

The Role of Families in SAMHSA's Office of Recovery

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NATIONAL FEDERATION OF FAMILIES
Bringing Lived Experience to Family Support



SAMHSA
Substance Abuse and Mental Health
Services Administration

Presentation Objectives

- Recognize SAMHSA's commitment to including the voice of families of individuals experiencing challenges with mental health, substance use, serious mental illness, and/or serious emotional disturbances in decision-making.
- Understand the importance of family engagement to meet the Office of Recovery's goals.
- Understand the role of Family Peer Specialists as key supports for families of children across the lifespan with mental health and/or substance use challenges.

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History of Recovery at SAMHSA

- SAMHSA has long history in supporting recovery, recovery supports, and the inclusion of people with lived experience
- 1970's ADAMHA – Community Support Program
- 1980's – Monthly Conference Call of Consumer/Ex-patient leaders; Alternatives Conference; Peer-Operated Services Demonstrations; Mental Health Block Grant and PAIMI Legislation; Recovery Month
- 1990's – Recovery Community Services Program; Consumer & Consumer Supporter TA Centers; State Consumer Networks; Surgeon General's Report on Mental Health; First Consumer Affairs Specialist Hired; Consumer Operated Services Program; CMHS NAC Subcommittee on Consumer/Survivor Issues

History of Recovery at SAMHSA

- 2000's – President's New Freedom Commission; CMS Medicaid Funding of Peer Workers; Recovery to Practice; Voice Awards; Wellness Campaign; CMHS and CSAT Offices of Consumer Affairs
- 2010's – Building Communities of Recovery; BRSS TACS; RCSP Statewide Network; Targeted Capacity –Peer to Peer Recovery; Transforming Lives via Supported Employment; Peer Recovery Center of Excellence
- 2020's – First Person in Recovery as Acting Assistant Secretary; Office of Recovery Announced

Recovery Defined - Process

- Recovery Summits – separate meetings of people with lived experience of substance use conditions and for people with lived experience of mental health conditions to define and establish principles.
- 2010 Unified Recovery Summit – identify commonalities and unique distinctions.
- Public Comment – open forum on SAMHSA’s website to provide opportunity for public feedback and comment.

Recovery Definition

A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.

Recovery Support Services are Essential

- SAMHSA advanced recovery support systems promoting involvement with people in recovery and **families**;
- Can be provided in various settings;
- Help people enter and navigate systems of care, remove barriers to recovery, stay engaged in recovery process and live full lives in communities of their choice;
- Full range of support services;
- Include peers providing shared understanding, respect and mutual empowerment.



Recovery Summit 2022: A National Gathering



Focus:

- Review SAMHSA's recovery definition which includes the four dimensions and principles.
- Operationalize that definition into specific strategies that weave a vision for the Office of Recovery at SAMHSA and across the federal government.

Themes:

- Peer Recovery Support Services
- System Transformation



Technical Expert Panel: Model Standards for Peer Certification

- **Goal:**
 - Create and publish a set of national standards for peer certification grounded upon best practices across the United States.
 - Gathered experts from the field with emphasis on lived experience including families and caregivers.

SAMHSA National Recovery Agenda: Purpose

To forge partnerships to support all people, families and communities impacted by mental health and/or substance use conditions to

- ❖ pursue recovery,
- ❖ be resilient and
- ❖ achieve wellness.

Operating Principles and Values

Hope: Recovery emerges from hope and is the catalyst of the recovery process.

Person Driven: Self-determination and self-direction are the foundations for recovery.

Many Pathways: Pathways are built on individual's unique needs and highly personalized.

Holistic: Recovery encompasses an individual's whole life including mind, body, spirit, and community.

Peer Support: Sharing of experiential knowledge and skills play an invaluable role in the process.

Relational: An important factor is the presence and involvement of people who believe in an individual's ability to recover

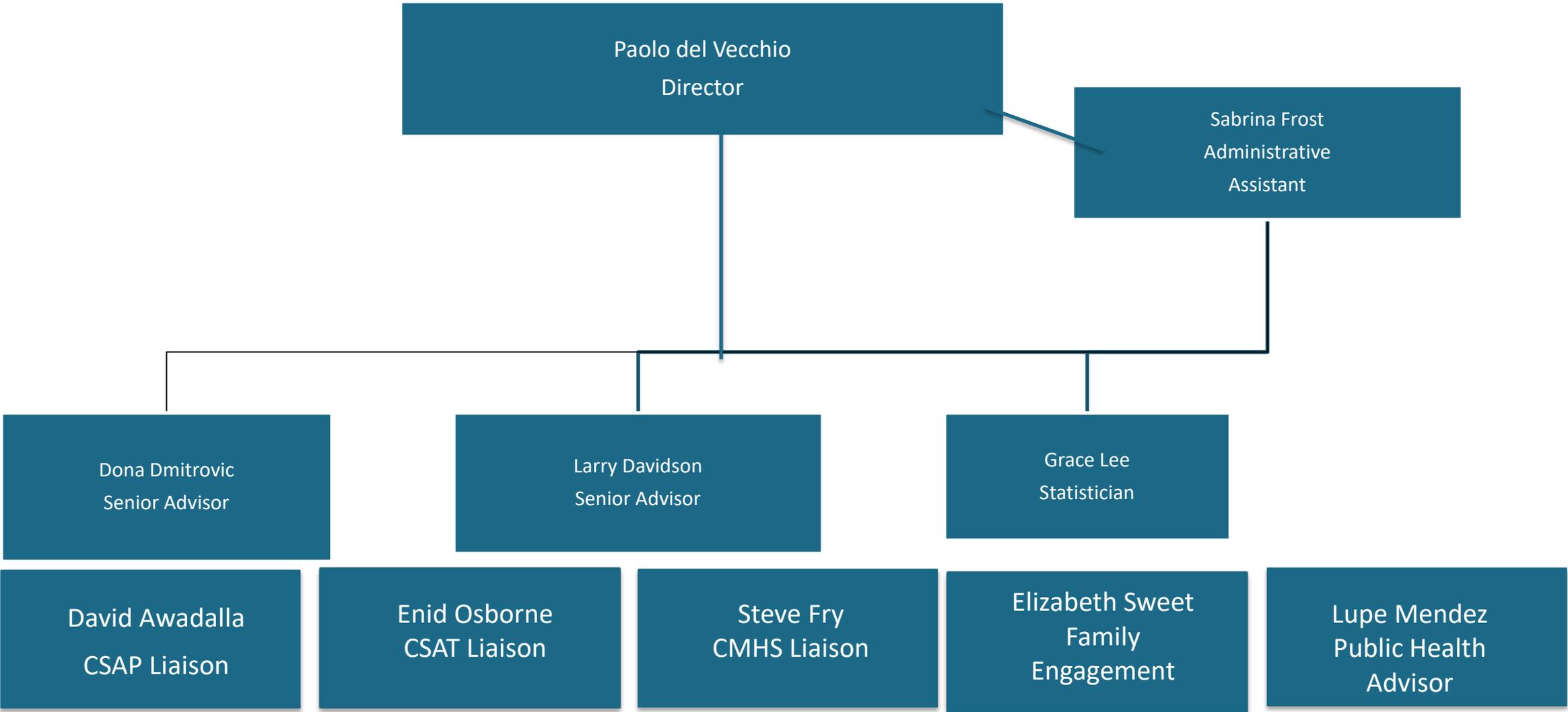
Culture: Culture and cultural background including values, traditions, and beliefs are key for a person's journey to recovery.

Addresses Trauma: Supports should be trauma-informed to foster safety and trust.

Strengths and Responsibilities: Individuals, families and communities have strengths and resources that serve as a foundation for recovery.

Respect: Community, systems and societal acceptance and appreciation including rights and eliminating discrimination are crucial in achieving recovery.

Office of Recovery Team



SAMHSA National Recovery Agenda Goals

Inclusion

Equity

Peer Services

Social Determinants

Wellness

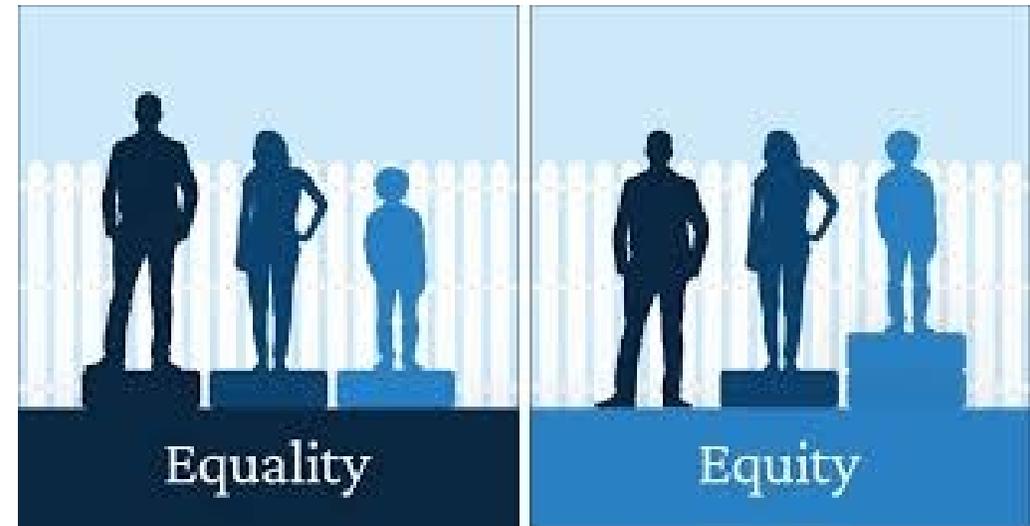
Goal #1: Inclusion

To foster the meaningful involvement of a wide array of people with lived experience to improve behavioral health practice & policy and to foster the social inclusion of people with behavioral health conditions.



Goal #2: Equity

To increase opportunities for recovery for underserved and under-resourced populations and communities including people of color, youth, older adults, LGBTQI+, rural, veterans and people with disabilities.



Goal #3: Peer Services

To expand peer-provided services within every community.



Goal #4: Social Determinants of Health

To address key social determinants that support recovery including access to housing, education, social supports, and employment.



Goal #5: Wellness

To expand holistic, self-care strategies to improve health and behavioral health outcomes - including the reduction of early mortality and impact of co-morbid chronic health conditions – and to integrate recovery-oriented practices and systemic reform into the full continuum of health and behavioral healthcare including prevention, harm reduction, treatment, crisis care, and recovery support



Office of Recovery Core Principles

Data and evidence

To increase the collection, analysis & reporting of data on recovery and expand the identification & use of evidence and practice-based policies and approaches.

Trauma-informed

To embed trauma-informed practices and approaches in recovery efforts.

Rights Protection

To protect the human and civil rights of people with lived experience.

Office of Recovery – Family Involvement

- Family Involvement predates SAMHSA in the Child and Adolescent Service System Program (CASSP) efforts and moved to SAMHSA when SAMHSA was formed 1992.
- In October of 1984 The Research and Training Center on Family Support and Children’s Mental Health in Portland, Oregon undertook a project entitled, “Families and Allies (FAA)”. The purpose of this project was to promote better understanding between family members and service providers, and to encourage full family participation in the Child and Adolescent Service System Program (CASSP) efforts.

SAMHSA Family Support

- The first federal support for statewide family organizations, specifically focused on supporting families whose children were experiencing mental health issues, consisted of funds added to the allocation for the Research and Training Center on Family Support and Children's Mental Health (RTC) in FY 1988 to fund 5 statewide family organizations at \$20,000 each in the states of Hawaii, Minnesota, Montana, Virginia, and Wisconsin.
- This initiative, which was called the Statewide Parent Organization Demonstration Project (SPODP) had two major goals: (1.) to stimulate and support the development of model statewide parent organizations “that have the capacity to provide technical assistance, information, support, and networks to parents and parent organizations within states, and (2) to evaluate the conceptualization, implementation, and outcome of these models to inform decision-makers about the most effective approaches to approaches to promoting such activity within states” (Koroloff, Stuntzner-Gibson, & Friesen, 1990, p. 1).

SAMHSA Family Support

- Federal funding for statewide organizations has been developed in phases. The first funding cycle supported the five previously mentioned state organizations as a demonstration project in order to learn more about the nature and amount of support statewide family organizations needed in order to operate effectively. The number was reduced to three from 1989-1990. From 1990-1993 15 statewide organizations were provided \$30,000 a year through a fixed price contract directly through CASSP.
- It was through these contracts that language was included that the organizations receiving the award needed to be an autonomous, family directed organization.

Family Involvement

- 1993-1996, 28 statewide family organizations were funded at \$50,000 per year and this was then extended for an additional two years through September of 1998.
- 1989-2001 federal support of \$60,000 a year was provided to 29 organizations.
- 2001-2004, 42 grantees were funded at a base of \$60,000 and an additional \$10,000 award was given to organizations who also wanted to provide support to youth organizations of young consumers with mental health challenges, making the total award \$70,000. This level of funding has increased to \$120,000 for the current 13 grantee awards in 2022.
- The goals of the program continue to support the development of statewide family organizations in states where a federal award has yet to be made and now also includes the goals of supporting families through education, support and the provision of information to families who live in their states and are raising children with mental health challenges.
- The Statewide Family Network Program has been funded in all 50 states, except South Dakota, the District of Columbia and the Territory of Guam.

Office of Recovery – Family Focus

Nothing About Us Without Us

- RAISE Initiative
- Family and Parent Training Initiative with ACF
- Mental Health Awareness Month
- Family Peer Specialists
- Office of Recovery Inclusion of Families

Discussion

Presenting these questions to gain feedback from you:

- How can we assist in expanding diverse family involvement in all aspects of behavioral healthcare?
- Are there particular family-focused rights related issues that need to be address (e.g., parental custody, seclusion and restraint in schools)?
- What would be helpful in building the resiliency of youth and families?
- How can we better educate and empower families to assist their loved ones on their journeys of recovery?

Thank you!

SAMHSA's mission is to lead public health and service delivery efforts that promote mental health, prevent substance misuse, and provide treatments and supports to foster recovery while ensuring equitable access and better outcomes.

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