

*Micro-connecting: Effective Outreach
& Engagement Strategies with
Persons Seeking Recovery*

Presenter

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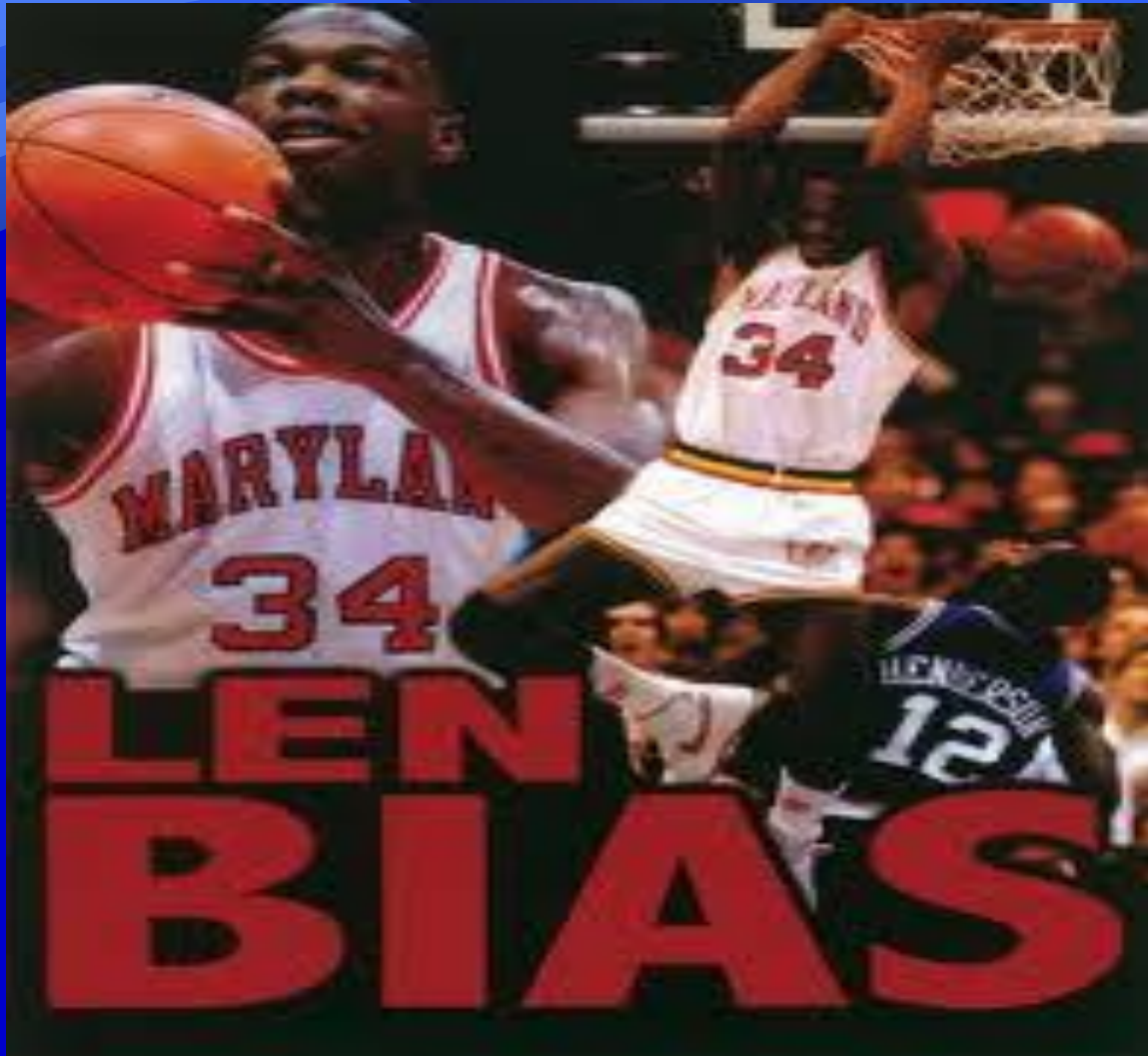
Five Crises that Preceded the Need for Community Outreach

1. Crack crisis of the 1980's

- *Cocaine replaced marijuana*
- *Baking soda replaced ether*



Richard Pryor



Crack Crises Continued

➤ *War on drugs*

- *1985- 400,000 inmates*
- *1995- 1 million inmates*
- *2005- 2 million inmates*
- *Today- 2.5 million inmates*

Crack Crises Continued

- *Cocaine lost status*
- *Many inpatient programs became major profit centers*
- *Greater distance between the treatment and 12-Step communities*
- *Stigmatizing term "crack baby" was born*

*"We were all on crack."
Chris Rock*

2. Managed Care Crisis

3. Methamphetamine Crisis Today

"Combine some hardware and a few common Chemicals, with about as much skills as it takes to bake a cake, and you have a methamphetamine epidemic in rural America."

Neal Conan

- *Number one legal problems in some states*
- *Number one cause of rural fires*

Methamphetamine Crisis Continued

- *Number one public health problem in some states*
- *A number of states report that, in spite of the crisis, only a small percentage of methamphetamine users make it to treatment*
- *Meth users only constitute 4-7% of treatment admissions*

4. The OxyContin and Heroin Epidemic

- High overdose rates*
- Low treatment admission rates*

5. Limitations of the Acute Care Model

- *Ineffective service dose*
- *Difficulty with attraction*

75% of chemically dependent clients will never get help for their addiction

5. Limitations of the Acute Care Model Continued

- *Long waiting lists and high dropout rates*
- *High administrative discharge rates*
- *Abandonment – aftercare as an afterthought*

In summary, outreach is needed to engage the 75% of persons with addictions who will never seek addictions treatment and to provide ongoing recovery support in the natural environment for persons leaving treatment.

Three Levels of Outreach

1. Pre-treatment Engagement

- Increased client motivation for treatment and recovery.*
- To help with other services while the client waits for treatment.*
- To encourage clients to decrease the harm related to their substance use.*

Three Levels of Outreach Continued

2. In-treatment Recovery Support

- To help create a seamless system of care from treatment into the community.*

Three Levels of Outreach Continued

3. Post-treatment Recovery Support

- To help with the fragility of early recovery.*
- To help clients with the many challenges they will face in early recovery.*

Areas of Support Needed in Early Recovery in the Natural Environment

- 1. Return to an anxious home*
- 2. Dealing with pressure from bill collectors*
- 3. Early efforts to disengage from a drug culture*

Types of drugs

Socially celebrated

Socially tolerated

Socially prohibited

Types of drug users

Acultural

Bicultural

Culturally Immersed

Source: White, W. Pathways from the Culture of Recovery. Center City, Minnesota: Hazelden.

Types of Support Needed Continued

4. Feelings of uselessness in the community

5. Separation/Divorce

6. Disengagement from self-help groups and other sources of support

Types of Support Needed Continued

7. Unresolved grief and trauma

8. Development of recovery capital

9. Chronic pain

10. Addictive relationships

11. Memory

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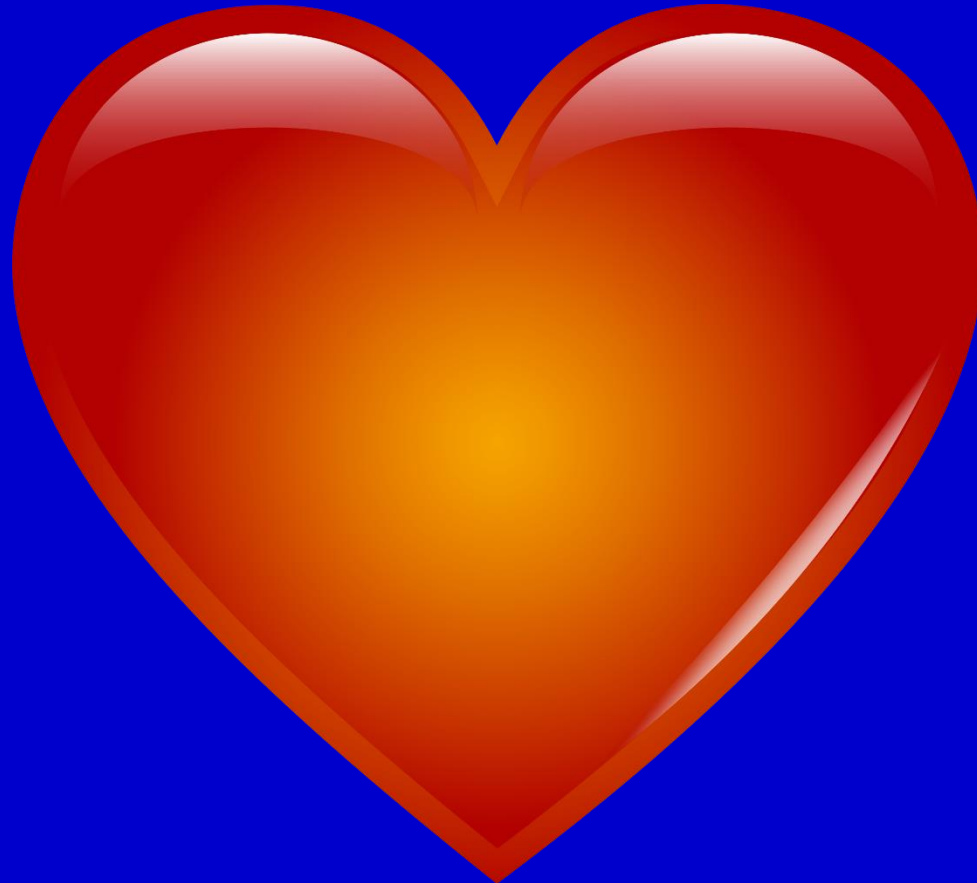
*What it takes to provide effective
outreach*

Effective Outreach

- *Total acceptance and a non-judgmental attitude*
- *Ability to create privacy where there is none*
- *Resourcefulness- "Gift giving"*

Effective Outreach Continued

The ability to connect with your



Effective Outreach Continued

A strength based approach

- *What do you do well?*
- *How have you been able to endure so much?*
- *What have you learned from what you have gone through?*
- *Which of your experiences has taught you the most about your own resilience?*

Effective Outreach Continued

Naturally Therapeutic Qualities

➤ *Empathy*

➤ *Warmth*

➤ *Genuineness*

Effective Outreach Continued

Ability to establish a relationship that promotes equality

- *A voice in the treatment plan*
- *Discovering what the client wants*

Effective Outreach Continued

Honor Maslow's Hierarchy of Needs

- 1. Physiological- food, clothing, shelter*
- 2. Safety*
- 3. Belonging*
- 4. Self esteem*
- 5. Self actualization*

Effective Outreach Continued

Ability to establish trust

- *Awareness of differences and micro-aggressions (intentional and unintentional slights)*
- *Keep your word*
- *Patience*

Effective Outreach Continued

Stage based interventions

- *Pre-contemplation*
- *Contemplation*
- *Readiness*
- *Action*
- *Maintenance*

Effective Outreach Continued

- *Awareness of resources available in the community to support recovery*
- *Ability to develop resources where none exist*

Effective Outreach Continued

- *Ability to view the entire community as the treatment center*

Non-traditional Referral Sources

- *GED programs*
- *Community College*
- *Churches*
- *Medical clinics*
- *Libraries*
- *Monks, rabbis, medicine men*

Effective Outreach Continued

➤ *Advocacy*

➤ *Acceptance of multiple styles of recovery*

Multiple Styles of Recovery

- *Solo*
- *Treatment assisted*
- *12 Step*
- *Telephonic*

Multiple Styles of Recovery Continued

- *Religious style*
- *Cultural style*
- *Text messaging*
- *Temporary drug substitution*

Multiple Styles of Recovery Continued

- *Partial recovery*
- *One drug at a time*
- *Medication assisted recovery*
- *Harm reduction*

Examples of Harm Reduction

- *Not sharing needles*
- *Not mixing drugs*
- *Use of condoms*
- *Not mixing drugs with alcohol*

Which of the following are important to you in selecting a recovery support group?

(Check all that apply)

People who:

_____ *Have experience with my primary drug*

_____ *Are the same gender*

_____ *Are close to my age*

_____ *Share my ethnic, cultural background*

_____ *Share my view on religion, spirituality,
secularity*

_____ *Share my sexual orientation*

_____ *Smoke tobacco*

_____ *Do not smoke tobacco*

_____ *Have tolerant attitudes toward medication
prescribed for addiction or mental illness*

_____ *Have prior experience in the criminal
justice system*

_____ *Do not have prior experience in the criminal system*

_____ *Have approximately the same income level*

_____ *Have had severe alcohol/drug problems*

_____ *Have had mild to moderate alcohol/drug problems*

_____ *Share my goal of complete abstinence*

_____ *Share my goal of moderate use*

Source: Recovery, Northeast ATTC, 2006

Effective Outreach Continued

- *Practice acts of self care on the road*