is a national touring festival that showcases films in which addiction and recovery play leading roles.

914-941-2863

<http://www.recoverynetworkfoundation.org>

RecoveryNC

*Initiated in September of 2008 to coincide with the celebration of **Recovery Month**, this campaign allows North Carolinians in recovery to emerge together, along with their families, friends, advocates, and the treatment and recovery provider community.*

919-802-7972

<http://www.recoverync.org>

ReNew Media, LLC

*This multi-media company serves the addiction recovery community. Currently, the company delivers its content through various digital and print means, including its website, reneweveryday.com, mobile applications, social media and its national print magazine, *Renew*.*

773-883-4474

773-883-9892

<http://www.reneweveryday.com>

ReStart, Inc.

This nationally accredited, full-service behavioral health care provider offers a wide range of diagnostic and treatment services tailored to meet individual needs, including community support services for adults, children, and adolescents. It offers diagnostic assessments, child and adult therapy, families and group sessions, assessments and counseling, residential treatment for girls, behavioral therapy, assertive community treatment teams, psychological evaluations, intensive in-home services, and community support teams.

252-355-4725

<http://www.restarthumanservices.com>

Rockstar Superstar Project (RSSS)

This organization spreads awareness about the disease of addiction and celebrates recovery by offering programs that spread hope to those affected by addiction, especially youth. RSSS is about inspiring and encouraging others to believe in themselves and to dream catch; to make responsible choices by waking up every day and "doing the right thing." All of the projects through RSSS are based upon the idea of rebranding sobriety by creating venues to have those crucial conversations and by inspiring others to share their gifts with the world.

<http://www.rockstarsuperstarproject.com>

Sagebrush

This holistic residential substance abuse treatment center for adults provides a small, individualized clinical program to give an ideal recovery environment where one can focus on mental, physical, and spiritual well-being.

888-406-7444

<http://www.sagebrushva.com>

Second Road, Inc., The

This is a 24-hour web-based nonprofit group to help those in recovery (and the families of those affected by addiction) learn to live with the challenges presented by everyday life and continue on a fulfilling road of recovery. The site offers a community of trust and understanding, inspiring stories from people of diverse cultures and backgrounds, the knowledge of many experts in the addiction treatment field, and the tools to resist relapse in a secure, non-threatening environment.

434-295-9595

<http://www.thesecondroad.org>

Shinnyo-en Foundation

This organization helps build more caring communities by supporting educational programs that engage and inspire young people in meaningful acts of service. The Foundation was established in 1994 by Shinnyo-en, a lay Buddhist order whose members strive to live with utmost sincerity and respect for others.

415-777-1977

<http://www.sef.org>

SMART Recovery®**(Self-Management And Recovery Training)**

This international nonprofit organization offers free, self-empowering, science-based mutual help groups for abstaining from any substance or activity addiction. The SMART Recovery 4-Point Program® helps people recover from all types of addictive behaviors, including alcohol, drugs, substance abuse, gambling addiction, and addiction to other substances and activities.

SMART Recovery® currently sponsors more than 600 face-to-face meetings around the world, and more than 16 online meetings per week.

866-951-5357

440-951-5357

<http://www.smartrecovery.org>

Sobriety TV

This group produces, acquires, and licenses documentaries and independent films about addiction and recovery and publishes the content on YouTube.

301-455-8381

<http://sobriety.tv>

State Associations of Addiction Services (SAAS)

This is the national organization of State provider associations representing treatment and prevention programs for substance use disorders.

202-546-4600

<http://www.saasnet.org>

Steppin' Out Radio

The goal of this unique radio show is to produce powerful radio broadcasts and provide an outlet for participants in 12-step-meetings to share their stories.

845-359-3299

<http://www.steppinouradio.com>

Stepping Stone of San Diego

This group provides treatment and recovery services focusing on the lesbian, gay, bisexual, and transgender communities.

619-295-3995

<http://www.steppingstonesd.org>

Substance Abuse and Addiction Recovery Alliance (SAARA)

This is a community-based grassroots membership organization of individuals in recovery from alcohol and other drug addiction, their families, friends, and committed community supporters.

804-762-4445

<http://www.saara.org>

Support for Addictions Prevention and Treatment in Africa Foundation (SAPTAF)

This is a nonprofit organization focused on support for prevention and treatment in Africa from alcohol and other drug problems, serving as a resource to improve the well being of individuals, families, and communities.

917-892-0423

<http://www.sapta.or.ke/home>

Talk Therapy Television

Talk Therapy Television, Inc., or Talk Therapy TV, is a private, not-for-profit organization that produces and broadcasts weekly television programming dedicated to promoting behavioral health awareness, treatment, and recovery. Additionally, Talk Therapy TV promotes creative and innovative ideas that generate public dialogue and discussion, and reduce the stigma associated with these disorders.

631-780-2807

<http://www.talktherapytv.org>

TASC, Inc. of Illinois

This is a statewide, not-for-profit organization that links courts and prisons to community-based alcohol/drug treatment and recovery support.

312-787-0208

<http://www.tasc.org>

T.A. Libby Group, The

This group provides addiction science education and recovery advocacy through published work, continuing education workshops, conference presentations, and visibility events.

443-822-6791

<http://www.talibby.com>

**Texas Department of State Health Services
Community Mental Health and Substance Abuse Services**

This department works to improve the health and well-being of people living in Texas. The department built an extensive research and reference collection in the area of substance abuse prevention and treatment, which is available online.

512-458-7111

<http://www.dshs.state.tx.us/default.shtm>

Teen Challenge International

This network of 240 centers throughout the United States (and in 82 Nations) provides youth, adults, and families with effective and comprehensive faith-based solutions to life-controlling alcohol and drug problems. The Teen Challenge Training Centers are 8- to 14- month comprehensive residential recovery programs that deal with drug and alcohol addictions, offered at minimal cost to the participants.

417-581-2181

<http://www.teenchallengeusa.com>

Treatment Communities of America (TCA)

This national nonprofit membership association represents more than 650 substance use and mental health treatment programs that provide a variety of services to substance use and co-occurring disorder clients with a range of special needs.

202-296-3503

<http://www.therapeuticcommunitiesofamerica.org>

Turning Point

This organization has served the Minnesota community since 1976, providing African Americans with a holistic approach to counseling and treatment.

612-520-4004

<http://www.ourturningpoint.org>

U.S. DEPARTMENT OF DEFENSE (DOD)

This department provides a wide array of services to prevent substance use disorders, including worksite education, drug testing, early intervention, outpatient counseling, and inpatient treatment.

703-681-0064

<http://www.defenselink.mil>

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS)

This Federal Government agency protects the health of all Americans and provides essential human services, especially for those who are least able to help themselves.

877-696-6775

<http://www.hhs.gov>

HHS, Food and Drug Administration (FDA)

This Government agency is responsible for protecting the public health by assuring the safety, effectiveness, and security of human and veterinary drugs, vaccines, and other biological products, medical devices, our Nation's food supply, cosmetics, dietary supplements, and products that give off radiation.

800-216-7331

301-575-0156

<http://www.fda.gov>

**HHS, Health Resources and Services Administration (HRSA)
Poison Control Program**

This program oversees the national toll-free Poison Help line, 800-222-1222, which connects callers to their nearest poison center, 24 hours a day, 7 days a week for help in a poisoning emergency. Calls are free and confidential and can be translated into 161 languages.

800-222-1222

<http://www.poisonhelp.hrsa.gov>

HHS, National Institutes of Health (NIH)**National Institute on Alcohol Abuse and Alcoholism (NIAAA)**

This Federal institute provides leadership in the national effort to reduce alcohol-related problems by conducting and supporting research in a wide range of scientific areas.

301-443-3860

<http://www.niaaa.nih.gov>

**HHS, National Institutes of Health (NIH)
National Institute on Drug Abuse (NIDA)**

This Federal institute supports most of the world's research on the health aspects of drug use and addiction. It carries out a large variety of programs to ensure the rapid dissemination of research information and its implementation in policy and practice.

301-443-1124

<http://www.drugabuse.gov>

**HHS, Substance Abuse and Mental Health
Services Administration (SAMHSA)**

This Federal agency improves the quality and availability of prevention, treatment, and rehabilitative services to reduce illness, death, disability, and cost to society resulting from substance use disorders and mental illnesses. It lists a range of resources on its "Find Substance Abuse and Mental Health Treatment" website, <http://www.samhsa.gov/treatment>.

800-662-HELP (4357) (SAMHSA's National Helpline)

877-SAMHSA-7 (726-4727) (Information/materials)

240-276-2130

<http://www.samhsa.gov>

HHS, SAMHSA**Center for Mental Health Services (CMHS)**

This Federal center seeks to improve the availability and accessibility of high-quality community-based services for people with or at risk for mental illnesses and their families. It collects, analyzes, and disseminates national data on mental health services designed to help inform future services policy and program decision-making.

800-789-2647

240-221-4021

<http://samhsa.gov/about/cmhs.aspx>

HHS, SAMHSA**Center for Substance Abuse Prevention (CSAP)**

The mission of this center is to bring effective substance use prevention to every community nationwide. Its discretionary grant programs—whether focusing on preschool-age children and high-risk youth or on community-dwelling older Americans—target States, communities, organizations, and families to promote resiliency, promote protective factors, and reduce risk factors for substance use.

240-276-2420

<http://www.samhsa.gov/about/csap.aspx>

HHS, SAMHSA**Center for Substance Abuse Treatment (CSAT)**

*As the sponsor of **Recovery Month**, CSAT promotes the availability and quality of community-based substance use treatment services for individuals and families who need them. It supports policies and programs to broaden the range of evidence-based effective treatment services for people who abuse alcohol and drugs and that also address other addiction-related health and human services problems.*

240-276-2750

<http://www.samhsa.gov/about/csat.aspx>

U.S. DEPARTMENT OF JUSTICE (DOJ)**Drug Enforcement Administration (DEA)**

This Federal agency enforces the Nation's controlled substances laws and regulations, works to reduce the availability of illegal drugs, and has a prevention arm devoted to reducing the demand for these drugs. The DEA contributes its "street-smart" perspective and skills to the field and helps to link law enforcement with other providers.

202-307-1000

<http://www.dea.gov>

DOJ, Community Capacity Development Office

This multi-agency's strategy is to "weed out" violent crime, gang activity, and drug trafficking, and "seed" human services to the areas where these activities occur, encompassing prevention, intervention, treatment, and neighborhood revitalization.

202-616-1152

<http://www.ojp.usdoj.gov/ccdo>

U.S. DEPARTMENT OF TRANSPORTATION (DOT)**National Highway Traffic Safety Administration (NHTSA)**

The mission of this Federal agency is to develop partnerships to cooperatively save lives, prevent injuries, and reduce traffic-related health care and economic costs resulting from impaired driving from using alcohol and other drugs.

888-327-4236

<http://www.nhtsa.gov>

U.S. SMALL BUSINESS ADMINISTRATION (SBA)

Grantees of the Paul D. Coverdell Drug Free Workplace Program assist small businesses with the implementation of a drug-free workplace program by providing financial, technical, and management assistance, including information about grants/loans and employee assistance programs.

800-827-5722

<http://www.sba.gov>

United for Recovery

This nonprofit organization is an advocacy group for people in treatment and in recovery. It works to broaden public awareness and understanding of addiction and recovery and increase opportunities for people to get the help they need.

310-704-1336

United Methodist Church – General Board of Church and Society of the United Methodist Church

This agency of the United Methodist Church offers faith-based substance abuse prevention advocacy training for local churches and faith-based programs to de-stigmatize addiction and provide church-wide training on substance use disorders.

202-488-5600

<http://www.umc-gbcs.org>

UNITED STATES AGENCY FOR INTERNATIONAL DEVELOPMENT (USAID)

This independent Federal Government agency receives overall foreign policy guidance from the Secretary of State. The agency supports long-term and equitable economic growth and advances U.S. foreign policy objectives by supporting economic growth, agriculture and trade; global health; and democracy, conflict prevention, and humanitarian assistance.

202-712-4810

<http://www.usaid.gov>

University of Baltimore, School of Law Center for Families, Children and the Courts

This group's mission is to create, foster, and support a national movement to integrate communities, families, and the justice system to improve the lives of families and the health of the community.

410-837-5750

<http://law.ubalt.edu/cfcc>

Volunteers of America

This is a national, nonprofit, faith-based organization dedicated to helping those in need rebuild their lives and reach their full potential. Through thousands of human service programs, including housing and health care, the group helps nearly 2 million people in more than 400 communities.

800-899-0089

703-341-5000

<http://www.voa.org>

White Bison, Inc.

This nonprofit organization disseminates culturally based principles, values, and teachings to support healthy community development and servant leadership, and to support healing from alcohol, substance abuse, co-occurring disorders, and intergenerational trauma. It offers learning resources to the Native American community nationwide on topics such as sobriety, recovery, prevention, and wellness/wellbriety.

877-871-1495

719-548-1000

<http://www.whitebison.org>

SINGLE-STATE AGENCY DIRECTORY:

Prevention and Treatment of Substance Use and Mental Disorders

Each U.S. State and territory offers information and support regarding substance use and mental disorders through the local government offices listed below. The following facilities are licensed, certified, or otherwise approved for inclusion by their State's substance use and mental health treatment authority. Their role is to plan, carry out, and evaluate substance use and mental disorder prevention and treatment services provided to individuals and families. During disasters, these offices can play a critical role in directing resources where they are most needed. Specifically, they oversee treatment centers and counselors in their respective States and, in many cases, supply funding to providers, track State trends, and ensure that residents receive the services to which they are entitled. **Unless the substance use and mental health offices are combined—as they are in several States—the mental health services office is listed first, followed by prevention services, then the substance use services office.**

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National
Recovery Month

Prevention Works • Treatment is Effective • People Recover

SEPTEMBER 2011

CUSTOMER SATISFACTION FORM

National Recovery Month Customer Satisfaction Form

The Substance Abuse and Mental Health Services Administration (SAMHSA) would like to know about your **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)** efforts this September and how useful these materials were for planning your activities. This information will be used in the development of future materials distributed by SAMHSA's Center for Substance Abuse Treatment (CSAT), within the U.S. Department of Health and Human Services (HHS).

Your response is voluntary, but essential so that future **Recovery Month** materials meet your needs. Please complete this form and return it by mail or fax to the address below by Friday, October 28, 2011. SAMHSA encourages you to include photographs and/or samples of supporting materials from your **Recovery Month** activities. This customer satisfaction form can also be found online at <http://www.recoverymonth.gov>.

This customer satisfaction form can be found online at http://www.recoverymonth.gov .	
Name:	Title:
Organization name & mailing address:	Phone & fax numbers:
Organization website address:	Email address:
Please provide a brief description of your event or major activities. (Please attach additional sheets, if necessary.)	
Did you receive media coverage? If yes, who covered your event? (Please attach a brief summary or copies of articles.)	



Please tell us which materials listed below you used and provide suggestions for improving them.

Printed Materials

	Used It? (Y/N)	How Useful Was It?	Comments/Suggestions
Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery			
Developing Your Social Network			
Building Community Coalitions			
Planning Partners Directory			
Single-State Agency Directory			
Prevention, Treatment, and Recovery Resources			
Targeted Outreach Booklet			
Commonly Misused Substances Booklet			
Join the Voices for Recovery Mini-Book			

Online Materials

Promoting Recovery Month With Events			
Working With the Media			
Press Materials for Your Recovery Month Event			
Writing an Op-ed During Recovery Month			
Official Recovery Month Proclamations			
Using PSAs to Promote Recovery Month			
Banners, Letterhead, and Logos			
Overview: Recovery Benefits Everyone!			
A Policymaker's Guide for Combating Substance Use and Mental Disorders			
Substance Use and Mental Disorders Affect All Individuals			
Health Care Providers' Role in Addressing Substance Use and Mental Disorders			
Addressing Substance Use and Mental Disorders in the Workplace			
Treatment and Recovery: Finding Personalized Help			
Commonly Misused Substances			
New Media Glossary			

Please send your response to:

**SUBSTANCE ABUSE AND MENTAL HEALTH
SERVICES ADMINISTRATION
ATTN: Consumer Affairs
Center for Substance Abuse Treatment
1 Choke Cherry Road, Second Floor
Rockville, MD 20857
Fax: 240-276-2710**

Thank you for sharing your **Recovery Month** story with us.

NOTE: Public reporting for this collection of information is estimated to average 10 minutes per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: SAMHSA Reports Clearance Officer, Paperwork Reduction Project (0930-0197); Room 5-1039, 1 Choke Cherry Road, Second Floor, Rockville, MD 20857. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0930-0197 and the expiration date is 3/31/2014.

PROMOTIONAL EVENTS

Promoting *Recovery Month* With Events

Hosting a special event during September in observance of **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)** is a great way to unite communities in support of treatment and recovery support services for substance use and mental disorders. This year's **Recovery Month** theme, "**Join the Voices for Recovery: Recovery Benefits Everyone,**" emphasizes that all Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost. Additionally the theme emphasizes that public awareness will increase access for those in need of essential substance use and mental health treatment and recovery support services, including behavioral health treatment.

Every year, the **Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT)**, within the **U.S. Department of Health and Human Services (HHS)**, stresses the importance of sponsoring events to support individuals and their families who are in recovery and to honor the service providers who helped and supported them. By holding a **Recovery Month** event, you will provide your community with information and resources on substance use and mental health treatment and recovery. Additionally, you will fulfill several of SAMHSA's **Strategic Initiatives**, particularly the goals of increasing public awareness of substance use and mental disorders, health reform implementation, and offering recovery support through an individual, program, and system approach.

Did you know that under the Affordable Care Act Medicaid will expand its eligibility to 133 percent of the Federal Poverty Level and all newly eligible parents and adults without children will receive basic benefits, which include essential substance use and mental health services at parity? Find out more about how provisions under the new law are specifically aimed at improving access to substance use and mental disorder treatment by visiting the "Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery" document in this toolkit.

This document guides you through the **Recovery Month** event planning process from start to finish. Examples of various sizes of **Recovery Month** events are included to provide ideas for events in your local community. Here you will find the materials you need to support this national movement, garner attention for the **Recovery Month** mission, and help your community overcome misconceptions associated with substance use and mental disorders through an engaging, informational, and exciting event. With your effort, the community will learn about the effectiveness of prevention and treatment, the possibility of recovery, and the contributions that individuals in recovery make to their community every day.

What Are the Different Types of *Recovery Month* Events?

To plan a **Recovery Month** event, it's important to consider which event will be best for your community. Whether large or small, remember that your overall goal is to open a dialogue about the positive impact that treatment and recovery has on individuals and the community. You know your community best, so choose an event that will be well received and appropriately communicate the **Recovery Month** mission for your audience. Below are some examples of past events and activities to give you ideas on how to start planning your own.

A **forum** or **community roundtable** is an event that allows community members to discuss the benefit that treatment and recovery has on our society and how people can access treatment and recovery support services. It also provides a great opportunity to incorporate this year's **Recovery Month** theme, "**Join the Voices for Recovery: Recovery Benefits Everyone,**" and discuss health reform, your community's access to substance use and mental health treatment and recovery support services, and the overall benefits of providing them. Invite health care providers who work with people with substance use or mental disorders to speak about how treatment and recovery positively helps their patients, as well as individuals in recovery who can tell their personal stories and who they are today because of recovery. Remember to allow time for a question and answer session.



A **rally** unites a community to demonstrate the importance of substance use and mental disorder treatment and recovery. Encourage attendees to make their own signs and rehearse chants of support such as, “Recovery for you and me, benefits society!” The rally also can include speeches by a motivational speaker or individuals in recovery and hosted in conjunction with a **walk or run**. Depending on the size of your community, a walk or run of any length can attract a broader public audience and raise awareness about recovery through a healthy activity. In September 2010, community members in Houston, TX hosted the “**Run for Recovery & Citywide Sobriety Celebration**,” a 5K walk/run race featuring an “After Race After Party,” with live music, an awards ceremony featuring local, State, and national dignitaries, a volleyball tournament, children’s activities, and a cook-off competition. **Community fairs or festivals** also are entertaining ways to bring together large groups of people and inviting keynote speakers, such as elected officials or celebrities, to help draw a larger audience.

Incorporate this year’s **Recovery Month** theme, “**Join the Voices for Recovery: Recovery Benefits Everyone**,” which educates the public about how recent legislative changes will broaden the availability of treatment and recovery services for those in need of substance use and mental disorders, into printed materials like an informational brochure.

Hosting an informational booth at a **professional, minor league, or high school sporting event** is a great way to distribute information on substance use and mental disorder treatment and recovery, especially to a younger audience. Today’s youth are the future, so let them know that substances such as alcohol and/or drugs can greatly harm their health now and in the future. Modify the materials in the “**Targeted Outreach**” section of this toolkit to get a jump start.

A **prayer weekend** is a cost-effective way to promote that recovery is possible and assemble people together to gain support for **Recovery Month**. Places of worship help to reach people and families in recovery who find hope and strength in their religion. The East Central Florida region came together in September 2010 for a “**Non-Denominational Prayer Ceremony**” as part of a larger celebration in honor of **Recovery Month**. Insert **Recovery Month** messages and events into bulletins, newsletters, and outdoor signage to spread the campaign to the congregation and other community members.

Consider **hosting a webinar or other online event** to allow the online community to participate in **Recovery Month**. An online event can feature experts in the treatment field with a question and answer session to allow participants to interact “live.” A digital event provides a platform to garner support from people all around the world, allowing for open dialogue where participants can tell their personal recovery story. Other inexpensive events could include decorating substance use or mental health clinics in **Recovery Month** theme colors, like the **Port Morris Wellness Center** in the Bronx did in September of 2010 to raise awareness for the initiative and get their patients and staff involved.

Whatever your event entails, it is important to make information available about how to get help for substance use and mental disorders and the detrimental effects that untreated disorders have on individuals, families and communities. This will ensure that people receive knowledge, skills, and education to recognize that substance use and mental disorders deserve the same care as any other condition.

What Are My First Steps in Planning an Event?

- **Form a committee** – This is the first step for a successful event and ensures that the workload is divided evenly between volunteers, staff, and partner organizations. It also encourages the exchange of ideas. How many committee members you need depends on the size of the event. A leader should be selected and the committee should meet regularly to create a timeline and develop goals for the event.
- **Determine a budget** – Crunch the numbers in the early planning stages. Fundraising opportunities, food and entertainment, rentals, licenses, permits, and decorations are just some examples of what to include in the estimate. More about how to fundraise for **Recovery Month** can be found on the **Recovery Month website**.
- **Explore partnership opportunities** – Partnerships include joining an already-planned recovery event or a new endeavor with a local business or organization that can provide donated goods or donations to assist your event.
- **Agree on a publicity plan** – Flyers, advertisements, banners, and social media activities catch your community’s attention and brand your organization and event. The committee also needs to decide if media, such as newspaper, television, radio, or local magazines, should be present to report the event. Refer to the “**Working with the Media**” document in this toolkit for more information on garnering publicity for your event and speaking with media.

How Do I Ensure People Will Attend?

- **Pick the right date** – Make sure that the date you chose doesn’t conflict with other similar events or activities in your community. Use the following resources to find other events:
 - Search for local conflicts on <http://www.recoverymonth.gov>, by putting in your zip code in the “Community Events” page. When your date is finalized, [post your event](#) on the **Recovery Month** website.
 - Check event postings in your local newspaper’s community calendar, which are often housed on its website.
 - Go to <http://www.charityhappenings.org> to view a master calendar of nonprofit events, galas, and benefits.
 - Ask your local treatment center or a support group if they know of any other events occurring on the same day or weekend.
- **Pick the right location** – Choose a location that is convenient, easily accessible, and can accommodate the amount of people you expect to attend. If the event takes place in a public area, check with local authorities to see if permits or a license is required, along with police presence.
- **Pick an overall message or theme** – To make your event stand out, choose a unique focus to showcase your **Recovery Month** event. Using a topic or theme that reaches many in your community like “Teen Drug Use” or “Improving the Health and Well-being of Everyone,” will differentiate your event from others. Use a catchy event title like “Run for Recovery” or “Health Reform Helps Heal.” Showcase this year’s **Recovery Month** theme, **“Join the Voices for Recovery: Recovery Benefits Everyone,”** which focuses on how public awareness will increase access for those in need of essential substance use and mental health treatment and recovery support services, including behavioral health treatment.
- **Bring the right attention** – Two big factors that draw a crowd are:
 - Developing the event around a **newsworthy activity**—this could include an opening of a new treatment center, a health fair, a high school or professional sporting event, or a celebrity visit.
 - Having a prominent local figure serve as a **spokesperson**—examples include a community leader or public official, a local star athlete, anchor of the local news, or even a prominent community member in treatment or recovery.

By having a person in long-term recovery speak at your event, people who are affected by substance use and mental disorders, including those in recovery will be more likely to attend your event and invite others to join them.
- **Have a back-up plan** – If your event location is outdoors, always plan a back-up indoor space, or a well-publicized rain date.

How Do I Prepare for the Event?

- **Consider the logistics** – After identifying the date, location, time, and budget, it’s imperative to reserve your venue and secure any necessary permits. Keep in mind that public safety is a priority, and insurance coverage might be needed. You may wish to have participants sign a photo release form to get consent to use their likeness for promotional purposes.
- **Distribute materials** – To successfully promote **Recovery Month**, prepare printed materials explaining the importance of treatment and recovery and how health reform provides increased access to insurance coverage, including treatment and recovery support services. These materials could include flyers, brochures, fact sheets, local treatment center information, or any other resource that is helpful to your community. Add artwork to set your event apart, available at <http://www.recoverymonth.gov/Banners-Logos-and-Flyers.aspx>. Refer to the “Targeted Outreach” documents in this toolkit for more information.
- **Gather your volunteers** – Base the number of volunteers you need on the projected amount of attendees. If possible, have volunteers stand out by wearing a badge, matching t-shirt, or hat, so event attendees can clearly identify them.

- **Remember any last-minute details** – Hold a meeting to finalize any logistics prior to the event. Prepare to arrive at the event early to set up booths or multimedia needs. Confirm all arrangements with any vendors and speakers outside your organization a few days before the event.

How Do I Publicize and Handle the Media For My Event?

- **Publicity is key** – Ask friends and family to spread the word about your **Recovery Month** event and distribute flyers in public areas. In the section below, you will find out more information about interacting with the media during your event.
- **Brand your event** – Be sure to brand your event as a **Recovery Month** event by placing the official **Recovery Month** logo on your printed materials. It might also help to note that the **Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT)**, within the **U.S. Department of Health and Human Services (HHS)** sponsors this annual national observance.

The media may be interested in attending or covering your event. This will expand your event's audience and increase your organization's name recognition. Use the following helpful tips to generate media coverage:

- Invite newspaper reporters who focus on community events, advocacy, or local health issues.
- Send out a media advisory or press release ([templates](#) are included in this planning toolkit) to television and radio stations and local magazines with accurate event details at least a week before to help the media prepare to cover your event.
- Follow up with calls to the media to encourage coverage of and attendance at the event, and send a reminder to the media a day or two before your event.
- Have committee members or the head of your organization available for interviews, photo opportunities, or comments during the event.

Refer to the "[Working with the Media](#)" section of this toolkit for more information on how to work with the media.

How Do I Evaluate My Event?

After your event, when details and activities are fresh in your mind, meet with your committee to evaluate outcomes. The evaluation could be formal, with a questionnaire for the volunteers and event participants, or an informal conversation among committee members. It's important to highlight the successes and note things that could have been done better. Your committee or organization might want to consider posting a "thank you" letter on its website or in the local paper to show appreciation for the event's volunteers or others who helped make the event a success. Send any materials that you used for promotional purposes to recoverymonth@samhsa.hhs.gov. It's never too early to start planning next year's **Recovery Month** event!

How Do I Share the Outcomes of My Event?

The **Recovery Month website** is always interested in stories of your event outcomes and any successes you had in promoting **Recovery Month**. Share them by:

- Posting your event details, materials, or pictures on the **Recovery Month website**, [Facebook page](#), [YouTube channel](#), and [Twitter account](#). If you need help on how to use these online tools, visit the "[New Media Glossary](#)" and "[Developing Your Social Network](#)" documents in this toolkit.

- Sending a copy of your promotional material electronically to recoverymonth@samhsa.hhs.gov or to:

Substance Abuse and Mental Health Services Administration
ATTN: Consumer Affairs
Center for Substance Abuse Treatment
1 Choke Cherry Road, Second Floor
Rockville, MD 20857

Also, we encourage you to fill out the “[Customer Satisfaction Form](#)” to share your outreach efforts and give feedback.

Additional Recovery Month Resources

For further information on **Recovery Month**, substance use and mental disorders, treatment and recovery, use the following resources:

- **SAMHSA's National Helpline – 1-800-662-HELP (4357)**, or 1-800-487-4889 (TDD) – Provides 24-hour free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.
- **SAMHSA's “Find Substance Abuse and Mental Health Treatment” Website (<http://www.samhsa.gov/treatment>)** – Contains information about treatment options and special services located in your area.
- **The Recovery Month Website (<http://www.recoverymonth.gov>)** – Contains all the materials from this toolkit and a wide variety of relevant resources.
- **SAMHSA's ADS Center (<http://www.stopstigma.samhsa.gov>)** – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.

Inclusion of websites and event examples in this document and on the [Recovery Month website](#) does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

WORKING WITH THE MEDIA

Coverage written or broadcasted about substance use or mental disorders, treatment, and recovery by independent and objective reporters helps to garner interest and success for your National **Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)** event. Through publicity, the message that prevention works, treatment is effective, and recovery is possible, will spread to a larger audience and help gain recognition for your event, organization, sponsors, and partners.

Recovery Month, sponsored by the Substance Abuse and Mental Health Services Administration’s (SAMHSA’s) Center for Substance Abuse Treatment (CSAT) part of the U.S. Department of Health and Human Services (HHS), supports SAMHSA’s Strategic Initiatives. **Recovery Month’s** goal is to increase public awareness of substance use and mental disorders, support health reform implementation, and offer recovery support through an individual, program, and system approach. The observance also celebrates the millions of Americans in recovery and honors those working in the field that helped and empowered them in reclaiming their lives.

This year’s **Recovery Month** theme, **“Join the Voices for Recovery: Recovery Benefits Everyone,”** emphasizes that all Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost. Additionally, public awareness will increase access for those in need of essential substance use and mental health treatment and recovery support services, including behavioral health treatment. Use this document to understand the basics of media outreach, creating relationships, and speaking with the media.

What Does the Media Look For?

For your **Recovery Month** event to reach the most people possible, plan to spend a portion of your time on media outreach. The press is eager to receive new story ideas, so engage them to help get your messages about **Recovery Month** across to the public.

The media, including television, radio, print, and online outlets, considers the following factors when deciding whether to cover a story or event:

- **Hot Topics** – Health reform has been a widely publicized topic over the past few years. Use this year’s theme, **“Join the Voices for Recovery: Recovery Benefits Everyone,”** which focuses on health reform and the benefits of widespread health insurance, as a platform to spark community interest and attract media coverage for your event.
- **Impact** – Using compelling and current statistics to illustrate influence will increase interest in your event. Emphasize to the media that addiction is the Nation’s number one health problem, and that according to the **2009 National Survey on Drug Use and Health**, 22.5 million people aged 12 or older were classified with substance use dependence, and 11 million people 18 years or older were diagnosed with a serious mental health problem. The Affordable Care Act gives Americans more freedom and control over their health care, as well as new benefits that ensure people will receive the care they need at a more reasonable cost.
- **Proximity** – Make sure you target the most appropriate outlets. For example, national outlets most likely won’t cover a small town-hall event, but your local paper probably will. Remember to tailor your event and outreach efforts so that the media understands how substance use and mental health disorders affect your community. Cite local statistics, available from your **Single-State Agency (SSA)**. Promoting your event within community and faith newsletters can help small venues reach a larger audience.
- **Timeliness** – For a weekly newsletter, events that have occurred since its previous issue may be considered timely or appropriate, whereas for broadcast outlets, a reporter might only cover “breaking news” live at the event site. Be sure to time your outreach accordingly.



If you hold a community forum or roundtable discussion, consider planning it around another local event, such as a festival, business conference, or gala, for credibility, increased exposure, and resources. To enhance public interest in your forum, choose a well-known moderator to keep the discussion focused and on track. Other panel members could include:

- Public officials and civic leaders;
- Local treatment providers;
- Substance use prevention and mental health specialists;
- Health professionals;
- Employers;
- Educators;
- Family members; and
- Individuals in recovery.

What are the Basics of Media Outreach?

The first step in working with the media is to research and identify the news outlets you would like to cover your event and **Recovery Month** messages. Don't forget to look up community calendars, daybooks, and "week-ahead" columns that could include your **Recovery Month** event in their event listings. Many of these sources may be exclusively online, so use a search engine if you can't find them in print editions. You can identify any reporters who have covered issues surrounding substance use and mental health, health reform, or local events in the past. You can find contact information by using pay services, such as [Cision](#) or [BurrellesLuce](#), to see if there is a directory on the outlet's website, or by calling the main number and asking if they have a company directory available.

The Affordable Care Act gives Americans more freedom and control over their health care, as well as new benefits that ensure people will receive the care they need at a more reasonable cost. Below you can find some general provisions on the new law, some of which are effective immediately, while others will be enacted by 2020. Refer to "Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery" for more information.

- Medicaid, a health program for low income individuals and families, will expand its eligibility to 133 percent of the Federal Poverty Level and all newly eligible parents and adults without children will receive benefits, which include essential substance use and mental health services at parity.
- Insurance companies will be prohibited from denying coverage due to a pre-existing condition for children starting in 2011, and for adults in 2014.
- Starting in 2011, young people, up to age 26, can remain on their parents' health insurance policy.
- Most health plans will cover some important preventive services at no additional cost to you, including counseling for a substance use or mental disorder.

Once you've identified these outlets and contacts, build an electronic media list. Electronic lists are easy to update, and users can merge contacts for effortless delivery of materials via email or mail. Additionally, users can easily track who they've reached out to, and responses received. In a spreadsheet program include:

- Names of media outlets
- Key reporters and their titles and beats
- Contact information, including phone and email address
- If he or she prefers to be contacted
- A “notes” column to list other relevant articles that reporter has written
- Known deadlines and any previous interactions that you've had with the reporter

To make the research easier, set up [Google Alerts](#) online, so that you automatically receive updates on relevant news stories in your area. Scan your local newspaper daily for health and community stories. Remember to update your media list regularly so that you can use it for outreach efforts throughout the year.

How Do I Follow up on My Press Materials?

Once you have compiled your media list and are ready to begin your outreach efforts, tailor the sample materials in the “[Press Materials for Your Recovery Month Event](#)” piece to effectively reach out to reporters. Make sure to introduce yourself and share why you'd like them to cover your **Recovery Month** event. After distributing your press materials, follow up via phone or email with your media contacts for the official “pitch.” Make your calls short and direct, sounding confident to establish yourself as an expert providing valuable information. Offer to send more detailed information in an email or to arrange an interview with a local expert. It may be helpful to write a brief script so your conversation flows easier—see [one example](#) at the end of this document. It's important to accommodate the media contacts as much as possible.

If you're unable to reach a reporter by phone, forward your media advisory or press release, with a brief note at the top offering to answer additional questions or to arrange an interview. Always provide your contact information in case they need more information. Modify the [sample follow-up email](#) at the end of this document to connect with reporters on your **Recovery Month** press materials.

It's important to build a working relationship with your contacts by staying in touch. This will build your credibility with the reporter and can lead to increased publicity through media interviews.

What are Key Messages to Communicate?

When speaking with the media, convey the following key points concerning **Recovery Month** and your organization's specific event.

- **For a Specific Event:** On **[date]** at **[time]**, **[organization]** is hosting **[event or activity]** at **[location]** to **[encourage people to learn about how health reform can increase access to treatment for substance use and mental disorders]**. These conditions can affect anyone, including people in **[city]**. It's essential that our community understand the new health reform laws and how they will expand access to treatment and recovery services.
- **To Promote Recovery Month:** **[Organization]**'s activities are part of the **National Recovery Month** initiative celebrated now for 22 years. Sponsored by the **Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT)**, within the **U.S. Department of Health and Human Services (HHS)**, this month-long observance celebrates individuals and families in recovery, as well as those who work in the field. **Recovery Month** shares that all individuals have the fundamental and inherent value to be accepted and treated with respect, dignity, and worth. In addition, **Recovery Month** spreads the message that behavioral health is an essential part of health and one's overall wellness, and that prevention works, treatment is effective, and recovery from substance abuse and mental health problems is possible.

- Individuals should have access to fully participate in community life, including economic advancement and prosperity; fair and decent housing; quality education; and positive opportunities to benefit from and contribute to material, cultural and social progress. This year, **[organization]** will observe **Recovery Month** by **[include the name and brief description of your Recovery Month activities]**.
- **To Discuss Health Reform:** With the passage of the Affordable Care Act in 2010, health care coverage will expand to approximately 32 million Americans who were not previously insured. As health reform is implemented, SAMHSA, through their Health Reform **Strategic Initiative**, will provide valuable information on how the modifications impact insurance coverage for individuals with substance use and mental disorders and how providers deliver services.
- **To Provide Information and Resources:** Visit the **Recovery Month** website at <http://www.recoverymonth.gov> and **[insert organization's website]** for detailed information on substance use and mental disorders, treatment, and recovery. For 24-hour free and confidential information and prevention, treatment, and recovery referrals in English and Spanish, call **SAMHSA's National Helpline, 1-800-662-HELP (4357)**, or 1-800-487-4889 (TDD), or visit SAMHSA's "Find Substance Abuse and Mental Health Treatment" website, <http://www.samhsa.gov/treatment>. Look into **SAMHSA's ADS Center**, <http://www.stopstigma.samhsa.gov>, which provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.

How Do I Prepare for an Interview with the Media?

If the opportunity arises, use the following tips to prepare for a successful interview:

- **Research the outlet and reporter before your interview.** Read or watch previous stories the reporter has developed to get a sense of their style. Think about what type of questions the reporter tends to ask.
- **Prepare any supplementary materials in advance of your interview.** You may wish to share graphs, photos, spokespeople biographies, or information from the "**Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery**" document located in this toolkit, with the reporter in advance to enhance your interview.
- **Practice before your interview with a colleague or friend.** Rehearse what you intend to say during the interview and ask for feedback. To ensure your points are accurately portrayed, avoid using jargon and instead use short, catchy sentences that are easily understood.

The day before your interview, confirm the subject, time, location, and anticipated length of the interview with the reporter. Keep in mind that the primary goals of the interview are to communicate the **Recovery Month** key messages, the logistics of your event, if applicable, and your perspective on treatment and recovery. Once the interview begins, it's useful to restate the question in your response so that the answer is a complete thought, and can be quoted independently. This also will ensure that your messages are clear. Use the following techniques to ensure a successful interview:

- **Bundling** – To ensure your messages are concise and clear, quantify your information and tie it together giving the reporter verbal clues to follow. For example, you may say "SAMHSA has a series of key initiatives that continue to improve the delivery and financing of prevention, treatment, and recovery support services. **Recovery Month** supports these initiatives by..." This tactic will allow all your key messages and thoughts to come across polished and succinct.
- **Bridging** – A reporter may ask you a question that tries to distract you from your key messages or anticipated topics. Instead of directly answering, use the opportunity to tie it back to your points by "bridging" your response or reform the question in terms most favorable to you. For example, you may respond to an irrelevant question by stating "Yes, that's one perspective, but what is important to understand is..."
- **Blocking** – In some instances, reporters may ask you a question that you don't know the answer to or may not want to answer. Never say "no comment," as it looks as if you are trying to hide something. Explain why you can't answer the question, and "bridge" to other discussion topics or offer to research the topic or put the reporter in contact with someone who may be able to answer the question. Follow up to ensure the reporter has received the answer.

In addition to the above techniques, keep in mind the following during an in-person interview:

- **Eye contact** – If you are on camera, remain focused on the reporter instead of staring directly at the cameraperson. Try not to be distracted by any commotion surrounding you.
- **Body language and voice inflection** – Effective body language and voice inflection are even more important than actual words when it comes to how messages are received. Sit up or stand up straight and use gestures sparingly. Also, you may want to vary your pitch by raising your voice slightly to emphasize key points.
- **Dress properly** – Although there are some exceptions (such as a walk/run), try to dress neatly and conservatively. A professional style ensures that the reporter and audience take your messages seriously.

These tips will help make a phone interview successful:

- **Location** – Try to call from a quiet place with no background noise. For a clearer and stable connection, call from a land line, not a cell phone.
- **Basic etiquette** – Remember to greet your interviewer with a smile on your face. Even if the person at the other end can't see you, this affects the tone and quality of your voice.
- **Ask questions** – Since there will be no visual cues to react to, it's important to ask questions to ensure they understand the messages you have conveyed.

How Do I Effectively Publicize My *Recovery Month* Event?

In addition to traditional media outreach, other tactics can be used to effectively reach the general public.

- **Connect with your community through social networks.** Social networking websites, such as [Facebook](#) and [Twitter](#), are great free online tools. Refer to the “[Developing Your Social Network](#)” document in this toolkit to learn how to share your story and resources with people.
- **Send a mass email to your friends, colleagues, and supporters** of your organization to raise awareness of substance use and mental disorders and to promote your event. You can request that recipients create an email chain by forwarding the message or event invitation to others.
- **Begin a phone-tree** by calling five colleagues or friends to tell them about your event. Ask each of them to call five others to continue the cycle.
- **Post flyers or leave brochures** at libraries, doctor's offices, pharmacies, cafes, stores, and local businesses, but be sure to request approval before doing so. Involve your friends, family and others interested in your cause. Consider asking them to wear a t-shirt or carry a tote bag with your organization or event logo on it. Make sure volunteers share educational information with the public on substance use and mental disorders by distributing brochures or flyers, and advertising your event logistics.
- **Contact other local organizations and social service agencies** to help spread the word. Neighborhood organizations, youth centers, senior citizen centers, places of worship, and local hospitals can make an announcement at their meetings, in newsletters, or distribute information about your event to others in your community.

What Do I Do After My *Recovery Month* Event?

Coverage following the event is just as significant as your initial efforts, so publicizing your **Recovery Month** event should continue after your event concludes. Due to the changing economic and media landscape, media outlets today have fewer staff available to attend events. Even if the media doesn't attend on site, send a [press release](#) with pictures to the outlets that expressed interest in your event as soon as possible afterwards. To increase your chances of garnering media coverage, include the number of participants, prominent attendees, or the amount of money raised at your event.

You should begin crafting subsequent campaigns around the success of your **Recovery Month** event and continue increasing awareness by:

- Posting your event materials, photos, or videos on the **Recovery Month** website, <http://www.recoverymonth.gov>, with your event listing to show the purpose and outcomes. Help spread the success of your event with others by sharing your outcomes through **Recovery Month's** website or social media outlets: [Facebook page](#), [YouTube channel](#), and [Twitter account](#). Refer to the “[New Media Glossary](#)” and “[Developing Your Social Network](#)” documents in this toolkit for ideas on how to use these online tools.
- Sharing your **Recovery Month** efforts by completing the “[Customer Satisfaction Form](#).”
- Sending your promotional materials electronically to recoverymonth@samhsa.hhs.gov or to:

Substance Abuse and Mental Health Services Administration
 ATTN: Consumer Affairs
 Center for Substance Abuse Treatment
 1 Choke Cherry Road, Second Floor
 Rockville, MD 20857

Additional *Recovery Month* Resources

For further information on **Recovery Month**, substance use and mental disorders, treatment and recovery, use the following resources:

- **SAMHSA's National Helpline – 1-800-662-HELP (4357)**, or 1-800-487-4889 (TDD) – Provides 24-hour free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.
- **SAMHSA's “Find Substance Abuse and Mental Health Treatment” Website** (<http://www.samhsa.gov/treatment>) – Contains information about treatment options and special services located in your area.
- **The Recovery Month Website** (<http://www.recoverymonth.gov>) – Contains all the materials from this toolkit and a wide variety of relevant resources.
- **SAMHSA's ADS Center** (<http://www.stopstigma.samhsa.gov>) – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.

Inclusion of websites and event examples in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

SAMPLE PITCH EMAIL

SUBJECT: Panelists to Discuss Increased Access to Treatment for Substance Use and Mental Disorders in **[City]**

Hi **[Insert name]** –

I read your recent article about **[topic of article]** and thought you might be interested in covering one of the most important health care issues facing our country today: substance use and mental disorders.

To raise awareness of these conditions, **[name of organization]** is hosting **[name of event]** on **[date]** at **[time]** at **[location]**. The event is part of **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)**, sponsored by the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT), within the U.S. Department of Health and Human Services (HHS). If you're available, we'd love for you to attend!

During **Recovery Month**, communities nationwide join together to help people understand that substance use and mental disorders are treatable, just like chronic diseases, such as diabetes or high blood pressure. Also, with the newly implemented health care laws, treatment and recovery support services are now more accessible to millions nationwide.

I've included the media advisory detailing our upcoming event below. **[Insert spokesperson name and title]**, will be available at the event for photo opportunities and to discuss how health reform will impact insurance coverage of substance use and mental disorders. Please let me know if you need more information, or would like to schedule an interview.

Thanks in advance for your time and consideration.

Best,
[Insert your name]

SAMPLE PITCH CALL SCRIPT

Hi **[Insert name]** –

My name is **[your name]** and I am with **[name of organization]**. Do you still cover **[beat the reporter covers: health care, community events, etc.]** and do you have a few minutes to chat?

My goal is to bring awareness about the positive impact that substance use and mental disorders treatment and recovery support services can have in our community. **[Name of event]**, will be held on **[date of event]** to raise awareness of substance use and mental disorders in **[city]**. The event is part of **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)**, which is sponsored by the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT), within the U.S. Department of Health and Human Services (HHS).

If you're interested, I have additional information I'd like to send you – is your email address still **[reporter email address]**?

I will send the information over to you shortly, and please feel free to contact me with any questions. I'll include my contact information in the email.

Thanks for your time, and I hope to talk to you again soon.

PRESS MATERIALS

Press Materials For Your *Recovery Month* Event

Distributing publicity materials, such as a press release or media advisory, provides positive exposure for any organization or event. This is an important component of ***National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)*** and the events that take place in communities nationwide each September to celebrate the observance.

Recovery Month supports several of the Substance Abuse and Mental Health Services Administration's (SAMHSA's) **Strategic Initiatives**, particularly the goals of increasing public awareness of substance use and mental disorders, health reform implementation, and offering recovery support through an individual, program, and system approach. The Initiatives also aim to help people recognize and seek assistance for substance use and mental disorders with the same urgency as other conditions, such as diabetes or heart disease. This year's ***Recovery Month*** theme, ***“Join the Voices for Recovery: Recovery Benefits Everyone,”*** highlights that behavioral health is an essential part of health and one's overall wellness, and that prevention works, treatment is effective, and recovery from substance use and mental health problems is possible.

Recovery Month stresses that everyone has a fundamental and inherent value to be accepted and treated with respect, human dignity, and worth. Individuals should have access to fully participate in community life, including economic advancement and prosperity; fair and decent housing; quality education; positive opportunities to benefit from and contribute to material, cultural and social progress. The observance also educates people about the impact of health reform and the implementation of the Mental Health Parity and Addictions Equity Act (MHPAEA) on access to treatment and recovery support services.

Use this document as a guide on how to develop and distribute press materials to promote your ***Recovery Month*** events to ensure your celebration is a success.

How Do I Use Press Materials to Publicize My *Recovery Month* Event?

Your press materials should emphasize that your event is part of the national ***Recovery Month*** initiative, sponsored by SAMHSA's **Center for Substance Abuse Treatment (CSAT)**, within the **U.S. Department of Health and Human Services (HHS)**. The content should highlight this year's theme, ***“Join the Voices for Recovery: Recovery Benefits Everyone,”*** and the significance of helping people in need of treatment and recovery support services, while also recognizing the accomplishments of individuals in recovery and those who work in the field to empower them in reclaiming their lives.

Your organization can share several types of materials with the media to publicize your event. For example, a media advisory, press release, and backgrounder can all share timely information regarding ***Recovery Month*** with reporters. Each tool outlined below will aid in building community interest for your event and ultimately encourage the media to become involved in your event.

- **Media advisories**, or media alerts, are simple one-page documents that briefly alert the media to an upcoming event they may want to attend. Advisories should be sent to the calendar editor of your local newspaper, and also the health care reporter or editor that covers local news or events. Advisories provide the basics of what most journalists need to know, and should:
 - Look similar to an event invitation, including bullets covering “who, what, where, and when” with corresponding answers on noteworthy event participants, photo opportunities, and how to schedule interviews.
 - Include the contact information for your organization or ***Recovery Month*** planning committee so reporters can request further details.

RECOVERY BENEFITS EVERYONE

- **Press releases**, or news releases, are one- or two-page announcements sent to the media so they will cover your story or event. A release is similar to a condensed news story, which sometimes is repurposed as a stand-alone article in your newspaper. Therefore, information you provide in the press release must be newsworthy. Refer to the “[Working with the Media](#)” document in this toolkit for factors that reporters use to determine if a story is newsworthy. Press releases should:
 - Contain approximately 500 words, formatted in short paragraphs.
 - Use an inverted pyramid style of writing, meaning the most important information is at the top, filtering down to the less crucial details toward the end.
 - Include a quote from your organization’s spokesperson or key event figure. If you are partnering with another organization, their spokesperson should also be quoted.
- **Backgrounders** are brief documents that contain additional information about a subject touched on in a news release. A backgrounder may accompany the release, or be distributed at your **Recovery Month** event, or to reporters for further information. It can be written in paragraph form, or have bulleted key information. Refer to the “[Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery](#)” document in this toolkit for an actual backgrounder to distribute. Consider putting the backgrounder into a frequently asked question (commonly known as a FAQ) format to make it easy to read. Create a backgrounder that highlights:
 - SAMHSA and **Recovery Month**
 - Your organization
 - Your specific **Recovery Month** event
 - Information about substance use and mental disorders, treatment, and recovery support services
 - Information about health reform and how SAMHSA and **Recovery Month** is supporting the positive legislative changes through one of its [Strategic Initiatives](#)
- Modify the [sample template press release](#), [media advisory](#), and [backgrounder](#) at the end of this document and distribute to media outlets when you publicize your **Recovery Month** event. When drafting these materials, remember to use your organization’s letterhead or the **Recovery Month** letterhead found at <http://www.recoverymonth.gov>. Additional press materials, including those listed below can be used to raise awareness about substance use and mental disorders and how all Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA).
- **Op-eds**, or opposite editorials, provide an opinion on a specific topic or event, and are published opposite a publication’s editorial page. Their purpose is to influence public opinion and create a dialogue about issues affecting your community, such as health reform. Refer to the “[Writing an Op-ed During Recovery Month](#)” document in this toolkit for information on drafting and submitting one.
- **Letters to the editor** are written to express an individual or organization’s point of view on a particular subject. You can write letters as a response to other news stories, or simply to highlight a timely issue, such as how access to treatment services will benefit from health reform. Use the key messages provided in this document, as well as local statistics on substance use and mental disorders, to convey the importance of recovery.
- **Public service announcements** (PSAs) are non-paid informational commercials, distributed to your local radio or television outlets. PSAs create awareness of **Recovery Month** in your community and helps positively change public opinion surrounding substance use and mental disorders. Refer to the “[Promoting Recovery Month with Public Service Announcements](#)” document in this toolkit for information on distributing and promoting the **Recovery Month** PSAs to a variety of media outlets.

How Do I Customize My Press Materials with *Recovery Month* Key Messages?

Whether you are raising awareness about substance use and mental disorders or providing information on health reform to your community, sharing **Recovery Month's** key messages and the goals of your event with supporters is essential. If you aren't the organization's spokesperson, be sure to prepare that person with your key messages and get their permission before quoting in your press materials. Show them the "[Working with the Media](#)" piece to ensure they can provide accurate statistics and details surrounding the event.

When developing your press materials, keep in mind the following key points concerning **Recovery Month** and this year's theme, "**Join the Voices for Recovery: Recovery Benefits Everyone.**"

- **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)** is an initiative sponsored by the [Substance Abuse and Mental Health Services Administration's \(SAMHSA's\) Center for Substance Abuse Treatment \(CSAT\)](#), within the [U.S. Department of Health and Human Services \(HHS\)](#). The observance, celebrated each September for the past 22 years, honors individuals and families in recovery, as well as those who work in the treatment and recovery services field.
- Substance use and/or mental disorders can affect anyone, but prevention works, treatment is effective, and recovery is possible. It's essential that our community understands that public awareness will increase access for those in need of essential substance use and mental health treatment and recovery support services, including behavioral health treatment.
- Visit the **Recovery Month** website at <http://www.recoverymonth.gov> and **[insert organization's website]** for detailed information on substance use and mental disorders and prevention, treatment, and recovery support services. For specific information on substance use and mental disorders and local treatment options in your community, call SAMHSA's National Helpline at **1-800-662-HELP (4357)**, or 1-800-487-4889 (TDD), for 24-hour free and confidential information in English and Spanish, or visit SAMHSA's "Find Substance Abuse and Mental Health Treatment" website, <http://www.samhsa.gov/treatment>.

Customize your media materials with local information. To do this, use the following resources, along with any local data available:

- [Single-State Agency \(SSA\)](#) for substance use and mental health prevention, treatment, and recovery support services
- SAMHSA's [National Survey on Drug Use and Health](#)
- SAMHSA's [Recovery Statement](#)
- SAMHSA's [National Survey of Substance Abuse Treatment Services \(N-SSATS\)](#)
- SAMHSA's [Drug Abuse Warning Network](#)
- SAMHSA's [Treatment Episode Data Set](#)
- [HealthCare.gov](#)
- [Kaiser Family Foundation's Focus on Health Reform](#)
- [Mental Health America](#)
- [State Directory of Consumer Affairs \(NAC/SMHA\)](#)
- [The Parity Implementation Coalition's Parity Toolkit](#)

How Do I Disseminate My Press Materials?

Before you distribute your **Recovery Month** media advisory or news release, ask yourself the following questions:

- Does the release highlight the importance of **Recovery Month** and your event?
- Are there local experts who could speak credibly to the media about **Recovery Month** as well as treatment and recovery issues?
- Does the event entail a “call to action” that should be explained in greater detail?
- Do I know to whom and where to send my materials?

Refer to the “[Working with the Media](#)” document in this toolkit for tips on building a solid media list.

To distribute electronically, copy and paste your advisory or release into the body of the email. Many reporters will not open unsolicited attachments. Make sure they can clearly see the headline and first paragraph without enlarging or scrolling down in the email, as this will increase the likelihood your release will be seen. Personalize each email so the reporter knows it’s not a mass message. For example, mention a story recently written by the reporter that caught your eye, or if you have had previous interactions with them, mention when and where to jog their memory.

Media advisories are usually sent out one week in advance of an event, similar to a “save-the-date” card. Press releases are ordinarily issued the day of the event, either directly before or immediately following the event. If a media contact is on a tight deadline and needs the information in advance, you can provide him or her with an “embargoed” release. This implies they will honor your request to publish the story after your event or announcement, even though they have advance information.

If you’d like to send your press release to a large number of recipients, there are many online resources available to help you increase the awareness and visibility of your event. Some of these services may charge a fee, so it’s important to research each option before submitting your event materials. Some may offer discounts to nonprofit organizations. Top distribution sites include:

- [Business Wire](#)
- [PR Newswire](#)
- [PR Log](#)
- [24/7 Press Release](#)

Remember to post all of your traditional press materials, as well as any other publicity tools on the **Recovery Month** website at <http://www.recoverymonth.gov> and on your organization’s site to increase event attendance and raise awareness of substance use, mental health problems, treatment, and recovery support services in your community. Once you disseminate your materials, make sure to follow up with reporters to confirm receipt and interest. Refer to the “[Working with the Media](#)” piece in this toolkit for tips on pitching your event, and communicating with your media contacts.

How Do I Share My Event’s Successes?

Promote your organization’s event and encourage substance use and mental disorder prevention, treatment, and recovery support services by:

- Posting your press materials on the **Recovery Month** [website](#) to accompany your event listing. In addition, share the event purpose and outcomes with others through **Recovery Month** social media outlets such as the **Recovery Month** [Facebook page](#), [YouTube channel](#), and [Twitter account](#). Refer to the “[New Media Glossary](#)” and “[Developing Your Social Network](#)” documents in this toolkit for ideas on how to use these online resources.

- Sharing your stories and other outreach efforts during **Recovery Month** by completing the “[Customer Satisfaction Form](#).”
- Sending your promotional materials electronically to recoverymonth@samhsa.hhs.gov or to:

Substance Abuse and Mental Health Services Administration
 ATTN: Consumer Affairs
 Center for Substance Abuse Treatment
 1 Choke Cherry Road, Second Floor
 Rockville, MD 20857

The Affordable Care Act was signed by President Barack Obama in March 2010. The legislation expands health care coverage while controlling costs and improving the country’s overall health care system. Below you can find some general provisions on the new law, some of which are effective immediately, while others will be enacted by 2020. Refer to “[Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery](#)” for more information.

- Medicaid, a health program for low income individuals and families, will expand its eligibility to 133 percent of the Federal Poverty Level and all newly eligible parents and adults without children will receive benefits, which includes essential substance use and mental health services at parity.
- Insurance companies will be prohibited from denying coverage due to a pre-existing condition for children starting in 2011, and for adults in 2014.
- Starting in 2011, young people, up to age 26, can remain on their parents’ health insurance policy.
- Most health plans will cover some important preventive services at no additional cost to you, including counseling for a substance use or mental disorder.

Additional Recovery Month Resources

For further information on **Recovery Month** and substance use and mental disorders, treatment and recovery, use the following resources:

- **SAMHSA’s National Helpline – 1-800-662-HELP (4357)**, or 1-800-487-4889 (TDD) – Provides 24-hour free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.
- **SAMHSA’s “Find Substance Abuse and Mental Health Treatment” Website (<http://www.samhsa.gov/treatment>)** – Contains information about treatment options and special services located in your area.
- **The Recovery Month Website (<http://www.recoverymonth.gov>)** – Contains all the materials from this toolkit and a wide variety of relevant resources.
- **SAMHSA’s ADS Center (<http://www.stopstigma.samhsa.gov>)** – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.

Inclusion of websites and event examples in this document and on the [Recovery Month website](#) does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

SAMPLE MEDIA ADVISORY

[Adapt as needed for your event by modifying the type of event, date, etc.]

[Date]

[Name of Health Care Provider Organization] Holds Forum to Educate [City]’s Citizens on the Impact of Health Reform on Treatment and Recovery Services

Nationwide, 4.3 million people aged 12 or older (1.7 percent of the population) received treatment for substance use disorders, and 30.2 million adults aged 18 or older received services for mental health problems, according to the **2009 National Survey on Drug Use and Health**. With the passage of health reform, all American’s have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost.

To further address the impact of health reform on prevention and treatment services, **[organization]** will host a community roundtable on **[date]** to discuss the benefits that recovery has on our society as a whole. It also will focus on how our community members can access the professional care they need to lead healthy and fulfilling lives. For those outside the recovery community, the forum will stress the importance of helping a loved one in need, and educate individuals on a variety of prevention, treatment, and recovery options.

The forum is part of the 22nd observance of **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)**, sponsored by the **Substance Abuse and Mental Health Services Administration’s (SAMHSA’s) Center for Substance Abuse Treatment (CSAT)**, within the **U.S. Department of Health and Human Services (HHS)**. Speakers, including **[names and titles]** will address this year’s theme, **“Join the Voices for Recovery: Recovery Benefits Everyone.”** Their conversation will focus on the latest facts about substance use and mental disorder prevention and treatment, how health reform affects service delivery, the way recovery positively benefits one’s overall health and well-being, and how family and community is involved in the recovery process.

WHO: **[Participants]**

WHEN: **[Date and Time]**

WHERE: **[Address of Location]**

CONTACT: **[Name and Phone Number of Primary Contact for Event]**

###

SAMPLE PRESS RELEASE

[Adapt as needed for your event by modifying the type of event, date, and local statistics as available.]
FOR IMMEDIATE RELEASE

Contact: **[Name of person who is available to answer questions from the media]**
 [Phone number of contact person – include office and cell numbers]
 [Email address]

Recent Legislation Expands Access To Treatment And Recovery Services For Substance Use And Mental Disorders

***[Name of Health Care Provider Organization] Holds Forum to Raise Awareness of Substance Use and Mental Disorders
 and the Effect Health Reform May Have on Our Community***

[City, State], [date] – A forum was held today, sponsored by **[name of health care provider organization]**, to raise awareness about substance use and mental disorders in **[city]**. Panelists, including several health care professionals and individuals in recovery, discussed health reform and its positive impact on access to treatment and recovery support services in our community through widespread health insurance options.

In 2009, 4.3 million people aged 12 or older (1.7 percent of the population) received treatment for substance use disorders, and 30.2 million adults aged 18 or older (13.3 percent of the population) received services for mental health problems according to the **2009 National Survey on Drug Use and Health**. Several experts, including **[name and title of prominent participants]** participated in the forum today, primarily focusing on the importance of one’s overall health and well-being, professional treatment for those with substance use and mental disorders, and how recovery positively impacts our society as a whole.

“Our hope is that with increased access to prevention, treatment, and recovery support services, families, policymakers, businesses, and health care providers, will reach out to those in need to assist them in finding appropriate treatment options,” stated **[name and title of spokesperson]**. “Not being able to access the appropriate treatment services, or not knowing where to find these services, should no longer be a barrier to achieving recovery.”

The participants discussed the Affordable Care Act that was passed in 2009, as well as the implementation of the Mental Health Parity and Addictions Equity Act (MHPAEA) that was passed in 2008. Under the new laws, Americans will have more freedom and control over their health care, as well as new benefits that ensure people will receive the care they need at a more reasonable cost.

[Name of another spokesperson who participated in the forum] concluded the forum with a brief presentation emphasizing that recovery does benefit everyone. He or she conveyed that combating substance use and mental disorders positively affects the workplace with reduced absenteeism and job turnover, improved productivity, and reduced health care costs. Relationships grow stronger once an individual is in recovery, and recovery positively benefits one’s overall health, often improving other health conditions such as hypertension, high blood pressure, and diabetes.

Today’s event was part of a national initiative sponsored by the **Substance Abuse and Mental Health Services Administration’s (SAMHSA’s) Center for Substance Abuse Treatment (CSAT)**, within the **U.S. Department of Health and Human Services (HHS)**. The observance of **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)**, which takes place each September, raises awareness of substance use and mental disorders, celebrates individuals in long-term recovery, and acknowledges the work of treatment and recovery service providers. **Recovery Month** spreads the message that behavioral health is an essential part of health and one’s overall wellness, and that prevention works, treatment is effective, and people can and do recover from substance use and mental disorders. **Recovery Month** highlights the importance of communities nationwide to promote prevention, treatment, and recovery services not only in September, but throughout the year.

###

SAMPLE BACKGROUND

[Adapt as needed by including additional information on your specific organization, event, etc.]

National Recovery Month Media Fact Sheet

What is National Recovery Month?

National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month) is an annual observance celebrated each September since 1989. Every year a new theme, or emphasis, is selected for the observance.

This year's **Recovery Month** theme, **“Join the Voices for Recovery: Recovery Benefits Everyone,”** emphasizes that:

- All Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost.
- Public awareness will increase access for those in need of essential substance use and mental health treatment and recovery support services, including behavioral health treatment.
- These legislative changes will improve the overall health and well-being of people in the United States.

Refer to the **“Overview”** and **“Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery”** documents in the **Recovery Month** toolkit for statistics on the prevalence of substance use and mental disorders in the United States, and information on how health reform will impact treatment and recovery services.

Throughout September, events nationwide encourage the following audiences to address the continued need for prevention, treatment, and recovery support services:

- | | |
|-------------------------|----------------------------------------------------|
| ■ Communities | ■ Prevention, treatment and recovery organizations |
| ■ Employers | ■ Recovery community |
| ■ Civic Leaders | ■ Justice system |
| ■ Health care providers | ■ Faith-based organizations |
| ■ Educators | ■ Social service organizations |

Refer to the **“Treatment and Recovery”** document in this toolkit for an overview of treatment and recovery options.

Recovery Month highlights the benefits of treatment and recovery for not only the individual, but for their family, friends, workplace, and society as a whole. By educating the public that prevention works, treatment is effective, and people can and do recover from these conditions, discrimination associated with substance use and mental disorders and treatment services can be eliminated. **Recovery Month** can help people understand the importance of supporting:

- Individuals in long-term recovery;
- Those in need of treatment;
- Those who work within the treatment field; and
- Treatment and recovery support services.

OP-ED

Writing An Op-Ed During Recovery Month

An op-ed, or “opposite the editorial pages,” effectively raises awareness for **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)**. Op-eds are opinion pieces that allow you to express your perspective in a public forum with maximum exposure. Anyone can write an op-ed, whether you are someone in recovery, personally affected by a family member’s substance use and/or mental disorder, or a health care provider, treatment, or recovery support worker in the field. The tips below provide the resources to get started.

How Do I Start Planning Out My Op-ed?

Brainstorming ideas surrounding this year’s **Recovery Month** theme, **“Join the Voices for Recovery: Recovery Benefits Everyone,”** is a good place to start when writing your op-ed. Health reform is a current topic of conversation and impacts access to health insurance for millions. The Affordable Care Act gives Americans more freedom and control over their health care, as well as new benefits that ensure people will receive the care they need at a more reasonable cost. You can learn more about SAMHSA’s support of health reform implementation and its goal to reduce disparities that currently exist between the availability of services for substance use and mental disorders through its [Strategic Initiatives](#).

Your op-ed could have a significant impact on your community by providing much-needed information about how people can access the care they need in this new environment. It might also be helpful to note that the [Substance Abuse and Mental Health Services Administration’s \(SAMHSA’s\) Center for Substance Abuse Treatment \(CSAT\)](#), within the [U.S. Department of Health and Human Services \(HHS\)](#), sponsors this annual national observance.

Before you start to write, keep in mind the following tips:

- **Identify** which publication in your area best fits your message and will allow maximum readership. Local newspapers usually publish op-eds that focus on community issues, while top-tier newspapers focus on a broader, national scope.
- **Start early**, as publications receive a large amount of op-eds, and you might have to submit it a month or two before September, and sometimes more than once for it to be seen by the right person.
- **Create a relationship** with the editor in advance to help push through your op-ed. Always plan out what you are going to say before you call or email them and provide background information about yourself, organization, and **Recovery Month**, in addition to any local and State recovery issues.
- **Remember** to have one clear and concise topic or idea. Simple messages allow readers to stay focused and walk away with the message you are trying to convey. For example, if you decide to speak about how recovery positively affects your community, stay on the local level and don’t expand nationwide.
- **Refer** to the sample op-ed at the [end of this document](#) for ideas. You also can tailor the sample op-ed to help express your ideas or fit your organization’s needs.

What is the Most Effective Way to Write My Op-ed?

Once you have selected your topic and the publication(s) suited to your message, try to incorporate the **Recovery Month** mission and this year’s **Recovery Month** theme, **“Join the Voices for Recovery: Recovery Benefits Everyone.”** This year’s theme emphasizes that all American’s have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost. As you write, keep in mind that not only during September, but year-round, **Recovery Month** celebrates individuals in long-term recovery, acknowledges those who provide recovery support services, and empowers those in need of help to seek treatment.

RECOVERY BENEFITS EVERYONE

The tips below will help you when you're starting to write.

- **Express an opinion** through a strong lead paragraph that clearly states your viewpoint and the cause you support.
- **Provide background** information or facts and figures to increase the impact. Refer to the resources listed below to make your op-ed more compelling.
 - [Single-State Agency \(SSA\)](#) for substance use and mental health prevention, treatment, and recovery support services
 - SAMHSA's [National Survey on Drug Use and Health](#)
 - SAMHSA's [Recovery Statement](#)
 - SAMHSA's [National Survey of Substance Abuse Treatment Services \(N-SSATS\)](#)
 - SAMHSA's [Drug Abuse Warning Network](#)
 - SAMHSA's [Treatment Episode Data Set](#)
 - [HealthCare.gov](#)
 - [Kaiser Family Foundation's Focus on Health Reform](#)
 - [Mental Health America](#)
 - [State Directory of Consumer Affairs \(NAC/SMHA\)](#)
 - [The Parity Implementation Coalition's Parity Toolkit](#)
- **Use a recent local story**, such as a personal account of a prominent community member in recovery, to connect with readers and make it personal. Use an active voice, rather than passive voice. For example, active voice is "I changed because of recovery" whereas passive voice is, "Recovery was the change."
- **Keep your op-ed** to about 600 words, but be sure to confirm specific op-ed guidelines with your newspaper. Refer to the section below for [tips](#) on how to submit your op-ed.
- **Make sure your op-ed is reader-friendly** by avoiding acronyms or terms unfamiliar to those outside your field. Newspapers are usually written at the fifth-grade level.
- **Include your name**, contact information, and a description of who you are and any other facts that highlight your qualifications. Some newspapers will contact you before printing an op-ed to verify your information.

Under the Affordable Care Act, insurance companies will be prohibited from imposing lifetime limits in all health plans and insurance policies and starting in 2011, young people, up to age 26, can remain on their parents' health insurance policy. To learn more about health reform refer to the "Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery" document in this toolkit.

How Do I Submit My Op-ed?

While you may submit your op-ed to several publications at once, if you receive word that it will be published, you have to withdraw your other submissions, as it is usually considered an exclusive to the paper. Publications receive a large amount of op-eds and most newspapers won't publish your op-ed if they think it will be printed elsewhere or has already been published in another outlet. Also, if your op-ed is rejected at first, be open to modifications as long as it keeps your message intact. Only move on to a new outlet if you are certain that the first paper contacted won't publish your op-ed.

The tips below will help you when you're submitting your op-ed.

- **Research** the publication's guidelines for submitting an op-ed, submission deadlines, word count minimums or maximums, and how the editor wants to receive the op-ed (some prefer U.S. mail or fax instead of email).
- **Include a cover letter** to introduce yourself when sending your op-ed, include previous interactions with the editor, a brief overview of the op-ed, and information about **Recovery Month**.
- **Place a follow-up call** to the editor one week after submitted. If he or she has not had time to look at it yet, follow-up a week later. Be polite; state the importance of publishing your piece to help others.

If your op-ed is rejected, or your local paper does not publish op-eds by community members, consider exploring online outlets as options.

- Ask the publication's website editor if your op-ed can be posted on the online version of the newspaper. Other online publications such as [Slate](#), [iVillage](#), and [The Huffington Post](#) might be interested in your op-ed, especially if it ties into the larger theme of **Recovery Month** and health reform.
- Blogs are another online outlet to consider. Tweaking your op-ed to directly relate to a specific readership online can help spread your message. Many bloggers enjoy covering local, altruistic events for their audience and most newspapers now have online bloggers that focus on specific issues. There may be a local community blogger dedicated specifically to news and events in your area—in Washington, DC, there are blogs such as [We Love DC](#)—and those outlets might be interested in September **Recovery Month** efforts.

How Do I Share My Op-ed After it is Published?

The **Recovery Month website** is always interested in your published op-ed and any successes you had in promoting **Recovery Month**. If your op-ed is published, it may be picked up by news sites such as [Google News](#) or [Yahoo News](#). Search using keywords or the title of your op-ed to see if it has been reprinted elsewhere. Share them by:

- Posting your published op-ed on the **Recovery Month website**, [Facebook page](#), and [Twitter account](#). If you need help on how to use these online tools, visit the "[New Media Glossary](#)" and "[Developing Your Social Network](#)" documents in this toolkit.
- Distributing your event details, materials, and pictures to the outlets above.
- Sending a copy of your published op-ed and placement information electronically to recoverymonth@samhsa.hhs.gov or to:

Substance Abuse and Mental Health Services Administration
ATTN: Consumer Affairs
Center for Substance Abuse Treatment
1 Choke Cherry Road, Second Floor
Rockville, MD 20857

Also, we encourage you to fill out the "[Customer Satisfaction Form](#)" to share your outreach efforts and give feedback.

Additional Recovery Month Resources

For further information on **Recovery Month**, substance use and mental disorders, treatment and recovery, use the following resources:

- **SAMHSA's National Helpline – 1-800-662-HELP (4357)**, or 1-800-487-4889 (TDD) – Provides 24-hour free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website (<http://www.samhsa.gov/treatment>)** – Contains information about treatment options and special services located in your area.
- **The Recovery Month Website (<http://www.recoverymonth.gov>)** – Contains all the materials from this toolkit and a wide variety of relevant resources.
- **SAMHSA's ADS Center (<http://www.stopstigma.samhsa.gov>)** – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.

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OP-ED TEMPLATE

Approximately **533** words

How New Health Care Options Will Help the Nation and Individuals with Substance Use and/or Mental Disorder

Help is on its way if you or someone you know suffers from a substance use or mental disorder and is currently uninsured. Substance use and mental disorders are conditions that, with professional help, can be treated like any other condition. The Affordable Care Act signed in March 2010 includes many new provisions aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost. Those in need of treatment and recovery support services will be able to receive help, improve their overall health and well-being, and reclaim their lives.

Every September, people throughout the Nation celebrate the annual National **Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)** observance, a national initiative sponsored by the U.S. Department of Health and Human Services' (HHS) Substance Abuse and Mental Health Services Administration's (SAMHSA) Center for Substance Abuse Treatment (CSAT). I'm urging all members of **[community/city/town]** to take a few minutes and recognize the importance of recovery through a variety of treatment resources and recovery support programs. By doing this, you will fulfill several of SAMHSA's **Strategic Initiatives**, particularly the goals of increasing public awareness of substance use and mental disorders, health reform implementation, and offering recovery support through an individual, program, and system approach.

According to the **2009 National Survey on Drug Use and Health**, an estimated 22.5 million people aged 12 or older in the United States met criteria for substance use disorders and an estimated 45.1 million adults aged 18 or older in the United States met criteria for a mental health problem in 2009. With new laws in place requiring health insurance coverage, those suffering from these conditions will have expanded access to treatment and recovery services. As a responsible community, we must acknowledge and embrace the positive impact of treatment and recovery assistance.

Having **[been in recovery for XX years / worked in the recovery field for XX years / other statement of personal experience]**, I have firsthand knowledge of the devastation that addiction and/or mental illness brings to individuals and their families. This is a real issue in this community, with an estimated **[number]** people needing treatment last year in **[community/city/town/State]**. It is our duty to educate the public about the effectiveness of treatment, and we hope that you can support this initiative by attending a **Recovery Month** event **[or list specific event in your area here]**. **[Name of organization]** is celebrating **Recovery Month** 2011 by holding a variety of educational and entertaining events **[or name specific event]** to honor individuals and families who are in long-term recovery, and acknowledge those working in the field who provide recovery services.

By supporting **Recovery Month** efforts and informing the public about how the Affordable Care Act and MHPAEA will change the access to treatment and recovery services, you are helping your community and society as a whole. Substance use and mental disorders affect our entire community, and I urge local businesses, community organizations, colleges, schools, administrators, and government agencies to support individuals in need of help, and those in recovery. Additionally, please provide information about local treatment and recovery resources on your websites and link to additional information available at <http://www.recoverymonth.gov>.

[Include author name, title, and brief summary of qualifications that make him or her an expert.]

###

OFFICIAL PROCLAMATIONS

Official *Recovery Month* Proclamations

A proclamation officially commemorates a specific issue, such as the benefits of treatment and recovery on your local community. Federal officials, governors, State legislators, or city, county, and town officials can issue a proclamation designating September as **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)** in their jurisdiction. When a local government official endorses **Recovery Month**, more people in their community are educated about substance use and mental disorders and the benefits that treatment and recovery support services have on our society as a whole. In addition, **Recovery Month** spreads the message that behavioral health is essential of health and one's overall wellness, and that prevention works, treatment is effective, and people with substance use and mental disorders can and do recover.

Your proclamation supporting **Recovery Month** upholds the [Substance Abuse and Mental Health Services Administration's \(SAMHSA's\) Strategic Initiatives](#), particularly the goals of increasing public awareness of substance use and mental disorders, health reform education and offering recovery support through an individual, program, and system approach. Throughout the year, hundreds of proclamations have been signed to support **Recovery Month**, including 176 issued in communities across the country in 2010. The President of the United States has signed a proclamation declaring September as **Recovery Month** for the past 10 years, further recognizing substance use and mental disorders are conditions that need to be addressed, just like any other illness.

The proclamation should highlight the mission of **Recovery Month**—to celebrate individuals who have achieved long-term recovery, acknowledge those who work in the prevention, treatment and recovery services field, and to encourage individuals in need to seek help. Call attention to this year's theme, **“Join the Voices for Recovery: Recovery Benefits Everyone,”** which emphasizes that all American's have the opportunity to access provisions within the Affordable Care Act and the Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost. Use this document to learn how to draft a proclamation, tips on gaining support from government officials, and ways to publicize the signing of your proclamation.

Did you know that under the Affordable Care Act, small businesses (those with 50 employees or less) may seek grants that will help them offer comprehensive wellness programs for their employees, including addressing substance use and mental disorders? Refer to the “Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery” document in this toolkit for more detailed information on the Affordable Care Act and the Mental Health Parity and Addictions Equity Act (MHPAEA).

How Do I Secure a Government Official or Agency?

Use the following tips to achieve support from a local official and secure his or her signature on your proclamation:

- **Research the local officials in your community**, especially focusing on those who have supported health related issues in the past.
- **Inquire about a local official's interest in issuing a *Recovery Month* proclamation.** Reach out to a staff member in the official's communications office at least 3 months in advance of **Recovery Month**. During your initial conversation, introduce the annual celebration, the details of your activities, and why it's significant in your community. Be sure to understand the process of getting a proclamation signed and which style the official prefers (traditional or modern). If you have worked with an official in the past, mention it to trigger their memory.
- **Draft your proclamation once you have determined the official's interest and preferred writing style (traditional or modern).** Prepare your proclamation in advance of your initial conversation so that the officials can better understand the mission of **Recovery Month**; after your initial discussion, you can alter it accordingly.

RECOVERY BENEFITS EVERYONE

- **Follow up with the official's office frequently** since you might not hear back from the official's office for a few days or even weeks. Don't hesitate to check the status of your proclamation and offer to provide any additional information the official may need.

What are the Differences between Traditional and Modern Proclamations?

- There are two styles to choose from when writing your **Recovery Month** proclamation: traditional and modern. While they differ in format, the ultimate purpose is the same, and they are equally effective. **Traditional proclamations** begin with a series of statements starting with the words "whereas," meaning "because," "inasmuch," or "since." Each clause states the problems or issues being addressed and is followed by a concluding phrase beginning with "therefore," which specifically requests the support or action needed. On the other hand, **modern proclamations** are written in a letter format. The **Presidential Proclamation** is typically written in a modern format. Samples of both formats are included at the end of this document. Previous signed proclamations can be viewed on the **Recovery Month** website at <http://www.recoverymonth.gov> under the "Proclamations" section.

Use the following resources to include local information about treatment and recovery services in your proclamation, as well as statistics relevant to your community:

- **Single-State Agency (SSA)** for substance use and mental health prevention, treatment, and recovery support services
- SAMHSA's **National Survey on Drug Use and Health**
- SAMHSA's Recovery Statement
- SAMHSA's National Survey of Substance Abuse Treatment Services (N-SSATS)
- SAMHSA's Drug Abuse Warning Network
- SAMHSA's Treatment Episode Data Set
- HealthCare.gov
- Kaiser Family Foundation's Focus on Health Reform
- Mental Health America
- State Directory of Consumer Affairs (NAC/SMHA)
- The Parity Implementation Coalition's Parity Toolkit

Expanding the Reach of Your Proclamation

Once an official has decided to sign and issue your **Recovery Month** proclamation, use the following information to maximize publicity:

- **Arrange a press conference or "town-hall" meeting.** Arrange to have the official sign the proclamation during a press conference, or he or she can speak at a forum after the signing featuring other panelists such as treatment providers, policymakers, and individuals in recovery. Incorporate the signing of a proclamation into another **Recovery Month** occasion, such as a rally or athletic event. Refer to the "Promoting **Recovery Month** with Events" piece for details on how to plan events.
- **Distribute copies of the signed proclamation** to the "local" or "metro" desks of local newspapers, along with a press release announcing the issuance of the **Recovery Month** proclamation. Refer to the tips on how to write a press release in the "Press Materials for Your **Recovery Month** Event" document in this toolkit.
- **Display copies of the proclamation in the lobbies of public places,** such as libraries, schools, college campuses, community mental health centers, Medicare centers, and government buildings. Remember to obtain permission from the location first before displaying these copies.

- Post a copy of the proclamation on the **Recovery Month** website, <http://www.recoverymonth.gov>, and send it electronically to recoverymonth@samhsa.hhs.gov or in hard copy to:

Substance Abuse and Mental Health Services Administration
 ATTN: Consumer Affairs
 Center for Substance Abuse Treatment
 1 Choke Cherry Road, Second Floor
 Rockville, MD 20857

How Do I Share My Proclamation’s Outcomes and Successes?

Join others who support **Recovery Month** by sharing your successes, which helps others draft an effective proclamation in the future. After your event, remember to:

- Post your proclamation on the **Recovery Month** website, [Facebook page](#), and [Twitter account](#). If you need help on how to use these online tools, visit the “[New Media Glossary](#)” and “[Developing Your Social Network](#)” documents in this toolkit.
- Share how you used these **Recovery Month** proclamation tips by completing the “Customer Satisfaction Form.”

Additional Recovery Month Resources

For further information on **Recovery Month**, substance use and mental disorders, treatment and recovery, use the following resources:

- **SAMHSA’s National Helpline, 1-800-662-HELP (4357)** or 1-800-487-4889 (TDD) – Provides 24-hour free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.
- **SAMHSA’s “Find Substance Abuse and Mental Health Treatment” Website** (<http://www.samhsa.gov/treatment>) – Contains information about treatment options and special services located in your area.
- **The Recovery Month Website** (<http://www.recoverymonth.gov>) – Contains all the materials from this toolkit and a wide variety of relevant resources.
- **SAMHSA’s ADS Center** (<http://www.stopstigma.samhsa.gov>) – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.

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SAMPLE PROCLAMATION 1: TRADITIONAL FORMAT

WHEREAS, behavioral health is an essential part of health and one’s overall wellness, and prevention works, treatment is effective, and people can and do recover from substance use and mental disorders; and

WHEREAS, all people have the fundamental and inherent value to be accepted and treated with respect, human dignity, and worth; and

WHEREAS, individuals should have access to fully participate in community life including economic advancement and prosperity; fair and decent housing; quality education; positive opportunities to benefit from and contribute to material, cultural, and social progress; and

WHEREAS, it is critical to educate our policymakers, friends and family members, health care providers, and businesses that substance use and mental disorders are treatable, and that people should seek assistance for these conditions, with the same urgency as they would any other health condition; and

WHEREAS, all Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost; and

WHEREAS, substance use and mental disorders are serious public health problems. In 2009, 4.3 million people received treatment for a substance use disorder and 30.2 million people for a mental health problem (**2009 National Survey on Drug Use and Health**), we must continue to reach the millions more who need help; and

WHEREAS, to help more people achieve long-term recovery, and learn how recovery positively benefits the Nation’s overall well-being, the U.S. Department of Health and Human Services (HHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), the White House Office of National Drug Control Policy (ONDCP), and **[name of State, city, county or treatment organization]** invite all residents of **[city/town]** to participate in National **Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)**; and

NOW, THEREFORE, I [name and title of your elected official], by virtue of the authority vested in me by the laws of [city, State, or locality], do hereby proclaim the month of September 2011 as

National Recovery Month: Prevention Works, Treatment is Effective, People Recover

In **[city or State]** and call upon the people of **[city or State]** to observe this month with appropriate programs, activities, and ceremonies supporting this year’s theme, **“Join the Voices for Recovery: Recovery Benefits Everyone.”**

In Witness Whereof, I have hereunto set my hand this **[day of month]** day of September, in the year of our Lord two thousand eleven, and of the Independence of the United States of America the two-hundred and thirty-sixth.

Signature
[Insert City/State or Other Official Seal]

SAMPLE PROCLAMATION 2: MODERN FORMAT

Research shows that substance use and mental disorders are treatable, and people should seek assistance for these conditions, with the same urgency as they would any other health condition. Thus, it is essential for the 22.5 million people aged 12 or older who currently suffer from a substance use disorder and the 45.1 million adults aged 18 or older living with a mental health problem, to realize that recovery is possible to improve overall health and well-being. To build on that encouraging message, this year's **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)** theme is **"Join the Voices for Recovery: Recovery Benefits Everyone."** The 22nd national campaign spreads the message that behavioral health is an essential part of health and one's overall wellness, and that prevention works, treatment is effective and people can and do recover from substance use and mental disorders.

All people have the fundamental and inherent value to be accepted and treated with respect, human dignity, and worth. Individuals should have access to fully participate in community life including economic advancement and prosperity; fair and decent housing; quality education; positive opportunities to benefit from and contribute to material, cultural, and social progress.

In 2009, 4.3 million people aged 12 or older received treatment for substance use disorders and 30.2 million adults aged 18 or older received services for mental health problems according to the **2009 National Survey on Drug Use and Health**. All Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost

We, and those across the United States, need to recognize the achievements of those who have achieved long-term recovery, and share with others how recovery positively benefits society as a whole.

For 22 years, **Recovery Month** has worked to improve the lives of those suffering from substance use and mental disorders by raising awareness of the disease and educating communities about the treatment and recovery resources that are available. For the above reasons, I am asking the citizens of **[city or State]** to join me in celebrating this September as National **Recovery Month: Prevention Works, Treatment is Effective, People Recover.**

I, **[name and title of elected official]**, do hereby proclaim the month of September 2011 as

National Recovery Month: Prevention Works, Treatment is Effective, People Recover

In **[city or State]** and call upon our community to observe this month with compelling programs and events that support this year's theme, **"Join the Voices for Recovery: Recovery Benefits Everyone."**

Signature
[Insert City/State or Other Official Seal]

PUBLIC SERVICE ANNOUNCEMENTS

Using Public Service Announcements To Promote *Recovery Month*

Public Service Announcements (PSAs) are television and radio advertisements aired at no cost and are a great way to promote **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)**. Every year, the [Substance Abuse and Mental Health Services Administration's \(SAMHSA's\) Center for Substance Abuse Treatment \(CSAT\)](#), within the [U.S. Department of Health and Human Services \(HHS\)](#), creates a series of PSAs that encourage individuals in need to seek help and promotes treatment and recovery from substance use and mental disorders.

These PSAs, produced for television and radio, are provided in different lengths, in English and Spanish, and can be tailored with your local information to reach individuals in your community in need of treatment and recovery support services. They also spread the message that prevention works, treatment is effective, and people can and do recover from substance use and mental disorders.

The PSAs can be used year-round to promote your **Recovery Month** event. A [viral video PSA](#) is also available exclusively online to share with your community and can be found on the **Recovery Month** website, as well on the **Recovery Month** [YouTube](#) and [Facebook](#) pages. Additionally, the **Recovery Month Community Event Television PSA**, developed by [Odyssey Networks](#), can be used by any organization and community throughout the year and highlights **Recovery Month** events held throughout the United States. In this document, you will find information about the PSAs and helpful tips on how to distribute and promote them.

This year's theme, **"Join the Voices for Recovery: Recovery Benefits Everyone,"** emphasizes that all American's have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost. Spreading this message through PSAs aligns SAMHSA's [Strategic Initiatives](#), particularly the goals of increasing public awareness of substance use and mental disorders, health reform implementation, and offering recovery support through an individual, program, and system approach. The **Recovery Month** PSAs include imperative information, such as on SAMHSA's National Helpline, **1-800-662-HELP (4357)**, or 1-800-487-4889 (TDD), which provides 24-hour free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.

How Do I Distribute the Live-Read PSAs Scripts?

Live-read radio scripts are a type of PSA that can be distributed to radio stations to be read by disc jockeys (DJs). You can alter the scripts to fit your community's needs and focus on issues relating to substance use and mental disorders, treatment, and recovery. The two 30-second and two 15-second radio PSA scripts included in this document can be hand delivered, emailed, faxed, or mailed to radio stations. It's essential to contact the radio stations to see how they prefer to receive the scripts. At larger stations, there may be an individual, or a person in charge of public campaigns, to contact directly.

Make sure to include a cover letter when sending the live-read PSAs. You can simply modify the pitch letter located in the ["Working with the Media"](#) document in this toolkit. Explain the **Recovery Month** campaign, the importance of the message that recovery is possible, and your contact information. To focus the message on your community, include information about local substance use and mental disorders and recovery initiatives. Below you will find some resources to help localize your cover letter and drive home the importance of recovery to a station's listeners.

- [Single-State Agency \(SSA\)](#) for substance use and mental health prevention, treatment, and recovery support services
- SAMHSA's [National Survey on Drug Use and Health](#)
- SAMHSA's [Recovery Statement](#)

- SAMHSA's National Survey of Substance Abuse Treatment Services (N-SSATS)
- SAMHSA's Drug Abuse Warning Network
- SAMHSA's Treatment Episode Data Set
- HealthCare.gov
- Kaiser Family Foundation's Focus on Health Reform
- Mental Health America
- State Directory of Consumer Affairs (NAC/SMHA)
- The Parity Implementation Coalition's Parity Toolkit

How are the Pre-Recorded PSAs Distributed?

SAMHSA's produced television and radio PSAs are distributed to more than 1,000 television and 3,000 radio stations nationwide and are available in both English and Spanish. The television PSAs are available in 30- and 20/15-second lengths, and the radio PSAs are available in 30- and 20-second lengths. If your local radio or television station has not received a **Recovery Month** PSA, you can view electronic copies online in the "Multimedia" section of the **Recovery Month** website at <http://www.recoverymonth.gov>. Copies are available by calling 617-520-2567 or emailing recoverymonth@samhsa.hhs.gov.

The Affordable Care Act gives Americans more freedom and control over their health care, as well as new benefits that ensure people will receive the care they need at a more reasonable cost. New provisions through the law will prevent insurance companies from denying coverage due to a pre-existing condition for children starting in 2011, and for adults in 2014. Refer to the "Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery" document in this toolkit for more information.

These pre-recorded PSAs can be localized to add your community information. Contact recoverymonth@samhsa.hhs.gov for more information about how to tailor the open-ended versions of the **Recovery Month** PSAs. Another option is to work with a local production company to insert supplementary information, such as a logo, website, or phone number. The PSAs also provide more information about the "**Join the Voices for Recovery: Recovery Benefits Everyone,**" theme and how public awareness will increase access for those in need of essential substance use and mental health treatment and recovery support services, including behavioral health treatment. If you chose to add local information, make sure you contact your local resources so they can prepare for a potential increase in inquiries.

How do I Promote Radio and Television PSAs?

To promote the **Recovery Month** television and radio PSAs, **call** local television and radio stations, introduce yourself and explain why **Recovery Month** PSAs are important to play in your area. To find your local stations' contact information, do an online search or use the phonebook. Another easy way to promote the PSAs is to **play** them on a large screen television or on a sound system for radio in both English and Spanish at your **Recovery Month** event.

Also, **email** the PSAs to all your **Recovery Month** supporters, asking them to forward the message on to anyone they know who may find them useful. It's important to send all necessary information in that email, including a cover letter explaining the PSA's importance, and your contact information. **Post a link on your website** to the PSAs, which can be found on the **Recovery Month** website, [Facebook page](#), and [YouTube channel](#). Alternatively, **embed them within your own website**. Typically you will see an embed code near the video to copy

and paste into your website. Email recoverymonth@samhsa.hhs.gov to reach the site's webmaster if there is no code, or if you have any other questions.

Below you can find live-read PSA scripts promoting **Recovery Month**. Your local radio station can add their personal touch to these scripts by having one of their station's most popular radio personalities or a community leader who may be visiting the station read them live.

Additional Recovery Month Resources

For further information on **Recovery Month**, substance use and mental disorders, treatment and recovery, use the following resources:

- **SAMHSA's National Helpline – 1-800-662-HELP (4357)**, or 1-800-487-4889 (TDD) – Provides 24-hour free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website (<http://www.samhsa.gov/treatment>)** – Contains information about treatment options and special services located in your area.
- **The Recovery Month Website (<http://www.recoverymonth.gov>)** – Contains all the materials from this toolkit and a wide variety of relevant resources.
- **SAMHSA's ADS Center (<http://www.stopstigma.samhsa.gov>)** – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.

Inclusion of websites and event examples in this document and on the [Recovery Month website](http://www.recoverymonth.gov) does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

2011 Live-Read Radio PSA Scripts

:30

Whether you're a parent, friend, co-worker, boss, or, health care provider, it's important to know that the road to recovery is now more accessible. Recovery from substance use and mental disorders benefits everyone. It all starts on day one.

This September, celebrate ***National Recovery Month*** and help yourself or someone you love take the first step towards recovery.

For information or treatment referral, call **1-800-662-HELP (or replace this number with a local treatment provider's)**.

:15

Recovery from substance use and mental disorders benefits everyone ... and the road to recovery is now more accessible.

This September, celebrate ***National Recovery Month*** and call **1-800-662-HELP (or replace this number with a local treatment provider's)** for information or treatment referral.

:30

Don't let substance use or mental disorders keep you from living your life. Today, there are many options that make the road to recovery more accessible. It begins with the first step.

This September, celebrate ***National Recovery Month*** and help yourself or someone you love take the first step towards recovery.

For information or treatment referral, call **1-800-662-HELP (or replace this number with a local treatment provider's)**.

:15

Don't let substance use or mental disorders keep you from living your life. The road to recovery begins with the first step.

This September, celebrate ***National Recovery Month*** and call **1-800-662-HELP (or replace this number with a local treatment provider's)** for information or treatment referrals.

CAMERA-READY LOGO SHEET

Customize your materials using the artwork provided. Logos below can be printed in either PMS 268 or black.

National
Recovery Month
Prevention Works • Treatment is Effective • People Recover
SEPTEMBER**2011**

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National
Recovery Month

Prevention Works • Treatment is Effective • People Recover

SEPTEMBER 2011

RECOVERY BENEFITS EVERYONE



OVERVIEW

Recovery Benefits Everyone!

In 2009, 4.3 million people aged 12 or older received treatment for a substance use disorder¹ and 30.2 million adults aged 18 or older received mental health services,² thus beginning their recovery. Personal stories of those in recovery from substance use and mental disorders inspire and empower others to begin their own journey. Read about several people's recovery journey in the "Join the Voices for Recovery" document in this toolkit.

For 22 years, **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)** has celebrated people in recovery, lauded the work of treatment providers, and spread the message that prevention works, treatment is effective, and recovery is possible. **Recovery Month** highlights that all individuals have the fundamental and inherent value to be accepted and treated with respect, dignity, and worth. In addition, the observance highlights that behavioral health is an essential part of health and one's overall wellness. This year's theme, "**Join the Voices for Recovery: Recovery Benefits Everyone,**" emphasizes that:

- All Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost.
- Public awareness will increase access for those in need of essential substance use and mental health treatment and recovery support services, including behavioral health treatment.
- These changes will improve the overall health and well-being of people in the United States.

The passage of the MHPAEA provides parity, or the recognition by insurance services—both public and private—that substance use and mental disorders are treated comparably to other physical health and medical conditions.³

Recovery Month supports many of the [Substance Abuse and Mental Health Services Administration's \(SAMHSA's\) Strategic Initiatives](#), particularly the goals of increasing public awareness of substance use and mental disorders, health reform implementation, and offering recovery support through an individual, program, and system approach. Sponsored by SAMHSA's [Center for Substance Abuse Treatment \(CSAT\)](#), within the [U.S. Department of Health and Human Services](#), this year's **Recovery Month** campaign encourages policymakers, health care providers, the recovery community, friends and family members, and employers to help people seek assistance for substance use and mental disorders with the same urgency as any other health care issue.

This overview will discuss health reform's impact on access to treatment and recovery support services; the overall need for prevention, treatment, and recovery from substance use and mental disorders in today's society; and how to raise awareness about these services. Additionally, it will highlight the effectiveness and importance of removing barriers to treatment and recovery support services.

The Substance Use and Mental Health Landscape

Substance use and mental disorders touch everyone in some way—regardless of race, age, gender, workplace, geography, or socioeconomic level. While the conditions are widespread, treatment services are effective, and recovery is possible. In fact, millions of Americans are in recovery today.⁴ At the [National Summit on Recovery](#), recovery from substance use disorders was defined as a process of change through which an individual achieves abstinence from alcohol and/or drugs and improved health, emotional wellness, and quality of life.⁵ According to the [National Consensus Statement](#), recovery from mental health problems is a process in which people are able to live, work, learn, and participate fully in their communities.⁶ For some individuals, recovery from a mental health problem means the ability to live a fulfilling and productive life despite a disability. For others, recovery implies the reduction or complete remission of symptoms.⁷



ROB JASPERSON
 ROSEBURG, OR

Recovery has created a different world for me these past 23 years. I entered a residential program in 1987 at age 40, after my second marriage began to fail and I realized that alcohol had been my best friend for 27 years. We have no way of knowing the damaging effects of our addiction on our families and friends until we change. Addiction causes one to look inward, not out toward others.

That has changed now. In my first year of sobriety, I worked with recovering adolescents. After a 30-year career with the U.S. Postal Service, I returned to college, graduated, and have been a certified addictions counselor for the last five years. I help my clients set the best example they can for their families. We need their love and trust.

I have a happy marriage of 32 years with my wife and enjoy close relationships with my son, daughter, and two grandchildren. I spend my free time playing active sports like road-biking and kayaking, and doing creative arts. I have volunteered for many organizations. I am on the local American Cancer Society's Relay for Life team and am on the volunteer committee with Umpqua Partners Ramble for Recovery. I also enjoy helping local Cub Scouts earn badges.

My greatest and most humbling contribution was to anonymously donate a kidney in 2005. I was also chosen in 2010 to be A&E's Oregon Delegate for Faces and Voices of Recovery in celebration of **Recovery Month**. Recovery is a second chance at life and has shown me that there are no limitations to giving to our community and leading the best life we possibly can.

Substance use disorders—which include misuse, dependence, or addiction to alcohol and/or legal or illegal drugs—and mental health problems—which include depression, anxiety disorder, mood disorder, post-traumatic stress disorder (PTSD), and others—are major public health concerns in the United States, but prevention and treatment services are available and effective. Studies have shown that substance use disorders include both physical and mental dependences,⁸ and have characteristics similar to other chronic diseases, such as asthma, hypertension, and diabetes.⁹ Like some other health conditions, with substance use disorders:¹⁰

- Genetics can play a role in the likelihood that one will develop the condition;
- The physical impact can be significant and may lead to increased hospitalization and other health care conditions;
- Self-care helps develop better coping mechanisms and a healthier lifestyle; and
- For some, medication can help by targeting specific imbalances and can ease the discomfort of withdrawal symptoms in early recovery.

Like substance use disorders, mental health problems are common, yet treatable, and the realities are often misunderstood. An individual's mental health refers to our cognitive and/or emotional well-being—how one thinks, feels, and acts. The most common mental health problems are:

- Anxiety disorders, which include panic disorder, phobias, obsessive-compulsive disorder (OCD), and post-traumatic stress disorder (PTSD). To cope with an anxiety disorder, most people will try to avoid exposure to whatever object or situation triggers their anxiety.¹¹ With therapy that focuses on identifying, understanding, and changing thinking and behavior patterns, benefits are usually seen within 12 to 16 weeks of receiving treatment.¹²

- Mood disorders, which include major and mild depression, bipolar disorder, and seasonal affective disorder (SAD). Experts claim that approximately 80 percent of patients with mood disorders improve significantly with treatment and recovery support services.¹³

According to the National Institute of Mental Health, an estimated 26.2 percent of Americans aged 18 and older—approximately one in four adults—suffer from a diagnosable mental health problem in a given year.¹⁴ Fortunately, between 70 and 90 percent of individuals with mental health problems have significant reduction of symptoms and improved quality of life with a combination of medication, therapy, and other support.¹⁵ As with other chronic illnesses, individuals who seek treatment and recovery support services for substance use and mental disorders learn new life skills and go on to live healthy, empowered, and productive lives.

Understanding the Need for Prevention and Treatment

Effective and cost-efficient strategies for preventing and reducing the severity of some substance use and mental disorders exist. For example, school-based prevention programs for children, teens, and young adults that talk about the dangers of alcohol and/or drug use can reduce the development of substance use disorders.¹⁶ Research suggests these school-based prevention programs can delay the initiation of use for approximately two years, with some youth never initiating any substance use.¹⁷ Cost-benefit estimates indicate that effective school-based programs could save up to \$18 for every \$1 spent on these initiatives.¹⁸

Suicide is another condition correlated with substance use and mental disorders. Suicide rates among individuals seeking treatment for alcohol or drug misuse may be up to 10 and 14 times higher, respectively, than suicide rates in the general population.¹⁹ Since suicide is a major cause of death among people with serious mental health problems, it is important that families, policymakers, community mental health centers, health care professionals, faith-based communities, employers, and the general public, alike, help combat this all too common problem.²⁰

SAMHSA's Prevention **Strategic Initiative** builds emotional health, prevents or delays onset, and mitigates symptoms and complications from substance use and mental disorders. Many SAMHSA-sponsored programs, including **Building Blocks for a Healthy Future** and **Too Smart to Start**, are designed to provide parents, caregivers, and educators with necessary skills to prevent the use of potentially harmful substances, including alcohol, tobacco products, illicit and prescription drugs, and other addictive substances.

Despite numerous successful prevention efforts, in 2009, 20.9 million people aged 12 or older still needed treatment for substance use disorders but did not receive it at a specialty substance use facility,²¹ and 6.1 million adults in the United States aged 18 or older who reported an unmet need for mental health care and didn't receive services.²² According to national estimates of the health costs associated with 33 diseases and conditions, alcohol misuse ranked as the second costliest condition, followed by tobacco use at sixth, and drug disorders at seventh.²³ Fortunately, substance use and mental disorders are treatable, and recovery is possible. In fact, recovery is so common that half of all adults over age 18 know someone in recovery from addiction to commonly used substances, such as alcohol, illicit drugs, or prescription drugs.²⁴

A number of risk factors are associated with substance use and mental disorders. The use and misuse of substances, including tobacco, alcohol, illicit drugs, and over-the-counter medications, often begins in childhood or teenage years.²⁵ Research suggests that genetic factors account for between 40 to 60 percent of a person's risk of developing a substance use disorder.²⁶ Also, children of parents with substance use disorders are at greater risk for depression or anxiety,²⁷ physical health problems, and learning deficits.²⁸

However, just because a substance use or mental disorder runs in a family, it doesn't mean that others members will be affected. In fact, more than one-half of all children of people with alcohol dependence don't develop the disease.²⁹ Research shows that children in grades 7 through 12 who learn about the dangers of drug use from their parents are up to 50 percent less likely to ever misuse substances, therefore, it's important for parents to have ongoing conversations about the consequences of alcohol and/or drug use.³⁰ Likewise, while some mental health problems—such as bipolar disorder—tend to run in families, most children with a family history will not develop the condition.³¹ It's also important to reduce discrimination and prejudices surrounding mental health problems by openly discussing mental health, just like any other health condition. If parents are worried that they or their children may be at risk for a substance use or mental disorder, consider the following tips:

- **Do not drink illegally or use illicit drugs** – In 2009, 10.4 million people under the legal drinking age consumed alcohol.³² Research proves that those who start drinking at a later age are less likely to develop a substance use disorder than those who began using before age 21.³³ Additionally, the age that a person first uses an illicit drug, such as marijuana, correlates with the development of substance use disorders. For example, 12.6 percent of children aged 14 or younger who first tried marijuana in 2009 were classified with a substance use disorder, whereas only 2.1 percent of adults over age 18 who first tried marijuana developed a dependence.³⁴
- **Don't misuse prescription or over-the-counter medications** – In 2009, 2.6 million Americans age 12 and older took a prescription pain reliever, tranquilizer, stimulant, or sedative for nonmedical purposes.³⁵ Medications, both prescription and over-the-counter, can have harmful consequences if used in excess, not for the prescribed reasons, or by someone other than for whom it was purchased.^{36,37} Furthermore, abusing, sharing, or distributing prescription drugs is illegal.³⁸ Only one third of parents report discussing the risks of abusing prescription medicines with their kids.³⁹ Warn family and friends that while buying prescription drugs online may be cheaper than in a pharmacy, there are many possible risks. Not only do online stores not know the cause of the person's health problem and medical history, some medicines sold online are fake, too strong or weak, too old to work, aren't labeled, and may even not be FDA-approved.⁴⁰
- **Address traumatic events** – Experiencing a traumatic event contributes to the risk of developing a substance use or mental disorder. Be proactive and recognize feelings if trauma or difficulty has been experienced, such as a death or divorce in the family, violence, or catastrophe.⁴¹
- **Talk to a health care professional or trusted person** – Communicate any concerns with a primary care doctor, nurse, clergy, peer, or other community health provider. These professionals can recommend intervention and prevention strategies that could help avoid developing a substance use or mental disorder.⁴²
- **Stay physically and mentally healthy** – Exercise and eat healthy foods to prevent physical ailments that can contribute to a substance use or mental disorder. In addition, incorporate techniques into a daily routine that can prevent stress, including listening to music, meditation, and journaling.⁴³ The Federal Government and many States are creating wellness initiatives to promote both physical and mental wellness. For example, SAMHSA's [10x10 Wellness Initiative](#) aims to increase the life expectancy for individuals with mental health problems by 10 years over the next 10 years. Sign the [Pledge for Wellness](#) to show support for people with mental health problems in hope they achieve optimal health, happiness, and recovery.

Expanded Access to Treatment

With the passage of the Affordable Care Act in 2010, health care coverage will expand to approximately 32 million Americans who were not previously insured.⁴⁴ These new changes will likely help the 36.8 percent of people who needed treatment for a substance use disorder, but did not receive it due to insufficient health care coverage or cost issues (based on combined data from 2006 to 2009).⁴⁵ In 2009, approximately 22 percent of adults with substance use and/or mental disorders were uninsured. Of these uninsured adults, one in three had incomes below the Federal Poverty Level.⁴⁶ There is a great need to help people who suffer from substance use and/or mental disorders gain access to treatment and recovery support services and now, through health reform, this vision is about to become a reality for many.

The Affordable Care Act includes many new provisions aimed at improving coverage for and access to substance use and mental health prevention, treatment, and recovery support services. While insurance plans will differ from person to person, through this Act, which will be fully enacted by 2020, coverage will expand to millions who are currently uninsured. For instance, the law:

- Expands the eligibility for Medicaid, a health program for low income individuals and families, to 133 percent of the Federal Poverty Level (\$14,484 for one person, \$29,726 for a family of four in 2011).⁴⁷ All newly eligible parents and adults without children will receive basic benefits, which includes essential substance use and mental health services at parity.⁴⁸
- Provides subsidies on a sliding fee scale to purchase health coverage for individuals and families up to 400 percent of the Federal Poverty Level (\$43,320 for one person, \$88,200 for a family of four in 2010).⁴⁹

Through the implementation of the MHPAEA, employer health plans with more than 50 employees enrolled that choose to include coverage for substance use and mental health services must provide those benefits in the same way as all other medical and surgical services covered by their plan. Therefore, for these plans that choose to offer the coverage, co-payments, deductibles, and annual and lifetime caps on substance use and mental health treatment benefits must be equal to benefits for other medical conditions.⁵⁰ Specifically, with the implementation of the MHPAEA, the co-payments and deductibles for a visit cannot be larger and there cannot be greater limits in behavioral health inpatient days than for medical or surgical inpatient days.⁵¹

Additionally, when the Affordable Care Act is fully implemented in 2014, State Health Insurance Exchanges will provide individual and small businesses with an insurance marketplace. This “one-stop-shop” will help consumers find and compare affordable, high-quality health insurance options. Exchanges will bring new transparency to the market so that consumers will be able to compare plans based on price and quality.⁵²

Behavioral health is essential to health and this expanded access to treatment and recovery support services can provide thousands of Americans the opportunity to live happy, healthy, and productive lives in long-term recovery.

Encouraging Recovery in Communities Across America

Today, 22.5 million people aged 12 or older need help for an alcohol and/or drug use problem, but less than 10 percent receive treatment,⁵³ costing society more than \$121 billion annually.⁵⁴ In addition, mental health problems—including suicide—account for over 15 percent of the burden of disease in highly developed nations such as the United States. The World Health Organization describes the burden of disease as the impact of a health problem in an area measured by financial cost, mortality, and morbidity. The burden caused by mental health problems is more than the burden caused by all types of cancer.⁵⁵

Barriers to the treatment of substance use and mental disorders, including discrimination, lack of access, and denial still exist and must be removed. In 2009, roughly 1.9 million adults aged 18 or older who reported an unmet need for mental health care did not receive services because they believed that their problem could be handled without care. In addition, 1.1 million adults didn’t know where to go for mental health services.⁵⁶ These barriers need to be removed. The following groups can be instrumental in raising awareness about the importance of accessing treatment and recovery support services and their effectiveness to help erase barriers. Additionally, they can educate people nationwide on the physical, emotional, economical, and social benefits of recovery.

- **Policymakers** – Local, State, and Federal policymakers need to inform their constituents about the benefit of treatment for and recovery from substance use and mental disorders—both on a local and national scale. They can support and promote treatment and recovery support services by sharing why and how recovery positively affects each community—socially and economically. With the passage of the Affordable Care Act, health care coverage will expand to thousands of individuals in the United States who previously were uninsured. By investing in prevention and treatment, the burden could drastically decrease. For example, after individuals receive treatment in an integrated primary care and substance use setting, total medical costs per patient per month are more than halved, from \$431 to \$200.⁵⁷ With treatment, one’s overall health improves, community crime decreases, and employment increases.⁵⁸ SAMHSA’s, [Health Reform Strategic Initiative](#) will provide valuable information to policymakers on insurance coverage for individuals with substance use and mental disorders as health reform is implemented and the delivery of person-centered care and services by providers.
- **Individuals Affected by Substance Use and Mental Disorders, Families, and People in Recovery** – Millions of people in the United States are directly or indirectly affected by substance use and mental disorders. Recovery positively affects communities, both socially and economically. By investing in treatment, one can expect the following in their community:⁵⁹
 - Decreased crime
 - Improved health
 - Increased employment

Additionally, for every \$1 invested in substance use disorder treatment, taxpayers save at least \$7.46 in costs to society.⁶⁰ To reduce costs to society and improve the Nation's health, we must encourage those in need to seek treatment and recovery support services.

If an individual's family member or friend's personality, physical appearance, or behavior has changed drastically, it may be a symptom of a substance use or mental disorder. Other common physical and behavioral signs and symptoms may include:^{61,62}

- Drastic changes in eating habits or unexplained weight loss or gain
- Poor physical coordination
- Red, watery eyes or pupils that are larger or smaller than usual
- Tremors or shakes of the hands, feet, or head
- Changes in friends or sudden avoidance of old social circle
- Drop in grades at school or performance at work
- General lack of motivation, energy, and self-esteem
- Thoughts of suicide or long-lasting sadness or irritability
- Frequent outbursts of anger or aggressive behavior

Family members should know that helping a loved one is possible. All people should be familiar with prevention, treatment, and recovery services covered under their health plan and call their insurance company with any questions. For additional treatment and recovery support resources, call SAMHSA's National Helpline at **1-800-662-HELP (4357)** or visit SAMHSA's [Treatment Locator](#). People already on a path of recovery can help others during their journey through support groups, so they too, can live a healthy, productive life and participate fully in their community.

- **Health Care Providers** – Primary care providers, community health centers, and Federally Qualified Health Centers (FQHC) screen, diagnose, and treat people with substance use and mental disorders or work with specialty providers to help people recover. These professionals are critical to the overall health of our Nation, since 45 percent of Americans have one or more chronic health conditions that require care.⁶³ These health conditions—including substance use and mental disorders—account for 75 percent of medical care in the United States.⁶⁴ In addition, nearly half of those with any mental health problems suffer from more than one condition at a given time, with severity strongly related to comorbidity.⁶⁵

Health care providers have a responsibility to know and recognize the signs and symptoms of a substance use and mental disorders and how to refer people to specialty treatment if necessary. Additionally, because trauma is an almost universal experience of people receiving treatment for a substance use or mental disorder, providers should support SAMHSA's Strategic Initiative focused on [Trauma and Justice](#). By making trauma-informed decisions when considering treatment and recovery support services, individuals are more likely to recover and live a productive life.⁶⁶

Specialty treatment providers need to know how health reform will affect the delivery of services. For example, under the new law, treatment can be accessed by individuals who haven't received coverage in the past, resulting in an influx of patients. Treatment providers will need to reevaluate the services they offer and how they collaborate with general health care providers to serve the broader populations needing treatment.⁶⁷

- **Workforce** – Of the 20.8 million adults aged 18 or older classified with dependence or abuse, 70 percent were employed full- or part-time.⁶⁸ Substance use disorders cost employers more than \$100 billion annually through absenteeism, increased health claims, increased accidents, and lost productivity.⁶⁹ In addition, depression, the most common mental health problem in the workplace,⁷⁰ affects about 1 in 10 employees.⁷¹ The annual economic cost of mental health problems is estimated to be at least \$79 billion, of which approximately \$63 billion is due to lost productivity.⁷² It is essential for workplaces to publicize that prevention works, treatment is effective, and recovery is possible.

To help workers in need and defray the costs substance use and mental disorders have on the workplace, companies can easily create and implement employee assistance programs (EAPs). EAPs come in many forms, ranging from telephone-based to on-site programs, and often include:

- Confidential screening;
- Treatment referrals;
- Follow-up care; and
- Education and health information.

EAPs benefit companies by improving productivity by more than 50 percent⁷³ and allowing employees to gain support while keeping their job secure.⁷⁴ For example, 80 percent of Federal workers and their family members who received treatment for alcohol or drug problems through the Federal Occupational Health EAP reported improvements in work attendance. A majority also reported improvements in both work performance and social relationships.⁷⁵ In addition, absence, disability, and lost productivity related to mental health problems cost employers more than four times the amount of employee medical treatment. Depression treatment through EAPs can pay for itself through savings in lost earnings, not even taking into account other indirect costs such as increased productivity or reduction in other medical costs. Depression treatment offered by mental health specialists provided a net annual profit of \$877 per patient in regained earnings alone.⁷⁶ Furthermore, the return on investment in EAP services for mental health problems is about a \$2 to \$4 savings for every dollar invested.⁷⁷

It is important for everyone to lend a hand to those in need of support and help to overcome the barriers to treatment and recovery support services that exist. Prevention and treatment are essential in the recovery process, and more than 11,000 specialized facilities in the United States, including residential treatment centers, outpatient treatment programs, and hospital inpatient programs provide care for substance use and mental disorders.⁷⁸ Information about treatment options and special services in your area can be found by calling SAMHSA's National Helpline at **1-800-662-HELP (4357)** or 1-800-487-4889 (TDD), as well as visiting <http://www.samhsa.gov/treatment>.

Recovery Benefits Everyone

The recovery process is different for everyone. SAMHSA supports a recovery-oriented system of care, which recognizes that each person must be the central participant in his or her own recovery. Some people achieve recovery on their own, while others achieve it through peer-to-peer support groups or medication-assisted treatment. While service types may vary, all services should offer choice, honor an individual's potential for growth, focus on a person's strengths, and attend to the individual's overall health and well-being.⁷⁹

Typically, the recovery process involves five broad steps: acknowledging the condition, receiving help, detoxification, working through a variety of treatment and/or support options, and maintaining a state of abstinence, health, and well-being.⁸⁰ For resources that can aid in one's recovery journey and improve overall well-being, refer to the resources available at the end of this document.

Investing in prevention, treatment, and recovery support services benefits everyone by reducing the social and economic burdens that substance use and mental disorders have on society. By investing in these services, the substance misuse costs that exceed half a trillion dollars,⁸¹ and the mental health problems costing approximately \$79 billion, annually, can be decreased.⁸²

SAMHSA encourages community leaders, clergy, health care providers, and employers to inform all individuals that in the wake of health reform, coverage for substance use and/or mental health treatment and recovery support services (if provided) will be equal to the medical and surgical benefits provided for other health conditions. Through access to treatment, recovery is possible, ultimately improving one's entire well-being, including mental, physical, spiritual, and emotional health.

Additional Recovery Resources

A variety of resources provide additional information on **Recovery Month**, substance use and mental disorders, and prevention, treatment, and recovery support services. Use the toll-free numbers and websites below to share your experiences, learn from others, and seek help from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **Substance Abuse and Mental Health Services Administration (SAMHSA) Website** – Leads efforts to reduce the impact of substance use and mental disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357) or 1-800-487-4889 (TDD)** – Provides 24-hour free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website** – Contains information about treatment options and special services located in your area.
- **SAMHSA's "Considerations for the Provision of E-Therapy" Report** – Shares extensive information on the benefits, issues, and success of e-therapy.
- **SAMHSA's ADS Center** – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour hotline available to anyone in suicidal crisis or emotional distress.
- **Alcoholics Anonymous and Narcotics Anonymous** – Contains an array of resources for individuals suffering from alcohol or drug dependence, respectively, and allows them to find and join a local chapter.
- **AI-Anon/Alateen and Nar-anon** – Provides community and support networks for family members of all ages who have been affected by substance use disorders.
- **Narconon** – Provides prevention, education, and rehabilitation programs for drug misuse and drug dependence.
- **SMART Recovery®** – Offers free, self-empowering, science-based mutual-help groups for abstaining from any substance or activity addiction.
- **American Academy of Addiction Psychiatry** – Promotes accessibility to quality treatment for all who need it, educates the public to influence public policy regarding addictive illness, and provides continuing education for addiction professionals.
- **American Psychiatric Association** – Works to ensure humane care and effective treatment is given to anyone with mental health problems, including intellectual disabilities and substance use disorders.
- **National Association for Children of Alcoholics** – Provides information and educational materials for children and families of people with alcohol or drug problems, as well as treatment professionals.
- **Mental Health America** – Offers resources about the realities of mental health and mental illness.

As health reform continues to be implemented, use the following resources to learn about the impact of these changes on access to treatment and recovery support services:

- **HealthCare.gov** – Managed by HHS; this Federal website provides information for the general public, people with disabilities, seniors, young adults, and employers, on how the law affects access to health care, insurance options, available preventive services, and comparing care quality.

- **Kaiser Family Foundation** – Issued by a nonprofit, health policy and communications group, this document provides a summary on the comprehensive health reform law, the Affordable Care Act, signed into law on March 23, 2010. The document discusses the law and subsequent changes, provisions to expand coverage, control health care costs, and improve the health care delivery system. Visit the Kaiser Family Foundation's [Health Reform Source](#) for more information.
- **The Parity Implementation Coalition's Parity Toolkit** – Created by organizations, including **Recovery Month** Planning Partners, this toolkit aids individuals seeking help, individuals in recovery, as well as their families, providers, and advocates in understanding their rights and benefits under the MHPAEA law.

Inclusion of websites and resources in this document and on the [Recovery Month](#) website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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COMMONLY MISUSED SUBSTANCES

Every year, **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)** offers assistance and resources for those in need of treatment and recovery support services, as well as their friends, colleagues, and loved ones. In 2009, millions of individuals began their recovery from substance use and mental disorders, some through treatment: 4.3 million people aged 12 or older received treatment for a substance use disorder¹ and 30.2 million adults aged 18 or older received services for mental health problems.² Many people use alcohol and/or illicit drugs to self-medicate the symptoms of depression, anxiety, or other mental health problems, or to escape physical and emotional discomfort. These actions can worsen the symptoms that individuals initially tried to relieve, and can lead to substance use disorders.³ Furthermore, many people suffer from more than one mental health problem at a given time, with 45 percent meeting the criteria for two or more disorders.⁴ However, treatment does work and people can and do recover from substance use and mental disorders.

- **Recovery Month**, sponsored by the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT) within the U.S. Department of Health and Human Services (HHS), recognizes individuals and families in recovery and acknowledges those who provide treatment and recovery services for substance use and mental disorders. This year's theme, **"Join the Voices for Recovery: Recovery Benefits Everyone,"** emphasizes that all Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost.

Recovery Month stresses that all individuals have the fundamental and inherent right to be accepted and treated with respect, dignity, and worth. The campaign supports several of SAMHSA's Strategic Initiatives, particularly the goals of increasing public awareness of substance use and mental disorders, health reform implementation, and offering recovery support through an individual, program, and system approach. Public awareness will increase access for those in need of essential treatment and recovery support services and improve the overall health and well-being of people in the United States.

Commonly Misused Substances

Statistics from the **2009 National Survey on Drug Use and Health** show that education about the dangers of substance use and mental disorders, along with prevention, treatment, and recovery education, is critical to decrease the growing rates of substance use.

While illicit drug use in 2009 is lower than in 2002, the United States saw an overall increase of illicit drug use among people aged 12 or older to 8.7 percent in 2009 from 8 percent in 2008, an increase of 1.7 million individuals.⁵ Marijuana, prescription drugs, ecstasy, and methamphetamine had the largest increases. Additionally, the misuse of dextromethorphan, a drug found in over-the-counter cough medicines, has been a growing trend among adolescents. The drug is easily accessible and can be mixed with other liquids to create a high and is referred to as "robo-tripping." Despite new growing trends, among people aged 12 or older, current cigarette use decreased to 23.3 percent in 2009 from 26 percent in 2002, and the use of cocaine also declined to 1.6 million users in 2009 from 2.4 million users in 2006.⁶

Parents are the most important influence on their children's decision on drug and/or alcohol use and it's extremely important for parents to have open dialogue about the dangers involved with experimenting with drugs and/or alcohol.⁷ As children transition from their youth to adolescent years, they may misuse alcohol and prescription drugs as a response to stresses at school and possibly at home.⁸ In 2009:

- Almost 2 million youth aged 12 through 17 needed treatment for a substance use disorder.⁹
- Among youth aged 16 or 17, lifetime, past-year, and past-month alcohol use rates were 59.4 percent, 49.3 percent, and 26.3 percent, respectively; and past-month binge alcohol use rate was 17 percent.¹⁰
- Among youth aged 12 to 17, 1.3 million initiated marijuana and hashish use.¹¹
- 15.9 percent of youth aged 17 used marijuana in the past month.¹²

Additionally, teenagers aged 12 to 17 who believed that their parents would strongly disapprove of them trying marijuana or hashish once or twice were less likely to use the drug than those who didn't believe so—4.8 percent versus 31.3 percent, respectively.¹³ Reinforcing messages about the dangers of substance use is more important than ever before and caregivers, teachers, coaches, faith and community leaders must all find ways to communicate with our youth.

Mental Health Problems

In addition to substance use disorders, mental health problems are common illnesses that need to be addressed and treated with the same urgency as any other health condition. In fact, with approximately one in four adults suffering from a diagnosable mental health problem, mental health problems are so common that few families in the United States are untouched by them.¹⁴ In 2009, more than 8.9 million of those 18 or older who were dependent on or abused alcohol and/or drugs also had a mental illness—known as a co-occurring disorder.¹⁵ Many who suffer from a co-occurring disorder may use alcohol and/or illicit drugs to self-medicate the symptoms of depression, anxiety, or other mental health problems, but this can eventually worsen the symptoms they initially tried to relieve.¹⁶ Many mental health problems begin in adolescence and young adulthood, with 50 percent of lifetime mental health cases beginning by age 14 and 75 percent by age 24.¹⁷

Research has shown that there is typically a long delay, sometimes even years, between the onset of symptoms, the acknowledgement of the condition, and receiving help for a mental health problem. When treatment is delayed, conditions may become more severe and more resistant to treatment, making early detection and action essential.¹⁸ However, mental health problems can be effectively treated with a variety of treatment options. Approximately, 70 to 90 percent of individuals experience a significant reduction of symptoms and improved quality of life with a combination of medication, therapy, and other recovery support services.¹⁹ Empower an individual with a mental health problem to seek treatment and recovery services, by encouraging them to live a healthy, productive, and meaningful life.

Using data from the [National Institute on Drug Abuse](#), [The Partnership for a Drug-Free America](#), and the 2008 and 2009 **National Survey on Drug Use and Health**, the following chart provides an overview of the most commonly misused substances in the United States, including how prescription medications are abused. The chart can be used to raise awareness about the prevalence of these substances and the need for substance use and mental health disorder treatment and recovery support services.

Alcohol, Inhalants, and Tobacco

Substance	Other Names ^{20, 21}	Immediate Intoxication Effects ²²	Negative Health Effects ²³	Average Age of First Use in 2009 vs. in 2008 and Current Rate Among Youth ^{*24, 25, 26}	Number of People Who Used it in the Past Month in 2009 vs. in 2008 ^{27, 28}
Alcohol	Booze	Depressant: Impaired coordination, memory and judgment; slurred speech; decreased attention and memory	Seizures, chronic sleep problems, respiratory depression, respiratory arrest, damage to vital organs, high blood pressure, negative pregnancy outcomes (including Fetal Alcohol Syndrome)	16.9 years in 2009 (17 years in 2008); (rate of current alcohol use is 3.5% among youth aged 12 or 13, and 13% among youth aged 14 or 15)	130.6 million people in 2009 (similar to 129 million people in 2008)
Tobacco products	Chew, dip, smoke, cigarettes, cigars, smokeless tobacco, snuff, spit tobacco	Stimulant: Increased adrenaline, metabolism, and concentration	Increased blood pressure and heart rate, lung disease, coronary heart disease, stroke, cancer	17.5 years in 2009 (17.4 years in 2008); (rate of current tobacco use is 11.6% among youth aged 12 to 17)	69.7 million people in 2009 (similar to 70.9 million people in 2008)
Gases, nitrites, aerosols (Inhalants)	Ether, chloroform, nitrous oxide, isobutyl, isoamyl (poppers, snappers, whippets, laughing gas)	Stimulant: Loss of inhibition, loss of motor coordination, slurred speech, and muscle weakness	Rapid or irregular heartbeat, cardiovascular and nervous system damage	16.9 years in 2009 (15.9 years in 2008)*	0.6 million people in 2009 (similar to 0.64 million people in 2008)

*Data for each substance not available.

Illicit Drugs

Substance	Other Names ^{20, 21}	Immediate Intoxication Effects ²²	Negative Health Effects ²³	Average Age of First Use in 2009 (vs. in 2008) and Current Rate Among Youth ^{*24, 25, 26}	Number of People Who Used it in the Past Month in 2009 vs. in 2008 ^{27, 28}
Cocaine (including crack cocaine)	Coke, snow, flake, blow, bump, toot, C, white lady, crack, rock	Stimulant: Increased alertness, attention, and energy	Rapid or irregular heartbeat, stroke, muscle spasm, chest pain, nausea	20 years in 2009 (19.8 years in 2008); (rate of current cocaine use is 0.3% among youth aged 12 to 17)	1.6 million people in 2009 (similar to 1.9 million people in 2008)
Ecstasy	Adam, E, X, eve, XTC, decadence, M&M	Stimulant: Increased energy, feelings of peacefulness and acceptance	Involuntary teeth clenching, loss of inhibition, increased heart rate, anxiety, blurred vision	20.2 years in 2009 (20.3 years in 2008)*	760,000 people in 2009 (increased from 550,000 people in 2008)
Heroin	Big H, dope, smack, white horse	Feeling of euphoria, flushing of skin, dry mouth, and heaviness of the extremities	Collapsed veins, infection of the heart lining and valves, abscesses, liver disease, kidney disease, pulmonary complications	25.5 years in 2009 (23.4 years in 2008)*	0.2 million people in 2009 (same as in 2008)
Hallucinogens	LSD, peyote, acid, mellow yellow, boomers, shrooms	Delusions, changes in senses, mood, and body temperature	Elevated heart rate, increased blood pressure, persistent mental health problems	18.4 years in 2009 (18.4 years in 2008); (rate of current hallucinogen use is 0.9% among youth aged 12)	1.3 million people in 2009 (similar to 1.1 million people in 2008)
Marijuana	Pot, weed, hash, grass, reefer, Mary Jane, ganja	Distorted perceptions, impaired coordination, and loss of memory	Increased heart rate, respiratory infection, impaired memory, anxiety	17 years in 2009 (17.8 years in 2008); (rate of current marijuana use is 7.3% among youth aged 12 to 17)	16.7 million people in 2009 (increased from 15.2 million people in 2008)
Methamphetamine	Speed, meth, chalk, ice, crank	Stimulant: Agitation, anxiety, insomnia, and decreased appetite	Rapid or irregular heartbeat, stroke, high blood pressure, delusions, anxiety, hallucination	19.3 years in 2009 (19.2 years in 2008)*	502,000 people in 2009 (increased from 314,000 people in 2008)

*Data for each substance not available.

Prescription Drugs

Substance	Other Names ^{20, 21}	Immediate Intoxication Effects ²²	Negative Health Effects ²³	Average Age of First Use in 2009 vs. in 2008 and Current Rate Among Youth ^{*24, 25, 26}	Number of People Who Used it in the Past Month in 2009 vs. in 2008 ^{27,28}
Pain relievers (Opioids: Hydrocodone, oxycodone, morphine, codeine, fentanyl)	Vike (Vicodin [®]), Oxy, O.C. (Oxycontin [®]), M (roxanol), Schoolboy (empirin with codeine), China white, dance fever (Actiq [®])	Pain relief, feeling of euphoria, and drowsiness	Restlessness, muscle and bone pain, drowsiness, seizure, respiratory depression, decreased heart rate	20.8 years in 2009 (21.2 years in 2008); (rate of current nonmedical use of prescription pain relievers is 2.7% among youth aged 12 to 17)	5.3 million people in 2009 (increased from 4.7 million people in 2008)
Psychotherapeutics	Prozac [®] , Zoloft [®] , Ritalin [®]	Increased attention and alertness, and dizziness	Blurred vision, rapid heartbeat, skin rashes, persistent muscle spasms, tremors	21 years in 2009 (22 years in 2008); (rate of current nonmedical use of prescription type drugs is 3.1% among youth aged 12 to 17)	7 million people in 2009 (increased from 6.2 million people in 2008)
Sedatives	Haldol [®] , Thorazine [®] , Navane [®] , Prolixin [®] , Mellaril [®] , Trilafon [®]	Depressant: Reduced anxiety, induced sleep, and lowered inhibitions	Seizures, chronic sleep problems, respiratory depression, respiratory arrest	19.7 years in 2009 (15.9 years in 2008)*	370,000 people in 2009 (increased from 234,000 people in 2008)
Tranquilizers	Benzos (Mebaral [®] , Ativan [®] , Xanax [®] , Valium [®] , Nembutal [®] , Librium [®])	Depressant: Reduced anxiety, induced sleep, and lowered inhibitions	Seizures, chronic sleep problems, respiratory depression, respiratory arrest	22.4 years in 2009 (24.4 years in 2008)*	2 million people in 2009 (similar to 1.8 million people in 2008)
Stimulants (methylphenidate, amphetamines)	Adderall [®] , Ritalin [®] , Concerta [®]	Increased calming, "focusing" effect	Increased blood pressure, heart rate, and body temperature, decreased sleep and appetite, stroke	21.5 years in 2009 (21.3 years in 2008)*	1.3 million people in 2009 (increased from 904,000 people in 2008)

*Data for each substance not available.

What Can You Do?

If you think that someone you know is misusing substances or has a mental health problem, let them know that you are concerned, you are there to listen, and you want to help them recover.³⁰ Treatment and recovery support services are readily available and health reform will increase access to services. Inform your loved ones that recovery benefits everyone, and that individuals who seek treatment and recovery services for substance use and mental disorders, change their daily habits, and learn new life skills that lead to healthier lifestyles. Individuals with a substance use or mental disorder who seek treatment and recovery support services can live a healthy, productive, and meaningful life in recovery. More information about health reform and treatment and recovery can be found throughout the toolkit including the following documents:

- **“Substance Use and Mental Disorders Affect All Individuals”** – Educates about the different signs and symptoms of substance use and mental disorders, which can be different for all ages.
- **“Treatment and Recovery: Finding Personalized Help”** – Showcases different types of treatment options and holistic approaches to recovery.
- **“Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery”** – Includes information about how health reform changes can bring positive changes to individuals, families, and communities.

Additional Recovery Resources

A variety of resources provide additional information on **Recovery Month**, substance use and mental disorders, and prevention, treatment, and recovery support services. Use the toll-free numbers and websites below to increase your knowledge, seek guidance from professionals, and provide resources to patients. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **Substance Abuse and Mental Health Services Administration (SAMHSA) Website** – Leads efforts to reduce the impact of substance use and mental disorders on communities nationwide.
- **SAMHSA’s National Helpline, 1-800-662-HELP (4357), or 1-800-487-4889 (TDD)** – Provides 24-hour free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.
- **SAMHSA’s “Find Substance Abuse and Mental Health Treatment” Website** – Contains information about all treatment options and special services located in your area.
- **SAMHSA’s ADS Center** – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour hotline available to anyone in suicidal crisis or emotional distress.
- **Treatment 101: Recovery Today** – Part of SAMHSA’s Road to Recovery Television and Radio series that examines many aspects of treatment and recovery.
- **RecoverForever.com** – Offers live online support and contains an abundance of resources on alcohol and drug treatment services searchable by State.
- **Alcohol and Drug Rehab Treatment Resource Center** – Provides information on key issues about alcohol and drug abuse, including interventions, rehab, and treatment. Visitors must enter identifying information to participate in this website.
- **Mental Health America** – Offers resources about the realities of mental health and mental illness.
- **American Psychiatric Association** – Works to ensure humane care and effective treatment is given to anyone with mental health problems, including intellectual disabilities and substance use disorders.

As health reform continues to be implemented, use the following resources to learn about the impact of these changes on access to treatment and recovery support services:

- **HealthCare.gov** – Managed by HHS, this Federal website provides information for the general public, people with disabilities, seniors, young adults, and employers, on how the law affects access to health care, insurance options, available preventive services, and comparing care quality.
- **Kaiser Family Foundation** – Issued by a nonprofit, health policy and communications group, this document provides a summary on the comprehensive health reform law, the Affordable Care Act, signed into law on March 23, 2010. The document discusses the law and subsequent changes, provisions to expand coverage, control health care costs, and improve the health care delivery system. Visit the Kaiser Family Foundation’s [Health Reform Source](#) for more information.
- **The Parity Implementation Coalition’s Parity Toolkit** – Created by organizations, including **Recovery Month** Planning Partners, this toolkit aids individuals seeking help, individuals in recovery, as well as their families, providers, and advocates in understanding their rights and benefits under the MHPAEA law.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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TREATMENT AND RECOVERY: FINDING PERSONALIZED HELP

Treatment and recovery support services for substance use and mental disorders are most effective when tailored to the individual.¹ Recovery is a life-long process, and people in recovery can experience improved relationships, better mental and physical well-being, and newfound abilities to deal with problems in a healthy manner.² Treatment and recovery require hard work, dedication, willingness to change, and a customized treatment plan. In 2009, 4.3 million people aged 12 or older received treatment for substance use disorders³ and 30.2 million adults aged 18 or older received services for mental health problems,⁴ beginning their recovery.

In 2009, nearly 20.9 million people aged 12 or older needed treatment for substance use disorders but did not receive it at a specialty substance use facility in the past year.⁵ Additionally, an estimated 26.2 percent of adults aged 18 and older—approximately 1 in 4 adults—suffer from a diagnosable mental health problem in a given year.⁶ The need to help more people access treatment and recovery support for substance use and mental disorders is clear. Fortunately, there is hope.

National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month) celebrates people who are in recovery from substance use and mental disorders and the work of their treatment and recovery support service providers, as well as encourages people in need of help to seek services. The campaign, held each September, is sponsored by the [Substance Abuse and Mental Health Services Administration's \(SAMHSA's\) Center for Substance Abuse Treatment \(CSAT\)](#), within the [U.S. Department of Health and Human Services \(HHS\)](#). It aims to spread the message that behavioral health is an essential part of health and one's overall wellness, and that prevention works, treatment is effective, and people can and do recover from substance use and mental disorders. **Recovery Month** supports several of SAMHSA's [Strategic Initiatives](#), particularly the goals of increasing public awareness of substance use and mental disorders, health reform implementation, and offering recovery support through an individual, program, and system approach. The campaign stresses that all individuals have the fundamental right and inherent value to be accepted and treated with respect, dignity, and worth. It also offers help and resources for those in need of treatment and recovery services, as well as their families, friends, colleagues, and loved ones.

This year's theme, **"Join the Voices for Recovery: Recovery Benefits Everyone,"** highlights that:

- All Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost.
- Public awareness will increase access for those in need of essential substance use and mental health treatment and recovery support services, including behavioral health treatment.
- These legislative changes will improve the overall health and well-being of people in the United States.

The passage of the MHPAEA provides parity, or the recognition by insurance services—both public and private—that substance use and mental disorders are treated comparably to other physical health and medical conditions.⁷

This document will outline effective treatment and recovery options for substance use and mental disorders the need to address co-occurring disorders, holistic approaches to recovery, and the impact of health reform on access to treatment and recovery services.



LORIE HAMMERSTROM
 BOSTON, MA

Recovery has enabled me to change my life for the better, and living has truly become much more manageable and enjoyable than it used to be.

Back in my mid-30s, I began to struggle with stress, particularly balancing a career and family. I sought relief and was prescribed antidepressants, but as I attempted to escape the feelings of stress in my life, I began drinking a bit. As time went by, “a bit” turned into more frequent drinking, and soon I found myself drinking every night, unable to stop. I told my doctor that I was drinking and I didn’t feel well, but he just continued increasing and changing my anti-depressant medications. I began to feel anxious, and it all just seemed to get worse!

I looked further for help with my drinking and found SMART Recovery® 6 years ago. There I learned how to deal with life’s upsets in rational and helpful ways, without alcohol. I had turned to alcohol as a short-term quick fix to escape my upsets and frustrations, but in the long term it made things far worse. The tools I learned in treatment provided me ways to cope with challenges, be sober, and live life and take pleasure in it.

I’m no longer overwhelmed as I was for so long. Challenging situations still arise, but I see that life isn’t so much about what happens to me, but about how I choose to think about it. That makes all the difference—in my present life and in the choices I make for my future.

Effective Treatment and Recovery Options for Substance Use Disorders

Since the mid-1970s, research has proven the effectiveness of treatment and has shown how it helps people recover from substance use disorders and sustain abstinence from alcohol and/or drug use.⁸ In the United States, more than 11,000 specialized treatment facilities provide rehabilitation, behavioral therapy, counseling, medications, and other types of services.⁹ Other treatment and recovery programs exist outside the specialty sector—including emergency room services, private doctor’s offices, self-help groups, prisons, and hospitals—which provide support and guidance for those with substance use, as well as mental health problems.¹⁰ Recovery-oriented systems of care (ROSC) support the idea that each person must be the central participant in his or her own recovery and that a personal recognition of the need for change and transformation is necessary. ROSC also acknowledges that there are many pathways to recovery and that recovery services should offer choices, honor each person’s potential for growth, focus on a person’s strengths, and attend to an individual’s overall health and well-being.¹¹

A customized treatment and recovery support plan tailored to meet an individual’s unique needs is the most effective. As a person’s needs change throughout the recovery process, the treatment and recovery plan must be re-evaluated frequently and tailored as necessary.¹² Common treatment settings include:

- Residential or inpatient treatment programs;
- Outpatient treatment programs;
- Recovery support services, including peer supported services; and
- Online support.

Elements of each of these treatment settings are detailed below.

Residential or Inpatient Treatment Programs

These treatment programs are located in a hospital or residential setting, where people temporarily or permanently live to participate in rehabilitation and recovery.¹³ Residential or inpatient programs can last from a few days to several months and are usually best suited for severe cases and those needing medical supervision. They include the following:

- **Hospital-based rehabilitation units** – Located in a medical/hospital setting or a specialized chemical dependency facility, these programs usually include medical detoxification, a process in which individuals are systematically and safely withdrawn from addictive substances, usually under the care of a physician or trained personnel. This treatment option is best suited for people who need intensive monitoring or have developed chronic or acute medical or psychiatric problems along with their addiction.¹⁴
- **Inpatient residential programs and therapeutic communities** – Short- or long-term inpatient treatment programs house individuals at a treatment facility while they undergo intensive therapy. This type of treatment is often followed by extended participation in support groups (e.g., ongoing group therapy or individual counseling and 12-step programs). Therapeutic communities are long-term residential programs (usually 6 to 12 months) that focus on re-socializing the individual. They work best for those with severe problems or criminal involvement.¹⁵

Outpatient Treatment Programs

In these programs, individuals don't live at the treatment facility, but return for treatment services through scheduled visits. This provides flexibility to participants who might need to work or attend school. Outpatient treatment is offered in health clinics, counselors' offices, hospital clinics, local health department offices, community mental health centers, or at inpatient programs that also offer outpatient clinics.¹⁶ Outpatient treatment services include the following:

- **Individual counseling** – These private one-on-one sessions help people address issues of motivation and build skills to resist substance use through the utilization of coping strategies to maintain abstinence. Individual counseling uses behavioral therapy to modify attitudes and behaviors and improve relationships and life skills.¹⁷
- **Medication-assisted treatment (MAT)** – These clinically driven treatment programs use medications in combination with counseling and behavioral therapies to provide a whole-patient approach to the treatment of substance use disorders.¹⁸ MAT focuses on individualized patient care to treat alcohol and/or drug use. This method includes medication (e.g., buprenorphine, methadone, naltrexone, etc.) approved by the U.S. Food and Drug Administration (FDA) for opioid detoxification or maintenance treatment.¹⁹ MAT may be provided in an outpatient treatment program or medication unit (e.g., pharmacy, physician's office) or, for buprenorphine, a physician's office or other health care setting. Many MAT treatments combine professional and peer-based recovery support services with medication treatment. For example, **Recovery-Oriented Methadone Maintenance (ROMM)** assists patients and families in initiating and maintaining long-term recovery for opioid addiction.²⁰
- **Family counseling** – These counseling sessions are led by a professional and usually take place in a private practice or clinic to provide a neutral forum for families to work through problems. This approach educates family members about substance use disorders, helps them become aware of their loved one's need for support, and improves family communication.²¹
- **Group therapy** – This type of therapy has trained leaders that offer healing to foster recovery from substance use disorders. This approach reduces isolation, enables members to witness the recovery of others, provides positive peer support, helps members cope with their condition, offers useful information to those new to recovery, and instills hope.²²

Recovery Support Services

Recovery support services are nonclinical options that provide help through all stages of recovery. They focus on a continuum of care to achieve and maintain long-term abstinence from alcohol and/or drugs. Recovery support services can be found in a variety of settings, including recovery community organizations, which are nonprofit organizations that provide support services to individuals in recovery.²³ Services may include peer-to-peer services, support groups, job training and employment services, housing assistance, parent/family education, and life skills development.²⁴

- **Peer-to-peer support programs** – These programs are designed and provided by leaders in the recovery community who are often in recovery themselves. They build strong and mutually supportive relationships and can expand the capacity of formal treatment by initiating recovery, reducing relapse, and intervening early if or when relapse occurs.²⁵
- **Mutual support groups** – These groups are comprised of members with similar problems who want to voluntarily provide social, emotional, and informational support. It allows for an open environment to share experiences and solutions to problems and can help participants sustain recovery by building new friendships with people who don't use alcohol or drugs. These support groups include well-known programs such as **Alcoholics Anonymous**, **Narcotics Anonymous**, and other non-12-step programs such as **SMART Recovery**[®].²⁶
- **Faith-based support groups** – Many people rely upon their spirituality during difficult times, and faith-based recovery support programs provide additional support. Many churches, synagogues, mosques, or other places of worship offer faith-based support and provide it at a low-cost or free of charge.²⁷ Additionally, there are faith-based community recovery organizations that also support spiritual aspects of recovery.

Online Support

Online support provides individuals the opportunity to receive treatment sessions and attend meetings virtually. Online programs and meetings enable people to participate in treatment from any location, when their schedule permits, and are useful for people with limited transportation or childcare. Rural populations and areas with limited in-person treatment options also can benefit from online support. Online support includes the following resources:

- **E-therapy services** – These services offer participants electronic counsel through text-based communication methods (e.g., email, Internet chats, text messaging) or non-text-based communication methods (e.g., telephone, video conferencing). These services provide greater flexibility in terms of time and location for those needing treatment.²⁸
- **Recovery chat rooms** – Online venues, such as chat rooms, offer a free-form structure for people to share their stories with fellow members of the recovery community. Conversations can be tailored to focus on specific topics, such as co-occurring disorders or different stages of recovery, and allow people to anonymously connect with others.²⁹
- **Blogs and social networking sites** – One way to connect with others in treatment and recovery is through blogs and social networking sites such as Facebook and Twitter. Through these sites, people can read others' stories and share their own to connect and offer support. Refer to the "**Building Your Social Network**" document in this toolkit for more information on how to effectively connect through social media, and visit the **Recovery Month Facebook page**, **YouTube channel**, and **Twitter account**.

Effective Treatment and Recovery Options for Mental Health Problems

There is no universal approach to treating mental health problems.³⁰ There are more than 200 classified forms of mental health problems, and similar to cancer, diabetes, and heart disease, these conditions are often physical as well as emotional and psychological.³¹ Mental health problems can be effectively treated with a variety of treatment options. Approximately 70 to 90 percent of individuals experience a significant reduction of symptoms and improved quality of life with a combination of medication, therapy, and other support services.³² It's important to find a trained mental health professional that understands a person's condition and can help find the most effective treatment plan. Common treatment options include:

- Psychotherapy;
- Medication therapy; and
- Support groups, including peer specialists.

Psychotherapy

This method for treating mental health problems is also known as “talk therapy,” and involves talking face-to-face with a therapist or other medical professional to help a person understand his or her mental health problem.³³ There are many different types of psychotherapy, which include:

- **Cognitive Behavioral Therapy (CBT)** – Helps individuals identify distorted thinking patterns, recognize and change inaccurate beliefs, change behaviors, and relate to others in more positive ways. CBT can be used to treat depression, anxiety, bipolar, schizophrenia, and eating disorders.³⁴
- **Psychoanalysis** – Long-term therapy that seeks to identify unconscious motivations and early patterns to resolve issues and to become aware of how those motivations influence present actions and feelings.³⁵
- **Family-Focused Therapy (FFT)** – Designed to include the whole family as way to identify the difficulties and conflicts among family members that may contribute to or worsen an individual’s mental health problem. FFT is a main component in treating bipolar disorders.³⁶
- **Dialectical Behavior Therapy** – Originally developed to help individuals who have suicidal thoughts. The therapy stresses the value of a strong and equal relationship between the individual and therapist. The individual is reminded when his or her behavior is unhealthy or disruptive and the therapist teaches skills needed to better deal with similar situations in the future.³⁷
- **Interpersonal Therapy** – Works to improve communication patterns and helps people learn to express appropriate emotions in healthy ways and is commonly used to treat depression.³⁸

Medication Therapy

Many treatment options stress the importance of combining prescription medications with psychotherapy and support groups to help create a stable treatment plan and sustain recovery.³⁹ Medications are often used to treat the symptoms of mental health problems. They do not cure conditions, but can help people feel better and maintain normal daily routines. Medications work differently for everybody. People should ask their health care professional about the risks, possible side effects, and using the medication with certain foods, alcohol, and other medications.⁴⁰ In addition, it is extremely important that prescription medications are taken in the prescribed dosage, at prescribed intervals, and monitored daily.

Support Groups

A group-based approach is helpful for many people looking to find support and common ground. Mental health support groups differ, with some groups led by peers and others led by a mental health professional. A variety of organizations specialize in different mental health problems (e.g., Alzheimer’s, anxiety, bipolar disorder, autism, depression, eating disorders) and most offer groups for individuals, family members, and friends tailored to their specialization.⁴¹ Additionally, many people benefit from the practical, experientially-based guidance that a peer support group can offer, and others enjoy the opportunity to give help as well as receive help—an experience linked to benefits such as better psychosocial adjustment and increased longevity.⁴² Some organizations also offer online support through blogs and discussion boards as a way for people with similar mental health problems to connect, if unable to meet in person.⁴³ For more information on mental health support groups, or for a support group referral, refer to [Mental Health America](#) or the [National Mental Health Consumers’ Self-Help Clearinghouse](#).

How Health Reform Will Affect Access to Treatment and Recovery Services

The Affordable Care Act and the MHPAEA include many new provisions aimed at improving coverage for and access to substance use disorder and mental disorder prevention, treatment, and recovery support services. Many of these laws' provisions will be implemented over the next few years, with the large coverage expansion for the uninsured implemented in 2014. Research suggests that expanding people's access to treatment and recovery support services significantly increases the number of people who actually seek out treatment services.⁴⁴ SAMHSA's [Health Reform Strategic Initiative](#) supports and promotes the increase in affordable health care coverage, access to appropriate integrated and high-quality care, and works to reduce disparities that currently exist between the availability of behavioral health services and services for other medical conditions.

These are important developments, given that in 2009, approximately 22 percent of adults with substance use and/or mental disorders were uninsured.⁴⁵ Of these uninsured adults, one in three had incomes below the Federal Poverty Level.⁴⁶ Health insurance plans will differ depending on the provider and plan options, so it's important for all people to understand their plan to best use the benefits. With wider access to treatment, all individuals in need and their loved ones can gain the necessary skills to live a productive life. Refer to the "[Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery](#)" document in the "[Resources](#)" section of this toolkit for more information on health reform.

The Importance of Addressing Co-Occurring Disorders

An individual who suffers from both a substance use disorder and a mental health problem, such as anxiety or depression, has a co-occurring disorder.⁴⁷ Like substance use disorders alone, co-occurring disorders affect people's families, friends, and co-workers.⁴⁸ In 2009, more than 8.9 million adults aged 18 or older with mental health problems also had substance use disorders.⁴⁹ Through treatment and recovery services, people can and do recover from co-occurring disorders. People with co-occurring disorders may use alcohol and/or illicit drugs to self-medicate symptoms of depression, anxiety, or other mental health problems, but this can eventually worsen the symptoms they initially tried to relieve.⁵⁰

When researching different treatment options for people with co-occurring disorders, it's important to know whether the treatment facility has experience in treating both substance use and mental disorders. Below are some helpful tips to maintain your mental and physical health if you have a co-occurring disorder:⁵¹

- **Follow your physician's advice** – Don't stop treatment, including taking your medication, without first consulting your physician. If you do, it may make it difficult to sustain recovery even if you feel better and think you no longer need treatment or medication.
- **Adopt healthy habits** – Regular exercise releases dopamine, a powerful natural chemical that serves as an antidepressant in your body and improves physical health. Adopting healthy eating, exercise, and sleeping habits can result in more energy and can help you balance your mood.
- **Learn your triggers and identify positive coping mechanisms** – It's important to recognize the causes and signs of your substance use and mental disorders so you can develop a personal action plan if you recognize the onset of symptoms. You can better sustain recovery by understanding your triggers, such as stressful events, big life changes, or unstable eating or sleeping patterns.

The Holistic Approach to Recovery

Recovery from substance use and mental disorders does not stop after initial courses of treatment end. Effective treatment and recovery address a person's overall mental and physical well-being.⁵² Holistic recovery is a gradual process that aims to achieve a greater balance of mind, body, and spirit in relation to other aspects of one's life, including family, work, and community.⁵³ These should accompany a larger treatment plan and can be used to relieve stress and overcome difficult times or events in your life. Some holistic approaches you can try include:

- **Acupuncture** – This ancient East Asian practice involves inserting fine needles into specific points on the surface of your body to stimulate healing. Acupuncture is rapidly increasing in popularity and is used in many treatment facilities as an effective aid to help control substance use disorders.⁵⁴
- **Creative arts therapy** – Creative arts therapy uses art as a form of expression for feelings that cannot be easily identified or communicated. This type of therapy can help you connect with your authentic or emotional selves and learn to manage emotions and stress.
- **Meditation** – This relaxation technique can help you improve your mental concentration and stability, reduce anxiety and depression, and promote a deep sense of inner peace through intense meditative breathing, chanting, and movement techniques.⁵⁵
- **Yoga** – This exercise program uses physical postures and controlled breathing to increase your flexibility, calm your mind, improve concentration, and promote patience. Yoga can provide a greater sense of control when you experience agitation or other symptoms that tempt your body to misuse substances. Regular practice of yoga, along with other exercise programs, can help you sustain recovery.⁵⁶

Additional Recovery Resources

A variety of resources provide additional information on **Recovery Month**, substance use and mental disorders, and prevention, treatment, and recovery support services. Use the toll-free numbers and websites below to increase your knowledge, and seek guidance from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **Substance Abuse and Mental Health Services Administration (SAMHSA) Website** – Leads efforts to reduce the impact of substance use and mental disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357), or 1-800-487-4889 (TDD)** – Provides 24-hour free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website** – Contains information about all treatment options and special services located in your area.
- **SAMHSA's ADS Center** – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour hotline available to anyone in suicidal crisis or emotional distress.
- **Treatment 101: Recovery Today** – Part of SAMHSA's *Road to Recovery* Television and Radio series that examines many aspects of treatment and recovery.
- **Psychology Today's Therapy Directory** – Allows users to locate a therapist, psychologist, or counselor who specializes in mental health problems by city or zip code throughout the United States.
- **RecoverForever.com** – Offers live online support and contains an abundance of resources on alcohol and drug treatment services that are searchable by State.
- **Alcoholics Anonymous and Narcotics Anonymous** – Contains an array of resources for individuals suffering from alcohol or drug dependence, respectively, and allows them to find and join a local chapter.
- **AI-Anon/Alateen Family Groups** – Provides support groups for families and friends of people with alcohol problems.
- **Nar-Anon** – Offers a community for family members to share experiences related to substance use disorders.

- **American Academy of Addiction Psychiatry** – Promotes accessibility to quality treatment for all who need it, educates the public to influence public policy regarding addictive illness, and provides continuing education for addiction professionals.
- **American Psychiatric Association** – Works to ensure humane care and effective treatment is given to anyone with mental health problems, including intellectual disabilities and substance use disorders.
- **Mental Health America** – Offers resources about the realities of mental health and mental illness.

As health reform continues to be implemented, use the following resources to learn about the impact of these changes on how to access treatment and recovery support services:

- **HealthCare.gov** – Managed by HHS, this Federal website provides information for the general public, people with disabilities, seniors, young adults, and employers on how the law affects access to health care, insurance options, available preventive services, and comparing care quality.
- **Kaiser Family Foundation** – Issued by a nonprofit, health policy and communications group, this document provides a summary on the comprehensive health reform law, the Affordable Care Act, signed into law on March 23, 2010. The document discusses the law and subsequent changes, provisions to expand coverage, control health care costs, and improve the health care delivery system. Visit the Kaiser Family Foundation’s [Health Reform Source](#) for more information.
- **The Parity Implementation Coalition’s Parity Toolkit** – Created by organizations, including **Recovery Month** Planning Partners, this toolkit aids individuals seeking help, individuals in recovery, as well as their families, providers, and advocates in understanding their rights and benefits under the MHPAEA law.

Inclusion of websites and resources in this document and on the [Recovery Month website](#) does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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POLICYMAKER'S GUIDE FOR ADDRESSING SUBSTANCE USE AND MENTAL DISORDERS

Substance use disorders—which include misuse, dependence, or addiction to alcohol and/or legal or illegal drugs—and mental health problems—which include depression, anxiety disorder, mood disorder, post-traumatic stress disorder (PTSD), and others—are major public health concerns in the United States, but prevention and treatment services are available and effective. In 2010, Congress passed and President Obama signed the Affordable Care Act, expanding health care coverage to approximately 32 million Americans who were not previously insured. The Affordable Care Act gives Americans more freedom and control over their health care, as well as new benefits that ensure people will receive the care they need at a more reasonable cost.¹ This legislation, along with the Mental Health Parity and Addictions Equity Act (MHPAEA), includes many provisions that aim to improve coverage for and access to prevention, treatment, and recovery services for substance use and mental disorders.

Local, State, and Federal policymakers are the primary funders of treatment and recovery support services, and therefore are critical in conveying that recovery from substance use and mental disorders is possible and benefits the entire community socially and economically. Policymakers are instrumental in reducing barriers to treatment and recovery support services to build a healthier, safer, and more productive community, as well as reducing the prejudice and discrimination faced by individuals with these conditions in our country.

Every year, the [Substance Abuse and Mental Health Services Administration's \(SAMHSA's\) Center for Substance Abuse Treatment \(CSAT\)](#) within the [United States Department of Health and Human Services \(HHS\)](#) sponsors **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)**. The campaign, which takes place each September, raises awareness that behavioral health is an essential part of health and one's overall wellness, and that substance use and mental disorders are treatable and people can and do recover. **Recovery Month** stresses that all individuals have the fundamental and inherent value to be accepted and treated with respect, dignity, and worth. The observance celebrates people in recovery, and those who work in the treatment and recovery field. **Recovery Month** supports several of SAMHSA's [Strategic Initiatives](#), particularly the goals of increasing public awareness of substance use and mental disorders, health reform implementation, and offering recovery support through an individual, program, and system approach. This year's theme, **"Join the Voices for Recovery: Recovery Benefits Everyone,"** emphasizes that:

- All Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost.
- Public awareness will increase access for those in need of essential substance use and mental health treatment and recovery support services, including behavioral health treatment.
- These legislative changes will improve the overall health and well-being of people in the United States.

The passage of the MHPAEA provides parity, or the recognition by insurance services—both public and private—that substance use and mental disorders are treated comparably to other physical health and medical conditions.²

The societal cost of addiction is estimated at over \$121 billion annually³ and the annual indirect cost of mental illnesses is estimated to be at least \$79 billion.⁴ Fortunately, in 2009, 4.3 million people aged 12 or older received help for substance use disorders⁵ and 30.2 million adults aged 18 or older received services for mental health problems.⁶ By investing in and empowering people to seek treatment, recovery support services, and mental health services, this societal cost can be significantly reduced and even more people get the treatment and recovery supports they need.⁷

This document will help policymakers understand the rewards of access to treatment and recovery services as a result of health reform and parity. It also will highlight the prevalence of substance use and mental disorders; the return on investment that treatment and recovery services have on the overall health, productivity, and financial standing of a community; and will provide suggestions for addressing substance use and mental disorders in their jurisdictions.



JO ANNE STONE
WINTER PARK, FL

Growing up, I had everything going for me—I was an honor student, cheerleader, athlete, and student council member. But even though my father is dependent on alcohol and I swore I wouldn't follow in his footsteps, I started using alcohol and drugs at age 13. I believed I was different and I could control it.

I thought I was controlling it until age 32, when I finally hit bottom with no job, no car, and no home. I called my sister, who was already in recovery, and with her support went to a 6-month treatment program. Since achieving recovery, I have returned to school, received my bachelor's degree, and became a certified addictions professional. I opened my own treatment center in July 2010.

Today, I define myself as a wife, daughter, grandmother, and business owner, as well as a person in recovery for 17 years. Despite the hardships I've faced, I love my life and wouldn't trade anything I have been through. My experience has made me more determined to succeed and a better counselor to my clients, whose experiences I can understand firsthand.

In my professional life, I have conducted research on how to best treat criminal offenders with substance use disorders and how to avoid re-offenses. I have shared my story with Congress to promote the effectiveness of treatment, the possibility of recovery, and the need for adequate funding of services. I work daily to help others get better and live honest, productive lives. Last year, as part of **Recovery Month**, I was honored to be chosen as the Florida A&E Recovery Delegate and participated in a walk in Philadelphia and spoke at my hometown walk in Orlando.

Expanding Access to Treatment and Recovery Services

The Affordable Care Act, along with the MHPAEA, aims to improve coverage for and access to prevention and essential services for substance use and/or mental disorders. With the passage of the Affordable Care Act in 2010, health care coverage will expand to approximately 32 million Americans who were not previously insured.⁸

When the Affordable Care Act is fully implemented in 2014, State Health Insurance Exchanges will provide individual and small businesses with an insurance marketplace. This "one-stop-shop" will help consumers find and compare affordable, high-quality health insurance options. Exchanges will bring new transparency to the market so that consumers will be able to compare plans based on price and quality.⁹

SAMHSA's Health Reform **Strategic Initiative** supports and promotes the increased need for affordable health care coverage, access to appropriate high-quality and integrated care, and a reduction of disparities that currently exist between the availability of services for substance use and mental disorders, and other medical conditions. Information about prevention, treatment, and recovery services for substance use and mental disorders, as well as referral to these services, is available by calling **1-800-662-HELP (4357)** or 1-800-487-4889 (TDD), as well as visiting <http://www.samhsa.gov/treatment>. For further information on how the health reform law affects access to health care, visit the Federal website, <http://www.HealthCare.gov>. Additional resources are provided at the end of this document.

Prevalence of Substance Use and Mental Disorders in the United States

Substance use and mental disorders affect millions of people nationwide—including members of the United States Congress, mayors, and council members. In the United States in 2009, among adults aged 18 or older, 20.8 million people were classified with a substance use disorder,¹⁰ 45 million people were classified with a mental health problem,¹¹ and 8.9 million people had co-occurring substance use disorders and mental health problems.¹² Substance use and mental disorders don't discriminate and affect people of all ages, races, genders, workplaces, geographies, and socioeconomic levels.

Continued use of alcohol and/or drugs over a long period of time can lead to other chronic illnesses, impacting the overall health. For example, alcohol and/or drug misuse can be associated with organ damage¹³ as well as cirrhosis of the liver.¹⁴ Drug misuse is also associated with many of our Nation's most common and costly medical problems, including cancer, heart disease, and HIV/AIDS.¹⁵ Each year, approximately 40 million illnesses or injuries occur among Americans as the result of their substance use disorder.¹⁶

According to the National Institute of Mental Health, approximately one in four adults, or 26.2 percent of all Americans aged 18 and older, suffer from a diagnosable mental health problem in a given year.¹⁷ Fortunately, with a combination of medication, therapy, and other support services, between 70 and 90 percent of individuals with a mental health problem have significantly reduced their symptoms and improved the quality of their lives.¹⁸

Policymakers, along with family and social service workers, are instrumental in solving this immense problem and improving the lives of those in their communities. It is important they represent all individuals in their community and raise awareness of the benefits of supporting treatment and recovery services.

The Value of Investing in Treatment—How Recovery Benefits Everyone

Substance use disorders can be effectively treated, just like many other illnesses that affect one's physical and mental health.¹⁹ Investing in treatment is both necessary and valuable. According to several conservative estimates, every \$1 invested in substance use treatment programs yields a return of between \$4 and \$7 in reduced drug-related crime, criminal justice costs, and theft. When savings related to health care are included, total savings can exceed costs by a ratio of 12 to 1.²⁰ Similarly, treatment for mental health problems works. Research has shown that after 3 weeks of treatment at a mental health outpatient program, the work impairment of employees living with mental health problems was cut nearly in half, from 31 percent to 18 percent.²¹ Increasing access to substance use and mental health treatment and recovery support can successfully help:

- **Cut medical costs** – A study found that individuals with a substance use or mental disorder had average health care costs that were \$1,766 higher than costs for individuals without these conditions.²² However, with treatment, these medical costs can decrease significantly. For example, after individuals received treatment in an integrated primary care and substance use setting, total medical costs per patient per month were more than halved, from \$431 to \$200.²³
- **Improve productivity** – Lost productivity due to substance use and mental disorders significantly impacts businesses. Alcohol problems alone cost employers nearly \$134 billion in lost productivity, mostly due to absenteeism and poor work performance.²⁴ Mental health problems cost the United States approximately \$63 billion annually due to loss of productivity at the workplace and each year 217 million workdays are completely or partially lost due to mental health problems.²⁵ Through treatment and recovery support services, absenteeism, health care claims, and accidents will decrease, while productivity will increase.²⁶
- **Reduce child abuse and foster care rates** – Between 50 and 80 percent of all child abuse and neglect cases involve some degree of substance misuse by the child's parent.²⁷ Research shows that children whose families receive needed and appropriate alcohol and drug treatment are less likely to remain in foster care.²⁸ Parents with mental health problems can have a significant negative impact on their family's stability. For example, lower marriage and higher divorce rates than the general population are common among families that have one or two parents suffering from a mental health problem. However, treatment for mental health problems is effective and long-term intervention programs are available that address the needs of the whole family.²⁹

- **Decrease homelessness** – Approximately two-thirds of homeless people living in the United States have co-occurring substance use and mental disorders. Research has shown many homeless people do not seek treatment because of their unstable lifestyle. However, modified therapeutic communities, which often take place in shelters and address educational, vocational, legal, and housing needs, are cost efficient and an effective treatment option for the homeless.³⁰

Treatment is associated with major reductions in substance use, reductions in costs to society, and improved patient recovery.³¹ In 2009, 4.3 million people aged 12 or older received treatment for substance use disorders,³² and 30.2 million adults aged 18 or older received services for mental health problems,³³ beginning their quest to live a more productive and healthy life. Overall, individuals in recovery from a substance use and mental disorders will experience:

- Improved relationships;^{34, 35}
- More time and energy for the people and activities they care about;³⁶
- Better problem solving skills;³⁷ and
- The ability to live and work independently.³⁸

SAMHSA supports a recovery-oriented systems of care (ROSC), which stress the importance of a personal recognition of the need for change and transformation to sustain recovery. ROSC also acknowledges that there are many pathways to recovery and that while service types may vary, all recovery support services should offer choice, honor an individual's potential for growth, focus on a person's strengths, and attend to the individual's overall health and well-being.³⁹ Additionally, many individuals in treatment and recovery say they became more active, self-reliant, and involved in their communities because they have a clear purpose and improved well-being, including mental, physical, spiritual, and emotional health.⁴⁰

How to Help Your Community

As the primary allocators of funding for prevention and treatment services for substance use and mental disorders, policymakers have enormous potential and obligation to help their communities. State governments spend more than 13 percent of their budgets on problems related to alcohol and/or drug use. Less than 4 percent of this funding is spent on prevention and treatment, while more than 96 percent pays for the social, health, and criminal costs related to substance use disorders.⁴¹ According to the [National Association of State Mental Health Program Directors](#), 2010 spending for mental health services fell nearly 5 percent compared with 2009.⁴² While State budgets across the country are dealing with shortages, policymakers still have the opportunity to make treatment and recovery a priority.

Policymakers, and all elected officials, need to provide leadership and develop strategies to prevent and address substance use and mental disorders.⁴³ Policymakers should strive to create prevention-prepared communities where individuals, families, schools, college campuses, workplaces, and communities take action to promote emotional health and prevent and reduce substance use and mental disorders, and suicide across the lifespan. This will support one of SAMHSA's [Strategic Initiatives](#) focused on prevention of substance use and mental disorders.

As an elected official or policymaker you can help by taking the following steps:

- **Implement treatment interventions in the criminal justice system** ranging from pretrial diversion to sentencing alternatives to probation and parole programs that require participation in substance use or mental health treatment. For example, in 2010, approximately 2,500 drug courts served over 120,000 people.⁴⁴ Drug courts closely supervise individuals for at least one year, during which they receive intensive treatment support and obtain regular and random drug testing. Research shows these courts are effective in reducing societal costs and rates of substance use.⁴⁵ Nationwide, 75 percent of drug court graduates remain arrest-free at least two years after leaving the program.⁴⁶ Mental health courts also can be implemented to assist and encourage those with mental health problems to obtain treatment services.⁴⁷ To qualify, participants generally have an active criminal charge and a mental health diagnosis such as bipolar disorder, schizophrenia, or anxiety, and can include co-occurring disorders.⁴⁸

- **Inform your constituents on health reform** and its effect on access to prevention, treatment, and recovery support services. Once fully implemented, the legislation will expand coverage to approximately 32 million Americans who were not previously insured, thus it is vital the general public understands how to seek services they may need.⁴⁹ Refer to the “[Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment and Recovery](#)” document in this toolkit for additional information about health reform and how the provisions will affect access to substance use and mental health treatment, recovery, and other recovery support services in your community.
- **Issue a proclamation** to raise awareness of substance use and mental disorders in your community or State. The proclamation can highlight significant issues that affect your constituents, including how health reform and the MHPAEA affects treatment and recovery support services, and the financial costs of not investing in treatment and recovery support services. Refer to the “[Official Recovery Month Proclamations](#)” document in the “[Media Outreach](#)” section of this toolkit for a sample proclamation template that you can tailor.
- **Attend a Recovery Month event** to show your solidarity and support for the cause. This could be an event to showcase a proclamation or an opportunity to speak to constituents about how you are supporting the recovery community.
- **Plan a public policy forum** or roundtable to raise awareness of substance use and mental disorders and the negative impact they have on communities throughout the United States. Refer to the “[Press Materials for your Recovery Month Event](#)” document in this toolkit for a sample press release and media advisory for a roundtable event. Be sure to also review the “[Promoting Recovery Month with Events](#)” document for tips on planning a successful event this September.
- **Work collaboratively with other national, State, and local leaders** to educate your community on how prevention and treatment can be beneficial through implementing substance use or mental health advisory State boards. To be successful, these boards should be led by civic leaders, like yourself, who have the ability to gain public awareness and support—a SAMHSA [Strategic Initiative](#). Membership in these coalitions should include a network of local coalitions and recovery organizations that are aware of the landscape of substance use and mental disorders nationally and locally, and can provide valuable insight to the prevention, treatment, and recovery field. Refer to the “[Building Community Coalitions](#)” document in this toolkit for information on how to create successful partnership with other groups and individuals across the country that share your mission.

To support SAMHSA's [Strategic Initiatives](#), it is essential to speak out to the public so that all people—regardless of their age, race, gender, workplace, geography, or socioeconomic level—are aware of the prevention, treatment, and recovery services available to them and the benefits of accessing these services. Through your work, SAMHSA hopes that individuals will seek assistance for substance use and mental disorders with the same urgency as they would with any other health condition.

Additional Recovery Resources

A variety of resources provide additional information on [Recovery Month](#), substance use and mental disorders, and prevention, treatment, and recovery services. Use the toll-free numbers and websites below to increase your knowledge and seek guidance from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **Substance Abuse and Mental Health Services Administration (SAMHSA) Website** – Leads efforts to reduce the impact of substance use and mental disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357), or 1-800-487-4889 (TDD)** – Provides 24-hour free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.
- **SAMHSA's “Find Substance Abuse and Mental Health Treatment” Website** – Contains information about all treatment options and special services located in your area.
- **Single-State Agency Directory** – Included in the [Recovery Month](#) toolkit and lists State agencies that plan, implement, and evaluate substance use and mental disorder prevention, treatment, and recovery services.

- **SAMHSA's ADS Center** – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.
- **National Suicide Prevention Lifeline – 1-800-273-TALK (8255)** – Provides a free, 24-hour hotline available to anyone in suicidal crisis or emotional distress.
- **National Association of State Alcohol and Drug Abuse Directors (NASADAD)** – Contains research, public policy statements, and effective alcohol and/or drug prevention and treatment programs for those in need.
- **National Association of Drug Court Professionals (NADCP)** – Includes an abundance of information on drug courts and an interactive map to locate a specific adult, juvenile, tribal, family, veteran, Federal, or reentry drug court.
- **American Psychiatric Association (APA)** – Works to ensure humane care and effective treatment is given to anyone with mental health problems, including intellectual disability and substance use disorders.
- **National Association of State Mental Health Program Directors (NASMHPD)** – Represents the \$34 billion public mental health service delivery system serving 6.3 million people annually in all 50 States, 4 territories, and the District of Columbia.

As health reform continues to be implemented, use the following resources to learn about the impact of these changes on access to treatment and recovery support services for substance use and mental disorders:

- **HealthCare.gov** – Managed by HHS, this Federal website provides information for the general public, people with disabilities, seniors, young adults, and employers, on how the law affects access to health care, insurance options, available preventive services, and comparing care quality.
- **Kaiser Family Foundation** – Issued by a nonprofit, health policy and communications group, this document provides a summary on the comprehensive health reform law, the Affordable Care Act, signed into law on March 23, 2010. The document discusses the law and subsequent changes, provisions to expand coverage, control health care costs, and improve the health care delivery system. Visit the Kaiser Family Foundation's [Health Reform Source](#) for more information.
- **The Parity Implementation Coalition's Parity Toolkit** – Created by organizations, including **Recovery Month** Planning Partners, this toolkit aids individuals seeking help, individuals in recovery, as well as their families, providers, and advocates in understanding their rights and benefits under the MHPAEA law.

Inclusion of websites and resources in this document and on the [Recovery Month website](#) does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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SUBSTANCE USE AND MENTAL DISORDERS AFFECT ALL INDIVIDUALS

There is a great need to help people who suffer from substance use and mental disorders gain access to treatment and recovery support services. Fortunately, through health reform, this vision is about to become a reality for many. The implementation of the Affordable Care Act, along with the Mental Health Parity and Addictions Equity Act (MHPAEA), provides an opportunity to inform people about expanded access to treatment and recovery services. Individuals with a substance use or mental disorder who seek treatment and recovery support services can live healthy, productive, and meaningful lives in recovery.

To help raise awareness about the benefits of life-long recovery, **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)**, is sponsored every September by the Substance Abuse and Mental Health Services Administration's (SAMHSA's) Center for Substance Abuse Treatment (CSAT) within the U.S. Department of Health and Human Services (HHS), emphasizes that behavioral health is an essential component of health and one's overall wellness, and that prevention works, treatment is effective, and recovery is possible from substance use and mental disorders. **Recovery Month** shares that all individuals have the fundamental and inherent value to be accepted and treated with respect, dignity, and worth.

This year's theme, **"Join the Voices for Recovery: Recovery Benefits Everyone,"** emphasizes that:

- All Americans have the opportunity to access provisions within the Affordable Care Act and MHPAEA, aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost.
- Public awareness will increase access for those in need of essential substance use and mental health treatment and recovery support services, including behavioral health treatment.
- These legislative changes will improve the overall health and well-being of people in the United States.

The passage of the MHPAEA provides parity, or the recognition by insurance services—both public and private—that substance use and mental disorders are treated comparably to other physical health and medical conditions.¹

This document will discuss how to recognize symptoms of substance use and mental disorders in all ages, how families can reduce the risk of continuing the cycle, tips on helping friends or family members with a substance use and/or mental disorder, how to access treatment and recovery support services, and strategies to sustain recovery and empower others to seek recovery. In addition, this document will provide resources on **Recovery Month** on how health reform will affect treatment and recovery support services.

All Ages are Affected by Substance Use Disorders

Although substance use disorders are prevalent in our communities, treatment is effective, and people can and do recover. In 2009, 4.3 million people aged 12 or older in the United States received treatment for a substance use disorder.² In fact, recovery from a substance use disorder is so common that half of all adults over age 18 know someone in recovery.³ To help more people seek treatment services, people should learn about the signs and symptoms of substance use disorders, which may vary with age and other health conditions. Information about the prevalence, signs, and treatment techniques for mental health problems can be found later in this document.

ANNA SAPPAN
ANCHORAGE, AK

I am a person in long-term recovery from dependence to heroin. Treatment helped me learn how to deal with my feelings and emotions, and to live life without the use of drugs.

I've learned that substance use and other problems may have run in my family for generations, but this doesn't have to define my life. I didn't always know that; my drug use began at age 12, and by the time I was 13, I was using alcohol and other drugs daily. Now I have a much different story to share.

In 1995, I was given the opportunity to participate in outpatient treatment, where I was able to identify the issues that I had been self-medicating for most of my life. Through treatment and ongoing 12-step participation, I have been able to heal broken relationships. I have been happily married for nearly 13 years, and have regained custody and raised both of my children. I am blessed to participate in the lives of my children and grandchildren.

Because of treatment, I have gone from being a seasonal construction worker who depended on welfare and unemployment checks to being an executive director for a local nonprofit. I have earned a college degree in human services and nonprofit management and am currently in graduate school working on a degree in counseling psychology.

Adolescents

Almost 2 million people aged 12 through 17 needed treatment for a substance use disorder in 2009.⁴ By the end of 8th grade, approximately 47 percent of students have had at least one drink and more than 21 percent have been "drunk."⁵ In addition, everyday, approximately 4,700 teenagers under the age of 18 try marijuana for the first time.⁶ Adolescents using alcohol and/or drugs may try everything possible to hide it from parents and their extended family to avoid getting into trouble. Parents are sometimes afraid that they will push their children away by talking about alcohol and/or drug use, but research shows parental discussions prevent teen substance use.⁷ While teenagers normally have mood swings, severe or rapid changes in behaviors may be a sign of a developing substance use disorder. Other warning signs may include:⁸

- Associating with a new set of friends;
- Sudden decline in school performance or skipping classes;
- Poor physical health and altered sleeping patterns;
- Reduced interest in previous hobbies, such as sports;
- Alcoholic beverages or prescription drugs missing from the house; and
- Anxiety, hostility or depression.

In addition to treating the addiction in adolescents, other services are typically required to treat the underlying causes of substance use. Teens often use alcohol and/or drugs due to social pressures. Therefore, their treatment should address both the physical dependence and overall self-worth.⁹ One method is outpatient, multidimensional family therapy created for adolescents with alcohol and/or drug problems and directly involves their family members. This approach helps adolescents develop coping methods to promote better decision-making skills, addresses issues that may have caused them to use substances (e.g., trauma or peer pressure), and strives to improve overall family functioning.¹⁰

Young Adults

Whether it is entering college or beginning their first job after graduation, young adults often face the challenge of adapting to a new environment and lifestyle. For some, this transition is smooth, while others have a difficult time. National data indicates that two in five people in an undergraduate degree program engage in risky drinking¹¹ (e.g., more than one drink per day on average for women and more than two drinks per day on average for men).¹² In addition, this group has a high rate of prescription drug misuse—about 1 in 4 people aged 18 to 20 report non-medical use of prescription drugs.¹³ The negative consequences associated with alcohol and/or drug use include personal injury, physical illness, high-risk behavior, and even death.¹⁴ Signs of substance misuse among young adults may include:

- Increased tolerance for alcohol;¹⁵
- Legal trouble such as arrests for disorderly conduct or driving under the influence;¹⁶
- Falling behind in their studies;¹⁷
- Increased promiscuity;¹⁸ and
- Frequent need of prescription medication refill.¹⁹

Young adults need their family and friends for support during this challenging time. It is critical for young adults to learn how to create a balance between school or work and their outside lives. Many treatment approaches for young adults exist but e-therapy, an online approach to counseling, provides an accessible mode of treatment that specifically targets this age group given their increased experience with technology and social networking.²⁰ [In The Rooms](#), which offers online support meetings, and [Recovery Chat](#), a less-structured online venue that allows users to chat with others in every stage of recovery, are effective online treatment and recovery support services.

Middle-Aged Adults

In 2009, 6.3 percent of adults aged 26 or older were current illicit drug users and 36.3 percent of adults aged 26 to 34 admitted to binge drinking (had 5 or more drinks on the same occasion).²¹ Treatment can help deal with many problems that are frequently associated with the increased use of alcohol and/or drugs, such as family conflict, emotional or physical violence, trauma, work problems, illness, marital strain, or financial problems.²² If a friend or family member might be misusing alcohol and/or drugs, look for the following warning signs:²³

- Fearful, anxious, or paranoid demeanor, with no reason;
- Deterioration of physical appearance and personal grooming habits;
- Frequently getting into fights, accidents, or illegal activities;
- Sudden lack of motivation; and
- Unexplained need for money or financial problems.

Many businesses offer employee assistance programs (EAPs) that provide access to substance use disorder treatment while maintaining their careers. EAP resources include confidential counseling, treatment referrals, and employee education. Some programs also offer follow-up services that provide assistance to employees who return to work after receiving treatment.²⁴ Refer to the [“Addressing Substance Use and Mental Disorders in the Workplace”](#) document in this toolkit for more information on EAPs.

Older Adults

Substance use among older adults is a growing problem. In fact, the use of illicit drugs by people aged 50 to 59 more than doubled to 6.9 percent in 2009 from 2.7 percent in 2002.²⁵ Fortunately, older adults succeed in treatment more than any other age group.²⁶ The health care system must be prepared for a drastic increase in older adults seeking treatment as the sizeable Baby Boom generation—individuals born between 1946 and 1964—grows older.^{27, 28}

Substance use disorders can often be overlooked or misdiagnosed by a health care provider because symptoms for problems common to older adults, such as dementia and depression, mimic the signs of a substance use disorder.²⁹ Also, life changes or transitions can be stressful for older adults, causing them to turn to alcohol and/or drugs as an escape from the problem. It's important to notify a loved one's health care provider to make sure they screen or rescreen for substance use disorders during this taxing time.³⁰ Remember that many medications older adults take should not be mixed with alcohol and/or drugs and attention needs to be paid to erratic behaviors. Develop a relationship with their health care professionals, so they can assess any changes or health problems that might occur. Symptoms of a substance use disorder in older adults include:³¹

- Anxiousness or irritability;
- Increased memory loss;
- New problems making decisions;
- Suicidal thoughts;
- Being out of touch with family and friends; and
- Unusual responses to medication.

Many older adults find accepting treatment difficult, but research has shown that illustrating the benefits of recovery, such as the preservation of independence, physical and mental health benefits, and financial security, can motivate older adults to seek treatment.³² It also is important that older adults receive treatment in a way that they feel comfortable. For example, age-specific group treatment may work best for older adults, so they can connect with people their age and find social support.³³

All Ages are Affected by Mental Health Problems

Mental health problems affect approximately 1 in 4 adults, or about 57.7 million Americans, in a given year.³⁴ An individual's mental health refers to how the person thinks, feels, and acts, which includes cognitive and/or emotional well-being. The most common mental health problems are:³⁵

- Anxiety disorders, which include panic disorder, phobias, obsessive-compulsive disorder (OCD), post-traumatic stress disorder (PTSD), and trauma histories.
- Mood disorders, which include major and mild depression, bipolar disorder, and seasonal affective disorder (SAD).

Like substance use disorders, mental health problems are highly treatable, and recovery or management of the disease is possible. For example, between 70 to 90 percent of individuals have a significant reduction of symptoms and improved quality of life with a combination of medication, talk therapy, and other supports.³⁶ Mental health problems affect people of all ages, races, genders, workplaces, geographies, and socioeconomic levels. As with substance use disorders, people should learn about the signs and symptoms of mental health problems, which may vary with age and other health conditions.

Children and Adolescents

Children are in a state of rapid change and growth during their developmental years, therefore, diagnosis and treatment of mental health problems must be observed with these changes in mind.³⁷ A survey conducted by the [National Health and Nutritional Examination](#) found that 13 percent of children ages 8 to 15 had at least one mental health problem, a rate that is comparable to diabetes, asthma, and other diseases.³⁸

The most common mental health problems seen in children and teenagers are anxiety disorders, attention deficit and disruptive behavior disorders, autism and other pervasive developmental disorders, eating disorders (e.g., anorexia nervosa), mood disorders (e.g., major depression, bipolar disorder), and schizophrenia.³⁹ Similar to adults, mental health problems in children and adolescents are often diagnosed by their signs and symptoms. Signs for children include:⁴⁰

- Changes in school performance;
- Poor grades despite strong efforts;
- Excessive worry or anxiety (e.g., nervous to go to bed or school);
- Hyperactivity and/or persistent lack of behavioral control;
- Persistent nightmares;
- Persistent disobedience or aggression; and
- Frequent temper tantrums.

Signs and symptoms of mental health problems in adolescents include:⁴¹

- Substance use;
- Inability to cope with problems and daily activities;
- Changes in sleeping and/or eating habits;
- Excessive complaints of physical ailments;
- Defiance of authority, theft, and/or vandalism;
- Intense fear of weight gain;
- Prolonged negative mood, often accompanied by poor appetite or thoughts of death; and
- Frequent outbursts of anger.

Fortunately, research on mental health problems among children and adolescents is constantly evolving, and effective therapies are known for treating many of these conditions.⁴² If a child or teen might be suffering from a mental health problem, it's important to take action and have them screened by a medical professional or community mental health center. Mental health is crucial to the health and well-being of all children. Losing critical developmental years in a child's life can be avoided by identifying and treating a mental health problem early, losing critical developmental years in a child's life can be avoided.⁴³

Adults

In 2009, an estimated 11 million or 4.8 percent of adults aged 18 or older in the United States had a serious mental illness.⁴⁴ Additionally, 31.9 percent of the 6.1 million adults who reported an unmet need for mental health care, but didn't receive services, believed it could be handled without care.⁴⁵ In most cases, professional treatment and recovery support services, along with medication, is needed to treat a mental health problem effectively. Many people suffer from more than one mental health problem at a given time, with 45 percent meeting the criteria for two or more disorders.⁴⁶ It's important to know the signs and symptoms of mental health problems and seek help for those in need, which for adults include:⁴⁷

- Feelings of extreme highs and lows;
- Excessive fears, worries, anxieties, or anger;
- Social withdrawal;
- Dramatic changes in eating or sleeping habits;
- Delusions or hallucinations;

- Growing inability to cope with daily problems and activities;
- Suicidal thoughts;
- Denial of obvious problems;
- Numerous unexplained physical ailments;
- Substance misuse; and
- Excessive absenteeism in the workplace.

Screening for mental health problems is critical to properly diagnose and treat individuals. A wide range of options is available to treat mental health problems and by talking to health care professional, the right recovery plan for the individual can be defined.⁴⁸ Refer to the “[Treatment and Recovery: Finding Specialized Help](#)” document in this toolkit for more information on effective treatment and recovery options, holistic approaches to recovery, and the impact of health reform on access to these services.

Substance Use and Mental Disorders in Families

If someone in your family has a history of alcohol and/or drug dependence or mental health problems, it doesn't necessarily mean that you will develop any of these conditions. Research shows that less than half of all children of people with alcohol dependence develop the disease.⁴⁹ You can help reduce your or your family's risk by:

- Socializing without alcohol;⁵⁰
- Avoiding situations and people that encourage drinking and/or drug use;⁵¹
- Developing a strong relationship with your children if you're a parent;⁵²
- Keeping a well-balanced life;⁵³ and
- Effectively dealing with peer pressure.⁵⁴

You also can encourage people in your family to get help if they develop a substance use and/or mental disorder. It's never too late to take action regarding your child's, parent's, grandparent's—or any other family members'—alcohol and/or drug use or mental health. Talk with your loved ones and let them know that substance use and mental disorders are treatable and people do recover. Conditions can be managed with the support provided in recovery-oriented, person-centered care. Reinforce that you are concerned about them, you are there to listen, and you want to help them recover.⁵⁵

Certain strategies can be effective in preventing and reducing the severity of mental health problems. Research has shown that mental health problems have genetic links, and is often hereditary, so knowing your family mental health history and becoming familiar with any mental health problems that have affected your family is important.⁵⁶ Traumatic life events like divorce, abuse, or violence, are all factors that can lead to mental health problems.⁵⁷ It's imperative that you address these issues with a medical professional to help prevent the onset of a mental health problem. Additionally, keeping yourself mentally and physically balanced through exercise, healthy eating, and a normal sleeping pattern, can have a positive impact on your mental health.⁵⁸ [Through its Trauma and Justice Strategic Initiative](#), SAMHSA strives to reduce the pervasive, harmful, and costly health impact of violence and trauma by integrating trauma-informed approaches throughout health and behavioral health care systems and by diverting people with substance use and/or mental disorders from criminal and juvenile justice systems into treatment and recovery support services.

Remember that sources in your community—including school counselors, college support services, administrators, health care professionals, people in your faith community, and local community coalitions—can guide you toward treatment and recovery options for substance use and mental disorders. Free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in your area can be found by calling SAMHSA's National Helpline, **1-800-662-HELP (4357)** or 1-800-487-4889 (TDD), as well as by visiting <http://www.samhsa.gov/treatment>. In addition, call the National Suicide Prevention Lifeline at **1-800-273-TALK (8255)**, a free, 24-hour hotline available to anyone in suicidal crisis or emotional distress.

Access to Treatment and Recovery and Mental Health Support

With the passage of health reform, people may see fewer financial barriers to treatment, better integrated care, and more prevention and wellness programs. For instance, under the MHPAEA, when employers cover treatment for substance use disorders and mental disorders, these benefits must be covered equally to any other medical or surgical benefits. Co-payments and deductibles for a visit can't be larger and there can't be greater limits on behavioral health inpatient days than for medical and surgical inpatient days.⁵⁹ Included in the Affordable Care Act, effective immediately, employer health plans must cover certain prevention services with no co-payments⁶⁰ and allow, in most cases, young adult dependents to stay on their parent's insurance plan until they are 26 years old.⁶¹ Become familiar with your health care policy and ask your employer or health insurance provider what treatment services are covered. SAMHSA's [Health Reform Strategic Initiative](#) is working to educate State and local providers and consumers that many new provisions aim to improve coverage for and access to substance use and mental health prevention, treatment, and recovery support services.

To support SAMHSA's [Public Awareness and Support Strategic Initiative](#), encourage loved ones to seek assistance for a substance use and/or mental disorder with the same urgency as any other health condition. Treatment or recovery support services can be accessed in a variety of ways: through employee assistance programs (EAPs), online support groups, mutual support groups, peer-to-peer services, or hospital treatment services. SAMHSA also is working through its [Recovery Support Strategic Initiative](#) to showcase the four prongs of recovery (home, purpose, community, and health) and how important it is for individuals in recovery to reach out to others and encourage those in need to seek treatment and recovery services. For additional information, refer to the resources at the end of this document.

The Recovery Process

Substance use and mental disorders are treatable and the benefits of treatment and recovery are widespread, not only to the individual but to everyone around them. In 2009, more than 20.8 million adults aged 18 or older in the United States suffered from a substance use disorder—people of all ages, races, genders, workplaces, geographies, and socioeconomic levels.⁶² Additionally, 8.9 million adults suffered from both a substance use disorder and a mental health problem, also known as a co-occurring disorder.⁶³ Millions more are affected because they are a family member or loved one of someone who has a substance use and/or mental disorder. According to several studies, the societal cost of addiction is estimated at more than \$121 billion annually⁶⁴ and the indirect cost of mental illnesses is estimated to be at least \$79 billion annually.⁶⁵

The social and economic burden of untreated substance use and mental disorders affects our whole society. Given this prevalence, it's important to address this public health issue and help people who suffer from these problems seek recovery to manage their condition. With treatment, one's overall health improves, community crime decreases, and employment increases.⁶⁶ Fortunately, in 2009, 4.3 million people were treated for a substance use disorder⁶⁷ and 30.2 million were treated for a mental health problem,⁶⁸ starting their road to recovery.

In 2009, 8.5 percent of the 20.9 million people who needed, but did not receive treatment for a substance use disorder, felt that they may be perceived negatively for entering a treatment facility.⁶⁹ In reality, fewer than 20 percent of people in the United States would think less of a friend or relative who is in recovery.⁷⁰ Similarly, 8.7 percent of the 6.1 million adults who reported an unmet need for mental health care and did not receive services in the past year, felt that receiving care might cause their neighbors or community to have a negative opinion of them.⁷¹

While successfully completing treatment is a major accomplishment, achieving long-term recovery and continued abstinence from drugs and/or alcohol can be challenging and may require continued treatments over time.⁷² SAMHSA supports recovery-oriented systems of care (ROSC), which stress the importance of a personal recognition of the need to change and transformation to sustain recovery. ROSC also acknowledges that there are many pathways to recovery and that while service types may vary, all services should offer choice, honor an individual's potential for growth, focus on a person's strengths, and attend to the individual's overall health and well-being.⁷³

Recovery exists on a continuum of improved health and well-being, and involves a personal recognition of the need for change and transformation.⁷⁴ In treatment for substance use or mental disorders, individuals will learn how to identify their relapse triggers, manage their cravings, and develop plans for handling stressful situations and setbacks.⁷⁵ If you are in recovery, the following tips and strategies can help you sustain it:

- **Avoid tempting situations.** Avoid associating with people who use alcohol and/or drugs. Avoid places or activities that remind you of the times when you misused substances or that cause sadness or anxiety.⁷⁶
- **Express your feelings.** Don't bottle your feelings inside. Confide in others to "escape," or to relieve stress. Express your feelings to connect with others and develop stronger relationships.^{77, 78}
- **Find constructive ways to spend your free time.** Become involved in hobbies and extracurricular activities so that you remain occupied and have feelings of accomplishment. Through treatment and recovery involvement in productive activities, your health, well-being, and quality of life improves.^{79, 80}
- **If you accidentally slip up, continue moving forward.** Contact one of your support peers. This does not mean that you failed. Learn from your choices to help you in the future.⁸¹
- **If you are receiving medication assisted therapy for your substance use disorder or mental health problem, routine check-ups are essential.** Visit your doctor if you're not feeling well—it may be due to your medicine or a symptom of your condition that can be treated.^{82, 83}

Contribute to *Recovery Month's* Mission to Help Others

Individuals who are already on the path of recovery can help others achieve recovery to live a healthy, productive, and meaningful life. Your words of encouragement can profoundly impact children, middle-aged adults, and older adults alike. You can:

- **Become a peer leader.** Peer-to-peer support programs are designed and provided by leaders in the recovery community who are often in recovery themselves. Peer leaders build strong and mutually supportive relationships and can expand the capacity of formal treatment systems by initiating recovery, reducing relapse, and intervening early when relapse does occur.⁸⁴
- **Make a public statement.** Express your support for **Recovery Month**, treatment, and individuals in recovery and the importance of raising awareness of substance use and mental disorders. This can be accomplished in many ways, ranging from giving speeches at schools or retirement homes to submitting an op-ed to your local paper. Refer to the "[Press Materials for Your Recovery Month Event](#)" document in this toolkit for a sample template and ideas to make your op-ed relevant and compelling.
- **Take part in a local event.** Volunteer at a **Recovery Month** event in your community during September. You may wish to offer yourself as a spokesperson, or connect the event organizers with treatment providers in the local community who may be able to lend additional support. To find local events in your community, visit the [Recovery Month Community Events](#) page.
- **Spread the recovery message online.** Promote and support through **Recovery Month** networking sites, including [Facebook](#), [Twitter](#), and [YouTube](#). In addition, connect with others through blogs and online forums to let them know that prevention works, treatment is effective, and that people can and do recover.

Additional Recovery Resources

A variety of resources provide additional information on **Recovery Month**, substance use and mental disorders, and prevention, treatment, and recovery support services. Use the toll-free numbers and websites below to share your experiences, learn from others, and seek help from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **Substance Abuse and Mental Health Services Administration (SAMHSA) Website** – Leads efforts to reduce the impact of substance use and mental disorders on communities nationwide.
- **SAMHSA’s National Helpline, 1-800-662-HELP (4357), or 1-800-487-4889 (TDD)** – Provides 24-hour free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.
- **SAMHSA’s “Find Substance Abuse and Mental Health Treatment” Website** – Contains information about treatment options and special services located in your area.
- **SAMHSA’s ADS Center** – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour hotline available to anyone in suicidal crisis or emotional distress.
- **RecoverForever.com** – Offers live online support and contains an abundance of resources on alcohol and drug treatment services searchable by State.
- **Alcoholics Anonymous and Narcotics Anonymous** – Support organizations that offer a variety of addiction and recovery resources for individuals suffering from alcohol or drug dependence, respectively, and allow them to find a local chapter.
- **Al-Anon/Alateen Family Groups** – Provides support groups for families and friends of people with alcohol problems.
- **Nar-Anon** – Offers a community for family members to share experiences related to substance use disorders.
- **National Association for Children of Alcoholics** – Provides information and educational materials for children and families of people with alcohol or drug problems, as well as treatment professionals.
- **Alliance for Children and Families** – Offers services to the nonprofit child and family sectors and economic empowerment organizations.
- **Mental Health America** – Offers resources about the realities of mental health and mental illness.
- **Narconon** – Provides prevention, education, and rehabilitation programs for drug misuse and drug dependence.
- **SMART Recovery®** – Offers free, self-empowering, science-based mutual help groups for all types of addictive behaviors.

As health reform continues to be implemented, use the following resources to learn about the impact of these changes and how to access treatment and recovery support services:

- **HealthCare.gov** – Managed by HHS, this Federal website provides information for the general public, people with disabilities, seniors, young adults, and employers, on how the law affects access to health care, insurance options, available preventive services, and comparing care quality.
- **Kaiser Family Foundation** – Issued by a nonprofit, health policy and communications group, this document provides a summary on the comprehensive health reform law, the Affordable Care Act, signed into law on March 23, 2010. The document discusses the law and subsequent changes, provisions to expand coverage, control health care costs, and improve the health care delivery system. Visit the Kaiser Family Foundation’s [Health Reform Source](#) for more information.

- **The Parity Implementation Coalition's Parity Toolkit** – Created by organizations, including **Recovery Month** Planning Partners, this toolkit aids individuals seeking help, individuals in recovery, as well as their families, providers, and advocates in understanding their rights and benefits under the MHPAEA law.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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HEALTH CARE PROVIDERS' ROLE IN ADDRESSING SUBSTANCE USE AND MENTAL DISORDERS

Over the past decade, vast improvements have been made in the way society and health care providers view substance use and mental disorders. These are chronic, yet treatable conditions and people do recover from even the most serious conditions.¹ Because they are treatable, individuals across the United States should seek assistance for substance use and mental disorders with the same urgency as other health conditions. A variety of medical and non-medical options exist.²

The overall health of our Nation relies upon the health care providers who have the most frequent contact with patients and provide the majority of care. All health care providers—including doctors, nurses, physician assistants, pharmacists, peer support specialists, therapists, and counselors—must increase their knowledge of substance use and mental disorders to screen, provide intervention, and referrals to treatment and recovery services for these prevalent public health conditions.

Each September, **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)** celebrates people in recovery and recognizes the dedication of treatment providers. Sponsored by the [Substance Abuse and Mental Health Services Administration's \(SAMHSA's\) Center for Substance Abuse Treatment \(CSAT\)](#), with the [U.S. Department of Health and Human Services \(HHS\)](#), the initiative educates the public that behavioral health is essential to health and one's overall wellness, and that prevention works, treatment is effective, and people can and do recover from substance use and mental disorders. **Recovery Month** stresses that all individuals have the fundamental and inherent value to be accepted and treated with respect, dignity, and worth.

This year's theme, **"Join the Voices for Recovery: Recovery Benefits Everyone,"** emphasizes that:

- All Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost.
- Public awareness will increase access for those in need of essential substance use and mental health treatment and recovery support services, including behavioral health treatment.
- These legislative changes will improve the overall health and well-being of people in the United States.

The passage of the MHPAEA provides parity, or the recognition by insurance services—both public and private—that substance use and mental disorders are treated comparably to other physical health and medical conditions.³

Health care providers—including those who work at primary care centers or practices, community health centers (including Federally Qualified Health Centers), trauma centers, and emergency rooms—may have the first contact with a person with an undiagnosed health concern such as a substance use and/or mental disorders. It's essential that all patients are assessed, diagnosed, and referred to appropriate follow-up treatment services to continue care for the condition. To accomplish this, health care professionals can:

- Be aware of the latest trends in the field;
- Understand how health reform affects service delivery system; and
- Inform individuals in need of treatment services that appropriate care and recovery will positively affect their overall well-being as well as other medical conditions.

This document will outline tips to help patients get treatment for their substance use and mental disorders, how health reform affects providers, how to effectively assess and refer patients to treatment and recovery support services, and how all health care providers can make a difference during **Recovery Month** and throughout the year.



TRACEY LEE
 FAIRFIELD, CA

I was once a straight-A student with a bright future, but substance use replaced my dreams with nightmares. I remember these years vividly and willingly tell my story in hopes that my pain and triumph will help others in need to find recovery and reclaim their lives.

What started out as recreational drug use in college turned into full-blown addiction by the time I reached 30. Domestic violence, depression, homelessness, bankruptcy, and suicide attempts became my life. My son's world became as unpredictable as I was, but somehow I didn't relate our chaos to my drug use.

Fortunately, my depression led me to the hospital, and instead of just giving me medicine, an astute nurse recognized my problem and sent me straight to a 14-day treatment program. That was 14 years ago. I cannot begin to express my joy at the changes in my life.

My son is now 21 and will soon graduate from Stanford University. He has flourished in my recovery, and I have been there for him in every way. I have renewed my relationships with my parents and siblings. For years, I helped "Put a Face on Recovery" and spoke at churches, high schools, city and county councils, and the State Capitol about the importance of treatment and recovery.

Today, I have my master's in public administration and I serve on the board of a recovery community support organization. I am currently a supervisor working in social services and just purchased my first home. Embracing all of my activities, work, and play is a profound sense of spirit and unwavering faith.

Helping Patients Overcome Substance Use and Mental Disorders

Health care providers can and do make a difference in the lives of their patients. Not only do they educate their patients about the realities of diseases such as substance use and mental disorders, but they also assist their patients in accessing effective and individualized treatment. For both substance use and mental disorders, diagnosis begins with the provider asking questions about the patient's symptoms, general health, and medical history, since there is no laboratory test to specifically identify these problems.⁴

To provide the most appropriate and highest quality of care, providers can:

- **Become more comfortable discussing substance use and mental disorders** – Often, health care providers don't discuss alcohol and/or drug misuse with their patients due to their own misconceptions or because they feel unprepared to diagnose a substance use disorder.⁵ In fact, research has shown that less than one-third of primary care providers routinely screen their adolescent patients for mental health problems.⁶ Consider both alcohol or drug misuse and mental health problems when assessing a patient's illness, and during routine check-ups. Mental Health America offers an online [depression screener](#) and an [anxiety screener](#) that providers can use to help diagnose common mental health problems. By helping people into recovery, patients will experience improved relationships, better mental and physical well-being, and newfound abilities to deal with problems in a healthy manner.⁷
- **Have positive attitudes about recovery** – Giving positive guidance to people with substance use and mental disorders can significantly impact their confidence and future aspirations.⁸ Speaking optimistically about the commonality of recovery (e.g., millions of Americans are in recovery)⁹ can give patients hope. Having a positive outlook about their condition, and remaining empathetic, respectful, and nonjudgmental is more likely to make patients feel empowered to seek help and strive to improve their well-being.¹⁰ It's essential that providers support all patients in need of treatment services and those already in recovery.

- **Team up and work with other health care providers** – Emergency room doctors, nurses, pharmacists, employee assistance program (EAP) counselors, and family practitioners can all provide high-quality care to address substance use and mental disorders, and increase the potential for recovery. Each has a role to play within the larger context of an individual's care. For example, to help avoid prescription drug misuse, pharmacists can have quick, face-to-face discussions about the safe and legal use of prescription drugs.¹¹ Meanwhile, EAP providers can offer employees tips on how to keep their medications from ending up in the wrong hands. Simultaneously, the pharmacist and EAP provider are working to prevent prescription drug misuse.

For a mental health problem, health care providers who prescribe medications also should refer their patient to a therapist or counselor and establish a comprehensive assessment and plan. The prescribing provider should educate their patient about the possible side effects and potential risks of using medication with certain foods, alcohol, and other medications. In addition, therapists and counselors should reinforce this information during therapy sessions to ensure medications are taken in the prescribed dosage, and at the prescribed intervals.

- **Seek adequate training** – Many health care providers may not specialize in assessing substance use and mental disorders or be trained on where to refer patients for treatment and recovery support services.¹² By educating themselves on appropriate screening and assessment tools, and available referral options, providers can effectively screen patients and increase access to treatment and recovery services. Resources are provided throughout this toolkit for providers to reference. Additionally, they can contact or join a professional association, such as the [American Mental Health Counselors Association \(AMHCA\)](#), [American Society of Addiction Medicine \(ASAM\)](#), or the [NAADAC, the Association for Addiction Professionals](#), which provides training health care professionals and educating the public about substance use and mental disorders. Additional professional organizations can be found in the “[Prevention, Treatment, and Recovery Resources](#)” document in this toolkit.
- **Overcome patient resistance** – Approximately 85 percent of patients admit to lying to their physicians about substance use,¹³ making it difficult for health care providers to determine the true extent of a problem.¹⁴ Continue trying to connect with patients on a personal level, and with time and support, individuals may be ready to trust their providers and seek help. Rather than asking direct questions, providers may need to ask more open-ended questions pertaining to their patients' social history. For example, by asking “What brought you here?” or “What's going on in your life?” the patient may eventually reveal problems such as marital difficulties or financial trouble, which may contribute to increased alcohol or drug use or highlight the onset of a mental health problem.¹⁵
- **Spread the message that treatment is effective and recovery is possible** – One of SAMHSA's [Strategic Initiatives](#) focuses on increasing public awareness of substance use and mental disorders. Research shows that, as with other health conditions, individuals with substance use and mental disorders can achieve long-term recovery through a variety of settings and methods.¹⁶ Some people recover from substance use disorders through treatment and/or the assistance of self-help or mutual aid groups, while others may recover on their own.¹⁷ Additionally, between 70 and 90 percent of individuals with a mental health problem have significant reduction of symptoms and improved quality of life with a combination of treatment, therapy, and other support.¹⁸ Providers can communicate that, as with other chronic illnesses, disease management is essential to recovery.¹⁹ It's important to underscore that individuals who seek treatment and recovery services must also change their daily habits and learn new life skills that will ultimately empower them to want to experience a healthier lifestyle.²⁰
- **Spend ample time with each patient** – Primary care physician visits last on average 10 minutes;²¹ one-third of physicians say time constraints keep them from discussing substance use disorders with their patients.²² Despite providers' extremely busy schedules, it's important to spend more time getting to know patients and assessing their situation to properly diagnose any substance use or mental disorders. Over the next five years, the United States Federal Government will invest nearly \$20 billion in health information technology (HIT), which will eventually make treatment services for all illnesses—including substance use and mental disorders—more accessible and efficient.²³ SAMHSA supports HIT through its [Health Information Technology Strategic Initiative](#). Through health reform and the implementation of HIT, paperwork will be standardized, ultimately saving doctors' time and increasing patient interaction.²⁴

- **Learn more about insurance reimbursements** – Eleven percent of physicians are concerned that they won't be reimbursed for the time required to screen and treat a patient with a substance use disorder, and admit that this keeps them from beginning the discussion.²⁵ This is a similarly reported problem with respect to mental health problems.²⁶ However, screening and referral services for substance use and mental disorders are reimbursed by Medicare, Medicaid, and many private insurance options. Further information on new insurance regulations can be found in the “[What Health Reform Means for Health Care Providers](#)” section in this document.

By taking the time to educate patients who suffer from substance use and mental disorders on how to change their daily habits, health care providers have the opportunity to empower their patients to live healthy, productive lives, free of alcohol and/or drugs.

Effectively Assessing, Intervening, and Referring Patients with Substance Use Disorders to Treatment Services

Because prevention works and treatment is effective, all health care providers and facilities—including primary care centers, specialists, hospital emergency rooms, trauma centers, and other community care settings—must commit to prevention and early intervention. When providers are trained to and conduct screening, assessing, and referring activities for individuals at risk of or with a substance use disorder, more people are likely to start their recovery journey.

Screening

Any individual at risk of developing a substance use disorder, such as those with a poor home environment, unhealthy relationships, history of trauma, economic deprivation, chronic pain, and genetic predisposition, can be diagnosed through primary care screenings.²⁷ These screening and brief interventions are also increasingly performed in emergency rooms and trauma centers, therefore more people receive the help they need.²⁸ Brief screenings quickly assess the severity of one's substance use disorder and identify the appropriate level of treatment necessary.²⁹ Screening and brief interventions have a number of benefits for the individual:³⁰

- The frequency and severity of alcohol and/or drug use decreases;
- Emergency department visits decrease;
- The risk of trauma is reduced;
- The percentage of patients who enter specialized treatment for substance use disorders increases; and
- Net costs to society decrease.

Screening for substance use disorders in a health care environment involves at least two components: observing biomarkers and obtaining patient reports. Biomarkers are objective evidence that a person may misuse alcohol and/or drugs. For example, the presence of liver disease may indicate to health care professionals that the patient is potentially misusing substances, such as alcohol. The second component—patient report—is a questionnaire intended to show general patterns of one's substance use and ideally will identify “red flags” for the provider.³¹ Patients' responses to the following questions might raise provider concern:³²

- I would be annoyed if my doctor asked me how much alcohol I drink.
- If my drinking affects my health, my doctor should advise me to cut down on alcohol.
- If my doctor asked me how much alcohol I drink, I would give an honest answer.

Health care providers can use a variety of simple instruments to screen patients for substance use disorders. While the use of instruments may vary depending on State or local regulations and reimbursement policies, all have the same goal of determining the severity of one's alcohol and/or drug use and all are effective.³³ Three commonly used instruments, which are simple and easy to administer, are:

- Alcohol Use Disorders Identification Test (AUDIT)
- Alcohol, Smoking, and Substance Involvement Screening Test (ASSIST)
- Drug Abuse Screening Test (DAST)

Health care providers should keep in mind while screening and relay to their patients that the Dietary Guidelines for Americans, which was released in 2010 by the HHS and the Department of Agriculture (USDA), states there is scientific evidence indicating that if adults choose to drink, they should do so in moderation, which is considered up to one drink per day for a woman and up to two drinks per day for men. The guidelines also state that no one should drink alcohol more frequently for potential health benefits.³⁴

Brief Intervention

Brief interventions consisting of either a single or multiple sessions, generally aim to motivate a patient to change his or her behavior.³⁵ Immediate goals stemming from brief intervention may be for the patient to enter treatment, quit using alcohol and/or drugs, or decrease the frequency of use.³⁶

These interventions for substance use disorders are used by a variety of people—including counselors, social workers, psychologists, physicians, and nurses, in a variety of settings—such as social service agencies, hospital emergency departments, court-ordered educational groups, and vocational rehabilitation programs.³⁷ Typically, someone who the patient already trusts and feels comfortable being treated by delivers the brief intervention.³⁸

It is critical that the provider practices the following elements, FRAMES, for an effective intervention:³⁹

- **F**eedback is given to the patient about personal risk.
- **R**esponsibility for change is placed on the patient.
- **A**dvice to change is shared by the provider.
- **M**enu of alternative self-help or treatment options is offered to the patient.
- **E**mpathic style is used by the provider.
- **S**elf-efficacy and positive empowerment is produced in the patient.

Providers can share informational resources with the patients during the intervention, such as pamphlets or workbooks that reinforce the self-help or treatment options discussed during the initial meeting. To provide additional assessment and further motivate the patient to achieve their initial goals, providers may wish to follow up at a later date.⁴⁰

Referral

An equally important component of screening and brief interventions is referral to treatment and care. Health care providers should take into account an individual's personal needs as well as the severity of the person's substance use disorder when referring patients to treatment programs. For example, the best treatment option for a patient with chronic medical problems along with their substance use disorder may be at a hospital-based rehabilitation unit designed to provide services for those with more than one health condition.⁴¹

Providers who specialize in prevention and treatment also have the opportunity to expand resources in their communities and develop local referral networks that all health care providers can use. For example, a team of substance use disorder specialists can train local primary care providers on appropriate methods of screening patients for possible alcohol misuse. The specialists could then help facilitate partnerships between physicians and community treatment centers to help physicians refer those in need of treatment.⁴²

SAMHSA supports recovery-oriented systems of care (ROSC), which stresses the importance of a personal recognition of the need for change and transformation to sustain recovery. ROSC also acknowledges that there are many pathways to recovery and that while recovery service types may vary, all services should offer choice, honor an individual's potential for growth, focus on a person's strengths, and attend to the individual's overall health and well-being.⁴³ For more information on substance use disorder treatment services, visit the "[Treatment and Recovery: Finding Specialized Help](#)" document in this toolkit. Additionally, use the tools and resources at the end of this document, such as **SAMHSA's National Helpline at 1-800-662-HELP (4357)** or SAMHSA's [Treatment Locator](#), to research patients' options.⁴⁴

Effectively Assessing and Referring Patients with Mental Health Problems to Treatment Services

As with substance use disorders, health care providers have a responsibility to know and recognize the signs and symptoms of mental health problems and how to refer people to specialty treatment if necessary. Just like substance use disorders, mental health problems don't discriminate and affect people of all ages, races, genders, workplaces, geographies, and socioeconomic levels. In fact, approximately one in four adults in the United States suffers from a diagnosable mental health problem.⁴⁵

Despite the commonality of mental health problems, some conditions—such as depression—often aren't diagnosed, with an estimated 75 percent of those who suffer from depression not receiving a diagnosis.⁴⁶ Additionally, less than one-third of those who suffer from a mental health problem actually receive any level of mental health treatment.⁴⁷ It's important that health care providers are trained to recognize, assess, and refer individuals in need to effective treatment and recovery support services. A patient's mental health should be observed at regular primary care checkups to ensure that symptoms of conditions are detected early when counseling is most effective.⁴⁸ Governing medical bodies agree, with the Institute of Medicine, the U.S. Preventive Services Task Force, and the American Academy of Pediatrics all recommending that mental health assessments should be a part of routine medical care.^{49, 50, 51}

Screening

Each mental health problem has its own characteristics and symptoms. However, there are general warning signs that might alert providers that a patient needs specialty help. Providers should ask their patients if they have a history of trauma or abuse, or if they have experienced any of the following:⁵²

- Inability to cope with problems or daily activities;
- Excessive anxieties;
- Thinking or talking about suicide or harming oneself;
- Strange or grandiose ideas; and
- Marked personality change.

Some family doctors and pediatricians are qualified to diagnose common mental health problems—such as depression, anxiety disorders, or attention deficit hyperactivity disorders. Other conditions—such as schizophrenia and autism—must be evaluated and diagnosed by qualified professionals who have knowledge in mental health—psychiatrists, psychologists, psychiatric nurses, social workers, or mental health counselors.⁵³

Unlike some other health conditions, mental health problems can't be diagnosed by a laboratory test. To screen for mental health problems, providers must rely on the individual's disclosure of their symptoms.⁵⁴ Health care professionals will likely be interested in the patient's medical history, including any trauma, as well as that of their family, which may help identify a mental health problem.⁵⁵ Before speaking with others about a patient's condition, be sure to obtain the patient's permission. Talking with family members, teachers, and other doctors, can be very valuable and providers will be able to hear other perceptions on the patient, including their behavior and thoughts, which the patient may not express themselves.

Once the health care provider identifies a patient's symptoms and conducts a physical exam, most experts use the *Diagnostic and Statistical Manual of Mental Disorder (DSM)* to aid in diagnosing a specific mental health problem. The book, compiled by the [American Psychiatric Association](#), classifies and describes more than 300 types of conditions, ranging from anorexia to schizophrenia.⁵⁶ In addition to the DSM, free screeners, such as [The Patient Health Questionnaire \(PHQ\)](#), are available online that health care professionals can use to diagnose common mental health problems such as depression or eating disorders.⁵⁷ This questionnaire asks the patient to rank how often they have been bothered by several problems over the past two weeks, and then provides a way for the provider to "code" each answer, leading to a possible diagnosis.

Questions that screen for depression may include:⁵⁸

- How often have you had little interest or pleasure in doing things?
- How often have you felt down, depressed, or hopeless?
- How often have you had trouble falling sleep, staying asleep, or sleeping too much?
- How often have you been feeling bad about yourself—or that you are a failure or have let yourself or your family down?
- How often have you had thoughts that you would be better off dead or of hurting yourself in some way?

Additionally, questions that screen for an anxiety disorder may include:⁵⁹

- How often have you been feeling nervous, anxious, or on edge?
- How often have you not been able to stop or control worrying?
- How often have you been so restless that it is hard to sit still?
- How often have you felt afraid as if something awful might happen?

If providers are not familiar with using the *Diagnostic and Statistical Manual of Mental Disorder (DSM)* book or the screening tools discussed above, patients should be referred to a psychiatrist, psychologist, other licensed health professional, or to a peer specialist in the field of recovery who is specifically trained to diagnose and treat mental health problems.⁶⁰

Referral

When referring a patient to medical treatment or therapy, providers should relay that mental health problems are common, that treatment is effective, and that with help, people can and do recover from these conditions. Often times, people avoid seeking treatment for mental health problems, as they believe that their signs and symptoms are a normal part of life.⁶¹

It's important that health care professionals and family members work together to develop an appropriate intervention, treatment, or recovery support services plan for the specific mental health problem. Common treatment options include:

- Psychotherapy;⁶²
- Medication Therapy;⁶³
- Support Groups;⁶⁴ and
- Peer specialists or other recovery support programs.⁶⁵

As with substance use disorders, no universal approach exists for treating mental health problems.⁶⁶ While some individuals with severe conditions may need to try more than one treatment option, for an individual with a mild mental health problem, such as attention deficit hyperactivity disorder (ADHD), an outpatient treatment program, such as group counseling or family therapy, may be ideal and equally effective.⁶⁷ For more information on mental health problem treatment services, visit the “[Treatment and Recovery: Finding Specialized Help](#)” document in this toolkit. Additionally, use the tools and resources at the end of this document, such as **SAMHSA’s National Helpline at 1-800-662-HELP (4357)**, **SAMHSA’s Treatment Locator**, or [Mental Health America](#) to research patients’ options.

What Health Reform Means for Health Care Providers and Their Patients

In 2009, nearly 20.9 million people aged 12 or older needed treatment for substance use disorders but didn’t receive it at a specialty substance use facility,⁶⁸ and 6.1 million adults aged 18 or older who reported an unmet need for mental health care didn’t receive services.⁶⁹ While a variety of reasons exist, the **2009 National Survey on Drug Use and Health** shows that when examining data from 2006 through 2009, almost 37 percent of people who needed treatment for a substance use disorder, and made an effort to get treatment, didn’t receive it because they did not have health coverage or could not afford the cost.⁷⁰ In addition, in 2009, 42.5 percent of 6.1 million adults needed mental health services, but didn’t receive them because they reported that they couldn’t afford mental health care.⁷¹ Through the passage of the Affordable Care Act, along with the MHPAEA, health insurance coverage will expand over the next several years to millions who were not previously insured, including those in need of substance use and mental disorder treatment.⁷²

Changes that may impact health care providers and their patients include:

- **Increased access to primary care providers** – The Association of Medical Colleges has estimated that there will be a shortage of approximately 21,000 primary care physicians in 2015. However, the Affordable Care Act has a number of provisions for improving primary care with a comprehensive strategy to strengthen and grow the primary care workforce. Some provisions include:⁷³
 - Increasing access to providers in underserved areas;
 - Focusing on career training;
 - Expanding tax benefits to health professionals working in underserved areas;
 - Building primary care capacity through Medicare and Medicaid;
 - Providing financial assistance for students; and
 - Making health care education more accessible.

Additionally, the Affordable Care Act invests nearly \$11 billion into Federally Qualified Health Centers from 2011 to 2015, which will expand care to 20 million more Americans, increasing access to treatment and recovery services for many in need.⁷⁴

- **Protection for health care consumers** – Through the Affordable Care Act, Americans will be protected against the worst abuses of some health insurance companies. The following provisions, effective immediately for new plans in 2011, will protect Americans by:⁷⁵
 - Prohibiting insurance companies from rescinding or taking away coverage;
 - Eliminating lifetime limits on coverage;

- Regulating annual dollar limits on insurance coverage; and
- Prohibiting denying coverage of children based on pre-existing conditions.

Through the Affordable Care Act, many barriers to treatment will be overcome. For example, parent's insurance plans can now cover their young adult children until they reach 26 years old.⁷⁶ Many of these laws' provisions will be implemented in the next couple of years, and the major coverage expansion under Medicaid and through new State exchanges will be implemented in 2014.⁷⁷ Each health insurance plan will differ depending on the provider and plan options, so it is important for patients to understand their plan to best use their benefits. SAMHSA's [Health Reform Strategic Initiative](#) supports and promotes the increased need for affordable health care coverage and access to appropriate high-quality care. It also works to reduce disparities that currently exist between behavioral health services and medical or surgical benefits. Refer to the "[Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery](#)" document in the "[Resources](#)" section of this toolkit for more information on health reform.

Making a Difference During *Recovery Month* and Throughout the Year

This September and throughout the year, SAMHSA encourages all health care providers to become involved in ***Recovery Month***. Spread the message to your patients suffering from substance use and mental disorders that treatment is effective, recovery is possible, and one's overall well-being and health will improve. Recovery benefits everyone. To make a difference in someone's life:

- **Offer free screenings and seminars** – Health care providers are equipped with the knowledge and tools to detect substance use and mental disorders. Volunteer to perform these services for underserved communities. Additionally, research speaking opportunities at local schools and community groups to showcase the positive effects of recovery on one's overall health and well-being.
- **Share your own story** – If you are a health care provider in recovery from a substance use disorder or are effectively managing a mental health problem, you have a unique opportunity to speak out about this serious public health problem and encourage others to seek treatment. Additionally, if you think a colleague may suffer from a substance use or mental disorder, let them know they are not alone, and that you can help them learn about treatment and recovery options.
- **Attend trainings or continuing education courses to increase your understanding of appropriate treatment and recovery services** – As with any health condition, trends and research surrounding substance use and mental disorders constantly change. By remaining current about this public health problem, health care providers can effectively screen, assess, intervene, and refer individuals in need of treatment services. Additionally, you can learn how the implementation of health reform and the MHPAEA influence the services that providers deliver. Refer to the resources below for more information.

Additional Recovery Resources

A variety of resources provide additional information on ***Recovery Month***, substance use and mental disorders, and prevention, treatment, and recovery support services. Use the toll-free numbers and websites below to increase your knowledge, seek guidance from professionals, and provide resources to patients. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **Substance Abuse and Mental Health Services Administration (SAMHSA) Website** – Leads efforts to reduce the impact of substance use and mental disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357), or 1-800-487-4889 (TDD)** – Provides 24-hour free and confidential Helpline that provides information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.

- **SAMHSA’s “Find Substance Abuse and Mental Health Treatment” Website** – Contains information about treatment options and special services located in your area.
- **SAMHSA’s ADS Center** – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour hotline available to anyone in suicidal crisis or emotional distress.
- **Psychology Today’s Therapy Directory** – Allows users to locate a therapist, psychologist, or counselor who specializes in mental health problems by city or zip code throughout the United States.
- **American Medical Association’s (AMA) Office of Alcohol and Other Drug Abuse** – Provides an array of resources on alcohol and other substances, including facts and policies, treatment and referral resources, and professional intervention details.
- **Mental Health America** – Offers resources about the realities of mental health and mental illness.
- **NAADAC, The Association for Addiction Professionals** – Membership association that serves addiction counselors, educators, and other addiction-focused health care professionals who specialize in addiction prevention, treatment, recovery support, and education.
- **American Academy of Addiction Psychiatry** – Promotes accessibility to quality treatment for all who need it, educates the public to influence public policy regarding addictive illness, and provides continuing education for addiction professionals.
- **American Psychiatric Association** – Works to ensure humane care and effective treatment is given to anyone with mental health problems, including intellectual disabilities and substance use disorders.
- **American Society of Addiction Medicine** – Serves addiction health care professionals and aims to improve the care and treatment of people with the disease of addiction and advance the practice of Addiction Medicine.

As health reform continues to be implemented, use the following resources to learn about the impact of these changes on access to treatment and recovery support services:

- **HealthCare.gov** – Managed by HHS, this Federal website provides information for the general public, people with disabilities, seniors, young adults, and employers on how the law affects access to health care, insurance options, available preventive services, and comparing care quality.
- **Kaiser Family Foundation** – Issued by a nonprofit, health policy and communications group, this document provides a summary on the comprehensive health reform law, the Affordable Care Act, signed into law on March 23, 2010. The document discusses the law and subsequent changes, provisions to expand coverage, control health care costs, and improve the health care delivery system. Visit the Kaiser Family Foundation’s [Health Reform Source](#) for more information.
- **The Parity Implementation Coalition’s Parity Toolkit** – Created by organizations, including **Recovery Month** Planning Partners, this toolkit aids individuals seeking help, individuals in recovery, as well as their families, providers, and advocates in understanding their rights and benefits under the MHPAEA law.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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ADDRESSING SUBSTANCE USE AND MENTAL DISORDERS IN THE WORKPLACE

The majority of people with substance use and mental disorders are employed. In fact, of the 20.8 million adults aged 18 or older classified with substance use dependence or abuse, 70 percent were employed full or part time.¹ In addition, depression—the most common mental health problem in the workplace, affects about 1 in 10 employees.² These problems are medical conditions that if left untreated or under-treated can affect individual employees as well as entire businesses. By increasing access to treatment and recovery support services, employers will:³

- Improve employee health;
- Lower health care costs;
- Reduce absenteeism;
- Reduce the risk of injury; and
- Improve job performance and productivity.

Sponsored by the [Substance Abuse and Mental Health Services Administration's \(SAMHSA's\) Center for Substance Abuse Treatment \(CSAT\)](#), within the [U.S. Department of Health and Human Services \(HHS\)](#), **National Recovery Month: Prevention Works, Treatment is Effective, People Recover (Recovery Month)** raises awareness of substance use and mental disorders and stresses that prevention works, treatment is effective, and people can and do recover from these conditions. **Recovery Month** shares that all individuals have the fundamental and inherent value to be accepted and treated with respect, dignity, and worth. This year's theme, **"Join the Voices for Recovery: Recovery Benefits Everyone,"** emphasizes that:

- All Americans have the opportunity to access provisions within the Affordable Care Act and Mental Health Parity and Addictions Equity Act (MHPAEA), aimed to improve physical and emotional health while ensuring people will receive the care they need at a more reasonable cost.
- Public awareness will increase access for those in need of essential substance use and mental health treatment and recovery support services, including behavioral health treatment.
- These legislative changes will improve the overall health and well-being of people in the United States.

The passage of the MHPAEA provides parity, or the recognition by insurance services—both public and private—that substance use and mental disorders are treated comparably to other physical health and medical conditions.⁴

Through its [Health Reform Strategic Initiative](#), SAMHSA encourages people to understand the major themes of the Affordable Care Act: integration between primary care and behavioral health, accountability, quality home- and community-based services, and availability of wellness and prevention services. **Recovery Month** also supports SAMHSA's [Strategic Initiatives](#) by increasing public awareness of substance use and mental disorders and offering recovery support through an individual, program, and system approach.

In addition to educating employees about the positive benefits that health reform will have on their overall health and well-being, employers—including large businesses, small businesses, nonprofit organizations, and the Federal, State, and local governments—can implement effective prevention, wellness, and support programs. Through these programs, employers can refer employees with substance use or mental disorders to assessment and treatment.⁵ By using the information in this document, company executives and human resource professionals can encourage leaders at their workplaces to implement prevention, referral, and support programs, such as an employee assistance program (EAP).



DON ROTHSCHILD
DENVER, CO

It all started in 1977 when my boss sent me to treatment for my drinking problem. I was a corporate executive with a wonderful wife, two kids, a home, two cars, and a dog. I believed that my life was fantastic.

I went to treatment, but unfortunately didn't stick with the recovery program. I continued down a path of destruction for another decade, in and out of treatment. Finally, while in treatment in 1986 and planning my next drink, I got it!

At age 56, I finished treatment and went to a halfway house in a city where I'd never been in my life. I ate, slept, lived, and breathed a recovery program, and learned that there is no problem in the world so great that a drink wouldn't make it worse.

I started a new life at an age when most retire. It was a struggle because of my age and lack of experience outside my previous industry. But I didn't drink, even when I was laid off from several jobs. I had a strong recovery program, and things that had previously slipped away were restored. I received support from my ex-wife, who always had faith in me. I returned to college at age 59 and found work as an addiction counselor. My driving privileges were returned and through bankruptcy my debt was forgiven.

Today, my wife and I are happily remarried. After starting my own business as a recovery consultant, I've found my niche. Life is better today because I can help people sustain recovery, thus giving me strength to continue on my own journey.

This document will outline the importance of prevention and support in the workplace, the prevalence of substance use and mental disorders among employees, and factors in the workplace that contribute to increased substance use and mental disorders. Additionally, it will discuss how health reform helps small and large businesses and ways employers can get involved with **Recovery Month** to address substance use and mental disorders in all work settings. By providing and helping employees access prevention, treatment, and recovery support services, employers will notice a difference in the company's morale and productivity and improve their financial bottom-line.

Education, Awareness, and Support in the Workplace

Employee education, awareness, and support campaigns are effective in preventing problems both in and out of the workplace. Prevention, treatment, and wellness programs incorporate several components, including substance use and mental health awareness, assessment of risk, brief screenings, drug testing, intervention, treatment, recovery support, and assistance back into the workforce for employees, families, and their communities. Through its **Public Awareness and Recovery Support Strategic Initiatives**, SAMHSA increases the understanding of substance use and mental health prevention and treatment services and to educate all individuals that recovery is much more than just abstinence from substance use or a reduction in symptoms of a mental health problem. True recovery means that individuals can live a quality, self-directed, satisfying life in the community, which includes good health, a home, and a purpose. SAMHSA is working through these **Strategic Initiatives** to assist people in accessing treatment and support for these conditions with the same urgency as any other health condition.

Prevention, treatment, and wellness programs can be provided in or out of the workplace. They are designed to inform employees about the importance of addressing mental health problems at work and at home, and educating them about risks associated with substance misuse and the impact of alcohol and/or drug use on their family and coworkers.⁶ Through these programs, employers can promote healthy lifestyles and reinforce the following positive messages to their employees:⁷

- Drug-free workplace policies protect the health and safety of all employees, customers, and the public. They also safeguard employer assets from theft and destruction, and maintain product quality and company integrity and reputation.
- By effectively addressing substance use and mental disorders, employers can see benefits such as improved employee morale, quality of work, employee satisfaction, and decision-making, as well as reduced absenteeism and tardiness.
- Implementing exercise programs and other health-oriented activities can help improve physical and emotional health issues among employees, such as weight problems, high blood pressure, diabetes, depression, or gastric problems and can help reduce stress.

In short, prevention works, treatment is effective, and people do recover from substance use and mental disorders while contributing to their jobs. The employee education and intervention program, [PeerCare](#), for example, is a union-management partnership of volunteer employee peer groups that are diverse in gender, ethnicity, and job title. Each volunteer completes a training course to learn how to recognize if a co-worker has a substance use disorder, and if so, how to intervene. Their role is to establish that working while under the influence of substances is unacceptable. To gain employee participation in the PeerCare program, management moves from a disciplinary, punitive approach to treating substance use disorders to a supportive aid for those in need. As a result, employees educate, intervene, and refer workers to appropriate support services to attain healthier lifestyles, free of alcohol and/or drug use, without penalizing the employee.⁸ At a cost of approximately \$35 per employee, the program can help a company avoid at least \$1,850 in costs per person resulting from the program's activities.⁹

For tips and resources to help identify and treat employees who have a substance use disorder, visit the Department of Labor's [Working Partners for an Alcohol- and Drug-Free Workplace](#) website.

Similar to PeerCare, [WorkplaceResponse](#), is an education and screening program developed by Screening for Mental Health, Inc. that helps businesses and their employees screen for common mental health problems, including depression, anxiety, post traumatic stress disorder, bipolar disorder, and eating disorders. The program, which is available online and over the phone, is completely confidential, and provides specific referral information should individuals need further evaluation and treatment.¹⁰

For tips and resources to help identify and treat employees who have a mental health problem, visit the [Mental Health America](#) website.

Prevalence of Substance Use and Mental Disorders in the Workplace

Use of substances may occur both on and off the job, equally affecting one's overall health, well-being and work performance. According to a national survey, in the course of a year, more than 2 million people used illicit drugs during work hours, and approximately 3 million workers used an illicit drug within 2 hours of reporting to work.¹¹ Additionally, 7 percent of Americans used alcohol during the workday, and 9 percent of Americans claimed they had worked "hungover," experiencing the physical effects following the heavy use of alcohol, ultimately affecting their work performance.¹² The following occupations have the highest rate of reported substance use:¹³

- Construction workers;
- Sales personnel;
- Restaurant workers; and
- Transportation and material movers.

High-paying occupations and positions, including company directors, military personnel, lawyers, police officers, and doctors, also have high alcohol and drug consumption rates.¹⁴

Mental health problems, such as depression or anxiety, also have a significant impact on the workplace.¹⁵ For example, depression, the most common mental health problem in the workplace, affects nearly 1 in 10 employees.¹⁶ It's estimated that 72 percent of people in the workforce who have depression are not properly diagnosed, causing over \$63 billion lost annually due to decreased productivity.¹⁷ When left untreated, these health conditions can affect performance, resulting in a loss of productivity and absenteeism.

In addition, mental health problems contribute to more work impairment and absences than other chronic health conditions such as diabetes, asthma, arthritis, back pain, hypertension, and heart disease.¹⁸ Prevention, awareness, and support campaigns in and out of the workplace are essential to combat these treatable, yet common, public health problems. Outpatient programs that treat mental health problems can produce savings for employers; research has shown that after 3 weeks of treatment, work impairment was cut nearly in half, from 31 percent to 18 percent for employees with mental health problems.¹⁹

Contributing Factors to Substance Use and Mental Disorders in the Workplace

Occupational, personal, and social factors play a role in increased substance use and mental disorders in and outside the workplace. For example:

- **Job responsibilities** that are high stress or have low satisfaction, long or irregular shifts, repetitive duties, or inconsistent supervision are common elements that may contribute to increased substance use and mental disorders.²⁰
- **Personal stressors** such as illness, death in the family, marital strain, financial problems, internal conflicts, emotional or physical abuse, and trauma are common troubles that can contribute to increased alcohol and/or drug use and can affect one's everyday work.²¹
- **Economic worries**, including increased unemployment, foreclosures, loss of investments, and other financial distress can cause mental health problems such as depression, anxiety, and compulsive behaviors, as well as substance misuse.²²

The following signs may be present in employees who are dealing with these personal or work issues, which can contribute to substance use and mental disorders:²³

- Lack of attention to job tasks;
- Increased work absences and on-the-job accidents;
- Inconsistent work quality or work not up to its usual standards;
- Disregarded work safety procedures; and
- Extended lunch breaks, late arrivals, or early departures.

One-fourth of employees view their jobs as the number one stressor in their lives.²⁴ While nearly one-half of large companies in the United States provide some type of stress management training, all employers should work with their employees to reduce and manage any stress and establish EAPs so that employees become familiar with prevention and referral programs available to them.²⁵ Employers should support **Recovery Month's** efforts by encouraging employees and company leaders to brainstorm and apply positive ways to help prevent problems of substance use and mental disorders within the workplace. Refer colleagues to resources if needed and support employees who are in treatment and recovery.

Health Reform Substantially Affects the Workplace

Based on combined data from 2006 through 2009, almost 37 percent of people aged 12 or older who needed substance use treatment, felt a need for treatment, and made an effort to receive treatment, didn't receive it because they didn't have health coverage or couldn't afford the cost.²⁶ Additionally, more than 42.5 percent of the 6.1 million adults aged 18 or older who reported an unmet need for mental health care, but didn't receive services, cited the inability to afford care as a barrier to treatment.²⁷ There is a tremendous gap between those who suffer from substance use and mental disorders and those who access treatment and recovery support services. Fortunately, with the passage of the Affordable Care Act in 2010, coverage will expand to approximately 32 million Americans who were not previously insured.²⁸ The Affordable Care Act includes many provisions aimed at improving access to certain prevention services and access to essential substance use and mental health treatment and recovery support services, including behavioral health treatment. Several aspects of the legislation that small and large employers should keep in mind as it is implemented are detailed below.

Through the Early Retiree Reinsurance Program, both large and small employers who provide health insurance to retirees ages 55 through 64 will be eligible for financial assistance to help pay for high-cost early retirees. Lowering the cost of premiums for all employees will help reduce employer health costs.²⁹ Refer to the "[Fast Facts About Health Reform, Substance Use and Mental Disorders, Treatment, and Recovery](#)" document in this toolkit for more information on health reform and the positive effects it, along with the MHPAEA, will have on access to treatment and recovery support services.

For Small Employers

A company with 50 employees or less is considered a small business, but some provisions use other standards. In some States, this also includes self-employed individuals with no employees. Some provisions include:³⁰

- If you have up to 25 employees, pay average annual wages below \$50,000, and provide health insurance, you may qualify for a small business tax credit of up to 35 percent (up to 25 percent for non-profits) to offset the cost of your insurance. This will bring down the cost of providing insurance.
- Starting in 2014, the small business tax credit goes up to 50 percent (up to 35 percent for non profits) for qualifying businesses. This makes the cost of providing insurance even lower.
- Starting in 2014, small businesses with generally fewer than 100 employees can shop in an Exchange, which gives you power similar to what large businesses have to get better choices and lower prices. An Exchange is a new marketplace where individuals and small businesses can buy affordable health benefit plans. Exchanges will offer a choice of plans that meet certain benefits and cost standards.

For Large Employers

A company with more than 50 employees is considered a large company, which are impacted by the following provisions:³¹

- Job-based coverage that was in effect on March 23, 2010 is exempted from certain provisions in the Affordable Care Act.
- The Affordable Care Act tackles waste, fraud, and abuse and other drivers of health care costs, which will provide employers significant savings in the cost of employee care.
- By providing affordable coverage to all Americans, the law will significantly reduce the hidden tax that currently adds \$1,000 to the cost of every family policy to help pay for the costs of uncompensated care.
- The health law tax credits and the new employer responsibility policies will help level the playing field between different types of employers. More businesses will be able to offer affordable coverage.

Addressing Substance Use and Mental Disorders in Your Workplace

This September and throughout the year, SAMHSA encourages all employers and workers to become involved in **Recovery Month** and work to improve the overall health and well-being of people in all workplace settings. Specifically, as an employer, you can:

- **Write a comprehensive alcohol- and drug-free policy.** Your policy should delineate the company's position on alcohol and drug use, what the company expects of its employees, and consequences employees will face if they violate the policy. Be effective by involving employees at all levels when developing this plan.³²
- **Train supervisors and educate employees.** Since supervisors have the most direct contact with all workers, they should be trained on your company's alcohol and drug use policy and how to detect signs and symptoms of substance use and mental disorders in the workplace. Supervisors and employees should have access to information on how to refer colleagues to treatment and recovery services in your community. In addition, all employees should be educated about the risk of developing substance use and mental disorders and how they can impact your workplace.³³ Be sure you share the impact health reform has on insurance coverage and the increased access employees can get for substance use and/or mental health condition treatment and recovery services.
- **Provide an employee assistance program (EAP).** EAPs have the potential of reaching individuals of diverse occupations, backgrounds, and income levels. These programs assist in handling personal issues that arise, and typically include short-term counseling and referral services for employees and their families. Providing employees the necessary tools to handle substance use or mental disorders will positively impact your workplace with improved productivity and health and decreased overall health care costs.³⁴
- **Start a drug testing program.** All employers, including your workplace, should consider a drug testing program. This is critical for jobs that can potentially present safety issues to workers including drivers, mechanics, construction workers, and those who operate machinery. If used, testing programs must meet legal or regulatory requirements, disability discrimination provisions, and collective bargaining agreements. Consider consulting a lawyer or visit [SAMHSA's Drug-Free Workplace](#) website to ensure that your testing program is fair, accurate, and legally defensible. Also, review all Federal regulations, as described under [The Drug-Free Workplace Act of 1988](#).³⁵
- **Encourage a work-life balance.** Recovery involves rejoining and rebuilding a life in the community.³⁶ When one's work and personal life is out of balance, stress levels are likely to increase, which can contribute to substance use and mental disorders. Workers who take time off because of stress, anxiety, or a related mental health problem are out-of-work an average of 20 days a year.³⁷ Encourage your employees to spend time out of work doing activities they enjoy, such as spending time with family or volunteering in their communities. Additionally, avoid overworking your employees so that they have time for extracurricular activities.
- **Sponsor a *Recovery Month* event.** Consider holding a walk, educational forum, or seminar during **Recovery Month** to raise awareness of the prevalence of substance use and mental disorders in the workplace and how health reform increases access to treatment and recovery support services if needed. Also, you can encourage employees to attend other local **Recovery Month** events individually or as an organization.
- **Offer free space to your employees to hold support group meetings.** A free meeting space provides your employees with a comfortable setting to meet with others, and encourages others to seek peer-to-peer support services who may not have otherwise.

Additional Recovery Resources

A variety of resources provide additional information on **Recovery Month**, substance use and mental disorders, and prevention, treatment, and recovery support services. Use the toll-free numbers and websites below to share your experiences, learn from others, and seek help from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **Substance Abuse and Mental Health Services Administration (SAMHSA) Website** – Leads efforts to reduce the impact of substance use and mental disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357), or 1-800-487-4889 (TDD)** – Provides 24-hour free and confidential information about substance use and mental disorders, prevention, treatment, and recovery referrals in English or Spanish.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website** – Contains information about treatment options and special services located in your area.
- **SAMHSA's Division of Workplace Programs** – Provides guidance for employers on workplace drug-testing issues and can also be accessed by calling 1-800-Workplace (967-5752).
- **SAMHSA's ADS Center** – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour hotline available to anyone in suicidal crisis or emotional distress.
- **The National Institute on Drug Abuse (Drug Free Workplace Programs)** – Includes information on research to significantly improve prevention, treatment, and policy as it relates to drug abuse and addiction.
- **Employee Health Programs** – Designs and manages drug-free workplace programs, employee assistance programs, and other services that benefit employers and employees.
- **Mental Health America** – Offers resources about the realities of mental health and mental illness.

As health reform continues to be implemented, use the following resources to learn about the impact of these changes on access to treatment and recovery support services:

- **HealthCare.gov** – Managed by HHS, this Federal website provides information for the general public, people with disabilities, seniors, young adults, and employers, on how the law affects access to health care, insurance options, available preventive services, and comparing care quality.
- **Kaiser Family Foundation** – Issued by a nonprofit, health policy and communications group, this document provides a summary on the comprehensive health reform law, the Affordable Care Act, signed into law on March 23, 2010. The document discusses the law and subsequent changes, provisions to expand coverage, control health care costs, and improve the health care delivery system. Visit the Kaiser Family Foundation's [Health Reform Source](#) for more information.
- **The Parity Implementation Coalition's Parity Toolkit** – Created by organizations, including **Recovery Month** Planning Partners, this toolkit aids individuals seeking help, individuals in recovery, as well as their families, providers, and advocates in understanding their rights and benefits under the MHPAEA law.

Inclusion of websites and resources in this document and on the [Recovery Month website](#) does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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