

# RESIDENTIAL SUBSTANCE ABUSE TREATMENT (RSAT)

*Re-Entry : Issues & Opportunities  
February 27, 2019*

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# Housekeeping: Functions

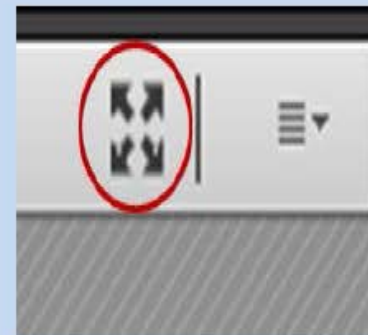
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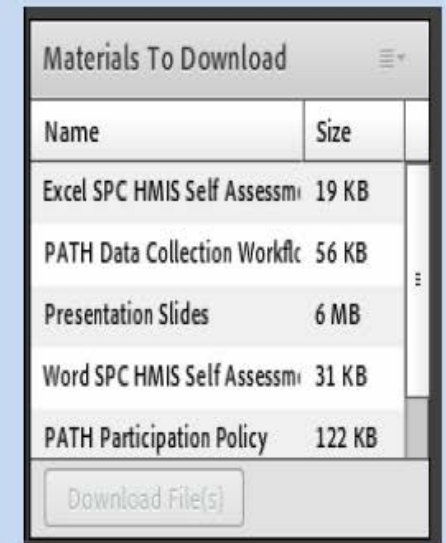
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A screenshot of a software interface showing a "Materials To Download" box. The box has a title bar with a hamburger menu icon. Below the title bar is a table with two columns: "Name" and "Size". The table contains five rows of data. At the bottom of the box is a "Download File(s)" button.

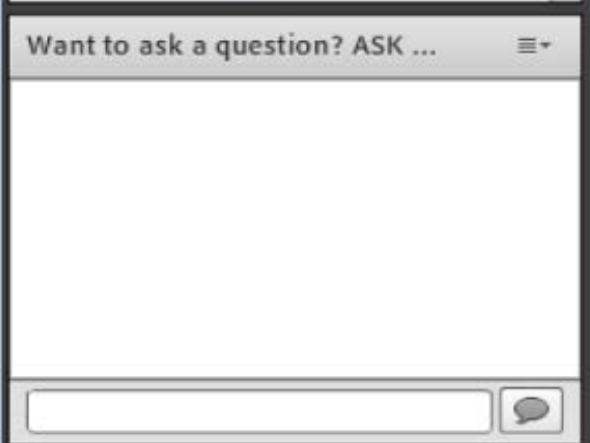
Name	Size
Excel SPC HMIS Self Assessm	19 KB
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# Housekeeping: Communication

### Q&A and Technical Issues

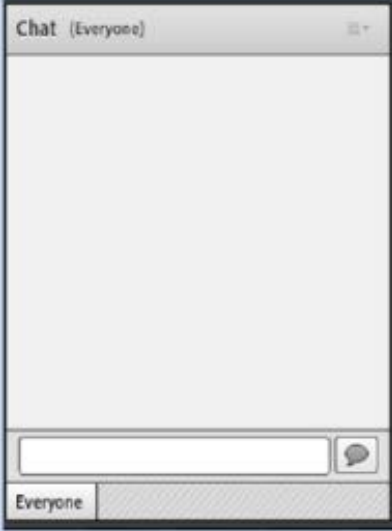
If you have questions for either the presenters or our Technical Support Staff, enter them in the Q&A box.

Our support staff will assist you with your technical issues, and our moderator will present as many questions as possible to the presenter.

A screenshot of a Q&A interface. The title bar reads "Want to ask a question? ASK ...". Below the title bar is a large white text area for entering questions. At the bottom of the window is a text input field and a speech bubble icon.

### Chat with us!

If you have general comments, please post them in the participant chat box.

A screenshot of a chat box interface. The title bar reads "Chat (Everyone)". The main area is a large white space for chat messages. At the bottom, there is a text input field and a speech bubble icon. Below the input field, it says "Everyone".

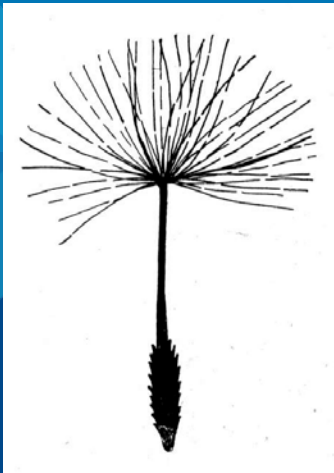
# Reentry: Issues & Opportunities

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[adcare.com/criminal-justice-services](http://adcare.com/criminal-justice-services)

## ***PART ONE : Access to services***

Transportation, housing, work, medical/psych,  
employment, recovery, supports.



# Michelle Alsup's Reentry Issues\*

## NOT ENOUGH

Beds in residential treatment/shelters

Or 1-1 counseling with people who understand SUD+MH+Criminal history

Or employment for those with criminal records

Or Housing

Or Medical/ Psychiatric

Or Supportive Peers



\*Michelle Alsup, MSW, LADC 1  
ACJS Regional Manager  
Middleton House of Corrections

## Recovery navigators helping people get into a drug treatment

New London — Though they've been active for less than a month, the city's three part-time recovery navigators already have helped get 25 people into varying levels of drug treatment.

May 6, 2018 [www.theday.com](http://www.theday.com)

## Opportunities: Recovery Navigators, Recovery Coaches, Community Support/



# Reentry: Connecting with the right treatment at the right time

**-Community Support Program:** BC/BS in rural Cape Cod, post treatment connector.

2016 insurance company data: CSP increases appointments kept – higher rates for women.

**-Recovery Navigators:** Spectrum Health Systems, post-incarceration meet, give food bags, improving low retention by modifying assessment to build commitment.

Clean Slate: homeless outreach, moving from counseling to focus on case management.

**- Recovery Coach:** No-cost training through the NH Bureau of Drug and Alcohol Services (BDAS):

Training on Addiction- 6-hour: neurological basis of addiction; mental, behavioral, emotional, spiritual dimensions; stages of change; recovery; motivational techniques

Families and Addiction-3.5-hour workshop explores how the addiction of the individual affects the entire family system. Special attention will be paid to the effects on the children in the family.

<https://www.dhhs.nh.gov/dcbcs/bdas/training.htm>



# Opportunities in employment

## CORI FRIENDLY RESOURCES:

<http://www.bostonworkersalliance.com/corifriendly-joblist>

Ace Hardware

America West Air

Andersen Windows

Blue Cross Blue Shield Association

Black & Decker

Dillard's

Dole Foods

Dunkin Donuts

DuPont

Eddie Bauer

Firestone Tire and Rubber

FirstExpress

Frito-Lay

Fruit of the Loom

Fujifilm

Georgia-pacific

General mills

Goodwill industries

Hanes

Hewitt associates

General Electric



# The Other employment issues

## Under-employment

The Shawshank Redemption  
Issue: Morgan Freeman as  
“Red” in the release job.

Property crimes/dealing/sex for  
fee versus \$10-12/hour jobs

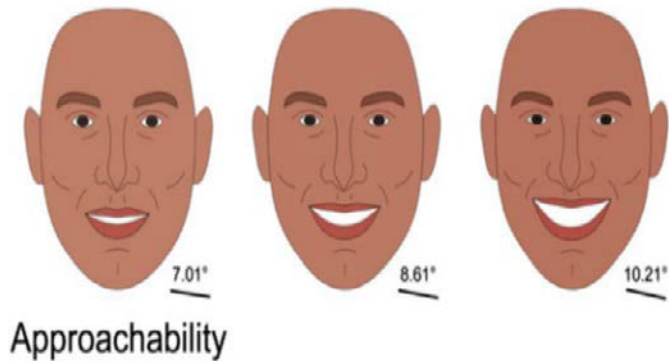
Stigma of addiction

Stigma of criminal record



# Improving access and engagement treatment

## The “warm” handoff to services--promising improvements



### Handoff to accessible organizations:

SSTAR in Fall River, Mass has open walk-ins for everything except psychiatry. FQHC

Mass. General opened clinics in 7 locations—2 day supply bup + Narcan, followup

South Bay Community Services' Director, Duncan Speel: IOP with meals in the evening across the street from the methadone clinic. Access to Psychiatrist.

### Handoff to a name/a face NOT an organization

<https://buffer.com/library/best-profile-picture-science-research-psychology>

# Access to MAT, MH/Co-occurring Services

Pew Charitable Trust\*:

29.8 percent of rural Americans live in a county without a buprenorphine provider, compared with only 2.2 percent of urban Americans.

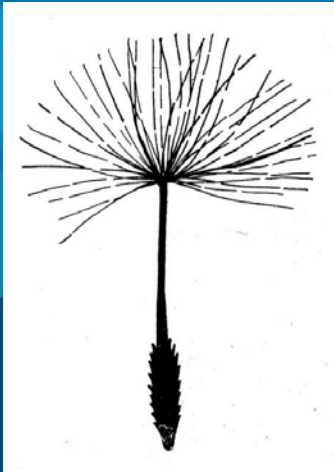
Haywood County Detention Center Behavioral Health Evaluations 2017:

- 48.1% had indications of possible PTSD.
- 34.6% reported a major depressive disorder in the past 2 months
- An additional 14.1% reported major depressive symptoms prior to that time.



\* *The Journal of Rural Health* 35, no. 1 (2018): 108-12, <https://doi.org/10.1111/jrh.12307>

## ***PART TWO:*** Working with the Inmate before Reentry



- A shared decision approach
- A relational opportunity to build or practice skills, priority identification, and planning
- A contextual approach to priorities

# Issues: Developing priorities and plans

## What are the priorities for the person?

- Housing
- Work/Money
- Transportation
- Anything Else?
- Recovery
- Medical/Psychiatric
- Supports
- Did we leave anything out?

# The contextual assessment

**Looking at the complexity without having to prioritize!**

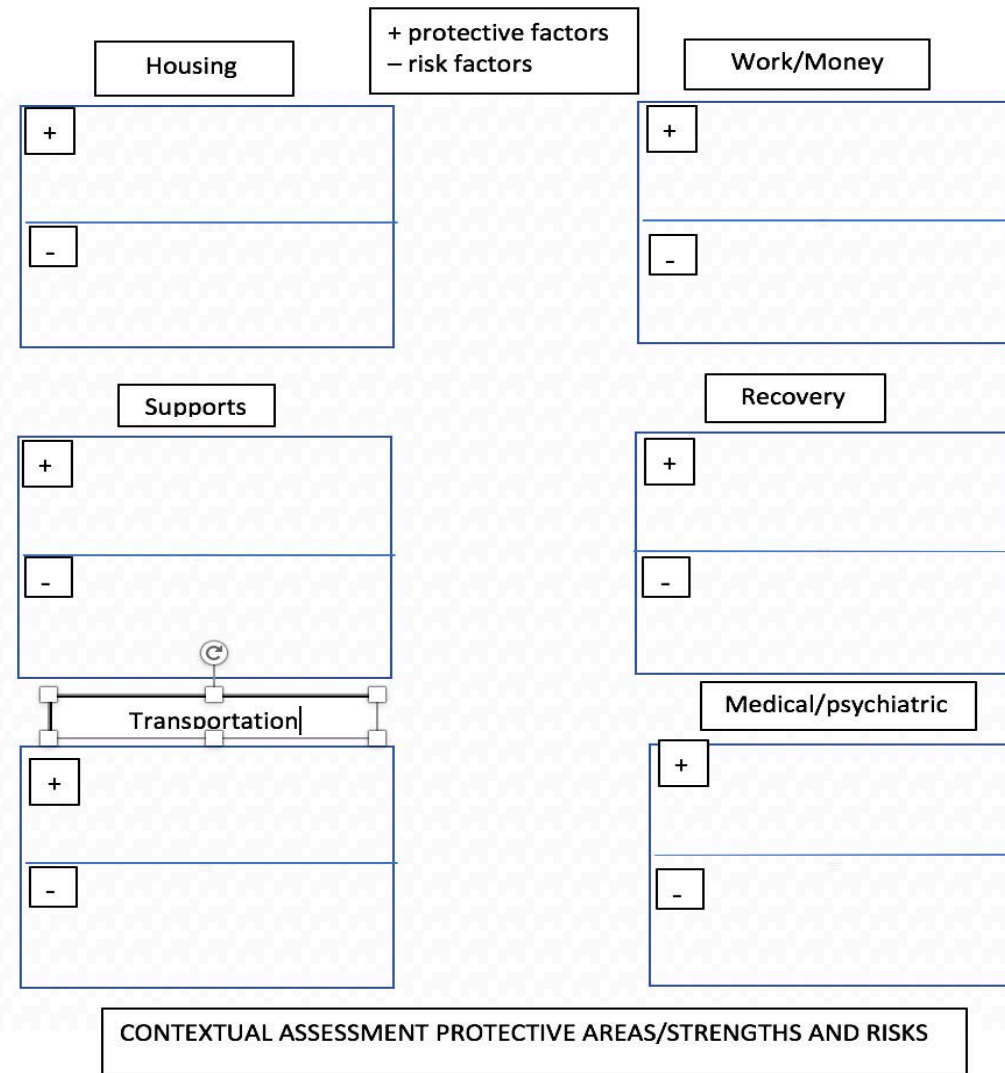
A picture versus a list. Visual versus words.

Looking for what are protective/strengths AND risks!

The real priorities are often not obvious, are uncool, are connected to inherent motivation.



# Housing Work/Money. Supports. Recovery. Transportation. Medical/Psychiatric: +Strengths -Risks



# PREPARE PLAN PRACTICE

**GIVE ASSIGNMENTS TO ENGAGE PERSON IN REENTRY**

A SHARED RESPONSIBILITY WITH STAFF = OWNERSHIP.

A CHANCE TO DISCARD BLIND ALLEYS.

A CHANCE TO BRING IN MORE COMPLETE INFORMATION!

A CHANCE TO ADDRESS FEAR DOUBT INSECURITY.

# Assignment Example: MAT WORKSHEET

1. Overdoses: How many have you had?

How many have you witnessed?

How many people do you know who have died as a result of an overdose?

2. Do you use an opiate with a drug, such as meth, cocaine, gabapentin, benzos?

3. Have you had a medical complication because of a substance?

4. How long have you used the drug/drink of choice? How old were you when you first used this drug/drink?

5. How long have you been abstinent in that time?

6. Have you tried methadone? Yes No.  
For how long?

Have you tried suboxone? Yes No. For  
How long?

Have you tried vivitrol? Yes. No. For  
how long?

Have you tried campral? Yes. No. For  
how long?

7. What is your strongest reason to try MAT?

# Motivation Shifts as Reentry and Use are possible

Progression and Regression:

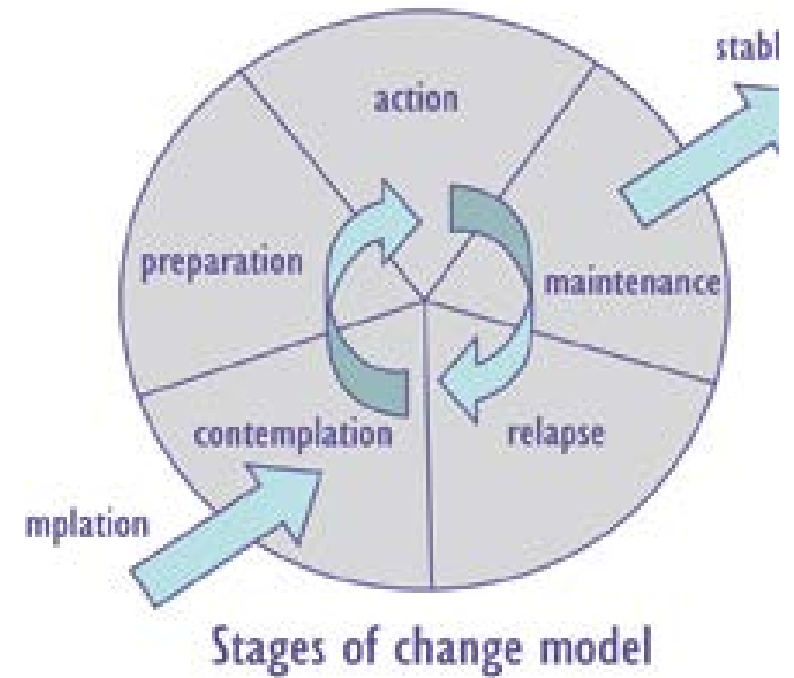
I am not coming back to this jail/prison

I hate the prison staff

Most of my fellow inmates are better than the staff

The food is bad

I can't wait to get out and use



# Opportunities: Investigate Motivation\*

Motivation is developed in childhood. A skill developed.



Carrots and sticks (rewards and threat of punishment) are external. They don't stick.

Motivation is best when it is based on internal drivers. [I feel safe when...I am happy outside...I need someone with me at all times].

Predictable rewards produce less neuronal stimulation over time, less dopamine and therefore, fade with time. Variable rewards may work better.

Because addictions hijack all motivation systems, it requires more than willpower to overcome—it is not a “failure of character”.

\* adapted from: <https://developingchild.harvard.edu/resources/5-facts-about-motivation-that-are-often-misunderstood/>

# Motivation

## IDENTIFYING SPECIFIC GOALS

Taking charge of the brain's reward system may start by redirecting it to something else it wants and then something else—

Taking control back from the drug reward requires

- 1) building in other rewards
- 2) noticing other rewards
- 3) a gratitude practice is an act of identifying rewards other than the addiction
- 4) tricking the “bored” brain by keeping it fresh.



# Assignment: Predicting and Planning for First day & First Week

## *Sf First day.*

1. Name BOTH tasks and rewards
2. Predict challenges and plan for them. 3. Hungry Angry Lonely Tired
4. Identify possible Solutions & Supports.

## *Sf First week.*

1. Name BOTH tasks and rewards
2. Predict challenges and plan for them. 3. Hungry Angry Lonely Tired
4. Identify possible Solutions & Supports.

# Opportunities: Family friends supports--modeling problem solving

## ISSUES

“They are using tough love with me and I can’t stand it.”

”Why don’t they trust me?”

“They enable me/I use with them.”

“They try to control me, I get angry and rebel”

“I just want .....

## OPPORTUNITIES

*Predict* issues.

*Enlist*: What has worked for you before? Who can help with this?

*Coach*: Would it be helpful if? Had you considered?

*Decide*: What is better for you at this time?



# Assignment: Recovery Contracts

**A safety plan to use with family, friends, sponsor, peer coach.**

**You decide WHO to share this with!**

1. Things I cannot do in safety:

2. Things that help me to stay safe from relapse:

3. If you see me doing these kinds of behaviors, I want you to help me in this way:

[Be specific so the person does the right thing by you. Include what you don't want!]

4. If I relapse, this is the help that I want, and here are the people to call to help me:

5. Here are the things I will do to take **responsibility** to stay in recovery:

Signature:

Date:

# Transitional Treatment Plan

**If successful, the plan will have some of these!**

Priorities identified by the individual in his/her language.

Reflect the motivations most important at this time.

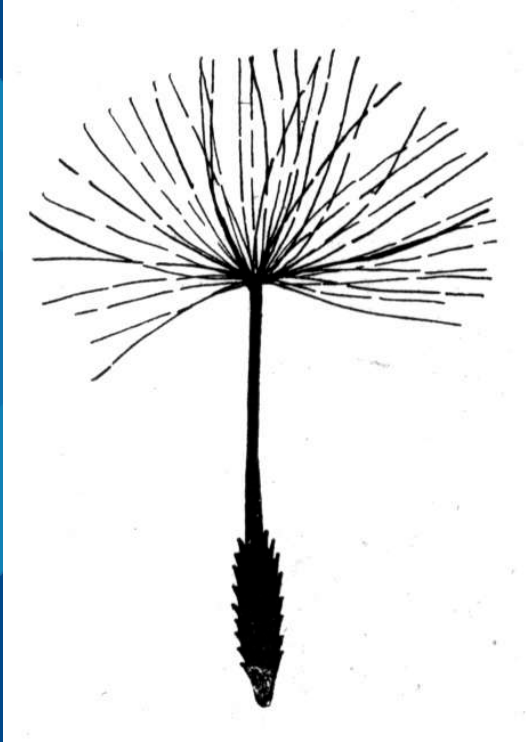
Be realistic and specific as to timing of goals.

Will Include short term/micro goals and the steps to get there:

Obtain work...but first get copy of birth certificate but first get ride, credit card.

Include safety and reset goals.





*Part Three: from reentry to return*

# Part Three: from reentry to return

## Challenges for providers:

*What we know:* SUD is characterized by chronic dysregulation of the brain's reward system. Relapse is common.

*What we want:* Quality life of recovery for the people we work with.

*What we feel:* discouraged, demoralized, overwhelmed, angry, shut down.

*What we think about:* what went wrong.....

But most intake and treatment plans do not review the issues in the return to custody.

SO: after you complete the paper work....

Try some reverse engineering.

Gather information to improve the effectiveness of your interventions.

What worked, what didn't work for each person.

## When Reentry becomes Recidivism: Try Reverse Engineering

What happened just before the relapse? What before before before.

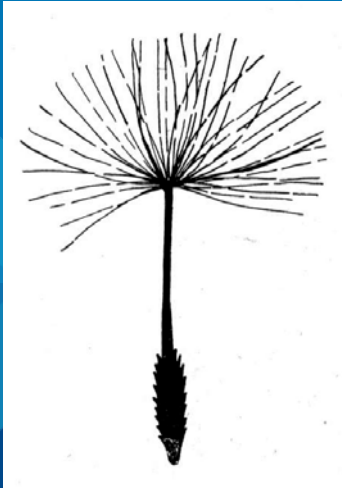
Try rescripting. What could have happened to help you make a different choice?

Look for inadequate skills, motivation, and set opportunities to practice same in this new treatment episode.

Make a treatment plan off of this.



# Finally.....



We are always planting seeds for the time when conditions improve, and the seed will grow.  
The seeds matter. We just don't know when.

# Questions?

Type your questions in the Q&A box on your screen

*Speaker Contact Info:*

**Tommie Bower**

**[tommiebower@gmail.com](mailto:tommiebower@gmail.com)**

# Certificate of Attendance

**Download Now!**

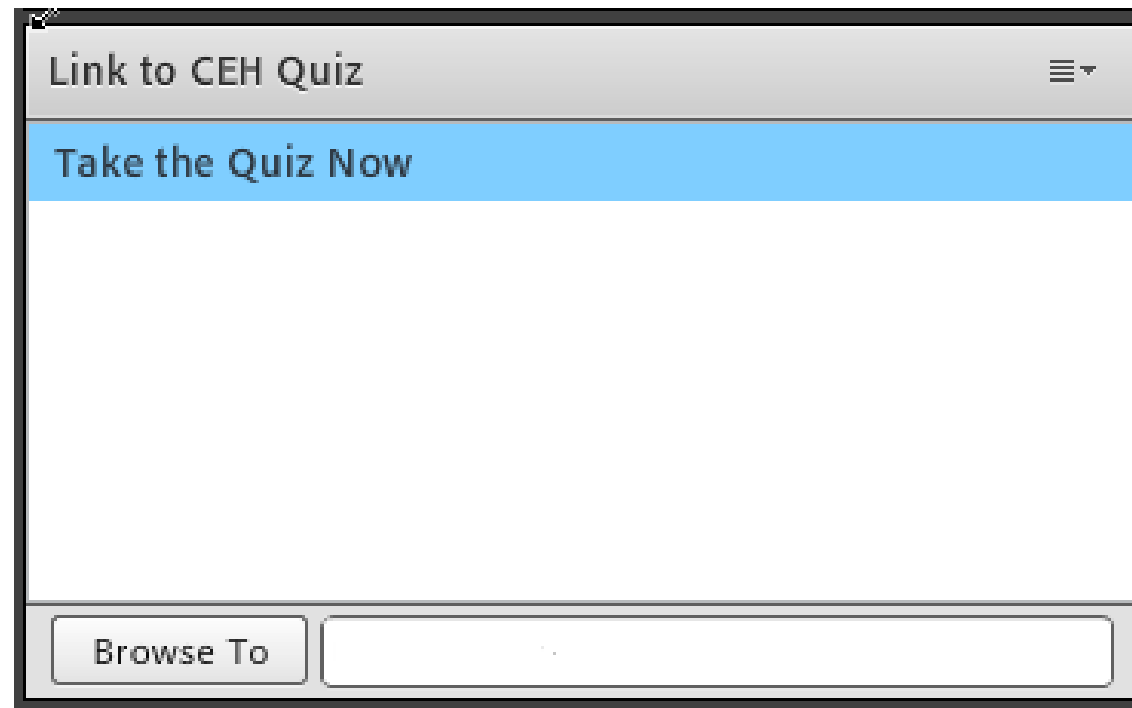
The screenshot shows a file manager window titled "Certificate of Attendance". It contains a table with two columns: "Name" and "Size". The table has one row with the file name "Download My Certificate" and a size of "1 MB". Below the table are two buttons: "Upload File..." and "Download File(s)".

Name	Size
Download My Certificate	1 MB



# Certificate of Continuing Education

- 1 NAADAC CEH
- Pass 10-question quiz with 7 correct answers
- Download certificate upon completion



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and technical assistance please visit:

<http://www.rsat-tta.com/Home>

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