The Intersection of Prevention, Treatment, & Recovery

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Goals

• The intersections between prevention, treatment and recovery approaches
• Common terms used in prevention, treatment, and recovery
• A more holistic approach to the continuum of care
• Specific ways in which prevention, treatment, and recovery practitioners can better support one another
What?
What is Prevention?

• It keeps something from happening!
  • It may keep something from **starting**
  • It may keep something from **getting worse**
  • It may **reduce the harm** or problems resulting from use
Goal of Prevention

Happy, healthy individuals and communities
What is Prevention?

Levels of Prevention

- **Policies and Systems**
  - Local, state, and federal policies and laws, economic and cultural influences, media

- **Community**
  - Physical, social and cultural environment

- **Organizations**
  - Schools, worksites, faith-based organizations, etc.

- **Relationships**
  - Family, peers, social networks

- **Individual**
  - Knowledge, attitudes, beliefs
What is Prevention?

Spectrum of Prevention

- Influencing Policy and Legislation
- Mobilizing neighborhoods and communities
- Fostering coalitions and networks
- Changing internal practices and policies of agencies and institutions
## What is Prevention?

<table>
<thead>
<tr>
<th>Primary Prevention</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Audience</strong></td>
</tr>
</tbody>
</table>
| **Purpose**                      | • Protect people from developing a SUD  
|                                  | • Protect people from experiencing consequences related to substance use |
| **Example**                      | • Informing people about the risks associated with taking opioids  
|                                  | • Changing policies, practices and laws that govern opioid sales |
What is Prevention?

<table>
<thead>
<tr>
<th>Secondary Prevention</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Audience</strong></td>
<td>People who have a higher or specific risk of developing a SUD</td>
</tr>
<tr>
<td><strong>Purpose</strong></td>
<td>Reduce the impact of a disease that may occur or is in its beginning stages</td>
</tr>
<tr>
<td><strong>Example</strong></td>
<td>SBIRT (Screening, Brief Intervention, Referral to Treatment)</td>
</tr>
</tbody>
</table>
**What is Prevention?**

**Tertiary Prevention**

<table>
<thead>
<tr>
<th>Audience</th>
<th>People who have a SUD</th>
</tr>
</thead>
</table>
| **Purpose**    | • Ending dependence and minimizing problems resulting from use  
                 • Harm reduction  
                 • Prevention of return to use |
| **Example**    | • MAT  
                 • Safe Needle Exchange  
                 • Enacting Good Samaritan Law |
Relationships with Treatment and Recovery

• Focus upstream
• Try to prevent the need for treatment and recovery services
• Competition for funding and attention
• Minimal connection with recovery community, often as a scare tactic
What is Treatment
Goals of Treatment (federal perspective)

• substantially reduce the treated individual's use of alcohol or illicit drugs—or end use altogether;
• substantially reduce—or end altogether—crimes by the treated individual against others;
• reduce the treated individual's specific educational or vocational deficits;
• restore or initiate legitimate employment of the treated individual;
• normalize or improve the treated individual's overall health, longevity, and psychological well-being;
• reduce specific drug injection practices and hazardous sexual behaviors

https://www.ncbi.nlm.nih.gov/books/NBK235499/
More Simply Put

- Improved individual’s (and families) health, longevity, and psychological well-being, quality of life and functional status
Treatment May Include Treatment?

• Counseling and other psychosocial rehabilitation services

• Medications

• Involvement with self-help (AA, NA, Al-Anon)

• Combinations of the above
What Is Treatment? (continued)

• Substance abuse treatment is provided within levels of care often available in multiple treatment settings.

• Level of care is determined by severity of illness: Is the patient a dependent or nondependent substance abuser, and are there medical or psychiatric comorbidities?

• Inpatient treatment is reserved for those with more serious illness (dependence, comorbidity).

• Most Treatment is facility based – Although this is rapidly changing
What is emerging

- Behavioral Activation Strategies (Treatment lite vs Treatment Potent)
- Technology Assisted Care
- Tele-behavioral health
Integrating Behavioral Activation = Treatment Potent

• Extending the clinical encounter to include negotiated and committed activities that the client will do in the community that the client is held accountable for doing
Technology Assisted Care

Technology based prevention, treatment and recovery support services as adjuncts can improve treatment satisfaction and outcomes

That is use of: Telephones, cell phones, smartphones • Computers, Laptops, and e-readers • Internet, streaming and mobile applications • Electronic health records • Clinical decision making and machine learning
Tele-behavioral Health

- Efficient, convenient for patients
- Important for rural/frontier patients
- Reduces cost
- Real-time access
- Real-time communication
**SOME DEFINITIONS OF RECOVERY**

**12-STEP (1935 - )*  
1. Abstaining from alcohol & other non-prescribed drugs. ** ***  
2. Attending mutual aid meetings.  
3. Committing to work the 12-steps & practice their underlying principles in all aspects of one’s life.**  

* Unofficial.  
** Not to be confused with Tradition 3, in which the only requirement to identify as a member of this society is a desire to abstain.  
*** Using prescribed opioid agonists (e.g. methadone, buprenorphine, Suboxone) is not considered recovery in Narcotics Anonymous.

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**CCAR (1999)**  
You are in Recovery if you say you are.  

**BETTY FORD INSTITUTE CONSENSUS PANEL (2007)**  
A voluntarily maintained lifestyle characterized by sobriety, personal health, and citizenship.

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**SAMHSA (2011)**  
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 RESEARCH INSTITUTE (2017)**  
The process of improved physical, psychological, and social well-being and health after having suffered from a substance related condition.
Multiple Paths of Recovery

12-Step Mutual Aid
- Several types (Drug Specific, Process Specific) (AA, NA, CA, DAA, OA, SAA, etc.)
- Follows a specific framework (e.g., the steps), worked with a sponsor
- Often requires acceptance of a “higher power”
- Most widely available in the United States

Non-Secular Mutual Aid
- Several types, most often broad focus in meetings on individual concerns or problems (Celebrate Recovery, Recovery Dharma / Refuge Recovery, etc.)
- Religious or spiritual framework; may contain formal process (i.e., step work) or be more informal
- May be specific to a particular religion or more holistic and non-denominational
- May be harder to find, though available in many areas

Secular Mutual Aid
- Several types (Drug & Process Specific) (SMART, SOS, LifeRing, etc.)
- Clear separation from religious or spiritual framework, largely based on self-awareness and thoughts, actions, and behaviors
- Progress completed individually or with “mentors” with experience in program
- May be harder to find, though available in many areas (especially large cities)

All Recovery Mutual Aid
- A specific meeting type that allows individuals using any pathway to connect and support each other
- Does not use any formal framework, can be viewed as “non-denominational” recovery meetings
- Available at many RCOs or RCCs, CRPs, or in communities with an active recovery advocacy group

Physical Activity Mutual Aid
- Often used in combination with another recovery pathway, though can also be engaged with by itself (Recovery CrossFit, Recovery Yoga, etc.)
- Support is received through connection to others with lived experience and using physical activity to improve health
- No formal framework in most, though some types such as recovery yoga, may involve sharing and processing
- Not available in many areas, most often found in larger cities

Medication Supported
- Several types that may use another pathway framework (i.e., 12-steps), but focus on support for individuals using medication (e.g., MAA, MARS, etc.)
- Often not its own “program”, but meetings and networks that offer support peer to peer from others using medication
- May be harder to find, though often available in larger cities

Harm Reduction Mutual Aid
- Mutual aid for individuals with or without a desire for complete abstinence (Harm Reduction Works, Moderation Management, HAMS, etc.)
- Formal framework for most types dependent on the Individual program chosen
- Not available in many areas

Natural Recovery
- A recovery path that does not involve formal support, but may rely on informal support
- Many individuals do not engage in a formal recovery path, but naturally recover
- Natural recovery may be associated with higher intrinsic and external recovery capital from other non-recovery specific sources

Recovery is the expectation, not the exception.
Recovery Support Services

1. Pre-Recovery
2. Recovery Initiation
3. Transition to Recovery Maintenance
4. Breaking Intergenerational Cycles of Addiction
5. Enhanced Quality of Personal & Family Life
A lot of the recovery support focus in terms of funding is tied to the treatment system. The risk with this narrow focus is that recovery support services will become solely a loosely attached appendage to addiction treatment. If that occurs, the movement to deliver recovery support services across the spectrum of problem severity and across the stages of recovery will have failed. Recovery support services will in that case have been colonized by the treatment system.
Recovery is Contagious

Increase recovery prevalence in local communities by expanding the local density of recovery carriers.
Recovery Ecology

The psychological, physical, & social space & landscape that supports recovery.
Intergenerational Recovery

Breaking intergenerational cycles of addiction & related problems...
Community Recovery

Sometimes, whole communities have been wounded & need healing.
What is the Current Relationship?

• Challenges
  • Lack of connection/knowledge about each other
  • Funding differences/Funding competition
  • Tension & lack of cooperation
What is the Current Relationship?

• Opportunities
  • Growing discussions about Prevention & Recovery and Harm Reduction & Recovery intersections.
  • Emerging connectivity through grant funding requirements, e.g. RCORP
  • Treatment incorporating peers
So What?
What is this Relationship’s Impact?

• Positive
  • Evidence/ Research in each that can be brought into the other areas
  • Bringing the disparate groups together increases the impact
  • Treatment culture is changing positively because of peers and more emphasis on continuing care versus acute care.
What is this Relationship’s Impact?

• Negative
  • Loss of primary prevention focus
  • Recovery started from scratch when it didn’t have to
  • Fears of Recovery getting colonized by Tx
  • Toe stepping
  • Treatment gets left out
Now What?
What can we do to capitalize on opportunities & address challenges?

- With which sector do you primarily identify?
- What is the Prevention, Treatment, & Recovery common goals?
- What is one thing you can do when you go home to make this a little better?
Thank you

The purpose of RCORP is to support treatment for and prevention of substance use disorder, including opioid use disorder, in rural counties at the highest risk for substance use disorder.

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